

# **Central Nevada Health District Health Officer's Report**

Submitted May 27, 2025 Tedd McDonald MD, OD, MHCA

Attached is a summary of events and activities for the Central Nevada Health District (CNHD) for the second quarter of 2025

## **Administration**

As of March 28, 2025, Daren Winkelman retired from Central Nevada Health District. Shannon Ernst was appointed effectively immediately in the interim.

Ms. Ernst has been working to evaluate the current structure and financials to align the organization for suitability. A full evaluation of staffing and partnering communities was completed effective May 22, 2025.

On June 2, 2025, a CNHD Health Board Workshop will be conducted to review the following:

- 1. Review of Core Public Health Functions vs. current services being delivered with current service levels and cost per service.
- 2. Review of current organizational structure
- 3. Fiscal forecast

Finally, three recommendations will be provided to the board to review for future services and overall organizational structure. The board will be requested to provide feedback on the structure of CNHD for July 1, 2025, at the meeting to be held in June 2025.

It is the goal of Ms. Ernst to increase administrator oversight, community partnerships, and overall transparency of the organization as it moves forward.

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# **Environmental Health**

## 1. Partnership Collaboration and Relationships

The Environmental Health (EH) Program continued to maintain and expand key partnerships across all four counties—Churchill, Eureka, Mineral, and Pershing in addition with various State agencies, including the Bureau of Drinking Water, Nevada Department of Environmental Protection (NDEP), and the State Department of Public and Behavioral Health.

EH staff engaged with statewide organizations such as the Nevada Food Safety Task Force and maintained communication with NV-NEHA, ensuring rural representation and alignment with state and national best practices. A significant area of focus this month included coordination with the Nevada Department of Agriculture to address the growing number of inquiries regarding wholesale and retail meat sales in rural and frontier communities. In Pershing County, EH maintained collaboration with NDEP's Bureau of Solid Waste, specifically in support of the approval process for a new RV park in Imlay, NV. Mineral County's EH team also emphasized transparent communication by formally sharing operational updates and inspection plans with the county's building official.

# 2. Meetings and Professional Development

EH staff participated in several relevant meetings and training events to support professional growth and coordination:

- Western States Program Standards Network Meeting: Participation in regional discussions on standardization and regulatory updates.
- Nevada Childhood Lead Poisoning Prevention Meetings: Contributed insights from rural Nevada to the state's ongoing prevention strategy.
- National Environmental Assessment Reporting System: Staff received a scholarship
  to attend a national conference for environmental assessment in Atlanta, Georgia
   Additionally, EH staff are involved in planning sessions with the Nevada Department of Public

and Behavioral Health to prepare for the 2025 Burning Man event, ensuring EH support and regulatory compliance for large-scale temporary events.

#### 3. County-Efforts

#### **Churchill County**

- Completed 38 routine inspections across various establishment types.
- Site Visits, 2, and 1 change of ownership inspection.
- Participated in 6 Plan Review, including blueprint revisions and consultations for new business openings, 2 construction rough inspections and 2 non-operational inspections.
- Completed 5 temporary event inspections.

#### **Eureka County**

- 1 routine inspection, 1 change of ownership inspection for RV park, and 1 investigation.
- Responded to multiple public inquiries related to Individual Sewage Disposal Systems (ISDS). Two percolation tests phone calls were scheduled but postponed due to site readiness. Residents are encouraged to contact EH when ready, so timely inspections can be coordinated.

#### Mineral County

- Conducted 2 pool inspections, and 1 preopening inspection for a new invasive body decoration (tattoo/piercing) establishment, which was approved for operation, and 1 temporary event inspection.
- For the Mineral County Rodeo and Armed Forces Day Event, EHS staff completed 14 temporary event inspections, 2 routine inspections, 1 invasive body decoration routine inspection and 1 invasive body decoration temporary event inspection.

 EHS staff identified several establishments undergoing remodels, alterations, or ownership changes, and promptly communicated these updates to the local building official to ensure regulatory alignment and awareness.

### **Pershing County**

- Maintained active coordination with NDEP's Bureau of Solid Waste regarding approval of a new (existing-unpermitted) RV park in Imlay, NV.
- EH Staff have been in contact with special event coordinators to share temporary food permitting information and regulatory requirements.
- Attended the Tribal Health Event, where staff hosted a booth to provide education on food safety, water, sanitation, and other public health topics in addition to other programs.

# 4. Internal Operations, Planning & Preparedness

The Environmental Health team continued the development of internal protocols, procedures, and workflow processes to enhance task efficiency and standardization across the district. These efforts are essential in preparing for a surge in inspections, permit requests, and event support throughout the upcoming summer season.

Staff are actively reviewing and updating internal processes, ensuring that clear, accessible guidance is available online and via social media channels. These materials aim to support both event organizers and vendors with accurate, timely information.

An uptake in inquiries was observed related to:

- Mobile food units and business startups
- Construction, remodeling, and structural alterations of existing establishments
- Wholesale and retail meat sales regulations

In response, EH staff are ensuring information is available online, via social media channels as well as shared via phone to proper entities.

