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A Message from the Health Officer

To the Residents of Alcona, Iosco, Ogemaw and Oscoda Counties,

On behalf of the Board of Health Commissioners and staff, I am pleased to present the 2013-2014 Annual Report. This is my inaugural year as your Health Officer, and it is a privilege to provide public health leadership and advocacy to the residents and visitors of our four (4) great counties.

The year started off with implementing a Community Health Needs Assessment and analyzing the data, so health improvement strategies could be developed with our community partners.

April, 2014 was the inception of the Healthy Michigan Plan and the debut of the Health Insurance Marketplace. DHD2 staff became Certified Application Counselors to help enroll residents for these health care coverage options.

The largest outbreak of Ebola in history began in 2014. Staff prepared for and implemented traveler surveillance following all CDC and MDHHS protocols. We also worked closely with community hospitals and healthcare providers being a resource and creating public health messages to ensure residents knew we were being vigilant.

Internally, Strategic Planning efforts began to immediately address financial shortfalls that the department had been experiencing in the last couple of years, and to reenergize our mission by building a culture of workplace excellence and service to our community. District Health Department No. 2 is striving to be a robust, proactive local health department that advocates for health care access and coordinated care for all residents.

My sincere thanks to the staff for their hard work efforts and dedication to our mission; and the County Boards of Commissioners for their continued support ensuring a healthier tomorrow for all residents.

Here to Serve,
Denise M. Bryan, M.P.A.

A Message from the Medical Director

As Medical Director, I am responsible for the department’s medical and health care provision, oversight and program participation. We must be ever vigilant for the unanticipated with planning and exercising those plans to address the multitude of potential threats and risks to the residents covered by District Health Department. No. 2.

The economy has demonstrated progressive governmental funding cuts to public health and with the early institution and variety of changes brought about by The Affordable Care Act, District Health Department No. 2 has needed to make some significant changes in providing care to clients and the community. District Health Department No. 2 continues to provide quality programs to clients accessing services. However, funding cuts have challenged our programs, but employees remain committed to providing the care and services necessary to meet the public health mandates of access, policy and assurance. District Health Department No. 2 continues to monitor (surveillance), provide information (education), and services, and intervene when necessary to address issues related to communicable disease in the community, environmental contamination, food-borne and vaccine-preventable illness outbreaks, and address illicit substance threats, and commercial product recalls when necessary.

I am personally committed to working diligently with the new Health Officer, Denise Bryan, our DHD2 Board of Health Commissioners, and staff to create healthier communities for all.

Sincerely,
Dr. Russell L. Bush, M.D.
MISSION AND VALUES

Our Mission:
District Health Department No. 2 provides leadership in promoting environmental and personal health through health promotion, disease detection, disease prevention, education and regulation.

Our Values:
Service-Focused: We are committed to respectful, courteous and superior customer service. We foster teamwork and embrace the richness of diversity and inclusion.
Communication and Collaboration: We believe that communication and collaboration among Divisions and staff promote better service for the public. Every effort is made to create local, State and National partnerships to achieve mutual goals and efficiently leverage assets and resources.
Flexibility and Innovation: We believe that flexibility and innovation can help us be more efficient and effective in addressing the needs of our constantly changing community. DHD2 embraces a culture of continuous quality improvement and strives to provide excellence in program delivery.
Focus on Equity: We believe in the right for all people to achieve health access and equity in our communities.
Responding to Need: We believe in working with our communities by demonstrating both strategic and timely responses to public health needs.
Sustainability: We are committed to the principles of sustainability, whereby the interdependency of the natural environment, economic system, and social structure of DHD2 are recognized as fundamental to all DHD2 policy and program decisions.
What is Public Health?

Public health as a discipline exists to prevent disease, promote health and prolong life among the population as a whole. With an aim to provide conditions in which people can be healthy, and a focus on the entire population, public health works to create healthy people and environments for all. Preventing health problems before they occur is the main goal of public health.

