

CLINICAL SERVICES SUMMARY SEPTEMBER 2022

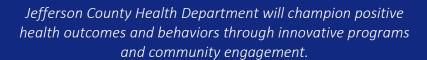
PROGRAM/GRANT	DELIVERABLE	OUTCOME/IMPACT
IMMUNIZATIONS Adult Immunization Contract Vaccines For Children (VFC) Health Disparities Contract	Increase vaccination capacity across the jurisdiction, including among high-risk and underserved populations	Back to school immunizations continued to be provided during the month of September. A total of 196 vaccination appointments were held in September in the office settings.
		Flu vaccines: Flu vaccine was received the last week of September, and the following clinics were scheduled and planned: Employee flu clinics, Homebound Flu, School Flu clinics, Community-based and organizational flu clinics.
		Covid-19: Bivalent Boosters continue to be available in September. Five COVID-19 vaccine clinics were held, 2 office clinics, 2 homebound clinics, and 1 clinic was provided through the homeless outreach event.
		Monkeypox vaccine: Three Monkeypox vaccine clinics were held in September and a total of 15 doses of Jynneos vaccine were provided through those clinics. In September, JCHD received Monkeypox vaccine requests from the MDHSS state survey and through Communicable Disease investigations.
FAMILY PLANNING Title X (MFHC)	Provide family planning services in accordance with the Title X	Family Planning clinic saw 107 unduplicated clients in September.
The Right Time Initiative (MFHC) Show Me Healthy Women Wise Woman	program priorities.	Our Family Planning team continues to plan for updated data reporting requirements for Title X and TRT through the Missouri Family Health Council (MFHC). The updated data reporting (FPAR 2.0) will be implemented in January 2023.
		Family Planning team members began working through the closing of High Ridge



Jefferson County Health Department 405 Main Street, Hillsboro, MO 63050 Phone: 636-797-3737 Fax: 636-797-4631 www.jeffcohealth.org



PROGRAM/GRANT	DELIVERABLE	OUTCOME/IMPACT
		and 340B medication and supply redistribution in September.
		Title X annual training is currently underway and is almost completed. Staff are required to complete refresher or orientation training to the Title X program annually along with cultural competency training.
EPA/MDHSS—Superfund Lead Children's Health Insurance Program (CHIP) & Health Services Initiatives (H.S.I.)	Provide health assessments, in- home and/or office interventions for children with a detection of lead in their blood	In September JCHD did a total of 30 lead screenings in Jefferson County. JCHD was awarded an extension to the Superfund Lead Health Education and Voluntary Institutional Controls Program that begins 10/01/22. JCHD is currently awaiting a new contract from MDHSS.
MOBILE WELLNESS Health Disparities Contract	Utilize the currently established mobile health center to provide community-based healthcare focusing on individuals who have challenges with transportation, health disparities, and vulnerable populations in Jefferson County.	The Mobile Wellness Van saw a total of 57 patients in September and visited 8 locations. Visit types included services for labs, ear cleanings, diabetes & hypertension check-ups, depression, and check-ups for medication refills. Our mobile clinic continues to provide primary care services for three residential care facilities within the county. Grant funding has allowed our mobile clinics to provide health related services in many ways directly in the community. In September, we were able to provide blood pressure monitors to those who are being treated for hypertension. This has allowed those patients to monitor their blood pressure at home.
DENTAL Missouri DHSS Improving Oral Health Teledentistry Sealants	Develop, implement, educate, operate, provide services and report on a Teledentistry Sealant and Education Program in Jefferson County.	The JCHD dental program restarted the school-based screenings and treatments in September. The JCHD dental program treated 143 patients and completed 899 procedures in September. The first school visited in September was Sunrise School. The Festus school system was also started at the end of





PROGRAM/GRANT	DELIVERABLE	OUTCOME/IMPACT
		September and will go through the end of
		October.
		A new contract was received from MDHSS for
		the "Improving Oral Health Teledentistry
		Sealant" grant. Total award from MDHSS was
		\$24,000 to be put towards supplies,
		equipment, education, and outreach.







Champion positive health outcomes and behaviors through innovative programs and community engagement

Communicable Disease Surveillance Summary Report

Jefferson County, Missouri

September 2022

NOTES ON THE DATA:

- All data and information are conditional and may change as more reports are received.
- Case definitions are established by the Missouri Department of Health and Senior Services' (DHSS) Communicable Disease Investigation Reference Manual. The totals reflect the number of confirmed and probable cases reported; suspect cases are not included.
- Data is reported in epidemiologic weeks established by the CDC's Morbidity and Mortality Weekly Report (MMWR). The MMWR week starts on a Sunday and ends on Saturday. Values for MMWR week range from 1 to 53, although most years consist of 52 weeks. The 2022 MMWR calendar began on January 2, 2022.
- Case date may be based on the onset date, diagnosis date, specimen date, or test date.
- Excluded from this report are Sexually Transmitted Diseases and Influenza.

