# BOARD OF HEALTH



### **Canton City Public Health**

## Monday, October 26 2020 @ 12:00pm



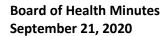
#### Board of Health Meeting Monday, October 26, 2020 @ 12:00pm – Board Room Agenda

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

- 1. Call to Order and Roll Call
- 2. Unfinished Business
- 3. Approve September 21, 2020 Board of Health Meeting Minutes
- 4. Approve List of Bills for \$330,161.28
- 5. Approve Personnel:
  - a. Probationary Period Ending for Jordan Mastrocola, Contact Monitoring Team Leader (PT4), Retroactive to July 12, 2020
  - b. Accept Resignation of Mark Smith, Recycling Center Manager (R3), Effective September 23, 2020
  - c. Accept Resignation of Antjaun Davis-Rice, Recycling Public Health Technician (PT13), Effective September 23, 2020
  - d. Accept Resignation of Nevin Nettey, Staff Sanitarian I (R4) Effective October 23, 2020
  - e. Appointment of Part-Time OPHII Public Health Support Specialist (PT1)
  - f. Appointment of Full-Time Vital Statistics Public Health Clerk II (R2)
  - g. Appointment of Part-Time Recycling Public Health Technician (PT13)
  - h. Appointment of Full-Time Staff Sanitarian I (R4)
- 6. Approve Recommendations of the Hearing Officer for October 26, 2020
- 7. Approve FY22 Integrated Naloxone Access and Infrastructure Grant Application and Initial Budget in the Amount of \$70,000.00 for the Period of September 29, 2020 to August 31, 2021 with the Following Sub-grantees for this Grant Cycle:
  - a. Ohio Can (Change Addiction Now) in the Amount of \$3,000.00
  - b. Family Empowerment Ministries in the Amount of \$1,000.00
  - c. Zion Community Development Corp in the Amount of \$1,000.00
  - d. Community Drop In in the Amount of \$1,000.00
  - e. Emmanuel Tabernacle Family Worship in the Amount of \$1,000.00
- 8. Approve Partnership Agreements for Integrated Naloxone Access and Infrastructure Grant to Distribute Naloxone Under CCPH's Protocol, Effective October 26, 2020 with Annual Renewal Periods that will Automatically Renew Every Year with the following Organizations:
  - a. ICAN Housing
  - b. OhioCAN(Change Addition Now)
  - c. Interdenominational Ministers' Association of Stark County and Vicinity
  - d. Canton Fire Department
  - e. Plain Township Fire Department
  - f. Alliance City Fire Department
  - g. Jackson Township Fire Department

#### Board of Health Agenda Monday, October 26, 2020 Page (2)

- 9. Acceptance of Reports
  - a. Nursing/WIC
  - b. Laboratory
  - c. OPHII
  - d. Environmental Health
  - e. Air Pollution Control
  - f. Vital Statistics
  - g. Fiscal
  - h. Health Commissioner
  - i. Performance Management
- 10. Other Business
- 11. Next Meeting: Monday, November 23, 2020 at 12:00pm
- 12. Adjournment





**Board of Health Meeting** Monday, September 21, 2020 @ 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 on Monday, September 21, 2020 at 12:03 PM with a quorum present.

Dr. Hickman, Mr. Wyatt, Dr. Lakritz, Dr. Johns and Ms. Lucas were present. Also present were James Adam, Sean Green and Diane Thompson.

#### **Unfinished Business**

James Adams mentioned the Vacation Time Payout that had been discussed during the July Board of Health meeting. Mr. Adams stated that there is no action recommended at this time and the issue will remain tabled at the moment.

#### Approve August 24, 2020 Board of Health Meeting Minutes

Ms. Lucas moved and Mr. Wyatt seconded a motion to approve the August 24, 2020 Board of Health meeting minutes.

Motion carried unanimously.

#### Approve List of Bills - \$240,939.51

Ms. Lucas moved and Mr. Wyatt seconded a motion to approve the list of bills totaling \$240,939.51.

Dr. Lakritz began a discussion about the intention to provide the Shingrix vaccine to Canton City Public Health (CCPH) employees through the use of public funds. Dr. Lakritz stated that it would be unethical to use public money to provide a service to department employees that is not provided to the public. After a lengthy discussion on the subject, Mayor Bernabei proposed that the Board approve all bills and delay the distribution of the Shingrix vaccine until further discussion can be made.

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

Motion carried unanimously.

#### **Approve Personnel:**

a. Accept Resignation of Madisyn Smith, Vector Control Technician (PT13), Effective August 31, 2020

Mr. Wyatt moved and Ms. Lucas seconded a motion to accept the resignation of Madisyn Smith, Vector Control Technician (PT13), effective August 31, 2020. A roll call to vote was taken:

Dr. Hickman – Yes

Dr. Johns – Yes Ms. Lucas – Yes

Motion carried unanimously.

#### b. Appointment of Recycling Public Health Technician (PT13)

Mr. Wyatt moved and Ms. Lucas seconded a motion to offer the position of Recycling Public Health Technician (PT13) to Kewan Umbles at \$10.64 an hour with a start date of September 28, 2020 with a 90-day probationary periods to come out of the Recycling Center fund (2354.307001). 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 New Job Description for OPHII Public Health Specialist (PT1) Under the OPHII Division

Mr. Wyatt moved and Ms. Lucas seconded a motion to approve the new job description for OPHII Public Health Specialist (PT1) under the OPHII division. 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 Updated OPHII Position Classification Schedule

Mr. Wyatt moved and Ms. Lucas seconded a motion to approve the updated OPHII Position Classification Schedule. 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 September 21, 2020

Mr. Wyatt moved and Dr. Hickman seconded a motion to approve the recommendations of the hearing officer for September 21, 2020. 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 an Amount of \$74,678.00 for a FY21 Coronavirus Response Supplemental Grant with a Period of March 1, 2020 to December 30, 2020 (This is a FY21 grant, but in 2020)

Dr. Hickman moved and Mr. Wyatt seconded a motion to approve an agreement with the Stark County Combined General Health District to receive an amount of \$74,678.00 for a FY21 Coronavirus Response Supplemental Grant with a period of March 1, 2020 to December 30, 2020. A roll call to vote was taken:

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

Motion carried unanimously.

#### Approve the FFY 2020-2021 Ohio EPA Air Pollution Control Contract Amendment, for a Period of October 1, 2019 to June 30, 2021, to Update the Funding Amount to the Final FFY20 Amount and Updated Estimate FFY21 Amount, of \$1,531,238 (\$880,260 FFY20 and \$650,978 FFY21 9-month), Including the Regular Obligation for the Provision of \$40,000 per Year of City/Local funds (overall 0.5% decrease). (2331 APC Contract Funds)

Ms. Lucas moved and Dr. Lakritz seconded a motion to approve the FFY 2020-2021 Ohio EPA Air Pollution Control Contract Amendment, for a Period of October 1, 2019 to June 30, 2021, to update the funding amount to the final FFY20 amount and updated estimate FFY21 amount, of \$1,531,238 (\$880,260 FFY20 and \$650,978 FFY21 9-month), including the regular obligation for the provision of \$40,000 per year of city/local funds (overall 0.5% decrease). (2331 APC Contract Funds). A roll call to vote was taken:

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

Dr. Johns – Yes Ms. Lucas

Motion carried unanimously.

#### Approve Request to Purchase a new BGI PQ200 PM2.5 Intermittent Ambient Air Monitor for at a Cost not to Exceed \$10,500.00 to be a Spare to Existing Equipment (since we have no spare and we have 3 of these samplers operating at our sites), as approved by Ohio EPA in the Contract budgets (2331 APC Contract funds)

Ms. Lucas moved and Dr. Lakritz seconded a motion to approve a request to purchase a new BGI PQ200 PM2.5 Intermittent Ambient Air Monitor at a Cost not to exceed \$10,500.00 to be a spare to existing equipment (since we have no spare and we have 3 of these samplers operating at our sites), as approved by Ohio EPA in the contract budgets (2331 APC Contract funds).

Mr. Wyatt inquired about the age of the current units. Terri Dzienis reported that 2 of the 3 current units are new, while the other is 10 years old. Terri stated that it is advisable to have a spare incase the older unit malfunctions. 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.

#### <u>Approve the FY21 STI Prevention Grant Application and Initial Budget in the Amount of</u> <u>\$46,393.00 with a Grant Period of January 1, 2021 to December 31, 2021</u>

Dr. Hickman moved and Dr. Lakritz seconded a motion to approve the FY21 STI Prevention Grant Application and initial budget in the amount of \$46,393.00 with a grant period of January 1, 2021 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.

#### <u>Approve FY21 HIV Grant Application and Initial Budget in the Amount of \$226,193.00 for</u> <u>Grant Period from January 1, 2021 to December 31, 2021 with the Following Sub-grantees</u> <u>for this Grant Cycle:</u>

- a. Alliance City Health Department in the Amount of \$5,000.00
- b. New Philadelphia City Health Department in the Amount of \$10,990.00
- c. Jefferson County Health Department in the Amount of \$13,777.59
- d. Sandra Guist in the Amount of \$235.00

Dr. Hickman moved and Dr. Johns seconded a motion to approve FY21 HIV Grant Application and initial budget in the amount of \$226,193.00 for grant period from January 1, 2021 to December 31, 2021 with the above sub-grantees. 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 the FY21 Dental Sealant Program Agreement with Dr. Meredith Robeson, Dentist, at an amount not to exceed \$1,800.00 (\$200.00 per month for nine (9) months in 2021) for the period of January 1, 2021 through December 31, 2021; Paid from Fund 2322, Dental Fund

Dr. Lakritz moved and Ms. Lucas seconded a motion to approve the FY21 Dental Sealant Program agreement with Dr. Meredith Robeson, Dentist, at an amount not to exceed \$1,800.00 (\$200.00 per month for nine (9) months in 2021) for the period of January 1, 2021 through December 31, 2021; paid from Fund 2322, Dental Fund.

Dr. Lakritz asked what will happen to the funds if the program is unable to occur due to COVID-19. James Adams stated that the department has been able to pay a staff member who is currently performing contact tracing out of those funds.

A roll call to vote was taken:

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

Motion carried unanimously.

#### Approve FY21 Dental Sealant Program Agreement with Anna Mayle, Dental Hygienist, at an amount not to exceed \$11,672.46 (\$27.29 per hour for a maximum of 374 hours [\$10,206.46] and mileage reimbursement [\$1,466.00]) for the period of January 1, 2021 through December 31, 2021; Paid from Fund 2322, Dental Fund

Dr. Lakritz moved and Mr. Wyatt seconded a motion to approve FY21 Dental Sealant Program agreement with Anna Mayle, Dental Hygienist, at an amount not to exceed \$11,672.46 (\$27.29 per hour for a maximum of 374 hours [\$10,206.46] and mileage reimbursement [\$1,466.00]) for the period of January 1, 2021 through December 31, 2021; paid from Fund 2322, Dental Fund. A roll call to vote was taken:

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

Motion carried unanimously.

#### Approve FY21 Dental Sealant Program Agreement with Alison Giammarco, Dental Hygienist, at an amount not to exceed \$11,672.46 (\$27.29 per hour for a maximum of 374 hours [\$10,206.46] and mileage reimbursement [\$1,466.00]) for the period of January 1, 2021 through December 31, 2021; Paid from Fund 2322, Dental Fund.

Dr. Lakrtiz moved and Mr. Wyatt seconded a motion to approve FY21 Dental Sealant Program agreement with Alison Giammarco, Dental Hygienist, at an amount not to exceed \$11,672.46 (\$27.29 per hour for a maximum of 374 hours [\$10,206.46] and mileage reimbursement [\$1,466.00]) for the period of January 1, 2021 through December 31, 2021; paid from Fund 2322, Dental Fund. 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 Sisters of Charity Foundation of Canton to Receive \$158,800.00 with a period of September 1, 2020 through August 31, 2022 to pass through to Kent State for a Comprehensive Evaluation of the Stark County THRIVE Project.

Dr. Johns moved and Dr. Hickman seconded a motion to approve an agreement with Sisters of Charity Foundation of Canton to receive \$158,800.00 with a period of September 1, 2020 through August 31, 2022 to pass through to Kent State for a comprehensive evaluation of the Stark County THRIVE Project. A roll call to vote was taken:

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

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Motion carried unanimously.

#### Authorize a Contract with Kent State University for a Comprehensive Evaluation of the Stark County THRIVE Project for \$158,800.00 for a period of September 1, 2020 through August 31, 2022

Mr. Wyatt moved and Dr. Lakritz seconded a motion to authorize a contract with Kent State University for a comprehensive evaluation of the Stark County THRIVE Project for \$158,800.00 for a period of September 1, 2020 through August 31, 2022. 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.

Authorize a Contract with CareSource Management Services LLC (a Medicaid Managed Care Plan in Ohio) for Outcome Payments Related to Services Provided by the Stark County THRIVE Pathways HUB for the Period of October 1, 2020 through December 31, 2020 at an Amount not to Exceed \$25,500.00

Dr. Lakritz moved and Dr. Hickman seconded a motion to authorize a contract with CareSource Management Services LLC (a Medicaid Managed Care Plan in Ohio) for outcome payments related to services provided by the Stark County THRIVE Pathways HUB for the period of October 1, 2020 through December 31, 2020 at an amount not to exceed \$25,500.00. 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.

#### Authorize a Community-based Care Management Services Agreement with CareSource Management Services LLC for the Period of October 1, 2020 through December 31, 2021.

Ms. Lucas moved and Dr. Johns seconded a motion to authorize a community-based Care Management Services agreement with CareSource Management Services LLC for the period of October 1, 2020 through 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.

#### Authorize contract with City of Canton receive funding for the purchase of cleaning items and other household disinfection products to support eligible clients in the THRIVE

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### program to address current pandemic crisis at an amount not to exceed \$47,400. (This is CARES Act funding provided through Community Development Block Grant program).

Mr. Wyatt motioned and Dr. Hickman seconded a motion to authorize a contract with City of Canton to receive funding for the purchase of cleaning items and other household disinfection products to support eligible clients in the THRIVE program to address current pandemic crisis at an amount not to exceed \$47,400.

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

Motion carried unanimously.

#### **Acceptance of Division Reports**

- a. Nursing/WIC Nothing additional.
- b. Laboratory Finished cleaning inspection this morning with excellent results. Also running low on collection kits.
- c. OPHII– Amanda Archer stated that there has been an increase in COVID spread caused by smaller gatherings. She also said that the Naloxone distribution goal has been reached.
- d. Environmental Health Nothing additional.
- e. Air Pollution Control Terri Dzienis stated that inspections have been interrupted by COVID, but they are working to get them done.
- f. Vital Statistics Nothing additional.
- g. Fiscal Officer Nothing additional.
- h. Health Commissioner James Adams stated that Stark County Health Commissioners have passed a resolution regarding Halloween activities.

Dr. Johns moved and Ms. Lucas seconded a motion to accept the division reports. A roll call to vote was taken:

Dr. Hickman – Yes	Dr. Lakritz – Ye	es

Dr. Johns – Yes Ms. Lucas – Yes

Motion carried unanimously.

#### **Other Business**

The schedule of the November 2020 and December 2020 Board of Health meetings was discussed to determine if either meeting dates should be changed, as they are near holidays. The Board

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decided to uphold the previously scheduled meeting dates of November 23, 2020 and December 21, 2020.

<u>Announcement of Next Meeting: Monday, October 26, 2020 at 12:00 PM</u> The next regular scheduled meeting of the Board of Health of Canton City Public Health will be on Monday, October 26, 2020 at 12:00 PM.

### <u>Adjourn</u>

Mr. Wyatt moved and Dr. Hickman seconded a motion to adjourn. Motion carried unanimously. The meeting adjourned at 12:59 PM.

President of the Board of Health

Secretary to the Board of Health

Date of Approval

G/L Date Range 09/17/20 - 10/21/20

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount
Fund 2312 - STD Control Program										
Department 301001 - Health - Admini	stration									
Account 705.05 - Profession	onal Services Co	mputer Access Line Fe	es							
51874 - VERIZON WIRELESS	9863533583 (2)	Tablet Data Service for DIS, LTC and EIS	Paid by Check # 670269		09/23/2020	10/15/2020	10/13/2020		10/13/2020	40.11
		Account 705.05 - P	rofessional Se	rvices Comput	er Access Line	e Fees Totals	Invo	ice Transactions	1	\$40.11
Account 705.06 - Profession	onal Services Otl	ner Professional Servio	ces							
186 - AULTMAN HOSPITAL	FTA 2020-08	ACCOUNT# 099915682 -9603	Paid by Check # 670276		09/30/2020	10/07/2020	10/14/2020		10/14/2020	14.75
52334 - LEXISNEXIS RISK DATA MANAGEMENT INC	1672320- 20200930	Monthly Database Services for 2020	Paid by Check # 670332		09/30/2020	10/30/2020	10/15/2020		10/15/2020	180.00
		Account <b>705.06 - P</b>	rofessional Ser	vices Other Pr	ofessional Se	rvices Totals	Invo	ice Transactions	2	\$194.75
Account 713.13 - Utilities	Telephone									
51874 - VERIZON WIRELESS	9863526541 (1)	Cell Phone for DIS, LTC and EIS	2 Paid by Check # 670269		09/23/2020	10/15/2020	10/13/2020		10/13/2020	99.22
			Ac	count 713.13 -	<b>Utilities Tele</b>	phone Totals	Invo	ice Transactions	1	\$99.22
			Department	301001 - Hea	th - Administ	r <b>ation</b> Totals	Invo	ice Transactions	4	\$334.08
				Fund <b>2312 - S</b> 1	D Control Pro	ogram Totals	Invo	ice Transactions	4	\$334.08

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Fund 2313 - Local Health Dept Prev Support	
Department 301001 - Health - Administration	
Account 705.06 - Professional Services Other Professional Services	
50079 - INSYNC HEALTHCARE         996435         Electronic Medical         Paid by Check         10/01/2020         10/14/2020         10/14/2020	94.00
SOLUTIONS, LLC Record system # 670297	
maintenance fees for 2020	
7335 - HUNTINGTON NATIONAL BANK Stf Assessment Strengths Assessments Paid by Check 09/11/2020 10/12/2020 10/16/2020 10/16/2020 10/16/2020	1,599.24
for Staff # 670398	
Account 705.06 - Professional Services Other Professional Services Totals Invoice Transactions 2	\$1,693.24
Account 734.13 - Supplies Freight	
52799 - CEPHEID Lab Supplies INVOICE Edit 09/23/2020 10/23/2020 10/20/2020	14.95
#9000604636,	
6000040555	
Account <b>734.13 - Supplies Freight</b> Totals Invoice Transactions 1	\$14.95
Account 734.58 - Supplies Miscellaneous Supplies	
52799 - CEPHEID Lab Supplies INVOICE Edit 09/23/2020 10/23/2020 10/20/2020	936.70
#9000604636,	
6000040555	+026 70
Account <b>734.58 - Supplies Miscellaneous Supplies</b> Totals Invoice Transactions 1	\$936.70
Department <b>301001 - Health - Administration</b> Totals Invoice Transactions 4	\$2,644.89
Fund 2313 - Local Health Dept Prev Support Totals Invoice Transactions 4	\$2,644.89

