

AGENDA
CLARK COUNTY COMBINED HEALTH DISTRICT
BOARD OF HEALTH
May 19, 2022
6:00 p.m.

1. Call Meeting to Order
2. Roll Call
3. Minutes of the April 21, 2022 Meeting
4. Activity Reports:
 - A. Nursing Division (*Christina Conover*)
 - B. Environmental Division (*Larry Shaffer*)
 - C. Early Childhood Division (*Lori Lambert*)
 - D. Women, Infants & Children Division (*Emily Thomas*)
 - E. Health Planning (*Chris Cook*)
 - F. Vital Statistics (*Shannon Hackathorne*)
 - G. Financial Report (*Lindsey Hardacre*)
 - H. Legislative Update (*Charles Patterson*)
5. Monthly Vouchers (*Lindsey Hardacre*)
 - A. Payment Approval
 - B. Transfers/Advances, *if necessary*
6. Public Comment
7. Special Report
8. Old Business
9. New Business:
 - A. Variance Request – 1601 East Home Road (*Larry Shaffer*)
 - B. FCFC Shared Funding Agreement (*Charles Patterson*)
 - C. Safe Communities Grant Submission (*Chris Cook*)
 - D. Community Health Foundation CHIP Grant Submissions (*Chris Cook*)
 - E. Personnel Actions
 - 1) Nursing Career Ladder (*Christina Conover*)
 - 2) Home Visiting Tiers (*Lori Lambert*)
 - 3) Interpreter Positions (*Christina Conover*)
 - 4) Billing Support Assistant (*Christina Conover*)
 - 5) Fiscal Officer Position (*Charles Patterson*)
 - 6) Minority Health Resource Coordinator (*Charles Patterson*)
 - 7) Position Upgrades
 1. Megan Davis (*Larry Shaffer*)
 2. Jacob Clark (*Chris Cook*)
 - F. Healthcare/Ancillary Insurance (*Charles Patterson*)
10. Health Commissioner's Comments
 - A. Annual Board of Health Training
 - B. Special Meeting in July
11. Execute Session – if necessary
12. Additional Business – if necessary
13. Next Meeting Date – Thursday, June 16, 2022

Adjournment

Clark County Combined Health District
Board of Health Minutes
April 21, 2022

Board members present: Catherine Crompton, Valerie Moore, Dala DeWitt, Dana King, Bernadette deGuzman, Tyler Walters and Scott Griffith.

Board members absent: none.

Staff present: Charles Patterson, Health Commissioner; Larry Shaffer, Environmental Health Director; Lori Lambert, Early Childhood Director; Emily Thomas, WIC Director; Lindsey Hardacre, Fiscal Officer; Chris Cook, Assistant Health Commissioner; Dr. Laura Thompson, Medical Director; Stephanie Johnson, Emergency Preparedness Coordinator; Nate Smith, Communications Coordinator and Jennifer Michaelson, Registered Environmental Health Specialist.

Guests: none.

Minutes: The minutes of the Board of Health meeting held on March 17, 2022, were approved as submitted.

Activity Reports

Nursing: Mr. Patterson referred to the communicable disease report included in the board packet. He said that there is some continued data standardization so the total number under reportable conditions no longer includes suspect cases which keeps us adhering to how the state and other counties count the cases. He said it appears that our chlamydia cases which were decreasing may be back on the rise. He said that this may be due to the increased volume of clients we are seeing in our reproductive health clinic, but it is something that we will continue to watch. He said that we are no longer providing services for the sexual health and wellness clinic in Montgomery County as of April 1, 2022. He said that we did lose a nurse and billing clerk in our Children with Medical Handicaps program, but we have posted for those open positions. He said that as we are able to move our communicable disease staff from strictly COVID-19 we will be looking more at tuberculosis. He said that we want to find the cases early to protect the public from exposure.

Environmental Health: Mr. Shaffer introduced Ms. Jennifer Michaelson, who is our new Registered Environmental Health Specialist. He shared that she grew up in New Concord but has lived in Clark County for nearly 20 years. She graduated from Muskingham University where she studied biology and participated in the southeastern Ohio symphony orchestra. He said that she comes to us with over 22 years of public health experience, most recently with Madison County Public Health.

Mr. Shaffer said to follow up from the meeting last month we have not heard back from the residents on Enon Xenia Road regarding the sewage rules variance request. He said that we have reached out twice, leaving messages on both attempts without a return call to date.

Mr. Shaffer noted that we removed 532 Aberfelda Drive from the agenda tonight as the homeowner had his aerator repaired and it seems to be working properly at this time.

Mr. Shaffer said that we have started working with Mr. Gray and other staff with the Clark County Information Systems team to map septic systems on the graphic information system (GIS) and referred to

the report included in the board packet. He said this mapping system will allow us to see where septic systems are located and what kind of systems they are. He said the red dot on the report indicates a soil-based system and the blue dot indicates a discharging aerator. He said that we also can link all the documents we have for a specific septic system to that done and can pull the documents from our devices while in the field. Mr. Walters asked how many dots are on the map. Mr. Shaffer said that right now it shows about 1,100 soil-based systems and over 600 aerators. He said that we estimate there to be over 20,000 septic systems in Clark County so we have a long way to go issuing operations permits.

Early Childhood: Ms. Lambert said that the Young Womens Mission awarded us \$275.00 for cleaning supplies for our families which is a great benefit. She said that one of our home visitors who recently left to work in the hospital system has decided to return and is therefore back with us as a home visitor. She said that every quarter she is responsible for sending the Ohio Department of Health success stories from each program. She shared the partial story of a pregnant mom who had an older child and signed up for the WIC program and Ms. Nina St. Luce referred her to the Help Me Grow program. She said that this program helped her family in so many ways, first with Ms. Oliver who was the best home visitor providing her with information on getting ready to be a new mother. She said that her healthy baby girl was born in March, and she wanted to try breastfeeding. She said the lactation specialist at WIC, Ms. Safiyyah Truss, helped her as best she could. She said that her body would not cooperate, and she did end up having to switch to formula, but she felt very much supported during a challenging time. She said that she loves that the health department provided her with diapers, wipes, books, a pack n play and so many other educational items and believes all first-time mothers should be in this program. Ms. Lambert said that it is not a requirement to be a first time in the program, but data showed that about 45% of the participants were first time mothers last year. She continued to share the success story saying the client said that she loved setting goals as part of the program and Ms. Oliver kept her accountable to reaching her goals. She said that she felt comfortable with Ms. Oliver and even opened up to her about some postpartum experiences. She said her postpartum issues were short lived, but she knew something was off and had learned about postpartum during her visits. She said the Help Me Grow program has given her tools and resources to be a successful new mother. Ms. Lambert said this shows the collaboration between the Early Childhood and WIC programs which is such a benefit to families.

WIC: Ms. Thomas said that we have remained above the assigned caseload for our county and did see a nice increase in March. She said that out of the 74 projects in the state we were one of the three above the assigned caseload. She said at the beginning of the month we were notified that Groceryland was approved as a certified WIC provider, which is another great option for our participants.

Health Planning: Mr. Cook said that one of the goals of the Data First project was to focus on census track 2 to make vaccines more available so we planned a vaccination clinic at the Rocking Horse Community Health Center, which was a three (3) hour event. This event was held on April 1 and was very successful. He referred Board members to a new data presentation tool called Microsoft Sway. This is a new way of presenting data in a digestible format for the general public and partner agencies. The link to the Sway website was included in the Board packet. He said that the site contains some pictures and an idea of what the event was like. He said that we vaccinated 74 individuals and gave away gift cards as incentives as well as healthy foods and snacks. He said the entire project which has reached its conclusion was very beneficial for the community and the staff.

Mr. Cook said that we are still looking at a July publication date for the Community Health Assessment. He referred to a link included in the board packet to a local public health systems assessment and

encouraged the board members to complete that survey. This particular assessment is a lookback at the ten (10) public health essential services in the last community health assessment and gives the opportunity to rank the progress while identifying additional strengths and weaknesses in our entire public health and healthcare delivery system.

Mr. Cook said that our workplace wellness Life Coach, Mr. Jerry Newport, has started seeing staff. He said that this is one of the initiatives born out of the CDC Workforce Development fund which is intended to highlight our commitment to retaining our employees by recognizing the impact of the last two (2) years. This grant is also to be used for workforce expansion because of the pandemic. He said that CCCHD decided to do more than just talk about the needs our employees have and move to have someone on site who can meet with staff to talk about work-life balance and what would make them successful with goals in their personal and work life. He said that Mr. Newport will be available three (3) days a week between the Home Road and WIC/EC building and we are excited to have staff interact with him.

Mr. Cook reminded the board of the Minority Health Fair coming up on April 30, 2022.

Vital Statistics: Mr. Patterson noted that we did have 18 COVID-19 deaths reflected in the March report. He said that otherwise, there was nothing new or unusual to report.

Financial Report: Ms. Hardacre said that we have reached out to the county auditor about the homestead rollback funds and are waiting to hear back. Mr. Walters asked how much we will receive. Ms. Hardacre said that we will receive about \$133,000.00.

Legislative Update: Mr. Patterson said that HB463 is a bill that would remove the District Advisory Councils and have the County Commission appoint Board of Health members. He said that we received noticed notice today that SB324 is the companion bill to HB463 which is to eliminate the District Advisory Councils. He said that four (4) of the seven (7) Board of Health members are appointments by the District Advisory Council and three (3) by the City of Springfield. He said the District Advisory Council has been around for many years and exists because the township trustees, village councils and cities are responsible to pay for health districts. He said the county commission is not responsible for paying for the health district. He said that it not too soon to weigh in with our state representatives. Mr. Walters asked to clarify his understanding if the commission wants to pass bills to take the Board of Health appointments away from the District Advisory Council and City Commission to have them fall under county jurisdiction. Mr. Patterson said that he does not believe they will take it away from the cities as they are home rule but will take it away from the townships and villages, which is the District Advisory Council. Mr. Walters asked if the thought process is to have the money fall under the authority of the county commission. Mr. Patterson said initially they want to have the authority to appoint the Board of Health members under the county commission. Mr. Walters asked if we are our own fiscal agent. Mr. Patterson said that the county auditor and treasurer serve as our fiscal agents.

Vouchers: Ms. Hardacre presented the bills.

R 34-22 A resolution approving payment of the bills from March 1, 2022 to March 31, 2022.

Motioned by: Mr. Walters

Seconded by: Dr. King

Dr. deGuzman Yes

Mr. Griffith Yes

Mr. Walters Yes

Ms. Moore	Yes	
Dr. Crompton	Yes	
Ms. DeWitt	Yes	
Dr. King	Yes	Motion carried.

Transfers/Advances: Ms. Hardacre said that we are requesting a budgeted transfer from the General Revenue Fund to the Drug Overdose Fund in the amount of \$20,000.00 and a budgeted transfer from the General Revenue Fund to the Environmental Services Fund in the amount of \$30,000.00, and a budgeted advance from the General Revenue Fund to the Safe Communities Fund in the amount of \$8,000.00.

R 35-22 A resolution approving a budgeted transfer from the General Revenue Fund to the Drug Overdose Fund in the amount of \$20,000.00, a budgeted transfer from the General Revenue Fund to the Environmental Services Fund in the amount of \$30,000.00 and a budgeted advance from the General Revenue Fund to the Safe Communities Fund in the amount of \$8,000.00.

Motioned by: Mr. Walters
 Seconded by: Dr. Crompton

Mr. Waters	Yes	
Ms. DeWitt	Yes	
Dr. King	Yes	
Ms. Moore	Yes	
Mr. Griffith	Yes	
Dr. deGuzman	Yes	
Dr. Crompton	Yes	Motion carried.

Public Comment: none

Special Report: none

Old Business:

Solid Waste Nuisance Hearing – Dale Avenue: Mr. Shaffer said that we checked the property at 2728 Dale Avenue earlier this week and the accumulation of solid waste remains. He said that we are asking for authority to abate the nuisance.

