



Calhoun County Public Health Department

2013
Community Report



VISION:

The healthiest community
for life & living.

MISSION:

The Calhoun County
Public Health Department
works together to
enhance our community's total
well-being by
promoting healthy lifestyles,
protecting health,
and preventing disease.

VALUES

As a public health agency, the Calhoun County Public Health Department (CCPHD) is responsible for public health prevention in the community, policy development to solve local health problems and priorities, population health surveillance, and ensuring that everyone in Calhoun County has access to appropriate and cost-effective care.

The CCPHD values:

- **Professionalism:** We maintain specialized knowledge in the field of public health, a high standard of professional ethics, appropriate treatment of relationships with community members and colleagues, and an interest and desire to do our jobs well with integrity.
- **Commitment to Public Health:** We are committed to public health practice and ensuring we provide comprehensive public health services to everyone in Calhoun County.
- **Quality:** We strive to meet and provide the highest quality public health services that meet standards set forth for public health agencies.
- **Respect:** We promote, practice, and embrace respect both with community members and staff of the CCPHD.

The Mission, Vision, and Values statements are intended to provide the CCPHD with a set of goals to achieve and statements to work and serve others by. The vision statement serves as futuristic views and conditions that the CCPHD aims to change or create. The mission statement validates the CCPHD's purpose and what it intends to accomplish. The values statements are the principals, beliefs, and underlying assumptions that guide the organization.¹

¹ Calhoun County Public Health Department, Agency Strategic Plan 2014 – 2019.

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Health Officer's Note

I am pleased to present the 2013 Calhoun County Public Health Department Community Report. As you will see from this report, 2013 was a very busy and productive year for the Calhoun County Public Health Department (CCPHD). We began this year with the development of our Strategic Plan, took on new programs including the Solid Waste Program, and experienced program enhancement in several existing programs including our School Wellness Program and our Medical Examiner Program.

In order for the CCPHD to effectively function as a public health agency, development of an agency strategic plan was needed. This plan defined CCPHD's Vision, Mission, and Values. During the nearly year-long process, input was gathered from a variety of community partners, stakeholders and individuals within the community. The many partners included our staff, Board of Health and Board of Commissioner members, and community members from all facets including, but not limited to, community-based volunteers, healthcare board representatives, business and industry, education, community organizations, and physicians.

Many other activities occurred including the implementation of the Calhoun County Travel Clinic, expanded Infant Safe Sleep efforts, development of the Medical Emergency Response Team within the School Wellness Program, the transition of the Solid Waste program from the Calhoun County Road Department to the CCPHD, release of the Public Health Assessment Report pertaining to the July 2010 Kalamazoo River oil spill, and the signing of the Medical Examiner contract with the Western Michigan University School of Medicine.

The CCPHD applied for a grant from the W.K. Kellogg Foundation for nearly \$1.5 million dollars for the Fetal and Infant Mortality Review, Health Equity Alliance, Nurse-Family Partnership®, and School Wellness Program.

In 2013, the CCPHD Finance Department made significant strides in improving and assuring competence in financial reporting. The finance staff has done a tremendous job at gaining perspective and focusing on accuracy and detail as it relates to all of the many funding sources that our department receives. They have also developed additional control mechanisms and measures to assure that these resources are allocated in a fiscally responsible manner.

I am proud of all of our staff as we continue to provide exceptional service to our community. I am grateful for the direction that we receive from the Board of Health, the Board of Commissioners, as well as from County Administration.

As always, please feel free to contact me with any questions that you may have regarding this report.

Sincerely,

A handwritten signature in cursive script that reads "James A. Rutherford".

James A. Rutherford, MPA

Health Officer



YEAR IN REVIEW

Strategic Planning

The CCPHD began an agency-wide strategic planning process to provide guidance in order to fulfill the defined mission, vision, and set values for the organization to operate by. Over a one-year process with participation from CCPHD staff, Calhoun County Board members, and community partners, the CCPHD will continue to make a measurable health impact upon the lives of the residents within our community.

Travel Clinic Opened

The CCPHD began offering vaccines for travelers. Vaccines for diseases such as Typhoid and Yellow Fever are now offered at the CCPHD and provide for a one-stop immunization experience for Calhoun County residents.

Infant Safe Sleep

In order to reduce and potentially eliminate infant deaths related to unsafe sleep environments, the CCPHD in partnership with the Infant Safe Sleep Coalition applied for and was awarded a grant from the Michigan Department of Community Health to promote community-wide infant safe sleep education and awareness.

MERT

The School Wellness Program (SWP) developed,

for implementation in the 2014-2015 school year, the Medical Emergency Response Team (MERT) program. The MERT program aims to assist Calhoun County schools in providing medical assistance to students and staff in the event of an accident or injury on school property during school hours. Each school will have an identified MERT with five to seven members, who are CPR, AED, EpiPen®, and First Aid certified, carry a first aid kit, and respond to or assist with medical occurrences when needed or when the school nurse is unavailable.

