



STATE OF NEVADA
Office of the Governor
101 North Carson Street
Carson City, Nevada 89701
(775) 684-5672

MEETING AGENDA

Name of Organization: COVID-19 Mitigation and Management Task Force

Date and Time of Meeting: August 13, 2020 – 10:00 a.m.

Place of Meeting: State Capitol Building
Guinn Room, 2nd Floor
101 N. Carson Street
Carson City, NV 89701

Web Browser: <https://my.ivcicloud.net/meet/48611042>

Skype for Business: 48611042@vmr.vc

Video System: dem.staff@ivcicloud.net

Phone: 351.222.2275 Code: 48611042#

The COVID-19 Mitigation and Management Task Force (“Task Force”) may take action on items marked “For Possible Action.” Items may be taken out of the order presented on the agenda at the discretion of the Chair. Items may be combined for consideration by the Task Force at the discretion of the Chair. Items may be pulled or removed from the agenda at any time.

AGENDA

1. Call to Order and Roll Call – Chair, Caleb Cage, COVID-19 Response Director.
2. Public Comment – (Discussion Only) – No action may be taken upon a matter raised under this item of the agenda until the matter itself has been specifically included on an agenda

as an item upon which action may be taken. Public comments may be limited to three minutes per person at the discretion of the Chair. Comments will not be restricted based on viewpoint.

3. Overview of Road to Recovery: Moving to a New Normal – (Discussion Only) – Chair, Caleb Cage, will provide an overview of the *Road to Recovery: Moving to a New Normal* document.
 4. Current Situation Report (Discussion/For Possible Action) – Chair, Caleb Cage, to lead a discussion with the Task Force regarding current situation for COVID-19 throughout the state. The Task Force may consider statewide COVID-19 data jurisdiction self-assessments and county response plans for COVID-19. The Task Force may vote to approve county plans or to enact additional mitigation or enforcement measures for county jurisdictions in order to contain community spread and burden of the COVID-19 virus.
 5. Appointed Department Updates – (Discussion Only) – Task Force members will provide programmatic updates on Nevada’s COVID-19 response as outline below:
 - a. Department of Business and Industry – Enforcement – Director, Terry Reynolds
 - b. Division of Emergency Management – PPE Status – Incident Commander, Brett Compston
 - c. Fiscal Update – Work Program Status –Executive Budget Officer, Lesley Mohlenkamp
 - d. Nevada Department of Education – School Opening Plans – Deputy Superintendent of Educator Effectiveness and Family Engagement, Felicia Gonzales
 - e. Nevada Association of Counties – Executive Director, Dagny Stapleton
 - f. Nevada League of Cities – Director, Wesley Harper
 6. Action Items for Next Week – (Discussion Only) – Chair, Caleb Cage, to discuss next steps of the Task Force.
 7. Public Comment – (Discussion Only) – No action may be taken upon a matter raised under this item of the agenda until the matter itself has been specifically included on an agenda as an item upon which action may be taken. Public comments may be limited to three minutes per person at the discretion of the Chair. Comments will not be restricted based on viewpoint.
 8. Adjourn – (Discussion/For Possible Action)
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This is a public meeting. In conformance with the Nevada Public Meeting Law, and pursuant to Sections 3 and 4 of the Declaration of Emergency Directive 006 signed March 22, 2020, as extended, this agenda was posted or caused to be posted on or before 9:00 a.m. on August 10, 2020, at the following locations:

Posted to the following websites:

- Nevada Public Notice Website: www.notice.nv.gov

We are pleased to make reasonable accommodations for members of the public who are disabled. If special arrangements for the meeting are necessary, or if you need to obtain meeting materials, please notify Meagan Werth Ranson, Governor's Office, 101 N. Carson Street, Carson City, Nevada 89701 or (775) 684-5670. 24-hour advance notice is requested.



Carson City's COVID-19 Assessment and Action Plan

Prepared August 12, 2020

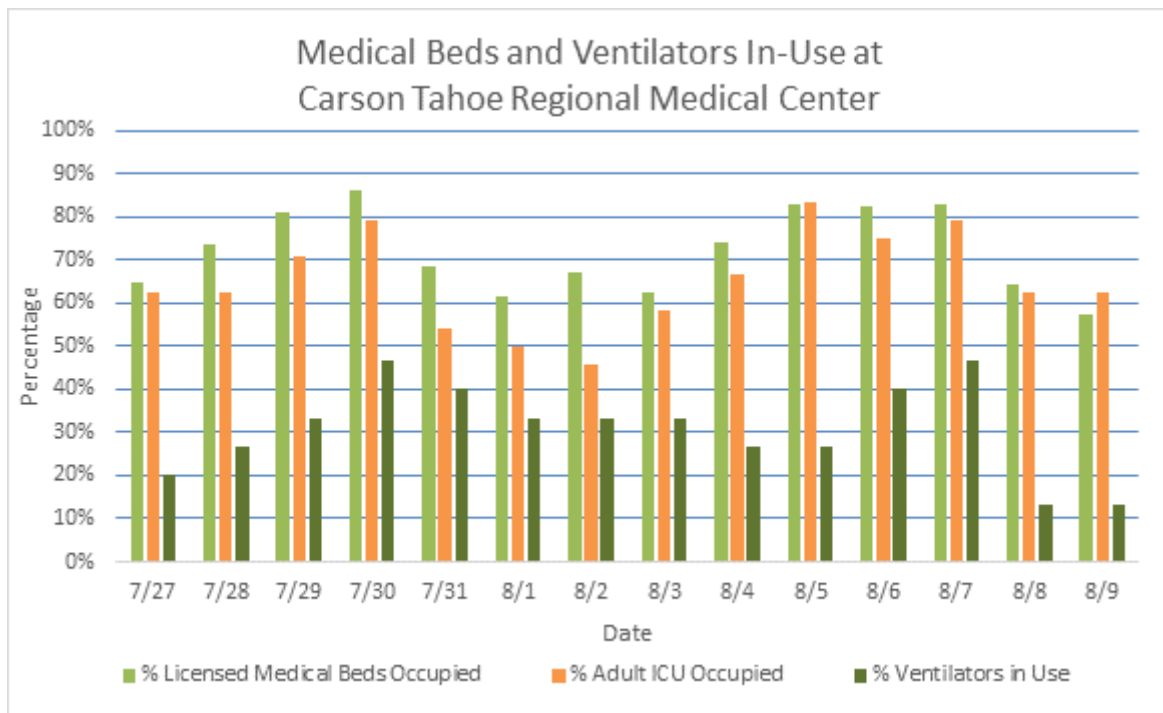
Hospital Capacity

Describe the state of hospital capacity within the county, including:

Describe the status of staffed ICU beds, ventilators, staffing, medication treatments, and PPE.

On average over the last two weeks, Carson Tahoe Regional Medical Center (CTRMC) has had 72% of its licensed medical beds occupied (114 census, 159 total licensed medical beds). Of the 24 adult Intensive Care Unit (ICU) beds available, 63% (15 beds) have been occupied on average. Of the 15 ventilators the hospital has, 27% (4 ventilators) have been in-use on average.

The graph below shows the percentage of licensed medical beds, adult ICU beds, and ventilators occupied/in-use over the last two-week period from July 27 to August 9, 2020.



CTRMC reports they have seen a small increase in the number of staff that are off duty due to COVID-19. The hospital does not have a short-term staffing service but is currently using premium pay (a higher level of pay to hospital employees) to cover as needed. The 14-day quarantine for significant exposures could provide a substantial staffing challenge if there is an increase in the number of staff exposed to COVID-19 through household contacts.

The hospital also reports they have a limited supply of Remdesivir and metered dose inhalers (MDI), and while both items could quickly become a challenge, the current levels of both medications were fine as of this morning.

Despite receiving a limited allocation from vendors (as are almost all other facilities), CTRMC is also able to operate with current levels of PPE, especially with extended use and re-use measures in place. For example, the hospital's isolation gown burn rate is 550/day when their hypochlorous acid (HOCl) solution is not available. When the HOCl machine is operational the hospital can use washable gowns and reduce this number to less than 100/day. The PPE currently available will last anywhere from 41 days (gloves) to 269 days (goggles), based on today's burn rates.

Describe the status of Alternate Care Facility planning, staffing, and implementation.
Describe your current assessment of overall hospital capacity and metrics that will determine expansion to Alternate Care Facilities.

CTRMC views overall hospital capacity as the number of in-patient beds at the main hospital, which is 144 acute care beds. There are several different levels to their medical surge planning. Staff members are assigned to watch COVID-19 case numbers, bed availability, personal protective equipment (PPE), ventilators, etc. These staff members are empowered to schedule an extra command meeting whenever an issue is identified. If there is a need to admit in-patients to an Alternate Care Site (ACS), a CTRMC Command Team meeting would be immediately scheduled. The Command Team would make the decision to activate the first phase of the surge plan. The most "extreme" phase of the surge plan allows for a census of 418 patients. However, in order to surge to this capacity, the hospital would have to implement crisis standards of care, limit documentation, and have most staff work 60 hours per week.

Currently, CTRMC uses long-term traveler staff to cover staffing needs for longer periods, which are usually 12-week contracts. The hospital would start looking at the need for additional staff as soon as a decision was made to activate the first level of the surge plan.

A higher phase surge activation should involve a regional call involving the quad counties (Carson City, Douglas, Lyon, and Storey counties) and Washoe County, as the hospital would transfer patients to an open hospital bed in the region if there were any available, rather than opening an ACS. CTRMC attends weekly calls with Washoe County and other healthcare partners to discuss what Alternate Care Site planning looks like for Northern Nevada, rather than just Carson City or the Quad-County region.

Earlier during the COVID-19 response, CTRMC requested the State Disaster Medical Facility (DMF) tent system for COVID-19 testing (for symptomatic patients, employees, and preoperative patients) and used it outside their Emergency Department stabilizing patients with

COVID-like symptoms. It is currently closed, as the hospital has not needed to continue staffing it, however, it remains assembled and ready for use if the need for an ACS arises during flu season.

Access to Personal Protective Equipment

Describe the status of PPE within the county, including:

Describe the status of PPE on-hand (in local reserve) and on order.

After polling each department within the city, it appears that Carson City is in good shape concerning PPE. Currently Carson City has enough PPE to operate for 2 months or longer and each department has had little or no issues in ordering more through their existing suppliers. Each department is responsible for ordering replacement supplies needed to complete their mission. The city has a small cache of N95 masks that is currently stored at the Health Department. The Fire Department was fortunate to be awarded an Assistance to Fire Fighters Grant (AFG), in conjunction with our Quad County partners, to purchase PPE supplies through the end of the year. Additionally, Carson City has allocated \$1 million of Coronavirus Relief Funds received from the State of Nevada to purchase personal protective equipment and sanitation supplies for Citywide distribution to ensure the safety of public employees, hospital employees, businesses, patrons, adults and children.

Describe the county's distribution priorities.

The City's distribution priorities remain the same as they were when the Quad County EOC was open. Supplies would be prioritized on the tier system with first responders and health care facilities being the first to get additional supplies.

Describe your current assessment of overall PPE and metrics that will be used to determine additional emergency measures.

As the pandemic progresses over time, the CCHHS has been watching the infection rate in Carson City. This rate has remained relatively flat and has not put a significant strain on our first responders or the health care system. If the rate climbs and there is a surge on resources, then the City will ramp up PPE ordering through existing vendors. The City also has the option of using the ordering system through the State Division of Emergency Management EOC.

Testing Capacity

Describe the status of your local testing efforts, including:

Description of your testing criteria.

Overview of the number of people tested in a day/week.

Quad-County residents experiencing symptoms of COVID-19 are the top testing priority. Residents showing symptoms are asked to call the COVID hotline Monday through Friday, 8:30 a.m. to 4:30 p.m. to be scheduled for testing. Symptoms could range from mild symptoms to severe illness. Symptoms may appear **2-14 days after exposure to the virus**. People with the following symptoms may have COVID-19:

- Fever or chills
- Cough
- Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches
- Headache
- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea

This list is not all inclusive and there could be more symptoms not listed here. Individuals experiencing any one of these symptoms are prioritized for same-day testing. On days where the call center has received a higher volume of calls, staffing capabilities are shifted to be able to double book appointments and bring in a second nurse. For individuals not experiencing symptoms, individuals that are a close contact of a positive case are prioritized followed by individuals who have had an exposure (i.e. workplace).

CCHHS uses the following criteria to prioritize testing needs:

Has there been any exposure to someone with COVID-19?

- Did the individual have close contact (within 6 feet of an infected person for at least 15 minutes) with an individual with confirmed COVID-19?
- Does the individual live in the same household as an individual in isolation or sick with COVID-19/ COVID-19-like symptoms?

The final priority is any Quad-County residents who are not experiencing any symptoms of COVID-19 and just want to be tested. Those individuals will be put on a list for testing and will be contacted as spots become available.

CCHHS Overview of people being tested and efforts:

The average number of symptomatic people tested each day at CCHHS is 25. The average asymptomatic number tested per day is nine. These numbers are based on the number of people calling the call center or being referred to the call center for testing. The average number of tests being conducted per week is 125, the average sometimes varies based on staffing variability and call center volume.

Community partners (LTC/SNF, Healthcare, School districts, Casinos, Large medical groups):

- Testing criteria
- Average number of testing each day/week
- Other efforts

Agency	Testing Criteria	Average # tested daily/week	Number tested since onset of COVID	Educational outreach or other
Carson Tahoe Healthcare	An assessment, which is embedded into the EMR, is administered to patients at both the ER and Urgent Care locations. If patient meets the criteria, the medical provider will order the test.	Employees: Daily Average: 1.6/per day Weekly Average: 11/week Patients: Daily Average: 19/day Weekly Average: 130/week	3,135	
Nevada Health Centers	Symptomatic, positive exposure to COVID, surgical patients, patients that must have a test done to get into specialists. Asymptomatic testing is not being performed at this time.	1 employee per week. 0-10 patients per week.	310	
Gold Dust West	Provided all employees and family antibody and COVID testing prior to reopening. Perform screening of staff and visitors. No positive	70 for reopening, 4 tests for symptomatic.	74	Mandatory COVID-19 training at orientation for reopening, also

	cases of employees at this time. Daily temperature screenings when an employee arrives for a shift.			included in the new hire training. Signage throughout property to remind everyone of safety and hygiene as it pertains to COVID. Offer annual flu and pneumonia vaccines to all employees and family.
Casino Fandango	All employees receive a temperature scan upon arrival to work. If an employee has a reading of ≥ 100 degrees, the employee is dismissed and instructed to follow-up with health care provider. Individuals under 99, receive a wrist band that indicate completion of the screening for the shift. If an employee calls in sick, the employee is screened and if the employee has a symptom on the CDC Symptomatic list, employee is asked to follow-up with health care provider and return to work with only a confirmation of the test result.	Casino Fandango does not/has not conducted any COVID testing.	N/A	Employees went through a 1 ½ hour COVID 19 training class in order to return to work. COVID 19 training is given to all new hires before they can start work. Several CDC educational flyers are posted throughout building.
Carson Nugget	Testing is not mandated, no policy in place but employees are told to stay home if sick. Maybe 2-3 have been tested since onset of COVID but not sure.		2-3	
Prestige	Symptomatic testing	Have completed	350	

		two group tests as of 8/10/20. Number of tests varies by week.		
Carson Nursing & Rehab	All new hires test for COVID prior to hiring. All new admissions are tested. Baseline testing of 100% staff members and 100% residents in May has been performed.	Varies depending on need. 15 residents on 7/28 34 on 8/4 54 staff members 8/6 & 8/7.	200 (Staff and residents).	N/A
Eagle Valley Children's Home	Mandatory asymptomatic testing for all employees, admin, housekeeping, maintenance and of course all direct care staff, including on-call staff every month. Any staff with symptoms; COVID-19 screening done by Nurse or Supervisor for each staff member before they enter the work areas, sent home and referred to their PCP to determine if testing or self-isolation is needed as well as Return to Work advice.	90-100 (Monthly)	347 (Since May 2020)	

Current CCHHS testing efforts for our high-risk community members and outbreak intervention:

CCHHS spent two months testing at various Quad-County locations for the homeless and vulnerable populations. CCHHS would average 2-6 people at each location and the focus was those that were not able to get to the health department or had no means of transportation. CCHHS has been working with most of our long-term care, skilled nursing and group home partners to assist them with testing their residents, staff or patients. This may include preparing forms, labels, entering current list of individuals being tested into spreadsheets, order and gather test kits, as well as doing online or in person training based on the needs. CCHHS has several agencies that have been testing monthly. Once the tests are completed, the facility

brings them to CCHHS and CCHHS couriers the samples daily. Currently, CCHHS uses the Nevada State Public Health Lab for all lab samples. CCHHS then provides call backs and emails on the results of the samples as well as sending electronic and physical lab results to the individual overseeing the testing. CCHHS speaks to the partners multiple times a day. When a positive or inquiry arises, CCHHS always steers the agency into the right direction which may include speaking with one of the epidemiologists and referral to the State contact.

Overview of targeted testing efforts for high-risk communities, outbreak intervention, and other efforts.

Testing processes were expanded to include vulnerable populations with the procurement of a rapid testing machine (Abbott) in May 2020. Prior to this procurement, this population was expected to go through the normal testing scheduling. Required steps were initiated to add this point of care test to CCHHS' CLIA license as well as the State of Nevada exempt lab certification process. CCHHS Clinical Services Manager and staff received training from the assigned ABBOT representative, reviewed training videos, and demonstrated competency. Testing and quality assurance policies and procedures were developed and reviewed and signed off by nursing staff. The identified use of the point of care test was vulnerable populations to include homeless and first responders. Simultaneously, steps were taken to reach out to social service providers to identify and set up testing sites in the Quad County region for testing of vulnerable populations. A pilot was initiated for June 2020 to test at commodity distribution points and free medical clinic staffed by volunteers in the Tri-county region of Carson City, Douglas County and Lyon County. Eight testing sites were identified. Carson City's site was FISH's dining room where a large number of the homeless are present for dinner. Outreach testing did occur on three different dates in June 2020. Thirty-seven individuals were tested during these outreach events. This site was determined to be viable location for future testing should this become a need.

The Abbott machine was not deployed during the State of Nevada's Legislative Special Sessions. There were requests for the Abbott testing for individuals within the state system.

To date, Carson City has not had an outbreak within the homeless population. To the best of our knowledge, there has not been an outbreak within a skilled nursing facility; however, they are regulated by the State of Nevada.

Schools

CCHHS has been collaborating with the Carson City School District (CCSD) for several months regarding revisions to the CCSD pandemic flu response plan. This review and collaboration began in late January 2020 but was put on hold in light of actually living a pandemic response with COVID. When schools were closed in March 2020 due to the initial

COVID-19 outbreak, CCHHS and CCSD staff agreed to come back together at the end of the summer in hopes COVID would be “under control” and returning to school would be smoother.

As COVID has continued to be a significant issue in our community, CCHHS and CCSD have been collaborating on several different documents in an effort to provide education and support for families and staff returning to school this month. These documents include protocols for staff and families to use to pre-screen before coming to school, protocols for staff returning to school after testing positive or being a close contact, etc. Additionally, CCHHS created a presentation for distribution to staff and students regarding the contact tracing and testing processes for COVID. This document also defines what it means to be a positive COVID patient or a close contact and the responsibilities of each.

In anticipation of what may be an increase in positive COVID-19 cases with school starting, CCHHS is coordinating weekly calls with the four public school districts in the region we serve, including CCSD. These calls are designed to provide a direct communication opportunity between schools, local emergency management, county health officers, and public health and will allow us to collaboratively address concerns that are arising in the educational environment. These calls will begin August 14, 2020; private and charter schools will be invited to the meetings beginning August 21, 2020. Furthermore, CCHHS developed the Quad-County COVID-19 Outbreak Response Guidelines for Schools to support all schools across the region, including CCSD. This document is similar to what other health authorities have created but is updated to be reflective of the most up-to-date and broader recommendations from the Centers for Disease Control and Prevention. As outlined in the Response Guidelines, schools are required to report staff and student illnesses every day to CCHHS. These data points will be tracked and analyzed regularly by CCHHS to help identify any potential outbreaks or concerns regarding COVID-19, Influenza, or other health issues early. If a rise in numbers is occurring, staff from CCHHS, CCSD, and Carson City Emergency Management will convene and discuss if the data warrants closing a classroom, a school, or the whole school district for an extended period to mitigate transmission.

Case Investigation and Contact Tracing

Describe the status of your contact tracing efforts, including:

Description of your current contact tracing workforce.

At CCHHS, a disease investigation model has been adopted from the beginning of the response. For the purposes of this jurisdictional assessment, contact tracers and disease investigators are equivalent.

Upon receipt of a positive laboratory result through Nevada NBS, Nevada State fax notification, or hospital records, the disease investigator collects and verifies contact information. The ordering facility is contacted to gather missing patient contact information.

The laboratory results are sent to a lead disease investigator, who assigns laboratory results to disease investigators who make the initial contact via telephone. When the patient is successfully contacted, a full case investigation is conducted, and assigned a case number. The disease investigator creates a case file and sends the case their Quarantine Rights and Responsibilities, a legal documentation consent form generated by CCHHS. All cases identified as out of jurisdiction or out of state are sent to their residing jurisdiction's health department. Case reports are sent to the Quad-County Epidemiologist, Quad-County Statistician, Public Information Officer, and Quad-County Public Health Preparedness Manager. A lead disease investigator is always on staff. Beginning July 31, 2020 (2) disease investigators are staffed Monday through Friday, and (1) staffed on Saturday and Sunday. The goal is to have 4 disease investigators scheduled each day which includes the lead disease investigator once the additional disease investigators are hired.

Current FTEs are:

Lead Disease Investigator	2.0 FTE
Disease Investigators-	3.1 FTE

Table 1. Disease Investigator Workforce Overview

Lead Disease Investigators and Disease Investigators			
Monday- Friday	July 7-July 30	July 31-Aug. 15	Aug. 16-Aug. 29
Leads	1	1	1
Dis. Invest.	1	2	2
Saturday-Sunday			
Leads	1	1	1
Dis. Invest.	1	1	1

Quad-County reported cases are monitored daily by the National Guard, disease investigators or a volunteer. Data including the case's signs and symptoms, relocation of isolation, hospitalization admissions and/or discharge information, and any household needs is collected and documented. Cases meeting the Center for Disease Control and Prevention's (CDCs) "release from isolation" criteria are submitted to be reviewed by a lead disease investigator. If all the CDCs COVID-19 "release from isolation" criteria are met, the lead disease supervisor releases the case from isolation. Difficult cases are reviewed and released by the epidemiologist. Recovered cases are reported to the Quad-County Epidemiologist, Quad-County Statistician, Public Information Officer, and Quad-County Public Health Preparedness Manager. Monitoring of cases from July 7, 2020 to July 30, 2020, was conducted by (1) National Guard member and (1) volunteer Monday through Friday. Disease investigators monitored cases Saturday and Sunday. Monitoring of cases from July 31, 2020 to August 15, 2020 are conducted by (1) volunteer or (1) disease investigator Monday through Friday. Upon finishing

case monitoring, disease investigators assist with case investigations. The monitors also assist with negative callbacks after finishing case monitoring.

Table 2. Case monitoring workforce overview

	Case Monitors		
	July 7-July 30	July 31-Aug 15	Aug. 16-Aug. 29
Monday-Friday			
National Guard	1	2	2
Volunteers	1	1	1
Dis. Invest.	0	1	1
Saturday-Sunday			
National Guard	1	1	1
Volunteers	0	0	0
Dis. Invest.	1	0	0

* Two National Guardsmen were deployed to assist with case monitoring beginning August 10, 2020.

Information about the direct contacts named by cases are documented and reported to Deloitte daily. It is Deloitte's standard operational procedures to contact people named as direct contacts within 24 hours of receiving the report.

CCHHS will be hiring 1 additional disease investigator through the CDC Foundation by August 31, 2020. Another part time disease investigator will be hired as a city employee by August 31, 2020. Additionally, CCHHS will be hiring an administrative assistant by August 31, 2020 to assist with data entry through December 31, 2020.

