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City of York - Bureau of Health

Vision:

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

Mission:

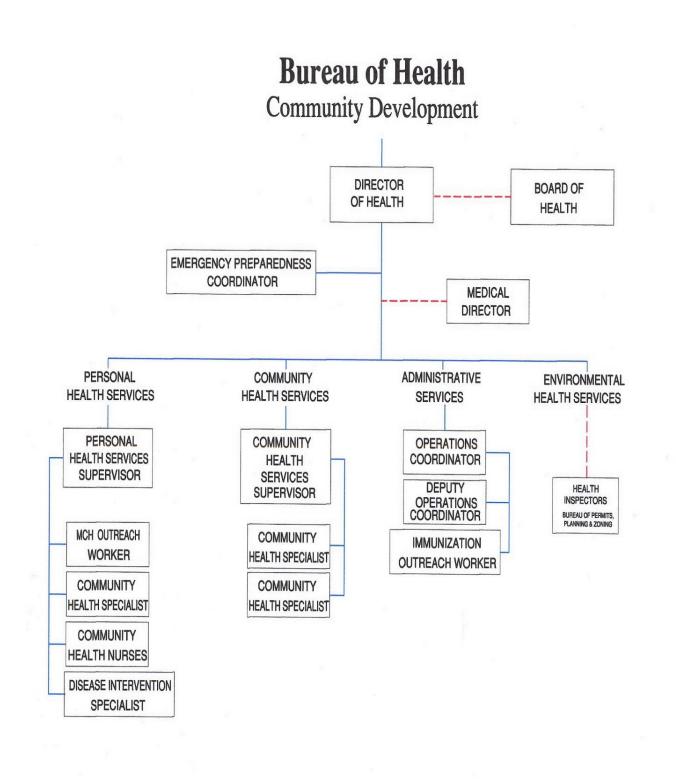
To prevent disease and to promote and protect the health of York residents through the assessment of needs, the assurance of public health services and the provision of sound public health policies through dynamic and committed leadership.

LOCAL HEALTH DEPARTMENT BUDGET & EXPENDITURE 2018 Budget

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

NOTE: data entry in yellow areas only

NOTE: data entry in yellow areas or	-	Evolusiona	Cubaidur	A -+ 10	A at 015
Program Description	Total Funds	Exclusions, Grants, Etc.	Subsidy Base	Act 12 Funds	Act 315 Funds
Administrative/Supportive Services:	Funus	Granis, Elc.	Dase	Funus	Funus
Admin/Laboratory/Support Services	\$512,334	\$205,000	\$307,334		\$307,334
Bioterrorism	\$203,839	\$188,000	\$ 15,839		\$ 15,839
TOTAL	φ203,039	\$100,000	ψ 10,009		φ 10,009
Administration (Sec 15.12)	\$716,173	\$393,000	\$323,173	\$-	\$323,173
Personal Health Services:	<i>Q</i> () ()() () () () () () () () () () () () () () () () () () ()	<i></i>	<i>vo_0,</i>	Ŧ	<i>40_0,0</i>
Cardiovascular Disease	\$169,908	\$151,204	\$ 18,704		\$ 18,704
Chronic Disease Control	\$133,201		\$133,201		\$133,201
Communicable Disease Control	\$176,313		\$ 76,313		\$176,313
Dental Health	\$ 46,330	\$ 46,330	\$ -		\$ -
EMS	\$175,000	\$ -	\$175,000		\$175,000
HIV/AIDS	\$181,555	\$154,621	\$ 26,934		\$ 26,934
Immunization	\$ 99,528	\$ 95,000	\$ 4,528		\$ 4,528
Injury Prevention	\$254,861	\$226,806	\$ 28,055		\$ 28,055
Maternal Child Health	\$136,417	\$135,100	\$ 1,317		\$ 1,317
Tuberculosis	\$ 6,700	\$ 6,700	\$-		\$ -
TOTAL	÷ -,		Ť		Ť
Personal Health (Sec 15.13)	\$ 1,379,813	\$815,761	\$564,052	-	\$564,052
Environmental Health Services:				-	
Lead Testing/Environ. Investigations	\$ 8,000	\$ 8,000	\$-		\$-
Lead Hazard Control Program	\$211,380	\$211,380			
Environmental Health & Safety Pgms	\$187,659		\$187,659	\$ 19,764	\$167,895
TOTAL					
Environmental Health (Sec 15.14)	\$407,039	\$219,380	\$187,659	\$ 19,764	\$167,895
Other Services:					
n/a			\$-		\$-
TOTAL					
Other Services	\$-	\$-	\$-	\$-	\$-
				_	
TOTAL: Administrative	\$ 716,173	\$ 393,000	\$ 323,173	\$-	\$ 323,173
	¢ 4 270 942	\$ 815,761	\$ 564,052	¢	\$ 564,052
TOTAL: Personal Health	\$ 1,379,813	\$ 815,761	\$ 564,052	\$-	\$ 564,052
TOTAL: Environmental Health	\$ 407,039	\$ 219,380	\$ 187,659	\$ 19,764	\$ 167,895
	ψ 407,000	φ 213,300	ψ 107,000	ψ 13,704	ψ 107,035
TOTAL: Other Services	\$-	\$ -	\$-	\$-	\$-
		•	1 *		•
SUM: Qualifying Health Program	\$ 2,503,025	\$ 1,428,141	\$ 1,074,884	\$ 19,764	\$ 1,055,120
TOTAL: Exclusions and Grants		\$ 1,428,141		\$ 19,764	
SUM: Local Health Dept. Program					\$ 1,055,120
	Desition		Agonov		Dete
Analysis by Barbara Kovacs	Position Director		Agency York City Bure	au of Health	<u>Date</u> 3/12/2018
Daibala Novaus	Director		TOR OILY DUIE		3/12/2010



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 residents (2010 U.S. Census), within an area of 5.2 square miles and is slowing growing (2015 population estimate from U.S. Census is 43,992). York, the County seat, is the largest urban environment in a county comprised of 72 different municipalities. It is the only 3rd class city in York County. Centrally located to the east coast metroplex areas of Baltimore, Washington D.C., Philadelphia and New York City, York 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 directly reporting to the Mayor. The other four include: Fire, Police, Business Administration and Public Works. A five-member, independent Board of Health monitors the Health Bureau's activities and is comprised of 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 York, language, cultural practices and lifestyle issues often pose challenges in health care delivery.

York has many public health problems similar to other urban areas in the state and nation. Poverty and unemployment/underemployment are serious issues in York. Unemployment in York is consistently higher than the rest of York County, and is like 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. Prioritization of health care and preventive health care is lessened for this population when survival is a necessity (food, clothing and shelter) for themselves or their families.

Heart disease and Cancer continue to be the top two leading causes of death in 2015 among York residents (38% of all deaths) followed non-motor injuries (6%), stroke (5.6%), and chronic obstructive pulmonary disease (C.O.P.D.) (4.8%).

Other lifestyle or behavioral choices continue to impact the health of the community. The Bureau is actively involved and leading efforts leading to increased opportunities for healthy living, including installing more bike and walk friendly amenities, improving the existing community gardens structure, and developing a more robust transportation plan for the future. Bureau staff are also developing and enhancing services to improve birth outcomes and reduce HIV and STD infections, by expanding staff and implementing evidence-informed approaches to improve health.

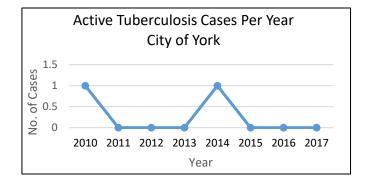
In 2018, the Health Bureau will be developing a strategic plan to 1) provide direction for the Bureau for the next 3-5 years; 2) assist in prioritizing the Bureau's public health services and initiatives; and 3) create impact for positive improvements in the health of our residents through collaboration, partnering and integrating our work with our partners.

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 since 2015.

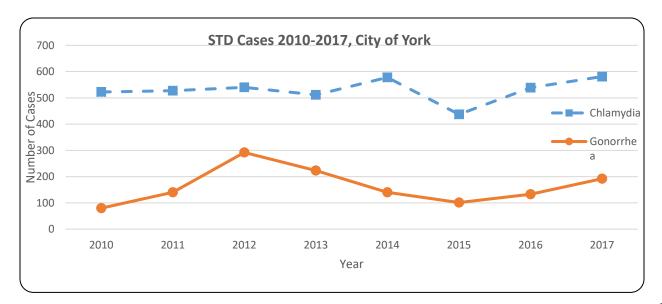
Tuberculosis Rates/Cases – York, PA							
Annual Rates (cases)	3-Year Avg. Rates						
2013 - 0.0 (0)	2011-2013 - 0.0						
2014 - 2.4 (1)	2012-2014 - 0.8						
2015 - 0.0 (0)	2013-2015 - 0.8						
2016 - 0.0 (0)	2014-2016 - 0.8						
2017 - 0.0 (0)	2015-2017 - 0.0						



Sexually Transmitted Diseases

The Bureau tested 1,028 individuals in 2017 with 18% being positive for either Chlamydia, Gonorrhea or both. Of note, Chlamydia has increased yearly since 2005, peaking 2017 at 581 cases. Although Gonorrhea decreased for a few years, there has been an increasing number of case reports since 2016, with 192 reports in 2017. The Bureau of Health is focusing on strategies to implement in the community that target high-risk individuals and reduce disease spread.

