



City of York Bureau of Health

101 S George St. York, PA 17401

PA Act 315/12 Annual Grant Application

2024 Program Plan

2023 Performance Report

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Pennsylvania Department of Health

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INTRODUCTION

Overview

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 well-being 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 near the east coast metroplex areas of Baltimore, Washington D.C., Philadelphia, and New York City, York sits strategically astride the east coast's two major east-west and north-south vehicle corridors. 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 Economic and Community 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. Specifically, York has experienced a significant influx of Haitian-born immigrants. This has expanded the need for increased resources to help improve some of the barriers this population may face across all organizations and providers in the city and county.

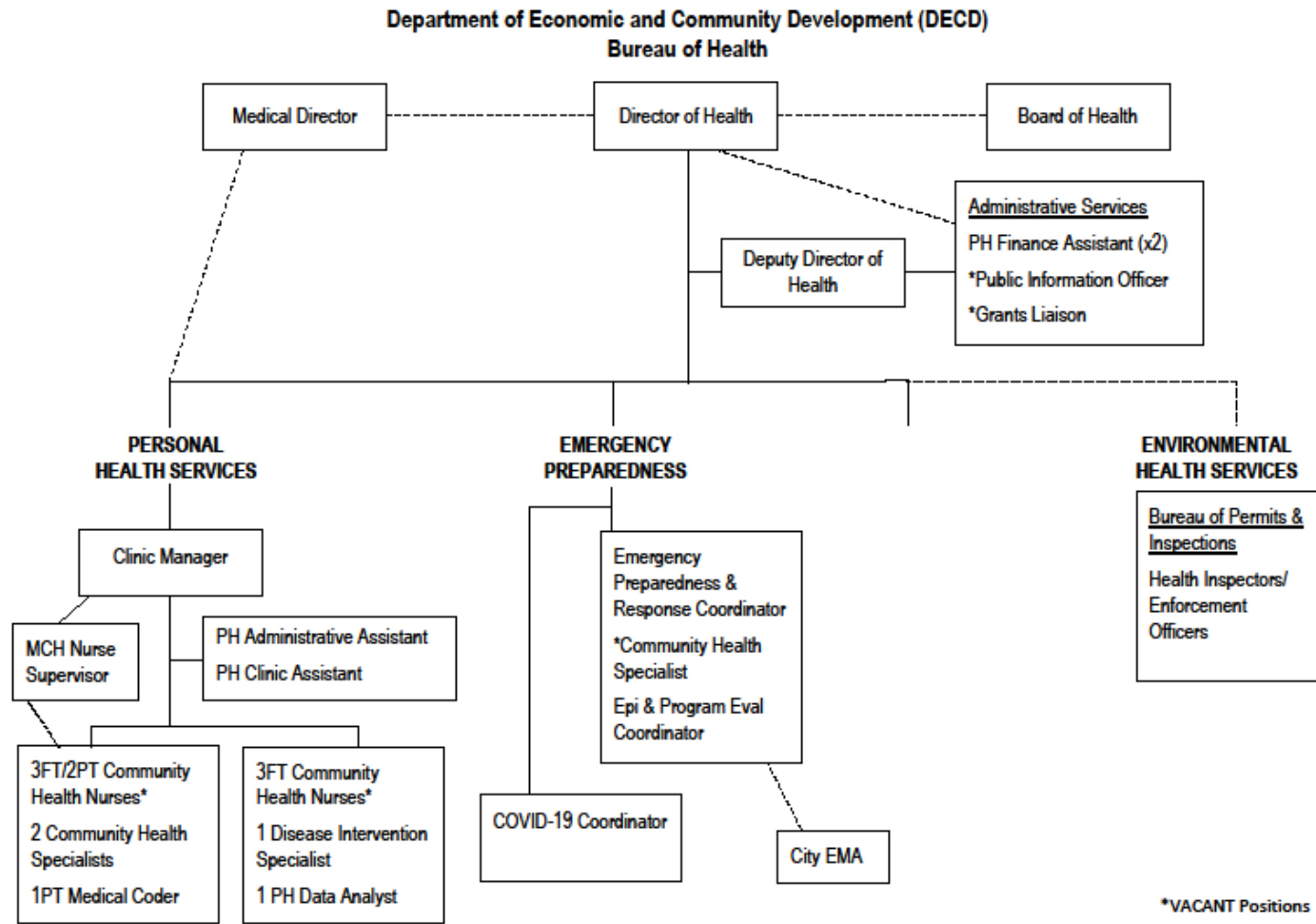
York has many public health problems, just like other urban areas in the state and nation. Poverty and unemployment/underemployment are serious issues in York. Unemployment in York is consistently higher than in the rest of York County and is like other urban areas of Pennsylvania and the nation. The 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 to increase the health and well-being of city residents. Bureau staff are 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 impact of COVID-19. Exacerbations of pre-existing disparities, emerging public health threats, and public health staff, are just a few examples.

