

Public Health

2017 Annual Report

Ottawa County Department of Public Health



26 Parks 200 Miles
Adventures in Health

Tragedy at 3 a.m.
An Investigator's Perspective

Body Art
Think Before Ink

Letter from the Health Officer



I am pleased to present the 2017 Ottawa County Department of Public Health annual report and want to thank our staff, Board of Commissioners, County Administration and community partners for their commitment to promoting the health and well-being of Ottawa County citizens. Our department's values are **excellence, integrity and equity**. But how does anyone know if those are just words in our strategic plan or real values that drive what we do? If you meet one of our staff members or experience one of our programs, you already know the answer to this question. These values are embedded into every one of our team members. We demonstrate them in our customer service, our partnerships, in our continuous emphasis on quality improvement, in the way we design our programs and services, and in the fabric of our culture.

In this report, you will find many first-hand examples from staff, clients, community partners and even an organization that falls within our regulatory authority. Through our strong partnerships, we started a new program that links people to community services to improve their health. This year we also partnered to improve our response to children's lead exposure and to reduce the threat of the Zika virus among pregnant women. You will see we've celebrated achievements like customer service awards, invitations to expand our program innovations throughout the state and even the personal accomplishment of one team member that drew national attention for the difference she is making for the terminally ill and their pets. Our annual report reflects only a small portion of our 2017 accomplishments – yet it shares a bit of how we promote public health and do it in a way that reflects our values. We've educated, investigated, linked, vaccinated, prevented, advocated, treated, promoted, partnered, helped, empowered, evaluated, initiated, innovated, communicated and stepped up to make sure Ottawa County is a healthy place to live, work and play.

Sincerely,

Lisa Stefanovsky, M.Ed.
Administrative Health Officer



The activities and programs of this department are brought to you by the members of the Ottawa County Board of Commissioners:
Chair Greg DeJong | Vice-Chair Roger Bergman | Francisco Garcia | Joe Baumann | Donald Disselkoen
Allen Dannenberg | Mike Haverdink | Kelly Kuiper | Jim Holtvluwer | Philip Kuyers | Matthew Fenske

VISION Healthy People

MISSION Working together to assure conditions that promote and protect health.

VALUES Excellence Integrity Equity

Administrative Health Officer
Lisa Stefanovsky, M.Ed

Assistant Health Officer
Donovan Thomas, MBA

Medical Director
Paul Heidel, MD, MPH

Epidemiologist
Marcia Mansaray, M.Sc
www.miOttawa.org/HealthData

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Emergency Preparedness
Jennifer Sorek, MA, MEP
www.miOttawa.org/Prepare

Innovation & Technology
Tony Benjamin, MSA

Clinic Services
Helen Tarleton, BA

Communicable Disease Control
www.miOttawa.org/DiseaseInfo

Disease Reporting
www.miOttawa.org/DiseaseReporting

Health Insurance Enrollment
www.miOttawa.org/HealthInsurance

Immunizations & Travel Clinic
www.miOttawa.org/Immunize

Sexual Health Services
www.miOttawa.org/SexualHealth

Community Health Services
Sandy Boven, M.Ed

Children's Special Health Care Services
www.miOttawa.org/CSHCS

Health Promotions

Nutrition & Wellness
www.miOttawa.org/Nutrition

Sexual Health Education
www.miOttawa.org/SexEd

Substance Abuse Prevention
www.miOttawa.org/SAP

Hearing & Vision Screenings
www.miOttawa.org/HearingVision

Maternal & Infant Health Program
www.miOttawa.org/MIHP

Oral Health
www.miOttawa.org/Dental

Environmental Health
Adeline Hambley, MBA, REHS

ecoOttawa
www.miOttawa.org/eco

Food Safety Program
www.miOttawa.org/Food

On-site Services
www.miOttawa.org/EH

Page

6	<i>Tragedy at 3 a.m. - An Investigator's Perspective</i> Take a look at the medical examiner program to hear first-hand from people in the field.
13	<i>Dangers of Addiction</i> America's opioid epidemic and what Ottawa County is doing.
14	<i>Body Art - Think before Ink</i> Why tattoo and body piercing facilities are regulated. Interview with an artist tells a business owner's perspective.
20	<i>Stop Zika</i> A multi-media educational campaign to reach pregnant traveling women by using a cross-jurisdictional sharing approach.
24	<i>2 Friends, 26 Parks and 200 Miles - Adventures in Health</i> Bridget and Dorothy set out to hike all 26 Ottawa County Parks. They did it and accomplished so much more.
28	<i>Pathways to Better Health</i> A new program where community health workers link people to services to improve their health.
30	<i>Vaccine Myths Busted</i> Separate fact from fiction: A look at the top 5 vaccine myths and how science busts them.
34	<i>Elevated Blood Lead Levels in Children</i> Conversations in our community on how to better protect children from lead poisoning.
36	<i>Toxic Waste</i> Take a tour with Toby at a Resource Recovery Service Center.
40	<i>This is Public Health</i> A few highlights from among so many outstanding public health team members: Awards, hope for Bosco and condoms all over Michigan.

46	<i>Financial Statement</i>
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Sources



Click on the play buttons throughout the report to watch videos.

A big thank you to the OCDPH team and community members who contributed to this publication. Your stories speak volumes, touch lives and make a difference!

Under the Public Health Code Act 368 of 1978, a local health department shall continually and diligently endeavor to prevent disease, prolong life and promote the public health through organized programs including prevention and control of environmental health hazards; prevention and control of diseases; prevention and control of health problems of particularly vulnerable population groups; development of health care facilities and health services delivery systems; and regulation of health care facilities and health services delivery systems to the extent provided by law. The Ottawa County Department of Public Health (OCDPH) is required by state mandate to perform a variety of specific services. Provision of these services is reviewed through a state accreditation process. In addition to, and ideally within the mandated services, OCDPH builds programs and services around community and customer/client needs. These needs are defined through community research. The OCDPH uses a variety of collected information to guide program development. This includes the Behavioral Risk Factor Survey, Youth Assessment Survey, Community Health Needs Assessment and the ongoing collection of epidemiological surveillance data and information.

Tragedy

CAN HAPPEN AT ANY TIME

Your cell phone goes off. It's 3 a.m. You fumble out of sleep to answer it. The voice on the other line says, "There's been a homicide. You're needed at the scene." Your husband stirs as you kiss him goodbye. You walk past your child's bedroom to hear her softly sleeping. You throw on your coat and head out into the night. This isn't a television show. This is life for a medical examiner investigator. Drop everything and go to work.



Medical Examiner Program

The Ottawa County Department of Public Health (OCDPH) administers the Ottawa County Medical Examiner Program. The program consists of a medical examiner, forensic pathologists, medical examiner investigators and a medical examiner specialist. The State of Michigan requires an investigation of all sudden, unexpected, accidental and violent deaths; the deaths of elderly individuals who've had a recent fall (even if natural death occurred); maternal deaths; and the deaths of children younger than 18 years (without a significant medical history).

Medical Examiners and Forensic Pathologists

Medical examiners (also trained forensic pathologists) are licensed physicians who are responsible for providing an accurate cause and manner of death. They are an advocate for the rights of the decedent (deceased individual). Forensic pathologists use medical investigative techniques to identify the person who died, estimate the time of death, label the manner of death (homicide, suicide, accident or natural) and, in certain cases, determine what instrument caused the death. They review a decedent's medical history, gather information about the circumstances surrounding the death and perform an autopsy. An autopsy concerns the right of the decedent's family to have an accurate determination of the cause of death. This may

help family members achieve a degree of closure during their time of bereavement by knowing how their loved one died. An autopsy can be compared to an exploratory surgery in a hospital setting, usually performed the day of or after the death. Forensic pathologists examine the body internally and externally and may remove tissue samples for laboratory analysis. They use methods such as x-rays, blood screening, urine analysis and toxicology testing. Incidental findings can occur that do not pertain to the cause of death. These findings may include undetected familial diseases, such as genetic heart disease, or contagious diseases such as tuberculosis. Having this information may help families plan and intervene in their own health care to prevent or control a disease.