5-2-1-0

To promote healthy lifestyles and improve health behaviors in school aged children, the SWP continues the evidence-based 5-2-1-0 program in schools. The 5-2-1-0 program is based on an easy to remember message: 5 or more fruits or vegetables, 2 hours or less of recreational screen time, 1 hour or more of physical activity, and 0 sugary drinks per day.

Farmer's Market

The CCPHD WIC program sponsored the Springfield Farmer's Market one day per week at the Toeller Building.

Fresh, locally grown fruits and vegetables were made easily accessible to all, but especially to WIC clients who were visiting the Toeller Building for services. WIC clients could also pay with their SNAP and EBT cards.

Lead

The CCPHD completed its first of a three year "Good to Grow" project based on the Environmental Protection Agency (EPA) Training-Testing-Telling (3Ts) program. The project's goal is to determine the health risk posed by the presence of lead in the drinking water of schools and childcare facilities served by a municipal water supply.

Solid Waste

The Calhoun County Solid Waste Program was transitioned from the Calhoun County Road Department to the CCPHD Environmental Health (EH) department. Upon transition, EH staff focused efforts on increasing Calhoun County resident participation in recycling, reducing, and reusing initiatives.

Enbridge Oil

In October 2013, the Michigan Department of

Community Health (MDCH), in collaboration with the U.S. Department of Health and Human Services Agency for Toxic Substances and Disease Registry (ATSDR), released the Public Health Assessment Report pertaining to the July, 2010 Kalamazoo River Oil Spill. The purpose of this document was to identify potentially harmful exposures and recommend actions that would minimize those exposures.

Medical Examiner

In December 2013, the Calhoun County Board of Commissioners approved the Calhoun County Medical Examiner contract with the Western Michigan University School of Medicine, Department of Pathology (WMed). Program oversight was fully transitioned to the CCPHD in 2013.

Albion Health Department

The CCPHD continues to look for space in Albion to relocate the Albion Health Department. By relocating, the CCPHD hopes to expand services and improve accessibility for all residents.

**Strategic Planning:
Providing guidance to
better serve
Calhoun County.**



COMMUNITY PARTNERSHIPS: KEY TO GROWTH

Community partnerships and collaboration are key to effectively implementing programs and achieving set goals. The CCPHD realizes how important collaborations and partnerships are to making a difference in the community. In the concept of “it takes a community to build a child”, we know it takes communitywide effort to improve the health of its citizens.

The CCPHD is very fortunate to have a vast network of public, private, and community agencies and organizations to share resources and address critical and emerging health needs. The majority of our programs rely on these partnerships to successfully serve our clients and protect our community.

Through the many partnerships, Calhoun County can rely on safe food and water, protection from disease outbreaks, and effective responses to disasters. Our youngest citizens have access to healthcare and are learning to eat better and stay healthy. This is only a small piece of the health department’s goal to tackle and reduce the countywide obesity and high chronic disease rates.

Many of the CCPHD programs depend on these collaboratives and community partners for program success, continuation, funding, and growth. Many partner organizations include governance-level and community-based volunteers, health care board representatives, business and industry, education, community organizations, physicians, and citizens who provide feedback. Several organizations include Albion Health Care Alliance, Bronson Battle Creek Hospital (BBC), Calhoun County school districts, City of Battle Creek, Family Health Center of Battle Creek, Substance Abuse Council, Summit Pointe, and various foundations. Local foundations and organizations that provide financial and in-kind support of CCPHD programs include Battle Creek Community Foundation, Binda Foundation, BBC, Calhoun County Schools, Calhoun County Senior Millage, Calhoun Intermediate School District, United Way of the Battle Creek and Kalamazoo Region, and W.K. Kellogg Foundation. Other funding partners include MDCH, Michigan Department of Environmental Quality (MDEQ) and Michigan Department of Agriculture & Rural Development (MDARD) just to name a few.

Through the Regional Health Alliance, various issue action groups provide assistance and support of a variety of CCPHD programs. Several of these groups include the Maternal and Infant Health Commission (MIHC) -- ensuring that all babies will be born healthy and thrive; School Wellness Advisory Board (SWAB) -- ensuring that all school children will have access to healthcare; and Teen Pregnancy Prevention Partnership (TP3) -- ensuring agency coordination to reduce teen pregnancy.

As Calhoun County becomes more diverse with growing Hispanic, African American, and Burmese populations, our community’s overall health depends on their health. Within the United States, health disparities are among the most complex and obstinate public health problems. Through the Health Equity Alliance (HEA), health disparities are being addressed through community education, policy and environmental change, strengthening skills and knowledge, and the development of a community health advocate program.



COMMITMENT TO COMMUNITY HEALTH

The CCPHD offers various community health programs. Each of these programs are designed to improve and maintain the health of Calhoun County residents by monitoring health status; diagnosing and investigating health problems and hazards; informing, educating, and empowering people about health risks; participating in community partnerships to identify and solve problems; enforcing laws and regulations that protect health and ensure safety; and linking people to health services.

