



*Jefferson County Health Department will champion positive health outcomes and behaviors through innovative programs and community engagement.*

## JANUARY CLINICAL BOARD REPORT

Month Reporting: January 2023

Date: 02/20/23

Reported By: M. Melissa Parmeley, Clinical Services Manager

### DEPARTMENT AND PROGRAM NARRATIVE:

<b>PROGRAM/SECTION</b>	<b>FOUNDATIONAL PUBLIC HEALTH SERVICE</b>	<b>CONTRACT/ GRANT</b>	<b>ACTION/OUTCOME</b>
FAMILY PLANNING	Maternal, Child & Family Health Communicable Disease Access to Care	Title X; TRT SMHW; WW	JCHD was approved for Title X Equity Funding in the amount of \$2,273 for the purpose to provide 240 period poverty kits.
GENERAL CLINIC	Maternal, Child & Family Health Communicable Disease Access to Care Injury Prevention	VFC; 317; AIG STD; TB; EPA Lead Superfund	The TB program was moved back into General Clinic from the Communicable Disease section and an RN Coordinator was trained and began case managing clients through clinic services.
MOBILE WELLNESS	Maternal, Child & Family Health Communicable Disease Access to Care	Local Public Health Disparities	The Mobile Wellness program visited 4 residential care facilities, Jefferson College, and the Festus School District in January.
TESTING/COMMUNITY CLINICS	Maternal, Child & Family Health Communicable Disease Access to Care	ELC AIG	Our community clinic team continued work with one Skilled Nursing facility to schedule COVID-19 booster vaccines. That clinic was completed on 02/09/23 and will be reported on the February Board Report.
DENTAL	Maternal, Child & Family Health Access to Care	Sealant and Teledentistry Grant	The Pediatric Dental Program was back into schools in January and picked up again in the DeSoto school district with both Vineland and Athena school systems.



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**HEALTH NETWORK SERVICES SUMMARY January 2023  
REPORTED AT February 2023 BOARD MEETING**

PROGRAM/GRANT	DELIVERABLE	OUTCOME/IMPACT
<p><b>Health Education</b></p> <ul style="list-style-type: none"> <li>-Children’s Health Insurance Program (CHIP)</li> <li>-Maternal Child Health (MCH)</li> <li>-Health Disparities</li> <li>-Superfund Lead (Lead/VICP)</li> </ul>	<p>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.</p>	<p>CCHC – This month, the Health Education staff working under the CCHC contract worked on coordinating program trainings for emergency response and resiliency and researching topics for trainings, while completing Nemours nourishing healthy eaters training.</p> <p>MCH – The MCH Mid-Year report was due in January and a review of deliverables was completed and reported. Additionally, the team is finalizing the Family Wellness Program curriculum for the multi week course that will be available, at no cost, to families in the county.</p> <p>The JCHD Dietitian is working with Get Healthy DeSoto to get community members up and physically moving through the Couch to 5K program. These workouts are completed weekly with the assistance of the dietitian, as well as education being provided on overall health and wellness.</p> <p>Health Disparities – Members of the health education team, as well as different departments throughout the agency have been working with MOCPE, with funding provided by the Disparities grant, to complete a Community Health Improvement Plan. Identifying key community partners to participate in this process and developing a plan for improving the community based on the most recent Community Health Needs Assessment is a goal as the CHIP gets underway and completed.</p>

<p><b>Drug Prevention/Health Education</b></p> <p>--Jefferson County Drug Prevention Coalition (JCDPC)</p> <p>--Overdose Data to Action (OD2A) NACCHO/IOPSLI Grant</p>	<p>Overdose Data to Action (OD2A) supports jurisdictions in utilizing data to inform substance use prevention and response efforts. This is funded through CDC and is comprised of 66 state, county and city health departments.</p>	<p>Prevention Specialists -</p> <p>JCHD's prevention specialists worked this month to finalize the JCHD policy on Vaping Drop Boxes that will be located in all JCHD buildings. Community members will be able to properly dispose of their vaping devices for the cost of \$2 per device and JCHD will coordinate proper disposal of those devices. As vaping continues to be prevalent in our community, with the negative health effects this device can have on someone's wellness, continuing to work on educating the community while providing easy and accessible ways to dispose of devices is a focus for 2023.</p> <p>Additionally, a Parent Summit is being held in March that is being coordinated by Byrnes Mill Police Department with the assistance of JCHD's Prevention Specialists. This event is focusing on drug and alcohol awareness for teenagers and will be free to those who want to attend. JCDPC is playing a vital role in the education and recruitment of community partners to this event and marketing to the community.</p>
<p><b>Special Health Care Needs</b></p> <p>--Children &amp; Youth</p> <p>--Adult Brain Injury</p>	<p>The CYSHCN Program provides assistance statewide for children and youth with special health care needs from birth to age 21. The program focuses on early identification and service coordination for children and youth who meet medical eligibility guidelines.</p> <p>The <b>ABI</b> Program assists <b>Missouri</b> residents, ages 21 to 65, who are living with a traumatic brain injury (TBI). Through service coordination, the program links participants to resources to enable each person to obtain goals of independent living, community participation and employment.</p>	<p>CYSHCN Monthly Report region 10 and 11 combined:</p> <p>Service Coordinator Assessments completed: 6</p> <p>Prior Approvals completed: 0</p> <p>Referrals: 5</p> <p>Eligible referrals: 2</p> <p>ABI Monthly Report Region G and F combined:</p> <p>Service Coordinator Assessments completed: 3</p> <p>Referrals: 3</p> <p>Eligible referrals: 2</p>

Monthly Highlights – The Jefferson County Leader wrote a three part series showing the situation happening within our county with the population of community members that are unhoused or experiencing homelessness. Due to JCHD’s role in the coordination and spearheading of Homeless Outreach Events, our Prevention Specialist participated in this series to provide information on what is being seen within our community and what needs exist to help people get out of homelessness and into stable housing and get stable supports. There is often a connection to homelessness and mental health and/or substance use and this specific situation within our county is requiring all partners and entities to work closely together to find a solution to a problem that does not have an easy answer to solving. JCHD staff work closely with organizations such as: COMTREA, JCSO, 25:35 Ministries, New Hope Church, Gracelife Church, and others to organize events, create items such as “Blessing Bags” that are filled with necessities and are handed out, and creating a more cohesive approach to addressing this issue within our community.



