

# *Saratoga County Public Health Services*



## *2018 Annual Report*



*Catherine Duncan, MPH, BSN*

*Director of Public Health*

*Early Intervention Official*

### *Vision*

*Promote positive health practices for a healthy Saratoga County*

### *Mission*

*Assess, improve, and monitor the health status of our community*



## **Table of Contents**

Message from the Public Health Director .....	2
What is Public Health .....	3
Saratoga County Map.....	4
Saratoga County Public Health Services Organizational Chart .....	5
Services provided by Saratoga County Public Health Services .....	6
Quality Assurance .....	7
Fiscal Expenses and Revenue.....	9
Community Health Assessment (CHA) and Community Health Improvement Plan (CHIP).....	11
Health Education Programs .....	12
Public Health Detailing.....	12
Injury Prevention and Control Program.....	12
Chronic Disease Prevention and Control Program.....	13
Early Intervention Program.....	14
Child Find Program.....	17
Emergency Preparedness Program.....	19
Immunization Program.....	21
Communicable Disease Prevention and Control Program.....	24
Sexually Transmitted Disease (STD) Prevention and Treatment Program.....	28
Rabies Control Program.....	29
Tuberculosis Control and Treatment Program.....	30
Lead Poisoning Prevention Program.....	30
Family Health Program.....	32
Physically Handicapped Children Program (PHCP).....	33

## *A Message from the Director*

*The Saratoga County Public Health Services department has completed its transition from a skilled nursing home health agency towards providing only population health services to the community through its numerous State Aid programs. We strive to develop strong partnerships and collaborations with our community partners, which allow us to deliver a variety of health services to our extensive population. Saratoga County Public Health Services remains dedicated to providing excellent care to individuals and families through its many State Aid programs; immunizations, rabies, tuberculosis, sexually infectious disease, communicable disease, lead poisoning prevention, Lyme disease & tick borne illnesses, maternal child health, migrant workers and backstretch clinics. Other programs within our department provide community resources and quality case management to our growing population of children and families; they are the Children with Special Health Care Needs and Early Intervention Programs.*

*Saratoga County proudly remains at the top of the list for County Health Rankings in 2018, according to Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute, scoring #2 in the state for Health Outcomes and Health Factors. For the majority of our population healthy lifestyles is important and valued. We continue to assess the needs of our community by identifying barriers to achieve a healthy life and promoting evidence-based practices as needed. Within our assessment process we have come to recognize the health disparity of transportation needs that exists within our rural communities and affordable housing within the city of Saratoga Springs. Solutions for these disparities have been challenging and elusive for public health and community partners.*

*Saratoga County is a partial service health department that receives environmental services through the New York State Environmental District Office in Glens Falls, NY. We work collaboratively on various environmental issues that arise within our county border. This past year we provided Harmful Algal Blooms (HAB) education to town residents residing near two affected lakes in our region. Other environmental issues addressed collaboratively include: food borne illnesses, lead poisoning inspection & water testing, and children's camp immunization regulations.*

*Our dedicated staff is committed to working with community partners in order to strengthen our reachability to Saratoga County residents. We acknowledge and appreciate all the efforts (i.e., time spent, sharing information, educating, decision-making, workload sharing) of stakeholders, community-based organizations, hospitals, providers, county departments, faith-based organizations and consumers who collaborate, organize and support our endeavors.*

*I would also like to extend my gratitude to those who supported us through our program planning and service delivery in 2018, especially the Saratoga County Board of Supervisors, Health and Social Services Committee, Dr. Desmond Del Giacco and the County Administrator. We are grateful for the opportunity to serve and protect the residents of Saratoga County.*

*Respectfully,*

*Catherine Duncan*

*Catherine Duncan, BSN, MPH*

*Director of Public Health*

## **WHAT IS PUBLIC HEALTH?**

Public Health is a science that promotes and protects the health of people and the communities where they live, learn, work and play. This work is achieved by promoting healthy lifestyles, researching disease and injury prevention, and detecting, preventing and responding to infectious disease.

