



ANNUAL REPORT 2024

A Year of Historic Investments in
Local Public Health Systems in
Indiana through the Health First
Indiana Initiative

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Message from the Health Commissioner –



Thomas Gutwein, MD, FACEP

A health department we should all be proud of! At the Allen County Department of Health, we have had a fantastic 2024 and are looking forward to a stronger 2025.

We are excited to share this year with you and all of the things that we have been doing to “move the needle” to make our community stronger and healthier.

This was a year of growth, with expanded capability to impact our community and partner with community agencies and organizations in an effort to decrease obesity, decrease our maternal and infant mortality rates, improve access to health care, educate about vaping to show students the harmful effects, and many other important building blocks to grow Allen County for a positive long-term future.

In some ways, our county is similar to most other counties across the state and the nation in that we continue to be challenged with endemic illness like influenza, RSV and COVID-19, encouraging vaccination to limit the spread and severity of these illnesses while preparing for the next new virus or health emergency that could have serious negative consequences for our community. Sexually transmitted infections (STIs) such as gonorrhea and chlamydia are, unfortunately, still prevalent and require our staff to work diligently with contact tracing to limit the spread. The number of congenital syphilis cases has risen 2,300% from 2018-2023 across the state and – with the support of our local health care providers – we have worked to increase testing of pregnant patients and others at high risk to try to prevent this very treatable disease that now causes severe problems, including stillbirth, in more than 50 cases per year in Indiana. Lead poisoning is another very treatable problem that, when diagnosed early, can be treated to prevent permanent neurological injury to children. I share these comments just to highlight that the work of our department, in conjunction with the work of local health care providers, is all done to build toward a healthier community in the coming years.

Faced with these and many other challenges, we have been very active stewards of spending our newly appropriated Health First Indiana funding across the county. This has led to amazing opportunities to really make an impact that will be felt in the years to come. Teaching kids how to learn healthy behaviors and helping adults get tested and treated for issues that can prevent not only illnesses that will be debilitating, but also with early treatment and prevention we can keep our community stronger.

Building a healthy workforce means our citizens are better able to utilize their talents and be active participants in their families to a level that would not have been possible, had they suffered from the devastating consequences of their disease, if that was left untreated.

I encourage you to not only review this annual report to see what we have done as a health department, but also to look for our Health First Allen County Annual Report to see all the new and exciting things going on in your backyard for you and your neighbors, by our health department and your neighbors.

I couldn't be prouder of the tremendous work our team has done in 2024, and I am looking forward to continuing to improve the health of our community until everyone in Allen County has the opportunity to live a healthy, happy life! No exceptions!

Message from the Department Administrator –



Mindy Waldron, BS, REHS, CP-FS

What a year! As I sit down to write, I'm amazed at all the good things that occurred in 2024. Unprecedented things. Historic things. Meaningful and impactful things. But most importantly, proactive and preventive things.

You will read about these exciting things in this report and in our companion Health First Allen County report detailing all the new activities.

As this document will no doubt mention many times, 2024 featured the deployment of Health First Indiana – the state's initiative to foster healthier communities across the state – and this is likely the benchmark against which all future years of public health data will be compared. Funding increased, required duties increased, our internal offerings expanded and we began an intensive year of partnership development.

Everything aimed to reach more people and provide more services to finally begin to “move that needle” we have so often mentioned over many years toward improving public health in Allen County.



It will take many years before we see the fruits of our current labors, but we know now that Allen County is made up of many organizations, health care systems, officials and a health department who all care about public health and its betterment for the future of our community. We saw that very clearly this year through partner site visits, events, new and exciting activities and support across the board on the roll-out of Health First Allen County – our local initiative to better promote and protect public health.

As we think about moving into 2025, the future is bright! Gone are the years where we just look forward to another year of doing our best to assist our citizens by coming up with creative ways to meet demands under constrained budgets. At least for now.

Our goals are now to continue to develop more preventive methods to lessen chronic disease and preventable deaths and increase the likelihood that citizens will seek the necessary services to change behaviors to move that public health needle in a positive direction.

We are beyond hopeful for things yet to come, thankful for the ability to be part of the prevention landscape and proud that we deployed the first year of Health First Allen County in the most robust way we could – thoughtfully and as a TEAM.

By the Numbers –

| Department of Health By the Numbers | 2023 | 2024 |
|-------------------------------------|-------|-------|
| Total Deaths | 4,801 | 4,757 |
| Total Births | 7,517 | 7,986 |
| STI Appointments | 3,290 | 3,413 |
| Active TB Cases | 10 | 11 |
| Children's Vaccinations | 1,921 | 1,685 |
| Adult Vaccinations | 1,802 | 3,255 |
| Food Permits Issued | 2,625 | 2,683 |
| Animal Bites | 827 | 826 |
| Lead Screenings | 6,294 | 6,272 |
| Mosquito Samples Tested | 87 | 212 |
| Phase 1 Environmental Requests | 176 | 209 |
| Public Records Requests | 425 | 393 |
| Media Requests | 92 | 72 |

| Top Infectious Diseases in Allen County | 2023 | 2024 |
|---|-------|-------|
| COVID-19 | 9,809 | 7,051 |
| Hepatitis C | 271 | 186 |
| Hepatitis B | 66 | 58 |
| Hepatitis A | 0 | <5 |
| Campylobacteriosis | 59 | 76 |
| Salmonella | 56 | 52 |
| Giardiasis | 17 | 27 |
| Shiga-toxin Producing E. Coli | 13 | 20 |
| Influenza-associated Deaths | 9 | 15 |
| Legionellosis | 16 | 36 |

Note — In previous years, this section of the report contained county health rankings data from the Robert Wood Johnson Foundation and the University of Wisconsin. They no longer issue numeric rankings for counties, though health data remains available here:
<https://www.countyhealthrankings.org/health-data/indiana/allen?year=2024>

For a full report on Health First Allen County (HFAC), please consult our HFAC Annual Report, which you can find by scanning the QR code -



Communications Division – Director: Matt LeBlanc, BJ, MS

The Communications Division made outreach its central effort in 2024, meeting goals of engaging directly with Allen County residents to highlight and complement the ongoing mission of the Department of Health to promote and protect public health.

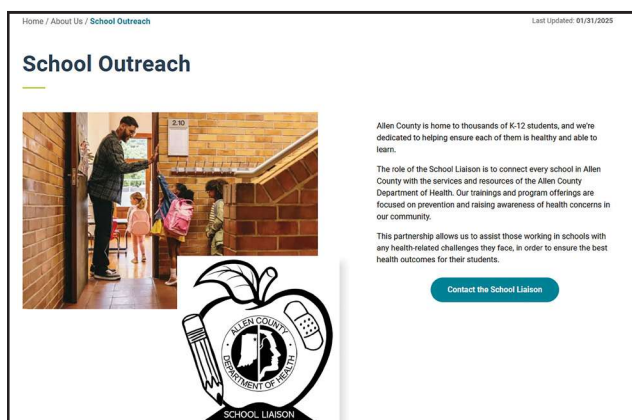
It was an eventful year, as the division collaborated with department staff in other divisions to reach the public through digital and in-person outreach like never before. Information about Department of Health services and offerings was provided in more traditional settings, such as community health fairs and the yearly health fair organized for City of Fort Wayne and Allen County employees. We greatly expanded our reach as well, attending expansive community events including Open Streets in August and the Harry Potter-themed HogWorks Takeover in October on the Electric Works campus, where the Communications Director and the department Health Educator met and interacted with nearly 1,000 people – far more than typically reached at events tailored specifically to health or safety topics.

We also joined first-of-their kind community events such as McKinnie Commons Connections – a public gathering organized over several weeks in the summer by Fort Wayne Parks and Recreation aimed at reaching residents in the city’s southeast quadrant.

Our goal was simple, but important: meet people where they are, to inform and educate. That goal was met, and we also succeeded in introducing ourselves – the Department of Health employees who perform public health work daily – to citizens who might not have known us or about the essential work done to prevent disease, promote health, protect the environment and preserve vital records. In addition to that in-person outreach, the Communications Division worked closely with staff to highlight their work at allencountyhealth.com, the Department of Health website. Perhaps most noticeable was the creation of a School Outreach section, which includes information about the Public Health School Liaison – a new position created to align local schools and the Department of Health for work on a variety of topics to get and keep students healthy.



Pamphlets on healthy activities, “flu kits” (with tissues, aspirin and other useful items) and department-branded stress balls were among items given away to hundreds of visitors at the HogWorks Takeover event in October at Fort Wayne’s Electric Works campus.



The School Outreach section was created and updated regularly with assistance from the Public Health School Liaison to include handouts and educational materials on topics ranging from the dangers of vaping and added sugars in foods and drinks to videos from monthly lunch-and-learns hosted by the Public Health School Liaison and materials created by students, for students focused on health.

Allencountyhealth.com also served again as a clearinghouse overseen by the Communications Director for information about Health First Allen County (HFAC), our initiative to bolster and improve an already diverse platform for the delivery of state-mandated Core Public Health Services.

The Communications Division continued to use social media to inform the public daily about a variety of public health topics. Platforms such as Facebook, Instagram and X also were utilized to highlight our HFAC work as well as outreach efforts.

In 2024, the Communications Division also oversaw an update and publication of the Department of Health’s Know & Go: Public Health Resource at Your Fingertips booklets – informative handouts that include information about immunizations, healthy homes and many other services offered by the Department of Health as well as other community organizations. For the first time, the booklets were published in Spanish and Burmese to better connect with and inform more residents in our community.

The Communications Division also worked with the Health Educator to design food safety handouts in English, Spanish and Burmese, and efforts to translate materials able to be used by many Allen County residents likely will continue in 2025.

Along with outreach, the Communications Division continued its regular work to edit, amend and publish internal and external communications such as permit applications and news releases. The Communications Director continued to serve as the Department of Health Public Information Officer, responding daily to many emails and phone calls from the public; answering inquiries from reporters.

The Communications Director also is the Department of Health’s on-call representative, fielding calls beyond business hours about food safety, communicable diseases and other topics. The Communications Division received dozens of those calls in 2024, directing assistance to businesses and emergency personnel via the Food & Consumer Protection, Environmental Services and Clinical Services and Case Management divisions.

In a word, 2024 was busy. And the year was so exciting. The Communications Division looks forward to a similarly impactful 2025.



| | | | |
|--------------------|-------------------------|-----------------------|-------------------|
| <i>At a glance</i> | | | |
| 2 0 2 4 | 393 | 10 | 54 |
| | Public Records Requests | News Releases/ Alerts | After-hours Calls |
| | 72 | 35 | 209 |
| | Media Requests | Interviews | Phase I Requests |

Clinical Services & Case Management Division –

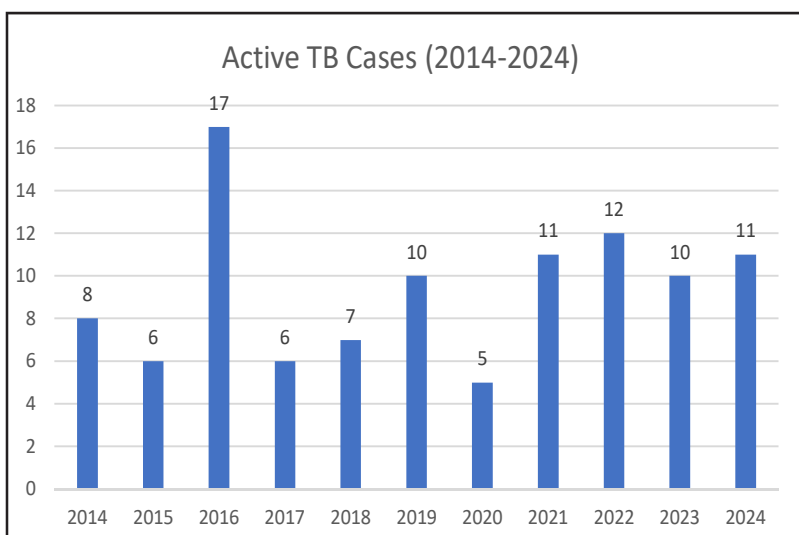
Director: Erika Pitcher, MPH

Over the past year, the Clinical Services and Case Management team continued its diligent work serving the residents of Allen County. After several years focused on pandemic response and addressing staff shortages, 2024 provided an opportunity to implement new programming, grow outreach activities and further expand services we have always provided in our clinics.

Infectious Disease Case Management:

The Infectious Disease Case Management team spent much of 2024 managing complex cases of tuberculosis, responding to the emergence of an old disease and assisting with the response to a new emerging world threat: highly pathogenic avian influenza (HPAI).

The total case count of newly diagnosed active tuberculosis cases this year was 11, which is statistically consistent with years past. Again in 2024, the active tuberculosis cases were complex



to manage. More than 25% of cases were medically resistant to at least one front line drug, which can be difficult to manage due to the side effects often present with second line medications. Also, almost half the cases were diagnosed as extra-pulmonary, meaning the tuberculosis bacteria was found in the body outside of the lungs, such as in an organ, lymph node or wound. While these cases are often 100% treatable, the treatment length is often longer depending on the location of the disease.

Most of the diseases our team responds to every day are required to be reported by

providers and laboratories to local health departments under the Indiana Communicable Disease Reporting Rule. A list of these reportable diseases can be found on pages 12, 13 and 14. One great benefit to receiving these reportable diseases at the local level is that it provides a good baseline of data to look at when we are trying to determine if disease rates are trending up or down. Occasionally, there are increases in diseases of community interest that are not required to be reported, such as influenza, respiratory syncytial virus and norovirus. When these diseases appear to be on the rise anecdotally, it is difficult to statistically show the increase of disease, because we do not have data to show what a normal occurrence is.

This year, there was a national increase in cases of pediatric pneumonia, which is not a disease required to be reported. This increase in cases caused concern for local providers, parents and schools. Pneumonia is a lung infection that can be caused by bacteria, viruses or fungi.

The increase in cases this year has been linked to *Mycoplasma pneumoniae*, which is a bacterial pneumonia often referred to as “walking pneumonia.” Through excellent partnerships with schools, we were able to create a form that allowed schools to voluntarily and proactively track cases of pneumonia, so we could establish a system to monitor the spread of cases throughout our community.

We were then able to gather the aggregate information and report back to local schools and providers to provide a snapshot of what the disease transmission looked like in Allen County, allowing for the implementation of appropriate guidance and control measures in real-time.

Along with old diseases, our team was also able to assist with an emerging disease, highly pathogenic avian influenza A (H5N1). This is often referred to as “bird flu” because it is commonly found in wild birds and poultry. Several dairy cows in the U.S. were infected this year. When an infected flock is identified locally, the Indiana State Board of Animal Health (BOAH) is responsible for managing the situation from the animal perspective.

The local health department is notified and is responsible for monitoring all human contacts of the contaminated birds/animals throughout the incubation period. When this occurs, a member of our team will reach out to the exposed individual(s) to provide basic education on what symptoms to watch for over a certain period of time. We then check in daily with each person to ensure they stay healthy throughout the incubation period. If a person were to develop symptoms, our team would help arrange for that person to be tested and treated as needed.

