

**The following survey is being distributed to you and other rural public health stakeholders in your county and other counties participating in the Northern Nevada Cross Jurisdiction Services (CJS) Project. The project team will develop a cross jurisdictional sharing model and toolkit for implementation of the model to be shared with participating and neighboring jurisdictions. The goal of this project is to improve public health service efficiency and effectiveness.**

**The purpose of this survey is to inventory public health services that do or do not exist in your county. The survey should take no more than 15 minutes to complete. If you have any questions about this survey or the uses of the data collected, please contact District Health Officer, Washoe County Health District at (775) 328-2400 or http://www.washoecounty.us/health/contact-email.html.**

1. **Please complete the following contact information.**

Name:

Title:

Agency or Organization:

City:

County:

E-mail:

Phone:

1. **Are preventive immunization services provided in your county (other than immunizations provided by hospitals in the region)?**

Adult Immunization Yes No Not Sure

Child Immunization Yes No Not Sure

1. **Are screenings for diseases and conditions provided in your county?**

Anemia Yes No Not Sure

Blood Lead Yes No Not Sure

Cancer Yes No Not Sure

Cardiovascular Disease Yes No Not Sure

Diabetes Yes No Not Sure

High Blood Pressure Yes No Not Sure

HIV/AIDS Yes No Not Sure

Other Sexually Transmitted Diseases Yes No Not Sure

Tuberculosis Yes No Not Sure

1. **Are treatments for communicable diseases provided in your county?**

HIV/ADIS Yes No Not Sure

Other Sexually Transmitted Diseases Yes No Not Sure

Tuberculosis Yes No Not Sure

1. **Are maternal and child health services provided in your county?**

Early Periodic Screening, Detection and Treatment Yes No Not Sure

Family Planning Yes No Not Sure

MCH Home Visits Yes No Not Sure

Obstetrical Cart Yes No Not Sure

Prenatal Care Yes No Not Sure

Well Child Clinic Yes No Not Sure

WIC Yes No Not Sure

1. **Are epidemiology and surveillance activities provided in your county?**

Behavioral Risk Factors Yes No Not Sure

Chronic Disease Surveillance Yes No Not Sure

Communicable/Infectious Disease Surveillance Yes No Not Sure

Food Safety Surveillance Yes No Not Sure

Injury Surveillance Yes No Not Sure

Maternal and Child Health (Data Collection) Yes No Not Sure

Syndromic Surveillance (Respiratory or Yes No Not Sure
 Gastrointestinal Surveillance)

1. **Are primary prevention services provided in your county?**

Chronic Disease Programs Yes No Not Sure

Depression and Suicide Prevention Yes No Not Sure

Injury Yes No Not Sure

Nutrition Yes No Not Sure

Physical Activity Yes No Not Sure

Substance Abuse Yes No Not Sure

Tobacco Yes No Not Sure

Unintended Pregnancy Yes No Not Sure

Violence Yes No Not Sure

1. **Are environmental health activities provided in your county?**

Air Pollution Monitoring Yes No Not Sure

Collection of unused Pharmaceuticals Yes No Not Sure

Food Safety Education Yes No Not Sure

Groundwater Protection Yes No Not Sure

Hazardous Waste Disposal Yes No Not Sure

Hazmat Response Yes No Not Sure

Indoor Air Quality Yes No Not Sure

Land Use Planning Yes No Not Sure

Noise Pollution Yes No Not Sure

Pollution Prevention Yes No Not Sure

Radiation Control Yes No Not Sure

Surface Water Protection Yes No Not Sure

Vector Control (e.g., Mosquito Control) Yes No Not Sure

1. **Are select regulation, inspection, and/or licensing activities provided in**

**your county?**

Body Art and Tattooing Yes No Not Sure

Campgrounds and RVs Yes No Not Sure

Cosmetology Businesses Yes No Not Sure

Children’s Camps Yes No Not Sure

Food Processing Yes No Not Sure

Food Service Establishments – Permanent Yes No Not Sure

Food Service Establishments – Temporary Yes No Not Sure

Health-Related Facilities Yes No Not Sure

Hotel/Motels Yes No Not Sure

Housing Inspections Yes No Not Sure

Lead Inspections Yes No Not Sure

Milk processing Yes No Not Sure

Mobile Homes Yes No Not Sure

Private Drinking Water (Wells) Yes No Not Sure

Public Drinking Water Yes No Not Sure

Public Swimming Pools Yes No Not Sure

Schools/Daycares Yes No Not Sure

Septic Systems Regulations Yes No Not Sure

Smoke-Free Ordinances Yes No Not Sure

Solid Waste Disposal Sites Yes No Not Sure

Solid Waste Haulers Yes No Not Sure

Tobacco Retailers Yes No Not Sure

1. **Are other public health activities provided in your county?**

Animal Control Yes No Not Sure

Asthma Control Yes No Not Sure

Emergency Medical Services Yes No Not Sure

Emergency Preparedness – Public Health Yes No Not Sure

Laboratory Services Yes No Not Sure

Medical Examiner’s Office Yes No Not Sure

Occupational Health and Safety Yes No Not Sure

Outreach and Enrollment for Medical Insurance Yes No Not Sure

School-Based Clinics (Primary Care) Yes No Not Sure

School Health (School Nurse) Yes No Not Sure

Veterinarian Public Health Yes No Not Sure

Vital Records Yes No Not Sure

1. **Are other health services provided in your county?**

Behavioral/Mental Health Services Yes No Not Sure

Comprehensive Primary Care Yes No Not Sure

Correctional Health Yes No Not Sure

Home Healthcare Yes No Not Sure

Home Visitation – Elder Care Yes No Not Sure

Oral Health Yes No Not Sure

Substance Abuse Services Yes No Not Sure

1. **Is there any additional information you can provide on the availability of public health services in your community?**

**If you have any questions about this survey or the Northern Nevada Cross Jurisdiction Services Project, please contact the District Health Officer, Washoe County Health District at (775) 328-2400 or** [**http://www.washoecounty.us/health/contact-email.html**](http://www.washoecounty.us/health/contact-email.html)**.**

**Thank you for completing this survey.**