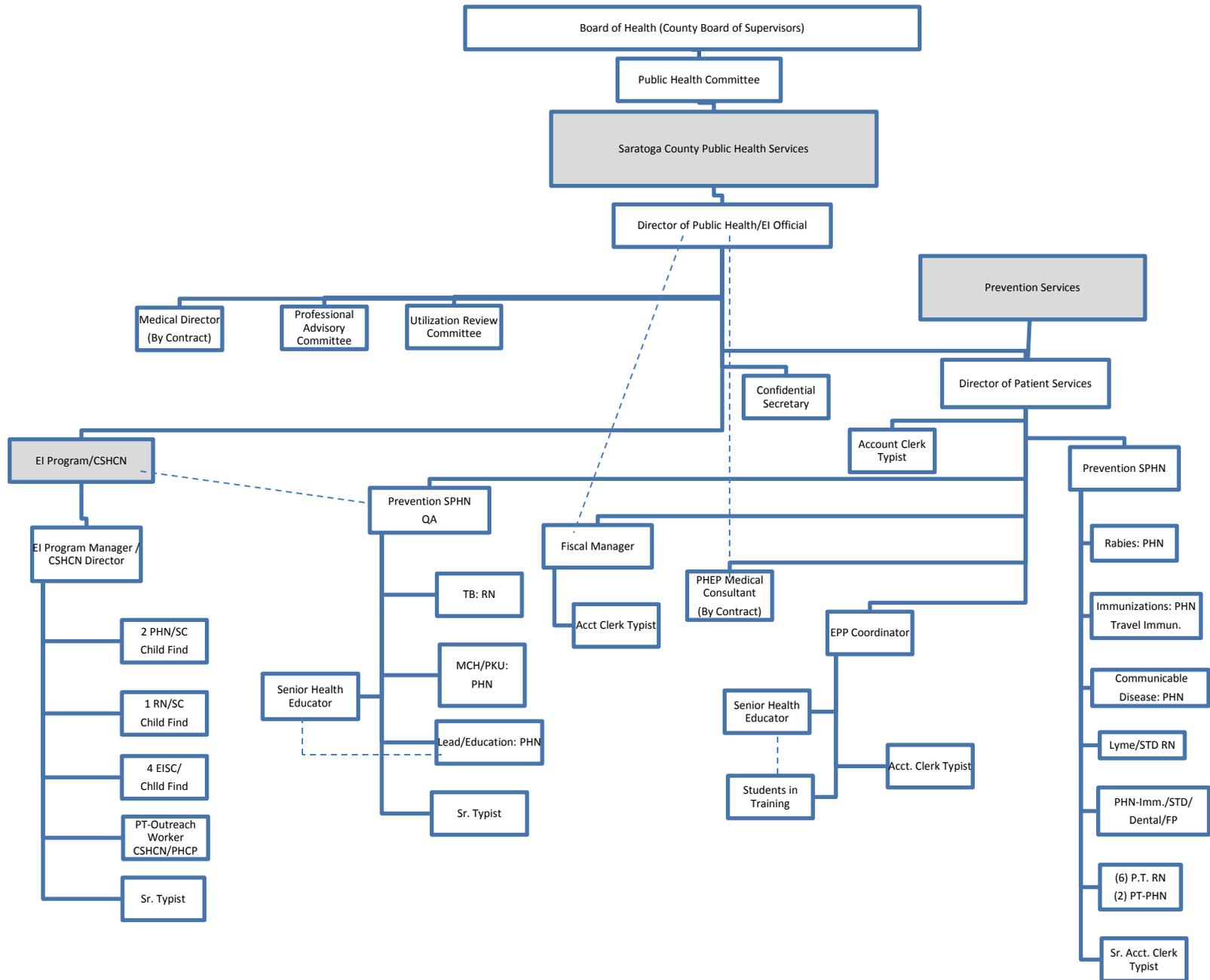
Public health professionals work to prevent health problems before they occur and make every effort to limit health disparities through promotion of healthcare equity, quality and accessibility.

### **TEN ESSENTIAL PUBLIC HEALTH SERVICES**

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



# 2018 Saratoga County Public Health Services Organizational Chart



**SERVICES PROVIDED BY  
SARATOGA COUNTY PUBLIC HEALTH SERVICES**

<p><u>Licensed Home Care Service Agency (LHCSA)</u></p> <ul style="list-style-type: none"> <li>➤ Tuberculosis Control Program</li> <li>➤ Lead Poisoning Prevention Program</li> <li>➤ Family Health Program</li> <li>➤ Newborn Screening Program</li> </ul> <p><u>Prevention Diagnostic &amp; Treatment Center (D&amp;T)</u></p> <ul style="list-style-type: none"> <li>➤ Immunization Clinic's Children &amp; Adult focused on the uninsured and underinsured</li> <li>➤ International Travel Clinic</li> <li>➤ Tuberculosis Clinic</li> <li>➤ Sexually Transmitted Disease (STD) Clinic</li> </ul> <p><u>Prevention Surveillance Programs</u></p> <ul style="list-style-type: none"> <li>➤ Communicable Disease Program</li> <li>➤ Peri-Natal Hepatitis B Program</li> <li>➤ Sexually Transmitted Disease (STD) Program</li> <li>➤ Rabies Control Program</li> <li>➤ Immunization Action Plan</li> </ul> <p><u>Community Planning</u></p> <ul style="list-style-type: none"> <li>➤ Community Health Assessment (CHA)</li> <li>➤ Community Health Improvement Plan (CHIP)</li> <li>➤ Community Coalition Building</li> <li>➤ Data Collection, Analysis and Planning</li> </ul>	<p><u>Early Intervention</u></p> <ul style="list-style-type: none"> <li>➤ Early Intervention Program</li> <li>➤ Child Find Program – Ages 0-3</li> <li>➤ Physically Handicapped Children's Program (PHCP)</li> <li>➤ Children With Special Health Care Needs (CSHCN)Program</li> </ul> <p><u>Emergency Preparedness Program</u></p> <ul style="list-style-type: none"> <li>➤ Public Health Emergency Preparedness</li> <li>➤ Saratoga County Medical Reserve Corp.</li> </ul> <p><u>Public Health Initiatives</u></p> <ul style="list-style-type: none"> <li>➤ Healthy Living Partnerships</li> <li>➤ Public Health Detailing Initiatives</li> <li>➤ Injury Prevention Initiatives</li> <li>➤ Chronic Disease Initiatives</li> <li>➤ Migrant and Seasonal Farm Workers Initiative</li> <li>➤ Backstretch Employee Health Initiative</li> </ul> <p><u>Seasonal Initiatives</u></p> <ul style="list-style-type: none"> <li>➤ Seasonal Influenza Initiative</li> <li>➤ Seasonal Arthropod Initiative</li> </ul> <p><u>Health Education</u></p> <ul style="list-style-type: none"> <li>➤ Outreach Programs</li> <li>➤ Health Fairs</li> <li>➤ Educational Seminars</li> </ul>
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## **QUALITY ASSURANCE**

Saratoga County Public Health Services (SCPHS) is committed to building a culture dedicated to improving quality and utilizes a comprehensive approach to develop Quality Improvement (QI) including: Leadership Commitment, Employee Empowerment and Commitment, Development of QI Infrastructure, Patient Satisfaction and Continuous Process Improvement.

