Mohave County Department of Public Health



Fiscal Year 2022



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### **Vision**

Healthy people in healthy communities.

### Mission

To promote, protect, and improve the health of our communities.

### **Agency Values**

- Service: Protect, prevent, and promote healthy outcomes.
- **Quality:** Inspire and increase desired healthy outcomes and conditions within our population.
- *Integrity:* Serve with the highest possible standards and values when making public health decisions.
- Fiscal Responsibility: Work toward relieving the financial burden on communicable diseases while educating our community for better health outcomes.
- Timeliness: Provide rapid response to emerging health concerns to mitigate or contain these issues and deliver prompt attention to client needs.
- Professionalism: Conduct all tasks with skill and competence and strict adherence to courtesy, honesty, and responsibility.
- Teamwork: Work side-by-side with internal program staff, community partners, and community members to improve health outcomes.
- Resourcefulness: Commitment to creative, innovative, and versatile problem-solving to effect positive change when addressing health issues.
- **Development:** Recognition of our staff as our greatest asset.

### **Strategic Goals**

- 1. Improve Health Outcomes
- 2. Improve Maternal and Child Health Outcomes
- 3. Increase the Presence of Public Health in the Community
- 4. Maximize Tools and Resources
- 5. Promote and Protect Public Health



# Department Organization & Board of Health

# DIRECTOR Denise Burley ASSISTANT DIRECTOR Melissa Palmer

**ADMINISTRATION** 

Budget and Grant Supervisor - 1

Office Specialist - 3

Special Programs Analyst - 1

Paraprofessional Temp -1

Professional Temp - 1

**PUBLIC HEALTH EMERGENCY RESPONSE** 

**PROGRAM** 

Scott Wright - Program Coordinator

Epidemiologist - 1

**PUBLIC HEALTH NURSING** 

Lynne Valentine - Manager

Clerical Temp - 1

Community Health Education Specialist I - 4

Community Health Education Specialist II - 2

Public Health Specialist - 1

Nursing Supervisor - 3

Office Assistant - 3

Office Assistant Sr. - 1

Professional Temp - 1

Public Health Nurse, RN - 4

Office Specialist - 2

Paraprofessional Temp - 1

**ENVIRONMENTAL HEALTH** 

Ron Balsamo - Manager

Environmental Health Specialist I/II - 11

Professional Temp - 1

Permit Technician - 3

Office Specialist- 1

**NUTRITION & HEALTH PROMOTION** 

Tiera Morrison - Manager

Community Health Education Spec Sr - 1

Community Health Education Spec I - 7

Community Health Education Spec II - 1

Community Nutrition Specialist Sr - 1

Community Nutrition Specialist II - 1

Eligibility Technician - 8

Office Specialist - 1

Office Assistant Senior - 1

Professional Temp - 1

Senior Programs Coordinator - 1

Cook - 1

Prep Cook - 1

Senior Programs Assistant - 4

Site Coordinator – 2

Professional Temp - 4

\*All counts represent number of positions budgeted, not FTE count\*

### **Board of Health**

Supervisor Jean Bishop - BOS Dr. Dat Nguyen - Physician Hunter Adams - District 1

Vacant - District 2 Vacant - District 3 Vacant - District 4

Nancy Mongeau & Sandra Thomas - District 5 Cal Sheehy, Mayor, Lake Havasu City

Allyson Fair Marlie Lucas

## **Programs & Budget**

### **Public Health Programs**

Accreditation

Arizona Health Zone

**Breastfeeding Peer Counselor Program** 

Child Fatality Review

Family Planning

Food Safety & Sanitation

Health in Arizona Policy Initiative (HAPI)

**Health Start** 

High-Risk Perinatal Program (HRPP)

**HIV Prevention** 

**Immunization Program** 

Mental Health Resource Team (MHRT)

**Nuisance Prevention & Control** 

Occupational Health

Overdose Data to Action (OD2A)

Public Health Emergency Preparedness (PHEP)

Senior Programs

Smoke-Free Arizona

**Tobacco Prevention** 

**Tuberculosis Program** 

**Total Expenditures** 

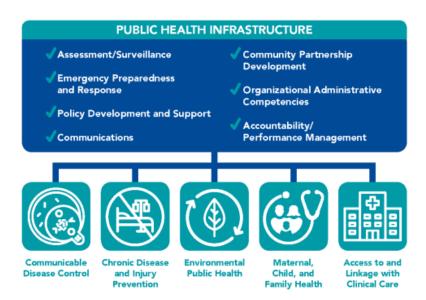
Vital Records

Women, Infant, & Children Supplemental Food Program

### Budget: July 1, 2021 - June 30, 2022

\$ 1,685,250
\$ 1,607,966
\$ 684,944
\$ 998,092
\$ 41,338
\$ 5,574
\$ 5,023,164
\$ 4,664,029
\$ 708,511
\$ 1,764,512
\$ 118,258
\$ \$ \$ \$ \$

7,255,310



Health departments provide public health protections in a number of areas, including: preventing the spread of communicable disease; ensuring food, air, and water quality are safe; supporting maternal and child health; improving access to clinic care services; and preventing chronic disease and injury. The infrastructure needed to provide these protections includes foundational capabilities and foundational areas.

Public health infrastructure consists of seven foundational capabilities, which are the skills and capacities needed to support basic public health protections and other programs and activities that are key to ensuring the community's health.

Public health programs, or foundational areas, are those basic public health, topic-specific programs that are aimed at improving the health of the community affected by certain diseases or public health threats.

Local protections and services unique to a community's needs are those determined to be critical significance to the community's health and are supported by the public health infrastructure and programs and funded through a variety or sources.

# **Mohave County Demographic Data**

### **Mohave County Population Overview**



Total Population T 220,816



Median Household Income T 53,592



Bachelor's Degree or Higher 15.1%



Employment Rate T 41.5%



Total Employers ↑ 4,108



Without Health Care Coverage ↓ 9.07%



Hispanic or Latino (of any race) 1 36,200



Total Housing Units T 120, 843



Total Households T 99,512

### **Kingman City**



**Total Population** 34,918

Median Household Income \$56,360



Bachelor's Degree or Higher



**Employment Rate** 45.8%



Total Housing Units 14,135



Without Health Care Coverage 5.8%



### **Bullhead City**







Bachelor's Degree or Higher



Employment Rate 48.5%



Total Housing Units 39,815



Without Health Care Coverage 7.9%



18,788

### Lake Havasu City



Total Population 58,926



Median Household Income \$64,027



Bachelor's Degree or Higher 18.6%



**Employment Rate** 21.5



Total Housing Units 26,711

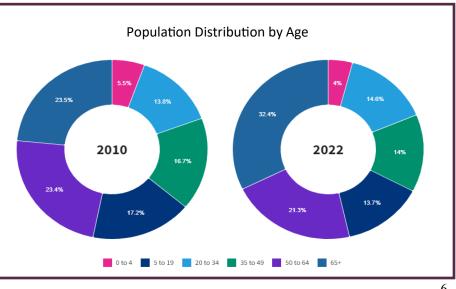


Total Households 26,711

### How has the distribution of the population by age changed in **Mohave County?**

The portion of the population ages 0 to 4 years old decreased from 5.5% in 2010 to 4% in 2022.

