

**2014**

**ANNUAL REPORT  
VANDERBURGH COUNTY  
HEALTH DEPARTMENT**





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## FORWARD

2014 was a year of significant change. More than 100 years of experience was lost due to retirement and/or resignation from all areas of the Health Department.

This was a lot of knowledge and expertise to lose in one year making it imperative to fill a number of mission critical positions in a very compact time frame. The Health Officer, Director of Environmental Services, WIC Coordinator and the Director of Communicable Disease are all new to their roles. I am pleased that we found individuals willing to fill these positions.

As this was transpiring, the Health Department joined most of the rest of the County on a new time clock system providing accurate time recording and accruals.

A new relationship to the Board was initiated along with a change in reporting to a graphic based report.

Vital Records adapted to a recent Indiana Supreme Court ruling clarifying public access to death records.

The Health Department also joined forces with the hospitals, Dispatch, Emergency Management Services (EMS), Emergency Management Agency (EMA) and many other providers in District 10 along with support from the Indiana State Department of Health to prepare for the possibility of Ebola as we watched it affect other cities across this nation. Weekly conference calls were begun including all providers as to responsibility. A Table Top Exercise was coordinated with EMA and the Health Department's CD Division and Preparedness Division. The exercise received very positive feedback as an excellent educational experience for providers from all over the 12 counties in the District.

The Health Department, along with its other partners (Deaconess Hospital, St. Mary's Hospital, ECHO Clinic, and CPSC) is very pleased to announce the award of an Immunization Grant in 2014, with an initiation date of Jan. 1, 2015, The Indiana State Department of Health issued a limited number of these initial grants with the opportunity of two one-year extensions based on outcomes. All stakeholders are excited about the partnership that has developed and the opportunity to reinforce the benefit of immunizations while measuring impact and attitude.

During 2014, the routine work of the Health Department continued in spite of the changes. Restaurants were inspected, mosquitos were eliminated, outbreaks of various illnesses were tracked and controlled, Public Health Nursing through the MCH grant along with WIC continued to address the needs of the prenatal and postnatal women and infants. TB Clinic, Specialty Clinic and the Immunization Clinic continued treating people in need of these services.

The Health Promotions Division offered education to children and adults alike seeing many positive results. Healthy life style changes were adopted and many people stopped smoking and got serious about weight loss and control of Hypertension and Diabetes.

2014 was a year of collaboration, reaching out to new partners and a year of significant change.

The one constant is change. It remains the greatest source of opportunity.

Kenneth Spear, M.D.  
Health Officer



## VANDERBURGH COUNTY BOARD OF HEALTH

Name	Position	Original Appointment Date
Catherine M. Engel, PhD	Chair	February 8, 2005
Mark E. Wohlford, D.D.S., PhD	Vice-Chair	January 1, 2008
John D. Pulcini, M.D.	Member	May 1, 1987
Maria Del Rio, M.D.	Member	August 15, 1989
Fred Mulfinger	Member	July 25, 2005
R. Michelle Galen, M.D.	Member	January 1, 2013
Timothy Hubert, Esq.	Member	June 23, 2014

The members listed above served during the year 2014. The original Board of Health was appointed in 1948, with seven members serving staggered terms. Since that time, all members have been appointed for terms of four years, except those who are appointed to serve out unexpired terms. Members may be reappointed or replaced, and continue to serve until their successors have been named. Appointments are made under Indiana Statute IC 16-20-2-6 & 7 by the Mayor and County Commissioners, according to population ratio. The members received no compensation.

## Administrative Officers and Management Team

Ray Nicholson, M.D.	Health Officer
R. Kenneth Spear, M.D.	Health Officer (effective 3/24/14)
Gary L. Heck, B.A.	Administrator
Paulette Hoffman	Finance Officer
Denise Cory, B.S.N., R.N.- B.C.	Director, Communicable Disease
Jane Cunningham, M.S.N., R.N., A.P.N.	Director, Communicable Disease (effective 11/3/14)
Wallace Corbitt, M.S.	STD Supervisor
Diana Simpson, R.N., B.S.N.	Coordinator, WIC Clinic
Mary Ellen Stonestreet, RD	Coordinator, WIC Clinic (effective 7/26/14)
Jeri Kenning, R.N., B.S.N.	Supervisor, Nursing Division
Christopher Allen, MT (ASCP), SH	Director, Laboratory
Mary Jo Borowiecki, B.S.	Health Promotion Supervisor
Erica Mitchell, A.A.S.	Vital Records Supervisor
David A. Gries, B.S., REHS	Director, Environmental Health
Dwayne Caldwell, B.S., REHS	Environmental Services Supervisor
Keith Goy, B.S.	Rodent & Vector Control Supervisor
Joanne Alexandrovich, PhD	Ozone Officer



## MISSION STATEMENT

### MISSION STATEMENT

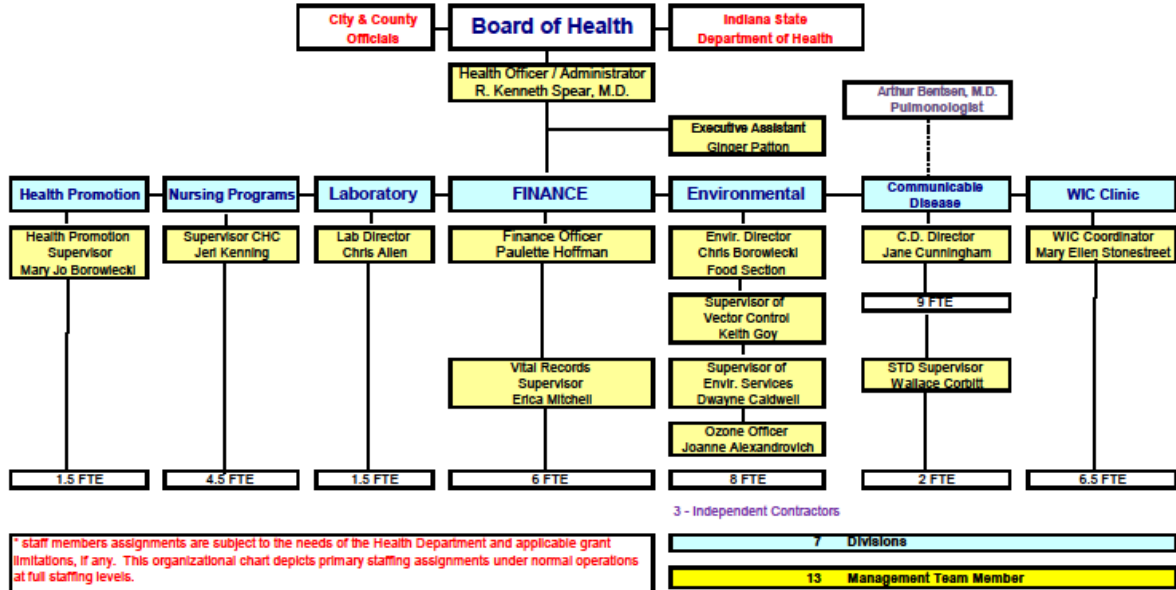
**We exist to serve our clients and community. We will work with our community partners to:**

- **Develop and provide quality health care services;**
- **Promote** healthy lifestyles;
- **Protect** against and **Prevent** the spread of disease; and,
- **Assure preparedness to achieve and maintain the best public health for our community.**



# ORGANIZATIONAL CHART

## Vanderburgh County Health Department 2014 Organizational Chart



Revised as of October 30, 2014



## HIPAA ADVISORY WORKGROUP

### GOALS

The goal of the HIPAA Advisory Workgroup is to insure that the Vanderburgh County Health Department (VCHD) is in compliance with HIPAA administrative simplification rules which cover the privacy, security and electronic access to protected health information associated with our clients.

### RESPONSIBILITIES AND SERVICES PROVIDED

The HIPAA Advisory Workgroup meets quarterly to review and update our HIPAA Security and Privacy Policy and Procedures to maintain compliance with Federal HIPAA Administrative Simplification regulations.

HIPAA mandates workforce members be trained on the HIPAA Policy and Procedures unique to each HIPAA Covered Entity. The term workforce, as defined by HIPAA, includes not only our employees, but students, interns, observers and volunteers.

HIPAA training is provided during staff orientation. An annual update is required of all staff and applicable workforce members. Training, which includes signing of a confidentiality agreement, is conducted for student, interns, observers, and volunteers prior to any client contact.

### HIGHLIGHTS AND ACCOMPLISHMENTS

The advisory workgroup continues to monitor, review and update procedures to maintain the integrity of our protected health information and electronic protected health information.

The Health Department continues a long history of providing public health educational opportunities for student rotations to University of Southern Indiana and University of Evansville Nursing students, medical and dental students, physical therapy students, dental hygiene students, as well as observers, interns and volunteers. Education and enforcement of our HIPAA Policies and Procedures remains a high priority.



## COMMUNICABLE DISEASE (CD) DIVISION

The Division is responsible for: educating the community on disease prevention and ensuring treatment and follow-up when a disease is reported; providing current treatment guidelines to health care providers; performing epidemiological investigations and follow-up based on 410 Indiana Administrative Code (IAC) 1-2.3 for disease reports and forwarding reports to the Indiana State Department of Health for further statistical analysis; monitoring disease trends through various surveillance systems; providing immunizations for vaccine-preventable diseases as well as testing and treatment for tuberculosis infection and disease, chlamydia, gonorrhea, syphilis, HIV (human immunodeficiency virus) testing and decision counseling.

<b>Communicable Disease Division 2014 Year End Statistical Report</b>		
	<b>2013</b>	<b>2014</b>
Human Immunodeficiency Virus Infection/AIDS	6	10
<b>Enteric Diseases:</b>	<b>286</b>	<b>335</b>
Campylobacter	34	24
E. coli 0157:H7	<5	5
Giardiasis	32	10
Salmonellosis	<5	23
Shigellosis	6	<5
<b>Hepatitis Type C (Chronic)</b>	<b>214</b>	<b>273</b>
<b>Meningitis/Bacteremia:</b>	<b>29</b>	<b>30</b>
Invasive Group A/Group B Strep	29	30
Severe Staphylococcus Aureus in a Previously Healthy Person	0	0
<b>Mosquito Borne Diseases:</b>	<b>&lt;5</b>	<b>&lt;5</b>
West Nile Virus	<5	<5
<b>Respiratory Diseases:</b>		
Histoplasmosis	<5	0
Legionellosis	<5	<5
Tuberculosis	<5	0
Influenza Associated Deaths	5	<5
<b>Tick Borne Diseases:</b>	<b>10*</b>	<b>17*</b>
Lyme Disease	<5	<5

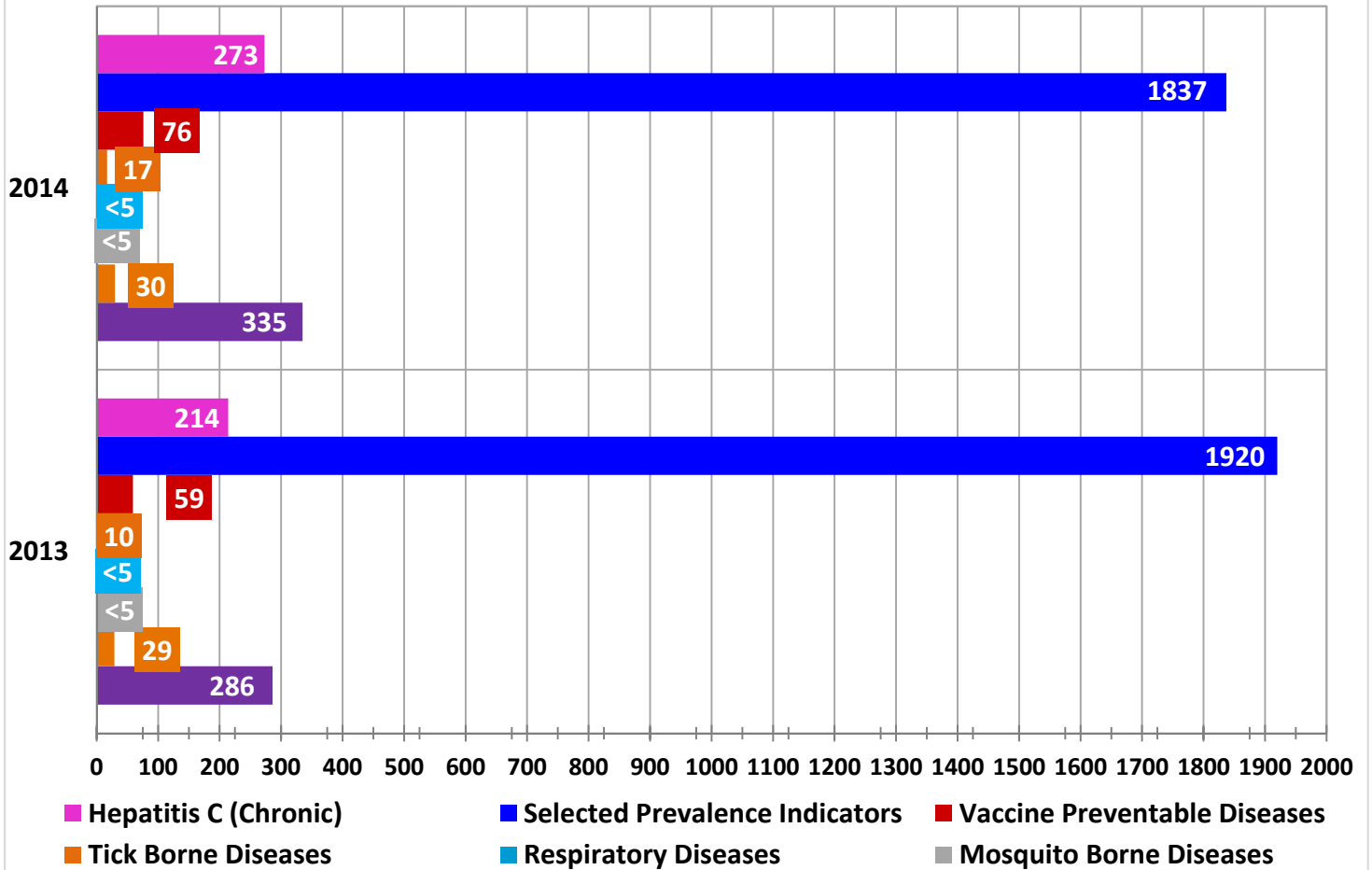




Rocky Mountain Spotted Fever	10	17
<b>Vaccine Preventable Diseases:</b>	<b>59 *</b>	<b>76 *</b>
Chickenpox	23	14
H. Influenza	<5	5
Hepatitis Type A (Acute)	<5	<5
Hepatitis Type B (Acute)	0	31
Perinatal Hepatitis B	<5	0
Measles (Rubeola)	0	0
Mumps	0	0
Neisseria Meningitis	0	<5
Pertussis	<5	<5
Rubella	0	0
Rabies Post Exposure Prophylaxis	<5	7
Streptococcal Pneumonia (invasive)	36	19
<b>Selected Prevalence Indicators:</b>	<b>2002</b>	<b>2102</b>
Pediculosis	725	561
Pneumonia	95	68
Pneumonia Deaths	231	113
Tinea Capitis/Tinea Corporis	81	82
Streptococcal Diseases (non-invasive)	788	1013
Conjunctivitis	82	265

\*No cell between 1-4 is shown in order to protect confidentiality

### Disease Summary

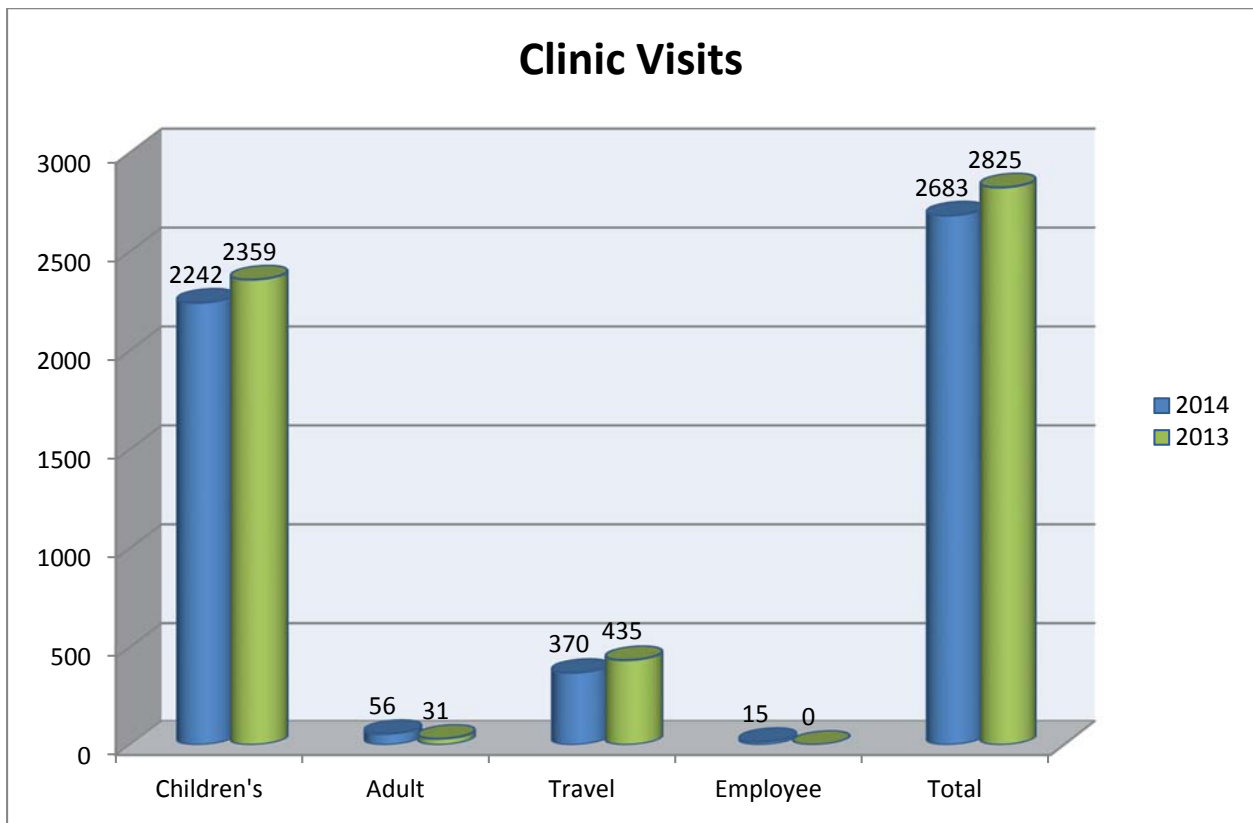




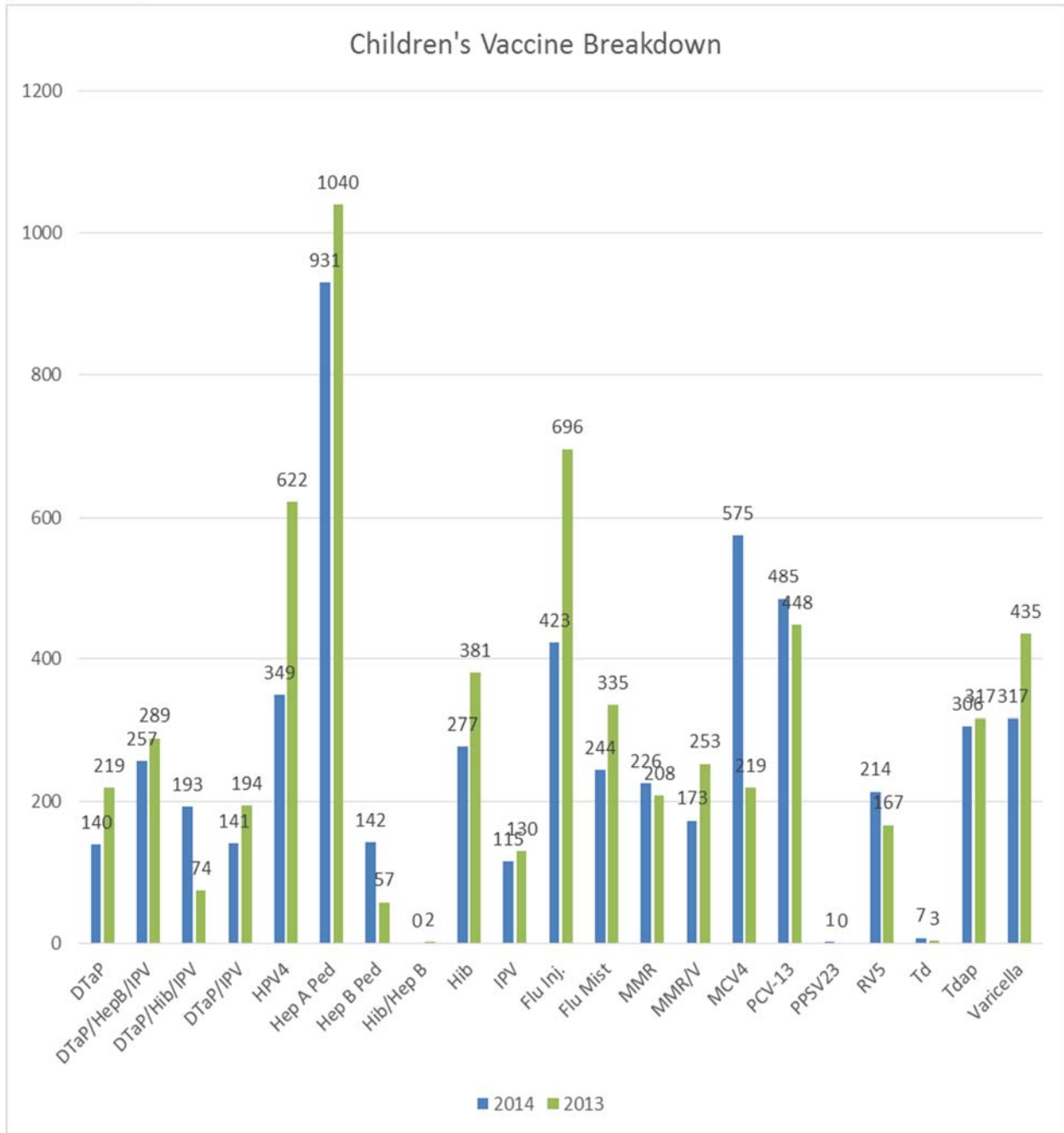
## IMMUNIZATION/FOREIGN TRAVEL CLINIC SUMMARY

The Immunization Program operates in conjunction with the Indiana State Department of Health (ISDH) Immunization Program. Vaccines are provided by federal Vaccines for Children (VFC) funds and VaxCare. The national goal is for children to complete their primary series of immunizations before two years of age.

