

2009



*Clark County
Combined
Health District*

Annual Report

2009 Annual Report

Clark County Combined Health District

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Clark County Combined Health District
Annual Report

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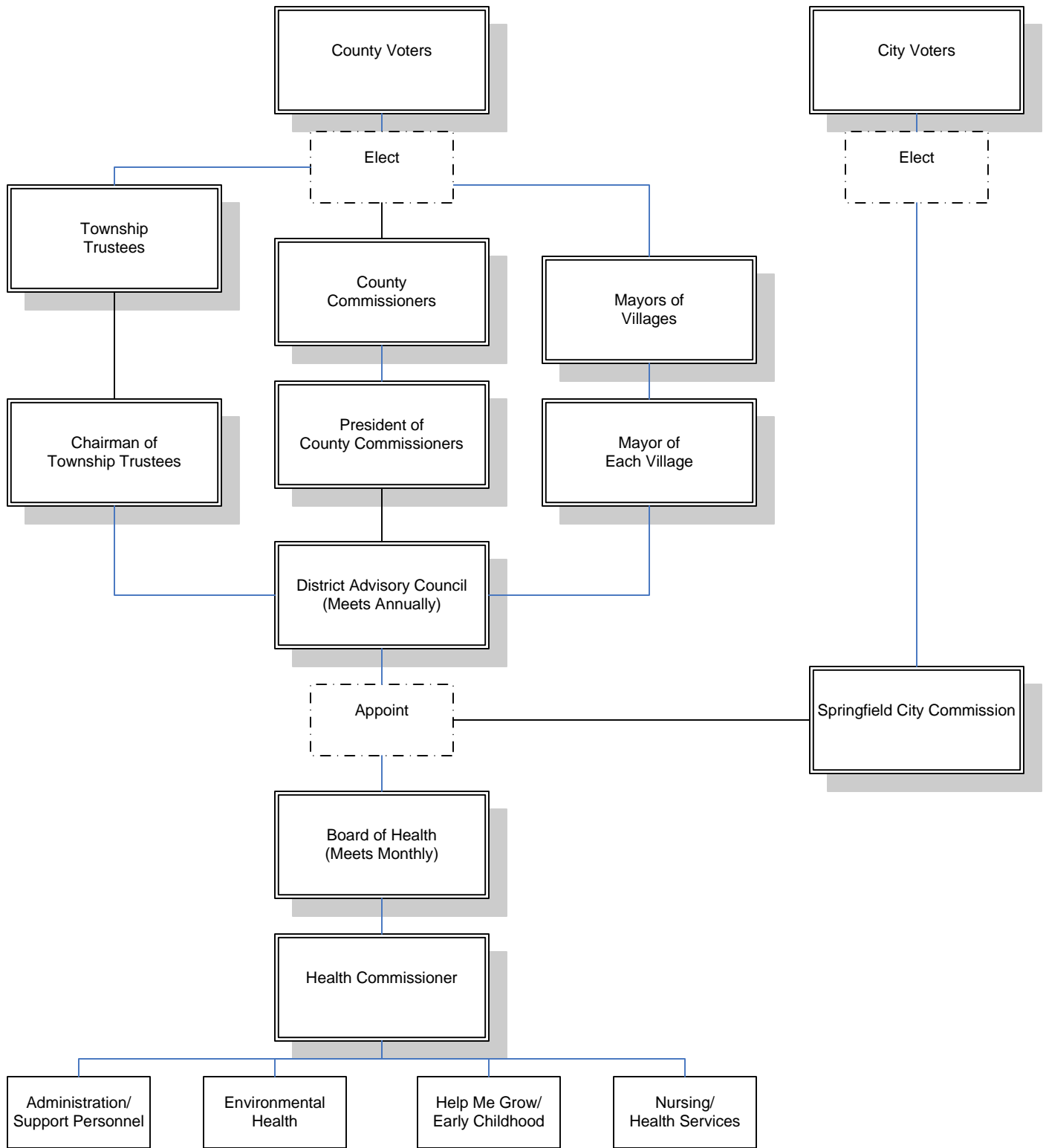
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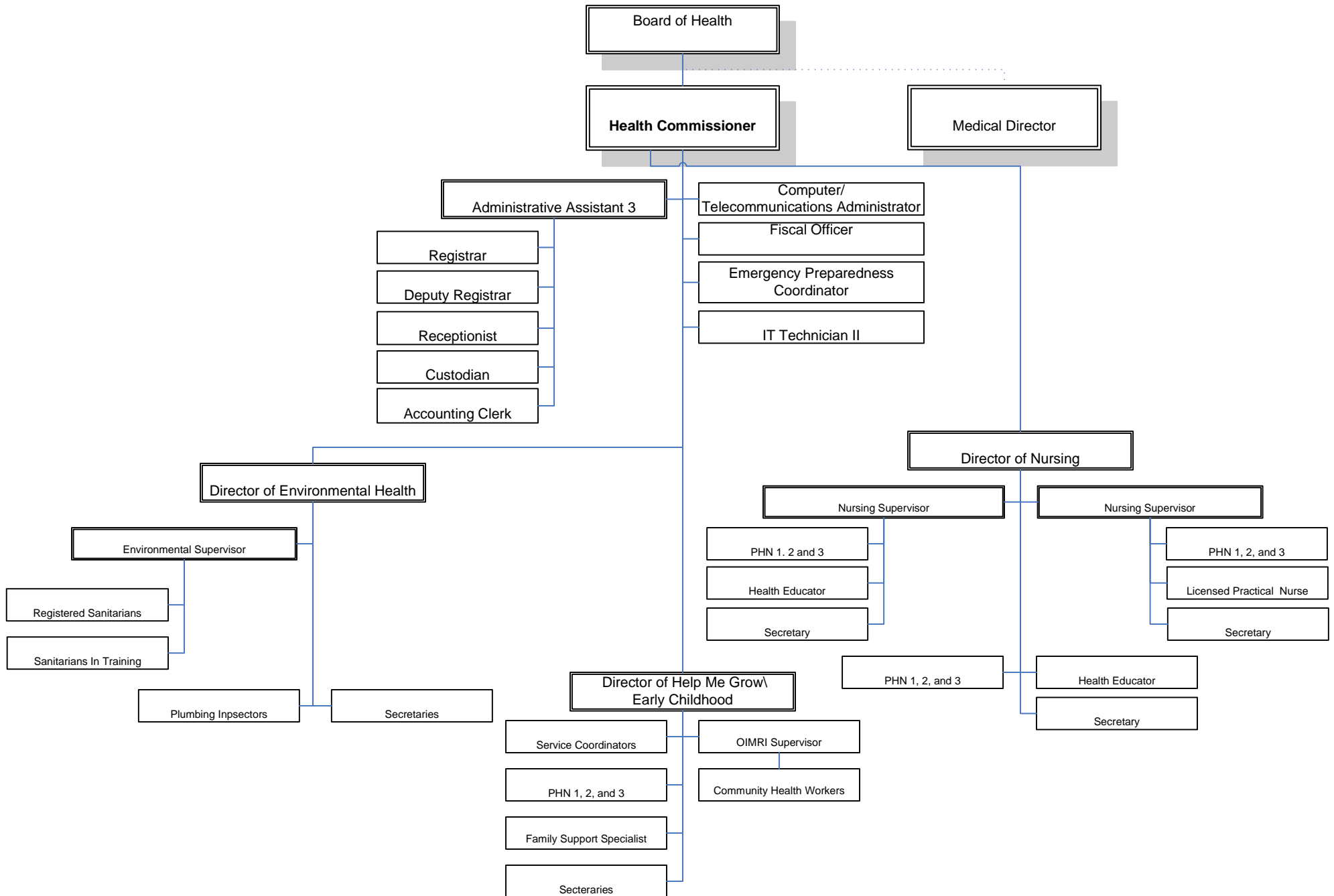
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Clark County Combined Health District

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Clark County Combined Health District

Board of Health

2009

Susan Weaver, President

Dan Young, Vice-President

Cathy Crompton, D.D.S.

Richard Colvin

Harry Elliott

Steven Patterson, D.O.

David Henry, D.V.M.