The CCPHD community health programs include:

- Childhood Hearing and Vision
- Children's Special Health Care Services
- Communicable Disease
- Fetal and Infant Mortality Review
- Health Equity Alliance
- Immunizations
- Nurse-Family Partnership®
- Refugee Assessment
- School Wellness Program
- Senior Hearing and Vision
- Sexually Transmitted Infections and HIV
- Teen Outreach Program®
- WIC

In 2013, students in nine Calhoun County school districts participated in the SWP, three participated in the Teen Outreach Program®, all 10 provided weekly communicable disease reports, and nine participated in the Good to Grow program. The Childhood Hearing and Vision program also provides hearing and vision screenings to children in all public and private schools throughout Calhoun County. Through this partnership with the schools, we are able to maintain a healthy school community, ensure safe drinking water, prevent and control the spread of disease, and enhance and improve youth's behavior, health, and life skills.

The Nurse-Family Partnership® (NFP®), Teen Outreach Program® (TOP®), and SWP demonstrate the importance of a cooperative working relationship with other service providers including medical, mental health, and school personnel. These relationships are crucial to clients receiving service, reducing service duplication, and promoting trust...the key to program success.

Nurse-Family Partnership® is an evidence-based, community health program that helps transform the lives of vulnerable mothers pregnant with their first child. From May 2010 through December 2013, NFP® has served 188 mothers. NFP's® 100th birth occurred on November 8, 2013 with a total of 110 children served during this time period.

The highlight of the year was an event held in August to commemorate the first mothers to graduate from the program. A graduate is a woman who started visits with her nurse during pregnancy and continued until the child's second birthday. The event had a beach theme with activities for the parents and children, food, and a graduation ceremony for five mothers. A total of 75

people attended including mothers, children, guests, NFP® staff, and community partners.

Several factors have led to program success in the first three years of implementation. These factors include consistent financial supporters, committed referral sources, a strong advisory board made up of Maternal Infant Health Commission members, and a dedicated staff that has remained in place since early 2010.

**NFP®
CELEBRATES
ITS FIRST
GRADUATES**

The **School Wellness Program** strives to build and maintain a healthy school community by implementing strategies that promote student, family, staff, and community health and safety to improve students' physical and emotional school preparedness. Serving nine Calhoun County school districts, the SWP served over 8,300 students from the 16,000 student population. There were a total of 19,850 office visits, 8,617 medications dispensed, and 4,659 health screenings. Because school nurses (SNs) are able to reach students where they are, immunizations are made easily accessible for families. The number of vaccines administered through the SWP also continues to increase. In FYE13, 1,151 vaccines were administered, an increase of 48% from the previous year.

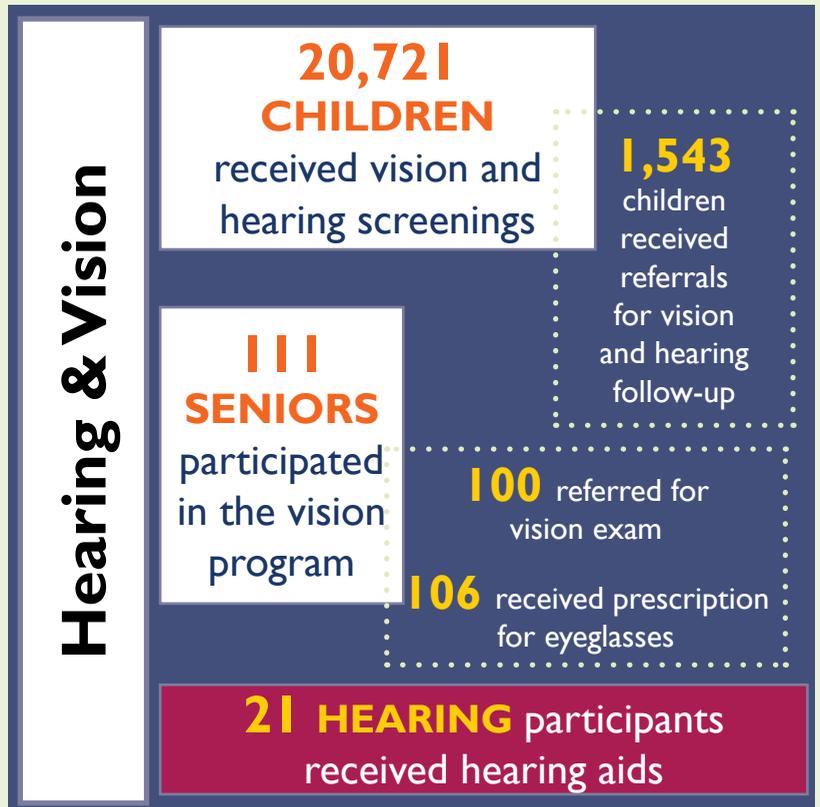
Also part of the SWP are the two school-based health centers at Battle Creek Central High School (Student Health Center [SHC]) and Springfield Middle School (Healing Hands Health Center [HHHC]). During 2013, these two centers served nearly 850 clients for 1,768 nursing encounters. There were 452 social worker encounters, 435 vaccines administered, and 293 sports physicals performed.

