



# 2022 Annual Report

Health Officer: Dr. Byron Holm, M.D.

Administrator: Faith Freed, MPH

*Updated Version: February 2023*

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# Introduction

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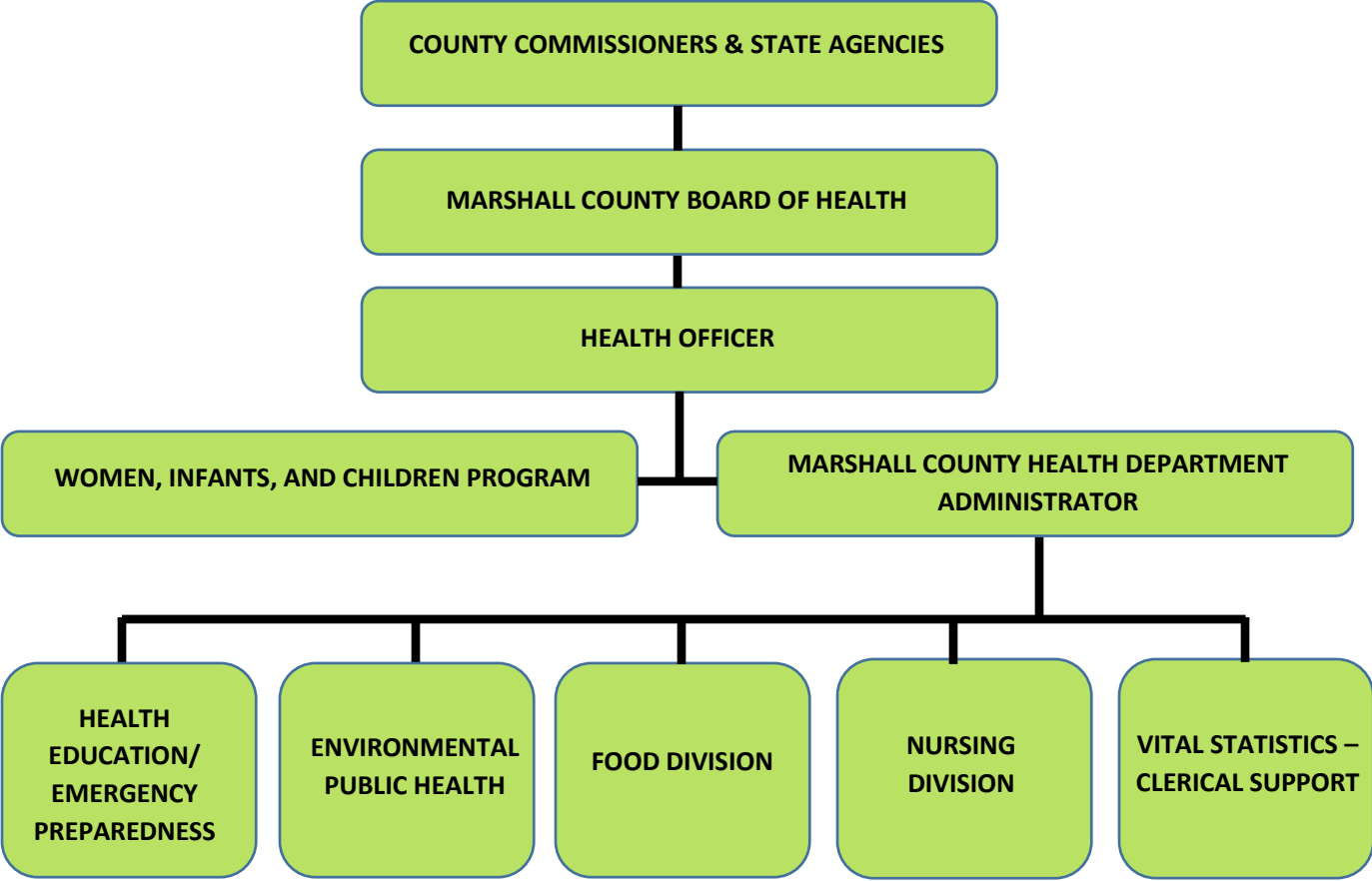
This report is made annually as required by law and contains a record of services rendered and the financial statements of the programs administered by the Marshall County Health Department in 2022.

The Marshall County Health Department serves the residents of Marshall County by providing a variety of programs directed towards proactively and reactively protecting public and environmental health. 2022 marks the 59th year of service to the County.

For further information concerning the Marshall County Health Department and the services we provide, please contact us at (574)-935-8565.

# Organizational Structure

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## Marshall County Commissioners

Kevin Overmyer, President  
Stan Klotz  
Mike Burroughs

## Marshall County Council

Tim Harman, President  
Mandy Campbell, Vice President  
Jesse Bohannon  
Steve Harper

Jim Masterson  
Heath Thornton  
Jon Van Vactor

## Marshall County Board of Health

Craig Miller, M.D., President  
Tracy Fox, Vice President  
John Larson, M.D.  
Georgette Samuelson, D.V.M.

Allison Shook  
Thomas Pedavoli, D.S.  
Matthew Miller

## Marshall County Health Department

Byron M. Holm, M.D., Health Officer  
Faith Freed, MPH, Administrator/Chief Env.  
Karen Janus, Registrar 1/Bookkeeper  
Angela Wilson, Registrar 2/Secretary

Sandy Dunfee, BSN RN Public Health Nurse  
Open, Public Health Nurse  
Dean Schmidlapp, Food Environmentalist  
Philip Smith, Emergency Prep/Env.

