Date: September 2020

To: Local Public Health Partners, Policy Makers and Resource Providers

From: The Michigan Association for Local Public Health (MALPH)

RE: Michigan’s System of Local Public Health Departments and Service Delivery

The Michigan Association for Local Public Health (MALPH) is pleased to provide an updated version (September 2020) of the Local Health Department Services Inventory.

This publication will provide the reader with up-to-date information regarding local public health services and activities. The one-page local health department service summaries were developed by Anne Barna, MA, Planning, Promotion, and Evaluation Manager and colleagues at the Barry-Eaton District Health Department. This project was supported by funding from the Michigan Department of Health and Human Services (MDHHS) through Cross Jurisdictional Sharing grants.

You can always view this document on the MALPH website at www.malph.org.

Additionally, there are short exhibits concerning:

- Public Health: It’s The Law
- Local Public Health’s Unique Role
- Michigan’s Local Public Health History
- Map of Local Health Departments
- Local Health Department Directory Resource

Local public health departments are the first line of defense in mitigating numerous communicable, chronic, and environmental health hazards. Current efforts include programs to combat opioid use/abuse, ensure clean water-free from lead, per- and polyfluoroalkyl (PFAS) contaminants, and managing the COVID-19 outbreak.

It is expected this Inventory will inform the reader regarding most local public health services and provide a link to contact individual local public health departments.

Your continued support for local public health services, policy, and resources is greatly appreciated.

Yours for better public health,

The MALPH Board of Directors
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State of Michigan Constitution – Section 51: Public Health and General Welfare

The public health and general welfare of the people of the state are hereby declared to be matters of primary public concern. The legislature shall pass suitable laws for the protection and promotion of the public health.

Public Health Code – Act 368 of 1978 ~ Part 22 (State Department of Public Health)

Section 333.2221 - Organized programs to prevent disease, prolong life, and promote public health; duties of department.
Sec. 2221. (1) Pursuant to section 51 of article 4 of the state constitution of 1963, the department shall continually and diligently endeavor to prevent disease, prolong life, and promote the public health through organized programs, including prevention and control of environmental health hazards; prevention and control of diseases; prevention and control of health problems of particularly vulnerable population groups; development of health care facilities and agencies and health services delivery systems; and regulation of health care facilities and agencies and health services delivery systems to the extent provided by law.

Section 333.2224 - Promotion of local health services; coordination and integration of public health services.
Sec. 2224. Pursuant to this code, the department shall promote an adequate and appropriate system of local health services throughout the state and shall endeavor to develop and establish arrangements and procedures for the effective coordination and integration of all public health services including effective cooperation between public and nonpublic entities to provide a unified system of statewide health care.

333.2475 - Reimbursement for costs of services; equitable distribution; schedule; local expenditure in excess of prior appropriation.
Sec. 2475. (1) The department shall reimburse local governing entities for the reasonable and allowable costs of required and allowable health services delivered by the local governing entity as provided by this section. Subject to the availability of funds actually appropriated reimbursements shall be made in a manner to provide equitable distribution among the local governing entities and pursuant to the following schedule beginning in the second state fiscal year beginning on or after the effective date of this part:
(a) First year, 20%. (b) Second year, 30%. (c) Third year, 40%. (d) Fourth year and thereafter, 50%. (2) Until the 50% level is reached, a local governing entity is not required to provide for required services if the local expenditure necessary to provide the services is greater than those funds appropriated and expended in the full state fiscal year immediately before the effective date of this part.

Public Health Code – Act 368 of 1978 ~ Part 24 (Local Health Departments)

333.2433 - Local health department; powers and duties generally.
Sec. 2433. (1) A local health department shall continually and diligently endeavor to prevent disease, prolong life, and promote the public health through organized programs, including prevention and control of environmental health hazards; prevention and control of diseases; prevention and control of health problems of particularly vulnerable population groups; development of health care facilities and health services delivery systems; and regulation of health care facilities and health services delivery systems to the extent provided by law.
333.2451 - Imminent danger to health or lives; informing individuals affected; order; noncompliance; petition to restrain condition or practice; “imminent danger” and “person” defined.
Sec. 2451. (1) Upon a determination that an imminent danger to the health or lives of individuals exists in the area served by the local health department, the local health officer immediately shall inform the individuals affected by the imminent danger and issue an order which shall be delivered to a person authorized to avoid, correct, or remove the imminent danger or be posted at or near the imminent danger. The order shall incorporate the findings of the local health department and require immediate action necessary to avoid, correct, or remove the imminent danger. The order may specify action to be taken or prohibit the presence of individuals in locations or under conditions where the imminent danger exists, except individuals whose presence is necessary to avoid, correct, or remove the imminent danger.

333.2453 - Epidemic; emergency order and procedures; involuntary detention and treatment.
Sec. 2453. (1) If a local health officer determines that control of an epidemic is necessary to protect the public health, the local health officer may issue an emergency order to prohibit the gathering of people for any purpose and may establish procedures to be followed by persons, including a local governmental entity, during the epidemic to insure continuation of essential public health services and enforcement of health laws. Emergency procedures shall not be limited to this code.

333.2455 Building or condition violating health laws or constituting nuisance, unsanitary condition, or cause of illness; order; noncompliance; warrant; assessment and collection of expenses; liability; judicial order; other powers not affected.
Sec. 2455. (1) A local health department or the department may issue an order to avoid, correct, or remove, at the owner’s expense, a building or condition which violates health laws or which the local health officer or director reasonably believes to be a nuisance, unsanitary condition, or cause of illness.

333.2492 - Status report; appropriation for development and implementation of evaluation and related training.
Sec. 2492. (1) At the end of the second full state fiscal year after the effective date of this part, the department shall report to the governor and legislature as to the status of required and allowable health services in relation to standards, costs, and health needs of the people of this state. (2) An amount equal to 1% of the estimated total expenditures for the required and allowable local health services shall be appropriated to the department annually for the development and implementation of evaluation and related training for local health departments and department staffs in the delivery of the required and allowable health services authorized under sections 2471 to 2498.

###
Local Health Departments (LHD) protect and improve community well-being by preventing disease, illness and injury and impacting social, economic and environmental factors fundamental to excellent health. The LHD is the foundation of the local public health system that comprises public- and private-sector health care providers, academia, business, the media, and other local and state governmental entities.

