

Joe Lombardo
Governor

Laura Rich
Director



DEPARTMENT OF HUMAN SERVICES



**NEVADA DIVISION of PUBLIC
and BEHAVIORAL HEALTH**



Andrea R. Rivers,
*MS
Administrator*

Ihsan Azzam,
*Ph.D., M.D.
Chief Medical
Officer*

The Advisory Council on the State Program for Wellness and the Prevention of Chronic Disease (CWCD)

MEETING AGENDA

April 22, 2026

1:00 p.m. until Adjournment

This meeting is being held virtually and in person. The public is invited to attend the event.

Physical Location: Room 204, 4150 Technology Way, Carson City, NV 89706.

VIRTUAL INFORMATION

How to Participate

Meeting Link:

Microsoft Teams: [Need help?](#)

[Join the meeting now](#)

Meeting ID: 237 275 114 935

Passcode: j4X5f4vM

Dial in by phone

[+1 775-321-6111,450017234#](#) United States, Reno

[Find a local number](#)

Phone conference ID: 450 017 234#

For organizers: [Meeting options](#) | [Reset dial-in PIN](#)

Thank you for planning to attend this meeting.

NOTICE:

Bureau of Child, Family and Community Wellness

4150 Technology Way, Suite 210 • Carson City, NV 89706 • (775) 684-4200 • Fax (775) 687-7570 • dphh.nv.gov

ALL IN GOOD HEALTH.

1. The agenda items may be considered out of order.
 2. Two or more items may be combined; and
 3. Items may be removed from the agenda or delayed at any time.
-

1. Call to Order and roll call:
2. Public Comment: No action may be taken on a matter raised during the public comment period unless the matter is included on an agenda as an item on which action may be taken. To provide public comments telephonically, participants may join the meeting by dialing 1-775-321-6111 and when prompted to provide the meeting ID, enter 450 017 234#. Due to time considerations, public comments will be limited to five (5) minutes per person. Members of the public utilizing the call-in (audio only) number may raise their hands by pressing * 5. Individuals making public comments will be asked to begin by stating their name for the record and spelling their last name. Written comments may be submitted by email to Rory Fuller, r.fuller@health.nv.gov.
3. For Possible Action: Discussion and possible action to approve the meeting minutes from October 23, 2025.
4. For Information Only: Welcome and Introductions to newly appointed members of the Advisory Council.
 - Senator Michelee “Shelly” Cruz-Crawford;
 - Assemblymember Hanadi Nadeem.
5. For Information Only: Informational updates on council activities or directives.
6. For Possible Action: Discussion and possible action to confirm 2026 meeting dates.
 - July 23, 2026
 - October 22, 2026
7. For Information Only: Partner Presentations-Chronic Disease Prevention and Health Promotion Program (CDPHP) Reports
8. For Information Only: Present Division of Public and Behavioral Health CDPHP Section Updates and Program Reports
 - Food Security and Wellness Manager | Office of Food Security (OFS) & Wellness and Prevention Program (WPP) providing specific program update/report.
9. For Possible Action:

Discussion and possible action pursuant to USC 1905(c)(1)(A): Public hearing to solicit feedback on proposed plans and allocations for the Preventive Health and Health Services (PHHS) Block Grant program for FY2027. This provides an opportunity for both public and private stakeholders to contribute comments on the planned activities.

- Discussion regarding the planning of activities for the PHHS Block Grant for FY2027, including priorities in primary prevention, health equity, data/evaluation, and program scopes.
- Overview of funding allocations across Chronic Disease Prevention and Health Promotion Program (CDPHP) activities and partner initiatives.
- Opportunity for Advisory Council recommendations on activities prior to submission to CDC.
- Public invited to provide written or verbal feedback; PHHS information and posted on DPBH website at <https://www.dpbh.nv.gov/boards/cwcd-committee-home/>.

10. Public Comment: No action may be taken on a matter raised during the public comment period unless the matter is included on an agenda as an item on which action may be taken. To provide public comments telephonically, participants may join the meeting by dialing 1-775-321-6111 and when prompted to provide the meeting ID, enter 450 017 234#. Due to time considerations, public comments will be limited to five (5) minutes per person. Members of the public utilizing the call-in (audio only) number may raise their hands by pressing * 5. Individuals making public comments will be asked to begin by stating their name for the record and spelling their last name. Written comments may be submitted by email to Rory Fuller, r.fuller@health.nv.gov.

11. Adjournment

NOTICES OF THIS MEETING HAVE BEEN POSTED AT THE FOLLOWING LOCATIONS

Physical Posting Locations

- Nevada Division of Public and Behavioral Health: 4150 Technology Way, Carson City, NV 89706
- Nevada Division of Public and Behavioral Health: 4126 Technology Way Carson City, NV 89706

- Bureau of Health Care Quality and Compliance (Las Vegas Office): 500 E Warm Springs Rd, Suite 200 Las Vegas, NV 89119

Internet Postings

- The Nevada Division of Public and Behavioral Health website at the <https://www.dpbh.nv.gov/boards/cwcd-committee-home/2026-cwcd--kdac-meetings/> and the Department of Administration's website at <https://notice.nv.gov/>

It is the goal of this body to afford the public with an opportunity to comment in compliance with the minimum requirements of the Nevada Open Meeting Law prior to adjournment. At least two public comment periods will be provided. No action may be taken on matters raised during public comment unless the matter has been specifically included on the agenda as an item upon which action may be taken. The Chair may limit public comment to the minimum required by law and may decline additional item-specific public comment when necessary to ensure the orderly conduct of the meeting.

This meeting is a public meeting and will be recorded in accordance Nevada Open Meeting Law (NRS 241.). Participation in the meeting constitutes consent to recording. Voting members are required to keep their cameras throughout the meeting and must refrain from using the chat function unless directed.

Agenda materials and meeting information have been distributed upon request. Supporting documents may be obtained by contacting Rory Fuller, Division of Public and Behavioral Health, Bureau of Child, Family and Community Wellness, at (775) 684-2203 or r.fuller@health.nv.gov.

Reasonable accommodation will be provided for individuals with disabilities who wish to attend. Requests must be submitted to Rory Fuller in advance of the meeting by email (r.fuller@health.nv.gov), by mail (CWCD, Nevada Division of Public and Behavioral Health, 4150 Technology Way, Suite 210, Carson City, NV 89706) or by telephone at (775) 684-2203 before the meeting date.

If at any time during the meeting a person intending to present on an agenda item cannot do so or is having technical difficulties, please reach out to Rory Fuller, at (775) 684-2203, or by email at r.fuller@health.nv.gov identifying the agenda item number, the time the issue began, and their intent to participate if the item is rescheduled or otherwise addressed.

Participants are advised not to click on links posted in the meeting unless they have verified that the link is safe. Please direct any questions regarding meeting materials or links to r.fuller@health.nv.gov. Chat participation is prohibited unless specifically requested as official meeting minutes are required.

Disruptive behavior, including the use of obscenities may result in loss of the opportunity to provide public comment or removal from the meeting.

Additionally, individuals wishing to be added to the mailing list must submit a written request every six (6) months to the Nevada Division of Public and Behavioral Health at the address listed below.

CWCD, DPBH, Attn: Rory Fuller
4150 Technology Way, Suite 210
Carson City, Nevada, 89706

If you would like to receive updates and agenda postings by email, please register for the Kidney Disease Advisory Committee Listserv by sending an email to:

CWCD-Subscribe-request@listserv.state.nv.us

Attachment for Agenda Item #3

Joe Lombardo
Governor

Laura Rich
Director



DEPARTMENT OF HUMAN SERVICES



NEVADA DIVISION of PUBLIC
and BEHAVIORAL HEALTH



Andrea R. Rivers,
*MS
Administrator*

Ihsan Azzam,
*Ph.D., M.D.
Chief Medical
Officer*

THE ADVISORY COUNCIL ON THE STATE PROGRAM FOR WELLNESS AND THE PREVENTION OF CHRONIC DISEASE (CWCD)

DRAFT MEETING MINUTES

Date: January 22, 2025

Time: 1:00 PM - Adjournment

Location: Virtual via Microsoft Teams.

In person: Room 204, 4150 Technology Way, Carson City, NV 89706.

ATTENDEES:

Council Members' Present:

Dr. Krista Schonrock (Chair)
Monica Romero
Cari Herington
Kagan Griffin
Nikeshia Mobley
Maria Azzarelli
Steve Shane

Members not Present:

Assemblyman Dr. David Orentlicher
Dr. Amber Donnelly
Dr. Ihsan Azzam
Georgia Dounis
Laura Valley
Senator Dina Neal

Others present:

Anais Infante, DPBH – Meeting Staff
Alexis Hogan, DPBH
Tammera Brower, DPBH
Michelle Harden, DPBH, CDPHP
Bryan Davis, DPBH
Amber Hise, CDPHP
Taylor Moseley DBPH
Yanyan Qiu, CDPHP
Donadya McCullough, DPBH

Godwin Nwando, DPBH
Taliman Afroz, DPBH
Troy Lovick, DPBH
Sabrina Petrel
Teneale Chapton
Smriti Neupane, NICRP
Nicole Alberti

AGENDA ITEMS:

1. CALL TO ORDER AND ROLL CALL:

Roll was called, 7 of 13 members were present, establishing quorum.

2. Public Comment: First public comment period.

Anais Infante opened the floor for public comment. No public comment was made. Dr. Schonrock closed the period for public comment.

3. Discussion and possible action to approve the meeting minutes of October 23, 2025 – Dr. Krista Schonrock, Chair

Motion to approve minutes by Maria Azzarelli, seconded by Nikesha Mobley. Approved unanimously.

4. For Information Only: Informational updates on council activities or directives.

No Updates or comments were made.

5. For Possible Action: Discussion and possible action to approve CWCD meeting dates for Calendar Year 2026 - April 23, 2026, July 23, 2026, October 22, 2026.

One member is unable to attend April 23, 2026, as they are teaching this semester. The council discussed and concluded that a Doodle poll will be sent out to determine a better day for that meeting.

Motion by Monica Romero, seconded by Cari Herington. Approved unanimously.

6. For Information Only: Present partner Chronic Disease Prevention and Health Promotion Program (CDPHP) Reports Included in Meeting Packet.

Nevada Early Childhood Healthy Lifestyle Work Group (Smriti Neupane NICRP): Contract pending; first in-person meeting Feb 17 in Las Vegas.

Southern Nevada Health District (Maria Azzarelli): The office received the 2025 Circle of Care Award from the Nevada Breastfeeding Coalition for ongoing support. Key nutrition initiatives included a four-week Spanish-language Faithful Families class with 16 participants, sponsorship of the 2025 Breastfeeding Symposium with 42 attendees, and collaboration with Clark County School District to promote Universal School Meals, resulting in increased participation rates for breakfast (20.6% to 28.2%) and lunch (48% to 54.4%). The fall pop-up produce stand series concluded with 12 events, selling over 1,113 pounds of produce, with nearly 45% of transactions using SNAP benefits. In heart disease prevention, a pilot Social Determinants of Health screening launched at three barber and beauty shops in partnership with DPBH and Roseman University. Diabetes efforts included two bilingual focus groups, three in-person self-management classes, and extensive media outreach during Diabetes Awareness Month. Obesity prevention continued through the 5210 Shop Page, supporting over 20 healthcare and community champions. Physical activity initiatives supported the Safe Routes to School program, which conducted 44 assemblies, 98 walk/bike events, 10 bike rodeos, and multiple audits and observations. Tobacco control activities included participation in community events, youth vaping prevention efforts in partnership with the Nevada Interscholastic Athletic Association (estimated reach of 60,000 students), and advocacy for smoke-free housing policies. Maria highlighted strong community partnerships and ongoing health communications, with additional details available in the quarterly report.

Northern Nevada Public Health (Nicole Alberti): The team will meet with the District Board of Health Chair next week to discuss potential program pivots based on funding priorities. She highlighted the successful completion of the *Stepping On* program, a seven-week, evidence-based falls prevention initiative for seniors conducted in partnership with physical therapists. The program included two-hour sessions each week and has been shown to reduce fall risk by 35%, with local participants reporting improved mobility and quality of life. Nicole also noted the conclusion of a two-month suicide prevention campaign on behalf of the Washoe Suicide Prevention Alliance, which utilized TV, streaming platforms, and digital media for outreach. Additionally, the team has focused on updating its website to ensure ADA compliance.

7. For Information Only: Present Division of Public and Behavioral Health CDPHP Section Updates and Program Reports- Michelle Harden

Michelle Harden provided key highlights from the section's activities, noting that multiple CDC and state-funded initiatives are running concurrently and integrated across programs, including the Office of Food Security. She reported a decrease in participants to 70 from 120 last year in Worksite Wellness, which will be assessed further in future reporting. In the Community Wellness unit, the cardiovascular program is preparing for Year 3 and developing a mobile app in collaboration with Southern Nevada Health District, Roseman University, and other partners. The Diabetes Prevention Program launched a hydroponic gardening project with the Nevada Business Group on Health and is expanding Diabetes Self-Management Education and Support (DSMES) workshops across local health districts, primarily in Southern Nevada. Michelle also mentioned a budding partnership with SCA and emphasized ongoing work to strengthen chronic disease prevention initiatives. Additional details are available in the full report included in the meeting packet.

