

Administration

Health Director

Susan Hayes

Goals, Objectives and Performance Indicators for FY 2016-17

Public Relations

Goals	Objectives	Measures	Performance
I. Provide quality service that satisfies health department clients.	I. 100% of client/customer surveys will rate services as satisfactory or higher.	824 surveys distributed 692 surveys returned completed (84% return rate) 637 surveys returned and rated as satisfactory or higher.	99% <i>Performance not met.</i> <i>89% of surveys rated services as satisfactory or higher in the previous year.</i>
II. Thoroughly and promptly investigate complaints received.	I. 100% of complaints will be timely and completely investigated.	5 total complaints 0 high priority complaints 0 high priority complaints responded to within 72 hours	100% <i>Performance met</i>

Quality Assurance

Goal	Objective	Measure	Performance
Review all program policies and procedures according to agency quality assurance guidelines to ensure compliance with state and federal guidelines or standards.	100% of programs reviewed according to agency quality assurance guidelines	15 programs 15 programs were reviewed 15 programs were at least 96% compliant with agency quality assurance guidelines	100% <i>Performance met</i>

Program Administrative Review		
Program	Date of Review	Performance*
1. Animal Control	6/19/2017	98%
2. Child Care Consultation	6/15/2017	100%
3. Care Coordination for Children	6/22/2017	99%
4. Communicable Disease	8/31/2016	100%
5. Dental	1/23/2017	100%
6. Family Planning	5/4/2017	96%
7. Food and Lodging	3/28/2017	100%
8. Health Education	1/23/2017	100%
9. Lab	5/25/2017	100%
10. Medical Records/Front Desk	In Transition FY2016-17	N/A
11. Pregnancy Care Management	6/15/2017	99%
12. Public Health Response	1/17/2017	100%
13. TB Control	8/31/2016	100%
14. WIC	3/28/2017	99%
15. Well Water/Waste Water	1/31/2017	99%
*Indicates adherence to agency policy, as well as state and federal guidelines.		

Program Support

Goal	Objectives	Measures	Performance
Support the clinical programs with accurate and timely lab services.	I. Maintain the “Clinical Laboratory Improvement Amendments of 1988” (CLIA) certification.	The last laboratory certification inspection occurred March 19, 2017 with no deficiencies. CLIA inspections take place every two years.	100% <i>Performance met</i>
	II. Maintain the Chemical Hygiene Manual/Hazard Communication and provide annual employee training.	93 employees or student interns 93 employees or student interns received Hazard Communication Training	100% <i>Performance met</i>

Clients Receiving Lab Services per Clinic (Main Lab)

Clinic	2014-15	2015-16	2016-17
Family Planning	1,241	1,136	1256
General Clinic	1,447	1,310	1177
Daymark Recovery Center (Mental Health)	97	58	36
Total	2,785	2,504	2469

Clients Receiving Services (WIC Lab)

	2014-15	2015-16	2016-17
Hemoglobin	5,172	4,992	4,818
Lead	48	29	57
Total Clients	5,220	5,021	4,875

*Some clients may have received more than one service and clients are not unduplicated.

Laboratory Tests sent to State Lab

Type of Test	2014-15	2015-16	2016-17
Chlamydia	1,182	1,105	1184
Gonorrhea	1,278	1,105	1291
Herpes Cultures	16	21	26
HIV	1,221	1,233	1357
Lead Screening: (Main Lab)	15	16	17
Syphilis (RPR)	1,233	1,262	1365
Total Tests	4,945	4,742	5240

Laboratory Tests done by Health Department

Type of Test	2014-15	2015-16	2016-17
Gonorrhea (Throat)	206	209	206
Gonorrhea (Rectal)	31	36	29
Gonorrhea (Cervical / Urethral)	170	161	57
Pregnancy Tests	1,323	122	983
Wet Mount	1,129	1,303	1015
Total Tests	2,859	1,831	2290