## Local Health Maintenance

Dean Schmidlapp, Food Environmentalist

## WIC Program

Lisa Letsinger, Administrator

## 2022 in Summary

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In 2022 we continued to administer Covid-19 vaccine and offer testing at our drive through location located behind Lifeplex. We increased our efforts to offer childhood immunizations with each school corporation in the county. We utilized the mobile medical unit to deliver vaccines throughout the county. We had 31 on site clinics with the mobile medical unit at schools, businesses, community outreach events and the county jail. We traveled to Rentown (Amish community) 1530 3<sup>rd</sup> Road, Bremen, eight times to administer vaccines to adults and children. We are in the process of establishing a new protocol for HIV/HepC, and STI testing and treatment/referral process. We have begun a new program offered through the IDOH, a school liaison. We are employing a contract employee currently, but we hope to make this a full-time position. This position is grant funded. The school liaison works closely with each school corporation in Marshall County to help with immunization records, vision and hearing screens, and any other assistance the school nurse may need. MCHD hosted a School Nurse Conference for all school nurses in Marshall County. It covered topics including Narcan training, smoking/vaping prevention in the school setting, Adverse Childhood Events/Trauma training and Communicable Diseases Updates. It was well attended, and we will be making this an annual event.

While there have been staffing challenges, MCHD was able to expand and bring on additional contracted staff to assist with vaccine administration, Covid-19 testing and clerical help to run all the vaccine clinics. Danielle Burck was hired as a public health nurse in January. She left the MCDH in May to pursue other interests. The search for another public health nurse continues.

Several grants were awarded to MCHD. The nursing division secured an Immunization Grant, a Community Testing and Vaccine Grant, a Co-Ag School Grant, a Blood Lead Level Testing Grant, an Immunization Administration Reimbursement Grant, and a Narcan Grant.

# Financial Review

## 2022 CONSOLIDATED FINANCIAL REPORT (UNAUDITED)

2021

2022

|                     |  |              |  |               |
|---------------------|--|--------------|--|---------------|
| Total Budgeted      |  | \$602,048.00 |  | \$660,484.00  |
| Total Expended      |  | 566,014.05   |  | 515,963.37    |
| Unexpended year end |  | \$ 36,033.95 |  | \$ 144,790.63 |

|                      |  |              |  |              |
|----------------------|--|--------------|--|--------------|
| Taxes Received       |  | \$362,047.72 |  | \$181,556.00 |
| Cash receipts        |  | 134,373.56   |  | 134,355.73   |
| State and fed Grants |  | 9,778.21     |  | 45,833.33    |
| Total Funding        |  | \$506,199.49 |  | \$411,801.67 |

### Expenditures

#### Personal Services

|                            |  |              |  |              |
|----------------------------|--|--------------|--|--------------|
| Salaries and Wages         |  | \$326,135.66 |  | \$284,569.81 |
| Employee Benefits          |  | 98,849.93    |  | 102,638.56   |
| Other personal Cost (FICA) |  | 25,307.29    |  | 21,969.93    |
| Total Personal Cost        |  | \$450,292.48 |  | \$409,178.30 |

#### Operation expenses

|                               |  |              |  |              |
|-------------------------------|--|--------------|--|--------------|
| Office/Other Supplies         |  | \$3,024.28   |  | \$ 3,941.45  |
| Personal Health Supplies      |  | 2,382.99     |  | 979.50       |
| Environmental Health Supplies |  | 0.00         |  | 0.00         |
| Vehicle Purchase/Supplies     |  | 34,889.33    |  | 10,031.04    |
| Computer Maintenance          |  | 1031.04      |  | 4,278.11     |
| Postage                       |  | 37.18        |  | 119.44       |
| Travel Expenses               |  | 439.48       |  | 2,641.99     |
| Training                      |  | 906.56       |  | 5,363.45     |
| Dues and Subscriptions        |  | 489.00       |  | 400.00       |
| Telephone                     |  | 5,972.81     |  | 5,902.05     |
| Printing/Legal Advertising    |  | 1,079.54     |  | 2,147.41     |
| Insurance/Workmen             |  | 5,564.00     |  | 5,664.00     |
| Utilities                     |  | 0.00         |  | 0.00         |
| Repairs/Bindings              |  | 0.00         |  | 0.00         |
| Other Repairs                 |  | 0.00         |  | 189.65       |
| Preparedness Expenditure      |  | 0.00         |  | 0.00         |
| Bonds                         |  | 0.00         |  | 0.00         |
| Office Machines               |  | 0.00         |  | 0.00         |
| Furniture/Fixtures            |  | 0.00         |  | 0.00         |
| Office Rent                   |  | 27,896.40    |  | 28,559.70    |
| Unsafe Buildings              |  | 4,914.96     |  | 159.25       |
| Unappropriated Funds          |  | 0.00         |  | 170.00       |
| Medical supplies              |  | 1387.75      |  | 2,405.18     |
| Professional Services         |  | 25,706.25    |  | 32,842.16    |
| Total                         |  | \$115,721.57 |  | \$106,515.07 |

**Total Expenditures**

**\$566,104.05**

**\$515,963.37**

**2022 FINANCIAL REPORT (UNAUDITED)**  
**LOCAL HEALTH MAINTENANCE PROGRAM**

|                     | 2021        |  | 2022        |
|---------------------|-------------|--|-------------|
| Totaled Budgeted    | \$33,139.00 |  | \$33,139.00 |
| Extra Appropriated  |             |  |             |
| Totaled Expended    | \$32,972.63 |  | \$33,084.32 |
| Unexpected Year End | \$166.37    |  | \$54.68     |

|                         |             |  |             |
|-------------------------|-------------|--|-------------|
| Beginning Fund Balance  | \$63,059.12 |  | \$63,225.49 |
| State Grants            | \$33,139.00 |  | \$33,139.00 |
| Total Revenue Available | \$96,198.12 |  | \$96,364.49 |