Troy Lovick, coordinator for the Cardiovascular Health Program, highlighted ongoing efforts under the Million Hearts initiative and the statewide cardiovascular health learning collaborative. The program is working with health systems to leverage health information technology and electronic health records to better identify hypertensive patients at risk for stroke. Engagement with EMS agencies is increasing, with some now participating in the learning collaborative. Public education efforts focus on recognizing signs and symptoms of heart attack and stroke, activating emergency services, and promoting healthy eating. Troy noted that recommendations for legislation aimed at improving stroke care quality are being sought from the CWCD committee. Additionally, the annual stroke report is in progress and due in early March, with input requested from stakeholders.

8. Public Comment: second public comment period.

Anais Infante opened the floor for public comment. No public comment was made. Dr. Schonrock closed the period for public comment.

9. Adjournment:

Monica Romero made the motion to adjourn, Dr. Steve Shane second, meeting adjourned at 1:52 PM

Next meeting:

April 23, 2026 – Tentative, a Doodle poll will be used to determine a better date for those who are unable to attend April 23, 2026.

1:00 PM – Adjournment

Location: Virtual via teams

Quarterly meeting

Minutes prepared by Rory Fuller using the following reference:

Robert, H. (2020). *Robert's rules of order: Newly revised (12th ed.)*. Da Capo Press.

Nevada Revised Statutes. *Open Meeting Law (NRS 241)*.

DRAFT

Attachment for Agenda Item #4

ADVISORY COUNCIL ON THE STATE PROGRAM FOR WELLNESS AND THE PREVENTION OF CHRONIC DISEASE (CWCD) ORIENTATION PACKET

Table of Contents

Quick Start (For New Members)	2
• What the CWCD does:	2
• What's expected of you this quarter:	2
• Before your first meeting:	2
Next meeting:	2
Information on first page of agenda	2
1. Overview of the CWCD	2
2. Statutory Authority	3
Administrator-Appointed Voting Members (13 total)	3
Legislative Commission Appointments (2 voting members)	3
3. Membership Structure and Current Roster	3
Orientation note for Legislative Commission appointees:	4
DPBH Staff Support	5
4. Roles and Responsibilities of Council Members	5
Additional expectations (typical):	5
5. Bylaws Summary	5
Authority	5
Quorum and Voting	5
Meetings	6
Officers	6
Purpose and Function	6
6. Meeting Schedule and Open Meeting Law Requirements	6
Meeting Frequency	6
Open Meeting Law Requirements	6
Additional requirements:	7
Typical Meeting Format	7
7. Current Initiatives and Workplan	7
Workplan snapshot	7
8. Recent Meeting Summary	8

9. Key Contacts.....	8
Program Contacts.....	8
Fiscal Contacts.....	9
Authorized Signer.....	9
10. Additional Resources and Expectations.....	9
Next steps for new members (suggested):.....	9
Glossary (common acronyms):.....	9

QUICK START (FOR NEW MEMBERS)

- **What the CWCD does:** The CWCD advises the Division of Public and Behavioral Health (DPBH) on chronic disease prevention and wellness priorities, trends, and evidence-based strategies statewide.
- **What's expected of you this quarter:** Attend the next council meeting, review pre-read materials, and be prepared to provide recommendations and feedback during agenda items and public meetings.
- **Before your first meeting:** (1) Review this packet, (2) confirm your contact information is correct, and (3) read the Open Meeting Law overview in Section 6.

Next meeting:

- *Meeting cadence:* Quarterly on the 4th Thursday of January, April, July, and October at 1:00 PM PT.
- Hybrid (virtual and in person). Public invited.

Information on first page of agenda

- **Date/Time**
- **Physical location:** Room 204, 4150 Technology Way, Carson City, NV 89706
- **Microsoft Teams:** Clickable link on agenda, as well as manual meeting log in information. (Example) Meeting ID 237 275 114 935 | Passcode j4X5f4vM
- **Dial-in:** +1 775-321-6111 (United States, Reno)
- **Phone conference ID:** (Example) 450 017 234#

1. OVERVIEW OF THE CWCD

The Advisory Council on the State Program for Wellness and the Prevention of Chronic Disease (CWCD) serves as Nevada's statewide advisory body for chronic disease prevention, wellness promotion, and evidence-based public health strategies.

The Council provides guidance to the Division of Public and Behavioral Health (DPBH) on program priorities, statewide health trends, and opportunities to improve health outcomes for Nevada residents.

2. STATUTORY AUTHORITY

NRS 439.518 -- Establishment and Purpose

The Council is established *“to advise and make recommendations to the Division concerning the Program.”* (See [NRS 439.518](#).)

For guidance on public meeting requirements and what to avoid between meetings, see [Section 6 \(Open Meeting Law Requirements\)](#).

Administrator-Appointed Voting Members (13 total)

Required representation includes:

- Chief Medical Officer or designee
- Superintendent of Public Instruction or designee
- Health insurance industry representative
- Provider of health care
- Nevada Association for Health, Physical Education, Recreation and Dance
- Three chronic disease organizations
- Registered Dietitian
- Minority health representative
- Private employer representative
- Local health authority representative
- Nevada System of Higher Education (NSHE) representative

Legislative Commission Appointments (2 voting members)

- One Senator
- One Assemblymember

3. MEMBERSHIP STRUCTURE AND CURRENT ROSTER

Table 1: Current voting members of the CWCD

Name	Seat / Representation	Voting	Notes
------	-----------------------	--------	-------

Senator Michele "Shelly" Cruz-Crawford	Legislative Commission appointment (Senator)	Yes	
Assemblymember Hanadi Nadeem	Legislative Commission appointment (Assemblymember)	Yes	
Dr. Ihsan Azzam	Chief Medical Officer or designee	Yes	
Monica Romero	Superintendent of Public Instruction or designee	Yes	
Dr. Krista Schonrock (Chair)	Health insurance industry representative	Yes	
Dr. Georgia Dounis	Provider of health care	Yes	
Laura Valley	Nevada Association for Health, Physical Education, Recreation and Dance	Yes	
Vacant	Chronic disease organization representative	Yes	
Dr. Steven Shane	Chronic disease organization representative	Yes	
Cari Herington	Chronic disease organization representative	Yes	
Kagan Griffin, R.D.	Registered Dietitian	Yes	
Nikeshia (Nikki) Mobley	Minority health representative	Yes	
Vacant	Private employer representative	Yes	
Maria Azzarelli	Local health authority representative	Yes	
Dr. Amber Donnelly (Vice-Chair)	NSHE representative	Yes	

Orientation notes for Legislative Commission appointees: Legislative members are voting members of the CWCD under NRS 439.518 and are included in quorum and roll-call votes.

DPBH Staff Support

- **Rory Fuller** -- CDPHP Office Manager
- **Amber Hise** -- CDPHP Section Manager
- **Michelle Harden** -- CDPHP Quality Improvement Manager

4. ROLES AND RESPONSIBILITIES OF COUNCIL MEMBERS

Council members are expected to:

- Attending quarterly meetings
- Review materials in advance
- Provide informed recommendations to DPBH
- Support statewide chronic disease prevention strategies
- Participate in evidence-based discussions
- Uphold Nevada's Open Meeting Law requirements

Additional expectations (typical):

- **Time commitment:** Plan for approximately 6-8 hours per quarter (meeting time plus pre-read and follow-up).
- **Pre-read materials:** Materials are typically distributed in advance; please review and send questions to staff before the meeting when possible.
- **Agenda items:** To request an agenda item, contact administrative support at least 30 business days before the agenda posting deadline.
- **Attendance:** If you cannot attend a meeting, notify administrative support as early as possible.
- **Representation:** Members are encouraged to bring perspectives from their constituency/sector while supporting evidence-based public health practice.

5. BYLAWS SUMMARY

Authority

The Council is authorized under [NRS 439.514–439.525](#), inclusive.

Quorum and Voting

- If a vacancy occurs... quorum and number of votes required are *reduced* as though the vacancy does not exist.
- Eight of 15 voting members constitute a quorum.
- All votes are oral and recorded by roll call.

Meetings

- Conducted in accordance with Nevada Open Meeting Law ([NRS 241](#)).

Officers

- Chair and Vice Chair elected every two years.
- Only members present may vote.

Purpose and Function

The Advisory Council's statutory role is to advise and make recommendations to the Division (NRS 439.518).

In fulfilling this role, the Council focuses on:

- Reviewing and providing recommendations on burden reports prepared by the Division
- Advising on evidence-based programs related to chronic disease prevention
- Reviewing and recommending model programs for statewide use
- Providing input on statewide chronic disease surveillance systems
- Advising on community capacity-building efforts
- Reviewing and advising on strategies for screening and early detection
- Providing recommendations on policy, systems, and environmental change initiatives

6. MEETING SCHEDULE AND OPEN MEETING LAW REQUIREMENTS

Meeting Frequency

Meetings are held quarterly on the 4th Thursday of January, April, July, and October at 1:00 PM PT, or as needed.

Open Meeting Law Requirements

Open Meeting Law ([NRS 241](#)) (Practical Reminders)

- **Do** keep council discussion and deliberation within properly noticed meetings.
- **Do** treat email threads carefully---avoid "reply all" discussions that could resemble deliberation by a quorum.
- **Do** send requests for agenda items or materials through staff so posting requirements are met.
- **Don't** coordinate positions or decisions with other members outside a public meeting.

- **Don't** discuss items that are not clearly listed on the agenda for possible action.

Additional requirements:

- Notice posted by 9 AM, 3 working days before the meeting
- Agenda must include public comment compliant with NRS 241.020(2)(d)(3)
- Minutes draft must be available within 30 working days of the meeting

Typical Meeting Format

- Virtual (Teams) with hybrid option
- Roll-call voting
- Public comment at required intervals

7. CURRENT INITIATIVES AND WORKPLAN

The CWCD supports statewide efforts in:

- Diabetes prevention and management
- Heart disease and stroke prevention
- Tobacco control and cessation
- Nutrition and physical activity initiatives
- School and workplace wellness
- Chronic disease surveillance
- Community-clinical linkages
- Health equity and underserved populations

Workplan snapshot

Table 2: Current workplan priorities

Priority area	Current focus	Status	Next milestone / date
Diabetes prevention	Review of statewide Diabetes Prevention Program (DPP) reach and gaps	In progress	Briefing at next quarterly meeting
Heart disease & stroke	Alignment with CDC-funded cardiovascular initiatives	Ongoing	Program update and recommendations
Tobacco control	Policy and cessation strategy review	In progress	Discussion for possible action

Preventive Health and Health Services Block Grant (PHHS BG)	Annual workplan implementation across five PHHS BG focus areas (Oct 2025– Sep 2026).	Active	Quarterly progress updates from the Local Funded Health Districts and an Internal Program Update (Dec 2025, Mar 2026, Jun 2026, Sep 2026)
Kidney Disease Advisory Committee	*The committee was established under NRS 439.872 , which outlines its creation, composition, and reporting duties - the committee is a subcommittee of the CWCD	Ongoing	Recommendations for new policies or programs- meetings third Thursday of the quarter. Next meeting April, 16 at 1:30 PST.

8. RECENT MEETING SUMMARY

The most recent approved meeting minutes are posted on the DPBH public meetings webpage and are available on request from administrative support.

Typical agenda items include:

- Chronic disease burden data
- CDC grant updates
- Workplan progress
- Community partnership updates
- Public comment

9. KEY CONTACTS

Program Contacts

- **Amber Hise** -- CDPHP Section Manager \ Email: ahise@health.nv.gov
- **Michelle Harden** -- CDPHP Quality Improvement Manager \ Email: mharden@health.nv.gov
- **Anais Infante** -- Administrative Support \ Email: a.infante@health.nv.gov
- **Rory Fuller** -- CDPHP Office Manager \ Email: r.fuller@health.nv.gov
- **Vickie Ives, MA** -- Bureau Chief \ Email: vives@health.nv.gov

- **Sara Rogers, MPH, NDTR, CLC** -- Deputy Bureau Chief \ Email: srogers@health.nv.gov

Fiscal Contacts

- **Fiscal Lead:** DPBH Fiscal Services Unit \ Email: dpbhfiscal@health.nv.gov

Authorized Signer

- **Division Administrator or Designee:** DPBH Administrator \ Email: dpbh@health.nv.gov

10. ADDITIONAL RESOURCES AND EXPECTATIONS

Members are encouraged to:

- Review [NRS 439.514–439.525](#)
- Review the Council Bylaws
- Visit the DPBH CWCD Committee Home page for agendas, minutes, and updates: <https://www.dpbh.nv.gov/boards/cwcd-committee-home/>
- Attend meetings consistently
- Engage with program staff as needed
- Maintain compliance with Nevada Open Meeting Law ([NRS 241](#))
- Support evidence-based public health strategies

Next steps for new members (suggested):

1. Confirm your preferred email for meeting notices.
2. Save the next meeting date and join information (Quick Start).
3. Review Section 6 (Open Meeting Law) and Section 4 (Roles & Responsibilities).
4. Contact staff with any accessibility or scheduling needs.