- ◆ Leadership Commitment
  - Lead the process of transformational change
  - Dedicate resources to QI
  - Communicate progress
  - Exhibit ongoing support for QI including:
    - ◆ Staff training opportunities
    - ◆ Identifying QI projects
- ◆ Employee Empowerment and Commitment
  - Engage select staff as QI Champions
  - Provide QI education and training
- ◆ Development of QI Infrastructure and Continuous Process Improvement
  - Peer Review
  - Administrative Record Review
  - Utilization Review
  - Performance Improvement (PI) Committee
  - Quality Assurance Committee (QA)
  - Professional Advisory Committee (PAC)
- ◆ Patient/client Satisfaction
  - Patient/client Satisfaction Surveys
  - Patient/client Complaint Process

### **Professional Advisory Committee (PAC)**

The primary purpose of the Professional Advisory Committee (PAC) is to advise the Board of Supervisors (BOS) (via Health & Social Services Committee) on matters relating to services provided by Saratoga County Public Health Services (SCPHS).

The Committee membership includes the agency director and one or more representatives in each of the following areas: practicing physicians, members knowledgeable about the health care needs of the county, consumer representatives, and professional nurses of the agency staff. Meetings are held four times a year.

The PAC reviews policies pertaining to the delivery of the health care services provided by Saratoga County Public Health Services and recommends to the Health and Social Services Committee, such policies for adoption. The PAC, apprised of SCPHS quality reviews, receives information pertaining to the Utilization Review (UR) Committee, and evaluates the Agency's programs and services.

SCPHS wants to thank all the committee members for their dedication and support during 2018. Committee members include Timothy Brooks, MD; Sandy Cross, Director Office of the Aging; Desmond Del Giacco, MD; Helen Endres, RN; Cynthia Lisuzzo, Director of Care Management Saratoga Hospital; Tina Potter, Commissioner Saratoga County Social Services; Michael Prezioso, Ph.D. Director of Mental Health and Addiction Services; Julie Smith, Executive Director Greater Adirondack Home Health Inc.

Health and Social Services Committee

SCPHS is governed by the Saratoga County BOS and is the legislative body for the county. This Board constitutes the Board of Health, according to Chapter 55 of the New York State Public Health Law.

The Board is responsible for the management, operation, and evaluation of the Public Health Services Agency.

The Board is responsible to ensure compliance of SCPHS with the applicable Federal, State and local statutes, rules, and regulations.

A subcommittee of the BOS constitutes the Health and Social Service Committee and advises the full Board of Supervisors regarding Health Services' concerns. SCPHS staff appreciates the direction and services provided by the 2018 Health and Social Service Committee members:

Dick Lucia, Chairperson

Vince DeLucia

Tara Gaston

Tom Richardson

Sandra Winney

Todd Kusnierz

Tom Wood

*SCPHS staff would also like to thank:*

Edward D. Kinowski, Chairman Saratoga County Board of Supervisors

And

Spencer P. Hellwig, Saratoga County Administrator

## Total Expenses and Revenue

The 2018 adopted SCPHS budget was \$3,578,599 and was funded through revenue streams that included federal, state and county/local dollars and grants, including Article 6 funding. Article 6 of the Public Health Law provides a base grant of \$500,000 and then partial reimbursement of 36% above the base grant for local health department eligible costs for mandated services.

In order to maintain a fiscally responsible budget and to identify cost savings, SCPHS was approved for a new position in 2018, a Public Health Planner, who will assist in applying for grant funding on an ongoing basis. This position is expected to be filled in early 2019.

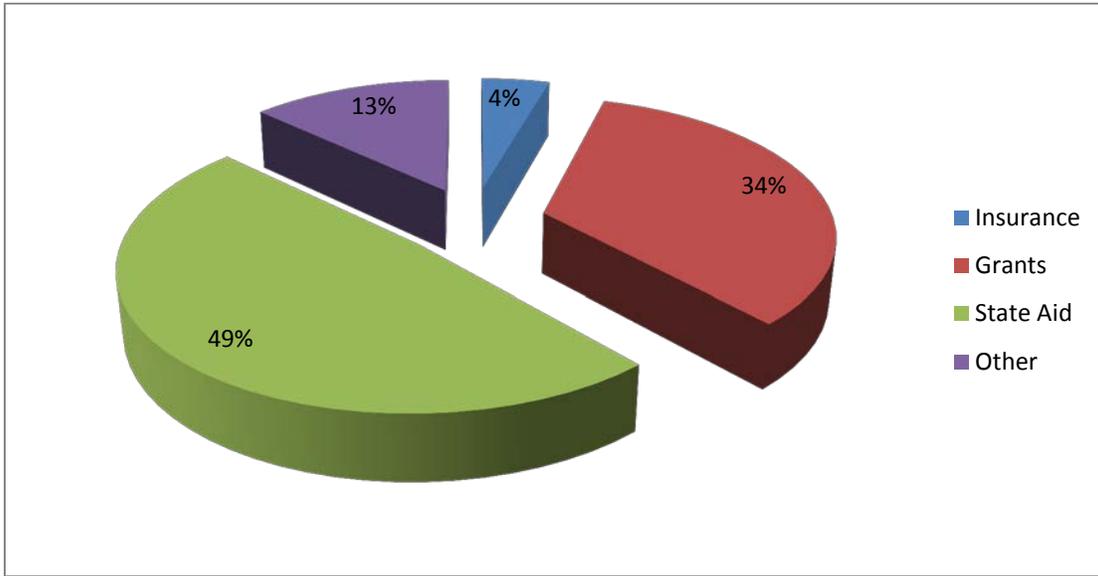
SCPHS also continued to participate in the following programs for cost savings:

- Vaccines for Adults (VFA) to receive free adult vaccines to offset the cost of providing adult vaccines to the uninsured and underinsured.
- Vaccines for Children (VFC) to receive free children vaccines to offset the cost of providing child vaccines to those who are eligible.
- The Federal 340B drug discount program which allows the purchase of low cost STD and TB drugs.

