

Population Health Division Division Director Staff Report Board Meeting Date: November 20, 2025

DATE: November 13, 2025

TO: District Board of Health

FROM: Nancy Diao, ScD, PHD Director

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SUBJECT: Population Health – Epidemiology, Statistics and Informatics, Public Health Preparedness,

Emergency Medical Services, Vital Statistics, Sexual Health Investigations and Outreach,

Chronic Disease and Injury Prevention

Epidemiology Program

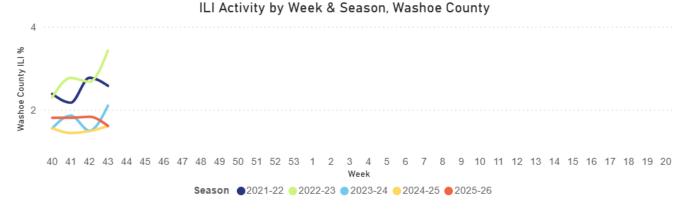
Respiratory Virus Surveillance

The 2025-2026 Respiratory Season began in MMWR Week 40, September 28th, 2025. Weekly respiratory updates are distributed and accessible through the 2025-2026 Respiratory Virus Surveillance Dashboard: Respiratory Virus Surveillance Program

The Annual Influenza Hospitalization and Mortality Dashboard (for the 2024-2025 Respiratory Season) can be found here: Access the Annual Influenza Hospitalization & Mortality Dashboard

Influenza-like Illness –Figure 1 provides a snapshot of the percentage of patients presenting to sentinel surveillance providers in Washoe County with influenza-like illness (ILI) defined as fever ($\geq 100^{\circ}$ F [37.8°C]) and cough and/or sore throat for the 2021 through 2025 seasons.

Fig 1. ILI Activity Reported by Sentinel Providers, Washoe County, 2021-2025 Seasons†



[†] Does not have a week 53, so the week 53 value is an average of week 52 and week 1.



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Respiratory Syncytial Virus (RSV) – RSV is a common respiratory virus that can present with flu-like signs and symptoms (e.g., fever, coughing, runny nose). RSV, while usually presented with mild symptoms, can be serious, especially for infants and older adults. Figure 2 provides a snapshot of the RSV case rate per 100,000 by MMWR week in Washoe County for the 2021 through 2025 seasons.

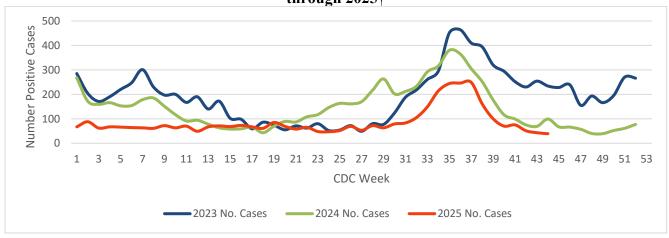
Fig 2. RSV Case Rate per 100,000 Population by Week Reported, Washoe County, 2021-2025 Seasons†



† Does not have a week 53, so the week 53 value is an average of week 52 and week 1.

SARS-CoV-2 (COVID-19) – In September, 772 COVID-19 cases were reported; in October, 240 COVID-19 cases were reported (data as of 11/03/25). Figure 3 provides an overview of the total number of confirmed COVID-19 cases in Washoe County by MMWR week following calendar years starting in 2023. Cases of COVID-19 surged in August and September, averaging greater than 40 cases per 100,000 residents per week for several weeks in a row. Since mid-September, rates have trended downwards. As of MMWR week 44, the average case rate was less than 20 cases per 100,000 residents. This pattern reflects the typical surge in late summer, followed by decline, in the same timeframe for previous years.

Fig 3. Total Number of COVID-19 Cases by Week of Report Date in Washoe County from 2023 through 2025†



[†] There is no MMWR week 53 in 2023 or 2024. Note: Data are displayed by calendar year.

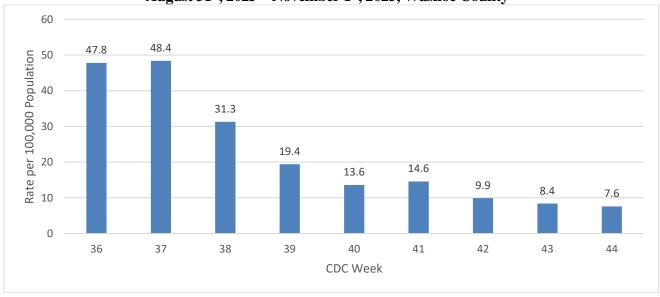


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Figure 4 illustrates the number of new cases by report date per 100,000 population over a nine-week period spanning August 31st, 2025, through November 1st, 2025. As of MMWR week 44, Washoe County received reports of 7.6 new cases per 100,000 population.