CCPHD's **Childhood Hearing and Vision** program promotes childhood hearing and vision through early identification and referral for treatment. Early identification of hearing and vision problems increases each child's opportunity for academic and social success. In 2012-13, over 20,700 Calhoun County students were screened for hearing and vision. Of those students, over 1,500 were referred for hearing and vision treatment/follow-up.

During the 2012-2013 school year, six **Teen Outreach Program® (TOP®)** clubs completed programming in June 2013. TOP® clubs were held in Northwestern Middle School (2), Springfield Middle School (2), and Harper Creek Middle School (2). A total of 86 students from Calhoun County participated during the 2012-2013 school year. Out of those, 62 (72%) participants completed the program requirements of attending 90% of club meetings and performing 100% of required community service hours. Overall, the students completed 1,909 hours of community service including collecting jeans for underprivileged youth, pumpkin carving for the Binder Park Zoo, volunteering at the Empty Bowls luncheon, assembling food baskets for underprivileged families during the holidays, and bake sales. The TOP® has become well-known in the schools and the community as a positive program for youth to be a part of and for enhancing and improving the youth's behavior, health, and life skills.

Just over 500 children/adolescents were served by the **Children's Special Health Care Services (CSHCS)** program in 2013 provided by a full-time program representative and a part-time nurse. Services of the CSHCS program include arrangement for reimbursement of travel expenses for out-of-county or out-of-state medical appointments, assistance with medical bill payment, finding resources to help the child live a higher quality life such as a hospital bed, medical equipment, or assistance with obtaining asthma inhalers. Collaboration exists between the MDCH CSHCS program, schools and daycares, medical providers, insurance carriers, as well as the many community resources that provide support to children with special medical needs.

Fetal and Infant Mortality Review (FIMR)/Infant Safe Sleep. The CCPHD, in partnership with the Infant Safe Sleep Coalition of Calhoun County, performed outreach activities and education with OB/GYN, family practice, and pediatric physicians/providers, social service agencies, as well as parents, caregivers, and childcare providers to teach and model safe sleep practices. This program, grant funded through the MDCH, aligns with the efforts of the CCPHD **FIMR** program, a surveillance methodology to monitor and understand infant death. In 2013, there were seven infant deaths reviewed by the FIMR Case Review Team (CRT) resulting in eight unduplicated recommendations being passed on to the Maternal and Infant Health Commission. These recommendations included ensuring pregnant women have access to prenatal care that is acceptable, accessible, and appropriate; providing mentoring, support, outreach, and advocacy to improve the social/psychological



environment for women and families at risk; and ensuring that all women have access to preconception and interconception care.

The **Senior Hearing and Vision** program significantly increased (163%) the number of program participants that received hearing aids. By researching different providers, the CCPHD was able to provide high-quality, lower cost options to seniors in order to serve a greater number of seniors in need. Funded through the Calhoun County Senior Millage, this program helps seniors to participate fully in their daily lives because of improved hearing and vision. Improved hearing and vision significantly increases a senior's safety and their ability to live and interact independently to maintain and potentially improve their health.

Continuing with efforts to reduce or eliminate disparities, the **Health Equity Alliance (HEA)** began developing the See One-Be One (CIBI) initiative. The CIBI initiative aims to create a health careers pipeline for underserved youth that increases awareness of post-secondary health education opportunities, boosts students preparedness for higher education, and potentially alters the trajectory of their future.

Through the Community Health Advocates Making Progress program, 340 blood pressure and 137 glucose screenings, 2 health presentations, 12 immunizations, and 70 vaccinations were given.

Choose to Lose, a pilot project to determine if individuals would sustain a healthy lifestyle if the right mechanisms of support were in place, was implemented. At the end of the 10 weeks, 25 of 29 individuals were still actively engaged and had an average weight loss of 10.0 lbs., body fat reduction average of 8.8%, BMI reduction average of 5.7, lost 233 pounds as a group representing a 3.30% loss as a group, and a blood pressure reduction of 58%.

Immunizations administered within the CCPHD Clinic and SWP continue to grow. Over five years, the number of seasonal influenza vaccines administered has increased by 80%. The total number of vaccines administered increased by nearly 64%. By reinstating CCPHD-offered flu clinics throughout the community from 0 in 2009 to 117 in 2013, the CCPHD intends to prevent and reduce the number of influenza cases each year by offering flu vaccines where people work/visit.

Beginning in July 2013, the CCPHD began offering travel vaccinations as it received its Travel Clinic Status from the State of Michigan. Education was provided for those traveling to countries such as Ecuador, South Africa, and China as well as many others. Education provided includes ways to prevent illness from food and water as well as mosquito-borne illnesses. Vaccinations provided for travel purposes included Yellow Fever, Typhoid, and Japanese Encephalitis. No reported travel-related illnesses occurred in the 31 clients receiving pre-travel education and vaccinations through the CCPHD travel clinic.

