



STARK COUNTY HEALTH DEPARTMENT

2011 Annual Report



Health Commissioner's Report

As you may know, this is my last Annual Report of the Stark County Health Department. I will be retired when this issue comes out in print. There is one major issue of business that I must complete before I retire. When I came to Stark County in 1983 I put out a call for better health data from everywhere. My reasoning was that in order to assess how healthy we were as a county we must have the data to back it up. Over the 29 years that I have been Health Commissioner data has been more than abundant, especially in light of widespread computerization.

I should have enough data by now to answer my original question: "How healthy is Stark County?"

Well that depends on what data you look at and to whom you speak. If we compare Stark County to the rest of Ohio, we may not be making fair conclusions on the status of our health. The reason for this is that overall Ohio ranks 42 out of 50 states in known and measurable health outcomes. Therefore, if we rank at or above the state average in any one health indicator, it means that we are equal to or slightly higher than one of the unhealthiest states in the Union.

So how do we compare to the nation as a whole? One way to get a handle on this is to look at the County Health Rankings. With the Rankings, nearly every county in the country is ranked on health outcomes and on health factors. The problem again lies in the fact that the *County Health Rankings* only compare counties within a state. Based on the *County Health Rankings*, Stark County ranks 44th out of Ohio's 88

counties in leading health indicators. That would seem to put us in the middle of the pack. What we still do not know is how we rank to the rest of the nation. So after 29 years and tons of data and information I guess that I will have to answer that question based on my gut feeling.

How healthy is Stark County? We have made great strides and have become much healthier over the last 30 years. We have improved our infant mortality rate, we have reduced the death rate from cancer, we have reduced the rates of infectious disease, we have improved our food and environment, and we have reduced the number of childhood deaths from accidents and other causes by almost 30%. But, we still have a way to go. Preventable deaths from diseases caused by smoking and obesity are too high in our county, our state and our nation. A major effort is needed in prevention.

My gut feeling: this is a pretty healthy community to live in. We have great cooperation among the health departments, hospitals, private health practitioners, and social service agencies to keep improving our health. This cooperation is not something you will find in other communities, we truly are unique in Stark County. I have been proud to have been a part of that over the past 29 years.

HEALTH COMMISSIONER RECEIVES AWARD

Stark County Health Commissioner, William Franks recently received the Public Health Distinguished Service Award from the Association of Ohio Health Commissioners. He was nominated by the health department staff and fellow health commissioners for his outstanding leadership and contributions to the field of public health. Mr. Franks will retire from the Stark County Health Department in January 2012 with 41 years of public service in Ohio.



William J. Franks, RS, MPH
Health Commissioner

Stark County's COMMUNITY

HEALTH NEEDS ASSESSMENT

The Stark County Health Department began facilitating a Community Health Needs Assessment in 2010, with the support of several local agencies. Throughout 2011, the Advisory Committee provided oversight, recommendations and direction to the sub-committees who collected community data, reprioritized the health needs of County residents, organized a Summit and began creating a Health Improvement Plan.

The Survey Sub-Committee participated in the Stark Poll, a telephone survey implemented by The Center for Marketing & Opinion Research, LLC (CMOR). Stark County residents were asked a series of questions which focused on overall needs, physical and mental health, access to care, immunizations, smoking and tobacco use, alcohol consumption, prescription medication abuse, obesity, access to healthy food, exercise and texting while driving.

CMOR also provided a Data Analysis Report, a large comprehensive document which included data from the 2010 Indicators Report, the Stark Poll and the 2009-2010 Ohio Youth Survey. The Report identified the top five health needs for Stark County based on the critical need established through the review of the available data. Combining all the gathered data into one report simplified the prioritization process.

