

Performance Measures Report - 2022 June 13, 2023

Presentation Overview



Alignment with Board Priorities



Department Strategic Goals



Select Key Performance Metrics



Significant Accomplishments



A Look Ahead





PRIORITIES

- > 1 ECONOMIC PROSPERITY
- > 2 HIGH QUALITY OF LIFE
- > 3 EXCELLENCE IN SERVICE DELIVERY
- > 4 INCLUSIVE PARTICIPATION
- > 5 EFFECTIVE COMMUNICATIONS



KCHD Mission

Serve, protect, and promote a healthy community for all.



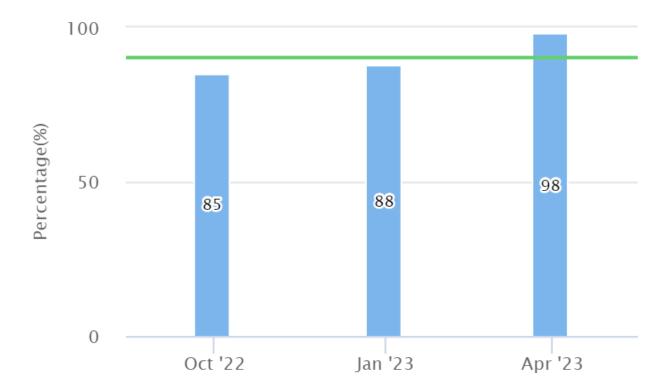
Key Performance Metrics



Strategic Plan Priority: High Quality of Life

Strategic Plan Goal: Serve, protect, and promote a healthy community for all through the prevention, detection, and treatment of illness and disease

Objective: 90% of clients with latent tuberculosis will complete antibiotic treatment





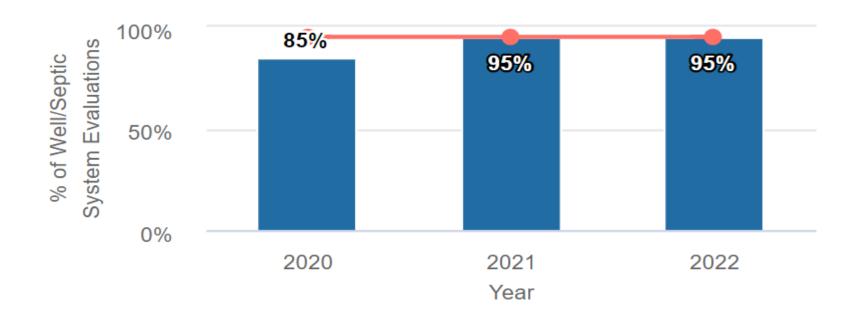
Key Performance Metrics



Strategic Plan Priority: High Quality of Life

Strategic Plan Goal: Serve, protect, and promote a healthy community for all by providing required environmental health services

Objective: Complete at least 95% of well/septic service requests within 30 days.





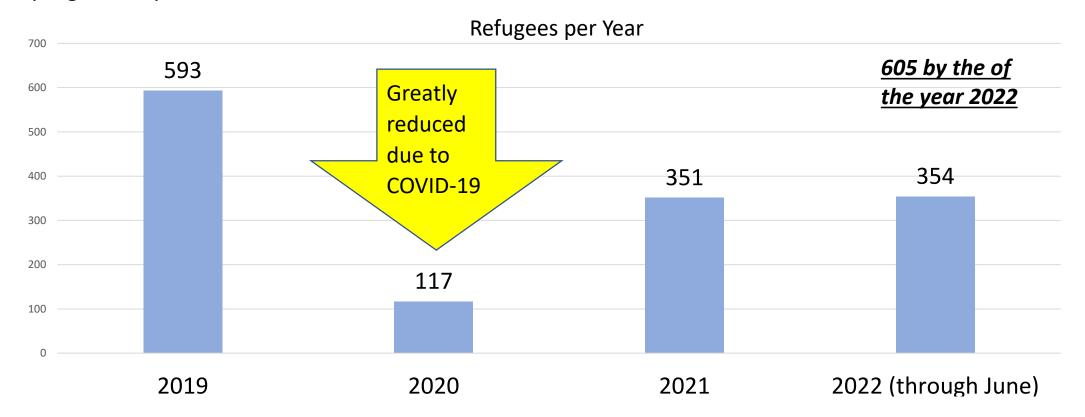
Key Performance Metrics



Strategic Plan Priority: High Quality of Life and Excellence in Service Delivery

Strategic Plan Goal: Serve, protect, and promote a healthy community for all by providing essential public health services throughout the community.