Refugee Health Assessment. Health assessments and screenings were provided for 182 refugees in Calhoun County. Of the 182, one was from Cuba, two from Iraq, eight from Rwanda, and 171 from Burma. These health screenings help to identify potential communicable diseases that may arrive in the refugee population. While latent tuberculosis and hepatitis are the primary diseases identified, one refugee had been diagnosed with Hansen's disease (also known as Leprosy). The client was referred to Calhoun County's Infectious Disease Physician and CCPHD Medical Director Dr. Harrington to ensure ongoing treatment and cure.

Medications used to treat active or latent tuberculosis rose in price dramatically for a 30-day supply from about \$2 to around \$70 with no explanation for the increase. This created a severe financial burden on Calhoun County in trying to procure enough medications to treat latent cases to prevent progression into an active case of TB. The CCPHD was able to collaborate with area pharmacies in getting the best pricing options so medications were provided to those who did not have insurance to cover the medications.

Sexually Transmitted Disease/HIV/AIDS. The CCPHD has identified a need to improve and expand services for the men who have sex with men (MSM) population in Calhoun County. The Centers for Disease Control (CDC) and the MDCH report that gay, bisexual, and other MSM are disproportionately impacted by syphilis, HIV, and other sexually transmitted diseases. Therefore, the CCPHD STD/HIV clinic has increased testing for MSM clients seen in the clinic. Not only has the STD/HIV clinic seen an increase in the number of MSM who seek services, we are identifying new STD infections from the increased testing in this population.

The CCPHD participated in National HIV Test Day events in June providing rapid HIV testing to the community at no charge at the Fountain Clinic in Marshall, the Calhoun County Corrections facility, and in Albion at our CCPHD

	2009	2010	2011	2012	2013	Five-Year % Change
Enteric Diseases						
Campylobacter	14	27	15	26	33	135.7%
Cryptosporidiosis	4	2	4	17	6	50.0%
Escherichia coli O157:H7	0	0	0	0	0	0.0%
Giardiasis	9	8	11	10	12	33.3%
Listeriosis	1	1	0	0	0	-100.0%
Salmonellosis	17	13	11	11	12	-29.4%
Shigellosis	0	1	2	5	9	900.0%
Vaccine-Preventable Diseases						
Varicella	32	9	8	21	8	-75.0%
Pertussis	3	5	4	21	15	400.0%
H. influenzae Disease - Inv.	1	0	3	3	1	0.0%
Sexually Transmitted Infections						
Chlamydia	783	832	892	782	758	-3.2%
Gonorrhea	329	256	122	212	225	-31.6%
Other Reportable Diseases						
Meningococcal Disease	1	1	1	1	0	-100.0%
Aseptic Meningitis	8	24	15	6	16	100.0%
Strep pneumonia, Inv	3	3	19	13	16	433.3%
Tuberculosis	0	2	1	0	1	100.0%

location. We also provided outreach in terms of testing and education to agencies such as the Share Center in Battle Creek; partnering with CARES of Southwest Michigan; the Life Recovery Program (Haven of Rest Ministries); the Calhoun County Juvenile Home; and the Pennfield School District.

Communicable Disease. In October, several people in Michigan were diagnosed with Shiga toxin-producing Escherichia coli (STEC) which is a very serious illness caused by a toxin-producing bacteria. About 5-10% of people diagnosed with STEC can develop life-threatening conditions that may lead to permanent physical damage or even death. One case was identified in Calhoun County and investigation of this case identified unpasteurized (or raw) apple cider as the contamination source. Fortunately, the affected person fully recovered.

Symptoms of STEC include severe stomach cramps, diarrhea (often bloody), and vomiting. Protecting yourself from STEC includes washing your hands thoroughly after using the bathroom or changing diapers and before eating, avoid swallowing water when swimming, avoid unpasteurized milk, dairy products, and juices, cooking your meats to an appropriate temperature, and avoiding contamination in food preparation areas.

One case of measles was identified in an infant under the age of one. Measles has not been seen in Calhoun County in over 20 years. The child was exposed while traveling with family overseas. The CCPHD worked diligently with Kalamazoo County Health & Community Services to ensure that all those exposed to the disease, totaling over 100 adults and children, were notified, monitored, and vaccinated as needed. The child recovered from the disease and no further cases were identified in Calhoun County despite measles being highly contagious.

54% of babies born in Michigan enroll in WIC



AN AVERAGE DAY IN THE CALHOUN COUNTY WIC PROGRAM

WIC families purchase over \$9,160 in healthy foods

91% of WIC families live below 150% of poverty

44% of pregnant mothers enroll in WIC during their first trimester

156 clients are served

WIC families redeem **73%** of their fresh fruit and vegetable benefits

51% of WIC mothers are overweight or obese pre-pregnancy

Brandy and Bailey have exclusively breastfed for over 12 months!

Along with making super milk for baby Bailey, Brandy pumped and donated breast milk for a mom who had adopted and could not nurse, as well as two other infants. And she had more on a waiting list!! Brandy has donated over 2,300 oz!!! Yes, 2,300 OUNCES!

Way to go Brandy! You are a Supermom squared!!!