Clinical Services:

Infectious Disease Clinic –

Clinic staff remained busy throughout the year providing medical screenings for more than 300 refugees. We continued to partner with Catholic Charities to ensure we offer comprehensive services to all newly arriving refugees. In 2024, we saw refugees arriving from Central Africa, Afghanistan, Georgia, Tanzania, Myanmar, Thailand, Democratic Republic of Congo, Somalia, Venezuela, Guatemala, Vietnam and Sudan.

Also, after a multi-year hiatus due to staffing and the pandemic response, we were able to once again start offering Civil Surgeon Exams in March 2024. A Civil Surgeon Exam is a medical examination by a doctor (Civil Surgeon) designated by U.S. Citizenship and Immigration Services as part of the process to change a person’s citizenship status and obtain a green card. Since March, our designated Civil Surgeon provided 295 Civil Surgeon Exams.

Clinic staff also continued to see community referrals for latent tuberculosis follow-up and potential preventive treatment. We had several challenges this year with national drug shortages that resulted in issues accessing the preferred medications for latent tuberculosis treatment. At year’s end, we had begun to see improvement.

Sexually Transmitted Infection (STI) Clinic –

The STI Clinic remained busy throughout the year, providing screening and treatment for routine sexually transmitted infections, including syphilis, gonorrhea, chlamydia, hepatitis C, HIV and trichomonas. We continued to partner with the Northeast Indiana Positive Resource Connection to offer referrals for case management for anyone found to be infected with HIV or hepatitis C.

Our staff continued our well-established partnership with the Allen County Jail, offering onsite STI testing and treatment once a week. In 2024, we provided care to 443 inmates at the jail. This partnership allows inmates to be evaluated and treated quickly, before spreading the disease to others.

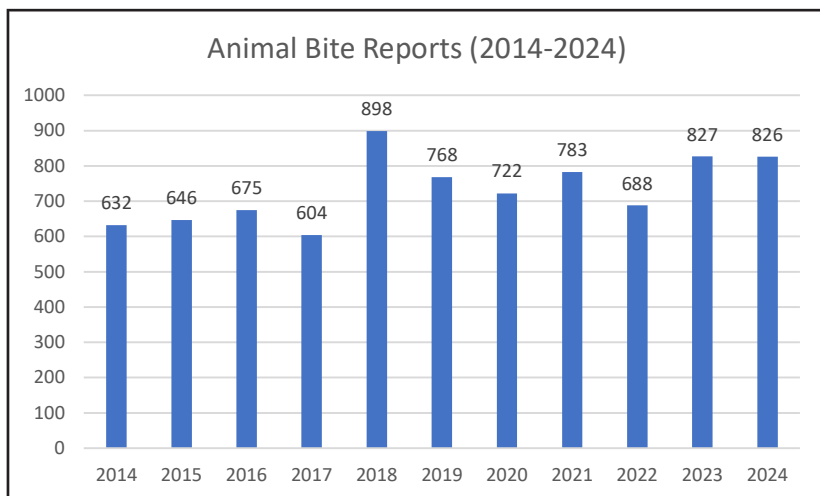
| Infectious Disease Clinic | | 2023 | 2024 |
|---|--|------|------|
| ID Physician/NP Appointments Completed | | 565 | 473 |
| ID Physician/NP No Show Appointments | | 28 | 29 |
| No Show Appointment Rate | | 5% | 6% |
| ID Nurse/MA Completed Appointments | | 217 | 319 |
| ID Nurse/MA No Show Appointments | | 12 | 46 |
| No Show Appointment Rate | | 5.5% | 13% |
| ID Phlebotomy Draws | | 73 | 81 |
| Directly Observed Prophylactic Therapy Appointments in Clinic | | 139 | 87 |
| Tuberculosis Skin Tests in Clinic | | 77 | 3 |
| Civil Surgeon Appointments | | 0 | 291 |

| Sexually Transmitted Infection (STI) Clinic | | 2023 | 2024 |
|---|--|-------|-------|
| STI Appointments Completed | | 3,290 | 3,413 |
| No Show Appointments | | 884 | 722 |
| No Show Appointment Rate | | 25.7% | 17.0% |
| STI Appointment at Allen County Jail (ACJ) | | 468 | 443 |
| Immunizations Administered | | 375 | 361 |
| COVID-19 Vaccines Administered | | 62 | 18 |
| Genital Wart Treatments | | 30 | 42 |

Demographics for All Clinics (ID/STD/IMM)

| Client Age Range | 2023 | 2024 |
|----------------------|-------|------|
| <15 years | 13% | 12% |
| 15-19 years | 8% | 8% |
| 20-24 years | 14% | 13% |
| 25-29 years | 13.6% | 15% |
| 30-34 years | 13% | 14% |
| 35-44 years | 17% | 18% |
| > 45 years | 21.4% | 20% |
| Client Sex | 2023 | 2024 |
| Male | 52% | 51% |
| Female | 48% | 49% |
| Unknown/Not Reported | 0% | 0% |

Animal bites are reportable to the Department of Health. We monitor and track them, as well as advise on any needed prophylaxis.



Immunization Clinic –

This clinic saw a significant increase in patients due to the addition of the Civil Surgeon Exam process. Before a patient can be seen for the exam, a comprehensive list of laboratory tests and vaccinations must be completed. All these activities are done in the Immunization Clinic. Largely due to this increase in patients, staff in this clinic provided 1,000 more vaccinations than they did in 2023.

Aside from assisting with the refugee screening process, Civil Surgeon Exam pre-appointment work, and routine clinic immunizations, staff continued community outreach efforts at the Fort Wayne Rescue Mission, Charis House and St. Joseph Missions Women's Shelter. Staff vaccinated 80 people through community outreach in 2024.

Syringe Services Program –

The Allen County Syringe Services Program maintained its weekly operational schedule from 1 to 3:30 p.m. on Tuesdays. We continued to partner with several local treatment facilities and mental health providers, as well as the Northeast Indiana Positive Resource Connection and the Fort Wayne Police Department Hope and Recovery Team (HART). These onsite partnerships allow us to provide a warm handoff with any interested participant at the time of their visit. In 2024, we provided services to 146 new participants and saw more than 1,000 visits. Our team collected over 90,000 used syringes to ensure their safe disposal. We also distributed more than 1,200 doses of Narcan. We continued to offer free hepatitis C and HIV testing, as well as STI testing and immunizations to those in need.

Public Health School Liaison:

This is an exciting new position in 2024! This position was created to help build relationships with schools and improve health outcomes for students and school staff. In its first year, so many new and exciting programs were developed.

The Public Health Student Heroes program was created at the start of the school year to select a group of students to create public health messaging and materials related to high priority topics, all created by students, for students. Topics they covered in the first few months included vaping, fentanyl awareness and dental health. These finalized messages were posted on the department website and are being utilized by schools through daily announcements, poster campaigns and restroom readers.

The School Liaison also attended several trainings to become certified to offer programs to schools, free of charge. Some of these trainings include Catch My Breath (vaping), Safe Sitter, CPR/AED/First Aid and Stop the Bleed. The response from schools has been extremely positive, and we are excited about the growth of this program in such a short time.

In addition to the certified trainings, the School Liaison developed several classes offered to schools covering the following topics: personal hygiene, handwashing, healthy choices, dental health, nutrition, food safety and infant safety.

As we look toward 2025, our goals are to increase community outreach in all areas, enroll more schools in the free programs being offered and continue to be a reputable source of information for our community to promote better health behaviors.

| Immunization Services | 2023 | 2024 |
|--|-------------|-------------|
| Immunization Appointments | 2,982 | 3,208 |
| Immunization No Shows | 296 | 300 |
| Immunization No Show Rate | 10% | 9% |
| Foreign Travel Appointments | 24 | 68 |
| Civil Surgeon Appointments (Vaccines/Testing) | 0 | 487 |
| Anti-Malarial Appointments | 0 | 0 |
| Child Appointments | 619 | 510 |
| Child Immunizations Administered (Not including Covid) | 1,921 | 1,685 |
| Adult Appointments | 859 | 961 |
| Adult Immunizations Administered (Not including Covid) | 1,802 | 3,255 |
| Outreach Immunization Appointments | 311 | 300 |
| Outreach Immunizations Administered | 381 | 381 |
| Total Refugees/Asylees/Parolees Screened | 363 | 289 |
| Primary Refugees Screened | 312 | 213 |
| Secondary Refugees Screened | 5 | 38 |
| Asylees Screened | 0 | 0 |
| Parolees Screened | 46 | 14 |
| "Other" Screened | 0 | 24 |
| COVID-19 Vaccines Administered | 444 | 598 |

| School Liaison Programming | | |
|--|---------------------|----------------------|
| Name of Class | # of Classes | # of Students |
| Vape Education | 12 | 529 |
| Personal Hygiene | 2 | 126 |
| Handwashing | 7 | 185 |
| Healthy Choices | 1 | 48 |
| Dental Health | 21 | 570 |
| Food Safety | 1 | 5 |
| American Heart Association CPR/AED/First Aid | | |
| <i>Certification (School Staff)</i> | 6 | 27 |
| <i>Non-Certification (Students)</i> | 7 | 202 |
| Stop the Bleed | | |
| <i>Certification (School Staff)</i> | 5 | 24 |
| <i>Non-Certification (Students)</i> | 15 | 541 |

| Infectious Diseases Reported | 2023 | 2024 |
|--|-------|-------|
| COVID-19 | 9,809 | 7,051 |
| <i>Confirmed</i> | 3,625 | 3,126 |
| <i>Probable</i> | 6,184 | 3,925 |
| Animal Bites | 827 | 826 |
| CP-CRE/CPO | 30 | 35 |
| Campylobacteriosis | 59 | 76 |
| <i>Confirmed</i> | 43 | 45 |
| <i>Probable</i> | 15 | 31 |
| <i>Unknown</i> | 1 | 0 |
| Candida auris, clinical | <5 | <5 |
| Coccidioidomycosis | <5 | 8 |
| <i>Confirmed</i> | N/A | 3 |
| <i>Probable</i> | N/A | 4 |
| <i>Suspect</i> | N/A | 1 |
| Cryptosporidiosis | 8 | 12 |
| <i>Confirmed</i> | 7 | 8 |
| <i>Probable</i> | 1 | 4 |
| Cyclosporiasis | <5 | 0 |
| Dengue | 0 | <5 |
| Ehrlichiosis | <5 | 0 |
| Giardiasis | 17 | 27 |
| <i>Confirmed</i> | 17 | 25 |
| <i>Probable</i> | 0 | 2 |
| Haemophilus influenzae, invasive | 7 | 11 |
| Hemolytic uremic syndrome, postdiarrheal | 0 | <5 |
| Hepatitis A | 0 | <5 |
| Hepatitis B (acute and chronic) | 66 | 58 |
| <i>Confirmed</i> | 43 | 46 |
| <i>Probable</i> | 20 | 12 |
| <i>Unknown</i> | 3 | 0 |
| Hepatitis C (acute and chronic) | 271 | 186 |
| <i>Confirmed</i> | 136 | 82 |
| <i>Probable</i> | 79 | 39 |
| <i>Unknown</i> | 56 | 65 |
| <i>Suspect</i> | 0 | 0 |
| Hepatitis D | <5 | 0 |

| Infectious Diseases Reported (Continued) | 2023 | 2024 |
|--|------|------|
| Histoplasmosis | 14 | 22 |
| <i>Confirmed</i> | 3 | 6 |
| <i>Probable</i> | 11 | 15 |
| <i>Unknown</i> | 0 | 1 |
| Influenza-Associated Deaths | 9 | 15 |
| Latent Tuberculosis Infection | 107 | 128 |
| <i>Confirmed</i> | 64 | 67 |
| <i>Suspect</i> | 43 | 1 |
| <i>Unknown</i> | 0 | 60 |
| Legionellosis | 16 | 36 |
| Listeriosis | <5 | <5 |
| Lyme Disease | 10 | 5 |
| <i>Confirmed</i> | 5 | 2 |
| <i>Probable</i> | 4 | 2 |
| <i>Suspect</i> | 1 | 1 |
| Malaria | <5 | <5 |
| Mpox | 0 | 0 |
| Multisystem Inflammatory Syndrome (MIS) | 0 | 0 |
| Mumps | <5 | <5 |
| <i>Probable</i> | 5 | 0 |
| <i>Suspect</i> | 0 | <5 |
| Neisseria meningitidis, invasive | <5 | 0 |
| Pandrug-Resistant Organisms | 0 | <5 |
| Pertussis | <5 | 12 |
| <i>Confirmed</i> | 0 | 6 |
| <i>Probable</i> | <5 | 5 |
| <i>Unknown</i> | 0 | 1 |
| Salmonellosis, excluding S. typhi and S. paratyphi | 56 | 52 |
| <i>Confirmed</i> | 47 | 45 |
| <i>Probable</i> | 4 | 7 |
| <i>Suspect</i> | 1 | 0 |
| <i>Unknown</i> | 4 | 0 |

| Infectious Diseases Reported (Continued) | 2023 | 2024 |
|---|------|------|
| Severe Staph in a Previously Healthy Person | <5 | 0 |
| Shiga toxin-producing Escherichia coli (STEC) | 13 | 20 |
| Confirmed | 8 | 6 |
| Probable | 5 | 14 |
| Suspect | 0 | 0 |
| Shigellosis | 7 | 12 |
| Confirmed | 2 | 8 |
| Probable | 5 | 4 |
| Strep pneumoniae, invasive | 32 | 59 |
| Confirmed | 29 | 58 |
| Probable | 3 | 1 |
| Streptococcal disease, invasive, Group A | 44 | 30 |
| Streptococcal toxic-shock syndrome | 5 | <5 |
| Tuberculosis | 10 | 11 |
| Tularemia | 0 | <5 |
| Varicella | 16 | 10 |
| Confirmed | 8 | 6 |
| Probable | 8 | 4 |
| Unknown | 0 | 0 |
| Vibriosis | <5 | <5 |
| West Nile Virus (neuroinvasive) | 0 | 0 |
| Yersiniosis | 7 | 7 |
| Confirmed | 2 | 4 |
| Probable | 5 | 3 |

Food & Consumer Protection Division –

Director: Steve Schumm, REHS, CP-FS

The common goal of operators and regulators of retail food establishments is to produce safe, quality food for consumers. The Food & Consumer Protection Division's efforts to meet these goals are achieved through ongoing education and provision of helpful resources and through permitting and inspecting retail food establishments on a routine basis to ensure compliance with all food safety-related rules. Retail food establishments include restaurants, grocery and convenience stores, institutions, cafeterias, bars, mobile food establishments, temporary food vendors, farmers markets and entertainment venues.

