ANNUAL REPORT FY 2009-2010

Tuscola County Health Department 1309 Cleaver Road, Suite B Caro, Michigan 48723 Ph: 989-673-8114 FAX: 989-673-7490 www.tchd.us





Tuscola County Health Department Mission, Vision Statement and Vision Priorities

Mission

We are dedicated to promoting and protecting the health of Tuscola County residents by providing a wide range of quality human and environmental services.

Vision

The Tuscola County Health Department will be recognized by the public, medical community and collaborative partners as a valuable asset in providing resources and innovative approaches to health promotion and protection in the community.

Vision Priorities

We engage the community to meet their health care concerns while recognizing

the community's social, environmental, behavioral, economical and physical well being

We adapt programs and services to meet the needs of the community

We play an integral role in emergency preparedness

We pursue funding avenues that coincide with our mission and vision

We have effective public relations that promote our services

We utilize advancements in technology to improve community services

We engage in educational opportunities that advance the knowledge of our staff

Effective teamwork is present among employees

·Respond to the community/individual needs

Health Officer Gretchen Tenbusch, R.N., M.S.A.

The Tuscola County Health Department is always striving to improve service delivery to our residents. We know that prevention is cheaper than treatment in the long run. We will endeavor to find ways to continue programs and projects to improve the health of our community.

During Fiscal Year 2009-2010 the agency saw the implementation of the ARRA/HiTech law. To come in compliance with the law, the agency staff reviewed many electronic health record (EHR) systems before making the decision on which EHR best met the needs of the agency. Implementation of the EHR will occur in the next fiscal year.

Fiscal Year 2009-2010 saw many significant events such as the mass vaccination clinics held in response to the H1N1 flu outbreak. Conducting these clinics was a real time utilization of the Incident Command structure within our agency. The Smoke Free Law and Cottage Food Bill were also enacted in this fiscal year.

Thanks to the dedication of the hardworking staff of this agency, the Tuscola County Health Department was once again presented a certificate of Accreditation by the Michigan Department of Community Health and the Accreditation Commission.

Funding cuts resulted in programs tightening their budgets even more. One cost saving measure enacted in Fiscal Year 2009-2010 resulted in the sharing of the Environmental Health Director between Huron and Tuscola County Health Departments.

On behalf of the Tuscola County Health Department staff, I am pleased to present this Annual report. This report is intended to highlight the accomplishments for the Fiscal Year 2009-2010. These accomplishments were possible due to the hard work and dedication of the Health Department staff and the involvement of the Board of Health and Board of Commissioners.

Tuscola County Health Department 10/01/2009-09/30/2010 Employee List

10/01/2009-09/30/2010 Employee List			
NAME	TITLE	HIRE DATE	
Amend, Ron	Veteran Affairs Director	10/01/07	
Anthes, Beth	PHN II	11/13/00	
Barrons, Deb	Program Clerk II	04/27/92	
Bellsky, Sally	PHN II	07/08/92	
Brinkman, Marcy	PHN II	02/23/98	
Brooks, Susanne	Certified Nurse Practitioner	05/03/10	
Bush, Russell M.D.	Medical Director	01/01/08	
Caverly, Doraine	Account Clerk	07/10/78	
Dickinson, Janelle	Clinic Assistant/Clerk II	07/05/89	
Dunham, Patty	Clinic Assistant/Clerk II	10/27/85	
Germain, Kelly	PHN II/Program Coordinator	05/28/91	
Gutierrez, Elva	Clinic Assistant/Clerk II	01/05/93	
Harrington, Lorraine	Registered Dietitian	05/07/86	
Hepfer, Ann	Nursing Administrator	10/31/88	
Johnson, Sue	Program Clerk II	01/07/91	
Kile, Ruth	Program Clerk II	01/04/93	
MacGuire, Tip	Environmental Health Director	07/12/93	
Middaugh, Kris	Billing Clerk	05/27/09	
Mika, Sharon	P.H. Emergency Preparedness Coordinator	08/26/02	
Milazzo, Dianne	Clinic Assistant/Clerk II	01/08/00	
Montei, Susan	Certified Nurse Practitioner	08/22/05	
O'Dell, Kathy	Administrative Services Coordinator	04/05/10	
Peters, Lugene	Program Clerk II	08/06/90	
Pokorski, Kathy	PHN II/Department Coordinator	07/21/03	
Sammons, Bonnie	Fiscal Manager	02/04/10	
Schlund-Tenbusch, Darcy	Certified Nurse Practitioner	04/14/10	
Singer, Kent	Registered Sanitarian III	06/07/95	
Suber, Christina	Social Worker	03/11/98	
Suber, Jon	MIS Manager	09/20/10	
Tenbusch, Gretchen	Health Officer	02/01/88	
VanOchten, Jessica	Hearing & Vision Technician	02/27/06	
Villalobos, Kristi	PHN II/Department Coordinator	09/28/98	
White, Jerry	Registered Sanitarian III	05/15/91	
Williams, Karen	Clinic Assistant/Clerk II	05/08/00	

