Serving the Community in 
Environmental Health,  
Personal Health Services  
and  
Chronic Disease Prevention
To the Residents and Our Community Partners in Dickinson and Iron Counties:

Sincerely,

Stephen Markham

Stephen Markham,
Director/ Health Officer

Our Mission:
“To assure the highest possible level of health for the people of the communities we serve.”

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Serving you since 1936

Dickinson-Iron District Board of Health

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“An ounce in prevention is worth a pound in cure.”
Varnish Program

During 2013, the Dickinson-Iron District Health Department, in cooperation with the Michigan Department of Community Health Oral Health Program, participated in the Varnish! Michigan -Babies Too project. The goal of this initiative is to provide fluoride varnish to children under 3 years of age, who are at high risk for dental decay. Children enrolled in the health department’s Women, Infant and Children nutrition program (WIC), were eligible for this new service.

Project services include: a caries risk assessment, parent oral health education, an oral screening, and a fluoride varnish application on all exposed teeth. The screenings and applications were completed by registered nurses, all of whom have completed training in these procedures and have received certification to apply the varnish. The children are eligible to receive up to four fluoride varnish applications per 12 month period. During 2013, 601 children participated in this program!

As part of this project the Health Department contacted local dental offices and developed a list of all dental providers in the area. Children with identified concerns during the screening were referred to these local providers. Families with children enrolled in MI-Child and Healthy Kids were given a list of providers who accepted this insurance.

Early Literacy Provides Lifelong Benefits

Children who are exposed to books and reading early in life, have a much better chance to become productive, successful, and healthy members of society. The advantages of early literacy are many. Early literacy initiatives are a fine example of cost effective primary prevention. Advantages include: improves school readiness, leads to academic success, lowers health care costs, improves school attendance, and enhances social and emotional health.

The Dickinson-Iron District Health Department, through the Dickinson-Iron Great Start Collaborative, is an active partner in our local early literacy initiative.

The Raise a Reader initiative is a community collaboration to promote early literacy. Raise a Reader events promote early literacy education for families and provide free books for children. Book mailboxes are located throughout the community and are stocked with free books for children to use and take home. Fundraising and “gently used” book drives provide the books for the mailboxes and events. Health Department home visitors also provide books and reading literacy information for families. There are two mailboxes at our health department offices that are re stocked regularly as children are encouraged to take a book when they visit our offices for appointments.

The Great Start Collaborative recently announced plans to “roll out” the Dolly Parton Imagination Library. The Dolly Parton Imagination Library has been acclaimed as the number one early literacy initiative for supporting children reading at a young age. When children are enrolled in the Imagination Library, free books are mailed to their homes monthly from birth to age 5. Grants to support the efforts are in progress. The Dickinson-Iron District Health Department will be an active partner in this initiative through our home visiting programs. Children will be enrolled through our home visiting programs and parents will continue to be provided information on reading literacy.

For more information visit the Great Start Collaborative website www.greatstart4kids.org.
The health department provides a wide range of services to the general public and special populations. A few of the agency’s programs are highlighted below:

### Seasonal Flu Shots
The Health Department led large-scale community clinics for seasonal flu shots in both Dickinson and Iron Counties, in partnership with two hospitals, four schools and Beacon Ambulance. We also had local nurse volunteers and students from schools and colleges.

### WIC
In 2013, the Women, Infants and Children Program provided nutrition education and supplemental food benefits for more than 1,097 infants, children and pregnant, post-partum and breastfeeding women per month.

### MIHP
The Maternal Infant Health Program conducted 2,144 visits by registered nurses, registered dietitians and social workers to high-needs families with pregnancies or infants.

### Hearing and Vision screening
More than 4,239 hearing and vision screenings were conducted in preschools and K-12 schools throughout both counties.

### Family Planning
Family planning clinics in the agency’s two offices served 612 clients in 2013, providing clinical exams, education, communicable disease testing and free or affordable birth control.

### BCCCP
Through the Breast and Cervical Cancer Control Program, 229 low-to-moderate income women age 40-64 received breast and pelvic exams, pap tests, mammograms, and follow-up treatment as needed.

### Immunizations
6,290 vaccines were administered to 2,778 clients.

### Senior Screening
109 residents age 60-plus received free health screenings, referral and follow-up services. Services include: total cholesterol, HDL, glucose, hemoglobin, blood pressure and hemocult screenings.

Environmental health (EH) programs prevent illness from contaminated food, water and other environmental sources.

### Permitting, inspections, education, and when necessary, enforcement actions protect the public’s health. A few of the EH programs are highlighted below:

### FOOD SAFETY PROGRAM
The focus of the food program is to assure a safe, clean food product for the public through regular inspections and education. Efforts in this program are key elements in assuring the meals we consume outside of the home are safe. Agency sanitarians conducted 510 evaluations at restaurants, schools and temporary food events in 2013.

### ON-SITE SEWAGE DISPOSAL MANAGEMENT
One of the most important methods of preventing the spread of disease and viral infection is the proper treatment of human wastewater. This program provides guidance and oversight for on-site sewage disposal. Site and soil assessments, construction permitting, and inspections are conducted by Health Department sanitarians to prevent environmental contamination. In 2013, 137 site assessments were completed, and 133 construction permits were issued for new on-site sewage systems.