2016-17 Budget Summary			
PROGRAM	BUDGET	EXPENDITURES	REVENUES*
Administration	\$765,062.00	\$630,135.00	\$152,899.00
Animal Control	\$531,686.00	\$455,993.00	\$82,309.00
Children's Health (CC4C, Child Fatality, Smart Start, School Nurse)	\$679,884.00	\$659,446.00	\$648,975.00
Communicable Disease/Bioterrorism	\$567,263.00	\$509,350.00	\$162,747.00
Dental Health	\$218,993.00	\$166,300.00	\$76,302.00
Environmental Health	\$920,012.00	\$873,840.00	\$224,156.00
Health Education	\$129,725.00	\$115,929.00	\$44,634.00
WIC/Community Nutrition	\$767,111.00	\$754,962.00	\$764,623.00
Women's Health (Family Planning, PCM)	\$1,193,211.00	\$1,071,250.00	\$815,817.00
Total	\$5,772,947.00	\$5,237,205.00	\$2,972,462.00
*Fees, Grants and Medicaid Earnings			

Animal Control

Manager
Wesley Vann

Shelter Operations

Goals, Objectives and Performance Indicators for FY 2016-17

Bite Investigation and Exposure Follow-up

Goal	Objective	Measure	Performance
Investigate all animal bites reported to the program and assure that medical follow-up is provided	100% of reported animal bites will be investigated and will include appropriate medical follow-up if indicated	297 animal bites 297 bites were investigated with appropriate follow-up	100% <i>Performance met</i>

Number of Animal Bites			
	2014-15	2015-16	2016-17
Total	325	305	338

Field Operations

Recording, Dispatching and Tracking Complaints

Goal	Objectives	Measures	Performance
Reduce duplicate animal control visits for the same customer complaint	I. 80% of complaints will be resolved within the first visit from the Animal Control Officer (determined by incident audit)	202 incidents audited 190 complaint incidents resolved within the first visit.	94% <i>Performance met</i> <i>The remaining 6% of complaints were resolved in either the second or third visit. This was mainly due to animals running at large that were unable to be captured during the first visit.</i>

Type and Number of Positive Rabies Cases					
Animal	2012-13	2013-14	2014-15	2015-16	2016-17
Bat	0	0	0	1	0
Cat	3	1	2	*0	0
Dog	0	0	0	*0	0
Fox	4	1	2	3	2
Raccoon	8	4	2	1	0
Skunk	0	1	0	2	0
Total Cases	15	7	6	7	2

*One cat and one dog were unsatisfactory for testing and were presumed to be positive for rabies. The two individuals having contact with these animals received rabies post-exposure treatment.

ANIMAL SHELTER STATISTICS FY 2015-16				
	Dogs	Cats	Other*	Total
Impounds	1,887	2,676	190	4,753
Reclaim	242	17	3	262
Adopted	700	162	72	934
Euthanized	931	2,412	71	3,414

ANIMAL SHELTER STATISTICS FY 2016-17				
	Dogs	Cats	Other*	Total
Impounds	1585	2374	87	4046
Reclaim	235	15	7	257
Adopted	590	189	58	837
Euthanized	705	2087	17	2809

*Other includes raccoons, opossums, rabbits, goats, chickens, bats, foxes, horses and deer.
 Impound numbers do not take into account those animals that escaped or died.

