

**Community and Clinical Health Services
Division Director Staff Report
Board Meeting Date: December 18, 2025**

DATE: December 4, 2025

TO: District Board of Health

FROM: Christina Sheppard, APRN
775-328-2477; csheppard@nmph.org

SUBJECT: Community and Clinical Health Services – Divisional Update – Overview of Reproductive and Sexual Health Services; 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

1. Divisional Update

a. Overview of Reproductive and Sexual Health Services

The Family Planning Sexual Health Clinic (FPSHC) provides accessible, client-centered reproductive and sexual health services to individuals across our community. Our clinic's mission is to reduce barriers to care, support informed decision-making, and promote overall health and well-being through education, prevention, and high-quality clinical services.

- **Inclusive Services:** The FPSHC serves all community members, including uninsured, underinsured, and undocumented individuals, as well as LGBTQ+ populations. Services are available to all ages, abilities, gender identities, and regardless of residency or documentation status.
- **Low-Cost Services:** No one is refused services due to inability to pay. Fees are based on income and family size, with special provisions for teens seeking confidential care.
- **Confidentiality:** All services are confidential, and those aged 12–17 years old do not need parental consent for services. Staff are mandatory reporters for abuse or neglect.
- **Accessible Services:** Walk-in appointments are available Monday – Friday. The FPSHC is the only clinic in the community providing walk-in appointments for sexual and reproductive health services.

Client Demographics

Unduplicated Client Visits 12/1/2024 – 11/30/2025

Age Group	Number of Unduplicated Client Visits	Percentage
19 years old and younger	172	7.9%
20-29 years old	763	35.1%
30-39 years old	622	28.5%
40 years old and older	621	28.5%
Total	2178	

Insurance Coverage Status 12/1/2024 – 11/30/2025

Type of Insurance	Number of Clients	Percentage
Public Health Insurance (Medicaid)	423	19.4%
Private Health Insurance	746	34.2%
Uninsured	1009	46.3%

Core Services

Reproductive Health Services

Contraceptive Counseling and Provision of Methods:

- **Counseling:** Contraceptive counseling is offered on all methods of birth control, including condoms (internal and external), contraceptive implants, intrauterine devices (IUDs), injectable contraceptives, contraceptive pills, patches, and rings, emergency contraception, natural family planning methods, and permanent methods of sterilization.
- **Onsite Methods:** Methods available onsite include condoms, contraceptive implants, IUDs, injectable contraceptives, contraceptive pills and rings, and emergency contraception. Most methods can be started on the same day the client is seen.
- **Referrals:** Vasectomy services are available for clients without insurance through an agreement with UNR Family Medicine. Clients receive counseling on vasectomy benefits, risks, and pre- and post-procedure instruction. After the initial counseling, clients are then scheduled with UNR Family Medicine, where the procedure is performed.

Preventive Services:

- **Breast & Cervical Cancer Screening:** Well-person visits including screening services for cervical and breast cancer. Clients with abnormal results are referred to specialty providers. The FPSHC participates in the Women's Health Connection program. Women's Health Connection is

a state-sponsored program that provides breast and cervical cancer screening to low-income women ages 21-64.

- **Immunizations:** Immunizations offered against vaccine-preventable diseases include HPV, Tdap, Hepatitis A & B, and influenza (seasonal).

Sexual Health Services

Testing, Treatment, and Prevention for Sexually Transmitted Infections (STIs):

- **Testing:** The FPSHC provides testing for all STIs, including chlamydia, gonorrhea, syphilis, trichomonas, herpes simplex virus, and mycoplasma genitalium. In-house testing is available for urogenital chlamydia, gonorrhea, and syphilis. In-house testing has several advantages, including clients having results the same day and immediate treatment for a positive test. The FPSHC implemented in-house chlamydia and gonorrhea testing in March 2024 and in-house syphilis testing in February 2025. The FPSHC also provides testing and treatment for sexually associated infections including urinary tract infections and vaginitis.
- **Treatment:** Treatment for all STIs is available onsite. This eliminates the barrier of clients having to travel to a pharmacy to pick up their medications. The FPSHC is one of the few clinics in the community offering the recommended treatment for syphilis due to the cost of the medication. Additionally, the FPSHC offers partner-delivered therapy for chlamydia, gonorrhea, and trichomonas. Partner-delivered therapy is the clinical practice of providing patients diagnosed with STIs like chlamydia or gonorrhea with medication to deliver to their sexual partners, without the partner needing to be examined by a healthcare provider first.
- **Prevention:** Providers perform a comprehensive sexual health history and provide client-centered risk reduction counseling, which may include condom use, limiting the number of sexual partners, knowing the testing status of partners, and biomedical prevention interventions. Biomedical interventions offered for prevention include Doxy PEP. Doxy PEP (doxycycline post-exposure prophylaxis) is a strategy where a single 200 mg dose of the antibiotic doxycycline is taken within 72 hours after sex to reduce the risk of acquiring syphilis, chlamydia, and, in some cases, gonorrhea. In addition to the vaccines previously mentioned, the FPSHC also offers the mpox vaccine for clients with epidemiological risk factors.