Planned staffing – August 31, 2020:

Lead Disease Investigators – 2.0 FTE
Disease Investigators - 4.6 FTEs
Administrative Assistant - 1.0 FTE

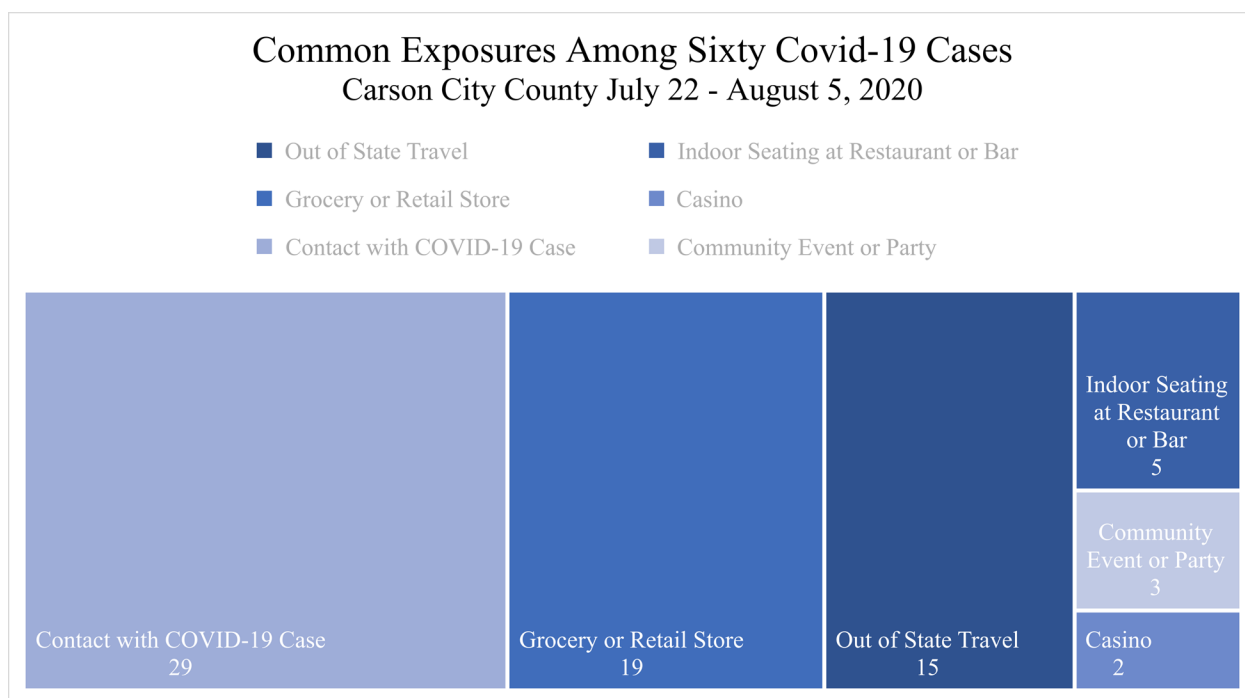
Percent of positive cases contacted within 24 hours, and percent of positive case contacts contacted in 48 hours.

Upon receipt of a positive laboratory result, the disease investigator begins collecting and validating contact information. Many of the laboratory results arrive without the information necessary to begin the case investigation. When data is missing, the ordering facility is contacted for each case to gather this information. The laboratory result is then sent to the lead disease investigator's supervisor. Case investigation data from July 23, 2020 to August 5, 2020 was analyzed to determine the length of time between receiving the positive laboratory result and attempted contact of the case. During this 14-day period, 10.5% of cases

were contacted within 24 hours and 38.8% were contacted within 48 hours of receiving a positive laboratory result.

Overview contact tracing findings suggesting high-risk areas.

Case investigation data from July 22, 2020 to August 5, 2020 was analyzed in order to identify common exposures among Carson City County residents that tested positive for COVID-19 (Graph 1). Sixty cases provided detailed accounts of their exposures fourteen days prior to the onset of symptoms or a positive test result. Of those sixty cases, some had multiple exposures. The graph below shows the number of respondents that said “yes” to each of the exposure categories.



Graph 1: Common Exposures Among COVID-19 Cases in Carson City County from July 22 – August 5, 2020

Of the sixty respondents, the three most common exposures were contact with a COVID-19 case, visiting a grocery or retail store, and travel to another state. Among cases that provided detailed exposure data, 48% reported contact with a known COVID-19 case (N=29). Among those COVID-19 contacts, 52% were reported as Household (N=16), and the remaining were reported as Community Associated (work, community events, public gatherings, grocery or retail stores). There were no contacts or exposures reported as related to healthcare workers or skilled nursing facilities. The only other statistically significant exposures were grocery stores (28%, N=17) and out of state travel (25%, N=15). Of those who visited grocery stores prior to testing positive, there was a broad distribution of the type and location of stores, and many reported wearing a mask and maintaining appropriate social distance during their visits. Of those who traveled out of state, 60% visited California (N=9). Based on these findings

and the distribution of exposure locations, the highest risks of exposure for a Carson City resident were out of state travel and contact with a known COVID-19 case.

Protection of Vulnerable Populations

Describe your county's plans for addressing outbreaks within vulnerable populations, including:

Overview of efforts and interventions in skilled nursing facilities.

Skilled nursing facilities are regulated by the State of Nevada, HCQC. An educational video was created to show how to perform nasal swab specimen collection for COVID-19. This education was presented to skilled nursing facility nurses that chose to conduct their own testing of residents. A CCHHS' Public Health Nurses (PHN) conducted the education on May 15, 2020 via Zoom so questions could be answered. For the facilities that chose not to test their own residents, CCHHS sent strike teams to 10 facilities to collect specimens. This was a collaborated effort between CCHHS and the State of Nevada.

Overview of efforts and interventions in correctional facilities.

The Nevada State Correctional facilities within Carson City are overseen by the State of Nevada, Department of Corrections. If one of their staff tests positive, the health authority that oversees the jurisdiction in which the individual lives will contact him/her, quarantine and follow up as needed. Contacts will be managed by either the health authority or Deliotte. If one of the inmates tests positive, Carson City counts the case. The prison does their own investigation.

The Carson City Sheriff's Office is a department of the city and oversees the Carson City Jail. The actions taken are as follows:

- Inmates are either brought in by patrol or walked down from the courts. Each inmate is met by a jail deputy who goes over the COVID-19 intake questionnaire. The inmate's temperature is taken and depending on the answers from the questionnaire and the temperature, the length of the quarantine is determined. If the inmate shows no symptoms, answered no to all of the COVID-19 questions, and has a normal temperature, the inmate is put in for a 48-hour quarantine. If the inmate answered 2 or more of the questions "yes", has symptoms, and/or has a high temperature, the inmate is placed on a 14-day quarantine.
- Each inmate is given a mask upon entering the jail.
- Currently, the jail is using the pre-booking area to house inmates that are in quarantine. Male inmates are then moved to the intake pod to finish quarantine prior to being classified and housed elsewhere. Female inmates are moved to female discipline to finish their quarantine time.

- If multiple inmates are brought in throughout the day and night, they are placed separately in the visitor booths, and/or any empty cell in booking. Inmates are kept separate unless they come in around the same time.
- Inmates stay in quarantine until they are seen by medical and are given the okay to move.
- Only one inmate was taken to the hospital for a COVID-19 test. The results came back negative.
- No disruption for inmates to see or talk to their respective attorneys. Currently, inmates can call their attorneys through the phone system and they can visit their attorney through one of the two visitor booths.
- Medical currently sees all inmates for all complaints of sickness. They are treated in the facility or taken to the hospital when medical staff aren't in the facility or they can't handle the situation. For emergencies, Carson City Fire Department (CCFD) is called to respond. CCFD is Carson City's medical transportation service.
- When an inmate leaves a cell, it is immediately cleaned with disinfectant.
- Hand sanitizer is provided to inmates at feeding times.
- Hand sanitizer is provided to attorneys and professional visitors.
- Hand sanitizer is provided to all employees.
- Employees have masks available to them.

Carson City's Juvenile Detention is another city department. In order to minimize exposure to COVID-19 and avoid an outbreak in detention, Juvenile Services has implemented the following:

- All employees are asked to stay home if they are sick and present with symptoms related to COVID-19.
- All visitation is suspended to include parents, attorneys and outside organizations.
- All employees who have official business in the facility are screened before entering the building. They fill out a medical questionnaire and have their temperatures taken.
- All employees are required to wear masks and social distance from staff and juveniles unless an emergency situation arises that needs immediate intervention.
- All juveniles are required to social distance from everyone during all activities.
- Activities that require close contact are suspended.
- The facility is cleaned and disinfected frequently. An Electrostatic cleaning spray was purchased to assist in the disinfecting process.
- Law Enforcement personnel are required to fill out the medical questionnaire and have their temperatures taken before entering the facility.

- New intakes are asked to fill out a medical questionnaire and their temperatures are taken.
- If a new intake is detained they will be quarantined for 14 days.
- All juveniles in the facility have their temperatures taken twice a day.
- If a staff member has been exposed or has symptoms they will work from home for 14 days and get a negative COVID-19 test from the Carson City Health Department before returning.
- The Carson City Health Department is working with Juvenile Services to assist with testing staff and juveniles when needed.
- Juvenile Services has required PPE's for staff to conduct their duties safely.

Juvenile detention has taken a very conservative approach during this pandemic. If there are any questions, staff reach out to the health department for consultation.

Overview of efforts and interventions in high-risk communities.

Homeless Positive Case Intervention

To date, Carson City has had one individual that fit the definition of homeless that has tested positive for COVID-19 and did not have a place to quarantine. Prior to the quarantine she had been "couch-surfing". She was an employee of Costco in Carson City. Prior to this individual testing positive, Carson City Human Services (CCHS) rented a house from the local organization that regularly works with the homeless population, Friends in Service Helping (FISH). This individual was quarantine in the FISH transitional house on July 17, 2020 and was cleared to leave on July 28, 2020. During her stay, Carson City's Human Services assisted her with wrap around services such as getting OTC pain reliever, and other items she needed. After exiting, she did not reach out to Human Services for housing assistance.

Homeless Future Interventions for Quarantine

The lease expires with FISH on August 31, 2020. CCHHS is looking for rentals, either a unit or house, as emergency housing for individuals that need to be quarantined in the future. CCHHS and FISH will partner on this project by applying for the Emergency Solutions Grant-CV.

Enforcement

Describe your county's enforcement efforts

City/County level information:

Overview of city agencies engaged in enforcement.

The Quad-County COVID-19 Hotline functions not only to assist callers with scheduling COVID-19 tests and answering questions, but also takes complaints from callers about establishments they feel are not complying with Governor's COVID-19 Directives. These calls include anything from establishments that seem too crowded, not enforcing face coverings, not cleaning or disinfecting appropriately, allowing employees to come into work sick, etc. All complaints for establishments in the quad counties are documented.

Information collected from the caller includes:

- Caller name and phone number (if not anonymous)
- Establishment name
- Establishment address and county
- Date of caller's visit to the establishment
- Complaint details

If the complaint fits the criteria for an OSHA investigation (hazard to employees by non-compliance in the workplace by employees or by the public), then the Call Center forwards the complaint to the State OSHA Office. If the complaint involves environmental health concerns for establishments that are regulated by CCHHS, the complaint is also forwarded to CCHHS Environmental Health Division. Lastly, if the complaint involves any healthcare or medical facility, the complaint is also submitted to the Bureau for Healthcare Quality and Compliance.

The CCHHS Environmental Health staff field COVID-19 complaints from the public either directly or in some cases via notification from the Quad County COVID-19 Hotline. For each of these complaints staff follow up with the facility checking to see that the Governor's mandate is being met for social distancing and mask use. The health inspector will then review the CDC guidelines with staff and give suggestions to the business owners/manager to better interpret and enforce the mandate. Education is provided to the business operators on a consultative basis. Recently, a relationship has been established with OSHA and communication regarding COVID-19 violations in the workplace is happening. OSHA has shared a long list of businesses and facilities that have been investigated or alleged to be in violation of the Governor's mandate, so the health inspectors have additional information when visiting the establishment.

Overview of the number observations conducted by city enforcement officials.

Overview of the number of violations and enforcement actions taken by city officials.

Pursuant to discussions with Nevada OSHA, OSHA officials are surveying all of the counties to ensure that local businesses are compliant with the Governor's mandate regarding masks and social distancing. If the business owners are not deemed compliant during OSHA observations, businesses are imposed with fines and penalties. OSHA has been working very closely with The Southern Nevada Health District and has expressed interest in collaborating with all of the Northern Nevada Health Authorities which encompasses Carson City, Washoe County, and the State of Nevada Health Authorities. CCHHS Environmental Health does not have citation authority, and therefore has taken a more consultative approach in responses to the COVID-19 complaints that we receive from the public. The majority of the operators have been deemed compliant with the governor's mandate during field visits. However, CCHHS Environmental Health has heard that some of these establishments are not following the mandate during the evening and weekend hours when regulators are not out in the field.

For the time period, July 30 – August 5, there were 2 complaints received at the Call Center for Carson City that will be forwarded to OSHA. One involved a self-service laundry mat and the complaint was no social distancing and no masks. The other complaint involved two different car dealers in Carson City and the complaint was masks not being worn properly, and no cleaning of the vehicle that was test drove before or after. Neither of these establishments were repeat offenders.

Overview of compliance rates during city observations.

In reference to compliance rates and enforcement action, a specific number cannot be provided as this information has not been tracked because CCHHS Environmental Health has taken more of an educational/consultative role. Any issues outside of the CCHHS Environmental Health authority are forwarded to Nevada OSHA.

City Action Plan

Community Education

The CCHHS Public Information Officer (PIO) is responsible for creating community education materials, monitoring social media, and ensuring messaging aligns with the Governor's directives and the needs of the community. Through social media analytics and reports, the PIO can determine how the community is responding to various topics, what questions they have, and what misinformation needs to be addressed. Using this information,

the PIO develops messaging plans and content to educate the community. To ensure a cohesive, unified message between CCHHS and the state, the PIO participates in weekly Statewide PIO phone calls. These calls allow PIO partners across the state to share pertinent information, their messaging plans for the week, and any messaging or support needed by the state. Collaborating and sharing information with state partners ensures that the messaging aligns across the state and with the Governor's Directives.

Recently, CCHHS has focused on educating the community on contact tracing. Social media messaging and content was created to teach community members about what contact tracing is, what it involves, why it is done, and how it can slow the spread of infectious diseases such as COVID-19. The main aim of the contact tracing educational campaign was to encourage the community members to answer the call and follow the directions provided by the health authority. This would ultimately reduce the number of contacts lost to follow up. Other CCHHS community education highlighted cloth face coverings; how to wear them, how to create your own, how to remove and clean them, and how cloth face coverings work to slow the spread of COVID-19. Recently, CCHHS worked with carsonnow.org and answered some of the public's questions that were viewed as myths.

Community education will shift to align with Carson City's Action Plan. Some key messaging will include the following:

1. Out of state travel: educating people about travel risks, social distance, mask wearing. Encouraging people not to travel out of state if possible.
2. Grocery stores: masks, limiting trips to stores.
3. Household contacts: making plans for if a family member gets sick (like a family fire drill), wearing masks if feasible in multi-generational houses, washing hands, limiting exposure out of the home.
4. Citywide Mask Campaign: Create messaging from elected officials, Sheriff, and other significant members of the Carson City Community.

Flu Outreach for the Fall

CCHHS is increasing the availability of flu vaccinations to the public, in order to decrease flu related surge on hospitals. CCHHS aims to vaccinate more people in Carson City this upcoming flu season to ease the burden on the healthcare system that the flu presents each year. This is incredibly important during the ongoing pandemic since flu patients and COVID-19 patients utilize many of the same resources while hospitalized. By expanding outreach there is the potential to reach community members that would usually not want or be able to receive a flu vaccination. The most prominent places that CCHHS has vaccinated in the past have been schools; however, with recent changes to school schedules, CCHHS has had to adapt and come up with new ways to implement flu vaccination clinics. One way will be putting on drive-

through flu shot clinics in the parking lots of several schools in each of the Quad Counties. These clinics will be offered from 3-6pm to make it accessible for parents that work or cannot pick up their child the moment that schools ends. These changes allow CCHHS to still reach parents and children and offer an alternative vaccination opportunity to the in-school clinics that are usually done. CCHHS will work closely with the chief nurses of the school districts to plan these clinics so that they adhere to state guidance when it pertains to wearing a mask and following social distancing rules. Nurses that will be administering the vaccines will also be wearing additional PPE due to COVID-19 to protect themselves as well as community members.

Another way that CCHHS has enhanced our outreach efforts is by reaching out to populations that are disproportionately affected by COVID-19 and who are less likely to get a flu vaccination. These populations include Hispanic/Latino community, adults over the age of 65, adults with underlying health conditions and essential workers. CCHHS has created a contact list that has a variety of people in the community that CCHHS can and has reached out to in the past weeks. The tentative schedule is to put on events for the at-risk populations in the last two weeks of September, followed by school focused community PODS throughout October. Each Friday in October CCHHS will also be putting on a larger POD rotating throughout the Quad Counties, where anyone of any age will be welcomed and encouraged to get their flu vaccination. November will consist of putting on PODS at large employers as well as continuing the large community POD on Fridays. CCHHS anticipates offering flu vaccination clinics later into flu season than previous years to ensure that individuals who wish to get vaccinated have the opportunity during the COVID-19 pandemic. The continuation of these services will be crucial for the medical system to avoid a surge when flu season is at its peak and COVID-19 is still circulating in the community.

Testing

According to the measurement from the Governor's Office, the Average Number of Tests per Day per 100,000 is above 150, which is adequate. CCHHS' testing plan will continue as planned. The National Guard is again able to assist which will allow for continued testing. Without the National Guard, CCHHS was struggling to get the personnel needed to assist and it was questionable if the efforts were sustainable without the National Guard's assistance. The National Guard is crucial to the COVID-19 testing efforts.

CCHHS will continue to recruit and hire an additional 1.5 FTE Disease Investigators and an Administrative Assistant (AA). The AA will assist with data entry. As part of the testing unit, another AA is being hired to assist with negative test callbacks for the individuals that are tested through CCHHS. An additional funding opportunity has been offered to the local health authorities. A budget consisting of staffing, which will leverage other funding, and operational items will be developed and submitted to Julia Peek at the State of Nevada, Department of Public and Behavioral Health.

Distribution of PPE's Citywide

As stated previously, Carson City has allocated \$1 million of Coronavirus Relief Funds received from the State of Nevada to purchase personal protective equipment and sanitation supplies for Citywide distribution to ensure the safety of public employees, hospital employees, businesses, patrons, adults and children. The City worked closely with the Chamber of Commerce and Culture and Tourism Authority in Carson City to determine needs for the business community. Through a survey, the Chamber determined that businesses want personal protective supplies. Carson City is in the process of purchasing masks (washable and disposable), gloves (differing sizes), hand sanitizer and other sanitation supplies in bulk and distributing them to businesses, as well as to maintain a supply for use of the City. The City will use space in one of its warehouses and will hire a part time person to organize and distribute the supplies.

State and Federal Resources Needed

Nevada Health Laboratory is doing a phenomenal job. However, if there was a mechanism to receive test results faster, this would greatly assist with contact tracing efforts and reduction of community exposure.

Additionally, the City only has access to testing data for those tests conducted by CCHHS. We respectfully request access to all data that was used to determine the City's rate for the three criteria for elevated disease transmission. Also the City would recommend a mechanism for the testing data to be collected more accurately to determine the exact number of residents tested within each county based on residence instead of some of the data defaulting to the testing organization's county of existence. This becomes very important when determining if a county has met or has not met the current three measures.

ELKO COUNTY, NV RE-OPENING RESPONSE PLAN



AUGUST 2020

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REOPENING RESPONSE PLAN

August 5, 2020

Elko County Office of Emergency Management

APPROVAL AND IMPLEMENTATION

Pursuant to Elko County, Nevada: County Code; Title 1: Miscellaneous Regulations; Chapter 3: Emergency Operations; Section 11-3-5 (F) Powers and Duties of Director: “to prepare an emergency operations plan and an emergency resources management plan for the County in, support of and in consonance with Federal and State emergency plans and guidance.”

Pursuant to State of Nevada, Executive Department, Governor Sisolak, Declaration of Emergency, Directive 021, Phase Two Reopening Plan; Directive 023, Directive 024, Guidance issued by the Nevada Local Empowerment Advisory Panel (LEAP), and the Department of Business and Industry, Division of Industrial Relations for the Occupational Safety and Health Administration (OSHA); Elko County has established the Reopening Response Plan consistent with the *Nevada United: Roadmap to Recovery Plan*.

The Elko County COVID-19 Reopening Response Plan, (RRP), is an addendum plan to the Emergency Operations Plan (EOP). As such, the RRP aligns with the strategy and concepts of Operation for the State of Nevada COVID-19 Outbreak Management Plan and the State of Nevada Health Response Plan, i.e. COVID-19 Re-Opening Response Plan.

Board of Commission Adoption: Final

- The Elko County Board of Commissioner’s recognized, accepted and adopted the plan on August 5, 2020.

I. PURPOSE

The purpose of the Elko County COVID-19 Reopening Response Plan (RRP) is to develop a document which incorporates the guidance of the State of Nevada, Executive Department, Declaration of Emergency Directives 021, 023 and 024 by Governor Sisolak, along with the Guidance of the Nevada Local Empowerment Advisory Panel (LEAP) and in conjunction with the Occupational Safety and Health Administration (OSHA) and in consideration of the Nevada Division of Health and Human Services support for safely restarting Elko County's economy.

The strategy and sustainment capability to prevent the spread of COVID-19 is encapsulated within this plan and outlined specifically within the COVID-19 Disease Outbreak Management Plan while addressing the phases of reopening

It is the intent of this plan to align with the State of Nevada's ***Nevada United: Roadmap to Recovery Plan: Phase Two***.

Community-based testing, testing through the private sector, and disease outbreak management will be essential to reopen Elko County's economy. Preparing and maintaining a surge capacity is key to ensuring the healthcare infrastructure is not overwhelmed in case of future COVID-19 spikes or sustained future waves.

Additionally, the monitoring of compliance is critical to maintaining the suggested and directed guidelines for reducing the risk of continual spreading of the COVID-19 virus.

In alignment with the State of Nevada Strategies, Elko County has also established this course of action items:


- Identify protective measures which align with the guidance provided by federal, state, and local authorities.
- Outline enforcement of protective measures.
- Create an Outreach Program, informing the public of the protective measures.
- Assist with Public Health Response.
- Case Investigation Workforce.

II. BACKGROUND

BACKGROUND

Elko County is dedicated to reducing the possible consequences of an emergency by preventing serious illness and the loss of life. Also accelerating the resumption of normal daily life activities, protect the environment and be resilient.

The process includes developing operations and surge strategies, including sustainment capabilities to prevent the spread of COVID-19 and mitigate any outbreaks, while working to reopen our economy. This process is in alignment with the State of Nevada's Roadmap to Recovery.



As the State of Nevada and the Nation moved to contain this virus, Elko County created a Unified Command Team to not only work on local issues, but to reach out to five other counties and offer assistance for those residing in Northeast Nevada. The creation of our “Hot Line” was one of the first in the State to enable citizens to call in with questions, concerns and receive health care direction. Elko County partnered with the University of Nevada Reno Extension Division, known as the Nevada Health Centers. This partnership was one of the first of its kind allowing UNR medical students to assist in diagnosing COVID-19 systems and offering testing and direction. The Hot Line was established on March 26, 2020. (See Attached Elko County Dash Board for Hot Line statistics.) The community-based testing clinic is operating at full capacity.

Elko County does not have its own Health District, the county relies on assistance from the Nevada Department of Health and Human Services’ Division of Public and Behavioral Health (DPBH) and Nevada State Public Health Laboratory (NSPHL). A County Health Board, along with the assistance of a County Health Officer, oversee health concerns and report back to the State. The Health Board is also responsible for ensuring compliance with directives and working with law enforcement to ensure compliance with said directives.

The Unified Command Team consists of the County Health Officer, along with the Elko County Emergency Manager which oversees and conducts the Emergency Operation Center. A regional warehouse was established to help address PPE needs for the Northeast Region, and the Community-Based Health Facility (Nevada Health Centers) consults with other counties to help them identify cases.

The team consists of Logistics, Operations, Planning, Medical, Financial, Public Information Officer, Documentation, Volunteers, including food distribution and physical and mental health care providers.

The Command Staff and various community stakeholders meet weekly with local cities, the hospital, health care providers and the communities, including incorporated cities and unincorporated towns, to make sure the current needs are met and to collaborate on future issues.