With a unique role of performing core functions such as assessment, policy development, and assurance, public health works to deliver the ten (10) Essential Public Health Services in collaboration with the community.

These functions and services are the foundation of all District Health Department No. 2's work.

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Core Functions

**Assessment, Assurance & Policy Development &
Ten Essential Services**

<table>
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<tr>
<th>1. Monitor health status to identify problems</th>
<th>6. Enforce laws and regulations that protect health and ensure safety</th>
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<tr>
<td>2. Diagnose and investigate health problems and hazards</td>
<td>7. Assure competent public and personal health care workforce</td>
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<tr>
<td>3. Inform, educate, and empower people about health issues</td>
<td>8. Evaluate effectiveness, accessibility, and quality of personal and population efforts</td>
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<tr>
<td>4. Mobilize partnerships to identify and solve problems</td>
<td>9. Utilize research for new insights, innovative solutions to health problems</td>
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<tr>
<td>5. Develop policies and plans that support individuals and state-wide health efforts</td>
<td>10. Link people to needed health services and assure the provision of health care when otherwise unavailable</td>
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Centers for Disease Control, [www.cdc.gov](http://www.cdc.gov)
Financial Summary

FY 2013-2014 Expenditures

- Personnel: $3,224,396
- Contractual: $174,857
- Equipment: $156,658
- Supplies: $301,943
- Communications: $88,398
- Travel: $200,334
- Other: $122,863

Total Expenditures: $4,269,449

FY 2013-2014 Revenue

- State & Federal Funds: $846,356
- Other: $416,876
- Deficit: $111,769
- Grants: $919,619
- County Appropriations: $448,546
- Fees: $1,526,283

Total Revenue: $4,269,449
Community Health Needs Assessment

In an effort to assess the health needs of Alcona, Ogemaw and Oscoda Counties in Northeast Lower Michigan, the North-East Michigan Rural Health Planning Network administered a community health needs assessment (CHNA) project which was spearheaded by District Health Department No. 2 in the summer of 2014. Utilizing a 22 question survey that contained open-ended, multiple choice and rating system questions, trained interviewers partnered with several local businesses, agencies, and community service organizations to interview the residents. Survey questions gathered demographic data including gender, age and zip code, as well as questions related to healthcare, such as quality, availability and type of insurance. Other question categories included individual behavior questions such as alcohol, drug and tobacco use and questions regarding weight and physical activity; as well as community questions such as feeling safe in the community and access to safe drinking water and plumbing. A total of 271 surveys were collected throughout the three counties.

Data analysis revealed a few significant findings. Of concern is the 73% of residents who leave the county for medical services. The full report can be found on our website at www.dhd2.org/reportsandmetrics.

The Findings....
The two (2) focus areas are:

Vision: Equal access to high quality, holistic, patient-centered and affordable healthcare.

Vision: Environment that supports healthy living for all.
ENVIRONMENTAL HEALTH

The Environmental Health (EH) Division, under the direction of EH Director Douglas Getty, provides state mandated programs to DHD2 residents. These services include Food Services, Sanitation, Public and Private Water Supply, and Onsite Water Waste Treatment and Disposal. Additionally, staff also administer programs such as Public Swimming Pools, Campground Inspections, Beach Monitoring, Body Art Facility Inspections, Disinterment/Reinterment, Ground Water Pollution Investigations, Clandestine Drug Manufacturing Sites, and complaints.

Highlights from 2013-2014

- Several ounces of mercury were turned which led to investigations of two residences for potential mercury contamination in Alcona and Ogemaw Counties.
- An Environmental Canine was brought to Iosco County to search for possible sewage leaks. A total of 75 locations were checked.
- Methamphetamine manufacturing at two locations resulted in orders to vacate the residences while two orders were also lifted upon completion of proper clean-up and testing.
- EH staff responded promptly to a tornado in the community of Hale by visiting food service establishments to determine any damage.
- One (1) Formal Hearing was held with a food establishment regarding repeated violation of the Food Law.
- One (1) Administrative Hearing was conducted with a well drilling firm regarding repeated violations of the Well Construction Code.
- EH staff assisted MDEQ in placing fish advisory signs along the AuSable River due to contaminated fish.
- Committee Hearings were held for well drilling and on-site sewage disposal to take comments regarding the revision of the Environmental Health Sanitary Code.

