

2023 Annual Program Plan

Act 315/Act 12

City of York, PA



City of York - Bureau of Health

101 S. George Street

York, PA 17401

717-849-2299

MAYOR

Michael Ray Helfrich

CITY COUNCIL

Sandie Walker, President

Edquina Washington, Vice-President

Lou Rivera, Member

Betsy W. Buckingham, Member

Dr. Felicia O.A. Dennis, Member

HEALTH BOARD

Sharon Smith, RN, Chair

Rita Van Wyk, M.D.

George Fitch, Jr.

Carmen Bones

BUREAU OF HEALTH

Oluwatomi Uwazota, M.D.

Medical Director

Monica Kruger, M.P.H.

Director

*Administrative Office
101 S. George Street
York, PA 17401*

*Albert S. Weyer Health Center
435 W. Philadelphia Street
York, PA 17401*



City of York - Bureau of Health

Vision:

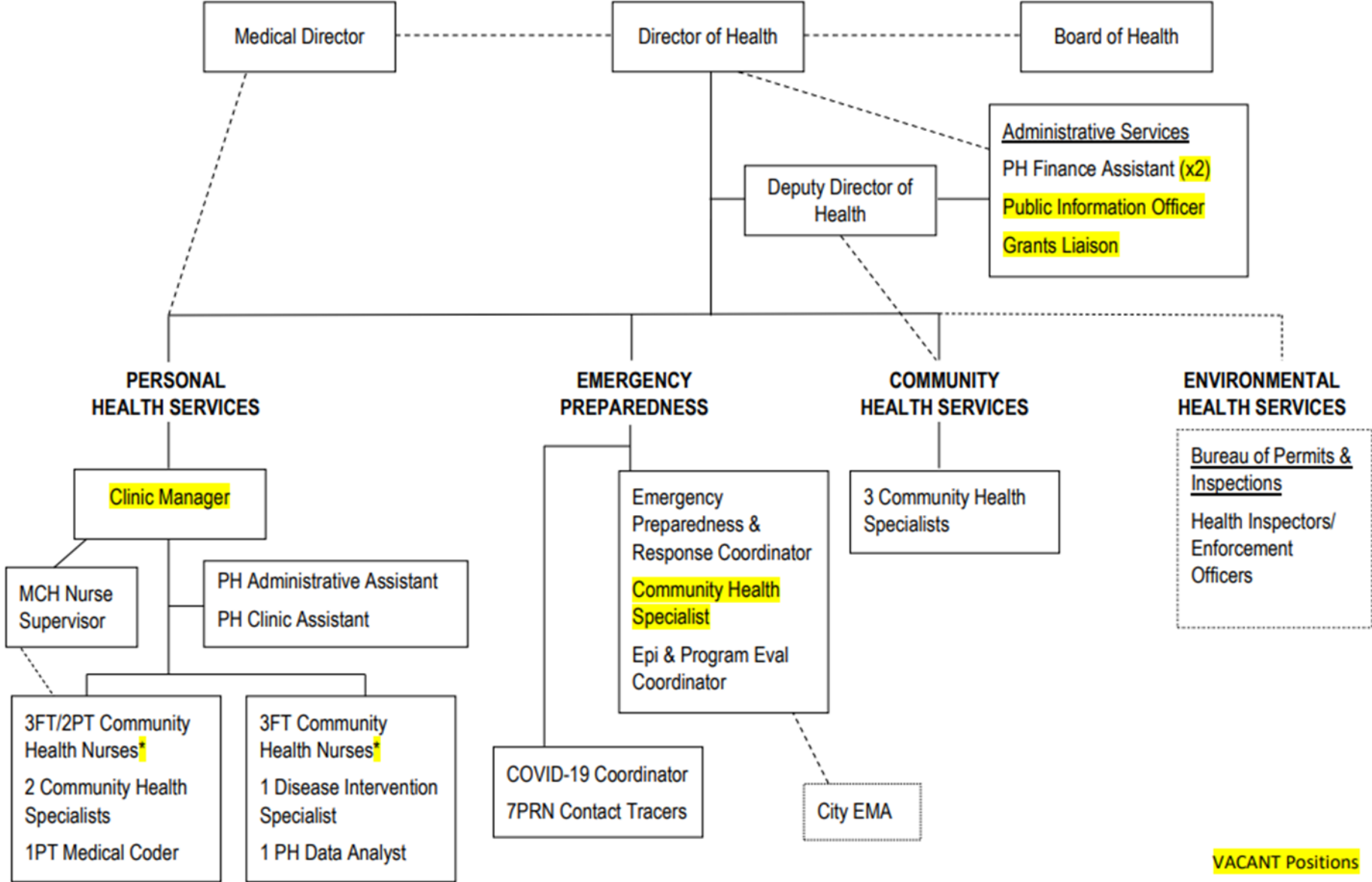
York City is an inclusive community that values health and well-being for ALL.

Mission:

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

LOCAL HEALTH DEPARTMENT BUDGET & EXPENDITURE 2023 Budget					
Act 315/12, PA Code: Title 28, Chapter 15 County/Municipal: York City Bureau of Health					
NOTE: data entry in yellow areas only		REVENUE			
Program Description	Total Funds	Exclusions, Grants, Etc.	Subsidy Base	Act 12 Funds	Act 315 Funds
<i>Administrative/Supportive Services:</i>					
Admin/Laboratory/Support Services	\$ 1,214,384	\$ 516,102	\$ 698,282		\$ 698,282
Bioterrorism/PHEPR	\$ 1,957,464	\$ 1,318,378	\$ 639,086		\$ 639,086
TOTAL					
Administration (Sec 15.12)	\$ 3,171,848	\$ 1,834,480	\$ 1,337,368	\$ -	\$ 1,337,368
<i>Personal Health Services:</i>					
Cardiovascular Disease	\$ 143,250	\$ 86,394	\$ 56,856		\$ 56,856
Chronic Disease Control	\$ 133,521		\$ 133,521		\$ 133,521
Communicable Disease Control	\$ 185,032		\$ 185,032		\$ 185,032
COVID-19	\$ 4,554,630	\$ 4,209,875	\$ 344,755		\$ 344,755
Family Planning/Sexual Wellness	\$ 356,549	\$ 421,078	\$ (64,529)		\$ (64,529)
Immunization	\$ 224,022	\$ 285,308	\$ (61,286)		\$ (61,286)
Injury Prevention	\$ 95,500	\$ 57,596	\$ 37,904		\$ 37,904
Maternal Child Health	\$ 664,086	\$ 611,593	\$ 52,493		\$ 52,493
PDMP/Substance Abuse Prevention	\$ 245,241	\$ 177,078	\$ 68,163		\$ 68,163
Tuberculosis	\$ 6,376	\$ 3,712	\$ 2,664		\$ 2,664
TOTAL					
Personal Health (Sec 15.13)	\$ 6,608,207	\$ 5,852,634	\$ 755,573	\$ -	\$ 755,573
<i>Environmental Health Services:</i>					
Lead Testing/Environ. Investigations	\$ 2,068	\$ 3,500	\$ (1,432)		\$ (1,432)
Lead Prevention	\$ 29,605	\$ 29,605	\$ -		\$ -
Environmental Health & Safety Pgms	\$ 196,457	\$ -	\$ 196,457	\$ 19,253	\$ 177,204
Health and Sanitation Inspections	\$ 116,170	\$ 90,230	\$ 25,940		\$ 25,940
TOTAL					
Environmental Health (Sec 15.14)	\$ 344,300	\$ 123,335	\$ 220,965	\$ 19,253	\$ 201,712
<i>Other Services:</i>					
n/a			\$ -		\$ -
Other Services	\$ -	\$ -	\$ -	\$ -	\$ -
TOTAL: Administrative	\$ 3,171,848	\$ 1,834,480	\$ 1,337,368	\$ -	\$ 1,337,368
TOTAL: Personal Health	\$ 6,608,207	\$ 5,852,634	\$ 755,573	\$ -	\$ 755,573
TOTAL: Environmental Health	\$ 344,300	\$ 123,335	\$ 220,965	\$ 19,253	\$ 201,712
TOTAL: Other Services	\$ -	\$ -	\$ -	\$ -	\$ -
SUM: Qualifying Health Program	\$ 10,124,355	\$ 7,810,449	\$ 2,313,906	\$ 19,253	\$ 2,294,653
TOTAL: Exclusions and Grants		\$ 7,810,449		\$ 19,253	
SUM: Local Health Dept. Program					\$ 2,294,653
Analysis by Samantha Zahm, MPH			Agency York City Bureau of Health	Date 3/3/2023	

**Department of Economic and Community Development (DECD)
Bureau of Health**



VACANT Positions

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 44,800 York residents (2020 U.S. Census), within an area of 5.2 square miles and is slowly growing (2010 population from U.S. Census was 43,718). 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 bureaus reporting to the Director of Community and Economic Development. The other bureaus include Planning, Housing, Permits and Zoning, and Economic Development. 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 2020 U.S. Census indicates that 32% of the city's population is white non-Hispanic, 38% is Hispanic or of Latino origin, 26% is Black, 0.9% 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 (28%) 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.