There have been no changes to our executive leadership or the programs and services we deliver to the community. Some measures have changed and can be seen in each of the program plans.

For additional data, see our health data dashboard here: [York Public Health Dashboard](#)

ORGANIZATIONAL CHART



*VACANT Positions

REV. March 2024

Organizational Chart

Pennsylvania Regulations require that the Health Department’s application contain organizational chart. 15 Pa. Code § 15.4(a)(2).

PROGRAM PLANS AND PERFORMANCE MEASURES

ADMINISTRATIVE & SUPPORT SERVICES – 2024 PROGRAM PLAN AND 2023 PERFORMANCE MEASURES

EMERGENCY PREPAREDNESS

Objectives	Measures	Results	Notes
Assess existing plans, guidelines, and industry best practices for emergency operation centers to identify areas for improvement.	<ul style="list-style-type: none"> Annually update and review the ESF #8 Annex plan. Update plans to include points of distribution/dispensing. 	<ul style="list-style-type: none"> ESF #8 Annex plan completed. Ongoing efforts to update plans of distribution/dispensing. 	<p>Objective change Create plans to provide guidance and resources for city emergency response.</p> <p>Measure change Create a coordinated response structure for existing city emergency and health bureau plans.</p>
Assess current training of Bureau staff in emergency preparedness.	<ul style="list-style-type: none"> Completion of required training by at least 75% of bureau staff. Development of a training matrix for EOC and emergency operations. Implementation of a training record database for all bureau staff. 	<ul style="list-style-type: none"> Completed EOC training materials completed. Completed. 	<p>Measure change Development of training matrix for emergency operations.</p>
Assess the capabilities of the current alert and notification system.	<ul style="list-style-type: none"> Completion of operational guideline document. Completion of 2 successful tests. 	<ul style="list-style-type: none"> Achieved. Achieved 2 tests completed. 	
Evaluate the current Bureau continuity of operations (COOP) plan.	<ul style="list-style-type: none"> Continuity plan successfully updated. 	<ul style="list-style-type: none"> Achieved. 	<p>Objective change Will not be an objective for 2024.</p>

PERSONAL HEALTH – 2024 PROGRAM PLAN AND 2023 PERFORMANCE MEASURES SERVICES

TUBERCULOSIS

Objectives	Measures	Results	Notes
Provide education and PPD screenings for patients and providers as appropriate (1-G3).	<ul style="list-style-type: none"> • Number of appropriate requests for PPD screening conducted. • Number of educational sessions conducted. 	<ul style="list-style-type: none"> • Due to the shift from PPD to screenings IGRA's have been conducted through external providers. 	<p>Objective change Provide education and screenings for patients and providers as appropriate (1-G3).</p> <p>Measure change Number of education and screenings conducted.</p>
Provide Video Direct Observational Therapy (VDOT) as a treatment option.	<ul style="list-style-type: none"> • All patients given the option for VDOT are accommodated. 	<ul style="list-style-type: none"> • Eligible VDOT patients were provided with appropriate support and software to receive DOT. 	

SEXUALLY TRANSMITTED DISEASES, HIV AND AIDS

Objectives	Measures	Results	Notes
Work in partnership with local providers to test pregnant female patients for syphilis.	<ul style="list-style-type: none"> • Number of local providers worked with. 	<ul style="list-style-type: none"> • Achieved. 	
Conduct partner services to locate, test, and treat partners of positive syphilis cases to prevent further transmission.	<ul style="list-style-type: none"> • Number of tracked known partners through PA-NEDSS. 	<ul style="list-style-type: none"> • Achieved. 	<p>Objective change Will not continue into 2024.</p>
Provide effective treatment for patients and schedule follow-up testing to ensure treatment was adequate.	<ul style="list-style-type: none"> • Number of completed follow-up appointments within 30 days for all newly diagnosed syphilis positive patients. 	<ul style="list-style-type: none"> • Achieved. 	<p>Objective change Will not continue into 2024.</p>
Provide appropriate referrals for PrEP services using the PrEP locator.	<ul style="list-style-type: none"> • Number of PrEP referrals. 	<ul style="list-style-type: none"> • Provided 250 high-risk HIV negative patients with PrEP information. 	<p>Objective change Will not continue into 2024.</p>