The Planning Sub-Committee organized a Summit to narrow down the top five health needs identified by the Data Analysis Report and to create the framework for Stark County's Health Improvement Plan. The Summit allowed the Advisory Committee to bring community advocates, legislative and political representatives, school district personnel and members of the Healthy Lifestyles and Public Health Assessment Committees together to share health concerns and improvement ideas. The 3 health needs voted the most important for Stark County were:

1. Healthy Lifestyles
2. Mental Health
3. Access to Health Coverage and Care

The Advisory Committee has a lot of decisions to make in 2012 regarding the outcome of the Health Improvement Plan. They will have to decide how the plan will be organized and presented to the public. Discussions will also continue on the possibility of creating and implementing a Marketing or Dissemination Plan to assist with the distribution and awareness of the data to agencies and community members throughout the County. The Advisory Committee is anticipating the completion of the Health Improvement Plan by June 2012.

Leading Causes of Death

2011

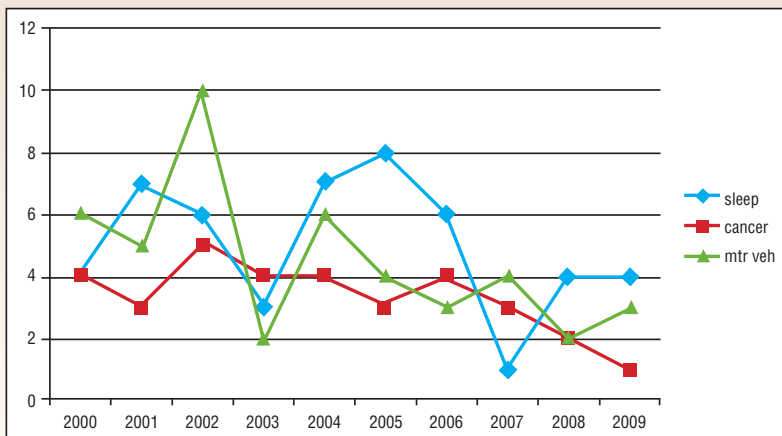
Cancer	377
Diseases of the Heart	312
Alzheimer's Disease	266
Chronic Lower Respiratory	116
Cerebrovascular Disease	83
Influenza and Pneumonia	58
Diseases of the Kidney	47
Septicemia	36
Accidents (Unintentional Injuries)	35
Suicide	24
Diabetes	14
Other	87
TOTAL	1,455

Safe Sleep

According to data from the Stark County Child Fatality Review Board, between the years of 2000 and 2009 there were more Infant Sleep Related Deaths than there were childhood deaths from Cancer or Motor Vehicle Accidents. Fifty infants died from sleep related deaths during this ten year period. In 2005 the Stark County Safe Sleep Task Force began a community education project targeted at parents of newborns, however, even with this education available these deaths continue to occur. Because of these alarming statistics the Stark County Health Department in coordination with the Stark County Safe Sleep Task Force held their first Infant Safe Sleep seminar for professional audiences such as: physicians, nurses, social workers and Emergency Medical Services on Thursday November 3, 2011 from 8:00am till 12:15pm at the Jackson Township Safety Center. Speakers for the seminar included: Merrily Wholf RN, MPH, the state Child Fatality Review coordinator and the program consultant for the state's Sudden Infant Death program at the Ohio Department of Health; Mark Hansbrough, BS, a Medicolegal Death Investigator for the Cuyahoga County Medical Examiner's Office; Bonnie Paridon RN, a public health nurse here at the Stark County Health Department where she coordinates the Safe Sleep and Cribs for Kids Programs; Lisa West, a mother from Stark County who suffered the tragic loss of her son Dayton in 2002 from an unsafe sleep environment; and Christina Gruber RN, MS, a Unit Manager with the Stark County Health Department. Topics included: state and local infant sleep related child fatality data; death scene investigations; proper safe sleep techniques; and infant safe sleep from a parents perspective.

The seminar was a success with 41 participants from agencies such as Health Departments, Department of Jobs and Family Services, Help Me Grow agencies, Metropolitan Housing Authority, Emergency Medical Services personnel, local physicians' staff, Hospital Obstetric Department nurses, and Coroner's office employees. Continuing Education credits were available through Mercy Medical Center for physicians, nurses, and social workers and for EMS workers with the Jackson Township Fire Department.

