Lake County General Health District 2020 Annual Report

A Message from the Health Commissioner

Since March of 2020, our staff along with countless others have been on the frontlines of battling the novel coronavirus (COVID-19), which has impacted everyone throughout our county, state, and nation. The work we do at Lake County General Health District (LCGHD) is critical to more than 230,000 residents across the county, and we are committed to supporting mission-critical communications 24/7 to help protect our community.

LCGHD would like to thank the doctors, nurses, technicians, transporters, EMTs, pharmacists, and everyone who has risen to the occasion and provided care to our most vulnerable populations. They have put themselves in the path of this virus in Lake County in response to this unprecedented crisis. Together, community leaders and businesses continue doing their part by having everyone who can work remotely, restricting employee travel, and canceling or postponing community large events.



Ron H. Graham, MPH Health Commissioner 2015 - Present

Coordinated planning is saving countless lives in Lake County. LCGHD would specifically like to thank several individuals for the significant amount of effort they have contributed each and every day over the last 12 months of this pandemic response. Their dedication, commitment, and courage deserve our deepest gratitude and admiration:

Thomas Hummel-Lake County Fire Chiefs Association/President, Painesville City Fire Department Chief

Dennis Morley-Lake County Mayors and Managers Association/President

John Hamercheck-President, Lake County Board of Commissioners

Joseph Busher-Director, Lake County Emergency Management Agency

Dino DiSanto-Vice President of Marketing and Government Affairs, Lake Health Hospital System

Jennifer Felker-Superintendent, Educational Service Center of the Western Reserve

All of us at Lake County General Health District are deeply grateful to all of our partners who are working tirelessly to help us keep our communities safe.



BOARD OF HEALTH

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Community Health Services

Contact Tracing: A Timeline and Evolution

In March of 2020, Lake County General Health District (LCGHD) began basic contact tracing activities for individuals with COVID-19. When epidemiological interviews of the index case were conducted, information on the individual's close contacts was also obtained. Centers for Disease Control and Prevention (CDC) guidelines were followed, and information was entered into the Ohio Disease Reporting System. Both index cases and close contacts were called, with the purpose of providing education regarding quarantine and isolation guidelines, and preventing the further transmission of disease. Individuals also received letters of isolation and quarantine, with language continually being revised based on the most current guidelines from both the CDC and the Ohio Department of Health (ODH).

In early spring, LCGHD entered into a contract with Kent State University (KSU) to provide contract tracing services in Lake County, were students were afforded the opportunity to learn public health skills while gaining part-time work experience. Simultaneously, ODH also introduced the Ohio Contract Tracing System (OCTS), an application that was used to assist in contact tracing. As close contacts were called, their address and phone number were verified, and LCGHD was able to provide any documentation needed for work or school. Close contacts were given the option of daily text monitoring for 14 days. Once information was entered in OCTS by contact tracers, close contacts received text messages inquiring about their symptoms. Close contacts were also given the option for daily phone calls if texting was not an option. Each morning, contacts tracers logged into OCTS, and checked symptoms for all close contacts entered into the system. If an individual reported symptoms, the information was then passed to an epidemiologist who conducted an interview, verified symptoms, and entered their information into OCTS as a probable case if specific criteria were met.

As summer progressed, additional contacts tracers were added and trained. LCGHD was able to reach close contacts, monitor symptoms, provide education, and provide letters as needed. By autumn, LCGHD was also using OCTS to track cases associated with schools. This resulted in large numbers of individuals, both students and staff, who needed to be contacted and entered into OCTS for daily monitoring. All tasks were performed by the contact tracing team.

In November of 2020, Lake County experienced a very rapid increase in new COVID-19 cases reported each day. It quickly became impossible to contact all index cases in the short time necessary to prevent the further spread of COVID-19. In an effort to make initial contact with all index cases, it was determined that contact tracers would shift their focus, and begin contacting index cases rather than all close contacts. Close contacts are still identified when an index cases provide them, however they are not called individually. LCGHD was able to provide quarantine letters when needed. Index cases were provided with current CDC and ODH guidelines, as well as a point of contact should they have further questions.

LCGHD continues this process to the present day, with the goal of providing education regarding isolation and quarantine to index cases and close contacts, in an effort to decrease the transmission of COVID-19.

