2011 Annual Report

Be wise Be well.

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Saginaw County Department of Public Health (scoph)





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Dear citizens of Saginaw County,

On behalf of the Saginaw County Board of Commissioners, Board of Health, and department staff, I am pleased to present this 2011 Annual Report highlighting the activities and services of your Saginaw County Department of Public Health. Looking back, 2011 was a year of continued dedication to the basic tenets of governmental public health work: to *prevent* the outbreak of disease and *promote* and *protect* population health among Saginaw County residents and those who visit here. This year we were "graded" by the Michigan Local Public Health Accreditation Commission on our performance in meeting standards for essential local public health services mandated by Public Act 368 of 1978, including: *food service sanitation, communicable disease control, drinking and public water supply safety, immunizations, on-site sewage treatment management, sexually transmitted disease control, and hearing and vision screening for children.* I am pleased

to report that your Health Department and its dedicated staff received an "A" grade, including special recognition for demonstrated commitment to quality improvement.

The mission of the SCDPH is really one shared with collaborative partners throughout the County and region. The work is too great and too important for just a single agency. Therefore, this year, with multiple planning partners, we were pleased to roll out the "Saginaw County Roadmap to Health," – a five-year community health improvement plan. We also provided leadership to the Michigan Health Information Alliance (MiHIA), – a recently incorporated 14-county enterprise focused on improving population health in our geographic and medical trading region. After all, influences that impact wellness and quality of life often cross jurisdictional boarders.

Looking forward, the SCDPH will remain true to our mission and the programs and services outlined in this report. Our staff is committed to accountable stewardship of the talent and financial resources available to us. We are excited about introducing a new strategic plan for the department in 2012, and continued partnership with others to make Saginaw County the healthiest place to grow up and grow old.

Please join us! Contact me if you have questions or ideas about how we might improve our work or how you might become involved. I would be happy to hear from you.

Sincerely,

Sm KMu Kellar

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Protecting and promoting the public's health since 1928



Be wise. Be well.

All the other apartments looked empty.

That was the first thing Jane noticed. A Healthy Start Program nurse, Jane was on her way to a home visit with Antoya, a special-needs mother and Healthy Start client.

A few months before, Antoya and her children – 4 years, 2 years and 4 months old – had been homeless. "She received referrals through our Healthy Start Program that helped her find the apartment," Jane says. "Her children were a joy to visit, and Antoya loved learning parenting skills."

Now, during a February arctic blast, Jane made her way to Antoya's apartment and found it strange that the building seemed empty. She was even more surprised when Antoya answered the door.

"She was wearing a snowmobile suit," Jane says. All the children were wearing snowsuits and carrying blankets. They were sitting around an electric heater, but I could still see their breath in the cold air."

A healthy start?

Across the U.S., and in Saginaw County, an African-American baby is more than twice as likely to die before the age of one than a white baby ... and four times as likely to die from complications related to low birth weight.

The U.S. Department of Health and Human Services launched the Healthy Start Program to reduce this disparity. The program helps mothers-to-be obtain proper prenatal care and learn parenting skills. Nurses and patient advocates help mothers deal with a host of issues that can threaten the health of mother or child – from substance abuse to domestic violence.

Or an irresponsible landlord.

Antoya had paid her \$500 rent and her \$400 monthly share for utilities. But the building had been in foreclosure for two months, and Consumers Energy had finally shut off the gas for non-payment.

Working with Healthy Start staff, Jane got Antoya and her children placed in emergency housing for the day, then contacted Legal Services. "We got some insight on this particular landlord," Jane says. Legal Services and Healthy Start staff helped Antoya recover her prior rent, utility and damage deposits.

Today, Antoya and her children are safe and healthy in a comfortable – and heated – home. They are a testament, Jane says, to the important role played by Healthy Start. They're also illustrative of the many ways the Saginaw County Department of Public Health touches the lives of the people it serves. In 2011, we completed more than 1,100 inspections of food service operations, to help ensure that the meal at your favorite restaurant is safe to eat. We administered more than 15,000 immunizations to protect children and adults from deadly diseases. We collected more than 10 tons of hazardous and semi-hazardous waste, keeping it out of the environment. We helped more than 1,000 people learn how to manage and control environmental lead hazards, to help reduce the risk of lead poisoning. And we conducted more than 14,000 water tests to ensure its safety for drinking and recreational use.

Hearing and vision screenings, family planning, day care and adult foster care inspections: in one way or another, there are very few lives in Saginaw County we didn't touch in 2011.

