

Public Health

Annual Report

-2012-



Assuring conditions in which all people can achieve optimal health

Public Health 2012

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We are proud to present the 2012 Ottawa County Health Department Annual Report. Although the report provides just a snapshot of our services, you will find many examples of how our department is achieving its strategic objectives to improve the health of our population.

There are many organizations involved in healthcare so why is your local health department important? Local public health agencies are mandated by law to perform certain functions that prevent rather than treat illness and disease, and as a result, save health care costs. Regulating food establishments like restaurants, assures that all necessary precautions are being taken to prevent food borne illness outbreaks. Providing immunizations protects adults and children from diseases like pertussis (whooping cough) and cancer. Providing home visits to pregnant women receiving Medicaid increases healthy birth outcomes and improves child development. Partnering with local farmers and the City of Holland Farmers Market increases access to fresh, healthy food for those living below the poverty level; and monitoring and controlling the spread of communicable disease protects our community from epidemics.

Our goal is to perform these services using a model that is effective; we can prove it works, efficient; it is high quality and adds value to our community, and is data driven; based on identified public health needs. To achieve these goals we have invested in core business processes and continuous quality improvement, better use of technology, leadership training and development, strategic partnerships to solve community health problems, and improved communications and outreach to the community. All this has contributed to a state accredited, high performing health department and one of the healthiest counties in Michigan.

I would like to thank the Ottawa County Board of Commissioners for their vision and support of public health, and the staff for their exceptional work and commitment.

Clinic Health Services

Clinic Services are provided out of homes, schools, clinics and community locations. Programs include: Communicable Disease prevention; Sexually Transmitted Disease (STD) Clinics; Immunization Services, Travel Clinic, information for travel and immunizations; Family Planning medical exams, pregnancy testing/counseling, prescription birth control, and education.

Immunizations

The Immunization Program, for the past nine years, has been providing immunization education meetings for local physician offices. At these meetings, the latest immunization information from the Centers of Disease Control, the Michigan Department of Community Health, and the U.S. Food and Drug Administration is shared with provider office staff. Providers have an opportunity to ask detailed questions and receive guidance from program staff. In addition, the meetings establish immunization coverage goals for the County's two year old and adolescent (13-18 year olds) populations. Each office makes a concerted effort to fully immunize the children in their practice so that Ottawa County can be safe from vaccine preventable diseases (such as whooping cough, measles, and chickenpox).

Ottawa County's immunization rates for the two year old and adolescent populations are consistently one of the highest, if not the highest, in Michigan. As of January 2013, 84% of the county's two year olds were fully immunized and 76% of the 13-18 year olds were fully immunized. In contrast, the percentage of two year olds, and adolescence fully immunized in the State was 74% and 53%, respectively. Ottawa County's exceptional results reflect the collaborative effort of the Health Department and local health care providers.

Clinic Health	2012
School Children Compliant with Immunization Law	97%
Travel Clinic Client Encounters	689
Travel Immunizations Administered	1,291

Communicable Disease Prevention

The Michigan Department of Community Health oversees the Infertility Prevention Project (IPP) in Michigan. This project was made available through a grant from the Centers for Disease Control and Prevention (CDC) and supports a large portion of gonorrhea and chlamydia screening in local public health STD and Family Planning Clinics. Approximately 1,600 vouchers for testing were utilized through the Health Department.

Early screening and treatment saves the state millions in public and private health care dollars each year. If detected early, chlamydia and gonorrhea can be easily treated with antibiotics avoiding the high cost of Pelvic Inflammatory Disease (PID) and later infertility problems. Many persons do not notice symptoms, and so do not know they have this infection. CDC recommends annual screening for all sexually active women between the ages of 15 and 24.

Chlamydia is the most common sexually transmitted disease in Ottawa County. The Ottawa County Health Department investigated over 550 confirmed cases of chlamydia in 2012. Even though the department believes chlamydia is highly underreported, the investigation process allowed for the opportunity to ensure at least 550 Ottawa County residents and their partners received educational, risk reduction counseling, testing, and treatment, as well as referral to care and other support services. The Health Department is committed to helping reduce transmission of disease, lesson complications, and reduce the disease burden in the community.

