West Nile Virus infection rates of mosquitoes were the worst since West Nile became a problem in the U.S. About one in three mosquitoes that were captured for testing in Montgomery County proved to be infected by West Nile. Since hardly anyone gets only one mosquito bite, the risk of being infected by multiple bites was quite high. Symptoms of West Nile include fever, body aches, swollen glands, headache, neck stiffness, stupor, disorientation, tremors, convulsions, muscle weakness, vision loss, and sometimes numbness, paralysis and coma.

The best way to avoid getting West Nile is to avoid bites from infected mosquitoes. You can do this in two major ways. One, make sure mosquitoes are not breeding on your property. Eliminate any areas of standing water. And two, make certain that when you enter areas where mosquitoes are present, you always use mosquito repellent and wear protective clothing.

There were 88 human cases in Ohio, with ten cases in Montgomery County.
On Saturday morning, September 8, a water pipe burst in the parking garage just outside the south exterior foundation wall of the Reibold Building. The water gathered sand, silt, and dirt and flowed freely into the lower level clinic of the building. It is estimated that 1,000 gallons per minute were entering the building along the entire 250 foot south interior wall. By the time the break was detected, standing water covered a large part of the lower level Public Health Clinic – up to 6 inches in some areas.

Efforts to remove the water began immediately. The water in the clinic was removed through existing floor drains and from the building through reactivated sump pumps. Over the weekend, an emergency meeting was held to plan for communicating to staff, contacting scheduled patients, and alerting the media that clinic operations would be suspended immediately.

The County offered the temporary use of vacant floor space with furniture in place on the fifth floor of the building to relocate all affected clinic operations. Throughout the week, Public Health employees worked tirelessly to plan and relocate to the fifth floor, with a smaller group on the second floor. About 34 staff workspaces, 35 computers, phones, medical supplies, etc. were relocated in order to open clinic services to the public on an emergency basis. Partial clinic operations resumed on Tuesday with complete operations resuming on Thursday, September 13. All this was accomplished while working to cleanup and minimize the environmental impact of the damage sustained to the lower level. All furniture had to be moved, carpet dried, and base boards removed. Drywall was tested for moisture and removed as necessary. Temperatures had to be maintained at 90°F - 95°F for a three to four day period to accelerate the drying to avoid the growth of mold. Working conditions in the clinic area were very difficult, but the team prevailed in a cooperative effort that was nothing short of amazing.
Prior to the beginning of the school year, Public Health offered two vaccination clinics for students to receive the Tdap (Tetanus, Diphtheria, and Pertussis) booster. Ohio law requires incoming 7th graders to show proof they have received the Tdap vaccine before they can attend classes. The clinics were designed to make it as easy as possible for parents to meet the state requirement, so their children wouldn’t have to miss any school.

Often times, parents wait until the last minute and then have to take off work and face long wait times along with others trying to get the shot before their kids can attend school. The first clinic was held in early August, on a weekday from noon to 6:30 PM in Vandalia. The second clinic was held on a Saturday, from 11:00 AM to 5:00 PM in Centerville. Various Public Health staff assisted with the clinics, as well as volunteers from the Medical Reserve Corps and local community emergency response teams.

The clinics offered evening and weekend hours, free parking and quick service. They were also open to 8th - 12th grade students who had not previously received the Tdap booster. Additional vaccines that protect against meningitis, HPV (human papillomavirus), chicken pox, hepatitis A, and hepatitis B were also available. Pertussis (whooping cough) is highly contagious and can spread rapidly in schools, which is why immunizations are so important and required for teenagers. If kids become infected at school, they can bring the disease home to the whole family. Pertussis can cause serious illness and can even be life-threatening, especially in infants. More than half of infants less than one year of age who get pertussis are hospitalized.

Public Health received many grateful compliments from parents, who appreciated this convenient service that made their lives a little easier and offered valuable protection for their families.

Please Cover Your Cough

Droplets can travel several feet after a cough or sneeze and spread highly contagious germs.

Public Health “Stretching Dollars” to Do More with Less

Like much of the Miami Valley, Public Health continued to face many challenges from a struggling local economy and budget cuts in 2012. Faced with fewer resources to do an ever-increasing job, Public Health implemented many difficult changes.

