

Health Department

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Mission

To serve, protect and promote a healthy community for all.

Overview

The Kent County Health Department (KCHD) is responsible for continually assessing the health of the community and ensuring that certain services are available and accessible for its citizens. To this end, the Health Department investigates the causes of disease, epidemics, morbidity and mortality, and environmental health hazards using vital and health statistics for epidemiological studies. KCHD also plans and implements public education and enforces public health laws.

The Health Department is responsible for assuring the provision of certain core programs in the following areas: vision and hearing screening, public water supplies, private and Type II groundwater supplies, food service sanitation, immunization, sexually transmitted diseases, on-site sewage disposal management, and general communicable disease control. KCHD offers several other services beyond these core programs.

The Health Department operates four public health clinics throughout the county that offer immunizations and the Women, Infants, and Children program (WIC). These programs prevent disease and ensure adequate nutrition for moms and babies from pregnancy to childhood. KCHD also operates a tuberculosis (TB) and Personal Health Services (PHS) clinic. Through testing and direct observed therapy, the TB clinic aggressively treats cases of TB to eradicate the disease from Kent County. PHS offers testing, counseling, and in some cases, treatment, of HIV, gonorrhea, syphilis, and Chlamydia. As part of its work, the Communicable Disease and Epidemiology units of KCHD work with local health care providers to track disease, investigate outbreaks, and report County-wide case numbers for these diseases and approximately 75 other illnesses ranging from influenza to salmonella. KCHD has a state-of-the-art laboratory to test microbiology, water samples, and more.

While the clinic and lab settings are a big part of public health, much of the Health Department's work takes place in the field. Public health nurses and caseworkers make thousands of home visits each year, teaching parenting skills, inspecting homes that have contributed to lead poisoning in children, and supporting parents who are grieving the loss of a child. Sanitarians inspect restaurants, swimming pools, adult care facilities, well and septic systems, and more. Nurses make home visits to ensure that TB patients are completing their treatment regimens. PHS staff take HIV testing into the community to target high-risk populations. Health Education and Promotion staff bring important lessons to classrooms, community centers, the workplace, and elsewhere. Education topics range from nutrition to substance abuse prevention.

Finally, KCHD oversees the Kent County Animal Shelter. Shelter staff and Animal Control work together to protect Kent County residents from harm done by animals and to protect animals from cruelty and neglect from people. The Shelter's adoption program strives to place homeless pets into the homes of responsible pet owners.

KCHD's work spans a wide range of responsibilities, all with the common goal of promoting health, preventing illness, and prolonging life.

Strategic Goals

- Conduct and disseminate assessments focused on population health status and public health issues facing the community (Proactive and Innovative Government)
- Investigate health problems and environmental public health hazards to protect the community (Safe Community)
- Inform and educate about public health issues and functions (Safe Community)
- Engage with the community to identify public health problems (Citizen Participation)
- Develop public health policies and plans (Proactive and Innovative Government)
- Enforce public health laws (Safe Community)
- Promote strategies to improve access to healthcare services (High Quality of Life)
- Maintain a competent public health workforce (Efficient Use of Resources)
- Evaluate and continuously improve health department processes, programs, and interventions (Efficient Use of Resources)
- Contribute to and apply the evidence-base of public health (Proactive and Innovative Government)
- Maintain administrative and management capacity (Efficient Use of Resources)
- Maintain capacity to engage the public health governing entity (Proactive and Innovative Government)

Significant Accomplishments

Epidemiologists Face Outbreaks in 2016

In January 2016, the unit investigated a cluster of cases of Toxic Shock Syndrome among teenage females. This cluster was linked to additional cases in Mason, Montcalm and Oakland Counties. Investigation identified that many individuals were using the same brand of super-absorbent tampons. Staff was able to obtain product samples and worked with the Michigan Department of Health and Human Services and the Food and Drug Administration to have the products tested. The story was covered by multiple media outlets. Education was delivered to the public about safe use of feminine hygiene products. While the tampons were not ultimately identified as a cause of the illnesses, the unit's response to the situation and collaboration with state and federal agencies put it in a position to prevent additional cases in the population.