Chlamydia Rates/Cases – York, PA			Gonorrhea Rates/	Cases – York, PA
Annual Rates (cases) 3 Year Avg. Rates			<u>Annual Rates (cases)</u>	<u>3 Year Avg. Rates</u>
2013 - 1168.9 (511)	2011 - 2013 - 1203.2		2013 – 510.0 (233)	2011 - 2013 – 499.3
2014 - 1322.1 (578)	2012 - 2014 - 1242.1		2014 – 320.2 (140)	2012 - 2014 – 499.4
2015 - 999.6 (437)	2013 - 2015 - 1163.5		2015 – 231.0 (101)	2013 - 2015 – 353.7
2016 - 1228.8 (539)	2014 - 2016 - 1183.5		2016 – 303.2 (133)	2014 - 2016 – 284.8
2017 - 1329.0 (581)	2015 - 2017 - 1185.8		2017 – 439.2 (192)	2015 - 2017 – 324.5



HIV/AIDS

The Health Bureau conducted three hundred forty-nine (349) HIV tests in 2017 with no positive cases found through testing at the Bureau's clinic. However, nineteen (19) positive tests of city residents

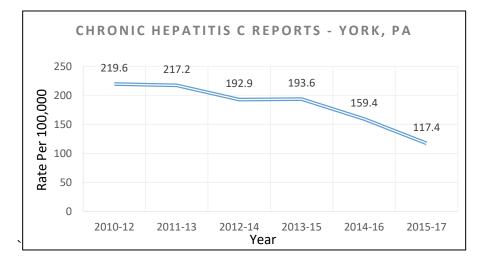
were reported to the Bureau from other testing sources resulting in twenty-two people receiving Partner Services, including an HIV test.

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

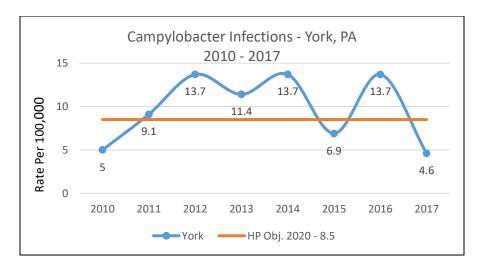
* New HIV Infection-York, PA					
Annual Rates (cases)					
2013 - 50.3 (22)					
2014 - 38.9 (17)					
2015 - 45.7 (20)					
2016 - 25.1 (11)					
2017 - 43.5 (19)					

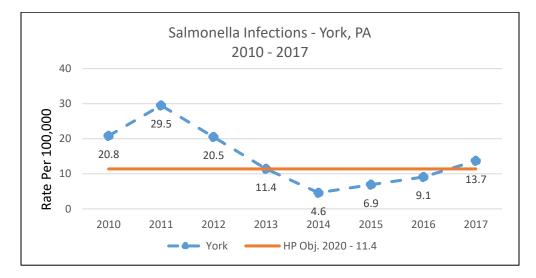
Communicable Diseases

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 were all chronic cases, not new cases.



HP2020 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)

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 60 animal bites in 2017.

Number of animal bites reported:						
Annual number:	<u>Three-Year Average:</u>					
2013 - 103	2011-2013 - 90					
2014 - 113	2012-2014 - 100					
2015 - 131	2013-2015 - 116					
2016 - 67	2014-2016 - 104					
2017 - 60	2015-2017 - 86					

Reportable Conditions Summary Report for Year 2017 City of York, Pa.

Overall, the total number of Reportable Conditions, primarily communicable diseases, in the City of York increased slightly in 2017 according to records compiled by the City of York - Bureau of Health. A total of 1,414 reports received compared to 1,139 reports in 2016, an increase of 275 reports. Sexually Transmitted Diseases accounted for fortyseven (47) percent of the increased number of reports (129 of 275).

The most frequently reported group of conditions in the City of York for 2017 continues to be Sexually Transmitted Diseases (STD's) with a total of 807 case reports. Chlamydia and Gonorrhea continue to increase. Syphilis is rearing its head again with a high number of reports this year compared to last. The Bureau is aggressively targeting individuals and groups who are high risk and engaging in unsafe sexual behaviors to bring in for screening and treatment as well as providing educational opportunities in unlikely places.

Influenza was the second most frequently reported condition. One hundred eighty-one (181) lab-test confirmed Influenza cases were reported in 2017 compared to 90 cases in 2016, double the number of cases. The flu season this year was more widespread nationally as well as here in York. 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.

Respiratory Syncytial Virus (RSV) infection remained steady with 119 case reports in 2017. 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

Reportable Conditions – City of York, Pa Summary Report 2016-2017					
Reported Cases	2016	2017			
Animal Bites	67	60			
Campylobacteriosis	6	2			
Chlamydia	539	581			
Cryptosporidiosis	2	0			
Dengue Fever	1	0			
Giardiasis	3	1			
Gonorrhea	133	192			
Hepatitis A	1	2			
Hepatitis B	21	23			
Hepatitis C	45	120			
Histoplasmosis	0	1			
HIV Infection	11	19			
Influenza Type A	61	123			
Influenza Type B	28	58			
Influenza not specified	1	0			
Legionnaire's Disease	1	2			
Lyme Disease	21	26			
Malaria	1	0			
Meningitis - Bacterial	0	2			
Meningitis - Viral	2	0			
Mumps	0	1			
N. Meningitis Infection	2	0			
Pertussis	2	0			
RSV	118	119			
Salmonella	4	6			
Shigellosis	18	0			
Streptococcal Group A	3	4			
Syphilis (primary)	1	20			
Syphilis (secondary)	4	9			
Syphilis (latent)	1	5			
Toxoplasmosis	6	3			
Tuberculosis – Latent	34	28			
Varicella	1	3			
Zika	1	2			
Total Case Reports	1139	1414			

agent of bronchiolitis and is a cause of pneumonia, croup, bronchitis, otitis media and febrile upper respiratory illness. RSV may cause symptomatic disease in adults, particularly the debilitated elderly.

Animal Bites decreased in 2017 with only 60 reports vs. 67 in 2016. Public awareness efforts such as dog bite prevention programs continue to be effective.

Hepatitis C cases increased from 45 to 120 in 2017. More people are being screened for Hepatitis C. Hepatitis B cases increased by 2 cases. There were two cases of Hepatitis A reported in 2017.

There were 19 new cases of HIV infection reported in 2017, 8 more than in 2016. Bureau staff provide partner services to test partners of infected individuals and to get individuals into medical treatment as early as possible.

Bacterial and parasitic infections that lead to vomiting, diarrhea, abdominal pain, as well as other gastrointestinal symptoms decreased dramatically from 33 cases in 2016 to 9 cases in 2017.

Lyme Disease cases increased slightly from 26 to 29 in 2017. This infection results from tick bites and most frequently causes arthritic and neurological symptoms. Prompt antibiotic treatment can prevent or mitigate many complications.

Additional reportable conditions included: 3 cases of Varicella, 1 case of Mumps, 2 Zika cases, 2 Meningitis (bacterial) cases, 2 cases of Legionnaire's Disease, and 4 cases of Streptococcal Group A.

Finally, there was no report of active Tuberculosis again in 2017, for the 3rd year in a row. This situation is due to aggressive surveillance and prevention strategies at our local level. 28 people were reported with Latent TB Infection and are all offered a course of treatment to prevent active disease.

Immunization Program

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

Immunization levels of young children are not readily available as a community. Although the PA State Immunization Information System (SIIS) was created for integrating immunization records into one meaningful repository for tracking or reporting immunization levels, staff continue to work locally to have all providers share immunization information in SIIS. Locally there is movement towards integrating PA-SIIIS into local EHR systems. The Bureau will be exploring how partners in the community can share and integrate meaningful data to develop actionable strategies for ensuring all children are vaccinated appropriately.

In 2017, the Bureau provided 107 flu vaccinations to uninsured and underinsured York residents. In 2017 the flu season was widespread across the county. York received one hundred eighty-one (181) cases of influenza reports in 2017, a 101% increase over 2016.

York residents received a total of 1,950 vaccines in 2017 through the Bureau of Health. The Bureau ramped up its immunization clinics for 2 months prior to and into the start of the school year to accommodate students who needed vaccinations to meet the new state regulations.

Maternal Child Health Services

High risk pregnancies, lack of pre and postnatal care, as well as lack of early intervention in infancy and childhood contribute to the overall decline in health and wellness of the community. According to the Office of Disease Prevention and Health Promotion, "Despite major advances in medical care, critical threats to maternal, infant, and child health exist in the United States. Among the Nation's most pressing challenges are reducing the rate of preterm births, which has risen by more than 20% from 1990 to 2006, and reducing the infant death rate, which in 2011 remained higher than the infant death rate in 46 other countries."

The City of York – Bureau of Health's Maternal Child Health (MCH) Program: *Healthy Moms. Healthy Babies* works to promote healthy birth outcomes through creative partnerships, community initiatives, and an evolving home visitation program using an evidence-based approach to care (clinical expertise, best research evidence, and patient values/preferences) in the perinatal period to improve both short and long-term outcomes.

The following table summarizes Maternal and Child Health Status Indicators with a comparative view of York and Pennsylvania noting the profound need for public health promotion of Maternal Child Health Services.