Veatrice Smith

A MESSAGE FROM THE HEALTH COMMISSIONER

What a year for Public Health in Clark County! We started the year with cold weather and tried for several months to coax our new energy efficient HVAC (heating, ventilation and cooling) system into warming us up to 70 degrees. In March we finally achieved that lofty goal. As we shivered through the winter months, the students of the Career Technology Center, formerly known as JVS, shivered for real every morning and afternoon in efforts to complete their largest project to date, a 5,300 square foot addition to our public health center. With the help of several contractors and the Clark County Buildings and Grounds Department, we completed the project in July and moved our administrative offices that same month.

While planning the completion of the project, the Ohio Legislature responded to the economic conditions and threatened to cut 60% of our Help Me Grow program. To avert layoffs and save additional monies in the future, we explored and implemented an Early Retirement Incentive program. This program has resulted in five valuable persons opting to retire to make way for our younger staff to continue in their stead. At this point we were deep in the midst of moving some of our offices. By the end of July, the moves were complete.

Just in time. Prior to the completion, the spring brought us the newest influenza strain - H1N1. It reared its ugly head over Memorial Day weekend with our first cases. The cases identified in Northridge and at Shawnee High School were among the first cases in southwest Ohio. We began to plan for the upcoming H1N1 vaccination clinics that would encompass the entire fall and winter seasons. The first H1N1 vaccines arrived in October for our healthcare providers and emergency medical services personnel. On October 27th, we began our string of many mass immunization clinics at the Fairgrounds. During 2009, staff and volunteers gave over 24,000 H1N1 vaccinations. The efforts have continued into 2010. We could not have accomplished this feat without the help of our staff, volunteers and multiple other public entities. Thank you to all of our citizens that came out for the vaccination effort.

We look forward to tackling the fiscal and H1N1 challenges in the first part of 2010. There is considerable planning to be done for a successful future.

Charles A. Patterson, R.S., MBA
Health Commissioner

FISCAL REPORT

The year 2009 saw several changes in the financial area of the Health District. Our longtime Health Administrator and financial person, Dorothy Toadvine, retired at the end July. At that time, her duties and those of the Grants Accountant were merged into one position with the title of Fiscal Officer. The Fiscal Officer was hired from within the Health District, as was a part-time Accounting Clerk. The retirement and subsequent redistribution of our financial work has resulted in a cost savings for the Health District.

As you can see from the enclosed Financial Summary Statement, the Health District has managed to maintain a substantial carryover balance. The Health District has also been able to maintain grant funding by diligent field work and fiscal management throughout the years. In addition to the grant funding received in previous years and changes in the finance department, additional grant monies became available at the end of 2009. A Notice of Award was received for \$653,000 to perform the duties of the Public Health Emergency Response Grant (PHER). This money is being used to vaccinate and heighten the public awareness of H1N1 influenza.

We remain committed to stay fiscally healthy in 2010 and beyond.

Shannon A. Jacobs
Fiscal Officer

CLARK COUNTY COMBINED HEALTH DISTRICT

SUMMARY OF RECEIPTS, EXPENDITURES, AND BALANCES FOR THE FISCAL YEAR ENDED DECEMBER 31, 2009 WITH COMPARISONS

FUND	BALANCE DEC 31, 2007	BALANCE DEC 31, 2008	2009 Receipts	2009 Expenditures	BALANCE DEC 31, 2009
HEALTH DISTRICT	1,706,037.00	1,496,280.45	4,593,283.06	3,263,873.87	1,329,409.19
FOOD SERVICE FUND	4,144.00	2,252.89	261,963.33	219,707.15	42,256.18
SOLID WASTE CONTRACT	39,316.00	11,157.00	146,457.00	124,036.93	22,420.07
TRAILER PARK FUND	10,203.00	9,425.49	21,793.02	12,955.35	8,837.67
WATER SYSTEM FUND	4,953.00	10,062.37	116,635.87	96,760.64	19,875.23
SWIMMING POOL FUND	3,196.00	3,840.00	19,312.00	13,667.89	5,644.11
HIV GRANT	9,675.00	14,070.58	74,070.58	58,972.04	15,098.54
LEAD GRANT	25,198.00	36,684.75	103,825.71	74,590.66	29,235.05
EARLY START	40,556.00	38,215.47	325,286.72	288,401.25	36,885.47
EARLY INTERVENTION GRANT	55,712.00	47,835.30	228,365.63	178,560.14	49,805.49
IMMUNIZATION GRANT	13,489.00	32,725.68	124,290.72	100,681.15	23,609.57
ACCRUED LIABILITY	59,293.00	59,293.45	59,293.45	-	59,293.45
PLUMBING FUND	92,187.00	79,892.03	242,901.53	193,428.73	49,472.80
TANF GRANT	49,470.00	31,978.67	470,155.13	466,289.39	3,865.74
CFHS/OIMRI GRANT	60,118.00	82,571.26	300,704.26	239,786.32	60,917.94
WELCOME HOME GRANT	15,910.00	15,711.57	71,562.91	59,368.51	12,194.40
RADON GRANT	4,210.00	16,370.30	16,370.30	11,450.00	4,920.30
SAFE COMMUNITIES GRANT	40,430.00	33,045.78	81,754.37	42,936.77	38,817.60
TOBACCO GRANT	26,931.00	-	-	-	-
CONTINGENCY FUND	400,000.00	300,000.00	320,000.00	-	320,000.00
HL PREVENTION GRANT	4,028.00	5,127.31	52,364.88	48,323.59	4,041.29
PUBLIC INFRASTRUCTURE GRANT	48,598.00	72,621.28	220,146.03	137,942.02	82,204.01
SW NON DISTRICT	35,423.00	23,282.65	28,257.65	3,934.98	24,322.67
SICK LEAVE PAYOUT	32,578.00	32,325.83	40,325.83	26,558.22	13,767.61
ENVIRONMENTAL FUND	15,164.00	15,970.47	56,566.69	54,067.40	2,499.29
ANTHEM DENTAL GRANT	83,536.00	33,233.57	82,174.53	76,024.72	6,149.81
CD&D FUND	24,095.00	13,811.37	79,336.42	64,419.62	14,916.80
SEWAGE TREATMENT FUND	44,288.00	7,687.94	234,995.44	212,959.41	22,036.03
CAPITAL IMPROVEMENT PROJECT	-	88,057.59	338,057.59	337,384.82	672.77
PUBLIC HEALTH ER GRANT	-	-	317,010.00	246,140.08	70,869.92
	<u>2,948,738.00</u>	<u>2,613,531.05</u>	<u>9,027,260.65</u>	<u>6,653,221.65</u>	<u>2,374,039.00</u>

EMERGENCY PREPAREDNESS REPORT

The role of the Clark County Combined Health District (CCCHD) Emergency Preparedness Coordinator and Grant Project Director was filled by Judy Andrews, RN as required by the Ohio Department of Health (ODH) Public Health Emergency Preparedness Grant (PHEP). The name of the project changed from Public Health Infrastructure Grant (PHIG) in August. A few additional staff salaries were funded in full or in part by the PHIG/PHEP grants.

The following ODH required Target Capabilities were addressed at CCCHD for the development and maintenance of a strong public health infrastructure to ensure the capability of responding to bioterrorism, terrorism, unintentional, or naturally occurring events that result in a public health threat such as pandemic influenza, weather-related incidents, or other emergency situations:

- Core Leadership and Grant Administration
- Planning in Training, Exercises, and Public Health Hazard Analysis
- Interoperable Communications
- Community Preparedness and Participation
- Epidemiological Surveillance and Investigation
- Mass Prophylaxis/Vaccination
- Isolation and Quarantine
- Emergency Public Information and Warning

Even though it was not a required Target Capability during 2009, the Incident Command Structure (ICS) was tested during the H1N1 influenza events.

The format for all of our emergency plans was changed during 2009 to be more easily accessible and user friendly to ensure that essential information was available to all who needed rapid access. The plans listed below were reviewed, revised, and Board of Health approved during 2009.

- The Basic Emergency Response/All Hazards Plan
- Annex 1: Strategic National Stockpile Plan (SNS) and the Pandemic Influenza Plan
- Annex 2: Crisis Communication Plan
- Annex 3: Epidemiological Response Plan
- Annex 4: Nuclear, Biological, and Chemical (NBC) Plan
- Annex 5: Continuity of Operations Plan (COOP) and the Disaster Recovery/Business Resumption Plan
- Annex 6: Special Needs Population Plan
- Annex 7: Debris Management Plan

Also in place is a three (3) year Training and Exercise Program Plan.

Selected staff participated in local and regional exercises when available and other types of training to ensure preparedness. All staff is required to take specific levels of training in the ICS courses.