67% of WIC infants started life breastfeeding

17% of WIC children are overweight and 16% are obese

8% of WIC infants are born at a low birth weight

PROTECTING YOUR ENVIRONMENT

Environmental Health (EH) staff continue to promote the message that prevention is the best medicine.

Food Services. Calhoun County is one of the relatively few county health departments to provide comprehensive food safety and sanitation training. Good training is a cornerstone of safe food service.

Most foodborne illness outbreaks involve a measure of human error. It is notable that as of 2013, the CCPHD has provided food safety and sanitation classes for 25 years. When foodborne illness occurs, the investigation into the cause is very much a team effort involving sanitarians, nurses, and the epidemiologist. Every complaint received in EH is investigated beginning within 24 hours.

Water and Well. EH staff have worked hard to make sure drinking water wells are properly abandoned when they are taken out of service. Unused water wells provide a direct conduit for contaminants to reach aquifers and pose a significant risk to our potable water supply. It is very much a matter of “an ounce of prevention being worth a pound of cure.”

Inspection services provided by EH are not limited to food service facilities, septic systems, and swimming pools. Inspection services provided to Department of Human Service facilities such as adult and child foster care homes, nursing homes, and child care facilities are intended to be both thorough and to address those environmental factors that could cause illness or disease. Food service, ventilation, sanitation, and hygiene are all checked and inspectors use this time as “teaching moments” to provide useful information.

Food Services	2009	2010	2011	2012	2013	Five-Year % Change
Fixed inspections	595	624	682	862	697	17.1%
Mobile, vending, STFU inspections	20	24	22	60	77	285.0%
Temporary food service inspections	153	144	123	158	146	-4.6%
Total primary inspections	768	792	827	1,080	920	19.8%
Follow-up inspections	65	76	16	75	111	70.8%
Food classes offered	36	28	31	40	30	-16.7%
Food class students	638	495	687	812	557	-12.7%
Restaurant plan reviews	12	10	20	14	25	108.3%
Complaint investigations	24	21	32	50	51	112.5%
Foodborne illness investigations	6	0	10	11	15	150.0%
Total investigations	781	630	796	1002	789	1.0%
Administrative enforcement actions*	5	0	1	6	0	-100%

**Any action such as an office conference, informal hearing, or formal hearing wherein corrective action must be taken to address operational violations and bring a facility in compliance with federal, state, and local laws, rules, and other standards*

	2009	2010	2011	2012	2013	Five-Year % Change
Private & Type II Public Ground Water Supply Program						
Well permits issued	198	152	201	198	177	-10.6%
Final inspections for new water well	43	53	88	116	130	202.3%
Abandoned wells plugged	13	73	75	50	103	692.3%
On-site Sewage Program						
Parcels evaluated	233	251	263	216	234	0.4%
On-site sewage disposal permits	218	263	226	180	178	-18.3%
Complaints investigated	9	14	14	26	36	300.0%
Household Hazardous Waste*						
Waste collected (lbs.)	26,254	24,857	30,543	35,370	38,301	45.9%
Other Inspections						
Public pool inspections	N/A	N/A	60	114	114	90.0%
Child/adult care facilities	N/A	N/A	14	101	69	392.9%
Body art facilities	N/A	N/A	3	5	5	66.7%

**Data aggregated by calendar year.*



The Calhoun County Solid Waste Program was transitioned from the Calhoun County Road Department to the CCPHD EH Department. Upon transition, EH staff focused efforts on increasing Calhoun County resident participation on recycling, reducing, and reusing initiatives.

During 2013, several special collections were held including a Styrofoam collection, household hazardous waste collections, and a free Recycle Rama. During the Recycle Rama, items not accepted at recycle centers including televisions, computer monitors, CPU's, latex paint, household hazardous waste, appliances, old and expired medicines, etc. are collected. Over 38,000 pounds of waste was collected. The 2013 Recycle Rama is a community collaboration sponsored by Calhoun County Recycling, Republic Waste, Kellogg Community College, Substance Abuse Council, Calhoun County Public Health Department, Valley City Environmental Services, Franklin Iron and Metal, BGame Refrigeration, Epaint Recycling, and 3E.



The CCPHD completed its first of a three year “Good to Grow” project funded by the W.K. Kellogg Foundation based on the EPA Training-Testing-Telling (3Ts) program. The project’s goal is to determine the health risk posed by the presence of lead in the drinking water of schools and childcare facilities served by a municipal water supply. The project is non-enforcement in nature and relies on the voluntary participation of facility administration. Because facilities cannot be required to participate, all eligible facilities may not elect to be involved.

Year one of the “Good to Grow” grant focused on collaborating with Calhoun County schools and childcare facilities served by municipal water, surveying those locations, and collecting 1,014 samples from 35 Calhoun County school or childcare facilities.

