WAYNE COUNTY HEALTH DEPARTMENT STRATEGIC PLAN

- TATTOO, BODY PIERCING, AND EYELASH SAFETY AND SANITATION
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Created by Wayne County Health Department Clinical Director, Rebecca Alliston, MA, RDN, LD, NBC-HWC

TOBACCO PREVENTION AND CESSATION

CHW will build Wayne County Tobacco-Free Coalition (which may or may not branch from Drug-Free Wayne County).

School Liaison/Health Educator will work with the schools to bring youth tobacco and nicotine prevention

State KPI: Number of counties that, through a tobacco prevention and cessation coalition, have a comprehensive program to address youth tobacco and addictive nicotine prevention

CHRONIC DISEASE PREVENTION

Health Educators offer evidence-based programming for obesity and obesity-related disease prevention that is catered to multiple age groups.

Health Educators offer evidence-based programming for Diabetes and Pre-Diabetes that is catered multiple age groups.

State KPI: Number of counties that through a healthy community coalition have a comprehensive, evidence-based program to address obesity and obesity-related disease prevention

Health Educator to offer evidence-based content/educational materials for the role of nutrition in cancer prevention in terms of increasing antioxidant foods and decreasing convenience foods.

Health Educators offer evidence-based programming for Heart Disease that is catered multiple age groups.

Establish that LHD's shall have the capability to enforce the Indiana tattoo and body piercing rule and eyelash extension rule.

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TRAUMA AND INJURY PREVENTION

The Lead Registrar will identify #1 and #2 causes of death, in specified age groups, using death certificate database.

Health Educator will work with Reid Health Emergency Department to determine what the #1 cause on injury is, broken down by specified age groups.

State KPI: Number of counties that identified a leading cause of injury and/or harm in their community and implemented a comprehensive, evidence-based program or activity for prevention

Health Educator will develop evidence-based programming to address leading causes of death and injury across the age groups.

Health Educator to help educate and promote safe sleep, child safety car seats and bicycle helmets for children.

Continue to provide or work with community and/or regional partners in the coordination of harm reduction for substance use, such as naloxone distribution, and peer recovery and rehabilitation services, and/or trauma and injury prevention initiatives.

Community Health Worker will find and fill in access to care gaps by seeking out individuals who under utilize the healthcare benefits that are available to them and provide assistance with obtaining those appropriate healthcare.

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FATALITY REVIEW #1

Continue to provide vital records for death reviews for FIMR/CFR/SOFR.

Health Department Executive Director will continue to sit on Child Fatality Review (CFR) Team (ages 2-18).

State KPI #1: Number of counties that participate in local CFR, FIMR, and SOFR teams and provide birth certificates, stillbirth certificates, and death certificates to local fatality review teams

Utilize Community Health Coalition to discuss and fill in gaps of care for preventable deaths in the future.

Health Department Executive Director will continue to sit on Fetal and Infant Mortality Review (FIMR) Team (ages 20 weeks gestation-1 year).

Health Department Executive Director to continue to sit on Suicide and Overdose Fatality Review (SOFR) Team and continue to review/investigate these cases with the assistance of Harm Reduction staff.

Community Health Worker/Safety Pin Program Manager to continue to review/investigate fetal and infant mortality cases and present to FIMR Team for review.

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FATALITY REVIEW #2

Through participation in FIMR/CFR/SOFR Teams and with death certificate database reviews, leading causes of death will be identified for these groups.

Health Educator will implement evidence-based health education/interventions for leading cause of fetal/infant death.

State KPI #2: Number of counties that identified a leading cause of fatality in their community and implemented an evidence-based or promising prevention program or activity

Community Health Worker will find creative ways to seek out and partner with individuals/families in at-risk populations and ensure that they are aware of their resources for preventable deaths.

Health Educator will implement evidence-based health education/interventions for leading cause of child death.

