

# HEALTH DEPARTMENT

## MISSION AND SERVICES

**Mission** - The Health Department protects and promotes the health of individuals within the County in order to ensure a healthier quality of life.

**The agency's mission supports accomplishing the countywide vision by:**

- Working for healthy citizens and residents
- Working to support families and individuals in need

**Core Services –**

- Protecting health, including outpatient prenatal and reproductive health care services; alcohol, drug and addictions prevention and treatment; investigate and control communicable diseases; manage prevention efforts; and licensing and inspecting county restaurants and food service facilities
- Promoting healthy lifestyles

## SERVICE DELIVERY PLAN AND PERFORMANCE

**GOAL 1** - To protect the health of county residents in order to prevent disease.

**Objective 1.1** – Decrease the percent of high and moderate food service facilities receiving disease related critical violations from 46% in FY 2008.

Targets	Long Term Target Compared with Performance																		
<ul style="list-style-type: none"> <li>▪ <b>Short term:</b> By FY 2010 – 30%</li> <li>▪ <b>Intermediate term:</b> By FY 2013 – 25%</li> <li>▪ <b>Long term:</b> By FY 2016 – 20%</li> </ul>	<p>Long term target (FY 16): 20%</p> <table border="1" style="margin: auto; border-collapse: collapse;"> <thead> <tr> <th>Fiscal Year</th> <th>Performance (%)</th> <th>Status</th> </tr> </thead> <tbody> <tr> <td>FY 2007</td> <td>31%</td> <td>Actual</td> </tr> <tr> <td>FY 2008</td> <td>46%</td> <td>Actual</td> </tr> <tr> <td>FY 2009</td> <td>33%</td> <td>Actual</td> </tr> <tr> <td>FY 2010</td> <td>35%</td> <td>Estimated</td> </tr> <tr> <td>FY 2011</td> <td>33%</td> <td>Projected</td> </tr> </tbody> </table>	Fiscal Year	Performance (%)	Status	FY 2007	31%	Actual	FY 2008	46%	Actual	FY 2009	33%	Actual	FY 2010	35%	Estimated	FY 2011	33%	Projected
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**Performance Measures –**

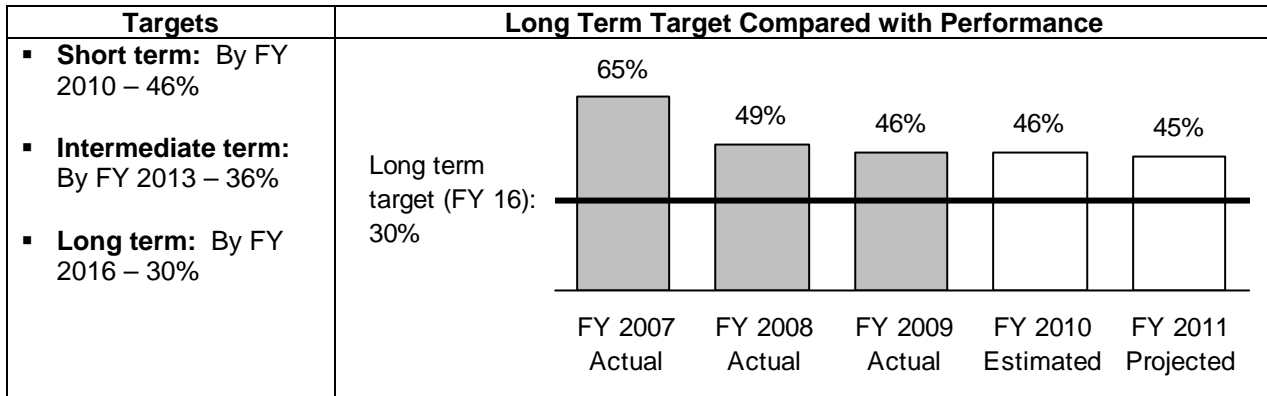
Measure Name	FY 2007 Actual	FY 2008 Actual	FY 2009 Actual	FY 2010 Estimated	FY 2011 Projected
<b>Resources (input)</b>					
Number of full time food service facility (FSF) inspectors	12	10	11	11	11
<b>Workload, Demand and Production (output)</b>					
Number of high and moderate priority FSFs inspected	2,039	2,212	3,715	3,500	3,715
Percent of required high and moderate FSF State inspections conducted	35%	37%	61%	57%	61%
<b>Efficiency and Quality</b>					
Average number of high and moderate FSFs inspected per inspector	169.9	221.2	337.7	318.2	337.7
<b>Impact (outcome)</b>					
Percent of high and moderate FSFs cited for disease-related critical violations	31%	46%	33%	35%	33%