The portion of the population ages 65 and older increased from 23.5% in 2010 to 32.4% in 2022.



### Socioeconomic & Health Indicators

37%

Ratio of Income to Poverty Level: 200% and Under - Low Income Population Mohave County, AZ **17%** 

Percent of Population Below Poverty Level Mohave County, AZ

### **Poverty by Age in Mohave County**

Under 18 years - 23.7%

18 to 64 years - 18.7%

65 years and over - 11%



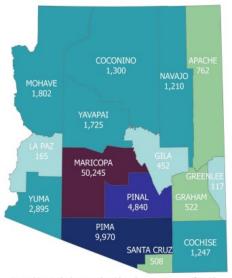
Chart Survey/Program: 2020 ACS 5-Year Estimates Data Profiles

### Income & Poverty

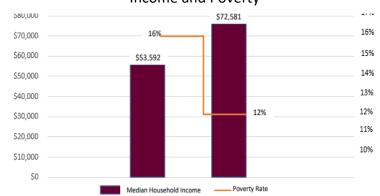
Mohave County has a disproportionately high number of people experiencing **poverty** compared to the state of Arizona. The median household income for county residents is relatedly lower at \$53,592 than for the state of Arizona at \$72,581.

#### **Birth Rates**

Birth rates are a primary health indicator and reflective a community's living standards, opportunities, and economic and social factors. During 2022, there were **1,802 births** in Mohave County. Births to unmarried mothers accounted for **976 births**, or approximately 54%. Teen women age 19 or younger accounted for **112 births**, with a 3% decrease from prior years.

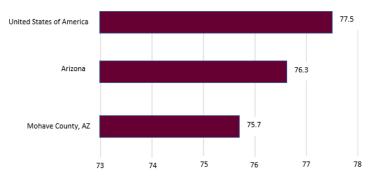


### Income and Poverty



### Life Expectancy at Birth

Life Expectancy at Birth

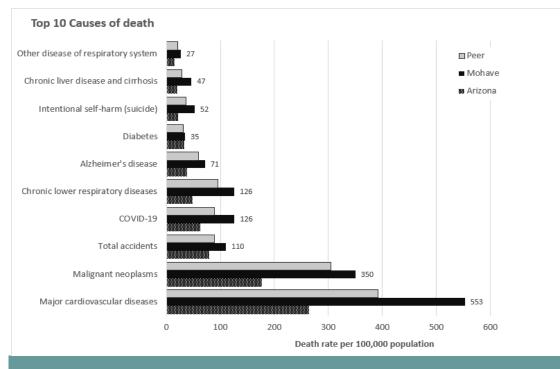


### Life Expectancy

According to Harvard Medical, COVID-19, drug overdoses, and accidental injury accounted for approximately two-thirds of the decline in life expectancy in the United States. Mohave County is no exception with these factors, along with chronic disease and cancer, contributing to a shortened lifespan.

## **Patterns in Mortality**

Top ten causes of death in Mohave County compared to Arizona and a peer county. Death rates per 100,000 people. (Source: Arizona Department of Health Services, 2022)



Of the 10 leading causes of death in Mohave County, two have an increasing trend in recent years: death from self-harm and interpersonal violence and deaths from mental health and substance use disorders.

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Rank	20-44 year	45-64 year	65+ year
1	Accident (unintentional injury) 95	Malignant Neoplasms 157	Diseases of the Heart 896
2	Intentional Self-Harm (suicide) 26	Diseases of the Heart 124	Malignant Neoplasms 721
3	Motor Vehicle Accidents 24	Accident (unintentional injury) 93	Chronic Lower Respiratory Diseases 232
4	Malignant Neoplasms 13	Accident (other) 71	Cerebrovascular Diseases 211
5	Assault 12	Chronic Liver Disease & Cirrhosis 49	Alzheimer's Disease 2,010
Total, all causes	262	932	4,304

### **Community Health Needs Assessment**

The 2022 Mohave County Community Health Needs Assessment was completed as part of the *Live Well Mohave* project, a community-driven health improvement initiative. The purpose of this assessment is to provide information that community members can use to help them assess health needs in the community.

In collaboration with Kingman Regional Medical Center (KRMC), the county's only non-profit hospital, information is gathered from a survey (quantitative) in conjunction with community focus groups (qualitative). Community members then use the information gathered to identify health priorities.

A total of 337 residents of Mohave County answered the survey in the spring of 2021. Listed below are the health priorities residents identified during the focus groups for their city.

### Kingman

**Goal 1:** *Mental Health* - Reduce mental health stigma among community members, and decrease the number of suicide-related deaths in Mohave County.

**Goal 2:** *Substance Abuse* - Decrease reported substance use disorders by youth, reduce opioid related overdose deaths, and reduce number of substance-related ER admissions.

**Goal 3:** *Healthy Living* - Increase the self-reported levels of physical activity of Kingman residents, reduce food insecurity, and improve access to healthy food choices.

#### **Bullhead**

**Goal 1:** Substance Use - Reduce the use of alcohol and all drugs by 10%, continue increase of substance disorder treatments centers in BHC.

**Goal 2:** *Healthy Living* - Reduce number of BHC residents who report being physically inactive and reduce food insecurity.

**Goal 3:** *Teen Pregnancy Prevention* - Increase number of schools participating in Teen Pregnancy Prevention Program and reduce teen birth rate.

### Lake Havasu

**Goal 1:** *Mental Health* - Increase recruitment and retention of mental health professionals serving the LHC area and increase capacity of existing social service agencies and providers.

**Goal 2:** Substance Use Disorders - Decrease reported substance abuse among youth and increase access to and utilization of substance use treatment services.