Ms. DeWitt opened the hearing at 6:33 p.m. and with no comment, the hearing was closed at 6:33 p.m.

R 36-22 A resolution authorizing the Health Commissioner to do all things necessary to abate the solid waste nuisance at 2728 Dale Avenue, Springfield, Ohio (Parcel #3100700023203009) including furnishing the material and labor and certifying the cost and expense to the County Auditor for placement of a lien on the property.

Motioned by: Dr. King
 Seconded by: Mr. Griffith

Dr. Crompton	Yes
Mr. Griffith	Yes
Dr. King	Yes
Ms. Moore	Yes
Ms. DeWitt	Yes
Dr. deGuzman	Yes

Mr. Walters Yes Motion carried.

New Business:

Variance Request (distances) - 3873 Lawrenceville Drive: Mr. Shaffer said the property owner at 3873 Lawrenceville Drive wants to replace the failing septic system and sell the property to the current tenant. He referred to the diagram included in the board packet. He said the only way to meet the required isolation distances is to place an aerator and to pump to the storm sewer at the street. He said the path to install in this manner is blocked by the house and the garage making installation challenging. He said that the owner is seeking a variance from rule for isolation distances from the right of way and foundation of the home to install an aerator in the front yard. He said that due to the size of the property a soil-based system is not an option. He advised that the home was built in 1939 and Zillow shows a value range of \$112,000 to \$165,000. He said that German Township trustees have been notified of the request for variance but have not offered any comment. He referred to the public health ethics review included in the Board packet. Mr. Shaffer advised that there is another property down the street with an aerator in the front yard.

R 37-22 A resolution approving a household sewage treatment system rules variance at 3873 Lawrenceville Drive, Springfield, Ohio (Parcel # 0500200020201019) allowing a household sewage treatment system to be permitted in a location that is less than 10 feet from a dwelling, property line, and right-of-way boundary with the responsible party signing a Hold Harmless Agreement.

Motioned by: Dr. Crompton
Seconded by: Dr. deGuzman

Dr. Crompton	Yes	
Mr. Griffith	Yes	
Dr. King	Yes	
Ms. Moore	Yes	
Ms. DeWitt	Yes	
Dr. deGuzman	Yes	
Mr. Walters	Yes	Motion carried.

Drug Overdose Prevention Grant Submission: Mr. Cook said this grant will start on September 1, 2022, and will run through to the end of August 2023. He said that this is a continuation grant with 14 deliverables worth \$179,000.00.

R 38-22 A resolution authorizing the Health Commissioner to do all things necessary including submitting the grant and negotiating and executing all related contracts for the Drug Overdose Prevention grant.

Motioned by: Dr. King
Seconded by: Ms. Moore

Ms. Moore	Yes	
Mr. Walters	Yes	
Dr. King	Yes	
Dr. deGuzman	Yes	
Dr. Crompton	Yes	
Ms. DeWitt	Yes	

Mr. Griffith Yes Motion carried.

MCH Grant Submission: Mr. Cook said that this is also a continuation grant that runs from October 1, 2022, through September 30, 2022, with two (2) objectives and sub deliverables inside the objectives.

R 39-22 A resolution authorizing the Health Commissioner to do all things necessary including submitting the grant and negotiating and executing all related contracts for the Maternal Child Health (MCH) grant.
Motioned by: Mr. Griffith
Seconded by: Dr. King

Dr. deGuzman	Yes	
Ms. Moore	Yes	
Mr. Walters	Yes	
Dr. King	Yes	
Dr. Crompton	Yes	
Mr. Griffith	Yes	
Ms. DeWitt	Yes	Motion carried.

Then & Now Payments: Ms. Hardacre said that we have a resolution to approve then and now payments from January 1, 2022, through December 31, 2022, which will give us better flexibility with these payments. She said that then and now payments will still be presented to the board, however, this just gives that extra flexibility versus waiting on an invoice for payment.

R 40-22 A resolution approving the payment of bills and issuance of warrants of payment of those obligations for the Clark County Combined Health District pursuant to Ohio Revised Code and that the said funds are encumbered and appropriated for the period of January 1, 2022, through December 31, 2022.
Motioned by: Dr. deGuzman
Seconded by: Dr. Crompton

Ms. Moore	Yes	
Mr. Walters	Yes	
Dr. Crompton	Yes	
Dr. deGuzman	Yes	
Mr. Griffith	Yes	
Dr. King	Yes	
Ms. DeWitt	Yes	Motion carried.

Copier Purchase: Mr. Patterson said that we asked for permission to purchase two (2) copiers in December of last year and we continue to talk with the salesman to complete that purchase. He said that in talking with the salesman and negotiating a lower click charge we believe that we can cover the purchase of an additional copier.

R 41-22 A resolution approving the purchase of an additional copier, not to exceed \$3,500.00 paid from the Medicaid Administrative Claiming Fund.
Motioned by: Mr. Walters
Seconded by: Ms. Moore

Ms. Moore	Yes	
Mr. Walters	Yes	
Dr. King	Yes	
Dr. deGuzman	Yes	
Dr. Crompton	Yes	
Ms. DeWitt	Yes	
Mr. Griffith	Yes	Motion carried.

Position Upgrade – Pam Eggleston: Ms. Lambert said that Ms. Pam Eggleston has met all of the criteria to move from a Home Visitor 1 to a Home Visitor 2, so we are asking the board for permission to make that upgrade.

R 42-22 A resolution authorizing the position upgrade for Pamela Eggleston from Home Visitor 1 to Home Visitor 2, effective May 2, 2022.
Motioned by: Dr. King
Seconded by: Dr. deGuzman

Mr. Walters	Yes	
Ms. DeWitt	Yes	
Dr. King	Yes	
Ms. Moore	Yes	
Mr. Griffith	Yes	
Dr. Crompton	Yes	
Dr. deGuzman	Yes	Motion carried.

Bilingual Stipend: Mr. Patterson said that we are asking the board to move the bilingual stipend rate from \$2.50 to \$3.00, replacing all previous resolutions pertaining to bilingual stipend rates.

R 43-22 A resolution approving the bilingual stipend rate for employees who provide non-English interpretation or translation services as part of their regular job responsibilities be set at \$3.00 per hour in addition to the employee's regular hourly wages. This resolution replaces all previous resolutions passed by Clark County Board of Health pertaining to bilingual stipend rates. This rate shall become effective May 2, 2022.
Motioned by: Mr. Griffith
Seconded by: Dr. Crompton

Dr. deGuzman	Yes	
Mr. Griffith	Yes	
Mr. Walters	Yes	
Ms. Moore	Yes	
Dr. Crompton	Yes	
Ms. DeWitt	Yes	
Dr. King	Yes	Motion carried.

Miami Valley Water Compact: Mr. Patterson said that we are asking the board to pass the proposed resolution to provide continued support for the efforts of the city of Springfield and other municipalities for the protection of the Miami Valley Aquifer.

R 44-22 Whereas, the groundwater in the Mad River Buried Aquifer and the Great Miami River Watershed underlying Clark County and the Miami Valley region is a sensitive natural resource and is a primary source of drinking water for residents; and

Whereas, the protection of the Mad River Buried Aquifer and the Great Miami River Watershed requires cooperation and communication among all communities in Clark County and focusing community efforts to manage renewable but finite resources; and

Whereas, the Clark County Combined Health District desires to protect one of the County's most valuable natural resources by working with community partners to reduce risk and promote preservation activities.

Now, therefore, be it resolved that the Clark County Board of Health supports the city of Springfield's 2022 Miami Valley Water Compact and, along with other community partners, will work towards the following commitments in the Compact:

- A. To act together to protect, preserve, and restore where necessary the waters of the Mad River Buried Aquifer and the Great Miami River Watershed, including but not limited to the Tremont City Barrel Fill.

- B. To facilitate collaborative approaches to water management across the Aquifer and Watershed to protect, preserve, and efficiently and effectively manage the waters of the Aquifer and Watershed.

- C. To prevent significant adverse impacts of threats to, withdrawals from, and losses to the Aquifer and the Watershed.

- D. To promote the preservation and management of Aquifer and Watershed resources, which recognizes, considers, and provides adjustments for the uncertainties in, and evolution of, scientific knowledge concerning the Aquifer and Watershed.

Motioned by: Dr. deGuzman

Seconded by: Ms. Moore

Dr. King	Yes	
Ms. DeWitt	Yes	
Dr. Crompton	Yes	
Ms. Moore	Yes	
Mr. Walters	Yes	
Dr. deGuzman	Yes	
Mr. Griffith	Yes	Motion carried.

WIC Grant Submission: Ms. Thomas said that it is time for the completion and submittal of the WIC grant. She referred to key grant details including goals and purposes included in the board packet. She said that this is a competitive year for the grant and the grant cycle has been changed from a three (3) year to a five (5) year grant cycle covering FFY23 through FFY27, but the budget period is only for FFY23. She said

that because it is a competitive year the grant application is open to local public health agencies or nonprofit agencies, but we feel confident with having to identify the public health accreditation standards that we will receive the grant. She said that there are 74 grants available, and applicants are expected to provide services to one or more of the 74 service areas covering the 88 counties of Ohio. She said the maximum grant amount for Clark County will be \$822,996.00 with a caseload of 2,740 assigned. She said that funds for the WIC grant support 11 full-time employees, 65% of a part-time position as well as a full-time clinic in Springfield and part-time clinic in New Carlisle. She said that we are asking for permission to submit the grant.

R 45-22 A resolution authorizing the Health Commissioner to do all things necessary including submitting the grant and negotiating and executing all related contracts for the Women, Infants & Children (WIC) grant for federal fiscal year 2023.

Motioned by: Dr. King

Seconded by: Mr. Walters

Mr. Walters Yes

Dr. King Yes

Ms. DeWitt Yes

Ms. Moore Yes

Mr. Griffith Yes

Dr. Crompton Yes

Dr. deGuzman Yes

Motion carried.

Health Commissioner's Comments: Mr. Patterson said that we will be meeting with the personnel committee next month to propose restructuring tiers of employees for several of the divisions.

Additional Business: none

The next regular Board of Health meeting will be held Thursday May 19, 2022, at 6:00 p.m. at 529 East Home Road, Springfield, Ohio.

With no further business to come before the Board, the meeting was adjourned at 6:56 p.m.