Objectives	Measures	Results	Notes
Provide educational outreach sessions and individual sessions.	<ul style="list-style-type: none"> • Number of educational outreach sessions held. • Number of individual sessions held. 	<ul style="list-style-type: none"> • Partially Achieved. Conducted outreach events at York College and partnered with the Family First Health and William Penn Senior HS. Implementation began Fall of 2023. 	Objective change Will not continue into 2024.
Provide in-depth education about STIs.	<ul style="list-style-type: none"> • Document discussion and referral about PrEP and risk reduction discussions in PA-NEDSS. 		New Objective
Provide information about PREP services and how PrEP works to prevent HIV.	<ul style="list-style-type: none"> • Document discussion and referral about PrEP and risk reduction discussions in PA-NEDSS. 		New Objective
Increase knowledge and perception of personal vulnerability.	<ul style="list-style-type: none"> • 75% of participants completed the program. 		New Objective
Develop positive attitudes toward safer sex, and build the skills and confidence needed to abstain successfully or to use safer sex practices.	<ul style="list-style-type: none"> • 75% of participants completing the program. 		New Objective

COMMUNICABLE DISEASES

Objectives	Measures	Results	Notes
Utilize team to provide communicable disease mitigation efforts.	<ul style="list-style-type: none"> • Percentage of all communicable disease notifications and follow-ups are conducted per protocol and within corresponding time frames. 	<ul style="list-style-type: none"> • Completed. 	Measure change All communicable disease notifications and follow-ups are conducted per protocol. Objective change Utilize disease surveillance to identify communicable disease and provide mitigation efforts.

Objectives	Measures	Results	Notes
Leverage utilization of ArcGIS for disease surveillance for COVID-19 and Lead.	<ul style="list-style-type: none"> ● Implementation of PA-NEDSS and Esri integration. ● Implementation of Lead surveillance map. 	<ul style="list-style-type: none"> ● Ongoing, Limited integration has been accomplished. ● Efforts are ongoing to accomplish implementation. 	<p>Objective change Leverage utilization of ArcGIS for communicable disease surveillance.</p>

IMMUNIZATION PROGRAM

Objectives	Measures	Results	Notes
Increase acceptance and administration of vaccine-preventable diseases through outreach and community partners.	<ul style="list-style-type: none"> ● Conduct a minimum of five presentations. ● Hold a minimum of 2 in-services. ● Increase the number of administered vaccines by 12% (baseline: 2022 total vaccines administered = 858). 	<ul style="list-style-type: none"> ● Achieved (16 presentations). ● Achieved (10 in-services). ● Increased the number of administered vaccines by 106% (1773 total vaccines administered). 	
Increase awareness of all vaccine-preventable diseases.	<ul style="list-style-type: none"> ● 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 	<ul style="list-style-type: none"> ● Achieved (12 activities completed). ● Achieved. 	
Address vaccine inequities among minorities.	<ul style="list-style-type: none"> ● Develop and disseminate a minimum of three vaccine informational materials in Haitian Creole and Spanish. 	<ul style="list-style-type: none"> ● Achieved. 	

