

Full Program Plan Report Mid-Ohio Valley Health Department 2016 Reporting Year

Transmittal Information

ALPEREN CONT.	Mid-Ohio Valley Health Department	
Mailing Street Addres	z: 211 Sixth Street	
Mailing Cit	2: 211 Sixth Street	
Mailing Count	Wood	
Mailing Zi _l	26101	
Phon	2: (304) 485-7374	
Fa	:: (304) 485-0137	
Email Addres	cristy.a.riggs@wv.gov	-
Website Address	::	
Health Department Type		
Delivery Street Addres.	211 Sixth Steet	
Delivery City	? Parkersburg	
Delivery County	·:	
Delivery Zip	: 26101	
	Fiscal Year April 1, 2015 to July 31, 2015	
Chairperson		
Phone:	Fax:	Email:
Chairperson Signature:		_ Date: 5/29/2015
David B.	Couch	
Health Officer		
Health Officer Signature:		Date: 5/29/2015
David A	very, MD	

By signing the above, the Mid-Ohio Valley Health Department agrees to comply with all applicable state and federal rules, regulations, Department of Health and Human Resources policies and standards.

2016 Reporting Year

Emergency Information

Answering Machine:	No	
Answering Service:	No	
Office of Emergency Services/911/Communications Center:	No	
On-call Pager or Cell	Yes	(304) 488-0406

Services

Adult Services	Yes
Behavioral Health	No
Breast/Cervical Cancer	Yes
Cancer Detection	Yes
Cardiac	No
Community Health Promotion	Yes
Dental	Yes
Diabetes	Yes
Disaster Response	Yes
Environmental Health	Yes
Epidemiology	Yes
Family Planning	Yes
Fluoride	Yes
General Health	Yes
Health Check	Yes
HIV/AIDS	Yes
Home Health	No .
Hypertension	Yes
Immunization	Yes
Lab	Yes
Lead	Yes
Pediatric	No
Prenatal	No
Right from the start	No
School Health	No
Sexually Transmitted Disease	Yes

Mid-Ohio Valley Health Department 2016 Reporting Year

Services

Threat Preparedness	Yes	
Tobacco	Yes	
Tuberculosis Services	Yes	
WIC	Yes	

Fees

Clinical Fee	Yes
Environmental Permit Fee	Yes
Environmental Service Fees	Yes

Mission Statement

It is the Mission of the Mid-Ohio Valley Health Department to: Assess on a continuing basis the status of the health of the population within the Agency's jurisdiction; Plan, develop and administer services designed to maintain a healthy environment with the Agency's jurisdiction, and to prevent, diagnose, and treat illnesses and injuries of which the population is afflicted, particularly when such prevention, diagnosis and treatment cannot or will not be provided by the private sector, or when an unmet need exists; Investigate outbreaks of disease and take measures to prevent further spread; Work with the State of West Virginia and others to continually evaluate the effectiveness of the services it provides; Be fully accountable to the Mid-Ohio Valley Board of Health, other souces of funding, and the public in general for the quality, efficiency, effectiveness and accessibility of health care through applied research and demonstration;

Hours of Operations

Monday	8:00 AM - 4:00 PM
Tuesday	8:00 AM - 4:00 PM
Wednesday	8:00 AM - 4:00 PM
Thursday	8:00 AM - 4:00 PM
	8:00 AM - 4:00 PM
Saturday	Closed
Sunday	Closed

Activities outside normal hours of operation

In Wood County WIC is open on Tuesdays 8:00 AM to 7:30 PM and Thursdays 8:00 AM to 6:00 PM

2016 Reporting Year

Other Facilities

Location Name:	
Address:	
City:	
State:	
Zip:	
Contact Name:	
Hours:	

Combined Health Department

Health Department Name:	Mid-Ohio Valley Health Department - Calhoun Cty
Address:	P.O. Box 33
City:	Grantsville
State:	WV
Zip:	26147
Phone:	(304) 354-6101
Fax:	(304) 354-6654
Monday:	8:00 AM - 4:00 PM
Tuesday:	8:00 AM - 4:00 PM
Wednesday:	8:00 AM - 4:00 PM
Thursday:	8:00 AM - 4:00 PM
Friday:	8:00 AM - 4:00 PM
Saturday:	Closed
Sunday:	Closed

Health Department Name:	Mid-Ohio Valley Health Department - Pleasants Cty
Address:	605 Cherry Street
City:	St. Marys
State:	WV
Zip:	26170
Phone:	(304) 643-2917

2016 Reporting Year

Combined Health Department

Fax:	(304) 684-2845	10 2
Monday:	8:00 AM - 4:00 PM	F. 3430 ii - 1960 feet 1960 ii
Tuesday:	8:00 AM - 4:00 PM	-
Wednesday:	8:00 AM - 4:00 PM	
Thursday:	8:00 AM - 4:00 PM	
Friday:	8:00 AM - 4:00 PM	
Saturday:	Closed	
Sunday:	Closed	- VI -32 (1)

