

STOKES COUNTY HEALTH DEPARTMENT
ANNUAL REPORT FOR FISCAL YEAR 2021/2022



Stokes County Health Department Annual Report for Fiscal Year 2020/2021

FY 2021/2022		
	Scheduled Appts.	Appointments Kept
Providers	1,694	1,204
Lab	211	188
Nursing	1,751	1,569
Covid Vaccines	3,411	3,101
Prenatal	135	112
Mammogram	116	99
Total Appts. Scheduled	7,318	6,273

Public Health Clinic

- Number of patients seen 6,273 patient visits. Last FY 20/21 our total patients seen was 3,729 out of the 4,725 that were scheduled.

Clinic Updates:

We experienced more staff turnover this year than normal due to Covid burn-out. As a result, we have a new FNP, Marie Stanley and our new Medical Director, Lisa Cassidy-Vu. This change has increased our patient load. We are still discussing how to employ a LCSW/Mental Health provider here at our location. Increasing the access to Mental Health Services is our top priority at this time.

Women, Infant, Children (WIC)



WIC stands for Women, Infants and Children. It is the Special Supplemental Nutrition Program for Women, Infants, and Children funded by the United States Department of Agriculture, commonly referred to as the WIC Program.

Who is WIC for?

- Children up to five years of age
- Infants
- Pregnant women
- Breastfeeding women who have had a baby in the last 12 months
- Women who have had a baby in the last six months

What does WIC provide?

- Healthy foods
- Health care referrals
- Breastfeeding support
- Eating tips for you and your child

To be eligible, you or your child must:

- Live in North Carolina
 - Live in a household with income at or below WIC guidelines
 - Have a health risk factor based on:
 - Height and weight
 - Blood test for low iron
 - Health history
 - Diet history
-
- WIC clients seen 3,681 for FY 21/22.
 - Currently we have a full-time director/nutritionist and one nutritionist position in the WIC department. WIC department is now open one day a week in King. WIC has been doing all appointments over the phone per the state. This process will continue however, we do give the participants the option to come into the office if they would like.

WIC Active Participation

Month	FY 2020/2021	FY 2021/2022
July	339	280
August	266	285
September	313	322
October	286	291
November	304	277
December	360	339
January	310	272
February	314	307
March	375	345
April	296	282
May	294	299
June	317	382
Totals	3,774	3,681

Emergency Preparedness

- SCHD Public Health Emergency Operations Plan (EOP) was developed and uses an all-hazards approach.
- Closed point of dispensing sites database to serve over 10,000 persons.
- Collaboration with surrounding central region counties in CDC Medical Countermeasure Operation Readiness.
- Stokes County Health Department Emergency Preparedness and Response Program continues to improve and score high on operational readiness, meeting CDC implementation goals, compared to state, central regions, and similar population quartiles figures.
- **Committee Participation:**
 - Local Emergency Planning Committee
 - State, Regional, and Local Work Groups
 - Safety Committee
 - Triad Healthcare Preparedness Coalition
 - Virginian and North Caroling Regional Committee

Monthly Activities

- GETS (Government Emergency Telecommunication Service) testing and radio testing
- Generator testing
- Building OSHA (Occupational Safety and Health Administration) safety inspections
- Regional Emergency Preparedness Coordinator meetings
- Regional Work Group Meetings (west central region)
- Review and update plans as necessary

Quarterly Activities

- LEPC (Local Emergency Planning Committee) meeting attendance and other surrounding county committee attendance
- Call downs with Corrective Action Plans

Annual

- Medical Countermeasures Distribution and Dispensing (MCMDD) Plan Review
- Fire/tornado drills
- State Emergency Preparedness Symposium
- 2 Exercises with After Action Report/Corrective Action Plans
- Respiratory Protection Plan Fit Testing
- Review all plans/policies and make necessary changes Annual Work

Plans

- SCHD Public Health Emergency Operations Plan (EOP) – located within the EOP:
 - Continuity of Operations Plan
 - Telecommunications Plan
 - Activation and Notification Plan
 - Public Information and Communications Plan
 - Worker Protection and Safety Plan
 - Isolation and Quarantine Plan
 - Communicable Disease Plan (Ebola, Pandemic Influenza, and Bioterrorism)
 - Medical Countermeasures Distribution and Dispensing Plan
 - Medical Emergency Shelter Plan
 - Mass Vaccination Plan
 - Mass Fatalities Plan

Stokes County Medical Countermeasure (MCM) Operational Readiness

The Capabilities Reporting Tool found in the NCDETECT Portal is a combination of the CDC Performance Measurements and the NC Public Health Preparedness Rubric that is used to assess the capacity and capability of our public health preparedness programs across the state. Each Capability and sub-capability category is assigned one of the following values based on how prepared we are; those categories are (from least prepared to most prepared): “Early”, “Established”, “Intermediate”, or “Advanced”.

