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**CITY OF YORK - BUREAU OF HEALTH**

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## *City of York - Bureau of Health*

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### ***Vision:***

*A York community that is healthy, safe and free of disease.*

### ***Mission:***

*To prevent disease and to promote and protect the health of York City residents through the assessment of needs, the assurance of public health services and the provision of sound public health policies through dynamic and committed leadership.*

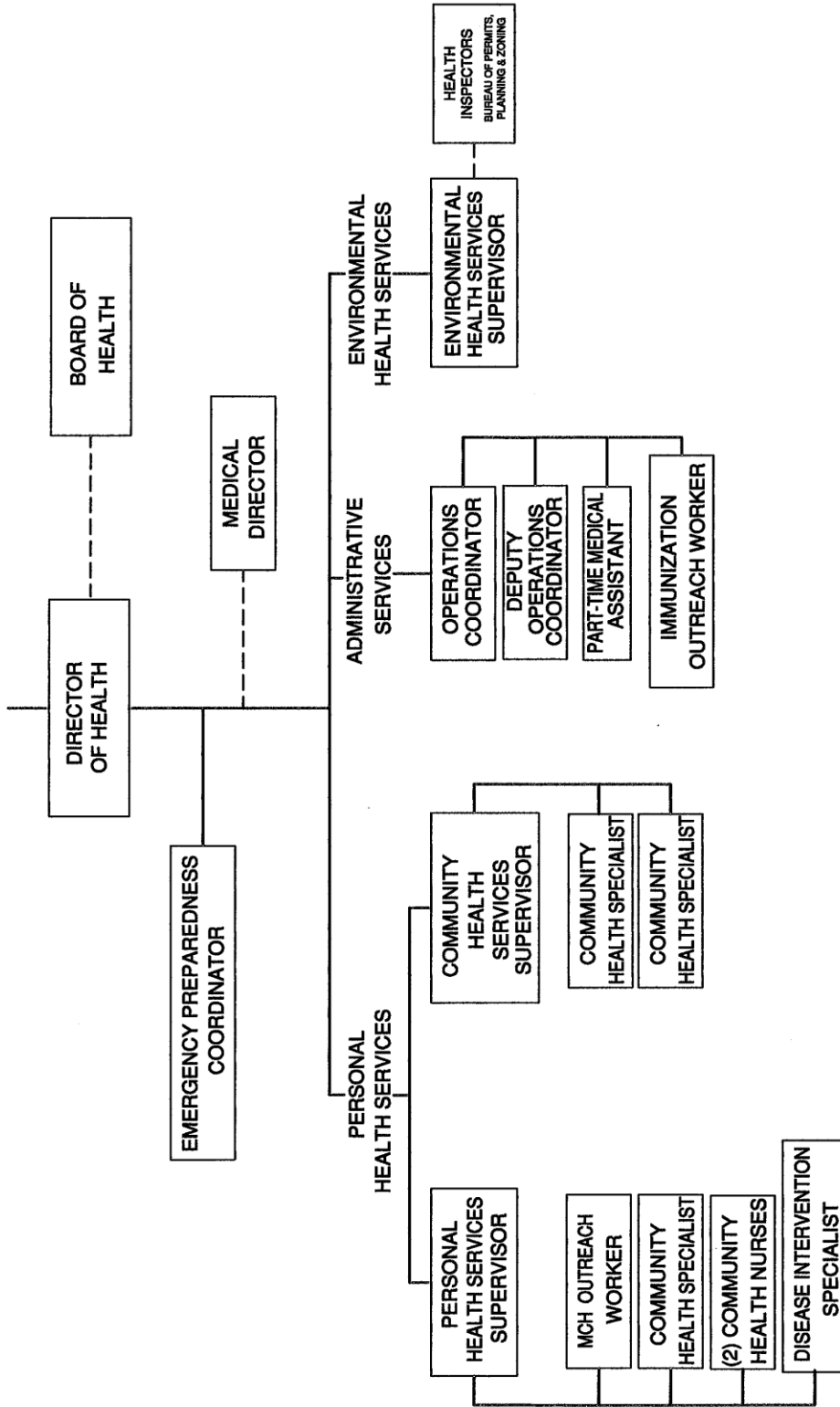
**LOCAL HEALTH DEPARTMENT BUDGET & EXPENDITURE** 2016 Budget

Act 315/12, PA Code: Title 28, Chapter 15 County/Municipal: York City Bureau of Health

**NOTE: data entry in yellow areas only**

Program Description	Total Funds	Exclusions, Grants, Etc.	Subsidy Base	Act 12 Funds	Act 315 Funds
<i>Administrative/Supportive Services:</i>					
Admin/Laboratory/Support Services	\$ 293,168		\$ 293,168		\$ 293,168
Bioterrorism	\$ 279,000	\$ 279,000	\$ -		
<b>TOTAL</b>					
<b>Administration (Sec 15.12)</b>	<b>\$ 572,168</b>	<b>\$ 279,000</b>	<b>\$ 293,168</b>	<b>\$ -</b>	<b>\$ 293,168</b>
<i>Personal Health Services:</i>					
			\$ -		\$ -
Cardiovascular Disease	\$ 250,000	\$ 250,000	\$ -		\$ -
Chronic Disease Control	\$ 138,000		\$ 138,000		\$ 138,000
Communicable Disease Control	\$ 176,337		\$ 176,337		\$ 176,337
Dental Health	\$ 46,330	\$ 46,330	\$ -		\$ -
EMS	\$ 90,000		\$ 90,000		\$ 90,000
HIV/AIDS	\$ 160,000	\$ 155,000	\$ 5,000		\$ 5,000
Immunization	\$ 185,000	\$ 185,000	\$ -		\$ -
Injury Prevention	\$ 160,000	\$ 160,000	\$ -		\$ -
Maternal Child Health	\$ 72,000	\$ 72,000	\$ -		\$ -
Tuberculosis	\$ 7,500	\$ 7,500	\$ -		\$ -
<b>TOTAL</b>					
<b>Personal Health (Sec 15.13)</b>	<b>\$ 1,285,167</b>	<b>\$ 875,830</b>	<b>\$ 409,337</b>	<b>\$ -</b>	<b>\$ 409,337</b>
<i>Environmental Health Services:</i>					
Lead and Healthy Homes/HOPWA	\$ 13,500	\$ 13,500	\$ -		\$ -
Environmental Health & Safety Pgms	\$ 376,464		\$ 376,464	\$ 65,797	\$ 310,667
<b>TOTAL</b>					
<b>Environmental Health (Sec 15.14)</b>	<b>\$ 389,964</b>	<b>\$ 13,500</b>	<b>\$ 376,464</b>	<b>\$ 65,797</b>	<b>\$ 310,667</b>
<i>Other Services:</i>					
n/a			\$ -		\$ -
<b>Other Services</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>
<b>TOTAL: Administrative</b>	<b>\$ 572,168</b>	<b>\$ 279,000</b>	<b>\$ 293,168</b>	<b>\$ -</b>	<b>\$ 293,168</b>
<b>TOTAL: Personal Health</b>	<b>\$ 1,285,167</b>	<b>\$ 875,830</b>	<b>\$ 409,337</b>	<b>\$ -</b>	<b>\$ 409,337</b>
<b>TOTAL: Environmental Health</b>	<b>\$ 389,964</b>	<b>\$ 13,500</b>	<b>\$ 376,464</b>	<b>\$ 65,797</b>	<b>\$ 310,667</b>
<b>TOTAL: Other Services</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>
<b>SUM: Qualifying Health Program</b>	<b>\$ 2,247,299</b>	<b>\$ 1,168,330</b>	<b>\$ 1,078,969</b>	<b>\$ 65,797</b>	<b>\$ 1,013,172</b>
<b>TOTAL: Exclusions and Grants</b>		<b>\$ 1,168,330</b>		<b>\$ 65,797</b>	
<b>SUM: Local Health Dept. Program</b>					<b>\$ 1,013,172</b>
Analysis by	Position		Agency		Date
Barbara Kovacs	Director		York City Bureau of Health		3/9/2016

# Bureau of Health Community Development



REV. 03-2016  
REV. 03-2013  
REV. 03-2013  
REV. 02-2012  
REV. 02-2010

## **Introduction**

The City of York resides within the County of York, which comprises 1,000 square miles abutting the Mason-Dixon Line. The City of York - Bureau of Health is responsible for the health and wellbeing of 43,718 York City residents (2010 U.S. Census), within a 5.2 square mile radius and is slowly growing (2014 population estimate from U.S. Census is 43,865). York City, the County seat, is the largest urban environment in a county comprised of 72 different municipalities. It is the only 3<sup>rd</sup> class city in York County. Centrally located to the east coast metroplex areas of Baltimore, Washington D.C., Philadelphia and New York City, York City sits strategically astride the two major east west and north-south vehicle corridors of the east coast. It is a microcosm of other large urban areas.

The City of York operates under mayoral-council governance. The City of York - Bureau of Health sits under the Economic and Community Development Department, one of five departments that report directly to the Mayor. The other four include: Fire, Police, Business Administration and Public Works. An independent Board of Health monitors the Health Bureau's activities and is comprised of five members: city residents, physicians and professionals who live and/or work in the City.

York is a mixture of cultures and ethnic backgrounds. The 2010 U.S. Census indicates that 41% of the City's population is white non-Hispanic, 28.5% is Hispanic or of Latino origin, 28% is Black, 1.2% is Asian and .6% is American Indian and Alaska Native. With an array of cultures and ethnic groups in the City, language, cultural practices and lifestyle issues often pose challenges in health care delivery.

York has many public health problems similar to, and sometimes more severe than, other urban areas in the state and nation. Poverty and unemployment/underemployment are major issues in York. Unemployment in York City is consistently higher than the rest of York County, and is similar to other urban areas of Pennsylvania and the nation. The number of persons living below the poverty level (35%) indicates the extreme economic deprivation of some City residents. Poverty and under/unemployment contribute to financial barriers for residents seeking health care until a medical emergency or serious illness arises. This population neglects preventive care mainly due to education, finances, and access issues. Cancer and heart disease are the top two leading causes of death in 2013 among York City residents (37% of all deaths) followed by stroke (7%), non-transport accidents (6%) and chronic obstructive pulmonary disease (C.O.P.D.) (5%).

Other lifestyle or behavioral choices continue to plague the city. The city continues to experience a higher incidence of both teen births and infant mortality compared to the county and state. HIV infection and large numbers of sexually transmitted infections due to gonorrhea and chlamydia are consistently higher than county rates and in most cases, state rates.

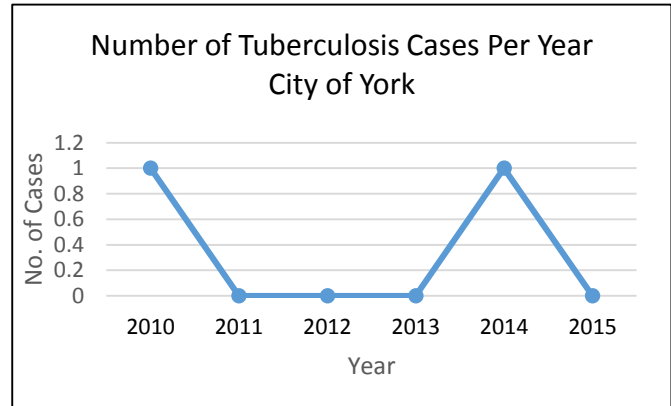
To assist in prioritizing public health initiatives, the Health Bureau monitors various conditions in the population as set by the federal and state Healthy People 2010 and 2020 initiatives. Preparing the Annual Health Plan is one of the processes that brings the Health Bureau staff together to evaluate and assess our public health interventions within York City and assist us in identifying the needs of the constituents we are here to serve. As with any plan, it is a work in progress. Our stated goals provide us with guidance, not intended to limit what can be accomplished, but lay a foundation from which to start.

## Local Public Health Statistics

### Tuberculosis

**HP 2020 IID-29:** Reduce Tuberculosis to 1.0 per 100,000 (2005 Baseline: 4.9/100,000). Zero cases of active Tuberculosis were reported in 2015.

<b>Tuberculosis Rates/Cases – York City</b>	
<u>Annual Rates (cases)</u>	<u>3-Year Avg. Rates</u>
2012 - 0.0 (0)	2010-2012 - 0.8
2013 - 0.0 (0)	2011-2013 - 0.0
2014 - 2.4 (1)	2012-2014 - 0.8
2015 - 0.0 (0)	2013-2015 - 0.3

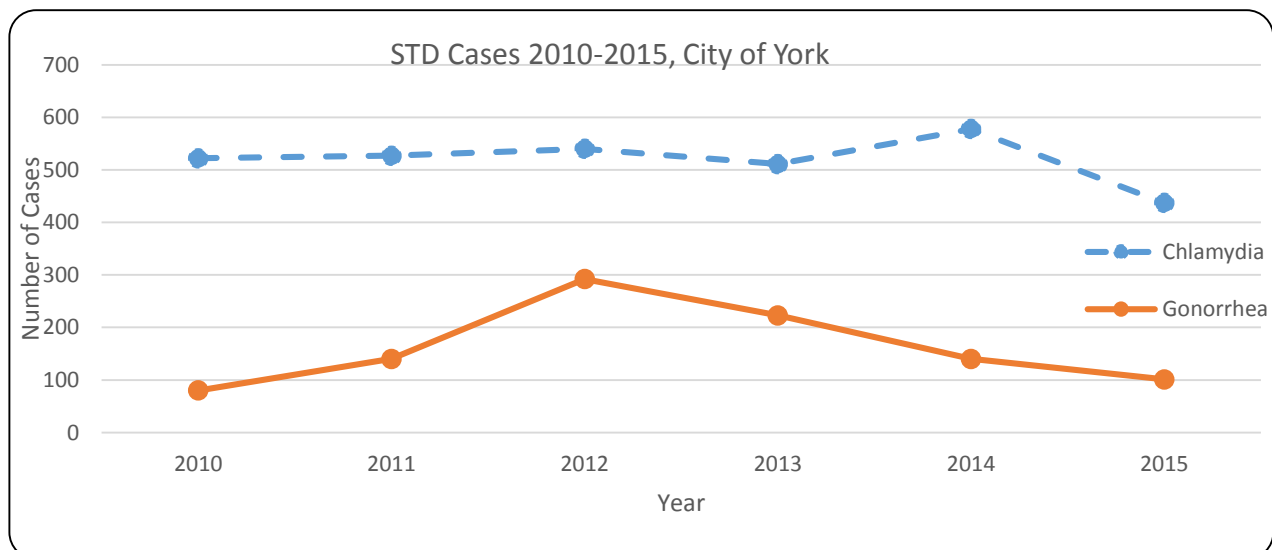


### Sexually Transmitted Diseases

**HP 2020 Objectives** are not comparable to City of York - Bureau of Health measurable indicators. Of note, Chlamydia has increased yearly since 2005 until 2014, and Gonorrhea increased yearly since 2010 until 2012 and we are now seeing a decline in case reports. The three year average rates have seen a significant drop.