The foreign travel clinic is a licensed yellow fever vaccination center. Clients are issued an International Certificate of Vaccination. Clients are educated on vaccine-preventable diseases, safe food and water consumption, altitude sickness, jet lag, safety, and malaria prevention.

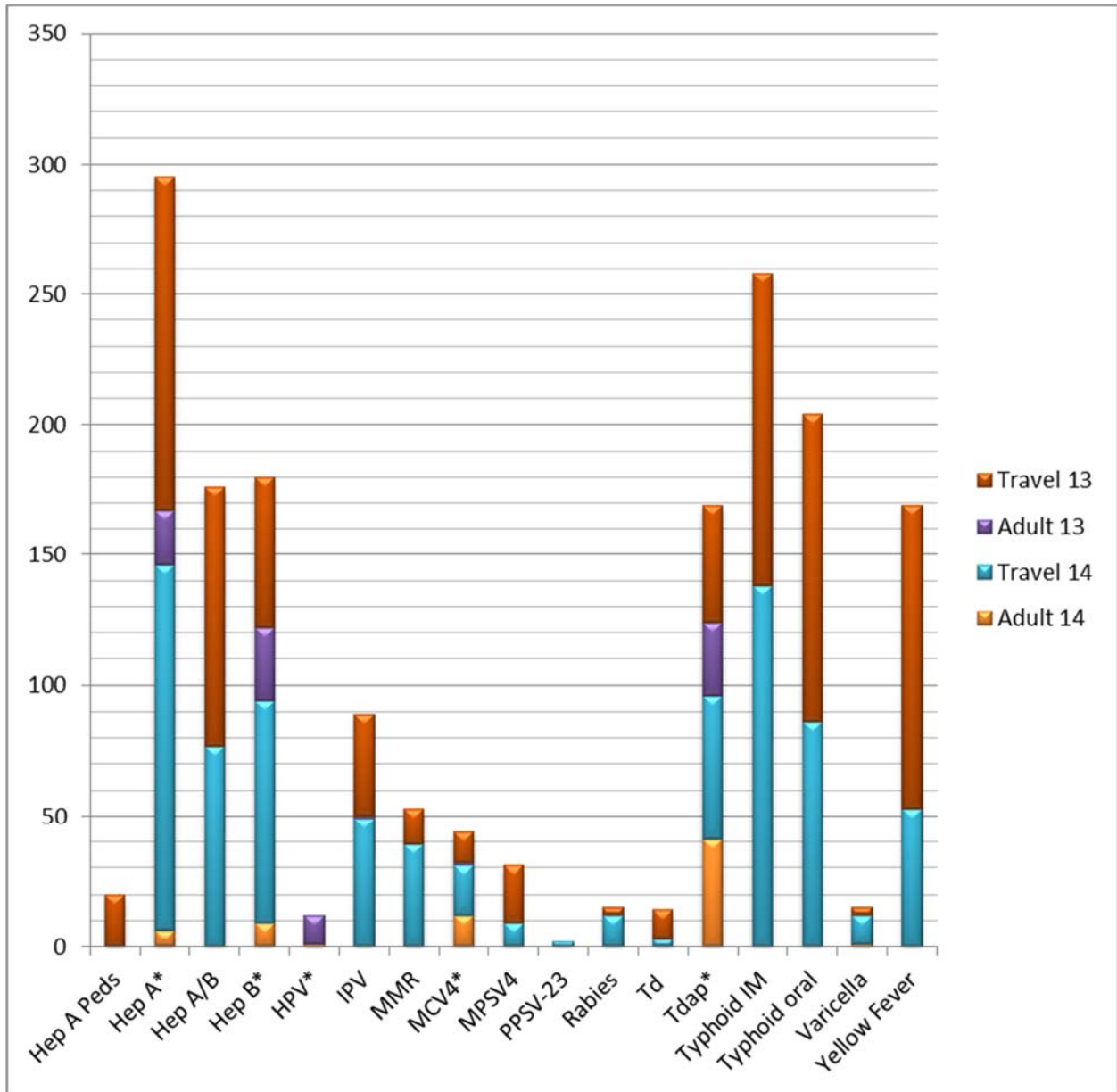


Data for Employee vaccines administered not available for 2013.





ADULT/TRAVEL/ EMPLOYEE BREAKDOWN



\*Indicates vaccine available to the Adult Program, which is supplied through the Indiana State Department of Health.



## SPECIALTY CLINIC

The objective of the Specialty clinic is to prevent: the spread of disease, the development of complications and the recurrence of a Sexually Transmitted Disease (STD). This is accomplished through diagnosis, treatment, case investigation/intervention, risk reduction education and counseling to persons who have or suspect they may have been exposed to an STD.

Less than five cases of early syphilis (primary, secondary and early latent) were reported. Through partner notification activities, 9 persons were identified in need of syphilis testing and were initiated for testing, 6 partners were examined and less than 5 were treated for syphilis. Syphilis testing is offered to specialty clinic clients and newly diagnosed HIV positive persons.

Chlamydia continues to be the most prevalent STD in Vanderburgh County. Surveillance data has not been released by ISDH Division of STD/HIV for 2014.

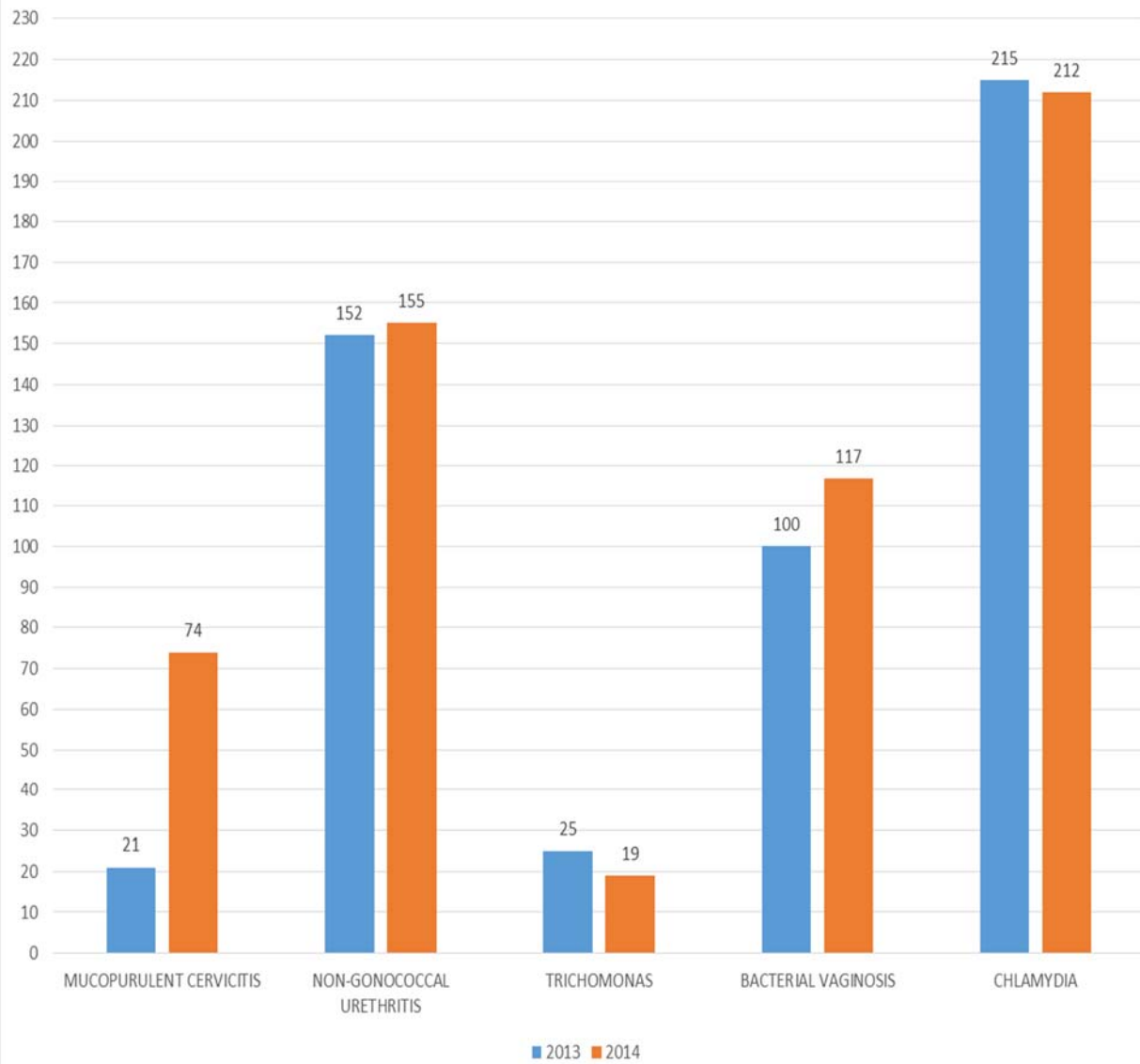
Due to policy changes VCHD can no longer generate this report.

<b>Year End Report-SPECIALTY CLINIC</b>		
	<b>2013</b>	<b>2014</b>
<b>DIAGNOSTIC OBSERVATIONS</b>		
GONORRHEA	88	75
SYPHILIS	<5	<5
MUCOPURULENT CERVICITIS	21	74
NON-GONOCOCCAL URETHRITIS	152	155
TRICHOMONAS	25	19
BACTERIAL VAGINOSIS	100	117
CHLAMYDIA	215	212
<b>REASON FOR VISIT</b>		
CONTACT	247	258
CONSULTATION	384	289
POSTIVE TEST	118	95
VOLUNTEER	264	383
EXPRESS VISIT	66	37
CONTINUE CARE	20	8
RESCREEN	35	23

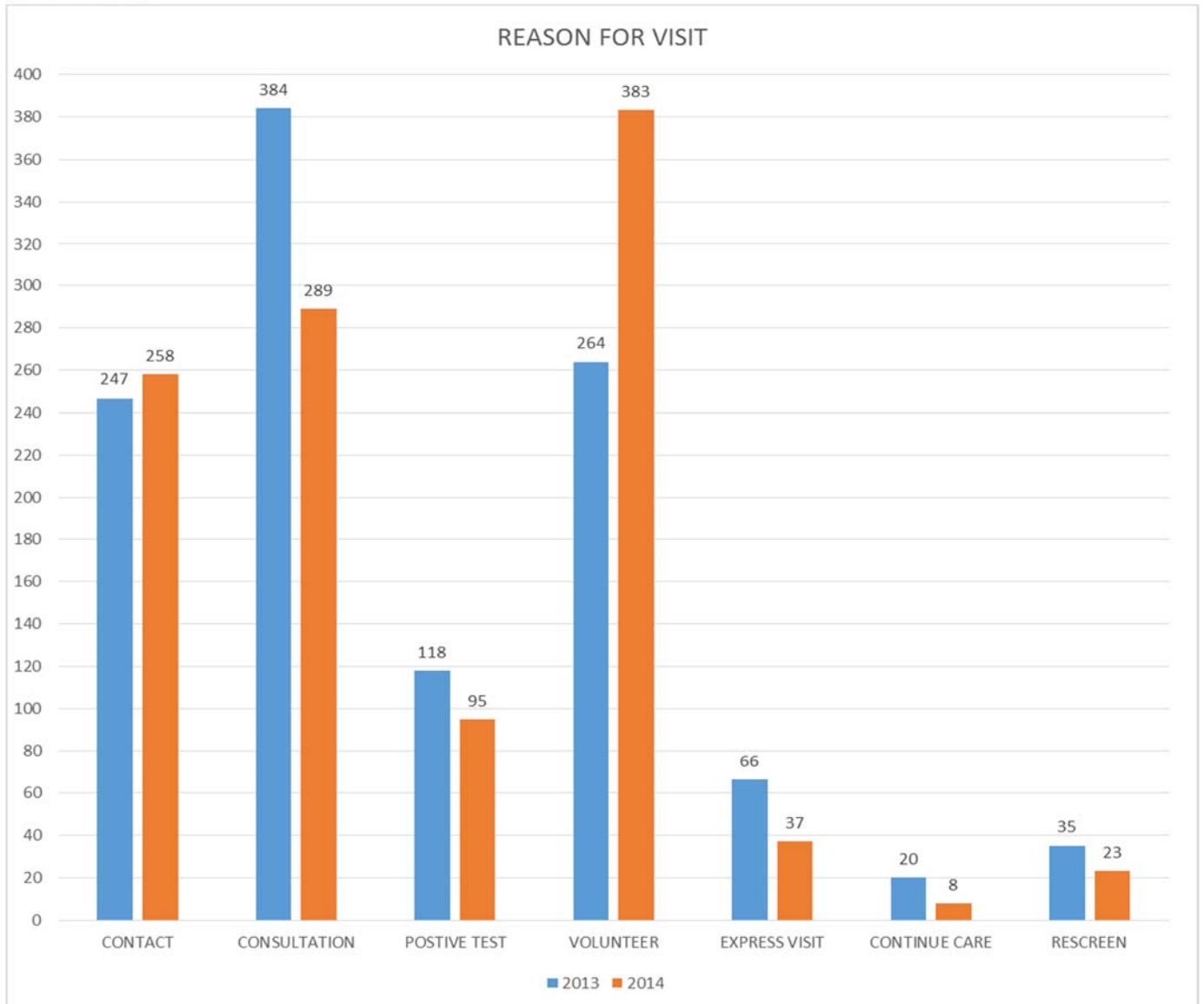


<b>SEX</b>		
MALE	574	575
FEMALE	562	523
<b>RACIAL BREAKDOWN</b>		
AMERICAN INDIAN/ALASKIAN	<5	0
ASIAN	8	5
AFRICAN AMERICAN	480	431
WHITE	563	623
HAWAIIAN/PACIFIC ISLANDER	5	<5
MULTI-RACIAL	42	27
OTHER	36	12
<b>ETHNICITY</b>		
HISPANIC	36	28
NON-HISPANIC	1100	1068

### DIAGNOSTIC OBSERVATIONS COMPLETED









## HUMAN IMMUNODEFICIENCY VIRUS (HIV) PARTNER COUNSELING AND REFERRAL SERVICES (PCRS)

The goal of the HIV PCRS program is multifaceted: to provide HIV-infected persons with support to ensure that the partners are confidentially informed of exposure; maximize linkage to medical care, treatment, prevention interventions to reduce the risk of transmission to others and reduce future transmission rates by aiding in early diagnosis and treatment and referral to prevention interventions.

Disease Intervention Specialist (DIS) assists all persons who test positive for HIV with partner identification and counseling of their sexual and needle sharing contacts. The DIS locates and notifies contacts of their risk of exposure, offering HIV CTR/PCRS services in the field or office. The DIS refers persons who have tested positive for HIV to medical, mental health, financial and social service agencies for assistance as needed. Services are provided in the 11 county area known as District 8 (includes Daviess, Dubois, Gibson, Knox, Martin, Perry, Pike, Posey, Spencer, Vanderburgh, and Warrick Counties).

### DISTRICT 8 HIV STATISTICS

	<u>2014</u>	<u>2013</u>
NEW HIV POSITIVE CASES REPORTED in District 8	18	10
New HIV Positive Cases residing in Vanderburgh County	10	06
Cases Interviewed for Partner Notification	13	12
Partners identified for counseling & testing services	31	27
Partners that are outside our jurisdiction	<5	<5
Partners accessing counseling & testing services	16	17
Court ordered tests	08	05
HIV Comprehensive Risk Counseling Services Referrals	17	17



## STD PREVENTION CAMPAIGN AND INFERTILITY PROGRAM

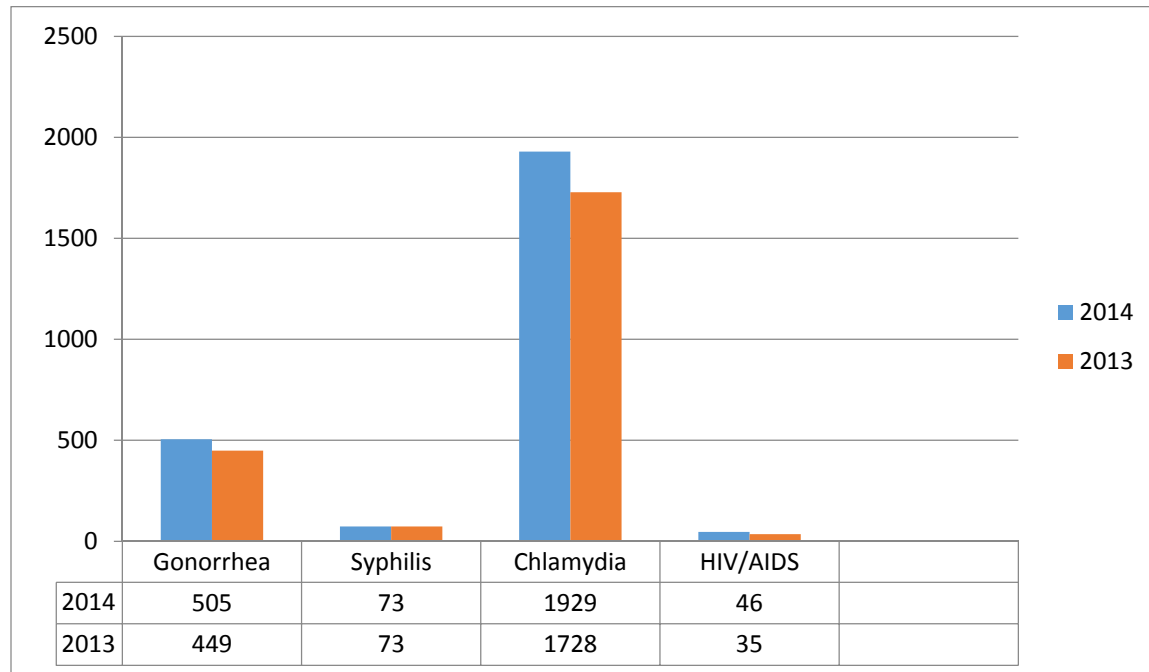
This program provided through a grant administered by the Indiana State Department of Health (ISDH). The goal is to prevent infertility due to untreated and/or underdiagnosed Chlamydia in females under 30 years of age.

