

Central Michigan District Health Department 2010 Board of Health Annual Report



**Accredited with Commendation by the Michigan Local Public Health
Accreditation Commission**

Mission Statement:

The mission of the Central Michigan District Health Department is to promote health and physical well-being by providing preventive health care, education and environmental safety to all members of the community.

Vision Statement:

The vision of the Central Michigan District Health Department is to become recognized by the public as the local advocate in promoting, assessing and safeguarding public health and the environment.

A Message from the Health Officer

Greetings to the residents of Arenac, Clare, Gladwin, Isabella, Osceola and Roscommon counties,

On behalf of the Central Michigan District Board of Health and Staff I am pleased to present the agency's 2010 annual report. Please take a few moments to review the many stories in the report which tell of the work and dedication of our staff and the variety of services we offer. Our mission is to promote health and physical well-being by providing preventive health care, education and environmental safety to all members of the community and I hope you will agree after reading through the report that we have worked in accordance with our mission.

Central Michigan District Health Department was very pleased to see the passage of the Dr. Ron Davis Smoke-Free Air Law in May 2010 which bans smoking from all public buildings including bars and restaurants. Local public health departments were given the enforcement activities associated with the law, but within the Central Michigan area very few enforcement actions were necessary as most businesses have been in compliance with the law.

Internally, the agency implemented a new clinical software program (INSIGHT) which allows for better patient records, billing and budgeting. We also implemented a paperless purchasing system which moves us towards meeting the goal of becoming more "green" and environmentally friendly. These successful projects were a collaborative effort between and among all of our divisions and were truly team efforts.

The CMDHD continues to sponsor the Together We Can! Initiative which is a district-wide health improvement planning process. CMDHD was presented with the Michigan Department of Community Health's 2010 Director's Award for outstanding public health programming. Together We Can! is becoming nationally recognized for its achievements.

CMDHD continued to implement the components of its strategic plan which is based on the ten essential public health services. Throughout 2010, the agency enhanced its internal communication, improved its external marketing efforts, developed materials that were culturally and linguistically appropriate, sought opportunities to partner with universities to assist with research, maintained active surveillance to stop and prevent the spread of communicable diseases and environmental health hazards and implemented efforts to develop a comprehensive staff development plan.

Many of the most note-worthy accomplishments of the Central Michigan District Health Department were achieved without additional funding, but because there is a sense within the agency that "it is the right thing to do".

Please do take some time to read through the report and contact me with your feed-back, questions or concerns. We are always searching for ways and ideas to improve our performance. Your ideas are welcome.

Have a healthy day!

Mary Lynn Kushion, MSA
Health Officer
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Administrative Services Division

There are many stories to tell in Public Health. These stories include the success that is felt when a child comes in for an immunization that will protect him/her from getting sick with a preventable disease, a family that is building a house for the first time and is provided assistance in getting the proper permits to keep their drinking water safe, or the elderly that get their annual flu shot to keep them feeling well during the winter. All of these stories tell how the Central Michigan District Health Department works together in their communities to protect their citizens.

There are many people involved in striving to make sure there are plenty of success stories in public health. One group of people, however, is a group that isn't seen very often by the people that turn to the agency for assistance. These are the employees in the Administrative Services Division and are relied upon to provide the financial and human resource support that are needed to insure our communities are protected. These seven employees include:



Sarah Gauthier (3 years of service) and as the Accountant is responsible for overseeing budgeting requirements and financial reporting for the various state and federal agencies that provided financial resources to the agency.

Dana Recker (2 years of service) has the responsibility of accounts payable.



Debbie Bomia (10 years of service) is the payroll processor/Human Resource support employee for the agency.

Elaine Meyer (21 years of service) and Julie Hummel (6 years of service) provide support for accounts receivable, specifically providing assistance for Personal Health Services Programs.;



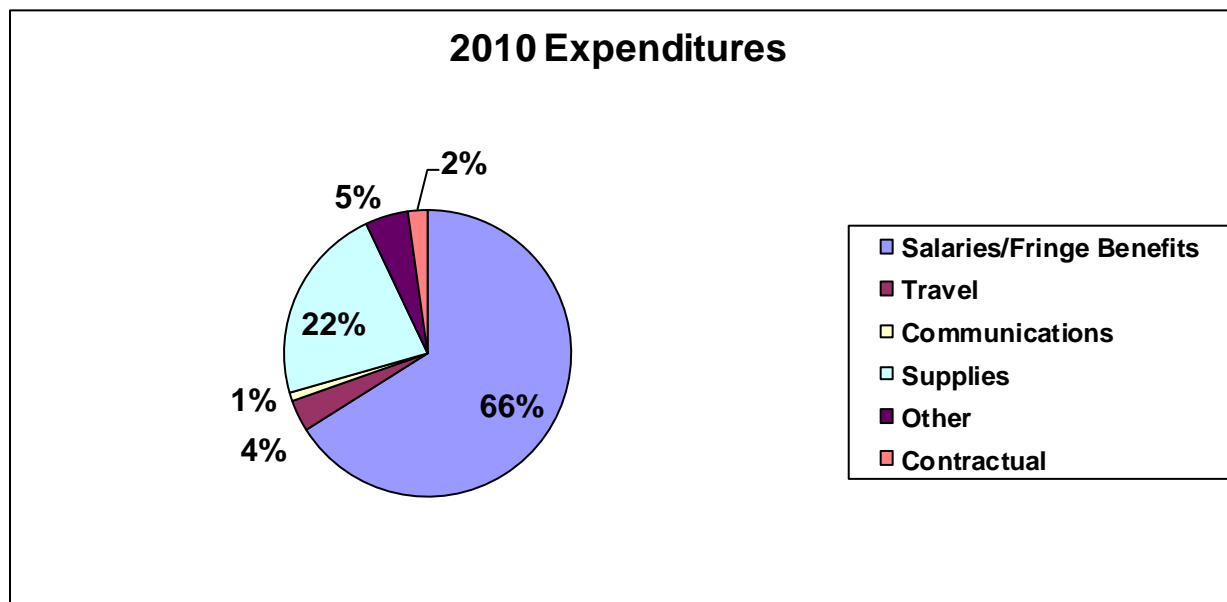
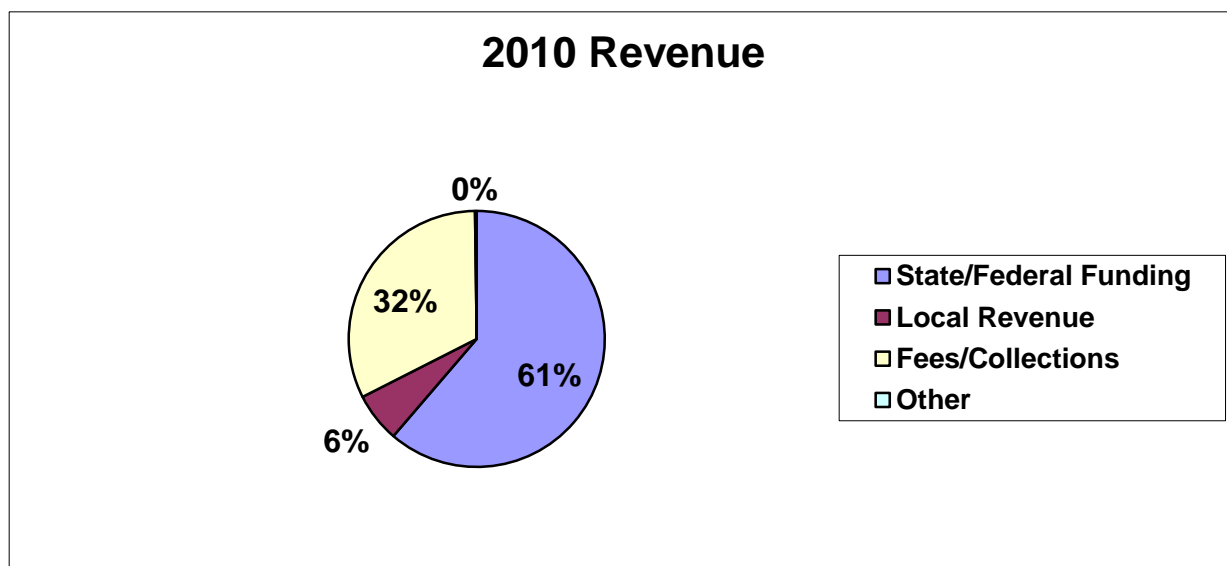
Vickie Hall (20 years of service) is responsible for the requisition and purchasing for the agency.

