2011 Annual Report

Western Upper Peninsula Health Department

Serving Baraga, Gogebic, Houghton, Keweenaw and Ontonagon counties, Michigan
To the Residents of the Western U.P. and Our Partners in Public Health

We are proud to present this report on the work of the Western Upper Peninsula Health Department in 2011. The report provides residents with an overview of the accomplishments of our more than 60 employees and board members, as well as information on selected health indicators for the Western Upper Peninsula region.

Local health departments work continuously to ensure the health, safety and wellbeing of residents. We do this by making sure that our food is safe, our drinking water is clean and disease outbreaks are controlled. In the Western U.P., we also play a lead role in creating conditions that support healthy lifestyles through assessment, education and healthy communities programs. We are a complex public organization, supported not only by state and county funds, but more than ever, by fees and grants from federal programs and private foundations.

Among the brightest highlights in the past year, the health department achieved continued full accreditation through the Michigan Local Public Health Accreditation Program. Every discipline within our Environmental Health, Public Health and Healthy Communities divisions received high marks following the intensive on-site survey.

2011 was an unusual year for this health department, offering us both opportunities and major financial challenges. The contributions of employees and board members, and the enduring commitment of our overall organization to operate in the best traditions of public service, are evident in this report.

I hope this report will give you an understanding of the many ways we serve the residents of Baraga, Gogebic, Houghton, Keweenaw and Ontonagon counties. I encourage you to review it carefully and provide your feedback. Western U.P. Health Department appreciates your support, and looks forward to continually working to make our communities healthier.

Guy St. Germain, MPA
Health Officer/Executive Officer
Since 1900, life expectancy among Americans has increased by nearly 30 years, and most of this increase is attributable to advances in public health. Prevention and control of infectious disease through vaccination, surveillance, and clean food and water has substantially improved health. In the past decade, important progress has been made in the areas of tobacco control, motor vehicle safety, cancer and cardiovascular disease screening and prevention, maternal and infant health support, occupational safety, and infrastructure to address emergency preparedness.

Recently, a new public health threat has emerged – the obesity epidemic. More than one-third of U.S. adults and 17 percent of children are obese – not just overweight, but obese. Obesity rates doubled for adults and tripled for children from 1998 to 2008. Why is this of concern? We know that obesity is an important risk factor for chronic illnesses such as heart disease, diabetes and cancer, diseases that decrease both the quality and the length of life. In addition, it is estimated that in 2008, the medical costs related to obesity in U.S. adults topped $147 billion.

The reasons for the epidemic are myriad. One factor is an increasingly sedentary lifestyle. In many sprawling communities there are fewer sidewalks or areas for safe walking and biking. Technology has made physical activity a smaller part of the day. Calorie-dense (but nutritionally poor), ready-to-eat and drive-through foods abound, making the unhealthy choice the easy choice. Schools have less room in a curriculum-packed day for physical activity, while many offer high-calorie snack foods and drinks in vending machines, and more highly processed cafeteria foods.

The solution? There is no one-size-fits-all fix for the societal issues contributing to the obesity epidemic, but it is clear that the traditional public health approach of simply educating people about healthy eating and physical activity is not enough. Community-based interventions must be identified to help make healthy behaviors the easy choices for busy and often economically-challenged families. This is the new frontier for public health and it is where your local health department is going. Over the past several years, WUPHD has been actively seeking funding to affect policy and infrastructure change in the areas of healthy eating and physical activity. Through collaboration with partners such as schools, hospitals, non-profit agencies and local government, the health department is working on increasing access to healthy foods through projects such as community and school gardens and farmers markets; improving access to physical activity through community planning for bike lanes and paths, Complete Streets designs for all users, and trail development; and sparking a dialogue among community members about what makes a community healthier.

Local public health was born out of a need to protect citizens from health-related threats and it takes that responsibility seriously, whether by safeguarding clean water, providing sewage disposal, controlling the spread of infectious diseases, or, as this new era dictates, working with community partners on obesity and chronic disease prevention.

