



Public Health
Prevent. Promote. Protect.

Brown County Health Department

2019 Annual Report

I am pleased to submit the following annual report of the activities of the Brown County Health Department for the 2019 calendar year.

Respectfully Submitted,

Norman Oestrike, MD
Health Officer

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The Brown County Health Department employees have continued their role of providing the best community public health services to our citizens and protecting our environment against health risks and contamination. Reports detailing each Department's achievements and activities for the past year are attached.

The Health Department has applied for and received numerous grants to support the nursing services, environmentalists and the emergency preparedness activities. These grants keep the department staffed and prepared. These grants save the Brown County taxpayers thousands of dollars each year.

The Brown County Board of Health has remained very proactive in providing direction to the Health Department and the community. They have subcommittees for a new septic ordinance and work with other groups in the community on health issues, developing the types of programs the community needs and will accept.

The Nursing Department is currently composed of three Registered Nurses. They have developed programs to expand immunizations in our county and our school system. They are continuing to work in the community on the Opioid Crisis, providing vital information for our citizens. They continue to monitor infectious diseases, in our county. The Sharps Program has provided a safe way for disposing of medical syringes and needles in our county.

Environmental Health Services has been extremely busy with septic system installation and repair permits and inspections. In addition, our long list of complaints regarding trash and environmental debris causing health and safety risks in the community have been investigated and many resolved. They are also working with the Solid Waste Department and Indiana Department of Environmental Management (IDEM) to find ways to enforce environmental laws in our county. We are working to put septic data into a spread sheet to help identify and quantify the state of our septic systems in the county. This is also a significant factor in developing sewer plans and expansions for the Brown County Regional Sewer District.

The emergency preparedness activities have been numerous, as outlined in the department report. This is a vital responsibility to prepare for disasters as well as infectious disease epidemics. Emergency plans have been developed to work within our community, the region and our state. Emergency equipment and supplies have been acquired. Plans are to continue training and preparedness.

I want to thank all of our employees for their work and dedication to the health of our community. I am also very appreciative of the dedication of our Health Board and their involvement and guidance in fulfilling our mission.

I also want to thank members of our community for their support and constructive ideas to best serve our community. Many worked tirelessly on our committees.

Respectfully submitted,

A handwritten signature in black ink, appearing to read "Norman Oestrike MD". The signature is fluid and cursive, with the letters "N", "O", and "M" being particularly prominent.

Norman Oestrike, MD

Brown County Commissioners

Dave Anderson
Diana Biddle
Jerry Pittman

Brown County Council

Darren Byrd
David Critser
*Gary Huett
Art Knight
John Price
David Redding
Glenda Stogsdill

Brown County Board of Health

Linda S. Bauer
Jeffrey Cambridge, RPh, MBA
Michael Day, MD
Thomi G. Elmore (Chair)
William Irvine, MD
Cynthia S. Rose, RN & Attorney
Catherine Rountree, BSN, RN (Vice Chair)

Norman Oestrike, MD
Health Officer/Secretary
Michael Day, MD
Assistant Health Officer

**Gary Huett replaced County Council member Bill Hamilton who resigned August 2019.*

Brown County Health Department Staff

Corey Frost	Public Health Coordinator
Taylor Hardesty	Registrar/Clerical Support
Jennifer Heller, BFA	Environmental Health Specialist (Food Division)
Judy Hess	Office Manager/Administrator
Kelly Hilligoss, BSN, RN	Public Health Nurse
John Kennard, BS	Environmental Health Specialist – Supervisor
Norman Oestrike, MD	Health Officer
Ernie Reed, AS	Environmental Health Specialist
Seleah Settle, BSN, RN	Public Health Nurse
Jennifer Unsworth, BSN, RN	Public Health Nurse – Supervisor

Receipts for 2019

Revenues

Property Tax		\$386,429.31
Financial Institution Tax		1,139.98
Excise Tax		29,037.63
Commercial Vehicle Excise Distribution		2,449.57
Health Department Fees		59,979.75
Local Health Maintenance Fund		33,139.00
Local Health Department (LHD) Trust Account		14,889.62
Public Health Coordinator Base Grant (7/1/2019-6/30/2020)		25,000.00
Cities Readiness Initiative (7/1/2019-6/30/2020)		8,078.00
Total Revenues		\$560,142.86

Breakdown of Health Department Fees:

Food	\$24,683.00
Installer License	3,100.00
Nursing (Includes VaxCare)	5,576.75
Septic	21,850.00
Visual Inspections	50.00
Vital Records (Includes coroner's training and continuing education funds)	4,720.00
Total Health Department Fees	\$59,979.75

The Brown County Health Department started accepting healthcare insurance, which is processed through VaxCare. VaxCare supplies the Health Department with private pay vaccines. When individuals with insurance request these vaccines, the nursing staff will process the individual's insurance information and set up the appointment. The Brown County Health Department does not require an administration fee, a co-pay, or a visit fee. This has allowed the Health Department to accept a whole new category of individuals to vaccinate.

The Local Health Maintenance Fund grant was established by the State to provide local boards of health with funds to provide public health services. The amount given to each county is based on population. These dollars are used to offset part of the salary of one Environmental Health Specialist and one part-time Registered Nurse. It also pays for advertising, CPR manikins and supplies and other items. According to IC 16-46-10, these dollars cannot be used by the general fund. All expenditures must be approved by the State Department of Health and must follow State code.

Local Health Trust Fund. This grant is from State tobacco settlement dollars. It too is based on county population. These dollars are used to update the department's web page, server and maintenance, education and training, and other items. According to State code IC 4-12-7, these dollars cannot be used by the general fund. All expenditures must be approved by the State Department of Health and must follow State code.

Public Health Coordinator Base Grant and Cities Readiness Initiative: These amounts are reimbursed through a Federal grant from the Centers for Disease Control & Prevention. The base grant helps offset the salary of the position.

Expenditures for 2019

	<u>Total Appropriations</u>	<u>Disbursements</u>
Personnel Services Health	\$503,243.00	\$488,879.63
Supplies / Operating Expenses	69,485.00	48,163.48
Local Health Maintenance Fund	33,139.00	24,315.46
Local Health Department (LHD) Trust Account	14,889.62	8,928.10
Public Health Coordinator Base Grant (7/1/2018-6/30/2019)	25,000.00	25,000.00
Cities Readiness Initiative (7/1/2018-6/30/2019)	8,078.00	8,078.00
Total	\$653,834.62	\$603,364.67

- The Local Health Maintenance Fund is governed by IC 16-46-10
- The Indiana Local Health Department Trust Account is governed by IC 4-12-7
- These grant dollars are spent according to code. A detailed budget, with documented items and a detailed plan is sent to the Indiana State Department of Health for approval of expenditures. These dollars are to enhance the Brown County Health Department. Part of the Local Health Maintenance Fund helps offset the salaries of a nurse and an environmental health specialist.
- Local funds are not to be reduced by these dollars, according to code. Any requests to use carry over dollars, must be in writing, presented to the Indiana State Department of Health and detail how the dollars will be used. The Indiana State Department of Health approves or denies any request.
- The Local Health Maintenance Fund and the Indiana Local Health Department Trust Account Funds are not tax dollars. They are from the tobacco companies based upon the settlement actions in the 80's and 90's. These dollars cannot be used by other departments in local government.

- The Public Health Coordinator Base Grant and the Cities Readiness Initiative Grant are Federal grant funds that have been awarded by the Centers for Disease Control & Prevention through the Indiana State Department of Health to further public health preparedness capabilities.
- The budget is approved by the Indiana State Department of Health for all expenditures.
- The Base Grant helps offset the salary of the Public Health Coordinator.
- Dollars not spent in the Cities Readiness Initiative Grant are cycled into the Indiana State Department of Health.

OFFICE MANAGEMENT

Submitted by Judy Hess, Office Administrator

The office manager assumes many of the responsibilities delegated by the Health Officer. The following are a few of the duties assigned to the office manager.

- Attends meetings as needed.
- Assists in interviewing and hiring of employees.
- Helps to resolve conflicts with the public and/or employees. Consults with individual department supervisors.
- Makes decisions on day-to-day business regarding the department.
- Prepares the office budget, attends budget hearings and submits to Health Board for approval.
- Prepares all financial reports regarding grants and budgets. Sends to ISDH as requested and responsible to State Board of Accounts for audits.
- Attends meetings with various county offices as needed.
- Keeps personnel records for staff.
- Responds to and gathers information for requests for records.
- Reviews time sheets and answers questions regarding time sheets, corrections.
- Approves time off requests for staff, per health officer. (Health Officer approves time off for office manager.)
- Prepares bi weekly payroll.
- Coordinates meetings for Health Officer and Board.
- Meets with the Health Officer and keeps him informed of all events, concerns, etc. within the department.
- Prepares board minutes for Health Officer.
- Attends Health Board meetings.
- Coordinates and facilitates staff meetings when needed.

The office manager works closely with the county health officer. The office manager spends time working with the health officer regarding any Health Department issue such as: budget, personnel, health officer duties, arranging trainings for the Health Officer, letter reviews, etc. She also works with department supervisors within the department as needed. She makes arrangements and creates the agenda for the health board meetings which are held six times a year.

The office manager also does daily activities in the office such as answering questions from the public, answering the phone, filing, deposits, bookkeeping duties, monthly claims for accounts payable, issues receipts, issues septic permits, septic searches, food licenses, pool licenses, farmer markets permits, collection reports, all state reports concerning grants and grant reviews. She assists with vital records as needed.

