2012 ANNUAL REPORT

Dickinson-Iron District Health Department

Serving the Community in Environmental Health, Personal Health Services and Chronic Disease Prevention

Dedicated to Serving You!
To the Residents and Our Community Partners in Dickinson and Iron Counties:

It is my pleasure to bring to you the Dickinson-Iron District Health Department’s Annual Report for 2012. It highlights some of the Department’s efforts to prevent disease, prolong life, and promote the health of our residents. Our success in these endeavors is the direct result of the efforts of highly professional Health Department staff, dedicated community partners and the ongoing support of the Board of Health.

Protecting and promoting the health of our populations while preventing disease and other things that diminish optimal health, requires much more than a local health department and Board of Health. It requires a public health system. This Health Department is one component of that system which includes state and local county, city, and township governing boards and commissions, hospitals and primary care physicians and dentists, mental health and substance abuse agencies, schools, faith-based organizations, the media, law enforcement, area businesses, and other agencies and organizations too numerous to mention. Many of the programs and services provided by the Health Department are accomplished through collaborative efforts with these public health system partners – we couldn’t do it alone. All have a role to play in the shared goal of affording every individual the opportunity to be as healthy, productive, and happy as they can be.

As you read through these pages highlighting many of the activities and programs offered by the department, please keep in mind the caring staff whose expertise and passion comes into play every day in the provision of these services. I am very proud to be a part of this agency, and deeply appreciate the commitment and dedication of the staff to the service of our communities.

I encourage and invite your questions, comments, or suggestions.

Sincerely,

Stephen Markham, BS
Director/Health Officer

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Director/ Health Officer
SNAP-Ed (Supplemental Nutrition Assistance Program Education)
The Supplemental Nutrition Assistance Program (SNAP) offers nutrition assistance to millions of eligible, low-income individuals and families and provides economic benefits to communities. SNAP is the largest program in the domestic hunger safety net. The Food and Nutrition Service works with State agencies, nutrition educators, and neighborhood and faith-based organizations to ensure that those eligible for nutrition assistance can make informed decisions about applying for the program and can access benefits.

The goal of SNAP-Ed is to improve the likelihood that persons eligible for SNAP will make healthy choices within a limited budget and choose active lifestyles consistent with the current Dietary Guidelines for Americans and MyPlate.

During FY 2012, the Health Department was a recipient of a SNAP-Ed grant through the Michigan Department of Community Health and the Michigan Nutrition Network. With this grant, we were able to reach two dozen eligible parents through classroom structured parent meetings and another 200 with information that was sent home with their Head Start child. In addition, over 100 Head Start students were reached through classroom interventions. The focus of these meetings and teachings was on the importance of eating more fruits and vegetables and increasing physical activity levels. It was also an opportunity to introduce gardening tips to “little ones” which they thoroughly enjoyed!

Breastfeeding Peer Counselor Program
The Health Department’s Women, Infant and Children (WIC) Program has expanded its services to include the Breastfeeding Peer Counselor Program. This support program provides personal support for pregnant women that are interested in breastfeeding and for women who are currently breastfeeding their children. Our peer counselor is uniquely qualified to offer information and support to women in a variety of settings in both Iron and Dickinson Counties. She offers support in group settings, individual visits, or through telephone/text contacts.

Breastfeeding support groups are offered monthly in each office. In addition, infant feeding education classes are offered in each county throughout the year. All those living in Iron and Dickinson Counties are welcomed and encouraged to attend these no fee services. One hundred fifty clients were served in 2012.

Breastfeeding is one of the most effective measures a mother can take to protect the health of her infant and for herself (US Surgeon General). The American Academy of Pediatrics has declared human milk to be the preferred food for all newborns. Breastfed children have reduced risks for Sudden Infant Death Syndrome (SIDS), diabetes, obesity, and general illnesses. Women who have breastfed have decreased risks of breast and ovarian cancers.

FDA (Food & Drug Administration) Project
The Health Department was selected to carry out compliance check inspections of retailers to enforce applicable provisions of the Family Smoking Prevention and Tobacco Act (the Tobacco Control Act) and its implementing regulations. The Tobacco Control Act places special emphasis on preventing tobacco use by children and adolescents and reducing the impact of tobacco on public health. Twenty advertising and labeling inspections were conducted during FY 2012.

Emergency Preparedness
In the Emergency Preparedness Program, community preparedness continues to be the focus of planning. Partnerships with local stakeholders, especially schools, daycares, long-term care facilities, hospitals, law enforcement, emergency services, and other community based organizations enhance the ability of the Health Department to reach all segments of the community, especially those more vulnerable to disasters. In the past year there have been several presentations made to over 200 local stakeholders focusing on personal preparedness. Personal preparedness is the best thing you can do for your family and your community.
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 2012, the Women, Infants and Children Program provided nutrition education and supplemental food benefits for more than 1,131 infants, children and pregnant, post-partum and breast-feeding women per month.