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount
Fund 2314 - Infant Mortality Reduction										
Department 301001 - Health - Adminis										
Account 705.05 - Professio		-	es							
50073 - TIME WARNER CABLE		5 2020 Internet and	Paid by Check		10/05/2020	10/21/2020	10/13/2020		10/13/2020	136.97
	20	Telephones for THRIVE	# 670265							
		Offices	refereienal Co	wiege Comput	Access Line	Food Totals	Tevr	pice Transactions	1	\$136.97
Account 705.14 - Professio	nal Sanvisas Ma	Account 705.05 - P	roressional Ser	vices comput	er access line	e rees Totais	TUAC		1	\$130.97
22899 - GRAPHIC ENTERPRISES	21AR999158	THRIVE Copier Lease	Edit		10/14/2020	10/24/2020	10/19/2020			125.64
22099 - GRAFITIC ENTERFRISES	2148333130	for 2020 and Overage	Luit		10/14/2020	10/27/2020	10/19/2020			125.04
		Costs								
		Account 705.14	I - Professiona	I Services Mai	ntenance Con	tracts Totals	Invo	oice Transactions	1	\$125.64
Account 706.01 - Contract	Service Contrac	t Service - 2314 THRI	VE							·
51325 - ACCESS HEALTH STARK COUNTY	2020 Outcome	2020 Payment	Paid by Check		09/28/2020	09/29/2020	10/05/2020		10/05/2020	15,020.00
	Рау	Outcomes - THRIVE	# 669894							·
51325 - ACCESS HEALTH STARK COUNTY	2020Outcome	2020 THRIVE Payment			09/28/2020	09/29/2020	10/05/2020		10/05/2020	2,540.00
	Pay	Outcomes	# 669894							
52910 - STARK COMMUNITY SUPPORT	2020 Outcome	,	Paid by Check		09/28/2020	09/29/2020	10/05/2020		10/05/2020	120.00
NETWORK 1800 - STARK COUNTY HEALTH	Pay 2020 Outcome	Outcomes - THRIVE 2020 Payment	# 669938 Paid by Check		09/28/2020	09/29/2020	10/05/2020		10/05/2020	2,730.00
DEPARTMENT	Pay	Outcomes - THRIVE	# 669939		09/20/2020	09/29/2020	10/03/2020		10/03/2020	2,750.00
51328 - STARK COUNTY JOB AND FAMILY	2020 Outcome		Paid by Check		09/28/2020	09/29/2020	10/05/2020		10/05/2020	5,010.00
SERVICES	Pay	Outcomes - THRIVE	# 669940		03/20/2020	03,23,2020	10,00,2020		10,00,2020	5,010100
2762 - STARK METRO HOUSING	2020 Outcome	2020 Payment	Paid by Check		09/28/2020	09/29/2020	10/05/2020		10/05/2020	2,645.00
AUTHORITY	Рау	Outcomes - THRIVE	# 669942							
38982 - YWCA OF CANTON	2020 Outcome		Paid by Check		09/28/2020	09/29/2020	10/05/2020		10/05/2020	3,385.00
	Pay	Outcomes - THRIVE	# 669947				40.05.0000		10/05/0000	2 6 4 2 2 2
51326 - ALLIANCE FAMILY HEALTH CENTER INC	2020 Outcome	2020 Payment Outcomes - THRIVE	Paid by Check # 669896		09/28/2020	09/30/2020	10/05/2020		10/05/2020	2,640.00
51120 - COMMQUEST SERVICES INC	Pay 2020 Outcome		Paid by Check		09/28/2020	09/30/2020	10/05/2020		10/05/2020	1,965.00
STIZE COMMQUEST SERVICES INC	Pay	Outcomes - THRIVE	# 669916		05/20/2020	05/50/2020	10/03/2020		10/03/2020	1,505.00
52761 - MARGARET B. SHIPLEY CHILD	2020 Outcome		Paid by Check		09/28/2020	09/30/2020	10/05/2020		10/05/2020	595.00
HEALTH CLINIC, INC	Pay	Outcomes - THRIVE	# 669925							
51644 - MY COMMUNITY HEALTH CENTER		2020 Payment	Paid by Check		09/28/2020	09/30/2020	10/05/2020		10/05/2020	410.00
	Рау	Outcomes - THRIVE	# 669928		_					
		Account <b>706.01 - C</b>	ontract Service	e Contract Ser	vice - 2314 Th	<b>IRIVE</b> Totals	Invo	pice Transactions	11	\$37,060.00
Account 713.13 - Utilities T	-									
50073 - TIME WARNER CABLE		5 2020 Internet and	Paid by Check		10/05/2020	10/21/2020	10/13/2020		10/13/2020	239.94
	20	Telephones for THRIVE Offices	# 670265							
51874 - VERIZON WIRELESS	9864166027	Cell Phone Service for	Edit		10/03/2020	10/26/2020	10/19/2020			50.94
	5007100027	Elonda Williams	Luit		10/03/2020	10/20/2020	10/13/2020			JU.JT
			Ac	count <b>713.13 -</b>	Utilities Tele	<b>phone</b> Totals	Invo	oice Transactions	2	\$290.88
				301001 - Hea				pice Transactions		\$37,613.49
			-1	2314 - Infant I				pice Transactions		\$37,613.49
										·· /· ···

G/L Date Range 09/17/20 - 10/21/20

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount
Fund 2316 - WIC										
Department 301001 - Health - Adminis										
Account 705.05 - Professio										
51874 - VERIZON WIRELESS	9863499871	Cell Phone Service and			09/23/2020	10/15/2020	10/13/2020		10/13/2020	80.22
		Hot Spots for WIC	# 670269							100.00
		Account 705.05 - P		rvices Comput	er Access Line	e Fees Totals	Invo	ice Transactions	1	\$80.22
Account 706.36 - Contract										
85 - ALLIANCE CITY HEALTH DEPT	Aug20 WIC	FY20 WIC Grant	Paid by Check		09/18/2020	09/18/2020	09/24/2020		09/24/2020	9,510.27
	Grant	Program	# 669497						/ /	
1800 - STARK COUNTY HEALTH	Aug20 WIC	FY20 WIC Grant	Paid by Check		09/05/2020	09/18/2020	09/24/2020		09/24/2020	24,217.83
DEPARTMENT	Grant	Program	# 669564			40/45/0000				40.676.00
1121 - MASSILLON CITY HEALTH DEPT	Sept20 WIC	FY20 WIC Grant	Open		10/15/2020	10/15/2020	10/15/2020			13,676.39
	Grant	Program	Edit		10/00/2020	10/10/2020	10/10/2020			04 (01 (2
1800 - STARK COUNTY HEALTH DEPARTMENT	Sept20 WIC Grant	FY20 WIC Grant Program	Edit		10/08/2020	10/19/2020	10/19/2020			84,681.62
85 - ALLIANCE CITY HEALTH DEPT	Sept20 WIC	FY20 WIC Grant	Edit		10/20/2020	10/20/2020	10/20/2020			13,807.38
65 - ALLIANCE CITT HEALTH DEFT	Grant	Program	Euit		10/20/2020	10/20/2020	10/20/2020			13,007.30
	Granc	Account 706.36 -	Contract Serv	ice Health Con	tract Grant E	nond Totals	Invo	ice Transactions	5	\$145,893.49
Account <b>713.14 - Utilities (</b>	Coll Phones	Account 700.30 -	contract Serv	ice fiearch con			11100		5	\$17 <b>5,</b> 095,79
51874 - VERIZON WIRELESS	9863499871	Cell Phone Service and	Paid by Check		09/23/2020	10/15/2020	10/13/2020		10/13/2020	347.52
51674 - VERIZON WIRELESS	9003499071	Hot Spots for WIC	# 670269		09/23/2020	10/15/2020	10/13/2020		10/13/2020	547.52
		The spots for with		ount <b>713.14 - l</b>	Itilities Cell P	hones Totals	Invo	ice Transactions	1	\$347.52
Account 734.10 - Supplies	Postago		ACC	ount <b>/ 13.14</b> - (	Junities Cell F	nones rotais	11100		T	\$J77.J2
2137 - CITY TREASURER FOR:DEPOSIT	-	Deate as far W/IC	Daid by Charle		10/06/2020	10/00/2020	* 10/15/2020		10/15/2020	37.14
ONLY	Apr-Sept Postage	Postage for WIC Program	Paid by Check # 670322		10/00/2020	10/06/2020	10/15/2020		10/15/2020	57.14
UNLY	Postage	Plogram		Account <b>734.10</b>	- Supplies De	stage Totals	Invo	ice Transactions	1	\$37.14
Account 734.11 - Supplies	Miccollanoous	fice Supplies	1	ACCOUNT 734.10	- Supplies Po		11100		T	\$37.1 <del>4</del>
	836774989474				08/10/2020	11/05/2020	10/01/2020			852.27
43051 - SYNCB/AMAZON	836774989474	Office Supplies for WIC			08/10/2020	11/05/2020	10/01/2020			852.27
		Program & for Contract Sites								
			734 11 - Supp	lies Miscellane	ous Office Su	nnline Totals	Τηνο	ice Transactions	1	\$852.27
Account 734.58 - Supplies	Miscellaneous		John Supp	nes miscenarie	ous office Su	ppiles rotais	11100		1	4052.27
43051 - SYNCB/AMAZON		INVOICE	Edit		08/10/2020	11/05/2020	10/01/2020			356.74
45051 - STINCD/AMAZON	WIC Supply, FY20	#639954365493,	Eult		06/10/2020	11/05/2020	10/01/2020			330.74
	FTZU	756568449899								
			ccount 734 58	- Supplies Mise	cellaneous Su	nnlies Totals	Invo	ice Transactions	1	\$356.74
		~		301001 - Heal				ice Transactions		\$147,567.38
			Department	Sotoot - Heal				ice Transactions		
					runa <b>2316</b>	- WIC Totals	TUAO	ice transactions	10	\$147,567.38

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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
Fund 2318 - HIV Prevention										
Department 301001 - Health - Adminis										
Account 705.05 - Professio		•			00/00/0000	10/15/2020	10/12/2020		10/12/2020	40.11
51874 - VERIZON WIRELESS	9863533583 (2)	) Tablet Data Service for DIS, LTC and EIS	# 670269		09/23/2020	10/15/2020	10/13/2020		10/13/2020	40.11
		Account <b>705.05 - P</b>		rvices Comput	er Access I ind	Fees Totals	Invo	oice Transactions	. 1	\$40.11
Account 705.40 - Professio	nal Services Ad			eeniput			11100		-	φ IOI11
52620 - WDPN-AM/ WDJQ-FM RADIO	9408-2	HIV & PrEP Advertising			09/30/2020	10/19/2020	10/19/2020			887.50
STATIONS		5								
50323 - LAMAR COMPANIES	HIV Advertising		Edit		10/05/2020	11/04/2020	10/21/2020			6,244.00
		#111856578,								
		111884272, 111884278, 111884274								
		Account <b>705.40</b>		Services Adver	tising/Spons	orshin Totals	Invo	oice Transactions	2	\$7,131.50
Account 706.36 - Contract	Service Health			, , , , , , , , , , , , , , , , , , ,	cionig, opono		11100		-	<i>q,,</i> 101100
85 - ALLIANCE CITY HEALTH DEPT	Sept20 HIV	2020 HIV Sub-Grantee			10/01/2020	10/12/2020	10/20/2020		10/20/2020	365.32
	Grant	for HIV Prevention	# 670 <del>4</del> 90							
		Expenditures								
52684 - JEFFERSON COUNTY HEALTH	Sept20 HIV	2020 HIV Sub-Grantee	,		10/01/2020	10/12/2020	10/20/2020		10/20/2020	547.44
DEPT	Grant	for HIV Prevention Expenditures	# 670527							
38878 - NEW PHILADELPHIA CITY HEALTH	Sept20 HIV	2020 HIV Sub-Grantee	Paid by Check		09/30/2020	10/12/2020	10/20/2020		10/20/2020	868.58
DEPARTMENT	Grant	for HIV Prevention	# 670535		03/30/2020	10, 12, 2020	10/20/2020		10/20/2020	000.50
		Expenditures								
		Account 706.36 -	Contract Serv	ice Health Con	tract Grant E	<b>xpend</b> Totals	Invo	oice Transactions	3	\$1,781.34
Account 734.11 - Supplies										
905 - INDEPENDENCE BUSINESS SUPPLY	HIV Off	INVOICE# 1791996-0,			09/30/2020	10/21/2020	10/21/2020			1,094.70
	Supplies	1791996-1, 1795635-0, 1791996-2								
			734.11 - Supp	lies Miscellane	ous Office Su	nnlies Totals	Invo	oice Transactions	. 1	\$1,094.70
Account 734.17 - Supplies	Equipment (\$0.		our oupp			pprice rotais	11100		-	<i>q</i> 1/05 m 0
43051 - SYNCB/AMAZON	534843386839	Fujitsu Scan Snap	Edit		09/24/2020	12/05/2020	10/15/2020			525.98
		S1300i, equipment								
			734.17 - Supp	lies Equipmen	t (\$0.00 - \$99	99.99) Totals	Invo	oice Transactions	1	\$525.98
Account 772.20 - Travel Re	-									
7335 - HUNTINGTON NATIONAL BANK	HIV Training	Training for HIV	Paid by Check		10/12/2020	10/12/2020	10/16/2020		10/16/2020	320.00
		Prevention Team -	# 670399							
		Transforming Care	Account 77	2.20 - Travel R	egistration/T	uition Totals	Invo	oice Transactions	. 1	\$320.00
				301001 - Hea	- ·			vice Transactions		\$10,893.63
			Department		L8 - HIV Preve			ice Transactions	-	\$10,893.63
							2.170		-	+==,000.00

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date Payment Date	Invoice Amount
Fund 2319 - Early Intervention Service	es								
Department 301001 - Health - Admin	istration								
Account 705.05 - Professi	onal Services Co	mputer Access Line F	ees						
51874 - VERIZON WIRELESS	9863533583 (1	) Tablet Data Service forEIS (04/01/2020 - 03/31/2021)	Paid by Check # 670269		09/23/2020	10/15/2020	10/13/2020	10/13/2020	40.11
		Account <b>705.05 - I</b>	Professional Se	ervices Comput	er Access Line	e Fees Totals	Invo	pice Transactions 1	\$40.11
Account 713.14 - Utilities	Cell Phones								
51874 - VERIZON WIRELESS	9863526541 (2	) Cell Phone Monthly Service for EIS (04/01/2020 - 03/31/2021)	Paid by Check # 670269		09/23/2020	10/15/2020	10/13/2020	10/13/2020	49.61
		,	Ac	count <b>713.14 - l</b>	<b>Jtilities Cell P</b>	hones Totals	Invo	pice Transactions 1	\$49.61
Account 734.11 - Supplies	Miscellaneous (	Office Supplies							
43051 - SYNCB/AMAZON	436984959996	Office Supplies for EIS Grant	Edit		10/04/2020	12/05/2020	10/20/2020		27.97
		Account	: 734.11 - Supp	lies Miscellane	ous Office Su	pplies Totals	Invo	pice Transactions 1	\$27.97
Account 734.58 - Supplies	Miscellaneous S	Supplies							
52628 - DAVE PURCHASE PROJECT/NASE	N 42102	SWAP Clinic Supplies	Department	- Supplies Mise 301001 - Heal 2319 - Early In	lth - Administ	ration Totals	Invo	pice Transactions <b>1</b> pice Transactions <b>4</b> pice Transactions <b>4</b>	5,200.91 \$5,200.91 \$5,318.60 \$5,318.60

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date Payment Date	Invoice Amount
Fund 2320 - Nursing Clinic Activity Fun	d								
Department 303002 - Travel Clinic									
Account 734.58 - Supplies	Miscellaneous	Supplies							
16175 - GLAXOSMITHKLINE PHARM	8253279508	Immunization Clinic	Paid by Check		09/16/2020	10/16/2020	10/20/2020	10/20/2020	2,143.03
		Vaccinations	# 670514						
24836 - MCKESSON MEDICAL - SURGICAL	Clinic Supply	Clinic Supplies	Edit		09/18/2020	10/18/2020	10/20/2020		453.07
			Account 734.58	<ul> <li>Supplies Misc</li> </ul>	ellaneous Su	pplies Totals	Invo	ice Transactions 2	\$2,596.10
				Department 303	3002 - Travel	Clinic Totals	Invo	ice Transactions 2	\$2,596.10
			Fund 2	320 - Nursing (	Clinic Activity	<b>Fund</b> Totals	Invo	ice Transactions 2	\$2,596.10

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date Pay	yment Date	Invoice Amount
Fund 2321 - Get Vaccinated Ohio (IAP	)									
Department 301001 - Health - Admin	istration									
Account 706.36 - Contrac	t Service Health	n Contract Grant Expen	d							
1800 - STARK COUNTY HEALTH	Sept20 GV	Get Vaccianted FY21	Paid by Check		10/06/2020	10/12/2020	10/20/2020	10/	/20/2020	2,810.00
DEPARTMENT	Grant	Grant	# 670541						_	
		Account <b>706.36</b>	- Contract Serv	vice Health Cor	tract Grant E	<b>xpend</b> Totals	Invo	ice Transactions 1		\$2,810.00
			Department	301001 - Hea	lth - Administ	ration Totals	Invo	ice Transactions 1	-	\$2,810.00
			Fund	2321 - Get Va	ccinated Ohio	(IAP) Totals	Invo	ice Transactions 1	-	\$2,810.00