# **Epidemiology**

The Epidemiology Department has been actively preparing for the potential of a measles case or outbreak. In anticipation, we developed a comprehensive Measles Outbreak Response Plan and created detailed guidance for hospitals on ruling out suspected cases. We also implemented measles-specific infection prevention protocols within hospital settings and assessed the availability of measles immune globulin (MiG) across local facilities. Our team is reaching out to all pharmacies in our service area to gather information on vaccine availability and administration protocols. We are coordinating with hospitals to conduct a measles tabletop exercise and are participating in national trainings and drills focused on outbreak response. Additionally, we have engaged school nurses across the district, providing them with educational materials for parents covering symptoms, vaccination, travel considerations, and testing guidance. Meetings with area hospitals are ongoing, focusing on reviewing and enhancing their response plans, infection prevention practices, staff training, and vaccination strategies.

# **HPAI H5N1 Outbreak Response**

In April 2025, CNHD concluded its response to an H5N1 outbreak that occurred between late January and early April. CNHD began worker exposure notifications on January 25th, focusing on affected dairy facilities in Churchill County. After limited success with initial phone outreach,

the team pivoted to text-based communication, which significantly improved worker engagement. Given the small size of the dairy farms (with fewer than 10 to 35 employees each), all workers were considered eligible for active monitoring. Over 100 dairy workers were monitored daily for influenza-like symptoms across 11 dairy farms, and two poultry workers were monitored on one poultry farm with confirmed HPAI H5N1 detection. A mass influenza testing event was conducted at the farm employing one individual who tested positive for H5N1 during the investigation, with 20 workers participating in testing. CNHD's response included daily symptom surveillance, provision of personal protective equipment (PPE), targeted testing and treatment for dairy workers with direct exposure, and prophylactic antiviral medication for close contacts of affected individuals. These coordinated efforts helped limit transmission and ensured timely intervention during the outbreak.

# **Respiratory Virus Season**

As we close out the respiratory virus season, CNHD reports the following case activity and public health efforts:

- COVID-19: A total of 242 cases were reported throughout the season.
- Influenza: We recorded 562 confirmed cases, peaking in January and February, with 48 hospitalizations and 4 deaths.
- RSV (Respiratory Syncytial Virus): 273 cases were investigated, resulting in 11 hospitalizations and no reported deaths.
- In addition to routine surveillance, CNHD has focused efforts on public outreach regarding vaccination information and respiratory virus prevention.
- This season, we also responded to one school-based influenza outbreak, which was thoroughly investigated and monitored.

#### Other Notable Infectious Disease Focuses

CNHD addressed several notable infectious disease concerns this quarter. Our team responded to a gastrointestinal outbreak of unknown etiology at a local school, conducted contact monitoring for an active tuberculosis case currently under treatment by our clinical staff, and ensured two rounds of negative testing among close contacts. We also investigated a case of *Neisseria meningitidis* in a school-aged child and a travel-associated case of dengue fever.

In Churchill County, we documented and investigated the county's first reported HIV-positive patient. Additionally, CNHD is closely monitoring a minor but notable increase in sexually transmitted infections across our communities.

In early spring, one of our jurisdictions experienced an uptick in rodent activity. In response, the CNHD disease investigation and environmental health teams collaborated to develop and distribute educational materials, videos, and social media content focused on safe rodent disposal, disinfection, and reporting procedures to prevent disease transmission.

Beyond response efforts, the Epidemiology team proudly represented our region at the Nevada Legislature on Monday, April 7th. In partnership with the University of Nevada, Reno School of Public Health, we spent the day in Carson City engaging with students, demonstrating food safety best practices such as thermometer calibration and sanitation techniques, and discussing

the critical role of public health in shaping policy. It was an inspiring opportunity to connect with future public health leaders and highlight the everyday tools that protect our communities.

#### 2025 YTD WNV Surveillance:

None reported at this time.

### 2025 Harmful Algae Blooms (HABs) Surveillance:

No Harmful Algae Blooms have been reported in the CNHD communities.

# CDC Alerts and Upcoming CNHD Educational Presentations (By Subject)

National: Measles, Polio, Lead, Congenital Syphilis, Adult Syphilis Regional: Salmonella (cucumbers), Listeria (deli meats), Rocky Mountain Spotted Fever (ticks), West Nile Disease (mosquitoes), Rabies (bats, pet bites), Hantavirus (mice feces), Harmful Algae Blooms (algae toxins)

## **Clinical Services**

# Family Planning & Sexual Health Services

CNHD clinics visits for Family Planning have remained steady with peak numbers in April. The number of patients eligible for and enrolled in the Women's Health Connection program has grown substantially. We have secured several new insurance contracts, which will expand the availability of family planning services to the local communities. There has been more STD testing than contraception visits this quarter. The clinic provider, in collaboration with Infectious Disease provider, is treating a patient for active TB and providing daily virtual observation therapy. We also have our first HIV case and are in the process of establishing the patient with a provider for treatment. Clinic services continues to administer VFC and 317 vaccines with April being the busiest month. Our clinic RN has done one VFC audit in Lovelock and plans to train for IQIP audits in the next quarter.