Health Department Name:	Mid-Ohio Valley Health Department - Ritchie Cty
Address:	125 West Main Street
City:	Harrisville
State:	WV
Zip:	26362
Phone:	(304) 643-2917
Fax:	(304) 643-4092
Monday:	8:00 AM - 4:00 PM
Tuesday:	8:00 AM - 4:00 PM
Wednesday:	8:00 AM - 4:00 PM
Thursday:	8:00 AM - 4:00 PM
Friday:	8:00 AM - 4:00 PM
Saturday:	Closed
Sunday:	Closed

Health Department Name:	Mid-Ohio Valley Health Department -Roane Cty
Address:	PO Box 909
City:	Spencer
State:	WV
Zip:	25276
Phone:	(304) 927-1480

2016 Reporting Year

Combined Health Department

Fax:	(304) 927-6043
Monday:	8:00 AM - 4:00 PM
Tuesday:	8:00 AM - 4:00 PM
Wednesday:	8:00 AM - 4:00 PM
Thursday:	8:00 AM - 4:00 PM
Friday:	8:00 AM - 4:00 PM
Saturday:	Closed
Sunday:	Closed

Health Department Name:	Mid-Ohio Valley Health Department - Wirt Cty
Address:	PO Box 670
City:	Elizabeth
State:	WV
Zip:	26143
Phone:	(304) 275-3131
Fax:	(304) 275-6590
Monday:	8:00 AM - 4:00 PM
Tuesday:	8:00 AM - 4:00 PM
Wednesday:	8:00 AM - 4:00 PM
Thursday:	8:00 AM - 4:00 PM
Friday:	Closed
Saturday:	Closed
Sunday:	Closed

Mid-Ohio Valley Health Department 2016 Reporting Year

Location Information

Driving directions from Charleston:

Take I-77 N toward I-79 / Parkersburg / Huntington

Keep right to take I-77 N toward I-79 / Parkersburg

Take EXIT 173 toward WV-95 / Camden Ave / Downtown

Turn left onto Little Kanawha River Rd

Take the 1st left onto WV-95

Turn right onto Division Street / WV-14. Continue to follow WV-14

Turn right / then Turn Left onto 6th Street

211 6th Street is on the right.

Number of miles from Charleston	76.85
Latitude	9.83940000
Longitude	42.56640000

Standards

Change in location	No
Change in health officer	No
Change in administrator	Yes
Change in local board of health structure	No

2016 Reporting Year

Financial Information

Projected Budget Information

Funding Source	Projected Revenue	2000 002-20
State Revenue	\$1,252,696.31	10 MM 11 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Direct County Commission	\$110,700.00	
County Levy	\$6,500.00	······································
City Levy	\$0.00	***************************************
Municipalities	\$59,300.00	
Board of Education	\$0.00	4.0/
Clinical Service Revenue	\$713,568.58	
Environmental Fee Permits	\$339,947.00	
Environmental Fee Services	\$0.00	
Federal Revenue	\$1,746,289.29	× 1 •
Additional Revenue	\$206,088.35	
Total:	\$4,435,089.53	

Projected Expenditures

Expense	Amount	
Classified Service Personnel	\$3,311,482.93	
Current Operating Expenditures	\$1,046,964.77	
Capital Outlay Expenditures	\$0.00	
Total:	\$4,358,447.70	

Additional Revenue Sources Information

Funding Source Description	Projected Revenue Amount		
Wirt County Rent	\$1,200.00		
Roane Facility Fees for EMS	\$4,000.00		
Interest Income	\$2,100.00		
Rebates and Refunds	\$9,000.00		
Grant Manager Revenue	\$40,000.00		
Prevention Resource Center	\$135,446.50		
Diabetes Prevention	\$14,341.85		

Mid-Ohio Valley Health Department 2016 Reporting Year

Additional Revenue Sources Information

Funding Source Description	Projected Revenue Amount
Total:	\$206,088.35

Projected Budget Information Continued

Actual Ending Balance:	\$1,967,515.69	
Number of FTE's (Full-time Equivalent):	84.20	
Current Investments:	\$1,513,459.80	
Accounting Software Program:	AccPac	
Other Accounting Software Program:		
Software Year:	2010	

0.227	Personnel	Facility	Utilities	Other	Total
County	\$15,600.00	\$338,610.00	\$8,500.00	\$25,000.00	\$387,710.00
Municipality	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Board of Education	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Гotal	\$15,600.00	\$338,610.00	\$8,500.00	\$25,000.00	\$387,710.00

Statewide Chart of Accounts

Account Name	Projected Program Expenditures
Adult Services	\$0.00
Behavioral Health	\$0.00
Breast/Cervical Cancer	\$0.00
Cancer Detection	\$0.00
Cardiac	\$0.00
Community Health Promotion	\$64,013.50
Dental	\$187,222.45
Diabetes	\$15,300.19
Disaster Response	\$0.00
Environmental Health	\$708,276.56
Epidemiology	\$65,340.64
Family Planning	\$92,707.17

