Yates County Public Health

2015

Annual Report

03/30/2016

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Message from the Director

I am pleased to present the Yates County Public Health Department's Annual Report to the Yates County Legislature. This report describes the programs and services provided during 2015 aimed at meeting the mission of the agency: promoting optimal health for people of all ages within our community. It is a reflection of the hard work and commitment of the staff as they work to address the needs of our community.

Operating as a Licensed Home Care Services Agency (LHCSA) following the sale of the Certified Home Health Agency in December 2012, we are able to conduct operations and programs which require home visitation such as nursing visits to new mothers and infants, to families of children identified with elevated lead levels, and to individuals diagnosed with Tuberculosis Infection or Disease. The Department also operates as a Diagnostic and Treatment Center permitting clinic activities for immunizations, blood lead testing and Tuberculin Skin testing. Both licenses are necessary to complete the core work of a local health department as required by Public Health Law.

Throughout 2015, much effort was devoted to working with our community and regional partners to address the goals and objectives outlined in the Community Health Improvement Plan; prevalence of obesity and hypertension and injury and fall prevention in vulnerable populations. Resources and attention were also directed towards the emerging public health issue of opioid and heroin abuse in our community. We also continued to work in preparation for a joint application for public health accreditation with the S^2AY Rural Health Network members. A Statement of Intent (SOI) was submitted to the Public Health Accreditation Board on July 2, 2015 and we anticipate being ready to submit our joint application by June 2016.

In November we were able to put into use the Finger Lakes Public Health Alliance Mutual Aid Agreements as we responded to assist our neighbor, Seneca County in staffing Points of Dispensing clinics (PODs). These PODs were held to provide prophylaxis to over 2,000 individuals exposed to Hepatitis A through 2 employees at fast food establishments. This activity allowed us an opportunity to not only assist another small local health department, but to also test our readiness to respond locally should the need arise and to make any necessary revisions or additions to our Emergency Preparedness plans.

While each new event or issue brings challenges, they also offer opportunities to collaborate and learn with our community partners and to strengthen our role as a leader for population health improvement. I am proud of the work done by the dedicated Yates County Public Health staff. I am also confident that in partnership with our governing body and cooperating agencies, we can continue to provide quality services and move closer to our vision of a healthier, safer, better informed community.

Deborah A Minor, RN MPH

Our Mission	Our Vision	Our Values
To promote optimal health for people of all ages through disease prevention, environmental risk reduction, assistance with access to care and facilitation of emergency preparedness through education, policy development and collaboration within our community.	**To bring about a healthier, safer, better informed community.**	**With integrity, compassion and commitment to excellence, we will apply best practices in the prevention of disease, promotion of wellness, and response to changing needs in our community.**

Incorporating the Ten Essential Public Health Services into the work conducted by the department, staff strive to prevent the spread of disease, protect community members from environmental hazards, prevent injuries, promote and encourage healthy behaviors, respond to disasters and emerging needs and assure the accessibility of quality health services.

Ten Essential Public Health Services

1. Monitor health status to identify community health problems
2. Diagnose and investigate health problems and health hazards in the community
3. Inform, educate, and empower people about health issues
4. Mobilize community partnerships to identify and solve health problems
5. Develop policies and plans that support individual and community health efforts
6. Enforce laws and regulations that protect health and ensure safety
7. Link people to needed personal health services and assure the provision of health care when otherwise unavailable
8. Assure a competent public health and personal health care workforce
9. Evaluate effectiveness, accessibility, and quality of personal and population-based health services
10. Research for new insights and innovative solutions to health problems

2015 Committee Membership

Human Services Committee of the Legislature

Leslie Church, Chairperson
Douglas Paddock, Vice Chairperson
Leland Sacket
Gary Montgomery
James Smith

The Yates County Legislature serves as our governing body through monthly reporting to the Human Services Committee.

Professional Advisory Committee

Eleanor DeWitt, MD, Medical Director
Vicki Dornberger, Speech Pathologist
Mary Griffiths, Public Health Nurse
Sara Christensen, RN, Supervising Public Health Nurse
Deborah Minor, RN, Director of Public Health
Susan Thomas, Medical Social Worker
Kimberly Arnold, RN
Terry Yonkers, RN

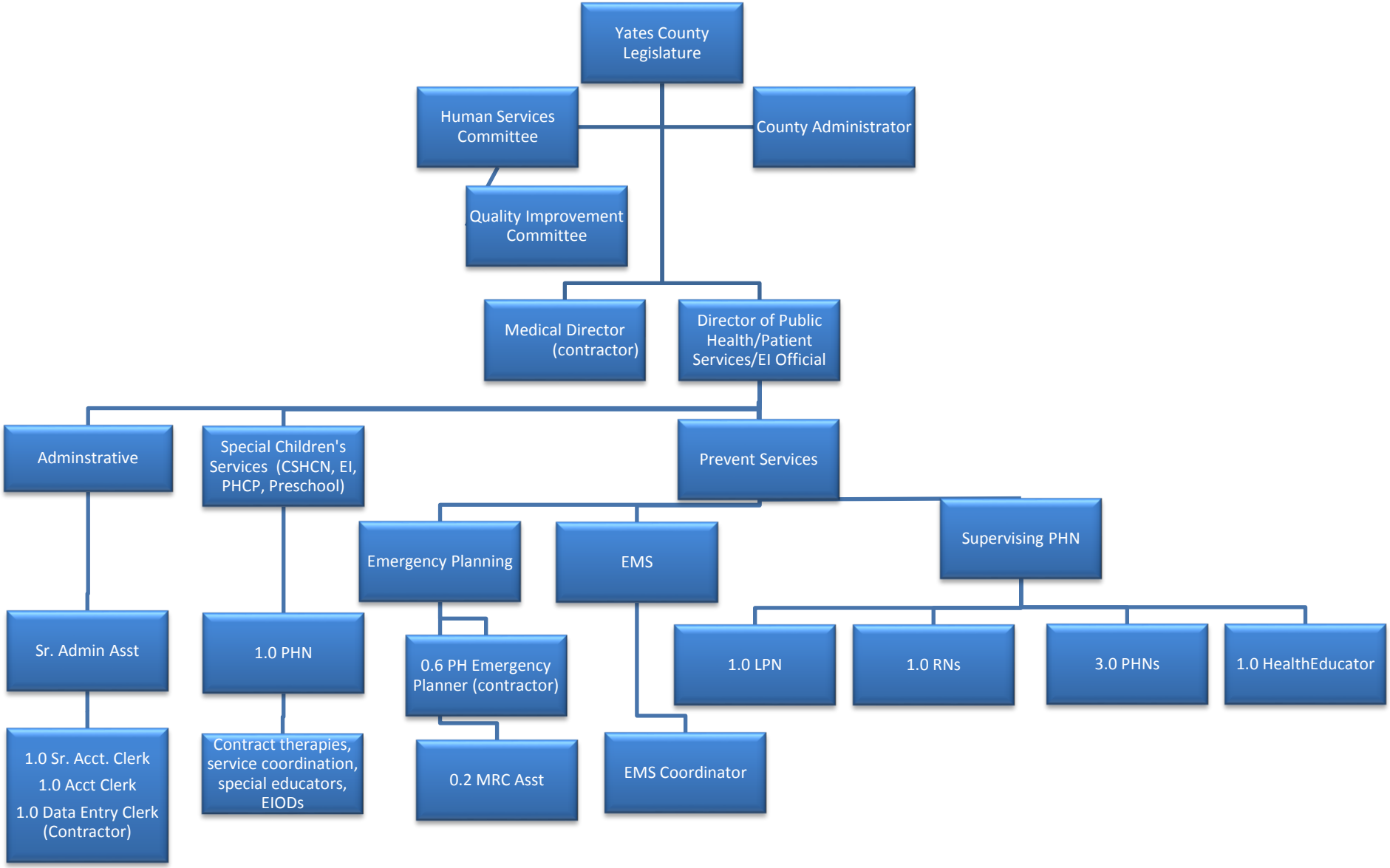
Members of the Professional Advisory Committee are appointed by the Public Health Director and serve to provide oversight to the Quality Improvement Committee of the Public Health Department. The Professional Advisory Committee meets quarterly to review policy, complaints, incidents and QI Improvement initiatives. Minutes are reviewed by members of the Human Services Committee.

S^2AY (Steuben, Schuyler, Allegany, Yates) Rural Health Network/Health Advisory Committee

Leslie Church, Yates County Legislator
Amy Miller, Commissioner, Department of Social Services
Deborah Minor, Director of Public Health
Gail Furst, Community Representative

The S^2AY Rural Health Network Board of Directors serves as the Public Health Advisory Committee. The Board of Directors is comprised of a legislator or supervisor, a consumer, a provider and the Public Health Director for each of the seven member counties.

The department also has several other advisory groups for specific programs including the Local Early Intervention Coordinating Council (LEICC), the Injury Prevention Coalition, the Yates County EMS Advisory Council, and the Public Health Emergency Operations Task Force.


Yates County Legislature
Human Services Committee
County Administrator
Quality Improvement Committee
Medical Director (contractor)
Director of Public Health/Patient Services/EI Official
Adminstrative
Special Children's Services (CSHCN, EI, PHCP, Preschool)
Prevent Services
Emergency Planning
EMS
Supervising PHN
Sr. Admin Asst
1.0 PHN
0.6 PH Emergency Planner (contractor)
1.0 LPN
1.0 RNs
3.0 PHNs
1.0 HealthEducator
1.0 Sr. Acct. Clerk
1.0 Acct Clerk
1.0 Data Entry Clerk (Contractor)
Contract therapies, service coordination, special educators, EIODs
0.2 MRC Asst
EMS Coordinator

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2015 Personnel

Administrative Staff:

Deborah A. Minor	Director of Public Health/Patient Services/Early Intervention Official Deputy Director
Dr. Eleanor DeWitt	Medical Director (contract)
Sara Christensen	Supervising Public Health Nurse
Mary Anne Delcour	FT Sr Administrative Assistant

Support Staff:

Terri Cadwell	FT Sr Account Clerk Typist
Carol Ogden	FT Account Clerk Typist

Public Health Staff:

Chris Warriner	FT Coordinator EMS
Kathy Swarthout	FT Health Educator, Health Education
Jennifer Green	FT Public Health Nurse Communicable Disease Control
Mary Griffiths	FT Public Health Nurse Quality Improvement
Susan Simmons	FT Public Health Nurse/Service Coordinator, Early Intervention
Edith Miller	FT Public Health Nurse, Maternal-Child Health
Angela Druker	FT Registered Nurse, Maternal-Child Health
Ann Murphy	FT Licensed Practical Nurse
Margaret Brinn	PT Public Health Program Coordinator, Emergency Preparedness
Virginia Colf	Data entry/outreach Immunization/Lead (contract)

Special Children's Services:

Nancy Middlebrook*	EIO/CPSE Designee (contract)

The Public Health Department also contracts with numerous agencies and individuals to deliver specialized services to children through the Preschool for Special Education program.

(FT = Full Time, PT = Part Time, *denotes retired/resigned/laid off during the year, ** denotes new employee)

Community Health Assessment

The primary authority and responsibility of each local health department is to promote, protect and improve the health of its residents by utilizing the Community Health Assessment. The Community Health Assessment is a comprehensive and systematic process of examining the health status of a population for the purposes of:

- Determining the general and disease-specific health of the community
- Assessing the underlying causes of poor health in the community
- Evaluating the effectiveness of program initiatives to maintain or improve health status
- Planning the utilization of resources to address health needs

The Community Health Assessment is completed every four years in collaboration with the local hospital system: Finger Lakes Health. Numerous other public health system partners assist in this process including Finger Lakes Community Health, Rochester Primary Care Network, Office for the Aging, Finger Lakes Addictions Counseling & Referral Agency, Cornell Cooperative Extension, Yates County Department of Social Services and Yates County Community Services.

The following health priorities were identified for focus in the 2013-2017 Community Health Improvement Plan:

1. Obesity
2. Hypertension
3. Unintentional Injury/Fall Prevention in Vulnerable Populations

And the disparity identified as needing focus:

Access to specialty care for the low-income population

CHIP Progress Report

Through the Choose Health Yates, YCPH worked with partners to implement and evaluate strategies outlined in the Community Health Improvement Plan. The partnering agencies include:

- Finger Lakes Health
- Finger Lakes Community Health
- Office for the Aging
- Our Town RoCKS
- Head Start
- Cornell Cooperative Extension
- YCRR Community Fitness & Wellness Center
- S2AY Rural Health Network
- Finger Lakes Health Systems Agency

Accomplishments and highlights of activities conducted during in 2015:

- Girls on the Run Program held in both the Dundee and Penn Yan School Districts (Grades 3-5) Due to successes of the program it will be expanded through Heart & Sole Program for 6-6th grade in 2016
- Participation of 11 restaurants in an initiative to identify healthy menu choices
- Working with local food programs and school cafeterias to increase use of local food produce
- Promotion of Farmer's Markets at WIC Clinics

- Encouraging use of available walking programs and other physical activity competitions held including county 5Ks, bike races through a physical activity resource guide
- Collaboration with Child and Family Resources for the opening of a Baby Café in Penn Yan in February 2016
- Adoption of a Breastfeeding Support Policy for Yates County employees and the opening of a designated breastfeeding room for use by employees and the public in the county office building
- Implementation of in-home visitation program by Certified Lactation Counselors
- Continuation of the school based Farm Safety Education program
- Expansion of the Finger Lakes Health Systems Agency Hypertension Registry initiative to all but one provider practice in Yates County

During 2016 the partnership will continue with efforts in expanding worksite wellness efforts and efforts aimed at promoting policy and practice level changes that support breastfeeding, healthy eating and physical activity practices. The partnership will also need to explore ways to increase the availability and use of evidence-based self-care management interventions such as the National Diabetes Prevention Program and Chronic Disease Self-Management.

