ANNUAL REPORT FY 2012-2013

Tuscola County Health Department



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Tuscola County Health Department Mission, Vision Statement and Vision Priorities

Mission

The mission of the Tuscola County Health Department (TCHD) states: We are dedicated to promoting and protecting the health of Tuscola County residents by educating and providing a wide range of quality health, human, and environmental services with respect and integrity.

Vision

The Tuscola County Health Department will continue to be a valuable asset to Community Partners and the Public by providing resources and innovative approaches to health and environmental promotion and protection.

Vision Priorities

- -We empower the community to meet their health care concerns while recognizing social, environmental, behavioral, economic, and physical well being
- -We adapt and create programs and services to meet the needs of the community/individual as they are identified
- -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

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

On behalf of the Tuscola County Health Department staff, I am pleased to present the Annual Report for fiscal year 2012-2013. This report highlights the many services and accomplishments of the Tuscola County Health Department from October 2012 through September 2013.

In addition to providing a wide range of public health services, the Health Department also had to adapt to Electronic Health Records. October 2012 marked the first year of utilizing Electronic Health Records. Along with Electronic Health Records came all of the new corresponding regulations and security measures that needed to be put into place.

While there was a lot of speculation regarding the Affordable Care Act and Medicaid Expansion, the Health Department staff worked with the State to help transition children in the Children's Special Health Care Services program into the Managed Care Environment.

In the midst of all this change, the Health Department continued to provide high quality services to the residents of Tuscola County. On April 24, 2013, the Tuscola County Health Department was awarded Accreditation with Commendation.

Even though the agency faced budget cuts, quality services continued due to the dedicated staff working in the Health Department programs and their innovative ideas. We invite you to read the Tuscola County Health Department's FY 12-13 Annual Report. We hope you find it informative.

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.



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 loans, 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 2012/13 | | | | |
|--------------------------------------|-------------|---|-------------|--|
| Office Visits | 615 | Written communication received | 197 | |
| Phone Calls Received | 1520 | Written communication sent | 385 | |
| Phone Calls Placed | 986 | D.A.V. Van used to transport Vets | | |
| Home Visits to Veterans/Widows | 9 | To V.A. Hospitals | 152 | |
| Trust Fund Applications (MVTF) | 5 | | | |
| MVTF Amount Granted | \$8,500.00 | Hours logged by DAV Van Volunteers | 840 | |
| Soldiers/Sailors Relief Apps. | 52 | Hours logged by Volunteers using their own vehicles (60 Vets) | 240 | |
| S & S Amount Granted | \$17,851.28 | S & S Burial Allowance | \$10,200.00 | |



Management Information Systems Jon Suber, MIS Manager

As we continue to move forward with our electronic medical records system we have also made a couple of enhancements to our facility. These projects have been made possible through grants that TCHD has been awarded.

The first facility enhancement has been the installation of Managed Access Control.



We have given each employee unique key cards and fobs with varying levels of access to ensure the right people have access to different parts of our building. This provides a level of client security while in clinic rooms and waiting areas.



We also identified a need to better protect client conversations while inside our facility. We installed a multi zone sound masking system to help in maintaining speech privacy while in clinic rooms, meeting rooms and hallways. This system covers up unwanted sounds and eliminates the awareness of sound in a given area. This has been a great system to ensure our clients privacy.

Public Health Emergency Preparedness Sharon Mika, Department Coordinator

The Public Health Emergency Preparedness Department develops plans and educates staff and the community to respond in an event or disaster. This is done by performing exercises through drills, tabletop and full scale exercises to test our response to a public emergency and working with our local, regional and state partners.

The Tuscola County Health Department (TCHD) must update the Strategic National Stockpile (SNS) plan, and several other emergency plans, on an annual basis. The current SNS plan was submitted to the state for review and received a score of 97%. The plan details the health department's response to a mass vaccination or prophylaxis clinic. Call down exercises and assembly of primary, secondary, and tertiary staff is performed with timed performance measures on a regular basis.

An Active Shooter exercise was done on June 7, 2013 at the Akron-Fairgrove High School and involved staff and multiple community partners. This exercise was coordinated with the All Hazards Planning Committee, the Akron-Fairgrove Public Schools, police and fire from multiple jurisdictions, as well as other numerous key agencies, who would be needed in this type of incident. This exercise was instrumental in the testing the "Active Incident Response Plan", which was developed after the Sandy Hook incident. This exercise tested the response time of local police, the capabilities of school administrators and staff, implementation of the Web EOC, and other key areas that would be utilized in this type of emergency situation. All exercises maintain a system for continued quality improvement and corrective actions based on After Action Reports (AAR) and Corrective Action Plans (CAP).

