



STARK COUNTY HEALTH DEPARTMENT



MISSION: "Our mission is to assess, protect, promote, and improve the health of Stark County through leadership, quality service, and community partnerships."

VISION STATEMENT: "Public Health EXCELLENCE"

2015 Annual Report

Health Report Commissioner's



Kirkland K. Norris
Health Commissioner

This has been a most significant year in regards to solidarity within our Combined General Health District. Partnerships and collaborations are of vital need in promoting health within a community.

I am extremely overcome by the commitment and exemplary dedication of Stark County's health departments, hospitals, social service agencies, and private health practitioners to improve the state of public health within the county. This cooperation and willingness is not common and is not something you find in many other communities.

These partnerships and collaborations have identified significant social disparities and health inequities that are impacting socioeconomic groups within our communities. Together we are combating these factors that influence health by building public health policies, programs, and services to promote health equity and significantly decrease harmful outcomes.

When you add the continued support of the townships, cities, and villages into this public health partnership, there is truly a light at the end of the tunnel in accomplishing our overall goal of Public Health Excellence. The health of our community is our number one priority and we are committed to providing excellent public health services to the residents of Stark County.

I want to thank all of you, for if it wasn't for the townships, cities, and villages support and dedication we would not be able to assure a healthier and safer community.

With that being said, it is with great pride and privilege that I present to you the Stark County Combined General Health District 2015 Annual Report.

Respectfully Submitted,
Kirkland K. Norris, Health Commissioner



THE ROAD TO PUBLIC HEALTH ACCREDITATION

“One Department, One Destination - Accreditation”

The Stark County Health Department has continued to work hard toward achieving public health accreditation. Here are the steps in the accreditation process and the progress to date:

1. **Pre-application:** applicant prepares and assesses readiness and informs Public Health Accreditation Board (PHAB) of its intent to apply.
COMPLETED
2. **Application:** applicant submits application and prerequisites and receives PHAB training.
COMPLETED
3. **Document Selection and Submission:** applicant gathers documentation and submits it through the e-PHAB information system.
IN-PROGRESS, WILL BE COMPLETED BY MAY 26, 2016
4. **Site Visit:** site visitors review documentation, conduct a site visit, and develop a site visit report. **THIS WILL OCCUR APPROXIMATELY 3 MONTHS AFTER SUBMISSION OF DOCUMENTS – ANYWHERE FROM JUNE TO AUGUST 2016**
5. **Accreditation Decision:** PHAB Accreditation Committee determines accreditation status: accredited for five years or placed on an action plan. An action plan may be required before a final decision is made.
APPROXIMATELY DECEMBER 2016
6. **Reports:** accredited health departments submit annual reports
7. **Reaccreditation:** every five years.

Some examples of Improvement Initiatives the Department has completed or will be working on for Accreditation include:

- Improving communications with our townships, cities, and villages;
- Incorporating an Electronic Medical Records system to gather better data for evaluation and performance management;
- Incorporating Essential Public Health Services and PHAB Domains into all job descriptions and annual employee evaluations;
- Coordinating with local hospitals for the Community Health Assessment;
- Engaging all Health Department Service Areas in all Quality Improvement Projects; and
- Expanding opportunities for community and partner involvement in Community Health Assessment and Community Health Improvement Plans.

The goal of accreditation is to improve and protect the health of the public by advancing the quality and performance of public health departments. Accreditation standards define the expectations for all public health departments. For more information about PHAB and the accreditation process please visit, www.phaboard.org.



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Service Directors



Kay Conley
Administration
& Support Services Director



Paul DePasquale
Environmental Health
Services Director



Sherry Smith, RN
Nursing Services Director



Maureen Ahmann, DO
Medical Director

CREATING HEALTHY COMMUNITIES IN STARK COUNTY: A YEAR IN REVIEW



In January 2015, the Stark County Health Department, Stark Parks and JRC/ StarkFresh embarked on a journey to address healthy eating, active living and tobacco free lifestyles in Northeast Canton, Southeast Canton and Massillon, through a grant from the Ohio Department of Health. These areas were selected due to data that indicated the highest needs and limited resources. The project proved to be very successful, in part due to the full-time Coordinator who oversees the project, and other key partners and volunteers. Strategies were selected to address policy, system and environmental changes at the community, school, and worksite level to begin to institute a “culture of health” in the selected communities.