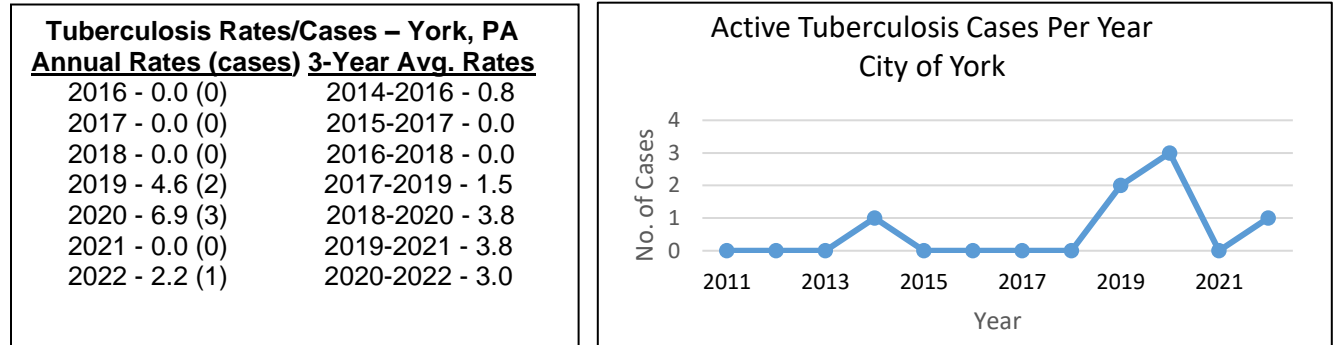
Other lifestyle or behavioral choices continue to impact the health of the community. The Bureau is actively involved and leading efforts leading to increased opportunities for healthy living, including installing more bike and walk friendly amenities, improving the existing community gardens structure, 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.

The health bureau continues to respond to the COVID-19 pandemic through disease surveillance and monitoring, case investigations, data collection and reporting, and community education.

Local Public Health Statistics

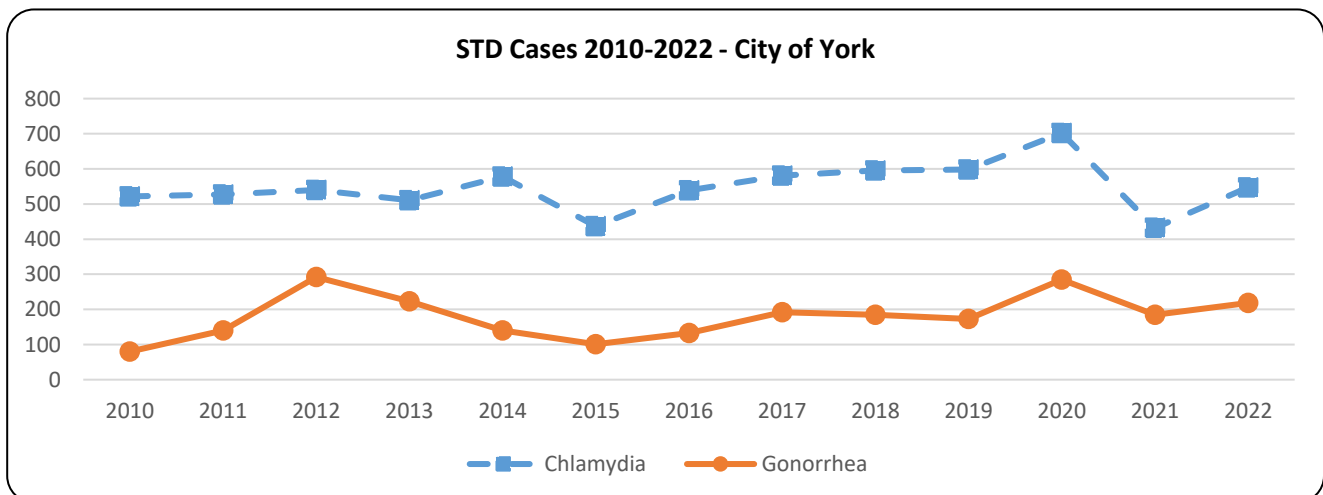
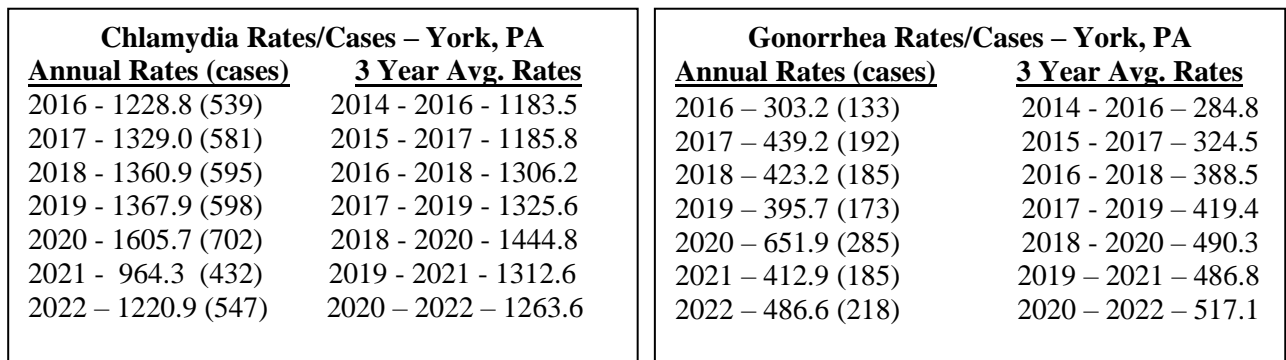
Tuberculosis

HP 2030 IID-17: Reduce Tuberculosis cases to 1.4 per 100,000 (Baseline: 2.8 new cases of confirmed TB per 100,000 population were reported in 2017). In 2022, there was one active Tuberculosis case reported for the city of York.



Sexually Transmitted Diseases

The Bureau received the following positive test results in 2022: 547 individuals for Chlamydia, 218 for Gonorrhea, and 15 for Syphilis. Throughout the pandemic, the Bureau provided appointments for individuals requesting STD/HIV testing and treated individuals as appropriate. The Bureau screened 325 individuals for STDs with a 26% positivity rate (85 positive results). The Bureau focuses on strategies targeting high-risk individuals and reducing disease spread.



HIV/AIDS

The health bureau conducted 223 HIV tests in 2022, resulting in 3 positive cases. A total of 15 positive cases were identified from all testing sources. Partner Services was initiated for 23 people in collaboration with providers who diagnose and treat individuals with HIV.

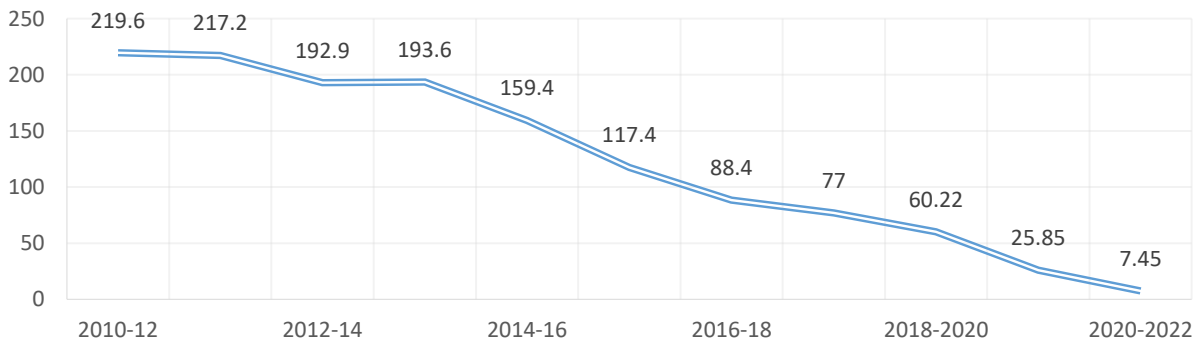
* New HIV Infection-York, PA	
<u>Annual Rates (cases)</u>	
2016 -	25.1 (11)
2017 -	43.5 (19)
2018 -	41.2 (18)
2019 -	13.7 (6)
2020 -	18.3 (8)
2021 -	35.7 (16)
2022 -	33.5 (15)

HP 2030 HIV-03: Reduce the number of new HIV diagnoses among persons aged 13 years and over.

Communicable Diseases

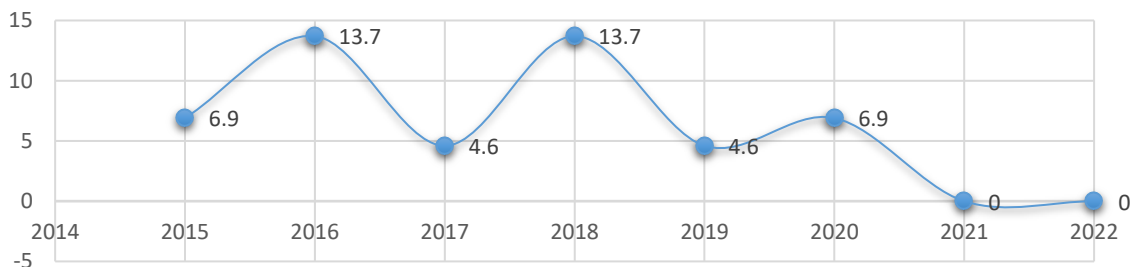
HP 2030 IID-12: Reduce the rate of acute Hepatitis C infections to 0.1 new cases per 100,000 (Baseline: 1.0 cases of acute hepatitis C per 100,000 population were reported in 2017).