Three Causes of Death Over Time



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What Do Women Want to Learn About?

The news is bombarded with issues on eating disorders, obesity, and domestic violence. May 6, 2011 the Stark County Health Department's Women's Health Clinic offered a seminar dealing with the complicated subjects that women deal with on a daily basis. The Women's Health Clinic surveyed their clients regarding educational topics that were important to them. The main topics targeted methods of self care, weight loss, healthy eating and managing stress. The seminar was offered in two, four hour sessions. Seventy five women registered for the seminar.

Britany Morgan, CPT and Rhoda Steiner, LPCC were the two outstanding speakers for the day. Rhoda Steiner is a licensed professional clinical counselor with 32 years of experience from working in Bolivia to providing different types of counseling services in the United States. Ms. Steiner spoke on topics of loving yourself, and making good choices for your relationships and yourself. She also spoke on the connection between stress

and physical illness with strategies to decrease and deal with stress. Britany Morgan, our other speaker, has been a physical therapist assistant for eight years and a personal trainer for six years. She has a website that offers advice and healthy recipes. Ms. Morgan spoke on maintaining health and resisting disease through nutrition and physical activity. Participants experienced Yoga exercise and nutritional snacks and recipes that they could take home to their families.

The Stark County Health Department Women's Health Clinic offers routine gynecological services including birth control methods and education for women of all ages. In the past year the guidelines for Pap testing and other women's health exams have changed, but the need for women to take care of themselves has not. The Stark County Health Department continues to keep women's health as a priority.



Division Directors



Emily S. Caniford, RN, MSN
Director of Administration & Support Services



Kirk K. Norris, RS, MPH
Director of Environmental Health

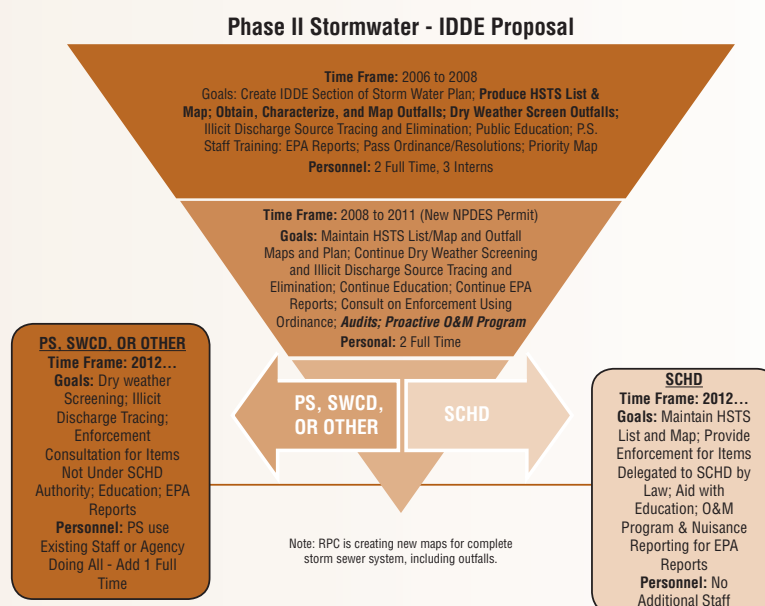


Lynn M. McCoy, RN, MS
Director of Nursing

PHASE II

In 2006, the Board of Health entered into contracts with fourteen political subdivisions to conduct activities under the illicit discharge detection and elimination (IDDE) portion of the OEPA mandated Phase II Stormwater Program. However, as local budgets have been increasingly strained, two participants recently decided to discontinue their contracts, which lead the Board of Health to pass a resolution finding the program no longer financially feasible to administer. However, during this process the Phase II Objectives were reevaluated, to determine new ways of meeting the program requirements, while helping the regulated communities save money. During the evaluation, it was realized that most of the new items required by the OEPA had been created, including: the home sewage treatment system list and map, outfall maps, sewage problem priority map, illicit discharge ordinances, and stormwater plans. Now, the program is being maintained, which requires less resources.

