

2021 Annual Program Plan

Act 315/Act 12

City of York, PA



**City of York - Bureau of Health
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City of York - Bureau of Health

Vision:

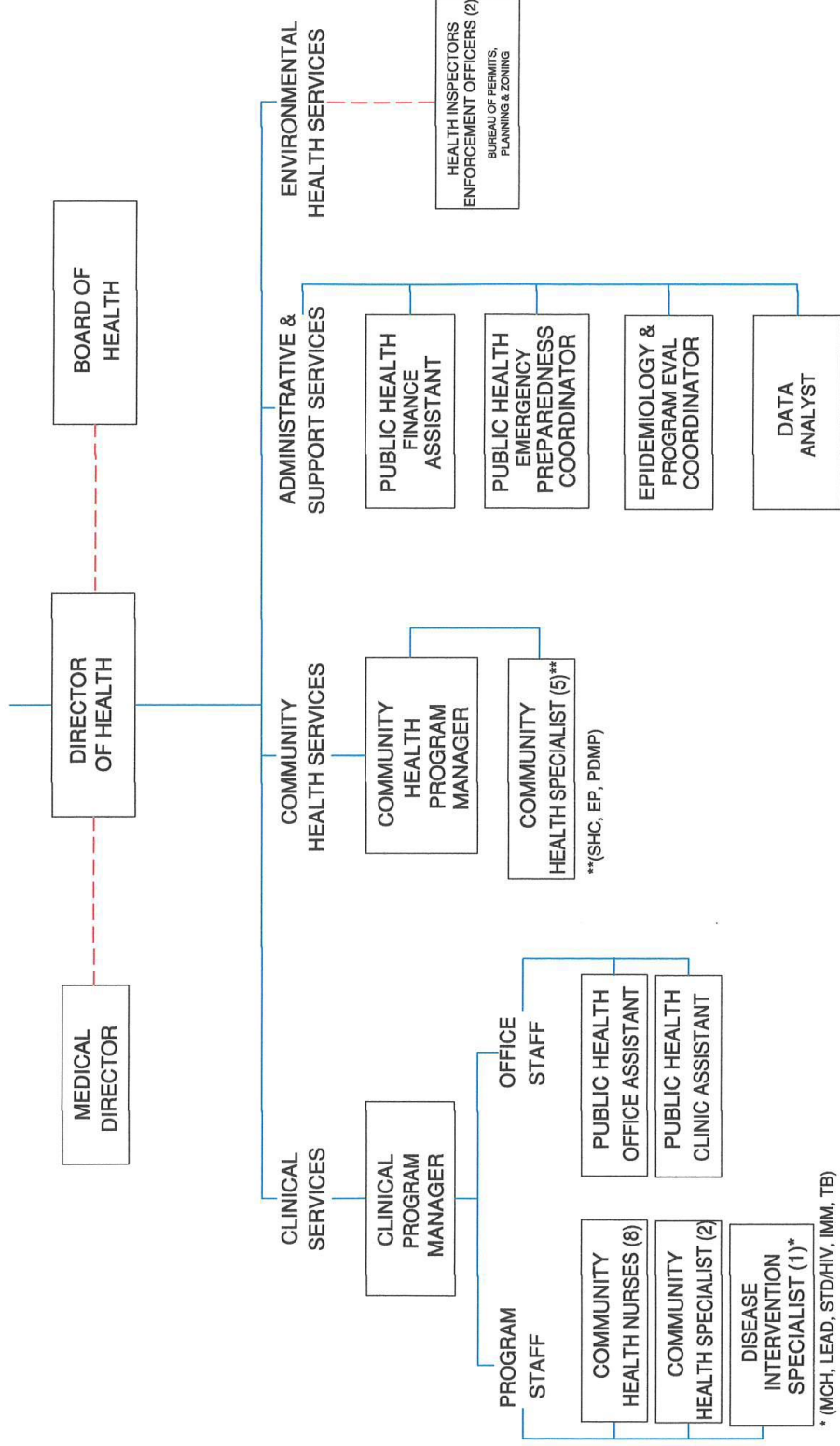
York City is an inclusive community that values health and well-being for ALL.

Mission:

To promote and protect the health and well-being of York City

LOCAL HEALTH DEPARTMENT BUDGET & EXPENDITURE 2021 Budget					
Act 315/12, PA Code: Title 28, Chapter 15 County/Municipal: York City Bureau of Health					
NOTE: data entry in yellow areas only					
Program Description	Total Funds	Exclusions, Grants, Etc.	Subsidy Base	Act 12 Funds	Act 315 Funds
<i>Administrative/Supportive Services:</i>					
Admin/Laboratory/Support Services	\$ 846,198	\$ 464,570	\$ 381,628		\$ 381,628
Bioterrorism	\$ 171,117	\$ 181,923	\$ (10,806)		\$ (10,806)
TOTAL					
Administration (Sec 15.12)	\$ 1,017,315	\$ 646,493	\$ 370,822	\$ -	\$ 370,822
<i>Personal Health Services:</i>					
Cardiovascular Disease	\$ 198,921	\$ 175,691	\$ 23,230		\$ 23,230
Chronic Disease Control	\$ 133,201		\$ 133,201		\$ 133,201
Communicable Disease Control	\$ 204,394		\$ 204,394		\$ 204,394
COVID-19	\$ 3,402,843	\$ 3,343,995	\$ 58,848		\$ 58,848
EMS	\$ 200,000	\$ -	\$ 200,000		\$ 200,000
HIV/AIDS	\$ 463,676	\$ 373,355	\$ 90,321		\$ 90,321
Immunization	\$ 159,997	\$ 115,000	\$ 44,997		\$ 44,997
Injury Prevention	\$ 132,614	\$ 117,127	\$ 15,487		\$ 15,487
Maternal Child Health	\$ 617,764	\$ 498,720	\$ 119,044		\$ 119,044
Tuberculosis	\$ 6,165	\$ 6,000	\$ 165		\$ 165
PDMP/Substance Abuse Prevention	\$ 256,318	\$ 193,578	\$ 62,740		\$ 62,740
TOTAL					
Personal Health (Sec 15.13)	\$ 5,775,893	\$ 4,823,466	\$ 952,427	\$ -	\$ 952,427
<i>Environmental Health Services:</i>					
Lead Testing/Environ. Investigations	\$ 2,000	\$ 2,000	\$ -		\$ -
Lead Hazard Control Program	\$ 110,004	\$ 110,000	\$ 4		\$ 4
Environmental Health & Safety Pgms	\$ 94,321		\$ 94,321	\$ 19,820	\$ 74,501
Health and Sanitation Inspections	\$ 102,533	\$ 78,000	\$ 24,533		\$ 24,533
TOTAL					
Environmental Health (Sec 15.14)	\$ 308,858	\$ 190,000	\$ 118,858	\$ 19,820	\$ 99,038
<i>Other Services:</i>					
n/a			\$ -		\$ -
TOTAL					
Other Services	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL: Administrative	\$ 1,017,315	\$ 646,493	\$ 370,822	\$ -	\$ 370,822
TOTAL: Personal Health	\$ 5,775,893	\$ 4,823,466	\$ 952,427	\$ -	\$ 952,427
TOTAL: Environmental Health	\$ 308,858	\$ 190,000	\$ 118,858	\$ 19,820	\$ 99,038
TOTAL: Other Services	\$ -	\$ -	\$ -	\$ -	\$ -
SUM: Qualifying Health Program	\$ 7,102,066	\$ 5,659,959	\$ 1,442,107	\$ 19,820	\$ 1,422,287
TOTAL: Exclusions and Grants		\$ 5,659,959		\$ 19,820	
SUM: Local Health Dept. Program					\$ 1,422,287
Analysis by Craig Walt, MPH	Position Community Health Program Mgr	Agency York City Bureau of Health	Date 3/5/2021		

Bureau of Health Community Development



* (MCH, LEAD, STD/HIV, IMM, TB)

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 slowly 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 like 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. The COVID-19 pandemic exacerbated the social and economic burdens of city residents due to illness, school/work closures, job loss, financial stress, and mental health concerns, to name a few.

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. 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 2020, the Health Bureau responded to the COVID-19 pandemic. This pandemic required staff to adjust and re-align its work to provide disease surveillance and monitoring, case investigations, data collection and reporting, and community education efficiently and effectively regarding the disease and prevention measures. In 2020, the Bureau received 2,402 case reports and conducted case investigations and contact tracing for these individuals.

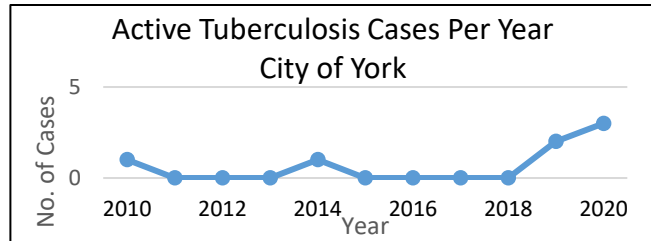
Local Public Health Statistics

Tuberculosis

HP 2020 IID-29: Reduce Tuberculosis to 1.0 per 100,000 (2005 Baseline: 4.9/100,000). Three cases of active Tuberculosis were reported in 2020. All three cases completed appropriate treatment of the disease. Community Health Nurses implemented VDOT (virtual direct observational therapy) during COVID-19.