VITAL RECORDS

There were 122 deaths reported in 2019 living an average age of 76 years.
They were classified as:

Cancer	29
B Cell Lymphoma	3
Bladder	3
Brain	2
Breast	1
Esophageal	1
Leukemia	1
Liver	2
Lung	10
Melanoma	1
Ovarian	1
Pancreatic	1
Prostate	1
Stomach	1
Uterine	1

Heart Disease	34
Atherosclerosis	1
Acute Catastrophic Cardiac Event	8
Congestive Heart Failure	4
Coronary Artery Disease	4
Diastolic Heart Failure	3
Myocardial Infarction	10
Systolic Heart Failure	2
Vascular Disease	2

Respiratory	18
COPD	6
Pneumonia	3
Pulmonary Embolism	1
Respiratory Failure	8

Accidental	5
Blunt Force Trauma	5

Other	36
Alzheimer's/ Dementia	9
Anorexia/Nutritional	1
Asphyxiation	1
Cirrhosis	1
Degeneration of the Brain	9
Dehydration & Hypernatremia	1
Hemoperitoneum	1
Parkinson's Disease	1
Renal Failure	1
Self-Inflicted Hanging	2
Self-Inflicted Gunshot Wound	3
Sepsis	1
Septic Shock	1
Stroke	3
Undetermined Natural Causes	1
Grand Total	122

Registration of Home Births
Female (0) Male (1)

Registration of Deaths
Female (50) Male (72)

Certified Copies Issued
Birth (34) Death (650)

Did Tobacco Use Contribute to Death?
Yes (9)
No (45)
Unknown (58)
Probably (10)

2019: 38 Veteran Deaths
2018: 33 Veteran Deaths

2019: 76 Average Age at Death
2018: 77 Average Age at Death

Vital Records

Out of County Deaths but In-County Residents

Information provided via reports from the Indiana State Department of Health

There were 66 deaths reported in 2019 living an average age of 71 years.

They were classified as:

Cancer	11
Abdominal	2
Appendix	1
Brain	2
Breast	1
Kidney	1
Liver	1
Lung	2
Multiple Myeloma	1

Heart Disease	14
Cardiac Arrhythmia	2
Combined Heart Failure	2
Congestive Heart Failure	2
Coronary Artery Disease	2
End Stage Heart Failure	1
Myocardial Infarction	5

Respiratory	17
COPD	4
Hypoxia From Pneumonia	1
Pneumonia	2
Pulmonary Embolism	1
Pulmonary Fibrosis	1
Respiratory Failure	8

Other	24
Alzheimer's/ Dementia	1
Brain Hemorrhage	2
Degeneration of the Brain	1
Diarrhea	1
Complications from Surgery	1
Ethanol Poisoning	1
Failure to Thrive	1
Hemorrhagic Shock	1
Hemopericardium	1
Hypovolemic Shock	1
Liver Failure	1
Renal Failure	1
Self-Inflicted Gunshot Wound	1
Sepsis	2
Septic Shock	4
Spontaneous Rupture of Membranes During Pregnancy	1
Stroke	2
Subdural Hematoma	1

Grand Total	66
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2019: 71 average age at death

Note: Beginning in 2019, the Indiana State Department of Health began releasing causes of death that occurred outside the county for Brown County residents.

EMERGENCY PREPAREDNESS

Submitted by Corey M.B. Frost, Public Health Coordinator

BUDGET

- Base Budget of \$25,000 has been accepted
- CRI (Cities Readiness Initiative) available budget of \$8,078 has been accepted.

REGULAR MEETINGS ATTENDED

- District 8 meetings held bi-monthly, representatives from all counties in District 8 are present. Those counties are Monroe, Lawrence, Orange, Bartholomew, Jackson, Washington and Brown.
- Attend and Chair LEPC (Local Emergency Planning Committee) meetings.
- Monthly mobile office meetings with District 8 staff.
- EPPC meetings (Emergency Preparedness and Planning Coalition) bi-monthly. Formerly the District Planning Council.
- Attend EMAC (Emergency Management Advisory Committee) meetings.
- Serves as the District 8 Local Health Department Representative to the Hospital Healthcare Coalition that meets monthly.
- Individual meetings with District 8 staff and the Indiana State Department of Health for the purpose of meeting grant deliverables and to use templates to update the ESF-8 (Essential Support Function) and the County Emergency Management Plan.
- Continue monthly meetings with ESF-8 Partners.
- Attended all ISDH (Indiana State Department of Health) and District 5 planning meetings for CRI grant.
- Attend Medical Counter Measure Action meeting with District 5.
- Working to Regionalize plans. Hamilton County has appointed a Regional Coordinator to input information in to the Data Collection Integrated Public Health Emergency Response (DCIPHER) system.

ACTIVITIES

- Command staff call down and redundant communication drills.
- Volunteer management system SERV-IN complete
- ESF-8 Drills.
- Executed a MCM (Medical Countermeasure) game in accordance with grant guidelines.
- Prepare for 2020 POD (Point of Dispensing) exercise.
- Attend Training and Exercise Planning Workshop at the state level.
- Network with state and local officials regarding emergency preparedness.
- State Certified The Brown County Public Safety Training Institute and we completed an EMT Basic Course. 11 Volunteer Firefighters completed the class.

- Held a special event in December at Brown County Music Center with special guest speakers – focused on volunteer retention.
- Deployed command tent as an aide station for the Hilly Half Marathon in the State Park.
- Evaluated the IU Bloomington Hospital’s Emergency Department Mass Casualty/Medical Surge exercise.
- Deployed Mass Casualty Trailer to French Lick for the District Asset Rodeo.
- Completed a Hazardous Material Awareness and Hazardous Material Operations level course.

TRAINING

- Full Scale Exercise for the Local Emergency Planning Committee – HazMat Scene at the Fair Grounds
- Attended EMS World Training conference with a focus on Education and Pediatric Trauma
- Completed a 10 Module training cycle on preparedness exercise and fundamentals. Required by grant.
- Completed the EMResources training and have our local health department information plugged in. System roll-out was placed on hold in December.
- Became a Stop the Bleed instructor and will be teaching school nurses and staff. Will also provide, if approved in the grant, Bleeding Control Kiosks for all schools in Brown County.
- Worked county fair bringing awareness to emergency preparedness and management.

FUTURE GOALS

- Community outreach in our schools about Emergency Preparedness.
- Moving an updating Mass Prophylaxis Plan into an All-Hazard Emergency Operations Plan. Template provide by ISDH.
- Update MOU’s (Memorandum of Understanding’s) from partners.
- Continue to help build and maintain productive relationships through Coalition Building and merger of District Planning Council with Emergency Preparedness and Planning Coalition.
- Complete the planning phase of our District Table Top Exercise in May
- Maintain high-level trainings and schedule for the Training Institute. The disciplines that benefit from this program are all responder agencies, including Fire, EMS, Law Enforcement, EMA and Public Health.
- Initiate trainings on Mass Casualty and Tactical Emergency Casualty Care as the Rescue Task Force concept moves forward. Rolled out the Rescue Task Force in January.

ENVIRONMENTAL HEALTH

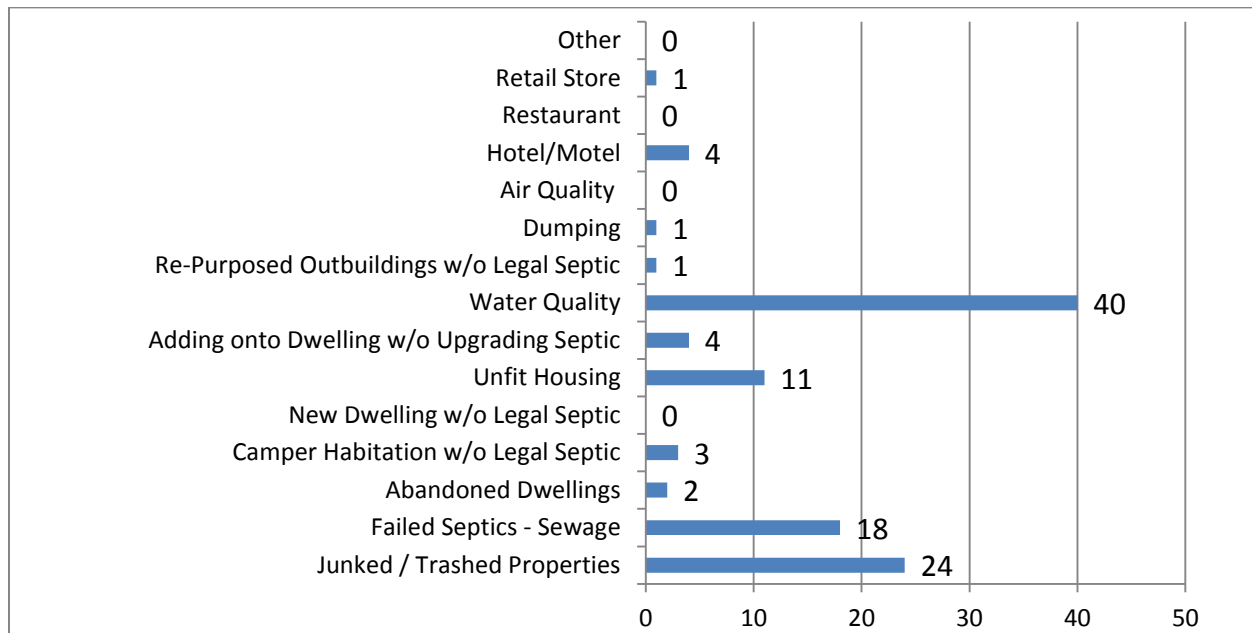
Submitted by Ernie Reed, Environmental Health Specialist

COMPLAINTS, WASTEWATER, PROJECTS, VECTOR CONTROL, SANITATION, WATER QUALITY

COMPLAINTS

At the end of 2019 there were 148 total active complaints, which is a decrease from 258 active complaints at the beginning of the year.

