

**Canton City Public Health** 

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#### 2018 Board of Health

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## Canton City Public Health 2018 Annual Report

## Health Commissioner James M. Adams, RS, MPH

I am pleased to present the 2018 annual report. This report is just a snapshot of the important work done every day to prevent the spread of disease, promote health, and protect the community from harm.

New this year is a summary of our performance management and quality improvement efforts. As we strive to provide high quality public health services to the community, we want to be able to measure our performance and constantly improve. You will also find that our fiscal reporting is now aligned with the Foundational Public Health Services model. This model defines a suite of skills, services, programs, and activities that must be available in health departments everywhere for the public health system to work anywhere and to be able to estimate the costs for those services.

Each statistic in this report tells a story. A story of people who live and work in our community. A story of families who strive to make this a better place. I am honored to be part of an organization and a staff that works together to accomplish the goal of better health for all in Canton.

James M. adams, RS, MPH

## Performance Management

How Canton City Public Health (CCPH) performs as an organization is an important part to improving the overall health of the community. CCPH has established a performance management system to monitor and assess its progress toward meeting identified goals, objectives and desired community health improvement outcomes. Progress is assessed quarterly. On a once every 6-month basis, CCPH monitors progress toward achieving its strategic priorities, established in the Strategic Plan 2020 originally issued on July 24, 2017 and revised on June 25, 2018. The progress is summarized in

dashboard format and written reports. The performance management system is documented in a written policy finalized on November 7, 2018. To view the details of the program, including progress dashboards and reports, visit the CCPH website, click on the Performance & Quality Improvement link on the left hand side, then click the link under Organizational Performance.



## **Finance** Christi Allen, Fiscal Officer

Foundational Capabilities	Non-Labor	<b>Itemized/Outlier</b>	Share Services	Labor	TOTAI
Assessment (surveillance/epidemiology)	\$13,972	\$905,591	\$0	\$279,172	\$1,198,73
Emergency preparedness	\$2,381	\$573	\$0	\$47,583	\$50,53
Communication	\$1,361	\$0	\$0	\$27,202	\$28,56
Policy development & support	\$3,733	\$0	\$0	\$74,594	\$78,32
Community partnership development	\$1,979	\$0	\$0	\$39,543	\$41,52
Organizational competencies	\$17,982	\$0	\$0	\$359,300	\$377,28
Services performed that may cut across mul	tiple if not all j	foundational areas.			
Foundational Areas	Non-Labor	Itemized/Outlier	Share Services	Labor	ΤΟΤΑ
Communicable disease control	\$27,157	\$139,215	\$174,098	\$542,638	\$883,10
Chronic Disease and Injury Prevention	\$8,451	\$4,848	\$65,295	\$168,860	\$247,45
Environmental Public Health	\$39,807	\$37,636	\$0	\$795,402	\$872,84
Maternal/Child/Family Health	\$5,215	\$907,845	\$0	\$104,208	\$1,017,26
Services performed specific to each foundat	ional area or r	esponsibility that it	not related to any	foundational c	apability.
Expanded Service Activities	Non-Labor	Itemized/Outlier	Share Services	Labor	ТОТА
Communicable disease control	\$12,802	\$41,869	\$0	\$255,801	\$310,47
Chronic disease and injury prevention	\$286	\$0	\$0	\$5,707	\$5,93
Environmental public health	\$39,254	\$61,344	\$0	\$784,355	\$884,95
Maternal/Child/Family Health	\$40,058	\$890,863	\$639,169	\$800,407	\$2,370,49
Access/linkage with clinical health care	\$2,855	\$26,852	\$0	\$57,042	\$86,74
Services performed to each expanded area o	or responsibilii	ty that is not related	to any foundation	al capability or	r area.
TOTAL	\$218,034	\$3,016,636	\$878,562	\$4,356,617	\$8,469,84

2018 REVENUES						
Local Source Funds						
Carryover	\$858,754	<u>State Funds</u>				
Local governmental funds	\$1,655,055	Carryover	\$0			
Personal health services	\$233,268	State subsidy	\$13,696			
Home health services	\$0	ODH funded projects/grants	\$1,899,801			
Environmental health fees	\$322,777	Other state (non-ODH) funded projects	\$1,663,730			
Vital statistic fees	\$408,725		\$3,577,227			
Laboratory	\$36,023					
Locally funded projects contracts	\$146,261	<u>Federal Funds</u>				
Donations	\$6,150	Carryover	\$186,689			
Miscellaneous income	\$6,249	Grants received directly from fed gov't	\$0			
	\$3,673,262		\$186,689			
		TOTAL	\$7,437,178			