MATERNAL AND CHILD HEALTH SERVICES

Objectives	Measures	Results	Notes
<p>Reduce total preterm births (MICH-07; HC/HIT-R01).</p>	<ul style="list-style-type: none"> • 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. 	<ul style="list-style-type: none"> • Evaluated 18 prenatal educational items focusing on prenatal wellness (100% available in English & Spanish). • National: 10.49% (2021). • PA 2018-2020: 9.7%. • Regional (York) 2018-2020: 12.9%. • Local (Healthy Moms Healthy Babies): 12.3%. 	
<p>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).</p>	<ul style="list-style-type: none"> • 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 the mental health educational materials currently provided to patients using the health literacy three A's based on CDC recommendations. 	<ul style="list-style-type: none"> • 100% of enrollees are provided information about mental health with $>95\%$ of home visit patients completing validated depression screens. • 40 mental health referrals. 17 mental health educational materials reviewed for being Accurate, Accessible, and Actionable (100% compliance). 	<p>Measure change Validated depression screen completed on $\geq 75\%$ of active program participants.</p>
<p>Increase the number of parents who read to their child under the age of 2 (EMC-02).</p>	<ul style="list-style-type: none"> • 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 through program completion, ideally at every visit. 	<ul style="list-style-type: none"> • > 1600 books distributed. • Literacy education provided to 100% of enrollees as part of intake; literacy education continues through duration of home visitation services at every visit as able. 	

Objectives	Measures	Results	Notes
Increase the number of patients/caregivers who are asked concerns related to child’s learning, development, or behavior (MICH-17).	<ul style="list-style-type: none"> • Percent of parents/caregivers asked about concerns related to a child’s learning, development, or behavior. • Number of referrals provided for additional services. 	<ul style="list-style-type: none"> • >98% of parents/caregivers receiving home visitation were asked about concerns noted. • Referrals for services to Early Intervention, Early Head Start, Leg Up Farms, and PCP. 	

LEAD HAZARD RISK REDUCTION SERVICES

Objectives	Measures	Results	Notes
Provide Healthy Lead Homes training.	<ul style="list-style-type: none"> • Number of participants and number of participants who pass the training. 	<ul style="list-style-type: none"> • Achieved on august 3rd 4th with 22 participants. 	<p>Objective Change No longer an objective.</p>
Increase the number of York City children under the age of 6 screened for elevated blood lead levels.	<ul style="list-style-type: none"> • 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. 	<ul style="list-style-type: none"> • 6 education sessions conducted (118 physicians and staff). • Attended 2 meetings. • Attended 8 committee meetings. 	<p>Measure change Number of coalition education sessions participated no longer a measure.</p>
Design and develop an interactive surveillance Lead map.	<ul style="list-style-type: none"> • Number of sessions participated to assist with design of Lead surveillance map. 	<ul style="list-style-type: none"> • Participated in a minimum of 30 meetings related to lead surveillance map creation. 	<p>Measure change Lead mapping for lead surveillance has been completed.</p>
Implementation of surveillance mapping program.	<ul style="list-style-type: none"> • Utilize the data from surveillance mapping to identify areas for education and outreach. 		<p>New objective</p>

OVERDOSE AND SUBSTANCE USE PREVENTION

Objectives	Measures	Results	Notes
<p>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).</p>	<ul style="list-style-type: none"> • 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. 	<ul style="list-style-type: none"> • 4 PHAST meeting attended. • 15 primary members on the York Overdose Fatality Review Team representing 13 different organizations. • 4 Overdose fatality review team meetings. Reviewed 12 overdose deaths, 8 accidental and 4 suicide by drug. 	<p>Objective change 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.</p> <p>Measure change Coordination of review and follow up relating to overdose fatality teamwork.</p> <p>Number of overdose death case reviews.</p> <p>Number of education, awareness, and outreach activities.</p> <p>Number of participants in education, awareness and outreach activities.</p>
<p>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).</p>	<ul style="list-style-type: none"> • Number of Safeguard(x)d kits disseminated per year. • Number of education, awareness, and outreach activities. • Number of total people reach by education, awareness, and outreach activities. 	<ul style="list-style-type: none"> • 241 Full Safeguard (x)d kits disseminated. • 75 education, awareness and outreach activities. 	<p>Objective change Will not continue in 2024.</p>

ENVIRONMENTAL HEALTH SERVICES – 2024 PROGRAM PLAN AND 2023 PERFORMANCE MEASURES

FOOD SERVICES SANITATION

Objectives	Measures	Results	Notes
To verify that food services meet the standards and regulations for food sanitation.	<ul style="list-style-type: none"> • Number of inspections of food service establishments conducted. • Number of complaints investigated. 	<ul style="list-style-type: none"> • 372 inspections conducted. • 39 complains investigated. 	

OTHER SERVICES – 2024 PROGRAM PLAN AND 2023 PERFORMANCE MEASURES

ATTACHMENTS

The department directory is included as an attachment.