Lake County Disease Investigation

Table 1. Reportable Communicable Diseases							
Communicable Disease	2020	2019	2018				
Babesiosis	0	1	0				
Campylobacter	22	47	32				
CP-CRE	35	7	6				
Chikungunya	О	1	0				
Chlamydia	647	765	801				
COVID-19	13,100	0	0				
Coccidioidomycosis	2	0	0				
Cryptosporidiosis	О	2	6				
Cyclosporiasis	2	0	0				
E. Coli 0157:H7	4	7	8				
Erlichiosis/anaplasmosis	0	1	0				
Giardia	11	6	10				
Gonorrhea	246	206	181				
Haemophilus Influenza	0	10	4				
Hepatitis A	11	9	2				
Hepatitis B (perinatal)	3	4	1				
Hepatits B (acute)	0	2	0				
Hepatitis B (chronic)	12	22	15				
Hepatitis C (acute)	0	2	1				
Hepatitis C (chronic)	169	269	251				
Hepatitis C (peri-natal)	1	1	1				
Influenza-Hospitalized	200	158	281				
La Crosse Virus Disease	0	1	0				
Legionnaires Disease	11	21	18				
Listeriosis	0	1	0				
Lyme Disease	15	14	16				
Malaria	1	О	0				
Meningitis-aseptic/viral	4	2	3				
Meningitis, Bacterial	1	0	5				
not Neisseria			J				
Mumps	0	1	0				
Mycobacterium Tuberculosis	0	0	0				
Pertussis	18	9	8				
Rocky Mountain spotted fever	0	1	0				
Salmonella	19	31	26				
Shigellosis	2	9	1				
Staph Aureus VRSA	0	0	0				
Streptococcal Group A (SGA)	6	12	15				
Streptococcal Group B	o	1	0				
Newborn							

Table 1 (continued). Reportable Communicable Diseases							
Communicable Disease	2020	2019	2018				
Streptococcus Pneumonai (ISP)	9	2	19				
Syphilis	38	30	10				
Tetanus	0	0	1 5 0				
Varicella	10	6					
Vibriosis	0	О					
West Nile Virus	2	О	3				
Yersinia	0	0	0				
Totals	14,601	1,661	1,730				

COVID-19 School Program

In an effort to effectively assist all Lake County schools, Lake County General Health District (LCGHD) established a comprehensive program designed to support all aspects of a school's COVID-19 response. A designated LCGHD staff member reached out to each school district to introduce themselves, explain policies and procedures for mandatory school reporting, and to identify a COVID-19 coordinator for each school. Assigned LCGHD staff members managed reported cases, and answered questions from school nurses, parents, and teachers. LCGHD also assigned each school with a contact tracing coordinator who specifically worked with confirmed COVID-19 cases and contact traced as appropriate. As LCGHD's focus moved away from contact tracing during November's surge in cases, these three staff members remained vital information resources for schools as they worked through the new stages of the pandemic.

Office of Health Policy and Performance Improvement

Lake County Medical Reserve Corps - COVID-19 Response

Throughout the course of Lake County General Health District's (LCGHD) response to the COVID-19 pandemic, the ability to quickly onboard additional staffing to maintain activities including but not limited to contact tracing, the LCGHD call center, and to support vaccine planning and distribution has been vital. As such, the support of the Lake County Medical Reserve Corps (MRC), a long-standing network of local medical and nonmedical volunteers, has been increasingly relevant in the support of these ever-changing staffing needs.

During the course of Lake County General Health District's COVID-19 response, approximately 50 Lake County Medical Reserve Corps (MRC) members have affirmed with LCGHD MRC Coordinator Tammy Spencer that they are ready to assist LGCHD with COVID-19-related activities, nearly half of which have supported medical and non-medical activities during LCGHD vaccination clinics. Per pre-established Lake County MRC protocols, these individuals have participated in a background check, completed all pending and/or required trainings, and attended a virtual MRC 101 training, the latter of which was developed by LCGHD staff to provide an overview of the MRC program, as well as how individuals may be best integrated into the public health response. This virtual training was also supported by the Lake County Emergency Management Agency, the Perry Nuclear Power Plant, and LCGHD Health Commissioner Ron Graham.

While the Lake County MRC retains more than 100 active members, many members chose not to participate in COVID-19-related activities based on health concerns pertaining to their age, preexisting medical conditions, and/or restrictions imposed by their current employer. Moreover, several Lake County MRC members whom currently work in healthcare were unable to assist based on current healthcare staffing needs. These barriers, while often based upon a unique situation, have been observed nationally among local MRC units throughout the response to the COVID-19 pandemic.