2016 Reporting Year

Statewide Chart of Accounts

Account Name	Projected Program Expenditures	
Fluoride	\$0.00	2
General Health	\$0.00	
Health Check	\$3,752.00	
HIV/AIDS	\$0.00	
Home Health	\$0.00	
Hypertension	\$0.00	
Immunization	\$367,621.60	
Lab	\$0.00	
Lead	\$0.00	
Office Management and Administration	\$1,131,573.75	
Other	\$635,224.02	
Pediatric	\$0.00	
Prenatal	\$0.00	
Right from the Start	\$0.00	
School Health	\$0.00	
Sexually Transmitted Diseases	\$50,854.61	
Threat Preparedness	\$199,641.42	
Tobacco	\$85,002.42	
Tuberculosis Services	\$18,479.80	
WIC	\$733,437.57	
Total:	\$4,358,447.70	

Statewide Chart of Accounts

Has your local health department completed and audit within the last fiscal year?	Yes
If no, please provide a detailed description of the steps your agency has taken to secure an audit in the box below.	
In your most recent audit were you required to submit a "Corrective Action Plan"? If yes, please submit documentation.	No
Does your health department expend \$500,000 or more in federal funding?	Yes

Mid-Ohio Valley Health Department 2016 Reporting Year

Contacts by Position

Position	Name
Administrator	Dr. Drema Mace
Primary Nursing Contact	Ms. Tonia A Lang
Health Officer	Mr. David Avery
Equipment and Information Technology Contact	Ms. Della M Lyons
Financial Management Contact	Tiffany D Kennedy Dowler
Environmental Health Contact	Mrs. Elizabeth S Green
Health Promotion Contact	Mrs. Carrie L Brainard
Epidemiology Contact 1	Mrs. Jessica L Woods
Epidemiology Contact 2	Mrs. Jessica L Woods
Rabies Contact	Mrs. Jessica L Woods
Sexually Transmitted Disease Contact	Ms. Tonia A Lang
Human Immunodeficiency Virus Contact	Ms. Tonia A Lang
Tuberculosis Contact	Mrs. Jenny C Mullen
Vaccine Preventable Disease Contact	Ms. Tonia A Lang
Smallpox Contact	Mrs. Jessica L Woods
West Virginia Electronic Disease Surveillance System Contact	Mrs. Jessica L Woods
Threat Preparedness Coordinator	Mr. Jim A Rose
Threat Preparedness Back-up	Mrs. Michelle L Atkinson
Strategic National Stockpile Coordinator	Mr. Jim A Rose
Strategic National Stockpile Back-up	Mrs. Michelle L Atkinson
Volunteer Coordinator	Ms. Kristine L Green
Volunteer Coordinator Back-up	Mr. Jim A Rose
Risk Communication Coordinator	Mrs. Carrie L Brainard
Risk Communication Coordinator Back-up	Mr. Jim A Rose
Responder Health & Safety Coordinator	Ms. Kristine L Green
Responder Health & Safety Coordinator Back-up	Mr. Jim A Rose
Health Alert Network Coordinator	Ms. Della M Lyons
Health Alert Network Coordinator Back-up	Ms. Ann R Swisher

Salary & FTE by Employee Listing

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Nama	Monthly Salary	Darcont ETE	
Name	prioning Salary	rercent rie	
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2016 Reporting Year

Dr. Drema Mace	\$6,037.00	1.00
Tiffany D Kennedy Dowler	\$3,758.00	1.00
Mrs. Sherry L Ellem	\$1,187.00	0.60
Ms. Miranda S Foutty	\$1,236.00	0.80
Ms. Andrea N Needs	\$2,150.00	1.00
Ms. Dorothy C Raber	\$2,545.00	1.00
Mr. Jim A Rose	\$4,283.00	1.00
Vacant	\$0.00	0.00
Mrs. Michelle L Atkinson	\$1,648.00	1.00
Mr. David Avery	\$1,170.00	0.09
Ms. Kathie J Bennett	\$1,395.00	0.75
Mrs. Nancy E Bond	\$3,143.00	1.00
Mrs. Carrie L Brainard	\$3,653.00	1.00
Mrs. Heather D Buchanan	\$2,458.00	1.00
Mr. Elbert Cline	\$485.00	0.35
Mr. Dale Copen	\$27.00	0.02
Mrs. Allison C Cox	\$2,211.00	1.00
Ms. Barbara Davis	\$180.00	0.13
Ms. Ronda L Davis	\$1,727.00	1.00
Ms. Tami L Davis	\$2,759.00	1.00
Ms. Dorinda L Deem	\$2,566.00	1.00
Mrs. Deborah M Dennis	\$3,475.00	1.00
Ms. Tara L Engle	\$2,224.00	1.00
Mrs. Caroline J Eyberg	\$1,744.00	0.80
Mr. Joseph B Faller	\$2,296.00	1.00
Mr. Brandon R Franklin	\$1,572.00	1.00
Mrs. Gaines M Nicole	\$1,648.00	1.00
Ms. Michelle Gordon	\$346.00	0.25
Mrs. Elizabeth S Green	\$3,748.00	1.00
Ms. Kristine L Green	\$2,402.00	1.00
Mrs. Rebecca L Grueser	\$3,249.00	1.00
Mrs. Jennifer K Habeb	\$2,694.00	1.00
Mr. William R Helmick	\$2,550.00	1.00