In May, assisted by the Nevada National Guard, Elko County offered a drive-through community-based testing site. The goal was to have 3000 people tested, 1300 individuals took advantage of the opportunity. Only one (1) positive case was identified out of the 1300 tests performed.

Since the beginning of the Phase Two reopening in June 2020; Elko County has observed increases to the number of daily new COVID-19 cases.

Case Data as of August 5, 2020

LOCATION	CONFIRMED CASES	ACTIVE CASES	RECOVERED CASES	% OF TOTAL CASES
CARLIN	11	1	10	2.15%
ELKO	278	43	234	54.40%
JACKPOT	1	0	1	0.20%
SPRING CREEK	77	8	69	15.07%
UNDER INVESTIGATION	4	2	2	0.78%
WELLS	8	3	5	1.57%
WEST WENDOVER	132	22	109	25.83%

July 2020 positive confirmed COVID-19 cases were 46% female and 54% male.

As stated in the Nevada Health Response Re-Opening Plan, “An important aspect of COVID-19 is there is an inherent delay from the point of exposure to symptoms starting, specimen collection, laboratory testing to reporting to public health. By the time the public health authority learns of the case, one to two weeks or more may have elapsed since the initial exposure occurred. In this period, the case may have infected others. Additionally, the other contacts, if they contracted COVID, could have further spread the infection. The role of case investigation and contact tracing is imperative, but ultimately the effort needs to be directed at preventing spread through implementation of community-wide protective measures. Once implemented, these protective measures may not show immediately in the reported data due to the delays in report.”

III. IDENTIFICATION OF PROTECTIVE MEASURES

There are three main risk reduction activities and protective measures that have been reported to reduce the spread of COVID-19.

1. ***Social Distancing.*** To ensure that Nevadans, including citizens of Elko County, remained socially distanced through reopening, Governor Sisolak implemented guidelines related to ensure distancing as follows:

- a. Always maintain at least **SIX FEET OF SOCIAL DISTANCING** per person for non-household members.
- b. **PUBLIC AND PRIVATE GATHERINGS** are limited to a number that can ensure social distancing at any given time.
- c. Elko County will follow the guidelines provided by the State of Nevada for industry-specific businesses to ensure businesses are following these guidelines.

Additionally, industry-specific guidelines will be provided to ensure that as businesses reopen, social distancing through spacing between patrons and reduced occupancy requirements are implemented.

It is hereby ordered that:

The Declaration of Emergency, Directive 023, Section 2: “The phrase “social distancing” references guidance promulgated by the United States Centers for Disease Control and Prevention, including without limitation, maintaining at least six feet of physical distancing from other individuals. The phrase “sanitation requirements,” “sanitation measures,” and “sanitation guidelines” includes without limitation, washing hands with soap and water for at least twenty seconds as frequently as possible, using hand sanitizer, covering coughs or sneezes (into the sleeve or elbow, not hands), regularly cleaning high-touch surfaces, and not shaking hands.)”

2. ***Face Covering Requirements.*** Phase 2 required the use of face covering for employees of each business reopening. On June 24, 2020, Governor Sisolak mandated face coverings in all settings, with a few exceptions.

Infection disease scientists and experts advise that “universal masking at 80% adoption [] flattens the curve significantly more than maintaining a strict lock-down,” and “masking at only 50% adoption [] is not sufficient to prevent continued spread” of COVID-19. (Declaration of Emergency, Directive 024)

It is hereby ordered that:

The Declaration of Emergency, Directive 024, Section 5: “Individuals not exempted by this Directive or guidance issued by the Nevada Health Response shall be required to cover their nose and mouth with a

mask or face covering when in a public space, whether publicly owned or privately owned where the public has access by right or invitation, express or implied, whether by payment of money or not.”

The Declaration of Emergency, Directive 024, Section 6: “Businesses operating during Phase Two of the Nevada United: Roadmap to recovery plan shall ensure that all patrons, customers, patients, or clients utilize face coverings, subject to the guidelines that shall be promulgated pursuant to this Directive including prohibiting persons without face coverings from entering the premises.”

The Declaration of Emergency, Directive 024, Section 4: “For the purposes of this Directive, “face covering” is defined as covering that fully covers a person’s nose and mouth, including without limitation, cloth face masks, surgical masks, towels, scarves, and bandanas. This Directive shall not be construed to require the public to wear medical-grade masks, including masks rated N95, KN95, and their equivalent or better.”

The impact of this directive will take a few weeks to realize, as there is often a two-week delay between exposure to presentation of symptoms, specimen collection, laboratory reporting and public health data analysis.

3. *Hand Hygiene.* Elko County will continue to promote hand hygiene through public service announcements and press releases.

It is hereby ordered that:

The Declaration of Emergency, Directive 023, Section 2: “The phrase “social distancing” references guidance promulgated by the United States Centers for Disease Control and Prevention, including without limitation, maintaining at least six feet of physical distancing from other individuals. The phrase “sanitation requirements,” “sanitation measures,” and “sanitation guidelines” includes without limitation, washing hands with soap and water for at least twenty seconds as frequently as possible, using hand sanitizer, covering coughs or sneezes (into the sleeve or elbow, not hands), regularly cleaning high-touch surfaces, and not shaking hands.)”

The impact of this directive will take a few weeks to realize, as there is often a two-week delay between exposure to presentation of symptoms, specimen collection, laboratory reporting and public health data analysis.

IV. OUTLINE OF ENFORCEMENT OF PROTECTIVE MEASURES

It is hereby ordered that:

The Declaration of Emergency, Directive 024, Section 2: “Consistent with the Nevada United: Roadmap to Recovery plan for a federally supported, state managed, and locally executed reopening approach, county governments and local municipalities are hereby delegated the authority to impose additional COVID-19 related restrictions on businesses and public activities. Restrictions imposed by county government or local municipalities may exceed the standards imposed by Declaration of Emergency Directives or set forth under the LEAP guidelines, but in no case shall county guidelines be more permissive than the provisions of this Directive.”

The Declaration of Emergency, Directive 024, Section 3: “Businesses may adopt practices that exceed the standards imposed by Declaration of Emergency Directives, guidelines promulgated by the Nevada State Occupational Safety and Health Administration (NV OSHA) or LEAP guidelines, but in no case shall business practices be more permissive than the provisions of this Directive or those imposed by NV OSHA and the LEAP.”

In alignment with the State of Nevada, Elko County’s Enforcement Policy is as follows:

Enforcement of the protective measures is shared between local authorities and the corresponding licensing jurisdictions. Elko County is collaborating with all law enforcement agencies, municipalities, and licensing divisions regarding the listed steps for violations of the Directives and protective measures. Elko County will be implementing a targeted and aggressive strategy to curtail and manage the outbreak while implementing increased enforcement of protective measures and outreach with greater public health response.

1. First Violation: Constitutes a verbal discussion with the business owners outlining and reviewing the requirement for COVID-19 protective measures. A “Notice of Violation” will be provided to the business and subsequently identified as a first violation. This violation identifies that failure to correct the violation may subject the business to criminal prosecution and/or civil penalties under NRS 199.280, NRS 202.450 and other applicable statutes ordinances and/or regulations. (Sample of the Notice of Violation can be found at the conclusion of this plan.)

It is hereby ordered that:

The Declaration of Emergency, Directive 024, Section 9: “Any individual who does not comply with Section 5 of this Directive, after receiving notice from law enforcement, may be subject to criminal prosecution and civil penalties under NRS 199.280, and any other applicable statute, regulation, or ordinance. All law enforcement agencies in the State of Nevada are authorized to enforce this Directive. The Office of the Attorney General is given concurrent jurisdiction to prosecute violations of this Directive.”

2. Second Violation: Enforcement is shared between Nevada Department of Business and Industry's Division of Industrial Relations (DIR) Occupational Safety and Health Administration (OSHA), local authorities and licensing jurisdictions and industries. Should there be additional contact due to non-compliance the business is subject to forfeiture of their business license until the business can prove willingness to comply with the directive. Business license reinstatement is subject to the licensing board's approval.

It is hereby ordered that:

The Declaration of Emergency, Directive 024, Section 10: "Pursuant to NRS 414.060(3)(f), I, (the Governor), hereby authorize all local, city, and county governments, and state agencies to enforce this Directive and regulations promulgated thereunder, including but not limited to, suspending licenses, revoking licenses, or issuing penalties for violating business, professional, liquor, tobacco, or gaming licenses issued by the local jurisdiction for actions that jeopardize the health, safety, or welfare of the public; conduct which may injuriously affect the public health, safety, or welfare; conduct that may be detrimental to the public peace, health, or morals; or any other applicable ordinance or requirement for such a license."

The Declaration of Emergency, Directive 024, Section 8: "NV OSHA shall enforce all violations of its guidelines, protocols, and regulations promulgated pursuant to this Directive. State licensing boards are hereby directed to enforce all provisions of this Directive against licensees and establishments within their purview and impose disciplinary measures against licensees who violate this Directive."

Starting in July, enforcement efforts increased exponentially. For Businesses, OSHA will be starting a new campaign focused on immediate identification of infractions of the Governor's Directives and Industry Guidelines and individual closure of businesses as those infractions occur.

DIR will be doing the following:

- a. Two call-in lines are available for the public to report businesses not following COVID-19 directives to OSHA: (702) 486-9020 and (775) 688-3700. These call-in lines will be promoted so Nevadans are easily able to help ensure enforcement in their communities.
 1. DIR will redirect current staff to the call-in line to ensure a person is able to take complaints and understand the concerns of the complainant.
 2. DIR will direct staff to onsite inspections of the complaints, as needed, based on the scope and severity of the complaint.
- b. DIR will increase available staffing to ensure that regular and unannounced surveillance of businesses in communities with high rates of COVID-19 cases occur.
- c. Department of Business and Industry will be working with business and chambers to direct prevention messages and offer free face coverings.

- d. DIR will develop public service announcements directed at businesses that may be most impacted by COVID-19.

3. **Third Violation:** Identifies that the business has failed to correct the violation and is subject to criminal prosecution and/or civil penalties under NRS 199.280, NRS 202.450 and other applicable statutes ordinances and/or regulations.

It is hereby ordered that:

The Declaration of Emergency, Directive 024, Section 9: “Any individual who does not comply with Section 5 of this Directive, after receiving notice from law enforcement, may be subject to criminal prosecution and civil penalties under NRS 199.280, NRS 202.450, and any other applicable statute regulation, or ordinance. All law enforcement agencies in the State of Nevada are authorized to enforce this Directive. The Office of the Attorney General is given concurrent jurisdiction to prosecute violations of this Directive.”

Elko County wants to make it clear that individual businesses will not be held liable for the actions of their customers.

V. COMMUNITY OUTREACH

Elko County does not have its own Health District, the County relies on assistance from the Nevada Department of Health and Human Services' Division of Public and Behavioral Health (DPBH) and Nevada State Public Health Laboratory (NSPHL). Thus, any programs that State or public health is providing, Elko County is willing to consider participating and bring these programs to Northeastern Nevada.

It is Elko County's understanding that the State of Nevada will be developing a COVID-19 Prevention Ambassador Program. This program will utilize volunteers and paid staff in communities most highly affected by COVID-19. The State of Nevada will work with state and local workforce programs, as well as, other outreach services and models. The Ambassador Program is a street-outreach program developed to identify settings where the directives may not be met related to social distancing and face coverings in public settings. The Ambassadors will be trained to educate and encourage individuals to exercise protective measures by providing risk reduction kits that include information on COVID-19, free face coverings, free hand sanitizer, and referrals for testing or social services as needed.

Media, both traditional and social, are an integral part of outreach and education for our various communities. The Department of Health and Human Services' Division of Public and Behavioral Health (DPBH) is partnering with the Nevada Broadcaster's Association (NBA) to create public service announcements around face coverings and social distancing. The campaign will focus on normalizing these behaviors among target populations. NBA partners with statewide media outlets, including major media stations and targeted media, such as Telemundo.

Elko County is considered part of the Utah district for broadcasting. It is our hope that the State and the NBA will consider expanding the media campaign to reach the Northeast and Eastern part of the state with their messaging.

VI. PUBLIC HEALTH

The public health response for COVID-19 involves increased and sustained testing, identification of new cases, contacts to those cases, and analysis of the spread of infection by geographic and demographic factors. This data analysis supports targeted education and outreach for prevention and testing, and evaluation of those efforts. This data is also used to direct future reopening directives.

The State of Nevada developed three overarching goals for public health to serve as statewide benchmarks during the COVID-19 response. These goals dictate the staffing needed for each area of the state.

- At least 2% of Nevada's population will be tested for COVID-19 each month.
- Every Nevadan who tests positive for COVID-19 will be contacted by a contact tracer within 24 hours of that confirmatory lab report being received by the health authority.

- Within 24 hours of identifying a close contact of a case, those individuals will be communicated with by a contact tracer.

As COVID-19 appears to affect each county in a unique way at different times, the DPBH is developing a system to allow staff trained in one county for case investigation to remotely support another county, should they have an immediate surge in cases. This flexibility in staffing is only realized through the current efforts of standardized training, processes, forms, and data collection systems.

Elko County currently utilizes the services of staff and students at Great Basin College for contact tracing. These individuals have received the standardized training and have assisted in tracing numerous individuals that have been in contact with positive cases. This has allowed Elko County to encourage self-isolation and/or quarantining, including increased testing of possible group contacts.

In order to ensure that each case and contact identified can self-isolate or quarantine effectively, they are connected with either the Nevada Health Centers or to Nevada 211, Nevada's Division of Welfare and Supportive Services, and local social services to ensure wraparound services are provided. Those needs identified may range from health services for those who are uninsured or may need Medicaid, housing services, food services, or other such services.

VII. CASE INVESTIGATION WORK FORCE

Case investigation is a fundamental aspect of COVID-19 response. Case investigation is centered around the immediate self-isolation of the case, discussion of close contacts, and completion of the Centers for Disease Control and Prevention (CDC) form. In addition to the CDC form, Nevada, along with Elko County, has also added additional questions to each case interview related to occupation and details on mass gathering or social events.

Case investigation workforce for COVID-19 varies to meet the specific need of each jurisdiction. In Elko County, this workforce comprises state health department staff, paid contractors, Nevada System of Higher Education faculty, staff, and students, i.e. Great Basin College, Nevada Health Centers, and Elko County employees and volunteers. This workforce can increase or decrease as needed to meet the needs of the community. The immediate need for additional case investigation staff in Elko County is needed. Elko County is working on securing additional resources for not only case investigation but community-based testing.

The State of Nevada has contracted with Deloitte to provide staff and support for contact tracing 12-hours per day, 7-days per week. Should Elko County continue to see an increase in cases, Elko County will reach out to the State of Nevada, Division of Emergency Management and DPBH for assistance.

VIII. NOTICE OF VIOLATION

SAMPLE: NOTICE OF VIOLATION

LAW ENFORCEMENT LOGO

*Name and Address of
Law Enforcement Agency*

TO: _____
(Name of Business)

SUBJECT: NOTICE OF VIOLATION OF GOVERNOR'S DIRECTIVE(S); DECLARATION OF EMERGENCY; COVID-19 PANDEMIC

PURSUANT TO DIRECTIVES 03, 021, 023 AND/OR 024, SIGNED BY THE GOVERNOR OF THE STATE OF NEVADA, YOU ARE HEREBY NOTIFIED THAT THE ABOVE BUSINESS IS IN VIOLATION OF THE DIRECTIVE(S) AND/OR THE EMERGENCY REGULATION OF THE NEVADA DEPARTMENT OF PUBLIC SAFETY, DIVISION OF EMERGENCY MANAGEMENT (NAC 414), AS FOLLOWS:

LOCATION OF VIOLATION: _____

DATE/TIME OF VIOLATION: _____

DESCRIPTION OF VIOLATION (ADD ADDITIONAL PAGES IF NECESSARY)

YOU ARE FURTHER NOTIFIED THAT FAILURE TO CORRECT THESE VIOLATION(S) MAY SUBJECT THE ABOVE BUSINESS TO CRIMINAL PROSECUTION AND/OR CIVIL PENALTIES UNDER NRS 199.280, NRS 202.450 AND OTHER APPLICABLE STATUTES ORDINANCES AND/OR REGULATIONS.

By: _____
Law Enforcement Agency Name

Date: _____



ELKO COUNTY
EMERGENCY OPERATIONS CENTER
571 Idaho Street
Elko, NV 89801

ELKO COUNTY COVID-19 JURISDICTIONAL ASSESSMENT & ACTION PLAN
ADDENDUM TO ELKO COUNTY RE-OPENING RESPONSE PLAN
AS APPROVED BY ELKO COUNTY BOCC – 8/5/2020

OVERALL ASSESSMENT

While Elko County continues to report an increase in new cases, active case numbers have significantly declined and are now relatively stable averaging 84 active cases over the past 14 days. In the month of July, there were more recoveries than new cases and other data suggests that our cases numbers continue to move in the right direction.

HOSPITAL CAPACITY

Elko County's Unified Command Team continues to collaborate with Northeastern Nevada Regional Hospital (NNRH) to closely monitor overall capacity to treat and care for all patients, not only those with COVID-19. NNRH has designated rooms to isolate and treat COVID-19 patients, including a negative pressure room. Through the pandemic, staffing and occupancy has been good.

To date, no admitted COVID-19 patient has required the use of a ventilator.

As of August 12, 2012, based on the daily report from Nevada Hospital Association:

- ICU beds – 7 licensed beds, 0 occupied
- Ventilators – 6 , 0 in use

Staffing and PPE levels are adequate. NNRH is sanitizing PPE, including N95 masks in effort to ensure PPE levels remain stable. In addition, they continue to purchase and stockpile PPE to prepare for a surge.

Alternate Care Facility planning is ongoing. NNRH can expand capacity within their own facility, including obtaining additional ventilators, if necessary. Elko County will work with NNRH to ensure appropriate metrics have been identified which determine the implementation of the Alternative Care Facility plan.

Overall, Elko County's hospital capacity is good and remains stable.

ACCESS TO PERSONAL PROTECTIVE EQUIPMENT

Elko County's Logistics Team continues to support the regional warehouse which was established to provide supplies to Humboldt, Lander, Eureka, White Pine, and Elko counties as well as State and tribal agencies in northeastern Nevada. The Nevada National Guard trained Logistics team members to utilize their database. We continue to receive and distribute PPE based on the priorities set by Nevada Division of Emergency Management, specifically hospitals, acute care facilities, private practices and correctional facilities, first responders and those supporting vulnerable populations.

The current PPE status for health care providers and our public health system, including private practices, is at sufficient capacity for maintaining the status quo. As PPE has become more readily available through the normal supply chain, we have received fewer requests for assistance. However, the logistics team continues to work with existing suppliers and to identify new suppliers to plan for and build supplies necessary to respond to a surge or resurgence of COVID-19. In addition to the regional warehouse, Elko County EOC maintains a local warehouse in effort to respond to immediate, short-term needs.

We're encouraging providers to utilize the Battelle system for N-95 masks.

Metrics to determine additional emergency measures are under review and will be provided in the next update.

TESTING CAPACITY

Under the direction of Elko County Health Officer, Dr. Putnam, the testing strategy continues to be driven by availability of local resources. The priority for testing is as follows:

- Individuals experiencing symptoms consistent with COVID-19
- Close contacts of a confirmed case
- High risk or vulnerable individuals
- Healthcare workers and first responders
- Individuals scheduled for medical procedures

Nevada Health Centers continues to be the main provider of testing in our communities. However, other private clinics and NNRH are supporting testing efforts as well. Community-based testing is not currently integrated as part of the County's strategy mostly due to barriers including, a lack of resources to support a CBT event and, most importantly, the lengthy turn-around time for results.

Elko County would prefer to engage with local health care providers to support increased testing efforts through a drive-thru clinic for both symptomatic and asymptomatic individuals. If a provider is not interested in providing the service, Elko County is interested in partnering with Nevada National Guard or a private testing agency for another community-based testing event.

Based on the data provided by NV DPBH, Elko County has averaged 95 tests per day over the last 30 days. However, we are concerned that not all labs are reporting the appropriate data to NV DPBH. We are researching and will provide an update as soon as we have confirmed.

Elko County is monitoring local data for trends to identify localized outbreaks. The West Wendover community continues to be a concern especially because we are not aware of the cases across the border in Wendover, UT. Through contact tracing there has been several notable familial exposures and transmissions of the virus. In addition, several residents go to Utah for testing, which causes a delay in results being reported back to NV DPBH. In addition to COVID-19 screening, the City of Elko has implemented testing of sewage samples, which have indicated a week over week decrease of active cases based on sewage samples. Only some residents in the City of Elko are on the sewer system. (Reports attached)

CONTACT TRACING

Elko County partners with Great Basin College to provide disease investigation and contact tracing services for Elko, Eureka, and Lander counties. The team is led by Dr. Amber Donnelly, Dean of Health Sciences and Human Services and is adequately staffed to meet our needs. Currently, the team is contacting all positive cases within 24 hours as long as they have accurate contact information for the case. They are also contacting all close contacts within 48 hours so long as they have correct contact information.

Through contact tracing data we are investigating a localized outbreak of cases that are related to one organization. We are working closely with the organization to take appropriate steps to mitigate the spread of the virus in the workplace. In addition, it is also noted that West Wendover has experienced a significant number of cases based on its population. However, West Wendover is primarily a Hispanic community with outbreaks within families.

In addition, it is recommended to separate the tribal case data from the Elko County data which may impact the County's metrics. Approximately 25 cases are tribal cases.

PROTECTION OF VULNERABLE POPULATIONS

- Skilled Nursing Facilities - The administrators and leadership of facilities which house and support vulnerable populations have done an outstanding job protecting them. To date, the skilled nursing facility has remained closed and only allows essential personnel access to the building. Additionally, periodic testing of staff and residents has been implemented and most recently completed last week. The skilled nursing and assisted living facility have reported two positive cases, both of which were staff and did not result in exposures to residents.

One new positive case of a staff member was reported today and is under investigation.

- Correctional Facilities – Elko County Jail and the Juvenile Detention Center are the only correctional facility which fall under the jurisdiction of the County. To date, there has been two positive adult inmates who were in the facility at separate times. Dr. Putnam

has worked closely with both facilities to ensure isolation and testing procedures are in place to stop the spread within the facility, if necessary.

Elko County continues to work closely with NYTC to ensure they are supported from all aspects, including adequate PPE supplies.

ENFORCEMENT

Enforcement efforts are covered in detail in the Plan approved by the BOCC on August 5, 2020.

County Level Compliance

Nevada OSHA is currently in Elko conducting compliance investigations which we believe have resulted in a minimum of a verbal warning to a number of organizations. To date, no formal enforcement actions have been taken by county officials other than the approval of the Re-opening Response Plan. Elko County received notice of a complaint against the County for a Court House security personnel not wearing a mask. The complaint has since been investigated and corrective action has been taken. Following the Governor's directive for mandatory face coverings, Elko County implemented a mask policy which includes face coverings for employees and visitors.

Education continues to be a focus to encourage businesses and individuals to follow public health guidance in effort to slow the spread of the virus.

City Level Compliance

Elko Police Department is responsible for issuing written warnings notifying businesses they are not in compliance with specific directives. So far, one formal action has been taken against a local bar in which their business license was revoked or suspended.

ACTION PLAN

1. Ensure NV DPBH is receiving all testing data from private labs that local providers are engaging with. Validate the testing data is accurate and remove the tribal data from the County data.
2. Continue to review contact tracing data to identify trends and outbreaks. Work to mitigate the identified outbreak(s), engaging additional resources if necessary.
3. Work with local health care providers and clinics to increase testing.
4. Keep an open dialogue with NV DPBH and Taskforce regarding community-based testing. Elko County is specifically interested participating if we can get the necessary resources to rapid test during a community-based testing event rather than the extended processing and result times of the public health lab.
5. Continue to monitor PPE supplies and ensure an adequate number of supplies in the warehouse to cover a surge or resurgence of COVID-19.

COMMISSION UPDATE

From the July 2020 Meetings...