Child Health

Director of Nursing
Arey Rash

Child Care Nurse Consultant

Coordinator:
Cindy Trogdon

Goals, Objectives and Performance Indicators for Fiscal Year 2016-17

Lead Screening and Investigation

Goal	Objective	Measure	Performance
Identify children with elevated blood lead levels or lead poisoning and identify and remove the hazard.	100% of children with confirmed elevated blood lead levels will be monitored and provided an environmental investigation in accordance with state guidelines.	2 children identified with confirmed blood lead levels of 10 micrograms per deciliter ($\mu\text{g}/\text{dl}$) or greater. There were no children with a confirmed elevated blood lead level of $20\mu\text{g}/\text{dl}$ or greater requiring an environmental investigation.	100% <i>Performance met</i> <i>Active surveillance is required until a child has had 2 consecutive blood level tests under $5\mu\text{g}/\text{dl}$.</i> <i>17 children are currently under active surveillance for blood lead levels of 5-$19\mu\text{g}/\text{dl}$. 12 of the 17 were from this fiscal year; the remaining 5 were from previous years.</i>

Immunization Audits in Local Child Care Facilities

Goal	Objective	Measure	Performance
Ensure children in childcare facilities are age appropriately immunized.	100% of children in childcare facilities will be age appropriately immunized.	2,071 records audited 2,018 records required follow-up 2,071 in compliance within 45 days	100% <i>Performance met</i>

Number of Immunization Records Audited			
	2014-15	2015-16	2016-17
Total Number of Immunization Records in Compliance	1,872	2,012	2071
Total Number of Immunization Records requiring follow-up	114	85	53

Screening, Referral and Follow-up for Children in Child Care Facilities

Goal	Objectives	Measures	Performance
Screen three to five year old children in childcare to identify possible problems and refer children when problems are identified.	I. 100% of children who have parental consent in selected childcare facilities will receive screening.	194 children with parental consent 194 children screened for vision and hearing	100% <i>Performance met</i> <i>Fewer children were screened due to funding cuts. The children who received screening were high risk or a parent/teacher/speech therapist had concerns about and recommended the screening.</i>

	II. 100% of children with identified problems will be referred for follow-up.	21 children identified with problems 21 children referred for follow-up	100% <i>Performance met</i>
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Training to Providers, Children, and Parents

Goal	Objective	Measure	Performance
Meet the needs of child care providers, children and parents by providing education and training.	100% of child care facilities will receive the required site visit(s)	50 child care establishments as of June 30th 81 required visits made by the Child Care Nurse Consultant 110 total visits made as a result of the Child Care Nurse Consultant visiting some establishments more than once during the year.	100% <i>Performance met</i>

Communicable Disease Cases in Schools and Child Care Facilities				
	2013-14	2014-15	2015-16	2016-17
Meningitis	0	0	0	0
Pertussis	7	2	10	3
Salmonella	8	9	10	4
Shigellosis	2	0	4	0

Care Coordination for Children

Nursing Supervisor

Rebecca Hinshaw

Goals, Objectives and Performance Indicators for Fiscal Year 2016-17

Case Management for High Risk Pregnant Women and Children

Goal	Objective	Measure	Performance
Provide intervention and activities that will result in improved continuity of care and quality of care for the highest risk children.	To decrease the percentage / number of Medicaid children 0-5 with a completed or attempted task deferred for “unable to contact” (target is zero).	5% (71) of children ages 0-5 with a completed or attempted task were deferred for “unable to contact”. 1,477 total children ages 0-5 had a completed or attempted task with a parent/guardian by a Child Care for Children Nurse or Social Worker.	<i>Performance met</i>

Percentage / Number of Patients Deferred for “Unable to Contact”					
	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Year Total
2015-16	5% / 29	5% / 25	3% / 14	3% / 17	4% / 85
2016-17	4% / 15	6% / 20	4% / 12	6% / 24	5% / 71

Communicable Disease

Director of Nursing
Arey Rash

Nursing Supervisor
April Wilburn

Goals, Objectives and Performance Indicators for Fiscal Year 2016-17

Disease Prevention

Goal	Objective	Measure	Performance
Prevent vaccine preventable disease in Randolph County children.	90% of children age 2 and under who are known to the health department will be age-appropriately immunized.	61 children were age-appropriately immunized. <i>These figures include only those children who receive immunizations at the health department. Of children who receive immunizations in Randolph County, 87% were age appropriately immunized at 24 months.</i>	87% <i>Performance not met</i>