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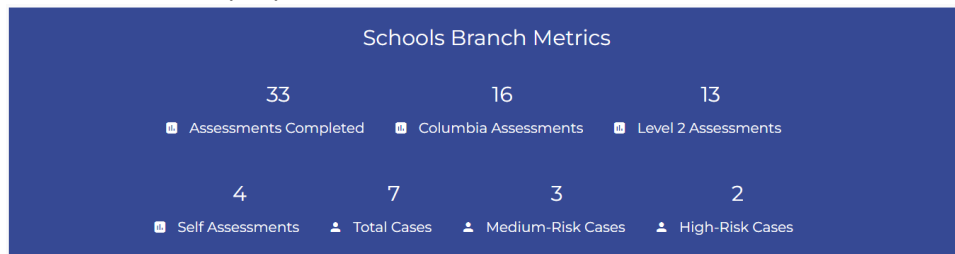


**ASPEN BOARD REPORT**  
**JANUARY 2023 REPORT**  
 FEBRUARY 2023 BOARD MEETING

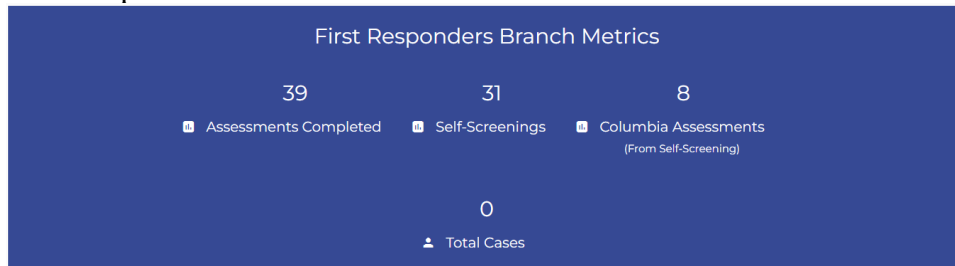
PROGRAM/GRANT	DELIVERABLE/FOUNDATION CAPABILITY	OUTCOME/IMPACT
<p><b>ASPEN: Community Resource Directory</b></p> <p>Missouri Foundational Public Health Services Model: -Linkage to medical, behavioral and community resources.            -Community Partnership Development</p> <p>Jefferson Foundation Transformative Grant</p> <p>Missouri DHSS Health Disparities Grant</p>	<p>Public Health Capacity; Linkage to medical, behavioral and community resources:</p> <ul style="list-style-type: none"> <li>Identify statewide, regional, and local medical and behavioral healthcare community partners and their capacities.</li> <li>Develop and implement a prioritized plan for increasing access to quality health care.</li> <li>Support community-based initiatives that increase access to quality medical and behavioral healthcare.</li> <li>Ability to create and maintain strategic, non-program specific relationships with key community partners.</li> </ul>	<p>ASPEN Coordinator is currently working with developers to increase mobile adaptability. After pilot opportunities within community members and first responder agencies it was determined many individuals do not have easy access to a computer or tablet device, and mobile devices are the primary electronic devices individuals utilize.</p> <p>ASPEN Coordinator is in the process of updating the website to provide information regarding frequently asked questions.</p> <p><u><a href="#">Current Community and Regional Resources in Public ASPEN Directory:</a></u>            Community Resources: 724            School Internal Resources: 9</p> <p>Public resources include health, wellness, oral care, transportation, housing, childcare and more.</p>
<p><b>ASPEN: School Behavioral Health Portal</b></p> <p>Missouri Foundational Public Health Services Model: -Linkage to medical, behavioral and community resources.</p>	<p>Public Health Capacity; Linkage to medical, behavioral and community resources:</p> <ul style="list-style-type: none"> <li>Provide timely, accurate, and locally relevant education to the community on the behavioral health care system.</li> </ul>	<p><u><a href="#">Mental Health Training Resources:</a></u> ASPEN is partnering with Washington University to identify and develop mental health related awareness and training videos for school staff, first responders and health care workers.</p> <p><u><a href="#">Development and Updates:</a></u>            JCHD ASPEN Coordinator and team members continue to work with school users to gain feedback and make improvements.</p>








<p>-Injury Prevention</p> <p>Jefferson Foundation Transformative Grant</p> <p>Missouri DHSS Health Disparities Grant</p>	<p>Injury Prevention:</p> <ul style="list-style-type: none"> <li>Identify statewide, regional and local injury prevention community partners and their capacities</li> <li>Work with partners to implement evidence based and populations-based interventions that mitigate suicide risk.</li> </ul>	<p>ASPEN Coordinator is in the process of updating parent and guardian frequently asked question documents that will be available on the website.</p> <p><u>Upcoming School Activities:</u></p> <p>March 2023: Fox High School Mental Health and Substance Use Student Engagement through SADD</p>
<p><b>ASPEN: First Responder and Health Care Worker Portals</b></p> <p>Missouri Foundational Public Health Services Model: -Linkage to medical, behavioral and community resources. -Injury Prevention</p> <p>Jefferson Foundation Transformative Grant</p> <p>Missouri DHSS Health Disparities Grant</p>	<p>Public Health Capacity; Linkage to medical, behavioral and community resources:</p> <ul style="list-style-type: none"> <li>Identify statewide, regional and local medical and behavioral healthcare community partners and their capacities.</li> <li>Advocate and seek funding for policies and initiatives that increase access to quality medical and behavioral healthcare.</li> </ul>	<p>ASPEN Coordinator is working directly with county and regional departments to increase awareness and access of vetted counselors and additional resources that meet the unique needs of responders and health care workers.</p> <p>3 First Responder Departments currently utilizing the ASPEN Self-Screening option have 31 users. Additional mental health resources and opportunities for training have been made available.</p>

School Metrics: 2/16/2023 10:30 AM CT



First Responder Metrics: 2/16/2023 10:31 AM CT



<b>MonsterInsights</b>		Last 30 days  	
Overview Report 			
<b>Sessions</b> 	<b>Pageviews</b> 		
<b>160</b>	<b>227</b>		
<b>↑ 73%</b> vs. Previous 30 Days	<b>↑ 30%</b> vs. Previous 30 Days		
<b>Avg. Session Duration</b> 	<b>Bounce Rate</b> 		
<b>1m 13s</b>	<b>73.75%</b>		
<b>↓ -34%</b> vs. Previous 30 Days	<b>↑ 15%</b> vs. Previous 30 Days		



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**ENVIRONMENTAL SUMMARY JANUARY 2023  
REPORTED AT FEBRUARY 2023 BOARD MEETING**

PROGRAM/GRANT	DELIVERABLE	OUTCOME/IMPACT
<p><b>Vector Program</b></p> <p>--Vector/Mosquito Control: Jefferson County Missouri Code Chapter 260 Mosquito Control and Eradication</p>	<p>Protect the public health by controlling mosquitoes and other vectors that spread disease (i.e., Mosquitoes and ticks)</p>	<p>Mosquito Season Updates:</p> <ul style="list-style-type: none"> <li>Season is complete, nothing new to report.</li> </ul>
<p>--Animal Bite/Rabies Investigations Missouri Laws and Statues Chapter 322 Protection Against Rabies</p>	<p>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.</p> <p>Animal Bite Investigation: investigation after a known bite.</p> <p>Animal Testing: The receipt of a MDHSS Rabies Laboratory Result Reports. This can include an unsatisfactory, negative, or positive result.</p> <p>Confirmed Animal Rabies: This is a confirmed positive case from a MDHSS Rabies Laboratory Result Report.</p>	<p>Animal Bite Investigations: 16</p> <p>Animal Testing: 6</p> <p>Confirmed Animal Rabies: 0</p>