| Personal Services    |             |  |             |
|----------------------|-------------|--|-------------|
| Sanitarian Wages     | \$19,838.11 |  | \$19,951.11 |
| Emergency Prep Coord | \$0.00      |  | \$0.00      |
| Nurse/Health Ed      | \$12,173.52 |  | \$12,172.21 |
| SS                   | \$961.00    |  | \$961.00    |
| Total Personal Cost  | \$32,972.63 |  | \$33,084.32 |

| Operation Expenses     |        |  |        |
|------------------------|--------|--|--------|
| Env. Health Supplies   | \$0.00 |  | \$0.00 |
| Equipment Repair/Maint | \$0.00 |  | \$0.00 |
| Office Equipment       | \$0.00 |  | \$0.00 |
| Travel Miles           | \$0.00 |  | \$0.00 |
| Training               | \$0.00 |  | \$0.00 |
| Grant Expenditures     | \$0.00 |  | \$0.00 |
| Total                  | \$0.00 |  | \$0.00 |

|                           |                    |  |                    |
|---------------------------|--------------------|--|--------------------|
| <b>Total Expenditures</b> | <b>\$32,972.63</b> |  | <b>\$33,084.32</b> |
|---------------------------|--------------------|--|--------------------|



# Vital Statistics

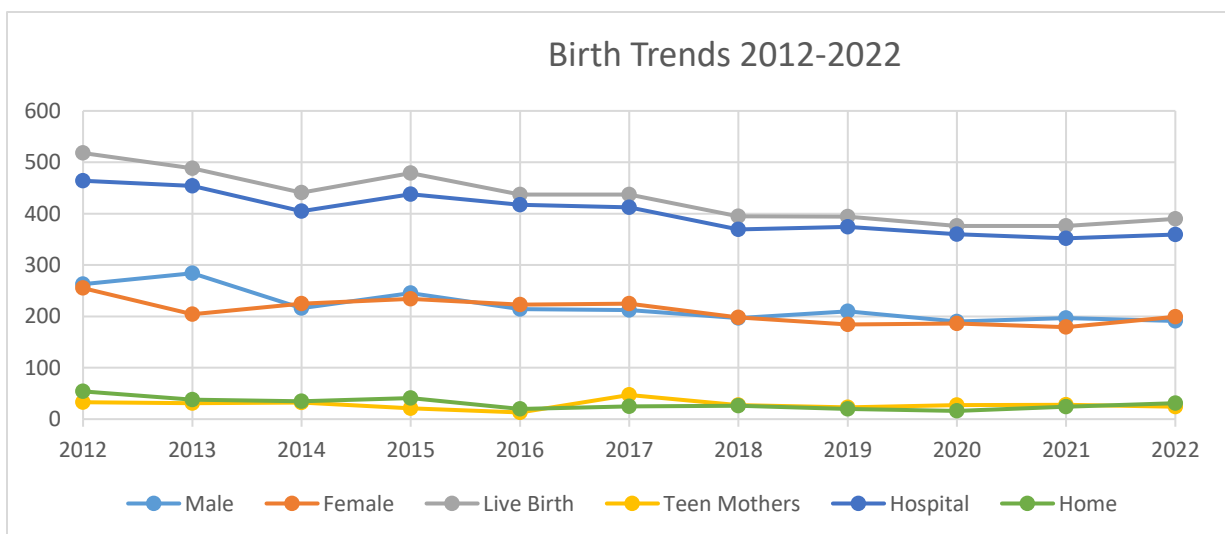
The vital records section receives and records certificates of births and deaths occurring within the county. Certified copies of these records are issued upon receipt of written application. In 2007, we began using the Electronic Birth Registration System (IBRS) through the Indiana State Department of Health. In 2011, we began using the Electronic Death Registration System (IDRS) as well as the Indiana Fetal Death Registration System (IFDRS). We continue to add and index both in county and out of county deaths after volunteers from the Historical Society began the process in 2014. In October of 2013, we began offering online applications for both birth and death certificates. In 2010, we began using DocuWare as our online record storage database, and continue to use and update this program. Starting January 1<sup>st</sup> of 2021, the new DRIVE system was implemented for birth and death records.