HIV Testing & Prevention Services:

- **HIV Testing:** The FPSHC provides in-house HIV testing with results in 20 minutes.
- **PrEP:** HIV pre-exposure prophylaxis (PrEP) is the use of medications to prevent HIV. It helps people stay HIV-negative even after potential exposure. PrEP comes in two forms an oral pill taken once daily or an injection. The FPSHC currently offers oral PrEP onsite and is in the planning stages of implementing injectable PrEP.

- **PEP:** PEP (post-exposure prophylaxis) is a short-term antiretroviral treatment taken within 72 hours after potential exposure to HIV to prevent infection. It must be taken daily for 28 days and is intended for emergency situations, not regular use. Clients receiving PEP are then counseled on transition to PrEP for HIV prevention.
- **Rapid Start:** For clients with a positive HIV test, rapid initiation of antiretroviral medications is available. Rapid initiation of antiretroviral therapy (ART) refers to starting HIV treatment as soon as possible after diagnosis, ideally on the same day or within seven days, to improve health outcomes, reduce HIV transmission, and accelerate viral suppression.

Collaboration

The FPSHC collaborates with several disciplines to provide comprehensive services. Clinic staff work closely with Community Health Workers and refer clients who need primary care providers, referrals to specialty health care providers, health insurance, mental health resources, or other social services, such as food or housing assistance. Representatives from Medicaid and Access to Health are on-site weekly to assist clients with enrolling in a health insurance program.

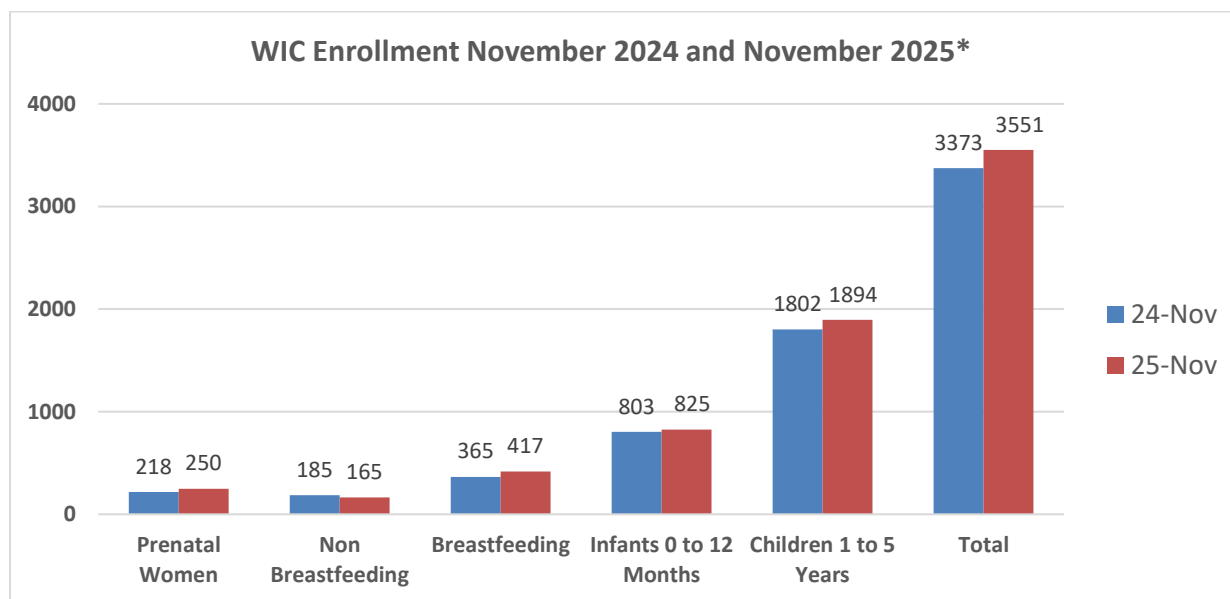
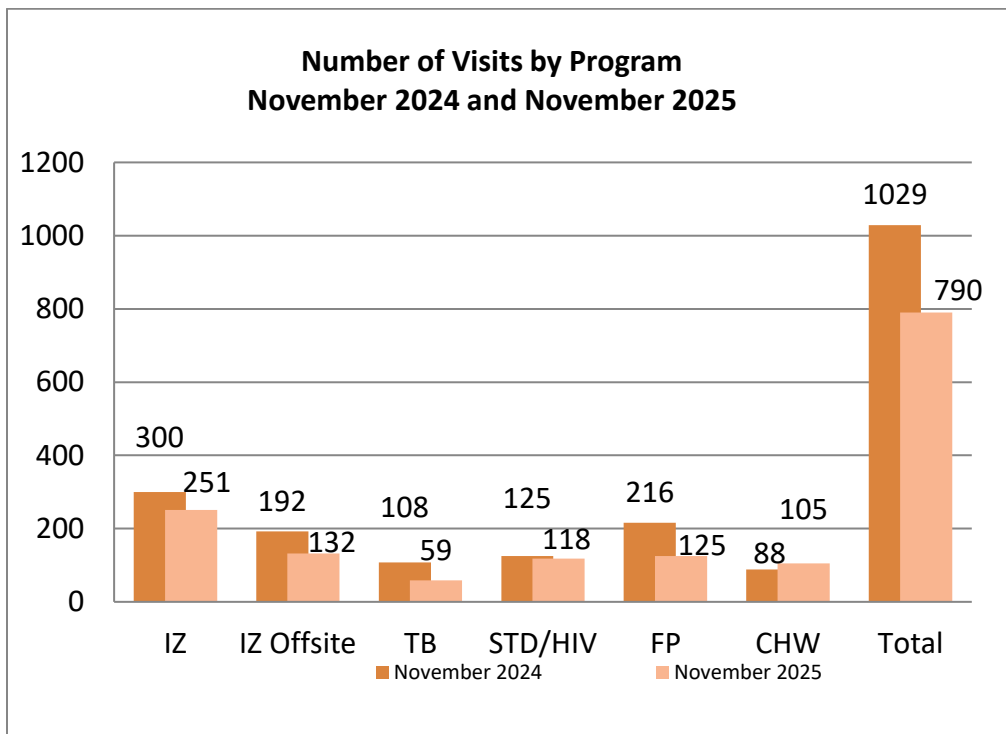
Clinic staff continue to work closely with Population Health's Sexual Health team to ensure clients are receiving access to timely testing and treatment. Public Health Nurses (PHNs) coordinate with Public Health Investigators to provide STI treatment to clients who are unable to attend clinic appointments. PHNs also provide HIV Partner Services testing.