Clinic Health	2012
Sexually Transmitted Disease Client Encounters	2,791
STD Treatments Administered	385
HIV Tests Performed	909
Communicable Disease Investigations	1,253
STD & Pregnancy Prevention Education Participants	2,000
Pregnancy Prevention Client Encounters	2,185
- Uninsured	67%
- Low Income	95%
- Plan First	47%

Community Health Services

Community Health Services provides quality support, education and prevention programs to families, children and pregnant women throughout Ottawa County. Services are provided at the Health Department, in clinic settings, in homes, in schools and in community locations.

Children's Special Health Care

In Michigan one out of every 1000 Caucasian babies and 7 out of every 1000 Hispanic babies die before their first birthday. Among our African American population, that rate is 14 out of every 1000 births. In response, Governor Rick Snyder has identified the reduction of infant mortality as a top priority in his plans to make Michigan a healthier State for all of us to live.

A particularly high-risk population of infants receives life-saving care after birth in the hospital Neonatal Intensive Care Unit (NICU). Once home, these infants often require a high amount of care both from medical specialists and from community agencies. To help these children be the healthiest they can be, Ottawa County Health Department in collaboration with Michigan Department of Community Health developed and is piloting a home visiting service for families whose babies have had a NICU stay.

A Children's Special Health Care Services nurse meets with the family twice. One visit is conducted prior to their infants' hospital discharge, aiming to prepare the family for a safe transition to home. The other meeting is planned with the family 1-2 weeks after hospital release to explore potential problem areas for the family and their new baby by asking questions and inviting them to share their concerns and questions. In response to parent and infant needs, the nurse provides support, education, and connections to community resources.

Maternal and Infant Health

The first years of a child's life are critical to forming normal relationships and trust in the future. The Maternal Infant Health Program of the Ottawa County Health Department is working in collaboration with Ottawa County Community Mental Health to provide Infant Mental Health Services (IMH) to meet the needs of high risk infants from birth through age four years.

Many of the infants who participate in IMH have experienced emotional or physical trauma. Health Department, Infant Family Specialists are able to provide education and support to the caregivers of these children. Often, the parents, grandparents, or foster parents do not fully grasp the impact of the trauma, the long term importance of the infant's attachment to the caregiver, and trauma's effect on brain development. The specialists assist families to recognize this developmental process and give them the tools to help the child establish trusting relationships with their caregivers. Research demonstrates that IMH services provided to address risk factors in infancy and toddlerhood assists in improving long term quality of life, and prevents the need for costly support services later in life.

Hearing and Vision Screening

An undiagnosed hearing or vision problem can prevent a child from learning, harming them academically and socially. Children must be screened for both hearing and vision at least once between the ages of 3 and 5 before they may enter Kindergarten. In the school setting, hearing is screened during Kindergarten, 2nd grade, and 4th grade. Vision is screened in 1st grade, 3rd grade, 5th grade, 7th grade, and 9th grade or in conjunction with driver's education. This is because both hearing and vision can change significantly as children grow. Health Department technicians screen thousands of children annually, both in schools and at Health Department facilities. An average of ten percent of children screened for vision and five percent screened for hearing are referred to specialists for follow-up care.

<u>Community Health</u>	<u>2012</u>
Infant Mental Health Home Visits	150
Maternal & Infant Health Program Home Visits	2,671
Children Screened for Vision	17,946
Children Referred for Vision Follow-up	1,277
Children Screened for Hearing	14,579
Children Referred for Hearing Follow-up	423

Miles of Smiles Dental Program

A ten year old boy came on board the “Miles of Smiles” mobile dental van, and sat down on the bench in the waiting area next to another boy. The other boy asked, “What is wrong with your teeth?” The boy sat quietly, not saying anything. Later, with further questioning from staff, the dental team discovered that this boy was being teased by other kids at school. He had two extra front teeth.

The dental staff examined the boy, took x-rays and discovered he desperately needed orthodontic treatment (braces). The Dental Clinic Manager contacted one of the program’s volunteer dentists; an area orthodontist. After examining the x-rays, and noting significant dental challenges for the young boy, the orthodontist generously offered to see him at her practice office for a full evaluation and provide the orthodontic treatment at no cost to the family. Prior to completing the orthodontic work, “Miles of Smiles” was able to extract the extra teeth. “Miles of Smiles” informed the child’s school of the additional orthodontic care being provided and the school volunteered to make certain he would make it to his orthodontic appointments; even if they had to take him there. To date, the boy has been receiving orthodontic treatment for over a year with excellent results being reported.