Glossary (common acronyms):

- **CWCD:** Advisory Council on the State Program for Wellness and the Prevention of Chronic Disease
- **DPBH:** Division of Public and Behavioral Health
- **CDPHP:** Chronic Disease and Health Promotion Program
- **NRS:** Nevada Revised Statutes
- **NSHE:** Nevada System of Higher Education

Attachment for Agenda Item #7

Nevada Institute for Children's Research and Policy

Report Summary

Project Period: October 2025 – March 2026

In partnership with the Nevada Early Childhood Healthy Lifestyle (NECHL) workgroup members, NICRP will implement NECHL State Plan activities to help improve weight status among children zero (0) to eight (8) years of age.

The 2021-2026 state plan is divided into seven (7) overarching goals:

- (1) Early Care and Education Facilities
- (2) Awareness and Education for parents
- (3) Awareness and Education for providers and community partners
- (4) Establish Data Collection Systems
- (5) Increase knowledge of best practice and current research in Early Childhood Obesity prevention strategies
- (6) Increase number of Caring for our Children (CFOC) and Physical Activity and Nutrition (PAN) standards being met in Nevada, and
- (7) Increase sustainable funding to support Nevada Early Childhood Obesity Prevention efforts

These goals are inclusive of 39 total objectives, further broken down into a total of 56 activities to be completed over the five-year state plan. Workgroup members and organizations provide quarterly updates on progress toward each of these activities.

Systems and Data Collection

NICRP worked with the NECHL members to develop an internal system for collecting and analyzing quarterly progress of all 7 goals among partnering members and organizations. The following progress has been reported since the last report in September 2025:

During this project period, NICRP held one virtual first-quarter meeting with the NECHL Workgroup on November 18, 2025 (despite not having an active contract at that time), and an in-person, all-day second-quarter meeting on February 17, 2026, at UNLV's main campus from 9:30 am to 2:00 pm to track and evaluate the implementation of the Nevada Early Childhood Obesity Prevention State Plan 2021-2026. The workgroup is continuing with its goals and activities, specifically building on the discussions from the meetings regarding feedback from the Nevada Childcare Licensing Board's edits to NECHL's proposed revisions to the Achieving a State of Healthy Weight (ASHW) standards.

The workgroup also continues with the Nevada Registry Wellness Training rubric discussed in detail below. NICRP plans to continue discussing with the workgroup ways to increase awareness through the implementation of Year 5 objectives and activities. The team will specifically be working on updating the existing state plan (2021-2026) during that time in preparation for the next 5-year state plan.

Policy

Wellness Training

We have been working closely with the Nevada Registry over the past couple of years to strengthen wellness training standards and improve the quality and consistency of Early Childhood Education (ECE) provider requirements across the state. This effort has helped align ECE wellness training with evidence-based best practices.

Per NAC 432A.323, all licensed childcare providers are required to complete two or more hours of training in wellness including childhood obesity, nutrition, and moderate or vigorous physical activity within 90 days of employment and each year thereafter. To support this, the Nevada Registry, in collaboration with NECHL workgroup and Child Care Licensing, developed clear content guidelines, course objectives, and trainer qualifications. Providers now have structured training options at Basic, Intermediate, and Advanced levels, along with both online and in-person opportunities to meet the needs of ECE professionals.

During Q1 (Oct 2025–Dec 2025) and Q2 (Jan 2026–March 2026), a total of 33 Nevada Registry–approved Wellness courses were offered to Early Childhood Education and Care (ECEC) professionals. In Q1, 20 courses were offered, including 13 online (which remain available) and 7 in-person courses that were free but limited to in-house staff. In Q2, 13 additional online courses were offered. Across both quarters, most courses were online and fee-based, with prices ranging from \$10.99 to \$45.00, and no free online options available. Courses were offered at Basic, Intermediate, and Advanced levels, with the majority at the Advanced level.

A few free Intermediate-level courses were offered in Q2 (one in-person on 4/18/26 and one virtual on 4/23/2026), but overall, free options remain very limited. While the current need for Wellness training is being met mainly through online offerings, ECE professionals continue to request more free options and a greater variety of courses. To better support their learning and increase participation, more diverse and accessible course options are needed.

Achieving a State of Healthy Weight (ASHW)

In addition to Wellness Training, we are also working to align Nevada’s childcare standards with national best practices through the Achieving a State of Healthy Weight (ASHW) framework, focusing on key areas such as nutrition, infant feeding, physical activity, and screen time.

On September 5, 2025, Amanda Haboush-Deloye presented the NECHL workgroup’s findings to the Nevada Board of Health (BOH) during their quarterly meeting. The presentation highlighted the ASHW framework, shared feedback collected from parents and providers, and outlined key recommendations for moving forward. The group is now working with Julia Peek and other partners to determine next steps for updating regulations. While progress has been slowed due to agency reorganization (Nevada Health Authority, NHA), there is strong support to move this work forward, with an estimated timeline of about two years to complete the process.

Education

NECHL's brochures were updated in Q1 (November 2025) and are now available in both English and Spanish. The title has been changed from "Early Childhood Obesity Prevention" to "Early Childhood Wellness and Healthy Development." Throughout the brochures, the language has also been updated- for example, terms like "preventing childhood obesity" were replaced with more neutral wording such as "promoting healthy weight and lifestyle" to avoid stigma. During the in-person meeting on February 17, 2026, they were shared with the workgroup, and members took copies to distribute to parents and others as needed.

UNR Extension also implemented their 10-week long *I Am A Seed* garden-based nutrition curriculum, reaching 369 preschoolers.

The workgroup also disseminated one (1) toolkit for National Child and Adult Care Food Program Week 2026 in February for NECHL workgroup members to share with their community partners. In March, we sent the toolkit with NICRP partners to raise awareness and shared social media posts throughout the CACFP Week.

Toolkits for Breastfeeding Awareness Month in August and Childhood Obesity Prevention Month in September will be developed and disseminated in July and August, respectively.

All finalized brochures, toolkits, and reports are available on the [NECHL workgroup's webpage](#).

(Please note that we are currently updating the website; all final materials will be available soon)

April 2026

**Northern Nevada Public Health (NNPH) - formerly Washoe County Health District
Chronic Disease and Injury Prevention (CDIP) Program Report
Summary of activities January 2026 – March 2026**

Staffing

The NNPH CDIP program has seven full-time staff. The team has several intermittent hourly (IH) staff who help complete grant deliverables for the program.

Section News

This quarter, the CDIP worked with the NNPH Statistics and Informatics team to publish the [Chronic Disease and Injury Data Dashboard](#) on the GetHealthyWashoe.com webpage. The Dashboard provides current data on chronic disease deaths, injury rates and deaths, and related health risks in Washoe County, Nevada, and the United States. The dashboard also highlights key factors that influence health, including social determinants, mental health, nutrition, physical activity, obesity, alcohol use, smoking, vaping, and cannabis use.

Further, NNPH began collaborating with the Alzheimer’s Association’s Nevada Chapter to explore integrating brain health messaging into existing chronic disease and injury prevention activities. This effort included surveying the Washoe County Chronic Disease Coalition to assess its interest in addressing brain health as a local priority. We also added a brain health section to our CWCD report to ensure the Advisory Council is kept up to date on these activities.

Program Overview

The CDIP program focuses on the modifiable risk factors of tobacco use and exposure, lack of physical activity, and poor nutrition, as well as injury prevention (intentional and unintentional) and responsible cannabis use, including eliminating secondhand cannabis smoke exposure. These modifiable risk factors impact the leading causes of death in Washoe County, and by moving the needle on these risk factors, the CDIP Program aims to reduce illness and premature deaths in Washoe County and improve quality of life of those that live, work, and visit our community. Key approaches include efforts concentrating on policy, systems, and environmental change.

Tobacco Prevention and Control Highlights

- On February 19th, staff attended the third annual Because We Matter (BWM) Summit in Las Vegas alongside statewide and community partners, including Dignity Health, Prominence Health, American Academy of Pediatrics, Nevada Chapter, American Cancer Society Cancer Action Network, and American Heart Association, among others. Hosted by the Southern Nevada Health District, the summit supports the African American/Black community in addressing disproportionate health burdens driven by higher concentrations of tobacco retailers in certain neighborhoods, targeted marketing of menthol products, and reduced access to health care and cessation services - factors

**Chronic Disease Prevention and Health Promotion Section Report
Advisory Council on the State Program for Wellness and the Prevention of Chronic Disease**

April 2026

influenced by social determinants of health such as education access, economic stability, social and community context, neighborhood and built environment, and health care access and quality. Sessions provided education on the impact of menthol flavoring, which can make tobacco products easier to initiate and more difficult to quit; accessing nicotine cessation services; emerging nicotine products; and strategies for partnering with tobacco retailers to prevent youth access and reduce tobacco advertising in neighborhood stores. In Clark County, the African American/Black population represents approximately 14% of residents, making it the third-largest racial/ethnic group after White and Hispanic populations, while in Washoe County, the African American/Black population represents approximately 2–3% of residents, a smaller proportion than White, Hispanic, and Asian populations.

- Staff met with the Davidson Academy GECKO Club advisor and student members to discuss hazardous waste disposal of e-cigarettes and nicotine pouches. The GECKO Club serves as the environmental club for The Davidson Academy of Nevada, a public middle and high school for profoundly gifted students located on the campus of the University of Nevada, Reno. Staff presented findings from the Keep Truckee Meadows Beautiful/NNPH collaborative [report](#) on toxic tobacco waste and reviewed hazardous tobacco e-waste disposal programs implemented in Colorado and Minnesota. GECKO Club members will be undertaking an environmental scan of discarded e-cigarettes and other tobacco products on the UNR campus next month. Finally, CDIP staff are also exploring opportunities to provide these students with an overview of public health functions across NNPH divisions, with the goal of fostering youth champions who can elevate awareness about vaping and the environmental impacts of tobacco product waste.
- Staff collaborated with the Reno Housing Authority to adopt a smoke-free and vape-free policy for outdoor playground areas. The policy will be fully implemented across its properties in Washoe County over the next several months. Outdoor playground policies that prohibit smoking and vaping are critical to protecting children from exposure to toxic secondhand smoke, a Class A carcinogen, reducing hazardous litter, and promoting healthy, tobacco-free social norms. By including electronic nicotine delivery systems, these policies also help reduce youth initiation and ensure safe, clean environments for recreation.
- Staff partnered with the Washoe County School District Student Activities and Athletics Coordinator to provide 28 high school athletic directors with education and resources to support prevention of youth vaping and nicotine use among student-athletes and to increase awareness of available cessation resources. Promoting vaping prevention and cessation among student-athletes supports improved physical performance, including lung function and stamina, as well as overall mental health, while addressing the misconception that vaping is harmless. Coaches and athletic leaders play a critical role in influencing youth attitudes and behaviors and can be strong advocates for rejecting or quitting vaping and other tobacco products. Collaborative efforts will help ensure that youth are supported in leading healthy, tobacco-free lives.
- CDIP staff have been working closely with the Estipona Group and the NNPH Communications Team to launch a youth vaping prevention campaign on Snapchat a platform widely used by teens and to update the Get Healthy Washoe (GHW) webpage, which serves as the main landing page for the

April 2026

campaign. The goal of this effort is to prevent youth from starting to use e-cigarettes (vapes) by delivering clear, engaging, and age-appropriate messages about the risks of vaping. The webpage has been enhanced with easy-to-understand information, updated visuals, and resources for youth, parents, and educators, ensuring that it aligns closely with the campaign messaging and provides a seamless user experience. This year’s campaign builds on the success of last year’s effort, which generated over 1.1 million impressions and more than 12,000 clicks, by continuing to use content that resonated most with youth audiences—particularly ads focused on the environmental harms of vaping and the #VapeFreeFlex theme, which encourages teens to spend their money on healthier alternatives. Since launching on February 25, 2026, the campaign has already generated 307,717 impressions (number of times the ads were shown), 1,813 clicks (number of times users engaged with the ads), and 317 visits to the landing page. Additionally, the video ads have been watched to completion 3,053 times, with users spending an average of nine seconds on the webpage. Early performance shows that the environment-themed ad is the most effective so far, and the campaign will continue running through the end of May to maintain visibility and engagement among youth.

- At the invitation of the Dean of Students, the team conducted outreach through tabling during 30-minute lunch periods at Galena High School on March 2, 9, and 16. During these sessions, staff provided students with educational materials on vaping and cessation resources. In total, 87 students were engaged in conversations about e-cigarettes, including their impact on the human body and the environment, and were offered a selection of free, confidential quitting resources. Additionally, on March 17, staff delivered a one-hour presentation at Galena High School attended by three classes, totaling 57 students, along with five staff members. The presentation covered the history of tobacco use, the effects of nicotine on the brain, the “4 Cs” of addiction (Compulsion, Craving, Control, and Consequences), the environmental impact of toxic tobacco waste, and available cessation resources. These interventions were initiated at the request of the Dean of Students, who began collaborating with NNPH in September 2025 to support students in identifying cessation resources and increasing awareness of the factors influencing e-cigarette use as a nicotine delivery system. The Dean has a history of partnership with NNPH, having previously collaborated on vaping prevention efforts while serving as Dean of Students at Clayton Middle School in 2022. Following Spring Break, intervention efforts at Galena High School will continue with additional outreach tabling and another one-hour presentation scheduled for Tuesday, April 7.