There was an increase in the issuance of food establishment permits in most permit types in 2024. The most significant decrease in permitting was in the number of temporary food establishments, where we saw 27 fewer permits obtained than in the prior year. Of note, the 2024 Grabill Country Fair was

| Food Permits Issued | 2023 | 2024 |
|-----------------------------------|-------|-------|
| Food Service Establishments | 1,259 | 1,309 |
| Food Market Establishments | 569 | 568 |
| Mobile Food Units | 127 | 155 |
| Temporary Food Establishments | 565 | 538 |
| Annual Off-Site & Farmers Markets | 95 | 104 |
| Food Venue Establishments | 2 | 2 |
| Vending Machine | 8 | 7 |

canceled due to road construction, which is likely the reason for this change. The most significant increase in permitting was noted in the annual food service establishment category, where 50 additional establishments were permitted than in the prior year. There were also 28 more mobile food permits issued than in the previous year.

The division saw less staff transiency and added a new environmental health specialist position this year, allowing for increased educational inspections in all permit types. The biggest increase in inspections in 2024 was in the number of retail food service inspections that were completed, as there were 418 more inspections than in 2023. Recall inspections was the category of most significant decrease, as the team completed all recalls by email and no recall effectiveness checks were required in the field. Of note, two newer inspectors completed their online classroom training of the U.S. Food & Drug Administration's (FDA) "ORA-U" courses and required field training in 2024.

The division continued to focus on education and training for all inspection staff in 2024. Everyone on the team completed the Indiana Department of Health Food Code Trainings in Indianapolis and Elkhart on April 10 and May 21. These trainings focused on all the new changes in the upcoming rule revision, predicted to take effect in 2025. Three environmental health specialists attended a Plumbing and Backflow Training in Franklin on April 17, and two more attended the Indiana Department of Health Food Summit on November 8. One inspector completed the FD 215 training, which is a five-day virtual course focused on ways risk-based inspection can be applied in retail food establishments. Two more inspectors then completed FD 218, which is a five-day virtual course that enhances the knowledge, skills and abilities of inspectors conducting risk-based inspections. The division director and an environmental health specialist also completed FD 312, which explores types of food processing at the retail level that require a variance and Hazard Analysis Critical Control Point (HACCP) plan. We also had an environmental health specialist participate in several standardization meetings, a practice inspection and an official standardization inspection prior to the end of 2024 under the guidance of the Indiana Department of Health. Standardization training works toward consistency in rule application and inspectional techniques, which is critical when conducting enforcement activities as it promotes

accuracy and fairness. We plan to continuously improve the knowledge of our staff to continue to adapt to new processes in food safety to ensure that retail foods are safe, unadulterated and honestly presented to the community.

The division also provided training on food safety education to our industry partners in 2024. Community Harvest Food Bank hosted an agency day on November 1. One of our team members gave a presentation on the most common violations we observe in food pantry and community meal settings. Topics included education on proper food repackaging and labeling requirements, ensuring safe food sources, hand washing, pest prevention, employee health and food handling as well as safe storage practices. There was a robust question and answer session that followed the presentation enforcing the importance of community education and collaboration in the food safety industry.

In 2024, the division continued to develop helpful resources and standard operating procedures for use when compliance and enforcement steps must be utilized to protect public health. The goal is to have active managerial control in place at facilities so that managers are proactive in recognizing foodborne illness risk factors and implementing corrective action on their own when it is needed. The division had an increase in overall inspections with non-compliance issues, which then led to the need for 100 more follow-up inspections to ensure remediation occurred, 11 more unfortunate facility closures for extreme public health hazards and 42 more complaint investigations received from the community in 2024 than the prior year.

The Food & Consumer Protection Division prevents the spread of infectious diseases by regulating body artists and piercers who engage in tattooing, body piercing and cosmetic tattooing in Allen County body art establishments.

The Food & Consumer Protection Division ensures the state tattoo and body artist standards are met through ongoing education, and through permitting and inspecting of all body art facilities and events.

The number of tattoo and body

piercing facility permits decreased by five permits, but we saw 122 more tattoo and body piercing artist permits issued in 2024. There was also a decrease in the number of temporary tattoo facility permits and inspections due to an ordinance change that removed this type of permit as a requirement for operators. Guest tattoo artist permits issued this year also slightly increased. There were slightly fewer tattoo and body art complaints from the community as well.



| Tattoo & Body Piercing Permits Issued | 2023 | 2024 |
|---------------------------------------|------|------|
| Tattoo & Body Piercing Facility | 93 | 88 |
| Tattoo & Body Piercing Artist | 233 | 289 |
| Temporary Tattoo Facility | 117 | 0 |
| Guest Tattoo Artist | 173 | 175 |
| Special Event Coordinator | 1 | 2 |

| Tattoo & Body Piercing Inspections Conducted | 2023 | 2024 |
|---|------|------|
| Inspections (Routine, Follow-up, and Temporary) | 376 | 129 |
| Complaints | 11 | 9 |
| Preliminary/Opening | 45 | 43 |

There were a couple of highlights in 2024 for the body art program. The division director gave a presentation of the department's body art inspection program at the 2024 3rd quarter Indiana Department of Health regional in-person learning workshop at the Whitley County Department of Health on September 4. A few of our environmental health specialists also participated in the Indiana Department of Health Tattoo, Piercing and Eyelash Summit on October 13 in Indianapolis. The agenda included sessions on the proper procedures for eyelash extension applications and microblading, tattoo inspections "101," piercing and sanitation practices, and facility sanitation and hygiene. The division will continue to look for education opportunities in body art topics in the upcoming year.

The division has an ongoing goal each year of focusing on education related to one of the five major risk factors contributing to foodborne illness. The focus for 2025 will be ensuring that hand washing facilities are only utilized for that purpose to ensure these sinks are always available for use when needed to protect public health. All too often, we see these important sinks used to store dirty dishes or covered to use as a preparation service. This leads to handwashing avoidance or just wiping hands off on clothing or other inappropriate methods, which significantly increases the potential of spreading foodborne illness to the community. This was the most observed critical violation by the Food & Consumer Protection Division in 2024. Poor personal hygiene is a risk factor identified by the U.S. Centers for Disease Control and Prevention (CDC) as a contributor to foodborne illness outbreaks.

Overall, the goal of the division is to reduce the number of critical violations made by food handlers that are known to lead to foodborne illness. In addition to the inspectional process, the division will continue to provide multiple educational materials and opportunities to food establishment and tattoo/body art facility operators as needed, such as FDA posters addressing personal hygiene.

| Food Inspections Conducted | 2023 | 2024 |
|---|-------------|-------------|
| Food Service (Fixed and Mobile) | 1,711 | 2,129 |
| Food Market (Fixed and Mobile) | 704 | 742 |
| Temporary Food Establishments | 792 | 819 |
| Follow-up Inspections | 721 | 821 |
| Recalls Phone/Email | 56 | 55 |
| Recall Inspections | 21 | 0 |
| Consumer Complaints | 622 | 664 |
| Preliminary Inspections | 250 | 285 |
| Opening Inspections | 166 | 275 |
| Plan Reviews Conducted | 276 | 346 |
| Closures | 6 | 17 |
| Administrative Hearings | 0 | 0 |
| Food Establishment Trainings | 0 | 2 |
| Investigations (fire, overturned trucks, foodborne illness investigations, reportable disease investigations) | 443 | 505 |
| Railroad Camp Car Inspections | 0 | 0 |

Environmental Services Division –

Director: Josh Blauvelt, BS

Pollution Control Program:

The Pollution Control Program continued reviewing plans for and inspecting onsite sewage systems and public and semi-public swimming pools to protect the health of the public and ensure adherence to state and local rules, as well as following up on any complaints received. The Allen County Department of Health also continued its work with the Allen County Onsite Wastewater Management District by providing valuable maintenance inspections and guidance for various onsite sewage systems throughout the county.

These maintenance inspections assist property owners with simple steps they can take to prolong the life of the system and protect their investment. An amended state statute that took effect in March of 2024 significantly reduced the number of systems covered by these inspections, but the inspections continued diligently on the ones that remained in the program. The majority of systems that remained in the program are permitted discharge systems – systems that discharge treated water off their site and are covered under a general National Pollutant Discharge Elimination System (NPDES) permit issued by the Indiana Department of Environmental Management (IDEM), which has requirements for ensuring that water meet certain safety limits for discharge.

A great deal of effort throughout the year went into the preparation process for the future review of a new onsite sewage system ordinance by the state Technical Review Panel (TRP). We look forward to and are hopeful about readoption of our ordinance in 2025.

The Pollution Control Program continued to be diligent in promoting the safe operation of public and semi-public pools, as the program conducted 378 routine pool inspections and performed 1,480 test strip inspections, checking pools for

| Swimming Pools & Spas | 2023 | 2024 |
|---|-------|-------|
| Annual Pool/Spa Permits Issued | 53 | 54 |
| Seasonal Pool/Spa Permits Issued | 171 | 178 |
| Pool/Spa – Water Chemistry Tests Conducted | 1,388 | 1,495 |
| Pool/Spa – Inspections | 276 | 280 |
| Pool/Spa – Follow-up Inspections | 115 | 95 |
| Pool/Spa - Complaints Received* | N/A | 10 |
| Pool/Spa – Citizen Complaint Inspections Conducted | 5 | 18 |
| Water Bacteriological Sample Reports Received from Permitted Facilities | 5,406 | 5,377 |

*New category for 2024

pH balance and proper disinfection. In addition to inspections performed by staff, pool operators are responsible for ensuring their facilities pass weekly bacteriological water samples and submitting those samples to the Department of Health. Staff then works to identify all failing water samples to notify pool operators of unsatisfactory water samples, in accordance with state law. If a public or semi-public pool fails consecutive bacteriological water samples or has three failing bacteriological water samples in a six-week span, then that pool is required to close in accordance with 410 IAC 6-2.1 until a satisfactory sample can be provided to the department.

The Pollution Control Program continues its work each day to reduce public health hazards from sewage and continues to promote the safe operation of public swimming pools to improve public health for local residents and visitors to Allen County.

| Onsite Sewage Systems (OSS) | | 2023 | 2024 |
|--|-------------------------------------|------|------|
| Pre-Construction Activities Conducted | | | |
| Site Soil Assessments Conducted by Third Party Soil Scientists | | 180 | 97 |
| Soil Wetness Tests (Initial test) | | 48 | 56 |
| Soil Wetness Tests (Retest) | | 8 | 22 |
| OSS Plan Reviews Conducted | | 261 | 168 |
| Permanent Holding Tank | | | |
| Permanent Holding Tanks Permitted or Registered for Use | | 4 | 10 |
| Permanent Holding Tank Inspections Conducted* | | N/A | 18 |
| OSS Permitting Activities & Information | | | |
| OSS Construction Permits Issued | | 110 | 138 |
| Types of OSS Construction Permits Issued: | | | |
| | <i>Alteration</i> | 21 | 29 |
| | <i>Commercial</i> | 2 | 8 |
| | <i>New</i> | 46 | 56 |
| | <i>Repair</i> | 21 | 18 |
| | <i>Replacement</i> | 20 | 27 |
| OSS Inspection Activities | | | |
| New OSS Installation Initial Inspections | | 207 | 122 |
| New OSS Installation Follow-up Inspections | | 332 | 514 |
| Types of OSS Installed: | | | |
| | <i>Elevated Sand Mound</i> | 17 | 14 |
| | <i>Enviro-Septic/Presby/Gravity</i> | 7 | 12 |
| | <i>Enviro-Septic/Presby/Pump</i> | 23 | 16 |
| | <i>Infiltrator ATL/Gravity</i> | 5 | 6 |
| | <i>Infiltrator ATL/Pump</i> | 10 | 23 |
| | <i>Permitted Discharge</i> | 11 | 6 |
| | <i>Trench/Flood Dose</i> | 6 | 17 |
| | <i>Trench/Gravity</i> | 12 | 18 |
| | <i>Pressure Trench</i> | 1 | 0 |

*New category for 2024

| Onsite Sewage Systems (Continued) | 2023 | 2024 |
|--|-------------|-------------|
| Allen County Onsite Wastewater Management District (ACOWMD) | | |
| ACOWMD Operation Permits Issued (New): | 96 | 31 |
| ACOWMD Operation Permits Renewed | 701 | 223 |
| ACOWMD Inspection Activities | | |
| ACOWMD Inspections (Annual or as Required) | 923 | 304 |
| ACOWMD Follow-up Inspections | 123 | 17 |
| ACOWMD Inspections Assists (represents activities of 2nd inspector on-site) | 790 | 216 |
| Additional Inspection, Complaint & Enforcement Activities Conducted | | |
| Inspections of Existing Septic Systems | 51 | 16 |
| Inspections Assists (represents activities of 2nd inspector on-site) | 26 | 15 |
| Sewage Complaint Inspections | 92 | 36 |
| Sewage Complaint Follow-up Inspections | 151 | 154 |
| Dye Tests Conducted (to trace source of sewage) | 16 | 14 |
| Laboratory samples Collected and Tested In-house | 59 | 100 |
| Orders to Correct Failing Systems Issued | 10 | 14 |
| OSS Abandonment Permits Issued | 93 | 94 |
| OSS Abandonment Permit Inspections | 119 | 85 |
| OSS Abandonment Permit Follow-up Inspections | 19 | 27 |
| Improvement Location Permit Reviews | 2,066 | 1,914 |
| Improvement Location Permit Reviews (Hours) | 318 | 419 |

Vector Control Program:

The Vector Control Program remained focused on the prevention of vector-borne diseases through an Integrated Pest Management (IPM) approach. Key components of effective IPM are the practice of sanitation, exclusion, trapping and applying low-toxicity, low-risk pesticides to control vectors. Our program relies on the Allen County Public Health Hazards Ordinance to help reduce the environmental conditions in our community that allow for the spread of pests capable of transmitting disease.

In 2024, the program made efforts to educate the public on IPM, services offered by the division, and measures that can be taken by the public to mitigate pests capable of transmitting disease. Presentations were provided to various groups in Allen County, including a high school environmental health class, school nurses, various in-home therapy groups and the Northeast Chapter of the Indiana Environmental Health Association. Providing this valuable education to the public allows citizens to be more aware of their environment and address environmental concerns proactively. The program will look to expand education efforts in 2025 to reach more people while continuing to address environmental health hazard complaints and concerns from the public.

In addition to our efforts to educate, 2024 was a busy year for mosquito and rat control. Staff responded to 272 rat complaints and performed a total of more than 1,000 rodent inspections, baiting for rats in tamper-proof containers and educating the public on preventive and exclusionary measures to help reduce the potential for future infestation. Not only was it a busy season for rats, but the mosquito season was very active as we experienced heavy rainfall in early spring and had other rain events that helped the nuisance mosquito population grow early in the mosquito season. With the help of two seasonal mosquito technicians, staff worked routinely to inspect and treat nearly 300 identified permanent breeding sites throughout the county. One of the most common questions heard by our program is, “What do you use to treat for mosquitoes and how do you do it?” Well, the answer is quite simple. We treat mosquitoes using two environmentally friendly larvicide products called Natular and CocoBear. Larvicides are used to treat mosquitoes while still in their larval stage to prevent them from becoming airborne and capable of transmitting disease. Natular, a granule product, is applied by hand and the active ingredient is Spinosad, which is a naturally occurring soil bacteria that is effective in treating mosquitoes. CocoBear, is a surfactant used to suffocate mosquitoes in their larval and pupal form and is applied by a pump sprayer. These two larvicides are effective and have aided staff in mitigating mosquito breeding here in Allen County.