## **Quality Improvement**

During 2018, CCPH's Quality Improvement (QI) committee assessed the effectiveness of the 2016-2017 QI Plan that ended on 12/31/2017. Some highlights include: 69% of the goals and objectives were completed by 12/31/2017; and QI maturity at CCPH was at 64%, an improvement over the baseline of 54%. After the assessment was finalized, the QI Committee completed the development of the 2018-2020 QI Plan which ends on 12/31/2020. The 2018-2020 QI Plan contains several goals and objectives (i.e. activities) to be completed during 2018-2020 in order to further develop a culture of quality improvement at CCPH. These planned activities include QI Training, QI Projects, updating surveys & assessments, and development of more performance measures and customer satisfaction surveys. Below is a table summarizing the QI activities. The two (2) QI projects started in 2017 were completed in 2018 as summarized below.

Status of QI Goals and Objectives as of 12/31/2018					
Maturity Category	Deadline	Total #	Completed by deadline	Still in progress	
Organizational	By 12/31/18	0	0	0	
Culture	After 12/31/18 By 12/31/20	7	0	7	
Capacity &	By 12/31/18	4	2	2	
Competency	After 12/31/18 By 12/31/20	15	0	15	
Alignment &	By 12/31/18	3	1	2	
Spread	After 12/31/18	9	0	9	
Total:		38	3	35	

<u>QI Project #1 for program area: Improving Nursing</u> <u>Childhood Immunization Clinics</u> Project to decrease time spent on the process in order to increase clients served per day. In 2017, baseline data was collected and analyzed and improvement strategies were developed using QI tools. The strategies were implemented in 2018 which included changing appointment times and updating patient forms for existing patients. The same data was collected and analyzed in 2018. Timeliness improved for part of the process and clinic flow improved. Data indicates a need for improved interpreter services, which will be a separate project.

QI Project #2 for administrative area: Phone Routing and Answering

Project to resolve callers choosing the wrong auto-selection thus getting the wrong end user and being transferred to clerks instead of end users. In 2017, baseline data was collected and analyzed and improvement strategies were developed using QI tools. The strategies were implemented in 2018 which included standardizing/updating reference sheets and policies, updating main phone line auto-selection, and adding auto-selection to WIC phone line. The same data was collected and analyzed in 2018. Bar charts made the outcomes visible. Phone calls received for the wrong division decreased in all divisions with the exception of Vital Statistics (VS) where there was an increase of 50%. A separate project will address VS call issues.

To keep up with the details of the program, including progress on QI projects and activities, visit the CCPH website, click on the Performance & Quality Improvement link on the left hand side, then click the link under Quality Improvement.

				Certificates Issued
Vital Statist	tic	S		2018 2017 201
Rob Knight, Deputy Rec		-		Birth 9,280 9,723 9,65
Leading Causes of Deat	·		*	Death 6,881 6,492 6,66
	2018	2017	2016	567
Heart Disease	481	405	475	
Cancer (All Types)	268	285	274	
Chronic Lower Respiratory Disease	132	134	106	City of Canton Vital Statistics*
Accidents	115	103	120	2018 2017 2016
Cerebrovascular Disease	78	101	83	2018 2017 2018
Septicemia	73	56	51	Deaths 1,824 1,763 1,833
Influenza/Pneumonia	69	45	51	Births 4,221 4,152 4,310
All Other Causes	608	634	610	- Teen Births (13 - 19) 293 306 288
*Data source changed since previous rep	orting yea	ars		*For all births occurring in Canton, not only residents

## Air Pollution Control Terri Dzienis; APC Director

The Air Pollution Control Division (APC) is a contractual representative for the Ohio Environmental Protection Agency's (EPA) Division of Air Pollution Control for all of Stark County. As such, we process applications for air permits and conduct inspections to ensure facilities are complying with those permits. Air permits are required for most industrial, commercial, and institutional facilities. Air permits include requirements that the facilities need to follow in order to protect the air quality in Stark County. There are several different types of air permits: Permit-by-Rule (PBR) for small sources, Permit-to-Install-and-Operate (PTIO) for small to midsize sources, Federally Enforceable PTIO (FEPTIO) for mid-size to large sources, and Title V permits for large sources. As of 1/1/2019, Stark County has 285 PBR, 181 PTIO, 19 FEPTIO, and 19 Title V facilities, for a total of 504 permitted facilities.