Fig 2. Newly Reported COVID-19 Cases Per 100,000 Population by MMWR Week August 31st, 2025 – November 1st, 2025, Washoe County



Outbreaks – There have been 6 newly declared outbreaks in October 2025; zero (0) influenza confirmed, zero (0) respiratory illness of unconfirmed etiology, zero (0) COVID-19, two (2) gastrointestinal, zero (0) hand, foot, and mouth disease, four (4) rash illness of unconfirmed etiology, and zero (0) other.

Table 1: Number of Outbreaks Declared by Type and Month, 2025												
Type	Jan	Feb	March	April	May	June	July	Aug	Sept	Oct	Nov	Dec
Gastrointestinal Illness	1	4	1	3	3	1	2	3	4	2		
Respiratory Illness	11	19	1	2	1	0	0	2	2	0		
Influenza Confirmed	1	0	0	0	0	0	0	0	0	0		
COVID-19 Confirmed	0	0	0	0	0	1	0	3	2	0		
Rash Illness	3	4	6	3	4	3	3	2	4	4		
Other	0	2	0	1	0	0	0	0	2	0		
Total	16	29	8	9	8	5	5	10	14	6		

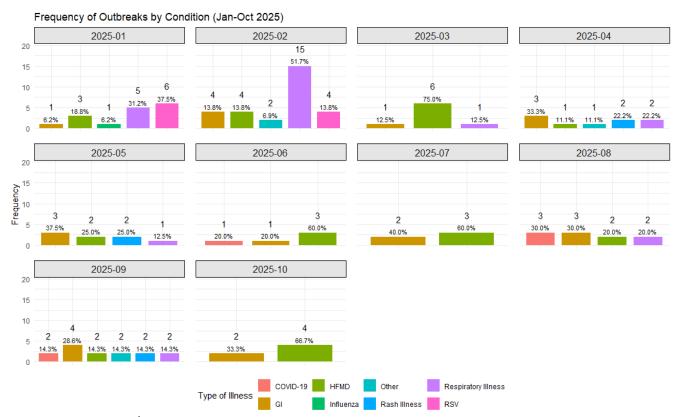
Note1: Data obtained as of November 3rd, 2025, at the time of this report, and will be revised in the next report if there are updates. Note2: Respiratory illnesses include RSV outbreaks. Note3: 'Other' in February 2025, April 2025, and Sept 2025 includes outbreaks with multiple etiologies.



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Fig 3. Monthly Outbreaks by Condition from January 1, 2025, to October 31st, 2025, in Washoe County



Note 1: Data as of Sept 30th, 2025.

<u>Epi News</u> – 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 October, there were two (2) Epi News newsletters published:

- Quarterly Communicable Disease Reporting and Statistics: 2025 Q3: This Epi News is a quarterly report published after data collection was completed for the 3rd quarter of 2025 (July September). It includes summary statistics of reportable conditions by case count and the percentage change compared to previous years in the same quarter. These data provide information relevant to the public about the type of disease investigations and landscape of cases in Washoe County, and it releases details regarding any trends in the rise or fall of incidence among residents.
- Hand, Foot, and Mouth Disease: This Epi News details the epidemiology and symptoms of HFMD, a contagious viral infection most common in children under five years old. With schools back in session, including after-school activities, there is increased likelihood of person-to-person transmission in childcare or group settings. These surges have been observed locally and across



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other states, so information about prevention, identification, and testing/diagnostics are communicated in this release. Outbreaks of HFMD are reportable in Nevada.

Other Reports – NNPH has been conducting Carbapenemase Producing Organisms (CPO) surveillance since 2010. Each year, NNPH publishes CPO/CRO surveillance reports to inform local health professionals and state partners of CPO/CRO activity in Washoe County. The 2025 Quarter 3 Community-wide Carbapenemase Producing Organisms Statistical Report has been published and is available at: CPO and CRO Surveillance

<u>General Communicable Diseases</u> – During September 2025, there were 151 positive labs reported, with 34% resulting in a confirmed, probable, or suspect case. During October 2025, there were 170 positive labs reported, with 43% resulting in a confirmed, probable, or suspect case.