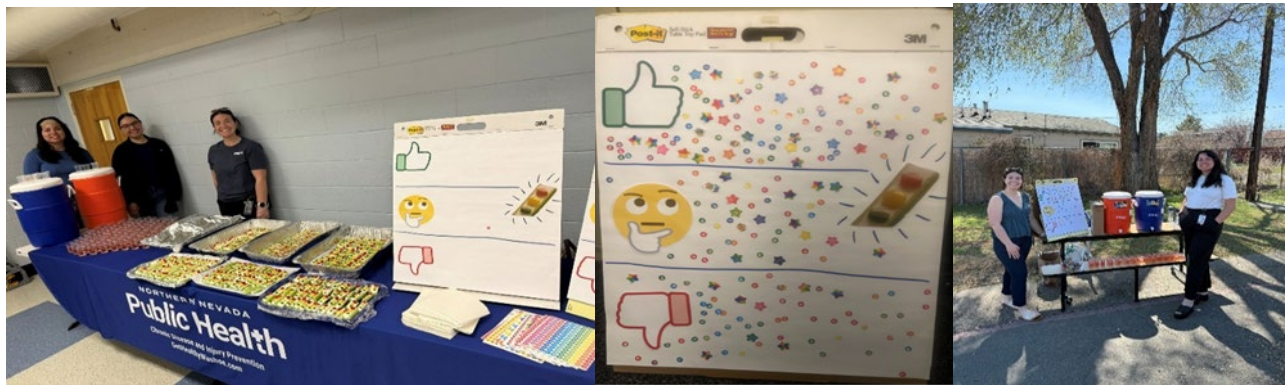
Physical Activity and Nutrition Highlights

- SNAP-Ed programming continued at three new Community Services Agency Head Start sites (Wooster, Smithridge, and Echo Loder) using the Pick a Better Snack curriculum. Staff also completed the final lessons of Choose Health: Food, Fun, and Fitness at Donner Springs, reaching 210 students in 3rd–5th grade. Pick a Better Snack lessons have now begun for Kindergarten–2nd grade students at Donner Springs.

**Chronic Disease Prevention and Health Promotion Section Report
Advisory Council on the State Program for Wellness and the Prevention of Chronic Disease**

April 2026

- Staff tabled at Donner Springs Elementary School on February 10, and Sparks Middle School on February 26, sharing resources on healthy eating and active living. Across both events, 85 families were reached.
- In-depth assessments of all six participating stores in the Healthy Corner Store program were completed to gather insights supporting program refinement and strategic planning. A thematic analysis of feedback is underway. Findings will guide a strategic reset of the program, strengthen store engagement, refine technical assistance, and ensure alignment with retailer capacity and community needs
- To celebrate National Nutrition Month, the CDIP program coordinated two healthy food tasting events at Elmcrest Elementary (March 17) and Lincoln Park Elementary (March 20), engaging a total of 612 students. These events aimed to increase exposure to healthy foods through interactive taste-testing activities. Students sampled flavored water (strawberry and mint) as a healthy alternative to sugary beverages and tried celery sticks with cream cheese and bell peppers arranged as a “stoplight” snack to make nutritious choices visually appealing. Students also participated in a sticker-voting activity to share their feedback on tasting items. Each student received either a water bottle or a children’s recipe book. This effort is part of the Power Up Kids initiative, supported by the SNAP-Ed grant, which promotes increased fruit and vegetable intake and greater physical activity among preschool and school-aged children.



- Staff hosted the first Parent University workshop at Lincoln Park Elementary School on March 18, with five parents in attendance. The Healthy Eating & Active Living (HEAL) workshop was listed in the Parent University Catalog, and Lincoln Park selected it for their families. The presentation focused on practical, easy-to-implement strategies for supporting healthy habits at home and empowering families with useful tools and resources. Participants received supplemental materials including a budget-friendly recipe book, a planting kit, and measuring spoons and bowls. Glenn Duncan Elementary School has also selected the HEAL workshop, with a presentation scheduled in April.

Cannabis/Substance Prevention Highlights

- Staff worked with KPS3 to redesign the *Need to Know* cannabis educational cards to improve readability by incorporating a larger font and clearer layout. The educational

April 2026

card is a collaborative effort with the Washoe County Sheriff's Office and delivers evidence-informed messaging to adults who use cannabis regarding potential risks, including fire hazards, poisoning, and secondhand smoke exposure.



Brain Health Highlights

- CDIP staff met with the team at the Alzheimer's Association Reno office to exchange information about each organization's programs and identify roles best suited for collaboration in advancing brain health messaging. This meeting marked an important step in building a strong, ongoing partnership with the Alzheimer's Association, grounded in a shared commitment to leverage resources and expertise to enhance brain health prevention messaging and activities within public health efforts in Washoe County. As part of this partnership, CDIP staff will travel with the Alzheimer's Association Regional Director to attend the Risk Reduction Learning Collaborative, taking place April 29–30, 2026 in Atlanta, Georgia, at the Alzheimer's Association Center for Excellence. NNPH is one of only nine health districts nationwide selected to participate in this training. The Collaborative equips organizations with strategies to convene partners, engage community members, and align local interests to address cognitive health—particularly among underserved populations—using a public health approach to respond to the growing Alzheimer's and dementia crisis.

Injury Prevention Highlights

- Staff coordinated the Washoe Suicide Prevention Alliance meeting to review ongoing and upcoming activities. Reno Guns & Range became the first licensed firearm retailer in Nevada to participate in The Armory Project (TAP) pilot. TAP is a nationally recognized, evidence-based suicide

Chronic Disease Prevention and Health Promotion Section Report
Advisory Council on the State Program for Wellness and the Prevention of Chronic Disease

April 2026

prevention initiative that engages firearm owners and retailers in efforts to reduce suicide. Reno Guns & Range will receive suicide prevention training, resources, and a \$1,500 stipend to increase storage capacity. Additional retailers are considering participation. This effort strengthens suicide prevention by increasing awareness and access to temporary secure firearm storage options in Washoe County and Nevada.

- Staff conducted direct suicide prevention outreach at the “Crossroads of the West” gun show at the Reno/Sparks Convention Center on February 28 and March 1st. Participants engaged at the event received branded WSPA materials, including cable gun locks, gun cleaning mats, and suicide prevention information. Staff recorded 80 direct contacts with the target audience of firearm owners, as well as four contacts with licensed firearm retailers for future outreach opportunities.
- Staff provided direct education and outreach to students participating in the Carry Concealed Weapon (CCW) course at Scheels on February 28, 2026. A total of 38 participants received the suicide prevention education presentation and information on temporary secure firearm storage.
- Staff initiated development of a local Senior Falls multi-media campaign with Graphicka. Development is occurring in February and March, with promotion scheduled for March through May. The campaign aims to increase awareness of fall risks and promote practical prevention strategies such as home modifications, strength and balance exercises, and medication review through consistent, culturally relevant messaging. This coordinated approach supports reduced fall-related injuries, hospitalizations, and loss of independence among older adults.
- Enhance Fitness, a 16-week evidence-based group exercise and falls-prevention program concluded on February 26, 2026, at Fountains Senior Care. The program was successful, with participants and staff reporting improved strength and mobility. Ten seniors were served, with five participating consistently. Enhance Fitness will continue to be offered at Fountains Senior Care through their Activity Coordinator.
- Safe Mobility presentations on pedestrian and bicycle safety were delivered to 75 students at Sparks Middle School on February 9 and February 26. The content was well received, and pre/post testing showed a 90% increase in knowledge.
- Staff established a Safe Mobility Collaborative to bring together organizations focused on improving pedestrian and bicycle safety for children and families in Washoe County. The first meeting on February 5th included participation from Kiwanis Bikes, Reno Bike Project, Safe Kids Washoe County, Safe Routes to School, Truckee Meadows Bicycle Alliance, RTC, NDOT, and Washoe County Juvenile Services. Partners provided positive feedback on the value of the collaborative. Staff plans to coordinate monthly meetings moving forward.
- CDIP team coordinated and facilitated an Applied Suicide Intervention Skills Training (ASIST) on March 19–20, certifying 16 community members. ASIST is a two-day, evidence-based workshop that enhances community capacity for suicide prevention by equipping individuals with skills to recognize warning signs, engage in direct conversations about suicide, and develop immediate safety plans. Increasing the number of trained “suicide first aiders” strengthens early intervention,

**Chronic Disease Prevention and Health Promotion Section Report
Advisory Council on the State Program for Wellness and the Prevention of Chronic Disease**

April 2026

reduces stigma around help-seeking, and improves connections to local support services, ultimately contributing to a stronger safety net that helps prevent suicide attempts and deaths

- Staff also delivered a suicide prevention presentation during a Concealed Weapons Carry (CCW) class at Scheels in Sparks on March 28. Thirty-seven participants received education on suicide prevention, as well as information on temporary secure firearm storage and the Washoe Suicide Prevention Alliance Secure Firearm Storage Network.

**Chronic Disease Prevention and Health Promotion Section Report
Advisory Council on the State Program for Wellness and the Prevention of Chronic Disease
January - March 2026**

**Southern Nevada Health District (SNHD):
Office of Chronic Disease Prevention & Health Promotion (OCDPHP) Report**

Staff:

- Maria Azzarelli, Manager of the Office of Chronic Disease Prevention & Health Promotion announced her retirement from SNHD in February. Maria will retire from SNHD after nearly 27 years of service in May 2026. Transition planning is underway.
- Nicole Bungum, Supervisor of the Office of Chronic Disease Prevention & Health Promotion announced her retirement in March. She will retire from SNHD after 25 years of service in August 2026. Transition planning is underway.
- Lily Davalos, Health Educator II, was asked by the CDC to serve on the Steering Committee for the State and Community Health Media Center representing local public health. Her 2-year term began in March.
- Cassandra Meraz, Health Educator II was elected to sit on the 2026 Executive Board of the Nevada Tobacco Control & Smoke-free Coalition as the Board Secretary and Communications Chair.

Section News:

- Chronic Disease Physical Activity campaigns including the 'Let's Socialcise' and 'Get Your Pedal On' were selected by the CDC to be listed in the CDC's State and Community Health Media Center, an online repository of media and marketing materials for preventing obesity and chronic conditions. Once posted, they will be available for use by other communities around the country.
- We received approval of our Recognition Program Annual Status Report from the American Diabetes Association (ADA). This approval is required to maintain the ADA recognition for our Diabetes Self-Management, Education & Support (DSMES) classes.

Programming: SNHD Office of Chronic Disease Prevention & Health Promotion

Nutrition

The 2026 Pop-Up Produce Stands launched in March. A total of 12 Pop-Up Produce Stands are planned throughout the year. In addition to accepting cash, credit, debit and SNAP, this year the Pop-Up Stands will also accept and offer the Double Up Food Bucks Program (DUFEB) and Senior Farmers Market Nutrition Program coupons. The Nevada Department of Welfare and Supportive Services' (DWSS) SNAP Outreach Team also participates in the Pop-Up Stands to assist clients with issues regarding SNAP benefits. The Pop-Up Stands are a collaboration between SNHD, The Regional Transportation Commission of Southern Nevada (RTC), and Prevail Marketplace and are held at the Bonneville Transit Center. In March:

- 331 pounds of produce was sold
- 22% of all transactions were SNAP transactions (DUFEB eligible)
- Over 100 people were provided technical assistance by the DWSS SNAP Outreach Team.

Chronic Disease Prevention and Health Promotion Section Report
Advisory Council on the State Program for Wellness and the Prevention of Chronic Disease
January - March 2026

SNHD staff are working with The Just One Project (TJOP) to implement the Supporting Wellness at Pantries (SWAP) program in all 5 of their food pantries. In March, TJOP adopted a nutrition standards policy for their food pantries that is in alignment with the Healthy Eating Research guidelines for the charitable food system. SNHD staff are working with TJOP to develop educational materials for their pantries and fully implement the SWAP program.

Heart Disease Prevention & Self-Management

SNHD staff facilitated a Hypertension and Diabetes educational class in January at Destinations Alexander, an assisted living facility for older adults. In total, 26 participants attended the class.

SNHD staff commemorated Heart Month with activities to raise awareness of cardiovascular disease and help connect people to resources. February activities coordinated by SNHD staff included:

- Our annual Salon Talk event at BeSHOP partner, Expertise Cosmetology Institute on Go Red for Women Day. The theme was 'Healthy Heart, Healthy Mind, At Every Age' and focused on women's cardiovascular and brain health, featuring healthcare professionals from primary care, brain health, weight management, social work, and internal medicine. Councilwoman Shondra Summers-Armstrong provided opening remarks. Over 30 people participated in the event.
- A Valentine's Day "Love Your Heart" media campaign to promote heart-healthy habits and prevention. The campaign ran on multiple media platforms including social media and digital web banners.
- Facilitated hypertension-focused heart health classes at two Nevada Hand properties reaching 12 people.
- Was a guest on the *Healthier Tomorrow* radio show to promote cardiovascular health and available resources.
- In addition to our regular blood pressure screening in salons and barbershops, hosted two special faith-based blood pressure screening events with Mountaintop Faith Ministries and Nehemiah Ministries.

SNHD staff and partners provided free blood pressure screening, education, and referral at 7 schools, places of faith, and community organizations this quarter reaching over 50 people.