**Performance Measures Explanation –** The food service facilities indicated above are considered at increased risk for causing food borne illnesses. Moderate priority facilities require two inspections annually while high priority facilities require three. The food service facilities that are cited for disease-related critical violations are temporarily closed until such time as the problem is corrected.

**Strategies to Accomplish the Objective –**

- **Strategy 1.1.1** – Monitor and inspect facilities to ensure legislative compliance
- **Strategy 1.1.2** – Ensure complaints are responded to within 24 hours
- **Strategy 1.1.3** – Cite facilities violating the County’s code

**Objective 1.2** - Decrease the percent of county swimming pools and spas receiving disease related critical violations from 49% in FY 2008.



**Performance Measures –**

Measure Name	FY 2007 Actual	FY 2008 Actual	FY 2009 Actual	FY 2010 Estimated	FY 2011 Projected
<b>Resources (input)</b>					
Number of swimming pool inspectors	5	5	5	5	5
<b>Workload, Demand and Production (output)</b>					
Number of public swimming pools and spas that have permits	333	346	345	366	373
Number of public swimming pool and spa inspections	388	584	447	549	597
<b>Efficiency and Quality</b>					
Average number of public swimming pools and spa inspections conducted per inspector	77.6	116.8	89.4	109.8	119.4
Percent of general complaints responded to within 72 hours	62%	64%	62%	75%	90%
<b>Impact (outcome)</b>					
Percent of swimming pools and spas closed due to disease related critical violations	65%	23%	30%	30%	29%
Percent of public swimming pools and spas cited for all critical violations (including disease-related)	65%	49%	46%	46%	45%

**Performance Measures Explanation** –Swimming pools and spas mainly operate during the spring and summer and as such that is when disease-related violations most frequently occur.

**Strategies to Accomplish the Objective –**

- **Strategy 1.2.1** – Inspect facilities
- **Strategy 1.2.2** – Respond to the community’s complaints
- **Strategy 1.2.3** – Cite swimming pools and spas that are in violation of county code
- **Strategy 1.2.4** – Close spas and pools that have disease related critical violations
- **Strategy 1.2.5** – Train staff prior to the spring in preparation for pool and spa openings

**Objective 1.3** - Increase the percent of drinking water wells certified as potable after the first water testing cycle from 73% in FY 2008.

Targets	Long Term Target Compared with Performance										
<ul style="list-style-type: none"> <li>▪ <b>Short term:</b> By FY 2010 – 85%</li> <li>▪ <b>Intermediate term:</b> By FY 2013 – 90%</li> <li>▪ <b>Long term:</b> By FY 2016 – 95%</li> </ul>	<p>Long term target (FY 16): 95%</p> <table style="margin-left: auto; margin-right: auto; border-collapse: collapse;"> <tr> <td style="text-align: center;">71%</td> <td style="text-align: center;">73%</td> <td style="text-align: center;">85%</td> <td style="text-align: center;">85%</td> <td style="text-align: center;">88%</td> </tr> <tr> <td style="text-align: center;">FY 2007 Actual</td> <td style="text-align: center;">FY 2008 Actual</td> <td style="text-align: center;">FY 2009 Actual</td> <td style="text-align: center;">FY 2010 Estimated</td> <td style="text-align: center;">FY 2011 Projected</td> </tr> </table>	71%	73%	85%	85%	88%	FY 2007 Actual	FY 2008 Actual	FY 2009 Actual	FY 2010 Estimated	FY 2011 Projected
71%	73%	85%	85%	88%							
FY 2007 Actual	FY 2008 Actual	FY 2009 Actual	FY 2010 Estimated	FY 2011 Projected							