**Goal 3:** Access to Health Care and Social Services - Increase access to quality health care and social services.

## **Strategic Planning**

The Mohave County Department of Public Health (MCDPH) Strategic Plan is a living document that assists with prioritization of health concerns facing the community. The plan gives a clear direction on what the health department will achieve, how it will achieve it, and how success will be measured. During FY22, staff continued to work on incorporating specific, measurable, achievable, realistic, and timely (SMART) objectives, strategies and activities into programs to address each of the five goals in the Strategic Plan.



### MCDPH Strategic Workgroup

The MCDPH Strategic Workgroup is comprised of employees who work on employee or administration identified department projects. The dedicated project is focused around condensing all of the county-resource guides published by several partners, compiling the list into an excel spreadsheet, and verifying each available resource. The spreadsheet is edited and updated to reflect additional resources and remove those that are no longer available. It is then published on the county website for public use. This undertaking occurred over several months and directly included five staff.

## **Quality Improvement**

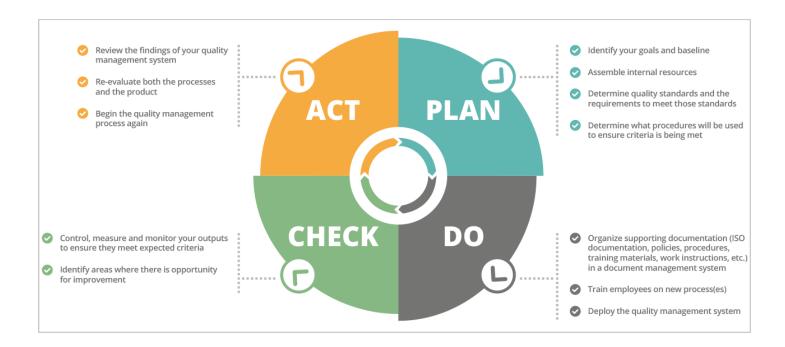
All MCDPH employees are expected to engage in continuous quality improvement (QI) as part of their employment with the MCDPH and are evaluated on their participation in their yearly performance evaluation. This includes participating on the QI committee that reviews and revises the department's QI process and training plan.

Staff can volunteer to participate on the QI committee which is composed of MCDPH staff representing each of the six divisions within the public health department. This group assists the QI coordinator in implementing, maintaining, and evaluating QI efforts, and assists the QI coordinator with updating the QI process and training plans.

The QI coordinator leads, supports, and guides all QI work within the public health department. The QI coordinator also develops the annual QI plan with input from the QI committee, ensuring that the QI plan is in line with PHAB (Re)Accreditation requirements, our Strategic Plan, and our Mission, Vision, and Values. The QI committee work is supported on all levels, from the health director, division managers, and program leads.

The QI plan is evaluated and revised annually to reflect program enhancements, revisions, and updated quality improvement goals. The revised plans are reviewed and approved by the QI Coordinator, the Health Director, and Assistant Health Director. Once new plans or training have been approved by leadership, they are shared across the Public Health Department with all employees and placed on a Health Share drive for easy access. Employees are expected to read all new plans and to participate in new trainings as they become available. Newly revised plans are also reflected in our Workforce Development and Strategic Plans which are also updated yearly.

The Plan, Do, Check, Act (PDCA) model is typically utilized when conducting QI projects.



### **Public Health Emergency Preparedness**

The Public Health Emergency Preparedness (PHEP) program works with hospitals, long term care facilities, and urgent care facilities to prepare for and respond to public health threats and emergencies. The Emergency Response Team (ERT) plans and implements programs to rapidly detect, investigate and control threats that may endanger the health of the public, working with the Arizona Department of Health Services and other county health departments. PHEP is grant funded by the Arizona Department of Health Services (ADHS), which receives funds from the Center for Decease Control (CDC). PHEP performs disease surveillance and public health emergency preparedness activities such as building partnerships with other public health and medical care partners, local emergency management divisions, law enforcement, fire departments, school districts, Indian tribes, and other partners in preparedness activities. These partnership opportunities may include plan development or updating, exercises and training opportunities, and responding to incidents, events, or emergencies.

### Training, Exercises, and Response

Conducting and participating in exercises is an important part of the ongoing preparedness activities. Training and exercises are an effective and cost-efficient way to validate the emergency plans, identify areas for improvement, and get feedback from the people who will be executing the plans.

The April 2022 Mohave County Department of Public Health (MCDPH) participated in the Arizona Coalition for Healthcare Emergency Response's (AzCHER) "Jumanji in July" statewide full scale exercise. The PHEP team was a member of the planning committee that help create the exercise program for the entire state as well as for the exercise program specific to Mohave County. The exercise lasted for three hours and was limited to the ERT response to the follow scenario: A severe monsoon weather event throughout Arizona that followed an abnormally hot summer, an active wildfire season, and vulnerabilities to flooding, power outages, dangerous roadways, ongoing COVID-19 pandemic, cybersecurity concerns, and civil unrest. During the course of the exercise, operational coordination, responder safety and health, medical material management and distribution, information sharing, and emergency operations coordination we tested. The exercise resulted in the improvement of several MCDPH plans and a specific PHEP familiarization training program as part of new employee orientation.

The COVID 19 response continued through fiscal year 2022. Over the course of the response, the county had a reported **51,519** cases and **1,212** deaths. COVID-19 was found in all areas of the county, affecting all age groups. The average age of those infected was **44.8** and average age of a death was **72**. These numbers are current as of March 30, 2022 which is the day that Arizona Governor Doug Ducey signed the Termination of Emergency "COVID-19" order.

### Medical Reserve Corps (MRC)

The Medical Reserve Corps (MRC) is a national network of volunteers, organized locally to improve the health and safety of their communities utilizing medical and non-medical volunteers. Volunteers prepare for and respond to emergencies affecting public health and promote healthy lives. They received training in disaster response, first aid, CPR, and disaster mental health. Volunteers worked to receive and distribute items in response to COVID-19. Volunteers supported community preparedness events throughout the Mohave County.

### **Environmental Health**

The Environmental Health Division (EHD) administers two primary programs for the purpose of reducing the risk of injury, illness, and disease related to environmental factors. These programs operate under delegation from the State of Arizona. One delegation agreement is held with the Arizona Department of Health Services (ADHS) and a second with the Arizona Department of Environmental Quality (ADEQ). These agreements outline the duties of the local health department and give the county authority to carry out the assigned functions. These functions include licensure and inspection of designated establishments and public places and investigation and of remediation of public health nuisances, whether public or private.