SNHD staff provided refresher training on the Pressure Point Challenge with Barber Shop Health Outreach Program (BSHOP) and Beauty Shop Health Outreach Program (BeSHOP) owners, barbers, and stylists. Pressure Point Challenge materials were also shared with BSHOP and BeSHOP locations. The Pressure Point Challenge, an engagement challenge for BSHOP and BeSHOP locations, will kick off in April and run through June.

Chronic Disease Prevention and Health Promotion Section Report
Advisory Council on the State Program for Wellness and the Prevention of Chronic Disease
January - March 2026

Diabetes Prevention & Self-Management

To promote 2026 DSMES classes, a news release was issued and generated multiple earned media opportunities including a news story that included interviews with 2 SNHD staff and a Spanish language class participant. A news release was also issued promoting Diabetes Alert Day and highlighting available resources.

This quarter, SNHD staff facilitated 7 Diabetes Self-Management, Education & Support (DSMES) classes in English, Spanish, and virtually reaching 46 participants.

SNHD staff developed and launched new online Diabetes Prevention Program in English and Spanish called Walking Together: Preventing Diabetes. The online course provides information and education to reduce the risk of developing type 2 diabetes. The program can be found on our Get Health (English) and Viva Saludable (Spanish) websites.

Obesity

SNHD staff presented at the Native American Fitness Council meeting at the Las Vegas Paiute Tribe Wellness Center in February. They provided information on 5210 resources and other chronic disease programs to approximately 50 people who attended the training.

SNHD staff provided a presentation on the 5210 guidelines and other programs and provided 5210 resources to 60 participants at a Healthy Habits Youth Conference.

SNHD staff facilitated the Partners for a Healthy Nevada (PHN) coalition meeting in February with 42 people in attendance. Educational presentations on the new Dietary Guidelines for Americans and GLP-1 medications were provided along with partner and advocacy updates. A meeting summary with presentation materials was sent via email to over 100 members.

Physical Activity

SNHD staff launched the annual Slam Dunk Health Program which will run into April. The model practice program is a partnership between SNHD, the Clark County School District (CCSD) and the Las Vegas Aces WNBA team and promotes physical activity and healthy eating. This year, 644 CCSD classrooms in 104 CCSD elementary schools have signed up to participate. This equals an estimated 15,200 students who will participate in the challenge this year.

Tobacco Control Program

The SNHD Tobacco Control Program hosted the 3rd Annual Because We Matter Tobacco Free Living Summit in February at the Pearson Community Center. The summit brought together community members, advocates, and experts to address the detrimental effects of tobacco use within the Black community including discussions on the youth vaping epidemic, flavored tobacco products, tobacco control policies, and cessation resources. Over 100 people participated in the summit and local media outlets promoted and covered the event. SNHD staff

Chronic Disease Prevention and Health Promotion Section Report
Advisory Council on the State Program for Wellness and the Prevention of Chronic Disease
January - March 2026

promoted the summit at the Nevada Minority Health & Equity Coalition quarterly meeting in January with 62 people in attendance.

SNHD's teen vaping prevention initiative, BreakDown, launched a new campaign this quarter to raise awareness of the association between vaping and mental health. Videos promoting CredibleMind were shared at outreach events at CCSD high schools. Through these approaches, we have reached over 25,000 students and increased the number of followers on social media by 4%. Additionally, staff worked with CCSD to distribute tobacco cessation resources to over 40,000 CCSD employees.

SNHD staff attended an educational outreach event with the Nevada Association of Student Councils (NASC) at their annual Southern Nevada Zone conference to promote tobacco/vape-free living and available tobacco cessation resources. Over 1,200+ students representing 44 high schools attended the event. In addition, the BreakDown movement successfully trained 714 student athletes on the health risks of vaping this quarter.

SNHD staff partnered with the Nevada Cancer Coalition on a campaign to reach tobacco retailers to In Nevada, reminding them about the importance of checking identification for all tobacco sales and associated penalties for selling tobacco to minors. Educational postcards were direct mailed to over 2,100+ tobacco retailers across Nevada. This campaign will include a series of three postcards that will be mailed over the next few months.

SNHD staff developed the new youth-led initiative called "Vive Real" to support culturally and linguistically relevant tobacco prevention messaging among Hispanic and Latino high school students. Vive Real's goal is to increase awareness about the health risks associated with vaping and nicotine addiction while promoting tobacco-free lifestyles and cessation resources at youth events. Vive Real participated in two events in March at Rancho High School and Matter Academy East, reaching over 800 teens.

In partnership with the SNHD Health Equity Program, Tobacco Control Program staff are working with the SPARK YAC (Students Promoting Awareness, Responsibilities, and Knowledge Youth Advisory Committee) to provide training and support for a project to increase awareness about the dangers of secondhand smoke and to encourage a voluntary tobacco-free policy at the College of Southern Nevada (CSN). SPARK YAC members are collecting photo pledges from fellow students to show support for the initiative. To date, over 1,300 photo pledges have been collected.

SNHD staff participated in the CSN Health and Wellness fair in March to increase awareness about the benefits of a tobacco-free campus policy and promote cessation resources. Staff distributed informational sheets about the CSN: Time is Now initiative to encourage voluntary tobacco-free campus policy adoption.

SNHD staff participated in the Market Trends event in February to promote the Be Healthy, Breathe Easy, Live Smoke-Free initiative. Market Trends is hosted by the Nevada Apartment Association to discuss a variety of multi-unit housing issues. Additionally, staff provided a

Chronic Disease Prevention and Health Promotion Section Report
Advisory Council on the State Program for Wellness and the Prevention of Chronic Disease
January - March 2026

presentation at the Nevada (NV) HAND all-hands team meeting on the benefits of tobacco-free policies. During the presentation, staff shared resources including materials and tobacco cessation resources for residents and staff. Over 300 NV HAND team members attended the presentation.

SNHD staff developed a new campaign to support the Smoke-Free Business Minimum Distance initiative aimed at encouraging bar and business owners to voluntarily expand their smoke-free policies. As part of this effort, 3,564 mailers were sent out to businesses and bars. As a result, 163 smoke-free signs were requested with 59 businesses expanding or adopting smoke-free policies.

Staff presented to the Nevada Attorney General Substance Use (SURG) response Workgroup on Prevention in March to provide information on the current tobacco and cannabis prevention funding landscape and provide recommendations and best practices for Nevada. The goal of the SURG Workgroup is to develop recommendations to improve Nevada's substance use prevention and response efforts.

Health Communications

SNHD OCDPHP oversees several health communications platforms and strategies. This quarter the SNHD team:

Developed and implemented 8 multi-component media campaign in English that raised awareness about heart disease, diabetes, nutrition, and physical activity and helped connect priority populations to available resources.

Developed and implemented 7 multi-component media campaigns in Spanish that raised awareness of heart disease, diabetes, nutrition, and physical activity and helped connect priority populations to available resources.

Maintained 4 social media platforms in English and Spanish:

- Get Healthy Facebook: 6,086 followers
- Get Healthy Instagram: 367 followers
- Viva Saludable Facebook: 709 followers
- Viva Saludable Instagram: 256 followers

Wrote and posted 3 blogs in English and 3 in Spanish on physical activity, heart disease, and nutrition topics. Over 220 people read the blogs.

Supported and coordinated 3 Healthier Tomorrow Radio Program shows. Shows air monthly on KCEP 88.1 FM. Topics included Tobacco Free Living Summit, Heart Health, and Pedestrian Safety.

Developed and sent 3 Tobacco Control Program and 1 Healthy Headlines e-newsletters. Tobacco newsletters are sent to over 375 people with an open rate of around 50%. Healthy Headlines was sent to over 6,728 people and had over a 33% open rate.

**Chronic Disease Prevention and Health Promotion Section Report
Advisory Council on the State Program for Wellness and the Prevention of Chronic Disease
January - March 2026**

Community Outreach/Engagement

In addition to activities listed above, OCDPHP Community Health Workers participated in three large scale community events reaching over 1,000 people this quarter. Chronic disease prevention and self-management materials were provided to attendees.

Attachment for Agenda Item #8

CHRONIC DISEASE PREVENTION AND HEALTH PROMOTION SECTION UPDATES TO THE
ADVISORY COUNCIL ON THE STATE PROGRAM FOR WELLNESS AND THE PREVENTION
OF CHRONIC DISEASE (CWCD)

The Chronic Disease Prevention and Health Promotion (CDPHP) section continues to advance statewide chronic disease prevention efforts across multiple program areas. Collectively, these programs strengthen Nevada's public health infrastructure, improve access to essential services, enhance data-driven decision-making, and expand health equity initiatives across communities.

PROGRAM AREAS

Office of Food Security (OFS)

Program Overview and Progress

The Office of Food Security (OFS) oversees Tobacco Settlement Funds for a Healthy Nevada (Hunger Funds), conducts quarterly meetings, gathers and analyzes partner-reported data, offers technical assistance, monitors expenditures, evaluates program effectiveness, and provides recommendations. Each fiscal year, the OFS holds four (4) meetings with each partner to assess their progress and facilitate discussions. Prior to each meeting, partners are required to submit a narrative and submit their data templates related to their SOWs and reporting obligations. These reports enable the OFS team to evaluate partners' progress and identify barriers to achieving their objectives. Additionally, the OFS monitors financial obligations by reviewing monthly fiscal reports to ensure that funds are utilized appropriately. These activities ensure that partners effectively use state funds to mitigate food insecurity in Nevada.

Impact and Future Plans:

Improve the quality of life and health of Nevadans by increasing food security throughout the state. The OFS is committed to exploring funding to support food security and is currently partnering with Medicaid and the Department of Social Services to apply for the Food is Medicine (FIM) State Officer Program to strengthen FIM capacity and advance policies to improve access to healthy food for people with diet-related health conditions. This is a three-year project made possible by the Food is Medicine Impact Fund, a joint initiative to integrate proven food and nutrition interventions into the U.S. health care system as covered, reimbursable medical benefits. Hosted by the Rockefeller Foundation and Catalytic Capital, the fund addresses the root causes of diet-related health conditions.

Fund for a Healthy Nevada (FHN) - Hunger Funds

Program Overview and Progress

In state fiscal year 2025, which spans July 1, 2024, to June 30, 2025, the Office of Food Security (OFS) received \$1,989,945.00 of which \$1,976,655.05 was utilized. The OFS assisted 1,406,378 duplicated individuals and distributed 1,480,821 pounds of food to them. Most of the individuals served were female, non-Hispanic, and between 18 and 59 years of age. The primary services offered by the partners included mobile food distribution and walk-in pantry services. The greatest challenge reported was the increasing cost of groceries.

Impact and Future Plans:

Partner activities will continue to follow the guidelines outlined in the 2023 Food Security Strategic Plan. The Notice of Funding Opportunity is currently being drafted for the State Fiscal Year (SFY) 28-29. The funding amount remains unknown for SFY28-29. The evaluation team continues to seek areas for improvement in the collection and assessment of FHN funds.

Wellness and Prevention Program (WPP)

Program Overview and Progress

The DPBH Wellness and Prevention Program (WPP) actively monitors Healthy Eating, Active Living (HealNV) website activity and improves the resources offered on the site. Additionally, the WPP addresses inquiries related to the interest expressed on the website regarding the 5210 Program. In collaboration with the Department of Education's school nurses and the Office of Analytics (OoA), the WPP has revised the standard operating procedures (SOPs) and templates for the collection of height and weight data. WPP initiatives are also supported by the Preventive Health and Health Services Block Grant (PHHS-BG) through coordinator and management support.

Impact and Future Plans:

Revisions in the SOP and improved communication channels will help in the interpretation of obesity rates and enhance the standardization of the data collection process for improved accuracy. The WPP is coordinating with the Public Information Officer (PIO) to ensure that the templates and SOPs are made available on the website at the earliest opportunity. Working on the 5210 website improves resources and support for healthy living in the communities of Nevada. Plans include the recruitment of a coordinator for WPP to assist with wellness matters in chronic diseases, including PHHS.

SNAP-ED

Program Overview and Progress

The NV SNAP-Ed State Plan aims to enhance the effectiveness and reach of Nevada's SNAP-Ed nutrition programs through improved collaboration, targeted assessments, and strategic marketing initiatives that promote healthy eating and active living across diverse communities. DPBH is prepared to provide technical assistance and educational outreach to at least eight (8) new FFY26 partner organizations serving SNAP-eligible populations to support their participation as “Breastfeeding Welcome Here” sites through the DPBH Maternal Child Health (MCH) Title V Program’s website (Find a Breastfeeding Friendly Business - Nevada Breastfeeds), increasing the availability of breastfeeding-supportive environments for caregivers of young children in priority populations. DPBH is also prepared to provide technical assistance and educational outreach to Chronic Disease Prevention and Health Promotion Section (CDPHP) programs or partner organizations serving SNAP-eligible populations to support the display and/or distribution of NV SNAP-Ed and SNAP-Ed’s WIC materials and/or resources, increasing the availability of nutrition-supportive environments for SNAP-eligible Early Childhood Education (ECE) and youth populations.

Impact and Future Plans:

Expanding partnerships and providing educational outreach for SNAP by distributing SNAP materials across the state of Nevada.