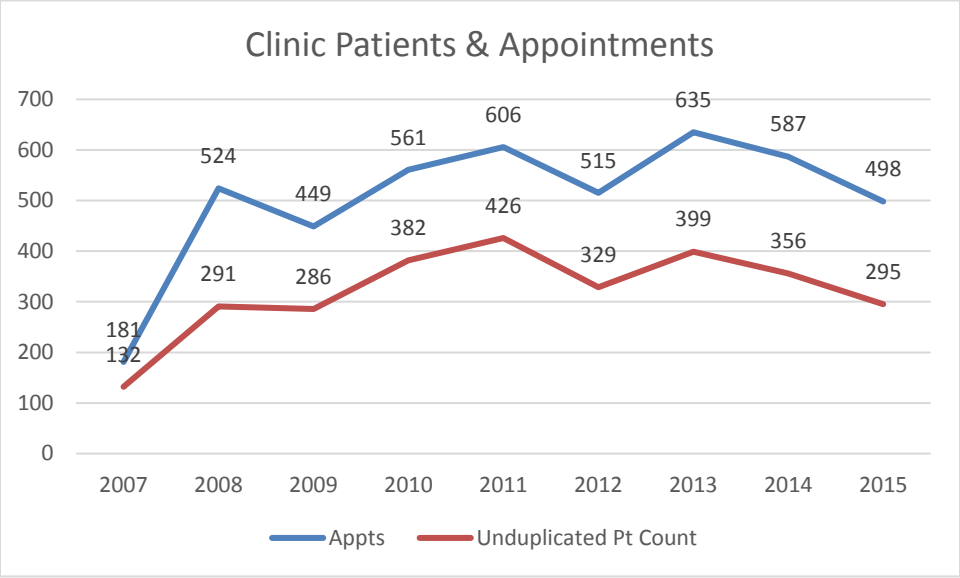
Communicable Disease Control

Immunization Program

Immunizations for vaccine-preventable diseases are offered to the Community through scheduled appointments at monthly Immunization Clinics, by appointment at the Public Health Office and through the jail program. Vaccine is purchased by Yates County Public Health or provided by the New York State Department of Health and administered by public health nursing staff. Fifteen different childhood vaccines were offered to children under the age of 19 years through participation in the Vaccines for Children Program. Hepatitis A and Hepatitis B vaccine are provided to high risk populations including inmates at our county jail through a state supported program. In 2015, Yates County Public Health participated in the GIFT Program which is a program that supplies free Tdap (Tetanus, Diphtheria, and Pertussis) Vaccine to Agencies that serve uninsured populations. This vaccine is recommended for all adults 19 years of age and is especially important for those adults who are around small children who are too young to be vaccinated. By getting vaccinated themselves, they are protecting their little loved ones, also known as "cocooning". Typically this vaccine has primarily been used in our Mennonite Community as they are uninsured. A total of 27 GIFT Tdaps were administered in 2015, 12 of which were given to our Mennonite Community.

The number of non-Mennonite children presenting to a county sponsored clinic continues to decrease. This is attributed in part to efforts aimed at keeping children engaged with their primary care provider and assuring that all families have access to health insurance which covers the cost of their child's vaccines. The local health department, while the safety net for those children needing immunizations must assure that VFC vaccine is provided only to those eligible for publicly funded vaccine.

Our Mennonite community continues to seek vaccines for their children through Public Health. In 2015, 88% of our Immunization appointments were for our Mennonite Community. In Yates County, we have a 47% non-vaccination rate of our Mennonite children. Mennonites choose not to vaccinate for personal or philosophical reasons not because of their religious beliefs. Public Health Nurses work very hard in educating our Mennonite Community on the importance of vaccination and how they not only protect their children from very serious diseases but help protect our entire community as a whole. In the Mennonite families who do choose to vaccinate their child, Public Health vaccinates 90% of these families and 10% seek the vaccines at their doctor's office.

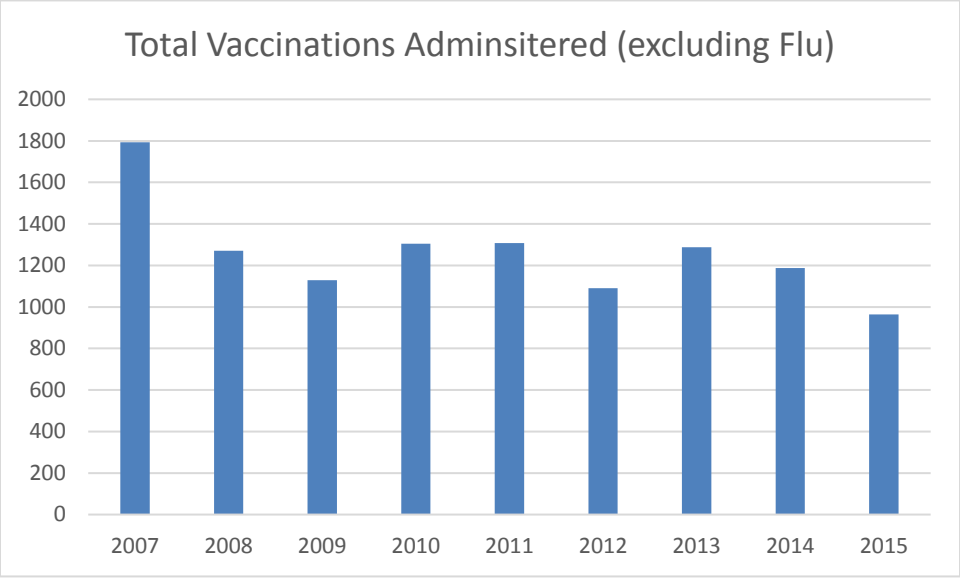


In addition to the chart on the left, in 2015 there were 93 office appointments for immunizations and 36 individuals in our local county jail were vaccinated.

As a requirement of grant funds received from the New York State Department of Health, our Immunization Coordinator performs AFIX visits to Yates County Medical Providers who receive VFC vaccine from the NYSDOH. Through the AFIX visits (Assessment, Feedback, Incentive, and Exchange), the Immunization Coordinator assess 2 year old Immunization and Lead Testing rates for the individual practices and assists in developing a corrective action plan aimed at improving the practice rate with the goal of all children being up to date with the recommended 4:3:1:3:3:1:4 series by age 19 months and all children tested for lead poisoning at both ages 1 and 2 years. This is a great collaboration between the local health department and our medical provider offices. Sharing of resources; strategies on how we can increase our immunization and lead testing rates, keeping in mind our unique population of Mennonites who often refuse these preventive measures; and how we can work together to stay up to date on the latest recommendations and research studies are a few examples of topics discussed at these visits.

Each fall our Immunization Coordinator visits 29 Mennonite schools to complete the NYS School Immunization Survey. Our Immunization Coordinator speaks with the Mennonite School Superintendent annually to update on school vaccination requirements for entry and required documentation if a parent chooses to not vaccinate their child whether it is a medical or a religious exemption. Our Immunization Coordinator contacts each family identified with a child that is not up to date via phone call and offers a home and/or clinic visit to help get their child caught up with their immunizations. Through these parent contacts, the nurse is able to answer any questions or concerns that may have contributed to a child not being up to date with his or her vaccines.

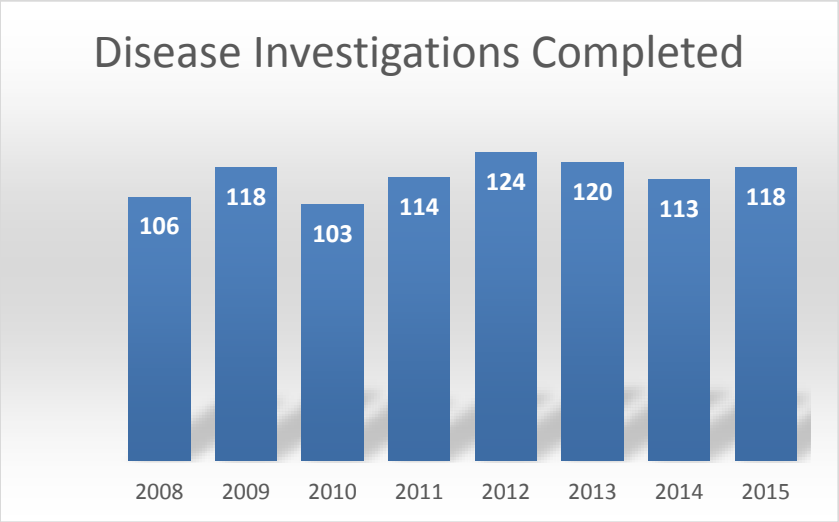
Our Immunization Coordinator is the chairperson of the Finger Lakes Area Immunization Coalition, which looks at regional strategies for increasing both pediatric and adult vaccination rates. In May 2015, this coalition successfully held an Immunization Conference in Geneva, NY with 165 attendees from Yates and surrounding Finger Lakes Area Counties.



Prior to and during Flu Season, Yates County Public Health educated our community on the importance of flu vaccination, prevention techniques and different avenues in which they could receive an influenza vaccination. We also work closely with our medical providers in monitoring influenza activity in our community through the entire flu season.

In 2013, New York State Legislation was passed requiring healthcare and residential facilities and agencies to ensure that all personnel were either vaccinated with the flu vaccine or wore a surgical mask at all times while in areas that patients or residents may be present. Yates County Public Health staff, understanding the risk that they present to vulnerable patients and families, responded by achieving a 100% influenza vaccination rate for staff for three years in a row.

General Communicable Disease Control



2015 Communicable Disease Investigations

Disease	Number of cases
Campylobacteriosis	6
Chlamydia	65
Chronic Hepatitis B	1
Chronic Hepatitis C	11
Gonorrhea	1
Group B Strep	3
Haemophilus influenza	1
Influenza A (2014-2015)	98
Influenza B (2014-2015)	51
Lyme Disease	23
Salmonellosis	3
Shigellosis	1
Strep pneumoniae	2
Syphilis	1

Communicable disease control, one of the core functions of Public Health, focuses on early identification of disease, prompt notification of the provider community, investigation of disease sources, and education to community members to prevent spread. With the threat of disease outbreaks, whether by natural spread of emerging pathogens such as H1N1 Flu or by human intent such as bio-terrorism, active surveillance has become an increasingly vital component of the communicable disease program.

Active surveillance necessitates a collaborative effort with health department personnel, hospital emergency department staff, school nurses, pharmacists, physicians and other partners. Active surveillance attempts to identify trends in medical system and pharmaceutical usage. This can include reports of increasing numbers of provider visits or higher rates of pain medication or antibiotic prescriptions. Staff also monitor for increases in similar chief complaints of emergency department patients as a strategy to identify clusters or outbreaks of illness quickly.

Passive surveillance whereby the practitioners and laboratories report designated illnesses such as salmonella, giardia, hepatitis and chlamydia to the Public Health office, is conducted throughout the year. Professional staff is on-call 24/7 to respond to, and investigate reports of communicable disease. The chart above illustrates the volume of investigations completed during the calendar year. In addition to those 118 cases designated as reportable illnesses by the New York State Department of Health, the staff investigated 21 non-reportable illnesses. This included reports of Lyme disease that didn't meet case definition and investigations of possible cases of tuberculosis, Hepatitis B and C, and Syphilis.

In addition to disease investigation work, the Communicable Disease Nurse and Health Educator work to keep health care providers and the public informed of infection control issues, illness prevention measures and the prevalence of disease in our community through a variety of venues including blast faxes, newsletters, website, and one-on-one education and community presentations.