EHD program services are conducted or directly overseen by Environmental Health Specialists. An Environmental Health Specialist (EHS) is required to be registered with the State of Arizona as a Sanitarian through passing a written exam or by reciprocity with another state. To be eligible for the exam, an individual must have a minimum of 30 college credits in natural sciences or 5-years of experience as a Sanitarian Aide. An EHS must complete at least 12 hours of continuing education and renew their registration each year. Sanitarian registration and renewal processes are overseen by the Arizona Sanitarians' Council.

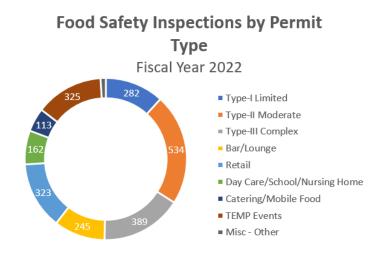
### **Food Safety & Sanitation Program**

### **Food Safety**

The Food Safety program is aligned with the U.S. Food and Drug Administration's (FDA) Food Code and as adopted by the State of Arizona and Mohave County. The FDA updates the Food Code every four years with

the most recent update in 2017. ADHS adopted the Food Code in 2019 though the county is still working under the 2009 Food Code. Industry best practices, such as those in the Voluntary National Retail Program Standards, are used to reduce the risk of illness or injury from foodborne pathogens and chemical or physical contaminants.

The EHD licenses and inspects establishments or operators selling or serving food to the public. The EHS works with the food establishment or operator to address the primary risk factors of proper food temperatures and storage, approved food sources, sanitary equipment and tools, and employee health and hygiene.



While inspections are not scheduled, they occur at regular intervals based upon their risk category. Establishments with moderate to complex processes or those serving highly susceptible populations receive two or more inspections per year. Establishments with limited processes, retail stores, bars and lounges, and temporary event vendors receive one inspection per year.

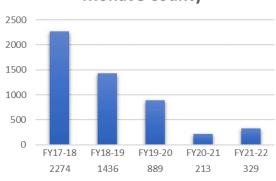
In FY22, the EHD issued **1,623 food licenses** and conducted a combined **2,200 regular inspections**, **166 follow-up inspections**, and **32 complaint investigations**. Regular inspections include opening inspections and those minimally required according to risk category, as described above. Follow-up inspections are conducted when an establishment has critical violations that cannot be corrected at the time of inspection but do not impose an imminent threat to health or safety. The timeframe for correction is dependent on the violation. Complaint investigations are conducted when a consumer reports conditions that may pose a

health risk from foodborne pathogens or other contaminants and may only be performed for establishments or operators permitted by the county. Investigation activities are limited to only those potential issues identified by the complainant and generally only for those areas not accessible to the public.

Regular inspections have seen a significant decline from previous years and is reflective of economic downturn and short-staffing within the division. Complaint investigations also decreased substantially beginning in 2020 and may be attributed to not accepting anonymous complaints.



## Food Handler Cards Issued by Mohave County



### **Food Handler Cards**

Any person preparing or serving food to the public must possess a valid food handler card or certificate from an accredited training provider. The EHD offers in-person classes once a month at each office location and provides special sessions at Lee Williams and Kingman High Schools annually. Beginning in 2020, online food handler training programs became an approved method of certification. FY22 saw a slight rebound over FY21 in county issued food handler cards but is not expected increase significantly in the coming years.

### **Sanitation**

Public Health sanitation services are administered ensure sanitary conditions of designated establishments, operators, and spaces available to the public. Sanitation involves the management of waste and pests to reduce the risk of exposure to pathogens harmful to human health.

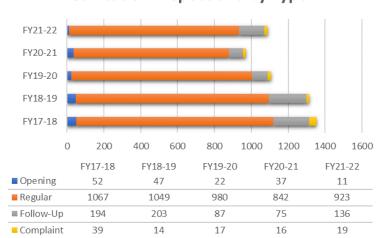
Inspections are not scheduled and occur at regular intervals depending upon their risk category. Lodging and accommodations, pet kennels and groomers, and waste pumpers and haulers are inspected annually. School buildings are inspected twice annually during each school year. Semipublic pools/spas, such as those as part of a lodging facility, are inspected once per year while public pools/spas are inspected each month in operation.

# Sanitation Inspections by Permit Type





### Sanitation Inspections by Type



In FY22, the EHD issued **786 licenses** and conducted a combined **1,070 inspections** and **19 complaint investigations**. Regular inspections include opening inspections and those minimally required according to risk category, as previously described. Like food establishments, follow-up inspections are conducted when an establishment or operator has violations that cannot be corrected at the time of inspection.

Complaint investigations are conducted when a consumer reports conditions that may pose a health risk from pathogens or other contaminants and may only be performed for establishments or operators permitted by the county. Investigation activities are limited to only those potential issues identified by the complainant. Trending in FY22 is similar to that for Food Safety with fewer opening and regular inspections and complaint investigations, though to a lesser degree.

### **Nuisance Program**

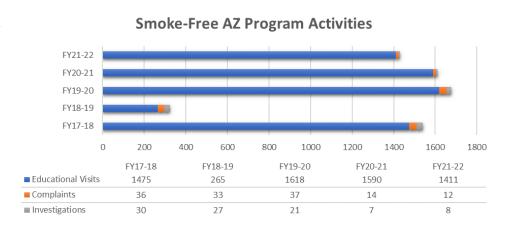
The nuisance program is conducted to reduce the risk of injury and illness from environmental nuisances. Environmental

nuisances are described as conditions of land, water, or air that threaten or cause harm to the health of persons or environment. The three primary components to this program are the Smoke-Free Arizona Act, nuisance investigation, and mosquito surveillance and prevention.

#### **Smoke-Free Arizona**

The Smoke-Free Arizona Act (the Act) was passed under Proposition 201 by the voters of Arizona in November 2006. The Act prohibits smoking inside and within 20 feet of entrances, open windows, and ventilation systems of an establishment open to the public or as a place of employment. The EHD pro-

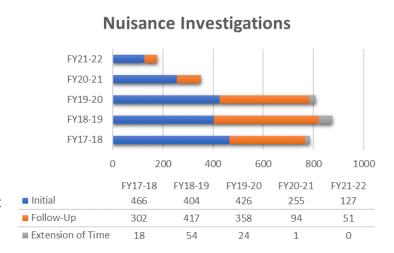
vides educational visits to businesses and conducts complaint investigations of potential smoking violations. Educational visits occur as part of regular inspections of county permitted business and as courtesy visits to establishments not permitted by the EHD.