2016 also saw the team respond to two clusters of mumps cases on college campuses. The unit worked closely with the administration and health services staff of the affected colleges to implement appropriate prevention measures. KCHD immunization staff provided free on campus vaccination services to students with undocumented or no history of mumps immunization. Staff also worked with campus health services staff to ensure that those who did not receive vaccination were excluded from campus activities for a 26-day period.

In August 2016, the CD/Epi Unit and KCHD Environmental Health Division investigated an outbreak of gastrointestinal illness among players and coaches associated with a varsity football team at a local high school. Environmental Health staff conducted an on-site investigation to determine if the illnesses were potentially linked to the water supply. EH staff identified two potential exposures that were specific to the members of the varsity football team. CD/Epi staff interviewed members of the team and their families to determine risk factors for the illness. A total of 81 interviews were conducted and identified that the likely cause of illness was exposure to river water and mud during a pre-season riverside camping trip approximately 10 days prior to the first onset of illness. Staff worked closely with

school administration to make decisions on how best to protect the health of the student athletes and ultimately decided upon canceling the team's opening game to prevent transmission. Several players submitted stool specimens to their primary care physician and seven specimens tested positive for the parasite *Cryptosporidium*.

KCHD Responds to Vapor Intrusion

In May of 2016 KCHD was notified of a vapor intrusion of tetrachloroethylene (PERC) in two properties in Grand Rapids. PERC may have health effects such as a higher risk of bladder cancer, non-Hodgkin's lymphoma, or multiple myeloma. KCHD issued an order to prohibit occupancy of the affected properties leading to the displacement of two non-profit organizations and six apartment residents until PERC levels were at a safe level. Over the course of sixty days KCHD:

- worked in partnership with various partners including the American Red Cross, Michigan State Housing and Development Association and the Salvation Army to provide housing for the displaced residents
- drew samples from twenty-eight people from the affected buildings to determine their level of PERC, followed up with their results, and provided them with information on further care
- collaborated with EPA, DEQ and MDHHS to ensure other buildings in the area were safe
- provided information to the public and the media regarding the situation

In July the order was lifted and the residents returned to their homes and businesses.

REACH Team Expands Influence Toward Healthy Living

KCHD's Racial and Ethnic Approaches to Community Health (REACH) team, along with multiple community partners made great strides in improving access to healthy environments for residents of Grand Rapids Hope Zones. Working with the YMCA, the REACH team increased access to healthy foods by implementing two healthy corner stores in areas designated as food deserts. Hope Zone residents are now able to purchase fresh fruits and vegetables at a total of 5 corner stores. Through

partnerships with Cherry Health and the Grand Rapids Urban League, REACH established tobacco free zones in 6 city parks. In addition, through partnerships with GRPS and Grand Avenue for Arts and Humanities, 11 school playgrounds and 2 neighborhood recreation areas were designated as tobacco free zones. REACH also established 5 new neighborhood walking routes in the Garfield Park and South Town neighborhoods.

Health Equity and Social Justice Workshops Hit the Road

KCHD along with Strong Beginnings continued their two-day Health Equity Social Justice Dialogue Workshops, reaching an additional 65 people now totaling over 600 people since the workshops started. KCHD also worked with the Friend of the Court and Human Resources to adapt the Workshop into a two half day workshop for FOC, Housing and Community Development, Legal Assistance Center and 63rd District Court staff. Over 120 employees attended the workshops. KCHD is working to expand its outreach to the Kent County Sheriff's Department corrections and road patrol staff. Many agencies have made the workshops required for staff. The workshops continue to receive positive feedback.

KCHD receives Model Practice Award for Workforce Development

The KCHD's Emergency Preparedness and Accreditation Coordinators collaborated to create and implement one workforce development plan that addresses the requirements of both Public Health Accreditation Board and Project Public Health Ready (PPHR) standards. This plan established core competencies for all KCHD staff and lead to the formation of a workforce development committee responsible for executing the plan. KCHD staff have shared their experience and strategies with other public health departments through conferences, presentations, and by publishing a Story from the Field for the National Association of County and City Health Officials (NACCHO) and an article in the NACCHO Exchange Newsletter. KCHD's workforce development plan has been recognized as a best practice through NACCHO's PPHR program, was designated a Model Practice by NACCHO in July 2016, and is available

in its entirety as a resource through NACCHO's PPHR Toolbox.