In 2012, we want to touch even more. That's why we're launching a new awareness campaign that will further encourage people to take a proactive role in protecting and promoting the health of themselves, their families and their community. It will encourage people to be aware of the things that can threaten their health and well-being, to take prudent precautions against them, and to understand where they can get help.

After all, one of the most important tools in public health is information. We want people to get the information they need, so they can ...

Be wise. Be well.

Protect and promote.

Mission

Our commitment is to protect and promote the public's health and well-being.

Vision

To be a recognized leader providing health resources and quality services to our diverse community through innovation and dedication.

Vision Priorities

- We will make a measurable impact in improving the health of our community
- We will promote health equity throughout our community.
- We will establish a customer-focused culture.
- We will promote awareness of our department and our services in the community.
- We will partner with other community organizations.
- We will be good stewards of our financial resources and explore ways to secure funding.
- We will create an environment that values and respects employees.
- We will improve our internal communication.
- We will utilize and upgrade technology

Guiding Principles

- Collaboration (internal and external)
- Respect
- Diversity
- Excellence
- Accountability
- Commitmen



The Health Department was awarded a three-year, \$3.1-million grant from the U.S. Department of Housing and Urban Development for its Lead Based Paint Hazard Control and Healthy Homes Initiative to create lead-safe housing and reduce childhood lead poisoning in the City of Saginaw.

In partnership with the University of Michigan School of Public Health, over 200 homes in the City of Saginaw received Healthy Homes intervention services and/or products through the Healthy Homes Demonstration Grant, designed to reduce and prevent exposures to lead-based paints, asthma triggers and unsafe housing conditions.

\$336,150 in Public Health Emergency Response extension funds were secured to update and exercise pandemic response plans and communication strategies, as well as to upgrade the Department's information technology and telephone system.

The "Saginaw County Roadmap to Health," – a five-year community health improvement plan – was unveiled at a public event by the SCDPH and planning partners. (Plan can be viewed at www.saginawpublichealth.org.) Continued community health improvement planning work was bolstered by an additional \$50,000 grant award from the Kresge Foundation.

The Health Department was reviewed this year by the Michigan Local Public Health Accreditation Program, a triennial week-long site visit that assesses compliance with required standards of operation. An "A" grade was achieved, with corrective action required on 10 of 141 total indicators. Along with a Certificate of Accreditation, the Department was awarded a Certificate of Quality, "recognizing the agency's ongoing efforts to establish a culture of quality; demonstrate the ability to evaluate the effectiveness of public health programs; and to implement quality improvement."

National Public Health Week was recognized with an all-staff training event and Distribution Node exercise at the Dow Event Center. Staff practiced roles and scenarios in receipt and distribution of Strategic National Stockpile materials that might be delivered to Saginaw County during a public health emergency.

The Health Department submitted successful competitive proposals to the Michigan Department of Community Health for new services to begin October 1, 2011. Expanded laboratory testing and a WIC breastfeeding support program will benefit from this additional funding.

Our laboratory implemented a new Laboratory Information Management System, including a quality improvement transition to the use of bar code labels and readers. The SCDPH Substance Abuse Coordinating Agency added outpatient treatment options for individuals with co-occurring substance use and mental health disorders to its network of care.

Our Dental Health Program collaborated with the Saginaw County Head Start Program to transport children by bus to the Health Department for dental visits and clinics.

The SCDPH Family Planning Program increased the number of male clients served by over 100% from last year.

Financial Statement

Revenues

	2011	2010	2009
State	\$1,641,770	\$1,881,302	\$2,373,926
Federal	\$6,552,205	\$6,975,337	\$6,112,667
Local (County Appropriation)	\$1,519,046	\$1,519,046	\$1,519,046
Other Taxes (PA2 & Tobacco)	\$567,574	\$287,173	\$281,342
Fees & Reimbursements	\$3,823,755	\$4,368,973	\$3,907,854
Fund Balance	\$0	-\$736,250	\$55,895
Total Revenues	\$14,104,350	\$14,295,581	\$14,250,730



2011 Revenues

Expenditures

	2011	2010	2009
Administration	\$1,493,574	\$1,421,250	\$1,569,761
Laboratory	\$641,586	\$594,108	\$550,023
WIC	\$825,053	\$745,055	\$768,446
Dental	\$251,073	\$270,443	\$279,257
Environmental Health	\$1,850,243	\$1,390,203	\$1,441,208
Substance Abuse	\$3,489,887	\$3,896,635	\$3,577,646
Personal & Preventive Health	\$4,536,862	\$5,019,869	\$5,414,388
Emergency Preparedness	\$521,529	\$524,471	\$173,629
Health Center Building	\$494,543	\$433,547	\$476,372
Total Expenses	\$14,104,350	\$14,295,581	\$14,250,730



Staffing

	2011	2010	2009
Number of Employees	103	95	101

Dental Health Services provides dental care for children in grades K-12 who meet program guidelines for eligibility.