Medical Director Russell L. Bush, M.D., M.P.H.

Despite an economy that has shown progressive governmental funding cuts for public health programs at the State and Federal levels, the Tuscola County Health Department has continued to provide quality care and services to those residents in the department's programs. The Tuscola County Health Department continues to monitor, provide educational information and services and intervene whenever issues related to communicable disease, environmental contamination, food-borne illness, and commercial product recalls occur.

As Medical Director, I am responsible for the medical/health oversight of and participation in these programs. Problems arising may be either anticipated or unanticipated and be related to communicable/infectious diseases, all forms of environmental contamination, food/water-borne illnesses, and commercial products posing a threat to human health and well being and animal health issues that have the potential for negatively impacting human health.

As you read this report, bear in mind that we all are doing more with less. This is a challenge for your local government decision and policy makers and for the businesses and individuals in the community. Realize that your Health Department continues to watch over the community through surveillance, health policy, and assurance that the public's health is being protected.

MIS Division Jon Suber, MIS Manager

I would like to take this opportunity to introduce myself. I joined the staff at TCHD as MIS Manager on September 20, 2010. I bring with me years of experience working in the MIS division of various healthcare organizations and feel privileged to work with the great staff here.

It is a very busy time as we are beginning a new phase of Information Technology. We are currently working toward implementing our new system in Electronic Medical Record (EMR) called **Insight** from Netsmart Technologies, as well as a web based Environmental Health system and a financial accounting system named **Quantum**. To support all these system changes we have had to make changes to our infrastructure. New wireless access points have been strategically placed throughout the building to supply wireless connectivity to the COWs, (*Computers On Wheels*) which will be used for client charting in exam rooms. There is also public internet access (*Wi-Fi*) for vendors, auditors and our clients to use. All this electronic data demands a reliable backup solution. We have purchased a virtual back up server that addresses multiple requirements of the backup, disaster recovery and business continuity needs of TCHD. We also have offsite storage in case of a total disaster.

In June 2011, we will begin using a new phone system from ShoreTel. This fully digital Voice over IP system presents our staff with a single interface to manage communications using their ShoreTel desk phone, computer or mobile phone. The application integrates with Microsoft Outlook and provides visual voicemail, call notes and routing information.

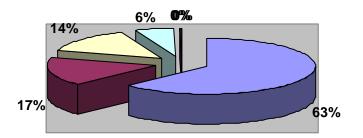
In the upcoming months, TCHD will go LIVE using **Insight** and **HealthSpace**. TCHD will begin using digital signage in our lobby and immunization waiting areas to display important information from the CDC as well as promoting wellness programs and providing education to meet our clients' needs. It is a pleasure being part of such an outstanding organization.

Fiscal Division Bonnie Sammons, Fiscal Manager

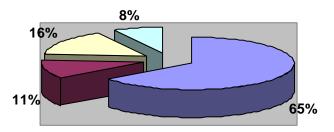
Tuscola County Health Department's Fiscal Division performs all general accounting functions, including accounts receivable, accounts payable, budgeting, payroll, financial reporting and internal control. The accounting policies of the Tuscola County Health Department conform to generally accepted accounting principles as applicable to government units.