- ◆ Commissioners approved the tentative subdivision map for the Ruby Vista Subdivision in Spring Creek across from the high school. The room was filled as concerns of water, traffic and view sheds were expressed. The Commission approved the tentative plan unanimous vote. The developers will be coming before the board for the final map. This projects has been in the works for over a decade.
- ◆ Dr. Putnam continues to stress the importance of face masks and social distancing as our COVID-19 cases climb ever higher. He stated that everyone should wear masks and if they do not, our county will keep going backward. Numbers for Monday July 27th were 424 positive cases. Elko County is designated as one of the White House's Red Zone counties. Businesses should be respected as they follow the directives of the Governor. These directives could effect their very existence as the State enforcement efforts are ramping up and large monetary fines are being levied for continued non-compliance.
- ◆ Jackpot showed large attendance numbers to support their cause when the Commissioners discussed and considered authorizing Elko County staff to move forward with drafting an ordinance regarding marijuana in the Unincorporated Town of Jackpot. The trip was worth the Jackpot residents effort as the Commission heard the pleas and approved moving forward—with some conditions to protect Jackpot.
- ◆ Ordinance 04-2020 which amends the Elko County infrastructure tax to update and clarify some of the language of the tax plan's distribution formula had it's second reading and was passed, as well as Ordinance 05-2020, known as the "whistleblower" policy, which protects those who report improper governmental actions.

Wearing a face covering protects others. Who do you wear your face covering for? Parents, Kids, friends, co-workers



- Wear a face covering that covers your nose and mouth to help protect others in case you're infected with COVID-19 but don't have symptoms.
- Wear a face covering in public settings when around people who don't live in your household, especially when it may be difficult for you to stay six feet apart.
- Wear a face covering correctly for maximum protection.
- **Don't** put the face covering around your neck or up on your forehead.
- **Don't** touch the face covering, and, if you do, wash your hands or use hand sanitizer to disinfect.

YEARS IN SERVICE

5 Years

Justin Gilliam Jarbidge Public Works

10 Years

Shawn Burt Jackpot Public Works

20 Years

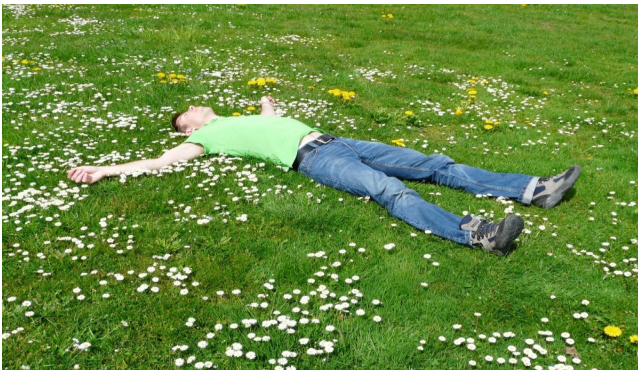
Dale Wilson Ambulance



Farewell TO OUR RETIREE

Robert Turner

Equipment Operator Road's



Try a different approach when scheduling work hours with a parent of school aged children. Look at things from every angle to find a solution that works for now. These are not permanent changes! We got this! :)

PS—A policy for this situation is currently in the works and will be announced when completed.

NEW FACES IN THE CROWD

David Webb

Custodian Buildings & Grounds

Josie Burgess

Detention Officer II Juvenile Detention

Merrick Milldrum

Temp Clerical Help Treasurer's Office

Brealynn Williams

Volunteer Jackpot Fire



2020 Election Workers Needed

The Elko County Clerk's Office needs YOU to work at the polls on Election Day!

When: November 3, 2020 General Election Day

Pay: \$100 for the day

Requirements:

Registered Voter in Elko County, NV
Not a candidate or relative of a candidate
Able to perform all duties for Election Day, endure long hours (about 14 hours)
Attend training class
Experience in technology is desirable but not required.



Interested: Call the Elko County Clerk's office at 775-753-4600 and speak to Becky.



POOL/PACT HUMAN RESOURCES

FY 20/21 FALL **NEW** ONLINE ESSENTIAL MANAGEMENT SKILLS IN THE PUBLIC-SECTOR CERTIFICATE PROGRAM

POOL/PACT Human Resources is pleased to offer this new online regional training opportunity for managers and supervisors. This training is open to all POOL/PACT members.

For more information and to register for the online training, "Essential Management Skills in the Public-Sector certificate program," please click [here](#).

POOL/PACT Human Resources | (775) 887-2240 | www.poolpact.com

JOYS OF PARKING

Starting Monday, August 10 through Tuesday, August 11, the City of Elko will be paving Court Street, Boucher Blvd and 6th Street. There will be NO parking on affect streets (including alongside the Public Defender's Office (6th Street). Signage will be placed all around.

Access to the major parking lots will be from the back and/or alley ways. The City has promised not to pave the crosswalk from the parking lot across Court Street for access to the buildings. Please remember to move fleet vehicles in those areas by the end of the day **TODAY!**



...IT'S VIRTUALLY HERE!...



**ELKO COUNTY EMPLOYEE
APPRECIATION WEEK
SEPT 28, 2020–OCT 2, 2020**

**IT'S A WHOLE NEW WORLD OUT THERE AND
WE ARE EMBRACING ALL THE GREATNESS OF 2020!**



Here's Just a Few Things You Can Expect

September 18th

Raffle Tickets On Sale with Special Drawing, Door Decorating Competition and Your Department's Survivors Guide Due

September 28th thru October 1st

Knowledge Challenges, Minute to Win Tasks, A "Tiger King—Murder, Mayhem and Madness?" Mystery to Solve and Other Fun Things

October 2nd

Service Award Recipients Recognition Broadcast, Revenge of the Department Heads Escape Room Challenge Part 2, A Feast Like Never Before and Raffle Prizes Galore



COVID-19 (Coronavirus)

Data is updated Monday - Friday. For questions, e-mail or text covid19@elkocountynv.net or call (775) 748-0204. Last updated 8/06/2020 @ 4:30 PM.

524

TOTAL CONFIRMED CASES

83

ACTIVE - CONFIRMED

439

RECOVERED (PCR & ANTIBODY)

2

DEATHS

8106

PCR TESTS PERFORMED

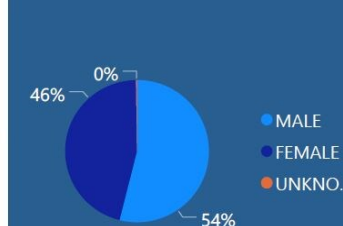
7179

PEOPLE TESTED

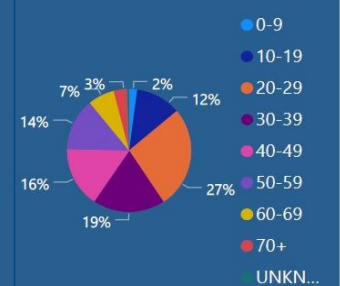
Confirmed cases are initially reported in the county where the patient is TESTED. Once the epidemiological investigation is performed, the case will be reported in the county where the patient resides.

LOCATION	CONFIRMED CASES	ACTIVE CASES	RECOVERED CASES	% OF TOTAL CASES
CARLIN	12	2	10	2.29%
ELKO	287	48	238	54.77%
JACKPOT	1	0	1	0.19%
SPRING CREEK	80	9	71	15.27%
UNDER INVESTIGATION	4	2	2	0.76%
WELLS	8	2	6	1.53%
WEST WENDOVER	132	20	111	25.19%

PATIENT GENDER

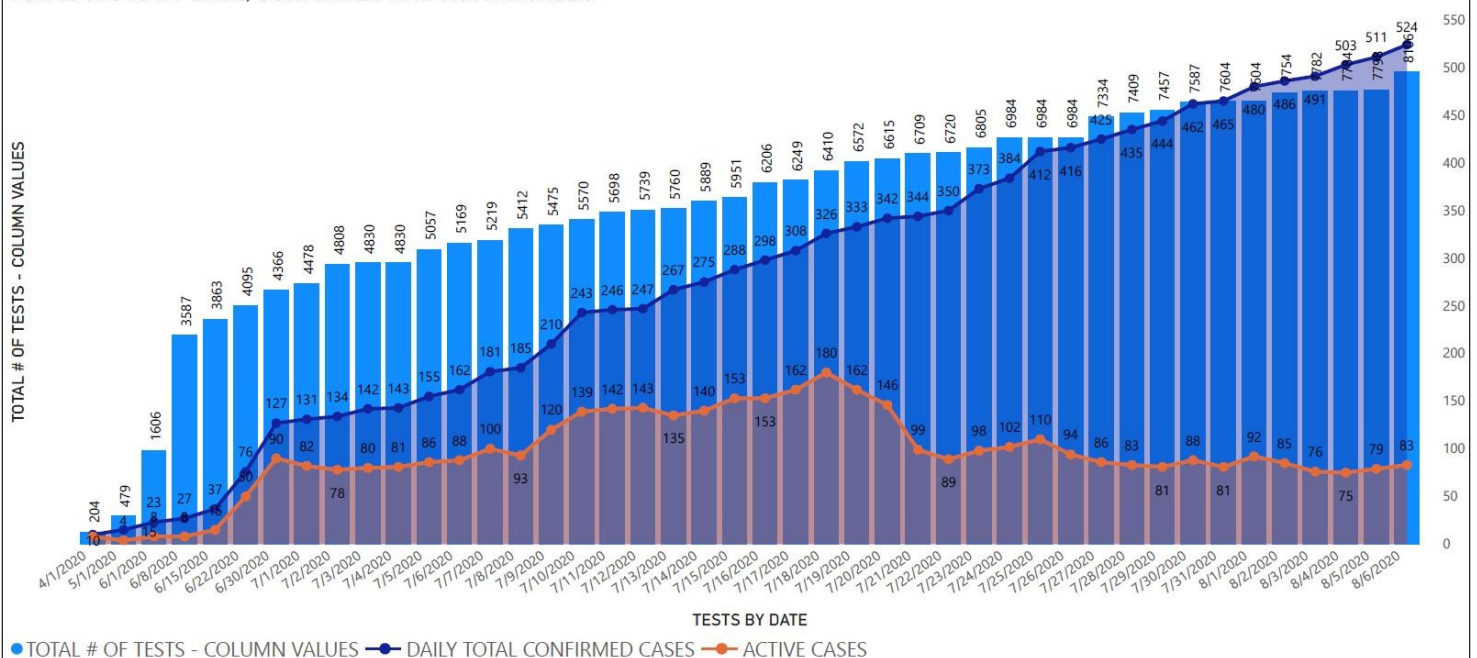


PATIENT AGE



It is up to each of us to slow this down or stop it in its tracks.
We can work together to protect each other.

TOTAL TESTS BY DATE, CONFIRMED AND ACTIVE CASES



7.10%

CUMULATIVE POSITIVITY RATE

931.20

CASE RATE PER 100,000

The Cumulative Positivity Rate and Case Rate Per 100,000 data points are based on the Nevada Health Response dashboard. The methodology for calculating this data can be found at <https://nvhealthresponse.nv.gov>.

These metrics are important based on the newest plan, Road to Recovery: Moving to a New Normal, as they are used to evaluate the risk level of the particular county or city and determine the level of corresponding mitigation.

CALENDAR

AUGUST 7

Payday

AUGUST 10

City of Elko Paving Court Street, Boucher Blvd and 6th Street—No parking on streets, need back entries into parking lots

P Card Statements Due

AUGUST 11

City of Elko Paving Court Street, Boucher Blvd and 6th Street—No parking on streets, need back entries into parking lots

Noon
Claims Due

1:00 pm
Department Head Mtg

AUGUST 19

1:30 pm
Commissioner's Meeting

AUGUST 20

5:15pm
Elko County Planning Commission

AUGUST 21

Payday

AUGUST 25

Claims Due

MEN AND MASK OPTIONS



**Men's
Fashion
Options
Have Been
Limited Until
Now**

Additional
Facial
Hair—No
Problem



**Tool
Time!**

**How Big Was That Fish
Again?**



Your local library is doing everything they can for you! Please call them or check out the website for access to all the fabulous services they are able to offer in spite of closed doors.

REQUEST A BOOK
PLACE A HOLD
SCHEDULE A LIBRARIAN

SEARCH OUR CATALOG
MY LIBRARY ACCOUNT
HELP & SUPPORT



**Elko - Lander - Eureka
County Library System**

**BRANCH
LOCATIONS**

Home About Our Libraries ▾ Use Our Library ▾ Friends of the Elko County Library Books Express ▾ Bookmobile Contact Us ▾

2020 Summer Reading Program



Get ready for the Elko-Lander-Eureka County Library System's Summer Reading Program, sponsored by Nevada Gold Mines.

Registration for this year's Summer Reading Program for youth of all ages (infants through 18 years) begins Monday, June 15. This year's reading program, "Imagine Your Story!", kicks off on June 29 and runs through August 28. Please make sure to register in order to participate in this fun program!

Prize Redemption: Once you have earned some prizes with the summer reading program, call your local library. We will arrange a day and time that you can come by and pick up your prizes. We highly encourage you to earn several prizes before you call; you DO NOT have to pick up one prize before you can earn the next.

Ms. KaCee will also be at the Elko County Library for prize redemption, Saturdays, from 9-11. Stop on by and pick up your prizes.

****Please note that due to current social distancing guidelines, the Elko County Library will unfortunately be unable to provide all of our normal summer programs. However, we have put craft and camp kits together for those who would like to participate at home. Please call and ask to speak with the Children's Department if you are interested in participating this year. Supplies are limited.****

Registration and reports will be done online this year at <https://elkocountylibrary.beanstack.org/>.

For more information, please contact the Library at 775-738-3066.

Go To www.elkocountylibrary.org to check out these programs!



Curbside Pickup

We have recently began curbside pickup service. Click

here for more information on how to request items and other additional questions you may have.



Free Digital Fun

A list of available resources and links

from other websites who are working to help your family learn and have fun! We will continue to add to the list, so check back often for more fun things you can do from home!

ELKO COUNTY FACE MASK REQUIREMENTS

Elko County employees are required to wear a face covering as follows:

While at work.

When interacting in-person with members of the public.

When in any space visited by the general public, even if no one else is present.

When in any space where food is prepared or packaged, for sale, or generally distributed to others.

When walking through common areas, such as hallways, stairways, elevators, and parking facilities.

In any room or enclosed area where other people (except for members of the person's own household or residence) are present when unable to physically distance.

Elko County employees are encouraged to wear a face covering in public as follows:

Whenever you leave the house.

To keep businesses open and help slow the spread, face coverings are required. Face coverings should always be worn in the following circumstances:

Public spaces.

Inside of, or standing in line waiting to enter, any indoor public space.

While outside in a public space when 6 feet of social distancing from those not in your same household isn't possible.

Public or Private Transportation or paratransit that others HAVE used or WILL use.

While waiting for or riding on public transportation or paratransit.

While riding in taxis, private car services, monorails, trams, and rideshares like Uber and Lyft.

While driving or operating any form of transportation or paratransit when passengers not in your same household are present. When no passengers are present, face coverings are still strongly recommended.



ROBERT K. STOKES
Elko County Manager

July 2, 2020

Dated

Goldie's business license revoked

- [Cynthia Delaney](#)
- Aug 10, 2020 Elko Daily Free Press

ELKO – A downtown bar that remained open following Gov. Steve Sisolak's [closure order](#) of July 10 has had its business license revoked.

Ron Goldie, owner of Goldie's bar downtown, went before a business license revocation hearing with the Elko city manager and other city officials Aug. 6 after being warned several times about disobeying state emergency directives during the Covid-19 crisis.

"There was a hearing and they [the owner] came in and they were given probably an hour and a half to two hours to tell their side of it," said Elko City Manager Curtis Calder. "We had witnesses that testified on various subject matters both from their side as well as our side. Ultimately, I upheld the city clerk's original decision to revoke [their business license.]"

Calder said the owner has a right to appeal his decision before the Elko City Council on Aug. 25.

Ron Goldie said he is going to appeal.

Calder said the main reason the license was revoked was because Goldie's remained open when they should have been closed pursuant to Gov. Steve Sisolak's Directive 027, which requires all bars that are not licensed to serve food to be closed.

According to Calder, shortly after the directive came out the Elko Police Department informed the various bars in town, making sure they knew about the directive and what it required.

"All bars that are not licensed to serve food, with the exception of Goldie's, closed," Calder said. "Goldie's remained open then they received a written notice of violation around July 18. This is the only instance where we have issued one of these and the business hasn't complied. They were arguing that they do have a license to serve food."

Calder explained that the bar only has the basic bar/service bar permit from the Nevada Department of Health and Human Services. That permit only allows for alcohol, ice and items like chips or pretzels.

Calder said the bar had a menu which included things like meatball sandwiches, enchiladas and other meals.

"They had been serving food illegally for God knows how long without proper licensing," Calder said. "We did have the health department at the hearing and they testified to that."

“I have a health department license food establishment license that says ‘no restrictions’ on it,” Goldie told the Elko Daily. “I have had it for 28 years. I have been operating off of that license all these years serving food off and on and it’s never been a problem until now.

“I did not know that I had to have an additional license and I didn’t know that was the wrong license,” he said. “And furthermore, back in June, the health department came in and did an inspection and we got a 96 out of 100. On the inspection sheet they used it says ‘Food Establishment Inspection.’ I was staying open because I thought I had a food establishment license and I still believe I do.”

According to Calder, another issue occurred earlier this year.

“There were some issues brought up during the hearing with regard to the initial closure back in March and April,” Calder said. “We had heard a rumor that they were not in compliance and sent the police department over there and they refused entry, which is a violation of the liquor code.”

Calder said Goldie’s has closed since the hearing, pending the appeal.

“I wanted to stay open because I have seven employees, some of them single mothers, some of them live from paycheck to paycheck and now they are all out of work,” Goldie said. “I got word of it not being the right license [about] two weeks before I had to go to the hearing.”

Goldie said he has applied for the correct license and it is now being processed.

“It is a serious matter when you have your business license revoked,” Calder said. “It’s not something we take lightly. It’s not something we like to do. But, when we have a business that is operating in the City of Elko and not complying with our police department or our city clerk, that’s going to be a problem.”

“I deserve the opportunity to do the right thing after all these years,” Goldie said. “I never meant to do anything wrong.”

Comments on Facebook varied, mainly in support of the business.

One woman posted over the weekend that Goldie’s had lost its license after being in business for 28 years.

“I was in there with friends Monday evening,” wrote another. “I had a hot dog and chips, and a friend of mine had a burrito. They do serve food.”

Several dozen bars in Las Vegas have sued over the closure order, according to The Nevada Independent.

“The disparate treatment of bars and taverns is unreasonable because there is no rational basis for treating bars and taverns differently than other, similarly situated, non-essential businesses,” the lawsuit states.

Elko City Water Reclamation Facility Influent Sampler

Sample collection date: **August 3, 2020**

SARS-CoV-2 virus in sewage

DETECTED

Virus concentration per liter of sewage

386,564 copies

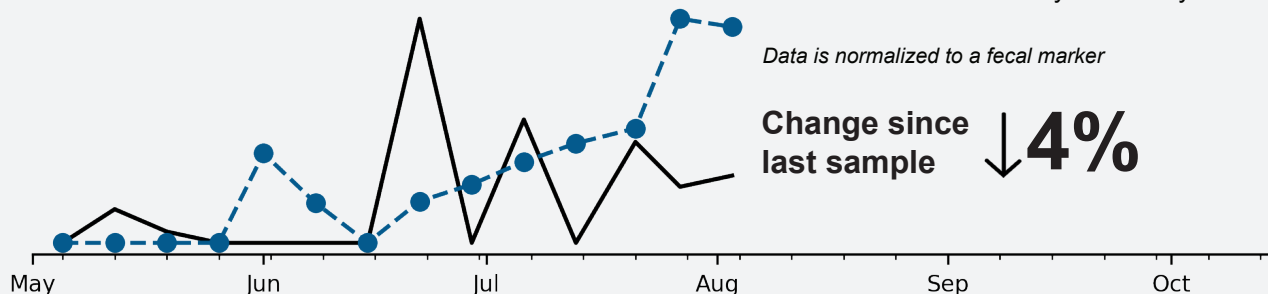
Relative concentration over time

SARS-CoV-2 normalized concentration in blue
New cases for your county in black

Concentration levels of SARS-CoV-2
at your facility over time, compared
with new case trends for your county.

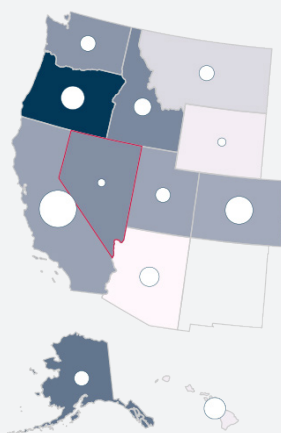
Data is normalized to a fecal marker

Change since
last sample **↓4%**



Regional overview of concentration levels

West



Compare normalized
SARS-CoV-2 levels found
in participating wastewater
treatment facilities, averaged
since the beginning of May.

lower higher

*Color indicates concentration level
Your state outlined in red*

*Size of circle indicates population
served by participating facilities*

20k 1.5mil 10mil

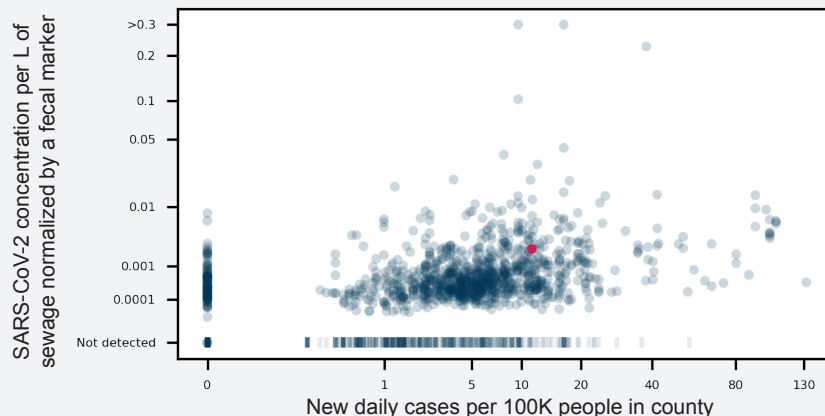
About the data

Our methods for detecting SARS-CoV-2 in sewage are adapted from CDC protocols and available at www.biobot.io/covid19. Our approach relies on detecting genetic fragments of the virus that are excreted in stool, which does not determine if the virus is dead or active.

Relative concentrations trend with new cases

Concentration levels are trending with the county's new reported cases at the time of sample collection.

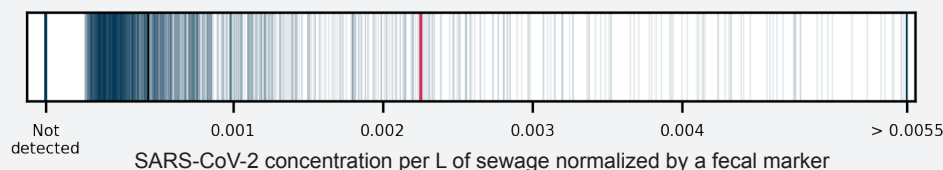
This sample in red, all other samples since May in blue.



Relative concentrations in comparison

Your sample in red, median in black, all other samples collected since May in blue

Your sample has higher concentration levels than **86%** of all quantifiable samples collected since May.



Contextualize SARS-CoV-2 levels in your facility's catchment with other participating facilities.

Case Estimates Reflect Active R&D

Evaluate as beta results when comparing to reported Covid19 cases

For more information, <https://doi.org/10.1101/2020.04.05.20051540>

read the whitepapers: <https://doi.org/10.1101/2020.06.15.20117747>

Reported COVID19 cases in Elko County, NV

New cases

6

Cumulative cases

488

On August 3, 2020, as reported by USAfacts.org

Biobot COVID19 case estimate

5,200 cases

(26% incidence rate)

Using a reported flow rate of 2.6 MGD

Biobot's wastewater testing protocols

We are continuously working to improve our protocols to increase the sensitivity of our measurements and reduce variability. We use a qPCR-based method to detect and quantify the SARS-CoV-2 virus and an associated fecal normalization control.

The RNA extraction method changed between protocols v1 and v2 to improve the sensitivity of our measurements. Protocols v2.1-v2.3 reflect changes in our quantification method to further improve the precision of our analysis and reduce variability. Internal tests have been conducted to assure data integrity. The SARS-CoV-2 viral titers that we report may be affected by slight batch effects between these protocol versions.

The sensitivity of our assay varies slightly between these protocols. The exact limit of detection (LOD) that applies to your sample can vary. Generally, the LOD for each protocol is: v1: 6,400 copies/L; v2: 34,000 copies/L; v2.1: 1,700 copies/L; v2.2: 2,100 copies/L; v2.3: 3,600 copies/L.

Why normalize with a fecal marker?

We normalize SARS-CoV-2 viral titers to account for differences in the total people contributing to each sample. We use PMMV as this internal control, which is an RNA virus that is excreted in stool.