MCH Indicator	2014-2016		2013-2015		2012-2014		2011-2013	
	York	PA	York	PA	York	PA	York	PA
No Prenatal care in the 1 st	34.9%	27.5%	33.5%	28.0%	32%	27.7%	30.6%	27.8%
trimester								
Low birth weight <2500	11.5%	8.2%	12.2%	8.2%	11.6%	8.2%	11.0%	8.1%
grams								
Pre-Term births (<37	12.6%	9.4%	12.9%	9.4%	12.9%	9.4%	12.0%	9.4%
weeks)								
Smoked in 1 st trimester	17.2%	12.2%	18.2%	13.1%	18.7%	13.8%	19.0%	14.3%
Mothers who didn't	25.5%	20.3%	27.6%	22.1%	30.3%	24.3%	30.1%	26.7%
breastfeed								

Maternal Child Health Status Indicators

Source: Birth and Death Data: Bureau of Health Statistics and Research, PA Department of Health

The *Healthy Moms. Healthy Babies* program received 244 referrals for service in 2017. Staff made initial contact with 123 women referred through the Obstetrical Needs Assessment Form (ONAF) system, 14 second trimester contacts and 27 post-partum contacts. The MCH Nurse followed 144 women and infants.

The Bureau received 59 referrals from physicians or agencies for a variety of reasons, including elevated blood lead levels (blood lead levels at \geq 5 ug/dl); prompting 50 home visits. In addition,

- 47 Environmental Lead Inspections were performed
- 27 Re-Inspections were completed

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 residents. Over 19% of York deaths annually are due to heart disease, accounting for 63 deaths in 2015, which is down dramatically since 2011. The age-adjusted death rate for heart disease in 2015 was 189.5/100,000, averaging 9 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 22 deaths for an age-adjusted rate of 70.1/100,000. The average years of potential life lost per individual was 13 years, an increase since 2011. 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).

YOFK, PA 2009-2015					
Annual Rate (cases):	Three Year Avg. Rates:				
2011 - 278.3 (94)	2009 - 2011 - 261.4				
2012 - 231.5 (75)	2010 - 2012 - 250.9				
2013 - 192.1 (69)	2011 - 2013 - 234.0				
2014 - 200.5 (67)	2012 - 2014 - 208.0				
2015 - 189.5 (63)	2013 - 2015 - 194.0				

Coronary Heart Disease Age Adjusted Death Rates York, PA 2009-2015

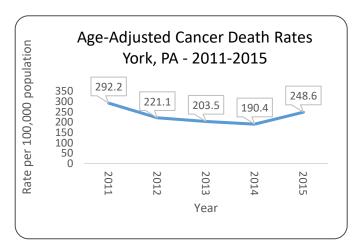
HP 2020 HDS-3: Reduce Stroke deaths to no more than 33.8 per 100,000 people (2000 Age-Adjusted baseline: 42.2/100,000).

Stroke Age Adjusted Death Rates York, PA 2009-2016					
Annual Rate (cases):	Three Year Avg. Rates:				
2011 - 45.0 (15)	2009 - 2011 - 45.4				
2012 - 36.0 (12)	2010 - 2012 - 44.5				
2013 - 79.6 (26)	2011 - 2013 - 53.5				
2014 - 62.2 (20)	2012 - 2014 - 59.3				
2015 - 70.1 (22)	2013 - 2015 - 70.6				

Cancer Control

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).

The number of cancer deaths is almost equal to the number of heart disease deaths in 2014, resulting in the 2^{nd} highest number in cause of death. Age-adjusted cancer deaths in York continue to be well above the HP 2020 goal. Cancer prevention education is important and ties in with lifestyle behaviors, such as reduced smoking or exposure to secondhand smoke, diet and exercise.



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

City of York Lung Cancer Death and Incidence Rates per 100,000 population 2011-2015

Year	Annual Death Rate* (#):	Annual Incidence Rate (#)	3-year period	3- Year Avg. Death Rates:	3- Year Avg. Incidence Rates
2011	47.6 (20)	86.9 (38)	2009-2011	55.1	71.7
2012	41.2 (18)	52.6 (23)	2010-2012	50.9	70.4
2013	32.0 (14)	70.9 (31)	2011-2013	40.3	69.4
2014	27.4 (12)	80.1 (35)	2012-2014	33.5	67.9
2015	64.0 (28)	61.8 (27)	2013-2015	30.5	70.9

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).

City of York Breast Cancer Death and Incidence Rates per 100,000 Population 2011-2015

	Annual Death	nual Death Annual Incidence		3- Year Avg.	3- Year Avg.	
Year	Rate * (#):	Rate (#)	period	Death Rates:	Incidence Rates	
2011	17.6 (4)	132.4 (30)	2009-2011	19.7	125.0	
2012	17.6 (4)	92.7 (21)	2010-2012	16.1	107.4	
2013	30.9 (7)	92.7 (21)	2011-2013	22.0	105.9	
2014	13.2 (3)	114.7 (26)	2012-2014	20.6	100.0	
2015	35.3 (8)	127.9 (29)	2013-2015	26.5	111.8	

HP 2020 C-5: Reduce colorectal cancer rate to no more than 14.5 deaths per 100,000 people.

City of York Colorectal Cancer Death and Incidence Rates per 100,000 Population 2011-2015

	Annual Death	Annual Incidence	3-year	3- Year Avg.	3- Year Avg.
Year	Rate* (#):	Rate (#)	period	Death Rates:	Incidence Rates
2011	16.0 (7)	41.2 (18)	2009-2011	14.4	40.4
2012	11.4 (5)	52.6 (23)	2010-2012	13.7	47.3
2013	18.3 (8)	48.0 (21)	2011-2013	15.2	47.3
2014	18.3 (8)	45.7 (20)	2012-2014	16.0	48.8
2015	9.1 (4)	43.5 (19)	2013-2015	15.2	45.7

Injury Prevention

In 2014, unintentional injuries ranked 3rd in number of deaths in York. Thirty-one (31) people died because of unintentional injuries, up from 22 in 2013 (2014 age-adjusted death rate - 79.2/100,000). Motor vehicle fatalities ranked 10th overall with 3 deaths (age adjusted death rate 7.3/100,000).

Injury	Report	Card	2011-2015	5
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HP 2020 Objective	National Baseline	Year	City of York
IVP-11: Reduce deaths caused by non-transport accidents to no more	40.0	2011 2012	68.0 47.2
than 36/100,000 people.	(2000)	2013	58.6
	(age-adjusted)	2014	79.2
		2015	58.5
IVP-13: Reduce deaths caused by		2011	14.5
motor vehicle crashes to no more than 12.4 per 100,000 people	13.8	2012	10.3
	(2000) (age-adjusted)	2013	9.3
		2014	7.3
		2015	17.2

violence/intentional injury Report Card 2016						
Healthy People 2020 Objective	Baseline	City of York				
MHMD-1: Reduce Suicides to no more than 10.2 per 100,000 people. Nine (9) suicides were reported for York in 2016 (York County Coroner Office).	11.3 (2007)	2016	20.6			
IVP 29: Reduce homicides to no more than 5.5 per 100,000 people. Nine (9) homicides were reported for York in 2016 (York County Coroner Office).	6.1 (2000)	2016	20.6			

Violence/Intentional Injury Report Card 2016

Tobacco Control

Heart disease and cancer are the top two leading causes of death in York accounting for 38% of all deaths for 2015. 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).

Chronic Obstructive Pulmonary Disease Death Rates York, PA 2010-2014

Annual Rates (#):	Three Year Avg. Rates:
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
2014 - 47.8 (15)	2012 - 2014 - 46.8

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 if our tobacco use among pregnant women							
	2010	2011	2012	2013	2014	2015	2016
City of York	80.9	80.2	80.5	79.3	81.1%	81.9%	83%
York County	84.5	83.3	84.3	85	85.4%	87.1%	87.8%
Pennsylvania	84.1	84.7	84.7	85.8	86.3%	87.5%	88.5%

% reported abstinence from tobacco use among pregnant women

The PA Department of Health, Bureau of Health Statistics and Research, reports that 88.5% of pregnant women in PA did not use tobacco 2016. In York, 83% of women who gave birth report not using tobacco during pregnancy. York continues to improve abstinence from tobacco use during pregnancy from 76.8% (2007) to 83% (2016), but still has work to do to meet the HP 2020 goal of 98.6%. The MCH nurse educates pregnant women on the dangers of tobacco use during and after pregnancy.

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 no fluoridation in the city's water system to reduce dental caries. The school-based dental sealant program targets 6-8 and 12-14-year-old students in the elementary and middle schools within the city limits. The Program conducted 7 school-based sealant events during the 2016/2017 school year at York City School District elementary schools: Davis, Devers, Goode, Hannah Penn, McKinley, Jackson, and Ferguson.

The following are results from the events:

- 179 children screened;
- 138 children were sealed (77%);
- 594 1st molar surfaces were sealed (avg. 3.3 surfaces sealed per child);
- 75 children were referred for dental care
- 30 students presented with urgent dental needs.

The Bureau purchased toothbrushes, toothpaste, floss and other hygiene items for all ages, targeting infants to 8th grade, with toddler, youth and adult size toothbrushes. Because the water system is not fluoridated in York, the ability to have good and new hygiene items is an effective way to improve dental health in our children. Information on sugary drinks, coloring books, etc. on good oral health for various ages was distributed at clinic visits and community events. Staff has participated in numerous community events and distributes supplies and educational information to children at these events. The Bureau also partnered with the York City Police Department's Community Services Division and Saturday morning breakfast events for the Homeless to distribute materials, and Family First Health to provide fluoride varnish to children during medical visits.