Determined to continue to be good stewards of taxpayers’ money, the agency again looked at “stretching dollars” to do more with less. This translated to numerous program changes and employee layoffs. Unfortunately, many skilled public health colleagues, who had served the community well for many years, lost their jobs. Since 2004, the agency has reduced its employee count from 391 to 300.

Michelle Kingsfield emceed the event and the Director of the Ohio Department of Health, Dr. Ted Wymyslo, was the Keynote Speaker. Dr. Wymyslo spoke on the importance of having a worksite wellness program. Health Commissioner Jim Gross gave a general overview of our Community Health Assessment and the importance of creating a culture of healthy lifestyles. Bryan Bucklew, President & CEO of the Greater Dayton Area Hospital Association, spoke on healthcare reform, the potential changes in benefits, and how to be a “smart consumer.” Bruce Barcelo, Project Manager for GetUp Montgomery County, closed the event by giving participants practical ideas that can be easily implemented at the workplace using the 5-2-1-Almost None message. He discussed healthier vending options, requiring only healthy food and beverages at meetings and events, and increasing opportunities for physical activity throughout the workday.

Keynote Speaker Dr. Ted Wymyslo, Director of the Ohio Department of Health, addressed conference participants about the importance of worksite wellness programs.
The summer of 2012 gave the Miami Valley some of the hottest temperatures on record. In response, Public Health issued a “Public Health Heat Warning” for the eight-county Ohio West Central region from June 28 to July 9 due to weather forecasts of dangerous heat conditions. During that eleven-day period, daytime temperatures ranged from 91°F - 102°F coupled with overnight low temperatures from 70°F - 80°F. Public Health worked closely with local news media and asked all local organizations and political jurisdictions within the county to implement their respective heat plans. Some jurisdictions designated cooling centers, some went door-to-door checking on known shut-ins, and several organizations worked with on-site physicians to address issues caused by excessive heat and certain medications. Heat updates were available on the Heat Line (913-2000), and information on preventing heat-related illnesses was posted on the home page of the Public Health website (www.phdmc.org).

A total of 179 heat-related patient visits were reported among the sixteen hospitals within our eight-county region. At the Dayton Air Show, 278 individuals were treated for symptoms of heat-related illness. Thirty-three of those individuals were transported to a hospital.

On Friday, June 29, severe thunderstorms matured into a violent straight-line convective wind storm with an average storm speed above 60 MPH and wind gusts of over 80 MPH. The storm led to power outages for over 175,000 residential and commercial buildings in the DP&L service area (70,000 in Montgomery County). The Montgomery County Office of Emergency Management opened the Emergency Operations Center (EOC) to assist with DP&L power restoration activities and to support the American Red Cross sheltering operations. Two Red Cross shelters were opened in Montgomery County for individuals needing functional assistance with daily living activities: Fairhaven Church and Vandalia Recreation Center.

Public Health Emergency Preparedness staff assisted in the deployment of the Ohio National Guard to locations with no power, low income areas, and elderly residents. They also worked with the Red Cross EOC representative to ensure shelter staffing and activated the Medical Reserve Corps volunteers.

Public Health also initiated a request to all county long-term care facilities for assistance with a quadriplegic individual with functional needs that could not be helped at the Red Cross shelters. Nine long-term care facilities responded and the individual was transferred from a hospital to one of the facilities and then returned home the following day once power was restored.
During recent years, the Cincinnati area has had a significant problem with syphilis. In 2012, the Ohio Department of Health awarded Public Health - Dayton & Montgomery County (PHDMC) an HIV and STD grant totaling $736,938, to provide fiscal and technical oversight to Hamilton County Public Health to improve HIV and STD outreach throughout the Cincinnati area. Ninety percent of the funding was used by Hamilton County Public Health, with 10% of the grant going to Public Health - Dayton & Montgomery County to provide leadership and guidance.

PHDMC chose to participate in this venture in part because syphilis increases in Cincinnati put our own local community at higher risk due to the ease of travel on the I-75 corridor.

While there are many aspects to how diseases are spread between different areas of the country, ease of travel and the frequency of travel play a role. Communicable diseases do not recognize political boundaries. Montgomery County Health Commissioner Jim Gross explains, “It’s an honor to work with the state and Hamilton County to address this regional health issue.” “It’s a win-win for the public health community and our citizens,” he stated.

Hamilton County is developing a strategic task force focused on testing, surveillance, education and follow-up.