Terry Frankovich, M.D., M.P.H.
Medical Director
WUPHD Finances in 2011

The health department’s total revenues were $4,239,688 and the cost of operating its services was $4,208,999, producing an increase in fund balance. The increase was mainly due to prior year payments from the State’s Medicaid program which had been delayed since 2009. Operationally, 2011 saw two milestone events which had an impact on the year’s finances. One was the award of one-time grants from federal and state sources for infrastructure, and the other was the closure of home health and hospice services and the subsequent restructuring of the agency.

**GRANTS:** The health department was successful in capturing federal funds to help replace telephone systems, upgrade internet and core computer software and implement electronic medical record systems. The health department also received a state allocation to build a water testing lab in the Hancock office. In addition, that direct allocation by the legislature allowed the health department to fund a new water lab in Negaunee, and oversee public education done by all U.P. health departments.

**RESTRUCTURING:** Another significant event was the closure of the agency’s home health company. The health department operated a home health unit for more than 40 years. That service was the area’s sole provider at one time, and it continued to serve clients who might not otherwise find care until it closed. It was also an important income source, supporting many community health programs in our region. In the last eight years, however, the home health business model shifted in favor of hospitals and for-profit companies, and away from public providers. The health department sought to follow the market by partnering with a hospital system in 2008, but that relationship did nothing to stem the loss of business. In May 2011, the health department began the termination of home health services, and implemented workforce reductions throughout the summer to keep pace with the loss of work and revenue. Following the close of operations, the health department implemented an agency-wide restructuring, including reduced pay and benefits for staff, ending the year on sound financial footing. The loss of home health ended five decades of service to the community, and altered our traditions and culture. However, the health department is now structured to be a dynamic and efficient provider of community services with a clear focus on public health, better able to meet its mission of leading the community toward better health.
Focus on Our Residents’ Health Status

<table>
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<tr>
<th>Indicator</th>
<th>Western UP</th>
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<tbody>
<tr>
<td><strong>Access to Care Indicators</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Primary care provider rate&lt;sup&gt;1&lt;/sup&gt;</td>
<td>800:1</td>
<td>874:1</td>
</tr>
<tr>
<td>% of adults aged 18-64 years with no health care coverage&lt;sup&gt;2&lt;/sup&gt;</td>
<td>17.4</td>
<td>15.1</td>
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<table>
<thead>
<tr>
<th>Health Status Indicators</th>
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<tbody>
<tr>
<td>% of adults who are obese&lt;sup&gt;3&lt;/sup&gt;</td>
<td>24.1</td>
</tr>
<tr>
<td>% of high school students who are obese&lt;sup&gt;4&lt;/sup&gt;</td>
<td>15.0</td>
</tr>
<tr>
<td>Infant mortality (per 1000 births)&lt;sup&gt;5&lt;/sup&gt;</td>
<td>6.0</td>
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<table>
<thead>
<tr>
<th>Behaviors Affecting Health</th>
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<tbody>
<tr>
<td>% of children fully immunized&lt;sup&gt;6&lt;/sup&gt;</td>
<td>69.0</td>
</tr>
<tr>
<td>% of adults reporting sufficient physical activity level&lt;sup&gt;7&lt;/sup&gt;</td>
<td>57.6</td>
</tr>
<tr>
<td>% of adults reporting adequate consumption fruits/vegetables&lt;sup&gt;8&lt;/sup&gt;</td>
<td>24.1</td>
</tr>
<tr>
<td>% of adults who smoke&lt;sup&gt;9&lt;/sup&gt;</td>
<td>16.5</td>
</tr>
<tr>
<td>% of adults who drink heavily&lt;sup&gt;10&lt;/sup&gt;</td>
<td>8.0</td>
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Selected Communicable Disease Cases