The goals are accomplished through a wide range of activities including interviewing and counseling individuals with or at risk for STD/HIV, field investigations, partner counseling and referral services, surveillance, health education and consultation with community agencies and medical providers.

Disease Intervention Specialists for southwestern Indiana are employed to manage the gonorrhea and chlamydia screening program, render epidemiological (disease intervention) techniques and assist in the operation of STD control programs in eleven southwestern counties of Indiana, including Daviess, Dubois, Gibson, Knox, Martin, Perry, Pike, Posey, Spencer, Vanderburgh and Warrick. These counties are known as District 8.

Chlamydia continues to be the most prevalent STD in District 8. Surveillance data has not been released by ISDH Division of STD/HIV for 2014. Due to policy changes VCHD can no longer generate this report.

Disease Intervention Epidemiological Investigations in District 8.





## TUBERCULOSIS PROGRAM

In 2014 7 active TB cases were reported in Vanderburgh County. Chest x-rays and physician consultations were provided to 71 clients. Total skin tests given in 2014 was 726 with 12 presenting positive, 53 not returning and 655 negative testers. There were 508 home visits with 314 directly observed therapies.

Clinic orientation was provided to students from the USI, 1 IU Medical Student, 5 students from University of Evansville and 1 Murray University Nursing Student. The TB Education Program Basic Course, a program of the American Lung Association of Indiana, was provided for 72 health care workers. The TB Education Revalidation Course, a program of the American Lung Association of Indiana, was provided for 29 healthcare workers. There were three TB in-services provided to healthcare workers and physician offices/practices.

<b>Year End Report</b>		
	2013	2014
<b>Total Clinic Visits</b>	<b>1920</b>	<b>1441</b>
<b>Classification Groups</b>		
Special Populations	196	193
Routine	642	365
Refugees/Immigrants	8	<5
<b>New Active TB Cases</b>	<b>&lt;5</b>	<b>&lt;5</b>
<b>PPD Skin Tests</b>	<b>852</b>	<b>726</b>
Positive	10	12
Negative	795	655
Did not return for Read	47	59
<b>Chest X-Rays</b>	<b>81</b>	<b>69</b>



<b>Year End Report (continued)</b>		
	2013	2014
<b>Clients Supplied with Medications</b>		
<b>Active TB Cases</b>	<5	5
Medication Started	<5	<5
Medication regimen completed	0	5
Within recommended time frame	0	<5
Outside of recommended time frame	0	<5
Medication Regimen Not Completed	0	0
Client Non-Compliant	0	0
Medication Discontinued by doctor	0	0
Client moved out of county/lost trace	0	<5
Client deceased	0	<5
Regimen in progress	<5	0
<b>Active TB Case Completion Rate</b>	<b>0%</b>	<b>100%</b>
Reactors/Convertors started on Medication	25	26
Medication Regimen Completed	27	<5
Within recommended time frame	<b>27</b>	<b>&lt;5</b>
Outside recommended time frame	0	0
Medication Regimen Not completed	<b>&lt;5</b>	<b>23</b>
Client Non-compliant	<5	13
Medication Discontinued by doctor	0	<5
Client moved out of county/lost trace	<5	<5
Regimen in progress	9	8
Window Prophylaxis	0	6
<b>LTBI Completion Rate</b>	<b>100.00%</b>	<b>11.50%</b>
<b>LTBI Incompletion Rate</b>		<b>88.50%</b>
RACE		
American Indian/Alaskan Native	<5	<5
Asian	114	54
Black/African American	454	291
White	1486	1157
Hawaiian/Pacific Islander	0	167
Other Race/Multiracial/Hispanic	50	67
Unknown	0	<5
Total	2106	1740

### TB Clinic-Reason for Visits





## ENVIRONMENTAL HEALTH DIVISION

### FOOD SAFETY

#### **GOALS**

The goal of local food protection programs is to work with the food industry to safeguard the public's health and ensure that food is safe, wholesome, unadulterated, honestly presented, and meets customer expectations. Our goal is to provide a uniform inspection and regulatory program for the food industry, utilizing the latest science and technology as well as the State and Federal food safety codes and requirements. We strive to provide close cooperation and communication with consumers, state and federal agencies, the medical community and the news media to deal with any problem or outbreak relating to food. We want to be a source of educational information for the prevention of foodborne disease.

#### **RESPONSIBILITIES AND SERVICES PROVIDED**

Local health departments assume the responsibility for food safety at the community level and are often the last line of defense to ensure that safe and wholesome food reaches the consumer. The retail segment of the food industry is regulated by state law, requiring retail food facilities compliance with state and federal regulations and guidelines for the production and sale of food. The Food Safety Section is responsible for the licensing, routine inspection, complaint investigations, foodborne illness investigations, and on-going education of food service workers in all retail food establishments in Vanderburgh County.

The Food Safety Section regulates all retail food sales, such as; restaurants, groceries, taverns, school cafeterias, mobile food vehicles, vending machines and temporary food stands. This section investigates all consumer complaints involving food, such as, foodborne illness, foreign material in food, suspected tampering, mislabeling or unsanitary practices and conditions in food facilities.



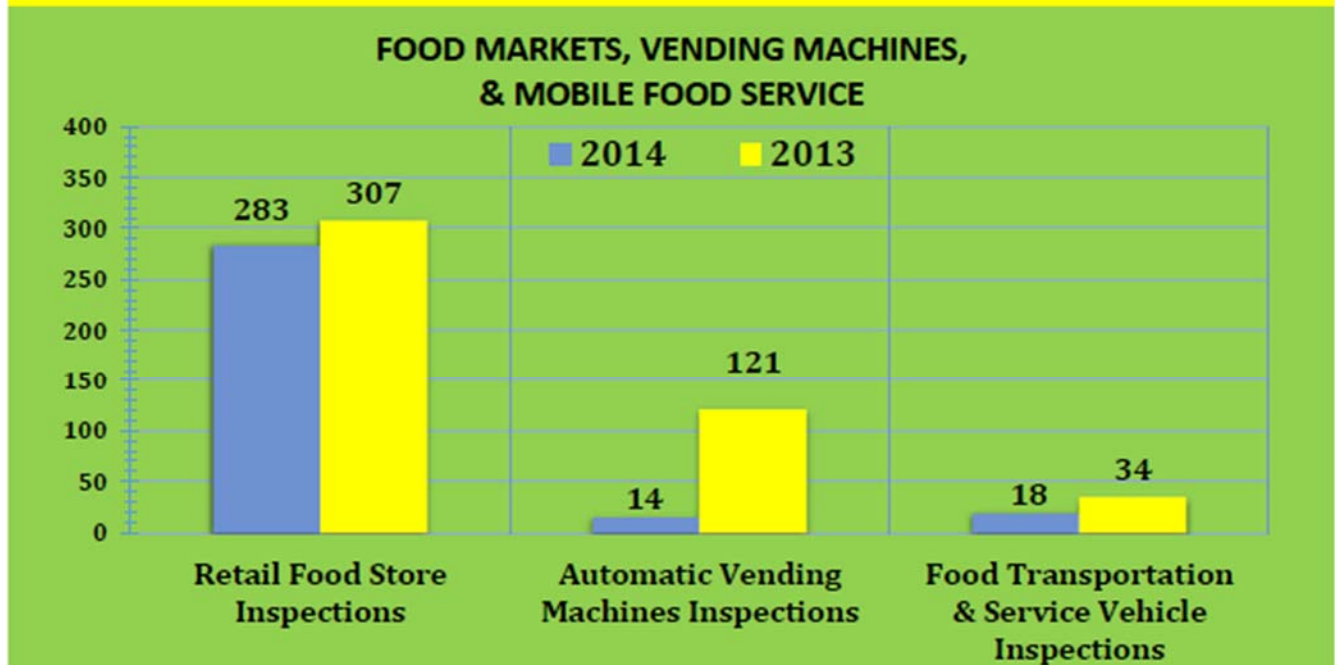
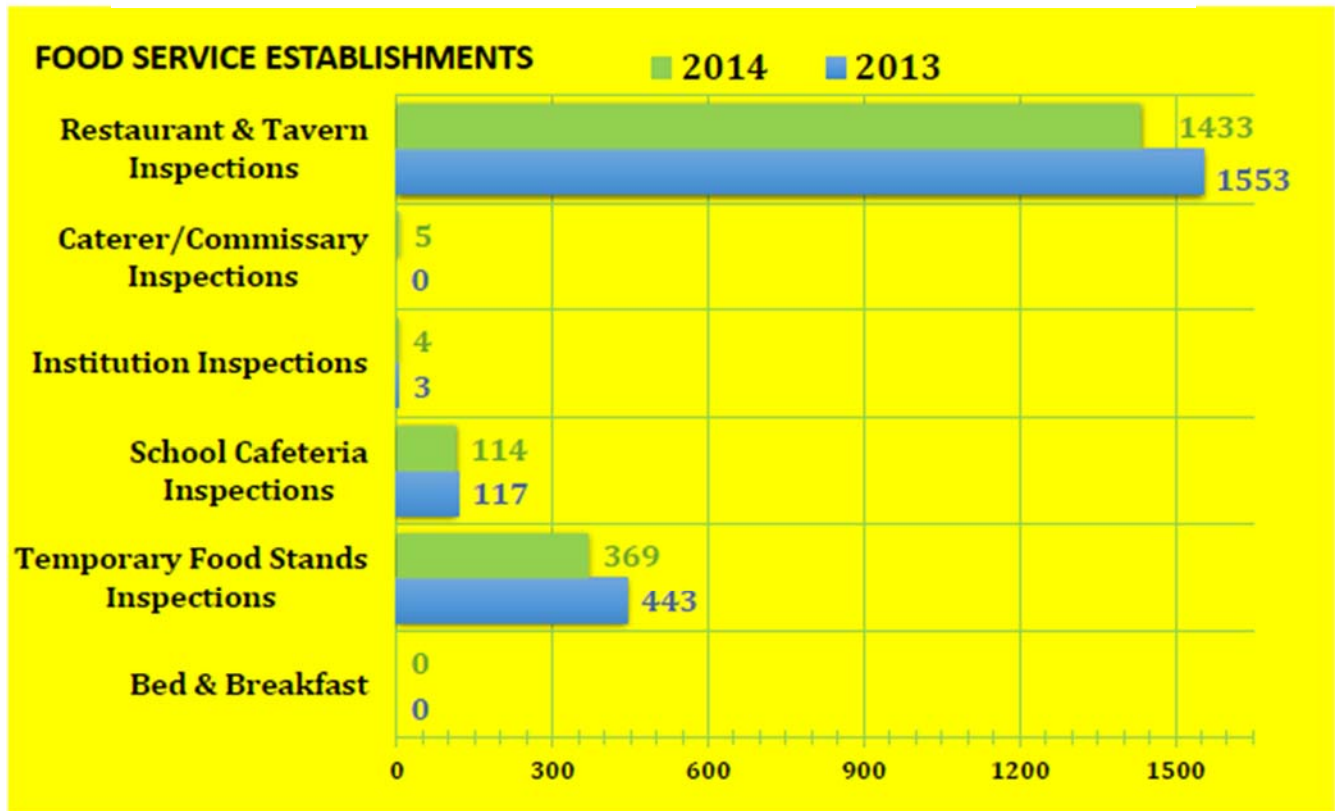
## **HIGHLIGHTS AND ACCOMPLISHMENTS**

The local Food Safety Program has monitored the source of food, food production ingredients and transportation methods of the local food industry for all food that is sold and consumed in Vanderburgh County. Close cooperation and communication has been maintained with the federal and state agencies to keep our food program in line with the most current information regarding food safety.

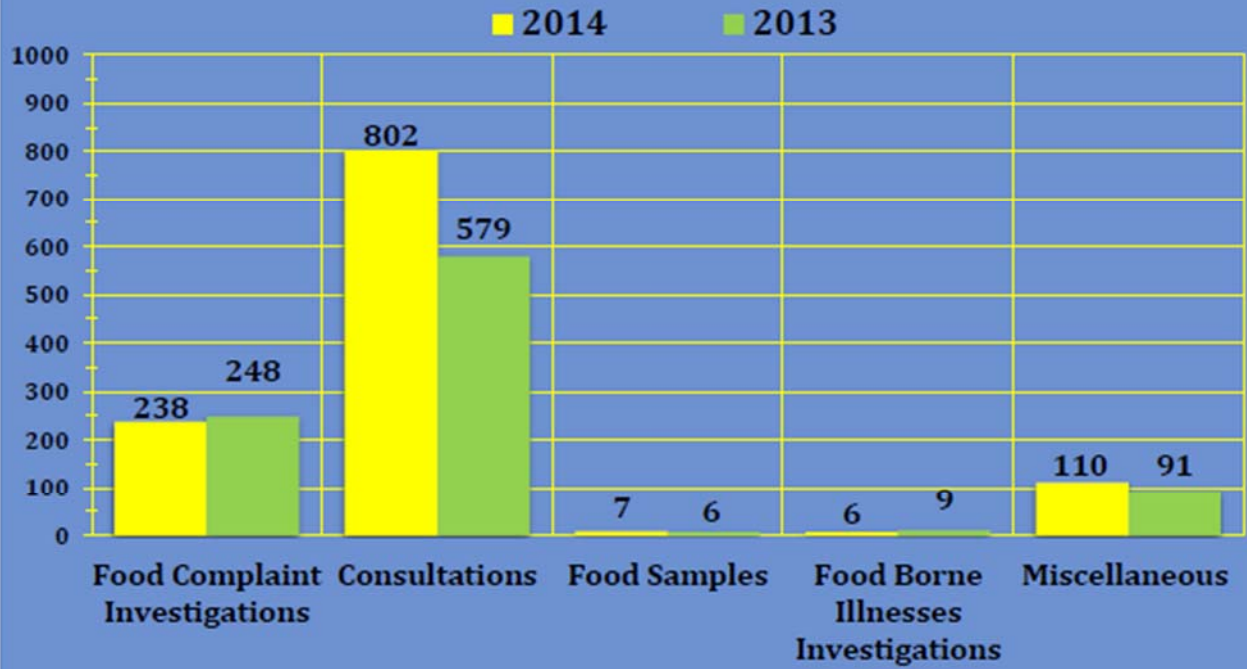
The key to food safety is a comprehensive approach toward the food safety education of food service managers, food service personnel, and the general public. Education and Food Safety Certification training has been provided through ServSafe Training courses, by our staff, to food service managers and food service employees.

In 2014 the Food Safety Section staff worked with the local food industry, and the Indiana State Board of Health to promote food safety at the local Farmers Markets and Value Added food sources. An increased interest in locally grown foods has been on the rise in our community and the staff has worked with groups and individuals to address the special challenges these foods present.

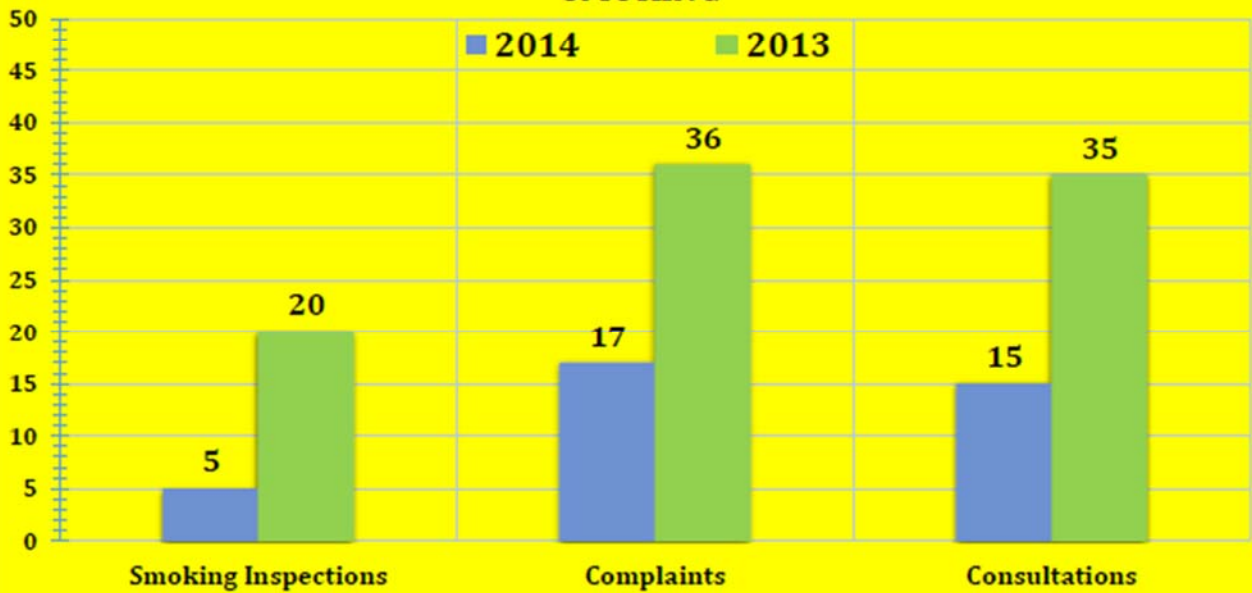




### OTHER ACTIVITIES



### SMOKING





## ENVIRONMENTAL HEALTH SERVICES

### GOALS

Environmental Health Services (EHS) promotes the public health and protects the environment of Vanderburgh County citizens. To accomplish this goal the section utilizes practices and procedures to ensure federal, state and local laws are met and offers education to residents to prevent future hazards.