- **Track and investigate health problems and hazards in the community.** LHDs gather and analyze data on the community's health to determine risks and problems. This information drives specific programs and activities designed to control multiple threats: both communicable and chronic diseases; food, water, insect and other "vector-borne" outbreaks; biological, chemical and radiological hazards; and public health disasters.

- **Prepare for and respond to public health emergencies.** As a result of extensive and ongoing preparation, LHDs respond quickly and effectively to disease outbreaks and other public health events—they are trained extensively to respond to the increase of the incidence of diseases, natural disasters, and acts of terrorism. They coordinate delivery of drugs, supplies, and provisions to victims and populations at risk. They keep the public informed and serve as the network hub for community hospitals, physicians, and other health care providers.

- **Develop, apply and enforce policies, laws and regulations that improve health and ensure safety.** Acting on their knowledge about their community, LHDs create data-driven policies to meet health needs and address emerging issues. They help craft sound health policies by providing expertise to local, state and federal decision makers. LHDs also inform individuals and organizations about public health laws while monitoring and enforcing compliance.

- **Lead efforts to mobilize communities around important health issues.** With local and state government agencies, businesses, schools, and the media, LHDs spearhead locally organized health promotion and disease prevention campaigns and projects. They galvanize the community to tackle disease prevention and personal health care needs. LHDs also educate and encourage people to lead healthy lives through community forums; public workshops and presentations; and public service announcements.

- **Link people to health services.** LHDs connect people with personal health services, including preventive and health promotion services, either in the community or as close to the community as possible. They also advocate for development of needed programs and services in underserved populations and continuously monitor the quality and accessibility of public health services.

- **Achieve excellence in public health practice through a trained workforce, evaluation, and evidence-based programs.** LHDs recruit and develop skilled workers with expertise in core public health competencies. They ensure that public health workers update their knowledge and skills through continuing education, training and leadership development activities. They regularly evaluate the effectiveness of all programs and activities using evidence-based standards and strive to adapt successful interventions.
Section 51 of Michigan’s Constitution provides for the Public Health and General Welfare of Michigan residents.

“*The public health and general welfare of the people of the state are hereby declared to be matters of primary public concern. The legislature shall pass suitable laws for the protection and promotion of the public health.***”

Michigan has a nationally recognized Public Health Code, PA 388 of 1978, outlining the structure, nature, and responsibility for provision of Michigan’s public health services.

Specifically, Part 24 of PA 368 of 1978 bestows powers and duties authority upon Michigan’s system of Local Health Departments (LHDs).

Until the 1990’s, most public health coordination was directed by the then Michigan Department of Public Health. In 1996, via Executive Orders, public health state responsibilities were split, for the most part, among the now Departments of Agriculture and Rural Development (MDARD), Environmental Quality (MDEQ), Licensing and Regulatory Affairs (DLARA), and Health and Human Services (MDHHS).

Today, the Michigan Association for Local Public Health (MALPH) and the LHDs collaborate mainly with those four departments to deliver public health services and programs to Michigan citizens and businesses.

Unique in the nation, MALPH was founded in 1985 as a private, non-profit, 501(c)3 state association, and is organized to represent Michigan’s 45 city, county and district local health departments, interacting with state and federal legislative and executive branches of government.

**MALPH’s Mission:** To strengthen Michigan’s system of local public health departments and local governing boards.

Local health departments serve to promote, prevent, and protect all people living, playing, and working in Michigan and to improve the overall health of people and visitors in communities, leading to increased competitiveness and economic stability.

**Sources:**
Constitution of Michigan of 1963. Website:

PA 368 of 1978. Michigan’s Public Health Code. Website:
Local Health Department Directory

www.malph.org

https://www.malph.org/resources/directory

September 2020
The Michigan Association for Local Public Health (MALPH)

Local Health Department Services Inventory

September 2020
Access to healthcare impacts one’s overall physical, social, and mental health status and quality of life, but getting access to healthcare can be challenging, especially for people who have low or moderate incomes. Health care coverage can be expensive, and navigating the Health Insurance Marketplace or Medicaid can be confusing. Local health department staff understand the unique challenges that come with enrolling in health care, and are available to help individuals enroll in a health plan that is right for them.

Services:
Local health department health educators and clinical staff help to connect people with tools and information on different health insurance options. This includes helping people apply for Medicaid, the Healthy Michigan Plan, MIChild, or another affordable health insurance program. Local health department staff can also help people navigate the Health Insurance Marketplace. Additionally, at some local health departments, staff conduct outreach at health fairs and other events to increase knowledge and awareness of health care coverage and assistance.

Goals:
Local health department outreach and enrollment activities aim to:

- Help persons in the community gain access to appropriate and affordable health insurance
- Promote the use of preventative health care to prevent disease
- Prevent financial crises in persons due to unexpected medical emergencies

Impact:
Uninsured people receive less medical care and less timely care, they have worse health outcomes, and lack of insurance is a financial burden for them and their families. Having access to health insurance helps people overcome barriers when visiting the doctor for routine health check-ups, and can help them in the event of a major health emergency.

Created by the Barry-Eaton District Health Department for the Michigan Association of Local Public Health with funding from the Michigan Department of Health and Human Services. August 2018.

*38 of Michigan’s local health departments indicated that they participate in outreach and enrollment activities (of 41 who participated in the survey). Participants might not have answered each question.
Immunizations keep adults safe and healthy by protecting them from serious diseases. All local health departments in Michigan offer recommended adult vaccinations in order to minimize and prevent the occurrence of vaccine preventable diseases within our state. Local health departments also provide continuing education about immunizations and ensure accurate immunization reporting to the state health department.

**Services:**

Fully-trained public health nurses and other immunization staff at local health departments support and implement immunization programs that help ensure adults throughout Michigan receive their recommended vaccinations, especially those that may not be able to obtain vaccination elsewhere. Many local health departments conduct a variety of immunization-related activities, including health care provider education and site visits, travel clinics, worksite-based clinics, data analysis, and community education.