Table 1. Number of Enteric Cases by Month, Jefferson County, Missouri

		Five	Previous Mo	onths		Year to Date Comparison		
Disease or Condition	May	June	Л	August	September	YTD 2022	YTD 5 Previous Year Mean	YTD Alert ¹
Campylobacteriosis	3	3	3	4	2	21	22.2	
Cryptosporidiosis	0	0	0	2	0	3	4.4	
Cyclosporiasis	0	0	2	0	0	2	3.2	
E. Coli O157:H7	0	0	1	1	0	2	0.6	
E. Coli Shiga Toxin +	0	0	0	0	0	0	0	
Giardiasis	0	0	0	0	0	0	1.6	
Hepatitis A Acute	0	0	0	0	0	0	4	
Listeriosis	0	0	0	1	0	1	0.2	
Salmonellosis	2	3	4	11	6	33	25.8	*
Shigellosis	0	0	0	0	0	0	0.8	
Yersiniosis	0	0	0	0	0	1	2.4	
Enteric Totals	5	6	10	19	8	63	65.2	

¹ Year- to- Date alerts represent an increase of at least one standard deviation for total cases in the current year compared to the same time period in the five previous years.

Table 2. Number of Respiratory and Systemic Disease Cases by Month, Jefferson County, Missouri

		Five Previous Months				Year t	Year to Date Comparison		
Disease or Condition	Мау	June	July	August	September	YTD 2022	YTD 5 Previous Year Mean	YTD Alert	
Coccidioidomycosis	0	0	0	0	0	0	0		
Covid-19	1520	2206	2334	2018	1511	9589	N/A		
Haemophilus Influenzae, Invasive	1	0	0	2	1	6	3.8	*	
Legionellosis	0	1	0	1	0	2	3.6		
Pertussis	0	0	0	0	0	0	12.2		
Staph Aureus, VISA	0	1	1	0	0	3	1.8		
Streptococcus Pneumoniae, Invasive	2	0	0	0	0	9	20.8		
Streptococcal Toxic Shock Syndrome	1	0	0	0	0	1	0		
Varicella	0	1	0	0	0	3	2		
Respiratory and Systemic Totals	1524	2209	2335	2021	1512	9613	44.2		

Table 3. Number of Vector-Borne Cases by Month, Jefferson County, Missouri

		Five Previous Months				Year to Date Comparison		
Disease or Condition	Мау	June	Иnl	August	September	YTD 2022	YTD 5 Previous Year Mean	YTD Alert
Anaplasma Phagocytophilum	0	1	1	0	0	2	0	*
Babesiosis	0	1	0	0	0	1	0	
Ehrlichia Chaffeensis	1	9	7	5	2	26	19.4	*
Ehrlichia Ewingii	0	0	1	0	0	1	0.6	
Ehrlichiosis Anaplasmosis Undetermined	0	0	0	0	0	0	1.4	
Rocky Mountain Spotted Fever	0	2	2	3	0	7	10.6	
Tularemia	0	0	0	0	0	0	0	
Vector-Borne Totals	1	13	11	8	2	37	32	

Table 4. Number of Other/Miscellaneous Cases by Month, Jefferson County, Missouri

		Five Previous Months				Year to Date Comparison		
Disease or Condition	May	June	ylut	August	September	YTD 2022	YTD 5 Previous Year Mean	YTD Alert
Animal Bites	36	6	10	4	20	116	91.8	*
Infant Botulism	0	0	0	0	0	0	0	
MOTT	1	2	2	1	3	12	18.8	
Rabies Animal	0	1	0	0	0	1	1	
Rabies Post Exposure Prophylaxis	4	2	0	0	0	9	6.8	*
TB Disease	0	0	0	0	0	0	1.2	
TB Infection	4	6	8	6	4	41	27.4	*
Other/Miscellaneous Totals	45	17	20	11	27	179	147	

Figure 1. Salmonellosis Jefferson County, Missouri

Salmonella are a gram-negative, rod-shaped bacteria which can cause illness in both animals and humans. Nontyphoidal salmonellosis (NTS) refers to illnesses caused by all serotypes of Salmonella (S.) except for S. Typhi, S. Paratyphi A, S. Paratyphi B, and S. Paratyphi C. There were 6 cases of Salmonellosis reported during September 2022 in Jefferson County. During the previous 5 years, the number of cases reported has ranged from 0 to 9 per month. One outbreak of Salmonella linked to backyard poultry (updated September 22, 2022) remains active. Cases have been reported in 50 states, including Missouri. According to the CDC, two new outbreaks of Salmonella have been reported recently. An outbreak of Salmonella linked to pet bearded dragons was updated October 18, 2022 and includes cases that have been reported in 15 states. An outbreak of Salmonella linked to fish was updated October 20, 2022 and includes cases that have been reported in 3 states. So far, no cases linked to either of the two newest outbreaks have been reported in Missouri. A year-to-date alert has been noted for Salmonellosis. Year-to-date alerts are present when the total cases in the current year are more than one standard deviation above the mean for the same time period in the previous five years.