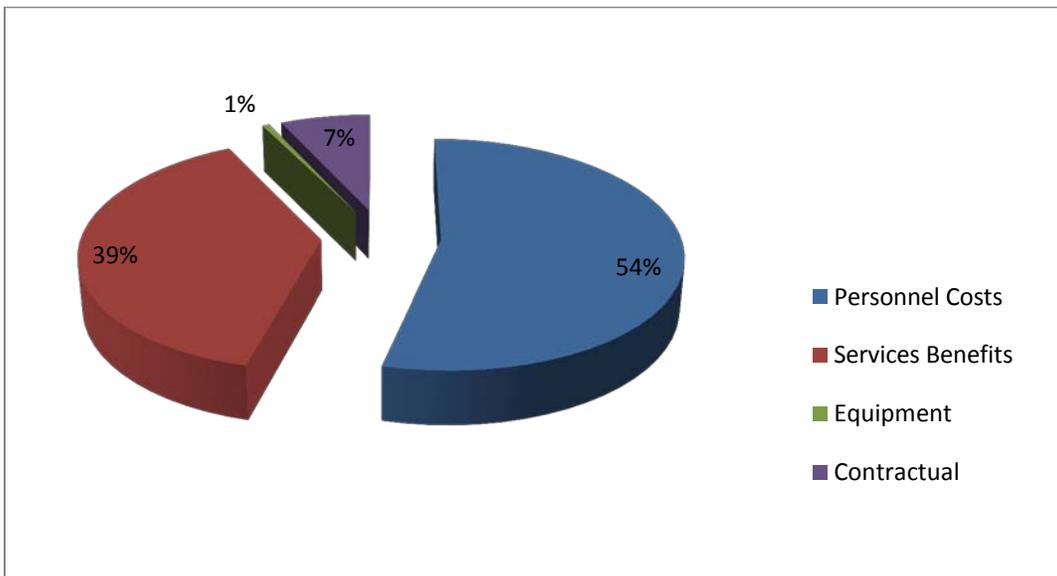
SCPHS received the following grants for 2018:

- A Lead Poisoning Prevention grant which provided \$37,661 to increase awareness of lead poisoning, identify high-risk populations, increase lead testing/screening and provide follow up to children with elevated lead levels.
- A Children with Special Health Care Needs grant which provided \$30,529 to reduce or eliminate gaps and barriers which prevent families of children with special needs from obtaining insurance, health services, and community resources and assist them with navigating the healthcare system.
- A Rabies grant which provided \$33,711 for human post exposure treatment, specimen shipment and testing, pet vaccination clinics, education and prevention.
- An Immunization Action Plan grant which provided \$113,527 to increase immunization rate, improve immunization records, and promote immunizations through education and training.
- A Public Health Preparedness grant which provided \$191,061 for planning, training and exercises in preparation for a public health emergency.
- An Early Intervention Administration grant which provided \$81,278 for administration of the Early Intervention program including Child Find, Outreach and Education and ensuring services are available.
- A Suicide Prevention grant which provided \$1,500 for suicide prevention program planning.

**2018 Revenues**



**2018 Expenditures**



**COMMUNITY HEALTH NEEDS ASSESSMENT (CHNA)**

**and**

**COMMUNITY HEALTH IMPROVEMENT PLAN (CHIP)**

Saratoga County Public Health Services (SCPHS) is mandated to complete a Community Health Needs Assessment (CHNA) on the guidance provided under regulation by the New York State Department of Health (NYSDOH). The purpose of this CHNA is to identify and prioritize the healthcare challenges currently faced by the residents of Saratoga County. The last CHNA was completed in 2016; the next CHNA will be completed in 2019.

The Community Health Improvement Plan (CHIP) was developed in collaboration with community partners after extensive review of the 2016 CHNA data and demographics. The 2016 CHIP primarily aligned with the New York State Prevention Agenda's priority focus area of Promoting Mental Health and Preventing Substance Abuse.

Saratoga County's full CHNA and CHIP document is located electronically at <http://www.saratogacountyny.gov/wp/wp-content/uploads/2013/11/2016-SC-CHA-CHIP-Final.pdf>

Our year-end report was written in collaboration with Saratoga Hospital and submitted to the NYSDOH Prevention Agenda division. Saratoga County Public Health concentrated on the above focus areas by our participation in strengthening the infrastructure across mental health, addiction services and recovery systems, providing addiction education to physicians, adults and children.

In response to our highest areas of need a Saratoga County Suicide Prevention Coalition was developed in 2017 and continues to provide education and outreach for suicide prevention to schools and the general public.

The Opioid Epidemic has spread nationwide and Saratoga County has not escaped this issue. We have joined forces with Warren & Washington County Public Health; Glens Falls Hospital and Hometown Heroin, Prevention Council and Department of Social Services in addressing maternal and infant addiction through the Neonatal Abstinence Syndrome (NAS) Committee.