Emergency Preparedness Develops an Inclusive Preparedness Program

With the goal of providing accessible emergency preparedness training to Kent County residents of varying abilities, KCHD partnered with the Kent Regional Inclusive Community Coalition, Kent County Emergency Management, the American Red Cross, the Kentwood Fire Department, Kent County Medical Reserve Corps, and the Salvation Army to provide the training.

The class included 16 total participants and eight graduates that attended each class. Students learned basic preparedness skills that can be shared and they are connected with first responders in the county. Two more cohorts will start this program in March, 2017 with previous graduates serving as peer trainers.

Lab Wants You to Know What's in Your Water

In 2016 the KCHD lab added lead, copper and arsenic testing to better meet the changing needs of the community. As a result, KCHD is fast becoming the lab of choice for water testing. The lab will launch a "Know Your H2O" campaign to target private well owners who may not be aware of EPA and DEQ recommendations to test annually.

Laboratory staff also participated in four S.T.E.M. (Science, Technology, Engineering and Math) events with Kentwood Schools. The sessions focused on the importance of handwashing and the spread of bacteria.

Community Wellness

The Breast and Cervical Cancer Prevention Program provided prompt and accurate follow-up for 100% of the women who received services from our program and were diagnosed with cancer in 2016, and received a perfect score on the MDHHS audit of services.

Strong Beginnings received the American Hospital Association's NOVA Award which is given to a collaborative effort that has demonstrated a positive impact on community-level health. This award was given to Strong Beginnings for its work to improve maternal and infant health among African Americans and Latinos in Kent County. In collaboration with other

maternal/child programs in the county infant mortality rates among African Americans in Kent County have been cut in half over the last decade.

In 2016, our Refugee team completed health screenings on 996 refugees, and found them medical homes among our 14 community partner clinics and primary care offices. This is a record number of incoming refugees and a record number of community partners.

Material Review Committee

The Material Review Committee (MRC) was developed as a recommendation from the Cultural Competency Policy and to maintain administrative and management capacity. The MRC ensures that all materials coming out of KCHD are reviewed for culturally sensitivity, cultural appropriateness and translation, understandability, visual appearance and produced at the appropriate level of health literacy. Over the course of 2016, the MRC reviewed over 50 documents such as flyers, brochures, newsletters, comic books, videos and fact sheets. The MRC is a great example of a cross division partnership.

Communications

KCHD communications worked in 2016 to expand its relationships with local media by establishing the KCHD News Network YouTube channel. The site provides an online repository for KCHD video that news media is allowed to use in the coverage of stories regarding KCHD. By recording and editing video of carefully selected news topics, the department is able to obtain more frequent, compete and often better quality TV news coverage. The addition of a "green screen" studio and the purchase of a teleprompter ensure that our video messages achieve professional quality. All video that is released by KCHD meets or exceeds current professional broadcast standards both technically and aesthetically. Two additional radio stations WOOD Radio and WBBL have agreed to add regular KCHD segments.

The KCHD Facebook page has almost doubled its "friendships" this year.

Immunizations

2016 was the second year of a Michigan State Law that required parents who

were seeking a non-medical waiver for their children's vaccinations to attend a mandatory counseling session. More than one thousand of the fifteen minute sessions were scheduled and completed. Despite the high number 82% of the children in Kent County between the ages of 19 months and 17 years were fully vaccinated in 2016.

Food Safety

As the numbers of restaurants continues to grow in Kent County so does the work of Kent County Sanitarians. Plan reviews for new facilities hit an all-time high in Kent County this year as 165 operations submitted plans for approval. In the previous decade the number of plans submitted averaged 105.

550 of the 1700 eligible facilities in Kent County achieved the "Food Safety Award" for outstanding inspections records.

Sanitarians also executed 80 enforcement actions.

Animal Shelter

The Kent County Animal Shelter is celebrating its best year ever setting an all-time record for live release rate. 56% of the animals that were admitted to the shelter left with a new owner. 100% of healthy adoptable dogs and 925 of the healthy adoptable cats found new homes. With the help of the Bissell Pet Foundation, the shelter also debuted the "Habitat", an open facility where cats can mix with potential adopters. There are places for cats to play, lounge and hide and even a giant fish tank to watch. The Habitat was honored with a "Bright Ideas" Award at the 2016 Great Lakes Animal Welfare Conference, where Chelsi Hall, Animal Care Specialist presented on the implementation of the project.