**Impact:**

In 2017, local health departments administered over 155,000 vaccine doses to adults in Michigan. This was 6.4% of adult vaccinations.*

**Key Positions**

- Public Health Nurses
- Immunization Technicians
- Program Coordinators
- Billing and Support Staff

**Meets Public Health Standards:**

- Michigan Public Health Code
- Michigan Local Public Health Accreditation
- Public Health Accreditation Board

**Funding Sources for Michigan Local Health Department Adult Immunization Programs (n = 41 Local Health Departments^)**

**Goals:**

Adult immunization programs conducted by local health departments work to:

- Protect adults from vaccine-preventable diseases
- Remove barriers so that adults receive recommended vaccinations
- Provide education to health care providers and the community about immunizations
- Ensure timely reporting to the state health department

*Of vaccinations reported to the Michigan Care Improvement Registry. Reporting of adult vaccinations is not required by Michigan law.

**Goals:**

Adult immunization programs conducted by local health departments work to:

- Protect adults from vaccine-preventable diseases
- Remove barriers so that adults receive recommended vaccinations
- Provide education to health care providers and the community about immunizations
- Ensure timely reporting to the state health department

Created by the Barry-Eaton District Health Department for the Michigan Association of Local Public Health with funding from the Michigan Department of Health and Human Services. August 2018.
Mental illnesses and substance use disorders are common in the United States, affecting tens of millions of people each year. Mental illness and substance use can affect physical health and reduce quality of life. Several local health departments (LHDs) offer behavioral health services to provide substance use treatment and recovery and improve mental health. These services may include early intervention, outpatient care, intensive outpatient care, and education for mental illnesses and substance use. These services provide clients with resources that they need to address their behavioral health.

Key Positions

- Behavioral Health Therapists
- Behavioral Health Secretaries
- Behavioral Health Supervisors

Meets Public Health Standards:

- Michigan Public Health Code
- Michigan Local Public Health Accreditation
- Public Health Accreditation Board

Services:
Local health departments that participate in substance use treatment and recovery services offer:
- Assessments
- Therapy
- Coordinating Care
- Specialty Programs
- Treatment Enhancements
- Prevention/Early Intervention
- Outpatient
- Intensive Outpatient

In Michigan, the rate of drug-related traffic crash injuries and drug-related traffic crash deaths among adult drivers increased by 31% and 30%, respectively, from 2006 to 2015.

Statewide Funding Sources for Behavioral Health Services
(N=14 Local Health Departments)

- Federal grant
- Fees
- Local appropriations
- Medicaid
- Other grants
- Private insurance
- State grant

Goals:
Behavioral health services:
- Reduce individual use of alcohol and other substances
- Help individuals accomplish their version of hopeful, healthy and meaningful lives through prevention, treatment and recovery supports
- Facilitate a community where people can become the best versions of themselves through wellness and recovery

Impact:
Alcohol and drug use can be significant causes of illness and death. Addressing addiction is a public health priority for many communities.
Childhood Immunizations

Immunizations keep children safe and healthy by protecting them from serious diseases. All local health departments in Michigan offer required childhood vaccinations in order to minimize and prevent the occurrence of vaccine preventable diseases within our state. Local health departments also provide continuing education about immunizations and ensure accurate immunization reporting to the state health department.

Key Positions

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<td>Immunization Technicians</td>
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<td>Program Coordinators</td>
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<td>Billing and Support Staff</td>
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Impact:

In 2017, local health departments administered 311,376 vaccine doses to Michigan children. This was 8.1% of all Michigan child vaccinations.

Meets Public Health Standards:

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<td>Michigan Local Public Health Accreditation</td>
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Services:

Public health nurses and other immunization staff at local health departments provide immunization programs that ensure children throughout Michigan receive the recommended childhood vaccinations, especially those that may not be able to obtain vaccination elsewhere. Local health departments implement the State/Federal Vaccines for Children program (VFC) in partnership with local providers to increase access to immunizations for needy children across the community. Many local health departments conduct a variety of immunization-related activities, including health care provider education and site visits, travel clinics, school-based clinics, data analysis, and community education.

Funding Sources for Michigan Local Health Department Childhood Immunization Programs (n = 41 Local Health Departments*)

![Bar chart showing funding sources](chart.png)

Goals:

Childhood immunization programs conducted by local health departments work to:

- Protect children from vaccine-preventable diseases
- Remove barriers, such as cost, so that children receive recommended vaccinations
- Provide education to health care providers and the community about immunizations
- Ensure timely reporting to the state health department
- Provide mandated immunization waiver education

Created by the Barry-Eaton District Health Department for the Michigan Association of Local Public Health with funding from the Michigan Department of Health and Human Services. August 2018.

*41 out of 45 of Michigan’s local public health departments participated in the survey at least partially. Participants might not have answered each question.
**Services:**

Local health departments that participate in the Children’s Special Health Care Services program can assist in finding coverage and referrals for eligible patients specialty services based on the person's health problems. More than 2,700 diagnoses are eligible for CSHCS coverage, including asthma, cancer, cerebral palsy, cleft palate, liver disease, club foot, limb abnormalities, spina bifida, certain vision disorders, paralysis or spinal injuries, cystic fibrosis, hemophilia, insulin-dependent diabetes, muscular dystrophy, certain heart conditions, epilepsy, kidney disease, and more. Additionally, those enrolled in Children’s Special Health Care Services will receive assistance in care coordination to pull together the services of many different providers who work within different agencies.

**Impact:** Thousands of children are able to receive the specialty health care services they need to have a higher quality of life. These children and their families are able to seek care without worrying about the financial burden.

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**Key Positions**

- Public Health Nurses
- Program Representatives
- Clerical Staff

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**Goals:**

Children’s Special Health Care Services conducted by local health departments are meant to:

- Assist individuals with special health care needs in accessing appropriate medical care, health education and supports.
- Assure delivery of these services and supports in an accessible, family centered, culturally competent, community based and coordinated manner.
- Remove barriers that prevent individuals with special health care needs from achieving these goals.
Communicable diseases are infectious diseases that can be transmitted (spread) to humans. Some ways in which communicable diseases are spread include person-to-person, contact with contaminated surfaces, through air or water, or by a vector, such as an insect. In Michigan, there are currently almost 100 reportable diseases. Michigan local health departments work with a variety of health care and laboratory partners to control the spread of communicable diseases through testing, treatment, prevention, control, and education.

Services:
Local health departments that participate in communicable disease control offer services such as communicable disease screenings and communicable disease treatment, depending on the capacity of the health department. Additional activities in communicable disease prevention in local health departments can include contact tracing, expedited partner therapy (in cases of STDs), health promotion and education, and disease prevention when applicable (i.e., immunizations). Communicable disease control is a collaborative effort between health department staff, regional epidemiologists, community partners and local health providers and hospitals.