**2011 Annual Rate of Primary and Secondary Syphilis per 100,000**

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Source: Ohio Department of Health STD Surveillance Program


1 in 2 Sexually Active Young People Will Get an STD by Age 25 - Most Won’t Know It
Kenton Domer-Shank was named the State’s Outstanding Sanitarian for 2012. The Ohio Environmental Health Association annually honors one individual in the state who is recognized by peers as having made outstanding contributions to the field of environmental health.

Kenton is a Sanitarian Supervisor for Public Health. Sanitarians are public health experts specializing in environmental health areas. Sanitarians are sometimes referred to as health inspectors.

Mr. Domer-Shank has protected the public health of Montgomery County citizens for over 33 years. He has been a staunch supporter of the Ohio Environmental Health Association, serving on various committees and serving as an elected official. His expertise has proven valuable as a long-standing member of the Sewage Technical Committee.

He often speaks at seminars in our community on topics as diverse as home sewage and water, solid waste disposal, rabies control and water protection. Kenton has earned the respect of the community and his peers for his wealth of public health knowledge.

Keeping the Weight Off During the Holidays

Is it possible to keep off the weight during the holiday season? That was the idea behind the 3rd annual Not a Single Pound Challenge, a friendly, county-wide initiative to encourage individuals not to gain weight throughout the holidays. The goal was for all participants to maintain their body weight (or lose weight if desired) during a 2-month period covering the Thanksgiving, Christmas and New Year’s holidays.

It’s a fact that most people gain 1-2 pounds each year over the holidays. Unfortunately, it is not a temporary weight gain because most never lose that weight. That seemingly small 1-2 pound weight gain each year really adds up over time…to the tune of 10-20 pounds over a ten-year period. Over the course of our lifetime it becomes a significant weight increase! We all understand the negative health consequences of being overweight.

This year, Public Health encouraged the general public and outside organizations to join in the challenge. Public Health provided the guidance and support needed for employers to participate. Of the twenty-three organizations that reported their results back to Public Health, 1054 individuals were weighed in; 974 were weighed out; 658 maintained their weight within a pound; 153 lost five pounds or more; and 161 gained weight. Overall, 83% of those who completed the Challenge were successful at maintaining or losing weight.
Real Story: Let’s be honest. We’ve heard that Public Health is trying to reach the uninformed people in this county and fill their heads with information about all kinds of “health topics.” Is this true?
Commissioner Gross: If you’re asking if we are trying to get people the information they need to make wise decisions about their health, then the answer is yes.

Real Story: Well, we’ve heard you are putting out messages that tell people what to eat, what not to eat, when to sleep, how to exercise more, not to drink sugary drinks and so forth. Just where do you get the right to tell people what they should do in their own personal lives?
Commissioner Gross: As I said before, we try to give people the information they need to make wise decisions. We don’t tell them what to do. For example, we know that the choice to smoke contributes to poor health, chronic diseases, and premature death. And yet, people make their own choices. The same concept applies to healthy eating, exercise and avoiding sugary drinks. We know the difference those things can make in people living healthy and happy lives. Surely, you don’t believe we should keep that kind of information to ourselves.

Real Story: Can you tell me why you’re using a “National Enquirer-type publication” to tell your story. This is a bit trashy for a health department publication, isn’t it?
Commissioner Gross: We don’t think it’s trashy. It’s a bit different because we want people to read it. If we can make it eye-catching and fun to read, then we can get our message out better. It’s just another tool. We also use our website, Facebook, Twitter, YouTube, and other social media. Our goal is to communicate with citizens of Montgomery County, so they know the public health services available to them.

Real Story: Where do you folks get all your money?
Commissioner Gross: Our funding comes from a variety of sources. We get some state and federal dollars. In addition, many of our inspection programs are paid for by the industries that we regulate. But the biggest single chunk comes from the Human Services Levy, which usually provides about 40-50% of our revenue. In fact, that’s part of the reason we feel it is so important that the citizens understand what services we provide. Every few years the Human Services Levy comes up for renewal. If the public understands how the Levy works and pays for public health services, they are more likely to make an informed decision.
Realizing that way too many babies continue to die in Montgomery County, Public Health started a Montgomery County Infant Mortality Coalition to find more effective ways to reduce these deaths. The infant mortality rate (IMR) represents the number of babies per 1,000 who die before their first birthday.

While the IMR in the U.S. has declined from 20 in 1970 to 6.1 in 2010, the rates in Montgomery County have not improved since 1991. In 2010, the total death rate was 7.4; however, the rate for black babies was 14.2 – nearly three times higher than that of white babies, which was 5.4.

Why is the death rate so much higher for Blacks than for Whites?
That was one of the many questions the coalition explored in an effort to lower the rate and reduce disparities in health outcomes.

Reducing infant mortality is a complex problem involving many factors, including race, education, income, housing, employment, and access to social services and medical care.

The coalition worked to promote early prenatal care, education, and choices that lead to healthier pregnancies and babies. They also focused on reducing low-birth weight and pre-term births, unplanned pregnancies, smoking, alcohol use during pregnancy, and barriers to quality services.

The coalition looked at better ways to use prevention efforts focusing on four strategic areas:
- maternal health / prematurity
- maternal care
- newborn care
- infant health

In addition to Public Health, the coalition was co-chaired by the Greater Dayton Area Hospital Association (GDAHA). Coalition members included community partners from healthcare, education, social services, and faith-based organizations.

The coalition’s work has only begun.

Employees Compete to Live Healthier Lifestyles

We all know healthier employees tend to be happier and more productive, which is good for the community. With that in mind, many public agencies within Montgomery County participated in a 3-month “GetUp” wellness challenge to improve employee health. GetUp Montgomery County is a community-based initiative to reduce obesity and promote healthy eating and active living through a simple 5-2-1-Almost None (AN) lifestyle prescription:

The 5-2-1-AN lifestyle is a simple way to make long-term improvements to your health each day:

- Eat 5 servings of fruits and vegetables.
- Spend less than 2 hours of leisure screen time (TV, internet, video games).
- Get at least 1 hour of physical activity.
- Drink Almost None of those sugary soda or juice-flavored drinks.

The friendly challenge combined participants into three “Super Teams” representing Montgomery County General Government, Human Services Agencies, and Law Enforcement & Justice. Challenge participants earned points by incorporating the 5-2-1-AN lifestyle into their daily schedule and tracking their healthy behaviors using a simple online program. Friends and family were also invited to participate in the challenge, but their points did not count toward the Super Team scores.

At the conclusion of the 3-month challenge, a total of 2,710,814 points were logged among 984 participants! The Human Services Agencies (including Public Health) recorded 1,282,475 points, Montgomery County General Government totaled 961,129 points, and Law Enforcement & Justice finished with 467,210 points. Public Health set the pace from the beginning, and finished with the most points at 830,475.
Ever wondered how restaurant workers know what they’re supposed to do? The answer is somebody trains them. In many cases, the owner spends time teaching them how to make sure the food is handled so that nobody gets sick. Another option is to send them to an inexpensive, $25, two-hour food protection course offered monthly by Public Health. The training is conducted by a number of health inspectors that routinely teach managers and food handlers how to ensure quality control and safety of food. In 2012, 18 classes were held. A monthly program was conducted at the environmental offices in the Reibold Building in Dayton, and upon request, the trainers also went out into the community to do the training at specific businesses.

The majority of individuals trained attended because they or their managers wanted to enhance the quality of the food handling in their business. There are others who must attend the course, including employees from any new food operation; any operation implicated in a foodborne disease outbreak; or any operation that the health department has documented as failing to maintain sanitary conditions.

The training benefits schools, grocery stores, concession workers, and those who run mobile food trucks. Topics cover basic food protection including cleaning and sanitizing, hand washing and personal hygiene, when an ill employee must be excluded from work, time and temperature requirements for preparing food, proper food storage, and what is an acceptable food source. Students receive take home educational materials. Over the year, 228 food handlers received level one certification in food protection.

Keeping hands clean is one of the most important ways to prevent the spread of infection and illness. Centers for Disease Control and Prevention

Sanitarian Supervisor, Jennifer Wentzel explains the correct way to cool food in large containers.

Online inspection reports can be found at www.phdmc.org under “Quick Links.”
Foodborne Illness:
79 SICK
from E. coli O157 at Community Picnic

It was the July 4th weekend, and more than 300 people participated in a customer appreciation carry-in picnic and an additional 2,000 local residents enjoyed community fireworks at Neff’s Lawn Care in Germantown. Sadly, 79 individuals became ill, with 18 confirmed as being infected by E. coli O157. There were 14 people hospitalized and three of these people developed hemolytic uremic syndrome (HUS), a disease that destroys red blood cells and causes acute kidney failure. One of the hospitalized individuals, a 73-year old man, died.

The owner of the lawn care company and local residents suffered through many difficult weeks after the illnesses occurred. The annual customer appreciation picnic began several years ago following the death of the owner’s wife. He wanted to show his appreciation to the community for their wonderful support during his time of personal loss. The community, in turn, was very appreciative each year of how he routinely “gave back.”

Public Health became involved in the investigation as soon as the hospitals started receiving people who had attended the event and were suffering from symptoms of diarrhea and rectal bleeding. Interviews by Public Health with those who were sick indicated they had all eaten food at the picnic. As the number of ill people grew, the health department used the local media (including TV, radio, and local newspapers) to instruct anyone who had attended the event and then became ill to call Public Health.

Health department staff talked with 65 people who claimed they had become sick and also interviewed 52 people who attended the event and did not become ill. A food history was collected from each. A food history involves finding out what an individual ate and what they didn’t eat at the picnic. Food for the event came from lots of sources, including some being prepared by the host of the event, as well as potluck carry-in foods brought by the attendees to the picnic. Food included two hogs roasted off-site, hamburgers and hot dogs prepared at the site and over 100 carry-in dishes brought and shared by guests. Public Health sanitarians interviewed the hosts, inspected the facilities where some of the food was prepared, and tested drinking water. No food samples from the event remained for testing. Environmental samples, however, were collected from the farm where the hogs were slaughtered. The entire investigation involved extensive cooperation with Neff’s Lawn Care, the Ohio Department of Health, the Ohio Department of Agriculture, the U.S. Department of Agriculture, and the Centers for Disease Control and Prevention.

Unfortunately, the health department was unable to determine with certainty what had caused the outbreak.

Some of the Things Which Prevented Confirmation of the Cause of the Outbreak
- Over 100 different food items were brought to the picnic
- The foodborne investigation began 6 days after the event, when the health department first learned from area hospitals that people had started to become sick
- There was no way to verify actual food handling practices before and during the picnic
- Most importantly, when the investigation began, there were no food samples left to be analyzed

For information on safely preparing food for large groups, visit www.phdmc.org and type “food safety” in the search window.
Public Health Services DEPEND on the Human Services Levy

A large part of the Public Health budget comes from the Human Services Levy. The levy process allocates money to those organizations and agencies that provide needed services in the most efficient ways. Every agency that receives dollars must account for how those dollars are spent.

Human Services Levy Spending (in Millions)
- Maternal & Child Health ($3.6)
- Communicable Disease ($3.3)
- Health Promotion ($2.3)
- Environmental Protection ($1.3)
- Neighborhood Health Centers - Subsidies ($1.0)
- Home Care Program ($0.8)
- Emergency Preparedness & Epidemiology ($0.5)
- Alcohol and Drug Addiction Services ($0.2)

Total Spending (in Millions)
- Levy Supported Services (13.0)
- Non-Levy Supported Services (20.9)

What you need to know about the levy:

The Human Services Levy (HSL) is a primary source of funding for many of the most critical social and health services of the county.

Here's how it works

About 30 years ago, there were many individual special purpose levies to fund organizations that provided public health services, child abuse prevention, help for the frail elderly, services for those with developmental disabilities, and assistance for those dealing with alcohol, drug addiction and mental health issues. Nowadays, all those programs and many more are supported by funds from the combined “umbrella” Human Services Levy.

Here's the key to why it works

The levy money goes into one big pot and then every organization competes for those dollars. Those dollars from the levy are also magnified because they help bring in millions of dollars from state and federal sources.

There is accountability

All agencies that receive money are reviewed by levy volunteers and must show how all HSL funds are spent. There is routine monitoring.

The system reduces redundancy

Levy-supported agencies also provide other needed services. A competitive process helps the money follow the most efficient programs and helps prevent duplication of services.

Montgomery County’s Human Services Levy is recognized as one of the best in the United States.

Local public health programs are very dependent on the dollars from the levy. Each year about 40-50% of the budget comes from these tax dollars.