<u>Community Health</u>	<u>2012</u>
Dental Unit Exams, Screenings & X-Rays	2,307
Dental Unit Cleanings & Preventative Treatments	3,166
Dental Unit Restorative Services & Oral Surgeries	1,134
Dental Unit Health Education	890
In-School Dental Sealant Screenings/Exams	490
In-School Dental Sealant Placements	1,607
In-School Fluoride Treatments	483
In-School Dental Health Education	1,885
Head Start Fluoride Varnish Screenings	236
Head Start Fluoride Varnish Applications	232

Health Promotion

As part of the Community Health section of the Health Department, this specialized team strives to create positive health behaviors that enable communities to improve their health. The Health Promotion team provides collaborative community project development, direction and leadership in the areas of health education, substance abuse prevention, and chronic disease prevention.

Holland Farmers Market

Access to fresh produce is critical to establishing healthy eating within a community. However, many people do not have the means to obtain healthy food due to cost, lack of availability in their community, or transportation. This is especially true within the City of Holland where areas have nearly 30% of the population at or below the Federal Poverty Level, and many residents have low access to a supermarket or large grocery store.

The Health Promotion team of the Health Department (OCHD) received a federal grant through the USDA Farmers Market Promotion Program. This funding allowed the OCHD to collaborate with the City of Holland to implement an Electronic Benefit Transfer (EBT) system at the Holland Farmers Market. The EBT system allows families receiving the Supplemental Nutrition Assistance Program (SNAP) to use their SNAP benefits at the market. During the 2012 market season, 506 individuals used their SNAP benefits at the Holland Farmers Market, and these benefits accounted for over \$22,400 in sales. Overall, this program has increased access to, and affordability of healthy foods for many local low income families. In addition, the program provided local farmers with a broader market and increased income.

<u>Community Health</u>	<u>2012</u>
SNAP Market Revenue	\$22,400
Low-income families received Nutrition Education at SNAP events	729
Bridge Card Users at Holland Farmers Market	506
Students participated in Safe Routes to School	2,436
Retailers Complying with Youth Tobacco Sales Law	91%
Retailers Complying with Youth Alcohol Sales Law	94%
Responsible Beverage Service Training Participants	333
Alcohol & Drug Test Kits Sold	302

Environmental Health Services

Environmental Health Services protect public health by ensuring risks from exposure to environmental hazards are minimized through prevention, identification, and response.

Food Safety

From 1978-2012, Ottawa County extended a contract to the City of Holland to conduct inspections of restaurants and food service facilities within the city boundaries. The contract with Holland City expired in April of 2012. Prior to the contract expiration date, the Health Department set out to evaluate the needs of the food inspection program, the inspection program within the City of Holland, and the capacity for the Health Department to retain the city inspection work.

An extensive evaluation of staffing levels and resources required for food inspections in the City of Holland, and the potential cost/revenue generated by taking on the Holland program was completed. It was determined that the Health Department would net an additional \$28,000 in license revenue and increase quality assurance measures by retaining the food establishment inspections within the City of Holland. Health Department inspections of the 100 food establishments in Holland began in April, 2012, with an overwhelmingly positive response from inspected establishments, collected from ongoing post inspection surveys.

Solid Waste Program

In 2012, the Waste Program built upon the progress made in 2011. The pharmaceutical take-back program was expanded by adding 5 pharmacies bringing the total to 17 locations county-wide accepting unwanted medications. The program collected and disposed of 2,300 pounds of medications in 2012.

Additionally, the Waste Program worked closely with Zeeland Township and Autumn Hills landfill on a proposed expansion of the permitted landfill space. This will secure needed area for future solid waste disposal and allows Zeeland Township to move forward with the design and implementation of a recreational area on landfill property.

Environmental Health	2012
Food Inspections Conducted	2,388
Food Service Workers Trained in Food Safety	161
Food Service Complaints Investigated	61

Environmental Field Services

The Ottawa County Health Department (OCHD) proposed changes to the Environmental Health Real Estate Evaluation Program in 2012. The Real Estate Evaluation Program was made law by the inclusion in the Ottawa County Environmental Health Code, and became mandatory on June 1, 1984. As such, an evaluation is required prior to the sale or transfer of ownership of any home or business served by an onsite water supply system or wastewater disposal system. A copy of the evaluation report is required to be provided to the buyer at time of closing.