Carolyn Cardon (21 years of service) is the director of the division, coordinating both the financial support and human resource support for the agency.



These employees are very dedicated to the Central Michigan District Health Department and provide crucial support to keep the financial resources and the human resources of the agency intact. A major accomplishment of the division during 2010 was the paperless requisition/purchasing function of the agency that has made the purchasing of items quicker and more efficient. It is in working together to provide the “behind the scene” support that the Administrative Services division contributes to the story of “Promoting Health Families, Healthy Communities.”

2010 Annual Report Revenue and Expenses



Information Technology Division

2010 was our first full year of using our new Practice Management Software, INSIGHT. It has allowed our agency to accept and bill almost any insurance that presents itself for service.

Our IT staff shrank by a quarter when Vickie Hall, an invaluable IT member since 1994 was reassigned to the Finance department due to a change in her job duties. Thanks for your years of IT service, Vickie!

A new server was purchased in 2010 to be used for the housing of scanned documents. This is still a work in progress but it is our hope to keep all our Human Resources documents online within the next year. After that, we hope to decrease the amount of boxes we have in storage containing piles of permanent financial documents by scanning them and putting them online for future search and retrieval.



The IT Division has nearly 50 years of combined service to CMDHD and have worked together to bring about many technological advancements. We can't wait to see what the future brings. Please visit our web site at <http://www.cmdhd.org> for more information on our agency and the community that we serve.

Personal Health Division Services

Reflecting on 2010, the Central Michigan District Health Department Personal Health Services Division maintained and continued to provide high quality health care services on behalf of those clients and communities in our 6 county district. The Personal Health Staff (PHS) is comprised of 82 dedicated staff members including registered nurses, nurse practitioners, registered dietitians, social workers, hearing/vision technicians, breastfeeding peer counselors and clerical personnel.

The personal health staff also participates with a number of local, regional and State-wide work groups for WIC, Immunizations, Family Planning, Communicable Disease, in addition to local and regional infection control entities. PHS in addition to other division staff represents CMDHD in community collaborative councils in all six of our counties on a regular basis. PHS staff members also serve as the local representatives on the Child Death Review Teams within each county served by our agency. The PHS division personnel actively support the CMDHD Bioterrorism staff with planning and participation in local, regional and state emergency preparedness drills and exercises within Regions 3, 6 and 7. Our staff members also continue to improve the health and wellness of our communities by working on the Together We Can Initiative. This effort has been successful in working on initiatives to increase our individual 6 Counties health rankings.

The CMDHD Personal Health Services division values and appreciates the continued opportunity to collaborate with members of the community and other organizations. We strive to best serve you, our valued partners and community member to improve the health of everyone. The health department is here to promote healthy families and health communities with all of our programs and services.

BREAST AND CERVICAL CANCER CONTROL PROGRAM:

Since 1991, the Michigan Department of Community Health (MDCH) has implemented a comprehensive Breast and Cervical Cancer Control Program (BCCCP) through a multi-year grant from the U.S. Centers for Disease Control and Prevention. With these funds, low-income women now have access to life-saving cancer screening services and follow-up care, including cancer treatment if that should be needed.

At CMDHD, we enrolled 590 women in 2010 (up from 499 in 2009!). Of these women, 44% of those had rarely or never been screened for breast and cervical cancer. The goal at CMDHD is to continue to screen those who have never been screened and in addition to enrolling those who are over the age of 50 as a priority. We also offer a cervical cancer treatment program to women under the age of 40, when diagnosed with any cervical cancers. This additional program served another 43 women in 2010.

Any woman's health care provider may encourage and refer woman to our BCCCP program. It is a big advantage of this program to get screenings that they otherwise would not get, especially when there is no other source of coverage for these important screenings. CMDHD staff work with many area medical providers to make them aware of our services and encourage referrals from these doctors. Any Michigan woman ages 40 through 64, can call (toll-free) 800-922-MAMM to obtain a phone number for the BCCCP local coordinating agency closest to her home. For those within the Central Michigan District, they may call any of our local branch offices.

There have been several successes in 2010. There are currently two women enrolled in our BCCCP program that were diagnosed with breast cancer because of the screenings we offer. One of the women is in her early 40's and the other one in her early 50's. Neither of these women had any health insurance at the time. Both women have since had surgery to remove the cancer, and have received cancer treatment paid for by the Medicaid Treatment Act. This Medicaid enrollment is available to eligible women diagnosed with breast cancer when enrolled in the BCCCP. Both of these women will continue to receive follow up screenings at the health department.

"Thank you for everything you have done for me."

Thank you so very much for this program, without it, I would not have received this important medical care!"

CENTRAL HEALTH PLAN:

With Michigan's current economic woes and rising unemployment rates, one of the scariest things for anyone is to be without any kind of health insurance. CMDHD has trained enrollers for a health program that assists these types of individuals to obtain low cost, affordable health care with the Central Health Plan. This is not insurance, but rather a way to obtain medical care and medications with very low cost co-pays. In 2010, we enrolled 601 new members in 2010, and re-enrolled 947 members for a total of 1548 residents of CMDHD onto the Central Health Plan.

One woman in her mid 50s who had been a stay at home mom all of her life found herself suddenly widowed and she did not have the option of continuing health insurance through her husband's employer. With very modest savings and just minimal life insurance she was finding the prospect of getting health insurance well beyond her means. She has a history of cancer and knew that getting regular preventive care was critical, and when CMDHD was able to enroll her in the Central Health Plan in 2010, it was a life changing even. She now at least had some health benefit coverage with very low co-pays. In addition, she could keep her regular physician and was able reduce the already overwhelming adjustments she had to make in her life.

COMMUNICABLE DISEASE PROGRAM (CD):

The year 2010 brought a number of very challenging and difficult disease investigations for our Communicable Disease Staff. During January, a case of active Tuberculosis was identified in Isabella County. An extensive contact investigation was initiated over the course of three months and 63 people were screened who were exposed to the case. Fortunately, because of our rapid identification of the case and follow up, TB was not spread to other members of the community. Over the next nine months, CD Staff conducted home visits two times a week to observe that the patient was taking her TB medications. Local Health Departments, as stated in the Public Health Code, are ultimately responsible for controlling the spread of Tuberculosis within the community. Directly Observed Therapy (watching the patient take TB medications) is essential in assuring that the individual is cured.

In May, a fourteen year old Clare County boy died of meningococcal meningitis. An intensive investigation was conducted by the Clare County CD Staff to identify the contacts that were in need of preventive treatment. CMDHD worked closely with school officials, local medical providers, and the media to coordinate the investigation and to identify persons who may have been exposed to this young man. Over one hundred personal



Dr. Robert Graham at Farwell Meningitis Vaccination Clinic

interviews were conducted by the CD Staff and fifty-two people received preventive treatment. In addition, the Clare County Personal Health Staff, supported by CMDHD staff from Osceola and Isabella Counties, held a vaccination clinic at the school where 181 people received meningitis vaccination. Because of our thorough investigational effort, no other cases of meningitis were identified.

A week later, in June, a college student who had just returned from Mexico developed a suspicious lesion on her leg. Initially, the wound was suspected to be a skin disease caused by Anthrax (Cutaneous Anthrax). A very complex investigation was initiated by the CMDHD Epidemiologist, who coordinated investigative efforts with MDCH and the CDC.

During 2010, 1,564 cases of Pertussis (Whooping Cough) were reported in Michigan, which was a record. Thirteen cases of Pertussis were reported within the CMDHD jurisdiction during 2010. In July, Bay County notified CMDHD that a camper had been diagnosed with Whooping Cough when he returned home after spending a week at a camp in Clare County. Children from throughout Michigan also attended the camp during the week he became ill. CD Staff worked along with the camp officials, Bay County CD Staff, MDCH and local medical providers to identify other potential cases of Whooping Cough. Clare County Personal Health Staff held a vaccination clinic at the camp to promote Pertussis vaccination for campers and camp staff.