### Responsibilities and Services Provided:

- Onsite Sewage Disposal
- Environmental Hazards
- Lead Poisoning Prevention
- Tattoo Establishment Regulation
- Public and Semipublic Swimming Pools

### Highlights and Accomplishments:

- Spring Training for Onsite Sewage Disposal System Installers
- Annual Training for Public Pool Operators
- Hosting USI & Student Nurses
- Participated in the LEPC Hazmat Drill

### Members of the section served on several board and committees to improve services to the city and county. Some committees/boards include:

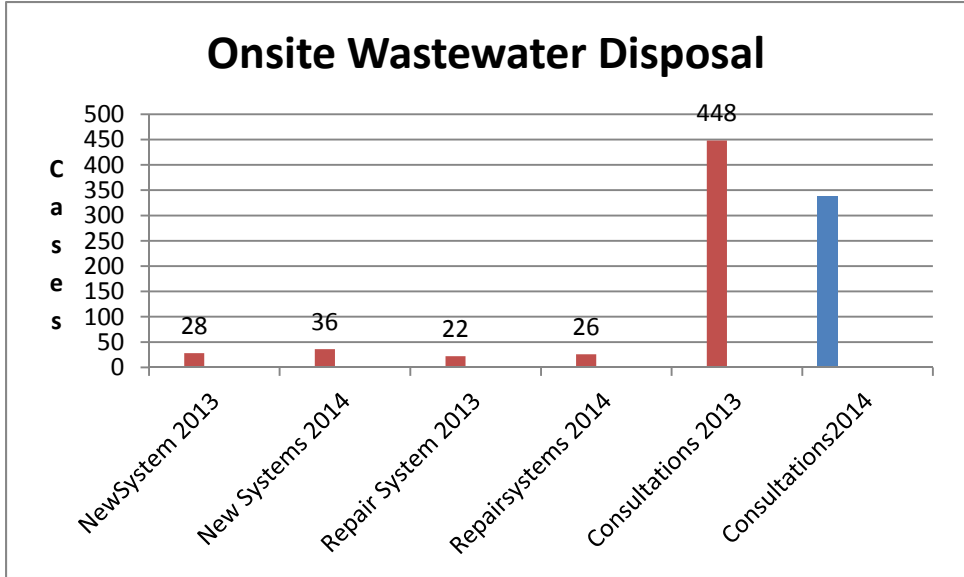
- Local Emergency Planning Committee
- SWIN Technical Center Public Safety Advisory Board
- Emergency Management Advisory Board
- Citizen Corps Advisory Board
- Mayor's No Meth Task Force
- Evansville Trails Coalition
- License & Disciplinary Board

The EHS staff attends various trainings to acquire new skills and to maintain licenses and certifications. The staff presents outreach activities to civic, professional and other groups regarding environmental health issues.



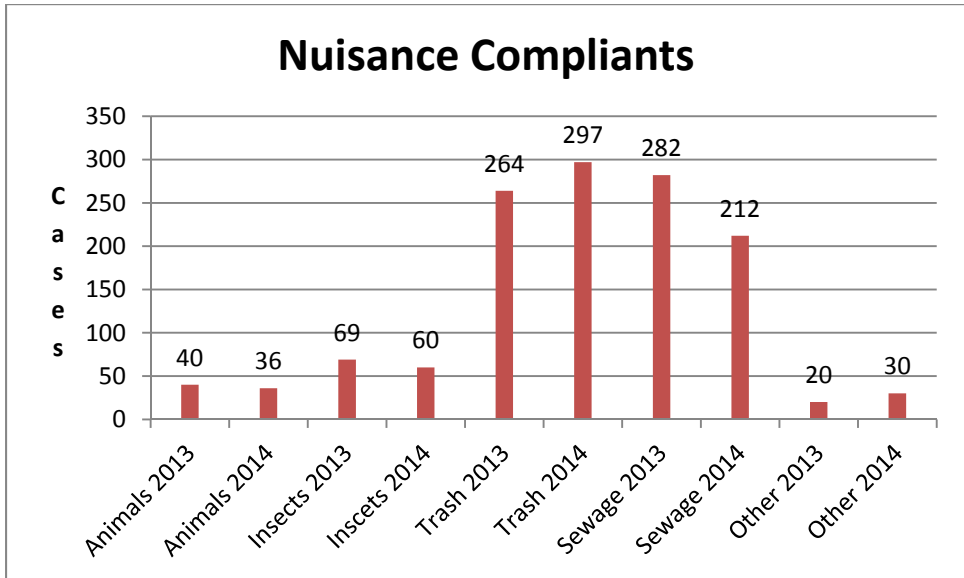
## Environmental Health Services Activities

### ONSITE WASTEWATER DISPOSAL



Onsite systems are used for sewage disposal for those dwellings not connected to publicly owned treatment works.

### Nuisance Complaints

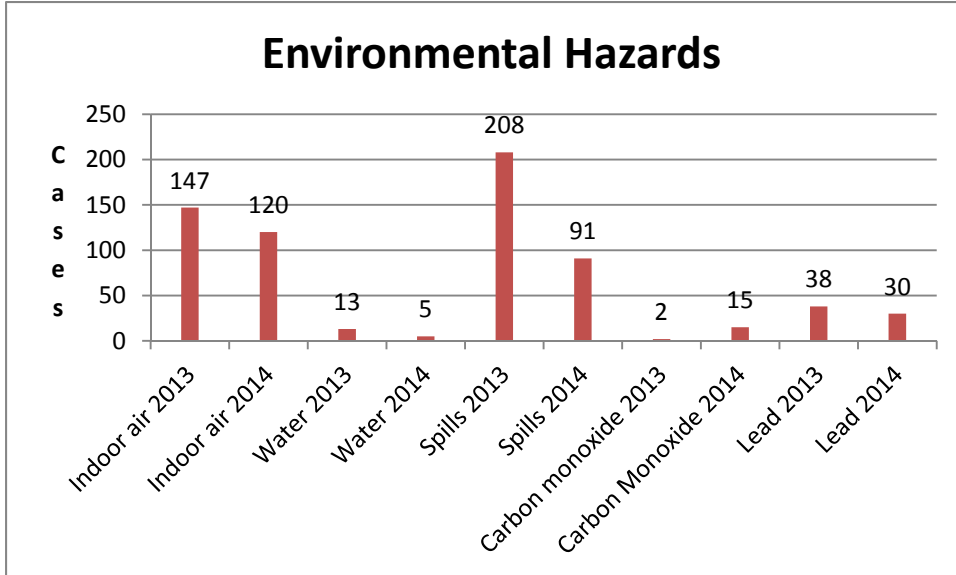


Nuisance complaints are concerns reported by citizens and investigated by the EHS.



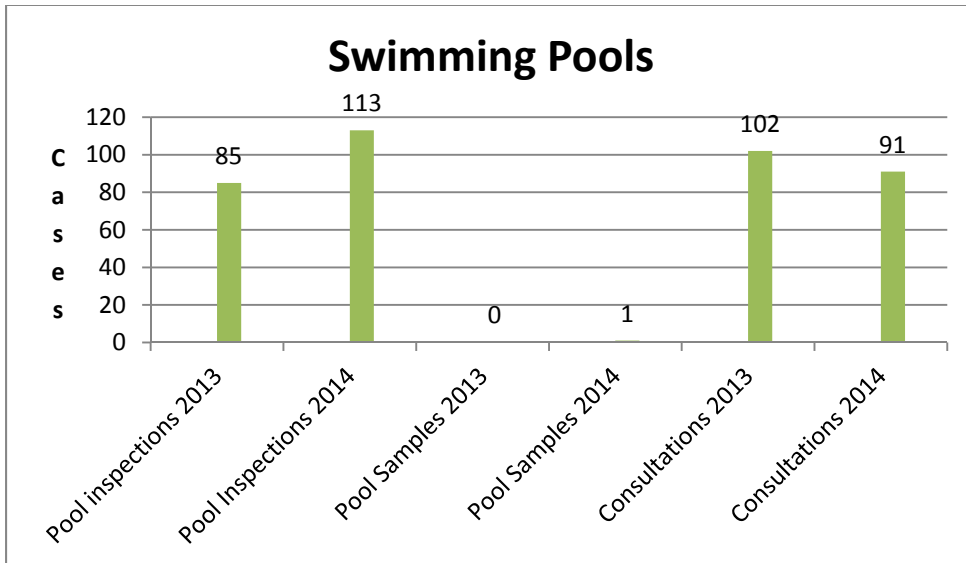
## Environmental Health Services Activities

### Environmental Hazards



Environmental hazards are factors that adversely affect the public health or environmental quality of Vanderburgh County

### Swimming pools

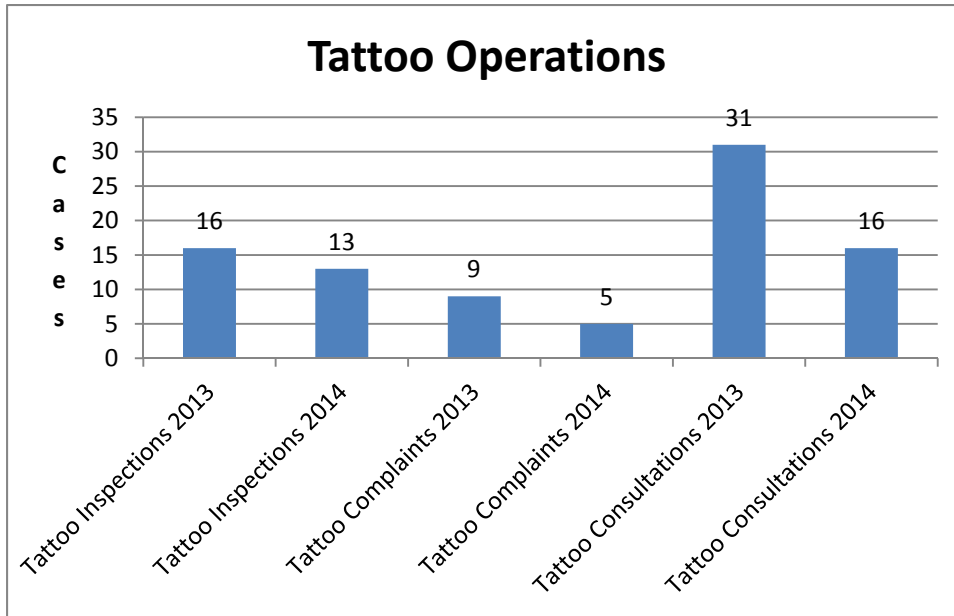


Environmental Health Services regulates all public and semipublic swimming pools to prevent disease and injury.



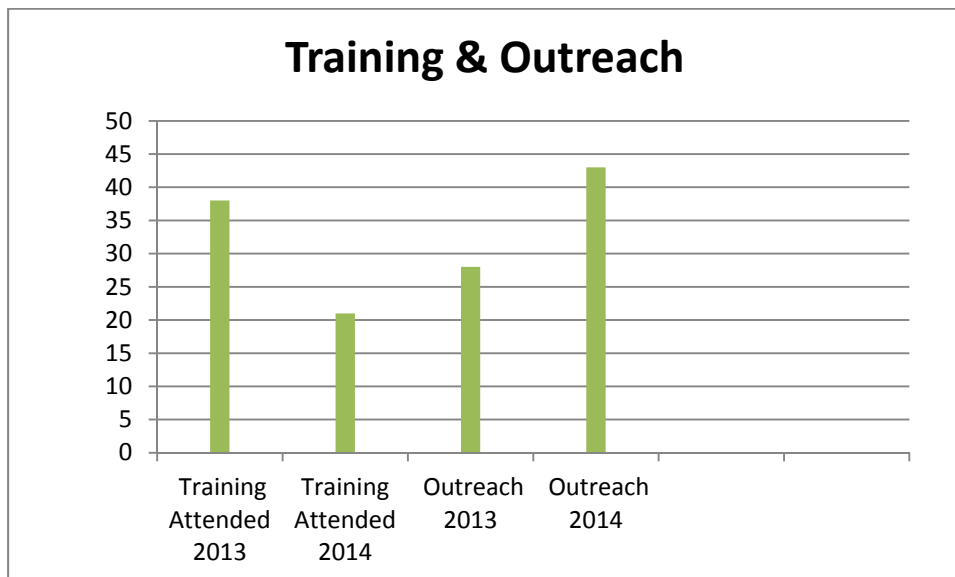
## Environmental Health Services Activities

### Tattoo Operations



Tattoo operations are inspected and regulated to ensure sanitary conditions

### Training and Outreach Activities





## **PUBLIC HEALTH EMERGENCY PREPAREDNESS AND RESPONSE**

### **GOAL**

Enhance the ability of the Vanderburgh County Health Department to prepare for and respond to bioterrorism, natural disasters, and other public health emergencies/disasters.

### **RESPONSIBILITIES AND SERVICES PROVIDED**

The Vanderburgh County Emergency Preparedness Coordinator is responsible for coordinating, planning, preparing, and responding to public health emergencies involving the Health Department. The Coordinator is responsible for engaging in activities that enhance the Health Department's preparedness and ability to respond to emergencies that threaten the public health by:

- Identifying primary and secondary command staff and other redundant contingencies
- Maintaining 24/7 contact list with health department staff and District 10 public health departments and other key stakeholders
- Acquiring and maintaining Memoranda of Understanding (MOU) or Memoranda of Agreement (MOA) relating to emergency preparedness and response
- Updating the All-hazards Medical Countermeasure Dispensing (MCD) Plan
- Review/Update current Standard Operating Procedures (SOPs) and appropriate appendices
- Maintaining Crisis Communication Plan
- Conducting and participating in drills & exercises
- Public presentations on emergency preparedness

### **HIGHLIGHTS AND ACCOMPLISHMENTS**

The Vanderburgh County Health Department participated in yearly and quarterly preparedness drills. Some of these drills included: the SNS Re-supply drill, the volunteer call-down drill, POD site call-down drill, and communication drills among community stakeholders and VCHD POD staff. These drills serve to test



communication methods, POD capabilities, and volunteer participation within the health department.

The most notable drill/exercise in 2014 was a point of dispensing exercise conducted at the Health Department which simulated response to an aerosolized anthrax attack. This involved staff from the Health Department, Indiana State Dept. of Health, and volunteers from the local Medical Reserve Corps and HOSA chapters. This exercise tested the capability of setting up a point of dispensing site, and provided Just-in-Time Training to staff and volunteers.

## **Public Health Preparedness Grants**

The Vanderburgh County Department of Health advances its preparedness capability through participation in Centers for Disease Control and Prevention (CDC) Public Health Emergency Preparedness (PHEP) grants. During the 2013-2014 fiscal year the grant was for \$15,000. For 2014-2015 it is for \$22,671.

## **2013-2014 Public Health Preparedness Grant**

During Fiscal year 2013-2014, staff members successfully completed all the assigned performance based grant deliverables based on capabilities developed by the Centers for Disease Control & Prevention (CDC). Focus was on improving capabilities in Fatality Management, Responder Safety and Health, Medical Countermeasure Dispensing. Deliverables completed included:

- Determination of roles and responsibilities of public health partners in fatality management
- Creation of a coordinated jurisdictional Family Assistance Center plan
- The identification of staff responder safety and health risks and the protective equipment, actions, and/or training needed to execute their roles
- Development of a Standard Operation Procedure defining the promotion of healthcare available to public health incident responders
- Transition to an all-hazards Medical Countermeasure Dispensing (MCD) plan from the previous Mass Prophylaxis Plan (MPP)





## **2014-2015 Public Health Preparedness Grant**

The 2014-2015 grant year focuses on an additional set of capabilities. These capabilities include: Volunteer Management, Mass Care, and Community Recovery. Along with these capabilities the grant also requires updating of the Training and Exercise Plan and appropriate comprehensive planning guides (CPG), and to utilize the state SERV-IN volunteer management database. Staff will:

- Develop standard operating procedure for the coordination and use of public health volunteers
- Identify the primary points of contact for mass care organizations and public health services that may be needed following a disaster
- Identify health service delivery recovery priorities and jurisdictional partners

## **Vanderburgh County Medical Reserve Corps (MRC)**

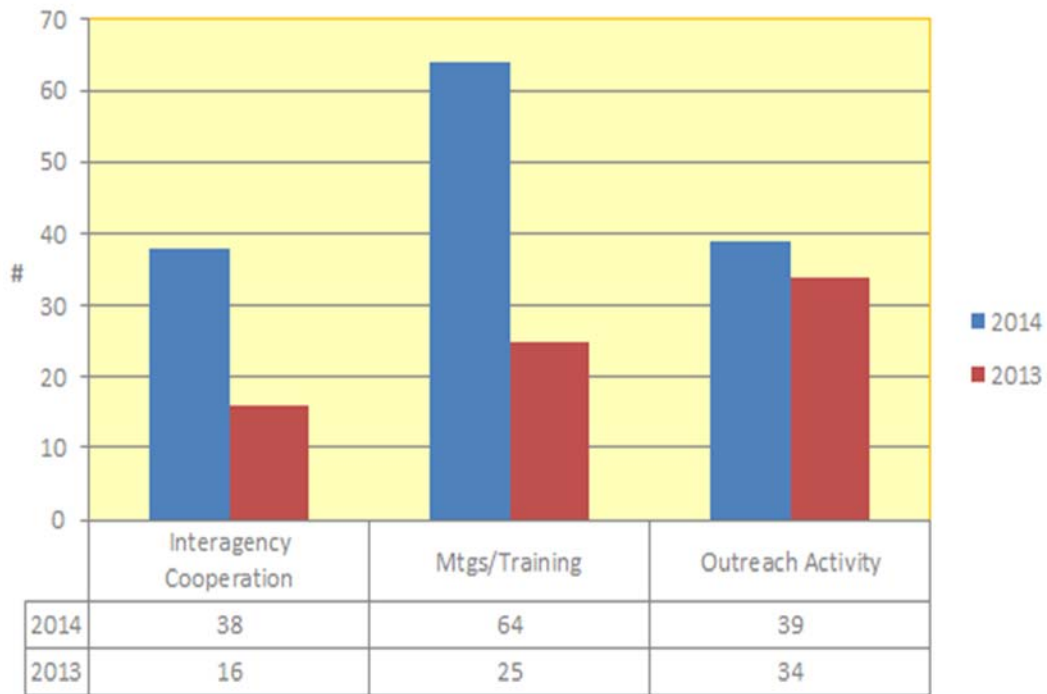
Vanderburgh County's Medical Reserve Corps is comprised of medical, non-medical, and public health professional volunteers who respond to natural disasters and public health emergencies. Our volunteers are trained, credentialed, and ready to respond to emergencies or disasters. The MRC can also staff public health fairs, flu vaccination clinics, and promote public health education campaigns.

The Vanderburgh County Medical Reserve Corps Coordinator is responsible for all things related to operation of the non-profit agency housed within the health department. The MRC coordinator is the liaison with the Health Department when the MRC is deployed and acts as the representative of the MRC in community relations and other activities. Some functions of the MRC coordinator include:

- Recruitment of public health volunteers
- Development of training curriculum for volunteers
- Coordinate speakers and topics for monthly training
- Respond to actual events and participate in drills and public health events
- Acquire funding to support the MRC and make required purchases such as uniforms, equipment, and PPE
- Validate volunteer credentials and keep track of volunteer training/personal records

## Emergency Preparedness Activities

Total Services provided: 141





## VECTOR CONTROL PROGRAM

### GOALS

The main goal of the Vector Control Division is the prevention of the spread of disease by vector organisms such as mosquitoes and ticks. This is accomplished through various control methods and educating the public of the types of vectors in this area and the methods of disease prevention.

### RESPONSIBILITIES AND SERVICES PROVIDED

The Vector Control Division engages in the control of mosquitoes through several methods, including adult control, larvae control and breeding site reduction. Emphasis is placed on larvae control and breeding site reduction as the two most effective means of control. The Vector Control Program assists the public in many areas of insect and vector control, including identification of vector or nuisance insects, enforcement of local ordinances, and advising concerned citizens when necessary. Education is important and is offered through conversations with individuals, media interviews, or various presentations to groups and organizations.

### HIGHLIGHTS AND ACCOMPLISHMENTS

Vanderburgh County experienced abnormally low temperatures in the spring of 2014, which delayed mosquito activity until mid-May. Frequent rainfall throughout the summer led to increased mosquito larvicide treatment of standing water areas. Vector Control submitted 40 sample pools of adult mosquitoes for laboratory testing which resulted in 8 pools testing positive for West Nile Virus. There was also one probable case of human West Nile Virus in Vanderburgh County.