	2009	2010	2011
Visits	2,126	1,775	1,637
Services	5,282	5,082	5,012

Health Promotion and Communications manages the Department's public information, marketing and public relations efforts, and coordinates emergency preparedness planning and response.

	2009	2010	2011
Health Education Outreach Events	81	74	263
Number of People Served	23,223	11,255	8,684
Educational Literature Distributed	11,300	5,550	3,655

Our **Laboratory** is designated as a Michigan Department of Community Health Regional Laboratory and performs a variety of tests for sexually transmitted diseases, water quality, and urine drug screening.

Laboratory Tests	2009	2010	2011
Microbiology	12,877	11,031	9,387
Serology	1,224	1,347	1,587
Water	15,558	14,972	14,668
Drugs of Abuse	5,006	5,268	5,390



Environmental Health Services inspects and assures the safety of a variety of public places from restaurants and swimming pools to private wells and septic systems. Specialized services include lead paint hazard assessment, household hazardous waste collection, pest control, and other disease prevention activities.

Food Service Program – Assuring a Safe Food Supply	2009	2010	2011
Licensed Establishments	703	669	752
Inspections	1,288	1,232	1,142
Enforcement Actions (hearings, orders)	33	46	37
Temporary Food Licenses	533	526	458
Waste Program – Preventing ground and surfac	e water contamination	on	
Sewage System Permits Issued (residential and commercial)	150	149	115
Evaluations (performance/mortgage/preliminary)	31	21	17
Landfill Inspections	311	327	73
Clean Sweep Collections (number of participants/lbs collected)	255/24,464	72/24,346	43/6,252
Mercury Collections (lbs collected)	14.5	10.3	1,044
Household Special Waste Collections (total participants/lbs collected)	270/18,871	211/17,181	370/21,525
Water Program – Assuring the quality of our drin	king and recreationa	l water	
Residential Well Permits Issued	133	146	141
Number of Abandoned Wells Plugged	93	98	81
Public Swimming Pool & Spa Inspections	113	92	103
Shelter & Indoor Air Quality – Promoting healthy	indoor environments	3	
Day Care & Adult Foster Care Inspections	84	68	56
Radon Kits Distributed	814	1,465	871
Elevated Blood Lead Level Investigations	6	4	3
Education – Protecting and promoting public hea	alth through training a	and education	
Participants (septic installers, food handlers, temporary food vendors, lead safe work practices trainees)	424	246	112
Healthy Homes and Lead Hazard Control Progra	am – Reducing reside	ential lead and other	health hazards
Applications Received	-	-	33
Risk Assessments Completed	-	-	16
HHLHCP Education (skills training and persons educated)	-	-	1,025
Complaint Investigation – Assuring compliance v	vith laws and manag	ing the environment	
Total Complaints Received	441	530	403

Personal and Preventive Health Services provides a wide array of newborn, child, and adult health care services. These include health screenings, communicable disease control, family planning, immunizations, hearing and vision screenings, and many other specialized health services for Saginaw County residents.

PPHS Services Provided/Client Enrollment	2009	2010	2011
Sexually Transmitted Infections (STI) Clinic Visits	2,889	3,013	3,186
Family Planning Annual Enrollment	4,290	4,353	4,023
Family Planning Clinic Visits	-	9,899	9,123
Hearing Screenings	13,919	13,781	11,926
Vision Screenings	13,257	12,512	10,308
Children's Special Health Care Services - Average monthly enrollment	651	707	684
Early On Annual Enrollment	164	140	141
Immunizations Administered	14,352	14,816	15,017
Great Beginnings Healthy Start Program - Pregnant women, infants and interconception women served	848	511	809
Childhood Lead Poisoning Prevention Program - Average Monthly Case Load	97	64	56

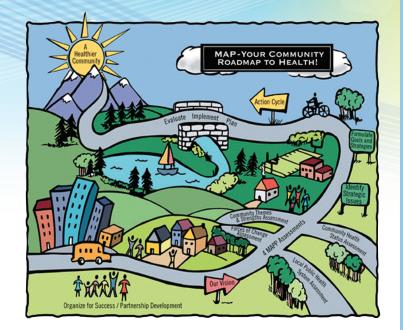
The Health Department is the **Substance Abuse Coordinating Agency** for Saginaw County, providing support and referral to a network of treatment and prevention providers.