Another crucial part of our annual mosquito program is the trapping, identification and testing of mosquitoes starting in July and ending at the end of September. This three-month window is when mosquito disease transmission is peaking and poses the highest risk to the public. More than 212 mosquito trap samples were tested in 2024, with 27 samples testing positive for West Nile virus – a positivity rate of nearly 13%, which nearly doubles what we observed in 2022 and 2023. As always, this serves as a reminder to citizens that it is important to apply EPA-registered mosquito repellants to skin during those summer months when disease transmission is most likely and to work toward ridding properties of standing water, which allows for breeding sites for mosquitoes.

In looking toward 2025, the Vector Control Program will continue efforts to educate the public about mosquitoes and rodents while expanding education efforts into tick prevention in hopes of reducing the number of citizens exposed to tick-transmitted diseases such as Lyme Disease.

| Environmental & Housing Complaint & Enforcement Activities | | | 2023 | 2024 |
|--|--|--|------|------|
| ALL COMPLAINTS RECEIVED | | | | |
| (top section is totals overall; each section below is specific to topic) | | | | |
| Citizen & Other Complaints Received | | | 506 | 501 |
| Total Initial Complaint Inspections (Citizen Complaints, Referral Complaints, and Violations Observed) | | | 658 | 482 |
| Total Follow-Up Inspections Conducted | | | 878 | 973 |
| Code Violation Referrals from other City/County Departments for follow-up | | | 0 | 31 |
| Legal Enforcement Notifications Provided to Property Owners/Occupants | | | 160 | 136 |
| Code Violations Corrected ¹ | | | 130 | 118 |
| Percentage of Violations Corrected | | | 84% | 87% |
| Fines Issued | | | 0 | 0 |
| Ordinance Violation Hearings | | | 0 | 0 |
| INDOOR AIR | | | | |
| Indoor Air Complaint Inspections Conducted (Mold, Noxious Odor) | | | 21 | 97 |
| Indoor Air Complaint Follow-Up Inspections Conducted | | | 1 | 133 |
| Legal Enforcement Notifications Provided to Property Owners/Occupants | | | 1 | 18 |
| Smoking Complaint Inspections | | | 1 | 2 |
| Smoking Complaint Follow-Up Inspections | | | 0 | 1 |
| Radon Test Kits Provided ² | | | 0 | 3 |
| Radon Test Kit Results | | | 0 | 0 |
| Total Number Radon Results \geq 4 pC/L | | | 0 | 0 |
| Percentage Radon Results \geq 4 pC/L | | | 0% | 0% |
| PUBLIC HEALTH PESTS | | | | |
| Bed Bug Inspections Conducted | | | 67 | 35 |
| Bed Bug Follow-Up Inspections Conducted | | | 67 | 66 |
| Legal Enforcement Notifications Provided to Property Owners/Occupants | | | 3 | 6 |
| Cockroach & Flea Inspections Conducted | | | 86 | 69 |
| Cockroach & Flea Follow-Up Inspections Conducted | | | 146 | 229 |
| Legal Enforcement Notifications Provided to Property Owners/Occupants | | | 20 | 17 |
| METHAMPHETAMINE LABS | | | | |
| Occurrence Reports Received | | | 0 | 0 |
| Abatement Orders Issued | | | 0 | 0 |
| Follow-Up Inspections Conducted to Ensure Structure is Not Occupied | | | 0 | 0 |
| RAILROAD CAMP CARS | | | | |
| Inspections Conducted | | | 0 | 0 |

¹Some violation cases still active

²Radon kit provision to the public was discontinued in 2021; renewed December 2024

| Environmental & Housing Complaint & Enforcement Activities (Cont.) | | | 2023 | 2024 |
|---|--|--|-------------|-------------|
| DISCARDED REFRIGERATORS/FREEZERS | | | | |
| Inspections Conducted | | | 9 | 2 |
| Follow-Up Inspections Conducted | | | 11 | 4 |
| Legal Enforcement Notifications Provided to Property Owners/Occupants | | | 5 | 2 |
| DISCARDED TIRES | | | | |
| Inspections Conducted | | | 30 | 28 |
| Follow-Up Inspections Conducted | | | 39 | 55 |
| Legal Enforcement Notifications Provided to Property Owners/Occupants | | | 14 | 15 |
| OPEN BURNING | | | | |
| Inspections Conducted* | | | N/A | 4 |
| Follow-Up Inspections Conducted* | | | N/A | 3 |
| Legal Enforcement Notifications Provided to Property Owners/Occupants* | | | N/A | 0 |
| SMALL SPILLS | | | | |
| Inspections Conducted* | | | N/A | 3 |
| Follow-Up Inspections Conducted* | | | N/A | 0 |
| Legal Enforcement Notifications Provided to Property Owners/Occupants* | | | N/A | 0 |
| TRASH & DEBRIS | | | | |
| Inspections Conducted | | | 76 | 56 |
| Follow-Up Inspections Conducted | | | 98 | 129 |
| Legal Enforcement Notifications Provided to Property Owners/Occupants | | | 24 | 31 |
| UNMAINTAINED SWIMMING POOLS | | | | |
| Inspections Conducted | | | 31 | 34 |
| Follow-Up Inspections Conducted | | | 54 | 96 |
| Legal Enforcement Notifications Provided to Property Owners/Occupants | | | 7 | 15 |
| UNSANITARY CONDITIONS | | | | |
| Inspections Conducted | | | 137 | 137 |
| Follow-Up Inspections Conducted | | | 135 | 235 |
| Legal Enforcement Notifications Provided to Property Owners/Occupants | | | 19 | 18 |
| OTHER | | | | |
| Inspections Conducted* | | | N/A | 15 |
| Follow-Up Inspections Conducted* | | | N/A | 16 |
| Legal Enforcement Notifications Provided to Property Owners/Occupants* | | | N/A | 0 |

*New category for 2024

| Lodging Establishment Activities | 2023 | 2024 |
|---|-------------|-------------|
| Active Lodging Establishments in Allen County | 69 | 69 |
| Operating Permits Issued ³ | 69 | 69 |
| Probationary Inspections/Permits Issued | 3 | 5 |
| Establishment Inspections | 66 | 68 |
| Establishment Follow-Up Inspections | 105 | 119 |
| 100% "A" Grade Issued on Initial Inspection | 24 | 25 |
| Non-100% "A" Grade Issued on Initial Inspection | 37 | 37 |
| "B" Grade Issued on Initial Inspection | 4 | 4 |
| "C" Grade Issued on Initial Inspection | 1 | 2 |
| "F" Grade Issued on Initial Inspection | 0 | 0 |
| Hearings (Potential Closure/Willful Violation) | 0 | 0 |
| Fines Collected | \$500 | \$620 |
| Complaints Received* | N/A | 88 |
| Complaint Inspections Conducted | 84 | 88 |
| Complaint Follow-Up Inspections Conducted | 185 | 194 |

³Change in owners triggers a new permit

*New category for 2024

| Mosquito Control & Prevention Activities | 2023 | 2024 |
|---|-------------|-------------|
| Citizen Complaints Received | 46 | 134 |
| Water Site Inspections (Citizen Complaint Locations, Other Observed Complaint Locations, Permanent Breeding Site Locations, and Referral Locations) | 962 | 2,104 |
| Breeding Sites Treated | 69 | 509 |
| Larval Specimens Collected | 49 | 454 |
| New Permanent Breeding Sites Added | 2 | 10 |
| Mosquito Fish Sites | 0 | 0 |
| Mosquito Samples Tested | 87 | 212 |
| West Nile Virus-Positive Samples | 5 | 37 |
| West Nile Virus Positivity Rate | 6% | 13% |
| Larvicide Used: | | |
| CocoBear (fl oz) | 60 | 221 |
| Natular (oz) | 1,055 | 1,996 |
| Natular G30 (lbs.) | 0 | 0 |
| Natular XRT, 180-day (# tablets) | 57 | 17 |

| Rodent Control Activities | | 2023 | 2024 |
|---|--|-------|-------|
| Citizen Complaints Received | | 315 | 241 |
| Citizen Complaint Inspections | | 278 | 210 |
| Bait Used to assist with eradication (pieces) | | 1,146 | 856 |
| Door Hangers Placed (to request citizens to make contact if not home at time of visit) | | 110 | 75 |
| Citizen Complaint Follow-Up Inspections | | 837 | 720 |
| Bait Used to Assist with Eradication (pieces) | | 1,626 | 1,302 |
| Door Hangers Placed (to request citizens to make contact if not home at time of visit) | | 133 | 122 |
| | | | |
| Locations of Possible Rat Activity Inspected (not received through a complaint) | | 32 | 19 |
| Bait Used to Assist with Eradication (pieces) | | 84 | 88 |
| Door Hangers Placed (to request citizens to make contact if not home at time of visit) | | 16 | 6 |
| | | | |
| Complaint/Issue Referrals from Other City/County Departments | | 1 | 3 |
| Referral Locations Inspected | | 0 | 3 |
| Bait Used to Assist with Eradication (pieces) | | 0 | 12 |
| Door Hangers placed (to request citizens to make contact if not home at time of visit) | | 1 | 0 |
| Referral Location Follow-up Inspections | | 2 | 5 |
| Bait Used to Assist with Eradication (pieces) | | 8 | 32 |
| Door Hangers Placed (to request citizens to make contact if not home at time of visit) | | 0 | 0 |
| | | | |
| Properties Identified with Rats (during any type of inspection) | | 384 | 175 |
| Properties Identified with Mice (during any type of inspection) | | 70 | 53 |

| Rabies Prevention Activities | | 2023 | 2024 |
|--|--|------|------|
| Assistance Provided to Animal Control Agencies (Instances) | | 0 | 0 |
| Animal Samples Couriered to IDOH Rabies Lab for Testing | | 8 | 8 |
| Rabies-Positive Samples | | 0 | 0 |

Healthy Homes Program:

In 2024, the Healthy Homes Program continued to provide services to Allen County children who have been tested and found to have elevated blood lead levels. Lead is a naturally occurring heavy metal that was used for many years in the manufacture of many products including gasoline and paint used for homes, schools, toys and furniture. There is no safe level of lead for the human body and exposure to low levels can cause damage over time and limit proper brain development, especially in children. Although lead-based paint was banned in 1978, the potential for exposure in homes built throughout Allen County before the ban remains.

Recent efforts by Indiana lawmakers in conjunction with local health departments and health care providers have resulted in a universal approach when testing for lead. In 2024, 6,272 children were screened for elevated blood lead levels in Allen County. Initial lead screening can be conducted through capillary testing, also known as finger-prick, and venous blood draws. The results of these tests guide next steps for children. Case management services, home visits and education are provided to families with children who have levels higher than 3.4 micrograms per deciliter. Children who have a confirmed elevated blood lead level of 5 micrograms per deciliter or higher receive the listed services above, as well as an environmental risk assessment at the property (where a lead analyzer is used to test surfaces and materials) to identify the lead hazards in the home. Allen County saw 336 children in 2024 who had an initial elevated capillary result that required a follow-up as outlined in the Indiana Department of Health's action case management guidelines to confirm lead levels. There were 71 children who had an initial, or confirmed, elevated blood lead level from a venous draw in 2024.

The Healthy Homes Program was able to provide lead education to families at an initial home visit for 43 children. Thirty-four developmental assessments were also completed for those children with identified elevated blood lead levels during home visits. Twenty-eight risk assessments were completed at properties around Allen County where a child with an elevated lead level resided in 2024. Once a risk assessment has been completed and lead hazards are identified with the use of a handheld portable X-ray fluorescent machine and dust wipes at the property, a report is generated and sent to the family and/or property owner. In 2024, the Indiana Department of Health updated the submittal website and format for generating risk assessment reports, condensing an often lengthy report into a more manageable and simplified layout. A review of the risk assessment report for the property is offered where we are able to review the hazards and ways to mitigate them with the property owner. Property owners and occupants were also directed to the Indiana Housing and Community Development Authority's Lead Hazard Reduction Program, where they have the opportunity to apply for their grant which, if accepted, might lead to having their home's lead paint hazards remediated.

In 2024, the Healthy Homes Program was able to expand outreach capabilities for the community due to the Department's purchase of a blood lead analyzer unit. In June and July, the Department of Health collaborated with Super Shot Inc. for its Summer Health Hubs wellness initiative. This special event was an opportunity for families to receive free lead screening for children younger than 7. This creative, one-stop-shop event also offered vaccinations and free sports physicals to families.

The Healthy Homes Program will continue to support the children of our community and their families who may be affected by lead poisoning. We will take the opportunity in 2025 to focus on increasing community outreach opportunities while continuing to provide services, education and resources to the public.

| Childhood Lead Screening & Testing Activities | 2023 | 2024 |
|--|-------------|-------------|
| Total Screenings** (Confirmation blood lead testing activities are listed under Clinical Services) | 6,294 | 6,272 |

| Case Management Services Provided | 2023 | 2024 |
|--|-------------|-------------|
| Number of Capillary Test Results (Initial) Requiring Follow-Up** | 419 | 336 |
| Number of Venous Blood Lead Test Results (Initial) Requiring Follow-Up** | 71 | 71 |
| Number of Children Receiving Lead Education via an Initial Home Visit | 60 | 43 |
| Number of Child Developmental Assessments Completed (Initial & Annual) | 51 | 34 |

***Data represents activities in our Clinical Services & Case Management Division, as well as activities conducted for children by other medical providers*

| Property Environmental Risk Assessments | 2023 | 2024 |
|--|-------------|-------------|
| Risk Assessments Conducted | 43 | 28 |
| Housing Age: | | |
| <i>Pre-1940</i> | 23 | 19 |
| <i>1940-1978</i> | 19 | 9 |
| <i>Post-1978</i> | 1 | 0 |
| Housing Type: | | |
| <i>Private Rental</i> | 26 | 22 |
| <i>Owner-Occupied</i> | 15 | 5 |
| <i>Land Contract/Rent to Own</i> | 2 | 1 |
| <i>Section 8</i> | 0 | 0 |
| Number of Lead Hazards Noted: | | |
| <i>0 Hazards</i> | 4 | 0 |
| <i>1 - 15 Hazards</i> | 18 | 13 |
| <i>16 - 30 Hazards</i> | 11 | 4 |
| <i>31 or more Hazards</i> | 10 | 11 |

HIV/STD Prevention Division –
Director: Kathy Thornson

Hopeful. Defined as “feeling or inspiring optimism about a future event,” it is our word to describe the closure of 2024 as we move forward into 2025 in the HIV/STI Prevention Division.