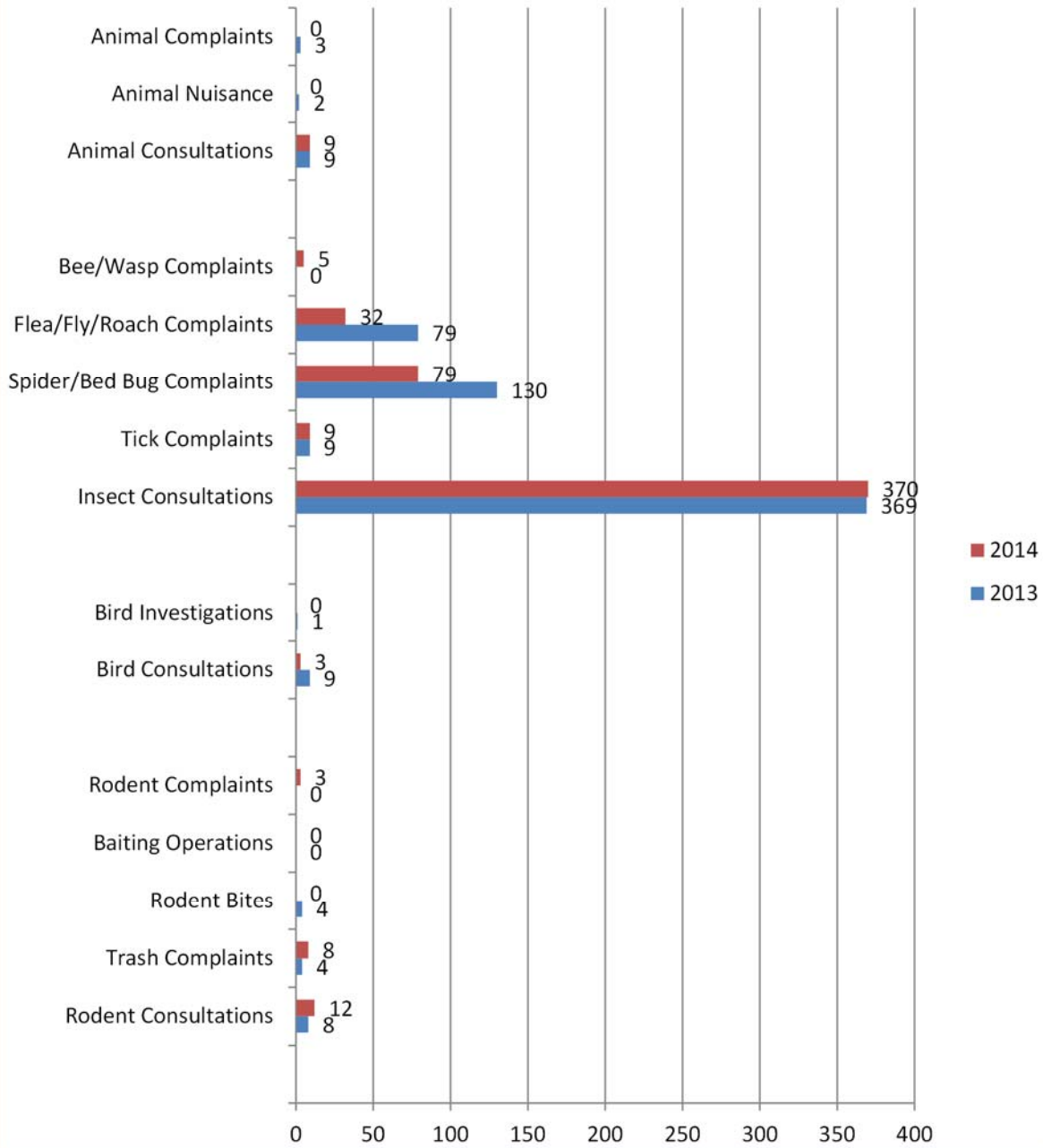
Efforts were focused on controlling breeding habitats by treating sewer catch basins, ditches, and flooded areas regularly with larvicide. Adulticiding was conducted in areas where pools of mosquitos were found to have tested positive for West Nile Virus. Response to citizen complaints led to extensive educational and treatment operations by program staff at residential properties throughout the county. Operations continued into the month of October.

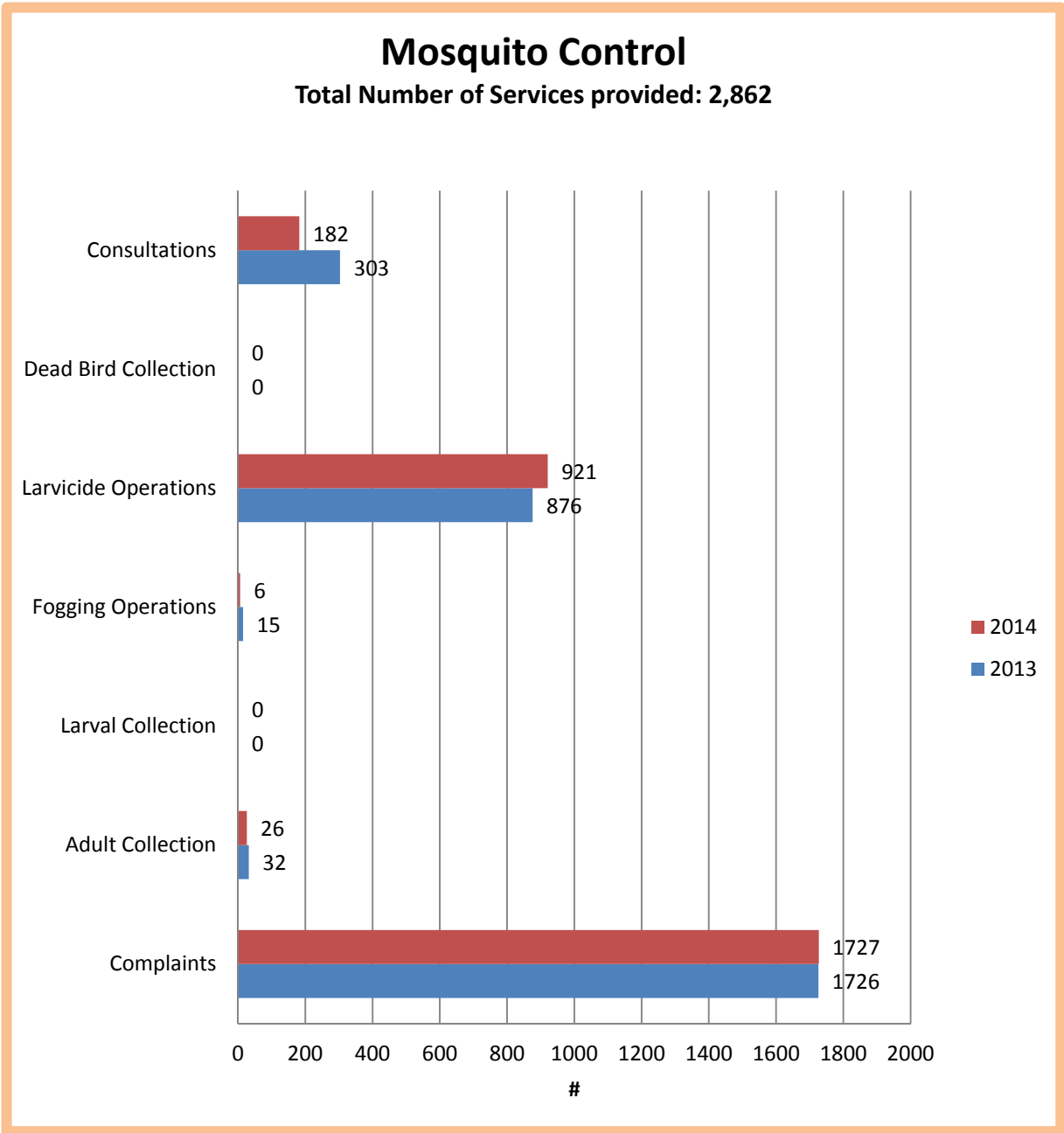
The Vector Control program also visited numerous used tire facilities in the county to educate operators on proper storage methods to prevent mosquito breeding.

Although bed bugs have not been shown to transmit disease they pose a significant nuisance to individuals of Vanderburgh County. The Vector Control Division had numerous conversations and educational opportunities with landlords, tenants, and community health organizations regarding best practices in preventing and eliminating bed bug infestations.

## Animal & Insect Control

Total Complaints/Consultations made = 530







## OZONE OFFICE

### GOALS

The primary mission of the Ozone Office is to preserve and improve the air quality of Vanderburgh County and Southwest Indiana in order to remain in attainment of the National Ambient Air Quality Standards (NAAQS) established by the United States Environmental Protection Agency (USEPA). This will insure that the citizens of Southern Indiana have healthy air to breathe, while not suffering hindered economic development due to air quality problems.

### RESPONSIBILITIES AND SERVICES PROVIDED

To promote the achievement and maintenance of air quality in Vanderburgh County, the Ozone Office has responsibilities in the areas of science, compliance, and education. The Ozone Officer is Vanderburgh County's principal advisor on issues of air quality, and is responsible for the impartial analysis of scientific data, education of the public, and fair enforcement of air quality control regulations. The Ozone Office works closely with the City of Evansville Environmental Protection Agency and the Indiana Department of Environmental Management (IDEM).

The scientific responsibilities of the Ozone Office are to forecast elevated pollution events, track air quality levels, compile, assemble and analyze data, review reports, and advise the community on the scientific elements of air quality. These responsibilities include researching records of air pollutant concentrations, and evaluating point, area, mobile, and biogenic emissions inventories. Many decisions made to protect air quality are based on projections obtained through scientific modeling. Therefore, the Ozone Officer evaluates and runs air quality models to address local issues such as air quality forecasts, facility permitting, implementation of control measures, and rule making.

The regulatory responsibilities of the Ozone Office are to ensure that the County ozone reduction ordinances are enforced, and that the laws of the State of Indiana and the Federal Government (the Clean Air Act) are upheld. The Ozone Officer is required to have a working knowledge of all federal, state, and local air rules and regulations in order to advise local officials on their implementation, and to evaluate future needs for air quality control. In addition to responsibilities in enforcement and rule making, the Ozone Officer provides compliance assistance to local industries affected by air pollution control rules.



The educational responsibilities of the Ozone Office are to provide local expertise on the complex issues surrounding air quality, and to provide education programs for the public. In order to establish effective pollution control programs, the public must understand the basic science and causes of pollution, and how air pollution affects our health and welfare. The Ozone Officer provides information on air quality to the public and the media, and works with various stakeholder groups (e.g. government offices, environmentalist organizations, and regulated businesses) to help ensure that the interests of the entire community are protected. This includes working with the local industrial community on the implementation of pollution prevention plans.

## **HIGHLIGHTS AND ACCOMPLISHMENTS**

In order to keep up-to-date in developments in the fields of air pollution control and environmental and public health, the Ozone Officer completed continuing education training programs and seminars in the following areas:

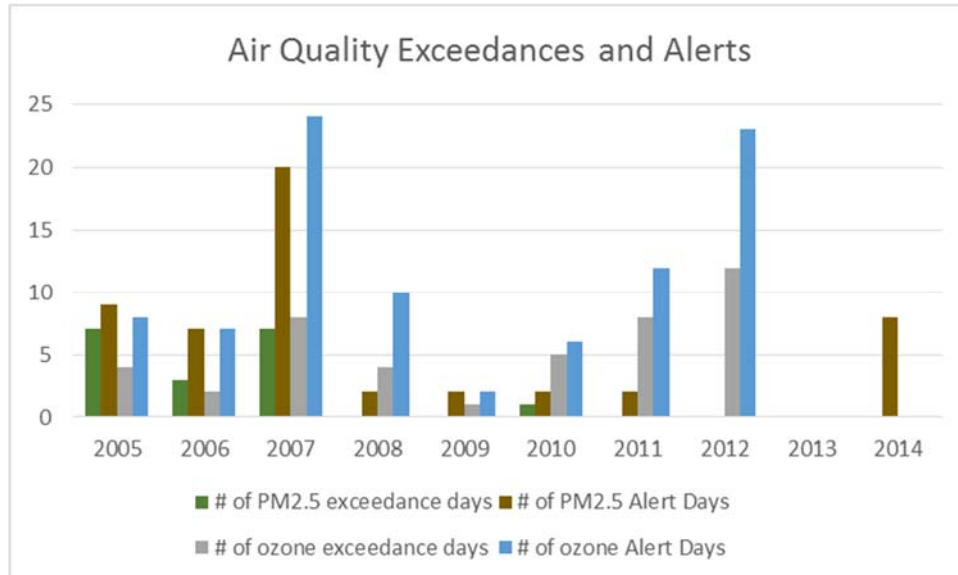
- HIPAA (Health Insurance Portability and Accountability Act)
- Universal Precautions and blood borne pathogen exposure
- Air quality planning, science, and technology
- Environmental exposures and health
- Weather forecasting
- Public Health Department standards for accreditation
- Community health assessments and improvement
- Quality Improvement

## **SCIENCE**

- Maintained and updated records of air quality indicators including monitoring and emission inventory data in the Tri-State region.
- Produced year round fine particulate matter (PM2.5) and ozone season numerical pollution forecasts. The goal of our forecasting program is to provide information to the public about anticipated pollution levels at least a day ahead of time. If pollution is expected to reach NAAQS levels, an “Ozone Alert,” “Particulate Alert,” or combined alert is issued jointly with the Evansville Environmental Protection Agency in order to notify the public to possible detrimental health effects. The secondary message of the alerts is to get people to alter their behaviors in order to reduce their contribution to pollution emissions.

## Air Quality Alert Forecast Discussion and Verification Statistics

No ozone or PM<sub>2.5</sub> NAAQS exceedances were monitored in 2014. No Ozone Alerts were issued. Eight Particulate Alerts were issued, resulting in a false alarm rate of 100%.



\* Between 2005 and 2007 ozone exceedances were recorded when ozone levels were 85 ppb or above. In 2008 through 2014 exceedances were recorded when ozone levels were above 75 ppb.

The following charts display standard forecast statistics for NAAQS exceedances only (Alerts are called if a NAAQS exceedance is expected). Blanks indicate no value could be calculated. Ozone Office monthly reports compile statistics relative to the moderate air quality level, and include information and discussions related to daily forecasts.



BIAS A BIAS of 1 indicates neither under predicting nor over predicting. A BIAS of greater than 1 indicates over predicting.  
 FAR A False Alarm Rate of 0 is perfect.  
 POD A Probability of Detection of 100 is perfect.  
 CSI A Critical Success Index or Threat Score of 100 is perfect.





## **COMPLIANCE**

- The Evansville area continues to maintain compliance (attainment) with the current ozone and PM2.5 NAAQS.
- Formally commented on IDEM's 2015 monitoring network plan.
- Tracked statutory developments and regulatory rulemaking related to air quality issues.
- The Ozone Officer attended meetings of the Indiana State Environmental Rules Board as an appointed representative of local government.

## **EDUCATION**

The Ozone Officer was an active participant in meetings and worked on projects with the following ongoing stakeholder groups:

- City of Evansville Environmental Protection Agency
- Indiana Department of Environmental Management
- National Association of Clean Air Agencies
- Southwest Indiana Chamber of Commerce Environmental Committee
- WNIN Advisory Committee for "Healthy Air: Healthy Communities" series
- VCHD HIPAA Advisory Workgroup

Other education efforts include:

- Air Quality Action Day, Ozone and Particulate Alert notification and education program with the Evansville Environmental Protection Agency.
- Provided information and data on local air pollution issues (monitoring, emissions sources, air quality standards and trends, laws and regulations, research results, and pollution alerts) to Health Department interns, local university students, environmental consultants, and other members of the public and media.
- Maintained the air quality forecast page on the County website, and posted other departmental material to the Health Department website. Coordinated timely posting of important information in response to public health emergencies.
- Tweeted mission oriented information for the Health Department on the social media website "Twitter."
- National Night Out.



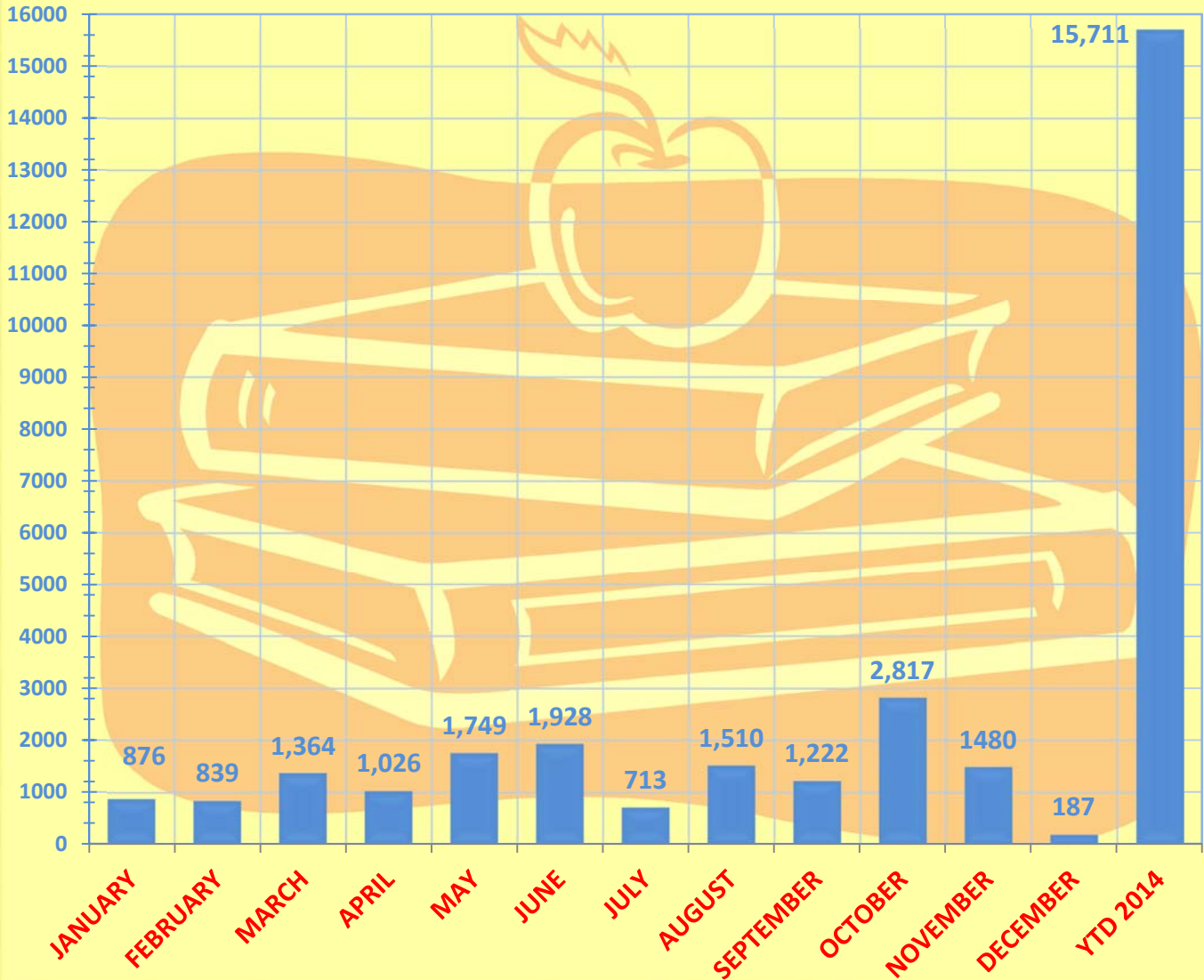
## HEALTH PROMOTION & CHRONIC DISEASE DIVISION

Highlights for the 2014 year for the Health Promotion Division include reaching 15,711 residents through our chronic disease screenings, wellness screenings, health fairs and health promotion classes. Three of the most successful services include our free stop smoking, weight loss classes and our community blood pressure screenings. Health Promotion strives to provide educational programs, support, and services that meet our community needs, in an effort to prevent or reduce the instances of chronic disease.