Treatment Admissions	2009	2010	2011
Outpatient	1,032	1,068	878
Detox	261	250	272
Long-Term Residential	37	38	54
Short-Term Residential	266	247	253
Total Clients Served	1,618	1,603	1,457

WIC provides supplemental foods, nutrition education and counseling to pregnant, postpartum and breastfeeding women, infants newborn-11 months, and children 1-5 years of age.

WIC Average Monthly Enrollment	2009	2010	2011
Pregnant, Breastfeeding, Postpartum Women	1,146	1,214	1,191
Infants 0-11 months	1,187	1,244	1,221
Children 1-5 years	3,049	2,932	2,756
Total	5,382	5,390	5,185
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Saginaw County



Health Improvement Plan 2010-2015

Planning Partners

- Saginaw County Department of Public Health
- Alignment Saginaw
- Covenant HealthCare
- St. Mary's of Michigan
- Health Delivery, Incorporated
- Saginaw County Community Mental Health Authority
- Saginaw Intermediate School District
- the residents of Saginaw County

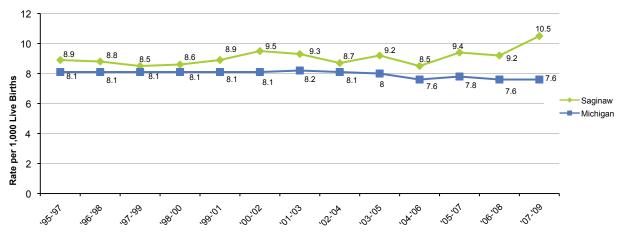
Community Health Priorities

- Infant Mortality
- Obesity
- Behavioral Health (including Mental Health and Substance Abuse)
- Chronic Disease
- Emerging Models of Health Services Delivery

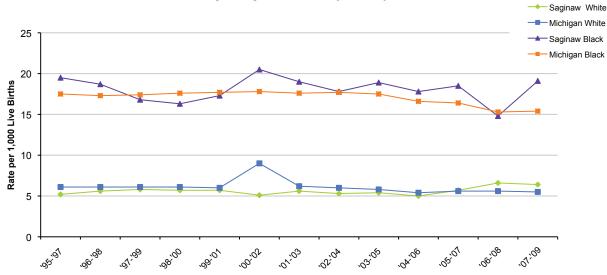
Status Assessment

Infant Mortality Three-Year Moving Average Infant Mortality Rates

Three-Year Moving Average Infant Mortality Rates, '95-'97 to '07-'09



Source: 1989-2009 Michigan Resident Death Files and Michigan Resident Birth Files, Vital Records and Health Statistics Section, Division for Vital Records and Health Statistics, Michigan Department of Community Health

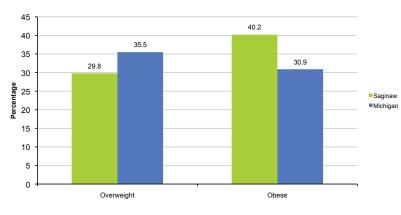


Three-Year Moving Average Infant Mortality Rates by Race, '95-'97 to '07-'09

Source: 1989-2009 Michigan Resident Death Files and Michigan Resident Birth Files, Vital Records and Health Statistics Section, Division for Vital Records and Health Statistics, Michigan Department of Community Health

Obesity Weight Status

Weight Status, 2008-2010



Overweight = The proportion of adults whose BMI was greater than or equal to 25.0, but less than 30.0

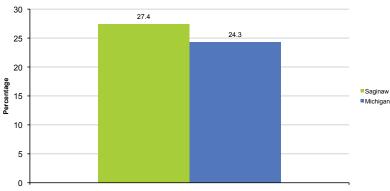
Obese = The proportion of adults whose BMI was greater than or equal to 30.0

Note: Body Mass Index, BMI, is defined as weight (in kilograms) divided by height (in meters) squared [weight in kg/(height in meters)2].

Weight and height were self-reported. Pregnant women were excluded.