After the reorganization, PHN staff assumed the responsibility of coordinating community testing. Community testing is offered weekly at the Washoe County Sheriff's Detention Center and Our Center, and monthly at Eddy House.

Challenges

The funding outlook for the FPSHC remains uncertain, resulting in vacant positions. Currently, six positions are unfilled, resulting in reduced service availability, including a two-week wait for scheduled appointments and limited walk-in access. Staff have implemented several strategies to increase appointment availability, such as expanding appointment types for the PHN, but demand remains high due to limited alternative services in the community. In October, approval was granted to fill one of the vacant APRN positions, and Human Resources anticipates opening recruitment in December. Continued staffing challenges, however, will likely impact the clinic's ability to meet community needs in the near term.

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
Nov 2024	3373	3061
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
Monthly avg	3491	3153
% change Nov 2024 / Nov 2025	5.28%	3.63%

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 eligible for the Vaccines for Children (VFC) program, as well as uninsured or underinsured adults. The program also serves a significant number of insured individuals, both adults and children.

Walk-ins are accepted daily in the on-site clinic in addition to scheduled appointments. In November, clinical staff vaccinated a total of 239 clients with 563 vaccination doses.

NNPH continues to provide RSV vaccination for infants in their first RSV season and Flu Vaccinations for all ages 6 months and older. There is a continued need to provide the 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 November, NNPH provided 110 flu, 8 RSV for infants, and 95 COVID doses to clinic clients.

In addition to clinic vaccine administration, staff continue to headline limited community outreach events. In November, staff participated in the Harvest of Health Resource Fair at NNPH, a Flu Point-of-Dispensing (POD) Exercise with Population Health, and events at Eddy House and Mobile Harvest, all of which provided influenza vaccines and some COVID vaccines for adults. Partners included Population Health, Unitek School of Nursing, local fire response, Medical Reserve Corps, and multiple vendors. The team has three events scheduled for December, including a return to the Eddy House and Mobile Harvest, and is also exploring additional opportunities for future events.

The NNPH Immunization team continues to provide State Opioid Response (SOR) vaccines. This funding source supplements the existing 317 vaccine resources, enhancing vaccine availability for uninsured and underinsured adults. Staff anticipates that this additional funding source will continue to help adults in the community by providing more free vaccines for those without insurance or who pay out of pocket.