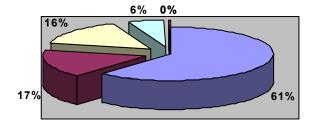
The Health Department continues to train staff, update and revise plans based on the Office of Public Health Preparedness (OPHP) requirements, lessons learned and meet with our first responders and regional partners monthly to protect the public in Tuscola County.

Fiscal Division Bonnie Sammons, Fiscal Manager

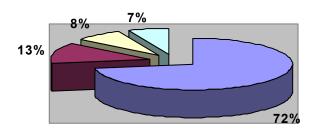
Tuscola County Health Department's Fiscal Division performs all general accounting functions, including accounts receivable, accounts payable, budgeting, payroll, financial reporting and internal control. The accounting policies of the Tuscola County Health Department conform to generally accepted accounting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

2012—2013 BUDGET \$2,753,545

| Revenues | | | |
|----------------------------|--------|--|--|
| Intergovernmental | 61.53% | | |
| Charges for Services | 17.05% | | |
| Other Financing Sources | 15.62% | | |
| Licensing and Permits | 5.64% | | |
| General Contributions | 0.02% | | |
| Other | 0.14% | | |



| Expenses | | | |
|-------------------------|--------|--|--|
| Personal Health | 72.16% | | |
| Environmental Health | 13.32% | | |
| Administration | 7.80% | | |
| Other | 6.72% | | |





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

COMMUNITY HEALTH PROFILE—HEALTH STATUS INDICATORS

The Community Health Profile focuses on five priority areas. 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. Over the course of the next couple of years we will be reviewing the Healthy People 2020 objectives and collaborating with our community partners on conducting a community needs assessment. 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 County's Goals are indicated below along with how we are addressing these goals:

Goal 1: 1) Health Delivery Incorporated no longer provides services at the health department. There were not enough clients utilizing the program. Tuscola County residents deliver at Covenant Health Care in Saginaw, McLaren in Lapeer, Huron Medical in Bad Axe, and Bay Regional, and few clients travel to Genesee County. At this date our infant mortality rates have not gone up as a result of the clinic closure.

Tuscola County Infant Mortality Rate

| Years | Average Number of Deaths | Average Number of Live Births | Average Infant Death Rate |
|-----------|--------------------------|-------------------------------|---------------------------|
| 2010-2012 | 3.7 | 537.7 | 6.8 <u>+</u> 4.0 |
| 2009-2011 | 3.7 | 542.7 | 6.8 <u>+</u> 4.0 |

- 2) Maternal Infant Health Program continues to provide home visitation for Pregnant Women on Medicaid and their infants through the age 1 or longer if a need is identified. The families are visited by a multidisciplinary team which includes a Registered Nurse, Dietician and Social Worker. Average case load is 165 enrollees.
- **Goal 2:** Increase Immunization Levels: 1) We added two Vaccine For Children (VFC) community providers this past year for a total of 7 local providers plus the health department. The health department continues to provide the preponderance of the vaccinations for all age groups. 2) The health department supports the County physicians who provide immunizations by working directly with their offices in ensuring that they have the tools and resources necessary to reach our immunization goals for the county.
- Goal 3: Reduce Child Abuse and Neglect: 1) the health department continued to chair the Tuscola Child Abuse and Neglect Prevention Council and provides the fiduciary services for the \$5000.00 grant. The coalition continues to meet on a quarterly basis. This year we implemented a website where individuals can find information related to safety and prevention. We also conducted fund raisers, and attended events such as the Children's Fun Fair, Parent Awareness Month event, and several other health fairs. The CANPT supports and welcomes the Tuscola Child Advocacy Center and their efforts in reducing child abuse and neglect.

The Kids Count report for 2013 found a big increase – 41 percent – statewide in the number of children living in families investigated for abuse and neglect between 2005 and 2012. A total of nearly 207,000 children – the highest number in 22 years – were living in investigated families in 2012. Tuscola County ranked No. 41 out of 83 counties with 114.3 children per 1,000 living in homes investigated for abuse or neglect compared with the statewide average of 90 children per 1,000.