Tuberculosis Rates/Cases – York, PA **Annual Rates (cases)** **3-Year Avg. Rates**

2016 - 0.0 (0)	2014-2016 - 0.8
2017 - 0.0 (0)	2015-2017 - 0.0
2018 - 0.0 (0)	2016-2018 - 0.0
2019 - 4.6 (2)	2017-2019 - 1.5
2020 - 6.9 (3)	2018-2020 - 3.8



Sexually Transmitted Diseases

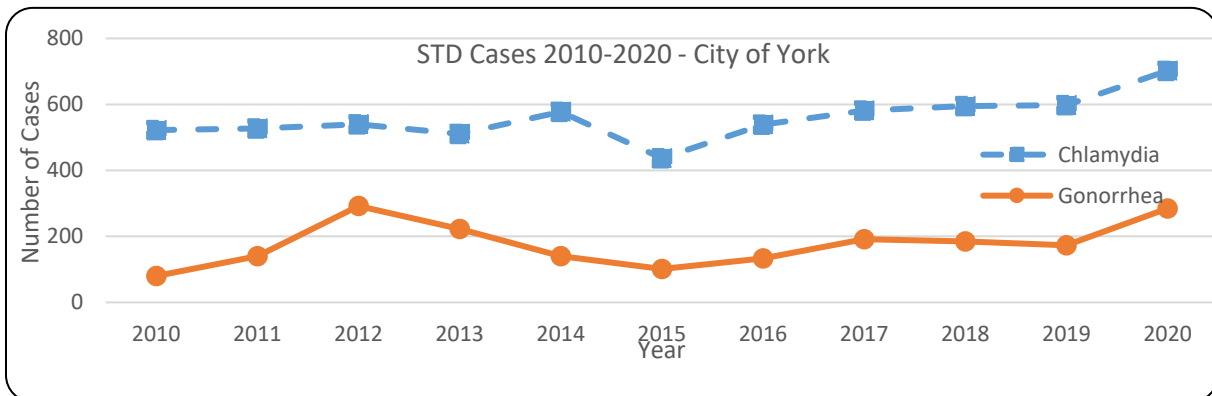
The Bureau received the following positive test results in 2020: 702 individuals for Chlamydia, 285 for Gonorrhea, and 10 for Syphilis. Throughout the pandemic, the Bureau provided appointments for individuals requesting STD/HIV testing and treated individuals as appropriate. The Bureau screened 474 individuals for STDs with a 26% positivity rate (124 positive results). 2020 saw the highest number of case reports since 2010. The Bureau focuses on strategies targeting high-risk individuals and reducing disease spread.

Chlamydia Rates/Cases – York, PA **Annual Rates (cases)** **3 Year Avg. Rates**

2016 - 1228.8 (539)	2014 - 2016 - 1183.5
2017 - 1329.0 (581)	2015 - 2017 - 1185.8
2018 - 1360.9 (595)	2016 - 2018 - 1306.2
2019 - 1367.9 (598)	2017 - 2019 - 1325.6
2020 - 1605.7 (702)	2018 - 2020 - 1444.8

Gonorrhea Rates/Cases – York, PA **Annual Rates (cases)** **3 Year Avg. Rates**

2016 - 303.2 (133)	2014 - 2016 - 284.8
2017 - 439.2 (192)	2015 - 2017 - 324.5
2018 - 423.2 (185)	2016 - 2018 - 388.5
2019 - 395.7 (173)	2017 - 2019 - 419.4
2020 - 651.9 (285)	2018 - 2020 - 490.3



HIV/AIDS

The Health Bureau conducted 268 HIV tests in 2020, resulting in 4 positive cases for a 1.49% positivity rate. A total of 8 positive cases were identified from all testing sources. Partner Services was initiated for 20 people in collaboration with providers who diagnose and treat individuals with HIV.

*** New HIV Infection-York, PA**

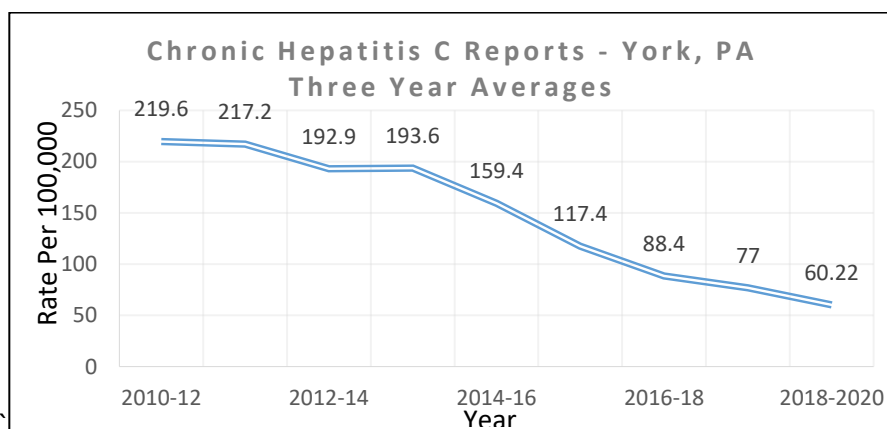
Annual Rates (cases)

2016 - 25.1 (11)
2017 - 43.5 (19)
2018 - 41.2 (18)
2019 - 13.7 (6)
2020 - 18.3 (8)

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

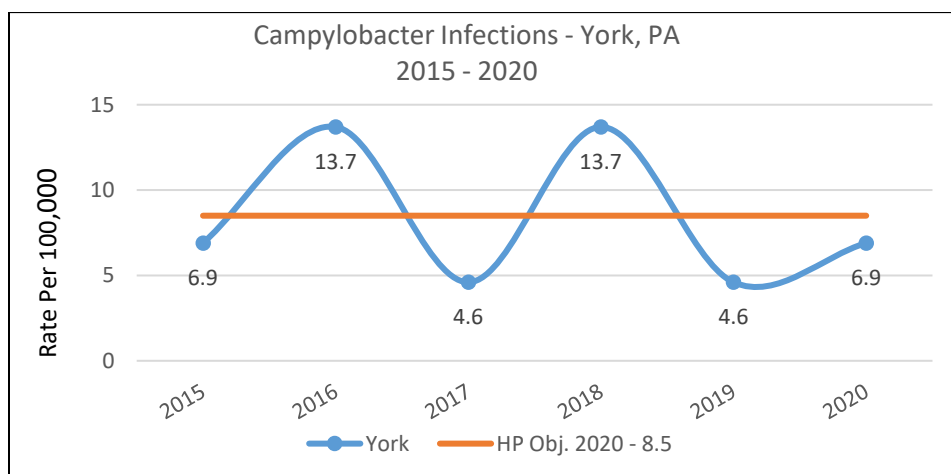
Communicable Diseases

HP 2020 IID-26: Reduce new Hepatitis C infections to no more than 0.2 new cases/100,000. Hepatitis C cases reported to the Bureau were all chronic cases, not new cases.

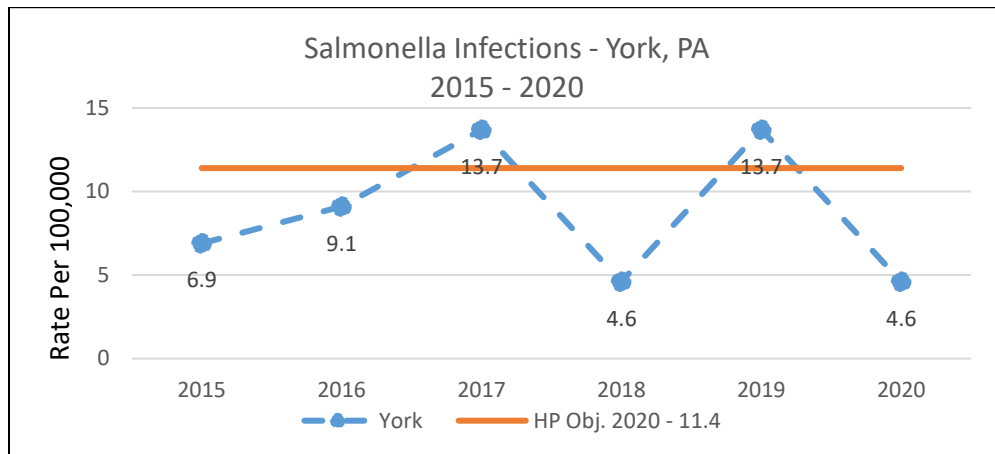


HP2020 FS-1: Reduce infections caused by key foodborne pathogens to incidences of no more than:

FS-1.1 Campylobacter: 8.5 Cases per 100,000 people.



FS-1.4 Salmonella: 11.4 Cases per 100,000 people.



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 work with victims of animal bites to ensure appropriate medical attention is received.

Staff conducted follow-up investigations on 85 animal bites in 2020.

Number of animal bites reported:	
<u>Annual number:</u>	<u>Three-Year Average:</u>
2016 - 67	2014-2016 - 104
2017 - 60	2015-2017 - 86
2018 - 40	2016-2018 - 56
2019 - 70	2017-2019 - 57
2020 - 85	2018-2020 - 65

Report for Year 2020 City of York, Pa.

Overall, the total number of Reportable Conditions, primarily communicable diseases, in the City of York almost tripled from 2019 to 2020, due to the COVID-19 pandemic. According to records compiled by the City of York - Bureau of Health a total of 4,078 case reports were received in 2020 compared to 1,428 in 2019. COVID-19 accounted for 2,402 cases or 59% of all reported conditions in 2020 followed, by Sexually Transmitted Diseases for 18% percent of all reported conditions.

The most frequently reported group of conditions for 2020, excluding COVID-19, continues to be Sexually Transmitted Diseases (STD's) with a total of 897 case reports. Chlamydia and Gonorrhea both increased from 2019 to 2020. Syphilis had a slightly lower number of reports this year (10) compared to last (15), but secondary and latent reports increased. The Bureau aggressively targets individuals and groups at high risk and engaging in unsafe sexual behaviors. Due to COVID, appointments for diagnosis and treatment were scheduled as appropriate.

Influenza was the second most frequently reported condition. Three hundred sixty-three (363) lab-test confirmed Influenza cases were reported in 2020 compared to 310 cases in 2019. Most of these cases were reported in the first quarter of 2020, prior to the start of COVID-19 and enacting prevention measures.

