Miami-Dade County Health Department Epidemiology, Disease Control & Immunization Services (EDC-IS)

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## Miami-Dade County Health Department Healthy Homes Program Overview

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Families in Miami-Dade County will be aware of indoor environmental hazards, and will know how to attain community resources to help them create and maintain healthy and safe homes. We are working to make a difference one home at a time.

**Goal of the Healthy Homes Program** 

The Florida Healthy Homes Program seeks to promote healthy and safe homes by:

1. Raising awareness of environmental health risks in homes such as lead-based paint, mold, carbon monoxide, pesticides, and hazardous household products through methods such as statewide marketing, one-on-one family education, and realtor and property owner education.

2. Referring families to local health and housing programs that can help mitigate

hazards in the home before someone gets sick or hurt.
3. Promoting epidemiology studies to pinpoint areas of need, assess risk factors, identify disparities, and evaluate the effectiveness of interventions.
Core Healthy Homes Principles:
1. Keep it Clean
2. Keep it Dry
3. Keep it Well-Ventilated

- 4. Keep it Contaminant-Free
- 5. Keep it Pest-Free
- 6. Keep it Safe
- 7. Keep it Well-Maintained
- Health Risks Addressed
- 1. Lead Exposure
- 2. Asthma and Allergies
- 3. Poisoning (CO, pesticides)
- 4. Home Safety/Injury Prevention
- 5. Radon Exposure

www.dadehealth.org

Management of the Healthy Homes Program	the survey is to determine if the client reports that			
The Miami-Dade Healthy Homes Program is located at	they:			
the Miami-Dade County Health Department (MDCHD)	1. Gained knowledge from education provided by the			
Office of Epidemiology, Disease Control & Immuniza-	Healthy Homes Coach.			
tion Services.	2. Contacted referral resource organizations and re-			
The primary activities of the Healthy Homes Coach(s)	ceiving support and/or services for environmental haz-			
are:	ards.			
1. Developing Client Identification Partners (CIP) that	3. Took other actions to prevent, reduce or eliminate			
can assist with client identification.	exposure to the hazards identified.			
2. Providing healthy homes coaching to clients. This				
includes providing health education and making refer-	Key Messages: Together we can make a difference!			
rals to service agencies.				
3. Documenting / evaluating how healthy homes	<ul> <li>Families can have environmental health hazards in</li> </ul>			
coaching results in client outcomes (safer, healthier	their home and not even realize it.			
homes).	Children may be more vulnerable to environmental			
	exposures than adults.			
The primary activities of the Client Identification Part-	<ul> <li>It is easier to prevent exposure to some hazards than</li> </ul>			
ners (CIP) are:	it is to remove them and treat their effects.			
1. Provides healthy homes education and distributes	<ul> <li>Educate families on how to make and keep healthy</li> </ul>			
healthy homes booklet to the family.	and safe homes.			
2. Conducts a quick home assessment during routine				
home visits to new moms/clients.				
3. Makes referrals to the healthy homes coach.				
Evaluation of the MDCHD Healthy Homes Pro-				
gram	FLORIDA DEPARTMENT OF HEALTH			
The CHD Healthy Homes Coach will document individ-				
ual client risks, services, education, and referrals. In				
addition, a telephone survey will be administered to				
evaluate client outcomes 3 months after the initial				

## 2009 June is...

### **Home Safety Month**

**Fireworks Safety Month Myasthenia Gravis Awareness Month** National Aphasia Awareness Month National Scleroderma Awareness Month National Scoliosis Awareness Month **Vision Research Month** Sun Safety Week

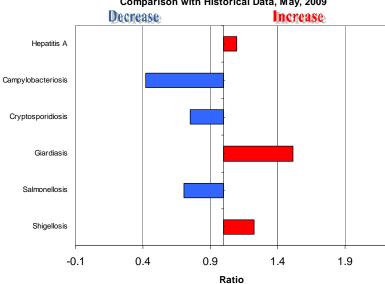
National Headache Awareness Week National Cancer Survivors Day Caribbean American HIV/AIDS Awareness Day National Men's Health Week Helen Keller Deaf - Blind Awareness Week National ASK Day Eye Safety Awareness Week National HIV Testing Day



#### Home Safety Council Resource Center

Check out the Home Safety Council for further home safety resources. This program is dedicated to home injury prevention education and developing resources for all ages and locations. These available resources have helped educate people of all ages to be safer in and around their homes.

The educational resources include from brochures to posters to classroom lesson plans. The Home Safety Council offers a wealth of resources to support any home safety initiative. For further information visit www.homesafetycouncil.org



Selected Notifiable Disease Reports, Miami-Dade County, Comparison with Historical Data, May, 2009

**TO REPORT ANY DISEASE AND FOR INFORMATION CALL: Epidemiology**, Disease Control & Immunization Services

Childhood Lead Poisoning	
Prevention Program	
Hepatitis	
Immunizations or outbreaks .	
HIV/AIDS Program	
STD Program	
Tuberculosis Program	
Immunization Service	
To make an appointment	786-845-0550

### AVIAN FLU WATCH Unless indicated, information is current as of June 2, 2009



• Since 2003, there have been 433 human cases of avian influenza (H5N1) confirmed by the World Health Organization (WHO). Of these, 262 cases have died. This means there is a 61% (262/433) fatality rate.