| Type III Well Permits/Notifications Completed | 404 |
| Type II Public Water Supply Permits | 4 |
| Inland and Great Lakes Beach Samples Collected | 445 |
| Licensed and Routine Food Establishments Conducted | 730 |
| Sewage Disposal Permits Issued | 339 |
| Temporary Food Service License Inspections | 116 |
| Public Health Complaints Responded to | 86 |
| Other Inspections: septage trucks, mortgage evaluations, campgrounds, public swimming pools, tattoo facility, and DHS inspections | 176 |
HEALTH EDUCATION

The Public Health Education and Promotion Staff work to identify and address needs of community residents through securing, building, and maintaining public health programs. Cori Upper, the Health Education Coordinator as well as Health Education staff strive to achieve overall health and well-being for the residents of our four counties. Two primary program areas are:

Taking Charge Program
The Taking Charge Program, administered through the Michigan Abstinence Program, was able to reach 346 youth from six (6) school districts. Erin Grezeszak, Program Facilitator, provides the program in 7th and 8th grades in Fairview Area Schools, as well as 7th grade in Mio-Ausable Schools, Oscoda Area Schools, St. Joseph Catholic School, Tawas Area Schools and Whittemore-Prescott Schools. Of the youth taking part in the program, 87% “agreed” or “strongly agreed” that they were satisfied with the program while 90% found the program either “helpful” or “very helpful”.

Tobacco-Free Schools
In conjunction with the Michigan Department of Community Health, Tracey Wood, Program Facilitator, worked with local school districts to strengthen their tobacco policies to protect students, staff, and visitors from the dangers of secondhand smoke. In May of 2014, Oscoda Area Schools became the 4th school in the service area to adopt a comprehensive 24/7 tobacco free on and off campus policy, which includes the use of e-cigarettes and other new generation products. This means that 50% of the school districts within the service area now have such policies. Staff will continue to work with the remaining districts to strengthen their policies.

Emergency Preparedness

District Health Department No. 2 is dedicated to protecting the health of our community during public health emergencies such as disease outbreaks, terrorist threats, or natural disasters. Cori Upper, Emergency Preparedness Coordinator, and Tracey Wood, Public Information Office, as well as all DHD2 staff, actively collaborate with local, state and federal agencies to prepare for and respond to incidents that threaten public health.

In May of 2014, District Health Department No. 2 conducted a Strategic National stockpile exercise at our East Side Dispensing Site. The entire staff of DHD2 along with emergency response partners from Iosco and Alcona Emergency Management, and the Michigan Department of Community Health Office of Public Health Preparedness participated in the exercise. The goal of the exercise was to deploy our Electronic Medical Records (EMR) System, Insight, at a designated dispensing site and determine if it was feasible to register and track clients using the system at the site. The exercise was a great opportunity for staff to gain knowledge and skills related to the Strategic National Stockpile Plan. The After Action Report revealed several areas for improvement that once addressed will improve our response to emergencies moving forward.
Community Health

All health care is local. In recognizing the health care provider shortage in North-East Michigan, our clinical services fill gaps that would otherwise result in furthering health disparities for rural families. Our clinic services are vital to those we are serving. The programming is diverse from screening hearing and vision for children in school, Breast Cancer screening, Immunizations, Oral Health outreach including Fluoride varnish, Family Planning, nutritional supplements and education for moms, babies and children via our WIC program and so much more... Multi-disciplinary clinical teams deliver service in a non-judgmental and cultural competency manner. Coordinating clinical services are Karla Mattson, RN, Marsha Schnautz, RN, and Sharon Langley, RD.