Youngest maternal age - 15 years old

Oldest maternal age - 43 years old

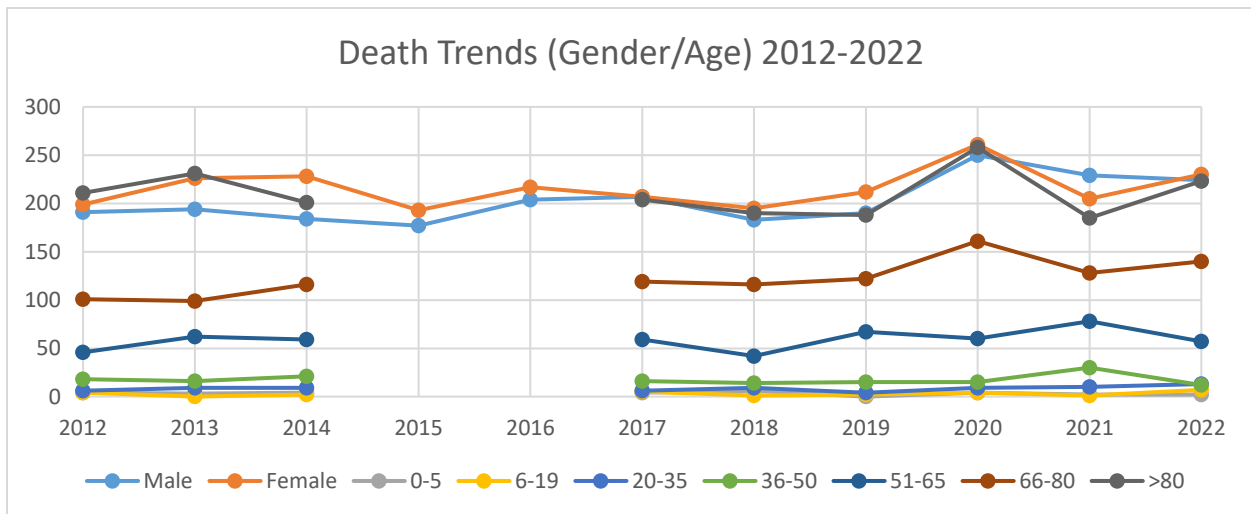
## Birth

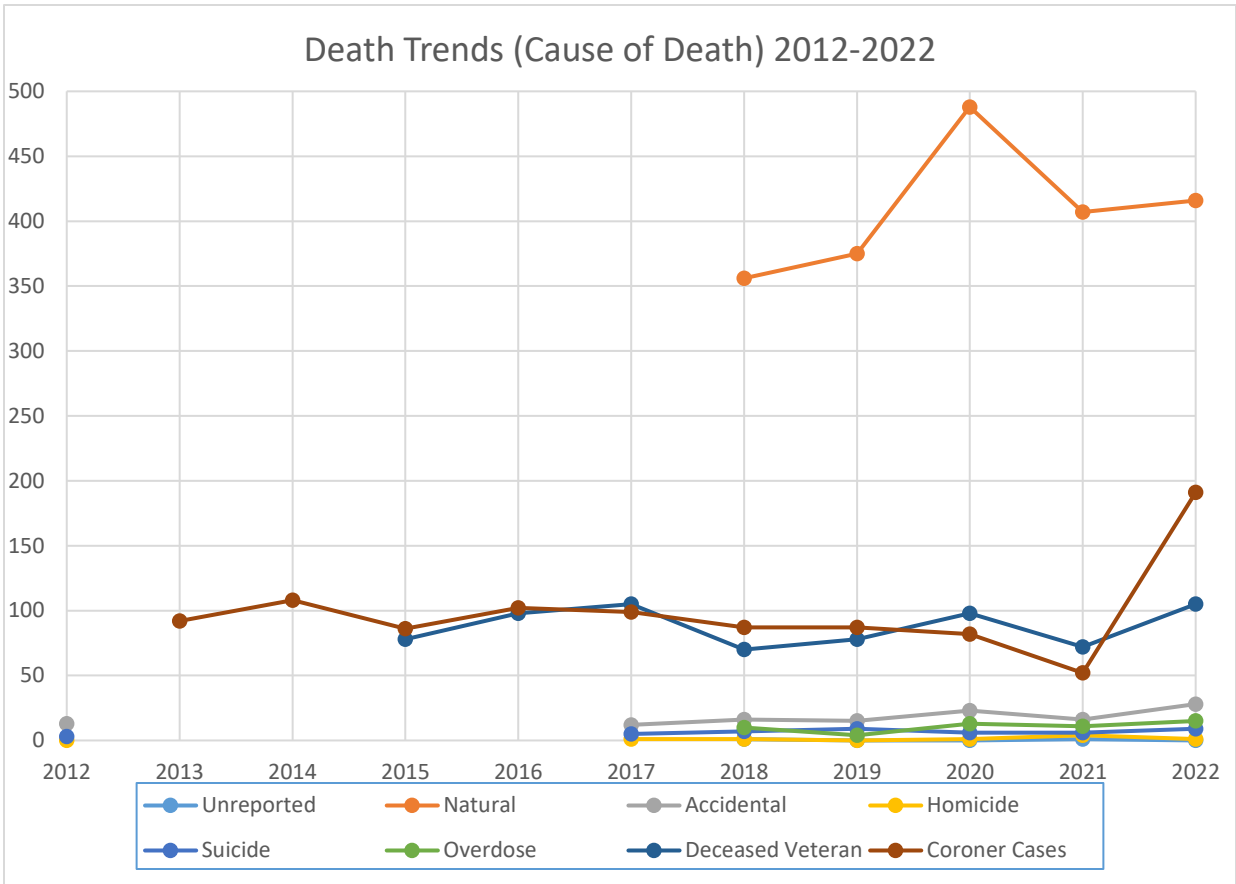
| BIRTH - 2022 |     |
|--------------|-----|
| Male         | 191 |
| Female       | 199 |
| Live Birth   | 390 |
| Teen Mothers | 24  |
| Hospital     | 359 |
| Home         | 31  |



# Death

| DEATH - 2022     |     |
|------------------|-----|
| Male             | 224 |
| Female           | 230 |
| 0-5              | 2   |
| 6-19             | 7   |
| 20-35            | 13  |
| 36-50            | 12  |
| 51-65            | 57  |
| 66-80            | 140 |
| >80              | 223 |
| Unreported       | 0   |
| Natural          | 416 |
| Accidental       | 28  |
| Homicide         | 1   |
| Suicide          | 9   |
| Overdose         | 15  |
| Deceased Veteran | 105 |
| Coroner Cases    | 191 |