**Performance Measures –**

Measure Name	FY 2007 Actual	FY 2008 Actual	FY 2009 Actual	FY 2010 Estimated	FY 2011 Projected
<b>Resources (input)</b>					
Number of sanitarians	6	6	6	6	6
<b>Workload, Demand and Production (output)</b>					
Number of well permits issued	168	117	60	60	117
Number of wells inspected during installation process	235	222	109	109	222
Number of wells sampled	31	41	76	76	81
Number of wells requiring additional water sampling after the first water sampling cycle	9	14	11	11	14
<b>Efficiency and Quality</b>					
Average number of well inspections per sanitarian	39.2	37.0	18.2	18.2	37.0
Percent of wells inspected within 24 hours of notice of installation			75%	75%	83%
<b>Impact (outcome)</b>					
Percent of wells certified potable after one water testing cycle	71%	73%	85%	85%	88%

**Performance Measures Explanation –** A water testing cycle consists of two consecutive sets of water samples sent for bacterial cultures and collected on different days. If either culture is positive for bacterial growth the contaminated well must be disinfected and the water testing cycle repeated. Testing for bacterial seepage begins when the well has been freshly grouted. Contaminated well water is associated with diseases for the individuals and communities dependent on that well for their water supply.

**Strategies to Accomplish the Objective –**

- **Strategy 1.3.1** – Inspect wells during the installation process
- **Strategy 1.3.2** – Sample wells for water quality
- **Strategy 1.3.3** – Inspect wells within 24 hours of installation

**Objective 1.4 - Reduce the incidence of selected communicable disease from 2,237 in CY 2008.**

Targets	Long Term Target Compared with Performance																		
<ul style="list-style-type: none"> <li>▪ <b>Short term:</b> By CY 2010 – 2,189</li> <li>▪ <b>Intermediate term:</b> By CY 2013 – 2,145</li> <li>▪ <b>Long term:</b> By CY 2016 – 2,102</li> </ul>	<p>Long term target (FY 16): 2,102</p> <table border="1" style="margin: 0 auto; border-collapse: collapse;"> <thead> <tr> <th>Fiscal Year</th> <th>Actual / Estimated / Projected</th> <th>Value</th> </tr> </thead> <tbody> <tr> <td>FY 2007</td> <td>Actual</td> <td>2,257</td> </tr> <tr> <td>FY 2008</td> <td>Actual</td> <td>2,237</td> </tr> <tr> <td>FY 2009</td> <td>Actual</td> <td>2,996</td> </tr> <tr> <td>FY 2010</td> <td>Estimated</td> <td>2,996</td> </tr> <tr> <td>FY 2011</td> <td>Projected</td> <td>2,846</td> </tr> </tbody> </table>	Fiscal Year	Actual / Estimated / Projected	Value	FY 2007	Actual	2,257	FY 2008	Actual	2,237	FY 2009	Actual	2,996	FY 2010	Estimated	2,996	FY 2011	Projected	2,846
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FY 2010	Estimated	2,996																	
FY 2011	Projected	2,846																	

**Performance Measures –**

Measure Name	FY 2007 Actual	FY 2008 Actual	FY 2009 Actual	FY 2010 Estimated	FY 2011 Projected
<b>Workload, Demand and Production (output)</b>					
Number of health screenings and investigations for infectious diseases	2,197	2,165	49,236	50,214	47,703
Number of vaccinations provided	12,291	10,500	18,817	37,698	30,158
<b>Efficiency and Quality</b>					
Percent of persons completing anti-tuberculosis drug therapy		95%	95%	95%	95%
<b>Impact (outcome)</b>					
Average number of selected infectious disease cases in the County (in calendar year)	2,257	2,237	2,996	2,996	2,846
Average number of infectious disease cases per 100,000 persons (excluding HIV; data by calendar year)	267	266	363	363	344
Average number of HIV cases per 100,000 persons		12.1	12.7	12.7	12.7
Average number of tuberculosis cases per 100,000 persons	8	8	8	8	8
Average number of food and waterborne cases per 100,000 persons	29.0	24.0	26.5	26.5	25.1
Average number of gonorrhea and syphilis cases per 100,000 persons	180	192	192	192	200
Average number of invasive meningococcal cases per 100,000 persons	1.0	0.24	0.24	0.24	0.24
Number of human rabies cases per 10,000 persons	0	0	0	0	0