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<thead>
<tr>
<th>Reportable Condition</th>
<th>2010</th>
<th>2011</th>
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<tbody>
<tr>
<td>Food-borne illnesses</td>
<td>20</td>
<td>18</td>
</tr>
<tr>
<td>Flu-like disease</td>
<td>723</td>
<td>289</td>
</tr>
<tr>
<td>Varicella (Chickenpox)</td>
<td>21</td>
<td>18</td>
</tr>
<tr>
<td>Pertussis (Whooping Cough)</td>
<td>106</td>
<td>13</td>
</tr>
<tr>
<td>Chlamydia</td>
<td>92</td>
<td>93</td>
</tr>
<tr>
<td>Hepatitis C (Acute and Chronic)</td>
<td>29</td>
<td>49</td>
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Health Data Definitions and Sources

1. Primary care physicians include practicing physicians specializing in general practice medicine, family medicine, internal medicine, pediatrics, and obstetrics/gynecology. Rate is population per one provider. From the Health Resources and Services Administration’s Area Resource File and US Census Bureau, 2008 data.
2. Coverage includes health insurance, prepaid plans such as HMOs, or government plans, such as Medicare. Michigan Behavioral Risk Factor Survey, 2008-2010 combined.
3. The proportion of adults whose body mass index (BMI) was greater than or equal to 30.0. Michigan Behavioral Risk Factor Survey, 2008-2010 combined.
4. At or above the 95th percentile for BMI by age and gender. Estimates from the 2009-2010 MiPHY survey, combined 9th and 11th grade responses.
5. Deaths occurring to individuals less than 1 year of age. Calculated as number of resident infant deaths divided by total resident live births × 1,000. Rates shown are 2005-2009 averages from Michigan Resident Birth and Death Files.
6. Percent of toddlers ages 19-35 months who have received all recommended immunizations. December 2011 snapshots from Michigan Care Improvement Registry.
7. The percent of adults sampled who reported that they usually do moderate physical activities for a total of at least 30 minutes on 5 or more days per week or vigorous physical activities for a total of at least 20 minutes on 3 or more days per week while not at work. Michigan Behavioral Risk Factor Survey, 2007-2009 combined.
8. The percent of adults sampled whose total reported consumption of fruits (including juice) and vegetables was at least 5 times per day. Michigan Behavioral Risk Factor Survey, 2007-2009 combined.
9. The percent of adults who reported that they had ever smoked at least 100 cigarettes in their life and that they smoke cigarettes now, either every day or on some days. Michigan Behavioral Risk Factor Survey, 2008-2010 combined.
10. The percent of adults who reported consuming on average more than 2 alcoholic beverages per day for men or more than 1 alcoholic beverage per day for women. Michigan Behavioral Risk Factor Survey, 2008-2010 combined.
Public Health Division

Public health programs protect the general public from the spread of communicable and vaccine preventable diseases, reduce the risk of chronic diseases by addressing behaviors like tobacco use, and provide much-needed prevention and screening programs to special populations including pregnant women, children, and seniors.

2011 at a Glance

Maternal Infant Health Program
WUPHD provides nursing, nutrition and social work services to high-risk pregnant women and infants, with a goal of preventing infant health problems. Public health professionals provided families with 1,141 home and office visits in 2011.

Women, Infants and Children Nutrition Program (WIC)
WIC improves the health of low- to moderate-income women, infants and young children by providing nutritious food, nutrition education, screening and referral to health care services. In 2011, 1,587 people were served.

Fluoride Varnish Program
176 young children received free fluoride varnish at health department clinics in 2011 to help prevent tooth decay.

Children’s Special Health Care Services
CSHCS helps families with a child who has a chronic medical condition by paying for specialty care, medical equipment, and travel and lodging for medical appointments. 154 children were served in 2011.

Hearing and Vision Screening
A trained technician screens children at area preschools and schools, to identify hearing and vision problems that can affect learning. During the 2010-11 school year, 2,350 children were screened for hearing problems, resulting in 150 referrals for follow-up testing, while 4,361 children were screened for vision problems, with 873 referrals made.
**Family Planning**
The health department provides low-cost reproductive health services on a sliding fee scale basis, provided by a mid-level practitioner and RNs. Services include physical exams and contraception dispensing. 891 people were served in 2011.