Goals:
Local health department communicable disease programs prevent and control the spread of infectious diseases by:

- Identifying cases through testing and reporting
- Conducting surveillance and data analysis
- Recommending and instituting infection control measures to slow and stop outbreaks
- Providing education to patients, health care providers, and the community
- Ensuring timely reporting of cases to the state health department

Impact:
Since 2016, 35 local jurisdictions have responded to a statewide hepatitis A outbreak. Over 200,000 adult hepatitis A vaccines were given in outbreak jurisdictions. This effort has helped to contain the one of the largest hepatitis A outbreaks in recent history.

Created by the Barry-Eaton District Health Department for the Michigan Association of Local Public Health with funding from the Michigan Department of Health and Human Services. August 2018.

*32 of Michigan’s local health departments indicated that they offer communicable disease screening and/or treatment services (of 41 who participated in the survey). Participants might not have answered each question.
In Michigan, all local health departments implement a standard work plan formulated by MDHHS and the CDC ensuring consistent response across the state.

Key Positions

| Emergency Preparedness Coordinator
| Public Information Officer

Services:

All local health departments are required to have a full-time emergency preparedness coordinator (EPC). The EPC is responsible for ensuring the health department is prepared to respond to public health emergency, carrying out planning exercises, building health department partnerships with other emergency response entities, and providing community education related to emergency preparedness. Emergency preparedness activities can be supported by local, state, and federal funding.

Goals:

The goals for emergency preparedness include:

- Preparing local health departments to respond to emergencies, through work plans, exercises, and written plans and plan reviews
- Educating the community on how to prepare for and react to emergencies
- Developing and strengthening relationships with other emergency response partners, including state departments and local police and fire

Impact:

Recently, local health departments’ emergency preparedness divisions have been involved in the response to several large-scale public health emergencies, including two hepatitis A outbreaks (one linked to frozen strawberries and one originating in southeast Michigan), the Flint water crisis, Ebola response planning, and large-scale flooding.
Local health departments (LHDs) are responsible for a variety of services that help keep our environments safe and healthy. These services include inspections of daycares, schools, and body art facilities; radiation control and hazardous waste management; response to nuisance complaints; air and water pollution prevention; vector control; environmental contamination response; and land-use planning. These inspections, assistance in planning, and interventions help to ensure the environment is protected and homes are safe from hazards.

Services:
Local health department sanitarians provide monitoring, inspection, regulation, and/or licensing services including:
- School and daycare facility inspections
- Smoke free air law/ordinances
- Nuisance abatement and monitoring
- Body art facility inspections
- Lead inspections
- Indoor air quality
- Radiation control
- Radon testing and outreach
- Land-use planning
- Hazardous waste collections
- Pollution prevention and control
- Collection of unused pharmaceuticals
- Medical waste facility inspections

Goals:
Regulation, inspection, and licensing activities around recreational facilities are meant:
- To ensure that homes and facilities in the community are safe and healthy
- To protect our environment from pollution and contamination
- To correct any potential health hazards in homes, and other facilities

Impact:
Maintaining a healthy environment is central to increasing quality of life and years of healthy life.

Created by the Barry-Eaton District Health Department for the Michigan Association of Local Public Health with funding from the Michigan Department of Health and Human Services. August 2018.

*41 of Michigan’s local health departments indicated that they participate in general environmental health activities (of 41 who participated in the survey). Participants might not have answered each question.
Epidemiology and Surveillance

Federal, state, and local health entities regularly collect and analyze data to understand the extent of health risk behaviors, preventive care practices, and the burden of chronic diseases to assess progress of public health programs and provide public health professionals and policy makers with timely information for effective decision making.

**Services:**
Local health department epidemiology and surveillance activities can include regularly analyzing and reviewing county, state, and national data to assess the health of the community. Using this data, local health department epidemiologists or data analysts can identify trends in communicable and chronic diseases, accidents, and morbidity and mortality. These trends or changes help to guide other activities in the health department by identifying areas for public health intervention. Additionally, local health departments can use epidemiology and surveillance data to report to stakeholders and funders and inform Community Health Assessments (CHA) and Community Health Improvement Plans (CHIP).

**Goals:**
Local health department epidemiology and surveillance activities are meant to:
- Identify and monitor trends in morbidity and mortality in the community
- Provide data to inform necessary public health interventions

**Impact:**
Reports like the Behavioral Risk Factor Surveillance Survey and Community Health Assessments help to guide public health programing at both the state and local levels by identifying population trends in diseases and behaviors.

**Key Positions**
- Data Analyst/Epidemiologist
- Communicable Disease Nurse
- MDHHS Regional Epidemiologist

**A Community Health Assessment looks at a wide variety of available health data to identify the priority health issues in a community.**

**Funding Sources for Epidemiology and Surveillance Services**
(N=39 Local Health Departments)

<table>
<thead>
<tr>
<th>Source</th>
<th>Number of LHDs</th>
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<tbody>
<tr>
<td>Donations</td>
<td>1</td>
</tr>
<tr>
<td>Fees</td>
<td>2</td>
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<tr>
<td>Private insurance</td>
<td>1</td>
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<tr>
<td>Medicare</td>
<td>1</td>
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<tr>
<td>Medicaid</td>
<td>2</td>
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<tr>
<td>Other grants</td>
<td>1</td>
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<tr>
<td>Federal grant</td>
<td>4</td>
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<tr>
<td>State grant</td>
<td>25</td>
</tr>
<tr>
<td>Local appropriations</td>
<td>32</td>
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**Meets Public Health Standards:**
- Michigan Public Health Code
- Michigan Local Public Health
- Public Health Accreditation Board

Created by the Barry-Eaton District Health Department for the Michigan Association of Local Public Health with funding from the Michigan Department of Health and Human Services. August 2018.

*39 of Michigan’s local health departments indicated that they participate in epidemiology and surveillance activities of 41 who participated in the survey. Participants might not have answered each question.
Local health departments who participate in Michigan’s Family Planning Program provides high quality reproductive health care to women, men, and teens at low or no-cost. Family Planning is a public health service that helps individuals and families to plan for their desired family size and spacing of children or to prevent an undesired pregnancy.