Due to the complex nature of Title V permits. there is a statewide backlog of both Title V and non-Title V operating permits needing to be renewed. Ohio EPA initiated a statewide effort to eliminate this backlog starting in 2011. As such, Can-

ton APC has been actively working on eliminating this backlog as demonstrated in the below trend chart.

In 2018, Canton APC accomplished the final issuance of 7 backlogged Title V renewal permits, which is the most issued in a sin-

gle year! The 7 issued backlogged Title V renewal permits were for: Marathon Petroleum Canton Refinery; MPLX Terminals Canton Terminal; Countywide Recycling and Disposal Facility; East Ohio Gas Robinson Station; U.S. Fi-



#### **Air Pollution Control Activities**

Open Burning	2018	2017	2016
Inspections (non-complaint)	6	13	8
Complaints Investigated	174	184	146
Enforcement Actions	110	136	120
Violations Resolved	84	111	109
Open Burning Permissions	11	6	13
Asbestos Program			
Inspections (non-complaint)	64	71	69
Complaints Investigated	12	4	2
Enforcement Actions	8	13	19
Violations Resolved	12	9	12
Facility Program			
Inspections (non-complaint)	50	68	93
Complaints Investigated	54	41	17
Enforcement Actions	18	18	16
Violations Resolved	8	11	11
Tests Observed	18	19	12
Opacity Observations	25	23	13
Permits Issued	59	54	112
Other Programs			
Anti-tampering Inspections	2	3	4
Inspections (non-complaint)	3	4	4
Complaints Investigated	18	45	34
Opacity Observations	2	0	0
Enforcement Actions	0	2	3
Violations Resolved	0	3	0

berglass Products; A.R.E. Accessories; and Lehigh Cement Company (their Title V permit was canceled since they were issued a non-Title V PTIO permit and reclassified as a PTIO facility). These permits took numerous months to years to complete, and are between 48 and 256 pages long! Each of these permits is a cohesive document that accurately reflects the air pollution sources at the facility and the applicable regulations.

As of the end of 2018, only 4 backlogged Title V renewal permits remained. APC's goal is to issue these remaining 4 Title V permits by the end of 2019.

## **Environmental Health** Annmarie Butusov, RS; Director of Environmental Health

I would like to take this opportunity to introduce myself as the new Director of Environmental Health. My name is Annmarie Butusov and I am a Registered Sanitarian. I was born and raised in Canton and enlisted in the Navy immediately after high school graduation. For six years, I served on Marine Corps bases as a dental and surgical technician. After I received my Honorable Discharge, I used my GI Bill to obtain a bachelor's degree in chemistry from the University of Hawaii. I have been with Canton City Public Health since 2012, starting my career in EH inspecting residential and housing complaints. In August 2018, I was appointed as the Environmental Health. I look forward to working with the Environmental Health staff to improve processes for each of the programs in the division.

The employees of the Environmental Health Division prevent the spread of disease in our physical environment by decreasing exposure to health hazards such as lead-based paint, indoor smoking, contaminated food and wa-



ter, hazardous chemicals, and vector-borne diseases caused by mosquitoes, mice, and roaches. We are responsible for indoor and outdoor inspections of homes, businesses, restaurants, vacant land, tattoo parlors, schools, swimming pools and trash removal companies and hospitals. We ensure proper animal vaccination to prevent the spread of rabies and we are partners in maintaining operations at the Canton Recycling Center to reduce the amount of chemicals, tires, and electronics that go to landfills. A healthy environment increases quality of life and overall

health.

If you have suggestions or questions about Environmental Health programs or services, please feel free to contact me directly at <u>abu-</u> <u>tusov@cantonhealth.org</u> or (330) 438-4641. I look forward to hearing from you and working with you to keep Canton strong,



#### **EH Activities**

	2018
Animal Bites	309
Nuisance Activities	
Cases Opened	2,177
Cases Resolved	2,114
Pool and Spa Inspections	77
School Inspections	72
Solid/Infectious Waste Inspections	20
Tattoo/Body Piercing Inspections	8

#### **Food Activities**

	2018
Food Complaints	52
Food Inspections	669
Follow-up Inspections	89
Mobile Inspections	27
Temporary Event Inspections	157
Vending Inspections	34
Other Activities	
	2018
	04

