

WAYNE COUNTY  
PUBLIC HEALTH SERVICE

**2008**  
***Annual Report***

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## **WAYNE COUNTY PUBLIC HEALTH – DIRECTOR'S REPORT**

### Mission

The mission of Wayne County Public Health (WCPH) is to provide disease prevention services, health promotion programs, and health care services to those in need in order to maintain and enhance the longevity and quality of life of Wayne County residents.

### **Public Health**

- Prevents epidemics and the spread of disease
- Protects against environmental hazards
- Prevents injuries
- Promotes and encourages health behaviors
- Responds to disasters and assists communities in recovery
- Assures the quality and accessibility of health services

### **Essential Public Health Services**

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

### **2008 Committee Membership**

#### **Committee 6 - Health and Medical Services**

Kim Park, Chairman  
Lucinda Collier  
Laurie Crane  
Jim Fabino  
Robert Plant

#### **Health Services Advisory Board**

Frank Edwards, MD, WCPH Medical Consultant  
Carol Countryman  
Jim Hartz, Director, Wayne County Mental Health Department  
Tom Yale  
David Calhoun, Director, Wayne ARC  
Carmen Pascarella, Jr.  
Steve Leroy  
Emilie Sisson, Wayne County Rural Health Network  
June Smith, Wayne CAP – Head Start Program  
Jody Bender  
Laurie Crane  
Kim Park  
John McCrossen, Commissioner, DSS

**Professional Advisory Committee**

Morton Adams, MD  
Frank Edwards, MD  
Patricia Chapin, Physical Therapist  
Patricia Battle, Occupational Therapist  
Janet Freeman, Aging & Youth  
Carol Countryman

**Staff Members:**

Linda Michielson, Director  
Carol Monsees, SPHN, Children with Special Needs  
Pamela Taylor, SPHN, CHHA  
Diane Devlin, SPHN, Prevent Services  
Tina Peters, RN, Home Care Coordinator

**Local Early Intervention Coordinating Council (LEICC)**

Cathy DeHimer, Roosevelt Children’s Center  
Jody Ellis, Bright Start Pediatric Services  
Joan Fisher, Bright Start Pediatric Services  
Deb VanHousen, Even Start  
Andrea Morgan, Red Creek ABCD  
Judy Markowski, Wayne CAP  
Dr. Prabhu  
Lake Ontario ABCD  
Patricia Hurlid, NYSDOH  
Denise Arliss, Candy Apple Day Care  
Richard LeBlanc, DSS  
Mariellen Cupini, Stepping Stones Learning Center  
Thomas Ledbetter, Newark BOE  
Sharon Kimmel, DDSO, Rochester, NY

Rosemary Guchone, WCPH  
Linda Michielson, DPH, WCPH  
Carol Monsees, SPHN, CWSN, WCPH

The WCPH objectives met for 2008:

- WCPH and Wayne County Rural Health Network (WCRHN) collaborated in obtaining grant funding from the Greater Rochester Health Foundation to provide free/low cost dental services to the residents of Wayne County. Dental services will be provided by Rushville Health Center at WCPH.
- Increased and strengthened collaborations with coalitions, partnerships, and networks to enhance, coordinate, and provide much needed health care services (Cancer Screening Partnership, S2AY Rural Health Network, WCRHN, Finger Lakes Migrant Health Care Project, etc)
- Identified and provided assistance to county residents with obtaining health insurance through facilitated enrollers

Objectives met continued:

- Improved the health care services provided at WCPH to be more cost effective by streamlining clinics and paper work
- All Prevent team staff were cross trained to each other jobs and most are trained for all of the clinics provided to the residents of Wayne County
- Continued collaboration with state and local officials and organizations in an effort to reduce the high costs of Early Intervention programs and at the same time provide quality service to the children who need the service
- Provided comprehensive health services and health education through the home care services, preventive services (clinics), and presentations at different venues to the residents of Wayne County
- Quality assurance measures are continually conducted on all health care services that WCPH provides.
- Weekly surveillance of Wayne County school systems for disease outbreaks.
- Daily surveillance of Via Health of Wayne’s Emergency room activity for disease outbreaks or trends
- Assist school health programs on a “as needed” basis to provide up-to-date health education/information for situations that may be occurring in the school systems (such as MRSA)
- Provided an all day in-service educational program to all Wayne County school nurses to keep them up-to-date on health issues

Please note that several more objectives and goals were met by WCPH under the guidance of Linda Michielson, the previous Director of Wayne County Public Health.

WCPH has the benefit of being a member of the S2AY Rural Health Network which consists of seven counties: Steuben, Schuyler, Allegany, Yates, Ontario, Seneca, and Wayne. The overall mission of the S2AY network is "to improve access to care, to improve health outcomes and to improve health status for the residents of the seven counties by integrating delivery of public health programs..." Network activities in 2008 included policy and procedure development for multiple programs, corporate compliance, enrollment of children and adults in health insurance to promote access to health care in the seven county region (Facilitated Enrollment), training of public health personnel, collaboration with schools on public health issues, in-service education for home care staff, skills fair for home care and public health staff nurses, continuation of the eleven county Regional Early Childhood Coalition (RECC) and the continuation of the regional public health emergency planning coalition "Finger lakes Public Health Alliance" (FLPHA), and started collecting data for the Community health Assessment for all seven counties. The network grant funds enabled the seven counties to provide programs, to review and monitor quality of services, and to create partnerships that would not be possible on a single county basis. Belonging to the S2AY Rural Health Network has enabled WCPH to be more cost effective.

#### 2009 Goals

- In 2009 WCPH will be striving to provide comprehensive health care services to the population of Wayne County in a more economic fashion. Health promotion programs and clinic processes will be streamlined to be more efficient and to allow staff to provide safe, professional, and compassionate health care services.
- Continue all collaborations that have strengthened the services at WCPH
- Increase staff knowledge base on coding of services to optimize revenue
- Continue outreach efforts to encourage access to WCPH's services

**Diane M. Devlin, Interim Director of Public Health**

### **CHILDREN WITH SPECIAL NEEDS PROGRAM ANNUAL REPORT**

The Children with Special Needs Program serves children from birth to 21 years of age, and actually consists of three separate programs: Child Find/Early Intervention, Pre-School Program, and Children with Special Health Care Needs (CSHCN)/Physically Handicapped Children's Program (PHCP). All referrals come through the program supervisor and are then assigned to the correct program worker. All children referred to any program will be assigned a local health department number by the program supervisor. This number will be used for any communication via e-mail for the child and family in order to assure confidentiality.

#### Child Find

The purpose of the Child Find Initiative for Early Intervention is to identify potential Early Intervention children and at-risk children, to facilitate their participation with a primary health care provider, to ensure their access to developmental screening, and to ensure opportunity to access health care insurance.

The Child Find nurse has been monitoring an average of 14 high-risk children on a regular basis, providing teaching, referrals, and case management. Referrals, for high-risk children came from SMH Newborn ICU, physicians, Early Head Start, day care centers, and Hannick Hall. Local Home Health Care Agencies have also given the Child Find program referrals this year.

#### Early Intervention (Birth to age 3)

The Early Intervention Program is a statewide program that provides many different services to infants and toddlers with a disability or developmental delay and their families. In New York State, the Department of Health is the lead agency responsible for the Early Intervention Program.

Children suspected of having a significant delay in development are potential candidates for this program, with referrals made from parents, physicians, and other professionals. A developmental delay means that a child is behind in at least one area of development, including: physical development (growth, gross and fine motor abilities), cognitive development (learning and thinking), communication (understanding and using words), social-emotional development (relating to others), and adaptive development (self-help skills, such as feeding).

Upon referral, a service coordinator is assigned to the family and works closely with the parents in choosing a multi-disciplinary evaluation team. Eligibility for Early Intervention Services is based on the eligibility regulations determined by NYS. Children and their families then become involved in a collaborative Individual Family Service Planning (IFSP) Process, in which a written plan is developed describing the services that will be provided as well as the outcomes the family hopes to achieve. Progress is evaluated at least every 6 months until goals are met or until transition into the Pre-School Program occurs.

As of December 31, 2008, the total number of Wayne County infants and toddlers with an IFSP receiving Early Intervention Services was 162 (8 children under the age of 1 year, 35 children from 1-2 years old, and 119 children from 2-3 years old). This is an increase from 2007's total 127 children but there are 27 children awaiting a determination of eligibility. The Early Intervention program received an average of 53 referrals each quarter, for a total of 214 new referrals in 2008, which was an increase of 3 referrals for the year. We also had 10 transfers into Wayne County which was a decrease of 2 transfers and 24 cases were reopened to Wayne County which was an increase of 7. There were also 5 migrant referrals to the Early Intervention Program and 2 from Child Find to Early Intervention for evaluations. The referrals came primarily from parents and physicians and the balance of the referrals came from day care centers and other community sources. There were also 22 new referrals to the Child Find Tracking Program.

A total of 535 Early Intervention Services were provided to children under the age of 3 as of December 31, 2008. The number of children receiving speech therapy was 138, physical therapy 42, occupational therapy 37, special instruction 54, assistive technology devices and services 7, audiology 2, family counseling 4, nutrition services 2, psychological services 28, respite care 14, service coordination 180, transportation 17, vision 3. Services were provided in the home setting for 152 children and in a classroom or center for 10 children.

The Early Intervention official designee has been attending regional meetings (S2AY Rural Health Network) every month to share information, discuss issues/concerns, listen to speakers from the state level, and plan training and workshops for families, staff, and providers in the EI Program. This group has completed the review and update to the Service Provider Handbook for 2008. Very few changes were made and the CD will be given to each Service Coordinator/Provider at the January 26, 2009 meeting here at WCPH. The S2AY Network was also instrumental in presenting "FLIP IT" Behavioral Management training for providers, parents, and service coordinators in our 10 county region. The "FLIP IT" trainer came to our area in October, 2008 and over 100 people attended this workshop. The S2AY Network is hoping to bring another training to our area in late Spring-early Fall 2009. We also produced and sent a brochure entitled "Identifying and Referring Children with Possible Developmental Delays" to all the physicians serving children in our 10 county area. The S2AY Network was also instrumental in producing a flip chart for First Aid for our providers to carry with them as required by the NYS Health and Safety Guidelines.

In-service programs that some of the EI staff have attended include: the annual county Mandatory Ginna Training; the NYS mandatory Early Intervention trainings which were held on various topics throughout the year; the Fire Extinguisher training and the Annual Mandatory In-service program at WCPH; the NYS Teleconference calls which are held six times per year; the NYS Connects Program-POE trainings; the annual Autism Conference sponsored by the University of Rochester. Some other educational programs that our staff participated in were as follows: the Western NY CSHCN teleconference; a session on Mental Health Disaster Training; several BT meetings throughout the year; Special Quest Head Start and Early Intervention collaboration efforts; quarterly in-services sponsored by the NICU at Strong Memorial Hospital; AED/CPR training here at WCPH for county employees. Other trainings attended were the transition training, the motor disorder guidelines training and the evaluation and eligibility training which were offered by NYSDOH. We also participated in the nursing skills in-service which was held here at WCPH; the annual pediatric nursing conference at the University of Rochester; the Medicaid update meeting/training for accounting staff; the Health Commerce System Training

mandated by NYS ; ICS training for the Bioterrorism grant; "FLIP IT" behavioral management training; and the NYSED training on "STACS" for the Pre-K program which was held in Rochester.

We also participated in one audit during 2008, which was the Early Intervention Administrative IPRO review. Wayne County had only minor corrective action plans to be completed and they were sent to Albany for acceptance. We are currently awaiting approval of our corrective action plans (CAPS) by NYSDOH.

Two service provider meetings were held in 2008 in the Public Health conference room. At the first meeting, which was held in January, a review of DOH Guidelines on Confidentiality was done in detail with an emphasis on each provider needing to develop their own confidentiality policy for the approximately 21 providers in attendance. At the second meeting held in September, transition was discussed in detail as this continues to be an ongoing issue with regard to the timelines. The second topic for the meeting was the Health and Safety Guidance document which was distributed by NYS. There were 22 providers in attendance. Program updates were shared, issues and concerns were discussed, and provider monitoring by Island Peer Review (IPRO) was discussed as well as the State Performance Plan for Early Intervention and Pre-school which is now tracking a child's developmental level at entrance and exit from either program. We are currently collecting State Performance data on every referral to the Early Intervention Program for the period July 1, 2008 to July 1, 2009 or up to 233 children. Educational opportunities that will be presented in our area were also presented to the SC/Providers. All materials from the meeting are mailed to the SC/Providers who were unable to attend the meeting. We are also waiting to see what the budget cuts in Albany will do to the accessibility of the mandated trainings for the Early Intervention Program.

There are 13 approved evaluators for parents to choose from to perform the initial evaluation for their child. There are 39 providers to service the EI children with speech, physical therapy, occupational therapy, special instruction, psychological service, audiology, service coordination, nutrition, vision, counseling and assistive technology. The provider of service is selected by the county based on the child and family needs. Currently, we still have a shortage of providers to serve the children in the eastern half of our county.

The Local Early Intervention Coordinating Council (LEICC) met 3 times during the year 2008. The agenda for each meeting included EI statistics, parent reports, review of satisfaction surveys, review of policies and procedures, member reports and report of record review. Our LEICC will review the Corrective Action Plans just submitted to the state at our next meeting in March. Parent surveys continue to be very positive in their opinion of the Early Intervention Program. We continue to struggle to keep parent involvement as does every other LEICC in the S2AY network area. Through our S2AY Network we are requesting NYS to allow our quarterly Regional Early Childhood Coalition meetings to count as meeting the LEICC requirements as we have all the required people in attendance at these meetings and they are open to the public from 1-2 pm. We are still waiting for them to reply back to us.

This year our LEICC, in conjunction with other groups such as Head Start, Roosevelt Children's Center and independent providers, hosted a "Teddy Bear Tea" in Wolcott at Wolcott Falls Park in June. The Early Head Start teachers in Wayne County did a story hour on Teddy Bears and provided tabletop activities such as making Teddy Bear puppets. They also organized a Teddy Bear hunt where the children had to find the hidden Teddy Bears in the park. The music therapist from Stepping Stones Learning Center provided musical activities for the children. Goody bags were distributed to all the children in attendance with the emphasis on Dental Health. The "tea" was very well received and 62 adults and 78 children attended. We are planning to repeat the "tea" in 2009 in the Clyde-Savannah area.

The S2AY Network, which consists of Schuyler, Steuben, Allegany, Yates, Wayne, Seneca, Ontario, Cayuga, Chemung, Tioga and Tompkins counties, meets monthly and participates in Early Intervention policy and procedure review and development. This group has developed an Early Intervention provider handbook, the S2AY Network Policy and Procedure Manual for Early Intervention and a provider handbook for the 3-5 program. These handbooks are reviewed and updated as needed annually. The Regional Early Childhood Coalition (RECC), under the guidance of the S2AY Network, meets quarterly to discuss issues and projects relevant to the 0-5 population. The RECC is composed of the Early Intervention Manager, a parent, provider and a CPSE Chairperson from each county. This group developed a CPSE Chairperson Handbook which was distributed to every school district in the S2AY network.

## Preschool Program (age 3-5)

The Preschool Special Education Program is a statewide program which is managed by the New York State Education Department (SED), Office of Vocational and Educational Services for Individuals with Disabilities (VESID) with school districts, municipalities, approved providers, and parents. This program provides evaluations and specially planned individual or group instructional services or programs to eligible children who have a disability that affects their learning. Funding for these services is provided by the municipalities and the state.

**Children who received Early Intervention services up to age 3, and who may continue to need special services, can be referred to the Committee on Preschool Special Education (CPSE) with the assistance of their EI service coordinator. Pre-school age children (3-5) who have not received Early Intervention services, but have some delays in development, can be referred to the CPSE by parents or professionals**

The Preschool Special Education Program in Wayne County currently meets the needs of 362 children compared to 333 last year. There are 51 children enrolled in a full day program, 101 children enrolled in a half day program, 244 children receiving related services (one or more of the following: speech, occupational therapy, physical therapy, assistive technology, parent education and training, and counseling), 30 children receiving a Special Education Itinerant Teacher (SEIT), and 31 children receiving an aide service. Of the children who are attending a center based program 128 attend Roosevelt Children's Center in Newark, 3 attend Finger Lakes UCP, 9 attend Stepping Stones Learning Center, 1 attends Mary Cariola Children's Center, 4 attend the Communication Center, 2 children attend the Monroe BOCES 1 program in Irondequoit and 6 children attend the UCP Rochester program. There has been an increase of 25 children in Centerbase programs this year.