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount
Fund 2322 - Dental Sealant										
Department 301001 - Health - Admini	stration									
Account 734.13 - Supplies	Freight									
5752 - PLAK SMACKER	CD60506615	Dental Sealant supplies for FY20	Edit		10/22/2020	10/25/2020	10/01/2020			34.99
52955 - BENCO DENTAL SUPPLY CO	Dental Supplies	INVOICES #: 10071089, 10083357	Edit		09/28/2020	11/27/2020	10/02/2020			10.95
52955 - BENCO DENTAL SUPPLY CO	10024175	Isolation gowns for dental program	Edit		09/18/2020	11/17/2020	10/02/2020			10.95
9242 - HENRY SCHEIN INC.	Dental Supply	INVOICES #83382892, 83257404	Edit		09/22/2020	10/22/2020	10/20/2020			11.48
				Account 734.13	<b>3 - Supplies F</b>	r <b>eight</b> Totals	Invo	ice Transactions	4	\$68.37
Account 734.58 - Supplies	Miscellaneous S	Supplies								
5752 - PLAK SMACKER	CD60506615	Dental Sealant supplies for FY20	Edit		10/22/2020	10/25/2020	10/01/2020			953.75
52955 - BENCO DENTAL SUPPLY CO	Dental Supplies	INVOICES #: 10071089, 10083357	Edit		09/28/2020	11/27/2020	10/02/2020			2,802.49
52955 - BENCO DENTAL SUPPLY CO	10024175	Isolation gowns for dental program	Edit		09/18/2020	11/17/2020	10/02/2020			217.90
9242 - HENRY SCHEIN INC.	Dental Supply	INVOICES #83382892, 83257404	Edit		09/22/2020	10/22/2020	10/20/2020			629.10
		A	ccount 734.5	8 - Supplies Misc	ellaneous Su	pplies Totals	Invo	ice Transactions	4	\$4,603.24
			Departme	nt <b>301001 - Heal</b>	th - Administi	r <b>ation</b> Totals	Invo	ice Transactions	8	\$4,671.61
				Fund 232	22 - Dental Se	ealant Totals	Invo	ice Transactions	8	\$4,671.61

Amount
180.57
\$180.57
\$180.57
\$180.57
9

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date Payment Date	Invoice Amount
Fund 2324 - NALOXONE ACCESS GRAN	T FUND								
Department 301001 - Health - Adminis	stration								
Account 705.06 - Professio	onal Services Ot	her Professional Servio	ces						
52140 - FAMILY EMPOWERMENT	IN21 Naloxone	Contract Services to	Open		10/02/2020	10/15/2020	10/15/2020		150.00
MINISTRIES INC	Gr	Distribute Naloxone							
		Kits							
52814 - SMILE MINDED SMARTWORKS,	414	Program Evaluation -	Edit		09/20/2020	10/15/2020	10/15/2020		1,940.00
LLC		Faith Based Narcan							
		Distribution Parternship			40/00/0000	10/00/0000			450.00
52848 - MT. ZION CHURCH OF GOD IN	IN21 Naloxone	Naloxone Kits	Edit		10/02/2020	10/20/2020	10/20/2020		450.00
CHRIST	Gr	Distributed Account 705.06 - Pi		wiese Other Dr	of a solo wall Ca	wiese Tatala	Tierre	ico Troposotiono 3	¢2 E40 00
		Account 705.00 - PI	roressional Se	rvices Other Pr	oressional Se	rvices Totals	TUAO	ice Transactions 3	\$2,540.00
Account 734.10 - Supplies									
2137 - CITY TREASURER FOR:DEPOSIT	Apr-Sept20 NX	Postage costs for	Paid by Check		10/12/2020	10/12/2020	10/20/2020	10/20/2020	391.30
ONLY		Naloxone Grant	# 670506						
		Program		A	Comelia - Da		Τ	ing Transcriptions 4	+201.20
			-	Account <b>734.10</b>		-		ice Transactions 1	\$391.30 \$2,931.30
	Department <b>301001 - Health - Administration</b> Totals Invoice Transactions <b>4</b>								
			Fund <b>2324 -</b>	NALOXONE AC	CESS GRANT	FUND Totals	Invo	ice Transactions 4	\$2,931.30

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount
Fund 2328 - Public Health Infrastruct										
Department 301001 - Health - Admin										
Account 705.06 - Profess										
52923 - MARIA A ANAYA	11-2020	Interpretation Services 05/07/20 - 12/31/2020			09/25/2020	09/29/2020	10/01/2020		10/01/2020	191.25
10277 - PROTECH SECURITY INC.	336891	Monthly Monitoring Service for Panic Buttons in VS, N and WIC	Edit		10/01/2020	10/31/2020	10/01/2020			65.85
52923 - MARIA A ANAYA	12-2020	Interpretation Services 05/07/20 - 12/31/2020	# 670318		10/08/2020	10/12/2020	10/15/2020		10/15/2020	298.13 \$555.23
Account 705.14 - Profess	sional Convisos M	Account 705.06 - Pi	roressional Sei	rvices Other Pi	oressional Se	rvices lotais	Invo	pice Transactions	3	\$555.23
40908 - CONNECTING POINT	252026	Office 365 E-mails	Edit		10/01/2020	10/06/2020	10/06/2020			140.00
		Users Account 705.14	l - Professiona	Services Mai	ntenance Con	tracts Totals	Inv	pice Transactions	1	\$140.00
		Account 703.1-		301001 - Hea				Dice Transactions		\$695.23
Department <b>301019 - COVID-19 STI</b>	MILLIS		Department	501001 - 1164	itii - Auiiiiiist		THAT		т	φ <b>0</b> 9 <b>3.2</b> 3
Account <b>705.05 - Profess</b>		omputor Accoss Line Ee	05							
51874 - VERIZON WIRELESS		2) Cell Phones/Hot Spot	Paid by Check		09/26/2020	10/18/2020	10/13/2020		10/13/2020	40.21
51874 - VERIZON WIRELESS	9003723320 (	Used for COVID-19	# 670269		09/20/2020	10/10/2020	10/13/2020		10/13/2020	70.21
		Account <b>705.05 - P</b>		rvices Comput	er Access Lin	e Fees Totals	Invo	oice Transactions	1	\$40.21
Account 705.06 - Profess	sional Services O								-	+ ···==
52973 - BREWER, BRIANNA	6-2020	Contact Tracing	Paid by Check		09/28/2020	09/29/2020	10/01/2020		10/01/2020	539.50
	0 2020	Contract Services	# 669796		00,20,2020	00, 20, 2020	10,01,1010		20,02,2020	000100
53019 - FATHIYYAH FARRAKHAN	2-2020	Contact Tracing Contract Services	Paid by Check # 669809		09/28/2020	09/29/2020	10/01/2020		10/01/2020	367.25
52974 - HOUSTON, JADA	6-2020	Contact Tracing Contract Services	Paid by Check # 669815		09/28/2020	09/29/2020	10/01/2020		10/01/2020	364.00
52975 - KRATZER, ROBIN L.	6-2020	Contact Tracing Contract Services	Paid by Check # 669821		09/28/2020	09/29/2020	10/01/2020		10/01/2020	282.75
52976 - MITCHELL, ZACHARY ALLEN	6-2020	Contact Tracing Contract Services	Paid by Check # 669826		09/28/2020	09/29/2020	10/01/2020		10/01/2020	65.00
52973 - BREWER, BRIANNA	7-2020	Contact Tracing Contract Services	Paid by Check # 670320		10/12/2020	10/12/2020	10/15/2020		10/15/2020	494.00
53019 - FATHIYYAH FARRAKHAN	3-2020	Contact Tracing Contract Services	Paid by Check # 670325		10/12/2020	10/12/2020	10/15/2020		10/15/2020	455.00
52974 - HOUSTON, JADA	7-2020	Contact Tracing Contract Services	# 070325 Paid by Check # 670327		10/12/2020	10/12/2020	10/15/2020		10/15/2020	217.75
52975 - KRATZER, ROBIN L.	7-2020	Contract Tracing Contract Services	# 070327 Paid by Check # 670331		10/12/2020	10/12/2020	10/15/2020		10/15/2020	260.00
52907 - PHOENIX ENTERPRISE SOLUTIONS LLC	1133	Emergency Cleaning of Offices due to COVID- 19			09/22/2020	10/22/2020	10/15/2020			976.00
		Account <b>705.06 - Pi</b>	rofessional Sei	vices Other Pi	ofessional Se	rvices Totals	Invo	pice Transactions	10	\$4,021.25

G/L Date Range 09/17/20 - 10/21/20

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount
Fund 2328 - Public Health Infrastructu	re									
Department 301019 - COVID-19 STIM	ULUS									
Account 713.14 - Utilities (	Cell Phones									
51874 - VERIZON WIRELESS	9863723326 (2)	Cell Phones/Hot Spot	Paid by Chec	k	09/26/2020	10/18/2020	10/13/2020		10/13/2020	892.98
		Used for COVID-19	# 670269							
			Ad	count <b>713.14 - I</b>	<b>Jtilities Cell P</b>	hones Totals	Invo	ice Transactions	1	\$892.98
Account 734.58 - Supplies	Miscellaneous S	upplies								
24836 - MCKESSON MEDICAL - SURGICAL	Clinic Supply	Clinic Supplies	Edit		09/18/2020	10/18/2020	10/20/2020			178.92
53003 - NICHOLS PAPER & SUPPLY CO.	6828311 (1)	Purell Pro Surface	Edit		10/19/2020	11/13/2020	10/21/2020			1,323.80
		Disinfectant Wipes								
53003 - NICHOLS PAPER & SUPPLY CO.	6828311 (2)	Disinfectant Wipes	Edit		10/19/2020	11/13/2020	10/21/2020			488.85
	Account <b>734.58 - Supplies Miscellaneous Supplies</b> Totals Invoice Transactions <b>3</b>								3	\$1,991.57
Department <b>301019 - COVID-19 STIMULUS</b> Totals Invoice Transactions <b>15</b>									\$6,946.01	
			Fund 2	2328 - Public He	ealth Infrastru	<b>ucture</b> Totals	Invo	ice Transactions	19	\$7,641.24

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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
Fund 2331 - Air Pollution (134)										
Department 301001 - Health - Adminis Account 705.06 - Professio		hor Profossional Somic	205							
40187 - CCI COMMERCIAL CONSTRUCTION		APC Office Remodel -	Paid by Check		10/05/2020	10/12/2020	10/19/2020		10/19/2020	19,910.00
LLC	1 / 00	Put in window in APC	# 670426		10,03,2020	10, 12, 2020	10, 19, 2020		10,13,2020	19,910.00
		Area								
52953 - OUTLOOK OFFICE SOLUTIONS,	2003-120	Service to install APC	Edit		07/03/2020	10/27/2020	10/15/2020			500.00
LLC		Cubicles Account 705.06 - PI	ofessional Se	rvices Other P	ofessional Se	rvices Totals	Invo	pice Transactions	2	\$20,410.00
Account 705.11 - Professio	nal Services EC				oressional se		TIIV		2	φ20, 110.00
42568 - MESA LABS	412814,	Air Monitoring	Edit		09/18/2020	10/18/2020	10/20/2020			1,124.00
	412883	Equipment Repair and								-
		Service, as needed in								
		2020 Account 705.11 - Pro	ofessional Ser	vices FO/Offic	e Fauinment R	Repair Totals	Invo	pice Transactions	1	\$1,124.00
Account 713.12 - Utilities I	Electric	Account Februar III			o =qaipiiloitti		11100		-	<i><i><i>q</i>1/12 1100</i></i>
1366 - OHIO EDISON CO.	Sept20 APC	Acct #110 033 872 497	Paid by Check		10/05/2020	10/26/2020	10/16/2020		10/16/2020	77.59
	Elec		# 670407							
				Account <b>713.1</b>	2 - Utilities El	ectric Totals	Invo	pice Transactions	1	\$77.59
Account 713.13 - Utilities 1 51874 - VERIZON WIRELESS	9863533753	APC M&I Staff Cell	Paid by Check		09/23/2020	10/15/2020	10/13/2020		10/13/2020	156.01
516/4 - VERIZON WIRELESS	9000000000000	Phones for Field Work	# 670269		09/23/2020	10/15/2020	10/15/2020		10/13/2020	150.01
					<b>Utilities Tele</b>	<b>phone</b> Totals	Invo	pice Transactions	1	\$156.01
Account 734.10 - Supplies	Postage									
2137 - CITY TREASURER FOR:DEPOSIT	Jul-Sept AP	Postage for APC, as	Paid by Check		10/12/2020	10/12/2020	10/20/2020		10/20/2020	431.20
ONLY		needed in 2020	# 670507	Account <b>734.10</b>	- Supplies Ba	stage Totals	Inv	pice Transactions	1	\$431.20
Account 734.13 - Supplies	Freight			Account 734.10	- Supplies Po		TING		T	ş <del>4</del> 51.20
42568 - MESA LABS	INV-414994	PM2.5 Sampling	Edit		09/30/2020	10/30/2020	10/15/2020			182.00
		Equipment			,,	-,,	-, -,			
42568 - MESA LABS	412814,	Air Monitoring	Edit		09/18/2020	10/18/2020	10/20/2020			40.00
	412883	Equipment Repair and Service, as needed in								
		2020								
42568 - MESA LABS	412814	PM2.5 Parts and	Edit		09/18/2020	10/18/2020	10/20/2020			38.00
		Supplies, as needed in								
39452 - UPS	E11A07380	2020 Freight and Shipping	Edit		09/19/2020	10/19/2020	10/21/2020			26.86
J77J2 - UFJ	L11AU/30U	Costs, as needed in	Luit		09/19/2020	10/19/2020	10/21/2020			20.00
		2020								
				Account <b>734.1</b>	3 - Supplies F	r <b>eight</b> Totals	Invo	pice Transactions	4	\$286.86

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date Payment Date	Invoice Amount
Fund 2331 - Air Pollution (134)									
Department 301001 - Health - Admin	istration								
Account 734.57 - Supplies	s Machine Parts	and Supplies							
43051 - SYNCB/AMAZON	APC Misc.	INVOICE	Edit		10/08/2020	12/05/2020	10/20/2020		17.98
	Supply	#978349977655,							
		448485535388		а II м II			-		\$17.98
	Account <b>734.57 - Supplies Machine Parts and Supplies</b> Totals Invoice Transactions 1								
Account <b>734.58 - Supplie</b> s									
43051 - SYNCB/AMAZON	APC Misc.	INVOICE	Edit		10/08/2020	12/05/2020	10/20/2020		97.67
	Supply	#978349977655,							
		448485535388					Ŧ		+07.67
		1	Account /34.	58 - Supplies Mise	cellaneous Su	pplies lotais	INV	oice Transactions 1	\$97.67
Account <b>758.06 - Capital</b>	<i>,</i>								
42568 - MESA LABS	INV-414994	PM2.5 Sampling Equipment	Edit		09/30/2020	10/30/2020	10/15/2020		10,300.00
		Accou	nt <b>758.06 - C</b> a	apital Outlay Equip	oment(over \$	<b>5000)</b> Totals	Inv	oice Transactions 1	\$10,300.00
Account 776.13 - Member	ship dues & Fe	es Membership Dues	and Fees						
1404 - OLAPCOA	2021-02	APC Officers Assoc.	- Edit		10/15/2020	11/10/2020	10/20/2020		391.00
		Annual Agency Dues							
		Account 776.13 - Me	mbership due	es & Fees Member	ship Dues and	<b>Fees</b> Totals	Inv	oice Transactions 1	\$391.00
			Departm	nent <b>301001 - Heal</b>	th - Administ	ration Totals	Inv	oice Transactions 14	\$33,292.31
				Fund <b>2331 -</b>	<b>Air Pollution</b>	(134) Totals	Inv	oice Transactions 14	\$33,292.31

93.90
\$93.90
98.88
\$98.88
\$192.78
\$192.78

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount
Fund 4501 - Capital Projects										
Department 301001 - Health - Adminis	stration									
Account 734.18 - Supplies	Furniture/Fixtu	res (\$0-\$999.99)								
905 - INDEPENDENCE BUSINESS SUPPLY	1785822-0, 1	Desk Chairs for EH	Edit		09/24/2020	10/01/2020	10/01/2020			2,160.89
43051 - SYNCB/AMAZON	493945458543	Standup Desks with	Edit		09/05/2020	11/05/2020	10/01/2020			1,300.00
		Arms and Mat							-	
		Account 73	4.18 - Supplie	es Furniture/Fix	tures (\$0-\$99	<b>9.99)</b> Totals	Invo	ice Transactions	2	\$3,460.89
		Department <b>301001 - Health - Administration</b> Totals Invoice Transactions <b>2</b>							2	\$3,460.89
				Fund <b>450</b>	1 - Capital Pr	ojects Totals	Invo	ice Transactions	2	\$3,460.89

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount
Fund 7601 - Health Fund										
Department 301001 - Health - Adminis										
Account 705.05 - Professio										
51874 - VERIZON WIRELESS	9863723326 (1	) Monthly Hot Spot Fee for CCPH, 2020	# 670269		09/26/2020	10/18/2020	10/13/2020		10/13/2020	40.11
		Account <b>705.05 - P</b>		rvices Comput	er Access Line	e Fees Totals	Invo	oice Transactions	1	\$40.11
Account 705.06 - Professio	nal Services Ot	her Professional Servic	es							
52602 - DEANS FUNERAL HOME LIMITED	B.Ballenger Ind	i Indigent Cremation: Brian Balenger, DOD: 09/09/2020	Edit		10/01/2020	10/01/2020	10/01/2020			495.00
52602 - DEANS FUNERAL HOME LIMITED	J.McKenzie	Indigent Cremation: Janet McKenzie, DOD: 09/06/2020	Edit		10/01/2020	10/01/2020	10/01/2020			495.00
50028 - BUDGET BLINDS	Blind Repair	Repair Blinds in VS Lobby Area	Edit		10/12/2020	11/09/2020	10/21/2020			59.00
		Account 705.06 - Pr	ofessional Se	rvices Other Pr	ofessional Se	rvices Totals	Invo	ice Transactions	3	\$1,049.00
Account 705.14 - Professio	nal Services Ma	intenance Contracts								
27986 - R & G JANITORIAL, INC.	3267	Cleaning of Health Department Offices	Paid by Check # 670344		09/30/2020	10/02/2020	10/15/2020		10/15/2020	2,000.00
		Account 705.14	- Professiona	al Services Mai	ntenance Con	tracts Totals	Invo	oice Transactions	1	\$2,000.00
Account 706.18 - Contract	Service Car Wa	sh								
1597 - RED CARPET CAR WASH	Sept20 Car Washe	Car Washes as Needed for Health Department (Except APC vehicles)	Edit		09/30/2020	10/15/2020	10/15/2020			4.25
			Account <b>70</b>	06.18 - Contrad	ct Service Car	Wash Totals	Invo	oice Transactions	1	\$4.25
Account 734.10 - Supplies	Postage									
2137 - CITY TREASURER FOR:DEPOSIT ONLY	09-20 HL	Postage, as needed in 2020 for Health Department	Paid by Check # 670505		10/07/2020	10/12/2020	10/20/2020		10/20/2020	585.40
				Account <b>734.10</b>	- Supplies Po	stage Totals	Invo	oice Transactions	1	\$585.40
Account 734.11 - Supplies	Miscellaneous (	Office Supplies								
51852 - IPRINT TECHNOLOGIES	717132	Printer Cartridges, as needed in 2020	Edit		09/18/2020	10/18/2020	10/02/2020			88.00
905 - INDEPENDENCE BUSINESS SUPPLY	Misc. Supplies	INVOICE #1793068, 1792272, 1795550	Edit		09/30/2020	10/21/2020	10/21/2020			67.22
			734.11 - Supp	lies Miscellane	ous Office Su	<b>pplies</b> Totals	Invo	oice Transactions	2	\$155.22
Account 734.13 - Supplies	Freight									
18580 - CANTON HOTEL & RESTAURANT SUPPLY	384418	Paper Towels and Toilet Paper, as needed in 2020	Edit		10/19/2020	10/19/2020	10/19/2020			4.00
				Account 734.1	3 - Supplies F	reight Totals	Invo	oice Transactions	1	\$4.00
Account 734.58 - Supplies	Miscellaneous S	Supplies				~				
246 - BIERLY-LITMAN LOCK & DOOR	524620	File Cabinet Keys made for EH Storage	Edit		09/14/2020	10/15/2020	10/15/2020			67.40