Epidemiology Program Cross Divisional Projects –

Extensively Drug-Resistant Organisms (XDRO) database — The Epidemiology Program, in collaboration with Tech Services (TS), developed the XDRO database to store and track cases of carbapenemase-producing organisms (CPO) and Candida auris (C. auris) reported in Washoe County — two pathogens of concern for healthcare-associated infections. The database is also designed to alert participating hospitals when an admitted patient has a history of CPO or C. auris. To enable these alerts, the Epidemiology Program and TS are working with hospital staff to securely connect admission data feeds to the XDRO system. Currently, two area hospitals are fully onboarded and receiving alerts, with one in active testing and one preparing to test.

<u>Foodborne Disease Detection Database (FD3)</u> – FD3 is designed to fuel more rapid identification of potential outbreaks and improve trend data for foodborne illnesses. REDCap, a secure, web-based application, is the new electronic record system housing FD3. Migration of case report forms is underway, with the purpose of enhancing disease surveillance and epidemiological investigations. There are currently several conditions (e.g., salmonella) programmed into the system, with modification and testing underway to verify operability. A total of 10 conditions is being programmed in Phase 1. The system development is currently on hold due to the REDCap system being inoperable due to the cyberattack in the State of Nevada.

Animal Bite Reporting – Bites from rabies-susceptible animals are a reportable condition under NAC 441A. The Epidemiology Program is responsible for tracking potential exposures to rabies for humans, which requires intricate coordination within and between Washoe County agencies to (A) increase accessibility of reporting by stakeholders, (B) streamline communication channels between interdepartmental partners, and (C) improve system capacity through electronic data capture. The Epidemiology Program input the baseline metadata into REDCap. The team modified the Case Report Form (CRF) for people with suspected exposures to rabies, standardized programmatic metrics, and expanded data capture for more rapid and accurate disease surveillance. This form has already undergone several rounds of testing to verify usability and validate workflows, and epidemiologists are collaborating with the Statistics and Informatics Program to link dummy



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data to an internal dashboard as a prototype. The overall objective is to expedite comprehensive public health response for timely assessment of prophylaxis recommendations, resulting in near-real-time analysis for crossagency management. The system development was on hold in September and October due to the REDCap system delays due to the cyberattack in the State of Nevada.

Sexual Health Investigations and Outreach

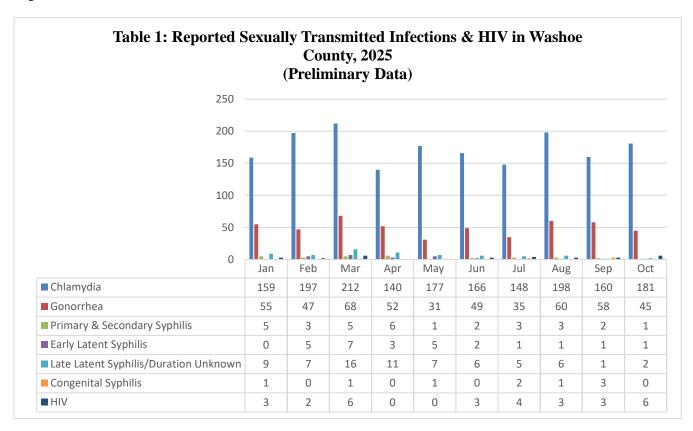
The program is working with Population Health's Statistics and Informatics team to automate reporting of performance measure data and individual staff workloads. An internal dashboard is being created to provide weekly reporting on the number of cases per infection for each Public Health Investigator (PHI). The strategic planning measures such as initiating a case investigation within five (5) days and closing cases within thirty (30) days for chlamydia and gonorrhea cases and sixty (60) days for syphilis cases will be included. This change will allow staff to see their individual contributions to the program's performance measures. In addition, the program Supervisor and Epidemiologist will assess caseloads per PHI and adjust assignments accordingly.