Additionally, Emergency Preparedness staff attended at least quarterly regional meetings in their respective areas of expertise that involved their counterparts in the West Central Ohio Region, i.e., Health Commissioners, Epidemiologists, Medical Reserve Corps Coordinators, Information Technologists, and Emergency Preparedness Coordinators. These groups are ongoing.

In May 2009, a Pandemic Influenza (H1N1) outbreak occurred that tested the following three PHEP Target Capabilities: the health district incident command system, Epidemiological Surveillance and Investigation, and Emergency Public Information and Warning.

Due to the spring outbreak, planning began in August to prepare for Mass Prophylaxis/Vaccination of the citizens of Clark County against H1N1 Influenza beginning in October and continuing into 2010. Additional Federal funds were received for planning and implementation of the H1N1 vaccine administration event. Six of the PHEP Target Capabilities listed previously were tested during the second event.

The Health District has developed excellent collaboration and coordination with many Clark County agencies and organizations through past participation in exercises, planning, and training sessions. That experience provided an excellent platform for the “real time” event of conducting H1N1 clinics. Collaboration was in place with the Clark County Emergency Management Agency (EMA), Clark County Sheriff’s office, the United Way Volunteer Reception Center, and the Clark County Chapter of the American Red Cross. Other participants included paramedics trained to vaccinate and student nurses from several local Schools of Nursing.

The entire Health District staff and over 200 volunteers also assisted with the clinic operations. Some of the volunteers are members of the Medical Reserve Corps (MRC).

The membership of the Clark County MRC has increased continually, but with the advent of H1N1 influenza, thirty new volunteers were recruited and trained in a short period of time. MRC volunteers receive multiple levels of training and are credentialed, enabling them to be ready to respond in the event of an emergency. They also assist throughout the year with health fairs, seasonal flu clinics, and school screenings.

West Central Ohio Regional collaboration among the eight local health districts was also in place with information exchange and the sharing of vaccine, vaccinators, and other supplies.

The Emergency Preparedness Coordinator has been and will continue to be actively involved in collaboration with the Clark County EMA and other partner agencies as part of the Local Emergency Planning Committee (LEPC). This committee reviews and revises Emergency Support Function directives to ensure that areas of concern continue to be addressed.

Judy Andrews, RN
Emergency Preparedness and Special Projects Coordinator

ENVIRONMENTAL HEALTH DIVISION

Public health depends upon the provision of fundamental services. These include clean water, safe and wholesome food, clean soil and adequate waste disposal, along with healthy home and business indoor environments. To prevent disease and promote health, the Environmental Health Division staff educates and informs clients and customers about healthy environmental practices using state and local laws and regulations to safeguard the health of Clark County residents and visitors. Each year, we provide thousands of inspections and consultations to individuals and businesses throughout Clark County. Our programs fall into two categories. They are either required by state law as a mandated program or are non-mandated programs. The non-mandated programs are operated by the Clark County Combined Health District as a service to the community. These non-mandated programs support the provision of a fundamental public health service.

Highlighted Activities

Description of the Convey It, Inc. Salt Storage Depot Situation

A regional salt storage facility operates at 348 Tremont City Road on an approximately 3.0-acre area of property owned by the West Central Ohio Port Authority and is managed by Convey It, Inc., of Fort Wayne, Indiana. The Port Authority leased the property to Convey It, Inc., on September 24, 2003, and renewed the lease September 24, 2007, for a five-year period ending September 23, 2012. The Health District believes the 2009-2010 road salt season is the seventh year of operation of the facility. Approximately 40,000 tons of road salt was delivered to the site during the summer months of 2009 for distribution during the 2009-2010 road salt season.

Health District sampling and analysis of water wells in the area determined that sodium and chloride (both components of road salt) contamination is present at elevated levels in a well at 352 Tremont City Road and in a well at the Convey It, Inc. site. The Ohio Environmental Protection Agency (OEPA) field testing provided an estimate that as much as 2.08 tons of salt washed off of the uncovered salt pile, comprised of an estimated 4,000 tons of salt, during a 0.4-inch rain event in April, 2009. The salt storage facility is located over the Mad River buried valley aquifer. This aquifer is the sole source water supply for the City of Springfield. The Springfield City well field is located east of the Mad River and just north and south of Eagle City Road. The well field is about 2.7 miles from the salt storage facility and the salt storage facility is outside the estimated five-year time of travel to the well field. The well field wells produce up to 1,000 gallons of water per minute and the water treatment plant produces 12 million gallons of water per day on average. Springfield Water Treatment Plant personnel sampled and analyzed their monitoring wells, production wells and the water treatment plant raw water, as well as two private wells in the area, for sodium and chloride. At the time of their sampling and testing, there was no indication of contamination with either sodium or chloride. All sample results were well below the 250 mg/l MCL for chloride and in line with expected normal background levels.

Convey It, Inc. (continued)

Because of concerns voiced by the Health District and the OEPA, Convey It, Inc. hired Hull and Associates, Inc. of Dublin, Ohio, to prepare a Work Plan and Field Sampling and Analysis Plan to determine if groundwater has been impacted by any surface releases associated with the salt storage pile. Specifically, they are going to: 1) evaluate the concentrations of chemicals of concern (chloride and cyanide), if any, on the property; 2) determine whether groundwater quality on adjoining, down gradient properties has been impacted if it is determined that a release has occurred on the property; and 3) if the aquifer is impacted due to the release from the salt pile, determine hydrogeologic characteristics of the aquifer to the extent necessary to complete fate and transport modeling of the contaminant plume. The field sampling is expected to take place early in 2010.

School Inspection Program - Jarod's Law

Once heralded as one of the most comprehensive school safety programs in the country, Jarod's Law, or Ohio Revised Code Sections 3701.93 through 3701.936, was rescinded effective October 16, 2009. This law, and the rules implementing it, was the first revision of Ohio school safety requirements in thirty years and required local health departments to perform a more comprehensive health and safety inspection of all public and non-public chartered schools in their jurisdiction. The legislation also required school districts to respond to the reports prepared by local health departments by providing a written abatement plan for all problems found during a school inspection. One school inspection was required annually of public and non-public chartered schools to identify conditions dangerous to public health and safety present in or on the building or grounds. Inspections were to be conducted while school was in session. Under Jarod's Law, a total of 55 school inspections, 19 re-inspections, and 118 consultations were conducted throughout Clark County in 2009.

The law governing school inspections now reverts to Ohio Revised Code Section 3703.26 which requires semi-annual sanitary inspections of schools. Without Jarod's Law, however, there are no statewide standards to which schools must adhere.

Bed Bugs

Bed Bugs began to make an impact on the comfort of Clark County citizens, especially those living in the City of Springfield, in 2009. The Health District received over 100 telephone calls concerning infestations of the small insect during 2009. Bed bugs are not known to transmit human disease; therefore, the Health District consults rather than issues orders on this issue. In addition to private individuals, Health District staff consulted with Springfield Metropolitan Housing, the Springfield Police Department, a hospital equipment supply company, as well as fire and EMS officials, on this issue. Bed bugs often hitchhike into a home or business on used mattresses, furniture and/or personal belongings. The incidence of bed bug infestations are expected to increase over the next year or two because there is no magic bullet to resolve this problem. Thorough and continuous cleaning of infested and potentially infested clothing and furniture, along with the application of pesticides by professional pest control operators, is

Bedbugs (continued)

required to eliminate infested areas. Since bed bugs are becoming resistant to pesticides labeled for their control, the Ohio Department of Agriculture (ODA) requested the United States Environmental Protection Agency (USEPA) to allow the use of Propoxur (Baygon) in residences. Propoxur was once used to control cockroaches, flies, mosquitoes, and lawn and turf insects. It has been used in malaria control activities and in flea collars for pets. The Health District submitted a comment to USEPA in support of ODA's request to allow the use of Propoxur in homes and businesses to treat for bed bugs as this insecticide is reported to be 100% effective in their control.

Food Safety Program

Foodborne illnesses from causes such as E. coli and salmonella have the potential to affect thousands of people. Restaurants and other food establishments can be the source of these illnesses if they are not operated using health-protecting principles. Our inspectors check for proper food handling and storage and rodent and insect control.