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date Payment Date	Invoice Amount
Fund 7601 - Health Fund	aturation.								
Department <b>301001 - Health - Admini</b> Account <b>734.58 - Supplies</b>		Supplies							
18580 - CANTON HOTEL & RESTAURANT	384418	Paper Towels and	Edit		10/19/2020	10/19/2020	10/19/2020	)	1,128.54
SUPPLY	561110	Toilet Paper, as needed			10,10,2020	10, 19, 2020	10,19,2020		1/120101
		in 2020							
			ccount <b>734.58</b>	- Supplies Mis	cellaneous Su	pplies Totals	Inv	oice Transactions 2	\$1,195.94
Account <b>734.71 - Supplies</b>						00/05/0000			154.00
9789 - DELL MARKETING L.P.	10418916136	Laptop, docking station, Office/Acrobat Pro - D./ Thompson	Edit		08/26/2020	09/25/2020	10/20/2020	J	154.09
		, ,	734.71 - Supp	lies Computer	Equip (\$0-\$99	99.99) Totals	Inv	oice Transactions 1	\$154.09
Account 747.14 - Refunds,	Claims and Rei	mbursements Reimbu	rsements			2			·
1364 - OHIO DIVISION OF REAL ESTATE	Sept20 Burial	Burial Permits -	Paid by Check	C	10/02/2020	10/02/2020	10/15/2020	) 10/15/2020	360.00
	Pe	Reimbursement to the	# 670338						
1941 - TREASURER STATE OF OHIO	21200533	State for 2020 2020 Quarterly Tech	Daid by Chad		10/07/2020	10/30/2020	10/20/2020	10/20/2020	56,205.52
1941 - TREASURER STATE OF OHIO	21200555	Fees for Vital Statistics	Paid by Check # 670546		10/07/2020	10/30/2020	10/20/2020	) 10/20/2020	50,205.52
Nature El Bey	Cust. Refund	Refund to Customer for		2	10/15/2020	10/15/2020	10/20/2020	10/20/2020	50.00
·		Birth Certificates not	# 670550						
		issued							
Account 759 47 Conital C		count 747.14 - Refunds	1	Reimbursemen	ts Reimburse	ments lotals	Inv	oice Transactions 3	\$56,615.52
Account <b>758.47 - Capital C</b> 9789 - DELL MARKETING L.P.	10418916136	Laptop, docking	Edit		08/26/2020	09/25/2020	10/20/2020		1,844.77
9769 - DELL MARKETING L.P.	10410910130	station, Office/Acrobat	Euit		08/20/2020	09/25/2020	10/20/2020	)	1,044.77
		Pro - D./ Thompson							
		Account <b>758.47 - Cap</b>	ital Outlay Co	mputer Equipn	nent \$1000 - s	<b>\$5000</b> Totals	Inv	oice Transactions 1	\$1,844.77
			Departmen	t <b>301001 - Hea</b>	lth - Administ	ration Totals	Inv	oice Transactions 17	\$63,648.30
Department 303001 - Nurses									
Account 705.06 - Professio									
51158 - JON ELIAS M.D.	Sep-20	Medical Director	Paid by Check	(	10/01/2020	10/05/2020	10/14/2020	) 10/14/2020	1,000.00
		Services for 2020 Account <b>705.06 - P</b>	# 670286 rofessional Se	rvices Other P	rofessional Se	rvices Totals	Inv	oice Transactions 1	\$1,000.00
					ent <b>303001 - N</b>			oice Transactions 1	\$1,000.00
Department <b>304001 - Lab</b>				2 opti din					<i>q2)0000000000000</i>
Account <b>705.06 - Professio</b>	onal Services Ot	her Professional Servio	ces						
51563 - STERICYCLE	1010208277	Infectious Waste	Paid by Check	C	09/30/2020	10/30/2020	10/15/2020	) 10/15/2020	95.26
		Disposal, as needed in	# 670352						
	Can (Oat20 Lab	the Lab in 2020			10/20/2020	10/20/2020	10/20/2020		242.00
34284 - REAM & HAAGER LABORATORY	Sep/Oct20 Lab	Water Testing Services, as needed in 2020	, Eall		10/20/2020	10/20/2020	10/20/2020	)	342.00
51652 - WESTERN RESERVE WATER	146506	DI Water System for	Edit		05/14/2020	10/21/2020	10/21/2020	)	30.00
SYSTEMS INC	w/Credit	Lab				s, ==, == <b>=</b> •	-,, -•=•		
		Account <b>705.06 - P</b>	rofessional Se	rvices Other Pi	rofessional Se	rvices Totals	Inv	oice Transactions 3	\$467.26

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date Payment Date	Invoice Amount
Fund 7601 - Health Fund									
Department 304001 - Lab									
Account 734.11 - Supplies					10/00/0000	10/05/0000	10/00/0000		24.00
43051 - SYNCB/AMAZON	445675969943	Toner Cartridge for Lab Printer	) Edit		10/08/2020	12/05/2020	10/20/2020	)	24.89
		Account	734.11 - Suj	oplies Miscellane	ous Office Su	<b>pplies</b> Totals	Inv	oice Transactions 1	\$24.89
Account 734.13 - Supplies	Freight								
43051 - SYNCB/AMAZON	445675969943	Toner Cartridge for Lab Printer	9 Edit		10/08/2020	12/05/2020	10/20/2020	)	5.99
				Account <b>734.1</b>	3 - Supplies F	reight Totals	Inv	oice Transactions 1	\$5.99
Account 734.58 - Supplies									
52320 - ANSELL HEALTHCARE PRODUCTS LLC	21018080	STI Clinic Supplies - from Ansel Health Products	Edit		08/21/2020	09/20/2020	10/21/2020	)	117.90
		A	ccount 734.5	8 - Supplies Mis	cellaneous Su	pplies Totals	Inv	oice Transactions 1	\$117.90
Account 776.13 - Members	hip dues & Fee	s Membership Dues an	d Fees						
19733 - CLIA LABORATORY PROGRAM	# 36D0672229	CLIA Laboratory User Fees, 12/13/20-	Edit		10/21/2020	11/20/2020	10/21/2020	)	180.00
		12/12/2022	<b>.</b>	0. 5 Manubar	- Lin Door	I E T-t-l-	Ture		
		Account 776.13 - Mem	bership dues					oice Transactions 1	\$180.00
Description and 202001 First income to LL				Depa	rtment <b>304001</b>	Lad Totals	IUA	oice Transactions 7	\$796.04
Department 307001 - Environmental H		ration							
Account 713.13 - Utilities T 51874 - VERIZON WIRELESS	9863552778	Cell Phone Service for	Daid by Cha		09/23/2020	10/15/2020	10/13/2020	10/12/2020	49.61
51674 - VERIZON WIRELESS	9003552770	EH Director, 2020	Paid by Chee # 670269			10/15/2020			
				Account 713.13 -	Utilities Tele	phone Totals	Inv	oice Transactions 1	\$49.61
Account 734.58 - Supplies									
43051 - SYNCB/AMAZON	466865993548	for EH, as needed			10/03/2020		10/15/2020		62.28
				8 - Supplies Mis	cellaneous Su	<b>pplies</b> Totals	Inv	oice Transactions 1	\$62.28
Account 776.13 - Members	-								
7335 - HUNTINGTON NATIONAL BANK	EH Licenses	2020 Licenses for Environmental Health			10/12/2020		10/16/2020	) 10/16/2020	163.50
		Account 776.13 - Mem	bership dues	& Fees Member	ship Dues and	<b>I Fees</b> Totals	Inv	oice Transactions 1	\$163.50
		Department	t <b>307001 - E</b> i	nvironmental He	alth Administ	ration Totals	Inv	oice Transactions 3	\$275.39
Department 308001 - OPHI									
Account 734.13 - Supplies									
43051 - SYNCB/AMAZON	R.Knight PC	INVOICE #443668639433, 464338584988	Edit		09/08/2020	12/05/2020	10/20/2020	)	14.45
		000000000		Account <b>734.1</b>	3 - Supplies F	reight Totals	Inv	oice Transactions 1	\$14.45

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date Payment Date	Invoice Amount
Fund 7601 - Health Fund									
Department 308001 - OPHI									
Account <b>734.14 - Suppli</b>	es Computer Sup	plies							
43051 - SYNCB/AMAZON	R.Knight PC	INVOICE	Edit		09/08/2020	12/05/2020	10/20/2020		89.80
		#443668639433,							
		464338584988					_		
			Account	734.14 - Supplies	Computer Su	<b>pplies</b> Totals	Inv	oice Transactions 1	\$89.80
Account <b>734.71 - Suppli</b>	es Computer Equ	ıip (\$0-\$999.99)							
43051 - SYNCB/AMAZON	R.Knight PC	INVOICE	Edit		09/08/2020	12/05/2020	10/20/2020		289.43
		#443668639433,							
		464338584988					-		+200.12
				pplies Computer	Equip (\$0-\$99	<b>99.99)</b> I otals	Inv	oice Transactions 1	\$289.43
Account <b>758.47 - Capita</b>	I Outlay Compute	er Equipment \$1000 -							
43051 - SYNCB/AMAZON	R.Knight PC	INVOICE	Edit		09/08/2020	12/05/2020	10/20/2020		1,899.00
		#443668639433,							
		464338584988					-		+1 000 00
		Account <b>758.47 - C</b>	apital Outlay					oice Transactions 1	\$1,899.00
				Departr	nent <b>308001 -</b>	<b>OPHI</b> Totals	Inv	oice Transactions 4	\$2,292.68
				Fund	7601 - Health	<b>Fund</b> Totals	Inv	oice Transactions 32	\$68,012.41
* = Prior Fiscal Year Activity						Grand Totals	Inv	oice Transactions 131	\$330,161.28



- a. Nursing /WIC
- b. Lab
- c. OPHII Verbal report. Ohio Department of Health Violence and Injury Prevention Program Integrated Access and Infrastructure Grant included.
- d. Environmental Health
- e. Air Pollution Control
- f. Vital Statistics
- g. Fiscal
- h. Health Commissioner
- i. Performance Management

# **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	5	46	179
Tuberculosis (TB) Mantoux	4	7	57
Travel	1	4	50
S.T.I.	9	47	329
C.T.R. Clinic	0	0	7
C.T.R. – # Qualified & Tested	0	0	4
C.T.R. – Appointments		7	41
Field/Outreach Testing		0	6
SWAP	4	312	2,140
SWAP Testing		0	6
SWAP Vaccination Clinic	4	30	46
Hepatitis A Outbreak Clinic	2	4	4

#### **DENTAL SEALANT PROGRAM**

	Students	YTD	Students	YTD
	Screened	Screened	Sealed	Sealed
Dental Sealants	0	916	0	518

#### **HIV TESTING**

	Month	YTD	HIV+ Month	HIV+ YTD	Discordant	Discordant YTD
Tests Performed	12	88	1	7	0	0
Results Given	12	88	1	7	0	0

#### **HIV INFECTION**

	HIV (900) Month	AIDS (950) Month	HIV (900) YTD	AIDS (950) YTD
Canton City	2	0	11	0
Stark County*	1	0	7	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		# ATTE	NDING
	Month	YTD	Month	YTD
Nursing School Students/Physician Affiliations			0	5
STD/HIV Programs (Quest) – Goal 8 programs per year				
Communicable Disease Programs	0	0	0	0
Health Promotions / Fairs (Goodwill Parenting talks)	0	6	0	304
Get Vaccinated (GV) Ohio Grant – Maximizing Office Based Immunization Programs (MOBI) & Teen Immunization Education Sessions (TIES) – Goal of 25 per grant year July 1 <sup>st</sup> – June 30 <sup>th</sup>	0	8		
Get Vaccinated (GV) Ohio Grant – Immunization Quality Improvement for Providers (IQIP) – Goal of 7 per grant year July $1^{st}$ – June $30^{th}$	0	0		
DIS Interviews and/or Visits	14	110		
Linkage to Care visits	0	5		
PAPI (Prevention Assistance Program Interventions) referrals	4	32		
PAPI (Prevention Assistance Program Interventions) enrollment	2	9		
Bureau for Children with Medical Handicaps (BCMH) and PHN Consultative Service Home Visits/Contacts [Goal – 90% of caseload will be contacted annually July1st-June 30 <sup>th</sup> ]	9	52		

# WIC Division Monthly Caseload Report Assigned Caseload for Canton WIC FY20: 2,061 Assigned Stark Project Caseload FY20: 5,437

Assigned Caseload for Canton WIC FY20: 2,061 Assigned Stark Project Caseload FY20: 5,437							
WIC Fiscal Year 2020 October 2019 – September 2020							
	Canton City	Total for Stark Project					
October 2019	2,166	5,563					
November 2019	2,082	5,410					
December 2019	2,030	5,251					
January 2020	2,029	5,212					
February 2020	1,988	5,153					
March 2020	1,990	5,140					
April 2020	1,980	5,077					
May 2020	1,937	4,993					
June 2020	1,967	5,035					
July 2020	1,943	5,042					
August 2020	1,986	5,113					
September 2020	1,970	5,158					

# **Canton City Health Department**

# September 2020 (Meeting 10/26/2020)

# LABORATORY

Water						
Number of Tests	Positive Tests	YTD Samples Tested	YTD Samples Positive	Prior 3 Yrs, YTD Avg	Prior 3 Yrs, YTD Positive Avg	
203	86	1217	377	1167	394	
51	7	340	27	375	40	
47	11	439	27	143	2	
48	0	190	2	58	4	
	Tests           203           51           47	Number of TestsPositive Tests203865174711	Number of TestsPositive TestsYTD Samples Tested2038612175173404711439	Number of TestsPositive TestsYTD Samples TestedYTD Samples Positive20386121737751734027471143927	Number of TestsPositive TestsYTD Samples TestedYTD Samples PositivePrior 3 Yrs, YTD Avg203861217377116751734027375471143927143	

In addition to our routine water testing, we performed Sand Rock quarterly bottle and cap testing and QC testing on sample bottles for Holmes Laboratory.

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	8	0	91	11	148	19
N.G.U.	8	7	90	58	148	90
Gonorrhea-culture	0	0	66	1	400	13
Oxidase Reflex	0	0	38	3	273	22
Culture Gram Stain Reflex	0	0	3	2	22	21
Sugar Confirmation Reflex	0	0	2	1	21	13
Gonorrhea-Gene amp.	44	1	344	24	534	21
Chlamydia-Gene amp.	44	5	344	28	534	47
Syphilis Serology Qualitative	27	5	233	29	546	28
Syphilis Serology Quantitative	5	5	29	29	28	28
Candida	10	0	85	6	200	32
Gardnerella	10	5	85	44	200	95
Trichomonas	10	3	85	9	200	30
Pregnancy-urine	0	0	2	0	27	1
HIV screen	12	1	89	7	421	6
HIV Insti Confirmatory	1	1	8	8	5	4
Blood Lead	0	0	0	0	13	1
HCV Antibody screening	1	0	4	3	34	5

Our CLIA inspection took place on 9/21/2020. Our inspector, Bernadette Porfilio, found no citations and was impressed with our PT documentation and Cepheid validation.

Proficiency testing for lead was completed in August and we received a 100%.

There has been an extreme manufacturer shortage of our Chlamydia and Gonorrhea testing cartridges and we are expecting challenges in getting our orders fulfilled.

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	19	19	130	130	119	119
Other Exams	0	0	3	2	6	4
Misc. (insects, etc.)	0	0	1	0	2	2



# Ohio Department of Health Violence and Injury Prevention Program Integrated Access and Infrastructure Grant

2019-2020 Process Evaluation Report ODH Grant Project #0762001IN0120/IN0221

# Introduction and Overview

Canton City Public Health (CCPH) located in Stark County. As one of four collaborative health departments in Stark County, CCPH oversees and manages a needle program and provides harm reduction services in Stark County including the distribution of naloxone kits in collaboration with CommQuest through Project DAWN. Noting concerning changes in the percentage and rate of unintentional overdose deaths in Stark County by Race from 2015 to 2018, CCPH worked with Pastor Walter Moss to coordinate through the Interdenominational Ministers' Association of Stark County and Vicinity to partner with churches that have a trusted role in the community to distribute naloxone. In the project narrative, success was noted to be indicated by the establishment of at least one fixed naloxone site in the community as well as the number of kits distributed through the site.

# **Evaluation Model**

Most program evaluation concentrates on outcomes. Outcome evaluations help tell the story of how an initiative impacts change. A full logic model approach includes aspects of formative evaluation (inputs, activities, and participation). One form of formative evaluation is also known as process evaluation. Process evaluation can help agencies explore and tell the story of how an initiative's outcome or impact was achieved. Process evaluation allows agencies to study how an initiative develops, its structures, supporting communication and marketing, and barriers and successes. This is both informative to the agency but also can be shared with peers and others to encourage replication of key initiatives. The following evaluation report focused on one naloxone distribution strategy (through the African American faith community) with a concentration on inputs, activities, and participation and some limited outcome variables.

# Logic Model Components

# Inputs

- IN21 grant available naloxone
- Peer Outreach Specialist
- Canton City Public Health personnel
- Faith-Based Partners/IMASCV

# **Outputs – Activities**

- Met with the Medical Director to review training and changes to protocols
- Identified and worked with emerging faith-based partners to train and distribute Naloxone kits
- Worked with current community partners to train and distribute Naloxone kits
- Required signature of naloxone recipient that they received training and are comfortable administering naloxone in the event of an opiate overdose
- Collected Project DAWN Intake Registration Form
- Distributed Naloxone kits
- Engaged in media campaign to raise awareness around opiate crisis and role of Naloxone kits

# **Outputs – Participation**

- # kit requests
- # kits distributed
- # kits distributed by strategy
- Naloxone Intake Form
  - o Age

- o Gender
- Race/Ethnicity
- o County
- Health Insurance Status
- IV drug use
- Formal treatment
- Inpatient treatment within 30 days
- Jail or correctional facility within 30 days
- Overdose history
- Zip code of distribution
- How participants heard about program

#### Outcomes

• Knowledge/Perception Pre-Post Training Assessment

# **Evaluation Questions**

# Broad Questions

#### Inputs

- 1. Are the inputs sufficient to accomplish the goals of this initiative?
- 2. Have we identified and addressed barriers or limitations to our implementation and evaluation of the initiative?
- 3. What communication methods worked best internally, with our partners, and with the community?
- 4. What communication methods needed to be adjusted internally, with our partners, and with the community?