Medical Examiner Investigators

For forensic pathologists to determine a cause of death, they need to analyze the collected evidence from the medical examiner investigators. They are the eyes and ears of the forensic pathologist at a scene. Investigators collect physical evidence from the scene, suspects and the decedent (hair, blood, tissue and other biological evidence). They may conduct interviews, take photographs of the scene or perform an accident reconstruction. They also arrange transport of the decedent to a morgue facility for further postmortem examination. Investigators examine the collected evidence, as well as look for more evidence from

the body or remains. They use forensic techniques to identify the decedent and assess decomposition rates to determine the time of death. Investigators may study any marks, bruises or wounds on the body. Some specialize in certain kinds of evidence such as firearms residue. After the investigation and autopsy are complete, the collected information is used to determine the method and manner of death. The determination is documented in a written report and the decedent is released to a funeral home. Medical examiner investigators and forensic pathologists can also serve as expert witnesses and testify in pre-trial and court hearings.

"One of the hardest parts of my job is watching family members say goodbye to their loved ones."

An Investigator's Perspective

By Rebecca Druzgal

I have been working in Ottawa County as a medical examiner investigator (MEI) for four and a half years, but have been an MEI for over eight. I am also a licensed physician assistant with a masters degree in Physician Assistant Studies from GVSU that I received in 2002. Before I began the graduate program, I was a diener (morgue attendant)

at Spectrum Hospital where I eviscerated for autopsies with the pathologists and assisted in the Gross Room with examining surgical specimens. I wasn't exactly gunning to become an MEI, but was sort of led to it . . . or fell into it. It's a really good fit for me and I enjoy the work very much. The job requires a lot of flexibility; all three of the MEIs

Continued on page 10

“One particular moment sticks in my mind from the many years working with law enforcement. I arrived at a scene to find a deputy in the kitchen cooking food for young children because their father was found deceased and they hadn’t had any dinner.”



in Ottawa County are on-call 24/7. One cannot anticipate an unexpected death to happen in the county. There are times when my family and I are on our way to a restaurant, a get-together or soccer game and Central Dispatch calls, which drastically changes our plans. This is true for the other two MEIs as well, so we cooperate and help each other out without question. There is no typical day, week or case. It can be a week without a call or I can get three calls in a day. There is no predicting it. I carry my phone with me all of the time and bring a change of clothes wherever I go.

When I started the job here in Ottawa County, I was delighted by the fantastic law enforcement officers. They do wonderful, respectful, quality work. They are considerate of the people in our community and communicate very well with me. It is a priority for me to respond as quickly as possible to them. At times, they may call upon victim advocates we have in our community. Victim advocates are volunteers who go to a scene and give families a sort-of anchor point in those first few hours while the investigators and officers examine the body and the scene.

The advocates offer families emotional support and resources for future support. Their involvement is tremendously helpful.

One of the hardest things about my job is watching family members say goodbye to their loved one. There is nothing anyone can do to alleviate the pain. I have gotten into the habit of praying on my way to a scene; asking God for wisdom to convey respect to those who could very well be having the worst day of their lives. I would prefer to be a shadow that the family in their haze and shock need not take any notice of, but I have to say things and ask questions that bring home the finality of their loved one’s death like, “What funeral home would you like to work with?” and “Gift of Life may be contacting you for the possibility of tissue donation” and “There will be an autopsy tomorrow”. I also may ask very personal questions about the decedent which may be embarrassing or uncomfortable to talk about. It is a very sensitive time for people. For my own sanity, I am able to emotionally separate myself from their grief, although it can take

me a little time to decompress from the trauma of some cases. It may sound strange to some, but I am a cheerful person and I naturally smile and laugh a lot so maintaining the appropriate posture at the scene can be one of my greatest challenges.

Conveying proper respect can be a bridge to further conversation and it is common for me to get a phone call from family members of a decedent several weeks after the death. Once they come up out of the initial shock, they have questions or they have more information they wish to give us. Sometimes this involves questions about the exact injuries found during the autopsy and wondering how long their loved one suffered. Sometimes they are waiting for the toxicology results to come back because they wish to know for sure if drugs were a factor . . . many thoughts and questions to work through the sadness of their loss. It is my hope, in the end, that our investigation helps the family in some small way by providing a few answers as to what the cause and manner of death is for their loved one – and it is my hope that we are professional and respectful while doing so.

Medical Examiner Specialists

Medical examiner specialists are liaisons between the Medical Examiner Program and the public. They work with medical examiners, forensic pathologists, investigators, law enforcement, hospitals, funeral homes, county and state departments, and when necessary, Veterans Affairs and donor agencies. The specialists compile case files by including

medical records; photos; autopsy, investigative and toxicology reports; and any other tests or studies performed on the decedent. They also process the billing pertaining to each case. Costs can include transporting the decedent, morgue or hospital fees, laboratory and radiological testing, autopsy fees and any other services provided by forensic pathologists and investigators.

“It’s very important to me each case is handled with dignity and respect. With the unclaimed cases, I try to honor them in their death, as some were not honored in their life,” said Sundry Vargas, medical examiner specialist with the Ottawa County Department of Public Health.

Sundry often helps the families who are in contact with the medical examiner’s office. She is respectful and mindful of their emotions, working with empathy as they are grieving for their loved ones. Sundry also provides Spanish translation when there is a language barrier. She helps the medical examiner investigators communicate with families when a translator is not available at a police scene. One night, she received a call from an investigator around 4 a.m. She was asked to contact a migrant family who had two of their teenagers killed in a car accident. The father answered. Sundry stated there was an accident and instructed him to go to the emergency department. There he met with the investigator and hospital translator who told him his children were hit head-on by a drunk driver and they did not survive. Sundry had follow-

up calls with the family, as they requested the bodies be shipped to Mexico for burial.

When there is an indigent case (often poor, or homeless unclaimed body), Sundry works hard to find the next of kin and ensures the decedent is buried with dignity. She diligently searches for the next of kin by obtaining any available county or state records, searching ancestry databases and contacting hospitals. When a next of kin cannot be found, the Ottawa County legal counsel gives OCDPH authority over the decedent for final arrangements. Sundry then coordinates with the Department of Health and Human Services to obtain emergency relief funds for burial or cremation. She also contacts funeral homes and the University of Michigan to see if the body can be donated for research.



Morgue at Holland Hospital

Dangers of Addiction



Medical Examiner Program

2017 Investigations

203 Full Scene Investigations

59 Accidental Deaths

24 Self-inflicted Deaths

3 Homicide Deaths

141 Autopsies

85 Natural Deaths

Cancer is the leading cause of death in Ottawa County, followed by heart disease. Both are much lower than the state and national rates. However, **ALZHEIMER'S DISEASE** leads to death more often for Ottawa County residents.