Source: Michigan Behavioral Risk Factor Survey 2008-2010 Combined

Physical Activity



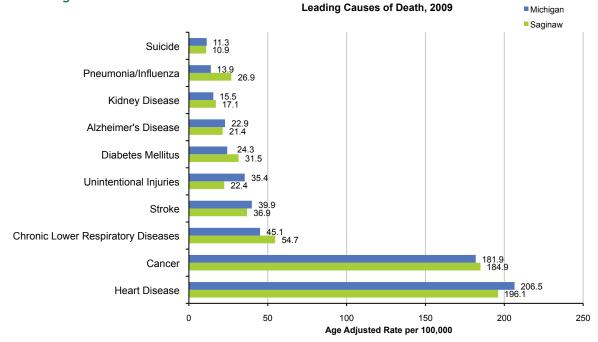
No Leisure-Time Physical Activity, 2008-2010

No Leisure-Time Physical Activity = The propor-tion of adults who reported not participating in any leisure-time physical activities or exercises such as running, calisthenics, golf, gardening, or walking during the past month.

Source: Michigan Behavioral Risk Factor Survey 2008-2010 Combined

No Leisure-Time Physical Activity

Chronic Disease Leading Causes of Death



Source: 2009 Michigan Resident Death File, Division for Vital Records and Health Statistics, Michigan Department of Community Health; Population Estimate (latest update 9/2009), National Center for Health Statistics, U.S. Census Populations With Bridged Race Categories

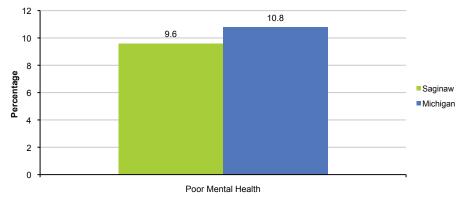
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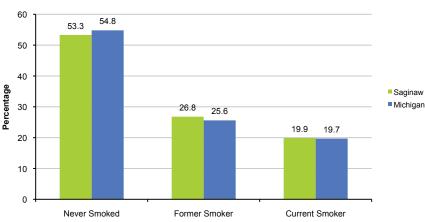
Behavioral Health

Mental Health Status

Poor Mental Health, 2008-2010



Poor Mental Health = The proportion of adults who reported 14 or more days, out of the previous 30, on which their mental health was not good, which includes stress, depression, and problems with emotions. Source: Michigan Behavioral Risk Factor Survey 2008-2010 Combined



Cigarette Smoking

Cigarette Smoking, 2008-2010

Current Smoker = The proportion of adults who reported that they had ever smoked at least 100 cigarettes (five packs) in their life and that they smoke cigarettes now, either every day or on some days. Former Smoker = The proportion of adults who reported that they had ever smoked at least 100 cigarettes (five packs) in their life, but they do not smoke cigarettes now. Source: Michigan Behavioral Risk Factor Survey 2008-2010 Combined

Alcohol Consumption, 2008-2010

Alcohol Consumption

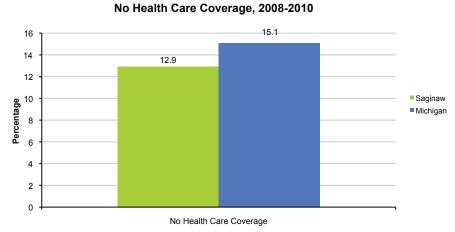
20 18.5 18 16.6 16 14 12 10 8 8 Saginaw Michigan 5.4 6 4.9 4 2 0 Heavy Drinking Binge Drinking

Heavy Drinking = The proportion of adults who reported consuming on average more than two alcoholic beverages per day for men or more than one alcoholic beverage per day for women. Binge Drinking = The proportion of adults who reported consuming five or more drinks per occasion at least once in the previous month.

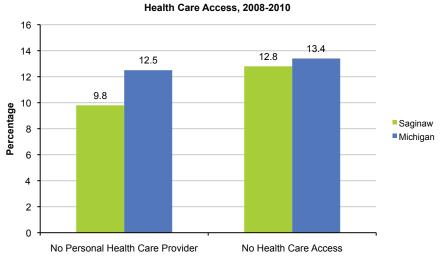
Source: Michigan Behavioral Risk Factor Survey 2008-2010 Combined

Emerging Models of Health Services Delivery

No Health Care Coverage



No Health Care Coverage = Among adults aged 18-64 years, the proportion who reported having no health care coverage, including health insurance, prepaid plans such as HMOs, or government plans, such as Medicare. Source: Michigan Behavioral Risk Factor Survey 2008-2010 Combined



Healthcare Access

No Personal Health Care Provider = The proportion of adults who reported that they did not have anyone that they thought of as their personal doctor or health care provider. No Health Care Access = The proportion of adults who reported that in the past 12 months there was a time when they needed to see a doctor but could not due to cost. Source: Michigan Behavioral Risk Factor Survey 2008-2010 Combined

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Main Office

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St. Charles Health Center 120 N. Vine St. St. Charles, MI 48655 989.865.9400

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