Smoking Complaints	21
Healthy Home Inspections	6
Lead Clearances	22



#### **Recycling Activities**

	2018
Tires Recycled, Pounds	305,560
Tires, Estimated Number	15,278
Household Hazardous Waste, Pounds	130,762
E-Waste & Misc Metals, Pounds	112,006
Scrap Steel, Pounds	108,970
Commodity Sales	\$35,049.37

## Laboratory Christina Henning, Laboratory Director

The accreditation process has led to the Canton City Public Health Laboratory reframing how we look at workforce development, interdepartmental alliances, and the use of quality improvement (QI). Historically, workforce development within the Lab was an individual process, with each analyst spending time developing and honing their individual skills. In 2018 we took time to focus on partner capabilities in order to provide comprehensive customer service. Our customers can now count on us to provide clear concise partner infor-

mation. The focus on customer service also reminds us that we are our own customers and therefore, improving our in-house services is critical

Laboratory	Exams
Laboratory	LAUNS

	2018	2017	2016
Food Samples	666	670	744
Clinical Tests	4,737	5,455	5,477
Other	2	21	4
Pollen/Mold	125	127	139
Water	2,046	2,161	2,066

to our overall mission. We have employed QI initiatives such as Just Do It solutions, where, if we see a need to amend or streamline a process and it can be done quickly and efficiently, we Just Do It. Additionally, we have used a data-driven decision-making process for evaluation of a potential new testing platform, *Legionella legiolert*. Based on the data, we found that it was not feasible to add the test to our testing menu at this time. Additionally, we have committed staff time to help improve our department wide QI initiatives. While working to improve our QI knowledge we continued to provide our Clinical Laboratory Improvement Amendments (CLIA) licensed services for sexually transmitted diseases, attaining zero citations during our 2018 CLIA survey and our Environmental Protection Agency (EPA) licensed water testing services. For more information on available testing visit our webpage at: <a href="http://www.cantonhealth.org/lab/">http://www.cantonhealth.org/lab/</a>. And for information on tests completed in 2018 visit: <a href="http://www.cantonhealth.org/board/pdf/1%20-%20January%2028,%202019%">http://www.cantonhealth.org/board/pdf/1%20-%20January%2028,%202019%</a>

### Nursing/Medical Director Jon Elias, MD; Medical Director Diane Thompson, RN, MSN; Director of Nursing

2018 was another good year as Medical Director at Canton City Public Health. Our nursing division has continued to provide wonderful services to our community and many health promotional activities throughout the area. We gave immunizations to underserved children, ran a dental sealant program, vaccinated those individuals at highest risk of contracting Hepatitis A in response to the statewide outbreak. Our Travel Clinic has seen over 223 patients providing a much needed resource to our area. With the unfortunate rise nationwide in STIs, our STI clinic is an absolute necessity to providing quality health care to our community.

Our SWAP needle access program has been an overwhelming success. While working to decrease the risk of Hep C and HIV in our area, we are also able to provide clients with information and resources on substance abuse in a non pressured environment. As the opiate epidemic has continued to claim many lives in our community, we have tried to help in any way possible. In collaboration with the Stark Mental Health and Addiction Recovery Board, through the *Naloxone (Narcan®) for use by Service Entities* for suspected opioid-related overdose program we have created a mechanism available for private businesses to obtain and administer NARCAN®, a lifesaving medication, in an overdose situation.

In addition, we have tried to address the nicotine "vaping" problem. Although many of the issues need to be addressed legally on a state level, the Board of Health voted to recommend to the City that "vaping" be banned in areas already banned from smoking. More needs to be done on this issue.

For the coming year, there are a lot of issues facing us. We are up to the task!

Nursing Outreach					
	2018	2017	2016		
Communicable Disease	35	45	30		
Disease Intervention Specialist	140	91	108		
Dental - Students Screened	3,370	1,697	2,761		
Clinic Services					
	2018	2017	2016		
STI Clinic	909	1,017	1,163		
International Travel	223	257	235		
Tuberculosis Testing	237	181	211		
Well-Baby Immunizations	237	454	587		
HIV Testing	82	766	1,149		
SWAP Visits	1,718	330	-		
SWAP HIV/HepC Tests	18	6	-		

# Office of Public Health Information

The Office of Public Health Information (OPHI) works with other divisions, agencies and the public to increase emergency preparedness and awareness of public health activities. In everyday activities as well as emergency situations, strong communication is the key to an effective response. Communication avenues used to keep our community and partners up to date on important issues are our website (www.cantonhealth.org), Health Alert Network (HAN) messages and social media. Social media provides the opportunity to provide real time information and has proven effective as an outreach tool. Facebook is used on a daily basis and continues to be an excellent means of providing Facebook friends with educational information, programs offered by public health and community activities. We have over 4,091 followers, which places Canton City Public Health 3<sup>rd</sup> amongst the other 95 Ohio health departments with pages! Our social media guru has also started to expand our use of Twitter as an additional communication channel. You can find us on Twitter @cantonhealth. You can find all of our social media by using our hashtag, #cantonhealth.