2009—2010 BUDGET \$2,822,583

Revenues		
Intergovernmental	62.92%	
Charges for Services	16.76%	
Other Financing Sources	14.22%	
Licensing and Permits	5.84%	
General Contributions	.22%	
Other	.04%	



Expenses		
Personal Health 64.94%		
Environmental Health	11.1%	
Administration	16.13%	
Other	7.83%	



Office of Veteran Affairs Ron Amend, Director

The County Veteran Affairs Director handles Federal, State and County Programs that are available to veterans, widows and dependent children seeking assistance. Federal Programs are VA benefits either in Compensation, Dependence and Indemnity Compensation (DIC), Pension and Retirement Pay, Education, Vocational Rehabilitation, Hospitalization, Home Ioans, Insurance and burial benefits. State programs include: Veteran Trust Fund, Employment, Education, two State operated nursing homes and other programs. County Programs include: Soldiers and Sailors Relief Fund, The Veteran Affairs Office, food banks, and other agencies such as the Human Development Commission.

TUSCOLA COUNTY VA STATISTICS 2009/10			
Office Visits	854	Written communication received	341
Phone Calls Received	1853	Written communication sent	598
Phone Calls Placed	1130	D.A.V. Van used to transport Vets	
Home Visits to Veterans/Widows	27	To V.A. Hospitals	197
Trust Fund Applications (MVTF)	5		
MVTF Amount Granted	\$9,052.76	Hours logged by DAV Van Volun- teers	1006
Soldiers/Sailors Relief Apps.	81		
S & S Amount	\$12,238.21	1	

PARTNERING FOR HEALTH - A Coordinated Access to Care Project

One in three people in Michigan are living at or below the national poverty level. The Thumb, with no tertiary providers, no free clinics, no County Health Plans and no Federally Qualified Health Center has very limited health services for the growing uninsured low-income population.

In August 2007, the Thumb Rural Health Network (TRHN), a 13 member network of the hospitals and health departments located in, or serving, the Thumb met to discuss how to increase access to care for the uninsured. Seeing no clear end to the steady decline of the economy, providers recognized a growing and urgent need and designed a pilot project to address the issues. The resulting project design addresses primary care issues by utilizing a modified medical home concept through a coordinated process. This process maximizes the use of existing services, is integrated with the existing healthcare system, and incorporates expectations and support for personal accountability.

Called, *Partnering for Health Project*, this project emphasizes that there must be a commitment from the patient, as well as the providers, to improve health status. This project is not a free clinic; it is designated to provide the patient with a traditional primary care physician in a routinely scheduled format without cost. Additionally, the project provides vision and dental services at greatly reduced rates. Services are exclusive to residents of the Thumb. Participation in the program, however, is limited.

Program registration for all the services is done at the local health department. The local health department provides Registrars who qualify, register and refer patients to primary care providers through local hospital clinics, and participating optometrists and dentists who agree to provide services at reduced rates. Vision screening is provided for children and adults through participating local optometrists upon referral from the Registrars. The eyeglasses are purchased through the Registrars in conjunction with a state program.

Public Health Emergency Preparedness Sharon Mika, Department Coordinator

The Public Health Emergency Preparedness Department develops plans and educates staff and the community. This is done by performing exercises through drills, tabletop and full scale exercises to test our response to a public health emergency.

The Tuscola County Health Department continues to update the Strategic National Stockpile (SNS) plan which was resubmitted to the state for review. The plan details the health department's response to a mass vaccination or prophylaxis clinic. Call down exercises of primary, secondary and tertiary staff was performed with timed performance measures.

Our worst fears began to come true when the 2009 H1N1 Pandemic influenza began to spread in the United States. The health department moved into action by first trying to prevent the spread of this virus, then into planning mode. No need for exercises, a real event was occurring. The health department reviewed its SNS plan, pandemic flu plan, and Crisis & Risk Communication Plan. Surveillance was enhanced. Press releases were developed and information was sent daily to the schools. Clinic schedules were developed and TCHD went into operation mode. Supplies began to arrive from the SNS and vaccine was provided to healthcare providers in the County who agreed to participate in the vaccination program. Several mass clinics were held in the County with the largest serving 1000 people. A clinic was held in each school district and additional clinics were scheduled at TCHD along with late clinics to accommodate work schedules. These clinics required the coordination of Emergency Management, Law Enforcement and other first responders. Vaccination was limited to target groups and then opened to the public. With the help of our healthcare providers in the County approximately 18% of our population was vaccinated. The virus effected our young population and pregnant women. Fortunately, the fatality rate for this virus was low.