Immunizations

- Stokes County Health Department is one of the primary locations in Stokes County that offers routine immunizations. During this fiscal year the following achievement occurred with our program:
 - Gave 560 immunizations to 358 clients/patients

Stokes County Reported Communicable Disease Totals for FY 2021/2022

Disease Classification	Total confirmed cases 20/21	Total confirmed cases 21/22
Haemophilus Influenza	1	3
Hepatitis C (Chronic)	63	4
Rocky Mountain Spotted Fever	2	3
Ehrlichiosis	2	0
Lyme Disease	9	7
Cryptosporidiosis	5	3
Salmonella	6	7

Campylobacter Infection	12	22
Strep A	0	4
E Coli	2	3
Legionellosis	1	2
Hepatitis A	3	4
Chlamydia	138	43
Gonorrhea	50	90
Hepatitis B	5	0

NC Breast Cervical Cancer Control Program (NC BCCCP)

The Health Department continues to partner with the Mobile Mammogram Unit one day per quarter to provide mammograms. The Mobile Mammography Unit serves about 20-25 women each time it visits the Health Department.

The North Carolina Breast and Cervical Cancer Control Program (NC BCCCP) provides free or low-cost breast and cervical cancer screenings and follow-up to eligible women in North Carolina. Each year, NC BCCCP strives to provide services to over 12,000 women.

NC BCCCP services are offered at most local health departments as well as some community health centers, hospitals and private physicians' offices across the state. Approximately 102 local health agencies work in cooperation with physicians, hospitals, and other health care facilities to provide services to eligible North Carolina women.



NC BCCCP provides services to North Carolina women who:

- are uninsured or underinsured;
- are without Medicare Part B or Medicaid;
- are between ages 40 - 64 for breast screening services and 18 - 64 for cervical screening services; and
- have a household income at or below 250% of the federal poverty level.

Services offered:

- Clinical breast exams
- Screening mammograms
- Pap tests
- Diagnostic procedures, as indicated (diagnostic mammograms, biopsies)
- Medical consultations



ultrasounds, colposcopies, breast and cervical

Breast and Cervical Cancer Medicaid (BCCM) provides funding for treatment to NC BCCCP enrolled clients who are diagnosed with breast or cervical cancer and who meet additional requirements. BCCM eligible women must be enrolled in NC BCCCP prior to a cancer diagnosis.

Compared to other groups, there are significant differences in the rates of minority women who are diagnosed with breast and cervical cancers and who die from these diseases. NC BCCCP has focused increased recruitment and education strategies to prompt more African American, Hispanic, and American Indian women to get breast and cervical cancer screenings.

Stokes County BCCCP Program FY 2021/2022

Program Type	Pt Seen FY 21/22
Federal BCCCP	24
State BCCCP	7
Insurance	38
Medicare	28
Medicaid	4
Total Patients	101

Care Management for At-Risk Children (CMARC)

For FY21/22 our CMARC caseload is between 80-85 participants a month

CMARC is a free and voluntary program that helps families like yours find and use community services. The program goals are:

- to connect your family with services for children and families
- to support your children in reaching their developmental potential
- to help ensure that children are raised in healthy, safe, and nurturing environments.

CMARC care managers can help with finding medical care, transportation, childcare and /or financial aid. They can also provide you with information about a wide variety of family-oriented resources. The CMARC care manager will:

- discuss family strengths and concerns through home visits, telephone calls and other personal contacts
- identify programs, services, and resources that meet your family's needs
- serve as a link between you and your child's doctor or nurse
- identify ways you can strengthen parent-child relationships

- introduce you to parent support programs when available
- offer encouragement and support.

Who is Eligible?

Children birth to age three who are at risk for developmental delay or disability, long term illness and/or social, emotional disorders and children ages birth to five who have been diagnosed with developmental delay or disability, long term illness and/or social, emotional disorder may be eligible for the program.

CMHRP/PMH (Pregnancy Care Management/Pregnancy Medical Home)

For FY 21/22 our CMHRP caseload is 40 participants per month.

The Care Management for High-Risk Pregnancies (CMHRP) program is the primary vehicle for delivering care management to pregnant women who may be at risk for adverse birth outcomes.

This program builds on the legacy model of care management for pregnant women administered in the local health departments since 1988. Through the years, the program name has changed, but the focus of care management services for pregnant recipients has remained the same.

CMHRP will continue to be provided by Local Health Departments (LHDs). Medicaid will continue to support the partnership between LHD care managers and maternity care providers, delivering coordination of care and ensuring social drivers of health are addressed.

A key feature of the program is the standardized Pregnancy Risk Screening tool used by obstetric provider to help identify Medicaid recipients at risk for an adverse birth outcome and refer them to the CMHRP program. All pregnant Medicaid recipients will continue to receive a coordinated set of high-quality, clinical maternity services through the Pregnancy Management Program (Pregnancy Medical Home).

Case Management

If a pregnant Medicaid recipient's aid program category covers pregnancy services, she is eligible to participate in this program. This program is NOT just for recipients of Medicaid for Pregnant Women (MPW). Pregnant Medicaid patients will receive care management (population management). High-risk pregnant women in a PMH will receive case management services. The level of service provided will be in proportion to the individual's identified needs. Case managers are expected to closely monitor the pregnancy through regular contact with the physician and patient to promote a healthy birth outcome.