**Breast and Cervical Cancer Control Program (BCCCP)**
Public health funding helps women access cancer screenings and other diagnostic and treatment services from providers across the region. 367 women were enrolled in the program in 2011.

**Immunization**
In 2011, public health nurses administered almost 6,000 vaccinations to protect children and adults from diseases including influenza, polio, measles, mumps, rubella, tetanus, chicken pox and pertussis.

**Travel Vaccination Clinic**
RNs evaluated vaccination requirements for more than 100 international travelers, and vaccinated 43 people for yellow fever.

**Prevention Programs**
Health educators provide programs on alcohol, tobacco and drug prevention to school groups and other at-risk populations. In 2011, health department staff presented more than 600 hours of prevention programming to thousands of area youth.

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**WIC Peer Counselor Program**
Breast feeding is a great way to give an infant a healthy start, and thanks to a new local public health program, moms and babies can get extra help when they need it.

With funding from the Michigan Department of Community Health’s Women, Infants and Children Nutrition Program, WUPHD provides education, problem-solving and support to breastfeeding moms who have questions or concerns. The program operates in all five counties.
Community Health Division

Community health programs aim to reduce long-term chronic disease prevalence by supporting healthy behaviors like daily physical activity and good nutrition, while reducing rates of tobacco use and obesity. Policy and environmental initiatives, along with targeted, research-based education programs, have proven to help people form habits that can lead to better health and well-being.

WUPHD provided leadership, training and technical assistance in the development of Complete Streets ordinances in Houghton and Ironwood and is working with several cities on plans for pedestrian and cycling networks to be integrated with municipal master plans. WUPHD helped launch seven school and community gardens in the last three years, and purchased equipment for a new farmers market in Lake Linden. In 2011, WUPHD administered Senior Fresh, a program that provides coupons to older adults for produce purchases, and reimbursement to local farmers.

Public Health Emergency Preparedness

The health department, in partnership with local hospitals, county emergency managers, law enforcement agencies, first responders, volunteer organizations, regional, state and federal agencies, conducts planning and drills to enhance readiness to respond in the event of any natural or manmade disaster or disease outbreak that threatens public health. WUPHD preparedness activities in 2011 included:

- Conducted mass vaccination clinics in collaboration with local hospitals, tribal health departments, and schools of nursing
- Participated in county, hospital, and university emergency exercises and drills
- Developed plans and improved systems for emergency pharmaceutical distribution
- Improved communication infrastructure for electronic health records and call center operations
- Developed global information system (GIS) mapping capabilities
- The emergency preparedness coordinator (EPC) served on two national workgroups for emergency response policy

Community Health Division 2010-11 Program Highlights

Complete Streets ordinances enacted in Houghton and Ironwood.

Safe Routes to School planning in Bessemer, L’Anse, Houghton, Dollar Bay and Lake Linden.

Bike and pedestrian infrastructure projects in Houghton and Portage Township.

New community gardens in Hancock and Copper City, and school gardens in Hancock, Calumet, L’Anse and Baraga.

A new farmers market opened in partnership with Lake Linden Village.

Nutrition education at 26 preschool classrooms and 6 summer programs, using garden-to-table lessons to encourage more than 600 children and 400 parents to eat more fresh vegetables.
**Complete Streets**

In 2010 and 2011, WUPHD worked with communities to enact policies to improve conditions for pedestrians and cyclists. Houghton enacted Complete Streets in December 2010, and Ironwood followed suit in October 2011. Complete Streets policies call for planning for the needs of all road users, including pedestrians, cyclists and transit users of all ages and abilities, in designs for new streets or renovation projects. Houghton became the sixth Michigan city, and the first in the Upper Peninsula, to pass an ordinance, and Ironwood was among the first dozen. Michigan leads the nation with 15 local Complete Streets ordinances, and more than 50 additional resolutions of support. As a result of Houghton’s efforts on Complete Streets and bike route planning, it was recently named a “Bike Friendly Community” by the League of American Bicyclists.

**Safe Routes to School**

National childhood obesity rates have quadrupled in the last 30 years. Over that period, the percentage of children who walk or bike to school fell from greater than 50 percent to less than 10 percent, due to many factors, including the loss of neighborhood schools as schools are consolidated into larger buildings that are farther from home.

Still, we know that more children could walk or bike to school if roads and intersections were made safer for pedestrians and cyclists. The health department has teamed with schools in Bessemer, Calumet, Dollar Bay, Houghton, Lake Linden and L’Anse to make their communities safer for walking and biking to school, and to encourage kids to give it a try.

Safe Routes school teams, composed of teachers, students, parents and community representatives, walk and bike on nearby routes and recommend improvements to local transportation planners.
Environmental Health Division

Environmental Health works to control physical conditions that could endanger health, by enforcing codes and ordinances, and by monitoring, inspection, educational outreach and consultation with residents.

Core EH programs include licensing and inspection of food service establishments, evaluating and permitting private water and sewage systems, and inspecting public campgrounds, pools and septage contractors. In addition, WUPHD protects the public and environment through child care and foster care inspections, mercury spill investigation and cleanup, radon testing and consultation, tattoo and body art establishment regulation, and hazard complaint investigation.

Special Water Quality Programs

With the closure of the State water testing laboratory in Houghton, WUPHD established an in-house surface water testing lab in the Hancock office to allow technicians to conduct bathing beach water quality testing. The new lab was also used for WUPHD’s EPA Great Lakes restoration Initiative project. Surveys of conditions were conducted at several at-risk beaches, and daily water samples were collected and tested following heavy rains.

WUPHD also teamed with other Upper Peninsula health departments to run the SafeUPwater.com media campaign to publicize on-line resources with information about local groundwater quality issues and concerns.

Environmental Health Division

By the Numbers

In 2011, EH sanitarians conducted 655 inspections at 420 licensed food establishments. About 3,500 restaurant inspections occurred in the last five years.

57 people attended Certified Food Manager Training in 2011, bringing the five-year total to well over 400.

215 sewage site evaluations were conducted in 2011 (about 1,300 over the last five years.) Of these, 206 sites (96%) met code requirements, 173 permits were issued, and 187 final inspections were performed.

124 permits were issued for private wells and Type III water supplies in 2011. 114 final inspections of newly completed wells were conducted. The number of well installations was down in 2011 due to a slowdown in construction.
RSVP and Electronics Recycling

The Western Upper Peninsula Retired and Senior Volunteer Program (RSVP) is one of 23 RSVP projects across Michigan. In RSVP, adults age 55 and older use their skills, talents and life experience in service to their communities. Since 2001, volunteers have provided more than 125,000 hours of service across the Western Upper Peninsula.

Environmentally Friendly

The RSVP Electronics Recycling Program provides residents and small businesses with an environmentally friendly and cost-effective way to dispose of obsolete electronic devices. Since 2005, RSVP has held 25 electronics recycling collections, providing an opportunity for more than 2,300 households and small businesses to recycle their electronic waste. To date, more than 150 tons of e-waste have been recycled as a result of RSVP volunteer efforts.

Beach Monitoring

During the summer of 2011, bathing beach water quality was monitored weekly at 17 public beaches – 11 on Lake Superior and six on inland lakes – for seven weeks. Test results were posted, with a link at the health department web site, for the public to see.

Temporary Food Permits

Food vendors who operate for short periods at fundraisers, festivals and other community events, could unwittingly become a source of hazardous food for large numbers of people. The health department works hard to educate these vendors on safe food handling, and issues temporary food licenses under the state food code. Last year, 223 temporary food licenses were issued.

Smoke-free Restaurants

Since passage of Michigan’s Clean Indoor Air Act on May 1, 2010, Environmental Health has taken the lead to ensure that restaurants and bars follow the law to protect workers and the public from the known hazard of second-hand smoke. With the Michigan Attorney General, WUPHD represented the public health community by successfully defending the state law from its first challenge.
Western Upper Peninsula
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