Addiction to opioid prescription pain medications has reached an alarming rate across the United States. According to the 2017 Ottawa County Community Health Needs Assessment, key informants perceive prescription drug abuse as the top health behavior issue in the county; followed by alcohol abuse, illicit substance abuse and smoking. The assessment also indicates opioid use and prescription drug abuse are interrelated. If a person becomes addicted to prescription medication and they are no longer able to get refills, they will often turn to illicit opiates like heroin to avoid withdrawals. This is a problem for all ages from teens through older adults in Ottawa County and across the nation. The Mayo Clinic states drug addiction, also called substance use disorder, is a disease that affects a person's brain and behavior and leads to an inability to control the use of a legal or illegal drug or medication. Drug addiction can start with the experimental use of a recreational drug – and for some people, the drug use becomes more frequent. For others, particularly with opioids, drug addiction begins with exposure to prescribed medications or receiving medications from a friend or relative who was prescribed the medication. Opioid painkillers have a higher risk and cause addiction more quickly. People

Drug overdose deaths are a public health issue of epidemic proportion across the United States. In Ottawa County, 28 of the 31 drug overdose deaths in 2017 were related to OPIOIDS.

addicted to drugs may continue using despite the harm it causes. As time passes, users may need larger doses of the drug to get high. As their drug use increases, they may find it's increasingly difficult to go without the drug. Attempts to stop drug use may cause intense cravings and make someone feel physically ill or have withdrawal symptoms. People of any age, sex or economic status can become addicted to a drug. Certain factors can affect the likelihood and speed of developing an addiction; such as a family history of addiction, a mental health disorder, peer pressure, lack of family involvement, early use and taking a highly addictive drug. It isn't always easy to recognize the signs and symptoms of drug use since they vary depending on the type of drug. Possible warning signs that someone is using drugs may be problems at school or work, physical health issues, neglected appearance, changes in behavior and relationships, money issues and criminal activity. Commonly abused drugs include marijuana, K2, bath salts, depressants (Valium and Xanax), stimulants (meth, cocaine and Ritalin), club drugs (roofie, ecstasy and molly), hallucinogens (LSD and PCP), inhalants (glue, paint thinners,

gasoline and aerosol products) and opioid painkillers (heroin, fentanyl, morphine, codeine and oxycodone).

Health Consequences

Depending on the type of drug, how they are taken and how much; the National Institute on Drug Abuse states short-term effects can range from changes in appetite, wakefulness, heart rate, blood pressure and/or mood to heart attack, stroke, psychosis, overdose and even death. These health effects may occur after just one use. Longer-term effects can include heart or lung disease, cancer, mental illness, HIV/AIDS and hepatitis. According to the Centers for Disease Control and Prevention, injection drug use is a well-known route of transmission of bloodborne infections, particularly HIV and hepatitis B and C. The use of illicit drugs is also associated with increased rates of TB and STDs. In addition, dependence on drugs also affects decision-making and can create a number of dangerous behaviors, such as risk for trauma and violence. Drug use not only severely affects the person taking the drugs, but it can also have indirect effects on the people around them; especially with babies born to women who use drugs while pregnant.

WHAT OTTAWA COUNTY IS DOING

- Partner with Ottawa County Community Mental Health www.miOttawa.org/CMH and the Grand Rapids Red Project www.RedProject.org.
- Provide access to treatment, counseling and support.
- Increase availability of naloxone (opioid overdose reversal).
- Create awareness at schools and teach refusal skills.
- Participate in Drug Take-Back Day events.
- Offer disposal locations www.miOttawa.org/MedDisposal.
- Educate physician on prescribing protocols and medication assisted treatment programs.
- Use pharmacy and physician drug monitoring program.
- Work with 20th Circuit Court Adult Drug Treatment Court.

Portions of this article were directly obtained from the Mayo Clinic, National Institute on Drug Abuse and Centers for Disease Control and Prevention.

SAPERE AUDE is a Latin phrase meaning Dare to Know.
Bible illustration of Archangel Michael and the Dragon.



Body Art

Tattoos are an expression – art on a canvas of skin. People have been getting inked up for thousands of years with these timeless messages. Tattoos can share a person's values or views on life. They may act as a way to keep a memory or honor a lost loved one. Nearly four-in-ten people 18 to 29 years of age have a tattoo. Tattoos are permanent, for the most part. They can be removed, but only if you have plenty of time and money to spare. Getting a tattoo is a process, so take time to carefully decide which lifelong expression you want on your body. It's better to be sure than regret it later. Your ideologies may change or you may no longer have the same sentiments or passions. Also, consider how your body changes with time. A tattoo could fade, stretch, shrink or even get distorted from stretch marks and scars. In addition, employers and the armed forces may have policies which prohibit tattoos or people may unfairly judge you. Reflect on what you want, do your research, be willing to commit to your inked message, understand the associated risks and only work with a licensed facility. If you have medical conditions, consult with your doctor before getting a tattoo to discuss your health risks and infectious diseases associated with tattooing; and be sure to follow the aftercare instructions.

Why Regulate



The Michigan Public Health Code requires licensure and inspections by local health departments of body art facilities that tattoo, brand or perform body piercing. The Ottawa County Department of Public Health annually inspects 14 tattoo facilities to ensure adequate sterilization, sanitation and safety standards are maintained. Tattooing involves a needle, and it can be likened to a surgical procedure. This process exposes people to risks of infections, some of which are serious and difficult to treat. Bacterial and bloodborne infections can happen when non-sterile water, inks and equipment are used. If you decided to get a tattoo, find a licensed facility to ensure sanitary tattooing practices and confirm FDA approved tattoo inks are used to prevent infections associated with contaminated ink.

Minimize Risks

Tattoo artists and their clients are at risk of blood exposure. Blood may carry the hepatitis B virus, hepatitis C virus or human immunodeficiency virus (HIV). These viruses can be dangerous and make you sick. Some of these diseases are permanent and can be fatal. Exposure can happen through needle sticks, contact with dried blood on equipment or surfaces, or even blood splashes in the eyes, nose or mouth.

Find an artist who:

- Is licensed and inspected.
- Maintains a clean and organized facility.
- Follows hygienic practices and proper handwashing.
- Cleans and sterilizes equipment and surfaces.
- Wears clean disposable gloves.
- Opens a new sterile needle in front of you.
- Disposes used needles in a Sharps container.
- Uses inks that are manufactured specifically for tattooing.
- Uses inks and ointments portioned out for individual use.
- Uses only sterile water to dilute concentrated inks or rinse equipment during tattooing.
- Does not allow tattooing of minors (without written parental consent) or people under the influence of drugs or alcohol.

Ottawa County body art facilities are listed at www.miOttawa.org/BodyArt or to request a facility inspection report call (616) 393-5645.



Dav Poindexter
Owner of Love Tattoo in Jenison

Ask an Artist



How did you become a tattoo artist?

I have a slightly less typical start to my career. I graduated from Grand Valley State University in 1997 with a degree in Health Science (back then, their pre-med program), and realized medicine wasn't for me. I've always been interested in body art and piercing since I was 18, even though in 1993 it was a bit less acceptable. One of my friends asked if I was interested in apprenticing for piercing. I figured it could be a good temporary job until I found a foothold somewhere. I'm still looking for that foothold somewhere!

Piercing eventually lead to tattooing. Turned out, I could draw better than I ever realized. I eventually took some additional art classes to help refine what I knew. Already working in a tattoo shop, I had an ample supply of friends and clients who were willing to let me do small simple designs on them as practice. Eventually, those designs got bigger and more complex. From there, I started working in a

tattoo supply company. I learned about tattoo machines, needles, pigments and more – the behind the scenes aspect of the industry. I translated that into managing a tattoo studio, which I eventually bought from the previous owner.

How is it owning a tattoo studio?