During FY22 the EHD conducted **1,411 educational visits** and received **12 complaints**. Of the 12 complaints received, four were for vaping and outside the parameters of the Act. Eight complaints were investigated with two showing evidence of violation. The two establishments corrected the violations at time of investigation and the complaints were closed without further action.

### **Nuisance Investigation**

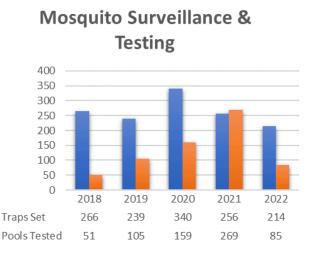
The nuisance investigation component of this program is complaint driven. Unlike complaint investigations under the Food Safety & Sanitation Program, nuisance complaints under this program may be conducted for any public or private property within the county. The focus of this program is on conditions that provide harborage or sustenance for vectors or pests. Vectors are organisms that can transmit infectious disease where pests do not transmit disease but may cause serious injury or trigger illness. Vectors and pests of primary concern under this program include rodents, pigeons, mosquitos, flies, and feral bees.



In FY22, the EHD conducted **127 complaint investigations** with 51 complaints deemed to be valid. When a complaint investigation confirms a violation, a Notice of Violation (NOV) is issued and a follow-up investigation conducted within 15-days. In most instances, the respondent is able to ameliorate the condition of concern and the complaint is closed. On rare occasion, the condition is not able to be remediated and the EHD must coordinate abatement. No abatements were conducted during FY22. The decline across categories in FY22 from previous years is due to the re-assignment of certain environmental nuisances to Development Services' Environmental Quality Division in 2020.

### **Mosquito Surveillance**

The EHD conducts routine and complaint driven surveillance of mosquito populations in the county. The objectives of mosquito surveillance are to determine abundance and species. Abundance helps determine whether adulticide should be applied and follows the threshold set be the Centers for Disease Control and Prevention (CDC), currently at a collection of 1,000 or more mosquitos per trap. In the 2022 mosquito season, from April to October, fogging was conducted five times in the Mohave Valley area.



Since not all mosquito species carry disease, and only females bite, identifying the species allows for female species of concern to be tested for diseases such as West Nile, St. Louis Encephalitis, Chikungunya, Zika, and yellow fever. The EHD has only the capability to test for West Nile Virus, other species of concern are sent to the ADHS State Laboratory.

### **Nutrition and Health Promotion**

The Nutrition and Health Promotion Division administers a variety of grant-funded nutrition and health education programs intended to reduce the incidence of chronic disease and improve health outcomes for program participants and those receiving services.

### Arizona Health Zone (AZHZ)

Arizona Health Zone strives to improve the health of the community through a combination of education and policy, systems, and environmental changes related to nutrition and physical activity. Good nutrition and physical activity are protective factors against many of the more prevalent diseases that adversely impact the health of Mohave County residents such as obesity, diabetes, and heart disease. Notable program efforts for FY22 include partnering with Mohave County Parks and Recreation Department to design and install trail signs at Neal Butler and Veteran's Park. The signs promote physical activity with a health message and the length of the walking and biking tracks around the parks. Mohave Valley Elementary School District was also supported with the Arizona Department of Education's 1801 Grant. As part of the grant requirements, AZHZ supported the school through revisions of their local wellness policy and the formation of their first wellness committee. Several school gardens were supported with technical assistance, resources, staff training, and student education. Community gardening was facilitated through a Seed-to-Supper curriculum series in the tri-cities and virtually. Finally, staff supported the nutrition and physical activity environments at the Club for Youth through recurring nutrition classes and a physical activity program for student participants.

### **Breastfeeding Peer Counselor Program**

The program employs one breastfeeding peer counselor and one lactation consultant, who also serves as the breastfeeding counseling program coordinator. The Breastfeeding Peer Counselor offers peer support to her breastfeeding participants via phone call, Zoom, secure email, text, or in clinic (outside of the pandemic). The Lactation Consultant conducts specialized breastfeeding counseling to participants who are referred from the Breastfeeding Peer Counselor and the WIC program. The Breastfeeding Peer Counseling Program receives referrals from the WIC program. Many challenges were faced in FY22 due to the loss of tenured staff turnover. Despite these challenges, many breastfeeding rates increased between 2021 and 2022 which may have been induced due to formula shortages.

### Special Supplemental Food Program for Women, Infants and Children

The federally funded Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) provides nutrition education and food benefits for income-qualified applicants. The program serves pregnant and postpartum women, infants, and children to the age of five.

The Mohave County WIC program served an average of **95.2% (3,331 participants)** of its assigned caseload of 3,500 monthly WIC participants in the Federal Fiscal Year 2021 (FFY21), an **increase** of **5.9%** over the prior year at 3,126 participants. Participants were served remotely with a waiver approved by the Arizona Department of Health Services during the pandemic. This waiver allowed the program to conduct appointments via telephone or through Zoom to assist with personal protection for participants and staff during the pandemic. Staff at the WIC program, in conjunction with the Arizona Department of Health Services, utilized texting as well as phone calls and secure emails to better serve participants and communicate about the status of their appointments, verify required documents, send nutrition information, and answer questions.

### Participants Served in the WIC Supplemental Food Program

Month	Caseload FFY 2021	Caseload FFY 2022	Increase or Decrease
October	3293	3292	<b>\</b>
November	3344	3305	<b>\</b>
December	3363	3314	<b>\</b>
January	3362	3376	<b>^</b>
February	3321	3340	<b>↑</b>
March	3407	3359	<b>\</b>
April	3352	3357	<b>↑</b>
May	3279	3378	<b>1</b>
June	3303	3407	<b>1</b>
July	3316	3441	<b>1</b>
August	3327	3502	<b>1</b>
September	3310	3452	<b>1</b>
Total	39,977	40,523	<b>↑</b>

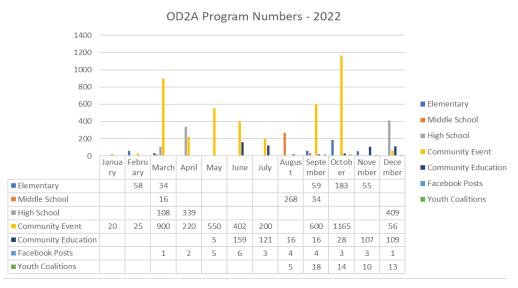
### Overdose Data to Action (OD2A)

The Overdose Data to Action (OD2A) program focuses on substance use prevention through education and establishing relationships in the community. Outreach events were conducted throughout the county and an evidence-based curriculum accepted for implementation in the tri-city schools. At least one drug prevention program was conducted at every grade level from kindergarten to 12<sup>th</sup> grade.

