

Jefferson County Public Health Service

2018 ANNUAL REPORT



Our Mission: Dedicated to investing resources, responding to needs, and empowering people to attain best health through strategic actions and prevent illness, and promote and protect the well-being and productivity of all Jefferson County citizens and visitors.

Our Vision: All Jefferson County communities will actively prevent illness, promote health, protect themselves from health threats, and have access to high quality, evidence-based, cost-effective health services.

Our Values: Teamwork that promotes Caring, Safety, Excellence, Efficiency, Innovation, and Integrity.

Our Programs:

- Public Health Nursing
 - Communicable Disease Reporting and Control
 - Home Health Care · Preventive Nursing Programs
- Health Planning · Health Promotion Programs
- Rabies Control · Public Health Emergency Preparedness
- Physically Handicapped Children’s Program
- Children with Special Health Care Needs
- Diagnostic & Treatment Center
 - Immunization Clinic
 - STD/HIV Clinic
 - Travel Health Services
- Emergency Medical Services
- Medical Examiner

The department executes its mission through the Three Core Public Health Functions, and Ten Essential Public Health Services:

Assessment

- Monitor health status to identify community health problems.
- Diagnose and investigate health problems and health hazards in the community.
- Evaluate effectiveness, accessibility, and quality of personal and population-based health services.

Policy Development

- Develop policies and plans that support individual and community health efforts.
- Enforce laws and regulations that protect health and ensure safety.
- Research for new insights and innovative solutions to health problems.

Assurance

- 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.
- Inform, educate, and empower people about health issues.
- Mobilize community partnerships to identify and solve health problems.

Dear Friends and Neighbors,

The Jefferson County Public Health Service strives to protect and promote the health of individuals, families, and communities. With the strong support of County Administration and the Jefferson County Board of Legislators, we work with many community partners to offer and ensure a variety of programs and services to the residents of Jefferson County.

It is my pleasure to present the Jefferson County Public Health Service 2018 Annual Report. This report provides an account of our department’s efforts and accomplishments during 2018. As we embark on our journey to national Public Health Accreditation, we continue to explore ways to improve the quality, transparency, and accountability of the work we do to improve the public’s health, while remaining flexible in the rapidly evolving healthcare landscape.

I encourage you to review the information provided in this report, and to visit our website at www.jcphs.org, where you can review our Community Health Assessment and Community Health Improvement Plan. We welcome suggestions and feedback on our programs and services as we continue our commitment to the health of the residents of Jefferson County.

Public Health is a science and an art that connects us all. Our team of dedicated staff is committed to working with the communities we serve to ensure all receive the highest quality public health services; health disparities are limited; and healthcare equity, quality, and accessibility are promoted for all residents of Jefferson County.

Sincerely,



Ginger B. Hall, BSN, M.S.Ed, MPH
Jefferson County
Director of Public Health

ASSESSMENT

Monitor health status to identify community health problems

- The department implemented the County’s 2016-2018 Community Health Improvement Plan (CHIP) through collaboration with the Fort Drum Regional Health Planning Organization (FDRHPO) and the tri-county North Country Health Compass Partnership.
- CHIP priorities include: prevent chronic diseases; and promote mental health & prevent substance abuse. Chronic disease action items include establishing Complete Streets policies in at least 3 municipalities, and increasing wellness policies at 3 of 5 school districts with the highest obesity rates. Mental health and substance abuse priorities are to improve the infrastructure so that people seeking help with addictions can be served or referred, and to ensure mental, emotional, and behavioral (MEB) health protocols are implemented in primary care settings.
- There were 2,033 total live births. Premature births (infants born at <37 weeks) were 8.7% of all births, and 6.4% were low birth-weight (<2,500 grams). Premature births increased from 2017, however both of these indices are in line with the Healthy People Year 2020 Goals. 77% of infants were breast feeding in early postpartum, a slight decrease from 2017.
- Jefferson scored 33rd healthiest New York State county in 2018 as part of the national Robert Wood Johnson Foundation County Health Rankings. For length of life, Jefferson scored 30th; quality of life—32nd. A breakdown of Health Factor scores are as follows: Health behaviors— 60th · Clinical care— 31st · Social & economic factors— 48th · Physical environment— 18th. The County Health Rankings can be viewed at www.countyhealthrankings.org.

Diagnose and investigate health problems and health hazards in the community

- Surveillance for communicable diseases and identification of any biological or chemical threats continued.
- Leading Jefferson County Communicable Disease indices continued to be Sexually Transmitted Diseases, respiratory, and food-borne generated.