5210 Initiative

Program Overview and Progress

The 5210 Initiative partners convene quarterly. Carson City Health and Human Services (CCHHS), Carson Tahoe Health, and Dr. Steven Shane did not record any progress for the most recent quarter; however, they continued to support the program with materials and communications. The Southern Nevada Health District (SNHD) indicated that they were maintaining their 5210 initiatives, experiencing an increase in orders and interest from outside the state, particularly with the popularity of their activity book. In September 2025, they participated in the Healthy Kid Festival alongside the University of Nevada, Reno (UNR) Extension, where 15 health care providers interacted with 5210 materials. Northern Nevada Public Health (NNPH) announced that Springs Elementary School had enrolled in a comprehensive environmental assessment and the Healthy Café Program. NNPH also reported receiving a Silver Sage Award for the "5210 Loteria" game featured on the 5210 website. Significant interest was expressed during focus groups regarding the continued promotion of nutrition and physical activity. United Health Care (UHC) reported that its dietitians successfully presented to Clark County School District (CCSD) school nurses during staff development day, and the presentation was positively received. Resources were made available and can now be accessed on the

CCSD internal website. The farm box initiative continues to thrive, with patients benefiting from nutrition services. The DPBH Wellness and Prevention Program (WPP) is actively monitoring website activity and improving the resources offered on the site. Additionally, the WPP addresses inquiries related to interests expressed on the website regarding the 5210 Program.

Impact and Future Plans:

5210 partners continue to promote and provide technical assistance for the 5210 Program. More specifically, the NNPH reports that the Community Health Needs Assessment is currently underway, and key areas of focus will be established by spring. The goals remain to sustain support for the 5210 initiatives.

Obesity Prevention

Program Overview and Progress

The Obesity Prevention Initiative in Nevada is a joint effort aimed at tackling obesity and is part of the Chronic Disease Prevention and Health Promotion Section. Instead of functioning as a standalone program, it collaborates with other initiatives to fight obesity. The Wellness and Prevention Program (WPP) is vital in collecting height and weight data, working with school nurses and the Office of Analytics to improve obesity measurement techniques. This partnership helps in better understanding obesity rates throughout the state. The SNAP-Ed Program supports eligible SNAP beneficiaries in adopting healthier eating habits and maintaining an active lifestyle, encourages breastfeeding-friendly environments, and offers nutrition resources to schools and youth programs.

The 5210 Initiative, a community-driven program, emphasizes obesity prevention through school programs, events, and educational activities, engaging a broad audience, including healthcare providers and families.

The Diabetes Prevention and Control Program (DPCP) launches projects that educate people in healthy eating and empowerment (such as growing vegetables without soil), providing insights to improve food access and nutritional education.

The PHHS Block Grant program backs obesity prevention efforts for both adults and children by providing funding support in various local health districts. For adults, the programs distribute nutrition and exercise information, collaborate with food pantries, and partner with community organizations to conduct cooking demonstrations. For children, collaborations with Local Health Districts, various section-wide programs, and the Nevada Institute of Child Research and Policy

(NICRP) help in collecting BMI data, assessing school environments, and mapping safe routes to school.

The Cardiovascular Health (CVH) and WISEWOMAN programs address obesity as a risk factor for heart disease, with WISEWOMAN offering heart health screenings and guidance to women at risk for chronic diseases. This comprehensive approach ensures that obesity prevention is integrated into existing services, utilizing partnerships, funding, and community connections to reach a wider audience and create a lasting impact. It recognizes that addressing obesity requires a collective effort from healthcare, education, food systems, and community groups.

Impact and Future Plans:

The integrated efforts of Nevada's obesity prevention partners have strengthened the state's ability to monitor, prevent, and address obesity across diverse populations. Collaboration between programs has resulted in improved data collection on height, weight, and body mass index (BMI) trends, providing Nevada with a more accurate picture of childhood and adult obesity rates. Community-based initiatives, such as 5210 and Healthy Café, have increased awareness of daily healthy habits, engaging thousands of students, families, and healthcare providers. Programs such as SNAP-Ed and PHHS Block Grant activities have expanded access to nutrition education, cooking skills, and opportunities for physical activity. Meanwhile, WISEWOMAN and CVH efforts have helped more women receive heart health screenings and lifestyle guidance, linking obesity prevention directly to chronic disease outcomes. Together, these activities have broadened Nevada's reach, strengthened community partnerships, and aligned obesity prevention with chronic disease strategies statewide.

Moving forward, Nevada aims to deepen its obesity prevention efforts by expanding data collection systems, enhancing partnerships, and increasing community engagement. Planned efforts include improving BMI surveillance methods in schools, strengthening collaboration with healthcare providers, and developing culturally tailored educational materials for diverse populations. The state also intends to grow community-based- initiatives, such as the 5210 program, increase access to nutrition and physical activity resources through SNAP-Ed and PHHS Block Grant programs, and extend innovative projects, such as soil-less vegetable growing, to additional communities. Integrating obesity prevention more fully into chronic disease programs—such as diabetes, cardiovascular health, and maternal health—

will remain a priority. These future steps aim to build long-term, sustainable improvements in healthy eating, active living, and overall well-being- for Nevadans.

Tobacco Control Program

Program Overview and Progress

The Nevada Tobacco Control Program (TCP) leads statewide efforts to reduce the burden of commercial tobacco use through a comprehensive, evidence-based public health approach. Guided by national best practices and community-driven priorities, the TCP implements coordinated strategies that address the full continuum of tobacco prevention and control. The program's work focuses on four interconnected goals that together advance long-term health improvement for all Nevadans. Nevada's goals include 1. Prevent initiation of tobacco use among youth and young adults; 2. Promote quitting among adults and youth; 3. Eliminate exposure to second-hand smoke; and 4. Identify and eliminate tobacco-related disparities among population groups. Through these integrated strategies, the Nevada Tobacco Control Program advances a vision of a healthier Nevada, where all people can live, work, and thrive free from the harms of commercial tobacco.

TCP is currently funded by the CDC Year 5 supplemental grant and the Fund for Healthy Nevada (FHN) funds.

Impact and Future Plans

The Nevada Tobacco Control Program (TCP) continues to collaborate with program partners to conduct tobacco prevention and cessation activities throughout the state. During the reporting period, one of the program partners, Northern Nevada Public Health, conducted technical assistance outreach to behavioral health and substance use treatment facilities during the Join Together Northern Nevada (JTNN) All-Coalition meeting, engaging representatives from Center for the Application of Substance Abuse Technologies (CASAT), New Dawn Treatment Services, Northern Nevada HOPES (NN HOPES), Bristlecone Family Resources, Step2 Reno, and Quest Counseling & Consulting. It has been difficult to persuade behavioral health and substance abuse treatment facilities to transition to tobacco-free campuses. It is hoped that engagement with different treatment facilities made through JTNN will be beneficial in achieving this change.

Building Our Largest Dementia (BOLD) Program

Program Overview and Progress

Nevada's Division of Public and Behavioral Health (DPBH) currently houses the Building Our Largest Dementia (BOLD) infrastructure for Alzheimer's Act Program through the Chronic Disease Prevention and Health Promotion (CDPHP) section under the Alzheimer's and Related Dementias (ARD) program. This initiative is funded through the Centers for Disease Control (CDC) BOLD Grant under the Healthy Brain initiative to take a bold new approach to build core capacity in building a statewide dementia infrastructure by strengthening existing local community health capacity to empower health care providers and community leaders through education on Alzheimer's Disease and Related dementia (ARD) awareness, risk reduction, early detection, and leveraging resources across multiple sectors to improve equitable access to support people living with, caring for, and treating people living with ARD. CDPHP has been granted a 5-year BOLD grant (9/30/2023-9/29/2028, funded at \$450,000/year) in 2023. In this new grant cycle, the Nevada BOLD program will partner with both the University of Nevada, Reno (UNR) Dementia Engagement, Education, and Research (DEER) program as well as the Alzheimer's Association in Nevada.

Impact and Future Plans:

The program has collaborated with its two program partners to continue educating the Dementia Friendly Nevada Coalition, the public, caregivers, and healthcare providers about Alzheimer's disease and related dementias. During the reporting period, one of the major achievements was the completion of the second edition of the Dementia Self-Management Guide. Following the success of the first edition, inputs from providers, caregivers, and people with lived experience were incorporated into the second edition to further refine various sections of the guidebook.

Cardiovascular Health (CVH) Program

Program Overview and Progress

Nevada's CDC-funded cardiovascular health program (DP23-0004 and DP23-0005) has maintained strong momentum across our seven subrecipients. The Heart Healthy Ambassador Blood Pressure Self-Monitoring (HHA-BPSM) program has demonstrated clinically significant blood pressure reductions among participants. Procurement efforts for Bluetooth-enabled blood pressure monitors to support

rigorous evaluations of innovative home blood pressure self-monitoring are advancing.

Impact and Future Plans:

Our statewide cardiovascular health learning collaboration (LC) has continued to build a community of practice with 100% engagement by subrecipients.

Looking ahead, a stroke data registry report is currently being compiled and will offer valuable population-level insights to inform future programming and resource allocation. The Nevada Community Health Integration Project is also advancing community-clinical linkages that support longer-term sustainability beyond the grant period.

Diabetes Prevention and Control Program (DPCP)

Program Overview and Progress

The Diabetes Prevention and Control Program (DPCP) is half-way through Year 3 for the CDC grant DP-23-0020, titled "A Strategic Approach to Advancing Health Equity for Priority Populations with or at Risk for Diabetes." The program was granted a \$900,000 award in the third year of the grant. In addition, a proposal for Expanded Authority totaling \$154,814 has been approved by the Interim Finance Committee (IFC). These funds will be available for use in Quarter 4 of Year 3 and will support the continuation of activities established during Years 1–3. CDC provided guidance on implementing a social determinant of health (SDOH)-related system or population-level project requiring an allocation of at least 10% of the annual budget. The SDOH project integrates hydroponics with diabetes prevention and management, with the goal of fostering healthier lifestyles for individuals living with diabetes. Hydroponic gardening—a method of growing plants in a water-based, nutrient-rich solution without soil—offers several advantages. Plants grow quickly, the systems are portable and require minimal maintenance, and the absence of soil eliminates common pests and the need for pesticides. This approach supports the production of clean, healthy vegetables that can enhance nutrition and support diabetes self-management. Essential to the program's progress has been the renewal and enhancement of strategic partnerships with institutions, such as the University of Nevada, the Reno – Sanford Center for Aging, the Nevada Business Group on Health, and Roseman University of Health Sciences.

Impact and Future Plans:

The DPCP has made meaningful and impactful strides in advancing health equity among populations at heightened risk for diabetes. Through strong collaborations with key partners, the DPCP has helped deploy targeted interventions that respond to the unique needs of diverse communities across Nevada. A major highlight of

these efforts is the creation of the Statewide Engagement Meetings (STEM). STEM was developed to strengthen collaboration across the state by ensuring that multiple perspectives are included in shaping Nevada's diabetes-related priorities. This platform brings together government agencies, community-based organizations, Native American agencies, and universities in both Northern and Southern Nevada, building a unified network of professionals dedicated to improving diabetes outcomes. The STEM initiative addresses a wide range of factors influencing diabetes prevention and management by leveraging the collective expertise of Nevada's diabetes workforce. Its core purpose is to unite colleagues and partners around a shared vision: reducing the burden of diabetes across the state. This begins with presenting comprehensive statewide data on diabetes prevalence, risk factors, and health disparities affecting urban, rural, and tribal communities. In addition to data-driven collaboration, STEM highlights successful programs already operating throughout Nevada, such as Diabetes Self-Management Education and Support (DSMES), Diabetes Prevention Program (DPP), hydroponics-based nutrition education, community care hubs, and other community-driven prevention models. By showcasing these effective strategies, the initiative helps identify opportunities for scaling, replication, and deeper integration across communities. Together, these efforts reflect the DPCP's commitment to fostering equitable, community-centered approaches that empower partners statewide and strengthen Nevada's collective response to diabetes.

Women's Health Connection (WHC)

Program Overview and Progress

The Women's Health Connection (WHC) program continues to play a vital role in providing breast and cervical cancer early detection services to low-income, uninsured, underinsured, and high-risk women across Nevada through support from the CDC's National Breast and Cervical Cancer Early Detection Program (NBCCEDP). In the State Fiscal Year (SFY) 2023, the program screened 6,904 women, including 5,410 for breast cancer and 4,290 for cervical cancer, and expanded its reach in Program Year 2 by serving 7,005 women. Building on this progress, the WHC has set a goal of serving 7,250 women in SFY26 (June 30, 2025–June 29, 2026) through continued outreach and screening efforts. In FY26, as of March 13, 2026, WHC had served 3,248 clients. Of these, 2,566 were served for breast cancer services and 1,997 for cervical cancer services. Program services are supported through strong partnerships with B&A Entertainment Services, Access to Healthcare Network (AHN), Nevada Health Centers (NVHC), and the Nevada Cancer Coalition (NCC), which collectively help strengthen statewide service delivery and access to care. The WHC team is largely staffed and continues to enhance program operations while actively

recruiting for the Women’s Health Connection coordinators to further support program implementation and coordination.