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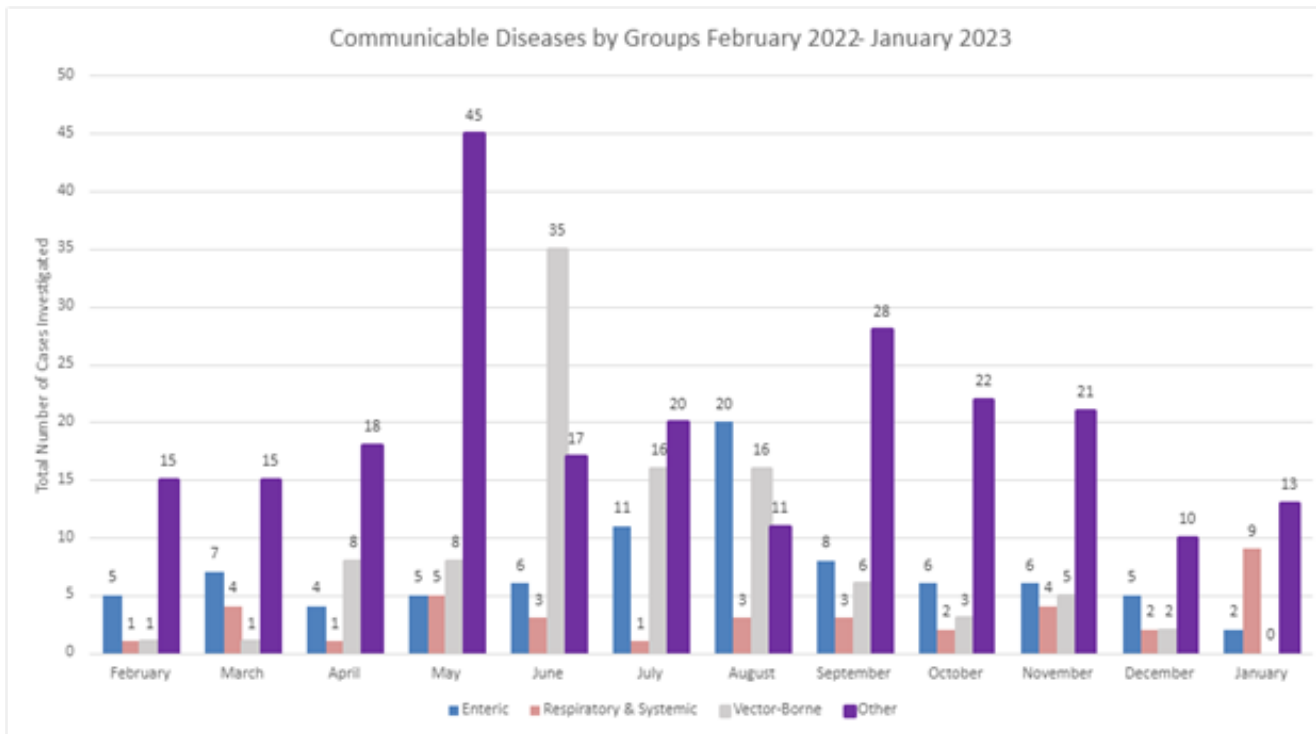
<p><b>Food Service Activities</b></p> <ul style="list-style-type: none"> <li>-Core Public Health Functions</li> <li>-Jefferson County Food Code</li> <li>-Food Sanitation Order</li> <li>-Jefferson County Food Service and Retail Food Service Sanitation Rules and Regulations</li> </ul>	<p>Safety of food 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.</p>	<ul style="list-style-type: none"> <li>-Routine Inspections: 136</li> <li>-Re-inspections: 24</li> <li>-Permit renewal process is online through new inspection software this year. Approximately 752 permit renewals have been submitted through January 31. Inspectors are contacting the facilities who have yet to renew to review the new process with them.</li> <li>-January ServSafe class canceled due to low attendance. Rescheduled for February.</li> </ul>
<p><b>Lead</b></p> <ul style="list-style-type: none"> <li>--EPA Lead Grant</li> </ul>	<p>Provide lead resources, education and connection to testing when needed. This is a collaboration between clinical, education and environmental programs.</p>	<ul style="list-style-type: none"> <li>-Second draft of the VICP has been approved to be reviewed by State. Will be sending this draft to them within the next week.</li> <li>-Ongoing collaboration with Health Education Department to assist in meeting the lead grant deliverables and program goals.</li> <li>-Two staff members cleared for and obtained EPA database access card, as outlined in EPA Superfund Grant.</li> </ul>
<p><b>Lodging</b></p> <ul style="list-style-type: none"> <li>-Lodging Rule, 19-CSR 20-3.050</li> </ul>	<p>DHSS: Inspections are conducted by local health agency or department staff. These inspections fall under lodging rule 19-CSR 20-3.050</p>	<ul style="list-style-type: none"> <li>-Lodging complaints: 1</li> <li>-2 facilities have been turned over to the state for non-compliance in October. Assisting State inspector with re-inspections for these facilities as requested.</li> </ul>
<p><b>Childcare</b></p> <ul style="list-style-type: none"> <li>-MODHSS/DESE</li> </ul>	<p>Both licensed and license-exempt facilities are required to have annual sanitation and health inspections.</p>	<ul style="list-style-type: none"> <li>Routine Inspections: 5</li> <li>Re-Inspections: 0</li> </ul>
<p><b>Laboratory</b></p> <ul style="list-style-type: none"> <li>--Missouri Department of Natural Resources Certification for Microbiological Laboratory Services of Public Drinking Water</li> </ul>	<p>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</p>	<ul style="list-style-type: none"> <li>Ice Samples: 32</li> <li>-Satisfactory: 28</li> <li>-Unsatisfactory: 4</li> <li>Public Water Samples: 183</li> <li>-Satisfactory: 183</li> <li>-Unsatisfactory: 0</li> <li>Private Water Samples: 21</li> <li>-Satisfactory: 18</li> <li>-Unsatisfactory: 3</li> </ul>

FEBRUARY 23, 2023

# PUBLIC HEALTH PREPAREDNESS

Monthly Newsletter of the JCHD PHP Team

## JANUARY 2023 COMMUNICABLE DISEASE SUMMARY OF ALL INVESTIGATIONS



### Enteric:

1 Campylobacteriosis - 1 Suspect/No Case  
1 Salmonellosis

### Respiratory and Systemic:

2 H. Influenza, Invasive  
1 Legionellosis-1 Suspect/No Case  
4 Strep Pneumoniae, Invasive  
2 Varicella

### Vector-Borne:

### Other:

8 Animal Bites-2 Suspect/No Case  
1 Rabies Post Exposure Prophylaxis  
4 TB Infection - 2 Suspect/No Case

### Non-WebSurv Conditions (not on graph)

### Reportable Conditions Investigated: 24

Investigated by the CD Team: 11  
Investigated by the Vector Team: 9  
TB is investigated by the Clinic Team: 4

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.