2016 Reporting Year

Fore irebolding if	a Carl	
Ms. Barbara C Holt	\$2,423.00	1.00
Mrs. Debra K Hungate	\$3,116.00	1.00
Mrs. Jamie R Jacobsen	\$2,765.00	1.00
Mr. Forest K Jordan	\$2,881.00	1.00
Ms. Lora A Knapp	\$1,983.00	0.75
Ms. Tonia A Lang	\$4,550.00	1.00
Ms. Angela F Linville	\$2,296.00	1.00
Mr. Randy P Lowe	\$2,670.00	1.00
Ms. Dora Lucas	\$180.00	0.13
Mrs. Lisa M Ludwig	\$2,076.00	1.00
Ms. Della M Lyons	\$2,962.00	1.00
Ms. Teresa M Mackey	\$1,855.00	1.00
Mr. Charles W Mapes	\$3,508.00	1.00
Mrs. Joan T McCay	\$3,976.00	1.00
Mrs. Christi A Merrill	\$3,239.00	1.00
Mrs. Devena D Moore	\$2,452.00	1.00
Mrs. Tammy L Moyers	\$1,727.00	1.00
Mrs. Jenny C Mullen	\$1,918.00	0.60
Ms. Chetea L Newberry	\$277.00	0.20
Mrs. Robin L Parsons	\$2,775.00	1.00
Mrs. Mary L Peters	\$3,505.00	1.00
Ms. Mary R Putnam	\$2,871.00	1.00
Mrs. Bverely A Ray	\$1,618.00	1.00
Mrs. June A Rhodes	\$4,304.00	1.00
Mrs. Cristy A Riggs	\$2,704.00	1.00
Ms. Judy Ryan	\$1,346.00	0.25
Mrs. MaryBeth E Shea	\$2,943.00	1.00
Mrs. Tina L Smith	\$1,727.00	1.00
Ms. Linda K Smithson	\$3,538.00	1.00
Mrs. Susan A Stoneking	\$1,727.00	1.00
Ms. Ann R Swisher	\$3,152.00	1.00
Mrs. Brenda S Townsend	\$1,860.00	1.00
Ms. Leah A Triplett	\$1,584.00	0.60

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Ms. Lola Waggoner	\$180.00	0.13	
Mrs. Helene D Watkins	\$1,727.00	1.00	
Mrs. Connie L Weiss	\$1,781.00	1.00	
Mrs. Darlene K Williams	\$1,892.00	1.00	
Mrs. Jessica L Woods	\$2,919.00	1.00	
John L Dennis	\$2,076.00	1.00	
Lisa E Freeland	\$2,076.00	1.00	
Yolanda A Garcia	\$1,546.00	1.00	
Cheryl A Richards	\$1,546.00	1.00	
Renee L Riter	\$1,159.00	0.75	1 1-00
Janette S Robinson	\$1,546.00	1.00	
Ronda E Stutler	\$1,706.00	1.00	
Sondra J Wallace	\$2,588.00	1.00	
Angela D Waters	\$1,236.00	0.80	-
Ashlye N Wiley	\$2,076.00	1.00	Ne.
Sandra L Williams	\$346.00	0.25	
Total	\$181,474.00	70.25	1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.

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Communicable Disease

Immunization Services

1	Does your local health department report all immunizations administered to children 0-18 years of age every two weeks as required by 64C SR7?	Yes
2	Does your local health department document VFC eligibility (or lack thereof) in the immunization records entered into WVSIIS, either through direct data entry into WVSIIS or through the HealthStat 2000 system for export into WVSIIS?	Yes
3	Does your local health department conduct case management activities related to infants born to HBsAg positive mothers and report findings to the Division of Immunization Services in a timely manner?	Yes
4	Does your local health department report vaccine doses administered and vaccine doses on-hand by the fifth business day of each month?	Yes
5	Does your local health department submit a completed temperature log by the fifth business day of each month?	Yes
6	Does your local health department submit a quarterly report documenting progress toward meeting the objectives outlined in the Immunization Action Plan within 15 days of the end of each quarterly reporting period?	Yes
7	Has your Local Board of Health been apprised of the BPH recommendation to adopt or expand a private vaccine purchasing and billing system which would require the LHD to bill third party payers and individuals (on sliding fee scale) for some out-of-pocket payment?	Yes
8	Has your Local Board of Health indicated any concern or unwillingness regarding the development or expansion of such a private vaccine immunization program?	No
9	If you answered No or NA to any question, please explain: There have been no issues with the adult private vaccine program.	•