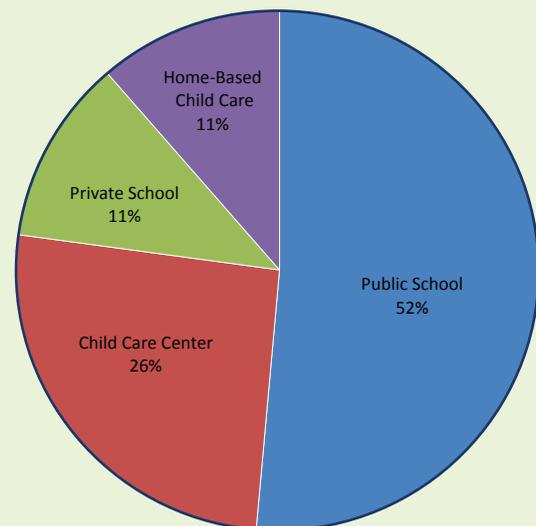
Work on the project began in the spring of 2012. Early work focused on developing the collaboration with the EPA that was necessary for the project to not only become a pilot study but to have national impact.

Risk determination is accomplished in several steps, the first of which is a thorough survey of the plumbing of a facility and examination of water use, followed by the collection of water samples from each participating facility. Once water samples have been collected, they are shipped to one of six participating EPA regional laboratories. Results provided to the CCPHD allow the sources of any contamination to be identified. Education was identified as a critical component in the project design, and every set of results provided to a school or childcare facility includes education to their staff. If necessary, any remediation options are then discussed.

The removal of lead hazards from facilities where young children with still-developing bodies and minds spend much of their time will lower the possibility of an elevated blood lead level. In addition, results indicating that these water supplies do not pose a lead hazard will allow focus on other possible sources of lead.

Facilities Tested	35
Water Outlets Tested.....	307
Water Outlets with Results Above Guideline.....	7
Water Samples Collected	1,014
Facilities Sampled:	
Public Schools	18
Child Care Facilities	9
Private Schools	4
Home-Based Child Care	4
School Districts Participating	6 out of 10

Types of Facilities Tested



Total: 35 facilities

SUCCESS STORIES

NFP® Changing Lives

Susan was 18 years old and in her 16th week of pregnancy when she first met with her NFP® home visitor. Susan and Alexa received 69 visits over 2½ years. Recently she wrote this letter to her nurse.

For me and my daughter, Alexa, if I had any question there was never any wrong questions and whenever my nurse did not have an answer to right off the top she would do her very best to find it out for me. I really appreciate how much my nurse, Kelly, was there for me and my daughter. She didn't just see us as another case she truly cared about us and wanted the best for us. She did whatever it took to make sure she could help us.

If it had not been for her and her just being there to support me and give me the BIG push I needed I don't think I would be where I am right now. As for me, finally after a three year struggle to get my GED, I have finished and got to know what it is like to graduate and feel that great feeling of accomplishment and that's only because of the NFP® goal setting part of the program. Not even a good two and a half weeks after my graduation I was enrolled in beauty school and working on the other part of my life moving forward for me personally. I love NFP®! They are like a second family for me and my daughter and we will always be forever grateful for all they have done for me and my family. Thanks NFP®!

Love, Susan & Alexa

Giving Back to the Community

TOP® participants completed 1,909 hours of community service.

Breastmilk: Super Power

Since implementing the Breastfeeding Peer Counselor program within WIC, an increased number of young moms have expressed interest in breastfeeding.

- One mother tried to re-lactate after discontinued breastfeeding for two weeks. The Peer Counselor called to check on her and she was able to get her supply back and is now breastfeeding exclusively.
- One mother committed to full-time breastfeeding after discussing with the Peer Counselor the breastfeeding bond between mother and child. This mother originally was planning to partially breastfeed.
- A nursing mother successfully breastfeeds a six month old and a two year old.
- A pregnant mom committed to breastfeed her fourth child, even though she did not breastfeed her previous children.

FINANCIALS

The Calhoun County Public Health Department's FYE13 budget of just over \$6 Million was balanced and included a county allocation of \$723,435. Percentage of revenue by type and expenses by division is presented below.

FYE13 ended with revenues at 91% and expenses at 92% out of an almost \$6.4M budget. The preliminary Fund Balance included a net loss of \$94,769. The department returned unused funds to the Michigan Primary Care Association for School Wellness – Mental Health (\$8,151) and the Adolescent Health Center – Springfield Middle School (\$23,224). With the anticipated 4th quarter revenue from the MDCH contract, the year-end Fund Balance was \$756,163.