Total Immunizations Administered by Health Department Staff		
	2015-16	2016-17
Childhood Immunizations (State Required)	1,694	2,309
Influenza	70 private 70 state	80 private 208 state
Adult Tetanus	23	64
Adult Measles-Mumps-Rubella	21	37
Rabies Pre-exposure	6	33
Rabies Post-exposure	0	0
Adult Hepatitis B	57 private	39 private

Disease Control

Goal	Objective	Measure	Performance
Identify people with communicable disease in order to control the disease in the individual and their contacts and prevent additional contacts.	I. 100% of individuals identified with communicable disease will receive follow-up, treatment and control measures as indicated.	840 individuals identified with various communicable diseases 809 individuals received follow-up, treatment and control measures.	97% <i>Performance not met</i> <i>This was a slight improvement from the previous year (96%).</i>
	II. 65% of all individuals (non-contacts) who begin treatment for latent Tuberculosis (TB) infection will complete treatment.	9 individuals began treatment for latent TB. 2 individuals began and completed treatment for latent TB.	33% <i>Performance not met</i> <i>It takes 3-9 months for a patient with Latent TB to complete treatment. The remaining seven clients either did not finish their treatment within the year, or were lost to follow-up (moved, unable to reach, etc.)</i>

Total Cases of Sexually Transmitted Diseases		
	2015-16	2016-17
Chlamydia	434	452
Gonorrhea	157	181
Syphilis	6	7

HIV Cases		
	2015-16	2016-17
Total clients screened	1,233	1,357
Total clients positive in-house	1	1
Total HIV cases within Randolph County	6	6
Total AIDS cases within Randolph County	0	0

Reported Communicable Diseases for Randolph County					
	2015-16	2016-17		2015-16	2016-17
AIDS	0	0	Legionellosis	2	2
Amebiasis	0	0	Listeria	0	0
Botulism	0	0	Lyme Disease	1	4
Campylobacter	35	66	Malaria	1	0
Chlamydia	434	452	Meningococcal	0	2
Creutzfeldt Jakob Disease	2	1	Mumps	0	0
Cryptosporidiosis	3	0	Pertussis	10	4
Enterococci (Vancomycin Resistant)	0	0	Q Fever	0	0
E. Coli	4	11	Rocky Mt. Spotted Fever	12	23
Encephalitis	0	0	Rubella	0	0
Ehrlichiosis	0	1	Rubeola	0	0
Flu (adult) <i># of deaths</i>	1	5	Salmonellosis	44	38
Foodborne disease	0	0	Shigellosis	4	1
Foodborne, Staphylococcal	0	0	Streptococcal Infection Group A	8	4
Gonorrhea	157	181	Syphilis	10	7
Hepatitis A	1	0	Syphilis (congenital)	0	1
Hepatitis B (acute)	2	6	Trichinosis	1	0
Hepatitis B (carrier)	12	6	Tuberculosis (mycobacterium)	2	0
Hepatitis C	13	19	West Nile Virus	0	0
Haemophilis	5	4	Zika (<i>new FY2016-17</i>)		2
HIV	6	6			
			Total	770	846

Dental Health

Coordinator
Beth Thomas

Goals, Objectives and Performance Indicators for Fiscal Year 2016-17

Education and Screening

Goal	Objective	Measure	Performance
Detect students with dental needs and determine who is receiving dental care.	95% of Kindergarten, 1 st , 3 rd , and 5 th grade students will receive dental screening. In Asheboro City Schools, 7 th and 9 th graders will be screened.	7,701 students enrolled in Kindergarten, 1 st , 3 rd and 5 th grades and in Asheboro City Schools 7 th and 9 th grades. 6,679 students in Kindergarten, 1 st , 3 rd , and 5 th grades, and in Asheboro City Schools 7 th and 9 th grades who participated in dental screenings	85% <i>Performance not met.</i> <i>This is a slight decrease from the previous year. The reason for the decrease is parents of students enrolled in the Randolph County School System are now given the opportunity to “opt-out” of medical exams, this includes dental screenings. Nearly 600 students were not screened due to the “opt-out” option.</i>