November 2024 data released from the Centers for Disease Control and Prevention (CDC) showed meaningful declines in sexually transmitted infection (STI) rates between 2022 and 2023. In addition, reading about two major public health improvements overall: (1) declining overdose deaths; and (2) a sizeable drop in STIs following years of skyrocketing cases in the U.S., brings a significant feeling of hope as we look to the future of local disease control and prevention.

Locally in 2024, we found Allen County STI data following those national trends, experiencing declining cases of syphilis, HIV, gonorrhea and chlamydia. This speaks to the importance of the division’s daily testing, treatment, prevention and education efforts.

Allen County data – preliminary, as of Jan. 7, 2025 – is shown here:

| HIV/STI Surveillance Data | | | | | | | |
|---------------------------|-----------------|-----------------|-----------------|-----------------|--------------|--------------|----------|
| Infection | Qtr. 1, # Cases | Qtr. 2, # Cases | Qtr. 3, # Cases | Qtr. 4, # Cases | 2024 (total) | 2023 (total) | % Change |
| Chlamydia | 523 | 509 | 523 | 537 | 2,092 | 2,414 | -13% |
| Gonorrhea | 138 | 123 | 144 | 135 | 540 | 780 | -30% |
| Early Syphilis | 13 | 16 | 13 | 8 | 50 | 71 | -30% |
| Late Latent Syphilis | 10 | 7 | 7 | 17 | 41 | 57 | -28% |
| HIV | 6 | 5 | <5 | <5 | 16 | 42 | -62% |

With Pre-exposure Prophylaxis (PrEP) and post exposure prophylaxis (PEP) becoming more widely utilized by providers as a preventive care plan option, we may continue to see declining STI and HIV cases. There are PrEP and PEP regimens for both HIV prevention and STI prevention. HIV PrEP is medication (one pill taken once each day) for those at risk of HIV infection to prevent contracting HIV through sexual activity and/or injection drug use. HIV PEP is a series of pills that can prevent HIV infection after exposure. In June 2024, the CDC published clinical guidelines on Doxy PEP as an STI Prevention Strategy, the first new medicinal STI prevention tool in decades. Doxy PEP (like HIV PEP) involves taking 200mg of Doxycycline 24-72 hours after a potential exposure to an STI to reduce the likelihood of infection. Research shows that one dose of Doxy PEP taken after a risky sexual encounter can greatly reduce the risk of contracting bacterial STIs. Some studies have shown that taking Doxy PEP reduces the chance of getting syphilis and chlamydia by about two-thirds, especially for transgender women (TGW) or a man who has sex with a man (MSM). This is exciting news filled with hope for prevention and intervention in the HIV/STI field coming at a time when innovation in the nation’s fight against STIs has been desperately needed.

Locally, Allen County saw a 19% overall reduction in reported STI’s in 2024. Fatal overdose (OD) deaths dropped considerably in Allen County for 2024, from 120 in 2023 to 83 (with 17 toxicology reports pending, as of this writing). Hope is in our future!

Community Outreach:

Prevention education and regularly scheduled outreach testing sites were a routine part of the 2024 services provided by the HIV/STI Division, in collaboration with community partners. Community outreach education in 2024 was provided to 1,989 individuals at the following sites:

- Allen County Community Corrections (ACCC) -
 - ACCC Residential Facility -
 - Allen County Jail -
 - Center for Behavioral Health -
- Northeast Indiana Positive Resource Connection (PRC) -
 - Allen County Syringe Services Program (SSP) -
 - Walgreens -
- Department of Health Youth Outreach Mobile Unit Sites -
 - YWCA-
- National Day of HIV Testing (NDT) -

Community Outreach Testing Sites Data:

| TYPE OF TEST | NUMBER TESTED | NOTES |
|-------------------|---------------|------------------------------------|
| HIV | 489 | 8% Positivity Rate at NDT |
| Hepatitis C / HCV | 317 | 9% Positivity Rate at SSP |
| Gonorrhea / GC | 241 | 5% Positivity Rate Overall |
| Chlamydia / CT | 242 | 38% Positivity Rate at Youth Sites |
| Syphilis / RPR | 85 | 18% Positivity Rate at PRC |
| Total | 1,374 | |



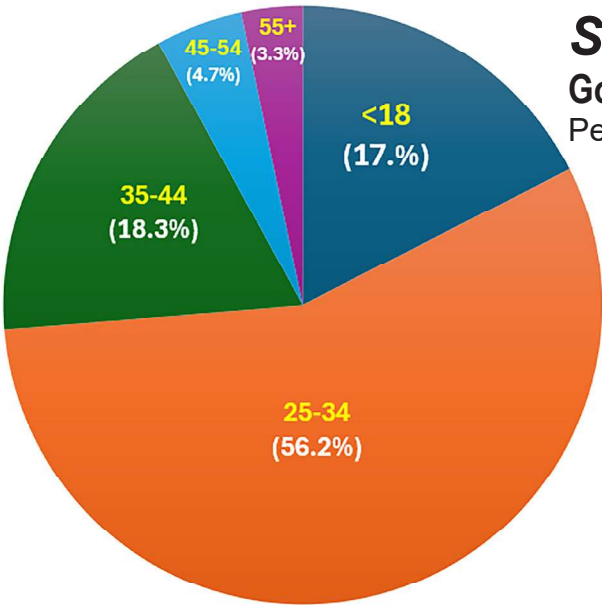
The health department mobile unit got an updated look in 2024, from which staff enjoyed providing services at various outreach events.

In addition to the regular community outreach sites listed above, the staff responded to education and testing specialty requests throughout the year. These types of outreach events in 2024 included Cinderella Dress Day, The Purdue University Fort Wayne Well-Being Summit, Indiana Tech’s Safe Spring Break event, Indiana Tech’s Walk a Mile in Her Shoes event, Recovery Rocks, and the McMillen Park Health Fair.

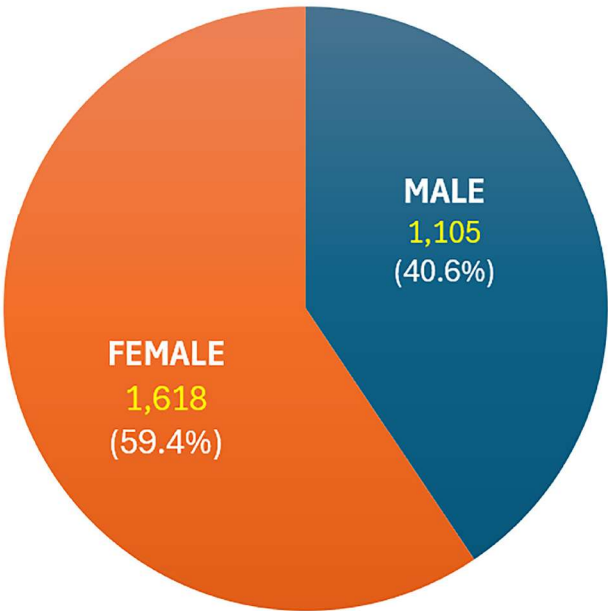
Summary:

The overall mission of the HIV/STI Prevention Division is to lessen the spread of HIV and other sexually transmitted infections through intervention and to reduce the complications of these diseases. Prevention activities in 2024 included intervening in disease spread for 2,739 individuals through contact tracing, screening, treatment and providing education in a timely manner. Intervention systems include: a.) surveillance; b.) case detection through screening; c.) treatment of known cases; d.) case investigations with follow-up; and e.) education. It is this combination of intervention systems that the HIV/STI Prevention team worked diligently throughout 2024 to deliver, and it is these very types of public health activities that bring hope in 2025 for reducing HIV/STI rates in our community.

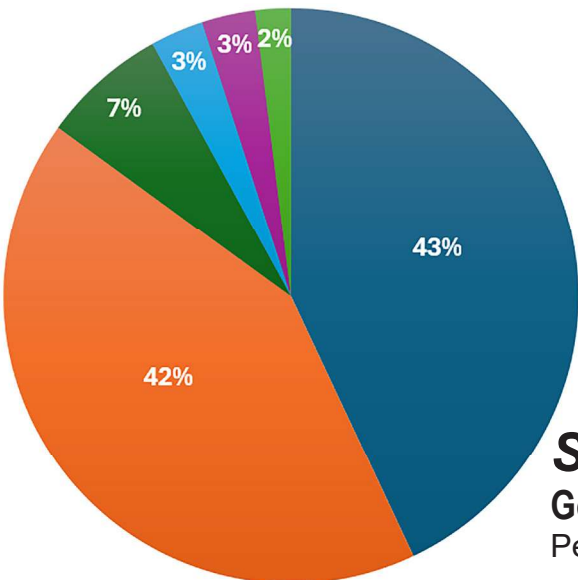
Here is a closer look at the surveillance numbers from 2024:



STI Age Group - n = 2,723
Gonorrhea, Chlamydia & All Syphilis Cases
Percentage of STI cases



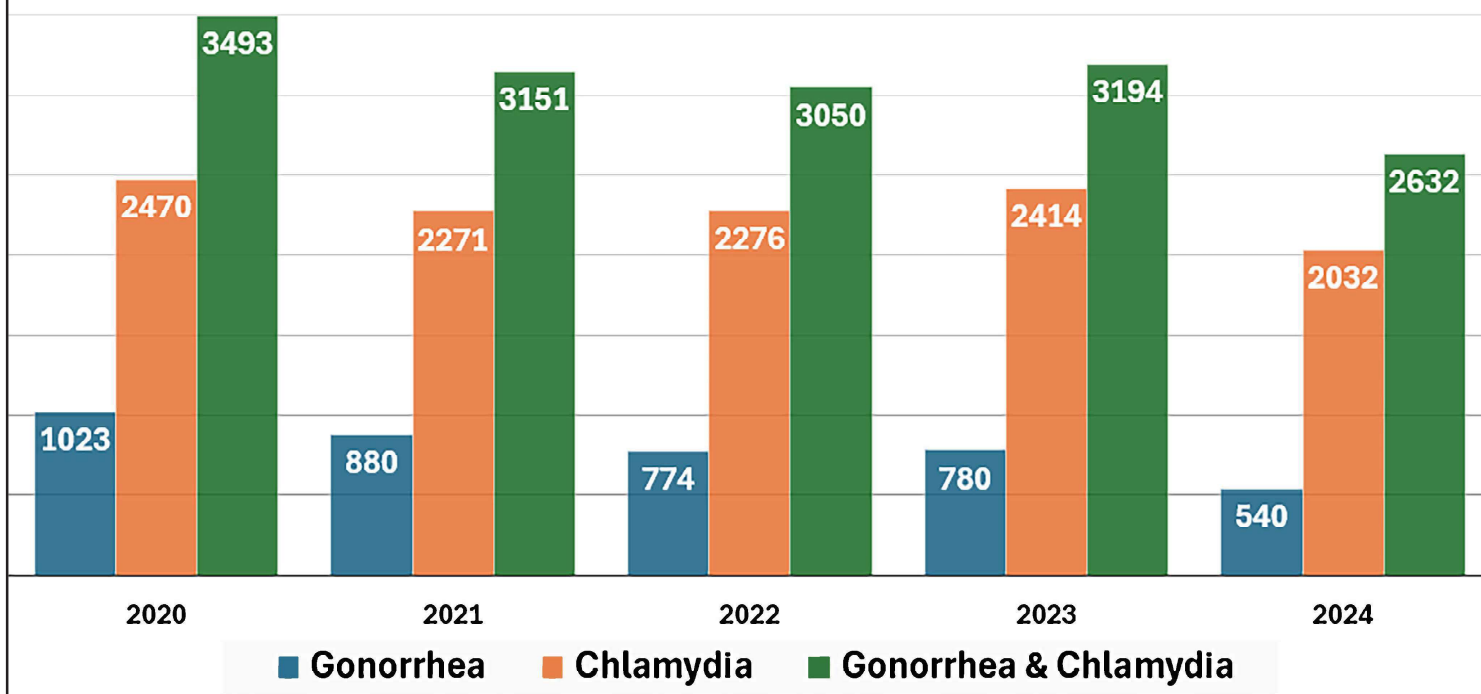
STI Gender - n = 2,723
Gonorrhea, Chlamydia & All Syphilis Cases
Number & Percentage of STI cases



STI Race Breakdown - n = 2,723
Gonorrhea, Chlamydia & All Syphilis Cases
Percentage of STI cases

■ Black ■ White ■ Multi ■ Other ■ Asian ■ Unk

Allen County Five Year Trend of Gonorrhea & Chlamydia Cases 2020-2024



| Disease Rate Per 100,000 population* | | | |
|--------------------------------------|-------------------------|------------------------|--------------------------------|
| | National Rate (2023) | Indiana Rate (2023) | Allen County Rate (2024) |
| Chlamydia | 492 | 493 | 526 |
| Gonorrhea | 180 | 145 | 136 |
| Primary & Secondary Syphilis | 17.7 | 8.8 | 7 |
| All Adult Syphilis | 62.5 | 34.1 | 22.9 |
| HIV | 11.3 | 8.9 | 4 |

*2024 Allen County estimated population: 397,446, per most recent U.S. Census data (2020)

Informatics Division –

Director: Jana Sanders, M. En.

In 2024, the Informatics Division saw many changes and experienced some much-needed staffing growth. The year started off with ongoing learning of the newly implemented Dayforce Human Resources software platform. Accela, the enterprise-wide permitting software used by numerous city and county departments, was moved from on-site hosting to being hosted in the cloud, necessitating much work prior to the migration. A similar change occurred with Genesys, the telephone system used by the city and county. Both transitions required hours of preparation and testing to ensure no functionality was lost.

Danielle Alger joined the Informatics team as the Information Systems and Special Projects Coordinator in 2024. Danielle attended the Accela Midwest User Conference, where the discussion focused on development ideas for the platform. Danielle was also pivotal in facilitating six different Excel training opportunities for staff, where they were able to learn valuable tools for daily use.

Filling the newly created Health Educator position, Kristen Merriam joined the Department of Health in February 2024. Kristen was trained in Catch My Breath vaping education, Stop the Bleed and as a CPR instructor. Kristen, along with

Communications Director Matt LeBlanc, School Liaison Mary Kohrman, and various other staff, expanded public engagement by attending local health fairs and community events to promote public health and the services offered by the Health Department. Events such as Open Streets, HogWorks Takeover, and Fright Night provided unique, non-traditional opportunities to promote and provide education about public health initiatives. At Fright Night, for example, where a zombie walk occurs, resources were provided on Stop the Bleed, which promotes life-saving techniques to utilize during situations involving life-threatening injuries. Kristen and other staff also participated monthly in Handing Out Hope, a community event focused on providing support and resources for those who are unhoused in Allen County.



From left: Danielle Alger, Jana Sanders and Kristen Merriam.