**MIHP:** The Maternal Infant Health Program conducted 2,175 visits by registered nurses, registered dietitians and social workers to high-needs families with pregnancies or infants.

**Hearing and Vision screening:** More than 4,045 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 684 clients in 2012, providing clinical exams, education, communicable disease testing and free or affordable birth control.

**BCCCP:** Through the Breast and Cervical Cancer Control Program, 238 low-to-moderate income women age 40-64 received breast and pelvic exams, pap tests, mammograms, and follow-up treatment as needed.

**Immunizations:** 6,476 vaccines were administered to 3,321 clients.

**Senior Screening:** 142 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 478 evaluations at restaurants, schools and temporary food events in 2012.

**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 2012, 125 site assessments were completed, and 119 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 65 non-community public water supplies such as schools, restaurants and campgrounds. Last year, construction permits for 84 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>2007</th>
<th>2008</th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
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</thead>
<tbody>
<tr>
<td>Food-borne illnesses (Campylobacter, Cryptosporidiosis, Giardia, Salmonella)</td>
<td>12</td>
<td>16</td>
<td>9</td>
<td>20</td>
<td>21</td>
<td>19</td>
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<tr>
<td>Flu-Like Disease</td>
<td>2691</td>
<td>1713</td>
<td>2542</td>
<td>2272</td>
<td>2146</td>
<td>1971</td>
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<tr>
<td>Meningitis (Aseptic and Bacterial)</td>
<td>15</td>
<td>5</td>
<td>3</td>
<td>0</td>
<td>7</td>
<td>1</td>
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<tr>
<td>Varicella (Chickenpox)</td>
<td>16</td>
<td>15</td>
<td>19</td>
<td>7</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Chlamydia</td>
<td>39</td>
<td>62</td>
<td>58</td>
<td>55</td>
<td>70</td>
<td>83</td>
</tr>
<tr>
<td>Hepatitis C (Acute and Chronic)</td>
<td>15</td>
<td>15</td>
<td>17</td>
<td>15</td>
<td>36</td>
<td>19</td>
</tr>
<tr>
<td>Lyme Disease</td>
<td>4</td>
<td>3</td>
<td>4</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>

**Finance Report**

**2012 Revenues by Source:**
- Fees & License: $235,529
- Insurance-3rd Party: $805,871
- LPHO: $199,481
- Fed/State Funding: $722,442
- Local Effort: $462,558
- Other: $88,389
- **Total**: $2,514,270

**2012 Expenses by Division:**
- Environmental Health: $342,895
- Community Health Programs: $1,604,363
- Agency Support: $567,012
- **Total**: $2,514,270
Medical Director’s Report

One of the core functions of public health is to conduct surveillance for communicable diseases that may impact the health of a community. Healthcare providers, facilities and laboratories are required to report to local public health the diagnosis of over 60 diseases, from commonly occurring entities like influenza to far less common ones, like tuberculosis. This reporting may be done through phone contact or data entry into a computerized monitoring system that is monitored by the Health Department. Much of this data is then reported to the Michigan Department of Community Health and forwarded to the Centers for Disease Control’s National Notifiable Diseases Surveillance System (NNDSS), a public health disease surveillance system that gives public health officials the capability to monitor the occurrence and spread of diseases.

Why is this important? Well, it matters on several levels. For our local community, rapidly identifying cases of infectious disease can often help to limit their spread within households, schools and neighborhoods. If a school child is diagnosed with bacterial meningitis, local public health can step in and advise household members, friends and schoolmates about exposure risk and preventive measures, such as prophylactic antibiotics. Similarly, if public health receives information about the local diagnosis of a possible food or water-borne illness, an investigation is quickly conducted to determine if there are any additional cases and, if so, whether there are any common exposures. For example, did the ill individuals eat at the same restaurant or swim in the same pool? Identifying a common source, such as a restaurant, not only allows public health to halt continuing exposures by working with the food establishment to identify any food safety issues, it also allows us to educate those who are ill about ways to decrease spread of their own illness and, if appropriate, to alert the public to seek medical care if they have been exposed.

A sampling of communicable diseases monitored by local public health is presented on page 5 of this report. Each case was reviewed by public health staff and for most illnesses, patients and physician’s offices were contacted. We are all safer and healthier with these systems in place. Through surveillance, public health is not only able to assist infected individuals but more importantly, it is able to limit the impact of communicable disease on the entire community. This focus on prevention is an invaluable health and economic strategy for our county, state and nation.