Conclusions from Local/State Data

Healthy People 2020 National Objectives provide a tool for the City of York - Bureau of Health staff to assess and evaluate public health indicators for the city and to identify areas of need or focus for interventions. The public health issues prevalent in York are similar to and sometimes more severe than other urban areas. Most striking are those indicators which show huge disparities between the city and county, such as the percentage of births to teens (11.7% city to 5.1% in York County); STD rates; and low birth weight babies. Societal and economic trends of poverty and unemployment combined with unhealthy lifestyles or risky behavior choices are additional challenges to our public health delivery system.

Communicable disease reports vary from year to year for specific conditions, however, those caused by risky lifestyle choices or behaviors – STDs, HIV and Hepatitis C – continue to rise despite targeted education and awareness of prevention.

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 (2016 - 10%) with LBW babies in York County outside the City (2016 - 8.2%), and births to teen (11.7% city vs. 5.1% county – 2016) - marked disparities within York County between urban versus suburban/rural. A collaboration of the maternal child health providers and community partners in and outside of York 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 new focus on traumatic brain injury, child abuse prevention, and driver safety.

The number of deaths due to heart disease and cancer are seeing a downward trend over the past decade. However, heart disease and cancer remain the top leading cause of death in York. 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.

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 ethnicities and cultures, is a challenge to educators. Preparing staff to address diverse audiences and ensuring they have adequate resources and knowledge to educate the community are major tasks.

The Bureau staff continue to train and prepare for public health emergency situations. As with any emergency response, the Bureau collaborates with local and state responders, healthcare entities and the community to minimize the impact on city residents.

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 review data for trends in morbidity and mortality, and compares local with county, state and national trends where appropriate. Staff also use locally collected data for epidemiologic surveillance and trending. In 2017 the Bureau began the process of instituting an electronic data system to better capture our work and the health of the community with full implementation in March 2018.

Qualitative information is gathered in many ways. Major sources of qualitative information are garnered through 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.

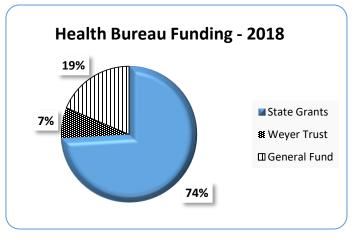
The Health Bureau staff meet yearly to develop the goals and objectives for the Annual Health Plan. Staff discuss program successes and identify issues and strategies that can be implemented to improve the public's health and apply the following criteria for setting annual goals and objectives:

- 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. Health Bureau staff assess 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 assuring that services are provided through sound public health practices.



The City of York - Bureau of Health's 2018 budget of \$2.24 million is funded by state grants, city CDBG funds, the Weyer Trust and the city's General Fund. A 5% increase in General Fund is attributed to the increased costs for in the new 3-year ambulance contract.

The Bureau has fourteen full-time employees. The Medical Director, part time, is supported through WellSpan Health's Community Partnership. Additional city personnel are utilized for various administrative activities, including: policy, finance, human resources, and legal.

Health Bureau staff actively engage in various community and volunteer activities with local, state and national professional organizations through their positions and interests in the health and well-being 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; York Opioid Collaborative, and the Transportation Task Force

The Health Bureau focuses its work on integrated population health strategies by engaging staff, community partners and residents in shared goals and approaches to provide a greater impact on community health. Strategies allow 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, city departments and the community on public health issues. Administrative staff conduct 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. Staff is responsible for program services and contract management (both local and state) through sound fiscal 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. Bureau leadership develop relationships with the community and health care professionals in fostering its ability to receive timely reporting of diseases, cooperate with others on public health interventions, implement strategies to improve public health measures, and consider a broader view of health care.

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

Objective 1: Implement electronic data management system by March 31, 2018.

Activities:

- Complete staff training on practice management and clinical services
- Assess staff competency on system and seek technical assistance as needed

Evaluation Methods:

- Training is completed
- Number and/or type of assistance required and requested

Objective 2: Utilize Office 365 for better efficiency in communications.

Activities:

- Identify staff training needs/gaps in use of Office 365.
- Train staff on Office 365 to ensure functionality and use of program

Evaluation Methods:

• Increase in staff competency per staff survey

Objective 3: Develop a three to five-year strategic plan for the Bureau beginning in April 2018.

Activities:

- Develop and distribute a request for proposal to potential consultants
- Review and select a consultant
- Conduct planning sessions and develop plan
- Share plan with stakeholders

Evaluation Methods:

- # vendor proposals received
- Plan is developed
- Communication strategies used to share the plan with the community

Objective 4: Diversify revenue stream for future program growth by October 1, 2018.

Activities:

- Develop billing capacity through the electronic health record system
- Use analytical tools to assess cost effectiveness of programs and services
- Meet with Managed Care Organizations and other potential funding / payment systems to assess best strategies to implement.

Evaluation Methods:

- At least one new source of funding/revenue is implemented within our electronic health system.
- *#* of meetings with potential funding sources
- # of agreements resulting from meetings with funders.

Objective 5: Increase the Bureau's visibility within the community.

Activities:

- Integrate Bureau communications with other city communications (i.e. through Mayor's office)
- Develop communication strategy internally across programs and services and with other city services for effectively reaching our target populations

Evaluation Methods:

- # communications to community through various methods
- Communication strategy/document developed and shared with staff and other city services.

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 the City of York'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 the 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. Attention is given to collaborative response actions with local medical, business, community, and neighborhood partners.

<u>Program Goal 1</u>: Increase organizational, community and individual emergency preparedness through education and training.

Objective 1: Solidify city network for faith-based organizations in direct relationship to emergency preparedness response activities.

Activities:

- Develop a list of targeted churches to engage
- Coordinate and collaborate with churches for use as emergency shelters
- Identify neighborhood locations for short term use in an emergency (a few hours)
- Engage faith-based organizations in emergency preparedness activities and trainings

Evaluation Methods:

- At least 4 churches are identified and engage in response activities
- Potential response activities requested are outlined
- # faith-based organizations participating in trainings or activities

Objective 2: Develop and formalize a volunteer registry system and operationalize activities.

- Outreach to and engagement of current CERT volunteers
- Mesh existing plans with new volunteer requirements
- Educate and/or train volunteers regarding registry for certification/credentialing.

Evaluation Methods

- Type and # of outreach made to current volunteers
- # education opportunities held
- # volunteers registered

Administrative and Support Program Performance Review 2017

<u>Program Goal</u>: Provide quality, effective and comprehensive public health services to the City of York.

Objective 1: Implement and electronic data management system by December 31, 2017.

PARTIALLY ACHIEVED

The Bureau contracted with the Public Health Informatics Institute to provide guidance and recommendations on the requirements needed and potential vendors appropriate for the Bureau's electronic health system. The Bureau received 4 vendor proposals and selected CureMD as the vendor of choice and entered into contract in September 2017. Bureau staff have been engaged with the vendor in the development process to begin the implementation phase. Training staff on the system began in January 2018 with full implementation expected by March 31, 2018.

Objective 2: Utilize SharePoint's potential for data collection and information by December 31, 2017.

ACHIEVED

Staff is utilizing SharePoint for organizing documents/files by program and to share pertinent information among staff. Staff is using SharePoint in the sharing of data for communicable disease reporting and for data collection within its Community Health Services programs for reporting.

Objective 3: Align processes and develop practices to allow successful application for accreditation by December 31, 2018.

PARTIALLY ACHIEVED

Began to associate documentation in SharePoint to assist with core strategy requirements. Bureau is involved in the Community Health Needs Assessment of the Healthy York County Coalition and has aligned some goals and activities with the CHNA priorities (i.e. Adult Overweight and Obesity – gardens and physical activity and Maternal Child Health activities).

Objective 4: Relocate our clinic space to increase capacity for public health services by December 31, 2017.

PARTIALLY ACHIEVED

Bureau staff spent considerable time working with a community partner to assess space opportunities for a potential move and determined that at this time, the move was not feasible.

ACHIEVED

- Re-designed the nurse home visitation program in utilizing an evidence-informed approach to improve maternal and infant health
- Staff received phlebotomy training to enhance capacity for more comprehensive HIV testing.
- Staff shared the newly redesigned home visitation program and progress to date at the maternal child health integrated population health meeting in March 2017.

Objective 6: Implement new communication assets by January 31, 2017.

ACHIEVED

Leadership reviewed the communications policy with the staff, sharing newly developed templates for press releases, flyers, etc. Staff are utilizing the assets in its communications, i.e. MCH update letter, HIV event.

Emergency Preparedness Performance Review 2017

<u>Program Goal 1</u>: 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 Zika Virus.