Respiratory Syncytial Virus (RSV) infections decreased from 120 in 2019 to 66 case reports 2020. RSV causes an acute febrile, respiratory illness, occasionally severe enough to require hospitalization and is especially harsh on infants and children under two years of age. It is the major known etiologic agent of bronchiolitis and is a cause of pneumonia, croup, bronchitis, otitis media and febrile upper respiratory illness. RSV may cause symptomatic disease in adults, particularly the debilitated elderly.

Animal Bites increased to 85 reports in 2020, up from 70 reports in 2019.

Hepatitis C case reports decreased from 30 in 2019 to 1 in 2020. There were 4 Hepatitis B case reports for 2020, compared to 12 in 2019. No cases of Hepatitis A were reported again for 2020.

There were 8 new cases of HIV infection reported in 2020, compared to 6 in 2019. Bureau staff aggressively provide partner services to test

Reportable Conditions City of York, Pa Summary Report 2019-2020		
Reported Cases	2019	2020
Animal Bites	70	85
Campylobacteriosis	2	3
Chlamydia	598	702
COVID-19	0	2402
Giardiasis	1	2
Gonorrhea	173	185
H. Influenzae	1	0
Hepatitis A	0	0
Hepatitis B	12	4
Hepatitis C	30	1
Histoplasmosis	1	0
HIV Infection	6	8
Influenza Type A	293	176
Influenza Type B	17	237
Influenza not specified	0	0
Legionnaire's Disease	2	0
Listeriosis	1	0
Lyme Disease	30	38
Malaria	1	0
Meningitis - Bacterial	1	3
Meningitis - Fungal	0	1
Meningitis - Viral	0	0
Mumps	0	0
N. Meningitis Infection	0	0
Pertussis	0	0
RSV	120	66
Salmonella	6	2
Shigellosis	0	0
Streptococcal Group A	0	6
Syphilis (primary)	15	10
Syphilis (secondary)	4	5
Syphilis (latent)	17	22
Toxoplasmosis	3	0
Tuberculosis – Active	2	3
Tuberculosis – Latent	19	14
Varicella	3	3
West Nile Virus	0	1
Zika	0	0
Total Case Reports	1428	4078

partners of infected individuals and to get individuals into medical treatment as early as possible.

Seven (7)) cases of bacterial and parasitic infections that lead to vomiting, diarrhea, abdominal pain, as well as other gastrointestinal symptoms were reported in 2020.

Lyme Disease cases increased slightly from 30 to 38 in 2020. 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, and 3 cases of Bacterial Meningitis and 1 West Nile Virus

Finally, there were three reports of active Tuberculosis in 2020. Fourteen (14) people were reported with Latent TB Infection. All active patients receive a full course of treatment, and all Latent infections are offered a course of treatment to prevent active disease. This approach provides aggressive surveillance and prevention strategies at our local level to prevent active disease.

Immunization Program

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. The Bureau reports all vaccines into PA-SIIS and its EHR system. 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.

Maternal Child Health Services

Maternal, infant, and child health (MICH) holds the potential to either contribute to the improvement or the decline of the health and wellness of a community-at-large. The health of these community members is impacted by a number of factors. According to Healthy People 2020, the factors that can influence MICH include access to care, age, educational status, family income, physical/medical health of parents/caregivers, poverty, preconception health, mental health of parents/caregivers, nutrition, race/ethnicity, safe families/communities, safe supports, substance use, and stress. It is notable that the outcomes from some of these factors translate into the outcomes of the individual into adulthood.

The City of York – Bureau of Health's Healthy Moms Healthy Babies home visitation program for pregnant and parenting women and their children under the age of 2 exists to promote and improve healthy maternal and child outcomes. Using an evidence-informed nurse-led approach to care, the program uses clinical expertise, research evidence, and patient values/preferences to foster an environment of mutual understanding and respect with the intent of work to improve short and long-term outcomes. Healthy Moms Healthy Babies is a dynamic home visitation program that promotes creative partnerships, supports community initiatives, and works to empower and advocate for the needs of patients/families in our community.

In 2020, the Healthy Moms Healthy Babies program received 238 referrals for service, an increase of 36% over referrals in 2019. Services were accepted at an engagement rate of 74%.

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 the leading cause of death among York residents with almost 21% annually. There were 60 deaths in 2019, down from 90 in 2017. The age-adjusted death rate for heart disease improved from 269.7/100,000 in 2017 to 174.8/100,000 in 2019, averaging 10.9 years of potential life lost per individual.

Stroke accounted for 20 deaths for an age-adjusted rate 58.2/100,000 in 2019, a slight increase since 2017. Stroke continues to be higher than the 2020 Healthy People goal of 33.8/100,000. The average years of potential life lost per individual increased from 7 to 10.0 years since 2017. Education and outreach indicate a growing number of people are aware of the link between lifestyle and disease but modifying or changing behaviors is challenging.

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

Coronary Heart Disease Age Adjusted Death Rates York, PA 2015 - 2019

Annual Rate (cases): Three Year Avg. Rates:

2015 - 189.5 (63)	2013-2015 - 194.0
2016 - 248.6 (83)	2014-2016 - 212.9
2017 - 269.7 (90)	2015-2017 - 235.9
2018 - 200.5 (68)	2016-2018 - 239.6
2019 - 174.8 (60)	2017-2019 - 215.0

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

Stroke Age Adjusted Death Rates York, PA 2015-2019

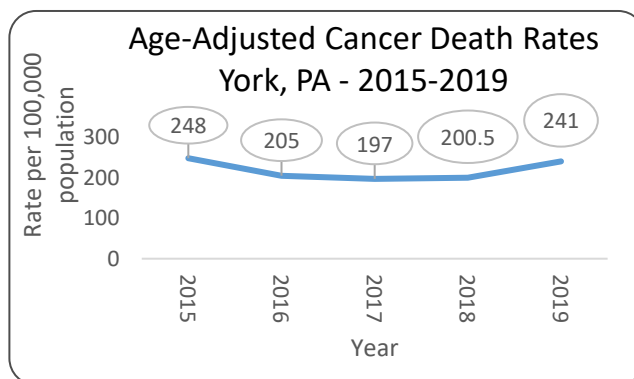
Annual Rate (cases): Three Year Avg. Rates:

2015 - 70.1 (22)	2013-2015 - 70.6
2016 - 37.5 (12)	2014-2016 - 56.6
2017 - 61.9 (20)	2015-2017 - 56.5
2018 - 50.9 (16)	2016-2018 - 50.1
2019 - 58.2 (20)	2017-2019 - 57.0

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).

Cancer is the 2nd highest cause of death for York city residents. Age-adjusted cancer deaths in York continue to be well above the HP 2020 goal. Prevention is important and ties in with Bureau services around improving 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 2013-2017

Year	Annual Death Rate* (#):	Annual Incidence Rate (#)	3-Year period	3- Year Avg. Death Rates:	3- Year Avg. Incidence Rates
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
2016	32.0 (14)	70.9 (31)	2014-2016	41.1	70.9
2017	27.5 (12)	86.9 (38)	2015-2017	42.2	73.2

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 2013-2017

Year	Annual Death Rate* (#):	Annual Incidence Rate (#)	3-Year period	3- Year Avg. Death Rates:	3- Year Avg. Incidence Rates
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
2016	9.1 (4)	29.7 (13)	2014-2016	19.2	94.1
2017	16.0 (7)	54.9 (24)	2015-2017	20.1	70.8

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, 2013-2017**

Year	Annual Death Rate* (#):	Annual Incidence Rate (#)	3-year period	3- Year Avg. Death Rates:	3- Year Avg. Incidence Rates
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
2016	11.4 (5)	41.2 (18)	2014-2016	12.9	43.5
2017	13.7 (6)	43.5 (19)	2015-2017	11.4	42.7

Injury Prevention

In 2019, unintentional injuries ranked 3rd in number of deaths in York. Forty-five (45) people died because of unintentional injuries with an age-adjusted death rate of 118.8/100,000). Motor vehicle fatalities ranked 10th overall with 2 deaths with an age adjusted death rate of 5.3/100,000).

Injury Report Card 2015-2019

HP 2020 Objective	National Baseline	Year	City of York
IVP-11: Reduce deaths caused by non-transport accidents to no more than 36/100,000 people.	40.0 (2000) (age-adjusted)	2015	58.5
		2016	69.0
		2017	133.7
		2018	155.7
		2019	118.8
IVP-13: Reduce deaths caused by motor vehicle crashes to no more than 12.4 per 100,000 people	13.8 (2000) (age-adjusted)	2015	17.2
		2016	22.3
		2017	18.7
		2018	9.7
		2019	5.3

Tobacco Control

Heart disease and cancer are the top two leading causes of death in York, accounting for 39% of all deaths. Tobacco use is a major risk factor for these diseases. Bureau staff promote tobacco cessation as one behavioral risk to reduce for improved health.

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.

Chronic Obstructive Pulmonary Disease Age Adjusted Death Rates York, PA 2015-2019

Annual Rates (#):	Three Year Avg. Rates:
2015 – 55.0 (19)	2013-2015 – 54.5
2016 – 64.4 (22)	2014-2016 – 57.6
2017 – 60.1 (19)	2015-2017 – 57.4
2018 – 44.6 (15)	2016-2018 – 53.4
2019 - 53.1 (18)	2017-2019 – 52.6

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

% Reported abstinence from tobacco use among pregnant women

	2013	2014	2015	2016	2017	2018
City of York	79.3	81.1%	81.9%	83%	84.7%	86.6%
York County	85	85.4%	87.1%	87.8%	88.2%	89.8%
Pennsylvania	85.8	86.3%	87.5%	88.5%	88.9%	89.6%

The PA Department of Health, Bureau of Health Statistics and Research, reports that 89.6% of pregnant women in PA did not use tobacco 2018. In the City of York, 86.6% of women who gave birth report not using tobacco during pregnancy, an increase of 1.19%. York continues to improve abstinence from tobacco use during pregnancy from 76.8% (2007) to 86.6% (2018), but still has work to do to meet the HP 2020 goal of 98.6%. The MCH nurses educate pregnant women on the dangers of tobacco use during and after pregnancy.