Chronic Hepatitis C Reports – York, PA – 3-Year Averages
Rate per 100,000



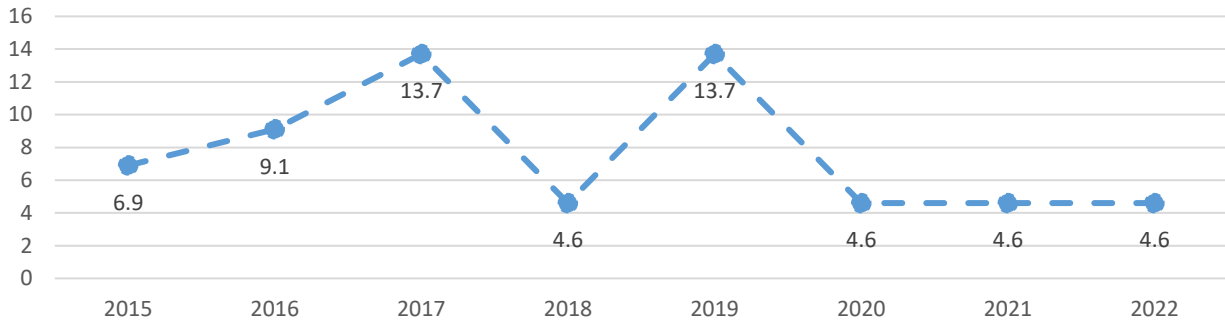
HP2030 FS-01: Reduce infections caused by *Campylobacter* to 10.9 per 100,000 (Baseline: 16.2 laboratory-diagnosed, domestically acquired *Campylobacter* infections per 100,000 population occurred on average annually in 2016-2018).

Campylobacter Infections – York, PA – 2015-2022
Rate per 100,000



HP2030 FS-04: Reduce infections caused by *Salmonella* to 11.5 per 100,000 (Baseline: 15.3 laboratory-diagnosed, domestically acquired *Salmonella* infections per 100,000 population occurred on average annually in 2016-2018).

Salmonella Infections – York, PA – 2015-2022
Rate per 100,000



Animal Control

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

The Animal Control Program involves the continued surveillance and appropriate epidemiological investigation of all animal bites reported to the Bureau of Health. Health Bureau staff provide work with victims of animal bites to ensure appropriate medical attention is received.

The Bureau of Health received 106 animal bites report in 2022.

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
2021 - 79	2019-2021 - 78
2022 - 106	2020 - 2022 - 90

Report for Year 2022 City of York, PA

Overall, the total number of reportable conditions in the City of York increased by 15% from 2021 to 2022. For the second year in a row, this can be attributed to the number of COVID-19 cases accounting 87% of all reportable conditions for 2022.

Sexually transmitted diseases (STD's) are the second most frequently reported group of communicable diseases totaling 780 cases, accounting for 10% of all cases in 2022. In comparison to 2021, there were increases in Chlamydia (by 115), Gonorrhea (by 33), and Syphilis (by 6). The Bureau aggressively targets individuals and groups at high risk and engaging in unsafe sexual behaviors. In 2022, there was an increase in access to testing and treatment for STD's.

As anticipated, with the decrease in mask wearing and increase in social gatherings, influenza cases increased in 2022, with 28 more reported cases than in 2021. However, significantly less than in 2020 when the total cases reported were 413. Respiratory Syncytial Virus (RSV) infections remained at 0 for 2022. RSV is the leading cause of acute lower respiratory infections in children and occasionally severe enough to require hospitalization. It is especially harsh on infants and children under two years of age and may cause symptomatic disease in adults, particularly the debilitated elderly.

Animal bites were up slightly, with an increase of 29 over 2021 (108 vs 79). Hepatitis C case reports increased from 3 in 2021 to 6 in 2022. There were 11 Hepatitis B case reports for 2022, an increase from 4 in 2021. Hepatitis A also had an increase, 3 for 2022 and 1 for 2021.

There were 15 new cases of HIV infection reported in 2022, 1 less than in 2021. Bureau staff aggressively provide partner services to test partners of infected individuals to get them into medical treatment as early as possible.

Reportable Conditions City of York, PA Summary Report 2021-2022		
	2021	2022
Reported Cases		
Animal Bites	79	106
Campylobacteriosis	0	0
Chlamydia	432	547
COVID-19	5777	6576
Giardiasis	1	1
Gonorrhea	185	218
H. Influenzae	0	0
Hepatitis A	1	3
Hepatitis B	4	11
Hepatitis C	3	6
Histoplasmosis	0	1
HIV Infection	16	15
Influenza Type A	10	11
Influenza Type B	1	28
Influenza not specified	0	0
Legionnaire's Disease	1	0
Listeriosis	0	0
Lyme Disease	12	9
Malaria	0	0
Meningitis - Bacterial	0	1
Meningitis - Fungal	0	0
Meningitis - Viral	0	1
Mumps	0	0
N. Meningitis Infection	0	0
Pertussis	0	0
RSV	0	0
Salmonella	2	2
Shigellosis	0	0
Streptococcal Group A	0	0
Syphilis (primary)	9	15
Syphilis (secondary)	4	7
Syphilis (latent)	21	38
Toxoplasmosis	1	1
Tuberculosis – Active	0	1
Tuberculosis – Latent	33	3
Varicella	1	0
West Nile Virus	0	0
Zika	0	0
Total Case Reports	6593	7601

No cases of bacterial and parasitic infections were reported in 2022. Lyme Disease cases decreased from 12 in 2021 to 9 in 2022. 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: 0 cases of Varicella, 1 case of Bacterial meningitis and 0 West Nile Virus.

Finally, there was 1 report of active tuberculosis in 2022 and 3 people were reported with Latent TB infection, significantly lower than the 33 persons reported in 2021. 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.

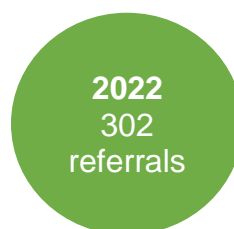
Immunization Program

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.

Maternal Child Health Services

Maternal, infant, and child health (MICH) is a leading determination of the overall health of the next generation and provides a lens into what complications may occur in the future of public health in general. According to the CDC, in the United States, 50,000 women annually suffer from severe pregnancy complications, while 700 women die each year of pregnancy related causes, with Black and American Indian/Alaskan Natives 2-3x more likely to die than other women. Women in the United States are more likely to die from childbirth than women living in other developed countries, as reported by Healthy People 2030. Additionally, women's health before, during, and after pregnancy has the potential for significant long-term impact on the health and wellness of children.

The City of York – Bureau of Health's Healthy Moms Healthy Babies (HMHB) home visitation program for pregnant and parenting women and their children under the age of 2 exists to promote and improve health in maternal and child outcomes, receiving 259 referrals for service in 2022. Using an evidence-informed nurse-led approach to care, the program uses the intersection of clinical expertise, research evidence and a patient's values/preferences to foster an environment of mutual understanding and respect with the intention of improving both short-term 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.



Cardiovascular Disease

HP 2030 HDS-02: Reduce Coronary Heart Disease death rate to 71.1 per 100,000 (Age-adjusted baseline: 90.9 coronary heart disease deaths per 100,000 population occurred in 2018).

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

In York, the age-adjusted stroke death rate is higher than the national rate of 39.5 stroke deaths per 100,000 population. The age-adjusted stroke death rate for York County was 42.6 per 100,000 between 2015-2019.

HP 2030 HDS-03: Reduce Stroke deaths to 33.4 per 100,000 (Age-adjusted baseline: 37.1 stroke deaths per 100,000 population occurred in 2018).

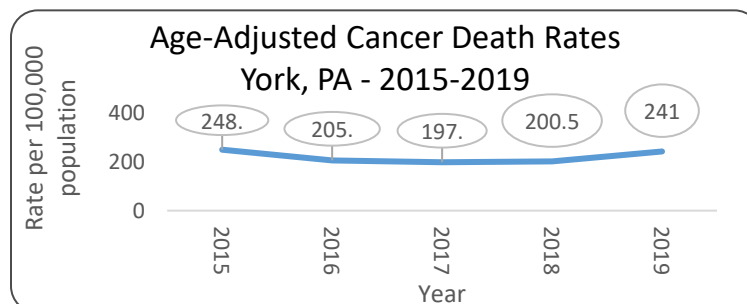
Stroke Age Adjusted Death Rates York, PA 2015-2019

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 2030 C-01: Reduce the overall cancer death rate to 122.7 per 100,000 (Age-adjusted baseline: 149.1 cancer deaths per 100,000 population occurred in 2018).

York County's age-adjusted stroke death rate was 161.3 per 100,000 between 2015-2019. The age-adjusted cancer deaths in York continue to be well above the HP 2030 goal.



HP 2030 C-02: Reduce lung cancer death rate to 25.1 per 100,000 (Age-adjusted baseline: 34.8 lung cancer deaths per 100,000 population occurred in 2018).

York statistics include cancer of the bronchus and lung

**City of York
Lung Cancer Death and Incidence Rates per 100,000 population**

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
2018	46.9 (21)	60.7 (27)			
2019	69.2 (31)	67.1 (30)			

HP 2030 C-04: Reduce the female breast cancer death rate to 15.3 per 100,000 (Age-adjusted baseline: 19.7 breast cancer deaths per 100,000 females occurred in 2018).

**City of York
Breast Cancer Death and Incidence Rates per 100,000 Population**

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
2018	11.2 (5)	66.7 (29)			
2019	6.7 (3)	72 (32)			

HP 2030 C-06: Reduce the colorectal cancer rate to 8.9 deaths per 100,000 (Age-adjusted baseline: 13.4 colorectal cancer deaths per 100,000 population occurred in 2018).

**City of York
Colorectal Cancer Death and Incidence Rates per 100,000 Population**

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
2018	13.4 (6)	40.7 (18)			
2019	11.2 (5)	40.7 (18)			

Injury Prevention

Injury Report Card 2015-2019

HP 2030 Objective	National Baseline	Year	City of York
IVP-06: Reduce deaths from by motor vehicle crashes to 10.1 per 100,000.	11.2 (Age-adjusted baseline per 100,000 population occurred in 2018).	2015	17.2
		2016	22.3
		2017	18.7
		2018	9.7
		2019	5.3

Tobacco Control

HP 2030 RD-05: Reduce deaths from Chronic Obstructive Pulmonary Disease (COPD) in adults to 107.2 per 100,000 (Age-adjusted baseline: 110.0 COPD deaths per 100,000 adults aged 45 years and over occurred in 2018).