From September 2021 to June 2022, with the exception of November 2021, the OD2A team consistently attended health fairs, resource fairs, and community outreach events to educate the community on the harms of opioid use, as well as give out free resources to Mohave County residents. In May and June of 2022, the OD2A team also provided presentations to adult community members to inform them of the effects of the opioid epidemic and the harms of illicit fentanyl. In June of 2022, the OD2A team established a partner-ship with the Adult Recovery Court program and continues to provide education and resources.

This year, OD2A was awarded the leading role in the formation and meeting facilitation of the overdose fatality review team. The purpose of the fatality review team is to collect and review data on the causes of deaths (focus population), and to recommend changes in policies and programs that will decrease deaths in the focused population. OD2A worked in collaboration with other agencies to build the review team, which

includes representatives from coalitions, law enforcement, mental health, substance abuse treatment facilities, EMS, probation, harm reduction organizations, public health, hospitals, and the medical examiner's office. In the coming months, the team will analyze overdose death data within the county to determine commonalities and opportunities for prevention.

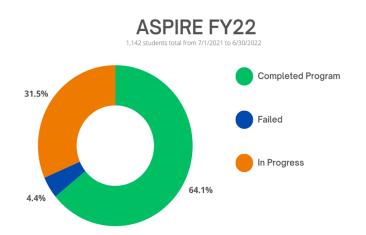


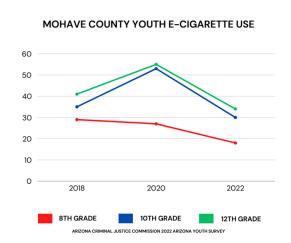
#### **Tobacco Prevention**

Mohave County Tobacco Use Prevention Program (MCTUPP) had a successful year in education services. More than **1,000 students** were educated on A Smoking Prevention Interactive Experience **(ASPIRE)** created by The University of Texas MD Anderson Cancer Center. Of the 1000 students, 700 students passed the course. Approximately **200 students** were educated through Intervention for Nicotine Dependence: Education, Prevention, Tobacco and Health **(INDEPTH)** created by the American Lung Association to offer an alternative to punitive measures for students caught on campus with tobacco and nicotine products.

MCTUPP also partnered with the Kingman Regional Medical Center's Cancer Center to create a presentation for high school students. Through this collaboration approximately **970 students** received vaping prevention education from MCTUPP, doctors, and support staff.

MCTUPP presented a new curriculum with the Kingman Parks and Recreation kid's summer program and the Kingman Club for Youth. *CVS Catch My Breath* was implemented to more than **100 students** over the course of the summer to provide education on the harms of vaping, impacts of media, and gaining confidence in saying 'no' to making health choices. The program has also assisted Mohave County Recovery Court and Health and Wellness Court with cessation education and services. Twice a year at each location, classes were held to educate participants on the harmful effects of tobacco and nicotine products. Mohave County Inmate Release Program also became a referral site for ASHLine to begin cessation services for those being released to continue their cessation efforts. Through Mohave County, ASHLine received more than **125 referrals** for clients to obtain services through counseling and nicotine replacement therapy. Overall, Mohave County youth rates of e-cigarette use have dropped over the past two years.





### Healthy in Arizona Policy Initiative (HAPI)

The Healthy in Arizona Policy Initiative (HAPI) program was designed by the Arizona Department of Health Services (ADHS) to work with local county health departments in achieving targeted improvements in health outcomes using evidence-based strategies. The focus of the HAPI program looks to address the four leading causes of chronic disease deaths in Arizona, including: heart disease, chronic lower respiratory diseases, cancer, and Alzheimer's Disease. The following focus areas were targeted for FY22 with consideration of the four leading causes of chronic disease:

- Increase engagement of community partners
- Develop and/or participate in coalitions to support advocacy
- Assess and identify emerging issues for development of action plans
- Increase knowledge among coalition professional development
- Implement evidence-based approaches

In FY22, a lot of success has come through connections made by warm hand-offs and community partnerships. There was great success within the LGBTQ+ organizations, leading to partnerships that created a pathway for educating on inclusivity and the ties to public health and building trust between these groups and the MCDPH.

Mohave County schools have been hesitant to bring outside prevention-based programs onboard due to the time requirement for some of the programs and activities. Staffing shortages may be contributing to the implementation of these programs as well. One coalition in Coconino County was able to provide technical assistance for these challenges. The Finding Meaning and Hope program was moved from out of Q4 of FY22 and won't be included in the FY23 plans. This was moved due to community partners already being successful in this program. A need was determined, but because there was a lot of community engagement already with this topic and referrals are in place for this well-established community service.

### **Senior Programs**

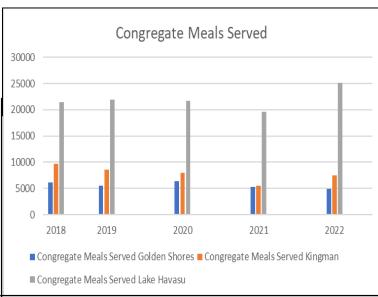
The Mohave County Senior Programs serves congregate and home delivered meals for the lunch time meals to the residents of Topock/Golden Shores, Mohave Valley, Kingman/Golden Valley, and Lake Havasu City. Different funding sources provide meals for the home delivered participants such as the Title III-under the Older Americans Act; Title XX-the Social Services Block Grant; Altcs-under long term care AHCCCS, and the Mohave County General Fund. Meal donations from the congregate and home delivered meal participants provide part of the funding as well. In addition, the Golden Shores Community Center and Lake Havasu Senior Center site councils have their own funding to help support the senior programs in Golden Shores and Lake Havasu Senior Center. The Mohave County Senior Programs were still providing congregate meals via drive through meal pick up during COVID for part of the year in FY22.