MAJOR ACCOMPLISHMENTS IN 2015, INCLUDED:

- Installation of 13 bike racks in Massillon
- Adoption of 4 tobacco free public spaces in Massillon
(Garden Locations: AME Church, Boys & Girls Club, Rivertree Church and Franklin Park)
- Adoption of 2 tobacco free worksite policies in NE Canton
(Mercy Medical Center @ St. Paul's Square and JRC)
- Created 4 safe Walking Routes/Clubs in NE Canton
- Coordinated an afterschool soccer club/clinic in NE Canton
- **Community Gardens:**
47 Community Garden plots
& 47 Raised Bed Gardens;
56 Gardeners; over 850 pounds of food harvested
- **Canton Corridor Farmers Market & Mobile Market:**
\$2,653 SNAP/WIC benefits used; over 1,100 in attendance



- **NE Canton Urban Teaching Farm:** 22 trainings held; nearly 900 pounds of food harvested; over 230 volunteers
- **SE Canton Urban Farm:**
Over 1,000 pounds of food harvested;
Over 20 volunteers from the community participated.

This project is under the umbrella of Live Well Stark County, a coalition of community leaders working together to make Stark County healthier by promoting policies and programs that support wellness through healthy nutrition, physical activity, and tobacco free behaviors.

For more information or to get involved, visit www.livewellstarkcounty.org

Fairless School District to Adopt a Return to Learn policy...



The Stark County Health Department childhood injury prevention grant awarded from the Ohio Department of Health (ODH) has a focus on reducing Traumatic Brain Injuries (TBI) to children in Stark County, specifically relating to sports and recreation injuries. The funding that was received is used to work in an array of settings with groups and organizations to assist in the development of protocols, policies and curriculum related to childhood injury prevention, particularly concussions.

One of the strategies of the grant is to work with Stark County elementary/middle schools and assist them in the adoption of a Return to Learn Policy. The Return to Learn Policy is a protocol to ensure that there is a plan in place to assist staff with a concussed student's successful transition back into the classroom. Fairless School District is the first to implement the Safe Kids Return To Learn policy which has successfully transitioned 16 students back into the classroom since the 2014 school year. Fairless School District has met with their Board and is currently in the process of adopting a written policy.

Congratulation to Fairless for taking steps to protect their kids!



KEEP OUR BABIES ALIVE (K.O.B.A.) HOME VISITING PROGRAM



Infant Mortality is a topic that has gotten a lot of media attention recently although it has been an issue plaguing our community for a lot longer than many realize. Back in 1996 the Stark County Health Department started a home visiting program called “Keep Our Babies Alive” (K.O.B.A) through grant funds made available by the “Ohio Infant Mortality Reduction Initiative” (OIMRI) administered by the Ohio Department of Health.

The purpose of the K.O.B.A program is to address the disparity of higher infant mortality in the African American population. According to 2014 data, the Ohio Infant Mortality Rate (Number of Infant Deaths per 1,000 Live Births) for African Americans was 16.26 and for Whites it was 6.68. This means an African American infant is over twice as likely to die as a White infant is. Women who are referred to the program are assessed for eligibility and assigned to a Community Health Worker (CHW). In order to enroll in the K.O.B.A program, a woman must be pregnant at the time of enrollment, be African American, and/or pregnant with an infant of African American descent.

The CHW maintains a caseload of up to 45 women and offers monthly home visits to each woman throughout their pregnancy and until the infant turns 2 years old. At each visit the CHW assesses for risk factors that may affect a healthy pregnancy outcome and addresses any concerns. They assure the woman is seeking routine prenatal care and has transportation to their prenatal and well-baby appointments by providing bus passes. They assess for safety concerns and housing needs and make appropriate referrals. By utilizing an evidenced based curriculum called “Partners for a Health Baby” by Florida State University, education is provided to help women make healthy lifestyle choices.

In 2015, we had 210 clients utilizing the K.O.B.A program and the CHWs completed 787 client home visits. The key for the K.O.B.A. program is that for the past 8 years 2008- 2015, there have been 1,101 K.O.B.A. clients and 0 infant deaths or an infant mortality rate (IMR) of 0!



ENVIRONMENTAL HEALTH SERVICES STAFF



Sitting front row, pictured left to right: Deborah Moore, Brittney Alverson, Courtney Myers, Ashley Takash, Paul DePasquale, Christina Gallion, Gina Davis, Nancy Petrovski, Courtney Rusnak
Standing second row pictured left to right: Ivan Langovsky, Tory Coyle, Dana Williams, Tim Heather, Todd Ascani
Standing third row pictured left to right: John Pavel, Chris Lefevre, Todd Paulus, Randy Ruzskowski, Mark Smiraldo, Mike Hesson, Phil Revlock

The 2015 property transfer program statistics are listed below. A total of 857 inspections were conducted in 2015 by either the Health Department or by registered contractors who submit reports for review. 12% of the septic systems inspected were failing. “Failing” means that the system was causing a public health nuisance, which is defined in Ohio Revised Code 3718.011. An additional 9% had improperly discharging gray water. Lastly, 32% or approximately 1/3, had minor issues that were given recommendations on how to improve the function and/or longevity of their system.