A branch of OPHI includes the public health discipline epidemiology. Epidemiologists study public health problems, such as unintentional injuries, communicable disease, environmental exposures, cardiovascular disease, obesity, tobacco use and other health-related issues that affect our community. Epidemiologists may prepare reports and presentations to assist with programmatic planning efforts and to display data in an understandable format. Our epidemiologist focuses on disease surveillance to identify, investigate and prevent outbreaks in our community. In 2018, 1,582 individual reportable disease cases were reported to the communicable disease staff at Canton City Public Health. The epidemiologist and communicable disease staff investigated 4 outbreaks within Canton City's limits (compared to 9 in 2016):

2 hand, foot and mouth disease investigations1 scabies investigation1 unknown gastrointestinal investigation



Of the mandated reportable disease cases investigated by Canton City Public Health, statistically significant differences were identified in the number of chlamydia infection, cryptosporidiosis, influenza-associated hospitalizations and tuberculosis from 2017 to 2018. A significant decrease was noted for chlamydia infection and tuberculosis, while a significant increase was noted for cryptosporidiosis and influenzaassociated hospitalizations. Overall, a statistically significant dif-

#### **Case Count of Select Reportable Diseases**

	2018	2017
Campylobacteriosis	19	26
Chlamydia infection	750	796
Cryptosporidiosis	11	2
Cyclosporiasis	0	0
E. coli, Shiga Toxin-Producing	6	1
Giardiasis	6	3
Gonococcal infection	388	326
Haemophilus influenzae (invasive disease)	2	2
Hepatitis A	0	0
Hepatitis B - acute	8	3
Hepatitis B - chronic	25	18
Hepatitis C - acute	4	1
Hepatitis C - chronic	107	105
Immigrant Investigation	0	0
Influenza-associated hospitalization	153	113
Legionellosis - Legionnaire's Disease	11	6
Lyme Disease	3	5
Meningitis - aseptic/viral	8	14
Meningitis - bacterial (Not N. meningitidis)	2	1
Mumps	1	1
Pertussis	8	17
Salmonellosis	8	4
Shigellosis	9	17
Streptococcal - Group A -invasive	8	5
Streptococcal - Group B - in newborn	1	0
Streptococcal toxic shock syndrome (STSS)	0	0
Streptococcus pneumoniae - invasive anti- biotic resistance unknown/non-resistant	9	7
Streptococcus pneumoniae - invasive anti- biotic resistant/intermediate	2	6
Syphilis - any stage	11	14
Tuberculosis	0	5
Varicella	4	1
Vibriosis (not cholera)	0	0
West Nile	2	0
Yersiniosis	2	2
Zika virus infection	0	0
Grand Total of All Reportable Diseases	1,582	1,504

ference was not identified between total cases from 2017 to 2018 (based on population estimates for Canton), even though there were 78 more cases reported among Canton City residents in 2018 than in 2017. The 1,582 cases reported in 2018 were slightly higher than the 5 year annual average of 1522.6 cases. Statistically significant decreases among cases in 2018 compared to the 5 year annual average were seen with chlamydia infection and influenza-associated hospitalizations. No statistically significant increases were identified.

## **SWAP Clinic**

This report provides an update of the Canton City Public Health (CCPH) Syringe Services Program (SSP) as required by Ohio law, Ohio Revised Code 3707.57. The SSP is a program that provides syringe exchange services in the County of Stark, in the City of Canton. This report outlines all aspects of the program including the distribution and receipt of syringes. This report does not account for other sources of syringes (prescription or nonprescription) available in the County.

The data in this report is taken from January 1, 2018 through December 31, 2018.

On June 23, 2017, CCPH began administering the SSP known as SWAP (Stark Wide Approach to Prevention). The goal of SWAP is to protect and promote the County of Stark resident's health and safety by preventing the spread of infectious diseases associated with injection drug use, and by decreasing the number of improperly disposed syringes in the community. The goal is addressed through three major components of the program: 1) Syringe exchange/linkage and referral; 2) Syringe disposal (grinding), and community cleanup; and 3) Community awareness and education.

