

# BOARD OF HEALTH



**Public Health**  
Prevent. Promote. Protect.

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**Canton City Public Health**

**Monday, March 22, 2021**  
**@ 12:00pm**



**Public Health**  
Prevent. Promote. Protect.

Canton City Public Health

**Board of Health Meeting**  
Monday, March 22, 2021 @ 12:00pm – Board Room  
**Agenda**

Watch live on our Facebook page at <https://www.facebook.com/cantonhealth/>

1. Call to Order and Roll Call
2. Unfinished Business
3. Approve February 22, 2021 Board of Health Meeting Minutes
4. Approve List of Bills for \$217,361.54
5. Personnel:
  - a. Approve Probationary Period Ending for Victor Babcock, EH Public Health Technician (PT1), Retroactive to March 1, 2021
  - b. Approve Probationary Period Ending for Pamela Kotagides, Contact Monitoring Team Specialist (PT4), Retroactive to March 21, 2021
  - c. Accept Resignation of Kayleen Knight, Public Health Clerk II (R2), Effective March 22, 2021
  - d. Accept Resignation of Kristin Kennedy, Staff Sanitarian II (R5), Effective April 6, 2021
  - e. Approve Staff Sanitarian II (R5) Position Description
  - f. Appointment of Part-Time Seasonal Vector Control Technician (PT13)
  - g. Appointment of Part-Time EH Public Health Technician (PT1)
  - h. Appointment of Part-Time Family Nurse Practitioner (PT10)
6. Approve Recommendations of the Hearing Officer for March 22, 2021
7. Approve Strategic Plan 2021 – 2023, Appendix A – Action Plan
8. Approve Amended Agreement with the Center for Marketing & Opinion Research to Operate COVID-19 Vaccination Clinic Call Center for Pre-registration and Clinic Appointment Management at a rate of \$50.00 an hour for a total amount not to Exceed \$73,000.00 (1,460 hours) Effective January 13, 2021. [This is the third change order for this contract. The Board approved an initial contract of \$8,000 (160 hours) on January 25, 2021. The Board subsequently approved an Additional \$16,000 (320 hours) on February 22, 2021. This change order is for an additional \$49,000 (980 hours).]
9. Approve an Addendum Agreement with Mary Church Terrell Federated Club (Ohio Association of Colored Women’s Club) for a Sister Circles Support and Mentoring Program for African-American Pregnant Women for a Period of January 1, 2020 to December 31, 2020 for an Additional Amount of \$10,000.00 with a New Total of \$17,253.00 (Originally Approved December 17, 2019 for \$7,253.00)
10. Approve GeneXpert Service Agreement with Cepheid for Equipment, Parts and Labor at an Amount Not to Exceed \$6,900.00 for the Period of March 9, 2021 to March 8, 2022 (Originally approved January 27, 2020 for \$19,523.38; \$6,509.46 a year for three years for the Period of 01/01/2020 – 12/31/2022)
11. Approve a Subsidized Employment Program (SEP) Contract with the Stark County Job and Family Services (SCJFS) Effective April 1, 2021 through September 30, 2021 [Employment of Michael Smith, EH Public Health Technician (PT1), as a Part-Time Employee for a Minimum of 30 hours Per Week and Providing a Monthly subsidy Payment to Canton City Public Health in the Amount of \$1,000.00 per month]

**Board of Health Agenda**  
**Monday, March 22, 2021**  
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12. Acceptance of Reports

- a. Nursing/WIC
- b. Laboratory
- c. THRIVE – Kent State University Evaluators Project Presentation
- d. Environmental Health
- e. Vital Statistics
- f. Fiscal
- g. Health Commissioner
- h. Accreditation Team

13. Other Business

14. Next Meeting: Monday, April 26, 2021 at 12:00pm

15. Adjournment

**Board of Health Minutes**

**February 22, 2021**



**Public Health**  
Prevent. Promote. Protect.

Canton City Public Health

**Board of Health Meeting**

Monday, February 22, 2021 @ 12:00 PM – Board Room

**Minutes**

**Call to Order and Roll Call**

Mayor Bernabei called to order the regular meeting of the Board of Health of Canton City Public Health (CCPH) on Monday, February 22, 2021 at 12:04 PM with a quorum present.

A roll call found the following Board members present (all via Microsoft Teams): Dr. Stephen Hickman, Mr. Patrick Wyatt, Dr. Amy Lakritz, Dr. James Johns and Ms. Cleo Lucas.

Staff members present: James Adams, Sean Green, Diane Thompson, Christi Allen and Gus Dria.

**Approve January 25, 2021 Board of Health Meeting Minutes**

Ms. Lucas moved and Mr. Wyatt seconded a motion to approve the January 25, 2021 Board of Health meeting minutes. A roll call to vote was taken:

Dr. Hickman – Yes

Dr. Lakritz – Yes

Mr. Wyatt – Yes

Dr. Johns – Yes

Ms. Lucas – Yes

Motion carried unanimously.

**Approve List of Bills - \$467,081.74**

Dr. Hickman moved and Dr. Lakritz seconded a motion to approve the list of bills totaling \$467,081.74. A roll call to vote was taken:

Dr. Hickman – Yes

Dr. Lakritz – Yes

Mr. Wyatt – Yes

Dr. Johns – Yes

Ms. Lucas – Yes

Motion carried unanimously.

**Approve Personnel:**

**a. Approve Probationary Period Ending for Lillian Boehm, OPHII Public Health Support Specialist (PT1), Retroactive to February 10, 2021.**

Ms. Lucas moved and Mr. Wyatt seconded a motion to approve the probationary period ending for Lillian Boehm, OPHII Public Health Support Specialist (PT1), retroactive to February 10, 2021 with a pay increase of \$0.33 with a new hourly rate of \$14.53. A roll call to vote was taken:

Dr. Hickman – Yes

Dr. Lakritz – Yes

Mr. Wyatt – Yes

Dr. Johns – Yes

Ms. Lucas – Yes

Motion carried unanimously.

**b. Approve Probationary Period Ending for Kayleen Knight, Public Health Clerk II (R2), Retroactive to February 7, 2021.**

Mr. Wyatt moved and Dr. Hickman seconded a motion to approve the probationary period ending for Kayleen Knight, Public Health Clerk II (R2), retroactive to February 7, 2021 with a pay increase of \$725.00 and a new salary of \$32,201.00. A roll call to vote was taken:

Dr. Hickman – Yes                      Dr. Lakritz – Yes                      Mr. Wyatt – Yes

Dr. Johns – Yes                      Ms. Lucas – Yes

Motion carried unanimously.

**c. Approve Probationary Period Ending for Rachel Stefaniak, Staff Sanitarian I (R4), Retroactive to February 7, 2021.**

Dr. Lakritz moved and Dr. Johns seconded a motion to approve the probationary period ending for Rachel Stefaniak, Staff Sanitarian I (R4), retroactive to February 7, 2021 with a pay increase of \$923.00 and a new salary of \$40,970.00. A roll call to vote was taken:

Dr. Hickman – Yes                      Dr. Lakritz – Yes                      Mr. Wyatt – Yes

Dr. Johns – Yes                      Ms. Lucas – Yes

Motion carried unanimously.

**d. Accept Resignation of Amanda Morningstar, Family Nurse Practitioner/Nursing Supervisor (R7), Effective March 19, 2021**

Dr. Hickman moved and Dr. Lakritz seconded a motion to accept the resignation of Amanda Morningstar, Family Nurse Practitioner/Nursing Supervisor (R7), effective March 19, 2021. A roll call to vote was taken:

Dr. Hickman – Yes                      Dr. Lakritz – Yes                      Mr. Wyatt – Yes

Dr. Johns – Yes                      Ms. Lucas – Yes

Motion carried unanimously.

**e. Approve Victor Babcock, EH Public Health Technician (PT1), 310.05 Hours of Sick Time from a Previous Employer Effective February 22, 2021.**

Dr. Lakritz moved and Ms. Lucas seconded a motion to approve Victor Babcock, EH Public Health Technician (PT1), to carry over 310.05 hours of sick time from a previous employer to be added to his sick time balance in accordance with Canton City Health Code Section 207.17 (b) effective February 22, 2021. A roll call to vote was taken:

Dr. Hickman – Yes                      Dr. Lakritz – Yes                      Mr. Wyatt – Yes

Dr. Johns – Yes                      Ms. Lucas – Yes

Motion carried unanimously.

**f. Approve NEW Part-time Family Nurse Practitioner (PT10) Position Description**

Ms. Lucas moved and Dr. Johns seconded a motion to approve the new Part-Time Family Nurse Practitioner (PT10) position description.

Dr. Lakritz and Dr. Hickman proposed that this position be paired with a higher, more competitive salary. James Adams suggested that the position is posted with the salary structure as approved by the Board, and the hiring particulars can be discussed if and when a candidate is identified. A roll call to vote was taken:

Dr. Hickman – Yes                      Dr. Lakritz – Yes                      Mr. Wyatt – Yes

Dr. Johns – Yes                      Ms. Lucas – Yes

Motion carried unanimously.

**g. Approve Updated Nursing Position Classification Schedule as of February 22, 2021**

Mr. Wyatt moved and Dr. Lakritz seconded a motion to approve the updated Nursing Position Classification Schedule as of February 22, 2021. A roll call to vote was taken:

Dr. Hickman – Yes                      Dr. Lakritz – Yes                      Mr. Wyatt – Yes

Dr. Johns – Yes                      Ms. Lucas – Yes

Motion carried unanimously.

**Approve Recommendations of the Hearing Officer for February 22, 2021**

Dr. Johns moved and Dr. Hickman seconded a motion to approve recommendations of the Hearing Officer for February 22, 2021. A roll call to vote was taken:

Dr. Hickman – Yes                      Dr. Lakritz – Yes                      Mr. Wyatt – Yes

Dr. Johns – Yes                      Ms. Lucas – Yes

Motion carried unanimously.

**Grants in Response to COVID-19**

**a. Approve Agreement with the Stark County Combined General Health District to Receive VN21 COVID-19 Vaccine Needs Assessment Grant for a Period of November 1, 2020 to March 31, 2021 for an Amount not to Exceed \$20,000.00**

Mr. Wyatt moved and Dr. Lakritz seconded a motion to approve an agreement with the Stark County Combined General Health District to receive VN21 COVID-19 Vaccine Needs Assessment Grant for a period of November 1, 2020 to March 31, 2021 for an amount of \$20,000.00. A roll call to vote was taken:

Dr. Hickman – Yes                      Dr. Lakritz – Yes                      Mr. Wyatt – Yes

Dr. Johns – Yes                      Ms. Lucas – Yes

Motion carried unanimously.

**b. Approve Agreement with the Stark County Combined General Health District to Receive EO21 COVID-19 Enhanced Operations Grant for a Period of February 2, 2021 to July 31, 2022 for an Amount of \$202,152.00**

Ms. Lucas moved and Dr. Lakritz seconded a motion to approve an agreement with the Stark County Combined General Health District to receive EO21 COVID-19 Enhanced Operations Grant for a period of February 2, 2021 to July 31, 2022 for an amount of \$202,152.00. A roll call to vote was taken:

Dr. Hickman – Yes                      Dr. Lakritz – Yes                      Mr. Wyatt – Yes  
Dr. Johns – Yes                      Ms. Lucas – Yes

Motion carried unanimously.

**c. Approve Agreement Addendum with the Stark County Combined General Health District to Extend the CT20 Contact Tracing Grant to December 31, 2021 (originally approved June 22, 2020 with an end date of December 30, 2020)**

Dr. Hickman moved and Mr. Wyatt seconded a motion to approve an agreement addendum with the Stark County Combined General Health District to extend the CT20 Contact Tracing Grant to December 31, 2021.

Dr. Johns asked if CCPH is still performing contact tracing; Jim Adams confirmed that it is. A roll call to vote was taken:

Dr. Hickman – Yes                      Dr. Lakritz – Yes                      Mr. Wyatt – Yes  
Dr. Johns – Yes                      Ms. Lucas – Yes

Motion carried unanimously.

**d. Approve Agreement Addendum with the Stark County Combined General Health District to Extend the CO21 Contact Tracing Grant to December 31, 2021 (original approved September 21, 2020 with an end date of December 30, 2020)**

Dr. Lakritz moved and Mr. Wyatt seconded a motion to approve an agreement addendum with the Stark County Combined General Health District to extend the CO21 Contact Tracing Grant to December 31, 2021. A roll call to vote was taken:

Dr. Hickman – Yes                      Dr. Lakritz – Yes                      Mr. Wyatt – Yes  
Dr. Johns – Yes                      Ms. Lucas – Yes

Motion carried unanimously.

**Approve Agreement with the Center for Marketing & Opinion Research to Operate COVID-19 Vaccination Clinic Call Center for Pre-registration and Clinic Appointment Management**

**at \$50.00 an Hour (for an additional 160 hours) for up to \$8,000.00 Effective January 13, 2021 (Total of 480 hours up to \$24,000.00)**

Ms. Lucas moved and Dr. Hickman seconded a motion to approve an agreement with the Center for Marketing & Opinion Research to operate COVID-19 vaccination clinic call center for pre-registration and clinic appointment management at \$50.00 an hour (for an additional 160 hours) for up to \$8,000.00 effective January 13, 2021. A roll call to vote was taken:

Dr. Hickman – Yes

Dr. Lakritz – Yes

Mr. Wyatt – Yes

Dr. Johns – Yes

Ms. Lucas – Yes

Motion carried unanimously.

**Approve Contract Addendum with the Care Coordination Systems (CCS) for Support Services, Upgrades and Other Services Pursuant to the Software License Agreement Providing Stark County THRIVE Pathways HUB Staff and Care Coordination Agencies Access and Use of the CCS's Community Health Platform for the Period of January 1, 2021 to December 31, 2025 at an Amount not to Exceed \$330,560.46 (Originally approved December 21, 2020 for an Amount not to Exceed \$255,560.46)**

Dr. Hickman moved and Ms. Lucas seconded a motion to approve a contract addendum with the Care Coordination Systems (CCS) for support services, upgrades and other services pursuant to the software license agreement providing Stark County THRIVE Pathways HUB staff and Care Coordination Agencies access and use of the CCS's Community Health Platform for the period of January 1, 2021 to December 31, 2025 at an amount not to exceed \$330,560.46. A roll call to vote was taken:

Dr. Hickman – Yes

Dr. Lakritz – Yes

Mr. Wyatt – Yes

Dr. Johns – Yes

Ms. Lucas – Yes

Motion carried unanimously.

**Acceptance of Division Reports**

- e. Nursing/WIC – Received more COVID-19 vaccine this morning.
- f. Laboratory – Nothing additional
- g. Environmental Health – Nothing additional
- h. Air Pollution Control – Nothing additional
- i. Vital Statistics – Nothing additional
- j. Fiscal – Nothing additional
- k. Health Commissioner – Jim Adams provided a briefing on CCPH's COVID vaccination clinic activities using a PowerPoint presentation. Data was provided for the number of vaccinations administered by CCPH to Canton residents up to February 18, 2021. Mr. Adams noted that there

**Board of Health Minutes**

**February 22, 2021**

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are significant limitations in this data because CCPH is unable to access immunization information from other providers within our health jurisdiction.

There are currently 2700 people on the vaccination registration list. Canton residents can pre-register for vaccination clinics by CCPH web page or by phone. Clients are called to schedule appointments based on vaccine availability for the week; clinic capacity is approximately 1,000 per week with current staffing.

Mr. Wyatt moved and Dr. Hickman seconded a motion to accept the division reports. A roll call to vote was taken:

Dr. Hickman – Yes

Dr. Lakritz – Yes

Mr. Wyatt – Yes

Dr. Johns – Yes

Ms. Lucas – Yes

Motion carried unanimously.

**Announcement of Next Meeting: Monday, March 22, 2021 at 12:00 PM**

The next regular scheduled meeting of the Board of Health of Canton City Public Health will be on Monday, March 22, 2021 at 12:00 PM.

**Adjourn**

Ms. Lucas moved and Dr. Hickman seconded a motion to adjourn. Motion carried unanimously. The meeting adjourned at 1:25 PM.

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President of the Board of Health

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Secretary to the Board of Health

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Date of Approval



# Accounts Payable by G/L Distribution Report

G/L Date Range 02/20/21 - 03/17/21

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount	
<b>Fund 2312 - STD Control Program</b>											
Department <b>301001 - Health - Administration</b>											
Account <b>705.05 - Professional Services Computer Access Line Fees</b>											
51874 - VERIZON WIRELESS	9874077263 (2)	Tablet Data Service for DIS and LTC	Paid by Check # 676358		02/23/2021	03/15/2021	03/16/2021		03/16/2021	40.11	
									Account <b>705.05 - Professional Services Computer Access Line Fees</b> Totals	Invoice Transactions 1	<u>40.11</u>
Account <b>705.06 - Professional Services Other Professional Services</b>											
52334 - LEXISNEXIS RISK DATA MANAGEMENT INC	1672320-20210228	Monthly Database Services for 2021	Paid by Check # 676453		02/28/2021	03/30/2021	03/17/2021		03/17/2021	180.00	
									Account <b>705.06 - Professional Services Other Professional Services</b> Totals	Invoice Transactions 1	<u>180.00</u>
Account <b>713.14 - Utilities Cell Phones</b>											
51874 - VERIZON WIRELESS	9874070529 (2)	Cell Phone Service for LTC and DIS, 2021	Paid by Check # 676358		02/23/2021	03/15/2021	03/16/2021		03/16/2021	99.34	
									Account <b>713.14 - Utilities Cell Phones</b> Totals	Invoice Transactions 1	<u>99.34</u>
									Department <b>301001 - Health - Administration</b> Totals	Invoice Transactions 3	<u>\$319.45</u>
									Fund <b>2312 - STD Control Program</b> Totals	Invoice Transactions 3	<u>\$319.45</u>



# Accounts Payable by G/L Distribution Report

G/L Date Range 02/20/21 - 03/17/21

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount	
Fund <b>2313 - Local Health Dept Prev Support</b>											
Department <b>301001 - Health - Administration</b>											
Account <b>705.06 - Professional Services Other Professional Services</b>											
50079 - INSYNC HEALTHCARE SOLUTIONS, LLC	206988	Electronic Medical Record system maintenance fees for 2021	Paid by Check # 675949		03/01/2021	03/31/2021	03/09/2021		03/09/2021	94.00	
									Account <b>705.06 - Professional Services Other Professional Services</b> Totals	Invoice Transactions 1	<u>\$94.00</u>
Account <b>705.14 - Professional Services Maintenance Contracts</b>											
40908 - CONNECTING POINT	252740 (2)	Microsoft Hosted Office 365 Plan and Audio Conferencing Fee	Edit		02/26/2021	03/10/2021	03/10/2021			9,460.00	
40908 - CONNECTING POINT	252740, 252791	Additional E3 Licenses for staff	Edit		02/26/2021	03/10/2021	03/10/2021			1,976.00	
									Account <b>705.14 - Professional Services Maintenance Contracts</b> Totals	Invoice Transactions 2	<u>\$11,436.00</u>
Account <b>734.58 - Supplies Miscellaneous Supplies</b>											
52799 - CEPHEID	9000721569	STI Clinic Supplies for the Lab	Edit		03/09/2021	04/08/2021	* 03/12/2021			885.00	
									Account <b>734.58 - Supplies Miscellaneous Supplies</b> Totals	Invoice Transactions 1	<u>\$885.00</u>
									Department <b>301001 - Health - Administration</b> Totals	Invoice Transactions 4	<u>\$12,415.00</u>
									Fund <b>2313 - Local Health Dept Prev Support</b> Totals	Invoice Transactions 4	<u>\$12,415.00</u>