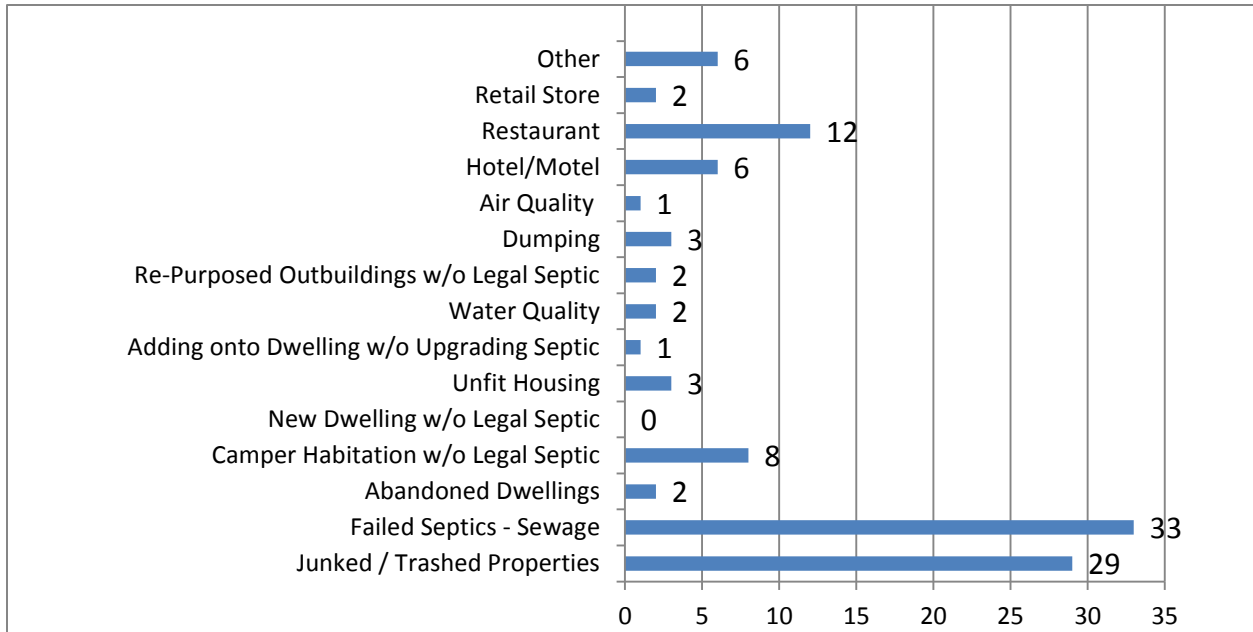
The chart below displays the type/number of active open complaints logged in 2019 only, not previous years.



By the end of 2019, 110 complaints were closed.

Some of the homes have new owners that cleansed the properties and other residents have complied with a health department order.

The chart below displays type/number of complaints closed in 2019



WASTEWATER

160 soil evaluations were submitted for review and specification work sheets were issued in 2019 compared to 151 in 2018

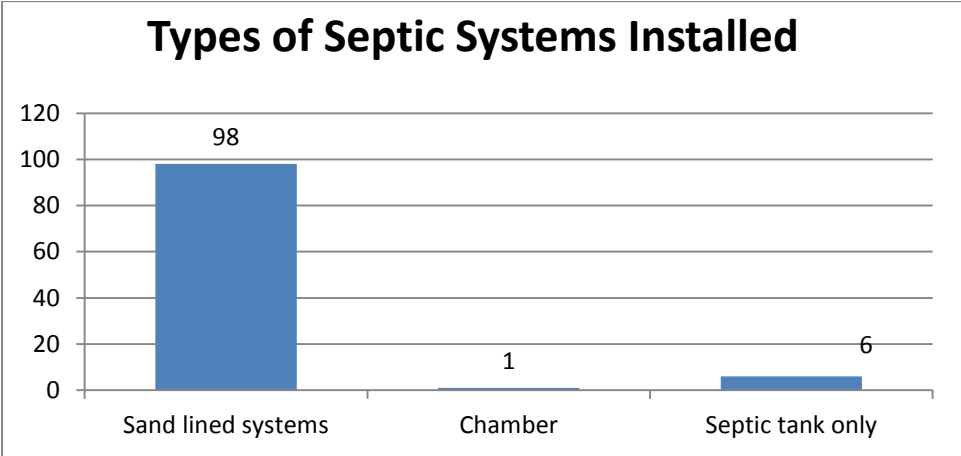
114 Septic permits were issued in 2019 compared to 108 in 2018.

There were a total of 105 installations in 2019 compared to 71 in 2018:

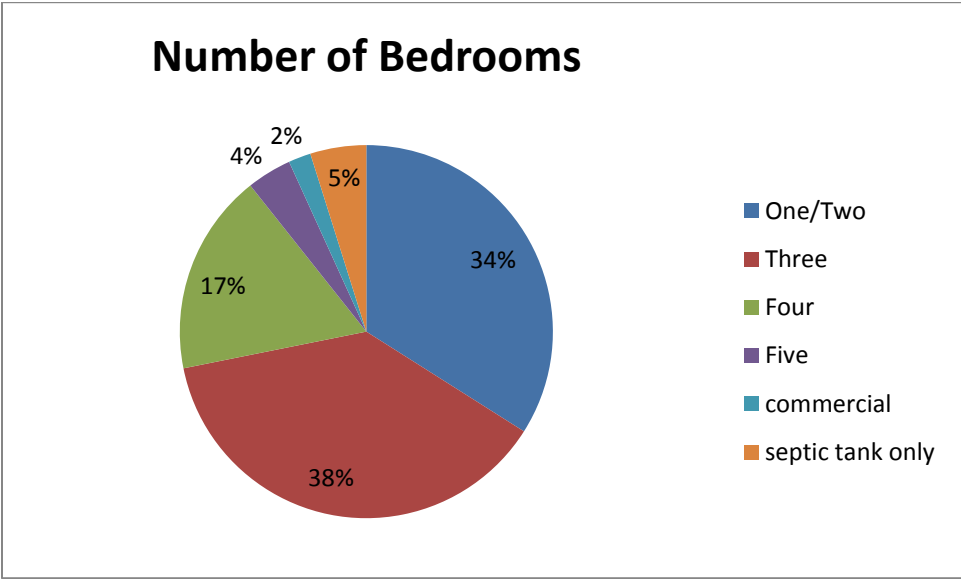
- 2 commercial
- 56 new construction
- 41 repair
- 6 septic tank installation

Environmental Health Specialists completed 138 site consultations and 165 installation inspections.

NOTE: Some of the septic installations were permitted in 2018



Percentage of the number of bedrooms per homes with septic systems permitted in 2019



FUTURE GOALS

1. Annual contractor meeting
2. Continue public education on residential septic systems
3. Participate in the 2nd annual Septic Summit

ENVIRONMENTAL HEALTH – FOOD DIVISION

Submitted by Jennifer Heller, Environmental Health Specialist

INTRODUCTION

Environmental Health includes the inspection of all food establishments within the County, with the categories of; “limited”, “full service”, “non-profit” and “temporary”. In order to assist in maintaining food safety, duties include:

- Food Establishment Inspections
- Sharing Recall notifications with food establishments
- Consultations on Openings/Closings/Remodels
- Publication of inspections online and in the newspaper
- Food Establishment Database maintenance (jointly with front office assistant)
- Food Safety and Environmental Outreach
- Teaching ServSafe Food Manager classes
- Conference attendance with educational sessions
- Indiana Environmental Health Association- in 2019 IEHA (Indiana Environmental Health Association) Southern Chapter Food Committee chair
- Executive Committee work for IEHA as Chair of the Terrorism and All Hazards Preparedness Committee
- Increasing knowledge/maintaining up to date information by ongoing training – in person and with Webinars
- Meth house condemnation when needed
- Complaints (hotel, food, smoking)
- Grease traps inspection
- Tattoo parlor inspection
- I also assisted in Septic installation inspections
- I served on the Septic Ordinance Committee

RECALLS

Recall information comes in from the FDA and USDA and the State Health Department and arrives on almost a daily basis. I compile a weekly recall report unless there is a Class I recall (most dangerous). Most of the product recalls are usually generated by a mislabeled product that has failed to include an allergen notification. If there is a Class I recall, I will send out a notice, and follow up by a phone call to local establishments that may carry the product. The recalls are compiled and sent out to all food service establishments in the County mostly by email but some are sent by regular postal service mail to the establishments without email (variable by season but usually about 5 establishments). In the email version of the recall

information that I send, there are clickable links in blue type that will take the email recipient to the official recall notice with additional contact information, product photographs, SKU numbers and where to call for more information.

In 2019 there were 226 various recalls that were sent out. Some had multiple items included in the recall. This total of recalls this year is lower than in 2018, which had 292 recalls that I sent out to Brown County Establishments. As recalls involve extensive expense to the companies involved, these companies may be policing their labeling more now than in the past. In general our US food supply is very safe. Most of the Class I recalls involve produce that has received some contamination in shipping or in irrigation.

I do not send pharmaceutical recall notices. I also do not try and determine the specific products carried at food establishments, the notices just go out to all establishments.

On the recall notice, if space was available, additional information was occasionally added, such as notification of upcoming ServSafe Food Manager classes or special health information. This was done only on a limited basis, so as not to add to confusion.

REGULAR FOOD ESTABLISHMENT INSPECTIONS

Food establishment inspections were divided between temporary event establishments and full-time regular food establishments, which were then further divided down into risk categories.