Disease intervention specialists will provide case management for individuals with communicable diseases including services like assistance with partner notification, treatment, and follow-up testing.

Health Educator will implement evidence-based health education/interventions for overdose and suicide-related deaths under the guidance of SOFR Team and with director from local mental health professionals.

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MATERNAL AND CHILD HEALTH #1

State KPI #1: Number of counties with documented processes to refer families to needed services including contraceptive care, WIC, home visiting, prenatal care, substance use disorder treatment, and insurance navigation

Community Health Worker will find creative ways to access women/children/families to spread awareness and serve as a referral resource for families needed services pertaining to maternal and child health with an aim to improve overall health equity.

Continue to employ clinical and clerical staff that are cross-trained and health insurance navigators and regularly refresh this training as public insurance policy changes.

Family Resource Referral Guide to be created and kept up-to-date by Community Health Worker. Community Health Worker will be empowered by Clinical Director to ensure that all LHD staff feel confident providing a warm handoff/referral to these resoures.

Continue to provide pregnancy testing and keep and updated resource guide available on-site for referrals as needed.

Continue to provide STD testing and treatment.

Health Educators will provide educational materials (for clinic and residents) as well as in-person promotion of safe sleep, breastfeeding, healthy eating, and physical activity.

Created by Wayne County Health Department Clinical Director, Rebecca Alliston, MA, RDN, LD, NBC-HWC

MATERNAL AND CHILD HEALTH #2

Community Health Workers (current) to continue to offer Safe Sleep and Count the Kicks Education.

Health Educators to become trained to offer Safe Sleep and Count the Kicks Education.

State KPI #2: Number of counties at identified an opportunity to improve birth outcomes and implemented an evidence-based or promising program or activity to improve that birth outcome

Community Health Workers to provide case management and referrals to expecting mothers to support improved birth outcomes.

Continue to provide STD screenings and DIS collaboration with individuals who are infected with sexually transmitted diseases/infections.

SCHOOL HEALTH LIASON

School Liaison to partner with all K-12 schools in the county to develop and Student Wellness Plan with a focus on "whole child health" - physical, mental, and student health and wellbeing.

Host "Back to School" Health Fair with free sports physicals, vaccinations/immunizations, visions screenings, hearing screenings, and dental screenings.

State KPI: Number of counties partnering with schools, based on community need, to implement wellness policies and comprehensive strategies to promote student health

Health Educator to provide monthly education/in-services as requested by school nurse and/or other education personnel.

Continue to support schools with vaccines administration rates via mobile clinics brought to the school, in-house clinics, and advertisements of afterhours clinics.

Safe Driving Initiative where high school students are educated on the dangers of texting and driving in a relatable and evidence-based way with hands-free device giveaway.

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LEAD CASE MANAGEMENT AND RISK ASSESSMENT

Lead case management to be conducted by IDOH-trained Public Health Nurse within timeframes outlined in 410 IAC 29.

Continue to provide daily availability of walk-in blood lead screening which is provided at no cost for children under the age of 7.

Assessments to be completed by (on-staff) licensed Lead Risk Assessor within timeframes outlines in 410 IAC 29.

State KPI: Number of counties with access to a trained or licensed case manager and risk assessor in the county and offering weekly lead testing at a location in the county

Continue to provide after-hours and off-site lead screening via mobile clinic which is provided at no cost for children under the age of 7.

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ACCESS TO AND LINKAGE TO CLINICAL CARE #1

Continue to provide STD testing and treatment during Monday evening clinics.

Disease Intervention Specialists to work with individuals by providing case management services and ensuring that they (and their partners) have access to equitable clinical services.

PHN (2.0 FTE) to provide clinical services such as those related to communicable diseases, lead case management, and immunizations.

State KPI #1: Number of local health departments providing accessible, equitable clinical services, such as those related to communicable diseases, to meet the needs of the community

Continue to provide Syringe Services Program at no cost to patrons in an effort to reduce the spread of communicable disease spread related to the sharing of dirty needles.