Charles A. Patterson, Secretary
Clark County Combined Health District
Board of Health

Dala DeWitt, President
Clark County Combined Health District
Board of Health

PROGRAM:	Apr'22	YTD '22	PROGRAM:	Apr'22	YTD '22	PROGRAM:	Apr'22	YTD '22
C&DD-Active:			DOMESTIC PREPAREDNESS:			FOOD-MOBILE:		
Consultations	0	8	Complaints/Consultations	0	0	Consultations	3	16
Enforcement	0	0	Field Activity Hours (Clinics, Etc.)	0	140.5	Licenses Issued:		
Licenses, Permits, Orders Issued	0	0	Inspections/Re-Inspections	0	0	Food Establishment	0	6
Inspections &/or Re-Inspections	1	4	Sample/Re-Sample	0	0	Food Service	22	75
C&DD-Closed:			Sample or Specimen Pick-Up/Delivery	0	0	Inspections-Standard	21	77
Consultations	0	0	Training-Given	0	0	Notices of Critical Viol.-Standard Insp.	0	0
Enforcement	0	0	Training-Received	0	3	Follow-Up Inspections	0	4
Inspections &/or Re-Inspections	0	0	FOOD-RISK (144):			Complaints Rec'd./Investigated/FU/Pend.	0	0
CAMPGROUNDS (182):			PLAN REVIEW	9	56	FOOD-TEMPORARY:		
Consultations	0	1	Consultations	0	39	Consultations	1	1
Licenses Issued	4	4	Licenses Issued:			Licenses Issued:		
Inspections-Standard	0	1	Food Establishment	3	202	Food Establishment	6	29
Licenses Issued-Temporary	0	0	Food Service	3	393	Food Service	1	4
Inspections-Temporary	0	0	Inspections-Food Establishment:			Inspections-Standard	5	26
Notices of Critical Viol.-Standard Insp.	0	0	Standard Inspections	37	113	Notices of Critical Viol.-Standard Insp.	0	0
Re-Inspections	0	0	PR Inspections	0	2	Follow-Up Inspections	0	0
Complaints Pending-Beg. Of Month	0		Notices of Critical Viol.-Stand./PR	0	0	Complaints Rec'd./Investigated/FU/Pend.	0	0
Complaints Rec'd.-Current Month	0	0	Follow-Up Inspections	16	41	FOOD-VENDING:		
Complaints Investigated:			Outbreak Investigations:	0	0	Consultations	0	0
Valid Complaints	0	0	Sample or Specimen Pick-Up/Delivery	0	0	Licenses Issued	0	45
Notices of Violation Sent	0	0	Inspection/Sample	0	0	Inspections-Standard	0	17
Summary Compliance Abated	0	0	Inspections-Food Service:			Inspections - Misc	0	0
Non-Valid Abated	0	0	Standard Inspections	34	167	Notices of Critical Viol.-Standard Insp.	0	0
Complaint Re-Inspections	0	0	CCP Inspections	7	79	Follow-Up Inspections	0	0
Complaints Pending-End of Month	0		Notices of Critical Viol.-Stand./CCP	0	0	Complaints Rec'd./Investigated/FU/Pend.	0	0
Outbreak Investigations	0	0	Follow-Up Inspections	5	51	INDOOR AIR QUALITY:		
Orders to Appear before CCCHD	0	0	Outbreak Investigations:	0	0	Consultations	10	40
BOH Orders Issued	0	0	Sample or Specimen Pick-Up/Delivery	0	0	Inspections &/or Re-Inspections	1	8
Citations to Appear before BOH	0	0	Inspection/Sample	0	0	INFECTIOUS WASTE:		
Plan Review	0	0	Complaints Pending-Beg. Of Month	5		Consultations	1	3
CLEAN FILL OPERATION:			Complaints Rec'd.-Current Month	9	37	Enforcement	0	0
Complaints	0	0	Complaints Investigated:			Inspections &/or Re-Inspections	0	2
Consultations	0	4	Valid Complaints	1	9	INSECT/RODENT (146):		
Enforcement	0	0	Notices of Violation Sent	0	0	Bed Bugs:		
NOITF, Orders Issued	0	2	Summary Compliance Abated	1	4	Consultations	1	7
Inspections &/or Re-Inspections	0	2	Non-Valid Abated	7	24	Inspections &/or Re-Inspections	0	0
COMPOSTING FACILITY:			Complaint Re-Inspections	0	7	Consultations-Insect/Rodent	0	0
Consultations	3	8	Complaints Pending-End of Month	5		Complaints Pending-Beg. Of Month	1	
Enforcement	0	0	Orders to Appear before CCCHD	0	0	Complaints Rec'd.-Current Month	2	4
Licenses, Permits, Orders Issued	0	0	BOH Orders Issued	0	0	Complaints Investigated:		
Inspections &/or Re-Inspections	4	12	Citations to Appear before BOH	0	0	Valid Complaints	0	0
			Citations into Court	0	0	Notices of Violation Sent	0	0

PROGRAM:	Apr'22	YTD '22	PROGRAM:	Apr'22	YTD '22	PROGRAM:	Apr'22	YTD '22
INSECT/RODENT (cont'd.):			MERCURY (199):			NUISANCES-OTHER (cont'd.):		
Summary Compliance Abated	0	0	Consultations	0	0	Complaint Re-Inspections	0	0
Non-Valid Abated	2	4	Enforcement/NOV	0	0	Complaints Pending-End of Month	0	
Complaint Re-Inspections	0	1	Inspections/Re-Inspections	0	0	Orders to Appear before CCCHD	0	0
Complaints Pending-End of Month			Complaints Rec'd	0	0	BOH Orders Issued	0	0
Orders to Appear before CCCHD	0	0	MOLD:			Citations to Appear before BOH	0	0
BOH Orders Issued	0	0	Consultations	11	32	Citations into Court	0	0
Citations to Appear before BOH	0	0	Inspections &/or Re-Inspections	0	0	NUISANCES-WATER/UTILITIES (160):		
Citations into Court	0	0	MOTORCYCLE OHIO:			Consultations	0	0
JAIL:			# of Classes Conducted	4	4	Complaints Pending-Beg. Of Month	16	
Complaints Rec'd./Investigated/FU/Pend.	0	0	# SUCCESSFULLY COMPLETED: MALE	28	28	Complaints Rec'd.-Current Month	4	9
Consultations	0	0	FEMALE	10	10	Complaints Investigated:		
Enforcement	0	0	MINORS	1	1	Valid Complaints	4	8
Inspections	0	3	# DID NOT PASS: MALE	0	0	Notices of Violation Sent	3	5
Inspection/Sample	0	0	FEMALE	0	0	Summary Compliance Abated	0	0
Re-Inspections	0	0	MINORS	0	0	Non-Valid Abated	0	1
Sample or Specimen Pick-Up/Delivery	0	0	# DROPPED OUT: MALE	2	2	Complaint Re-Inspections	0	6
Outbreak Investigations	0	0	FEMALE	0	0	Complaints Pending-End of Month	17	
LANDFILLS-CLOSED:			MINORS	0	0	Orders to Appear before CCCHD	0	0
Consultations	0	2	NUISANCES-GENERAL ANIMAL (147):			BOH Orders Issued	0	0
Enforcement	0	0	Consultations	0	0	Citations to Appear before BOH	0	0
Inspections &/or Re-Inspections	0	2	Complaints Pending-Beg. Of Month	2		Citations into Court	0	0
LEAD:			Complaints Rec'd.-Current Month	0	1	PLUMBING (141):		
Consultations	3	19	Complaints Investigated:			PLAN REVIEW	17	44
MAN. HOME PARK (180):			Valid Complaints	0	0	Inspections	51	188
Consultations	0	0	Notices of Violation Sent	0	1	Finals	31	129
Inspections-Standard	12	12	Summary Compliance Abated	0	0	Permits	71	283
Notices of Critical Viol.-Standard Insp.	0	0	Non-Valid Abated	0	1	Registrations	19	296
Re-Inspections	0	0	Complaint Re-Inspections	1	8	Backflow Certifications	272	998
Complaints Pending-Beg. Of Month	1		Complaints Pending-End of Month	0		Consultations	5	15
Complaints Rec'd.-Current Month	1	2	Orders to Appear before CCCHD	0	0	Complaints Pending-Beg. Of Month	5	
Complaints Investigated:			BOH Orders Issued	0	0	Complaints Rec'd.-Current Month	0	1
Valid Complaints	1	1	Citations to Appear before BOH	0	0	Complaints Investigated:		
Notices of Violation Sent	0	0	Citations into Court	0	0	Valid Complaints	0	0
Summary Compliance Abated	0	0	NUISANCES-OTHER (149):			Notices of Violation Sent	0	0
Non-Valid Abated	0	1	Consultations	0	0	Summary Compliance Abated	0	0
Complaint Re-Inspections	0	0	Complaints Pending-Beg. Of Month	0		Non-Valid Abated	0	1
Complaints Pending-End of Month	2		Complaints Rec'd.-Current Month	0	4	Complaint Re-Inspections	0	0
Orders to Appear before CCCHD	0	0	Complaints Investigated:			Complaints Pending-End of Month	5	
BOH Orders Issued	0	0	Valid Complaints	0	0	Orders to Appear before CCCHD	0	0
Citations to Appear before BOH	0	0	Notices of Violation Sent	0	0	BOH Orders Issued	0	0
Citations into Court	0	0	Summary Compliance Abated	0	0	Citations to Appear before BOH	0	0
			Non-Valid Abated	0	4	Citations into Court	0	0

PROGRAM:	Apr'22	YTD '22	PROGRAM:	Apr'22	YTD '22	PROGRAM:	Apr'22	YTD '22
RABIES CONTROL:			Mercury Spills	0	0	SMOKING:		
Animal Bite Investigation	8	23	Orders to Appear before CCCHD	0	0	Administrative Review	0	0
Re-Inspections	0	0	BOH Orders Issued	0	0	Complaints	3	15
Consultations	0	2	Citations to Appear before BOH	0	0	Consultations	0	2
Sample or Specimen Pick-Up	1	9	Citations into Court	0	0	Fines	0	0
Sample or Specimen Delivery	0	3	SCRAP TIRE ADDRESS:			Investigations	3	13
Citations into Court	0	0	Consultations	0	3	Letters Sent - Notice of Report	3	15
RADON:			Enforcement	0	0	Letters Sent - Violation Warning	2	4
Consultations	4	22	Inspections	1	4	Letters Sent - Misc	3	7
REAL ESTATE:			SEWAGE (143):			SOLID WASTE (142):		
Consultations	0	0	Consultations	0	3	Hauler Registrations	0	8
Inspections - Well Only	2	9	Inspections:			Truck Registrations-w/Registration Fee	0	0
Inspections - Septic Only	1	9	Aerator Inspections	1	5	Truck Registrations-Additional Trucks	0	53
Inspections - Well & Septic	9	32	Dye Tests/Sampling	0	0	Truck Inspections	0	153
Re-Inspections	3	11	Finals (New/Repair)	4	24	Consultations	0	1
Sampling	24	83	1 Year Operation Inspections	0	0	Complaints Pending-Beg. Of Month	21	
Resampling	0	2	Site Approvals	3	9	Complaints Rec'd.-Current Month	6	32
RECYCLING/TRANSFER STATION:			Site Review Inspections	5	23	Complaints Investigated:		
Inspections	0	0	Subdivision Review Inspections	0	2	Valid Complaints	6	24
ROUTINE WATER:			Truck Inspections/Re-inspections	0	3	Notices of Violation Sent	6	18
Consultations	0	0	Licenses, Permits, Orders Issued:			Summary Compliance Abated	0	0
Sampling by CCCHD Staff	11	64	Site Review Applications	5	22	Non-Valid Abated	0	8
Sampling by Owner (Self)	12	44	Subdivision Review Applications	0	2	Complaint Re-Inspections	20	70
Inspections	0	0	Installation (New, Replace or Alter Permits)	5	19	Complaints Pending-End of Month	16	
Dye Tests	0	0	Operation Permits/Inspection Fees	58	127	Orders to Appear before CCCHD	0	0
SALVAGE YARD:			Site Approval Applications	6	12	BOH Orders Issued	0	0
Consultations	0	1	Sewage Installer Registrations	2	13	Citations to Appear before BOH	0	0
Enforcement	0	0	Service Provider Registrations	0	10	Citations into Court	0	0
Inspections	0	0	Septage Hauler Registrations/Trucks	0	10	SWIMMING POOLS/SPAS (181):		
SCHOOL/PLAYGROUND (145):			Variance Applications	1	3	Consultations	0	1
Consultations	0	0	Complaints Pending-Beg. Of Month	37		Licenses Issued	0	0
Inspections-Standard	0	47	Complaints Rec'd.-Current Month	1	7	Inspections-Standard	7	33
Re-Inspections	0	0	Complaints Investigated:			Notices of Critical Viol.-Standard Insp.	0	4
Complaints Pending-Beg. Of Month	0		Valid Complaints	1	6	Re-Inspections	0	4
Complaints Rec'd.-Current Month	0	0	Notices of Violation Sent	1	7	Complaints Pending-Beg. Of Month	0	
Complaints Investigated:			Summary Compliance Abated	0	0	Complaints Rec'd.-Current Month	0	0
Valid Complaints	0	0	Non-Valid Abated	0	1	Complaints Investigated:		
Notices of Violation Sent	0	0	Complaint Re-Inspections	1	3	Valid Complaints	0	0
Summary Compliance Abated	0	0	Complaints Pending-End of Month	36		Notices of Violation Sent	0	0
Non-Valid Abated	0	0	Orders to Appear before CCCHD	0	0	Summary Compliance Abated	0	0
Complaint Re-Inspections	0	0	BOH Orders Issued	0	0	Non-Valid Abated	0	0
Complaints Pending-End of Month	0		Citations to Appear before BOH	0	0	Complaint Re-Inspections	0	0
Outbreak Investigations	0	0	Citations into Court	0	0	Complaints Pending-End of Month	0	