Objective: Ensure that refugees receive a health screening and care navigation according to program requirements.



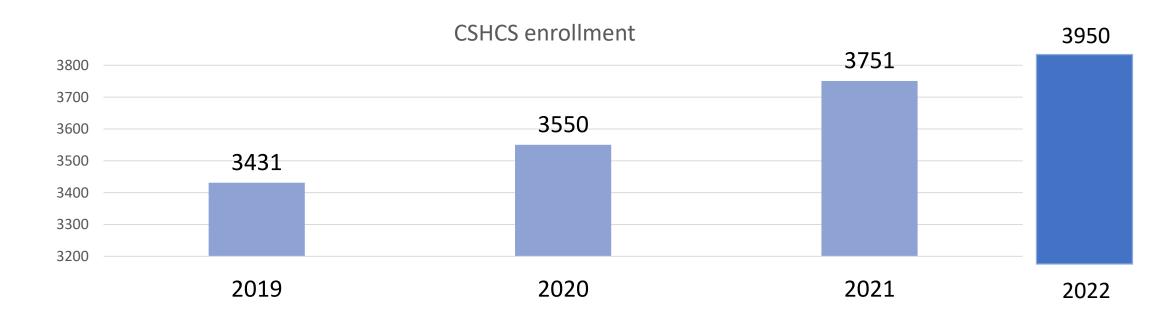




Strategic Plan Priority: High Quality of Life

Strategic Plan Goal: Serve, protect, and promote a healthy community for all by providing essential public health services throughout the community.

Objective: Increase the number of children and families participating in the Children's Special Health Care Services program.







Strategic Plan Priority: High Quality of Life and Excellent Service Delivery

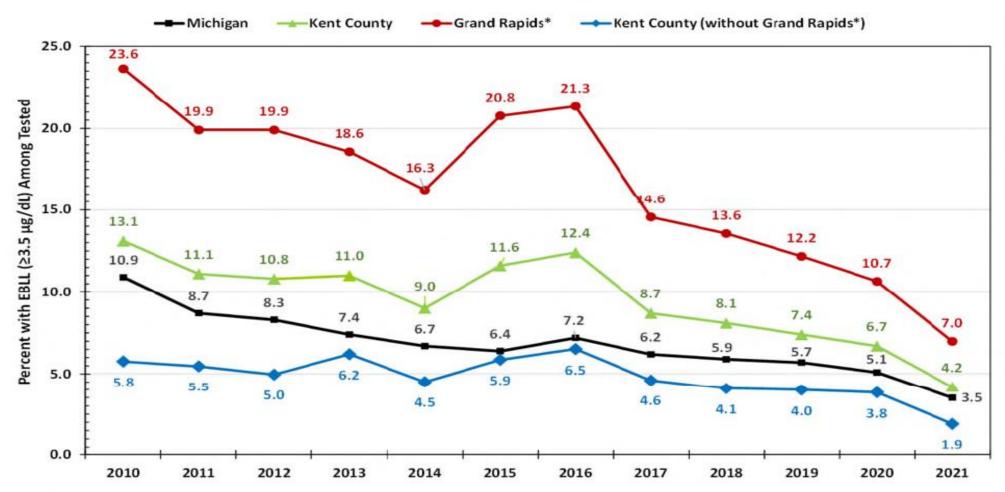
Strategic Plan Goal: Several, including new and revised measures

Objective: Various

- Approx 13,000 participating in WIC program (95% are actively participating)
- 99% of participating children received fluoride dental varnish during WIC appointments
- 25% of children in WIC program found to have low hemoglobin levels
- 78% of children (24-36 months) were fully immunized
- 151 more enrollees in PrEP HIV prevention program
- All time high of 48 schools and 158 classrooms participating in Life Skills program
- Approx 85,000 children received Hearing & Vision screenings
- Infant mortality rates and disparities continue to trend downward

Lead (EBLL in MI, KC, GR, and KC-GR)





Data source: MDHHS Data Warehouse. Data current as of 05/09/2022

^{*} Each child is represented by one test result per year. If there was more than one test per child per year, the test with the highest venous BLL was kept. If there was no venous BLL, the test with the highest capillary BLL was kept.

