TUSCOLA COUNTY HEALTH DEPARTMENT

ANNUAL REPORT - FY 2015-2016

MEDICAL DIRECTOR RUSSELL L. BUSH, M.D., M.P.H.

> HEALTH OFFICER ANN HEPFER, R.N., B.S.



1309 CLEAVER ROAD, SUITE B CARO, MICHIGAN 48723

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Tuscola County Health Department Employee List - FY 2015/16

NAME	TITLE	HIRE DATE
Bellsky, Sally	PHN II	07/08/92
Biskner, Nicole	Clinic Assistant/Clerk II/BF Peer Counselor	02/16/16
Brinkman, Marcy	PHN II	02/23/98
Bush, Russell M.D.	Medical Director	01/01/08
Caverly, Doraine	Account Clerk	07/10/78
Cook, Deb	Fiscal Manager	03/12/14
Dickinson, Janelle	Clinic Assistant/Clerk II	07/05/89
Dunham, Patty	Clinic Assistant/Clerk II/H & V Technician	10/27/75
Farris, Ana	Veteran Affairs Assistant	02/29/16
Guc, Caren	Account Clerk	06/27/16
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
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
Parsell, Beth	PHN II	11/13/00
Pokorski, Kathy	PHN II/E. P. Department Coordinator	07/21/03
Singer, Kent	Registered Sanitarian III	06/07/95
Suber, Christina	Social Worker (LMSW)	03/11/98
Suber, Jon	MIS Manager	09/20/10
Taylor, Rhonda	Clinic Assistant/Clerk II	08/15/16
Tenbusch, Gretchen	Health Officer	02/01/88
Urban, Kelly	PHN II/Program Coordinator	05/28/91
VanOchten, Jessica	Clinic Assistant/Clerk II/H & V 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
Zmierski, Mark	Veteran Affairs Director	05/26/15

TUSCOLA COUNTY HEALTH DEPARTMENT MISSION, VISION STATEMENT AND GUIDING PRINCIPLES

Mission

The Tuscola County Health Department (TCHD) actively strives to enhance our community's quality of life by disease prevention, health protection and healthy lifestyle promotion.

Vision

The Tuscola County Health Department will be recognized as a valuable asset to our community.

Guiding Principles/Value Statement

Quality of Life for our residents.

HEALTH OFFICER ANN HEPFER, R.N., B.S.

Health Officer's Report 2016

Greetings,

On behalf of the Tuscola County Health Department, we are pleased to provide this report to the community that we serve. We have been providing public health services since 1966. As an accredited health department it is our privilege and honor to promote the health of everyone.

Public Health is not a "silo"; it works best for y ou when we work with our community partners. We work diligently to protect our residents and visitors from health threats, provide community education and work collectively with our community partners to ensure a comprehensive approach to the health of our community.

We continue to reach across county lines to work with our neighbors through our work with the Michigan Thumb Public Health Alliance (MTPHA). The members of the alliance include the health departments of Huron, Lapeer, and Sanilac Counties. This year's accomplishments include 1) scanning of over fifty years of well and septic disposal records. This allows the sanitarians quick access to records in the field which assists contractors and home owners. 2) Completing the MTPHA strategic Plan. Visit www.mithumbpha.org for plan details. 3) Increasing communication strategies, 4) taking the first steps in developing a comprehensive health assessment of our four counties.

I would like to thank the Tuscola County Board of Commissioners and the Board of Health for their continued commitment to the health and well-being of our residents. I would also like to thank all of our community collaborative partners, schools, hospitals, townships, physicians, mental health, nonprofit organizations, businesses, law enforcement and restaurants who work diligently beside us to promote a healthy living environment in Tuscola County.

Sincerely,

Ann Hepfer Health Officer

MEDICAL DIRECTOR RUSSELL L. BUSH, M.D., M.P.H.

Medical Director Report

Funding cuts remain a grave concern. Periodic outbreaks of food and waterborne diseases occur periodically and animal diseases are apparent in many locations in Michigan. Most people rarely consider Public Health and the job workers do in preventing disease, promoting wellness and wellbeing, and advocating for public health and safety. Despite the issues that present themselves, your Health Department works around the clock, seven days a week, and 365 days each year in doing just that...planning, surveilling, vaccinating, and providing necessary services to adults and children that assists in keeping them and the greater community safe and healthy.

The Tuscola County Health Department has had many changes in provision of care to clients and the community. We continue to provide quality care and services to county residents in the department's programs despite the budgetary stresses. 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. This past year, threats to the community's health and safety has emerged with the Zika virus, which your Tuscola County Health Department remains up-to-date on the most current information regarding the Zika virus and is keeping abreast of new developments in this and other emerging infectious/communicable diseases both here and abroad.