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 like, 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 STD rates and low birth weight babies. Societal and economic trends of poverty and unemployment combined with unhealthy/risky lifestyle choices are additional challenges to our public health delivery system.

Communicable disease reports vary from year to year for specific conditions. 2020 and into 2021, the country is faced with responding to a pandemic. Bureau staff have worked tirelessly to respond to the large number of case reports (2,402 in 2020), inquiries for information, data collection and reporting, constant changes in guidance and media requests, and all while maintaining core public health services for our residents. Communicable diseases, apart from HIV/STDs were down overall, most likely due to restrictions on travel and social distancing.

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 2016-2018 data for LBW babies in York city (11.7%) with LBW babies in PA (7.4%), and LBW births to White vs. Black mothers (11.2% White vs. 14.2% Black) and the state (6.8% White vs. 13.0% Black) - marked disparities within the city and the state as a whole. 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 motor vehicle accidents, are higher than the Health People 2020 objectives and the national baselines. Community Health Specialists and Nurses raise awareness of injury prevention strategies related to unintentional injuries through community programs such as A Matter of Balance to reduce falls and community partnerships focused on child abuse prevention, and pedestrian and driver safety and during home visits with families.

In 2020, a substance abuse prevention program was initiated at the Bureau, OD2A (Overdose to Action), was funded by the Prescription Drug Monitoring Program from the PA

Department of Health. This program is a collaboration of partners in the city and county to reduce deaths and overdoses, reduce over-prescription of opioids, and increase youth prevention strategies.

Heart disease and Cancer continue to be the top two leading causes of death among York residents (39% of all deaths in 2019) followed non-motor injuries, stroke, chronic obstructive pulmonary disease (C.O.P.D.) and diabetes mellitus. Staff at the Bureau of Health, in collaboration with partnering organizations, emphasize prevention by improving lifestyle choices, such as weight reduction, better nutrition choices, and exercise through a myriad of programs and services to impact health. 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, healthy corner stores), and implement policy changes to impact overall community 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 used its training and unique skills to prepare for public health emergency situations. As mentioned above, the COVID-19 pandemic reinforced our ability and the necessity to collaborate with local and state responders, healthcare entities and the community to minimize the impact of COVID-19 on city residents and York County.

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. Funding through the PA Department of Health for COVID-19 response has afforded the Bureau the opportunity to expand its capacity in this area for Epidemiology Coordinator and a Data Analyst positions.

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.

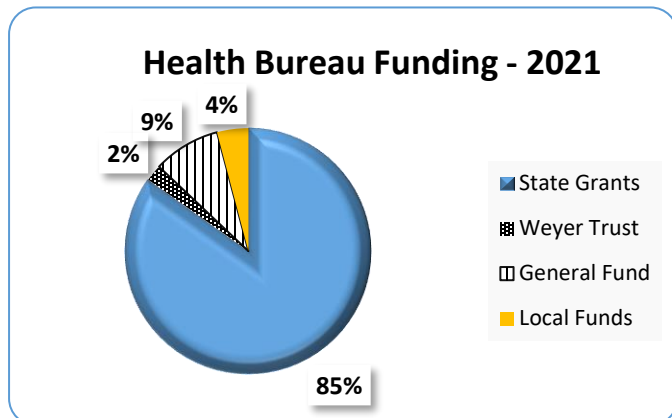
The Health Bureau staff meet yearly to develop the goals and objectives for the Annual Program Plan. Staff discuss program successes and identify issues and strategies that can be implemented to improve the public's health and apply the following criteria for setting annual goals and objectives:

- The issue is addressed in the contract workplan and/or fits within the mission.
- A gap in services is identified, or it is not being addressed in the community. Health Bureau staff assess the gap, the resources available, and our capacity to address it.
- 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.
- 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 2021 budget doubled with the addition of multiple funding awards for COVID-19 response efforts. The Bureau is funded by state grants, city CDBG funds, the Weyer Trust, the city's General Fund, and local sources. The ambulance contract with Community Life Team is paid through the Fire Department's general fund.

The Bureau has 20 full-time and 2 part-time employees. A public health physician is supported through WellSpan Health's

Community Partnership. Additional city personnel are utilized for various administrative activities, including policy, finance, human resources, public works, police, fire, permits/licensing, 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); American Public Health Association, Safe States Alliance; Falls Free Coalition; South Central Task Force; Healthy York Coalition; York/Adams Immunization Coalition; York Opioid Collaborative; Safe Kids York; and Active 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 its 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 functions of the Health Bureau are 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 managing and 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 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.

In 2020, Bureau leadership and city administration prepared for and responded to the COVID-19 pandemic. Bureau staff and emergency response leaders were reassigned from normal duties to stand up a Health Command Center, working with city administration to coordinate and provide communication to the public. The Bureau continues to work with its local partners, vendors, city administration, and others to reduce the impact of COVID-19 in York.

Program Goal: Provide high quality public health services, programming, and leadership to the City of York.

Objective 1: Develop an organizational framework to support growth and change.

Activities:

- Work with city administration to address staffing and organizational functions
- Assess staffing needs, space, funding to meet service needs of residents
- Continue to Identify functional gaps in capacity and operationalize solutions
- Create professional development and team building strategy for enhancing work culture

Objective 2: Transition /demobilize from COVID response to respond to public health needs of the city.

Activities:

- Assess COVID response activities and determine level of response needed
- Demobilize staff in COVID response activities as data and needs decrease to manageable levels
- Identify new opportunities and / or activities through our funding for improved service to meet the needs of residents

Evaluation Method:

- The Bureau has a strong organizational framework /plan for future by May 1, 2021.
- Staffing is optimized to meet service capacity.
- COVID is integrated into the Bureau's routine reportable conditions activities.

Performance Review 2020

Objective 1: Develop an organizational framework to support growth and change.

ACHIEVED:

- Staff met with city administration to discuss staffing needs and potential changes of the Bureau's organizational function and structure
- COVID-19 funds afforded the Bureau to re-assess staffing needs for the pandemic and to create/fill a few, but not all, positions needed for long term public health capacity.

Objective 2: Develop and implement a communication strategy for the Bureau.

PARTIALLY ACHIEVED:

- Due to the COVID-19 pandemic, the Bureau worked with the city's Chief of Staff for coordinating and communicating messaging, social media, and various platforms for disseminating information.
- The Bureau did not specifically develop or implement a strategy as a whole but was able to effectively communicate information about various programs and services via Facebook, city website, and the creation of new data dashboards.

Objective 3: Develop role for HIPAA compliance officer

NOT ACHIEVED: Not accomplished

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. 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.

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

Objective 1: Advance the work of Code Blue Task Force to implement policy into practice.

Activities:

- Identify and engage community-based organizations and local providers that serve at risk populations.
- Support Code Blue/Red implementation and its functions within the city
- Establish processes to coordinate with the EcoSystem Coordinators to conduct education and outreach

Evaluation Methods:

- At least 4 organizations are identified and assist with outreach to at risk populations.
- Process measures during Code Blue/Red implementation (i.e., number of code activations, number of participants/people served, number of partner sites)
- Number and description of education and outreach activities

Objective 2: Implement trainings to address identified gaps and improve public health emergency preparedness and response capabilities

Activities:

- Continue to adapt training and exercise plan to address identified gaps and to improve overall competencies
- Hold/host/support at least 2 trainings (CERT trainings, first aid and CPR training, NEDSS, ESRI, Fit Testing training)

Evaluation Methods:

- Provide trainings that address 2 focus areas

Objective 3: Develop a communication procedure for PA-HAN alerts and emerging threats, both internal and external. (I1-G3; I3-G9)

Activities:

- Investigate communication system process(es)
- Identify opportunities for improvement
- Investigate and/or leverage existing but underutilized resources to notify various audiences (i.e., fax, email, social media)
- Examine use of health@yorkcity as a mechanism for communications

Evaluation Methods:

- Procedure is developed for both internal and external communications
- At least one process for distribution tested

Objective 4: Explore the implementation of MOUs as a means to support emergency response activities.

Activities:

- Identify potential unmet needs for various response actions
- List partners who may have the resources/materials to assist or support the Health Bureau in emergency response activities
- Develop MOU(s)

Evaluation Methods:

- List of resource needs and partners is created
- At least one MOU is developed with our partners

Performance Review 2020

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

Objective 1: Advance the work of Code Blue Task Force to implement policy into practice.

ACHIEVED:

- Code Red and Blue shelters have been activated for both hot and cold weather incidents

- Code Blue Task Force has been able to implement COVID-19 guidelines into shelters
- Asbury Methodist Church agreed to be a temporary shelter for Code Blue/Red incidents

Objective 2: Update the city's volunteer (CERT) registry and operationalize activities.

ACHIEVED: City Emergency Manager reached out to CERT volunteers to help with traffic control during upcoming COVID-19 PODs

Objective 3: Develop a communication procedure for PA-HAN alerts and emerging threats, both internal and external. (I1-G3; I3-G9)

PARTIALLY ACHIEVED:

- Procedures have been developed for the use of the health@yorkcity email to be used as the primary contact method for various efforts during the COVID-19 response
- Dissemination of PA-HAN alerts does not follow a standard process and is not well documented

Objective 4: Explore the implementation of MOUs as a means to support emergency response activities.

ACHIEVED:

- MOU developed and executed with Family First Health for COVID-19 testing and vaccine distribution
- MOUs developed for contracted disease investigators/contact tracers and for nursing assistance
- MOUs executed with temporary disease investigators/contact tracers
- MOU developed and executed with SAMRC to assist with COVID related education and outreach

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, families, and community. PHS is comprised of our clinical services (Personal Health) and our community services (Community Health). The largest component of clinical services is 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 negative 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. 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. Staff 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, to streamline efforts aimed at primary prevention, and to promote and implement 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 disproportionately affected by chronic diseases with a health equity lens.