ACHIEVED

- Reviewed and assessed PA-DOH and CDC recommendations/requirements for Zika monitoring, reporting and follow up. Worked with local health care providers to establish a Zika response plan and appropriate policies and procedures.
- Provided support and education with health care providers by coordinating professional education for OB and Pediatric providers at York Hospital's grand rounds. A PA Department of Health epidemiologist presented the ZIKA information.
- Provided the following education and materials to the community on Zika prevention:
 - Participated in summer playgrounds and day camps to discuss mosquito bite prevention and ZIKA, coordinating with the York County West Nile Virus program for the presentation
 - Conducted ZIKA at the York Frank's Theatres from Memorial Day through September
 - Promoted ZIKA and mosquito bite prevention at the York Revs game against the "Skeeters"
 - Held a community event at a Latino church to raise awareness
 - Partnered with property maintenance inspectors in placing door hangers in both English and Spanish throughout the community on prevention, and distributed information at laundry mats, gas stations, library and other community resources.

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

ACHIEVED

- Provided a Family Preparedness CERT training. The multi-generational event was held in September.
- Presented emergency preparedness information to seniors at Windy Hill Senior Center.

<u>Program Goal 2</u>: Provide quality, effective and comprehensive Public Health Emergency Preparedness planning and response actions for the York community.

Objective 1: Effectively transition operational functions from the existing primary Emergency Preparedness Planner to the Community Health Specialist, Emergency Preparedness staff.

ACHIEVED

- Successfully transitioned responsibilities of retiring Emergency Preparedness Planner to the Community Health Specialist, and identified potential professional development training needs in the process (i.e. GIS training)
- Transferred and updated plans and documents to the Community Health Specialist.
- City hired new Emergency Planner. The Community Health Specialist is working closely with the Emergency Planner on identifying preparedness opportunities locally.
- Attended preparedness meetings with community partners and stakeholders (PA-DOH, SCTF, YAMMRS, VOAD, and others as deemed appropriate).

Objective 2: Develop and test network communication plan for outbreaks, such as Ebola and other novel viruses.

PARTIALLY ACHIEVED

Created a database of contacts to communicate with in certain and/or all situations to be able to target messages efficiently. Continue to work with the city's IT department to create system capabilities for dissemination, therefore we were not able to test our process.

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 and the entire community. PHS is comprised of our clinical services (Personal Health) and our community services (Community Health). The largest component of clinical services are provided by the Community Health Nurses and the Disease Intervention Specialist. The major responsibility of the clinical 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, the City of York – Bureau of Health, of reportable communicable conditions or diseases. 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 staff provide 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 provide 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.

Educating residents about strategies to improve their health conditions or to maintain general health is important in creating a healthy community. 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 staff focus on activities, policies, systems and environmental changes that support individual and community health to reverse health behavior trends.

Community Health Services encompass all 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 residents.

Animal bites pose additional public health problems to the community and can lead to injuries and infectious diseases, including rabies. To prevent animal bites, Health Bureau staff provide 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.

The City of York faces many public health challenges. The Bureau relies heavily on community collaborations to reduce duplication of services and to streamline efforts aimed at primary prevention. The Bureau has several essential working relationships with key community stakeholders, which aid in promoting and implementing efficient and effective public health strategies. Staff members conduct surveillance on emerging and existing health trends 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.

In 2017 the Bureau began the implementation process for a new electronic health record system, CureMD, to improve efficiencies within clinical work, to collect patient demographic and other information in a consistent and efficient manner, and to improve data and data analysis capabilities to drive our interventions. In 2018, clinical operations will be transferred to the new system, CureMD.

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. Education and testing information are provided at community events as appropriate.

Program Goals for 2018

Program Goal: Reduce and prevent the incidence of TB in the City of York.

Objective 1: Provide education and PPD screenings for patients and providers as appropriate.

Activities:

- Provide PPD screenings upon request
- Provide PPD screenings as needed and requested for shelters or group facilities
- Provide results and any necessary follow up with patients and providers
- Educate patients, community and providers as necessary on PPD screening

Evaluation Method:

- 100% of all appropriate requests for PPD screening are conducted; when not appropriate, education is provided
- Education to patients, community and providers is completed per request and as needed A minimum of 2 outreach activities related to PPD screenings is completed

Objective 2: Integrate new Electronic Health Record (E H R) system into daily practices.

- Obtain training on the E H R
- Integrate TB program forms into the system and work flow process
- Assess and determine process for 340B medication monitoring and inventory

Evaluation Method:

- Basic understanding and ability to function in the E H R system is achieved
- TB program forms are integrated into the E H R system and workflow
- Determination is made regarding the medication monitoring and inventory of 340B medications

SEXUALLY TRANSMITTED DISEASES, HIV and 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 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.

Community awareness and education are conducted through outreach and social media networking to bring high-risk individuals and their social network contacts in for testing.

Program Goal: Reduce new HIV/STD infections.

Objective 1: Integrate STD work into CureMD to allow for appropriate clinical care and tracking of epidemiologic trends.

Activities:

- Train staff in new system
- Begin using the system
- Identify training / knowledge gaps and adjust
- Identify trends

Evaluation Methods:

- Training completed
- Staff competent in system per survey of knowledge and comfort
- Staff able to analyze system data for trends

Objective 2: Meet core standards of grants, as they relate to specific metrics.

Activities:

- Continue to work with the state program to improve novel ways of testing within the community
- Develop a core set of metrics to track performance

Evaluation Methods:

• Metrics develops and/or met

COMMUNICABLE DISEASES

Communicable Diseases, such as hepatitis, measles, and West Nile Virus, by 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.

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 provided by the Health Bureau are 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 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 requirements.

Program Goal: Reduce or eliminate indigenous cases of vaccine-preventable disease.

Objective 1: Understand local data collection system and ability to access immunization data on a community level.

- Meet with PA Department of Health staff to discuss potential for community-wide data on immunization levels
- Survey local providers to know how they are capturing immunization data and how they use it.

- Research our ability to extract data on immunization levels for the entire city of York/York community
- Develop metrics to query (i.e. childhood immunizations or adolescent immunizations)

Evaluation Methods:

- Minutes from meeting with PA DOH
- Survey results
- Local strategy created to access information on a regular basis

Objective 2: Assess impact of new school immunization regulations on the effectiveness of our collective efforts locally.

Activities:

- Meet with York City School District staff to discuss challenges and opportunities for the next school year
- Develop coordinated messaging at the end of the school year for immunizations required for next school year

Evaluation Methods:

- Minutes from meeting with school district
- Strategies or plan developed for coordinated messaging

MATERNAL CHILD HEALTH SERVICES

Premature births (<37 weeks gestation) are a leading cause of infant mortality in the United States (CDC). Substance use, smoking, maternal age, poverty, lack of prenatal care, domestic violence, stress, chronic health problems of the mother, and lack of birth spacing are known risk factors for premature delivery. Premature births are linked to intellectual disabilities, respiratory concerns, cerebral palsy, vision and hearing loss, and digestive problems. Additionally, LBW babies (<5.5 lbs. or 2500 g) are at increased risk of illness, infections, delayed motor and social development and learning disabilities. Premature babies are frequently LBW babies.

Infant mortality is also linked to birth defects, SIDS, pregnancy complications (gestational diabetes, high blood pressure, mental health concerns, obesity, infections) and injuries. *Healthy Moms. Healthy Babies,* funded by the Maternal Child Health Block Grant through the PA Department of Health, provides public health services to pregnant and postpartum women and infants up to 2 years of age to decrease infant mortality and morbidity by addressing known factors related to the same. Using an evidence-based practice approach, education, health promotion, and reduction of risk is individualized to patient need with the intended result of both short- and long-term maternal child health outcomes.

Healthy Moms. Healthy Babies addresses clinical needs and education, provides resource referrals, assesses substance use and domestic violence concerns, utilizes Adverse Childhood Experiences' questions as a building block for health promotion and disease prevention, and desires to advocate for the improvement of pregnancy and birth outcomes by addressing social determinants of health (SDOH) as barriers to said outcomes.

Healthy Moms. Healthy Babies exists to improve birth outcomes and the health of woman and infants in York.

Program Goal: Promote healthy moms, infants and children in York.

Objective 1: Outreach Worker will contact enrolled pregnant women every two months until delivery.

Activities:

- Develop tickler system as a reminder to contact women regularly regarding care
- Begin using tickler system 1/2/18

Evaluation:

• Track contacts made by type (phone, letter, visit) using system

Objective 2: Promote breastfeeding among women enrolled in Healthy Moms. Healthy Babies.

Activities:

- Develop role and referral process of International Breastfeeding Certified Lactation Consultant (IBCLC)
- Post breastfeeding video on local access television station WRCT

Evaluation:

- # patients consulted by IBCLC
- *#* patients contacted by IBCLC

Objective 3: Expand MCH staff due to volume and complexity of cases.

Activities:

- Seek funding for additional nurses
- Develop roles and expectations for additional staff
- Post position and hire at least one new MCH nurse

Evaluation:

- Funding is secured
- At least one additional nurse is hired

Objective 4: Develop baseline, searchable data points for analysis and outcomes in CureMD.

Activities:

- Identify data points required by grants and/or Bureau
- Work with CureMD to develop reports
- Develop means to collect, search, and/or analyze non-discreet data in CureMD for analysis.

Evaluation:

- Data points identified
- Reports/queries developed to extract data

Objective 5: Develop pregnancy stratification interim tool to allow OB offices to identify appropriate home visitation program for the patient.

- Collaborate with OB providers and community partners to identify current system of referrals
- Conduct literature review to assist in developing a categorization and score for appropriate referrals
- Solidify process with providers and partners

Evaluation:

- Tool is developed
- Tool is used for referring women to appropriate program

LEAD HAZARD RISK REDUCTION SERVICES

The Pennsylvania Departments of Health and Human Services would like all children with elevated blood lead levels of 5 ug/dl or greater to receive an educational home visit and an Environmental Lead Risk Assessment Inspection.