#### Outputs

- 1. What training and protocol changes were made with the assistance of the Medical Director?
- 2. What are the process successes through the lens of our key staff, agency staff, and partners?
- 3. Did the perceptions and knowledge of overdoses and the use of Narcan change for our partners through training?
- 4. How many Naloxone kits were requested?
- 5. What patterns were evident in the demographic counts of initial orders?
- 6. How many of those requesting naloxone have ever used intravenous drugs?
- 7. How many of those requesting naloxone have been in a formal treatment program within the last 30 days?
- 8. How many of those requesting naloxone have been released from jail or a correctional facility within the last 30 days?
- 9. How many of those requesting has ever over dosed? If yes, how many times?
- 10. How many times have those requesting naloxone witnessed someone overdosing?
- 11. How many times have those requesting naloxone administered (used) naloxone on someone else?

#### Outcomes

1. Are at least 10-12% of kits distributed to African Americans through the faith-based initiative?

- 2. For those in training, has knowledge and/or awareness of naloxone increased in the targeted communities?
- 3. What is the baseline of African American overdoses in Stark County?

# Methods

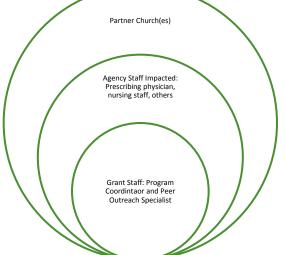
# Data Collection Tools

Data was be collected formatively through interviews and focused conversations with Canton City Public Health staff, the Medical Director, and participating pastors.

Documents used in process and policies were also reviewed including:

- Information shared with pastors/churches
- Template Policy
- Training Materials
- Protocol added to Canton Health District
- Sign-in sheets
- Meeting notes
- Project management spreadsheet
- Chat Board used by project leads

Summative data was collected through the Project DAWN Intake Registration form and internal spreadsheets. Additional, pre-post knowledge and perceptions data of those trained to distribute kits was



collected through an instrument adapted from Brief Opioid Overdose Knowledge Questionnaire (Dunn et al, 2016) and Opioid Overdose Attitudes Scale (Williams, et al, 2013).

# Results

# Inputs

#### Are the inputs sufficient to accomplish the goals of this initiative?

The inputs were sufficient to accomplish the goals of the faith-based strategy including the hiring of a peer outreach specialist, the support of CCPH staff, and the partnership with faith-based leaders in the African American community. The peer outreach specialist was hired and has done a great job developing relationships with the pastors and partners, organizing and following up on train the trainer sessions, providing support for partner churches, and overseeing implementation of policies and protocols. Her role would not have been possible without this grant.

The Peer Outreach Specialist who worked closely with the Pastors on implementation does not have a background in Public Health. While this could have been a barrier, she brought an outsider perspective and set of questions that complimented the Program Coordinator's deep experience and credentials. The Program Coordinator has her MPH, has worked at CCPH for six years, and is an epidemiologist. She provided the deep public health perspective. The Peer Outreach Specialist brought a novice lens that anticipated questions and concerns partners and churches may have about policies and procedures and whose focus on people provided

strong relationships with partners and pastors. The Peer Outreach Specialist was trained on policies and procedures internal to CCPH and as part of the naloxone distribution program.

The medical director and CCPH staff have demonstrated commitment to a harm reduction approach and have sought to balance ethical and legal requirements with increased community access to naloxone. In fact, they have gone above expectation in their flexibility and commitment to problem solving in providing more broad access to naloxone while meeting ethical and legal requirements.

Finally, Pastor Walter Moss and the Interdenominational Ministerial Association of Stark County and Vicinity (IMASCV) have been steadfast partners in developing a faith-based strategy providing access to naloxone kits in the African American community through a train the trainer model with pastors and church member volunteers.

Due to the current pandemic, adjustments have been made to the strategy and will continue to be made. The three primary inputs of a peer outreach specialist, CCPH personnel, and the faith-based partners/IMASCV have worked well together despite the current pandemic-related challenges with face-to-face training and delivery of naloxone. The inputs have been sufficient under typical circumstances, however, there are significant challenges to implementation under COVID-19.

# Have we identified and addressed barriers or limitations to our implementation and evaluation of the initiative?

#### Updating Orders, Policies, and Procedures

Amanda Archer, MPH program coordinator for this grant worked closely with the Director of Nursing and the Medical Director to explore and develop policies and procedures. CCPH lead personnel researched Ohio naloxone laws and met with others already distributing naloxone to explore options. Initial barriers included limited knowledge of what dispensing protocols were legally required under the medical director's license. Initially, the grant funded strategies assumed that CCPH staff would need to personally distribute naloxone. When it was discovered that the Medical Director could write a standing order to allow partners to assist in the distribution of naloxone provided that the partners follow the protocol, the Medical Director wrote an updated standing order. The Medical Director voiced a commitment early on in planning as well as in a subsequent evaluation interview to developing trust as well as appropriate policies and procedures to widen the populations reached with naloxone distribution.

The updated order allowed for a significant expansion in protocols but created additional concerns about providing guidance for partners (e.g. partner churches) to secure medication, include the prescription, keep accurate paperwork, etc. These concerns were addressed by a combination of clear paperwork shared with the partner churches and frequent communication from the peer outreach specialist.

#### **Engaging Partners**

The Program Coordinator reached out to Pastor Walter Moss as a community partner in helping to identify potential partner ministers and pastors in the African American community through the Interdenominational Ministers' Association of Stark County and Vicinity. In addition to his work with the Ministers' Association, Pastor Moss is project director of the Community Initiative to Reduce Violence (CIRV) in Stark County. He was instrumental in working with the grant-hired Peer Outreach Specialist to establish relationships with ministers/pastors interested in participating. While the goal was to establish at least one fixed naloxone site in the community, five churches stepped up to participate.

#### Canton City Public Health ODH Grant Project #0762001IN0120/IN0221

#### **Training and Implementing Protocols**

A train the trainer model was developed in partnership with CommQuest which included a detailed outline of training deliverables and a shared Power Point presentation. CommQuest worked with the Peer Outreach Specialist to provide joint trainings to churches. Scheduling trainings was a minor hurdle initially, but the Peer Outreach Specialist worked closely with pastors to identify joint trainings as needed with three of the five participating churches trained by early January and the remaining trainings completed by February.

The Peer Outreach Specialist worked closely with partner churches/pastors to identify barriers to protocol implementation on site (such as secure storage) and addressed gaps. Pastors initially expressed concern around liability, but once they understood how naloxone is administered and that it won't harm people, they not only provided their buy-in, but they were all-in in terms of leveraging their names, leadership, and networks in spreading the word of the new initiative. Some church-based volunteers expressed language around the stigma of addiction or were not comfortable giving out naloxone. Pastors worked to address volunteer perceptions and identified volunteers with medical or other backgrounds that would be comfortable with a harm reduction approach. Protocols, while stringent, proved more of a positive than a barrier as they demonstrated to churches the legitimacy of the program and allayed fears around safety and legality.

#### **Marketing and Participation**

A limited marketing budget for the partner churches meant that the costs for printing flyers was absorbed by pastors. Updateable signs with distribution dates and times were provide to churches. Pastors reported finding creative cost saving ways of using word of mouth and social media to augment their limited marketing budgets. Additional media coverage was helpful with newspaper, Cleveland media, and KSU/OSU NPR, and Mount Union radio coverage.

Three of the five participating churches faced early hurdles with building (roof damage) and pastor health challenges. Those church partners were just emerging from these challenges when COVID-19 hit.

Pastors had begun pre Covid-19, working with additional partners such as those providing transitional housing. Rather than waiting for people to come to them, they started participating in minority health fairs, using church vans to pick up folks with transportation challenges, and other strategies to reduce barriers to accessing naloxone kits and the accompanying training. Due to COVID-19, only one of the sites saw broader community impact. However, one of the pastors, bought a traveling lock-box when he noticed folks were not coming to the church and began taking naloxone with him to areas where it might be needed. The impact of this emerging strategy is still to be determined.

A hope of the CCPH staff was to have churches integrate naloxone distribution into already scheduled activities such as food and clothing distribution days. Some pastors worried that it would be too complex or too much of a burden on their volunteers. The Peer Outreach Specialist had begun to work with churches on integration strategies. In particular, she was working with one pastor to expand word of the initiative through the classes, support groups, and Family Matters Resource Center he helped found and facilitate. Another pastor was working with the Peer Outreach Specialist to allow for distribution during a food pantry at the Drop-in Center. Both strategies were put on hold though due to COVID-19.

As the global pandemic began to shut down most activity in early March, CCPH worked to get a mail order process up and running for naloxone. Periodic posts to social media were necessary to keep the opportunity for access in view of the community. In May, the Project Coordinator reached out to verify that faith-based leaders had the link and were sharing through their social media. The flyer for naloxone distribution has also been updated with a QR code for the online mail-order website.

Some church-based distribution remains shut down, but a few churches have integrated the distribution into other services. One church is providing distribution of naloxone in their sanctuary using a side door with one person entering at a time.

What communication methods worked best internally, with our partners, and with the community?

#### **Internally**

Internally, the Program Coordinator and Peer Outreach Specialist physically work next to one another. They have also used MS Teams chat function to keep a running discussion of tasks and follow-up communications particularly at the beginning of the initiative when policies and protocols were still being established. All files were kept on a shared drive and updated as needed. Frequent meetings early on with the Director of Nursing and the Medical Director also assisted in establishing policies and protocols.

The Peer Support Specialist used phone, email, and when appropriate face to face meetings with pastors. The Pastors felt that the Peer Support Specialist did a great job of organizing and communicating throughout the initiative.

#### **Externally**

Externally, a journalist heard the Project Coordinator speak at an Opiate Task Force meeting which led to a number of media opportunities including print and radio. Additionally, social media was utilized both through CCPH and with partners. The use of social media has also led to individuals reaching out to the Project Coordinator and Peer Support Specialist through private messaging with questions and to be connected to resources.

Churches were provided signs to put in their window or yard to communicate to the community the time and place availability. Some churches have also put signs in high traffic areas such as bus stops.

In terms of identifying partner churches, communication with the Interdenominational Ministers Administration (IMA) has been invaluable to the process. The goal for the faith-based strategy was to have one location for distribution. Five churches offered to be locations.

#### What communication methods needed to be adjusted internally, with our partners, and with the community?

Due to the pandemic, when most non-essential activities were shut down in March and April, communication was done primarily via phone and online. As non-essential activities began to open up, limited face-to-face meetings with pastors and CCPH staff began again. Communication is still largely being done via phone and MS Teams.

#### Outputs

#### What training and protocol changes were made with the assistance of the Medical Director?

- 1. Updates were made to CCPH's policy: Overdose Education and Naloxone Distribution Program (OENDP)
- 2. Updates were made to the Medical Director's Standing Order for Personally Furnishing Naloxone (CCPH Policy: 200-012)

- 3. A CCPH Template was provided to churches as a basis for them to create/adopt their own policy for naloxone distribution in-line with CCPH's OENDP policy
- 4. A Partnership Agreement with CCPH was created and shared with churches (CCPH Form 200-021-02-F)
- 5. Training protocols were updated with the assistance of CommQUEST
- 6. A CCPH Certificate of Completion of training was created
- 7. A sheet for documenting individual names of those who were trained was created with a reminder that if an individual is no longer employed, CCPH must be notified
- 8. Procedures for viewing and making recommendations for secure storage area including CCPH 200-021-02-A How to Store Naloxone) was developed
- 9. Naloxone intake forms were updated for use with partners
- 10. Records of receipt (CCPH 200-021-05 -F Receipt of Stock) was developed
- 11. Records of inventory (CCPH 200-021-05-F Naloxone Inventory Log) was developed
- 12. Records of distribution/dispensing (CCPH 200-021-04-F Dispensing Log) was developed
- 13. Label Template (CCPH 200-021-07-F Label Template) was developed
- 14. Procedures for submission of paperwork from partner churches were developed and communicated
- 15. A How to Partner with CCPH for Naloxone Distribution checklist was created

### What are the process successes through the lens of our key staff, agency staff, and partners?

- One of the misconceptions of harm reduction work in the community can be a sense that it is a breaking of the rules or going rogue. Having clear policies and procedures helped faith-based partners understand there is an underlying structure and legal requirements that are part of rather than undermining the system.
- The infrastructure for working with partners on distribution required a great deal of thought, discussion, research, and work. The CCPH leaders are proud of what they have built and excited about what work can be done with this foundation in the future.
- The onboarding of a Peer Outreach Specialist with a deep understanding of the substance use issues and a relational approach has been a strength in establishing long term partnerships in the faith-based community.
- The initial partnership with Pastor Moss and the IMASCV has created a foundation for additional CCPH initiatives with the faith-based community and especially within the African American community. The pastors were nominated and won a HOPE Award which is given by Stark Mental Health Addiction and Recovery annually to honor people and organizations who are making strides and influencing change to advance behavioral health in Stark County.
- This evaluation is concentrating on one strategy of the work, but a strong rhythm and momentum has been developed across all of the partner groups.
- Pre-pandemic, the pastors felt that they were beginning to hit their stride meeting folks where they are at and partnering with others who are meeting community needs to communicate addiction related resources in particular access to naloxone.

# Did the perceptions and knowledge of overdoses and the use of Narcan change for our partners through training?

For the pastors and their volunteers, the training served to reduce stigma, brought awareness to the risks of overdose and resources for addressing an overdose, and increased the knowledge and understanding of church volunteers of the role naloxone plays in reversing an overdose. Pastors in particular moved dramatically from concern about liability and safety to become ambassadors for harm reduction in the community. See the outcomes section below for more details.

## How many Naloxone kits were requested?

64 kits were requested with a total of 74 kits given. Most of these were distributed prior to the impact of the pandemic on the ability of churches to offer face-to-face distribution.

# What patterns were evident in the demographic counts of initial orders?

Below are descriptive statistic summaries by demographic variable.

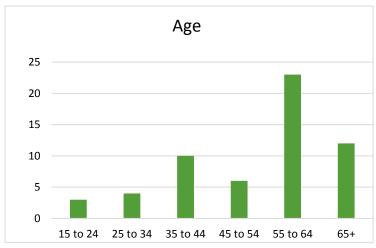
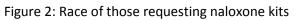
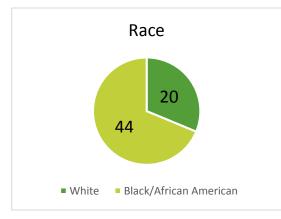
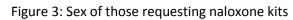
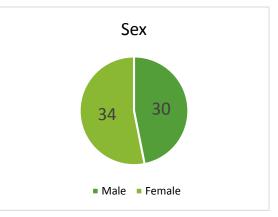


Figure 1: Age of those requesting naloxone kits.









The largest age category for naloxone distribution was 55 to 64 years old. 44 or 69% of the naloxone kits were distributed to people identifying as Black/African American. There was roughly an equal distribution of naloxone kits to males and females.

Table 1: County of those requesting naloxone kits

County	Count
Stark	60
Summit	1
Wayne	1
Portage	1

Most, 60 out 64 naloxone kit requests were from people who live in Stark County

Table 2: Health Insurance status of those requesting naloxone kits

Health Insurance Status	Count
No Insurance	10
Medicaid	21
Other Insurance	33

The majority of those receiving naloxone kits were insured with Medicaid or other insurance.

Table 3: Zip codes of those requesting naloxone

Zip Codes	Count
44662 (Navarre)	14
44601 (Alliance)	14
44707 (Mount Zion/Community Drop-in Center)	36

The zip codes served were for four of the five churches stepping up to participate in the strategy. In the 44662 and 44601 zip codes, the distribution was largely church-based. Strategies to move beyond those trained at the churches were cut short by COVID-19. In the 44707-zip code, the work had begun to move out into the community. Unfortunately, the cancellation of several events due to COVID-19 also dampened the distribution in that zip code as well.

How many of those requesting naloxone have ever used intravenous drugs?

10 out of 64 (16%) of those requesting naloxone have used intravenous drugs.

How many of those requesting naloxone have been in a formal treatment program within the last 30 days?

13 out of 64 (20%) of those requesting naloxone have been in formal treatment with one person reportedly having been released from an inpatient treatment facility within the past 30 days.

# How many of those requesting naloxone have been released from jail or a correctional facility within the last 30 days?

No one reported having been released from jail or a correctional facility within the last 30 days.

# How many of those requesting has ever over dosed? If yes, how many times?

Four individuals requesting naloxone kits indicated that they had experienced an overdose. Two individuals experienced an overdose once, one person each experienced three and one reported experiencing five overdoses.

## How many times have those requesting naloxone witnessed someone overdosing?

Those requesting naloxone kits were more likely to have witnessed someone overdosing (17 of the 64 requests).

Number of Times Witnessed	Count
Once	3
Twice	7
Three Times	3
Four Times	1
Five Times	0
Six Times	1
Seven Times	1
Eight Times	0
Nine Times	0
Ten Times	1

Table 4: Number of times witnessed someone overdosing

How many times have those requesting naloxone administered (used) naloxone on someone else? Four respondents indicated that they had administered naloxone with 3 having done so once and one respondent reporting having done so twice.

# Outcomes

# Are at least 10-12% of kits distributed to African Americans through the faith-based initiative?

Across all four distribution strategies (Stark County Leave Behind program, ICAN/PATH partnership, OhioCAN partnership, and African Community and faith-based outreach), 954 kits were distributed. A little over 7% were distributed through the faith-based initiative. Of those distributed through the faith-based initiative, 69% were distributed to African Americans.

# For those in training, has knowledge and/or awareness of naloxone increased in the targeted communities?

There was an increase in both naloxone related knowledge for five of the seven items measuring knowledge and all five items measuring awareness of issues for 12 church members across two congregations who participated in a joint CCPH/CommQUEST naloxone train the trainer session on January 21, 2020.

# Perceptions

For the following perceptions, the percentage of church volunteers trained (n=12) in one training, the percentage of those unsure or disagree/strongly disagree decreased.