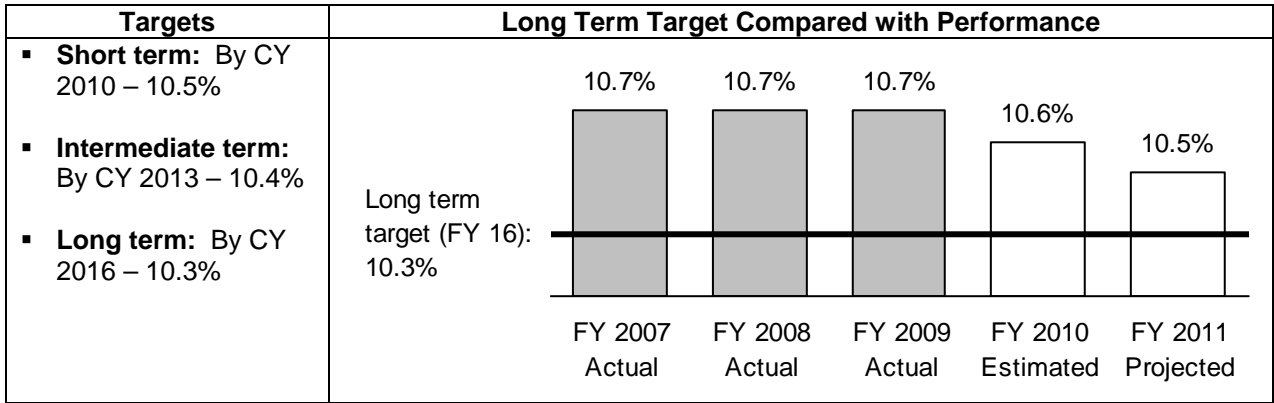
**Performance Measures Explanation –** Reducing illness and deaths from communicable diseases is a priority; to accomplish this the department focuses on screening residents in order to find diseases in their earliest stages so they can be more successfully treated. The selected investigations for infectious outbreaks are tuberculosis, gonorrhea, syphilis, HIV, food and waterborne diseases, vaccine preventable diseases (i.e.H1N1 and the seasonal flu), invasive meningococcal, invasive haemophilus influenza and human rabies (animal exposure investigations).

**Strategies to Accomplish the Objective –**

- **Strategy 1.4.1 –** Screen individuals for diseases
- **Strategy 1.4.2 –** Investigate infectious disease cases
- **Strategy 1.4.2 –** Vaccinate at risk and recommended populations per the Center for Disease Control
- **Strategy 1.4.3 –** Identify those who need medical treatment for infectious diseases
- **Strategy 1.4.4 –** Provide case management to complete treatment of infectious diseases

**GOAL 2** - To promote health among county residents in order to reduce disease morbidity and mortality.

**Objective 2.1** - Reduce the percent of low birth weight infants ( less than 2,500 grams at birth) born in the County from 10.7% in CY 2008.



**Performance Measures –**

Measure Name	FY 2007 Actual	FY 2008 Actual	FY 2009 Actual	FY 2010 Estimated	FY 2011 Projected
<b>Workload, Demand and Production (output)</b>					
Number of new prenatal clients served	985	677	586	553	553
<b>Efficiency and Quality</b>					
Average number of clients served per clinician	109.4	75.2	73.3	69.1	69.1
<b>Impact (outcome)</b>					
Percent of low birth babies born to county residents (by calendar year)	10.7%	10.7%	10.7%	10.6%	10.5%
Average number of live births in the County that result in death per 1,000 persons (by calendar year)	11.7	10.9	10.9	11.0	10.9
Percent of African American low birth weight infants (by calendar year)	12.30%	12.30%	12.30%	12.60%	12.40%
Average number of African American live births in the County that result in death per 1,000 persons (by calendar year)	13.8	14.9	14.9	14.0	13.8
Percent of non-Hispanic white low birth weight infants born to county residents (calendar year)	7.20%	7.60%	7.60%	7.40%	7.20%
Average number of non-Hispanic live births in the County that result in death per 1,000 persons (by calendar year)	8.0	4.3	4.3	5.0	4.8
Percent of Hispanic low birth weight infants born to county residents (by calendar year)	8.40%	6.80%	6.80%	6.50%	6.30%
Average number of Hispanic live births in the County that result in death per 1,000 persons (by calendar year)	4.9	3.3	3.3	4.0	3.8