<b>Chlamydia Rates/Cases – York City</b>	
<u>Annual Rates (cases)</u>	<u>3 Year Avg. Rates</u>
2011 - 1205.5 (527)	2009 - 2011 - 1240.4
2012 - 1235.2 (540)	2010 - 2012 - 1239.4
2013 - 1168.9 (511)	2011 - 2013 - 1203.2
2014 - 1322.1 (578)	2012 - 2014 - 1242.1
2015 - 999.6 (437)	2013 - 2015 - 1163.5

<b>Gonorrhea Rates/Cases – York City</b>	
<u>Annual Rates (cases)</u>	<u>3 Year Avg. Rates</u>
2011 - 320.2 (140)	2009 - 2011 - 282.1
2012 - 667.9 (292)	2010 - 2012 - 394.7
2013 - 510.0 (233)	2011 - 2013 - 499.3
2014 - 320.2 (140)	2012 - 2014 - 499.4
2015 - 231.0 (101)	2013 - 2015 - 353.7



## HIV/AIDS

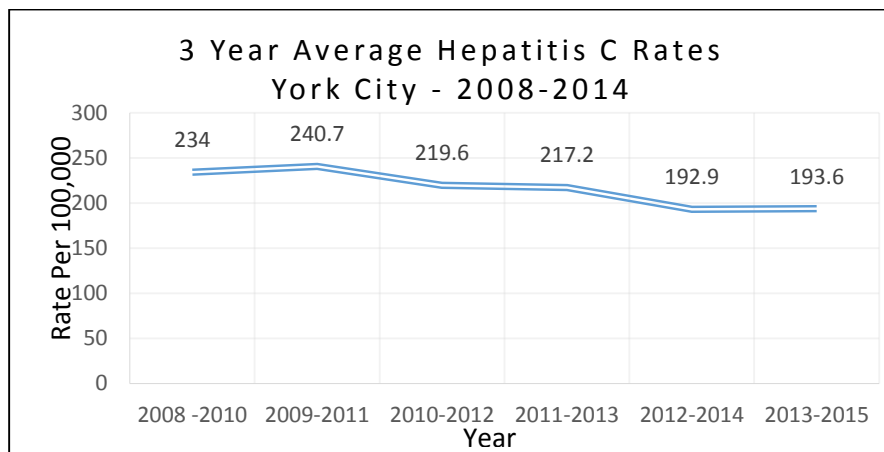
The Health Bureau conducted four hundred six HIV tests in 2015 with five (5) positive tests. Fourteen partners received Partner Services, including an HIV test.

**HP 2020 HIV-1:** Reduce the number of new HIV diagnosis among adolescents and adults. \*Source: PA Department of Health

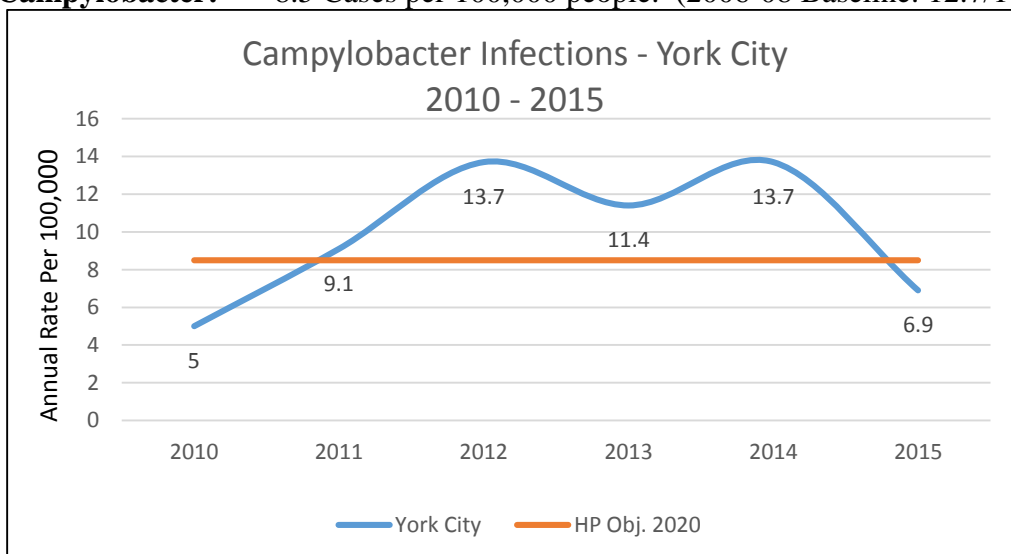
<b>* New HIV Infection-York City Residents</b>	
<u>Annual Rates (cases)</u>	
2011 –	66.3 (29)
2012 –	34.3 (15)
2013 –	50.3 (22)
2014 –	38.9 (17)
2015 –	45.7 (20)

## Communicable Diseases

**HP 2020 IID-26:** Reduce new hepatitis C infections to no more than 0.2 new cases/100,000 (2007 Baseline: 0.3/100,000). Hepatitis C cases reported to the Bureau of Health are chronic cases, not new cases.

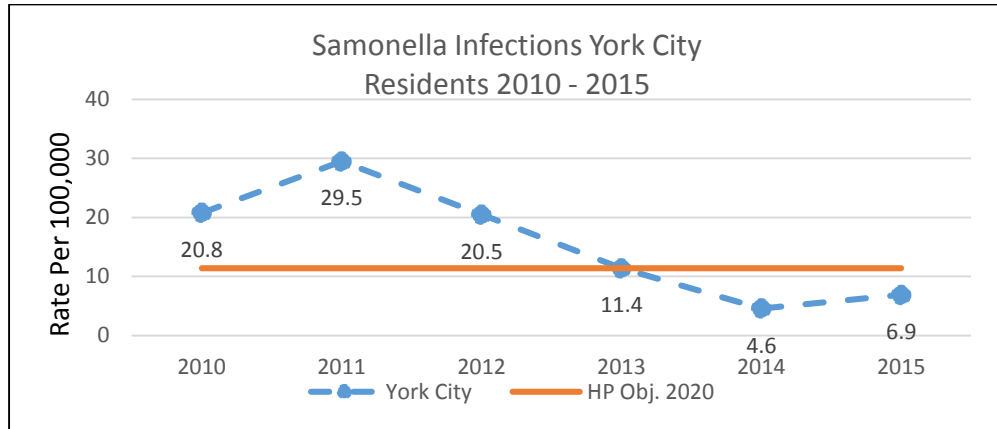


**P2020 FS-1:** Reduce infections caused by key foodborne pathogens to incidences of no more than:  
**FS-1.1 Campylobacter:** 8.5 Cases per 100,000 people. (2006-08 Baseline: 12.7/100,000)





**FS-1.4 Salmonella:** 11.4 Cases per 100,000 people. (2006-08 Baseline: 15.2/100,000)



There was no confirmed foodborne outbreak in 2015.

**Animal Control**

Animal bites pose a public health problem to the community. Bites can lead to injuries and infectious diseases, including rabies. Animal bites comprise a public health concern when viewed as a public nuisance, a health threat to the victim, or a potential source of rabies infection.

The Animal Control Program involves the continued surveillance and appropriate epidemiological investigation of all animal bites reported to the Bureau of Health. Health Bureau staff provide education to community groups, children’s programs, and school students to prevent animal bites as well as to medical care providers for timely reporting.

Staff conducted follow-up investigations on 131 animal bites in 2015, an increase of 16% over 2014 reports

<b>Number of animal bites reported:</b>	
<b><u>Annual number:</u></b>	<b><u>Three-Year Average:</u></b>
2011 - 85	2009-2011 - 79
2012 - 83	2010-2012 - 78
2013 - 103	2011-2013 - 90
2014 - 113	2012-2014 - 100
2015 - 131	2013-2015 - 116

**Reportable Conditions Summary  
Report for Year 2015  
City of York, Pa.**

Overall, the total number of Reportable Conditions, primarily communicable diseases, in the City of York decreased slightly in 2015 according to records compiled by the City of York - Bureau of Health. In 2015 there was a total of 1,000 reports received compared to 1,126 reports in 2014, a decrease of 11.2%.

The most frequently reported group of conditions in the City of York for 2015 continued to be Sexually Transmitted Diseases (STD's): first Chlamydia – 437 reports and second Gonorrhea – 101 reports. Chlamydia showed a 24% decrease and Gonorrhea decreased by 28% from 2014 to 2015. There were 5 cases of primary or secondary Syphilis reported in 2015. Sexually active teens and young adults in their 20's comprise the bulk of STD cases. Behavioral studies show that this age group is more likely to engage in unprotected intercourse and have sex with multiple partners.

The second most frequently reported condition was Animal Bites with 131 cases in 2015 compared to 113 cases in 2014, representing a 16% increase. Public awareness efforts such as dog bite prevention programs for children and dog law enforcement efforts by the City Police Department's Animal Enforcement Officer continue.

Hepatitis C cases increased from 78 in 2014 to 86 in 2015, a 10% increase. Hepatitis B cases increased by 5 cases - from 4 cases in 2014 to 9 cases in 2015. There have been no cases of acute Hepatitis A for the past three years.

Respiratory Syncytial Virus (RSV) infection increased by 32% from 2014 to 2015 with 53 and 70 cases, respectively. RSV causes an acute febrile, respiratory illness, occasionally severe enough to require hospitalization and is especially harsh on infants and children under two years of age. It is the major known etiologic agent of bronchiolitis and is a cause of pneumonia, croup, bronchitis, otitis media and febrile upper respiratory illness. RSV may cause symptomatic disease also in adults, particularly the debilitated elderly.

<b>Reportable Conditions – City of York, Pa Summary Report 2014-2015</b>			
<b>Reported Cases</b>	<b>2014</b>	<b>2015</b>	<b>% Change</b>
Animal Bites	113	131	↑16%
Campylobacter Enteritis	6	3	↓50%
Chikungunya	0	1	↑
Chlamydia	578	437	↓24%
Enterohemorrhagic E. Coli	0	1	↑
Giardiasis	1	1	0%-
Gonorrhea	140	101	↓28%
Hepatitis B	4	9	↑125%
Hepatitis C	78	86	↑10%
HIV Infection	17	20	↑17%
Influenza Type A	96	45	↓53%
Influenza Type B	17	16	↓6%
Influenza not specified	2	1	↓50%
Invasive Beta Strep Disease	2	0	↓
Legionnaire's Disease	2	0	↓
Lyme Disease	8	26	↑225%
Malaria	1	0	↓
Meningitis - Aseptic (Viral)	1	0	↓
Meningitis - Bacterial	0	1	↑
Meningitis - Fungal	1	0	↓
Pertussis	0	6	↑
Respiratory Syncytial Virus (RSV) Infection	53	70	↑32%
Salmonellosis	2	3	↑33%
Shigellosis	0	1	↑
Syphilis (primary)	0	5	↑
Syphilis (secondary)	0	2	↑
Toxoplasmosis	0	6	↑
Tuberculosis	1	0	↓
Varicella	3	0	↓
West Nile Virus	0	2	↑
<b>Total Case Reports</b>	<b>1126</b>	<b>1000</b>	<b>↓11.2%</b>

Influenza was the fifth most frequently reported condition. Sixty-two (62) cases of lab-test confirmed Influenza were reported in 2015 compared to 115 cases in 2014 – a decrease of 85% from one year to the next. The majority of Influenza infections were Type A. Type B Influenza infections occurred less frequently and mostly near the end of the Influenza season. Many more Influenza cases probably occurred in York for the year but were not reported to the Health Bureau since a laboratory test for Influenza was not always performed.

There were 20 new cases of HIV infection reported in York City residents in 2015, 3 more cases than the previous year. Individuals reported include males and females, whites and African-Americans, Latinos and non-Latinos, a wide range of adult ages, IV drug users, heterosexuals, and men who have sex with men (MSM). This diverse group remains a far cry from two and three decades ago when AIDS cases were primarily white, non-Latino MSM's. Also, in contrast to those early days of this epidemic, HIV infection has now become a treatable rather than a fatal disease. Regrettably, however, a cure for HIV infection still remains elusive.

Bacterial and parasitic infections that lead to vomiting, diarrhea, abdominal pain, as well as other gastrointestinal symptoms, decreased by 33% in 2015 compared to 2014. Cases of *Campylobacter* enteritis, Cryptosporidiosis, Giardiasis, and Salmonellosis totaled 8 in 2015 compared to 12 in 2014. No episodes of foodborne outbreak were reported in 2015.

Lyme Disease cases increased 225% in York City residents – 26 cases in 2015 compared to 8 cases in 2014. This infection results from tick bites and most frequently causes arthritic and neurological symptoms. Prompt antibiotic treatment can prevent or mitigate many complications. Lyme Disease is typically a much more frequent problem in rural and suburban areas elsewhere in York County than in urban York City, but in 2015, we saw as steep rise in case reports.

Meningitis cases in the City decreased from 2 cases in 2014 to 1 case in 2015, which was bacterial meningitis. There were 0 cases of Varicella (Chickenpox) reported in 2015 compared to 3 in 2014. There were 0 cases of Legionnaire's Disease in 2015 compared to 2 in 2014. There were no cases of Invasive Group A Beta Streptococcal Disease in 2015.

Pertussis reared its head earlier this year with 6 case reports. The cases were part of a larger outbreak at a local school and also involved students who lived outside the city.