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STD, HIV and Hepatitis

1	Does your local health department collaborate with Disease Intervention Specialists (DIS) in investigating and assuring treatment for all syphilis, gonorrhea and Chlamydia cases (including all clinical cases i.e., all positives, all symptomatic, and all contacts of a known positive case) according to 2010 CDC STD Treatment Guidelines.	Yes
2	Does your local health department complete and submit the HIV/AIDS Confidential Case Report on all newly diagnosed HIV/AIDS cases to the West Virginia Division of STD/HIV and Hepatitis in a confidential, postage-paid envelope.	No
3	Does your local health department routinely recommend syphilis and HIV testing to all individuals who have tested positive for an STD?	Yes
4	Does your local health department offer HIV/AIDS testing and counseling including posttest counseling and referral on all HIV/AIDS positive cases?	Yes
5	Does your local health department complete and submit VD 91 (confidential morbidity and treatment report) on all positive Chlamydia, gonorrhea and syphilis cases.	Yes
6	Does your local health department routinely schedule appointments for individuals to return for their test results?	No
7	Does your local health department identify and investigate hepatitis B cases, including partner management.	Yes
8	If you answered No or NA to any question, please explain: Patients with positive results for chlamydia, gonorrhea and syphilis are phone or certified letter. Positive HIV results are given face to face by or walk in. We also provide results for all testing on a walk in basis.	

Tuberculosis Elimination

1	Does your local health department provide directly observed therapy to all active TB patients?	Yes
2	Does your local health department perform a TB risk assessment prior to testing on all individuals presenting for tuberculin screening/testing?	Yes
3	Does your local health department evaluate, treat and report to TB Elimination all immigrants and refugees designated as Class A, B1 or B2?	Yes

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4	Does your local health department perform HIV counseling and testing for all active and latent TB patients?	Yes
5	Does your local health department interview the patient (or their proxy) and start a contact investigation within 3 days of notification of a pulmonary/laryngeal case of TB?	Yes
6	Local health department personnel will participate in the Cohort Review Process for all active TB cases within their jurisdiction.	Yes
7	Does your local health department submit all required reports when they are due to the Division of TB Elimination? (All required reports may be found on WV-DTBE webpage @ www.dhhr.wv.gov/oeps/tuberculosis).	Yes
8	If you answered No or NA to any question, please explain: 5. With approval of WVTE	

Infectious Disease Epidemiology

1	Does your local health department use WVEDSS to report all infectious diseases?	Yes
2	Does your local health department report all outbreaks to DIDE within one hour of notification?	Yes
3	Does your local health department report infectious diseases, complete the investigation, and submit for review within one month of notification?	Yes
4	Does your local health department actively participate in all outbreak investigations?	Yes
5	Does your local health department complete animal bite investigations within 30 days of report; and does your health department manage animal bites in accordance with standards in the current DC-4?	No
6	Does your local health department have an influenza sentinel provider that consistently reports throughout the season?	Yes
7	Does your local health department identify, investigate, and manage hepatitis B cases according to the BPH Hepatitis B protocol, including partner management?	Yes

Mid-Ohio Valley Health Department 2016 Reporting Year

8 If you a

If you answered No or NA to any question, please explain:

Done within a timely manner but not always within 30 days.

Feedback / Ideas

1

We invite your ideas on how we could better support your local health department in performing your job. (For example, specific trainings, technical assistance, supplies, process changes, things you like and don't want changed, etc.):

No further comments

Health Promotion

Community Health Needs Assessment

1	Was a formal community health needs assessment completed in your county within the past 5 years?	True
2	If yes, enter the year the assessment was completed.	2013
3	If yes, when do you plan to start your next assessment?	8/1/2015
4	If no, within this fiscal year, when do you expect a community health needs assessment to be completed?	
5	If no, describe plans to complete the community health needs assessme include a time line of these actions.	ent and
6	List one to five priority health areas from the community health needs that you plan to address: (minimum of one required) Oral Health Diabetes Tobacco Cardiovascular Disease Obesity	assessment

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Community Health Implementation Plan

Priority Area:	Oral Health
Objective:	Promote oral health across the lifespan
Activity	Screen, educate and refer children to medical home
Priority Area:	Oral Health
Objective:	Increase access to preventative oral health programs in the region
Activity	Screen and refer adult clients to volunteer dentist/oral surgeon in region
Priority Area:	Торассо
Objective:	Reduce the prevalance and incidence of tobacco use in region
Activity	Increase community outreach efforts including referrals to quitline
Priority Area:	Tobacco
Objective:	Reduce deaths due to smoking-related diseases
Activity	Advocate for tobacco-free policies and work to create tobacco-free outdoor facilities
Priority Area:	Diabetes
Objective:	Increase capacity for referrals to reduce the prevalence of type 2 diabetes
Activity	Offer Diabetes Prevention program and provide feedback to physicians
Priority Area:	Obesity
Objective:	Reduce health issues among SNAP population
Activity	Provide nutrition and physical education for SNAP recipients in region
Priority Area:	Obesity
Objective:	Reduce obesity in students in schools with high free lunch population
Activity	Provide Show Me Nutrition classes for 6th through 8th grade students
Priority Area:	Cardiovascular Disease
Objective:	Reduce the incidence and prevalence of high blood pressure