I.T.

In 2016, KCHD installed over 30 Wireless Access Points. This allowed KCHD staff and guests wireless access at all Health Department locations. Enough wireless devices, such as Laptops and Tablets, were purchased to allow over half of the Health Department staff to perform their jobs wirelessly.

DEPARTMENT: HEALTH DEPARTMENT

Department Mission Statement:

To serve, protect, and promote a healthy community for all.

Service Area: Administration

Service Area Mission Statement:

Provide administrative, financial and information technology support to the Department, conduct ongoing assessments of health status in the community and disseminate public health information.

Goal

- Serve, protect, and promote a healthy community for all by providing overall leadership and support to the department.

Objectives

- To complete 95% of communicable disease reports within 30 days of notice.
- To ensure at least 67% of hospital infection control/hospital laboratories are entering reportable disease information into the Michigan Disease Surveillance System.
- To ensure computer network is available for login 100% of regular working hours.
- To resolve 99% of Footprints tickets within 10 business days.
- To ensure 100% of revenues and expenditures will be recorded in correct accounts.

Indicators	2014 Actual	2015 Expected/ Actual	2016 Expected/ Actual	2017 Expected/ Actual
Outcomes				
% of communicable disease reports completed within 30 days of notice	88.00%	95.00%/ 82.00%	95.00%/ 83.00%	95.00%
% of hospital infection control/hospital laboratories that are entering reportable disease information into the Michigan Disease Surveillance System	50.00%	67.00%/ 50.00%	67.00%/ 50.00%	67.00%
% of time the computer network server is available for access during regular working hours	99.99%	100.00%/ 99.99%	100.00%/ 99.99%	100.00%
% of Footprints tickets resolved within 10 business days	99.08%	99.00%/ 98.35%	99.00%/ 99.03%	99.00%

Percent of Medicaid insurance claims paid.	NA	0.00%/0.00%	0.00%/86.00%	80.00%
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	2014 Actual	2015 Expected/ Actual	2016 Expected/ Actual	2017 Expected/
Indicators				
Efficiencies				
Cost per case of communicable disease investigated	\$200	\$230/\$186	\$200/\$125	\$150

	2014 Actual	2015 Expected/ Actual	2016 Expected/ Actual	2017 Expected/
Indicators				
Outputs				
Number of communicable disease investigations	2,130	2,000/2,415	2,200/2,607	2,500
Number of regular working hours the network was unavailable	4.50	<4.00/6.00	<4.00/4.50	4.00

Service Area: Community Clinical Services

Service Area Mission Statement:

To promote, protect and preserve the health of Kent County citizens by providing clinical services in the areas of routine and travel immunizations, nutritional services for pre and post-natal women, infants and children, as well as sexually transmitted infections, HIV and tuberculosis.

Goal

- Serve, protect, and promote a healthy community for all by providing essential public health services in the clinical setting.

Objectives

- Rates for fully immunized children in Kent County 19-35 months of age will reach 83%.
- Rates for fully immunized children in Kent County 13-17 years of age will reach 75%.
- Number of women added to WIC during the first trimester of pregnancy will reach 50%.
- Breastfeeding initiation rates among infants enrolled in WIC will exceed the state average.
- Ensure that 100% of clients that test positive for HIV receive their result and appropriate counseling and referral.
- Ensure that 100% of positive HIV contacts are notified of and counseled on their potential exposure.