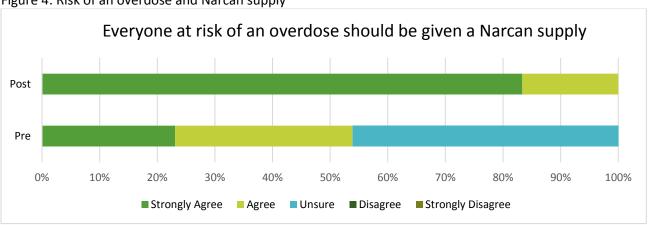
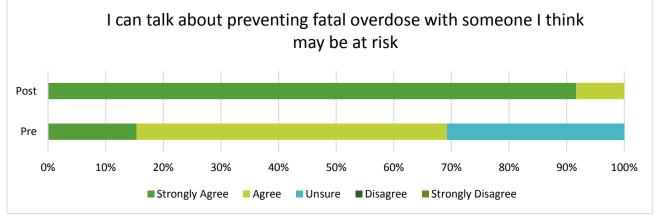


Figure 4: Risk of an overdose and Narcan supply





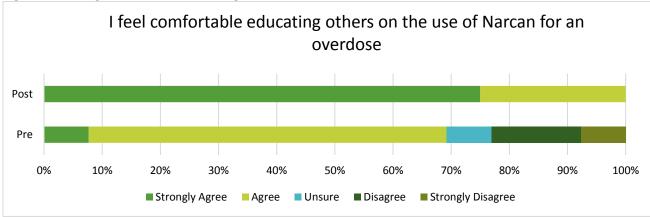


Figure 6: Feeling comfortable educating others on use of Narcan

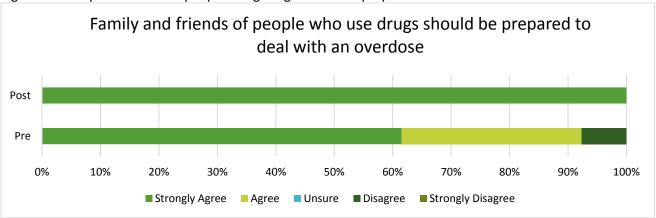
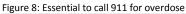
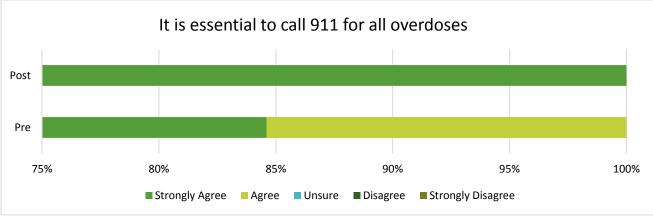
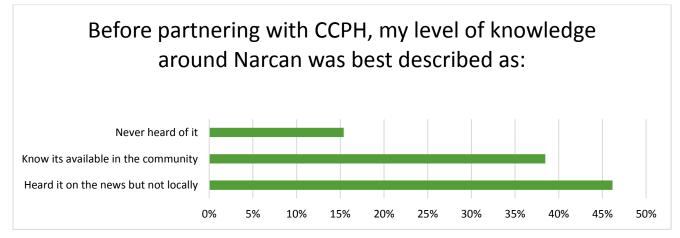


Figure 7: Family and friends of people using drugs should be prepared to deal with overdose





# Knowledge



More participants rated the following knowledge-based items correctly at post assessment than at preassessment:

• Trouble breathing is not related to opioid overdose

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- Clammy and cool skin is not a sign of an opioid overdose
- Rubbing the chest sternum helps you figure out whether someone is unconscious
- Once you confirm the individual is breathing you can place them in a recovery position
- Heroin, OxyContin, and fentanyl are all examples of opioids

One participant who was a pastor of one of the participating churches expressed concern about the personal risk of providing rescue breathing which may explain why more scored correctly on the following item at preassessment than at post-assessment:

• If you see a person overdosing on opioids, you can begin rescue breathing until health workers arrive

There was some discussion in relation to the need to call 911 as it is possible for a person to still experience the effects of an overdose after a dose of naloxone wears off which may explain why all 12 participants had correctly noted that Narcan (naloxone) will reverse the effect of an opioid overdose at pre-assessment but only 9 correctly answered the item at post-assessment.

# What is the baseline of African American overdoses in Stark County?

Stark County's overdose death over the last several years has disproportionately affected the Caucasian population. However, there is an emerging trend that suggests that Stark County is experiencing an increase in unintentional overdose deaths among African Americans. From 2016 (5.9%) to 2018 (12%) the percentage of unintentional overdose deaths has increased. This trend continued into early 2019 with 15.4% of unintentional overdose deaths being African Americans. In 2018, African Americans presented a higher rate of unintentional overdose deaths (26.5 per 100,000) than Caucasians (19.2 per 100,000). Potential sources may be an increase in cocaine use in 2018 and reports that local drug supply of non-opioid substances contain fentanyl and fentanyl analogs.

# Conclusion

Input were sufficient to establish one faith-based naloxone distribution site in the African American community. In fact, five initial sites were established with four remaining. Non-COVID-19 barriers were identified and addressed. However, COVID-19 barriers have proven difficult to overcome.

Overall, process successes included increased knowledge and reduced stigma among pastors and their volunteers, the establishment of relationships with new champions for harm reduction strategies in partnering pastors, and the encouragement of creative strategies to reach more in the African American community. Internal communication was strong despite COVID-19 challenges and new strategies for communicating with the community are being developed that address COVID-19 challenges even if increased distribution counts have not yet emerged.

Although most of the naloxone kits distributed were to church volunteers with broader community distribution just beginning to emerge when COVID-19 hampered efforts, new strategies are emerging and being communicated through the partnerships established in the faith-based community, including a web-based mail order service.

Evaluation and distribution data represent partner efforts from 10/01/2020 through 8/31/2020.

September Board Report 10/26/2020 Environmental Health

#### **RECYCLE CENTER**

The Canton Recycle Center has received assistance from Street Dept. to pave the exit apron and mow the hill. They also loaned us weed eaters until ours could be repaired. We have approval to receive quotes for asphalt pads under dumpsters and drains to prevent flooding into the building. City Engineering is assisting with that project. We are also receiving quotes from ProTech with the assistance of City IT to install automatic gates and a key fob on the main man door to the office. We are looking into the possibility of paving the customer drive thru area and installing an overhang. The previous mouse infestation is under control and I am regularly in touch with Orkin Pest Control for updates. Timeclocks and cameras are working well.

On October 2, we have stopped using paper consent forms and switched to iPads. The iPads use a swipe-method with driver's licenses to capture and store customer consent and personal information. This will speed up waiting times and enhance data collection. We are informing customers now about the new appointment system that will be starting soon. Official announcements will be made soon. Appointments can be made by phone or internet, and for the first few months of the new appointment system, no customers will be turned away if they do not have an appointment.

Due to high turnover of staff and the unpredictability of Community Service Workers to assist on collection days, we are in discussion with the Stark County Fatherhood Coalition to see if there is any potential for a partnership to help their clients earn money for child support while staffing our Recycle Center.

#### NUISANCE

A QI Project is currently underway to increase cleanup fees and decrease the amount of time it takes to move from a First Order to a Cleanup Day. Another issue causing us to fall behind on cleanups is the age and constant maintenance of our dump trucks. We have two dump trucks, but one or the other is regularly in the shop and unable to be used on a cleanup day. Now is the time to consider the purchase of another truck. Nuisance and Recycle Staff are regularly cleaning up used hypodermic needles and a formal training will be scheduled to teach them proper handling, disposal, and bloodborne pathogens.

One open dumper has been caught and prosecution is currently underway. Law Dept. is pushing for two felony charges.

#### FOOD UPDATES

We applied for a \$2,500 FDA grant to conduct a Food Safety Program Self-Assessment. Upon successful completion of this activity, including a written Final Report and Plan of action, we will be eligible to apply for a \$10,000-\$20,000 grant in 2021. This financial support could be used to purchase a new Food Program software system required by ODH. The new system will replace both HDIS and HealthSpace. While ODH is requiring this new software, no funding has been promised to help us purchase the software. If we received the \$10K-\$20K grant, I would put it toward the software upgrade for our Food Safety Program.

September Board Report 10/26/2020 Environmental Health

The COVID-19 pandemic has put me in touch with the Stark County Fair Board on a regular basis to discuss the many events that take place in their buildings throughout the year, including retail shows. We are currently meeting once each month to discuss these upcoming events, and this has resulted in a positive partnership with the Fair Board. We are already jointly planning food concessions for the 2021 Fair in an effort to educate our food vendors prior to their arrival. If they are aware of our expectations and state regulations, they will be properly licensed prior to the start of the fair and better prepared for their inspections. This will greatly decrease the amount of time our inspectors spend at the fair with licensing and inspecting out of state and out of town vendors.

#### **EH DIVISION**

Our Division Training will be held on October 15 and will include a morning and afternoon session required by all. A virtual training with ODA about how to conduct a proper food facility inspection will take place in the morning. The afternoon session will be conducted at the Recycle Center by the Joint Solid Waste District. This will include information and training about how to make an appointment at the Recycle Center and which items we do and do not accept. All sanitarians take turns answering phone calls and therefore, all must be able to proficiently and efficiently answer questions regarding food inspections and the Recycle Center. This is part of the necessary cross-training we were previously lacking in EH.

EH received \$20,000 in Capital Funds last year that must be spent by the end of 2020. I will be meeting with architects Motter and Meadows to determine the best use of these finances for the area occupied by EH & OPHII.

# Canton City Public Health 3<sup>rd</sup> Quarter 2020 (Meeting 10/26/2020)

This report represents data from 3<sup>rd</sup> quarter 2020 (July 1, 2020 through September 30, 2020) for the Air Pollution Control (APC) Division.

# PERFORMANCE METRICS DEVELOPMENT:

Each division is to develop one performance metric per program for at least 25% of their programs by 12/31/2020 as part of the CCPH Quality Improvement and Performance Management goals. APC Division staff met in November 2019 to have an initial work session on the development of the APC Performance Metrics and the initial APC Results Framework. The APC Results Framework outlines the majority of the APC activities representing all division programs, their outputs, and the expected outcomes/results those activities are to have. The initial APC Results Framework and an explanation of the outcomes/goals was provided in the which was included in the April 2020 Board Meeting packet.

APC staff meet again on May 1, 2020 for a work session to further refine the Results Framework and to develop the performance metrics. It was determined that other broad outcomes may be needed to better align the Framework with the Ohio EPA and U.S. EPA programs. Further research is being conducted to complete the next revision of the Results Framework, which won't be completed until 4<sup>th</sup> quarter 2020. Therefore, further development of the performance indicators is still underway, and the same performance indicators reported in 1<sup>st</sup> and 2<sup>nd</sup> quarter 2020 are being reported for 3<sup>rd</sup> quarter 2020.

#### PERFORMANCE METRICS FOR 3rd QUARTER 2020:

Below is the data for the initial performance indicators have been developed. The format and detail will likely change in future reports.

#### GOAL: Maintain compliance with the National Ambient Air Quality Standards (NAAQS) in Stark County

> Performance Indicator 1: Attainment status with NAAQS:

Canton APC measures pollutants PM<sub>2.5</sub>, Ozone (O3) and Lead (Pb) for the determination of NAAQS designations for Stark County. U.S. EPA makes designations for each pollutant NAAQS and each time the NAAQS are revised.

- Ozone: Stark County has been designated as Attainment for the 2008 Ozone NAAQS of 0.075 ppm (8 hour) since 2012 and the 2015 Ozone NAAQS of 0.070 ppm (8 hour) since 2018. This is the most recent revision of the Ozone NAAQS.
- $PM_{2.5}$ : Stark County has been designated as Attainment for the 2012  $PM_{2.5}$  NAAQS of 12.0  $\mu g/m^3$  (annual) and 35  $\mu g/m^3$  (24-hour) since 2015. This is the most recent revision of the  $PM_{2.5}$  NAAQS.
- Pb: Canton APC started measuring Pb in 2017 for comparison to the 2016 Pb NAAQS of 0.15  $\mu$ g/m<sup>3</sup> (3-month), but U.S. EPA has not made any designations for Stark County yet.

#### > Performance Indicator 2: Current data shows compliance with NAAQS:

Canton APC measures pollutants PM<sub>2.5</sub>, Ozone (O3) and Lead (Pb) to monitor the current air quality in Stark County. Below is a summary table of Canton APC's ambient monitoring network:

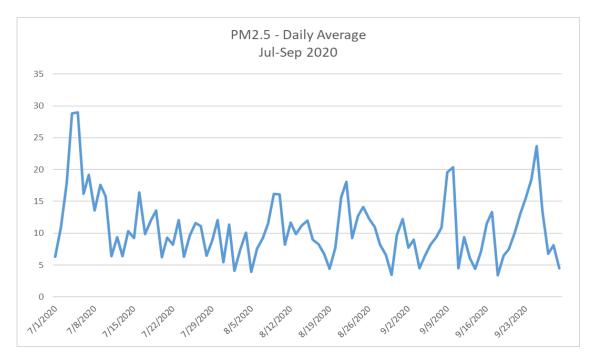
TYPE	NAAQS	ATTAINMENT STATUS	MONITORING FREQUENCY	MONITORING LOCATION
Ozone	0.070 ppm (8 hour)	Attainment	Continuous	Malone College; Brewster; Alliance
PM <sub>2.5</sub>	12.0 μg/m <sup>3</sup> (annual); 35 μg/m <sup>3</sup> (24-hour)	Attainment	3 Intermittent (1 in 3 days)* & 1 Continuous	Canton Fire Station #8*; Canton Health Dept
PM <sub>2.5</sub> Speciation	N/A	n/a (not NAAQS)	Intermittent (1 in 6 days)*	Canton Fire Station #8*
Lead	$0.15 \ \mu g/m^3 \ (3-mth)$	Undetermined & n/a (special study)	1 Intermittent (1 in 6 days) & 1 special study days	Republic Steel

\*Operating the  $PM_{2.5}$  Intermittent and  $PM_{2.5}$  Speciation monitors was suspended on 3/24/20 due to COVID-19 operational impact and resumed on 7/29/20 and 8/1/20, respectively. Operation was suspended for each week Stark County was Level 3 or 4 ODH COVID-19 Advisory Level during the quarter, which occurred once.

- Ozone data for 3<sup>rd</sup> quarter 2020 (July 1, 2020 September 30, 2020):
  - Brewster: 3<sup>rd</sup> quarter 2020 maximum 8-hour average is 0.072 ppm
  - Malone College: 3<sup>rd</sup> quarter 2020 maximum 8-hour average is 0.076 ppm
  - Alliance: 3<sup>rd</sup> quarter 2020 maximum 8-hour average is 0.073 ppm

Although there were a few exceedances of 0.070 ppm (8-hour average) in the 3<sup>rd</sup> quarter (2 at Alliance, 5 at Malone, 3 at Brewster), Stark County is expected to remain in attainment since the ozone NAAQS are based on the annual fourth-highest daily maximum 8-hour concentration, averaged over 3 years.

- PM<sub>2.5</sub> data for 3<sup>rd</sup> quarter 2020 (July 1, 2020 September 30, 2020):
  - Daily average data in chart from the continuous PM2.5 monitor shows compliance with the 35  $\mu$ g/m<sup>3</sup> (24-hour) NAAQS.



- $\circ$  3<sup>rd</sup> quarter 2020 average PM<sub>2.5</sub>: 10.7 µg/m<sup>3</sup> Quarter average shows compliance with the 12.0 µg/m<sup>3</sup> (annual) NAAQS, which is based on an annual average.
- Pb data for  $3^{rd}$  quarter 2020 (July 1, 2020 September 30, 2020): All 3-month averages in the table show compliance with the 0.15  $\mu$ g/m<sup>3</sup> Pb NAAQS

Jan 2020-	Feb 2020-	Mar 2020-	Apr 2020-	May 2020-	Jun 2020-	Jul 2020-
Mar 2020*	Apr 2020*	May 2020*	Jun 2020*	Jul 2020	Aug 2020	Sep 2020
0.04	0.04	0.05	0.03	0.03	N/A	N/A

## 3-Month Rolling Average of Pb in $\mu g/m^3$

\*Past months' values are included in table since final data wasn't available for reporting in previous quarter. Note for N/A: Analysis data for August-September 2020 samples not received due to COVID-19 operational impact. See details below.

#### **OBJECTIVE 1:** Achieve valid ambient air quality data

 Performance Indicator: Achieve at least 75% data capture rate of ambient air quality data (i.e. Quality assured data is to be collected per the frequency indicated in the table no less than 75% of the time)

Pollutant (Site)	Sample Frequency	Data capture rate for July 2020 - September 2020		
PM <sub>2.5</sub> Intermittent (Fire Station #8)	1 every 3 days	61.3%*		
PM <sub>2.5</sub> Intermittent (Health Dept.)	1 every 3 days	100%		
PM <sub>2.5</sub> Continuous	Continuous, hourly averages	99.8%		
PM <sub>2.5</sub> Speciation	1 every 6 days	62.5%**		
Ozone (Alliance)	Continuous, hourly averages	98.1%		
Ozone (Malone)	Continuous, hourly averages	98.6%		
Ozone (Brewster)	Continuous, hourly averages	98.7%		
Lead (Republic)	1 every 6 days	100%		

\* 11 samples missed in July & Sept due to COVID-19 operational impact; 1 sample missed due to malfunction. \*\* 6 samples missed in July & Sept due to COVID-19 operational impact.

#### **OBJECTIVE 2:** Regulated community in compliance with air quality regulations

> Performance Indicator: To be determined

# **CUSTOMER SATISFACTION:**

Each division is to develop one customer satisfaction data collection tool by 3/31/2020 and collect the data by 6/30/2020 as part of the CCPH Quality Improvement and Performance Management goals. The APC Division implemented a Customer Satisfaction Survey on 3/6/2020 for permitted customers after a permit is issued to them or a site visit at their facility is conducted, in order to measure customer satisfaction with these programs. 35 permit issuance surveys were sent from 3/6/2020-9/30/2020 (5 more since last quarter), of which 10 responses (1 more since last quarter) were received (29% response rate; down from 30% last quarter), and all were either "agree" or "strongly agree" level of satisfaction. The average level of satisfaction result for the 10 surveys was 3.8 (up from 3.75 last quarter) [scale: 4 = strongly agree, 3 = agree, 2 = disagree, 1 = strongly disagree], which shows satisfaction with the permit issuance program. Due to COVID-19 impact on operations, no inperson facility site visits were conducted and so those surveys were not applicable from 3/6/2020-9/30/2020.

# APC OPERATIONAL CHANGES DUE TO COVID-19 - UPDATE:

The Ohio COVID-19 response continues to cause the APC Operations to change in order to implement Ohio EPA direction and the Governor's orders. Some phased in resumption of operations has occurred.