Mid-Ohio Valley Health Department 2016 Reporting Year

Community Health Implementation Plan

Activity Conduct family interventio to increase physical activity

Training and Technical Assistance Needs

List Training and Technical Assistance Needs

Soft Dent software training for employees not currently trained

Environmental Health

Disaster / Disease

Establishment or Discipline		Number	Inspections
1	Tattoo Studio:	9	9 every Year
2	Body Piercing Studio:	4	4 every Year

Food

Establis	hment or Discipline	Risk Based Inspections Conducted?	Number	Inspections
1	Food Establishment:	No	636	1272 every Year

Establis	hment or Discipline	Number	Inspections
1	Milk Samples:	12	
2	Vending Machines:	63	63 every Year

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Temporary Food Facilities: 32 32

Housing / Institutions

Establ	ishment or Discipline	Number	Inspections
1	Bed and Breakfast	3	3 every Year
2	Child Care Facilities	53	106 every Year
3	Home Loan Evaluations		
4	Institutions	1	1 every Year
5	Labor Camps	0	0 every Year
6	Manufactured Home Communities	78	78 every Year
7	Motel/Hotel/Lodging	24	24 every Year
8	Other Care Facilities	5	5 every Year
9	Schools	60	60 every 2 Years

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Recreation

Establi	Establishment or Discipline		Inspections
1	Campground	31	31 per Season
2	Fairs/Festivals/Mass Gatherings	37	37 per Event
3	Recreational Water Facilities	48	96 per Season
4	Organized Camps	10	10 per Year
5	Parks/Forests	46	46 per Year

Sewage

Establ	Establishment or Discipline	
1	Alternative System	3
2	Home Aeration Unit	9
3	Standard Individual Systems	162
4	Sewage Tank Cleaners	11

Water

Establis	nment or Discipline	Number
1	Individual Supply	81

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Permit		Fee for Permit as of July 1
1	Permit Late Fee Charged	True
2	Bed And Breakfast Fee	\$50.00
3	Mass Gathering (includes fairs, festivals, concerts) Fee	\$50.00
4	Care Facilities Fee	\$50.00
5	School (Physical) Fee	\$50.00
6	Mobile Food Unit Fee	\$100.00
7	Organized Camp Fee	\$75.00
8	Recreational Water Facility Fee	\$100.00
9	Retail Food Store (1 Checkout) Fee	\$50.00
10	Retail Food Store (2 Checkouts) Fee	\$100.00
11	Retail Food Store (3 Checkouts) Fee	\$150.00
12	Retail Food Store (4 Checkouts) Fee	\$200.00
13	Retail Food Store (5 Checkouts) Fee	\$250.00

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14	Retail Food Store (6 or More Checkouts) Fee	\$300.00
15	Temporary Food Service Establishment Fee	\$50.00
16	Vending Machine Permits Fee	\$50.00
17	Water Well Permits Fee	\$100.00
18	Campground Permits (1-10 Sites) Fee	\$50.00
19	Campground Permits (11-14 Sites) Fee	\$55.00
20	Campground Permits (15 Sites) Fee	\$75.00
21	Campground Permits (20 Sites) Fee	\$100.00
22	Campground Permits (25 Sites) Fee	\$125.00
23	Campground Permits (30 Sites) Fee	\$150.00
24	Campground Permits (35 Sites) Fee	\$175.00
25	Campground Permits (40 Sites) Fee	\$200.00
26	Campground Permits (45 Sites) Fee	\$225.00
27	Campground Permits (50 Sites) Fee	\$250.00

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28	Campground Permits (55 Sites) Fee	\$275.00
29	Campground Permits (60 Sites) Fee	\$300.00
30	Campground Permits (65 Sites) Fee	\$325.00
31	Campground Permits (70 Sites) Fee	\$350.00
32	Campground Permits (75 Sites) Fee	\$375.00
33	Campground Permits (80 Sites) Fee	\$400.00
34	Family Day Care (7-12 Children) Fee	\$50.00
35	Day Care Centers (13-25 Children) Fee	\$100.00
36	Day Care Centers (>25 Children) Fee	\$150.00
37	Food Service Establishment (Seating 0-20) Fee	\$100.00
38	Food Service Establishment (Seating 21-50) (old 21-35) Fee	\$200.00
39	Food Service Establishment (Seating 21-50) (old 36-50) Fee	\$200.00
40	Food Service Establishment (Seating 51-80) (old 51-75) Fee	\$300.00
41	Food Service Establishment (Seating 51-80) (old 76-80) Fee	\$300.00