We've been in Jenison for 12 years now, and Ottawa County can be a little more conservative. I understand not everyone is comfortable in a tattoo studio environment. There are certain perceptions of what tattoo artists and shops should look like. Since I'm not covered in tattoos, I'm probably a little easier to approach than some of my peers. So, if a smile and a wave from a non-tattooed hand can make someone feel a little more at ease . . . sure. I still have plenty of visible tattoos and I help other people display their ideas publicly. But for the time being, I'll hold off on having my face tattooed.

Continued on page 18

What is most important to you when providing services to a client?

The most important thing is providing a good clean product. Tattoos that are poorly done are just as permanent as good looking ones, but the bad ones will continue to speak negatively about you years afterward. I do my best each time to minimize the number of bad vibes about tattooing in general. If we were not practicing aseptic techniques and providing clean solid work, we wouldn't make it another year or have any repeat clients. They would be angry, disfigured or worse – and I'm too old to start up a modeling career.

What are some of your challenges?

My biggest challenge is being an owner-operator for sure. Keeping up with supplies, taxes and regulations, as well as my regular clientele, can be a bit overwhelming at times. Owning a business was definitely never on my bucket list. This has all been a learn-as-you-go experience. I have a normal 40 to 50 hour work week, but creating drawings for future appointments happens after work. Making time for family is a priority, so my outside drawing time is usually restricted to when everyone else is asleep. Responding to emails and design inquiries happen after that. That's why coffee was invented!



Do you think body art facilities should be regulated?

Regulations are a double-edged sword. Yes, we absolutely need regulations. Sometimes we know why, sometimes not. The shops and owners I've trusted for years before we were regulated already did 90 percent of these things because it's good business and art. However, the people who wouldn't be prone to following the rules (kitchen magicians who work out of their house) don't care either way. They generally aren't concerned with regulations or what the product is that they're putting out. There will always be outliers regardless of industry or regulations. The regulations just put another financial squeeze on a small business owner, but it's what we sign on for.

How does that make you feel knowing there are people in the industry who don't follow the rules?

It's frustrating in the same way that merging in a construction zone is. If everyone was considerate of others, it'd be a seamless merge. Just follow the rules and it goes smoothly. But there's always going to be those jerks who take advantage and try to zip ahead and make everyone else suffer. For what we do, the scratchers don't have too much of an impact. Again, there's always going to be someone doing it. But the people who are interested in that type of work aren't looking for good tattoos.

Do clients choose an artist or how do they make a connection?

Often times during a consultation, people will show examples of what they have in mind. All of the artists here have different artistic stylings. If the examples fall into someone's style more so than someone else, we'll recommend that artist. It just helps the client get the product they want faster. Think of it like asking Picasso to do a portrait. His version might be quite a bit different than what someone is expecting. If a client wants to work with a specific artist, then we just assume that it's because they want something in our style.

Has an artist ever or would they turn down creating a tattoo?

If it's tattooable, we're pretty open to the subject material. We leave that up to the client to get us started. Very rarely will we turn down a tattoo due to the subject material. We'll tattoo a cross or an upside down cross on someone with no commentary. Neither one affects our beliefs, and it's not our place to judge what you want. I've wanted (and want more) tattoo acceptance for years now. Judging if a client has a good idea or not seems hypocritical. However, if an artist isn't comfortable tattooing something for whatever reason, I'll stand behind their decision. Forcing them to do it compromises the tattoo, the experience and the work environment.



Lion art on side of abdomen by Nate Galusha, Love Tattoo

What advice do you give your customers or make sure they've considered before getting inked?

Most of the time the wait deters most spur of the moment tattoos. Since we're a mostly custom shop, it takes time for the entire process. On average, we have a 4-6 week wait for appointments. That gives plenty of time for second thoughts . . . and third, and fourth, etc. When they come in for their appointment, we're assuming they've thought a bit about what they're getting. All we can do is try our best to answer any and all questions they have before we get started.

Do you have a closing comment you want to share?

Three things you should never skimp on – shoes, whiskey and tattoos. Buy the best you can because your feet are worth it, so is your palate and your skin. ☺

The comments contained in this interview were made solely by Dav Poindexter and do not necessarily reflect the views of Ottawa County or the Ottawa County Department of Public Health.

STOP ZIKA

PREVENT BIRTH DEFECTS



Zika is still a public health threat



Zika Virus

The Zika virus spreads mostly by the bite of an infected Aedes species mosquito, but it can also be passed through sex from a person who has Zika to his or her sex partner. These mosquitoes are aggressive daytime biters and can also bite at night. The Aedes species mosquito is not native to Michigan but in southern states, Mexico, Central America and South America. They are often found at tire recycling centers, residential homes and landfills which offer reservoirs of water to lay eggs and reproduce.

Prevent Zika by Avoiding Bites

If traveling to areas outside of Michigan that have the Aedes species mosquito:

- Use bug repellent.
- Wear long-sleeved shirts and long pants.
- Stay in places with air conditioning or window and door screens.
- Use bed nets.
- Use condoms during sex, if pregnant.

Zika Risks

A pregnant woman can pass the Zika virus to her fetus. Infection during pregnancy can cause serious birth defects, including microcephaly (a birth defect in which infants are born with abnormally small heads and brain damage). Pregnant women should not travel to areas with Zika. If travel to one of these areas is a must, they should talk with their health care provider first and strictly follow steps to prevent mosquito bites. If a pregnant woman has a partner who lives in or has traveled to an area with Zika, she should not have sex (or use condoms every time during pregnancy).

What are we doing about Zika?

In 2017, the Ottawa County Department of Public Health (OCDPH) received a grant from the Michigan Department of Health and Human Services (MDHHS) for mosquito-borne disease prevention and control. The funding included \$10,000 for an educational outreach and \$10,000 for mosquito surveillance.

About 1 in 10 U.S. pregnant women with confirmed Zika infection had a fetus or baby with birth defects in 2016, according to the CDC.



Educational Outreach Project

Project Goals

Create awareness about the Zika virus and how it can cause birth defects in unborn children. Urge pregnant women to postpone travel to Zika infected areas. If travel is necessary, use prevention methods (bug repellent, long sleeves and pants, screens, bed nets and condoms).

Target Audience

Pregnant women (or women who may want to become pregnant) traveling to areas with risk of Zika virus.

Collaboration Goal

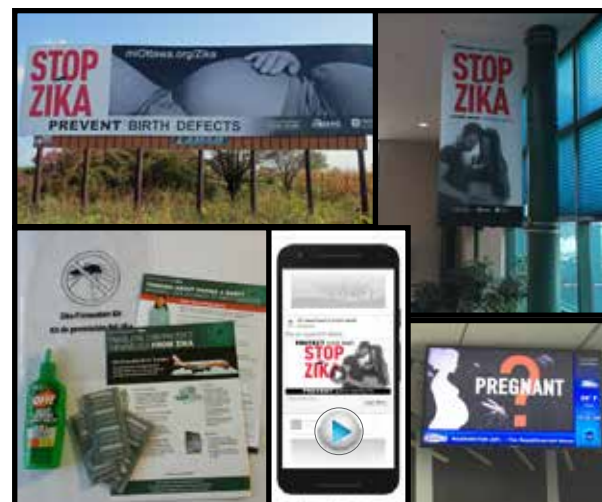
Provide consistent Zika virus prevention messaging throughout the region that is visually appealing and memorable. The OCDPH Environmental Health manager, supervisor and communications specialist contacted the other grant recipients to discuss their outreach methods; used Zika virus prevention resources available from the Centers for Disease Control and Prevention; and conducted online searches to research other prevention messages being used. One search result brought up the Chicago Department of Public Health's (CDPH) citywide campaign #STOPZIKA. Their campaign had an eye-catching design with a simple message. The OCDPH communications specialist contacted CDPH to see how the health departments could collaborate to expand their existing and successful campaign into West Michigan. The CDPH authorized their advertising agency to provide the original design files to OCDPH for modification and use at no cost. Through this partnership, the OCDPH used a multi-media approach to maintain consistent messaging and kept costs low to maximize outreach efforts.