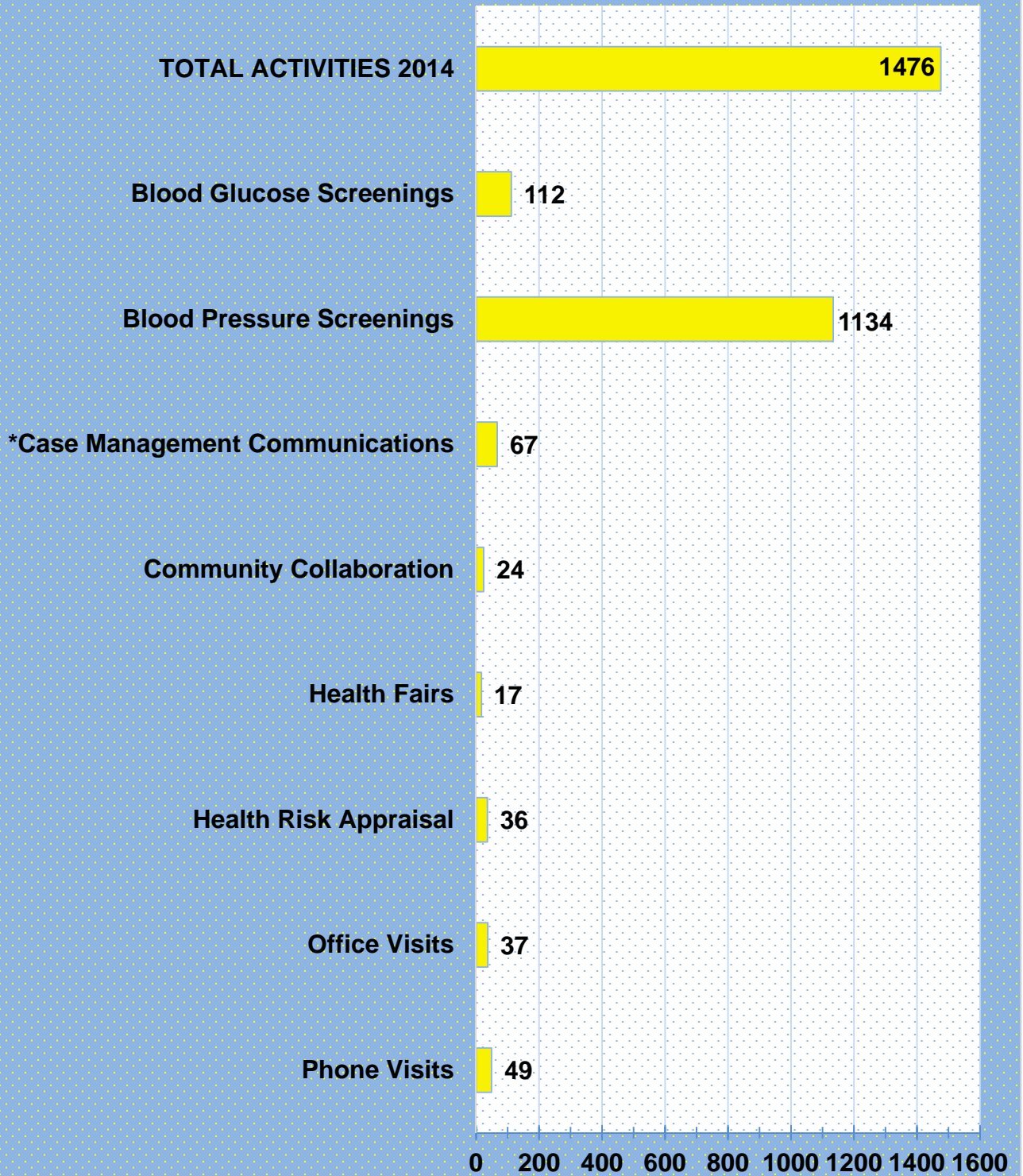
The goal for Chronic Disease Division is to reduce the burden of chronic disease in our community by providing free blood pressure and blood sugar screenings. These services help clients manage their chronic diseases in between physician office visits. Free blood pressure screenings are offered at 7 offsite locations in Vanderburgh County each month. Blood pressure, blood sugar, and other vital signs are documented in a personalized log book and sent with the client. This has proven to be an effective tool in the effort to keep clients aware and involved in their healthcare, with the ability to share the history of blood pressure and blood sugar trends with their physician.

Please see the following graphs for our division's stats and outcome measurements:

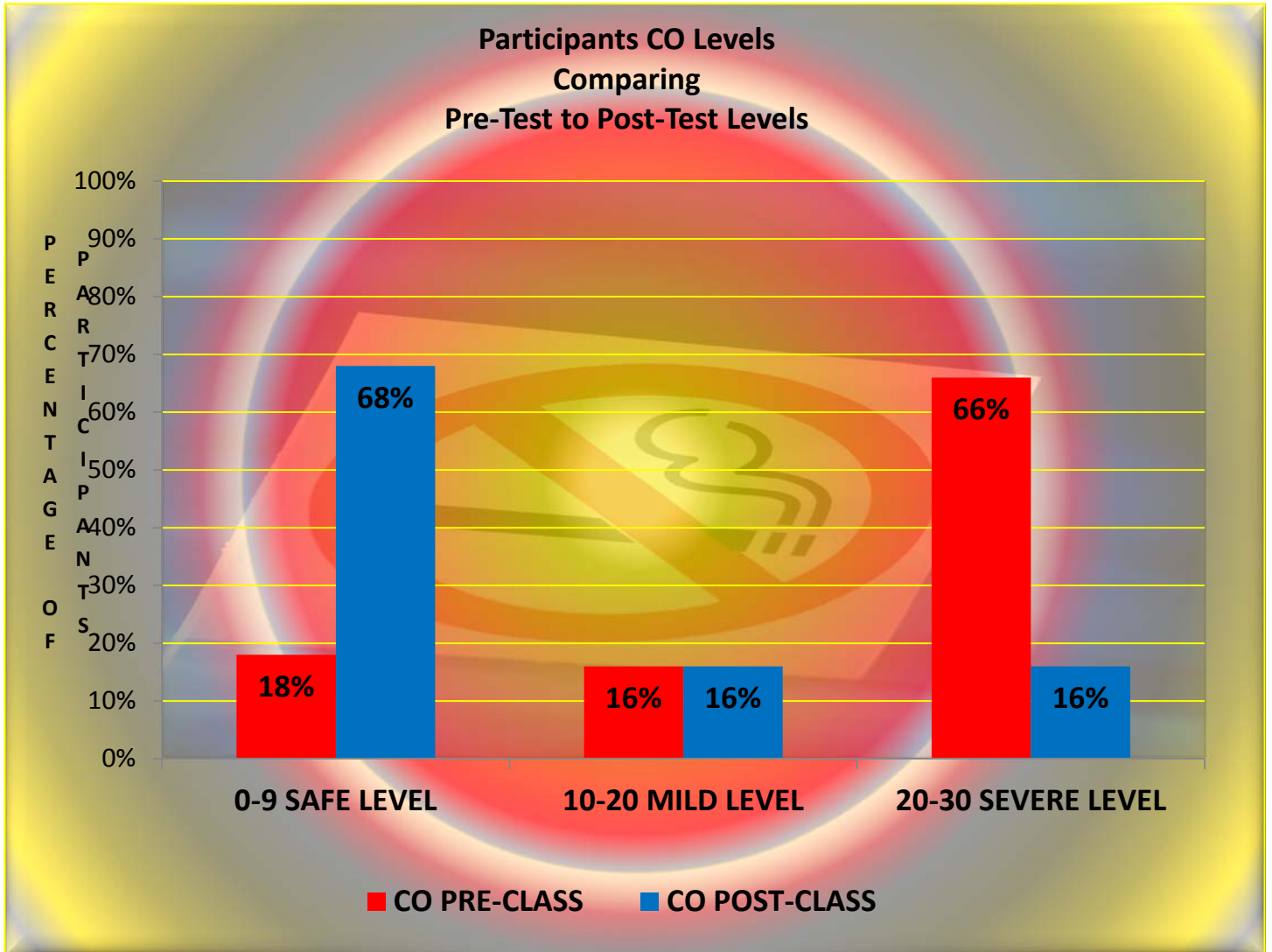
## Number Of Participants Reached Through Health Promotions Programs = 15,711



### 2014 CHRONIC DISEASE ACTIVITIES

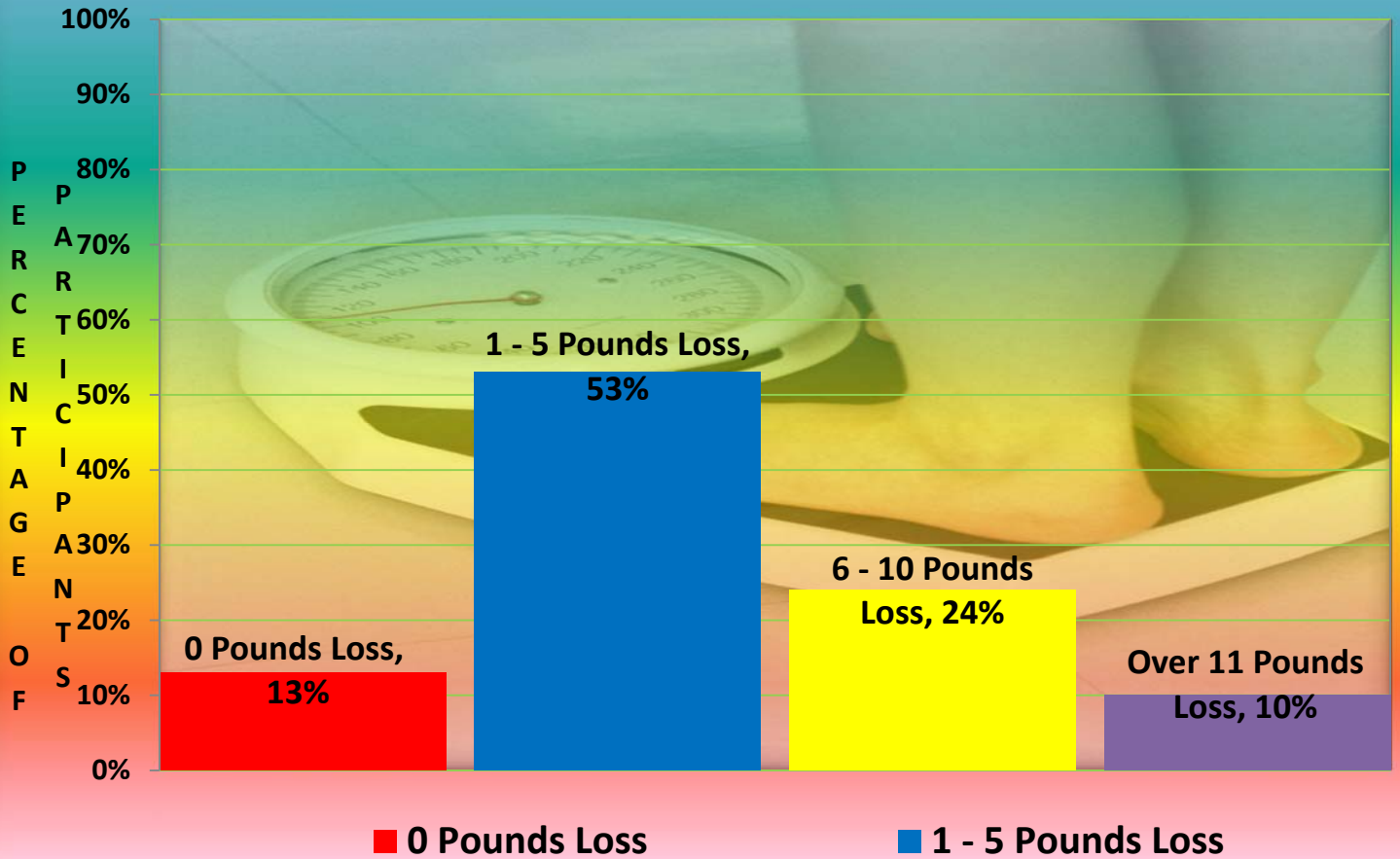


**HEALTH PROMOTIONS/STOP SMOKING PROGRAM**  
**OUTCOME MEASUREMENTS 2013 – 2014 CLASSES**



**Class participants went from 18% blowing in “Safe Levels” to 68% blowing in “Safe Levels”**

### Participants Weight Loss



**TOTAL WEIGHT LOSS = 1083.5 POUNDS**

**At the end of the 5 week program 87 % of our 292 participants had lost weight with a total of 1083.5 pounds!**



## LABORATORY DIVISION

### GOALS

Our goals, as always, are to provide the highest quality of specimen testing to aid in the diagnosis and prevention of disease in our community, and to promote the health of area residents by providing education in the areas of lead poisoning prevention and safe water standards for drinking water, public pools, recreational water, source water, surface water, and wastewater.

### RESPONSIBILITIES AND SERVICES PROVIDED

The Vanderburgh County Department of Health Laboratory provides testing services in support of health department clinics and divisions. On-site testing allows rapid turnaround of test results with often same visit treatments. The laboratory also provides bacteriological water testing for drinking water, public pools, recreational water, surface water, source water, and wastewater.

### HIGHLIGHTS AND ACCOMPLISHMENTS

Our laboratory is certified by the Health Care Financing Administration for Clinical Laboratory Improvement Amendments (CLIA) Laboratory Compliance for overall operation as well as by the Indiana State Department of Health (ISDH) for the bacteriological examination of public waters.

A total of 16,180 tests and services were provided in 2014. Tests performed included:

- A. culture and/or identification of *Neisseria gonorrhoeae* (GC), , *Chancroid identification*, *Trichomonas vaginalis*, yeast, NGU (nongonococcal urethritis), and bacterial vaginosis,
- B. testing for HIV, syphilis, and whole blood lead levels, and
- C. bacteriological examination of drinking water/ice samples, public pools, recreational water, surface water, source water, and wastewater.
- D. cholesterol and glucose screenings

We continue to be an active participant in the CDC's Systematic Tracking of Elevated Lead Levels and Remediation (STELLAR) Program. In 2014, our laboratory screened 463 children in southern Indiana for lead poisoning. Screening results indicated 9 children as lead poisoned. Lead poisoning in children continues to be a problem especially in Vanderburgh County since 41.5% of its housing units were built prior to



1950. In 2014, the lead program participated with the state lead program to actively track and follow up on cases of children with elevated lead levels. The Laboratory receives solar files from the Indiana State Department of Health containing lead testing results on children in our county, regardless of the testing site. The laboratory imports these files, enters the results into the STELLAR program, and is active with our nursing department following up with lead poisoned children and their families. We are also working with local health providers as well as participating in off-site clinics (Head Start and others) to increase the number of children screened. Over the past several years we have transitioned from being a regional reference laboratory for lead testing to focusing our efforts on Vanderburgh County residents and children with strong case management and follow up to help ensure better outcomes and remediation. We switched to Lead Care II analyzers which have the ability to run point of care, real time whole blood lead results and allow us to identify high risk individuals at the time of service, thus being able to provide guidance and counseling to the exposed families in a much more expedient manner.

Safe drinking water is an increasingly important issue. In 2014, 521 well and municipal samples were tested for bacterial suitability. An important part of providing testing is gaining the opportunity to educate homeowners with wells on drinking water safety. We also provide testing to several municipal water systems in the Southern Indiana area and report unacceptable test results to IDEM (Indiana Department of Environmental Management) immediately for follow up and remedial measures. The Laboratory also fields a wide variety of drinking, recreational, and wastewater questions from the general public and provides referral information for testing requirements beyond the scope of our testing menu.

Every year the health department staff works diligently with pool operators to provide the public with safe swimming pool water. In 2003, the State of Indiana updated the Swimming Pool Rule (410 IAC 6-2.1) expanding the definition of public swimming pool to include competition pools, diving pools, plunge pools, wave pools, and spas. We serve as a regional certified water testing Laboratory for a large portion of Southwestern Indiana public pools, hotels, and spas. In 2014, 3,167 samples were tested for bacteriological safety. The Laboratory works in close cooperation with the Environmental division to notify them when pools have unacceptable samples so remedial action can be taken in a timely manner.

In 2014, we continued to offer testing for determining the bacteriological quality of water by providing a method for MPN (most probable number) of *E. coli* in recreational water, source water, surface water, and wastewater. We tested 193 of these samples in 2014.

The Laboratory continues to provide rapid HIV testing in support of the STD program. Funding cuts have reduced the number of HIV tests performed, but we continue to offer the test in support of our STD clinic and perform proficiency testing on the methodology. In 2014 the VCHD Laboratory performed 174 rapid HIV tests.





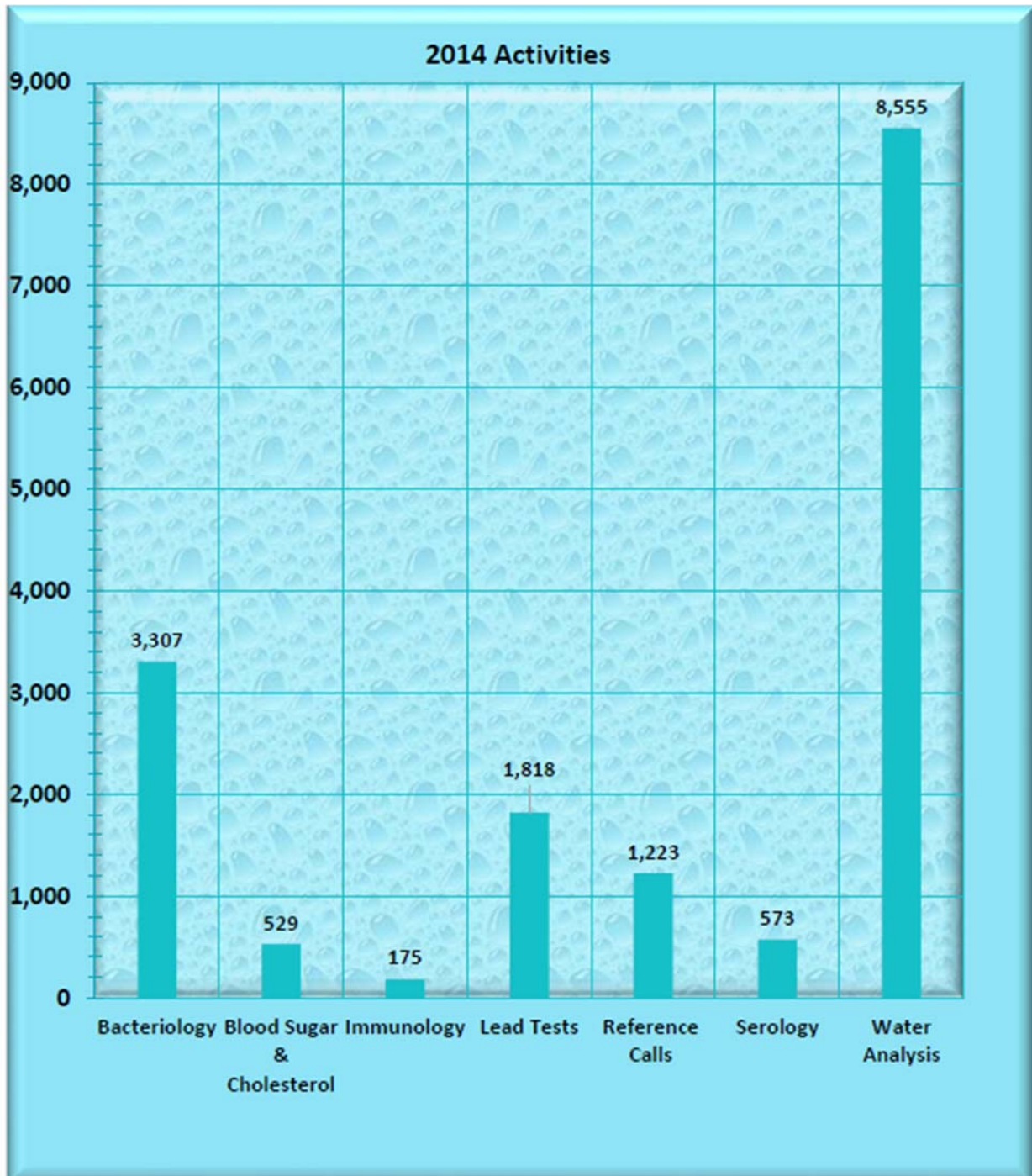
The advent of DNA testing has required the city and county law enforcement agencies to greatly increase their need for blood drawing services to ensure proper sample collection and integrity. The Vanderburgh County Health Department Laboratory continues to provide this service for our local police agencies when requested.