PROGRAM:	Apr'22	YTD '22	PROGRAM:	Apr'22	YTD '22	PROGRAM:	Apr'22	YTD '22
SWIMMING POOLS/SPAS (cont'd.):			WEST NILE VIRUS (198):			WEST NILE VIRUS (cont'd.):		
Outbreak Investigations	0	0	Consultations	0	0	Orders to Appear before CCCHD	0	0
Orders to Appear before CCCHD	0	0	Complaints Pending-Beg. Of Month	0		BOH Orders Issued	0	0
BOH Orders Issued	0	0	Complaints Rec'd.-Current Month	1	1	Flyer/Information Distribution	0	0
TOBACCO	0	0	Complaints Investigated:			Treatments Applied	0	0
Licenses Issued	1	39	Valid Complaints	0	0	MEETINGS/TRAINING:		
TATTOO/BODY PIERCING (171):			Notices of Violation Sent	0	0	Meetings	31	104
Consultations	0	4	Summary Compliance Abated	0	0	Training-Given	0	1
Licenses Issued/*Temporary	0	19	Non-Valid Abated	1	1	Training-Received	97	224
Inspections-Standand/*Temporary	0	2	Complaint Re-Inspections	0	0			
Notices of Critical Viol.-Standard Insp.	0	0	Complaints Pending-End of Month	0				
Re-Inspections	0	0	REPORTED ANIMAL BITES/ RABIES EXPOSURE:	Apr'22			Apr'21	Apr'21
Complaints Pending-Beg. Of Month	0			OWNED	UNOWNED	YTD 2022	OWNED	UNOWNED
Complaints Rec'd.-Current Month	0	0	DOG: Bite/Non-Bite/Other Events	20	2	54	15	2
Complaints Investigated:			Total Persons Exposed	22		57		50
Valid Complaints	0	0	# People Rec. Post-Exposure	0		1	1	1
Notices of Violation Sent	0	0	# Vaccinated at Time of Incident	6		12	2	11
Summary Compliance Abated	0	0	# Sent to ODH-Negative	1		6	3	5
Non-Valid Abated	0	0	# Sent to ODH-Positive/*Unsat.	0		0	0	0
Complaint Re-Inspections	0	0	CAT: Bite/Non-Bite/Other Events	1		7	3	6
Complaints Pending-End of Month	0		Total Persons Exposed	2		8	3	6
Outbreak Investigations	0	0	# People Rec. Post-Exposure	0		0	0	1
Orders to Appear before CCCHD	0	0	# Vaccinated at Time of Incident	0		0	2	2
BOH Orders Issued	0	0	# Sent to ODH-Negative	0		1	0	2
Citations to Appear before BOH	0	0	# Sent to ODH-Positive/*Unsat.	0		0	0	0
Citations into Court (*Search Warr.)	0	0	RACCOON:					
VECTOR-BORNE (TICKS):			Bite/Non-Bite/Other Events		0	1		3
Consultations	2	2	Total Persons Exposed		0	1		1
# Ticks Received	0	0	# People Rec. Post-Exposure		0	0		0
# Ticks Identified	2	2	# Sent to ODH-Negative		0	0		3
# Ticks Sent to ODH	0	0	# Sent to ODH-Positive/*Unsat.		0	0		0
# Ticks Ident. by ODH/Pending	0	0	BAT: Bite/Non-Bite/Other Events		1	3		2
WELLS (PWS):			Total Persons Exposed		0	1		1
Consultations	0	1	# People Rec. Post-Exposure		0	1		0
Licenses/Permits/Orders Issued:			# Sent to ODH-Negative		1	2		2
Alterations	2	8	# Sent to ODH-Positive/*Unsat.		0	0		0
New	11	25	OTHER:					0
Sealing Permits	1	4	Bite/Non-Bite/Other Events		0	1		0
Inspections	5	20	Total Persons Exposed		0	1		0
PWS Contractor Inspections	0	0	# People Rec. Post-Exposure		0	0		0
Re-Inspections	0	0	# Sent to ODH-Negative		0	0		0
New Well Sampling	5	20	# Sent to ODH-Positive/*Unsat.		0	0		0
Dye Tests	0	0	Cases Pending:	Dogs:	6	Cats:	0	

**Clark County Combined Health District
Early Childhood Division
April 2022**

Referrals

Type of Referral	Current	FYTD
Help Me Grow-Home Visiting FY: July 1, 2021 - June 30, 2022	5	58
Federal Home Visiting (MIECHV) FY: October 1, 2021 - September 30, 2022	14	72
Moms & Babies First FY: October 1, 2021 - September 30, 2022	1	25
Total Referrals For April	20	155

Referral Sources	Current
Health District	0
Primary Caregiver	7
WIC	6
Other	7
Total	20

Families Served in Home Visiting

Program	Total Served	Target	%
Help Me Grow	87	91	96%
Federal (MIECHV)	115	132	87%
Moms & Babies First	26	30	87%

Home Visits	Current	FYTD
HMG-HV	144	1532
MIECHV	184	1407
MBF	21	123
Total	349	3062

Safe Sleep Initiative:

Activity	Served
Cribs For Kids	21

Moms Quit For Two:

Activity	Enrolled
Baby & Me Tobacco Free	12

Division Programs:

Help Me Grow-Ohio Healthy Families: prenatal to age 3

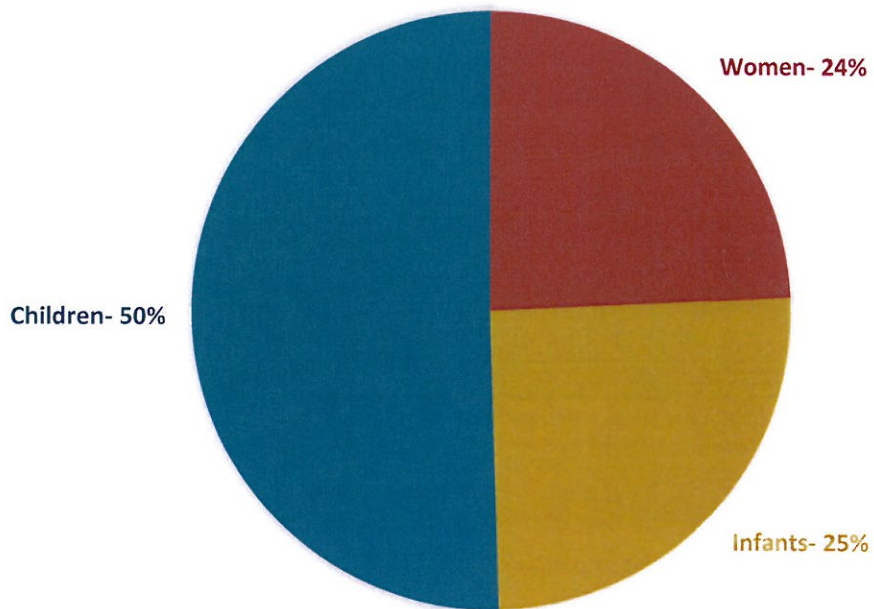
Moms & Babies First: funded by Ohio's Black Infant Vitality Program:
prenatal to age 1

Cribs For Kids: prenatal (last trimester) up to 1 year

Moms Quit For Two grant funds Baby & Me Tobacco Free: mom enrolls
prenatally and can be served up to 1 year after birth of baby

Initial Participation Report
Reporting Month- APR 2022

Agency Distribution of Women, Infants and Children



CLARK COUNTY WIC PROGRAM

**Distribution & Caseload of Women, Infant, and Children
Active in CCHD WIC Program**

	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Average
Women Total	709	691	686	687	707	726	742						707
Pregnant	302	218	209	210	210	221	226						213
Exclusive BF	81	71	63	62	60	60	66						64
Partially BF	147	116	113	113	121	122	134						118
Non-BF	179	286	301	302	316	323	316						311
Infant Total	806	732	724	726	733	747	764						726
Exclusive BF	99	66	57	59	53	57	56						58
Partially BF	43	25	22	23	22	20	24						22
Non-BF	664	641	645	644	658	670	684						646
Children Total	1,241	1,449	1,464	1,432	1,409	1,438	1,504						1,455
WIC Total Caseload	2,756	2,872	2,874	2,845	2,849	2,911	3,010						2,888

*Corrected initial caseload numbers in red.

Breastfeeding Initiation

Fiscal Year	Clark - Average	State - Average
16	46.1%	58.2%
17	47.7%	59.2%
18	52.1%	60.6%
19	52.1%	61.3%
20	50.9%	60.0%
21	53.7%	54.7%
22	61.4%	52.7%

(February 2022- 62.4%)

ASSIGNED FY22 Caseload	% Total Caseload Difference
2,808	2.85%

Health Planning Team: May 2022 Update

Drug Overdose Prevention Program:

One2One Update:

- **Second Harvest Food Bank (SHFB) Partnership:** Over the month of April, we gave out 38 food boxes to our clients.
- **Interfaith Hospitality Network (IHN) Partnership:** Over the month of April, we completed 9 housing referrals.
- **Department of Job and Family Services- Clark County (DJFS-CCO Partnership):** Over the month of April, we assisted 4 clients in completing applications for Medicaid and SNAP benefits.
- Exchange Stats from March 2022 (April 2022 Stats were not available at the time of this report):
 - 208 Client visits
 - 10,771 Syringes exchanged- ***Our biggest month to date***
 - 105 Narcan kits distributed
 - 11 Treatment referrals
 - 16 Hepatitis C Screens
 - 20 HIV Screens
 - 23 Syphilis Screens

Substance Abuse/DOP:

- The Clark County Substance Abuse Coalition have started doing GROW (Get Recovery Options Working) Blitzes again. The GROW blitz consists of coalition members and community partners coming together to canvas areas of the county with high overdose rates. The goal is to meet people where they are to provide resources and distribute Narcan. The last blitz was held on April 22nd.
 - The stats for the April Blitz include:
 - 33 houses visited
 - 10 resources bags provided
 - 4 Narcan kits distributed
 - The next blitz is scheduled for May 20th

Health Planning Team: May 2022 Update

Maternal Child Health Program (MP):

Objective 2: Preconception Health/ Start Strong

- One goal of Start Strong Clark County (SSCC) is to create or find an existing assessment tool for social support among pregnant women to decrease chronic stress and improve birth outcomes.
 - STATUS: SDOH Work Group/ Start Strong subcommittee have been implementing an SDOH screening tool in three OB/GYN practices in the County. The screening tool covers food, shelter, utilities, safety, transportation.
 - In collaboration with Mercy Health, CCCHD has submitted a funding request to the Community Health Foundation to hire a Maternal Infant Health Coordinator/ Community Health Worker (CHW). This CHW would work with families to alleviate barriers, link with community resource, and generally improve utilization of services that support healthy family function for mothers particularly during pregnancy and 6-8 weeks post-partum. Additional intervention target areas include (evidence-based initiatives) tobacco, gestational diabetes, folic acid, alcohol, drugs, STIs, Hep B, lead, obesity (maternal), hypothyroidism, and breastfeeding prep.
 - Overall goals of this position align with the Community Health Improvement Plan (CHIP): reduce infant mortality rate, reduce low birth-weight babies, reduce pre-term births, improve maternal health.
 - Exact details of where this position would be housed within CCCHD have not been finalized yet, but more information will be provided as soon as it is available.