Dental Screening and Referral for Students			
	2014-15	2015-16	2016-17
Children enrolled	*1,655	*1,628	7703
Children screened	*1,556	*1,424	6675
Children referred	143	140	337
Percent screened	94%	87%	86%

*FY2014-15 and 2015-16 screenings were done only for students in kindergarten

Referrals

Goal	Objective	Measure	Performance
Ensure that every student identified with a problem is referred for and receives care.	95% of school students referred for care will receive care	<p>337 children were referred for dental care.</p> <p>149 children were determined to have received dental care as a result of referral.</p> <p>63 children were lost to follow-up mainly due to relocation.</p>	<p>44%</p> <p><i>Performance not met.</i></p> <p><i>The number of children who received care may actually be higher; many children would have received care after the end of the fiscal year.</i></p>

Referral Follow-up	
Number of children referred	337
Number of children who were referred and received dental care	149
Percentage of Referred Children Receiving Dental Care	44%

Clinical Services

Goal	Objective	Measure	Performance
Teach patients how to maintain good dental health through plaque control and diet.	95% of children returning for care will have improved dental hygiene (determined by dental record audit).	100 medical records audited 83 records indicated children had improved dental hygiene	83% <i>Performance not met.</i> <i>This is an improvement from the previous year when 76% of records indicated children had improved dental hygiene.</i>

Clinic Follow-up/Recall

Goal	Objective	Measure	Performance
Follow clinical patients to insure dental maintenance.	95% of children scheduled for follow-up will keep their appointment.	462 children received dental treatment and were scheduled for follow-up 585 kept their follow-up appointment	80% <i>Performance not met.</i> <i>This is a decrease from the previous year when 86% of children kept their follow-up appointment.</i>

Dental Screening Randolph County Schools 2016-2017						
Randolph Co. Schools	Total Students	Students Screened	%Students Screened	Students Referred	%Students Referred	Students Opt Out
Archdale	253	186	75%	15	8%	47
Coleridge	223	181	81%	9	5%	34
Farmer	253	222	88%	11	5%	24
Franklinville	291	208	71%	8	4%	49
Grays Chapel	321	276	86%	10	4%	30
Hopewell	410	366	89%	19	5%	28
John Lawrence	287	249	87%	19	8%	26
Level Cross	291	269	92%	18	7%	5
Liberty	297	230	77%	11	5%	34
New Market	325	272	84%	8	3%	29
Ramseur	421	335	80%	19	6%	67
Randleman	662	555	84%	38	7%	70
Seagrove	307	256	83%	21	8%	33
Southmont	371	306	82%	10	3%	40
Tabernacle	271	254	94%	18	7%	7
Trindale	201	145	72%	11	8%	30
Trinity Elem.	264	228	86%	5	2%	24
Totals	5448	4538	83%	250	6%	577

Dental Screening Asheboro City Schools 2016-2017					
Asheboro City Schools	Total Students	Students Screened	% Students Screened	Students Referred	% Students Referred
Balfour	363	350	96%	15	4%
Lindley Park	266	257	97%	9	4%
Loflin	248	232	94%	16	7%
McCrary	399	385	96%	16	4%
Teachey	325	309	95%	18	6%
AHS	358	335	94%	8	2%
NAMS	139	120	86%	2	2%
SAMS	157	149	95%	3	2%
Totals	2255	2137	95%	87	4%

Grand Totals	7703	6675	87%	337	5%
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Environmental Health

