Public Health

Ottawa County Department of Public Health

2018 ANNUAL REPORT

Homemade Quilts for Babies

How to Donate FRESH PRODUCE It's Easy!

Tragedy
Creates
Awareness and
GIVES HOPE

Types of TRAUMATIC Events Experts Say Affect Your

HEALTH



miOttawa.org/Health2018

VISION

Healthy People

MISSION

Working together to assure conditions that promote and protect health.

VALUES

Excellence Integrity Equity Administrative Health Officer Lisa Stefanovsky, M.Ed

Assistant Health Officer Donovan Thomas, MBA

Medical Director Paul Heidel, MD, MPH

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Communications Kristina Wieghmink, M.Ed

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Clinical Services Helen Tarleton, BA

> **Communicable Disease Control** www.miOttawa.org/DiseaseInfo

Disease Reporting www.miOttawa.org/DiseaseReporting

Health Insurance Enrollment www.miOttawa.org/HealthInsurance

Immunizations & Travel Clinic www.miOttawa.org/Immunize

Sexual Health Services www.miOttawa.org/SexualHealth

Community Services Sandra Lake, MPH

> Children's Special Health Care Services www.miOttawa.org/CSHCS

Hearing & Vision Screenings www.miOttawa.org/HearingVision

Maternal & Infant Health Program www.miOttawa.org/MIHP

Health Promotions Sandy Boyen, M.Ed

> **Nutrition & Wellness** www.miOttawa.org/Nutrition

www.miOttawa.org/Dental

Pathways to Better Health www.miOttawa.org/OPBH

Sexual Health Education www.miOttawa.org/SexEd

Substance Abuse Prevention www.miOttawa.org/SAP

Environmental Health Adeline Hambley, MBA, REHS

> ecoOttawa www.miOttawa.org/eco

Food Safety Program www.miOttawa.org/Food

On-site Services www.miOttawa.org/EH We look back at 2018 with pride but also with humility; knowing we have a long way to go to assure conditions that promote and protect health for all people. We forge into 2019 with a continued commitment to protecting the health of Ottawa County residents and the environment.

Letter from the HEALTH OFFICER



Did you know we are in a new era of public health practice? In 2016, the U.S. Department of Health and Human Services (HHS) Office of the Assistant Secretary for Health (OASH) launched an initiative to lay out the vision for this new model of public health called Public Health 3.0.

Public health's fascinating history has its early primary focus on combating communicable diseases and poor sanitation to the mid-20th-century expansion into providing clinical services. These services were developed to meet the needs of people without health care access. In 1978, Act 368 (the Michigan Public Health Code) was established and granted local

public health the powers and duties to endeavor to prevent disease, prolong life and promote public health. We carry this out by preventing and controlling diseases and environmental health hazards, along with providing programs and services that address our community's public health needs. The Public Health Code is strong—however, over time funding shifted to health care spending and investments in public health dwindled. This made it difficult for governmental public health to perform its mandates and address the increasing burden of chronic diseases, new global health threats, the social determinants of health and health equity. This has been a common scenario across the U.S. which led to the need for a new public health practice strategy—Public Health 3.0. The main themes include:

- **1. Strong leadership and workforce** to drive initiatives including those that address upstream social determinants of health
- 2. Strategic partnerships that are structured, cross-sector partnerships to foster shared funding, services, governance and collective action.
- 3. Data and metrics that are timely, reliable and locally relevant.
- **4. Flexible sustainable funding and foundational infrastructure** which is funding for public health that should be enhanced and include innovative funding models to support core infrastructure and community level work.
- **5.** Enhanced national accreditation standards to ensure every person is served by a health department that has met set standards for excellence.

In our annual report, you will see over the past year we continued to align our strategies with those of Public Health 3.0. Examples include strategic community partnerships, innovative approaches that focus on root causes and social determinant of health, award-winning leadership and workforce, and the collection of timely, reliable data and metrics. In addition, strategy setting with our state partners led to more progress towards Public Health 3.0. This included enhancements to Michigan's Public Health Accreditation Program and significant legislative advocacy that resulted in increased funding for several areas of local public health.

In Ottawa County, we are blessed with a visionary Board of Commissioners and County Administration who continue to invest and advocate for a strong Public Health Department, ensuring our population is healthy and safe. I express sincere appreciation to them and to each member of our staff for their continued commitment to protecting the health of Ottawa County residents and the environment. We look back at 2018 with pride but also with humility; knowing we have a long way to go to assure conditions that promote and protect health for all people.

Sincerely,

Lisa Stefanovsky, M.Ed Administrative Health Officer

The activities and programs of this department are brought to you by the members of the Ottawa County Board of Commissioners: Chair Greg DeJong | Vice-Chair Roger Bergman | Francisco Garcia | Joe Baumann | Doug Zylstra Allen Dannenberg | Randall Meppelink | Kyle Terpstra | Jim Holtvluwer | Philip Kuyers | Matthew Fenske

FEATURES

A big thank you to the Ottawa County Department of Public Health team and community members who contributed to this publication. Your stories speak volumes, touch lives and make a difference!









Under the Public Health Code Act 368 of 1978, a local health department shall continually and diligently endeavor to prevent disease, prolong life and promote the public health through organized programs including prevention and control of environmental health hazards; prevention and control of diseases; prevention and control of health problems of particularly vulnerable population groups; development of health care facilities and health services delivery systems; and regulation of health care facilities and health services delivery systems to the extent provided by law. The Ottawa County Department of Public Health (OCDPH) is required by state mandate to perform a variety of specific services. Provision of these services is reviewed through a state accreditation process. In addition to, and ideally within the mandated services, OCDPH builds programs and services around community and customer/client needs. These needs are defined through community research. The OCDPH uses a variety of collected information to guide program development. This includes the Behavioral Risk Factor Survey, Youth Assessment Survey, Community Health Needs Assessment and the ongoing collection of epidemiological surveillance data and information.

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hand made with love



Quilters make tummy time blankets for babies

By Julie Yoas

Quilters from the Grand Haven Lighthouse Quilt Guild donate beautiful, lovingly made pieces of art to the moms and babies of the Maternal and Infant Health Program (MIHP). Elizabeth Clark, a quilter who oversees the community outreach program, exclaimed to me she enjoys giving and helping families. When I visit a mother who is pregnant or just had her baby, bringing a handmade quilt to a new client can be a great icebreaker for me as a community health nurse. It's a gift that combines function, fun and bonding. Sometimes the quilt is the first thing someone has given to the mother that relates directly to her baby. A mom I'm working with now, who I also saw seven years ago with her first baby, was so excited to get another quilt with her newest baby. She told me her older daughter still uses the quilt I brought out all those years ago!

Often, on follow-up home visits to a family, the quilt will be out on the floor with the baby doing tummy time. Tummy Time is a healthy position for a baby when he or she is awake and should always be supervised. This time helps to strengthen the muscles in a baby's back, neck, arms and trunk. Tummy time can also decrease the potential for tightness in the neck, which can lead to abnormal head shape. It also builds a balance of strong muscles for skills such as rolling, crawling and sitting. Babies spend much time sleeping on their backs, so I encourage tummy time for when a baby is awake. It's also a great time to interact and have fun with your baby, especially for bonding time.