Services:
Local health departments that participate in family planning services offer:
- Information on birth control and sexual health
- Help choosing the birth control method that best fits client lifestyles
- Help planning a healthy pregnancy
- Pregnancy testing and counseling
- Testing and treatment for sexually transmitted infections (STIs)
- Preventive health exams to screen for cancer or other health issues

Goals:
Family planning services:
- Help prevent unplanned pregnancy and STI transmission
- Support healthy pregnancies by addressing planning and spacing

Impact:
Births resulting from unintended pregnancies can have negative consequences including birth defects and low birth weight.

Key Positions
- Public Health Nurse
- Nurse Practitioner
- Billing and Support Staff
- Health Educators

Meets Public Health Standards:
- Michigan Public Health Code
- Michigan Local Public Health Accreditation
- Public Health Accreditation Board

Statewide Funding Sources for Family Planning Services (N=26 Local Health Departments)

- Millage: 1
- Other: 2
- Other grants: 2
- Medicare: 5
- Federal grant: 13
- Donations: 16
- Fees: 19
- Private insurance: 21
- Local appropriations: 22
- Medicaid: 23
- State grant: 23

Foodborne illness outbreaks have the potential to affect large numbers of people, cause illness and distress, and can even be deadly. One critical function of public health is to prevent foodborne illness outbreaks from happening in food service facilities (such as restaurants) serving the public. Local health departments (LHDs) in Michigan provide a variety of services related to food service. All LHDs perform activities surrounding food service establishment evaluation, foodborne illness investigation, and food safety education. Some LHDs are also involved in regulation related to food processing and other activities.

**Services:**
Food service sanitarians inspect local food service establishments (such as restaurants) twice per year to ensure that they are meeting the standards set in Michigan’s Food Code. Other local food service operations, such as mobile food vendors, temporary kitchens and special events are inspected as needed. Many health departments teach Food Safety Manager certification courses throughout the year. Finally, food service sanitarians investigate food and restaurant complaints and conduct foodborne illness and outbreak investigations (in partnership with communicable disease nurses and epidemiologists).

**Goals:**
Local health department food service sanitation licensing, inspection and regulation aims:
- To assess the facility’s control over the most common risk factors for foodborne illness.
- To identify restaurant and facility conditions that pose a potential threat to health and ensure their correction.
- To reduce the incidence of foodborne illness and outbreaks.
- To promote the food safety education of operators and workers.
- To rapidly respond to any customer complaints or foodborne incidents/events.

**Meets Public Health Standards:**
- Michigan Public Health Code
- Michigan Local Public Health Accreditation
- Public Health Accreditation Board

**Food Service Sanitation Activities**

<table>
<thead>
<tr>
<th>Activity</th>
<th>Number of LHDs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Food service establishment evaluation</td>
<td>40</td>
</tr>
<tr>
<td>Food Illness Investigation</td>
<td>39</td>
</tr>
<tr>
<td>Food Processing inspection, and/or licensing</td>
<td>24</td>
</tr>
<tr>
<td>Food Safety Education</td>
<td>36</td>
</tr>
</tbody>
</table>

**Primary Funding Sources for Food Service Sanitation Activities:**

- **Fees**
- **Local Funding**
- **State Grants**

**Impact:**
Local health department sanitarians educate food service workers on the major food safety risk factors: temperature, cleanliness, worker hygiene, and safe suppliers.
Local Health Department

Health Promotion, Prevention, and Education

The primary purpose of population-based health promotion and education is to prevent disease, illness, and injury. Preventing these problems before they happen can lead to reduced demands on the healthcare system; better health outcomes for individuals; and overall healthier, safer, and more engaged communities. All local health departments in Michigan carry out at least some health promotion and education activities, often in conjunction with community partners and coalitions. Addressed topics can include injury prevention, chronic disease, lead poisoning, and mental health, among countless others.

Services:
Health promotion, prevention, and education services vary widely by health department. Some health departments have robust departments that conduct intensive assessment and planning activities and collaborate intensively with other community organizations, whereas others focus efforts on the education of individuals. Some are heavily involved in environmental, policy, and systems change, while still others focus on personal interventions with individuals to prevent adverse health outcomes. The topics that health departments work cover a wide range and are often dependent on community wants, needs, and readiness. Funding is often a determining factor for the breadth of promotion, prevention, and education activities that health departments perform.

Goals:
Health promotion, prevention, and education activities are meant to:
- Prevent adverse health outcomes.
- Engage the community and partners in improving health.
- Address health outcomes that need to be improved, often with evidence-based interventions.

Impact:
Many local health departments serve as conveners of local coalitions that work to improve health. These local coalitions assure that partners work collaboratively on efforts, avoiding duplication and maximizing collective impact.

<table>
<thead>
<tr>
<th>Meets Public Health Standards:</th>
</tr>
</thead>
<tbody>
<tr>
<td>✓ Michigan Public Health Code</td>
</tr>
<tr>
<td>✓ Michigan Local Public Health Accreditation</td>
</tr>
<tr>
<td>✓ Public Health Accreditation Board</td>
</tr>
</tbody>
</table>

Statewide Health Promotion and Education Funding Sources
(N=39 Local Health Departments)

- Donations: 1
- Fees: 3
- Private insurance: 2
- Medicare: 1
- Medicaid: 4
- Other grants: 18
- Federal grant: 13
- State grant: 23
- Local appropriations: 29

Key Positions

| Health Educator |
| Data Analyst or Epidemiologist |
| Manager |

Created by the Barry-Eaton District Health Department for the Michigan Association of Local Public Health with funding from the Michigan Department of Health and Human Services. August 2018.

*39 of Michigan’s local health departments indicated that they offer health promotion and education (of 41 who participated in the survey). Participants might not have answered each question.
The ability to hear and see can affect learning, which is key to a child’s success. Undiagnosed hearing and vision problems can interfere with children’s development. Early detection and treatment of hearing and vision problems can help children succeed in school. All local health departments in Michigan conduct free hearing and vision screening, often in schools. Youth are screened at specified intervals from pre-kindergarten through high school.

Services:
Fully-trained hearing and vision technicians at each health department comprehensively screen children’s hearing and vision free of charge. Screenings take place at schools, preschools, Head Starts, and health departments. Students are screened for vision before they enter kindergarten and when they are in 1st, 3rd, 5th, 7th, and 9th grades. Students are screened for hearing at least once between the ages of 3 to 5 years old, in kindergarten, 2nd, and 4th grades. The parents of students who do not pass the screening are notified and recommendations are made to follow up with an eye/ear professional or a family doctor.