During the state systems cyberattack, staff did not have access to HIV laboratory data to process laboratory reports and determine if there were any new HIV infections for over seven (7) weeks. Access was restored October 8, 2025, with limited function and gradually returned to full function. HIV PHIs have been processing the backlog and identified two (2) HIV cases that were delayed in reporting to NNPH. This lapse led to subsequent delays in case investigation initiation. Education to the reporting providers on the requirement to submit provider reporting forms in addition to the laboratory reporting will be conducted. Those cases were included in the October case number reporting below. Table 1 summarizes cases reported on the calendar year through October 2025. Case counts are dynamic depending on stage of investigations. Most chlamydia and gonorrhea investigations are closed within 30 days of report and syphilis investigations within 60 days of report, with the goal of 80% case closures during those timeframes.



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Public Health Preparedness (PHP) Program

PHP and Community and Clinical Health Services (CCHS) are currently planning the annual Influenza Point of Dispensing (POD), scheduled for Saturday, November 15, 2025. This event will serve as an exercise to test mass dispensing and POD operations. The midterm planning meeting was held on October 15, 2025. NNPH is partnering with Unitek Nursing College to provide approximately twelve (12) nursing student vaccinators, and both Reno Fire and Truckee Meadows Fire Protection District will participate.

Northern Nevada Adult Mental Health Services (NNAMHS) conducted its annual Influenza Vaccine POD on October 1, 2025. PHP supported the walk-through POD through planning and by providing the NNPH POD trailer. NNAMHS vaccinated one hundred twelve (112) individuals, administering ninety-seven (97) doses of Fluarix and fifteen (15) doses of Fluzone High-Dose.



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On October 8, 2025, PHP offered NIMS-ICS for Real World Response training to the Medical Reserve Corps (MRC), Community Emergency Response Team (CERT), and NNPH staff. The session was conducted by the Washoe County School District Emergency Manager, with twelve (12) MRC and CERT volunteers in attendance.

Beginning in October, PHEP staff started meeting with local POD partners to update private POD plans and Memoranda of Understanding. NNPH's private POD partners include organizations in healthcare, utilities, local jurisdictions, schools, and EMS. These partners coordinate with NNPH during medical countermeasure emergencies that require the rapid distribution of life-saving medications to the community. The partner POD plans enable these agencies to receive medical countermeasures from NNPH and distribute them to their staff and families, supporting continuity of operations by ensuring employees are protected and able to work during emergencies. Meetings have been held with Renown, NV Energy, REMSA Health, and the Washoe County School District, with additional meetings scheduled through November.

In partnership with the Texas A&M Engineering Extension Service (TEEX), PHP and HPP hosted the PER-320: Personal Protective Measures for Biological Events course on October 9, 2025, at the Regional Emergency Operations Center (REOC). The course addressed challenges faced by first responders and healthcare professionals in both prehospital and hospital settings regarding the use of Personal Protective Equipment (PPE) and contamination management during highly infectious disease events. Participants, including several hospital and CERT partners, received an overview of PPE and engaged in hands-on activities for donning and doffing Level C PPE, performing technical decontamination, and reviewing various decontamination methods.

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

To strengthen healthcare and community-based organizations, exercise engagement remains a key priority. Tailored exercise packets have been developed and will be distributed throughout the year to ensure partners are equipped to participate meaningfully in preparedness activities. The Great ShakeOut, an annual nationwide earthquake drill, was held on October 16, 2025. An accompanying exercise packet was provided to support



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partners in mitigating the impacts of earthquakes, which were identified as one of the top threats to healthcare in Washoe County based on the FY25 Hazard Vulnerability Analysis (HVA). In recognition of National Cybersecurity Awareness Month, the coalition shared an email with partners containing two short, discussion-based exercises aligned with the Cybersecurity Performance Goals (CPGs) outlined by Cybersecurity and Infrastructure Security Agency (CISA). These activities could be completed at each facility's own pace, accommodating staffing and time constraints. Both the exercise packets and email-based drills help facilities build preparedness and contribute to overall community resilience without requiring off-site participation.

The FY26 HPP Capability Assessments concluded on September 9, 2025, achieving a 48% response rate, exceeding the coalition's goal of 38%. Assessment results are currently under review. HPP staff will meet with each provider type at the end of October and throughout November to review findings. These results will guide FY27 priorities and provide data-driven recommendations for exercises, training, and plan updates.

The FY26 Hazard Vulnerability Analysis (HVA) concluded on October 14, 2025. Results will be compiled in the coming weeks to create an aggregated dataset identifying the top hazards and threats to healthcare in Washoe County.

Annual review meetings for the Multi-Casualty Incident Plan (MCIP) and Alpha MCIP have been scheduled with partners and stakeholders, with the first meeting held on October 21, 2025. FY26 revision priorities include strategies for managing self-transports, burn-specific mass casualty incidents, and simultaneous events occurring at multiple locations within the county.