Our MIHP team members and I are so grateful for this talented group and their ongoing quilt donations to the program for many years!

Tips to Help Your Baby Sleep Safely

- 1. Place your baby on his or her back for all sleep times (naps and at night).
- Use a firm sleep surface, such as a mattress in a safety-approved crib with tight fitted sheets.
- 3. Use a sleeper outfit instead of a blanket to help ensure your baby's face does not get covered during sleep.
- Keep soft bedding such as blankets, pillows, bumper pads, wedges and soft toys out of baby's sleep area.
- 5. Have baby share your room, not your bed.



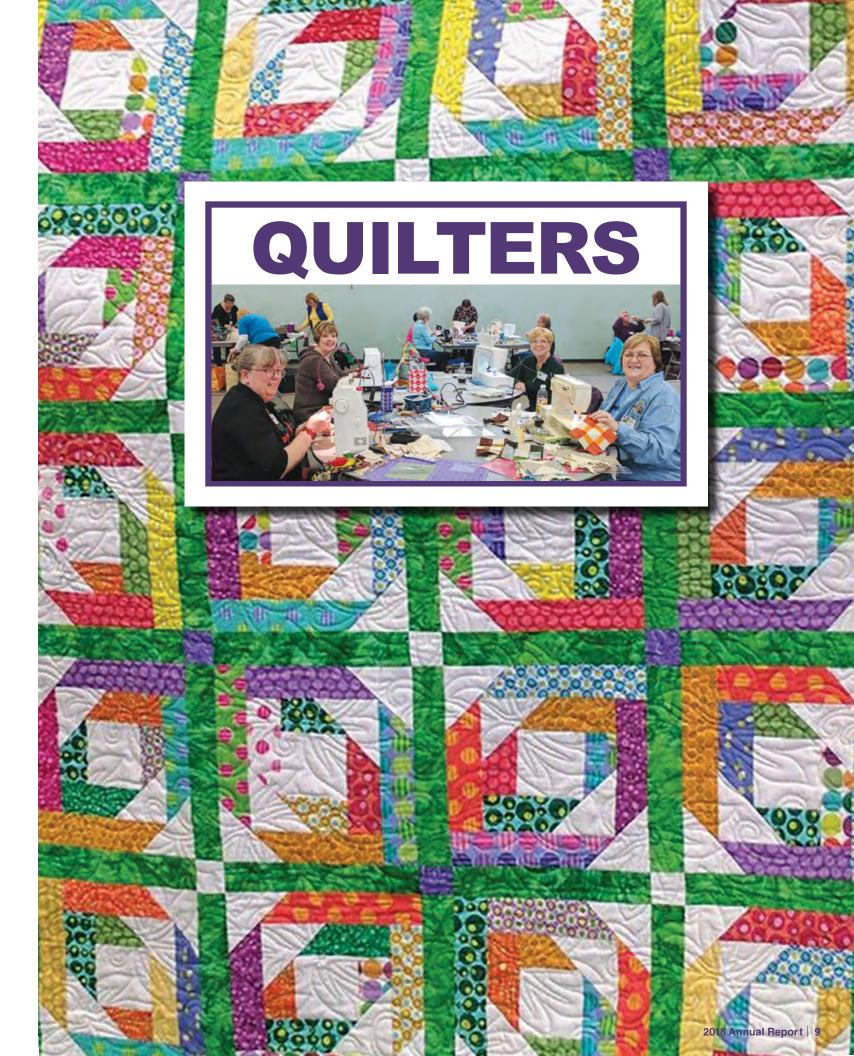


Pictured above: The MIHP team hosted a Thank You breakfast for members of the Grand Haven Lighthouse Quilt Guild. Top left: Charly Nienhuis, RN; Top right: Marissa Lesky, RN, Cynthia Hinton-Smeyers, Social Worker and Elizabeth Clark, Quilter; Bottom left: Molly Dewald, Social Worker; Bottom right: Becky Antaya, Dietitian.

MIHP team members not pictured: Sandra Lake, Community Services Manager; Dawn Dotson, MIHP Supervisor; Jael Delahuerta, Team Support; Devon Stuit, Medicaid Outreach; Julie Yoas, RN.

"When we went to the quilt guild breakfast I got to sit with some truly lovely ladies and sew some quilt squares with them. They take this service very seriously and plan and research the patterns. They then work hard to put color and texture into these works of art so babies have something beautiful to look at. I was so amazed to see how much time and energy goes into each quilt," said Devon.

Pictured on page 7: Baby Judah Lake (son of Sandra Lake).





Thank You

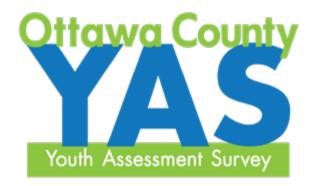
A special thank you to the school district superintendents, school principals, administrators, teachers, parents and students for participating in the 2017 Ottawa County Youth Assessment Survey (YAS). Planning and implementation of this study were coordinated by the YAS Committee, whose time and efforts were invaluable in making this project possible.

Funding Provided by

- Allendale Community Foundation
- Community Foundation of the Holland/Zeeland Area
- Coopersville Area Community Foundation
- Grand Haven Area Community Foundation
- Ottawa County
- Ottawa Substance Abuse Prevention Coalition

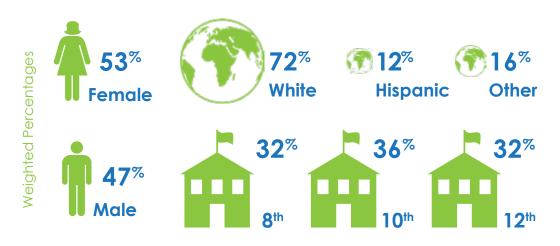
YAS Committee

- Leigh Moerdyke, Arbor Circle
- Liz DeLaLuz, Greater Ottawa County United Way
- Marcia Mansaray, Ottawa County Department of Public Health
- Sandra Boven, Ottawa County Department of Public Health
- Stacey Sills, Ottawa Area Intermediate School District
- Stephanie VanDerKooi, Lakeshore Regional Entity



What is the YAS?

- A locally developed teen survey since 2005.
- Conducted every two years at grades 8, 10 and 12 in participating Ottawa County schools.
- Monitors how behaviors increase, decrease or stay the same over time.
- Measures how many teens are engaged in a variety of risky and beneficial behaviors affecting their health and well-being.
- Shows the ages when teens may engage in risky behaviors for the first time.
- Indicates what issue areas affect males and females differently.
- Provides evidence-based information about what the biggest needs are (and aren't) among Ottawa County teens.



Complete report available at www.miOttawa.org/2017YAS.

Includes results tables, risk and protective factors, methods, limitations and frequency tables.

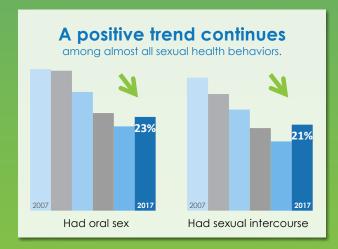
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SSUES TEEMS Face





94% of teens report participating in a community activity this year.





Teen girls are 2x more likely than boys to feel depressed and think, plan or act on taking their own life.