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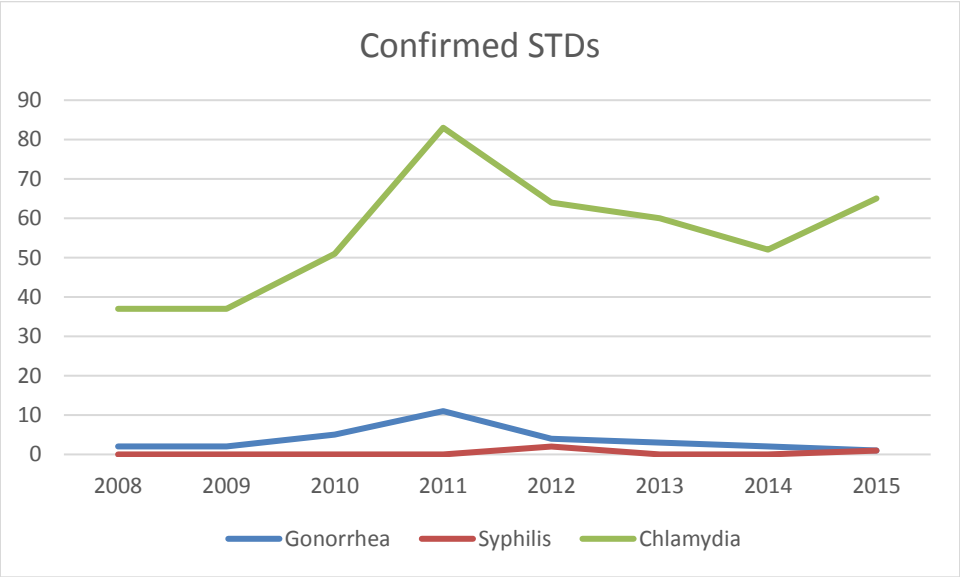
Sexually Transmitted Diseases

Diagnosis and treatment of Sexually Transmitted Diseases is a responsibility of each county health department in New York State. In lieu of operating an STD clinic, Yates County pays for the diagnosis and treatment of Sexually Transmitted Diseases through a contract with Finger Lakes Community Health. NYSDOH personnel perform follow-up of STD cases with assistance from Yates County Public Health staff.

Chlamydia is the most frequently reported sexually transmitted disease in the United States. Most often, Chlamydia occurs in adolescents and young adults who have new or multiple sex partners and who do not consistently use condoms for protection. In 2015, 65 cases of Chlamydia were reported in the county. Of those, 26% of cases were identified in 15-19 year olds and 63% in 20-29 year olds. Over 78% of cases reported were in females. Yates County Public Health continues to work with the staff at Finger Lakes Community Health and private physician practices to decrease the incidence of STDs, especially targeting education to teens and young adults. In 2015, both the S2AY Rural Health Network and Finger Lakes Sexual Health Coalition initiated programs to attempt to reduce the incidence of chlamydia in the Finger Lakes.



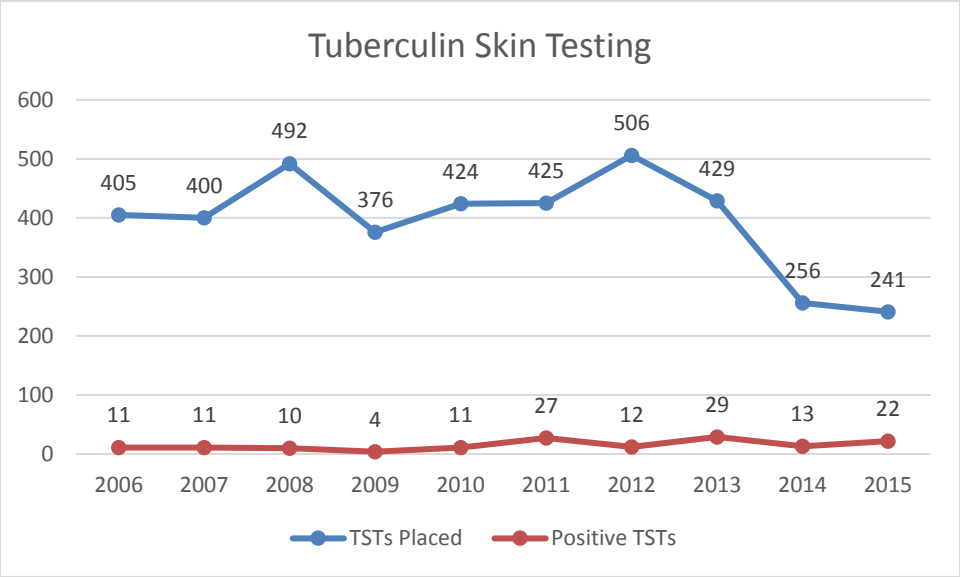
HIV/AIDS Program

Yates County Public Health no longer offers rapid HIV testing. Confidential HIV testing and counseling is available at Penn Yan Community Health or through any primary care provider office. Public Health continues to educate our community regarding the prevention of HIV, the importance of HIV testing, and where testing is available.

Tuberculosis Control Program

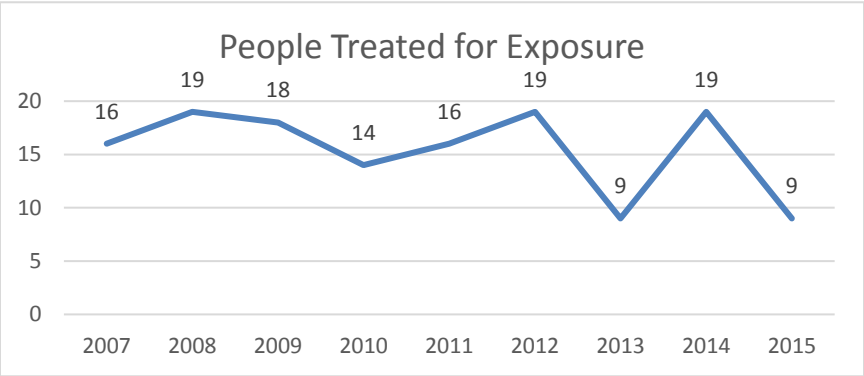
Targeted testing strategies are used to identify those at greatest risk of Tuberculosis Infection. This includes routine testing of inmates housed at the Yates County jail and health care workers. In 2015, 241 tuberculin skin tests were placed and read. Of those, 6 were identified as positive for TB infection. Appropriate antibiotic treatment which

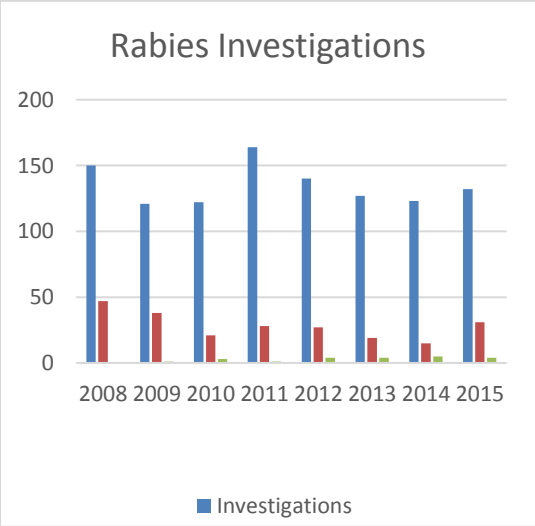
prevents the development of active tuberculosis disease is offered, and individuals who accept treatment are monitored monthly by Public Health staff. For the duration of their preventative treatment it is critical to monitor for clinical symptoms of active TB disease, complications from the treatment itself, and compliance with the treatment regimen. There were no new active TB cases identified in Yates County during 2015.



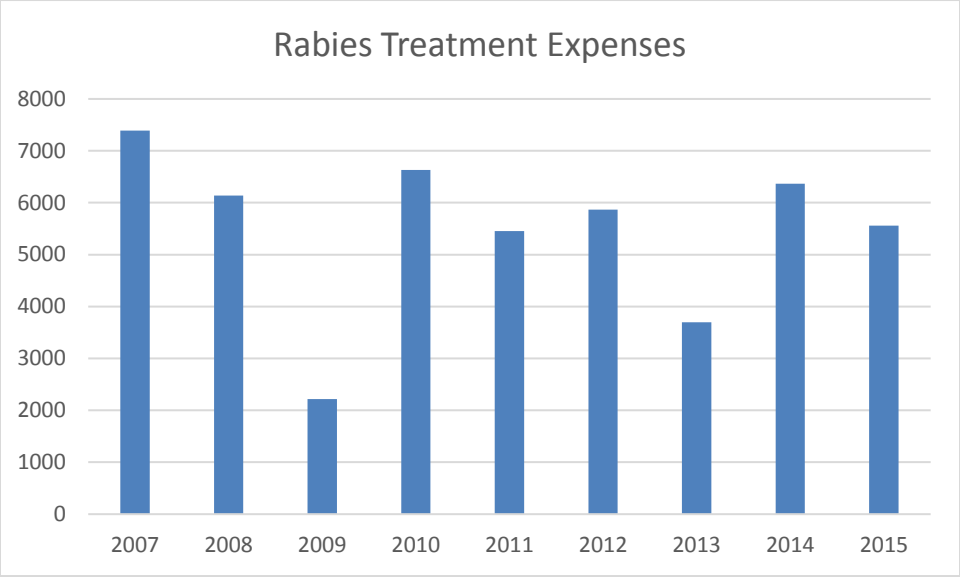
Rabies Control Program

Since the emergence of raccoon Rabies in Yates County in 1991, considerable staff time (including a 24-hour on-call system) has been devoted to investigating rabies-related incidents. Since rabies is a fatal disease it is critical to prevent cases of human rabies and to reduce the spread of disease in domesticated pets. All reports of human or pet exposure to a potentially rabid animal are promptly investigated by the public health staff. Rabies vaccination status of pets is verified, confinements or quarantines are ordered as appropriate, and when indicated, specimens are submitted for testing at the New York State Laboratory at Wadsworth.



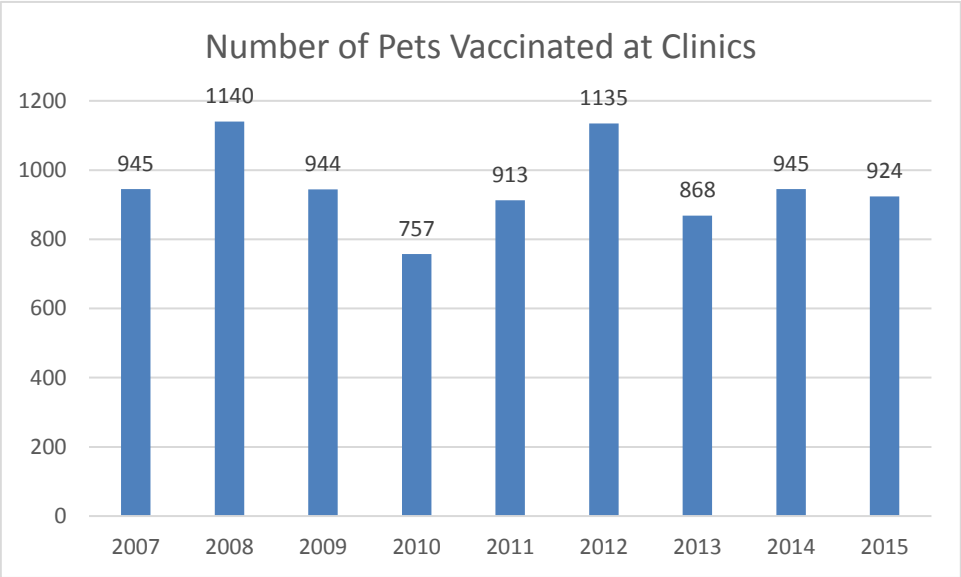


When rabies post-exposure prophylaxis (PEP) is indicated, humans exposed to the rabies virus are assisted in obtaining treatment at the local emergency department. To ensure that there is no barrier to treatment, all costs related to PEP that are not paid by insurance are covered by Yates County Public Health.



Thirty-one Rabies Specimens were sent for testing in 2015. Four specimens were positive for rabies, including three raccoons and one gray fox. Nine individuals were authorized to have PEP. Two were exposed to wildlife testing positive for rabies and seven were bitten by or exposed to animals that could not be captured for testing.

To ensure that cost of vaccine is not a barrier to pet owners keeping their animals protected, rabies clinics are held throughout the county. The vaccine is available at no cost to the pet owner. Donations are greatly appreciated and those received at the Rabies Clinics are used to purchase supplies for the next clinic. In 2015, a total of 924 dogs, cats and ferrets were vaccinated at the county sponsored rabies clinics. A total of 6 clinics were held at four sites (Penn Yan, Potter, Italy and Dundee).



Looking towards Quality Improvement in all program areas, staff explored processes which could be improved upon or implemented that would shorten the wait time for those attending rabies clinics; especially important during inclement weather. In 2015 the public was encouraged to electronically complete the demographic portion of the rabies pet certificate for each of their pets, bring it to the clinic. As more take advantage of this option, we are confident that there will be both savings in the wait time of attendees and their pets as well as a reduction in staff required at each clinic. To accommodate public need as well as safety; the March and November clinics were conducted on Saturday mornings rather than a week night.

Arthropod-borne Disease Surveillance and Control

Local health departments are responsible for surveillance, investigation and reporting of suspected zoonotic diseases (disease spread by animals to humans). Additionally, the local health department is responsible for increasing public awareness of arthropod-borne diseases such as West Nile Virus, Lyme disease, and Eastern Equine Encephalitis. Public Health conducted public education through the local media, newsletters, informational displays, the county website and Facebook pages. During 2015 a new initiative aimed at informing families regarding proper tick removal was piloted. Kits contained tweezers, alcohol pads, the NYSDOH Tick identification card and instructions on tick removal were distributed to 100 families through home visit nurses, provider practices and the local ED staff. Families that received the kits were surveyed regarding the usefulness of the kits. Due to the positive feedback received from families and providers, the initiative will continue during the spring and summer months of 2016, aiming to reach additional families. Objectives of the kits are not only early indentification and removal of ticks to prevent Lyme disease, but also to reduce emergency room usage for tick removal.