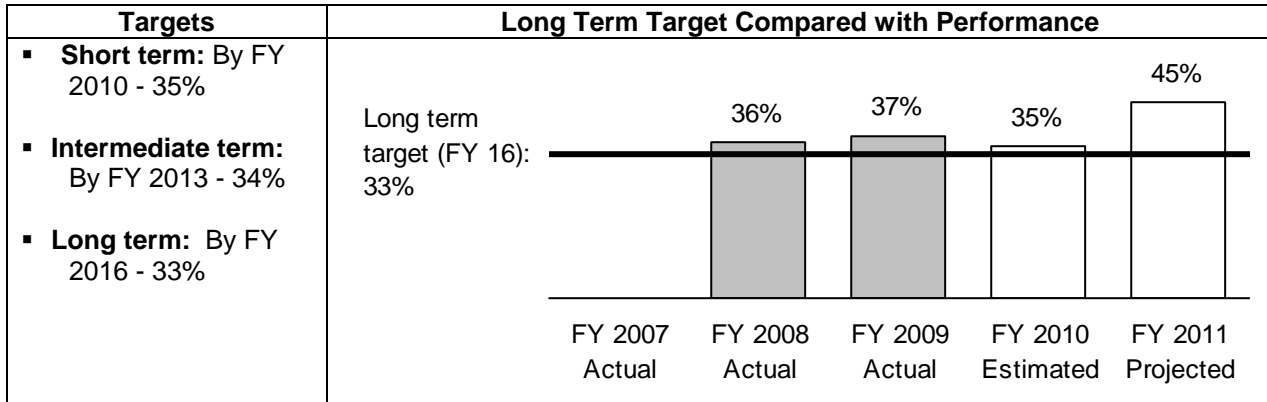
**Performance Measures Explanation –** Low birth weight is a major driver of and a surrogate measure for infant mortality. Early, appropriate and on-going prenatal care is linked to positive pregnancy outcomes such as full-term births and babies born with birth weights within normal limits. African American infants have the highest rate of mortality, of all groups, in the County as well as the State. FY 2009 data for all outcome measures above are estimated.

**Strategies to Accomplish the Objective –**

- **Strategy 2.1.1 –** Provide clients with prenatal care visits for all stages of prenatal care to improve outcomes

- **Strategy 2.1.2** – Ensure expecting mothers have a reasonable waiting time for their first prenatal visit
- **Strategy 2.1.3** – Ensure women entering their first trimester that are in need and are interested have access to and attend prenatal care to optimize outcomes
- **Strategy 2.1.4** – Monitor and evaluate trends in infant mortality for low birth weight remediation

**Objective 2.2-** Reduce the percent of abnormal results found in at risk individuals who are screened for chronic diseases from 36% in FY 2008.



**Performance Measures –**

Measure Name	FY 2007 Actual	FY 2008 Actual	FY 2009 Actual	FY 2010 Estimated	FY 2011 Projected
<b><i>Workload, Demand and Production (output)</i></b>					
Number of individuals screened		2,130	1,657	534	560
<b><i>Efficiency and Quality</i></b>					
Average number of screens per screener		426.0	276.2	133.5	140.0
Percent of identified individuals with abnormal results who received an appropriate intervention		95%	84%	87%	88%
<b><i>Impact (outcome)</i></b>					
Percent of abnormal results found in the individuals screened		36%	37%	35%	45%
Percent of abnormal results for colorectal screenings		18%	61%	53%	55%
Percent of abnormal results for breast and cervical cancer		13%	18%	12%	14%
Percent of abnormal results for blood pressure		39%	23%	0%	0%

**Performance Measures Explanations** –Through disease identification, prevention and education programs the County is working to reduce premature death related to chronic diseases such as cardiovascular disease and cancer. In the County heart disease is the largest cause of death and disability and cancer is the second. Data for FY 2007 is unavailable.

**Strategies to Accomplish the Objective –**

- **Strategy 2.2.1** – Provide educational and awareness opportunities
- **Strategy 2.2.2** - Identify and refer cases for disease management, confirmation, complication reduction and treatment