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 2030 MICH-10: Increase abstinence from cigarette smoking among pregnant women to 95.7% (Baseline: 93.5 percent of females giving birth reported not smoking during pregnancy in 2018).

% 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%

Overdose Prevention

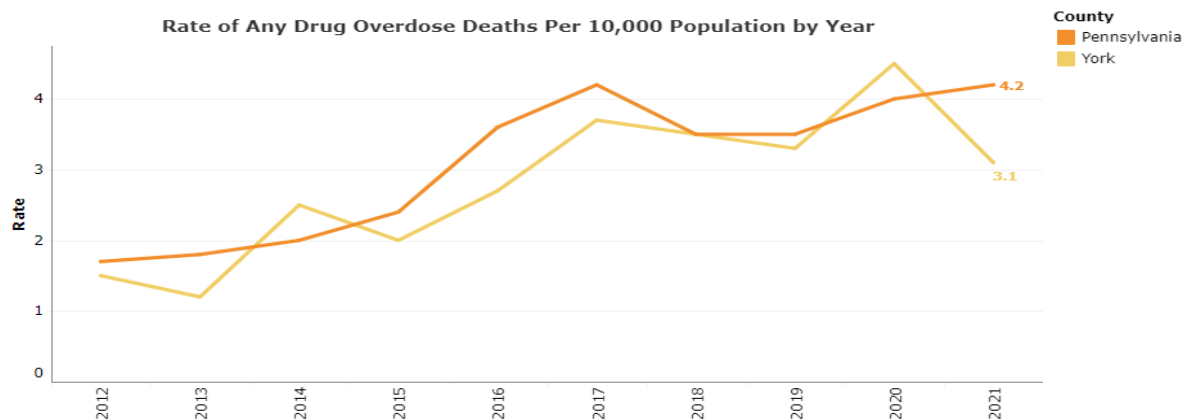
Opioid overdoses are the leading cause of injury deaths in the United States. Interventions to change health care providers' opioid prescribing behaviors and teach patients about the risks and benefits of prescription opioids can reduce opioid-related deaths.

HP 2030 SU-03: Reduce drug overdose deaths to 20.7 per 100,000 (Age-adjusted baseline: 20.7 drug overdose deaths per 100,000 population occurred in 2018).

HP 2030 IVP-20: Reduce overdose deaths involving opioids to 13.1 per 100,000 (Age-adjusted baseline: 14.6 deaths per 100,000 population were caused by an overdose involving any opioid in 2018).

Overdose Death Rate per 100k Population					
	2015	2016	2017	2018	2019
York County, PA	21.5	29.07	38.78	35.02	31.65
State (PA)	27.09	36.71	44.03	36.93	36.27
National	16.5	19.9	21.8	20.9	21.8

Source: Pennsylvania Coroner/Medical Examiner Data analysis at [OverdoseFreePA](#) based on National source [Centers for Disease Control and Prevention, Drug Overdose Deaths](#)



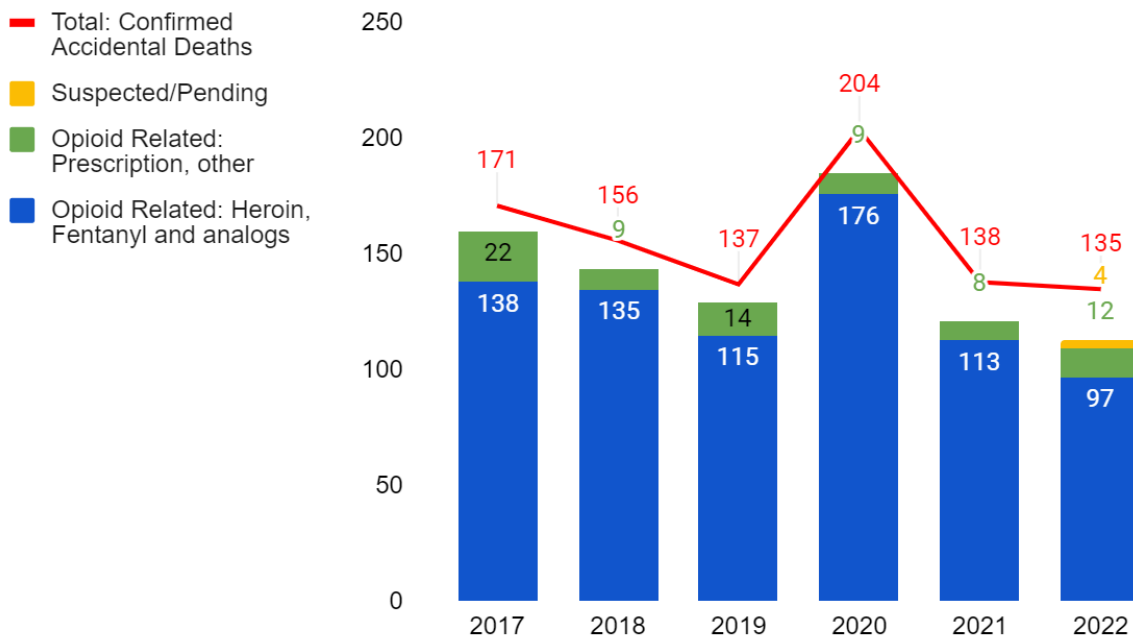
Source: Pennsylvania ODSMP – [Drug Surveillance Interactive Data Report \(OD – Time Trends\)](#)

The second leading type of traumatic deaths in York County continues to be alcohol/drug-related overdose deaths. Majority of accidental overdose deaths are opioid-related. Fentanyl was noted in 72% of the 129 confirmed overdose deaths in 2022. The last five months of 2022, York County began to see a new drug (new for us, but not for the Philadelphia area), Xylazine (used for sedation and pain relief in animals), in our decedent’s systems.

One of the other more recent areas of concern are alcohol-related deaths. There has been a 36% increase in acute alcohol-related deaths since 2021. This does not account for many deaths that are categorized as Natural when the person dies from chronic alcoholism. These have also been on the increase, however, a physician can certify these, so the Coroner’s Office is not always made aware of these deaths, and they do not count as an accidental death due to the chronic nature of the disease.

Total Confirmed Accidental Drug/Alcohol-Related Deaths in York County (2022)
135

Accidental Overdose Deaths In York County



Source: York County Coroner’s Office, as of 01/30/2023

Conclusions from Local/State Data

Healthy People 2030 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.

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.

Heart disease and Cancer continue to be the top two leading causes of death among York residents. 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.

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.

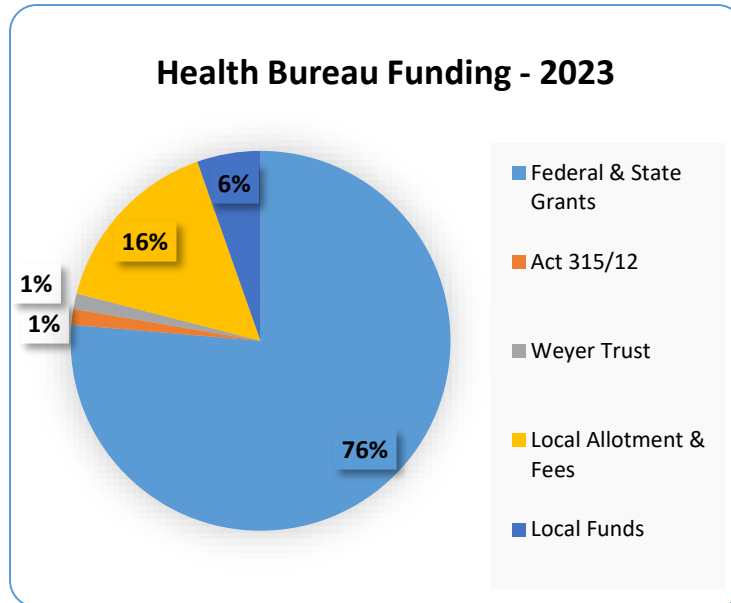
The health bureau staff meet yearly to develop the goals and objectives for the Annual Program Plan. Staff discuss program successes and identify issues and strategies that can be implemented to improve the public's health and apply the following criteria for setting annual goals and objectives:

- 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.

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 is funded by federal grants, state grants, local grants, Weyer Trust, and the city's General Fund. The ambulance contract with Community Life Team is paid through the Fire Department.

The Bureau has 22 full-time, 3 part-time, 7 contact tracers, and several vacant positions. The Bureau also supports part of the City EMA and the Health Inspectors positions. Our medical director (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 Alliances, Falls Free Coalition, York Adams Metropolitan Medical Response System (YAMMRS), South Central Emergency Preparedness Coalition, Healthy York Coalition, York Opioid Collaborative, Safe Kids York, Fresh Food Farms, Group Violence Intervention (GVI) and multiple other organizations working in our community.

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. 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.

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

Objective: To assure staff is trained and competent.

Activities:

- Assess employee's needs and abilities to perform duties as assigned.

Evaluation Method:

- Assessment has been conducted.
- Training needs identified and plan is in place to address gaps.

Performance Review 2022

Achieved / Ongoing

Objective: Assess current organizational structure to reflect bureau's public health functions.

- An organizational structure was assessed and discussions with administration to address the bureau needs have occurred. This is an ongoing process and will continue into 2023.

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. York City 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 completed training 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: Increase organizational emergency preparedness through plans, processes, and training of employees.

Objective 1: Assess existing plans, guidelines, and industry best practices for emergency operation centers to identify areas for improvement.

Activities:

- Evaluate current plans against industry best practices, standards, and guidelines.
- Implement an improvement plan.
- Examine after action reports.