Staff responded with overwhelming enthusiasm with many long hours of preparation and response. This was a good test of our ability to respond to a real Pandemic Influenza Event. Our training and past exercises paid off. The Health Department continues to train staff, update and revise plans based on lessons learned, meet with our first responders and protect the public in Tuscola County.

TOBACCO REDUCTION

Tobacco Reduction efforts are conducted through the Tuscola County Safe Communities Coalition which is a community based coalition comprised of members of human service agencies, schools and the general public. This coalition meets on a quarterly basis, welcomes new members and provides a tobacco resource distribution and referral service to the community. The objectives are to:

1) Develop and maintain community mobilization and awareness around tobacco-related issues.

2) Promotion of tobacco use cessation.

3) Educate local business owners and community members about the Michigan Smoke Free Air Law.

4) Enforce the Michigan Smoke Free Air Law.



Environmental Health Division Tip MacGuire, R.S., Director

Adverse environmental factors have a direct influence on humans. Impacts can be disease transmission through exposure to pathogenic organisms, or by exposure to toxins having a physiological effect on humans. Lesser environmental factors such as living conditions in a home can effect the overall well-being of the persons subjected to the given environment. As a member of the public health team, Environmental Health advocates and promotes disease prevention. Goals are met through enforcement of regulations and programs developed to not only protect public health, but to also control adverse environmental factors. Programs and regulations are grouped into categories of: Water, Shelter, Food, Waste and Community Health. The following statistics falling under these categories reflect the services provided in fiscal year 2009-10.

FOOD SERVICE PROGRAM

Regular inspections are conducted in all food service establishments in Tuscola County. Efforts in this program are key elements in assuring that meals consumed outside of the home are safe.

Fixed Food Service Establish- ments	152	Transitory Food Inspections	11
Fixed Food Service Inspections	446	Vending Location Inspections	7
Temporary Food Inspections	160	Foodborne Illness Investigations	0

WASTEWATER MANAGEMENT

Contact with raw or improperly treated sewage is the major method by which diseases are spread. Proper disposal and treatment of sewage is a critical aspect of protecting public health. Under State and Local Code Enforcement, this division evaluates and issues permits for the installation of all on-site sewage systems in Tuscola County.

On-site Sewage Disposal Permits Issued	106	On-site Sewage Disposal Inspections	202
On-site Sewage Permits (Commercial)	2	On-site Sewage Inspections (Commercial)	1

SURFACE AND GROUNDWATER CONTROL

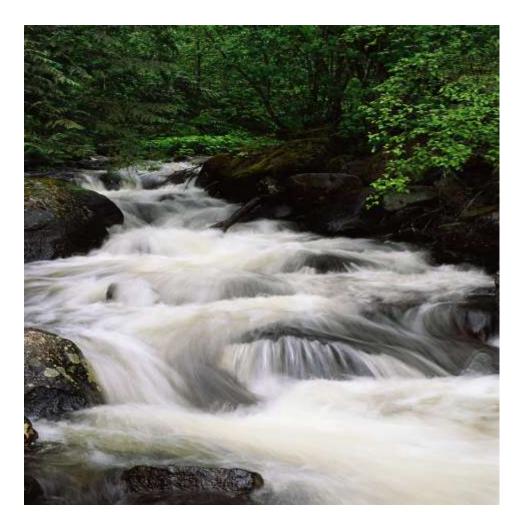
The basics to human life and public health philosophy is the provision that a safe and adequate water supply is available to the individual and public. To this end, all wells in Tuscola County are installed under permit with well locations being reviewed, proper isolations required, final inspections conducted and water sampling performed to determine water quality.

Well Permits Issued	165	Well Permit Final Inspections	119
Complaints Investigated	0	Operation/Maintenance Evaluations	46

ENVIRONMENTAL QUALITY

Additional activities important to health protection cover a range of programs such as: Shelter, Public Swimming Pools, Mobile Home Parks, Hazardous Waste, Solid Waste, Indoor and Outdoor Air, and Campgrounds.