Program Participation

The PMH project will be modeled after the enhanced primary care case management program developed by CCNC. To qualify for participation as a PMH, the provider must agree to the following:

- Ensuring that no elective deliveries are performed before 39 weeks of gestation by agreement with all professional providers
- Engaging fully in the 17P project in each pregnancy medical home
- Decreasing the cesarean section rate among nulliparous women
- Completing a high-risk screening on each pregnant Medicaid recipient in the program and integrating the plan of care with local care/case management
- Open chart audits

In exchange for meeting the program expectations described above, the PMH will receive the following incentives:

- Exemption from prior approval on ultrasounds
- \$50 for completing a high-risk screening tool at initial visit
- \$150 incentive for the postpartum visit per Medicaid recipient
- Increased rate for a vaginal delivery

Any provider who bills global, package or individual pregnancy procedures is eligible to participate in this program as long as he/she agrees to the program requirements. It is not just for obstetric providers.

Women's Health Program

The Stokes County Women's Health Program develops and promotes programs and services that protect the health and well-being of infants and of women during their child-bearing years. The goal is to improve the overall health of women, reduce infant sickness and death, and strengthen families and communities.

The Women's Health Branch also offers guidance, consultation and training for professionals who provide women's health services.

Local health departments and other community agencies serving each of the 100 counties in North Carolina provide a variety of these women's health services, including family planning, prenatal care, flu shots and other women's immunizations, and pregnancy care management.

One program offered through this program at the Stokes County Health Department is the Screening for Cervical Cancer. This service is offered during the routine physicals or the annual woman's exam.

For FY 21/22 our Women's Health Program completed 40 Pap smears. Also, for FY 21/22 we had 13 prenatal clients that delivered, 3 clients miscarried, 8 transferred.

Environmental Health

On-Site Wastewater Activity

	July 21	August 21	September 21	October 21	November 21	December 21	January 22	February 22	March 22	April 22	May 22	June 22	Totals for 21/22
Site Visits	36	27	26	23	19	16	9	15	37	27	21	15	271
Site Evaluated/Re- evaluated	22	30	20	22	43	27	36	23	48	34	38	29	372
Improvement Permits	13	19	5	13	32	12	24	16	38	23	25	15	235
Expansion Permits	1	2	1	1	1	2	2	1	4	0	1	0	16
Construction Authorization	20	17	11	11	10	13	17	11	17	21	11	10	169
Const. Auth. Expansion	1	2	0	1	0	2	2	1	0	4	1	0	14
Const. Auth. Repair/Replace	8	6	4	1	5	9	6	2	4	4	9	9	67
Auth. Existing System MHP	1	4	3	1	7	1	3	1	8	1	2	7	39
Migrant Housing Inspect.	0	0	0	0	0	0	2	5	0	0	0	0	7
Operation Permits Issued	26	25	22	19	13	16	5	9	18	18	27	25	223
Sewage Complaints Investigated	3	2	1	1	1	0	1	2	1	2	3	5	22

Well Activities													Totals for 21/22
	July 21	August 21	September 21	October 21	November 21	December 21	January 22	February 22	March 22	April 22	May 22	June 22	
Well Site Visit	20	20	13	7	11	12	12	6	7	6	8	7	129
Grouting Inspection	15	14	13	12	9	13	7	6	12	18	23	7	142
Well Site Consultative Visit	8	0	0	0	0	0	0	0	0	0	0	0	8
Well Head Inspected	19	9	12	4	18	19	3	12	6	7	2	4	87
Well Head Approved	9	8	9	3	16	16	3	8	6	5	2	4	89
Well Head Disapproved	10	1	3	1	2	3	0	4	0	2	0	0	26
Well Const. Permit New	15	9	10	6	10	9	6	8	9	4	9	9	104
Well Const. Permit Repair	1	0	0	0	0	0	1	0	2	0	0	0	4
Well Abandonment Permit Issued	1	1	0	1	0	1	0	0	2	0	0	0	6
Well Cert. of Completion Issued New	9	8	9	3	16	16	3	8	6	5	2	4	89
Well Cert. Denied New	10	1	2	1	2	3	0	4	0	2	0	0	25
New Well Kit	15	9	4	5	4	4	11	11	18	5	4	6	96
Other Sample Collected	18	17	2	2	0	0	2	6	8	0	1	7	63

Food Handling													
	July 21	August 21	September 21	October 21	November 21	December 21	January 22	February 22	March 22	April 22	May 22	June 22	Totals for 21/22
Inspections	37	3	24	26	28	50	20	38	52	32	52	42	404
Complaint Investigations	0	0	6	8	1	0	3	2	0	0	0	0	20
Complaint Investigations Follow-up	4	0	12	4	0	0	0	0	0	0	0	0	20

[illegible]

POSITION	NAME	<i>E-mail Address</i>
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Licensed Dentist	Tori Phipps	Tsp121@triad.rr.com
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***Note: member filling a vacancy unable to be filled by the prescribed profession in accordance with G.S. 130A-35**