2015 PROPERTY TRANSFER INSPECTION BREAKDOWN

Township	Total Inspections	Total Failure	Gray Water	Recommendations
Bethlehem	19	0 0%	1 5%	5 26%
Canton	43	7 16%	7 16%	12 28%
Jackson	74	3 4%	3 4%	29 40%
Lake	161	15 9%	16 10%	38 24%
Lawrence	77	7 9%	2 3%	21 27%
Lexington	30	4 13%	4 13%	14 47%
Marlboro	42	1 2%	3 7%	15 36%
Nimishillen	67	9 13%	9 13%	17 25%
Osnaburg	45	10 22%	4 9%	16 35%
Paris	31	2 6%	1 3%	8 26%
Perry	33	7 21%	6 18%	13 3%
Pike	18	5 28%	0 0%	7 39%
Plain	86	4 5%	1 1%	32 37%
Sandy	10	1 10%	2 20%	5 50%
Sugarcreek	29	8 28%	4 14%	8 28%
Tuscarawas	41	10 24%	5 12%	16 39%
Washington	51	8 16%	11 22%	19 37%
Totals	857	101 12%	79 9%	275 32.00%

PROPERTY TRANSFER INSPECTIONS COMPLETED

2010	2011	2012	2013	2014	2015
471	583	694	803	809	857

PUBLIC HEALTH NUISANCES

The Stark County Health Department responds to and investigates public health nuisance complaints under several Ohio Revised Code sections. In simple terms, a public health nuisance is when a building or property is in a condition that threatens or potentially threatens the health of a person or community.

Below are examples of public health nuisances the Stark County Health Department will investigate:

- Accumulation of trash, garbage and materials on properties
- Rat and rodent infestations
- Animal waste and manure
- Dead animals
- Restaurant illnesses and cleanliness
- Unsanitary housing or living conditions
- Home sewage system failures
- Mold issues within rental units and homes
- Unmaintained swimming pools
- Mosquito and standing water

2015 PUBLIC HEALTH NUISANCES INVESTIGATIONS COMPLETED IN STARK COUNTY	
TYPE OF COMPLAINT	NUMBER OF COMPLAINTS
OPEN DUMPING – SOLID WASTE – CONSTRUCTION AND DEMOLITION DEBRIS –SCRAP TIRES	154
SEWAGE RELATED	135
HOUSING – MOLD – INDOOR AIR	122
FOOD COMPLAINTS	94
ANIMAL – INSECT – VECTOR	82
PLUMBING – WATER WELLS	56
OTHER	41
TOTAL FOR 2015	684

Leading Causes of Death

2015

Cancer	458
Diseases of the Heart	430
Alzheimer's Disease	310
Chronic Lower Respiratory	152
Cerebrovascular Disease	120
Diseases of the Kidney	72
Septicemia	39
Influenza and Pneumonia	39
Accidents (Unintentional Injuries)	38
Suicide	30
Diabetes	20
Other	89
Pending	4
Homicide	1
TOTAL	1,802

The health department needs citizen participation to assist in the prevention and elimination of hazards to the public health. Both the health department and citizens have a responsibility in this effort to maintain a healthy environment. The nuisance complaint process can be a vital part of this effort when it is used appropriately. Keep in mind that health department's enforcement ability is limited to conditions which threaten the public's health. A condition may certainly be a nuisance to you, but it may not be a public health nuisance.

A complaint must be submitted in writing by downloading a complaint form on our website at www.starkhealth.org, have a form sent to you, or pick one up at our office before it can be investigated. Citizen complaints are accepted over the phone but a complaint form must be received before an investigation is initiated. The only exceptions are food operation complaints or emergency situations such as a significant chemical spill. Complaints are generally investigated in the order in which they are received. Turnaround time is usually three business days, but may be less, depending on the number of complaints received.

Once a nuisance complaint is filed with our office it becomes a public record. Anyone may obtain a copy of a complaint file upon request.



If you would like to register a complaint regarding a nuisance condition or have questions, please call (330) 493-9904 and ask to speak with a Public Health Sanitarian.