Biobot's COVID19 case estimate

We measure the concentration of SARS-CoV-2 in sewage. We convert our measurements into a COVID19 case estimate using the following basic equation:

$$\text{Number of infected people} = \frac{\text{total amount of virus per day}}{\text{virus shed per infected person per day}}$$

Comparing with confirmed clinical cases

Our COVID19 case estimates may not match the confirmed case numbers in the community for a variety of reasons. Clinical testing may not represent the entire infected population. The SARS-CoV-2 virus may start being shed before patients develop symptoms and seek testing.

We encourage you to share these reports with your local public health officials to compare our case estimates with the number of confirmed cases in your local community.

Data use

The Biobot COVID19 case estimates provide an alternative metric to guide responses to the outbreak. We recommend that you share this information with local public health officials. We believe this work will have the greatest impact on a statewide level, and hope that you will reach out to your state officials and encourage the expansion of our partnership across your state.

Pioneering a better way to track Covid-19

We are the nation's leader in wastewater epidemiology. We analyze sewage to determine the presence of infected individuals and estimate the number of Covid-19 cases, providing:

- **Trend analysis**: Determine when to safely re-open, and keep open, our communities and businesses through frequent sampling.
- **Early warning**: Detect the re-emergence of Covid-19 in a population to rapidly take action and contain new outbreaks.
- **Testing at scale**: For a fraction of the cost of mass individual testing, get an overview of the scope of the outbreak.

For questions, email support@biobot.io

Elko City Water Reclamation Facility Influent Sampler

Sample collection date: **July 27, 2020**

SARS-CoV-2 virus in sewage

DETECTED

Virus concentration per liter of sewage
250,639 copies

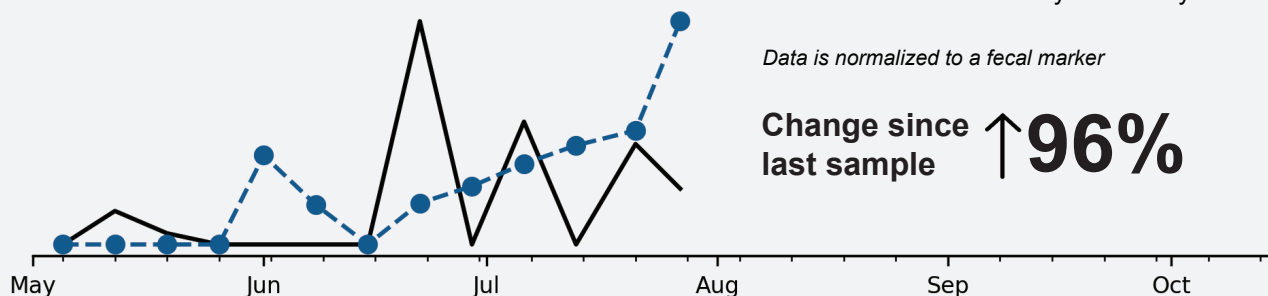
Relative concentration over time

SARS-CoV-2 normalized concentration in blue
New cases for your county in black

Concentration levels of SARS-CoV-2
at your facility over time, compared
with new case trends for your county.

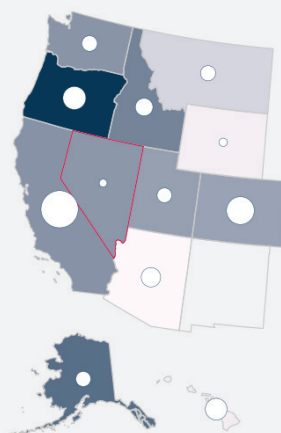
Data is normalized to a fecal marker

Change since last sample **↑96%**



Regional overview of concentration levels

West



Compare normalized
SARS-CoV-2 levels found
in participating wastewater
treatment facilities, averaged
since the beginning of May.

lower higher

Color indicates concentration level
Your state outlined in red

Size of circle indicates population
served by participating facilities

20k 1.5mil 10mil

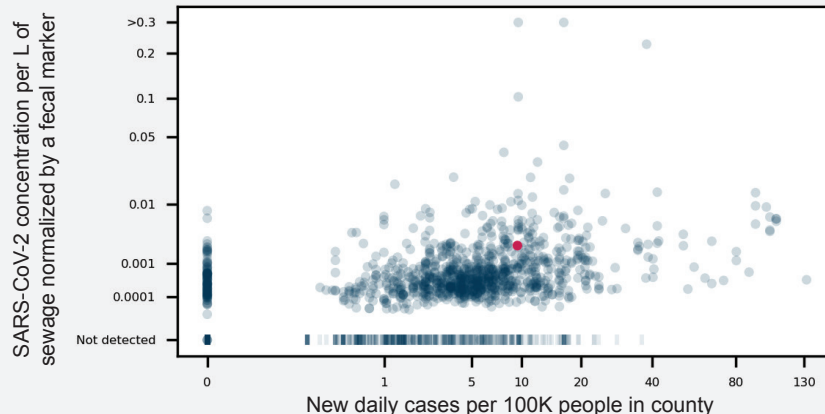
About the data

Our methods for detecting SARS-CoV-2 in sewage are adapted from CDC protocols and available at www.biobot.io/covid19. Our approach relies on detecting genetic fragments of the virus that are excreted in stool, which does not determine if the virus is dead or active.

Relative concentrations trend with new cases

Concentration levels are trending with the county's new reported cases at the time of sample collection.

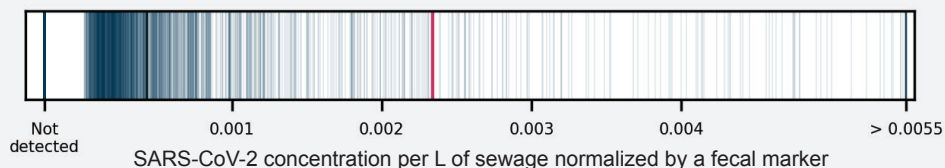
This sample in red, all other samples since May in blue.



Relative concentrations in comparison

Your sample in red, median in black, all other samples collected since May in blue

Your sample has higher concentration levels than **87%** of all quantifiable samples collected since May.



Contextualize SARS-CoV-2 levels in your facility's catchment with other participating facilities.

Case Estimates Reflect Active R&D

Evaluate as beta results when comparing to reported Covid19 cases

For more information, <https://doi.org/10.1101/2020.04.05.20051540>

read the whitepapers: <https://doi.org/10.1101/2020.06.15.20117747>

Reported COVID19 cases in Elko County, NV

New cases

5

Cumulative cases

416

On July 27, 2020, as reported by USAfacts.org

Biobot COVID19 case estimate

3,400 cases

(17% incidence rate)

Using a reported flow rate of 2.6 MGD

Biobot's wastewater testing protocols

We are continuously working to improve our protocols to increase the sensitivity of our measurements and reduce variability. We use a qPCR-based method to detect and quantify the SARS-CoV-2 virus and an associated fecal normalization control.

The RNA extraction method changed between protocols v1 and v2 to improve the sensitivity of our measurements. Protocols v2.1-v2.3 reflect changes in our quantification method to further improve the precision of our analysis and reduce variability. Internal tests have been conducted to assure data integrity. The SARS-CoV-2 viral titers that we report may be affected by slight batch effects between these protocol versions.

The sensitivity of our assay varies slightly between these protocols. The exact limit of detection (LOD) that applies to your sample can vary. Generally, the LOD for each protocol is: v1: 6,400 copies/L; v2: 34,000 copies/L; v2.1: 1,700 copies/L; v2.2: 2,100 copies/L; v2.3: 3,600 copies/L.

Why normalize with a fecal marker?

We normalize SARS-CoV-2 viral titers to account for differences in the total people contributing to each sample. We use PMMV as this internal control, which is an RNA virus that is excreted in stool.

Biobot's COVID19 case estimate

We measure the concentration of SARS-CoV-2 in sewage. We convert our measurements into a COVID19 case estimate using the following basic equation:

$$\text{Number of infected people} = \frac{\text{total amount of virus per day}}{\text{virus shed per infected person per day}}$$

Comparing with confirmed clinical cases

Our COVID19 case estimates may not match the confirmed case numbers in the community for a variety of reasons. Clinical testing may not represent the entire infected population. The SARS-CoV-2 virus may start being shed before patients develop symptoms and seek testing.

We encourage you to share these reports with your local public health officials to compare our case estimates with the number of confirmed cases in your local community.

Data use

The Biobot COVID19 case estimates provide an alternative metric to guide responses to the outbreak. We recommend that you share this information with local public health officials. We believe this work will have the greatest impact on a statewide level, and hope that you will reach out to your state officials and encourage the expansion of our partnership across your state.

Pioneering a better way to track Covid-19

We are the nation's leader in wastewater epidemiology. We analyze sewage to determine the presence of infected individuals and estimate the number of Covid-19 cases, providing:

- Trend analysis: Determine when to safely re-open, and keep open, our communities and businesses through frequent sampling.
- Early warning: Detect the re-emergence of Covid-19 in a population to rapidly take action and contain new outbreaks.
- Testing at scale: For a fraction of the cost of mass individual testing, get an overview of the scope of the outbreak.

For questions, email support@biobot.io

Elko City Water Reclamation Facility Influent Sampler

Sample collection date: **July 21, 2020**

SARS-CoV-2 virus in sewage

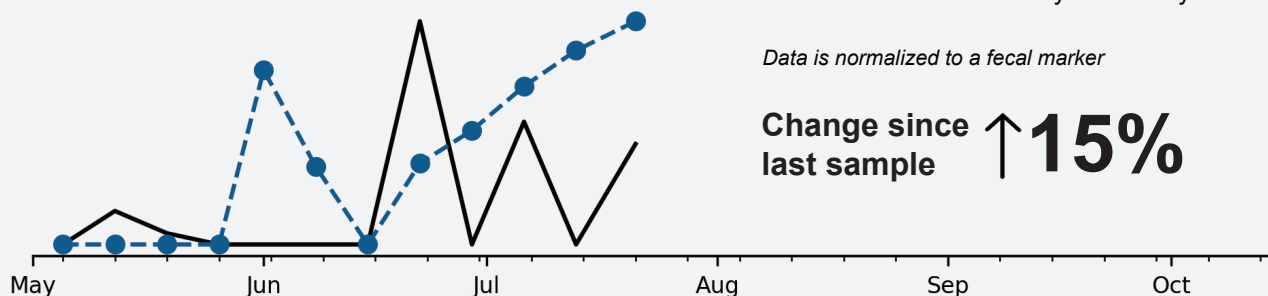
DETECTED

Virus concentration per liter of sewage

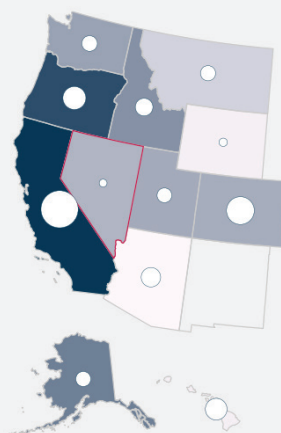
285,808 copies

Relative concentration over time

SARS-CoV-2 normalized concentration in blue
New cases for your county in black



Regional overview of concentration levels West



Compare normalized SARS-CoV-2 levels found in participating wastewater treatment facilities, averaged since the beginning of May.

lower higher

Color indicates concentration level
Your state outlined in red

Size of circle indicates population served by participating facilities

20k 1.5mil 10mil

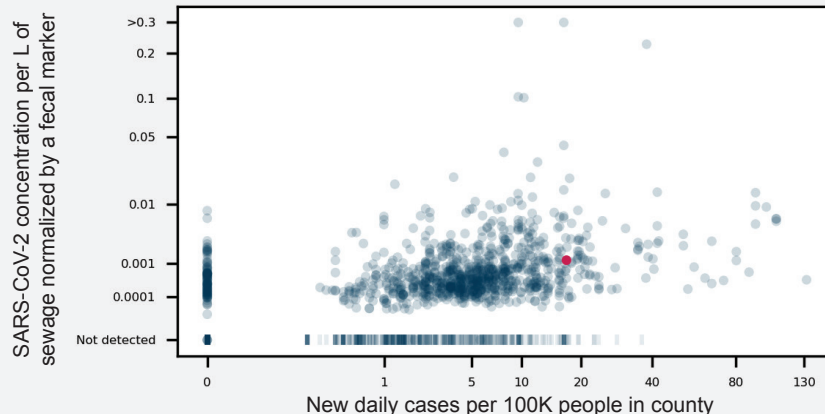
About the data

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Relative concentrations trend with new cases

Concentration levels are trending with the county's new reported cases at the time of sample collection.

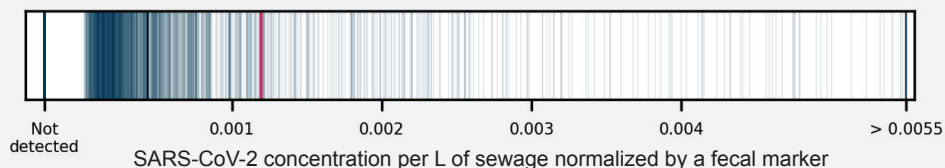
This sample in red, all other samples since May in blue.



Relative concentrations in comparison

Your sample in red, median in black, all other samples collected since May in blue

Your sample has higher concentration levels than **76%** of all quantifiable samples collected since May.



Contextualize SARS-CoV-2 levels in your facility's catchment with other participating facilities.

Case Estimates Reflect Active R&D

Evaluate as beta results when comparing to reported Covid19 cases

For more information, <https://doi.org/10.1101/2020.04.05.20051540>

read the whitepapers: <https://doi.org/10.1101/2020.06.15.20117747>

Reported COVID19 cases in Elko County, NV

New cases
9

Cumulative cases
341

On July 21, 2020, as reported by USAfacts.org

Biobot COVID19 case estimate

3,700 cases
(18% incidence rate)

Using a reported flow rate of 2.5 MGD

Biobot's wastewater testing protocols

We are continuously working to improve our protocols to increase the sensitivity of our measurements and reduce variability. We use a qPCR-based method to detect and quantify the SARS-CoV-2 virus and an associated fecal normalization control.

The RNA extraction method changed between protocols v1 and v2 to improve the sensitivity of our measurements. Protocols v2.1-v2.3 reflect changes in our quantification method to further improve the precision of our analysis and reduce variability. Internal tests have been conducted to assure data integrity. The SARS-CoV-2 viral titers that we report may be affected by slight batch effects between these protocol versions.

The sensitivity of our assay varies slightly between these protocols. The exact limit of detection (LOD) that applies to your sample can vary. Generally, the LOD for each protocol is: v1: 6,400 copies/L; v2: 34,000 copies/L; v2.1: 1,700 copies/L; v2.2: 2,100 copies/L; v2.3: 3,600 copies/L.

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Comparing with confirmed clinical cases

Our COVID19 case estimates may not match the confirmed case numbers in the community for a variety of reasons. Clinical testing may not represent the entire infected population. The SARS-CoV-2 virus may start being shed before patients develop symptoms and seek testing.

We encourage you to share these reports with your local public health officials to compare our case estimates with the number of confirmed cases in your local community.

Data use

The Biobot COVID19 case estimates provide an alternative metric to guide responses to the outbreak. We recommend that you share this information with local public health officials. We believe this work will have the greatest impact on a statewide level, and hope that you will reach out to your state officials and encourage the expansion of our partnership across your state.

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- **Early warning**: Detect the re-emergence of Covid-19 in a population to rapidly take action and contain new outbreaks.
- **Testing at scale**: For a fraction of the cost of mass individual testing, get an overview of the scope of the outbreak.

For questions, email support@biobot.io

Elko City Water Reclamation Facility Influent Sampler

Sample collection date: **July 13, 2020**

SARS-CoV-2 virus in sewage

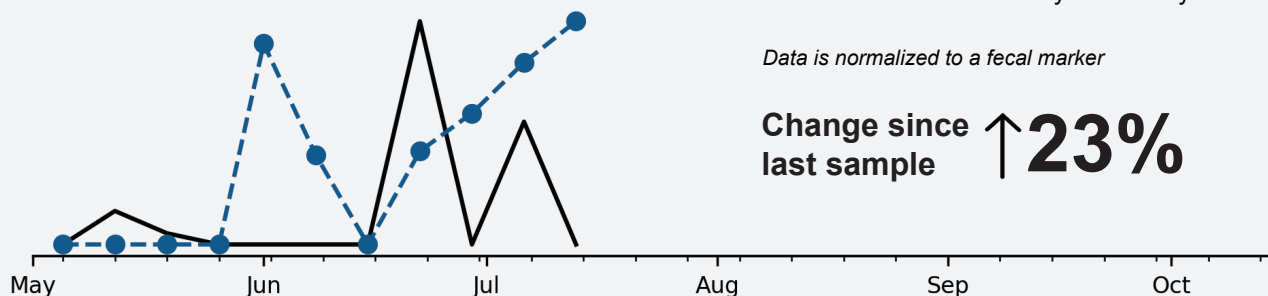
DETECTED

Virus concentration per liter of sewage

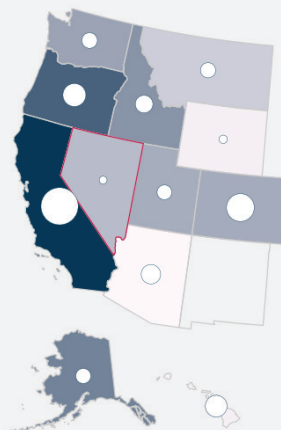
142,158 copies

Relative concentration over time

SARS-CoV-2 normalized concentration in blue
New cases for your county in black



Regional overview of concentration levels West



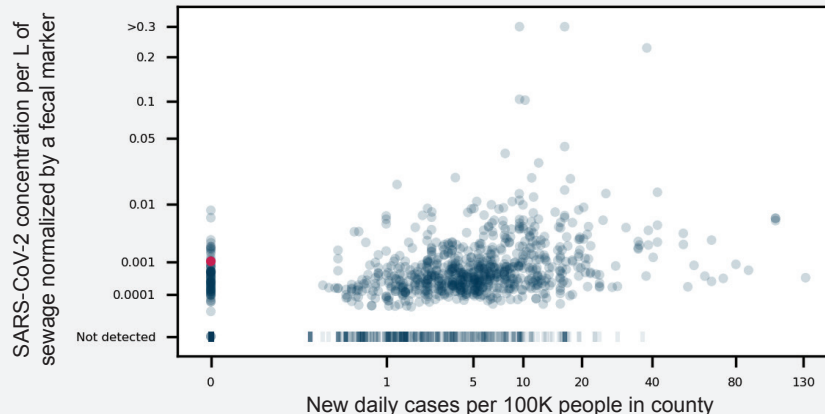
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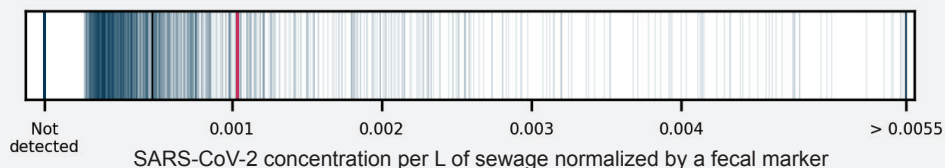
This sample in red, all other samples since May in blue.



Relative concentrations in comparison

Your sample in red, median in black, all other samples collected since May in blue

Your sample has higher concentration levels than **72%** of all quantifiable samples collected since May.



Contextualize SARS-CoV-2 levels in your facility's catchment with other participating facilities.

Case Estimates Reflect Active R&D

Evaluate as beta results when comparing to reported Covid19 cases

For more information, <https://doi.org/10.1101/2020.04.05.20051540>

read the whitepapers: <https://doi.org/10.1101/2020.06.15.20117747>

Reported COVID19 cases in Elko County, NV

New cases
0

Cumulative cases
244

On July 13, 2020, as reported by USAfacts.org

Biobot COVID19 case estimate

1,600 cases
(8% incidence rate)

Using a reported flow rate of 2.2 MGD

Biobot's wastewater testing protocols

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For questions, email support@biobot.io



LANDER COUNTY

COUNTY MANAGER

BARTOLO (Bert) RAMOS

50 State Route 305

Battle Mountain, NV 89820

(775) 635-2885

August 10, 2020

Office of the Governor,

State of Nevada

Via E-mail:

ccage@gov.nv.gov

jpeek@health.nv.gov

RE: Lander County Response to Road to Recovery

Office of the Governor:

This letter is in response to information relating to Lander County's being flagged for elevated disease transmission risk. This is Lander County's assessment and action plan as requested from the Governor for recommendations to curb the spread of COVID-19. Lander County is under the jurisdiction of the State Division of Public and Behavior Health but has largely assumed the State's responsibilities in doing community testing, contact tracing, reporting, public outreach, etc., in the county. Lander County will always remain on the "List" due to how the criteria is listed for rural communities.

Road to Recovery – Lander County

County Criteria

1. Average number of tests per day (per 100,000) <150

The demand is not present to meet the criteria to perform 9 COVID-19 tests per day. **This is due to properly tracing, isolating and stopping the spread of COVID-19 when positive cases present.**

The majority of lab testing in Lander County is performed at BMGH. The lab manager reported that 203 COVID-19 tests were performed at their facility during the month of July. 71 of those tests were performed during the time period of July 17-July 31. Currently, for the month of August, 15 tests have already been performed.

50 State Route 305 S. ◀ ▶ Battle Mountain, NV 89820

Phone: (775) 635-2885 ◀ ▶ Fax: (775) 635-3334 ◀ ▶ Email: bramos@landercountynv.org

2. Case Rate (per 100,000) > 200.

For the month of July Lander County had a total of 14 COVID-19 cases, our criteria states that we cannot exceed 12 cases per month.

However, I would like to provide more of an understanding of the cases.

- 9 Households were infected- 6 in Battle Mountain, 1 in Kingston and 1 in Elko with a Lander County address
- 2 residents were tribe members

3. Testing

Many of the Lander Cases have been associated with mining and employed by various entities.

When an employer with a cluster of positives or symptomatic individuals is identified through BMGH, the HR department is immediately contacted by the Health Officer of Lander County of said entity to offer COVID-19 testing in the fashion of Community Based Testing. Said testing is performed at the location of choice made by the employer and is performed by BMGH. It is important to note that many of these individuals being tested reside in counties outside of Lander but work within Lander County or close by.

Testing has not been restricted due to location and has not been refused, all who want or need to be tested have been tested. This has been the case since the month of May when testing supplies became readily available.

Mitigation Level

Baseline Mitigation Level:

- Maintain Statewide Directive Compliance

Mitigation Level 1

- Offer Community Based Testing Event Biweekly for a 2 hour time period. This will begin the week of August 31, 2020.
- Take targeted action to address spread based on data

Mitigation Level 2

- Continue Statewide Directive Compliance
- Take targeted action to address spread based on data
- Offer an additional CBT event

At this time there have been no outbreaks within the Lander County Detention Center.

The outbreak that occurred at Battle Mountain General Hospital prior was quickly identified and controlled. All the necessary mitigation is being performed at BMGH to prevent this from occurring again.

Lander County's response:

Contact Tracing:

Contact tracing begins in less than 12 hours, and contact testing done within 72 hours. It is the *goal* of the county hospital to contact the positive individual immediately to ensure they have received their positive results. Test submitted from community testing to the Nevada State Laboratory take an average of 7 days to be reported to the county via fax or the NBS data reporting system. The delays in receiving test results add to the workload of contact tracers and community spread. Efforts are being made to increase staff who are trained to do contact tracing.

Governor's Directives:

Since the beginning of the pandemic, Lander County (including the Board of Health) has made every effort to comply with the Governor's directives. This has not changed. Lander County is actively encouraging citizens to follow these directives. Local officials, including law enforcement, have taken a proactive role in educating the public and business owners as to what is required of them under those directives and the potential repercussions for failing to comply. Local health officers are empowered to enforce quarantines of individuals who refuse to voluntarily self-quarantine. These officers are prepared, should the proper circumstances arise, to exercise these powers.

Lander County has not adopted standards more stringent than those issued by the Governor. The county will continue to monitor this situation and make adjustments as necessary.

Messaging:

Lander County has actively promoted social distancing directives, mask usage, prohibition on large public gatherings. Messages are tailored based on current phase and trends happening every couple of days.