SCPHS elected to continue work on a third priority area under Chronic Disease. Working collaboratively with Saratoga Hospital and community based organizations to promote healthy dietary interventions and education through its continued work with the Saratoga County Pre-diabetes Coalition.

## **HEALTH EDUCATION**



### **Health Education Programs**

Saratoga County Public Health Services (SCPHS) participates in greater than fifty (50) formalized different community partnerships and coalitions. These many groups have a variety of different community and health based focuses. Some groups focus on a single initiative, while other coalitions focus on a broader health initiative. Regardless if the groups' focus is narrow or broad, the groups' goal planning uses a collaborative approach to pool knowledge and resources to provide evidenced based population intervention. SCPHS also provides health education through workshops and at outreach fairs and events.

## **PUBLIC HEALTH DETAILING**

Public health detailing is a public health strategy of planning unscheduled visits to provider practices for the purpose of developing relationships between provider clinics and public health agencies, where educational materials and supportive resources are shared for both patient and provider. This is achieved through the use of detailing action kits that offer clinical tools for evidence-based best practices for chronic disease management, focused on improving patient care for key public health challenges.

## **INJURY PREVENTION AND CONTROL PROGRAM**

SCPHS co-facilitates the Suicide Prevention Coalition of Saratoga County (SPCSC) with Saratoga County Department of Mental Health and Addiction Services. The coalition meets quarterly, and is a consortium of partners dedicated to preventing suicide in the community through increasing awareness, providing trainings on prevention and postvention, and by connecting families, communities, and individuals to resources. SCPHS is an engaged participant in county partnerships and coalition activities that benefit the community to promote substance use disorder treatment options and services, and to reduce overdose death such as safe storage and medication elimination initiatives, community opioid forums, ongoing provider education events, and monthly Narcan trainings, to name a few.

SCPHS has partnered with county school districts to present hand-washing classes to elementary school-aged children through hands-on classes. These classes were also offered through the Saratoga Springs Public Library in an effort to reduce not only the spread of bacteria & viruses, but also harmful chemicals, hard metals, and toxins.

Fall Prevention outreach events were offered throughout the year to agencies providing services to senior citizens. These presentations were provided to influence both fall risk and home safety management, appropriate footwear suggestions, and evidence-based muscle strengthening exercise regimens.

## **CHRONIC DISEASE PREVENTION AND CONTROL PROGRAM**

SCPHS continued to provide a leadership role in the Saratoga County Pre-diabetes Coalition's (SCPC) detailing campaign, which involved use of New York State Department of Health and the School of Public Health at University at Albany's pre-diabetes toolkit for action. The SCPC also provided information on county level diabetes prevalence, and a booklet featuring CDC and ADA evidence-based resources such as a risk factor assessment and prevention tips and information on local resources and programs. Ten meetings were held in 2018. At the January 2018 meeting, attendees divided into three groups to develop goals and objectives for three of the possible goals identified at the November meeting. The selected initial goals and identified action steps were:

- 1) Improve provider practices related to treatment for pre-diabetes and diabetes prevention by Dec. 1, 2018.
- 2) Increase community awareness of pre-diabetes and increase the number of community members who complete the Diabetes Risk Assessment by Dec. 31, 2018.
- 3) Develop Nutrition Programs

Throughout the year numerous health classes, programming, health fairs, initiatives and awareness campaigns were planned and implemented. In November, planning began for the 2<sup>nd</sup> annual "*Nourish Your Neighbor Healthy Food Drive*" program. This program encourages healthier food donations through printed lists and shopping bags that provide low sodium, no-sugar added, whole grain, low fat and lean protein options.

### **Health Screening Services**

Saratoga County Public Health Services collaborates with the Saratoga County Office of the Aging to provide free health screening clinics (HSCs) to senior residents of Saratoga County (age 60 and over). The HSCs are held at various senior citizen centers, senior apartment complexes, congregate meal sites, and Town Halls located throughout the county.

The SCPHS nurses that staff the Health Screening Clinics provide cholesterol, glucose, and hypertension screening for seniors who attend the clinics. In addition, educational materials on a variety of health topics such as Hypertension, Stroke, Diabetes, and seasonal topics such as Tick-Borne Illness, are offered to attendees.

Educational presentations on topics such as "Why Can't I Remember That?", Pre-Diabetes, Fall Prevention and Home Safety, Emergency Preparedness, Shingles, Taking your own Blood Pressure, Eating Healthy on a Budget, have also been provided during Health Screening Clinics for those seniors that wish to attend. SCPHS continually strives to provide outreach and education on Chronic Disease Prevention, Disease Self-Management, and other current Public Health topics, in an effort to help seniors live longer, happier, and healthier lives. A total number of 267 seniors participated in 31 Health Screening Clinics.



## **EARLY INTERVENTION PROGRAM**

### *Overview*

The New York State Early Intervention Program (EIP) is a federal mandate required under Part C of the Individuals with Disabilities Education Act (IDEA) for infants and toddlers with disabilities and their families. The EIP is established in Article 25 of NYS Public Health Law and is administered by the New York State Department of Health through the Bureau of Early Intervention (BEI). To be eligible for services, children must be under 3 years of age and have a confirmed disability or established developmental delay, as defined by the State, in one or more areas of development: physical, cognitive, communication, social-emotional, and/or adaptive domains. Direct services and evaluations are conducted by NYS contracted providers under the oversight of local and county government offices and their appointed Early Intervention Officials (EIO).