In addition to general community education steps are taken to educate the provider community by ensuring current treatment guidelines are distributed to physician offices.

In 2015, there were 23 Lyme disease investigations that met NYSDOH case definition criteria. Several other reports were investigated, but did not meet criteria. Additionally, local veterinarians reported seeing an increase in the number of pets diagnosed with Lyme disease.

Family Health

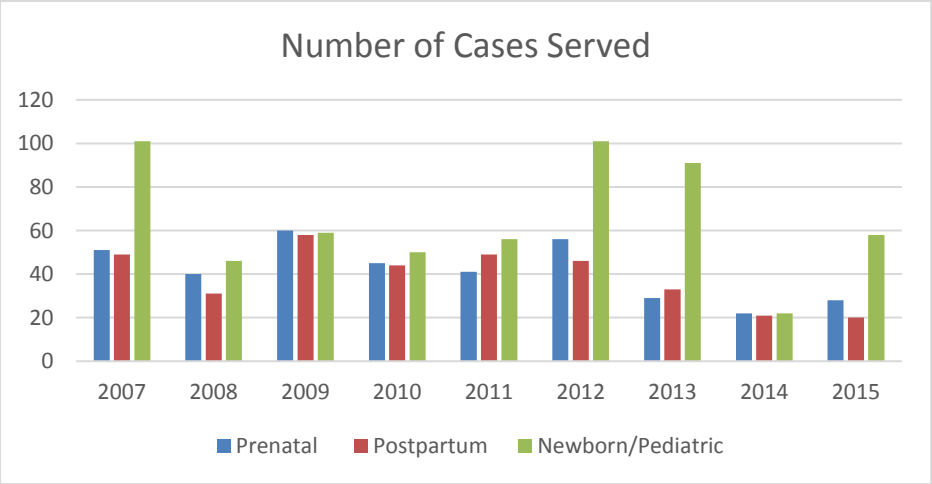
Maternal Child Health Program

Through home visits to pregnant and parenting families, the Maternal Child Health (MCH) Nurses work to improve prenatal and child health in conjunction with the medical community and other support agencies including WIC. The staff assists with access to care issues and completes Presumptive Medicaid enrollment for those eligible. Through education and support the nurses attempt to engage women and families in choosing good preventive health practices including proper nutrition, physical activity, dental care, tobacco/substance use cessation, domestic violence prevention and parenting.

All birth abstracts for infants born to mother's residing in Yates County are reviewed. Those identified as first born infants, infants born to teen mothers, infants born prematurely, mothers who are late care seekers or had no prenatal care, infants delivered in the home, mothers with notation of substance abuse during pregnancy, and infants born with birth defects are deemed higher risk and are contacted and offered a home visit by a nurse. During 2015, 49 mothers and infants were visited as a result of the birth abstract reviews. An additional 29 mothers and infants were visited as a result of other agency referrals or were current patients of the MCH Program referred to us by the birthing hospital. During these home visits the nurse provides education regarding Public Health services, growth & development, lead poisoning, immunizations, breastfeeding, infant safety, infant care, parenting and community resources.

Our MCH nurses became Certifiied Lactation Consultants. With this new area of expertise, Public Health plans to offer breastfeeding supportive services both in the home and the community setting.

During 2015, a total of 265 home visits were made to pregnant and parenting families.



Dental Health Education

Dental health and one's overall health condition are strongly linked. Much can be learned about a person's state of health by assessing the oral health condition. Former U.S. Surgeon General, David Satcher, stated that "You are not healthy without a healthy mouth". Since dental caries are the most common chronic disease of childhood,

they are often being called the “Silent Epidemic”. With dental care as the most common unmet health need of children, it is imperative that parents, providers, and Public Health focus on good dental health for all Yates children.

The Yates County Public Health Department “Health Counts” newsletter frequently draws the connection between dental health and various other health conditions through the monthly editions. On the national level, dental health is highlighted and celebrated each year through these health observances – National Children’s Dental Health month in February and National Dental Hygiene month in October. Yates County Public Health uses these recognized opportunities to reach out to our targeted populations in need. Teaching children healthy habits that include good nutrition, good hand hygiene; cough and sneeze etiquette; and good dental health habits at an early age leads to healthy habit routines that are beneficial throughout life. Reinforcing this education with take-home information to parents/guardians is also essential. Since prevention of disease is the optimal method for reaching healthy goals, learning healthy habits early in life provides the best opportunity for incorporating these skills into normal daily living.

Yates County Public Health actively participates in a regional Dental Steering Coalition that seeks best practices and grant funding to address the dental health needs of our communities. As other counties in our Finger Lakes region are challenged to find solutions to deteriorating dental health conditions of their populations, so is Yates County. Working together as a coalition we are better equipped to meet these challenges and find the best solutions. The Coalition has developed a listing of dental practices in the region that accept insurances like Blue Choice Option (BCO), Child Health Plus (CHP)/Healthplex & Fidelus/Dentaquest. This listing has been very useful to human service agencies that assist clients in finding dentists to care for their children within the area. Many families have to travel quite a distance to find dental care for their children, and if they have travel limitations, their problems are compounded. In addition to compiling the listing of dental practices, the coalition also seeks assistance with collecting dental kits comprised of toothbrushes, toothpaste, and floss to provide to area food pantries and the Living Well. A continuous supply of these items for necessary personal care is essential for all families in our County. As a result, these kits have been well received by needy families.

Currently the Dental Steering coalition is interested in reaching out to regional colleges to promote and encourage training for more dental professionals who may practice in the Finger Lakes region, thus providing greater opportunities for families to have their dental needs met within the area. Finger Lakes Health sponsors the New Vision Medical Careers Program for seniors in area high schools to learn “hands-on” skills relating to medical careers. Since this program already exists, there may be an opportunity for expansion to offerings in dental careers. This endeavor will need further outreach and assistance.

In 2015, Dr. Melinda Clark, a practicing pediatrician and Associate Professor of Pediatrics at the Albany Medical Center, brought a power point slide show to a dental steering coalition meeting to introduce a new concept for dental care within a pediatric medical practice. Her presentation was called “Oral Health and Fluoride Varnish in Primary Care”. The introduction of a fluoride application at a child’s medical visit would provide more children who do not routinely visit a dentist because they are “uninsured” with the opportunity to receive a preventative fluoride treatment that can save the integrity of primary teeth and help avert early childhood caries. After having

viewed her presentation and received a “fluoride varnish information tool kit”, the dental steering committee members are preparing to visit interested area health care provider offices to train staff on efficient fluoride varnish application techniques and simple insurance billing. This program may provide area families with much needed relief from early and lasting dental conditions that can plague children throughout their lives.

During winter months the Public Health Educator offers “healthy habit” lessons to youngsters in child care settings with the promise of fun, a take home message, and a toothbrush. The children love to practice their tooth brushing techniques on Ollie Z. Mutt, a model patient who demonstrates the “sit-stay” for each cleaning.

Chronic Disease Prevention

National Diabetes Prevention Program

Outreach efforts to providers and through public venues continue in order to secure enough participation in NDPP classes to begin a year-long intensive lifestyle change program with a group of committed participants. To date, the outreach methods have been to inform provider offices and the general public of this program and the benefits derived from the lifestyle changes made during the course of the weekly and monthly group activities. While the program has demonstrated success across the country in preventing type 2 diabetes in attendees, recruitment of community members interested in participating has been challenging. However, outreach and recruitment efforts will continue due to the potential community need and benefit from lifestyle changes that can show positive results.

Regional and Local Community Health Improvement Efforts

Yates County Public Health continued to work with partners to address the identified priorities of Obesity and Hypertension through the local coalition known as Choose Health Yates and four regional workgroups; Farm to Cafeteria, Worksite Wellness, Breastfeeding and Hypertension. The S2AY Rural Health Network coordinates the regional groups and also has taken the lead in securing additional grant funds to support efforts. Through Choose Health Yates Coalition, restaurant tool kits were developed and distributed to local businesses. The tool kits feature menu options that a restaurant can pick from in facilitating healthy choices by their patrons; such as

serving water with all meals, menu labeling of healthier choices and offering smaller portions. Survey feedback from restaurants and restaurant patrons has been positive for this initiative. The Worksite Wellness group also developed a tool kit for distribution to employers. The intent of the tool kit is to facilitate healthier employees through changes such as adoption of a healthy meeting policy or increasing healthy choices in vending machines. Providing employers with options for services offered to their employees has been an ongoing effort. More outreach to area employers continues.

Partnering with the Finger Lakes Health Systems Agency, the Hypertension Committee has been successful in expanding a hypertension registry previously available to Monroe County physicians only. Through the registry, provider practices receive biannual data showing the prevalence of uncontrolled hypertension for their patients and a comparison of their practice to others in the region. The local health department is then able to work with practices to explore practice level change as well as evaluate strategies to improve overall population hypertension control. Nationally it is estimated that 30% of Americans 18 and older have hypertension. For Yates County this equates to 5936 patients. Currently 54% of these patients are included in the registry. The control rate for these patients at mid-year was above 70%. The goal of this registry project is to move the overall Finger Lakes Control rate from the current 69% to 85% by the year 2020.

In February 2015, as a partner of the NYS Million Hearts Collaborative aimed to improve hypertension (HTN) and diabetes (DM) control, YCPH partnered with Penn Yan Community Health (PYCH) in formation of the Health Care Systems Learning Collaborative (HCSLC). Through the HCSLC, YCPH actively participated in monthly action period calls with the NYS DOH, Health Center Network New York (HCNNY) and PYCH, attended a face to face meeting with NYS collaborative members, and conducted face to face meetings at the PYCH office every 1-2 months to discuss and assist with quality improvement/systems level change measures that could be implemented in the practice to improve HTN and DM control and to efficiently identify patients with undiagnosed HTN, prediabetes and those at risk for DM and work in collaboration with this practice to offer or refer to evidence-based diabetes prevention and chronic disease self-management programs. This work continues to be ongoing and PYCH has reported success with decreasing their undiagnosed HTN rates and increasing their follow-up appointment rates.

Through the Farm to Cafeteria group, Cornell University conducted a presentation entitled Smarter Lunch Rooms. Efforts of the Breastfeeding Coalition have focused on increasing the number of worksites designated as breastfeeding friendly throughout the region and in establishing several Baby Café's to support those contemplating or currently breastfeeding their infants. In partnership with Child and Family resources, the Yates County Baby Café will officially open in early 2016.

Cancer Screening Partnership

In late 2013 the NYSDOH Cancer Services Program (CSP) Grant was awarded to Clifton Springs Hospital, which serves the counties of Ontario, Seneca and Yates. Yates County Public Health continues to actively collaborate with staff from Clifton Springs Hospital, to network and to plan further strategies for outreach to our medical providers and the community in order to increase cancer screenings of folks residing in our 3 – county area.

This valuable program is regularly promoted by YCPH staff through community events, media, and home visits. Yates County specifically, was able to "piggyback" onto existing events, such as health fairs, and table displays to help promote this program, and routinely disseminates CSP information and promotes cancer screenings during our monthly, regularly scheduled immunization and lead testing home visits geared primarily to our Mennonite population.

YCPH will continue to promote the NYS Cancer Services Program and the importance of cancer screening to our residents, and plan to take part in further outreach events in collaboration with Clifton Springs Hospital and our partner counties. We actively promote the CSP in the media and in the form of a Facebook page for YCPH, and will be promoting any upcoming cancer screening events on that as well.

Environmental Health

Injury Prevention

Since the health and safety of our local residents and workers is paramount, special attention to prevention and interventions is crucial. Injuries of various types are high on the list of causes for Emergency Department visits each year for young children and older adults. It is imperative we learn how to prevent injuries from occurring by taking steps to protect ourselves. Each summer the area summer recreation programs sponsored by county towns and the Yates County Youth Bureau invite agencies to present programming on various topics of interest to the children attending. Summer safety incorporates several topics such as safe bicycling, water safety, and environmental education including programming about rabies, Lyme Disease, West Nile virus, and poisonous plants. This programming is interactive to encourage and stimulate the children's involvement and interest.

Many parents and grandparents are concerned about their child's safety in a vehicle. Yates County Child Safety Seat Technicians provided safety checks by appointment at the Yates County Sheriff's Office or at their home. Two child car seat inspection events were conducted in 2015; Both in April with an educational table at the County Building during Public Health Week (10 families) and the second at the Branchport Fire House during Recruit New York (7 families with 6 seats issued). In total, 75 requests with 108 child car seats were inspected and 75 new seats were issued during 2015. Nationwide, technicians inspecting seats have found fewer than 25%

installed or used properly by the parents; highlighting the importance of in-person training and inspection activities by trained technicians.

	Seats Checked	Seats Issued	Seats Installed
January	6	6	4
February	7	5	0
March	5	4	3
April	8	6	3
May	11	4	2
Educational Events	7	5	5
June	5	4	1
July	9	5	0
August	11	7	6
September	10	10	6
October	17	12	4
November	6	5	1
December	14	7	2
Total	**114**	**80**	**37**

Yates County Public Health's "Health Counts" newsletter topics stress the importance of prevention in the form of car seat safety, bicycle safety, fire safety, water safety, fireworks safety, pet and animal safety, and other safety measures needed in all our summer activities in the area.