Late in the year, the Roscommon County CD Staff identified a person known to be highly infectious with Hepatitis B (a seldom seen disease). Prompt response by the Roscommon CD Staff in identifying close contacts, assessing their risk of exposure, and providing vaccinations to those in need, prevented the spread of that disease to others.

CMDHD has a highly skilled CD Staff capable of responding to any given threat, whether it is a large scale outbreak, or a rare disease seldom identified in our area. Prompt actions by a highly competent staff, based on current standards, is essential in controlling the spread of diseases within our communities.

CHILDREN'S SPECIAL HEALTH CARE SERVICES PROGRAM (CSHCS):

Children's Special Health Care Services (CSHCS) is a program within the Michigan Department of Community Health which provides service for members of the community that have children aged 0-21 with certain chronic medical conditions. Persons 21 and over with certain blood clotting disorders or cystic fibrosis may also qualify for service.

A medical doctor will review each person's medical records to determine eligibility.

2010	Arenac	Clare	Gladwin	Isabella	Osceola	Roscommon	TOTAL
Number of Children Enrolled	75	145	135	254	106	89	804
Number of Care Plans Completed	23	90	110	233	69	82	607

Our Children's Special Health Care Services program continues to focus on family-centered plans of care for families. During 2010, 804 children were enrolled in CSHCS, throughout CMDHD. 607 of these CSHCS clients received a specialized plan of care. 3 families received case management services developed by a public health nurse to assist them in obtaining the appropriate medical care needed for their illnesses. This means over 72% of our clientele have had care plans in the last year.

We are aiming for 100%, but it is difficult to attain if parents do not have phones or may work full time and are unable to contact us during working hours.

The goal of the CSHCS staff at CMDHD is to continue to provide outreach opportunities to the families and providers in the communities in which we live. There are no income limitations to this program. There may be a payment plan which is determined by income, this is discussed with families before enrollment. Families with private health insurance coverage are also eligible for CSHCS. CSHCS provides additional help to those families. For more information please visit the [Family Guide to Michigan's CSHCS Program](#).

Some of the things that have been very positive this year have been the new computer systems, CSHCS Database and EZ Link. We are just now getting acclimated to these new programs and we are looking forward to having quicker access to information and providing service in a much timelier manner. Positive feedback from the CSHCS monthly teleconference has come from all 6 counties, and it is our hope that this will continue as we strive to improve service to the Central Michigan District area.

“The people are so helpful, I don't know what I would have done without them.”

One of our clients was a twelve year old boy who was diagnosed with bone cancer March of 2008. He lost his mother to the same illness. Aggressive treatment was sought, even going to Mexico and Texas for costly treatments. With no improvements, this young boy endured chemo treatments and the many side effects that are common with this type of treatment. CSHCS was able to help the family with the costs of treatment that he received in Michigan. CSHCS helped with transportation and hotel lodging, community resources and medical charges. Teamed with Hospice, this child was provided comfort measures once the cancer spread to his lungs. He passed away December 31, 2010 and CSHCS staff assisted with funeral arrangements.

“Staff are wonderful! Informative and helpful and willing to go above and beyond their job descriptions to help others! Thank You!!

Less than two weeks later, this same family took their 13 year old son into the hospital. Glioblastoma, a form of brain cancer was diagnosed. This child has endured surgery, chemo and radiation. Chemo is now scheduled to begin again as there has been changes in the MRI suggestive of tumor re-growth. Again, CSHCS is able to help with the cost of medical care, transportation and hotel stays. The prognosis is poor as this type of cancer is known to re-occur and grow at an alarming rate. Without CSHCS, this family stated they “would be overwhelmed with the medical costs associated with treatment.” They were also appreciative that “CSHCS staff are also caring and supportive of families and also provide emotional support as well.”

COLORECTAL CANCER EARLY DETECTION PROGRAM:

This is a new program at CMDHD, funded by the Michigan Department of Community Health in an effort to offer colon cancer screenings to more of the uninsured population ages 50 – 64 in our state. Colon cancer is the 2nd leading cause of cancer deaths. 60% or more of adults without health insurance have received no screening at all. Our initial target for screening with at home stool testing kits was 90 clients, and we succeeded in screening 75, in only a partial year of the program. Most of these clients were women who also participated in the Breast and Cervical Cancer Control Program. Of the 75 screened, we have been fortunate that no cancer was found.

FAMILY PLANNING PROGRAM:

Family Planning is a preventive health program which positively impacts the health and well-being of women, children, and families. Our program decreases unwanted pregnancies, reduces high-risk pregnancies, and lowers maternal and infant mortality and morbidity. Services provided through our family planning clinics allow women and men to make well-informed reproductive health choices, and are specifically created to address the unmet family planning needs of women and men below poverty or those slightly above poverty. We provide access to teens and working men and women without health insurance.

No one is denied services because of their inability to pay. Our local family planning program is allocated public funds based on the number of clients we anticipate serving. Services provided include a general health assessment, abstinence counseling, contraception, pregnancy detection, infertility services, client and community education, and follow-up and referral for identified concerns. Abortions are not provided as a method of family planning.

The CMDHD Family Planning Program utilizes specially trained nurses, nurse practitioners and/or physician assistants in each of our six counties. The staff has been very dedicated to provide services to those who would not qualify elsewhere. They take pride in their work and it shows in the number of clients that are seen in our clinics. In 2010, our staff saw 3,280 clients for a total of 8,193 visits.

2010	Arenac	Clare	Gladwin	Isabella	Osceola	Roscommon	TOTAL
Number of Clients	267	660	563	1349	221	220	3,280
Number of Visits	713	1602	1426	3419	503	530	8,193

Teens comprise 18.5% of our caseload and we offer many young women confidential and affordable health care at a time convenient for them. Fees are charged on a sliding scale based on income of the family. Teens seeking confidential services are charged on their income alone. Of our clients, 21.0% have private insurance, 48.5% are covered by public funds, and 30.5% are uninsured. Donations are accepted by any clients to help serve those less fortunate.

The Medicaid approved Family Planning Waiver Program (Plan First!) is now in its fifth year. It provides basic family planning services to women ages 19-44. It covers visits for family planning related services, prescriptions for birth control, contraceptive supplies and devices, lab tests and treatment of sexually transmitted diseases. Central Michigan District Health Department had 1213 clients seek services under Plan First! for 2010. Eligibility is based on residency and income.

Central Michigan District Health Department has an active Family Planning Advisory Council representing all counties. We have worked together to involve a broad representation of the populations we serve. Council members consist of teens, school nurses and teachers, clergy, medical professionals, community leaders, workers in community service agencies, parents, and current and past family planning clients. New members are always needed as this fulfills the need for further family planning outreach and exposure in our six counties.

"This is such a great program with such friendly staff. They always help me find answers to my questions!"

"The health department's family planning program has taught me so much - Thanks"

HEARING AND VISION PROGRAM:

In one of our counties there was a kindergartner who failed his hearing screening in 2009. The CMDHD hearing technician sent the child's parents a letter, with the results and encouraged to have the child seen by a physician. The story continued in 2010, as was later found. As a 1st grader, the technician noted that the same child again had failed their hearing test. Noting that the hearing screen had been failed also in kindergarten, the diligent technician spent some time investigating the issue. Later it was revealed that both the results and referral letter got lost in the shuffle of life. Both parents were working, very busy, and the simple but important notice was overlooked. Another letter was sent home again in 2010, with more information. The parents followed up and took the child to a specialist. The doctor's evaluation revealed that the child had an operable tumor near his auditory nerves. The tumor has since been removed and the child has recovered. Thanks to the important hearing screening and follow up this was caught before the child suffered any significant hearing loss.