# Accounts Payable by G/L Distribution Report

G/L Date Range 02/20/21 - 03/17/21

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount	
<b>Fund 2314 - Infant Mortality Reduction</b>											
Department <b>301001 - Health - Administration</b>											
Account <b>705.05 - Professional Services Computer Access Line Fees</b>											
50073 - TIME WARNER CABLE	3125597040305	Inv	Open		02/05/2021	02/21/2021	03/15/2021			277.19	
	21	#312559704020521									
									Account <b>705.05 - Professional Services Computer Access Line Fees</b> Totals	Invoice Transactions 1	<u>\$277.19</u>
Account <b>705.06 - Professional Services Other Professional Services</b>											
52910 - STARK COMMUNITY SUPPORT NETWORK	CHW 2021	Community Health Worker THRIVE Program	Paid by Check		02/17/2021	03/04/2021	03/16/2021		03/16/2021	10,436.87	
									Account <b>705.06 - Professional Services Other Professional Services</b> Totals	Invoice Transactions 1	<u>\$10,436.87</u>
Account <b>705.14 - Professional Services Maintenance Contracts</b>											
53112 - CARE COORDINATION SYSTEMS LLC	21-013a	Community Health Record System Licenses, 20 Additional	Edit		02/24/2021	03/01/2021	03/12/2021			2,250.00	
22899 - GRAPHIC ENTERPRISES	21AR1032204	THRIVE Copier Lease Agreement	Edit		03/15/2021	03/25/2021	03/16/2021			125.64	
									Account <b>705.14 - Professional Services Maintenance Contracts</b> Totals	Invoice Transactions 2	<u>\$2,375.64</u>
Account <b>706.01 - Contract Service Contract Service - 2314 THRIVE</b>											
51325 - ACCESS HEALTH STARK COUNTY	May-Dec20	2020 THRIVE Payment Outcomes	Paid by Check		02/26/2021	03/03/2021	* 03/09/2021		03/09/2021	9,780.00	
	THRIVE		# 675925								
51325 - ACCESS HEALTH STARK COUNTY	Nov20	2020 THRIVE Payment Outcomes	Paid by Check		02/26/2021	03/03/2021	* 03/09/2021		03/09/2021	1,430.00	
	THRIVE		# 675925								
51326 - ALLIANCE FAMILY HEALTH CENTER INC	Sep-Nov20	2020 Payment Outcomes - THRIVE	Paid by Check		02/26/2021	03/03/2021	* 03/09/2021		03/09/2021	2,908.00	
	THRIVE		# 675927								
51120 - COMMQUEST SERVICES INC	May-Sep20	2020 Payment Outcomes - THRIVE	Paid by Check		02/26/2021	03/03/2021	* 03/09/2021		03/09/2021	1,640.00	
	THRIVE		# 675940								
52761 - MARGARET B. SHIPLEY CHILD HEALTH CLINIC, INC	May-Nov20	2020 Payment Outcomes - THRIVE	Paid by Check		02/26/2021	03/03/2021	* 03/09/2021		03/09/2021	2,081.00	
	THRIVE		# 675953								
51644 - MY COMMUNITY HEALTH CENTER	Oct-Nov20	2020 Payment Outcomes - THRIVE	Paid by Check		02/26/2021	03/03/2021	* 03/09/2021		03/09/2021	1,380.00	
	THRIVE		# 675956								
1800 - STARK COUNTY HEALTH DEPARTMENT	Sep-Oct20	2020 Payment Outcomes - THRIVE	Paid by Check		02/26/2021	03/03/2021	* 03/09/2021		03/09/2021	150.00	
	THRIVE		# 675964								
51328 - STARK COUNTY JOB AND FAMILY SERVICES	Sep-Nov20	2020 THRIVE Payment Outcomes	Paid by Check		02/26/2021	03/03/2021	* 03/09/2021		03/09/2021	2,515.00	
	THRIVE		# 675965								
2762 - STARK METRO HOUSING AUTHORITY	Sep-Nov20	2020 Payment Outcomes - THRIVE	Paid by Check		02/26/2021	03/03/2021	* 03/09/2021		03/09/2021	2,240.00	
	THRIVE		# 675967								
2762 - STARK METRO HOUSING AUTHORITY	Oct20	2020 THRIVE Payment Outcomes	Paid by Check		02/26/2021	03/03/2021	* 03/09/2021		03/09/2021	520.00	
	THRIVE		# 675967								
38982 - YWCA OF CANTON	May/Sep20	2020 Payment Outcomes - THRIVE	Paid by Check		02/26/2021	03/03/2021	* 03/09/2021		03/09/2021	273.00	
	THRIVE		# 675971								
									Account <b>706.01 - Contract Service Contract Service - 2314 THRIVE</b> Totals	Invoice Transactions 11	<u>\$24,917.00</u>



# Accounts Payable by G/L Distribution Report

G/L Date Range 02/20/21 - 03/17/21

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount	
<b>Fund 2314 - Infant Mortality Reduction</b>											
Department <b>301001 - Health - Administration</b>											
Account <b>713.13 - Utilities Telephone</b>											
50073 - TIME WARNER CABLE	312559704020521	Telephone Service for THRIVE	Open		02/05/2021	02/21/2021	03/15/2021			79.98	
									Account <b>713.13 - Utilities Telephone</b> Totals	Invoice Transactions 1	<u>79.98</u>
Account <b>713.14 - Utilities Cell Phones</b>											
51874 - VERIZON WIRELESS	9872603217	THRIVE Cell Phone Service	Paid by Check		02/03/2021	02/23/2021	03/04/2021		03/04/2021	7.00	
41363 - T-MOBILE USA	Feb21 THRIVE	ACCOUNT #971893812	Edit		03/01/2021	03/21/2021	03/16/2021			110.66	
									Account <b>713.14 - Utilities Cell Phones</b> Totals	Invoice Transactions 2	<u>117.66</u>
Account <b>734.15 - Supplies Computer Software(up to \$999.99)</b>											
9789 - DELL MARKETING L.P.	10459343530	Adobe Software for THRIVE Staff	Edit		01/26/2021	02/25/2021	02/26/2021			1,264.02	
									Account <b>734.15 - Supplies Computer Software(up to \$999.99)</b> Totals	Invoice Transactions 1	<u>1,264.02</u>
Account <b>734.18 - Supplies Furniture/Fixtures (\$0-\$999.99)</b>											
43051 - SYNCB/AMAZON	755888764669	Shelf/Bookcase for THRIVE	Paid by Check		01/15/2021	03/21/2021	03/09/2021		03/09/2021	159.18	
									Account <b>734.18 - Supplies Furniture/Fixtures (\$0-\$999.99)</b> Totals	Invoice Transactions 1	<u>159.18</u>
Account <b>773.43 - Lease and Rental Payments Other Rentals</b>											
51594 - SCF DEVELOPMENT LTD	300 0421	THRIVE Office Space Rental	Edit		03/15/2021	04/10/2021	03/16/2021			4,578.09	
									Account <b>773.43 - Lease and Rental Payments Other Rentals</b> Totals	Invoice Transactions 1	<u>4,578.09</u>
Account <b>776.13 - Membership dues &amp; Fees Membership Dues and Fees</b>											
7335 - HUNTINGTON NATIONAL BANK	CHW 2021 Lic.	CHW Licenses for Sandy, Marcy and Elonda	Paid by Check		03/10/2021	03/10/2021	03/17/2021		03/17/2021	115.50	
									Account <b>776.13 - Membership dues &amp; Fees Membership Dues and Fees</b> Totals	Invoice Transactions 1	<u>115.50</u>
									Department <b>301001 - Health - Administration</b> Totals	Invoice Transactions 22	<u>44,321.13</u>
									Fund <b>2314 - Infant Mortality Reduction</b> Totals	Invoice Transactions 22	<u>44,321.13</u>



# Accounts Payable by G/L Distribution Report

G/L Date Range 02/20/21 - 03/17/21

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount	
Fund <b>2316 - WIC</b>											
Department <b>301001 - Health - Administration</b>											
Account <b>705.05 - Professional Services Computer Access Line Fees</b>											
51874 - VERIZON WIRELESS	9874043956	Hotspot and Cell Phone Service for WIC	Paid by Check # 676358		02/23/2021	03/15/2021	03/16/2021		03/16/2021	80.22	
									Account <b>705.05 - Professional Services Computer Access Line Fees</b> Totals	Invoice Transactions 1	<u>80.22</u>
Account <b>706.36 - Contract Service Health Contract Grant Expend</b>											
85 - ALLIANCE CITY HEALTH DEPT	Jan21 WIC (1)	Quarterly WIC Reimbursement for WIC Clinic	Paid by Check # 676422		02/26/2021	02/26/2021	* 03/17/2021		03/17/2021	2,261.51	
85 - ALLIANCE CITY HEALTH DEPT	Jan/Feb 21 WIC	FY21 WIC Grant	Paid by Check # 676422		02/26/2021	02/26/2021	03/17/2021		03/17/2021	18,928.88	
1121 - MASSILLON CITY HEALTH DEPT	Jan21 WIC (1)	Quarterly WIC Reimbursement for WIC Clinic	Paid by Check # 675871		02/26/2021	02/26/2021	* 03/08/2021		03/08/2021	7,355.76	
1121 - MASSILLON CITY HEALTH DEPT	Jan21 WIC (2)	FY21 WIC Grant	Paid by Check # 675871		02/26/2021	02/26/2021	03/08/2021		03/08/2021	8,107.80	
1800 - STARK COUNTY HEALTH DEPARTMENT	Jan21 WIC (1)	Quarterly WIC Reimbursement for WIC Clinic	Paid by Check # 675879		02/02/2021	02/26/2021	* 03/08/2021		03/08/2021	14,442.81	
1800 - STARK COUNTY HEALTH DEPARTMENT	Jan21 WIC (2)	FY21 WIC Grant	Paid by Check # 675879		02/02/2021	02/26/2021	03/08/2021		03/08/2021	8,990.07	
1800 - STARK COUNTY HEALTH DEPARTMENT	Feb21 WIC Grant	FY21 WIC Grant	Paid by Check # 676468		03/04/2021	03/09/2021	03/17/2021		03/17/2021	23,185.91	
1121 - MASSILLON CITY HEALTH DEPT	Feb21 WIC Grant	FY21 WIC Grant	Paid by Check # 676454		03/10/2021	03/10/2021	03/17/2021		03/17/2021	10,890.53	
									Account <b>706.36 - Contract Service Health Contract Grant Expend</b> Totals	Invoice Transactions 8	<u>\$94,163.27</u>
Account <b>713.14 - Utilities Cell Phones</b>											
51874 - VERIZON WIRELESS	9874043956	Hotspot and Cell Phone Service for WIC	Paid by Check # 676358		02/23/2021	03/15/2021	03/16/2021		03/16/2021	347.69	
									Account <b>713.14 - Utilities Cell Phones</b> Totals	Invoice Transactions 1	<u>\$347.69</u>
Account <b>734.11 - Supplies Miscellaneous Office Supplies</b>											
43051 - SYNCB/AMAZON	638936768874	Inv #993343497476	Edit		03/11/2021	05/14/2021	* 03/16/2021			225.88	
									Account <b>734.11 - Supplies Miscellaneous Office Supplies</b> Totals	Invoice Transactions 1	<u>\$225.88</u>
									Department <b>301001 - Health - Administration</b> Totals	Invoice Transactions 11	<u>\$94,817.06</u>
									Fund <b>2316 - WIC</b> Totals	Invoice Transactions 11	<u>\$94,817.06</u>



# Accounts Payable by G/L Distribution Report

G/L Date Range 02/20/21 - 03/17/21

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount	
<b>Fund 2318 - HIV Prevention</b>											
Department <b>301001 - Health - Administration</b>											
Account <b>705.05 - Professional Services Computer Access Line Fees</b>											
51874 - VERIZON WIRELESS	9874077263 (2)	Tablet Data Service for DIS and LTC	Paid by Check # 676358		02/23/2021	03/15/2021	03/16/2021		03/16/2021	40.11	
									Account <b>705.05 - Professional Services Computer Access Line Fees</b> Totals	Invoice Transactions 1	<u>40.11</u>
Account <b>706.36 - Contract Service Health Contract Grant Expend</b>											
52684 - JEFFERSON COUNTY HEALTH DEPT	Jan21 HIV Grant	2021 Contract Services for HIV Prevention Grant	Paid by Check # 675868		02/10/2021	02/26/2021	03/08/2021		03/08/2021	547.47	
38878 - NEW PHILADELPHIA CITY HEALTH DEPARTMENT	Feb21 HIV Grant	2021 Contract Services for HIV Prevention Grant	Paid by Check # 676458		02/28/2021	03/10/2021	03/17/2021		03/17/2021	906.47	
									Account <b>706.36 - Contract Service Health Contract Grant Expend</b> Totals	Invoice Transactions 2	<u>\$1,453.94</u>
									Department <b>301001 - Health - Administration</b> Totals	Invoice Transactions 3	<u>\$1,494.05</u>
									Fund <b>2318 - HIV Prevention</b> Totals	Invoice Transactions 3	<u>\$1,494.05</u>



# Accounts Payable by G/L Distribution Report

G/L Date Range 02/20/21 - 03/17/21

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount	
<b>Fund 2319 - Early Intervention Services</b>											
Department <b>301001 - Health - Administration</b>											
Account <b>705.05 - Professional Services Computer Access Line Fees</b>											
51874 - VERIZON WIRELESS	98740772263 (1)	Tablet Data Service forEIS (04/01/2020 - 03/31/2021)	Paid by Check # 676358		02/23/2021	03/15/2021	* 03/16/2021		03/16/2021	40.11	
									Account <b>705.05 - Professional Services Computer Access Line Fees</b> Totals	Invoice Transactions 1	<u>\$40.11</u>
Account <b>713.14 - Utilities Cell Phones</b>											
51874 - VERIZON WIRELESS	9874070529 (1)	Cell Phone Monthly Service for EIS (04/01/2020 - 03/31/2021)	Paid by Check # 676358		02/23/2021	03/15/2021	* 03/16/2021		03/16/2021	49.67	
									Account <b>713.14 - Utilities Cell Phones</b> Totals	Invoice Transactions 1	<u>\$49.67</u>
Account <b>734.11 - Supplies Miscellaneous Office Supplies</b>											
905 - INDEPENDENCE BUSINESS SUPPLY	1797229-1	Office Supplies for EIS Grant	Edit		02/10/2021	03/02/2021	* 03/10/2021			35.58	
									Account <b>734.11 - Supplies Miscellaneous Office Supplies</b> Totals	Invoice Transactions 1	<u>\$35.58</u>
Account <b>734.58 - Supplies Miscellaneous Supplies</b>											
52628 - DAVE PURCHASE PROJECT/NASEN	44036	SWAP Program Supplies	Edit		03/12/2021	04/12/2021	03/15/2021			7,749.29	
									Account <b>734.58 - Supplies Miscellaneous Supplies</b> Totals	Invoice Transactions 1	<u>\$7,749.29</u>
Account <b>772.20 - Travel Registration/Tuition</b>											
7335 - HUNTINGTON NATIONAL BANK	HIV Conf 2021	Biomedical HIV Prevention Conf, 03/30/21-03/31/21, D. McCartney	Paid by Check # 676440		03/10/2021	03/10/2021	03/17/2021		03/17/2021	185.00	
									Account <b>772.20 - Travel Registration/Tuition</b> Totals	Invoice Transactions 1	<u>\$185.00</u>
									Department <b>301001 - Health - Administration</b> Totals	Invoice Transactions 5	<u>\$8,059.65</u>
									Fund <b>2319 - Early Intervention Services</b> Totals	Invoice Transactions 5	<u>\$8,059.65</u>



# Accounts Payable by G/L Distribution Report

G/L Date Range 02/20/21 - 03/17/21

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount	
<b>Fund 2320 - Nursing Clinic Activity Fund</b>											
Department <b>303002 - Travel Clinic</b>											
Account <b>734.58 - Supplies Miscellaneous Supplies</b>											
37432 - MERCK SHARP & DOHME CORP	7015024048	Gardasil Vaccination for Clinics	Edit		01/12/2021	04/12/2021	02/26/2021			2,226.52	
									Account <b>734.58 - Supplies Miscellaneous Supplies</b> Totals	Invoice Transactions 1	<u>\$2,226.52</u>
									Department <b>303002 - Travel Clinic</b> Totals	Invoice Transactions 1	<u>\$2,226.52</u>
Department <b>303004 - Dental Services</b>											
Account <b>734.13 - Supplies Freight</b>											
52955 - BENCO DENTAL SUPPLY CO	10997102	Dental Sealant Program Supplies	Edit		03/11/2021	05/11/2021	03/16/2021			10.95	
									Account <b>734.13 - Supplies Freight</b> Totals	Invoice Transactions 1	<u>\$10.95</u>
Account <b>734.58 - Supplies Miscellaneous Supplies</b>											
52955 - BENCO DENTAL SUPPLY CO	10997102	Dental Sealant Program Supplies	Edit		03/11/2021	05/11/2021	03/16/2021			1,507.74	
									Account <b>734.58 - Supplies Miscellaneous Supplies</b> Totals	Invoice Transactions 1	<u>\$1,507.74</u>
									Department <b>303004 - Dental Services</b> Totals	Invoice Transactions 2	<u>\$1,518.69</u>
									Fund <b>2320 - Nursing Clinic Activity Fund</b> Totals	Invoice Transactions 3	<u>\$3,745.21</u>



# Accounts Payable by G/L Distribution Report

G/L Date Range 02/20/21 - 03/17/21

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount
Fund <b>2321 - Get Vaccinated Ohio (IAP)</b>										
Department <b>301001 - Health - Administration</b>										
Account <b>706.36 - Contract Service Health Contract Grant Expend</b>										
85 - ALLIANCE CITY HEALTH DEPT	Feb21	GV Grant	Get Vaccianted FY21 Grant	Paid by Check # 676422	03/04/2021	03/10/2021	* 03/17/2021		03/17/2021	325.00
							Account <b>706.36 - Contract Service Health Contract Grant Expend</b> Totals	Invoice Transactions	1	<u>\$325.00</u>
							Department <b>301001 - Health - Administration</b> Totals	Invoice Transactions	1	<u>\$325.00</u>
							Fund <b>2321 - Get Vaccinated Ohio (IAP)</b> Totals	Invoice Transactions	1	<u>\$325.00</u>



# Accounts Payable by G/L Distribution Report

G/L Date Range 02/20/21 - 03/17/21

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount
Fund <b>2324 - NALOXONE ACCESS GRANT FUND</b>										
Department <b>301001 - Health - Administration</b>										
Account <b>734.10 - Supplies Postage</b>										
2137 - CITY TREASURER ONLY	FOR:DEPOSIT 2-21 NX	Postage for Naloxone Grant	Paid by Check # 676316		03/04/2021	03/05/2021	* 03/16/2021		03/16/2021	196.20
							Account <b>734.10 - Supplies Postage</b> Totals	Invoice Transactions	1	<u>\$196.20</u>
							Department <b>301001 - Health - Administration</b> Totals	Invoice Transactions	1	<u>\$196.20</u>
							Fund <b>2324 - NALOXONE ACCESS GRANT FUND</b> Totals	Invoice Transactions	1	<u>\$196.20</u>



# Accounts Payable by G/L Distribution Report

G/L Date Range 02/20/21 - 03/17/21

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount	
Fund <b>2328 - Public Health Infrastructure</b>											
Department <b>301019 - COVID-19 STIMULUS</b>											
Account <b>705.05 - Professional Services Computer Access Line Fees</b>											
51874 - VERIZON WIRELESS	9874269197	Cell Phone Service and Hot Spots for Health Staff	Paid by Check # 676358		02/26/2021	03/18/2021	03/16/2021		03/16/2021	40.11	
									Account <b>705.05 - Professional Services Computer Access Line Fees</b> Totals	Invoice Transactions 1	<u>40.11</u>
Account <b>705.06 - Professional Services Other Professional Services</b>											
52923 - MARIA A ANAYA	4-2021	Contact Tracing Contract Services, Interpretation Services	Paid by Check # 675732		03/01/2021	03/01/2021	03/04/2021		03/04/2021	135.00	
52973 - BREWER, BRIANNA	4-2021	Contact Tracing Contract Services	Paid by Check # 675740		03/01/2021	03/01/2021	03/04/2021		03/04/2021	311.50	
53019 - FATHIYYAH FARRAKHAN	4-2021	Contact Tracing Contract Services	Paid by Check # 675748		03/01/2021	03/01/2021	03/04/2021		03/04/2021	283.50	
51412 - JENNIFER MONGOLD	4-2021	Contact Tracing Contract Services	Paid by Check # 675751		03/01/2021	03/01/2021	03/04/2021		03/04/2021	164.50	
50483 - CENTER FOR MARKETING & OPINION RESEARCH	3004	COVID-19 Vaccination Clinic Call Center	Paid by Check # 675856		02/26/2021	03/03/2021	03/08/2021		03/08/2021	8,000.00	
52973 - BREWER, BRIANNA	5-2021	Contact Tracing Contract Services	Open		03/15/2021	03/15/2021	03/15/2021			301.00	
50483 - CENTER FOR MARKETING & OPINION RESEARCH	3013	COVID-19 Vaccination Clinic Call Center	Open		03/11/2021	03/15/2021	03/15/2021			8,000.00	
53019 - FATHIYYAH FARRAKHAN	5-2021	Contact Tracing Contract Services	Open		03/15/2021	03/15/2021	03/15/2021			231.00	
51412 - JENNIFER MONGOLD	5-2021	Contact Tracing Contract Services	Open		03/15/2021	03/15/2021	03/15/2021			154.00	
									Account <b>705.06 - Professional Services Other Professional Services</b> Totals	Invoice Transactions 9	<u>\$17,580.50</u>
Account <b>705.14 - Professional Services Maintenance Contracts</b>											
40908 - CONNECTING POINT	252740 (1)	E-mail Users and Audio Conferencing, Related to COVID-19	Edit		02/26/2021	03/10/2021	03/10/2021			432.00	
									Account <b>705.14 - Professional Services Maintenance Contracts</b> Totals	Invoice Transactions 1	<u>\$432.00</u>
Account <b>713.14 - Utilities Cell Phones</b>											
51874 - VERIZON WIRELESS	9874269197	Cell Phone Service and Hot Spots for Health Staff	Paid by Check # 676358		02/26/2021	03/18/2021	03/16/2021		03/16/2021	1,086.39	
									Account <b>713.14 - Utilities Cell Phones</b> Totals	Invoice Transactions 1	<u>\$1,086.39</u>
Account <b>734.11 - Supplies Miscellaneous Office Supplies</b>											
905 - INDEPENDENCE BUSINESS SUPPLY	1835723-0 and 1	COVID-19 Office Supplies	Edit		03/05/2021	03/25/2021	03/15/2021			249.24	
43051 - SYNCB/AMAZON	574433844343	Inv #448993454875	Edit		03/12/2021	05/14/2021	03/16/2021			107.82	
									Account <b>734.11 - Supplies Miscellaneous Office Supplies</b> Totals	Invoice Transactions 2	<u>\$357.06</u>
									Department <b>301019 - COVID-19 STIMULUS</b> Totals	Invoice Transactions 14	<u>\$19,496.06</u>
									Fund <b>2328 - Public Health Infrastructure</b> Totals	Invoice Transactions 14	<u>\$19,496.06</u>