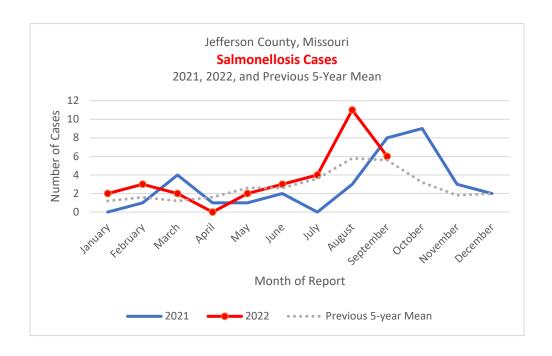
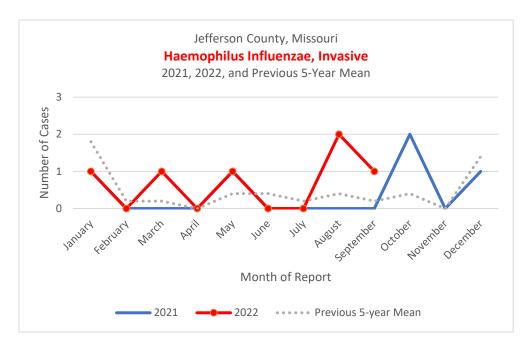


Figure 2. Haemophilus Influenzae, Invasive Jefferson County, Missouri

Haemophilus influenzae invasive disease (Hi) is caused by the bacterium Haemophilus influenzae (*H. influenzae*). Six distinct types of H. influenzae (types a - f) can cause Hi in persons of any age and are often severe, particularly among infants. Hi includes clinical syndromes of meningitis, bacteremia or sepsis, epiglottitis, pneumonia, septic arthritis, osteomyelitis, pericarditis and cellulitis. Noninvasive H. influenzae infections are not reportable to the Missouri Department of Health and Senior Services. Despite the name, H. influenzae does not cause influenza (the flu). Before the introduction of effective vaccines, H. influenzae serotype b (Hib) was the cause of more than 95% of Hi among children and was the leading cause of bacterial meningitis in the United States among children younger than 5 years of age. Hib disease is vaccine preventable. CDC recommends routine Hib vaccination for all children younger than 2 years old.

There was 1 case of Haemophilus influenzae invasive disease reported during September 2022 in Jefferson County. During the previous 5 years, the number of reported cases has ranged from 0 to 5 per month. A year-to-date alert has been noted for H. influenzae, invasive. Year-to-date alerts are present when the total cases in the current year are more than one standard deviation above the mean for the same time period in the previous five years.



ADDITIONAL DATA SOURCES AND INFORMATION

Jefferson County Health Department's Covid-19 Data Dashboard https://www.jeffcohealth.org/covid19-data

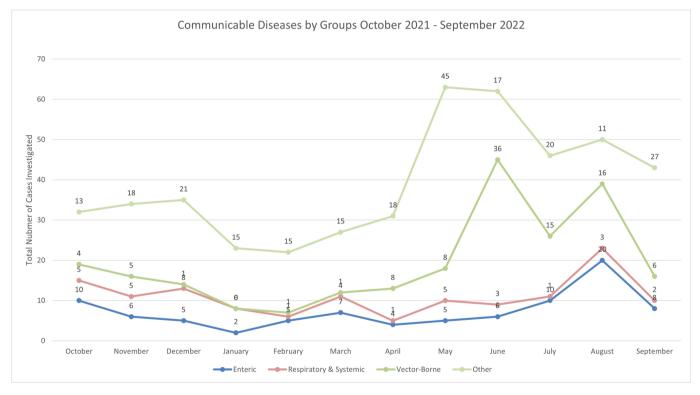
Jefferson County Health Department's Influenza Data Dashboard https://www.jeffcohealth.org/flu-season-info

Missouri Department of Health and Senior Services, Communicable Disease Investigation Reference Manual: https://health.mo.gov/living/healthcondiseases/communicable/communicabledisease/cdmanual/index.php

PUBLIC HEALTH PREPAREDNESS

Monthly Newsletter of the JCHD PHP Team

SEPTEMBER 2022 COMMUNICABLE DISEASE SUMMARY OF ALL INVESTIGATIONS



This chart represents the range of reportable conditions investigated by the team. Not all cases will meet the MDHSS case definition to be considered either "Confirmed" or "Probable." Many cases are considered "Suspect." One example of a suspect case would be a condition that a provider diagnoses and treats based on symptoms but did not collect a lab: such as Chickenpox. Some cases are considered "No Case" when investigated if they do not meet the case definition for the condition. All cases are fully investigated, and education is provided to the individual. When viewing the chart: add vertically the case counts above each month to provide you the total of all "Confirmed," "Probable," "Suspect," and "No Case." For example, September 2022 has 27+6+2+8=43Conditions Investigated.