The Bureau continues to refine its new electronic health record system, CureMD, to improve efficiencies within clinical work, to collect patient demographic and other information to improve data and data analysis capabilities to drive strategic interventions.

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 12 weeks to 9 months, and in some cases longer. Duration of treatment is one of the challenges for compliance with TB 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. If indicated, a home visit will be conducted. Regular office visits allow for ongoing evaluation. Directly Observed Therapy (DOT) is used as determined by the treatment plan for active TB or 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 shared with providers, residents and at community events as appropriate.

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. (I1-G3)

Activities:

- Provide PPD screenings upon request for individuals, shelter, or group facilities
- 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: Provide Video Direct Observational Therapy (VDOT) as a treatment option.

Activity:

- Continue to offer VDOT to all appropriate active TB patients as appropriate

Evaluation Method:

- Number of patients/compliance rates; track volume and effectiveness

Performance Review 2020

Objective 1: Provide education and PPD screenings for patients and providers as appropriate. (I1-G3)

ACHIEVED:

- 100% of appropriate requests for PPD screenings were conducted and education provided.
- More than 2 primary care provider officers were educated on PPD screenings and TB screening outcomes. Contact was made with medical residents to discuss TB and specific plans of care for patients.
- Staff utilized algorithms for TB screening and treatment plans.

Objective 2: Provide Video Direct Observational Therapy (VDOT) as a treatment option

ACHIEVED:

- Policies and procedures were created and adopted in 2020 prior to the pandemic. This proved to be a great tool to mitigate exposure to COVID for both patient and nurse and allowed for PPE preservation.
- 3 of 4 total active TB patients were determined to be eligible for VDOT. All three will have completed therapy by the end of January 2021.

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 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)/Community Health Nurse 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 1: Reduce new HIV/STD infections.

Objective 1: Increase HIV testing for patients that present for STD testing only.

Activities:

- Provide education about HIV infection, HIV testing, HIV transmission, and implications of infection
- Provide prevention counseling and encouragement for condom use
- Conduct various outreach efforts at local colleges (HACC, YCP); participate in Zoom meetings with community partners (OB/GYN offices, FQHC, PADOH); and distribute marketing materials with STD information

Evaluation Method:

- 12 monthly data analysis were performed on HIV tests conducted with positivity rate determined
- Number of materials provided to partners
- Minimum of 4 meetings conducted with partners

Program Goal 2: Implement family planning conversation into all appropriate clinic visits.

Objective 1: Utilize non-directive pre-pregnancy and pregnancy guidance, education, options, and referrals as appropriate to include prenatal care, foster care or adoption, delivery options and pregnancy termination.

Activities:

- Conduct individual sessions with each patient addressing past and present birth control methods
- Provide education and options for pregnancy including prevention, pre-pregnancy planning, prenatal care, foster care, adoption, delivery options and pregnancy termination
- Refer or provide list of providers for services not rendered at the City of York-Bureau of Health

Evaluation Method:

- 100% of all appropriate visits are provided with family planning and birth control information and supplies as available
- 100% of all appropriate visits are referred as requested

Performance Review 2020

Program Goal: Reduce new HIV/STD infections.

ACHIEVED:

- Due to the pandemic the Wellness Clinic was unable to be operated at full capacity; however, STD/HIV screening, testing and treatment to patients that were symptomatic, engaged in high-risk behavior or were exposed to an STD was

provided. Appropriate measures for COVID screening were conducted for each patient prior to entry into the clinic.

- 474 patients in 2020 were screened; 124 were diagnosed positive with an STD yielding a 26% positivity rate.

Additional accomplishments per Department of Health's contract:

- Conducted partner services in collaboration with providers who diagnosis and treat individuals with HIV/STDs through the initiation of 10 partner services.
- Encouraged and supported community partners to promote efforts for appropriate screening and testing of STDs:
 - 6 meetings/visits conducted at: WellSpan Family Medicine; Local OB/GYN offices; Family Health Planning Council; Family First Health; PADOH; and WellSpan Community Health.
- Increased prevention and screening activities for at-risk populations (events):
 - 3 Partnership locations at: York College (Chocolates and Condoms for Valentine's Day); Gaudenzia (outreach testing services); and White Rose Senior Center (Valentine's Day Senior Dance).
- Encouraged and supported staff in professional development opportunities in STD/HIV services:
 - 2 staff members trained on: PA-NEDSS; Confidentiality Training; Partner Services; CPR/FA/AED; Family Addictions; STD Virtual Conference; Mandated Reporter Training; and HIV Navigation Services.

COMMUNICABLE DISEASES

Communicable Diseases, such as COVID-19, 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.

Program Goal: Reduce all communicable diseases among York City residents. (I2–G7; I3–G8)

Objective 1: Formalize COVID-19 response team and mitigation efforts.

Activities:

- Clarify roles and responsibilities of staff assigned to COVID-19 activities
- Continue collaboration with other providers/community partners on COVID-19 mitigation efforts.

Evaluation Method:

- Persons are hired/allocated to COVID positions
- Meetings/response activities with partners has been established

Objective 2: Collaborate with other providers/community partners on communicable disease prevention and screening activities.

Activities:

- Educate community partners on communicable diseases
- Coordinate culturally relative messaging to residents and the community on communicable disease prevention

Evaluation Method:

- Engaged at least two community partners in communicable diseases prevention
- Produced culturally relative messaging on communicable disease prevention

Performance Review 2020

Improve the quality of NEDSS (National Electronic Data Surveillance System) reporting to meet standards for state reports. (I2–G7; I3-G8)

ACHIEVED:

- Overall number of incomplete/incorrect records decreased, the addition of COVID-19 as a new reportable condition provided some challenges and opportunities to cross-train staff in different programs to support NEDSS reporting.

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 diseases.

Objective 1: Advocate with community partners the importance of immunizations by understanding pockets of need. (I1-G3; I3-G9)

Activities:

- Provide vaccine coverage for those in need
- Partner with local providers to identify and advocate for areas of need

Evaluation Methods:

- All residents are provided with necessary vaccines as appropriate
- Number of patients served by providers.

Objective 2: Follow all recommendations for COVID-19 vaccines.

Activities:

- Partner with community providers to assure COVID-19 vaccine coverage
- Promote and provide culturally relative information to all residents on the COVID-19 vaccine

Evaluation Methods:

- Number COVID-19 vaccines administered
- Materials are created and utilized which are culturally relative

Performance Review 2020

Objective 1: Connect clients to a primary care home for follow-up immunizations. (I1-G3; I3-G9)

ACHIEVED:

- Implemented process at registration to facilitate patient engagement with a primary care provider. Additionally, paperwork and assistance are given to all who do not have health insurance.

Objective 2: Increase appropriate vaccinations among high-risk populations.

ACHIEVED:

- Prior to change in operations due to COVID, 8 Hep A vaccines were provided to adults, 32 to children. All patients seeking STD/HIV services were offered Hep A vaccines at the time of their visit.
- Outreach to at risk populations (homeless and others seeking our services) was conducted as appropriate. Discussion at Family Place (a public library program) engaged parents on the importance of vaccines.

MATERNAL CHILD HEALTH SERVICES

Preterm birth, as defined by a baby delivered before 37 weeks' gestation, is a leading cause of infant morbidity and mortality, specifically for those born prior to 32 weeks gestation. According to the CDC, premature births are linked to longer term effects of concerns such as cerebral palsy, developmental delays, feeding difficulties, hearing or vision problems and respiratory concerns. Additional, low birth weight (<5.5# or 2500g) babies, who are frequently premature babies, are at increased risk of illness, infections, learning disabilities, and motor or social delays.

In 2019, preterm births impacted 1 of every 10 infants born in the United States. 2019 also was the fifth year that a trend in the increase of preterm birth rates was noted.

Disparities continue to exist in preterm births in the US: 14.4% in African American women, 9.3% in white women, and 10% in Hispanic women. Disparities are also evident in other characteristics by births, according to the National Vital Statistics Reports (Vol. 68 No. 13) 2018 data:

- First trimester prenatal care: 62.6% American Indian/Alaska Native, 81.8% Asian, 67.1% Blacks, 72.7% Hispanics, 51% Native Hawaiian, and 82.5% Whites
- WIC during pregnancy: 55.3% American Indian/Alaska Native, 20.3% Asian, 54.6% Blacks, 55.5% Hispanics, 42.1% Native Hawaiian/Pacific Islander, and 23.6% Whites
- Medicaid insurance: 66.2% American Indian/Alaska Native, 24.1% Asian, 65.3% Blacks, 58.9% Hispanics, 58.9% Native Hawaiian/Pacific Islander, and 30% Whites
- Low birth weight baby: 8% American Indian/Alaska Native, Asian 8.58%, 14.07% Black, 7.49% Hispanics, and 6.91% Whites

Healthy Moms Healthy Babies addresses clinical needs and education, provides resource referrals, assesses substance use, depression, and domestic violence concerns, and advocates for the improvement of pregnancy and birth outcomes by addressing social determinants of health (SDOH) as barriers to more favorable outcomes.

Program Goal: Promote healthy mothers, infants, and children in the City of York and empower them to reach their full health potential.

Objective 1: Reduce total preterm births (MICH-07; HC/HIT-R01)¹

Activities:

- Provide health education during the prenatal period related to potential causative factors of preterm births
- Record gestational age and birthweight of babies delivered to women enrolled in HMHB services

Evaluation Method:

- Evaluate ≥ 10 educational items currently utilized by home visitation staff, whose content provides a preventive approach to preterm births, for the three A's as defined by the CDC in relation to Health Literacy: Accurate, Accessible, and Actionable
- Collect data on live births during the calendar year and compare preterm rates to regional, state, and national rates (compare annual data year-to-year internally)

Objective 2: Increase the number of women who are screened for PMADs (Perinatal Mood & Anxiety Disorders) and mental health concerns through evidence-based depression screens utilizing the PHQ-2 and PHQ-9 (MICH-D01; MHMD-08; MHMD-05; MHMD-04)

Activities:

- Complete a PHQ-2 screen at routinely scheduled home visits and/or remote check-in contacts
- Complete a PHQ-9 screen at routinely scheduled home visits and/or remote check-in contacts if the PHQ-2 score is ≥ 4
- Provide mental health resources and/or referrals to patients as needed
- Current home visit staff to achieve training in perinatal mental health

¹ Information provided in parentheses notes reference of similar Healthy People 2030 objectives

Evaluation Method:

- Validated depression screens completed on $\geq 65\%$ of active program participants
- # of mental health referrals (includes crisis referrals, referrals to counseling service whether staff person completed the actual referral or patient followed through, referrals to PCP for management, or referrals for intimate partner violence)
- Review mental health educational materials currently provided to patients using the health literacy three A's based on the CDC recommendations
- 100% of home visit staff hired before June 30, 2021 to be trained in the area of perinatal mental health

Objective 3: Increase the number of parents who read to their child under the age of 2 (EMC-02)

Activities:

- Provide age-appropriate and culturally relevant books to all children within the household unit at each visit
- Discuss/Educate/Model reading behaviors
- Provide information related to the benefits of reading to children starting at a young age

Evaluation:

- # of books distributed to families during the calendar year to exceed 1,000
- Provide education about the benefits of literacy starting at the intake phone contact through program completion, ideally at every visit

Objective 4: Increase the number of parents/caregivers who are asked related to concerns about a child's learning, development, or behavior (MICH-17)

Activities:

- Ask parent/caregiver at each home visit if there are concerns related to learning, development, or behavior
- Complete milestone checklists at 2, 4, 6, 9, 12, 18, and 24 months
- Refer patients as necessary to additional services including but not limited to: Early

Evaluation methods:

- Percent of parents/caregivers asked about concerns related

Performance Review 2020

Objective 1: Expand on interdisciplinary team approach to serve clients

PARTIALLY ACHIEVED:

- Funding secured for per diem contract support position for data entry, coding
- Identified collaborative opportunities/actions inter/intra agency

Objective 2: Enhance literacy

PARTIALLY ACHIEVED:

- # referrals made was not specifically captured, but referrals were made as needed/agreed upon by patients
- 1,587 books distributed

Objective 3: Raise awareness about disparities

PARTIALLY ACHIEVED:

- Meetings/conversations held with community providers/stakeholders and inter-agency to address issues of disparity
- Method of communication: phone, Zoom meetings, email, professionals' meetings

LEAD HAZARD RISK REDUCTION SERVICES

The Pennsylvania Departments of Health and Human Services recommends 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 receives 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 receives a HUD Lead Hazard Control grant through the PA Department of Health. This grant program is implemented in collaboration with the York County Planning Commission to inspect and remediate lead hazards and address other health and safety hazards the home-setting to promote healthy and safe housing for low-to-moderate income families.

Objective 1: Increase organizational capacity for lead-safe and healthy housing related initiatives.

Activities:

- Identify available funding to support staff devoted to lead and healthy housing program activities
- Recruit staff to implement activities associated with the CLPP and LHC grants and to coordinate other lead and healthy housing programs and initiatives
- Identify training opportunities for program staff and health inspectors and develop a training plan

Evaluation Methods:

- Number of staff (FTEs) allocated towards lead and healthy housing program activities
- Identified and designated roles/responsibilities for program deliverables associated with the CLPP and LHC grants and for any other required/contracted lead and healthy housing activities
- Number of training opportunities identified and plan developed to ensure appropriate level of training/certification and competency

Performance Review 2020

Objective 1: Adopt a proactive, sustainable approach to reduce childhood lead poisoning in rental properties. (I3-G8; I3-G9; I4-G11)

PARTIALLY ACHIEVED:

- Capacity has increased for trained/certified contractors - Due to the COVID-19 pandemic, no trainings were held for contractors.
- At least one policy is updated or created – As work assignments changed due to COVID-19 response efforts, no new policies were created or updated.
- Lead Hazard Control program processes are improved
 - Community Health Services Division of the York City Bureau of Health and the Housing Bureau of the York County Planning Commission identified areas for improvement based on the performance for the 2016-2019 HUD Lead Hazard Control grant, including opportunities to increase efficiency and adjusted roles and responsibilities for each agency, and implemented these adjusted for the 2020-2023 HUD Lead Hazard Control Grant. Agency roles and responsibilities are detailed in an agreement between the York City Bureau of Health and the York County Planning Commission.

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 child abuse, neglect and other types of stress and trauma among families and youth.

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 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 and Mobile Produce Market activities, community garden/urban farming initiatives such as York Fresh Food Farms, and A Matter of Balance- a fall prevention program for older adults.

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.

Activities:

- Continue to implement the Healthy Corner Store Initiative by providing funding (if available), educational materials, and technical assistance to new and existing partner stores.

- Sustain systematic and environmental changes leveraging the use of WIC and SNAP benefits and nutrition education activities at farmer's markets/mobile markets, corner stores, and other food retail settings (i.e., Heart Smarts)
- Support community garden and urban farming initiatives by providing funding (if available), and technical assistance.

Evaluation Methods:

- # of Healthy Corner Store Initiative (HCSI) partner stores
- # and description of activities that promote WIC/SNAP and nutrition education at farmers markets/mobile markets, corner stores, 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
- Support environmental and policy changes via the implementation of the City of York's Complete Streets Policy and Walk Friendly Communities (WFC) Program.
- Support planning and evaluation activities related to active transportation and walking and biking in community and worksite settings.

Evaluation Methods:

- # and type of environmental changes and evaluation activities that support active transportation and bike/pedestrian activity.
- Description of Complete Streets Policy and Walk Friendly Communities application updates.
- # of community and worksite events that promote walking and biking

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

Activities:

- Conduct Coach training and update sessions for coaches 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) coach trainings and update sessions held
- # of coaches trained and active coaches
- # of collaborative falls prevention partnerships established to support community partners

Objective 4: Reduce the prevalence and impact of Adverse Childhood Experiences (ACEs) by establishing a taskforce and implementing policy, systems, and environmental change strategies.

Activities:

- Collaborate with community partners to support and implement PSE strategies and behavior change efforts to reduce ACEs and promote resilience.
- Educate community partners including healthcare providers, social service agencies, educational institutions, childcare centers, and other stakeholders on the impact of ACEs, risk factors and protective factors that promote resilience.

Evaluation Methods:

- # of collaborative partnerships
- # of educational activities held highlighting the impact of ACEs, risk factors and protective factors that promote resilience
- Taskforce implementation updates, including # of identified/recruited partners.

Performance Review 2020

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-based nutrition education.

ACHIEVED:

- Four existing partner stores in Healthy Corner Store Initiative (HCSI) – Green's Food Market, Pak's Market, Lee's Food Market and 4 The Family.
- Strategies implemented from the City of York's Penn Market/Healthy Food Access study:
 - Collaborated with local stakeholders to review practices at Penn Market and the York Fresh Food Farms Mobile Produce Market to advise on evidence-based PSE interventions and areas of improvement. The City of York's Penn Market/Healthy Food Access study continues to guide the conversation on areas of improvement and vest strategy implementations
 - Implemented the Heart Smarts nutrition education program during the York Fresh Food Farms 2020 Mobile Market at 2 partner store locations – Pak's Food Market and 4 The Family. Program was held over an 8-week period with 16 nutrition education lessons reaching 90 participants.
 - Supported fresh food vendors at Penn Market, including Healthy Living Foods and Al-Amin La Tienda Halal Market.
 - Through the Urban Agriculture Infrastructure Collaborative Grant, the Bureau implemented infrastructure improvements that support healthy food vendors. Promotional signage, mobile payment hardware, high tunnel, germination chamber, etc.)
- Activities that promoted WIC/SNAP at farmers markets and HCSI partner stores:
 - York Fresh Food Farms Mobile Market incorporated additional bilingual (English & Spanish) signage to new market van to increase awareness on the acceptance of WIC/SNAP at all market stops.
 - Provided technical assistance to York Fresh Food Farms for new marketing materials around WIC/SNAP/FMNP acceptance.

- Developed bilingual flyers to promote the mobile market and its offering of nutrition classes paired with fostering strategies to fully utilize WIC/SNAP to support a healthier diet.
- Contracted a seasonal health educator for the 2020 mobile market season to promote the acceptance of SNAP, WIC, and Senior Farmers' Market Nutrition program bucks.
- In partnership with Penn State Nutrition Links program and the York County Food Alliance, hosted zoom meetings to promote the York Fresh Food Farms 2020 mobile market season and HCSI.
- Nutrition education activities coordinated at farmer's markets/mobile markets, corner stores, and other food retail settings and # of participants:
 - In collaboration with Penn State Nutrition Links program, York Fresh Food Farms, and the Bureau's Healthy Moms, Healthy Babies program, Heart Smarts, an evidence-based SNAP/Ed approved nutrition education program, was implemented for the 2nd year in a row during the mobile market season. The program began on August 20, 2020 and ended on October 14, 2020. A total of 16 nutrition education lessons were conducted at two market stops, and even amidst the Coronavirus pandemic the program reached 90 city residents and their respective families. Both stops where Heart Smarts was implemented occurred at two HCSI partner stores, Pak's Food Market and 4 The Family.
- New and existing community gardens receiving support
 - Provided support for 3 community gardens and 2 urban farm locations – Cottage Hill Garden, Church & Court Garden, Northeast Neighborhood Association (NENA) garden and 2 York Fresh Food Farms locations; provided funding for garden/farm equipment.
 - Connected community members with established community gardens within the city (Church and Court, and Cottage Hill).
 - Over 60 community volunteers were recruited to help with harvesting and sustaining both garden sites in the Summer and Fall season.
 - Supported the donation of seedlings from York Fresh Food Farms to both community gardens.
- Quantity of produce and amount of produce sales related to urban farming initiatives:
 - Implemented new ways of distributing the food grown at community garden sites to non-traditional food pantry sites, such as community centers throughout the city.
 - A total of 4,855lbs were donated.
 - 2020 total mobile market sales were \$42,900.76; 29.1% of the revenue came from WIC/SNAP/FMNP sales; over 31,300lbs of fresh produce was grown during the 2020 season.

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.

ACHIEVED:

- Environmental changes that support active transportation
 - Secured funding in partnership with the Department of Public Works through the PennDOT ARLE grant program to implement safety improvements and other environmental changes at 3 identified high-priority Safe Routes to School crossings/intersections.

- 8 environmental changes were implemented to support active transportation. A section of S. Pershing St from King St. extending to N. Pershing St. at Philadelphia St. was repaved and bike and pedestrian improvements were incorporated. Included shared lane markings for north and southbound bike travel and improved crosswalks at 4 locations (2 mid-block locations including the downtown bus transfer center and rail trail connections; 2 intersections at Market St. and the Philadelphia St./Rail Trail Crossing).
- Safe Routes to School improvements
 - Supported streetscape improvements along the Broad St. Greenway that improved bike/pedestrian path connecting schools, parks, residential housing, a senior center, and green space.
 - 2 improvements – 1) cleaning and replanting the traffic calming bulb outs/stormwater features along the greenway near the Philadelphia Street intersection and 2) the addition of a memorial garden honoring fallen firefighters.
- Complete Street Policy updates
 - Supported working group in charge of completing the City's Complete Streets Policy Design Guide; expected completion early 2021.
- Walk Friendly Communities application submission/response
 - Provided overview of the Walk Friendly Communities program to the Active Transportation Committee and worked to engage subcontractor support to assist with preparation of application.
- Bike/pedestrian planning and evaluation activities
 - 9 bike/pedestrian planning and evaluation activities supported.
 - 3 priority school crossing projects identified.
 - Walkshops were held with community members at 5 locations along the Rail Trail were reached out through the York County Economic Alliance Downtown Inc. Trail Towns Program
 - Set timeline and plan for the annual Walk Bike Bus York Campaign to promote green travel options to worksite commuters in September 2020.
- Promotional activities related to the WalkWorks route
 - (1) Walk Bike Bus York Campaign
- Community and worksite events that promote walking and biking
 - (2) Community event – Walk Bike Bus York Campaign and Worksite event – City of York's Employee Wellness Committee walking challenge through team participation in the APHA NPHW Billion Steps Challenge.
 - 2020 Walk Bike Bus York Campaign recorded 4 winners and 145 trips.
 - Team Walk York had 15 participants and logged 1,313,674 steps between January 1, 2020 and March 31, 2020.

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

ACHIEVED:

- Community events that promoted MOB and STEADI toolkit resources
 - Developed a comprehensive older adult outreach toolkit that included MOB and STEADI toolkit resources and distributed it to 2 senior centers – Yorktown Senior Center and White Rose Senior Center. Reached 100 older adults in the City.

- 1 coach training update meeting for MOB certified coaches was held on January 22, 2020 in partnership with Wellspan Master Trainer; 5 coaches were present
- Three (3) coaches trained and five (5) active coaches
- Providers, healthcare facilities, and community organizations reached for falls prevention outreach and MOB referrals utilizing the STEADI toolkit
 - 3 community organizations reached for falls prevention outreach.
 - MOB home safety checklists distributed to Crispus Attucks Senior Center Valentine's Dance (12), Cloverfield House (12), and Kingston House (7).
 - (321) community organizations reached for fall prevention outreach via monthly newsletter for healthcare providers from January – March 2020, reached 321 subscribers.
- 17 collaborative falls prevention partnerships

NOT ACHIEVED:

- Due to the Coronavirus pandemic all MOB classes were canceled.
 - An MOB class was scheduled to begin March 13, 2020 at Windy Hill Senior center; however, it was canceled due to COVID-19.
 - Due to the Coronavirus pandemic all MOB classes were canceled – no participants.
 - Due to the Coronavirus pandemic, community events were canceled. No risk assessments were completed in 2020.

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

ACHIEVED:

- 1 motor vehicle safety was held on March 12, 2020 at Lincoln Charter School; 30 students participated.
- Due to COVID-19 all motor vehicle safety classes for older adults (CarFit) were canceled. In collaboration with Centers for Traffic Safety, 100 Senior Kits were developed to promote CarFit virtual lessons and resources.
- 7 community partners engaged related to health and safety education – Lincoln Charter School, York Academy Regional Charter School, York City Police Department Community Resource Center, Crispus Attucks, Hannah Penn K-8 school, Centers for Traffic Safety, and York City Community of Hope.
- 3 pedestrian/bike safety education activities were conducted.
 - Lincoln Charter School – 30 students participated.
 - National Night Out – 70 pedestrian safety kits distributed.
 - Hannah Penn K-8 Wellness Wednesdays – I'm Safe Pedestrian safety presentation shared with children and parents; 100 kids were reached.
- 200 youth/students were reached through pedestrian safety education activities
- Support for school and community-based health and safety initiatives:
 - Pedestrian and motor vehicle safety lessons were implemented at Lincoln Charter School, Hannah Penn K-8, and York Academy Regional Charter School.
 - Heart Smarts, nutrition education lessons, were advertised through York City School District.
 - Developed and distributed 70 pedestrian safety kits to kids during National Night Out.

- Developed a Pedestrian Safety presentation utilizing *I'm Safe* resources to promote physical activity and safety for school children with a follow-along activity booklet; 100 kits were distributed at Hannah Penn K-8 in partnership with York City Community of Hope.

Objective 5: Evaluate the effectiveness of established community programs in preventing chronic disease and injury.

ACHIEVED:

- Communication and outreach activities
 - 16 Heart Smart lessons conducted alongside the York Fresh Food Farms mobile market to promote adoption of a healthier lifestyle.
 - 3 pedestrian/bike safety educational activities implemented to foster safe physical activity among youth and their families.
 - 2 senior center outreach activities to distribute comprehensive senior kits, addressing falls prevention and older adult safe driving.
- Cross-sector collaborations:
 - 10 – York City School District, Safe Kids York County, York City Police Department, Hannah Penn K-8, York City Community of Hope, York Academy Regional Charter School, Lincoln Charter School, York Fresh Food Farms, York City Department of Public Works, Commuter Services PA.
- 90 Heart Smarts survey participants – Through the implementation of Heart Smarts, surveys were integrated into all 16 lessons. Surveys reached different pockets in York City's high-need areas.

OVERDOSE & SUBSTANCE ABUSE PREVENTION

Overdose Data to Action (OD2A) funds provided by the Pennsylvania Department of Health through the Prescription Drug Monitoring Program (PDMP) aim to assist local health departments with the planning and implementation of overdose prevention and response strategies. This comprehensive program focuses on the complex and changing nature of the opioid overdose epidemic related to two overall components – a surveillance strategy and prevention strategies. Funds were intended to enhance local collaborative efforts related to supporting a balanced approach between evidence-based and innovative initiatives in the community.

Program Goal: Prevent opioid misuse and substance abuse by fostering collaborative partnerships to implement community-wide prevention and surveillance efforts to address overdoses in York County.

Objective 1.1: By 2021, increase collaborative efforts to build sustainable and effective multi-sector partnerships to prevent and respond to overdoses utilizing evidence-based models.

Activities:

- Participate in Public Health and Safety Team (PHAST) meetings to enhance cross-sector relationship-building, data use, and opioid overdose prevention
- Utilize the PHAST framework to engage multi-sector partners through a data-driven process

Evaluation Methods:

- Number of PHAST meetings attended, per year
- Number and description of multi-sector collaborations

Objective 1.2: By 2021, utilize surveillance and prevention efforts to enhance data-driven multidisciplinary collaborative approaches.

Activities:

- Establish and conduct an Overdose Fatality Review (OFR) Team to review individual drug overdose deaths
 - Recruit a minimum of five local stakeholders to serve on the OFR
 - Convene and participate in quarterly (every 3 months) OFR Team meetings
 - Identify data collection protocols
- Establish and conduct a pilot Naloxone Reversal Review (NRR) Team to review non-fatal overdose events and naloxone usage data
 - Recruit a minimum of five local stakeholders to serve on the NRR
 - Convene and participate in quarterly (every 3 months) NRR Team meetings
 - Identify a data sharing process

Evaluation Methods:

- Number of Overdose Fatality Review (OFR) Team members/organizations
- Number of OFR Team meetings, per year
- Number and description of data sources for overdose death data collection
- Number of overdose death reviews, per year
- Description of data collection protocols
- Number of Naloxone Reversal Review (NRR) Team members/organization
- Number of NRR Team meetings, per year
- Description of data sharing process

Objective 2: By December 2021, develop and implement a minimum of two overdose prevention, opioid misuse, and substance abuse prevention public awareness campaigns and outreach strategies.

Activities:

- Capacity building for more effective and sustainable prevention effort
- Implement two public awareness and outreach strategies through a community-wide approach fostering collaboration
- Identify, implement, and evaluate community-based overdose prevention, opioid misuse, and substance abuse prevention strategies

Evaluation Methods:

- # of community agencies and organization involved in capacity building
- # and description of public awareness and outreach strategies
- # and description of people reached through two public awareness campaigns

Objective 3: Within 2021, implement prescriber education to promote safe and effective prescribing behaviors and encourage safe prescribing guidelines throughout York County.

Activities:

- Support capacity for local prevention efforts

- Partner with the York Opioid Collaborative to provide a minimum of 8 (2 every 3-months/quarterly) prescriber education activities per calendar year (i.e., prescriber education activities include CME sessions, non-CME initiatives, outreach, etc.)
- PDMP data will be used to inform current and future surveillance activities and identify future targeted populations and groups for outreach and education
- Collaborate with the York Opioid Collaborative to disseminate Safeguard(x)d kits

Evaluation Methods:

- Number and description of prescriber education activities
- Number and type of participants attending educational activities
- Number of datasets provided by PDMP to inform prevention efforts
- Number and description of Safeguard(x)d kits disseminated

PDMP / OD2A Initiatives Supported in 2020:

- Supported community-wide overdose, opioid misuse, and substance abuse prevention efforts through more than \$92,800 in subcontract services with the York Opioid Collaborative, All Youth Access (Dr. Stephanie Bradley), Gavin Advertising, School District of the City of York, York Harm Reduction Project, mySidewalk, and Tamar Wallace (Independent Contractor).
 - *Actual subcontract services cost for 2020= \$92,824.89*
- Initiated new prevention and surveillance efforts while expanding those that are currently in place related to substance abuse.
- Reached 87,290 people (impressions) from 8/25-9/10/2020 with our National Recovery Month Campaign on Facebook.

DENTAL HEALTH

The Dental Health Program, funded by the PA Department of Health, ended on June 30, 2020 due to changing funding priorities for dental health in Pennsylvania. The Bureau coordinated a school based dental sealant program targeting students through a contract with Family First Health (FFH). The school-based dental sealant program targeted 6–8-year-old students in the elementary schools within the city limits. During the last year of the program, nine school-based events occurred at the following elementary schools – Hannah Penn, Davis, Smith, Goode, McKinley, Ferguson, and Devers.

The following are results from the events:

- 591 children screened;
- 371 children were sealed (62.8%);
- 2,594 surfaces were sealed (avg. 6.25 surfaces sealed per child);
- 142 children were referred for dental care
- 3,624 children received fluoride varnish applications, both in the clinic setting at FFH and through community events.

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

ENVIRONMENTAL HEALTH SERVICES MATRIX

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

Notes:

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

Community Resources

PA Department of Health, PA Department of Agriculture, PA Department of Environmental Protection, Community Progress Council, York City School District, Crispus Attucks Association, Child Care Centers and Kindergartens, Housing Council, Susquehanna Ozone Action Partnership, Penn State Cooperative Extension, York Water Company

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

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. The Bureau of Health supports the annual Litter Index survey.

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

Performance Review for 2020

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

ACHIEVED:

- Due to COVID, closing both schools and City offices, our 2nd grade 90-minute classroom presentation "The Good, The Bad & The Ugly" about recycling and littering was cancelled.
- Having begun in 1991, the City's Adopt-A-Block program celebrated reached

its 30th year. Unfortunately, due to the Covid-19 pandemic, the 2020 season of Adopt-A-Block was cancelled.

- 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 29 recycling bins, 167 recycling cans, 8 packs of yard waste bags and 46 yard waste cans to curbside customers. Due to the COVID-19 pandemic, access to Public Works, 2nd floor of City Hall was closed to the public. Appointments were made for customers to purchase containers at City Hall lobby.
- 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 due to inclement weather (extremely cold temperatures and high winds among them) and for the start/end of seasonal collections (Curbside Yard Waste, Fall Leaf, Christmas Trees).

WATER POLLUTION CONTROL PROGRAM

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

The MIPP accomplishes this through industrial facility inspections and industrial wastewater sampling. Inspections are performed to ensure industries conduct their manufacturing processes and operate their wastewater treatment systems in compliance with pretreatment regulations, and to prevent the discharge of unwanted substances to the sanitary sewer system and wastewater treatment plant. Wastewater sampling and testing allows the MIPP to evaluate industrial compliance with both federal and local wastewater discharge regulations. Some industrial facilities may be required to treat their wastewater before discharge to the sanitary sewer to meet federal and local wastewater regulations; hence, the term “pretreatment.” Wastewater test results are also used to recoup costs incurred by the City of York wastewater treatment plant to process the higher strength industrial waste- costs that would otherwise be borne by ratepayers. Personnel also investigate spills and discharges that may pose an environmental threat. MIPP has two full time staff.

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

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

Activities:

- Visit industrial sites and periodically sample discharges

- Respond to information requests and complaints
- Provide education and technical assistance as identified or requested

Evaluation Method:

- Number of visits to industrial facilities
- Number of inspections of the major contributors and 3 wastewater samples collected
- Number of responses to information requests and technical assistance provided

Performance Review 2020

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

ACHIEVED:

- MIPP staff conducted over 450 industrial site visits in 2020 and collected 188 industrial wastewater samples. Twenty-four (24) inspections were conducted.
- Twenty-eight (28) Notices of Violation were issued to seven (7) industries. Industries came into compliance within the required regulatory time frame.
- Six (6) industrial wastewater discharge permits were issued, which included permit renewals and permit amendments. Permits are typically issued for a three-year period. In addition, staff evaluated industries for inclusion in the pretreatment program, assessed proposed industrial processes at new and existing industrial facilities, and required the submission of slug discharge control plans or the development of other industrial standard operating procedures.
- The department responded to approximately 180 information requests, including, but not limited to, Right-to-Know requests and requests for regulatory and environmental information. Staff also assisted various industries with regulatory compliance questions and technical issues.
- The MIPP generated invoices to recoup the costs for industrial wastewater treatment and sampling activities. Combined with permit fees and administrative penalties, total MIPP cost recovery for 2020 was \$600,257.06.

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, day care centers, schools, ice manufacturers, public institutions, , domiciliary care and group homes, special events (i.e., Parades, Street Fair, etc.), 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.)
- Hire additional staff to inspect high risk establishments

Evaluation Methods:

- Number of inspections of food service establishments
- Number of complaints investigated

Performance Review 2020

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

ACHIEVED:

- Conducted 176 food establishment and 119 special events inspections
- Responded to 20 complaint investigations

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. Most of the 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.

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

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

Activities:

- Collect regular trash twice weekly by Penn Waste Incorporated
- Pick up and dispose large items on an "as scheduled" basis
- Collect leaves and Christmas trees for recycling
- Maximize recycling efforts

Evaluation Methods:

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

Performance Review 2020

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

ACHIEVED:

- The Environmental Services Supervisor prepared the RFP and advertisement for Curbside collections contract, conducted the mandatory pre-bid, held bid

opening, and prepared items for presentation to City Council and sent final contract agreement for digital signatures.

- Collection of contract dumpsters and totes were performed year-round, primarily at City facilities and multi-unit residential buildings.
- Approximately 15,900 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; No collections during April 2020 due to the COVID pandemic leading to an increase in normal trash and recycling).
- One hundred thirty-nine street containers throughout the City were emptied 3 days each week. Many containers are 18 years old or more and beginning in 2019, the City began a replacement of at least 10% of worst condition, existing street containers each year. In 2019, (19) and in 2020, (17) of the 139 existing street containers were replaced.
- There were 3,647 addresses scheduled for large-item collection this year. (No collections schedule April, May and first 3 weeks of June due to the COVID pandemic leading to an increase in normal trash and recycling; also, Large Item Attendant not working during this time.)
- A total of 19,927.72 tons of refuse 3,031.23 tons of recyclables and 2,079.21 tons of yard waste, leaves and Christmas trees 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 hauling (98) dump truck loads at 10 tons each and H&H hauling (42) tractor trailer loads at an average of 14.5 tons each (all totaling 1,649 tons).
- During the first two weeks of January 2020, 548 Christmas trees (average 30 pounds each; 7.86 tons) were collected by City staff. This tonnage is included in the total yard waste, leaves and Christmas tonnage above.
- The Compost drop-off facility at Memorial Stadium was open the first Saturday of each month (June – December; closed April and May due to Covid pandemic) from 10 a.m. to 2 p.m.
- 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.
- Recycling containers were purchased, and a final disbursement of funds and close-out letter was prepared for the latest 902 Recycling Grant with DEP
- The Annual YCSWA hauler licensing (both MSW and Recycling) and DEP hauler licensing applications were prepared and submitted.

Drinking Water Supply

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

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

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

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 has replaced all lead lines to homes 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	<u>Housing</u>	
Population	43,718	Total Housing Units	18,496
Population/square mile	8,407	Vacant Housing Units	2,243
		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 Race and Hispanic

Origin

One Race	40,978	93.7%
White	22,398	51.2%
Black/African American	12,248	28.0%
American Indian/Aleut.	269	0.6%
Asian	541	1.2%
Other	5,510	12.6%
Two or more races	2,740	6.3%
Hispanic/Latino Origin – Any Race	12,458	28.5%

Population by Age

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

Technical Notes and Comments:

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

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

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

2010 Census
York – 43,718
York County – 434,972
Pennsylvania – 12,702,379

Age-Adjusted Death Rates
Selected Causes of Death – York, PA 2019

	Cause of Death	Rate per 100,000*	No. of Deaths
1.	Heart Disease	174.8	60
2.	Malignant Neoplasms	241.0	84
3.	Other Unintentional Injuries	118.8	45
4.	Cerebrovascular Disease	58.2	20
5.	C.O.P.D.	53.1	18
6.	Diabetes Mellitus	37.2	13
7.	Pneumonia and Influenza	23.4	7
8.	Nephritis, Nephrosis	24.5	8
9.	Septicemia	13.4	4
10.	Motor Vehicle Fatality	5.3	2
11.	Alzheimer's Disease	34.2	10

*Age-Adjusted Death Rates based on Standard U.S. 2010 population.

Source of data: PA Department of Health Vital Statistics 2019.

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 2019

	Cause of Death (No. < age 65)	Avg. YPPL	Total YPPL
1.	Motor Vehicle Fatalities (1)	45.0	45
2.	Other Unintentional Injuries (35)	23.9	835
3.	COPD (6)	16.7	100
4.	Heart Disease (22)	10.9	240
5.	Nephritis, Nephrosis (2)	10	20
6.	Cerebral Vascular Disease (8)	10	80
7.	Malignant Neoplasm (31)	7.9	245
8.	Cerebral Vascular Disease (8)	10	80
9.	All Other Causes (56)	25.6	1436