Health Care:

Lander County continues to monitor the capacity of the local hospital (Battle Mountain General Hospital) to treat COVID-19 patients. There are currently 0 patients in the Hospital for COVID-19. There are 25 long term care resident beds with 2 currently available. There are 5 ER beds, 5 acute/swing beds (2 occupied). Lander County and the Battle

Mountain General Hospital have done everything the Governor has mandated to help flatten the curve, as evidenced by our low numbers. At no point has our health care facility been overwhelmed or burdened with Covid patients. We have only had 1 hospitalized and all but 1 are fully recovered.

County needs:

Lander County is not requesting anything at this time.

We hope this information is of assistance.

Sincerely,



Bartolo (Bert) Ramos
Lander County Manager

cc: Dagny Stapleton, Nevada Association of Counties

County Jurisdictional Assessment and Action Plan

County Jurisdictional Assessment

Counties will provide a jurisdictional assessment based on the Critical Statewide Metrics provided in *Road to Recovery: Moving to a New Normal*. These assessments are intended to be concise and operational in nature and should provide data, analysis, and recommendations from the county's perspective. These Critical Statewide Metrics are:

-
- 1. Hospital Capacity
- 2. Access to Personal Protective Equipment (PPE is adequate and manageable at this time)
- 3. Testing Capacity (300 tests on hand / can perform up to 50 tests per day)
- 4. Case Investigation and Contact Tracing (performed by county health officer)
- 5. Protection of Vulnerable Populations (being done through education, limited travel, food delivery programs, etc.)
- 6. Enforcement (Performed by LCSO)

Hospital Capacity

Describe the state of hospital capacity within the county, including:

- Describe the status of staffed ICU beds, ventilators, staffing, medication treatments, and PPE.

Describe the status of Alternate Care Facility planning, staffing, and implementation.

(Status of staffed ICU beds, Ventilators, Staffing, Medication, and PPE:

- Grover C. Dils Medical Center does not have ICU beds. Under *extreme* circumstances we may care for patients that require higher levels of care but in most circumstances, patients are transferred to a higher level of care immediately to provide that patient the best possible outcome. We have no negative pressure rooms in the facility making it difficult to treat a positive Covid-19 patient.
- We currently have 3 ventilators for emergency purposes but no bedside ventilator that can be used for extended use. The 3 ventilators could be used for up to 48 hours but a patient would need to be transferred to a higher level of care at that time if not before.
- Staffing is acceptable and some increased staffing would be available if/when necessary.
- Medications on hand are minimal but we could increase. Our facility has no Remdesivir and no ability to obtain that drug at this time.

Describe your current assessment of overall hospital capacity and metrics that will determine expansion to Alternate Care Facilities. (

- Grover C. Dils Medical Center has affiliation agreements with all surrounding hospitals in both Las Vegas, NV and St. George, UT. We continue to work directly with Intermountain HealthCare

in St. George, UT along with their Life Flight team. We monitor capacity at Intermountain Healthcare to be certain that transfers to their facility would be available.

- Current assessment of hospital capacity and metrics to determine expansion of Alternate Care Facilities; the hospital capacity is low at Grover C. Dils Medical Center as of 08/12/2020 with three available acute care beds. However, due to the layout of the facility and having Long Term Care integrated directly with acute care it would be difficult to manage a Covid patient without possibly exposing all of the residents in the care facility. If and when the need should arise, we would stabilize and look to transfer to a higher level of care that does have the needed medications, bed side ventilators, and ability to care for a patient in a critical situation.

•

Access to Personal Protective Equipment

Describe the status of PPE within the county, including:

- Describe the status of PPE on-hand (in local reserve) and on order. (PPE is adequate and manageable at this time)
- Describe the county's distribution priorities. (To ensure PPE is available to all health care, ems, law enforcement, fire, and first responders, and track usage of PPE)
- Describe your current assessment of overall PPE and metrics that will be used to determine additional emergency measures. (We have sufficient PPE to meet the projected demands with reserves. We have implemented target thresholds for ordering additional ppe supplies and have secured accounts where we can order additional ppe as needed.)

Testing Capacity

Describe the status of your local testing efforts, including:

- Description of your testing criteria.
- Overview of the number of people tested in a day/week. (currently testing approx. 8 per week at the clinics) other tests being performed in resident housing and among hospital staff, as well as outside the county due to many residents seeking health care in Utah.,
- Overview of targeted testing efforts for high-risk communities, outbreak intervention, and other efforts. (We have implemented testing in the hospital and resident housing at the hospital, also testing of hospital staff regularly, perform regular symptom / temperature checks of Fire, and ems personnel.

Case Investigation and Contact Tracing

Describe the status of your contact tracing efforts, including:

- Description of your current contact tracing workforce. (The Lincoln county health Officer Louise has been capable of handling all contact tracing within the county,

she has been able to trace 100 % of cases with success in determining the source of the virus and mitigating future spread.

- Percent of positive cases contacted within 24 hours, and percent of positive case contacts contacted in 48 hours. (100% of cases were contacted within 24 hours. We have had 3 positive cases in Lincoln county since march 12th
- Overview contact tracing findings suggesting high-risk areas. (We have had 3 confirmed cases in Lincoln County, these have been spread out over 5 months, and none of these cases were in our high risk areas such as senior housing or hospital.

Protection of Vulnerable Populations

Describe your county's plans for addressing outbreaks within vulnerable populations, including:

- Overview of efforts and interventions in skilled nursing facilities. N/A
- Overview of efforts and interventions in correctional facilities. (LCSO, have stopped taking misdemeanor warrants, only felonies, site and release of lower level offenses with exception of dui and domestic, implemented screening for symptoms and temp, all new bookings are isolated for 10 days or until they show no signs and symptoms before released into normal holding. All in person visitation and programs suspended, video visitation implemented. Court went to video arraignment systems to minimize court gatherings.)
- Overview of efforts and interventions in high-risk communities. Limit travel and visits,

Enforcement

Describe your county's enforcement efforts, including:

- **County level information:**
 - Overview of county agencies engaged in enforcement. (LCSO-education to business and public.
 - Overview of the number observations conducted by county enforcement officials. (daily observations)
 - Overview of compliance rates during county observations. (high level of compliance with 0 citations issued due to noncompliance)
 - Overview of the number of violations and enforcement actions taken by county officials. (0 citations issued due to noncompliance)
- **City level information:**
 - Overview of city agencies engaged in enforcement. (LCSO- is the primary law enforcement agency for the city as well. See above.)
 - Overview of the number observations conducted by city enforcement officials.

- Overview of the number of violations and enforcement actions taken by city officials.
- Overview of compliance rates during city observations.

County Action Plan

Please provide the county's action plan for addressing the findings of the jurisdictional assessment completed here. Ensure that metrics are provided in order to measure success and drive decisions. Also, ensure that you identify any state and federal resources that are necessary for implementing your plan, while noting that these resource requests must still go through the resource ordering process with the state Division of Emergency Management.

Lincoln County continues to respond, and educate the public on what they can do to help minimize the spread of covid-19. We continue to make covid testing available for all citizens who choose to be tested. We are considering the need for drive thru pod testing sites. We continue to support our health care providers and first responders with needed supplies and PPE for effective and safe response to covid. We continue to encourage those who are at high risk to protect themselves. We are taking a common sense approach to the response of covid-19 and social distancing measures while supporting the critical economy of our county. We continue to respond quickly to contact tracing to minimize the spread. We are following the Lincoln county EOP for guidance to response levels and measures taken. We are maintaining communication with the State of Nevada and will make requests to the state of Nevada in the event that we need assistance in response to the covid-19 virus.

I do have some concerns with the metrics and criteria that are being used by the state of Nevada to report the counties that have an elevated disease transmission status. A one size fits all approach does not work for all counties. For example: Lincoln county has had 1 confirmed case in the last 60 days and 3 total confirmed cases to date.

Using the metrics that are found in the state tracker, Lincoln County is flagged for elevated disease transmission. due to the fact that it is based on how many tests are performed per day per 100,000. Also due to the fact that we have 1 positive test in the last 21 days. (1 positive test puts Lincoln County into the elevated disease transmission category) I think that we could all agree that 1 positive case over a 21 day period does not constitute an elevated disease transmission rating. In response to the assessment there is some testing being done in Utah that is not being captured, and the rural counties are much different than an urban county, we are naturally more distanced with smaller towns and communities spread across a larger area, another challenge is that approx. 1/3 of our citizen's travel to Utah for their medical needs. Several tests have been performed in Utah and we are not notified of any out of county negative test results. Only positives. This resulting in a reduction of performed tests in the county.

Per the Lincoln county EOP under pandemic it defines 6 positive cases as being the thresh hold or trigger point at which we would activate a response phase, we have had 3 positive cases and have been in a response phase for several months now. Grover c Dils hospital has done a great job of notifying people of tests performed and test results. The residents of Lincoln County have done a good job of protecting our community and minimizing the spread of covid. It has been alarming to the citizens of Lincoln County that we are being placed on an elevated transmission status with only 1 positive case in the past 60 days. People are asking questions about the state reporting and metrics.

While considering the above information, 1 positive case should not place Lincoln County or other rural counties on an elevated disease transmission status. Please consider the rural communities efforts and capacity when requiring minimum testing and positive case count. Possibly you could consider a positive case threshold of 6 or more cases in 21 days within a population of less than 10,000. For example: if we had 6 positives in a 21 day period I would say we are in elevated transmission status. We would then need to respond with stricter guidelines and better education efforts and resources. Each county is different and has different challenges.

We continue to respond through public education and awareness as well as other measures that have been successful in Lincoln County. But most importantly we will use a common sense response.

We strongly believe we can conduct business safely and effectively during these times. The essential businesses in Lincoln County that have remained open have proven that it can be done without causing new cases of covid. We are working to support the sustainment of families and businesses in our county during this difficult time. It is alarming the number of businesses that have been affected and are closing their doors due to a variety of problems related to mandated restrictions and closures.

Thank you for your time and effort to understand the needs of our rural county. We look forward to working closely in the future to meet the needs of the citizens on Nevada.

Sincerely
Lincoln County Emergency Management

Eric Holt



ROAD TO RECOVERY: Moving to a New Normal



Nye County Action Plan and Request to
Reopen Bars, Pubs, Taverns, Breweries,
Distilleries, and Wineries in Rural Areas

August 12, 2020

Summary

At 18,159 square miles, Nye County is the third largest county in the contiguous United States. According to the [2019 Nevada State Demographer's Certified Estimate](#) the population of Nye County is 48,472. The Town of Pahrump represents approximately 85% of Nye County's population. The remaining 7,403 residents live in smaller, rural communities including Amargosa (1,327), Beatty (998), Gabbs (221), Manhattan (138), Round Mountain (763), and Tonopah (2,163).¹ Due to a recent spike in COVID-19 cases in Pahrump, Nye County was designated as a county with Elevated Disease Transmission and consequently all bars, pubs, taverns, breweries, distilleries, and wineries within the county were closed or restricted pursuant to [Directive 027, Sections 5 and 6](#). As explained below, while the stringent COVID-19 enforcement and prevention guidelines outlined in Directive 027 may be necessary to deal with the recent outbreak in Pahrump, they are unnecessary and overly burdensome to the rural communities where the guidelines of Directive 021 are more appropriate.

Requested Action

Nye County respectfully requests that all bars, pubs, taverns, breweries, distilleries, and wineries in rural areas² of Nye County be permitted to operate as outlined under [Directive 021, Sections 25 and 26](#).

Jurisdictional Analysis and Response Plan

Since July 29, 2020, Nye County has seen an increase of 107 positive COVID-19 cases. Of those, 104 have occurred in Pahrump and only 3 have occurred in the rural areas. It is also important to note that there have been ***no new positive cases in the rural areas of Nye County in the last seven days***. Through contact tracing, the County has identified three primary epicenters of probable exposure: large family gatherings, law enforcement and detention centers, and Las Vegas-based employers. Each of these epicenters is described briefly below along with a corresponding action plan to address the recent spike in COVID-19 cases.

Large Family Gatherings

- Approximate Pahrump Cases: 24
- Approximate Rural Area Cases: 0
- Description: Nye County is home to many large families. Nye County also has many homes comprised of multi-generational family units. Due to the closure or cancellation of many recreational opportunities (pools, festivals, sports, clubs, etc.) there is little for residents to do. Consequently, families are holding more get-togethers and also inviting more friends and neighbors. Also, youth currently on summer vacation are congregating at homes more frequently to experience the social interaction they typically enjoy through other outlets. Summertime is generally a time for picnics, birthday parties, weddings, barbecues, pool parties, etc. and with most public areas being unavailable for these activities, homes become the most convenient alternate location. Consequently, individual homes have become one of the primary settings for COVID-19 exposure. There is little the County can (or should) do to regulate people in their own homes however, Nye County is committed to the following.

¹ Nye County has other inhabited rural communities, but the State Demographer does not report their respective populations.

² All areas outside of the Town of Pahrump

- Action Plan
 - Continue public awareness/outreach campaign through the County Public Information Officer.
 - Discourage and disperse large, commercial events held on private property (concerts, festivals, block parties, etc.) where such activities are also in violation of the County's existing outdoor gathering ordinance.
 - Continue to caution individuals to observe COVID-19 prevention measures even when participating in home-based activities.
 - Seek State support with testing kits and tracing efforts.

Law Enforcement and Detention Centers

- Approximate Pahrump Cases: 51
- Approximate Rural Area Cases: 0
- Description: Nye County has two county-operated jails, one in Pahrump and one in Tonopah. Pahrump is also home to a privately-operated detention facility for federal detainees. Recently, we have seen a spike in the Pahrump jail, the private Pahrump detention facility, and within the Pahrump branch of the Nye County Sheriff's Office. Sheriff's office staff in Tonopah have not seen a corresponding increase in COVID-19 cases. Nye County is especially concerned about COVID-19 exposure in these settings as it directly and significantly impacts our first responders and vulnerable inmate population.
- Action Plan
 - The Sheriff's Office has implemented the following directives
 - Lockdown of facilities
 - Quarantine of infected inmates
 - Enhanced cleaning measures
 - Enhanced screening of staff
 - Utilize CARES money to purchase air purifiers, thermal screening units, oxygen concentrators, sanitizer cabinets, cleaning foggers, etc. for the jails and Sheriff's offices.
 - Seek continued State support with resource requests for testing kits and PPE.

Las Vegas-Based Employment

- Approximate Pahrump Cases: 22
- Approximate Rural Area Cases: 0
- Description: Due to our proximity to Las Vegas, many Pahrump residents work for Vegas-based employers. Considering the large amount of commuters who traverse Hwy. 160 for work every day, it is unsurprising that much of Pahrump's recent COVID-19 spike is attributable to Las Vegas facilities. Of primary concern are the hospitality and construction industries which seem to disproportionately represent our exposure in this subset. The County has limited control over Vegas-based employers, but we can caution our residents to abide by established guidelines while at work and when returning home.
- Action Plan
 - Continue public awareness/outreach campaign through the County Public Information Officer.

- Continue to caution individuals to observe COVID-19 prevention measures upon returning home.
- Seek assistance from the State in identifying Nye County residents tested in Las Vegas.

The areas described above represent the largest distinct groupings of exposure points to which the current spike can be traced. It is telling that in each of the three areas, there is no representation from the rural areas. The spike, though concerning, is almost entirely localized to Pahrump. Rural areas should not bear the regulatory burden of a Pahrump spike.

Conclusion

Based on the above, little justification remains for keeping bars, pubs, taverns, breweries, distilleries, and wineries in the rural areas of Nye County closed or restricted beyond the guidelines set forth in Directive 021, Sections 25 and 26. Governor Sisolak has recently promised to implement a more localized, community-specific approach³ in the ongoing battle against COVID-19. Nye County believes the above request falls within that framework. Thank you for your time and consideration of this request and please feel free to contact me with any questions, comments, or concerns.

Submitted by:
Tim Sutton, Nye County Manager
tsutton@co.nye.nv.us

³ In a recent press conference, the Governor stated that he would even consider zip code-specific restrictions and guidelines.



WASHOE COUNTY ASSESSMENT – August 12, 2020

1. Overall Assessment


COVID-19 is widespread in Washoe County and is mostly occurring through community transmission that is not tied to known cases of infection. Infection occurs throughout the locations that individuals visit in the course of commerce, employment, and recreation. We currently have sufficient testing capacity but are hampered by lab turn-around times for test results, and the daily number of new cases overwhelming disease investigation/contact tracing resources. Staff has been brought on to bolster contact tracing and the staff recruitment for expansion continues. Additional lab capacity has been procured in an effort to reduce lab reporting delays. The County is bringing on a marketing firm to improve messaging and community engagement to suppress the spread of disease. Private gatherings are identified as a type of event that is contributing to significant spread and where contacts with infected individuals can be identified. Outbreaks are also occurring in households following one of the members becoming infected.

2. Hospital Capacity

Status of staffed ICU beds, ventilators, staffing, medication treatments, and PPE.

As of August 8, the relative burden on northern Nevada hospitals as a result of COVID-19 is 6% (hospitalized/ licensed bed count). Within the intensive care unit, the percentage of relative burden is 8% (hospitalized ICU/ licensed ICU beds). Staffed ICU beds in Washoe County hospital occupancy rates are 61% and 37% respectively for general hospital and intensive care units. If COVID-19 admissions increase, staffing will become limited. If this were to occur, hospitals within Washoe County are prepared to change staff models to continue to provide care for citizens and visitors. Ventilator usage is at 10% of capacity; 3% of those ventilators are required by COVID patients.

PPE is currently being purchased by healthcare facilities, as well as medication treatments.

 Nevada Hospital Association Daily Hospital Stats 11 August 2020			On hand supply of Ventilator Supplies	N95 mask	Other respirators such as PAPRs	surgical and procedure masks	eye protection	single use gowns	gloves
			PPE STATUS LEVELS						
Northern Nevada Medical Center	1	Washoe	>30 Days	>30 Days	7-14 Days	>30 Days	>30 Days	>30 Days	>30 Days
Renown South Meadows	1	Washoe	>30 Days	>30 Days	>30 Days	>30 Days	>30 Days	>30 Days	>30 Days
Saint Mary's Regional Medical Center	1	Washoe	>30 Days	>30 Days	>30 Days	>30 Days	>30 Days	>30 Days	>30 Days
VA Sierra Nevada Health Care System	1	Washoe	>30 Days	>30 Days	>30 Days	>30 Days	>30 Days	>30 Days	>30 Days
Incline Village Community Hospital	1	Washoe	NA	NA	>30 Days	>30 Days	>30 Days	>30 Days	>30 Days
Renown Regional Medical Center	1	Washoe	>30 Days	>30 Days	>30 Days	>30 Days	>30 Days	>30 Days	>30 Days

In Washoe County, Renown is allocated a set amount of Remdesivir. The regional hospitals (not just hospitals within Washoe County) have discussed the mechanism for Renown to sell them the medication if a patient qualifies so a hospital can keep a patient as long as they are able to provide the appropriate level of care. Renown may only sell to hospitals within Nevada and cannot sell across state lines.

Status of Alternate Care Facility planning, staffing, and implementation.

Renown Regional Medical center has converted the first and second floors of their Mill Street parking structure into a sophisticated, cross-functional Alternate Care Site. This location was equipped with waterproof flooring, electrical infrastructure, lighting, water, flushable toilets, technology and wall partitions in addition to beds and basic patient care support equipment. This increased their ability to cope with the spread of COVID-19 by about 173%.

Assessment of overall hospital capacity and metrics that will determine expansion to Alternate Care Facilities.

Washoe County Hospitals currently have good capacity and the Nevada Hospital Association reports the northern Nevada healthcare infrastructure remains in good condition. The Alternate

Care site at Renown is already built and will remain in place until next year. If conditions significantly change, discussions for further expansion will take place. Washoe County has plans for establishment of an additional alternative care facility at the Reno-Sparks Convention Center that were prepared by the Army Corps of Engineers and has already purchased beds and equipment if the facility needs to be established.

3. Access to Personal Protective Equipment

Status of Regional PPE on-hand:

Warehouse Inventory					
	Date	8/11/2020		NAME	TIME
				PIERSON	1430
DESCRIPTION	TODAYS COUNT				
DISINFECTANT-SANITIZER HAND- 12OZ	170				
DISINFECTANT- SANITIZER HAND 16OZ	27				
DISINFECTANT- SANITIZER HAND 128OZ	4				
GLOVE-MEDICAL-EXTRA LARGE	0				
GLOVE-MEDICAL-LARGE	1500				
GLOVE-MEDICAL-MEDIUM	600				
GLOVE-MEDICAL-SMALL	0				
GOWNS-CLOTH(GC)	150				
GOWNS-MEDICAL	0				
GOWNS-PLASTIC (LL)	13				
MASK-LEVEL 1-SURGICAL-PROCEDURAL	1500				
MASK N95 AURA 3M 9211+	2140				
MASK KN95 3M 9541V	207				
MASK KN95 3M 9501+	50				
MASK DELTA PFF2 SMALL	7				
PADS- ALCOHOL PREP	160				
SHIELD FACE	566				
GLOVES-FOOD GRADE-SMALL	3000				
GLOVES-FOOD GRADE-MEDIUM	0				
GLOVES-FOOD GRADE-LARGE	5000				
GLOVES-FOOD GRADE-EXTRA LARGE	6600				
MEDICAL PROTECTIVE COVERALL	86				
GOWNS NON MEDICAL	100				

Distribution Priorities:

Should multiple competing requests for PPE come through to the region the priority for distribution would be based on emergent need. For instance:

1. COVID Positive Facility
2. Hospitals and First Responders (LE/EMS/FIRE)
3. Urgent Care
4. Secondary medical facilities such as rehabilitation facilities

Current PPE Assessment:

Our current assessment is that surgical gowns and PAPRs are still incredibly difficult to source on the open market.

Metrics for instituting emergency resource procedures in the future include the inability to source a critical safety item on the open market.

Health District PPE:

Item	Unit	Number of Uni	Number/Un	Total
Nitrile Gloves	BX	300	100	30,000
Vinyl Gloves	BX	430	100	43,000
Exam Gowns	EA			5,000
Cloth Gowns	EA			1,000
Face Shields	EA			400
Surgical Masks	EA			9,000
Tychem Suits	EA			200
PAPR Filters	EA			10
PAPR Head Coverings and Hoses - assorted				30
N95s	EA			5,500
Ordered				
Nitrile Gloves	BX	700	100	70,000
PAPR Head Coverings				65

4. Testing Capacity

Testing Criteria:

Testing is currently open to individuals seeking testing whether they have symptoms or are asymptomatic. In order to ensure testing of priority populations there is a mechanism to close testing to asymptomatic individuals if capacity for testing all individuals is exceeded. This occurred during the week of August 3 when the National Guard medics were temporarily unavailable. In this case testing was provided to symptomatic individuals, case contacts, and priority populations of first responders, healthcare workers, staff of long-term care and assisted living facilities, and RTC drivers. The Health District has contracted with REMSA for additional personnel to assist with specimen collection at the POST and hired additional nursing staff for this purpose. Testing is scheduled through a call center or online. Testing is provided at no charge. The 15 Call Center staff conduct the scheduling, provide the lab paperwork and labeling for the testing and provide the follow-up reporting of lab results. REMSA is on contract for an external 24/7 call center to assist people with the risk assessment process available on the website.

Number of People tested in a day/week:

As of August 11, an average of 981 test results per day were reported for Washoe County or 205.16 tests per 100,000 population. For the week ending on August 11, 6,796 test results were reported for Washoe County, for an average of 970.86 tests per day or an average of 203.04 tests per day.

The Washoe County Health District provides drive through testing at the Point of Screening and Testing located at the Reno-Sparks Livestock Events Center. The standard POST capacity is 525 tests per day however, actual testing conducted has exceeded 700 tests per day at that site.

Targeted Testing Efforts for high-risk communities, outbreak intervention, and other efforts:

WCHD continues to coordinate the distribution of test kits, provided by the Nevada State Public Health Lab (NSPHL), to skilled nursing facilities in addition to other senior living facilities. Once a medical director is identified for a facility, WCHD facilitates the establishment of a client account with NSPHL and subsequent Lab Requisition Form. WCHD then provides instruction for completion of the lab requisition form, specimen collection, and handling/delivery directly to NSPHL for analysis. Test kits, labels and collection bags are provided upon request. The test kit distribution numbers are provided on the daily ICS 209 Form.

To date, WCHD has distributed 2,074 kits to skilled nursing and assisted living facilities. A number of facilities have selected to receive a direct distribution of kits from NSPHL since they now have client accounts established. As outbreaks are identified through contact tracing and disease investigations, contact is made with the facility to ensure they have access to testing and offer to set up a client account to ensure a sustainable supply of test kits.