ACCESS TO AND LINKAGE TO CLINICAL CARE #2

State KPI #2: Number of local health departments engaging with the local and state health delivery system to address gaps and barriers to health services and connect the population to needed health and social services that support the whole person, including preventive and mental health services

Community Health Worker to provide referrals to providers (physical health and mental health) that offer virtual appointments the maintain accessibility to individuals with transportation barriers.

Work with Indiana Department of Health to be able to provide latent TB treatment and testing for free or very little cost to the patient.

Community Health Workers, Public Health Nurses, Disease Intervention Specialists, and Health Educators to refer residents to clinical resources for services for things like substance use disorder, health screenings, and prenatal care.

Community Health Worker to keep an up-to-date list of community resources for residents by maintaining relationships with other community resources agencies and investigation as needed.

Executive Director, Clinical Director, and Environmental Heath Supervisor to be available 24 hours a day for after hours public health emergencies.

Two Paramedicine Professionals to be employed in partnership with RFD to help with linkage of care when mental health services my be more appropriate than jail or emergency department.

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TB PREVENTION AND CASE MANAGEMENT

Public Health Nurse will continue to provide or ensure case management for those with suspected or confirmed TB disease, including investigation and specimen collection, enforcing isolation, providing directly observed therapy, and coordinating clinical and social needs.

Community Heath Worker to provide support for patients with TB and LTBI by providing referrals and references for various resources that might be helpful.

State KPI: Number of counties with established partnerships for housing, food security, and interpretation services to assist in case management services for patients with TB and latent TB infection in their communities

Obtain subscription to translation line for any language to seamless service provided for patients that speak any language.

Continue to work with IDOH to identify and treat latent TB infection (LTBI) according to the IDOH TB Elimination Plan.

Community Health Worker should be aware of the socioeconomic, environmental, and behavioral factors that place individuals in their communities at risk, such as housing/crowding, sexual behaviors, and underrepresented/underserved individuals.

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HEALTH-RELATED AREAS DURING EMERGENCIES/DISASTERS #1

Continue to keep Emergency Response Plans up-to-date and continue to keep communication open with police force, fire department, and EMA.

Will begin employment of 0.5 FTE Emergency Preparedness Coordinator who will ensure that Health Department is prepared to serve as primary safety net to ensure equitable, accessible vaccines and other medical counter measures as needed in an emergency.

State KPI #1: Number of counties that have updated* public health emergency response plans
***"Updated" is defined as conducting research on latest national and state best practices, incorporation of lessons learned and areas of improvement from real world events and exercises, and inclusion of preparedness and response partners in content validation.**

Emergency Preparedness Coordinator will participated in county-level emergency planning including outbreak and environmental responses, to link public health and public safety.

Will utilize CDC Preparedness & Response National Environmental Public Health Tracking tools.

HEALTH-RELATED AREAS DURING EMERGENCIES/DISASTERS #2

Continue with Table Top Exercises as a part of current County Emergency Response System.

Continue meeting with Emergency Support Function-8 partners to meet biannually to ensure that emergency support/disaster needs are being addressed.

State KPI #2: Number of counties exercising current emergency response plans with community partners within a biennial timeframe

IMMUNIZATIONS #1

Continue to offer vaccines to all individuals, including vaccines that are publicly and privately funded, so that anyone has access to vaccines through a local health department.

Will hold Drive-Thru Flu Clinics where flu shots will be given for free or at a very reduced cost regardless of insurance status.

State KPI #1: Number of counties that can vaccinate all individuals at time of service regardless of insurance status

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IMMUNIZATIONS #2

Continue with Monday evening, Wednesday evening (mobile), and first Saturday of the month clinics.

Public Health Nurse to lead annual vaccine program evaluation with all relevant stakeholders to ensure that our vaccine program is meeting the needs of the community.