# Accounts Payable by G/L Distribution Report

G/L Date Range 02/20/21 - 03/17/21

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount	
Fund <b>2331 - Air Pollution (134)</b>											
Department <b>301001 - Health - Administration</b>											
Account <b>705.06 - Professional Services Other Professional Services</b>											
9239 - TREASURER OF HAMILTON COUNTY	4thQtr21 PM2.5	Weighing and Analysis of PM2.5 filters, as needed in 2020	Edit		02/25/2021	03/10/2021	* 03/10/2021			592.00	
51510 - LIBERTY FORD LINCOLN CANTON LLC	785146	Mounting and balancing Spare tire/Rim for 2014 Ford Fusion, APC	Edit		03/11/2021	03/12/2021	03/12/2021			198.00	
36075 - TISCH ENVIRONMENTAL INC	00040769	Recertification of Orifice for Calibrating Pb Samplers, APC	Edit		03/11/2021	04/11/2021	03/16/2021			217.00	
									Account <b>705.06 - Professional Services Other Professional Services</b> Totals	Invoice Transactions 3	<u>\$1,007.00</u>
Account <b>705.14 - Professional Services Maintenance Contracts</b>											
40908 - CONNECTING POINT	252740 (2)	Microsoft Hosted Office 365 Plan and Audio Conferencing Fee	Edit		02/26/2021	03/10/2021	03/10/2021			960.00	
									Account <b>705.14 - Professional Services Maintenance Contracts</b> Totals	Invoice Transactions 1	<u>\$960.00</u>
Account <b>713.12 - Utilities Electric</b>											
1366 - OHIO EDISON CO.	Feb21 APC Elect	Account #110 033 872 497	Open		03/05/2021	03/26/2021	03/12/2021			97.63	
									Account <b>713.12 - Utilities Electric</b> Totals	Invoice Transactions 1	<u>\$97.63</u>
Account <b>713.14 - Utilities Cell Phones</b>											
51874 - VERIZON WIRELESS	9874077429	Cell Phone Service for APC Field Staff in 2021	Paid by Check # 676358		02/23/2021	03/15/2021	03/16/2021		03/16/2021	198.68	
									Account <b>713.14 - Utilities Cell Phones</b> Totals	Invoice Transactions 1	<u>\$198.68</u>
Account <b>734.11 - Supplies Miscellaneous Office Supplies</b>											
43051 - SYNCB/AMAZON	686974979534	Inv #454786638738	Edit		03/05/2021	05/05/2021	03/12/2021			5.90	
									Account <b>734.11 - Supplies Miscellaneous Office Supplies</b> Totals	Invoice Transactions 1	<u>\$5.90</u>
Account <b>734.12 - Supplies Outside Printing</b>											
51821 - USA QUICKPRINT	318027	Employee Business Cards	Edit		02/18/2021	03/18/2021	02/26/2021			28.44	
									Account <b>734.12 - Supplies Outside Printing</b> Totals	Invoice Transactions 1	<u>\$28.44</u>
Account <b>734.13 - Supplies Freight</b>											
43270 - SAVILLEX CORPORATION	133536	Parts for Ozone Sampling Lines, APC	Edit		02/19/2021	03/19/2021	03/10/2021			11.63	
39452 - UPS	Feb/Mar 21	E11A07081, E11A07101, E11A04111	Edit		02/20/2021	03/22/2021	03/15/2021			77.51	
36075 - TISCH ENVIRONMENTAL INC	00040769	Recertification of Orifice for Calibrating Pb Samplers, APC	Edit		03/11/2021	04/11/2021	03/16/2021			20.00	
									Account <b>734.13 - Supplies Freight</b> Totals	Invoice Transactions 3	<u>\$109.14</u>



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G/L Date Range 02/20/21 - 03/17/21

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount	
Fund <b>2331 - Air Pollution (134)</b>											
Department <b>301001 - Health - Administration</b>											
Account <b>734.57 - Supplies Machine Parts and Supplies</b>											
43270 - SAVILLEX CORPORATION	133536	Parts for Ozone Sampling Lines, APC	Edit		02/19/2021	03/19/2021	03/10/2021			561.70	
									Account <b>734.57 - Supplies Machine Parts and Supplies</b> Totals	Invoice Transactions 1	<u>561.70</u>
Account <b>734.58 - Supplies Miscellaneous Supplies</b>											
43051 - SYNCB/AMAZON	686974979534	Inv #454786638738	Edit		03/05/2021	05/05/2021	03/12/2021			5.99	
									Account <b>734.58 - Supplies Miscellaneous Supplies</b> Totals	Invoice Transactions 1	<u>5.99</u>
									Department <b>301001 - Health - Administration</b> Totals	Invoice Transactions 13	<u>\$2,974.48</u>
									Fund <b>2331 - Air Pollution (134)</b> Totals	Invoice Transactions 13	<u>\$2,974.48</u>



# Accounts Payable by G/L Distribution Report

G/L Date Range 02/20/21 - 03/17/21

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount
Fund <b>2351 - Food Protection Program</b>										
Department <b>301001 - Health - Administration</b>										
Account <b>747.14 - Refunds, Claims and Reimbursements Reimbursements</b>										
1941 - TREASURER STATE OF OHIO	Feb21 RFE Reimb	2021 Retail Food Establishment Reimbursement	Edit		03/16/2021	03/16/2021	03/16/2021			1,806.00
1941 - TREASURER STATE OF OHIO	Feb21 FSO Reimb	2021 Food Service Operation Reimbursement	Edit		03/16/2021	03/16/2021	03/16/2021			4,638.00
							Account <b>747.14 - Refunds, Claims and Reimbursements Reimbursements</b> Totals		Invoice Transactions 2	<u>\$6,444.00</u>
							Department <b>301001 - Health - Administration</b> Totals		Invoice Transactions 2	<u>\$6,444.00</u>
							Fund <b>2351 - Food Protection Program</b> Totals		Invoice Transactions 2	<u>\$6,444.00</u>



# Accounts Payable by G/L Distribution Report

G/L Date Range 02/20/21 - 03/17/21

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount
<b>Fund 2353 - Swimming Pool</b>										
Department <b>301001 - Health - Administration</b>										
Account <b>747.14 - Refunds, Claims and Reimbursements Reimbursements</b>										
1941 - TREASURER STATE OF OHIO	Feb21 Pool Reimb	2021 Public Swimming Pool/Spas Reimbursement	Edit		03/16/2021	03/16/2021	03/16/2021			80.00
							Account <b>747.14 - Refunds, Claims and Reimbursements Reimbursements</b> Totals		Invoice Transactions 1	<u>\$80.00</u>
							Department <b>301001 - Health - Administration</b> Totals		Invoice Transactions 1	<u>\$80.00</u>
							Fund <b>2353 - Swimming Pool</b> Totals		Invoice Transactions 1	<u>\$80.00</u>



# Accounts Payable by G/L Distribution Report

G/L Date Range 02/20/21 - 03/17/21

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount	
Fund <b>2354 - Solid Waste Program</b>											
Department <b>307001 - Environmental Health Administration</b>											
Account <b>734.21 - Supplies Fuels</b>											
38997 - MATHESON TRI-GAS INC	23108940	Fuel as needed at the Recycle Center in 2021	Edit		02/22/2021	03/24/2021	03/10/2021			48.53	
									Account <b>734.21 - Supplies Fuels</b> Totals	Invoice Transactions 1	<u>\$48.53</u>
Account <b>734.58 - Supplies Miscellaneous Supplies</b>											
24289 - US SAFETY GEAR INC	854286	Miscellaneous Supplies for Recycle Center, as needed in 2021	Edit		03/01/2021	04/01/2021	03/12/2021			74.99	
43051 - SYNCB/AMAZON	Rec Center Sup	Inv #463659678896, 835363847674	Edit		03/09/2021	05/09/2021	03/16/2021			106.98	
									Account <b>734.58 - Supplies Miscellaneous Supplies</b> Totals	Invoice Transactions 2	<u>\$181.97</u>
									Department <b>307001 - Environmental Health Administration</b> Totals	Invoice Transactions 3	<u>\$230.50</u>
									Fund <b>2354 - Solid Waste Program</b> Totals	Invoice Transactions 3	<u>\$230.50</u>



# Accounts Payable by G/L Distribution Report

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Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount	
<b>Fund 7601 - Health Fund</b>											
Department <b>301001 - Health - Administration</b>											
Account <b>705.05 - Professional Services Computer Access Line Fees</b>											
51874 - VERIZON WIRELESS	9874269197	Cell Phone Service and Hot Spots for Health Staff	Paid by Check # 676358		02/26/2021	03/18/2021	03/16/2021		03/16/2021	40.11	
									Account <b>705.05 - Professional Services Computer Access Line Fees</b> Totals	Invoice Transactions 1	<u>\$40.11</u>
Account <b>705.06 - Professional Services Other Professional Services</b>											
50615 - RHODEN FUNERAL HOME	R.Hight Indigent	Indigent Cremation: Robert Hight, DOD: 12/7/2020	Edit		01/24/2021	02/26/2021	02/26/2021			495.00	
40242 - U-SHREDD-IT	24617	Shredding of Documents, as needed in 2021	Edit		02/26/2021	02/26/2021	02/26/2021			210.00	
50483 - CENTER FOR MARKETING & OPINION RESEARCH	3012	COVID-19 Vaccination Clinic Call Center	Paid by Check # 676235		03/05/2021	03/05/2021	03/15/2021		03/15/2021	8,000.00	
33322 - IMMIX TECHNOLOGY	154650	Kronos Workforce Activities	Edit		02/19/2021	03/21/2021	* 03/10/2021			158.00	
									Account <b>705.06 - Professional Services Other Professional Services</b> Totals	Invoice Transactions 4	<u>\$8,863.00</u>
Account <b>705.13 - Professional Services Building Maintenance</b>											
27986 - R & G JANITORIAL, INC.	3308	Snow Plow - Parking Lot (Corner of 5th & Cherry), as Needed 2021	Edit		02/28/2021	03/04/2021	03/04/2021			480.00	
									Account <b>705.13 - Professional Services Building Maintenance</b> Totals	Invoice Transactions 1	<u>\$480.00</u>
Account <b>705.14 - Professional Services Maintenance Contracts</b>											
27986 - R & G JANITORIAL, INC.	3313	Cleaning of Health Department Offices, 2021	Paid by Check # 676217		02/28/2021	03/04/2021	03/12/2021		03/12/2021	2,150.00	
493 - COPECO INC	21AR1023497	6 Copiers, Maintenance Agreement	Paid by Check # 676431		02/04/2021	03/21/2021	03/17/2021		03/17/2021	3,577.43	
									Account <b>705.14 - Professional Services Maintenance Contracts</b> Totals	Invoice Transactions 2	<u>\$5,727.43</u>
Account <b>706.18 - Contract Service Car Wash</b>											
1597 - RED CARPET CAR WASH	Feb21 CarWashes	Car Washes as Needed for Health Department (Except APC vehicles)	Edit		02/28/2021	03/10/2021	03/10/2021			12.75	
									Account <b>706.18 - Contract Service Car Wash</b> Totals	Invoice Transactions 1	<u>\$12.75</u>
Account <b>713.14 - Utilities Cell Phones</b>											
51874 - VERIZON WIRELESS	9874269197	Cell Phone Service and Hot Spots for Health Staff	Paid by Check # 676358		02/26/2021	03/18/2021	03/16/2021		03/16/2021	49.67	
									Account <b>713.14 - Utilities Cell Phones</b> Totals	Invoice Transactions 1	<u>\$49.67</u>



# Accounts Payable by G/L Distribution Report

G/L Date Range 02/20/21 - 03/17/21

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount
<b>Fund 7601 - Health Fund</b>										
Department <b>301001 - Health - Administration</b>										
Account <b>734.10 - Supplies Postage</b>										
2137 - CITY TREASURER ONLY	FOR:DEPOSIT 2-21 HL	Postage for Health Department, as needed in 2021	Paid by Check # 676315		03/04/2021	03/05/2021	03/16/2021		03/16/2021	1,136.50
								Account <b>734.10 - Supplies Postage</b> Totals	Invoice Transactions 1	<u>\$1,136.50</u>
Account <b>734.11 - Supplies Miscellaneous Office Supplies</b>										
43051 - SYNCB/AMAZON	957673338455	Credit #0675214CM-051WG	Edit		03/12/2021	05/13/2021	03/16/2021			74.87
								Account <b>734.11 - Supplies Miscellaneous Office Supplies</b> Totals	Invoice Transactions 1	<u>\$74.87</u>
Account <b>734.12 - Supplies Outside Printing</b>										
51821 - USA QUICKPRINT	318027	Employee Business Cards	Edit		02/18/2021	03/18/2021	02/26/2021			56.88
								Account <b>734.12 - Supplies Outside Printing</b> Totals	Invoice Transactions 1	<u>\$56.88</u>
Account <b>734.13 - Supplies Freight</b>										
18580 - CANTON HOTEL & RESTAURANT SUPPLY	390190	Paper Towels and Toilet Paper, as needed in 2021	Edit		02/24/2021	02/26/2021	02/26/2021			4.00
								Account <b>734.13 - Supplies Freight</b> Totals	Invoice Transactions 1	<u>\$4.00</u>
Account <b>734.58 - Supplies Miscellaneous Supplies</b>										
18580 - CANTON HOTEL & RESTAURANT SUPPLY	390190	Paper Towels and Toilet Paper, as needed in 2021	Edit		02/24/2021	02/26/2021	02/26/2021			763.64
43051 - SYNCB/AMAZON	966893467948	Snacks/water for COVID Vaccine Clinics for Volunteers, as needed	Paid by Check # 675968		02/18/2021	04/22/2021	03/09/2021		03/09/2021	135.93
7335 - HUNTINGTON NATIONAL BANK	Vaccine Clinics	Lunch for COVID-19 Vaccine Clinics for Volunteers, as needed	Paid by Check # 676443		03/10/2021	03/10/2021	03/17/2021		03/17/2021	219.60
35141 - PATRICIA J MCCONNELL	Water - Clinics	Snacks/water for COVID Vaccine Clinics for Volunteers, as needed	Paid by Check # 676262		03/08/2021	03/10/2021	03/15/2021		03/15/2021	20.86
43051 - SYNCB/AMAZON	868675863333	Snacks/water for COVID Vaccine Clinics for Volunteers, as needed	Edit		03/10/2021	05/13/2021	03/16/2021			124.66
								Account <b>734.58 - Supplies Miscellaneous Supplies</b> Totals	Invoice Transactions 5	<u>\$1,264.69</u>



# Accounts Payable by G/L Distribution Report

G/L Date Range 02/20/21 - 03/17/21

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount
<b>Fund 7601 - Health Fund</b>										
Department <b>301001 - Health - Administration</b>										
Account <b>747.14 - Refunds, Claims and Reimbursements Reimbursements</b>										
1364 - OHIO DIVISION OF REAL ESTATE	Feb21 Burial Per	Burial Permits - Reimbursement to the State for 2021	Paid by Check # 675959		03/03/2021	03/03/2021	03/09/2021		03/09/2021	477.50
							Account <b>747.14 - Refunds, Claims and Reimbursements Reimbursements</b> Totals		Invoice Transactions 1	<u>\$477.50</u>
							Department <b>301001 - Health - Administration</b> Totals		Invoice Transactions 20	<u>\$18,187.40</u>
Department <b>303001 - Nurses</b>										
Account <b>705.06 - Professional Services Other Professional Services</b>										
41842 - DUTCH GIRL CLEANERS	LabCoats Cleaned	Cleaning Services for Nursing Lab Coats, 2021	Edit		02/26/2021	03/10/2021	03/10/2021			69.00
7335 - HUNTINGTON NATIONAL BANK	CAS Dataloggers	Monitoring, Alarming & Data Storage Subscription	Paid by Check # 676438		03/10/2021	03/10/2021	03/17/2021		03/17/2021	238.00
							Account <b>705.06 - Professional Services Other Professional Services</b> Totals		Invoice Transactions 2	<u>\$307.00</u>
Account <b>713.13 - Utilities Telephone</b>										
177 - AT&T	1/17-2/16/2021	INVOICE #330454766402	Paid by Check # 675438		02/16/2021	03/08/2021	02/25/2021		02/25/2021	50.18
							Account <b>713.13 - Utilities Telephone</b> Totals		Invoice Transactions 1	<u>\$50.18</u>
Account <b>734.12 - Supplies Outside Printing</b>										
51821 - USA QUICKPRINT	318027	Employee Business Cards	Edit		02/18/2021	03/18/2021	02/26/2021			56.88
							Account <b>734.12 - Supplies Outside Printing</b> Totals		Invoice Transactions 1	<u>\$56.88</u>
Account <b>734.13 - Supplies Freight</b>										
50848 - CAS DATALOGGERS	35012	Replace Equipment for 2 Fridge/Freezers monitor equipment	Edit		02/18/2021	03/20/2021	03/04/2021			21.03
							Account <b>734.13 - Supplies Freight</b> Totals		Invoice Transactions 1	<u>\$21.03</u>
Account <b>734.17 - Supplies Equipment (\$0.00 - \$999.99)</b>										
50848 - CAS DATALOGGERS	35012	Replace Equipment for 2 Fridge/Freezers monitor equipment	Edit		02/18/2021	03/20/2021	03/04/2021			2,066.00
							Account <b>734.17 - Supplies Equipment (\$0.00 - \$999.99)</b> Totals		Invoice Transactions 1	<u>\$2,066.00</u>
Account <b>734.58 - Supplies Miscellaneous Supplies</b>										
548 - DAVIES DRUG	Trans# 82626	Nursing Clinic Supplies, as needed in 2021	Edit		02/22/2021	02/26/2021	02/26/2021			9.00
							Account <b>734.58 - Supplies Miscellaneous Supplies</b> Totals		Invoice Transactions 1	<u>\$9.00</u>
Account <b>776.13 - Membership dues &amp; Fees Membership Dues and Fees</b>										
7335 - HUNTINGTON NATIONAL BANK	Term. License 21	2021 Terminal License Renewal - Nursing	Paid by Check # 676439		03/10/2021	03/10/2021	03/17/2021		03/17/2021	323.50
							Account <b>776.13 - Membership dues &amp; Fees Membership Dues and Fees</b> Totals		Invoice Transactions 1	<u>\$323.50</u>



