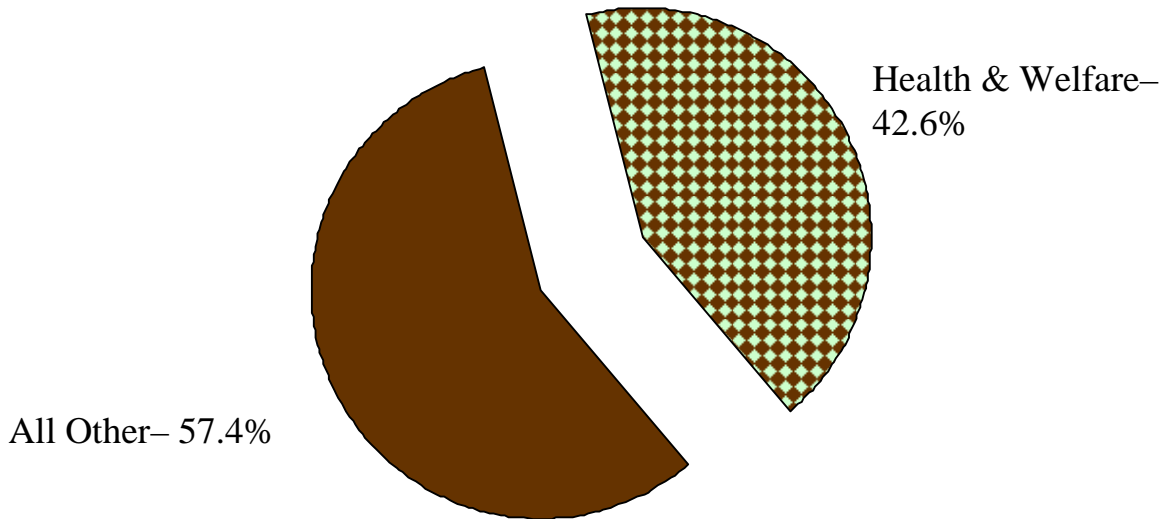


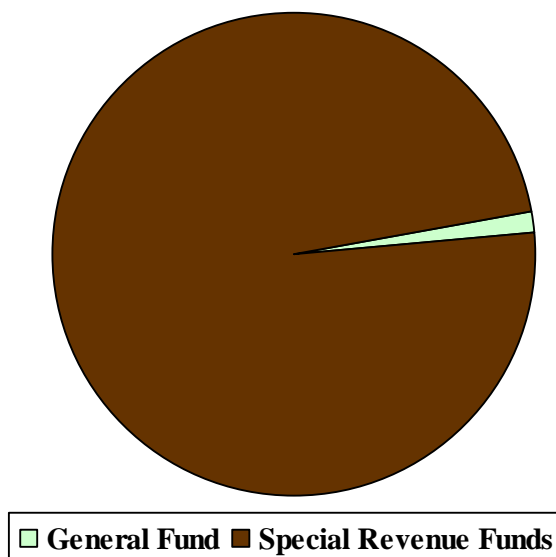
Health & Welfare Functions

Total County Budget Perspective *



* Graph does not reflect operating transfers out since these expenditures are already reflected in the other expenditure categories

Health & Welfare Expenditures by Fund Type



Function Statement

Public Act 2 of 1986 states that at least 50% of the State Convention Facility Tax revenue shall be used for substance abuse programs within the county from which the proceeds originated. It further states that these funds shall be distributed to the coordinating agency designated for that county pursuant to Section 6226 of Act No. 368 of the Public Health Code of 1978. For Ottawa County, that coordinating agency is Lakeshore Coordinating Council (LCC). The Council employs the following organizations to meet the substance abuse needs for Ottawa County:

Ottawa Alcoholic Rehabilitation, Inc. (OAR)	Ottawa County Family Independence Agency
Child and Family Services of West Michigan (CFSM)	Salvation Army
Crossroads Family Center/Catholic Social Services (Juvenile Detention)	

Resources

Personnel

No personnel has been allocated to this department.

Funding

	2005	2006	2007	2008 Current Year Estimated	2009 Adopted by Board
	Actual	Actual	Actual	Estimated	by Board
Revenues					
Intergovernmental Revenue	\$729,581	\$790,813	\$880,280	\$880,280	\$978,603
Total Revenues	\$729,581	\$790,813	\$880,280	\$880,280	\$978,603
Expenditures					
Personnel Services					
Supplies					
Other Services & Charges	\$259,190	\$285,593	\$414,801	\$440,140	\$421,302
Total Expenditures	\$259,190	\$285,593	\$414,801	\$440,140	\$421,302

Budget Highlights:

Although expenditures in total are not increasing, more of them are being charged through this department beginning in 2007.

Function Statement

The Medical Examiners program is responsible to investigate and attempt to establish the cause of all sudden and unexpected deaths within the County. The program in Ottawa County is staffed by a Chief Medical Examiner, ten Deputy Medical Examiners and a clerical support person (part-time). All of the examiner positions are paid on a retainer/per call basis. The Health Officer provides overall supervision and administrative support for the program.

Resources

Personnel

Position Name	2007 # of Positions	2008 # of Positions	2009 # of Positions	2009 Budgeted Salary
Record Processing Clk III	0.000	0.000	0.200	\$6,879

Funding

	2005 Actual	2006 Actual	2007 Actual	2008 Current Year Estimated	2009 Adopted by Board
Revenues					
Charges for Services	\$1,595	\$2,234	\$9,653	\$8,000	\$8,500
Total Revenues	\$1,595	\$2,234	\$9,653	\$8,000	\$8,500

Expenditures

Personnel Services	\$4,709	\$3,895	\$30,862	\$37,077	\$33,880
Supplies	\$210	\$731	\$129	\$750	\$750
Other Services & Charges	\$237,506	\$240,893	\$211,957	\$229,935	\$224,417
Total Expenditures	\$242,425	\$245,519	\$242,948	\$267,762	\$259,047

Budget Highlights:

The County began billing for cremation permits in 2007.

Function Statement

The Soldiers and Sailors Relief Commission receives burial claims from funeral directors and determines eligibility for the \$300 county burial allowance. Eligibility is determined by the time and length of service during an armed conflict, honorable discharge, and length of residency in Ottawa County. The commission also sees that government headstone markers are ordered and placed if desired by the veteran's spouse or family and that installation and financial restitution be made for the services rendered.

Resources

Personnel

No personnel has been allocated to this department.

Funding

	2005	2006	2007	2008	2009
	Actual	Actual	Actual	Current Year	Adopted
				Estimated	by Board
Expenditures					
Other Services & Charges	\$53,100	\$69,355	\$49,050	\$67,000	\$55,000
Total Expenditures	\$53,100	\$69,355	\$49,050	\$67,000	\$55,000

Function Statement

The Veteran's Affairs Committee, formerly the Soldiers and Sailors Relief Commission, consists of three to five members appointed by the Board of Commissioners of Ottawa County. This department records administrative department records administrative expenditures of the commission such as mileage and per diem costs.

Resources

Personnel

No personnel has been allocated to this department.

Funding

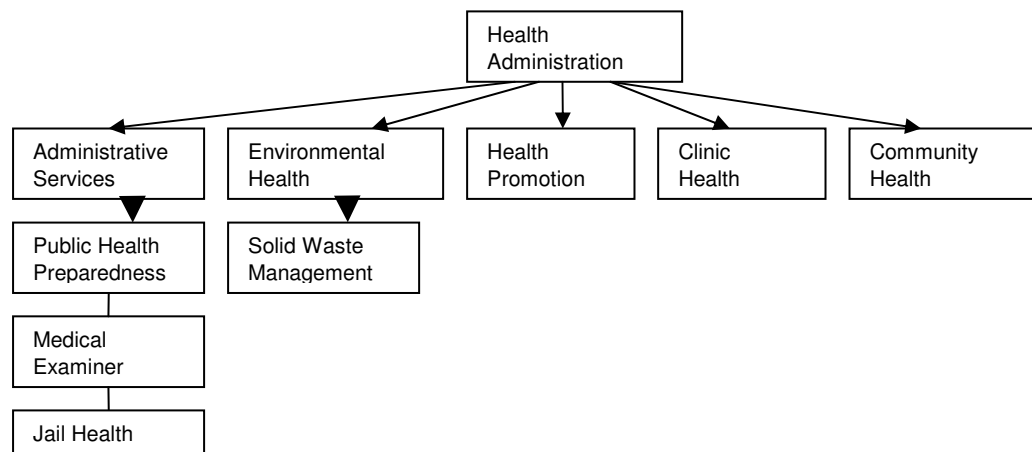
	2005	2006	2007	2008	2009
	Actual	Actual	Actual	Current Year	Adopted
				Estimated	by Board
Expenditures					
Supplies					
Other Services & Charges	\$58	\$1,724	\$49,050		
Total Expenditures	\$58	\$1,724	\$49,050		

Budget Highlights:

This department has been combined with the claims of the Veterans Affairs Committee reported in Special Revenue fund 2930 - Soldier's & Sailors Relief.

Public Health (2210) Fund Summary

The Ottawa County Health Department provides environmental health services, client health services in both a clinic setting and the field, public health preparedness, and health education services. Services supervised by Health administration but not accounted for in fund 2210 include Landfill Tipping fees (solid waste planning - fund 2272) and Substance Abuse which is recorded in the General Fund (1010-6300).



Budget Summary - Fund 2210

	2005 Actual	2006 Actual	2007 Actual	2008 Current Year Estimated	2009 Adopted by Board
Revenues					
Licenses & Permits	\$446,122	\$385,459	\$362,473	\$410,890	\$441,890
Intergovernmental Revenue	\$2,982,673	\$3,247,491	\$4,349,298	\$4,063,322	\$3,746,492
Charges for Services	\$871,643	\$833,085	\$791,491	\$829,859	\$913,012
Interest & Rents	\$750				
Other Revenue	\$155,441	\$181,925	\$213,200	\$212,093	\$166,926
Other Financing Sources	\$5,645,922	\$5,646,605	\$5,926,606	\$6,207,668	\$5,779,966
Total Revenues	\$10,102,551	\$10,294,565	\$11,643,068	\$11,723,832	\$11,048,286
Expenditures					
Personnel Services	\$6,114,817	\$6,012,194	\$6,374,870	\$6,645,758	\$6,693,952
Supplies	\$757,769	\$1,313,321	\$1,861,917	\$1,957,243	\$1,792,635
Other Services & Charges	\$2,635,540	\$2,788,217	\$2,972,677	\$3,097,869	\$2,756,699
Capital Outlay	\$26,653	\$119,118		\$282,664	
Other Financing Uses				\$1,300,000	
Total Expenditures	\$9,534,779	\$10,232,850	\$11,209,464	\$13,283,534	\$11,243,286

Budget Highlights

The Health Department's revenue from both the State of Michigan as well as the General Fund have been decreased. A reduction from the General Fund in the amount of \$195,000 includes anticipated vacancies throughout the year amounting to \$75,000, as well as a savings of \$120,000 based on historical estimates of employees opting not to take the County provided health insurance. Other reductions include building rent and a twenty percent reduction in conferences and travel. The 2009 Budget includes a reduction of 6.9 full-time employees as well as the elimination of services provided by the Coopersville office, with the exception of home-based services and immunizations. The Epidemiologist position and associated expenses have been eliminated as has the Fluoride mouth rinse program for school age children. The Substance Abuse Prevention and County Health Assessment programs have also been reduced to balance the 2009 Budget.

Function Statement

The epidemiology division of the Ottawa County Health Department is responsible for defining the causes and distribution of diseases within Ottawa County. This division's activities are directed towards strengthening disease surveillance practices (that enhance disease identification, prevention and control), monitoring the community health status, and providing Ottawa County health data to health providers and the community.

Mission Statement

Analyze the causes and distribution of disease in order to control their course and protect the community.

Goal: Determine the current health status of Ottawa County residents.

Objective: Collect and analyze Ottawa County data on the 10 leading causes of mortality (national)

Measure: Data collected on 100% of the 10 leading causes of mortality

Objective: Coordinate, analyze and report the Youth Assessment survey

Measure: Youth Assessment survey report complete

Objective: Coordinate, analyze and report the Behavioral Risk Factor Survey (BFRS)

Measure: BFRS report complete

Objective: Coordinate, analyze and develop the report for collected Body Mass Index (BMI) data

Measure: BMI report complete

Objective: Develop a project work plan for the Community Health Profile (to be published in 2009)

Measure: Work plan complete

Objective: Develop process for updating data for the Community Health Profile (to be published in 2009)

Measure: Process complete

Goal: Integrate and enhance existing disease surveillance systems in Ottawa County to detect, monitor, evaluate and report public health threats.

Objective: Promote and evaluate the use of the Michigan Disease Surveillance System (MDSS) by Ottawa County medical providers as a mechanism for disease reporting by March 2008

Measure: Evaluate the number of medical providers using the MDSS system

Measure: Develop plan to increase the use of the MDSS

Objective: Develop plan to promote and evaluate the use of the state influenza sentinel provider program by Ottawa County medical providers

Measure: Plan/study complete

Objective: Collaborate with Medical Director and applicable Department programs in the analysis and modeling of disease and public health threats

Measure: # of program partnerships established

Measure: % of Department programs utilizing epidemiological service

Goal: To improve communication of Ottawa County health data to the human services community for planning and promoting health in the community.

Objective: To use and maintain appropriate statistical analysis technology and methods to interpret and communicate data through October 2008

Measure: Maintain appropriate epidemiological/statistical modeling software

Measure: Review epidemiological data collection sites daily

Measure: Identify local surges in communicable disease within three days

Objective: Provide 100% accessibility of all current Ottawa County health data reports to the human services community and the public

Measure: % of all current year health data reports posted on the website

Objective: Advise health department staff of emerging public health issues

Measure: Develop a communication mechanism to distribute information internally

Objective: Provide analytical and data support to managers and supervisors for program development, integration and quality improvement

Measure: % of all current year health data reports provided to health department managers and supervisors

Measure: Assist with development of department, and program goals and objectives

Objective: Assist in the development of quarterly data watch reports

Measure: Four data watch reports completed

Measure: # Data Watch reports distributed

Objective: Survey recipients of Data Watch for feedback regarding quality and quantity of materials

Measure: Survey tool developed

Measure: % reporting positive response

Objective: Provide data analysis and planning support for Ottawa County Human Services Coordinating Council (OCHSCC),
Access to Healthcare Committee

Measure: Report of area health trends related to healthcare access

Measure: Provide research data to committee as requested

Measures:	2006	2007	2008 Estimated	2009 Projected
<i>Output:</i>				
# of Ottawa County health data reports completed and posted on the website (current year)	0	57	20	20
# of health data reports sent to the human services community	3 (estimate)	2	4	4
# of Youth Assessment survey report complete-(biannual)	N/A	1	N/A	1
# of Behavioral Risk Factor report complete-(every 5 yrs)	N/A	1	N/A	N/A
# of BMI data report complete-(biannual)	N/A	1	N/A	1
# Quarterly Data Watch Reports distributed	350	350	350	350
# of HD program partnerships	N/A	6	6	0
# of monthly health data reports posted to website	10	12	12	12
<i>Efficiency:</i>				
% Review epi data daily/report monthly	100%	100%	100%	100%
% complete monthly report posted to website	83.3%	100%	100%	100%
% data reports on website	N/A	75%	75%	75%
% health reports provided to HD staff	N/A	75%	75%	75%
% Data Watch reports completed quarterly	25%	75%	100%	100%
<i>Outcome:</i>				
% of all surges in the incidence of CD identified within 3 days	100%	100%	100%	100%
% HD programs utilizing epi services	N/A	N/A	75%	75%
% reporting positive response re: Data Watch	N/A	N/A	N/A	N/A

Resources

Personnel

Position Name	2007 # of Positions	2008 # of Positions	2009 # of Positions	2009 Budgeted Salary
Health Officer/ Administrator	1.000	1.000	1.000	\$104,247
Epidemiologist *	1.000	1.000	1.000	\$0
Assistant Health Administrator	1.000	1.000	1.000	\$71,173
Marketing Specialist	1.000	1.000	1.000	\$57,046
Administrative Secretary	1.000	1.000	1.000	\$41,297
Senior Accountant	0.500	0.500	1.000	\$62,247
Accountant I	1.000	1.000	1.000	\$47,251
Programmer/ Analyst	1.000	1.000	1.000	\$56,640
PC Support Specialist	1.000	1.000	1.000	\$47,251
Records Processing Clerk III	1.300	1.300	0.800	\$27,516
Medical Director	1.000	1.000	1.000	\$142,290
Account Clerk I	1.000	1.000	1.000	\$34,394
	11.800	11.800	11.800	\$691,352

*Position is not funded for 2009, but may be reinstated if future resources allow.

Funding

	2005 Actual	2006 Actual	2007 Actual	2008 Current Year Estimated	2009 Adopted by Board
Revenues					
Intergovernmental Revenue	\$1,104,846	\$1,052,394	\$1,123,626	\$1,123,626	\$1,123,626
Charges for Services	\$1,485	\$518	\$222	\$150	\$240
Interest & Rents	\$750				
Other Revenue		\$100	\$838	\$6,674	
Other Financing Sources	\$5,605,612	\$5,602,790	\$5,885,209	\$6,173,842	\$5,753,494
Total Revenues	\$6,712,693	\$6,655,802	\$7,009,895	\$7,304,292	\$6,877,360

Expenditures

Personnel Services	\$923,170	\$807,123	\$887,009	\$991,064	\$998,127
Supplies	\$34,367	\$27,439	\$24,823	\$26,986	\$20,572
Other Services & Charges	\$895,636	\$899,089	\$890,485	\$959,703	\$968,571
Capital Outlay		\$119,118		\$282,664	
Other Financing Uses				\$1,300,000	
Total Expenditures	\$1,853,173	\$1,852,769	\$1,802,317	\$3,560,417	\$1,987,270

Budget Highlights

In 2008 the County transferred \$1,300,000 to pay for building construction costs for Grand Haven and West Olive. Also in 2008 the Health department purchased new software as listed in capital outlay.

Function Statement

The Public Health Preparedness Program (PHP) focuses on strengthening the public health infrastructure to increase the ability to identify, respond to, and prevent acute threats to public health by collaborating and coordinating response strategies with local, regional, and state partners. PHP ensures the availability and accessibility to health care for Ottawa County residents, and the integration of public health and public and private medical capabilities with first responder systems during a public health emergency.

Mission Statement

Prepare for the health and safety of Ottawa County citizens during public health emergencies.

Goal: Enhance and maintain preparedness capacity to respond to public health emergencies

Objective: By February 28, 2009, update the Emergency Response Plan (ERP) to result in a 1% grade increase given by MDCH-OPHP based on thorough review of mandated plan and required objectives.

Measure: % given to the ERP by MDCH – OPHP (projected to be received by July 2009)

Objective: By February 28, 2009 update the SNS Plan (Mass Prophylaxis Plan) of the ERP to result in a 1% grade increase given by MDCH- OPHP based on thorough review of mandated plan and required objectives.

Measure: % given to the SNS Plan by MDCH – OPHP (project to be received by July 2009)

Objective: Increase participation in community preparedness by assisting medical partners in the development of plans, procedures, and protocols in regard to surge capacity, mass prophylaxis, and PH emergency planning

Measure: # of community outreach (surge capacity, mass prophylaxis) meetings held

Measure: % of positive participation in community outreach planning (surge capacity, mass prophylaxis)

Objective: Public Health Preparedness program will complete bi-annually mandated reports (Feb. and Aug.) for the Ottawa County Health Department ERP

Measure: % of completed reports submitted to MDCH bi-annually

Objective: Establish a Medical Reserve Corps in Ottawa County to enhance the community's existing healthcare, public health, and emergency response personnel needed to provide medical care and services during a public health emergency.