Objective 4: Adolescent Health

- We continue to plan for our two main projects this year. Those projects are Cooking Matters and Life Sports. We excited to build upon the progress that was made last year.
 - Life Sports is scheduled for July 5- 29th and will be held at Hayward Middle School. Recruitment and advertisement for this program will begin this month.
 - Cooking Matters started on May 6th and will run for six weeks.
 - There are 20 local families participating in the program this year.
 - Each week, the families receive a meal kit and will follow along the instructor via Zoom to learn how to make a healthy and budget friendly meal for the whole family.

The FY23 Maternal Child Health Grant application is due on May 31st. This is a continuation application with a potential funding amount of \$132,000.

Health Planning Team: May 2022 Update

Safe Communities:

- On May 4th, we attended the National Trails Park and Recreation Division soccer games at Eagle City to provide outreach on impaired driving. Along with information, we set up a course for individuals to try and dribble a soccer ball through while wearing goggles that imitate the effects of alcohol. The goal is to demonstrate the dangers of drunk driving.



- The Click-it or Ticket Kick-off. A seat belt checked is set for Friday, May 27th from 10am to 12pm at the Springfield Swap Meet and Car Show taking place at the Clark County Fair Grounds.

The FY23 Safe Communities Grant Application is due May 31st. CCCHD is eligible to apply for \$55,000.

Tobacco:

- Assembled a group of volunteers to conduct tobacco retailer store audits. Completed a required “sampling” of 62 stores out of 89 located in Clark County. The tobacco store audit surveys are designed to provide data on marketing and advertising used by the tobacco industry to directly target youth. The data will be tabulated by Ohio Department of Health and shared with the tobacco grantee. The data will be shared in a presentation at a future Tobacco Task Force meeting.
- Gave 15 anti-vaping presentations combined at Northwestern High School, Tecumseh High School and Tecumseh Middle School health classes.
- Working with school youth advisors to create a sustainability plan to incorporate annual vaping education for Shawnee High School and Greenon High School
- Held a meeting with 5 new public sector members and gave presentation on the tobacco “AAR model” (Ask Advise Refer). Gained 5 community partnership agreements which further increases reach of tobacco users in Clark County while promoting cessation services and efforts to increase quit line enrollment.

Health Planning Team: May 2022 Update

Creating Healthy Communities:

- Continue to actively participate in the monthly Clark County Local Foods Council (CCLFC) meetings.
- We attended the Human Services Transportation Committee on May 4th. TCC discussed the public meeting comments and suggested alternatives to the current public transit system.
- Working with National Trails Parks and Recreation on developing a survey to gain community feedback on the usage and barriers of Buck Creek Nature Park. The survey will be administered to residents through canvassing and social media.
- Our first CHC Coalition meeting of the year is May 16th. We will be reviewing our goals and how they align with the CHIP and the Clark County Local Foods Council.

Lead-Safe Homes:

- Expanded collaborative partnership with Lead Case Management (LCM) and Lead Safe Initiative (LSI) team
 - working to establish a primary point of contact for LCM team with the Rocking Horse Center, Clark County's primary pediatric provider, to address lead related concerns efficiently and effectively.
 - provided LCM with CCCHD adapted print resources for Spanish and Haitian Creole speaking families (Source: NY State Department of Health).
 - LCM primary reviewer and editor of lead related webpages for CCCHD website.
- Completed writing and the review process for new lead related webpages to include on CCCHD website (see attached) – new pages are Lead Poisoning Prevention, Childhood Lead Poisoning, Lead Testing, Lead Safety at Home, Financial Incentives and Resources, Lead FAQs, and Lead Related Resources. To-date, only the Lead Poisoning Prevention page is live. Click this link to access https://ccchd.com/?page_id=1520
 - Translation of ODH Prevent Childhood Lead Poisoning brochure into Spanish and Haitian Creole completed and shared with ODH.
 - Translation of CCCHD lead overview 2-sided flier into Spanish and Haitian Creole
 - Adaptation of numerous NY State Department of Health Spanish and Haitian Creole language lead information resources for pregnant women and parents of lead poisoned children.
- Follow-up meeting with AnnMarie Schmersal, program coordinator regarding steps necessary to promote local OBGYN practitioners implement lead risk assessments for patients, first step is to query individual practices to determine if/how they screen clients for lead risk; identified point person to follow-up with Springfield Regional Medical Center about initiating lead screening at-risk mothers at time of delivery and implementing lead screening as part of established cord blood testing; need for the hospital or coroner to lead screen stillborn infants and those that die in the two years of life. Currently looking to hire a second health planner to be part of the Lead Team. Job description has been posted.

Health Planning Team: May 2022 Update

Minority Health Fair:

- The 5th annual Minority Health Fair took place on Saturday April 30th from 10am to 1pm at Lincoln Elementary.
- The event was a great success and the best attended fair to date.
- 42 vendors provided information about local resources, attendees also had the opportunity to get their health questions answered by local physicians as well as receive health screenings such as blood pressure, vision, and lab work. Second Harvest Food Bank also attended with their mobile food pantry.
- Additional information and pictures from the event are below.

2022 Minority Health Fair Data

Total Attendance: 226

*Number is based on health fair surveys collected

Race		
	Amount	%
Black	131	58.0%
White	23	10.2%
Multi-Racial	1	0.4%
Hispanic	4	1.8%
Asian	3	1.3%
Unknown	64	28.3%
Total	226	100.0%

Age		
	Amount	%
15-24	6	2.7%
25-34	13	5.8%
35-44	37	16.4%
45-54	45	19.9%
55-64	27	11.9%
64+	50	22.1%
Unknown	48	21.2%
Total	226	100.0%

Gender Identity		
	Amount	%
Male	109	48.2%
Female	60	26.5%
Nonbinary	2	0.9%
Unknown	55	24.3%
Total	226	100.0%

Zip Code		
	Amount	%
45503	20	8.8%
45504	26	11.5%
45505	65	28.8%
45506	48	21.2%
45371	1	0.4%
45323	1	0.4%
Unknown	65	28.8%
Total	226	100.0%

Primary Care Physician		
	Total	%
Yes	79	35.0%
No	93	41.2%
Unknown	54	23.9%
Total	226	100.0%

Health Planning Team: May 2022 Update



Clark County Combined Health District

current as of 5.12.22

**3 YEAR COMPARATIVE
BIRTH DATA**

Birth Certificates Issued In Apr - 616

4E

<i>Total Births</i>	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	Y-T-D Total	Previous 12 Month Avg
2022	79	90	88	88									345	87
2021	91	79	87	94	73	95	88	91	81	93	81	100	1,053	89
2020	84	91	103	93	81	98	99	98	86	86	76	92	1,087	99
<i>No. of LBW Newborns</i>														
2022	6	7	8	5									26	6
2021	9	4	8	10	6	7	5	1	5	6	5	7	73	7
2020	11	13	9	4	5	12	9	7	6	8	4	7	95	9
2022	7.59%	7.78%	9.09%	5.68%									7.54%	6.49%
2021	9.89%	5.06%	9.20%	10.64%	8.22%	7.37%	5.68%	1.10%	6.17%	6.45%	6.17%	7.00%	6.93%	8.34%
2020	13.10%	14.29%	8.74%	4.30%	6.17%	12.24%	9.09%	7.14%	6.98%	9.30%	5.26%	7.61%	8.74%	9.44%
<i>Mothers' Ages</i>														
<i>Age 0-14</i>														
2022	1	0	0	0									1	0.3
2021	0	0	1	0	0	0	0	0	1	0	0	1	3	0.2
2020	0	1	0	0	0	0	0	0	0	0	0	1	2	0.2
<i>Age 15-19</i>														
2022	8	13	13	4									38	8
2021	11	7	11	9	7	9	5	9	3	6	5	13	95	9
2020	12	11	12	7	7	8	6	10	10	12	8	8	111	10
<i>Age 20-24</i>														
2022	30	19	27	21									97	27
2021	26	26	32	24	20	34	25	32	23	34	32	25	333	26
2020	30	30	35	35	24	31	30	22	29	21	20	27	334	33
<i>Age 25+</i>														
2022	40	58	48	63									209	52
2021	54	46	43	61	46	52	58	50	54	53	44	61	622	54
2020	42	47	56	51	50	59	63	66	47	53	48	56	638	56

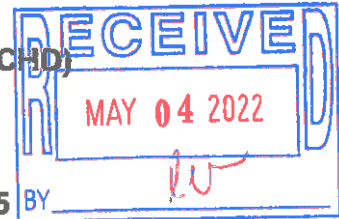
April

VITAL STATISTICS													Y-T-D
2022 DEATH REPORT													Total
Death Certificates Issued in APRIL - 526													Total
Cause of Death - 2022	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	Total
Heart Disease	52	45	43	34									174
Cancer	18	19	28	27									92
Chronic Lower Respiratory Disease	8	6	4	9									27
Accidents	4	4	3	0									11
Cerebrovascular Disease	15	17	17	7									56
Alzheimer's Disease	14	11	11	5									41
Drug Intoxication	3	4	2	1									10
Diabetes	1	1	1	0									3
Influenza/Pneumonia	11	8	16	8									43
Kidney Related Disease	2	1	4	1									8
Septicemia	9	6	5	7									27
Suicide	1	2	2	0									5
Liver Disease/Cirrhosis	2	0	1	1									4
Hypertension	0	1	0	1									2
Parkinson's Disease	4	1	1	1									7
Other	82	79	32	19									212
Pending	1	2	7	15									25
Totals	227	207	177	136	0	0	0	0	0	0	0	0	747
Cause of Death - 2021	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	Total
Heart Disease	43	35	43	45	30	41	40	44	44	41	44	51	501
Cancer	21	21	22	16	20	21	23	15	25	19	20	22	245
Chronic Lower Respiratory Disease	7	3	6	8	6	7	5	1	3	3	3	8	60
Accidents	4	4	2	9	6	8	4	2	3	1	2	2	47
Cerebrovascular Disease	5	3	7	9	9	10	4	16	11	10	15	16	115
Alzheimer's Disease	8	8	10	10	2	9	6	10	8	13	9	8	101
Drug Intoxication	10	8	4	6	4	7	15	7	6	7	2	3	79
Diabetes	1	1	0	1	0	3	4	1	1	2	0	0	14
Influenza/Pneumonia	9	2	3	3	0	3	6	6	3	10	8	8	61
Kidney Related Disease	6	5	1	3	2	4	3	2	4	3	0	3	36
Septicemia	6	7	8	1	7	6	2	2	4	3	10	5	61
Suicide	3	4	2	4	0	3	0	0	2	3	3	1	25
Liver Disease/Cirrhosis	6	4	1	0	0	1	5	1	2	1	2	4	27
Hypertension	2	0	2	0	0	1	1	0	0	1	0	0	7
Parkinson's Disease	0	3	0	0	1	3	1	1	0	0	0	0	9
Other	60	35	21	43	23	27	23	28	33	46	52	55	446
Pending	0	0	0	0	0	0	0	0	0	0	0	0	0
Totals	191	143	132	158	110	154	142	136	149	163	170	186	1,834

"Other" Causes of Death - April 2022

Chronic Alcohol Abuse	1
COVID	4
Failure To Thrive	3
Fetal	1
GI Bleed	4
Pulmonary Embolism	1
Seizure Disorder	1
Respiratory Failure	4
TOTAL	19

Clark County Combined Health District (CCCHD)
 Division of Environmental Health
 529 E. Home Road
 Springfield, Ohio 45503
 Phone: 937-390-5600 Fax: 937-390-5625



Application for Sewage Variance

Permit Fee \$25.00 Receipt #: 52953

Address of Site	City	State	Zip
1601 E Home Rd,	Springfield	OH	45503

Owner Information:			
Name Comfort Living LLC			
Address	City	State	Zip
2518 Casey Dr	Springfield	Ohio	45503
Email address: iusegoogle@gmail.com	Cell Phone Number: 937 631 5562 / 312 898 3968		

Insert below, all sections of sewage code from which you are requesting a variance.