Environmental Health Staff proposed that some illicit discharges, especially sewage, could still be handled by the Health Department and updates supplied to the mandated municipalities to include in their OEPA reports. This will be further enhanced by the recent development and adoption of new operation and maintenance requirements. Meanwhile, political subdivisions will have to complete some of the objectives themselves. Below is a chart illustrating what has been done and how we propose that the phase II program can be continued into the future.



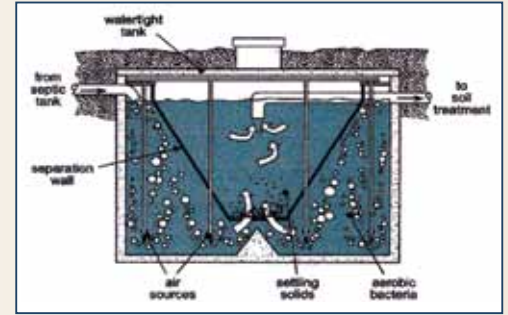
OPERATION & MAINTENANCE OF AEROBIC TREATMENT UNITS

In January 2012, the Stark County Health Department updated regulations regarding home septic systems that utilize aerobic treatment units. Aerobic treatment units use oxygen to effectively treat the waste in a household septic system. These units are highly mechanical and require regular maintenance to function properly. Without proper maintenance these systems may fail, releasing untreated waste which can spread disease.

This new regulation also comes after Ohio EPA studies have shown that untreated sewage has significantly impaired Stark County's rivers and creeks, due in part to poorly maintained aerobic treatment units. To correct this problem, all homeowners under our jurisdiction, with aerobic treatment units, are now required to have a service contract with a registered service provider. A contract must be maintained for the life of the system. Service providers will inspect and maintain the system, which will ensure its effectiveness.

To administer this program, the health department will work alongside our registered service providers. The health department will provide homeowner education, information data basing, monitoring of service inspections, and enforcement. The service providers will contract directly with homeowners to service their units. It is our goal that with the implementation of this program we will help to prevent disease transmission from improperly treated sewage and improve our surface water quality, ensuring the safety of Stark County residents.

Homeowners needing more information, including a list of registered service providers, please visit www.starkhealth.org/sewage.htm or call the health department at 330-493-9904.



THE YEAR IN REVIEW FOR EXIT C&D LANDFILL

During 2011, the Stark County Health Department continued to monitor the former Exit C&D Landfill property. The 132 acre Osnaburg Township property contains a 22 acre construction and demolition debris landfill. Although the facility has been capped and closed, several environmental concerns have been closely monitored by the Health Department's Solid Waste Unit.

Since the property's title had been forfeited, a "responsible party" did not exist. As a result, the State of Ohio holds the title. In order to prevent the site from deteriorating further, the Health Department entered into a grant with the Ohio Environmental Protection Agency to pump and remove leachate that has accumulated in the former landfill cell. Under the grant 2,257,315 gallons of leachate were removed from the facility in 2011. JMW Trucking transported the leachate to the Alliance Waste Water Treatment Plant where it was treated and disposed.

In addition to the leachate monitoring, the Solid Waste Unit has been monitoring temperature probes that were installed at the northwest portion of the landfill. The probes were installed to record subsurface temperatures in an area where rapid settlement of the waste had occurred. The temperatures are recorded weekly and do not show any signs of an increase.

Finally, the former owner contracted with a tree service to clear-cut the remaining property. Approximately 30 acres were completely disturbed by this activity. Due to the severity of the clearing, the

Ohio Attorney General's office has been contacted and is involved with implementing legal ramifications.

