To the Residents of the Western U.P. and Our Partners in Public Health

We are proud to present this report summarizing the accomplishments of your health department in 2013. As a public trust, we want everything we do to be open and understood by our communities. The report also provides data on health indicators for our region.

More than 60 employees and board members work tirelessly to ensure the health, safety and wellbeing of every resident and visitor to our region. We do this by making sure that our food is safe, our drinking water is clean, and disease outbreaks are controlled. We also play a lead role in creating conditions that support healthy lifestyles through education and planning for healthy communities.

Among the highlights in 2013, the health department completed a comprehensive health assessment of our five-county region. The award-winning research project was a collaborative effort in partnership with area hospitals and public behavioral health agencies. The project produced scientifically validated data that will help the health department and other providers with planning to improve the health of our community. See pages 4-5 to learn more.

This report also contains information about our services and finances. You will find statistics about the number of people served by our programs in 2013, about our agency’s innovations in program development, and about our financial stability. Look for features spotlighting a new approach to food safety, new health education programs in area schools, a one-of-a-kind HPV (human papilloma virus) prevention project which achieved stellar results, and more.

2013 was a year of high profile achievements in public health practice and collaboration, demonstrating the unflagging commitment of the board and employees to operate in the best traditions of public service and good government in action.

I encourage you to read this report carefully and provide your feedback. Western U.P. Health Department looks forward to continuing to lead our community toward better health.

Guy St. Germain
Health Officer/Executive Officer
From the Medical Director

2013 was a momentous year for local public health in the Western Upper Peninsula with the publishing of the 2012 Regional Health Assessment, culmination of a year-long effort to better understand and quantify the current health status and future health needs of Western U.P. residents. The most exciting aspect of the assessment was a large local health and behavioral risk factor survey. The survey results tell us how people rate their physical and mental health, whether they receive regular health care and recommended health screenings, and about behaviors that are risk or protective factors for disease.

Vital statistics can tell us how many people are born in a given year and a population’s leading causes of death, but they say little about health through the lifespan. Furthermore, state and national data registries are capable of telling us what happened, but not very good at explaining why it happened. Local survey data helps fill in the missing pieces. We found striking statistical associations between social determinants – low household incomes and low educational attainment – and poor health. The disparities in health status, behaviors and access to services between socio-economic strata were far more pronounced that differences between geographic areas.

The association of chronic disease and poorer health status with lower income and educational attainment is not surprising. Much of our health status is determined by how we live our lives, the choices we make and the environments in which we live. This is why the health department partners with healthcare providers, schools and communities to create and support health education programs; healthy school environments; quality, affordable health services; access to immunizations; safe places to live and to be active; access to healthy, affordable foods; clean air and water; and adequate housing.

Terry Frankovich, M.D., M.P.H.

**Selected Health Indicators, 2012 Survey of Western U.P. Adults, Age 18+**

<table>
<thead>
<tr>
<th>Percentages by Household Income</th>
<th>$0-24,999</th>
<th>$25-49,999</th>
<th>$50,000+</th>
</tr>
</thead>
<tbody>
<tr>
<td>Said their general health was only “Fair or Poor”</td>
<td>27.1 %</td>
<td>17.2 %</td>
<td>11.6 %</td>
</tr>
<tr>
<td>No health care coverage (age 18-64 only)</td>
<td>31.5 %</td>
<td>21.8 %</td>
<td>4.0 %</td>
</tr>
<tr>
<td>Did not seek health care in previous year when needed due to cost</td>
<td>32.6 %</td>
<td>22.9 %</td>
<td>6.4 %</td>
</tr>
<tr>
<td>No leisure-time physical activity or exercise in past month</td>
<td>22.6 %</td>
<td>12.0 %</td>
<td>5.5 %</td>
</tr>
<tr>
<td>Current smoker</td>
<td>36.1 %</td>
<td>17.6 %</td>
<td>12.8 %</td>
</tr>
<tr>
<td>Ever told by a health professional they have diabetes</td>
<td>12.2 %</td>
<td>9.6 %</td>
<td>5.7 %</td>
</tr>
<tr>
<td>Ever told by a health professional they have depression</td>
<td>27.7 %</td>
<td>22.9 %</td>
<td>16.6 %</td>
</tr>
<tr>
<td>No dental visit in past year</td>
<td>59.7 %</td>
<td>30.2 %</td>
<td>29.1 %</td>
</tr>
</tbody>
</table>
2012 Regional Health Assessment Reports Available On-line

In April 2013, WUPHD released the findings of the 2012 Western Upper Peninsula Regional Health Assessment to partners, health professionals and the general public, in two documents available for download the health department web site, www.wuphd.org.

The full report (pictured below), 262 pages of survey findings, data tables, graphs and in-depth analysis, was prepared for use by health providers and planners, but can be accessed for free by the public.

Community Health Assessment

Community health assessment is a core function of public health, the starting point for effective planning. In 2013, Western U.P. Health Department completed a health needs assessment project of unprecedented scope and detail for a small local health department, in partnership with the region's five hospital health systems, two community mental health agencies and regional substance abuse services coordinating agency (see sidebar, page 2, for details on the partnership and statewide recognition for the assessment project.)

The purpose of the project was to document the health status and needs of the Western Upper Peninsula’s 71,000 residents. Data for the assessment report were gathered from a wide array of published sources, from a locally conducted survey of more than 2,500 adults, and from local health care providers.

The Local Health Survey

The local health survey was the most ambitious element of the assessment project. In national and state health surveys, too few residents of rural counties are sampled to make county-level estimates. By analyzing the survey responses of more than 2,500 Western U.P. residents, WUPHD produced the most accurate and complete health data ever generated for this region, covering 70 critical measures of health.

Three broad themes emerged from the data:

The Impact of an Aging Population
Aging is a major risk factor for chronic disease. The Western U.P. has a greater proportion of elderly residents than the state and nation.

The Effect of Income and Education on Health
Disparities in health status and access to care between socio-economic groups, i.e. by income and educational level, were more pronounced than differences between residents of different counties (see From the Medical Director, page 3).

The Importance of Prevention: Chronic diseases such as heart disease, cancer and diabetes are the leading causes of death in the region, as they are in much of the world. The most common root causes of preventable death – tobacco use and obesity – are risk factors for about one-quarter and one-third, respectively, of the region’s adults.
Findings of the Regional Health Assessment

The assessment documented literally thousands of statistics that, taken together, paint a picture of the health needs of the 71,000 residents of the five Western U.P. counties. Below, we present a very brief sampling of chronic disease rates and the demographic and lifestyle characteristics that influence them, followed by a comparison of selected communicable disease statistics for calendar years 2010-2013.

**Chronic Disease Risk Factors**
Poor diet, lack of exercise and tobacco use are risk factors for heart disease, cancer, diabetes and other leading causes of disease, disability and death. Below are findings from the survey of Western U.P. adults.

**Healthy Eating**

Just 11.5 percent of Western U.P. adults say they eat the recommended five or more fruit and vegetable servings per day.

**Physical Activity**
Western U.P. adults from low-income households are less likely to get adequate daily physical activity.

**Tobacco**
Cigarette use is lowest among Western U.P. adults with university degrees.

**Percent of Residents Age 65 and Older: U.S. Census 2010**
With an aging population, the Western U.P. faces an increasing burden of chronic disease.

**Western U.P. Diabetes Prevalence By Income**
Age adjusted death rates for diabetes are higher in Houghton and Keweenaw counties than statewide. About 10% of the region’s adults currently suffer from diabetes.

**Selected Communicable Disease Cases (Jan. 1 to Dec. 31)**

<table>
<thead>
<tr>
<th>Reportable Condition</th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
<th>2013</th>
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</thead>
<tbody>
<tr>
<td>Food-borne illnesses</td>
<td>20</td>
<td>18</td>
<td>36</td>
<td>20</td>
</tr>
<tr>
<td>Flu-like disease</td>
<td>1,809</td>
<td>2,096</td>
<td>2,187</td>
<td>748</td>
</tr>
<tr>
<td>Varicella (chickenpox)</td>
<td>21</td>
<td>18</td>
<td>41</td>
<td>1</td>
</tr>
<tr>
<td>Pertussis (whooping cough)</td>
<td>106</td>
<td>13</td>
<td>26</td>
<td>0</td>
</tr>
<tr>
<td>Chlamydia</td>
<td>92</td>
<td>93</td>
<td>89</td>
<td>97</td>
</tr>
<tr>
<td>Hepatitis C</td>
<td>29</td>
<td>49</td>
<td>62</td>
<td>49</td>
</tr>
<tr>
<td>Tuberculosis</td>
<td>2</td>
<td>0</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>HIV</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>
HPV Outreach Program

In 2013, Western U.P. Health Department implemented a new community program aimed at preventing cancer with a simple three-shot vaccine series, with funds from the Michigan Cancer Consortium. The Gardisil HPV vaccine protects males and females age 11-26 from most strains of Human Papilloma Virus. HPV causes 12,000 cases of cervical cancer and 4,000 deaths a year among women in the United States, and also 7,000 annual cases of head, neck and penile cancers.

The health department provided information to the target population at schools and universities and through an innovative social media campaign. In addition, public health nurses conducted provider education at lunch and learn events at hospitals and physician offices. The program has proven to be very effective – HPV doses given by WUPHD and 17 other community clinics increased by 75 percent in one year, from 1,206 doses in 2012 to 2,106 in 2013.

Public Health Division

Public health programs protect the public from communicable and vaccine preventable diseases, and provide prevention and screening programs to special populations including pregnant women, children, and seniors.

2013 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 972 home and office visits in 2013, a 5 percent increase from 2012.

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, and screening and referral to health care services. In 2013, monthly enrollment averaged well over 1,600 clients.

Fluoride Varnish Program
232 young children received free fluoride varnish at health department clinics in 2013 to help prevent tooth decay, a 70 percent increase from 2012.

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. 190 children were served in 2013, a 34 percent increase from 2012.

Hearing and Vision Screening
A trained technician screens children at area preschools and schools, to identify hearing and vision problems that can affect learning. Last year, 2,617 children were screened for hearing problems, resulting in 102 referrals for follow-up testing, while 4,607 children were screened for vision problems, with 736 referrals, a 13 percent increase in the total number of screenings conducted.
**Family Planning**
The health department provides low-cost reproductive health services on a sliding fee scale basis, provided by nurse practitioners and RNs. Services include physical exams and contraception dispensing. 675 people were served in 2013.

**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. 329 women were enrolled in the program in 2013.

**Immunization**
In 2013, public health nurses administered more than 6,631 vaccinations to protect children and adults from diseases including influenza, polio, measles, mumps, rubella, tetanus, chicken pox and pertussis, a 25 percent increase from 2012.

**International Travel Vaccination Program**
WUPHD helps international travelers review their immunization status and determine what vaccinations or medications they will need, and provides hepatitis A and B, Japanese encephalitis, polio, rabies, typhoid, and yellow fever vaccines, as well as malaria prophylaxis medications. In 2013, 192 travelers were served, with 135 typhoid and 56 yellow fever shots provided.

**Senior Screening**
Health department nurses and health educators provide free health screenings to Western U.P. residents age 60 and older, regardless of income. 106 seniors were screened in 2013.

**Prevention Programs**
Health educators provide programs on alcohol, tobacco and drug prevention to school groups and other at-risk populations, as well as tobacco cessation group classes. In 2013, health department staff presented close to 500 hours of prevention programming, using evidence-based curricula, to youth in 21 schools across the five-county region.

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**Ontonagon County Ranks First on 2013 Michigan Vaccination Report Card**

Michigan Department of Community Health analyzes data from MCIR (the Michigan Care Improvement Registry, a statewide immunization data base) on childhood, adolescent and adult immunization rates, and ranks counties from 1-84 (for Michigan’s 83 counties plus Detroit.)

The measure for infant-toddler vaccination is the percentage of children age 19-35 months who have completed every dose of the recommended “43133142” series (4 DTap, 3 Polio, 1 MMR, 3 Hib, 3 HepB, 1 Varicella, 4 PCV, 2 HepA). The Western U.P. completion rate was 57.6 percent, compared with 50.2 percent statewide, at the end of 2013.

Ontonagon County ranked first in Michigan at 71.4 percent for the rigorous standard. Among other local counties, Baraga ranked 27th, Gogebic 19th, Houghton 29th, and Keweenaw 37th.

Childhood immunizations protect our youngest residents from 12 preventable diseases. MCIR data include nearly every child in Michigan and all vaccine doses administered by public health nurses and private providers.
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. 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, radon testing and education, tattoo and body art establishment regulation, and hazard complaint investigation.

Food Protection Program and New Food Laws
WUPHD adopted a risk-based inspection frequency and protocol in 2013 based on the FDA Food Code and Michigan’s new food law. The changes focus education, outreach and regulatory efforts on the activities associated with preparing and serving foods more likely to cause foodborne illness. Although the number of annual inspections at low-hazard food facilities was reduced, the total number of inspections at all food facilities increased by 17 percent, follow-up inspections doubled, and education and outreach were expanded.

Certified Food Manager Training
The Michigan Food Code requires all full-service food establishments to have a manager trained and certified in safe food-handling practices. To assist area facilities, the health department provides courses that train operators in all aspects of food safety. At the end of the two-day class, participants take an exam that fulfills the national certification standard. The health department held four certified food manager classes in 2013, with 84 individuals completing the two-day course, a more than 50 percent increase from 2012, helping to ensure that restaurant managers in the region have up-to-date food preparation knowledge.

Environmental Health Division By the Numbers

In 2013, EH sanitarians conducted 632 inspections at 408 licensed food establishments, an increase from 539 in 2012. An additional 355 inspections were conducted for temporary licenses, mobile vendors, and reinspections.

278 sewage site evaluations were completed in 2013, the second-highest total since 2008.

118 site evaluations were conducted for new private wells, and 143 well permits were issued, an slight increase from 2012.

Sanitarians conducted 131 complaint investigations in 2012 and 104 more in 2013. Complaint investigations run from concerns about restaurant cleanliness to reports of sewage system leaks and other sanitation and safety concerns.
**Temporary Food Permits**
In addition to conducting regular inspections at more than 400 restaurants and other food establishments, the health department also issues many 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, 178 temporary food licenses were issued.

**Beach Monitoring**
During the summer of 2013, water quality was monitored for *E. coli* bacteria weekly at 18 public beaches – 12 on Lake Superior and six on inland lakes. The public was able to view test results on line, through a link at the health department web site.

**Great Lakes Restoration Initiative**
In addition to its routine beach monitoring program, the health department completed a more intensive three-year investigation of the factors that contribute to occasional bacterial contamination of bathing beaches. Funded by a grant from the federal Environmental Protection Agency’s Great Lakes Restoration Initiative, the health department studied those beaches that historically have experienced elevated levels of *E. coli* bacteria leading to beach closures, especially following periods of heavy rain. Targeted monitoring of *E coli* levels and meteorological and hydrological sensors will lead to better understanding of when to test or preemptively close beaches to protect public health and safety.

**Public Health**
**Emergency Preparedness**
The health department, in conjunction with local, regional, state, and federal partners, conducts research, planning, and exercises to ensure local readiness to respond in the event of any natural or manmade disaster or disease outbreak that threatens public health.

In 2013, WUPHD certified all employees in the Incident Command System; helped colleges, prisons and other institutions develop procedures for dispensing antibiotics in an emergency; and partnered with hospitals, schools of nursing, high schools, colleges and Iron County, Wisconsin to organize community influenza clinics.

Local health departments are responsible for investigating threats to public health and the environment. WUPHD assists health departments and communities across the Upper Peninsula to investigate mercury spills, using its Lumex mercury vapor analyzer. Our trained personnel are capable of detecting and measuring the concentration of mercury in order to guide decisions about public safety and the need for cleanup. In July 2013, WUPHD assisted health officials in the eastern Upper Peninsula with the investigation of a mercury spill in a large, multi-use building.
Community Health Programs

Community health programs promote healthy lifestyles through policy and systems changes that support healthy behaviors like daily physical activity and good nutrition, while reducing tobacco use and obesity.

School-based Programs, Policies and Planning
The health department expanded the federally funded CATCH-UP project to seven elementary schools in 2013 in addition to nine summer and after-school sites already served, providing health curriculum, teacher training and equipment, and helping organize School Health and Wellness Committees composed of educators, students, parents and community members focused on creating healthier school environments. Schools across the region strengthened tobacco policies to include products like e-cigarettes, developed Safe Routes to School plans, planted gardens, and provided more nutritious meals that support healthy habits in children.

Nutrition Programs
In 2013, health educators encouraged consumption of healthy fruits and vegetables using the Eat Well, Play Hard Curriculum in 13 preschool classrooms and at events where children and parents learned to cook together. The health department also played a lead role in the Western U.P. Food Hub, which works to strengthen local food systems, linking local producers and consumers.

Active Transportation Planning
Active transportation planning makes walking and biking safer and more convenient for daily errands and commuting. The health department participates in several committees and coalitions aimed at improving active transportation policy and infrastructure, including the Houghton Bike and Pedestrian Committee, which completed a non-motorized transportation plan approved by the city council in 2013. Houghton was upgraded from Bronze to Silver status in national bike-friendly rankings, and three Western U.P. towns ranked among the top 10 in bike commuters per capita in the National Bike Challenge.

Volunteering and Senior Health
Research demonstrates that volunteering can help prevent many of the health problems associated with aging. The Western Upper Peninsula Retired & Senior Volunteer Program (RSVP) invites adults age 55 and over to use their skills, talents, and life experience to make a difference in communities through volunteer service.

During 2013, 90 RSVP Volunteers provided more than 12,100 hours of service to 18 programs and organizations in Baraga, Houghton and Keweenaw counties. Since 2001, RSVP Volunteers have provided more than 145,000 hours of service across the Western Upper Peninsula.

What a difference a volunteer makes!

RSVP
### Income Statement

**Year Ended Sept. 30, 2013**

#### Revenues and Financing Sources

<table>
<thead>
<tr>
<th>Source</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>MDCH &amp; MDEQ Grants &amp; Contracts (State)</td>
<td>$386,626</td>
</tr>
<tr>
<td>Essential Public Health Funding (State)</td>
<td>$1,181,780</td>
</tr>
<tr>
<td>County Funding</td>
<td>$525,769</td>
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<tr>
<td>Fees for Services</td>
<td>$1,573,282</td>
</tr>
<tr>
<td>Federal, Regional &amp; Private Grants</td>
<td>$288,508</td>
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</table>

**TOTAL REVENUE** $3,955,965

#### Expenditures and Financing Uses

<table>
<thead>
<tr>
<th>Category</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Salaries</td>
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<tr>
<td>Fringes</td>
<td>$869,603</td>
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<tr>
<td>Travel</td>
<td>$121,947</td>
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<tr>
<td>Supplies &amp; Capital Outlay</td>
<td>$484,941</td>
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<tr>
<td>Contracted Services</td>
<td>$111,716</td>
</tr>
<tr>
<td>Repairs, Utilities, Communications &amp; Other</td>
<td>$237,748</td>
</tr>
<tr>
<td>Increase in Fund Balance</td>
<td>$209,326</td>
</tr>
</tbody>
</table>

**TOTAL EXPENDITURES AND INCREASE IN FUND BALANCE** $3,955,965

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### Notes on Finances in 2013

The health department’s Fiscal Year 2013 total revenue was $3,955,965 and the cost of operation was $3,746,639, producing a year-end surplus of $209,326. The health department experienced relatively major funding movements during 2013 which came to benefit the department’s programs and fiscal foundation. Fee income increased as a result of a one-time cash distribution from the liquidation of the department’s former home health subsidiary, as well as from increased environmental health service activity.

The health department also captured new grant revenue during the year, coming from the *meaningful use* of electronic records under the Affordable Care Act, emergency preparedness expansion, and a Michigan Cancer Consortium award to launch a region-wide initiative to increase HPV (human papilloma virus) immunization rates. Funding from the five counties of the health department jurisdiction also increased.

The year’s expanded revenue allowed the health department to accomplish capital building projects in two facilities, and fast track the implementation of a complex electronic medical record system, along with providing unique community services like the regional health assessment and HPV outreach projects.

Public health in Michigan has changed over the years, and the finances of WUPHD attest to that. The funding of local health departments was set out in state law to consist of 50 percent state transfers. After declining for more than a decade, state funding now pays just 30 percent of the cost of our operation. This health department has moved beyond a reliance on state and county funds in order to diversify the revenue stream and pay for new services the community needs. In 2013, almost $2 million of the $3.7 million budget (53 percent) was obtained from sources beyond mandated state and local government funding.
Western Upper Peninsula Board of Health

Baraga County
Patrick Reilley
William C. Rolof

Gogebic County
Joseph Bonovetz
Thomas Gerovac

Houghton County
Scott Ala, Chairman
Dr. Anton Pintar, Secretary
Tom Tikkanen, Vice Chair

Keweenaw County
Del Rajala
Frank Stubenrauch

Ontonagon County
Dale Parent
John Pelkola

It is the mission of the Western U.P. Health Department to lead the community toward better health through education, advocacy and disease prevention.

Western U.P. Health Department and its community health care partners received two statewide public health awards in October 2013 in recognition for their collaboration on a landmark community health assessment project (details pp 2-6.)

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