Impact:
Each year, more than 1.1 million children are screened. About 18,000 children screened for hearing are referred to doctors, and more than 70,000 children screened for vision are referred to optometrists and ophthalmologists.

Goals:
Hearing and vision screening is meant to:
- Detect hearing and vision problems early.
  - Hearing problems can include hearing loss and middle ear pathology. Vision problems can include lazy eye, nearsightedness, and farsightedness.
- Refer children to providers that can help correct hearing and vision problems, if necessary.
- Remove barriers, such as cost, to children having their hearing and vision screened.

“Right now the prognosis for Samantha’s brain tumor is very good...without your program there never would have been a CT Scan and the discovery of the tumor may not have happened until significant damage had occurred. ...
“... Our family is an example of how a program such as yours can save the life of a beautiful child.”

—Lee Ann, mother of Samantha from Livonia, MI
Local Health Department

HIV/AIDS Programs

Local health departments are key partners in the fight against transmission of the human immunodeficiency virus (HIV) and the resulting Acquired Immunodeficiency Syndrome (AIDS). No cure exists for HIV, but with proper medical care, HIV can be controlled. Therefore, prevention of HIV transmission, identification of new cases, and proper treatment of current patients are critical public health activities.

Key Positions

<table>
<thead>
<tr>
<th>Position</th>
</tr>
</thead>
<tbody>
<tr>
<td>Public Health Nurses</td>
</tr>
<tr>
<td>Prevention Specialist/Counselor</td>
</tr>
<tr>
<td>Laboratory Technicians</td>
</tr>
<tr>
<td>Program Coordinators</td>
</tr>
<tr>
<td>Public Health Physicians</td>
</tr>
</tbody>
</table>

In 2016, there were over 700 new diagnoses of HIV in Michigan.
Over 15,600 Michigan residents currently live with HIV.

Goals:

HIV/AIDS prevention, screening, and treatment programs conducted by local health departments:

- Prevent transmission of HIV and decrease the number of new HIV infections
- Work to suppress the overall viral load of communities at risk
- Educate health care providers and communities
- Link patients to treatment and other resources
- Improve the lives of Michigan residents, especially those living with HIV/AIDS

Impact:

In 2016, 81% of Michigan residents living with HIV were linked to care for their HIV diagnosis.

Created by the Barry-Eaton District Health Department for the Michigan Association of Local Public Health with funding from the Michigan Department of Health and Human Services. August 2018.

*41 out of 45 of Michigan’s local public health departments participated in the survey at least partially. Participants might not have answered each question.
The Maternal Infant Health Program (MIHP) is Michigan’s largest, evidence-based home visitation program for Medicaid eligible pregnant women and infants. MIHP is administered by a network of certified provider agencies throughout the state in rural, urban, and native communities. Providers are located in private freestanding offices, hospital-based clinics, federally qualified health centers, and in local/regional public health departments.

**Participation in MIHP reduces the risk of infant death, both in the newborn stage and in later infancy.**

**Services:**
MIHP provides support to promote healthy pregnancies, good birth outcomes, and healthy infants. By enrolling in MIHP, families receive services from a team of nurses, social workers, and dietitians to connect them with the information and support needed to have a healthy pregnancy and baby. All pregnant women and/or infants under the age of one that are Medicaid-eligible are eligible for the MIHP program. Services include:
- Maternal and infant health assessment completed by registered nurse or licensed social worker
- Coordination of MIHP services with the patients’ health care provider and Medicaid Health Plan
- A team of registered nurses, licensed social workers, and registered dietitians offer home or office visits to provide education and support based on the needs of each family
- Transportation services as needed
- Referrals are made to local community services (e.g., mental health, substance abuse, domestic violence, basic needs assistance) as needed
- Referral to local childbirth education or parenting classes

**Goals:**
Local health department MIHP programs aim to:
- Reduce maternal and infant morbidity and mortality
- Promote healthy pregnancies, positive birth outcomes, and healthy infant growth and development.

**Statewide Funding Sources for MIHP Programs**
(N=30 Local Health Departments)

**Impact:**
MIHP programs help to improve health and well-being of pregnant women and infants — pre-natal and post-natal care is better, and infants are more likely to get well-child checkups.

*30 of Michigan’s local health departments indicated that they offer MIHP Programs (of 39 who participated in the survey). Participants might not have answered each question.*
Public places like pools and spas, beaches, children’s camps, campgrounds, and RV parks are important community recreation places. They can also be prime locations for waterborne and communicable diseases to be spread. Environmental Health (EH) divisions at local health departments regularly inspect and monitor these recreational facilities to ensure that they are safe and healthy. Inspections include sampling pool and beach waters, checking that community wells are functioning properly and free of contaminants, and ensuring that human waste is disposed safely.

**Services:**
Local health department Environmental Health (EH) sanitarians provide inspection, regulation, and licensing services for public swimming pools and spas, public bathing beaches, children’s camps, and public campgrounds and RV parks. Many of these activities are seasonal, in the warmer months. Campground, and RV park, and pool inspection programs are conducted independently by health departments; beach and camp inspection programs are conducted in partnership with the State. Most local health departments (LHDs) in Michigan conduct one operational inspection per year for pools and spas, however, some conduct two yearly inspections.

**Goals:**
Regulation, inspection, and licensing activities around recreational facilities are meant to
- Assess facilities and recreation areas and/or educate operators on various EH factors that could negatively impact the health and safety of the public.
- Reduce the incidence of injuries, illnesses, and deaths.
- Promote healthy recreation and public awareness.

**Impact:**
In 2015, 98 beaches reported 212 incidents of E. coli exceeding accepted water quality standards. These reports helped to alert beach goers of the hazardous water, and prevent the spread of disease.

*41 of Michigan’s local health departments indicated that they participate in recreational facility activities (of 41 who participated in the survey). Participants might not have answered each question.
Proper sewage system design, installation, and maintenance can prevent premature failures and contamination problems from occurring. This helps keep the community and our water resources healthy. It also helps ensure that sewage systems operate effectively throughout their expected lifetime. Replacing a sewage system is costly, so proper maintenance makes good economic sense. On-Site Sewage (Septic) System Programs are meant to help residents avoid exposure to untreated sewage and to reduce contamination of groundwater and surface water resources.