Campground Inspection	12	Adult/Child Care Facility Inspection	35
Public Swimming Pool Inspection	7	Hazardous Waste	2
Solid Waste	2	Animal Control	1
Indoor/Outdoor Air	36	Body Art	49
Ground Water Quality	37	Residential Dwellings/Lead Paint	3
Mosquito/Insect Control	2	Septage Inspections	45



Health Services Division Ann Hepfer, R.N., Nursing Administrator

COMMUNITY HEALTH PROFILE—HEALTH STATUS INDICATORS

The Community Health Profile focuses on five priority areas that were set back in 1999 using a multipurpose collaborative body. Each of these priorities is driven by Healthy People 2010 objectives:

- 1. Healthy Children and Youth
- 2. Access to Care
- 3. Healthy Adults
- 4. Safe Communities
- 5. Healthy Environment

Healthy People 2010 are a comprehensive set of disease prevention and health promotion objectives for the Nation to achieve. They have been created by scientists both inside and outside of government and they identify a wide range of public health priorities that are specific and measurable.

These objectives are an opportunity for individuals to make healthy lifestyle choices for themselves and their families. It also challenges communities to put prevention practices into play, by building healthier communities. It also places demands on all of us to work together to ensure that our communities are safe and healthy environments where people enjoy living.

The goals and objectives can be used to strengthen our community plans, in grant writing, and for bringing increased resources into the area. We encourage health organizations, projects and efforts, to integrate the community-wide goals and objectives into annual work plans and budgetary decisions. Once the Healthy People 2020 objectives are released we will work with our community partners to reevaluate the current plan and address any new issues or priorities that may influence the health of our residents.

Tuscola Counties Goals are indicated below:

Goal 1: Improve Perinatal Health

Goal 2: Increase Immunization Levels

Goal 3: Reduce Child Abuse and Neglect

Goal 4: Reduce Child and Adolescent Deaths

Goal 5: Reduce the Use of Alcohol and Tobacco by Adolescents

Goal 6: Increase Access to Information about Resources Available in the Community

Goal 7: Decrease Economic Barriers to Health Care

Goal 8: Increase Access to Primary Care Services

The full version of the *Tuscola County Community Health Profile* that includes the objectives and data can be accessed at <u>www.tchd.us</u>

WOMEN'S HEALTH PROGRAMS

Breast and Cervical Cancer Control Program (BCCCP): For low to moderate income women ages 40-64. They receive breast and pelvic exams, pap tests, mammograms and follow-up treatment as needed.

Wise Woman Program: Available to those women enrolled in the BCCCP. The program provides an accurate assessment of cardiovascular disease risk factors. This includes screening of blood pressure, cholesterol and diabetes. There is also a personal and family health history as well as current behaviors related to nutrition, physical activity and smoking.

WOMEN'S HEALTH PROGRAMS—2009/10		
Breast and Cervical Cancer Control Program 91		
Wise Woman	86	

MATERNAL/CHILD HEALTH PROGRAMS

Women, Infant and Children (WIC): Serves children from birth to age 5 and pregnant and breastfeeding women who meet the income guidelines. WIC is not only a supplemental food program, it also provides for nutritional information and breastfeeding promotion and support.

Maternal/Infant Health Program (MIHP): Provides home visits and/or office visits to pregnant women and their infants who are on Medicaid. This program is aimed at healthier outcomes for both the pregnant woman and the infant. A team made up of a Registered Nurse, Dietician and Social Worker take a multidisciplinary approach in working with the family.

Children Special Health Care Services (CSHCS): Provides financial support and case management services for children ages birth to 21 with chronic health problems or disabilities.

Prenatal Services: Health Delivery Incorporated provides prenatal care and educational services on site. Clients are seen by midwives and deliver at Bay Regional Medical Center in Bay City.

Hearing and Vision Program: Provides Hearing and Vision screenings in the schools throughout the year and in the summer at the Health Department by trained technicians.

MATERNAL/CHILD HEALTH PROGRAMS—2009/10		
Women, Infant and Children Program—Monthly average	1720	
Maternal Infant Support Services Unduplicated Services	226	
Children Special Health Care Services—Families Enrolled	150	
Pregnant Women Enrolled in Prenatal Services	89	
Hearing Services Preschool/School Age	2069	
Vision Services Preschool/School Age	4030	

FAMILY PLANNING PROGRAM

The Tuscola County Health Department's Family Planning Program philosophy is consistent with the Michigan Department of Community Health and Title X. Family planning is a preventive health measure which impacts positively on the health and well-being of men, women, children and families. Effective family planning programs are essential health care delivery interventions that correlate with decreased high-risk pregnancy and maternal and infant morbidity and mortality. Services provided through family planning clinics allow men and women to make well informed reproductive health choices. The family planning clinic addresses the unmet family planning needs of women at or below, and those slightly above, the poverty level, but still considered low income, and provides access to those with special needs (such as teens and high-risk women). No one is denied services because of an inability to pay.