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42	Food Service Establishment (Seating Over 80) Fee	\$400.00
43	Food Service Establishment w/ Liquor add Fee	\$100.00
44	Hotel/Motel (0-20 Rooms) Fee	\$100.00
45	Hotel/Motel (21-50 Rooms) (old 21-35) Fee	\$200.00
46	Hotel/Motel (21-50 Rooms) (old 36-50) Fee	\$200.00
47	Hotel/Motel (51-80 Rooms) (old 51-75) Fee	\$300.00
48	Hotel/Motel (51-80 Rooms) (old 76-80) Fee	\$300.00
49	Hotel/Motel (Over 80 Rooms) Fee	\$400.00
50	Individual, Innovative & Alternative Sewage Systems - Conventional Single Family Dwelling Fee	\$150.00
51	Individual, Innovative & Alternative Sewage SystemsAll other types Fee	\$300.00
52	Manufactured Home Communities (Up to 20 Sites) Fee	\$100.00
53	Manufactured Home Communities (25 Sites) Fee	\$125.00
54	Manufactured Home Communities (30 Sites) Fee	\$150.00
55	Manufactured Home Communities (35 Sites) Fee	\$175.00

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56	Manufactured Home Communities (40 Sites) Fee	\$200.00
57	Manufactured Home Communities (45 Sites) Fee	\$225.00
58	Manufactured Home Communities (50 Sites) Fee	\$250.00
59	Manufactured Home Communities (55 Sites) Fee	\$275.00
60	Manufactured Home Communities (60 Sites) Fee	\$300.00
61	Manufactured Home Communities (65 Sites) Fee	\$325.00
62	Manufactured Home Communities (70 Sites) Fee	\$350.00
63	Manufactured Home Communities (75 Sites) Fee	\$375.00
64	Manufactured Home Communities (80 Sites) Fee	\$400.00
65	Subdivisions (1-5 Lots) Fee	\$100.00
66	Subdivisions (6-10 Lots) Fee	\$100.00
67	Subdivisions (11 Lots) Fee	\$110.00
68	Subdivisions (12 Lots) Fee	\$120.00
69	Subdivisions (13 Lots) Fee	\$130.00

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Permit Fees

70	Subdivisions (14 Lots) Fee	\$140.00
71	Subdivisions (15 Lots) Fee	\$150.00
72	Subdivisions (16-18 Lots) Fee	\$160.00
73	Subdivisions (19-23 Lots) Fee	\$190.00
74	Subdivisions (24 Lots) Fee	\$240.00
75	Subdivisions (25 Lots) Fee	\$250.00
76	Subdivisions (26 Lots) Fee	\$260.00
77	Subdivisions (27 Lots) Fee	\$270.00
78	Subdivisions (28 Lots) Fee	\$280.00
79	Subdivisions (29 Lots) Fee	\$290.00
80	Subdivisions (30 Lots) Fee	\$300.00
81	Tattoo Studios Fee	\$200.00
82	Body Piercing Studio Fee	\$200.00
83	Sewage Cleaning Trucks Fee	\$16.00

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Service		Fee for Service as of July 1	
1	Duplicate Foodhandler's Card Fee	\$0.00	
2	Food Worker Training-food handler's card- Volunteer/non-profit Fee	\$0.00	
3	Food Worker Trainingfood handler's cards Fee	\$5.00	
4	Campground Re-Inspection Fee	\$0.00	
5	Child Care Center Re-Inspection Fee	\$0.00	
6	Food Establishment Re-Inspection Fee	\$25.00	
7	Hotel/Motel/ Lodging Re- Inspection Fee	\$0.00	
8	Manufactured Home Community Re-Inspection Fee	\$0.00	
9	Recreational Water Facilities Re-Inspection Fee	\$0.00	
10	School Re-Inspection Fee (physical plant only) Fee	\$0.00	
11	Sewage Re-Inspection Fee	\$0.00	
12	Tattoo Studio/ Body Piercing Studio Re-Inspection Fee	\$0.00	
13	Food Establishment Plan Review Fee (0-35 Seating Capacity) Fee	\$50.00	

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14	Food Establishment Plan Review Fee (36-75 Seating Capacity) Fee	\$100.00
15	Food Establishment Plan Review Fee (76 and Over Seating Capacity) Fee	\$150.00
16	Other Facilities Plan Review Fee Fee	\$0.00
17	Home Loan Evaluations-Individual Water Wells Fee	\$0.00
18	Home Loan Evaluations-Sewage Only Fee	\$0.00
19	Home Loan Evaluation -Water & Sewage Fee	\$0.00
20	Home Loan Evaluation -New Installation Fee	\$0.00
21	Home Loan Evaluations-Additional Visits Fee	\$0.00
22	Home Loan Evaluations-Sanitarian Fee Fee	\$0.00
23	Individual Water Samples Fee	\$50.00
24	Individual Water Sample Follow-up/Re-sample Fee	\$0.00
25	Subdivision Site Inspection Fee	\$100.00
26	Subdivision Consultation (No Charge if accompanied with a permit) Fee	\$0.00
27	Homeowner Installer's Test Fee	\$50.00