Fall injury prevention is always a topical issue in September during Falls Prevention Day. Area businesses were encouraged to highlight products they sold that could provide homeowners with a product that offers safer alternatives to getting a job done safely, which can help avoid injuries from falls. Health care providers were encouraged to consult with their patients with regard to practicing fall prevention utilizing the national "STEADI" program and prescription management. The distribution of night lights to senior citizens who needed additional safety aides in their homes was well received at senior citizen residential living centers and meal programs. Presentations regarding causes of fall injuries were provided to adults at a senior citizen dinner at St. Michael's Hall and St. Mark's Terrace in Penn Yan and Dundee.

Over the last seven years the Farm Safety in our Schools program has been teaching awareness in the area Mennonite Schools. This joint effort between the Mennonite Community, New York Center for Agricultural Medicine and Health (NYCAMH), Emergency Management and Public Health continues to teach best practices, provide support and maintains a good working relationship to prevent injuries and fatalities on our farms. To date over 2000 individuals have attended the sessions since the program's inception in 2009. This safety program continues in a three year rotation reaching a total of 36 schools in the county.

In 2014, Yates County Public Health became an approved Opiate Overdose Prevention Program (OOPP) through the New York State Department of Health. With the increased use of heroin in Yates County and overdoses related to opiates, Public Health, Yates County Sherriff Department and Penn Yan Police Department

collaborated together in getting over 84 officers and other law enforcement personnel trained to carry Naloxone (Narcan). Naloxone is a medication that reverses opiate overdoses. In 2015, Naloxone was administered 9 times by law enforcement with 8/9 administrations being successful overdose reversals.

Sara Christensen, Supervising Public Health Nurse expanded the OOPP Program in the fall of 2015 by offering Community Narcan Trainings as it was evident with the number of overdoses and deaths related to heroin continued to rise, that community members and family members wanted to be trained on Narcan Administration. Public Health held four community trainings on the administration of Narcan and recognizing signs and symptoms of an opiate overdose with a total of 102 community members trained.

YCPH continued to be actively engaged in the Yates Substance Abuse Coalition (YSAC) and its efforts in addressing the issue of substance abuse; in particular heroin. YCPH assisted in conducting Community Forums for the Dundee Community in January and then again in December, as well as a student assembly for 9th through 12th graders on December 21st. Staff have worked with community partners to increase public awareness of the issue and to improve access to and knowledge of treatment resources. Availability of detox and treatment continues to be a need voiced by the community.

Lead Poisoning Prevention Program

Young children may be exposed to lead poisoning when they put paint, soil, dust, or other materials containing lead into their mouths. All children need to be tested for blood lead levels at one and two years of age per NYS Public Health Law. These children face greater risk since they often put objects in their mouths and their bodies absorb lead more easily than adults.

All children with lead levels above 10mcg/dl are case managed by the Lead Program Case Manager. Re-testing usually occurs minimally every three-four months until test results show a blood lead level result under 10mcg/dl or two blood lead levels below 15mcg/dl for at least six consecutive months.

- Cases with blood lead levels 10-14mcg/dl receive a letter and educational materials. A home visit is made if the family needs further lead poisoning prevention counseling.

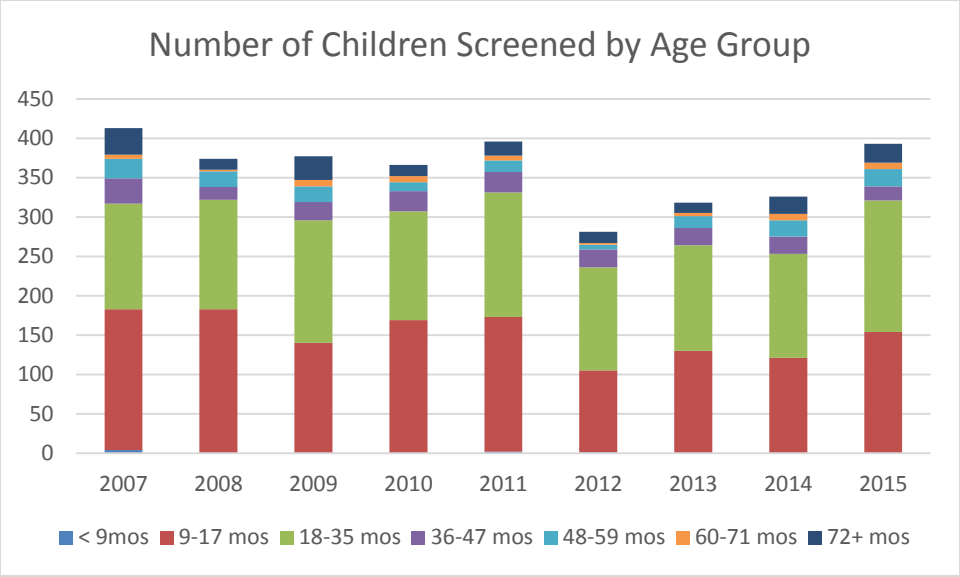
- Cases with blood lead levels of 15mcg/dl or greater are visited by the Lead Program Case Manager to assess risks and provide one-on-one counseling, provide lead prevention education, and educate the parent on when the child's next lead test is due.

In 2009, changes were made to the New York State Public Health Law related to lead level follow-up. The law lowered the blood lead level from 20mcg/dl to 15 mcg/dl upon which a home visit is also made by a New York State Environmental Lead Investigator. The investigators provide environmental lead testing and assist families with education on abatement procedures.

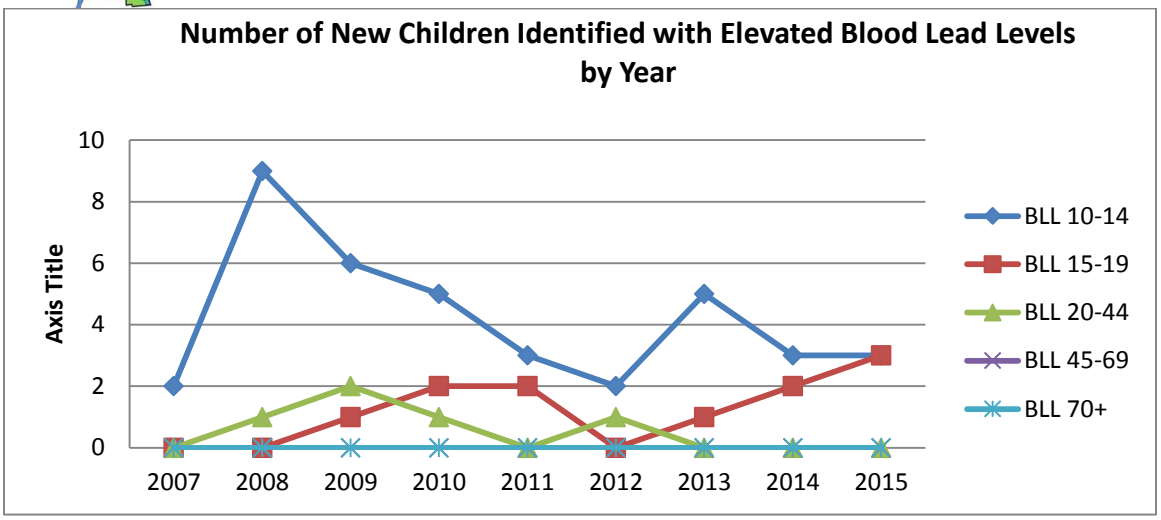
In 2015, three children were enrolled in case management for blood levels between 10-14mcg/dl and three children in case management for a lead level of 15mcg/dl or greater.

Exposure to lead can cause problems with a child's growth, behavior, and ability to learn. Yates County Public Health staff work with our Yates County Medical Providers to assure that all parents are informed about the need to prevent exposure in their children to sources of lead and to have their children tested at both ages of one year and again at two years. As a reminder to parents in Yates County to have their child's lead level tested, a birthday card was sent to all one and two year olds. Lead testing was offered by Public Health staff through home visits, immunization clinics and office visits. Fees are based on a sliding fee scale and for most families the testing is free.

In 2012, Yates County Public Health purchased a Lead Care II machine which allows rapid blood lead testing with results of the test provided to the parent at the time of testing. The Lead Program Case Manager also works with providers to assist in practice improvements that will result in increased lead testing rates.



In 2015, a total of 395 blood lead tests were performed on Yates County children. Of these initial lead tests, 68% were done by the child's primary care provider and the rest (126) were completed by Public Health Staff.



Blood Lead Testing for Yates County Birth Cohort Year 2012.

In 2012, there were 330 births in Yates County. Of those, 30 children have moved out of the county or passed away after birth. The chart below illustrates Yates County Lead Testing rates for our one and two year olds. Having a fairly large Mennonite population that often do not seek preventive care including having their children tested for lead poisoning affects the overall lead testing rates for our county.

Number of Children tested at 1 year	**125**	**42%**
Number of Children tested at 2 years	**117**	**39%**
Number of Children tested at 1 & 2 years	**74**	**25%**
Number of Children with at least one lead test by 35 months	**168**	**56%**
Percentage of children tested at 1 year (less Mennonites with no lead test)		**56%**
Percentage of children tested at 2 years (less Mennonites with no lead test)		**52%**
Percentage of children tested at 1 & 2 years (less Mennonites with no lead test)		**33%**
Percentage of children with at least one lead test by 35 months (less Mennonites with no lead test)		**75%**

As you can see in the chart above, our lead testing rates are 10-15% higher when the Mennonite children with no history of a lead test are taken out of the equation. Our Mennonite community is educated by our Lead Program Case Manager and Public Health Nurses through immunization home clinic visits and maternal child health visits about the risk of lead poisoning especially for the families who live in older homes. Mennonites often renovate these older homes which increases the risk of the child to be exposed to lead paint and dust if preventative measures are not taken by the parent.

The Lead Program Case Manager and Health Educator are members of The Finger Lakes Coalition to Stop Lead Poisoning. The coalition was established to increase awareness, and promote the prevention and early detection of lead poisoning in our communities. Through the work of the coalition, they developed an initiative to send letters to parents of children who have a lead test result of 5-9mcg/dl. This lead test result is a level of concern and the goal is to not have the lead level increase any further. Lead Poisoning Prevention (LPP) Educational information is included in the letter for the parent to refer to and the recommendation of a retest in 3-6 months. Public Health tracks the retesting rates of children with blood levels between 5-9mcg/dl. To date, all repeat lead test results were lower than their initial test.

Year	# of children with an initial lead level of 5-9.9mcg/dl	% of children who had a repeat lead test within 6 months
2013	25	60%
2014	18	72%
2015	16	Data pending

In October 2015, YCPH utilized various outreach efforts to disseminate in-person printed and electronic information to the public. Two new initiatives launched in 2015 were a partnership with the YC Sherriff's Office to provide LPP information to families that receive car seat safety inspections during already planned events, and collaborating with local MD offices around National LPP Week in which offices harbored the YCPH LPP display in their waiting areas for 2 week intervals. The displays at the physician offices included vivid color photos of lead sources and a "lead hazards house model". Both efforts proved to be successful based on materials taken by the public and will be utilized again in 2016.

Environmental Health Services thru NYSDOH District Office

GENEVA DISTRICT OFFICE 624 Pre-Emption Road Geneva, NY 14456
315-789-3030 (phone) 315-781-0831 (fax) gedo@health.state.ny.us

The Geneva District Office is responsible for protecting public health and safety through the delivery of core environmental health programs and services and through the enforcement of environmental health regulations in Ontario, Wayne and Yates Counties. Duties and responsibilities include, but are not limited to:

- **Issuing permits to the following types of regulated facilities:**
  - Food Service Establishments
  - Temporary/Mobile Food Service Establishments
  - Children's Camps
  - Temporary Residences (Hotels, Motels, Cabins, etc.)

- Campgrounds
- Mobile Home Parks
- Migrant Farmworker Housing
- Agricultural Fairgrounds
- Public Swimming Pool and Bathing Beaches
- Recreational Aquatic Spray grounds
- Tanning Facilities

- **Conducting Plan Reviews and Approvals for:**
  - All Regulated Facilities
  - Realty Subdivisions
  - Alternative Residential On-site Wastewater Treatment Systems
  - Public Water Systems

- **Conducting Inspections/Sanitary Surveys/Complaint Investigations at:**
  - All Regulated Facilities
  - Public Water Systems at Agriculture & Markets licensed facilities
  - Public Water Systems at licensed Day Care facilities

- **Conducting Investigations of:**
  - Drownings at Regulated Facilities
  - Food and Waterborne Illness Outbreaks
  - Injuries and Illness Outbreaks at Children's Camps
  - Environmental Conditions linked to children with elevated blood lead levels

- **Oversight of Tobacco Prevention Programs**
  - ATUPA – Adolescent Tobacco Use Prevention Act
  - CIAA – Clean Indoor Air Act

- **Providing emergency response at incidents presenting biological, chemical or radiological exposures or physical injury hazards**
- **Distribution and enforcement of the Commissioner of Health's Summary Orders (i.e. Bath Salts, Synthetic Cannibinoids, etc.)**

New York State Department of Health Geneva District Office Contribution to Yates County Public Health Department 2015 Annual Report

In 1921 legislation was enacted that empowered New York State counties to create county health districts. The purpose of a county health district was to consolidate local authority for the oversight of public health work at the county level rather than having public health activities dispersed to the constituent county cities, towns and villages. Counties were not required to create such health districts and as time passed it became evident that that many rural counties (including Yates) that had not formed a county health district would face increasing logistical and financial challenges that coincided with expanding public health needs and requirements. County health departments that operate in counties without county health districts are known as “partial services” county health departments.