^{*} Grand Rapids is defined as Census Tracts 1-46 in Kent County.

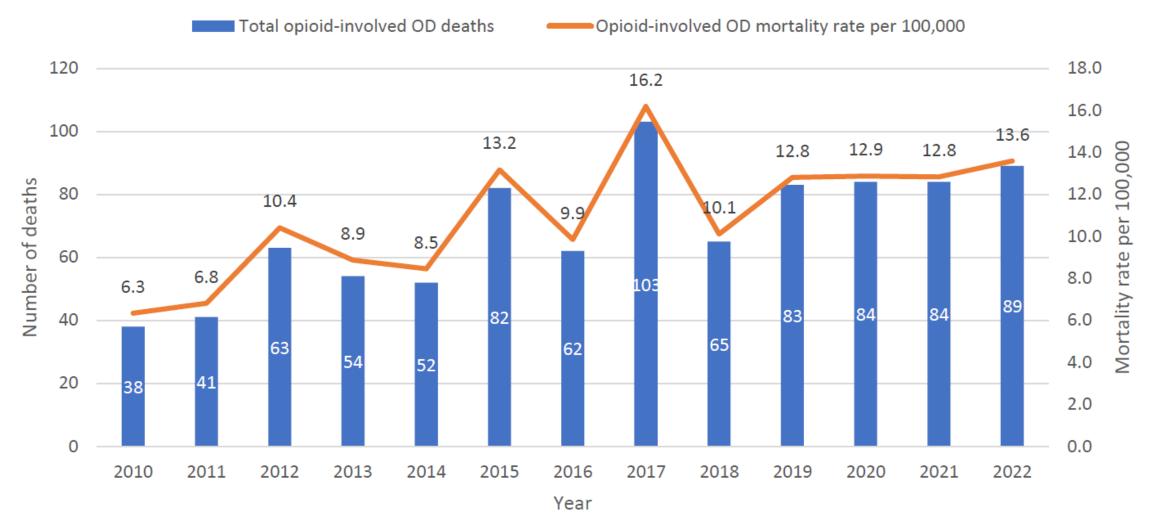
Overdose Deaths in Kent County

		KENT COUNTY RESIDENTS ¹	NON-COUNTY RESIDENTS
TOTAL DRUG OVERDOSE DEATHS		108	15
OPIOID-RELATED			
TOTAL OPIOID-RELATED DEATHS		89 (82% of all od deaths)	10 (67% of all od deaths)
AVERAGE AGE		38.9 years	39.3 years
	MEDIAN AGE	36.0 years	35.5 years
POLY-SUBSTANCE		50 (56%)	5 (50%)
SUBSTANCES INVOLVED ²	Fentanyl	81 (91%)	8 (80%)
	Heroin	4 (4%)	0 (0%)
	Rx Opioids ³	8 (9%)	3 (30%)
	Cocaine	32 (36%)	3 (30%)
	Methamphetamine	6 (7%)	0 (0%)
	Alcohol	8 (9%)	2 (20%)
COMBINATIONS WITH FENTANYL			
HEROIN & FENTANYL		4 (100% of all heroin ods include fentanyl)	0
METHAMPHETAMINE & FENTANYL		6 (75% of all meth. ods include fentanyl)	0
COCAINE & FENTANYL		32 (78% of all cocaine ods include fentanyl)	3 (60% of all cocaine ods include fentanyl)

¹Kent County residents and unknown resident status; ²Deaths by substances involved are not mutually exclusive and do not constitute an exhaustive list; often multiple drugs are identified as a related cause of death in a single case; ³Prescription opioids include codeine, hydrocodone, methadone, and morphine

Opioid-Involved Deaths in KC (total and rate)





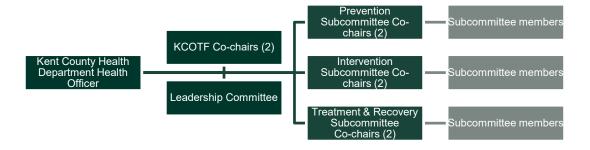
Drug Overdose Prevention





Mission: Save lives now and collaborate to prevent future opioid and substance misuse for all.