Enteric:

2 Campylobacteriosis

6 Salmonellosis

Respiratory and Systemic:

1 H. Influenza

1 Legionellosis - 1 Suspect/No Case

Vector-Borne:

2 Erhlichia Chaffeensis - 4 Suspect/No Case

4 Rocky Mountain Spotted Fever - 4

Suspect/No Case

Other:

20 Animal Bites

3 MOTT

4 TB Infection

Reportable Conditions Investigated: 43
Open LTBI Cases (not active disease): 13

(not represented on the chart)

2022 MONKEYPOX UPDATES

CDC Outbreak Data Updated 10.21.22

MISSOURI

156

U.S. CASES

27.884

U.S. DEATHS

6

GLOBAL CASES

75,348

JEFFERSON COUNTY, MO

5

JCHD OUTBREAK DATA UPDATED 10.24.22

JCHD VACCINE ADMINISTERED

11-1ST DOSES

JCHD OUTBREAK DATA UPDATED 10.24.22

- Jefferson County is partnering with the St. Louis regional health departments to provide PEP and PEP++ (Post-Exposure Prophylaxis) to county residents.
 - To submit your request for post-exposure vaccination, please complete the JCHD survey at
 - https://forms.office.com/r/uXv9u2WxjA
 - The criteria to be considered for the PEP++ (Post-Exposure Prophlaxys without a confirmed positive exposure)
 - Gay, bisexual, a man who has sex with men, and transgender or nonbinary people who in the past 6 months have had...
 - A new diagnosis of one or more nationally reportable sexually transmitted diseases (i.e., acute HIV, chancroid, chlamydia, gonorrhea, or syphilis) and/or
 - More than one sex partner
 - People who have had any of the following in the past 6 months:
 - Sex at a commercial sex venue
 - Sex in association with a large public event in a geographic area where monkeypox transmission is occurring (this currently includes the St. Louis metro region)
 - Sexual partners of people with the above risks
 - People who anticipate experiencing the above risks
 - People who have known one of their sexual partners in the past 2 weeks have been diagnosed with monkeypox

COMMUNICABLE DISEASE SPOTLIGHT: EBOLA

Ebola Virus Disease (EVD) is a rare and deadly disease in people and nonhuman primates. Located mainly in sub-Saharan Africa.

Transmission

The virus spreads through direct contact (such as through broken skin or mucous membranes in the eyes, nose, or mouth) with:

- Blood or body fluids (urine, saliva, sweat, feces, vomit, breast milk, amniotic fluid, and semen) of a person who is sick with or has died from Ebola virus disease (EVD).
- Objects (such as clothes, bedding, needles, and medical equipment) contaminated with body fluids from a person who is sick with or has died from EVD.
- Infected fruit bats or nonhuman primates (such as apes and monkeys).
- Semen from a man who recovered from EVD (through oral, vaginal, or anal sex). The virus can remain in certain body fluids (including semen) of a patient who has recovered from EVD, even if they no longer have symptoms of severe illness. There is no evidence that Ebola can be spread through sex or other contact with vaginal fluids from a woman who has had Ebola.

Signs and Symptoms

Symptoms may appear anywhere from 2 to 21 days after contact with the virus, with an average of 8 to 10 days. The course of the illness typically progresses from "dry" symptoms initially (such as fever, aches and pains, and fatigue), and then progresses to "wet" symptoms (such as diarrhea and vomiting) as the person becomes sicker.

- Primary signs and symptoms of Ebola often include some or several of the following:
 - Fever
 - o Aches and pains, such as severe headache and muscle and joint pain
 - Weakness and fatigue
 - Sore throat
 - Loss of appetite
 - Gastrointestinal symptoms including abdominal pain, diarrhea, and vomiting
 - Unexplained hemorrhaging, bleeding or bruising
- Other symptoms may include red eyes, skin rash, and hiccups (late-stage).

Travel Advisory Alert Level 2: Practice Enhanced Precautions

• Uganda-Sudan ebolavirus outbreak (October 4, 2022)

EBOLA (EBOLA VIRUS DISEASE) | CDC

VACCINE

The FDA has approved the vaccine, ERVEBO, for prevention of EVD. The vaccine has been found safe and effective against Zaire ebolavirus.

TREATMENT

Therapeutics

- 2 FDA approved treatments
 - Inmazeb- combination of three monoclonal antibodies
 - Ebanga- a single monoclonol antibody
 - Neither has been evaluated for species other than Zaire ebolavirus
- Supportive Care
 - Whether or not other treatments are available, basic interventions can significantly improve chances of survival when provided early. These are referred to as supportive care, and include:
 - Providing fluids and electrolytes (body salts) orally or through infusion into the vein (intravenously).
 - Using medication to support blood pressure, reduce vomiting and diarrhea, and to manage fever and pain.
 - Treating other infections, if they occur.