In June 2024, the Allen County Department of Health, the Allen County Drug and Alcohol Consortium (DAC), and Stop Suicide Northeast Indiana collaborated to form the Allen County Suicide Fatality Review (SFR) team. Partnering with other community organizations, this group reviews the cases of individuals who died by suicide in Allen County. As a result of the review, community recommendations are developed and deployed to prevent future deaths by suicide. Some of the recommendations made by this committee included culturally sensitive education on mental health, resiliency training for youth and improved education for medical providers for patients with mental health conditions.

When reviewing the demographics of the 64 individuals who died by suicide in Allen County in 2024, it was observed that white, non-Hispanic, non-veteran males with a median age of 34.5 years best described most of the individuals. Approximately two out of three individuals were under the age of 45 years. Three age groups saw an increase in the number of suicide deaths from 2023 to 2024; under 15 years of age, those between 15 years and 24 years and those 55-64 years of age. When looking at how individuals died by suicide, 73% of males died by gunshot wound while half of women died by asphyxia. Although a small number of individuals, the percentage of Hispanic individuals who died by suicide doubled in 2024 as compared to those who died in 2023. That fact, coupled with the fact that 75% of the Hispanic individuals who died by suicide in 2024 were under the age of 18, suggests opportunities for culturally sensitive education to help destigmatize mental health and promote seeking help in the Hispanic culture.

The division continued activities supporting the Health First Allen County (HFAC) grant program. Significant changes were made this year to the grant portal used for this program. The Informatics Division also collaborated with Parkview Mirro Center for Research and Innovation, providing them with our quarterly grant activity data for analysis and reporting. Specifically, they created one page information sheets about every grant-funded project in 2024 and aggregate reports for each of the Core Public Health Service areas with funded grant projects designed to show how the HFAC grant funds are helping to reach and improve the health of Allen County residents.

The Informatics Division worked closely with the Department Administrator to develop local Key Performance Indicators for the HFAC program for 2025. Areas of focus for increased services and education will include child and adult immunizations, childhood lead testing, and early syphilis testing and treatment during pregnancy.



Lyons



Boha

In the summer of 2024, the Informatics Division hosted two interns: William "Will" Lyons, a rising junior from Wabash College and the Summer Education Research Fellowship (SERF) hosted was Lucas "Luke" Boha, a second-year medical student from Indiana University School of Medicine.

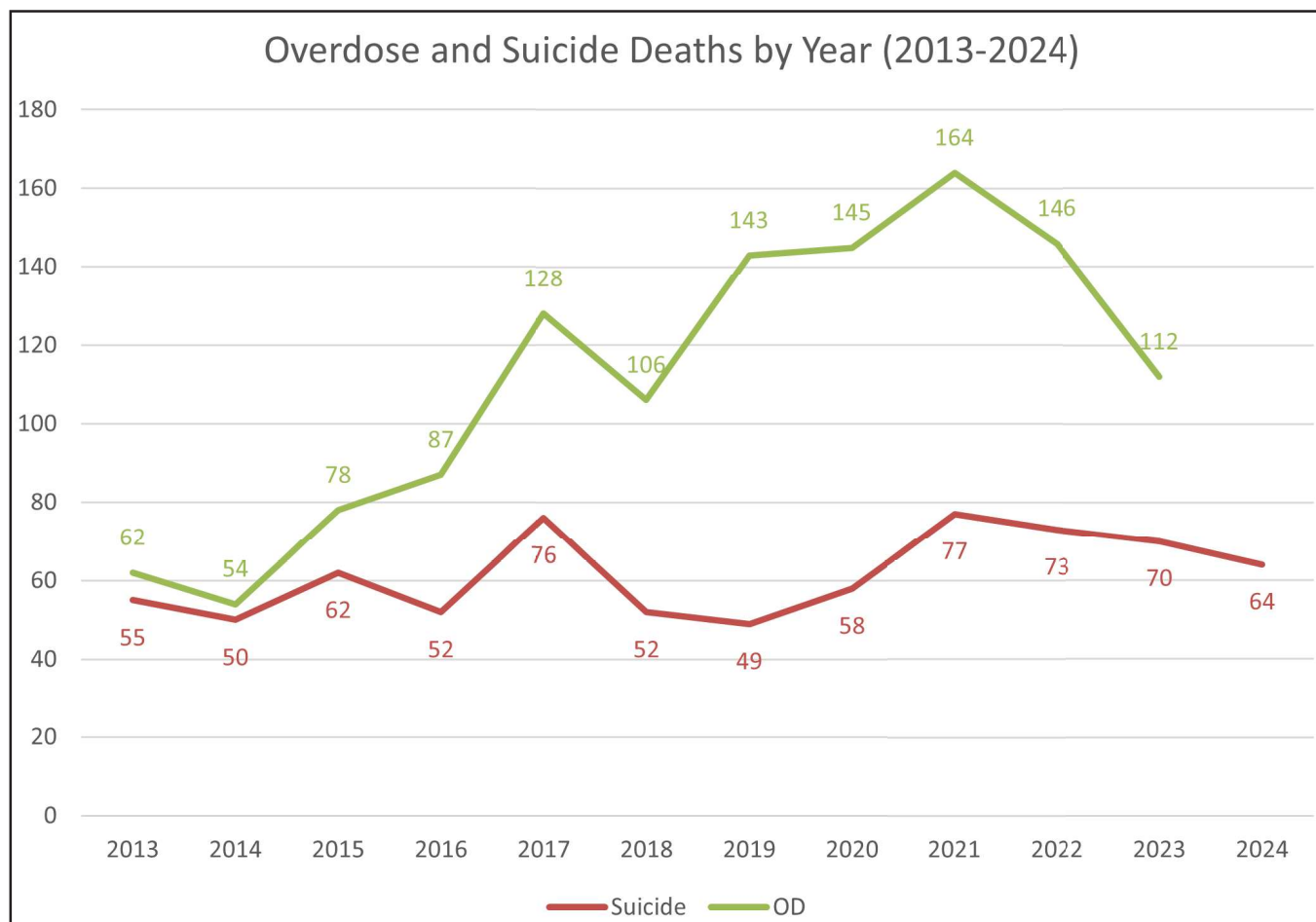
Will analyzed 2023 deaths that resulted from an overdose. He found that in 2023, although 77% of people who died as a result of an overdose had an occupation listed on their death certificate, 65% had an education at or below high school diploma or GED.

Another trend observed was that Black/African Americans accounted for 20% of those deaths. This is a disproportionate representation of Black/African American individuals, as Black/African Americans account for 12% of Allen County's population per census data.

Luke looked at overdose deaths from 2008-2023 and summarized his data as follows:

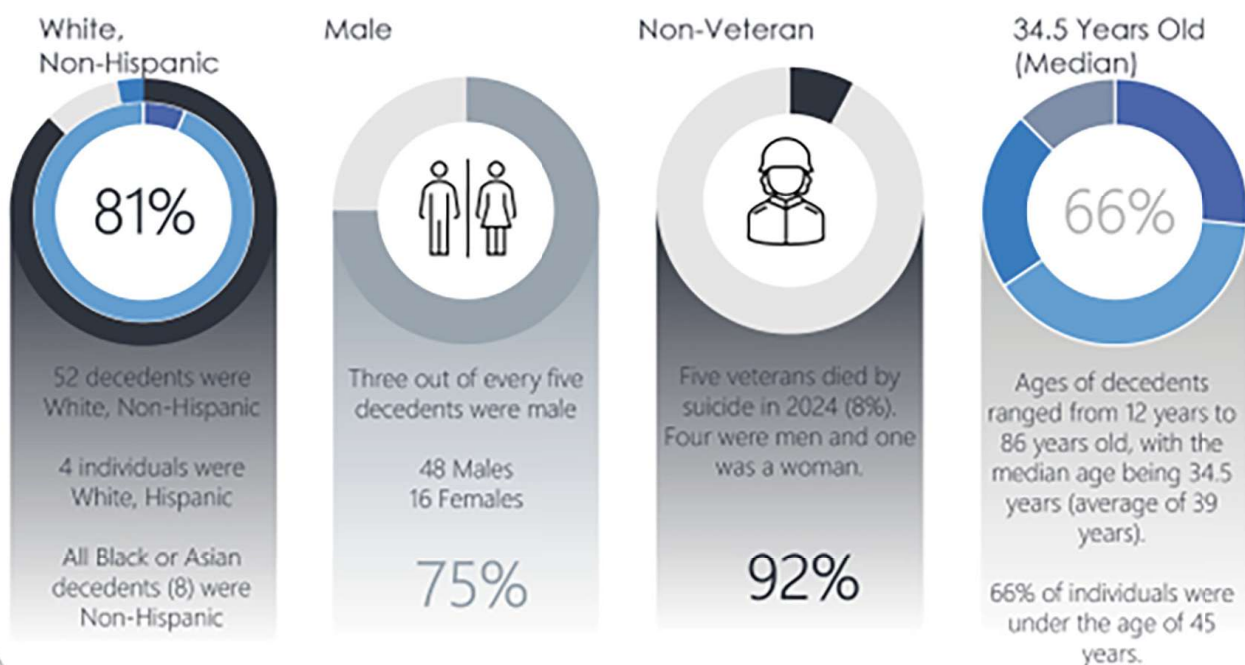
“In total, 1,435 drug overdose deaths were identified (1,298 accidental, 110 intentional, 27 undetermined) with a median age of death of 39. Males comprised 66.4% of deaths. Multiple substances were found in nearly 67% of decedents. Race and ethnicity data reflected anticipated results for Allen County based on census data. Deaths in the study period tended to be accidental (83.6%) and most decedents had a high school education or less (71.1%) and were employed at the time of their death (75.7%). Naloxone was found in twice as many toxicology reports after policy changes occurred in 2015. There was a significant relationship between the age and manner of death in males and females with ages 64+ being more likely to die from an intentional overdose than those under 64.”

The outcomes of these intern-led research projects are intended to and will help lead future discussions on how to better focus resources and education in Allen County relative to Substance Use Disorder (SUD).

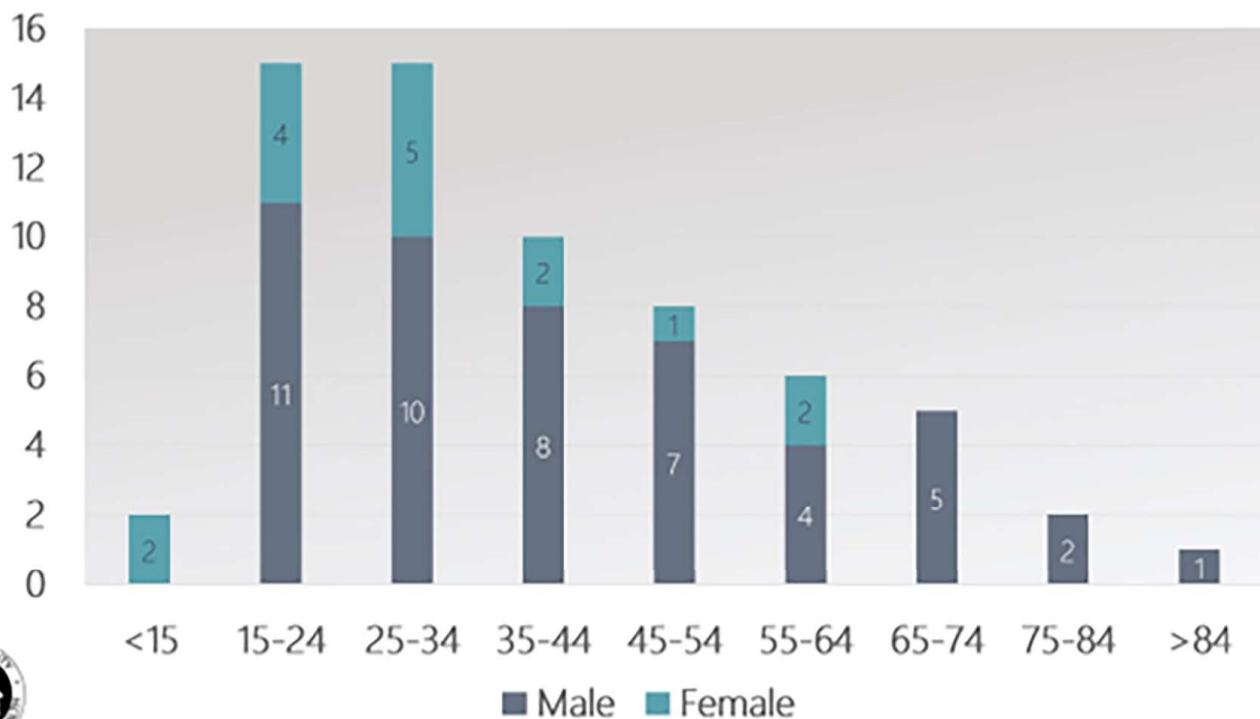


While continuing to develop the department's technology and equipment needs in 2024, the Informatics Division also looks forward to the exciting work ahead supporting the department's mission of promoting the health, safety and well-being of all residents in 2025.

64 Suicide Deaths in 2024



2024 Suicide Deaths by Age in Allen County, Indiana



| Suicide Deaths | | 2023 | 2024 |
|------------------------|--|-----------|-----------|
| Total | | 70 | 64 |
| Gender | | | |
| Male | | 53 | 48 |
| Female | | 17 | 16 |
| Race | | | |
| White | | 60 | 56 |
| Black/African American | | 7 | 6 |
| Asian | | 3 | 2 |
| Ethnicity | | | |
| Hispanic | | 2 | 4 |
| Non-Hispanic | | 62 | 60 |
| Veteran Status | | | |
| Veteran | | 6 | 5 |
| Non-Veteran | | 64 | 59 |
| Age | | | |
| Min. | | 15 | 12 |
| Max. | | 86 | 86 |
| Average | | 42.8 | 39 |
| Median | | 37.5 | 34.5 |
| Age Category | | | |
| <15 | | 0 | 2 |
| 15-24 | | 12 | 15 |
| 25-34 | | 18 | 15 |
| 35-44 | | 10 | 10 |
| 45-54 | | 12 | 8 |
| 55-64 | | 5 | 6 |
| 65-74 | | 10 | 5 |
| 75-84 | | 2 | 2 |
| >84 | | 1 | 1 |
| Month of Death | | | |
| Jan. | | 6 | 5 |
| Feb. | | 8 | 3 |
| March | | 3 | 4 |
| April | | 8 | 5 |
| May | | 8 | 5 |
| June | | 8 | 6 |
| July | | 4 | 4 |
| Aug. | | 6 | 6 |
| Sept. | | 4 | 10 |
| Oct. | | 9 | 6 |
| Nov. | | 3 | 3 |
| Dec. | | 3 | 7 |

Vital Records Division –

Director: Kristi Gephart

The Vital Records Division is tasked with registering, issuing and preserving the birth and death events occurring in Allen County. More than 42,000 documents in 2024 were issued from our office in person, via mail and through our online vendor, VitalChek.