There were 123 regular full-time establishments in 2019 and there were 166 inspections performed. This is one less than accomplished in 2018.

Of the 166 inspections that were done, the facilities in the highest risk category were all inspected at least once. There are 33 food establishments in the high risk category. These are the establishments that serve more diversified food that they prepare, possibly hold, cool, and reheat. Of these, 9 had 1 inspection, 15 had 2 inspections, 6 had 3 inspections, 4 had 4 inspections, for a total of 93 high risk inspections

Of the second highest risk category, in which there are 37 establishments, all received at least 1 inspection, 18 had 2 inspections or 55 total inspections of the medium risk category.

Of the 42 establishments with lowest risk and only needing one inspection, all but 10 were inspected. This is the lowest risk category, and they have the least actual food handling. I did not inspect the Schwan Food truck (all frozen food, and on a once-a-week schedule here in Nashville), St. Vincent de Paul food bank, Valley Branch/Explore Brown County (which only serves hot chocolate occasionally to zip line riders), Candy Miller "Let's Have Tea", (operates on an as needed basis every four months or so from Mother's Cupboard and we have not ever able to connect), and as she is only blending dry teas, this is very low risk. I also missed inspecting the Sprunica Food Pantry (open for a couple hours once a week) this year and the Big Woods

Mobile Truck as they only used this truck in County for one event this year (that I'm aware of) which was at their Hard Truth facility. I also missed inspecting Loveland Farms in spite of repeated calls to try and connect. They serve only frozen beef that is processed in a USDA inspected plant.

TEMPORARY FOOD INSPECTIONS

There were 89 temporary facilities applications for 21 various temporary events in 2019. This is 2 more vendors and one less temporary event than in 2018. Of the 89 applications, 78 vendors were inspected. Occasionally vendors were not open at the time when I was inspecting but the majority of these temporary vendors were inspected. Ernest Reed inspected the vendors at the Brown County Story Wine Fair again this year. There is now an event almost every weekend starting in spring and going throughout the summer. Two Farmer's Markets are scheduled on Friday afternoon and on Sunday afternoon receive inspections. The Brown County Inn location received several inspections as I had issues with a salsa vendor following new regulations from the State Health Department.

Here is the 2019 breakdown by event:

- Maple Syrup Festival at Story – 6 vendors inspected
- Story Wine Fair-4 vendors, Ernest Reed inspected all
- Good Times Festival at Explore BC – 2 vendors inspected
- Antique Machinery Show – 4 vendors inspected
- Bill Monroe Bluegrass- 11 vendors, all inspected
- John Hartford festival- 13 vendors, all inspected
- BC Extension Homemakers- 1 vendor at two events, neither inspected
- Hard Truth Hills Distiller's Fest – one vendor, did not inspect
- Chubbstock at Bill Monroe Park– 1 vendor inspected
- Diamond Rio Concert at Bill Monroe Park – 3 vendors inspected
- Brown County Fair- 11 vendors, all inspected
- Bluesfest—9 vendors, 8 inspected
- Hope Fest – 1 vendor, did not inspect
- Septic Summit- 1 vendor inspected
- Bikefest—7 vendors 2 tattoo parlors, all but one vendor inspected
- Kelp's Pumpkin Patch- 1 vendor, not inspected
- Uncle Pen days—4 vendors inspected
- My Super Taqueria at Foxfire Park – inspected twice, he was there 4 times on weekends
- Real Pit BBQ--inspected once, he was there one time at a store parking lot
- Brown County Shrine Club Corn roast – did not inspect
- Chocolate Walk – 5 vendors, was not inspected
- St. David's Farmer's Market –inspected twice
- Nashville Farmer's Market- inspected four times

CONSULTATIONS, OPENINGS, CLOSINGS

Brownies Bean Blossom Inn closed, Nashville House was closed. Big Jim's BBQ did not open this year. Nashville Spice Co., moved to a new location. Harvest Moon Homestead opened, Headstart moved to the YMCA, Sidetrack Coffee began working from the Sugar Creek Smokers building.

PUBLISHED INSPECTIONS

The Democrat newspaper published all the food establishment inspections that I forwarded to them for 2019 during the year. These inspections are also posted on our Brown County Health Department website as electronic PDF files. The inspections can be seen and opened but not amended in any way on this website. Inspections are public record 10 days after the inspection. Viewers have the option to see the inspection history for our food establishments, starting with the 2011-12 inspections and up to our current date. This information has been well received by the community, and gives the restaurants further incentive to have a good inspection.

Inquiries were made from several retailers about putting food in their operations. In addition to local questions, I probably answer 3-4 calls weekly concerning food trucks/mobile vendors.

All camps were inspected at least once. There were no major issues at any of the camps.

There are currently 6 operating B&B's in the County. There are 6 Schools, 23 Non-profits, and 10 camps.

SERVSAFE CLASSES

This year I taught 4 ServSafe classes, proctored 3 classroom tests and proctored 4 online ServSafe tests. There were a total of 50 people in the classes. People attend this class from all over, one drove all the way from Madison.

We charge \$50 to just proctor the test with advance notice to set up the online test with ServSafe. Cost of the test, class and text is currently \$125.

METH HOUSES

I am assigned to do condemnations on houses that have been determined by the Sheriff's Department to have had meth production. The house is condemned until it is cleaned and certified by a Qualified Inspector. I submitted an Ordinance in 2017 to the Commissioners so that this process is clear as to the Health Department responsibilities. This ordinance was taken from another County's ordinance with review by our attorney and the County's attorney. There has been no action in two years - not voted on by Commissioners or adopted, so have given up on getting this ordinance passed.

I did not receive any Indiana Police Clandestine Laboratory reports this year. The concern now (more than meth production) is the Fentanyl labs and derivatives. I have not received notification of any of these labs in the County.

COMPLAINTS

I responded and closed out 24 food complaints in 2019.

SMOKING

I am responsible for follow-up on smoking complaints. I work with Indiana State Excise Police on this. They will send me a notice if they receive a complaint, and I will respond to them with the results of an inspection of the complaint. There were no complaints or violations this year that required my participation.

GREASE TRAPS

The Town requested in 2015 that the Health Department assist in inspecting Grease Traps, due to a large quantity of fats, oil and grease arriving at the wastewater treatment plant. The Town would pay \$25 an inspection. I subsequently designed a check sheet and an informational sheet for food establishments that are within the sewer lines of the town of Nashville treatment plant, and then sent out a general email notice on who would be required to have a grease trap in 2016. Once I started looking for these grease traps in restaurants, I realized for the most part I would not be able to get the lids off these traps to inspect them. They also have a very bad strong odor that could permeate the facility and take staff away from their jobs for some time. I did not open or inspect any grease traps this year. The establishment with the trap would have to provide an employee to assist me with the removal of the trap lid and then the return of the trap lid, which would require advance notice and scheduling of their maintenance staff or someone capable of assisting. Some of these trap lids are extremely heavy, due to their construction of iron. Some grease traps (interceptors) are actually like a septic tank, and are in-ground. These need to be opened like a septic tank and to be pumped out professionally. I do not inspect these. The Town of Nashville has issued two documents with guidance on grease traps on their website that I refer people to if they have questions on sizing of the grease traps or other issues. I ask about the grease traps during inspection, and whether or not it is being cleaned regularly but feel it is unfair to the establishment to ask to have these opened during working hours.