\*Missouri Department of Health and Senior Services Websurv Data Warehouse as of February 19, 2023. All data and information are conditional and may change as more reports are received.

# COMMUNICABLE DISEASE SPOTLIGHT: PERTUSSIS (WHOOPIING COUGH)

Whooping cough, also known as pertussis, is a very contagious respiratory illness caused by a type of bacteria called *Bordetella pertussis*. The disease is only found in humans. Whooping cough may begin like a common cold, but unlike a cold, the coughing can last for weeks or months. Whooping cough (pertussis) can cause serious illness in people of all ages but is most dangerous for babies.

## Prevention: Vaccination

The vaccine recommended for someone depends on their age.

- Babies and young children should get five shots of DTaP between the ages of 2 months and 6 years.
- Older children and teens should get one shot of Tdap between the ages of 11 and 12 years.
- Women should get Tdap during the early part of the 3rd trimester of each pregnancy.
- All adults who have never received one should get a shot of Tdap.

**Symptoms usually develop 5-10 days after you come into contact with the bacteria.**

## Early Symptoms: Stage 1

Early symptoms can last for 1 to 2 weeks and usually include:

- Runny or stuffed-up nose.
- Low-grade fever (less than 100.4°F)
- Mild, occasional cough (babies do not do this)
- Apnea (life-threatening pauses in breathing) and cyanosis (turning blue or purple) in babies and young children.

In its early stages, whooping cough appears to be nothing more than the common cold. Therefore, doctors often do not suspect or diagnose it until the more severe symptoms appear.

## Later symptoms: Stage 2

One to 2 weeks after the first symptoms start, people with whooping cough may develop paroxysms—rapid, violent, and uncontrolled coughing fits. These coughing fits usually last 1 to 6 weeks but can last for up to 10 weeks. Coughing fits generally get worse and become more common as the illness continues.

Coughing fits can cause people to

- Make a high-pitched “whoop” sound when they are finally able to inhale at the end of a coughing fit.
- Vomit during or after coughing fits.
- Feel very tired after the fit, but usually seem well in-between fits.
- Struggle to breathe.

**Babies may struggle to breathe, while teens and adults usually have mild symptoms.**

Many babies with whooping cough don’t cough at all. Instead, it may cause them to turn blue or struggle to breathe. It may seem like a common cold for the entire illness, not just the beginning.

The infection is generally milder in teens and adults than in babies and children, especially those who have gotten vaccinated against whooping cough. It may seem like a common cold. The “whoop” is often not there for people who have a milder illness.

However, teens and adults can have serious cases of whooping cough. Teens and adults, especially those who did not get whooping cough vaccines, may have lengthy coughing fits that keep them up at night. Those who get these coughing fits say it’s the worst cough of their lives. It can also cause major disruptions to daily life and serious complications.

**Vaccinated people may not get as sick**

Whooping cough vaccines are effective, but not perfect. The infection is usually not as bad for people who have gotten vaccinated against whooping cough but still get sick.

In vaccinated people who get whooping cough:

- The cough usually won’t last as many days
- Coughing fits, whooping, and vomiting after coughing fits are less common
- Apnea and cyanosis are less common (in vaccinated babies and children)

CDC recommends whooping cough vaccines for people of all ages. Learn more about whooping cough vaccination.

## Recovery: Stage 3

- Recovery from whooping cough can be slow. The cough becomes milder and less common as you get better.
- Coughing fits may stop for a while but can return if you get other respiratory infections. Coughing fits can return many months after the whooping cough illness started.

## **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**

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- Jeana Vidacak, PHP Supervisor, has been promoted to Community Services Manager. The PHP team will remain under her leadership along with the Environmental and Health Education teams.
- Jeana Vidacak, Adam Thompson and Alicia Donathon attended the Integrated Foodborne Outbreak Response and Mitigation (InFORM) presented by National Environmental Health Association (NEHA). JCHD will facilitate an internal Foodborne Outbreak Response Tabletop Exercises (TTX) this year.
- A full-time Communicable Disease Investigator has been added to the team, starting February 16, 2023.

## **CAPABILITY 14: RESPONDER SAFETY AND HEALTH**

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### **FEBRUARY 2023 CAPABILITY FOCUS**

Definition: Responder safety and health is the ability to protect public health and other emergency responders during pre-deployment, deployment, and post-deployment.

Functions: This capability consists of the ability to perform the functions listed below.

- Function 1: Identify responder safety and health risks.
- Function 2: Identify and support risk-specific responder safety and health training.
- Function 3: Monitor responder safety and health during and after incident response



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

## **Communicable Disease Surveillance Summary Report** Jefferson County, Missouri

**January 2023**

### **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 2023 MMWR calendar began on January 1, 2023.
- Case date may be based on the onset date, diagnosis date, specimen date, or test date.
- Excluded from this report are Sexually Transmitted Diseases, Influenza, and COVID-19.
- Jefferson County Health Department monitors all reportable disease cases year-round. Figures 1. and 2. include detailed views of diseases or conditions that may be of importance during the time of year this report is published. Variables such as outbreaks or the seasonality of communicable diseases may affect the number of cases per month and call for a more in-depth look. Seasonal change in the incidence of infectious diseases is common.

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

Disease or Condition	Five Previous Months					Year to Date Comparison		
	September 2022	October 2022	November 2022	December 2022	January 2023	YTD 2023	YTD 5 Previous Year Mean	YTD Alert <sup>1</sup>
Campylobacteriosis	2	1	2	1	0	0	1.6	
Cryptosporidiosis	0	2	1	0	0	0	0	
Cyclosporiasis	0	0	0	0	0	0	0	
E. Coli O157:H7	0	0	0	0	0	0	0	
E. Coli Shiga Toxin +	0	0	0	0	0	0	0	
Giardiasis	0	1	0	0	0	0	0	
Hepatitis A Acute	0	0	0	0	0	0	0.4	
Listeriosis	0	0	0	0	0	0	0	
Salmonellosis	6	2	1	4	1	1	1.6	
Shigellosis	0	0	0	0	0	0	0	
Yersiniosis	0	0	0	0	0	0	0.4	
<b>Enteric Totals</b>	<b>8</b>	<b>6</b>	<b>4</b>	<b>5</b>	<b>1</b>	<b>1</b>	<b>4</b>	

<sup>1</sup> 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**

Disease or Condition	Five Previous Months					Year to Date Comparison		
	September 2022	October 2022	November 2022	December 2022	January 2023	YTD 2023	YTD 5 Previous Year Mean	YTD Alert
Coccidioidomycosis	0	0	0	0	0	0	0	
Haemophilus Influenzae, Invasive	1	0	1	1	2	2	2	
Legionellosis	0	1	0	0	0	0	0.2	
Pertussis	0	0	0	0	0	0	1.8	
Staph Aureus, VISA	0	1	0	0	0	0	0	
Streptococcus Pneumoniae, Invasive	1	0	3	0	4	4	4.6	
Streptococcal Toxic Shock Syndrome	0	0	0	0	0	0	0	
Varicella	0	0	0	1	2	2	0.4	*
<b>Respiratory and Systemic Totals</b>	<b>2</b>	<b>2</b>	<b>4</b>	<b>2</b>	<b>8</b>	<b>8</b>	<b>9</b>	