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28	Community Water Consultation (No Charge if accompanied with a permit) Fee	\$0.00
29	Health Education Fee	\$0.00
30	Consultative Services (normally done in the field) Fee	\$0.00
31	School Lunch Inspections Fee	\$0.00
32	School Physical Inspections Fee	\$0.00
33	Indoor Air Quality Evaluation (excluding cost of sample collection and/or analysis) Fee	\$0.00
34	Nuisance Complaint Investigation Fee	\$0.00
35	Animal Specimen/Rabies Testing (including head removal) Fee	\$0.00
36	Animal Bite Inspections Fee	\$0.00
37	Duplicate Permit Fee	\$0.00
38	Change of Installer Fee	\$0.00
39	Permit Re-Issue Fee	\$0.00
40	Food handlers card 3-year profit or non-profit Fee	\$0.00
41	Septic tank perc test inspection Fee	\$0.00

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Service Fees

42	Septic tank final inspection Fee	\$0.00
43	Field visit 2 hours (currently food handler class on-site) Fee	\$0.00
44	DEP Sewage Tank Registration-that portion returned to LHD Fee	\$15.00

Threat Preparedness

Primary Location:

Mid-Ohio Valley Health Dept

6th Street

Additional Location:

Civil Air Patrol Facility

Wood County Airport

Parkersburg, WV 26101

(304) 485-7374

Parkersburg, WV 26101

Feedback / Ideas

The Center for Threat Preparedness could better support local health in the delivery in Threat Preparedness Programing by being an active communications conduit between the respective counties and other local threat preparedness programs, as well as state and federal supportive programs and operations. A strong continued effort to achieve the "Whole Community Concept" at the local level supported from the state level. Continue to work to diminish silos at the local and state level between emergency management organizations to achieve better and more harmonious cooperation and eliminate organizational rivalries.

Promising Practices

Fromising Fractice #1	
Topic Area	
Community Health Assessment/Surveillance	Administrative
Communicable Disease Prevention/Control	Emergency Preparedness
✓ Chronic Disease Prevention	Other
Environmental Health Protection	
Specific Issue Addressed	

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Collaborative with WV Music Hall of Fame for physical activity and hydration stations in Middle Schools

Brief Description of Activity/Project

In order to make exercise and rethinking your drink a fun experience for middle school aged students, MOVHD partnered with the WV Music Hall of Fame Traveling Museum Project. The students get to tour the museum and utilize the interactive map to learn about famous artists from West Virginia. Then, while we have their attention, we teach them "The WV Mambo", a line dance that provides a fun way to be physically active. After they have exercised, the students are treated to a hydration station that teaches them how to flavor water naturally to quench thirst with cucumbers, lemon, strawberries, peaches, etc. This event kicks off a six week nutrition course "Show Me Nutrition" where the students learn how to eat more fruits and vegetables.

Full Program Plan Report Mid-Ohio Valley Health Department 2016 Reporting Year

Impact/Outcome

The impact is not only building good relationships with the schools in our region, but promotes the positive outcomes of weight loss, increase physical activity and overall well being of those in the classes.

Promising Practice #2

Topic Area	
Community Health Assessment/Surveillance	Administrative
Communicable Disease Prevention/Control	Emergency Preparedness
Chronic Disease Prevention	Other
Environmental Health Protection	
Specific Issue Addressed	
Combined Community Needs Assessment	

Brief Description of Activity/Project

The Mid-Ohio Valley region has a plethera of community needs assessments - large hospital, critical access hospitals, FQHC's, non-profits, mental health agencies and the health department are all required to have a needs assessment from the perspective of the populations served. MOVHD has taken the lead to combine those existing recent CNA's into one mega analysis looking at gaps in service, duplication, what works and what does not work. This information will be shared among all members of the Mid-Ohio Valley Health Alliance. Where duplication exists, we will work together to determine which agency will be responsible for each service and ensure that all populations have access to the services. In addition, we are conducting focus groups and key informant interview throughout the region for first hand knowledge of how best

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to ensure access to public health services in our communities.

Impact/Outcome

The outcome will be a more coordinated effort among public health agencies within the Mid-Ohio Valley region. Our goal is an integrated system of care that honors all providers while eliminating duplication of services and ensuring access to quality, cost efficient, state-of-the-art care for citizens of the six county region.

Promising Practice #3 Topic Area Community Health Assessment/Surveillance **✓** Administrative Communicable Disease Prevention/Control Emergency Preparedness Chronic Disease Prevention Other Environmental Health Protection Specific Issue Addressed Rental Car Use for mileage greater than 50 miles Brief Description of Activity/Project Because MOVHD receives the state rate for rental vehicles through the state contract, we implemented a policy that requires all employees traveling more than 50 miles to utilize a rental car and a WEX gas card. There is no travel reimbursement, only direct expense to the agency. We have realized a near \$40,000 savings over last years in-state travel expense.

Division of Local Health

Impact/Outcome

Cost savings and increased efficiency.