+				
	Congregate	FY 2020-2021	FY 2021-2022	Increase or Decrease
	Title III	30175	37029	<b>↑</b>
	Volunteers under the age	259	373	<b>↑</b>
	of 60			
	Guests	45	182	<b>↑</b>
	Total	30,479	37584	<b>↑</b>
	Unduplicated clients	642	1268	<b>↑</b>

Homebound	FY 2020-2021	FY 2021-2022	Increase or Decrease
Title III	71352	61539	<b>V</b>
Title XX	3200	5636	<b>↑</b>
ALTCS	4220	5868	<b>1</b>
Total	78772	73403	<b>V</b>
Unduplicated clients	631	698	<b>1</b>

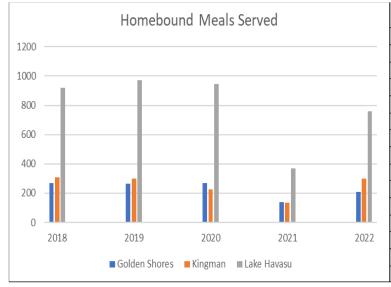


### **Congregate Meals Served by Location**



Year	Congregate Meals	Congregate Meals	Congregate Meals
	Golden Shores	Kingman	Lake Havasu
2018	6141	9668	21453
	Golden Shores	Kingman	Lake Havasu
2019	5558	8633	21900
	Golden Shores	Kingman	Lake Havasu
2020	6406	8010	21739
	Golden Shores	Kingman	Lake Havasu
2021	5233	5461	19605
	Golden Shores	Kingman	Lake Havasu
2022	4942	7510	25128

### **Homebound Meals Served by Location**



Year	Homebound Meals Golden Shores	Homebound Meals Kingman	Homebound Meals Lake Havasu
2018	3694	28025	33407
	Golden Shores	Kingman	Lake Havasu
2019	3915	28181	30933
	Golden Shores	Kingman	Lake Havasu
2020	4850	35202	29467
	Golden Shores	Kingman	Lake Havasu
2021	6473	37821	34478
	Golden Shores	Kingman	Lake Havasu
2022	4857	35432	32469

# **Public Health Nursing**

The Nursing Division provides services for high-risk populations and is responsible for communicable disease control activities throughout the county. The Centers for Disease Control and Prevention (CDC) guidelines are utilized for the prevention and treatment of communicable diseases. Many of the services provided are required to protect the health and safety of our residents and are free of charge. Other services are provided at a low, fixed-cost or on a sliding fee scale.

### Tuberculosis (TB) Program

As with all programs in the nursing division, this was a unique year for the TB Program. Typically, several latent TB cases are managed throughout the year but only four (4) latent cases in Mohave County during this time. Although TB skin tests were unable to be administered for several months due to the COVID response, the MCDPH nurses administered **433 TB skin tests** in FY22.

### **HIV Prevention Program**

During FY22, the HIV Prevention Program provided prevention through education with content tailored specific to the demographics in areas where the transmission risks are the highest. The team brought education to local programs such as Quality of Life court, mental health facilities, and juvenile hall programs along with free, rapid HIV screenings during outreach events which included pop-up testing events veterans' expos, local food banks and parks.

### Family Planning/STD Program

The Family Planning program offers free and low-cost reproductive health services to uninsured and underinsured individuals. The services include birth control, STD testing/treatment, HIV testing, and reproductive health counseling/education. Clinics are held at sites in Bullhead, Lake Havasu, and Kingman and are staffed by a practitioner and a registered nurse.

Throughout FY22, appointments increased at all three clinics sites as did the volume of inquiries for services. Demand for appointments was accommodated by offering Family Planning clinic services on a weekly rotating basis at each of the three county sites. Extended clinic hours or additional clinic days may become necessary in coming years due to the loss of many family planning providers in the county and the difficulty in securing an appointment.

	Q1	Q2	Q3	Q4
Number of new clients each quarter.	57	45	44	52
Number of clinics held each quarter.	11	10	11	12
Number of applicable screenings/education provided to Family Planning	296	140	178	242
clients.				

### High Risk Perinatal Program (HRPP)

HRPP is a home-visiting program assisting families whose infant required a minimum of five days in a neonatal intensive care unit (NICU). This program helps facilitate the transition of the child and family from the NICU to their home and community, monitors the child's medical and developmental needs, identifies infants who would benefit from referral to other intervention programs, and supports and encourages the families by listening to individual needs which empowers families to advocate for their child. **Sixty-six (66)** families living in Mohave County and Parker (La Paz County) participated in this program during the year.

### **Health Start**

Health Start is a community home visiting program providing services to pregnant women and their families. The goal is to give children and their family the best chance of success with a strong support system through education and referrals to community resources. Health Start provides clients with education for birth and child care topics including: safe sleep, shaken baby syndrome, car seat safety, postpartum depression, healthy relationships, home safety, and developmental screenings. Health Start completed **63 prenatal visits** to pregnant women, **298 postpartum visits**, and **242 multi-child family visits**. Health Start also distributed and installed several new car seats to our enrolled clients.

### **Childhood Immunizations**

The Childhood Immunization Program provides immunizations to children and youth through 18 years of age. All children are eligible to receive immunizations regardless of insurance status and without any out-of-pocket cost. The program offers all immunizations recommended by the Centers of Disease Control and Prevention (CDC). During FY22, MCPDH nurses administered **5,633** vaccinations among the three clinincs to **2,209** children.

### **Occupational Health Program**

In collaboration with the county's Risk and Emergency Management Department, this program strives to promote the occupational health and safety of Mohave County employees. Employees are offered free of charge: vaccinations, TB skin testing, blood borne pathogen trainings, and other occupational health-related services. During FY22, MCDPH nurses administered **168 vaccinations** and **183 TB skin tests** to eligible Mohave County employees.

### Youth Health Initiative (formally Teen Pregnancy Prevention Program)

Recent changes in state statute have resulted in increasing challenges for Teen Pregnancy Prevention programs to enter into school settings. With permission from ADHS, and to expand the program beyond school environments and into the community, the program was rebranded to reflective the more comprehensive nature of services offered.

While the abstinence plus based curriculum is still available for schools, the Youth Health Initiative (YHI) also offers:

- Mental Health First Aid (MHFA) for persons who are raising and/or working with youth
- Active Parenting for persons raising and/or working with youth ages 11-19
- Hygiene and age-appropriate, opt-in only sexual health courses.

From October to December 2022, the YHI team taught hygiene lessons to all 5<sup>th</sup> graders at Mohave Accelerated Learning Center and the Bullhead City Boys & Girls Club. The YHI team also provided Active Parenting classes to parents with incarcerated children.

The YHI team continues to adapt and adjust to provide this valuable service to the youth and their families throughout Mohave County.