Public Information and Data Reporting

The Office of Health Policy and Performance Improvement (OHPPI) has assumed responsibility for several integral functions of the LCGHD response to the COVID-19 pandemic. Keeping the public well-informed of updated coronavirus health information, current safety measures, and Ohio Department of Health (ODH) Directors' Orders was of the utmost importance.

To facilitate this function, primary and secondary public information officers, as well as a media monitoring position, were established as part of the Incident Command System (ICS) structure. In late January, a dedicated coronavirus webpage was added to the LCGHD website. Soon thereafter, a dedicated LCGHD COVID-19 email address and hotline number were also established. The webpage has since expanded to include subpages for testing information, state health orders, and vaccine information. By mid-March, LCGHD began issuing daily situation reports to a dedicated distribution list consisting of elected officials, emergency responders, community leaders, local businesses, and members of the regional media. These situation reports reported key

LCGHD activities, in conjunction with new health orders and updates provided by ODH and the Ohio Governor's Office. By July, situations reports transitioned to a weekly release.

Beginning in early April, the situation report was accompanied by a weekly data report, released each Wednesday morning, in order to outline statistics and trends in Lake County COVID-19-related cases, hospitalizations, and deaths. Initially a single-page brief with descriptive information and demographics, the report was then expanded into a nine-page report, including: demographics and attributes of the population affected, known exposure data, seven-day rolling averages, incidence by month and week, and a monthly feature identifying reported symptoms and proportion of asymptomatic cases. LCGHD has continued to add additional data features, and ensure dissemination by way of a dedicated listsery, the LCGHD website, and the agency's social media platforms, respectively.

Information has also been distributed by staff through regular media interviews for local print, radio, and television outlets, submitted articles for community newsletters as requested, and through virtual attendance at local community meetings as schedules permitted. LCGHD's Facebook page proved to be a valuable communication tool during the course of the past year, gaining over 5,500 new followers since January 2020. In total, LCGHD's COVID-19 safety messaging, shared ODH communications, COVID-19 data reports, and local COVID-19 community resources reached more than 500,000 individuals throughout the course of 2020.

Vital Statistics

	2020	2019	2018	2017	2016
Birth Certificates Issued	5537	4,499	3,984	4,003	3,865
Out of County Birth Certs Issued	***	2,615	1,952	2,003	1,957
Web Orders for Birth Certs	-	-	-	-	132
Death Certificates Issued	10,541	8,181	8,332	8,557	7,954
Web Orders for Death Certs	-	-	-	-	20
Fetal Death Certificates Issued	3	1	3	2	1
Burial Permits Issued	686	604	653	658	650
Birth Certificates Filed	1,533	1,640	1,766	1,713	1,653
Death Certificates Filed	2,315	1,761	1,727	1,751	1,729
Free Veterans' Copies	308	301	312	306	327
Affidavits Issued	261	448	521	451	402
Supplements Issued	421	354	415	509	379

^{***}Beginning in 2020, the totals for issued in-county and out-of-county birth certificates have been combined. This total for both is listed in the category "Birth Certificates Issued".

Environmental Health

COVID-19 Response

The Environmental Health (EH) staff devoted a significant amount of time away from regular duties in 2020 to support the COVID-19 response. Regular inspection programs were reduced in scope to assist in this response; all licensed food service operations and retail food establishments received at least one inspection this year. Food safety complaint inspections, new openings, and consultations on food safety were continued during this time. Sewage treatment staff continued to inspect sewage systems as permits were issued, conducted home sale inspections as needed with revised procedures, and conducted required solid waste and storm water inspections. Staff responsibilities have included complaint response, epidemiology calls, contact tracing, assisting businesses and school with compliance, and staffing pop-up testing clinics. The staff has also contributed to the COVID-19 response by calling COVID-19 positive residents to conduct case investigations.

One of its largest undertakings included the compilation and investigating of COVID-19 complaints. Over the course of the year, a total of 2,140 COVID-19-related complaints were received by EH staff. Complaints received often pertained to both business and mask compliance, and were investigated for validity and compliance with orders from the Ohio Department of Health and Governor DeWine.