Some of Our Programs:

- **Maternal Infant Health Program (MIHP)**
  MIHP is a home visiting program for pregnant women and infants with Medicaid insurance. MIHP provides support services to women and to parents so they have healthy pregnancies, good birth outcomes, and healthy infants.

- **Fluoride Varnish**
  In 2013-2014, DHD2 started a fluoride varnish program where certified nurses provide fluoride varnish to infants from 6 months to 35 months old.

- **Women, Infants, and Children (WIC)**
  WIC, is a health and nutrition program that has demonstrated a positive effect on pregnancy outcomes, child growth and development. WIC provides supplemental foods, health care referrals, and nutrition education for income eligible pregnant, breastfeeding, and non-breastfeeding post-partum women, and to infants and children up to 5 years of age.

- **Immunizations**
  DHD2 works with the Center’s for Disease Control and Prevention in reducing vaccine preventable diseases by providing free or affordable immunizations to all people from birth through adulthood. Unless we can completely eliminate the disease, it is important to keep immunizing. Immunizations are a critical strategy to protect all from vaccine preventable communicable diseases.

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<thead>
<tr>
<th>Vision Screens Conducted</th>
<th>4,572</th>
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<tbody>
<tr>
<td>Hearing Screens Conducted</td>
<td>2,812</td>
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<tr>
<td>BCCCP Clients Served</td>
<td>333</td>
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<tr>
<td>Wise Women Clients Served</td>
<td>105</td>
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<tr>
<td>Family Planning Clients</td>
<td>472</td>
</tr>
<tr>
<td>MIHP Visits</td>
<td>1,702</td>
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<tr>
<td>Communicable Disease</td>
<td></td>
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<tr>
<td>Investigations</td>
<td>226</td>
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<tr>
<td>Reported STD's</td>
<td>97</td>
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<tr>
<td>Court Ordered HIV Tests Conducted</td>
<td>12</td>
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<tr>
<td>WIC Caseload</td>
<td>1,806</td>
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<tr>
<td>TB Skin Tests Given</td>
<td>88</td>
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<tr>
<td>Flu Shots Given</td>
<td>512</td>
</tr>
<tr>
<td>Immunizations Given</td>
<td>2770</td>
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- **Breast Feeding Peer Counselor Program**
  Breastfeeding is the most natural, healthy, and loving gift a mother can give to her baby. Mother’s milk has everything a baby needs to grow and stay healthy. The Peer Counselor Program provides answers to breastfeeding questions and helps mom who continue breastfeeding after they go back to work or school.
**Home Health Care**

DHD2 Home Health offers skilled nursing visits and provided 3,695 hours of care in clients' homes. Our licensed nursing staff provided evaluations, skilled treatment, provided disease process education to clients and families, developed individual care plans, made referrals and assisted clients in care management.

DHD2 home health aides provided 1,165 hours of assistance in personal care and activities of daily living in 2014.

DHD2 therapists provided 1,665 hours of rehabilitative services in clients' homes.

DHD2 has licensed Social Workers who may assist and evaluate individual clients' needs.

Our agency is Medicare and Medicaid certified and accepts these insurances without additional billings to our clients. We participate with many other plans, like Aetna, BC/BS, PPO's, and VA.

We are nationally recognized, a local pioneer, and have provided in home care since 1968.

Our dedicated nurses are on call 24/7. Referrals are made through hospitals, physicians, family members, community agencies and self-referral.

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**Our Locations**

**Harrisville Office**
**Alcona County**
311 Lake Street
Harrisville, MI 48740
Phone: (989) 724-6757
Fax: (989) 343-1894

**Tawas Office**
**Iosco County**
420 W. Lake Street
Tawas City, MI 48764
Phone: (989)-362-6183
Fax: (989)-362-5211

**Mio Office**
**Oscoda County**
393 S. Mt. Tom Road
Mio, MI 48647
Phone: (989) 826-3970
Fax: (989) 343-1895

**West Branch Office**
**Ogemaw County**
630 Progress Street
West Branch, MI 48661
Phone: (989) 345-5020
Fax: (989) 343-1899

www.dhd2.org

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