The Laboratory offers cholesterol and glucose testing during health fairs and employee screenings. In 2014 we tested 529 glucose or cholesterol samples.

Our laboratory technical staff consists of experienced Medical Technologists and a Medical Laboratory Technician who are board certified by the American Society for Clinical Pathology (ASCP). Our dedicated and professional staff participates in quality assurance, quality control, proficiency testing and continuing education opportunities to assure the highest level of test performance and the highest quality of test results.



**Laboratory Stats For 2014**  
**Total Services/Tests Provided: 16,180**





## Nursing/Outreach Division Mission Statement

Work in partnership with the community to promote and preserve health and prevent disease. The Nursing/Outreach Division is comprised of three inter-related programs.

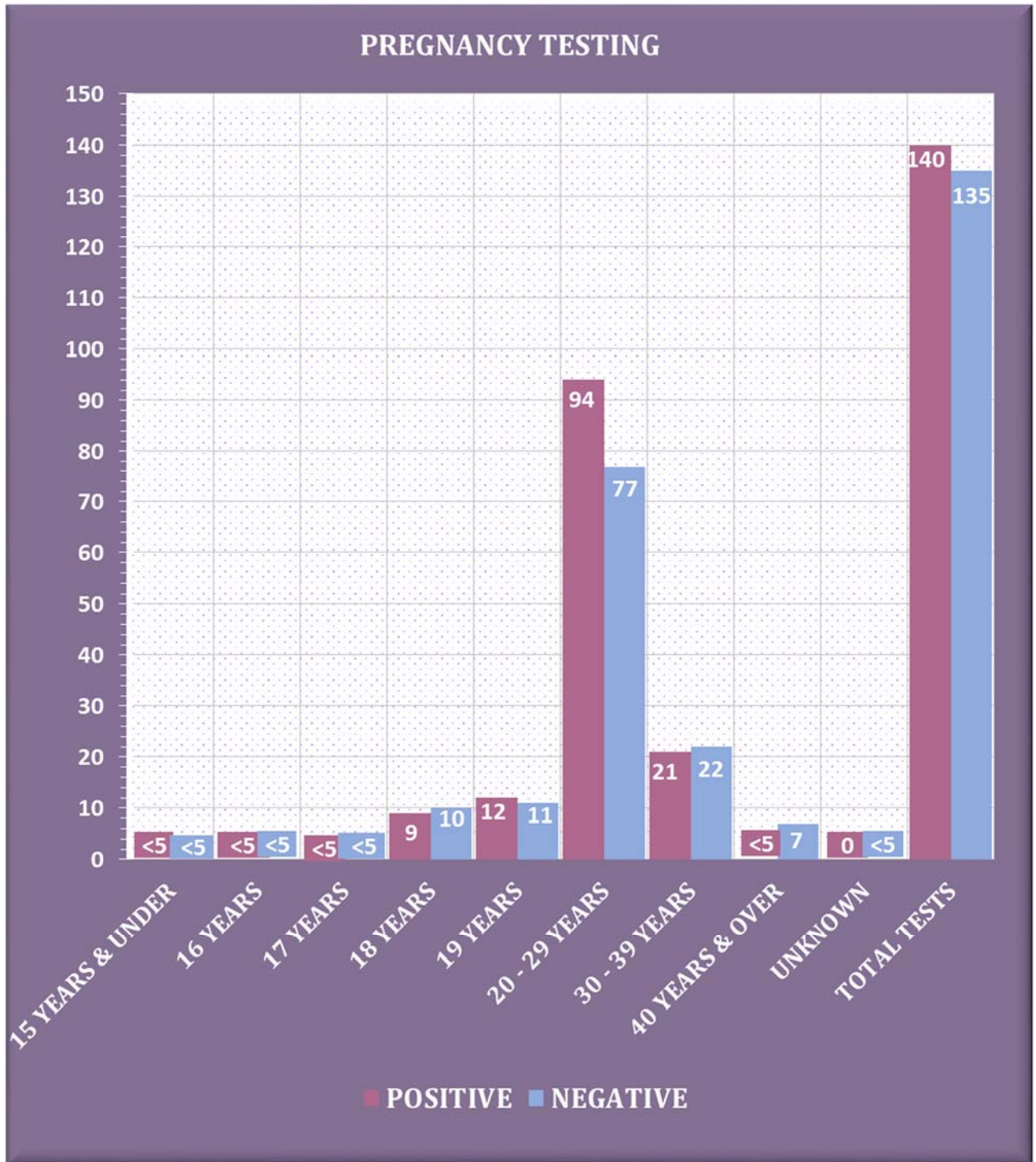
### **1. Nursing/Outreach Services and Maternal Child Health Grant**

Public Health Nurses (PHN's) with Bachelors of Science degrees in Nursing (BSN) and a Community Health Worker (CHW) worked primarily in the homes of clients to positively impact the health of our community. Based on the individual's or family's needs, education was provided on a variety of topics, including healthy pregnancy, parenting skills, proper growth & development of children, safety, lifestyle improvements, and chronic disease management. In 2014, there were 2299 encounters with clients, an increase of 273% over the previous year, reflecting a substantial increase in the number of referrals from our community partners.

Affiliation agreements in conjunction with local universities that have nursing programs (UE, USI, Ivy Tech, and Vincennes University) provided an exciting educational experience for those students as well as for 1<sup>st</sup> year students attending IU School of Medicine. The PHN/Outreach Team was honored on August 26th for our many years of community service with a mayoral proclamation designating the day as "Vanderburgh County Public Health Nurse Day".

A primary focus of the MCH grant staff is early prenatal care and promoting a healthy pregnancy supported by regular visits to the homes of clients who are at risk for poor pregnancy outcomes. The CHW works in collaboration with the PHN by also providing visits to reinforce the plan of care and assisting with accessing resources.



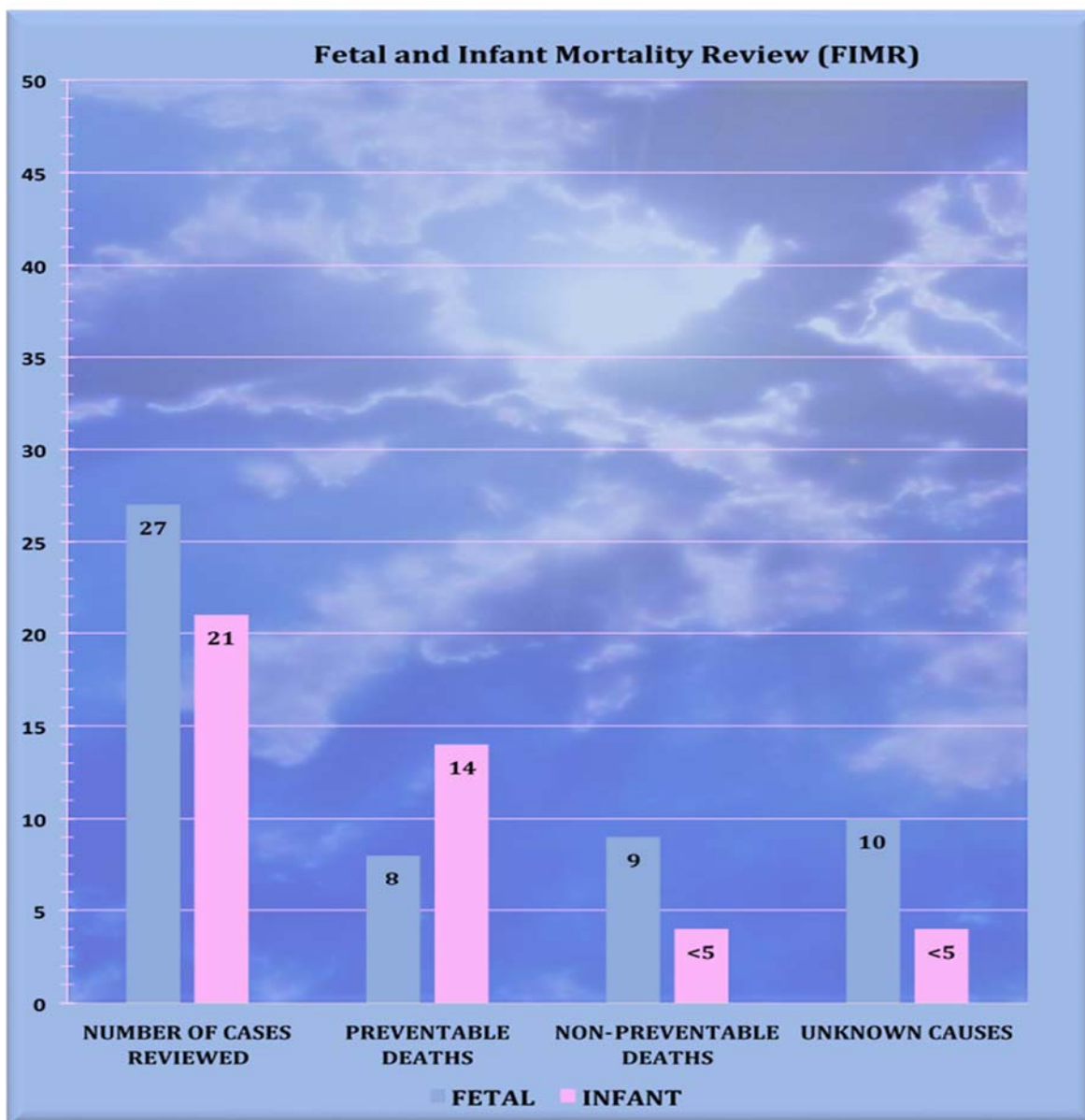


### 3. Fetal & Infant Mortality Review (FIMR)

The VCHD lead our community partners in the review process by providing the coordinator as well as several review team members. This process brought a



community team together to examine confidential and de-identified cases of infant and fetal deaths that occurred to residents of southwestern Indiana. These reviews helped identify social, economic, public health, and safety issues as they relate to the tragedy of fetal and infant loss. This is an extremely valuable tool in identifying possible contributing sentinel events and interventions to address those problems. The findings were presented to the Regional Perinatal Advisory Board as well as various educational venues focusing on related topics to increase public awareness. The subsequent recommendations were then taken to the state level for action if indicated. This has led to several recent local programs such as Safe Sleep for Babies and reporting to the Consumer Products Safety Commission.





## **WOMEN, INFANTS & CHILDREN (WIC) PROGRAM** **Mission Statement**

**To safeguard the health of low-income women, infants and children.**

### **GOALS**

The goals of the Special Supplemental Food Program for Women, Infants, and Children (WIC) are to teach the relationship between proper nutrition and health, to help individuals develop better dietary habits, and to prevent nutrition-related problems by showing participants how best to use the WIC foods with other nutritious foods for a proper diet. A major goal of the WIC Program is to improve the nutritional status of infants; therefore, WIC mothers are encouraged to breastfeed their infants, unless medically contraindicated.

### **RESPONSIBILITIES AND SERVICES PROVIDED**

WIC is a Federal grant program which provides nutritious foods, nutrition education and referrals to health and other social services to participants at no charge. WIC provides supplemental foods rich in protein, iron, calcium, and vitamins A and C. Four Registered Dietitians make up the staff that conduct all individual nutrition education.

The Breastfeeding Peer Counselor program continues to support breastfeeding with three Peer Counselors and a part time Breastfeeding Coordinator. The Breastfeeding Coordinator is a registered nurse and a Certified Lactation Specialist. Peer counselors are mothers who have personal experience with breastfeeding and are trained to provide basic breastfeeding information and support to other mothers. The peer counselors teach an "Infant Feeding Class" three times per week that is offered to all prenatal WIC participants.

### **HIGHLIGHTS AND ACCOMPLISHMENTS**

The breastfeeding initiation rate continued to increase from 66.9% in 2013 to 69.6% in 2014. Through the WIC breast pump loan program, the peer counselors issued 148 breast pumps to assist women in achieving their breastfeeding goals.

WIC participated again in the USDA Farmer's Market Program. Three \$6.00 checks were issued to 800 families during the period of June – September. However, only 440 households redeemed at least one check. Vanderburgh County achieved the fourth highest redemption rate in the state at 55.0% compared to the state at 49.35%.



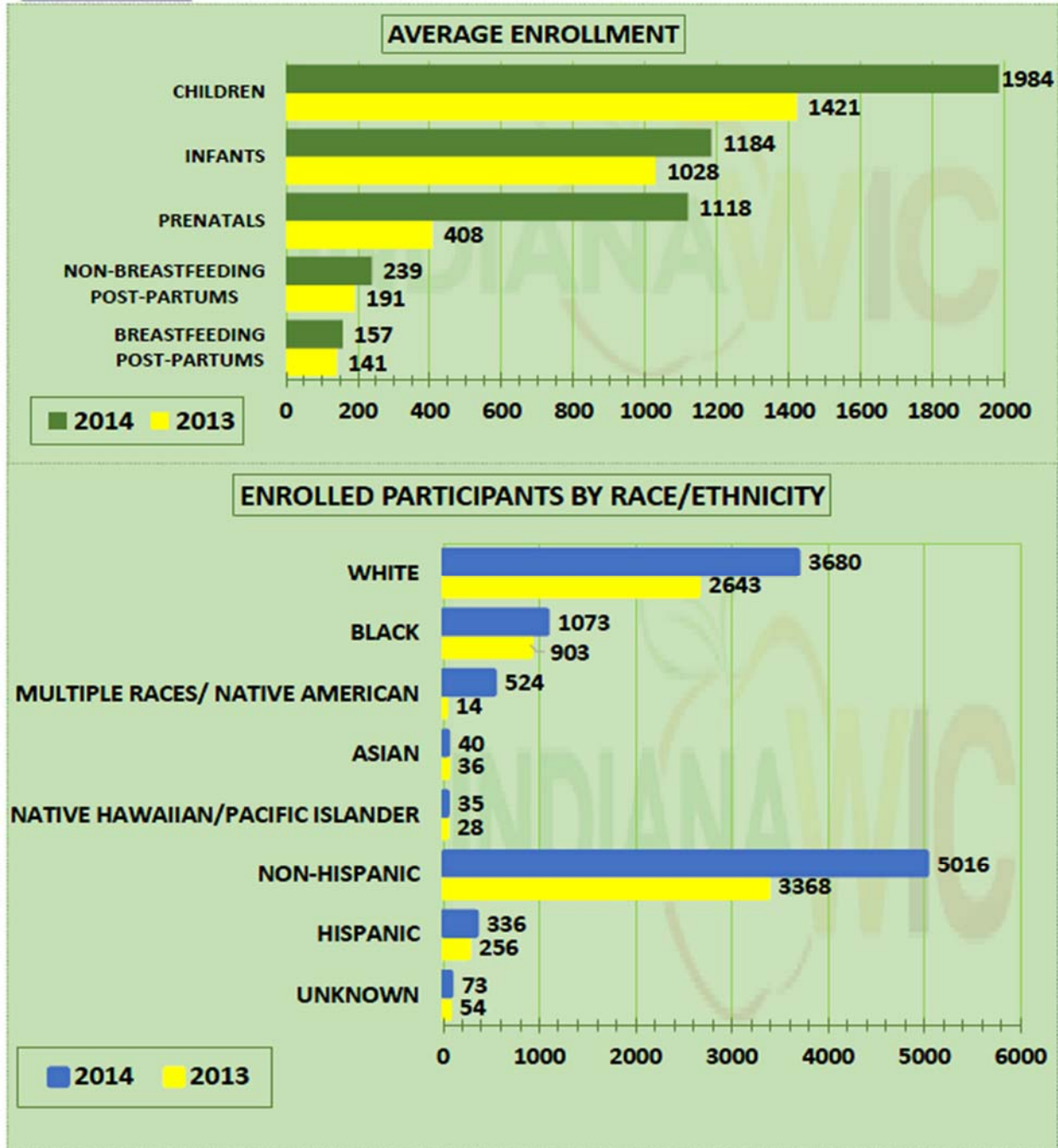
Throughout the year the WIC Program offered clinic observations for nutrition and nursing students from University of Evansville, University of Southern Indiana, IVY Tech and ITT. WIC hosted one Dietetic intern for one week from Indiana University. WIC has teamed with Purdue Extension Family Nutrition Program to offer nutrition education classes 3 times per week. Participants may choose to be scheduled for a class at their quarterly appointment. The classes focus on reading food labels, portion sizes, increasing activity and other general nutrition topics.

The WIC clinic has increased its participation of outreach in the community. For example; the Healthy Families Christmas party, Mom and Baby classes at St Mary's Medical Center, and giving lectures about WIC to Community Nutrition classes at The University of Southern Indiana.

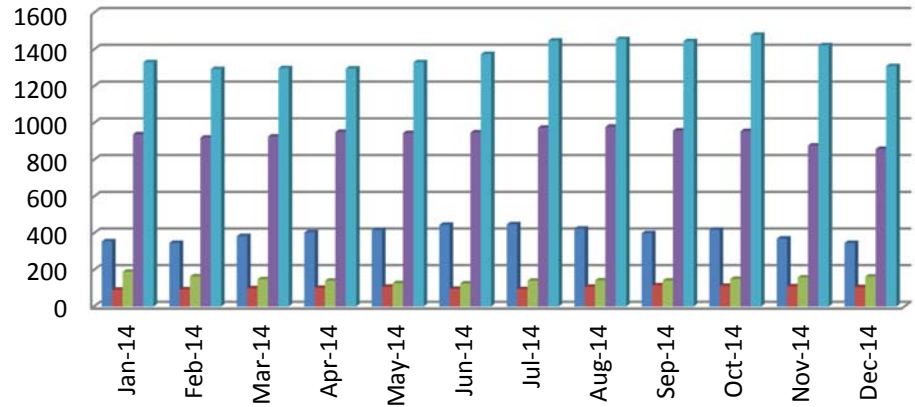
The most successful outreach program has been the certification of newborns and breastfeeding mothers at St Mary's Hospital for Women and Children. By certifying participants in the hospital, they are able to receive their WIC checks 10 days sooner; therefore able to provide nourishment for their baby without having to wait for an appointment in the WIC clinic. A goal for the current year is to have a full time staff member completing certifications on newborns and breastfeeding mothers at Deaconess Women's Hospital. The volume of births at DWH is approximately 70% of all births in Vanderburgh County. WIC will then be able to reach out to nearly all delivering mothers in the Evansville area.



**The Vanderburgh County WIC program had an assigned caseload of 3,091 participants in 2014:**



### WIC PARTICIPATION



	Jan-14	Feb-14	Mar-14	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14
■ Prenatal Women	355	346	384	404	416	445	448	424	400	418	370	346
■ Breastfeeding Women	91	93	99	101	107	95	94	107	115	112	109	105
■ Non Breastfeeding Women	189	164	148	140	127	125	140	142	141	150	158	163
■ Infants	938	920	926	951	945	948	974	979	958	955	877	858
■ Children	1330	1293	1297	1296	1330	1374	1448	1456	1444	1479	1422	1309

\*NOTE: We were closed 3 days in November and 3 days in December due to Holidays and no appointments could be scheduled.



## VITAL RECORDS DIVISION

### GOAL

The Vital Records Division's goal is to maintain accurate and complete vital event records such as birth and death certificates along with legal changes to those records.