On December 28, 2011, the former Exit C&D Landfill property was offered for sale at the Stark County Auditor's auction. The property was offered at \$310,579.29 which is the amount that is owed for back-taxes and liens. Nobody bid on the property.

STARK COUNTY HEALTH DEPARTMENT PROPERTY TRANSFER PROGRAM

After the statewide Household Sewage Treatment Systems (HSTS) Regulations were rescinded in 2007, each health district was left to once again make their "own" regulations. Due to this, Stark County Combined General Health District Sewage Treatment System Regulations, Resolution #2-2007, was born. Rule Number 29-16.1(F), of the resolution states: "Effective January 1, 2008, prior to a property transfer, a property served by a Sewage Treatment System within the Health District shall be inspected by the Board of Health or a registered service provider..." Prior to becoming effective, the department worked closely with realtors, title agencies and service providers to initiate the Property Transfer Program, which is now going into its fifth year. Since that time, a total of 2,386 septic systems have been inspected.

The Property Transfer Program has evolved since its beginning. New fees have been established to help offset the costs of running this expanding program. A certificate of review is now issued for each inspection submitted. This form provides, in detail, critical information and education for the buyer, seller and realtor. The department website now contains instructive materials regarding operation and maintenance of specific types of sewage treatment systems for homeowners and buyers. Recently, educational videos, which were posted on YouTube, were produced by the department to illustrate how the inspection is conducted. Finally, a new database was created to track inspections conducted and required follow-up. The flow of information from these inspections is also shared with our new operation and maintenance program. The following information provides a snapshot of activity in the program.

Property Transfer Inspections Conducted			
2008	2009	2010	2011
593	739	471	583

2011 Statistics		
Total Problems Found	456	78%
System Failures	101	17%

2011 Inspections Breakdown			
Township	Total Inspections	Failures	Percent Failed
Bethlehem	21	4	19%
Canton	40	4	10%
Jackson	47	5	11%
Lake	89	8	9%
Lawrence	49	3	6%
Lexington	23	7	30%
Marlboro	15	1	7%
Nimishillen	61	11	18%
Osnaburg	29	7	24%
Paris	25	6	24%
Perry	23	1	4%
Pike	14	3	21%
Plain	58	9	15%
Sandy	8	5	62%
Sugarcreek	13	5	38%
Tuscarawas	32	5	16%
Washington	36	17	47%



Above: Red tracing dye found discharging into a creek from a septic system. 21,800 gallons of improperly treated sewage per day will be removed from the streams and ditches in Stark County upon correction of the failing systems found in 2011 alone.

Medicare Administrative Claiming (MAC) Program

Beginning in July of 2011 the Nursing Division began participating in the Medicaid Administrative Claiming (MAC) program. Through MAC a local public health department can be reimbursed, in part for their efforts that assist low income residents in enrolling in Medicaid and accessing appropriate Medicaid covered services. Currently there are 60 health departments in Ohio implementing the MAC program.

Public health agencies and the Medicaid Program share a focus on improving access to health care for low income Stark County residents. Also a lack of health insurance, limited availability of providers, limited transportation, language barriers and a complex health care system pose challenges to many of our residents. MAC reimburses health departments for doing many things that are traditionally not funded by other sources such as:

- Medicaid Outreach –informing an individual or group about benefits of Medicaid
- Facilitating Medicaid – eligibility determination – assisting individuals in applying for Medicaid via the Combined Programs Application (CPA)
- Referral coordination and monitoring – helping people find a doctor, schedule an appointment, follow-up to ensure care is received
- Arranging transportation or translation
- Program planning, development and interagency coordination – working with other agencies to improve access to care and closing the gap in services
- Medicaid provider relations – recruiting new providers and maintaining directories of providers

The reimbursement the Health Department receives for participating in this program is based off of a quarterly time study. Eighteen Nursing Division staff members completed a week long time study for the quarters ending in July and December. All time study information is entered into a web-based system; after being reviewed by a Nursing Unit Manager and certified by our Accountant the claim is forwarded to Ohio Department of Health for reimbursement. The first claim submitted for reimbursement will result in a payment of approximately \$11,000.00 into the Health Department budget.