Outcome

A cross-jurisdictional sharing campaign with an **estimated reach of nearly 2 million** (includes website visits, email recipients, social media interactions, advertising impressions and kit distributions).

Project Deliverables

- Zika web page at www.miOttawa.org/Zika
- Public Service Announcements
- Facebook, Twitter, Pinterest and YouTube posts
- Facebook and Instagram ads
- YouTube ads
- Google AdWords
- Billboard Eastbound I-96 in route to the Gerald R. Ford International Airport
- Video ads playing throughout the lobby and concourses at the Ford Airport
- Banner and window decal ads at the Muskegon County Airport
- MDHHS Zika prevention kit distributions



Female Aedes aegypti mosquito

Mosquito trap



Surveillance Project

Project Goals

Implement a low-cost surveillance system geared towards identifying populations of Aedes species mosquitoes that are capable of transmitting the Zika virus. Through limited surveillance in ten counties, Michigan has not detected any of these species. However, they've recently been discovered in nearby states (Illinois, Indiana and Ohio) suggesting that its habitat range could reach Michigan. Developing a systematic mosquito surveillance system among Michigan local health departments will help to better prepare communities if local mosquito-borne transmission risk is present.

“ We're grateful for the opportunity to work with MDHHS and other health departments to prevent and control mosquito-borne diseases. Our goal is to create awareness and help stop birth defects caused by the Zika virus, said Adeline Hambley environmental health manager. ”

Outcome

The OCDPH Zika surveillance program ran from July 27 to September 29, 2017. It accounted for 67 sampling events at the Holland and Grand Haven Resource Recovery Service Centers, Hudsonville Courthouse, Black River Recycling Center, Hudsonville Nature Center and River Run (a residential neighborhood in Spring Lake). The OCDPH designed the collection method, time of sampling and location of mosquito traps to specifically target female Aedes mosquitoes and monitor for those species which are capable of transmitting the Zika virus. The OCDPH collected and identified 147 mosquito specimens, 135 of them being female. **None** of the species identified during this project were vectors of the Zika virus.

26 Parks



Beauty and tranquility of Riverside Park in Grand Haven

200+ Miles

Step It Up is a free program designed to help people of all fitness levels stay active and explore different parks. It challenges them to set goals and get moving.

Bridget and Dorothy participated in the Step It Up Challenge; a program developed by the Ottawa County Department of Public Health and Ottawa County Parks & Recreation. Bridget and Dorothy each had a goal going into the challenge – Bridget wanted to lose weight and keep up with her health journey and Dorothy needed to get active again after knee surgery and physical therapy. They also made a goal together of visiting every Ottawa County park. Since starting the Step It Up Challenge in the spring of 2017, they traveled more than 200 miles and visited all 26 county parks. During their park adventures, they've spotted a bald eagle, Cooper's hawk, deer and several other birds and critters. Bridget and Dorothy enjoy the serenity and beauty of the parks, and especially the support they give each other. They plan on repeating their Ottawa County Parks venture in the summer of 2018; and this time, bringing along more friends to join them on their early morning hikes.



FAVORITE DESTINATIONS

"Hemlock Crossings in West Olive is one of our favorite parks!"



"Started on the trail at the North Ottawa Dunes and hiked all the way to North Beach Park. Nice challenge and dodged many BIG spiders!"

Goals Met . . . We Did It!

ACCOMPLISHMENTS

Together, hiked all 26 Ottawa County parks.

Together, improved walking speed from 24 minutes per mile to 16 minutes per mile.

Dorothy recovered amazingly from her knee replacement.

Bridget walked her first 5K last summer, the Zeeland Zoom, with the goal of finishing within an hour. She did it in 59 minutes!

“The Step It Up Challenge got us really motivated to reach our goals and to have a blast together while doing it!”



"We were scared of the intimidating 543 steps at Kirk Park, but we did it!"



"Standing outside the Weaver House at Pine Bend Park. We hiked from Hemlock Crossing Park to here and then back again. The two parks connect which is so cool!"



"One of our favorite trips was to Rosy Mound Natural Area. It was a beautiful morning enjoying the park and a hilarious adventure!"

[Click to register for the Step It Up Challenge](#)

Ottawa
PATHWAYS
to better health



459 Program Referrals **405 Residents Served**
through December 31, 2017



Click on a CHW's name to learn more.

Meet Community Health Workers: Judy Kettering, Maria Merino, Shandra Smith, Brittney Brown and Glorie Orozco



“The goal of this program is to help people overcome the barriers which keep them from being as healthy as they can be.”

By Susan Keen, Nursing Supervisor



A NEW SOLUTION for accessing health care in Ottawa County was developed through a collaborative effort of many local organizations.* Based on the findings from the 2015 Ottawa County Community Health Needs Assessment, a Community Health Improvement Plan (CHIP) was created to address the most important needs and opportunities for improving health in our community. The CHIP points to three high-priority needs; access to health care, recognition and treatment of mental health conditions, and healthy behaviors around nutrition and exercise.

Launched in early 2017, the Ottawa Pathways to Better Health program is an initiative of the CHIP. It is a community health worker (CHW) program where CHWs meet regularly with clients to set health improvement goals and assist in achieving them. CHWs are trusted members of the communities they serve, often having ethnicity, language, culture and life experiences in common with their clients. They are equipped to connect clients to needed care such as medical, dental, mental health, substance abuse treatment or community

services such as food, clothing, housing, transportation and employment. Their job is to assess their client's obstacles to achieving good health and address them through community resources. CHWs also help clients manage health conditions. They don't provide direct health care but help clients and their families navigate the health and human service system to connect them with resources – leading them to improved health and well-being. To be eligible, participants must be 18 years of age or older, live in Ottawa County (including the entire 49423 zip code), be enrolled in or eligible for Medicare and/or Medicaid, have two or more chronic health conditions and have challenges overcoming barriers to manage health conditions. There is no charge for the program. To learn more, call (616)393-5601 or make a referral at www.miottawa.org/OPBH.



Fox17 News story with Glorie Orozco

*Community Foundation of Holland/Zeeland Area, Community Mental Health of Ottawa County, Grand Haven Area Community Foundation, Greater Ottawa County United Way, Holland Hospital, Michigan Health Endowment Healthy Ottawa Fund (Initiative of the Grand Haven Area Community Foundation and the Community Foundation of the Holland/Zeeland Area), North Ottawa Community Health System, Ottawa County Department of Public Health, Spectrum Health Zeeland Community Hospital

Vaccine Myths

BUSTED

It's time to separate fact from fiction.

Mixed messages from the media and people you know may have you questioning whether to vaccinate. Vaccines have successfully prevented dangerous diseases and saved lives for years, yet their reputation is under attack. Thanks to vaccines some diseases are almost gone from the U.S. helping us protect ourselves and loved ones.

How Vaccines Prevent Diseases

The diseases vaccines prevent can be dangerous, or even deadly. Vaccines reduce the risk of infection by working with the body's natural defenses to help safely develop immunity to disease. When germs (such as bacteria or viruses) invade the body, they attack and multiply. This invasion is called an infection, and the infection is what causes illness. The immune system then has to fight the infection. Once it fights off the infection, the body has a supply of cells that help recognize and fight that disease in the future. These supplies of cells are called antibodies. Vaccines help develop immunity by imitating an infection, but this imitation infection does not cause illness. Instead, it causes the immune system to develop the same response as it does to a real infection so the body can recognize and fight the vaccine-preventable disease in the future.