### PRIVATE & NON-COMMUNITY WATER
A fundamental objective of public health met by these programs is the protection of our lakes, streams and the water we drink. Sanitarians monitor the quality of 64 non-community public water supplies such as schools, restaurants and campgrounds. Last year, construction permits for 88 new wells were issued to ensure well construction and water quality requirements were met.
Community Health Status Indicators

Local public health departments track, analyze and publicize rates of disease, health care access and utilization rates, demographics and other community health indicators.

Did you know that the population of the Dickinson-Iron County area declined by 6.9% from 2000 to 2012, from 40,610 to 37,807? About 23.4% of local residents are age 65 and older, compared with 14.6% statewide. Broken down even further, the percentage in Dickinson County is 19.5% and in Iron it’s 27.3%.

There have been 284 births and 481 deaths in 2012 for the two-county area, that’s down from 368 births and 499 deaths in 2008. The leading causes of death - heart disease, cancer, stroke and chronic lower respiratory disease are the same locally for Dickinson and Iron Counties and the trend is similar with U.S. statistics. Michigan, however, appears to have a few more deaths associated with chronic lower respiratory disease than stroke as compared to local and U.S. data.

The Health Department monitors reports from physicians and laboratories of a variety of communicable disease, and is alert to possible disease outbreaks. Below are annual trends for several common conditions, including illnesses such as influenza and chickenpox that can be prevented or reduced through immunization.

Selected Communicable Disease Reports

<table>
<thead>
<tr>
<th>Disease or Disease Group (Dickinson-Iron County Totals)</th>
<th>2008</th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
<th>2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>Food-borne illnesses (Campylobacter, Cryptosporidiosis, Giardia, Salmonella)</td>
<td>16</td>
<td>9</td>
<td>20</td>
<td>21</td>
<td>19</td>
<td>13</td>
</tr>
<tr>
<td>Flu-Like Disease (Includes self reported “flu-like” symptoms &amp; reported positive cases)</td>
<td>1713</td>
<td>2542</td>
<td>2272</td>
<td>2146</td>
<td>1971</td>
<td>Reported Positive Influenza only -155</td>
</tr>
<tr>
<td>Meningitis (Aseptic and Bacterial)</td>
<td>5</td>
<td>3</td>
<td>0</td>
<td>7</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Varicella (Chickenpox)</td>
<td>15</td>
<td>19</td>
<td>7</td>
<td>0</td>
<td>0</td>
<td>2</td>
</tr>
<tr>
<td>Chlamydia</td>
<td>62</td>
<td>58</td>
<td>55</td>
<td>70</td>
<td>83</td>
<td>54</td>
</tr>
<tr>
<td>Hepatitis C (Acute and Chronic)</td>
<td>15</td>
<td>17</td>
<td>15</td>
<td>36</td>
<td>19</td>
<td>60</td>
</tr>
<tr>
<td>Lyme Disease</td>
<td>3</td>
<td>4</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>19</td>
</tr>
</tbody>
</table>

Finance Report

2013 Revenue By Source

Local Effort: 18%
Fed/State Funding: 37%
Insurance-3rd Party: 32%
Fees & License: 9%
Other: 4%

2013 Expenses By Division

Agency Support: 14%
Community Health Programs: 65%
Environmental Health: 21%

2013 Revenues by Source:
- Fees & License: $226,371
- Insurance-3rd Party: $810,187
- Fed/State Funding: $960,303
- Local Effort: $453,806
- Other: $101,725
- Total: $2,552,392

2013 Expenses by Division:
- Agency Support: $540,958
- Community Health Programs: $1,652,235
- Environmental Health: $359,199
- Total: $2,552,392
Medical Director’s Report

One important responsibility of public health is to assess the health status of the population at hand. When one studies the data on health status in the United States, it becomes clear that poor health outcomes do not usually occur randomly. Premature death and disease impacts various populations differently and for a variety of reasons. According to the Centers for Disease Control (CDC), health disparities are “avoidable, unfair differences in health status seen within and between populations.” The World Health Organization (WHO) states that “the social determinants of health, that is the conditions in which people are born, grow, live, work and age-are mostly responsible for health inequities.”

In 2013, the CDC released a report on Health Disparities and Inequalities in the U.S. Examples of these differences are seen below:

- Suicide rates were higher for whites and American Indians/Alaskan Natives than blacks or Hispanics.

- Preventable hospitalization rates were higher for residents of low-income neighborhoods than higher income neighborhoods and higher among blacks and Hispanics than whites.

- Rates of blood pressure control in patients with hypertension were lowest among the uninsured, low income, Mexican Americans and those born outside the U.S.

- Rates of diabetes were highest among males, people over 65, blacks and Hispanics, those without high school education, poor and those with disability.

- Colorectal screening rates decreased with lower income and lower education.

- The highest % of adults living below the poverty level were black or Hispanic, disabled, those with less than a high school education and those foreign born.

- Although overall smoking rates have declined in the U.S., little progress has been made in decreasing smoking rates among persons with low socioeconomic status.

The association of chronic disease and poorer health status with lower income and educational attainment is not surprising and is evident across the country and in our own communities. Although lack of insurance coverage certainly is an important factor in health disparities, increasing coverage alone will not solve the problem. Heredity, for example, has a significant impact on our health and there is no question that much of our health status is determined by how we live our lives, the choices we make and the environments in which we live. This is why the Dickinson-Iron District Health Department partners with healthcare providers, schools and communities to create and support health education programs; healthy school environments; quality, affordable health services; access to immunizations; safe places to live and to be active; access to healthy, affordable foods; clean air and water; and adequate housing. Working together, we can create a healthier future for all.

Let’s Work Together!