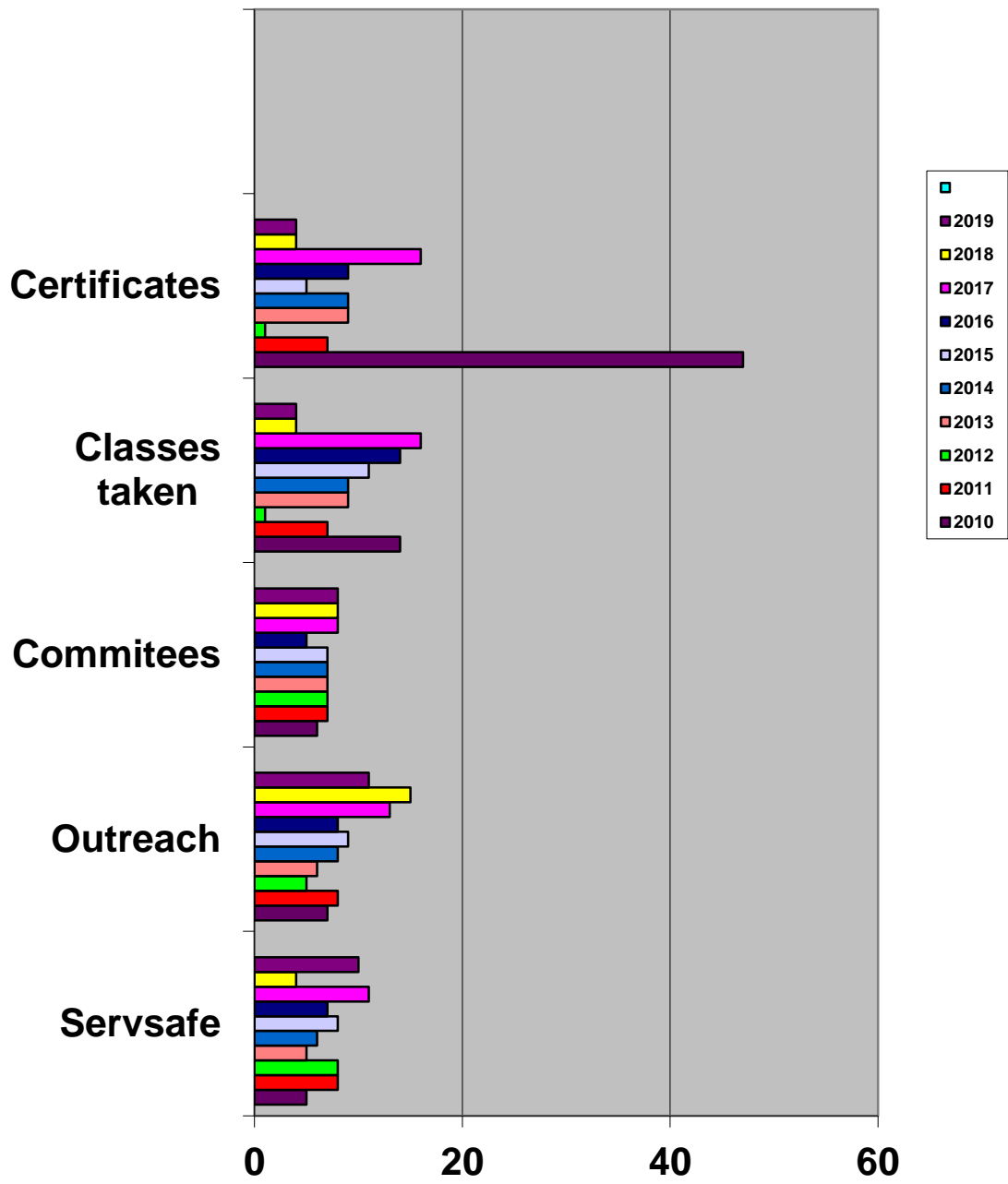
TATTOO PARLORS

There is a tattoo parlor in town, “Heartland Tattoo”. Two artists work there, and it is licensed. There are also two mobile tattoo parlors that attend Bikerfest. There were no issues this year with any of the tattoo parlors.

FOOD ESTABLISHMENT DATABASE

All full-time regular food establishment inspections are entered electronically into the Health Department database “S” drive. These can be accessed by anyone in the office and these inspections can be transmitted electronically via email, or provided as a paper copy to whoever requests a copy (subject to the 10 day waiting period). Almost all of 2019 inspections are now in electronic format, on file and also exist as a paper copy in the file cabinet with original signatures. This will be completed in mid-March. We do not use the software recommended by the State Health Department as it is still in the “roll-out” phase even after three years and not proven yet to be useful. We are using paper forms for inspections and then entering the data in our own tracking database which is not accessible to the State Health Department.

Servsafe, Committees, Certificates, Classes



OUTREACH

The following outreach projects were accomplished:

- A general food safety class was given to Happy Hollow Camp counselors prior to summer camp start-up
- I secured two interns from Indiana University to assist our department over the year.
- Several articles were submitted to the Democrat newspaper: Pool Safety, Radon information, ServSafe Class announcements, West Nile Mosquito counts, Avoiding Bug Bites, Heat issues and summer health were some of the topics covered.
- I provided several articles for the Indiana Environmental Health Association newsletter for the tours for the Southern Chapter and the training classes held here in Brown County
- I brought in a class from NCBRT (National Center on Biomedical Research and Training) called Community Healthcare Planning and Response to Disasters. The IEHA (Indiana Environmental Health Association) and TAHP (Terrorism and All Hazards Preparedness) committee sponsored the refreshments. There were 14 attendees.
- I brought in 3 classes from the Office of Bombing Prevention: “Improvised Explosive Device Search Procedures” and” Bombing Prevention Awareness” and “Protective Measures”
- I consulted on 4 new establishment’s design or remodels
- I obtained 50 free Radon test kits from the American Lung Association, advertised these in the Democrat, and distributed them to Brown County residents upon request.
- I gave a PowerPoint presentation on Farmer’s Market rules and regulations to the St. David Farmer’s Market and a presentation to the Nashville Farmer’s Market.
- I participated in “Trick or Treat on the Trail” at the YMCA and handed out food safety coloring books and stickers obtained at no cost to our Department from the State Health Department to 1200 children

MEETINGS and COMMITTEES

I served on the following committees:

- Indiana Environmental Health Association Southern Chapter – Food Protection Representative
- Indiana Environmental Health Association Terrorism and All Hazards Prevention Committee – Chair; responsible for the Indiana Environmental Health Association Fall Conference speakers and committee projects such as training session set up and logistics and a monthly news email.
- Local Emergency Planning Committee for Brown County – Environmental Health Representative and Vice-Chair

- EMAC (Emergency Management Advisory Council) for Brown County – Environmental Health Representative and Secretary
- Indiana State Department of Health Food Protection Committee member
- Food Safety Defense and Task Force member
- INEHRT (Indiana Environmental Health Response Team) Secretary

ONLINE MEMBERSHIPS

- FoodShield member
- Infragard Member
- Indiana Onsite Wastewater Professionals Association member

OTHER MEMBERSHIPS

- Indiana Environmental Emergency Response Team (INEHRT)
- Indiana Environmental Health Association

CERTIFICATE CLASSES

Certificate classes were completed in-person at several conferences, please see the “Conference Attended” section below.

CERTIFICATE CLASSES ON LINE

National Environmental Health Association – Class WQ 1601-SCDC

CONFERENCES ATTENDED

- 1). IOWPA Conference (Indiana Onsite Wastewater Professionals Association)
- 2). WWETT Show (Water & Wastewater Equipment, Treatment & Transport) –Certificates obtained for multiple wastewater sessions attended; What to do with Water and Solids, The enemy of Septic System Longevity, Checklists on Inspections, Evaluations and Disclosures, What’s Going down the Drain Matters.
- 3) Midwest Damage Prevention Conference, French Lick- Certificates obtained for sessions included Damage Prevention, Shared Vigilance; Protecting Infrastructure from Terrorist Threats, Strategies for Cross Bore Mitigation and Prevention, The Science Behind Water Main Break Response, Unlocatable Gas Facility Repair, Communication and Leadership Excellence, Behavior Change Through Enforcement.
- 4) NEHA (National Environmental Health Association) Conference in Nashville Tennessee. - Certificates obtained for these classes: Environmental Health in the UK by Anne Godfrey on the Chartered Institute of Environmental Health UK, Robert Kadlec, Assistant Secretary, Preparedness and Response for US Dept of Health and Human Service talking about “How

Changing Water Usage impacts Septic System Design and Management”, “ Social Media Strategies”, “Collaborating with National Radon Testing Lab”, “Environmental Public Health in Disaster Recovery” ,”Outbreaks in Tennessee”, “Geo-spatial solutions to Managing Public Health”, “Mass Feeding Disaster Relief”, “Rebuilding Post Hurricane in Puerto Rico”, “Mexican Food Processes”, “CIFOR (Council to Improve Foodborne Outbreak Response) ”, “Rabid Cat of Lane County”

5) Indiana Environmental Health Association Fall Conference Evansville- Legislative issues, Hoarding, Suicide Prevention, Contamination Chemicals, Small Community Implemented Sewer Systems, Food Rescue, Rule Violation and Compliance, Aquabounty, Hemp in Indiana.

6) Vector Conference; Emergence of Tick Borne Diseases, Canaries in the Coal Mine (the researcher who found West Nile Virus), Zoonotic and Vector Borne Disease Investigations, Indiana Arboviral and Tick Surveillance update, Tick Surveillance of Ohio Parks, Distribution and life cycle of Culex Pipiens in the Midwest (type of mosquito)

7) CITES (Central Indiana Technical and Environmental Society) conference. Indiana Department of Environmental Management updates on Wildland Fire, Air, Water, Land, Task Force One Response, Legislative Review, Emergency Preparedness, Resource Conservation and Recovery Act Generator Improvement Rule, Overview of leading Environmental Issues.

WEBINARS

I listened to several webinars online in 2019 that were all related to Food Safety Updates and FDA information.

AWARDS

Indiana Environmental Health Association (IEHA) President’s Commendation for Chairing the Terrorism and All Hazards Preparedness Committee in 2019

Elected Vice President of the Indiana Environmental Health Association for 2020.

Re-elected President of the IEHA Southern Chapter for 2020

Re-elected Chair of the IEHA Terrorism and All Hazards Preparedness Committee for 2020

STANDARDIZATION

I am still a Standardized Food Inspection Officer for the State, although the State Health Department has no one who can re-certify this license, due to their time constraints, but they tell me I am not expired. The State has not been able to certify or re-certify anyone in 2015, 2016, 2017, 2018 or 2019 due to lack of staff.

NEW LICENSING FORMS

The decision was made in 2019 to change the Food Establishment Licensing Forms for 2020 to better reflect what each establishment was able to prepare and sell. The categories are: “Full license” which allows for full food preparation, holding, cooling, and reheating. “Limited license” allows for pre-packaged foods that must be held in refrigeration, with no food preparation, nothing made in house. “Non-profit” license allows non-profits to sell food, but they must be inspected and follow the food code. They are licensed at no charge.

GOALS FOR 2020

- To promote food safety throughout the County by classes, articles and educational information to food establishments during inspections.
- To continue my committee work both through the Indiana Environmental Health Association and through our local Emergency Management Advisory Committee and Local Emergency Planning Committee.
- To inspect and have a continuing Health Department presence at temporary events. Make sure advance information is provided to potential vendor attendees of the event specifying our County requirements.
- To attend all IEHA meetings either by conference call or in person
- To bring at least two major trainings to Brown County on Emergency Preparedness/Food Safety
- To attend the Pumper Show (now called the WWETT show), the Indiana Emergency Preparedness Convention as the Brown County Local Emergency Planning Committee representative, the Midwest Damage Prevention Conference and the two conferences sponsored by the Indiana Environmental Health Association in Spring and Fall
- To attend the onsite wastewater training at ISDH in February
- To take at least 2 additional training sessions in person
- To continue to monitor local news and media for any mention of food related events to make sure licensing is done if required
- To provide consultation to establishments with questions on food service or safety requirements
- To disseminate food safety knowledge whenever I can

As an environmental health specialist, I am also trained in Septic Site Evaluation and inspection for Septic Construction. I am called upon occasionally to do site evaluations for new septic systems and ongoing septic construction. This is on an “as-needed” basis. I performed several inspections in 2019.

My main goal for 2020 is to do my part to try and keep food safe in Brown County. I am happy to discuss any aspect of this report further upon request.

NURSING

Submitted by Jennifer Unsworth, BSN, RN, Public Health Nurse Supervisor

VISION: Healthy people in a healthy Brown County community.

MISSION: Promote physical and mental health, prevent disease, injury and disabilities.

PUBLIC HEALTH

- Prevents epidemics and the spread of disease
- Protects against environmental hazards
- Prevents injuries
- Promotes and encourages healthy behaviors
- Responds to disasters and assists the community in recovery
- Assures the quality and accessibility to health services

ESSENTIALS OF PUBLIC HEALTH

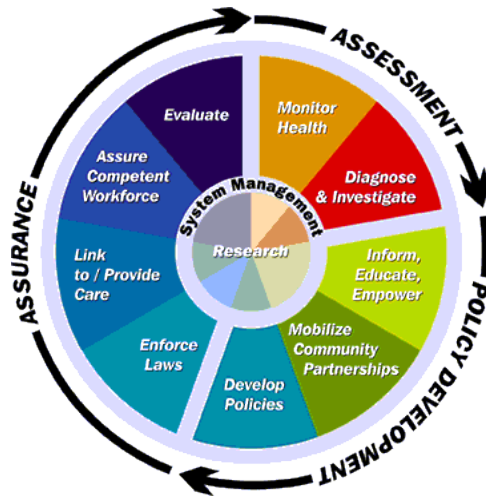
- Monitor health status to identify community health problems
- Diagnose and investigate health problems and health hazards in the community
- Inform, educate and empower people about health issues
- Mobilize community partnerships to identify and solve health problems
- Develop policies and plans that support individual and community health efforts
- Enforce laws and regulations that protect health and ensure safety
- Link people to needed personal health services and assure the provision of health care when otherwise unavailable
- Assure a competent public health and personal health care workforce
- Evaluate effectiveness, accessibility and quality of personal and population-based health services
- Research for new insights and innovative solutions to health problems

NURSING STAFF OF BROWN COUNTY HEALTH DEPARTMENT

Kelly Hilligoss, BSN, RN

Seleah Settle, BSN, RN

Jennifer Unsworth, BSN, RN, Public Health Nurse Supervisor



EMERGENCY PREPAREDNESS

Planning and preparing for emergencies due to biological, chemical, radiological, or natural event continues through training and participating in exercise drills.

2019 CONCERN FOR HEPATITIS A IN THE UNITED STATES OF AMERICA

WHAT IS HEPATITIS A? (INFORMATION PROVIDED BY INDIANA STATE DEPT. OF HEALTH)

Hepatitis A is a highly contagious liver infection caused by the hepatitis A virus (HAV). It can range from a mild illness lasting a few weeks to a severe illness lasting a few months. Symptoms of hepatitis A usually appear two to six weeks after someone is infected and can include:



INDIANA HEPATITIS A OUTBREAK

Indiana is one of several states experiencing a hepatitis A outbreak. Hepatitis A is usually spread person-to-person when someone accidentally consumes stool of someone with hepatitis A or by consuming food or water contaminated with the virus. During this outbreak, the hepatitis A virus has been spread person-to-person; no contaminated food or water has been identified.

MORE INFORMATION ABOUT THE INDIANA HEPATITIS A OUTBREAK

Hepatitis A in Indiana

- Since November 2017, the Indiana State Department of Health (ISDH) has been investigating an outbreak of acute hepatitis A virus (HAV).
- Outbreak-related cases have been confirmed across the state.
- In previous years, Indiana has had an average of 20 cases of hepatitis A per 12-month period.

Cases in Indiana: 2284 (majority in Marion County) with 4 deaths (as of 12/27/19 per ISDH)

Cases in Brown County: <5

Hepatitis A vaccines administered in Brown County: 238

LOCAL EMERGENCY PLANNING COMMITTEE

The nursing staff participates in the Local Emergency Planning Committee (LEPC) with exercises and bimonthly meetings (6 meetings per year). The LEPC reports directly to their LEPC chairperson and the Indiana Emergency Response Commission (IERC). The LEPC is a state agency. The committee has been appointed by the IERC as a special state appointee. The primary purpose of the committee is to implement Sara Title III in Indiana, but its broader purpose is to enhance environmental protection and public health and safety as these are affected by chemical hazards in Brown County. The committee includes representatives from the following: local and state government, law enforcement, emergency management, fire departments, emergency medical services, health, hospital, environmental, transportation, media, industry, and community groups.

LEAD SCREENING

Lead is a heavy metal that has been widely used in industrial processes and consumer products. Lead's effects on the nervous system are particularly serious and can cause learning disabilities, hyperactivity, decreased hearing, mental retardation and possible death. Lead is particularly hazardous to children between six months and six years of age because their neurological system and organs are still developing. Children who have suffered from the adverse effects of lead exposure for an extended period of time are frequently in need of special health and educational services in order to assist them to develop to their potential as productive members of society.

Lead was removed from gasoline in the United States in the early 1980s. However, significant amounts of lead remain in the environment. Some common lead containing substances that are ingested or inhaled by children include: dust and soil; tap water; food stored in lead soldered cans or improperly glazed pottery; traditional folk remedies and cosmetics; lead-based paint that is peeling, chipping, or otherwise in a deteriorated condition; lead-contaminated dust created during removal or disturbance of leaded paint in the process of home renovation; and, lead-contaminated dust brought into the home by adults who work in an occupation that involves lead or materials containing lead, or who engage in a hobby where lead is used. Toys and other products manufactured outside of the United States have also been identified as a source.

Local Health Officers are responsible for ensuring the provision of case management to all children less than seven (7) years of age in their jurisdiction (410 IAC 29-2). A staff person authorized by the local health department to perform case management responsibilities will contact you about services for your lead poisoned child. The case manager will:

1. Work with your child's primary medical provider on follow-up treatment.
2. Assist in arranging a retesting schedule for your child.
3. Arrange for testing other children in your home who are under 7 years old.

4. Conduct an initial home visit to assess further needs your child or children may have.
5. Help you arrange an environmental assessment to find out the cause of your child's lead poisoning.
6. Recommend other actions that the local health officer believes will assist you in preventing the child's blood lead level from increasing.

All parents are reminded of the importance of lead screening and are educated on the risk to the child who experiences a lead exposure. Posters informing parents of the importance of lead screenings are prominently displayed for viewing. Parents are advised that all children should be screened for lead at one and two years of age. Many of our children seen are on Hoosier HealthWise insurance and have their lead screenings done at their medical provider's office. The Brown County nursing staff is notified of any child with an elevated lead level by the Indiana State Department of Health Lead and Healthy Homes Division. Parents and the child's medical provider are contacted. The parents are provided information on the dangers of lead and provided screening questions to determine where in the child's environment their child could have been in contact with lead, such as soil, toys containing lead paint, dishes and also the environment in which the parents work. The Brown County Health Department provides lead testing for children under the age of seven. The nurses call the parents with children whose blood lead level is border line to educate them on lead dangers, nutrition, and clean home environment. Lead level screening is required for entry into the Head Start Program when the child is 3-4 years of age. The Head Start Program is a program of the United States Department of Health and Human Services that provides comprehensive early childhood education, health, nutrition, and parent involvement services to low-income children and their families.

Lead screenings = 0 performed at the health department.

Lead Levels monitored and followed but not performed by BCHD: 1

Educating parents of the need for a lead level check by the Brown County Health Department or their health care provider will continue as a priority. As with most dangers, until there is media attention to the matter, it isn't a subject on parents' minds although it is very dangerous for the minds of their children.

As of January 2017, the lead level for a confirmatory test has been reduced to 5.9-9.9 ug/dL; prior to this year the level was 9.9ug/dL of blood.

ADULT HEALTH PROGRAM AND ADULT SCREENINGS

The nurses at the Brown County Health Department conduct adult screenings at the Hickory Ridge Senior Center (11 dates in 2019) and other locations in the community upon request. A total of 54 seniors were screened at the Hickory Ridge Senior Center and provided education related to any screening results. If the screening was a significant issue, the senior's medical provider was notified and information faxed to their office. At the location, the nurses provide screening for height, weight, BMI. This is beneficial to identifying seniors that may be losing

weight or gaining weight. Both are important indicators of health in seniors. Weight loss can be from lack of food sources, loss of taste, dietary restriction, memory loss (forgetting to eat) or disease process. Weight gain may be due to water retention, which may be caused by diet (high sodium) which may raise blood pressure or not taking medications as prescribed, such as diabetic medications or diuretics. Weight gain may be caused from high calorie intake from sweets or carbohydrate meals. As individuals age the salt and sweet taste often are the only taste sense seniors have so their diets often include more sweet and salty foods. Unfortunately, both weight loss and gain issues can have serious effects on seniors' health. Clients are also screened for anemia by finger stick hemoglobin, and a blood sugar for identifying diabetes or low blood sugar. Some of the clients are known to have diabetes. Any problems are reported to their medical provider or seniors may be referred to other agencies that provide services to seniors. Nutrition education is provided at each clinic.

Any adult is welcome at the senior center clinics but younger clients tend to prefer an appointment at the health department. The health screenings in the Brown County Health office provide early detection or monitoring of health problems. Information on risk reduction is a benefit offered to Brown County citizens for a healthier life. Many health problems and diseases leading to premature death or disability are preventable. Screenings that assess health risks, increase knowledge of the catastrophic health risk, and provide information, guidance, and support of healthier lifestyles can have a major influence on reducing health problems. Parents of children in for immunizations are notified of the screenings available and on smoking cessation programs available. Individuals without health insurance are referred to WindRose Health Center. This is a community health center which provides reasonably priced, family-oriented, comprehensive, primary and preventive health services. It strives to serve as a "medical home" for patients that emphasizes long-term, holistic approaches to care that includes prevention and health promotion. The centers charge affordable fees while offering a "sliding-scale fee" to consumers with limited financial means and no insurance. Patient navigators are also available to assist patients with applying for insurance through the affordable health care exchange.

One goal of the health department is to educate Brown County citizens, social groups and other agencies of the role of public health. Public health nurses care for the entire population of the community. Screening tests are not diagnostic tests; the primary purpose of screening tests is to detect early disease or risk factors for disease in large numbers of apparently healthy individuals. The purpose of a diagnostic test is to establish the presence (or absence) of disease as a basis for treatment decisions in symptomatic or screen positive individuals (confirmatory test).

	Screening tests	Diagnostic tests
Purpose	To detect potential disease indicators	To establish presence/absence of disease
Target population	Large numbers of asymptomatic, but potentially at risk individuals	Symptomatic individuals to establish diagnosis, or asymptomatic individuals with a positive screening test
Test method	Simple, acceptable to patients and staff	May be invasive, expensive but justifiable as necessary to establish diagnosis
Positive result threshold	Generally chosen towards high sensitivity not to miss potential disease	Chosen towards high specificity (true negatives). More weight given to accuracy and precision than to patient acceptability
Positive result	Essentially indicates suspicion of disease (often used in combination with other risk factors) that warrants confirmation	Result provides a definite diagnosis
Cost	Cheap; benefits should justify the costs since large numbers of people will need to be screened to identify a small number of potential cases	Higher costs associated with diagnostic test may be justified to establish diagnosis.

The number of individuals screened:

Blood Pressure/Pulse = 83

Diabetes Screenings = 61

Urine Checks = 2

STD Prevention and Education = 14

Cholesterol Screenings = 5

Height = 0

Weight = 54

Hemoglobin = 58

Temperature = 5

HEALTH EDUCATION

Health education is provided daily by phone, in person, or in written form. The topics covered include information on various communicable diseases and prevention practices. Other topics of health education include: nutrition, low iron levels, elevated cholesterol, elevated blood sugar, prenatal nutrition including folic acid and food high in calcium, potassium and fiber, transmission of STDs, prevention, and places to receive diagnosis and/or treatment of STDs, and daily information regarding vaccine preventable diseases. Because Indiana's immunization rates for the human papilloma virus are so low and it is not a required vaccine for school, the nurses have been highlighting cervical cancer prevention through the immunization of teens with GARDASIL 9[®]. Many individuals have misinformation on the vaccines and cervical cancer

so this provided the nurses the opportunity to inform parents on cancer prevention. For the health education, the length of time spent with each individual varies according to their knowledge base and level of understanding of the subject matter.

HEAD LICE PREVENTION PROGRAM

The Brown County School Corporation no longer does scheduled head checks for lice or nits in the elementary and intermediate school. The Indiana Department of Education does not encourage schools to check for lice or withhold a child from school if the child has nits. If a child is referred to the nurse by a teacher, the child is checked by the health assistant or nurse and then can return to class. They are not sent home. The parent or guardian is provided notification by note or call regarding the lice issue. This has greatly reduced the number of cases of lice we see. Parents are telling us that there is a problem with lice in the schools and some of the cases are not being treated. Parents are taught that infestation with head lice (*Pediculus humanus capitis*) is very common among preschool and elementary school age children and are **not** known to transmit disease. Also, an infestation of head lice is not an infection. It does not pose a significant health hazard and no disease is spread through lice; however, secondary bacterial infection of the skin resulting from scratching can occur with any lice infestation. The most common symptom is itching due to sensitization to allergens in lice saliva. Many times there are no symptoms. Occasionally the scratching leads to chafing and secondary bacterial infection requiring treatment with an antibiotic. The public health disease impact from Pediculosis capitis is negligible. The purpose of this public health program is to provide a comprehensive guide to identify, educate, treat, manage, control, and prevent head lice infestations. Head lice can be a sensitive topic; the nurses strived to make recommendations in the best interest of children and others impacted by head lice. The big challenge is treating our culture's response to head lice rather than the condition itself. The core of that treatment is educating the families in a calm and nonjudgmental fashion and offering support to all involved. Resources are also available at reduced cost for purchase for nit removal. Education is provided verbally and in print for individuals to refer to later because the parent and/or child may be overwhelmed and stressed emotionally and may not retain all of the information. Information provided includes information on lice, their life cycle, treatments and precautions to follow when using chemical treatment and alternative treatment to pediculicides such as olive oil and mayonnaise, which can be used to smother live lice but does nothing to the nits. Heads are examined for lice and/or nits upon request. Referrals are accepted from schools, clients, physicians, or service agencies.

Nit combs dispensed = 1

The Brown County Health Department no longer dispenses NIX® for lice treatment. The company that we had purchased the product from was sold and is now the same price at what is available in stores. Children on Medicaid are eligible to receive Sklice® (ivermectin) Lotion, the only FDA-approved, single dose head lice treatment with ivermectin at no cost.

MATERNAL CHILD HEALTH SERVICES

This service offers support, information, and advice regarding parenting, child health and development, child behavior, maternal health and well-being, child safety, immunization, breastfeeding, nutrition, family planning, and pregnancy testing. Referrals to other organizational programs are provided to assist the parents with meeting their needs and their children's needs. Parents are informed of the nutritional assistance programs within the county, such as WIC, Food Bank, Salvation Army, Mother's Cupboard, St. Vincent DePaul, and the food pantry with an emphasis on the importance of nutrition on maternal and child development. Children are referred to First Steps if any physical or developmental delays are suspected. Parents are informed they can also self-refer to First Steps and are provided the web site to apply for an evaluation of their child at <http://www.firststepssoutheast.org/general-referral-form/>. If the parent does not have access to a computer, the nurses at the health department can make the referral. The mission of First Steps of Indiana is to assure that all Indiana families with infants and toddlers experiencing developmental delays or disabilities have access to early intervention services close to home when they need them. This is accomplished through the implementation of a comprehensive, coordinated statewide system of local interagency councils called First Steps. Indiana's First Steps System is a family-centered, locally-based, coordinated system that provides early intervention services to infants and young children with disabilities or who are developmentally vulnerable. Brown County is in cluster J with an office in Columbus, Indiana. Referrals are done via an online form. If parents do not have access to the internet, the nurse can fill in the form at the health department and provide the parents with a copy of the referral form.

Infant mortality is a serious problem in Indiana. Infant mortality is defined as the number of infant deaths per 1,000 live births during the first year of life. The three primary causes of infant mortality are perinatal complications, birth defects, and SIDs (Sudden Infant Death Syndrome). The nursing staff at the Brown County Health Department is committed to reducing infant mortality. Pregnancy testing is offered for free and confidentially. Women who are pregnant are provided with resources to take home with them as well as verbal information on weight gain, nutrition with emphasis on folic acid and the role it plays in fetal development and prevention of birth defects, and information on balanced diet. We inform them free prenatal vitamins are available at Marsh, Kroger, and Meijer grocery stores in the pharmacy departments. Mothers are provided a pamphlet on the WIC nutrition program and explain that the foods chosen to be on the program are high in iron and folic acid. Mothers are advised to stop smoking and are offered a smoking cessation program at the health department or through the use of 1-800-QUIT NOW. Referrals to agencies such as Department of Family Services are done for women that are uninsured. Mothers receive presumptive eligibility so that they can see a medical provider during their first trimester. Other programs the women are referred to include Healthy Families and Clarity (formerly Pregnancy Care Center). The goal is to improve birth outcome. The prenatal patient is also encouraged to be honest with her provider regarding any drug or alcohol usage. The warning signs of pregnancy complications

that may affect the fetus or mother are explained as well as the signs of preterm labor. Families are also referred to education and employment programs through Work One and the Career Resource Center. Mothers that are homeless can be referred to the Women's Resource Center. Women are also educated on breastfeeding and encouraged to breastfeed, emphasizing the health benefits for the infant and mother and how cost effective it is to breastfeed. Mothers and their sexual partners are encouraged to obtain testing for sexually transmitted diseases, including HIV. If a pregnant woman's partner and/or father of the baby or others that will have direct contact with the infant are uninsured, they are provided information on the Adults Vaccine Program. This provides the Tetanus Diphtheria and Pertussis vaccine (Tdap) at no cost to the individual to protect the infant from development of Pertussis from a family member. It is an extremely dangerous and, at times, fatal disease for infants. Immunization to protect the infants does not begin until the infant is 6 weeks to 2 months of age so they are vulnerable to the disease if those around them are not immunized.

Women with a negative pregnancy test are offered condoms and referred to agencies for STD testing, family planning, and preconception education. Non-insured women are referred to Futures in Bloomington IN. The Futures Family Planning Clinic provides family planning health services for adolescents, men, and women. Affordable services are available on a sliding fee schedule, which means that the fees are based on their income. Services that are offered include: female exams including pap, breast exam, pelvic exam, pregnancy counseling, testing and referral, sexually transmitted disease testing and treatment, including HIV testing, gonorrhea and chlamydia, emergency contraception (Plan B), health education, birth control counseling and supplies including pills, patch, shot, IUD, and condoms.