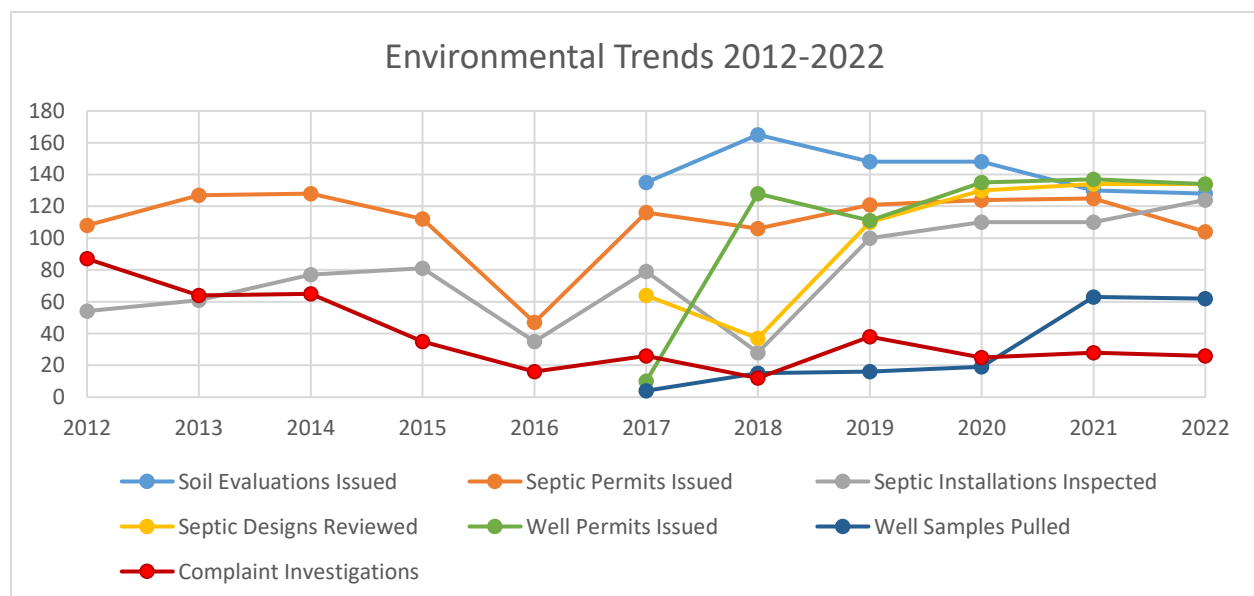




# Environmental Programs

The environmental section oversees sewage disposal, drinking wells, general health complaints, animal bite cases, and unsafe housing. The well ordinance was implemented starting in October of 2017 in an effort to improve drinking water safety as well as awareness of drinking water health hazards. General complaints are diverse and range from air quality issues, open burning, trash, disease vectors, and septic issues. Complaints range from long-term to short-term, and from marginal to extreme severity. Due to changes in environmental laws this department has had to educate the local septic installers of the changing state rule. The environmental division has resumed the ability to attend in person conference.

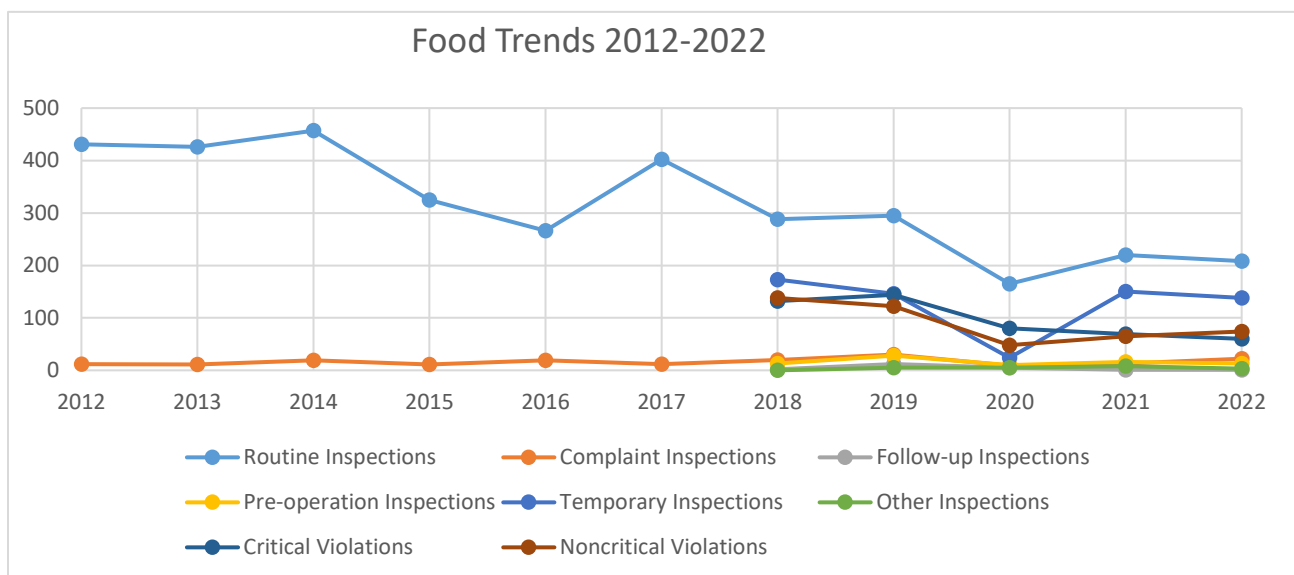
| ENVIRONMENTAL - 2022           |     |
|--------------------------------|-----|
| <b>Septic</b>                  |     |
| Soil Evaluations Issued        | 128 |
| Septic Permits Issued          | 104 |
| Septic Installations Inspected | 124 |
| Septic Designs Reviewed        | 134 |
| <b>Wells</b>                   |     |
| Well Permits Issued            | 134 |
| Well Samples Pulled            | 62  |
| <b>Complaints</b>              |     |
| Complaint Investigations       | 26  |



# Food Safety Program

Implementation of the food protection program is provided by state law and local ordinance. One full time environmentalist is assigned to execute this program, funding for this position is supplemented by the State of Indiana through Local Health Maintenance moneys. Approximately 230 retail food establishments receive timely inspections to monitor their compliance with public health laws. Routine inspections are also performed at various festivals, auctions, and other mass gatherings, including the Blueberry Festival. Foodborne illness investigations and consumer complaints are conducted as needed with support from the Indiana State Department of Health. Plan reviews and guidance for new establishments are also a service through this office.

| FOOD - 2022                  |     |
|------------------------------|-----|
| Routine Inspections          | 208 |
| Complaint Inspections (Food) | 22  |
| Follow-up Inspections        | 1   |
| Pre-operation Inspections    | 13  |
| Temporary Inspections        | 138 |
| Other Inspections            | 3   |
| Critical Violations          | 60  |
| Noncritical Violations       | 74  |



# Nursing Program

The nursing division serves the people of Marshall County subject to the approval of the Health Officer and in accordance with approved standing medical policies, or on the specific request of a private physician.