Indicators	2014 Actual	2015 Expected/ Actual	2016 Expected/ Actual	2017 Expected/ Actual
Outcomes				
% of children 19-35 months of age fully immunized based on MCIR registry data	82.00%	83.00%/ 82.00%	82.00%/ 82.00%	83.00%
% of Children 13-17 years of age fully immunized based on MICR data.	74.00%	75.00%/ 81.00%	85.00%/ 82.00%	83.00%
% of woman added to WIC during the first trimester of pregnancy	50.00%	50.00%/ 46.00%	45.00%/ 42.00%	40.00%
Infant breastfeeding initiation rates will exceed the state average	Yes	Yes / Yes	Yes / Yes	Yes

% of clients that test positive for HIV that receive their result and appropriate counseling and referral	100.00%	100.00%/100.00%	100.00%/100.00%	100.00%
% of positive HIV contacts notified of and counseled on their exposure	100.00%	100.00%/100.00%	100.00%/100.00%	100.00%

Indicators	2014 Actual	2015 Expected/ Actual	2016 Expected/ Actual	2017 Expected/ Actual
Efficiencies				
Immunization cost per client visit	\$93	\$90/ \$102	\$101/ \$90	\$90
WIC cost per client visit	\$56	\$55/ \$54	\$55/ \$54	\$50
STI cost per client visit	\$162	\$160/ \$169	\$167/ \$138	\$174

Indicators	2014 Actual	2015 Expected/ Actual	2016 Expected/ Actual	2017 Expected/ Actual
Outputs				
Number of Children 19 - 35 months of age fully immunized based on MCIR registry data	10,977	11,000/ 10,997	11,000/ 10,968	11,000
Number of Children 13-17 years of age fully immunized based on MICR data.	40,864	41,000/ 41,714	41,800/ 42,221	43,000
Number of pregnant women added during the first trimester	1,771	1,800/ 1,478	1,443/ 1,192	1,137
Number of infants ever breastfed	2,945	2,950/ 2,825	2,820/ 2,842	2,850
Number of positive HIV contacts	50	50/ 65	70/ 60	60

Service Area: Community Wellness

Service Area Mission Statement:

Provide systematic screening, referral and coordination services to improve the health of women and children.

Goal

- Serve, protect, and promote a healthy community for all by providing essential public health services throughout the community.

Objectives

- 97% of clients in the Nurse Family Partnership (NFP) will deliver, per year, at equal to or greater than 37 weeks of gestation.
- 75% of prenatal Maternal Infant Health Program (MIHP) clients who smoke will report a 50% or more reduction in cigarettes smoked.
- 50% of children who do not pass vision or hearing screening each year will have documented follow-up with a medical provider.
- 100% of refugees per year will receive health screenings within 60 days of arrival.
- 100% of children less than 6 years of age tested each year for blood lead will have blood lead levels of less than 5ug/dL.
- To ensure that 100% of Women’s Health Network clients who receive an abnormal cervical screening result have a final diagnosis within 90 days.
- To ensure that 100% of Women's Health Network clients who receive an abnormal breast screening result have a final diagnosis within 60 days.

Indicators	2014 Actual	2015 Expected/ Actual	2016 Expected/ Actual	2017 Expected/ Actual
Outcomes				
% of NFP clients delivering at equal to or greater than 37-week gestation	97.00%	97.00%/ 90.00%	93.00%/ 88.00%	92.00%
% of MIHP women reporting a 50% or more reduction in cigarettes smoked (Insight)	56.00%	75.00%/ 54.00%	75.00%/ 55.00%	75.00%
% of children who do not pass vision or hearing screening that have documented follow up with a medical provider	43.00%	50.00%/ 45.00%	50.00%/ 47.00%	50.00%
% of refugees who received health screening within 60 days (RAP report)	80.00%	100.00%/ 98.00%	100.00%/ 90.00%	100.00%
% of children less than six years of age with blood lead levels of less than 5ug/dL (MDCH-CLPPP)	NA	0.00%/ 93.80%	93.80%/ 0.00%	95.00%

% of Women's Health Network clients with an abnormal breast screening result that are diagnosed within 60 days	100.00%	100.00%/99.90%	100.00%/100.00%	100.00%
% of Women's Health Network clients with an abnormal cervical screening result that are diagnosed within 90 days	100.00%	100.00%/99.80%	100.00%/100.00%	100.00%

	2014 Actual	2015 Expected/ Actual	2016 Expected/ Actual	2017 Expected/ Actual
Indicators				
Efficiencies				
Cost per refugee	\$489	\$500/ \$650	\$650/ \$581	\$650
Women's Health Network program cost per abnormal screening.	NA	\$0/ \$0	\$0/ \$440	\$420