Food Service Type	Licenses Issued	Standard, (CCP*) or (PR**) Inspections	Follow-Up Inspections	Consultations	Plans Reviewed
Food Service	433	804 (272 CCP)	195	823	24
Food Establishment	209	352 (12 PR)	91		
Temporary Food Service	170	214	1	19	N/A
Temporary Food Establishment	44				
Mobile Food Service	80	177	17	82	N/A
Mobile Food Establishment	4				
Vending	115	83	4	13	N/A

*CCP = Critical Control Point and **PR = Process Review

Water Program

- | | |
|--|--------------------------------|
| ? 77 new well permits issued | ? 21 alteration permits issued |
| ? 120 well inspections completed | ? 4 well dye tests performed |
| ? 67 consultations conducted | ? 16 sealing permits issued |
| ? 64 routine water samples collected | ? 0 re-inspections completed |
| ? 135 water samples collected for new or altered wells | |

Household Sewage Disposal or Treatment

Staff in this program review sewage disposal and septic system plans and inspect installation of new and replacement systems. Faulty or failing household sewage disposal or treatment systems may result in leakage of raw sewage into the ground and surface water threatening public health. In 2009, the Household Sewage Disposal or Treatment Program:

- | | |
|---|--|
| ? performed 218 lot reviews/layouts | ? inspected 29 scavenger trucks |
| ? approved 24 sanitation plot plans | ? performed 24 septic dye tests |
| ? issued 383 aerator permits | ? issued 16 scavenger registrations |
| ? performed 184 consultations | ? issued 38 sewage installer registrations |
| ? issued 102 sewage permits | ? issued 23 alteration permits |
| ? inspected 32 test holes | ? 119 site approval inspections |
| ? performed 38 aerator inspections | |
| ? performed 135 sewage final inspections on new installations and repairs | |

Home Environment

In 2009, we licensed 29 manufactured home parks, performed 61 inspections, 18 re-inspections, and 79 consultations. We approved 43 lot splits, performed 252 real estate inspections and 13 re-inspections, 19 campground inspections and 1 re-inspection, and issued 9 campground licenses and 0 temporary campground licenses. We also performed 140 mold consultations, 26 indoor air quality inspections with 123 consultations, 42 radon consultations and 4 mercury inspections with 18 mercury consultations.

Solid Waste Collection and Disposal

- ? 41 composting facility inspections; 3 licenses granted
- ? 25 construction and demolition debris landfill inspections; 2 licenses granted
- ? 108 refuse vehicle registrations granted; 107 refuse vehicles inspected
- ? 27 infectious waste, 39 salvage yard, 12 clean fill, 2 recycling/transfer station, 14 closed landfill, and 63 scrap tire inspections were performed
- ? 134 solid waste consultations were performed

Plumbing Program

Plumbing installations, including waste drains, vent piping, and water supply systems, are inspected each year for compliance with local regulations and the Ohio Plumbing Code. In 2009, the Plumbing Program:

- ? performed 718 inspections, including 566 final inspections
- ? issued 685 plumbing permits and 451 plumbing registrations
- ? performed 286 consultations and reviewed 183 plumbing plans
- ? recorded 2,722 backflow certifications

Swimming Pools/Spas

- ? 52 swimming pool licenses issued
- ? 257 swimming pool inspections conducted
- ? 49 swimming pool re-inspections conducted
- ? 73 swimming pool consultations conducted

Lead Poisoning Prevention and Control

Childhood lead poisoning is the most common pediatric disease with an environmental cause. It is also completely preventable. We work closely with the medical care community to get children under age six tested for lead levels in their blood. We also work closely with Lead Safe Springfield to have household lead hazards identified and controlled. In 2009, the Lead Poisoning Prevention and Control Program activity included:

- ? 3,701 children screened for lead; 77 had elevated blood lead levels
- ? 31 case management visits and 1,837 consultations made
- ? 12 primary prevention lead surveys conducted
- ? 23 public health lead risk assessments performed
- ? 23 lead hazard reduction orders issued; 23 brought into compliance
- ? 4 houses placarded as unfit for human habitation

Rabies Control/Animal Bites

- ? received 334 animal bite reports involving 234 dogs, 32 cats, 39 bats and 29 other wild animal contacts
- ? only 32.1% of the dogs, and 10% of the cats, were vaccinated against rabies at the time of the bite incident
- ? 184 bites were investigated with animal released from quarantine
- ? 107 specimens were sent to the Ohio Department of Health laboratory for testing with none of the animals testing positive, 104 animals testing negative and 3 animals deemed unsatisfactory for testing

Rabies Vaccination Clinic

In an effort to increase the number of dogs, cats and ferrets vaccinated against rabies, the Clark County Combined Health District continued to host low-cost rabies vaccination clinics. This year's clinic was held in cooperation with the Humane Society serving Clark County. A total of 88 animals, 74 dogs and 14 cats, were vaccinated at the clinic held September 8, 2009.

Tattoo/Body Piercing

- ? 7 tattoo establishment licenses were issued for the 2009 licensing year and 4 inspections conducted

Complaints Received

This program is citizen-driven. Clark County residents contact the health department when they perceive a public health problem. The staff determines whether we have jurisdiction over the complaint and, if so, investigates and, if necessary, issues orders to the responsible party to abate the nuisance. In 2009, Environmental Health Division staff received:

?	347	solid waste complaints; 259 determined to be valid
?	49	sewage complaints; 23 determined to be valid
?	149	food service complaints; 26 determined to be valid
?	87	animal complaints; 44 determined to be valid
?	24	insect and/or rodent complaints; 15 determined to be valid
?	17	ticks collected for testing; none tested positive for Rocky Mountain spotted fever
?	15	complaints regarding Manufactured Home Parks; 4 determined to be valid
?	43	water or sewage utilities complaints; 24 determined to be valid
?	12	plumbing complaints; 7 determined to be valid
?	1	school complaint; 0 determined to be valid
?	4	tattoo complaints; 1 determined to be valid
?	15	complaints of mosquito breeding sites; 7 determined to be valid
?	2	campground complaints; 1 determined to be valid
?	1	swimming pool complaint; 1 determined to be valid
?	32	miscellaneous complaints; 12 determined to be valid

Emergency Response Planning

The Environmental Health Division works with other health department staff, as well as other county agencies, in the preparation, review and continual updating of our emergency response plan. We plan for responding to natural disasters, as well as nuclear, biological and chemical attacks, on our community. We practice our ability to respond to these incidents with tabletop and functional exercises that occur several times each year.

Smoke-Free Workplace Law

Chapter 3794 of the Ohio Revised Code prohibits all forms of tobacco smoke in all public places and places of employment and in areas immediately adjacent to the ingress or egress of the public place or place of employment. Proprietors must assure that smoke does not enter the area where smoking is prohibited through entrances, ventilation systems, or other means. Under the law, no individual shall refuse to immediately discontinue smoking in a public place, place of employment, establishment, facility or outdoor area declared "nonsmoking", when requested to do so by the proprietor or any employee of the business. "No Smoking" signs shall be conspicuously posted in every public place and place of employment where smoking is prohibited by the law, including at each entrance to the public place or place of employment. In addition, all ashtrays and other receptacles used for disposing of smoking materials shall be removed from any area where smoking is prohibited.

Smoke-Free Workplace Law (continued)

During 2009, 101 complaints of violation of the Smoke-Free Workplace law were received, 78 on-site investigations were conducted, and 46 consultations were given. Civil fines levied are remitted to the Ohio Department of Health with 90% of those fines returned to the Health Department. The fines levied, and the amount of the fine received by the Health District, from the inception of the program through 2009 include:

Entity	Fines Levied	Received by CCCHD
Absolute Auto Sales	\$ 200.00	\$ 0.00
Amvets Post 25	\$ 200.00	\$ 180.00
Amvets Post 148	\$ 200.00	\$ 180.00
Ben's Corner Pub	\$ 200.00	\$ 0.00
Bill's Place	\$ 200.00	\$ 180.00
Cedar Pub	\$1,200.00	\$ 0.00
Che's Rustic Lounge	\$3,200.00	\$ 180.00
Eagles #3491	\$3,200.00	\$1,080.00
Harvester Inn	\$ 700.00	\$ 630.00
Horseshoe (The)	\$ 200.00	\$ 180.00
Kinsler's Café	\$1,200.00	\$ 0.00
Moose Lodge #2464	\$1,200.00	\$ 180.00
Ole Brick Tavern	\$ 200.00	\$ 0.00
Owl Bar	\$ 700.00	\$ 180.00
Paul's Corner Lounge	\$1,200.00	\$ 180.00
Sidetrax Tavern	\$1,200.00	\$ 0.00
Walden's Corner Pub	\$ 200.00	\$ 180.00