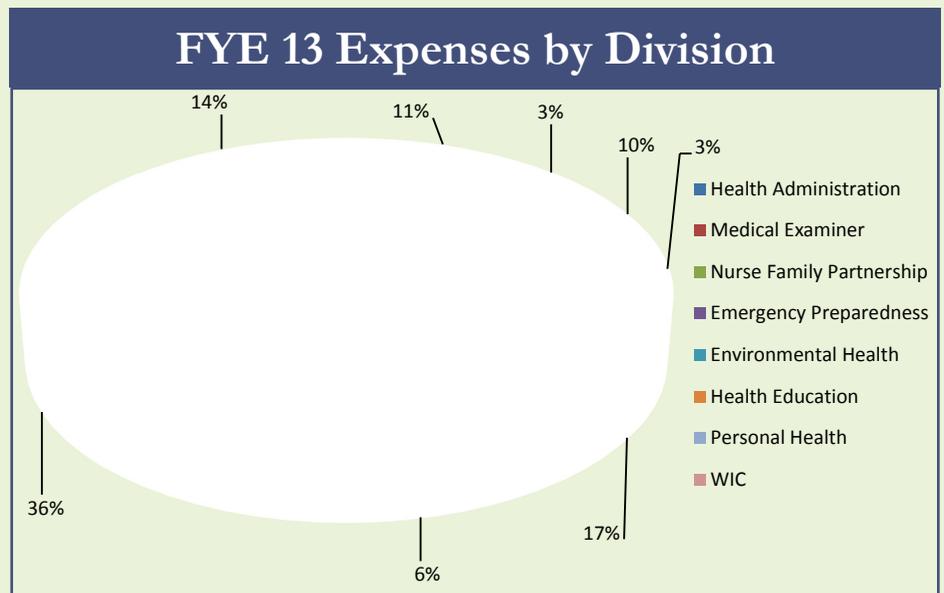
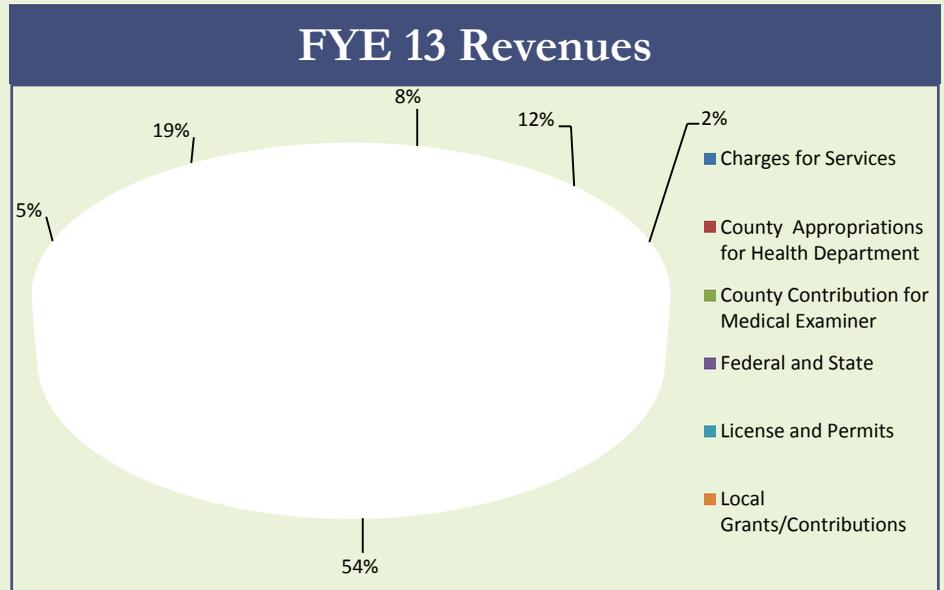
There were several staff changes during the year that resulted in some positions being vacant for long periods of time. As a result, the Salary and Fringe line items were underspent by \$233,902 (93% of budget) and \$144,637 (88% of budget). This was reflected above in the amounts that were returned to funders.

The Medical Examiner Program was not implemented as originally planned in FYE13. Even though the Medical Examiner program was moved into the Health Fund, Dr. Ismailoglu did not become a county employee as anticipated. This resulted in a net loss of (\$8,693).

The Nurse-Family Partnership® program received an additional \$75,000 from Bronson Battle Creek Hospital to support Maternal and Infant Health. This grant required a \$25,000 local match.

The CCPHD FYE13 county appropriations totaled \$723,435. Of that amount, 30% (\$219,698) was allocated to Sexually Transmitted Disease (STD) and 11% (\$81,356) was allocated to HIV.

During FYE13, the CCPHD was able to gain a precise picture of the department's finances, especially in areas where grants cover multiple years. This is due to systematic and procedure changes that allowed us to skillfully account for each CCPHD program individually. This included the placement of deferred funds into the correct FYE.



CALHOUN COUNTY PUBLIC HEALTH DEPARTMENT
JAMES A. RUTHERFORD, MPA
HEALTH OFFICER

LEADERSHIP

James A. Rutherford, MPA
Health Officer

Dr. Gregory Harrington, MD, MPH
Medical Director

Diana Buist, RD
WIC Manager

Cheryl Czerney, MSN, RN, CPNP
School Wellness Program Director

Michelle Datema, MS, RN
Nurse-Family Partnership® Manager

Paul Makoski, MPA, RS
Environmental Health Manager

Brigette Reichenbaugh, BA
Operations & Development Manager

Kristin Roux, MPH
Health Education Manager

Kristin Tekiele
Fiscal Manager

Michelle Thorne, MSN, RN
Personal Health Services Manager

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190 E. MICHIGAN AVENUE
BATTLE CREEK, MICHIGAN 49014
(269) 969-6370 (TEL) (269) 969-6470 (FAX)
WWW.CALHOUNCOUNTYMI.GOV/PUBLICHEALTH