### RESPONSIBILITIES AND SERVICES

The Vital Records Division's primary duty continues to be the registration of vital events (births and deaths) that occur in the City of Evansville and Vanderburgh County. The statistics gathered by this division are the basis for identifying major health trends; identifying problems and determining areas of need; evaluating the effectiveness of public health efforts; and helping formulate public policy regarding the allocation of health resources and funds. In addition, it helps to ascertain whether new programs are needed to lower the number of preventable deaths.

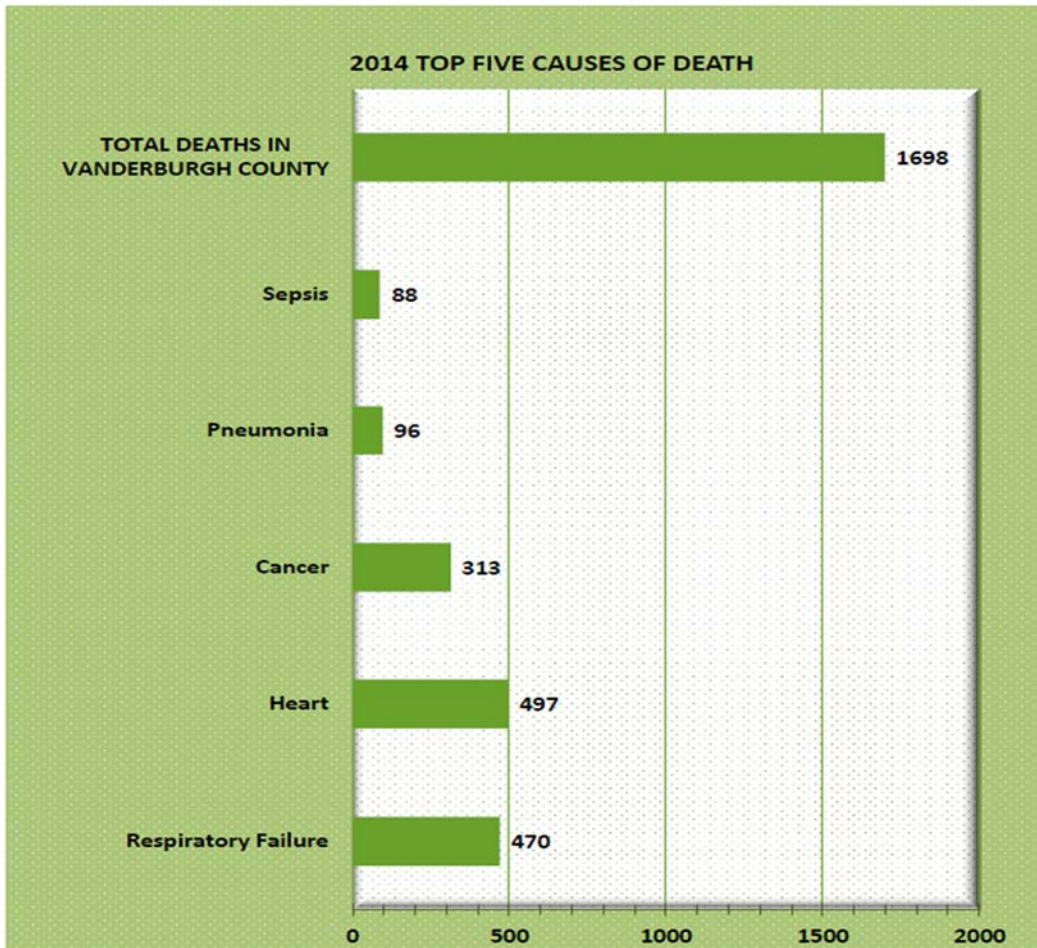
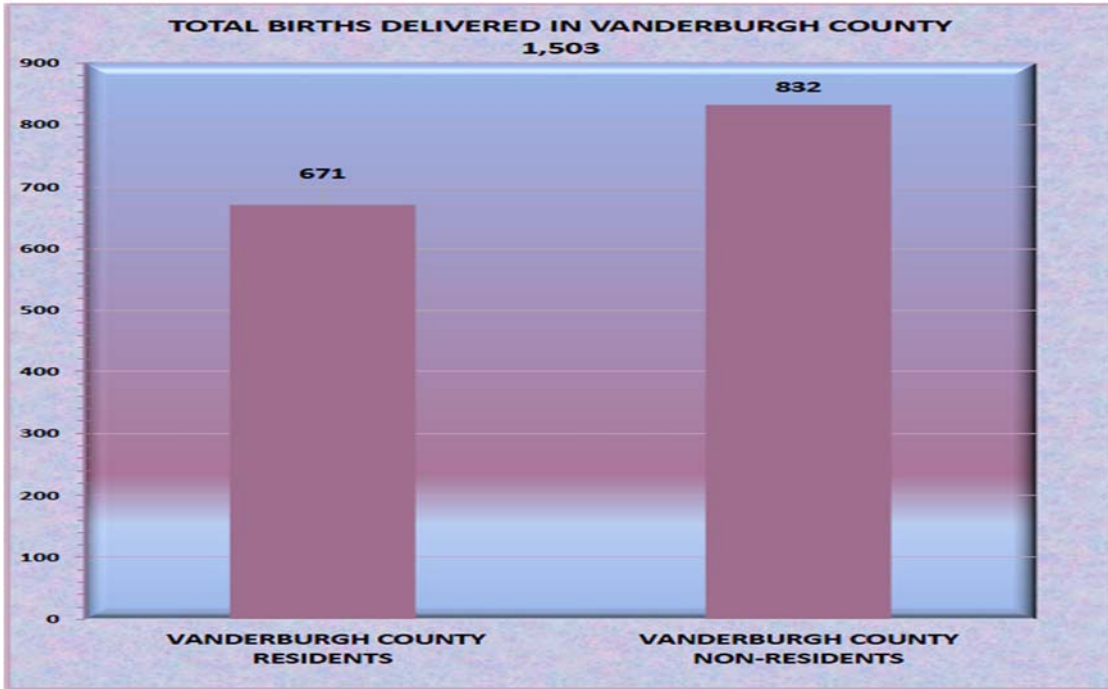
This division is charged with issuing certified birth certificates and death certificates, filing a home birth, executing Paternity Affidavits, Paternity Affidavits upon marriage, and issuing other vital event permits and documents designated by the State, including birth records due to adoptions, amendments, and/or court ordered changes.

### HIGHLIGHTS AND ACCOMPLISHMENTS

In 2014, Vital Records adapted to a recent Indiana Supreme Court ruling clarifying public access to death records.

There were a total of 1,503 births in Vanderburgh County. Of those, 671 were Vanderburgh County residents. There were 2,540 deaths in Vanderburgh County and of those 1,698 were Vanderburgh County residents. This division issued 8,452 birth certificates and 13,431 death certificates to requesting individuals that either came into our office or mailed in a request.

The Vital Records Division participated in the 6<sup>th</sup> annual Homeless Connect of Vanderburgh County providing free birth certificates to eligible participants. This free event helps those in our community who are homeless or near homeless. A birth certificate is a key document needed by anyone trying to obtain identification, employment and housing assistance. The Vital Records Division is proud and honored to be a part of such an event to assist our community.





## FINANCE DIVISION

### GOALS

Manage the financial records of the Vanderburgh County Health Department and awarded grants in an accurate and professional manner.

### RESPONSIBILITIES AND SERVICES PROVIDED

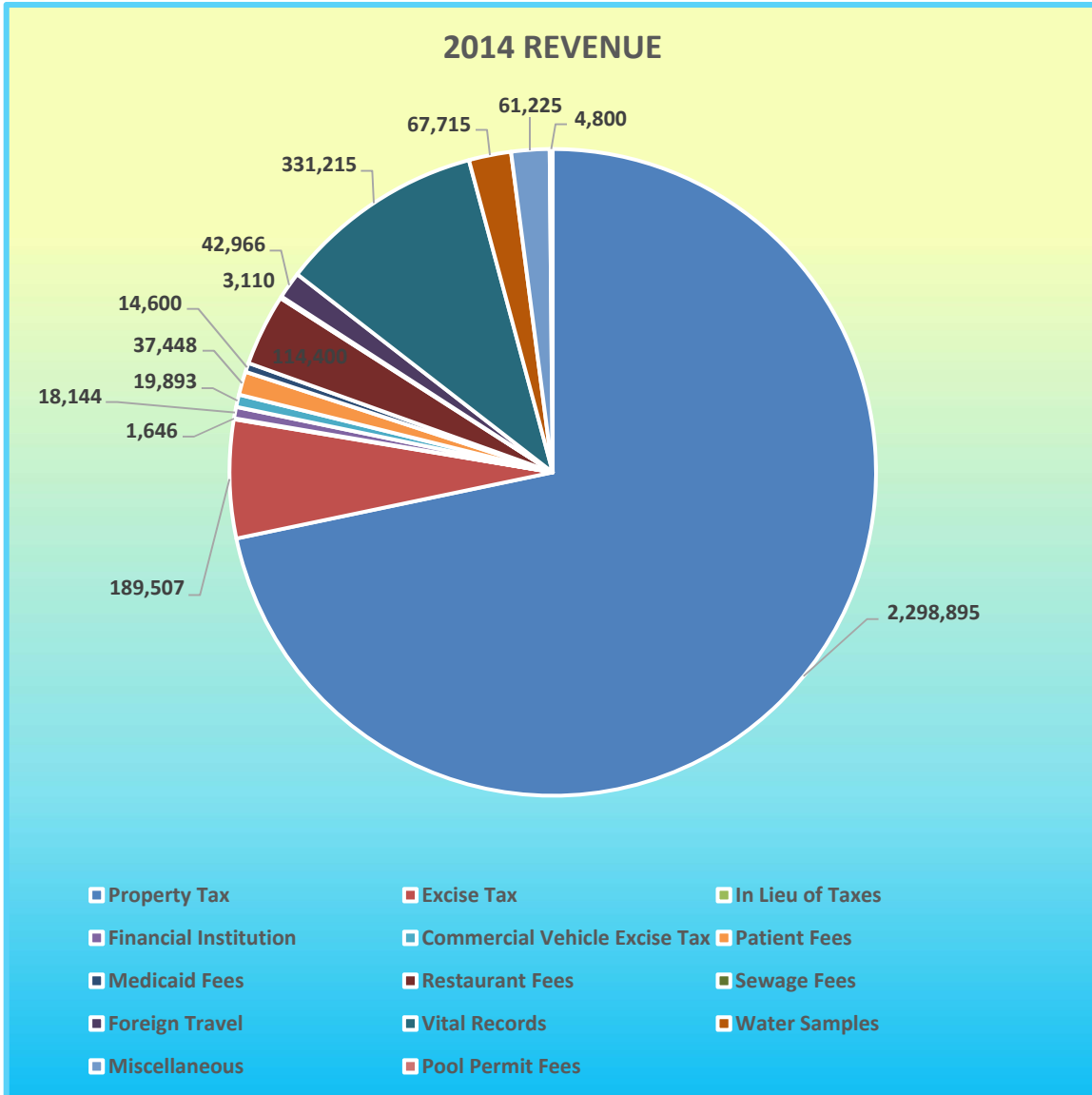
Directs all accounting and business office functions of the Health Department. This includes preparation and administration of Health Department and grant budgets and all financial accounts for revenue, time accruals, payroll and expenditures.

### HIGHLIGHTS AND ACCOMPLISHMENTS

The year of 2014 found the Finance Division busy with two major projects: continuation of the 2013 rollout of an Electronic Medical Record System and the implementation of a Time Clock System to track time accruals.

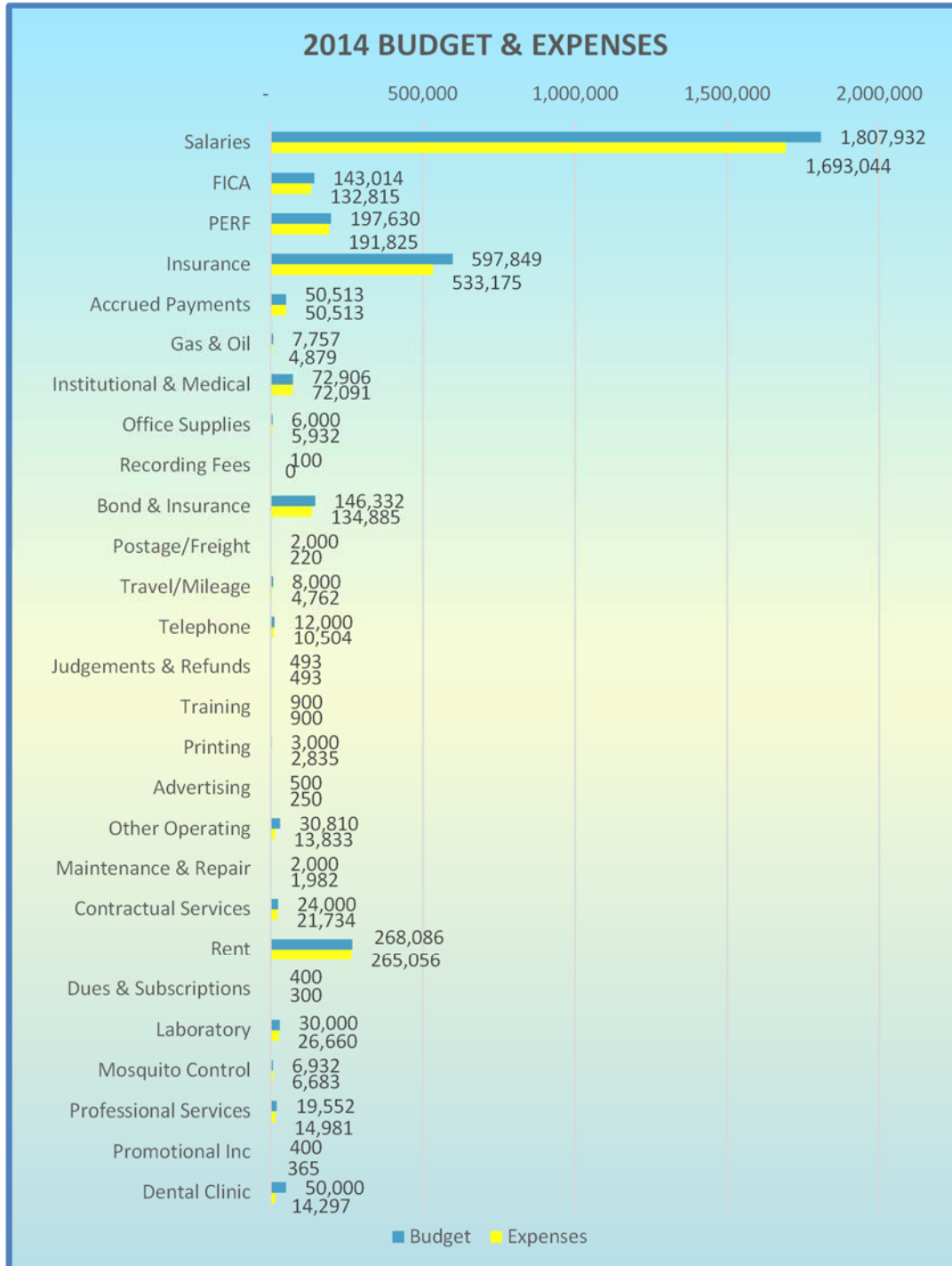
The Health Department, partnering with the Deaconess, St. Mary's, Echo, 4C of Southern Indiana, Inc., Evansville Vanderburgh School Corporation and the Community Patient Safety Coalition, was awarded an Immunizations Grant by the Indiana State Department of Health to begin January 2015.

Total Revenue from taxes and fees decreased by 6% from 2013. While Taxes decreased (\$296,889), Fees for Services increased \$80,718 for a total of (\$216,171). The Health Department spent 93% of the budgeted Salary and Fringe and 87% of the Operations budget for the year.

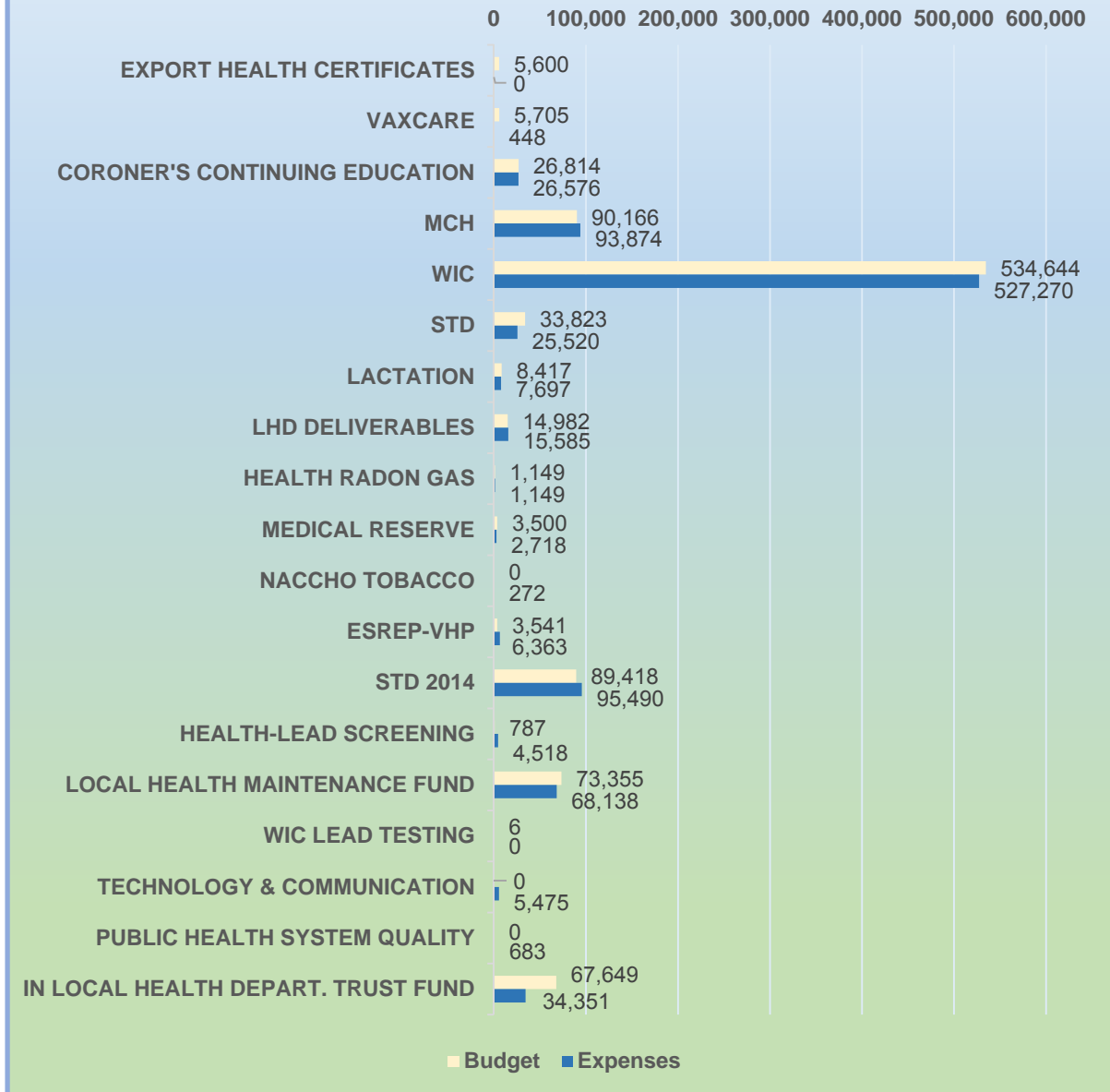




## VANDERBURGH COUNTY HEALTH DEPARTMENT 2014 BUDGET AND EXPENSES



## 2014 FINANCIAL REPORT







## CLIENT SATISFACTION SURVEY

During this year, we instituted a Client Satisfaction Survey. We are going to continue to make this more meaningful in the years to come.