Impact and Future Plans:

The Women’s Health Connection (WHC) program continues to improve access to breast and cervical cancer screening and diagnostic services for underserved women throughout Nevada, contributing to early detection and timely care for populations at increased risk. Strong collaboration with key partners—including the Access to Healthcare Network (AHN), Nevada Health Centers (NVHC), Nevada Cancer Coalition (NCC), and B&A Entertainment Services—has strengthened outreach, education, and service delivery statewide. Current program data show that Hispanic women represent 95.04% of women receiving breast and cervical cancer screenings through WHC, reflecting the program’s success in reaching this priority population. At the same time, WHC continues to refine outreach strategies to increase engagement among other underserved groups, including Black or African American women, and has adjusted its priority population target to serve at least 47 individuals within this group. Moving forward in SFY26, the program will continue to enhance data monitoring, outreach coordination, and care management practices to expand screening access, strengthen partnerships, and reduce barriers to cancer screening, supporting the program’s broader goal of advancing health equity across Nevada.

Comprehensive Cancer Control Program (CCCP)

Program Overview and Progress

Nevada’s Comprehensive Cancer Control Program (CCCP), funded through the CDC’s National Comprehensive Cancer Control Program (CDC-RFA-DP22-2022), continues to lead statewide efforts to reduce the burden of cancer through coordinated prevention, early detection, survivorship support, and health equity initiatives. Working closely with the Nevada Cancer Coalition, the program advances strategies that address cancer risk factors, improve screening access, strengthen survivorship resources, and reduce disparities in care. Current activities include coalition engagement and evaluation efforts, such as the completion of a statewide membership survey distributed to 575 members that generated 77 responses, providing actionable feedback to improve member engagement and program collaboration. The coalition also continues to expand partnerships with new members and organizations to strengthen statewide cancer control efforts. Additional initiatives support skin

cancer prevention outreach in schools, colorectal cancer screening promotion through community education and Fecal Immunochemical Test (FIT) kit distribution at events, and survivorship navigation services through the ThriveNV network, which connects cancer survivors and the public with resources and support. A community of practice (CoP) is a group of people who share a passion, concern, or profession and engage in regular, collective learning to improve their skills and knowledge. The Nevada Cancer Coalition is starting a CoP for navigation. Potential members have been emailed, as well as sent in a newsletter and shared by social media. The opportunity will be shared in early Q3, and applications were due on January 15, 2026. The launch of the CoP will be from January 29, 2026, through April 2026. These coordinated efforts continue to strengthen Nevada's cancer prevention and control infrastructure while advancing the goals of the Nevada Cancer Plan.

Impact and Future Plans:

Nevada's Comprehensive Cancer Control Program (CCCP) continues to advance statewide efforts to reduce the cancer burden by improving access to prevention, screening, and survivorship resources, particularly for underserved and priority populations. Through strong collaborations with partners, such as the Nevada Cancer Coalition and other community partners, the program supports initiatives that enhance outreach, strengthen care coordination, and expand navigation services for individuals affected by cancer. For example, ThriveNV navigation services provide critical support by helping cancer survivors and community members overcome barriers to care and connect with appropriate medical, social, and supportive resources. Ongoing coalition engagement and partner recruitment efforts continue to strengthen Nevada's cancer control infrastructure and improve collaboration across organizations working in cancer prevention and survivorship. Moving forward, CCCP will focus on strengthening data-informed decision-making, increasing engagement with healthcare providers and community partners, and supporting implementation of priorities outlined in the 2026–2030 Nevada Cancer Plan to further reduce cancer disparities and improve outcomes for Nevada residents.

WISEWOMAN Program

Program Overview and Progress

Nevada's WISEWOMAN (Well-Integrated Screening and Evaluation for Women Across the Nation) Program, supported through a CDC cooperative agreement (NU58DP007674), focuses on reducing cardiovascular disease risk among women aged 35–64 years who are low-income, uninsured, or underinsured and enrolled in the Women's Health Connection (WHC) program. Working in partnership with the Access to Healthcare Network (AHN) and participating clinical providers, the program delivers cardiovascular risk screenings, care coordination, risk reduction counseling, and referrals to Healthy Behavior Support Services (HBSS) that support lifestyle changes and chronic disease management. During the current reporting period, 70 participants received cardiovascular risk screening, and program staff provided follow-up care coordination and referrals for individuals requiring additional support services. To date, 306 women have been enrolled in the program, reflecting continued progress in expanding access to cardiovascular prevention services for eligible women in Nevada. Operational improvements, including provider training, ongoing quality assurance activities such as claim audits, and implementation of the Med-IT data management system, have strengthened program monitoring, documentation, and service delivery. Program progress and early implementation outcomes have been positively acknowledged by the Centers for Disease Control and Prevention (CDC), reflecting continued advancement toward program goals.

Impact and Future Plans:

The WISEWOMAN Program continues to strengthen cardiovascular disease prevention efforts in Nevada by improving care coordination, data systems, and partnerships that support women at increased risk for chronic disease. Early implementation activities have established a coordinated service structure that connects eligible participants with screening, risk reduction counseling, and lifestyle support services, while strengthening program monitoring through the Med-IT data management system. Collaboration with clinical partners, including All for Health, Health for All/Guadalupe Medical Center, and San Juan Medical Center, has expanded the provider network and strengthened referral pathways for participants who require additional health behavior support services. Program staff have also enhanced enrollment and intake processes to better capture social determinants of health (SDoH) and identify participant support needs. Moving forward, the program will prioritize increasing participant engagement, strengthening referral coordination with the Nevada Cardiovascular Health Program and community partners, and continuing to expand the provider network to broaden access to

services statewide. Additional efforts will focus on optimizing Med-IT reporting capabilities, enhancing provider and community outreach, and building sustainable bidirectional referral systems that improve access to cardiovascular risk reduction services for Nevada’s priority populations.

Preventive Health and Health Services -PHHS Block Grant

Program Overview and Progress

The purpose of the Preventive Health and Health Services Block Grant (PHHS-BG) is to support and coordinate statewide public health initiatives by funding evaluation, prevention, data collection, and community-focused activities that help programs meet their planned objectives on schedule. The PHHS Block Grant program is on track entering the second quarter, with all major workplan objectives progressing as scheduled. Evaluators continue active participation in Local Health District (LHD) meetings and Community Health Assessment and Community Health Improvement Plan (CHA/CHIP) activities, developing briefs and scorecards as outlined, while baseline assessment tools and staffing requirements are advancing appropriately. Adolescent dating violence prevention efforts have moved from curriculum development into school-based pilot implementation, accompanied by the launch of the statewide “Healthy Relationships” media campaign. Adult obesity initiatives are meeting early-quarter targets through ongoing dissemination of nutrition and physical activity modules, pantry partnerships, volunteer-led demonstrations, and regular posting of resources on the Nevada Healthy Eating Active Living website. Childhood obesity activities are also aligned with timelines, with BMI data collection, school environment assessments, and active commute mapping underway. Chronic Kidney Disease (CKD) components, including activities of the Chronic Kidney Disease Advisory Committee (KDAC), remain on schedule with quarterly meetings and review of funding opportunities within the State. Additional plans to improve partner engagement, toolkit drafting, and planning for upcoming town halls have begun. PHHS activities across all objectives remain timely and consistent with the planned Q2 milestones.

Impact and Future Plans:

PHHS Block Grant activities are demonstrating positive impacts as programs advance into Quarter 2, with evaluation integration strengthening coordination between state evaluators and local health departments and supporting clearer insights into resource allocation, partnerships, and community needs. Prevention efforts across adolescent dating violence, adult obesity, and childhood obesity are

beginning to show engagement momentum through curriculum pilots, media outreach, school-based- assessments, and community-level- nutrition and physical activity initiatives. KDAC advisory meetings and community engagement activities remain at the collaborative forefront, ensuring continued progress on program development and partner collaboration. Looking ahead, programs will expand data collection, deepen pilot implementations, and continue building the tools, reports, and resources required for mid-year- and end-of-year-- milestones—positioning the PHHS workplan to meet its annual objectives on time.

Attachment for Agenda Item #9



Building Health Capacity: growing toward Healthy People 2030

PHHS FY2025 (FFY26)



NEVADA DIVISION of PUBLIC
and BEHAVIORAL HEALTH

ALL IN GOOD HEALTH.



ABOUT DPBH

MISSION

To protect, promote, and improve the physical and behavioral health and safety of all people in Nevada, equitably and regardless of circumstances, so they can live their safest, longest, healthiest, and happiest life.

VISION

A Nevada where preventable health and safety issues no longer impact the opportunity for all people to live life in the best possible health.

PURPOSE

To make everyone's life healthier, happier, longer, and safer.



AGENDA

- **Foundations**
 - Overview: Nevada PHHS Block Grant
 - Sustainability Infrastructure
 - Alignment With SHIP Priorities
- **Investments**
 - Public Health Infrastructure Investment
 - Cross-Program Collaboration
 - Equity: Rural & Frontier
 - Workforce Development
- **Accountability & Impact**
 - Performance Framework
 - Program Impact Case Study
 - Transparency, Lessons Learned & Next Steps
 - References

PHHS Block Grant Funding FY2025



Public Health Infrastructure

A significant portion of funding supports strengthening systems and facilities for an effective public health response across communities.

Injury and Violence Prevention

Funding helps initiatives aimed at reducing injuries and preventing violence through education and community programs.

Educational and Community-Based Programs

Resources are dedicated to health education and outreach, empowering communities for improved well-being.

Additional Public Health Areas

Funds also support nutrition, immunization, maternal health, heart disease, oral health, and administration for comprehensive impact.

PHHS Block Grant Flexibility



Grant Flexibility

The PHHS Block Grant offers recipients the ability to choose public health priorities, unlike rigid categorical grants.



Empowering Local Recipients

Recipients are empowered to set solutions based on their communities' unique needs and challenges.



Innovative Evidence-Based Solutions

Recipients can implement innovative, evidence-based programs to bridge critical funding gaps and advance public health.



Grant Advantages



Flexibility

Grant recipients have the flexibility to tailor funds to local public health needs without rigid federal requirements.



Rapid Response

Funds can be quickly allocated for urgent needs, supporting swift action and flexible dollars to pivot in times of need.



Focus on Prevention

The grant invests in evidence-based prevention strategies, addressing risks such as child and adult obesity, food insecurity, and rape prevention and education in Nevada.

Empowering Local Communities



Community-Driven Action

Local advisory committees actively participate in project planning, ensuring community needs shape public health initiatives.

Filling Funding Gaps

The PHHS Block Grant supports essential services not funded by restrictive federal sources, bridging critical funding gaps in communities.

Strengthening Public Health Infrastructure

The grant adapts to unique needs and challenges of each jurisdiction, reinforcing public health infrastructure nationwide.

Improving the Health of all Nevadans



The Nevada Division of Public and Behavioral Health (DPBH) protects and improves the health of all Nevadans, and the Preventive Health and Health Services (PHHS) Block Grant provides core flexible funding to advance that mission.

- Funds infrastructure and core prevention programs.
- Enables local priority-setting and rapid implementation.
- Uses advisory committees for community-informed decisions.
- Leverages partnerships to expand reach and fill gaps.
- Aligns investments with Nevada's **State Health Improvement Plan (SHIP)**.
- Advances **health equity** and workforce development.
- Reports progress through briefs, bidirectional communication and **accreditation** planning.

Key Federal PHHS Block Grant Partners



NEVADA DIVISION of PUBLIC
and BEHAVIORAL HEALTH

- [Association of State and Territorial Health Officials](#)
- [National Association of Chronic Disease Directors](#)
- [National Association of County and City Health Officials](#)
- [National Governors Association](#)



Expanding Partnership Capacity

Collaborative Health Partnerships

Multiple organizations work together with local health districts and policy research groups to address public health needs.

Cross-Program Initiatives

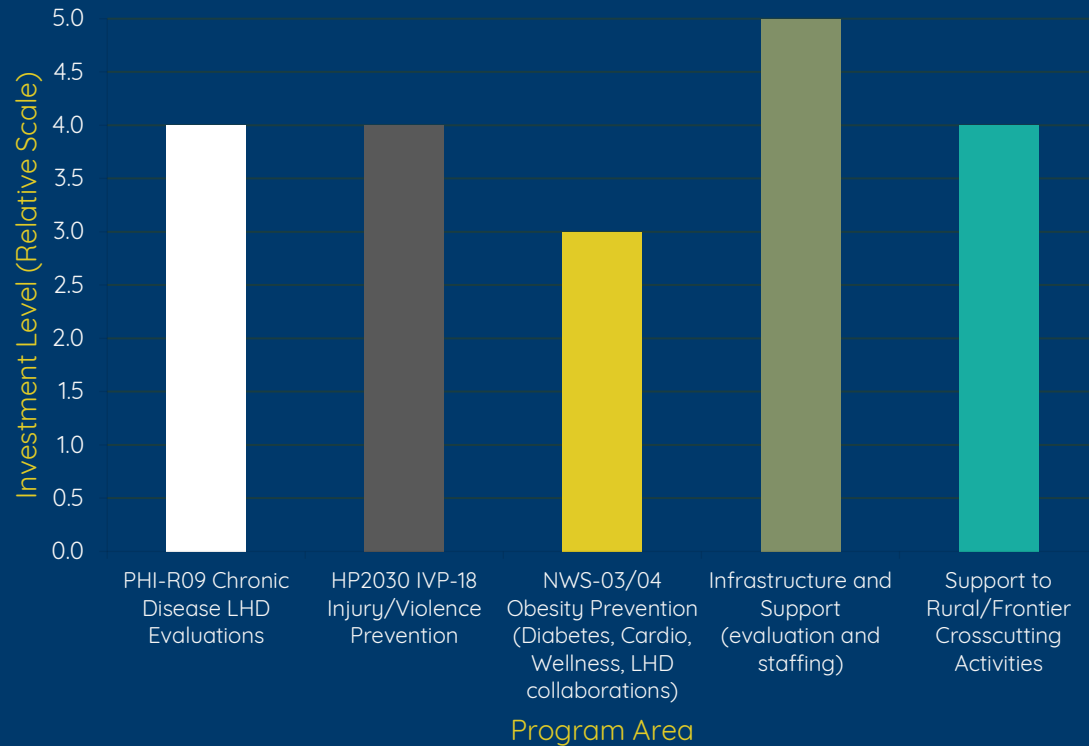
Joint initiatives across programs help improve community health outcomes through innovative and coordinated approaches.