SPECIES(STRAINS) OF THAT HAVE CUASED DISEASE IN PEOPLE

- Ebola virus (species Zaire ebolavirus)
- Sudan virus (species Sudan ebolavirus)
- Taï Forest virus (species Taï Forest ebolavirus, formerly Côte d'Ivoire ebolavirus)
- Bundibugyo virus (species Bundibugyo ebolavirus)

PUBLIC HEALTH EMERGENCY PREPAREDNESS AND RESPONSE CAPABILITIES

- 1: Community Preparedness
- 2: Community Recovery
- 3: Emergency Operations Coordination
- 4: Emergency Public Information and Warning
- 5: Fatality Management
- 6: Information Sharing
- 7: Mass Care
- 8: Medical Countermeasures
 Dispensing and Administration
 (Point of Dispensing-POD)
- 9: Medical Material Management and Distribution
- 10: Medical Surge
- 11: Nonpharmaceutical Interventions
- 12: Public Health Laboratory Testing
- 13: Public Health Surveillance and Epidemiological Investigation
- 14: Responder Safety Health
- 15: Volunteer Management

PHP TEAM UPDATES

- The JCHD Public Health Emergency Operations Coordination (PHEOC) Team will be participating in the Animal/Plant Health Joint Criminal-Epidemiological Investigation Course on October 31 and November 1, 2022, at the Missouri Public Health Laboratory in Jefferson City, MO.
- The team will continue with on-call scheduling for nights and weekends in preparation for travelers returning from Uganda to be monitored for Ebola exposures. MODHSS has set expectations of immediate response from us when notified of a new traveler arriving in our county.

CAPABILITY 4: MEDICAL COUNTERMEASURES (MCM) DISPENSING AND ADMINISTRATION (POINT OF DISPENSING-POD)

OCTOBER 2022 CAPABILTY FOCUS

Medical countermeasure dispensing and administration is the ability to provide medical countermeasures to targeted population(s) to prevent, mitigate, or treat the adverse health effects of a public health incident. This capability focuses on dispensing and administering medical countermeasures, such as vaccines, antiviral drugs, antibiotics, and antitoxins.

- Function 1: Determine medical countermeasure dispensing/administration strategies
- Function 2: Receive medical countermeasures to be dispensed/administered
- Function 3: Activate medical countermeasure dispensing/administration operations
- Function 4: Dispense/administer medical countermeasures to targeted population(s)
- Function 5: Report adverse events

HEALTH ALERTS AND RECALLS

AS OF OCTOBER 24, 2022
HTTPS://WWW.CDC.GOV/OUTBREAKS/INDEX.HTML

Listeria Outbreak Linked to Ice Cream (Updated 8/4/2022)

• https://www.cdc.gov/listeria/outbreaks/monocytogenes-06-22/index.html

Salmonella Outbreaks Linked to Backyard Poultry (Updated 8/12/2022)

• https://www.cdc.gov/salmonella/backyardpoultry-06-22/index.html

E. coli Outbreak with Unknown Food Source (Posted 9/1/2022)

• https://www.cdc.gov/ecoli/2022/o157h7-08-22/index.html

ARTICLES OF INTEREST

Protecting New Yorkers Through Immunization: State Department of Health Updates New Yorkers On Polio In New York State

• https://www.health.ny.gov/press/releases/2022/2022-09-09_polio_immunization.htm

September 2022 Uganda, Mubende District Ebola Outbreak

• https://www.cdc.gov/vhf/ebola/outbreaks/uganda/2022-sep.html

CDC Confirms Another Human Infection with Flu Virus from Pigs

• https://www.cdc.gov/flu/swineflu/spotlights/swineflu-infection.htm

Summary of Possible Multistate Enteric (Intestinal) Disease Outbreaks in 2017–2020

https://www.cdc.gov/foodsafety/outbreaks/multistate-outbreaks/annual-summaries-2017-2020.html

EDUCATION AND TRAINING OPPORTUNITIES

CDC Foodborne Outbreaks

Timeline for Identifying and
Reporting Cases in Foodborne
Outbreaks | CDC
https://www.cdc.gov/foodsafety/out
breaks/basics/reportingtimeline.html?
CDC_AA_refVal=https%3A%2F%2Fw
ww.cdc.gov%2Ffoodsafety%2Foutbr
eaks%2Finvestigatingoutbreaks%2Freportingtimeline.html

Prepared4All-Whole Community Emergency Response Planning Training

https://nationalcenterdph.org/ourfocus-areas/emergencypreparedness/prepared4all/onlinetraining/