	2014 Actual	2015 Expected/ Actual	2016 Expected/ Actual	2017 Expected/ Actual
Indicators				
Outputs				
Number of NFP clients delivering at equal to or greater than 37-week gestation (Insight/CIS)	28	60/ 81	60/ 34	60
Number of MIHP women reporting a 50% or more reduction in cigarettes smoked (Insight)	127	150/ 87	150/ 54	100
Number of children receiving Hearing/Vision screening (Insight)	84,360	90,000/ 89,490	90,000/ 92,927	93,000
Number of Refugees who received health screening within 60 days (RAP report)	602	600/ 637	800/ 906	700
Number of children less than six years of age with blood lead levels of 5µg/dL or greater (MDCH-CLPPP)	NA	0/ 611	600/ 0	500
Number of Women's Health Network clients with abnormal screening results (Breast)	502	500/ 452	350/ 554	550
Number of Women's Health Network clients with abnormal screening results (Cervical)	75	70/ 56	30/ 43	40

Service Area: Environmental Health

Service Area Mission Statement:

Apply state and local laws, codes, ordinances, and regulations to control and prevent environmental conditions that may endanger the health and/or safety of the community.

Goal

- Serve, protect, and promote a healthy community for all by providing essential public health services which prevent injury and illness from exposure to environmental hazards.

Objectives

- 100% of requested well/septic systems evaluations are inspected/closed within 30 days.
- 100% of fixed food service establishments shall be inspected at required frequency.
- 100% of Type II public water supplies will not have maximum contamination level (MCL) violations as specified by the EPA.
- 40% of animals received will be reclaimed, adopted or transferred to another shelter.
- 95% of dispatched priority 1 & 2 (aggressive animal, stray livestock, emergency cruelty, injured animal) Animal Control complaints will be responded to within 45 minutes.
- 100% of Gen-Probe and HIV specimen runs meet quality control standards (do not require repeat testing.)

Indicators	2014 Actual	2015 Expected/ Actual	2016 Expected/ Actual	2017 Expected/ Actual
Outcomes				
% of well/septic system evaluations inspected/closed within 30 days	85.00%	100.00%/ 91.00%	100.00%/ 93.00%	100.00%
% of fixed food service inspections at required frequency	99.00%	100.00%/ 100.00%	100.00%/ 99.90%	100.00%
% of Type II water supplies without MCL violations	99.00%	100.00%/ 99.00%	100.00%/ 99.00%	100.00%
% of animals reclaimed, adopted or transferred	40.00%	40.00%/ 48.00%	50.00%/ 56.00%	66.00%
% of priority 1 & 2 complaints responded to within 45 minutes	95.00%	95.00%/ 95.00%	95.00%/ 100.00%	100.00%
% of Gen-Probe specimen runs meeting quality control standards	100.00%	100.00%/ 100.00%	100.00%/ 94.00%	100.00%

Indicators	2014 Actual	2015 Expected/ Actual	2016 Expected/ Actual	2017 Expected/ Actual
Efficiencies				
Number of services per General Sanitarian	1,134	1,000/ 800	800/ 869	850
Number of fixed food establishments per Food Sanitarian	230	230/ 211	211/ 225	225
Number of animals received/FTE kennel staff	1,055	1,055/ 807	750/ 719	680
Number of animal complaints investigated/ACO	653	653/ 624	624/ 697	700
Total number of samples tested/Med. Tech. (Inc. quality control)	14,000	14,000/ 10,416	11,500/ 13,231	13,200

Indicators	2014 Actual	2015 Expected/ Actual	2016 Expected/ Actual	2017 Expected/ Actual
Outputs				
Total number of well/septic evaluations	255	250/ 353	350/ 356	350
Total number of fixed food facilities	2,145	2,145/ 2,114	2,114/ 2,262	2,260
Number of Type II public water supplies meeting monitoring requirements	335	335/ 355	355/ 334	337
Number of animals received	6,328	6,328/ 5,651	5,300/ 5,034	4,800
Number of all animal bite complaints	975	975/ 978	978/ 985	985
Total number of Gen-Probe specimen runs	117	117/ 145	145/ 101	100
Total number of Gen-Probe specimen runs meeting quality control standards	108	108/ 145	145/ 95	95