The Health Bureau received referrals from physician offices for children with:

- two consecutive blood lead levels, three months apart, of 5-9 ug/dl,
- one venous blood level of 10 ug/dl or greater; or
- 2 fingerstick blood lead levels of 10 ug/dl or greater.

The Bureau's licensed Lead Risk Assessor provides the home visit and inspection to the families of these children and enforces the city's codified ordinance 1139 – Lead Hazards.

The Bureau received a HUD Lead Hazard Control grant through the PA Department of Health in 2017. This grant is a collaboration with the York County Planning Commission to inspect and remediate lead hazards in homes where a child with an elevated blood lead level resides and to promote healthy and safe housing.

SAFE AND HEALTHY COMMUNITIES PROGRAM

Funded and prescribed by the PA Department of Health, this comprehensive program aims to: (1) increase healthy lifestyle behaviors, such as physical activity and healthy eating; (2) improve transportation-related safety for those who walk, bike and take public transit; (3) decrease injuries, such as falls among older adults and concussions among youth; and (4) prevent child sexual abuse through educational activities with parents and caregivers.

These evidence-based activities include: community outreach, improving the built environment, using policy to effect change, partnering with community stakeholders, and providing education and other behavior change interventions for infants, children, and adults. Notable programs and initiatives supported by the Safe and Healthy Communities Program include: Complete Streets, Safe Routes to School, Zagster Bike Share, the Healthy Corner Store Initiative, community garden/urban farming initiatives, A Matter of Balance- a fall prevention program for older adults, and Parents in the Know- a child sexual abuse prevention program.

Program Goal: Prevent chronic disease and injury by promoting healthy lifestyle behaviors and improving the overall health and safety of our community through the implementation of policy, systems, and environmental changes supplemented with evidence-based individual behavior change programs.

Objective 1: Increase access to healthy foods through the implementation of policy, systems, and environmental changes that improve the local food system and through evidence-informed nutrition education.

- Continue to implement the Healthy Corner Store Initiative by providing funding (if available), educational materials, and technical assistance to new and existing partner stores
- Support the Penn Market revitalization project utilizing strategies outlined in the City of York's Penn Market/Healthy Food Access study conducted by the Food Trust

- Promote the use of WIC and SNAP benefits and coordinate nutrition education activities at farmer's markets and other food retail settings
- Support community garden and urban farming initiatives by providing funding (if available), technical assistance, and coordinate nutrition education activities.

Evaluation Methods:

- # of Healthy Corner Store Initiative (HCSI) partner stores
- # of strategies implemented from the City of York's Penn Market/Healthy Food Access study
- # and description of activities that promote WIC/SNAP at farmers markets and HCSI partner stores
- # of nutrition education activities coordinated at farmer's markets and other food retail settings
- # of new and existing community gardens receiving support
- Quantity of produce and amount of produce sales related to urban farming initiatives.

Objective 2: Increase physical activity through the provision of safe and accessible active transportation options and promoting walking and biking as part of a healthier lifestyle.

Activities:

- Implement environmental changes that increase active transportation and promote Safe Routes to School
- Update the City of York's Complete Streets Policy and continue to implement its requirements
- Submit the recertification application for the Bicycle Friendly Community Program (BFC)
- Conduct planning and evaluation activities related to bike and pedestrian traffic safety
- Implement the WalkWorks route and promote its use in community and worksite settings
- Support community events that promote walking and biking
- Partner with worksites to develop employee walking programs and other wellness policies and programs.

Evaluation Methods:

- *#* and type of environmental changes that support active transportation
- # of Safe Routes to School improvements
- Description of Complete Streets Policy updates
- BFC application submitted/recertification response
- # and type of bike/pedestrian planning and evaluation activities
- # of promotional activities related to the WalkWorks route
- # of community events that promote walking and biking
- # of partner worksites

Objective 3: Utilize the evidence-based *A Matter of Balance* program to decrease the fear of falling and prevent falls among York-area residents.

- Conduct Coach training and update sessions for coaches annually
- Provide technical assistance to certified partner coaches
- Participate in local falls prevention coalition, Falls Free Coalition of York County
- Collaborate with the York County Area Agency on Aging and other partners to promote the *A Matter of Balance* program

Evaluation Methods:

- # of A Matter of Balance (MOB) classes held in York County
- # of MOB participants
- # of community events that promoted MOB and STEADI toolkit resources
- # of coach trainings and update sessions held
- # of coaches trained and active coaches
- # of providers, healthcare facilities, and community organizations reached for falls prevention outreach and MOB referrals utilizing the STEADI toolkit
- # of collaborative falls prevention partnerships

Objective 4: Decrease the leading preventable injuries as identified by the PA DOH among children and youth.

Activities:

- Increase motor vehicle safety among teen drivers through implementing an evidence-based motor vehicle safety course
- Decrease negative outcomes of TBI through the implementation of the ConcussionWise education program
- Provide education about the BrainSTEPS team to parents, caregivers, coaches, and healthcare providers
- Meet with schools to provide technical assistance regarding concussion management practices
- Decrease the risk of child abuse and neglect through the implementation of the Parents in the Know program

Evaluation Methods:

- # of motor vehicle safety classes held; # of participating students
- # of local trained Survival 101 instructors
- # of ConcussionWise sessions completed; # of participants
- # of parents, caregivers, coaches, and healthcare providers educated about the BrainSTEPS team
- # of schools engaged in concussion management team review process
- # of Parents in the Know classes held; # of participants

Objective 5: Implement health education activities and lessons to increase knowledge in and awareness of health topics for city school students.

Activities:

- Identify schools to participate in health education activities
- Educate and engage students on various health topics
- Identify collaborative partners to engage in educational activities
- Utilize Safe Kids York County to assist with education and promotional events

Evaluation Methods:

- # of school locations participating in educational program
- *#* of students receiving education
- *#* of educational activities conducted

- *#* of collaborative partnerships
- Pre and post test results, when applicable

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. The community health nurse and staff distribute toothbrushes and toothpaste, promote good oral hygiene, and provide parents or guardians with information to improve their child's oral health during Immunization clinics and at community events.

Personal Health Services Performance Review for 2017

Program Goal: Reduce and prevent the incidence of TB disease in York.

Objective 1: Provide education to providers and employers on PPD screening process and outcome follow-up.

ACHIEVED

Staff created a letter to send to the top employers who frequently requested the 2-Step testing. The letter outlined the Bureau's standards of care and identified when a 2-Step test would be required vs. one test. Eight to ten employers received the letter, checklist and education, resulting in fewer requests for the 2-Step testing.

Objective 2: Explore once weekly treatment for LTBI.

ACHIEVED

Staff researched the strategies behind once weekly treatment for LTBI and assessed the cost/benefit of the treatment vs. the current 9-month treatment regimen. The Bureau has not moved forward with the implementation of this treatment due to staffing and other priorities.

Program Goal: Reduce all communicable diseases among York residents.

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

ACHIEVED

- Presented to /met with the following community partners regarding resources of the Bureau:
 - York County Prison staff to discuss TB and HIV discharges into the community
 - o Long Term Care facilities to talk about influenza prevention
 - Day care settings hand hygiene and disease outbreak prevention
 - York City School Health Ambassadors hand hygiene
 - Summer Playgrounds Zika and mosquito-borne disease prevention
 - Zika Education community event and grand rounds at York Hospital

• Community events at: library, Women's and Men's Shows, Mayor's City Hall for a Day, National Night Out, Churches and other community partner events

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

ACHIEVED

- Met with HIV Coalition members in Harrisburg
- Met with Family Health Council of Central PA to discuss strategies and potential funding opportunities to reduce STDs in the community
- Met with York College of PA Student Health Services staff regarding STD prevention among college students
- Participated in health fairs and met with shelters, and others to discuss STD prevention; including: Katallasso Health Fair, National Night Out, Delphia House, Citizens Connection, Geo Group, Justice Works, Franks Theater Health Event for Zika, Martin Library Health Fair, Keep It Green, York College Sex in the Dark, York College Condom Bingo, York College Health Fair, YWCA Victims Assistance Center, Judah in the City, Homeless Breakfast, HACC Fair, Windy Hill Senior Center, and Jefferson Women's Shelter
- Presented to Family Practice residents
- Worked with Byrnes Health Education Center to develop STD education module for students

Program Goal: Reduce new HIV/STD infections.

Objective 1: Increase prevention and screening activities for at-risk populations.

ACHIEVED

- Developed relationships with high-risk populations (i.e. MSM, college students, IV drug users) and the locations they live/frequent (i.e., correction center, halfway houses, local churches and colleges) to better serve their HIV/STD education and testing needs
- 4500 condoms were distributed

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

ACHIEVED

- Consistent with CDC guidelines, 22 partners services were initiated with collaboration from Family First Health and Planned Parenthood
- 100% of individuals testing positive for HIV and / or syphilis were offered Partner Services

Objective 3: Encourage and support community partners to promote efforts for appropriate screening and testing of STDs.

ACHIEVED

25 meetings/visits conducted with partners and the Department of Health to facilitate appropriate screening and testing.

Objective 4: Encourage and support staff in professional development opportunities in STD/HIV services.