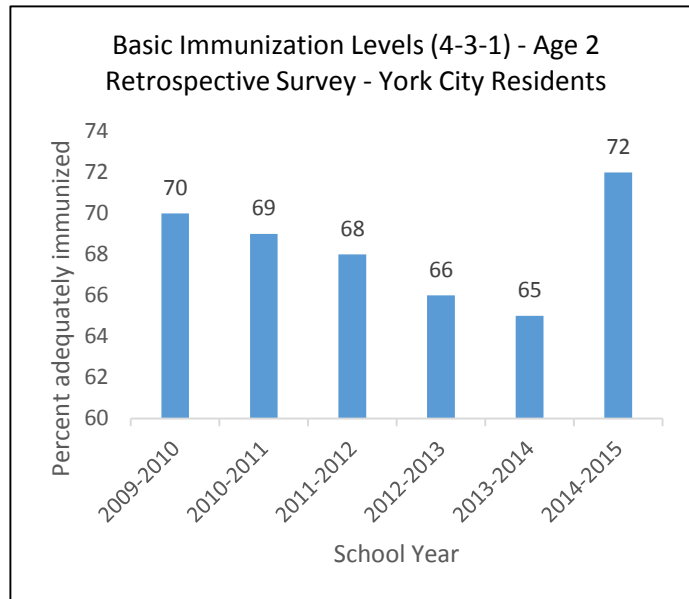
Of special note, there was no report of active Tuberculosis in 2015. One case of active Tuberculosis disease was reported in 2014 following three straight years with no active TB cases. Quite clearly, the occurrence of active TB in the City remains very low. This situation is due to aggressive surveillance and prevention strategies at our local level. Finally, there was one case of Chikungunya and 6 cases Toxoplasmosis reported in 2015.

## Immunization Program

**HP2020 IID-7:** Achieve and maintain vaccination coverage levels for universally recommended vaccines among young children.

**IID-7.1:** 4 doses diphtheria-tetanus-acellular pertussis (DTaP) vaccine by 19 to 35 months. (2008 Baseline: 85% of children aged 19 to 35 months received 4 or more doses of the combination of diphtheria, tetanus and acellular pertussis antigens). A retrospective survey of York City Kindergarten students indicates that the basic immunization level of children when they were two years of age is improving. The 2014-15 school year audit revealed an increase in the basic immunization level from 65% the prior year to 72% (see Appendix for detailed report).

In 2015, the Bureau provided 224 flu vaccines to uninsured and underinsured York City residents.



## Lead and Healthy Homes Program

The Lead and Healthy Homes Program receives a referral from a physician or agency for a variety of reasons, including elevated blood lead levels (blood lead levels at  $\geq 5$  ug/dl).

- 25 Environmental Health Assessment were performed
- 33 Post Healthy Homes Inspections were completed
- 13 Lead Paint risk assessment inspections
- 6 HOPWA (Housing Opportunities for People With AIDS) inspections were completed

## Maternal Child Health Services

The impact of high-risk pregnancies contributes to the overall health status of the community. The Health Bureau's Maternal Child Health program works closely with local MCH partners to educate and link women to information on related services (childhood immunizations, lead poisoning prevention, etc.) offered to York City residents and how to access other community resources to assist them with having healthy birth outcomes.

Teen births continue in the City of York with 14.5% of births to women <20 years of age in 2013. Thirty-one (31) percent of those births were to teenagers < 18 years of age.

The following table provides analysis of birth data from the PA Department of Health, Bureau of Health Statistics and Research and Healthy People 2020. The percentage of Low Birth Weight (<2500 grams) babies is highest in the City of York (2012 – 11.5%) when compared to PA (2012 – 8.2%) and to York County ((2012 – 8.0%). The most dramatic difference of Low Birth Weight babies occurs when comparing York City to York County, outside of York City, at 11.5% to 7.2% in 2012, respectively.

## Maternal Child Health – Birth Weight Data

Pennsylvania	2005-2009	2006-2010	2007-2011	2008-2012	2011-2013	HP 2020 Targets
Total Births	738,467	735,804	729,119	719,670	711,160	
<1500 Grams (VLBW*)	11,826	11,838	11,603	11,378	10,977	
%<1500 Grams	1.6%	1.6%	1.6%	1.6%	1.5%	Target 1.4%
1500-2499 Grams (LBW**)	49,603	49,389	48,713	47,823	47,034	
%1500-2499 Grams	6.7%	6.8%	6.7%	6.6%	6.6%	Target 7.8%
Total <2500 (VLBW+LBW)	61,429	61,227	60,316	59,201	58,011	
%Total <2500	8.3%	8.4%	8.3%	8.2%	8.1%	Target 9.2%
York County	2005-2009	2006-2010	2007-2011	2008-2012	2011-2013	Healthy People 2020
Total Births	25,854	25,944	25,695	25,147	24,669	
<1500 Grams (VLBW)	432	431	405	384	389	
%<1500 Grams	1.7%	1.7%	1.6%	1.5%	1.6%	Target 1.4%
1500-2499 Grams (LBW)	1,680	1,688	1,658	1,621	1,603	
%1500-2499 Grams	6.6%	6.5%	6.5%	6.4%	6.5%	Target 7.8%
Total <2500 (VLBW+LBW)	2,112	2,119	2,063	2,005	1,992	
%Total <2500	8.2%	8.2%	8.0%	8.0%	8.1%	Target 9.2%
York City	2005-2009	2006-2010	2007-2011	2008-2012	2009-2013	Healthy People 2020
Total Births	4,900	4,859	4,725	4,583	4,451	
<1500 Grams (VLBW)	121	127	119	124	116	
%<1500 Grams	2.5%	2.6%	2.5%	2.7%	2.6%	Target 1.4%
1500-2499 Grams (LBW)	434	434	413	403	391	
%1500-2499 Grams	8.9%	8.9%	8.7%	8.7%	8.8%	Target 7.8%
Total <2500 (VLBW+LBW)	555	561	532	527	507	
%Total <2500	11.3%	11.5%	11.3%	11.5%	11.4%	Target 9.2%
York County outside York City	2005-2009	2006-2010	2007-2011	2008-2012	2009-2013	Healthy People 2020
Total Births	20,954	21,085	20,970	20,564	20,218	
<1500 Grams (VLBW)	311	304	286	260	273	
%<1500 Grams	1.5%	1.4%	1.4%	1.3%	1.3%	Target 1.4%
1500-2499 Grams (LBW)	1,246	2,254	1,245	1,218	1,212	
%1500-2499 Grams	5.9%	5.9%	5.9%	5.9%	6.0%	Target 7.8%
Total <2500 (VLBW+LBW)	1,557	1,558	1,531	1,478	1,485	
%Total <2500	7.4%	7.3%	7.3%	7.2%	7.3%	Target 9.2%

Source: PA Dept of Health Vital Statistics online database. Interpretation by the York City Bureau of Health

### Cardiovascular Disease

High blood cholesterol, high blood pressure, cigarette smoking, heredity, obesity and physical inactivity have been linked to an increased risk of heart disease and stroke. Heart disease continues to be one of the leading causes of death among York City residents. Over 18% of York City deaths annually are due to heart disease, accounting for 69 deaths in 2013, which is down from 22% in 2012. The age-adjusted death rate for heart disease in 2013 was 192.1/100,000, averaging 10.1 years of

potential life lost per individual. This rate continues to decrease but is still well above the HP 2020 objective of 100.8/100,000. Stroke accounted for 26 deaths for an age-adjusted rate of 79.6/100,000. The average years of potential life lost per individual was 9.3, an increase since 2009. Education and outreach indicate a growing number of people are aware of the link between lifestyle and disease, but not all are willing or able to modify or change their behaviors.

**HP 2020 HDS-2:** Reduce Coronary Heart Disease death rate to 100 per 100,000 people (2000 Age-Adjusted baseline: 126.0/100,000).

**Coronary Heart Disease Age Adjusted Death Rates  
York City 2008-2013**

<b>Annual Rate (cases):</b>	<b>Three Year Average Rates:</b>
2009 - 263.0 (94)	2007 - 2009 - 269.7
2010 - 243.0 (84)	2008 - 2010 - 262.7
2011 - 278.3 (94)	2009 - 2011 - 261.4
2012 - 231.5 (75)	2010 - 2012 - 250.9
2013 - 192.1 (69)	2011 - 2013 - 234.0

**HP 2020 HDS-3:** Reduce Stroke deaths to no more than 33.8 per 100,000 people (2000 Age-Adjusted baseline: 42.2/100,000).

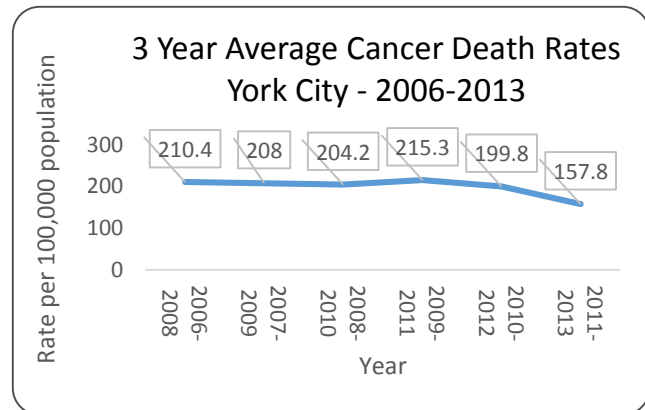
**Stroke Age Adjusted Death Rates  
York City 2008-2013**

<b>Annual Rate (cases):</b>	<b>Three Year Avg Rates:</b>
2009 - 38.7 (15)	2007 - 2009 - 44.4
2010 - 52.5 (19)	2008 - 2010 - 45.9
2011 - 45.0 (15)	2009 - 2011 - 45.4
2012 - 36.0 (12)	2010 - 2012 - 44.5
2013 - 79.6 (26)	2011 - 2013 - 53.5

**Cancer Control**

The number of cancer deaths have tied the number of heart disease deaths in 2013. This trend has been moving in this direction as education efforts continue to focus on heart disease and stroke. Cancer prevention education is important and ties in with lifestyle behaviors, such as reduced smoking or exposure to secondhand smoke, diet and exercise.

**HP 2020 C-1:** Reduce the overall cancer death rate to 160.6 per 100,000 people (2000 Age-Adjusted baseline: 178.4/100,000). \*Cancer mortality rates for the City are not age-adjusted.



**HP 2010 C-2:** Reduce lung cancer death rate to 45.5 per 100,000 people. (2000 Baseline: 50.6/100,000) (York City statistics incl. cancer of the trachea, bronchus, lung and pleura\*)

**York City  
Lung Cancer Death Rates 2009-2013**

<b>Annual Rate* (#):</b>	<b>Three Year Avg. Rates:</b>
2009 - 53.8 (22)	2007-2009 - 57.1
2010 - 64.0 (28)	2008-2010 - 58.8
2011 - 47.6 (20)	2009-2011 - 55.1
2012 - 41.2 (18)	2010-2012 - 50.9
2013 - 32.0 (14)	2011-2013 - 40.3

**HP 2010 C-3:** Reduce female breast cancer death rate to no more than 20.6 per 100,000 women (2000 Baseline: 22.9/100,000).

**York City  
Breast Cancer Death Rates 2009-2013**

<b>Annual Rate (#):</b>	<b>Three Year Avg. Rates:</b>
2009 - 28.3 (6)	2007-2009 - 28.4
2010 - 13.1 (3)	2008-2010 - 21.8
2011 - 17.6 (4)	2009-2011 - 19.7
2012 - 17.6 (4)	2010-2012 - 16.1
2013 - 30.9 (7)	2011-2013 - 22.0

**HP 2020 C-5:** Reduce colorectal cancer rate to no more than 14.5 deaths per 100,000 people (2000 Age-Adjusted baseline: 17.0/100,000).

**York City  
Colorectal Cancer Rates 2009-2013**

<b>Annual Rate (#):</b>	<b>Three Year Avg. Rates:</b>
2009 - 11.4 (5)	2007-2009 - 19.4
2010 - 15.2 (6)	2008-2010 - 15.5
2011 - 16.6 (7)	2009-2011 - 14.4
2012 - 11.4 (5)	2010-2012 - 14.4
2013 - 18.3 (8)	2011-2013 - 15.4

### **Dental Health**

Oral health is a public health issue impacting residents in the City of York. It is especially difficult for children due to lack of pediatric dentists in the area, few dentists accepting Medical Assistance clients, and lack of fluoridation in the City’s water system to reduce dental caries. The school-based dental sealant program is now in its ninth year. The program targets 6-8 and 12-14 year olds in the elementary and middle schools and in community agencies within the City limits. The Program conducted 6 Sealant events this year at 6 York City School District elementary schools: Davis, Devers, Goode, McKinley, Jackson, and Ferguson.

- 174 students were screened for sealant eligibility, of which 7 were children with special health care needs.
- Seventy (70) students (40%) of the students were sealed, compared to 58% last year.
- Eligible children received at least one seal during the event with the average of 3.5 surfaces sealed per student for a total of 301 sealants placed on first and second molars.
- One hundred twenty-one (121) students received fluoride varnish during the event.
- Forty-two students (24%) were referred for dental care.

## Injury Prevention

In 2013, unintentional injuries ranked 5<sup>th</sup> in the number of deaths in York City. Twenty-two people died as a result of unintentional injuries (age-adjusted death rate of 58.6/100,000). Motor vehicle fatalities ranked 11<sup>th</sup> overall with 4 deaths (age adjusted death rate 9.3/100,000). Unintentional injuries and motor vehicle fatalities combined were tied as 3<sup>rd</sup> highest cause of death and continue to lead in average years of potential life lost per individual, 18.3 and 32.5 years, respectively.