Depression
& Suicide

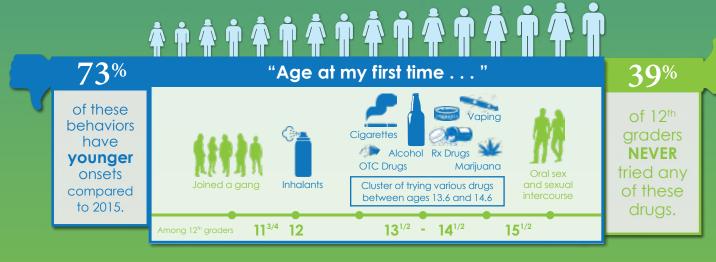
Seriously thought about suicide 19.4%

Made a plan to attempt 13.6%

Attempted suicide 8.0%

6.1%

2007 2009 2011 2013 2015 2017



1 in 4 Teens say Rx drugs are easy to get.

8th graders attended a party where alcohol was available.

1 in 4 Teens say Rx drugs are easy to get.

1 in 2 Teens have used 1 in 5 marijuana.

1 in 5 marijuana.

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Turning tragedy into creating awareness and giving to others

By Ashley Brown



eing Josh's sister and growing up together with him was an adventure. As the voungest of three, he had a tender heart, an infectious smile and if he was around, you were guaranteed to laugh yourself to tears. As kids, we enjoyed time together at Big Star Lake in the Manistee National Forest, Sandy Pines in Dorr, go-karting and time in the Upper Peninsula exploring and just being kids. After graduating from Jenison High School in 2008, Josh attended Careerline Tech Center in Holland for Electrical Certification. He was a whiz at all things having to do with wiring, and I have him to thank for many electrical projects throughout the years. During the recession, the company he worked for closed and he started framing houses. He loved his job, was a dedicated worker and he hoped to go back to college and someday own a company of his own. Josh also was a loving dad to his son, Joshua, and daughter, Makenzie.

Most people didn't know about Josh's daily struggle to be that tender-hearted guy with the infectious smile. He battled mental illness; and the depression, anxiety, fear and anger that goes with it. He lived with a fear that was even greater than death. He feared life itself and what comes next—the next day, the next fight or the next impulse that might just send him spiraling out of control. He worked hard to find the right physicians, therapists and medications to live a balanced life. But no matter how much Josh tried, and no matter how hard his family worked to get him the help he needed, it wasn't enough. At just 28, Josh was left with the temptation to simply opt-out. Mental illness won, and he died by suicide in 2017. I will never forget the call letting me know that my brother had lost his battle here on earth. What I came to realize was the opportunity that his life brings to those who still suffer from mental illness—a chance to create awareness and give to others (read more below).

We have a choice about how we remember our loved ones. I will always choose to remember my brother who had a tender heart. I remember him as the proud father who loved to dote on his kids as they fished, enjoyed bonfires, swam and hunted together. I will remember his smile the day he took Makenzie to the circus for the first time and the day his son Joshua was born. I will tell his story in hopes that others who suffer will know they are not alone and they are loved. I pray for a time when we find better treatments for mental illness and our society finds more and better ways to support those who live with it.

"It gives me peace and comfort and helps us all heal to be able to say Josh brings hope to countless others."

Josh brings hope: Upon his death, Josh's family wanted desperately for something good to come of it. His sister Ashley is a manager at Gift of Life Michigan—the state's organ and tissue donor program. She knew the possibilities. "The first thing my mom asked me when I got there was, 'Can he be a donor?" Ashley said. "It was important for her to know that through Josh's tragic situation he could help someone else." Gift of Life's Medical Examiner Liaison, Stephanie Sommer, notes "The Ottawa County Department of Public Health's Medical Examiner Program referred Josh's death to Gift of Life Michigan, and the Jenison man was able to donate bone, heart valves, nerves, tendons, skin and more." In all, Josh helped up to 75 people heal, regain their mobility and live life without pain.

Pictured right: Josh Braat and his son Joshua Pictured left: Josh, his son and sister Ashley



Ottawa County Medical Examiner Program uses new system to help more donors

GIVE LIFE

In November 2017, the Ottawa County Department of Public Health's Medical Examiner Program began using the Medicolegal Death Investigation software. This cloud-based system enables medical examiners, investigators, administration specialists, law enforcement officers, first responders, funeral service professionals and Gift of Life Michigan to access and share real-time case information for non-hospital deaths. Donations are time sensitive, and this streamlined process automatically sends referral information to Gift of Life Michigan for potential tissue or eye donation. This helps ensure the decision of registered donors can be honored and families of those not registered will have the opportunity to make a decision on their loved one's behalf.

"Since using the new system, we've been able to significantly increase the number of referrals and help make a difference in other people's lives," said Sundy Vargas, administration specialist with the Ottawa County Medical Examiner Program.



The Ottawa County Medical Examiner Program investigates all sudden, unexpected and violent deaths in the county, along with most unwitnessed deaths which is mandated by the State of Michigan. The medical examiner is responsible for providing an accurate cause and manner of death for a deceased individual so their final chapter in life is documented properly on the death certificate.

Gift of Life Michigan is the state's only federally designated organ and tissue recovery program; providing all services necessary for organ donation to occur in Michigan. The non-profit organization works 24 hours a day all over the state as a liaison between donors, hospitals and transplant centers. Gift of Life was incorporated in 1971 by Michigan transplant surgeons to provide a network for sharing kidneys. Today, it recovers more than 900 organs every year for transplantation from 300 or more donors; saving hundreds of lives. Bone, skin and other tissue are also recovered; helping to significantly improve the lives of thousands of seriously injured and sick recipients. Gift of Life also works with Eversight to manage cornea and eye donation.

Tissue donation can improve up to 75 lives

Ribs and costal cartilage

Facial reconstruction (jaw, nose, ears) often related to trauma

Other bone

Creates pins and screws to promote healing and eliminate the need to remove hardware; also used for spinal fusion spacers, joint replacement and bone regeneration

Long bones

Limb salvage in cases of bone cancer (to avoid amputation) and repair of traumatic injuries

Tendons

Arthroscopic tendon and ligament repairs, especially in sports injuries

Eyes/corneas

Restoration of sight

Heart valves

Repairs congenital and acquired heart valve defects

Skin

For burn victims; breast reconstruction after mastectomy; abdominal wall repair after hernia surgery; bladder and uterine suspension surgery

Veins

For bypass surgery and kidney dialysis shunts

Nerves

Can protect a recipient's damaged nerve during healing, repair severed nerves and gap (connect) injured nerves



How can you help?

Commit now to giving life to others when you die. Register at golm.org/become-donor.

You may also be a living donor to save a life while you are still alive (not included in your donor registration). Learn more at golm.org.

"Donating one of my kidneys prevented my friend from being on dialysis for life and early death. Now he celebrates life," said Dawn Dotson, living donor.

To make a financial contribution to the Gift of Life Foundation go to GiftofLifeFoundationMl.org

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SMELLS OF TULIPS, COTTON CANDY & ELEPHANT EARS

> Every year, thousands of people gather to enjoy Holland's Tulip Time Festival.

> Among all the flourishing tulips is an array of festival food trucks, inspected and ready to serve your favorite treats!



"Side of fries, please!"