ACHIEVED

- Staff attended DIS Conference on STD guidance, HIV Surveillance, Recidivism workshop and webinars on Partner Services and other related topics
- 3 staff attended a total of 18 trainings and professional development opportunities.
- 2 staff renewed their phlebotomy certifications

Program Goal: 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.

ACHIEVED

- Staff offer and provide vaccinations to all eligible York residents. In 2017 staff administered 2,057 vaccinations, and when appropriate provided residents with forms to apply to the Healthy Community Network or connected residents to primary care homes
- Held a dinner for providers at HACC and attended the Pediatric Business Meeting at York Hospital to share new state immunization regulations and to discuss strategies to ensure compliance in the community
- Promoted Immunization awareness and observances through collaborative efforts with the York/Adams Immunization Coalition and others (i.e. baby shower, Women's and Men's Shows, Resource Fairs, School Health Fairs, Martin Library, National Night Out events, bulletin boards and social media)

Program Goal: Reduce animal bites and exposure to rabies in the City of York.

Objective: Explore ways to integrate animal bite education into other Health Bureau activities.

ACHIEVED

Health Bureau staff integrate animal bite education during home visits, at summer playground/camps and during the school year through the student ambassador program. Staff also provide education to individuals and owners when an animal bite is reported

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

Objective 1: Connect with 10 city employees of 50 or more employees to promote their compliance with the federal lactation law and offered support for compliance. (MICH-22)

ACHIEVED

A letter was sent to 34 employers to promote the federal lactation law and to support compliance if requested. 3 employers responded, none needing assistance and stated they were compliant with the law

Objective 2: Promote breastfeeding in conjunction with community partners using social media outlets. (MICH-21)

ACHIEVED

• The Bureau chose 4 messages to use from the *Surgeon General's Call to Action to Support Breastfeeding* to promote via Facebook, YouTube, the Health Bureau e-newsletter, and WRCT, our local television station. The Susquehanna Valley Breastfeeding Coalition developed a PSA a in both English and Spanish on the benefits of breastfeeding. The posts on Facebook reached 485 (English) and 148 (Spanish); Likes - 14 (English); 4 (Spanish) and 17 Shares. The Bureau also posted a message during World Breastfeeding Week reaching 140 people with 3 Likes, and 3 Shares

• The Bureau added a volunteer lactation consultant – IBCLC – to support mothers interested in breastfeeding

Objective 3: Develop a tool to capture data required for annual MCH grant evaluation.

PARTIALLY ACHIEVED

Worked with a local partner for assistance in developing and setting up a system for tracking women enrolled in the program and outcomes achieved. This was not completed as intended due to pending interface secondary to our Electronic Health Record system being initiated.

Objective 4: Improve birth outcomes of women and babies enrolled in the program. (MICH-8.1 & 8.2; MICH-9.1 & 9.2; MICH-11.3)

NOT ACHIEVED

- The metrics developed at the time were unattainable to lack of infrastructure and resources in place to do the analytics. However, we continue to collect information manually and will use the new electronic health record to capture specific data indicators.
- Although analytics are hard to attain currently, anecdotally, the program staff work with the women to achieve the healthiest pregnancy and outcome possible under each individual circumstance. Staff consistently provide evidence-informed education on healthy behaviors during pregnancy, provide materials and information resources, employ the 5Ps screening tool to direct educational opportunities and track outcome measures based on trimester of enrollment in program.

Objective 5: Increase positive behaviors for women and babies enrolled in the program. (MICH-1.8; MICH-21.1)

ACHIEVED

- 100/% of families received "Safe Sleep" education/information
- 8 women, or 29%, initiated and/or continued to breastfeed out of 27 women who delivered in 2017
- 100% of families were provided children's books

ACHIEVED

- Staff provided the following Lead related activities in 2017:
 - 59 referrals received of children with elevated blood lead levels requesting home inspections
 - 50 Home visits conducted
 - 47 Environmental Lead Inspections completed; 27 Re-inspections completed

Program Goal: Prevent chronic disease and injury by promoting healthy lifestyle behaviors and improving the overall health and safety of our community through the implementation of policy, systems, and environmental changes supplemented with evidenced-based individual behavior change programs.

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

ACHIEVED

- # of social media posts, news articles, blogs, etc.
 - 0 46 Facebook posts, 17 articles/resource links via 12 newsletters
- 8 community events and activities that promote Million Hearts concepts
 - \circ 3 Smoke-free events Go Green in the City, Box Lunch Revue, York Fest
 - o 4 Walking events
 - 1 Bike Share launch event
- 5 partnering worksites that promote health and wellness programs that align with Million Hearts
 - o Bell Socialization, YMCA, Martin Library, Community Progress Council, Shipley
- 5 stakeholders engaged in collaborative work that aligns with the Million Hearts initiative
 - Healthy York County Coalition, YMCA-Eat Play Breathe York, York County Planning Commission, Transportation Resource Group, Downtown Inc.
- 4 collaborative community health projects and activities supported by Million Hearts
 - Increasing walking, biking, healthy eating, and decreasing tobacco use.
- 8 partner organizations promoting the Million Hearts initiative

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

ACHIEVED

- Describe opportunities and strategies identified to increase healthy food options available in corner stores.
 - Refrigeration/shelving equipment to increase capacity and improve appearance, link fresh food suppliers/producers, host pop-up markets, and increase advertising, signage, and educational activities
- 4 committed stores -Green's Food Market, Pak's Market, Lee's Food Market, and Asian Food Mart
- 7 prospective stores- Queen St. corridor/Salem Square neighborhood
- 4 collaborative stakeholders involved in healthy corner store workgroup
 - Redevelopment Authority, York Fresh Food Farms, Eat Play Breathe York, and WellSpan Community Health and Wellness
- Utilize evaluation process / tool Applied (needs revised)
 - 3 promotional and educational materials developed and implemented
 - shelf tags, partner store door sticker, educational poster
- 3 potential programming opportunities identified
 - o taste testing, pop-up markets, SNAP/WIC outreach
- 14 fresh options added after launching the pilot initiative
- Amount (quantity and sales) of produce sold at pilot sites
 - Undetermined currently; need to revise evaluation processes

Objective 3: Utilize the evidence-based framework for Safe Routes to School (SRTS) to improve safety for city school students.

ACHIEVED

•

• 6 school locations participating in SRTS

- York Academy, Hannah Penn, Davis, Devers, and Goode, Lincoln Charter
- 144 students received education aligned with SRTS
- 12 SRTS educational activities conducted
- 2 environmental changes made that align with SRTS
- 3 collaborative SRTS partnership Safe Kids York County, Communities in Schools, Martin Library

Description of Activities:

- Environmental changes made that align with SRTS:
 - One mid-block crosswalk was installed at Newton Ave. and S. George Street intersection due to heavy high school pedestrian traffic.
 - Improvements for bike lanes/route markings and high-visibility crosswalk markings on Newberry St. at Ferguson School.
 - School-based traffic study was conducted identifying traffic safety improvements and crossing-guard needs along walking routes to school, which will take place in 2018.

Objective 4: Utilize the evidence-based *A Matter of Balance* program to decrease the fear of falling and prevent falls among York-area residents.

ACHIEVED

- 21 A Matter of Balance (MOB) classes held in York County.
- 186 MOB participants aged 55 years and older
- 5 falls prevention educational activities.
- 2 community events that promoted MOB and STEADI toolkit resources
- 1 coach trained
- 1 coach training and update sessions held.
- 220 potential providers, healthcare facilities, and community organizations reached for falls prevention outreach and MOB referrals utilizing the STEADI toolkit.
- 7 collaborative falls prevention partnerships through the Falls Free Coalition of York County

Description of Activities:

- Bureau of Health (YCBH) provided supplies and Master Trainer support for a coach update session.
- Coaches helped organize classes at Aldersgate United Methodist Church and St. Matthew Lutheran Church.
- Falls prevention educational activities included: coach update, *A Matter of Balance* classes held, prescription medication management/visual screening sessions, distribution of MOB home safety checklists, STEADI toolkit distribution, assisting with website development for Falls Free Coalition.
- YCBH promoted falls prevention to the community in partnership with the Falls Free Coalition of York County. MOB home safety checklists (149) and Stay Independent brochures (325) were distributed at the York County 50plus Expo.
- A prescription medication management educational session was held at St. Matthew Lutheran Church as part of the MOB class. One visual screening was held at White Rose Senior Center.
- YCBH collaborated with partners such as York County Area Agency on Aging, WellSpan Health, UPMC Pinnacle, United Healthcare Community Plan, Pennsylvania Link, HealthSouth,

York County Coroner, Caring Hospice Services and Minnich's Pharmacy through the Falls Free Coalition of York County.

Objective 5: To explore and identify emerging public health issues related to violence and injury prevention in the City of York.

ACHIEVED

- Data analysis/report provided on at least one critical VIPP issue
 - Local and state data reviewed and compiled as part of SHC 2017-2020 grant application
- At least one opportunity is identified by the Bureau of Health to collaboratively address internally (coordinating Health Bureau programs and working with other city departments) and through partnering with community stakeholders.
 - Motor-vehicle safety, concussion management among youth, child abuse prevention

Description of Activities:

- Staff trained to coordinate and/or facilitate the following programs:
 - Survival 101- motor vehicle safety program
 - ConcussionWise- concussion education and prevention
- Parents in the Know- child sexual abuse prevention program.
 1 ConcussionWISE training provided to Voni Grimes Gym through collaboration with the York City Parks & Recreation Department.
- Health staff are seeking partnership with York City Police Department to deliver Survival 101 program in 2018.
- Health staff have established plans with YWCA-Access Victim Assistance Center to deliver Parents in the Know in 2018.