HPP staff also continue to participate in the weekly Hospital Net ham radio communications drill, which includes hospitals across Northern Nevada and Eastern California. This ongoing activity supports redundant communication capabilities that are essential for effective coordination during disasters.

Emergency Medical Services (EMS) Oversight Program

<u>Franchise</u> - The EMS Oversight Program continues to coordinate with REMSA Health to review and make revisions to the Amended and Restated Franchise for Ambulance Service. This collaboration ensures that franchise updates align with current operational standards, regulatory requirements, and the needs of the Washoe County community.

EMS QA/QI – Joint Advisory Committee members convened in October to discuss a list of reporting elements for EMS quality improvement project. The oversight program introduced thirty-nine (39) possible reporting elements derived from National Emergency Medical Services Information System, Get With The Guidelines–Stroke and Cardiac Arrest Registry to Enhance Survival databases aim to advance regional objective of providing an agency-blinded, patient-focused measures of the EMS system in Washoe County. The quality improvement project was proposed to have objectives completed over the course of three phases.



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EMS Data Request Dashboard – For October 2025, the program did not receive any data requests.

REMSA Health Exemption Requests -

Table 1: REMSA Health Exemption Requests FY 2026										
Exemption	System Overload	Status 99	Weather	Other	Approved					
July 2025	1	-	-	-	1					
August 2025	28	-	-	-	28					
September 2025	9		-		9					
October 2025	7				7					
Fiscal Year-To-Date	45	-		-	45					

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 2026.

- 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.

Table 2. REMSA Health Percentage of Compliant Priority 1 Responses by Zones FY 2026								
Month* Zone A Zone B, C, and D								
July 2025	91%	96%						
August 2025	91%	90%						



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September 2025	91%	96%
October 2025	91%	94%
Fiscal Year-To-Date*	91%	94%

^{*}Fiscal Year-to-date is the percentage calculated using the sum of all to-date "Chargeable Late Responses" divided by "Compliance Calculate Responses".

<u>Community Services Department (CSD)</u> – 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 October, the program staff received six (6) and reviewed six (6) applications and did not have any concerns that would affect EMS response.

<u>Mass Gatherings/Special Events</u> - The EMS Oversight Program received and reviewed zero (0) applications for Mass Gatherings/Special Events in October. Although no applications for Mass Gatherings/Special Events were received in October, the EMS Oversight Program continues to participate in facilitating EMS coverage at events across Washoe County.

Chronic Disease and Injury Prevention (CDIP) Program

<u>Healthy Eating and Active Living</u> – One new store, Paul's Market, was onboarded to the Healthy Corner Store Program, bringing the total number of participating stores to six. The program works to increase access to healthier food options in neighborhoods located far from full-service grocery stores. In partnership with local store owners, the initiative helps corner stores expand their offerings to include a wider selection of canned and frozen fruits and vegetables, with the long-term goal of introducing and sustaining fresh produce. Paul's Market launched its participation by offering fresh produce from the outset, further improving community access to healthy foods. Early sales data indicate that cucumbers, cherry tomatoes, and garlic are among the top-selling produce items across participating stores.

NNPH's Power Up Kids initiative, which promotes healthy eating and physical activity among students, is expanding to Head Start centers this year using the Color Me Healthy curriculum. This curriculum helps toddlers discover that eating healthy and trying new foods can be fun. For the 2025–2026 school year, staff will also partner with the entire student body at Donner Springs Elementary School. Lessons will feature the Choose Health: Food, Fun and Fitness curriculum for 3rd–5th graders and Pick a Better Snack for Kindergarten–2nd graders, supporting healthy eating habits and active lifestyles across all grade levels.