Household Sewage Treatment Online Portal

As the operation and maintenance program for household sewage treatment systems has reached its final phase, the web-based portal is now live. This online portal, which allows for households to obtain their permit, submit proof of service, and pay related fees was developed in partnership with several other health districts across the state of Ohio. Homeowners are also able to upload copies of service reports for staff to review and store in their



residence's dedicated address file. The system can also distribute applications for a permit by email, accept payment, and generate a permit automatically. As part of this process, staff review a report to verify transactions are being handled accurately. The web portal will help to keep costs low by reducing mail costs and reduce staff time associated with conducting several mailings, printing receipts and permits. Homeowners can create an account online with instructions contained in the initial permit application. To date, approximately 17% of residents have been using this system. The system will continue to be promoted as it makes the program more efficient and cost effective.

Health Education and Outreach

Women, Infants, and Children (WIC)

While the COVID-19 has pandemic has prompted many changes and challenges across Lake and Geauga County WIC clinics, caseload has remained level, and clinic staff have adapted to new policies and procedures. As a result of the COVID-19 pandemic, the United States Department of Agriculture (USDA) provided waivers for all WIC programs, the following of which will remain in place through mid-May of 2021:

- Participants do not need to be present for their appointments. All anthropometric measurements
 and bloodwork are also waived at this time. WIC staff is conducting conversations over the phone.
 When a WIC participant comes into the clinic, the WIC nutrition card (WNC) is loaded and
 questions are answered.
- Food package waivers are in place for milk and bread. The WIC participant can now receive 2% milk, instead of 1% or skim milk, and any size of whole grain bread can be purchased, as prompted when the original sizes of milk and bread were not readily available at WIC-approved grocery stores.

The clinics themselves were rearranged to protect both employees and WIC participants. Appointments were staggered to ensure six feet of social distance, and all office desks were equipped with Plexiglas barriers. Professional cleaning occurred at least once per week at each clinic location to minimize the potential spread of COVID-19 on high-touch surfaces.

Despite the challenges presented by the COVID-19, pandemic, other major events took place. In January, WIC staff attended a state training, and began implementing a new WIC system in all clinics the following week. Since then, there have been many updates to this new system. In May, the Willoughby WIC clinic moved to the Wickliffe Family Resource Center, and in July, a Middlefield WIC clinic was added. This clinic primarily serves the presiding Amish population, and has saved families costs associated with transportation. Caseload continues to grow each month.

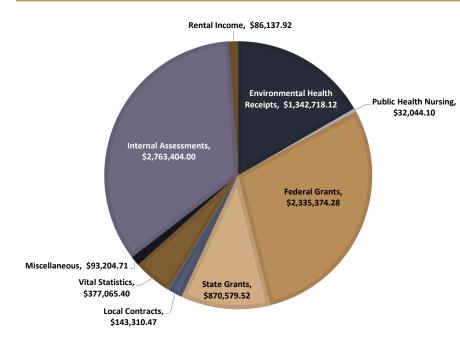
In October, chocolate milk was added to the approved WIC shopping list, followed by yogurt in November. More recently, the WIC Shopper App was updated to provide participants with their remaining benefits balance.

The Farmers' Market Nutrition Program also operated during this time in a modified capacity. While WIC distributed vouchers, WIC staff did not attend all of the markets as they have in the past. As a result, redemption rates fell to 53% in 2020, as compared to the 2019 redemption rate of 67%.



In August, Lake-Geauga WIC celebrated Breastfeeding Awareness Month. Breastfeeding Peer Helpers collected donations such as diaper bags, onesies, hand sanitizer, masks, diapers, wipes, books, and teething rings, and these items were given to all moms who gave birth during the months of August and September. Virtual raffles were also held, and prize winners received their prizes when they came in for their next WIC appointment.

Agency Financial Report



Total Revenue \$8,043,839

The largest funding sources for the Lake County General Health District in 2020 include:

- Internal Assessments (34%)
- Federal Grants (29%)
- Environmental Health Receipts (16%)

Total Expenditures \$6,982,996

Salary and fringe benefits to support the Lake County General Health District's employees represent the principal expenditure for the agency in 2020, account for more than half (65%) of total disbursements.

Other notable expenditures include:

- Office Supplies and Postage (\$66,087.43)
- Transportation and Travel (\$41,157.11)
- Returns (\$7,476.82)
- Capital Improvement (\$69,053.00)