The OCHD had received feedback regarding the Real Estate Evaluation Program and report format. Many buyers, Realtors, and lenders were confused by the wording of the report. As a result, the OCHD formed a Real Estate Policy Revision Workgroup to develop a new policy that would better meet the needs of stakeholders and the department. The workgroup consisted of realtors, lenders, and the health department. This group met to discuss the purpose of the Real Estate Evaluation Program, as well as possible revisions needed to the existing policy.

Due to the collaborative effort with community stakeholders, the Real Estate Evaluation Policy was revised to better meet the needs of Ottawa County and the community. The changes were approved by the Board of Commissioners with the full support of the workgroup. The new policy and report will help to provide more clear information to buyers, realtors, and lenders, as well as provide a better mechanism for standardization of OCHD staff.

<u>Environmental Health</u>	<u>2012</u>
Real Estate Evaluations	1,144
Drinking Water Samples Collected	1,742
Well Permits Issued	311
Well Inspections Performed	878
Septic Permits Issued	478
Environmental Complaint Investigations	49
Beaches Monitored for Water Quality	17
Resource Recovery Service Centers Customers	13,429
Gallons of Hazardous Waste Collected	8,275
Pounds of Solid Hazardous Waste Collected	93,021
Pounds of Pesticides Collected	22,059
Cubic Yards of Recyclables Collected	3,450
Recycling Memberships	728

Public Health Administration

Public Health Administration manages the daily operations of the three Health Department facilities, four recycle centers and over 80 dedicated staff. Administration also oversees Public Health Preparedness, Epidemiology, Medical Examiner, Electronic Medical Records (EMR) system, Public Health Communication, and Public Health Accreditation.

Public Health Accreditation

In 2012, the Health Department completed the Michigan Public Health Accreditation Program onsite review. The Michigan Local Public Health Accreditation Program is a systematic review of local health department powers and duties, local public health operations, and some grant funded services provided by a local health department.

During this extensive process, reviewers from various state agencies examined the operations of the health department. This included audits of required documentation; observation of service provision; an evaluation of compliance with the mandates set forth by the Michigan Public Health Code, the Michigan Food Code and other relevant laws.

The department not only received "Accreditation" status, but received "Accreditation with Commendation". To receive this commendation, a local health department must meet 95% of essential indicators for the mandated services, miss not more than 2 indicators in each program area, have zero repeat indicators (from the last cycle) and meet the program requirements for the voluntary quality improvement section. The department is proud to have met all accreditation indicators.

Community Health Needs Assessment

In early 2011, the Ottawa County Health Department partnered with Holland Hospital, North Ottawa Community Hospital, Spectrum Health Zeeland Community Hospital, Community Mental Health and the United Way to form the Ottawa County Community Health Needs Assessment (CHNA) Task Force. The purpose of the task force was to develop and finance a coordinated system for assessing county and region level health with the overarching goal of having comprehensive baseline health data for consistent trending over time.

On April 25, 2012 the Ottawa County CHNA was released to the public, satisfying with one document the accreditation, IRS, and core organizational requirements of the task force partners; further, the CHNA provided content for the Health Section of the broader 2012 Community Assessment for Ottawa County developed by the United Way. Bids received for just one portion of the CHNA were upwards of \$65,000. With in-kind contributions from each partner organization and a grant from the Grand Haven Area Community Foundation, the additional financial outlay for the project was under \$31,000 with Ottawa County contributing a total of \$16,300 between the Community Mental Health and Public Health departments.

Meaningful Use Certification

In 2011, the department began the process to become federally “Meaningful Use” certified as part of the Health Information Technology for Economic and Clinical Health (HITECH) Act. This multi-step process aligns the department’s current processes for managing electronic health records to a federal standard that will facilitate the ability of the department to share critical health information with other certified care providers. In 2012 the Ottawa County Health Department completed Meaningful Use, Stage I requirements and received \$63,750 in federal funding.