REPRODUCTIVE	HEALTH	SERVICES-	-2010

Family Planning Unduplicated Clients

SEXUALLY TRANSMITTED INFECTION SERVICES

The mission of the Sexually Transmitted Infection (STI) Program is to reduce the number of STI's through diagnosis, treatment and education. The program operates on an "as needed" basis. Authority is given to the Public Health Department according to Public Health Act 368 of 1978 (revised, October 1993). Due to a reduction in State funding over the past two years, we have curtailed our screening exams. Screening guidelines are in place that serve as a guide to who gets tested. Tuscola County is deemed a "low incidence" area and is allotted only a small number of test kits for free. Once the free kits are depleted we charge for the any additional tests. Our rate of STI's has remained relatively consistent over the past 5 years; the majority of our infections are either Chlamydia or Gonorrhea related.

SEXUALLY TRANSMITTED INFECTION—3 YEAR COMPARISON					
2008 2009 2010					
Chlamydia	68	100	83		
Gonorrhea 8 15 4					
Syphilis Primary 4 1 0					

985

COMMUNICABLE DISEASE

State of Michigan's Michigan Disease Surveillance System (MDSS) is a Web-based communicable disease reporting and tracking system. The purpose of this system is to facilitate coordination among local, State and Federal Public Health agencies to provide secure transfer and analysis of communicable disease patterns. All area laboratories and hospitals report all allowable and reportable infections to the local health departments via MDSS.

COMMUNICABLE DISEASE REPORTS—3 YEAR COMPARISON				
	2007/2008	2008/2009	2009/2010	
AIDS	1	0	1	
Food Borne Illness	22	16	22	
Meningitis-Aseptic	2	1	1	
Meningitis-Bacterial	0	0	0	
Meningitis—other	1	0	1	
Pneumoniae Invasive	4	4	0	
Cryptococcosis	0	1	0	
Flu Like Illness	746	671	1028	
Guillain-Barre'	0	0	1	
Kawasaki	0	0	0	
Legionellosis	1	0	0	
Rabies-Bat	0	0	2	
Chickenpox	11	8	5	
Tuberculosis	0	0	0	
Hepatitis A	0	0	2	
Hepatitis B Chronic	2	0	1	
Hepatitis B Perinatal	0	0	0	
Hepatitis B Acute	3	2	0	
Hepatitis C Acute	0	1	0	
Hepatitis C Unknown	2	0	0	
Hepatitis C Chronic	25	13	13	
Coccidioidomycosis	2	0	0	
Encephalitis	1	0	0	
Hemolytic Uremic Syndrome	0	0	0	
Staphylococcus Aureus Infections	0	0	0	
MRSA	1	0	0	
Mumps	0	0	0	
Pertussis	3	6	3	
Histoplasmosis	0	0	0	
Q Fever	0	0	0	
Streptococcus, Group A	1	1	0	
Influenza—confirmed	3	2	17	
Toxic Shock	-	1	0	

IMMUNIZATION PROGRAM

Immunizations are a very important component of Public Health. The current immunization schedule for adults and children protects against sixteen diseases. New vaccines offered in the past year included Menactra, Hepatitis A, Tdap, and Rotavirus. Special priority projects included outreach clinics to the Amish community and an outreach clinic in Vassar once a month.

IMMUNIZATIONS	2007/08	2008/09	2009/10
Clients immunized	3145	2791	3815
Vaccines administered	7817	6520	7795
Doses distributed	3456	1156	515
School immunization records reviewed	5439	6021	5373
Percent of 19-35 month old children fully immunized in the County	66%	55%	69%
Adult Influenza Vaccine administered	790	1291	401
Pneumococcal Vaccine administered	44	81	59
H1N1 Vaccine administered	0	0	4943

GERIATRIC HEALTH SERVICES			
Dementia Community Presentations	9		
Geriatric Home Visits	6		
Flu Vaccines Administered	954		
Pneumonia Vaccines Administered	176		