Daniel S. Chatfield, R.S., MSEH
Environmental Health Director

HELP ME GROW/EARLY CHILDHOOD DIVISION

The Help Me Grow/Early Childhood Division of the Clark County Combined Health District is located at the Town and Country Early Childhood Center, at 2430 Van Buren Avenue, Springfield. The Division includes the Child and Family Health Services Program, the Ohio Infant Mortality Reduction Initiative (M.O.M.S. program), and the Help Me Grow program of Clark County. Programs are staffed by public health nurses, licensed social workers, community health workers, and support staff. Services provided through these programs include:

Highlighted Activities

Prenatal Services

Pregnant families may access the M.O.M.S. (Making Outcomes More Successful) or the Help Me Grow programs to receive prenatal services. The OIMRI and CFHS programs, also known as the M.O.M.S. program, specifically reaches out to pregnant African-American, Hispanic and teen women in Springfield. Need for the program is based on the disparity between the infant mortality rates between African-American, Hispanic-Latino infants and white infants. Services are designed to prevent poor birth outcomes such as low birth weight and premature births. During 2009 (State program year), 177 women received services through the M.O.M.S. program.

Home Visits for Parents of Newborn Infants

Public Health Nurses provide home visits to families of newborns and offer information and support about newborn health. Families are helped to find a medical home if they do not already have one. Mothers who are teens or first time parents are targeted. Although the newborn home visiting program through Help Me Grow was discontinued by the Ohio Department of Health in June of 2009, the Health District was able to secure funds from the Ohio Children's Trust Fund to continue the program on a limited basis. During calendar year 2009, 1,461 babies were born in Clark County. 414 of these babies and their parents were visited within the first 6 weeks of life by nurses from the CCCHD, or 28% of total births.

Individual Family Service Planning (IFSP)

Service Coordinators talk with families about their goals and concerns about themselves and their children, and develop a plan with the family for reaching goals. Examples of family goals are: completing a parent's GED, securing employment, locating a stable home, meeting the child's medical needs, or finding an appropriate preschool situation for the child. If a child needs specialized services, the Service Coordinator helps the family to find and use these services.

During State Fiscal Year (SFY) 2009, it was expected by the Ohio Department of Health that 515 children and their families would be enrolled and have an active Individual Family Service Plan (IFSP) in the Help Me Grow system. During the program year, enrollment averaged 508, or 98.6% of the expected level.

Cumulatively, Help Me Grow served a total of 865 children during FY 2009. Of these, 312 were Part C eligible children with developmental delays or special medical conditions, and 553 were children considered to be at risk for developing delays due to environmental challenges.

Central Coordination of Birth to Three Services

As the Central Coordinating Site for the Help Me Grow Network in Clark County, the Help Me Grow/Early Childhood Division receives and processes referrals for services for pregnant families and families of children under age 3. Families seeking information and services are able to call the Help Me Grow phone number with the assurance that their concerns about their infants and young children will be addressed. Network providers during FY 2009 included the Community Mercy-Parent Infant Center, the Community Mercy Health Center at Keifer Alternative School, the Springfield City Schools Parents As Teachers program, and the Clark County MR/DD Early Intervention program. Referrals to the Help Me Grow Central Coordinating Site during FY 2009 averaged 63 per month, for a yearly total of 751 referrals received for services.

Parent Support Group

The Help Me Grow/Early Childhood Division offered a support group for parents of children ages birth to three during FY 2009. The group met at the Town and Country Early Childhood Center at 2430 Van Buren Ave. in Springfield, which is also the location of the Division offices.

- Families K.I.T. (Keeping It Together) Group: The K.I.T. group met monthly and offered families in the Help Me Grow or M.O.M.S. programs an opportunity for learning, networking, and mutual support. Child care and dinner were provided at each meeting, sometimes with the assistance of area churches and civic organizations. During the past year, topics included typical toddler behavior, fire safety, Fatherhood programs, budgeting and money management, healthy relationships (Within My Reach), Car Seat Safety, "Pretty Poisons", and Community Resources (Information & Referral). Attendance averaged 12 adults and 11 children at each meeting. Attendees were assisted with transportation to the meeting if needed.

Diane Van Auker, LSW
Help Me Grow/Early Childhood Director

NURSING DIVISION

Immunization Program

The year of 2009 was quite a year for the immunization program. First and foremost was the new vaccine for the H1N1 influenza! From the beginning of August through the end of December staff shifted into gear for the mass vaccination program. Preparations included visiting local provider's offices to establish their ability to receive and store the H1N1 vaccine. Tuesdays were designated for H1N1 clinics and all of the previous emergency preparedness training was placed in action. All of the staff and volunteers performed excellently in the project and are commended for their efforts to protect the health of this county's residents.

The Immunization Action Plan grant provided funding for the second full year for a WIC liaison position to focus on reviewing all WIC participants' immunization records. The IAP and WIC collaboration are important to the Healthy People 2010 initiative that 90% of all two year olds will be up-to-date with immunizations. The end of year 2009 rate evaluations for CCCHD indicate that 87% of children ages 24 through 35 months of age are current for their immunizations and 83% of the WIC population served are also up-to-date! The state of Ohio's rate for comparison is for 2007 is at 81.8%. Hopefully the continued teamwork approach and referral process the targeted 90% goal will be met in Clark County.

Total Client Encounters 11,054

Total Vaccines Administered 15,781

Immunization Action Program (IAP) *Clients 0-35 months of age*

Client Encounters 1,103

Other Immunizations *Clients 3-99 years of age*

Client Encounters 3,307

Vaccination Against Seasonal Influenza

Flu Shots Administered Through Flu Clinics (Seasonal) 6,634

Flu Clinics Held 16

Satellite Clinics (Goal: To Overcome Transportation Barriers)

Number of Immunization Clinics Held 124

Vaccines for Children (VFC) is a federally funded program which provides vaccine to children 0-18 years of age who may be uninsured or deemed as part of a high risk population. CCCHD is a provider of these vaccines for eligible clients.

VFC Eligible Clients Serviced 2,168

Vaccination Against H1N1 Influenza (not included in stats above)

H1N1 Shots Administered Through Clinics 24,545

H1N1 Clinics Held 26

Tuberculosis Clinic

The TB staff began 2009 with goals focusing on organization of the existing program to streamline our paperwork and better serve our varied clientele. We reorganized old patient files, updated currently used forms, and rearranged the TB clinic room. With the help of local translators, we expanded our Spanish-language information and maps so that the Latino population could easily understand and negotiate the chest x-ray procedure. Additionally, we attended World TB Day, the annual presentation by the Ohio Department of Health, to update and improve our understanding of TB research. Current TB staff is especially indebted to Brenda Eyler's extensive knowledge base and her willingness to share that information. Brenda's retirement on December 31, 2009, ends the TB year with new organizational challenges as we strive to maintain Brenda's high standards in TB surveillance and control in Clark County.

Submitted by Rebecca Bonerigo, RN, PHN

Total Clients Served	4,205
Clients Treated for Active Tuberculosis Disease	1
Preventive Treatments Initiated for Clients with Tuberculosis Infection	30
Mantoux Skin Tests Administered	3,395
TB Direct Observe Therapy (DOT) and Other Home Visits	229

Sexually Transmitted Disease (STD) Program

The STD program at the Health Department is offered on Monday nights from 5:30 to 7:30 pm and Thursday afternoons from 1:00 to 3:00 pm. It is open to all residents of Clark and surrounding counties. While testing for Gonorrhea, Chlamydia, Syphilis, and HIV are offered, the main emphasis is promoting responsible sexual behavior. Our HIV program covers 4 counties: Clark, Champaign, Miami and Shelby. These sites are located in local Health Departments, colleges, jails and drug treatment facilities. The HIV Healthy Relations program has been well received and has helped those diagnosed positive, both present and past, to deal with their status and get appropriate treatment.

Submitted by James Bonsell, RN Nursing Supervisor

Total Client Encounters	1,410
Clients Tests for Human Immunodeficiency Virus (HIV)	701
Condoms Distributed	20,373

Communicable Disease Reporting/Investigation

As with all other divisions of the health district, H1N1 had a major impact on the Communicable Disease Program. On June 11, 2009 the WHO declared a Pandemic as a reflection of the spread of the new H1N1 virus. Prior to that, on April 24th, the U.S Department of Health and Human Services, through the Centers for Disease Control and Prevention, confirmed a case of H1N1 influenza in the State. It was at that time in April, the Clark County Combined Health District began working intensely to protect the public we serve from this novel infection that was threatening to harm the world population.