## **Some of the services provided are as follows:**

- Immunization clinics for children; vaccine is provided by the Vaccine for Children (VFC) program, through the CDC (Centers for Disease Control and Prevention).
- Assistance to the public with immunizations and with special health problems.
- Vaccinations for Adults including Tdap and Hepatitis B.
- VaxCare Vaccination Program for patients with commercial insurance.
- STI testing (chlamydia and gonorrhea)
- HIV testing
- Hepatitis C testing
- New Lead Care 2 Program. Blood Lead Testing for children age 12 months and older through age 6.
- Consultations to schools, regarding communicable disease control, immunizations, vision, and hearing screenings.
- Education and information updates on communicable disease, immunizations, and other health concerns are provided regularly to doctor's offices, schools, hospitals, health care facilities, day care centers, and others.
- Epidemiology reports for communicable diseases, as required by law, to the State Department of Health.
- Tuberculosis (TB) testing and follow-ups on positive results and active tuberculosis cases. Case Management and DOT for LTBI cases and active TB cases.
- Home visits per criteria established.
- Patient and family education, referrals when needed.
- Community Education on COVID-19 and the Pandemic
- Covid-19 Vaccine Administration
- Covid-19 Testing Site
- Covid-19 Rapid Testing
- School Liaison
- Annual School Nurse Conference

# Immunization Clinic - 2022 Data

## Doses Administered

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Report Date: February 24, 2023

### Report Criteria

Organization: 1800000184 - MARSHALL COUNTY HEALTH DEPT

Date Range: 01/01/2022 Through 12/31/2022

For Patients Seen at: MARSHALL COUNTY HEALTH DEPT [Facility]

For Patients With Funding Code: All Funding Sources

Pin #P00150

| Description                                                                      | Less Than 1 Year | 1 Year | 2 Years | 3-5 Years | 6 Years | 7-10 Years | 11-12 Years | 13-18 Years | 19 Years & over | Totals |
|----------------------------------------------------------------------------------|------------------|--------|---------|-----------|---------|------------|-------------|-------------|-----------------|--------|
| COVID-19 vaccine, Subunit, rS-nanoparticle+Matrix-M1 Adjuvant, PF, 0.5 mL        | 0                | 0      | 0       | 0         | 0       | 0          | 0           | 0           | 1               | 1      |
| COVID-19 vaccine, vector-rr, rS-A26, PF, 0.5 mL                                  | 0                | 0      | 0       | 0         | 0       | 0          | 0           | 9           | 73              | 82     |
| COVID-19, mRNA, LNP-S, PF, 10 mcg/0.2 mL dose, trisucrose                        | 0                | 0      | 0       | 11        | 11      | 47         | 23          | 0           | 0               | 92     |
| COVID-19, mRNA, LNP-S, PF, 100 mcg/0.5mL dose or 50 mcg/0.25mL dose              | 0                | 0      | 0       | 0         | 0       | 0          | 0           | 3           | 241             | 244    |
| COVID-19, mRNA, LNP-S, PF, 3 mcg/0.2 mL dose, trisucrose                         | 0                | 6      | 5       | 22        | 0       | 0          | 0           | 0           | 0               | 33     |
| COVID-19, mRNA, LNP-S, PF, 30 mcg/0.3 mL dose                                    | 0                | 0      | 0       | 0         | 0       | 0          | 23          | 120         | 433             | 576    |
| COVID-19, mRNA, LNP-S, PF, 30 mcg/0.3 mL dose, trisucrose                        | 0                | 0      | 0       | 0         | 0       | 0          | 6           | 37          | 177             | 220    |
| COVID-19, mRNA, LNP-S, PF, 50 mcg/0.5 mL dose                                    | 0                | 0      | 0       | 0         | 0       | 0          | 2           | 0           | 1               | 3      |
| COVID-19, mRNA, LNP-S, PF, pediatric 25 mcg/0.25 mL dose                         | 2                | 2      | 2       | 6         | 0       | 0          | 0           | 0           | 0               | 12     |
| COVID-19, mRNA, LNP-S, bivalent booster, PF, 10 mcg/0.2 mL dose                  | 0                | 0      | 0       | 0         | 1       | 8          | 4           | 0           | 0               | 13     |
| COVID-19, mRNA, LNP-S, bivalent booster, PF, 30 mcg/0.3 mL dose                  | 0                | 0      | 0       | 0         | 0       | 0          | 3           | 7           | 289             | 299    |
| COVID-19, mRNA, LNP-S, bivalent booster, PF, 50 mcg/0.5 mL or 25mcg/0.25 mL dose | 0                | 0      | 0       | 0         | 0       | 0          | 0           | 0           | 119             | 119    |
| DTaP                                                                             | 4                | 46     | 22      | 19        | 7       | 4          | 3           | 7           | 0               | 112    |
| DTaP/IPV/Hib/HepB                                                                | 85               | 20     | 2       | 6         | 0       | 0          | 0           | 0           | 0               | 113    |
| DTaP-Hep B-IPV                                                                   | 21               | 4      | 4       | 11        | 4       | 0          | 0           | 0           | 0               | 44     |
| DTaP-Hib-IPV                                                                     | 47               | 11     | 3       | 5         | 0       | 0          | 0           | 1           | 0               | 67     |
| DTaP-IPV                                                                         | 1                | 1      | 1       | 121       | 19      | 2          | 1           | 2           | 0               | 148    |
| HPV9                                                                             | 0                | 0      | 0       | 0         | 0       | 1          | 157         | 149         | 9               | 316    |
| Hep A, adult                                                                     | 0                | 0      | 0       | 0         | 0       | 0          | 0           | 0           | 6               | 6      |
| Hep A, ped adol, 2 dose                                                          | 0                | 108    | 36      | 86        | 32      | 61         | 22          | 83          | 3               | 429    |
| Hep B, adolescent or pediatric                                                   | 20               | 4      | 2       | 10        | 5       | 22         | 20          | 28          | 0               | 111    |
| Hep B, adult                                                                     | 0                | 0      | 0       | 0         | 0       | 0          | 0           | 0           | 17              | 17     |
| Hib (PRP-GMP)                                                                    | 19               | 54     | 8       | 10        | 0       | 0          | 0           | 0           | 0               | 91     |
| IPV                                                                              | 1                | 5      | 2       | 18        | 4       | 37         | 15          | 31          | 0               | 113    |
| Influenza, injectable, quadrivalent, preservative free                           | 2                | 20     | 7       | 46        | 11      | 44         | 26          | 51          | 145             | 352    |
| Influenza, injectable, quadrivalent, preservative free                           | 0                | 0      | 0       | 0         | 0       | 0          | 1           | 0           | 0               | 1      |
| MMR                                                                              | 0                | 31     | 3       | 8         | 1       | 1          | 4           | 16          | 15              | 79     |
| MMRV                                                                             | 0                | 50     | 5       | 141       | 21      | 20         | 6           | 5           | 0               | 248    |
| Meningococcal B, OMV (Bexsero)                                                   | 0                | 0      | 0       | 0         | 0       | 0          | 0           | 265         | 4               | 269    |