Ohio Administrative Code Chapter 3701-29 Sewage Treatment System Rules

3701-29-06 (I) A STS shall not be sited, permitted, or installed where a sanitary sewerage system is accessible, unless otherwise excepted by law. Whenever a sanitary sewerage system becomes accessible to a dwelling or structure served by a STS, the dwelling and/or structures shall be connected to the sanitary sewerage system and the STS abandoned in accordance with rule **3701-29-21** of the Administrative Code.

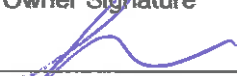
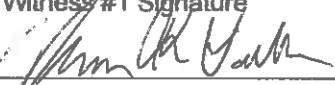

Provide a concise description of the conditions, which prevent compliance with above code(s).

Septic was inspected and found to be in good condition. Tie in will cause unusual and unnecessary financial hardship.

By signing this application, I, the grantee, agree to abide by any and all state laws and regulations and by the regulations set forth by the Clark County Combined Health District.


I, the grantee, herein further acknowledge that I obtained a variance from the Clark County Combined Health District Board of Health, said variance permitting me to install a sewage system that does not meet the minimum state code.

In consideration for said variance, I hereby agree and promise that I will hold harmless and indemnify the Clark County Combined Health District Board of Health, the Clark County Combined Health District and/or any and all members of said Board and/or said District, including all employees and/or agents thereof, from any and all damages which might be caused directly or indirectly from this installation.


Owner Signature 	Date 4/5/2022
Witness #1 Signature 	Witness #2 Signature 

Notary Use Only:

In testimony whereof, I have hereunto set my hand and official seal at Springfield, Ohio,
this 4 day of May, 2022


Notary Public

My commission expires: 6-2-2025



VIRGINIA E RAY
Notary Public
State of Ohio
My Comm. Expires
June 2, 2025

Health Department Use Only:

Variance Approved by the Clark County Combined Health District Board of Health - Yes No

Resolution Number: _____ Approval Date: _____

Revised 3/16/15



1601 East Home Road

- Located within the City of Springfield
- Built - 1960
- 1,144 Square feet with 3 bedrooms / 2 bathrooms
- Zillow.com estimates value \$98,000 to \$114,000 with sale in April 2022 for \$105,000. Clark County Auditor website was not updated to confirm sale price.
- City of Springfield reports the public sewer line already has a stub connector and is in good repair. They anticipate a connection to sewer to be routine as the sewer is on the same side of the home as the septic tank.
- The City of Springfield has made the owner aware that they will make up to \$3,500 available to assist with connection to sewer.

12:46 PM Wed May 11

Cancel

1601 home rd

To: jwebb@woh.rr.com

Cc/Bcc, From: jagibby61@aol.com

Subject: 1601 home rd

Pump crush fill septic tank tie sewer line into city provided lateral at curb.

Tootles cost not to exceed \$9000.00

Pro Plumbing

5632 Willowchase Circle

Springfield Ohio 45502

Joe Gibson 937-605-1174

Sent from my iPad



Bob May Enterprises

1135 E. Canal st
Troy, OH 45373
937-6134862
mayservices937@gmail.com

INVOICE

INV0021

DATE

05/10/2022

DUE

On Receipt

BALANCE DUE

USD \$10,240.00

BILL TO

Stas and Arthur Solomon Comfort Living

☎ +13128983968

DESCRIPTION	RATE	QTY	AMOUNT
1601 East Home Rd Springfield, OH	\$10,240.00	1	\$10,240.00

Tie in residence to existing city sewer system.

Abandon septic

TOTAL \$10,240.00

BALANCE DUE **USD \$10,240.00**



Clark County Combined Health District

Divisions: All Divisions of Clark County Combined Health District (CCCHD)

Public Health Ethics Reviews

529 E. Home Road
Springfield, OH 45503

CCCHD Public Health Ethics Review Tool

Date of Review Meeting:	May 12, 2022
Attendees by Name and Title	Elizabeth DeWitt, Environmental Health Supervisor Larry Shaffer; Director of Environmental Health
Area of Discussion:	Variance request from Ohio's Household Sewage Treatment System rule 3701-29-06 I: 1601 East Home Road, Springfield, OH - Parcel #3400700030203008

Principles of Ethical Public Health Practice	Principles Applied to Program Level	Principles Applied to Specific Event
1. Address principally the fundamental causes of disease and requirements for health, aiming to prevent adverse health outcomes.	Prevent humans and animals from contact with untreated sewage. Use best available technology to treat sewage.	Homes with foundations closer to 200' to right-of-way to public sewer may not obtain a STS installation nor operation permit as public sewage collection systems are considered best available technology as sewage is treated for safety at a facility that is monitored and maintained daily.
2. Achieve community health in a way that respects the rights of individuals in the community.	Client is aware of option to request variance from rule.	Client has elected to request a variance from rule.
3. Policies, programs, and priorities should be developed and evaluated through processes that ensure an opportunity for input from community.	As this is implementation of state law and rule- public input has occurred at the state level. The Board of Health consideration of variances occurs in a public meeting with input from the community.	Board of Health Meeting; May 19, 2022
4. Advocate and work for the empowerment of disenfranchised community members, aiming to ensure that the basic resources and conditions for health are accessible to all.	The law and rules allows for a "hardship" or financial consideration when making the variance decisions.	The Board may consider cost and difficulty of connecting a home to public sewer while contemplating a variance from rule.
5. Seek the information needed to implement effective policies and programs that protect and promote health.	Not applicable- State Law and Rules.	N/A



Clark County Combined Health District

Divisions: All Divisions of Clark County Combined Health District (CCCHD)

Public Health Ethics Reviews

529 E. Home Road
Springfield, OH 45503

Principles of Ethical Public Health Practice	Principles Applied to Program Level	Principles Applied to Specific Event
6. Provide communities with the information they have that is needed for decisions on policies and programs and should obtain the community's consent.	Consent is not applicable- State Law and Rules.	N/A
7. Act in a timely manner on the information they have within the resources and the mandate given to them by the public.	Process variance request ASAP and present to the next Board of Health meeting for their consideration.	Received May 4, 2022; To be reviewed by Board of Health December 16, 2021
8. Programs and policies should incorporate a variety of approaches that anticipate and respect the diverse values, beliefs and cultures in the community.	Not applicable- State Law and Rules.	N/A
9. Programs and policies should be implemented in a manner that most enhances the physical and social environment.	Consideration should be given to the surrounding terrain and the variances impact on the neighboring properties as well as the owner's property.	N/A in this situation; no known impact to environment at this time. Extending sewer would require neighboring homes to connect.
10. Protect the confidentiality of information that can bring harm to an individual or community if made public. Exceptions must be justified on the basis of high likelihood of significant harm to the individual or others.	Not applicable- no confidential information.	N/A
11 . CCCHD should ensure the professional competence of its employees.	Professional development and training must occur and documentation uploaded into the Workforce Development database.	Staff attends educational conferences as available, participates in quarterly roundtable meetings with other health departments in southwest Ohio, and monitors monthly statewide sewage conference calls. Issue discussed with Env. Health Supervisor and Director.



Clark County Combined Health District

Divisions: All Divisions of Clark County Combined Health District (CCCHD)

Public Health Ethics Reviews

529 E. Home Road
Springfield, OH 45503

Principles of Ethical Public Health Practice	Principles Applied to Program Level	Principles Applied to Specific Event
12. CCCHD and its employees should engage in collaborations and affiliations that build the public's trust and the institution's effectiveness.	The general public, township trustees, county commissioners, village council members, realtors and realtor trade groups, mortgage bankers, builders and builder trade groups, installers, designers, and service providers have been educated and regularly informed of the implementation of the rules through meetings and the local media.	City of Springfield Utilities staff are aware of pending consideration of request for variance by Board of Health and opportunity to comment.

Next Steps:

Objective	Related Activities	Timeframe	Responsible Party
Ensure compliance with conditions of the variance is passed.	Perform on-site inspections as needed.	By project's completion.	Environmental Health Staff



Clark County Combined Health - Clark County

FFY2023 Ohio Traffic Safety Office Grant Funding Eligibility Notification

Your agency is eligible to apply for a FFY2023 Safe Communities Grant.

Program Description

These coordinated communities play an active role in addressing traffic safety issues. Each program must include strategies focusing on seat belt use, impaired driving, motorcycle safety, and distracted driving. Ohio's Safe Communities network uses local coalitions to deliver traffic safety messages and programs throughout the year at the county level. Safe Communities provides the educational/earned media portion of our enforcement campaigns while our law enforcement agencies including the Ohio State Highway Patrol conduct the enforcement portion. Each Safe Communities program must coordinate a Fatal Crash Data Review Committee to review each fatal crash occurring in their county to determine trends and patterns and make recommendations to the coalition on how the fatal crash might have been avoided; conduct coalition meetings at least quarterly; actively participate in the eight designated blitzes; the Click It or Ticket and Drive Sober or Get Pulled Over mobilizations; a motorcycle safety campaign; and conduct a minimum number of events.

Mandatory Blitzes/National Campaigns			
Halloween	Thanksgiving	Winter Holiday DSOGPO	Super Bowl
St. Patrick's Day	Motorcycle Awareness	Distracted Driving Month	Prom
Click It or Ticket	4th of July	Drive Sober or Get Pulled Over	Homecoming

Grant Maximum

3-Year Average Number of Fatal Crashes	Maximum Funding Amount	Minimum Number of Events
17.67	\$55,000.00	14*

*Number does not include the required Click It or Ticket and Drive Sober or Get Pulled Over Kick-Off events.

For full requirements of the grant see the Traffic Safety Proposal Package online at <http://otso.intelligrants.com>

The Traffic Safety Proposal Package and GRANTS Plus FFY2023 grant proposals are tentatively scheduled to go live April 26, 2022 with an online submission deadline of May 31, 2022. Questions can be directed to your OTSO Planner and/or your Law Enforcement Liaison (LEL).

FFY2023 Safe Communities Grant Updates

Grant Program Changes

- Maximum funding amounts increased.
- Five Traffic Safety Strategies
 - Impaired Driving/Drugged Driving
 - Seat Belt Usage/"Click It or Ticket" initiatives
 - Distracted Driving
 - Motorcycle Awareness
 - Youthful Driver (15 ½ - 24)
- Each Safe Communities program is required to conduct at least one interactive, evidence-based youthful driver (ages 15 ½ - 24) event to address seat belts, impaired driving, distracted driving, speed, and other risky driving behaviors. Examples of a youthful driver event include, but are not limited to Think Fast, Arrive Alive, Cinema Drive, partnering with SADD and/or FCCLA, or another youth focused event (high-school/college sporting events) that addresses traffic crash (fatal or serious injury) problem identification. OTSO recommends scheduling the event during National Teen Driver Safety Week, Prom, Homecoming, or Distracted Driving Month.

Community Health Foundation 2022-2023 Grant Funding Request CHIP Priority: Access to Care



Background

Clark County is home to a diverse population with equally varied health needs. Just over 9% of the population is Black or African American. More than 4% of the entire documented Clark County population identifies as Hispanic or Latino. Ample work opportunities and simple word-of-mouth has also made Clark County a settling place for substantial numbers of people from Haiti. While the 2020 United States Census does not include complete data on the number of Haitians in Clark County, according to numerous county officials the current population is estimated to be several thousand and has grown exponentially in the last year. Along with minorities that are already living here, new refugees are anxious to make Springfield their new multi-generational location to live and work. In addition to racial diversity, Clark County's population profile includes other social characteristics that have significant impacts on health outcomes. Only 19% of the county population has a bachelor's degree or higher and the median household income is \$50,873 with 21% of children living in poverty. Clark County ranks 80 out of 88 counties in Ohio for overall health outcomes according to the 2022 Robert Wood Johnson Foundation's County Health Rankings. Additionally the last two Community Health Improvement Plans have identified "access to care" as a top priority for the county.