The Communicable Disease Department became a frontline resource for both the community, many of whom were extremely fearful of the disease, and local medical practices struggling to educate, protect, screen, and treat patients for the illness. At that time there were many “unknowns” about the new strain of influenza, which was already responsible for many deaths in other countries, and by June, 50 states had reported novel H1N1 infection. By July 24th, the United States had reported 302 deaths, one of which was reported in Ohio. The Communicable Disease staff manned a 24 hour hotline for physicians to call to determine if authorization was appropriate for the testing of patients with influenza-like illnesses by the Ohio Department of Health. The staff collaborated with Springfield Regional Medical Laboratory in obtaining nasopharyngeal samples to be forwarded to ODH for confirmation of the disease. ODH developed an Algorithm for determination of those who would meet guidelines for testing that initially changed almost weekly. The Communicable Disease staff worked daily to keep practitioners informed with the most current information from ODH and guidelines provided by the CDC. Many community/public educational events were also provided in an attempt to keep Clark County residents as informed as possible. The staff served as a resource regarding transmission, symptoms, prevention, exclusion from school, the use of antiviral medication, and priorities for vaccine when it became available in October.

In 2009 cases of Pertussis had a decline from 2008. There were reported cases of Shigella in several daycare centers over the summer months. The CD staff worked with those daycare centers to provide education and testing of contacts through the Ohio Department of Health.

Submitted by Carolyn Gillam, RN, Infectious Disease

The following page lists reportable diseases for 2009.

Epidemiology

The Clark County Combined Health District continuously collects and analyzes data from an ever-increasing array of sources to find indicators of our community's health status. This ongoing process has identified aspects of our community's health about which relatively little is known. In order to simultaneously learn more about a variety of the health topics singled out for further investigation, the Health District conducted a county-wide administration of the Youth Risk Behavior Survey (YRBS) in 2009.

This survey of a representative sample of public high school students gathered information about risky behaviors that contribute to the most important health problems that this subpopulation experiences. These topics included questions about violence, unintentional injuries, tobacco use, alcohol and drug use, sexual behaviors, unhealthy dietary behaviors, inadequate physical activity, and other behaviors. The results of this survey represented Clark County public high school students as a group and did not single out how individuals answered. Additionally, two school districts within the county opted to have their entire student bodies surveyed, which allowed their results to be reported by individual high schools.

The principle usefulness of these county-wide YRBS results rests in their comparison to other YRBS results derived from the survey of other populations, such as those conducted for Ohio and the United States in 2007. Using these other results for reference, statistical tests were employed to determine if Clark County students' answers were different by a statistically significant level. These analyses highlighted the topic areas in which our students behaved particularly favorably or unfavorably compared to the state and nation.

It is uncommon for a local public health district serving a population the size of Clark County to be able accomplish such an endeavor, and this project would not have been possible without the essential support of our partners, chief among whom were the public school districts in Clark County themselves. This survey of Clark County high school students represents a special opportunity for the Health District, the school districts, and all stakeholders and community members to learn about the health, behaviors, lifestyle, and environment of an important subset of our community. Moreover, a preponderance of research has demonstrated that many of these inter-related health behaviors established before adulthood persist into adulthood and contribute to our community's leading causes of death and disability, so these results can to some degree indicate the health of our community overall. These survey results can be used to create awareness, set goals or formulate policies, and as justification for programming to address any issues identified. The complete 2009 Clark County YRBS results and a summary of the highlights of these results are both available on the Clark County Combined Health District's website: www.ccchd.com.

Submitted by Kevin Aston, MPH, Epidemiologist

Health Screenings

Health Screenings through walk-in clinic or health fairs are provided to promote wellness and establish healthy habits in individuals' lives, as well as identify cases where further medical follow up is of utmost importance. Cardiovascular diseases are the leading causes of death in Clark County with an age adjusted rate of 227.5 compared to 210.3 deaths per 100,000 population in the US. Behavior Risk Factor Surveillance System Indicators note that 28% of adults in Clark County have high blood pressure, compared with 26.3% in Ohio. Likewise, diabetes continues to be a concern for Clark County residents, with a rate of 6.8% which is also slightly higher than Ohio's rate. Blood pressure and diabetic screenings with an opportunity to discuss results, lifestyle influences and medication questions will continue to be available at the Health District. Identification of these diseases can provide opportunity for treatment and lifestyle modification that can prevent or delay complications from these chronic illnesses.

Offering pregnancy tests are an important step in facilitating prenatal care, which is necessary to allow for best outcomes for mother and child. Many women need a proof of pregnancy in order to apply for medical coverage through an Ohio Medicaid program through Department of Jobs and Family Services. Once this health coverage has been established, prenatal care through a physician's office can be sought. Identifying a pregnancy in the early stages can also provide opportunity for a woman to make decisions that will benefit her child. Clients are given information about the importance of prenatal vitamins, the dangers of smoking, alcohol or drug use during the pregnancy, the multiple community services available to families in Clark County and other valuable information. This information is undoubtedly reinforced throughout the pregnancy by many different sources, such as family, medical providers, child birth classes, etc.

Submitted by Christina Conover, RN

Blood Pressure Checks	695
Blood Sugar/Diabetic Screenings	220
Pregnancy Tests	117
Other/Cholesterol Screens	37

Home Visits

Home visits are provided throughout the county and the city by public health nurses and health educators through a variety of programs, including the Bureau for Children with Medical Handicaps (BCMh), SIDS/Bereavement, Lactation, Immunizations which includes influenza vaccinations for homebound residents of Clark County, Tuberculosis education and medication administration, as well as general health promotion.

Additional home visits were provided this year to immunize homebound residents and severely ill BCMh children with the H1N1 vaccine.

Although the number of home visits for the BCMh program is lower this year compared to 2008, the number of clients added to the caseload has increased by 64%. Currently there are 460 children on our BCMh caseload. The majority of those cases were added in the second half of the year. We attribute this increase to the changes in the economy and the need for families to seek additional or alternate methods for medical assistance.

The Lactation program has seen an increase in attendance to the breastfeeding classes since the Health District formed a partnership with the Parent Infant Center to provide classes at their site.

Submitted by Sandy Miller, RN, Nursing Supervisor

BCMh	289
Lactation	34
SIDS/Bereavement	16

School Services

The Health District staff, along with volunteers from the Medical Reserve Corps, assists school personnel with routine student health screenings at the public and private schools in Springfield and Clark County. Children identified with vision problems, and/or hearing problems are referred to a physician for follow-up. The Lions Club, together with local providers, has a Vision Assistance Program available for children and a few adults who may need financial assistance in obtaining glasses. Referrals for this program are taken through the Health District. Families with little or no insurance are assisted through the BCMh program for hearing problems. The health district staff also serves as a resource to the schools for information regarding communicable diseases, lice issues, and immunization updates. Additionally, public health nurses check all senior records each year to ensure that the students are up-to-date with their immunizations. A letter, which includes the student's immunizations dates, is sent to the family with recommendations made based on current guidelines.

School Services (continued)

The Clark County Combined Health District provided vision and hearing screenings for sixty buildings. These sites include city and county schools as well as private and charter schools and pre-schools. Additionally we assisted the Ohio Department of Health with Body Mass Index (BMI) screenings in the county schools this year.

Submitted by Sandy Miller, RN, Nursing Supervisor

Vision Screenings	10,123
Referrals	1,406
Hearing Screenings	8,970
Referrals	930
Vision Assistance Referrals	44

Lice Program

The Lice Control and Education (LCE) program was formed through the Department of Jobs and Family Services (DJFS) and the Clark County Combined Health District to provide assistance to low income families with children that have chronic head lice issues in Clark County. The LCE program works very closely with the school systems in Clark County to assure children stay in school or come back to school quickly after contracting head lice. A child missing one day of school takes, on average, three days to make up the work and knowledge missed; therefore the LCE is a powerful asset in our child's education. The LCE program also works with the schools in mediations with parents who are allowing the children to miss too many days of school. Many times these families also have other problems with the school system, such as poor grades, hygiene, bullying, or below-level parenting skills. Some have come to a point where the family and school are frustrated with each other and cannot reach a resolution, but the family will allow home visits from an impartial nurse to assist with other issues in the home.