### **Injury Report Card 2009-2013**

<b>HP 2020 Objective</b>	<b>National Baseline</b>	<b>Year</b>	<b>York City</b>
IVP-11: Reduce deaths caused by unintentional injuries to no more than 36/100,000 people.	40.0 (2000) (age-adjusted)	2009	42.7
		2010	55.0
		2011	68.0
		2012	47.2
		2013	58.6
IVP-13: Reduce deaths caused by motor vehicle crashes to no more than 12.4 per 100,000 people	13.8 (2000) (age-adjusted)	2009	12.0
		2010	12.6
		2011	14.5
		2012	10.3
		2013	9.3

### **Violence/Intentional Injury Report Card 2015**

<b>Healthy People 2020 Objective</b>	<b>Baseline</b>	<b>Year</b>	<b>York City Rate</b>
<b>MHMD-1:</b> Reduce Suicides to no more than 10.2 per 100,000 people. Four (4) suicides were reported for York City in 2015 (York County Coroner Office).	11.3 (2007)	2015	9.2
<b>IVP 29:</b> Reduce homicides to no more than 5.5 per 100,000 people. Nine (9) homicides were reported for York City in 2015 (York County Coroner Office).	6.1 (2000)	2015	20.6

## Tobacco Control

Heart disease and cancer are the top two leading causes of death in York accounting for 37% of all deaths for 2013. Tobacco use is a major risk factor for these diseases.

**HP 2020 RD-10:** Reduce deaths from Chronic Obstructive Pulmonary Disease among adults to achieve a rate of no more than 98.5 per 100,000 people (2000 age-adjusted baseline: 112.4/100,000 age 45 and older).

### **York City 2009-2013**

#### **Chronic Obstructive Pulmonary Disease Death Rates**

**Annual Rates (#):      Three Year Avg. Rates:**

2009 – 39.4 (14)	2007-2009 – 42.0
2010 – 39.4 (14)	2008-2010 – 40.2
2011 – 60.3 (20)	2009-2011 – 46.4
2012 – 32.0 (14)	2010-2012 – 43.9
2013 – 60.7 (20)	2011-2013 – 51.0



The PA Department of Health, Division of Tobacco Prevention and Control reports that 14.2% of pregnant women in PA smoke. In York City, 20.7% of women who gave birth report using tobacco during pregnancy, according to the 2013 PA Vital Statistics, up slightly from 2012. York City has made some progress in abstinence from tobacco use during pregnancy from 76.8% (2007) to 80.5% (2012), but still has work to do to meet the HP 2020 goal of 98.6%.

**HP 2020 MICH-11.3:** Increase abstinence from tobacco use by pregnant women to 98.6% (Baseline: for the Nation – 2007 [HP 2020] 89.6%).

**% reported abstinence from tobacco use among pregnant women**

	<b>2007</b>	<b>2008</b>	<b>2009</b>	<b>2010</b>	<b>2011</b>	<b>2012</b>	<b>2013</b>
<b>York City</b>	76.8	77.8	77.7	80.9	80.2	80.5	79.3
<b>York County</b>	81.7	81.5	82.2	84.5	83.3	84.3	85
<b>Pennsylvania</b>	82.5	83.0	83.5	84.1	84.7	84.7	85.8

### **Conclusions from Local/State Data**

Healthy People 2010-2020 National Objectives provide a tool for the City of York - Bureau of Health staff to assess and evaluate the public health of the City's residents and identify areas of need or focus for interventions. As previously noted (introduction), the public health issues prevalent in York City are similar to and sometimes more severe than other urban areas. Societal and economic trends of poverty and unemployment paired with unhealthy lifestyles or risky behavior choices challenge the public health delivery system.

Many communicable diseases, especially those caused by risky lifestyle choices or behaviors, show little if any improvement despite increased education and awareness of prevention. The rates of STDs, Hepatitis C, and HIV, due to the nature of their transmission, remain well over state rates per 100,000 and National Healthy People 2020 goals. Lyme Disease saw a remarkable increase in case reports, indicating a need to continue to educate residents on prevention strategies to reduce risk.

The percentage of low birth weight babies (<2500 Grams) in the City and the associated problems continue to challenge the community. Above the state and national levels, the most dramatic difference of percentages of low birth weight (LBW) babies occurs when comparing LBW babies in York City (2012 - 11.5%) with LBW babies in York County outside the City (2012 - 7.5%), a marked disparity within York County between urban versus suburban/rural. A collaboration of the maternal child health providers and community partners in and outside of the City continues to jointly identify and develop intervention strategies to improve birth outcomes in the City.

Injury deaths, unintentional and intentional (homicides), are higher than the Health People 2020 objectives and the national baselines. Community Health Specialists raise awareness of injury prevention strategies related to unintentional injuries through programs such as A Matter of Balance to reduce falls and work with local groups to reduce intentional injuries such as pedestrian and biker safety, fire and gun safety, poisoning, head injuries and more.

The number of deaths due to heart disease and cancer are seeing a downward trend over the past decade. However, heart disease is declining faster than cancer and in 2011, cancer became the leading cause of death in York City. Education efforts by the Bureau of Health and other local/national organizations, as well as technological advances in diagnosing and treating these diseases, contribute to this trend. More emphasis has been placed on prevention by improving lifestyle choices, such as weight reduction, better nutrition choices, and exercise through a myriad of programs and services at local, state and national levels. The Community Health Specialists work closely with community partners to initiate sustainable environmental changes (walkable/bikeable transportation routes), provide tools, skills, and knowledge for residents to improve their health (community gardens), and

implement policy changes to impact health. The Million Hearts™ initiative has elevated the awareness around heart disease and stroke and is a collaborative effort between the Bureau and local providers to improve heart health.

Efforts to increase public awareness on a variety of health topics and to encourage people to assume responsibility for their behaviors are major undertakings. The City population, with its diverse mix of many ethnicities and cultures, is a challenge to educators. Preparing our staff to address diverse audiences and ensuring they have adequate resources and knowledge to educate the community are major tasks.

When Ebola threatened the United States, Health Bureau staff participated in a Personal Protective Equipment (PPE) training to familiarize themselves with the donning and doffing of PPE in an emergency situation. The training enabled staff to identify supplies, equipment gaps, and protocols needed in order to protect staff when faced with a potential Ebola suspect in our clinic or through a home visit. In 2015 the Bureau received additional funding to expand its response activities for Ebola and other novel viruses. A Community Health Specialist for Emergency Preparedness/Communicable Diseases was hired in 2015 to focus on the Health Bureau's emergency disease response plan and activities. Novel viruses will continue to raise the Bureau's emergency preparedness readiness, as seen with the current ZIKA virus.

The Health Bureau regularly monitors data and surveillance of public health information. Data is obtained from the PA Department of Health Bureau of Health Statistics, local sources, and various agencies. Staff analyzes data for trends in morbidity and mortality, and compares local with county, state and national trends where appropriate. Staff also uses locally collected data for epidemiologic surveillance and trending.

Qualitative information is gathered in various ways. Major sources of qualitative information are staff participation on various boards, task forces, and coalitions and working/meeting with members of the community to discuss specific health issues. Both qualitative information and quantitative data gathering are on-going responsibilities of the staff. Staff members work with the community to develop solutions or strategies to improve identified public health issues and problems.

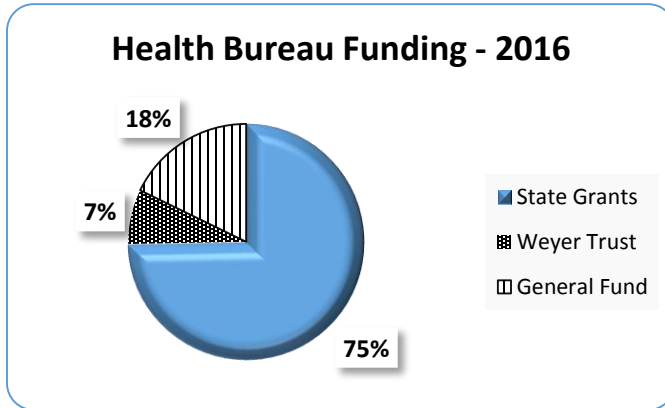
The Health Bureau staff meets yearly to develop the goals and objectives for the Annual Health Plan. Staff discusses program successes and identifies issues and strategies that can be implemented to improve the public's health. Staff applies the following criteria for setting goals and objectives for the year:

- The issue is addressed in the work plan of the grant and/or the mission of the Health Bureau.
- A gap in services has been identified, or it is not being addressed in the community and the Health Bureau staff assesses the gap, the resources available, and ability for staff to address the need.
- The issue is one of the leading health indicators as specified by the CDC and the local statistics and issues warrant a local intervention, or it is a unique issue to the City/County that needs action, i.e. heroin epidemic.
- A community health assessment has been conducted and identified a targeted need in the City.
- A quality improvement initiative or process identifies a public health priority or need.
- The strategic planning process reveals a concern or area as a public health priority.

# **Administrative and Support Services**

## Administrative and Support Services

The Bureau of Health requires capable administration, skilled knowledgeable staff, and adequate funding to allocate resources for quality public health services in the City of York. The administrative and support staff of the Bureau of Health is responsible for developing plans, conducting assessments, preparing budgets, and writing reports that reflect the health needs of the community and to assure that services are provided through sound public health practices.



The City of York - Bureau of Health administers a budget of \$1.77 million and is funded by state grants, City CDBG funds, the Weyer Trust and the City's General Fund.

The Bureau has thirteen full-time and two part-time employees. Additional City of York personnel are utilized for various administrative activities, including: policy, finance, personnel and legal. Health Bureau staff is actively involved in various community and volunteer activities with local, state and national professional organizations through their positions and interests

in the health and wellbeing of the community; such as National Association of County and City Health Officials (NACCHO); Safe States Alliance; Senior Outreach Services; South Central Task Force; Healthy York County Coalition; York/Adams Immunization Coalition and Eat Play Breathe York.

In 2015, the Health Bureau focused its work on integrated population health strategies by engaging staff, community partners and residents in our work to provide a greater impact on our community's health. Strategies are being developed for staff to have a more global impact on the health of the community by working together, expanding our reach and understanding community needs.

To facilitate professional awareness, the Bureau provides professional teaching and experiences in the field of public health for physicians in residency training, medical students, nursing students, public health students, and those in other areas of the health care field.

### ADMINISTRATION

The administrative and support function of the Health Bureau is to provide leadership to both staff and the community on public health issues. Administrative staff conducts the daily financial and operational business of the Health Bureau and is responsible for directing personnel activities of employees, such as job descriptions, periodic performance evaluations, complaints, attendance records, payroll, and professional development. The administrative staff performs office operations such as Emergency Preparedness, epidemiological support, purchasing, and clerical duties. Staff is responsible for program services and contract management (both local and state) through sound financial management and monitoring performance.

The ability to provide public health services is enhanced by the cooperation and understanding of other health professionals in the community. Without this positive attitude, problems may exist, such as slow or non-reporting of diseases, poor cooperation with public health interventions, little or no importance placed on public health measures, and a limited view of health care. Bureau staff provide clinical, community and administrative experiences in public health for students, medical students, and medical residents.

## **Administration Goals and Objectives for 2016**

**Program Goal:** To provide quality, effective and comprehensive public health services to the City of York.

**Objective 1:** Ensure effective communication between both internal and external partners.

**Activities:**

- Develop standard workflows for documentation of written and/or oral communications (i.e. meeting minutes, agendas, etc.).
- Utilize SharePoint to house communications in a structured and easy access format.

**Evaluation Methods:**

- Protocols/guidelines are written and shared with staff as to how communications are to be documented.
- SharePoint is used by all staff to store, maintain and access communications.

**Objective 2:** Coordinate Health Bureau activities and communications effectively between 2 sites.

**Activities:**

- Conduct an internal assessment for opportunities to collaborate and communicate needs.
- Develop communication strategy regarding the coordination of activities.

**Evaluation Methods:**

- Needs for program and staff have been identified and considered in how collaboration is achieved.
- Communication strategy is developed.

**Objective 3:** Align processes and develop practices to allow successful application for accreditation by December 31, 2016.

**Activities:**

- Determine our status regarding core requirements for accreditation application (i.e. Strategic Plan, Community Health Assessment and Community Health Improvement Plan).
- Utilize local resources to assist in develop of each as needed.

**Evaluation Methods:**

- Review and evaluation of our status of core requirements is completed.
- Movement is made in the development of at least one or more core requirements.

**Objective 4:** Streamline process and experience for health professionals at the Health Bureau.

**Activities:**

- Standardize process for students/professionals by developing targeted presentations for learner's level of training and career goals.
- Meet with Family Practice program to discuss optimal benefit and value for residents coming through rotation at the Health Bureau.

**Evaluation Methods:**

- Meeting held with Family Practice program.
- At least one presentation is developed tailored to a specific learners' needs (i.e. medical students, high school students, MPH interns, Family Practice residents).

**EMERGENCY PREPAREDNESS**

The Emergency Preparedness Program of the Health Bureau is tasked with the development of procedures and training to allow for the effective coordination of public health resources in an emergency situation. The Health Bureau is recognized as a first responder agency in York City's emergency planning and response activities. All Bureau staff and senior management have been trained in the national Incident Management System and Incident Command process. The Health Bureau's emergency response plan and protocols are included in York City's emergency operations plan. The Bureau's all-hazards plan includes specific command and response actions, communications and disease protocols and emergency checklists. The Bureau works with all levels of local, state and federal agencies in preparedness activities. Particular attention is given to collaborative response actions with local medical, business, community, and neighborhood partners.

**Emergency Preparedness Goals and Objectives for 2016**

**Program Goal:** To increase organizational, community and individual emergency preparedness through education and training.

**Objective 1:** Define the expanded scope of Public Health emergency preparedness and response activities as they relate to Novel Viruses.

**Activities:**

- Review and assess our PH Capabilities.
- Establish an Ebola Plan by 9/15.

**Evaluation Methods:**

- Assessment and analysis of capabilities completed.
- Ebola Plan is completed and submitted to PA Department of Health.

**Objective 2:** Engage individuals, businesses, health care providers, schools, faith based and organizations/agencies in emergency preparedness activities and trainings.

**Activities:**

- Hold a stakeholder event by June 30 to engage them in discussion and awareness of local emergency response and planning in both novel virus and all hazard emergency events.
- Provide resources to stakeholders.

**Evaluation Methods:**

- Event is held.
- # people in attendance.
- # people/organizations requesting assistance for planning or for information on resources.

**Objective 3:** Complete preparations and submission for Project Public Health Ready (PPHR) recertification by August 2016.