# Accounts Payable by G/L Distribution Report

G/L Date Range 02/20/21 - 03/17/21

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount	
Fund <b>7601 - Health Fund</b>											
Department <b>303001 - Nurses</b> Totals										Invoice Transactions 8	\$2,833.59
Department <b>304001 - Lab</b>											
Account <b>705.06 - Professional Services Other Professional Services</b>											
51563 - STERICYCLE	1010571147	Infectious Waste Disposal, as needed in the Lab in 2021	Paid by Check # 676351		02/28/2021	03/30/2021	03/16/2021		03/16/2021	95.26	
34284 - REAM & HAAGER LABORATORY	4362023	Water Testing Services, as needed in 2021	Edit		02/22/2021	03/24/2021	03/15/2021			15.00	
Account <b>705.06 - Professional Services Other Professional Services</b> Totals										Invoice Transactions 2	\$110.26
Account <b>734.11 - Supplies Miscellaneous Office Supplies</b>											
43051 - SYNCB/AMAZON	457836963565	Miscellaneous Office Supplies for LAB, as needed in 2021	Paid by Check # 675968		02/22/2021	04/24/2021	03/09/2021		03/09/2021	22.90	
43051 - SYNCB/AMAZON	575756374367	Miscellaneous Office Supplies for LAB, as needed in 2021	Paid by Check # 676352		02/23/2021	04/27/2021	03/16/2021		03/16/2021	17.95	
Account <b>734.11 - Supplies Miscellaneous Office Supplies</b> Totals										Invoice Transactions 2	\$40.85
Account <b>734.13 - Supplies Freight</b>											
43051 - SYNCB/AMAZON	457836963565	Miscellaneous Office Supplies for LAB, as needed in 2021	Paid by Check # 675968		02/22/2021	04/24/2021	03/09/2021		03/09/2021	9.99	
43051 - SYNCB/AMAZON	575756374367	Miscellaneous Office Supplies for LAB, as needed in 2021	Paid by Check # 676352		02/23/2021	04/27/2021	03/16/2021		03/16/2021	5.99	
52799 - CEPHEID	9000721569	STI Clinic Supplies for the Lab	Edit		03/09/2021	04/08/2021	* 03/12/2021			20.02	
2067 - WEBER SCIENTIFIC	922123	Lab Supplies, as needed in 2021	Edit		02/27/2021	03/12/2021	03/12/2021			67.89	
Account <b>734.13 - Supplies Freight</b> Totals										Invoice Transactions 4	\$103.89
Account <b>734.58 - Supplies Miscellaneous Supplies</b>											
52799 - CEPHEID	9000721569	STI Clinic Supplies for the Lab	Edit		03/09/2021	04/08/2021	* 03/12/2021			84.00	
2067 - WEBER SCIENTIFIC	922123	Lab Supplies, as needed in 2021	Edit		02/27/2021	03/12/2021	03/12/2021			540.24	
Account <b>734.58 - Supplies Miscellaneous Supplies</b> Totals										Invoice Transactions 2	\$624.24
Department <b>304001 - Lab</b> Totals										Invoice Transactions 10	\$879.24
Department <b>307001 - Environmental Health Administration</b>											
Account <b>713.14 - Utilities Cell Phones</b>											
51874 - VERIZON WIRELESS	9874096139	Cell Phone Service for EH Director, 2021	Paid by Check # 676358		02/23/2021	03/15/2021	03/16/2021		03/16/2021	49.67	
51874 - VERIZON WIRELESS	9874269197	Cell Phone Service and Hot Spots for Health Staff	Paid by Check # 676358		02/26/2021	03/18/2021	03/16/2021		03/16/2021	49.67	
Account <b>713.14 - Utilities Cell Phones</b> Totals										Invoice Transactions 2	\$99.34



# Accounts Payable by G/L Distribution Report

G/L Date Range 02/20/21 - 03/17/21

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount	
<b>Fund 7601 - Health Fund</b>											
Department <b>307001 - Environmental Health Administration</b>											
Account <b>734.11 - Supplies Miscellaneous Office Supplies</b>											
43051 - SYNCB/AMAZON	559674384469	Inv #785739599845	Paid by Check		02/19/2021	04/23/2021	03/16/2021		03/16/2021	45.28	
			# 676352								
43051 - SYNCB/AMAZON	968764389356	Miscellaneous Office Supplies for EH, as needed	Edit		03/11/2021	05/14/2021	03/16/2021			42.29	
									Account <b>734.11 - Supplies Miscellaneous Office Supplies</b> Totals	Invoice Transactions 2	<u>\$87.57</u>
Account <b>734.12 - Supplies Outside Printing</b>											
51821 - USA QUICKPRINT	318027	Employee Business Cards	Edit		02/18/2021	03/18/2021	02/26/2021			142.20	
									Account <b>734.12 - Supplies Outside Printing</b> Totals	Invoice Transactions 1	<u>\$142.20</u>
Account <b>734.58 - Supplies Miscellaneous Supplies</b>											
43051 - SYNCB/AMAZON	437688856794	Miscellaneous Supplies for EH, as needed	Edit		03/12/2021	05/14/2021	03/16/2021			29.01	
									Account <b>734.58 - Supplies Miscellaneous Supplies</b> Totals	Invoice Transactions 1	<u>\$29.01</u>
									Department <b>307001 - Environmental Health Administration</b> Totals	Invoice Transactions 6	<u>\$358.12</u>
Department <b>308001 - OPHI</b>											
Account <b>734.12 - Supplies Outside Printing</b>											
51821 - USA QUICKPRINT	318027	Employee Business Cards	Edit		02/18/2021	03/18/2021	02/26/2021			28.44	
									Account <b>734.12 - Supplies Outside Printing</b> Totals	Invoice Transactions 1	<u>\$28.44</u>
Account <b>734.58 - Supplies Miscellaneous Supplies</b>											
43051 - SYNCB/AMAZON	836758733954	Toolbook and lateral file cabinets with lock	Paid by Check		02/20/2021	04/25/2021	03/16/2021		03/16/2021	156.96	
			# 676352								
									Account <b>734.58 - Supplies Miscellaneous Supplies</b> Totals	Invoice Transactions 1	<u>\$156.96</u>
									Department <b>308001 - OPHI</b> Totals	Invoice Transactions 2	<u>\$185.40</u>
									Fund <b>7601 - Health Fund</b> Totals	Invoice Transactions 46	<u>\$22,443.75</u>
									Grand Totals	Invoice Transactions 132	<u>\$217,361.54</u>

\* = Prior Fiscal Year Activity



**Public Health**  
Prevent. Promote. Protect.

Canton City Public Health

**Board of Health Meeting**  
Monday, March 22, 2021 @ 12:00pm – Board Room  
**Miscellaneous Items**

1. Strategic Plan 2021 – 2023, Appendix A – Action Plan (Agenda item # 6)
2. Stark County Job & Family Services 2021 Subsidized Employment Program Flyer (Agenda item # 11)

Canton City Public Health  
Strategic Plan 2021 to 2023



**Public Health**  
Prevent. Promote. Protect.

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**Canton City Public Health**

APPROVED BY THE BOARD OF HEALTH ON November 23, 2020

## Planning Process

This departmental strategic plan covers the period January 1, 2021 to December 31, 2023.

This plan is intended to guide our programs and to supplement and align with the state and community health improvement plans. The operating divisions will use this strategic plan as they develop their own work plans. This plan is intended to meet the Public Health Accreditation Board Standards and Measures 5.3 (PHAB Standards version 1.5).

This plan was developed using a series of internal planning meetings with the Strategic Planning Committee of the Canton City Health Department. Department staff and community partners were consulted during the planning process. Meeting minutes as well as additional planning background information and notes are documented in the project folder.

This strategic plan was approved by the Board of Health of the Canton City Health Department by Resolution 2020-10 on November 23, 2020.

This strategic plan will be reviewed at least annually, by July 1 of each year by the Strategic Planning Committee and the Board of Health. During these reviews, the goals and objectives may be changed depending on the needs of the department. Contact James M. Adams, RS, MPH, Health Commissioner at (330) 489-3231 for questions and additional information regarding this plan.

## Mission, Vision and Values

The Department's Mission is:

**Working together to prevent the spread of disease, promote health, and protect the public from harm.**

This mission is a continuation of the past mission statement. This was decided based on input from our community, stakeholders, partners, staff, the planning committee, and review with the Board of Health.

The Department's Vision is:

**Healthy neighborhoods, healthy neighbors, healthy families.**

This vision statement identifies the department's role in advancing the community's health to an ideal future state. It reflects the department's goal of ensuring a future of improved and equitable health outcomes for everyone.

The Department's Values are:

- Quality – Efficiency and effectiveness in our programs.
- Equity – Focusing resources where they are needed most.
- Service – Ask, listen, and respond to the needs of the community.
- Trust – Inclusive, accountable, and transparent in all we do.

The department identified these values to help guide its work in the community in the previous plan and refined them in this plan.

## Risk Analysis

A Strengths, Weakness, Opportunities, and Threats (SWOT) analysis was completed by the planning team on September 10, 2020. The results of that analysis are listed below.

### Strengths

- Dedicated staff who are invested in the community.
- Accredited, delivering programs in accordance with nationally recognized standards
- Wide reach with programs that reach outside Canton City and Stark County
- Strong community partnerships that increase our reach and quality of our services
- Good use of technology
- Strong relationship with the community and community leadership
- Community outreach programs that enable our neighbors to participate in programs
- A dedicated Board of Health who is committed to improving health and equity

### Weaknesses

- Staff are retiring and we are losing institutional knowledge
- Budget uncertainty, especially due to the COVID-19 pandemic
- The department is monolingual, with no staff trained to interpret
- Cultural competency in the department is perceived as low
- The department has a low presence in local school career programs
- No term-limits for the Board of Health
- Lack of interest from qualified candidates for many positions
- Lack of promotion opportunities for staff
- Department pay is perceived as low compared to other departments of health
- The building is old, in disrepair and too small for our needs
- There is a lack of awareness of training opportunities available to staff

### Opportunities

- Offer job shadowing to applicants for open positions
- Better marketing of job availability
- Develop a buddy system for new hires
- Promotion of public health as a career in community cultural centers
- Partner with local universities to improve public health programs
- Offer an expanded internship program and identify specific opportunities for interns
- Proactively seek increased input from the community and our partners
- Offer more health education and injury prevention programs

## Threats

- Distrust of government and programs
- Increased political polarization
- Efforts to undermine public health services
- People leaving public health as a career
- Racial disparities in the community
- Lack affordable housing and home ownership
- Increasing number of food deserts
- Decreasing city population
- Fear and distrust of current policing policies
- COVID-19
  - Taking resources away from other programs
  - Increased isolation and threat to mental health
  - Threat of mass staff illness

## External Factors

- The COVID-19 pandemic caused by the SARS-CoV-2 virus continues to dominate the conversation in public health. While the pandemic has increased the public's awareness of public health and its importance, prevention and control of the disease continues to be a drain on department resources and a burden on the community.

## Equity

During the data and risk analysis, equity was identified as an overarching theme. Social determinants of health were explored, and problems were identified in each of the five determinant areas. Secondary data shows that for our community:

- African American household income is nearly half that of Caucasians ([link](#))
- In Canton's poorest neighborhoods over 70% of households live in poverty ([link](#))
- Over 6% of families are working poor, exceeding the national average by 33% ([link](#))
- African American incarceration rates are five times the overall ([link](#))
- Vacant homes account for 14% of properties while 40% of residents are rent burdened ([link](#))
- African American secondary education achievement is nearly half that of Caucasians ([link](#))
- Nearly 14% of Canton's families experience food insecurity ([link](#))
- The number of SNAP and WIC authorized grocery stores has declined by 10% and access to fast food choices has increased by the same amount ([link](#))
- SNAP redemptions have decreased by 41%, benefits have decreased by 40% and program participation has decreased by 3% ([link](#))
- The number of recreation and fitness facilities available has decreased by 13% ([link](#))

Because inequities were pervasive in all areas, the committee decided that all strategic priorities must consider equity as a primary factor.

## Strategic Priorities

Using information from 1) the State of Ohio Health Improvement Plan ([SHIP](#)), the 2) Stark County Community Health Needs Assessment ([link here](#)), the 3) Stark County Community Health Improvement Plan ([link here](#)), as well as input from our community, partners and staff, the following strategic priorities were identified. Within each strategic priority, several goals and objectives were developed. Every attempt was to make the objectives specific, measurable, achievable, relevant, and time based. Where possible, benchmarks for performance were identified as well as performance measurement recommendations. Goals identified with a \* were also identified in the SHIP. Goals identified with a + were identified in the Stark County Health Improvement Plan.

A more detailed Action Plan is included as part of the plan as Appendix A. The action plan further identifies specific actions (steps) and responsibilities for the implementation of this strategic plan.

### Healthy Neighborhoods

1. Increase the cleanliness of neighborhoods \*
2. Increase access to healthy food choices \*+
3. Increase access to safe, affordable, and quality housing \*

### Healthy Neighbors

1. Increase utilization of department services by community members who do not speak English as their primary language.
2. Increase the number of people who report regular participation in physical activity \*+
3. Decrease the rate of STI spread in Canton City

### Healthy Families

1. Decrease the rate of infant mortality and disparities in birth outcomes. \*+
2. Increase the rate of childhood vaccinations
3. Develop a health education program at CCPH

The strategic plan will be used to guide specific division work plans. Work plans will incorporate the specific objectives and goals as delineated in the Action Plan (see Appendix A). Copies of the strategic plan will be posted on the department website and made available to distribution to staff, Board of Health members, and the public as requested.

The objectives and goals in this strategic plan will be incorporated into the department's performance management system. The performance management system is described in policy 800-999. See that document for further information on tracking, reporting, and updating of the strategic plan and associated action plan.

## Appendix A – Action Plan

This appendix is under development at this time.

## Appendix B – Strategic Planning Workgroup Members and Meeting Schedule

The following is a list of the Strategic Planning Workgroup Members.

<b>Member</b>	<b>Job Title</b>	<b>Division</b>
Jim Adams	Health Commissioner	Vital Stats/Administration
Amanda Archer	Director/Epidemiologist II	OPHII
Annie Butusov	Director	Environmental Health
Danielle Grimm	Executive Assistant	THRIVE
Linda Morckel	Monitoring & Inspections Supervisor	Air Pollution Control
Amanda Morningstar	Nurse Practitioner/Nursing Supervisor	Nursing
Dea Most	WIC Dietitian	WIC
Robert Knight	Performance Improvement and Accreditation Coordinator	OPHII

The workgroup conducted meetings on 9/11/2019, 10/2/2019, 11/5/2019, 12/13/2019, 2/19/2020, 7/16/2020, 8/18/2020, 9/3/2020, 9/10/2020, 9/17/2020, 9/24/2020, 10/1/2020, 10/8/2020, 10/15/2020, 10/22/2020, 10/28/2020 and 11/5/2020. The meeting minutes as well as additional planning background information are documented in the project folder.

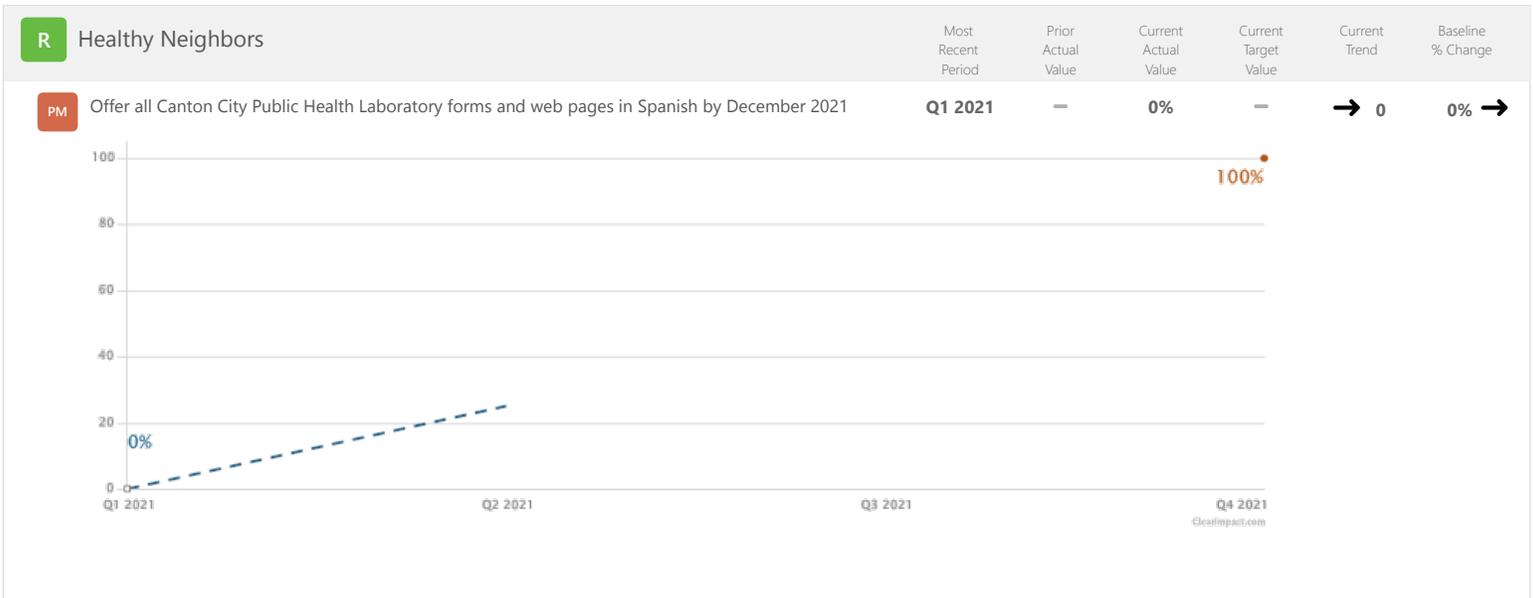
# Strategic Plan 2021 - 2023

Canton City Public Health's strategic plan covers the period January 1, 2021 to December 31, 2023.

This plan is intended to guide our programs and to supplement and align with the state and community health improvement plans. The operating divisions will use this strategic plan as they develop their own work plans. This plan is intended to meet the Public Health Accreditation Board Standards and Measures 5.3 (PHAB Standards version 1.5).

This plan was developed using a series of internal planning meetings with the Strategic Planning Committee of the Canton City Health Department. Department staff and community partners were consulted during the planning process. Meeting minutes as well as additional planning background information and notes are documented in the project folder.

This strategic plan was approved by the Board of Health of the Canton City Health Department by Resolution 2020-10 on November 23, 2020.



## Story Behind the Curve

Studies suggest that those with limited-English proficiency have significantly worse access to care and health outcomes compared to those that only speak English ([link](#)). Canton City Public Health recognizes that the availability of information in languages other than English will have an affect on the ability of those with limited-English proficiency to obtain department services.

## Partners

- Department staff
- Canton City IT Department

## What Works

Provision of language assistance services to clients and training of providers in cultural competence are means by which systems could reduce linguistic barriers, improve access to care, and ultimately improve health status for these vulnerable populations ([link](#)).

## Action Plan

- Catalog all forms in need of translation – assigned to Krys Henning – deadline 4/30/21
- Catalog all web pages in need of translation – assigned to Krys Henning – deadline 4/30/21

- Redesign/update forms in English as needed – assigned to Krys Henning – deadline 6/30/21
- Redesign/update web pages in English as needed – assigned to Krys Henning – deadline 6/30/21
- Translate forms to Spanish - assigned to Kayleen Knight – deadline 9/30/21
- Translate web pages to Spanish - assigned to Kayleen Knight – deadline 9/30/21
- Make forms and pages available to public - assigned to Krys Henning – deadline 12/30/21
- Advertise new pages/forms - assigned to Krys Henning – deadline 12/30/21



## Story Behind the Curve

Studies suggest that those with limited-English proficiency have significantly worse access to care and health outcomes compared to those that only speak English ([link](#)). Canton City Public Health recognizes that the availability of information in languages other than English will have an affect on the ability of those with limited-English proficiency to obtain department services.

## Partners

- Department staff
- Canton City IT Department
- VitalCheck

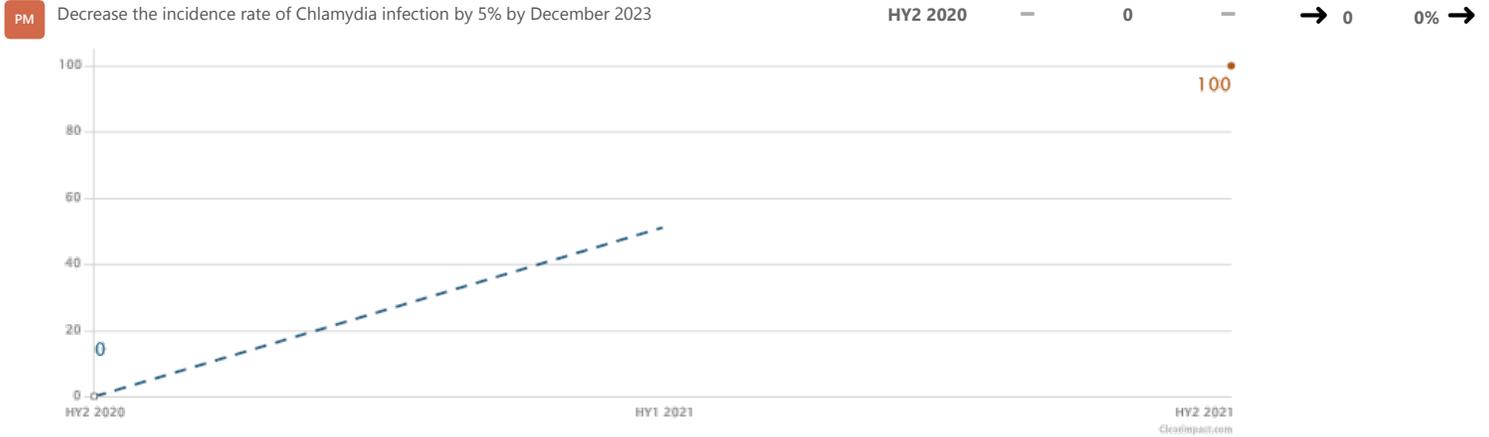
## What Works

Provision of language assistance services to clients and training of providers in cultural competence are means by which systems could reduce linguistic barriers, improve access to care, and ultimately improve health status for these vulnerable populations ([link](#)).