Vaccine Myths



1

The recommended number of vaccines overwhelm the body. ▶

There are a number of vaccines recommended because many diseases can make you extremely ill. Children are given many shots (vaccines) at a young age since this is when they are at highest risk of getting sick or dying if they get these diseases. Scientific data show that getting multiple vaccines at the same time is proven safe and does not cause any chronic health problems.



2

It's better to build up natural immunity. ▶

Naturally acquired immunity is not better than the immunity provided by vaccines. Natural infections can cause severe complications and be deadly. This is true even for diseases that most people consider mild, like chickenpox. Vaccines, like any medication, can cause side effects. The most common side effects are mild. However, many vaccine-preventable disease symptoms can be serious, or even fatal. Although many of these diseases are rare in this country, they do circulate around the world and can be brought into the U.S., putting unvaccinated children at risk. Even with advances in healthcare, the diseases that vaccines prevent can still be very serious. Vaccination is the best way to prevent them.

All kindergarteners, 7th graders and new students to a school district are required to be up-to-date on their vaccines to attend school. Of the 11,649 students in Ottawa County, 447 students were not up-to-date or fully immunized, and only nine of these were waived for a medical reason. (January 1-September 30, 2017)



3

Vaccines contain harmful mercury. ▶

Mercury is a naturally occurring element found in the earth's crust, air, soil and water. The two types of mercury to which people may be exposed are very different (methylmercury and ethylmercury). Methylmercury is the type of mercury found in certain kinds of fish. The human body has a harder time breaking it down and it can build up over time. At high exposure levels, it can be toxic to people. However, over a lifetime everyone is exposed to some methylmercury. Thimerosal is a preservative used for decades in the U.S. in medicines and vaccines that contains ethylmercury. It does not stay in the body for long, so it does not build up and reach harmful levels. There is no evidence of harm caused by the low doses of thimerosal in vaccines.



4

Vaccine ingredients cause autism. ▶

Autism spectrum disorders are a group of developmental disabilities that can cause significant social, communication and behavioral challenges. The causes for many types of autism are still unknown. The disability presents itself differently in different children and ranges in severity. A suggested association between certain childhood vaccines and autism has been one of the most contentious vaccine safety controversies in recent years. Research shows there is no link between receiving vaccines and developing autism. Many well-conducted studies have concluded that thimerosal in vaccines does not contribute to the development of autism. Even after removing thimerosal from almost all childhood vaccines, autism rates continued to increase – the opposite of what would be expected if thimerosal caused autism.



5

Vaccines aren't needed, most diseases are gone. ▶

Before the middle of the last century, diseases like whooping cough, polio and measles struck hundreds of thousands of infants, children and adults in the U.S. Thousands died every year from them. As vaccines were developed and became widely used, rates of these diseases declined until today most of them are nearly gone from our country. Before there was a vaccine, nearly everyone in the U.S. got measles and hundreds died from it each year. Today, most doctors have never seen a case of measles.



The goal of vaccination is to achieve a high number of vaccinated people to stop the spread of diseases and protect communities; especially to protect the people most vulnerable to diseases, such as babies, the elderly and people with an underlying health condition. Stronger protection could eventually wipe out diseases such as in the case of smallpox. As more people refuse to vaccinate, we take away the protection given by vaccination and could soon find ourselves battling epidemics of diseases we thought we had conquered decades ago.

**Not getting immunized is the greater danger,
and that's a fact!**

Lead Levels in Children

What Ottawa County is doing about it.



The Flint water crisis brought attention on how lead adversely affects children. It opened up conversations in our community on how to better protect children from lead poisoning. The Ottawa County Department of Public Health (OCDPH) met with concerned health professionals, educators and officials to share resources and research the sources of lead in the environment, lead exposure to children, and the impact of lead on health and learning. As a result, OCDPH developed protocols with physicians and the state for identifying children with elevated blood lead levels.

Who Does What

Michigan Department of Health & Human Services

- Provide technical assistance and training to local health departments.
- Maintain database of children's blood lead level test results.
- Coordinate and fund home lead testing and removal for eligible families.

OCDPH

- Monitor blood lead level test results from the state.
- Follow-up with health care providers for children who need additional testing.
- Provide in-home nursing support to children with elevated blood lead levels.
 - Assess child's health status, development and nutrition.
 - Evaluate lead exposure risks in the home.
 - Provide education and refer to resources.

Health Care Providers

- Screen children ages 1-6 years to determine lead exposure risks.
- Test blood lead levels in children ages 1-6 years.
- Provide lead safety and nutrition education.
- Follow-up and retest (if needed).

Sources of Lead

Lead is a naturally occurring element found in small amounts in the earth's crust. While it has some beneficial uses, it can be toxic to humans and animals. Lead is found in all parts of the environment (air, soil, water and even inside homes). In Michigan, lead paint is the #1 cause of lead exposure

and is found in homes built before 1978. The older the home, the more likely painted surfaces like windows, cupboards, doors and porches will contain lead paint. Lead can also be found in drinking water supplied by lead pipes. Other sources of lead exposure are from gasoline, batteries, ammunition, dishes, imported items (clay pots and home remedies) and certain consumer products (candies, make-up, toys and jewelry).

Health Effects

Lead is a serious health threat. Children six years old and younger are most susceptible to the effects of lead because their growing bodies absorb more lead than adults and their brains and nervous systems are more sensitive to the damaging effects of lead. Babies and young children can also be more highly exposed to lead because they often put their hands and other objects that may have lead from dust or soil on them into their mouths. Because symptoms may occur slowly or could have other causes, lead poisoning is easily overlooked. Lead can affect almost every organ and system in the body. Even low levels of lead in the blood of children can result in slowed growth, anemia, behavior and learning problems, hearing problems, and in rare cases, ingestion of lead can cause seizures, coma and even death.

Blood Lead Levels

Scientific studies show that even low blood lead levels can cause lifelong health effects – and the effects of lead exposure cannot be corrected. Children can be given a blood test to measure the level of lead in their blood. Medicaid requires children be tested at 1 and 2 years of age. Children not tested at ages 1 and 2 must be tested at least once between the ages of 3 and 6 years. All other children should be screened by their doctor to determine their risk of lead exposure. A fingertip

prick with a result greater than or equal to 5 micrograms per deciliter of lead in blood is a level of concern. At this level, the child will need to be retested using blood from a vein. Early identification means parents and doctors can take immediate action to reduce a child's exposure to lead.

What You Can Do

Ask your doctor to test for lead.

If your child has a high lead level, make a plan with your doctor to find the best treatment. You may need to go back for a second lead test. If needed, have your child assessed for learning and development problems.

Find the lead in your home.

Most children get lead poisoning from lead paint in homes built before 1978. When old paint cracks and peels, it makes lead dust. Lead dust is so small you cannot see it. Children get lead poisoning from swallowing dust on their hands and toys. It is important to find and fix lead in your home as soon as possible. Have your home inspected

by a licensed lead inspector, and don't remodel or renovate until your home has been inspected for lead. Home repairs like sanding or scraping paint can

make dangerous lead dust. Be sure to use wet paper towels to clean up lead dust around windows, play areas and floors. Use contact paper or duct tape to cover chipping or peeling paint. Make sure to wash hands and toys often with soap and water, and always wash before eating and sleeping.

Feed your child healthy foods.

Three key nutrients can protect the body from the harmful effects of lead: calcium, iron and vitamin C. These help the body absorb less lead and are a part of a healthy diet.