## Doses Administered

Page 2 of 2

Report Date: February 24, 2023

**Report Criteria**

**Organization:** 1800000184 - MARSHALL COUNTY HEALTH DEPT

**Date Range:** 01/01/2022 Through 12/31/2022

**For Patients Seen at:** MARSHALL COUNTY HEALTH DEPT [Facility]

**For Patients With Funding Code:** All Funding Sources

Pin #P00150

| Description                                                       | Less Than 1 Year | 1 Year | 2 Years | 3-5 Years | 6 Years | 7-10 Years | 11-12 Years | 13-18 Years | 19 Years & over | Totals |
|-------------------------------------------------------------------|------------------|--------|---------|-----------|---------|------------|-------------|-------------|-----------------|--------|
| Pneumococcal conjugate PCV 13                                     | 142              | 87     | 13      | 20        | 0       | 0          | 0           | 1           | 0               | 263    |
| TST-PPD intradental                                               | 0                | 0      | 1       | 9         | 0       | 0          | 0           | 11          | 111             | 132    |
| Tdap                                                              | 0                | 0      | 0       | 0         | 0       | 25         | 208         | 51          | 32              | 316    |
| influenza, high-dose, quadrivalent                                | 0                | 0      | 0       | 0         | 0       | 0          | 0           | 0           | 13              | 13     |
| meningococcal MCV4P                                               | 0                | 0      | 0       | 0         | 0       | 0          | 53          | 59          | 0               | 112    |
| meningococcal polysaccharide (groups A, C, Y, W-135) TT conjugate | 0                | 0      | 0       | 0         | 0       | 0          | 164         | 158         | 2               | 324    |
| rotavirus, monovalent                                             | 73               | 0      | 0       | 0         | 0       | 0          | 0           | 1           | 0               | 74     |
| varicella                                                         | 0                | 28     | 5       | 23        | 11      | 31         | 9           | 31          | 8               | 147    |
| zoster recombinant                                                | 0                | 0      | 0       | 0         | 0       | 0          | 0           | 0           | 5               | 5      |
| <b>Totals</b>                                                     | 417              | 475    | 121     | 572       | 127     | 303        | 750         | 1126        | 1705            | 5596   |
| <b>Total Patient(s): 2722</b>                                     |                  |        |         |           |         |            |             |             |                 |        |



## Health Education

MCHD continues to work with Marshall County Schools, jail, and businesses to promote best practice protocols for communicable disease prevention. We continue to promote community awareness and prevention of Covid-19 through radio, newspaper and we also added an Instagram page and expanded our Facebook page. We worked with TJ 21 Media Group to create commercials to promote Covid-19 vaccine and HPV vaccine. We merged our website with the IDOH website platform to make it easier for folks to find/search for MCHD. We hosted a School Nurse Conference and plan to make it an annual event.

## Emergency Preparedness

The Marshall County Health Department applied for the Emergency Preparedness grant for the fiscal year of July 2022 through June 2023. This grant is in the amount of \$25,000.00 and is a reimbursable grant. An ESF-8 meeting was held with county partners to network, align strategies, and discuss outreach regarding at-risk populations. A Continuity of Operations Plan was developed in conjunction with BOLD Planning Continuity System to handle any emergencies or disruptions. Additionally, an all-hazards state emergency operations plan is being developed that includes multiple annexes covering operations. An after-action report/improvement plan is being developed that includes multiple annexes covering operations. An after-action report /improvement plan regarding the coronavirus pandemic is continuing to be prepared aligns response objectives with preparedness doctrine to include the National Preparedness Goal and related frameworks and guidance.



## WIC Women, Infants and Children

Marshall County WIC  
510 W. Adams St. Suite 240  
Plymouth, IN 46563  
574-936-8208

The WIC program helps families start strong and stay that way. WIC is a special supplemental food and nutrition program that provides participants with a WIC specific EBT card that is used to purchase nutritious foods, for free.

### Those eligible for WIC include:

- Pregnant women
- Breastfeeding moms (up to one year after delivery)
- Non-breastfeeding moms (up to six months postpartum)
- Infants
- Children up to age five

### WIC Services

- A monthly food package is loaded onto a debit card.
- Nutrition education and nutrition counseling as well as height/weight assessments and iron/hemoglobin testing, that is administered by a Registered Dietitian or a Registered Nurse.
- Referrals to other health and social services.
- Breastfeeding classes that are offered on Tuesdays with our Peer Counselor
- Nutrition Classes and online education through the WIC APP
- Coming soon : Babe Store where women will be able earn coupons and redeem those for items such as diapers, wipes, clothing etc.