Evaluation Method:

- Annually update and review the ESF #8 Annex plan.
- Update plans to include points of distribution/dispensing.

Objective 2: Assess current training of Bureau staff in emergency.

Activities:

- Collect and document current training information in emergency preparedness, NIMS, ICS, and EOC operations related to staff training.
- Develop training guidelines and progression matrix for EOC and emergency operations.
- Provide related training to staff in the form of either/or independent study, web-based, instructor-led training courses.
- Implement a training plan.

Evaluation Method:

- Completion of required trainings by at least 75% of bureau staff.
- Development of training matrix for EOC and emergency operations.
- Implementation of a training record database for all bureau staff.

Objective 3: Assess the capabilities of the current alert and notification system.

Activities:

- Develop operational implementation guidelines for alert/notification system.
- Conduct test/exercise with after action report improvement plan as needed.

Evaluation Method:

- Completion of operational guideline document.
- Completion of 2 successful tests.

Objective 4: Evaluate the current Bureau continuity of operations (COOP) plan.

Activities:

- Evaluate current plan and update as needed,

Evaluation Method:

- Continuity plan successfully updated.

Performance Review 2022

Achieved

Objective 1: Assessment of current bureau operational paradigms and provide management with operational alternatives to meet new response models.

- The COVID after action report was evaluated, input was provided by bureau staff. Several areas were identified for improvement.

Achieved

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

- A bureau wide survey was conducted to identify training needs.
- In September 2022, a tabletop exercise was conducted with bureau staff.
- Various trainings were held throughout the year at all staff meetings.
 - Just in time trainings were implemented.

Partially Achieved

Objective 3: Access and as necessary adjust/develop emergency and alert communication protocols for Bureau staff.

- Areas for improvement were identified but not developed in 2022.

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.

In 2022, the Bureau decided to invest in improving disease surveillance and data analyses through the acquisition of ArcGIS software. This new software has been utilized for COVID-19 data tracking and contact tracing, with the goal of incorporating additional communicable diseases. The Bureau continues to utilize CureMD to collect patient demographic and other information to improve data and guide strategic clinical 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 needing treatment, if YCBH is unable to provide treatment, the York State Health Center is notified, and information is provided to ensure all treatment necessary is provided.

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:

- Number of appropriate requests for PPD screening conducted.
- Number of educational sessions conducted.

Performance Review 2022

Achieved

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

- 100% of all appropriate requests for PPD screening were conducted and education was provided.
- Education was provided to all patients who were screened.
- The Bureau's medical director provided TB consultation and education to several primary care physicians and two homeless shelters.

Achieved

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

- 3 LTBI patients were identified; all were enrolled in treatment. One completed treatment with YCBH, 2 were transferred to the York State Health Center where they completed their treatment. 1 active TB patients was identified in 2022 who began treatment with YCHB and continued to completion with the York State Health Center.

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: Increase the awareness and education about congenital syphilis.

Objective 1: Work in partnership with local providers to test pregnant female patients for syphilis.

Activities:

- Develop a list of local providers that would be reached out to address increase in syphilis tests among pregnant females.

Evaluation Method:

- Number of local providers worked with.

Objective 2: Conduct partner services to locate, test, and treat partners of positive syphilis cases to prevent further transmission.

Activities:

- Staff will provide thorough education about disease transmission and prevention during clinical visits, highlighting the severity of congenital syphilis.

Evaluation Method:

- Number of tracked known partners through PA-NEDSS.

Objective 3: Provide effective treatment for patients and schedule follow-up testing to ensure treatment was adequate.

Activities:

- Staff will provide thorough education during clinical visits and schedule follow-up testing.

Evaluation Method:

- Number of completed follow-up appointments within 30 days for all newly diagnosed syphilis positive patients.

Program Goal 2: Provide a comprehensive approach to sexual wellness by implementing PrEP discussions during each STD/HIV screening visit.

Objective 1: Provide appropriate referrals for PrEP services using the PrEP locator.

Activities:

- Staff will provide an open discussion about PrEP's effectiveness and how to locate PrEP providers in the area.

Evaluation Method:

- Number of PrEP referrals

Program Goal 3: Provide STI/HIV risk reduction education to local schools to mitigate the spread of STIs and encourage healthier choices among young adults.

Objective 1: Provide educational outreach sessions and individual sessions.

Activities:

- Staff will provide fun and educational sessions using a curriculum outlined by Family Health Council.
- Individual sessions will be provided to allow for discrete questions and concerns to be addressed.

Evaluation Method:

- Number of educational outreach sessions held.
- Number of individual sessions held.

Performance Review 2022**Achieved**

Program Goal 1: Increase the capacity of patients receiving testing in our wellness clinic.

Objective 1: Increase marketing of wellness clinic in the community and during outreach efforts.

- In 2022, a total of 325 patients were screened. 85 of screened patients were diagnosed with a positive STD, yielding a 26% positivity rate.
 - In 2021, a total of 281 patients were screened.
- The clinic increased the number of multi-site testing conducted in 2022, allowing staff to educate more patients on risk reduction measures.

Objective 2: Encourage multi-site testing during clinical visits.

- 23 partner services were initiated in collaboration with providers who diagnose and treat individuals with HIV/STDs.
- 15 meetings/visits conducted at local OB/GYN offices, Family Health Planning Council, Family First Health, PADOH, York College of PA, Colonial House, Gaudenzia, White Deer Run, Urgent Care Centers, and Wellspan Community Health.

Achieved

Program Goal 2: Implement HIV Navigation Services into each patient's STD visit.

Objective 1: Provide education about disease transmission and address barriers to care.

- 75 high risk negative and 10 HIV positive patients were engaged into HIV navigation services.

Objective 2: Create action plans using SMART goals to engage clients into care that are HIV positive.

- 5 patients were fully engaged in developing SMART goals to implement safe sex practices and risk reduction methods. A challenge has been keeping patient fully engaged in these sessions. Staff has offered incentives for successful completion.

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: Utilize team to provide communicable disease mitigation efforts.

Activities:

- All reported communicable diseases in NEDSS are followed up within allowable time frames set by the state.

Evaluation Method:

- Percentage of all communicable disease notifications and follow ups conducted per protocol and within corresponding time frames identified.

Objective 2: Leverage utilization of ArcGIS for disease surveillance for COVID-19 and Lead.

Activities:

- Design and implement mapping features for Lead data.
- Update COVID-19 workflows and mapping features in the Esri environment to allow direct connection with NEDSS.

Evaluation Method:

- Implementation of NEDSS and Esri integration.
- Implementation of Lead surveillance map.

Performance Review 2022

Achieved

Objective 1: Utilize team to provide communicable disease mitigation efforts.

- All communicable disease reports were reviewed and followed up on. Reportable conditions were investigated by the clinical team within 24 hours.

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: Increase acceptance and administration of vaccine preventable diseases through outreach and community partners.

Activities:

- Address the fear of vaccines through school presentations and education.
- Provide education and support to providers and community partners in promoting vaccination of children.
- Provide education through in-services to school nurses, school administrators, daycare, and other organizations who work with children.

Evaluation Method:

- Conduct a minimum of five presentations.
- Hold a minimum of 2 in-services.
- Increase number of administered vaccines by 12% (baseline: 2022 total vaccines administered = 858).

Objective 2: Increase awareness of all vaccine preventable diseases.

Activities:

- Participate in monthly vaccine preventable observations (NIAM, NIIAM, etc.)
- Utilize social media platforms to dispel myths and beliefs related to vaccine preventable diseases.
- Update informational board highlighting health observances in clinic lobby.

Evaluation Method:

- Conduct a minimum of three vaccine preventable activities.
- Post a minimum of twelve posts on social media platforms; at least three of the posts should be during the national vaccine observation month.

Objective 3: Address vaccine inequities among minorities.

Activities:

- Obtain or create vaccine materials in Haitian Creole and Spanish.
- Provide vaccine information to communities and providers of care to Haitian Creole and Spanish communities.

Evaluation Method:

- Develop and disseminate a minimum of three vaccine informational materials in Haitian Creole and Spanish.

Performance Review 2022

Achieved

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

- Bureau staff participated in 16 educational/outreach events.
- Community outreach conducted at following locations: Martin Memorial Library, City-wide health expo, Revs baseball game, Trick or Treat City event, Narcan distribution & drug take back events.

Achieved

Objective 2: Follow and update recommendations for COVID-19 vaccines.

- Recommendations for COVID-19 vaccines were updated per CDC guidelines throughout the year.
 - Informational flyers and updates to the COVID-19 mySidewalk report were made.
 - Bureau director provided oversight and fielded vaccine related questions during the collaborative COVID vaccine clinics with Family First Health.