The program works with parents and families within their most natural environment, which is most often at home or at a day care setting. The Early Intervention Program follows a three step process of a home visit with a service coordinator, a third party evaluation, and then an Individual Family Service Plan (IFSP) meeting if the child is found eligible. Service coordinators are assigned to each family and provide direct assistance and support through these steps. Service coordinators assure that each parent is fully informed of and understands their rights and entitlements under the EIP. Service coordinators follow the state and federal regulations as each parent/child goes through the EI process so as to ensure that confidentiality, a culturally sensitive environment; timeliness in the delivery of service(s), along with assuring that the health and safety standards are upheld and maintained throughout their EI experience.

### *Staffing*

The Saratoga County Director of Public Health is appointed as the EIO and the program is directly coordinated by county employees including the EIP Program Manager (EIM), with a staff of seven full-time Initial and Ongoing Service Coordinators. A senior typist serves as the county single point of access and assists with program referrals and direct clerical needs, and Saratoga County Public Health billing staff conduct financial duties of the program, in shared effort with the Saratoga County Youth Bureau. There is one contracting agency that provides one Initial and Ongoing Service Coordinator and is overseen by the EIM. In 2018, the average caseloads for full time coordinators have been from the high-40 to low 50's. The contractor service coordinator carries a caseload in the 70s.

Since 2013, all direct service providers are under a contract agreement with New York State under the direction of BEI. Except for transportation and Respite services, Saratoga County does not subcontract with service providers. Billing and claiming for direct care services is handled by the state fiscal agent, Public Consulting Group (PCG) via electronic claiming, through the New York State Early Intervention System (NYEIS) and

PCG’s website. Professional Respite services were reinstated for eligible families in 2018 via a minor contract agreement between Saratoga County and Capital District Respite, Inc. Upstate Transit of Saratoga, LLC continues to hold the transportation contract. Parents are also afforded an option for direct reimbursement for either Respite or transportation if they have their own supports or if they are able to transport the child to services approved outside of the home or daycare.

BEI keeps a central directory of active providers and approved assistive technology vendors on their website: [https://www.health.ny.gov/community/infants\\_children/early\\_intervention/service\\_providers/](https://www.health.ny.gov/community/infants_children/early_intervention/service_providers/)

According to BEI, Saratoga County has 120 independent contractors and 22 agencies or collaborative provider groups (7 can provide facility based services from their business location and 14 agencies provide home-based services). In addition, Saratoga County has 17 options for evaluation teams. There currently are no audiologists, developmental pediatricians or nutritionists/dieticians providing EI services. Shortages in all disciplines are noted this year, especially in independent providers.

Breakdown of independent providers:

As compared to 2017:

- 45 Speech & Language Pathologists (-4) <only 25 are accepting cases>
- 26 Special Educators (-1) <only 8 are accepting cases>
- 13 Occupational Therapists (-3) <only 9 accepting cases>
- 16 Physical Therapists (+1) <only 7 accepting cases>
- 0 Nutritionist/dietician
- 4 Social Workers (-1) <only 3 accepting cases>
- 16 Teacher of Speech & Hearing Handicapped are listed, all are dually certified as SLP, none accept cases as a *Teacher of Speech and Hearing*
- 0 TVI
- 0 Psychologist/ Behavioral Analyst

Agency providers attempt to fill the gaps in services for EI enrolled children, however, continued provider capacity and limited availability have created additional difficulties finding all disciplines of Early Intervention services for families in all areas of the county.

### 2018 Statistical Data

EI served 128 infants under 1 year of age, which was 20% of the referrals; 57% of this age group qualified for EI services (*an increase of 1% from 2017*). The largest age group with 344 children (55%) that we serviced continued to be in the one to two-year-old age ranges, of which, 60% were eligible for services (*a decrease of 3% from 2017*). There were 157 (25%) referrals of children within the 25- 33 month age range. 60% of children in this age range were eligible for services (*an increase of 1% from 2017*).

## ANNUAL COMPARATIVE CHART

	<b>2016</b>	<b>2017</b>	<b>2018</b>
Referrals to EI	520	583	629
New Children Enrolled - EI	254	290	291
Active Children Average	344	371	402

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

As part of NYS EIP regulations, each county is required to have a Local Early Intervention Coordinating Council (LEICC). The role of the LEICC is to serve as the consumer advisory board for the program and to advise the Early Intervention Official (EIO) on matters pertaining to the planning, delivery and evaluation of EI services for eligible children and their families, including methods to identify and address gaps in services. The LEICC advises the EIO of identification of service delivery reforms necessary to promote the availability of EI services within natural environments. It coordinates public and private agencies, along with other matters that may be brought forward by parents, providers, and public agencies to the municipality, as they relate to the EI policies and procedures.

Regulations require that the LEICC consist of the following appointed members:

- At least 4 parents of children with disabilities age birth through 12 years of age;
- At least 3 public or private providers of EI services
- At least one child care provider or representative of child care providers;
- The chief executive officers or their designees of the county departments of social services and health and mental hygiene
- A representative from the local developmental disabilities services office (DDSO) or NYS Office for Persons with Developmental Disabilities (OPWDD)
- A representative from one or more committees on preschool special education of local school districts in the county

In 2018, the LEICC consisted of 18 appointed members which included 4 parents, 4 EI service providers, 1 child care provider, 2 CEO/Designees from NYS Department of Social Services and Mental Health, 1 CPSE chairperson, 1 County Program Director (Youth Bureau) and 2 representatives from Fiscal (EI and CPSE). The EIO and EIM were also appointed members. The representative from OPWDD was absent this year due to retirement and transition within that department. All meetings are open to the public and parents are encouraged to participate and join the committee. Bi-Annual meetings were held to accommodate day, time and location for the majority of members.

## **STATE EARLY INTERVENTION MUNICIPAL PROGRAM REVIEW**

### *IPRO Review*

In November, Saratoga County participated in an administrative review with BEI's contracting quality auditor, IPRO. The results were good overall; 5 out of 6 indicators were met in the priority areas of Child Find; 3 out of 5 indicators met the standard for the priority areas of services in natural environments and general administration of the Early Intervention Program.

Findings requiring a Corrective Action Plan (CAP) included:

- Corrections to the Saratoga County approved evaluator list
- Additional providers to be added to the Saratoga County Ongoing Service Coordinator list given to families
- Adding specific details to written notice to parents
- Additional written procedures to the program Health and Safety policy:

Procedures and program forms were adjusted, and training provided according to suggested corrections.



### **CHILD FIND**

#### *Overview*

The Saratoga County Early Intervention Program is dedicated to identify and evaluate as early as possible, those infants and toddlers who reside in Saratoga County, whose healthy development is compromised and to provide appropriate intervention for improving child and family development. In New York State, children “at-risk” for disability are *not* eligible for direct services in the Early Intervention Program. However, any child who meets risk criteria established in EIP regulations must be referred to the Early Intervention Program for developmental surveillance (screening and tracking). The purpose of developmental surveillance is to identify potential delays or disabilities, as early as possible, in children who are typically developing but are at high risk for developmental problems due to medical/biological neonatal or medical/biological post-neonatal and early childhood risk factors. For children who reside in the county that are considered “at-risk,” the EI program continues to oversee such outreach efforts, known as Child Find; conducting periodic screenings and monitoring of child development for families, as well as providing educational materials to families of a child at risk of a developmental delay in the future.

## *Collaboration with Saratoga County Child Protective Services (CPS)*

In addition to Early Intervention administrative regulations, Child Find is also a provision of the Federal Child Abuse Prevention and Treatment Act (CAPTA) which requires state child protection agencies to establish provisions and procedures for referral of a child under three years of age, who are involved in an indicated report of child abuse or neglect, to early intervention services. Reauthorization of CAPTA in 2011, further defined that state early intervention programs are *not* required to provide a multidisciplinary evaluation for children referred to EI as the result of being the subject of a substantiated case of child abuse or neglect or affected by illegal substance abuse. Rather, the intent of this relationship is to ensure confirmation that the overall health and development of these children are screened, typically by their pediatrician or family physician to determine whether a referral for an evaluation for services under EI is warranted when a delay or diagnosis is suspected or confirmed. Saratoga County CPS continues to refer all children under the age of 3 who are part of an indicated report of child abuse or neglect to Saratoga County Public Health. EI staff attempt to follow up with parents by phone to confirm that each child has a medical home and that they participate in recommended well-child screenings, including developmental monitoring.

## *Statistics*

In 2018 there were 47 referrals to Child Find, 39 from CPS; 4 from the NICU; 1 for parental developmental disability; and 3 for continued monitoring due to genetic conditions/ineligibility for EI. Only 4 children remained active at the end of the calendar year.



## *2019 Goals*

- EIO and EIM will reinstate annual provider meetings
- Human Resources and EIO/EIM will review civil service test list and hire an additional full time service coordinator
- EIO will work with community partners to continue to expand participation and collaboration of the LEICC
- EIO will finalize Memorandum of understanding (MOU) with the local Care Management agency for joint service coordination of children dually enrolled in Health Homes serving children and the EIP
- EIM will conduct an in-service with CPS staff to better collaborate in program roles and responsibilities surrounding CAPTA requirements
- EIO and EIM will continue participation in Neonatal Abstinence Syndrome (NAS) and maternal child health activities

## **EMERGENCY PREPAREDNESS PROGRAM (EPP)**

### **BACKGROUND**

Saratoga County Emergency Preparedness Program receives grant funding from the Public Health Emergency Preparedness (PHEP) Grant. Additionally, when Saratoga County is combined with neighboring counties that make up the Albany New York region, the area is considered among one of the “nation’s major *Metropolitan Statistical Areas* (MSAs).” [(CDC) 2012] As a MSA, Saratoga County Public Health Services (SCPHS) Emergency Preparedness Program (EPP) receives funding from the Centers for Disease Control and Prevention (CDC), which is referred to as the *Cities Readiness Initiative* (CRI). Funding received by SCPHS-EPP, is used to develop, exercise, and implement strategies that “emphasize an all-hazards approach to public health preparedness planning...which is the basis of the *Pandemic and All-Hazards Preparedness Act of 2006.*” [(CDC) 2012]

SCPHS is the local health department for Saratoga County, is regulated by the State of New York, and derives public health authority through State Public Health Law. SCPHS is not a full service local health department. SCPHS collaborates with New York State Regional Environmental Office for environmental related matters in their purview.

SCPHS Public Health Director is responsible for safeguarding the health of county residents and the public at large. SCPHS will assist the Saratoga County Office of Emergency Services (SC-OES) with planning and mitigation actions in advance of an all-hazard medical incident by utilizing a risk assessment approach.

Under a declared emergency SCPHS-EPP will be activated and will serve as the local coordinating point for health response and operations at the county level. Saratoga County Emergency Operations Center (EOC) will be staffed with appropriate representatives and lead roles for the core functional response areas as described in the Saratoga County Emergency Management Plan (CEMP). SCPHS is the designated lead agency for local health response or health and medical core functional areas as outlined in the Saratoga County CEMP. Response activities will be phased appropriately and scalable to ensure that the health and medical needs of the Saratoga County community are met throughout the emergency/disaster.