As a matter of policy, not law; the New York State Department of Health (NYSDOH) addressed the need to preserve a baseline of public health in partial services counties by creating District Offices. Currently nine (9) district offices operate in New York State, and in Yates County it is the NYSDOH Geneva District Office (GDO) that provides core environmental health programs and services to County residents and visitors. In partnership with Yates County Public Health (YCPH) and other state and local agencies, the GDO enforces environmental health regulations and oversees a variety of programs that are designed to protect public health and safety. The attached pdf document provides a summary of the GDO's duties and responsibilities and of the services that are provided to Yates and to Ontario and Wayne – the other two counties that are located within the GDO's jurisdiction.

Highlights of the GDO's activities in Yates County during the 2015 calendar year included the following:

- Conducted 139 inspections at the County's approximately 115 food service operations.
- Conducted 2 inspections at the County's 2 migrant farmworker housing facilities.
- Conducted 4 inspections at the County's 6 tanning facilities.
- Conducted 20 student aide compliance visits to tobacco retailers to ensure compliance with the Adolescent Tobacco Use Prevention Act (ATUPA).
- Work with YCPH to conduct lead based paint risk assessments at 3 private Yates County residences in response to referrals of children with elevated blood lead levels as necessary.
- Investigated 7 complaints alleging sanitary code violations at food service establishments and a mobile home park.
- Issued 8 formal enforcement actions (Administrative Tribunal Notice of Hearings) to address violations of the NYS Sanitary Code at regulated facilities.
- Conducted 7 sanitary surveys (enhanced inspections) at community water systems and 39 sanitary surveys at regulated facilities with onsite water supplies.
- Assisted Yates County public water supplies in meeting monitoring (sampling) requirements for Stage 2 Disinfection ByProducts. (Disinfection ByProducts are chemical compounds which may pose health risks. They are formed when the chlorine disinfectant that is used to treat drinking water reacts with naturally-occurring materials that are already present in the water.)

- Currently 1 system (Dresden Village) is in violation of the Disinfection ByProducts regulation in that the Total Trihalomethane maximum contaminant level has been exceeded. Public notice to this effect is being provided to affected customers on a quarterly basis. The GDO is working with the water supply to determine the best solution to reduce the level of disinfection byproducts and achieve compliance.

From January 1, 2013 through December 31, 2015 the Geneva District Office issued a total of one (1) Administrative Tribunal Notices of Hearing (enforcement actions) to the owners of tobacco retail outlets citing the illegal sale of tobacco products to individuals under eighteen years of age (2013 = 0; 2014 = 0; 2015 = 1). In that case the Department's charges were sustained and a monetary penalty was imposed along with one or two points (depending on whether or not the person who committed the violation held a certificate of completion from a State-certified tobacco sales training program) was assigned to the dealer's record.

From January 1, 2013 through December 31, 2015 the Geneva District Office cited no owner of a tobacco retail outlet for the illegal sale of tobacco products to an individual under eighteen year of age for the second time within the above three year period.

From January 1, 2013 through December 31, 2015 the Geneva District Office issued a total of eight (8) formal enforcement actions (Administrative Tribunal Notice of Hearing) to the operators of six (6) public water supplies for failure to submit monthly water system operation reports within required timeframes (2013 = 2; 2014 = 2; 2015 = 4) .

Prepared by
Nicholas J. Rich
District Director
NYSDH – Geneva District Office
February 26, 2016

Health Education and Community Involvement

All Public Health staff members contribute in the delivery of health messages to our stakeholders and are ambassadors of public health; our mission and vision. Working as a team, we demonstrate the important public health messages through our actions and conversations. As in prior years, every Public Health staff member realized the vital importance of influenza vaccine protection and herd immunity by choosing to have the flu vaccine. Staff contribute to their community by serving on a number of advisory boards. These include the TB and Health Association, Inc., Finger Lakes Visiting Nurse Service Professional Advisory Committee, Community Services Board, Head Start Health Services Advisory Committee, Finger Lakes Health Community Advisory Committee, Yates County Court Children's Center, RPCN Advisory Council, Keuka Housing Council Board of Directors, and the Lifetime Care Board of Directors.

In 2015, our efforts to reach all county populations with public health messages included strategies that covered a range of health and safety concerns, such as:

- Communicable disease prevention
- Arthropod diseases/prevention/control
- Zoonotic diseases
- Cancer prevention/access to screenings
- Emergency planning
- Nutrition
- Domestic violence prevention
- Infection control
- Summer, Food and Water safety
- Chronic disease/prevention/detection/control
- Lead Poisoning Prevention
- Healthy living & healthy habits
- Dental health
- Immunizations
- Diet &
- Physical activity
- Farm Safety
- Child Passenger Seat Safety
- Substance Use Disorders

The "*Health Counts*" newsletter is a monthly publication that features timely health information and announcements pertinent to our County population. This publication is distributed to area businesses, agencies, county workers, and individuals by email, a county website link, and hard copy. More than 40 employers and

several hundred individuals are the recipients of this newsletter. Additionally, the Public Health website provides health information, announcements of upcoming events, alerts, available services, links to sites like the Centers for Disease Control and Prevention, New York State Department of Health, and the Environmental Protection Agency. Throughout the year, articles, press releases, public service announcements, and advertisements are placed in local media sources including The Chronicle Express, The Observer, WFLR radio, WYLF radio, WQKA radio, the Finger Lakes Times, the Daily Messenger, the Lake to Lake Bulletin, Yates Office for the Aging newsletter, and the Mennonite mailer called "The Flame".

Understanding the need to expand our reach to the community beyond traditional venues of print and radio, the Public Health Media committee launched the first posting on the Yates County Facebook page in February 2015. This new media outreach method has been quite successful in outreach efforts to members of our community.

Through networking and collaborative efforts, Yates County Public Health reaches out to all populations within the County. The Public Health Educator routinely participates on various committees and coalitions to address the needs of our diverse population. Some of these groups include: the Tobacco Action Coalition of the Finger Lakes, the Fairy Tale Festival committee, Yates County Public Health website committee, Yates County Public Health tool kit committee, S2AY Rural Health Network Public Health Educator team, Yates Substance Abuse Coalition, Choose Health Yates Coalition, HIV/STD Hepatitis A/B/C Coalition, Finger Lakes Sexual Health Coalition, Finger Lakes Lead Poisoning Prevention Coalition, Public Health Core Team Emergency Planning committee, Dental Steering committee, Cancer Services committee, Strategic Planning committee, Health Planning Council, Girls on the Run committee, Workplace Wellness Consortium, the Yates County Worksite Wellness Planning committee, Living Healthy Coalition, and Farm-to-Cafeteria Consortium. Other Public Health staff members attend meetings such as the Breastfeeding Coalition, Regional Early Childhood Coalition, Finger Lakes Immunization Coalition, Drunk and Impaired Victims Impact Panel Task Force, and Tier 1 and Tier II of the Coordinated Children's Services Initiative.

Current health information is vital to our Public Health outreach. Yates County Public Health consistently receives health information updates from New York State Department of Health, the S2AY Rural Health Network, area health care providers, school nurses, area coalitions, Centers for Disease Control and Prevention, and NYSACHO. Staff members also continue to update their knowledge of health-related topics by attending trainings, viewing webinars, participating in workshops and in-services through computer-accessed sources, teleconferences, or at regional conference sites.

Various community events provide opportunities for Public Health staff to engage residents in discussions on pertinent health issues. Additionally, face to face interactions occur routinely throughout the year at Maternal/Child Health and immunization home visits, rabies clinics, and immunization clinics, Pre-Kindergarten school registrations, the Yates County Fair, the Dundee Scottish Festival, the Penn Yan Sidewalk Sale, legislative meetings/committee meetings, health fairs, area parades, festivals, Our Town RoCKS meetings, service club organizations, summer recreation programs, school open house events, school classroom presentations, area

agency meetings, food pantries, congregate meal sites, local farmers' markets, town offices, area businesses, day care centers, fire departments, and local libraries.

Emergency Preparedness and Response

Yates County Public Health (YCPH) continues to plan for potential biological, chemical, or radiological terrorist events as well as naturally occurring large-scale communicable disease outbreaks or natural disasters.

The work of the YCPH Emergency Preparedness and Response is overseen by the Health-related Emergency Operations Planning (HEOP) Task Force composed of representatives from many partner community organizations and agencies. YCPH Emergency Preparedness Core Team regularly assists in decision making and action taking relative to Emergency Planning and Response.

The *YCPH Emergency Preparedness and Response (PHEPR) Plan* is the written plan used as the guide to preparedness and response activities. This plan and its attachments were updated this year as the need for changes were identified from exercises and guidelines.

Focus activities in 2015 included:

- Continued to follow the developments in the Ebola Outbreak situation. Following NYSDOH requirements, developed and facilitated monthly department Ebola exercises and staff education on the Ebola situation and appropriate use of Personsal Protective Equipment (PPE). With Ebola Grant funding YCPH purchased additional staff PPEs.
- Developed and facilitated exercises to test our existing emergency response plans.
    - A full scale exercise on Medical Countermeasures (MCM) Point of Dispensing (POD) for the public at Dundee Central School was held April 27th with large community support. Planning this exercise included sharing information with several community partners working with special needs populations. The exercise was created to test the ability to successfully distribute MCM to 244 persons in one hour. After 90 minutes of the exercise we reached 214 in one hour. As a result of this exercise and the available staff, volunteers and equipment a decsion was made to reduce our plans from providing two Open PODs to one Open POD in the county. The venue for that Open POD will be Penn Yan Academy.

- A table top exercise with YCPH staff was conducted as part of WRECK-IT 2015, a regional exercise program addressing adverse weather conditions. YCPH staff moved to an alternate site of operations and tested its Continuity of Operations Plan. The plan was updated and the roles of staff members were reinforced.

- Participated in NYSDOH sponsored tabletop exercises addressing scenarios on Ebola Outbreak, Disaster Burns, Ice Storms and Volunteer Response. Participated in Yates County wide discussions on response to adverse weather conditions.
- Continued to maintain and encourage new Push Closed POD Plans with area organizations. Increasing the numbers of Medical Countermeasures being dispensed at Push Closed PODs decreases the numbers of persons needing to attend an Pull Open POD. At the end of the year we have Closed POD plans with twelve organizations. Closed POD plans are in development at Keuka College, St. Mark's Terraces, Eastview Veternary Clinic, Yates County Workforce and Lifetime Care.
- Initiated required notification drills quarterly for both the YCPH Emergency Response Team members and the Yates County Strategic National Stockpile Planning and Staging Site Leads through the NYSDOH Health Commerce System (HCS) Intergrated Health Alerting Network System (IHANS). Participated in NYSDOH initiated drills throughout the year.
- Provided multiple educational programs throughout the county increasing awareness of YCPH emergency preparedness and reinforcing community trust. Emphasis continues toward personal emergency preparedness. Multiple displays with appropriate handouts were provided at all the county banks and a Lightening Preparedness billboard was placed in Dundee. Participation in the annual Conservation Days provided preparedness education to middle school students. YCPH Emergency Preparedness information continues to be created and distributed throughout the department, to volunteers and on the YCPH website.

- Continued working to maintain volunteers in the Yates County Public Health Medical Reserve Corps (MRC). YCPH was notified that federal funding for the program has been eliminated. There are currently approximately 90 dedicated medical and non medical MRC volunteers who are willing to help YCPH. MRC volunteeers were essential to the success of our full scale MCM POD Exercise. The volunteers also assisted in staffing the locally provided rabies clinics, participated in the personal emergency preparedness displays and education of the public as mentioned above.
- Participated with national, state, regional and local agencies on networking and training programs maintaining awareness of issues related to emergencies and appropriate action.
- Initiated work with YCPH in developing Public Health Accreditation documentation relative to Public Health Emergency Preparedness and Response.

Yates County Public Health Emergency Planning continues to liaison with and to participate in planning with local health care workers, community agencies and emergency providers, as well as regional and state networks. We also analyze and interpret local, regional and state public health- based data. All required national, state and local directives relative to emergency preparedness and response are completed and reported as applicable.

Emergency Medical Services Coordination

The EMS Coordinator is a shared position between Public Health and Emergency Management. The activities vary from EMS Coordination, Injury Prevention, Emergency Preparedness and Emergency Response. Those activities are described in other parts of the Public Health and the Emergency Management Annual Reports.