Number of pregnancy tests = 4 Positives = 3

IMMUNIZATION SERVICES

Immunizations have been called the greatest achievement in public health behind safe drinking water. It saves millions of lives each year. Children and adults are provided immunizations against vaccine preventable diseases according to the ISDH policy. Indiana State Department of Health Immunization Division directs the policy and changes are made based on funding provided by Health and Human Services through the Center for Disease Control and Prevention to the state of Indiana. Screening is done at the time of the immunization visit. Parents are required to fill out a form entitled Patient Eligibility Screen Record and this form becomes a part of the patient's chart as documented proof the nurses are stewards of the federally provided vaccines. Public health is facing new challenges with the funding changes at the state and federal level. The direction of public health according to CDC is that "public health must be run like a business". Brown County Health Department became a provider of Indiana State adult funded (317) vaccines. These vaccines are provided to adults that are uninsured or underinsured with specific medical needs or lifestyles that puts them at risk for certain disease. We also provide adult vaccine at the cost of the vaccines for individuals nineteen years of age

and older that are not included in the requirements for state funded vaccines. Immunizations for protection against Hepatitis B for those identified at risk due to employment exposure are provided at the agencies or individuals expense. Influenza (flu) vaccines are provided to insured individuals at cost.

Total number of patients = 688

Total number of vaccines = 1120

TUBERCULOSIS

This program serves all ages and interprets the extent of Tuberculosis in Brown County. This is accomplished through the identification and supervision of Tb patients, contacts, suspected cases and associates, and people at risk for Tb. Instruction and help in understanding the diagnosis and prescribed treatment of Tb is provided. All patients with active tuberculosis disease are provided medication from Indiana State Department of Health through Purdue University pharmacy. All medication therapy is done under direct observation the first 2 weeks in person and then may continue via an electronic method to visualize that the patient is compliant in taking all medications.

Groups screened for Tb include the Sheriff's Department, group home workers, daycare workers, immigrants to the U.S., participants of outpatient treatment programs, foster parents, EMTs, Headstart teachers, Centerstone, Senior Center employees, and college students who are in medical training programs with clinical, such as nursing, EMTs, Paramedics, and X-Ray technology programs. The nurses attended the Indiana State Department of Health Regional tuberculosis training and meeting.

Number of TB Screenings = 97

Number of Active Cases = 0

Number of Latent Cases = 0

Medication set ups = 0

Direct observational therapy = 0

ISDH TB Regional Meeting was attended by the health department nurses. The program educates the nurses on the important issues related to tuberculosis testing, surveillance, and treatment.

COMMUNICABLE DISEASE PROGRAM

The purpose of the communicable disease program is to control the spread and minimize the effects of communicable disease on the individual and the community by providing case management to infected individuals, encouraging screening of high risk individuals, reviewing surveillance of the general population, and investigating potential contacts and sources, as well as educational activities for the general public. The health department nurses use Indiana

National Electronic Disease Surveillance System (I-NEDSS) Based System (NBS) to collect information regarding patients with reportable communicable disease. This new system was introduced in January. This is a secure system that provides a method for electronically entering, updating, reporting, and tracking of communicable disease in Indiana counties and creates an online communicable disease program. Communicable diseases are also reported by medical providers, laboratories, patients, and infection preventionists of hospitals or extended care facilities. The trends in increased HIV, Hepatitis B, and Hepatitis C infections are monitored closely due to the increased usage of IV drugs in Brown County, mirroring the development in increased IV drug use in the entire country.

Investigations and follow-up < 50

HEALTH EDUCATION SMOKING CESSATION

The Smoking education and cessation program is no longer offered through the Brown County Health Department. The Brown County School Corporation has taken over this program.

NALOXONE

At the beginning of the year, the Brown County Health Department submitted a grant proposal for Naloxone to Indiana State Department of Health. Naloxone Hydrochloride, also known by the brand name Narcan[®], is an opioid antagonist and is a safe and effective medication used to quickly reverse the life-threatening effects of an opioid overdose. The naloxone kits distributed in accordance to this grant are administered intranasal by spraying a fine mist up the nostril of the affected person.

The Brown County Health Department requested 160 Naloxone kits to be distributed. Centerstone of Indiana in Nashville and Nashville United Methodist Church joined with the Brown County Health Department to become partners of distribution of Naloxone. The Brown County Health Department provided Naloxone kits to Centerstone, the Sheriff's Department, Nashville United Methodist Church, community members, and local fire departments and other emergency personnel. In total, the Brown County Health Department distributed 28 Naloxone kits.

OUTREACH ACTIVITIES/PROGRAMS

Outreach activities, program planning, and implementation include explaining public health to all service organizations and educational groups, teaching healthy habits to various audiences, assisting the schools with health education topics, and screenings and participating in community activities to raise awareness of various health issues.

Representation of health department on:

- Brown County Network Meeting
- Brown County Drug Free Coalition (formerly Local Coordinating Council for Drug Free Indiana)

- Brown County Health Board Subcommittee (Opioids)
- Healthy Families
- Healthy Brown County Council
- Local Emergency Planning Committee
- Mentorship for nursing students for clinical rotation in public health nursing
- Prevention & Education Task Force as subcommittee of Brown County Drug Free Coalition
- Speaker for various organizations on health topics and issues
- Treatment & Support Task Force as subcommittee of Brown County Drug Free Coalition
- Wellness Committee for Brown County employee Wellness Program

The Brown County Health Department cooperated in the planning, organization, and implementation of a health program for the community that focused on ways to help citizens learn to identify the problems and behaviors that prevent them from developing a healthy lifestyle to prevent chronic disease. The consequences of chronic disease are far-reaching. They include premature loss of life, reduced quality of life, family stress, financial costs to the health care system, and the loss of productivity. The three most prevalent chronic diseases include cardiovascular disease, diabetes, and cancer. These also place the greatest burden on our health care system. Other prevalent chronic diseases include chronic obstructive pulmonary disease (COPD), asthma, mental illness (including depression, stress, and anxiety), and arthritis. Many chronic diseases can be prevented or delayed. Furthermore, some chronic diseases share a common set of preventable biological risk factors, notably high blood pressure, high cholesterol, obesity, and related behavioral risk factors, including smoking, unhealthy eating, and sedentary lifestyle. The Brown County Health Department staff encourages screenings followed by education programs to enable them to adopt and maintain regular physical activity and a healthy eating program. The Brown County Health Department offered CPR and AED classes to community members in order to decrease risk of death during a heart event. 34 became certified in CPR training.

TRAINING EDUCATION AND OUTREACH PROGRAMS

One of the ten essential public health services, specifically number eight, is to assure a competent public health workforce. Brown County public health nurses are committed to attaining this standard by continuing education and training. Nursing's goal is to retain a qualified public health team of nurses with diverse public health experience. Plans are underway to develop and address gaps in staff competencies and address these gaps with individual training and development opportunities. The nursing department also provides a location for nursing students to receive their clinical training in public health.

The nurses attended the following training programs during 2019:

- Bombing Awareness Training
- Brown County Healthy Schools Council
- Children’s Hoosiers Immunization Registry - Web trainings
- Communicable Disease Training – ISDH epi
- Corey Frost presented training for and performed execution of emergency preparedness exercise (tabletop)
- CPR training and skills testing for instructor
- Head Start Outreach at Brown County IGA
- Hepatitis A presentations and trainings to county employees
- Indiana Immunization Coalition Training
- Indiana State Department of Health Leadership Meeting
- Indiana State Department of Health webcast meeting/training
- Indiana State Public Health Nurses Conference
- Labor of Love Summit
- Local Health Department Manager’s Association of Indiana Meeting
- Local Public Health Leadership Symposium
- Lunch and Learn sponsored by Brown County Health Department
- Public Health Nurse Conference
- School Immunization Clinic
- Training on National Electronic Disease Surveillance System (NEDSS) Base System (NBS). NBS is a CDC-developed integrated information system that helps local, state, and territorial public health departments manage reportable disease data and send notifiable disease data to the CDC. We switched from INEDSS, SWIMSS TB, and SWIMSS STD to one program for reporting diseases to the CDC and ISDH.
- Vaccines for Children (VFC) training and site visit by Indiana State Department of Health Field Rep
- Vector-Borne Disease Session with District 8 Field Epidemiologist from Indiana State Department of Health

SHARPS CONTAINERS

The Brown County Health Department started a sharps containers program for the community. Community members may come to the Health Department and pick up a sharps container at no charge. Once they fill their container up, they must seal it and they can return it to the Health Department for a new sharps container. The Brown County Health Department will dispose of these returned, full containers with the help of a grant. The aim of this program is to keep sharps (needles, lancets, etc.) out of the garbage and from being thrown into the environment, where one might get injured from it. There are two sizes of containers that are given away – one quart sizes and one gallon sizes. In 2019, the Health Department gave away 108 sharps containers.

VAXCARE

The Brown County Health Department started accepting healthcare insurance, which is processed through VaxCare. VaxCare supplies the Health Department with private pay vaccines. When individuals with insurance request these vaccines, the nursing staff will process the individual's insurance information and set up the appointment. The Brown County Health Department does not require an administration fee, a co-pay, or a visit fee. This has allowed the Health Department to accept a whole new category of individuals to vaccinate.

The mission of the Brown County Health Department is to encourage organized community efforts to address public health issues by applying medical, scientific and technical knowledge to prevent disease and promote health.



Public Health
Prevent. Promote. Protect.