Syringe exchange has been documented to be a public health intervention that reduces transmission of blood-borne pathogens, and also reduces the number of improperly discarded syringes in a community. CCPH utilizes a harm reduction approach by providing people who inject drugs with new syringes and a place to safely dispose of used syringes. At the same time, referrals and linkage to substance abuse treatment programs, mental health services, and medical services are provided along with information on disease prevention. Syringe access programs provide an essential link to health services for uninsured and marginalized populations that do not have access to traditional health care.

In addition to the program's core component of exchanging syringes and providing education and referrals, several other aspects of the program were developed and enhanced since its inception. SWAP continues to provide additional services including NARCAN® distribution, HIV and Hepatitis C rapid testing, administration of Hepatitis A and B vaccination, and wound care education and referrals. Education includes verbal and printed information on HIV, hepatitis, sexually transmitted infections (STIs), overdose prevention, wound care and treatment of abscesses, encouraging one-time use of needles and safe injection practices. External referrals include drug and alcohol treatment, medical care, mental health care, domestic violence, food, clothing and shelter.

In an effort to continuously improve SWAP, staff have consulted with other county operated syringe exchange programs.



The SWAP Planning Group is an Ad Hoc Committee of the Stark County Opiate Task Force and consists of stakeholders including recovery, counseling and support service agencies, a family support and advocacy agency and other content experts concerning syringe exchange, disease control and drug treatment who meet on a quarterly basis. This planning group has served to provide insight and guidance to SWAP while mitigating potential negative impacts of the program. CCPH staff works collaboratively with law enforcement in an effort to maintain an open dialogue regarding syringe exchange and other substance abuse issues.

HIV/AIDS infection due to injection drug use (IDU) has been essentially non-existent since the 1990's as seen in the chart below.



partment of Health HIV/AIDS Surveillance Program with the exception of the

most recent year (\*) being data from the Disease Intervention Specialist (DIS).

During the period from January 1, 2018 to December 31, 2018, there were 1,726 visits to SWAP. 362 unduplicated clients were served by the program.



Note: IDU associated exposure are inclusive of total case count per year. (Ex: Stark County had 12 cases of HIV in 2013, and 1 of those cases reported an IDU associated exposure).

#### 2018 Annual Report

The table below summarizes newly reported cases of chronic Hepatitis C and HIV/AIDS among Stark County residents from 2013 through 2018. HIV/AIDS case reporting generally takes at least 6 months to be considered complete, and all case data is subject to change as more information is collected.



Stark County Total Cases of Bloodborne Pathogens						
	2013	2014	2015	2016	2017	2018
Hepatitis C (chronic)	239	277	391	344	306	313
HIV/AIDS	12	22	25	32	27	31
$\rightarrow$ HIV/AIDS with IDU Associated Exposure	1	2	3	1	4	2

Stark Wide Approach to Prevention

Age Groups

15-19

20-24

25-29

30-34

35-39

40-44

45-49

50-54

55-59

60-64

Unknown/

Unreported

65+

Total

Count

2

36

67

69

57

22

19

9

8

2

2

6

299





Above data indicates that during the period from January 1, 2018 to December 31, 2018, SWAP collected 73,518 used syringes and distributed 87,143 new syringes. It is important to note that there are other legal sources of syringes in the community. The table above indicates the number of new syringes dispensed monthly from January 1, 2018 to December 31, 2018.

The tables below reflect the utilization data and basic demographics for SWAP over the period of Jan 1, 2018 to Dec 31, 2018.

Sex			
	Count	Rate <sup>†*</sup>	% of Total
Female	122	63.7	40.6%
Male	176	97.3	59.1%
Transgender	1	*	0.3%
Unknown/			
Unreported	0	*	0.0%
Total	299	80.3	100.0%
Deer			
Race			
	Count	Rate†*	% of Total
White	269	80.8	90.0%
Black	13	38.2	4.3%
Biracial	3	*	1.0%
Other <sup>3</sup>	5	88.4	1.7%
Unknown/Unreported	9 k	*	3.0%
Total	299	80.3	100.0%

Rate<sup>†\*</sup>

\*

157.1

290.9

328.1

264.1

108.3

79.4

35.8

29.0

\*

\*

\*

97.5

% of

Total

0.7%

12.0%

22.4%

23.1%

19.1%

7.4%

6.4%

3.0%

2.7%

0.7%

0.7%

2.0%

100.0%

Notes:

Services & Referrals			
	2018	Average per Visit	Average per Month
Narcan	287	5.74	24
Substance Use Referral	26	0.52	2.17
Mental Health Referral	3	0.06	0.25
HIV Testing	17	0.34	1.42
Hepatitis C Testing	9	0.18	0.75
Wound Care Education	61	1.22	5.08
Hepatitis A Vaccination - (Implemented 8/3/2018)	39	0.78	3.25
<b>Total Services &amp; Referrals</b>	442	8.84	36.83

OTHER SWAP PREVENTION ACTIVITIES FOR PEOPLE WHO INJECT DRUGS

• HIV education and rapid testing services

Hepatitis C education and rapid testing services

• Partner counseling services providing support for notification to partners of potential exposure and testing available to HIV positive individuals and their partners.

• Linkages for making follow up medical appointments for new HIV-positive people to reduce the number of individuals falling out of care and adherence to HIV medications.

- Bi-annual training in harm reduction.
- Distribution and education of Narcan Kits
- Vaccination and education on Hepatitis A/B
- Wound care recommendations and education

<sup>†</sup>Rate is based on Stark County Population, although not all clients report Stark County zip code. Rate is reported per 100,000 persons. All rates are crude rates.

Asterisk (\*) indicates rate not calculated for case counts <5 due to unstable rates. <sup>1</sup> denotes denominator too small to maintain stability or confidentiality.

<sup>2</sup> Transgender not reported for Race by Sex or Ethnicity by Sex.

<sup>3</sup> Other race category includes American Indian/Alaska Native, Asian Pacific Islander, Multiracial and Other as reported by clients.

<sup>4</sup> Hispanics/Latinx may be of any race

1.0% 1.7% OTHER SWAP PREVENTION AG

#### **IDENTIFIED AREAS FOR PROGRAM IMPROVEMENT**

#### Referrals/Linkages

CCPH, with the assistance of CommQuest Recovery Services will continue to improve the referral and linkages aspect of the program. CCPH continues to develop relationships with community partners in order to improve the quantity and quality of referrals and linkages to treatment and services and other services to SWAP participants when appropriate.

#### Hours of Operation

Currently, SWAP operates out of the health department on Friday afternoons from 2 PM to 4 PM. The day and time of operation appears to work for the high risk population (consistent attendance during hours of operation). There are limitations as to the day and time of operation because of the other services offered at CCPH. However, the hours of operation should efficiently serve the population while reducing the impact that SWAP has on the clinic and clinic staff – this is something the planning group will periodically evaluate and address.

#### Overdose Prevention

Thanks to the partnership with CommQuest, Narcan is distributed to SWAP participants for the purpose of overdose prevention services. Data is collected on overdose reversals and distribution of kits.

#### Law Enforcement Outreach and Education

Initial outreach to law enforcement was done prior to the program implementation on June 23, 2017. There have been a few occasions that officers have parked their vehicles within the one-block radius of the exchange. Additional department specific outreach is needed. We hope to expand our efforts in this area in the upcoming year.

#### **FISCAL IMPLICATIONS**

To date, the cost to operate SWAP is estimated to be \$88,282. It is anticipated that program costs will increase as the need increases.

Initially, funding was secured from United Way Foundation (to purchase NeedleShark grinder), startup funds

from AIDS Healthcare Foundation, and, most recently with State HIV prevention dollars which can be used to purchase harm reduction supplies. Recently, we gained approval for a grant from the Comer Family Foundation to purchase syringes.

#### CONCLUSION

Access to clean needles is making a positive difference in Stark County and remains an important component of the overall strategy to reduce transmission of blood borne disease.

Needle exchange services in Stark County plays a significant role in the strategy to reduce the number of improperly discarded syringes.

#### 2019 Goals

- Continue anonymous, safe services to reduce the risk of HIV and Hepatitis C infection in our communities by
  promoting revisits by clients and encouraging clients to tell others about SWAP.
- Continue to educate clients on the importance and rational of using each syringe one time only.
- Continue development of program for overdose prevention and naloxone availability.
- Continue to inform clients at each visit of resources available at SWAP and in the community.
- Continue to offer free HIV testing and counseling at each visit.
- Continue offering free Hepatitis C testing and offering Hepatitis A & B vaccine.
- Continue dialog with clients regarding improvement of SWAP services.
- Prioritize supplies to be stocked, keeping only those deemed necessary to maintain safe practices among IDU clients. Inform clients of alternative safe materials, such as using soda bottles for the collection of used needles in lieu of sharps containers.