TOXIC WASTE

Dumping toxic chemicals on the ground, throwing them in the trash, or pouring them down the drain or storm sewer leads to polluting the environment and potentially drinking water – posing a serious health threat. They also present hazards to children and pets if left around the house and accidentally swallowed. Corrosive or toxic products (also known as household hazardous waste) are leftover, unwanted or unusable products that can catch fire, react or explode under certain circumstances. These common household items include fluorescent light bulbs, cleaners, electronics, medications, needles, paints, oils, batteries and pesticides that contain hazardous ingredients. Many contain toxic materials such as lead, cadmium, chromium, mercury and fire retardants that need special care when disposing of them.

Free household hazardous waste disposal is available to Ottawa County residents at any Resource Recovery Service Center (RRSC) in Coopersville, Georgetown, Grand Haven and Holland. Certified environmental health experts, with hazardous materials training, ensure proper disposal at these locations. The centers also accept recyclable items for an annual fee. For a list of accepted and not accepted items and site hours, visit www.miOttawa.org/eco or call (616) 393-5645.

66 Tons
Household Hazardous Waste
Collected for Disposal in 2017

Take a Tour



Oyata Shin Shu Ho

“Strive to attain true moral goodness and to express it through one’s every action,” words Toby lives by. Toby has studied the martial arts since 1972 and owns a school since 1975. He has traveled to Okinawa, Japan several times to study. During this 45-year time, Toby has been awarded two 7th Degree Black Belts Kyoshi/Master Instructor Certificates from two different Okinawan Hanshi/Grand Master Instructors.

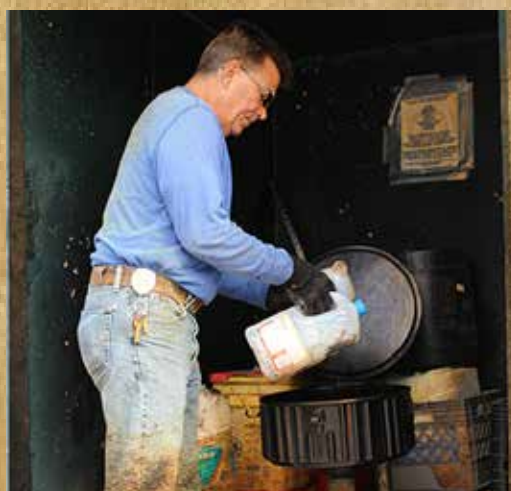


Toby has worked for Ottawa County since 2004. He ensures the RRSCs run safely and efficiently.

See what happens at the Resource Recovery Service Centers with Toby Heberly, Senior Site Attendant



Make sure accepted recyclable items are placed in appropriate receptacles.



Operate the used motor oil-recycling depot.



Sort and classify hazardous waste from residents and qualifying small businesses.



Separate corrosives, poisons and flammables; ensuring they’re in substance appropriate containers, properly sealed and labeled.



Pour off flammable materials from small containers into 55-gallon drums.



Maintain inventory and status of hazardous waste at each site.

Safe Handling Tips

- Follow any instructions for use and storage provided on product labels.
- Read labels for disposal directions to reduce the risk of products exploding, igniting, leaking, mixing with other chemicals or posing other hazards.
- Keep hazardous products in their original containers. Never remove labels or store them in food containers.
- Never mix with other products. Incompatible products might react, ignite or explode; and could be a health hazard if inhaled.
- Drop off household hazardous waste (no charge) and recyclables (small annual fee) at any RRSC. For locations and hours, visit www.miOttawa.org/eco or call (616) 393-5645.

Don't flush medications

Medications can contaminate drinking water, don't flush them! Dispose unwanted or expired prescription drugs and over the counter medications (no charge) at a secure and confidential drop box. Disposal also helps prevent drug misuse and accidental overdose. Medication disposal is not available at the RRSCs but at selected locations throughout Ottawa County. Find participating locations at www.miOttawa.org/MedDisposal.

650 lbs
Collected for Disposal in 2017

ecoOttawa



We are so proud of our outstanding team members. Their excellence and commitment show in their work at our department and in our community.

Here are a few highlights from among so many outstanding Public Health team members!



Ottawa County Outstanding Customer Service Award

Empowered to solve problems with integrity and empathy to inspire trust.



The county administrator and board recognize Ottawa County employees who provide excellent customer service through their professionalism, friendliness and making every customer feel valued. Each quarter a committee reviews a list of nominees and selects a recipient for the Ottawa County Outstanding Customer Service Award. Over the last year, more than 30 public health staff members were nominated; with Jessica Voglewede, environmental health specialist, receiving this prestigious award. Her nomination included complimentary comments like "Jessica behaved with complete professionalism." This was during a restaurant pre-opening inspection where there were difficulties with the plan review application, facility operations and violations. "Jessica was unfailingly polite, even when some derogatory comments were made. She helped the operator find facility issues and gave suggestions on how to improve the efficiency of operations and methods of saving money." In fact, the operator gave her a hug after the inspection because of Jessica's excellent customer service! Jessica has also received the Certificate of Merit from the National Environmental Health Association and the Young Professional of the Year award from the Michigan Environmental Health Association. Way to go Jessica! Learn more about Jessica at <http://bit.ly/2D4fLTO>.

Read more team member highlights on pages 42-45.

Bosco, a 14-year-old rat terrier, was mourning his owner after she passed away in hospice care. Destined for an animal shelter and most likely to be euthanized, Jill stepped in and found Bosco a new home.

Jill Bannink-Albrecht, environmental health clerk with the Ottawa County Department of Public Health, is the founder of Tyson's Place Animal Rescue. Jill works nights and weekends to serve her community by assisting terminally ill people with caring for and finding new families for their pets. "I believe pets belong with their people until the end. Pets are family members and comfort people in their last days," exclaimed Jill. She and a network of volunteers help animals when their owners become too sick to care for them. They set up plans for the pets, so after their owner passes away they have a foster home until adopted. This ensures the animal does not end up in a shelter if no one in their family can take them. Tyson's Place also arranges to have a pet's veterinary and grooming needs met to help increase the chances of getting adopted. "I feel it's really important to give peace of mind to people who love their animals so much and are already dealing with something so stressful," expressed Jill. "They should know their pets will be cared for after they've passed away."

HOPE

Now that Bosco feels better, he loves going for drives and sticking his head out the window. It's one of his favorite things to do – he loves having the breeze hit his face.



Bosco, a 14-year-old rat terrier, arrived at Tyson's Place Animal Rescue after one of his owners died in hospice care and his other owner had dementia and was unable to continue to care for him. Bosco was overweight, had a large wart on his head and his teeth were so infected that the infection was impacting his kidneys. When people are sick, veterinary care for their animals often is not a priority; consequently, the rescue often sees cats and dogs that need extensive care. The rescue had Bosco's wart removed and his teeth cleaned to help ready him for foster care and eventually adoption. Even after Bosco transitioned to his foster home, he spent the first two months mourning the loss of his owners. Nevertheless, his foster family took him on many walks, even on vacation to the Upper Peninsular where he went hiking – well, he was carried part of the way because he is an old man. Bosco ended up losing half his weight and blossomed into a whole new dog. Bosco is now the rescue's mascot at public events.

“

I feel it's really important to give peace of mind to people who love their animals so much and are already dealing with something so stressful. They should know their pets will be cared for after they've passed away.
- Jill Bannink-Albrecht, founder of Tyson's Place

”



A woman with stage 4 breast cancer needed to reach out to the rescue. She could no longer care for her 16-year-old cat Pookie. The chances of Pookie getting adopted was next to impossible, given her old age. After 10 months, a family whose elderly cat recently died decided to open their hearts again and adopted Pookie. The original owner was able to get the peace of mind of knowing Pookie is now loved and cared for with her adopters.