Food and Lodging Supervisor Jaron Herring

Goals, Objectives and Performance Indicators for FY 2016-17

Inspections

Goal	Objectives	Measures	Performance
Ensure that sanitary practices are being followed to protect the public's health.	I. 100% of establishments will receive the appropriate number of sanitation inspections.	1,484 inspections required from 580 establishments 1,430 inspections completed of the 1,484 required	96% <i>Performance not met</i> <i>This was an increase from the previous year (83%). The reason this measure was not met was due to staff shortage.</i>
	II. 95% of establishments will receive a "Grade A" or equally high sanitation rating as of June 30 th .	580 establishments required inspection 560 maintained a grade A or equivalent	97% <i>Performance met</i>

Complaints Related to Food and Lodging

Goal	Objective	Measure	Performance
Respond to and resolve complaints related to Food and Lodging	100% of complaints will be responded to within 48 hours.	88 complaints received 87 complaints responded to within 48 hours	99% <i>Performance not met</i> <i>One complaint was not responded to within the 48 hour time frame. This was a missed opportunity.</i>

Foodborne Outbreak Investigation

Goal	Objectives	Measures	Performance
I. Determine if a foodborne outbreak exists and if so, implement corrective action.	I. 100% of foodborne illness related complaints will be investigated within 24 hours of notification.	14 foodborne illness related complaints 14 complaints investigated within the 24 hour timeframe	100% <i>Performance met.</i>
	II. 100% of confirmed illness and confirmed foodborne illness related complaints will be responded to within 8 hours of complaint receipt and any necessary corrective action will be implemented.	1 confirmed illness and confirmed foodborne illness related complaints 1 investigated within the 8 hour timeframe	100% <i>Performance met.</i>

Type of Establishment	Total Number of Establishments	Total Required Inspection	Total Required Inspections Completed	Total Required Inspections Missed	Total Required Inspections & Re-inspections Completed
Adult Day Service	3	3	3	0	4
Bed & Breakfast Home	3	3	3	0	3
Bed & Breakfast Inn	0	0	0	0	0
Child Care	43	86	86	0	92
Commissary for Push Carts	1	2	2	0	2
Educational Food Service	1	4	4	0	4
Elderly Nutrition Services	4	16	15	1	15
Food Stands	64	140	136	4	138
Hospital	1	2	2	0	2
Institutional Food Service	10	40	10	0	40
Lodging	13	13	13	0	14
Local Confinement	1	1	1	0	1
Lead	4	4	4	0	4
Limited Food Service Establishment	18	30	30	0	31
Mobile Food Unit	36	53	46	7	46
Meat Market	19	50	47	3	47
Nursing Home	13	26	24	2	24
Push Cart	12	14	13	1	13
Restaurant	247	723	707	17	719
Residential Care	37	37	37	0	38
School Building	54	54	45	9	45
Summer Camps	12	24	24	0	24
Summer Day Camp	1	1	1	0	1
Summer Food Service	0	0	0	0	0
School Lunchroom	39	156	145	11	145
Total	636	1,482	1,398	55	1,452

Ground Water and On-site Waste Water Supervisor
Wayne Jones

Goals, Objectives and Performance Indicators for Fiscal Year 2016-17

New Septic Evaluations/System Expansion Evaluations

Goal	Objective	Measure	Performance
To properly evaluate properties and issue/deny septic permits appropriately.	To perform 100% of site evaluations for new septic systems and system expansions and issue or deny within one week of completion of field	285 new and expansion permit applications submitted though 390 sites were properly prepared and ready for permit determination (some applications for sites may have been submitted in prior fiscal years) 388 properly prepared sites resulting in the appropriate outcome (permitted or denied) within one week (some applications for sites may have been submitted in prior fiscal years) 2,159 total number visits made.	99% <i>Performance not met</i> <i>There were one two sites not permitted or denied within the one week timeframe. This was a result of missed opportunity.</i>