School Nurses are becoming a very integral part of Today's Schools

In years past when asking children about their school nurse you might hear “she’s the lady that checks my head for lice” or “she checked my eyes” but many times now school nurses are responsible for much more than the basic screenings. Federal laws have made public school inclusion a must for children with severe and often life threatening health conditions. The number of children attending school now with chronic health conditions such as: asthma, allergies, diabetes, and seizure disorders that require ongoing care during the school day has drastically increased over the past ten years. In addition to this children today are less physically fit, have mental and physical health concerns and take more medication than in years past. All of these things can affect the educational experience of a child. Registered nurses possess the knowledge and skills needed to help bridge those gaps between a student’s home-life, their health and the classroom.

Currently The Stark County Health Department provides school nursing services to one private school and five school districts across the county. Services are currently provided to: Fairless Local Schools, Marlington Local, Northwest Local, Osnaburg Local, Tuslaw Local, and Canton Country Day School. These services are provided through a contract between the Stark County Board of Health and the school board or administration as allowed by law in the state of Ohio. The number of hours a nurse spends in the school system depends on the contract and varies between the smallest contract of 4 hours a week to the largest we have at 25 hours a week.

Services provided to the schools include: conducting health assessments & screenings for vision, hearing, and scoliosis; providing immunization records review and state mandated reporting; providing first aid services; providing health education to students, staff, and parents on health related topics; assisting with Individual Education Plans/ Health Plans/ 504 Plans; performing head lice checks as needed; performing scabies checks as needed; managing medication administration; formulating, recommending, implementing and supervising school health policies and protocols; assisting with sport physical clinics, and any other medical issues that might arise throughout the school year.

During the 2014/2015 school year nurses from The Stark County Health Department provided screening services such as vision and hearing screenings to over 4,500 students from across the county, and were available to assist with any health related concerns to the over 8,000 students who attended the schools listed above.



ENVIRONMENTAL HEALTH INCORPORATING GIS TECHNOLOGY INTO SERVICES

GIS is a powerful tool that has been around for some time; however, its use was limited to a few skilled individuals with special software. Thus, its availability for problem solving and planning was limited. That has changed since the Health Department began collaborating with the Stark County Geographic Information Systems (**GIS**) Department.

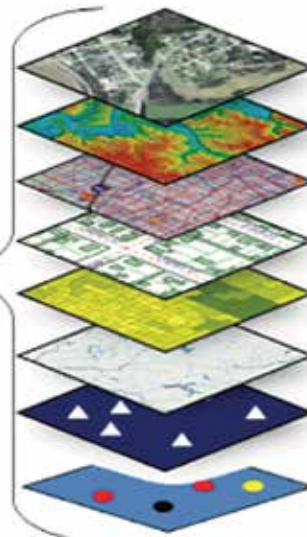
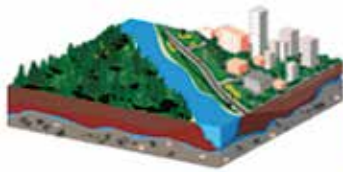
Many projects have been identified where GIS could simplify processes or expedite the review of information, including:

- Epidemiological Mapping
- Water Well Mapping
- Mosquito Program Mapping & Routing
- Sewage Program Mapping

The first application produced by Stark County **GIS** was the “*Sewage Treatment System App*”, which is used to evaluate a property’s suitability for new and replacement septic systems. It can also be used to help prepare system designs. The application combines scaled aerial photography with soil, parcel, watershed, and contour layers and more. Soon, soil scientists doing soil test holes for a new or replacement septic system will be able to enter test hole locations into the application, which will store the information permanently and be available for the public to view. Prior to this application’s availability, staff had to obtain content from several map sources. The data then had to be manually transposed onto a master copy to be useful for a site evaluation. This process could take up to 40 minutes. Now a usable map can be produced from one source in about 10 minutes. We look forward to future endeavors with Stark **GIS** planned for 2016, which will certainly yield even more improved efficiency.

For those who don’t know, **GIS** is a computer system that is used to construct, record, analyze, manipulate, and display geographic information. Geographic information is simply any data that is geographically referenced or that has known earth coordinates (*Latitude/Longitude*).