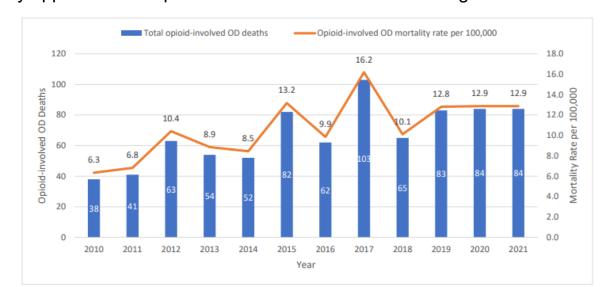
Vision: Create a community that is more resilient to the impact of opioid and substance misuse.



Kent County
COverdose Fatality
Review

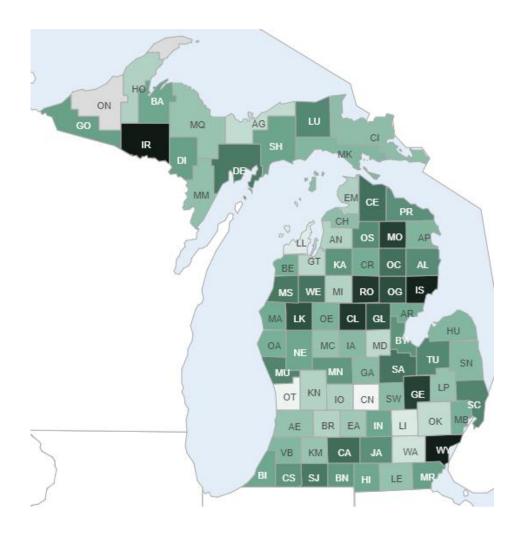
A multidisciplinary group of stakeholders tasked with reviewing individual overdose fatalities to identify opportunities to prevent similar events from occurring in the future.

accesskent.com/Health/KCOTF.htm



County Health Rankings – Kent

17th



Health Outcomes

Health outcomes represent how healthy a county is right now, in terms of length of life but quality of life as well.

Kent (KN) is ranked among the healthiest counties in Michigan (Highest 75%-100%).



Health Factors

Health Factors represent those things we can modify to improve the length and quality of life for residents.

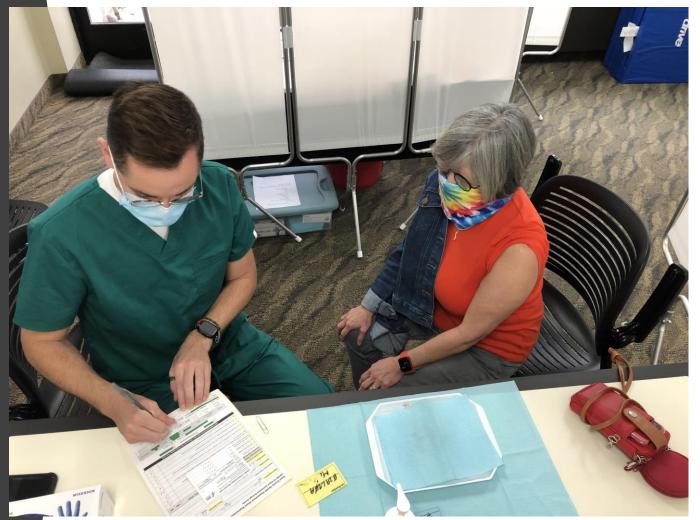
Kent (KN) is ranked among the healthiest counties in Michigan (Highest 75%-100%).



(University of Wisconsin Population Health Institute, 2023)