Jefferson County CD Indices	2017		2018	
	Freq.	Rate	Freq.	Rate
Campylobacteriosis**	60	51.0	64	56.0
Cryptosporidiosis**	32	27.2	37	32.4
E-Coli Shiga-Toxin	9	7.9	21	18.4
Giardiasis	17	14.5	21	18.4
Hepatitis B, Chronic	4	3.4	5	4.4
Hepatitis C, Acute	1	0.9	3	2.6
Hepatitis C, Chronic	68	57.8	74	64.8
Influenza, Lab Confirmed	606	531.6	1,325	1,160.4
Legionellosis	3	2.6	5	4.4
Lyme Disease**	19	16.2	53	46.4
Meningitis, Aseptic	6	5.1	6	5.3
Pertussis**	7	6.0	2	1.8
Salmonellosis	26	22.1	30	26.3
Tuberculosis ***	1	0.9	0	0.0

Jefferson County STD Indices	2017		2018	
	Freq.	Rate	Freq.	Rate
Syphilis (Early Latent)	5	4.4	9	7.9
Gonorrhea	122	107.0	102	89.3
Chlamydia	787	690.3	873	764.5

• Overall STD indices rose in 2018 and continue to trend upward in Jefferson County, New York State, and nationally at significant rates. Educational efforts to address and control STDs are focused on prevention and increasing screening with particular attention on high-risk populations. The Sexually Transmitted Infections (STI) Coalition continues to address the increasing numbers of STI/D cases by coordinating targeted prevention messages utilizing paid social media ads, as well as educating providers on appropriate follow-up with STI/D patients.

• Lead exposure in children decreased slightly overall. Of 3,007 provider screens, 120 children had lead levels of Pb 5-9 mcg/dl; 55 children had levels at Pb >10+ mcg/dl, which was a 35% decrease from 2017. All 175 children who were lead poisoned were followed-up with.

Evaluate effectiveness, accessibility, and quality of personal and population-based health services

• There was 1 active Physically Handicapped Children's Program case. Total active Children with Special Health Care Needs clients were 47, an increase of 67.8%. The program's data monitoring changed in 2017 to only count new referrals. The program has a focus on outreach and assisting special health care needs families with transitioning to adulthood. The department continued to partner with the Northern Regional Center for Independent Living (NRCIL) to provide educational sessions for families.

• The Home Health Care Programs continued its focus on reducing re-hospitalization of patients. Key areas focused on included patients having either congestive heart failure (CHF), myocardial infarction (MI), chronic obstructive pulmonary disease (COPD), pneumonia, or diabetes as their primary diagnosis. The agency's re-hospitalization rate for 2018 was 12.20%, a slight increase over 2017.

• 2018 National Patient Satisfaction Benchmark System findings for JCPHS home health care patients showed of 584 patients surveyed, 233 responded (40%) with 83% rating their care 9 or 10 on a scale of 0-10; 79% would definitely recommend; 86% having no problems with care received; 82% satisfied with communications about care provided; and 78% satisfied with specific care issues.

• The department continued operating its Quality Assurance/Performance Improvement (QAPI) structure, with Quality Management meeting bi-weekly to discuss department priorities and emergent issues; Continuous Quality Improvement (CQI) meeting bi-weekly to discuss patient care priorities; QAPI Public Health meeting quarterly to discuss communicable disease, clinic, health promotion, and public health emergency preparedness priorities; QAPI Finance meeting quarterly to discuss department financial priorities and issues; QAPI Home Care quarterly meeting to discuss home health

care priorities and issues.

POLICY DEVELOPMENT

Develop policies and plans that support individual and community health efforts

• The QAPI Public Health Committee members continued working on tasks 6 charted in the its 2017-2019 Strategic Plan. Goals and strategic initiatives include:

GOALS	STRATEGIC INITIATIVES
1. Leading Public Health in Jefferson County Linked to PHAB* <u>Domain 4:</u> Community Engagement	<ul style="list-style-type: none"> Promote awareness of public health services in Jefferson County.
2. Improving Health Linked to PHAB <u>Domains 3 & 10:</u> 3 - Inform & Educate 10 - Evidence-Based Practices	<ul style="list-style-type: none"> Strengthen our STD/HIV Clinic: a) add an NP Provider; b) increase social media presence to educate the public. Strengthen maternal/infant care in Jefferson County by contacting every new (first-time) mother of a newborn, and every mother of a high-risk newborn, and offer a home visit. Collaborate and integrate all services with Fort Drum (e.g. Dog Control, Communicable Disease Control, NYSIIS, STDs, Preparedness). Measurably impact chronic disease incidence in the population by enhancing diabetes education and impact strategies. Measurably impact mental health and substance abuse in the population by enhancing partnerships to increase community dialogue and develop comprehensive systems strategies that increase prevention programming, as well as access to care and treatment. Advance public health preparedness.
3. Achieving Accreditation and Assuring Quality Linked to PHAB <u>Domain 9:</u> Quality Improvement	<ul style="list-style-type: none"> Evaluate and continuously improve health department processes, programs and interventions. Develop a Quality Assurance (QA) Plan/Program. Apply for PHAB Accreditation.
4. Strengthening Organizational Capacity Linked to PHAB <u>Domain 8:</u> Workforce	<ul style="list-style-type: none"> Increase department operational efficiencies by maximizing use of all technology utilities. <p>*PHAB = Public Health Accreditation Board.</p>

• A work plan for each strategic initiative continued to be implemented in line with the county's 2016-2018 Community Health Assessment (CHA) and Community Health Improvement Plan (CHIP). Key tasks achieved included: Hired a Nurse Practitioner to work for the department's HIV/STD clinic and to see complicated Maternal/Infant/Child Health (MICH) patients in the home setting; hired a part-time RN to work for MICH services; continued to work on increasing the numbers of municipalities that adopt Complete Streets policies by establishing a partnership with the Tug Hill Commission—with Watertown adopted, and the villages of Alexandria Bay, Carthage, and Deferiet Natural Bridge considering policies; continued work with schools that high rates of obesity to improve wellness policies supporting healthy environments; worked with partners to measurably increase mental, emotional and behavioral (MEB) health assessment in primary care settings; increased suicide prevention awareness through social and other media campaigns; assisted Pivot with submitting a federal Comprehensive Addiction and Recovery Act (CARA) Grant application with a program awarded; continued ongoing emergency preparedness work; quality improvement (QI) priorities encompassed work on included STD billing and clinic marketing, communicable disease report volume as new testing methodologies greatly increased the volume and quantity of follow-up required, documentation of QI activities in Health Promotion programming, and immunization clinic issues; quality assurance (QA) work included rewriting the privacy policies to reference more stringent New York State privacy regulations in addition to federal regulation; the department's overall corporate compliance program remains strong, and progress is documented and reported quarterly to the Professional Advisory Committee and to the regional DSRIIP Corporate Compliance Committee; hired Richard Halpin to facilitate and complete the 2019-2021 Strategic Plan—Mr. Halpin will complete the work in 2019.

• The Keep the North Country Smiling coalition continued its work to advance oral health care in Jefferson, Lewis, St. Lawrence and Oswego Counties through a 2017-2020 work plan. Items worked on included: approaching FDRHPO to advance oral health standards at primary practices, with emphasis on including oral health assessment templates in the electronic health records (EHRs) of primary care practices in the region; continued expansion of fluoride varnish treatment in the pediatric primary care setting—6 practices were actively providing FVT in 2018; continued to promote access to community water fluoridation by making municipalities aware of funding through the NYSDOH to repair and replace outdated fluoridation equipment,

as well as to purchase equipment to establish community water fluoridation; testified at the village of Potsdam hearings where removing community water fluoridation was considered—the village trustees voted to retain fluoridation 9/17/18; added a new objective to the workplan to have all pediatric dental practices educate children and families about the importance of HPV vaccine to prevent oral cancers as a standard of care; was approached by the NYS Dental Association/Foundation to implement a Dental Demonstration Project to treat adult patients with dental needs through a day of free oral/surgical health services, and then enroll these patients into ongoing treatment with a dental home—the North Country Family Health Center agreed to host the project in the Spring of 2019.

