

April-May 2018

Communicable Disease & Notifiable Conditions (3 programs-CD,TB,STD)

January-February, our **communicable disease (CD) program** nurse received 84 reports requiring data entry into the State database, and/or investigation and follow-up.

Disease	March-April	Total to date
Campylobacteriosis	5	14
Cryptosporidiosis	1	2
Giardiasis	0	1
Hepatitis A	0	0
Hepatitis B	0	0
Hepatitis B-Chronic	2	2
Hepatitis C- Chronic	33	56
Hepatitis C- Acute	0	0
Lyme	0	1
Pertussis	1	1
Salmonellosis	0	1
Tuberculosis- Ruled out	1	1
Tuberculosis-Latent new/open	0/0	0/1
Tuberculosis-Active new/open	0/0	0/1
Vibriosis (non-cholera)	0	1
Sexually Transmitted Diseases		
Chlamydia	33	66
Gonorrhea	6	13
Syphillis	0	0
Herpes	1	3
HIV	1	1
Totals	84	163

Maternal-Child Health (MCH)

Funding from the Substance Abuse Prevention Grant provided Incredible Years parenting curriculum and initial baby and toddler training was completed for use with both the **Children with Special Health Care Needs (CSHCN)** program and the **Early Intervention Program (EIP-CPS).** This is evidence-based prevention curriculum that can be used with parents of children aged birth to 12. Further training will be completed at a later date.

The Early Intervention Program (EIP-CPS) is going through some contract changes and staff are working with EIP contractors across the state, DSHS, and Children's Administration to communicate needs and positive outcomes.

The Maternal Child Health Block Grant has been providing Nurse Facilitation for the **Mason County Breastfeeding Collaboration**. This group of providers has provided support and resources for providers across Mason County to complete breastfeeding training, and for Mason General providers to complete the training needed for Mason General Hospital to meet the education criteria to be able to apply as a Breastfeeding Friendly Hospital as a next step.

The MCH Nurse is assisting the Department of Health Autism Grant Lead to coordinate a free provider training on June 14th titled: Effectively Partnering with Culturally and Linguistically Diverse Families. It was offered in our county specifically because of work with Latino families and the diverse cultural needs of Mason County.

Housing

Adult Shelter - Community Lifeline

Community lifeline opened their cold weather shelter November 1 for continuous stay. 92 different adults have used the shelter with 20 – 25 staying each night. The shelter has reached their capacity 30% of the time. One of the most notable reports from Community Lifeline is the improved health of people staying in the shelter – less sickness, infections and trips to emergency room.

Crossroads Housing

- 1. Family Shelter (7 Units) always full and they have a wait list
- 2. Transitional Housing (7 homes) full
- 3. Coordinated Entry: January March
 - Shelton: 285 Households experienced a housing crisis
 - Belfair: 44 Households experienced a housing crisis
 - 13% have a chronic health condition
 - 21% experience mental illness
 - 6% have challenges with chemical dependency

OSPI – Mason County

Youth experience housing instability and homelessness (includes couch surfing and families doubled up) throughout the whole school year:

- 403 2015 2016 school year
- 778 2016 2017 school year

Turning Pointe Domestic Violence and Survivor Advocacy:

Year to date (7/1/18 - 3/31/18) 193 households have stayed in the Domestic Violence Shelter which is at capacity. There have been 527 requests to stay in the shelter during this time period.

Mental Health & Substance Use Prevention & Treatment (Treatment Sales Tax (TST) Funded)

Behavioral Health Resources – School based therapist:

BHR provides a school-based therapist in the North Mason School district with the following students and schools served:

School	Enrolled Students	Gender
Belfair Elementary School	11	3 female/8 male
Sand Hill Elementary School	19	5 female/14 male
Hawkins Middle School	14	10 female/4 male
James A. Taylor High School	7	4 female/3 male
North Mason High School	7	4 female/3 male

Northwest Resources

Categories	Quarter 1 2018	Quarter 2 2018	Quarter 3 2018
Total clients served	90	83	85
New clients enrolled	26	32	35
Experiencing homelessness at intake	55	37	37
Received program rental assistance	6	14	15
Engaged in SUD and/or MH Tx	60	54	66
Graduated from SUD and/or MH Tx during quarter	13	10	19
Became employed	16	15	13
Assisted with resumes	14	18	14
Attending college	8	9	8
Pursuing GED	4	5	7
Assisted with transportation	20	17	23
Referred to Mason County Coordinated Entry	17	16	12

Therapeutic Courts: 2017

The Therapeutic Courts operate 4 treatment courts: Drug, mental health, veteran and family recovery.

Total Participants	59
NEW enrollments	36
Graduates	18
Dropped out / terminated	18

Housing is one of the primary challenges of therapeutic court participants. Of the 59 participants 24 became homeless during the program and 8 dropped out due to lack of housing.

Mason County Opioid Response Plan

Prescription Drug Overdose Program (PDO) Funded by Department of Health Grant through 08/30/19

PDO-Opioid Statistics	April	YTD
Naloxone Kits Distributed	48	237
Resource Guides Distributed	300	1000
Opioid Overdoses	2	11
Opioid Overdose Fatalities	0	0
Non-Opioid Overdoses	0	10
Non-Opioid Fatalities	0	0

Mason County's Opioid Response team has been busy. In April and May, the Overdose Prevention Project (one aspect of Opioid Response) held 2 public workshops, as well as training to a treatment facility's staff. We have increased our public presence by participating in Mason General's Family Health Awareness event, which was a great opportunity to engage with the community and health care professionals on this topic. We received positive feedback and provided some overdose prevention and naloxone trainings. We have continued to have success at our Shelton Transit Center table, a weekly event where services are provided for 3 hours every Wednesday on a drop-in basis at the center's mezzanine. We have had 7 events in these two months. We have also expanded our efforts by beginning a street outreach program in both Shelton and Belfair. We are certainly starting to gain recognition and trust within high risk individuals and have been able to provide treatment referrals as well.

Comprehensive Opioid Abuse Program (COAP) Funded by Bureau of Justice Assistance through (BJA) 10/30/20

There are two major components that impact the implementation and possible success of the Comprehensive Opioid Abuse Program (COAP) grant and we have been focusing on both equally. One of those is a research and data collection component, so we have been creating data collection sheets and have started discussions with our local treatment providers as to the implementation of them. We are hoping to track participants through the recovery and treatment system here in Mason County and to assess what treatment modalities are leading to successful engagement. We are also tracking how the referral process is functioning regarding both treatment and recovery services. We have the assistance of an outside research/evaluator that is working with us on this component of the project.

The other major component to the COAP grant is partnerships. We are in the process of engaging community decision makers/stakeholders and asking for them to sit at the same table with all those within the treatment and recovery system in Mason County. The hope is to identify gaps and bridge them through partnerships and active communication between partners.

Emergency Preparedness

At our Management Meeting on April 24th we began a 2-part preparedness exercise that concluded on April 25th at our all department staff meeting. The exercise was to test our Continuity of Operations Plan (COOP) in the event our building was unusable, and we needed to resume all operations, Community Health, Environmental Health, Planning, Building, Code Enforcement, and Permitting in a temporary location. During the exercise we utilized Alert Sense to contact management and all staff regarding the emergency test. The management then walked through the sequence of our COOP. During the all staff training day, the staff was refreshed on the Incident Command System and then broke into divisions to work on what supplies and preparations each division needs to work on to be able to move their services quickly in the event of being relocated to another facility in an emergency.