Line Item	Annual
Personnel (Salary/Benefits)	\$38,930.00
Outside Partnerships	\$10,920.00
Supplies	\$38,432.00
TOTAL	\$88,282.00

## Stark County THRIVE Project Dawn Miller, MBA, Project Manager



Beginning in July 2013, Stark County was identified as one of nine Ohio communities with highest infant mortality and racial disparity rates. Canton City Public Health convened a comprehensive coalition of community partners and formed Stark County THRIVE (Toward Health Resiliency for Infant Vitality and Equity) to address the unacceptable infant mortality and disparity rates in Stark County. Stark County THRIVE focuses on supporting the implementation of evidence-based and promising practice programs and services.

Significant research has shown that infants who reach their first birthday have a greater chance of thriving to adulthood. Factors that increase the risk of infant mortality include late entry into prenatal care, exposure to tobacco smoke, substance use, low educational attainment, poverty, and maternal stress.

THRIVE has been working to improve access to primary care and social services for women most at-risk of poor birth outcomes, with a focus on serving African-American pregnant women and women of childbearing age (ages 15-44) living in areas of Stark County identified as having the poorest rates of birth outcomes.



Preliminary 2018 data shows that Stark County's infant mortality rates have improved significantly over 2017 rates, more than a 30% decrease in our infant mortality rate from 2017. More importantly, in 2018, black and white babies experienced near equity in the rates of vitality after birth. This happened because of collaboration, a significant influx of resources into our community, and increased access to culturally relevant services

THRIVE's 15 Community Health Workers (CHWs) connect pregnant women to the medical and social services they need in order to have full-term, healthy-weight babies. The CHWs coordinate care (which prevents duplication of services), improve efficient and effective service delivery, and offer one-on-one support that helps the moms address barriers to care and reduce risk. Since 2017, the CHWs have supported:

- over 500 pregnant women and women of childbearing age
- over 140 births
  - Individuals and families in getting needed medical and social services and basic needs

We have gained a much deeper understanding of the nature of Stark County's infant mortality problem through the monitoring, analysis and evaluation of data, community conversations, and significant collaboration. We have received finan-



cial support for our efforts from state and local funders including all Stark County hospitals, Sisters of Charity Foundation of Canton, Stark Community Foundation and United Way of Greater Stark County. We have implemented evidence-based programs designed to lower our infant mortality rates and reduce the racial disparity in our birth outcomes. We thank the community and our partners for supporting this collaborative program!



#### **Canton City Public Health**

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Canton City Public Health is proud to present our annual report for 2018. This report represents a brief summary of the activities of an amazing group of public health professionals. Health Department staff are working to improve our neighborhoods, protect our food, monitor the air we breathe, follow up on a contagious disease, track vital records, work with new moms to provide better nutrition for their babies and provide immunizations and education that will help improve the health of those who live, work and play in the City of Canton.

## Women, Infants & Children (WIC) Laura Roach, RD, LD; WIC Director

Retention of WIC program participation continued to be a primary goal across the Nation in 2018. Extensive research shows that WIC contributes to positive developmental and health outcomes for the women and young children it serves. Specifically, participation in the WIC Program is associated with healthier birth outcomes and stronger connections to preventive health care.

Monthly Average WIC Program Participants					
	2018	2017	2016		
Canton City WIC	2,138	2,210	2,389		
Total Stark County WIC	5,574	5,881	6,296		

As stated in the 2017 Annual Report, retention attempts go beyond large-scale program changes made at the Federal and State levels, such as the transition to WIC food benefit cards instead of paper vouchers. Local efforts evolve as we identify areas of improvement in our clinical processes and customer service skill sets. Canton City WIC is now actively monitoring the objectives outlined in our agency's Strategic Plan to better meet the needs of our community.

The WIC Division sees this document as a crucial tool for staying on task. Initial objectives and action steps will be revised to maintain this as a "working document" that can progress as we identify more effective ways to reach our overarching goal of increasing the number of individuals we serve.

WIC Program participation makes our city stronger. Adequate nutrition during critical stages of growth is crucial for the future health of our community. Canton City WIC staff provide nutrition education and breastfeeding support, along with referrals to necessary health and social service agencies. These efforts yield lifelong, positive health outcomes, proving WIC as an effective Public Health Program time and time again. I'm proud to be a part of promoting the health and well-being of Stark County. Keep up the great work everyone!



Building a Healthier Canton