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 wellbeing, 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 challenging for 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 continuing to be protected.

HEALTH SERVICES DIVISION ANN HEPFER, R.N., B.S.

Community Health Assessment (CHA)

Over the past year the Health Department worked with several community partners, Caro Community Hospital and Hills and Dales Hospital on implementation of a Behavioral Risk Factor Survey. The funding for this project came from a Cross Jurisdictional Sharing Grant secured by Sanilac County Health Department. Community health improvement process uses CHA data to identify priority health issues, develop and implement strategies for action, and establish accountability to ensure measurable health improvement, which will be outlined in the form of a community health improvement plan (CHIP). The Behavioral Risk Factor Survey data is just one part of the data sets that will be used to develop a Community Health Improvement Plan (CHIP). Over the course of the next year many community partners and residents will be asked for their input in regards to their opinions regarding the health of our county. The CHIP plan will be completed next fiscal year and available electronically.

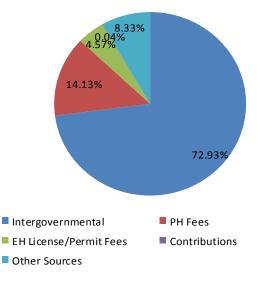
FISCAL DIVISION DEB COOK, FISCAL MANAGER

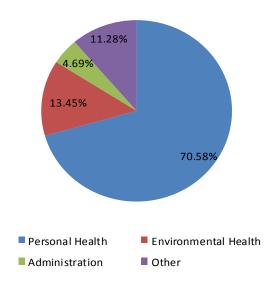
Tuscola County Health Department's Fiscal Division performs all general accounting functions, including accounts receivable, accounts payable, budgeting, payroll, financial reporting and internal control. The accounting policies of the Tuscola County Health Department conform to generally accepted accounting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

2015 - 2016 BUDGET

REVENUES

Intergovernmental	72.93%
PH Fees	14.13%
EH License/Permit Fees	4.57%
Contributions	0.04%
Other Sources	8.33%





EXPENDITURES BY DEPARTMENT

Personal Health	70.58%
Environmental Health	13.45%
Administration	4.69%
Other	11 28%

Management Information Systems Jon Suber. MIS Manager

The MIS department was able to strengthen our network infrastructure this year by adding a new wireless network with a centralized controller. We also replaced our obsolete firewall with a Next -Generation Cisco Firewall with FirePOWER Services protection. Our workstations are protected with Webroot Secure Endpoint Antivirus. It stops the viruses and worms before they infect other PC's on the network and also blocks harmful websites during web surfing.

Our Environmental Health department began issuing Well and Septic permits through their public health inspection system, HealthSpace. Forms were loaded into the system that will allow Sanitarians to access them while in the field. All records are kept electronically.

Through a grant obtained by the Michigan Thumb Public Health Alliance, the Environmental Health department was able to archive their paper records dating back to the 1960's. This database contains the locations of sewage disposal systems and wells which is used internally and is also requested under the Freedom of Information Act. We can search on entered text criteria such as street address but we can also perform full text searches over their entire collection of documents. This allows our staff to find permits quickly on their desktops or on laptops while in the field. This also eliminated searching through file cabinets to answer FOIA requests and lets our sanitarians have access to archived documents and permits on demand.

In December 2015, we established our first encrypted video connection from Tuscola County Health Department to the Huron County Health Department. This allowed our registered dietitian in Tuscola County to perform services to clients in the Women, Infants and Children program (WIC) in Huron County. The RD performs these visits with a high risk population on a monthly basis.

We utilized our existing electronic medical record software in the Veteran Affairs department to use the appointment scheduling and report writing features. They are able to set up their own schedules, book appointments and retrieve results on the monthly basis for kept, missed or cancelled appointments. They are entering their client demographics into the system which allows them to pull client lists based on different variables such as zip code or last name.

Tuscola County Health Department had teamed up with Tuscola Great Start to offer a series of classes for new parents called "Parent to Parent". Tuscola County residents are able to register for these classes on our website. To make this possible, we secured our website (HTTPS) so residents can safely register for classes online.

It has been a challenging and exciting year in public health. Our goal is to create better efficiencies while keeping our data secure. I believe through collaboration with our partners, we can keep moving forward in technology, putting together new procedures that will increase our client satisfaction!