In 2010, CMDHD screened:

Hearing:	2,389 children in preschools and 120 were referred for follow up care 6,306 children in schools and 361 were referred for follow up care
Vision	2,169 children in preschool and 141 were referred for follow up care 12,581 children in schools and 1337 were referred for follow up care

IMMUNIZATIONS:

The CMDHD immunization staff strives to provide not only the best immunization care, but also the best immunization education available throughout the area. Our staff regularly attends trainings to stay up to date with the ever changing world of vaccinations and shares that information with the community.

We continue to forge strong relationships with area providers, hospitals, long term care facilities, juvenile facilities, local businesses, schools and more. The results of those relationships can be seen during such events as the response to the illness of a Farwell High School student with Meningococcal disease in May, 2010. All CMDHD offices were flooded with phone calls from anxious parents not only wanting information on the disease, but also inquiring about receiving the meningococcal vaccination for their children. The Clare County staff and Farwell School employees coordinated an on-site immunization clinic to be held at the Farwell High School just 2 days after the news of the student's illness. Adding to the chaos of the event, it was held on the last day of school for students. Staff members from all 6 counties were on hand to assist during the clinic. In a matter of 2 weeks surrounding the tragic death of this student, 398 meningococcal vaccinations were given to people who had previously gone unprotected.

The addition of the Insight software in late 2009 has been a great resource for staff. The process of registering clients and entering information into the Insight system has been streamlined providing better records and productivity. Insight has also increased our abilities to bill private insurance companies for reimbursement.

In direct relation to the 2009 H1N1 public health response, we are holding more school based clinics. School districts have been contacting CMDHD to conduct immunization clinics on their campus. This was a rare occurrence prior to H1N1, but with the huge success of those clinics, schools have been more open to hosting immunization events on their grounds.

CMDHD is fortunate to have 7 Immunization Nurse Educators throughout the district. These nurses are specially trained to provide immunization related in-services to medical providers and provide those attending with continuing education credits.

The focus of the CMDHD immunization program for the next year will revolve around increasing adolescent immunization rates through outreach and follow-up efforts and increasing community based clinics.

2010	Arenac	Clare	Gladwin	Isabella	Osceola	Roscommon	TOTAL
<i>Regular Immunizations Administered</i>	1607	3250	4750	4582	3208	1859	19,256
<i>Influenza Doses</i>	256	543	1114	1235	930	389	4467
<i>H1N1 Doses in 2010</i>	112	307	398	562	238	303	1920
Total	1975	4100	6262	6379	4376	2551	25,643

LEAD TESTING PROGRAM :

All children with Medicaid and enrolled in the WIC program are tested for lead poisoning, unless the medical providers in that county are already completing the tests for the Medicaid children. The rates of testing that were completed at CMDHD went up by over 20% from 2009.

2010	Arenac	Clare	Gladwin	Isabella	Osceola	Roscommon	TOTAL
Children Tested	78	401	168	172	154	139	1,112

MATERNAL AND INFANT HEALTH PROGRAM (MIHP):

MIHP is a program for all Michigan women with Medicaid health insurance who are pregnant and all infants with Medicaid. It is a benefit of their insurance. MIHP provides support to promote healthy pregnancies, good birth outcomes, and healthy infants. Throughout the state, MIHP's are administered in rural, urban and native communities through federally qualified health centers, hospital based clinics and private providers as well as through local and regional public health departments.

Services include:

- Maternal and infant health and psychosocial assessment completed by nurse or social worker
- Registered Nurse, Licensed Social Worker and Registered Dietitian team development of beneficiary care plans
- Coordination of MIHP services with the beneficiary's medical care provider and Medicaid Health Plan (who assist and supplement that care)
- Registered Nurse, Licensed Social Worker, Registered Dietitian and Infant Mental Health Specialist home or office visits provided with interventions based on the beneficiary's plan of care
- Transportation services arranged if needed
- Referrals are made to local community services (e.g., mental health, substance abuse, domestic violence, basic needs assistance) as needed

- Referral to local childbirth education or parenting classes

The Central Michigan District Health Department offers a very high quality Maternal Infant Health Program for women who are currently pregnant and for infants up to 1 year of age who are Medicaid eligible or enrolled. Visits are offered by our experienced and caring professional staff in the office or home. CMDHD employed 15 Registered Nurses, 5 Social Workers/Infant Mental Health Specialists and 5 Registered Dietitians who provided service for the Maternal Infant Health Program in 2010. We also have 6 Clerical staff who keeps the program running smoothly. The number of visits provided throughout the district per month has ranged from 505 to 665. With the advent of Medical Health Plans and referrals from their offices, our numbers have been steadily increasing. We are always aware of the importance of quality services and will continue to provide quality MIHP visits.

Based on our MIHP survey results, our local program has provided many positive benefits to participants. The program is filled with success stories. Many mothers have voiced their gratefulness for having a medical person come to their home so they can ask questions and get answers for some of their concerns. Whether the questions are about nutrition, health concerns, infant bonding, finding a home or going back to school, we have qualified professional staff which either have the answers or know where to find the answers!

2010	Arenac	Clare	Gladwin	Isabella	Osceola	Roscommon	TOTAL
Number of Visits made	886	1502	1256	1383	1217	806	7050

One concern in rural Michigan for the CMDHD Maternal Infant Health Program is how to get our pregnant mothers to their prenatal doctor visits. 5 out of the 6 counties that we serve do not have a hospital which delivers babies. In addition to barriers with transportation, we still work with all of our MIHP clients to get them to these necessary medical appointments. We educate our mothers on setting up an emergency plan with contact numbers listed, so they are prepared if an emergency arises. The program also offers some assistance with travel costs for doctor visits if no other options are available.

“I learned a lot of information about my pregnancy and about my new baby. Since I am a first time mom, that was the best thing. Just having someone to talk to and answer all my questions really helped. It made me feel like I was doing something right.”

Even though we have successfully increased the number of MIHP clients in our 6 county district, it has been our goal to improve mother and infant nutrition status, improve infant development, and to promote family and infant bonding. In providing these services it is our hope that it will decrease mother and infant death rates, decrease smoking, alcohol and drug use, and decrease the occurrence of low birth weight infants. The dedicated CMDHD staff continues to work with these families to develop family and individual goals, to increase the possibility of delivering a healthy, full-term baby, while providing families with parenting education to help ensure the baby stays healthy.

One of our success stories was a teenage girl who was here in Michigan with her mom who was a migrant worker. She became pregnant and didn't know what she needed to do to be able to get medical care. She called our office for advice when she was 8 months into her pregnancy and the RN made a home visit that day. The nurse called a physician and was able to get her an appointment for the next day. She was very interested in all the information given to her. She had a healthy infant who is now almost a year old. She has breastfed for the entire time and has also attended school and graduated from High School. She and her little sister are the only ones who speak English in the

home. She has been an avid student, trying to learn as much as possible to be the best mother she can be.

It is our goal to continue to provide the best support possible to the women and families in the counties we serve at Central Michigan District Health Department through the Maternal Infant Health Program.

SEXUALLY TRANSMITTED DISEASES:

Sexually transmitted diseases continue to be an active part of Personal Health staff time in all 6 of our counties. Any reported STD is required to have client follow up with a public health nurse. Follow up for STD's is a two-fold process: 1. to insure proper treatment and education any client with a positive test result; and 2. to assist and provide proper treatment and education of all partners involved with the initial positive case.

CMDHD follows the guidelines provided by the Michigan Department of Community Health and the Division of STD Prevention at the Centers for Disease to provide education, information and treatment to help people live safer, healthier lives by the prevention of STDs and their complications. We work to provide the positive educational messages with the promotion of sexual health, and the primary prevention of sexually transmitted disease. We will continue our outreach efforts to educate the community regarding STD prevention and treatment.

WOMEN INFANT AND CHILDREN'S SUPPLEMENTAL FOOD PROGRAM (WIC):

The Women, Infants and Children (WIC) Program has continued to experience another year of program expansion and growth. The number of participants served during 2010 increased by over 8%. We are now assessing, educating and providing WIC food benefits for nutritious food items for almost 6,000 participants every year in our 6 counties. The associated Project Fresh Program has enabled us to distribute additional coupons for locally grown fruits and vegetables to WIC Program participants in Arenac, Clare, Gladwin, Isabella and Osceola Counties. State wide, each month, more than 250,000 moms, babies, and children less than age 5 receive nutritious foods from the Michigan WIC Program state wide. WIC foods are worth \$60-\$120 or more per month for each participant. A family of four may earn \$41,348.00 per year and qualify for WIC. CMDHD continues to increase WIC services in all of its six counties, providing high quality services, now with electronic medical records and state of the art online nutrition information services. To get additional information about [Michigan WIC's program guidelines click here.](#)

The benefits of the WIC program are many. In addition to providing nutritious foods and nutrition education, making referrals to other health care providers and breastfeeding supports are both very important service we provide. The WIC caseload in our six counties continues to grow, due to state of our Michigan economy but also because of the many health benefits the WIC program provides to families.

2010 brought additional food packages to WIC participants. The packages use a formulary designed to meet the special nutritional needs of low-income pregnant women, infants, and children to five years of age who are at nutritional risk. Changes in scientific knowledge related to nutrition, changes in the demographics of populations served by WIC, and the challenges of maintaining a healthy lifestyle resulted in the USDA charging the Institute of Medicine of the National Academics with creating a committee to evaluate the food packages. As a result packages were revised in 2009 to include more fruits, vegetables, and whole grains, and to contain less fat, sodium and cholesterol. They also allow agencies flexibility in accommodating participants' cultural food preferences.

2010 WIC Clients

COUNTY	Clients receiving benefits
Arenac	593
Clare	1140
Gladwin	829
Isabella	1762
Osceola	851
Roscommon	644
TOTAL	5819

Pregnant and postpartum women and children (under 5 years of age) participating in WIC receive food benefits for milk, cheese, eggs, cereals, peanut butter, dry beans/peas or canned beans/peas, and fruit or vegetable juices, fresh fruits and vegetables and whole grain choices to include breads, tortillas, brown rice and oatmeal. Women who exclusively breastfeed their babies may also receive extra food, including canned tuna fish.

Special formulas or nutritional supplements are also available to participating women and children who have certain medical conditions.

A Sample Food Package for a child for one month would be:

- 3 gallons of milk
- 1 quart of milk
- 1 pound of cheese
- 1 dozen eggs
- 36 ounces of cereal
- 18 ounce jar of peanut butter, 16 ounce dry beans/peas or 4 cans beans/peas
- 2 bottles 64 ounce juice
- 2 pounds whole grains (breads, tortillas, brown rice or oatmeal)
- \$6.00 fresh fruits and vegetables

Benefits for WIC participants include lowering the rate of anemia among children ages 6 months to 5 years, significantly improves children's dietary intake of vitamins and nutrients such as iron, vitamin C, vitamin A, thiamine, protein, niacin, and vitamin B6. WIC is a health and nutrition program that has demonstrated a positive effect on pregnancy outcomes, child growth and development.

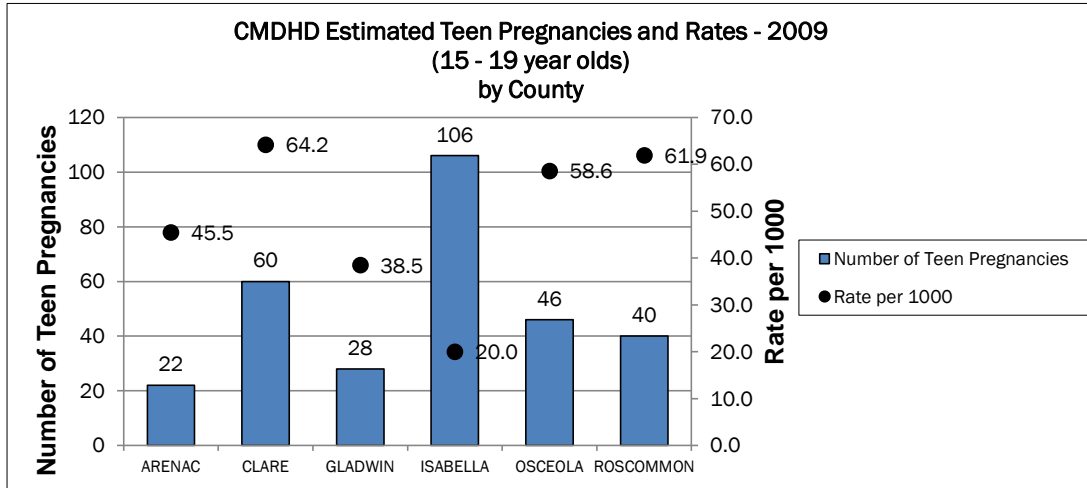
In 2010, with a grant from the Michigan Department of Community Health and USDA, CMDHD was able to provide WIC participants with support for breastfeeding. There are now breastfeeding peer counselors in all 6 of our county offices to help breastfeeding mothers and their new babies.

SUMMARY:

The Personal Health Services Division provides education, support, treatment and follow up for many health related problems in addition to offering many positive prevention programs for a healthy lifestyle. Please feel free to call or visit any of our local branch offices for more information, support, education or a tour of our facility. We are happy to serve you, our fellow community members.

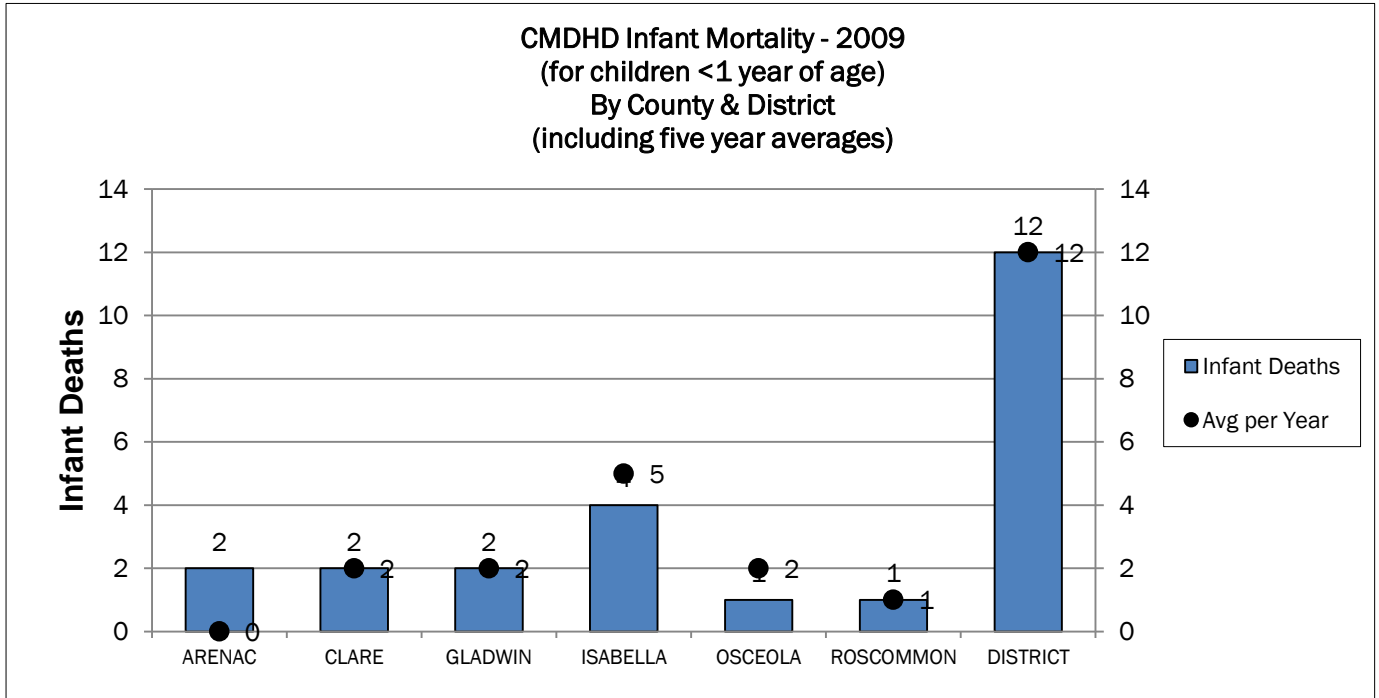
Submitted by: Kelly Conley, MS, RD, CLE; Personal Health Services Director

COMMUNITY HEALTH INDICATORS



	Number of Teen Pregnancies	Rate Per 1,000
Arenac	22	45.5
Clare	60	64.2
Gladwin	28	38.5
Isabella	106	20.0
Osceola	46	58.6
Roscommon	40	61.9
Total District	302	34.0
State of Michigan	18,450	51.5

COMMUNITY HEALTH INDICATORS



	Infant Deaths	5 Year Avg. # of Deaths	5 Year Avg. Death Rate Per 1,000 Births
Arenac	2	0.0	3.9
Clare	2	2.0	5.2
Gladwin	2	2.0	6.4
Isabella	4	5.0	7.1
Osceola	1	2.0	6.3
Roscommon	1	1.0	7.6
Total District	12	12.0	6.1
State of MI	881	945	

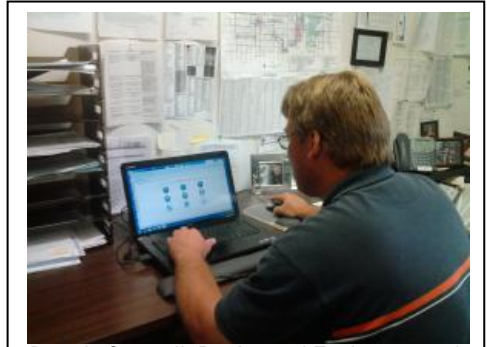
Six Leading Causes of Death by County (Number of Deaths by Cause by Year)

	Year	Heart Disease	Cancer	Stroke	Chronic Respiratory Disease	Accidents	Diabetes
Arenac							
	2005	58	45	15	11	8	7
	2006	60	42	7	8	9	5
	2007	62	51	3	5	4	0
	2008	76	43	13	12	6	5
	2009	58	59	12	13	8	3
Clare							
	2005	101	116	19	27	18	18
	2006	110	101	14	31	22	8
	2007	122	90	22	29	23	11
	2008	122	89	24	33	17	9
	2009	99	84	15	26	15	16
Gladwin							
	2005	97	75	13	21	17	9
	2006	88	86	17	16	15	15
	2007	90	71	23	19	13	4
	2008	97	94	17	19	9	16
	2009	99	71	11	30	23	12
Isabella							
	2005	103	126	30	27	15	20
	2006	111	123	21	25	16	11
	2007	91	77	32	32	20	14
	2008	94	97	34	25	20	8
	2009	101	103	24	28	11	10
Osceola							
	2005	64	53	8	17	6	9
	2006	67	57	12	18	14	4
	2007	58	50	18	14	14	6
	2008	54	60	10	14	7	8
	2009	54	60	14	17	10	6
Roscommon							
	2005	93	94	19	20	19	10
	2006	104	83	23	30	16	12
	2007	95	109	19	28	18	11
	2008	116	79	20	33	13	7
	2009	110	91	14	33	7	6

Environmental Health Division Services

The environmental health division has stepped up to the challenge of providing quality services with limited resources. Even though we are still facing difficult and troubled times with the downturn in the economy of Michigan, we continue to strive to offer the public quality environmental health services, to prevent illness, injury and protect the environment of our beautiful six county region.

The most significant event for our division in 2010 was the acquisition of a comprehensive software program to bring our data processing and analysis into the twenty-first century. We are very excited to see the kickoff of this program occur in the very near future. This software will assist us in the ultimate goal of a paperless “green” system. We will be able to share our records with the public as requested in all of our programs. The public will have access to food inspection results to make informed decisions when dining out at our licensed food service establishments. Realtors and prospective home buyers will be able to learn more about the water supply and onsite sewage systems for the properties they are considering for purchase. Staff will be able to accurately map sites of environmental contamination and prevent further contamination of groundwater in citing new water wells. These are just a few of the many benefits of this new software program for our division.



Dennis Cantrell, Registered Environmental Health Sanitarian works with new software



Mike Fisher, Registered Environmental Health Sanitarian works at Health Fair to promote public health

Also in 2010, our environmental health division was charged with enforcing the new non-smoking ban in all our area restaurants. This task was relatively well received by the general public and facility owners alike. However, like any new law change this is not always easy and there are always some who choose to “push the envelope”. Our division brought forward several facility owners for informal enforcement hearings for their failure to comply with the non-smoking directive. This new law has made a positive public health difference in reducing the risks associated with smoking and second hand smoke in area restaurants and statistics show that business has not been negatively impacted by this change.

Another important service provided by the Environmental Health division is educational seminars and training classes. We hosted training programs in 2010 for our Excavation Contractors and Septage Haulers; our Non-Community Non-Transient Water Supply certified operators; our certified food facility managers and food workers; as well as participation at numerous health fairs throughout our district.

The environmental health division has been very active in efforts to acquire grant funding for additional funding in the area of surface water quality protection. We have assisted with many grant writing efforts and been successful in receiving several of



Presentation at Annual Excavation Contractors and Septage Waste Haulers meeting at MMCC

these grants to date, with more pending. We routinely test the most heavily used public beaches in the district for E.coli. We are planning to do extensive sanitary surveys along several vulnerable points along the Lake Huron lake shoreline.



Even though the economic downturn in Michigan is a sobering reality, there were still many bright spots throughout the year involving our environmental health staff and division that we wanted to share with you. These stories represent a small sample of the many success stories resulting from the outstanding efforts our staff continue to make every day to serve our clients and protect public health and the environment.

ENVIRONMENTAL HEALTH EVENTS FOR 2010

<u>PROGRAMS</u>	<u>Arenac</u>	<u>Clare</u>	<u>Gladwin</u>	<u>Isabella</u>	<u>Osceola</u>	<u>Roscommon</u>	<u>TOTALS</u>
<u>FOOD SERVICES</u>							
Food Licenses (<i>all types</i>)	63	139	81	201	81	119	684
Safe Food Worker Training Classes	3	5	6	2	3	22	41
Food Manager Training Classes	4	32	15	70	9	12	142
Temp/Vending/STFU	43	61	52	71	37	80	344
<i>*incl. out-of-county attendees</i>							
<u>ON-SITE SEWAGE SERVICES</u>							
Land Use Evaluations	3	16	26	11	5	5	66
On-Site Sewage (<i>all permits</i>)	73	239	170	179	105	134	900
<u>DRINKING WATER SERVICES</u>							
Private/Public Permits	59	244	253	232	122	196	1106
Community Type 2 Systems	56	131	79	80	67	204	617
Type 2 Sample Contracts	3	16	6	9	3	7	44
<u>GENERAL SERVICES</u>							
Campground Inspections	33	25	12	18	18	13	119
Existing System Evaluations	6	28	46	45	24	19	168
DHS Evaluations	2	23	16	22	16	19	98
Subdivision/Condominium Plats	0	0	0	0	0	0	0
Point-of-Sale Evaluations	2	8	43	2	9	0	64
Swimming Pool Inspections	19	11	5	30	9	21	95
<u>TOTAL PROGRAM EVENTS</u>	369	981	810	975	509	853	4497
<u>WATER LABORATORY</u>							
Drinking Water Samples - Coliform Bacteria Analysis-By County staff							1033
Drinking Water Samples - Coliform Bacteria Analysis-By Clients							876
Swimming Beach & Surface Water Samples - E.coli Bacteria Analysis							1152
<u>TOTAL WATER LABORATORY SERVICES DISTRICT-WIDE</u>							3061

Health Promotion and Preparedness – HPP



Health promotion has been defined by the World Health Organization's 2005 *Bangkok Charter for Health Promotion in a Globalized World* as "the process of enabling people to increase control over their health and its determinants, and thereby improve their health."

In 2010, the CMDHD Health Promotion and Preparedness staff worked very hard to assure health promotion opportunities were available to all citizens in the district. Our overall goal in the HPP Division is to inform, educate and serve.

The focus of our work is to:

- ✓ Help our citizens make healthy lifestyle choices
- ✓ Educate the community about available health resources
- ✓ Provide health screenings, testing services and trainings
- ✓ Promote disease and injury prevention
- ✓ Advocate for policies and regulations that protect the health of the public
- ✓ Increase health education services in the hard-to-reach, special populations
- ✓ Work with businesses, non-profit entities, faith communities, schools, health and medical providers, the media, and other target groups in the coordination of health improvement activities
- ✓ Conduct ongoing community health assessment, and assure health improvement planning is carried out in collaboration with community members and partners
- ✓ Raise awareness and educate our citizens about public health emergencies and facilitate preparedness planning in an effort to safeguard health
- ✓ Train our health department workforce in the area of bioterrorism/emergency preparedness via drills, exercises and simulations
- ✓ Support young parents, empowering and teaching them the skills necessary for reaching important goals in the areas of positive parenting, immunizations, high school completion and college enrollment, home safety, and healthy choices for meal preparation and physical activity
- ✓ Seek health education funding and find creative ways to partner for the good of the public health

* 2010 Program Highlights *

BCCCP – Women served = 590 (Family Planning/Joint project = 42)

The Breast & Cervical Cancer Control Program continues to provide free, life-saving breast and cervical cancer screening services to low-income women ages 40-64. It is funded through the Michigan Department of Community Health (MDCH) under a multi-year grant from the Centers for Disease Control & Prevention. BCCCP involves a partnership with medical providers and labs and includes clinical breast exams, mammograms, Pap tests, and pelvic exams, as well as cancer treatment if needed. This important program entails key collaboration between HPP and Personal Health Services.



CMDHD Health Officer Mary Kushion (left) and HPP Intern Erin Glaros, who helped plan the BCCCP golf outing



Winning gift basket was auctioned at the golf outing

In addition to the MDCH grant, several other avenues and special events coordinated by HPP have generated much-needed funds for BCCCP including: The 2010 annual golf outing raised over \$5,715.71, and 45 teams participated! Our quilt raffle made \$546.00. Nurse Practitioner Barb Savage and Account Clerk Elaine Meyer are the generous creators of our beautiful quilt. These funds are put into the BCCCP Endowment.

Healthy Start, Gladwin – Families Served = 12

Healthy Start is a free program for new or expecting moms. Services include mentoring and guidance from a qualified home visitor. Emotional support and information about baby feeding, crying patterns, home safety, infant play, building relationships and illnesses is shared. The program also offers coordination with community resources including a family doctor, immunization tracking, access to a baby pantry, and various workshops and support groups.

Two other great resources for new and expecting parents, grandparents and caregivers are the Arenac County and Gladwin County Baby Pantries. Much-needed baby resources such as diapers, clothing, safety items and hygiene products are available for those in need. Here's what one client said about the baby pantry:

Thank you so very, very much for you – your huge kindness! When I came in there to drop off stuff, what a nice time I had being there watching my lil' daughter enjoying herself! I just love that she took such a quick liking to you and who wouldn't! You have made us so warm & happy (inside & out) & it was very thoughtful of you to be able to give us such a nice warm jacket and lil' boots! I keep thinking about you! (We didn't have shoes to fit after the ones you saw her in nor did we have a warm jacket either!) I love you so much for being there for us – what a huge impact you made!

Partner Services

Through a coordinated approach, CMDHD Disease Intervention Specialists (DIS) engage in partner notification prevention education, assisting individuals with receiving HIV, Syphilis, and other Sexually

Transmitted Disease (STD) testing and result information, and appropriate treatment. The program covers 62 counties throughout Michigan.

Services in 2010 include:

HIV Cases Received = 107

Number of Partners = 117

Tested = 268

New Positives = 6

The ultimate goal of Partner Services is to interrupt the spread of HIV and syphilis through counseling & testing, and by encouraging infected persons to notify their potentially exposed sex and/or needle-sharing partners of the possible risks for HIV/syphilis infection. Support, referrals, medical follow-up and development of a personalized risk-reduction plan are all key elements of the program.

Currently, there are 74 reported HIV positive individuals in the CMDHD jurisdiction. The estimated prevalence is 120. What this means is, there are approximately 46 individuals living in the CMDHD jurisdiction who are positive and do not know their status.

The HIV Case Management / Continuum of Care Program, offered by CMDHD, is located at the Clare County branch office. Case Management (CM) provides persons living with HIV/AIDS, household members, and loved ones services for developing a plan for quality living. The plan includes the following:

- Understanding HIV/AIDS and its effects
- Discussing and understanding medical needs and treatment information
- Discussing and replacing a person's fears with accurate knowledge of HIV/AIDS
- Assisting with household financial planning
- Health education and risk reduction services

Key Services of CM include:

- HIV/AIDS specific medical care/treatment with Dr. Peter Gulick
- Medications (prescriptions and non-prescription)/assistance with coverage
- Nutritional services (education and supplements)
- Referrals for counseling, housing needs, utilities support, and food assistance
- Transportation / Home or Office visits
- Community resource referrals / Substance abuse referrals
- Support group
- Coordination with your primary care physician

Case Management Services Delivered:

Medical Case Management - 51 patients

Case Managed - 34 patients

Nutritional Counseling - 51 patients

Lives are touched daily in the world of HIV and AIDS. Here's just one example:

Recently we were privileged to have one of our HIV+ clients speak at the Central Michigan AIDS Walk. This person has been diagnosed positive since 1985 and was very active in New York with creating programs and policies to address the AIDS epidemic. He was so surprised and excited when asked to speak, and he spent a great deal of time writing and revising his speech to get it just right. His message was wonderful and very well received. He relayed to us how, coming from New York, he was surprised to see the support and interest of HIV in such a small community.

Emphasized in the message was: we need to stay diligent and not become lax to the potential that each of us could become infected with HIV and that we all need to become more educated, aware, and active. He ended his speech with "I'm glad you all are here today. You give me hope." I can't

think of a better service that an agency could offer...the gift of hope to someone who has seen such discrimination, death, and fear in his lifetime.

The 1st Annual AIDS Awareness Walk at Island Park made over \$5,000. These funds stay in this local community to assist HIV infected citizens with medical, social, household, and emergency needs. Over 100 CMU students and community members joined in the windy fun to show their spirit and support of our community members with HIV and AIDS who are trying to stay on the track to good health.



CMDHD Full-Scale DN (Distribution Node) and Mass Vaccination Exercise

An all-staff training exercise was held on May 18, 2010 at Mid-Michigan Community College in Clare County. This full-scale DN/Mass Vaccination Exercise provided a multi-faceted, hands-on opportunity for each health division, working in teams, to simulate the receipt of a cache' of vaccine and medical supplies, separate them by county, deliver them, and then vaccinate a large population. The morning began with an orientation to Incident Command/NIMS provided by the Isabella County Director of Emergency Management, and the remainder of the day included a 2-component full-scale exercise, held both outdoors and in the large MMCC training room.

Achievements noted and lessons learned:

- Practiced using DN Inventory Tracking System
- Time pressure injects added and adjustments made
- Handheld radio communication used
- Reinforced education on ICS and NIMS
- Distributed and used Job Action Guidelines – revised as needed
- Patients assessed, screened, educated and vaccinated
- Emergency situations managed and evaluated



POD clinic nurses perform CPR on a patient



DN staff count, sort and repackage medicines

In addition to conducting disaster exercises, HPP participates on the Biodefense Network/Preparedness Advisory Committees in Regions 3, 6 and 7. We are also active on the Local Emergency Planning Teams (LEPT) within our six counties.

A long-awaited day has come for public health! The State of Michigan Smoke Free Air Law took effect on May 1, 2010.

About 1,700 Michiganders die annually as a result of exposure to secondhand smoke. CMDHD is ecstatic that our Michigan legislature enacted a law that reflects the wishes of at least two-thirds of the State's population. The law states that all workplaces (private and public) and all food service establishments (any place with a license to serve food and beverages) are to be completely smoke-free. Prior to May 2010, HPP received a small ARRA grant to prepare the community for the new smoke free law, to establish a coalition, and to develop objectives and protocols for assuring the legislation is being followed. The Environmental Health (EH) and HPP Divisions work together to educate and enforce this law throughout the CMDHD jurisdiction. The enforcement of this law is complaint-based. Numerous educational activities took place in 2010. Also, community 'scans' were regularly conducted, which includes observing adherence to the law and assessing what our citizens' opinions are about it.