### **Nursing Division**

FY 22 Activity Report

Vaccinations given  Adult Immunizations Program*  Idap  Hepatitis B  Hepatitis A  Iwinrix  Varicella  MMR  Iuberculosis Control	66 2,809 1,426	224
Childhood Immunization Program Children vaccinated 2 Vaccinations given 4 Adult Immunizations Program* Idap Hepatitis B Hepatitis A Iwinrix Varicella MMR Iuberculosis Control IB skin tests 2	2,809	
Children vaccinated 2 Vaccinations given 4 Adult Immunizations Program*  Tdap Hepatitis B Hepatitis A  Twinrix Varicella  MMR  Tuberculosis Control  TB skin tests 2		2,209
Vaccinations given  Adult Immunizations Program*  Idap  Hepatitis B  Hepatitis A  Iwinrix  Varicella  MMR  Inberculosis Control  IB skin tests		2,209
Adult Immunizations Program*  Idap Hepatitis B Hepatitis A  Iwinrix Varicella  MMR  Iuberculosis Control  IB skin tests	1,426	
Tdap Hepatitis B Hepatitis A Twinrix Varicella MMR Tuberculosis Control TB skin tests		5,633
Hepatitis B  Hepatitis A  Twinrix  Varicella  MMR  Tuberculosis Control  TB skin tests		
Hepatitis A  Twinrix  Varicella  MMR  Tuberculosis Control  TB skin tests	1	27
Twinrix Varicella MMR  Tuberculosis Control TB skin tests	13	162
Varicella  MMR  Fuberculosis Control  TB skin tests	2	374
MMR <u>Fuberculosis Control</u> TB skin tests	5	28
Tuberculosis Control  TB skin tests	6	13
TB skin tests	3	8
Latent TB infection	236*	433*
	0	4
Active cases	0	1
Reproductive Health		
New/Annual visits	39	198
RH/HIV Tests	90	856
Unduplicated clients	42	324
Sexually Transmitted Disease		
Clinic visits	4	27
Health Start		
Visits	603	412

<sup>\*</sup>Includes Occupational Health program activity.

### Child Fatality Review (CFR)

Local child fatality review teams throughout Arizona review all child deaths that occur in the state. The MCDPH Epidemiologist is the coordinator for the Mohave & La Paz County Child Fatality Review Team. During FY22, twenty-one (21) child deaths were reviewed. All twenty-one deaths occurred during the 2021 calendar year with 17 deaths in Mohave County and four in La Paz County. The cases included two drowning incidents, five motor vehicle accidents, two sleep-related deaths, and several deaths attributed to premature birth and/or congenital anomalies. The sleep-related deaths were forwarded to the Arizona Department of Health Services (ADHS) for a higher level of review by a team at the state level.

The Arizona Child Fatality Review Team's (ACFRT) *Thirtieth Annual Report* lists the top 5 leading causes of death in Arizona children in 2022 as prematurity, congenital anomaly, motor vehicle crash, suffocation, and firearm injury. Prematurity was the most common cause of death for Arizona neonates (infants less than 28 days old) while suffocation was the most common cause of death among infants 28 days to less than 1 year of age. Motor vehicle crashes were the most common cause of death for children 5-14 years and firearm injury was most common for children 15-17 years. Review teams determined that 45% of deaths in FY22 Arizona could have been prevented. Motor vehicle crashes, suffocation, firearm injuries, poisoning and drowning were the five most common causes of preventable deaths.

### **Sudden Unexpected Infant Deaths (SUID)**

- · SUID death rates in Arizona increased by 13% from 2021 to 2022.
- · 96% of these deaths were preventable
- · In 53% of SUID, infants were bed-sharing (co-sleeping) with adults and/or other children and/or pets

#### **Suicides**

- · Child suicide rates in Arizona remained consistent from 2021 to 2022
- · 82% of suicides occurred in children ages 15-17 years
- · 80% of suicides involved strangulation or a firearm
- · 59% of children who died by suicide had mental health diagnoses and/or substance use disorder

### **Firearm Injury Deaths**

- · There was a 4% increase in the firearm injury death rate from 2021 to 2022
- · 75% of firearm injury deaths occurred in children ages 15-17 years
- · Substance use was a contributing factor in 19% of child firearm injury deaths
- · Child's access to firearms was a risk factor identified in all firearm injury deaths
- · 31% of the firearm injuries were self-inflicted and intended for self-harm

### **Substance Use Related Deaths**

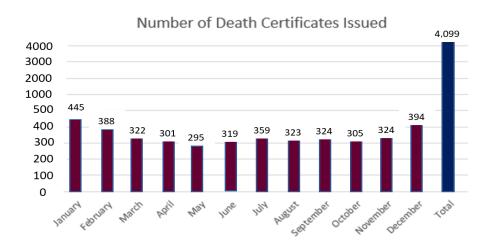
- · There was a 9% decrease in the substance use related death rate from 2021 to 2022.
- · 48% of substance use related deaths occurred in children ages 15-17 years
- · In half of the substance use related deaths, the decedent child was abusing or using alcohol or drugs. Marijuana was the most common substance used by the child, followed by opioids and alcohol.

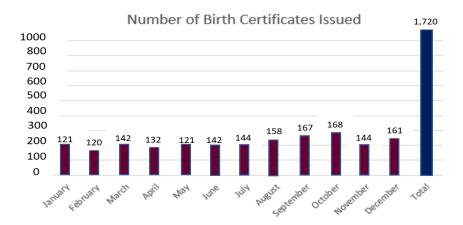
#### Some ACFRP overarching prevention recommendations include:

- · Continuing education of parents on safe sleeping environments and that "Alone, on my Back, in a Crib (ABCs)" is the safest sleeping practice for infants.
- · Increasing access to effective mental health care and adopting the Zero Suicide model statewide.
- · Removing firearms in households with children and adolescents; practicing safe storage of firearms (unloaded, locked away, stored separate from ammunition)
- · Expansion and improved access to personalized substance use disorder treatment plans for children and their caretakers.

### **Vital Records**

The Vital Records program processes applications for Certified Birth & Death records, Amendments & Corrections, Home Births, and Special Fetal & Infant certificates. Certificates are issued via walk-in (Kingman location only), locked drop box, or US Mail (with self-addressed stamped envelope) for a fee. Same day service is offered but cannot be guaranteed and is dependent on type of services requested. Document verification and additional time may be needed depending on the type of vital record requested and any special documentation required for proper processing and issuance. Arizona is a "closed record" state, which means that vital records are not public record. Arizona law restricts public access to vital records to protect the confidentiality of its citizens.





Mohave County Department of Public Health 700 W. Beale Street P.O. Box 7000, Kingman, AZ 86402 Phone: (928) 753-0748 Fax: (928) 718-5547 Emergency Info: (866) 409-4099 www.mohave.gov

Prepared by: Special Programs Analyst
Reviewed by: Chad Kingsley, Health Director