ENVIRONMENTAL SUMMARY SEPTEMBER 2022 REPORTED AT OCTOBER BOARD MEETING

PROGRAM/GRANT	DELIVERABLE	OUTCOME/IMPACT
Vector Program	Protect the public health by controlling mosquitoes and other vectors that	Mosquito Season Updates:
	spread disease (i.e., Mosquitoes and ticks)	 9 requests handled in September.
Vector/Mosquito Control: Jefferson County Missouri Code Chapter 260 Mosquito Control and Eradication		 Preventative adulticide treatment spraying: 87 targets treated. Those targets include subdivisions and largely populated geographical areas. Confirmed West Nile: 2
		 Hillsboro and High Ridge. Both areas were treated. Mosquito spraying season wrapped up September 30th. Will continue case by case basis through October.
Animal Bite/Rabies Investigations Missouri Laws and Statues Chapter 322 Protection Against Rabies	322.140 Upon receipt of an incident report where an animal bites or otherwise possibly transmits rabies or any zoonotic disease, the department of health and senior services shall investigate the incident. Animal Bite Investigation: investigation after a known bite.	Animal Bite Investigations: 17 Animal Testing: 5 Confirmed Animal Rabies: 0
	Animal Testing: The receipt of a MDHSS Rabies Laboratory Result Reports. This can include an unsatisfactory, negative, or positive result.	



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Food Service Activities -Core Public Health Functions -Jefferson County Food Code -Food Sanitation Order -Jefferson County Food Service and Retail Food Service Sanitation Rules and Regulations	Confirmed Animal Rabies: This is a confirmed positive case from a MDHSS Rabies Laboratory Result Report. Safety of food is a combined effort provided by the state health department and local health departments. Complaints concerning food safety and regular food establishment inspections are handled by the local health department.	-Routine Inspections: 148 -Temporary Food Stand Inspections: 30 -Food Service Complaints: 2 -Responded to two facility fires. Both facilities were able to re-open within 24 hours.
LeadEPA Lead Grant	Provide lead resources, education and connection to testing when needed. This is a collaboration between clinical, education and environmental programs.	-Community events promoting lead program included DeSoto Pop Club and DeSoto Fall Festival. Educated approximately 30 families between both eventsIn progress of compiling a VICP for Jefferson County as outlined in the EPA Superfund Grant.
Lodging -Lodging Rule, 19-CSR 20-3.050	DHSS: Inspections are conducted by local health agency or department staff. These inspections fall under lodging rule 19-CSR 20-3.050	-Lodging complaints: 3 -Annual lodging inspection approvals: 2
Childcare -MODHSS/DESE	Both licensed and license-exempt facilities are required to have annual sanitation and health inspections.	Routine Inspections: 5 Re-Inspections: 3
Missouri Department of Natural Resources Certification for Microbiological Laboratory Services of Public Drinking Water	Ensures public health for citizens and guests of the state/county by providing information regarding private water and public water supplies through water testing to homeowners and businesses	Ice Samples: 38 -Satisfactory: 34 -Unsatisfactory: 4 Public Water Samples: 205 -Satisfactory: 201 -Unsatisfactory: 4 Private Water Samples: 21 -Satisfactory: 15 -Unsatisfactory: 6 -Unacceptable: 2



HEALTH NETWORK SERVICES SUMMARY July 2022 REPORTED AT August 2022 BOARD MEETING

PROGRAM/GRANT	DELIVERABLE	OUTCOME/IMPACT
-Children's Health Insurance Program (CHIP) -Maternal Child Health (MCH) Grant -Disparities Grant	MCH (Strengthen Individual Knowledge and Skills): By FFY 2026, increase in regular adolescent and family engagement in wellness habits through before/after school programs, family engagement programs, virtual programs, etc.	Members of the Health Education team in September worked on a variety of projects. Members of the Health Ed. Team continue to lead the Employee Wellness committee and are working on a grant, SEED grant, to provide funding to get initiatives being discussed within this committee to fruition. They continued to work at events to distribute bike helmets to children in the community at the Things That Go event, DeSoto Elks Safety Fair, and are working for an event to occur at the Peace Pantry. The Public Health Advocate was able to attend training in Jefferson City for a Captial Workshop. The dietitian worked with Hillsboro Police Department to give a presentation on healthy meal prep and dietary choices. Work continued to be done in collaboration with MOCPHE for Phase II of the Disparities and Inequities plan for a decision-making tree and internal survey to address areas of need in our community. This also allows us to capture data to give us direction on who is using the health department for services, what services people in the community need, and what areas we need to provide services or make partnerships to address the needs.
Drug	Overdose Data to Action (OD2A)	Teen Coalition – The Coalition this month
Prevention/Health	supports jurisdictions in utilizing data	continued to work on vaping/dabbing as a
Education	to inform substance use prevention and response efforts. This is funded	priority topic affecting teens. Additionally, the
Jefferson County Drug	through CDC and is comprised of 66	teen coalition worked on creating Tik Tok videos and other social media marketing pieces with the
Prevention Coalition	state, county and city health	goal of increasing participation in the coalition.
(JCDPC)	departments.	god. of mercusing paracipation in the counton.
(- 1 - 5)	·	
Overdose Data to		Prevention Specialists – Several presentations
Action (OD2A) Grant		were done with month with different community
		groups to discuss the rising drug use in the
		groups to discuss the fishing drug use in the