Sewage Complaints

Goal	Objective	Measure	Performance
To verify and abate sewage problems.	To make 100% of initial visits to verify the presence or absence of sewage problems within 3 days.	59 sewage complaints 59 sewage complaints responded to within 3 days	100% <i>Performance met</i>

Sewage Complaints			
	2014-15	2015-16	2016-17
Number of complaints	165	74	59
Number responded to within 3 day timeframe	165	74	59
Performance	100%	100%	100%

Well Permitting

Goal	Objective	Measure	Performance
To properly evaluate properties and issue or deny well permits.	To make 100% of initial visits to evaluate property for well permits and permit or deny within one week of completion of field work.	366 well permit applications submitted 470 well permits issued within one week of completion of field work (some applications for sites may have been submitted in prior fiscal years)	100% <i>Performance met</i>

Public Swimming Pool Inspections

Goal	Objectives	Measures	Performance
To ensure that public swimming pools are being operated in a manner that protects the public's health.	I. 100% of public swimming pools will receive the appropriate number of sanitation inspections.	91 inspections required from 75 public swimming pools 91 inspections completed of the 91 required	100% <i>Performance met</i>

Tattoo Parlor Inspections

Goal	Objectives	Measures	Performance
To ensure that tattoo artists are practicing in a manner that protects the public's health	I. 100% of tattoo artists will receive the appropriate number of sanitation inspections.	33 inspections required from 33 tattoo artists 33 inspections completed of the 33 required	100% <i>Performance met</i>

Health Education

Health Education Supervisor Wendy Kennon

Goals, Objectives and Performance Indicators for Fiscal Year 2016-17

Community Education

Goal	Objectives	Measures	Performance
I. Protect Randolph County's children (birth to age 19) from unintentional, preventable childhood injuries and resulting deaths.	I. 100% of families will receive proper child safety seat installation education.	52 families requested proper child safety seat installation 52 families received education	100% <i>Performance met</i>
	II. 100% of those receiving a child safety seat will be able to accurately demonstrate proper installation.	25 families received a child safety seat 25 families accurately demonstrated proper installation	100% <i>Performance met</i>
	III. 80% of children participating in bike rodeos will be able to demonstrate knowledge learned (by pre/post evaluations and riding course).	416 children participated in a bike rodeo. 416 children were able to demonstrate knowledge learned.	100% <i>Performance met</i>

Goal	Objective	Measure	Performance
II. To develop community partnerships and initiatives that work to improve the health and well-being of Randolph County residents.	I. Implement one community health promotion policy change in Randolph County.	1 policy change was implemented within the county.	100% <i>Performance met</i> <i>100% smoke-free policy was implemented by the Asheboro Housing Authority.</i>

Patient Education Activities

Goal	Objective	Measure	Performance
Provide enjoyable education on an understanding level equal to that of the intended audience	100% of health education participant evaluations will reflect excellent scores.	66 program evaluations 66 reflected excellent scores	100% <i>Performance met</i>

Health Education Activity Summary				
ACTIVITY	# OF PROGRAMS		# OF PEOPLE REACHED	
	2015-16	2016-17	2015-16	2016-17
Community Health Education	7	17	19	581
Quit Smart Tobacco Cessation Series	2	4	7	16
Minority Diabetes Prevention Program Series	N/A	1	N/A	12
Health/Safety Fairs	13	9	750	655
Play Daze	2	5	1,200	1,500
Car Seat Distribution	N/A	N/A	51	25
Health Promotion Consultations/Resource Information Provided	N/A	N/A	43	26
Vasectomy Counseling	N/A	N/A	0	5
Total	24	36	2,139	2,815

WIC-Nutrition

Director
Kathi Auman-Einig

Goals, Objectives and Performance Indicators for Fiscal Year 2016-17

WIC Certification/Eligibility

Goal	Objective	Measure	Performance
Provide nutrition services to pregnant women, postpartum women, infants and children up to age five.	To maintain an active participation rate of at least 97% of base caseload.	3,963 assigned caseload 3,556 caseload served	90% <i>Performance not met</i> <i>This was a decrease from 94% the previous year. This decrease is being seen nationwide.</i>