Measure: Maintain and Update plans for the MRC

Objective: Develop and maintain a detailed Continuity of Operations Plan (COOP) for the Ottawa County Health Department

Measure: Complete the work plan by July 2009

Objective: Assist in the development of a County Government COOP plan

Measure: First draft work plan complete by July 2009

Goal: Identify urgent health care needs for populations of Long Term Care Nursing Facilities in Ottawa County

Objective: Develop an assessment tool to assist in the recognition of urgent health care needs during an emergency

Measure: Completion of assessment tool by July 30, 2009

Objective: Meet with each long term care nursing facility to determine urgent health care needs during emergencies

Measure: % of long term care nursing facilities that have met with OCHD-PHP

Objective: Collaborate with Emergency Management Division and applicable emergency response programs in the assessment of urgent health care needs of long term care facilities

Measure: # of program partnerships established

Objective: Educate and survey long term care facilities for interest in Push out Drug Partner Plan

Measure: # of interested long term care facilities

Goal: Improve timeliness and accuracy of communication regarding the threat of public health emergencies

Objective: Implement bi-annual testing mechanisms (Feb. and Aug.) for communication technologies regarding emergency response

Measure: # of tests completed for each communication technology device (aka: HAN, 800 MHz)

Measure: % of response rate achieved on technology testing

Objective: Establish Public Information Officer (PIO) communication workgroup with community partners regarding methods for communication during a crisis situation.

Measure: # of PIO communication meetings held

Measure: % of workgroup members that attend PIO communication workgroup meetings

Objective: By February 28, 2009 update the Crisis Emergency Risk Communication (CERC) section of the ERP to result in maintaining a grade of 100% given by MDCH- OPHP

Measure: % given to the CERC Section of ERP by MDCH – OPHP (projected to be received by June 2009)

Goal: Educate and exercise response to Public Health Emergencies

Objective: Facilitate the development of exercises with state, local, and regional partners to test jurisdictional support and response to Public Health Emergencies

Measure: % of people whose knowledge is increased through the participation in OCHD facilitated exercises

Measure: Evaluation of OCHD facilitated exercises

Measure: Completion of state mandated reports and corrective action plans (OCHD facilitated)

Objective: Develop and implement an online training utilizing the Lotus Notes system (Front Page)

Measure: Implementation of an online training plan

Measure: # of trainings established online for Public Health Preparedness

Measure: # of people trained online

Objective: Facilitate the development of trainings to increase the knowledge of internal and external stakeholders on OCHD emergency policies and procedures

Measure: # of trainings offered to internal and external stakeholders

Measure: # of people trained

Measure: % of internal and external stakeholders whose knowledge increased through training on public health preparedness

Objective: Develop and Implement a Medical Reserve Corps training to increase awareness and participation in the newly established Ottawa County Medical Reserve Corps (MRC)

Measure: # of trainings held in regard to the Medical Reserve Corps

Measure: % of people whose knowledge is increased through the participation in Medical Reserve Corps trainings

Measure: # of registered members in the Ottawa County MRC/MI Volunteer Registry

Measure: # of events/fairs attended to distribute marketing tools in regard to Medical Reserve Corps

Objective: Participate in local, regional, and state exercises to test Ottawa County response to emergencies

Measure: # of exercises participated in by the EPC and CERC positions

Measure: Completion of federal and state mandated reports and corrective action plans in regard to external exercises participated in

Goal: Assist in the maintenance of Pandemic Influenza planning in Ottawa County

Objective: Maintain/Increase community partnerships in regard to the Pandemic Influenza coalition and workgroups

Measure: # of meetings held by each workgroup in regard to Pandemic Influenza Planning

Measure: % of participating community members that attend the Pandemic Influenza meetings

Objective: Increase community awareness on the threat of a pandemic and the preventative strategies

Measure: # of website hits on the Influenza webpage at www.miOttawa.org

Measure: # of events/fairs attended to distribute marketing tools in regard to Pandemic Influenza planning

Objective: Education of community partners and Ottawa county residents regarding Pandemic Influenza

Measure: # presentations held (Pandemic Influenza Presentations)

Measures:	2006	2007	2008 Estimated	2009 Projected
<i>Output:</i>				
# of community outreach (surge capacity, mass prophylaxis) meetings held	4	6	10	10
# of tests completed for each communication technology device (aka: HAN, 800 MHZ)	1 per quarter per technology device	1 per quarter per device 1 weekly – 800 MHz	bi-annually per device 1 weekly – 800 MHz	bi-annually per device 1 weekly – 800 MHz
% Completion of state mandated reports and corrective action	100%	100%	100%	100%
# of staff trained online	N/A	5	5	10
# of trainings offered to internal and external stakeholders	6	5	10	5
# of trainings held in regard to the Medical Reserve Corps(dependant on recruitment #s)	N/A	N/A	Developing a Plan	2
# of exercises participated in by the EPC and CERC positions	5	6	5	5
#Completion of Federal and State mandated reports and corrective action plans in regard to exercises participated in (external)	2	2	2	2
# of meetings held by each workgroup in regard to Pandemic Influenza Planning	9	12	10	10
# of events/fairs attended to distribute marketing tools in regard to Pandemic Influenza planning	20	10	12	10
# presentations held (Pandemic Influenza Presentations)	20	9	6	6

Measures:	2006	2007	2008 Estimated	2009 Projected
# of PIO communication meetings held	N/A	4	4	4
% of HD COOP plan complete	N/A	N/A	50	100%
% Completion of long term care facility assessment tool	N/A	N/A	N/A	100%
Efficiency:				
% of positive participation in community outreach planning (surge capacity, mass prophylaxis)	N/A	50%	65%	75%
% of response rate achieved on technology testing	85%	85%	90%	95%
% of members that attend PIO communication workgroup meetings	N/A	85%	90%	95%
% given to the CERC Section of ERP by MDCH – OPHP (projected to be received by June 2008)	97%	100%	100%	100%
Evaluation of OCHD facilitated exercise (jurisdictional support)	N/A	5	5	5
% of invited community members that participate in Pandemic Influenza meetings	75%	75%	75%	75%
Average # of community members that participate in each PI meeting.	NA	NA	5	7
% of completed reports submitted to MDCH each quarter	100%	100%	100%	100%
Outcome:				
% of people whose knowledge is increased through the participation in OCHD facilitate exercises	N/A	95%	95%	95%
% of people whose knowledge is increased through training on public health preparedness (internal and external stakeholders)	50%	100%	100%	100%
% of people whose knowledge is increased through the participation in Medical Reserve Corps trainings	N/A	Developing Plan	In Progress	75%
# of registered members in the Ottawa County MRC/MI Volunteer Registry	N/A	Developing Plan	In Progress	25
# of program partnerships established for planning with long term care	N/A	N/A	N/A	10
# of long term care facilities interested in being a Push Partner	N/A	N/A	N/A	20%
% given to the ERP by MDCH – OPHP (projected to be received by June 2008)	72%	98%	99%	100%
% given to the SNS Plan by MDCH – OPHP (project to be received by June 2008)	96%	92%	94%	95%
NOTE: The above percentages may increase and decrease depending on the newly established guidance each year from MDCH – OPHP and the CDC, as well as established guidelines.				

Resources					
Personnel					
Position Name	2007 # of Positions	2008 # of Positions	2009 # of Positions	2009 Budgeted Salary	
PH Preparedness Coordinator	1.000	1.000	1.000	\$56,780	
Prog. Coord-Crisis Communication	1.000	1.000	1.000	\$53,569	
	<u>2.000</u>	<u>2.000</u>	<u>2.000</u>	<u>\$110,349</u>	
Funding					
	2005 Actual	2006 Actual	2007 Actual	2008 Current Year Estimated	2009 Adopted by Board
Revenues					
Intergovernmental Revenue	\$259,271	\$285,931	\$306,388	\$286,354	\$181,882
Charges for Services					
Interest & Rents					
Other Revenue				\$5,000	
Total Revenues	<u>\$259,271</u>	<u>\$285,931</u>	<u>\$306,388</u>	<u>\$291,354</u>	<u>\$181,882</u>
Expenditures					
Personnel Services	\$128,563	\$134,519	\$160,862	\$153,187	\$159,950
Supplies	\$39,897	\$31,217	\$25,942	\$25,542	\$3,364
Other Services & Charges	\$40,438	\$95,971	\$72,535	\$60,235	\$17,922
Capital Outlay	\$26,653				
Total Expenditures	<u>\$235,551</u>	<u>\$261,707</u>	<u>\$259,339</u>	<u>\$238,964</u>	<u>\$181,236</u>

Function Statement

Programs and services of the Environmental Health Division (EH) are all aimed at protecting resident and visitor's health through control and prevention of environmental conditions that may endanger human health and safety. We are the defense system and response team. Our business as environmental health professionals is to identify, respond and prevent, or eliminate factors that create risk to human health by taking appropriate action based on professional judgment and accepted standards/methods. Environmental Health Specialists routinely inspect restaurants, school kitchens, vending locations, and temporary food service establishments for proper food storage, preparation, and handling to protect the public from food-borne illnesses. Public and private water supplies are regulated, evaluated, and sampled to eliminate the risks of water-borne disease and toxic exposure. Through soil evaluations, issuance of permits and inspections of new on-site sewage disposal systems, the EH Specialists protect against illness and health hazards. The safety and sanitation of public swimming pools, spas, and bathing beaches are maintained through inspections and testing of water quality. Potential homebuyers are provided with results of water quality and condition of sewage disposal systems through a unique real estate evaluation program. EH Specialists also inspect and evaluate mobile home parks, campgrounds, child care centers, adult and child foster homes, marinas, schools, new sub-divisions, and general nuisance complaints as well as provide educational and consultative services for the public.

Mission Statement

Environmental Health Services protect public health by assuring risks from exposure to environmental hazards are minimized through prevention, identification, and response. Hazards such as unsafe food, contaminated drinking water, polluted surface water, and hazardous materials seriously threaten the health of Ottawa County residents and visitors. It is the mission of the Environmental Health Services team to address those threats by providing State and locally mandated programs in an efficient and effective manner.

ENVIRONMENTAL HEALTH – ON-SITE

Goal: Protect the safety of on-site drinking water supplies

Objective: Continue to operate private and non-community public water supply protection programs in accordance with State of Michigan and Ottawa County requirements

Measure: Michigan Department of Environmental Quality water supply program evaluations

Measure: # of groundwater water supply systems inspected prior to real estate transfers

Objective: Continue to monitor and map areas of impaired groundwater quality and quantity

Measure: Areas of impaired groundwater quality and quantity identified and mapped

Goal: Ensure the safe disposal of sewage from homes and businesses served by on-site wastewater disposal systems

Objective: Continue to meet or exceed the State of Michigan's minimum program requirements for residential and commercial on-site wastewater disposal

Measure: 100 % compliance with State of Michigan's program requirements

Measure: # of wastewater disposal systems inspected prior to real estate transfer

Measure: # of complaints received and resolved regarding illegal wastewater disposal

Measure: # of new and repair wastewater disposal systems permits issued

Goal: Prevent exposure to unsafe surface and/or swimming waters

Objective: Collect water samples at public beaches on a weekly schedule between Memorial Day and Labor Day and issue "No Swim" advisories as needed

Measure: # of water samples collected and tested

Measure: # of times advisories were issued when E. coli levels exceeded acceptable limits.

Measure: # of times advisories were issued due to sewage overflows.

Objective: Provide swimming pool program in accordance with State Law.

Measure: 100 % of public swimming pools will be inspected annually

Measure: # of closing/correction orders issued to public swimming pools

Goal: Prevent exposure to health hazards in various shelter environments

Objective: Maintain inspection schedule for all permanent and temporary campgrounds, and issue correction orders as needed

Measure: 100% of permanent and temporary campgrounds will be inspected annually.

Measure: # of correction orders for permanent and temporary campgrounds

Objective: Increase testing for residential radon and lead levels

Measure: # of homes investigated for lead

Measure: # of homes tested for radon

Goal: Assess the unmet Environmental Health needs of Ottawa County

Objective: Conduct the Protocol for Assessing Community Excellence in Environmental Health

Measure: Completion of assessment and report

Performance Measures:	2006	2007	2008 Estimated	2009 Projected
Output:				
<i># of Sewage Disposal System Permits issued for new construction</i>	291	234	275	200
<i># of Sewage Disposal System Permits issued for repair/replacements at existing homes</i>	196	229	200	275
<i># of Vacant Property Evaluations completed for future development</i>	268	129	275	129
<i># of New and Replacement Well Permits issued</i>	429	320	425	375
<i># of Wastewater Disposal Systems inspected prior to real estate transfers</i>	883	728	880	850
<i># of Groundwater Supply Systems (wells) inspected prior to real estate transfers</i>	465	453	460	460
<i># of regulated Type II Water Supplies monitored</i>	223	219	225	220
<i># of Public Swimming Pools licensed and inspected</i>	129	136	135	140
<i># of Public Beaches sampled weekly during the Summer</i>	17	17	17	17
<i># of Campgrounds licensed and inspected</i>	23	22	23	23
<i># of homes tested for Radon</i>	263	459	400	400
<i># of Lead Poisoning investigations</i>	5	1	5	5
<i># of Animal specimens submitted for Rabies Testing</i>	17	39	35	35
<i># of Septage Hauling Vehicles inspected</i>	15	17	17	17
Efficiency:				
<i>% of Water and Wastewater Permits issued in accordance with County and State requirements</i>	100%	100%	100%	100%
<i>% of Type II facilities, Swimming Pools, Beaches, Campgrounds, and Septage Hauling Trucks inspected in accordance with State Requirements</i>	100%	100%	100%	100%
<i>% of Lead Investigations conducted by certified personnel</i>	100%	100%	100%	100%
<i>% of Customers reporting satisfactory experience with Environmental Health Services</i>	N/A	N/A	90%	90%
Outcome:				
<i># of new Gallons of Wastewater properly handled and disposed of in an environmentally safe system</i>	47,796,750	38,434,500	45,168,750	32,850,000
<i># of Gallons of Wastewater from existing failing systems which were corrected</i>	32,193,000	37,613,250	32,850,000	45,168,750
<i># of New Home Owners provided with information about and/or protection from faulty septic systems</i>	883	728	880	880
<i># of New Home Owners provided with information about and/or protection from unsafe water supplies</i>	465	453	460	460
<i># of Homes and Businesses provided with safe drinking water</i>	652	543	650	600
<i># of Reported Injuries or Fatalities at licensed pools or campgrounds resulting from non-compliant Environmental Health factors</i>	0	0	0	0
<i># of times public was protected from contaminated swimming water at public beaches</i>	13	6	14	10
<i># of Children protected from further adverse effects of lead poisoning</i>	5	1	10	5

ENVIRONMENTAL HEALTH – FOOD SERVICE SANITATION

Goal: Reduce the risk of food borne illnesses in food service establishments

Objective: Continue to meet or exceed the State of Michigan's minimum program requirements for a local health department food service sanitation program

Measure: 100 % of State of Michigan's minimum program requirements will be met for food sanitation.

Objective: Partner with food service establishments with persistent or emerging problems to offer solutions by way of risk control plans and standard operating procedures

Measure: Risk factors for foodborne illness will be reduced

Goal: Improve the level of food safety knowledge among the food service community

Objective: Provide monthly "Leading the Way to Food Safety" training sessions for food service employees

Measure: 90 % of session participants will report improved understanding of food sanitation on their program evaluations

Objective: Produce and distribute semi-annual "FOOD WRAP" newsletter

Measure: # of FOOD WRAP newsletters distributed

Objective: Create/refine an interactive basic food service sanitation training module on the County website

Measure: # of hits to food service training module

Performance Measures:	2006	2007	2008 Estimated	2009 Projected
Output:				
<i># of Fixed Food Establishment Inspections</i>	1,121	1,123	1,125	1,125
<i># of Vending Machine and STFU Inspections</i>	105	92	92	92
<i># of Temporary Food Establishment Inspections</i>	235	222	220	220
<i># of Re-inspections Conducted</i>	709	556	550	550
<i># of Plans Reviewed</i>	43	32	30	30
<i># of Complaints Investigated</i>	61	58	55	55
<i># of Foodborne Illness Investigations</i>	15	28	20	20
<i># of Enforcement Actions Taken</i>	119	134	120	120
<i># of Foodservice Employees Attending "Leading the Way to Food Safety" training</i>	593	393	350	350
<i># of School Concession Personnel Attending Person In Charge Training</i>	51	55	55	55
<i># of FOOD WRAP letters produced</i>	2	1	2	2
<i># of FOOD WRAP letters distributed</i>	1,100	639	1,200	1,200
Efficiency:				
<i>% of Facilities receiving required inspections</i>	99%	100%	100%	100%
<i>% of Facilities receiving re-inspections</i>	63%	49%	50%	50%
<i>% of Michigan Program Requirements met</i>	100%	100%	100%	100%
<i>% increase in attendance of our free training seminars for food service workers</i>	54%	-30%	50%	50%
<i># of attendees for free training seminars for food service workers</i>	695	448	495	450
<i>% change in Enforcement Actions</i>	59%	12%	36%	10%
Outcome:				
<i>% decrease in Overall Critical Violations</i>	9%	.2%	9.4%	5%
<i>Decrease in # of confirmed Foodborne Illness Outbreaks</i>	2	1	1	0
<i># of confirmed foodborne illness outbreaks</i>	1	1	0	0
<i>% of satisfied FOOD WRAP readers</i>	N/A	N/A	100%	100%
<i>% of food training participants successfully passing the test.</i>	91%	90%	95%	90%

Resources

Personnel

Position Name	2007 # of Positions	2008 # of Positions	2009 # of Positions	2009 Budgeted Salary
Records Processing Clerk II	2.800	2.800	2.600	\$79,607
Records Processing Clerk III	0.500	0.500	0.000	\$0
Environmental Health Manager	0.780	0.780	0.780	\$55,179
Team Supervisor/UO	2.000	2.000	2.000	\$124,490
Senior Environmental Health Specialist	9.000	9.600	9.600	\$474,698
	<u>15.080</u>	<u>15.680</u>	<u>14.980</u>	<u>\$733,974</u>

Funding

	2005 Actual	2006 Actual	2007 Actual	2008 Current Year Estimated	2009 Adopted by Board
Revenues					
Licenses and Permits	\$446,122	\$385,459	\$362,473	\$410,890	\$441,890
Intergovernmental Revenue	\$104,724	\$88,581	\$73,091	\$85,430	\$79,200
Charges for Services	\$162,128	\$150,223	\$117,870	\$143,710	\$143,910
Other Revenue	\$15,829	\$15,325	\$38,205	\$37,300	\$40,560
Total Revenues	<u>\$728,803</u>	<u>\$639,588</u>	<u>\$591,639</u>	<u>\$677,330</u>	<u>\$705,560</u>

Expenditures

Personnel Services	\$892,460	\$843,947	\$936,365	\$1,060,106	\$1,077,739
Supplies	\$42,035	\$29,212	\$30,335	\$36,300	\$29,264
Other Services & Charges	\$186,592	\$188,862	\$183,225	\$198,020	\$161,945
Capital Outlay					
Total Expenditures	<u>\$1,121,087</u>	<u>\$1,062,021</u>	<u>\$1,149,925</u>	<u>\$1,294,426</u>	<u>\$1,268,948</u>

Function Statement

Community Health Services provides quality support, education and prevention programs to families, children and pregnant women throughout Ottawa County. Services are provided at the four office locations, in clinic settings, in homes, in schools and in community locations. Services within this department include; Early-On, Hearing and Vision Screenings, Scoliosis Screenings/Childhood Obesity, Pre-natal care (PNC) and Enrollment, Children's Special Health Care Services, and Maternal and Infant Support Services.