		county and what JCDPC is doing with its partners to address this issue. Some of these included Kiwanis Club and Twin City Optimist Club. Work was also continued with the jail administration, as well as working with an LPC that works directly with sex offenders, to address the needs of children and families of the offenders and provide more support. Meeting was held with Prevent+Ed staff to discuss their Peer Mentorship program and determine the potential use of that program within more schools in Jefferson County that are requesting a Peer Mentoring program.
Special Health Care	The CYSHCN Program provides	
Needs	assistance statewide for children and youth with special health care needs	
Children & Youth	from birth to age 21. The program	CYSHCN Monthly Report region 10 and 11
	focuses on early identification and service coordination for children and	combined:
	youth who meet medical eligibility	SCAs completed: 11
	guidelines.	PA completed: 2
	The ABI Program	Referrals: 134
Adult Brain Injury	assists Missouri residents, ages 21 to	Eligible referrals: 29
	65, who are living with a traumatic brain injury (TBI). Through service	
	coordination, the program links	ABI Monthly Report Region G and F combined:
	participants to resources to enable each person to obtain goals of	SCAs completed: 4
	independent living, community	Referrals: 5
	participation and employment.	Eligible referrals: 3

As mental health needs continue to be an area of focus within our community and our agency, the Health Education team took steps to begin to be better trained to handle a mental health need or crisis as another resource to our community. In September, 6 members of the Health Education team, including both Prevention Specialists, were trained and certified in Mental Health First Aid. This training is the first step in recognizing when someone is in need, giving a fast and appropriate response, and connecting them to potentially lifesaving resources and care. Due to the prevalence of the Health Education team and Prevention Specialists being in our community and working closely with those who are potentially in a higher level of need, this training now equips our team to respond accordingly and be a trusted partner to our community members.

In addition to this, all members of the Health Education team participated in Project Homeless Connect at the Peace Pantry working with members of our community experiencing homelessness and connecting them to resources, clothing, birth certificates, and other items needed.



ASPEN October 2022 Board Report

Participating Schools with signed agreements in place as of 10/24/2022:

- Sunrise School District
- Jefferson R-VII School District
- Grandview

Participating Schools with agreement in-progress:

- De Soto 73 School District
- Hillsboro R-III School District
- Festus School District
- Dunklin School District
- Crystal City School District
- ST. Louis MAP School

First Responder agencies for pilot participation with a signed agreement in place as of 10/24/2022:

• Hillsboro Fire Protection District

First Responder agencies with agreements in-progress:

- Saline Valley Fire Protection District
- De Soto Rural Fire Protection District
- Mapaville Fire Protection District

First Responder agencies training and demonstrations in-progress:

- Jefferson County Sherriff's Department CIT
- North Jefferson Ambulance

Upcoming ASPEN Presentations:

- October 27th, 2022: University of Missouri St. Louis
- November 4th, 2022: Missouri School Board Association Conference
- November 10th, 2022: Missouri Coalition of Children's Agencies
- December 15th, 2022: Fostering Court Improvement Group

Community Resource Directory:

- Anticipated launch November 2022
- ASPEN Coordinator and JCHD PIO are designing a community wide marketing campaign



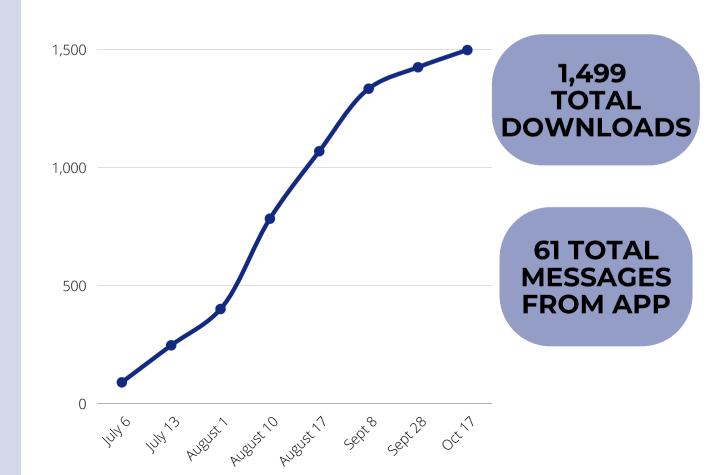
Communications & Marketing

Monthly Report- October 2022 Analytics from September 2022

Updates

- Comment threads are not available on Facebook posts therefore engagement analytics may be lower than usual
- Public Communications Officer invited to speak at the Health Disparities Summit in Springfield regarding our communication strategy to reach all populations
- Monsido Website Acessibility tool has been launched and more analytics regarding compliance of website will be available in future reports
- Projects communications is currently working on:
 - Food Code 101
 - Lead Poisoning Prevention
 - COVID and Flu Season