Breastfeeding Support

Goal	Objectives	Measure	Performance
Promote and provide support for breastfeeding.	I. 60% of women enrolled in WIC will initiate breastfeeding.	946 women enrolled in WIC 810 women initiated breastfeeding	86% <i>Performance met</i>
	II. 30% of infants who are breastfeeding at six weeks of age.	944 infants 342 infants continued to breastfeed six months later.	36% <i>Performance met</i>
	III. 20% of infants who are	944 infants	15%

	breastfeeding at six months of age.	146 of women continued to breastfeed six months later	<i>Performance not met</i> <i>The remaining women chose to discontinue breastfeeding after six months.</i>
	IV. 95% of breastfeeding mothers will receive appropriate contact and support from the breastfeeding peer counselor.	150 medical records reviewed for evidence of appropriate contact and support 144 medical records with appropriate support documented	96% <i>Performance not met</i>

Community Nutrition

Adult Nutrition Consultation

Goal	Objective	Measure	Performance
Counsel adults regarding therapeutic diets according to physician orders.	100% of client records audited will indicate that the client received counseling on their prescribed therapeutic diet.	No clients seeking counseling for a prescribed therapeutic diet.	<i>There were also no clients seeking counseling in the previous year.</i>

Menu Review for Nutrition Adequacy

Goal	Objective	Measure	Performance
Provide menu reviews for facilities and to ensure that menus meet Division of Facility Services Standards.	100% of menus will be reviewed within 8 weeks of request.	1 menu received for review 1 menus reviewed within 8 weeks of request.	<i>There was one menu for review during FY 2014-15.</i>

WIC/Community Nutrition Activities				
Activity Type	2013-14	2014-15	2015-16	2016-17
Nutrition Displays	1	1	1	3
Community Nutrition Education Programs	2	1	2	0
Private Therapeutic Clients	2	0	0	0
Breastfeeding In-service	1	1	1	1

Women's Health

Director of Nursing

Arey Rash

Family Planning

Coordinator

Julie Clark

Goals, Objectives and Performance Indicators for Fiscal Year 2016-17

Goal	Objective	Measure	Performance
To provide family planning clinical services to low income women of childbearing age.	75% of clients receiving family planning services will be from the target population	1,044 family planning clients 820 clients were at or below 150% of Poverty	79% <i>Performance met</i>

Family Planning Client Participation Summary			
Client Type	2014-15	2015-16	2016-17
Total clients served	1,242	1,026	1,044
Clients at or below 150 % of poverty level	867	835	820
Percent of caseload from target population	70%	81%	79%

Pregnancy Care Management

Nursing Supervisor

Rebecca Hinshaw

Goals, Objectives and Performance Indicators for Fiscal Year 2016-17

Case Management for High Risk Pregnant Women and Children

Goal	Objective	Measure	Performance
To improve the quality of maternity care, improve birth outcomes and provide continuity of care for eligible women.	Decrease the percentage of priority OB Medicaid clients deferred for “refused services” within 60 days of initial risk screening (target is 0-5%)	453 Medicaid clients had a positive initial risk screening. 18 Medicaid clients were deferred for “refused services” within 60 days of a positive initial risk screening. <i>Women with a positive initial risk screen are those that have at least 1 of 10 risk factors for pre-term labor.</i>	4% <i>Performance met</i> <i>This performance measure is compiled from data from Community Care for North Carolina’s Informatics Center.</i>

Percentage / Number of OBCM Patients Deferred for “Refused Service”					
	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Year Total
2015-16	3% / 4	1% / 1	3% / 3	6% / 9	3% / 17
2016-17	6% / 7	7% / 8	2% / 2	1% / 1	4% / 18