Wastewater is water that has been used in the home, in a business, or as part of an industrial process.

Services:
Local Health Department Environmental Health (EH) sanitarians provide inspection and regulation services for all on-site sewage (septic) systems. Other activities can include:
- Alternative on-site wastewater treatment (sometimes called engineered systems)
- Operational maintenance inspections
- Time of sale or transfer evaluations
- Vacant land evaluations
- Septage hauler inspections and regulation
- Sewage system design and inspection
- Complaint investigation including illicit discharges
- Licensure of sewage system installers

Goals:
Regulation, inspection, and licensing activities around sewage systems are meant to:
- Help residents in the district avoid exposure to untreated sewage
- Reduce contamination of groundwater and surface water resources
- Educate land owners on how improper sewage (septic) system maintenance could negatively impact the health and safety of the public.

Impact:
Proper sewage management activities help to improve the quality of the ground and surface water in our communities, and help to protect the Great Lakes.

Created by the Barry-Eaton District Health Department for the Michigan Association of Local Public Health with funding from the Michigan Department of Health and Human Services. August 2018.

39 of Michigan’s local health departments indicated that they participate in sewage management activities (of 41 who participated in the survey). Participants might not have answered each question.
Sexually Transmitted Infections

Sexually transmitted infections (STIs) are infectious diseases that are passed from one person to another through intimate physical contact and sexual activity. Due to the large numbers of cases and the potential for serious health consequences, STIs are a nationwide public health problem. Local health departments work to control the spread of STIs through testing, treatment, prevention, and education.

Key Positions

- Public Health Nurses
- Laboratory Technicians
- Program Coordinators
- Public Health Physicians

Meets Public Health Standards:

- Michigan Public Health Code
- Michigan Local Public Health Accreditation
- Public Health Accreditation Board

Services:

Public health nurses and other local health department staff implement sexually transmitted infections programs that help ensure residents throughout Michigan receive prevention, testing, and treatment for a range of sexually transmitted diseases. Prompt identification of STIs is important to prevent the spread of disease. Serious health problems, such as pelvic inflammatory disease, infertility, and health complications for infants can also result from STIs, so linking patients to treatment at either the health department or community partners is an essential function of STI programs.

Local health departments may conduct a variety of additional STI programs, such as health care provider education and site visits, school-based clinics, condom distribution, expedited partner therapy, and community education.

Trends:

From 2001-2016, Michigan cases of chlamydia have increased by 53%. Gonorrhea cases have decreased by 29% during this time period.

In 2016, there were almost 62,000 new cases of chlamydia, gonorrhea, and syphilis reported in Michigan.

Goals:

Sexually transmitted infections programs conducted by local health departments serve to prevent and control the spread of sexually transmitted diseases by:

- Identifying cases through testing and reporting
- Removing barriers, such as cost and access, to testing and treatment
- Providing education to patients, health care providers, and the community
- Ensuring timely reporting of cases to the state health department

Funding Sources for Michigan Local Health Department STI Programs (n = 41 Local Health Departments*)

<table>
<thead>
<tr>
<th>Source</th>
<th>Number of Departments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Local appropriations</td>
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</tr>
<tr>
<td>Medicare</td>
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<tr>
<td>Other grants</td>
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</tr>
<tr>
<td>Fees</td>
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</tr>
<tr>
<td>Medicaid</td>
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</tr>
<tr>
<td>State grants</td>
<td>10</td>
</tr>
<tr>
<td>Other grants</td>
<td>10</td>
</tr>
<tr>
<td>Federal grants</td>
<td>10</td>
</tr>
<tr>
<td>Private insurance</td>
<td>10</td>
</tr>
</tbody>
</table>

Funding Sources (can be multiple)

*41 out of 45 of Michigan’s local public health departments participated in the survey at least partially. Participants might not have answered each question.
Tobacco Prevention and Control

Smoking tobacco increases the risk for chronic diseases like cancer, heart disease, chronic obstructive pulmonary disease (COPD), and stroke. It is the leading cause of preventable death. Not smoking, or quitting smoking (for current smokers) can greatly reduce the risk for developing diseases like this, and can prolong life. Tobacco prevention is important in creating healthy communities. New tobacco and nicotine products are emerging constantly, making tobacco prevention more important than ever.

Smoking-related health problems cost Michigan more than $4.5 billion per year.

Services:

Local health departments that participate in tobacco prevention conduct tobacco compliance checks, vendor education, and general outreach regarding cessation resources. Additionally, many local health departments partner with local coalitions that focus on tobacco reduction or substance abuse. These partnerships help to raise awareness of the dangers of tobacco products in the community and enable the community members to educate themselves so they can take action for tobacco prevention and cessation.

Goals:

Local health promotion, prevention, and education activities centered on tobacco prevention are meant to:

- Prevent adverse health outcomes associated with long term tobacco or nicotine product use
- Create awareness in the community about the dangers of tobacco and nicotine addiction
- Prevent youth from using tobacco and nicotine products

Impact:

Over 1,500 calls were placed to the Michigan Tobacco Quit Line between October 1st, 2016 and March 31st, 2017.

Created by the Barry-Eaton District Health Department for the Michigan Association of Local Public Health with funding from the Michigan Department of Health and Human Services. August 2018.

*39 of Michigan’s local health departments indicated that they offer tobacco prevention services (of 41 who participated in the survey). Participants might not have answered each question.
Tuberculosis (TB) is a communicable disease caused by the bacterium *Mycobacterium tuberculosis*. TB is transmitted (spread) through the air from one person to another. If not treated properly, TB disease can be fatal. Michigan local health departments work with a variety of health care and laboratory partners to control the spread of TB through testing, treatment, prevention, control, and education.

### Services:

Local health departments are the primary local agency responsible for preventing and controlling TB. However, TB control is a complex undertaking and requires the collaborative efforts of a broad range of persons, organizations, and institutions inside and outside the public health sector. The essential roles of local health departments are to plan, coordinate, and evaluate TB control and prevention efforts. To fulfill these roles, local health departments may engage in and provide oversight on TB planning and policy development, contact investigations, clinical and diagnostic services for TB patients and their contacts, training and education, surveillance, data management, and monitoring and evaluation.