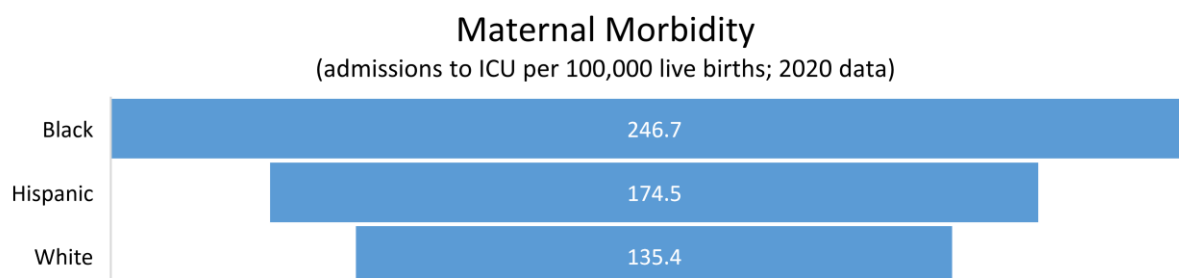
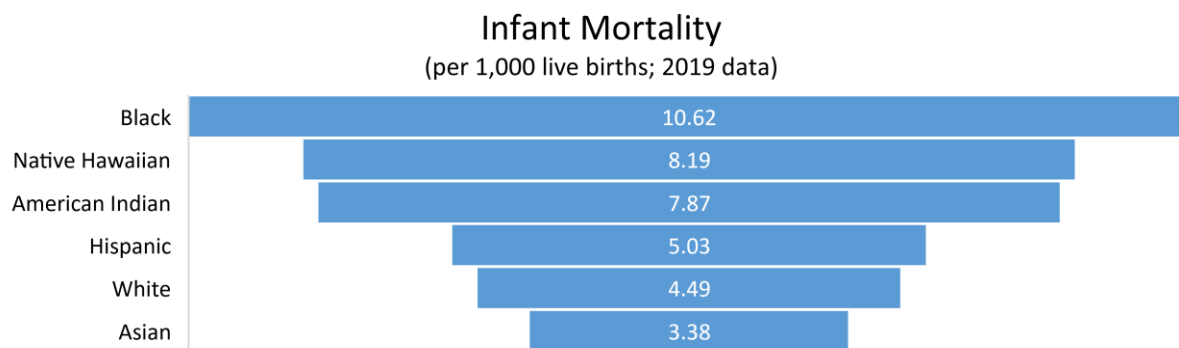
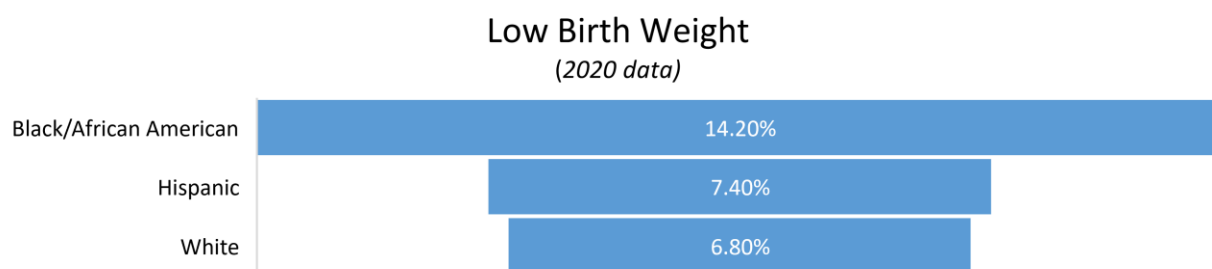
A total of **7,947 COVID-19 vaccines** were administered through the collaborative COVID vaccine clinic.
(Wellspan, Family First Health and City of York-Bureau of Health)

MATERNAL CHILD HEALTH SERVICES

Preterm births, babies born before 37 weeks' gestation, occurred at a rate of 1 in 10 infants in the United States in 2021 according to the CDC. Though this rate has remained consistent, the rates of preterm infants among African American women remain dramatically higher at 14.8% as compared to white (9.5%) or Hispanic (10.2%) women.

Premature births are linked to higher rates of disability and death among infants. Long-term concerns can include developmental delays, vision and/or hearing problems, respiratory concerns, feeding difficulties, and/or cerebral palsy. Additionally, low birth weight (<5.5# or <2500g) babies, who are also often preterm, are at increased risk of illness, infections, learning disabilities, and motor or social delays. Additionally, there is a familial and community emotional and financial toll.

According to the National Vital Statistics Research Report, Volume 70, national disparities continue to exist in birth outcomes:



Healthy Moms Healthy Babies (HMHB) addresses clinical needs and education, provides resource referrals, assesses for substance use, screens for 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 using evidence-informed practices, motivational interviewing, relationship building, cultural competency and sensitivity, accessible information and materials and clinical skills.

Births to mothers not receiving early prenatal care

Source: Pennsylvania Department of Health, Bureau of Health Statistics and Research 2017



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)

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
- Collect data on live births during the calendar year and compare preterm rates to regional, state, and national rates.

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

Activities:

- Complete a PHQ-2 screen at each routinely scheduled home visit and as able at remote check-ins.
- Complete a PHQ-9 screen at routinely scheduled home visits and as able at remote check-ins, if the PHQ-2 score is ≥ 4 .
- Provide mental health resources and/or referrals to patients as needed.

Evaluation Method:

- Validated depression screen completed on $\geq 65\%$ of active program participants

- Number of mental health referrals (including crisis referrals, referrals to counseling services, PCP referrals 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 CDC recommendations.

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 intake and visits.
- Discuss, educate, and model reading behaviors.
- Provide information related to the benefits of reading to children starting at a young age.

Evaluation Method:

- Number 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 concerns related to child's learning, development, or behavior (MICH-17).

Activities:

- Home visitors to ask parents/caregivers at each home visit if there are any concerns related to learning, development, or behavior.
- Complete milestone checklist at 2, 4, 6, 9, 12, 15, 18, and 24 months.
- Refer patients as necessary to additional services including, but not limited to: Early Intervention, Early Head Start, Leg Up Farms, Heart Start, LIU.

Evaluation Method:

- Percent of parents/caregivers asked about concerns related to a child's learning, development, or behavior.
- Number of referrals provided for additional services.

Performance Review 2022

Achieved

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

- Educational materials were reviewed for accuracy, accessibility, and actionability as per CDC guidelines.

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

- 10 educational materials were reviewed and found to meet the above qualifications with the additional benefit of 1:1 visit conversation and patient specific application.
- Of the materials reviewed, >90% were readily available in English and Spanish.
- Continue to develop means to offer materials in Haitian-Creole (third most common language of current patient population)

Achieved

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)

- Validated depression screens completed on >65% of active program participants.
- 26 mental health referrals were made for crisis, counseling, PCP and/or Intimate Partner Violence (IPV) support.
- Mental health education materials reviewed and met the three A's based on CDC recommendations
- 100% of home visitation staff completed Maternal Mental Health training through Postpartum Support International

Achieved

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

- Distributed >1,600 books during the 2022 calendar year.
- Education provided to pregnant/parenting woman from the intake phone contact through program completion and documented on the perinatal education checklist.

Achieved

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

- Home visitors ask parents/caregivers at each home visit if there are concerns related to learning, development, or behavior.

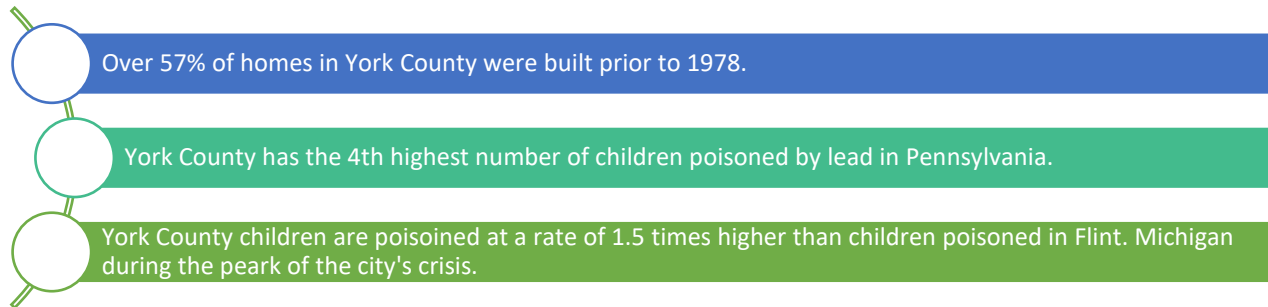
LEAD HAZARD RISK REDUCTION SERVICES

The Pennsylvania Department of Health and Human Services recommends all children with elevated blood lead levels of 3.5 ug/dl or greater receive an educational home visit and an Environmental Lead Risk Assessment Inspection. The City of York Bureau of Health receives referrals from physician offices for children with:

- two consecutive blood lead levels, three months apart, of 3.5 ug/dl,
- one venous blood level of 10 ug/dl or greater; or

- two 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. A \$25,000 non-competitive EPA grant was awarded to the bureau of health.



Source: York County YCPC Planning Commission

Program Goal: Increase awareness in early lead screening for children across York City.

Objective 1: Provide Healthy Lead Homes training.

Activities:

- Schedule and conduct a training session.

Evaluation Method:

- Number of participants and number of participants who pass the training.

Objective 2: Increase the number of York City children under the age of 6 screened for elevated blood lead levels.

Activities:

- Conduct 4, in office or virtual, educational sessions with pediatric offices.
- Participate in the Lead Free (PA) Promise Project coalition.
- Participate in educational sessions scheduled by the coalition.

Evaluation Method:

- Number of physician/staff educational sessions conducted.
- Attendance at one-half of the coalition's scheduled meetings.
- Attendance at one-half of the coalition's scheduled committee meetings.
- Number of coalition education sessions participated.

Objective 3: Design and develop an interactive surveillance Lead map.

Activities:

- Participate in design sessions with the ArcGIS team to discuss mapping features.
- Review current workflows to determine how to best incorporate into surveillance mapping capabilities.

Evaluation Method:

- Number of sessions participated to assist with design of Lead surveillance map.

Performance Review 2022**Achieved**

Objective 1: Increase the number of individuals trained and certified to be US EPA certified RRP (Repair, Renovation and Painting Rule) firms.

- 7 trainings with the US EPA RRP Rule (renovate, repair, and painting rule) were hosted, with a total of 72 participants. 70 out of the 72 passed the training.
 - Those that passed became certified renovators, which allows them to do work in pre-70's homes or child occupied facilities.
 - Landlords and property management companies were the main audience for this training.

Achieved

Objective 2: Increase the number of York City children under the age of 6 screened for elevated blood lead levels.