Goal 4: Reduce Child and Adolescent Deaths: The death review team reviewed data from five deaths in children age 18 and under to address any areas where preventive actions could be taken to prevent future deaths. Three preventive issues were addressed 1) initiatives aimed at reducing illegal use of prescription drugs and raising awareness about the dangers of not keeping prescription medications out of the reach of children. 2) Educational messages in regards to preventing "distracted teenage drivers" 3) Community aimed messages centered on infant Safe Sleep.

Goal 5: Reduce the Use of Alcohol and Tobacco by Adolescents: 1) all of the public health programs provide resources on smoking cessation 2) posters are located throughout the health department with quit line tear off numbers. 3) The Abstinence Education address Tobacco impacts and teaches children ages 11-14 how to say no.

Goal 6: Increase Access to Information about Resources Available in the Community 1) The health department website at www.tchd.us is kept up to date. 2) We have 2-1-1 posters and tear off sheets located in all of the waiting rooms and brochure racks.

Goal 7: Decrease Economic Barriers to Health Care: 1) TCHD had a segment on the Affordable Care Act with links to information and where to get started. 2) We wrote a grant to United Way for funding so that we could assist clients with the MI-Bridges Applications, so they could apply for Medicaid, housing, and food assistance.

Goal 8: Increase Access to Primary Care Services: 1) We supported the expansion of the Federally Funded Health Delivery Incorporated Clinic, in Huron County. Even though the clinic would be in Huron County, Tuscola residents would have options to primary care providers. 2) Continued to follow the Affordable Care Act and provide education to our clients so that October 1, 2013 they would have the tools necessary to apply for health insurance.

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 2012-13.

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 Establishments | 169 | Transitory Food Inspections | 17 |
|-----------------------------------|-----|----------------------------------|----|
| Fixed Food Service Inspections | 437 | Vending Location Inspections | 9 |
| Temporary Food Inspections | 149 | 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 | 108 | On-site Sewage Disposal Inspections | 163 |
|--|-----|---|-----|
| On-site Sewage Permits (Commercial) | 2 | On-site Sewage Inspections (Commercial) | 2 |

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 | 143 | Well Permit Final Inspections | 119 |
|-------------------------|-----|-----------------------------------|-----|
| Complaints Investigated | 4 | Operation/Maintenance Evaluations | 53 |

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 | 13 | 13 Adult/Child Care Facility Inspection | |
|---------------------------------|----|---|----|
| Public Swimming Pool Inspection | 7 | Hazardous Waste | 13 |
| Solid Waste | 4 | 4 Animal Control | |
| Indoor/Outdoor Air | 31 | 31 Body Art | |
| Ground Water Quality | 10 | 10 Residential Dwellings/Lead Paint | |
| Mosquito/Insect Control | 2 | 2 Septage Inspections | |
| Surface Water | 9 | 9 Radon | |

WOMEN'S HEALTH PROGRAMS

Breast and Cervical Cancer Control Program (BCCCP): For low to moderate income women ages 40-64 (although limited capacity for those ages 40-49). 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—2012/13 | | |
|---|-----|--|
| Breast and Cervical Cancer Control Program 93 | | |
| Wise Woman (unduplicated) | 57 | |
| Wise Woman (duplicated) | 237 | |

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.

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—2012/13 | | | |
|---|------|--|--|
| Women, Infant and Children Program—Monthly average | 1675 | | |
| Maternal Infant Support Services Unduplicated Services | 269 | | |
| Children Special Health Care Services—Families Enrolled | 220 | | |
| Hearing Services Preschool/School Age | 2738 | | |
| Vision Services Preschool/School Age | 3765 | | |







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 and men 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.

SEXUALLY TRANSMITTED INFECTION SERVICES

The mission of the Sexually Transmitted Infection (STI) Program is to reduce the number of STIs 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 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 any additional tests. Our rate of STIs 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 | | | | | | | |
|--|----------------------|----|-----|--|--|--|--|
| | 2011 2012 2013 | | | | | | |
| Chlamydia | 107 | 89 | 118 | | | | |
| Gonorrhea | 8 | 6 | 15 | | | | |
| Syphilis Primary | philis Primary 2 1 0 | | | | | | |