### Goals:

Local health department TB control programs prevent and control the spread of TB by:

- Identifying cases through testing and reporting
- Treating active cases through directly observed therapy
- Recommending and instituting infection control measures
- Providing education to patients, health care providers, and the community
- Ensuring timely reporting of cases to the state health department

### Key Positions

<table>
<thead>
<tr>
<th>Position</th>
</tr>
</thead>
<tbody>
<tr>
<td>Public Health Nurses</td>
</tr>
<tr>
<td>Clinic Support Staff</td>
</tr>
<tr>
<td>Public Health Physicians</td>
</tr>
</tbody>
</table>

### 252 cases of active and latent tuberculosis were reported in Michigan during 2017.

### Funding Sources for Michigan Local Health Department TB Screening Programs (n = 41 Local Health Departments*)

<table>
<thead>
<tr>
<th>Source</th>
<th>Number of Departments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Local appropriations</td>
<td>35</td>
</tr>
<tr>
<td>Medicaid</td>
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</tr>
<tr>
<td>Fees</td>
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<tr>
<td>Private insurance</td>
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<tr>
<td>Medicare</td>
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</tr>
<tr>
<td>Donations</td>
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</tr>
<tr>
<td>Federal grants</td>
<td>5</td>
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<td>Nlilinge</td>
<td>5</td>
</tr>
<tr>
<td>Other grants</td>
<td>15</td>
</tr>
<tr>
<td>Other</td>
<td>10</td>
</tr>
</tbody>
</table>

### Impact:

Local health departments may have to monitor each active TB patient for 6 to 12 months to ensure their TB disease is cured.

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Created by the Barry-Eaton District Health Department for the Michigan Association of Local Public Health with funding from the Michigan Department of Health and Human Services. August 2018.

*41 out of 45 of Michigan’s local public health departments participated in the survey at least partially. Participants might not have answered each question.
Having a safe drinking water supply is important to the public’s health. Contaminants in drinking water could affect many people because we use water every day. Some contaminants in water are naturally found in the environment, and some are human made. Examples of contaminants are bacteria, viruses, parasites, arsenic, chemicals, and fertilizers. Contaminants in drinking water can be a threat to human health, especially the health of young children, the elderly, and pregnant women. Local, state, and federal drinking water protection programs play a key role in providing safe drinking water.

Services:
All local health departments (LHDs) participate in public and private drinking water regulation, which leads to ground water protection. Some LHDs do more water supply quality and safety activities including complaint response, long-term groundwater quality monitoring programs, sample collection, geographic information system (GIS) mapping, drinking water testing outside of permitting requirements, laboratory specimen testing, testing of contaminated sites, geothermal well construction, water records and abandoned well tracking.

Goals:
Regulation, inspection, and monitoring activities around water supply quality and safety are meant to:
- Reduce contamination of groundwater and surface water resources
- Maintain the quality of drinking water for county residents
- Protect natural resources from contamination

Local health departments respond to hazards in water supplies such as disease-causing bacteria, or chemicals such as PFAS (Per- and Polyfluoroalkyl Substances)

Meets Public Health Standards:
- Michigan Public Health Code
- Michigan Local Public Health
- Public Health Accreditation Board

Statewide Funding Sources for Water Supply Quality and Safety Activities
(N=39 Local Health Departments)

<table>
<thead>
<tr>
<th>Source</th>
<th>Number of LHDs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Donations</td>
<td>2</td>
</tr>
<tr>
<td>Fees</td>
<td>35</td>
</tr>
<tr>
<td>Other grants</td>
<td>5</td>
</tr>
<tr>
<td>Federal grant</td>
<td>9</td>
</tr>
<tr>
<td>State grant</td>
<td>35</td>
</tr>
<tr>
<td>Local appropriations</td>
<td>33</td>
</tr>
</tbody>
</table>

Impact:
Clean and safe drinking water can prevent diseases like E.coli, and reduce rates of waterborne disease.

Created by the Barry-Eaton District Health Department for the Michigan Association of Local Public Health with funding from the Michigan Department of Health and Human Services. August 2018.

*39 of Michigan’s local health departments indicated that they participate in water supply safety and quality services (of 41 who participated in the survey). Participants might not have answered each question.
Local Health Department

Women, Infants, and Children Program

The Women, Infants, and Children (WIC) program is a health and nutrition program that helps women who are pregnant, breastfeeding, or postpartum, and infants and children up to 5 years old, eat well, be active, and stay healthy. The WIC program has demonstrated a positive effect on pregnancy outcomes and child growth and development. The majority of Michigan local health departments provide WIC services.

Key Positions

- WIC Coordinators
- Dietitians/Nutritionists
- Public Health Nurses
- Clinical and Support Staff
- Breastfeeding Peer Mentors

Impact:
For every dollar spent by the WIC program, more than 3 dollars in subsequent health care costs are saved.

Services:

Local health departments that conduct WIC programming offer a number of services to WIC clients, including nutrition education and counseling, breastfeeding support, food benefits through WIC EBT cards to buy healthy food, and referrals to health care, immunizations, and other programs. WIC staff help pregnant women and families determine if they qualify for WIC benefits and assist with the enrollment process. In Michigan, 81% of WIC programs are conducted by local health departments.

Many local health departments also foster relationships with Michigan agricultural producers to support WIC Project FRESH. The program provides WIC participants with local, fresh produce from authorized farmers, farmers’ markets, and roadside stands.

Each month, more than 200,000 moms, babies, and children receive nutritious food from the Michigan WIC Program.

Goals:

Women, Infants, and Children programs conducted by local health departments

- Improve pregnancy outcomes and child growth and development
- Provide women who are pregnant, have recently given birth, or are breastfeeding with education and resources about the birthing process, nutrition during and after pregnancy, breastfeeding and breast pumps, and other health issues
- Support young children and families by providing nutritious food and infant formula

Meets Public Health Standards:

- Michigan Public Health Code
- Michigan Local Public Health Accreditation
- Public Health Accreditation Board

Funding Sources for Michigan Local Health Department WIC Programs (n = 36 Local Health Departments*)

- State grants
- Local appropriations
- Federal grants
- Medicaid
- Other grants
- Other

Funding Sources (can be multiple)

Created by the Barry-Eaton District Health Department for the Michigan Association of Local Public Health with funding from the Michigan Department of Health and Human Services. August 2018.

*36 of Michigan’s local health departments indicated that they offer WIC services (of 41 who participated in the survey). Participants might not have answered each question.

This institution is an equal opportunity provider.