Along with issuance of these records requested by our clients daily, we updated existing records with 355 birth notification responses (information sent following a birth to parents that allows for certain minor corrections to be made within legally allowed timeframes, avoiding the need to seek changes through a court order), 499 court orders and 222 adoptions. Vital Records also offers parents the opportunity to complete paternity

| Vital Records Services | 2023 | 2024 |
|--|-------------|-------------|
| Birth Certificates | 19,758 | 19,374 |
| Death Certificates | 24,142 | 22,174 |
| Paternity Affidavits Upon Marriage | 10 | 10 |
| Paternity Affidavits | 199 | 261 |
| Affidavit of Amendments (Corr. Affidavits) | 21 | 10 |
| Court Order Determining Parentage | 317 | 322 |
| Adoptions | 394 | 222 |
| Legal Name Changes | 166 | 177 |
| Correction by Birth Notification | 338 | 355 |
| Genealogy Requests | 9 | 11 |

affidavits, which allows parents to add the father of a child to a birth record and give the child an agreed-upon last name without going through the court system if it is completed within a legally required timeframe. In 2024, 271 paternity affidavit appointments were completed in the office.

This year, Director Kristi Gephart and Vital Records Clerk Andrew Rodriguez presented birth record training at two local hospitals, providing education, guidance, documents for reference and time for questions and answers for hospital staff to learn more about the importance of fully and accurately completed birth records. Kristi, with Rebecca Maze of the Allen County Coroner's Office, presented to the Fort Wayne Medical Education Program (FWMEP) to educate Family Medicine Residents about the methods for and importance of signing death certificates. All three sessions were great opportunities to build relationships with our local partners and future physicians and to promote the importance of birth and death records processes.

Several staff members attended the Indiana Vital Records Association (IVRA) Spring Educational Conference in Fishers and Peru. IVRA consists of local health department vital records staff across the state whose objectives are cooperation, communication and collaboration with regard to developing uniform and proper methods in the field of vital records. In October, Kristi and Assistant Director Courtney Brown attended IVRA's Fall Educational Conference in Angola, where guest speakers from the Indiana Funeral Directors Association, the Indiana Department of Homeland Security's Mortuary Response Team and the Indiana Coroners' Association presented, along with the Indiana Department of Health about vital records updates and continued professional testing.

Other endeavors this year included working with courts to improve the court order process, updating our online VitalChek processes, participating in the Fetal Infant Mortality Review (FIMR) team and supplying data to necessary entities to assist with the department's mission of preventing disease, promoting health, protecting the environment and preserving vital records in our community. We will continue working closely with local agencies, state partners, funeral homes, health care providers, hospitals and nursing homes to accurately and efficiently record, maintain and issue the birth and death records of Allen County.

| Allen County Births | | 2021 | 2022 | 2023 | 2024 |
|-----------------------------|---|-------|-------|-------|-------|
| Location of Birth | | | | | |
| | Dupont Hospital | 2,381 | 2,476 | 2,632 | 2,940 |
| | Lutheran Hospital | 1,142 | 1,062 | 984 | 912 |
| | Parkview Randallia Hospital | 636 | 653 | 696 | 987 |
| | Parkview Regional Medical Center | 2,972 | 2,916 | 2,921 | 2,848 |
| | St. Joseph Hospital / Lutheran Downtown | 2 | 0 | 1 | 2 |
| | Holy Family Birthing Center | 191 | 164 | 215 | 233 |
| | Home / EnRoute | 63 | 51 | 68 | 64 |
| Total Births | | 7,387 | 7,322 | 7,517 | 7,986 |
| Residency | | | | | |
| | Allen County Resident | 5,103 | 4,983 | 4,946 | 5,146 |
| | Non-Resident | 2,284 | 2,339 | 2,571 | 2,840 |
| Born to Married Parents | | | | | |
| | Male | 2,411 | 2,330 | 2,443 | 2,556 |
| | Female | 2,303 | 2,321 | 2,281 | 2,557 |
| Born to Non-Married Parents | | | | | |
| | Male | 1,381 | 1,408 | 1,461 | 1,472 |
| | Female | 1,292 | 1,263 | 1,332 | 1,401 |

| Allen County Deaths | | 2022 | 2023 | 2024 |
|---------------------|----------------------------------|-------|-------|-------|
| Coroner Cases | | | | |
| | Accident | 382 | 364 | 338 |
| | Homicide | 26 | 38 | 45 |
| | Suicide | 74 | 70 | 64 |
| | Pending | 0 | 0 | 0 |
| | Undetermined | 19 | 15 | 7 |
| | Undetermined SIDS/SUIDS* | 7 | 4 | 8 |
| Natural Causes | | | | |
| | Heart Disease | 686 | 645 | 662 |
| | Cancer | 725 | 720 | 723 |
| | Pneumonia | 100 | 153 | 140 |
| | Diabetes | 205 | 51 | 62 |
| | Cirrhosis | 98 | 71 | 85 |
| | Chronic Obstructive Lung Disease | 190 | 210 | 230 |
| | Premature Infant | 21 | 20 | 30 |
| | HIV/AIDS | 7 | 5 | 8 |
| | Tuberculosis | 2 | 0 | 0 |
| | Influenza | 13 | 8 | 11 |
| | All Other Natural Causes | 2,621 | 2,427 | 2,344 |

*Sudden Infant Death Syndrome/Sudden Unexplained Infant Death Syndrome

| Allen County Deaths (Cont.) | | 2022 | 2023 | 2024 |
|-----------------------------|--------------------------------------|-------|-------|-------|
| Location of Death | | | | |
| | <i>Hospital</i> | 2,411 | 2,139 | 2,091 |
| | <i>Visiting Nurse & Hospice</i> | 263 | 277 | 304 |
| | <i>Residence, Nursing Home, Etc.</i> | 2,502 | 2,385 | 2,362 |
| Total Deaths | | 5,176 | 4,801 | 4,757 |
| Residency | | | | |
| | <i>Allen County Resident</i> | 3,630 | 3,390 | 3,262 |
| | <i>Non-Resident</i> | 1,546 | 1,411 | 1,495 |
| Gender | | | | |
| | <i>Male</i> | 2,797 | 2,519 | 2,502 |
| | <i>Female</i> | 2,379 | 2,282 | 2,255 |
| Age | | | | |
| | <i>Fetal Deaths</i> | 50 | 44 | 56 |
| | <i>Under 28 days</i> | 35 | 34 | 41 |
| | <i>29 days to 1 year</i> | 16 | 19 | 14 |
| | <i>1 year to 14 years</i> | 26 | 17 | 17 |
| | <i>15 years to 24 years</i> | 69 | 65 | 60 |
| | <i>25 years to 44 years</i> | 301 | 234 | 221 |
| | <i>45 years to 64 years</i> | 1,069 | 922 | 899 |
| | <i>65 years to 74 years</i> | 1,126 | 1,035 | 1,112 |
| | <i>75 years to 84 years</i> | 1,286 | 1,228 | 1,180 |
| | <i>85 years and older</i> | 1,248 | 1,247 | 1,213 |

Finance –

Director: Jennifer Miller

The Finance Division had a busy year managing Health First Indiana (HFI) funds for its first-year roll-out and implementing the Dayforce payroll and human resources platform, introduced county-wide in 2024.

HFI funds were received for the first time in 2024. The Finance Director worked with the Administrator to develop methods for tracking budgets and expenditures and coordinating expenses among the varying departmental budget funds. Two budgets were prepared for approval of the planned HFI expenditures, as the Allen County budget forms differed from the Indiana Department of Health forms. This necessitated two internal methods for tracking all expenditures for both approval bodies. Monthly reports were developed for the Administrator to provide accurate, real-time status of the HFI fund balance and expenditures. Tagging expenditures by Core Public Health Service provided a detailed vision of how the department utilized HFI funds.

In addition to launching Dayforce, the Finance Division worked alongside the Informatics Director to implement procedures to ensure all division directors were trained to properly manage time sheet review and approval of benefit time in Dayforce. The Finance Director worked with the Allen County Human Resources Department to learn new procedures for onboarding newly hired staff in Dayforce and refined internal processes to make onboarding a smooth transition for new hires. Ensuring all benefit time was accurately tracked and transferred from legacy systems was also a priority for the division. While the new systems were being developed, all division staff continued to complete regularly assigned duties such as submitting accounts payable, tracking and reporting all receipts and disbursements, placing and tracking all requested medical, office and field supply orders, maintaining personnel records, making travel reservations and ensuring staff complete annual training.

| Disbursements | 2023 | 2024 |
|---|-----------------------|-----------------------|
| Health Fund (285-73-01) | \$5,374,868.83 | \$5,829,716.88 |
| Clinic Donation Fund (289-73-01) | \$1,706.21 | \$0.00 |
| Coroner's Death Certification Fund (715-75-01) | \$57,187.50 | \$54,900.00 |
| Health First Indiana (HFI) (287-73-01) | \$0.00 | \$3,083,671.83 |
| IDOH Immunization Grant (Competitive) (847-73-01) | \$69,221.25 | \$0.00 |
| IDOH (HIV) Sub Abuse Prev & Treatment Grant (768-73-03) | \$39,514.13 | \$26,258.22 |
| IDOH Syringe Services Program Grant (863-73-01) | \$36,181.35 | \$0.00 |
| IDOH COVID Supplemental/Imm Grant (883-73-01) | \$169,873.18 | \$106,407.09 |
| IDOH Co Ag Grant (891-73-01) | \$57,330.00 | \$30,223.49 |
| Local Health Maintenance Fund (through IDOH) (286-73-01) | \$155,881.65 | \$23,627.79 |
| Onsite Waste Water Management Fund (790-73-20) | \$152,547.84 | \$114,255.36 |
| Tobacco Master Plan/Trust Fund (762-73-07) | \$119,446.47 | \$37,300.00 |
| TOTAL DISBURSEMENTS (Includes All Disbursements From All Funds) | \$6,233,758.41 | \$9,306,360.66 |

For a full report on Health First Indiana (HFI)/Health First Allen County (HFAC), please consult our HFAC Annual Report, which you can find by scanning the QR code -



| DEPARTMENT OF HEALTH REVENUE SOURCES | | |
|---|-----------------------|-----------------------|
| TAX REVENUES (285-73-01) | 2023 | 2024 |
| General Property Taxes | \$3,322,699.21 | \$3,488,471.04 |
| Excise Taxes | \$232,986.68 | \$207,310.03 |
| Financial Institution Taxes | \$20,411.13 | \$16,755.59 |
| Commercial Vehicle Taxes | \$19,118.10 | \$18,720.37 |
| Taxes TOTAL: | \$3,595,215.12 | \$3,731,257.03 |
| PERMIT & DOCUMENT-RELATED FEE REVENUES (285-73-01) | 2023 | 2024 |
| Food & Consumer Protection Permits & Fees** | \$752,263.98 | \$867,611.50 |
| Lodging Establishment Permits & Fees | \$14,750.00 | \$18,800.00 |
| Septic System Permits & Fees | \$38,805.00 | \$38,855.00 |
| Swimming Pool/Spa Permits & Fees | \$60,132.50 | \$65,318.75 |
| Tattoo & Body Piercing Permits & Fees | \$56,288.75 | \$58,545.00 |
| Vital Records Documents*** | \$780,445.00 | \$803,606.00 |
| Permit-Related Fees TOTAL: | \$1,702,685.23 | \$1,852,736.25 |
| **\$42,150.02 (2023) was collected as food fees, but was allocated to the LHMF (286-73-01) - not included in this total. ***An add'l \$57,001.25 (2023) and \$55,150 (2024) was collected as Vital Records fees, but was allocated to the Coroner's Education Fund per statute - not included in this total. | | |
| MEDICAL-RELATED FEE REVENUES (Self-Pay) (285-73-01) | 2023 | 2024 |
| Client Self-Pay Medical Fees for Clinical Services | \$118,514.10 | \$182,939.03 |
| Medical-Related Fees TOTAL: | \$118,514.10 | \$182,939.03 |
| MEDICAL REIMBURSEMENTS (285-73-01) | 2023 | 2024 |
| Medicaid/Medicare | \$345,759.06 | \$389,362.19 |
| Private Insurance | \$63,211.56 | \$90,643.08 |
| COVID-19 Vaccination Admin Fee Insurance Reimbursement (IDOH) | \$301,148.84 | \$74.01 |
| COVID-19 Vaccination Admin Fee Insurance Reimbursement (ACDOH) | \$37.21 | \$0.00 |
| Bridge Access Vaccine Reimbursement Program (IDOH) | \$0.00 | \$2,360.00 |
| Refugee Medical Assistance (RMA) | \$39,227.26 | \$31,692.68 |
| Medical Reimbursements TOTAL: | \$749,383.93 | \$514,131.96 |
| INTEREST (interest from ALL funds which accrue interest) | 2023 | 2024 |
| Health Fund (285-73-01) | \$185,735.16 | \$250,191.01 |
| Local Health Maintenance Fund (286-73-01) | \$4,058.01 | \$1,948.63 |
| Onsite Septic Fund (790-73-20) | \$5,678.40 | \$5,104.03 |
| Interest TOTAL: | \$195,471.57 | \$257,243.67 |

| DEPARTMENT OF HEALTH REVENUE SOURCES (Cont.) | | 2023 | 2024 |
|--|--|-----------------------|------------------------|
| MISCELLANEOUS REIMBURSEMENTS & AWARDS (285-73-01) | | | |
| Hoosier Upland/Travel Reimbursements | | \$3,579.52 | \$0.00 |
| Corrections by Auditor | | \$11.37 | \$199.00 |
| JP Morgan Rebate | | \$582.54 | \$643.16 |
| Sale of Vehicles | | \$0.00 | \$6,920.00 |
| Vendor Refunds and Rebates | | \$667.30 | \$1,330.27 |
| Reimbursement for Indiana Dept of Health (IDOH) Survey | | \$1,000.00 | \$0.00 |
| Misc. Reimbursements | | \$100.00 | \$10.00 |
| Miscellaneous Reimbursements TOTAL: | | \$5,940.73 | \$9,102.43 |
| FINE COLLECTION FUND REVENUES (Fine Fund) (849-73-01) | | 2023 | 2024 |
| Food Fines | | \$3,425.00 | \$2,500.00 |
| Lodging Fines | | \$500.00 | \$445.00 |
| Tattoo Fines | | \$950.00 | \$1,045.00 |
| Swimming Pool Fines | | \$2,500.00 | \$0.00 |
| Fines TOTAL: | | \$7,375.00 | \$3,990.00 |
| GRANT REVENUES | | 2023 | 2024 |
| IDOH Immunization Grant (Competitive) (847-73-01) F | | \$81,192.02 | \$0.00 |
| IDOH (HIV) Sub Abuse Prev & Treatment Grant (768-73-03) F | | \$40,958.11 | \$33,464.08 |
| IDOH Syringe Services Program Grant (863-73-01) F | | \$55,684.98 | \$10,143.59 |
| IDOH COVID Supplemental/Imm Grant (883-73-01) F | | \$140,455.04 | \$211,182.29 |
| IDOH Lead Poisoning Prevention Grant (285-73-01) F | | \$104,984.10 | \$75,888.94 |
| IDOH School CoAg Assistance/ School Health Grant (891-73-01) F | | \$663,927.86 | \$495,000.00 |
| Local Health Maintenance Fund (through IDOH) (286-73-01) S | | \$72,672.00 | \$0.00 |
| Tobacco Master Plan/Trust Fund (through IDOH) (762-73-07) S | | \$128,141.55 | \$0.00 |
| Grants TOTAL: | | \$1,288,015.66 | \$825,678.90 |
| S=State Direct F=Federal Pass-Through | | | |
| Each of the above grant's revenues and expenditures are detailed on the following pages. | | | |
| HEALTH FIRST INDIANA (HFI) FUNDS (287-73-01) | | 2023 | 2024 |
| Health First Indiana Funds (HFI) | | N/A* | \$4,650,779.69 |
| Health First Funds TOTAL: | | | \$4,650,779.69 |
| OTHER FUND REVENUES | | 2023 | 2024 |
| Clinic Donation Fund | | \$0.00 | \$0.00 |
| Onsite Waste Water Management Fund (790-73-20) | | \$140,725.00 | \$43,750.00 |
| Other Funds TOTAL: | | \$140,725.00 | \$43,750.00 |
| | | 2023 | 2024 |
| TOTAL REVENUE (Includes All Fund Revenues & Grant Revenues Above) | | \$7,902,477.61 | \$12,126,758.96 |