Jill with Spike and Stella. Tyson's Place Animal Rescue helped the senior lab siblings get adopted together after their person died of cancer at age 44. Read more stories at www.TysonPlaceRescue.org.



Counties participating in the Wear One program.

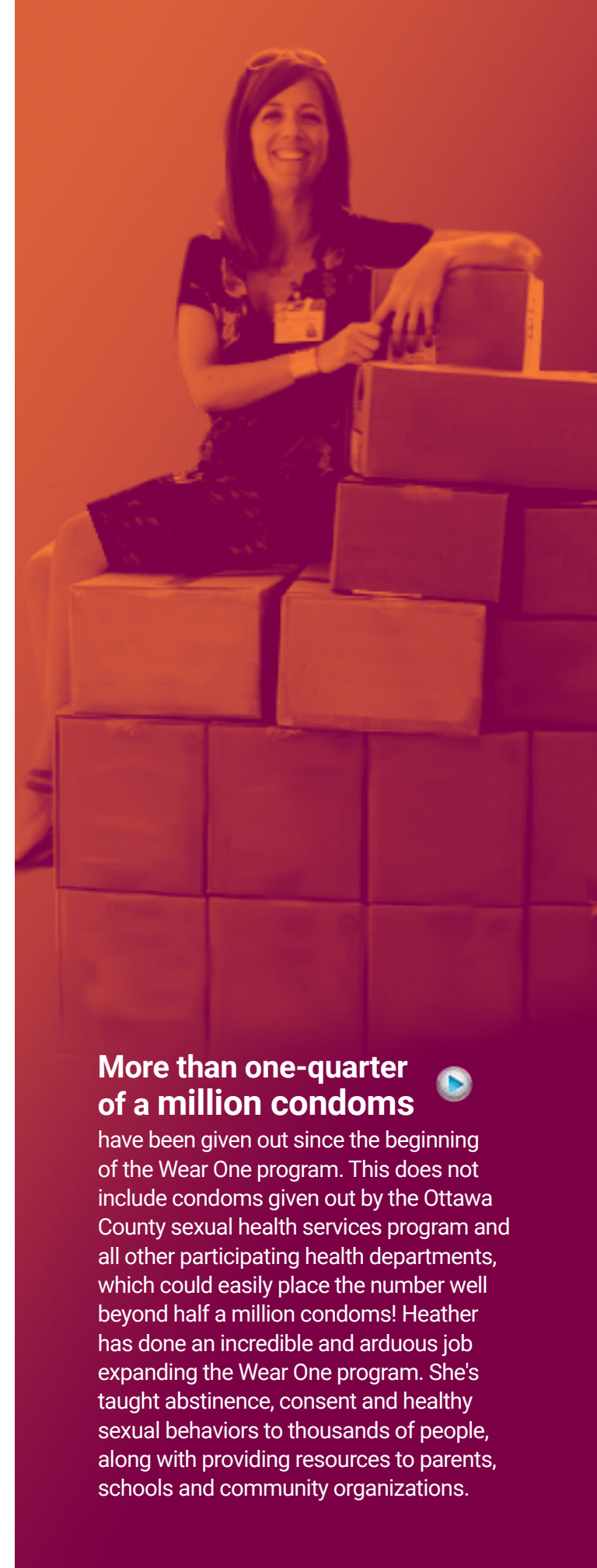
EDUCATE

Wear One is a program that launched in 2014 to increase free condom availability, create awareness and promote acceptance of condom use in people 18-24 years of age. The goal is to decrease sexually transmitted diseases (STDs) and unplanned pregnancies by removing barriers such as cost, embarrassment and lack of access to condoms. In Ottawa County, more than 30 locations (such as colleges, retail stores, tattoo studios, nail salons, gas stations and community organizations) offer free Wear One packages (supplied by OCDPH) that include 10 condoms, lubricant, sexual health resources and STD testing information. People 18-24 years of age can also order Wear One packages online and receive them in an unmarked and confidential envelope. What started with just a few community partners in Ottawa County has now grown to include 33 more counties from across the state along with several colleges.

“The Wear One program enables us to reach our community beyond the brick and mortar of the health department.”

- Heather Alberda, AASECT Certified Sexuality Educator

The Wear One program was developed and expanded by Heather Alberda, sexual health educator, and her supervisor Rebecca Young with guidance from Sandy Boven, Lisa Stefanovsky, Helen Tarleton and Connie Kross. Over the last several years, Heather worked with Kristina Wieghmink, communications specialist, to create multi-media campaigns and build brand awareness of the Wear One program and its aim. Outreach included print and digital advertising at college campuses, social media ads, local newspaper and magazine ads, banners, promotional products, posters, educational videos, radio and hundreds of presentations by Heather at colleges, businesses, conferences, health events and community fairs. Four interns from Grand Valley State University, Western Michigan University and Ferris State University worked with Heather over the last few years to also help grow the program. In return, they gained insight into health education to help further their studies and career. In fact, one intern, Lisa Wegner, earned a master's in public health and is now the community health promotion specialist at the Barry-Eaton District Health Department (one of the Wear One program participants). Heather's mentoring of public health students has earned her the Midwest Interprofessional Practice, Education and Research Center 2016 Outstanding Preceptor Award. She is also the recipient of the Roy R. Manty Distinguished Service Award from the Michigan Association for Local Public Health and the Michigan Public Health Association.



More than one-quarter of a million condoms

have been given out since the beginning of the Wear One program. This does not include condoms given out by the Ottawa County sexual health services program and all other participating health departments, which could easily place the number well beyond half a million condoms! Heather has done an incredible and arduous job expanding the Wear One program. She's taught abstinence, consent and healthy sexual behaviors to thousands of people, along with providing resources to parents, schools and community organizations.

Financial Statement

	FY13 Actual	FY14 Actual	FY15 Actual	FY16 Actual	Unaudited FY17 Actual
Revenues					
Intergovernmental revenues	\$ 3,065,004	\$ 3,991,504	\$ 4,801,365	\$ 3,585,415	\$ 4,676,608
Charges for Services	696,758	826,927	918,093	955,244	693,973
Licenses & Permits	769,963	779,766	850,503	906,204	912,356
Other	247,543	217,256	111,055	75,639	44,591
Total revenues	4,779,268	5,815,453	6,681,016	5,522,502	6,327,528
Expenditures					
Personnel Services	6,001,209	6,099,821	6,275,885	6,375,615	7,130,832
Supplies	948,512	887,349	863,992	906,384	822,831
Other services and charges	1,755,616	1,847,066	1,955,692	1,793,395	1,809,000
Capital Outlay	8,030	-	-	7,064	6,325
Total Expenditures	8,713,367	8,834,236	9,095,569	9,082,458	9,768,988
Revenues over (under) expenditures	<u>(3,934,099)</u>	<u>(3,018,783)</u>	<u>(2,414,553)</u>	<u>(3,559,956)</u>	<u>(3,441,460)</u>
Other financing sources (uses)					
Transfers from other funds	3,559,851	3,018,782	2,837,174	3,379,710	4,075,912
Transfers to other funds	-	-	-	-	-
Total other financing sources (uses)	3,559,851	3,018,782	2,837,174	3,379,710	4,075,912
Net change in fund balance	(374,248)	(1)	422,621	(180,246)	634,452
Fund balance, beginning of year	952,576	578,328	578,327	1,000,948	820,702
Fund balance, end of year	\$ 578,328	\$ 578,327	\$ 1,000,948	\$ 820,702	\$ 1,455,154
FTE (Employees)					
Health	85.65	87.23	86.65	88.55	88.60

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Page 8

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