**Activities:**

- Review standards for updates to emergency plan.
- Identify gaps/changes needed to complete documentation.
- Submit PPHR plan to PA Department of Health.

**Evaluation Method:**

- PPHR recertification plan is completed and submitted to PA Department of Health.

## **Administrative and Support Program Performance Review 2015**

**Program Goal 1:** To provide quality, effective and comprehensive public health services to the York City community.

**Objective 1:** Recruit qualified professionals for vacant positions by June 1, 2015.

**ACHIEVED:**

- Recruited one Community Health Nurse, 3 Community Health Specialists, Immunization Outreach worker, and a part-time Medical Director.
- 100% of positions posted have been filled. Staff training in these positions are ongoing.

**Objective 2:** Identify and understand community needs in developing Bureau strategies to address those issues by September 1, 2015.

**ACHIEVED:**

- Attended “Fix York” town hall meeting.
- Staff has participated in multiple community events and activities engaging city residents and organizations, such as national night out.
- Staff has participated in the Healthy York County Coalition health needs assessment process and are actively involved with committees developed as a result of the assessment outcomes; i.e. STD/MCH and Obesity.

**Objective 3:** Develop a communications strategy to promote Bureau and activities by June 1, 2015.

**PARTIALLY ACHIEVED:**

- A formalized communication plan for the Bureau was not achieved; however, the Bureau entered an agreement with Gavin Advertising to assist the Bureau in marketing its services and programs, particularly for the Million Hearts initiative. As a result of this engagement, the Bureau has developed a new logo, initiated an e-newsletter and continue to promote Bureau activities and services through Twitter, Facebook and the city website.

**Program Goal 2:** To increase organizational, community-wide and individual emergency preparedness through education and training.

**Objective 1:** Develop, train and expand the role of Health Bureau staff as it relates to emergency response and first responder activities.

**ACHIEVED:**

- 2 staff attended CERT trainings.
- 6 staff participated in CPR recertification.
- All staff participated in or supported the Joint Shingles Vaccine Clinic with State DOH and Family First Health.

- Health Bureau staff and City employees participated in TMI 36 drill/exercise.
- Staff led a pertussis outbreak investigation and mitigation activities.
- Staff served as a consultant for schools, businesses and organization with in the city, providing assistance with drills, policies, and emergency preparedness related activities.
- Staff attended training at the Homeland Security Training Center in Anniston, AL.
- Staff obtained Department of Homeland Security certification as a Professional Continuity Practitioner Level 1.

Objective 2: Engage individual citizens, businesses and other organizations in emergency preparedness activities and trainings.

ACHIEVED:

- Staff participated in multiple trainings through South Central Task Force (SCTF), PEMA and FEMA.
- Staff attended SCTF meetings, VOAD, County 911, YAMMERS, and several planning meetings with community partners.
- 2 staff attended CERT trainings.
- Staff served as a consultant for schools, businesses and organization with in the city, providing assistance with drills, policies, and emergency preparedness related activities.

Objective 3: Continue to identify shortfalls as identified in Capabilities Planning Guide Analysis in preparation for Project Public Health Ready (PPHR) recertification.

ACHIEVED:

- PPHR re-certification activities are on-going. Attendance in person and conference calls have occurred and will continue throughout the process.
- All guideline are being followed in preparation for PPHR recertification.

**COMMUNITY HEALTH PROFESSIONAL EDUCATION SERVICES**

Objective 1: To maintain preceptor activities for health professionals and students.

ACHIEVED: Staff provided 28 individuals a variety of clinical, community and administrative experiences in public health throughout the year.

Objective 2: Provide exposure to field experience as available and appropriate to health professionals.

ACHIEVED:

- 7 Family Practice Residents – York Hospital
- 19 Medical Students – York Hospital Family Practice
- 2 Student Interns – Kaplan University – MPH program and Temple University – BS, Public Health



# **Personal Health Services**

## **Personal Health Services**

The Personal Health Services (PHS) provided by the Bureau of Health meet a broad range of community health needs for individuals and families. The largest component of this section is the services provided by the Community Health Nurses and the Disease Intervention Specialist. The major responsibility of the PHS staff is to identify individual and family health needs and assist with mobilizing and coordinating resources to meet those needs. Clients are accepted for service by self-referral or by referral from schools, physicians, community agencies and local hospitals.

The Pennsylvania Department of Health and the Centers for Disease Control and Prevention require physicians and medical laboratories to notify the local public health authority of reportable communicable conditions or diseases. For the City of York, the Bureau of Health is the responsible local agency. This reporting mechanism allows the Bureau of Health to take immediate public health measures to control the spread of communicable conditions or diseases. The Health Bureau Personal Health Services program provides epidemiological investigation and follow-up on all communicable diseases reported.

In addition to the surveillance and investigation of reported diseases, the personal health services staff provides support and referral services to high-risk pregnant women, infants and special needs children and youth. Health education and disease prevention programs are offered throughout the community by promoting health behaviors and lifestyle choices to improve the quality of life of City residents. Outreach and networking with at risk populations are essential for all personal health services provided by the City of York - Bureau of Health.

### **TUBERCULOSIS**

Tuberculosis (TB) is an infectious, reportable disease that usually affects the lungs. TB is caused by a mycobacterium and is transmitted through the air by respiratory droplets from coughing. Depending on the location, the stage of TB, and choice of medication, treatment may vary from 4 to 9 months (e.g., 4 months of Rifampin for latent infection, 6 months of multi-drug treatment for active disease, or 9 months of Isoniazid for latent infection), and in some cases longer. Duration of treatment is one of the challenges for compliance with treatment.

After receiving a TB referral, the Community Health Nurse conducts an initial interview with the individual. Appropriate laboratory and x-ray studies are ordered as needed. For individuals being treated, the Medical Director takes a medical history and performs a physical examination. The individual is then started on treatment for latent TB infection (LTBI) or for active TB disease. In addition to an initial home visit if indicated, regular office visits allow for ongoing evaluation. Directly Observed Therapy (DOT) is used as indicated for all TB disease patients and non-compliant LTBI patients. Contacts of active TB cases are tested to determine TB status and are treated appropriately. Ongoing screening programs are conducted to identify TB reactors with a focus on high-risk populations such as: homeless, immigrants, low income and people residing in shelters. The City of York - Bureau of Health also participates in court-mandated TB screenings of York County residents, coordinating all indicated and necessary follow-up care. Education and testing information are provided at community events as appropriate.

### **TB Goals and Objectives for 2016**

**Program Goal:** To reduce and prevent the incidence of TB in the city of York.

**Objective 1:** Increase standardization of TB screening tests requested from community agencies that require TB screening for employees.

**Activities:**

- Develop tool for employers.
- Educate agencies regarding appropriate use of screening.
- Implement standards.

**Evaluation method:**

- Tool is developed.
- At least 3 agencies are educated.
- Reduction in two step TB testing by 50% from 2015.

**SEXUALLY TRANSMITTED DISEASES (STD'S)**  
**HUMAN IMMUNODEFICIENCY VIRUS (HIV)**  
**ACQUIRED IMMUNODEFICIENCY SYNDROME (AIDS)**

Sexually Transmitted Diseases (STD's) are infections transmitted through sexual contact. Left untreated, STD's can spread readily; can result in pain, infertility and disseminated infections throughout the body; and can cause serious complications for newborn infants. The absence of symptoms during some of the infection stages, the existence of antibiotic-resistant STD strains, lack of community awareness and the reluctance to use condoms are some of the issues for consideration for community outreach or interventions.

Acquired Immunodeficiency Syndrome (AIDS) is a serious condition resulting in a severely impaired immune system. The absence of a strong immune system allows opportunistic diseases to overtake the body, often resulting in death. Factors that complicate efforts to prevent the spread of HIV infection include a long asymptomatic phase, lack of a cure or vaccine, public denial, and lack of community knowledge of/sensitivity to AIDS. York faces multiple service problems for persons with HIV/AIDS – housing, medical care, dental care, transportation, emergency financial support, etc.

The Disease Intervention Specialist (DIS) conducts HIV-antibody testing with partner notification and counseling services. Partner Services is also completed for any identified partners of an HIV positive individual. Ongoing education and information are made available to high-risk individuals/populations, the general public and health care providers.

When a City resident is reported to the Bureau or diagnosed with an STD/HIV or AIDS, a Community Health Nurse or Disease Intervention Specialist is assigned to follow-up with the individual to provide case management and support. The Bureau also works cooperatively with HIV/AIDS service providers and case managers in the community to support HIV+ individuals and their families.

To assist in addressing the on-going high rates of STD's, the City of York - Bureau of Health continues to utilize the Expedited Partner Treatment (EPT) Program established in 2013. This program has proven to be very successful through providing free antibiotic treatment in a timely and comfortable manner to sex partners of individuals diagnosed with Chlamydia or Gonorrhea infection, or both.

Community awareness and education are conducted through outreach and the Social Networking Program to bring high-risk individuals and their social network contacts in for testing.

**Program Goal 1:** Integrate both HIV and STD clinics.

**Objective 1:** Increase screening for all patients at the City of York - Bureau of Health.

**Activities:**

- An optional HIV test will be included in all EPT visits.
- All male EPT patients who identify having sex with both male and female will be offered a syphilis and HIV test.
- During an EPT visit all female patients will be asked if they are interested in a pregnancy test.

**Evaluation Methods:**

- A minimum of 200 integrated HIV/STD screens for the 2016 calendar year.
- All clients identified positive for HIV/STD will be provided with an appropriate provider within the community.

**Objective 2:** Carry out Partner Services in collaboration with providers who diagnose and treat individuals with HIV/STD's.

**Activities:**

- According to State Department of Health partner services guidelines, the DIS will provide all HIV/STD positive clients with partner services.
- Provide partner services to all clients referred through PA-NEDSS.

**Evaluation Methods:**

- Target population for partner services and the number of clients to be reached annually is 19 index cases and at least one sex or needle sharing partner.

**Program Goal 2:** Reduce new HIV/STD infections.

**Objective 1:** Intensify HIV/STD prevention efforts in our community where HIV/STD is most heavily concentrated.

**Activities:**

- Increase testing in the City of York for at-risk populations.
- Distribute communicable disease prevention information and condoms where appropriate.
- Promoting HIV/STD prevention education throughout the City of York.
- Continue to conduct HIV/STD surveillance and complete all PA-NEDSS within a specific recall period.
- Link all positive cases to a medical home.

**Evaluation Methods:**

- A minimum of 12 educational events/programs will be provided in York City.
- A minimum of 400 (cumulative) screenings for HIV/STD's will be conducted CY 2016.
- For all clients screened for HIV/STD, a referral to a medical home will be given as appropriate.
- Outreach worker will distribute 2000 condom packs throughout the community with information on places for clients to be tested/or screened for infection.
- Every individual screened or tested at YCBH will be assessed and referred to a medical home, as needed.
- All HIV/STD PA-NEDSS cases will be completed with 15 days of entering into DIS's inbox.

## **COMMUNICABLE DISEASES**

Communicable Diseases, such as hepatitis, measles, and West Nile Virus, by virtue of their methods of transmission, become public health concerns. Poor hygiene, contaminated food or water, unprotected sex, I.V. drug use, insect exposure, and close contact with an infected individual are modes of transmission for some of these communicable diseases.

Upon receiving a referral, a Community Health Nurse investigates the case to verify diagnosis, determine source of illness, confirm treatment, reinforce medical advice, provide contact notification as necessary, and provide education/awareness information to prevent further spread of infection. Environmental Health Services staff is involved in cases of food-borne illness.

### **Communicable Disease Goals and Objectives for 2016**

**Program Goal:** To reduce all communicable diseases among York City residents.

**Objective 1:** Collaborate with other providers/community partners on communicable disease prevention and screening activities.

**Activities:**

- Educate community partners on communicable diseases to provide messages and programs from a public health perspective to make residents healthier.
- Connect with prison system to create warm hand offs for inmates being released who need Health Bureau services.

**Evaluation Method:**

- Present to at least 3 community partners about the Bureau and the resources we can bring to them/their clients (i.e., HIV education, hygiene, immunizations, etc.).

**Objective 2:** Engage with community partners to address high incidence of STDs among city residents.

**Activities:**

- Engage stakeholders in monthly/regular meetings to discuss and develop strategies to implement.
- Develop strategies to implement.
- Assess impact of strategies.

**Evaluation Method:**

- Number of meetings held.
- Strategies developed and/or implemented.
- Progress made in impacted STD numbers

**Objective 3:** Develop and test network communication plan for outbreaks, such as Ebola and other novel viruses (refer to Emergency Preparedness section of Administration and Support Services).

**Activities:**

- Create inventory of whom to communicate with.
- Develop messages/templates.
- Develop lists and test their dissemination of information for emergency situations.

**Evaluation Method:**

- An inventory list(s) is created
- # messages developed/templates created
- Test(s) completed and results are provided on dissemination process.

## **IMMUNIZATION PROGRAM**

Although many vaccine-preventable diseases have been reduced to negligible levels, the threat of these diseases is still very real. Lack of public knowledge about immunizations and the often high cost of health care are two barriers to attaining full immunization level in the community.

The Immunization Program provides immunizations for children and adults as recommended by the Centers for Disease Control and Prevention (CDC). Immunization clinics are held during the week and at least one evening. Special clinics are scheduled throughout the year for vaccine preventable diseases and special populations; i.e., Human Papillomavirus (HPV), Shingles (Zoster), and Pertussis (Tdap), pending vaccine availability. Additionally, the Bureau facilitates vaccination for persons exposed to certain diseases. Influenza and Pneumococcal vaccines are provided annually.

Immunization activities since 2013 have focused on redirecting staff efforts to ensure immunization services provided by the Health Bureau were primarily for those individuals without insurance or limited coverage and when appropriate, guiding individuals to their primary care provider for services. Ongoing efforts ensure that York City residents are kept informed of CDC immunization recommendations for all ages. Utilizing an upstream approach, the Immunization team reaches out to other care providers such primary care offices, pediatricians and school nurses to provide education on current immunization protocols and child immunization audits.

### **Immunization Goals and Objectives for 2016**

**Program Goal:** To reduce or eliminate indigenous cases of vaccine-preventable disease.

**Objective:** Advocate with community partners the importance of immunizations by understanding pockets of need, local immunization levels, and connecting residents to primary care homes.