WCHD has provided 450 test kits to Fire Departments for testing their personnel including Reno, Sparks, Truckee Meadows Fire Protection District, North Lake Tahoe Fire, Reno-Tahoe Airport Authority Fire. REMSA has been provided with 125 test kits and have also provided testing to Nevada Highway Patrol and Nevada State Parole and Probation. North Lake Tahoe Fire also used 400 kits for the Incline Village Community Testing and TMFPD received 100 kits for the Gerlach Community Testing event. Reno Police Department, Washoe County Sheriff's Office and Jan Evans Juvenile Detention Facility have received 1,300 test kits. In addition Sparks Police Department and Sparks Fire has conducted most of their testing through the drive through POST.

WCHD conducted a Mobile POST for the homeless population at the Reno Events Center on May 14 collecting 108 specimens. Mobile POST operations were also conducted for families placed at Our Place Family Shelter on May 19 and 20. On May 28 a Mobile POST was conducted at a senior living facility testing 239 individuals. Resources to conduct Mobile POST

testing were critically reduced as the need for contact tracers and disease investigators increased as a result of the virus surging in the community. With the extension of the Title 32 Orders for the National Guard through December 31, WCHD may have the capacity to offer Mobile POST services again in the near future.

Washoe County also conducted mobile POST operations in June that provided testing in Gerlach through the Truckee Meadows Fire Protection District, and in Incline Village through the North Lake Tahoe Fire Protection District and Incline Village Community Hospital. The County also provided support to Health Plan of Nevada for a mobile POST they conducted at Miguel Ribera Park in the 89502 zip code area.

In addition, WCHD has a contract with REMSA for homebound testing of high-risk, vulnerable individuals identified through the risk assessment and scheduling process. Testing is conducted every Tuesday and Thursday collecting on average between 10 and 20 specimens.

In order to reduce throughput and potential backlogs for receiving test results from the Nevada State Public Health Lab the County has recently contracted with Charles River Labs (CRL) to be able to utilize their newly developed testing capacity. The agreement allows the County to utilize CRL's available throughput and manage the flow of tests to the lab to reduce backlogs. NSPHL has agreed to provide the test collection kits for the CRL analysis. Current CRL capacity is approximately 950 tests per week. The County will begin delivering specimens from the POST to CRL at a rate of approximately 600 per week for two weeks beginning the week of August 17 with plans to increase that capacity to 950 the following week. CRL intends to expand capacity to 1900 tests per week by the end of September which will be made available to the County as it is developed.

5. Case Investigation and Contract Tracing

Current Contract Tracing Workforce:

We currently have 54 disease investigators on staff, with approximately 25 working on any given day through a seven day week. Thirty-two staff has been brought on board through the UNR Nevada Public Health Training Center. We are currently working with UNR to add 16 additional disease investigation staff to reduce the backlog in case investigations currently experienced.

Calling of case contacts identified through investigations has been handed off to Deloitte contact tracers through the State contract. WCHD has not heard a report on the status of any contacts or contact tracing efforts since handing this off to Deloitte.

Positive Cases Contacted within 24 hours:

Almost all positive cases are currently contacted within 24 hours to provide their results, instruct them to self- isolate and to provide them with an informational package of materials for them and to share with their employer and close contacts. By the end of the week we expect that to achieve contact all positive cases within 24 hours of receipt of lab results.

Fewer than 10% of cases are followed up for full disease investigation within 24 hours to identify close contacts and establish ongoing contact. Once close contacts are identified – we assume Deloitte is attempting to reach those contacts within 24 hours to provide notification for quarantine and monitoring after we send out a daily line list.

WCHD is spanning about 10 days behind on disease investigations as illustrated by the table below, which was current as of the morning of August 10, 2020. Continued efforts by the public to prevent spread are necessary to be able to have the daily case count reduced to a level where testing and contact tracing is a viable strategy for control.

Date Reported	Total Reported	Completed	Remaining	% Investigated
7/28/20	93	93	0	100%
7/29/20	120	115	5	96%
7/30/20	103	68	35	66%
7/31/20	58	58	0	100%
8/1/20	92	82	10	89%
8/2/20	49	41	8	84%
8/3/20	66	62	4	94%
8/4/20	61	30	31	49%
8/5/20	78	14	64	18%
8/6/20	68	9	59	13%
8/7/20	95	9	86	9%
8/8/20	40	5	35	13%
8/9/20	48	6	42	13%
Total	971	592	379	61%

Overview of Contact Tracing Findings:

The disease investigations reveal that community spread is occurring and people become exposed and infected with COVID-19 by being out and interacting with others in a variety of settings including workplaces, retail and other service outlets, recreation/dining, and gatherings. Private gatherings in which people are coming into close contact and interaction with others (included extended family members) outside of their immediate household is an area that seems to be a common high-risk activity. Whether contracting COVID-19 through private gatherings or from the other activities described above, the other common setting for outbreaks is within households. Once a household member is infected it is likely to spread within the household. Some workplace settings have experienced spread within a workplace, but the types of workplace settings in which this occurs are quite variable. Vulnerable populations in skilled nursing and memory care facilities and their staff have also been found to be sources of outbreaks.

6. Protection of Vulnerable Populations

- **Efforts and interventions in skilled nursing facilities**

See the information provided on testing, above. Skilled nursing facilities are licensed by the State and the State has the lead in working with the facility on outbreaks and for patients involved. The Health District is responsible for the disease investigation and contact tracing of staff that test positive for COVID-19. In addition to providing or facilitating access to test collection kits, the County has also provided PPE resources to these facilities.

- **Efforts and Interventions in Correctional Facilities**

The Washoe County Sheriff's Office in partnership with the State of Nevada Department of Health and Human Services, Washoe County Health District, and following CDC guidelines has implemented a number of precautionary procedures to include but not limit to:

- Single point access with disinfection and health screening for anyone coming into our facility
- Education and training for staff and inmates through CDC and Washoe County Health in regard to identification, disinfection and washing hands
- Established a quarantine/isolation unit to ensure inmates with ILI (influenza-like illness) or symptoms were immediately isolated along with others in close contact with them
- COVID-19 testing of staff and inmates
- Identification of our high-risk inmate population
- Round the clock disinfection of the facility by inmate work crews
- All housing units supplied with extra soap and hand sanitizer
- Discontinued all contact visitation

- Cancellation of all inmate transports outside of the Washoe County Jail
- Resurrection of video courts and arraignments at the Washoe County Jail
- Cancelled inmate fee for medical consults
- Approved/coordinated (with contractors) free email, phone and video conference calls with loved ones to reduce anxiety
- Reduced our population from an average daily population (ADP) of 1100 inmates to an average ADP of 780 inmates
- Developed a quarantine plan for all new arrestees who are booked into the Washoe County Jail
- Every new inmate is quarantined with other from the same 24-Hour booking period
- Every new inmate is tested for COVID-19 before being placed in general population housing.
- All inmates are now required to wear a facemask any time they leave their assigned housing unit
- Court, medical, programs, counseling, etc.
- To date, we have tested more than 600 inmates and staff. 2 inmates test positive for COVID-19 however, both of these inmates were identified as COVID carriers from arrest and isolated until a release could be coordinated.
- Additionally, 5 Deputy Sheriff's from the Washoe County Detention Facility have tested positive; after each positive test, a full investigation was conducted, and measures were taken to protect inmates and staff who had close contact.

7. Efforts and Interventions in High-Risk Communities

County has worked with regional partners to prevent outbreaks in the homeless population. The Reno Events Center has been utilized to provide social distancing and spacing that wasn't attainable in the CAC shelter. The new Our Place women's and family shelter facility has also been opened and is providing housing in socially distanced settings for this population.

Housing for homeless people that had COVID-19 symptoms or tested positive for COVID-19 has been provided through a contract with WellCare to provide beds and non-hospital care for this population. A contract with REMSA has been established for transport of these individuals and the WellCare housing has also been utilized for homeless individuals being discharged from hospitals that are not yet released from isolation. Thirty-six homeless individuals have been housed at WellCare through July 27.

The community has worked together regarding encampments to attempt to avoid displacing this homeless population when possible in accordance with the CDC guidance. Handwashing stations, portable toilets, and clean-up has been provided around these encampments. Some encampments have had to be addressed due to other public safety threats they posed. This activity was coordinated with partners and outreach to provide services and offer testing and housing was conducted.

8. Enforcement

TOTAL COMPLAINTS BY MONTH (Unincorporated County and City of Reno):

March = 341

April = 446

May = 188

June = 216

July = 241

August = 11 (unincorporated County only)

Total Complaints March to Aug 12, 2020 = 1,443

RANDOM CHECKS

Unincorporated County only:

July = 29

August = 35

Total Random Checks for July -Aug 12, 2020 = 64

*City of Reno unmarked / undercover inspections visits inside of business: 62

9. County Action Plan

Based on current contact tracing investigations and enforcement inspections, we believe that private gatherings are the primary identifiable source of the increase in cases and the positivity rate in our region. To address this, the Washoe County Incident Management Team (IMT) which includes the City of Reno, Sparks, Washoe County and the Washoe County Health District (WCHD) are collaborating to develop and implement a COVID-19 community engagement campaign to encourage Northern Nevadans to comply with CDC and WCHD guidance for social distancing, wearing a mask avoiding private parties and gatherings and other measures to stop the spread of COVID-19 in our community. Given the urgency of the situation, the IMT partners have agreed to jointly use up to \$300k in CARES Act funding and utilize the IMT emergency powers declaration to expedite this process. Outside advertising agency resources have been selected to provide a creative media and outreach campaign with a planned start by the end of August. Messaging will focus on community segments that appear to be driving the spread of the virus in Northern Nevada.

In addition, the jurisdictions will continue to work on COVID-19 mask and social distancing enforcement in our local businesses while escalating enforcement on resisting businesses to local law enforcement or OSHA if necessary.

Nevada OSHA COVID-19 First Observation Data 8-3-2020 to 8-7-2020

Observations Week of August 3, 2020 to August 7, 2020

North South Summary

Source	(All)
Observation Date	(Multiple Items)

Row Labels	Sum of Grand Total	Sum of Violations N	Sum of In-Compli	Sum of % Noncom	Sum of % Compliant
North	427	30	397	7.0%	93.0%
South	421	68	353	16.2%	83.8%
Grand Total	848	98	750	11.6%	88.4%

Summary by Date

Source	(All)
Area	(All)

Row Labels	Sum of Grand Total	Sum of Violations N	Sum of In-Compli	Sum of % Noncom	Sum of % Compliant
29-Jun	101	13	88	12.9%	87.1%
30-Jun	200	46	154	23.0%	77.0%
1-Jul	346	69	277	19.9%	80.1%
2-Jul	204	100	104	49.0%	51.0%
3-Jul	70	17	53	24.3%	75.7%
6-Jul	169	22	147	13.0%	87.0%
7-Jul	196	35	161	17.9%	82.1%
8-Jul	279	32	247	11.5%	88.5%
9-Jul	178	21	157	11.8%	88.2%
10-Jul	9	3	6	33.3%	66.7%
13-Jul	49	6	43	12.2%	87.8%
14-Jul	125	16	109	12.8%	87.2%
15-Jul	354	27	327	7.6%	92.4%
16-Jul	246	17	229	6.9%	93.1%
17-Jul	112	5	107	4.5%	95.5%
20-Jul	131	5	126	3.8%	96.2%
21-Jul	403	14	389	3.5%	96.5%
22-Jul	331	29	302	8.8%	91.2%
23-Jul	144	7	137	4.9%	95.1%
24-Jul	71	9	62	12.7%	87.3%
27-Jul	104	1	103	1.0%	99.0%
28-Jul	306	22	284	7.2%	92.8%
29-Jul	246	23	223	9.3%	90.7%
30-Jul	157	5	152	3.2%	96.8%
31-Jul	65	5	60	7.7%	92.3%
3-Aug	135	15	120	11.1%	88.9%
4-Aug	334	43	291	12.9%	87.1%
5-Aug	203	22	181	10.8%	89.2%
6-Aug	144	16	128	11.1%	88.9%
7-Aug	32	2	30	6.3%	93.8%
10-Aug	101	14	87	13.9%	86.1%
11-Aug	185	29	156	15.7%	84.3%
Grand Total	5730	690	5040	12.0%	88.0%

Nevada OSHA COVID-19 First Observation Data 8-3-2020 to 8-7-2020

Industry Summary	
Source	(All)
Area	(All)
Observation Date	(Multiple Items)

Industry	.Grand Total	.Violations Noted	.In-Compliance	. % Noncompliant	.% Compliant
Government	1	1		100.0%	0.0%
Construction	1	1		100.0%	0.0%
Child Care	1	1		100.0%	0.0%
Hotel	12	5	7	41.7%	58.3%
Home Improvement	5	2	3	40.0%	60.0%
Automobile Sales/ Maint.	20	6	14	30.0%	70.0%
Parcel Delivery/Logistics	4	1	3	25.0%	75.0%
Casino/Hotel - Pool	8	2	6	25.0%	75.0%
Grooming	9	2	7	22.2%	77.8%
Convenience Store	79	14	65	17.7%	82.3%
Other	106	17	89	16.0%	84.0%
Grocery Store	20	3	17	15.0%	85.0%
Massage	7	1	6	14.3%	85.7%
Medical	30	4	26	13.3%	86.7%
Pharmacy	8	1	7	12.5%	87.5%
Gaming Property	20	2	18	10.0%	90.0%
Hair/Nail/Tattoo salons	58	5	53	8.6%	91.4%
General Retail	192	15	177	7.8%	92.2%
Restaurant	174	13	161	7.5%	92.5%
Clothing	18	1	17	5.6%	94.4%
Gym	20	1	19	5.0%	95.0%
Cannabis	2		2	0.0%	100.0%
Real Estate	4		4	0.0%	100.0%
Recreation	5		5	0.0%	100.0%
Dry Cleaning	9		9	0.0%	100.0%
Repair	1		1	0.0%	100.0%
Financial Institution	20		20	0.0%	100.0%
Bar	10		10	0.0%	100.0%
Car Wash	2		2	0.0%	100.0%
Tanning	2		2	0.0%	100.0%
Grand Total	848	98	750	11.6%	88.4%

Nevada OSHA COVID-19 First Observation Data 8-3-2020 to 8-7-2020

City/County Summary

County	City	Grand Total	Violations Noted	In-Compliance	% Noncompliant	% Compliant
Carson City	Carson City	24	3	21	12.5%	87.5%
Carson City Total		24	3	21	12.5%	87.5%
Clark	Boulder City	56	4	52	7.1%	92.9%
	Goodsprings	2		2	0.0%	100.0%
	Hawthorne	11		11	0.0%	100.0%
	Henderson	25	4	21	16.0%	84.0%
	Jean	7		7	0.0%	100.0%
	Las Vegas	111	20	91	18.0%	82.0%
	Laughlin	44	4	40	9.1%	90.9%
	Logandale	8		8	0.0%	100.0%
	Mesquite	46	13	33	28.3%	71.7%
	Nelson	1		1	0.0%	100.0%
	North Las Vegas	12	3	9	25.0%	75.0%
	Overton	19	3	16	15.8%	84.2%
	Reno	208	15	193	7.2%	92.8%
	Sandy Valley	2		2	0.0%	100.0%
	Searchlight	8		8	0.0%	100.0%
Clark Total		560	66	494	11.8%	88.2%
Douglas	Stateline	31	4	27	12.9%	87.1%
Douglas Total		31	4	27	12.9%	87.1%
Lyon	Dayton	1	1		100.0%	0.0%
	Fernley	23	3	20	13.0%	87.0%
	Yerington	12		12	0.0%	100.0%
Lyon Total		36	4	32	11.1%	88.9%
Nye	Beatty	5	2	3	40.0%	60.0%
	Pahrump	38		38	0.0%	100.0%
	Tonopah	24	8	16	33.3%	66.7%
Nye Total		67	10	57	14.9%	85.1%
Washoe	Dayton	16		16	0.0%	100.0%
	Sparks	69	4	65	5.8%	94.2%
	Sun Valley	11		11	0.0%	100.0%
Washoe Total		96	4	92	4.2%	95.8%
White Pine	Ely	15	7	8	46.7%	53.3%
	Fallon	19		19	0.0%	100.0%
White Pine Total		34	7	27	20.6%	79.4%
Grand Total		848	98	750	11.6%	88.4%

Nevada OSHA COVID-19 First Observation Data 8-10-2020 to 8-11-2020

Observations Week of August 10, 2020 to August 11, 2020

North South Summary

Source	(All)
Observation Date	(Multiple Items)

Row Labels	Sum of Grand Total	Sum of Violations N	Sum of In-Compli	Sum of % Noncon	Sum of % Compliant
North	167	25	142	15.0%	85.0%
South	119	18	101	15.1%	84.9%
Grand Total	286	43	243	15.0%	85.0%

Summary by Date

Source	(All)
Area	(All)

Row Labels	Sum of Grand Total	Sum of Violations N	Sum of In-Compli	Sum of % Noncon	Sum of % Compliant
29-Jun	101	13	88	12.9%	87.1%
30-Jun	200	46	154	23.0%	77.0%
1-Jul	346	69	277	19.9%	80.1%
2-Jul	204	100	104	49.0%	51.0%
3-Jul	70	17	53	24.3%	75.7%
6-Jul	169	22	147	13.0%	87.0%
7-Jul	196	35	161	17.9%	82.1%
8-Jul	279	32	247	11.5%	88.5%
9-Jul	178	21	157	11.8%	88.2%
10-Jul	9	3	6	33.3%	66.7%
13-Jul	49	6	43	12.2%	87.8%
14-Jul	125	16	109	12.8%	87.2%
15-Jul	354	27	327	7.6%	92.4%
16-Jul	246	17	229	6.9%	93.1%
17-Jul	112	5	107	4.5%	95.5%
20-Jul	131	5	126	3.8%	96.2%
21-Jul	403	14	389	3.5%	96.5%
22-Jul	331	29	302	8.8%	91.2%
23-Jul	144	7	137	4.9%	95.1%
24-Jul	71	9	62	12.7%	87.3%
27-Jul	104	1	103	1.0%	99.0%
28-Jul	306	22	284	7.2%	92.8%
29-Jul	246	23	223	9.3%	90.7%
30-Jul	157	5	152	3.2%	96.8%
31-Jul	65	5	60	7.7%	92.3%
3-Aug	135	15	120	11.1%	88.9%
4-Aug	334	43	291	12.9%	87.1%
5-Aug	203	22	181	10.8%	89.2%
6-Aug	144	16	128	11.1%	88.9%
7-Aug	32	2	30	6.3%	93.8%
10-Aug	101	14	87	13.9%	86.1%
11-Aug	185	29	156	15.7%	84.3%
Grand Total	5730	690	5040	12.0%	88.0%

Nevada OSHA COVID-19 First Observation Data 8-10-2020 to 8-11-2020

Industry Summary	
Source	(All)
Area	(All)
Observation Date	(Multiple Items)

Industry	.Grand Total	.Violations Noted	.In-Compliance	. % Noncompliance	.% Compliant
Construction	1	1		100.0%	0.0%
Automobile Sales/ Maint.	10	6	4	60.0%	40.0%
Other	23	8	15	34.8%	65.2%
General Retail	48	13	35	27.1%	72.9%
Grocery Store	11	2	9	18.2%	81.8%
Medical	6	1	5	16.7%	83.3%
Financial Institution	7	1	6	14.3%	85.7%
Gaming Property	8	1	7	12.5%	87.5%
Convenience Store	36	4	32	11.1%	88.9%
Clothing	11	1	10	9.1%	90.9%
Restaurant	69	5	64	7.2%	92.8%
Grooming	1		1	0.0%	100.0%
Child Care	1		1	0.0%	100.0%
Parcel Delivery/Logistics	1		1	0.0%	100.0%
Gym	14		14	0.0%	100.0%
Pharmacy	2		2	0.0%	100.0%
Home Improvement	3		3	0.0%	100.0%
Pool	4		4	0.0%	100.0%
Casino/Hotel - Pool	1		1	0.0%	100.0%
Real Estate	4		4	0.0%	100.0%
Hair/Nail/Tattoo salons	12		12	0.0%	100.0%
Repair	1		1	0.0%	100.0%
Bar	3		3	0.0%	100.0%
Dry Cleaning	1		1	0.0%	100.0%
Hotel	6		6	0.0%	100.0%
Tanning	2		2	0.0%	100.0%
Grand Total	286	43	243	15.0%	85.0%

City/County Summary

County	City	Grand Total	Violations Noted	In-Compliance	% Noncompliant	% Compliant
Clark	Boulder City	20		20	0.0%	100.0%
	Henderson	36	2	34	5.6%	94.4%
	Las Vegas	59	16	43	27.1%	72.9%
	Reno	22		22	0.0%	100.0%
Clark Total		137	18	119	13.1%	86.9%
Elko	Carlin	5	2	3	40.0%	60.0%
	Elko	32	6	26	18.8%	81.3%
	Jackpot	14	2	12	14.3%	85.7%
	Spring Creek	14	1	13	7.1%	92.9%
	Wells	25	2	23	8.0%	92.0%
Elko Total		90	13	77	14.4%	85.6%
Humboldt	Winnemucca	36	8	28	22.2%	77.8%
Humboldt Total		36	8	28	22.2%	77.8%
Lander	Battle Mountain	22	4	18	18.2%	81.8%
Lander Total		22	4	18	18.2%	81.8%
Washoe	Verdi	1		1	0.0%	100.0%
Washoe Total		1		1	0.0%	100.0%
Grand Total		286	43	243	15.0%	85.0%

Nevada OSHA COVID-19 Second Observation Data 8-3-2020 to 8-7-2020

Second Visits Week of August 3, 2020 to August 7, 2020

2nd Visit North South Summary

Source (All)

Observation Date (Multiple Items)

Row Labels	Sum of Grand Total	Sum of Violations Noted	Sum of In-Compliance	Sum of % Noncompliant	Sum of % Compliant
North	104	3	101	2.9%	97.1%
South	45	2	43	4.4%	95.6%
Grand Total	149	5	144	3.4%	96.6%

Second Visit: Summary by Date

Source (All)

Area (All)

Row Labels	Sum of Grand Total	Sum of Violations Noted	Sum of In-Compliance	Sum of % Noncompliant	Sum of % Compliant
6-Jul	6	1	5	16.7%	83.3%
7-Jul	27		27	0.0%	100.0%
8-Jul	21	4	17	19.0%	81.0%
9-Jul	19		19	0.0%	100.0%
13-Jul	72	9	63	12.5%	87.5%
14-Jul	40		40	0.0%	100.0%
15-Jul	6		6	0.0%	100.0%
16-Jul	27		27	0.0%	100.0%
17-Jul	7		7	0.0%	100.0%
20-Jul	21	3	18	14.3%	85.7%
21-Jul	33	2	31	6.1%	93.9%
22-Jul	31	2	29	6.5%	93.5%
23-Jul	10	1	9	10.0%	90.0%
24-Jul	16		16	0.0%	100.0%
27-Jul	53	2	51	3.8%	96.2%
28-Jul	17	3	14	17.6%	82.4%
29-Jul	6		6	0.0%	100.0%
30-Jul	10	1	9	10.0%	90.0%
31-Jul	9		9	0.0%	100.0%
3-Aug	39		39	0.0%	100.0%
4-Aug	26	1	25	3.8%	96.2%
5-Aug	32		32	0.0%	100.0%
6-Aug	39	3	36	7.7%	92.3%
7-Aug	13	1	12	7.7%	92.3%
10-Aug	8	2	6	25.0%	75.0%
11-Aug	46	3	43	6.5%	93.5%
Grand Total	634	38	596	6.0%	94.0%

Second Visit: Industry Summary

Source	(All)
Area	(All)
Observation Date	(Multiple Items)