Board of Health and Isabella County Commissioner, Jim Moreno, accompanies CMDHD health educators and local newspaper reporter on an evening tour of businesses to promote and recognize Michigan's Smoke Free Air Law.

Senior Wellness & CVD Screenings – Nutrition Education At food w/friends sites and community events

Saginaw/Chippewa Indian tribe (SCIT) & Mt. Pleasant, Rosebush, Shepherd, Weidman, Winn

The Senior Wellness Program offers health education services to senior citizens age 55 and older. Seniors residing in Isabella County can partake in activities and presentations at six meal site locations operated through the Isabella Co. Commission on Aging. The program offers health information and tools designed to assist seniors toward assessing their own risk pertaining to cardiovascular disease (CVD) and increasing their quality of life. **The program is funded through a SCIT 2% Grant.**

Trained Health Promotion and Preparedness personnel provide a variety of CVD-related presentations on a monthly basis. Cardiovascular screenings are also offered to the seniors annually. HPP continues to offer CVD screenings throughout the community.

We offer Blood borne Pathogens trainings, CPR and First Aid, and Internship field experience for college students studying health promotion.

- *CMDHD taught CPR and/or First Aid to 80 individuals in 2010.*
- *CMDHD participated in 35 committees/coalitions (local, regional and statewide).*
- *CMDHD spent 42 hours assisting Bay-Arenac ISD with Infectious Disease and Environmental Health grant.*

HPP personnel continue to orchestrate CMDHD's involvement in health fairs and community events. On Thursday, July 15, 2010, CMDHD hosted our annual Health and Safety Fair for Isabella County. The theme was "summer health and safety." The focus of the event was to promote, educate and involve community members in health, safety and nutritional topics. All age groups were welcome and over 200 participants attended.



School children have a lot of fun at the health fair



CMDHD employees are great team players

We are fortunate to have such wonderful partners and resources here in our communities.

2010 Board, Staff and Volunteers

BOARD OF HEALTH

David Brooks (Osceola)	Member
Dennis Carl (Gladwin)	Member
Raymond Daniels (Arenac)	Member
George Green (Isabella)	Vice Chair
Jordon Lockmiller (Clare)	Chair
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Jim Moreno (Isabella)	Member
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Michael Snyder (Arenac)	Member
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John Wolf (Clare)	Member

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Debbie Bomia*	Account Clerk
Allison Bradac	Administrative Assistant
Carolyn Cardon, MBA*****	Dir. Administrative Svcs.
Craig Clingan, BS****	Dir. IT
Kelly Conley, RD**	Dir. Personal Health Svcs.
Melissa DeRoche, BS**	HPP Supervisor
Sarah Gauthier	Accountant
Bob Graham, DO, MPH***	Medical Director
Vickie Hall***	Account Clerk
Jason Howard*	User Liaison
Julie Hummel*	Account Clerk

Mary Kushion, MSA ****	Health Officer
Carol Lanctot**	User Liaison
Helen Lee, BAA*****	Director, HPP
Elaine Meyer****	Account Clerk
Michelle Patton, RS****	Dir. Env. Health Svcs.
Dana Recker	Account Clerk

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Sabrina McGee	Technician
Amy McQueen****	Secretary
Lisa Miller, RN*	Public Health Nurse
Tracy Nelson, RS***	Sanitarian
Janet Payton	Technician
Becky Pope, RSW*	Social Worker
Sue Presnell, BSN****	Public Health Nurse
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Rachael Shilman, RD	Dietitian
Roxy Smith	Secretary
Linda Stanwick*****	Secretary
Linda Steffes, RN	Public Health Nurse
Pam St. John, RN**	Public Health Nurse
Deb Stratton	Secretary
LuAnn Strauss***	Secretary
Mari Pat Terpening, BSN****	Pers. Health Supervisor
Pam Weber**	Secretary
Michele Wolfe, MA***	Health Educator

OSCEOLA COUNTY

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Julie Beifuss**	Secretary
Deb Eisenga	Secretary
Robin Eisenga	Secretary
Doug Fitzgerald, RS***	Env. Health Supervisor
Linda Gregg	Nurse Practitioner
Becky Johnson-Himes, BSN***	Pers. Health Supervisor
Cindy Maans, RN	Public Health Nurse
Linda Marks***	Technician
Bob Shyroch**	Sanitarian
Deb Stauffer, RD*	Dietitian
Shelly Sumpter, RSW*	Social Worker
Lorrie Youngs*	HPP Supv
Amy Wilson	Secretary

ROSCOMMON COUNTY

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Kim Cherven, RN, BSN*	Public Health Nurse
Phyllis Dale, RSW*	Social Worker
Gloria Drog****	Technician
Mike Fisher, RS**	Sanitarian
Mark Jarski, RS*	Sanitarian
Carol Kelly***	Secretary
Kathy Kent, BSN*****	Pers. Health Supervisor
Paul Menghini, RS*****	Env. Health Supervisor
Jody Powers*****	Secretary
Rhonda Rhine, RN	Public Health Nurse
Jennifer Phillips	Clerk/Technician
Rachael Shilman, RD	Dietitian
Terri Veltman, RN	Public Health Nurse

INTERNS

Emily Dangvillo	Dietetics
Lance Redwanz	Dietetics
Brandon Crane	Dietetics
Megan Gainforth	Dietetics
Kati Mora	Dietetics

Mike Wcisel	Dietetics
Kelli Babb	Dietetics
Lindsay Penney	HPP
Melanie Brown	HPP
Erin Glaros	HPP
Chelsea Groleau	Health Administration
Corey Luke	Health Administration
Joseph Seiverson	Health Administration

VOLUNTEERS

Barb Syed	Arenac County
Katie Jaudaine	Clare County
Sash Blair	Clare County
Beth Weldon	Clare County
Jarred Wentworth	Clare County
Ann Kreusch	Gladwin County
Pam Huber	Gladwin County
Sara Taylor	Isabella County
Lauren Johnson	Isabella County
Jena Miller	Isabella County
Carissa Schmidt	Isabella County
Kera Carter	Isabella County
Tiffany Hardin	Isabella County
Lindsey Wallace	Isabella County
Jackie Maggioncalda	Isabella County
Ashley Holbroog	Isabella County
Megan Hale	Isabella County
Jennifer Cashen	Isabella County
Chelsea Hummel	Isabella County
Ami Emcott	Isabella County
Morgan Wolfe	Isabella County
Jenna Wolfe	Isabella County
Kaylee Rau	Isabella County
Kristine Weis	Isabella County
Allison Weis	Isabella County
Bailey Leasher	Isabella County
Laquodra Simmons	Isabella County
Katherine Bailey	Isabella County
Heather Cole	Isabella County
Kaitlyn Hanisko	Isabella County
Jill Straszheim	Isabella County
Katie Schrock	Isabella County
Julie Pasciewski	Isabella County
Ron White	Roscommon County
Jaclyn Benson	CMU Student

As of 12/31/10:

*	5+ years
**	10+ years
***	15+ years
****	20+ years
*****	25+ years
*****	30+ years



LOCATIONS

For more information, please phone, write or visit the most convenient office.

Arenac County
3727 Deep River Road
Standish, MI 48658
(989) 846-6541



Clare County
225 W. Main St.
Harrison, MI 48625
(989) 539-6731



Gladwin County
103 N. Bowery
Gladwin, MI 48624
(989) 426-9431



Isabella County/Main Office
2012 E. Preston
Mount Pleasant, MI 48858
(989) 773-5921



Osceola County
4329 220th Avenue
Reed City, MI 49677
(231) 832-5532



Roscommon County
1015 Short Drive
Prudenville, MI 48651
(989) 366-9166



You can also find us on the web at www.cmdhd.org