Problem

The COVID-19 pandemic has slowed attempts to build equitable access to care in Clark County. Historically pandemics have been categorized as "equalizers;" they affect everyone regardless of socioeconomic factors. Thus far, COVID-19 has had the opposite effect. The virus has only highlighted social inequalities in health that have profoundly, and unevenly, impacted morbidity and mortality in our community. Splintered efforts have attempted to serve the unique social and health needs of minorities. Without an intentional, equitable way of accessing the healthcare and social service system, we can expect the health outcomes of our underserved minority residents to suffer in the coming years. Not only will this degrade both individual and population health, but the healthcare system as a whole will also be overly taxed as preventable or manageable chronic conditions will significantly impact the established system. While the term health equity is used widely, a mutual understanding of what it means is lacking. In the most basic sense, health equity means that everyone has a fair and just opportunity to be as healthy as possible. Working towards health equity involves much more than increasing access to services that encourage healthy outcomes. The work of equity requires removing obstacles to health such as poverty, discrimination, and their consequences, including powerlessness and lack of access to good jobs with fair pay, quality education and housing, safe environments, and health care. There is a clear distinction between health disparities and health inequities; health disparities imply differences in outcomes across groups while health inequities imply unfair and unjust differences. Health inequities are the preventable differences in the distribution of disease and death that are systematic, patterned, unjust, and associated with imbalances in power and established systems. To achieve health equity, our county must continue to move beyond identifying health disparities. We must actively address the somewhat overwhelming imbalances and systems of oppression that create and perpetuate inequity and provide equal access to care.

Intervention

Access to health services and the central coordination of resources in a high "social vulnerability index" location is key to addressing some of the health inequities affecting minority communities. Locating a public health access point (herein termed the Clark County Minority Health Connection) on South Limestone Street, south of Rocking Horse Community Health Center, will allow for outreach to and case management of underserved populations including but not limited to Hispanics, Haitians, and Black/African Americans. The Clark County Combined Health District is progressing with plans to acquire an existing building for public health services and

Intervention (continued)

resource coordination in and around census tracts 11 and 12 along South Limestone Street. This new access point will create a trusted central point of coordination and service delivery to address the social determinants of health, improve health outcomes, and decrease health disparities. It will also connect residents to primary care, education resources, insurance/Medicaid, work opportunities, safe housing, food resources, transportation, language and literacy resources, and places of worship. The Clark County Combined Health District is seeking funding to renovate and equip a repurposed building along the South Limestone corridor.

Success

Success will be defined by the opening of a new access point for public health services and gaining the trust of the population for whom it is designed to serve and achieving goals in the Community Health Improvement Plan that focus on groups that are disproportionately (due to a social determinant of health) affected by preventable morbidity and mortality.

Budget and Timeline

The Clark County Combined Health District is requesting funding in the amount of up to \$100,000 to support some of renovation and equipping of a new access point and partial first-year facility costs associated with the new location. The total estimated cost to renovate and equip the new access point is \$150,000. Expenses will include the removal of existing equipment, repairs of floors, walls, and ceilings, installation of new information technology equipment, and installation of new and existing healthcare equipment. Year one net revenue will be zero as income will likely just meet operational expenses. Opening of the new access point is projected to be in January 2023.

Other Funding Sources

The Clark County Combined Health District is positioned to staff and operate this new access point following year one renovation and equipping expenses. The Health District is also ready to commit internal dollars from the Medicaid Administrative Claiming fund.

Partnerships

Existing county partners with a vested interest in an access point on South Limestone include but are not limited to the Clark County Combined Health District, Community Health Foundation, City of Springfield, Rocking Horse Community Health Center, churches, Springfield City Schools, Family and Children First Council, Literacy Center, law enforcement, emergency medical services, Red Cross, Emergency Management Agency, Springfield City Area Transit, Job and Family Services, Board of County Commissioners, Chamber of Commerce, Mercy Health, and the Society of Saint Vincent de Paul.

Community Health Foundation 2022-2023 Grant Funding Request CHIP Priority: Maternal & Infant Health



Background & Problem

Overcoming infant morbidity and mortality have been deeply emotional challenges for Clark County and Ohio for multiple Community/State Health Improvement Plan cycles. Infant mortality is defined as the death of a live-born baby before his or her first birthday. An infant mortality rate is the number of babies who died during the first year of life per 1,000 live births. According to preliminary 2022 Community Health Assessment data, Clark County has an infant mortality rate of 7.4 deaths per 1,000 live births. For the first time since 2017, the Clark County infant mortality rate is higher than the Ohio average (6.8 per 1,000 live births). Across the United States the average is 5.8 infant deaths per 1,000 live births. The infant mortality rate among white babies in Clark County is 5.5 per 1,000. This rate disproportionately jumps to 10.8 per 1,000 African American/Black babies in the county. Ohio's target is to achieve 5.0 or fewer infant deaths per 1,000 live births in every racial and ethnic group, which is the national Healthy People 2030 objective. In addition to infant mortality, Clark County has a significant opportunity to improve infant morbidity rates as well. Just over 12% of all babies born in Clark County are considered pre-term. This is troublingly higher than the Ohio average of 10%. Aligned with the state average, nearly 10% of babies born in Clark County are categorized as low birth weight with the non-Hispanic African American/Black population a bit higher at just over 11%. To reduce infant mortality and morbidity on a population-level, intervention efforts must extend beyond women with a prior preterm birth and focus on the women most vulnerable to experience a preterm birth and high-risk outcomes. Additional intensive interventions are needed with prenatal care to reduce morbidity, mortality, prematurity, and more importantly racial disparities in these outcomes at the population level. Racial inequities is a primary contributor to widening disparities in Ohio's infant mortality rate and premature births. This problem can only be solved by addressing both health and social factors that contribute to adverse birth outcomes. With a new focus on the social determinants of health (and the recognition that these contribute directly to maternal and infant outcomes), the entire healthcare system can help to reduce racial disparities with our most vulnerable population.

Intervention

As a result of target goals outlined in the 2020-2022 Community Health Improvement Plan, most Clark County maternal health providers and care teams are completing the Social Determinants of Health screenings in their practices. Unfortunately the coordination of resources and intensive case management needed as a result of these screenings does not readily exist in the community. The need is great for this type of resource following a screening. Rocking Horse Center identified 35 patients from November 2021 alone who would qualify for a screening referral. Similarly, Dr. Osterholt's practice recently estimated they see 400 patients each year who would qualify for a referral. Furthermore, Mercy Health has screened over 1,000 people since mid-February and found 272 patients with needs in at least two of the primary areas of food, housing, finances/utilities, transportation, or safety. In partnership with Mercy Health, the Clark County Combined Health District proposes to begin a Maternal and Infant Vitality program with a full time Community Health Worker. With this program in place, providers can screen for the Social Determinants of Health and refer the patient directly into the Maternal and Infant Vitality program. If a patient affirmatively answers two or more screening items (identifying barriers to care and health outcomes), the patient would be referred to the Community Health Worker for case coordination. The Community Health Worker would work to provide interventions directly to patients and connect them with existing resources and wrap-around services in the community. The Community Health Worker may also utilize a program such as the March of Dimes "Toward Improving the Outcome of Pregnancy III" and would work to build relationships with Obstetrics providers, midwives, and doulas in the community. The systems goals of this program include reducing infant mortality rate in all ethnic and racial groups, reducing

Intervention (continued)

low birth weight babies born in the county, and reducing the pre-term births. While the Clark County Combined Health District will manage the personnel working in the Maternal and Infant Vitality program, the staff and program will be fully embedded in the community. Personnel will work in partner agency locations and will interact with patients in their homes as needed.

Success

Pregnancy and early life are critical times to ensure healthy development, address health risks, and prevent future problems for women and their children. Their wellbeing determines the health of the next generation and can help predict the future public health challenges for families and communities. The Community Health Worker will carry an average caseload of thirty (30) patients. These patients will be expectant mothers who are at high risk for a pre-term birth, a low birth weight baby, or are at risk of infant morbidity or mortality within the first year of life because of at least two identified social determinants of health as barriers to healthy outcomes. System goals of this program include reducing infant mortality rate in all ethnic and racial groups, reducing low birth weight babies born in the county, and reducing the pre-term births. Additional successes include but are not limited to decreasing or eliminating tobacco, drug, and alcohol use during pregnancy, reducing incidence of gestational diabetes, increasing folic acid use, reducing perinatal sexually transmitted infections, preparing mothers for breastfeeding, identifying and controlling lead hazards where the child will live, reducing maternal obesity, and decreasing hypothyroidism during pregnancy.

Budget and Timeline

The Clark County Combined Health District is requesting funding in the amount of \$100,000 to hire a full time Community Health Worker, part time (or contract) supervisor for the Community Health Worker, and associated program materials for maternal and infant vitality coordination. This includes \$70,000 in salary and benefits for the Community Health Worker, \$10,000 in salary for the supervisor, \$2,000 in training, \$9,000 in interpreter services, \$5,000 in incentives and patient transportation, and \$4,000 in equipment, supplies, and licenses. The position of Community Health Worker will be posted and hired within three months of grant funding. The Clark County Combined Health District anticipates that the Maternal and Infant Vitality program will need to be funded for five years to allow for program maturity and outcome assessment. This request is for 100% of the program funding for year one. If subsequent funding is available and aligned with the CHIP, the Health District anticipates requesting 90% funding for year two, 80% for year three, 70% for year four, and 60% for year five.

Other Funding Sources

The Community Health Worker will be trained and enrolled in the Pathways Hub within the first year of employment. The Pathways Hub is a proven model for social determinants of health assessment, case management, and resource prioritization. Billing to and through the Pathways Hub will begin by the end of year one. The Pathways Hub has several “pay points” for services delivered to patients. Intervention sessions for activities such as tobacco cessation and a final healthy birth are examples of pay points. While not a high-paying endeavor, an average patient may produce a total of \$1,000 in pay points during a pregnancy in the Pathways Hub. Consistent pay points in the Pathways Hub are realistically achievable by the beginning of year two. Therefore, net revenue of zero dollars is anticipated for year one. Additionally the Community Health Worker may integrate into the Clark County Early Childhood and/or Help Me Grow program which would partially qualify for Ohio Department of Health home visiting funding.

Partnerships

Existing county partners with a vested interest in a Community Health Worker working in Maternal and Infant Vitality include but are not limited to the Clark County Combined Health District, Help Me Grow, Women Infants and Children, Early Childhood, OBGYN/Mercy Health, Physicians and Surgeons for Women, Community Health Foundation, City of Springfield, Rocking Horse Community Health Center, churches, Springfield City Schools, Family and Children First Council, emergency medical services, Red Cross, Emergency Management Agency, Springfield City Area Transit, Job and Family Services, Board of County Commissioners, Chamber of Commerce, and the Society of Saint Vincent de Paul.

Career Ladder Framework: Public Health Nurse (PHN)

Resources:

1) The Public Health Intervention Wheel; Public Health Interventions: Applications for public health nursing practice (2nd ed.). Minnesota Department of Health. (2019).