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

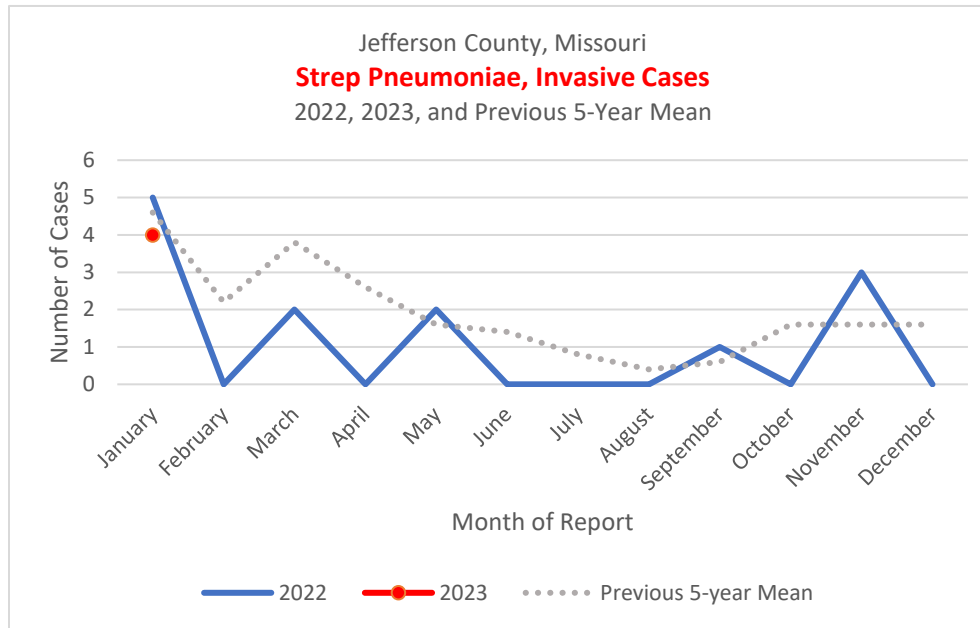
Disease or Condition	Five Previous Months					Year to Date Comparison		
	September 2022	October 2022	November 2022	December 2022	January 2023	YTD 2023	YTD 5 Previous Year Mean	YTD Alert
Anaplasma Phagocytophilum	0	0	0	0	0	0	0	
Babesiosis	0	0	0	0	0	0	0	
Ehrlichia Chaffeensis	2	0	0	0	0	0	0	
Ehrlichia Ewingii	0	0	0	0	0	0	0	
Ehrlichiosis Anaplasmosis Undetermined	0	0	0	0	0	0	0	
Rocky Mountain Spotted Fever	1	2	2	0	0	0	0.2	
Tularemia	0	0	0	0	0	0	0	
<b>Vector-Borne Totals</b>	<b>3</b>	<b>2</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0.2</b>	

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

Disease or Condition	Five Previous Months					Year to Date Comparison		
	September 2022	October 2022	November 2022	December 2022	January 2023	YTD 2023	YTD 5 Previous Year Mean	YTD Alert
Animal Bites	21	18	11	13	14	14	8	*
MOTT	3	1	3	2	0	0	2.4	
Rabies Animal	0	0	0	0	0	0	0	
Rabies Post Exposure Prophylaxis	0	0	2	1	1	1	0.8	
TB Disease	0	0	0	0	0	0	0.2	
TB Infection	4	2	6	2	2	2	2	
<b>Other/Miscellaneous Totals</b>	<b>28</b>	<b>21</b>	<b>22</b>	<b>18</b>	<b>17</b>	<b>17</b>	<b>13.4</b>	

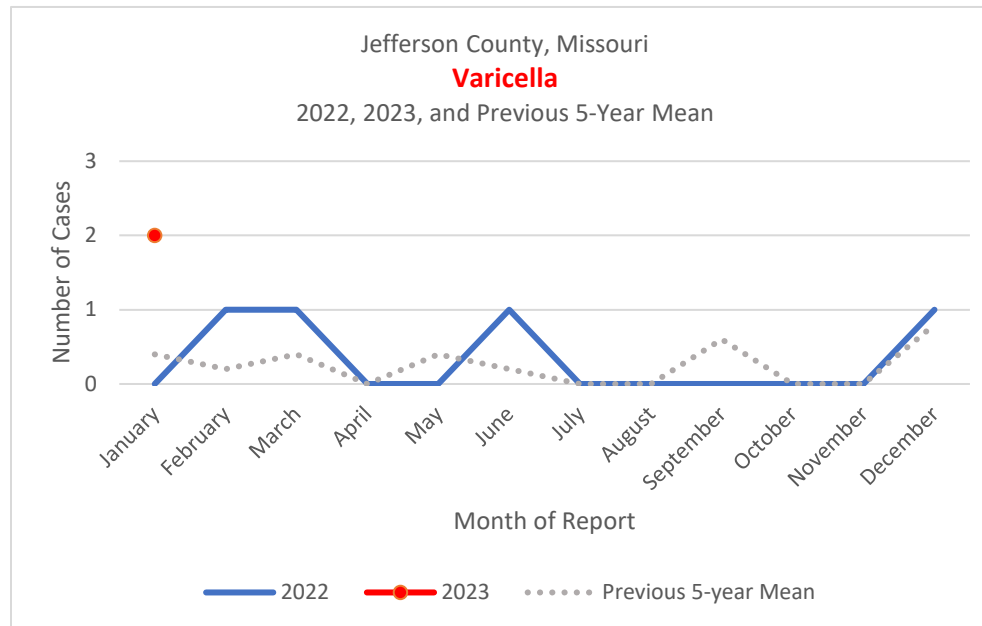
**Figure 1. Streptococcus Pneumoniae, Invasive  
Jefferson County, Missouri**

Strep Pneumoniae, also called pneumococcus, is a bacteria that causes acute infection. Some pneumococcal infections are considered “invasive” when the infection occurs in areas of the body that are normally sterile. Two pneumococcal vaccines are available in the United States to help protect against pneumococcal disease. There were 4 cases of Strep Pneumoniae, Invasive reported during January 2023 in Jefferson County. During the previous 5 years, the number of cases has ranged from 0 to 8 per month.