- Up-to-date goals, objectives, action strategies, and progress are delineated in the CHIP and measurably improving priority chronic disease and mental health/substance abuse indices.
- Department staff continued to actively participate in the CNY Public Health Alliance (formerly Epidemiology Alliance), led by the Onondaga County Health Department.
- Department staff actively participated on the North Country Prenatal/Perinatal Council (NCPPC) Board of Directors and committees.
- Jefferson County EMS continued active membership with the Jefferson County Emergency Medical Services Cooperative.
- Department Administration, EMS, Medical Investigator, and the Public Health Emergency Coordinator are all members of the Jefferson County Local Emergency Planning Council. These department members also serve on the regional hospital External Preparedness Steering Group, led by Samaritan Medical Center.
- Department staff continued membership and participation in the NYSDOH regional Health Emergency Planning Coalition (HEPC).
- The Public Health Emergency Preparedness Program (PHEP) hosted quarterly community health care partner emergency preparedness meetings, targeting 17 community health care provider types tasked by the Centers for Medicare and Medicaid Services to meet emergency preparedness standards. The JCPHS PHEP assisted providers in development and testing of preparedness plans and principles.
- The public health emergency preparedness coordinator participated in a NYS Department of Homeland Security and Emergency Services tri-annual county emergency preparedness assessment (CEPA).
- Achieved influenza vaccination in 100% of all public health staff.

Enhance laws and regulations that protect health and ensure safety

- The Medical Examiner investigated deaths that fell into categories outlined in County Law Article 17A where the public interest is served by explaining cause and manner of death. There were 119 cases for the year; 70 cases required autopsy. There were 14 overdose deaths; 9 of the overdoses were attributed to opioids.
- Laws and regulations governing the department were continuously reviewed to ensure corporate compliance. Led by the DSRIP Corporate Compliance Committee, vendor services secured through The Compliancy Group—The Guard to provide federally compliant privacy and security policy templates, as well as guidance to ensure the department's policies and security systems were appropriate were continued through 2018. Policies were amended with approvals by the department's Professional Advisory Committee 3/2018 and 9/2018 primarily due to inclusion of more stringent NYSDOH privacy regulation references. All staff received annual training on the policies 12/2018. The senior Public Health Planner serves as the department's corporate compliance officer (CCO), administers annual training for all staff of the department, and tracks all staff trainings to ensure completion and adherence to regulatory requirements. The CCO is an active member of the regional DSRIP Corporate Compliance Committee.
- The department submitted 186 animals for rabies testing with 7 positive for rabies. 1,238 domestic animals were vaccinated at Public Health, Dog Control, and Ag & Markets clinics.

Research for new insights and innovative solutions to health problems

- The Anchor Recovery and Outreach Center, with department support, continued vital operations on Public Square in the City of Watertown. The department, as part of its CHIP priorities, advises and assists community partners with writing grant applications like this to ensure needed services are established. The Anchor engages addicted individuals and their family members to obtain treatment and counseling services. The Anchor is also a recovery center, where individuals can go for peer support and assistance. The work of the Anchor is credited with reducing overdose and overdose deaths in Jefferson County. The department's senior Public Health Planner serves on its advisory board.
- 8 telehealth units were utilized through 2018 with home care patients having chronic cardiac and respiratory conditions and at-risk for re-hospitalization. Vivify telehealth units are used.
- Coordinated a domestic pet vaccination clinic in southern Jefferson County, near Ellisburg, which is veterinarian underserved and has seen an increase in cases of positive rabies in animals.

ASSURANCE

Link people to needed personal health services and assure the provision of health care when otherwise unavailable

- Public Health Nurses made 26 visits to 1 maternal/child health (MCH) client who was without a pay source. MCH clients with a pay source are included in the Home Health Care program statistics.
- The Home Health Care Programs received 1,975 referrals and provided 23,165 visits to 1,158 patients over 9 disciplines of care in their homes throughout the year.
- The department's Diagnostic & Treatment Center (D&TC) provided 1,725 STD, HIV, & HCV tests, 642 TB PPDs, and 1,360 immunizations. The D&TC provided 84 Hepatitis B, 626 influenza; 55 pneumococcal; and 169 travel vaccinations; there were 0 rabies post-exposure vaccinations by JCPHS in 2018. Of 1,725 STD specimens that the department submitted for testing, 90 were positive. Testing increased significantly with hiring a Nurse Practitioner.
- There were 12,219 EMS calls.

Assure a competent public health and personal health care workforce

- 80 employees participated in numerous in-service and training programs offered throughout the year. Program topics encompassed clinical care, communicable diseases, immunizations, social services training such as child abuse and life skills, McBee home health care, HIPAA, privacy and security, and county employment trainings such as workplace violence and cyber-security.
- Jefferson County EMS facilitated 24 certification training courses to 123 students. Additionally, JCEMS hired a new director of EMS. Many courses, which were previously entirely taught in other locations in the County, have been moved to the JCPHS facility's smart classroom. Assisted with drill planning sessions and participated in NYSDOH, JCPHS, Fort Drum, and area hospital exercises.

