

# Public Health

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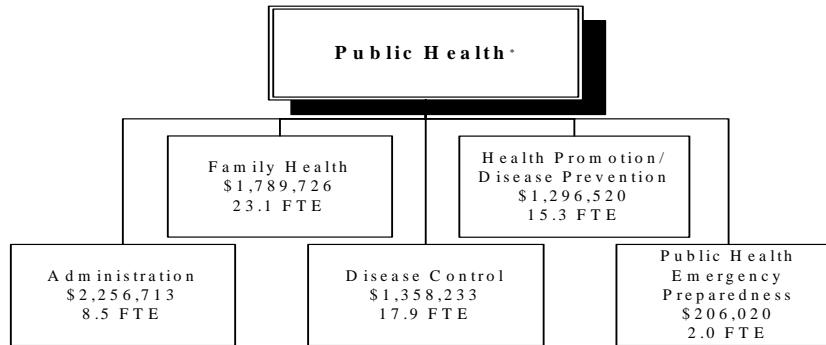
## Our Mission

To assure, in partnership with the community, the conditions necessary for people to live healthy lives through prevention and protection programs

## Our Vision

A healthy community in which every resident enjoys the best possible state of health and well being.

## How We Are Structured:



\* Does not include 3.0 FTE leased to the Washtenaw Health Plan.

## Public Health Services We Provide (Programs)

### **Health Promotion / Disease Prevention**

To promote healthier lives for individuals, groups, and the community at large through education, integrated with advocacy, community mobilization and policy initiatives

### **Public Health Emergency Preparedness**

Assure that Washtenaw County Public Health is fully prepared to respond, in a timely and comprehensive manner, to any public health emergency

### **Family Health**

To promote equality of health for all county residents while respecting their dignity and cultural diversity

### **Disease Control**

Services to protect the community from communicable and environmental threats

### **Administration**

To facilitate access to the resources necessary to enable the delivery of public health services to our communities

# Public Health

## What We Do .....➔

(Process/Activities)

### Administration

Contract Management

Medical Direction

Medical Examiner

### Disease Control

Communicable Disease

Immunization

### Family Health

Children's Special Health Care Services (CSHCS)

Hearing/Vision Screening

Maternal and Infant Support Services (MSS/ISS)

Women, Infants, and Children Program

### Health Promotion / Disease Prevention

Build community infrastructure to support Health Promotion policy development

Health Improvement Plan

### Public Health Emergency Preparedness

All Hazards Preparedness Plan Approval

Bioterrorism Preparedness plan approval

## What We Produce .....➔

(Outputs)

Contracts executed adhering to procurement policy and procedure

Achievement of Medical Directors work plan objectives

Review of all unexplained deaths

Promoting community-wide surveillance, treatment and reporting

Promote county-wide immunizations, surveillance, and reporting

Coordination of services for children with special health needs

Number of referrals made per number of screens performed

Maximize allowable visits for each client

Customer participation based on total caseload

Participate on community boards and advisory groups

Number of community presentations and community projects initiated

All Hazards Preparedness plan

Bioterrorism Preparedness plan

## How Efficient Are We

(Process Measures)

Measurement	2004 Actual	2005 Projected	2006 Target	2007 Target
WIC participation rate	106%	106%	97%	97%
Plan approval	100%	100%	100%	100%
Percentage of contracts executed on time	100%	100%	100%	100%
Percent of cases referred to the medical examiner	100%	100%	100%	100%
Number of cases provided care coordination services	148	75	75	75
Internal HIP data collection tools	22	20	20	20
Immunization: Percentage of children 19-35 months, surveillance, and reporting	70%	75%	75%	80%
Average number of visits per client	2.5	3.5	4	4.5

**Who We Serve** .....➔  
(Customers)

Washtenaw County residents

**What We Are Accomplishing**  
(Outcomes)

**Administration**

Provide department with resources required to deliver public health services to the community

**Disease Control**

To screen for disease and/or prevent the spread of tuberculosis infection

**Family Health**

To reduce fetal/infant mortality within Washtenaw County

**Health Promotion / Disease Prevention**

Participation in regular physical activity

**Public Health Emergency Preparedness**

Public Health Emergency Plans completed and functional

**Who We Work With**

(Partners)

- Community Leaders
- County Finance Department
- HIP staff
- Human Service Agencies
- Huron Valley Ambulance
- Local medical and school providers
- Michigan Department of Community Health
- Public and private schools
- Washtenaw Community Health Organization
- Washtenaw Health Plan

**How Effective Are We**

(Program Measures)

Measurement	2004 Actual	2005 Projected	2006 Target	2007 Target
Workplan objectives met	100%	100%	100%	100%
Number of individuals screened and/or treated for tuberculosis infection	1247	1000	1000	1000
Increase the number of residents participating in regular physical activity	25%	30%	35%	40%
Fetal/infant mortality rates	6%	6%	6%	6%

# Public Health

POSITION TYPE	No. POSITIONS	No. POSITIONS	No. POSITIONS	No. POSITIONS
	1-1-2004	1-1-2005	1-1-2006	1-1-2007
MANAGERIAL	9.00	9.00	9.00	9.00
PROFESSIONAL	40.06	40.06	39.00	39.00
SUPPORT	18.80	18.80	18.80	18.80
<b>Total</b>	<b>67.86</b>	<b>67.86</b>	<b>66.80</b>	<b>66.80</b>

EXPENDITURES	2004 Actuals	2005 Adopted	2006 Requested	2006 Adopted	2007 Adopted
Personal Services	4,341,726	4,781,107	4,974,998	4,974,998	5,449,195
Supplies	192,328	192,036	195,495	195,495	195,495
Other Services	1,548,086	1,045,849	1,182,416	1,182,416	1,182,416
Internal Service Charge	851,132	856,071	855,471	855,471	855,471
Capital Outlay	0	11,500	7,742	7,742	7,742
Transfers Out	0	5,969	0	0	0
<b>Total</b>	<b>\$6,933,272</b>	<b>\$6,892,532</b>	<b>\$7,216,122</b>	<b>\$7,216,122</b>	<b>\$7,690,319</b>

## VARIANCE ANALYSIS

Personal Services: Increases in salary and fringes reflect labor contract agreements and estimated fringe rates for 2006 and 2007.

Internal Service Charges: Change due to allocation of indirect cost recalculation on annual basis.

## EXPENDITURES