- Conducted 4 educational sessions with pediatric offices.
- Presented to parents at Lincoln Charter School.
- Attended and provided information at a local event held by Representative Kate Klunk.

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) prevent injuries, such as falls among older adults, motor vehicle accidents among older and young adults, and adverse childhood experiences. These activities include community outreach, improving the built environment, using policy to effect change, partnering with community stakeholders, and providing education and other evidence-based behavior change programs and interventions for community members of all ages.

Notable programs, projects and initiatives supported by the Safe and Healthy Communities Program include (1) a collaboration with York Fresh Food Farms Mobile Produce Market to provide nutritional education programs such as SNAP approved Heart Smarts program and the Taste! interactive cooking program, community garden/urban farming initiatives such as the installation of a new StoryWalk, and the Healthy Corner Store Initiative in collaboration with the Community Progress Council WIC Program; (2) Complete Streets, Safe Routes to School, the Walk Bike Bus Campaign in collaboration with Commuter Services of Pennsylvania, a streetscaping mural project in collaboration with Downtown Inc., and the Edgar Street Project that

provided bike lanes in collaboration with York City Public Works; (3) A Matter of Balance, a collaboration with the York City YMCA Of The Roses to provide falls prevention exercise programs such as Walk With Ease and Project Enhance, CarFit for mature drivers, Impact Teen Drivers, and a collaboration with Group Violence Intervention to provide community members with adverse childhood experiences education.

**Please note: Due to the termination of the Safe and Healthy Communities grant, the program goals discussed below are considered for the period of January 1st – September 30th, 2023.*

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 implementation of policy, systems, and environmental changes.

Activities:

- Sustain the Healthy Corner Store Initiative by providing education materials, technical assistance, and funding to new and existing stores.
- Collaborate with mobile farmers market to provide nutrition education.
- Support community garden and urban farming initiatives by providing technical assistance and funding.

Evaluation Methods:

- Number of corner stores.
- Number of nutrition education lessons held.
- Number of community gardens supported.

Objective 2: Improve active transportation and address physical activity and motor vehicle safety concerns through promotion of safe walking, biking, and driving.

Activities:

- Implement environmental and streetscaping changes that increase active transportation.
- Educate the community on safe walking, biking, and driving practices.

Evaluation Methods:

- Number of environmental and streetscaping activities completed/supported.
- Number of educational opportunities completed.

Objective 3: Decrease the fear of falling among older adults.

Activities:

- Participate in local falls prevention coalition, Falls Free Coalition of York County, and collaborate with members to promote A Matter of Balance and additional fall prevention programming and events.
- Collaborate with community partners to host falls prevention programs.

Evaluation Methods:

- Number of Falls Free Coalition meetings attended.
- Number of falls prevention programs held.

Objective 4: Reduce the prevalence and impact of Adverse Childhood Experiences (ACEs).

Activities:

- Collaborate with community partners to address ACEs in the York City community.
- Educate community partners on the impact of ACEs, risk factors and protective factors that promote resilience.

Evaluation Methods:

- Number of collaborative partnerships established.
- Number of community partners educated.

Performance Review 2022

Achieved

Objective 1: Increase access to healthy foods through implementation of policy, systems, and environmental changes.

- Two new corner stores were enrolled in the Healthy Corner Store Initiative, equating to a total of 5 corner store partners: Lee's, Green Food Market, 4 The Family, J&J Grocery and Deli, and Jackson Street Grocery and Deli.
 - Stores received technical assistance, education on sale of healthy options in their store, as well as funding for materials or supplies to support the sale of healthier options.
- Two new community gardens were established. Gardens have been funded under the SHC grant.
 - Community gardens are producing between 4,000 and 5,000 pounds of food per year. All food is distributed to local food banks, volunteers, and local families.

Achieved

Objective 2: Improve active transportation and address physical activity and motor vehicle safety concerns through promotion of safe walking, biking, and driving.

- Public Projects:
 - Edgar Street Project: partnered with Public Works to implement bike lanes to aid with the safety of pedestrians and bicyclists.
 - Streetscaping Project: partnered with Downtown Inc. to fund a pavement mural project. The project enhanced active transportation safety measures, provide art for the community, and allow for community engagement.
- Education:
 - Pedestrian safety lessons for the police summer camp kids were conducted at Parkway in the month of August. Participants learned about

- basic pedestrian safety skills which included the demonstration of safe crossing.
- Motor vehicle safety presentations were conducted in partnership with the Center for Traffic Safety. Target audience were 3rd and 10th grade classes at York Academy.
- YCBH partnered with Commuter Services of PA on the annual Walk Bike Bus campaign. The purpose of the campaign was to encourage York City residents and commuters to explore the city with emphasis on bike/pedestrian safety.
- Awards:
 - Under the SHC grant, York City was awarded and is now recognized as a Bronze Level Walk Friendly Community and Silver Level Bicycle Friendly Community.



Figure 1. This picture displays the ribbon cutting of the bike lanes, partially funded by Safe and Healthy Communities.

Achieved

Objective 3: Decrease the fear of falling and prevent falls among older adults.

- YCBH participated in four Falls Free Coalition meetings and supported classes for fall prevention.
 - Table depicted below displays the number of falls prevention related classes each community partner organization has completed during the first two quarters of the 2022-2023 fiscal year (July 2022 – December 2022).

Organization	Classes	Participants	Program(s)
City of York Bureau of Health	1	8	A Matter of Balance
York County Area Agency-Aging	7	84	A Matter of Balance, Healthy Steps for Older Adults, Healthy Steps in Motion
WellSpan	2	16	A Matter of Balance
YMCA	2	4	Enhance Fitness, Walk with Ease
Total	12	202	

Achieved

Objective 4: Reduce the prevalence and impact of Adverse Childhood Experiences (ACEs) by implementing policy, systems, and environmental changes.

- Partnership with the Group Violence Intervention allowed for community partnership with several organizations including, The Program Its About Change, York City Police, York City Probation, York College, and WellSpan.
- Training on ACEs, risk factors, and protective factors that promote resilience was provided to the Group Violence team as well as community partner members from the organizations listed above.
- ACEs screening will take place on GVI custom notification visits to educate and assess the youth as well as provide community resources.
- YCBH provided outreach for mental health education resources at various community events including National Night Out, Back to School nights, etc.

OVERDOSE & SUBSTANCE ABUSE PREVENTION

Despite progress, drug overdose deaths continue to impact communities across our nation. In September 2019, the Center for Disease Control and Prevention (CDC) began a multi-year cooperative funding agreement called Overdose Data to Action (OD2A), focusing on the complex and changing nature of the opioid overdose epidemic, highlighting the need for an interdisciplinary, comprehensive, and cohesive public health approach.

York City's 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. The program's initiatives continue to be impacted by the ongoing challenges presented by the 2019 Novel Coronavirus (COVID-19) global pandemic, which introduced new risks and a series of new challenges to the nation's opioid epidemic. As we move into a new year of funding, our project's activities continue to address these evolving challenges.

Note: Goals and objectives align with intergovernmental agreement through August 31, 2023, with renewals not applicable with this agreement.

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: By August 2023, increase collaborative efforts to build sustainable and effective multi-sector partnerships to prevent and respond to overdoses utilizing surveillance and prevention efforts to enhance data-driven multidisciplinary collaborative approaches (HP 2030 SU-03; HP 2030 IVP-20).

Activities:

- Participate in Public Health and Safety Team (PHAST) meetings to enhance cross-sector relationship-building, data use, and overdose prevention.
- Conduct an Overdose Fatality Review (OFR) Team to review individual drug overdose deaths.

Evaluation Methods:

- Number of PHAST meetings attended, per year.
- Number of Overdose Fatality Review (OFR) Team members/organizations.
- Number of OFRT meetings, per year.
- Number of overdose death reviews, per year.

Objective 2: By August 2023, provide community-wide education, awareness, and outreach efforts throughout York County by engaging stakeholder and other community partners to implement overdose prevention strategies (HP 2030 SU-03; HP 2030 IVP-20).

Activities:

- Collaborate with York Opioid Collaborative to expand dissemination of Safeguar(x)d kits.
- Conduct county-wide education, awareness, and outreach efforts with the assistance of subcontractor(s).

Evaluation Methods:

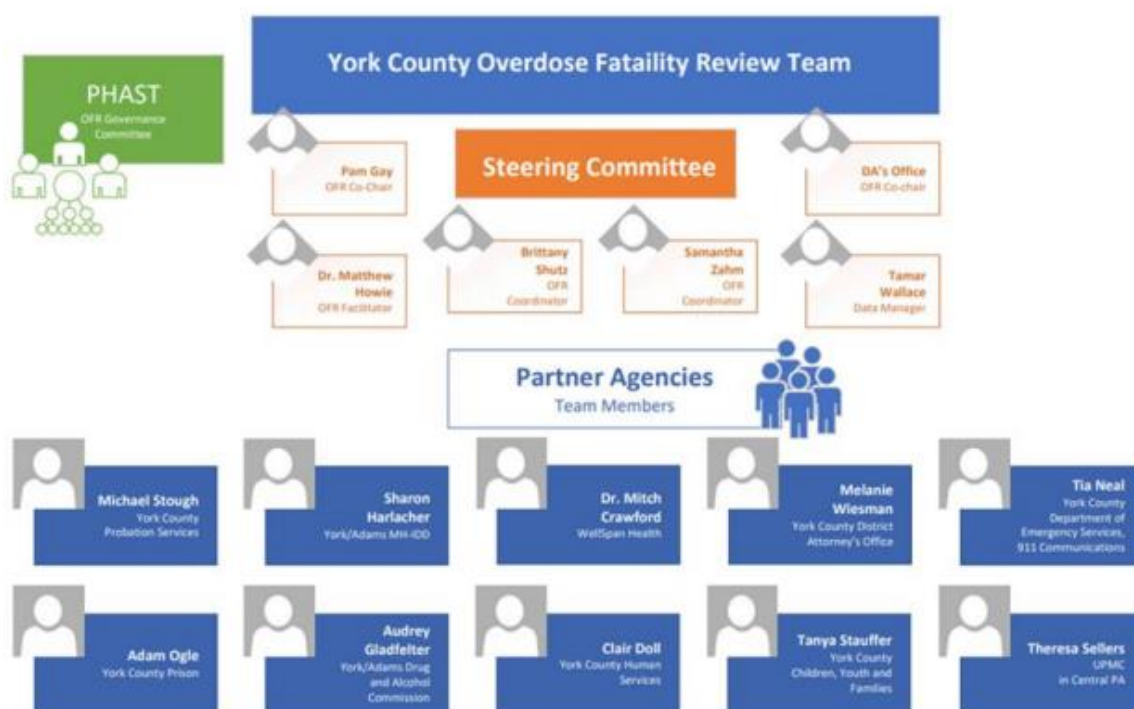
- Number of Safeguar(x)d kits disseminated, per year.
- Number of education, awareness, and outreach activities.
- Number of total people reached by education, awareness, and outreach activities.