The Lice Control and Education program nurse does not just come in and help with lice, but provides assessment of the home and family. Other agencies are often brought in to provide their expertise. Families have been connected to parenting classes, given resources for hygiene products, found help with newborn baby needs, received assistance for catching up with needed immunizations, aided in finding food pantries to help support the family, and helped the communication between the parents and the schools be of a positive, non-confrontational nature.

Lice Program (continued)

The social aspect of lice can also be very damaging to children and families. The LCE program visits the Springfield City Schools and presents a “what is lice?” program in an effort to dispel some of the stigma and myths surrounding head lice. Some topics include why some people get lice while others do not and how lice can be properly eliminated. Children respond very well to this program and are given a pre and post test to measure knowledge gained. The school nurse door is open so the children know they can feel comfortable speaking with her if they have head lice. This dialogue with the school nurse may also open doors to other issues the school needs to be made aware of in the student’s lives.

The LCE program also helps many of our area agencies in learning the proper way to deal with the issue of head lice. Gibault, The Area Agency on Aging, several MRDD homes, many different Head Start facilities, the juvenile court system, several preschools, and CSP have all used the LCE program to get information to clients, assistance to clients, and training sessions for the employees or parents. This past year the Champaign County DJFS has also utilized our program for information and assistance with their clients. Often lice are a “gateway” problem; families have other barriers that stop them from leading productive roles in society. These families recognize the LCE is here to help in a non-threatening manner and are apt to accept advice, listen to suggestions, and often improve the lives of their children and themselves. Home visits in this program have continued to grow and more and more people are becoming aware of and accepting the program’s help.

Our office head checks have also turned a corner from “get in and get out for a school note” to families realizing that we are here to help educate and to be a resource for the families when they visit the Health District. Many times they not only receive lice education but education on all our other programs such as immunization or environmental services. Several organizations and schools have requested the LCE program come to their agency’s health fair. This program has proven itself to be an asset to our community and our schools.

Submitted by Michelle Rhoads, LPN, Lice Program Coordinator

Lice Checks Done Through Home Visits	240
Lice Treatments Provided During Home Visits	817
Health Checks Completed During Walk-In Clinics at CCCHD	440
Health Checks Completed at Schools/Agencies	873
Lice Presentations and Education	18
Number of Individuals in Attendance	15

Health Education

The Health Education Division of Nursing continues to promote the health department throughout the entire year in a professional and positive way to the Clark County Community. Our goals continue to be educating the community on Prevention of disease and safety as well as how the CCCHD can assist them in their needs.

Tobacco Prevention

Public Health Nurse, Kellie Adams, takes the lead on our education program that is conducted within the 3rd grade classrooms of various schools within the county and city. In addition, all referrals that are received for assistance with smoking cessation programs she sends to Mercy Reach where their program provides the need. The CCCHD continues to be apart of the 9 county Tobacco Coalition held in Greene County. Also at all health fairs and community events, tobacco material is taken out and provided as needed.

Diabetes Support Group

Darlene Yeley leads our Diabetes Support Group in collaboration with the Clark Champaign Diabetes Association. This group of 20 or more meet regularly each month with a guest speaker and guidance to assist them in their efforts to carry on a normal life. They participated in the annual Diabetes Expo at the Clark County Fairgrounds.

Physical Wellness Program

Lynne Turner assisted in increasing outreach with various physical fitness opportunities they include Zumba and Kickboxing sessions at the South Vienna Schools all day Health Fair. A 2 week College for Kids class at Clark State this summer that incorporated exercise, fitness, nutrition and sports training. Finally, a week long dance and movement class for MRDD students at the Springfield Art Museum Infusion Camp.

Health Promotion

The CCCHD continues to partner with outside agencies as we work on various issues within our community, one of those issues being childhood obesity. Fit for Tomorrow program is an ongoing partnership with the YMCA and the Rocking Horse in which our role is to provide nutrition classes for kids with topics such as healthy snacks, drinks, and shopping for healthy foods.

Health Education (continued)

Each year our agency participates in over 75 health fairs, festival, community events, special speaking engagements, and individual request. We held an Open House this year to open our new addition to the building that was built by CCCTC; each dept still displayed their program; however the goal was to open the new building to all. We continue to provide communicable Disease and First Aid training classes for Daycare providers, outside agencies and Staff throughout the year. This year the CCCHD received a grant from the Ohio Minority Health Commission to provide events in April for Minority Health Month. This was in partnership with the American Red Cross and Second Harvest Food Bank. The event for the CCCHD began the First week of April that Thursday an evening women's clinic was held for a complete checkup including pap smears at no cost to the client, 9 women were tested. The following day, a Minority health fair was held at St. John Missionary Baptist Church. Many screenings were held including PSA's and vouchers provided for free mammograms, as well as over 18 community agencies providing information and assistance for families. On day three of the Minority Health Event, a dental clinic was open by appointment at no cost. Assessments and minor dental work were provided by the dentist and referrals were made.

Safe Communities Grant

Safe Communities receives grant funding from the Ohio Department of Public Safety which funds the position for the Health Educator/Safe Communities Coordinator. The Coalition continues to do new and things each year. This grant year we received additional dollars to contract with Ricky Birt and group to assist with activities and programming for Ohio SADD. The first program was the Lights for Life kickoff at the Statehouse in Columbus. Students from all over the state gathered together to listen to a great speaker on traffic safety prevention, and then met with transportation committee legislators on the importance of a primary seatbelt law and no texting and driving. Our community partnerships continue to be our biggest strengths each and every year as we continue with Seat belt checks, school surveys, mock crashes, bike camp, law camp etc. Finally, this year we worked hard with Motorcycle Safety and our partnership with Competition Accessories and Mid Ohio Harley Davidson. As a result we participated in 3 Poker Runs, 2 employee events and Harleys Davidson's Cruise-in downtown in Springfield. All were a huge success and we will continue them next year.

We appreciate any opportunity to continue our involvement with our community and the efforts to keep it safe. We welcome request to share information about Public Health concerns with Clark County residents.

Submitted by Anita Biles, BS, Health Educator

Comments

The year of 2009 had gains and losses for the Nursing Division. The Anthem Foundation was the primary funder for the part-time dental clinic at the CCCHD from April 2007 through August 2009. This clinic was opened in response to a Dental Health Professional Shortage Areas in Clark County and the large number of residents with dental needs who report to the area emergency rooms. Due to funding changes, the dental clinic closed but our facility became available to house the Salud Dental Clinic, from Allen County Health Partners.

Gains for 2009 included the development of many strengths within the Health District's response to H1N1. The education, community collaboration and mass vaccination challenges were met with force and continue to result in a healthier community. We look forward to continuing

The Nursing and Health Services Division of the Health District continues to enjoy serving clients in various programs, taking opportunities for one on one education through clinics, serving as instructors and presenters for group education, introducing students to public health and being deliberate in program planning with evaluation. We embrace the challenges that will present in 2010. Thank you for your continued support.

Christina S. Conover, RN, BSN
Director of Nursing

VITAL STATISTICS

During the summer months of 2009, the Vital Statistics office was moved from a corner of the building to an office that is directly accessible from the lobby. The move provides for a larger work area as well as easier access for customers to obtain birth and death certificates.

All Vital Statistics staff assisted with H1N1 clinics through the fall and into the New Year. They acted as greeters, screeners, helped with registration, and entered data.

On October 16, 2009 we were required by the State of Ohio to charge an additional \$5.00 fee for each birth and death certificate we issue; \$4.00 of the fee is sent to the Ohio Department of Health. Unfortunately, this raised the cost for a certified record from \$17.00 to \$22.00 each.

Our statistics for 2009 are as follows:

Birth Certificates Issued	7,672
Death Certificates Issued	6,435
Birth Certificates Registered	1,461
Death Certificates Registered	1,488

Springfield and Clark County has a benefactor who purchases birth certificates for the homeless in an effort to help them find housing and jobs. Through the benefactor's generosity, we issued 83 birth certificates to our homeless population.

The Ohio Department of Health/Vital Statistics Division continues to convert birth records for the entire state in order to provide these records online. The ultimate goal is to provide access to Ohio vital records from any local health district within the State, while at the same time strengthening security procedures as outlined by state and federal government. The target date for completion is December 2010 or soon thereafter.