Industry	Sum of Grand Total	Sum of Violations Noted	Sum of In-Compliance	Sum of % Noncompliant	Sum of % Compliant
Automobile Sales/ Rental	3	1	2	33.3%	66.7%
Convenience Store	27	2	25	7.4%	92.6%
Restaurant	31	1	30	3.2%	96.8%
General Retail	34	1	33	2.9%	97.1%
Grooming	1		1	0.0%	100.0%
Home Improvement	2		2	0.0%	100.0%
Bar	1		1	0.0%	100.0%
Massage	1		1	0.0%	100.0%
Financial Institution	3		3	0.0%	100.0%
Medical	4		4	0.0%	100.0%
Child Care	1		1	0.0%	100.0%
Other	14		14	0.0%	100.0%
Clothing	1		1	0.0%	100.0%
Pharmacy	1		1	0.0%	100.0%
Hair/Nail/Tattoo sal	9		9	0.0%	100.0%
Pool	2		2	0.0%	100.0%
Gaming Property	1		1	0.0%	100.0%
Real Estate	1		1	0.0%	100.0%
Gym	2		2	0.0%	100.0%
Recreation	1		1	0.0%	100.0%
Grocery Store	5		5	0.0%	100.0%
Construction	1		1	0.0%	100.0%
Dry Cleaning	2		2	0.0%	100.0%
Tanning	1		1	0.0%	100.0%
Grand Total	149	5	144	3.4%	96.6%

City/County Summary

County	City	Grand Total	Violations Noted	In-Compliance
Carson City	Carson City	15		15
Carson City Total		15		15
Clark	Hawthorne	11		11
	Henderson	5		5
	Las Vegas	40	2	38
	Reno	43	2	41
Clark Total		99	4	95
Douglas	Stateline	4		4
Douglas Total		4		4
Lyon	Dayton	1		1
	Fernley	3	1	2
	Yerington	4		4
Lyon Total		8	1	7
Washoe	Dayton	10		10
	Sparks	13		13
Washoe Total		23		23
Grand Total		149	5	144

Nevada OSHA COVID-19 Second Observation Data 8-10-2020 to 8-11-2020

Second Visits Week of August 10, 2020 to August 11, 2020

2nd Visit North South Summary

Source	(All)
Observation Date	(Multiple Items)

Row Labels	Sum of Grand Total	Sum of Violations Noted	Sum of In-Compliance	Sum of % Noncompliant	Sum of % Compliant
North	10	1	9	10.0%	90.0%
South	44	4	40	9.1%	90.9%
Grand Total	54	5	49	9.3%	90.7%

Second Visit: Summary by Date

Source	(All)
Area	(All)

Row Labels	Sum of Grand Total	Sum of Violations Noted	Sum of In-Compliance	Sum of % Noncompliant	Sum of % Compliant
6-Jul	6	1	5	16.7%	83.3%
7-Jul	27		27	0.0%	100.0%
8-Jul	21	4	17	19.0%	81.0%
9-Jul	19		19	0.0%	100.0%
13-Jul	72	9	63	12.5%	87.5%
14-Jul	40		40	0.0%	100.0%
15-Jul	6		6	0.0%	100.0%
16-Jul	27		27	0.0%	100.0%
17-Jul	7		7	0.0%	100.0%
20-Jul	21	3	18	14.3%	85.7%
21-Jul	33	2	31	6.1%	93.9%
22-Jul	31	2	29	6.5%	93.5%
23-Jul	10	1	9	10.0%	90.0%
24-Jul	16		16	0.0%	100.0%
27-Jul	53	2	51	3.8%	96.2%
28-Jul	17	3	14	17.6%	82.4%
29-Jul	6		6	0.0%	100.0%
30-Jul	10	1	9	10.0%	90.0%
31-Jul	9		9	0.0%	100.0%
3-Aug	39		39	0.0%	100.0%
4-Aug	26	1	25	3.8%	96.2%
5-Aug	32		32	0.0%	100.0%
6-Aug	39	3	36	7.7%	92.3%
7-Aug	13	1	12	7.7%	92.3%
10-Aug	8	2	6	25.0%	75.0%
11-Aug	46	3	43	6.5%	93.5%
Grand Total	634	38	596	6.0%	94.0%

Nevada OSHA COVID-19 Second Observation Data 8-10-2020 to 8-11-2020

Second Visit: Industry Summary

Source	(All)
Area	(All)
Observation Date	(Multiple Items)

Industry	Sum of Grand Total	Sum of Violations Noted	Sum of In-Compliance	Sum of % Noncompliant	Sum of % Compliant
Grocery Store	3	1	2	33.3%	66.7%
Gym	5	1	4	20.0%	80.0%
General Retail	12	2	10	16.7%	83.3%
Other	7	1	6	14.3%	85.7%
Hair/Nail/Tattoo salons	2		2	0.0%	100.0%
Home Improvement	1		1	0.0%	100.0%
Hotel	4		4	0.0%	100.0%
Bar	1		1	0.0%	100.0%
Medical	1		1	0.0%	100.0%
Casino/Hotel - Pool	2		2	0.0%	100.0%
Gaming Property	1		1	0.0%	100.0%
Automobile Sales/ Maint.	3		3	0.0%	100.0%
Pharmacy	2		2	0.0%	100.0%
Convenience Store	5		5	0.0%	100.0%
Restaurant	5		5	0.0%	100.0%
Grand Total	54	5	49	9.3%	90.7%

City/County Summary

County	City	Grand Total	Violations Noted	In-Compliance
Clark	Boulder City		4	4
	Henderson		2	2
	Las Vegas		11	2
	Laughlin		4	4
	Mesquite		10	2
	Reno		7	1
Clark Total			38	5
Elko	Wells		2	2
Elko Total			2	2
Nye	Beatty		2	2
	Tonopah		5	5
Nye Total			7	7
Washoe	Verdi		1	1
Washoe Total			1	1
White Pine	Ely		6	6
White Pine Total			6	6
Grand Total			54	5



**Nevada
Hospital
Association**

**Daily Hospital Stats
11 August 2020**

			On hand supply of Ventilator Supplies	N95 mask	Other respirators such as PAPRs	surgical and procedure masks	eye protection	single use gowns	gloves
			PPE STATUS LEVELS						
Boulder City Hospital	1	Clark	1-3 Days	15-30 Days	0 Days	15-30 Days	15-30 Days	15-30 Days	15-30 Days
Centennial Hills Hospital	1	Clark	15-30 Days	15-30 Days	15-30 Days	15-30 Days	15-30 Days	15-30 Days	15-30 Days
Desert Springs Hospital	1	Clark	7-14 Days	7-14 Days	>30 Days	>30 Days	>30 Days	>30 Days	>30 Days
Dignity Neighborhood Hospitals	1	Clark	1-3 Days	7-14 Days	0 Days	7-14 Days	7-14 Days	7-14 Days	7-14 Days
Elite Medical Center	1	Clark	4-6 Days	7-14 Days	4-6 Days	7-14 Days	7-14 Days	7-14 Days	7-14 Days
Henderson Hospital	1	Clark	4-6 Days	15-30 Days	>30 Days	15-30 Days	15-30 Days	15-30 Days	15-30 Days
Mesa View Regional Hospital	1	Clark	>30 Days	>30 Days	15-30 Days	>30 Days	>30 Days	>30 Days	>30 Days
MountainView Hospital	1	Clark	7-14 Days	15-30 Days	>30 Days	7-14 Days	15-30 Days	4-6 Days	15-30 Days
North Vista Hospital	1	Clark	15-30 Days	15-30 Days	>30 Days	15-30 Days	15-30 Days	15-30 Days	15-30 Days
Orthopedic Specialty Hospital of NV	1	Clark	7-14 Days	7-14 Days	NA	7-14 Days	7-14 Days	7-14 Days	7-14 Days
Siena Campus	1	Clark	7-14 Days	7-14 Days	7-14 Days	7-14 Days	7-14 Days	7-14 Days	7-14 Days
Southern Hills Hospital	1	Clark	7-14 Days	7-14 Days	>30 Days	7-14 Days	7-14 Days	7-14 Days	7-14 Days
Spring Valley Hospital	1	Clark	>30 Days	>30 Days	>30 Days	>30 Days	>30 Days	>30 Days	>30 Days
St. Rose San Martin	1	Clark	7-14 Days	7-14 Days	7-14 Days	7-14 Days	7-14 Days	7-14 Days	7-14 Days
Summerlin Hospital	1	Clark	7-14 Days	7-14 Days	7-14 Days	7-14 Days	7-14 Days	7-14 Days	7-14 Days
Sunrise Hospital	1	Clark	7-14 Days	NA	15-30 Days	4-6 Days	7-14 Days	7-14 Days	15-30 Days
University Medical Center	1	Clark	15-30 Days	>30 Days	>30 Days	>30 Days	>30 Days	>30 Days	>30 Days
VA Southern NV	1	Clark	>30 Days	>30 Days	>30 Days	>30 Days	>30 Days	>30 Days	>30 Days
Valley Hospital	1	Clark	7-14 Days	>30 Days	>30 Days	>30 Days	>30 Days	>30 Days	>30 Days
AMG Specialty Hospital	2	Clark	7-14 Days	4-6 Days	0 Days	15-30 Days	7-14 Days	15-30 Days	15-30 Days
Encompass Health Las Vegas	2	Clark	7-14 Days	7-14 Days	7-14 Days	7-14 Days	7-14 Days	7-14 Days	7-14 Days
Encompass Health Rehab Desert Canyon	2	Clark	NA	15-30 Days	15-30 Days	>30 Days	>30 Days	>30 Days	7-14 Days
Encompasshealth Rehab of Henderson	2	Clark	NA	>30 Days	NA	>30 Days	>30 Days	15-30 Days	>30 Days
Horizon Specialty Hospital	2	Clark	7-14 Days	7-14 Days	NA	7-14 Days	7-14 Days	7-14 Days	7-14 Days



**Daily Hospital Stats
11 August 2020**

			On hand supply of Ventilator Supplies	N95 mask	Other respirators such as PAPRs	surgical and procedure masks	eye protection	single use gowns	gloves
			PPE STATUS LEVELS						
Kindred Hospital Las Vegas Flamingo	2	Clark	15-30 Days	15-30 Days	15-30 Days	15-30 Days	15-30 Days	15-30 Days	15-30 Days
Kindred LV Sahara	2	Clark	7-14 Days	7-14 Days	7-14 Days	7-14 Days	7-14 Days	7-14 Days	7-14 Days
PAM Specialty Hosp of LV	2	Clark	1-3 Days	1-3 Days	NA	1-3 Days	1-3 Days	1-3 Days	1-3 Days
Desert Parkway Behavioral Health	3	Clark	NA	15-30 Days	NA	>30 Days	>30 Days	15-30 Days	15-30 Days
Dignity Health Rehab Hospital	3	Clark	NA	7-14 Days	NA	15-30 Days	15-30 Days	15-30 Days	15-30 Days
Infinity Hospice Care	3	Clark	NA	15-30 Days	NA	15-30 Days	15-30 Days	7-14 Days	7-14 Days
Nathan Adelson Hospice	3	Clark	NA	>30 Days	NA	>30 Days	>30 Days	>30 Days	>30 Days
Seven Hills Hospital	3	Clark	NA	15-30 Days	NA	15-30 Days	15-30 Days	15-30 Days	15-30 Days
SNAMHS	3	Clark	NA	7-14 Days	NA	7-14 Days	7-14 Days	7-14 Days	15-30 Days
Spring Mountain Sahara	3	Clark	NA	7-14 Days	NA	>30 Days	7-14 Days	7-14 Days	>30 Days
Spring Mountain Treatment Center	3	Clark	NA	7-14 Days	NA	>30 Days	7-14 Days	7-14 Days	>30 Days
St. Rose de Lima Campus	1	Clark	15-30 Days	15-30 Days	7-14 Days	15-30 Days	7-14 Days	15-30 Days	4-6 Days
PAM Rehab Centennial Hills	2	Clark	NA	7-14 Days	NA	15-30 Days	7-14 Days	15-30 Days	15-30 Days



Nevada Hospital Association

Daily Hospital Stats
11 August 2020

			On hand supply of Ventilator Supplies	N95 mask	Other respirators such as PAPRs	surgical and procedure masks	eye protection	single use gowns	gloves
			PPE STATUS LEVELS						
Northern Nevada Medical Center	1	Washoe	>30 Days	>30 Days	7-14 Days	>30 Days	>30 Days	>30 Days	>30 Days
Renown South Meadows	1	Washoe	>30 Days	>30 Days	>30 Days	>30 Days	>30 Days	>30 Days	>30 Days
Saint Mary's Regional Medical Center	1	Washoe	>30 Days	>30 Days	>30 Days	>30 Days	>30 Days	>30 Days	>30 Days
VA Sierra Nevada Health Care System	1	Washoe	>30 Days	>30 Days	>30 Days	>30 Days	>30 Days	>30 Days	>30 Days
Incline Village Community Hospital	1	Washoe	NA	NA	>30 Days	>30 Days	>30 Days	>30 Days	>30 Days
PAM Specialty Sparks (Failure to Report)	2	Washoe							
Reno Behavioral Healthcare Hospital	3	Washoe	NA	>30 Days	NA	>30 Days	>30 Days	>30 Days	>30 Days
Renown Rehabilitation Hospital	3	Washoe	NA	15-30 Days	NA	15-30 Days	15-30 Days	15-30 Days	15-30 Days
willow springs center	3	washoe	NA	>30 Days	NA	>30 Days	>30 Days	>30 Days	>30 Days
Renown Regional Medical Center	1	Washoe	>30 Days	>30 Days	>30 Days	>30 Days	>30 Days	>30 Days	>30 Days
West Hills Behavioral Health Hospital (Failure to Report)	3	Washoe							
Carson Tahoe Health	1	Carson	4-6 Days	4-6 Days	4-6 Days	15-30 Days	15-30 Days	15-30 Days	4-6 Days
Carson Tahoe Long Term Acute Care	2	Carson	4-6 Days	4-6 Days	4-6 Days	7-14 Days	7-14 Days	7-14 Days	4-6 Days
Banner Churchill Community Hospital	1	Churchill	>30 Days	>30 Days	>30 Days	>30 Days	>30 Days	>30 Days	>30 Days
Carson Valley Medical Center	1	Douglas	>30 Days	>30 Days	>30 Days	>30 Days	>30 Days	0 Days	>30 Days
Northeastern NV Regional Hospital	1	Elko	>30 Days	>30 Days	15-30 Days	>30 Days	>30 Days	>30 Days	>30 Days
Humboldt general hospital	1	Humboldt	15-30 Days	15-30 Days	15-30 Days	15-30 Days	15-30 Days	15-30 Days	15-30 Days
Battle Mountain General Hospital	1	Lander	>30 Days	>30 Days	>30 Days	15-30 Days	>30 Days	15-30 Days	15-30 Days
Grover C. Dils Medical Center	1	Lincoln	7-14 Days	>30 Days	15-30 Days	4-6 Days	>30 Days	4-6 Days	4-6 Days
South Lyon Medical Center	1	Lyon	NA	NA	>30 Days	>30 Days	>30 Days	>30 Days	>30 Days
MGGH	1	Mineral	7-14 Days	7-14 Days	7-14 Days	7-14 Days	7-14 Days	7-14 Days	1-3 Days
Desert View Hospital (Failure to Report)	1	Nye							
Pershing General Hospital	1	Pershing	0 Days	>30 Days	1-3 Days	>30 Days	>30 Days	15-30 Days	15-30 Days
William Bee Ririe Hospital	1	White Pine	>30 Days	>30 Days	>30 Days	>30 Days	>30 Days	>30 Days	>30 Days



**Daily Hospital Stats
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			PPE supplies purchased stored at facility or health system level	ventilator supplies	ventilator medications	N95 masks	Other respirators such as PAPRs	Surgical or procedure masks	Eye Protection	single use gowns	launderable gowns	gloves	Laboratory - nasal pharyngeal swabs	Laboratory - nasal swabs	Laboratory - viral transport media	Reusable gowns used for patients on transmission-based precautions	reusable PAPRs or elastomeric used	reusable n95 masks used
			Able to order and obtain at facility (not SNS or FEMA)													Reusable Items		
Boulder City Hospital	1	Clark	Facility	Y	Y	N	N	Y	Y	Y	Y	Y	Y	Y	Y	Y	N	Y
Centennial Hills Hospital	1	Clark	Facility	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N	Y	Y
Desert Springs Hospital	1	Clark	Health System	Y	Y	Y	Y	Y	Y	Y	NA	Y	Y	Y	Y	N	Y	Y
Dignity Neighborhood Hospitals	1	Clark	Health System	Y	NA	Y	N	Y	Y	Y	NA	Y	Y	Y	Y	Y	N	Y
Elite Medical Center	1	Clark	Facility	Y	Y	Y	Y	Y	Y	Y	NA	Y	Y	Y	Y	N	N	N
Henderson Hospital	1	Clark	Health System	Y	Y	Y	Y	Y	Y	Y	NA	Y	Y	Y	Y	N	Y	Y
Mesa View Regional Hospital	1	Clark	Facility	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N	Y
MountainView Hospital	1	Clark	Health System	Y	Y	N	N	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
North Vista Hospital	1	Clark	Facility	Y	Y	N	N	Y	Y	Y	NA	Y	Y	Y	Y	N	Y	Y
Orthopedic Specialty Hospital of NV	1	Clark	Facility	Y	Y	Y	NA	Y	Y	Y	Y	Y	Y	Y	Y	N	N	N
Siena Campus	1	Clark	Facility	Y	Y	Y	Y	Y	Y	Y	NA	Y	Y	Y	Y	N	N	Y
Southern Hills Hospital	1	Clark	Health System	Y	Y	N	N	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Spring Valley Hospital	1	Clark	Facility	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N	Y	Y
St. Rose San Martin	1	Clark	Facility	Y	Y	N	Y	Y	Y	Y	Y	Y	Y	Y	Y	N	Y	Y
Summerlin Hospital	1	Clark	Health System	Y	Y	Y	Y	Y	Y	Y	NA	Y	Y	Y	Y	N	Y	Y
Sunrise Hospital	1	Clark	Health System	Y	Y	NA	N	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N
University Medical Center	1	Clark	Facility	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
VA Southern NV	1	Clark	Health System	Y	Y	Y	Y	Y	Y	Y	NA	Y	Y	Y	Y	N	N	N
Valley Hospital	1	Clark	Facility	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N	Y	Y
AMG Specialty Hospital	2	Clark	Health System	Y	Y	Y	N	Y	Y	Y	NA	Y	Y	Y	Y	N	N	Y
Encompass Health Las Vegas	2	Clark	Facility	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Encompass Health Rehab Desert Canyon	2	Clark	Facility	NA	NA	Y	Y	Y	Y	Y	Y	Y	NA	NA	NA	Y	Y	Y
Encompasshealth Rehab of Henderson	2	Clark	Facility	NA	NA	Y	NA	Y	Y	Y	NA	Y	Y	Y	Y	N	N	Y
Horizon Specialty Hospital	2	Clark	Facility	Y	Y	Y	NA	Y	Y	Y	Y	Y	Y	Y	Y	Y	N	Y



Nevada Hospital Association

Daily Hospital Stats
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			PPE supplies purchased stored at facility or health system level	ventilator supplies	ventilator medications	N95 masks	Other respirators such as PAPRs	Surgical or procedure masks	Eye Protection	single use gowns	launderable gowns	gloves	Laboratory - nasal pharyngeal swabs	Laboratory - nasal swabs	Laboratory - viral transport media	Reusable gowns used for patients on transmission-based precautions	reusable PAPRs or elastomers used	reusable n95 masks used
			Able to order and obtain at facility (not SNS or FEMA)													Reusable Items		
Kindred Hospital Las Vegas Flamingo	2	Clark	Facility	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N	Y	Y
Kindred LV Sahara	2	Clark	Facility	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N	Y	Y
PAM Specialty Hosp of LV	2	Clark	Health System	Y	NA	Y	Y	Y	Y	Y	NA	Y	Y	NA	NA	Y	Y	Y
Desert Parkway Behavioral Health	3	Clark	Facility	NA	NA	Y	NA	Y	Y	Y	NA	Y	NA	NA	NA	N	N	N
Dignity Health Rehab Hospital	3	Clark	Facility	NA	NA	Y	NA	Y	Y	Y	NA	Y	Y	NA	NA	N	N	N
Infinity Hospice Care	3	Clark	Facility	NA	NA	Y	NA	Y	Y	Y	Y	Y	Y	NA	NA	Y	N	Y
Nathan Adelson Hospice	3	Clark	Facility	NA	NA	Y	NA	Y	Y	Y	NA	Y	NA	NA	NA	N	N	Y
Seven Hills Hospital	3	Clark	Facility	NA	NA	Y	NA	Y	Y	Y	Y	Y	Y	Y	Y	Y	N	Y
SNAMHS	3	Clark	Facility	NA	NA	Y	NA	Y	Y	Y	Y	Y	NA	NA	NA	N	N	N
Spring Mountain Sahara	3	Clark	Facility	NA	NA	Y	NA	Y	Y	Y	Y	Y	NA	NA	NA	N	N	N
Spring Mountain Treatment Center	3	Clark	Facility	NA	NA	Y	NA	Y	Y	Y	Y	Y	NA	NA	NA	N	N	N
St. Rose de Lima Campus	1	Clark	Facility	N	N	N	N	N	N	Y	NA	Y	Y	Y	Y	N	N	N
PAM Rehab Centennial Hills	2	Clark	Facility	NA	NA	Y	NA	Y	Y	Y	NA	Y	N	N	N	N	N	Y



**Daily Hospital Stats
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			PPE supplies purchased stored at facility or health system level	ventilator supplies	ventilator medications	N95 masks	Other respirators such as PAPRs	Surgical or procedure masks	Eye Protection	single use gowns	launderable gowns	gloves	Laboratory - nasal pharyngeal swabs	Laboratory - nasal swabs	Laboratory - viral transport media	Reusable gowns used for patients on transmission-based precautions	reusable PAPRs or elastomers used	reusable n95 masks used
			Able to order and obtain at facility (not SNS or FEMA)													Reusable Items		
Northern Nevada Medical Center	1	Washoe	Facility	Y	Y	Y	N	Y	Y	Y	NA	Y	Y	Y	Y	Y	Y	Y
Renown South Meadows	1	Washoe	Health System	Y	Y	Y	Y	Y	Y	Y	Y	Y	N	N	N	Y	Y	Y
Saint Mary's Regional Medical Center	1	Washoe	Facility	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
VA Sierra Nevada Health Care System	1	Washoe	Health System	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Incline Village Community Hospital	1	Washoe	Health System	NA	NA	Y	Y	Y	Y	Y	NA	Y	Y	Y	Y	N	Y	Y
PAM Specialty Sparks (Failure to Report)	2	Washoe																
Reno Behavioral Healthcare Hospital	3	Washoe	Facility	NA	NA	Y	NA	Y	Y	Y	Y	Y	Y	Y	Y	N	N	N
Renown Rehabilitation Hospital	3	Washoe	Health System	NA	NA	Y	NA	Y	Y	Y	NA	Y	NA	NA	NA	Y	N	N
willow springs center	3	washoe	Facility	NA	NA	Y	NA	Y	Y	Y	NA	Y	NA	NA	NA	N	N	Y
Renown Regional Medical Center	1	Washoe	Health System	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
West Hills Behavioral Health Hospital (Failure to Report)	3	Washoe																
Carson Tahoe Health	1	Carson	Health System	Y	N	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Carson Tahoe Long Term Acute Care	2	Carson	Health System	Y	N	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Banner Churchill Community Hospital	1	Churchill	Facility	Y	Y	Y	N	Y	Y	Y	NA	Y	Y	Y	Y	N	Y	Y
Carson Valley Medical Center	1	Douglas	Facility	Y	Y	Y	Y	Y	Y	N	Y	Y	Y	Y	Y	Y	Y	Y
Northeastern NV Regional Hospital	1	Elko	Facility	N	Y	N	N	Y	Y	N	Y	Y	Y	Y	Y	Y	Y	Y
Humboldt general hospital	1	Humboldt	Facility	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N	Y	Y	Y
Battle Mountain General Hospital	1	Lander	Facility	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N	Y
Grover C. Dils Medical Center	1	Lincoln	Facility	N	Y	N	N	N	N	N	Y	N	N	N	N	Y	Y	Y
South Lyon Medical Center	1	Lyon	Facility	NA	NA	N	N	N	Y	Y	Y	N	Y	Y	Y	N	Y	Y
MGGH	1	Mineral	Facility	Y	Y	Y	Y	Y	Y	Y	Y	N	NA	Y	NA	Y	Y	Y
Desert View Hospital (Failure to Report)	1	Nye																
Pershing General Hospital	1	Pershing	Facility	NA	NA	Y	Y	Y	Y	Y	Y	Y	Y	Y	N	Y	N	Y
William Bee Ririe Hospital	1	White Pine	Facility	Y	Y	Y	Y	Y	Y	Y	Y	Y	N	Y	NA	N	N	N