<https://www.dhs.wisconsin.gov/phnc/interventionwheel.htm>

2) Foundations of Public Health. School of Public Health- University at Albany. <https://www.albany.edu/cphce/certificates.shtml>

	PHN Level 1	PHN Level 2	PHN Level 3	PHN Level 4
Paygrade	23	24	25	26
Education or Degree Needed	Associates, Diploma or Bachelors	Associates, Diploma or Bachelors	Associates, Diploma or Bachelors and completion of University of Albany's Foundations of Public Health Certificate (approximately 12- 16 hours); equivalent public health certificates will be evaluated on case by case basis.	1) MSN or MPH; equivalent graduate degrees will be evaluated on a case-by-case basis OR 2) A degree step up, obtained since date of hire (e.g. diploma to BSN or BSN to MPH) OR 3) select lateral bachelor's degrees obtained since date of hire (evaluated on a case by case basis)
Transition	Upon hire	Upon completion of elements, expected within 18 months of hire	Upon completion of all elements, within an 18-month period	Upon completion of all elements within a 24-month period.
Attendance	N/A	Except for FMLA, leave usage due to sick or medical purposes must be: (TBD)	Except for FMLA, leave usage due to sick or medical purposes must be: (TBD)	Except for FMLA, leave usage due to sick or medical purposes must be: (TBD)
Corrective Action or reprimands	N/A	No corrective action /reprimands within the past 12 month of review	No corrective action plans /reprimands within the past 18 months of review	No corrective action plans /reprimands within the past 24 months of review
Direct Services: Immunizations, if applicable	<ul style="list-style-type: none"> Immunization Clinics: Conduct client assessments, make appropriate referrals, administer vaccines according to ACIP and ODH guidelines, provide client education, complete documentation, including electronic medical records; 	For 90% or more of the time: <ul style="list-style-type: none"> Fully competent in utilizing immunization resources for all childhood and adult vaccinations Can recall from memory routine aspects of childhood and adult vaccinations Can demonstrate the steps to take and the conversation to 	Demonstrates correct approach to taking call from client who has had a reaction that they believe is tied to vaccination; completes VAERS report accordingly and tracks system. Actively participates in at least one fully documented quality	

Career Ladder Framework: Public Health Nurse (PHN)

	PHN Level 1	PHN Level 2	PHN Level 3	PHN Level 4
		<p>be had with vaccine hesitant families</p> <ul style="list-style-type: none"> • Can draw vaccine from multidose vials, demonstrating correct technique. • Can manage drawing and preparing multiple vaccines for one encounter • Gives vaccines demonstrating proper technique • Advises and schedules client for return visit to optimize protection from vaccine preventable disease. • Can manage vaccine handling and storage responsibility to include identify temperature excursions and work through necessary steps to resolve the excursion and any vaccine quarantines that need to be implemented. • Completes all required vaccination updates and courses as determined by program manager. • Demonstrates the correct response for syncopal episodes for allergic reactions and cardiac event (either through real-life or exercise) 	<p>improvement project related to vaccinations.</p> <p>Provides __(#) trainings to licensed workforce regarding immunizations (includes, but not limited to MOBI, TIES, school nurse education.)</p> <p>Assists with AFIX or school record review</p> <p>Demonstrates ability to help client complete a Medicaid application when there is no health insurance coverage</p> <p>Assist with chart audits, quality assurance and client satisfaction process development, data collection, analysis, and related PDCA</p> <p>Participate in project to identify, plan and implement an intervention related to health disparities in immunizations.</p> <p>Write part of the ODH grant application or write an application to another funder for immunization program for no less than \$5,000.00. Work with supervisor to get board approval, to set up budget and to coordinate asks.</p>	
Direct Services: SHW, if applicable	<ul style="list-style-type: none"> • completes assessment, performs interviews, disease investigation, 	For 90% or more of the time:	Demonstrates ability to help client complete a Medicaid application when there is no health insurance coverage	

Career Ladder Framework: Public Health Nurse (PHN)

	PHN Level 1	PHN Level 2	PHN Level 3	PHN Level 4
	<p>education, reporting, referrals as necessary, perform labs, prepare specimens, confers with doctor, staff and providers regarding client and health issues, responsible for client education, including HIV education and follow-up procedures for positive results, develops plan of care, maintains appropriate forms and documentation, maintain a knowledge of and working relationship with local and state health and social resources.</p>	<ul style="list-style-type: none"> • Fully competent in rooming clients, completing evaluation and assessment of client • Set up and assist Nurse Practitioner with procedures, such as LARC insertion • Can demonstrate the treatment competency with correct technique • Can demonstrate phlebotomy and specimen collection with correct technique at least 70% of the time • Can demonstrate correct process for providing results on the phone, in person • Demonstrates the proper process for maintaining med count • Completes all required RHW/SHW updates and courses as determined by program manager. • Demonstrates the correct response for syncopal episodes for allergic reactions and cardiac event (either through real-life or exercise) 	<p>Write part of the ODH grant application or write an application to another funder for RHW program for no less than \$5,000.00. Work with supervisor to get board approval, to set up budget and to coordinate asks.</p> <p>Assist with chart audits, quality assurance and client satisfaction process development, data collection, analysis, and related PDCA</p> <p>Participate in project to identify, plan and implement an intervention related to health disparities in sexual health and wellness.</p>	
Case Management Services: CMH, if applicable	<ul style="list-style-type: none"> • maintain and manage a caseload of clients, conduct home visits, provide assessment, planning, service coordination, education, referrals, Knowledge of and development of a working relationship with local community and state 	<p>For 90% of the time:</p> <ul style="list-style-type: none"> • Maintain assigned case load; • Consistently have at least 80% of hours on this project be billable. • Completes all required RHW/SHW updates and courses as determined by program manager. 	<p>Assist with chart audits, quality assurance and client satisfaction process development, data collection, analysis, and related PDCA</p> <p>Close loop through follow-up with referrals 50% or more of the time.</p>	<p>Close loop through follow-up with referrals 80% or more of the time.</p>

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	PHN Level 1	PHN Level 2	PHN Level 3	PHN Level 4
	<p>health and social resources; agencies, hospitals, institutions, specialty clinics; documentation and reporting; access resources to research diseases and conditions.</p>	<ul style="list-style-type: none"> • Be familiar with resources and immunization schedules to the level that record review and recommendations can be given. • Maintain a client satisfaction rating of 90% • Maintain a retention rate of: 	<p>Participate in project to identify, plan and implement an intervention related to health disparities in programs serving Children with Medical Handicaps.</p> <p>Analyze data to identify an outreach need; plan and implement outreach on an annual basis (each outreach should have objectives and goals and the success of the outreach should be measured against original objectives)</p> <p>Write an application to another funder for services related to families who are often referred to the CMH program for no less than \$5,000.00. Work with supervisor to get board approval, to set up budget and to coordinate asks.</p>	
<p>Disease Investigation Services: CD, if applicable</p>		<p>For 90% of the time:</p> <ul style="list-style-type: none"> • Complete assigned disease investigations and provide public health recommendations independently • Assist with chart audits, quality assurance and client satisfaction process development, data collection, analysis, and related PDCA • Meet established quality indicator measures as well as internal disease audit standards 80% of the time 	<p>Assist with chart audits, quality assurance and client satisfaction process development, data collection, analysis, and related PDCA</p> <p>Participate in project to identify, plan and implement an intervention related to health disparities in immunizations.</p> <p>Analyze data to identify an outreach need; plan and implement outreach on an annual basis (each outreach should have objectives and goals and the success of the outreach</p>	<p>Close loop through follow-up with referrals 80% or more of the time.</p>

Career Ladder Framework: Public Health Nurse (PHN)

	PHN Level 1	PHN Level 2	PHN Level 3	PHN Level 4
		<ul style="list-style-type: none"> Completes all required CD updates and courses as determined by program manager. 	should be measured against original objectives) Write an application to a funder for services related to the control and prevention of CD for no less than \$5,000.00. Work with supervisor to get board approval, to set up budget and to coordinate asks.	
Intervention Wheel: Surveillance				Design, implement and evaluate a surveillance project at a community or systems focused level; consider relationship with case finding, if applicable
Intervention Wheel: Disease and Health Event Investigation				
Intervention Wheel: Outreach	Provide disease prevention and health promotion education to clients and families in a variety of settings: health fairs, clinic, homes, classrooms and other sites as requested.	Represent CCCHD at a public event (health fair, etc.) to include setting goals/objectives, planning design and evaluating the outcomes against original goals/objectives	Design, implement and evaluate an outreach project at a community or systems focused level.	
Intervention Wheel: Screening and Case Finding <i>(*PHNs involved with Lead, Hearing and Vision must complete)</i>		Use the framework found in the Intervention Wheel to measure an existing screening program and assure all aspects are considered through documentation Pair with "Intervention Wheel: Case Finding"	Design, implement and evaluate a screening project. Pair with "Intervention Wheel: Case Finding"	
Intervention Wheel: Referral and Follow-up		Use the framework found in the Intervention Wheel to measure an existing screening program and	Document and demonstrate practice of routine referral and follow up skills, noting 12 or more examples	

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	PHN Level 1	PHN Level 2	PHN Level 3	PHN Level 4
(*PHNs involved with Lead, Hearing and Vision must complete)		<p>assure all aspects are considered through documentation</p> <p>Document and demonstrate practice of routine referral and follow up skills, noting 5 or more examples</p>		
Intervention Wheel: Case Management (*PHNs involved with Communicable Disease, Children with Medical Handicaps, Lead must complete)		Use the framework found in the Intervention Wheel to measure an existing case management program and assure all aspects are considered through documentation		
Intervention Wheel: Delegated Functions	N/A	N/A	TBD	TBD
Intervention Wheel: Health Teaching	Deliver group presentations for agencies, clubs, businesses, and other organizations in the community.	Demonstrate skill competency by documenting 2 examples of health teaching at an individual level	Demonstrate skill competency by documenting 3 examples of health teaching at a community level	Demonstrate skill competency by documenting 2 examples of health teaching at a systems level.
Intervention Wheel: Counseling		Demonstrate skill competency by documenting 2 examples of counseling at an individual level	Demonstrate skill competency by documenting 2 examples of counseling at a community level	Demonstrate skill competency by documenting 2 example of counseling at a systems level.
Intervention Wheel: Consultation		Demonstrate skill competency by documenting 3 examples of consultation at an individual level	Demonstrate skill competency by documenting 3 examples of consultation at a community level	Demonstrate skill competency by documenting 2 examples of consultation at a systems level.
Intervention Wheel: Collaboration			Represent CCCHD in at least 1 community level collaborative process; use Wheel framework to identify role in the collaboration and be able to document alignment between your involvement and the	

Career Ladder Framework: Public Health Nurse (PHN)

	PHN Level 1	PHN Level 2	PHN Level 3	PHN Level 4
			framework described at a community level.	
Intervention Wheel: Coalition Building			Represent CCCHD in at least 1 community level coalition; use Wheel framework to identify role in the coalition and be able to document alignment between your involvement and the framework described at a community level.	
Intervention Wheel: Community Organizing				Represent CCCHD in at least 1 community level community organizing project; use Wheel framework to identify role in the project and be able to document alignment between your involvement and the framework described at a systems level.
Intervention Wheel: Advocacy			TBD	TBD
Intervention Wheel: Social Marketing			Demonstrate skill competency by documenting 1 examples of social marketing at an individual, community or systems level.	
Intervention Wheel: Policy Development and Enforcement				Demonstrate skill competency by documenting 1 example of involvement with policy development or enforcement at a community or systems level.
Public Health Representation			Present poster summary of a public health project that you were involved in. Presentation can be an internal cross divisional or local coalition/collaboration.	Present professional poster or presentation at professional conference.
Program or Project Planning	Know where to access procedures for CCCHD program or project.	In collaboration with management: <ul style="list-style-type: none"> Review and revise procedures as needed; send revisions for 	Demonstrate skill competency by taking the lead ownership of at least 1 project that needs implemented.	

Career Ladder Framework: Public Health Nurse (PHN)

	PHN Level 1	PHN Level 2	PHN Level 3	PHN Level 4
	<p>Make suggestions for changes.</p> <p>Be involved in PDCA process for quality improvement.</p>	<p>approval from nursing management.</p> <ul style="list-style-type: none"> • Create checklists or tools to assist in documentation and organization. • Assist in evaluation of effectiveness of tools and PDCA as needed. • Utilize CCCHD’s Program Planning and Evaluation tool to evaluate program and prioritize areas for program growth. • Train co-workers, volunteers, students as needed; provide oversight as necessary (e.g. POD manager) 		