Licensing and health inspections help prevent foodborne illnesses



AMERICANS GET SICK EACH YEAR FROM EATING CONTAMINATED FOODS.

By Skylar Garrison

The Tulip Time Festival is one of the largest attractions in Ottawa County, celebrating the Dutch heritage since 1929. Each May, you can spot the beautiful array of tulips that paint downtown Holland with yellow, orange, red and pink. Shouts of laughter from carnival rides and sounds of music playing at the civic center fill the town. Dancers donned in traditional Dutch attire and wooden shoes perform in the streets and during the parades. You can also smell the elephant ears from a mile away and see the crowds bustling around to grab their favorite fried food from a nearby concession.

Licensed special transitory food units, otherwise known as concessions or food trucks, can travel anywhere in Michigan. However, when they go to the Tulip Time Festival they must submit an intent to operate form to the Ottawa County Department of Public Health before the event. This allows the department to know the location where any food truck is operating at any given time. The department also checks every unit to ensure they are safely operating. This helps decrease common food service violations and increase food safety for consumers to prevent sickness and spreading foodborne illnesses.

C Top Causes of Foodborne Illnesses

Food from Unsafe Source

- Non-licensed Establishment
- Home Prepared Food

Improper Holding Temperatures

- Cold Holding
- Hot Holding
- Thawing
- Cooling

Inadequate Cooking Temperatures

- Cooking
- Reheating

Contaminated Food Equipment

- Cutting Boards
- Utensils
- Other Food Contact Surfaces

Poor Personal Hygiene

- Unhealthy Employees
- Improper Hand Washing
- · Bare Hand Contact with Ready-to-eat Food

GOALS

- Increase food safety for consumers
- Decrease food service violations
- Have successful events

Top: Barbara Adams, the owner of Red Chili Pepper and eight other food trucks, said her biggest struggle with owning food trucks is scheduling workers for events. However, she posts several job ads and always gets enough temporary help by the time an event begins. Barbara's advice for anyone who wants to open a food truck is, "Be persistent and book as many events as possible when starting off. That way, you can become familiar with events that you want to continue working."

Middle: Polly Marinkovski, the owner of American European Food, parks her food truck directly in front of the Ferris wheel every year at the Tulip Time Festival. Polly got into the business thirtythree years ago when she came to the United States from Macedonia. She said owning a food truck allows her to work seasonally so she can travel on her downtime. "My least favorite part about owning a food truck is the set-up and teardown process, but the hard work is worth the satisfaction of serving the public," she declared.

Bottom: Bobby Green, the owner of Evergreen Concessions, has been in the food truck industry his entire life. His grandfather started the business more than fifty years ago. Bobby stated that most food truck owners typically go to the same events every year. "We park at the same spot at every event, so I've really gotten to know the people around me. It makes it fun." he said. His food truck operates only four months out of a year, so he spends his off-season charter fishing in Florida with the rest of his family.

"We inspect Tulip Time Festival food vendors to make sure they serve safe food and help prevent foodborne illnesses. Our goal is for attendees to enjoy the festivities and not get sick," said Rebekah Folkert, senior environmental health specialist.





OTTAWA COUNTY

Community Health **Needs Assessment**



STUDY PRODUCED THREE REPORTS:

Behavioral Risk Factor Survey www.miOttawa.org/2017BRFS

Community Health Needs www.miOttawa.org/2017CHNAFullReport

Maternal and Child Health Needs www.miOttawa.org/2017MCHNA

Additional reports and previous years www.miOttawa.org/HealthData

ADVISORY COUNCIL:

Community Mental Health of Ottawa County Community SPOKE Greater Ottawa County United Way Holland Hospital North Ottawa Community Hospital Ottawa County Department of Public Health Spectrum Health Zeeland Community Hospital

What is a **Community Health Needs Assessment?**

LOOK at the people's health of Ottawa County. **METHOD** to find key health problems and resources. **TOOL** to develop strategies to address health needs. **WAY** for community engagement and collaboration.

Adverse Childhood Experiences (ACEs) data were collected, indicating the number of ACEs impacts a person's health later in life. Questions about abuse and household challenges include:

- Emotional, physical and sexual abuse
- Intimate partner violence
- Household substance abuse
- Household mental illness
- Parental separation or divorce
- Incarcerated household member

53% of Ottawa County adults have at least 1 ACE

14[%] have 4 or more

Other new items

- Weight control and receiving advice
- Understanding medical information
- Adult suicidal thinking and attempts
- Chronic pain and use of prescription pain medication
- Use of electronic vapor products (adults and youth)
- A special report focused on maternal and child health

How are Ottawa County data collected?





Surveyed Under-served Adults



Care Professionals



with Policymakers

Secondary Data Sources (Federal, State & Local Reports)

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How **Healthy** is Ottawa County?





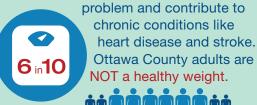
Key Findings

2017

Access to Care is a case of those who



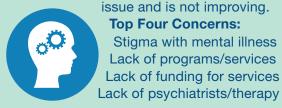
Obesity and overweight are a growing



Risk Behaviors remain an issue, such



Mental Health continues as a CRITICAL



Substance Abuse, particularly opioid



addiction, is an increasing problem and often comorbid with mental illness. **9** in **10** Overdose deaths involved an opioid in Ottawa County.

Chronic Disease rates are relatively

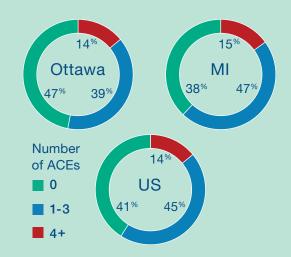
low compared to the state and nation. However, cancer and heart disease deaths are by far higher than other causes of death. In addition, Alzheimer's Disease

leads to death more often for Ottawa County residents.

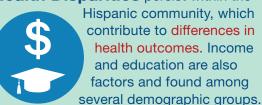
Negative Social Indicators affect a

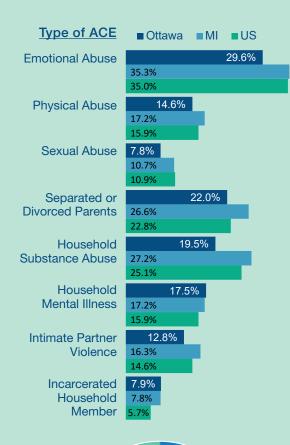
person's overall health and the health care climate of the community. Social factors that put our health at risk include the lack of healthy foods and affordable housing.

poverty of single mothers with children five years and younger, and adverse childhood experiences (ACEs). ACEs are traumatic events like abuse, neglect or family dysfunction. The number of ACEs impacts a person's health later in life. They increase the risk for suicide attempts, heavy drinking, smoking, obesity, anxiety and depression.



Health Disparities persist within the







Biopsychosocial Approach

The most appropriate and effective way to address health and health care issues is from a whole person approach.

COLLECTIVE VISION M

What do we do now?

Community members, organizations, schools, hospitals, businesses and funders must work together to develop and carry out the 2018 Community Health Improvement Plan (CHIP). Ottawa County created its first CHIP in 2015 found at www.miOttawa.org/2015CHIP. The 2017 data will guide the development of the 2018 CHIP for a healthier community.

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OTTAWA COUNTY

Community Health Improvement Plan



VISION

Healthy people living in healthy communities.

MISSION

Achieve positive health outcomes for Ottawa County residents by partnering to identify health issues, plan and implement strategic actions for change.

VALUES

Equity • Collaboration • Excellence • Best Practice

ADVISORY COUNCIL:

Community Mental Health of Ottawa County
Community SPOKE
Greater Ottawa County United Way
Holland Hospital
North Ottawa Community Hospital
Ottawa County Department of Public Health
Spectrum Health Zeeland Community Hospital

What is a Community Health Improvement Plan?

The Community Health Improvement Plan (CHIP) focuses on the greatest health needs in Ottawa County. Community members, including people from health care and human service agencies, identified three priority health areas based on data from the Ottawa County Community Health Needs Assessment or CHNA.

Access to Care · Mental Health · Healthy Behaviors

Why create a plan?

Public health challenges are too great for a person, organization or sector to solve alone. The CHIP is a guide for the community to work together and meet its health needs. The 2018 plan continues the work of the 2015 CHIP (www.miOttawa.org/2015CHIP) but takes a deeper look at root causes and refines the recommended community strategies.

A person's health is affected by so many areas in their life. We as a community must work together to address these factors to truly make a difference.

- Health Officer Lisa Stefanovsky

Click to hear an interview about the CHIP or go to www.miOttawa.org/2018CHIP to read the full report and see the progress since 2015.

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Healthy Behaviors

GOAL

Promote consistent healthy behavior messages and decrease barriers to healthy living.

OBJECTIVES

- 1. Decrease the percentage of adults who engage in no leisure-time physical activity.
- 2. Increase the percentage of adults who consume at least five servings of fruits and vegetables per day.
- 3. Increase the percentage of overweight or obese adults who receive advice from a health care professional about their weight.

RECOMMENDED STRATEGIES

- 1. Increase awareness about low-cost and free opportunities for physical activity within Ottawa County.
- 2. Support Ottawa Food efforts.
- 3. Implement an educational campaign about the importance of family meals.
- 4. Work with health care professionals to reduce the barriers that prevent them from providing weight-related advice to overweight and obese patients.
- 5. Develop a framework to promote the Ottawa County health improvement strategies, health communications and local resources that will help people achieve optimal health.

Mental Health

GOAL

Increase recognition and treatment of mental health conditions.

OBJECTIVES

- Increase the percentage of adults receiving treatment or medication for mental health conditions.
- 2. Decrease the percentage of adults and youth who have suicide ideation and attempts
- 3. Decrease the number of accidental deaths caused by an opioid-involved overdose.
- 4. Decrease the percentage of adults experiencing mild to severe psychological distress

RECOMMENDED STRATEGIES

- 1. Increase public awareness of existing mental health treatment models and services.
- 2. Increase community conversations about mental health including expansion around the county of the town hall meeting format.
- 3. Educate the community on Adverse Childhood Experiences (ACEs).

Access to Care

GOAL

Increase access to a patient-centered and community-integrated system of care.

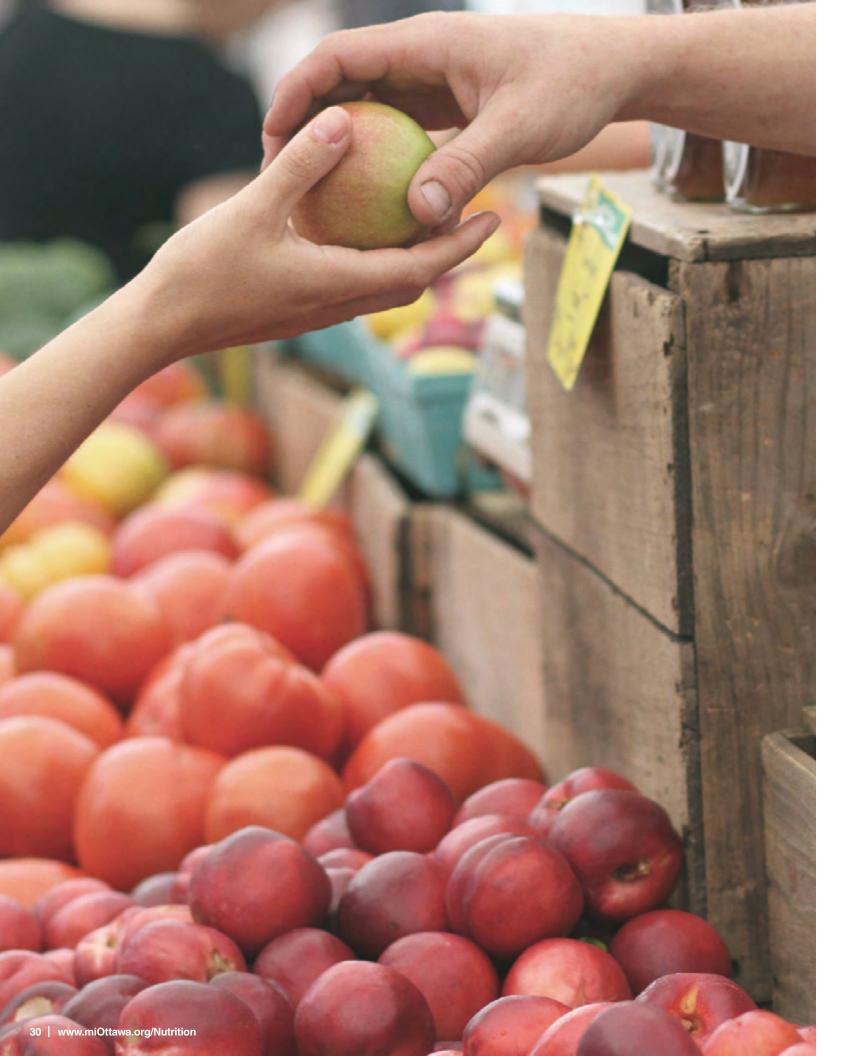
OBJECTIVES

- 1. Increase the percentage of adults who are confident navigating the health care system.
- 2. Decrease the percentage of adults who had trouble meeting their own or family's health care needs in the past year.

RECOMMENDED STRATEGIES

- 1. Expand the Ottawa Pathways to Better Health program to allow community health workers to serve a greater number of people. Learn more about the program at www.miOttawa.org/OPBH.
- 2. Expand care coordination in physician offices.

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FARMERS











By Skylar Garrison

O ttawa County is an agriculturally diverse county supporting more than 1,300 farms and 186,000 acres of farmland. An array of fresh fruits and vegetables fill the fields, yet so many people in the county do not eat enough of these healthy foods. According to the Ottawa Food 2018 Food Access Survey, only 2.5 percent of respondents (people who rely on food sources like pantries) eat five or more servings of fruits and vegetables per day. The top reason that prevents them from eating fruits and vegetables on a regular basis was "they are too expensive". This becomes a barrier for people who rely on food resources. Using this data, "Ottawa Food set out to raise awareness, support local farmers and help people gain access to produce," said Amy Sheele, health educator with the Ottawa County Department of Public Health.

Ottawa Food (formerly known as the Ottawa County Food Policy Council) is a collaboration of local agencies and people who work to make sure all Ottawa County residents have access to healthy, local and affordable food choices. Ottawa Food has members from different backgrounds; including local public health, food pantries, human service organizations, food security advocates, farmers, community members, MSU Extension, Feeding America West Michigan and many others. "With the help of agencies in the community, we've been able to bring fresh fruits and vegetables to people who may find it difficult to get access to these foods," indicated Lisa Uganski, health educator and Ottawa Food coordinator.

In 2018, Ottawa County residents said the most important food-related issue to address locally is the high cost of nutritious and healthy foods. As a response, Ottawa Food created a gleaning program at the Grand Haven Farmers Market to connect local farmers with people in need. Farmers at the market can donate their fruits and vegetables that did not sell by the end of the day to Love in Action of the Tri-Cities food pantries and Teen Challenge. This helps provide access to fresh healthy food for many who would otherwise go without.

To add to this success and continue creating environments where healthy food choices are affordable and accessible to all. Ottawa Food implemented a produce donation program at three farmers markets. Shoppers can grab a bag from the donation table, purchase produce to fill the bag and return the bag to the table as a donation. In 2018, the produce donated at the Grand Haven Farmers Market went to Four Pointes Center for Successful Aging. Donations from the Spring Lake Farm and Garden Market went to The People Center. And donations at the Eighth Street Farmers Market went to Community Action House, Hand2Hand, Harvest Stand Ministries and the Salvation Army of Holland. The gleaning program and the produce donation program help to reduce hunger and connect people in need with local healthy foods, while also supporting local growers.

LOCAL SOLUTIONS

to the cost of fresh fruits and vegetables



1,700|bs of produce were donated through the gleaning program and more than 1,300|bs through the produce donation program.





Jessie Riley with Four Pointes attends the Grand Haven Farmers Market to help with the produce donation

program. "Successful aging is rooted in healthy behavior, so it is important that older adults have access to fruits and vegetables," she stated.

Produce Donation Program Volunteers:

Community Action House Four Pointes Hand2Hand Harvest Stand Ministries Ottawa Food Salvation Army of Holland The People Center

Gleaning Program Participating Farms:

Diemer's Farm and Greenhouse Ham Family Farm Jobey's Greenhouse Krause / Dahlia Acres Farms Lakeside Orchards Michigan Pure Blueberries Visser Farms Zysk's Farm

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brood waste at schools leads to share tables

By Rebekah Folkert

chool cafeterias are a significant contributor to of food waste. The problem of food waste brought national attention when the United States Department of Agriculture (USDA) put into place new nutrition requirements and regulations for breakfast and lunch served in school cafeterias. Opponents of the new policies argue the requirements increase the amount of food children take and then discard, thus increasing food waste. Research indicates food waste initially increased, but now has decreased to levels that are similar to what they were pre-regulation. Regardless, schools continue to search for ways to reduce lunch waste in school cafeterias.

An estimated 30-40 percent of the food supply in the United States becomes food waste. This equals to about 245.4 million tons, costing the nation approximately 162 billion dollars in wasted food each year. Decreasing food waste could lead to lower food costs, improved environmental quality and improved food equity. Food waste can come by consumer shopping and eating habits, households preparing more food than consumed, food not being used before spoilage and food safety. In the United States, where food safety rules are more thorough than other countries, millions of pounds of food are thrown away each year because of food safety concerns. Food is often thrown away based on a "best by" or "use by date" that was arbitrarily set by manufacturers. This number is determined based on food quality, not food safety; resulting in school cafeterias and parents alike throwing away food at the expiration date believing it is no longer safe.

Research shows young children throw away a higher percentage of the food they take in school cafeterias. Given the millions of children in school, reducing food waste in school cafeterias could result in a sizable reduction of waste on a national level. Reducing food waste begins in the planning and distributing stages by making the portion size children receive smaller. A hot

lunch given to students should have age-appropriate portions to decrease the amount of food waste. Other interventions include teaching students how to take smaller portions and allowing students to decline foods they will not eat or redistributing unwanted food to places where it can be used, such as local food pantries or other areas in the school. This not only reduces food waste but also helps children who are in need of food.

Many school systems that work to reduce food waste in their buildings look to the USDA's recommendation to use share tables. A share table is a common space in an elementary school cafeteria where children can share food they do not want to eat, instead of throwing it away. Yet, often school food service directors perceive food safety as a barrier to effectively implement share tables. Some school districts are concerned about using share tables because they fear it will not follow Food Code guidelines since requirements limit what can be reserved to shelf-stable, sealed packages. Additionally, many of these items, such as chips or cookies, are not healthy and do not improve the problem of food insecurity. School administrators express frustration at the significant limits the Food Code places on the amount of food that can be shared. In other counties, some school districts report decreases in share table use once the local health department enforces that section of the Food Code. For a share table to be successful, the local health department must give guidance about their enforcement of the Food Code.

A part of my role at the Ottawa County Department of Public Health is to teach food safety, so I had the interest to study the effects of share tables on food waste in elementary school cafeterias. This research project was a part of obtaining a masters in public health where I examined share table use as an intervention to food waste. I gathered and compared data on food waste and share table use from three elementary schools in Ottawa County; one with no share table, one with a new share table and one with an established share table.



The results of this study showed much less food waste per student in schools that use share tables. Furthermore, the results showed greater interaction with the share table in the elementary school where the share table had been established for many years. Ottawa Food (a coalition dedicated to eliminating hunger, encouraging healthy eating and increasing the sourcing of local food) is using this study to promote share tables in Ottawa County schools. (Learn more at www.OttawaFood.org.) However, the data can be used for any school system that is working to reduce food waste in their cafeteria. When health departments work with school districts to create effective steps for share table use, food waste and student hunger can be



The food shown here is from the share table at Jamestown Elementary School. Items that can be donated and shared include whole, uncut fruit with a peel (e.g., bananas and oranges), milk, string cheese, yogurt and snacks sealed in individual packages (e.g., chips, cookies and muffins).

Childhood HUNGER

exists in Ottawa County with an estimated 7,690 children not getting the food they need

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RECOGNITION

Project Public Health Ready Recognition Program

Protecting Ottawa County from emergencies and disasters

he National Association of County and City Health Officials (NACCHO) recognized the Ottawa County Department of Public Health (OCDPH) for its ability to plan for, respond to and recover from public health emergencies. The department demonstrated these capabilities by meeting the comprehensive preparedness benchmarks required by Project Public Health Ready (PPHR), a unique partnership between NACCHO and the Centers for Disease Control and Prevention. Coordinated by Jennifer Sorek, public health preparedness coordinator, the OCDPH joins a cohort of 500 local health departments across the country that have been distinguished for excellence in preparedness through PPHR, either individually or as part of a region.

PPHR recognition confirms that the OCDPH has a thorough and coordinated emergency response plan in place and that staff have the training to protect the health of the community during an emergency. Local health departments recognized by PPHR undergo a rigorous evaluation by peer review to assess their ability to meet a set of national standards for public health preparedness. These standards align with federal government requirements and other national best practices. PPHR recognition also requires health departments to collaborate with their state, local and community partners to develop plans that account for all the constituents in their jurisdictions.



Dr. Umair Shah, President of NACCHO; Jennifer Sorek, Public Health Preparedness Coordinator with Ottawa County Department of Public Health; Melissa Marquis, Chair of NACCHO's Preparedness Planning, Outcomes and Measures Workgroup

"When disaster strikes, it affects local communities and local health departments are a critical part of any first response to disease outbreaks, emergencies and acts of terrorism," said Dr. William Barnes, Interim Executive Director & Chief Program Officer. "NACCHO commends the Ottawa County Department of Public Health for being a model of public health emergency preparedness."



Click to hear more about the PPHR process and recognition.

AWARD

he Michigan Public Health Week Partnership, which consists of 10 public health organizations in Michigan, awarded the OCDPH the 2018 Jean Chabut Health Policy Champion award for achieving the Project Public Health Ready national recognition. The Jean Chabut Health Policy Champion award showcases the significant accomplishments of individuals or organizations in the policy arena on the local or state level to improve the health and safety of their communities. "These individuals and organizations have gone above and beyond to improve Michigander's health and safety," said Nick Lyon, Michigan Department of Health and Human Services director. "Much of a person's overall health is determined outside of a doctor's office, and these award winners have provided opportunities for our state's citizens to have healthier lives and communities."



Director Nick Lyon, Michigan Department of Health and Human Services; Rep. Roger Victory, R-Hudsonville; Administrative Health Officer Lisa Stefanovsky, Ottawa County Department of Public Health; Senate Majority Leader Arlan Meekhof, R-West Olive; and Rep. Daniela Garcia, R-Holland.

AWARDS

Our department is filled with so many outstanding team members! Your excellence and commitment show in your work and in our community!

Ottawa County Outstanding Customer Service Award



ritney Brown, community health worker, received the Outstanding Customer Service Award in the first quarter of 2018. The county administrator and board recognize Ottawa County employees who provide excellent customer service through their professionalism, friendliness and making every customer feel valued. The person who nominated Britney wrote: "I was

in a bad place for so long and had gotten desperate and needed a lot of help. I sing your praises to everyone that will listen, tell them that I fought every moment of every day and got nowhere for years. When you came into the picture you were able to move things forward within just a few months, saved my life. I have hope for the first time in a long time and I can see things getting better all because of your help. You definitely made a difference, a huge difference and still are. Thank you for everything." Learn more about Britney at http://bit.ly/2EoMOBj.

Alliance for Immunization in Michigan Outstanding Achievement Award

Sue Schryber, immunization team supervisor, received the 2018 Outstanding Achievement Award. This award recognizes individuals, community groups or corporations whose work has demonstrated one or more of the following characteristics: consistently contributed to raising and improving immunizations; provided outstanding and recognizable improvement in the immunization process; or promoted the cause of immunizations by involving providers and communities in immunization programming. Read more at http://bit.ly/2A3ugD3.



Immunizations Clinic Team - Toni Bulthuis, Robin Schurman, Cindy Botbyl, Sue Schryber, Tonya Barber, Chelsea VanderHoff and Angela Leyrer

Mosley Team Award for Extraordinary Community Health Worker Service

he Ottawa Pathways to Better Health (OPBH) community health worker team received Spectrum Health's Mosley Team Award for Extraordinary Community Health Worker Service. This award recognizes and acknowledges outstanding service, dedication and excellence within the profession. The OPBH team members were presented with the award because they exemplify excellence, accountability, compassion, integrity, respect, teamwork and collaboration to achieve significant and impactful accomplishments.

Michigan Department of Health and Human Services Outstanding Innovation Award



eather Alberda,
AASECT certified
sexuality educator,
received the 2018
Outstanding Innovation
Award. During the
Roadmap to Health
Conference, state leaders
recognized Heather for
her innovative work to

address sexually transmitted diseases (STDs). In 2014, she created the Wear One program to help remove barriers such as cost, embarrassment and lack of access to condoms for people 18-24 years of age. Through this program, various locations within Ottawa County give out free Wear One packages. Places such as colleges, retail stores, tattoo studios, nail salons, gas stations and community organizations give out these free packages that include 10 condoms, lubricant, sexual health resources and STD testing information. People 18-24 years of age can also order packages online and receive them in an unmarked and confidential envelope.

COMMUNITY ENGAGEMENT

Collaborative Ecosystem

eadership within the Ottawa County Department of Public Health work hard to foster and strengthen community partnerships focusing on a shared vision: Healthy people living in healthy communities. It takes cross-sector engagement from businesses, government, nonprofit organizations and others to create system-level solutions to address the challenges our community faces. It also takes a healthy collaborative ecosystem which includes strong leadership, aligned funding, agreed upon data, cross-sector buy-in and trust to develop strategic, coordinated and systemic responses to our community's greatest health and human service needs. To ensure cross-sector engagement and a healthy collaborative ecosystem, our organization has been a leader and a sustainability partner in Community SPOKE; a nonprofit organization designed to enhance coordination and collaboration of human services in Ottawa County. SPOKE successfully provides a neutral space for engaging non-traditional partners; planning in areas such as housing, food access, health, aging and transportation; avoiding duplication; and working toward an ecosystem where true collaborative work can happen. During 2018, SPOKE facilitated the Ottawa County Community Health Improvement Plan; a collaborative endeavor that addresses the greatest health needs in Ottawa County. www.miOttawa.org/2018CHIP



Patrick Cisler with Community SPOKE facilitating the Access to Care workgroup during a Community Health Improvement Plan meeting. Lisa Stefanovsky, OCDPH health officer pictured in the front left.

Hit the Road - Community Outreach

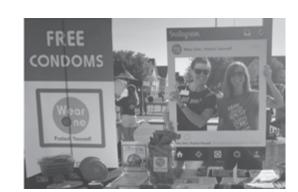


Leanna and Heather taking a selfie before driving into a blueberry field to meet farm workers.

eanna Kermeen,
community health
nurse, and Heather
Alberda, sexuality
educator, have hit the
road to raise awareness
on sexual health and
encourage STD testing.
They've gone to several
college events, migrant
camps, schools and many
other community events.
As a part of the Migrant

Health program, Leanna and Heather visit migrant camps where they collect samples to test seasonal farm workers for chlamydia and gonorrhea, as well as providing Wear One condom packages that include sexual health education. On their visits, they also bring toothbrushes, fresh produce, shelf-stable foods, shoes, bug spray and clothing donated by OCDPH employees to migrant families. "Sometimes giving clothing and other items is a way to begin a conversation and get farm workers and their families to engage with us," said Heather. Leanna indicated, "I put myself in their shoes—would I be eager to talk to a government worker who came into my migrant housing camp?"

Leanna and Heather continue to build community partnerships to offer sexual health education and on-site STD and HIV testing and treatment. In June 2018 they hosted a community HIV testing event with Out On The Lakeshore—a LGBTQ Resource Center in Holland. Leanna and Heather also provide resources and testing to high schools, the Ottawa County Jail and the Ottawa County Juvenile Detention Center to make sure the youth involved in the Lighthouse Program have access to sexual health services before being released. When providing resources and testing at the Community Action House's community kitchen, Kylie Osiptsov and Rachel Pohl, public health nurses, also accompany them. "Heather and I are committed to building trust with the people we serve. Our goal is to deliver health promotions, services and linkage to care if needed," declared Leanna.



Grand Valley State University's campus-life event where Leanna and Heather handed out more than 10,000 condoms, sexual health education and STD testing information, along with fun giveaways like buttons, Frisbees, lip balm and coasters.



Migrant Health STD testing event at Botello Grocery on Lake Michigan Drive in West Olive. In 2018, 100 seasonal farm workers were tested for chlamydia and gonorrhea.

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In 2018,



1,218 DENTAL **Appointments**



SERVED

80 out of 105

Operational Days

VOLUNTEER Dentists, Hygienists & College Students



100%

STUDENTS

Compliant with

Health Code for

IMMUNIZATIONS

Data through Sept, 2018.



802 **IMMUNIZATIONS** Given at 374 **Clinic Client Visits**



13,179 **HEARING**



Screenings

278 A Moms & **Babies Served**

1,536 Home Visits

37,604 **MEALS SERVED**

> at 17

Meet Up & **Eat Up Sites**

1,242 Septic & Well

Permits Issued

1,240 **Real Estate Evaluations**



3,000+

Pounds of **FRESH Produce Donated**

by Farmers & **Market Shoppers**





100.000+ **Condoms Distributed**

2,098 FOOD SAFETY



Inspection **Activities**

287 **Alcohol Servers Trained to PREVENT Sales to Minors** & Over Serving

260+ **TONS KEPT OUT** of LANDFILLS



On average, in every classroom of 13-18-year-olds



5 seriously thought about taking their life

2 made one or more attempts

Chickenpox



43 Exposed & Unvaccinated **Children EXCLUDED** from SCHOOL

1 School & 1 Residence



Tested Above he EPA's Lifetime Health **Advisory** Level for

PFOS & PFOA Combined

Cases



of Active **TUBERCULOSIS** 1,205

Children's Special Health Care Services







444 **People Served**

423 Pathways Completed



Guiding people on their pathways to better health



By Daniel Gardner

As a community health worker, I met Lillian in August 2018 to find out which pathways to better health I could guide her on. When we started working together, she was in the process of being evicted from her home. I accompanied her to court and worked out an agreement with the housing management to let Lillian stay in her home until December 1. After a month of calling places and going to appointments with her to find housing assistance, we found a more suitable apartment. Once we overcame that hurdle, we had the issue of transferring utilities that had past due balances to her new address. We applied for utility assistance with the Michigan Department of Health and Human Services and she was accepted. Working this through the Community Action Agency, Lillian was able to transfer the utilities to her

Other accomplished pathways were getting Lillian food assistance and Medicaid health insurance, so she could have access to proper medical care. The pathways we are working on together now are finding Lillian a new mattress and frame, along with registering her as a new patient at My Community Dental Center—a new dental clinic in Grand Haven that partners with the Ottawa County Department of Public Health to offer low-cost dental services.

Here's what Lillian had to say:

2018 has been the worst year of my entire life. I have never suffered the pain, stress, depression and severe illness as I have this year. In February, I was taken off my pain medication due to the opiate scare and have suffered from severe migraines ever since. I have been put on another medication but it doesn't work as well. I have fibromvalgia. lower back pain, bad knees and arthritis, in addition to being

disabled. In June, I lost my part-time job due to company downsizing. On top of that, I was notified that I would have to buy my mobile home trailer or move at the end of my lease in September. In July, I spent a week in the hospital due to large blood clots in both of my lungs that had put a strain on my heart. I received treatment for my condition and then I was sent home to get my strength and stamina back, along with going to physical therapy.

I was referred to the program where I met Dan. He's been a lifesaver! He's encouraged and helped me every step of the way!

In August, I started looking for a new place to live and was put on a waiting list for a senior apartment. I couldn't handle all of the stress, so I went to see the social worker at my doctor's office. She referred me to the Ottawa Pathways to Better Health program where I met Dan Gardner. He's been a lifesaver to me. Dan encouraged me and helped me every step of the way in my battle with corporate landlords and bureaucrats. He

filled out applications, turned in documents at social services and made sure they were processed. He spent days calling trying to find a place for me to live. When I was eventually served eviction papers by the trailer park he went with me to court for moral support. Now, he is trying to get me some much needed dental work done. Dan always answered my questions and if he didn't know he would get back to me with an answer. He was always prompt to return calls and text messages. I don't know what I would have done without his help. He truly cares about what happens to me.



The Ottawa Pathways to Better Health program was developed through a collaborative effort of many local organizations. It launched in early 2017 as an initiative of the Ottawa County Community Health Improvement Plan. The pathways program is a community health worker (CHW) program where CHWs meet regularly with clients to set health improvement goals and assist in achieving them. CHWs are trusted members of the communities they serve; often having ethnicity, language, culture and life experiences in common with their clients. They are equipped to connect clients to needed care such as medical, dental, mental health, substance abuse treatment or community or community services such as food, clothing, housing, transportation and employment. To learn more or make a referral, call (616) 393-5601 or visit www.miOttawa.org/OPBH

FINANCIAL STATEMENT

_	FY14 <u>Actual</u>	FY15 <u>Actual</u>	FY16 <u>Actual</u>	FY17 <u>Actual</u>	Unaudited FY18 <u>Actual</u>
Revenues	# 0.004.504	# 4 004 005	A 0 505 445	A. 4.400.000	Φ 4.005.070
Intergovernmental revenues	\$ 3,991,504	\$ 4,801,365	\$ 3,585,415	\$ 4,422,008	\$ 4,365,076
Charges for Services Licenses & Permits	826,927 779,766	918,093 850,503	955,244 906,204	693,973 912,356	650,523 1,027,568
Other	217,256	111,055	75,639	44,591	81,322
Otriei	217,230	111,033	75,059	44,531	01,322
Total revenues	5,815,453	6,681,016	5,522,502	6,072,928	6,124,489
Expenditures					
Personnel Services	6,099,821	6,275,885	6,375,615	7,130,832	7,417,469
Supplies	887,349	863,992	906,384	822,831	820,367
Other services and charges	1,847,066	1,955,692	1,793,395	1,808,991	2,027,899
Capital Outlay	-	-	7,064	6,325	11,313
Total Expenditures	8,834,236	9,095,569	9,082,458	9,768,979	10,277,048
Revenues over (under) expenditures	(3,018,783)	(2,414,553)	(3,559,956)	(3,696,051)	(4,152,559)
Other financing sources (uses)					
Transfers from other funds	3,018,782	2,837,174	3,379,710	4,330,512	4,192,994
Transfers to other funds	-	_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-	-	-
	0.040.700				
Total other financing sources (uses)	3,018,782	2,837,174	3,379,710	4,330,512	4,192,994
Net change in fund balance	(1)	422,621	(180,246)	634,461	40,435
Fund balance, beginning of year	578,328	578,327	1,000,948	820,702	1,455,163
Fund balance, end of year	\$ 578,327	\$ 1,000,948	\$ 820,702	\$ 1,455,163	\$ 1,495,598
FTE (Employees) Health	87.23	86.65	88.55	88.60	91.85
Unfunded positions	1.6	1.6	1.6	0	0



SOURCES

PAGES 1 and 7

Images courtesy of Sandra Lake (Cover model: Judah Lake, son of Sandra Lake)

PAGES 8-9

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