Inform, educate, and empower people about health issues

- The Health Promotion staff facilitated 65 community health educational programs to organizations, schools, worksites, and community settings. 74,840 individuals were reached through program and media outreach. The department actively utilizes Facebook to reach the public, and had 7,560 followers at year-end.
- The department received radon grant funding to provide home test kits and public education through 2018. 99 kits were distributed in 2018. Numbers of kits testing above the EPA actionable level of 4 pCi/L remain pending.
- Governor's Traffic Safety Committee programming reached 66,566 adults through regular social media outreach, 5 school district events, 14 community events, and 8 presentations.

Mobilize community partnerships to identify and solve health problems

- The department continues to be an excellent convener and colleague of partners to identify and collaboratively solve health problems. The department is an active member of the New York State Association of County Health Officials (NYSACHO) and a board member of the Fort Drum Regional Health Planning Organization (FDRHPO). The department convenes the Jefferson County STI and Diabetes Coalitions, and is a member of and chairs the North Country Health Compass Partnership; is a member of several Cornell Cooperative Extension program advisory committees; is a board member of NCPPC to address maternal, infant, child and family health initiatives; is a member of and chairs the Alliance for Better Communities drug prevention task force to address prescription drug and heroin abuse, and overdoses; is a member of the Anchor Recovery Center of Northern New York's advisory committee; is a member of the Jefferson Emergency Medical Services Cooperative; and is a member of and chairs the Keep the North Country Smiling children's oral health initiative.
- The opioid epidemic continues to adversely impact Jefferson County residents. However, infrastructure improvements put in place in late 2016 and throughout 2017 are making a measurable difference. Widespread availability of Naloxone to reverse opioid overdoses, as well as the opening of the Anchor Recovery and Outreach Center, served to slow overdoses and overdose deaths. Overdose death data illustrate year-to-year impact, and it is hoped that with these and other infrastructure supports put in place, 2017 and continued efforts through 2018 have seemingly been a turning point. The data demonstrate that opioid and non-opioid overdose deaths continued to decline in 2018.
- The department remains extremely active with the Alliance for Better Communities, and has engaged all community sectors to address this problem on multiple fronts. In addition to public education campaigns, advocacy continued with members of the U.S. Senate and House of Representatives, and NYS Senate and Assembly highlighting the problem happening in Jefferson County, what the needs are, and how local response is being implemented. Data indices continued to track and chart the growth of this problem locally. The senior health planner was awarded an Alliance "Friend in the Fight" award for commitment devoted to this issue.

2017 EXPENDITURES

Medical Examiner
Administration
Home Health Care Programs
Prevent (Grants/Clinic)
Health Promotion
Emergency Medical Services
Public Health Emergency Preparedness
TOTAL

\$383,810
\$520,330
\$4,098,275
\$775,067
\$218,091
\$374,849
\$109,135
\$6,479,557

2018 EXPENDITURES

Medical Examiner
Administration
Home Health Care Programs
Prevent (Grants/Clinic)
Health Promotion
Emergency Medical Services
Public Health Emergency Preparedness
TOTAL

\$345,385
\$497,646
\$4,053,029
\$888,456
\$218,091
\$441,244
\$111,450
\$6,555,301

2017 REVENUES

Home Health Care Programs
Medicare
Medicaid
Third Party Health Insurance/Private Pay

\$1,794,990
\$653,441
\$848,892
\$3,297,323

SUB-TOTAL

Emergency Medical Services
State and Federal Grants
Public Health State Aid
Clinic Fees
Gifts/Donations
Other

\$166,339
\$417,010
\$640,134
\$116,045
\$7,601
-

SUB-TOTAL**TOTAL**

\$1,347,129
\$4,644,452

2018 REVENUES

Home Health Care Programs
Medicare
Medicaid
Third Party Health Insurance/Private Pay

SUB-TOTAL

Emergency Medical Services
State and Federal Grants
Public Health State Aid
Clinic Fees
Gifts/Donations
Other

SUB-TOTAL**TOTAL**

\$1,643,202
\$469,846
\$1,209,970
\$3,319,018

\$108,514
\$479,233
\$631,628
\$120,026
\$10,944
-

\$1,350,345
\$4,669,363

JEFFERSON COUNTY PUBLIC HEALTH SERVICE *Staff*

Management

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Occupational Therapy

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Contact Us!

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Public Health Service**

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Jefferson County
Public Health Service



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