**Figure 2. Varicella  
Jefferson County, Missouri**

Varicella, also known as chickenpox, is a highly contagious disease that results from primary infection with the varicella-zoster virus (VZV). Varicella can cause an itchy, blister like rash that is transmitted by airborne respiratory secretions (when an infected person coughs or sneezes) or by touching or breathing in the virus particles that come from varicella blisters. Varicella can be serious, especially in babies, adolescents, adults, pregnant women, and people with weakened immune systems. Varicella is a vaccine preventable disease. Two doses of the chickenpox vaccine are more than 90% effective at preventing chickenpox. There were 2 cases of Varicella reported during January 2023 in Jefferson County. During the previous 5 years, the number of cases reported has ranged from 0 to 2 per month. A year-to-date alert has been noted for Varicella. 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>



# Communications & Marketing

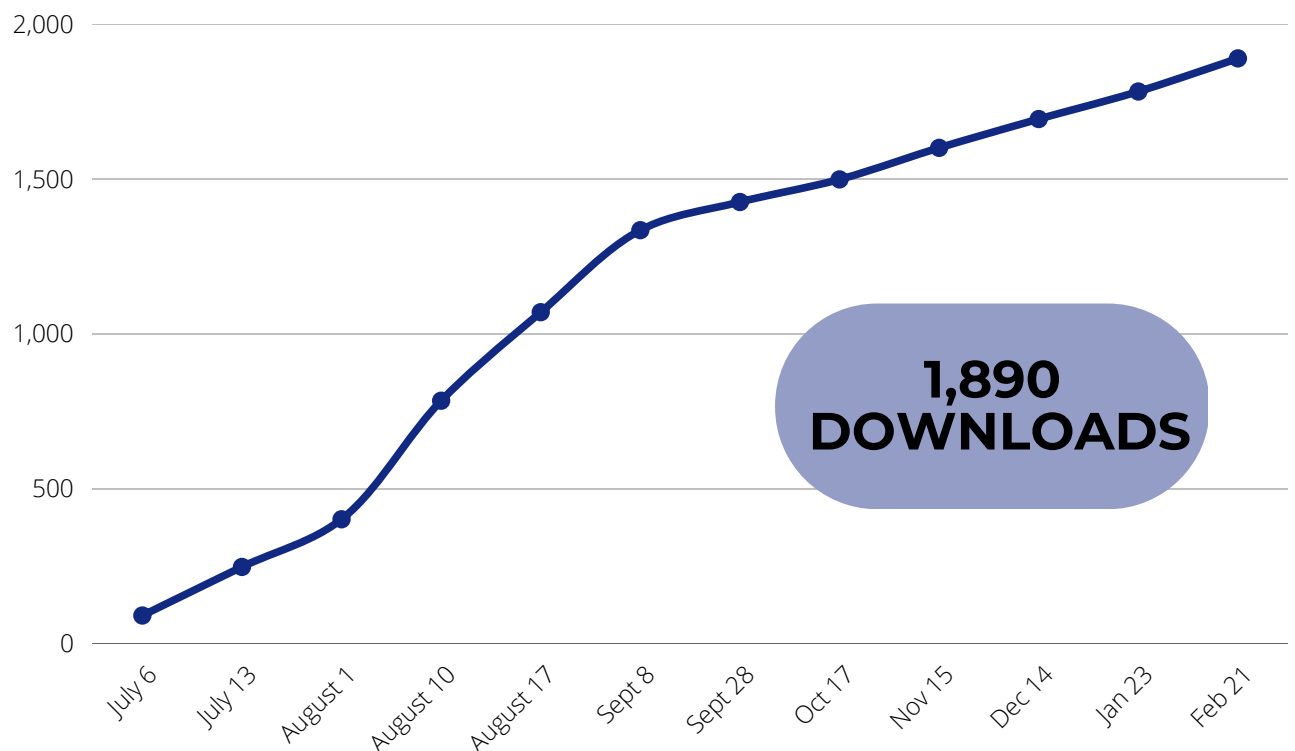
## Monthly Report- February 2023

### Analytics from January 2023

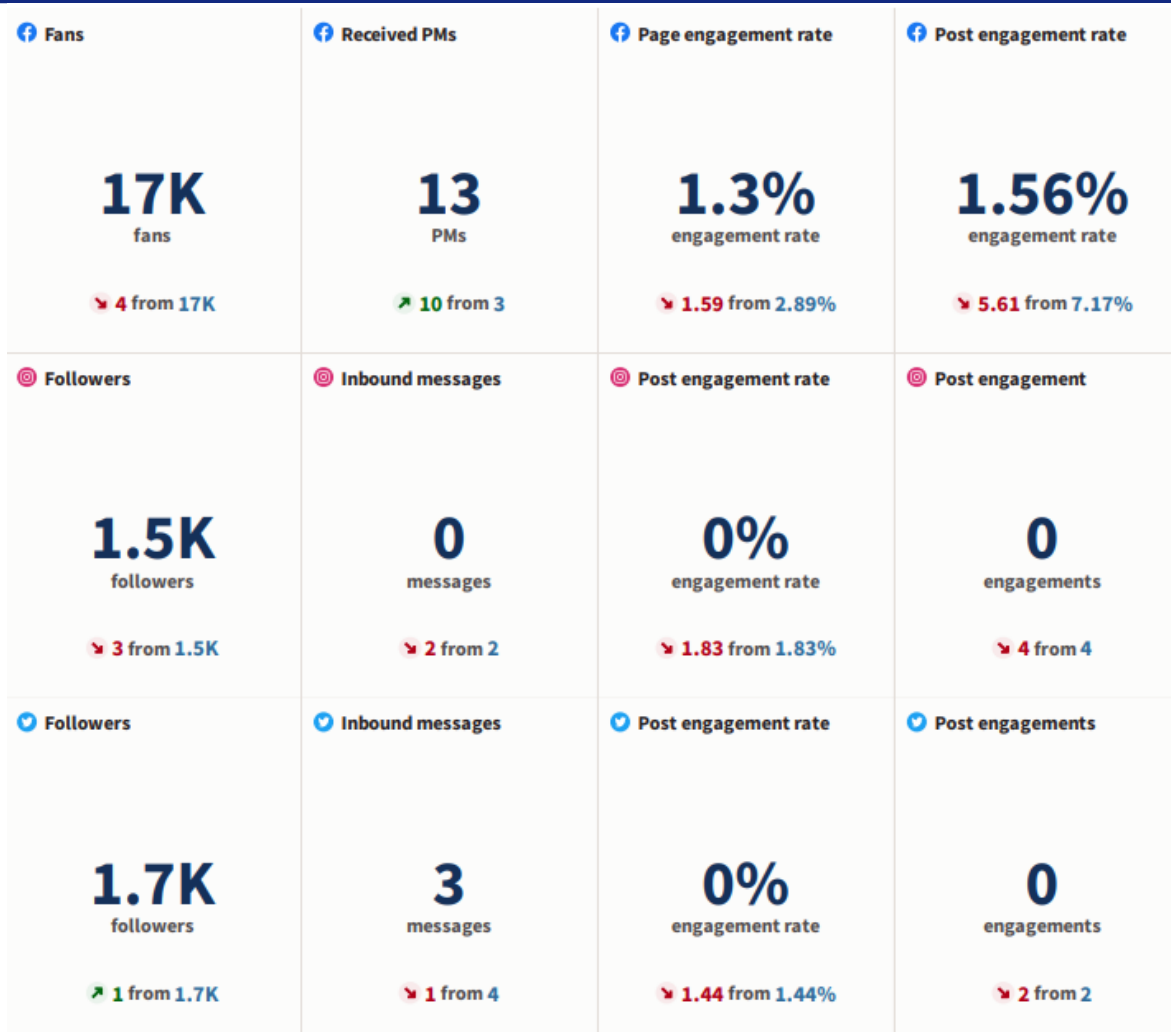
#### Updates

- Current communications projects we are working on:
  - 2023 campaign planning
  - Lead Campaign
  - Monsido and accessibility
  - Website audit and updates
  - Children's Dental Health Month
    - Coloring contest winner will be chosen soon!
  - Adult Immunization Grant
  - National Poison Prevention Week
- Annual report was successfully submitted to the county and will be posted in the Leader in March to highlight public health services in the county

## JCHD MOBILE APP DATA



# Social Media Analytics

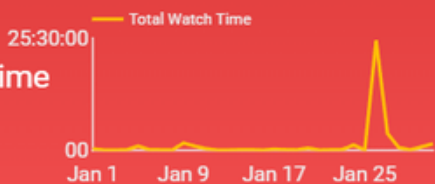


Trending by Views, Watch Time, & Shares

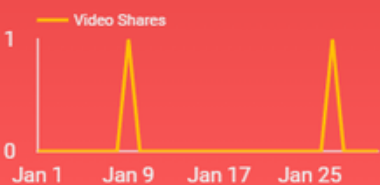
Views  
**431.0**



Avg Watch Time  
**05:30**



Video Shares  
**2.0**

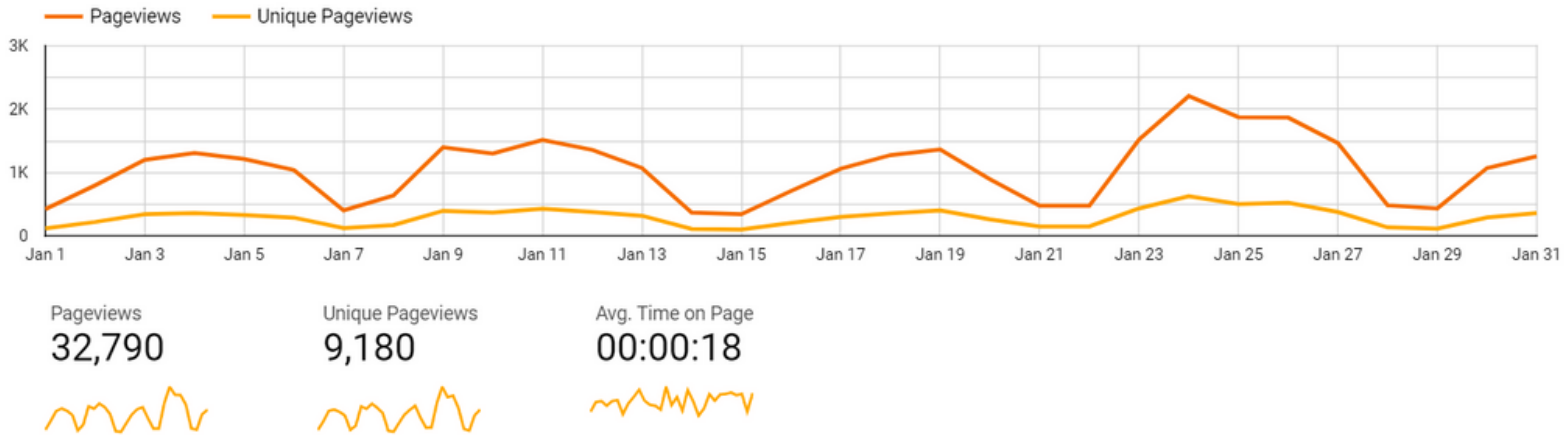


Top Videos Watched

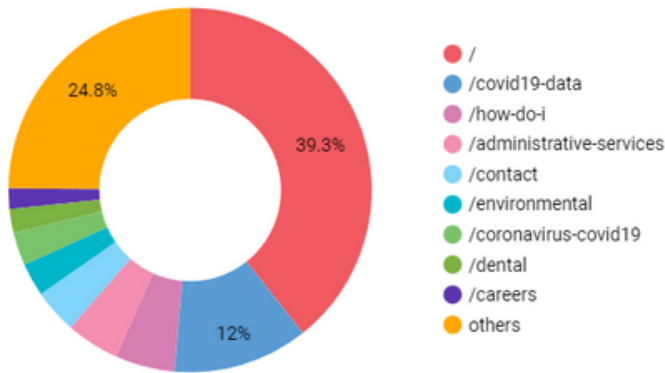
Video Title

Title	Views	Average ...	Video Sha...
JCHD 1/26/23 Board ...		00:16:54	0
JCHD 1/26/2023 Part 2		00:01:07	0
JCHD Board of Truste...		00:01:50	0
How to Wash Your Ha...		00:00:59	0
Jeffco Mindfulness Tr...		00:01:47	0
JCHD Board Meeting...		00:04:41	0
JCHD Employee Welln...		00:01:20	0
JCHD November Boar...		00:07:08	0
JCHD Board Meeting		00:00:24	0
Marilyn and Senior S...		00:01:49	0

## Overview of your user behaviors

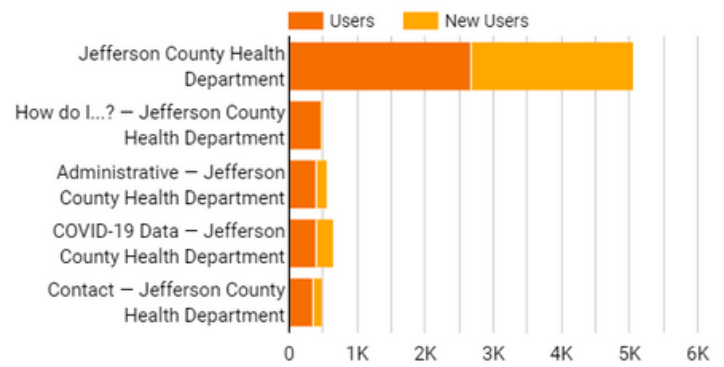


## Which page is the most popular?



Page	Pageviews
1. /	12,900
2. /covid19-data	3,943
3. /how-do-i	1,747
4. /administrative-services	1,547
5. /contact	1,282
6. /environmental	971
7. /coronavirus-covid19	961
8. /dental	692
9. /careers	600
10. /reports	594

## Most popular pages with title breakdown



Page Title	Pageviews
1. Jefferson County Health Depart...	13,074
2. COVID-19 Data – Jefferson Cou...	4,030
3. How do I...? – Jefferson County ...	1,753
4. Administrative – Jefferson Cou...	1,562
5. Contact – Jefferson County Hea...	1,346
6. Environmental – Jefferson Coun...	983
7. COVID-19 – Jefferson County H...	961
8. Blog – Jefferson County Health ...	737
9. Dental – Jefferson County Healt...	692
10. Careers 2 – Jefferson County H...	603



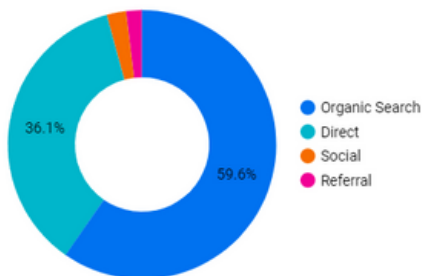
Users  
**4,142**

Sessions  
**5,967**

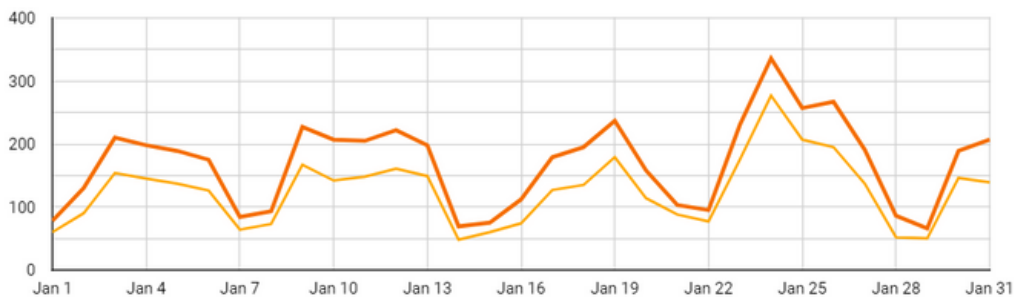
Bounce Rate  
**0.49%**

Avg. Time on Page  
**00:00:18**

## Top Acquisition Channels



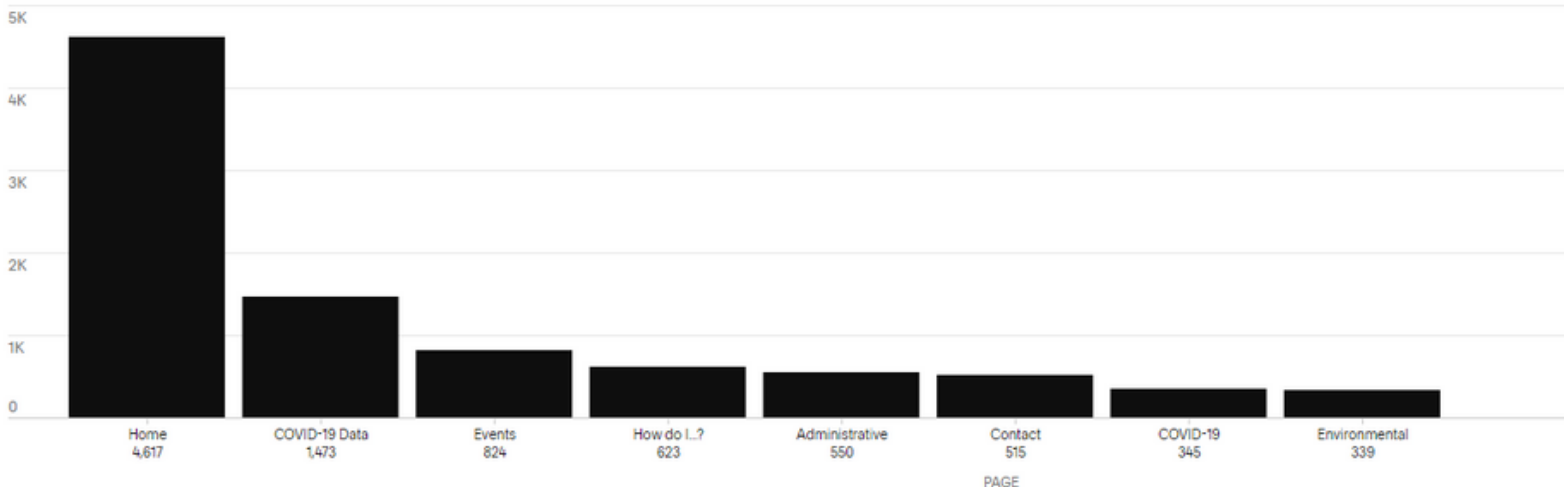
## Users (vs. New Users)



	Sessions <b>6.0K</b>	Users <b>4.1K</b>	New Users <b>3.9K</b>	Bounce Rate <b>0.5%</b>	Pages / Session <b>5.5</b>	Avg. Session Duration <b>01:24</b>
Source / Medium	Sessions	Users	New Users	Bounce Rate	Pages / Session	Avg Session Duration
google / organic	2,948	2,237	2,054	0.07%	5.79	00:01:36
(direct) / (none)	2,349	1,529	1,443	1.15%	4.55	00:00:59
bing / organic	257	197	182	0%	8.85	00:02:37
yahoo / organic	95	63	57	0%	7.92	00:01:41
l.facebook.com / referral	65	26	16	0%	4.83	00:00:34
m.facebook.com / referral	63	47	46	0%	5.27	00:01:03
duckduckgo / organic	38	30	25	0%	8.45	00:02:16
jeffcohealth.sharepoint.co...	27	12	1	0%	6	00:01:10
www4.citizenserve.com / ...	21	18	8	0%	9.57	00:02:51
lm.facebook.com / referral	19	16	15	0%	4.26	00:00:47

## Top Pageviews ?

Jan 1-31, 2023 • 66% of 14,139 Pageviews +23% mo/mo



# Google Business Profiles

## Hillsboro Office: 1,050 Interactions

 585

calls

**+69%**

 3

messages

**-25%**

 156

people asked for directions

**+32%**

 306

website visits from profile

**+53%**

 3,765

profile views

**+52%**

 1,966

searches

**+67%**

## Arnold: 1,590 Interactions

 851

calls

**+54%**

 10

messages

**+150%**

 280

people asked for directions

**+10%**

 449

website visits from profile

**+54%**

 5,615

profile views

**+41%**

 3,268

searches

**+63%**

# Monsido: Website Accessibility



Accessibility Issues Found

72

(275,701 unique issues affecting 476 pages)

Overall accessibility compliance



## Quality Assurance Report

Overall compliance status (% of pages without issues)	93%
Crawl information	
Pages scanned	476
Links found	3,133
Links	
Broken links	32
Pages with broken links	33
Misspellings	
Misspellings	0
Pages with misspellings	0
Potential misspellings	84
Pages with potential misspellings	126

## Readability score

Crawl information		
Pages scanned	476	
	Distribution	
Grade/Level		Pages
6th grade		8
7th grade		11
8th to 9th grade		54
10th to 12th grade		73
College		153
College graduate		177