• **15 Countries with confirmed** *human* **cases** include Bangladesh, Cambodia, China, Djibouti, Indonesia, Thailand, Vietnam, Iraq, Azerbaijan, Egypt, Turkey, Nigeria, Pakistan, Myanmar, and Lao People's Democratic Republic .

#### • No human cases of avian influenza (H5N1) have



been reported in the United States.

• H5N1 has been confirmed in *birds* in several other countries since 2003. H5N1 has been documented in birds in more than 30 countries in Europe & Eurasia, South Asia, Africa, East Asia and the Pacific, and the Near East. For a list of these countries, visit the World Organization for Animal Health Web Site at :http://www.oie.int/downld/AVIAN%20INFLUENZA/A \_AI-Asia.htm.

• No restrictions on travel to affected countries have been imposed. Travelers should avoid contact with live poultry and monitor their health for ten days after returning from an affected country. SOURCES: WHO, OIE, CDC

#### PARTICIPATE IN INFLUENZA SENTINEL PROVIDER SURVEILLANCE

# The Miami-Dade County Health Department NEEDS Influenza Sentinel Providers!!

Sentinel providers are key to the success of the Florida Department of Health's Influenza Surveillance System. Data reported by sentinel providers gives a picture of the influenza virus and ILI activity in the U.S. and Florida which can be used to guide prevention and control activities, vaccine strain selection, and patient care.

- Providers of any specialty, in any type of practice, are eligible to be sentinel providers.
- Most providers report that it takes less than 30 minutes a week to compile and report data on the total number of patients seen and the number of patients seen with influenza-like illness.
- Sentinel providers can submit specimens from a subset of patients to the state laboratory for virus isolation **free of charge**.

For more information, please contact **Erin O'Connell** at 305-470-5660.

#### **About the Epi Monthly Report**

The Epi Monthly Report is a publication of the Miami-Dade County Health Department, Epidemiology, Disease Control & Immunization Services, The publication serves a primary audience of physicians, nurses, and public health professionals. Articles published in the Epi Monthly Report may focus on quantitative research and analysis, program updates, field investigations, or provider education. For more information or to submit an article, contact Lizbeth Londoño at 305-470-

6918.

#### Monthly Report Selected Reportable Diseases/Conditions in Miami-Dade County, May 2009

		.,				
Diseases/Conditions	2009	2009	2008	2007	2006	2005
	this Month		Year to Date			
AIDS	N/A	N/A	N/A	N/A	N/A	N/A
Campylobacteriosis	6	36	54	46	57	47
Ciguatera Poisoning	0	3	10	0	0	0
Cryptosporidiosis	1	7	7	13	6	12
Cyclosporosis	0	0	4	0	0	0
Dengue Fever	0	3	1	1	1	0
E. coli, O157:H7	0	0	2	1	0	0
E. coli, Non-O157	0	0	1	• 0	NUMBER OF STREET, STRE	0
Encephalitis (except WNV)	0	0	1	0	0	0
Encephalitis, West Nile Virus	0	0	0	0	0	0
Giardiasis, Acute	34	247	91	92	83	65
Hepatitis A	3	25	15	12	16	26
Hepatitis B	0	4	7	7	11	23
	N/A	N/A	N/A	N/A	N/A	N/A
Influenza A (H5)	0	0	0	0	0	0
Influenza Isolates	0	0	0	0	0	0
Influenza Novel Strain	57	57	0		0	0
Influenza, Pediatric Death	0		0	0	0	0
Lead Poisoning	10	<u> </u>	56	69	65	63
Legionnaire's Disease		5		1	1	2
	0	0	0	0	0	0
Lyme disease	0	0	1	0	0	0
Malaria		7	1	0	4	0
Measles	0	0	0	0	0	0
Meningitis (except aseptic)	0	0	3	5	9	3
Meningococcal Disease		11	4	3	7	3
Mumps	0	0	2	1	0	0
Pertussis	3	14	9	11	4	2
Rubella	0	0		0	0	0
Rubella, Congenital	0			0		0
Salmonellosis	31	148	1. ************************************		179	150
Shigellosis	16		STONDARD IN		37	113
S <i>treptococcus pneumoniae,</i> Drug Re <mark>si</mark> stant	15		56		48	6
Tetanus	0			and the second second	0	0
Toxoplasmosis	0				0	0
TUDEICUIOSIS	N/A	N/A	N/A	N/A	N/A	N/A
Typhoid Fever	0	100	0	0	2	2
Vibrio cholera Type O1	0	2000		0	0	0
Vibrio cholera Non-O1	0	0	0	0	0	0
Vibrio, Other	0	0	0	0	0	0
West Nile Fever	0	0	0	0	0	0



\*Data on AIDS are provisional at the county level and are subject to edit checks by state and federal agencies.

\*\* Data on tuberculosis are provisional at the county level.