# Immunization & Outreach Services

The immunization rates for both children and adults have decreased compared to the previous quarter. Efforts to increase vaccination rates have included distributing outreach flyers in all communities and on social media platforms, offering Influenza, COVID-19, and RSV vaccines to mitigate respiratory illnesses. In order to enhance awareness, a coloring book focusing on vaccines and vaccine-preventable diseases, along with childhood immunization schedules, will be supplied to local daycare centers for distribution among parents and at community events.

The Vaccines for Children (VFC) and Immunization Quality Improvement for Providers (IQIP) audits at Churchill and Mineral clinics were successfully completed without any compliance issues identified. In late February, vaccine coordinators from CNHD conducted VFC and IQIP audits of providers in Churchill and Pershing counties. The clinical staff has been emphasizing education and communication efforts to boost HPV immunization completion rates for adolescents in CNHD counties. Preparations are already underway for back-to-school events.

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Outreach efforts have been ongoing at senior centers in Churchill, Mineral, Eureka, and Pershing counties.

### **Tuberculosis Prevention & Control**

Tuberculosis prevention events involve the regular administration of QuantiFERON Gold tests to clients of the residential treatment facility in Churchill County. Additionally, nursing school and high school students, as well as others in the community are offered TST skin tests. The clinic has noted a rise in the number of class B-waiver immigrants necessitating testing and follow-up for potential treatment of latent tuberculosis infection (LTBI).

# **Public Health Preparedness**

## **Trainings**

From March through May 2025, the Public Health Preparedness (PHP) Program conducted and participated in a wide range of training activities aimed at strengthening emergency response readiness. Trainings included CNHD Staff Incident Command System (ICS) Basic Introduction courses, Job Action Sheets (JAS), and Just-In-Time (JIT) training sessions integrated into internal POD presentations. Staff also engaged in EMResource training and participated in MGT-312 tabletop exercises focused on public health response scenarios with County and State of Nevada Partners. Additionally, planning and execution of drills for H5N1 Flu POD scenarios, such as the CNHD Emergency POD were implemented to assess readiness. Looking ahead, internal training continues with the planned "This is a T.E.S.T." POD Game exercise in June 2025.

#### **Achievements**

Over this three-month period, the PHP Program made notable progress in regional coordination and preparedness planning. Staff actively contributed to Local Emergency Planning Committee (LEPC) meetings across all four counties, while also attending high-level gatherings such as the State PHP Partners Quarterly Meeting, the PHP 5-Year Strategic Plan Roll-Out, and the Rural Healthcare Preparedness Partners Coalition. Public health preparedness efforts were further advanced by participation in both the Nevada Emergency Preparedness Association Summit and the national NACCHO Preparedness Summit – proactively increasing CNHD partnerships and relationships across the region and nation. In terms of operational progress, the team finalized flu POD schedules and neared completion of the CNHD Fit-Testing Policy. Mineral County also led additional planning initiatives, including preparation for the Mt. Grant Flu POD.

#### Concerns

While progress is steady, the program continues to identify areas for improvement. One ongoing concern is the need for consistent ICS training across all CNHD staff to ensure uniform understanding and execution of response protocols. There is also a continued emphasis on refining internal procedures, such as the development and standardization of Just-In-Time training materials and Job Action Sheets to support POD operations. These concerns reflect the broader need to maintain preparedness alignment across counties with varying levels of staffing and local resources.

#### **Miscellaneous**

In addition to training and planning efforts, the PHP Program maintained strong working relationships with local partners, including fire departments, emergency managers, and Search

and Rescue teams across jurisdictions. These partnerships support ongoing coordination and communication across jurisdictions. Preparations also continued for upcoming events in June, including the Rural Preparedness Summit and internal exercises designed to strengthen interagency collaboration and response capacity. These activities collectively contribute to an increasingly unified and resilient rural public health infrastructure in Nevada.

## **Ongoing Preparedness Plan Efforts**

The Public Health Preparedness Program continues its ongoing efforts in each county to support the development, revision, and implementation of local preparedness plans. As part of this work, the program is in the process of finalizing internal draft versions of key planning documents, including Emergency Operations Plans (EOPs), Essential Staffing Plans, Continuity of Operations Plans (COOPs), Hazard Mitigation Plans, and other preparedness-related frameworks. These efforts aim to ensure each jurisdiction is better equipped for coordinated and effective public health emergency response.

We are concerned with funding for Public Health in the future. As our communities recognize the services of CNHD, utilization and demand increases. Projections indicate that environmental services, epidemiology, clinical, and emergency management utilization will increase by 25% in the next year exceeding our current personnel capabilities. A lack of funding would be a barrier to the appropriate and necessary growth in the next 1-3 years.

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