Program staff continue to develop, manage, and report on 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 nine compliance visits, eleven 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 doses to accommodate provider orders and supplement delays in the receipt of VFC influenza vaccine in the community. Of note, the NNPH team facilitated training with Carson City's Health and Human Services and Central Nevada Health District's IQIP staff.

In November, Kelissa Shirane, Public Health Nurse II, began dedicating 10 hours per week to the FIMR program. To support this transition, a portion of her responsibilities has been reassigned to other staff members.

- 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 two active TB cases, one 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 November 2025, 35 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 23 clients for latent TB infection (LTBI). In November 2025, five initial LTBI evaluations were completed, and two 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. Sixty-four positive lab reports were reported in November.

- c. **Reproductive and Sexual Health Services** – The Family Planning Sexual Health Program (FPSHP) continues to deliver high-quality, accessible reproductive and sexual health care to the community. During November, the clinic received grantor approval to purchase Ovulation Test Kits to distribute to clients who desire pregnancy or are undergoing an initial infertility assessment. The program's Clinic Assistants have completed their required hours and have received their Dispensing Technician Licenses from the Nevada State Board of Pharmacy.

In October, the program received approval to recruit for the vacant Advanced Practice Registered Nurse (APRN) position. In November, Human Resources determined that a formal recruitment process would be required to fill the role. Once hired, this addition will increase the clinic's APRN staffing to 2.5, significantly enhancing service capacity. The clinic remains hopeful that the position will be filled by January 1, 2026.

- 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 45 open cases involving children under the age of six. These activities are funded by a CDC grant, 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, ensuring that all infants receive the second newborn screening as required.

In November, NNPH CHWs assisted nine individuals through the Cribs for Kids program. The program hosted an English class on November 12th and a Spanish class on November 26th. The program saw a rise in participation, in part, due to the Children's Cabinet Cribs for Kids program being unavailable due to staffing issues, as well as the Anthem Wellness Center's provision of free diapers to the community with no eligibility requirements. 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 meets monthly, excluding June and December. Each meeting typically includes the review of an average of four cases. In November 2025, the team met with 15 participants and reviewed four cases. Coordinators reminded agencies to participate in Nevada 211. Additionally, NNPH staff continue to support the Washoe County Community Child Death Review process by providing updates on fetal and infant deaths when requested. These meetings are held every other month, with the most recent one taking place on October 3, 2025.

The Northern Nevada Maternal Child Health Coalition continues to serve as the Community Action Team supporting the implementation of recommendations from the CRT. The Coalition met on November 13 and received a presentation by Jorge Montano-Figueroa, Pediatric Injury Prevention Specialist and Safe Kids Washoe County Coordinator at Renown Children's Hospital, titled "Pediatric Injury Prevention: Hot Topics and Trends."

- e. **Women, Infants, and Children (WIC) – Uncertainty in WIC continued into November before the shutdown ended**, and news of full funding for WIC was received in mid-November.
- 11/5 – news that WIC is funded through the end of November with additional funds from Section 32 Tariff funds
 - 11/13 – news that WIC will be fully funded through the rest of the 2026 federal fiscal year (Oct 2026 grant cycle)

WIC services continued as normal during the shutdown, except for IBCLC (lactation consultant) services. With no guarantee of funding, all NNPH WIC intermittent hourly (IH) staff were put on hold, including the WIC lactation consultant who normally provides services twice a week for NNPH WIC. WIC IH staff are scheduled to resume supporting the program in December 2025.

SNAP is a different nutrition program from WIC, but some families that qualify for both programs receive both SNAP and WIC benefits to help meet their nutritional needs. Nevada has provided full SNAP benefits to SNAP recipients in November, but during the shutdown, WIC clients expressed concern about feeding their families. In an informal survey of WIC staff experiences with clients during the shutdown:

- 83% of staff reported that WIC families on SNAP inquired about additional food assistance or additional WIC foods.
- 50% of staff reported that families requested additional formula.
- 17% reported barriers to getting to food banks or additional food resources.
- 25% reported an increase in new applications to WIC.

As part of shutdown preparations, the WIC team developed a resource list focused solely on food, formula, and lactation services. The information will continue to be used with WIC clients as needed.

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

Client Navigation Services - In November, CHWs assisted 105 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 - November 2025

In November 2025, the Community Health Workers (CHWs) conducted three outreach events serving a total of 161 individuals, focusing on low-income families and youth in transition. The largest event, "Harvest of Health" at NNPH on November 4, provided a wide range of services, including dental care, wellness programs, food distribution, mental health support, vaccinations, and screenings. Two additional events at Eddy House targeted youth in transition: a vaccination clinic on November 19 offering flu and COVID-19 vaccines, and a reproductive health outreach on November 25 providing STI testing, birth control, and PrEP consultations. These efforts aim to improve access to essential health and wellness resources in underserved communities.