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 | | | | |
|--|------|------|------|--|
| | 2011 | 2012 | 2013 | |
| AIDS | 0 | 0 | 0 | |
| Food Borne Illness | 16 | 20 | 30 | |
| Meningitis-Aseptic | 0 | 3 | 1 | |
| Meningitis-Bacterial | 2 | 2 | 0 | |
| Meningitis-other | 0 | 0 | 0 | |
| Pneumoniae Invasive | 4 | 4 | 7 | |
| Cryptococcosis | 1 | 4 | 0 | |
| Flu Like Illness | 251 | 251 | 78 | |
| Guillain-Barre' | 0 | 0 | 0 | |
| Kawasaki | 0 | 0 | 0 | |
| Legionellosis | 0 | 1 | 0 | |
| Rabies-Bat | 0 | 0 | 0 | |
| Chickenpox | 7 | 9 | 3 | |
| Tuberculosis | 1 | 1 | 0 | |
| Hepatitis A | 2 | 2 | 0 | |
| Hepatitis B Chronic | 0 | 3 | 1 | |
| Hepatitis B Perinatal | 0 | 0 | 0 | |
| Hepatitis B Acute | 0 | 1 | 1 | |
| Hepatitis C Acute | 0 | 0 | 1 | |
| Hepatitis C Unknown | 0 | 0 | 0 | |
| Hepatitis C Chronic | 18 | 15 | 16 | |
| Coccidioidomycosis | 1 | 1 | 0 | |
| Encephalitis | 0 | 0 | 0 | |
| Hemolytic Uremic Syndrome | 0 | 0 | 0 | |
| Staphylococcus Aureus Infections | 0 | 0 | 0 | |
| MRSA | 0 | 0 | 0 | |
| Mumps | 0 | 0 | 0 | |
| Pertussis | 2 | 1 | 0 | |
| Histoplasmosis | 1 | 7 | 0 | |
| Q Fever | 0 | 0 | 0 | |
| Streptococcus, Group A | 0 | 0 | 2 | |
| Influenza-confirmed | 2 | 5 | 5 | |
| Toxic Shock | 0 | 0 | 0 | |

IMMUNIZATION PROGRAM

Immunizations are a very important component of Public Health. The current immunization schedule for adults and children protects against sixteen diseases. Special priority projects included outreach clinics to the Amish community and an outreach clinic in Vassar once a month.

| IMMUNIZATIONS | 2010/11 | 2011/12 | 2012/13 |
|---|---------|---------|---------|
| Vaccines administered | 9753 | 8452 | 7742 |
| Percent of 19-35 month old children fully immunized in the County | 73% | 71% | 73% |
| Adult Influenza Vaccine administered | 1089 | 602 | 592 |
| Pneumococcal Vaccine administered | 91 | 40 | 46 |



GERIATRIC HEALTH SERVICES

| Flu Vaccines Administered | 230 |
|---------------------------------|-----|
| Pneumonia Vaccines Administered | 31 |





Other Senior Services in 2012/13 included: Senior Ball, Senior Fair and membership in the Senior Alliance Committee.

Tuscola County Health Department Employee List - 2012/13

| NAME | TITLE | HIRE DATE |
|----------------------|---|-----------|
| Amend, Ron | Veteran Affairs Director | 10/01/07 |
| Anthes, Beth | PHN II | 11/13/00 |
| Bellsky, Sally | PHN II | 07/08/92 |
| Brinkman, Marcy | PHN II | 02/23/98 |
| 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 |
| 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 |
| Louis, Julie | Clinic Assistant/Clerk II | 03/11/13 |
| Luedtke, Sheila | Health Educator - Abstinence | 01/17/12 |
| 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 |
| Montei, Susan | Certified Nurse Practitioner | 08/22/05 |
| O'Dell, Kathy | Administrative Services Coordinator | 04/05/10 |
| Palmer, Debbie | PHN II | 11/13/12 |
| Peters, Lugene | Program Clerk II | 08/06/90 |
| Pokorski, Kathy | PHN II/Department Coordinator | 07/21/03 |
| Sammons, Bonnie | Fiscal Manager | 02/04/10 |
| Singer, Kent | Registered Sanitarian III | 06/07/95 |
| Suber, Christina | Social Worker (LMSW) | 03/11/98 |
| Suber, Jon | MIS Manager | 09/20/10 |
| Tenbusch, Gretchen | Health Officer | 02/01/88 |
| Urban, Kelly | PHN II/Program Coordinator | 05/28/91 |
| 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 |