Reportable Infectious Disease Summary

Stark County Health Department Jurisdiction

DISEASE	2011	2010	DISEASE	2011	2010
Campylobacteriosis	26	30	Legionellosis	5	7
Chlamydia	458	384	Listeriosis	2	0
Creutzfeldt-Jakob Disease	2	0	Lyme Disease	9	4
Cryptosporidiosis	13	17	Malaria	1	2
Dengue	2	1	Meningitis – Aseptic/Viral	23	16
E. Coli 0157:H7	1	3	Meningitis – Bacterial (Not N. Meningitidis)	1	1
E. Coli (unknown serotype)	2	2	Meningococcal Disease	1	0
Giardiasis	45	47	Mycobacterium Other Than TB	17	20
Gonorrhea	132	117	Pertussis	10	34
Haemophilus Influenza Bacteremia	5	6	Rocky Mountain Spotted Fever (RMSF)	1	1
Hepatitis A - Acute	1	0	Salmonellosis	25	28
Hepatitis B – Acute	2	1	Shigellosis	1	4
Hepatitis B – Chronic	12	17	Streptococcal – Group A invasive	17	9
Hepatitis C - Acute	1	2	Streptococcal – Group B Newborn	1	1
Hepatitis C - Chronic	143	112	Streptococcal Toxic Shock Syndrome (STSS)	1	0
Influenza-associated Hospitalization	90	4	Streptococcal – Invasive Pneumoniae	34	27
LaCrosse Virus Disease	1	2	Tuberculosis	0	4
			Varicella	22	47

**This report includes confirmed, probable, and suspect cases reported 01/01/2011 – 12/31/2011.*

COMMUNICABLE DISEASE HIGHLIGHTS, 2011

Communicable diseases (also known as infectious diseases) are caused by microorganisms, such as bacteria and viruses. A person can contract a communicable disease from an infected person, an infected animal, and/or another infected source such as water or food. Stark County Health Department communicable disease staff keeps track of the number of persons infected by different communicable diseases throughout the year. They also conduct follow-up investigations on all reported diseases by collecting demographic and clinical information, as well as exposures to potential sources of disease. By collecting this data, we are able to determine potential sources of disease, quickly implement control measures, detect trends and outbreaks, and create targeted policies and programs to protect or improve the health of the community.

This annual summary represents the 2011 communicable disease data required by Ohio law to be reported to state and local health departments. Only selected communicable diseases determined to be of public health importance are reportable therefore this summary does not reflect all communicable disease in our community. Additionally, the summary represents only confirmed cases of disease for residents of Stark County Health Department jurisdiction therefore does not include disease data for the cities of Alliance, Canton, or Massillon. *For information on Alliance, Canton, or Massillon residents, contact the respective health department.

- 1) In 2011 there were no reportable infectious disease outbreaks.
- 2) Varicella (8.9 cases per 100,000 persons) and Pertussis (4 cases per 100,000 persons) cases were both down more than 50% from 2010.
- 3) Lyme disease increased more than 50% from the previous year (3.6 cases per 100,000 persons). Several counties within Ohio and close to Stark County have seen similar occurrences, an indication this may be a long-term, ongoing pattern of increased cases. State officials believe the spike is due to the adult black-legged ticks, which actively bite year round, a different behavior from the more common dog ticks which are not active during the winter. Black-legged ticks are much smaller and blacker in color as compared to the dog tick. Lyme disease continues to be the most common vector borne illness in the US.
- 4) Spring of 2011 showed a marked increase in influenza-associated hospitalizations. Of the 90 known cases, 88 of them are from the 2010-2011 flu season. Regarding the 2011-2012 flu season (Fall 2011); there was a marked decrease of cases reflecting the overall low to moderate national average during this time.
- 5) There was a reported case of Malaria which was confirmed by testing received from the CDC. This individual did have previous travel to Ghana, Africa and did not follow the medication requirements for prevention of Malaria. Malaria is a mosquito-borne disease caused by a blood parasite called Plasmodium. About 1,500 cases of malaria are diagnosed in the United States every year, most occurring in travelers and immigrants returning from malaria-risk areas of the world. Almost all of the 25 to 35 cases reported annually in Ohio are acquired in foreign countries.
- 6) There was a reported case of Dengue Fever diagnosed in a person who had traveled to India. Dengue fever is transmitted through the bite of an infected mosquito. No transmission occurs directly from person to person. Although there are two types of mosquitoes found in some Ohio counties that are capable of transmitting dengue fever, the virus is not endemic in the state. A few (two to three) human cases are reported in Ohio each year, but most have a history of travel to infected areas.