THE REAL WORLD



DATA SLICES

Imagery

Elevation

Transportation

Addresses

Boundaries

Water Features

Survey Control

Your Data

STARK COUNTY HEALTH DEPARTMENT

- 250,000 - total population served by the health department
- 9th - Stark County Health Department’s ranking of the largest health districts in Ohio
- \$1,280,499 - total number of grant awards received
- 3,659 - total number of immunizations administered
- 2,946 - total number of food program inspections
- 1,330 - total number of infectious diseases reported
- 86 - total number of youth and high school coaches trained in concussion awareness
- 7,116 - total number of death certificates issued
- 10,398 - total number of environmental health inspections
- 18,437 - total number of environmental consultations
- 2,914 - total number of birth certificates issued
- 152 - total number of student academic experiences
- 350 - cribs distributed within the safe sleep program
- 2,529 - total number of WIC clients
- 2,212 - total number of students educated with the Choose My Plate healthy eating program



REPORTABLE INFECTIOUS DISEASE SUMMARY

Stark County Health Department Jurisdiction

DISEASE	2015	2014	DISEASE	2015	2014	DISEASE	2015	2014
Amebiasis	1	0	Hepatitis C - Chronic	153	124	Other Arthropod-borne Disease	0	1
Babesiosis	1	0	Influenza-associated Hospitalization	177	229	Pertussis	24	46
Campylobacteriosis	35	49	Influenza-associated pediatric mortality	0	0	Salmonellosis	32	31
Chlamydia	615	570	Legionellosis	12	6	Shigellosis	1	26
Coccidioidomycosis	0	1	Listeriosis	1	0	Streptococcal – Group A invasive	5	9
Cryptosporidiosis	19	18	Lyme Disease	12	7	Streptococcal-Group B Newborn	0	1
Cyclosporiasis	1	0	Malaria	0	1	Streptococcal Toxic Shock Syndrome (STSS)	0	1
E. Coli, Shiga Toxin-producing	12	6	Measles	0	7	Streptococcal – Invasive Pneumoniae	24	22
Giardiasis	15	11	Meningitis – Aseptic/Viral	19	12	Toxic Shock Syndrome (TSS)	1	0
Gonorrhea	89	124	Meningitis – Bacterial (Not N. Meningiditis)	2	1	Tuberculosis	2	1
Haemophilus Influenza Bacteremia	3	3	Meningococcal Disease	1	1	Typhoid Fever	0	1
Hepatitis A - Acute	2	5	Mumps	2	5	Varicella	22	19
Hepatitis B – Acute	0	4	Mycobacterium Other Than TB	5	15	West Nile Virus	1	1
Hepatitis B – Chronic	27	24				Yersiniosis	8	1
Hepatitis B – Perinatal infection	3	1				Total	1330	1384
Hepatitis C - Acute	5	0						

*This report includes confirmed, probable, and suspect cases reported 01/01/2015 – 12/31/2015

COMMUNICABLE DISEASE HIGHLIGHTS, 2015

Microorganisms such as bacteria, viruses, parasites, or fungi cause communicable diseases (also known as infectious diseases). A person can contract a communicable disease from an infected person, an infected animal, and/or another infected source such as water or food. Stark County Health Department communicable disease staff keeps track of the number of persons infected by different communicable diseases throughout the year. They also conduct follow-up investigations on all reported diseases by collecting demographic and clinical information, as well as exposures to potential sources of disease. By collecting this data, we are able to determine potential sources of disease, quickly implement control measures, detect trends and outbreaks, and create targeted policies and programs to protect or improve the health of the community.

This annual summary represents the 2015 communicable disease data required by Ohio law reported to state and local health departments. Only selected communicable diseases determined to be of public health importance are reportable therefore this summary does not reflect all communicable disease in our community. Additionally, the summary represents only cases of disease for residents of Stark County Health Department jurisdiction therefore does not include disease data for the cities of Alliance, Canton, or Massillon.

- In 2015, SCHD reported and/or investigated 12 communicable disease outbreaks. Among these were:
 - 3 outbreaks of *Norovirus* (associated with nursing homes and educational institutions)
 - 3 outbreaks of *Sarcoptes scabiei* (associated with nursing homes and educational institutions)
 - 1 outbreak of *Bordetella pertussis* (associated with an educational institution)
 - 1 outbreak of *Salmonella enteritidis* (associated with a restaurant)
 - 1 outbreak of *Escherichia coli* (associated with a public swimming venue)
 - 1 outbreak of *Varicella* (associated with a household)
 - 1 outbreak of Fifth Disease (associated with an educational institution)
 - 1 outbreak of unknown etiology (associated with a restaurant)

Each of these outbreaks were managed utilizing the guidelines and regulations developed by the Ohio Department of Health, and in conjunction with other public health departments. Through the cooperation of every organization and private party impacted, SCHD was able to terminate and/or assist in termination of each outbreak.