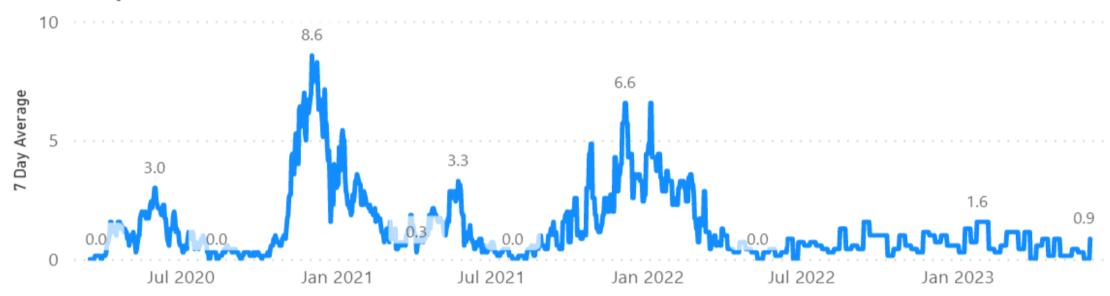
2022 Significant Accomplishments





- **9**
- 1603 Kent County Residents, 0.9 deaths/day over past couple weeks (as of 6/6/23 update)
- Kent County Mortality Rate: 239 per 100,000 of population
 - Michigan: 401/100K; USA: 341/100K

Deaths by Date



Crisis Stabilization Center "Wallbreaking"





Low Burden of Communicable Disease



Notifiable Disease Report

Kent County Health Department 700 Fuller N.E.

Grand Rapids, Michigan 49503 www.accesskent.com/health

Communicable Disease Section

Phone (616) 632-7228 Fax (616) 632-7085

December 2022

Notifiable diseases reported for Kent County residents through end of month listed above.

DISEASE	NUMBER REPORTED		MEDIAN CUMULATIVE
	This Month	Cumulative 2022	Through December 2017-2021
AIDS	1	9	10
HIV	5	40	37
CAMPYLOBACTER	6	96	104
CHICKEN POX ^a	0	2	20
CHLAMYDIA	306	3707	3860
CORONAVIRUS NOVEL, COVID-19	2480	57293	NA
CRYPTOSPORIDIOSIS	1	27	19
Shiga Toxin Producing E. Coli	0	45	20
GIARDIASIS	1	21	28
GONORRHEA	99	1344	1358
H. INFLUENZAE DISEASE, INV	2	6	9
HEPATITIS A	0	2	2
HEPATITIS B (Acute)	0	2	0
HEPATITIS C (Acute)	0	0	4
HEPATITIS C (Chronic/Unknown)	0	135	196
INFLUENZA-LIKE ILLNESS ^b	4248 ^d	16603 ^d	39755
LEGIONELLOSIS	0	21	18

DISEASE	NUMBE This Month	R REPORTED Cumulative 2022	MEDIAN CUMULATIVE Through December 2017-2021
LYME DISEASE	0	28	13
MENINGITIS, ASEPTIC	0	12	11
MENINGITIS, BACTERIAL, OTHER ^c	0	9	11
MENINGOCOCCAL DISEASE, INV	0	0	0
M. POX	0	14	NA
MUMPS	0	0	0
PERTUSSIS	0	0	6
SALMONELLOSIS	2	64	66
SHIGELLOSIS	2	14	16
STREP, GRP A, INV	0	39	20
STREP PNEUMO, INV	0	42	49
SYPHILIS (Congenital)	0	1	0
SYPHILIS (Primary & Secondary)	4	50	34
TUBERCULOSIS	1	9	12
WEST NILE VIRUS	0	0	1

NOTIFIABLE DISEASES OF LOW FREQUENCY

DISEASE	NUMBER REPORTED Cumulative 2022	DISEASE	NUMBER REPORTED Cumulative 2022
CARBAPENEMASE PRODUCING CRE	2	MALARIA	5
CYCLOSPORIASIS	1	MULTISYSTEM INFLAMMATORY SYNDROME	6
GUILLAIN-BARRE SYNDROME	0	SHINGLES	84
HISTOPLASMOSIS	15	STREPTOCOCCAL TOXIC SHOCK	0
KAWASKI SYNDROME	1	TOXIC SHOCK	0
LISTERIOSIS	0	VIBRIOSIS-NON CHOLERA	2



A Look Ahead

- 1. Doing more to stay ahead of lead
 - 2. Food Safety Excellence Initiative
 - 3. Refugee Health Center
- 4. Community Health Needs Assessment

Community Health Improvement



Community Health Needs Assessment (CHNA)

A method of collecting and analyzing data to understand the health-related needs of a given community.



A strategic plan to respond to the priorities identified through a CHNA. Includes goals and strategies to improve outcomes and is implemented over a 3- to 5-year timeframe.











Community-Identified Priorities (2020)

- Access to Health Care
- Discrimination and Racial Inequity
- Economic Security
- Mental Health



THANK YOU!