JCHD MOBILE APP DATA



Social Media Analytics



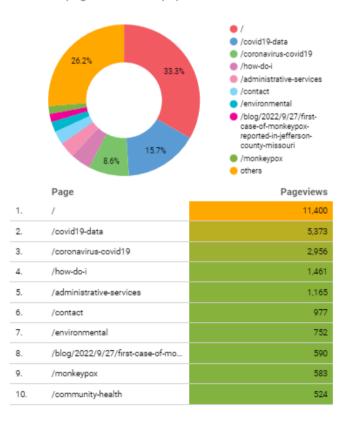


JCHD Google Analytics Behaviors Overview

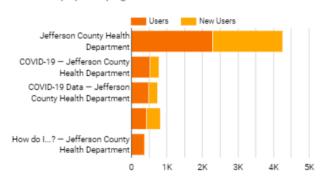
Overview of your user behaviors



Which page is the most popular?



Most popular pages with title breakdown



	Page Title	Pageviews
1.	Jefferson County Health Depart	11,590
2.	COVID-19 Data — Jefferson Cou	5,547
3.	COVID-19 — Jefferson County H	2,956
4.	How do I? — Jefferson County	1,470
5.	First Case of Monkeypox Report	1,358
6.	Administrative — Jefferson Cou	1,165
7.	Contact — Jefferson County Hea	992
8.	Environmental — Jefferson Coun	752
9.	Monkeypox — Jefferson County	589
10.	Health Education — Jefferson C	524

JCHD Google Analytics Acquisition Overview



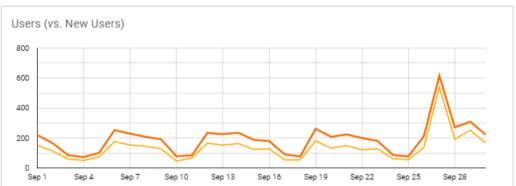
Users **4,417**

Sessions 6,455

Bounce Rate 1.21%

Avg. Time on Page 00:00:17

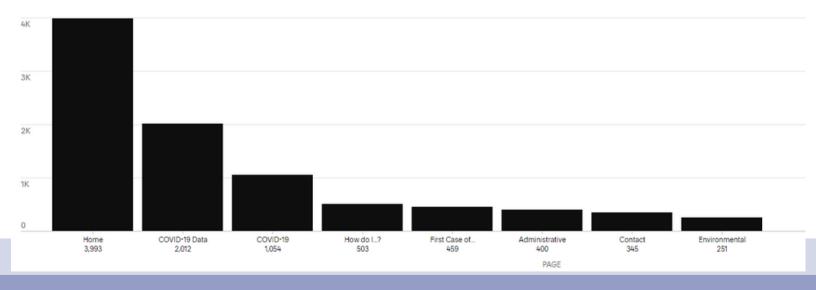




	Sessions 6.5K	Users 4.4K	New Users 4.1 K	Bounce Rate 1.2%	Pages / Session 5.3	Avg. Session Duration 01:13
Source / Medium	Sessions	Users	New Users	Bounce Rate	Pages / Session	Avg Session Duration
google / organic	3,246	2,362	2,148	1.57%	5.67	00:01:31
(direct) / (none)	2,120	1,238	1,153	1.27%	4.85	00:00:57
m.facebook.com / referral	345	299	297	0%	3.68	00:00:07
bing / organic	236	185	170	0%	7.62	00:01:59
lm.facebook.com / referral	180	170	160	0%	3.38	00:00:28
yahoo / organic	92	59	54	0%	6.91	00:01:25
l.facebook.com / referral	58	37	27	0%	5.1	00:00:59
kmov.com / referral	30	30	30	0%	3.07	00:00:08
t.co / referral	29	19	17	0%	4.34	00:00:12
www7.citizenserve.com /	27	22	3	0%	7.33	00:02:13

Top Pageviews ②

Sep 1-30, 2022 • 78% of 11,618 Pageviews -6% mo/mo



Google Business Profiles

Hillsboro Office: 972 Interactions

% 550

calls

-33%

% 287

2

messages

-33%

9 3,633

-24%

profile views

♦ 133

people asked for directions

-29%

q 1,773

searches

-29%

Direct Messages

website visits from profile -24%

Arnold: 1,364 Interactions

% 703

calls

-33%

messages

-33%

♦ 289

people asked for directions

-22%

₩ 368

website visits from profile

-28%

5.103 profile views

-22%

Q 2,784

searches

-23%

Direct Messages

High Ridge Office: 389 Interactions

& 194

calls

-25%

messages

♦ 96

people asked for directions

+5%

₩ 95

website visits from profile

-10%

2,992

profile views

-26%

q 1,671

searches

-23%

Direct Messages