Your local Vital Statistics division strives to provide efficient customer service and to protect the vital records of Springfield and Clark County for current and future use. We also assist the public seeking genealogy information.

Three (3) year comparative birth and death data is available on the following pages.

Jacque Thornburg, Administrative Assistant 3
Vital Statistics Supervisor

Jackie Boggs, Registrar

Barbara Huffman, Deputy Registrar

**3 YEAR COMPARATIVE
BIRTH DATA**

<i>Total Births</i>	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	Y-T-D Total	Previous 12 Month Avg
2009	93	106	102	121	160	86	112	146	128	103	132	170	1,459	122
2008	89	118	133	132	117	98	136	105	127	166	93	214	1,528	127
2007	63	111	161	142	99	116	127	118	95	97	300	227	1,656	138
<i>No. of LBW Newborns</i>														
2009	8	7	6	10	17	7	9	11	14	14	13	16	132	11
2008	4	11	10	11	11	11	13	7	9	9	11	17	124	10
2007	6	10	12	13	7	10	9	3	6	11	28	12	127	11
2009	8.60%	6.60%	5.88%	8.26%	10.63%	8.14%	8.04%	7.53%	10.94%	13.59%	9.85%	9.41%	9.05%	9.05%
2008	4.49%	9.32%	7.52%	8.33%	9.40%	11.22%	9.56%	6.67%	7.09%	5.42%	11.83%	7.94%	8.12%	8.12%
2007	9.52%	9.01%	7.45%	9.15%	7.07%	8.62%	7.09%	2.54%	6.32%	11.34%	9.33%	5.29%	7.67%	7.67%
<i>Mothers' Ages</i>														
<i>Age 0-14</i>														
2009	1	1	0	1	0	0	0	0	0	1	0	0	4	0.3
2008	0	0	0	0	0	1	0	0	0	0	0	0	1	0.1
2007	0	1	1	1	0	0	0	0	0	0	1	0	4	0.3
<i>Age 15-19</i>														
2009	21	18	14	27	25	11	26	30	19	24	33	31	279	23
2008	19	22	21	24	21	16	18	13	19	21	17	43	254	21
2007	10	21	30	20	18	16	25	13	15	22	53	36	279	23
<i>Age 20-24</i>														
2009	28	38	30	36	62	35	46	37	42	31	40	52	477	40
2008	38	43	48	49	44	40	54	31	48	63	29	75	562	47
2007	27	42	51	37	34	46	45	42	31	27	111	70	563	47
<i>Age 25+</i>														
2009	43	49	58	57	73	40	40	79	67	47	59	87	699	58
2008	32	53	64	59	52	41	64	61	60	82	47	96	711	59
2007	26	47	79	84	47	54	57	63	49	48	135	121	810	68

Dec

**3 YEAR COMPARATIVE
DEATH DATA**

<i>Causes of Death - 2009</i>	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	Y-T-D Total	Previous 12 Month Avg	% of Cause to Total
Cancer	30	23	28	17	25	31	26	34	28	18	19	28	307	25	20.48%
Heart	73	39	59	34	36	34	31	41	31	23	29	34	464	39	30.95%
Cerebral (Stroke)	13	19	8	2	5	10	5	13	8	3	8	12	106	9	7.07%
Suicides	0	1	1	2	2	3	2	1	3	2	1	0	18	2	
Homicides	1	0	1	0	0	1	0	0	0	1	0	0	4	0	0.27%
AIDS	0	0	0	0	0	1	0	0	0	0	0	0	1	0	
Accidents	4	7	2	1	3	2	5	3	6	1	3	2	39	3	2.60%
Fetal	2	0	1	0	2	2	1	0	0	0	1	1	10	1	0.67%
Other	43	48	59	29	43	47	62	42	37	37	43	51	541	44	36.09%
Pending	0	0	0	0	0	0	0	0	0	1	3	5	9	0	
Totals	166	137	159	85	116	131	132	134	113	86	107	133	1,499	124	98.13%
<i>Causes of Death - 2008</i>	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	Y-T-D Total	Previous 12 Month Avg	% of Cause to Total
Cancer	38	26	26	28	28	15	25	21	29	18	22	19	295	25	19.32%
Heart	58	48	52	44	34	27	46	36	45	35	31	37	493	41	32.29%
Cerebral (Stroke)	7	5	9	13	8	11	8	9	7	7	11	11	106	9	6.94%
Suicides	1	4	1	1	1	0	1	0	1	2	2	1	15	1	0.98%
Homicides	1	0	0	0	1	1	1	0	2	0	0	0	6	1	0.39%
AIDS	0	0	1	0	0	0	0	0	0	0	0	0	1	0	0.07%
Accidents	11	3	6	5	6	6	3	2	5	4	1	4	56	5	3.67%
Fetal	1	0	1	0	1	1	0	0	0	0	0	1	5	0	0.33%
Other	58	37	56	35	50	44	57	40	38	46	37	49	547	47	35.82%
Pending	0	0	0	0	1	2	0	0	0	0	0	0	3	0	0.20%
Totals	175	123	152	126	130	107	141	108	127	112	104	122	1,527	129	100.00%
<i>Causes of Death - 2007</i>	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	Y-T-D Total	Previous 12 Month Avg	% of Cause to Total
Cancer	19	30	39	25	27	32	32	31	31	29	25	20	340	30	22.19%
Heart	18	44	55	36	34	4	40	36	28	26	35	33	389	32	25.39%
Cerebral (Stroke)	14	13	10	11	9	8	6	9	15	10	10	12	127	10	8.29%
Suicides	0	2	2	2	2	3	3	0	1	2	1	0	18	2	1.17%
Homicides	1	0	0	1	1	3	0	0	0	0	1	0	7	1	0.46%
AIDS	0	0	1	0	1	0	1	0	0	1	0	0	4	0	0.26%
Accidents	0	3	9	3	2	5	4	0	2	2	2	7	39	3	2.55%
Fetal	2	1	1	0	0	0	0	1	0	0	0	1	6	1	0.39%
Other	44	68	55	51	37	46	39	44	54	62	58	44	602	50	39.30%
Pending	0	0	0	0	0	0	0	0	0	0	0	0	0	-	0.00%
Totals	98	161	172	129	113	101	125	121	131	132	132	117	1,532	130	100.00%

* When applicable, current monthly figure

Oct

2008 HEALTH DISTRICT EMPLOYEES

Charles A. Patterson, Health Commissioner

ADMINISTRATION

Jacquie Thornburg
Administrative Assistant

Judy Andrews
James Applin #
Jackie Boggs
Rick Holbrook
Barbara Huffman
Shannon Jacobs
Christopher Snyder
Brenda Thornberry
Dorothy Toadvine
Jodi Wood

ENVIRONMENTAL

Daniel Chatfield
Director

Robin Barry*
Regina Cahill
Charlene Culp
Jerry Ford
Roger Franks
Robert Ingoldsby*
Anne Kaup-Fett
Chad Kimes
Rita Lewis
Jeniece Lyons #
Rick Miller
Rebecca Reed
Larry Shaffer
Raymond Sparks
Kelly Stickney
Jema Sullivan

NURSING

Christina Conover
Director

Kellie Adams
Kevin Aston
Marva Beaver
Anita Biles
Jo Ann Bodenmiller
Rebecca Bonerigo
James Bonsell
Vince Carter
Sandra Cochran
Robert DeBell #
Diana Duncan
Molly Dunn*
Brenda Eycler*
Tina Fisher
Jannifer Fraley
Patty Free
Carolyn Gillam
Dee Hale*
Gayle Harris
Jo Holt
Cari Landers-O'Neal*
Sandy Miller
Lisa Palmer
Lisa Parsons
Angela Ratliff*
Shannon Rausch
Michelle Rhoads
Ann Richardson
Jennie Rohrer
Weston Sale
Lynne Turner
Cheryl Williams
Jo Windon
Cynthia Wingert
Darlene Yeley

HELP ME GROW

Diane Van Auker
Director

Sue Arnold*
Stefanie Aviles
Karen Brubaker
Carolyn Eichelberger
Tammy Everhart
Shelley Kabbes
Mary Kopp
Lori Lambert
Mary McNier
Carolyn Midkiff
Kris Miles
Carlisa Parker
Donyale Smith
Lisa Van Wey

*Left the employ of or retired from the Health District in 2009

#Hired by the Health District in 2009