

**Mahoning County General Health District
Application for State Subsidy Allocation
for State Fiscal Year 2007**

Submitted: 12/21/2006

Description: MCHD07

LHD Type: County

LHD Address: 50 Westchester Drive

Population: 161,650

Youngstown, Ohio 44515

County: Mahoning

County Type: Metropolitan

Section I: Staffing

<u>Classification</u>	<u>Name</u>	<u>EMail</u>
Board Member	Somers, Donald	
Board Member	Heher, Michael	
Board Member	Baird, Margot	
Board Member	Perry, Leonard	
Board President	Dewar, Stephanie	
Environmental Health Director	Setty, Richard	rsetty@mahoning-health.org
Fiscal Officer	Janik, Ed	ejanik@mahoning-health.org
Health Commissioner	Stefanak, Matthew	mstefanak@mahoning-health.org
Medical Director	Frisch, Larry	lfrisch@mahoning-health.org
Nursing Director	Colaianni, Diana	dcolaianni@mahoning-health.org

Staff Count

<u>Classification Title</u>	<u>Full Time Employees</u>	<u>Part Time Employees</u>	<u>Full Time Contractors</u>	<u>Part Time Contractors</u>
Accounts/Payroll Clerk	3.00	1.00	0.00	0.00
Clinical Supervisor	1.00	0.00	0.00	0.00
Computer Administrator	1.00	0.00	0.00	1.00
Director of Health Education	1.00	0.00	0.00	0.00
Emergency Preparedness/Bioterrorism	1.00	0.00	0.00	0.00
Environmental Health Director	1.00	0.00	0.00	0.00
Fiscal Officer	1.00	0.00	0.00	0.00
Health Commissioner	1.00	0.00	0.00	0.00
Health Educator (I, II, etc.)	3.00	0.00	0.00	0.00
Medical Director	0.00	0.00	0.00	1.00
Nursing Director	1.00	0.00	0.00	0.00
Other	7.00	0.00	0.00	0.00
Physician	0.00	0.00	0.00	1.00
Plumbing Inspector (I, II, etc.)	2.00	1.00	0.00	0.00
Public Health RN (I, II, etc.)	5.00	6.00	0.00	0.00
Registered Sanitarian (I, II, etc.)	12.00	1.00	0.00	0.00
Registered Sanitarian (Supervisory)	2.00	0.00	0.00	0.00
Sanitarian in Training (SIT)	3.00	0.00	0.00	0.00
Secretary/Clerk (I, II, etc.)	7.00	1.00	0.00	0.00
Senior Billing Clerk	0.00	1.00	0.00	0.00

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Section II: Certification of Compliance with Minimum and Optimal Standards

3701-36-04 (Ready for Review)

What we have done

Standard

Comments or Justification

3701-36-04-01

A. A system for making reports is available on a 24/7 basis and phone numbers are available for reporting public health emergencies.

maintain disease reporting warm line

B. Written protocols are maintained for receiving and reporting results of notifiable conditions, including electronic transmissions.

written protocols updated; all RNs trained in ODRS

C. Maintain regular communication between the health department and its emergency partners.

conducted JIC exercises with county EMA and other responders

D. Health care providers and labs know which diseases require reporting. They have time frames, and have a 24-hour local contact number. There is a process for identifying new providers in the community and engaging them in the reporting process.

communicable disease annual report and reporting requirements broadcast-faxed to all providers

E. A computerized Communicable Disease tracking system enables documentation of the initial report, investigation, findings, and subsequent reporting to the Ohio Department of Health and Centers for Disease Control and Prevention.

manage communicable disease reports and investigations with the Ohio Disease Reporting Systems (ODRS)

F. Key indicators for communicable disease are a component of the Board of Health report, and are tracked and trended over time.

RODS, P&I, C. difficile tracked

3701-36-04-02

A. The local department of Health is available for emergencies including possible disease outbreaks or other type of health threat on a 24/7 basis using night and weekend answering machine messages. These messages direct the caller what to do in the case of an emergency. Contacts are available to the Ohio Department of Health and appropriate local agencies within one (1) hour of contact (i.e. schools, public safety).

consolidated disease reporting warmline for all health districts in Mahoning county

C. Telephone numbers, addresses, and/or information for other communication channels (i.e. e-mail or pagers) for weekday and after-hours emergency contacts are available to local staff and to the Ohio Department of Health.

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3701-36-04 (Ready for Review)

E. Assure that knowledge and skill gaps identified through emergency response planning, drills, and evaluation are addressed. school nurses trained in preparedness

G. Response plans coordinated with county emergency response plan. public health appendix to county EMA plan updated

H. Disseminate research findings to public health colleagues.

L. Staff participates in continuing education to maintain up-to-date knowledge in areas relevant to emergency response. NIMS staff training conducted

3701-36-04-03

A. Investigations of diseases of major public health concern (Class A1) begin immediately upon report. All other infectious disease investigations begin on a disease-specific basis in accordance with the most current Ohio Department of Health Infectious Disease Control Manual. Communicable disease staff performs their work in compliance with protocols and with the Ohio Revised Code and Ohio Administrative Code as demonstrated in case write-ups. A procedure for securing emergency biologics & treatments is documented. written protocols in place for disease investigation and emergency treatment

C. Disease-specific investigation and intervention protocols are ready and understood by staff. see A above

F. Annual evaluation of a sample of communicable disease investigations is done to monitor timeliness and compliance with disease-specific protocols, with a written summary of findings and recommendations. tracked response times to disease reports for all 3 health districts

G. Recognize deviations from the normal that might indicate an emergency and describe appropriate action (i.e. communicate clearly within the chain of command). responded to RODS alerts

3701-36-04-04

A. Addresses, telephone lists, e-mail/web-site addresses for media, health providers, and other frequent contacts are readily available and updated annually. This list is in the communicable disease manual and at other appropriate departmental locations. Communication with other response partners is coordinated in emergency response. blast fax contract with Little Blue Book to reach all community providers; Health Alert Network (HAN) messages sent to email distribution list; list of media contacts maintained and updated by Public Information Officer (PIO)

C. Information is provided through public health alerts to key stakeholders and press releases to the media. see A above

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3701-36-04 (Ready for Review)

E. Staff having lead roles in communicating urgent messages have been trained in risk communication. all PIOs trained

3701-36-04-05

A. Carry out staff debriefing after every significant disease outbreak activity. All outbreak and practice outbreak exercise debriefings are summarized in a yearly report. This report documents issues identified in the debriefings, which may lead to new or revised protocols and/or goals and objectives for future outbreak responses. These findings and recommendations are reported and incorporated into the Quality Improvement Plan and used by the Board of Health to develop policy. identified corrective actions

C. Issues identified in outbreak debriefing may lead to new key indicators. joint mass flu clinic after-action report identified corrective actions

H. Allow staff to apply creative problem solving and flexible thinking to unusual challenges within his/her functional responsibilities and evaluate effectiveness of all actions taken. ethics committee discussion of flu vaccine restrictions

How we plan to improve

Standard

Comments or Justification

3701-36-04-01

A. A system for making reports is available on a 24/7 basis and phone numbers are available for reporting public health emergencies. disease reporting warmline tested periodically

B. Written protocols are maintained for receiving and reporting results of notifiable conditions, including electronic transmissions. exercise foodborne disease outbreak protocols

C. Maintain regular communication between the health department and its emergency partners. pan flu readiness plan will contain communications component

D. Health care providers and labs know which diseases require reporting. They have time frames, and have a 24-hour local contact number. There is a process for identifying new providers in the community and engaging them in the reporting process. provide reporting requirements to new medical residents in July

E. A computerized Communicable Disease tracking system enables documentation of the initial report, investigation, findings, and subsequent reporting to the Ohio Department of Health and Centers for Disease Control and Prevention. train staff on ODRS upgrades

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3701-36-04 (Ready for Review)

3701-36-04-02

B. Written policies and procedures delineate specific roles and responsibilities for local response to disease outbreaks or public health threats. Steps are specific to roles (i.e. communicable disease investigation, environmental health investigation, health officer). Variations from overall process are identified in disease specific protocols. There is a formal description of the roles and relationship between communicable disease and environmental health.

exercise foodborne disease outbreak protocol

C. Telephone numbers, addresses, and/or information for other communication channels (i.e. e-mail or pagers) for weekday and after-hours emergency contacts are available to local staff and to the Ohio Department of Health.

exercise emergency recall system for all three health districts in Mahoning county

G. Response plans coordinated with county emergency response plan.

work with EMA to create SNS plan; joint flu clinic with Trumbull county; multi-county tabletop exercise

3701-36-04-03

C. Disease-specific investigation and intervention protocols are ready and understood by staff.

exercise foodborne disease outbreak protocol

E. Assure that the health district has a written, regularly updated plan for major categories of emergencies that respects the culture of the community.

render more public health information into Spanish and other locally prevalent languages

3701-36-04-04

A. Addresses, telephone lists, e-mail/web-site addresses for media, health providers, and other frequent contacts are readily available and updated annually. This list is in the communicable disease manual and at other appropriate departmental locations. Communication with other response partners is coordinated in emergency response.

seek alternatives to WebMD blast fax network; expand contact lists to include zone contacts

3701-36-04-05

D. Evaluate every emergency response drill (or actual response) to identify needed internal and external improvements.

foodborne disease outbreak exercise will be evaluated

3701-36-05 (Ready for Review)

What we have done

Standard

Comments or Justification

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3701-36-05 (Ready for Review)

3701-36-05-01

A. Goals and objectives are established for assessment activities as part of local health department planning and staff and/or outside assistance is identified to perform the work. Establish strategies to address community health needs. Conduct a strategic planning process. Evaluate population-based health services every 3 years. Identify community components that contribute to the delivery of the essential public health services.

PACE workgroup activities

B. Current information on health issues that affect the community is tracked (includes communicable disease, environmental health, and health status data). Data being tracked have standard definitions and use standardized and consistent qualitative and/or quantitative measures. Computer hardware and software are available and support word processing, spread sheets with basic analysis capabilities, databases, and e-mail internet access.

ODRS and annual communicable disease report; Behavioral Risk Factor Surveillance Surveys (BRFSS); STELLAR (lead poisoning cases); schoolchild BMI; child death review; MATCH (CFHS); spatial analysis software; RODS

F. Staff performing assessment activities has documented training and experience in epidemiology, research, and data analysis. Attendance at training and peer exchange opportunities to expand available assessment expertise is documented.

staff have or are pursuing graduate training in public health

3701-36-05-02

C. Assessment data is provided to community groups and representatives of the provider agency. This data is for community review and for the identification of emerging issues which may require investigation.

provide lead poisoning information to stakeholders

F. Staff development in critical areas of environmental health threats and community health status will be tracked.

Health Assessment Unit develops annual curriculum for staff meetings for RS credit

3701-36-05-03

D. The local health department will use the community health improvement cycle self-assessment (CHIC) tool (or other alternate tool) to determine readiness of the local health department for the CHA process.

support Healthy Valley Alliance and the PACE EH workgroup

E. Program performance measures are monitored, the data is analyzed, and regular reports document the progress towards goals.

nuisance complaint response times and abatement rates tracked and reported

F. Appropriate health department staff is trained in quality improvement methods.

2 QStP teams completed work

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3701-36-05 (Ready for Review)

G. Clinical services provided directly by the local health department or by contract have a developed quality improvement plan which includes specific quality-based performance or outcome measures.

conducted chart audits of clinics and voucher care providers

How we plan to improve

Standard

Comments or Justification

3701-36-05-01

A. Goals and objectives are established for assessment activities as part of local health department planning and staff and/or outside assistance is identified to perform the work. Establish strategies to address community health needs. Conduct a strategic planning process. Evaluate population-based health services every 3 years. Identify community components that contribute to the delivery of the essential public health services.

develop a strategic plan for Healthy Homes

C. Local health district will be responsible to promote information regarding the upcoming or in-progress assessment activities.

implement PACE EH Commission recommendations

3701-36-05-02

C. Assessment data is provided to community groups and representatives of the provider agency. This data is for community review and for the identification of emerging issues which may require investigation.

provide lead poisoning information to stakeholders

E. An essential set of health status indicators (i.e. Healthy People 2010), which may include selected local indicators, is used as the baseline to monitor health status in the community. A surveillance system (computer, pen and paper) is used to analyze data to signal changes in priority health issues.

publish 2005 BRFSS report; finish BMI survey in Springfield schools

3701-36-05-03

B. Programs (directly or contracted) have written goals, objectives, and performance measures, and are based on relevant research.

publish annual performance improvement goals

E. Program performance measures are monitored, the data is analyzed, and regular reports document the progress towards goals.

publish annual performance improvement goals

F. Appropriate health department staff is trained in quality improvement methods.

train staff in business process analysis through Robert Wood Johnson grant

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3701-36-05 (Ready for Review)

G. Clinical services provided directly by the local health department or by contract have a developed quality improvement plan which includes specific quality-based performance or outcome measures. conduct chart audits of CFHS providers

3701-36-06 (Ready for Review)

What we have done

Standard

Comments or Justification

3701-36-06-01

C. There are documented processes for involving community members and stakeholders in addressing environmental health issues, including education and the provision of technical assistance. wastewater advisory committee met twice

3701-36-06-02

A. A surveillance system is in place to record and report essential indicators for environmental health risks and related illnesses. Results are included in the Board of Health report, and are tracked and trended over time. A system is in place to assure that data is shared routinely with local, state, and regional agencies. foodborne illness report tracking and response protocol updated

3701-36-06-03

A. The local Department of Health is available for emergencies including possible disease outbreaks or other type of health threat on a 24/7 basis using night and weekend answering machine messages. These messages direct the caller what to do in the case of an emergency. Contacts are available to the Ohio Department of Health and appropriate local agencies within one (1) hour of contact (i.e. schools, public safety). after hours warm line consolidated with other health districts in Mahoning county

F. The agency has a written, regularly updated plan for major categories of emergencies that respects the culture of the community. vaccine information statements are made available in multiple languages

3701-36-06-04

A. Policy and Procedure manuals are available for all mandated environmental health activities. policy manual for sewage program

B. Written policies, local ordinances, and state rules and codes are accessible to the public. state and local public health regulations are available on agency website

C. Fees and rules are applied as inserted in ORC/OAC. cost analyses and fee changes for sewage, food

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3701-36-06 (Ready for Review)

D. Compliance procedures are written for all areas of environmental health activity. The procedures specify the documentation requirements associated with enforcement action. enforcement action protocol for prosecution of nuisance complaints

J. Identify public health issues that can only be addressed through laws. Review public health laws and regulations at least once every 5 years. Provide input to legislative, regulatory, or advisory groups for drafting proposed legislation, regulation, or ordinances. provided input to Ohio EPA on proposed C&D rules

3701-36-06-05

B. Promote community awareness regarding disaster preparedness by implementing a public information program. convened pan flu readiness summit for community stakeholders

C. Environmental health educational programs exist or are in development. The local health department may also promote the development of such programs by other agencies. school inspection program presented to local health districts' staff

How we plan to improve

Standard

Comments or Justification

3701-36-06-01

A. A plan for continuing education (for recertification or re-licensure) will be maintained to ensure staff will be updated on changes in practice. meetings will provide RS credits

B. Information is provided to the public about the availability of environmental health educational programs through contact information on brochures, flyers, newsletters, websites, or other mechanisms. collaborate with Ohio EPA to educate property sellers/buyers about environmental issues

C. There are documented processes for involving community members and stakeholders in addressing environmental health issues, including education and the provision of technical assistance. advisory committees for wastewater, rabies, tattoo establishments will meet

3701-36-06-02

A. A surveillance system is in place to record and report essential indicators for environmental health risks and related illnesses. Results are included in the Board of Health report, and are tracked and trended over time. A system is in place to assure that data is shared routinely with local, state, and regional agencies. increase groundwater surveillance sampling points

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3701-36-06 (Ready for Review)

3701-36-06-03

D. In cases of emergency response to environmental health or natural disasters, appropriate stakeholders (other public agencies and local providers) are convened for debriefing. This debriefing is documented with a written summary of findings and recommendations.

publish after action report on county level disaster exercise summer 2007

3701-36-06-04

C. Fees and rules are applied as inserted in ORC/OAC.

adopt fees for new sewage rules

J. Identify public health issues that can only be addressed through laws. Review public health laws and regulations at least once every 5 years. Provide input to legislative, regulatory, or advisory groups for drafting proposed legislation, regulation, or ordinances.

review Ohio EPA rules for beneficial use of waste

3701-36-06-05

B. Promote community awareness regarding disaster preparedness by implementing a public information program.

follow-up with stakeholders for pan flu readiness

C. Environmental health educational programs exist or are in development. The local health department may also promote the development of such programs by other agencies.

offer radon awareness contractors and realtors; Healthy Homes training for nurses and RS's

3701-36-07 (Ready for Review)

What we have done

Standard

Comments or Justification

3701-36-07-01

B. Prevention priorities are selected with involvement from the Board of Health, community groups, and other organizations interested in the public's health.

PACE EH priorities are pursued by agency

3701-36-07-02

A. The local health department provides leadership in involving the community members in considering assessment information to set prevention priorities. A broad range of community partners takes part in the planning and implementation of prevention efforts. Identify and maintain a listing of key community constituents.

participated in the United Way's roadmap for success and used results in CFHS proposal

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3701-36-07 (Ready for Review)

C. Community mobilization activities address selected prevention priorities via implementation plans that describe the goals and objectives as well as performance measures.	worked with Family 1st Council and faith-based alliance to advocate for child lead poisoning elimination
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E. Staff is trained in community mobilization methods as evidenced by training documentation.	Family 1st and agency staff participated in NACCHO/RWJ Foundation Project Connect
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3701-36-07-03

M. Technical assistance and training in health promotion activities are provided to community organizations as required.	PLANET training and Tobacco Free Schools Toolkits provided to health care providers; worked with meth task force to develop protocols
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How we plan to improve

Standard

Comments or Justification

3701-36-07-01

B. Prevention priorities are selected with involvement from the Board of Health, community groups, and other organizations interested in the public's health.	offer radon testing during radon awareness month
E. Recommendations from the evaluation of prevention priorities and strategies are incorporated into the Quality Improvement Plan.	continue development of plan to prevent sleep-related deaths

3701-36-07-02

A. The local health department provides leadership in involving the community members in considering assessment information to set prevention priorities. A broad range of community partners takes part in the planning and implementation of prevention efforts. Identify and maintain a listing of key community constituents.	work with community partners to reduce disparities in utilization of Help Me Grow
C. Community mobilization activities address selected prevention priorities via implementation plans that describe the goals and objectives as well as performance measures.	collaborate with realtors and contractors to improve radon awareness

3701-36-07-03

A. The local Board of Health will have policies that pertain to services provided or planned by the local health department.	notify all septic owners subject to O&M requirements
M. Technical assistance and training in health promotion activities are provided to community organizations as required.	educational sessions for proprietors of public places subject to Issue 5

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3701-36-08 (Ready for Review)

What we have done

Standard

Comments or Justification

3701-36-08-01

C. The strategic plan and/or a collaborative community health assessment are utilized to identify critical personal health needs and the stakeholders responsible for assuring their delivery.

participated in United Way Community Impact Teams that developed Roadmap for Success and used roadmap for CFHS RFP

3701-36-08-02

A. A resource list of providers of critical health services is used by local health department staff and contractors for client referrals.

Help Hotline directory subscriber

3701-36-08-03

C. Information is provided to community groups, stakeholders, and healthcare providers on access to services.

results of child immunization coverage surveys disseminated to community

D. Periodic surveys are conducted regarding the availability of critical health services and barriers to access. These surveys are reported and incorporated into the gap analysis. Develop criteria and evaluate access, quality, and effectiveness of personal health services in the community every 3 years.

conducted county-level BRFSS in 2005

F. Data on access trends is used to develop health policy.

used child death review results to lobby for changes to Ohio's driver licensing laws

3701-36-08-04

A. Community groups, stakeholders, and health care providers are convened to address access to primary health care services, set goals, and take action based on information about local resources and trends. This process may be led by the local health department, or it may be part of a separate community process sponsored by multiple partners, including the local health department.

developed a child immunization plan to achieve universal coverage by 2010

How we plan to improve

Standard

Comments or Justification

3701-36-08-01

C. The strategic plan and/or a collaborative community health assessment are utilized to identify critical personal health needs and the stakeholders responsible for assuring their delivery.

increase lead screening in accordance with community Action Plan to Eliminate Lead Poisoning

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3701-36-08 (Ready for Review)

3701-36-08-02

A. A resource list of providers of critical health services is used by local health department staff and contractors for client referrals.

participate in 211 on-line directory development

D. A list of primary health care services is used with the key indicator data to select elements in which detailed documentation of local capacity is needed. The local public health system, when possible, assures the provision of needed personal health services, and provides outreach and linkages for available services within the county.

reduce disparities in Help Me Grow utilization

3701-36-08-03

F. Data on access trends is used to develop health policy.

request IMPACT SIIS data on immunization timeliness; review AFIX assessment of agency immunization practices

3701-36-08-04

G. Information is provided to community groups, stakeholders, and healthcare providers on access to health department services.

use the annual report as a marketing tool for the agency

3701-36-09 (Ready for Review)

What we have done

Standard

Comments or Justification

3701-36-09-01

E. The local public health department encourages community participation in the development or implementation of research.

ethics committee with community and academic members created to guide practice

3701-36-09-02

B. Local public health management provides for and encourages staff participation in orientation, continuing education, and training programs (including evaluation and assessment). They assist staff in the development of leadership skills (priority setting and decision making) and core public health competencies.

NIMS training incorporated in new employee orientation curriculum; staff were nominated and accepted into NEOUCOM leadership development program

C. Personnel records hold evidence of current licensure and qualifications, written employee evaluations, an orientation checklist, and a log of in-service and continuing education.

tracked by personnel officer

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3701-36-09 (Ready for Review)

3701-36-09-03

A. Policies and procedures describe the process used to develop recommendations for board action in the development of health policy issues. Legal counsel of the board of the health jurisdiction shall review laws, regulations, and ordinances, and provide legal services to support local health department operations.

legal counsel reviews proposed changes to health district regulations

B. Monitored data and recommendations are evaluated at least annually for incorporation into revisions of goals and objectives.

monitored sewage system effluent quality to identify best system designs and set goals for increasing installations of these designs

3701-36-09-04

A. Written policies and procedures regarding confidentiality describe the methods for assuring protection of data (passwords, firewalls, and backup systems). Additionally, these policies and procedures describe the methods governing the use and sharing of data within the local health department and with partner agencies.

incorporated reciprocal agreements with contractors into service agreements

C. Community members and stakeholders have assured compliance with confidentiality policies and practices as appropriate.

3701-36-09-05

G. The local health department provides staff access to researchers for research in epidemiology, health policy, health service, or health economics.

maintained academic affiliations with NEOUCOM, Kent, YSU

H. Maintain regular communication between the health department and its emergency response partners.

readiness coordinators collaborate with county EMA and other health districts to sponsor MRC

J. Findings and recommendations at the policy level are included in Board of Health reports. Describe the chain of command and management system (incident command system or similar protocol) for emergency response in the jurisdiction. Medical Director is involved in the development of the command system and has a designated role during outbreaks and/or disasters.

Medical Director served as incident commander for joint flu clinic

How we plan to improve

Standard

Comments or Justification

3701-36-09-01

D. Information is provided to the community on public health programs and their effectiveness.

provide regional lead awareness training to health care providers and local health districts

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3701-36-09 (Ready for Review)

3701-36-09-02

B. Local public health management provides for and encourages staff participation in orientation, continuing education, and training programs (including evaluation and assessment). They assist staff in the development of leadership skills (priority setting and decision making) and core public health competencies.

identify alternatives to epidemiology training curriculum for new employees

3701-36-09-03

A. Policies and procedures describe the process used to develop recommendations for board action in the development of health policy issues. Legal counsel of the board of the health jurisdiction shall review laws, regulations, and ordinances, and provide legal services to support local health department operations.

legal counsel to review new sewage rules

3701-36-09-04

D. Program plans provide for data confidentiality with regard to program activities.

implement ethics committee recommendation on notifying residents about public records laws and environmental testing results

3701-36-09-05

D. Utilizing its purpose and mission and community health data, the Board of Health establishes policies on provided services.

provide a smoke-free campus for staff and clients