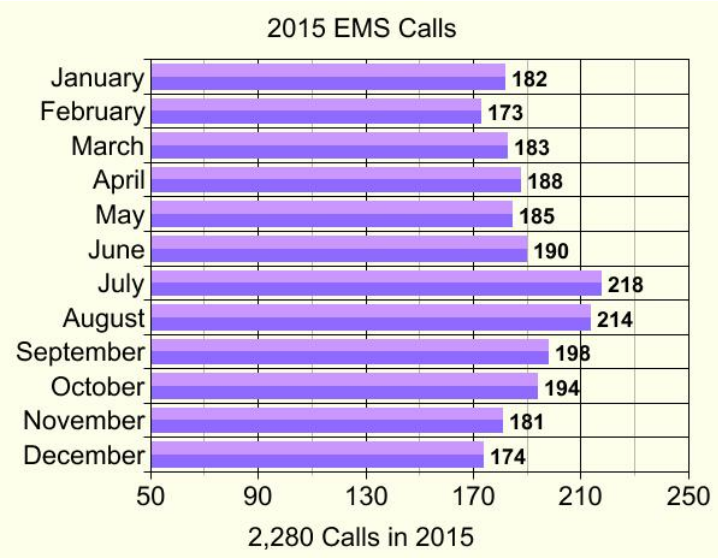
Training

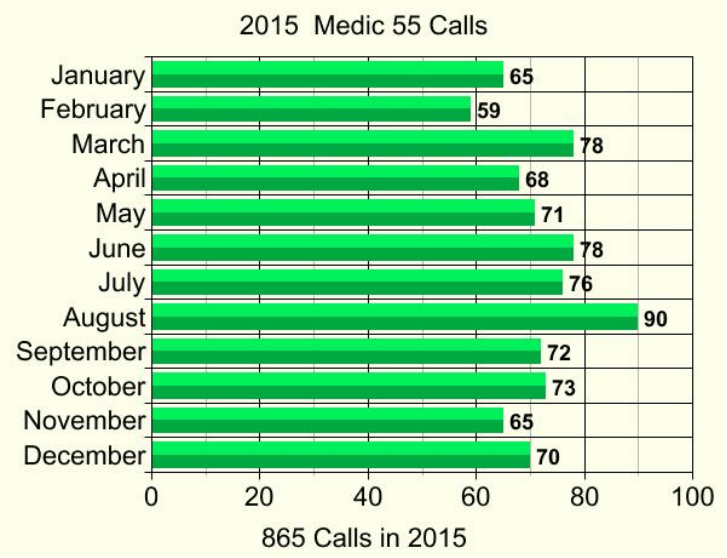
The Yates County Basic Life Support (BLS) Training Center provided specialized training which included Blood borne Pathogens, CPR, AED, and Certified First Responder and Emergency Medical Technician to EMS providers and community residents in the county. This past year new Firefighter I requirements were update to include CPR and First Aid. NIMs 100, 700 and 200 were offered throughout the year in order to continue compliance in ambulance corps, fire departments, and local town and village officials. One of the goals for 2016 is to train new EMS instructors to teach Certified First Responder (CFR) and Emergency Medical Technician (EMT) classes.

EMS Dispatched Calls

Yates County E-911 Dispatch Center provided 2015 EMS Statistics. EMS transporting ambulances are primarily volunteer agencies with a total of 2280 Basic Life Support (BLS) dispatched calls and over 865 Advanced Life Support (ALS) dispatched calls. The ambulance corps that have territory in Yates County are Dundee Emergency Squad, Middlesex Valley Volunteer Ambulance (MVVA), and Penn Yan Area Volunteer Ambulance Corps, Inc (PYAVAC). Naples Ambulance and Stanley-Hall-Gorham Ambulance out of Ontario County and Wayne Ambulance out of Steuben County. Advance Life Support (ALS) fly cars like Medic 55 from Finger Lakes Health or ambulances from Schuyler Ambulance out of Watkins Glen and Finger Lakes Ambulance out of Clifton Springs bring a higher level of pre-hospital care to the community. Many of these calls had additional assistance from the Fire Department First Responders which can be on scene much quicker due to distance than

an ambulance. Fire Departments that have Department of Health approved First Responders are Bellona, Benton, Branchport, Dresden, Himrod, Middlesex, Potter and Rushville. Penn Yan Fire respond to certain types of incidents instead of all calls due to the large volume of ambulance calls in the district. Air Medical Helicopters was requested to standby 70 times and responded 48 times into Yates County for major trauma, strokes, and major heart attacks. Yates County has over 150 EMS providers that volunteer as members in fire departments and ambulance corps keeping up with trainings and participating in EMS advisories, drills and other meetings. Recruitment and retention of these volunteers are important aspects of the EMS Coordinator's Office in order to continue excellent EMS care to Yates County residents and visitors.





Special Children's Services

Children with Special Health Care Needs

Families with children birth to 21 years of age, who have or are suspected of having a serious or chronic physical, developmental, behavioral or emotional condition which will require health or related services of a type or amount beyond that required by a typical child are eligible for the Children with Special Health Care Needs Program (CSHCN). Staff assist families by making referrals to available resources that can assist the families in meeting the needs of their child.

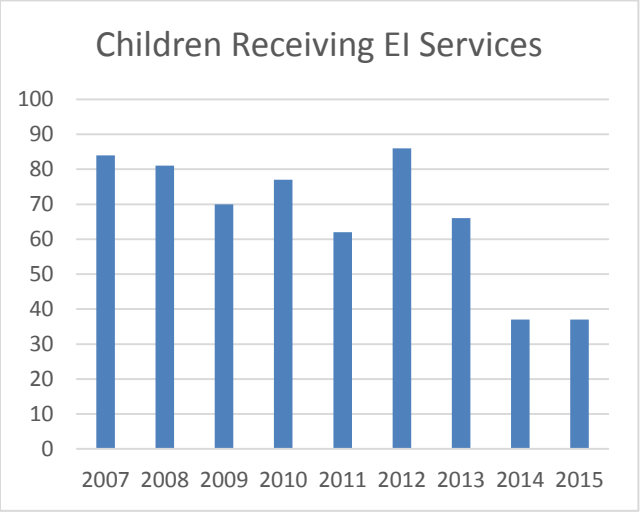
In 2015, assistance was provided to 5 families. Examples of assistance provided include: referral to TCM for assistance with applying for SSI, referral to Arc of Yates for Medicaid Service Coordination or HCBS waiver. One child continued in the Physically Handicapped Children's Program for completion of orthodontia treatment plan.

Child Find

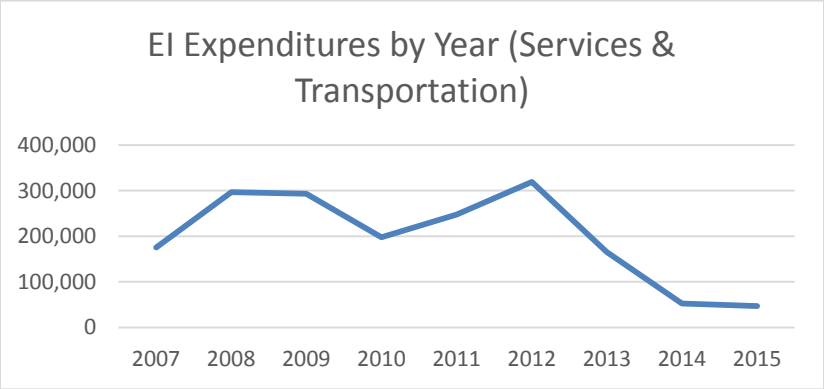
Child Find is a state-funded program to track infants 0-3 years of age who are at high risk for physical or developmental disabilities. The main focus of Child Find is to ensure children have a health care provider, have health insurance, are receiving ongoing developmental screening from their primary health care provider, and are referred to Early Intervention for a full evaluation if needed. During 2014, five children were enrolled in Child Find. In addition to children enrolled in Child Find, 105 infants and toddlers received home visits for health guidance by a maternal child health nurse during which time parents received education and information regarding child development and accessing Special Children's Services (i.e. Child Find, Early Intervention, and PreSchool Services). Two hundred twenty five new mothers received a congratulatory letter and a packet of information about infant development and services available to their newborn including through Special Children's Services.

Early Intervention Program and Preschool Special Education Program

Yates County Public Health administers the **Early Intervention Program (EI)** for children ages 0-3 with developmental delays. Eligibility is determined, per New York State Department of Health regulations through a multidisciplinary evaluation. Children who show significant delay in cognitive, motor, communication, social/emotional or self-help skills may receive services appropriate to remediate these delays at no cost to the family. Services are to be provided in the setting which is appropriate for the individual child. This includes home, community or center-based settings. Services available through these programs include Special Education, Speech, Physical and Occupational Therapies, Counseling, Respite, Nursing, Transportation and Service Coordination.



In 2015, 36 new children were referred to the EI Program. Of these, 16 had a multidisciplinary evaluation and were found to be ineligible to receive services, 3 either refused an evaluation or did not respond to contact attempts made. The remaining 17 children were found eligible for services and an IFSP was developed.



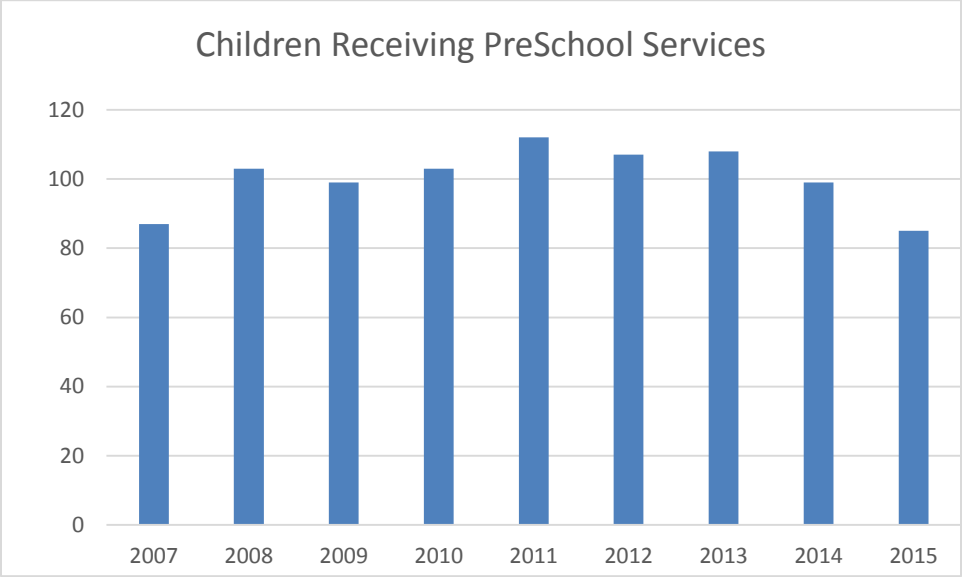
2015 EI:
Revenue: $30,628.00
Expenses: $47,071.62
Net Reimbursement for EI Services: 65.066%

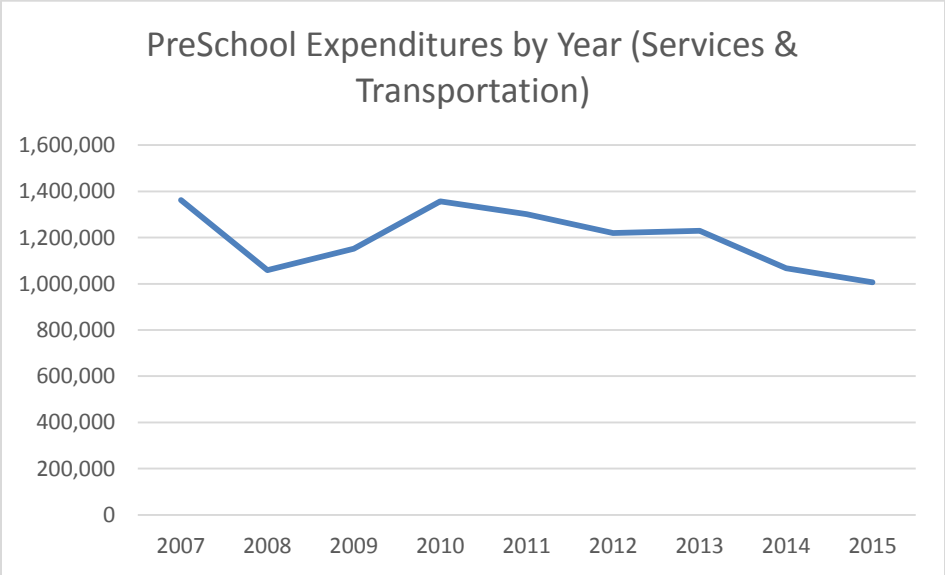
Prior to April 2013 Municipalities were responsible for paying providers for services rendered and then seeking reimbursement by billing the expenses to insurance and Medicaid. Expenses not paid by insurance or Medicaid were then reimbursed to the municipality at a rate of 49%. Effective April 1, 2013 all EI Providers were required to contract with the NYSDOH rather than individual municipalities. The providers were also required to bill directly for services provided to commercial insurance and Medicaid. This change has resulted in a decrease in both the expenditures and offsetting revenue for the county.

Preschool Special Education Program

Preschool special education services are provided to children ages 3-5 years who meet eligibility criteria set by the New York State Education Department (NYSED). The Committee on Preschool Special Education in the child's home school district develops and approves an Individualized Education Plan (IEP) identifying service type, frequency and environment. Inclusion of children with special needs in natural settings such as home, day care, preschool or other community settings rather than in segregated, special education classrooms is encouraged. YCPH

contracts with a host of agencies and independent providers for the provision of evaluations and services for this program. Services, including transportation when necessary, are provided at no cost to the family. Medicaid qualifying expenses are billed to Medicaid, however commercial insurance cannot be billed. The county is reimburses through NYSED at a rate of 59% of expenses.