### Breastfeeding Support

- Our WIC program continues to encourage Moms to breastfeed their newborn babies.
- Our initiation rate continues to be high at 79.2%. We are very proud of this high rate of participation.
- We provide breastfeeding support to moms and babies by using breastfeeding peer counselors, offering classes, issuing breast pumps and nursing supplies.

### The WIC Food Package

WIC participants receive benefits monthly that are used at local grocery stores to purchase specific foods, which include the following:

- Milk, Cheese, Yogurt, Tofu
- 100% juice
- Eggs, Beans, Peanut Butter
- Cereal
- Whole grains such as;
  - o Whole wheat bread
  - o Whole wheat tortillas
  - o Brown Rice
  - o Whole grain pasta
- Fruit and Vegetables cash value benefit \$\$
- Fish are added to an exclusively breastfeeding woman's food package.

#### **Infants receive the following food package:**

- A supplemental formula package for the infant.
- When the infant turns 6 months of age, the WIC food package provides infant cereal and fruit and vegetable jar baby foods.
- If the baby is exclusively breastfeeding, then WIC provides additional fruit and vegetable jar baby foods as well as meat jar foods.

### WIC Income Eligibility and Contact Information as of June 2022

\*\*Income guidelines updated annually

| *Household Size        | Annual Income* | Monthly Income |
|------------------------|----------------|----------------|
| 1                      | \$25,142       | \$2,096        |
| 2                      | \$33,874       | \$2,823        |
| 3                      | \$42,606       | \$3,551        |
| 4                      | \$51,338       | \$4,279        |
| 5                      | \$60,070       | \$5,006        |
| 6                      | \$68,802       | \$5,734        |
| 7                      | \$77,534       | \$6,462        |
| 8                      | \$86,266       | \$7,189        |
| Each Additional Person | \$8,732        |                |

All eligible people who receive Medicaid Food Stamps, and TANF are income-eligible for WIC. For those who do not receive these services, the adjacent chart provides income guidelines.

\*Income means total income before deductions.  
Also, we only screen past 30 days of income.

Note: A pregnant woman includes her unborn baby when determining household.

\*A household means a group of people (related or not) who are living as one economic unit.

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### Outreach Activities

The Marshall County WIC Program participants in various outreach activities to help educate the community about our program's services. We are also proud to be a part of Marshall County's Farmers Market where clients can use their benefits and receive farm fresh produce! Marshall County WIC has a Facebook page to help engage participants, educate and announce events at the local level.

The Marshall County WIC Program provides a friendly, cozy atmosphere to its participants, which has a lot to do with the hard work of the WIC clerical staff. The staff takes pride in making clients feel welcomed at each and every appointment. We are also fortunate to have a bi-lingual clerk who is instrumental and helps us communicate with our spanish speaking clients.

WIC also has been given donations of baby blankets that were made by a local sorority. New Moms enjoy being able to pick out something special for their new baby.

Soon Marshall County WIC will be opening a BABE store. This initiative is in conjunction with Beacon Community Impact. Clients will be able to earn coupons by attending appointments both at the WIC office and at local doctors offices. If clients complete education classes in person or online, they also earn coupons. Coupons can be redeemed at Marshall County WIC Office.

Under new leadership, we have plans for more robust outreach in 2023.

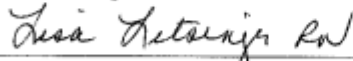
### Clinic Environment and Participation

Our monthly caseload utilization average was 926.58 participants. Marshall County WIC services a variety of ethnic groups.

Race by % for MC

| Race                                      | %     |
|-------------------------------------------|-------|
| American Indian or Alaska Native          | 0.48  |
| Asian                                     | 0.34  |
| Black                                     | 5.02  |
| Native Hawaiian or other Pacific Islander | 0.34  |
| White                                     | 98.28 |
| Hispanic                                  | 0.83  |

Marshall County WIC continues to fill a vital need in our community. The Mission Statement of WIC is to safeguard the health of low-income women, infants, and children up to age 5 who are at nutritional risk by providing nutritious foods to supplement diets, information on healthy eating and referrals to healthcare. Marshall County WIC is able to do this by partnering with the State WIC office and to continue facilitating the WIC Grant.



Marshall County WIC Coordinator

Marshall County WIC Staff:

Health Officer: Dr. Byron Holm MD  
Coordinator: Lisa Letsinger RN  
Full Time Bi-Lingual Clerk: Rosa Perez  
Part Time Clerk: Debbie Gidley  
Peer Counselor: Savannah Simpson  
CPA: Vacant

## Looking Ahead

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In the Nursing/Health Education division, we are looking forward to continuing our outreach in the mobile medical unit for Marshall County. This unit will be deployed throughout Marshall County and available for the following services:

1. Vaccinations for children and adults
2. Health Screenings
3. Health Testing
4. Health and Wellness Education
5. Amish Vaccine Clinics

MCHD will continue to improve our website to enable the health department to share up to date health information with our county residents.

We hope to re-instate our STI Clinics and add lead screen services to our county residents.

In the Emergency Preparedness division, we are looking to have a regular bimonthly meeting with the ESF8 partners and get some policies drafted with the assistance of the Marshall County EMAs office and Indiana Department of Health. Continued efforts to expand our closed POD partners will be done as well.

In the Environmental division, we are looking forward to continuing the process of bringing a sewer district to the much-needed underserved areas of our county. The goal is to have the design process started and funding sources being researched. We are hoping to start the process of the development of a property transfer ordinance and a tattoo monitoring program. Hopefully in the near future conduct training for not only our septic installers but well drillers also can resume.