<u>Injury Prevention</u> – On October 14, 2025, CDIP launched the first Stepping-On seven-week falls prevention workshop in partnership with Renown Health and Washoe Senior Services. This evidence-based program is designed for older adults at risk of falling. Eleven local seniors are currently participating (out of a maximum of 14). Each weekly two-hour session focuses on key topics such as strength and balance exercises, use of assistive devices, home safety strategies, and personal goal setting. The National Council on Aging noted that evidence based programs like Stepping-On has shown effectiveness in reducing fall risk by up to 35%



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Staff led and coordinated a two-month Suicide Prevention Media Campaign on behalf of the Washoe Suicide Prevention Alliance (WSPA), funded by a Renown Health Community Grant. The campaign concluded on October 26, 2025, and utilized a mix of local television, streaming platforms, and digital advertising through Spectrum Charter to reach residents across Washoe County. Campaign Reach Highlights:

- 2,008 WSPA video airings across 28 local TV networks
- 33,446 online video impressions and 161,810 display ad impressions
- 125 visits to the WSPA website and secure firearm storage map
- 57,536 streaming TV impressions, with a 98% video completion rate

This campaign significantly increased visibility of local suicide prevention resources and promoted safe storage practices.

CDIP staff attended the 2025 Nevada Traffic Safety Summit in Las Vegas from October 21-23, 2025 to learn about best practices and initiatives being implemented across the state. Participation in the summit supports the new Office of Traffic Safety grant awarded to CDIP, which focuses on promoting safe mobility education for youth and families.

<u>Tobacco/Nicotine Control and Youth Prevention</u> – CDIP collaborated with the Alzheimer's Association of Northern Nevada and the Nevada Cancer Coalition to implement a smoke-free and vape-free outdoor event policy at the Walk to End Alzheimer's on October 18, 2025. This policy helped protect more than 1,300 participants from exposure to secondhand smoke during the event. In addition, educational materials highlighting the negative impact of tobacco and nicotine use on brain health—such as increased risk of neurodegenerative diseases, structural brain damage, and impaired brain development—were shared with approximately 50 attendees. Tobacco and nicotine cessation resources were also distributed to support participants interested in quitting.

NNPH staff met with the Dean of Students at Galena High School, which serves approximately 1,250 students, to discuss a comprehensive approach to vaping prevention, intervention, and student support. As part of this collaboration, NNPH provided the school with a variety of educational and promotional materials, including four tabletop My Life My Quit (MLMQ) cessation roll-up banners, 25 MLMQ



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posters, 100 MLMQ pocket cards, 10 "Vaping Effects on the Body" posters, 15 MLMQ frisbees, five MLMQ bags, and 20 assorted branded MLMQ incentive items. Staff also shared the toxic electronic vape device waste report from Keep Truckee Meadows Beautiful (https://www.ktmb.org/vape-disposal), which Galena High School plans to integrate into science class instruction to raise awareness about environmental impacts. Additional activities agreed upon include NNPH staff hosting educational outreach tables during lunch to engage students and offering alternative-to-suspension (ATS) resources for those involved in tobacco policy violations. The ATS approach emphasizes education and support over punitive measures, aiming to keep students engaged in their school community while providing instruction on the health effects and long-term consequences of substance use. This model empowers students to make informed, healthier choices, and continue their academic progress. ATS programs also help students build skills to resist peer pressure, make independent decisions, and access cessation resources, fostering accountability and inclusion. Furthermore, Galena High School will host a screening of Screenagers: Under the Influence in March 2026, with promotional outreach to families at its elementary and middle school feeder campuses to expand community engagement around youth substance prevention. The Screenagers documentary is designed to educate parents and adults who work with youth about the mental and physical health risks associated with phone and video game use, as well as vaping and nicotine consumption. The film underscores the dangers of inhaling harmful chemicals and the highly addictive nature of nicotine, which can impair brain development, lead to addiction, cause cardiovascular damage, and increase the likelihood of dual use—combining combustible cigarettes with e-cigarettes. Screenagers: Under the Influence also examines how technology and social media contribute to the growing prevalence of nicotine product use among youth, including vapes and emerging items like nicotine pouches, often without parental awareness.

Staff recruited Dr. Jose Cucalón Calderón, a Renown physician, E-Cigarette Prevention Champion for the Nevada Chapter of the American Academy of Pediatrics, and board member of the Nevada Tobacco Control & Smoke-free Coalition, to serve as the lead subject matter expert for a planned Renown screening of Screenagers: Under the Influence scheduled for February 2026.

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- October 2025

October	In Person	Mail	Online	Total
Birth	806	16	428	1250
Death	1693	24	469	2186
Total	2499	40	897	3436



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Table 2: Number of Records Processed by Vital Statistics Office- FY 2026

			2025					2026						
		Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	Total
Birth														
	Registrations	526	463	536	518									2043
	Corrections	78	40	63	72									253
Death														
	Registrations	468	461	503	508									1940
	Corrections	11	15	18	9									53