Transportation continues to be provided by a municipal agreement with Wayne Finger Lakes BOCES acting as contractor for the County's School Districts. The cooperation of Wayne Finger Lakes BOCES and the school districts in the transportation of Pre-K and EI children within the county has been a positive experience and has provided safe, dependable, cost efficient transportation. Bids were accepted for routes outside the municipal agreement. A&E was awarded the contracts. Parents can also be reimbursed for transporting their own children.

As NYS changed the Medicaid consent form that they will accept, Wayne County has been busy attempting to obtain the new consent form from every parent of Medicaid eligible children. The school districts have been requested to obtain these consents at every CPSE meeting and send a copy to the county for billing purposes. Without these consents, Wayne County cannot seek Medicaid reimbursement. Our County Representative to the School Districts and our 3-5 Account Clerk are doing a great job following up on the needed consents. We have developed a protocol for obtaining these consents which we feel will help the county and school districts to work together to obtain these consents.

Our local school districts are also waiting to see if the Governor's proposal to make them responsible for 15% of the cost of Pre-school education in their districts passes in the budget. If this occurs, this will help to offset the extremely high costs of this program for which the county has little fiscal control.

### Children with Special Health Care Needs (CSHCN) Physically Handicapped Children's Program (PHCP)

The definition of Children with Special Health Care Needs as stated in the New York State Department of Health CSHCN Program data dictionary: are those children (age 0- 21) who have or are suspected of having a serious or chronic physical, developmental, behavioral or emotional condition and who also require health and related services of a type or amount beyond that required by children generally.

Expected outcomes for children with special health care needs and their families are that they:

- 1) Will receive ongoing and comprehensive care within a medical home
- 2) Will have adequate private and/or public insurance to pay for the services they need
- 3) Will be screened early and continuously for special health care needs
- 4) Will have services that are organized in ways that families can use them easily

- 5) Will participate in decision making and will be satisfied with the services received
- 6) Will receive the services necessary to make appropriate transitions to all aspects of adult life, including adult health care, work, and independence.

Referrals in Wayne County have been received from both families and health care - professionals. Intake information was recorded on the Children with Special Health Care Needs Program Report forms developed by the NYSDOH and then entered into the computer data system. Assistance was provided to families by referring them to the appropriate health services and/or community resources. Most of these children were enrolled in the Physically Handicapped Children's Program (PHCP), which continues to provide financial funding for children, with severe chronic illnesses or physical disabilities, who live in New York State and meet certain medical and financial criteria. This funding source is to help parents meet medical expenses that are not covered by Medicaid, Child Health Plus, and private insurance, as well as providing help when families are without any type of coverage for a short period of time.

During the year 2008, information on Family Health Plus and Child Health Plus Insurance was shared by brochures and verbally at meetings, health fairs, the Wayne County Fair, with other health care professionals, and with families in the Early Intervention Program and PHCP. The Child Find nurse has distributed brochures both in English and Spanish to the local community hospital, pediatricians' offices, local Head Start sites, and to local daycare centers, including the 2 migrant ABCD daycare centers. We also participated in the Clyde Health Fair in September, the Red Creek Health Fair in November, and we did Dental Health outreach to all the Head Start Programs and the 2 ABCD programs. At all of these outreaches we were able to disseminate information regarding dental health and all the programs in the CWSN Unit. We distributed, through our Children with Special Health Care Needs grant, toothbrushes, toothpaste and water bottles to approximately 2000 people ages 0-21 years. Dental caries/disease is a major health concern in Wayne County.

Child Health Plus information has been distributed by EI service coordinators, the Child Find nurse, PHCP personnel, community health workers and public health nurses to clients in the community setting as well as in the immunization clinics and well child clinics. Service coordinators continued to assist families to apply for Child Health Plus. Other families were referred to the facilitated enroller, who covers all of Wayne County. She now has an office at Wayne County Public Health which makes it easier for her to make appointments with the clients and complete the necessary paperwork for insurance. She also does outreach into the communities in Wayne County. A S2AY brochure on insurance with an 800 number, has been distributed to assist in getting information on Family Health Plus to the general public. All of these activities continue to be on-going. Our facilitated enroller, Kim Dey is able to keep all of us informed regarding Child Health Plus and Family Health Plus changes as they occur from NYS.

There are 13 children who are assisted with ongoing medical services: purchase and maintenance of hearing aids, purchase of medical equipment and supplies, purchase of special dietary supplies, purchase of incontinence products, and assistance with co-pays for medical office visits, medications, medical supplies, labs, and x-rays.

The orthodontia program in NYS has changed significantly. All Medicaid eligible children are no longer case managed by CSHCN. They can call and make their own appointments with orthodontists who take Medicaid. If a Medicaid family calls our CSHCN program, we provide them with the names and phone numbers of Medicaid accepting orthodontists. We complete an encounter sheet to document our contacts and enter the information into the New York State data collection system. After this, we are no longer involved. This program change has significantly decreased our numbers in the orthodontia program. We currently have approximately 9 cases that are managed by CSHCN (State Aid). We had one new case for orthodontia assistance in 2008.

The CSHCN staff have attended regional meetings every 6 months and occasional training sessions, and have participated in the development of a new computer data system to be used statewide sometime in the future. The CSHCN staff continues to meet monthly with Dr. Adams, our Medical Director. The CSHCN program has hosted 2 teleconference sessions in 2008. The Western Region CSHCN Coalition has decided to meet twice a year face to face and to host two

teleconferences alternating between our actual meetings and this seems to meet the needs of our Western Region adequately.

As this annual report indicates, the CWSN program has been very busy this year, but I feel that we have succeeded in providing high quality programs for our children and their families while keeping an ever vigilant eye on the fiscal components. Our goal for 2009 is to increase the reimbursement to the county for these programs especially through our service coordinator roles in the Early Intervention Program and Medicaid reimbursement in the 3-5 program. We are also working diligently with the school districts to maintain due vigilance on the cost of the services that they authorize for the 3-5 program and for which the county is fiscally responsible.

**Carol Monsees, RN, SPHN**

### **EMS COORDINATOR YEAR END REPORT**

#### **Projects**

- Continue to assist agencies and EMS providers in meeting certification requirements
  - Participated in a meeting with the Alton Fire District commissioners to discuss the procedures for separating the fire and ambulance services
  - Talked with a representative of Sodus Point ambulance regarding the status of the Municipal CON application; reviewed and approved application for consideration by the Finger Lakes Regional EMS Council; application was approved and sent to the NYS EMS Bureau for final approval; attended the community informational meeting for Silver Waters Community Ambulance Service, Sodus Point
  - Talked with a representative of Sodus Town Ambulance regarding OSHA inspection for the ambulance; contacted the NYS Public Safety Employee Health (PESH) office regarding OSHA requirements for ambulance services; forwarded information to Sodus ambulance
  - Reviewed the Walworth FD ambulance request for transfer of Certificate of Need (CON); recommended that the Finger Lakes Regional EMS Council transmit it to the NYS DOH
  - Provided a listing of the EMS vehicles and agencies in the County to County Administrator
  - Assisted Fairville FD in completion of application to Wadsworth Lab for license to check blood glucose levels in the field
  - Provided information regarding Epi-pen, albuterol, and spinal immobilization updates to representative of Walworth ambulance
- Continue to assist with oversight of Wayne County ALS system
  - Possible infection exposure reported by WCALS tech; researched details of call; talked with WCALS tech; representatives of Williamson FD and Williamson Vol. Ambulance regarding possible contact; contacted WC Public Health and Neark-Wayne Hospital regarding follow up on patient; provided paperwork to WCALS and Williamson crew to start paper trail; reported results to Williamson and WCALS crews
- Quality Assurance/Quality Improvement
  - Talked with representatives of various ambulance services regarding quality assurance; recommended establishing a QA/QI committee
  - Talked with Ross Zastrow, NYS Senior EMS Representative, regarding QA concerns about some Wayne County agencies; Met with the Finger Lakes EMS Council Program Agency Coordinator and Jack Davidoff, MD, FL Council Medical Director about QA concerns
  - Prepared QA/QI form template for WCALS; assisted with QA/QI review for WCALS
  - Discussed establishing a County QA/QI committee with members of EMS Advisory Board
  - Met with Jack Davidoff, MD, Finger Lakes Council Medical Director, to discuss QA/QI issues and concerns
  - Reviewed the QA/QI program issued by NYS DOH; shared information with agencies
- Palmyra Ambulance response concerns
  - Talked with Dave Lyon, Supervisor, regarding EMS response concerns

- Met with David Husk, Palmyra Village Board liaison, and Mayor Vicky Daly to discuss options for possible improvement of ambulance service. Explained Certificate of Need (CON) requirements and third-party billing requirements; followed up as needed
- Observation of EMS Week
  - Sent out announcements/reminders for the EMS Recognition breakfast; prepared handouts, obtained contributions; talked with Karen King & Dick Muoio re plans for breakfast
  - Several contacts with Wayne County Rural Health Network re plans for the EMS breakfast
  - Approximately 80-85 people attended the EMS recognition breakfast held at Clyde FD hall
- Working with Jay Denosky and Jody Bender on a project to provide ID cards for County EMTs
- Prepared for and participated in the State Ginna drill
  - Reviewed EMS portion of Ginna plan; created a checklist template
  - Participated in comprehensive tour of Ginna Nuclear Power Plant

### **Training**

- Prepared for and presented CPR/AED classes: Public Health staff – 3; 911 Dispatchers – 5; Wayne County Nursing Home – 9; Wayne County Jail nurses – 1; Mental Health -1; Public Health Early Childhood staff – 1; fire departments - 2
- Prepared and presented Bloodborne Pathogens updates: Wayne County Buildings & Grounds staff – 2; fire departments - 1
- Prepared for and presented updates to fire departments: “Aspirin Administration” – 2; Trauma – 1
- Helped prepare for and participated in the “Recruitment/Retention” workshop sponsored by the Wayne County Rural Health Network
- Participated in planning for drills: DWI drill at Sodus HS; continued communications with George Bastedo about proposed drill at the Sodus-Williamson airport
- Participated in the Wayne County Technical Decon Team training held in Seneca County; participated in the Technical Decon Team training drill with Seneca County's Decon Team; prepared a slide show of the Decon Team Training for use by agencies
- Working with a member of the Finger Lakes EMS Training & Education to develop safety lessons to be included in EMT classes
- Reviewed the Biochemical Threat protocol from Wadsworth Lab; contacted them to request training materials
- Prepared for and assisted with CME workshops: “Handling the Contaminated Patient”; “Pulmonary Emergencies”; “Children with Special Health Needs”; “Spinal Immobilization:’ (2) Geriatrics: Golden or Tarnished Years’ (2): “Hemophilia”; “Recruitment/Retention” (sponsored by Wayne County Rural Health Network)
- Presented a CPR/AED class for East Palmyra FD; 12 people participated
- Prepared and delivered a presentation on stress for the Wayne County Safety Officers monthly meeting
- Participated in the “Alternate Care Solutions” workshop in Geneva; developing plans in the event of a pandemic flu outbreak
- Scheduled a Train-the-Trainer Atropine Auto injector workshop with a representative of the NYS Department of Health
- Participated in the Amtrak Safety workshop
- Prepared for and presented a “Seizure Awareness” class for Wayne County DSS
- Prepared a PowerPoint presentation on “Safety for EMTs”; it will be available for presentations to County agencies
- Provided a community workshop on First Aid Essentials at the Newark Library

### **Communications**

- Met with a representative of Alton FD to discuss Blood Glucose Testing by Basics procedures; provided necessary paperwork
- Talked with a representative from Dr. Hong's office regarding a concern about transport of possible stroke patients and questions about obtaining information from the receiving hospital for their patients; referred to the NYS Stroke Protocol in explanation

- Contacted by a representative of American Home Patient service, requesting information on how to set up contact with 911 Center for patients in Williamson and Walworth who are on sleep apnea monitors; assisted in providing information
- Talked with various interested people regarding the NYS Tax Credit forms for volunteer fire/EMS personnel
- Talked with various agency members regarding CME requirements
- Talked with a representative of Alton FD ambulance regarding questions about response by basics to a patient on a ventilator. Contacted Frank Edwards, MD, regarding possible training for basics on managing ventilator patients
- Talked with a representative of South Butler ambulance regarding the procedure for putting a new ambulance into service; followed up
- Reviewed reporting procedures for ambulance accidents, regarding the Clyde ambulance MVA
- Talked with Bob Plant, Walworth, regarding questions about the PAD program; forwarded information
- Talked with representatives of agencies regarding questions about the Radio Survey
- Talked with a representative of Marion ambulance regarding the future of the ambulance
- Assisted a citizen who needed to obtain a copy of his PCR from Macedon Town ambulance; provided contact information
- Talked with Emily Sisson, Wayne County Rural Health Network Director, about various issues
- Contacted a member of the Savannah FD regarding requirements for reporting mutual aid ambulance calls to OFPC
- Contacted NYS Senior EMS Representative, Ross Zastrow, regarding ambulances running with blue lights instead of amber lights; provided a copy of the legislation regarding emergency lighting for emergency vehicles to involved agencies; followed up as needed to ensure compliance
- Talked with representativea of several ambulance services regarding meeting training requirements for the NYS Spinal Immobilization policy
- Talked with the Ontario County EMS Coordinator about inter-county cooperation for EMS MCI dispatches
- Maintain regular communications with individual providers, EMS officers, and fire department personnel regarding issues, concerns, and needs
- Maintain continuous communication with County emergency staff to coordinate activities, discuss needs and concerns, etc.