**Activities:**

- Offer and provide vaccinations to all eligible York City residents and assist them to connect to primary care homes.
- Revise data collection tool for Retrospective Immunization Survey – Kindergarten (RISK) to geocode students in relation to their primary care home.
- Work with schools to get information from student health records for geocoding and primary care home.
- Engage with school nurses to understand and connect with school immunization process that uses the “sapphire” program.

**Evaluation Methods:**

- Successful partnership with schools in gathering information needed to better understand where children are in relationship to having primary care medical homes.
- Number or percentage of residents visiting our immunization clinic that are connected to a medical home.

## **ANIMAL CONTROL**

Animal bites pose a public health problem to the community and can lead to injuries and infectious diseases, including rabies. To prevent animal bites, Health Bureau staff provides education to community groups, children participating in summer playgrounds, and school students as well as medical providers to ensure timely reporting. The Animal Control Program involves the continued surveillance and appropriate epidemiological investigation of all animal bites reported to the Bureau of Health. The Police Department's Animal Enforcement Officer works in tandem with the Bureau regarding the treatment, confinement or removal of the animal involved in the bite. The Community Health Nurse works with the victim as needed to ensure medical treatment is received to prevent rabies.

## **MATERNAL CHILD HEALTH SERVICES**

One of the major factors contributing to infant mortality is low birth weight. There are multiple causes for premature births or low birth weight births, including but not limited to poor maternal nutrition, lack of or insufficient prenatal care, teen pregnancy, sexually transmitted diseases, and drug, alcohol, or tobacco use. The stresses of parenthood can be overwhelming at times, but particularly so when combined with teen parenthood, poor parenting skills, poverty, unemployment, poor housing and difficulty in accessing affordable health care. The unfortunate results can be poor child growth and development, preventable injuries, child abuse and neglect, and behavioral and social problems.

The Maternal and Child Health Program, funded by the Maternal Child Health Block Grant through the PA Department of Health, provides public health services to pregnant women and mothers of infants and children who are at risk and those with special needs. The emphasis is on health promotion through education and on reduction of avoidable risks. In 2014 the Bureau, in collaboration with community stakeholders, embarked on a systems change to better meet the needs of pregnant women early in their pregnancy by connecting them with community resources. The "Maternal Child Connection Program" aims to improve birth outcomes and the health of women and infants in the City of York. Services are provided through the joint efforts of a Community Outreach Worker and the MCH community providers in York City. The purpose of the Mother Child Connection program is to support pregnant women during their pregnancy and after giving birth. The Bureau provides assistance and guidance to connect moms-to-be with services and providers in the community to enhance their pregnancy experience and to address social, economic and lifestyle barriers to improve pregnancy and birth outcomes.

On rare occasions, the Bureau receives reports for Children with Special Needs, such as PKU, birth defects, etc. The Community Health Nurse will locate families/infants, provide information and education and assist families in locating resources/health care coverage, etc. in the community.

### **MCH Goals and Objectives for 2016**

**Program Goal:** Promote healthy moms, infants and children in the City of York.

**Objective 1:** Assess and evaluation approaches to improve birth outcomes in the city of York.

#### **Activities:**

- Engage stakeholders through Bureau's integrated population health improvement workgroup to develop strategies.
- Hire a community health nurse to assist and implement state priorities as it applies to our community.

- Continue to support ONAF process with our community partners, engaging new partners as appropriate.
- Integrate MCH activities internally with other Bureau programs, i.e. car seats and immunizations.

**Evaluation Methods:**

- # of stakeholders who are engaged and participation in meetings.
- Community Health Nurse is hired and trained in MCH work.
- # ONAF forms received for pre-natal and post-partum women from providers.
- Documentation of integrated activities within the Bureau.

**LEAD AND HEALTHY HOMES PROGRAM**

The purpose of the Lead and Healthy Homes Program is to promote housing that is healthy and safe and to reduce hospitalizations, injuries, illnesses, or deaths from preventable home health and safety risks. This program aims to address multiple hazards in homes and prevent diseases and/or injuries that result from housing-related hazards by conducting comprehensive home assessments and providing education and low-cost or no-cost interventions to prevent health or safety problems before negative outcomes occur.

The Bureau will be phasing out this program as of June 30, 2016 when funding from the PA Department of Health ends. The Bureau will, however, incorporate lead prevention and safety education in contacts with pregnant women and new mothers, particularly around safe sleep environments.

**HEALTH EDUCATION**

Nearly 50% of health problems are directly attributable to unhealthy lifestyle behaviors such as smoking and tobacco use, drug and alcohol abuse, physical inactivity, poor nutrition habits, mental stress, and injury from accidents or falls. Community Health Services at YCBH focus on activities and programs that support individual and community health in order to reverse aforementioned health behavior trends.

Community Health Services encompass all of the Bureau’s services to address behavioral change, by providing public health awareness and education on a wide range on public health topics to the community in various settings. The Bureau utilizes multiple media strategies to educate and provide awareness about public health issues impacting York City residents. Furthermore, Health Bureau staff members reach out to essential community stakeholders to provide health information on topics that are not covered by the YCBH. For example, YCBH works closely with WellSpan Health to provide information on different types of cancers and multiple ways to reduce/mitigate the development of certain cancers. In addition, YCBH partners with Memorial Hospital and WellSpan Health to provide a variety of tobacco cessation programs which focus on assisting individuals with quitting. YCBH staff members conduct surveillance on emerging and existing health trends in order to address the needs of the community. Community Health Services offered at the Bureau are in line with the community health profile of the City of York with the intent of addressing at risk populations, which are disproportionately affected by chronic diseases.

The City of York faces many public health challenges. The YCBH relies heavily on community collaborations in order to reduce duplication of services and to streamline efforts aimed at primary prevention. The YCBH has several essential working relationships with key community stakeholders, which aid in implementing efficient and effective public health strategies.



## **SAFE AND HEALTHY COMMUNITIES PROGRAM**

High blood cholesterol, high blood pressure, tobacco use, heredity, obesity and physical inactivity have been linked to an increased risk of heart disease and stroke. Eighteen percent of York City deaths annually are due to heart disease. Deaths due to cardiovascular disease account for on average, 10.1 years of potential life lost per victim (2013). A growing number of people are aware of the link between lifestyle and disease and the impact these risk factors can have on their health status. However, only a small percentage is willing or able to modify their behaviors.

The Safe and Healthy Community Program is centered on addressing modifiable risk factors, particularly nutrition and physical activity in the community-at-large. Health promotion activities focus on policy, system, and environmental changes which create sustainable opportunities for individuals to engage and develop healthy habits that reduce/mitigate a variety of chronic diseases.

### **Safe and Healthy Communities Program Goals and Objectives for 2016**

**Program Goal:** To prevent chronic disease by increasing opportunities for physical activity, better nutrition and healthy lifestyle changes.

**Objective 1:** Use the Million Hearts™ initiative to promote awareness and engagement of city residents in an effort to decrease cardiovascular disease and stroke.

#### **Activities:**

- Educate stakeholders on Million Hearts™ initiative and how to augment efforts into routine practice (i.e. primary care offices, pharmacies, community-based organizations).
- Utilize multiple media outlets to promote awareness of Million Hearts™ messages.
- Identify and work with community partners who can promote Million Hearts™ concepts.
- Identify activities and programs that align with Million Hearts™.

#### **Evaluation methods:**

- # of social media posts, likes, etc.
- # of promotional events and activities.
- # of stakeholders educated on the Million Hearts™ initiative.
- # of community partners identified that have the ability to promote the Million Hearts™ initiative.
- # of activities or programs identified that align with the Million Hearts™ initiative.
- # of partner organizations promoting Million Hearts™.

**Objective 2:** To increase access to healthy food options by implementing the Corner Store Initiative pilot project.

#### **Activities:**

- Review the Corner Store inventory to identify opportunities and strategies to increase healthy food options available in corner stores.
- Identify pilot stores.
- Convene a workgroup of stakeholders to finalize the structure of the initiative.
- Develop an evaluation process/tool.
- Develop and finalize the MOU to be used between the Corner Store owner and the Bureau of Health.
- Develop promotional and educational materials for businesses and the community.

- Link pilot stores to organizations for programming opportunities.
- Launch pilot initiative.
- Use the evaluation process/tool to determine success of pilot initiative.

**Evaluation methods:**

- Describe opportunities and strategies identified to increase healthy food options available in corner stores.
- # of pilot stores.
- # of collaborative stakeholders involved in healthy corner store workgroup.
- Finalized evaluation process/tool.
- Finalized MOU.
- # and description of promotional and educational materials developed.
- # of potential programming opportunities identified.
- # of healthy options added after launching the pilot initiative.
- Amount (quantity and sales) of produce sold at pilot sites.

**VIOLENCE AND INJURY PREVENTION PROGRAM**

Hundreds of York City residents sustain serious harm each year as a result of unintentional injuries that occur at homes, workplaces, schools, playgrounds, and streets. Many injuries and deaths are preventable.

Intentional injuries caused by acts of violence are increasingly recognized as a national public health concern. Abuse not only causes mental and physical pain, and in rare instances death, it also scars people emotionally to the point of them becoming abusers or perpetrators, continuing the cycle from generation to generation. Violence can include firearm injuries and deaths, domestic violence, child and sexual abuse and suicide. All forms of violence significantly increase the toll of human misery.

The Violence and Injury Prevention Program (VIPP) is designed to reduce both unintentional and intentional injuries in the home and community. The Community Health Specialists accomplish this through one-on-one activities, community awareness programs, and with the York Safe Kids Coalition to promote child passenger safety, bike helmet use and pedestrian safety.

**Violence and Injury Prevention Programs Goals and Objectives 2016**

**Program Goal:** To reduce both intentional and unintentional injuries in the City of York.

**Objective 1:** Utilize the evidenced-based framework of Safe Routes to School (SRTS) to improve safety for city school students.

**Activities:**

- Identify schools to participate in SRTS activities.
- Educate and engage students and faculty in SRTS.
- Identify collaborative partners to engage in SRTS.
- Utilize the Transportation Task Force structure to assist with environmental changes that support the Complete Streets Policy and SRTS framework.

**Evaluation Method:**

- # of school locations participating in SRTS.
- # of students receiving education aligned with SRTS.

- # of SRTS educational activities conducted.
- # of faculty and administrative staff education on SRTS.
- # of environmental changes made that align with SRTS.
- # of collaborative SRTS partnerships.

**Objective 2:** Utilize the evidenced-based *A Matter of Balance* program to decrease the fear of falling and prevent falls among York-area residents.

**Activities:**

- Conduct Coach training and update sessions for coaches on a regular basis.
- Recruit locations and participants to classes.
- Coordinate classes with partner coaches.
- Participate in community events that promote falls prevention.
- Collaborate with partners to promote the *A Matter of Balance* Program.

**Evaluation Method:**

- # of *A Matter of Balance* (MOB) classes held in York County.
- # of MOB participants.
- # of falls prevention educational activities.
- # of community events that promoted falls prevention educational materials and resources.
- # of coaches trained.
- # of coach trainings and update sessions held.
- # of providers, healthcare facilities, and community organizations targeted for falls prevention outreach and MOB referrals.
- # of collaborative falls prevention partnerships.

**Objective 3:** To explore and identify emerging public health issues related to violence and injury prevention in the City of York.

**Activities:**

- Review local data related to injuries (i.e. Hospitalizations, coroner reports, etc.).
- Identify opportunities to partner with other City departments related to violence and injury issues (i.e., drugs and firearms).
- Evaluate and plan for public health response to violence and injury prevention, as appropriate.

**Evaluation Methods:**

- Data analysis/report provided on at least one critical VIPP issue.
- At least one opportunity is identified between City departments and Health Bureau to work collaboratively on.

**DENTAL HEALTH**

Lack of periodic preventive dental care can result in diseased teeth and gums that can hinder quality of life, can be expensive to correct and can alter an individual’s appearance.

The Dental Health Program promotes the principle of preventive dental health and works with the community in developing a supportive environment for further public dental health measures. The Bureau coordinates a Dental Sealant program targeting 6-8 and 12-14 year old students in schools and community organizations through a contract with Family First Health. During Immunization Clinics, the community health nurse provides fluoride drops to infants and tablets to children, applies fluoride

varnish to the teeth of 6 month – 16 year olds, distributes toothbrushes and toothpaste, promotes good oral hygiene, and provides parents/guardians with information to improve the child’s oral health.

## **Personal Health Services Performance Review for 2015**

**Program Goal 1:** To reduce and prevent the incidence of TB disease in York City.

**ACHIEVED:** There were no reported cases of active Tuberculosis in the city of York in 2015.

- Modified the TB contract with LTBI residents entering into treatment.
- Conducted TB screening at York Rescue Mission – 78 residents were screened for TB.
- Screened the following for TB: 305 City residents; 17 non-city residents; and 13 Drug Court participants.

**Program Goal 2:** Utilize interagency collaboration to decrease the transmission of STD’s/HIV infections and increase awareness of STD’s/HIV in the community.

**Objective 1:** Promote efficiency and cost effectiveness through interagency collaboration.

**ACHIEVED:**

- The Bureau works with and collaborates with Family First Health and the Drug Court program to promote the testing, care and treatment of individuals with HIV and/or STDs.
- Individuals leaving prison and/or in Drug Court are directed to the Bureau for required testing, including HIV and Hepatitis C screenings. All individuals are linked to care in the community.

**Objective 2:** Conduct Partner Services in collaboration with providers who diagnose and treat individuals with HIV and/or STD’s.

**Activities:**

- An informal agreement is understood with Family First Health, our Federally Qualified Health Center, and hospitals to provide Partner Services for their clients who test positive for HIV and/or STD’s.
- 100% of clients received Partner Services.

**Objective 3:** Prevent or reduce communicable disease and HIV infection through education and community events in York City.

**ACHIEVED:**

- 12 educational events/programs on how to prevent communicable diseases were conducted for York City residents, health care providers, community organizations, homeless shelters, professionals, faith based organizations and others as identified.
- Conducted 406 HIV screenings and 249 STD screenings for the Expedited Partner Treatment Program.
- Distributed communicable disease prevention information and condoms throughout the city at local businesses, community health fairs and to schools.
- Promoted Hep C testing among Baby Boomers following CDC recommendations through clinical efforts and through social media.