Mission Statement

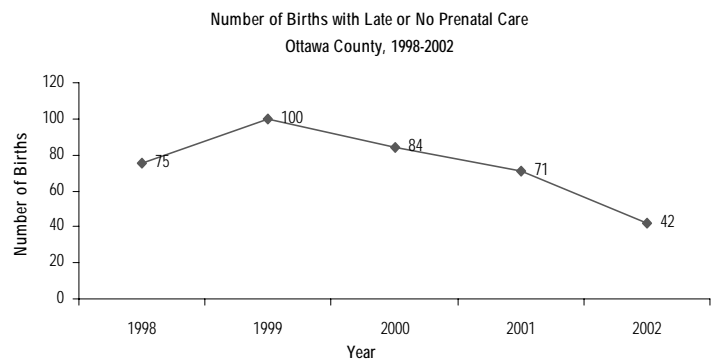
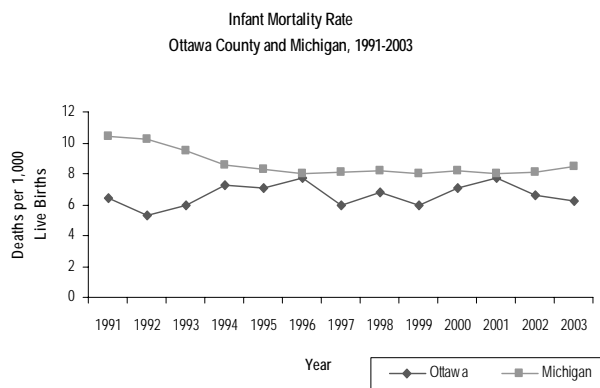
The mission of Community Health Services is to provide quality support, education, and prevention programs to families, children and pregnant women in Ottawa County.

GUIDING RESEARCH

There is extensive data to support the benefits of home-visitation programs for pregnant and parenting women. Research shows that women visited by nurses have fewer subsequent pregnancies and births, longer intervals between births of the first and second children, longer relationships with current partners, and, since the previous follow-up evaluation at 4.5 years, fewer months of using welfare and food stamps. Nurse-visited children are more likely to have been enrolled in formal out-of-home care between 2 and 4.5 years of age. Children visited by nurses demonstrate higher intellectual functioning and receptive vocabulary scores and fewer behavior problems in the borderline or clinical range. Nurse-visited children born to mothers with low levels of psychological resources have higher arithmetic achievement test scores and express less aggression and incoherence.

COMMUNITY HEALTH – MATERNAL HEALTH (MHP) AND INFANT HEALTH (IHP) PROGRAM (MIHP) AND FAMILY SERVICES

The Community Health Profile of 2006 indicated positive trends both in the infant mortality rate as well as prenatal care. Ottawa County's infant mortality rate is lower than the State as a whole, and more mothers are receiving prenatal care. The Community Health division is striving to maintain or improve these outcomes. Criteria for participation in the program require at least one risk factor that may pose a problem to delivering a healthy full-term baby.



Note: Family Service clients receive the same services as Maternal Infant Health Program (MIHP) clients. Only the payment mechanism is different. Therefore, MIHP goals and measures combine both Family Services and MIHP together.

Goal: To reduce incidence of infant mortality and morbidity

Objective: The MIHP program will promote regularly scheduled prenatal care for maternal clients one month from enrollment through the duration of the pregnancy and the IHP program will promote regularly scheduled infant medical care for MIHP infants one month from enrollment through the duration of the program

Measure: total numbers participating in Maternal Services and Infant Services

Measure: 100% of MHP participants will receive regularly scheduled prenatal care

Measure: 100% of IHP participants will receive regularly scheduled infant medical care

Measure: The infant mortality rate of MIHP clients (infant deaths/live births multiplied by 1,000) will be less than 8

Measure: The MIHP infant mortality rate will be equal to or less than the County's infant mortality rate (infant deaths/live births multiplied by 1,000)

Objective: Participants in the MIHP program who smoke will abstain from smoking around the infant

Measure: 50% of smokers will abstain from smoking around infant for duration of their MIHP involvement

Objective: Participants in the MIHP program with domestic violence (DV) issues will receive counseling or be referred to program within one month of staff awareness of the DV issue

Measure: 100% of MIHP participants with DV issues will be referred for DV counseling

Objective: MIHP participants will exhibit positive interaction with their baby during the duration of the program

Measure: 50% of participants will exhibit positive interaction with baby

Objective: Participants in the MIHP program will abstain from alcohol and drug use for the term of their pregnancy

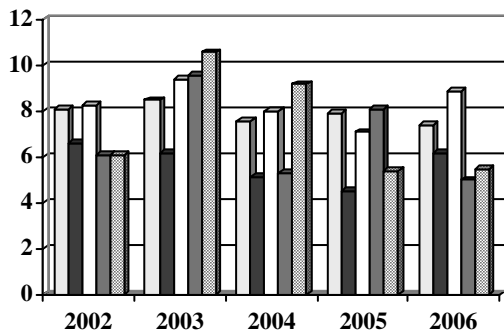
Measure: 50% of participants will abstain from substance use

Objective: Participants in the MIHP program with alcohol/drug abuse issues will be referred to a substance abuse program within one month of staff awareness of this issue

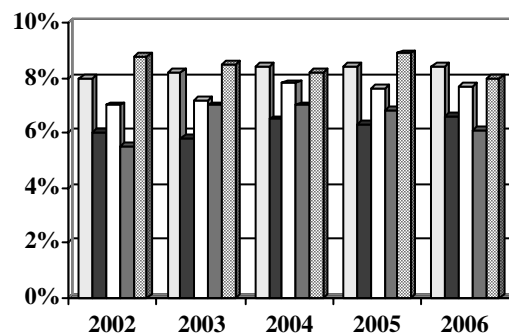
Measure: 100% of participants with substance abuse issues will be referred to substance abuse program within one month of staff awareness of the issue

Measures:	2006	2007	2008 estimated	2009 projected
Output:				
<i># of MHP visits provided</i>	1,222	1,206	1,100	1,100
<i># of IHP visits provided</i>	2,368	2,055	2,000	2,000
<i># of Family Service visits</i>	361	829	700	700
Efficiency:				
<i>% of MHP clients receiving regularly scheduled prenatal care</i>	98%	99%	99%	99%
<i>% of IHP clients receiving regularly scheduled infant medical care</i>	95%	99%	99%	99%
<i>% of MIHP clients identified as substance abusers who abstain from substance abuse during pregnancy</i>	50%	60%	65%	65%
<i>% of MIHP clients with identified substance abuse issues referred to substance abuse program within 1 month of enrollment</i>	50%	90%	90%	90%
<i>% of MIHP clients identified as smokers who abstain from smoking during pregnancy</i>	50%	80%	80%	80%
<i>% of MIHP clients identified as smokers abstaining from smoking around infant</i>	89%	80%	85%	85%
<i>% of MIHP clients with domestic violence issue who receive referral for counseling</i>	70%	88%	88%	88%
Outcome:				
<i>% of MIHP clients who exhibit positive interaction with baby</i>	89%	94%	94%	94%
<i>Infant mortality rate of MIHP clients</i>	<8	<8%	<8%	<8%
<i>% of newborns with a low birth weight</i>	<8%	<8%	<8%	<8%

Infant Mortality Rate



% of Newborns with Low Birth Weight



□ State ■ Ottawa □ Kent ■ Allegan ■ Muskegon

□ State ■ Ottawa □ Kent ■ Allegan ■ Muskegon

The preceding outcome benchmark graphs show that Ottawa County's birth statistics are in line with our neighboring counties and are significantly better than the State as a whole.

COMMUNITY HEALTH – CHILDHOOD OBESITY INITIATIVE – FIT FOR A KID – A Program under MIHP

GUIDING RESEARCH

The threat of obesity is greater than ever for US children and adolescents. Despite the recognition of the severe health and psychosocial damage done by childhood obesity, it remains low on the public agenda of important issues facing policy makers. Perhaps this is because the most serious health effects of obesity in today's children will not be seen for several decades. Action must be taken now to stem the epidemic of childhood obesity.

The Childhood Obesity initiative "Fit For a Kid" is a partnership activity between Community Health and Health Promotions. The goal of the initiative is to decrease childhood obesity and overweight. Objectives focus on gathering Body Mass Index (BMI) data from Ottawa County elementary students, providing education to parents and physicians and implementing targeted interventions to select groups.

Goal: Assess BMI status of children in Ottawa County

Objective: By September 30, 2013, the Obesity Task Force will coordinate screening of 1,000 third grade students in Ottawa County.

Measure: # of children screened.

Goal: Increase Ottawa County residents access to resources that promote healthy eating and physical activity in children.

Objective: By September 30, 2009, the Obesity Task Force will provide educational resources to 100% of OC pediatric and family practice physicians.

Measure: % of physicians who receive educational resources.

Objective: By September 30, 2008, the Obesity Task Force will provide educational information to 100% of OC parents whose children participate in the BMI screening.

Measure: % of parents who received educational information.

Objective: By September 30, 2009, the Obesity Task Force will expand the educational website to promote health eating and physical activity (via existing county web site) to OC parents.

Measure: # of "hits" to website.

Goal: Implement parent programs to address childhood overweight and obesity.

Objective: By September 30, 2009, the Maternal and Infant Health Program will implement a home based intervention program to 20% of eligible program participants.

Measure: Implementation of a home based intervention plan.

Objective: By September 30, 2009, Health Promotion will implement a pilot program for community intervention.

Measure: Implementation of a community intervention plan.

Measures:	2006	2007	2008 estimated	2009 projected
<i>Output:</i>				
<i># of children screened for BMI</i>	2,678	1000	1000	NA
<i>% of MIHP clients implementing a home-based intervention plan</i>	N/A	N/A	100%	100%
<i>Efficiency:</i>				
<i>% of physicians receiving info</i>	N/A	N/A	98%	98%
<i>% of parents whose children are screened receiving info</i>	N/A	100%	100%	100%

COMMUNITY HEALTH – CHILDRENS SPECIAL HEALTH CARE SERVICES (CSHCS)

GUIDING PRINCIPALS

Federal Maternal and Child Health Bureau 2010 goals are expected of all programs for children and youth with special health care needs across the country. Those goals are as follows:

1. Families of children with special health care needs will partner in decision making at all levels and will be satisfied with the services they receive.

2. All children with special health care needs will receive coordinated, ongoing, comprehensive care within a medical home.
3. All families of children with special health care needs will have adequate private and/or public insurance to pay for the services they need.
4. All children will be screened early and continuously for special health care needs.
5. Community-based service systems will be organized so families can use them easily.
6. All youth with special health care needs will receive the services necessary to make transitions to all aspects of adult life, including adult health care, work and independence.

Goal: Improve access to medical care for children with special health care needs who are enrolled in CSHCS

Objective: Promote CSHCS by providing program representation and advocacy to potential enrollees

Measure: # of new enrollments will increase

Objective: Eligible children with possible CSHCS qualifying conditions will be referred for diagnostic evaluation

Measure: # of suspected eligible children will be referred for diagnostic evaluation

Measure: % of those referred for diagnostic who are enrolled in program

Objective: Provide case management and /or care coordination for enrollees who require additional assistance

Measure: At least 2% of qualified enrollees will receive case management and/or care coordination

Measures:	2006	2007	2008 estimated	2009 projected
Output:				
<i># of new CSHCS enrollees</i>	150	193	100	150
Efficiency:				
<i># of suspected eligible children referred to diagnostic evaluation</i>	108	125	115	115
<i>% of CSHCS enrollees receiving case management and/or care coordination</i>	43%	54%	47%	50%
Outcome:				
<i>% of enrollees who feel CSHCS has increased access to healthcare</i>	N/A	97%	98%	98%

COMMUNITY HEALTH – EARLY ON

There is substantial research showing the benefits of early identification and interventions for children with suspended developmental disabilities. With as many as one in eight children having mental retardation and/or a developmental disability (Glascoe 1997), it is vital that delays and disabilities are identified as early as possible so these children receive the benefits of early detection and intervention.

Goal: Link children at risk for developmental disabilities to Early On services

Objective: Assess all referrals for possible developmental delays

Measure: 100% of referrals will be assessed for developmental delays within 3 weeks of first contact

Objective: Enroll children identified as at risk for developmental disabilities into the Early On program

Measure: 100% of children identified as at risk for developmental disabilities will be enrolled into the program

Objective: Refer enrollees found to have growth and development delays to appropriate services within 4 weeks of enrollment

Measure: 100% of enrollees will be referred to appropriate services within 4 weeks of enrollment

Measure: % referred receiving service

Measures:	2006	2007	2008 estimated	2009 projected
Output:				
<i># of Early On enrollees</i>	118	120	110	110
Efficiency:				
<i>% of children identified as at risk for developmental disabilities enrolled</i>	100%	100%	100%	100%
<i>% of referrals assessed within 3 weeks of first contact</i>	N/A	N/A	90%	90%

Measures:	2006	2007	2008 estimated	2009 projected
<i>% of Early On enrollees referred to appropriate services within 4 weeks of enrollment</i>	100%	100%	100%	100%
Outcome:				
<i>% of referrals that receive services</i>	N/A	100%	100%	100%

COMMUNITY HEALTH – VISION AND HEARING

Both vision and hearing are focus areas of Healthy People 2010, a broad-based collaborative effort among government, private, public, and nonprofit organizations, has set national disease prevention and health promotion objectives to be achieved by the end of this decade. The effort has two overarching goals: to increase the quality and length of healthy life and to eliminate health disparities.

Goal: Provide early identification of visual impairment in children 17 years and younger and refer as necessary for further assessment

Objective: Screen preschoolers, school aged children and special education children for visual impairments by October 1

Measure: 90% of Ottawa County children from preschool age to age 17 will be screened

Objective: Screen early childhood (under 3 yrs) children for visual impairments by October 1

Measure: 90% of eligible early childhood children will be screened

Objective: Refer children identified as having possible visual impairments for further medical treatment by October 1

Measure: 100% of identified children will be referred

Objective: Children who are referred will receive medical follow-up

Measure: 80% of referred children will receive medical follow-up

Goal: Increase identification of hearing loss or impairment in children and adolescents under age 17 years

Objective: Screen preschoolers, school aged children and special education children for hearing impairments by October 1

Measure: 90% of Ottawa County children from preschool age to age 17 will be screened

Objective: Screen early childhood (under 3 yrs) children for hearing impairments by October 1

Measure: 90% of eligible early childhood children will be screened

Objective: Refer children identified as having possible hearing impairments for further medical treatment by October 1

Measure: 100% of identified children will be referred

Objective: Children who are referred will receive medical follow-up

Measure: 80% of referred children will receive medical follow-up

Objective: Children who require prescriptive devices will receive devices.

Measure: 100% of children requiring prescriptive devices will receive them.

Measures:	2006	2007	2008 estimated	2009 projected
Output:				
<i># of children vision screened</i>	18,587	17,885	18,950	18,120
<i># of children vision referral</i>	1,227	1,087	1,150	1,110
<i># of children hearing screened</i>	14,931	14,517	14,750	13,970
<i># of children hearing referral</i>	410	383	450	400
Efficiency:				
<i>% of eligible children screened for vision and hearing impairments</i>	90%	90 %	90 %	90%
<i>% of children identified referred to appropriate services</i>	100%	100%	100%	100%
Outcome:				
<i>% of children receiving medical follow up</i>	N/A	97.4%	97.3%	97.3%
<i>% of referrals prescribed assistive devices</i>	N/A	98.1%	98%	98%

COMMUNITY HEALTH – PRENATAL CARE (PNC) and ENROLLMENT

There is significant research to support the importance of prenatal care. Prenatal care is associated with significant reductions in the number of infants delivered preterm or with low birth weight.

MiChild and MOMS are insurance programs offered through the Michigan Department of Community Health and Medicaid, respectively. MiChild is a health insurance program that is intended for uninsured children of Michigan's working families. MiChild services are provided by HMOs and other health care plans throughout Michigan. The Maternity Outpatient Medical Services (MOMS) program covers outpatient pregnancy-related services during the prenatal and postpartum period for eligible beneficiaries, as well as inpatient delivery-related services. Enrollment into either program helps facilitate early and on-going prenatal care.

Goal: Ensure that pregnant women receive prenatal care within the first trimester and at regular intervals during their pregnancy

Objective: Assist low income pregnant women in applying for Medicaid/MOMS programs

Measure: 100% of eligible clients will be assisted

Measure: # of clients assisted

Objective: Assist families in applying for health insurance coverage

Measure: 350 new families will be assisted in applying for health insurance coverage each year

Measure: % receiving health insurance

Objective: Assist families in acquiring a prenatal care medical provider

Measure: # of consultations

Measure: Assist 35 families in finding prenatal care medical providers

Measures:	2006	2007	2008 estimated	2009 projected
Output:				
<i># of new families assisted in finding prenatal care medical providers</i>	30	35	35	35
<i># of new families assisted in applying for health insurance coverage</i>	350	420	450	450
Efficiency:				
<i>% of eligible clients assisted in applying for Medicaid/MOMS programs</i>	100%	100%	100%	100%
<i>% of clients receiving appointment within one week</i>	N/A	97%	98%	98%
Outcome:				
<i>% of clients assisted that receive health care coverage</i>	N/A	90%	92%	92%

COMMUNITY SERVICES – CHILDREN’S ADVOCACY CENTER PARTNERSHIP

Community Services and Clinical Services work together to provide the Children's Advocacy Center (CAC) with approximately eight nursing days per month to assess, treat and investigate instances of child abuse in our community. The CAC is a child-focused, community-oriented, facility-based program in which representatives from many disciplines partner to discuss and make decisions about investigation, treatment and prosecution of child abuse cases. They also work to prevent further victimization of children.

Goal: Provide community outreach services to help reduce the instance and impact of child abuse within our community.

Objective: Provide the Children's Advocacy Center (CAC) with assistance to assess, treat and investigate instances of child abuse in our community.

Measure: # of nursing days provided per month (average)

Measure: % of requested assessments completed

Measures:	2006	2007	2008 estimated	2009 projected
Output:				
<i># days per month (average) provided</i>	N/A	6	6	6
Output:				
<i>% of requested assessments completed for CAC</i>	N/A	98%	98%	98%

Resources				
Personnel				
Position Name	2007 # of Positions	2008 # of Positions	2009 # of Positions	2009 Budgeted Salary
Records Processing Clerk III	2.450	2.700	2.000	\$67,105
Records Processing Clerk II	0.750	0.500	0.500	\$16,238
Health Technician	3.200	3.200	3.200	\$116,676
Community Health Nurse I	8.600	8.100	6.900	\$370,967
CSHCS Program Representative *	1.000	1.000	1.000	\$36,461
Community Health Services Manager	1.000	1.000	1.000	\$74,800
Registered Dietician	1.000	0.500	0.500	\$22,296
Scoliosis Screening & Hearing	1.000	1.000	1.000	\$36,461
Team Supervisor	2.000	2.000	2.000	\$124,491
Public Health Social Worker	4.200	3.200	2.400	\$120,924
	25.200	23.200	20.500	\$986,419

* Childrens Special Health Care Service Program Representative

Funding

	2005 Actual	2006 Actual	2007 Actual	2008 Current Year Estimated	2009 Adopted by Board
Revenues					
Intergovernmental Revenue	\$573,027	\$503,726	\$518,316	\$508,112	\$505,577
Charges for Services	\$175,761	\$193,370	\$164,340	\$159,874	\$190,715
Other Revenue	\$9,103	\$10,571	\$12,390	\$14,913	\$4,070
Other Financing Sources	\$40,310	\$43,815	\$41,397	\$33,826	\$26,472
Total Revenues	\$798,201	\$751,482	\$736,443	\$716,725	\$726,834
Expenditures					
Personnel Services	\$1,720,248	\$1,615,969	\$1,612,091	\$1,556,986	\$1,467,915
Supplies	\$165,057	\$150,744	\$145,029	\$152,377	\$136,140
Other Services & Charges	\$830,582	\$913,483	\$1,016,217	\$1,073,254	\$1,047,193
Capital Outlay					
Total Expenditures	\$2,715,887	\$2,680,196	\$2,773,337	\$2,782,617	\$2,651,248

Function Statement

Clinic Services are provided out of homes, schools, clinics and community locations. Programs included are: Communicable Disease, investigation and follow-up; Tuberculosis Program, evaluation, treatment, and education; Sexually Transmitted Disease (STD) Clinics, confidential testing, treatment and education on STDs and anonymous counseling and testing for HIV/AIDS; Immunization Services, vaccine administration, monitoring, and distribution; Travel Clinic, information for travel and immunizations; Family Planning Program, medical exams, pregnancy testing/counseling, prescription birth control, and education.

Mission Statement

Provide family planning, communicable disease and immunization services to underserved populations to reduce unplanned pregnancies and the occurrence and spread of communicable diseases in the County.

CLINICAL SERVICES - FAMILY PLANNING/STD

Offering affordable and confidential Family Planning services, especially to teens, is one of the ways the OCHD makes an impact on teen pregnancy.

Goal: Assure access to high quality clinical family planning services

Objective: Provide a comprehensive system of family planning services that includes education, prevention, contraception and treatment

Measure: 100% of Family Planning clients will be offered the Title X required services

Measure: 100% of Family Planning clients will be evaluated based on income according to a sliding fee schedule to improve affordability of Family Planning services

Goal: Reduce unintended pregnancy in Ottawa County

Objective: Maintain Family Planning enrollment of highest risk populations

Measure: 30% of the enrollees in the Family Planning Program will be teens

Measure: The number of clients utilizing Family Planning services between 19 and 44 years of age and at or below 185% of the poverty level will increase by 10%

Goal: Reduce Sexually Transmitted Infections (STI)

Objective: Educate all family planning and STD clients on the risk factors affecting STIs including domestic violence, sexual coercion, drugs and alcohol

Measure: % of OCHD STD clients who have Chlamydia

Measure: 100% of clients who tested positive for Chlamydia will be offered partner notification, education and treatment

Performance Measures:	2006	2007	2008 Estimated	2009 Projected
<i>Output:</i>				
# of Family Planning Clients	4,458	3,816	4,000	4,000
% of clients evaluated for sliding scale fee reductions	100%	100%	100%	100%
% of Chlamydia clients offered partner notification and treatment	100%	100%	100%	100%
# of STD Clients served	2,283	2,125	2,150	2,150
<i>Efficiency:</i>				
Networks will be utilized for each client to identify insurance	N/A	100%	100%	100%
# of applications submitted and evaluated for Plan First!	845	985	850	850
% of Title X requirements met by offering Contraceptive Methods, STI and Treatment, Health History and Exam, Teen Services w/ parental involvement, and Coercion Assessment	N/A	100%	100%	100%
% of teen enrollment (ages 19 and under) participating in the Family Planning program	32%	25%	28%	30%
# of Family Planning clients that are uninsured	2,953	3,208	3,300	3,300
# of Family Planning clients served at or below 200% poverty level	3,973	3,394	3,400	3,400
# of Family Planning medical exams (Dr/NP)	2,078	2,073	2,000	2,025
<i>Outcome:</i>				
% of Family Planning clients chose a contraceptive method who are not planning a pregnancy	N/A	100%	100%	100%
% of positive cases of Chlamydia	10%	9%	9%	9%

CLINICAL SERVICES – IMMUNIZATION/COMMUNICABLE DISEASE (CD) /TUBERCULOSIS (TB)

Goal: To protect the community against vaccine preventable disease

Objective: 90% Children 19-35 months old will be fully immunized

Measure: 90% of 19-35 months old clients of the Health Department will be fully immunized per the Michigan Care Improvement Registry (MCIR)

Objective: Provide education and support regarding immunization to health care providers as requested

Measure: Provide information as requested (brochure, data, direct training) to 100% of those requesting support.

Objective: To provide education and support to school/daycare/preschool personnel to assure that children enrolled in these programs will have consistently high rates of immunization

Measure: Daycare/preschools will report that $\geq 90\%$ of students are fully immunized per the MCIR/SIRS October report

Measure: School districts will report that $\geq 95\%$ of children are fully immunized per the MCIR/SIRS February report

Objective: To increase the percentage of fully immunized 19-35 month olds and 12-13 year olds in Ottawa County by providing immunization education to provider offices staff

Measure: 83% of 19-35 month olds in Ottawa County will be fully immunized per the MCIR

Measure: 60% of 11-12 year olds in Ottawa County will be fully immunized per the MCIR

Goal: To minimize the spread of communicable disease

Objective: Reported CD cases will be investigated to confirm the diagnosis

Measure: # of reported cases of pertussis will be less than 10

Measure: 100% of reported CD cases will be completed and filed with MDSS within 30 days

Measure: 100% of reported CD cases will be data entered into the MDSS within 1 business day

Measure: 100% of reported active TB cases will be investigated and diagnosed

Objective: Confirmed cases will receive prevention, education and treatment

Measure: 100% of confirmed CD/TB cases will receive prevention, education and treatment

Objective: 100% of reported “close contacts” will receive surveillance, education and treatment if necessary

Measure: 100% close contacts receive surveillance, education and treatment

Goal: To protect the traveling community against vaccine preventable disease and travel-related health risks

Objective: To provide vaccines and itinerary specific education to people traveling to developing countries for business, vacation, mission work, etc.

Measure: 100% of traveling clients of the OCHD will be offered the appropriate vaccine(s) and education

Measure: 100% travel clients receive recommended vaccinations

<i>Output:</i>	2006	2007	2008 Estimated	2009 Projected
<i># of OCHD Travel Immunization clients</i>	1,880	2,022	2,150	2,200
<i>% of appointment reminder post cards and phone calls made by the Immunization Team</i>	100%	100%	100%	100%
<i>Educate providers on the MICR as requested</i>	100%	100%	100%	100%
<i># of VFC provider offices educated on MICR</i>	17	17	15	16
<i>Provide quarterly(4) private provider Immunization trainings/workshops</i>	4	4	4	4
<i>Provide school/daycare in-services</i>	100%	100%	100%	100%
<i># of school/daycare in-services provided</i>	2	2	2	2
<i># of monthly recall letters for 7-35 month old OCHD clients sent out</i>	244	220	200	200
<i># of annual recall letters for all Ottawa County 19-35 month olds sent out</i>	659	605	512	475
Efficiency:				
<i>% of reported active TB cases investigated and diagnosed</i>	100%	100%	100%	100%
<i>% confirmed CD/TB cases entered into MDSS within 1 day</i>	100%	100%	100%	100%
<i>% of Reported CD cases completed and filed with MDSS within 30 days</i>	N/A	100%	100%	100%
<i>% of 19-35 month olds in Ottawa County fully immunized</i>	77%	83%	83%	84%

<i>Efficiency:</i>	2006	2007	2008 Estimated	2009 Projected
<i>% of 19-35 month olds clients of the Health Department fully immunized</i>	89%	88%	88%	89%
<i>% of 13-15 year olds in Ottawa County fully immunized</i>	N/A	NA	41%	45%
<i>% of school age children fully immunized</i>	99%	99%	99%	99%
<i>% of daycare/preschool children fully immunized</i>	97%	97%	97%	97%
<i>% travel clients offered recommended vaccinations</i>	N/A	100%	100%	100%
<i>Outcome:</i>				
<i># of Tuberculosis cases</i>	6	3	4	4
<i># of reported cases of pertussis</i>	8	5	5	5
<i>% of private providers benefiting from the training and stating they would recommend it to others</i>	N/A	100%	100%	100%
<i>% of confirmed CD/TB cases receiving education and treatment</i>	100%	100%	100%	100%
<i>% close contacts receiving education and treatment</i>	100%	100%	100%	100%
<i>% of travel client survey results indicated the education they received was beneficial</i>	N/A	100%	100%	100%

Resources

Personnel	2007	2008	2009	2009	
Position Name	# of Positions	# of Positions	# of Positions	Budgeted Salary	
Nurse Practitioner	0.500	0.700	1.200	\$80,375	
Administrative Assistant	0.000	0.000	1.000	\$39,727	
Team Supervisor	3.000	3.000	2.800	\$174,286	
Clinic Services Manager	1.000	1.000	1.000	\$70,148	
Records Processing Clerk II	13.250	13.250	11.500	\$355,555	
Community Health Nurse II	2.800	0.000	0.000	\$0	
Community Health Nurse I	10.100	12.800	12.100	\$640,735	
Health Technician	1.700	2.000	2.000	\$71,139	
Health Educator	0.500	0.000	0.000	\$0	
Licensed Practical Nurse	1.400	0.900	0.900	\$34,205	
	34.250	33.650	32.500	\$1,466,170	
Funding					
	2005 Actual	2006 Actual	2007 Actual	2008 Current Year Estimated	2009 Adopted by Board
Revenues					
Intergovernmental Revenue	\$752,498	\$1,108,091	\$2,042,509	\$1,816,426	\$1,711,481
Charges for Services	\$511,654	\$479,288	\$501,280	\$516,153	\$559,155
Other Revenue	\$75,996	\$62,532	\$25,925	\$21,206	\$20,600
Total Revenues	\$1,340,148	\$1,649,911	\$2,569,714	\$2,353,785	\$2,291,236
Expenditures					
Personnel Services	\$1,756,466	\$1,872,239	\$1,929,991	\$2,004,710	\$2,192,091
Supplies	\$369,591	\$925,962	\$1,523,825	\$1,587,409	\$1,497,749
Other Services & Charges	\$451,678	\$456,987	\$448,656	\$458,065	\$355,673
Total Expenditures	\$2,577,735	\$3,255,188	\$3,902,472	\$4,050,184	\$4,045,513

The Health Promotion Division of the Ottawa County Health Department strives to promote positive health behaviors that enable people to increase control over and improve their health. Health Promotion Services provides comprehensive prevention education programs, collaborative community project leadership, community health assessment, reproductive health education, substance abuse prevention, chronic disease prevention programs and oral health services.

Mission Statement

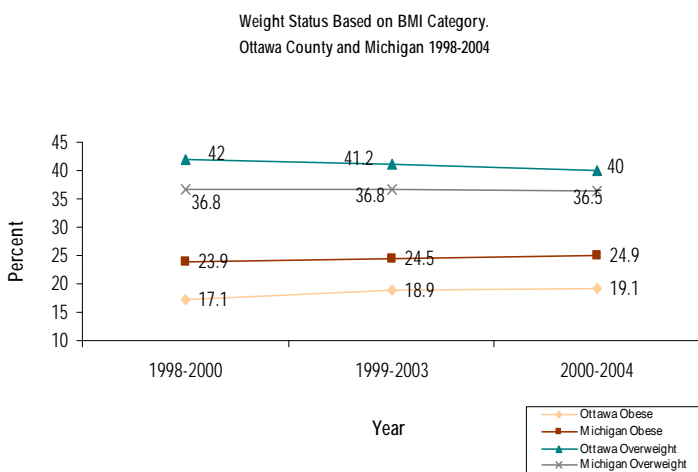
Health Promotion is committed to providing initiatives which create an environment that empowers Ottawa County residents to make healthy choices.

HEALTH PROMOTION-CHRONIC DISEASE PREVENTION PROGRAM

OTTAWA COUNTY COMMUNITY DATA

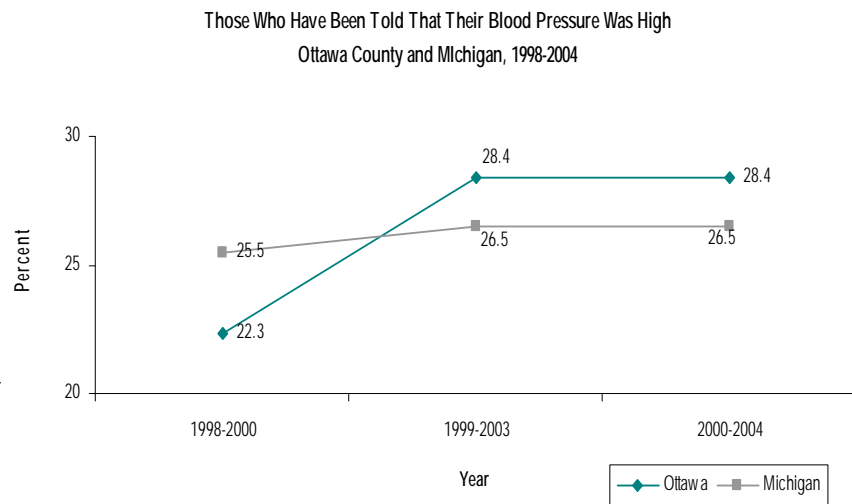
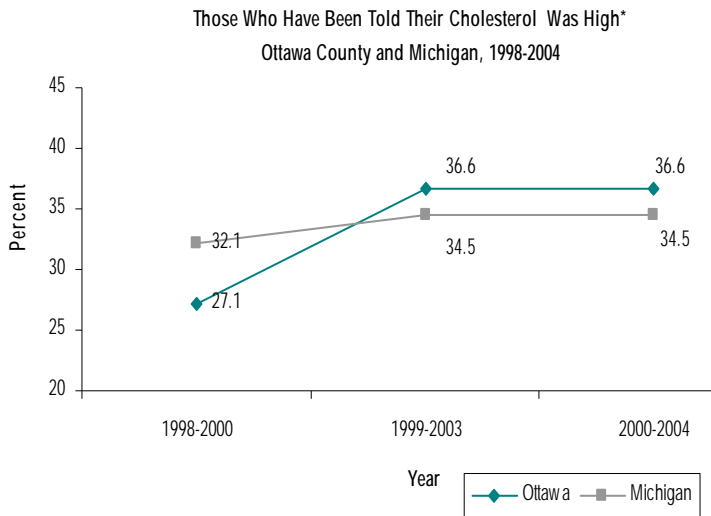
2005 OTTAWA COUNTY YOUTH ASSESSMENT SUVEY		
Risk Category	Behavior	% Agreement
Dietary Behavior	Ate less than 5 servings of fruits or vegetables per day	64.8%
	Drank soda 2 or more times on an average day	36.7%
Weight *	Were classified as overweight (self-reported)	81.5%
	Thought that they were overweight (self-reported)	26.4%
Physical Activity	Participated in vigorous physical activity for 20+ minutes on at least 3 of the past 7 days	71.2%
	Participated in moderate physical activity for 30+ minutes on at least 5 of the past 7 days	29.1%

The results from the Community Profile also identified the need for improvement in the areas of weight and physical activity.

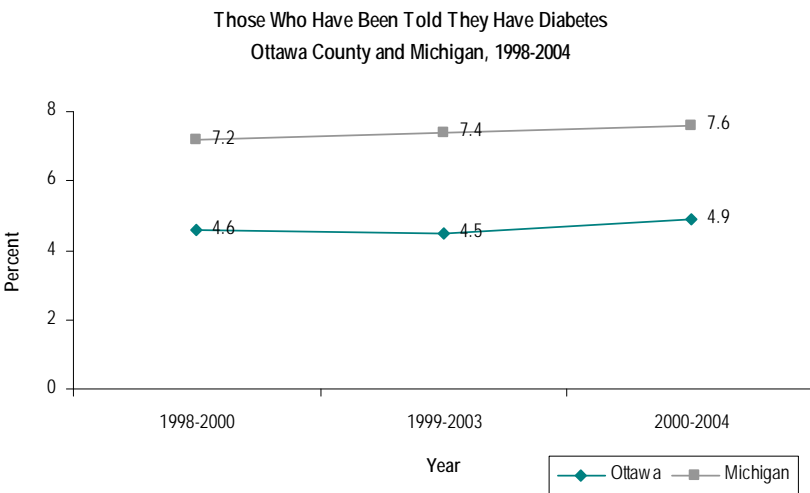


Although County residents are less likely to report no physical activity than the State as a whole, there is still room for significant improvement. 16% of County residents are estimated to get no physical exercise at all, and this is more likely in lower income residents.

Indicators for cardiovascular disease are also discouraging. Of the three main risk factors for cardiovascular disease - cholesterol, blood pressure, and diabetes - the rates in Ottawa County for high blood pressure and high cholesterol are above those of the State as a whole:



*Among respondents who reported having had their cholesterol checked.



Promoting regular physical activity and healthy eating and creating an environment that supports these behaviors are essential to addressing the problem.

While research to demonstrate the effectiveness of programs designed to increase access to healthier foods in communities is scant, there are early indications that these initiatives can produce positive outcomes.

Goal: Increase Ottawa County residents’ access to resources that promote healthy eating and physical activity.

Objective: By September 30, 2009, the wellness team will implement 100% of health promotion’s Fit for a Kid committee responsibilities.

Measure: % of responsibilities assigned to wellness that team carried out

Objective: By September 30, 2009, the wellness team will develop a community-based intervention to promote healthy eating and physical activity to families with young children in Ottawa County.

Measure: Community intervention pilot program developed

Objective: By September 30, 2009, the wellness team will implement a community-based intervention “pilot program” to promote healthy eating and physical activity to families with young children in Ottawa County.

Measure: Community intervention pilot program implemented

Objective: By September 30, 2009, the wellness team will develop a “Fit for a Kid” web page.

Measure: “Fit for a Kid” web page developed

Goal: Increase Ottawa County residents’ access to physical activity and healthy food choices.

Objective: By September 30, 2009, the wellness team will provide each Ottawa County Wellness Coalition Action Team (4 teams/quadrants) with \$1,000 seed money to implement an action item identified in community assessment results.

Measure: # of grants approved and distributed

Measure: # of action items implemented (goal of one per quadrant/ action team)

Objective: By September 30, 2009, the wellness team will assist in providing 2 initiatives to Ottawa County youth ages (6-18) to encourage physical activity and healthy eating.

Measure: # of initiatives implemented.

Measure: # of youth participating in initiatives promoting healthy eating and physical activity

Objective: By September 30, 2009, the wellness team will chair 12 Ottawa County Wellness Coalition meetings.

Measure: # of Coalition meetings chaired

Measure: A functional coalition

Objective: By September 30, 2009, the wellness team will chair two Ottawa County Wellness Coalition "Action Teams" meetings.

Measure: # of task force meetings chaired

Measure: # of functional action teams

Objective: By September 30, 2009, the wellness team will fulfill 100% of the Ottawa County Health Department's responsibilities in the Ottawa County Wellness Coalition strategic plan.

Measure: % OCHD responsibilities completed in the OCWC strategic plan

Objective: By September 30, 2009, the wellness team will create two GIS maps showing accessible healthy food options or physical activity for Ottawa County residents.

Measure: # of maps developed

Measure: # of action teams using maps to develop programs and strategies

Goal: To increase healthy environments in Ottawa County worksites.

Objective: By September 30, 2009, the wellness team will provide assistance to 5 businesses in Ottawa County in implementing their "Designing Healthy Environments at Work" action plans.

Measure: 5 businesses conducted DHEW assessment

Measure: 5 action plans implemented

Measure: % increase of policies and environmental changes implemented at worksites

Objective: By September 30, 2009, the wellness team will provide 250 resources to Ottawa County Worksites regarding healthy eating, physical activity and smoke-free environments.

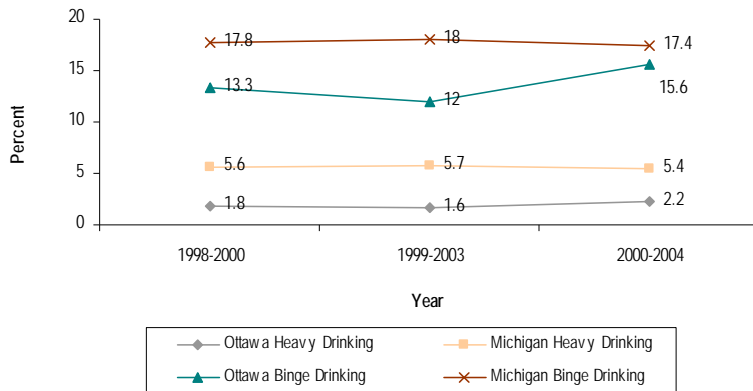
Measure: # of healthy worksite resources distributed

Performance Measures:	2006	2007	2008 Estimated	2009 Projected
Output:				
<i># of Fit for a Kid representatives</i>	0	0	3	1
<i># community based initiative regarding healthy eating and physical activity for families of young children</i>	0	0	0	1
<i>Develop Fit for a Kid web page</i>	0	0	0	Complete
<i># of action teams provided \$1,000 seed money</i>	N/A	N/A	N/A	4
<i># of healthy eating and physical activity initiatives provided to youth</i>	1	2	2	2
<i># of Coalition meetings chaired</i>	12	12	12	12
<i># of Action Teams chaired for the Ottawa County Wellness Coalition</i>	0	2	2	2
<i># of Ottawa County Wellness Coalition initiatives assisted</i>	N/A	21	21	15
<i># of maps showing accessible healthy food options or physical activity options created</i>	0	0	0	2
<i># of resources provided to worksites regarding healthy eating, physical activity and smoke-free environments.</i>	N/A	250	250	250
Efficiency:				
<i>% of Fit for a Kid responsibilities implemented per those developed</i>	N/A	N/A	100%	100%
Outcome:				
<i># of DHEW action plans implemented</i>	0	5	5	5
<i>% of Action teams using maps to develop strategies</i>	N/A	N/A	N/A	100%

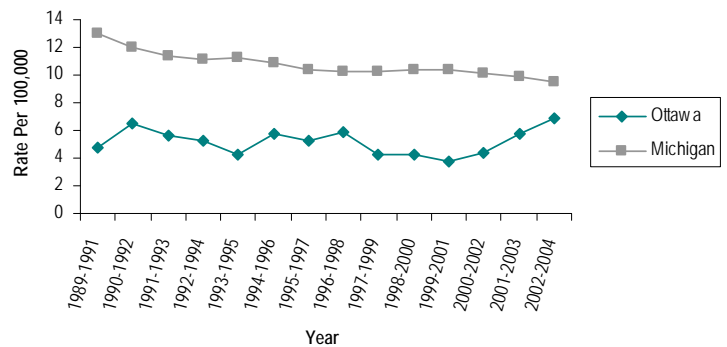
HEALTH PROMOTION-COMMUNITIES HELPING OTTAWA OBTAIN A SAFE (ALCOHOL) ENVIRONMENT (CHOOSE)

The results of the Community Health profile identified some disturbing trends in alcohol consumption in Ottawa County. While the state rate for reported binge drinking is decreasing slightly, there is a significant increase in binge drinking noted for Ottawa County residents. Not surprisingly, the liver disease death rate is also on the rise:

Heavy Drinking and Binge Drinking in the Past Month
Ottawa County and Michigan, 1998-2004



Liver Disease Age Adjusted Death Rates
Three Year Moving Averages
Ottawa County and Michigan, 1989-2004



Although it will take time to affect these measures, the programs and strategies listed below along with their intermediate outcome measures should result in improvement of the above problems in the long-run.

Research shows that multi-component interventions with community mobilization are effective in reducing alcohol impaired driving. The CHOOSE program is a multi-component, community based program that uses a set of environmental intervention including: community awareness, responsible beverage service, preventing underage alcohol access, enforcement and community mobilization.

Goal: Reduce alcohol related traffic crashes (auto, motorcycle, boat, ATV) by 2014.

Objective: By September 30, 2009, the substance abuse prevention staff will chair 2 Ottawa County CHOOSE coalition meetings.

Measure: # of CHOOSE coalition meetings chaired by SAP staff

Objective: By September 30, 2009, the substance abuse staff will chair 5 Drinking and Driving task force meetings.

Measure: # of Drinking and Driving task force meetings chaired by SAP staff

Objective: By September 30, 2009, the substance abuse staff will chair 5 Responsible Beverage Service task force meetings.

Measure: # of Responsible Beverage Service task force meetings chaired by SAP staff

Objective: By September 30, 2009, the substance abuse staff will chair 5 Youth Access task force meetings.

Measure: # of Youth Access task force meetings chaired by SAP staff

Objective: By September 30, 2010, the CHOOSE Drinking and Driving task force will increase the drinking and driving arrest rates in Ottawa County by 10%.

Measure: % increase in the reported # of arrests for OUIL, OWI, MIP, open receptacle by Local Police Dept.

Objective: By September 30, 2011, The CHOOSE Youth Access task force will decrease the % of minors who indicate parties as their number # 1 source for obtaining alcohol by 3% (43% to 40%)

Measure: % decrease of minors reporting parties as #1 source of alcohol by 2011

Objective: By September 30, 2009, the CHOOSE Responsible Beverage Service task force will increase by 5 (to 35) the number of on-site alcohol retail establishments in Ottawa County that have been TIPS trained.

Measure: # of on-site establishments that have been TIPS trained

Objective: By September 30, 2009, The CHOOSE Responsible Beverage Service task force will increase the number of on-site establishments with developed policies and procedures on correct serving practices from 10 to 20.

Measure: # of on-site establishments with serving practices policies and procedures

Objective: By September 30, 2009, The CHOOSE Responsible Beverage Services and Youth Access task forces will provide Responsible Beverage Service (RBS) trainings to 100% of off-site establishments requesting training.

Measure: % of off-site establishments requesting TIPS training that receive the training

Objective: By September 30, 2009, the CHOOSE Responsible Beverage Service and Youth Access task forces will provide RBS training to 100% of off-site alcohol establishments mandated to receive training.

Measure: % of off-site establishments mandated to receive TIPS training that receive the training

Objective: By September 30, 2009 The CHOOSE coalition will maintain compliance rates among OC alcohol retail establishments at 97%.

Measure: % compliance rate

Objective: By September 30, 2009, the CHOOSE Responsible Beverage Service task force will provide 3 concession trainings in Ottawa County.

Measure: # of concession trainings provided

Objective: By September 30, 2009, the substance abuse prevention (SAP) staff will chair 9 Regional LCC Collaborative Coalition meetings.

Measure: # of Regional LCC collaborative meetings chaired

Objective: By September 30, 2009, the SAP staff will chair 6 LCC Collaborative Coalition task force meetings.

Measure: # of LCC Collaborative Coalition task force meetings chaired

Objective: By September 30, 2009, the SAP staff will implement 100% of the OCHD's responsibilities of the LCC Collaborative Coalition strategic plan.

Measure: % of OCHD' responsibilities implemented for the LCC Collaborative Coalition strategic plan

Performance Measures:	2006	2007	2008 Estimated	2009 Projected
Output:				
<i># of sites for the Blood Alcohol Test (BAT) mobile</i>	0	4	4	4
<i># of media sources the "You Drink, You Drive, You Lose" is advertised</i>	0	5	5	5
<i>Implementation of the Mobile Eyes media campaign</i>	0	complete	complete	complete
<i># of locations for summer campaign advertising</i>	0	50	50	50
<i># of on-site TIPS trainings</i>	0	10	10	5
<i># of off site TIPS trainings</i>	0	5	5 establishments	100%
<i># of Safe Prom/Graduation packets delivered to hotels, alcohol/tobacco retailers, and limo services</i>		20 hotels 150 retailers 3 limo services	20 hotels 150 retailers 3 limo services	20 hotels 150 retailers 3 limo services
<i># of avenues used to market Fast 50</i>	0	4	4	4
<i>% of managers/servers of on-site alcohol establishments that have received TIPS training</i>	0	38%	38%	N/A
<i># of on-site alcohol retail establishments that have received TIPS training</i>	N/A	N/A	N/A	35
<i># of concession receiving TIPS training</i>	0	0	0	3
<i># of Regional LCC Collaborative Coalition meetings chaired</i>	0	0	0	9
<i># of regional LCC Collaborative coalition task force meetings chaired</i>	0	0	0	6
Efficiency:				
<i># of hours of visibility of the Blood Alcohol Test (BAT) mobile</i>	0	8	8	12
<i># of people who called the Mobile Eyes during the marketing time</i>	0	30	30	N/A
<i>% of positive TIPS training evaluations</i>	0	100%	100%	85%
<i>% positive evaluations of prom/graduation packet</i>	0	100%	100%	N/A
<i>% participants pass TIPS trainings</i>	0	100%	100%	85%
Outcome:				
<i>% increase in alcohol related arrests</i>	0	3%	3%	3%
<i># of establishments that Safe serving practice policies are adopted</i>	0	10	10	20
<i>% decrease of minors who indicate parties as their number 1 source of alcohol</i>	NA	3% (by 2011)	3% (by 2011)	3% (by 2011)
<i>% of OCHD responsibilities of the LCC</i>	0	0	0	100%

Performance Measures:	2006	2007	2008 Estimated	2009 Projected
<i>Collaborative coalition strategic plan implemented</i>				
<i>% increase in calls to law enforcement regarding alcohol related parties involving minors</i>	0	5%	5%	5%
<i>% compliance rate</i>	0	96%	97%	97%

HEALTH PROMOTION- SUBSTANCE ABUSE PREVENTION

Substance Abuse Prevention is being discontinued with the start of the 2009 budget. The following programs came under this heading: Strengthening Families Program (SFP), Project Towards No Drugs (Project TND), Students Against Destructive Decisions (SADD), and Peer Education Programs (PEP).

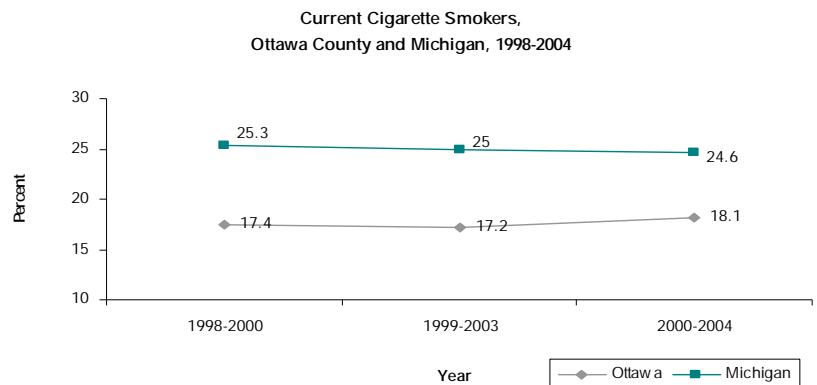
HEALTH PROMOTION-TOBACCO PREVENTION

The results of the Youth Assessment Survey below indicate that cigarettes are quite easy to access, and this results in Ottawa County youth experimenting with cigarettes at a young age.

2005 OTTAWA COUNTY YOUTH ASSESSMENT SUVEY		
Risk Category	Behavior	% Agreement
Tobacco Use	Ever smoked cigarettes	26.6%
	Reported age of onset of cigarette use before age 13	40.4%
	Felt it was very easy/sort of easy to access cigarettes	64.1%

Unfortunately, this early onset of tobacco use generally carries into young adulthood as indicated by the Community Health Survey:

In addition, although Ottawa County's percentage of cigarette smokers is lower than the State's, the rate has begun to increase. Consequently, it is important to develop programs that address it.



Based on research by the Task Force on Community Preventive Services (TFPCS), Ottawa County has adopted a three prong approach to address tobacco use.

1. Increasing the unit price for tobacco products, particularly through raising state and federal excise taxes
2. Developing extensive and extended mass media campaigns particularly when they are the centerpiece along with other strategies to decrease the effects of environmental tobacco smoke (ETS).
3. Developing laws and regulations to restrict or ban tobacco consumption in workplaces and general areas used by the public

Goal 1: Reduce the number of vendors in Ottawa County who sell tobacco to minors.

Objective: By June 30, 2009, conduct law enforcement compliance checks at 35% of the total identified retailers during the 1st, 2nd, and 3rd quarters of 2008/2009.

Measure: Increased # of retailers who did not sell tobacco to minors

Objective: By September 30, 2009, maintain law enforcement compliance checks with 15% of the retailers in any former target area(s) during each quarter of 2008/2009.

Measure: Increased # of retailers who did not sell tobacco to minors

Objective: By September 30, 2009, conduct law enforcement compliance checks at 100% of retailers in the target area(s) during the 4th quarter of 2008/2009.

Measure: Increased # of retailers who did not sell tobacco to minors

Objective: By September 30, 2009, tobacco prevention staff will conduct vendor education trainings each quarter with 100% of retailers who fail a compliance check.

Measure: Increased # of retailers who did not sell tobacco to minors

Objective: By September 30, 2009, tobacco prevention staff will complete a minimum of 14 vendor education trainings (10% of all County retailers).

Measure: Increased # of retailers who did not sell tobacco to minors

Objective: By September 30, 2009, tobacco prevention staff will implement 100% of changes and actions as defined by the Regional Collaborative Taskforce.

Measure: % OCHD responsibilities for the Regional Collaborative Taskforce completed

Goal: Reduce exposure to second-hand smoke in Ottawa County.

Objective: By September 30, 2009, tobacco prevention staff will respond to 100% of incoming complaints regarding noncompliance with the Ottawa County Indoor Air Regulation.

Measure: Increased compliance rates

Objective: By September 30, 2009, tobacco prevention staff will respond to 100% of requests for assistance with the Ottawa County Indoor Air Regulation and the implementation of smoke-free policy.

Measure: Increased compliance rates

Objective: By September 30, 2009, tobacco prevention staff will assist in the implementation of a smoke-free campus policy for all County properties.

Measure: Smoke-free campus policy implemented

Goal: Assist in the coordination of the implementation of the Smoke-Free Ottawa Coalition's strategic plan related to coalition building, advocacy, cessation and prevention.

Objective: By September 30, 2009, tobacco prevention staff will chair 12 Smoke Free Ottawa Coalition meetings.

Measure: # of Smoke Free Ottawa Coalition Meetings chaired

Objective: By September 30, 2009, tobacco prevention staff will assist in 100% of efforts to build Coalition membership.

Measure: A stronger coalition

Objective: By September 30, 2009, tobacco prevention staff will assist Smoke-Free Ottawa in developing and encouraging the implementation of smoke-free indoor air policies including state-wide and local policies.

Measure: Increased # of smoke-free indoor air policies

Objective: By September 30, 2009, tobacco prevention staff will assist Smoke-Free Ottawa in identifying, supporting, and promoting area tobacco treatment programs.

Measure: Updated list of tobacco prevention programs

Objective: By September 30, 2009, tobacco prevention staff will assist Smoke-Free Ottawa in identifying, developing, supporting, promoting and implementing youth tobacco prevention efforts.

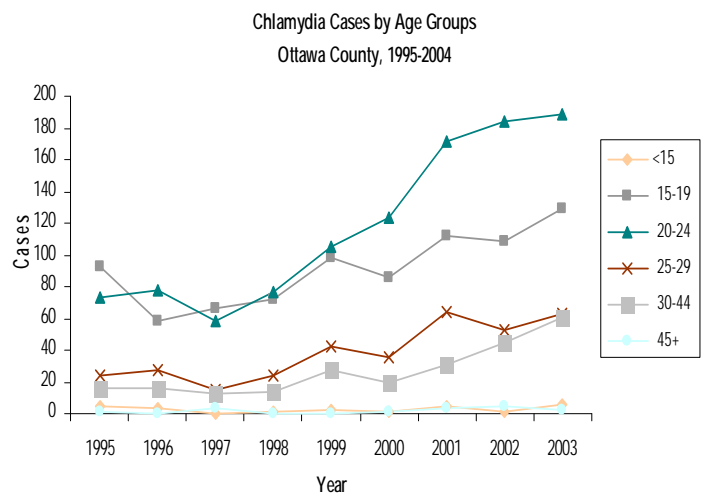
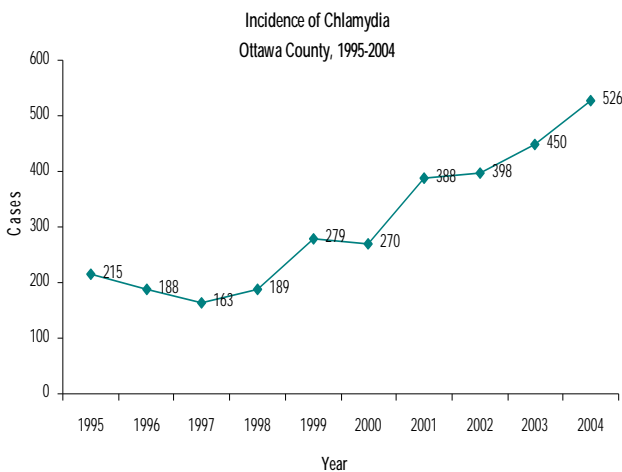
Measure: Updated list of youth tobacco prevention efforts

Performance Measures:	2006	2007	2008 Estimated	2009 Projected
Output:				
% of enforcement compliance checks during the 1 st , 2 nd and 3 rd quarters	N/A	65%	65%	35%
% of enforcement compliance checks during each quarter in the former target area(s).	N/A	N/A	N/A	15%
% of law enforcement tobacco compliance checks coordinated for the 4 th quarter.	N/A	100%	100%	100%
% of vendors that fail a compliance check and receive mandated education trainings	N/A	100%	100%	100%
# of vendor education trainings conducted	N/A	N/A	N/A	14
% complaints responded to	N/A	N/A	100%	100%
% of requests for assistance responded to	N/A	N/A	100%	100%
Smoke-free county campus policy developed	N/A	N/A	N/A	Complete
# of Smoke-Free Ottawa meetings chair	N/A	12	12	12
Efficiency:				
% of education packets distributed to non-compliant vendors within 1 month of receiving results from compliance check	N/A	100%	100%	100%

Performance Measures:	2006	2007	2008 Estimated	2009 Projected
100% of changes/ actions implemented as defined by the Regional Collaborative Taskforce	N/A	N/A	N/A	Complete
Assist in 100% of efforts to build Smoke-Free Ottawa coalition.	N/A	N/A	N/A	Complete
Assist in 100% of efforts to develop and encourage the implantation of smoke-free indoor air policies state wide and locally	N/A	N/A	N/A	Complete
Assist in 100% efforts to identify, support and promote area tobacco treatment programs	N/A	N/A	N/A	Complete
Assist in 100% of efforts to identify, support and promote youth tobacco prevention efforts.	N/A	N/A	N/A	Complete
Outcome:				
% establishments that did not sell tobacco to minors.	N/A	96%	97%	97%
% of changes/ actions implemented by vendors	N/A	100%	100%	100%
Implementation of Smoke Free Ottawa: A tobacco reduction coalition strategic plan	N/A	Complete	Complete	Complete

HEALTH PROMOTION-REPRODUCTIVE HEALTH

ased on the results of the Community Health Profile, Chlamydia is a growing problem in Ottawa County:



Goal: Increase the awareness of Ottawa County residents of the OCHD services that prevent unintended pregnancy and STDs.

Objective: By September 30, 2009 reproductive health will assist family planning staff in maintaining 30% teen enrollment (ages 19 and under) in the family planning program

Measure: % of teens enrolled in the family planning program

Objective: By September 30, 2009 reproductive health will assist the family planning staff in increasing the number of 19-44 year olds who are at or below 185% poverty level utilizing the family planning services by 10%

Measure: % increase of 19-44 year olds at or below 185% poverty level utilizing family planning services

Objective: By September 30, 2009 reproductive health will assist STI clinic staff in increasing the percentage of youth who use the STI clinic by 10% (based on baseline data)

Measure: % increase in youth utilizing STD services

Objective: By September 30, 2009, reproductive health staff will assist family planning and STD staff in the development of a reproductive health strategic plan.

Measure: A strategic plan is developed

Goal: Assist in the coordination of the implementation of the Ottawa County Youth Sexual Health Coalition (OCYSHC) strategic plan.

Objective: By September 30, 2009, the reproductive health staff will chair 12 OCYSH coalition meetings.

Measure: # of OCYSHC chaired by reproductive health staff

Objective: By September 30, 2009 reproductive health will implement 100% of the OCHD responsibilities of the OCYSH strategic plan.

Outcome: % of OCHD responsibilities implemented

Goal: Increase access to resources to the community regarding the consequences of sexual activity

Objective: By September 30, 2009 reproductive health staff will distribute 500 parent packets to parents in Ottawa County.

Measure: # of parent packets distributed

Objective: By September 30, 2010 reproductive health will implement one community base program in the Holland area.

Measure: # of community base programs implemented in the Holland area

Objective: By September 30, 2009 reproductive health will market the "Day To Prevent Teen Pregnancy" campaign events to Ottawa County youth.

Measure: # of campaign events marketed to Ottawa County youth

Objective: By September 30, 2009, the reproductive health staff will implement one Teen Pregnancy forum in Ottawa County.

Measure: Host one Teen Pregnancy forum

Objective: By September 30, 2009, 85% of students participating in the peer education program will be able to identify 2 skills to prevent consequences associated with risky sexual behavior.

Measure: % of participants identifying 2 skills to prevent consequences associated with risky sexual behavior

Goal: To reduce the risk of blood borne and tuberculosis exposure in Ottawa County employees.

Objective: By September 30, 2009, the reproductive health staff will train 100% of all new Ottawa County employees on the prevention of Blood borne exposure.

Measure: % of new employees trained on prevention of BBP exposure

Objective: By September 30, 2009, 100% of class "A" Ottawa County employees will complete Blood Borne Pathogen training.

Measure: % class "A" employees trained

Objective: By September 30, 2009, the reproductive health staff will assist the Safety and Security Committee in updating the OC Blood borne Pathogen Exposure Control Plan

Measure: Updated OC BBP Exposure Control Plan

Goal: To assist in implementing systems to effectively manage and improve the public health infrastructure.

Objective: By September 30, 2009, the reproductive health staff will act as presidents of the Great Lakes Chapter, Society for Public Health Education (GLC SOPHE).

Measure: OCHD reproductive health staff member is president of GLC SOPHE

Goal: To provide resources to Ottawa County residents on parenting issues.

Objective: By September 30, 2009, the reproductive health staff will chair 12 Challenge of Children (C of C) planning coalition Meetings.

Measure: # of Challenge of the Children planning coalition meetings chaired

Objective: By September 30, 2009, the reproductive health staff will chair 6 C of C program committee meetings.

Measure: # of Challenge of the Children program committee meetings chaired

Objective: By September 30, 2009, the reproductive health staff will implement 100% of the OCHD's responsibilities for the C of C conference.

Measure: % of OCHD's responsibilities implemented for Challenge of the Children conference

Performance Measures:	2006	2007	2008 Estimated	2009 Projected
Output:				
<i># of peer education presentations completed</i>	N/A	20	20	30
<i># of presentations to schools/JDC/Girls Group/Harbor House/Hope/ GVSU</i>	N/A	65	65	65
<i># of materials about STI/Family Planning services (brochure, cards, teen help card) distributed</i>	N/A	4,000	4,000	4,000
<i># of OCYSH Coalition steering committee meetings conducted</i>	N/A	6	6	12
<i># of OCYSH intervention sub-committee meetings (OCTPR)</i>	N/A	12	12	N/A
<i># of OCYSH prevention sub-committee meetings</i>	N/A	6	6	N/A

Performance Measures:	2006	2007	2008 Estimated	2009 Projected
<i># of "talk early talk often" parent workshops advertised and implemented</i>	N/A	2	2	N/A
<i># of research based service learning project implemented</i>	N/A	1	1	N/A
<i># of parent packs distributed</i>	N/A	200	200	500
<i># of Teen Forum workshops advertised and implemented</i>	N/A	2	2	2
<i>% of schools asked to participate in the teen pregnancy online survey</i>	N/A	100%	100%	100%
<i># of Challenge of Children meetings chaired</i>	N/A	12	12	12
<i># of Program Committee meetings for Challenge of Children chaired</i>	N/A	6	6	6
<i># of GLCSOPHE executive board Meetings conducted</i>	N/A	N/A	N/A	6
<i>Assist the Safety and Security committee in updating the Blood borne Pathogen Exposure Control plan</i>	N/A	Complete	Complete	Complete
Efficiency:				
<i>% of positive evaluations from peer educators</i>	N/A	100%	100%	85%
<i>% of positive evaluations of peer ed presentations from teachers</i>	N/A	85%	85%	85%
<i>% of positive evaluation of overall Challenge of Children conference</i>	N/A	N/A	N/A	80%
<i>% of Ottawa County "A" classified employees receiving blood borne pathogen training</i>	100%	100%	100%	100%
<i>Implementation of OCYSH committee initiatives</i>	N/A	Complete	Complete	Complete
<i>% of positive evaluations from "Talk Early, Talk Often" workshops</i>	N/A	100%	86%	N/A
<i>% of positive evaluations of parent packs</i>	N/A	90%	N/A	N/A
<i>% of positive evaluations of teen forum.</i>	N/A	90%	90%	90%
<i># of schools participating in the teen pregnancy survey</i>	N/A			
<i># of participants attending Challenge of Children</i>	N/A	900	900	900
Outcome:				
<i>% of students participating in peer ed presentation who are able to list 2 risks and consequences for engaging in risky sexual behavior</i>	N/A	100%	90%	90%
<i>% teen enrollment (ages 18 and under) in the family planning program</i>	N/A	30%	32%	30%
<i>% increase of 19-44 year olds who are at or below 185% poverty level utilizing the family planning services.</i>	N/A	10%	10%	10%
<i>Development of a health department reproductive health strategic plan</i>	N/A	N/A	N/A	Complete
<i>% increase in youth who use the STI clinic</i>	N/A	10%	10%	10%
<i>Increased access to resources about the consequences of risky sexual behavior for students and parents</i>	N/A	Complete	Complete	Complete
<i>% of participants planning to use the information gained from the Challenge of Children conference</i>	0	85%	85%	85%

HEALTH PROMOTION-ACCESS TO HEALTH CARE

Goal : Assist the Ottawa County Access to Healthcare Subcommittee in providing access to healthcare (medical, dental, and mental health) services to all Ottawa County residents.

Objective: By December 31, 2008 collect data to identify access to healthcare needs in Ottawa County.

Measure: Data on Access to health care needs

Objective: By December 31, 2008 formalize Access to Healthcare stakeholder group.

Measure: Subcommittee of stakeholders has been created

Objective: By June 30, 2009 research and identify evidence-based/best practices models in other communities.

Measure: Identified evidence-based, best practice model for Ottawa County

Objective: By September 30, 2009 assist Access to Healthcare stakeholder group in developing a strategic plan to increase access to healthcare in Ottawa County.

Measure: Strategic plan developed

Objective: By September 30, 2010 assist Access to Healthcare stakeholder group in implementing a strategic plan to increase access to healthcare in Ottawa County.

Measure: Strategic plan implemented

Objective: By September 30, 2009 assist Access to Healthcare stakeholder group in evaluating the strategic plan to increase access to healthcare in Ottawa County.

Measure: Plan evaluated and progress documented

Performance Measures:	2006	2007	2008 Estimated	2009 Projected
Output:				
Data collected to identify access to health care needs in OC	N/A	N/A	N/A	Complete
Formalize Access to Healthcare stakeholder group	N/A	N/A	N/A	Complete
Research best practice, evidence based model for access to health care	N/A	N/A	N/A	Complete
Identify best practice, evidence based model for access to health care	N/A	N/A	N/A	Complete
Assess financial feasibility of locally provided health coverage for low wage workers.	N/A	N/A	N/A	Complete
Access to Health Care strategic plan developed	N/A	N/A	N/A	Complete
Access to Health Care strategic plan implemented	N/A	N/A	N/A	Complete
Access to Health Care strategic plan evaluated	N/A	N/A	N/A	Complete
Efficiency:				
Collected all relevant data	N/A	N/A	N/A	Complete
Hold meetings / make contacts	N/A	N/A	N/A	Complete
Research models	N/A	N/A	N/A	Complete
Participation in development of strategic plan	N/A	N/A	N/A	Complete
Participation in evaluation of strategic plan	N/A	N/A	N/A	Complete
Outcome:				
Access to health care needs identified in OC	N/A	N/A	N/A	Complete
Access to Healthcare stakeholder group formed	N/A	N/A	N/A	Complete
Best practice model chosen for OC	N/A	N/A	N/A	Complete
Strategic plan to implement best practice model developed	N/A	N/A	N/A	Complete
Strategic plan to implement best practice model implemented	N/A	N/A	N/A	Complete
Strategic plan evaluated	N/A	N/A	N/A	Complete

HEALTH PROMOTION-DENTAL

Goal: Reduce dental disease among targeted at-risk populations in Ottawa County

Objective: By September 30, 2009 Dental team will have provided access to school-based Oral Health Prevention programs for over 6,000 at-risk children.

Measure: # of at risk kids with access to school-based Oral Health Prevention programs

Objective: By September 30, 2009 Dental team will have reduced dental disease by at least 25% for children who were provided Dental Services on “Miles of Smiles” Mobile Dental Unit.

Measure: % reduction of dental disease in children receiving services on “Miles of Smiles”

Objective: By September 30, 2009 75% of Ottawa County Elementary Schools and Head Start Centers will have been provided with Oral Health Education Program Information.

Measure: % elementary schools/head starts receiving program information

Objective: By September 30, 2009 Dental Team will have provided over 9,000 oral health education resources and materials to Ottawa County residents.

Measure: # of oral health education materials distributed

Objective: By September 30, 2009 Dental Program will have provided dental treatment referral services for 100% of inquiring Ottawa County residents.

Measure: % inquiries receiving referral services

Objective: By September 30, 2009 Dental Program will coordinate advocacy initiatives that will increase accessibility to Dental Services for Ottawa County Residents.

Measure: Coordinate advocacy initiatives

Performance Measures:	2006	2006/2007	2007/2008 Estimated	2008/2009 Projected
Output:				
<i># of MOD Needs assessments completed for children on Miles of Smiles Mobile Dental Unit.</i>	1,013	1,055	1,060	1,065
<i># of client encounters on Miles of Smiles mobile dental units for prevention and restorative services to dentally at-risk children</i>	1,974	1,896	1,900	1,925
<i># of diagnostic dental services units provided for at risk children provided on Miles of Smiles mobile dental unit</i>	2,399	2,180	2,190	2,200
<i># of restorative dental services units for at-risk children provided on Miles of Smiles mobile dental unit</i>	1,400	1,106	1,125	1,150
<i># of oral surgery service units for at-risk children provided on Miles of Smiles mobile dental unit</i>	180	141	145	150
<i># of preventive dental service units for at-risk children provided on Miles of Smiles mobile dental unit</i>	3,209	3,242	3,250	3,275
<i># of dentally at-risk elementary school children in Fluoride program</i>	4,697	4,740	4,750	4,750
<i># of second and sixth grade children with access to the school-based sealant program.</i>	0	142	1300	1350
<i># of at-risk children at child Development Services Head Start and Early Head Start with access to the Fluoride Varnish</i>	0	247	300	Fluoride Varnish Program to be provided by Intercare and West Michigan Pediatric Dentistry
<i># of oral health educational units for at-risk children on miles of smiles mobile dental unit provided</i>	1,057	1,040	1,045	1,050
<i># of teacher resources regarding Student Oral Health Kits in 75 schools</i>	165	167	167	170
<i># of Oral Health Education Program information sent to teachers</i>	n/a	537	537	540
<i># of Head Start curriculum resources coordinated with the Head Start Coordinator</i>	n/a	20	21	22
<i># of Oral Health resources provided to</i>	2,160	2,204	2,225	2,250

Performance Measures:	2006	2006/2007	2007/2008 Estimated	2008/2009 Projected
<i>preschoolers through the vision and hearing program</i>				
<i># of infant oral health care packets provided to maternal/infant health program and early on program participants</i>	2,125	2,015	2,025	2,050
<i># of oral health presentations in schools and community</i>	22	34	35	36
<i># of oral health resources distributed at OCHD health events</i>	5,142	5,341	5,350	5,375
<i>% of dental treatment requests managed by the Dental Services Referral Network</i>	100%	100%	100%	100%
<i>Advocacy initiatives that will increase accessibility to dental services for Ottawa County residents</i>	n/a	Adult Medicaid Dental Benefits Reinstated	MICChild Outreach	MICChild Outreach
Efficiency:				
<i>% positive evaluations from presentations</i>	n/a	n/a	90%	≥ 90%
<i>% positive teacher evaluations from Sealant Program</i>	n/a	n/a	90%	≥ 90%
<i>% Sealant retention</i>	n/a	96%	96%	≥ 90%
Outcome:				
<i>% reduction in dental disease in children who were provided Dental Services on "Miles of Smiles" Mobile Dental Unit.</i>	25.4%	32.3%	33%	34%
<i>% reduction in dental disease for Fluoride Program participants</i>	n/a	n/a	n/a	30 % National Statistic
<i>% reduction in dental disease on sealed molars (Sealant Program)</i>	n/a	n/a	n/a	74% (National statistic)

Resources				
Personnel				
Position Name	2007 # of Positions	2008 # of Positions	2009 # of Positions	2009 Budgeted Salary
Records Processing Clerk III	1.000	1.000	1.000	\$34,396
Records Processing Clerk II	0.650	0.650	0.000	\$0
Oral Health Supervisor	0.500	0.000	0.000	\$0
Registered Dietician	0.500	0.000	0.000	\$0
Health Educator	5.800	6.800	5.400	\$256,196
Team Supervisor	1.050	2.000	1.600	\$99,593
Health Promotion Manager	1.000	1.000	1.000	\$74,800
Health Promotion Supervisor	0.450	0.000	0.000	\$0
Dental Clinic Manager	0.800	0.800	0.800	\$37,645
Dental Hygienist	0.800	0.800	0.800	\$45,637
	<u>12.550</u>	<u>13.050</u>	<u>10.600</u>	<u>\$548,267</u>

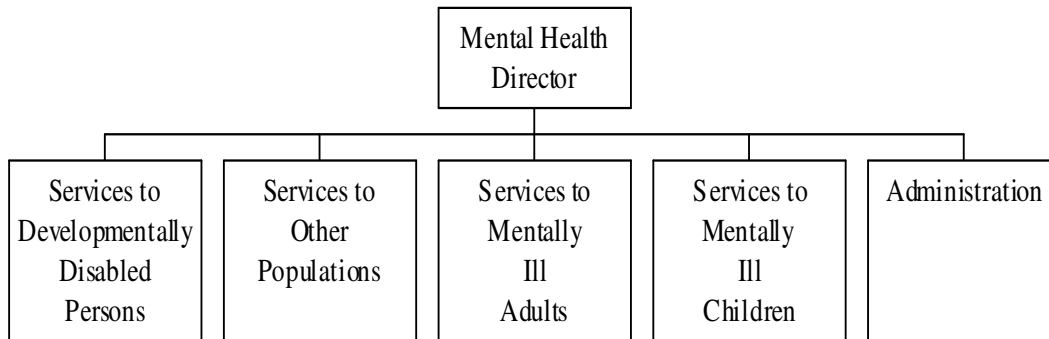
Funding

	2005 Actual	2006 Actual	2007 Actual	2008 Current Year Estimated	2009 Adopted by Board
Revenues					
Intergovernmental Revenue	\$188,307	\$208,768	\$285,368	\$243,374	\$144,726
Charges for Services	\$20,615	\$9,686	\$7,779	\$9,972	\$18,992
Interest & Rents					
Other Revenue	\$54,513	\$93,397	\$135,842	\$127,000	\$101,696
Total Revenues	<u>\$263,435</u>	<u>\$311,851</u>	<u>\$428,989</u>	<u>\$380,346</u>	<u>\$265,414</u>
Expenditures					
Personnel Services	\$693,910	\$738,397	\$848,552	\$879,705	\$798,130
Supplies	\$106,822	\$148,747	\$111,963	\$128,629	\$105,546
Other Services & Charges	\$230,614	\$233,825	\$361,559	\$348,592	\$205,395
Capital Outlay					
Total Expenditures	<u>\$1,031,346</u>	<u>\$1,120,969</u>	<u>\$1,322,074</u>	<u>\$1,356,926</u>	<u>\$1,109,071</u>

Mental Health (2220) Fund Summary

Function Statement

Ottawa County Community Mental Health (CMH) provides services to developmentally disabled children and adults, mentally ill children and adults, and select other populations. Below is a budget summary for the entire fund. Subsequent pages provide information for each of the populations served and CMH administration.



	2005 Actual	2006 Actual	2007 Actual	2008 Current Year Estimated	2009 Adopted by Board
Revenues					
Intergovernmental Revenue	\$27,089,930	\$28,033,325	\$29,886,036	\$30,334,728	\$30,166,910
Charges for Services	\$398,264	\$547,468	\$444,213	\$448,847	\$446,813
Rents	\$187,935	\$147,593	\$143,960	\$160,948	\$190,000
Interest	\$23,943	\$45,933	\$58,887	\$92,000	\$80,000
Other Revenue	\$65,816	\$72,863	\$303,652	\$326,822	\$214,207
Other Financing Sources	\$476,500	\$476,500	\$476,500	\$583,631	\$563,108
Total Revenues	\$28,242,388	\$29,323,682	\$31,313,248	\$31,946,976	\$31,661,038
Expenditures					
Personnel Services	\$11,066,578	\$11,049,670	\$11,485,217	\$12,329,831	\$12,261,588
Supplies	\$453,008	\$529,231	\$607,185	\$645,761	\$72,816
Other Services & Charges	\$16,706,281	\$18,162,179	\$19,223,755	\$18,971,384	\$18,816,179
Capital Outlay	\$50,000		-\$14,000		
Other Financing Uses					
Total Expenditures	\$28,275,867	\$29,741,080	\$31,302,157	\$31,946,976	\$31,150,583

Fund: (2220) Mental Health

The following indicators have been identified by the Michigan Department of Community Health and the Ottawa County CMH Board as critical indicators of performance for CMH of Ottawa County. These indicators represent agency-wide performance indicators.

Goal: Timeliness of inpatient screens assesses CMH’s ability to respond to persons in crisis who are at risk of inpatient hospitalization. Timely response is clinically necessary, but the careful management of inpatient admissions is vital for financial performance as well.

Objective: Screening will be complete within 3 hours of the crisis request.

Goal: Days between initial request and first face to face assessment is another access indicator that measures timely initiation into the CMH service network. This is a measure of the effectiveness of our system to get consumers into services without long delays.

Objective: 95% of consumers requesting service should receive their first service within 14 days of the request.

Goal: Days between the first assessment and ongoing services is a related measure that assures that consumers are not brought into services only to go on program waiting lists.

Objective: 95 % of consumers assessed will receive their next ongoing service within 14 days.

Goal: The indicator on recidivism measures the number of readmissions to inpatient hospitals within a 30 day period. This is a measure of the effectiveness of CMH’s follow-up after discharge, as well as the appropriateness of discharge planning for persons hospitalized.

Objective: No more than 15% of persons discharged will be readmitted within 30 days.

Goal: The indicator on continuity of care measures CMH response to consumers who are discharged from inpatient.

Objective: Persons discharged from hospitals should be seen for follow-up within 7 days. Ottawa is compared against the rest of the state on this measure, but there is no minimum standard.

Goal: Medicaid penetration rate compares the number of Medicaid covered consumers against the total Medicaid eligible population in the county.

Objective: Medicaid penetration rate will be increased or maintained compared to prior years.

Service Area	Actual 2006	Actual 2007	Estimated 2008	Budgeted 2009
Persons in Crisis will be screened within 3 hours of request (Standard: 95%)				
Children	96.8%	97%	95%	95%
Adult	95.7%	98%	95%	95%
Persons will receive their first face to face assessment within 14 days of the request for service.	97.5%	98%	95%	95%
Access – Timeliness Measure				
Persons will receive their first ongoing service within 14 days of the initial assessment (Standard: 95%)	96.5%	95%	95%	95%
Recidivism – Inpatient Care				
The percentage of persons readmitted to inpatient psychiatric units within 30 days of discharge will not be greater than 15%. (Standard 15%)				
Children	5.6%	5%	5%	15%
Adults	5.6%	8%	8%	15%
Continuity of Care – Follow Up to Inpatient				
Persons discharged from inpatient care will be seen for follow up care within 7 days.				
Children	92.3%	95%	95%	95%
Adults	98.4%	98%	95%	95%
Medicaid Population Served				
Number of Medicaid consumers served by CMH as a percentage of the total Medicaid eligible population in Ottawa County.	5.5-6.2%	5.2-6.2%	*9.6%	*9.6 %

Resources					
Personnel					
Position Name	2007 # of Positions	2008 # of Positions	2009 # of Positions	2009 Budgeted Salary	
Program Supervisor	1.000	1.000	1.000	\$70,318	
Program Coordinator-County	0.000	0.080	0.080	\$5,131	
Mental Health Clinician	2.000	3.000	3.000	\$132,760	
Occupational Therapist	1.000	1.000	1.000	\$46,010	
Speech Therapist	0.500	0.500	0.500	\$26,812	
Mental Health Nurse	0.750	1.500	1.500	\$71,044	
Team Supervisor - M Health	4.000	4.000	4.000	\$234,045	
Mental Health Clinician III	1.000	0.000	0.000	\$0	
Mental Health Specialist	21.700	21.700	21.700	\$956,267	
Mental Health Aide	36.000	41.000	41.000	\$1,218,508	
Recipient Right & Info Officer	0.320	0.320	0.320	\$18,724	
Mental Health Trainer	1.000	1.000	1.000	\$36,570	
Records Processing Clerk III	0.700	0.700	0.700	\$22,632	
	69.970	75.800	75.800	\$2,838,821	
Funding					
	2005	2006	2007	2008	2009
	Actual	Actual	Actual	Current Year Estimated	Adopted by Board
Revenues					
Intergovernmental Revenue	\$16,960,879	\$17,863,811	\$18,845,226	\$18,922,454	\$18,882,639
Charges for Services	\$203,816	\$337,515	\$376,791	\$328,867	\$346,189
Rents	\$187,935	\$147,593	\$143,960	\$160,948	\$190,000
Other Revenue	\$53,956	\$46,781	\$53,883	\$39,545	\$36,900
Total Revenues	<u>\$17,406,586</u>	<u>\$18,395,700</u>	<u>\$19,419,860</u>	<u>\$19,451,814</u>	<u>\$19,455,728</u>
Expenditures					
Personnel Services	\$4,108,770	\$4,035,314	\$4,094,161	\$4,221,930	\$4,325,701
Supplies	\$40,750	\$45,213	\$48,144	\$63,453	\$103,449
Other Services & Charges	\$11,026,022	\$11,995,268	\$13,027,327	\$12,761,189	\$12,650,719
Capital Outlay					
Total Expenditures	<u>\$15,175,542</u>	<u>\$16,075,795</u>	<u>\$17,169,632</u>	<u>\$17,046,572</u>	<u>\$17,079,869</u>

Resources

Personnel

Position Name	2007 # of Positions	2008 # of Positions	2009 # of Positions	2009 Budgeted Salary
Program Coordinator	0.020	0.020	0.020	\$1,260
Mental Health Specialist	0.250	0.250	0.250	\$10,856
	0.270	0.270	0.270	\$12,116

Funding

	2005 Actual	2006 Actual	2007 Actual	2008 Current Year Estimated	2009 Adopted by Board
Revenues					
Intergovernmental Revenue	\$361,673	\$355,566	\$301,869	\$351,947	\$350,572
Other Revenue		\$3,032	\$2,732	\$2,807	\$2,000
Total Revenues	\$361,673	\$358,598	\$304,601	\$354,754	\$352,572

Expenditures

Personnel Services	\$13,113	\$15,594	\$17,411	\$16,537	\$17,511
Supplies	\$6,193				
Other Services & Charges	\$257,330	\$262,380	\$269,692	\$312,942	\$312,942
Capital Outlay					
Total Expenditures	\$276,636	\$277,974	\$287,103	\$329,479	\$330,453

Resources

Personnel

Position Name	2007 # of Positions	2008 # of Positions	2009 # of Positions	2009 Budgeted Salary
Program Coordinator-County	3.100	2.770	2.770	\$177,670
Psychiatrist	1.000	1.000	1.000	\$193,120
Mental Health Clinician	19.000	18.000	18.000	\$884,645
Mental Health Nurse	4.500	4.500	4.500	\$204,776
Clinical Nurse	1.000	1.000	1.000	\$73,908
Records Processing Clerk I	0.000	1.000	1.000	\$29,282
Team Supervisor	6.000	6.000	6.000	\$332,952
Mental Health Specialist	21.350	21.150	21.150	\$899,500
Residential Worker	15.000	15.000	15.000	\$460,418
Medical Assistant	1.000	1.000	1.000	\$32,330
Nursing Supervisor	0.800	0.800	0.800	\$45,896
Accountant - MH	0.000	0.170	0.170	\$7,914
Account Clerk II	1.000	0.00	0.00	\$0.00
Account Clerk I	1.000	2.000	2.000	\$64,088
	74.750	74.390	74.390	\$3,406,499

Funding

	2005 Actual	2006 Actual	2007 Actual	2008 Current Year Estimated	2009 Adopted by Board
Revenues					
Intergovernmental Revenue	\$9,235,886	\$9,812,112	\$10,359,115	\$10,492,010	\$10,356,030
Charges for Services	\$110,230	\$113,290	\$53,040	\$110,356	\$87,800
Rents					
Other Revenue	\$10,605	\$22,578	\$23,053	\$13,179	\$7,675
Total Revenues	\$9,356,721	\$9,947,980	\$10,435,208	\$10,615,545	\$10,451,505

Expenditures

Personnel Services	\$4,367,204	\$4,422,670	\$4,833,659	\$5,391,618	\$5,232,547
Supplies	\$225,886	\$341,543	\$438,011	\$492,237	\$402,367
Other Services & Charges	\$3,107,386	\$3,425,629	\$3,462,529	\$3,461,113	\$3,346,199
Total Expenditures	\$7,700,476	\$8,189,842	\$8,734,199	\$9,344,968	\$8,981,113

Budget Highlights:

Charges for Services and Other Revenues decreased due to fewer consumers with an Ability-to-pay fee structure. Other Services & Charges due to fewer consumers, fewer days of care, and lower rates.

Resources					
Personnel					
Position Name	2007 # of Positions	2008 # of Positions	2009 # of Positions	2009 Budgeted Salary	
Program Coordinator	0.100	0.530	0.530	\$33,994	
Mental Health Clinician	2.000	2.000	2.000	\$100,710	
	2.100	2.530	2.530	\$134,704	
Funding					
	2005 Actual	2006 Actual	2007 Actual	2008 Current Year Estimated	2009 Adopted by Board
Revenues					
Intergovernmental Revenue	\$514,906	\$518,420	\$572,594	\$560,015	\$569,367
Charges for Services	\$4,799	\$7,061	\$7,252	\$2,600	\$5,800
Rents					
Other Revenue				\$3,652	
Total Revenues	\$519,705	\$525,481	\$579,846	\$566,267	\$575,167
Expenditures					
Personnel Services	\$149,594	\$140,417	\$159,215	\$194,939	\$193,053
Supplies	\$279		\$948	\$1,025	\$4,639
Other Services & Charges	\$287,687	\$298,966	\$332,212	\$293,916	\$286,574
Capital Outlay					
Total Expenditures	\$437,560	\$439,383	\$492,375	\$489,880	\$484,266

Resources				
Personnel				
Position Name	2007 # of Positions	2008 # of Positions	2009 # of Positions	2009 Budgeted Salary
Account Clerk I	3.000	2.250	2.875	\$89,336
Account Clerk II	2.500	2.250	1.625	\$53,492
Accountant I	1.000	1.000	1.000	\$42,004
Accountant - M.H. Billing	1.000	0.830	0.830	\$38,638
Administrative Assistant	1.375	1.250	1.000	\$41,475
Administrative Sec I	0.625	0.750	1.000	\$40,517
CMH Finance Director	1.000	1.000	1.000	\$62,972
Community. Dev. & Relations Coordinator	1.000	1.000	1.000	\$47,362
Compliance Manager	1.000	1.000	1.000	\$53,373
Contract Manager	1.000	1.000	1.000	\$50,355
Cost Analyst	1.000	1.000	1.000	\$47,362
Director of QI & Planning	1.000	1.000	1.000	\$64,140
Medical Records Assistant	1.000	1.000	1.000	\$38,380
Mental Health Director	1.000	1.000	1.000	\$124,034
Nursing Supervisor	0.200	0.200	0.200	\$11,475
Personnel Specialist	0.500	0.500	0.500	\$30,313
Program Coordinator- County	1.780	0.600	0.600	\$39,767
Program Director	1.000	1.000	1.000	\$82,956
Program Evaluator	1.000	1.000	1.000	\$44,234
Programmer/ Analyst	1.000	1.000	1.000	\$61,492
Quality Improvement/ Managed Care Asst	1.000	1.000	1.000	\$47,362
Quality Improvement Asst	1.000	1.000	1.000	\$33,704
Recipient Rights	0.680	0.680	0.680	\$39,788
Recipient Rights & Info Officer	1.000	1.000	1.000	\$48,690
Records Processing Clerk III	2.000	2.000	2.000	\$63,870
Records Processing Clerk II	12.250	11.250	11.250	\$326,468
Senior Accountant	0.500	0.500	0.000	\$0
	41.410	38.060	37.560	\$1,623,559

Resources					
Funding	2005	2006	2007	2008	2009
	Actual	Actual	Actual	Current Year Estimated	Adopted by Board
Revenues					
Intergovernmental Revenue	\$16,586	-\$516,584	-\$192,768	\$8,302	\$8,302
Charges for Services	\$79,419	\$89,605	\$7,130	\$7,024	\$7,024
Rents					
Interest	\$23,943	\$45,933	\$58,887	\$92,000	\$80,000
Other Revenue	\$1,255	\$472	\$223,984	\$267,639	\$167,632
Other Financing Sources	\$476,500	\$476,500	\$476,500	\$583,631	\$563,108
Total Revenues	\$597,703	\$95,926	\$573,733	\$958,596	\$826,066
Expenditures					
Personnel Services	\$2,427,897	\$2,435,675	\$2,380,771	\$2,504,807	\$2,492,776
Supplies	\$179,900	\$142,475	\$120,082	\$89,046	\$72,816
Other Services & Charges	\$2,027,856	\$2,179,936	\$2,131,995	\$2,142,224	\$2,219,745
Capital Outlay	\$50,000		-\$14,000		
Other Financing Uses					
Total Expenditures	\$4,685,653	\$4,758,086	\$4,618,848	\$4,736,077	\$4,785,337

Budget Highlights:

A decrease in requested Internal Service Fund (ISF) Abatement dollars decreased Other Revenue.

Function Statement

The Workforce Investment Act (WIA) provides employment training to youth, adults, and dislocated workers by means of a "one stop" system. Services for adults and dislocated workers may include core services, intensive services, training services, and discretionary services (customized screening and referral of participants and customized services to employers, supportive services, and needs-related payments). Services for youth may include tutoring, study skills training, and dropout prevention activities, alternative secondary school services, summer employment opportunities, paid and unpaid work experience, and occupational skills training.

Resources

Personnel	2007	2008	2009	2009
Position Name	# of Positions	# of Positions	# of Positions	Budgeted Salary
Director - E & T	1.000	1.000	1.000	\$73,000
Program Supervisor - MI Works	3.000	3.000	3.000	\$155,400
Fiscal Supervisor	1.000	1.000	1.000	\$51,800
Senior Secretary	1.000	1.000	1.000	\$36,500
Contract Monitor	1.000	1.000	1.000	\$45,000
Assessment & Eligibility Specialist	7.000	7.000	7.000	\$241,972
Case Manager	1.000	1.000	1.000	\$47,057
Career Counselor	1.000	1.000	1.000	\$39,446
Account Clerk II	1.000	1.000	1.000	\$36,500
Records Processing Clerk IV	1.000	1.000	1.000	\$36,500
Marketing Assistant - MI Works	0.500	1.000	1.000	\$48,417
Records Processing Clerk II	0.200	0.200	0.200	\$5,751
	<u>18.700</u>	<u>19.200</u>	<u>19.200</u>	<u>\$817,343</u>

Workforce Investment Act (WIA) provides administration oversight on more than twenty different grants. These grants provide an array of services to youths and adults and are accounted for in the appropriate fund depending on the funding service and grant period. See individual WIA funds for specific grant services provided.

Funding

	2005	2006	2007	2008	2009
	Actual	Actual	Actual	Current Year Estimated	Adopted by Board
Revenues					
Intergovernmental Revenue	\$131,672	\$160,151	\$194,079	\$236,625	\$207,611
Other Revenue	\$450				
Other Financing Sources					
Total Revenues	<u>\$132,122</u>	<u>\$160,151</u>	<u>\$194,079</u>	<u>\$236,625</u>	<u>\$207,611</u>
Expenditures					
Personnel Services	\$87,114	\$84,678	\$133,578	\$164,586	\$108,256
Supplies	\$5,328	\$3,513	\$7,512	\$7,093	\$7,104
Other Services & Charges	\$39,234	\$71,962	\$42,868	\$64,946	\$92,251
Capital Outlay			\$10,122		
Total Expenditures	<u>\$131,676</u>	<u>\$160,153</u>	<u>\$194,080</u>	<u>\$236,625</u>	<u>\$207,611</u>

Fund (2741) Workforce Investment Act - Youth

Function Statement

The Workforce Investment Act (WIA) – Youth Program provides employment training both in school and out of school youths, ages 14 – 21. This program provides study skills and tutoring, alternative secondary school, summer employment, paid and unpaid work experience, occupational skill training, guidance and counseling, supportive services and others. The Workforce Investment Act funding was new in July of 2000 and funds many of the same client groups as the Jobs Training Partnership Act which ended 6/30/00.

Mission Statement

Provide employment training to eligible youth, adults, dislocated workers and welfare recipients.

Goal: To increase the employment, retention and earnings of youth, and/or increase basic and work readiness skills.

Objective: To serve eligible youth by providing employment training to in-school and out-of-school youth.

Measure: # of youth who obtain employment

Measure: # of youth who receive training

Objective: Track youth employment retention and earning information.

Measure: # of youth who retain jobs

Measure: Measure average change in earnings

Objective: Increase basic and work readiness skills of youth.

Measure: Measure credential rate or skill attainment rate

Measure	2006	2007	2008 Estimated	2009 Projected *
<i>Output:</i>				
# of youth who receive training (older youth)	35	50	42	42
# of youth who receive training (younger youth)	76	112	90	90
Credential/ skill attainment rate (older youth)	96%	85%	58%	58%
Credential/ skill attainment rate (younger youth)	120%	93%	91%	91%
<i>Outcome:</i>				
% of youth who obtain employment (older youth)	76%	64%	79%	79%
% of youth who retain jobs (older youth)	100%	80%	85%	85%
Average change in earnings (older youth)	\$2,853	\$2,193	\$3,500	\$3,500

* Numbers are dependent on receipt of funding.

Resources

Personnel

Personnel information is recorded in Fund 2740.

Funding	2005	2006	2007	2008	2009
Revenues	Actual	Actual	Actual	Current Year Estimated	Adopted by Board
Intergovernmental Revenue	\$514,779	\$615,420	\$677,241	\$735,187	\$906,457
Total Revenues	\$514,779	\$615,420	\$677,241	\$735,187	\$906,457
Expenditures					
Personnel Services	\$70,066	\$94,266	\$76,053	\$108,383	\$136,422
Supplies	\$1,593	\$1,818	\$2,295	\$4,290	\$5,920
Other Services & Charges	\$443,118	\$519,334	\$598,897	\$622,514	\$764,115
Total Expenditures	\$514,777	\$615,418	\$677,245	\$735,187	\$906,457

Fund: (2742) Workforce Investment Act - Adult

Function Statement

The Workforce Investment Act (WIA) – Adult Program provides employment training primarily to adults facing serious barriers to employment. This program has three main functions: 1) Core Services provide basic intake and registration tasks, 2) Intensive Services provide classroom training, work experience, and supportive services such as transportation and child care, and 3) Training Services provide occupational and on-the-job training.

Mission Statement

Provide employment training to eligible youth, adults, dislocated workers and welfare recipients.

Goal: To increase the employment, retention and earnings of adults.

Objective: To serve adults by providing employment training to eligible adults.

Measure: # of adults who obtain employment

Measure: # of adults who receive training

Objective: Track adult employment retention and earnings information

Measure: # of adults who retain jobs

Measure: Track replacement wages of eligible adults

Objective: Track credential rates of eligible adults.

Measure: Measure credential rate

Measure	2006	2007	2008 Estimated	2009 Projected *
<i>Output:</i>				
% of adults who receive training	40%	51%	38%	38%
Credential/ skill attainment rate	86%	86%	83%	83%
<i>Outcome:</i>				
% of adults who obtain employment	81%	73%	90%	90%
% of adults who retain jobs	72%	83%	85%	85%
Replacement wages of eligible adults	\$4,991	\$7,426	\$10,200	\$10,200

* Numbers are dependent on receipt of funding.

Resources

Personnel

Personnel information is recorded in Fund 2740.

Funding	2005 Actual	2006 Actual	2007 Actual	2008 Current Year Estimated	2009 Adopted by Board
Revenues					
Intergovernmental Revenue	\$422,199	\$425,048	\$488,996	\$571,346	\$587,927
Other Revenue		\$530			
Other Financing Sources					
Total Revenues	\$422,199	\$425,578	\$488,996	\$571,346	\$587,927
Expenditures					
Personnel Services	\$48,543	\$72,583	\$51,623	\$69,695	\$70,983
Supplies	\$15,689	\$1,634	\$2,192	\$7,314	\$2,960
Other Services & Charges	\$339,689	\$360,865	\$435,179	\$494,337	\$513,984
Capital Outlay	\$8,771				
Total Expenditures	\$412,692	\$435,082	\$488,994	\$571,346	\$587,927

Budget Highlights:

Grant award and carry in dollar notifications for some programs were received after the budget process.

Fund: (2743) Workforce Investment Act – 6/30 Grant Programs

Function Statement

The Workforce Investment Act (WIA) – 6/30 Grant Programs fund provides employment training primarily to adult dislocated workers. This program has three main functions: 1) Core Services provide basic intake and registration tasks, 2) Intensive Services provide classroom training, work experience, and supportive services such as transportation and child care, and 3) Training Services provide occupational and on-the-job training. The Workforce Investment Act funds many of the same client groups as the Jobs Training Partnership Act funding which ended 6/30/00.

Mission Statement

Provide employment training to eligible youth, adults, dislocated workers and welfare recipients.

Goal: To increase the employment, retention and earnings of dislocated workers.

Objective: To serve adults by providing employment training to eligible dislocated workers.

Measure: # of dislocated workers who obtain employment

Measure: # of dislocated workers who receive training

Objective: Track dislocated worker employment retention and earnings information.

Measure: # of dislocated workers who retain jobs

Measure: Measure average change in earnings

Objective: Track credential rates of eligible dislocated workers.

Measure: Measure credential rate

Measure	2006	2007	2008 Estimated	2009 Projected *
<i>Output:</i>				
% of dislocated workers who receive training	44%	45%	55%	55%
Credential/ skill attainment rate	97%	38%	82%	82%
<i>Outcome:</i>				
% of dislocated workers who obtain employment	93%	93%	90%	90%
% of dislocated workers who retain jobs	86%	94%	92%	92%
Replacement wages of eligible dislocated workers	\$3,213	\$12,249	\$13,200	\$13,200

* Numbers are dependent on receipt of funding.

Resources

Personnel

Personnel information is recorded in Fund 2740.

Funding

	2005 Actual	2006 Actual	2007 Actual	2008 Current Year Estimated	2009 Adopted by Board
Revenues					
Intergovernmental Revenue	\$1,907,392	\$1,676,004	\$1,514,356	\$2,161,951	\$2,095,571
Other Revenue				\$3,013	
Other Financing Sources					
Total Revenues	\$1,907,392	\$1,676,004	\$1,514,356	\$2,164,964	\$2,095,571
Expenditures					
Personnel Services	\$199,194	\$124,209	\$170,268	\$248,594	\$221,209
Supplies	\$86,311	\$78,588	\$32,211	\$32,506	\$21,883
Other Services & Charges	\$1,503,484	\$1,484,954	\$1,294,948	\$1,883,864	\$1,852,479
Capital Outlay	\$8,771		\$13,442		
Total Expenditures	\$1,797,760	\$1,687,751	\$1,510,869	\$2,164,964	\$2,095,571

Budget Highlights:

Grant award and carry in dollar notifications for some programs were received after the budget process.

A few grants were discontinued.

Fund: (2744) Workforce Investment Act – 12/31 Grant Programs

Function Statement

This fund records the Community Development Block Grant which provides home rehabilitation and emergency home repair assistance to eligible homeowners.

Mission Statement

Reduce the effects of poverty within Ottawa County.

COMMUNITY DEVELOPMENT BLOCK GRANT (CDBG)

Goal: To improve the living conditions of low-income families.

Objective: To provide home rehabilitation to homeowners.

Measure: # of homes receiving rehabilitation

Objective: To provide emergency repairs to homeowners.

Measure: # of homes receiving emergency repair

Measure	2006	2007	2008 Estimated	2009 Projected *
<i>Output:</i>				
# of homes receiving rehabilitation	7	3	5	7
# of homes receiving emergency repair	2	6	5	7

* Numbers are dependent on receipt of funding.

Resources

Personnel

Personnel information is recorded in Fund 2740.

Funding

	2005 Actual	2006 Actual	2007 Actual	2008 Current Year Estimated	2009 Adopted by Board
Revenues					
Intergovernmental Revenue	\$252,273	\$54,532	\$259,484	\$538,677	\$277,670
Charges for Services	\$15,980	\$15,188	\$13,953		
Other Revenue	\$90,144	\$68,689	\$56,303		
Other Financing Sources		\$55,742			
Total Revenues	\$358,397	\$194,151	\$329,740	\$538,677	\$277,670
Expenditures					
Personnel Services	\$45,590	\$12,574	\$28,078	\$64,035	\$56,640
Supplies	\$1,356	\$1,629	\$806	\$2,022	\$2,367
Other Services & Charges	\$258,903	\$188,356	\$296,918	\$472,620	\$218,663
Capital Outlay					
Operating Transfers			\$35,397		
Total Expenditures	\$305,849	\$202,559	\$361,199	\$538,677	\$277,670

Budget Highlights:

Grant award and carry in dollar notifications are often received after the budget process. Two programs were discontinued and reduced.

Fund: (2748) Workforce Investment Act – 9/30 Grant Programs

Function Statement

The Work First grant from the State of Michigan provides counseling, job referral, and job placement services.

Mission Statement

Provide employment training to eligible youth, adults, dislocated workers and welfare recipients.

Goal: To increase the employment, retention and earnings of welfare recipients.

Objective: To serve welfare recipients by providing employment and training.

Measure: # of welfare recipients who obtain employment

Measure: # of welfare recipients who receive training

Objective: Track welfare recipients' employment retention and earnings information.

Measure: # of welfare recipients who retain jobs

Measure: Cases closed due to earnings

Measure	2006	2007	2008 Estimated	2009 Projected *
<i>Output:</i>				
# of welfare recipients who receive training	10%	15%	10%	10%
<i>Outcome:</i>				
% of welfare recipients who obtain employment	48%	55%	60%	60%
% of welfare recipients who retain jobs	42%	29%	55%	55%
% of cases closed due to earnings	30%	30%	35%	35%

* Numbers are dependent on receipt of funding.

Resources

Personnel

Personnel information is recorded in Fund 2740.

Funding

	2005 Actual	2006 Actual	2007 Actual	2008 Current Year Estimated	2009 Adopted by Board
Revenues					
Intergovernmental Revenue	\$1,188,804	\$1,299,845	\$1,317,551	\$1,275,613	\$814,112
Charges for Services					
Other Revenue					
Other Financing Sources					
Total Revenues	\$1,188,804	\$1,299,845	\$1,317,551	\$1,275,613	\$814,112
Expenditures					
Personnel Services	\$140,496	\$214,052	\$198,529	\$198,968	\$201,252
Supplies	\$60,675	\$26,981	\$8,844	\$18,831	\$19,513
Other Services & Charges	\$939,205	\$1,087,300	\$1,131,096	\$1,057,814	\$593,347
Capital Outlay			\$1,887		
Total Expenditures	\$1,140,376	\$1,328,333	\$1,340,356	\$1,275,613	\$814,112

Budget Highlights:

The 2009 Budget does not reflect all Grant awards because the County was not notified of the amounts until after the preparation of the above statement.

Fund: 2749 Workforce Investment Act - 3/31 Grant Programs

Function Statement

This fund accounts for various fiscal year ending 3/31 grants.

Resources

Personnel

Personnel information is reported in Fund 2740.

Funding

	2005 Actual	2006 Actual	2007 Actual	2008 Current Year Estimated	2009 Adopted by Board
Revenues					
Intergovernmental Revenue	\$22,453	\$39,848	\$24,153	\$16,780	\$17,500
Other Revenue					
Total Revenues	\$22,453	\$39,848	\$24,153	\$16,780	\$17,500
Expenditures					
Personnel Services	\$3,712	\$6,248	\$1,624		
Supplies	\$79	\$3,746	\$2,226		
Other Services & Charges	\$18,664	\$29,852	\$20,302	\$16,780	\$17,500
Total Expenditures	\$22,455	\$39,846	\$24,152	\$16,780	\$17,500

Budget Highlights:

This fund can vary depending on whether grants have been extended or have ended as well as the award amount received from the State. Consequently, the budget can vary significantly from year to year.

Fund: (2800) Emergency Feeding

Function Statement

The Emergency Feeding Program distributes surplus USDA food items four months out of the year to eligible applicants. The Commodities Supplemental Food Program (CSFP) distributes twelve months out of the year to eligible seniors and Mothers, Infants and Children program applicants.

Mission Statement

Reduce the effects of poverty within Ottawa County.

COMMUNITY SUPPLEMENTAL FOOD PROGRAM/THE EMERGENCY FOOD ASSISTANCE PROGRAM (CSFP/TEFAP)

Goal: To strengthen needy families by providing food assistance.

Objective: To provide USDA supplemental foods to eligible households monthly (CSFP).

Measure: # of individuals obtaining food monthly

Objective: To provide The Emergency Food Assistance Program (TEFAP) quarterly.

Measure: # of individuals receiving food quarterly

Measure	2006	2007	2008 Estimated	2009 Projected *
<i>Output:</i>				
<i># of individuals obtaining food monthly</i>	5,242	5,102	5,004	5,004
<i># of individuals receiving food quarterly</i>	3,552	3,552	4,773	5,180

* Numbers are dependent on receipt of funding.

Resources

Personnel

Personnel information is recorded in Fund 2740.

Funding

	2005 Actual	2006 Actual	2007 Actual	2008 Current Year Estimated	2009 Adopted by Board
Revenues					
Intergovernmental Revenue	\$44,088	\$197,292	\$172,327	\$173,697	\$173,000
Other Financing Sources					
Total Revenues	\$44,088	\$197,292	\$172,327	\$173,697	\$173,000
Expenditures					
Personnel Services	\$21,127	\$17,599	\$14,968	\$17,419	\$26,219
Supplies	\$1,632	\$137,012	\$126,783	\$122,248	\$121,776
Other Services & Charges	\$21,325	\$25,016	\$23,380	\$34,030	\$25,005
Total Expenditures	\$44,084	\$179,627	\$165,131	\$173,697	\$173,000

Fund: 2810 Federal Emergency Management Agency (FEMA)

Function Statement

This fund is used to account for monies received through the Emergency Food and Shelter National Board program for utility payments to prevent utility disconnection or heating source loss in households that have exhausted all other resources and do not qualify for other Community Action emergency funds.

Resources

Personnel

No personnel has been allocated to this department.

Funding

Budget Summary	2005	2006	2007	2008	2009
	Actual	Actual	Actual	Current Year Estimated	Adopted by Board
Revenues					
Intergovernmental Revenue	\$5,000	\$20,000	\$20,000	\$20,000	
Total Revenues	<u>\$5,000</u>	<u>\$20,000</u>	<u>\$20,000</u>	<u>\$20,000</u>	
Expenditures					
Other Services & Charges	\$5,000	\$20,000	\$20,000	\$20,000	
Total Expenditures	<u>\$5,000</u>	<u>\$20,000</u>	<u>\$20,000</u>	<u>\$20,000</u>	

Budget Highlights:

No grant confirmation was received at budget time. Consequently, nothing is budgeted for 2009.

Fund: (2870) Community Action Agency

Function Statement

The Community Action Agency fund is used to account for grant monies to be applied to various community programs for the impoverished residents of Ottawa County. Such grants include employment activities, income management, housing, emergency assistance, and nutrition.

Mission Statement

Reduce the effects of poverty within Ottawa County

Goal: To effectively administer Community Action Agency programs and provide effective customer service by promoting effective partnerships with other agencies.

Objective: To effectively administer Community Action Agency (CAA) programs.

Measure: Utilization of Community Action Agency budget dollars

Objective: To create and maintain partnerships among supporters and providers of service.

Measure: # of partnerships created/maintained

Objective: To assist every household seeking assistance.

Measure: # of applicants assisted

Measure	2006	2007	2008 Estimated	2009 Projected *
<i>Output:</i>				
<i>Utilization of CAA budget dollars</i>	\$216,189	\$311,213	\$290,000	\$290,000
<i># of partnerships created/maintained</i>	26	28	30	31
<i># of applicants assisted</i>	4,220	4,521	4,837	5,176

* Numbers are dependent on receipt of funding.

Resources

Personnel

Personnel information is recorded in Fund 2740.

Funding

	2005 Actual	2006 Actual	2007 Actual	2008 Current Year Estimated	2009 Adopted by Board
Revenues					
Intergovernmental Revenue	\$406,965	\$477,256	\$493,263	\$688,139	\$512,888
Rents					
Other Revenue	\$18,992	\$36,917	\$24,756	\$40,531	\$30,000
Other Financing Sources	\$29,000	\$29,000	\$64,397	\$29,000	
Total Revenues	\$454,957	\$543,173	\$582,416	\$757,670	\$542,888
Expenditures					
Personnel Services	\$200,845	\$218,874	\$274,745	\$412,606	\$368,008
Supplies	\$32,426	\$70,058	\$68,644	\$77,973	\$26,735
Other Services & Charges	\$214,573	\$217,669	\$207,456	\$277,341	\$148,145
Other Financing Uses		\$55,742			
Total Expenditures	\$447,844	\$562,343	\$550,845	\$767,920	\$542,888

Budget Highlights:

This fund can vary depending on whether grants have been extended or have ended as well as the award amount received from the State. Consequently, the budget can vary significantly from year to year.

Fund: (2890) Weatherization

Function Statement

The Weatherization Program supplies funds for weatherizing homes of the disadvantaged, elderly, and impoverished persons. The Weatherization Program also provides energy education.

Mission Statement

Reduce the effects of poverty within Ottawa County

Goal: To improve the conditions in which low-income persons live.

Objective: To provide energy education to customers.

Measure: # of individuals receiving energy-saving education

Objective: To provide energy-savings measures to eligible participants.

Measure: # of homes receiving energy-saving measures

Measure	2006	2007	2008 Estimated	2009 Projected *
<i>Output:</i>				
# of individuals receiving energy-saving education	141	89	90	90
# of homes receiving energy-saving measures	120	81	76	76

* Numbers are dependent on receipt of funding.

Resources

Personnel

Personnel information is recorded in Fund 2740.

Funding

	2005 Actual	2006 Actual	2007 Actual	2008 Current Year Estimated	2009 Adopted by Board
Revenues					
Intergovernmental Revenue	\$185,726	\$306,793	\$254,073	\$206,549	\$263,551
Other Revenue					
Other Financing Sources					
Total Revenues	\$185,726	\$306,793	\$254,073	\$206,549	\$263,551
Expenditures					
Personnel Services	\$34,830	\$82,987	\$66,004	\$46,111	\$48,787
Supplies	\$70,033	\$175,530	\$144,834	\$114,709	\$153,470
Other Services & Charges	\$80,863	\$48,270	\$43,233	\$45,729	\$61,294
Capital Outlay					
Total Expenditures	\$185,726	\$306,787	\$254,071	\$206,549	\$263,551

Budget Highlights:

Grant awards can fluctuate based on need.

Fund: 2900 Family Independence Agency

Function Statement

This fund is used primarily to account for the State of Michigan Department of Human Services activities in Ottawa County. These services include welfare, child protection services, and various other assistance programs to disadvantaged citizens. Currently, the County assists in funding a program aimed at improving parenting skills.

Resources

Personnel

Position Name	2007 # of Positions	2008 # of Positions	2009 # of Positions	2009 Budgeted Salary
Program Director	1.000	0.000	0.000	\$0
Child Abuse Prevention Specialist	0.000	0.000	0.000	\$0
Family Resource Specialist	8.750	1.000	0.000	\$0
	9.750	1.000	0.000	\$0

Funding

	2005 Actual	2006 Actual	2007 Actual	2008 Current Year Estimated	2009 Adopted by Board
Revenues					
Intergovernmental Revenue	\$225,581	\$196,035	\$215,761	\$240,000	\$220,000
Charges for Services	\$35,658	\$44,856	\$33,153	\$36,000	
Interest and Rents					
Other Revenue	\$300	\$565	\$832	\$3,000	\$2,700
Other Financing Sources	\$702,578	\$731,564	\$729,070	\$278,862	\$217,612
Total Revenues	\$964,117	\$973,020	\$978,816	\$557,862	\$440,312
Expenditures					
Personnel Services	\$591,427	\$592,136	\$579,969	\$63,085	
Supplies	\$221,826	\$188,860	\$215,634	\$228,850	\$230,098
Other Services & Charges	\$113,906	\$116,658	\$104,239	\$187,666	\$210,214
Operating Transfers				\$500,000	
Total Expenditures	\$927,159	\$897,654	\$899,842	\$979,601	\$440,312

Budget Highlights:

The Planning and Grants department completed an evaluation of the Parenting Plus program and noted low program completion rates, low caseloads and high per client costs which in turn necessitated a difficult decision to decrease County funding, eliminating 8.75 positions. In 2009 the final position was eliminated. Also, in July of 2007 the Board approved a transfer of \$500,000 to cover a portion of the Grand Haven and West Olive building project costs, the transfer took place in 2008.

Function Statement

The Child Care fund accounts for various programs provided for abused/neglected and/or delinquent juveniles. These programs include detention, intensive supervision, in-house treatment programs and community intervention programs. The goals, objectives, and performance measures are reflected in the Juvenile division of the Family Court, recorded in the General Fund (1010-1490).

Resources

Personnel	2007	2008	2009	2009
Position Name	# of	# of	# of	Budgeted
Position Name	Positions	Positions	Positions	Salary
Detention Superintendent	1.000	1.000	1.000	\$63,258
Assistant Superintendent	1.000	1.000	1.000	\$59,200
Assistant Director of Juvenile Services	0.875	0.875	0.875	\$65,450
Training Coordinator	1.000	1.000	1.000	\$50,733
Administrative Aide	4.000	4.000	4.000	\$137,496
Group Leader - Juvenile	6.000	6.000	6.000	\$237,317
Youth Specialist	19.650	19.650	18.650	\$630,516
Shift Supervisor	4.000	4.000	5.000	\$260,538
Casework Services Manager	1.000	1.000	1.000	\$61,071
Senior Caseworker	2.000	2.000	2.000	\$108,078
Treatment Specialist	6.000	6.000	6.000	\$317,268
Programs Supervisor	1.000	1.000	1.000	\$57,328
Treatment Services Manager	1.000	1.000	1.000	\$61,071
Caseworker	11.000	11.000	11.000	\$526,507
Assistant Juvenile Register	1.000	1.000	1.000	\$35,009
Sergeant	0.300	0.300	0.000	\$0
Lieutenant	0.000	0.000	0.300	\$21,738
Assessment Unit Coordinator	1.000	1.000	1.000	\$55,676
Deputy	3.000	3.000	3.000	\$170,769
	64.825	64.825	64.825	\$2,919,023

Funding

	2005	2006	2007	2008	2009
	Actual	Actual	Actual	Current Year	Adopted
	Actual	Actual	Actual	Estimated	by Board
Revenues					
Intergovernmental Revenue	\$2,912,947	\$3,648,195	\$3,804,722	\$3,784,479	\$3,855,961
Other Revenue	\$599,894	\$566,104	\$594,836	\$632,377	\$638,900
Other Financing Sources	\$3,846,024	\$3,974,892	\$4,081,921	\$4,158,115	\$4,045,802
Total Revenues	\$7,358,865	\$8,189,191	\$8,481,479	\$8,574,971	\$8,540,663
Expenditures					
Personnel Services	\$3,309,913	\$3,855,089	\$3,998,226	\$4,094,599	\$4,345,200
Supplies	\$177,961	\$204,715	\$271,684	\$242,618	\$237,642
Other Services & Charges	\$3,396,434	\$4,049,575	\$4,158,973	\$4,144,332	\$3,957,821
Operating Transfers				\$500,000	
Total Expenditures	\$6,884,308	\$8,109,379	\$8,428,883	\$8,981,549	\$8,540,663

Budget Highlights:

2005-2007 Other Services & Charges include nearly \$1 million for the expansion of the web-based case management system. 2008 reflects a one time transfer to the Building Authority fund for the construction of the Grand Haven/West Olive building projects.

Fund: 2921 Child Care-Social Services

Function Statement

The Child Care - Social Services fund is used to account for the foster care of children under the direction of the Ottawa County Family Independence Agency.

Resources

Personnel

No personnel has been allocated to this department.

Funding

Budget Summary	2005 Actual	2006 Actual	2007 Actual	2008 Current Year Estimated	2009 Adopted by Board
Revenues					
Intergovernmental Revenue	\$18,583	\$21,450	\$22,397	\$10,907	\$2,500
Other Revenue					
Other Financing Sources	\$20,000	\$26,500	\$21,125	\$10,907	\$2,500
Total Revenues	\$38,583	\$47,950	\$43,522	\$21,814	\$5,000
Expenditures					
Other Services & Charges	\$37,220	\$42,900	\$44,063	\$21,814	\$5,000
Total Expenditures	\$37,220	\$42,900	\$44,063	\$21,814	\$5,000

Fund: 2930 Soldiers & Sailors Relief

Function Statement

The Soldiers & Sailors Relief Commission determines the eligibility of claims from indigent veterans and authorizes the requested payments. Eligibility is determined by the time and length of service during an armed conflict, honorable discharge, and length of residency in Ottawa County.

Resources

Personnel

No personnel has been allocated to this department.

Funding

Budget Summary	2005 Actual	2006 Actual	2007 Actual	2008 Current Year Estimated	2009 Adopted by Board
Revenues					
Other Financing Sources	\$90,000	\$100,719	\$30,485	\$42,140	\$42,140
Total Revenues	\$90,000	\$100,719	\$30,485	\$42,140	\$42,140
Expenditures					
Other Services & Charges	\$90,001	\$100,719	\$30,485	\$42,140	\$42,140
Total Expenditures	\$90,001	\$100,719	\$30,485	\$42,140	\$42,140

Budget Highlights:

In 2007 the Board approved new County regulations, defining available assistance as well as restrictions to both the total dollars available, and the number of occurrences within a six month period for which assistance is provided. A document verification process and a five member oversight committee were also established.

Fund: 2940 Veterans Trust

Function Statement

The Veteran's Trust fund was established under Section 35.607 of the State of Michigan Compiled Laws of 1970. It is used to account for monies received by the state and distributed to needy veterans

Resources

Personnel

No personnel has been allocated to this department.

Funding

Budget Summary	2005 Actual	2006 Actual	2007 Actual	2008 Current Year Estimated	2009 Adopted by Board
Revenues					
Intergovernmental Revenue	\$21,808	\$21,673	\$28,376	\$28,000	\$14,404
Other Financing Sources					
Total Revenues	\$21,808	\$21,673	\$28,376	\$28,000	\$14,404
Expenditures					
Other Services & Charges	\$21,808	\$21,898	\$28,609	\$28,000	\$14,404
Total Expenditures	\$21,808	\$21,898	\$28,609	\$28,000	\$14,404

Budget Highlights:

The 2009 Budget reflects one-half of the dollars available from the State of Michigan for Veteran's in need of assistance. Additional funds may be requested from the State as needed.