### **Office**

- Prepared monthly activity reports for Public Safety Committee and Public Health
- Prepared and sent announcements for CME workshops; prepared handouts, prepared and mailed certificates following workshops
- Sent copies of the NYS Tax Credit Form for fire and EMS volunteers to agency representatives
- Researched legislative bills affecting EMS; sent copies as needed
- Sent a copy of the NYS policy regarding hospital diversions to the Newark-Wayne ER Director
- Created a template for an EMS appreciation certificate for agencies for EMS Week
- Provided information to fire departments regarding transfer of CON for billing purposes
- Prepared and mailed certificates for CME workshops
- Sent copies of NYS DOH policy statements re: "Patient Confidentiality" and "Storage and Retention of Patient Records" and "Spinal Immobilization" protocol and MOLST and NYS DOH Seatbelt policies and the new State form for use in reporting suspected child abuse/neglect to county agencies
- Prepared draft medical information forms for the Technical Decon Team
- Mailed the information regarding the NIMS required training for EMS to county agencies
- Prepared a proposed rehab policy for the Fire Advisory Board
- Reviewed the Decon materials from Wadsworth Lab
- Researched information regarding ambulance territories as defined in Article 30; talked with Ross Zastrow, Senior NYS EMS representative, to confirm details
- Forwarded an announcement from the State Attorney General's office concerning illegal billing practices
- Prepared and mailed survey of communications equipment owned by volunteer ambulance corps
- Forwarded new materials for "line-of-duty death" reporting to agencies

### **Meetings**

- Participated in the regular monthly meetings of the Public Safety Committee

- Participated in the regularly scheduled LEPEC meetings
- Prepared for and participated in the bi-monthly meetings of the Wayne County EMS Advisory Board;
- Participated in the regular meetings of the 911 Advisory Board
- Participated in the regular meetings of the Wayne County Fire Chiefs Association
- Participated in the regular meetings of the Wayne County Fire Advisory Board
- Participated in the Radio Communications committee meetings
- Participated in the Hazardous Materials Assessment Credibility meeting
- Participated in the Ginna Action Planning Committee meeting conducted by Emergency Management staff; discussed drill to be held in the fall of 2009
- Participated in the Ginna Action Planning Committee meeting conducted by Emergency Management staff; discussed drill to be held in the fall of 2009
- Participated in the bimonthly meetings of the Finger Lakes Regional Emergency Medical Advisory Committee (REMAC), monthly meetings of the Finger Lakes EMS Training & Education Committee and Executive Committee; bi-monthly meetings of the Finger Lakes EMS Council
- Participated in the regular meetings of the NYS EMS Council, including meetings of the Systems, Evaluation, Legislative, and P.I.E.R. subcommittees (5)
- Attended the Alternative Care (Pandemic flu) workshops in Canandaigua
- Attended two meetings of the Board of Supervisors
- Participated in several meetings with representatives of the Sheriff's department and Fairville FD regarding requirements for EMS coverage at the snowmobile drags held at Brantling Ski Slopes (in December)

#### Other

- Responded; dispatched to scenes of: accidents: 11 serious MVAs, 3 fatal MVAs, 1 schoolbus MVA, 1 ambulance MVA, 2 bicyclists struck, 3 motorcycle MVAs, 1 ATV MVA, . . . personal injury: 3 falls, 1 fire police struck, 1 overdose, 1 person run over by tractor, 1 teen assaulted. fires: patient on fire, apartment complex in Marion, 2 house fires, Newark Senior High Rise, Armstrong Senior Living Center, 1812 Hotel fire in Sodus. Misc: scene of microburst (overturned RV); HazMat incident, ice rescue
- Spoke to the Participation in Government class at Marion about my duties as Wayne County EMS Coordinator as well as volunteer opportunities in fire & EMS
- Arranged for and participated in Stress Debriefing sessions and/or on-scene defusing as needed
- Participated in the Ginna Wellness Day
- Participated in a meeting in Clyde with Senator Nozzolio and provided him with information about EMS in Wayne County

**Bill Liddle, EMS Coordinator**

### EMERGENCY PLANNING YEAR END REPORT

#### Collaboration/Community out Reach

- Wayne County Public Health was represented at the bi-monthly RRHA meetings.
- WCPH Emergency Planner attended Regional BT Planners Meetings bi-monthly and the FLPHA Regional Emergency Planner attended the NY State BT Planners Meeting in December.
- Wayne County Director and/or the Emergency Planner attended the NYSDOH WR Environmental Health/Geneva District Office Semi-Annual Meetings.
- WCPH Emergency Planner, Linda Michielson DPH, Prevent Supervisor Diane Devlin and IT staff meet with NYSDOH Information Technology Specialist to review IT needs and problems as needed. WCPH Emergency Planner had video conferences every month with NYSDOH IT Specialist.
- Wayne County Emergency Planner and SPHN of the Preventative Services met with WC EM George Bastedo and worked on the PH SNS Plan.
- Wayne County PH Director and/or the WCPH Emergency Planner attend LEPC Mtg. quarterly.

- A representative has attended the Wayne County Head start Professional Advisory Board Meetings.
- WCPH Emergency Planner continues to collaborate with the Faith Based Organizations on emergency planning efforts.
- WCPH Emergency Planner, WCPH Nursing Supervisors, EMS, EMO, Newark Wayne Hospital and ARC had been attending Regional Alternate Care Site (ACS) Meetings to work on a regional rural ACS plan. The FLPHA rural counties received a grant on ACS planning an operational and logistical plan for ACS. On September 3, 2008 there was an email sent out that NYSDOH requesting that FLPHA wrap up and conclude the ACS project and the table top was cancelled. On September 30, 2008 the WCPH Emergency Planner, Wayne County Health Educator and Director of WCPH attended the final FLPHA Regional Alternate Care Site (ACS) Meeting to wrap up the project and the regional ACS leaders completed and evaluation and lessons learned to send to NYSDOH along with a signed cover letter from the directors of the counties involved in the planning.
- Wayne County Public Health Emergency Planner has been collaborating with Ontario, Seneca, and Steuben Counties regarding Medical Reserve Volunteer Work Group, NYSDOH has a new web site SERVNY which allows county residents who are medical and non-medical to register as volunteers for their counties.

#### Drills/Exercises

- Wayne County Public Health was involved in a communications drill conducted by the NYSDOH on September 9, 2008.
- Wayne County Public Health Nurses participated in the GINNA drill held on September 9, 2008.
- Wayne County Public Health Emergency Planner conducted a GETS/WPS cell phone drill on September 15, 2008 with WCPH ICS Team.
- Wayne County Director Linda Michielson attended a drill in Erie county earlier this year.
- The table top drill scheduled for October 16, 2008 for ACS was cancelled due to NYSDOH discontinuing FLPHA work on the project.

#### Education /Training/Conferences

- All of WCPH staff has completed ICS 100, 700, 200 and 800 training.
- January 10, 2008 WCPH Emergency Planner and SPHN of Preventative services attended the video teleconference on Bridging Community Partners through Drills & Exercises.
- On March 10 and 11, 2008 WCPH Emergency Planner and SPHN of Preventative services attended training on radiological event which was a second quarter GY8 deliverable.
- Wayne County Emergency Planner and 3 SPHN's and the Communicable Disease nurse attended the initial committee meeting for Alternate Care Solutions on March 31, 2008 then on April 8, 2007 2 SPHN's , the Communicable Disease nurse and 2 WCPH PH educators attended a follow up meeting there are future meetings which will be attended by staff as needed.
- Wayne County Public Health Nurses attended mandatory training on Ginna PMC decontamination. A NYS drill is being planned for sometime late August or early September
- NYSDOH is requiring that all emergency response staff attend ICS 300 by end of 2008
- June 23, 2008 WCPH Emergency Planner attended the Alton Tabernacle Church meet with their core leaders to offer information on emergency planning needs.
- On July 14<sup>th</sup> WCPH Emergency Planner will be attending an informational meeting at the United Church of Marion to assist them in their emergency planning efforts.
- Wayne County Public Health Emergency Planner hosted a NYSDOH Psychological First Aide Training Train the Trainer at the Wayne County Fire Training Facility on July 31, 2008, invites were sent out to Wayne County Faith Based Organizations, along with other Wayne County Planning Partners.
- WCPH Emergency Planner attended the NYSDOH mandatory Medical Counter Measure Dispensing and Distribution training held on September 8, 2008 in Mt. Morris NY. This meeting brought us into compliance with deliverable L-8.

- All of WCPH staff participated in a NYSDOH mandatory webex training on the new Health Commerce System Portal beginning August 22 through until September 30, 2008, this brought us into compliance with deliverable L-7 training
- Wayne County PH Emergency Planner and one staff member attended a GINNA educational tour on September 22, 2008.
- 3 of WCPH emergency response staff have completed NYSDOH mandatory ICS 300 training on September 23-25, 2008 at the Wayne County EMO. Two more people will need to complete this course by end of 2009.
- On November 13, 2008 2 staff members from WCPH emergency response team will attend Risk Communications Training in Rochester NY, WCPH Emergency planner sent out invites to all Wayne County Planning Partners and Faith Based Organizations.

### Plans

- WCPH Emergency Planner will be working on the WCPH HEOP Plan ,and submit as directed by NYSDOH deliverable L-1, updating the SNS Plan (needs to be updated and revised and resubmitted to NYSDOH as directed by NYSDOH deliverable L-2), updating the Pandemic Flu Plan and resubmit to NYSDOH when requested.
- Will continue to do yearly updates to all Wayne County Plans.
- Continue training/education of staff through drills/exercises/in-services and to assure WCPH Staff are appropriately trained in NIMS and ICS as needed.
- Attend state mandated meetings/conferences/workgroups/training/table top exercises to meet quarterly deliverables.
- WCPH Emergency Planner will continue to complete and submit all NYSDOH quarterly grant deliverables in a timely manner.
- Continue to attend monthly/bi-monthly and semi annual meetings as needed.
- Complete state mandated surveys in a timely manner.

**Christine R Bilynski, RN**

## **ANNUAL FINANCE REPORT**

### **State Aid**

State Aid Cuts:

The 2008 cuts had an immediate negative impact on Public Health Agencies. A 2% reduction in state aid affected all programs aid above the base amount of \$406,000.00. The State Health Department (Article 6 – general Public Health Work) reduced the quarterly claims submitted after April 1, 2008.

State grant funding reduction % varied by grant. Wayne County received cuts to the Lead (2% or \$600) and CHSHCN (2% or \$416) grants.

COLA (cost of living adjustments) awards were paid in October. Original anticipated funds were reduced to 8.53% of grant dollars.

Early Intervention (Article 25) aid for tuition and transportation reduced reimbursement from 50% to 49%. Payments issued after April 1, 2008 at the 50% level were corrected by reducing future payments.

State Aid Application:

Maintenance of Effort documentation comparing base year to current year are now required with applications. Counties need to justify the differences in budgeted program cost.

A request for an extension was filed for 2008 aid due to CSEA union contract settlement not taking place until after the 2008 budget was adopted. Reports were completed in March and an amended budget was submitted with the application.

#### State Aid Audits:

State auditors are looking at inconsistencies in billing from other county departments when charges are considered direct. One example in Information Technology charges being billed as lump sums based on employees or number of ports, etc. They should be actual, consistent charges for services. Time studies are not appropriate direct charges.

#### Home Health Agency

The Home Care Agency (HCA) met with the State Insurance Department (SID) to share their members' experiences with home care services growth with managed care products. The meeting addressed concerns of home care agencies in their managed care interactions and securing adequate and timely reimbursement. A press for assistance for HCA members is requested. The Administrative Assistant attended the annual HCA Financial conference in August, where the major topic for this conference was working with managed care products. It has been a difficult process for agencies to establish contracts and receive reimbursement to this point. Hopefully HCA interaction with SID will assist.

The workforce rate adjustments for Certified Home Health Agencies for the period 2007-2008 have been approved by the state DOH. Medicaid rate adjustments for workforce direct-care personnel recruitment and retention were as posted in October.

The Office of Inspector General (OIG) published their 2009 work plan. Home health projects being reviewed included: Medicare claims review of 2008 to determine the extent to which home health resource groups (HHRGs) used in determining payments to agencies are accurate and supported by documentation in the medical record; Medicare payments review to identify trends in utilization patterns and reimbursement for services ordered; and appropriateness of Medicaid payments for Medicare-covered home health services.

McBee Associates completed their contract obligations to review our Medicare claims through December 31, 2007 for maximization of revenue. A total of \$9,531.41 was recovered. For any reimbursement received due to McBee adjustments, our agency pays 27.3% of revenue received or \$2,602.07.

CMS repeated the 2008 2.75% cut in Medicare reimbursement for 2009 due to the case-mix adjustment. (The case-mix determines how episodes are paid.)

State statistical reports DOH 155, 518 & 519 were completed. Information was entered in the Health Provider Network and submitted in July.

The decreasing profit over the last few years causes concern for the continuance of home care services in public health. The agency, County Administrator and County Board members as part of a newly formed 21<sup>st</sup> Century committee began looking at the viability of this service in late 2008. See cost reports below. A review of the CHHA (SNAPCHHA) was done in July-August to project profitability of our agency in 2008. It is anticipated a profit of \$52,000 to \$100,000, demonstrating another substantial decrease in profit for 2008.

## **Cost Reports**

### Home Care

Jack Venesky Associates reviewed the 2007 cost report in July. The Direct costing method, which includes cost within the public health agency alone, demonstrates a profit of \$165,000. The full costing method, which includes indirect cost, demonstrates a loss of \$156,000. The agency provided 9,961 overall visits. The visits by payer source break down as follows: Medicare 37%, Medicaid 48%, and Other Payers 15%. The Direct costing method profit dropped \$46,000 from 2006 and the visit count dropped by 1,184.

The 2007 Medicaid cost reports for our Home Care and PCA programs are completed from information submitted during the Medicare cost report preparation. Reports were filed in July and September.

### Diagnostic & Treatment Center:

Cost reporting for 2006 activity was delayed until January 2008. The 2006 D&TC Report to Management (RTM) was reviewed with Venesky Associates in the 2<sup>nd</sup> quarter.

The 2007 cost report was completed and reviewed in September. Jack Venesky Associates audited financial and prevent team records prior to submission of the cost report in August. The report was submitted to Medicaid in September.

## **Grants**

The American Lung Association of New York Inc. has awarded Public Health with a new grant in the amount of \$8000. The contract between the Regional Community Asthma Network of the Finger Lakes (RCAN) and the Wayne County Public Health began in March and is part of the NYS DOH Asthma Coalition funding through the American Lung Association.

The 2007 Migrant grant was extended until 3/31/08. Additional funding on \$18,750.00 was received to support the three month service extension. Whereas the current year funding was significantly reduced, the extension funding helped to supplement grant funding for 2008.

## **Medicaid**

The Regional Finance Group discussed the Possible cut in Medicaid payments has a concern for 2008. Our Pre-K programs transportation reimbursement may be cut for Medicaid eligible children by June 2008. Early Intervention is facing the possibility of losing Medicaid revenue for service coordination on the Medicaid eligible children, leaving only the 50% state reimbursement.

Medicaid extended the use of legacy numbers until Sept. 1, 2008 when National Provider numbers (NPIs) replaced them on billing forms.

## **Medicaid Cuts**

### Home Care:

Medicaid reimbursement reductions to home care providers enacted during the State legislative session held in late summer will to continue through the 2009-2010 Federal budget year. Currently we estimate our Home Care Medicaid reimbursement for 2009 to be at the same level as 2007 if visits are consistent, less a 1% trend factor that we received in 2007 that was discontinued in 2009.

### Pre-K:

We received notice from the N.Y.S. Education Dept. that as of June 2008 the County must request from all Medicaid families, a parental consent from for services annually. Families are not required to sign and it does not affect their

services if they don't. We can not bill without a signed form. This means, we could lose substantial Medicaid revenue. We are currently receiving 65-70% of the signatures. All efforts are being made to obtain signatures. Having to obtain retroactive signatures to June 2008 has been difficult as the children's school district enrollment meetings have already taken place and some children receiving services in June are no longer in the program

### **Medicare**

The change in the Home Health Agencies Medicare PPS claiming procedures has been a major transition for staff. The computer system needed to be set-up and updated as changes occur. Supply codes and cost are entered individually into the Horizon system, claim format changes were made, and billing began.

Staff attended a Medicare "Ask the Contractor" web training to review PPS billing updates.

### **Insurance**

Staff attended Preferred Care Update meeting. Preferred Care representative requested electronic billing as required in contract. Our system was unable to accommodate changes in claims. We are looking at software to correct this.

### **Charity Care**

NYS DOH provided clarification of the policy and regulatory interpretation for payments to Certified Home Health Agencies for Charity Care. The definition of charity care required to be utilized by the CHHA in completing their annual cost reports reads: "Charity care is provided at no charge or reduced charge for the services the agency is certified to provide to patients who are unable to pay full charges, are not eligible for covered benefits under Title XVIII or XIX of the Social Security Act, are not covered by private insurance and whose household income is less than 200 percent of the federal poverty level."

There had been previous guidance that implied that agencies could claim the difference between the cost per visit and the Medicaid reimbursement for that visit. This clarification stated that any previous guidance issued by the Department which is or may be understood as inconsistent with this definition of eligible charity care should be disregarded. Without the ability to claim this difference, counties are not meeting Charity Care requirements of 3.3%.

In December the NYSDOH required submission of a plan for complying with this requirement of 3.3%. the plan needed to include policies and procedures assuring that our agency has a process for determining eligibility for charity care consistent with the definition in the regulations, and evidence of notification to referral sources about the agency's charity care policy. Wayne County has policy and procedures in place and includes a statement in our referral source brochures that no one will be turned down due to inability to pay. These documents were submitted as evidence.

The Regional Finance group discussed this problem of not being able to meet the 3.3% requirement. As more managed care and lower income insurance products are available, and as outreach to enroll lower income families in Medicaid continues, it is difficult to find population with no insurance.

HCA (Home Care Association) has proposed that the requirement be changed and the Governor 2009-10 budget proposes modification. HCA's proposal would change the requirement to be consistent with hospitals .5%.

### **Pre-K:**

Counties received information regarding Federal Budget cuts removing their share of CPSE administrative cost. This has created additional expense for counties. We will still receive 59.5% state reimbursement on our cost but will see an estimated increased cost of \$17,570 minimum. This increase would affect our 2009 budget. Four districts currently do not bill administrative cost. If they start billing, we will see another substantial increase.

A new system for billing Pre-K Medicaid is available. The system is web-based and will streamline billing/reimbursement. Training for billing staff is taking place at this time.

## **2009 Budget Preparation**

The Administrative Assistant met with unit supervisors and the Director to discuss 2009 budget needs. The proposed budgets were completed and submitted to the Public Health Director and County Administrator in August. October meetings were established with the County Administrator to review proposals and to make any adjustments needed before presentation to the Health committee in late October. After submission of the budget, the county received several additional grant cuts and the governor's proposal for program and aid cuts in 2009. Estimates of the impact of these possible cuts were submitted to the County Administrator and Finance Officer.

## **Regional Finance Group:**

Members discussed counties moving finance departments to the Treasurer's Department. Counties doing this would have to have a memorandum of understanding (MOU) with the Treasurer Dept. so expenses could be considered direct expense, not indirect. Indirect expenses are removed from direct state aid. The group addressed problems with not having accounting staff on-site and dealing with everyday issues, retrieving data, etc.

The group addressed an emergency clinic that happened in Erie County with a HEP incident. Niagara County assisted with vaccinations. No reimbursement was received for nursing time. Should this be a mutual agreement between counties to assist or should the state be contacted. State nurses can do Rapid HIV test if a county can't, so possibly the state commissioner's office may have funds to assist.

The Municipal Health Service Plans review will be looking at billing maximization. Agencies need to use all revenue sources. Counties discussed TB billing for Direct Observed Therapy. Counties a working with Medicaid to see if billing nursing visits provided to positive cases can be claimed. The group is also looking into billing for child immunization administration.

Agencies compared charging policies for Well child Clinic and Adult Immunization Clinics. Well Child clinic procedures varied between counties. Some use sliding fee scales, some don't charge. All counties in the group do not bill other payers for Adult Immunization Clinics. They all just charge the patient.

The trend of public health departments selling their home care agencies but still wishing to maintain the Maternal Child Health & MOMS programs was discussed. In order to retain these programs a certificate of need needs to be submitted to N.Y.S. DOH and the agency would apply to be a licensed agency rather than a certified agency.

## **SAY Network**

The Finance Committee provided 2007 program updates for Early Intervention and Pre-k enrollment and transportation. This tool is used to be used by Directors and Program Coordinators to assess program activities, discuss enrollment figures with school districts, and compare transportation and program cost.

Current contractor information was gathered for the management group to review and/or compare rates paid for services.

SAY finance committee invited county Pre-K and Early Intervention billing personnel to two meetings to assist new employees and to network with each other.

SAY contracted with Jean Heddi, former DPS of Jefferson County and Thomas Denison, Financial Analyst, Professors at Syracuse University and Home Care Assoc. Board Member, to study our CHHAs to see why some are profiting and others are not, and to look at the possibility of joining forces in any way.

**Other:**

The Administrative Assistant met with County auditors in April to review revenue accounts and 2007 accrual accuracy.

Staff attended HIN training to learn about changes in HIN site setup and document and information retrieval process.

Staff attended Bioterrorism IS300 training in September.

National Provider numbers were entered in the Medicaid (emedny) web-site in August. Attending Physicians, staff nurses, and contractor I.D.s were included.

**Sally J. Smith**

**HEALTH EDUCATION ANNUAL REPORT**

**GRANT PROJECTS & TASK FORCE ACTIVITIES**

**NYS Governor's Traffic Safety Committee Grant**

**Child Passenger Safety Seat Program – 3 programs (\$14,000)**

**FITTING STATION SEAT INSPECTIONS\***

- 98 child safety seats were inspected
- 89 child safety seats were replaced

Compared to 2007:

- 73 seats inspected
- 60 seats replaced

**CAR SEAT INSPECTION EVENTS**

- 5 major child safety seat check events
- 172 seats were inspected
- 108 seats were replaced

Compared to 2007:

- 6 events
- 215 seats were inspected
- 126 seats were replaced

Public Health works collaboratively with the Finger Lakes Safe KIDS Coalition, and Wayne & Ontario County Sheriff's Offices with their car seat programs.

**LOW- INCOME DISTRIBUTION PROGRAM\***

- 109 car seats were distributed

Compared to 2007:

- 97 car seats were distributed

\*2 certified child passenger safety seat technicians, Lisa Roth and Ginny DiBella, are responsible for managing the Fitting Station and Low-Income Distribution programs. In times of need, they are assisted by Patricia Juhl, also a PH employee and certified technician.

**NYS Governor's Traffic Safety Committee Grant  
Bicycle Helmet Program – 2 programs (\$6,000)**

**HELMET DISTRIBUTION PROGRAM**

Location	# of helmets distributed
Huron	69
Ontario	18
Lyons	40
Clyde	31
Newark	74
Sodus	30
<b>TOTAL</b>	<b>262</b>

**Head Start Programs**

Location	# of helmets distributed
Ginna Safety Fair	33
Clyde Children's Fair	88
Wayne County Fair	155
Ganada Health Fair	108
Hope Village	44
Newark Fire Dept.	34
Macedon Elem. Day	39
<b>TOTAL</b>	<b>501</b>

**Community Events**

**Appointments or**

**Walk-ins at Public Health Office: 95**

**Total # of helmets distributed during grant year = 858**

**EDUCATIONAL PROGRAM & MISC.**

- One bike rodeo was completed by the Sheriff's Office in conjunction with a "family fun day" at Macedon Elementary School. 30 children participated in this event.
- Nylon drawstring sport packs were given to each child that received a helmet. The sports pack included bike safety information and a coloring book, a bike reflector, silicone bracelet and the bag served as a place to store their new helmet and prevent it from being damaged.
- Posters promoting the free helmet program were distributed to local agencies, offices and departments who provide services to children and families (DMV, Head Start, Dept of Social Services, Cooperative Extension, Doctor's offices, etc). Through the application process we were able to track how people heard about the program. The majority of applications stated they heard of the program either through fliers/posters, word of mouth or attending an event where helmets were being offered (health fair, public health clinic, etc.).
- Comparison data: 2006-2007 helmets distributed = 200
- Wayne County Public Health is extremely pleased with the success of the bicycle helmet distribution program this year. Our goal was to distribute 300 helmets and that goal was nearly tripled. Many needy families were reached that otherwise may not have been able to afford to provide their child(ren) with a bike helmet.

**NYS Department of Health Lead Grant**

- Assisted the Preventive Services Team in implementing grant objectives once the NYSDOH approved the grant (several months behind schedule).
- Preparation and distribution of materials at health fairs
- Coordinated an educational presentation at the Quality Inn for physicians
- Organized a media campaign with Lamar Outdoor Advertising for the placement of billboards around Wayne County for Lead Awareness Month in October.
- Also organized the WATS bus media campaign which encouraged 1) pregnant women to be tested for lead and 2) parents to have their children tested for lead poisoning at ages 1 and 2
- Purchased incentive items

**Finger Lakes HIV/STD Coalition**

- Attend quarterly meetings and participated in various activities to increase testing services in the Finger Lakes area. This coalition is facilitated by the NYSDOH AIDS Institute

### **Wayne County Cancer Screening Partnership**

- Served as the Program Coordinator for the Cancer Screening Partnership.
- This new grant year brought challenges of integrating the breast & cervical cancer screening program with the colorectal screening program. A great deal of time was spent working with contracted staff at NWCH to ease this transition and assure program services were running smoothly.
- 455 women received breast cancer and cervical cancer screenings in 2207-2008, which exceed our goal of 415.
- The goal for 2008-2009 was 400. As of 12/31/2008, 403 men and women have been screened for breast, cervical and colorectal cancer. Three months remain in the grant year, so the goal will again be exceeded.
- Participated in monthly on-site visits with my Regional Manager from the NYSDOH.

### **Finger Lakes SAFE KIDS Coalition**

- Attend meetings and trainings
- Focus on child injury prevention activities
- Participated in 3 car seat inspection events with other agencies in the coalition.

### ***OTHER ACTIVITIES***

#### **Annual School Nurses Meeting**

- Coordinated the annual meeting for school nurses
- 47 people attended the day long program – which included school nurses from both Wayne & Ontario Counties

#### **Misc. –**

- Special events were coordinated for Child Passenger Safety Week in September. The annual seat check was held at the Newark Fire Dept on 9/20/2008. This was done in conjunction with the Wayne County Sheriff's Office, Ontario County Sheriff's Office, Crystal Beach Fire Department, and Finger Lakes Safe Kids Chapter. 80 seats were inspected and 47 seats were replaced.
- Assisted PH nursing staff with several flu clinics from October - December.
- Attended the Annual Child Passenger Safety Conference that was held in New Jersey. Earned CEUs that will enable me to retain my certification for the program that expires in 2009.
- Attended 2008 HIV/AIDS Rural Update.
- Participated in a health fair for school staff and faculty for the Wayne Central School District.
- Participated in two Emergency Preparedness Trainings.
- Assisted Wayne County Cornell Cooperative Extension (CCE) program by reviewing mini-grant applications submitted for their elementary school Eat Well Play Hard project.
- Attended a training about Health Literacy.
- Collaborated with Wayne County CCE on a childhood obesity grant.
- Attended Regional Cancer Screening Partnership meetings.
- Participated in a health fair for staff at Wayne CAP.

### **COALITIONS/TASK FORCE/COMMITTEES**

- Lifetime Care Advisory Committee - Chairperson
- Wayne County Cancer Screening Partnership - Coordinator
- Finger Lakes STD/HIV Coalition
- Head Start- Health & Nutrition Services Advisory Committee
- Wayne County Agencies Network
- Finger Lakes SAFE KIDS Coalition
- Cooperative Extension Eat Well Play Hard Coalition
- Wayne County Rural Health Network Health Literacy Sub-committee

- Newark Health Schools Team
- Cooperative Extension Nutrition & Consumer Science Advisory Committee

**HEALTH EDUCATION PROGRAMS**

<b>Program</b>	<b>Location</b>	<b>Audience</b>	<b># Prgs</b>	<b># Reached</b>
STDs	Finger Lakes Community College	Students	2	43
	Drug Recovery Program	Participants	2	30
	Lyons Jr-Sr High School	Students	3	40
WCPH Services	Sheriff's Office	Jail Committee	1	14
Dating Violence	Newark Jr-Sr High School	9-12 <sup>th</sup> grade students	5	88
Car Seat Safety	Lyons Head Start	Parent Group	1	2
	Newark Head Start	Parent Group	1	12
	Newark High School	Driver's Ed Class	1	32
	Sodus Head Start	Parent Group	1	1
	EGG Group	Expect. Parents	1	6
	Wayne Behavioral Health	Staff	1	8
Germs	Lake Ontario ABCD	3-5 yr olds	1	12
	Red Creek ABCD	3-12 yr olds	4	35
Nutrition	Lake Ontario ABCD	3-5 yr olds	3	32
	Red Creek ABCD	3-12 yr olds	4	67
	Mrs. Cobb's Pre-School	3-4 year olds	1	7
Dental Health	Mrs. Cobb's Pre-School	3-4 year olds	1	7

**2009 Health Education Objectives:**

1. Child Passenger Safety Program-
  - NYS Governor's Traffic Safety Committee Grants
  - Child safety seat fitting station
  - 3 Major car seat check events
  - Low-income distribution program
  - Bike helmet education and distribution grant
2. School Nurses Meeting
  - Continue to coordinate yearly meeting and work collaboratively on issues relevant to school nurses.
3. Cancer Screening Partnership of Wayne County
  - Manage and oversee program staff and functions in order to meet new program guidelines and standards.

**Lisa Roth**

**HEALTH EDUCATION ANNUAL REPORT**

Health Education Programs

<b>Program</b>	<b>Location</b>	<b>Date</b>	<b>Audience</b>	<b>#Programs</b>	<b>#Participants</b>
Smoking Cessation	MH-Substance Abuse	1/9	Adults	1	12
Smoking Cessation	MH-Day Treatment	2/13	Adults	1	10
Smoking Cessation	MH-Substance Abuse	3/5	Adults	1	8
Smoking Cessation	Public Health	4/2-4/23	Adults	4	4
Smoking Cessation	MH-Substance Abuse	4/30	Adults	1	14
Smoking Cessation	Hannick Hall	5/6- 5/27	Adults	4	80
Open Airways for Schools	Palmyra Elem. School	5/6 – 5/21	4 <sup>th</sup> Grade Students	6	30
Secondhand Smoke	Newark Head Start	5/5	Parents	1	3
Smok. Cess Supp. Group	Hannick Hall	6/23	Adults	1	20
Smoking Cessation	Mental Health	7/2	Adults	1	16
Tobacco Education	Red Creek ABCD	7/15	Pre-school + 6-12 yr. olds	3	40
Dental	L.O. ABCD	8/6	Pre-school	1	34
Tobacco Education	L.O. ABCD	8/20	Pre-school	1	40
Bike Helmet Fitting	Public Health	9/4	Staff	1	4
Smoking Cessation	Otte Hall	10/30-12/11	Adults	5	48
Tobacco Education.	Newark MS	11/5-12/17	Students	6	37
<b>Totals</b>				<b>38</b>	<b>400</b>

Task Forces and Grant Projects

**RCAN (Regional Community Asthma Network)**

- 2006/2007 prevalence survey data and reports will be completed and distributed to schools.
- 2008 NYS DOH workplans and budgets have been approved. Included in the budget is the position of Asthma Care Coordinator for Wayne County. WCPH staff member Dawn Rose has contracted to fill this position.
- New asthma clinic guidelines will be promoted by the coalition over the next year.
- Asthma Action Plans have been adapted for use electronically by providers.

- The clipboard project originally to be done by Red Creek High School, has been changed to Pal-Mac High School. The school nurse has already done the Asthma 101 presentation for physical education staff in 2 schools and plans to train others in the district this spring.
- A new course, Managing Asthma Triggers (MAT), is being offered to school nurses and taught by RCAN member Linda Khalil.
- I taught the Open Airways for Schools course at Palmyra Elementary School in the month of May for six sessions.
- Asthma Prevalence Survey: 2006 data was presented and discussed. 2007 data input is under way and will be available late spring. 2008 survey should be distributed to RNs K-6 in April.
- Funding for the Coaches' Clipboard project will not continue from the present source. Wayne County's pilot program continues with Pal-Mac High School.
- The RCAN updated resource listing brochure is now available.
- OAS kits have been updated. Trainings will start later in 2008.

## **S2AY**

- Social Marketing committee is now focusing on workplace wellness.
- I attended a presentation by Ron Goetzel in Hornell on 1/10/08 entitled "How Making Small Changes Can Positively Impact Your Company's Bottom Line."
- Social Marketing model training continues using obesity as the topic.
- Although work continues on workplace wellness, several meetings were devoted to work on the grant project of Alternate Care Solutions in the event of pandemic flu for the counties involved with the S2AY network. The grant year for this project ends on Aug. 1. The public health educators are charged with the responsibilities of documentation, education, and triage algorithm.
- A day in August was spent finishing the training for the Social Marketing Model- Version 2.
- A final meeting of the Alternate Care Solutions project was held in September. While it was ultimately deemed an unworkable plan in our rural counties because of lack of workers, resources, and money, there were positive outcomes from this project. They included:
  1. Discussion of a topic that people did not want to talk about before.
  2. Careful thought given to what could and could not be accomplished.
  3. Gathering together regional partners.
  4. The development of a template with operational pieces that can be explored by individual counties.

## **TACFL (Tobacco Action Coalition of the Finger Lakes)**

- Point of Purchase Retailer Campaign  
This campaign continues to target retailers in hopes that they will reduce or remove tobacco advertising especially aimed at children. Activities include locally airing commercials, post card mailing to all retailers, TACFL spokesperson visit to retailers, and municipality resolutions.
- Smoke-free Multi-unit Dwelling Campaign  
A general mailing will be done to all landlords once fact sheets are created by the NYSDOH asking them to go smoke-free.
- No Thanks Big Tobacco  
A mailing which included policy cards was sent to @700 events, organizations, and event planners. The purpose is to keep the tobacco industry from sponsoring our community events and organizations.
- 2008 Recognition and Celebration event was held on May 1, 2008 at the Ramada Inn, Geneva. Linda and I attended this event which honored businesses, organizations, schools, and hospitals for their commitment to a Tobacco-Free Finger Lakes.
- On June 3, the cigarette excise tax on cigarettes increased \$1.25/pack to \$2.75. It is expected that this price increase will also increase the desire for current smokers to quit.
- Work continues in each county to have one multi-unit dwelling adopt a smoke-free policy. Currently no unit in any TACFL county has such a policy.
- So far, 11 organizations have adopted policies stating they will not accept tobacco industry money. The goal is 24 organizations (6 per county).

- The Reduce, Remove initiative is asking retailers to adopt policies to reduce or remove tobacco advertising from the retail environment. Municipalities are also being asked to adopt resolutions in support of limiting/removing tobacco advertising.
- TACFL now has a website- [www.SmokeFreeFingerLakes.com](http://www.SmokeFreeFingerLakes.com)
- Committees were formed to work on TACFL programming. I will serve on the Smoke-free Multi-unit Dwelling committee for the 2008-9 grant year. Activities being planned include:
  1. Media campaigns to educate the community about secondhand smoke
  2. Direct mailing to tenants including a survey to see if they support this initiative
  3. Work with environmental health officers on this campaign
  4. Work with other partnerships to educate landlords
  5. Direct mailings to landlords with survey to see their standing on the initiative
  6. Research subsidized housing
  7. Research insurance companies
  8. Advocate with apartment cleaning companies

**PROUD (Promoting the Reduction of Underage Drinking)**

- An updated church list was done for Wayne County in hopes that we could meet with clergy members to address the issue of underage drinking. About 125 invitations went out and one pastor attended the Faith Forum.
- Since we can't get the community involved, we will not be having a stakeholders meeting. Future direction of PROUD will be discussed in the next meetings.
- Plans were made for PROUD to share a booth with the Council on Alcoholism at the Wayne County Fair this August. Hopefully, this will promote interest and recognition in the PROUD partnership.
- The first round of C-Chex was done in April and the percentage of stores passing was the highest ever. The next round is scheduled for October 2008.
- There was discussion of the delivery of training materials to retailers. This would include a video and some literature as well as offering TIPS training.
- The second round of C-Chex was scheduled for October. A new list will be written for C-Chex so that they check those establishments that have not been checked. Certificates were given to town supervisors to distribute to those establishments that passed.

**Eat Well Play Hard**

- There is a new website: [www.eatwellplayhardwayne.org](http://www.eatwellplayhardwayne.org).
- Mini-grants for sustainable physical activity projects were awarded.
- Future projects and events-
  - Sole Power
  - Color Me Healthy curriculum for preschools
  - Coordinated project with school food service directors and local farmers and processors
- Review of 2009 workplan was done with comments incorporated into the plan before being sent to the EWPH manager.
- Reports on programs and campaigns were made-
  1. Making Healthy Choices and Jump into Reading at Florentine Hendricks Elem. School.
  2. 1% or less milk campaign
  3. 4-H Teen Ambassador lock-in
  4. "Power Down, Dream Big" TV turn-off week
  5. Sole power scavenger hunt
- 6 additional mini-grants were awarded for physical activity projects

**Health Schools- Newark School District**

- WCPH educators were invited to join the staff from Newark High School to work on a School Health Index for that school. The group broke up into smaller groups with each one responsible for the completion of a module. The groups will report their findings at future meetings.

- A vision statement was proposed and consensus was reached on the wording. The group also brainstormed ideas for a logo representing the mission statement.

### Other Activities

#### Bulletin Boards

Healthy Habits  
Biking Safety  
Great American Smokeout

Nutrition Month  
Summer Safety  
Holiday Safety

Public Health Week  
Child Passenger Safety

#### Car Seats

Fitting Station-  
Distribution- 51  
Inspection- 54  
Events- 9

#### Baby and Me...Tobacco Free

Sessions- 34

#### Press Releases

Articles- 58

#### Smoking Cessation- NRT

Sessions-3

#### Bike Helmet Fittings

Public Health-22  
Head Start Programs- 6  
County Fair

Hope Village  
Gananda Middle School  
Ginna Health Fair

- Car seat training for Mental Health
- Clergy Forum for PROUD 2/25
- Wayne Central Health Fair 2/8
- Newark Hospital Health Fair 3/25 and 4/30
- School Nurse In-Service 2/28
- Garlock Health Fair
- Wayne County Fair
- Gananda Health Fair
- TACFL Recognition Event
- WCAP Health Fair
- Flu Clinic

#### Trainings

Wellness in the Workplace 1/10  
Health Literacy 1/24  
L7 (HIN training) 8/19

5 A's (Cessation Training) 8/14  
Social Marketing 8/25  
GETS/WPS 9/15

#### Conferences

Child Passenger Safety Seat Atlantic City  
Conference 9/24-26

#### Meetings

TACFL- 7  
RCAN- 1  
Palmyra School Nurse

S2AY- 5	Tobacco Free Committee
HSAB- 3	Safe Kids
PROUD- 5	GRATCC
Eat Well, Play Hard- 3	Newark MS/HS Prevention Counselor
Healthy Schools (Newark)- 1	Newark Head Start Coordinator
PH Staff- bi-monthly	Asthma- PH staff
BT- Alter. Care Site- 3	

2009 Health Education Objectives:

1. Continue anti-tobacco message through media campaigns- newspapers, billboards, printed materials.
2. Increase smoking cessation and prevention programs in schools and communities in the county.
3. Increase number of patients receiving NRT through public health program.
4. Expand Open Airways for Schools program in the county for third through fifth grade students with asthma.
5. Offer general asthma education to all students in kindergarten through second grades.

**Virginia DiBella BS, MS**

### COMMUNICABLE DISEASE ANNUAL REPORT

As a local health unit, we are required by New York State law to investigate and report all state reportable communicable diseases, as well as outbreaks of any communicable disease. Following is a summary of investigations conducted for 2008, excluding rabies and tuberculosis.

#### Reportable Diseases Investigated

	<b>2008</b>	<b>2007</b>
• Aseptic meningitis	6	7
• Campylobacter	9	18
• Chlamydia (STD)	185	218
• Cryptosporidia	3	2
• E. Coli	0	2
• Ehrlichiosis	1	0
• Giardia	6	10
• Gonorrhea (STD)	14	15
• H. Flu	0	1
• Hepatitis A	0	1
• Hepatitis B (Newly reported)(Chronic)	17	19
• Hepatitis C (Newly reported)(Chronic)	167	200
• Influenza	338	77
• Legionellosis	4	2
• Listeria	3	0
• Lyme	3	3
• Pertussis	0	10
• Salmonella	7	11
• Strep Group A	6	2
• Strep Group B	11	6
• Strep Pneumoniae	10	10
• Syphilis (new)	5	0

**Miscellaneous Investigations**

- Out of County 10 20
- Unconfirmed 35 38
- Teaching on Head Lice treatment ongoing as requested
- Perinatal Hepatitis B ongoing

<b>Total Investigations:</b>	<b><u>2008</u></b>	<b><u>2007</u></b>
	<b>841</b>	<b>673</b>

We continue with surveillance of the Newark Wayne Emergency Department through the NYSDOH Communicable Reporting System for unusual diseases or clusters of disease that may indicate bioterrorism activity or emergence of a new trend.

We continue to act as a resource for providers, schools, and community members for a variety of communicable disease and immunization matters.

In 2008 the nursing staff participated in numerous in-service programs, conference calls, and satellite broadcasts on a variety of communicable disease topics in order to remain current with any new updates, policies, and procedures in the communicable disease program.

**Valerie C. Edell RN, BSN**

**WAYNE COUNTY PUBLIC HEALTH FLU CLINICS**

During the 3<sup>rd</sup> annual National Influenza Vaccination Week of December 8-14, 2008, New York State Department of Health and Centers for Disease Control and Prevention would like to remind you of the seriousness of influenza and the importance of providing annual vaccination throughout the influenza season. Each year, an estimated 2,500 NY residents die of influenza. During the 2007-2008 influenza season, NYS had 8 pediatric deaths.\*

Some of the activities that we did during National Influenza Immunization Week were delivered posters to daycares and libraries targeting children and seniors. The posters were urging them to protect themselves and their families. We also posted posters at our Health Services Building urging health care workers to protect their patients by getting a flu shot. We sent e-cards to every county employee, county health professional and physician offices urging them to obtain flu shots. Newspaper articles written by the CDC were sent to local papers for publication. Our nursing staff attended a webinar on Current Issues In Immunization, hosted by the CDC on December 12<sup>th</sup>. We held an all day flu make up clinic for the community on December 18, 2008. Finally we posted all pertinent information about the flu, schedules, etc on our county website.

We offered pneumococcal vaccine at our flu clinics. This is a 1 time dose unless it has been received prior to age 65yrs or a physician requests the patient receive additional doses.

The amount of flu vaccine ordered for 2008-2009 was 2,200. Approx 273 doses are left as of Dec. 31<sup>st</sup>. Additional data will be available when flu season ends in March. In the meantime we continue to immunize residents at our Adult Immunization Clinic, Children's Clinics, CHHA, and by appointment. Our staff will be meeting with all departments involved with flu clinic in March to discuss how clinics went, how we might improve our services, and plan for the 2009-10 flu season.

<u>Location</u>	<u>2006</u>	<u>2007</u>	<u>2008</u>
Red Creek	69	84	62
Clyde	103	145	137
Lyons	187	154	154
Sodus	107	104	149
Palmyra	213	185	214
Ontario	64	43	83
Newark	231	134	150
Wolcott	77	56	75
Court House	43	N/A	69**
Mental Health	33	N/A	N/A**
Health Services Building	N/A	69	63**
WCPH make up clinic	N/A	68	66
Misc/Home Care	72	74	78

<u>New Locations</u>	<u>2008</u>	
Migrant (ABCD's)	32	
Butler	31	evening clinic 4-7pm
Macedon	50	evening clinic 4-7pm

<u>School Districts</u>	<u>2007</u>	<u>2008</u>
Wolcott MS		39
Gananda HS	25	30
Wayne Central	74	
Pal-Mac	26	56
North Rose Wolcott		39
Red Creek HS		27

<u>Business</u>	<u>2007</u>	<u>2008</u>
ARC #1	40	
ARC#2	42	
Park Lane		11
Heluva Good Cheese	31	49
Dr Pepper/Snapple	43	40

\*NYSDOH

\*\*Some of the statistics were totaled into Health Services Building. Next year all county employees will be listed under one category.

**Sharon Yerdon, LPN**

### **ADULT IMMUNIZATION CLINIC YEAR END REPORT**

Adult Immunization clinic is held on the second and fourth Wednesday of each month. It is staffed by 1-2 PHN's from the Prevent Team. We provide immunizations to the adult population who need to keep their immunization status current. The immunizations that we provide are as follows: Tetanus-Diphtheria, Tetanus-Diphtheria-Pertussis, Flu, Pneumonia, MMR, HIB, Varicella, Hepatitis A, Hepatitis B, Twinrix, and Meningococcal vaccines.

In 2008 we held 24 regularly scheduled Clinics. At these clinics we provided immunizations to 187 adults. In addition we also held clinics for employees at Red Creek School District, Clyde Savannah School District, and Head Start. At these clinics we provided immunizations to 115 people. The number of Immunizations given breaks down as follows:

Flu	63 compared to 69 in 2007
Hepatitis A	38 compared to 47 in 2007
Hepatitis B	164 compared to 109 in 2007
HIB	04 compared to 03 in 2007
Menactra	07 compared to 17 in 2007
MMR	28 compared to 26 in 2007
Td	08 compared to 03 in 2007
Tdap	24 compared to 35 in 2007
Twinrix	26 compared to 18 in 2007
Varicella	08 compared to 04 in 2007

In 2008 we had 11 scheduled flu clinics that were held in the community. In addition we also held numerous flu clinics for employees at businesses and schools. From October – December 2008 Wayne County Public Health gave approximately 1, 930 flu shots.

In 2008 the nursing staff attended the following meetings to remain current with any new updates, policies, and procedures in the Immunization Program:

- Finger lakes Adult Immunization Coalition Meetings quarterly
- National Immunization Conference in Atlanta Georgia in March 2008.
- NYSDOH Immunization meeting in Cooperstown NY in April 2008.
- CDC Vaccines Across the lifespan conference in May 2008.
- CDC annual Immunization update web cast in August 2008.
- Adult Immunization meeting in Batavia NY in September 2008.
- Metommune Vaccine update in service
- Glaxo Smith Kline vaccine update in service
- Various Flu and NYSIIS updates for 2008.

Outside of clinic, nursing time is spent on clinic preparation and clinic follow-up including records, appointments, billing sheets, patient education, vaccine and supply management, and continuing education.

**Valerie C. Edell, RN, BSN**

### **IMMUNIZATION PROGRAM**

**Goals:**

Wayne County Public Health Immunization Program follows the Standard for Pediatric Immunization Practices, Healthy People 2010—Primary Prevention, and our Immunization Action Plan Grant Contract.

- We will continue to increase immunization levels in children two and under by using AFIX and daycare reviews.
- Eliminate any barriers for children to receive immunizations.
- Schedule clinics to target children for age appropriate immunizations.
- Provide educational opportunities to medical providers, childcare providers, and school nurses by hosting CDC teleconferences and speakers.
- Identify areas of need in Wayne County and assist providers to achieve optimal immunization of preschool and school age children.
- Continue to support and assist New York State Immunization Information System (NYSIIS).
- Prepare a plan to improve immunizations in the adult population.
- Support and maintain training of staff for possible Flu/Bioterrorism/Ginna response.

## **Immunization Action Plan (IAP)**

### **Assessment, Feedback, Incentive's and Exchange (AFIX):**

The New York State Immunization Program has implemented an Assessment, Feedback, Incentive, and Exchange (AFIX) to:

- Assess immunization levels of one and two year olds
- Analyze provider immunization practices
- Make recommendations for improving immunization levels

The following AFIX activities were completed for the year 2008:

- AFIX completed at Sodus Community Health on January 24, 2008, post visit was completed on February 13, 2008.
- AFIX completed at Dr Riggs on April 23, 2008, post assessment completed on May 28, 2008. Dr Riggs rates were 100%. He received a certificate of achievement from the NYSDOH.
- AFIX completed for Wayne Medical Group offices (VOW-Sodus, Newark, Williamson, and Wolcott) at Rochester General Hospital. D Devlin SPHN and I met with C Watson RN, QA. Information was received from Healthy Shots registry as a download. Post assessment was completed on September 10th; it was over a month, due to various commitments and amount of data to be reviewed. Follow up plan developed.
- Met with Wayne County Providers throughout the year to provide immunization information and discuss changes occurring within the registry.
- Wayne County Public Health's clinic assessment was completed on September 15, 2008.

### **Site assessments:**

The assessment determines compliance with requirements for daycare, nursery school, and pre-K entry. A list of children with missing immunizations is given to the daycare provider. We request the provider share this information with the parent so they can follow up with their physicians.

- Immunization assessment completed at the following: ABCD Red Creek on January, 10th and ABCD Williamson on March 11, 2008.
- Roosevelt Daycare was scheduled for December but was cancelled by nurse. Reason given was they had completed the school survey and QA team didn't think a review was necessary at this time.

### **VFC (Vaccine For Children)**

VFC is a federally funded program to provide underinsured or uninsured children with access to vaccines at low cost or free of charge. Wayne County Public Health and most Wayne County pediatric and family physicians participate in this program.

The following are site reviews that WCPH assisted the NYSDOH for the year 2008:

- Incorporated partial VFC visit at Sodus Community Health on January 24, 2008
- Incorporated partial VFC visit at Dr Riggs on April 23, 2008
- VFC visit was completed at WCPH on June 11, 2008 by J Ranches, NYSDOH. Several recommendations were made but the most important was to purchase a new vaccine refrigerator as looking at the temperature logs the temperature appears to be fluctuating. With the cost of vaccines we don't want anything to happen where we could lose the vaccines thus losing money.

### **Immunization/Lead Partnership**

Dawn Rose, RN and I coordinate our immunization and lead program visits to the area pediatrician's office at the recommendation of the NYSDOH.

- Continue to hand out items at Children's Immunization and Well Child Clinics, reminding parents about lead testing at 1 and 2 yrs of age.
- Also while supplies last, we continue to distribute items at our AFIX's, daycares, and lead assessments with the message immunize by 2, lead test at 1 and 2.
- Lead assessment completed at the following: Sodus Community Health on Jan 24 2008.
- Lead testing was reviewed at Dr Riggs on April 23, 2008. Rates and information were given at follow up on May 28, 2008.

- WMG all offices were reviewed for lead testing. Lead materials were given and reviewed with Wayne Medical Group on September 15, 2008 with C Watson, RN and Mark Irwin, RN.
- Lead assessment completed at the following: ABCD Red Creek on January, 10th and ABCD Williamson completed on March 11, 2008.
- Continue to enter birth certificate data to be used as a resource for lead testing reminder birthday cards
- Andrea Fratangelo continues to mail birthday cards to all one and two year olds.

**Immunization Registry & County Consortium:**

- Completed last data entry into Healthy Shots. Completed training for the new NYSIIS (New York Immunization Information System), continue to enter children seen in clinic. Consents are no longer needed for children 18 years and under per PH Law 6821. We now consent 100% of adults.
- April 25, 2008 visited Canal Park Family Practice to assist with training and begin implementing transition from Healthy Shots to NYSIIS.
- Trained nursing staff at Dr Riggs office on NYSIIS on September 11, 2008.
- Sent information packets regarding NYSIIS, the law (reporting all immunizations given to children in NYS after January 1, 2008) to remaining practices not participating in NYSIIS.
- Information on HIPPA and immunizations sent to two practices.
- Information sent to Dr Kachoria per his request.
- Canal Park Family Practice, Arcadia Family Practice, Clyde Family Practice, Dr Riggs, and all Wayne Medical Groups have fully implemented NYSIIS.
- Participate in all NYSIIS conference calls and web casts.
- Attended quarterly mandated NYSIIS Users meetings. Received updated program information.

**Clinics:**

Immunization Clinic	2005	2006	2007	2008
Preschool	112	100	153	114
New	105	88	154	136
Total Seen	197	167	281	135

**Additional clinics held during 2008:**

- Additional clinics were added to the schedule for July 30<sup>th</sup>, August 6, and September 22<sup>nd</sup> to administer the mandated Tdap immunization for admission into 6<sup>th</sup> grade and immunize children attending daycares and kindergarten.

**CDC Conferences, Education:**

**Hosted:**

- Lisa Roth, Health Educator and Dawn Rose, RN Lead Program Coordinator hosted a Lead Conference at the Quality Inn in Newark on March 4, 2008.
- Lisa Roth, Health Educator hosted the Annual School Nurse Teaching Day on March 28, 2008. Various members from the prevent team gave updates on their programs. A flyer was distributed with the summer clinic schedule so that the school nurses will be able to send a copy to the parents whose children might need immunizations prior to the start of school.
- Hosted the annual Immunization Update 2008 presented by the CDC.
- Hosted Immunization Net conference on December 12<sup>th</sup>. The focus of this conference was on Influenza Vaccination of Health Care Workers.

**Attended:**

- D Devlin, SPHN and I attended training on NYSIIS January 9, 2008.
- Staff attended mandatory in-service on January 15<sup>th</sup> on BT presented by C Bilynski, RN and Animals and Disaster presented by L Crane, LPN.
- Viewed the T2B2 web cast on January 17<sup>th</sup> Connecting Children and Families to Healthcare Coverage.
- Staff attended a post flu clinic meeting January 29<sup>th</sup>.

- C Bilynski, RN Clinic Coordinator attended the National Immunization Conference in Atlanta, GA from March 17-20, 2008.
- Nursing staff attended the mandated Skills Fair on March 26, 2008.
- **Several team members attended Ginna training and review, and participated in the State Drill.**
- Susan Sheets, RN and Veronica Lafave-Boughton, RN attended the State Immunization Conference week of April 8-10, 2008, in Cooperstown.
- Several team members attended the Finger Lakes 2nd Annual Immunization Conference (Pediatric & Adolescent Disease Prevention, from Research to Practice) held on May 22, 2008 in Canandaigua, NY. Dr William Atkinson and Donna Weaver, RN from the Center for Disease Control in Atlanta were two of the guest speakers.
- Pam Taylor, SPHN, Carol Monsees, SPHN, Tina Peters, RN and I attended the 5<sup>th</sup> Annual Heart of Nursing Conference (Balancing Work and Life) in Geneva on May 1, 2008.
- Dawn Rose, RN and I attended a Lead Conference in Albany on June 3<sup>rd</sup> and 4<sup>th</sup>, 2008.
- C Bilynski, RN and I attended the mandated NYSIIS meeting on June 12, 2008 in Rochester. I offered transportation to medical staff from physician's offices who planned on attending. Met with several practices to disseminate the information, work with training, and assist in whatever capacity they need me.
- Completed HCS training August 11, 2008 in fulfillment of L7grant deliverable for county agencies.
- Team members attended the CDC, Immunization Update for 2008, on August 28, 2008.
- Team members attended the Adult Immunization Conference in Batavia on September 28, 2008.
- In-service presented to team on new vaccine (kinrix, pentacel, and rotarix) by GSK representative on September 15, 2008.
- Team members attended Current Issues in Immunization on December 12, 2008.
- Sent CDC e-cards to Wayne County employees, PH nursing staff, and physician offices as a reminder to get you flu shot. These were sent out in conjunction with National Influenza Immunization Week December 8-14, 2008.

#### **Miscellaneous:**

- Shortage on Hib vaccine continues, it may be resolved in 2009. Following CDC's guidelines.
- Info put on WCPH web site regarding NIAM (National Immunization Awareness Month)..
- Wayne County physicians emailed regarding NIAM and information on CDC website.
- Wayne County Fair: display posters and immunization information dispersed.
- Submit quarterly reports to supervisor regarding IAP contract commitments met during our contract year.
- Attend mandated quarterly meetings for NYSIIS, NYSACHO, NYSDOH, WCPH, and Prevent Team meetings.
- Vaccine management reports for children, adult, and STD clinics to the NYSDOH
- Remain on the Bio Terrorism case investigation and clinic teams
- Assist the TB Program, when needed, with monthly HV's, and DOPT visits.
- Assist with Children's Immunization Clinic, Well Child Clinics, and TB Clinic qmonth, as assigned. Assist with Flu clinics every season. Assisted with the evening immunization of migrants with D Rose, RN.
- For information on Flu Vaccine and Public Health's status, see V Edell, RN SPHN report.

**Sharon Yerdon, LPN**

### **CHILDHOOD LEAD POISONING PREVENTION PROGRAM YEAR END REPORT**

The Wayne County Childhood Lead Poisoning Prevention Program is a case management program mandated by New York State Health Department. Currently the program is made up of an MCH RN who takes referrals, does data entry and reports and disseminates information to parents and guardians, makes educational visits, makes referrals for environmental investigations, and follow up with primary care providers, and an SPHN who provides supervision and program planning for the program.

The Lead Program follows children up to age 6 and pregnant women. All the lead results for children and pregnant women who reside in Wayne County are received by the Lead Program through electronic mail system set up by the NYSDOH office of Heavy Metals Registry in Albany. These results are entered daily into an extensive database called Lead Web. Depending on the child's lead level, other information is entered in Lead Web for case management purposes.

All children ages 1 and 2 are to be tested yearly for lead poisoning. Other children are tested based on the analysis of a risk assessment tool which identifies areas of increased risk such as pre 1960 housing, chipping or peeling paint, siblings or playmates with elevated lead levels, living near or having a parent work in an industry likely to release lead (i.e.: construction, welding, battery recycling, etc.).

Children with levels of lead 10-14 mcg/dl are sent an informational packet from the lead program that includes risk reduction and nutrition educational information, and are rechecked in 3-4 months until their lead levels are less than 10 mcg/dl.

Children with levels of lead 15-19 mcg/dl also receive the same interventions mentioned above. In addition, finger stick lead levels are confirmed with a venous sample, and nursing visits are made to assess sources of lead exposure.

Children with levels of lead 20-44 mcg/dl receive a nursing visit by the MCH RN for case management, which includes a complete medical evaluation, iron status, neurobehavioral assessment and referral to the NYDOH for environmental investigation to determine the source of lead exposure in the child's home. Once identified. Lead hazards are abated by the homeowner, with supervision and follow up completed by the NYSDOH district office and Wayne County Public Health Lead Poisoning Prevention Program.. Children with these lead levels who are 0-2 years old are also referred to the Child Find Program for evaluation and follow up.

Children with levels of lead 45-69 mcg/dl receive all above-mentioned interventions. In addition medical treatment and environmental assessment are begun within 48 hours. Children with levels in this range also are considered for chelation therapy, which is a medical intervention designed to reduce lead levels.

Children with levels of 70 mcg/dl and greater are considered to be a medical emergency. Medical treatment, including chelation and environment investigation are begun immediately. Children should be referred to a health care provider and facility who are experienced with treatment of lead poisoned children. In this area, Rochester General Hospital is the Regional Lead Poisoning Treatment Center.

Medical management and chelation are provided by a team of doctors and nurses experienced in the treatment of lead poisoned children.

In 2008, the Wayne County Childhood Lead Poisoning Prevention Program received 1729 reports of lead levels in children age 6 and under living in the county. Of that number 1688 were in normal range which is generally considered 0-10 mcg/dL, 26 were 10- 14 mcg/dl, 8 were 15-19 and 7 were  $\geq$  20 mcg/dl. All children received follow up appropriate for their lead levels, as outlined above. This is a increase from 1684 reports received in 2007.

In 2001 we started sending Birthday Cards to families with 1 and 2 year olds, with a remainder that their lead screening needs to be done. We continued to send these throughout the 2008 year also. We provide information about lead as well as immunizations and child health plus with the Birthday Card. By increasing the public awareness we hope to increase lead screening. Due to the increase in testing in the last years it is felt that we may be starting to increase lead testing need awareness in the public. Leading Parents to ask their Primary Care Physician about testing their child for lead.

#### Other Activities

1. We included an update on lead in a training program offered to School Nurses, and Head Start personnel.
2. Risk assessment sheets and samples of educational materials on Lead Poisoning Prevention was shared with the school nurses to use in their upcoming kindergarten, preK and Head Start registration activities.
3. Distributed Lead Poisoning Prevention information bibs, and sand pails lead information as reminders about lead and testing at the County Fair in August.

4. Billboards were displayed through out the county in 2 locations asking if their child was tested. We also used the Wayne Area Transportation Buses to advertise testing of children and Pregnant women and they are continuing to have those signs on them in some cases where new advertisement has not come to replace the Lead advertisement.
5. When doing Immunization AFIX reviews we also check to see if lead testing is being done as well as distributing information to the MD practices about universal lead screening. Dawn Rose, RN has gone to sites of AFIX reviews with Sharon Yerdon, LPN, and has set up times with each office to give a power point presentation on Lead to as many staff as possible.
6. Home visits are made to families with children having lead levels over 14.
7. "Cleaning Kits" have been used in conjunction with home visits to families with children with lead levels greater than 14, to reduce risk and exposure.
8. The Coordinator of the program is on the Housing Consortium for the county.

Goals

- Continue testing of all 1 and 2 year olds and increase the testing of pregnant women, and those at risk
- Identification of areas of concern within the County.
- Continue to increase the public's awareness of Lead Poisoning and its effects and sources and the ways to avoid or reduce family's risk of exposure.
- Continue to work to improve working relationships with the Physicians and assist in the tracking of children with elevated leads.
- Continue to provide information to interested groups like landlords, contractors, code enforcement officers and homeowners about the reduction of Lead and Lead Poisoning.
- Continue the Birthday Card reminder program for families with children at 1 yr. and 2 yr. To encourage the parents of 1 & 2 year olds to ask their primary care physician about lead poisoning screening.

**Dawn Rose, RN**

**MIGRANT PROGRAM ANNUAL REPORT**

**Program Mission**

- To provide a bridge between the providers of health, social and community services for the migrant and seasonal Farmworker population in our community.
- To act as an advocate on the behalf of the migrant and seasonal Farmworker community and its population with the appropriate providers.
- To communicate health promotion, health maintenance and client's rights in the health and social service system with migrant and seasonal Farmworkers and their families.

**Program Purpose**

- Protecting the health and welfare of the migrant and seasonal Farmworker population helps protect the health and welfare of all the residents of our county.

**2008 Year to date Client Services**

2008 Migrant and Seasonal Farmworker Health Program Services					
Services Provided	2008 Quarterly Totals				2008 Cumulative Totals
	1 <sup>st</sup> Quarter	2 <sup>nd</sup> Quarter	3 <sup>rd</sup> Quarter	4 <sup>th</sup> Quarter	
Clients	43	55	57	52	<b>207</b>
Contacts	261	299	78	236	<b>874</b>
Health Education	44	281	84	236	<b>645</b>

Transports	7	16	19	6	<b>48</b>
Interpretations	31	79	43	13	<b>166</b>
Referrals Received	16	35	28	25	<b>104</b>
Referrals Outgoing	1	2	0	0	<b>3</b>

### Six-Year Comparison of Client Services

Migrant and Seasonal Farmworker Health Program Work Flow Comparison Chart						
Services Provided	Comparisons by Year					
	2002	2003	2004	2005	2006	<b>2007</b>
Clients	102	94	91	86	206	<b>203</b>
Contacts	831	945	860	1820	1918	<b>1897</b>
Health Education	247	45	320	474	448	<b>456</b>
Transports	29	64	31	17	46	<b>56</b>
Interpretations	571	474	394	298	344	<b>267</b>
Referrals Received	66	61	49	36	80	<b>110</b>
Referrals Outgoing	90	90	97	67	122	<b>87</b>

### Program Focus

The Wayne County Public Health Migrant & Seasonal Health Program provides Public Health Services to Migrant and Seasonal Farmworkers and their families residing in Wayne County.

### Funding.

This program is Grant funded through the New York State Department of Health. Our grant is for \$ 45000.00 / year. The Grant initial contract period for this award is 4/1/2008 – 3/31/2009 may be renewed for up to four additional one-year periods.

### Staffing

Our program is fully staffed with one Registered Nurse Coordinator and one Bilingual Community Health Worker. Our report reflects the services provided by the Wayne County Public Health Service Staff as a whole.

### Community Health Education & Community Service

- Car Safety Seats were supplied to Migrant and Seasonal Farmworker Children through the Child Safety Seat Program.
- We purchased addition infant car seats in the 1<sup>st</sup> quarter of this year so that this service would continue.
- Interpretation services were provided to Car Safety Seat Program, Children with Special Needs, and the WCPH TB program
- Continue to assist with the WCPH Pandemic Flu planning meetings
- Serve on the WCPH ICS team.
- The WCMHP has received 7 referrals from FLMHCP to perform 3<sup>rd</sup> quarter prenatal home visit assessments and post partum and newborn home visits assessments. WCMHP continues to receive referrals from NWCH for any migrant woman that have delivered.
- WCMHP feels that Tuberculosis is very prevalent in the migrant community and more measures need to be taken to protect the health of our Wayne County residents. We continue to offer Farmers who work with this population yearly TST to assess for exposure. We would like to do more testing of the migrant population and are planning to work with FLMHCP to add on to their in camp clinics next year.

### Networking

We continue to be active and participate with the following groups / associations:

- Wayne Agencies Network
- Wayne County Coalition of Farmworker Agencies
- Wayne County Health Services Advisory Committee for the Lake Ontario and Red Creek Agri-Business Child Development Centers
- Wayne County Nutrition Outreach and Education Program Advisory Board
- WCMHP continues to provide diabetic teaching with the migrant community after receiving a referral from FLMHCP.

**Goals/Plans**

- Goal met: NYSDOH and WC BOS reports completed and deadlines met.
- Goal met: The 2008 Lake Ontario and Red Creek AgriBusiness Child Development Centers' Public Health Education was done during the summer months..
- Goal Ongoing: Obtain 2009 Memorandum of Agreements for the Lake Ontario and Red Creek Agri-Business Child Development Centers', Finger Lakes Migrant Health Care Project, and WIC.
- Goal Ongoing: Continue to serve the Wayne County Migrant and Seasonal Farmworker residents, both permanent and transitory, under the guidelines of our program.
- Goal Ongoing: Continue to attend Networking meetings, serve on Advisory Boards, coordinate and perform Health Education instruction as per Public Health Policy and MHP Workplan.
- Goal Ongoing: Meet Wayne County Board of Supervisors' and NYSDOH report deadlines.

**Dawn Rose, RN**

**NEWBORN SCREEN PROGRAM YEAR END REPORT**

The goal of newborn screen is early identification of children at increased risk for selected metabolic or genetic disorders so that medical treatment can be promptly initiated to avert metabolic crises and prevent irreversible neurological and developmental sequelae. At this time, we test for Thirty-two disorders. New York State does free testing on every newborn – the familiar “Heel Prick”.

Wayne County Health Service gets involved when we are notified by New York State Department of Health in Albany, Newborn Screen Unit, that a repeat specimen needs to be collected. Usually, this is requested due to unsatisfactory specimen but can be due to abnormal test results. The hospital of birth and primary physician are notified first. If they both fail to obtain a specimen, then we are notified to help in this matter.

We are usually successful by notifying the appropriate person by letter or telephone call telling the family that a repeat has been requested Occasionally we make a home visit to the child’s parents to educate in this procedure. Wayne County Public Health has an excellent rapport with area hospital labs and pediatricians.

The number of requests was 44 in 2008. In 2007 there were 27 requests.

**Goals**

Our program goal is to assist in obtaining a specimen in a timely manner, usually as soon as possible, to protect the children in Wayne County from the effects of these metabolic disorders.

**Susan Sheets, RN**

## **STD CLINIC ANNUAL REPORT**

The WCPH STD clinic continues to be staffed by 1-2 Public Health Nurses from the Prevent Team. Our contract nurse practitioner is Janine Quinlan. The focus of our clinic is diagnosis, treatment, and education about prevention of disease transmission.

We continue to hold clinic 2-4 times a month. We offer testing for gonorrhea, Chlamydia, vaginosis, HIV, syphilis, and Herpes. We offer treatment for the bacterial and viral diseases, excluding HIV treatment. We also provide immunizations for hepatitis A and hepatitis B. We continue to provide treatment to clients who are referred to clinic by other providers.

We work closely with the New York State Department of Health, Rochester office, to test and treat contacts of identified cases. Total number of STD's reported in Wayne County for 2008 is on the Communicable Disease annual report.

In 2008 WCPH held 31 STD clinics. 220 people attended, 27 Twinrix vaccinations were given, 1 Hepatitis B vaccination was given, and 5 Hepatitis A vaccinations were given. 128 HIV tests were done.

In 2008 we also gave 48 Twinrix vaccinations to inmates at the Wayne County Jail.

In 2008 the nursing staff with the health educator did STD education in the following community settings:

- Lyons high school health class on two different days.
- FLCC health class on two different days.
- Three students from Williamson High School public policy class.

In 2008 the nursing staff attended the following meetings to remain current with any new updates, policies, and procedures in the STD program:

- Conference call and web cast by NYSDOH on testing of Defendants of Felony Sexual Assault.
- Attended a skills day in service training.
- Attended the Finger Lakes HIV Coalition meetings in Canandaigua quarterly.
- Attended a Glaxo Smith Kline in service on Twinrix vaccinations and other updates.
- Attended CDC annual immunization update web cast.
- The nursing staff continues to be a part of the Bio Terrorism case investigation and clinic teams.
- In addition to STD clinic, this RN also assists in Children's Immunization clinic and Well Child clinic monthly, and manages Adult Immunization Clinic which is held 2 times a month. This RN also worked flu clinics.
- Outside of clinic, nursing time is spent on clinic preparation and follow-up. This includes chart review, management of supplies, patient education, and continuing education.

**Valerie C. Edell RN, BSN**

## **TENDER CARE PROGRAM/MATERNAL CHILD HEALTH/MOMS ANNUAL REPORT**

After it's reestablishment in 1995, the Maternal Child Health (MCH) program is now in its 13<sup>th</sup> year. The purpose of this program is to help Wayne County families provide for optimal birth outcomes for mother and baby. This is accomplished through home visits to pregnant women and parenting families, bringing educational information and demonstrations as needed. The Maternal Child Health program also provides educational programs to the public through schools, libraries, Even Start and WIC.

Wayne County Public Health applied to the State Department of Health to become a Medicaid Obstetrical and Maternal Services (MOMS) provider which allows for presumptive Medicaid. Certification was received in October 2000. Having this

certification allows for immediate entry into prenatal care in a timely manner and provides physician referrals as needed. The MCH/MOMS program helps promote healthy infants in Wayne County by getting pregnant women into prenatal care as soon as possible.

This joint program is currently made up of a Registered Professional Nurse who assists with the Medicaid application process as well as making home visits to provide educational information. This information includes, but is not limited to pregnancy, nutrition, labor & delivery, breastfeeding, infant care, immunizations and child safety.

Also involved in the program is a Supervising Public Health Nurse who oversees the activities of the staff and education programs offered. Collaboration with other agencies throughout Wayne County allows for a variety of information & support for these families. Referrals to other service agencies are made as needs are identified by the maternal health nurse or physician.

The MCH/MOMS nurse also provides/assists with a variety of educational programs to many groups throughout Wayne County. Among these programs are the following:

1. Infant Growth and Development
2. Health Issues and Children
3. The Health Needs of Children
4. Lead and the Hazards of Lead
5. Healthy Babies, Healthy Families
6. "Baby Think it Over"
7. Childhood illnesses and daycare.
8. Infant, Toddler and Family Nutrition Issues
9. Prenatal, Post partum and Breast feeding issues and nutrition
10. Perinatal Smoking Cessation (Baby and Me Smoke Free)

Throughout 2008- 287 referrals were received for the MCH/MOMS program services. Medicaid applications were filled out for 186 of those referrals.

The MCH nurse was also involved with several committees in the Wayne County area as well as Finger Lakes area. The following is a list of these groups.

1. Wayne County Parent Educators Network (Wayne P.E.N.)
2. Parent Support Connection Advisory Board through the Wayne County Action Program.
3. Wayne County Health Education Coalition (Wayne CHEC)
4. Head Start Health & Nutrition Advisory Committee
5. Finger Lakes Regional Perinatal Forum

#### Program Activities:

1. Home visits to enrolled families as indicated with education in all areas needed. Re: infant care, growth and development of fetus, infant and child, nutrition, pregnancy risks, prenatal education, etc.
2. Worked with the Migrant Program to provide MCH materials and education to migrant farm workers. Provide MOMS/MCH Program to pregnant migrant farm workers as needed
3. Visits with prenatal clients who need health insurance to do Medicaid paperwork and do HIV/STD risk assessment, Nutritional assessment and basic prenatal education.
4. Case management and follow up for MOMS clients who are applying for Medicaid.

#### Program Goals:

1. Continue to work with WIC to provide education to clients and WIC personnel on Maternal Child Health issues and trends. Also see clients they feel need additional education on a referral basis.
2. Continue to work with Wayne CHEC to provide risk reduction education to the youth in Wayne County schools, in an effort to decrease our teen pregnancy rates.

3. Continue to work on networking with other Wayne County Agencies to provide various programs on parenting, child health issues, and pregnancy.
4. Work with other Wayne County Agencies to make families aware of Health Insurance needs of children and available low cost – no cost health insurance and assist to get these qualified children enrolled.
5. Continue to work with Monroe Plan to identify the needs in this county and provide the MOMS program to their clients, under Blue Choice Option.
6. Continue to provide programs to families in need as well as identified areas of need in our county and work to provide the resources needed by the parents of our county.
7. Expand the M.O.M.S program as needed to include education on and encourage breast feeding and improved nutrition, among young families through out Wayne County.
8. Work with various committees to develop programs to serve the pregnant or parenting Mothers and Fathers i.e. smoking cessation (Baby and Me Smoke Free), low cost or no cost childbirth classes, and breastfeeding support.
9. Continue the development of the Child Health Promotion Specialist Program and creating working relationships with daycare providers throughout the county to provide for child safe environments in accordance with Healthy Children New York and The New York State Department of Health. This will include but is not limited to:
  - Development of a brochure for the program
  - Mailing of these brochures to all Child Care Centers, Family Day Cares and Group Homes where children spend time.
  - Initiating agreements with Day Cares to provide this service
  - Providing trainings and consultation for Day Cares throughout Wayne County.

**Susan Sheets, RN**

**MOMS / MCH Referrals 2007 and 2008**

2007 MATERNAL CHILD HEALTH REFERRALS													
	JAN 2007	FEB 2007	MAR 2007	APR 2007	MAY 2007	JUNE 2007	JULY 2007	AUG 2007	SEPT 2007	OCT 2007	NOV 2007	DEC 2007	TOTAL YTD
Antepartum ****Migrant Program	20	14	19 (2)	17	27 (1)	13	21	20 (1)	17	11	13	12	204 (4)
Postpartum ****Migrant Program	6	2	2	0	1	1	3 (2)	2	0	4	5 (1)	2 (4)	28 (7)
Newborn ****Migrant Program	6	2	2	0	1	0	3 (2)	2	0	4	5 (1)	4 (4)	30 (7)
Child<1 yr*	0	0	0	0	0	0	0	0	0	0	4	3	0
Child>1 yr	0	0	0	0	0	0	0	0	0	0	0	0	0
Other**	0	0	0	0	0	0	0	0	0	0	0	0	0

2008 MATERNAL CHILD HEALTH REFERRALS													
	JAN 2008	FEB 2008	MAR 2008	APR 2008	MAY 2008	JUNE 2008	JULY 2008	AUG 2008	SEPT 2008	OCT 2008	NOV 2008	DEC 2008	TOTAL
Antepartum ****Migrant Program	16	8 (6)	10 (1)	21	14	16	14 (4)	9 (1)	18 (1)	19 (3)	17 (2)	23 (5)	185 (23)
Postpartum ****Migrant Program	4 (3)	6 (1)	5 (1)	8	7	2	4	1 (2)	8 (1)	1 (1)	0 (2)	0 (1)	46 (12)
Newborn ****Migrant Program	4 (3)	6 (1)	5 (1)	8	7	2	7	1 (2)	8 (1)	1 (1)	0 (2)	0 (1)	49 (12)
Child<1 yr*	0	0	0	0	0	0	0	0	0	0	0	0	0
Child>1 yr	0	0	0	0	0	0	0	0	0	0	0	0	0
Other**	0	0	0	0	0	0	0	0	0	0	0	0	0
MOMS*** Terminations Family Planning Benefits program	3	0	0	0	0	0	0	0	0	0	0	2	5
<b>TOTAL</b>	<b>33</b>	<b>28</b>	<b>22</b>	<b>37</b>	<b>28</b>	<b>20</b>	<b>29</b>	<b>17</b>	<b>37</b>	<b>26</b>	<b>23</b>	<b>32</b>	<b>332</b>

MOMS*** Terminations Family Planning Benefits Program Migrant	20 2	14 3	18	17 1	28 1	13	21	20	17 1	11	13	12	8
<b>TOTAL</b>	<b>33</b>	<b>18</b>	<b>23</b>	<b>18</b>	<b>30</b>	<b>14</b>	<b>27</b>	<b>25</b>	<b>18</b>	<b>19</b>	<b>29</b>	<b>25</b>	<b>275</b>

Total Referrals for the year 2008 332

Total referrals for the year 2007 275

\* Child < 1 yr. Refers to a child who is older than 6 wks at the time of referral but less than 1 yr of age

\*\* Other includes referrals made for any of the following: well child clinic follow up, bereavement, newborn screen, PKU obtinance, referral from adult or child protective.

\*\*\* The amount of prenatal referrals that involved presumptive Medicaid screening and applications.

\*\*\*\* The Migrant Program started taking the MCH referrals and they are making the visits and doing the follow up

Susan Sheets, RN

## TUBERCULOSIS YEAR END REPORT

New York State Public Health Law and the State Sanitary Code require reporting of all suspected and confirmed Tuberculosis cases to the local health department where a patient resides. All reports received by the local health department are sent to the New York State Department of Health. Therefore, the main purpose of the TB Program is surveillance, control and prevention of Tuberculosis in Wayne County.

The WCPH TB Program continues to be staffed with one full time RN. Other members of Prevent Team can provide coverage or assistance as needed. Our contract pulmonologist is Dr. Mark Frampton. Early morning and evening visits are made as needed to accommodate our migrant population and to insure completion of therapy. We also rely on the use of a BCHW-interpreter.

Following is a list of statistics and highlights for the TB Program for 2008:

- ❖ 72 referrals were received in the TB program. This compares to 106 in 2007.
- ❖ A total of: 1,079 nurse-client contacts were made during the year compared to 965 in 2007. They broke down as follows: 837(414 in 2007) nursing visits to screen for TB disease or preventative therapy consideration including TST clinics, 242(277 in 2007) nursing visits made for Preventive Therapy out of those 242; 151(103 in 2007) were for Directly Observed Preventive Therapy. No DOT completed in 2008.
- ❖ PPD Clinics continue to be held every Monday 10am-12noon except holidays. A total of 52 TST Clinics were held, 4 of them at Fire halls, resulting in 389 TST's that were placed compared to 414 in 2006.
- ❖ 12 TB Clinics were held resulting in 24 clients seen by MD. 48 referrals were reviewed but not seen by MD d/t deportation/left area.

The TB Program staff continued to further their education by attending various in-services and conferences throughout the year. These included:

- ◇ On 1/25/08 TB RN attended Emergency Management Mtg:BT/PODS.
  - ◇ On 2/04/08 TB RN attended teleconference about NYSIIS.
  - ◇ On 3/13/08 TB RN watched Webcast on HIV testing of defendants in rape cases.
  - ◇ On 3/24/08 HIV Teleconference completed.
  - ◇ On 3/26/08 LTBI: web based mtg., best practice strategies.
  - ◇ On 4/1/08 NYSDOH TB control made visit w/ no discrepancies found.
  - ◇ On 4/8/08-4/10/08 Went to Cooperstown: National Immunization conference.
  - ◇ On 4/29/08 S2AY mtg attended on TB and lab tests.
  - ◇ On 5/22/08 Attended IAP mtg in Canandaigua.
  - ◇ On 5/27/08 NYSIIS teleconference attended.
  - ◇ On 5/28/08 Attended mtg on Emerging Infectious Diseases and labs.
  - ◇ On 6/09/08 Attended STD/HIV coalition mtg in Mount Morris.
  - ◇ On 6/27/08 Watched Webcast on Pediatric TB.
  - ◇ On 9/9/08 Attended mandatory GINNA training.
- 
- ❖ Continued to complete and submit monthly HIV status reports on TB patients to NYSDOH.
  - ❖ Assisted w/ various clinics held within Wayne County Public Health building: STD, Adult immunization, CIC and Flu clinics.
  - ❖ Continued to go to jail to interview positive PPD inmates.
  - ❖ Monthly ARPE reports completed per protocol and submitted to NYSDOH.
  - ❖ Monthly Prevent meetings were attended and monthly PH staff meetings.
  - ❖ Fit tests done x3 this past year, for N95 respirator.
  - ❖ Help w/ CDESS inputting and ECLRS. Continuing education meetings attended pertaining to Prevent Team departments.

Please see the attached graphs and tables from the New York State Department of Health, Bureau of TB Control for statistics on TB in New York State.

**Veronica P. LaFave-Boughton, RN**

### **Well Child Clinics**

Our philosophy is to provide quality preventive care from birth to five years of age. This care will provide the family with the basis of optimal physical, emotional, and intellectual growth and development.

Wayne County Public Health Service will provide each child with a complete medical evaluation. Required immunizations will be administered according to ACIP guidelines. A licensed professional staff member will give each family anticipatory guidance, wellness promotion, safety, lead poisoning risk assessment, and nutritional teaching. Referral to other community resources will occur as indicated.

Clinic is by appointment only. Dr Shoemaker is the physician on the first Thursday of every month. A second clinic is added on a per need basis.

We encourage all children to have a primary physician and to use that physician whenever possible. We do not treat sick children. A referral list of family physicians and pediatricians is shared with all clients who do not have a physician. Information about Child Health Plus and other community resources are also provided.

There is a fee of \$35 per visit or a sliding scale according to income. No one is turned away due to inability to pay. A copy of all clinic visit records is sent to the child's primary physician.

### **Goals**

1. To provide quality well child health care, while promoting a primary physician for every child in contact with our services.
2. To promote wellness and give anticipatory guidance with each parent so they will be able to anticipate their child's needs and enjoy the various stages of development.
3. To assess the needs of the children and to involve them in an agreed upon plan of action.
4. Provide adequate follow-up for each child seen at WCC to ensure each child will receive health care either from our services or within a primary care practice.
5. Copies of all health records from WCC will be sent to the primary care provider.
6. To address any health management issues as they might occur.
7. To assist health care providers obtain the most up-to-date data thus alleviating fragmented medical care.
8. Enter all immunizations given on NYSIIS (New York State Registry).

### **Accomplishments**

1. We held 13 Well Child Clinics in 2008. We scheduled an extra clinic in September to assist with preschool and kindergarten physicals.
2. We offered nutritional guidance, dental care teaching, growth and developmental assessments. Educational information was given to accompany the verbal teaching. Lead screening was also completed on all children, where appropriate, sent for lead testing. Immunizations were given according to the ACIP guidelines.
3. Lists of area providers were given to all children in need of a physician or dentist.
4. Referrals were made, with the parent's permission, to a facilitated enroller for the Child Health Plus Insurance Program, Family Health Plus, and Medicaid.

5. We inform parents verbally and give them an appointment card at the time of the visit when the child needs to return for a follow up visit. Once an appointment is made we follow up with a reminder phone call the day prior to the appointment.
6. We continue to collaborate with Head Start to complete necessary physicals and immunizations for children entering into the Head Start program.

	2006	2007	2008
Appointments	55	115	109
Attended	37	92	81
New patients	31	76	59
Immunized	22	78	70
Referrals	05	20	02

**Sharon Yerdon, LPN**

## **Zoonoses Program Annual Report**

### **Rabies Program**

Rabies, first identified in Wayne County in 1993, has become well established in our wild population. The number of confirmed cases that we experience today has lessened as the front of the epizootic passed and the transformation from an epizootic state to enzootic occurred. Along with the reduced number of confirmed positive animals we see a cyclic pattern emerge that will contain occasional hotspots. This does not mean we can allow ourselves to become complacent, but that we maintain a high level maintenance program, remaining vigilant in our efforts to prevent the spread of this potentially fatal disease. Rabies is still considered to be 100% fatal and a significant public health threat.

Exposure to rabid and suspect rabid animals has led to 28 individuals receiving treatment in 2008. Bat incidents and stray cat episodes continue to be a leading factor in most of these cases. Pre-exposure vaccination is provided for local Animal Control Officers/ Rabies Field Responders protecting them from both direct exposure and in apparent exposure to rabies in the performance their job duties. Additionally, pre-exposure prophylaxis can decrease costs for future treatment substantially, if a bite/scratch from a rabid animal should occur. County costs may be partially reimbursed through Article 6 state aid.

In our attempts to reduce peoples risks for exposures, extensive public health education is made available to the public in a variety of ways, including but not limited to informational packets provided to individuals who experience bat related incidents. The packets will assist them in avoiding exposure, bat proofing their living quarters and excluding bats from their homes. Pet owners are made aware of the importance of vaccinating their pets and valuable livestock. Brochures, flyers, presentations are available upon request as well as being made available at numerous public agencies, town halls, health fairs and schools. The news media assists by publishing public service announcements 2 -3 times per year pertaining to rabies issues.

Specimen submissions for 2008 totaled 67. Out of this total, 8 tested positive for rabies, including 6 raccoons, 1 skunk and 1 bat from the towns of Arcadia, Rose, Lyons, Savannah, Palmyra, Marion, Sodus, and Macedon. All specimens tested were tested to eliminate or confirm the need for treatment, quarantine or euthanasia of a domestic animal that had contact with the suspect rabid animal. Other animals, which are not available for testing often create cases requiring multiple individuals to receive treatment or domestic animal quarantines.

WCPHS, Zoonoses Program provides 24 hour, 7 day per week coverage for rabies emergencies and inquiries. Staff is reached through WCPHS during regular office hours or through E911 for after hour's calls. After hour coverage includes screening for exposures, dispatch of rabies field responders for capture and transport to Lyons Vet Clinic, nuisance trapper/wildlife rehabilitation information, specimen submission, consultations with physicians and veterinarians, and

intake of animal incident /bite reports initiating appropriate follow up. Animal Incident reports total over 300 reports per year of which each report will generate some type of follow up by local health unit staff, animal control officers and rabies field responders. Ten day confinements and six month quarantines are mandated by the state and monitored by the local health unit in cooperation with rabies response and animal control.

Rabies clinics for domestic animals play an important part in Wayne County's Rabies Response Plan. Rabies vaccination is the single most important thing that we can do to prevent rabies in our community and it is mandatory that we hold clinics throughout the year. Domestic animals, especially pets act as a bridge between wildlife disease and human disease. Often pets, especially cats, compete with wildlife for food and sometimes shelter. Animals that are kept and fed outside will draw wildlife to your yard where contact can occur. Horses/livestock are fed and kept in barns where bats have been known to roost in colonies and wildlife go to find food and shelter. Cats often hunt and kill bats. Indoor cats escape and bats come sneaking into our homes. Unvaccinated pets can easily become exposed then develop rabies, bringing it into our homes and creating health risks to our families and neighbors. So you can see the importance of vaccination in the prevention of the spread of rabies.

Clinics were held in 8 locations throughout the county. Sites are rotated giving each town that desires a clinic a chance to host one. The 2008 breakdown for each clinic are included with this report. A total of 8 clinics were hosted throughout Wayne County, providing rabies vaccination to 1,431 pets. Donations to help defray the cost of clinics added up to \$4,167.41. Reimbursement for the remaining costs (\$2804.94) were included in the quarterly Aid to Localities grant where we are allowed \$5,000.00 towards the cost of providing these clinics. In totality the costs for these clinics are compensated by the donations of individuals utilizing the clinics and the NYSDOH Aid to localities grant.

### **Arbovirus Program**

This program encompasses West Nile Virus/ Lyme disease/ Tick Borne Diseases.

West Nile Virus is enzootic throughout NYS. It is spread by infected mosquitoes and continues to affect mammals, including humans and the wild bird population, primarily the Corvid family, including crows, ravens, and blue jays. Due to the lack of resources in our budget, we are no longer submitting birds for testing. We do report of dead/ill birds to the state reporting site. Passive surveillance of human disease is accomplished through our communicable disease program. There have been no cases of WNV reported in humans. Local Veterinarians have been asked to contact the local health unit with any suspected cases of WNV/Encephalitis or death in any of the mammals they see for further investigation. Updates from both the NYSDOH and the Wildlife Pathology Unit of the NYSDEC are provided to veterinarians as they come out.

Lyme disease continues to be an occasional health issue in Wayne County with 3 cases identified and confirmed in 2008. Lyme disease is spread by infected deer ticks causing serious disease in both humans and animals. Passive surveillance in humans is accomplished through the communicable disease program.

Nine ticks collected off pets by area vets and pet owners have been sent to Dr. Wayne Gall in Buffalo for identification and surveillance. In all 9 cases, the tick was identified as the blacklegged tick more commonly know as the deer tick, *Ixodes scapularis*. Most were at least partially engorged and 3-4 on a scale of 0 -5 which corresponds to a feeding interval of more than 48 hours. Unfortunately we cannot test the tick for evidence of infection, only advise the owner of the species of tick and that if the tick is of the blacklegged variety, it is the species of tick that is the primary vector of the agent causing Lyme disease. If the tick is infected the longer it feeds the higher the risk of transmission of infection. In humans, increased risk of infection occurs if the tick has fed for more than 36 hours. Improper removal of a tick could increase the risk of transmission of an infectious agent if the tick is infected. As long as we have resources available we will continue our surveillance of this important vector

**Lynn Crane, LPN**

## WAYNE COMMUNITY NURSING CARE - CHHA ANNUAL REPORT

We are the certified home health agency for Wayne County Public Health. We are the only agency that serves Wayne County exclusively providing skilled nursing, physical therapy, occupational therapy, speech therapy, home health aide and medical social work in the home setting. We have provided services to Wayne County residents since the early nineteen thirty's. Medicare was founded in nineteen sixty-six and we became a Medicare Certified Agency July first nineteen sixty-six. We provided services for five hundred and seventy patients with eight hundred sixty-eight episodes of care during the year. Sixty-three per cent of these referrals were from hospitals. Physician referrals generate another twenty-five percent of home care admissions. We provide nursing assessments for two-hundred and six personal care patient's for Wayne County Department of Social Services during the year as patient's are admitted and discharged from the program. We provide the nursing assessments for the personal care program.

Home care requires many independent practice functions that can only be done by a Registered Nurse. Home care practitioners work independently and assess patients with many diverse health care needs. Home care nurse require many hours of training for documentation needs under Medicare, Medicaid and other insurance payer. They need to be trained in federal and state requirements for OASIS, home assessments, coordination of services for patients, families and informal supports. To be able to bill for skilled assessments these must be done by Registered Nurses. The majority of our patients are admitted for circulatory, respiratory, cardiac and musculoskeletal conditions that required a great deal of case management due to the increasing aging of our population requiring home care services.

ICD9 coding training with case examples was provided for training of nursing staff. The CHHA supervisor provided written information to staff to provide additional education in coding. This has been a good way to train staff in use of ICD-9 coding changes. New codes and coding changes are implemented every October first by Medicare. Coding impacts our reimbursement, as reimbursement is based on the diagnosis for the episode of care. In 2008 Medicare had major changes in coding requirements for the second year. The coding system for home care and reimbursement had significant changes and updates effective for the last quarter. New coding books with updates were used for staff education and training.

Our nursing staff uses laptop computers to record nursing assessments, medical orders and all nursing documentation.

Our referrals come from hospitals, physicians, patients, families and other community agencies for skilled nursing, wound care, IV therapy, cardiac rehab, rehab nursing, diabetic teaching, PRI / Screen and home evaluations. We coordinate care with Wayne County DSS and Aging and Youth. We staff three Wellness clinics on a monthly basis for Area Agency on Aging and Youth.

Staff has received on-going training for OASIS, computers, documentation, IV therapy, wound care and diabetic care, and managed care updates.

We participate in the SAY network meetings monthly to update and revise our policies and procedures. We have changed from one large policy manual to several smaller manuals. Each manual is based on a particular topic such as IV Therapy, Documentation, Respiratory and many other topic areas. We now have several binders for our policies and procedures to provide easier and faster access for our staff.

Staff received training for GINNA DRILLS and participated in the drills during the year.

We complete multiple Oasis assessments on our patient's each month depending on their status in the Medicare system. The use of laptops and a software system with built in edits allows easier submission to Medicare.

### Goals for 2009

- Implementation of updates to computer system using air cards
- Staff training for OASIS changes
- Staff training for PPS
- Marketing for home care agency
- Improving agency processes to reduce costs

**ENVIRONMENTAL HEALTH SERVICES ANNUAL REPORT**

The NYS Department of Health's District Office in Geneva provides core environmental health services for the residents of Wayne County. In partnership with Wayne County Public Health Department and other State and Local agencies, the District oversees a variety of programs designed to protect public health and safety. Responsibilities include the enforcement of NYS Public Health Law and Sanitary Code regulations, and assessment and management of environmental risks which have potential for causing human illness or injury. Risk factors include contamination of food and/or water supplies, chemical or biological exposures, or physical injury hazards. Regulatory activities include the permitting and inspection of designated facilities as specified by the NYS Sanitary Code. These activities occur in a variety of settings including food service establishments, public water supplies and recreational and residential facilities. District staff participate on the County's Local Emergency Planning Committee and serve as the NYS Department of Health's environmental health representative at the Wayne County Emergency Operations Center during drills that simulate a radioactive release from the Ginna Nuclear Power Plant.

In 2008 there were approximately 795 operations in Wayne County covered by district office programs. Currently with 312 operations; the regulation of food service establishments represents the single largest environmental health program in Wayne County. Regulatory activities at Wayne County's 123 permitted migrant farmworker housing facilities were also significant. Other environmental health programs and services that are provided to Wayne County include: inspection, evaluation, and engineering plan review at public water supplies, work in the Adolescent Tobacco Use Prevention Act (ATUPA) program to ensure that tobacco retailers do not sell tobacco products to underage minors, and inspections and investigations of complaints at mobile home parks, public bathing facilities, campgrounds, hotels and motels and children's camps. In addition, district staff provide technical assistance to local code enforcement officers and local health officers to investigate and mitigate conditions that may constitute public health hazards.

**Noteworthy Environmental Health Activities for 2008:**

- Worked with Wayne County Public Health to conduct lead based paint risk assessments at five (5) private Wayne County residences in response to referrals of children with elevated blood lead levels. In addition 25 follow up field visits to initial assessments were conducted.
- Met with Wayne Co. Public Health nursing staff on a quarterly basis to develop and evaluate the Comprehensive Lead Poisoning Prevention Program (CLPPP).
- Issued one renewal waiver to a Newark (V) facility with an accompanying food service operation that will allow for continuation of smoking within a designated smoking room.
- Under the US Environmental Protection Agency's Beach Grant Act, conducted bacteriological monitoring of water quality at three (3) Lake Ontario beaches. Results from this monitoring resulted in temporary closures at two of the beaches.
- Participated with the County Emergency Management Office and Wayne County Public Health in the Ginna Power Plant State Monitored Drill.
- Investigated 8 complaints alleging unsafe and/or unsanitary conditions at Wayne County mobile home parks; 17 complaints alleging sanitary code violations at food service establishments, 3 campground complaints, 1 complaint at a tanning salon, and 3 complaints alleging smoking at food service establishments and/or places of employment.
- Worked with the Village of Newark on cleaning and repairing the Allerton Hill Reservoir.
- Worked with the Town of Savannah to reach a compliance agreement to install filtration at their public water supply source.

- Worked with the Village of Red Creek to install new water supply disinfection treatment system and recoat their water storage tank.
- Worked with the Village of Sodus Point to obtain funding for water system improvements.
- Worked with numerous municipalities to complete individual system evaluations as required by the Stage 2 Disinfection Byproducts Rule. (Williamson Town, Sodus Town, Sodus Village, Sodus Point Village, Wolcott Village, Lyons Village, Newark Village, Arcadia Town and Palmyra Village).
- Provided training to owners and employees of food service establishments with a focus on sound management principles to promote safe operations at these facilities.

**Program priorities for 2009**

- Review data from Stage 2 disinfection byproducts rule sampling for the affected municipal water systems.
- Work with Wayne County Water Authority to complete installation of Huron WD 5, Arcadia WD 10 and Marion Northeast Quadrant Phase II.
- Work with Wayne County Water Authority to complete installation of Marion Booster Pumping Station.
- Work with Sodus Town to complete Sodus Town WD 7.
- Continue to work to reduce the frequency of tobacco sales to minors through the Adolescent Tobacco Use Prevention Program.
- Continue to investigate complaints alleging violations of the NYS Clean Indoor Air Act (CIAA) and to explain the law to business owners that seek a waiver from CIAA requirements.
- Continue to monitor and follow-up with lead abatement activities at four (4) residences with active lead cases
- Implement regulatory activities (permitting and inspection) at commercial tanning facilities with the anticipated passage of recently promulgated tanning legislation.

**Nicholas Rich, District Director**  
**NYSDOH – Geneva Office**