**Program Goal 3:** To reduce or eliminate indigenous cases of vaccine-preventable disease.

**Objective 1:** Offer and provide vaccinations to all eligible York City residents.

**ACHIEVED:**

- A minimum of 2 health care professionals were identified and collaborated with to educate and promote the importance of being vaccinated against vaccine preventable diseases.
  - Networked with Immunization Coalition to connect with other healthcare professionals by providing 3 IEPs in York, Gettysburg and Hanover on the Storage and Handling of Vaccines.
- Outreach to the residents and providers in a minimum of 2 pocket populations identified as under immunized.
  - Utilized retrospective kindergarten audits to identify pockets of under immunized children and identified low immunization rates at Jackson school. Staff provided information for schools to provide to parents as well as attended Back to School events to promote vaccines.
  - Identified seniors without or lacking insurance coverage as a pocket of need for Shingles vaccine. Collaborated with Family First Health (FQHC) and PA Department of Health State Health Center in York County to provide Shingles clinic for under/uninsured seniors. 216 Shingles vaccines were administered at the joint clinic.
  - Created a bus ad campaign in collaboration with Pfizer and DirectMedia USA to promote vaccinations.
- A minimum of 4 collaborative activities/programs have been provided to the York City Community during special recognition weeks or months.
  - Baby Shower, held in April, is an annual event to provide new and expectant mothers with information on the importance of vaccinations for their infant and other prevention strategies such as car seat safety, infant injury prevention. Other existing resources in the community were presented by local agencies such as the library and WIC.
  - HPV awareness - in collaboration with the York/Adams Immunization Coalition, presented the HPV movie at York College of Pennsylvania.
  - Back To School Events in August allow staff to meet with parents and to promote child and adolescent immunizations. Staff attended 5 events.
  - Shingles Clinic, mentioned above, was a joint effort with Family First Health and the PA Department of Health State Health Center in York County on December 4th to provide vaccines to 216 seniors.
  - Immunization program on WRCT – local government access television – promoted national immunization week and discussed importance of immunizations.
- All children identified by the YCBH MCH Outreach Worker have been provided with the appropriate immunizations or appropriately referred to another health care provider.
  - Our MCH Outreach Worker integrates and discusses needs of clients regarding public health issues and refer clients to the immunization program for needed vaccinations. She also represents the Health Bureau at many community events, advocating immunizations as well as other Bureau services.

**Program Goal 4:** To prevent cardiovascular disease in the City of York.

**Objective:** The City of York - Bureau of Health will implement the Million Hearts initiative in a minimum of two community organizations.

**ACHIEVED:**

- 5 community organizations participated in the workshop.
- 4 organizations were chosen to implement Million Hearts.
- 4 toolkits disseminated.
- 6 educational events held to discuss the initiative/YCBH services.

*Description of Activities:*

- The City of York - Bureau of Health (YCBH) was able to identify prominent stakeholders in the community willing to partner for the Million Hearts initiative. These partners included, Gavin Advertising, East Side Health Center/Family Practice and Counseling Network Resources for Human Development, Minnich's Pharmacy, and YMCA of York and York County.
- YCBH hosted a workshop that provided partnering organizations with the knowledge and resources to promote the Million Hearts initiative within their organization and to those they serve.
- YCBH provided Million Hearts partners with implementation toolkits (printed/digital)
- The Health Bureau, in collaboration with Gavin Advertising, developed social media banners and logos for the initiative, created a Million Hearts e-newsletter that is sent to local health professionals, organizations, and the general public, and engaged in other public relations and marketing activities related to the Million Hearts initiative.
- YCBH printed and distributed educational/promotional materials, posters, pamphlets, flyers, and banners to partners to raise awareness within their organizations and throughout the community.
- At the workshop, partners collaborated and announced their ideas for promoting heart health as noted below:
  - East Side Health Center: Fund an RN-facilitated tobacco cessation and prevention group program.
  - Minnich's Pharmacy: Purchase a high-tech blood pressure machine for customers' use to ease anxiety of visiting a primary care provider and encourage regular screenings.
  - YMCA of York: Host educational workshops and lunch-and-learn sessions to address health disparities and improve overall wellness.
  - YCBH: provide various heart health education throughout the community with an emphasis on healthy food access, nutrition, and physical activity. YCBH Medical Director also engaged other healthcare organizations and the public in our Million Hearts efforts.

**Program Goal 5:** To reduce the number of intentional and unintentional injuries in York County.

**Objective:** Implement evidence based Safety & Injury Prevention programs.

**ACHIEVED:**

*Collaborate with internal departments to provide services.*

- City of York - Bureau of Health collaborated internally with the Maternal Child Health (MCH) program to identify families in need of Child Passenger Safety services and education.

*Partner with external stakeholders to integrate program activities.*

- YCBH collaborated with multiple stakeholders within York County such as York County Area Agency on Aging, York College of Pennsylvania, WellSpan Health, HealthSouth and Comforcare through the Falls Free York Coalition.
- Through our partnership with the York County Area Agency on Aging and York College of Pennsylvania a total of 28 MOB coaches were trained in 2015.

- Through the York County Falls Free Coalition there are a total number of 34 MOB coaches in York County. From this larger cohort of coaches, we expect to increase the number of available MOB classes and sites in York County and expand the reach of falls prevention strategies and interventions throughout the community.
- YCBH established and maintained collaborative partnerships through participation in coalitions and committees such as Safe Kids York County, Senior Outreach Services, Falls Free York Coalition, and Eat Play Breathe York – Transportation Task Force to implement evidence-based programs and practices related to Child Passenger Safety, Falls Prevention, and Bicycle, Pedestrian, and Playground Safety.

*Participate in community events.*

- Through the York County Falls Free Coalition, YCBH was able to participate in the 50plus Expo on September 30<sup>th</sup>, 2015 at the York Expo Center. YCBH utilized the Stay Independent brochure (STEADI Toolkit) to identify those at risk for falls and promoted A Matter of Balance programs in the York County.
  - Approximately 420 Matter of Balance (MOB) home safety checklists were distributed at the 50plus Expo.
  - Approximately 420 people were screened using the Stay Independent brochure in accordance with the STEADI toolkit. Of those screened, 189 were identified as potential fall risks and were referred to on-site MOB master trainers and coaches to receive information about available MOB classes in York County.

**Program Goal 6:** The dental health status of York City residents will be improved through early identification of problems and/or poor habits.

**Objective 1:** To provide dental screenings and sealant program for schools in York City.

**ACHIEVED:**

The Program conducted 6 Sealant events this year at 6 York City School District elementary schools: Davis, Devers, Goode, McKinley, Jackson, and Ferguson.

- 174 students were screened for sealant eligibility, of which 7 were children with special health care needs.
- Seventy (70) students (40%) of the students were sealed, compared to 58% last year.
- Eligible children received at least one seal during the event with the average of 3.5 surfaces sealed per student.
- One hundred twenty-one (121) students received fluoride varnish during the event.
- Sealants were placed on 282 first molar surfaces, 11 on second molars, and 8 elsewhere.
- Forty-two students (24%) were referred for dental care.

**Objective 2:** Provide a dental varnish application program for York City children.

**ACHIEVED:**

- Bureau staff provided oral health education for children up to age 16 at the Albert S. Weyer Health Center. Children can receive fluoride tablets and/or receive dental varnish on their teeth through our clinical services team. In 2015 44 children received varnish and 54 received fluoride tablets.

# **Environmental Health Services**



## Environmental Health Services

The Environmental Health Services provided by the City of York protect City residents from unhealthy environmental conditions. The Bureau of Health works closely with the Bureau of Permits, Planning and Zoning and with the Department of Public Works in order to conduct mandated activities including: Vector Control, Water Pollution Control, Food Service Sanitation, Institutional Sanitation and Safety, Solid Waste Management, and Water Supply.

- Those programs not included due to jurisdictional control or land use limitation are: Organized Camps, Recreational Areas, Campground and Mobile Home Parks (see matrix).
- The presence of environmental health hazards poses a threat to the public health and safety of the community. Many conditions exist that require environmental monitoring. Barriers in the community that contribute to adverse environmental situations include: poverty, inadequate housing, limited education, illiteracy, unemployment, and limited access to environmental control information.
- The City inspects approximately 400 food establishments and vendors with the potential for food related illnesses.

### **ENVIRONMENTAL HEALTH SERVICES MATRIX**

Services	Services Provided	Not applicable	Total Services
Organized Camp		NA 1	NA
Vector Control	X		X
Recreational Area		NA 1	NA
Institutional Sanitation	X		X
School Sanitation	X		X
Campground		NA 1	NA
Mobile Home Parks		NA 1	NA
Food Service Sanitation	X		X
Shellfish	X 2		X
Bottled Water	X 2		X
Public Bathing Place	X 5		X
Water Supply		NA 3	NA
Water Pollution Control	X 4		X
Solid Waste Management	X 4		X

Notes:

1. These activities do not exist within the boundaries of the City of York. If such activities become a reality, the City will inspect and license accordingly.
2. Shellfish and bottled water sold in the City of York are subject to City licensure and inspection and are covered under the authority of Food Service Sanitation.
3. All properties in the City of York are connected to the York Water Company system, a private but PUC regulated utility.
4. Water Pollution Control and Solid Waste Management activities are carried out by the Department of Public Works.
5. Public swimming pools and spas in the City are monitored by the Health Bureau through the year. A District Sanitarian of the PA Department of Health is available to assist with investigation of complaints.

### Community Resources

PA Department of Health, PA Department of Agriculture, PA Department of Environmental Protection, Community Progress Council, Healthy York County Coalition, York City School District, Crispus Attucks Association, Day Cares and Kindergartens, Housing Council, Susquehanna Ozone Action Partnership, Penn State Cooperative Extension, York Water Company

**York City Departments of:** Fire, Police, Permits, Planning and Zoning, Economic Development  
Community Development, Solicitor's Office, Public Works

# **Environmental Health Services Goals and Objectives 2016**

## **Vector Control Program**

The presence of environmental health hazards poses a threat to the public health and safety of the community. Situations that can promote disease, such as animal feces, mice and rats, garbage, litter, dilapidated buildings and abandoned housing, not only are unhealthy and unsafe, but also can contribute to the degradation of neighborhoods.

The Vector Control Program includes the investigation and abatement of potential environmental health hazards regarding housing, hygiene and sanitation, as well as rodents and pests. The types of situations investigated include: garbage and litter debris, vectors and insects, animal feces, weeds, odor, abandoned vehicles and abandoned housing. Hazardous situations are identified through citizen complaints and inspection activities. City inspectors enforce City ordinances and work out of the Bureau of Permits, Planning and Zoning. A clean and seal work crew provides its services out of the Department of Public Works.

**Program Goal:** To create an environmentally clean and safe City.

**Objective:** To reduce potentially hazardous environmental situations in the City of York.

### **Activities:**

- Investigate or refer all complaints to the appropriate agency (e.g., Permits, Planning and Zoning; Public Works; Animal Enforcement, etc.).
- Abate unhealthy and unsafe situations.
- Work with City Solicitor's Office on legal actions against property owners who violate City ordinances; file citations with District Magistrates as indicated.
- Provide humane animal traps to capture/remove wild animals from city properties.
- Work with York County West Nile Virus Program to identify and abate mosquito-breeding areas that could serve as sources of West Nile Virus and other arboviruses.

### **Evaluation Methods:**

- Number of environmental hazards cleaned up.
- Number of responses to information requests.

## **Water Pollution Control Program**

Established in 1981, the City of York Municipal Industrial Pretreatment Program (MIPP) is responsible for implementing the national pretreatment program for the City of York Wastewater Treatment Plant sewer service area. The MIPP is tasked with enforcing all federal pretreatment standards and requirements in addition to any local sewer use regulations.

The MIPP accomplishes this through industrial facility inspections and industrial wastewater sampling. Inspections are performed to ensure industries conduct their manufacturing processes and operate their wastewater treatment systems in compliance with pretreatment regulations, and to prevent the discharge of unwanted substances to the sanitary sewer system and wastewater treatment plant. Wastewater sampling and testing allows the MIPP to evaluate industrial compliance with both federal and local wastewater discharge regulations. Some industrial facilities may be required to treat their wastewater before discharge to the sanitary sewer to meet federal and local wastewater regulations; hence, the term "pretreatment." Wastewater test results are also used to recoup costs incurred by the

City of York wastewater treatment plant to process the higher strength industrial waste- costs that would otherwise be borne by ratepayers. Personnel also investigate spills and discharges that may pose an environmental threat. MIPP has two full time staff.

**Program Goal:** To improve the quality of municipal and industrial wastewater and sludges so they can be properly disposed of or used for beneficial purposes.

**Objective:** To prevent the introduction of industrial pollutants into wastewater treatment plants that interfere or are incompatible with wastewater treatment plant processes and operations.

**Activities:**

- Visit industrial sites and periodically sample discharges.
- Respond to information requests and complaints.
- Provide education and technical assistance as identified or requested.

**Evaluation Method:**

- Number of visits to industrial facilities.
- Number of inspections of the major contributors and samples collected.
- Number of responses to information requests and technical assistance provided.

### **Food Service Sanitation**

Restaurants and other food establishments do not always meet the necessary standards for safe food preparation and storage. Left unchecked, noncompliance with these standards can lead to food poisoning outbreaks and other health risks. The Food Service Sanitation Program provides for the licensure and inspection of establishments where food or other consumables are prepared, handled, served, sold or provided to the public. The City of York has 1.5 full time trained health inspectors who inspect restaurants, retail food stores, shellfish establishments, ice manufacturers, schools, public institutions, day care centers, domiciliary care and group homes, special events (i.e. Parades, Street Fair, and First Night), farmer's markets, churches, and mobile vendors.

**Program Goal:** To assure safe food sources in the City of York.

**Objective:** To verify that food services meet the standards and regulations for food sanitation.

**Activities:**

- Annually license and inspect all food service establishments.
- Conduct plan reviews of new establishments.
- Investigate suspected cases/episodes of food-borne outbreaks.
- Investigate facilities as necessary (fires, complaints, etc.).