Performance Review 2022

Achieved

Objective 1: Increase collaborative efforts to build sustainable and effective multi-sector partnerships to prevent and respond to overdoses utilizing surveillance and prevention efforts to enhance data-driven multidisciplinary collaborative approaches. (HP 2030 SU-03; HP 2030 IVP-20)

- Attended and participated in 11 of 12 Public Health and Safety Team (PHAST) meetings in 2022 to enhance cross-sector relationship-building, data use, and opioid overdose prevention.
- In 2022, there were 15 primary members on the York Overdose Fatality Review Team, representing 13 different organizations.



- Conducted 6 Overdose Fatality Review Team meetings in 2022.
- Reviewed 11 overdose deaths in 2022, 7 accidental and 4 suicide by drug.
- Recommendations generated by the case reviews are taken to the next PHAST meeting for support and implementation.
 - One new recommendation was identified in 2022 and the hospitality initiative workgroup was created to expand Naloxone access to hotels/motels throughout York County.
 - Other identified recommendations efforts are ongoing.

Achieved

Objective 2: Implement community-wide overdose prevention, opioid misuse, and substance abuse prevention public awareness campaigns and outreach strategies. (HP 2030 SU-03; HP 2030 IVP-20)

- In 2022, we had 5 community partner organizations actively engaged in capacity building for more effective and sustainable prevention efforts: York Opioid Collaborative, Latino Connection, All Youth Access, LLC, On Common Ground, and the York Harm Reduction Project
- Implemented two public awareness and outreach strategies through a community-wide approach fostering collaboration in 2022.
 - York contracted with All Youth Access and Latino Connection to implement a public awareness campaign for youth (timeline extended into 2023)
 - Recovery Month Public Awareness Campaign took place in September 2022 including 2 main events and 4 smaller events where resources were distributed, 2 online campaigns (#PostYourPurple and #Recovery4York) and partnered with CBS21 to launch a “takeover” day with Recovery Month content was broadcast online and on TV.
 - Recovery Month campaign in 2022 garnered on Facebook the following:
 - **68,425** total impressions with online Recovery Month posts
 - **23+** community posts using #Recovery4York and #PostYourPurple hashtags (not including any private posts)
 - **90+** Bubble Signs filled/shared/distributed.
 - Recovery Month campaign in 2022 with CBS21 total media impressions: **170,500+** total impressions September 5th-30th 2022 with online and TV advertising.

Achieved

Objective 3: Implement education to promote safe and effective prescribing behaviors and encourage safe prescribing guidelines throughout York County. (HP 2030 SU-03; HP 2030 IVP-20)

- Prescriber education pilot launched with Thomas Hart Family Medicine in December 2021 through August 2022 with 69 Safeguar(x)d kits, however after little reporting and ineffective implementation we pivoted approach to community education and dissemination of materials.
 - York has had difficulty finding prescribers/offices to participate in prescriber education activities. This activity has been impacted due to COVID-19 precautions occurring at healthcare provider offices and the

overall healthcare systems in the area. COVID-19 impacted the ability to hold in-person prescriber education sessions and delayed the development of the curriculum.

- NOTE: Prescribers are required to receive by Act 124 to receive opioid education and patient safety/risk management CMEs. There are several online modules they can do and healthcare systems also have courses internally they provide. This is why we saw little success with trying to add on an additional educational programs. The goal of Safeguard(x)d was less around providing tools to support the initiation, maintenance and discontinuation of controlled substances.
 - Collaboration with York Opioid Collaborative to disseminate Safeguard(x)d kits in 2022.
 - 224 medication lockbags distributed.
 - 130 small deterra deactivation pouches distributed.
 - 129 medium deterra deactivation pouches distributed.
 - 20 DisposeRx deactivation pouches distributed.

Environmental Health Services

Environmental Health Services

The Environmental Bureau consists of five (5) full-time and one (1) part-time position. 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 direct customers 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 Republic Services. The current contract runs through April 30, 2025, with (3) optional 1-year extensions, provided both parties agree to extend under the existing terms.

Major Accomplishments

- Collection of contract dumpsters and totes were performed year-round, primarily at City facilities and multi-unit residential buildings.
- Approximately, 15,000 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 collections (March to mid-December).
- One hundred thirty-seven (137) street containers throughout the City were emptied by the hauler 3 days each week. Many containers were 18 years or older in 2019 when the City began a replacement of at least 10% of the street containers, in the worst condition, each year. In 2019 (19), in 2020 (17), in 2021 (17) and in 2022 (14, due to continued rising metal costs) of the 137 of the existing street containers were replaced to date.
- There were 5,282 addresses scheduled for large-item collection this year.
- A total of 19,344.8 tons of refuse, 2,561.7 tons of recyclables and 1,610.2 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 curbside hauler. City staff vacuumed loose leaves from curb areas, late fall and transported the material to the City's compost site where litter and debris were removed to provide a cleaner product before hauling 53 dump truck

- loads of leaves at 10 tons each to Kinsley farm and 75 dump truck loads of brush at 10 tons each to H&H (all totaling 1280 tons).
- During the first 2 weeks of January 2022, 250 Christmas trees (average 30 pounds each; 3.75 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 (April - November; was closed December) from 10 a.m. to 2 p.m.
 - Due to the continued COVID measures in our school district, our 2nd grade 90-minute classroom presentations, “The Good, the Bad & The Ugly” about recycling and litter were postponed for the third year.
 - Having started in 1991, the City’s Adopt-A-Block program reached its 32nd year. Four clean up dates were advertised with very little participation reported, even with an option for groups to set their own dates.
 - Spring and Fall city-wide newsletters were mailed “Postal Patron” to customers, as required by Act 101, to advertise recycling requirements at least twice per year.
 - Staff sold 78 recycling bins, 475 recycling cans, 190-yard waste cans and 24 packs of yard waste bags to curbside customers. Due to security issues, midway through the year, access to the 2nd level of City Hall was closed to the public. Customers could call from the lobby phone or could make an appointment to purchase containers from Public Works staff.
 - Press Release 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 hot or cold temperatures and high winds among them) and for the start/end of seasonal collections of yard waste, fall leaves and Christmas trees.
 - The City’s Annual Commercial Recycling Report, Vendor Recycling Report, County Commercial Recycling Report were prepared and submitted.
 - The Annual 904 Recycling Performance Grant application was prepared and submitted to DEP for consideration of grant funding under Act 101. The State’s recycling grants help to offset costs related to recycling education and curbside recycling and yard waste containers.
 - A 902 Recycling Grant from DEP was finalized, disbursement requested, paid, and closed out.
 - The Annual YCSWA hauler licensing (both MSW and Recycling) and DEP hauler licensing applications were prepared and submitted.
 - The Public Works Secretary, Large Item Line Attendant and Environmental Services Supervisor handled 892 complaint calls related to curbside collections (trash, recycling, yard waste and large item).

WATER POLLUTION CONTROL PROGRAM

The Water Pollution Control Program is now part of the wastewater treatment plant that is owned by PA American Water. No reporting will be provided by the City moving forward.

FOOD SERVICE SANITATION

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. 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 1: 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.

Evaluation Method:

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

Performance Review 2022

Achieved

Objective 1: To verify that food services meet the standards and regulations for food sanitation.

- 378 food service inspections were conducted.
- 318 event inspections were conducted.

INSTITUTION SANITATION AND SAFETY

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.

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 2020 U.S. Census**

Land area	5.3 square miles	<u>Housing</u>	
Population	44,800	Total Housing Units	19,017
Population/square mile	8,452	Vacant Housing Units	2,055
		Occupied Housing Units	16,962
Male	21,877 (49.7%)	Owner occupied	7,904
Female	22,142 (50.3%)	Renter occupied	9,602

Population by Race and Hispanic**Origin**

One Race	38,779	86.6%
White	16,889	37.7%
Black/African American	11,606	25.9%
American Indian/Aleut.	293	0.7%
Asian	426	1.0%
Other	9,531	21.3%
Two or more races	6,021	13.4%
Hispanic/Latino Origin – Any Race	17,076	38.1%

Population by Age

<5	2,747
5-9	3,560
10-14	2,983
15-19	3,683
20-29	7,390
30-39	6,212
40-49	5,353
50-59	5,159
60-69	4,033
70+	2,899

Technical Notes and Comments:

The above data is from the 2020 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.

2020 Census
York – 44,800
York County – 456,438
Pennsylvania – 13,002,700

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