<u>Program Goal</u>: Improve dental health of students through early identification of problems and/or poor habits.

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

ACHIEVED

• The Bureau of Health contracts with Family First Health (FFH) to conduct school based dental sealant events. FFH conducted 7 Sealant events this year at 4 York City School District elementary schools: Goode, McKinley, Davis, Hannah Penn, Devers, Jackson, and Ferguson.

The following are results from the events:

- 179 children screened;
- 138 children were sealed (77%);
- 594 1st molar surfaces were sealed (avg. 3.3 surfaces sealed per child);
- 75 children were referred for dental care
- 30 students presented with urgent dental needs.

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 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 385 food establishments and 240 special event vendors with the potential for food related illnesses.

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

ENVIRONMENTAL HEALTH SERVICES MATRIX

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

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

Environmental Health Services Goals and Objectives 2018

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 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.

<u>Program Goal</u>: 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 3 wastewater 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. One full-time and one half-time trained health sanitarians 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 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 complaints investigated

Institution Sanitation and Safety

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 a PA Department of Health sanitarian throughout the year for water quality, safety, and sanitation. Additional inspections are provided upon request or as needed.

Solid Waste Management

The Environmental Bureau consists of five (5) full-time and one (1) part-time positions. It 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 saves resources and landfill space. Also, by removing recyclables and yard waste from the waste stream, the city significantly reduces disposal costs.

This bureau routinely monitors contract requirements, schedules large-item collections, summarizes collection and disposal costs, receives and tracks resolution of collection complaints, inspects collection crews, and meets with hauler representatives as needed. The majority of waste is processible and is delivered to the incinerator. Non-processible waste, such as street sweeping grit, is delivered to Modern Landfill. An electronics ban has been in effect since January 24, 2013. The city continues to refer customer to use York County Solid Waste Authority's electronics program which accepts electronics from all York County residents, Monday through Saturday every week.

The Environmental Services Supervisor oversees the Refuse and Recycling Collections Contract with York Waste Disposal/Republic Services which runs through April 30, 2021. There are (3) optional 1-year extensions, provided both parties agree to extend under the existing terms.

<u>Program Goal</u>: 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 contaminates. 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 2017

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

- In the spring, thirteen 90-minute public education sessions were held in second-grade classrooms (267 students) in the city's elementary schools. Most classes took a "litter walk" to remove trash outside of their school
- Along with Public Works administration, the Environmental Bureau worked with a high school intern during a 6-week summer program (beginning late June)
- Having begun in 1991, the City's Adopt-A-Block (AAB) program finished its 26th year, with four scheduled AAB cleanups by volunteers from 24 active groups, as well as from active York College student organizations totaling about 200 students
- Bureau staff arranged for delivery of supplies, removal of litter bags, free disposal, and other preparations for Keep York Beautiful's Spring and Fall Litter Cleanups as well as the annual Trash-A-Thon litter cleanup held by Tidings of Peace Christian School
- The City's litter vacuum operated daily, weather permitting, primarily in the downtown area

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 590 industrial site visits and 31 inspections of the major contributors; including annual inspections, compliance inspections, and facility closure inspections
- Forty-four (44) Notices of Violation were issued to eleven (11) industries. Industries came into compliance within the required regulatory time frame
- Staff collected 337 industrial wastewater samples and completed twenty-five (25) illicit discharge investigations
- Responded to approximately 160 information requests, including, but not limited to, Right to Know requests and requests for regulatory and environmental information

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 240 food establishment inspections and 402 special events inspections
- Responded to 12 complaints

Institution Sanitation and Safety

Maintaining the standards for sanitation and safety in the York 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

<u>Program Goal</u>: 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

• Since July 1999, the Environmental Services Supervisor issues permits and invoices, and completed street cuts made by utilities. Inspections of completed cuts are performed by the Highway Superintendent. This year, 526 street cut permits were issued. A total of 146 cuts were completed and then inspected and invoiced, totaling \$50,006

- Collection of contract dumpsters and totes were performed year-round, primarily at City facilities and multi-unit residential buildings
- Nearly 15,612 households and small businesses received twice per week refuse and once per week recycling curbside collections. These same customers received once per week curbside yard waste collection, (March to mid-December)
- One hundred and fifty street containers throughout the City were emptied 3 days each week.
- There were 8,393 addresses scheduled for large-item collection this year
- A total of 17,544.57 tons of refuse, 2,921.5 tons of recyclables and 871.3 tons of yard waste and leaves were collected. Curbside yard waste and leaves were transported to H&H in Spring Grove by the hauler. City staff vacuumed loose leaves from curb areas, late fall, and transported the material to the City's compost facility where litter and debris were removed to provide a cleaner product before transporting the material to J&K
- During the first two weeks of January, 835 Christmas trees (12.53 tons) were collected and chipped by City staff
- 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.
- Spring and Fall city-wide newsletters were mailed "Postal Patron" to customers, as required by Act 101, to advertise of recycling requirements at least twice per year
- Staff sold 95 recycling bins, 398 recycling cans, 38 packs of yard waste bags and 215 yard waste cans to curbside customers
- Press Releases were prepared for 6 major holiday collections (New Year's Day, July 4th, Memorial Day, Labor Day, Thanksgiving Day, Christmas Day), for any other collection changes and for the start/end of seasonal collections (Curbside Yard Waste, Fall Leaf, Christmas Trees)
- The City's Annual Commercial Recycling Report, Vendor Recycling Report, County Commercial Recycling Report were prepared and submitted
- The Annual 904 Recycling Performance Grant application was prepared and submitted to DEP for consideration of grant funding under Act 101. The State's recycling grants help to offset costs related to recycling education and curbside recycling and yard waste containers
- The Annual YCSWA hauler licensing (both MSW and Recycling) and DEP hauler licensing applications were prepared and submitted

Drinking Water Supply

The York Water Company services and supplies the drinking water to York residents. In 2016, the routine testing indicated higher than standard lead levels in water serviced by the York Water Company, mainly in dwellings with old lead lines. The Bureau worked with the York Water Company to identify city dwellings where the water lead levels could potentially pose a problem for children and/or pregnant women for follow up testing. The York Water Company is replacing all lead lines to homes over the next four years and will continue to monitor the situation. All other contaminants have been in compliance within the detected parameters per their Annual Drinking Water Quality Report and Test Results which can be found at: https://www.yorkwater.com/water-quality-report

Appendix

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

Land area	5.2 square miles	Housing	
Population	43,718	Total Housing Units	18,496
Population/square	8,407	Vacant Housing Units	2,243
mile			
		Occupied Housing Units	16,253
Male	21,054 (48.2%)	Owner occupied	6,790
Female	22,664 (51.8%)	Renter occupied	9,463

Population by Ra	ce and Hispai	nic Origin	Population	n by Age
One Race	40,978	93.7%	<5	4,025
White	22,398	51.2%	5-9	3,458
Black/African-	12,248	28.0%	10-14	3,108
American				
American	269	0.6%	15-19	3,625
Indian/Aleut.				
Asian	541	1.2%	20-29	7,583
Other	5,510	12.6%	30-39	5,605
Two or more	2,740	6.3%	40-49	5,627
races				
			50-59	4,845
Hispanic/Latino	12,458	28.5%	60-69	3,199
Origin – Any				
Race				
			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.

<u>2010 Census</u> York – 43,718 York County – 434,972 Pennsylvania – 12,702,379

Age-Adjusted Death Rates Selected Causes of Death – York, PA 2015

	Cause of Death	Rate per 100,000*	No. of Deaths
1.	Malignant Neoplasms	248.6	87
2.	Heart Disease	189.5	63
3.	Cerebrovascular Disease	70.1	22
4.	Diabetes Mellitus	60.8	21
5.	Other Unintentional Injuries	58.5	24
6.	C.O.P.D.	55.0	19
7.	Septicemia	27.2	9
8.	Nephritis, Nephrosis	24.3	9
9.	Alzheimer's Disease	24.2	7
10.	Pneumonia and Influenza	21.1	7
11.	Motor Vehicle Fatality	17.2	8

*Age-Adjusted Death Rates based on Standard U.S. 2010 population. Source of data: PA Department of Health Vital Statistics 2015. Data interpreted by the City of York - Bureau of Health.

Years of Potential Life Lost <65 Years of age Ranked by Average YPPL – York, PA 2015

	Cause of Death (No. < age 65)	Avg. YPPL	Total YPPL
1.	Other Unintentional Injuries (19)	28.5	542
2.	Motor Vehicle Fatalities (7)	27.9	195
3.	C.O.P.D. (7)	15.0	105
4.	Cerebral Vascular Disease (5)	15.0	75
5.	Diabetes Mellitus (8)	11.3	90
6.	Heart Disease (15)	9.0	135
7.	Malignant Neoplasm (34)	8.2	280
8.	Nephritis, Nephrosis (5)	7.0	35
9.	Septicemia (2)	5.0	10
10.	Influenza and Pneumonia	5.0	10



City of York - Bureau of Health

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