*Health First Indiana funding began in 2024

INDIVIDUAL FUND REPORTS

| | <u>2023</u> | <u>2024</u> |
|--------------------------------|------------------------|------------------------|
| Health Fund (285-73-01) | | |
| Beginning Balance, January 1 | \$3,734,190.12 | \$4,821,779.66 |
| Receipts | \$6,276,723.21 | \$6,366,055.64 |
| Interest | <u>\$185,735.16</u> | <u>\$250,191.01</u> |
| | \$10,196,648.49 | \$11,438,026.31 |
| Disbursements | <u>-\$5,374,868.83</u> | <u>-\$5,829,716.88</u> |
| Balance, December 31 | \$4,821,779.66 | \$5,608,309.43 |

| | | |
|---|---------------------|--------------------|
| Allen County Onsite Waste Water Management (776-73-01) | | |
| Beginning Balance, January 1 | \$2,564.40 | \$2,731.35 |
| Receipts | \$10,000.00 | \$2,500.00 |
| Interest | <u>\$167.47</u> | <u>\$75.77</u> |
| | \$12,731.87 | \$5,307.12 |
| Disbursements | <u>-\$10,000.52</u> | <u>-\$5,295.38</u> |
| Balance, December 31 | \$2,731.35 | \$11.74 |

| | | |
|---|--------------------|-------------------|
| Clinic Donation Fund (289-73-01) | | |
| Beginning Balance, January 1 | \$11,413.32 | \$9,707.11 |
| Receipts | <u>\$0.00</u> | <u>\$0.00</u> |
| | \$11,413.32 | \$9,707.11 |
| Disbursements | <u>-\$1,706.21</u> | <u>\$0.00</u> |
| Balance, December 31 | \$9,707.11 | \$9,707.11 |

| | | |
|---|---------------------|---------------------|
| Coroner's Death Certification Fund (715-75-01) | | |
| Beginning Balance, January 1 | \$4,983.75 | \$4,797.50 |
| Receipts | <u>\$57,001.25</u> | <u>\$55,150.00</u> |
| | \$61,985.00 | \$59,947.50 |
| Disbursements | <u>-\$57,187.50</u> | <u>-\$54,900.00</u> |
| Balance, December 31 | \$4,797.50 | \$5,047.50 |

| | | |
|---|--------------------|--------------------|
| Fine Collection Fund (849-73-01) | | |
| Beginning Balance, January 1 | \$42,106.70 | \$49,481.70 |
| Receipts | <u>\$7,375.00</u> | <u>\$3,990.00</u> |
| | \$49,481.70 | \$53,471.70 |
| Disbursements | <u>\$0.00</u> | <u>\$0.00</u> |
| Balance, December 31 | \$49,481.70 | \$53,471.70 |

INDIVIDUAL FUND REPORTS

| | <u>2023</u> | <u>2024</u> |
|--|-----------------------|------------------------|
| IDOH Immunization Grant (Competitive) (847-73-01) | | |
| Beginning Balance, January 1 | (\$11,970.77) | \$0.00 |
| Receipts | <u>\$81,192.02</u> | <u>\$0.00</u> |
| | \$69,221.25 | \$0.00 |
| Disbursements | <u>-\$69,221.25</u> | <u>\$0.00</u> |
| Balance, December 31 | \$0.00 | \$0.00 |
| IDOH (HIV) Sub Abuse Prev & Treatment Grant (768-73-03) | | |
| Beginning Balance, January 1 | (\$8,649.84) | (\$7,205.86) |
| Receipts | <u>\$40,958.11</u> | <u>\$33,464.08</u> |
| | \$32,308.27 | \$26,258.22 |
| Disbursements | <u>-\$39,514.13</u> | <u>-\$26,258.22</u> |
| Balance, December 31 | (\$7,205.86) | \$0.00 |
| IDOH Syringe Services Program Grant (863-73-01) | | |
| Beginning Balance, January 1 | (\$29,647.22) | (\$10,143.59) |
| Receipts | <u>\$55,684.98</u> | <u>\$10,143.59</u> |
| | \$26,037.76 | \$0.00 |
| Disbursements | <u>-\$36,181.35</u> | <u>\$0.00</u> |
| Balance, December 31 | (\$10,143.59) | \$0.00 |
| IDOH COVID Supplemental/Imm Grant (883-73-01) | | |
| Beginning Balance, January 1 | (\$75,357.06) | (\$104,775.20) |
| Receipts | <u>\$140,455.04</u> | <u>\$211,182.29</u> |
| | \$65,097.98 | \$106,407.09 |
| Disbursements | <u>-\$169,873.18</u> | <u>-\$106,407.09</u> |
| Balance, December 31 | (\$104,775.20) | \$0.00 |
| Health First Indiana (HFI) (287-73-01) | | |
| Beginning Balance, January 1 | \$0.00 | \$0.00 |
| Receipts | <u>\$0.00</u> | <u>\$4,650,779.69</u> |
| | \$0.00 | \$4,650,779.69 |
| Disbursements | <u>\$0.00</u> | <u>-\$3,083,671.83</u> |
| Balance, December 31 | \$0.00 | \$1,567,107.86 |

INDIVIDUAL FUND REPORTS

| | <u>2023</u> | <u>2024</u> |
|--|-----------------------|-----------------------|
| IDOH School CoAg Assistance/School Health Grant (891-73-01) | | |
| Beginning Balance, January 1 | \$668,000.00 | \$1,274,597.86 |
| Receipts | <u>\$663,927.86</u> | <u>\$495,000.00</u> |
| | \$1,331,927.86 | \$1,769,597.86 |
| Disbursements | <u>-\$57,330.00</u> | <u>-\$30,223.49</u> |
| Balance, December 31 | \$1,274,597.86 | \$1,739,374.37 |
| Local Health Maintenance Fund (through IDOH) (286-73-01) | | |
| Beginning Balance, January 1 | \$78,537.36 | \$41,535.74 |
| Receipts: | | |
| State Fund | \$50,000.00 | \$0.00 |
| Tobacco Settlement Monies | \$22,672.00 | \$0.00 |
| Interest | \$4,058.01 | \$1,948.63 |
| Food Permit Fees (transferred) | <u>\$42,150.02</u> | <u>\$0.00</u> |
| | \$197,417.39 | \$43,484.37 |
| Disbursements | <u>-\$155,881.65</u> | <u>-\$23,627.79</u> |
| Balance, December 31 | \$41,535.74 | \$19,856.58 |
| Onsite Waste Water Management Fund (790-73-20) | | |
| Beginning Balance, January 1 | \$129,652.15 | \$123,507.71 |
| Receipts | \$140,725.00 | \$43,750.00 |
| Interest | <u>\$5,678.40</u> | <u>\$5,104.03</u> |
| | \$276,055.55 | \$172,361.74 |
| Disbursements | <u>-\$152,547.84</u> | <u>-\$114,255.36</u> |
| Balance, December 31 | \$123,507.71 | \$58,106.38 |
| Tobacco Master Plan/Trust Fund (Through IDOH) (762-73-07) | | |
| Beginning Balance, January 1 | \$57,545.85 | \$66,240.93 |
| Receipts | <u>\$128,141.55</u> | <u>\$0.00</u> |
| | \$185,687.40 | \$66,240.93 |
| Disbursements | <u>-\$119,446.47</u> | <u>-\$37,300.00</u> |
| Balance, December 31 | \$66,240.93 | \$28,940.93 |

Our Mission

In support of Allen County and its municipalities, the Allen County Department of Health strives to promote the health, safety, and well-being of all residents. With guidance from the Indiana Department of Health and support from our many partnering agencies, we endeavor to have a model public health infrastructure that provides professional, responsive, and cost-effective services to the community.

Our Vision

To be a center of excellence for public health by preventing disease, promoting health, protecting the environment and preserving vital records in our community.

Executive Board of Public Health

The Allen County Department of Health is governed by a nine-member Executive Board. Members are unpaid community volunteers; their backgrounds vary in accordance with Indiana Code. Six members are appointed by the Allen County Board of Commissioners, and one by the Allen County Council. Two are appointed by the Allen County Board of Commissioners, based on recommendations from the cities of Fort Wayne and New Haven.



From top left: Steve Schimmele, DDS; Craig Bolinger, DDS; Kristin Woebbecking; James Cameron, MD; Debra Lambert. Seated, from left: William Pond, MD; Patricia Hays, RN; Mary Hess, RN. Not pictured: Sara Trovinger, Pharm.D.

*Longtime board member Ted Sobol (not pictured) left the Executive Board of Health mid-year 2024.

Allen County Board of Commissioners

| | |
|------------------|--------------|
| F. Nelson Peters | - District 1 |
| Therese M. Brown | - District 2 |
| Richard E. Beck | - District 3 |



Allen County Council

| | |
|---------------------|----------------|
| Josh L. Hale | - 1st District |
| Thomas A. Harris | - 2nd District |
| Paul W. Lagemann | - 3rd District |
| Don A. Wyss | - 4th District |
| Robert A. Armstrong | - At-Large |
| Ken Fries | - At-Large |
| Kyle Kerley | - At-Large |

Community Partners

The Allen County Department of Health works with a number of partners to fulfill its mission of promoting the health, safety and well-being of all residents by providing professional, responsive and cost-effective services to the community.

We are grateful to all our valued partners. Without them, we would not be able to effectively pursue and complete that mission.

*Thank
you!*

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[@AllenCountyHD](https://twitter.com/AllenCountyHD)



[@AllenCountyHD](https://www.instagram.com/AllenCountyHD)

Learn more about ...

Careers & Internships

Public health is a dynamic, multi-disciplinary field that encompasses a broad range of experts and specialties dedicated to promoting and protecting the health of people and the communities where they live, work and play.

There are hundreds of public health job categories, and each can be rewarding. There are plenty of ways to carve out a career niche in this exciting field.

When there are open positions, the Allen County Department of Health posts them on our website. If you're interested in public health and want to see what's available in Allen County, scan the QR code below.

We also periodically offer internship opportunities to students working toward careers in public health. Scan the QR code to find information about applying.



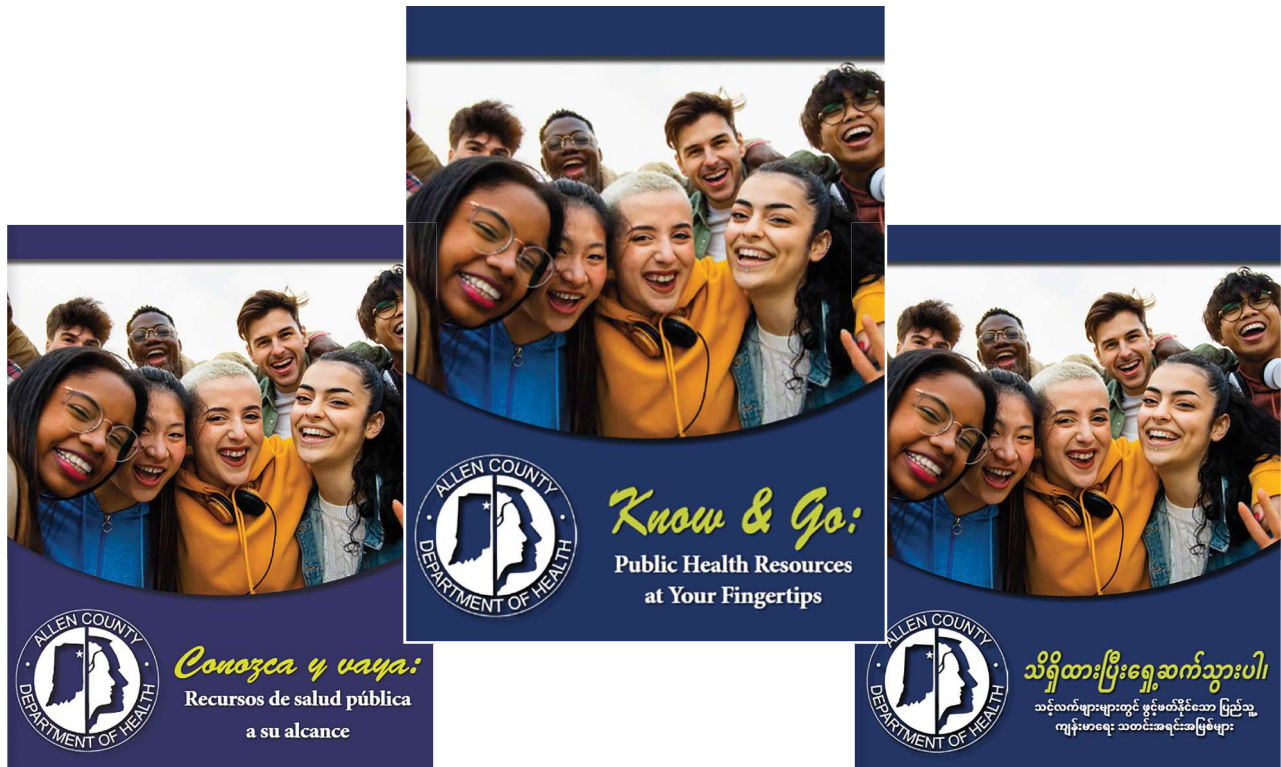
Learn more about ...

Public Health Resources

Our work is as diverse as Allen County residents themselves, and we receive lots of questions about many different topics.

We have answers to many of those questions in a booklet designed to highlight programs and services we offer, as well as the work of some of our community partners.

Scan the QR code below to find contact information, health tips – and more.





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