OFFICE OF VETERAN AFFAIRS MARK ZMIERSKI, DIRECTOR

The County Veterans Affairs handles federal, state, and county programs that are available to veterans, widows, and dependent children seeking assistance. Federal programs from the Department of Veterans Affairs include; compensation, pension, survivors benefits, education benefits for veteran and dependents, medical coverage, home loans, life insurance, and burial benefits. State programs include; Michigan Veteran Trust Fund, employment, education benefits, nursing home care, as well as other benefits. County level programs include; Veterans Assistance Program/Soldier Sailor Relief Fund (SSRF), burial benefits, Tuscola County Veterans Affairs Office, food banks, transition housing, and other agencies such as Department of Health & Human Services and Human Development Commission.

TUSCOLA COUNTY VA STATISTICS 2015/16				
Office:		Assistance:		
Office Visits	1,662	MVTF - Applications	1	
Home Visits	7	MVTF Amount Granted	\$1,600.00	
Phone Calls (In & Out)	12,336	SSRF - Applications	119	
		SSRF - Granted	\$38,701.32	
DAV Van:		Burial - Applications	49	
DAV Van -Veterans Transported	206	Burial - Granted	\$6,150.00	
Miles Logged (Volunteer)	23,154			
Hours Logged (Volunteer)	930.56			

FY 14/15 County Veteran Population	4,478	Decrease of 89
FY 15/16 County Veteran Population	4,389	Decrease of 69
FY 14/15 VA Total Expenditure	\$28,635,000	Increase of \$775,000
FY 15/16 VA Total Expenditure	\$29,410,000	Increase of \$775,000
FY 14/15 Compensation & Pension	\$15,505,000	Increase of \$1 224 000
FY 15/16 Compensation & Pension	\$16,839,000	Increase of \$1,334,000
FY 14/15 Vets Enrolled in VA Medical	1,123	Increase of 55
FY 15/16 Vets Enrolled in VA Medical	1,178	increase or 55

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 2015-16.

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	135	Transitory Food Inspections	9
Fixed Food Service Inspections	342	Vending Location Inspections	0
Temporary Food Inspections	148	Foodborne Illness Investigations	5

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	189
On-site Sewage Permits (Commercial)	9	On-site Sewage Inspections (Commercial)	14
Operation/Maintenance Evaluations	48		

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	108	Well Permit Final Inspections	94
Complaints Investigated	10	Operation/Maintenance Evaluations	45

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.

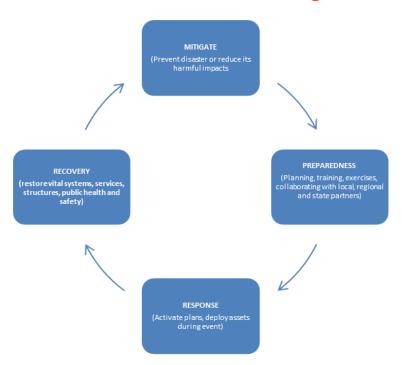
Campground Inspection	13	Adult/Child Care Facility Inspection	34
Public Swimming Pool Inspection	7	7 Hazardous Waste	
Solid Waste	8	Animal Control	0
Indoor/Outdoor Air	12	Body Art	12
Ground Water Quality	19	Residential Dwellings/Lead Paint	0
Mosquito/Insect Control	0	Septage Inspections	
Surface Water	0	Radon	30

PUBLIC HEALTH EMERGENCY PREPAREDNESS KATHY POKORSKI, DEPARTMENT COORDINATOR

Emergency

Preparedness

Program



Educating our communities about diseases and being prepared







Training with staff and local partners



Connecting with the children in our community



and sharing the importance of being prepared for emergencies and disasters





Providing Prophylaxis Medication in the event of a Pandemic or Biological Terrorist event to our residents



Writing and revising our Emergency Plans

Emergency Operations
Plan

Continuity of Operations Plan SNS/MCM ORR
Strategic National
Stockpile/Medical
Countermeasure Operational
Readiness
Review

Mass Fatality/Mass Casualty
Plan

Crisis and Emergency Risk Communication Plan

So we can respond to the needs of our community in the event of a disaster

Collaborating with many Federal, State, Regional, and Local Partners



Police





Hospitals



Emergency Responders



Emergency Management, Schools, Long Term Care Facilities, Amateur Radio, 911, Michigan Department of Health and Human Services, Pharmacies, and many other partners

Disease surveillance and epidemiological investigation



Aedes Aegypti Mosquito transmits Zika virus



Blacklegged tick (deer tick)

transmits Lyme disease

Detection, rapid verification and response to epidemic-prone and emerging disease threats helps minimize the impact on the health of our communities

Emergency Preparedness is empowering others to take measures for the





emergency



situation



before it happens

Emergency Preparedness is a continuous cycle of planning, organizing, training, evaluating, and taking corrective action in an effort to ensure effective coordination during incident response. Emergency Preparedness is building relationships and working together for the prevention, response, and recovery from natural or man-made disasters.