Enhanced Capacity and Effectiveness

Sharing resources and strategies enables partners to address statewide public health challenges more effectively.



Core Program Investments by Strategic Focus



Strategic Alignment with SHIP Priorities

- PHI-R09 supports chronic disease prevention programs across local health districts with state evaluators and coordinators providing technical assistance
- HP2030 IVP-18 targets injury and dating violence prevention with 600 students in bystander intervention training
- NWS-03/04 obesity programs leverage Diabetes, Cardiovascular, the Office of Food Security and Local Health District Partnerships, integrated with community health activities and across the Office of Food Security
- Cross-program collaboration Diabetes, Cardiovascular, Wellness, and KDAC/CWCD guide efforts to improve State outcomes, in addition to single program successes

Cross-Program Collaboration Model

- Diabetes, Cardiovascular, Office of Food Security and Wellness programs share evaluation staff in addition to the Technical Assistance and support to local health districts
- State staff work across program boundaries enabling common language for outcomes and reducing duplication of measurement efforts
- Support for the Kidney Disease Advisory Council (KDAC) and the Advisory Council on the State Program for Wellness and the Prevention of Chronic Disease (CWCD)
- CWCD advisory provides guidance on disease prevention infrastructure supporting a unified community health approach
- Collaboration strengthens coordination across jurisdictions while still supporting the local tailoring of programs within shared statewide goals



NEVADA DIVISION of PUBLIC
and BEHAVIORAL HEALTH

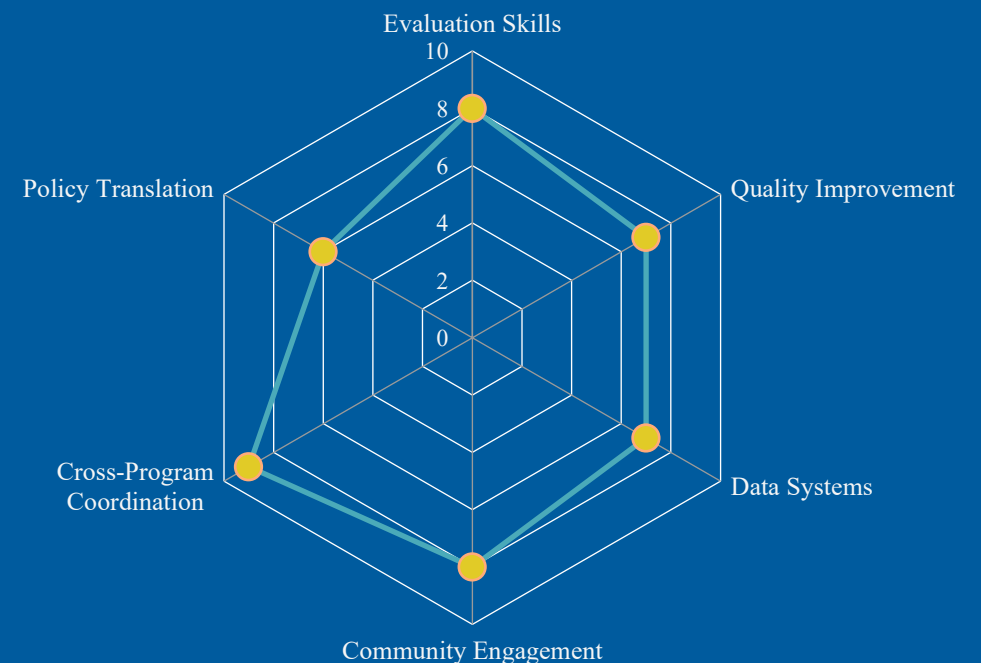
Collaboration Shared Staff
Technical Assistance Local Health Districts
Common Language
Reduce Duplication
Infrastructure Coordination Jurisdictions
Tailoring MCH QI Infrastructure Coordination

Evaluation Prevention Outcomes
Reduce Duplication
Advisory Council
Statewide Goals
Diabetes Cardiovascular Health
Food Security
Wellness
MCH QI

Workforce Development as Infrastructure

- PHHS supports evaluation, quality improvement, and coordination roles as permanent infrastructure rather than temporary project staffing
- FTE evaluators and Coordinators provide technical assistance and capacity building across multiple local health districts with competency-based training frameworks
- Evaluation training programs build evaluation capacity ensuring jurisdictions are supported and can sustain measurement and learning after grant cycles end
- Mentorship, and pipeline development create pathways for emerging public health professionals while shared objectives reduce jurisdictional duplication through Internships and Public Health Associate Program

Development Areas





Measurable Performance Framework

Program
Measures

Geographic
Measures

Cultural
Measures

Relationship
Measures

- Program Measures — targets, benchmarks, impact metrics, technical assistance
- Geographic Measures — statewide program reach, rural–urban equity, priority populations
- Cultural Measures — relevance and fit, adaptations based on community context
- Relationship Measures — engagement, trust, responsiveness, program co-design with partners



NEVADA DIVISION of PUBLIC
and BEHAVIORAL HEALTH

Plan

Co-design evaluation frameworks
with program implementation teams

Implement

Deploy pre/post assessment tools
and ongoing data collection

Analyze

Conduct evaluation briefs
and stakeholder huddles

Adapt

Use findings to refine programs
and strengthen outcomes

Report

Document impact through case
studies
and Progress Reporting

Coordination and Evaluation Excellence

- Capacity building occurs through coordinators and evaluators working directly with local health districts in partnership
- Community assessments provide quantitative measures while qualitative feedback captures context and implementation nuances
- Common language for outcomes across programs enables cross-LHD collaboration and reduces measurement burden through shared tools and frameworks
- Program partnership investments simplify accountability work and flexibility proves valuable during program execution.

Program Impact: Sexual Violence Prevention Case Study — Partner: Nevada Coalition to End Domestic and Sexual Violence

600 students in bystander training

Pre/post knowledge assessments

- 600 students completed bystander intervention training focused on injury and dating violence prevention across multiple school districts
- Pre- and post-knowledge assessment tools measure behavioral intention changes and student confidence in intervention scenarios
- Community-responsive programming tailors content to local contexts while maintaining evidence-based intervention fidelity and evaluation rigor
- Quantitative and qualitative feedback supports ongoing program adaptation ensuring relevance and effectiveness for diverse student populations





Transparency and Stakeholder Engagement

Regular briefings and technical assistance, scorecards, and impact reports create feedback loops with policy partners and community stakeholders



Briefings

Stakeholder briefings with performance scorecards provide transparent progress updates against established benchmarks and enable mid-course corrections



Program Huddles

Evaluation briefs and huddles among programs create regular touchpoints for data-informed decision making and cross-program learning opportunities



Impact Documentation

Impact reports and APR submissions synthesize quantitative outcomes with qualitative case studies demonstrating return on investment to federal funders

Lessons Learned and Ongoing Challenges

What's Working

- **Flexible PHHS** funding supports local health districts in adapting activities to emerging community needs while staying aligned to statewide priorities.

Infrastructure investments in data systems and core operations improve readiness and reduce one-off work across Nevada PHHS initiatives.

Workforce development efforts are strengthening evaluation and program management capacity within health districts, improving continuity beyond individual projects.

- **Routine check-ins** make expectations clearer for cross-program partners and support consistent policy engagement across jurisdictions.

Ongoing Challenges

- **Rural/frontier staffing** gaps persist for specialized roles, creating uneven capacity for continuous improvement across health districts.

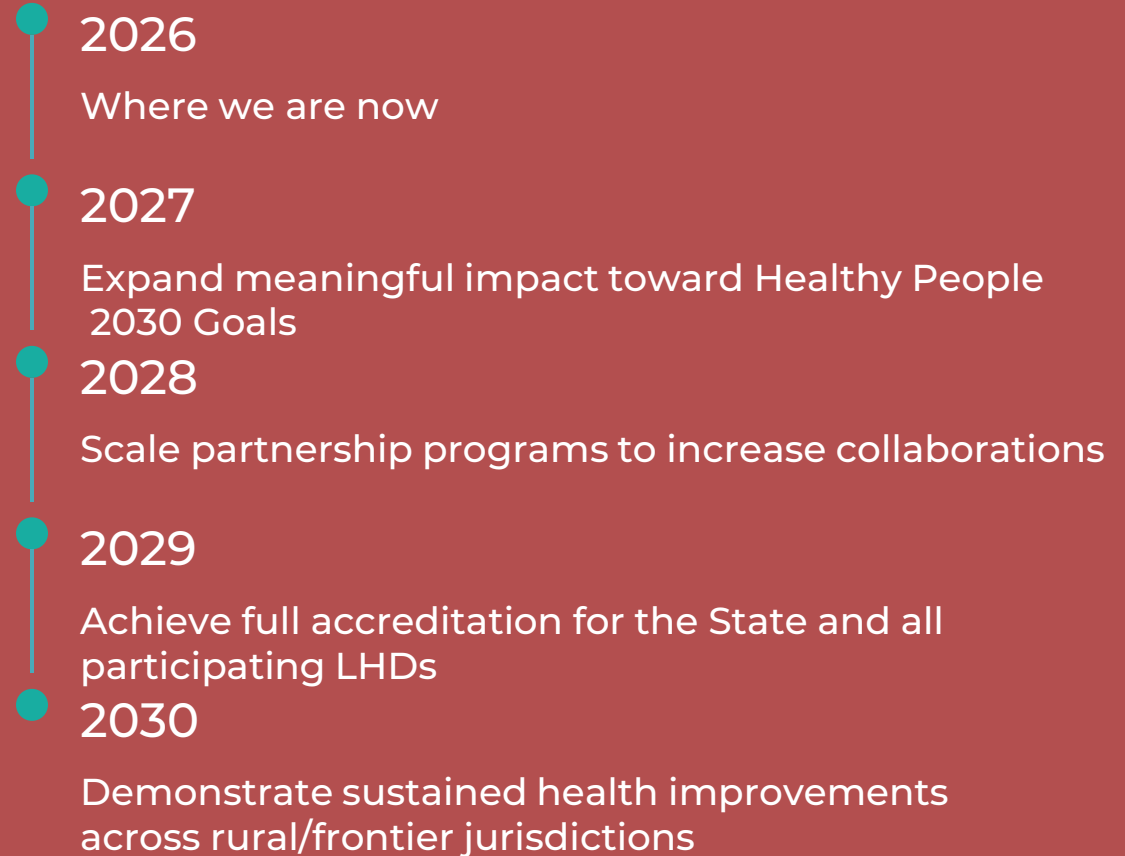
Data and reporting expectations can vary by program, requiring additional alignment to keep support meaningful without adding administrative burden.

Cross-program coordination takes sustained facilitation to avoid duplicating community outreach and to keep local partners from receiving unclear guidance.

- **Balancing flexibility** with coherent statewide practice remains a challenge, especially when scaling promising approaches across diverse Nevada communities.

Future Opportunities and Strategic Directions

- Continued workforce strengthening will expand capacity to jurisdictions currently underserved by technical assistance
- Deeper policy-practice integration through NICRP collaboration and committee direction ensures alignment with evolving federal guidance and emerging public health priorities
- Cross-LHD networks formalize knowledge exchange reducing duplication and accelerating evidence-based practice adoption
- Ongoing adaptation ensures programs remain responsive to community needs while maintaining fidelity to core public health competencies



QUESTIONS?



**NEVADA DIVISION of PUBLIC
and BEHAVIORAL HEALTH**

ACRONYMS

APR — Annual Performance Report

DPBH — Division of Public and Behavioral Health

PHHS — Preventive Health and Health

Services SHIP — State Health Improvement Plan

WIC — Women, Infants, and Children

DPP — Diabetes Prevention Program

CVH — Cardiovascular Health

RPE — Rape Prevention and Education

TA — Technical Assistance

SNAP — Supplemental Nutrition Assistance Program

FS — Office of Food Security

MCAH — Maternal, Child & Adolescent Health

5210 — 5-2-1-0 Initiative

QI — Quality Improvement

KPIs — Key Performance Indicators

SDoH — Social Determinants of Health



**NEVADA DIVISION of PUBLIC
and BEHAVIORAL HEALTH**