State KPI #2: Number of counties with extended vaccination hours beyond routine business hours to meet the needs of the community/jurisdiction through the LHD or community partners

INFECTIOUS DISEASE SURVEILLANCE AND PREVENTION

Continue with case investigation with documentation via NBS within 24 hours for at least 95% of the immediately reportable conditions reported to us.

Continue with case investigation with documentation via NBS within 2 business days for at least 85% of the non-immediately reportable conditions reported to us.

Public Health Nurse should initiate an investigation, obtain clinical information, facilitate collecting and shipping specimens, identify outbreaks, and assess ongoing transmission risk in collaboration with Disease Intervention Specialists.

State KPI: Number of counties that initiated a public health investigation within 24 hours for 95% of the immediately reportable conditions reported to them and within two business days for 85% of non-immediately reportable conditions reported to them

Disease Interventions Specialists should lead the response of identified outbreaks and clusters in their jurisdictions and implement control measures to contain, mitigate, or end ongoing transmission of communicable diseases.

Community Health Workers should be aware of the socioeconomic, environmental, and behavioral factors that place individuals in their communities at risk.

Continue to provide testing and counseling for HIV, hepatitis C, and other sexually transmitted infections.

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VITAL RECORDS #1

Issues birth certificates to individuals born in any county in Indiana as soon as DRIVE is available for health department use.

State KPI #1: Number of counties implementing birth certificates to all Hoosiers irrespective of their county of birth once the IDOH DRIVE system has appropriate functionality

VITAL RECORDS #2

Continue to keep an extra laptop in the emergency room with a printer and kept up-to-date with all software to be used at reunification center to issue birth and death certificates.

State KPI #2: Number of counties able to offer Vital Records services without disruption to business continuity during natural disasters/emergencies

FOOD PROTECTION

Continue to stay up-to-date and review food ordinances for any updates or corrections

Have all food inspectors **standardized** by end of year 2024.

State KPI: Number of counties that have developed a timely and professional risk-based food inspection standard operation procedure

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ENVIRONMENTAL PUBLIC HEALTH #1

Develop, train on, and implement housing policy (including a specific timegrame) where housing and nuisance complaints will be addressed in order of risk.

State KPI #1: Number of counties responding to all housing and nuisance complaints within a timeframe determined by urgency or risk

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ENVIRONMENTAL PUBLIC HEALTH #2

Begin a mosquito surveillance program with at least one Environmental Health Specialist certified by the end of year 2024.

Continue current best practices with Environmental Heath Specialists conducting environmental inspections such as onsite sewage, vector control, public and semi-public pools, and property-related complaints in accordance with 410 IAC 6 and IC 16-20-1-22.

New additional Environmental Health Specialist to provide outreach and guidance for safe private well water quality and other environmental health matters to furnish recommended testing parameters and best practices.

State KPI #2: Number of counties with trained and licensed, if required, staff conducting required environmental inspections, such as onsite sewage, vector control, public and semi-public pools, and property-related complaints

LHDs shall issue orders for decontamination of property used to illegally manufacture a controlled substance under IC 16-19-3.1 and IC 16-41-25.

TATTOO, BODY PIERCING, EYELASH SAFETY AND SANITATION

Identify all establishments in Wayne County that are currently provide tattoo, body piercing, and eyelash services.

Develop (and get approved) a procedure for receiving and responding to complaints.

Train inspectors on proper procedures for inspecting these establishments and responding to complaints.

State KPI: Number of counties with trained staff who can respond to tattoo, body piercing, and eyelash extension complaints (Target: 90%)

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2025 Projections

Partner with a mental health agency to fund a position for a **Certified Addiction Peer Recovery Coach**.

Health Educators will be trained and certified to teach **CPR**, **Safe Sleep** courses, and **Count the Kicks** courses.

Implement more projects as determined by Community Health Coalition.

HPV vaccine education initiative.

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