Revenues (State Aid & Medicaid)

Revenue: $721,201
Expense: $1,007,030

Percent of reimbursement: 71.6%

PERFORMANCE MANAGEMENT/QUALITY IMPROVEMENT

In 2015, Yates County Public Health implemented a Performance Management System based on the Turning Point Performance Management Framework. Performance management and quality improvement tools are promoted and supported as an opportunity to increase the effectiveness of public health programs. Staff reported their achievement toward these goals, and findings were presented to the Performance Management Quality Improvement (PMQI) Committee quarterly. By reviewing these measures, quality improvement measures can be identified.

2015 QUALITY IMPROVEMENT ACTIVITIES

Each year a QI Activity Schedule is developed. This schedule is developed by the Quality Improvement Coordinator and members of the PMQI Committee. Program audits, agency complaints and incidents, satisfaction surveys, monthly and annual reports, quarterly reports and vouchers are reviewed. The Strategic Plan and CHIP are also reviewed to ensure completion of goals and objectives.
Thirty audits were completed and a total of 457 records were reviewed. Results of all audits are shared with staff, the PMQI committee, Professional Advisory Committee and Human Service Committee of the Legislature. Opportunities for improvement are identified through these audits. Additionally, YCPH was involved in 2 Performance Improvement Projects through the NYSDOH from November 2014-May 2015. The first dealt with communicable disease measures and Yates County achieved 100% compliance. The second dealt with STD measures and Yates County again achieved 100% compliance.

AGENCY COMPLAINTS AND INCIDENTS

There were 4 agency complaints and incidents in 2015. All were investigated and resolved.

SATISFACTION SURVEYS

Satisfaction surveys are distributed in all program areas. Ninety-eight surveys were returned with a 43% average return rate from all program areas. Over 95% had favorable responses. Areas of concern were in the Early Intervention Program where make-up sessions weren't always being made and Rabies Clinics where there were concerns about the location. As a result of Satisfaction Surveys, Early Intervention providers are notified of the importance of make-up sessions and YCPH has changed the parking at Rabies Clinics to improve safety, held a Saturday clinic and offered a link on the website to prefill paperwork to improve the paperwork process.

QUALITY IMPROVEMENT INITIATIVES

Breast Feeding Initiative
Breast feeding has always been encouraged by the staff at Yates County Public Health, but there was never a way to determine if breastfeeding continued at six months. A survey was developed and used to phone mothers after birth when the birth certificate indicated that the baby was being breastfed. The survey asked if they were breast

feeding, received any breastfeeding support, if they were aware that breastfeeding support is available through Public Health and if they were planning on returning to work. A follow-up phone call was then placed when the child was 6 months old to see if the child was still breastfeeding and if not, why. It was found that only 46% of non-Mennonite women continued to breastfeed at 6 months. It should also be noted that many new mothers did not initially breastfeed at birth. Efforts in 2016 will focus on educating pregnant women and providers about the benefits of breastfeeding and with employers on how they can support breastfeeding women return to the workplace.

Improving Hypertension Control Rates

As part of the Health Systems Learning Collaborative, Yates County Public Health and Penn Yan Community Health, were tasked with improving patient outcomes specifically around the chronic diseases of hypertension and diabetes. As a first step, Penn Yan Community Health requested assistance with assessing staff's knowledge of proper BP measurement. This was accomplished through a pretest, a training on evidence-based guidelines for BP measurements and a post test. Post test results revealed a 33% increase from pretest scores.

Lyme disease

Due to the increasing incidence of tick bites and Lyme disease, Yates County Public Health wanted to focus efforts on education about Lyme disease, prevention, and removal of ticks. Prior educational efforts have been provided at Health Fairs, social media outlets and the County website. This, however, is limited to those that participate in these activities. A tick removal kit was assembled that included information on avoiding ticks, tick identification cards, signs and symptoms of Lyme disease and instructions on proper tick removal. Also included were fine-tipped tweezers and alcohol pads. These were distributed to the local emergency department, Mennonite immunization clinic visits, and a local health care provider. The kits were well-received. Additional kits will be distributed in 2016.

ACCREDITATION EFFORTS

Yates County Public Health has been preparing for Accreditation through the Public Health Accreditation Board (PHAB). According to PHAB, "the accreditation process seeks to advance quality and performance within public health departments. Accreditation standards define the expectations for all public health departments that seek to become accredited. National public health department accreditation has been developed because of the desire to improve service, value, and accountability to stakeholders."

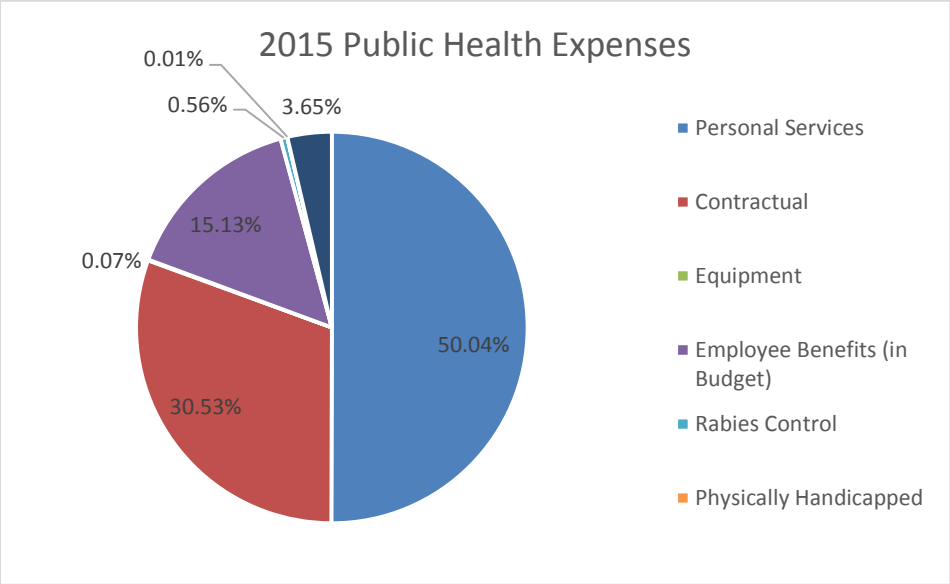
Yates County Public Health began the Accreditation process in 2013. Yates County Public Health and five surrounding counties in the S2AY Rural Health Network are working jointly on a Multijurisdictional Application (MJD). A Statement of Intent (SOI) was submitted to PHAB on July 2, 2015. The goal is to formally apply in June of 2016 with submission of final documents by July of 2017. Over 1,500 documents will be submitted to PHAB as part of the MJD application.

2015 FINANCIAL REPORT:

The fiscal analysis that follows includes the operational budget of the Public Health Department. Within the Public Health budget are included programs for Emergency Preparedness, Chronic Disease, Lead Poisoning Prevention, Children with Special Health Care Needs, Early Intervention, Injury Prevention, Family Health, Emergency Medical Services and Communicable Disease.

Public Health Expenditures:

Account	Budget	YTD Expenses	Balance	Percent
Personal Services	650,856.09	644,680.91	6,175.18	50.04%
Contractual	572,005.94	393,387.31	178,618.63	30.53%
Equipment	889.02	889.02	0	0.07%
Employee Benefits (in Budget)	212,178.00	194,928.29	17,249.71	15.13%
Rabies Control	7,202.36	7,202.36	0	0.56%
Physically Handicapped	928	174	754	0.01%
Early Intervention	119,037.11	47,071.62	71,965.49	3.65%
Total	1,563,096.52	1,288,333.51	274,763.01	100.00%



Public Health Revenues received in 2015:

2015 Public Health Revenues:	
PH Fees	46,524.00
Grants	344,881.00
PH State Aid	582,058.00
PHCP	145.00
Early Intervention	30,628.00
Total	1,004,236.00

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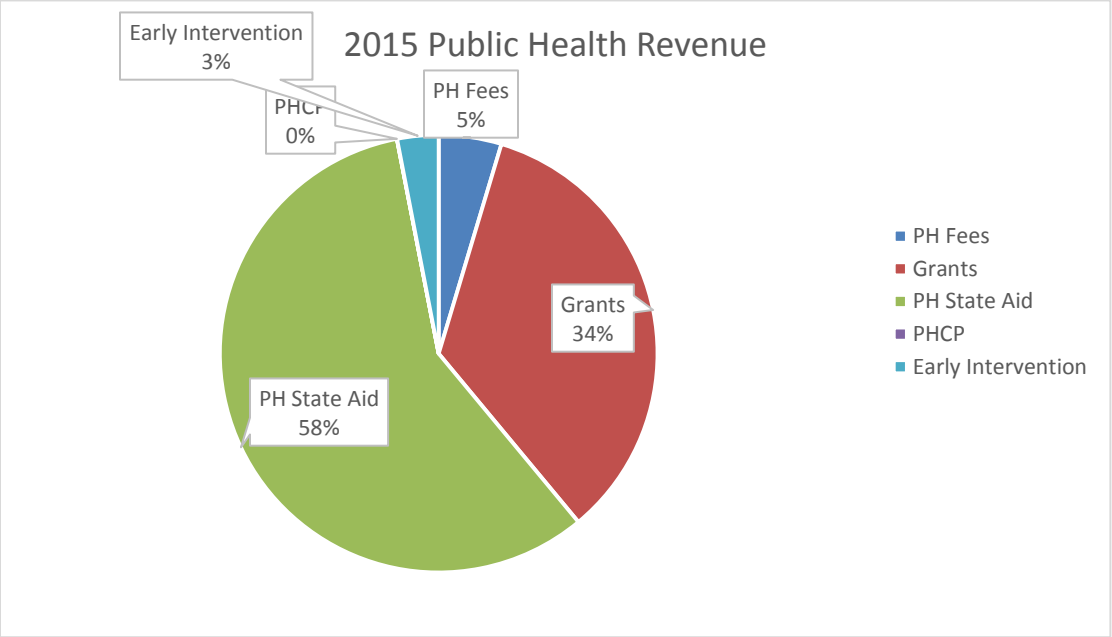
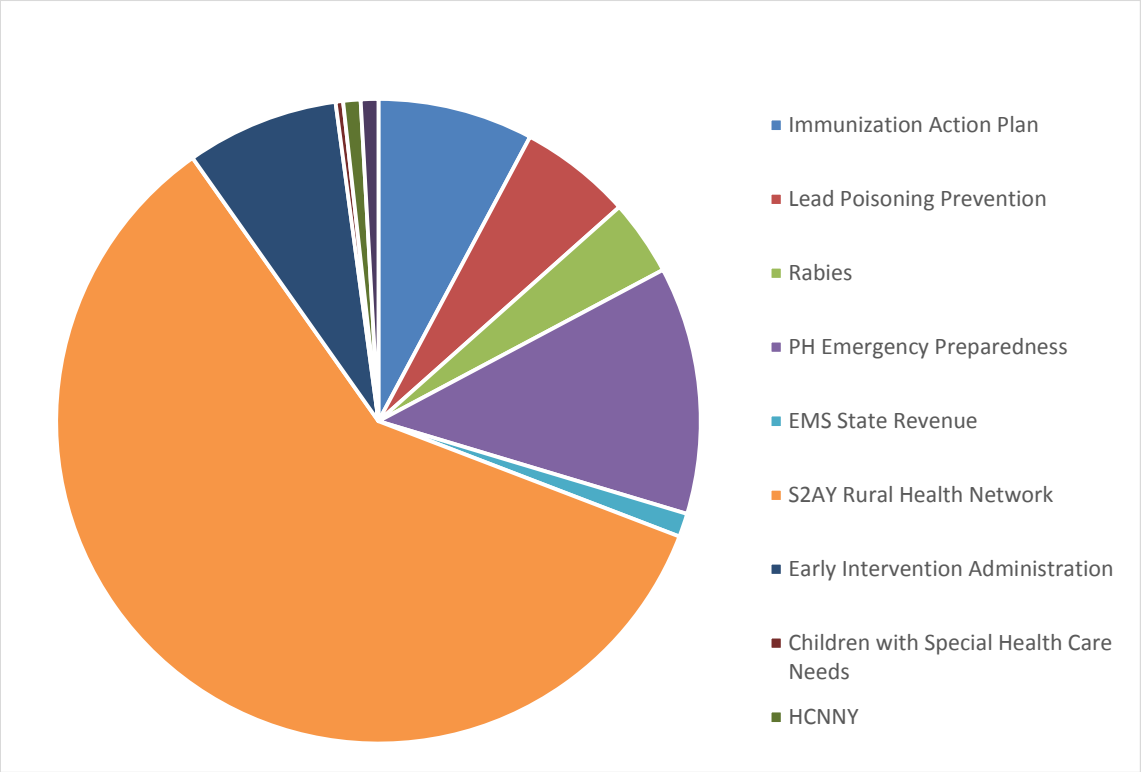
Public Health Grant Funded Programs Detail of Funds: