

DISTRICT BOARD OF HEALTH

“A Report on the Health of the District in 2001”

March 2002

Mahoning County

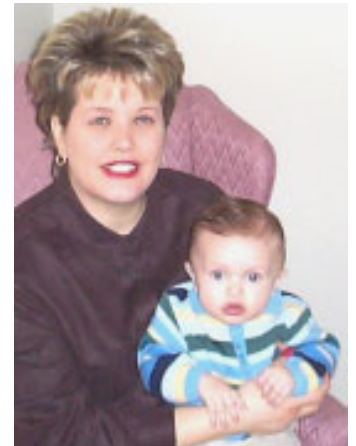
HELP ME GROW NEWBORN HOME VISITS

Connect Families with Community Services

The *Help Me Grow Newborn Home Visitation Program* links new parents, newborn infants and their families with community services. These services support local efforts to achieve community health objectives for child immunization, access to primary care, promotion of breastfeeding, and prevention of unintended pregnancies. The *Help Me Grow Program* is funded by the Ohio Department of Health through the Mahoning County Family and Children First Council. The Mahoning County District Board of Health coordinates the activities of this program. There is no charge for the visit and no financial eligibility requirements. “The goal is to provide a professional nursing visit by an RN to assess the health status of every new mother and newborn baby in Mahoning County,” said Diana Colaiani, nursing director at the District Board of Health. “Over 600 families received *Help Me Grow* visits by the end of the year 2001,” she said.

Public-private partnerships are at the heart of *Help Me Grow*. Hospital discharge planners, home health agencies, boards of health, perinatal specialists and Family and Children First Council agencies have all collaborated to provide services to new parents in Mahoning County. Families can choose one of the participating home visitation agencies from a provider list before mother and baby are discharged from the hospital. A registered nurse will call the family to schedule the home visit to be made within two weeks after hospital discharge. During the home visit, the nurse will answer any questions the family may have about infant care, breastfeeding, baby sleep schedules, care of the circumcision, and other postpartum concerns. The nurse will share information about family-related community services. If a health or social service need is identified during the *Help Me Grow* visit, the nurse will assist the family with the referral process to an agency.

Kim and Evan Ruark, pictured at right, were both pleased with their *Help Me Grow* visit this past fall from Erica DiNello, public health nurse at the District Board of Health.



The following agencies provide *Help Me Grow* newborn home visits in Mahoning County:

- Beginnings
- Forum Health at Home
- HM Home Care
- Mahoning County District Board of Health
- Struthers Health Department
- Youngstown City Health District
- Youngstown Visiting Nurse Association

For more information about the *Help Me Grow Newborn Home Visitation Program* or to request a home visit if you did not receive one and your baby is under six weeks of age, please call (330) 270-2855, Ext. 155.

MOBILIZING TO ADDRESS A MAN-MADE THREAT: BIOTERRORISM

In the early morning hours of September 11, 2001, teams of registered sanitarians gathered to begin their days work. This was the designated week for the second and final distribution of oral raccoon rabies vaccine to control an ongoing public health threat from rabies. Little did District Board of Health staff realize that in a few weeks, they would be involved in a new public health threat--bioterrorism.

The tragic events of last fall would shortly provoke numerous calls to public health authorities about perceived acts of terrorism, specifically those that might involve the use of biological agents. Most often mentioned was the bacteria *Bacillus anthracis*, the organism that causes anthrax. The source seemed to be the mail, usually with a suspicious white powder enclosed.

Training for this sort of scenario had begun before the anthrax scare. The Weapons of Mass Destruction (WMD) Workgroup of the Mahoning County Emergency Management Agency, quickly developed local protocol to handle these perceived threats. A wide

range of local agencies were involved, including the FBI, U.S. Postal Service, local fire departments, local law enforcement, medical facilities, the Hazardous Materials Team (HAZMAT), local boards of health and various volunteer groups such as the American Red Cross and the Salvation Army.

Working together, the group quickly assessed each reported incident. When a reported incident was deemed a credible threat, arrangements were made to have samples routed to the Ohio Department of Health laboratory in Columbus. The FBI was immediately notified, as any act of terrorism is considered a federal crime. Over the next several months, the lab screened hundreds of samples from around the state. Thankfully, none were found to be positive for *Bacillus anthracis*. No other biological agents were identified.

“The key to dealing with these incidents was collaboration and cooperation,” said Rick Setty, director of environmental health at the District Board of Health. “This situation taught us that no one agency could begin to deal with these incidents by themselves,” he said. “The potential ramifications were just too great.”

Health District Report Card

Mahoning County Townships, Villages, and City of Canfield

1999 birth and death data is currently the latest available from the Ohio Department of Health

1999 BIRTHS

	Live Births	Low Birth weight Births*	Births to School-Age Teens(15-17)
Townships & Villages	1,395	102	31
Canfield	45	2	0
Total	1,440	104	31

*less than 2,500 grams or 5.5 pounds

1999 DEATHS

	Infant Deaths	Total Deaths
Townships & Villages	16	1,738
Canfield	0	56
Total	16	1,794

- ✓ 5 deaths occurred every day
- ✓ nearly 2 heart disease deaths occurred every day
- ✓ 1 cancer death occurred every day
- ✓ 1 infant death occurred every 23 days

MATERNAL HEALTH FACTS

Births every day	4
Births in a hospital	99.5%
Saint Elizabeth Health Center	52.6%
Forum Health Northside	30.4%
Prenatal care during 1st trimester	87.7%
Did not use alcohol during pregnancy	99.6%
Did not smoke during pregnancy	84.0%

Most Popular Names in 1999

BOYS	GIRLS
Nicholas	Alexis
Michael	Emily
Zachary	Sarah
Jacob	Madison
Tyler	Jessica

1999 YPLL

Leading causes of death by age group and years of potential life lost (YPLL)

Age of Death	Causes	YPLL	
<1 Years Old	perinatal	709.5	
	endocrine	64.5	
	blood disease	64.5	
	accident	64.5	
	1-14 Years Old	nervous system	114
		metabolic	57
		accidents	270
	15-24 Years Old	cancer	45
		congenital	45
		flu/pneumonia	45
homicide		45	
25-44 Years Old		cancer	360
		accidents	210
		suicide	180
45-64 Years Old		heart disease	90
		liver	90
		stroke	60
	AIDS/HIV	30	
	65-74 Years Old	cancer	750
		heart disease	660
		accidents	110
		stroke	70
		diabetes	50
		lung	50
Years of Potential Life Lost (YPLL) is the number of years a person may have lived if he/she had not died before age 65. For example, if a person dies at age 60, the YPLL is 5. If a person dies at age 65, the YPLL is 0.			

2000 COMMUNICABLE DISEASES

	Number of Cases
Salmonellosis	11
Giardiasis	8
Campylobacteriosis	7
Tuberculosis	3
Cryptosporidiosis	3
Listeriosis	2
Hepatitis B	2
Aseptic meningitis	2
E. coli O157H7	2
Haemophilus influenzae (invasive disease)	2
Invasive group A streptococcal disease	2
Kawasaki disease	1
Streptococcal B in newborn	1
Animal rabies	1

1999

LEADING CAUSES OF DEATH

Causes of Death	Number	Health District Rate*	Ohio Rate*
Heart Disease	552	376.1	308.8
Cancer	405	276.0	225.5
Stroke	138	94.0	70.0
Lung Disease	98	66.8	50.7
Flu/Pneumonia	68	46.3	30.0
Diabetes	53	36.1	33.6
Accidents	35	23.8	29.1
Kidney Disease	29	19.8	17.8
Septicemia	29	19.8	8.8
Alzheimers	25	17.0	19.6

*unadjusted rate per 100,000 population

For any poison, here's the antidote:

1-800-222-1222

It's the new nationwide telephone number for poison control

Calls are answered by the Central Ohio Poison Center at Children's Hospital. This toll-free number puts poison first aid information and prevention help at your fingertips.

- If your child swallow something...
- If your grandmother takes the wrong medicine...
- If you breathe fumes that might be toxic...
- If you're not sure if something's poisonous...call 1-800-222-1222.

This number works anywhere in the United States -- whether you call from your home, your vacation spot or your car.

At the Central Ohio Poison Center, medical experts from Children's Hospital are standing by 24 hours a day, 7 days a week to:

- offer free, confidential, emergency treatment advice.
- provide information about poisons in your home, workplace or outdoors.

ASSISTANCE FOR THE CHRONICALLY ILL CHILD

The Bureau for Children with Medical Handicaps (BCMh) in the Ohio Department of Health serves children with special health care needs from birth to age 21. Conditions which qualify for service under this program include diabetes, cerebral palsy, cancer, hearing loss, heart defects, cleft lip and palate, and sickle cell disease.

BCMh consists of three different programs; service coordination, diagnostic and treatment.

♦ The Service Coordination Program helps families coordinate and locate medical services for their handicapped child. To qualify for this program the child must be under 21, a resident of Ohio, be an U.S. citizen or a permanent resident and have certain qualifying conditions. There is no financial eligibility requirement.

♦ The Diagnostic Program consists of a referral to a BCMh approved physician to rule out a handicapping condition or to diagnose a condition and develop a plan of treatment. The qualifications for this program are similar to those of the Service Coordination Program.

♦ The Treatment Program provides ongoing treatment services for eligible children. The eligibility requirements are the same as the Service Coordination and Diagnostic Programs except the family must meet certain financial requirements.

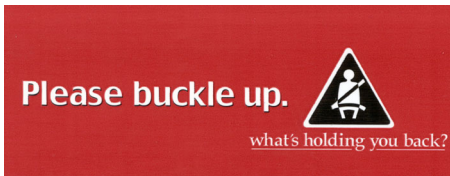
Financial eligibility is based on the service needs of the child and the adjusted gross income of the family. Middle income families with a child that requires costly medication or extensive medical care may be eligible for BCMh. A family, who is over income for BCMh, may qualify for the *costshare* program. Costshare means that both the family and BCMh share a portion of the medical expenses.

"All services provided by the BCMh Program must be requested by the child's BCMh managing physician and given by BCMh approved providers," said Linda Ewing, deputy director of nursing for clinical services at the District Board of Health. BCMh providers include physicians, dentists, therapists, hospitals, drug stores, medical equipment suppliers and health departments. "A public health nurse at the District Board of Health can help you locate a BCMh provider," she said.

BCMh families and providers can apply for health insurance or Medicaid, before using BCMh as a source of payment. Service coordination through the BCMh program can be made through a BCMh provider, physician or a public health nurse. If you have any questions or know of a child who may qualify for the BCMh Program, contact the District Board of Health, Nursing Division, and ask to talk with a public health nurse.



MAHONING SAFE COMMUNITIES GRANT TARGETS SEAT BELT USAGE 2002 GOAL OF 70%



Motor vehicle crashes are the leading cause of death for teens. Young drivers are more likely to speed, drink and drive, and not wear seat belts, which is why the percentage of teens involved in traffic crashes is higher than other age groups. The problem is worst among 16 year olds, who have the most limited driving experience and an immaturity that often results in risk-taking behind the wheel.

Most teen fatal crashes are a single-vehicle crash involving only the teen vehicle. These

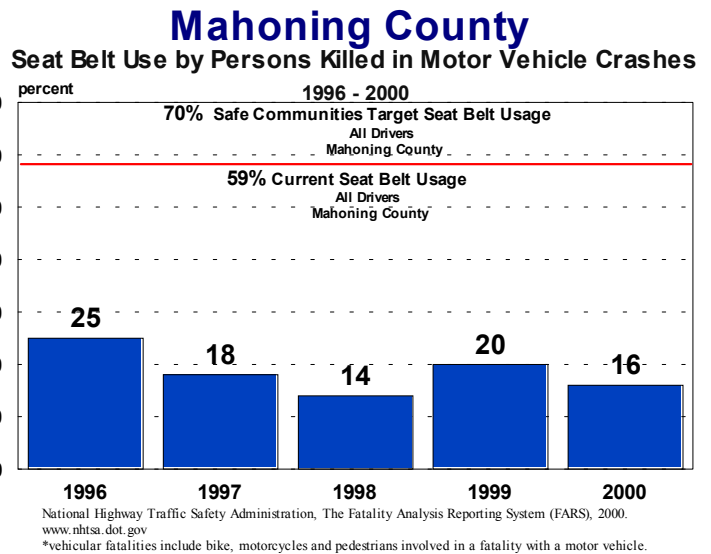
typically are high-speed crashes or crashes that are caused by driver error. Another characteristic of teen crashes is that they are more likely to occur when other teenagers are in the car. The risk increases with every additional teen passenger.

Teens generally are less likely than adults to use seat belts. Seat belts, when used and used *correctly*, can reduce the risk of fatal injury to front-seat passengers by 45%. Recognizing the need to reduce this risk factor for teens, the Mahoning Safe Communities Coalition has been working with Mahoning County high schools to increase seat belt use among the student population. The first year of the campaign proved to be successful in that seat belt use increased from a low of 46.8% to 60% by the end of the campaign. The final seat belt usage numbers for teens were comparable to the overall county usage rate of 59% in 2001. Mahoning County has the 8th lowest usage numbers in the state (the state average is 67%).

As the parent of a teen driver, there are many things that you can do to protect your teen when they get behind the wheel. The first thing that you can do is restrict night driving. Most nighttime fatal crashes occur between 9 pm and midnight. Not only does night driving require additional skills, but recreational outings usually occur at night. Peer pressure influences teens more than advice from adults. Teens who usually follow the rules can be distracted by other teens in the car and are more likely to engage in risk-taking behaviors behind the wheel. The number of teen passengers should also be restricted, not only at night, but at any time. Parents should also inquire about the local curfew time for their teens.

“Seat belts should be required at all times. Don’t assume that belt use when you are in the car with your teen means that belts will be used all the time, especially when your child is out with peers. Remember you are a role model to the teen driver. Young drivers learn by example, so practice safe driving and wear your seat belt,” said, Jane Warga, director of the health promotion and assessment unit at the District Board of Health.

There is a multitude of alarming statistics on teens and driving. Make your young drivers go through a step-by-step process to earn their driving privileges. Driving should be considered a privilege and not a right. No step should be considered too extreme when it comes to the safety of your teen while driving.



LAB TO OFFER FULL SERVICE TESTING

State Certification Enables Board of Health to Test for More Pollutants in Well Water

Full service environmental testing will be available in 2002, when the Laboratory Services Division begins testing for organic pollutants in drinking water. Until now the laboratory was able to conduct testing for metals, bacterial and chemical pollutants only. With the addition of organic testing, the laboratory will broaden the types of pollutants that the agency checks for in wells around the health district’s six landfills. The laboratory instrument used for organic pollutant testing--a gas chromatograph/mass spectrophotometer--is being purchased with funds provided by Brown-ing-Ferris Industries.

Prior to acquiring these new certifications, the Board of Health had to send out many samples to other laboratories certified for these tests. The laboratory has also applied for drinking water certification for chemical tests and is expecting to be granted certification by the summer of 2002. This certification is required for most real estate transactions that include drinking water wells, and with more than 10,000 of these wells in Mahoning County, it will enable residents to continue receiving low-cost, quality testing.

District Board of Health Mahoning County

50 Westchester Drive
Youngstown, Ohio 44515

Health Commissioner
Environmental Health & Plumbing
Health Promotion & Assessment
Lead Poisoning Prevention Program
Nursing and Clinics
Solid Waste Program
(330) 270-2855
Adult Day Services
(330) 782-1749
Laboratory Services
(330) 270-2841
Tuberculosis Clinic
(330) 744-4246
Toll-free in Mahoning County
1-800-873-MCHD



District Board of Health

Officers & Employees

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Dolores Bennett, Secretary

Board of Health

Kenneth Zinz, President
Stephanie Dewar, MD, Vice President
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Brian Gordon, MD

LABORATORY SERVICES DIVISION

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Janine DeLillo, Lab Technician
Ralph Widger, Lab Assistant
Lori Nestor, Secretary

HEALTH PROMOTION AND ASSESSMENT UNIT

Jane Warga, MEd, CHES, Director
Tracy Styka, MS,
Health Education Specialist

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Karen Ahrendt, RS, Sanitarian
Eleanor Cegan, RS, Sanitarian
John Hallas, RS, Sanitarian
Kimberly Hobbs, RS, Sanitarian
Andrew Stefan, SIT, Sanitarian
Anthony Veitz, RS, Sanitarian
David Beaver, CPI, Plumbing Inspector
Charles Gilmartin, CPI, Plumbing Inspector

WASTE CONTROL PROGRAMS

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Richard Curl, RS, Sanitarian
David Fetchko, RS, Sanitarian
Angelo Italiano, MA, RS, Sanitarian
Misty Koletich, RS, Sanitarian
Joseph Pink, RS, Sanitarian
Michael Rogich, RS, Sanitarian
Mary Helen Smith, RS, Sanitarian
Jessica Tyree, RS, Sanitarian
Wesley Vins, RS, Sanitarian
Ronald Neff, RS, CPI, Plumbing Inspector

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Linda Ewing, MSN, RN, CPNP,
Deputy Director of
Nursing for Clinical Services
Public Health Nurses
Martina Borden, RN
Erica DiNello, RN
Marianne Evans, RN
Debra Moss, RN
Susan Springer, RN
Kathleen Terreri, RN,
Carol Komar-Vadino, RN
Denise Walters, RN
Cynthia Bracaglia, Medical Technician
Laura Scalise, Secretary
Grayce Vuksta, Clerk
Adult Day Services
Rita Nolfi, RN
William Michael, Van Driver
Joyce Naymick, Activities Coordinator

Tuberculosis Elimination Program

Shawn Hunter-Little, TB Registrar
Kathleen Berry, RN, Outreach Nurse
Tuberculosis Control Officer
Robert DeMarco, MD

Lead Poisoning Prevention Program

Joseph Diorio, MS, RS, Director
Nicholas Cascarelli, MHHS, Outreach Educator
Stefano Napolitano, RS, Sanitarian
Fran Papa, RN, Pediatric Coordinator
Rosemary Totterdale, Data Entry Operator

FINANCE AND HUMAN RESOURCES DIVISION

Edward Janik, CPA, Director
Ronald Harvischak, Grants Fiscal Manager
Mary Moore, Grants Fiscal Manager
Patricia Murphy, Fiscal/Personnel Officer
Kathleen Svasta, Administrative Assistant
Michele Olin, Office Manager
Kathy Affagato, Account Clerk II
Tina Marie Schneider, Secretary
Julie Thompson, Secretary
Linda Zmith, Secretary

The District Board of Health is a public agency that provides public health services to the 154,000 residents of the Mahoning County General Health District. Health districts are political subdivisions created by the Ohio Legislature in 1919. The Mahoning health district comprises the townships and villages of Mahoning County and contracts with the City of Canfield. Board of Health members are appointed by representatives from each of the townships and villages. Ohio law requires the district health commissioner to make a public report on the health of the district each year.

Years ago...

excerpts from the records of the District Board of Health

75 years ago

January 11, 1927 – the Board of Health bans the public assembly of children and adolescents in the face of a threatened scarlet fever epidemic in Canfield.

50 years ago

December 2, 1952 – the Board of Health adopts an operating budget of \$53,290 for 1953 and considers compulsory chest X-ray examinations for food handlers.

25 years ago

January 4, 1977 – Health commissioner Douglas Walsh reports that swine flu immunizations have been suspended due to a possible connection between the vaccine and Guillain-Barre Syndrome.

September 6, 1977 – Administrator Paul Cramer reports that the mosquito spraying program will be discontinued next year due to loss of state funding.

10 years ago

March 5, 1992 – Campbell City Council votes against contracting with the Board of Health for public health services, deciding instead to place the issue on the November ballot as a charter amendment.

March 26, 1992 – the Board of Health denies an operating permit to Austin Recycling, an Austintown demolition debris facility.

July 30, 1992 – the Board of Health recognizes Copeland Oaks, a Sebring nursing home, for excellence in food sanitation.

TIMELY SEPTIC SYSTEM MAINTENANCE PROTECTS HOMEOWNER'S INVESTMENT AND THE ENVIRONMENT

In 1997 the District Board of Health, began sending reminders to homeowners when their septic systems were due for servicing. Nearly 17,000 households in Mahoning County rely on septic systems. This friendly reminder to homeowners lets them know about the benefit of pumping their septic systems regularly.

Pumping Septic Systems Every 2-6 Years Can:

- prevent malfunctions
- avoid costly repairs or replacement of the system
- protect the integrity of drinking water of the private water wells on the property
- protect the environment from the discharge of untreated sewage effluent from systems that have not been maintained.

Christine Frankford, chief of waste control programs at the District Board of Health, said that the reminder letters are generated by using a data-base that tracks the number of bedrooms in the home, the size of the septic tank, and the date of the last cleaning of the tank. This data base has been created from board of health records and pumping reports from registered sewage tank cleaners who operate in the health district. The letters are sent monthly to different townships in the health district. Septic-system owners receive this reminder letter, a list of the registered sewage tank cleaners, and educational information on proper maintenance of a septic-system, Frankford said.

The number of sewage tanks cleaned has grown steadily over the last four years that the program has been in effect, from 438 in 1997 to 2093 in 2001.

PLANET – Pediatric Lead Assessment NETwork Screening Children for Lead Poisoning is Essential for Treatment and Prevention

Lead (Pb) is a metal naturally occurring in the Earth's crust. When ingested or inhaled, lead is highly toxic to humans of all ages. Lead's toxicity has been known for thousands of years - Greek physicians made the first clinical description of lead poisoning in the first century B.C.

Lead is most hazardous to young children, whose still-developing brains and nervous systems are particularly vulnerable to lead. Low levels of exposure in children can produce permanent nervous system damage, including reduction in intelligence and attention span, reading and learning disabilities, and behavior problems. Very high levels of lead exposure can cause mental retardation, coma, convulsions, and death.

Women are also particularly vulnerable to lead because studies have shown that lead absorbed in the bones during a woman's lifetime can be leached back into the blood during pregnancy (also exposing the fetus) and menopause.

"Lead poisoning remains the number one environmental threat that our children face," according to Joseph Diorio, director of the childhood lead poisoning prevention program at the District Board of Health. "The only way to identify children with lead poisoning is for a healthcare professional to do a blood test. Many children are lead poisoned not only from dilapidated housing but as a direct result of do-it-yourselfers or renovation and remodeling of homes built before 1978."

The Pediatric Lead Assessment NETwork (PLANET) is a peer-to-peer educational program which is designed to give healthcare professionals pertinent information concerning childhood lead poisoning. PLANET's goal is to provide up-to-date information on the importance of blood-lead screening and patient caregiver education.

This is an one-hour curriculum, updating healthcare professionals about Ohio's childhood lead poisoning screening recommendations, medical case management, and risk factors. This program is presented for healthcare professionals at their offices or other healthcare settings. Healthcare professionals of various disciplines see children at 6 to 36 months of age. During prenatal and well child care, healthcare providers should discuss sources, effects, and hazards of lead. Many healthcare providers believe that lead is no longer a concern and may neglect to educate their patients. PLANET will reinforce the continuing need for lead screening of children for healthcare professionals.

Mahoning County Lead Poisoning Stats 2001

- The Childhood Lead Poisoning Prevention Program received **3,424** reports of children for lead.
- **269*** of children screened between six months and six years of age had confirmed lead levels of **10mcg/dL** or greater

*The Centers for Disease Control and Prevention refers to children six months through six years of age with a blood-lead level of $\geq 10\text{mcg/dL}$ as *lead poisoned*.

2001 Financial Statement

REVENUES

LOCAL REVENUES

Local Taxes: Inside Millage and Tuberculosis Levy	\$933,060
Contracts with Governmental Agencies	576,265
Environmental Health License, Registration, and Permit Fees	752,972
Personal Health Services Patient Fees	104,436
Laboratory Services Fees	131,901
Rental Income	49,760
Miscellaneous Revenues	1,278
SUB-TOTAL LOCAL REVENUES	\$2,549,672

STATE AND FEDERAL REVENUES

Ohio Department of Health Funded Grants/Projects	
State Funded Dollars Include:	\$403,958
Child and Family Health Services Block Grant	
Rabies Prevention Grant	
Rabies Surveillance Contract	
Help Me Grow Program	
Tuberculosis Control Funds	
Tobacco Compliance Check Contract	
Federal Funded Dollars Include:	207,234
Childhood Lead Poisoning Prevention CDC Grant	
Lead Regional Resource Center Grant	
WIC Program	
Medicaid/ Medicare Reimbursement for Services	97,579
Other State and Federal Dollars Include:	355,995
Adult Day Services Grant - Area Agency on Aging	
Safe Communities Grant - Ohio Dept. of Public Safety	
Passport Program - Area Agency on Aging	
H.U.D. Lead Abatement Grant	
Homestead and Rollback Reduction Funds	
State Subsidy	57,846
SUB-TOTAL STATE AND FEDERAL REVENUES	1,122,612

TOTAL REVENUES **\$3,672,284**

EXPENDITURES	FEDERAL/STATE	LOCAL	TOTALS
Personal Health Services	\$790,880	\$505,807	\$1,296,687
Environmental Health Services	264,295	1,128,849	1,393,144
Administrative & Support Services	57,846	468,402	526,248
Laboratory Services	-	290,218	290,218
Health Promotion and Assessment	53,360	100,948	154,308
TOTAL EXPENDITURES	\$1,166,381	\$2,494,224	\$3,660,605

THIS IS AN UNAUDITED FINANCIAL STATEMENT

District Board of Health

Mahoning County

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Boosters Are For Big Kids

Did you know most kids need to ride in a booster seat from about age 4 until at least age 8?

The 5-Step Test

1. Does the child sit all the way back against the auto seat?
2. Do the child's knees bend comfortably at the edge of the auto seat?
3. Does the belt cross the shoulder between the neck and arm?
4. Is the lap belt as low as possible, touching the thighs?
5. Can the child stay seated like this for the whole trip?

If you answered "no" to any of these questions, your child needs a booster seat to ride safely in the car. Kids like boosters because they are more comfortable, too!



Visit www.teenhealthissues.org for information and local services