Epidemiology and Emergency Preparedness

Although the U.S. food supply is the safest in the world, based on national statistics it is estimated that nearly 45,000 cases of detected and undetected foodborne illness occur in Ottawa County each year. Many of these are never reported since most people don't associate an episode of nausea, diarrhea or vomiting to food or drink they consumed – nor do they realize the importance of reporting suspected foodborne illness to local health departments. As a result of hospitalizations, deaths, lost work time and other impacts, foodborne illness is expensive, costing an estimated \$1,850 each time someone gets sick – or \$82.5 million annually in Ottawa County.

In late July of 2012, Holland Hospital contacted the Ottawa County Health Department with reports of several residents seeking out emergency care for similar symptoms and all reporting a meal at the same restaurant on the same day. Once health department investigation confirmed that an outbreak was occurring from meals eaten at this restaurant over additional days, the department worked in collaboration with the restaurant to temporarily close the establishment. In such cases, the primary concern of public health is to prevent the spread of illness in the community. Due to this action, spread of gastrointestinal illness from this source was contained. Analysis revealed that 244 cases of illness were reported from food eaten over the course of 5 days up until the restaurant voluntarily closed. Laboratory testing identified norovirus as the cause of illness.

The outbreak illustrated the quality and detail the health department provides in responding to both the ill individuals and local facilities. In such situations, the response team must collect data, make quick decisions based on available information, monitor the effects of those decisions and make necessary adjustments – sometimes within hours or minutes. Overall, this outbreak provided a quality assurance check on the health department's emergency foodborne illness protocol(s), the health and strength of community partnerships, and the culture of teamwork and internal support within the department.

Financial Statement

	2007/08 Actual	2008/09 Actual	2009/10 Actual	2010/11 Actual	2011/12 Actual
Revenues					
Licenses & Permits	\$392,769	\$404,832	\$459,368	\$552,669	\$691,093
Intergovernmental Revenue	\$4,055,163	\$3,572,158	\$4,392,368	\$5,133,020	\$3,903,051
Charges for Services	\$804,897	\$600,571	\$611,695	\$627,960	\$271,925
Interest & Rent	\$0	\$0	\$0	\$0	\$0
Other Revenue	\$223,774	\$218,015	\$241,946	\$199,754	\$197,529
Total Revenues	\$5,476,603	\$4,795,576	\$5,705,377	\$6,513,403	\$5,063,598
Expenditures					
Personnel Services	\$6,525,928	\$6,238,358	\$6,123,262	\$5,877,766	\$5,891,724
Supplies	\$1,780,394	\$1,151,064	\$1,271,842	\$1,224,418	\$1,026,358
Others Services & Charges	\$2,191,313	\$1,906,773	\$1,834,892	\$1,619,228	\$1,702,687
Capital Outlay	\$241,471	(\$8,087)	\$13,032	\$5,760	\$0
Total Expenditures	\$10,739,106	\$9,288,108	\$9,243,028	\$8,727,172	\$8,620,769
Excess (deficiency) of revenues over (under) expenditures Health Operations	(\$5,262,503)	(\$4,492,532)	(\$3,537,651)	(\$2,213,769)	(\$3,557,171)
Jail					
Revenue	\$13,397	\$6,180	\$0	\$0	\$0
Expenditures	\$795,491	\$268,752	\$0	\$0	\$0
Excess (deficiency) of revenues over (under) expenditures Jail Health	(\$782,094)	(\$262,572)	\$0	\$0	\$0
Excess (deficiency) of revenues over (under) expenditures - Total	(\$6,044,597)	(\$4,755,104)	(\$3,537,651)	(\$2,213,769)	(\$3,557,171)
Other Financing Sources (Uses):					
Transfers in	\$6,201,489	\$4,743,828	\$3,537,651	\$3,084,996	\$3,557,171
Transfers out	(\$1,300,000)			(\$871,527)	
Total Other Financing Sources (Uses)	\$4,901,489	\$4,743,828	\$3,537,651	\$2,213,469	\$3,557,171
FTE (Employees)					
Health Operations	98.78	92.38	85.08	84.13	85.35

Board of Commissioners

The activities and programs of this department are brought to you by the members of the Ottawa County Board of Commissioners; Stuart Visser, Joseph Bauman, Donald Disselkoen, Allen Dannenberg, James Holtrop, Dennis Van Dam, James Holtvluwer, Greg DeJong, Philip Kuyers, Roger Bergman, and Matthew Fenske.