**The approximate population of the Stark County Health Jurisdiction is 248,108 (U.S. Census Bureau: State and County Quick Facts).*

STARK COUNTY HEALTH DEPARTMENT PARTNERS WITH THE UNIVERSITY OF MOUNT UNION

The Stark County Health Department has collaborated with the University of Mount Union's public health undergraduate program. Health educators have been asked to teach courses in the program for the Fall and Spring semesters. The core public health classes include introduction to public health, program planning & evaluation and community health. Students are able to learn first hand how the core functions of public health are carried out on a daily basis, especially at the local level. In addition, the SCHD provides guest speakers to discuss specific programs of the department.

Service learning is also an integral part of the curriculum requiring students to volunteer a designated number of hours at community health agencies or events. Last year, students wrote a grant to obtain funding for *Safe Kids Stark County* to address high rates of falls among children. As a result, baby gates were purchased and continue to be distributed in the zip codes showing higher risks. One student participated in the community health prioritization assessment seminar in November.

The SCHD benefits from student input and participation while the students benefit from participating in hands on public health activities. This exposure to the public health setting may interest students in working at local health departments.

Financial Statement Fiscal Year 2011 (unaudited)

SOURCES OF REVENUE

Contract Fees	493,367
Fees for Services	439,705
C&D User Fees	506,659
Inspection Fees	102,460
Vital Statistics	201,881
Permits	1,075,447
Fines/Late Charges	16,513
State Subsidy	43,472
Local Tax Subdivisions	1,466,720
Public Health Infrastructure	172,382
CFHS State Grant	370,576
Immunization Grant	38,701
WIC Grant	457,523
Dental Grant	80,000
Austin Bailey Grant	15,000
SIDS Funding	2,500
Women's Health Initiative	47,638
Injury Prevention Grant	58,662
Exit C&D Funding From EPA	100,000
Citizen's Corps Funding	9,685
Sisters of Charity Funding	40,382
NACCHO Funding	5,000
Area Health Education Grant	29,458
Other Receipts	109,799
Reimbursements	380
Carryover from 2010	341,353

TOTAL SOURCES OF REVENUE 6,225,263

EXPENDITURES

Salaries	3,172,288
Insurance	506,948
Medicare	44,609
PERS	571,027
Workers Compensation	55,512
Supplies	163,734
Utilities	24,989
Contracts & Purchased Services	405,948
Phones & Communications	38,884
Equipment / Vehicle Rental	19,833
Rent	288,081
Equipment	2,308
Other Expenses	1,020
State Remittances	641,968
Travel	85,625
Refunds	3,516
Encumbrances Carried Over To 2012	200,852

TOTAL EXPENDITURES 6,227,142

STARK COUNTY BOARD OF HEALTH



STARK COUNTY HEALTH DEPARTMENT

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ROW 1: Philip Francis-President, Terrence Seeberger-Vice President, P.S. Murthy, M.D., James Recchio

ROW 2: Connie Holmes, Karen Hiltbrand, Cary Feller, Michael Lancaster