All field inspections (asbestos, complaints, facilities, stack tests, etc) continue to be suspended and some allowed with restrictions.

- A handful of off-site observations have occurred for some facility and asbestos complaints occurring in 3<sup>rd</sup> quarter 2020. These typically involve visible emissions and activity observations that can be ascertained from a distance.
- We have been using calls and record reviews as means to inspect during this time.
- The facility Full Compliance Evaluation (FCE) inspections were delayed since March waiting for approval of in-person inspections again. Ohio EPA developed a Virtual Site Visit procedure which was approved for use for 4 FCE inspections on 7/27/20 as well as guidance for completing the FCEs using record reviews and photos. In August, staff started working on our remaining 9 FCE inspections that were committed to being completed by 9/30/2020 per Ohio EPA guidance. 5 FCEs were completed by 9/30/20, 3 FCEs will be completed by 10/9/20, and 1 FCE will be completed by mid-November. The virtual process took longer since the facilities required more time to gather and submit the records versus us reviewing the records on-site.
- Two stack tests occurred without Canton APC inspecting in-person, but they were observed using virtual means (live video streaming, photos/videos sent & reviewed, etc). This format was effective for this type of inspection and may continue to be used in the future.
- The asbestos notification inspections commitment of 15% by 9/30/20 was not achieved. We achieved 5.3% for the 12-month period between October 2019-September 2020. We completed 2 off-site inspections in 3<sup>rd</sup> quarter (July-September) in order to achieve 6% in that quarter. Ohio EPA has approved the use of the virtual site visits procedure for asbestos inspections, which includes live video streaming, but we have not attempted this yet.

Ambient Air monitoring continues to be impacted in several ways:

- Laboratory Analysis of collected samples:
  - The Ohio EPA DES Pb filter analysis Lab was suspended from March until end of May 2020, with limited staffing allowed to ensure social distancing. This has caused excessive delay in analysis results of the Republic Steel Pb ambient air monitor filters being completed and reported.
  - The Republic Steel Pb ambient air monitor filters sampled in March through 1<sup>st</sup> half of May and shipped to the Lab at end of May weren't analyzed by the Lab until June and July 2020 with the QC and finalization of those reports not received until 8/4/20. As shown, the Lab analysis and reporting that was previously taking 2 weeks of sample shipment date is now taking 9 weeks.
    - For each Pb sample result that is elevated, Republic Steel is required to conduct and report an investigation into the cause (Note: this is a requirement of the Findings and Orders enforcement action). Due to the delay of the March samples analysis results not being received until 8/4/20 (4-5 months after sampled), Republic Steel did not have all their video surveillance available to include in their investigation of those elevated Pb samples (since beyond 90-day retention period). This negatively impacted the thoroughness of their investigation. The delays at the Ohio EPA DES Lab are also impacting the effectiveness of this part of the F&Os.

- The Republic Steel Pb ambient air monitor filters sampled in 2<sup>nd</sup> half May through June and shipped to the Lab at the beginning of July were analyzed by the Lab in August 2020 with the QC and finalization of those reports received 8/28/20 (7 weeks later). The filters sampled in July and shipped to the Lab at the end of July were analyzed by the Lab in August 2020 with the QC and finalization of those reports received 10/5/20 (9 weeks later). The filters sampled in August and September were shipped to the Lab but no results have been received yet.
- Monitoring Sites visits to operate and maintain monitors:
  - The continuous Ozone and PM<sub>2.5</sub> site visits were resumed by 5/14/20 at every 2 weeks (instead of weekly) frequency. On 7/27/20, Ohio EPA approved the resumption of every week site visits since Stark County was ODH COVID-19 Advisory Level 1 or 2. However, site visits are dropped back to every 2 weeks for each one-week duration that Stark County changes to ODH COVID-19 Advisory Level 3 or 4.
  - Site visits for the PM<sub>2.5</sub> intermittent and PM<sub>2.5</sub> speciation samplers at the Canton Fire Station were allowed to resume on 7/29/20 and 8/1/20 respectively since Stark County was ODH COVID-19 Advisory Level 1 or 2. However, site visits/operation are suspended for each one-week duration that Stark County changes to ODH COVID-19 Advisory Level 3 or 4. Since Stark County changed to Level 3 during the quarter, this created more missed operation days. This is impacting the ambient air data capture as shown above.
  - Ohio EPA performance of Quality Assurance (QA) Audits on the monitoring equipment at the sites was suspended in March. The QA Audits resumed in mid-September 2020 with restrictions of no inperson contact between the QA auditor and Canton APC staff, so virtual means were used to communicate during the audit. Due to the several months of not performing the audits and having to catch up, not all the QA audits will be able to be performed on-time per the U.S. EPA required schedule.

Most APC staff are working a combination of some days in the office/field and some days from home with two staff working all days in the office.

#### **APC OFFICE REMODEL STATUS:**

The APC office remodel started construction on 5/5/20 and was mostly completed on 6/18/20. On 7/27/20, the Board of Health approved the purchase for construction services for the installation of exterior windows in the area. The construction of the exterior windows began on 9/21/20 and is planned to conclude on 10/5/20. The 1<sup>st</sup> set of cubicle desks (for permitting staff) were installed on 6/23/2020 in the new area and staff are moved into those cubicles. The remaining cubicle desks for monitoring staff are scheduled to be installed on 10/6/20, after the exterior windows are installed, and those staff will be moved into those cubicles by 10/8/20.

Terri Dzienis, APC Director, plans to move into her new office on 10/9/20. Her old office was originally planned to be the APC Library/Meeting Room (which was displaced as part of the remodel). Due to CCPH needs, Terri's old office will instead be the office for Amanda Archer, OPHII Director. APC still has the need for a Library/Meeting Room, as the items planned to be stored in that room do not have a place in the APC Office Area. Therefore, during the EH/OPHII Office Area remodel planning, a room for the APC Library/Meeting Room is included. In the interim, 2 of the 5 desk spaces that APC was occupying in the EH/OPHII Office Area (prior to remodel) are currently storing the reference materials that are planned to be stored in the APC Library/Meeting Room. The remaining 3 desk spaces are reassigned to EH/OPHII divisions for use.

# **Canton City Public Health** September Report 2020 (Meeting 10/26/2020)

# VITAL STATISTICS

Certificates Issued	<b>SEP 2020</b>	2020 YTD	2019 YTD
Death Certificates Issued	575	5,395	5,076
Birth Certificates Issued	738	6,651	8,305
*Births Total Residents & Nonresidents	SEP 2020	2020 YTD	2020 YTD
Births	350	2,981	
Unmarried Parent Births	169	1,460	49%
Births to Mothers aged 14 and under	1	3	0%
Births to Mothers aged 15 - 17	4	36	1%
Births to Mothers aged 18 - 19	21	161	5%
Births to Mothers aged 20 - 24	75	749	25%
Births to Mothers aged 25 - 29	132	949	32%
Births to Mothers aged 30 - 34	87	738	25%
Births to Mothers aged 35 - 39	21	278	9%
Births to Mothers aged 40 - 44	9	63	2%
Births to Mothers aged 45 and over	_	4	0%
Deaths in Canton City SEP 2020	2020 YTD	YTD Male	YTD Female
Total 139	1,472	55%	45%
Deaths aged less than 1 day -	8	50%	50%

i otul	157	1,172	5570	1570
Deaths aged less than 1 day	-	8	50%	50%
Deaths aged less than 1 year	1	6	100%	0%
Deaths aged 1 - 3	-	1	100%	0%
Deaths aged 4 - 9	1	1	100%	0%
Deaths aged 10 - 19	1	7	43%	57%
Deaths aged 20 - 29	6	32	59%	41%
Deaths aged 30 - 39	1	40	65%	35%
Deaths aged 40 - 49	9	75	55%	45%
Deaths aged 50 - 59	18	159	56%	44%
Deaths aged 60 - 69	33	323	62%	38%
Deaths aged 70 -79	18	364	57%	43%
Deaths aged 80 and over	51	450	45%	55%

Based on the number of births and deaths registered for the month of September 2020.

#### Financial data on revenues and expenses for COVID-19 at the Health Department

#### **REVENUES for 2020**

Below is a list of grants that we were awarded or revenues that we will receive or have already received to use for COVID-19.

<b>Received from:</b>	Date Received	Amount	What this money can be used for.
Ohio Department of Health	3/23/2020	\$5,158.53	Personnel and other direct costs - COVID-19 monitoring, investigation, containment and mitigation
CARES Act Provider Relief Fund	4/21/2020		Personnel and other direct costs (Total \$35,184.50 - split with Fire dept.)
City of Canton	Not yet received	\$47,400.00	Purchase supplies for families actively enrolled with a Stark County THRIVE Community Health Worker.
HealthPath Foundation of Ohio	4/20/2020		THRIVE Program - Care packages for Pregnant women and families with children under age 1
Sisters of Charity Foundation	4/23/2020		THRIVE Program - Care packages for individuals with chronic disease
Stark County Health Department	receive monthly with reports		CO20 Coronavirus Response Grant - Personnel and other direct costs. (\$63,270 original grant, \$30,722 additional grant award) Grant Period: March 1, 2020 - March 15, 2021
Stark County Health Department	receive monthly with reports		CO21 Coronavirus Response Grant - Personnel and other direct costs. Grant Period: March 1, 2020 - December 30, 2020
Stark County Health Department	receive monthly with reports	\$245,582.00	CT20 Contact Tracing Grant - Personnel and other direct costs. (\$77,816 original grant, \$167,766 - additional grant awarded) Grant Period: May 1, 2020 - December 31, 2020

\$497,152.78

#### **EXPENSES**

#### Other Direct Costs (paid through 10/20/2020)

Vendor

enaor	
Contract Services	\$16,045.89
Professional Services	\$10,154.25
Supplies	\$21,994.40 *\$12,750.00 is for the THRIVE grant for care packages.
Utilities	\$4,818.92
	\$53,013.46

	Health Department Employee's Time on COVID-19							
Personnel Costs	COVI	D-19	COVID-19 - C	ontact Tracing	TOTAL			
<b>COVID-19</b> Activities	Hours	Dollars	Hours	Dollars	Hours	Dollars		
March 2020	1,619	\$68,586.77	0	\$0.00	1,619	\$68,586.77		
April 2020	2,030	\$84,427.60	0	\$0.00	2,030	\$84,427.60		
May 2020	1,769	\$73,088.41	469	\$17,626.20	2,238	\$90,714.61		
June 2020	1,785	\$72,528.20	358	\$12,269.89	2,142	\$84,798.09		
July 2020	1,446	\$58,956.46	294	\$9,535.96	1,740	\$68,492.42		
August 2020	1,397	\$58,706.75	276	\$8,932.00	1,673	\$67,638.75		
September 2020	1,324	\$55,175.02	348	\$10,886.98	1,672	\$66,062.00		
TOTAL	11,369	\$471,469.21	1,745	\$59,251.04	13,114	\$530,720.24		

#### ,369 \$4

#### 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 33 employees working on COVID-19 each month.

# **Canton City Public Health**

September 31, 2020

# COVID-19

As you can see in our weekly reports and today's snapshot report, we are experiencing an increase of COVID-19 cases in the community. Much of the increase can be accounted for in smaller gatherings that involve a few households. Thankfully, we have had minimal increase in cases from contacts at our local school district.

Our Contact Tracing and Monitoring Team is doing a fantastic job of contacting new cases of COVID and contacts. We typically can make an initial case interview within 24 hours of receiving the case report. We are then able to rapidly inform close contacts of the need for quarantine. Through these efforts we can help contain the spread of COVID in our community.

We have started an educational campaign for the upcoming Halloween season with a press release and a planned series of safety messages for social media. We are planning the same for the Thanksgiving and Christmas holidays. We have also seen an increase in the number of complaints involving the use of face coverings and social distancing in stores and restaurants.

Lastly, we are ramping up our planning efforts relative to COVID vaccine distribution. We recently received the planning document that Ohio provided to the Federal government. We have been participating in weekly planning updates from ODH and will continue to increase our planning efforts to meet the needs of the community.

# Racism as a Public Health Crisis

The planning group has submitted a grant proposal to help fund training efforts to the Stark Community Foundation. I am meeting with their distribution committee on October 21, 2020. I have also been advised that we should use a "Professional Services" bid process to contract for services that will exceed \$25,000 in total cost. I am working with the City of Canton to refine the process and continue to move forward.

# Vacation Carry Forward

I anticipate several requests to carry forward vacation time pursuant to 207.18 of the Canton City Health Code due to the COVID pandemic. I will bring this list forward for consideration at the November 2020 Board of Health Meeting.

# Compensatory Time - COVID Funds

Pursuant to 207.10 (c) of the Canton City Health Code, I am allowing individuals that have accrued compensatory time related to COVID activities to convert that time to overtime pay. All individuals are eligible to receive overtime compensation as "straight time". Funds for this payment will come from CARES Act funds and other COVID related grant funds. No general revenue funds will be used. Payment will be limited to 200 hours of accumulated overtime.

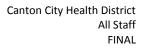
#### **Public Heatlh Ethical Practices**

Policy 800-027 Public Health Ethical Practices describes a process to resolve ethical decision making for Canton City Public Health. I have attached this policy for your reference.

# **Personnel Updates**

Vacant Positions after this meeting:

**Recycling Public Health Tech - EH.** This is a part time position. The current authorization for this classification is up to four individuals. There is currently one individual in this classification.





POLICY AND PROCEDURE	
SUBJECT/TITLE:	Public Health Ethical Practices
APPLICABILITY:	All Staff
CONTACT PERSON & DIVISION:	Health Commissioner, Administration
ORIGINAL DATE ADOPTED:	06/07/2017
LATEST EFFECTIVE DATE:	06/07/2017
REVIEW FREQUENCY:	5 years
BOARD APPROVAL DATE:	N/A
REFERENCE NUMBER:	800-027-P

#### A. PURPOSE

The purpose of this policy is to:

- a) Define the framework for ethical practice within the department.
- b) Adopt a public health code of ethics applicable to the department and its employees.
- c) Establish an ethics review process.
- d) Support PHAB standard 11.1.2 (version 1.5)

#### **B. POLICY**

The Canton City Health Department (CCHD) will fulfil its mission in a manner that respects the rights of individuals in the community, without discrimination. The CCHD will make every effort to make decisions and polices that are, necessary, effective, proportional, provide the least infringement to all involved and can be justified to the public.

#### C. BACKGROUND

Public health ethics involves a systematic methodology to clarify, analyze, prioritize, and justify possible public health actions based on ethical principles, values and beliefs of various stakeholders, scientific and other information, and sound public health practice. (CDC) Decisions relating to public health policy and practice should be based not only on sound scientific principles, but also on the values of those most affected. Implementation of many public health interventions requires the careful balance of prevention and liberty.

Public health ethics seeks to understand and clarify the principles and values which guide public health actions. Principles and values provide a framework for decision making and a means of justifying decisions. Because public health actions are often undertaken by governmental public health agencies and are directed at the population level, the principles and values which guide public health can differ from those which guide actions in biology and clinical medicine (bioethics and medical ethics) which are more patient or individual-centered.

As a field of practice, public health ethics is the application of relevant principles and values to public health decision making. In applying an ethics framework, public health ethics inquiry carries out three core functions, namely 1) identifying and clarifying the ethical dilemma posed, 2) analyzing it in terms of alternative courses of action and their consequences and 3) resolving the dilemma by deciding which course of action best incorporates and balances the guiding principles and values.

Do not confuse ethical practice with legal ethics requirements. Ohio law has established an Ohio Ethics Law that applies to all public employees. This law provides a legal framework for your actions relative to your public



employment (such as nepotism, public contracts, compensation, and influence). Ohio Ethics Law will be addressed in a separate policy.

#### **D. GLOSSARY OF TERMS**

<u>Public Health Ethics</u> – Involves a systematic methodology to clarify, analyze, prioritize and justify possible public health actions based on ethical principles, values and beliefs of various stakeholders, scientific and other information and sound public health practice.

#### E. PROCEDURES & STANDARD OPERATING GUIDELINES PRINCIPALS OF ETHICAL PRACTICE OF PUBLIC HEALTH

# The CCHD adopts the following Principles of Ethical Practice of Public Health that are applicable to all employees of the CCHD:

- 1. Public health should address principally the fundamental causes of disease and requirements for health, aiming to prevent adverse health outcomes.
- 2. Public health should achieve community health in a way that respects the rights of individuals in the community.
- 3. Public health policies, programs, and priorities should be developed and evaluated through processes that ensure an opportunity for input from community members.
- 4. Public health should advocate for, or work for the empowerment of, disenfranchised community members, ensuring that the basic resources and conditions necessary for health are accessible to all people in the community.
- 5. Public health should seek the information needed to implement effective policies and programs that protect and promote health.
- 6. Public health institutions should provide communities with the information they have that is needed for decisions on policies or programs and should obtain the community's consent for their implementation.
- 7. Public health institutions should act in a timely manner on the information they have within the resources and the mandate given to them by the public.
- 8. Public health programs and policies should incorporate a variety of approaches that anticipate and respect diverse values, beliefs, and cultures in the community.
- 9. Public health programs and policies should be implemented in a manner that most enhances the physical and social environment.
- 10. Public health institutions should protect the confidentiality of information that can bring harm to an individual or community if made public. Exceptions must be justified on the basis of the high likelihood of significant harm to the individual or others.
- 11. Public health institutions should ensure the professional competence of their employees.
- 12. Public health institutions and their employees should engage in collaborations and affiliations in ways that build the public's trust and the institution's effectiveness.

In addition, each employee should adhere to any professional code of ethics or standard of practice that is applicable to their professional certification.



#### **GUIDELINES FOR ETHICAL PUBLIC HEALTH DECISION MAKING**

The following guidelines will be used for decision making at the CCHD. These principles should be part of any policy or practice decision making relating to a public health action. While not a formal or rigid process, these three elements should be part of the decision-making consideration.

- 1. Analyze Ethical Issues
  - a. What are the risks and harms of concern?
  - b. What are the public health goals?
  - c. What, if any, are the moral claims of stakeholders?
  - d. Is the source or scope of legal authority in question?
  - e. Are president cases relevant?
  - f. Do professional codes of ethics provide guidance?
- 2. Evaluate the Ethical Dimensions of the Alternate Courses of Public Health Action
  - a. Utility: Does the public health action produce a balance of benefits over harms?
  - b. Justice: Are the benefits and burdens distributed fairly?
  - c. Respect for individual and community interests: Does the public health action respect individual and civic roles and values?
- 3. Provide justification for a public health action
  - a. Effectiveness: Is the public health goal likely to be accomplished?
  - b. Proportionality: Will the probably benefits of the action outweigh the infringed moral considerations?
  - c. Necessity: Is overriding the conflicting ethical claims necessary to achieve the public health goal?
  - d. Least Infringement: Is the action the least restrictive and least intrusive to all parties?
  - e. Public Justification: Can public health offer justification that citizens, and in particular the most affected, could find acceptable in principle?