- During 2015, several reportable infectious diseases increased in the number of cases reported by over 50% in the Stark County jurisdiction compared to that of 2014. These diseases are as follows:
 - Escherichia coli:** Cases of E.coli increased from six cases in 2014 to twelve cases in 2015. Nine of the 2015 cases were associated with the aforementioned outbreak. Nationally there has not been a notable increase seen in E.coli cases reported. Stark County

continued on page 10

NURSING STAFF



Sitting front row, pictured left to right: Meghan Wilson BSN, RN, Public Health Nurse; Angelena Schapiro LSW, Social Worker; Tiffany Streb RD, LD, WIC Program Coordinator; Michelle Linder RD, LD, WIC Dietitian
Sitting second row, pictured left to right: Sue Seifert BSN, RN, Immunization Program Coordinator; Diana Greene, WIC LPN; Delight Howells BSN, RN, Nursing Unit Manager; Sherry Smith MS, BSN, RN, Director of Nursing Services; Christina Gruber MS, BSN, RN, Nursing Unit Manager; Carolyn Jennings BSN, RN, Communicable Disease Program Coordinator; Sharon Cartwright, WIC Clerk
Standing pictured left to right: Cheryl Dietrich, Immunization and Well Child Clerk; Sandy Marinchick, KOBA Community Health Worker; Amanda Uhler BSN, RN, Public Health Nurse; Annette Elsmore RD, LD, WIC Dietitian; Vicky Coffman; Billing Specialist; Shelly Curtiss, Prenatal and RHPW Clerk; Allison Devore BSN, RN, Public Health Nurse; Diane Coblenz BSN, RN, Public Health Nurse; Stephanie Fox LSW, School Social Services; Bonnie Paridon RN, Public Health Nurse; Courtney Mangino RD, LD, WIC Dietitian; Dawn Hopkins, WIC Clerk; Tricia Warner BA, KOBA Community Health Worker; Ashlee Wingerter BSN, RN, Public Health Nurse; Tiffany Belknap BSN, RN, Public Health Nurse; Michelle Watkins, KOBA Community Health Worker; Darla Berry, WIC and Nursing Clerk;
Not Pictured: Maureen Ahmann DO, Well Child Pediatrician and Medical Director; Eleanor Lentner CNP, Prenatal and RHPW Practitioner; Julia Wagner MPH, Epidemiologist

COMMUNICABLE DISEASE HIGHLIGHTS, 2015 *continued*

however has seen an upward trend since 2013. In fact, the five-year annual average (2010-2014) for Stark County jurisdiction cases of *E. coli* reported is only 3.6 per year, which is lower than both of the total number of cases reported in 2014 and 2015.

- **Legionnaire's Disease:** Cases of Legionnaire's Disease increased from six cases in 2014 to twelve cases in 2015. In 2014, a relatively low number of cases of Legionnaire's Disease were reported. The five-year annual average for the Stark County jurisdiction is 8.6 cases reported each year. According to the Centers for Disease Control and Prevention there has been a national trend upward in the number of cases reported since 2003.
 - **Lyme disease:** Lyme disease rose from seven cases reported in 2014 to twelve cases in 2015. The five-year annual average is 6.2 cases reported a year. Stark County is one of the 67 counties in Ohio where the blacklegged ticks known to carry this disease are present. However, Stark County is not one of the counties where Lyme disease is considered endemic. For the disease to be considered endemic there needs to be, either two confirmed cases of the disease acquired locally or ticks in the county confirmed to be infected. Statewide there has been an increase in human cases of Lyme disease since 2010.
 - **Yersiniosis:** Last year only one case of Yersiniosis was reported whereas this year there was a total of eight. The five-year annual average is 0.6 cases reported in the Stark County jurisdiction each year. This increase was not reflected in the national numbers and appeared to be unique to this jurisdiction. Nationally from 2011 to 2014, the number of cases reported has remained with no significant changes. When compared to 2006-2008 however, there has been a 22% decrease in cases nationally.
 - **Tuberculosis:** Last year only one case of Tuberculosis was reported whereas this year there was two. The five-year annual average is 1.2 cases reported in Stark County each year.
- 3) Influenza season stretches from October of one year until March of the next. Across all of Stark County (including all four health jurisdictions), the 2015-2016 influenza season thus far has seen 13 cases of reported influenza. By this time last year, there were 215 cases reported and the numbers were still rising. This includes the required reports of all those with an influenza-associated hospitalization and the voluntary reports from primary care offices of those who were not hospitalized but still diagnosed. As of MMWR week 51 of the 2015-2016 influenza season, all of the viruses tested nationally were similar to this year's influenza vaccine. The predominate strain for this season is influenza A (H3N2) which in past seasons has caused a higher overall age-specific hospitalization rate as well as mortalities. The Centers for Disease Control and Prevention are still encouraging vaccinations because those who do become infected despite vaccination may have milder symptoms. They are also recommending that treatment for those infected not wait for laboratory confirmation. Clinical benefit is considered greatest when given within the first 48 hours of symptom onset. Common symptoms include fever, cough, sore throat, body aches, headaches, chills, and fatigue. Complications may include things such as bronchitis or pneumonia and may make chronic health problems, such as asthma, worse. As seen in the chart above these symptoms can be severe enough for an individual to be hospitalized.
- 4) There were several diseases reported in 2015 that are not commonly seen within Ohio and/or the SCHD jurisdiction, and are briefly discussed in the order in which they are listed in the chart.

- **Amebiasis** is a parasitical disease caused by the parasite, *Entamoeba histolytica*. A person becomes infected when they eat or drink contaminated food or water or they touch a contaminated surface or object and then touch their mouth. Only 10-20% of people infected become symptomatic. Symptoms range from loose stool and abdominal pain to bloody stool and fever. On rare occasions, the infection has spread into the liver, lungs, and brain. Symptoms may take up to four weeks to develop after the initial infection. Antibiotics are available for those that become symptomatic. Appropriate hand hygiene is the best way for people to prevent spreading this disease to others.
- **Babesiosis** is a parasitical infection spread by the *Ixodes scapularis* tick or more commonly known as the blacklegged or deer tick. The parasite infects and destroys red blood cells and can cause hemolytic anemia. Many do not experience any symptoms and others may only experience nonspecific flu-like symptoms. Complications, including death, have occurred. Effective treatment is available. The best form of preventing infection is to prevent exposure from ticks.
- **Cyclosporiasis** is an infection caused by the *Cyclospora cayentanensis* parasite. This parasite is spread mainly through contaminated food or water and rarely from person to person through fecal matter. Symptoms are characterized by watery diarrhea, but may also be accompanied by other flu-like symptoms. If left untreated symptoms could last over a month and may relapse after they initially go away. Treatment generally consists of a combination of two antibiotics. The best form of prevention is not consuming contaminated food or water.
- **Listeriosis** is a foodborne bacterial infection caused by *Listeria monocytogenes*. It may also spread from mother to infant if the mother eats contaminated food while pregnant. Animals may carry these bacteria while appearing healthy. When the bacteria gets into a food processing factory it can survive for years contaminating various food products. Additionally, though the bacteria are killed through cooking and pasteurization some ready-made meats have become contaminated after cooking and before packaging. These bacteria can continue to grow even while refrigerated. Though the bacteria may initially cause a person to experience gastrointestinal illness, in almost all cases it becomes invasive and manifests itself differently depending on the person. Antibiotics are available for treatment. General food safety guidelines should be followed to reduce the chance of infection.
- A toxin producing strain of *Staphylococcus* causes **Toxic Shock Syndrome (TSS)**. It generally manifests itself through a fever, rash, and low blood pressure and then other symptoms involving the organs it infects. This may be unique to the individual infected. This infection is most commonly associated with females using tampons during menstruation, though this is not always the case. Antimicrobial therapy along with fluid replacement is the first line of treatment. This infection is not communicable, but is reportable by law.

The Communicable Disease Unit continues to provide information and resources to schools, healthcare facilities and the community regarding infection prevention and control. Common topics that foster significant public interest include influenza, scabies, head lice, Methicillin-resistant *Staphylococcus aureus* (MRSA), tuberculosis, enteric (intestinal) illnesses, and sexually transmitted diseases.

**The approximate population of the Stark County Health Jurisdiction is 249,087 (U.S. Census Bureau: State and County Quick Facts, 2014).*

STARK COUNTY TOWARD HEALTH RESILIENCY FOR INFANT VITALITY & EQUITY (THRIVE)



EVERY CHILD DESERVES TO CELEBRATE THEIR FIRST BIRTHDAY

In 2013, Stark County became part of a statewide initiative to advance equity in birth outcomes. The initiative calls on Toward Health Resiliency for Infant Vitality and Equity (THRIVE), the countywide infant mortality coalition, to select, implement, and evaluate a data-informed birth outcome, equity project. THRIVE is a public – private partnership comprised of

agencies, organizations, and community members dedicated to implementing targeted interventions for the purpose of reducing the rate of infant mortality and health disparities in Stark County.

- The Infant Mortality Rate (IMR) for Stark County is 6.63, lower than Ohio's IMR of 7.3, and greater than the national rate of 5.96 (2013).
- The disparity rate between deaths of Black compared to White infants is 1.88. Stark County Black infants die at almost twice the rate of White infants (IMR White = 5.87; IMR Black = 11.03) (2013).
- Healthy People 2020 IMR goal is 6.0. The Ohio Department of Health has set a more aggressive goal of 4.5.

Between 2008 and 2012, Stark County experienced 180 infant deaths. Evaluating the birth-weight and gestational age of these fetoinfant deaths through the Perinatal Periods of Risk (PPOR) approach, Stark County THRIVE identified the periods with the highest risk. Two interventions were selected that would provide for the greatest possible impact in reducing infant mortality and disparity: Safe Sleep Awareness and Centering Pregnancy Group Prenatal Care.

THE INTERVENTIONS

HOW WE WILL MAKE THIS IMPACT...

- Hospitals will establish safe sleep policies and model appropriate behavior
- Providers of early care and education institutionalize safe sleep practices
- Offer professional development and general community education programs
- Train First Responders to identify hazards to safe sleep and provide appropriate information on resources



SAFE SLEEP

- Centering pregnancy provides quality prenatal care, no wait times in the waiting room, appointment scheduling ahead of time for entire pregnancy and a support system with other moms in the group.

Centering Pregnancy® Group Prenatal Care with Care Coordination

- Eight to twelve pregnant women with similar due dates meet in a group with their healthcare provider for prenatal care.
- Group sessions include facilitated discussion of pregnancy, birth and newborn care as well as overall health, and many other topics.

How We Will Make this Impact

Building upon the existing partnerships between the hospital-based Centering programs, THRIVE, and diverse community partners

- In Stark County, pregnant women have access to a community-based Care Coordinator who can assist them in accessing early prenatal care at one of two existing hospital-supported Centering programs or via routine individual prenatal office visits.
- Information on Centering and the services of the Care Coordinator is disseminated through partner agencies, faith community, and word-of-mouth with presentations and education sessions conducted by THRIVE.



Financial Statement Fiscal Year 2015 (unaudited)

SOURCES OF REVENUE

Contract Fees	545,489
Fees for Services	279,205
C&D User Fees	827,864
Inspection Fees	200,198
Vital Statistics	254,857
Permits	1,246,869
Fines/Late Charges	100,938
State Subsidy	46,859
Local Tax Subdivisions	1,466,720
Public Health Infrastructure	115,837
CFHS State Grant	392,981
Immunization Grant	17,813
WIC Grant	372,447
Reproductive Health Grant	49,103
Injury Prevention Grant	126,109
NACCHO Funding	3,500
Area Health Education Grant	27,250
Creating Healthy Communities	128,100
Other Receipts	84,945
Carryover from 2014	406,758

TOTAL SOURCES OF REVENUE 6,693,842

EXPENDITURES

Salaries	2,885,398
Insurance	465,319
Medicare	42,103
PERS	521,929
Workers Compensation	35,403
Unemployment	3,070
Supplies	160,552
Utilities	18,361
Contracts & Purchased Services	511,449
Phones & Communications	26,586
Equipment / Vehicle Rental	39,599
Rent	325,314
Equipment	22,969
Other Expenses	6,167
State Remittances	959,438
Travel	90,826
Refunds	9,316
Payouts For Sick & Vacation Leave	10,642
Encumbrances Carried Over To 2016	321,502

TOTAL EXPENDITURES 6,455,943

ADMINISTRATION & SUPPORT SERVICES



Sitting front row, pictured left to right: Sharon Bagnolo, Carmalee Hand-Cannane, Steve Ling, Amy Ascani, Mindi Nickels

Standing pictured left to right: Tasha Catron, Kelly Potkay, Kathy Kirkwood, Kay Conley, Debby Hamilton, Amanda Kelly, Amber Walpole

Stark County Combined General Health District

Serving the cities, villages, and townships of Stark County since 1920:

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Canton
Jackson
Lake
Lawrence
Lexington
Marlboro
Nimishillen
Osnaburg
Paris
Perry
Pike
Plain
Sandy
Sugarcreek
Tuscarawas
Washington

VILLAGES

Beach City
Brewster
East Canton
East Sparta
Hartville
Hills & Dales
Limaville
Magnolia
Myers Lake
Minerva
Navarre
Waynesburg
Wilmot

CITIES

Canal Fulton
Louisville
North Canton

Environmental Services, Vital Statistics, and Support & Administrative Services

3951 Convenience Circle NW, Canton, Ohio 44718
Phone: 330-493-9904 | Fax: 330-493-9920



Nursing Services

3969 Convenience Circle NW, Canton, Ohio 44718
Phone: 330-493-9928 | Fax: 330-493-9932

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