Kathleen Pokorski, RN, BSN Emergency Preparedness Coordinator

MATERNAL/CHILD HEALTH PROGRAMS

Women, Infant and Children (WIC): Services 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): CSHCS strives to enable individuals with special health care needs to have improved health outcomes and an enhanced quality of life. The CSHCS program: assists clients in accessing the broadest possible range of appropriate medical care, health education, and supports; assures delivery of these services and supports in an accessible, family-centered, culturally competent, community-based, and coordinated manner; promotes and incorporates parent/professional collaboration in all aspects of the program; and removes barriers that prevent individuals with special health care needs from achieving these goals. Services are provided to children ages birth to 21 with qualifying chronic health problems and disabilities (or 21+ with cystic fibrosis or hemophilia).

Hearing and Vision Program: Trained Technicians provide Hearing and Vision screenings in the schools throughout the schoolyear and offer "make-up" testing at the health department in the summer.

MATERNAL/CHILD HEALTH PROGRAMS—2015/16					
Women, Infant and Children Program—Monthly average	1470				
Maternal Infant Health Services	140				
Children Special Health Care Services—Families Enrolled	233				
Hearing Services Preschool/School Age	3428				
Vision Services Preschool/School Age	4283				

FAMILY PLANNING PROGRAM

TCHD offers Quality Family Planning services that lead to improved reproductive health outcomes. Our core services include contraceptive services, pregnancy testing and counseling, helping clients achieve pregnancy, basic infertility services, preconception health services, STD services, and related preventive health services. An effective Family Planning program is essential to decrease high risk pregnancy and maternal and infant mortality. The Family Planning provides confidential services to clients of reproductive age by accepting Medicaid, private insurances, and placing those un-insured on a sliding fee scale. Well-women's exams are conducted based on the national standards.

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). Although STI/HIV education and information are made generally available to everyone, funding levels are not sufficient to provide medical STI services to all who seek them. Our priority is to service clients without financial resources to pay for testing and treatment. Although our rate of Chlamydia has remained relatively consistent over the past few years, Gonorrhea rates have increased.

SEXUALLY TRANSMITTED INFECTION—3 YEAR COMPARISON						
2014 2015 2016						
Chlamydia	114	128	124			
Gonorrhea	8	8	14			
Syphilis Primary	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 and Cass City once a month.

IMMUNIZATIONS	2013/14	2014/15	2015/16
Vaccines administered	6666	6654	7324
Percent of 19-35 month old children fully immunized in the County	73%	74%	75%
Adult Influenza Vaccine administered	623	595	521
Pneumococcal Vaccine administered	64	54	12
Prevnar 13 Vaccine		40	224
Zostavax (Shingles) Vaccine		72	93

GERIATRIC HEALTH SERVICES (65+)

Flu Vaccines Administered	223
Pneumonia/Prevnar 13 Vaccines Administered	221

Other Senior Services in 2015/16 included: Senior Ball, Senior Fair and membership in the Senior Alliance Committee.

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				
	2013/14	2014/15	2015/16	
AIDS	0	0	0	
Food Borne Illness	40	24	32	
Meningitis-Aseptic	4	1	3	
Meningitis-Bacterial/other	1	0	4	
Pneumoniae Invasive	3	11	8	
Cryptococcosis	1	0	2	
Flu Like Illness	544	78	1057	
Guillain-Barre'	0	0	1	
Kawasaki	0	0	0	
Legionellosis	0	0	1	
Rabies-Animal	0	0	0	
Chickenpox	6	0	3	
Tuberculosis	2	1	0	
Hepatitis A	1	0	1	
Hepatitis B Chronic	3	8	4	
Hepatitis B Perinatal	0	0	0	
Hepatitis B Acute	2	1	3	
Hepatitis C Acute	5	0	3	
Hepatitis C Unknown	0	0	0	
Hepatitis C Chronic	28	19	26	
Coccidioidomycosis	0	0	0	
Encephalitis	2	0	0	
Hemolytic Uremic Syndrome	0	0	0	
Staphylococcus Aureus Infections	0	0	0	
Mumps	0	0	0	
Pertussis	5	0	2	
Histoplasmosis	2	3	5	
Q Fever	2	0	0	
Streptococcus, Group A	4	2	0	
Influenza—confirmed	28	103	83	
Toxic Shock	0	0	0	