#### DECISION MAKING IN EVERYDAY PRACTICE

Staff of the CCHD make decisions every day that affect people, programs and polices. Employees have the following expectations relative to everyday decision making:

- 1. All employees will be familiar with the 800-027-03-A Canton City Health Department, Principles of Ethical Practice in Public Health.
- 2. All employees will be familiar with any code of ethics or standards of practice for their license or professional certification.
- 3. All employees, to the best of their ability, will make decisions that are supported by the guidelines and standards provided in this policy.

#### **RESOLUTION OF ISSUES POSING AN ETHICAL DILEMMA**

From time to time, issues will arise that pose an ethical dilemma and are not easily resolved by the individual employee. Examples may include the following:

- 1. Significant deviation from established policy or procedure.
- 2. Decisions that may result in the restriction of movement of individuals, restriction of liberty, or revocation of a license or permit.
- 3. Decisions that may conflict with HIPAA, or a presumed right of privacy.
- 4. Decisions that may apply to groups differently, have bias, or have the appearance of discrimination.



5. Potential conflicts of interest.

When a question or conflict arises that is not easily answered by the employee, it is the employees' responsibility to discuss the issue with their supervisor in an attempt to resolve the issue. If the issue cannot be resolved with the supervisor, then the issue will be discussed with the health commissioner.

An issue may be made to the Ethics Review Committee for action. A referral for review can be made by any employee or community member. Referrals shall be in writing using the form 800-027-01-F Ethics Review Committee Referral Form. The completed referral shall be submitted to the Health Commissioner who shall convene the Ethics Review Committee and place the item on the agenda for consideration.

#### ETHICS REVIEW COMMITTEE

The CCHD establishes an Ethics Review Committee that consist of: two (2) members of the Division Leadership Team – Policy, one (1) staff member, CCHD HIPAA Privacy Officer [need reference for this policy], and a representative of the Canton City Law Department. The Health Commissioner or designee, shall serve as chairman. Members of the Ethics Review Committee shall be appointed by the Health Commissioner and may be serve for an indefinite period of time. The Ethics Review Committee shall meet at the call of the chairman. The purpose of this committee will be to:

- 1. Assist the department in resolving any decisions that pose an ethical dilemma.
- 2. Review any cases brought before the committee.
- 3. Analyze the case.
- 4. Make recommendation for resolution.

The following procedure applies to the Ethics Review Committee:

- 1. The Ethics Review Committee will consider any referral within 30 calendar days of the receipt of the referral. The Committee may take the following actions relative to this referral:
  - a. No action.
  - b. Request further information.
  - c. Accept for review.
- If the referral is accepted for review, the Ethics Review Committee will follow the algorithm in 800-027-02-A Ethics Review Committee Process Workflow Diagram. Every effort will be made to provide a final recommendation within 180 days of acceptance of a referral for review.
- 3. The Ethics Review Committee may utilize experts outside of the CCHD in their deliberation as needed. The committee shall endeavor to collect input from all affected parties and stakeholders.
- 4. The final recommendation of the Ethics Review Committee is not binding and may be modified as needed by the Health Commissioner or the Board of Health.
- 5. All recommendations for the committee will be in writing and a copy will be provided to the referring entity and the Health Commissioner. The Ethics Review Committee may also provide a copy to the Board of Health if they deem necessary.
- 6. All deliberations of the Ethics Review Committee will be conducted in compliance with Ohio laws and rules with respect to public records and public meetings. Every effort will be made to conduct any review with the utmost transparency.



Canton City Health District All Staff FINAL

#### **DECISION MAKING AUTHORITY**

The final responsibility for decisions relative to this policy is with the Health Commissioner, unless otherwise specified by the Board of Health. Recommendations from the Ethics Review Committee are not binding and may be modified by the Health Commissioner or the Board of Health.

#### F. CITATIONS & REFERENCES

Link to Centers of Disease Control, Public Health Ethics webpage: https://www.cdc.gov/od/science/integrity/phethics/

American Public Health Association, Public Health Ethics Statement: https://www.apha.org/~/media/files/pdf/membergroups/ethics\_brochure.ashx

#### G. CONTRIBUTORS

The following staff contributed to the authorship of this document:

1. James Adams, Health Commissioner

#### **H. APPENDICIES & ATTACHMENTS**

800-027-02-A Ethics Review Committee Process Workflow Diagram 800-027-03-A Canton City Health Department, Principles of Ethical Practice in Public Health

#### I. REFERENCE FORMS

800-027-01-F Ethics Committee Referral Form.

#### J. REVISION & REVIEW HISTORY

J. KEVISION & KE								
<b>Revision Date</b>	<b>Review Date</b>	Author	Notes					

#### K. APPROVAL

This document has been approved in accordance with the "800-001-P Standards for Writing and Approving PPSOGFs" procedure as of the effective date listed above.



# Strategic Plan 2020

Chronic						
P Chronic Disease	Most Recent Period	Prior Actual Value	Current Actual Value	Current Target Value	Current Trend	Baseline % Change
Goal 1. Increase access to healthier lifestyle choices in the community	HY1 2017	-	68.00%	63.00%	→ 0	0% →
Objective 1.1. Evaluate feasbility of Tobacco-21 program implementation in Canton by 12/31/2018 to decrease the incidence of youth initiation of smoking.	Q1 2019	5.80%	100.00%	100.00%	<b>↗</b> 1	9900% 个
Objective 1.2. Work with community partnerships to increase the number of tobacco free outdoor areas by 3 by the year 2020.	Q2 2020	_	100.00%	100.00%	<b>∧</b> 3	9900% 🕇
Objective 1.3. Work with community partnerships to increase the access to fresh food choices in identified community food deserts by 2 by 2020.	Q2 2020	_	75.00%	75.00%	<b>∧</b> 3	7400% 🕇
Goal 2. Decrease the rate of unintentional injuries.	HY2 2017	_	0.00	100.00	→ 0	0% →
Objective 2.1 Decrease the rate of reported animal bites in Canton City by 10% by 2020	Q2 2020	_	294.00	345.60	<b>1</b>	-22% 🗸
Communicable						
P Communicable Disease	Most Recent Period	Prior Actual Value	Current Actual Value	Current Target Value	Current Trend	Baseline % Change

1	Goal 1. HIV infections per 100,000 population in Stark County	HY2 2017	-	115.00	112.70	→ 0	0% →
РМ	Objective 1.1. 85% of newly identified HIV cases are linked to care within 90 days of diagnosis	Q3 2020	70.00%	71.00%	83.24%	<b>∧</b> 1	3% 🕇
1	Goal 1a. Number of new Hepatitis C infections in Canton City	HY2 2017	_	1252	1192	→ 0	0% →
РМ	Objective 1.2. Implement a risk reduction program to decrease the number of new Hepatitis C infections in the community by 5% by 2020	Q2 2020	_	85.71%	85.71%	<b>7</b> 2	8471% 🕇
L	Goal 2. Decrease the prevalence of STI infections in the community.	HY2 2017	_	1.30	1.20	→ 0	0% →
РМ	Objective 2.1 Decrease the rate of Chlamydia infections in Canton city by 5% by 2020 by effectively treating CCPH cases within 60 days.	Q2 2020	_	100.00%	98.57%	→ 1	11% 🕇
РМ	Objective 2.2 Increase the amount of educational outreach programs in the community by 10% by 2020. Baseline is one program quarterly.	Q2 2020	_	4.00	2.42	<b>¥</b> 1	100% 🕇
1	Goal 3. Increase the number of children immunized in Canton City.	HY2 2017	-	45.00%	45.90%	→ 0	0% →
РМ	Objective 3.1. Children between the ages of 0 and 35 months of age receiving vaccinations at the health department will have their vaccination record accessed, caregiver will receive education, and receive recommended vaccinations (as permitted by caregiver).	Q2 2020	-	54.60%	45.77%	→ 3	21% 🕇
Enviro	nmental						
Р	Environmental Health and APC	Most Recent Period	Prior Actual Value	Current Actual Value	Current Target Value	Current Trend	Baseline % Change
1	Goal 1. Increase compliance with environmental health laws and rules	HY2 2017	_	0.00%	100.00%	→ 0	0% →
PM	Objective 1.1: Decrease the percentage of critical food safety violations divided by total violations (RFE/FSO) by a total of 10% by 2019 and another 10% (totalling 20%) by 2020.	Q3 2020	39.00%	0.00%	0.00%	<b>1</b>	-91% 🗸
РМ	Objective 1.2. Decrease the number of open burning violations in Stark County by 10% by 2020.	Q2 2020	_	98.00	91.00	7 3	-10% 🗸
1	Goal 2. Keep community informed of environmental laws and rules	HY2 2017	_	0.00%	100.00%	→ 0	0% →
РМ	Objective 2.1 Increase public access to APC/EH enforcement information including summaries of complaints and enforcement actions	HY1 2020	_	100.00%	100.00%	<b>∧</b> 2	9900% 🕇

<ul> <li>Objective 2.3 Evaluate feasibility of Legionella water testing plan by 3/31/2019.</li> <li>Objective 2.4 Complete an update and revision of Canton City Health Code section 205.04 Laboratory Service Fees</li> </ul>	Q1 2019 Q4 2019	90.80% 80.00%	100.00%	100.00%	<b>∧</b> 4	9900% 🕇
section 205.04 Laboratory Service Fees	Q4 2019	80.00%				
laternal			100.00%	100.00%	▶ 3	9900% 🕇
P Maternal, Child and Infant Health	Most Recent Period	Prior Actual Value	Current Actual Value	Current Target Value	Current Trend	Baseline % Change
Goal 1. Decrease the rate of infant mortality and disparities in birth outcomes in Stark County.	-	_	-	-	-	_
Objective 1.1. By 2020, the overall infant mortality rate in Stark County will decrease to less than 6 infant deaths per 1,000 live births.	Q3 2020	9.1	8.8	6.3	<b>\</b> 1	-2% 🗸
Objective 1.2. By 2020, decrease by more than 50% the disparity between black and white infant mortality rates	Q2 2020	_	1.8	1.2	7 1	-14% 👃
Objective 1.3. By 2020, reduce the number of preterm births to less than 9.4% of all live births.	Q2 2020	_	10.80	9.40	7 1	11% 🕇
Goal 2. Promote WIC services throughout Stark County to increase total WIC caseload by 2%.	_	_	-	-	_	_
	Q3 2020	314	402	322	7 1	30% 🕇
Objective 2.1. Decrease the # of participants certified without current benefits by at least 5% for Canton WIC.						
	Q3 2020	314	402	322	▶ 1	

R	Access to Health Care and Clinic Services	Most Recent Period	Prior Actual Value	Current Actual Value	Current Target Value	Current Trend	Baseline % Change
1	Goal 1. Increase use of billable clinic services.	-	-	-	-	-	-
РМ	Objective 1.1. By June 1, 2020 analyze funding for STI clinic and provide written recommendations to Health Commissioner.	Q3 2020	41.50%	0.00%	0.00%	<b>\</b> 2	0% →
1	Goal 2. Improve access to transportation services.	2017	-	0.00%	100.00%	→ 0	0% →
РМ	Objective 2.1. Partner with at least one program providing transportation services to individuals needing transportation for preventative medical care.	HY1 2020	-	32.14%	60.00%	<b>¥</b> 2	3114% 🕇
Found	ational						
R	Foundational Services	Most Recent Period	Prior Actual Value	Current Actual Value	Current Target Value	Current Trend	Baseline % Change
1	Goal 1. Increase marketing of the department and its services.	2017	_	0.00%	100.00%	→ 0	0% →
РМ	Objective 1.1. Publish articles about the health department in print and online media of general circulation and/or conduct local radio show at least four times each year starting in 2018.	HY1 2020	75	6	2	1 لا	500% 🕇
РМ	Objective 1.2. Health department staff attend at least four neighborhood association meetings each calendar year.	HY1 2020	4	2	0	<b>\</b> 1	100% 🕇
РМ	Objective 1.3. Implement a comprehensive department communication plan that includes a branding policy and use guidelines by 9/1/2018.	HY2 2018	0.00%	100.00%	100.00%	<b>∧</b> 1	9900% 🕇

РМ	Objective 1.4. Sponsor at least one community event (like a food collection day) for staff participation each year starting by 12/31/2017.	HY1 2020	100.00%	0.00%	50.00%	<b>&gt;</b> 1	0% →
1	Goal 2. Increase use of fiscal services and tools provided by the City of Canton.	2017	_	0.00%	100.00%	→ 0	0% →
РМ	Objective 2.1. Implement paperless leave and reporting system by 4/30/2019.	Q2 2019	88.80%	100.00%	100.00%	<b>∧</b> 2	9900% 🕇
РМ	Objective 2.2. Implement time and activity reporting module in Kronos system to replace current T&E system within 90 days of Auditor making system available and after 2.1 is completed.	HY1 2020	_	85.71%	85.71%	<b>↗</b> 1	8471% 🕇
1	Goal 3. Improve information sharing for internal staff use on department's community partnerships	2017	_	0.00%	100.00%	→ 0	0% →
РМ	Objective 3.1. Complete inventory of community partnerships that health department staff are participating in.	HY2 2018	0.00%	100.00%	24.90%	<b>∧</b> 1	9900% 🕇
1	Goal 4. Foster a "Culture of Quality" in the department	2017	-	0.00%	100.00%	→ 0	0% →
РМ	Objective 4.1. Fully implement the department quality improvement plan by October 1, 2017	HY2 2018	0.00%	100.00%	100.00%	<b>∧</b> 1	9900% 🕇
РМ	Objective 4.2. Highlight at least two quality improvement projects at annual all staff meeting.	HY1 2020	39.40%	100.00%	100.00%	<b>∧</b> 2	9900% 🕇
1	Goal 5. Provide high quality and relevant internal staff communication	2017	-	0.00%	100.00%	→ 0	0% →
РМ	Objective 5.1. Implement a department Intranet by December 31, 2018.	HY2 2019	79.20%	100.00%	100.00%	<b>∧</b> 1	9900% 🕇
РМ	Objective 5.2. Hold at least 1 all staff meeting each calendar year.	HY1 2020	100.00%	48.10%	50.00%	<b>\</b> 1	-49% ↓
РМ	Objective 5.3. Each division will hold at least one full or partial staff development day each calendar year starting on January 1, 2018.	HY1 2020	28.60%	0.00%	50.00%	<b>\</b> 1	-98% ↓
РМ	Objective 5.4. Health Commissioner will post at least 1 "all staff" communications each month starting on July 1, 2017.	HY1 2020	116.70%	466.70%	50.00%	▶ 5	46570% 🕇
1	Goal 6. Effectively utilize technology services within the department	-	_	_	-	-	-
РМ	Objective 6.1. Utilize Office 365 services by July 31, 2018	HY2 2018	0.00%	100.00%	100.00%	<b>∧</b> 1	9900% 🕇
РМ	Objective 6.2. Fully catalog and document databases in use in department.	HY2 2018	0.00%	100.00%	100.00%	<b>∧</b> 1	9900% 🕇

1	Goal 7. Provide excellent customer service.	2017	_	0.00%	100.00%	→ 0	0% →
РМ	Objective 7.1. Staff training related to customer service will be provided to all staff at a minimum of once every two years with the first training occuring in 2018 and the second training occurring no later than 06/30/2020.	HY2 2019	98.00%	0.00%	60.00%	<b>¥</b> 1	0% →
РМ	Objective 7.2. Convert all microfiche birth and death records to PDF so they are faster to retreive for customer requests. Complete by 6/30/2020.	HY1 2020	63.30%	63.37%	75.00%	<b>7</b> 2	6237% 🕇
1	Goal 8. Provide a facility that can better serve the public and enhance work environment for staff.	2017	_	0.00%	100.00%	→ 0	0% →
РМ	Objective 8.1. Implement a schedule for regular staff safety drills (for example fire, active shooter, severe weather) by June 30, 2020.	HY1 2020	33.30%	38.10%	66.67%	<b>7</b> 3	3710%
РМ	Objective 8.2. Assure that all staff have basic situational awareness training by June 1, 2020.	HY1 2020	0.00%	0.00%	47.00%	→ 2	0% →
РМ	Objective 8.3. Improve the external and internal signage for the department, by August 31, 2018.	HY2 2018	0.00%	100.00%	100.00%	<b>∧</b> 1	9900% 🕇
РМ	Objective 8.4. Provide paint updates to most areas of department and update the floor carpet by June 30, 2020	HY1 2019	81.20%	100.00%	100.00%	<b>7</b> 2	9900% 🕇
РМ	Objective 8.5. Remodel WIC and clinic areas to be more efficient and safe for clients by June 30, 2020	HY1 2020	42.40%	100.00%	100.00%	<b>7</b> 3	9900% 🕇

Staff							
R	Staff Development	Most Recent Period	Prior Actual Value	Current Actual Value	Current Target Value	Current Trend	Baseline % Change
I	Goal 1. Streamline training and development programs for employees.	2017	_	0.00%	100.00%	→ 0	0% →
РМ	Objective 1.1. Develop a new hire onboarding/training guide by December 31, 2020 (in line with WFD Plan)	HY1 2020	14.60%	75.49%	64.71%	<b>7</b> 2	7449% 🕇
PM	Objective 1.2. Document a plan for staff training to include required and optional training modules by January 31, 2020 (in line with WFD Plan)	HY1 2020	0.00%	80.00%	80.00%	<b>↗</b> 1	7900% 🕇
PM	Objective 1.3. REMOVED AND REPLACED WITH 1.5	2020	18	0	0	1 צ'	0% →
PM	Objective 1.4. Revise policy/form to require a written individual development plan documented in annual peformance evaluations for all staff by January 31, 2020.	HY1 2020	63.40%	100.00%	100.00%	<b>7</b> 2	9900% 🕇
РМ	Objective 1.5. Revise staff performance evaluation form to be simpler and more focused on necessary performance measures by 6/30/2020.	HY1 2020	30.92%	100.00%	100.00%	<b>∧</b> 2	9900% 🕇
1	Goal 2. Promote staff morale.	2017	-	0.00%	100.00%	→ 0	0% →
РМ	Objective 2.1. Complete a comprehensive staff satisfaction survey at least once every 3 years starting in 2017 and implement strategy to address results.	Q3 2020	74.90%	84.85%	92.86%	<b>∧</b> 1	8385% 🕇
PM	Objective 2.2. Implement a policy to complete staff exit interviews by June 30, 2020	HY1 2020	-	24.69%	24.69%	<b>↗</b> 1	2369% 🕇