## Action Plan

- Catalog all forms in need of translation – assigned to Sean Green – deadline 4/30/21
- Catalog all web pages in need of translations – assigned to Sean Green – deadline 4/30/21
- Contact VitalCheck about offering ordering process in Spanish – assigned to Christi Allen – deadline 4/30/21
- Contact IT about offering ordering process in Spanish – assigned to Christi Allen – deadline 4/30/21
- Redesign/update forms in English as needed – assigned to Sean Green – deadline 6/30/21
- Redesign/update web pages in English as needed – assigned to Sean Green – deadline 6/30/21
- Translate forms to Spanish – assigned to Kayleen Knight – deadline 9/30/21

- Translate web pages to Spanish – assigned to Kayleen Knight – deadline 9/30/21
- Make forms and pages available to public – assigned to Sean Green – deadline 12/31/21



## Story Behind the Curve

If left untreated, common STIs may cause complications, including pelvic inflammatory disease, ectopic pregnancy, postpartum endometriosis, infertility, and chronic abdominal pain in women; adverse pregnancy outcomes, including abortion, intrauterine death, and premature delivery; neonatal and infant infections and blindness; urethral strictures and epididymitis in men; genital malignancies; proctitis, colitis, and enteritis in MSM; arthritis secondary to gonorrhea and chlamydia; liver failure and liver cancer secondary to hepatitis B virus (HBV); myelopathy and lymphoma or leukemia due to human T-cell lymphotropic virus type 1; and central nervous system disease or meningoencephalitis secondary to syphilis or herpes simplex virus (HSV) infection. (link)

## Partners

- CCPH Nursing Division
- CCPH Public Information Officer
- Social media outlets
- CCPH Quality Improvement Committee
- Asian Translation Group

## What Works

Studies of the publications using social media for sexual health promotion have identified promising results, and the evidence for positive effects of social media interventions for promoting sexual health is increasing. (link)

## Action Plan

- Develop a customer feedback survey to determine perceived barriers to community for obtaining free condoms and how to more effectively reach community – assigned to HIV Prevention Team – deadline 6/1/21
- Translate survey to Spanish – utilize Asian Translation Group – deadline 6/30/21
- Post survey online, advertise via social media and flyers with QR codes – assigned to HIV Prevention Team and PIO – deadline 6/30/21
- Analyze results – assigned to Epidemiologist – deadline 9/1/21
- Determine if a QI project is needed for messaging methods – assigned to HIV Prevention Team Lead – deadline 9/15/21
  - If needed, conduct QI project – assigned to QI Committee – deadline 10/31/21

- Implement community messaging based on survey results – assigned to HIV Prevention Team – deadline 11/1/21
- Re-survey community to gauge effectiveness of messaging – assigned to HIV Prevention Team – deadline 12/31/21
  - Repeat above steps, as needed – assigned to HIV Prevention Team Lead – deadline 1/31/22

R Healthy Families		Most Recent Period	Prior Actual Value	Current Actual Value	Current Target Value	Current Trend	Baseline % Change
PM	Develop a Health Education program at Canton City Public Health by December 2021	Q4 2020	–	0%	–	→ 0	0% →



### Story Behind the Curve

Health education programs help empower individuals and communities to live healthier lives by improving their physical, mental, emotional and social health by increasing their knowledge and influencing their attitudes about caring for their well-being (link).

### Partners

- Department staff
- Board of Health
- Canton City Civil Service

### What Works

Health education focuses on prevention, increasing health equity, and decreasing negative health outcomes such as availability and accessibility of health services, benefiting all stakeholders (link).

### Action Plan

- Budget to hire a health educator – assigned to Christi Allen – deadline 4/1/21 – awaiting city council approval
- Write a job description and submit for board approval – assigned to Amanda Archer – deadline 4/30/21
- Revise OPHII position schedule and submit for board approval – assigned to Christi Allen – deadline 4/30/21
- Submit position request to admin to get job posted – assigned to Amanda Archer – deadline 5/31/21
- Submit job posting to community organizations – assigned to Sean Green – deadline 5/31/21
- Select applicants then schedule and perform interviews – assigned to Amanda Archer – deadline 6/30/21
- Select final applicants, submit for board approval and complete onboarding – assigned to Amanda Archer – deadline 7/31/21

PM	Increase the rate of children that are current on the recommended ACIP vaccination schedule upon school admission by 5% by December 2023	–	–	–	–	–	–
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## Story Behind the Curve

The impact of vaccines on the inequity of those living in poverty is high. Studies suggest that the vaccine programs provide the poor with both health and financial benefits. Including such equity impact in the health economic modeling of vaccines would allow policy decisions to be targeted to the most vulnerable in society. ([link](#))

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### Partners

- Canton City Public Health
- Canton City School District

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### What Works

Studies suggest that for communities, social media including Twitter may one day help health systems and public health departments more effectively challenge vaccine misinformation, while concurrently tracking outbreaks. As more is learned about each of these approaches in isolation, research should increasingly turn to understanding how best to integrate community, family, and provider-directed approaches that may synergistically reduce the tragic consequences of vaccine-preventable disease. This combined approach is likely to prove most effective in reaching the goals of Healthy People 2020 and limiting outbreaks of vaccine preventable diseases that continue to be observed in the United States. ([link](#))

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### Action Plan

- Develop a customer feedback survey to determine perceived barriers to getting kids vaccinated – assigned to GV grant team – deadline 6/1/21
- Translate survey to Spanish – assigned to – 6/30/21
- Post survey online, advertise via social media and flyers with QR codes – assigned to Nursing Office Manager and PIO – deadline 6/30/21
- Survey school nurses to determine their perception of barriers preventing kids from getting vaccinated – assigned to Barb Butler – deadline 8/30/2021
- Analyze results – assigned to Epidemiologist – deadline 9/1/21
- Determine if a QI project is needed for messaging methods – assigned to GV Grant Supervisor – deadline 9/15/21
  - If needed, conduct QI project – assigned to QI Committee – deadline 10/31/21
- Implement community messaging based on survey results – assigned to GV grant team – deadline 11/1/21
- Re-survey community to gauge effectiveness of messaging – assigned to GV grant team – deadline 12/31/21
  - Repeat above steps, as needed – assigned to GV Grant Supervisor – deadline 1/31/22

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PM

Increase access to healthy food choices for mothers and children by maintaining at least 90% of monthly WIC caseload through December 2023

## Story Behind the Curve

WIC provides nutritious foods, nutrition education, breastfeeding support, and referrals to health care and social services for millions of low-income families, and it plays a crucial role in improving lifetime health for women, their infants, and young children. Part of the nation's nutrition safety net for over 45 years, WIC now serves over 6 million pregnant and post-partum women, infants, and children through their fifth birthday. ([link](#))

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### Partners

- Stark County WIC staff
- Stark County WIC participants

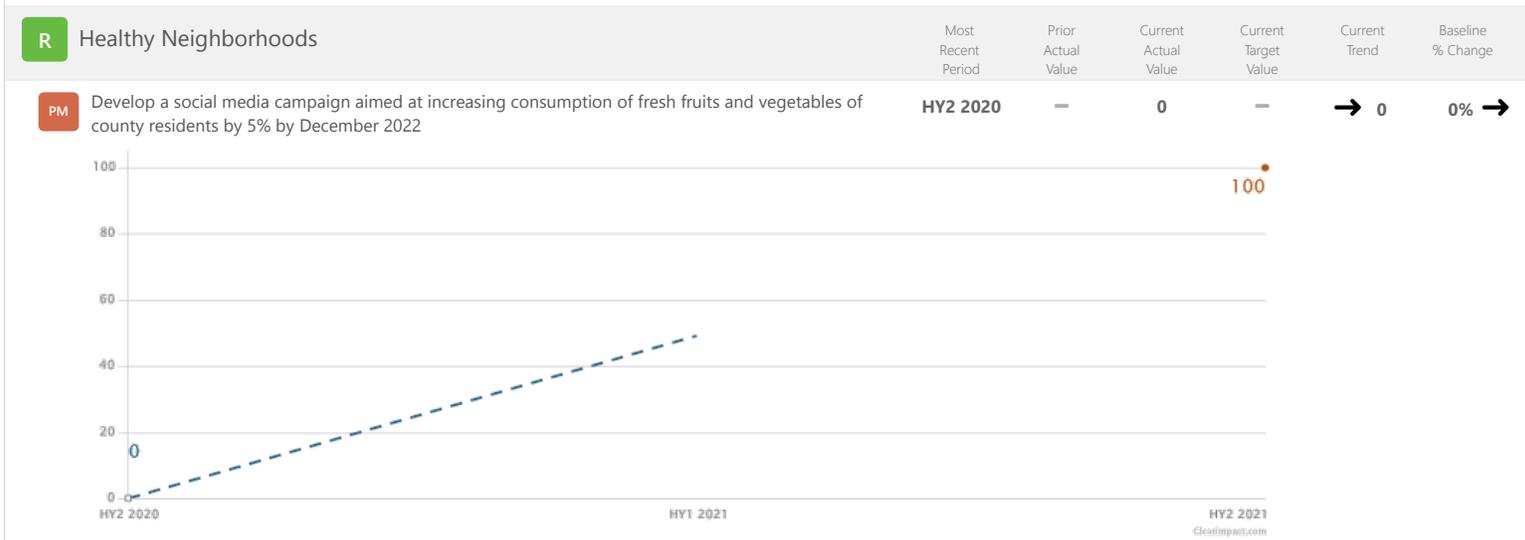
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### What Works

Extensive research has found the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) to be a cost-effective investment that improves the nutrition and health of low-income families — leading to healthier infants, more nutritious diets and better health care for children, and subsequently to higher academic achievement for students. As a result of the research documenting WIC’s effectiveness, Administrations and Congresses of both parties have provided sufficient funding since 1997 to ensure that WIC can serve all eligible low-income pregnant women, infants, and young children who apply for it. (link)

## Action Plan

- Complete regular outreach activities & report to WIC Director within the same month - assigned to WIC Staff - due monthly
  - Record all reported outreach in the Quarterly Activity Reports submitted to the State WIC office - assigned to WIC Director - due quarterly
- Should complete at least 1 outreach activity each quarter - assigned to CCPH WIC Health Professional Staff - due quarterly
- Complete at least two outreach activity per year - assigned to CCHD WIC Breastfeeding Support Staff (Breastfeeding Coordinator and Peer Helpers) - due annually
- Complete at least one outreach activity per quarter - assigned to Stark WIC Director - due quarterly
- Update staff (CCPH and Project Supervisors) at least quarterly on assignments and goal progress - assigned to WIC Director - due quarterly



## Story Behind the Curve

Environmental justice is concerned with an equitable distribution of environmental burdens. These burdens comprise immediate health hazards as well as subtle inequities, such as limited access to healthy foods.

## Partners

- Stark County WIC program
- Canton City Public Information Officer
- Stark County WIC participants
- Social media outlets
- Social media subscribers

## What Works

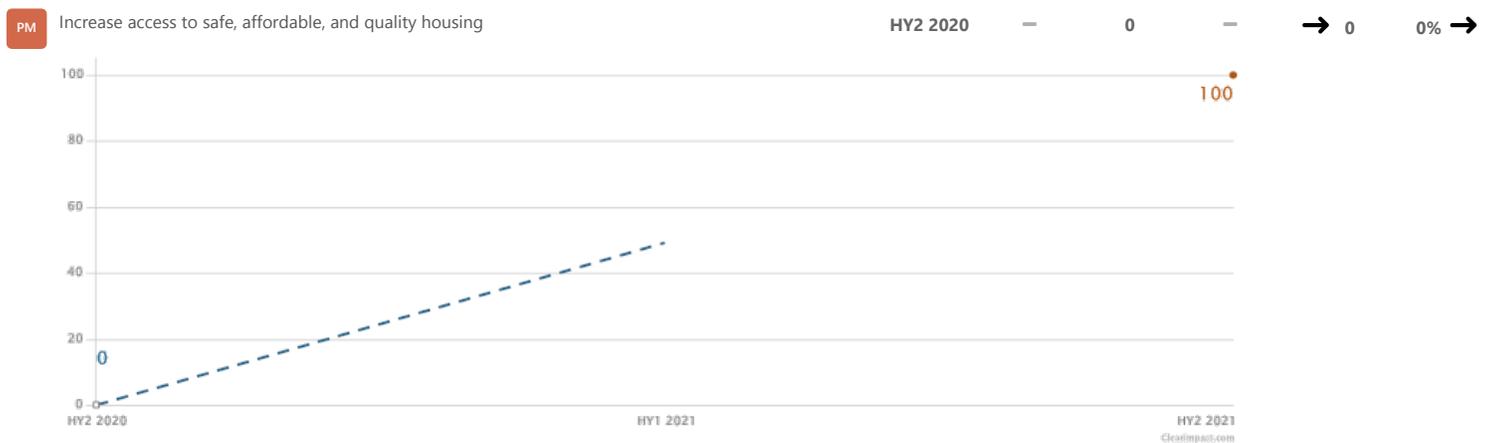
The impact of neighborhood design on residents' health has become a focus of research interest. Results from these studies have led the environmental justice movement to expand its concerns beyond the unequal distribution of environmental hazards to issues of public health, such as obesity. Low-income and racial/ethnic minority populations have substantial environmental challenges to overcome to make healthy dietary choices and to maintain a healthy body weight.

The disproportionate distribution of food sources that contributes to the development of unhealthy behaviors among these communities and the consequent disease burden deeply affect not only individuals and families, but also society as a whole. (link)

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## Action Plan

- Seek input from community about campaign. Develop, post and analyze survey. - assigned to WIC staff - deadline 4/30/21
  - What is an effective message? What fruits & veg? What prevents you from eating more? Etc
- Develop a posting schedule - assigned to WIC staff - deadline 4/30/21
- Coordinate with PIO, THRIVE and other partners to post messages to department social media and other selected outlets - assigned to WIC staff - deadline 12/31/21



## Story Behind the Curve

Clients enrolled with and actively receiving services from a THRIVE community health worker will be connected to Homeless Navigation to complete its housing screen and if eligible for community based housing assistance program will be enrolled. If client does not meet Homeless Navigation guidelines CHW will refer to Community Legal Aid for assistance and enrolled in TBRA program. Clients who have exhausted other community based programs but still need assistance will be referred to CLA for follow up and enrollment in TBRA.

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## Partners

Utilization of existing community housing programs

Representatives from Stark Housing Network, Homeless Navigation, shelters and Community Legal Aid on SDOH Housing Team.

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## What Works

Efficient use of existing community resources; timely connection and support to individuals and families to programs that will prevent evictions, rent arrears, increased stress and improved skills in budgeting and empowerment in working with landlords to prevent future housing-related issues.

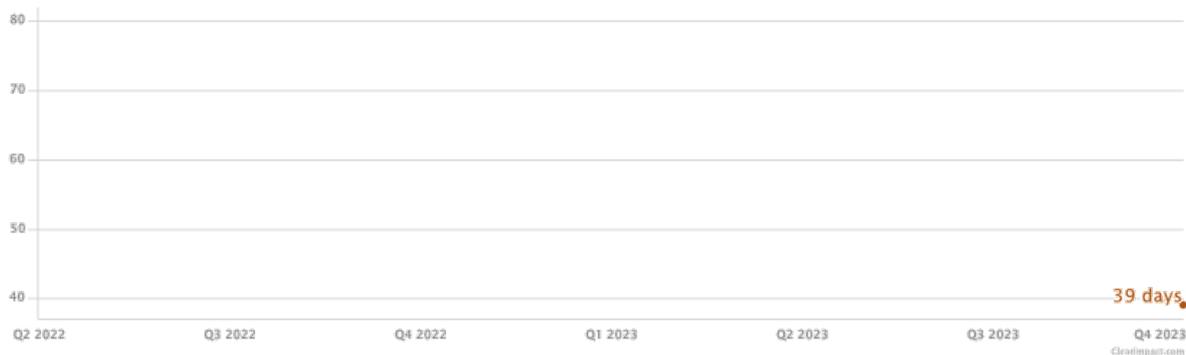
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## Action Plan

- Identify pregnant women working with THRIVE CHW who are precariously housed and/or experiencing rent, utility arrears, landlord issues. - assigned to SDOH Team & YWCA Director, NN, and THRIVE CHW's - deadline monthly

PM By December 2023, decrease the time to resolve non-compliant neighborhood nuisance complaints by at least 50% **Q1 2021** — **78 days** — **→ 0** **0%** →

Data Source: See Click Fix



## Story Behind the Curve

For the prior two-year period, the average number of days to resolve a non-compliant neighborhood nuisance complaint was 78. Canton City Public Health. Studies suggest that neighborhood factors explain a moderate to substantial portion of the racial disparities in health outcomes. Addressing factors like environmental nuisance complaints in a timely manner will have a positive impact on the long-term health outcomes of neighborhood residents.

1 - <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2614884/>

## Partners

Canton City Public Health is proud to work with our city's neighborhood associations and other city departments, like Canton City Code enforcement, to ensure that city residents receive the best service that we are able to offer.

## What Works

Canton City Public Health conducted a quality improvement project to address factors preventing timely resolution of neighborhood nuisance complaints when property owners and/or tenants did not comply with Board of Health orders to abate these nuisances. Root cause analysis revealed that several factors potentially contributed to this issue. Included in the potential causes were:

- Incomplete and artificially low billing for services may have encouraged property owners to allow CCPH to perform cleanup services
- Lengthy notification processes could delay when cleanups were started
- Repeat offender were not routinely referred for prosecution

To resolve these issues, CCPH will implement several solutions including a study of billing practices, a study of the notification process and a cooperative process with the city's legal department to ensure that repeat offenders are prosecuted when appropriate.

## Action Plan

- Complete a QI project based on this objective - assigned to Rob Knight, completed

- Implement changes identified during project
    - Revise billing to reflect prevailing rates identified for equipment rental and actual costs for all staff on-site - assigned to Gus Dria, completed
    - Submit resolutions to Canton City Board of Health - assigned to Rob Knight, completed
      - Property owners who are non-compliant twice in any 12-month period are required to be referred for possible prosecution
      - Sanitarian and Health Commissioner may negotiate a reduce rate cleanup fee in order to quickly resolve a nuisance
  - Use approved changes for three months following approval - assigned to Gus Dria, in progress
  - Measure for effectiveness - assigned to Rob Knight
-

# Stark County Job & Family Services 2021 Subsidized Employment Program (SEP)

## Do you need to expand your workforce ?

Once again SCJFS is offering a subsidy for hiring new employees. The program is designed to assist the employer in defraying the cost of hiring and providing training to a new employee.

### ELIGIBILITY CRITERIA

**221 Third St. S.E.  
Canton, Ohio  
44702**

**For more information  
Contact:**

**330-451-8469  
OR  
330-451-8454**

- The position must be permanent full-time or part-time employment.
- The participant must be a TANF eligible custodial parent or a non-custodial parent with a current child support order.
- The participant shall be paid the same rate as other employees doing similar work.
- The participant shall be entitled to the same employment benefits as other employees of the organization.
- The SCJFS, employer and participant shall enter into a written contract.

### EMPLOYER GUIDELINES

- The employer will receive a monthly subsidy of \$1000 for hiring full-time. Full-time employments for purposes of this program are 30 hours or more per week.
- The employer will receive a monthly subsidy of \$600 for hiring part-time. Part-time employment for purposes of this program shall be a minimum of 20 hours per week and less than 30 hours per week.
- The participant must work a minimum of 2 weeks per month for an employer to receive a subsidy for that month.
- The program is limited to 6 months per participant.
- The program will continue as long as funds are available.





**Public Health**  
Prevent. Promote. Protect.

Canton City Public Health

**Board of Health Meeting**  
Monday, March 22, 2021 @ 12:00pm – Board Room  
**Division Reports**

- a. Nursing /WIC
- b. Laboratory
- c. THRIVE – Kent State University Evaluators Project Presentation
- d. Environmental Health
- e. Vital Statistics
- f. Fiscal
- g. Health Commissioner
- h. Accreditation Team

# Canton City Public Health

March 2021 Report (Meeting 3/22/21)

**NURSING DIVISION**

Jon Elias, M.D.  
Medical Director

Diane Thompson, R.N., M.S.N., DON  
Nursing Division

## CLINIC SERVICES

	# of Clinics	# Attending	YTD
Immunization Clinic	1	1	2
Tuberculosis (TB) Mantoux	0	0	0
Travel	0	0	0
S.T.I.	0	0	1
C.T.R. Clinic	0	0	0
C.T.R. – # Qualified & Tested		0	0
C.T.R. – Appointments		0	0
Field/Outreach Testing		0	0
SWAP	0	0	0
SWAP Testing		0	0
SWAP Vaccination Clinic	0	0	0
Hepatitis A Outbreak Clinic	0	0	0
COVID-19 Clinics	192	3,509	5,096

## DENTAL SEALANT PROGRAM

	Students Screened	YTD Screened	Students Sealed	YTD Sealed
Dental Sealants	0	0	0	0

## HIV TESTING

	Month	YTD	HIV+ Month	HIV+ YTD	Discordant	Discordant YTD
Tests Performed	2*	2*	0	0	0	0
Results Given	2*	2*	0	0	0	0

\*Correction

## HIV INFECTION

	HIV (900) Month	AIDS (950) Month	HIV (900) YTD	AIDS (950) YTD
Canton City	0	0	0	0
Stark County*	1	0	1	0

\* excludes Canton City Residents

**HIV Infection includes all persons infected with HIV and/or symptomatic of HIV related disease. AIDS reports include only those who meet the CDC AIDS definition.**

**SPECIAL PROGRAMS**

	SESSIONS/VISITS/ CONTACTS		# ATTENDING	
	Month	YTD	Month	YTD
Nursing School Students/Physician Affiliations			0	0
STD/HIV Programs (Quest) – Goal 8 programs per year				
Communicable Disease Programs	0	0	0	0
Health Promotions / Fairs (Goodwill Parenting talks)	0	0	0	0
Get Vaccinated (GV) Ohio Grant – Maximizing Office Based Immunization Programs (MOBI) & Teen Immunization Education Sessions (TIES) – Goal of 31 per grant year July 1 <sup>st</sup> – June 30 <sup>th</sup>	0	0		
Get Vaccinated (GV) Ohio Grant – Immunization Quality Improvement for Providers (IQIP) – Goal of 10 per grant year July 1 <sup>st</sup> – June 30 <sup>th</sup>	0	3		
DIS Interviews and/or Visits	4	10		
Linkage to Care visits	0	0		
PAPI (Prevention Assistance Program Interventions) referrals	2	4		
PAPI (Prevention Assistance Program Interventions) enrollment	0	1		
Bureau for Children with Medical Handicaps (BCMh) and PHN Consultative Service Home Visits/Contacts [Goal – 90% of caseload will be contacted annually July 1 <sup>st</sup> - June 30 <sup>th</sup> ]	0	0		

**WIC Division  
Monthly Caseload Report**

Assigned Caseload for Canton WIC FY21: 2,087

Assigned Stark Project Caseload FY21: 5,431

WIC Fiscal Year 2021 October 2020 – September 2021		
	Canton City	Total for Stark Project
October 2020	1,953	5,120
November 2020	1,928	5,062
December 2020	1,930	5,029
January 2021	1,885	4,973
February 2021	1,806	4,837

# Canton City Health Department

February 2021 (Meeting 3/22/2021)

## LABORATORY

### Water

Sample Type	Number of Tests	Positive Tests	YTD Samples Tested	YTD Samples Positive	Prior 3 Yrs, YTD Avg	Prior 3 Yrs, YTD Positive Avg
Private	115	11	192	24	192	50
Public	17	0	50	0	69	7
Commercial	17	0	33	0	23	0
HPC	17	0	33	0	31	1
Other*	48	0	48	0	0	0

Our method for counting positive test results has changed, we are now using applicable ODH, ODA, and EPA rules.

\*In addition to our weekly Sand Rock testing, we performed Quarterly Cap and Bottle testing for Sand Rock this month.

### Clinic

Test Name	Number of Tests	Positive Tests	YTD Samples Tested	YTD Samples Positive	Prior 3 Yrs, YTD Avg	Prior 3 Yrs, YTD Positive Avg
Gonorrhea-smear	0	0	0	0	34	3
N.G.U.	0	0	0	0	34	22
Gonorrhea-Gene amp.	0	0	0	0	119	5
Chlamydia-Gene amp.	0	0	0	0	119	12
Syphilis Serology Qualitative	0	0	2	2	115	6
Syphilis Serology Quantitative	0	0	1	1	6	6
Candida	0	0	0	0	38	5
Gardnerella	0	0	0	0	38	20
Trichomonas	0	0	0	0	38	4
Pregnancy-urine	0	0	0	0	3	0
HIV screen	2	0	2	0	64	2
HIV Confirmatory	0	0	0	0	2	1
Blood Lead	0	0	0	0	0	0
HCV Antibody screening	0	0	0	0	19	1

Proficiency testing for chlamydia/gonorrhea genetic amplification and the gram stain were completed this month.

### Miscellaneous

MISCELLANEOUS:	Number of Tests	Positive Tests	YTD Samples Tested	YTD Samples Positive	Prior 3 Yrs, YTD Avg	Prior 3 Yrs, YTD Positive Avg
Pollen counts	0	0	0	0	0	0
Other Exams	0	0	0	0	1	1

# **Toward Health & Resiliency for Infant Vitality & Equity (THRIVE) Stark County Public Health Program Evaluation**

**Dr. Peter Leahy, PhD**

*Professor of Health Policy and Management*

**Dr. Bethany Lanese, PhD**

*Professor of Health Policy and Management*

**Dr. Abbey Eng, PhD**

*Professor of Biostatistics*

**Stephanie A.G. Abbruzzese, MPH**

*PhD Student Prevention*

## Agenda

- ✓ Evaluation Plan – Propensity Score Matching: selecting the design, the variables & the process
- ✓ Matches & Follow-up Analyses
- ✓ Limitations
- ✓ Future Directions & Recommendations

## HUB Data

- Care Coordination System (CCS) (2017 - 2019)

## Birth Certificate Data

- Ohio Department of Health Vital Statistics for Stark County Births (ODH) (2017 - 2019)

## Program Evaluation: Propensity Score Matching

### Why use this research technique?

- THRIVE participation is self-selecting; therefore, random allocation to intervention and comparison groups is not possible to develop a counterfactual
- Propensity Score Matching is considered a strong alternative to random assignment when interventions are self-selected.
- We constructed a comparison group for THRIVE using this process.

## Propensity Score Matching – How Does it work?

- A statistical process for creating a comparison group using a 1 to 1 match between Stark County THRIVE women and non-THRIVE birth mothers over the same time period by matching them on variables, some of which may affect birth outcomes
- The technique allows for a construction of a group of non-THRIVE Stark County birth mothers similar to each THRIVE mother using a nearest “neighbor match” to propensity score – the score indicating a propensity of self-selecting into THRIVE based on similarities of the selected variables.
- Once the comparison group is constructed, we can test for any statistically significant differences between the THRIVE and the comparison women on the desired outcomes for this phase of evaluation: Prenatal care visits, care utilization, & breastfeeding actions

## Outcomes of Interest

### Predictor of Birth Outcomes

**Number of Prenatal Care + Month of Prenatal Care Access =  
Adequacy of Prenatal Care Utilization**  
(Adequate to Adequate+)

### Predictors of Infant Health and Survival (Birth and Behavioral Outcomes of Interest)

**Birthweight**  
(Greater than 2,500 grams)

**Gestational Age**  
(Less Pre-term Birth)

**Breastfeeding**  
(at Discharge and Exclusively  
within first year)

# CONDUCTING THE MATCHING PROCESS

## THRIVE

THRIVE Clients were removed prior to analysis if:

- No initial pregnancy checklist could be matched to an ID.
- Twins/Multiples births
- Clients who left THRIVE program prior to giving birth
- Missing data in proposed match variables\*
- Partial census tracts or tracts outside of Stark County

2017	2018	2019	Total
52	158	108	318

## Potential Comparison

Potential Comparisons were removed if:

- Twins/Multiples births
- Missing data in proposed match variables\*
- Partial census tracts or tracts outside of Stark County

2017	2018	2019	Total
3766	3671	3445	10,882

- Total Resultant Cases = 11,200 singleton births
- Nearest Neighbor 1:1 Matching Technique Employed
- Matches by birth quarter of birth year

## Propensity Score Matching Variables Used

Maternal Age

Race

Census Tract

WIC Enrollment

Education

Poverty Rate

Birth Quarter

Previous Live Birth

**Table 1.1: Matching Variables for THRIVE and Comparisons by Year (2017-2019)**

Variable	2017				2018				2019			
	THRIVE* (n = 50)		Comparison (n = 50)		THRIVE (n = 148)		Comparison (n = 148)		THRIVE (n = 104)		Comparison (n = 104)	
	Mean	(SD)	Mean	(SD)	Mean	(SD)	Mean	(SD)	Mean	(SD)	Mean	(SD)
Age of Mother (years)	23.4	(4.3)	23.2	(4.9)	25.4	(5.2)	24.8	(5.7)	24.6	(6.1)	24.1	(5.8)
Poverty Rate**	33.9	(21.1)	41.1	(13.8)	29.9	(16.9)	35.8	(17.7)	31.6	(18.2)	34.4	(18.6)
	Range	2.4—66.5	13.6—66.5		5.1—70.1	5.1—66.5		3.2—66.5		2.4—70.1		
	n	(%)	n	(%)	n	%	n	%	n	%	n	%
Education Attainment												
Associates Degree+	1	(2.0%)	-	-	12	(8.1%)	9	(6.1%)	2	(1.9%)	1	(1.0%)
< Associates Deg.	49	(98.0%)	50	(100%)	136	(91.9%)	139	(93.9%)	102	(98.1%)	103	(99.0%)
Marital Status												
Married	7	(14.0%)	6	(12.0%)	21	(14.2%)	7	(4.7%)	8	(7.7%)	8	(7.7%)
Unmarried	43	(86.0%)	44	(88.0%)	127	(85.5%)	141	(95.3%)	96	(92.3%)	96	(92.3%)
Race												
Any Race (Black, Bi-racial, etc.)	28	(56.0%)	34	(68.0%)	61	(41.2%)	81	(54.7%)	41	(39.4%)	46	(44.2%)
White	22	(44.0%)	16	(32.0%)	87	(58.8%)	67	(45.3%)	63	(60.6%)	58	(55.8%)
Previous Live Birth												
Yes	32	(64.0%)	36	(72.0%)	93	(62.8%)	91	(61.5%)	59	(56.7%)	56	(53.8%)
No	18	(36.0%)	14	(28.0%)	55	(37.2%)	57	(38.5%)	45	(43.3%)	48	(46.2%)
First-time												
WIC Enrolled												
Yes	41	(82.0%)	44	(88.0%)	126	(85.1%)	141	(95.3%)	96	(92.3%)	96	(92.3%)
No	9	(18.0%)	6	(12.0%)	22	(14.9%)	7	(4.7%)	8	(7.7%)	8	(7.7%)

Note: \*Total THRIVE up to 40 weeks gestational age at enrollment; \*\* Overall poverty rate for Stark County = 14.0%

**Table 1.2: Matching Variables for THRIVE and Comparison Overall, 2017-2019 (N = 604)**

Variable	THRIVE* (n = 302)		Comparison (n = 302)	
	Mean	(SD)	Mean	(SD)
Age of Mother (years)	24.8	(5.4)	24.3	(4.9)
Poverty Rate**	31.2	(18.1)	36.2	(17.5)
	Range	2.4—70.1	2.4—70.1	
	N	(%)	n	(%)
Education Attainment				
Associates Degree+ < Associates Deg.	15	(5.0%)	10	(3.3%)
Marital Status	287	(95.0%)	292	(96.7%)
Married	36	(11.9%)	21	(7.0%)
Unmarried	266	(88.1%)	281	(93.0%)
Race				
Any Race (Black, Bi-racial, etc.)	130	(43.0%)	161	(53.0%)
White	172	(57.0%)	141	(46.7%)
Previous Live Birth				
Yes	184	(60.9%)	183	(60.6%)
First-time	118	(39.1%)	119	(39.4%)
WIC Enrolled				
Yes	263	(87.1%)	281	(93.0%)
No	39	(12.9%)	21	(7.0%)

Note: \*THRIVE enrolled up to 40 weeks gestational age

Overall, of the total 604, there were 63 cases where an infant was either admitted to the NICU, was born pre-term, or was both born pre-term and admitted to the NICU. 19 were NICU only, 25 were pre-term only, and 19 were pre-term and stayed in the NICU.

**Table 1.3: Matching Variables for THRIVE and Comparison First Time Mothers, 2017-2019 (N = 237)**

Variable	THRIVE* (n = 118)		Comparison (n = 119)	
	Mean	(SD)	Mean	(SD)
Age of Mother (years)	21.4	(3.9)	21.1	(4.5)
Poverty Rate	28.0	(17.6)	33.5	(17.1)
	Range	3.2—70.1	3.9—70.1	
	N	(%)	n	(%)
Education Attainment				
Associates Degree+ < Associates Deg.	3	(2.5%)	2	(1.7%)
Marital Status	115	(97.5%)	117	(98.3%)
Married	11	(9.3%)	2	(1.7%)
Unmarried	107	(90.7%)	117	(98.3%)
Race				
Any Race (Black, Bi-racial, etc.)	46	(39.0%)	56	(47.1%)
White	72	(61.0%)	63	(52.9%)
WIC Enrolled				
Yes	105	(89.0%)	111	(93.3%)
No	13	(11.0%)	8	(6.7%)

Note: \*THRIVE enrolled up to 40 weeks gestational age

Out of 237 First Time Births, 11 infants were in the NICU, 11 were pre-term, and 8 were pre-term and admitted to the NICU.

Outcomes for THRIVE and Comparison First Time Births, 2017-2019 (N = 237)	Poverty Rate <14% removed (N = 182)
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Variable	THRIVE* (n = 118)		Comparison (n = 119)		sig.	THRIVE (n = 86)		Comparison (n = 96)		sig.
	Mean	(SD)	Mean	(SD)		Mean	(SD)	Mean	(SD)	
Birthweight (grams)	3174.0	(564.7)	3185.2	(435.6)	-	3241.8	(563.2)	3204.7	(427.3)	-
Preterm Excluded	3267.5	(476.6)	3244.0	(391.7)	-	3311.0	(482.4)	3257.6	(362.4)	-
Number of Prenatal Care Visits**	11.6	(4.3)	10.0	(4.2)	.003	11.7	(4.3)	9.9	(4.4)	.005
	n	(%)	n	(%)		n	(%)	n	(%)	
Pre-term (Yes)	10	(8.5%)	9	(7.6%)	-	5	(5.8%)	7	(7.3%)	-
Low Birthweight (LBW)										
Yes	13	(11.0%)	7	(5.9%)	-	5	(4.6%)	3	(2.7%)	-
No	105	(89.0%)	112	(94.1%)	-	103	(95.4%)	107	(97.3%)	-
Preterm Excluded (Not LBW)	103	(95.4%)	107	(97.3%)	-	78	(96.3%)	88	(98.9%)	-
NICU										
Yes	11	(9.3%)	8	(6.7%)	-	8	(9.3%)	7	(7.3%)	-
No	107	(90.7%)	111	(93.3%)	-	78	(90.7%)	89	(92.7%)	-
Preterm Excluded (No NICU)	102	(94.4%)	105	(95.5%)	-	76	(93.8%)	84	(94.4%)	-
Infant Breastfeeding at Discharge										
Yes	77	(65.3%)	70	(58.8%)	-	57	(66.3%)	53	(55.2%)	-
No	41	(34.7%)	49	(41.2%)	-	29	(33.7%)	43	(44.8%)	-
NICU Excluded (Yes)	75	(70.1%)	65	(58.6%)	-	55	(70.5%)	48	(53.9%)	.028
Breastfeeding Exclusively										
Yes	53	(45.3%)	46	(38.7%)	-	41	(48.2%)	33	(34.4%)	-
NICU Excluded (Yes)	52	(48.6%)	43	(38.7%)	-	40	(51.3%)	30	(33.7%)	.022
Prenatal Care Utilization Adequate-Adequate+	77	(65.3%)	53	(44.5%)	.001	54	(62.8%)	38	(39.6%)	.002

## Findings from Propensity Score Matching Analyses for 2017-2019 for First-time Births

### Frequency of Prenatal Care Visits

- The mean number of prenatal care visits among THRIVE participants as compared to the non-THRIVE group was found to be statistically significantly higher. This was also true for those THRIVE participants living in areas with 14%+ poverty rates
- THRIVE was found to be a predictor of a greater number of prenatal care visits when also accounting for diabetes and race (not shown in table).
  - This remained true when only looking at THRIVE and non-THRIVE pregnancies living in areas with a poverty rate of 14% or greater.
  - When adding enrollment at gestational age 14 weeks or less (with diabetes and race), THRIVE as well as enrollment in this time frame had 2.3 times greater likelihood of having a greater number of prenatal care visits as compared to non-THRIVE participants
- If analyzing for only women/persons of color, THRIVE participation increased the likelihood of a greater number of prenatal care visits (with and without diabetes)

## Limitations

- Inability to determine which women in the comparison group had participated in other pregnancy intervention programs across Stark County
- Inability to determine previous THRIVE participants who did not re-enroll in THRIVE for a subsequent pregnancy and birth
- Inability to determine in which programs clients were simultaneously enrolled
- Inability to account for other unobservable factors which can influence the outcomes of interest

## Research (R) and Program Improvement (PI) Recommendations

Explore postpartum and postnatal experiences.(R)

Examine COVID-19 as a factor in 2020. Add 2021 births to the data set. (R)

Provide an even greater emphasis on neighborhood canvassing in census tracts with the highest poverty rates and further professional development trainings on retention and early recruitment. (PI)

Preterm births, NICU admissions, and other cost burden outcomes such as ER visits for primary care also need to be explored. (R)

Further investigation of program effectiveness in Hispanic LatinX populations as cases allow. (R)

Interpregnancy intervals should be explored as well as the pregnancy experiences of women who had given birth previously in Stark County. (R)

Improving the recruitment of mothers who had previously given birth and strengthening retention methods are recommended. It is hypothesized that longer time spent enrolled as a pregnant client could impact the outcomes of interest because of more opportunities to develop a stronger partnering between CHWs and Clients, more time to educate and emphasize healthy prenatal and postnatal practices, and an earlier opportunity to connect women with unmet medical care and services. (PI)

# Canton City Health Department

February Board Report 03/22/2021

Environmental Health

## **RECYCLE CENTER**

City IT linked old and new cameras together at the Recycle Center. The appointment system is being utilized by 90% of our Recycle Center customers. Appointments can be made by phone or internet, and written information about how to make appointments is provided to all customers who drop off items without appointments. NO customers are turned away if they do not have an appointment. Call 330-489-3327 to schedule or log onto <http://www.timetorecycle.org/hhw-appointments/>.

## **NUISANCE**

The new dump truck is expected to arrive in May. Complaints are increasing as they normally do this time of year, and cleanups are going smoothly.

## **FOOD UPDATES**

The Ohio Department of Agriculture (ODA) released a final statement dated March 12, 2021 about House Bill 404. Food License Renewal Applications have been extended from March 1, 2021 to July 1, 2021. We were advised by ODA to refund all late fees received and have refunded all six of the six late fees paid. Weekly meetings are being held to conduct the FDA Food Safety Program Assessment required by our grant. There are nice Standards to complete, and we have nearly completed Standard 1.

# Canton City Health Department

February Board Report 03/22/2021

**Environmental Health**

## EH DIVISION

The Ohio Department of Health released Orders permitting local fairs to fully open and operate this year. Again, I wish to recognize EH Staff for assisting Nursing and OPHII with vaccination clinics.

Many thanks to our EH Public Health Technicians for repairing the laminate cabinets in Nursing and maintaining the cleanliness of our parking garage downstairs for Health, Tax, and Building/Code Departments.

Best of Luck to Kristen Kennedy. Kristen will be working in Summit County in their wastewater inspection program.

# Canton City Public Health

February Report 2021 (Meeting 3/22/2021)

## VITAL STATISTICS

Certificates Issued	FEB 2021	2021 YTD	2020 YTD
Death Certificates Issued	899	2,244	1,235
Birth Certificates Issued	664	1,346	1,766

*Births Total Residents & Nonresidents	FEB 2021	2021 YTD	2021 YTD
Births	315	585	
Unmarried Parent Births	155	308	53%
Births to Mothers aged 14 and under	-	-	-
Births to Mothers aged 15 - 17	4	10	2%
Births to Mothers aged 18 - 19	13	26	4%
Births to Mothers aged 20 - 24	63	140	24%
Births to Mothers aged 25 - 29	127	213	36%
Births to Mothers aged 30 - 34	79	141	24%
Births to Mothers aged 35 - 39	25	48	8%
Births to Mothers aged 40 - 44	4	6	1%
Births to Mothers aged 45 and over	-	1	0%

Deaths in Canton City	FEB 2021	2021 YTD	YTD Male	YTD Female
Total	186	489	54%	46%
Deaths aged less than 1 day	1	1	0%	100%
Deaths aged less than 1 year	-	2	0%	0%
Deaths aged 1 - 3	-	-	0%	0%
Deaths aged 4 - 9	-	-	0%	0%
Deaths aged 10 - 19	-	-	0%	0%
Deaths aged 20 - 29	2	6	100%	0%
Deaths aged 30 - 39	4	8	38%	63%
Deaths aged 40 - 49	6	14	57%	43%
Deaths aged 50 - 59	22	43	58%	42%
Deaths aged 60 - 69	37	102	58%	42%
Deaths aged 70 - 79	55	146	57%	43%
Deaths aged 80 and over	59	167	49%	51%

Based on the number of births and deaths registered for the month of February 2021.

# Canton City Public Health

March 22, 2021 Board Meeting

COVID-19 FINANCIAL UPDATE

Financial data on revenues and expenses for COVID-19 at the Health Department as of February 28, 2021.

## COVID-19 REVENUES

Received in 2020	\$226,918.76	
Received in 2021	\$291,664.99	As of February 28, 2021
	<u>\$518,583.75</u>	

List of COVID-19 Grants	Grant Award	Revenues Received	Grant Period
1 Ohio Department of Health	\$5,158.53	\$5,158.53	n/a
2 CARES Act Provider Relief Fund	\$17,592.25	\$17,592.25	n/a
3 HealthPath Foundation of Ohio - THRIVE	\$8,750.00	\$8,750.00	n/a
4 Sisters of Charity Foundation - THRIVE	\$4,000.00	\$4,000.00	n/a
5 CO20 CoronaVirus Response Grant	\$92,992.00	\$92,646.31	March 16, 2020 - March 15, 2021
6 CO21 CoronaVirus Response Grant	\$274,678.00	\$261,768.29	March 1, 2020 - December 31, 2021
7 CT20 Contact Tracing Grant	\$245,582.00	\$108,668.37	May 1, 2020 - December 31, 2021
8 CT21 Contact Tracing Grant	\$49,260.00	\$0.00	June 19, 2020 - June 30, 2021
9 EO21 Enhanced Operations Grant	\$202,151.00	\$0.00	February 2, 2021 - July 31, 2022
10 VN21 Vaccine Needs Assessment Grant	\$20,000.00	\$20,000.00	November 1, 2020 - March 31, 2021
<b>TOTAL</b>	<b>\$920,163.78</b>	<b>\$518,583.75</b>	

\*\*Grants in red are complete.

## COVID-19 EXPENSES (not including personnel costs)

Paid in 2020	\$157,373.09	
Paid in 2021	\$38,351.86	As of February 28, 2021
<b>TOTAL</b>	<b>\$195,724.95</b>	

### Health Department Employee's Time on COVID-19

Personnel Costs	COVID-19		Contact Tracing		TOTAL	
	Hours	Dollars	Hours	Dollars	Hours	Dollars
<b>2020</b>	17,656	\$723,748	3,508	\$118,670	21,164	\$842,418
<b>2021</b>						
January	2,662	\$104,403	476	\$13,355	3,138	\$117,758
February	1,900	\$72,462	391	\$10,922	2,291	\$83,384
<b>Total 2021</b>	<b>4,562</b>	<b>\$176,865</b>	<b>868</b>	<b>\$24,277</b>	<b>5,429</b>	<b>\$201,142</b>
<b>TOTAL 2020 &amp; 2021</b>	<b>22,218</b>	<b>\$900,613</b>	<b>4,375</b>	<b>\$142,946</b>	<b>26,593</b>	<b>\$1,043,560</b>

\*\*Missing 5 employees COVID time for February 2021.

### Personnel costs are calculated by the following:

Hours on COVID-19 x Employees hourly rate x fringe rate

Hours represent all hours on COVID-19 (regular hours and comp time earned hours)

Up to 35 employees working on COVID-19 each month.

## **COVID-19**

On March 9, 2020 Ohio recorded its first confirmed case of COVID-19 disease. On March 14, 2020 Governor DeWine signed Executive Order 2020-01D declaring a state of emergency in Ohio due to the rapid spread of the virus that causes COVID-19. And so began our more than year long struggle against a virus that has caused a worldwide pandemic. Millions of cases and over a half a million deaths later, the United States is still responding to this unprecedented public health emergency.

The staff at Canton City Public Health has responded with vigor, professionalism, and compassion to this pandemic. Together we have spent tens of thousands of hours carefully explaining how to stay safe, how to isolate, how to quarantine, how to run our schools, business, and lives in a way that prevents the spread of the virus that causes COVID-19. I cannot be prouder of our staff and the amazing work they have done.

After a year with this virus, we can see how the end game is going to play out. We have embarked on a massive vaccination campaign to vaccinate those most at risk of serious illness from the virus. We can see how our prevention efforts of mask wearing, social distancing, and careful attention to infection control can limit the spread of this disease in the community. We have seen how a community can pull together in a time of crisis and need.

We are near the end of this great trial. As we approach the end, we must gather our strength for a strong finish. We are tired. We are worn out. We need a break. But we must continue for we are near our goal of stamping out this pandemic. Together we will get through this great pandemic, rebuild, and prosper. A bright future lies ahead.



**PHAB Annual Report  
Section I  
Release Date: January 8, 2014**

Accredited health departments are required to submit an annual report to PHAB. The health department will gain access to the Annual Report module in e-PHAB at the beginning of the quarter in which the Annual Report is due. The annual report is due at the end of the quarter in which the health department was accredited.

The Annual Report is comprised of two sections. Section I of the annual report is an opportunity for the health department to report on one or more of the following categories, as appropriate:

1. Circumstances that would potentially jeopardize continued conformity with the standards and measures under which accreditation was initially awarded;
2. Specific measures the Accreditation Committee requested that the health department address in its Annual Report; and
3. Adverse findings or communications related to oversight or control from federal or state funding agencies that indicate the health department is at risk for loss or reduction in those funds. For more information about the meaning of this category, see the definition of high risk grantee in the PHAB Glossary.

After Section I has been completed, the health department should upload it to e-PHAB to be reviewed by PHAB staff. The health department will receive notification that it has access to Section II of the Annual Report or may be requested to provide additional information. On Section II, the health department will provide information related to improvement activities; continuing processes; and emerging public health issues and innovations.

Instructions for Section I: If the health department has nothing to report for any one of those categories, place an X in the box to indicate that there is nothing to report and then skip the rest of the questions associated with that category.

Health Department Name
Canton City Public Health

**Category 1: Circumstances that would potentially jeopardize continued conformity with the standards and measures under which the accreditation was initially awarded.** (This would include updated health department profile information that includes leadership changes and any other changes, such as budget, personnel, governance, or program changes that potentially jeopardize the health department's ability to be in conformity with the standards and measures.)

Does the health department have anything to report on Category 1? <small>(Place an X in the column to the left of the answer.)</small>	
<b>Yes (Answer the questions below)</b>	X <b>No (Skip this section)</b>

Circumstance	Description of the change
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<b>Leadership (e.g., changes in the Health Department Director) – Please provide name and job title</b>	
<b>Budget</b>	
<b>Number of FTE</b>	
<b>Number of employees</b>	
<b>Governance</b>	
<b>Structure (e.g., mergers, transition from stand-alone agency to superagency or vice versa)</b>	
<b>Programs or services that the health department provided at the time accreditation was conferred that it does not provide now</b>	
<b>Other circumstances</b>	

**Please describe how the circumstances listed above might affect the health department's continued conformity with the standards and measures.**

<b>Category 2: Specific measures the Accreditation Committee requested that the health department address in its Annual Report</b>			
<b>Did the Accreditation Committee request that the health department address a specific measure?</b>			
<i>(Place an X in the column to the left of the answer.)</i>			
<input checked="" type="checkbox"/>	<b>Yes (Answer the questions below)</b>	<input type="checkbox"/>	<b>Yes, but the health department has already reported in a previous annual report that it has fully addressed the measure (Skip this section)</b>
<input type="checkbox"/>		<input type="checkbox"/>	<b>No (Skip this section)</b>

	<b>Response from Health Department</b>
<b>First Measure</b>	
Measure Number:	5.2.4 A
Measure Text:	Monitor and revise as needed, the strategies in the community health improvement plan in collaboration with broad participation from stakeholders and partners.
Site Visit Report Comment on the Measure:	<b>RD1:</b> CCHD submitted a copy of the CHIP evaluation-the evaluation contains data on progress towards goals, and an addendum detailing some objectives have been adjusted. It is not clear that the example considers the feasibility and the effectiveness of the strategies and/or changing priorities, resources, or community assets.  <b>RD2:</b> CCHD submitted a copy of a meeting agenda and a copy of a document detailing how the CHIP process has been changed, but not revisions to CHIP strategies as required by PHAB.
Health Department Actions:	Canton City Public Health, and our community partners in the Community Health Improvement Planning process, began following the Mobilizing for Action through Planning and Partnerships (MAPP) model for our Community Health Assessment (CHA) and Community Health Improvement Planning (CHIP) processes. The MAPP model is founded on three significant underlying components: strategic planning, collaboration, and quality improvement.

	<p>During implementation of the CHIP, a lead organization or agency, is identified to facilitate a sub-committee for each priority health area and to provide quarterly reports on CHIP outcomes.</p> <p>Sub-committees are tasked with tracking progress toward the goals, identifying emerging issues in the community and with community resources related to their goal, and adjusting objectives when needed.</p>
<b>Second Measure</b>	
Measure Number:	6.1.1 A
Measure Text:	Laws reviewed in order to determine the need for revisions.
Site Visit Report Comment on the Measure:	<p><b>RD1:</b></p> <p><b>Example 1:</b> CCPH submitted several documents related to a syringe exchange program. An email invite, sign-in sheet and presentation for a June 22, 2016 meeting were provided. The presentation mentions that the laws governing syringe exchange programs were changed in 2015 (well before this meeting). It seems the purpose of this meeting was to discuss a new program or intervention, but not necessarily the evaluation of laws for their public health implications. A document entitled "Legal Review Checklist" dated 6/1/16 was also provided. This document appears to have been used to evaluate the law that governs syringe exchange programs, but it is unclear what the purpose of this checklist/review is. An article written by the Surgeon General related to the efficacy of syringe exchange programs was also provided. The sign-in sheet previously mentioned lists representatives from other organizations, including other local health departments. There does not appear to have been any clear consideration of the law's impact on health equity.</p> <p><b>Example 2:</b> For their second example, they provided documentation related to indoor vaping/e-cigarette use. Pertinent documentation included Board of Health meeting minutes (July 2018) where they directed the Health Commissioner to draft a letter to the Canton City Council urging them "to consider future limitation to the use of e-cigarettes and vaping at indoor locations...", and the related letter from the Health Commissioner (dated August 1, 2018). CCPH also provided a "legal review checklist", but per the checklist, this checklist reviewed "the policy statement from the Board of Health" and not any specific proposed/existing legislation. Various supporting documents related to this review were provided (specifically other jurisdictions' indoor air ordinances), but it is unclear if these are being referenced as model laws, promising practices, etc. It does not appear that any key stakeholders were involved in the process (specifically those that would be impacted by any ban). The letter was discussed at a Board of Health meeting (which is open to the public), but neither the agenda, nor any other documentation provided show that the public was aware of this discussion). Finally, while they did provide documentation of collaboration with other levels of governmental health departments (meeting minutes, agenda, sign-in sheets), it appears that this meeting occurred six weeks after the letter was sent to the city council, thus the other health departments do not appear to have been directly involved in the process leading up to the "evaluation of laws". Similar to the other example, there does not appear to have been clear consideration of health equity.</p> <p><b>RD2:</b> CCPH provided a Statement of Legal Services provided by the Law Director of the City of Canton showing that the City's Law Department provides all legal services for the Board of Health.</p>

Health Department Actions:	<p>Canton City Public Health’s Board of Health directed the department to create a Public Health and Race Equity Team. This team consists of employees from all levels of staff as well as members of the board of health. The team meets frequently to analyze issues such as the health equity impacts of proposed laws and rules. The team also considers ways to increase equitable outcomes to under-served communities by involving leaders in these communities and taking on special projects like community-based messaging and other interventions.</p> <p>The APC program staff reviewed the Ohio EPA sulfur dioxide (SO2) emissions limitations regulations applicable to Stark County and found they did not accurately reflect the SO2 emissions of one of the facilities they were currently revising a permit for. APC staff completed air dispersion modeling showing the SO2 emissions would not have an adverse impact on health and the environment. The APC staff requested that their partner, Ohio EPA, make revisions to the regulation accordingly. Ohio EPA made the regulations available for public input on 12/30/2020. APC staff are working with their Ohio EPA partners to get this regulation revised and approved by USEPA.</p>
<b>Third Measure</b>	
Measure Number:	7.1.1 A
Measure Text:	Process to assess the availability of health care services.
Site Visit Report Comment on the Measure:	<p><b>RD1:</b> CCPH provided their 2016 Community Health Needs Assessment for this measure. One of the areas discussed for the assessment included Access to Health Care. Membership on this collaborative included representatives of CCPH, hospitals, medical centers, health foundations, the county medical society, the united way and community health organizations. However, from the documentation provided, it is unclear how the collaboration between these organizations took place, specifically with regards to assessing the availability of health care.</p> <p><b>RD2:</b> In RD1, CCPH provided their 2016 CHNA as evidence of the collaborative used to assess access to care. For their first example in this section, they submitted minutes from a late 2017 meeting. CCPH highlighted a specific section of the meeting minutes where it is noted that a draft copy of a 2017 Data Indicators Report would be emailed to the committee for review. It appears that this referenced document was included also. This document includes a section entitled Access to Health Care that includes data related to health insurance coverage, Medicaid rates, and dental usage. An email chain showing the distribution of this indicators report was also provided. Their second example consisted of an email chain related to a contract with Kent State University to conduct analysis of data specifically related to program evaluation. It appeared that this particular example was related more to program evaluation (evaluation of an intervention) and not assessing the availability of health care services.</p> <p><b>RD3:</b> CCPH provided their 2017 Indicators Report for their first example. While the report contains some data (e.g. changes in number of Medicaid clients and changes in insurance status) it is unclear if there has been any discussion by CCPH or the collaborative on how these would have any impact on access to care. For their second example, they provided a copy of a PowerPoint, meeting minutes and a sign-in sheet related to a new initiative. It is unclear from the documentation provided how these documents address the consideration of emerging issues.</p>

Health Department Actions:	<p>Canton City Public Health, and our community partners in the Community Health Improvement Planning process, began following the Mobilizing for Action through Planning and Partnerships (MAPP) model for our Community Health Assessment (CHA) and Community Health Improvement Planning (CHIP) processes. The MAPP model is founded on three significant underlying components: strategic planning, collaboration, and quality improvement.</p> <p>The process involves:</p> <ul style="list-style-type: none"> <li>• Identifying sources of health information and other data, including primary and secondary sources,</li> <li>• Surveying members of the community and community leaders to identify the community's needs and problems,</li> <li>• Discussing and working together to analyze data, to identify top needs, and to prioritize issues,</li> <li>• Development of an implementation plan with strategies aimed at addressing the needs that were identified,</li> <li>• Communicating with other community agencies and organizations to ensure that efforts align and to identify emerging issues and community resources,</li> <li>• Ensure that the CHA is distributed to the entire community.</li> </ul> <p>Agendas and meeting minutes are made available to the public and document these collaborations. The remainder of this process is addressed in the next measure.</p>
<b>Fourth Measure</b>	
Measure Number:	7.1.3 A
Measure Text:	Identification of gaps in access to health care services and barriers to the receipt of health care services identified.
Site Visit Report Comment on the Measure:	<p><b>RD1:</b> CCPH provided their 2015 CHNA for this measure. The process appeared to consist of a telephone survey of 800 residents. This was followed up with a web-based survey of community health leaders. To these surveys, various sources of secondary data were added. From the documentation provided, it appears that most components of the health sector were present (public health, hospitals, charities, clinics, etc). This data was collected to assist with the identification of service gaps and barriers to accessing health care.</p> <p><b>RD2:</b> CCPH again provided their 2015 CHNA in support of this measure. It does not appear that they looked at the geographic distribution of medical providers. What they did provide was a chart showing the percentage of people in specific geographic areas that have a primary doctor (but there is no way of knowing from the report where these doctors are located). They also did not provide any specific information related to the availability of different types of health care services. To determine causes for lack of access to services and barriers to care, they provided data from the survey where people expressed interest in free programs. The assumption could be made that CCHD is implying that because people have interest in free programs that cost is a barrier to care. However, there does not appear to be anything in their CHNA that explicitly states that people didn't seek healthcare because they couldn't afford it. As was previously mentioned, the majority of their data came from telephone surveys of residents. Their second example was a 2017 county transportation survey. This survey appears to only focus on transportation issues (and states that numerous categories of people have transportation issues), but there did not appear to be anything in this document that pointed to transportation as being a barrier to accessing health care (the report</p>

	states that 3.6% of community leaders report transportation assistance as a needed additional program).
Health Department Actions:	<p>Continuing with the MAPP process, Canton City Public Health and our community partners conducted several phases of the process to identify community issues including gaps in access to care.</p> <p>The first phase of the 2019 CHA was a community survey that consisted of a random sample telephone survey of area households with an oversampling of community residents who were determined to be potentially under-served.</p> <p>The second phase, secondary data analysis, consisted of reviewing and analyzing secondary data sources to identify areas of concern that aligned with the survey data.</p> <p>The third phase, a community health leadership survey, was a web-based survey of leaders in the area with knowledge of public health.</p> <p>Phase four, the final phase, was a community focus group. This facilitated discussion with a diverse mix of area residents.</p> <p>After gathering all of the data, it was compiled into a report, by source, and compared with the previous cycle's data and to other sources in the state and nation-wide. Using the compiled data and demographic information, including race, income and age, the top five priority needs were identified.</p> <p>The top priority identified was access to care. The group identified two goals related to with four long-term measures and a total of twenty-five action plans in the community.</p>
<b>Fifth Measure</b>	
Measure Number:	9.1.2 A
Measure Text:	Performance management policy/system
Site Visit Report Comment on the Measure:	<p>CCPH provided their performance management system policy that was adopted in November 2018. This policy seems to lay out the process that CCPH will use to evaluate / implement their strategic plan / objectives. Per the policy, the PM process incorporates, by reference, the objectives from the strategic plan. Any goals, targets, and indicators are found in the separate strategic plan (none are explicitly referenced in this PM policy). Expectations are laid out throughout the plan, though how these expectations are communicated throughout the organization is unclear. The PM plan lays out monitoring and measurement frequency based on three tiers of strategic objectives. Per the PM policy, data systems / sources are documented in a separate Performance Monitoring Plan (that is developed based on the specific objective from the strategic plan). There does not appear to be any specific reference to data systems in the Performance Management Plan. Analysis of data is mentioned, but not to any specific detail that it would enable the reader to understand what the analytic process is. Communication is addressed, specifically the sharing of data reports with the BOH. The reporting cycle is tied to the monitoring and measurement frequency and reporting to the BOH is required during the same month that data is entered in the spreadsheet. The PM policy states that this policy will coordinate with CCPH's QI plan, but nothing in this plan clearly addresses data analysis and managing for change / quality improvement.</p>
Health Department Actions:	<p>Canton City Public Health recently began using Clear Impact performance reporting software to monitor their Performance Management System. Clear Impact offers an easy-to-understand view of each item monitored in the plan. The software has reports which include data sources, charts tracking progress toward the goals as an analysis tool as well as explanations of why the goals were selected, evidence for inclusion of the goals in the plan, steps that have been</p>

	taken toward the goal and what interventions we have found that work. When goals are not within 10% of the currently expected value, the CCPH Performance Management Committee will review the goals for feasibility, suggest adjustments to the action plan and then refer the goal to the Quality Improvement Committee for consideration as a quality improvement project.
<b>Sixth Measure</b>	
Measure Number:	
Measure Text:	
Site Visit Report Comment on the Measure:	
Health Department Actions:	
<b>Seventh Measure</b>	
Measure Number:	
Measure Text:	
Site Visit Report Comment on the Measure:	
Health Department Actions:	
<b>Eighth Measure</b>	
Measure Number:	
Measure Text:	
Site Visit Report Comment on the Measure:	
Health Department Actions:	

<b>Category 3: Adverse findings or communications related to oversight or control from federal or state funding agencies that indicate the health department is at risk for loss or reduction in those funds</b>			
<b>Has the health department received an adverse finding or communication related to oversight or control?</b>			
<i>(Place an X in the column to the left of the answer.)</i>			
<input type="checkbox"/>	<b>Yes (Answer the questions below. If the health department received multiple adverse findings/communications, please complete a separate table for each.)</b>	<input checked="" type="checkbox"/>	<b>No (Skip this section)</b>

<b>Adverse Finding/Communication #1</b>
<b>What is the name of the funding agency?</b>
<b>Summarize the concerns raised by the funding agency.</b>
<b>Describe the results of this adverse finding/communication. (Did the health department lose funding? What actions, if any, did the health department take in response?)</b>

<b>Adverse Finding/Communication #2</b>
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<b>What is the name of the funding agency?</b>
<b>Summarize the concerns raised by the funding agency.</b>
<b>Describe the results of this adverse finding/communication. (Did the health department lose funding? What actions, if any, did the health department take in response?)</b>

<b>Adverse Finding/Communication #3</b>
<b>What is the name of the funding agency?</b>
<b>Summarize the concerns raised by the funding agency.</b>
<b>Describe the results of this adverse finding/communication. (Did the health department lose funding? What actions, if any, did the health department take in response?)</b>



**PHAB Annual Report**  
**Section II**  
**First Annual Report After Initial Accreditation**  
**Approval Date: July 2020; Effective Date: August 1, 2020**

Due to the COVID-19 pandemic, the Annual Report template has been modified.

- Eight questions are completely optional. If you don't have the time or capacity to address/answer these questions, please do not feel obligated to do so. It will not be held against the health department in any way.
- Questions 5-9 ask for a QI project, if you have a project related to your COVID-19 response, you can include it here.
- For questions such as 16, 17, 18, 19 – you can include descriptions of your current COVID-19 efforts. Perhaps some of those responses can be modified from documents/press releases/board of health reports that have already been created.

Your Annual Report will be reviewed, and you will receive feedback specific to your health department's responses to this form. In addition, in order to help facilitate learning among accredited health departments, PHAB may take what we are learning from you and your peers, particularly related to COVID-19 response, to develop resources that are shared with all accredited health departments (for example, PHAB may develop resources identifying how COVID-19 related examples could be used for reaccreditation documentation).

On this form, you will report on the health department's activities related to improvement; continuing processes; and emerging public health issues and innovations. Please provide brief responses to these questions. Each question should have a response of no more than 500 words. When you have completed this form, please log on to e-PHAB and upload this document. Upload the document as a Word file; do NOT convert it to a PDF.

There are different Section II forms for each year of the Annual Report process between initial accreditation and reaccreditation. Please be sure you are using the correct form.

Throughout this form you will see references to Reaccreditation Measures and required documentation (RD) in parentheses at the end of some questions. These questions are designed to help the health department begin thinking about the types of items that are addressed in the reaccreditation requirements. While the health department will receive feedback on the Annual Reports, it should not be interpreted as an assessment of conformity with any measure.

<b>Health Department Name</b>
Canton City Public Health
<b>Month and Year Submitted</b>
March 2021

**Performance Management/Quality Improvement (PM/QI)**

<b>1) What internal and/or external factors have facilitated your health department's progress in PM/QI since you were accredited? (Optional)</b>
Our COVID-19 response efforts have provided Canton City Public Health with several ongoing opportunities to evaluate our processes and effectiveness. Many of our staff have embraced the concept of applying quality improvement principles to their everyday work as well as our new processes in order to ensure that thinly stretched resources can be used as efficiently as possible. This has been especially helpful when staff feel empowered to adjust processes like testing and vaccination clinics.
<b>2) What internal and/or external factors have constrained your health department's progress in PM/QI since you were accredited? (Optional)</b>
Our COVID-19 response efforts have made it exceedingly difficult for staff to dedicate time to larger QI (Quality Improvement) projects and have forced us to abandon many of the strategies in our PM (Performance Management) plan. Canton City Public Health has made sure that formal QI efforts and our

Performance Management work have continued, but in a smaller capacity that we would have otherwise expected.

**3) The table below lists key components from the PHAB Reaccreditation Standards and Measures for Domain 9. Please complete the table below, to the best of your ability, to indicate the concrete steps the health department has taken since you were accredited to improve each element listed, the results of those steps, and one step it plans to take next year. If PM/QI activities have decreased due to COVID-19, please indicate if any work has been completed or planned.**

<b>Elements</b>	<b>Steps health department has taken since you were accredited</b>	<b>Results of those steps</b>	<b>Steps health department plans to take before next year's Annual Report</b>
<b>Staff ownership of the performance management system (Measure 9.1 RD2.1)</b>	Canton City Public Health created a permanent full-time position responsible for coordinating implementation of the performance management system. This staff member is responsible for coordinating the department's strategic planning process and assisting the strategic planning committee in implementing and updating the department's performance management system.	The first strategic plan and performance management system were completed. A new plan and system have been adopted by the department and the board of health. The committee worked in cooperation with department leadership to revise the plan and adopt new measures and indicators.	The committee will adopt the workforce development team's measures and indicators into the performance management system and will work with other staff committees to adopt measures and indicators for their goals.
<b>Monitoring and revising PM implementation and measures (Measure 9.1 RD1.d &amp; RD1.g)</b>	Canton City Public Health continued using the existing system but also transitioned to use of monitoring software that was made available by Ohio Department of Health. Performance measures were updated quarterly and monitored for impact and feasibility.	Due to COVID-19, many of the measures were revised and several had to be cancelled. Because of the software transition, a much more detailed report is available to the board, staff and public. The new report is easier to read, more indicative of our goals and makes tracking progress easier.	Moving ahead, the new performance management system will be fully implemented using the new software and more detailed reports. The department will also implement a social media campaign to keep the public more informed.
<b>Leadership support for performance management (Measure 9.1 RD3)</b>	Canton City Public Health's leadership team supported the creation of a permanent full-time position responsible for coordinating implementation of the performance monitoring plan. Leadership also budgeted for annual subscription fees for performance management software.	Updates to the performance monitoring system have become less time intensive to our staff and updates to the data are easier to track and understand. This system also has a public facing site that enables those interested in our progress to see updates to strategies and data in real time as they are entered.	Canton City Public Health plans to add more staff to this system and to provide training. The expectation is that, as more staff become comfortable with the software, more items will be added to the system and tracked.

<p><b>Revision of QI plan (Measure 9.2 RD1)</b></p>	<p>Canton City Public Health reviews and updates the QI plan every three years, or as needed if other issues arise. The plan was most recently updated in January 2021 to reflect the addition of a full-time position that was added to head the department's QI committee and to reflect updates in the QI maturity survey.</p>	<p>The department now has a smaller core QI committee that we expect will be able to more quickly perform the "nuts and bolts" work such as obtaining training materials and schedules. In-house training materials are now available to all staff for beginner, intermediate and advanced level trainings.</p>	<p>We hope that this will enable other staff to engage in larger formal QI projects, more freely, with less time spent on the administrative work to prepare for a project. QI champions will continue to be trained and identified in every division and core committee staff will be rotated frequently to make sure that as many staff as possible are exposed to QI.</p>
<p><b>QI training (Measure 9.2 RD2.b)</b></p>	<p>Canton City Board of Health approved the creation of a permanent full-time staff position responsible for leading the department's QI committee. The Board also approved advanced Six Sigma Green Belt training for this position.</p>	<p>Because of this, the department now has recorded training presentations for introductory and advanced QI topics. The staff member in the new position also prepared freely available statistics software for use by department staff for green belt level data analysis.</p>	<p>As the department ramped up our COVID-19 response efforts, most QI activities were put on hold. Moving ahead, the committee will resume meetings and other activities. Staff will be solicited for interest in QI and enrolled in training programs and mentored by committee members.</p>
<p><b>Consideration of customer feedback (Measure 9.2 RD2.d)</b></p>	<p>Canton City Public Health has adopted technology that assists in the collection of customer feedback by subscribing to Microsoft Office 365 services and investing in training staff to analyze survey results.</p>	<p>The department now regularly surveys the public on a variety of issues including vaccine hesitancy, maternal health and infant mortality, improvement of department services, strategic planning, and CHA processes. The Air Pollution Control program implemented a survey tool on 3/6/20 which has measured customer satisfaction with its permitting and inspection programs.</p>	<p>The department hopes to develop a process where we can demonstrate that consideration of customer feedback has had positive results – not only on the effectiveness of our programs but also on public perception of the department and public ownership of health and equity issues. APC (Air Pollution Control) will continue using its tool and address and customer concerns.</p>
<p><b>Reporting results (Measure 9.1 RD1.e &amp; Measure 9.2 RD2.e)</b></p>	<p>Canton City Public Health has invested in software and technology, staff positions and staff training that we expect to increase our effectiveness at reporting Quality Improvement and Performance Management results.</p>	<p>The department has had success at increasing reporting the results of our Performance Management System after moving to a platform called Clear Impact. The software includes automatic public report in an easy-to-understand interface. Unfortunately, our COVID-19 response efforts have limited the time that staff had available to spend on formal/large Quality Improvement efforts and this</p>	<p>The department plans to continue use of the Clear Impact software and train additional staff on its use. Our revised Quality Improvement plan should allow the department to resume formal/large QI projects while also requiring less staff time than before. The QI committee has resumed its work and will be soliciting for and sponsoring projects.</p>

		has hampered our ability to report on project results.	
<b>Institutionalized continuous quality improvement (Measure 9.2, RD5)</b>	The creation of an on-boarding policy and revision of the department's training matrix serves to ensure that all staff without prior QI experience receive introductory level Quality Improvement training when they start at Canton City Public Health. Additionally, the revised QI plan makes sure that all staff have a chance to serve on the committee and in projects.	All department staff are now familiar with QI concepts and tools at a basic level. This has resulted in the empowerment of staff to make on-the-fly improvements to processes. This is especially evident when we are hosting events like drive-through testing and vaccination clinics.	As the Quality Improvement Committee resumes, the department expects to also resume intermediate training events and to sponsor more large/formal QI projects. Staff involvement in projects and results reporting should increase staff buy-in to QI processes. The committee will also work to ensure that the staff who are involved in these processes are rotated to make ensure we include staff from all levels of the department.

<b>4) Did your health department track any QI projects related to the following areas since you were accredited? (Select all that apply. Place an X in the column to the left of the area.)</b>	
	Data
	Financial management
	Workforce
	Governance
	Other administrative/management
	Community engagement
	Health equity
X	Programs
	Other: please describe

<b>Description of One QI Project</b>	
<b>Select one formal QI project to describe in greater detail below.</b>	
<b>5) How was the need for the QI project determined? Check all that apply.</b>	
	Site Visitors/Site Visit Report
	Accreditation Committee letter about accreditation status
X	Customer feedback
	Performance management system
	Health status gathered through community statistics, focus groups, etc.
X	Staff suggestion
	Other: please describe
<b>6) What is the existing effort or gap for which improvement is needed? What was the aim statement, including the specific measurable targets set for the activity? <i>If you have a storyboard that addresses all the following questions, you can upload the storyboard rather than responding questions 6-9 in this section.</i></b>	
<p>Based on feedback from the Board of Health, our community, and staff suggestions. Canton City Public Health started a Quality Improvement project aimed at reducing the time needed to resolve neighborhood nuisance complaints. The aim statement follows:</p> <p>“By February 28, 2021, Canton City Public Health will improve quality of life for Canton City residents, by reducing the wait time for the resolution of Canton City residential nuisance complaints by at least 50%. City residents will live in cleaner neighborhoods due to the faster response times.”</p>	
<b>7) What tools and implementation methods were used? Please describe what approach you used (e.g., PDCA, Lean), what tools you used (e.g., process mapping, fishbone diagram), how you determined root causes, and if you conducted a pilot.</b>	
<p>The project team consisted of a QI committee member, the process owner/subject matter expert, a fresh perspective and one other non-management/supervisor staff member. The tools used for the project were fishbone diagramming, process mapping and brainstorming for solutions.</p>	
<b>8) What are the outcomes of the QI project, including progress towards the measurable targets that were set? Please provide specific data.</b>	
<p>The results of the QI project were several solutions from the team aimed at addressing what we determined the root causes to be. The team determined that Canton City Public Health may have accidentally incentivized property owners to allow city services to clean up nuisance conditions by artificially keeping costs low. The team also determine that repeat violators were not being referred to the city law department for possible prosecution. CCPH settled on three solutions to these issues:</p>	

1. Billing costs were updated to be more reflective of the actual costs, including labor and equipment fees for all staff and equipment used in each property nuisance abatement.
2. CCPH asked the Board of Health to pass a resolution altering the health code to require that all offenders that are non-compliant twice, or more, in a 12-month period will be automatically referred to the city law department for possible prosecution. The board approved this resolution.
3. CCPH asked the Board of Health to pass a resolution allowing the Health Commissioner, sanitarian and property owner to negotiate a reduced-rate nuisance abatement once in each 12-month period in order to quickly remove neighborhood nuisances. Property owners may request the reduced-rate cleanup by waiving their right to a Board of Health hearing and allowing CCPH to immediately clean the property. The board approved this resolution.

Data gathering is currently underway, but anecdotal data seems to indicate that the results exceed the project's target.

**9) To which PHAB Reaccreditation measure(s), if any, does this QI project apply?**

Measure 9.2.4

**10) What PM/QI topics would you like guidance on? (Optional)**

X	Gaining buy-in for QI
	Finding and/or providing training on PM/QI
X	Sharing PM/QI information with staff and governing entity
	Developing or revising QI plan
X	Assessing QI culture
X	Diffusing QI throughout health department
X	Determining when to implement a QI project
	Implementing QI projects
X	Selecting performance measures
	Tracking performance measures over time
	Identifying resources
	Working with data
	Other: please describe

**11) What specific questions do you have about PM/QI? If there is a particular question from this Annual Report form for which your health department would like feedback, please indicate it here. (Optional)**

**Continuing Processes to Prepare for Reaccreditation**

**12) Describe how your health department has strengthened its collaborative working relationships. The health department may provide narrative describing collaborative working relationships that have been established or maintained due to COVID-19. Provide one example of how you have strengthened relationships either**

- a. **With community and partner organizations (including other sectors of the community such as the educational system, parks and recreation, health care, the faith community);**  
or
- b. **With other levels of public health departments (Tribal, state, and local)?**

Canton City Public Health has improved its collaboration with local hospital systems in several ways. The Health Commissioner participates in weekly COVID coordination calls with regional hospital systems and the Akron Regional Hospital Association. This collaboration strives to increase situational awareness of

COVID vaccine administration between various hospital systems and local public health departments. Canton City Public Health is the public health representative on this regional coordination. Additionally, in Stark County a long-term care collaborative has been initiated between local public health and local skilled and assisted living facilities. This collaborative meets twice a week to review and discuss COVID infection control policies and practices, vaccination efforts, visitation policies, and other items of interest. Canton City Public Health is the local public health department representative on this collaborative.

Canton City Public Health is an active member of a response team managed by another local department of health that is a large local collaborative consisting of local elected officials, hospitals, public health departments, regional chambers of commerce, and citizens to review and discuss our community's response to the ongoing COVID pandemic. This collaborative meets once a week.

**13) Describe the ongoing community collaborative process for continuous enhancement of the community health assessment. In particular:**

- a. How does the health department determine which specific population groups with greater or particular health issues and health inequities to address? (Measure 1.1 RD2.b)**
- b. How does the health department identify and analyze factors that contribute to specific populations' health issues (including social determinants of health and community factors or contributors)? (Measure 1.1 RD2.c & Measure 1.3 RD5)**

**If CHA activities have decreased due to COVID-19, please indicate if any work has been completed or planned.**

Canton City Public Health participates in a community collaboration of agencies and interested members of the public to perform a Community Health Assessment (CHA) in a three-year cycle. The collaborative consists of local departments of health, hospitals, health care organizations, social services agencies, non-profit organizations and community volunteers who meet regularly to identify community needs and develop a plan to address those needs. The process involves:

- Identifying sources of health information and other data, including primary and secondary sources,
- Surveying members of the community and community leaders to identify the community's needs and problems,
- Discussing and working together to analyze data, to identify top needs, and to prioritize issues,
- Development of an implementation plan with strategies aimed at addressing the needs that were identified,
- Communicating with other community agencies and organizations to ensure that efforts align and to identify emerging issues and community resources,
- Ensure that the CHA is distributed to the entire community.

The CHA committee uses the Mobilizing for Action through Planning and Partnerships (MAPP) model. This is a community-wide strategic planning process that assists with prioritizing public health issues, identifying community resources and with development of a shared, long-term Community Health Improvement Plan (CHIP). The MAPP process has three underlying principles: strategic planning, collaboration and quality improvement.

The first phase of the CHA was a community survey that consisted of a random sample telephone survey of area households with an oversampling of community residents who were determined to be potentially under-served.

The second phase, secondary data analysis, consisted of reviewing and analyzing secondary data sources to identify areas of concern that aligned with the survey data.

The third phase, a community health leadership survey, was a web-based survey of leaders in the area with knowledge of public health.

Phase four, the final phase, was a community focus group. This facilitated discussion with a diverse mix of area residents.

After gathering all of the data, it was compiled into a report, by source, and compared with the previous cycle's data and to other sources in the state and nation-wide. Using the compiled data and demographic information, including race, income and age, the top five priority needs were identified.

<b>14) Sharing Your Work - Please indicate how the health department has provided support to other health departments or shared its experiences with others outside of the department, related to quality improvement, performance management, or accreditation. (Select all that apply. Place an X in the column to the left of the activity.) (Optional)</b>			
	Submitted an example to a national database of best practices		Gave a presentation at a meeting
X	Provided one-time consultation to staff at another health department	X	Provided ongoing assistance to staff at another health department
	Published an article in a journal		None
	Submitted a story to Accreditation Works!		Other (please specify):

**15) Please describe one of the activities above (question 14) of which the health department is most proud. If the health department has published an article in a journal, please provide the citation below. (Optional)**

Canton City Public Health's (CCPH) Accreditation Coordinator mentored a smaller neighboring department in their accreditation efforts. This local department of health serves a city population of approximately 32,500 with less than 10 staff. The department approached our staff with questions regarding our approach to documenting several measures and this led to mentoring relationship that lasted over 7 months while the neighboring department gathered, prepared, and submitted their documents to PHAB.

<b>Emerging Public Health Issues and Innovations</b>			
<b>16) Has the health department conducted work in any of the following areas? (Select all that apply. Place an X in the column to the left of the issue.)</b>			
	Data for decision making		Emerging infectious diseases (other than COVID-19)
X	Health equity		Climate change
	Health strategist		Behavioral health
	Public health financing modernization		Environmental bio-monitoring
	Public health systems transformation		Genomics
	Public health/health care integration	X	Adoption of emerging technology (specify)
	Emergency preparedness and response (other than COVID-19)	X	COVID-19
		X	Anti-racism
	Community resilience		Other (please specify):

**17) If the health department is engaged in work in an emerging area, such as COVID-19, please tell the story of the health department's work in one area.**

Canton City Public Health has adopted Microsoft 365 tools to use for our COVID-19 response efforts. The department was already subscribed to the platform and realized that we had all of the tools necessary to allow the public to self-serve for vaccine registrations.

The tools we use for self-service registration are Microsoft Forms, Microsoft Power Automate, Microsoft SharePoint and Microsoft Excel Online. The public is given a link to a Microsoft Form where they answer a short series of screening questions regarding residency and other eligibility and then for their contact information. This information is then automatically passed to Microsoft Power Automate where a decision tree will determine if the responder's information should be added to our list and then sends a confirmation email. Responders who do not qualify for our list are sent an email explaining why they might not qualify, and they are given tools to determine if they might be served by another health department – Stark County, Ohio, where we are located, has four health departments and many people are unsure what department serves them.

To make sure that populations that are less technically savvy and those with less access to technology were served equally well, CCPH contracted with a local partner to allow citizens to provide all of this information by telephone. Our partner then enters the information on the form on their behalf. This allows us to maintain one system that serves all of our citizens and has ensured that the public is able to sign up without extended hold times.

**18) PHAB defines public health innovation as the creation and implementation of a novel process, policy, product, program, or system leading to improvements that impact health and equity. Please describe the health department's approach to pursuing innovation and any innovations that have emerged since you were accredited. (Optional)**

Canton City Public Health identified a need to reach under-served populations during our COVID-19 vaccination clinic planning. A process was identified where we set aside blocks of appointment times at our regular clinics for these communities and then reached out to community leaders and faith-based organizations and requested their assistance in reaching these under-served citizens. This process has allowed us to serve the whole community while also ensuring equitable outcomes for the community.

### Overall Improvements

**19) Aside from what has previously been reported in this report, has the health department made any improvements that have had a significant impact on the health department or the community it serves in the past year? (Optional)**

*What has been the impact on the health department and/or the community? How was that impact measured? Please provide specific data, if available, to demonstrate measurable impact.*

### Reminders about Reaccreditation Preparation

Year 1: As you prepare for reaccreditation, here are some items you may want to focus on this year:

- Read reaccreditation guide (<http://www.phaboard.org/wp-content/uploads/PHABGuideReacc.pdf>)
- Watch training modules on Bridge, PHAB's online learning center
- Begin building support for reaccreditation among the health department director and staff
- Continue to review the comments in the Site Visit Report from Initial Accreditation
- Review requirements that are new to Version 1.5 (<http://www.phaboard.org/wp-content/uploads/Version-1.5-changes-and-clarifications-FINAL1.pdf>)
- Prepare reaccreditation documents that need to be dated within 5 years (see reference document on Bridge)
- Read the template for the Annual Report for 2<sup>nd</sup> year after initial accreditation