**Evaluation Methods:**

- Number of inspections of food service establishments.
- Number of food borne outbreaks investigated and confirmed.

## **Institution Sanitation and Safety**

Some community services, such as schools, pet stores, nursing and boarding homes, and childcare facilities, have the potential for public health problems if health and safety standards are not maintained.

The Institutional Sanitation and Safety Program is designed to assure through inspection and licensure, that standards for sanitation and safety are maintained. Inspectors from the Bureau of Permits, Planning and Zoning and the Codes Enforcement Office of the Fire Department perform periodic inspections.

### **Public Bathing Places**

Public swimming pools may pose a threat to the health and safety of swimmers, visitors, and pool employees. Skin infections, chlorine gas exposure, accidental drowning/near drowning and other accidental injuries are several examples of possible adverse outcomes.

There are four public swimming pool facilities in the City of York: YMCA, YWCA, Colony Park, and the YMCA's Graham Aquatic Center. These facilities and their immediate surrounding areas are monitored by the Bureau of Health throughout the year for water quality, safety, and sanitation. A sanitarian from the PA Department of Health is available to assist with the investigation of complaints when needed. Additional inspections are provided upon request or as needed.

### **Solid Waste Management**

The Environmental Bureau administers a variety of programs and enforces numerous local, state and federal laws, with the primary focus on solid waste management. Proper and timely collection and disposal of solid waste from our community has significant environmental and health impacts. Recycling items such as glass, metal cans and appliances, plastics, cardboard and a variety of other papers saves resources and considerable landfill space. By removing recyclables and yard waste from the waste stream, the City is able to significantly reduce disposal fees.

A DEP 902 grant was awarded which provided 90% of the funds to purchase a piece of leaf collection equipment and enough recycling containers to distribute to each regular curbside refuse customer unit.

Throughout the year, Environmental Bureau staff issue recycling and yard waste containers and bags to new customers or sold them to replace lost, stolen or broken containers.

The Refuse and Recycling collections contract covers various solid waste management programs such as twice per week trash collections, once per week recycling collections, seasonal/weekly yard waste collections (March – Mid December), year-round/scheduled large-item collections, and collection of trash three times per week from 147 street containers. The contract also includes various contract dumpster and tote collections, located primarily at City facilities and multi-unit residential buildings.

The current Refuse and Recycling contract began on May 1, 2013 and will end April 30, 2017. There are three optional 1-year extensions if both parties agree to extend under the existing terms.

**Program Goal:** To increase recycling of municipal solid waste and to promote recycling of certain trash items as is feasible.

**Objective:** To pick up and dispose of trash in a proper and timely manner.

**Activities:**

- Collect regular trash twice weekly by Penn Waste Incorporated.
- Pick up and dispose large items on an "as scheduled" basis.

- Collect leaves and Christmas trees for recycling.
- Maximize recycling efforts.

**Evaluation Methods:**

- Twice weekly pick up occurs.
- Number of requested pick-ups for large items.
- Weight of recycled items.

**Drinking Water Supply**

Improving access to clean water and sanitation has been cited as the “single most effective means of alleviating human distress” (the Institute of World Resources). Improvements in water supply and sanitation may increase the average life expectancy in developing countries by 15 years. Diarrheal diseases typically result from poor sanitation practices and substandard drinking water. These diseases are mostly preventable with interventions such as improved environmental services.

Some people may be more vulnerable to contaminants in drinking water than the general population. Persons with immune-compromised systems such as those undergoing chemotherapy, organ transplants, or persons living with HIV/AIDS, elderly and infants can be more at risk from infections caused by contaminants in the water.

The York Water Company, a private-owned corporation, supplies drinking water to several municipalities in York County including the City of York. York Water Company’s goal is to provide residents with a safe and dependable water supply and to protect the public from unhealthy contaminants. The York Water Company meets Safe Drinking Water Act regulations by routinely monitoring the water supply for constituents according to Federal and State laws. There are no wells in the City of York.

**Environmental Health Services Program  
Performance Review for 2015**

**Vector Control**

**Program Goal:** To create an environmentally clean and safe City.

**Objective:** To reduce potentially hazardous environmental situations in the City of York.

**ACHIEVED:**

- Having begun in 1991, the City’s Adopt-A-Block program finished its 24<sup>th</sup> year, with four scheduled AAB cleanups by volunteers from 26 active groups, as well as from active York College student organizations totaling about 200 students.
- In the spring, thirteen public education sessions were held in second-grade classrooms in the City’s elementary schools. Most classes participated in a “litter walk” around the school grounds to remove litter. An EnviroScape unit was also part of the program which showed storm water contamination as it coincided with the litter segment of the program.

**Water Pollution Control Program**

**Program Goal:** To improve water quality of Codorus Creek and its tributaries.

**Objective:** To treat wastewater adequately prior to release into the Codorus Creek.

**ACHIEVED:**

- Municipal Industrial Pretreatment Program Staff conducted 705 industrial site visits and 34 inspections of the major contributors; issued 26 Notices of Violation were to nine industries. All became compliant within the regulatory time frame.
- Staff collected 314 industrial wastewater samples and completed thirty-two (32) illicit discharge investigations.
- Responded to approximately 190 information requests, including citizen requests for information regarding specific industries.

**Food Sanitation and Safety**

**Program Goal:** To assure safe food sources in the City of York

**Objective:** To verify that food services meet the standards and regulations for food sanitation.

**ACHIEVED:**

- Conducted 192 food establishment inspections, 14 re-inspections and 452 inspections for special events.
- Received 9 complaints; closed 5 establishments.
- No new certificates of occupancy in the City were reviewed.

**Institution Sanitation and Safety**

Maintaining the standards for sanitation and safety in the York City community (schools, pet stores, nursing and boarding homes, and childcare facilities) is accomplished through periodic inspections conducted by inspectors from the Bureau of Permits, Planning and Zoning and the Codes Enforcement Office of the Fire Department.

**Public Bathing Places**

The health and safety of swimmers, visitors, and pool employees at the four public swimming facilities in the City of York (YMCA, YWCA, Colony Park, and the YMCA's Graham Aquatic Center) is monitored throughout the year by the Health Bureau. The Bureau's certified pool/spa inspector visits each facility and conducts inspections of their pools and spas. A sanitarian from the PA Department of Health is available to assist with complaint investigations as needed. Monitoring of each facility and its immediate surroundings includes water quality, safety and sanitation.

**Solid Waste Management**

**Program Goal:** To increase recycling of municipal solid waste and to promote recycling of certain trash items as is feasible.

**Objective:** To pick up and dispose of trash in a proper and timely manner.

**ACHIEVED:**

- The Refuse and Recycling Collections Contract covers various solid waste management programs including collection of trash from 147 street cans three times a week and the collection of city contract dumpsters and tote carts, primarily at City facilities and multi-unit residential buildings.

- Nearly 15,190 households and small businesses received twice per week refuse and once per week recycling collections. Of the 2,369,640 collections, there were 464 complaints, a plausible 0.0002%.
- Of the 8,514 addresses scheduled for large-item collection (scheduled year-round), there were 246 complaints, totaling 0.03%.
- About 15,190 households and small business received once per week curbside yard waste collection, (March to mid-December). During 41 weeks and of the possible 622,790 collections, there were 220 complaints, totaling 0.0004%
- 17,075.3 tons of Refuse and scheduled large-items were collected (compared to 16,501.2 tons in 2014).
- 2,778.45 tons Recyclables were collected (compared to 2,750.49 tons in 2014). A milestone in June, 2008, the City added corrugated cardboard and paperboard items to the recycling program and tonnages climbed from 1,641.84 (city contract) tons recycled in 2007 to 2,778.45 (city contract) tons in 2015, a remarkable increase of 69%.
- 802.96 tons of yard waste (brush/leaves/Christmas trees) from March – mid December (compared to 987.22 tons in 2014). Yard waste is transported to H&H in Spring Grove.
- During the first two weeks of January, 850 Christmas trees, or nearly 12.75 tons, were collected and chipped by City staff (compared to 978 trees, 14.67 tons in 2014).
- The Compost drop-off facility at Memorial Stadium was open the first Saturday of each month (April – December) from 10 a.m. to 2 p.m.

### **Drinking Water Supply**

The York Water Company services and supplies the drinking water to York City residents. The York Water Company continues to achieve compliance within the detected parameters per their Annual Drinking Water Quality Report and Test Results which can be found at:  
<https://www.yorkwater.com/CCR.pdf>

# Appendix



**City of York, PA  
Demographics  
Based on 2010 U.S. Census**

Land area: 5.2 square miles  
Population: 43,718  
Population / square mile: 8,407

<b><u>Housing</u></b>	
Total Housing Units	18,496
Vacant Housing Units	2,243
Occupied Housing Units	16,253
Owner occupied	6,790
Renter occupied	9,463

Male 21,054 (48.2%)  
Female 22,664 (51.8%)

<b><u>Population by Race/Hispanic Origin</u></b>		
One Race	40,978	93.7%
White	22,398	51.2%
Black/African Am.	12,248	28.0%
Amer.Ind./Aleut.	269	0.6%
Asian	541	1.2%
Other	5,510	12.6%
Two or more races	2,740	6.3%
Hispanic or Latino Origin/ any race	12,458	28.5%

<b><u>Population by Age</u></b>	
< 5	4,025
5-9	3,458
10-14	3,108
15-19	3,625
20-29	7,583
30-39	5,605
40-49	5,627
50-59	4,845
60-69	3,199
70+	2,643

**Technical Notes and Comments:**

The above data is from the 2010 U.S. Census Bureau American FactFinder.

Under housing, the homeowner vacancy rate is the proportion of the homeowner inventory that is vacant “for sale.” It is computed by dividing the total number of vacant units “for sale only” by the sum of owner-occupied units, vacant units “for sale only,” and vacant units that have been sold but not yet occupied; and then multiplying by 100.

The Department specifically disclaims responsibility for any analyses, interpretations or conclusions.

**Age-Adjusted Death Rates**  
**Selected Causes of Death – York City, PA 2013**

	<b>Cause of Death</b>	<b>Rate per 100,000*</b>	<b>No. of Deaths</b>
1.	Malignant Neoplasms	203.5	69
2.	Heart Disease	192.1	69
3.	Cerebrovascular Disease	79.6	26
4.	C.O.P.D.	60.7	20
5.	Other Unintentional Injuries	58.6	22
6.	Diabetes Mellitus	40.2	14
7.	Nephritis, Nephrosis	34.9	11
8.	Alzheimer’s Disease	23.4	7
9.	Pneumonia and Influenza	17.3	5
10.	Septicemia	9.4	3
11.	Motor Vehicle Fatality	9.3	4

\*Age-Adjusted Death Rates based on Standard U.S. 2010 population.  
Source of data: PA Department of Health Vital Statistics 2013.  
Data interpreted by the City of York - Bureau of Health.

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**Years of Potential Life Lost**  
**<65 Years of age**  
**Ranked by Average YPPL – York, PA 2013**

	<b>Cause of Death (No. &lt; age 65)</b>	<b>Avg. YPPL</b>	<b>Total YPPL</b>
1.	Motor Vehicle Fatalities (4)	32.5	130
2.	Other Unintentional Injuries (18)	18.3	330
3.	Septicemia (1)	15.0	15
4.	Malignant Neoplasm (26)	13.1	340
5.	Heart Disease (35)	10.1	335
6.	Nephritis, Nephrosis (2)	10.0	20
7.	Cerebral Vascular Disease (7)	9.3	65
8.	Diabetes Mellitus (7)	9.3	65
9.	C.O.P.D. (5)	7.0	35

## Annual Crude Death and Birth Rates - 2013

	York City	York County	PA
# Deaths	370	3,786	128,704
<b>Crude Death Rate*</b>	<b>8.5/1,000</b>	<b>8.7/1,000</b>	<b>10.1/1,000</b>
# Births	820	4,794	140,424
<b>Crude Birth Rate**</b>	<b>18.7/1,000</b>	<b>11.0/1,000</b>	<b>11.1/1,000</b>

### 2010 Census

York City – 43,718

York County – 434,972

Pennsylvania – 12,702,379

**RETROSPECTIVE IMMUNIZATION SURVEY  
YORK CITY KINDERGARTENERS AT AGE 2  
CITY OF YORK, PA**

	10/11	11/12	12/13	13/14	14/15
Schools Selected	7	7	7	7	8
Records Selected and Reviewed	346	362	337	342	331
<b>Immunization Level at 24 Months of Age</b>					
DTP3		94%	93%	91%	91%
DTP4	71%	72%	69%	71%	74%
IPV/OPV3	88%	90%	89%	88%	89%
MMR1	84%	85%	86%	81%	88%
<b>4/3/1</b>	<b>69%</b>	<b>68%</b>	<b>66%</b>	<b>65%</b>	<b>72%</b>
Hep B 3	92%	95%	93%	89%	88%
Varicella	84%	82%	85%	83%	85%
<b>Immunization Landmarks</b>					
Start <4 months	91%	93%	91%	87%	87%
Start 4-5 months	3%	2%	4%	4%	3%
Start 6-9 month	3%	1%	1%	3%	3%
Start 10 months or later	3%	4%	4%	6%	7%
OK at 9 months (3/2/1)	70%	71%	68%	69%	69%
OK at 12 months (4/3/1)	82%	84%	80%	76%	82%
OK at 18 months (4/3/1)	42%	42%	38%	43%	45%
OK at 24 months (4/3/1)	69%	68%	66%	65%	72%
<b>Elementary School</b>					
	<b>4/3/1</b>	<b>4/3/1</b>	<b>4/3/1</b>	<b>4/3/1</b>	<b>4/3/1</b>
Devers	63%	70%	81%	84%	67%
McKinley	63%	61%	56%	58%	59%
Lincoln-Edison	73%	73%	75%	59%	81%
Goode	76%	70%	57%	73%	76%
Jackson	56%	67%	59%	69%	64%
Ferguson	72%	59%	67%	57%	69%
Davis	74%	73%	61%	66%	83%
Hannah Penn					67%
Average	69%	68%	66%	65%	72%
Below Average					
At or below average					

4/13/2015



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