SCPHS-EPP is engaged in the Saratoga County comprehensive planning process to ensure that SCPHS can provide the delivery of essential public health services during an emergency.

In the event of an emergency, SCPHS is responsible for the management, coordination, and prioritization of health services and resources to support the health and medical needs of impacted individuals and families, local emergency responders, and critical infrastructure personnel (e.g. local government, response agencies).

### **EMERGENCY PREPAREDNESS PROGRAM EDUCATION STANDARDS**

The New York State Department of Health (NYSDOH) and the Centers for Disease Control (CDC) mandates SCPHS-EPP to remain current with emergency preparedness training and planning. The SCPHS-EPP maintains current awareness of local, state, national, and worldwide public health threats. SCPHS-EPP has adopted minimal Federal Emergency Management Agency (FEMA) - National Incident Management System (NIMS) training requirements for the public health employees. At a minimum of annually, the SCPHS-EPP coordinates with Saratoga County healthcare partners to host a full-scale multi-disciplinary health care emergency preparedness drill.

## FIT TESTING

SCPHS maintains a *Respiratory Protection Program* to ensure that SCPHS employees, who are required to wear respiratory protection as a condition of their employment, are protected from respiratory hazards through the proper use of respirators. All employees are fit-tested annually and given instruction on how to wear the respirator.

## MEDICAL RESERVE CORPS AND VOLUNTEERISM

The Saratoga County Medical Reserve Corps (SC-MRC) is a Saratoga County sanctioned volunteer organization. Saratoga County Public Health Services (SCPHS) lead the SC-MRC. It is recognized that during a large-scale health care emergency that SCPHS may need assistance to mitigate the hazard. The SC-MRC is a pre-defined group of volunteers that can be trained in advance of a large-scale event and therefore stand ready to be activated to assist in a health-care event response. The SC-MRC participated in training and activities throughout 2018 such as:

- Saratoga Racecourse Backstretch Fair
- Great Northeast Shakeout Drill
- Full Scale Drill in April 3, 2018
- Town of Milton Evacuation Drill
- Saratoga County Fair



## **IMMUNIZATION PROGRAM**

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

Saratoga County Public Health Services (SCPHS) continues to receive grant funding for the Immunization Action Plan (IAP). The IAP is 5-year grant that spans from 2018-2023 and is funded through the Center for Disease Control (CDC) and the New York State Department of Health (NYSDOH).

The 2018 goals for IAP work plan:

1. Increase childhood immunization rates in Saratoga County
2. Eliminate Perinatal Hepatitis B In Saratoga County
3. Increase adult immunization rates in Saratoga County
4. Reduce disparities among special/underserved populations in Saratoga County
5. Improve countywide New York State Immunization Information System (NYSIIS) accuracy and completeness
6. Have administrative structure in place to ensure that the IAP program fits into organizational structure
7. Submit timely and accurate narrative and fiscal reports as well as spend funds on allowable expenses.

Each grant year SCPHS develops a written work plan with defined interventions to accomplish the goals outlined above. A detailed report is written by the IAP coordinator and submitted quarterly to The New York State Bureau of Immunizations. In addition to vaccinating the uninsured and underinsured population of our county, the Immunization Coordinator conducts office visits to adult and pediatric providers in order to assist them with strategies they can use to increase their immunization rates. The Immunization Coordinator also works closely with school nurses, secondary institutions and day care administrators to assist with completing their school immunization survey. The IAP coordinator is available to answer questions, share new immunization guidelines, assist with interpreting immunization records and offer guidance when needed. Community outreach regarding immunization awareness, vaccine preventable diseases and new guidelines are provided in the form of in-services, immunization outreach campaigns, by using social media, SCPHS website and participating in health fairs. SCPHS hosts and facilitates a quarterly immunization coalition with numerous community stake holders. In 2018 the goal of this coalition was to have Obstetrics/Gynecology (OB/GYN) providers in Saratoga County start using NYSIIS to input their immunizations. Through the collaborative effort of the coalition one major OB/GYN practice met this goal and has been using NYSIIS to enter all immunizations administered at their practice.

SCPHS is participating in an incentive from NYS for the above mentioned provider visits which the Immunization Coordinator conducts. The incentive runs from October 1, 2018 through March 31, 2019. The goal of the performance incentive is to encourage completeness and timely reporting.

### **Perinatal Hepatitis B Prevention Program**

The Perinatal Hepatitis B Prevention Program (PHBPP) is another component of the IAP grant which is also funded by NYS and the CDC. The goal of this program is to prevent the transmission of hepatitis B through perinatal exposure. Prevention of perinatal hepatitis B occurs by ensuring all infants born to infected women receive the recommended prophylactic treatment within twelve hours of birth, successful completion of the hepatitis series per CDC guidelines and post vaccination serological testing to confirm immunity. The PHBPP Coordinator provides case management to the mother, infant and household contacts which is done through education and surveillance. Proper prophylaxis and completion of the hepatitis B vaccine series can reduce the incidence of neonatal infection by 95%. There were 5 perinatal hepatitis B cases in Saratoga County in 2018. SCPHS is currently involved in a perinatal hepatitis B incentive which runs from October 1, 2018 to September 1, 2019. The goal of the performance incentive is to encourage completion of all required data fields on the PHBPP supplemental page in the NYS data entry system.

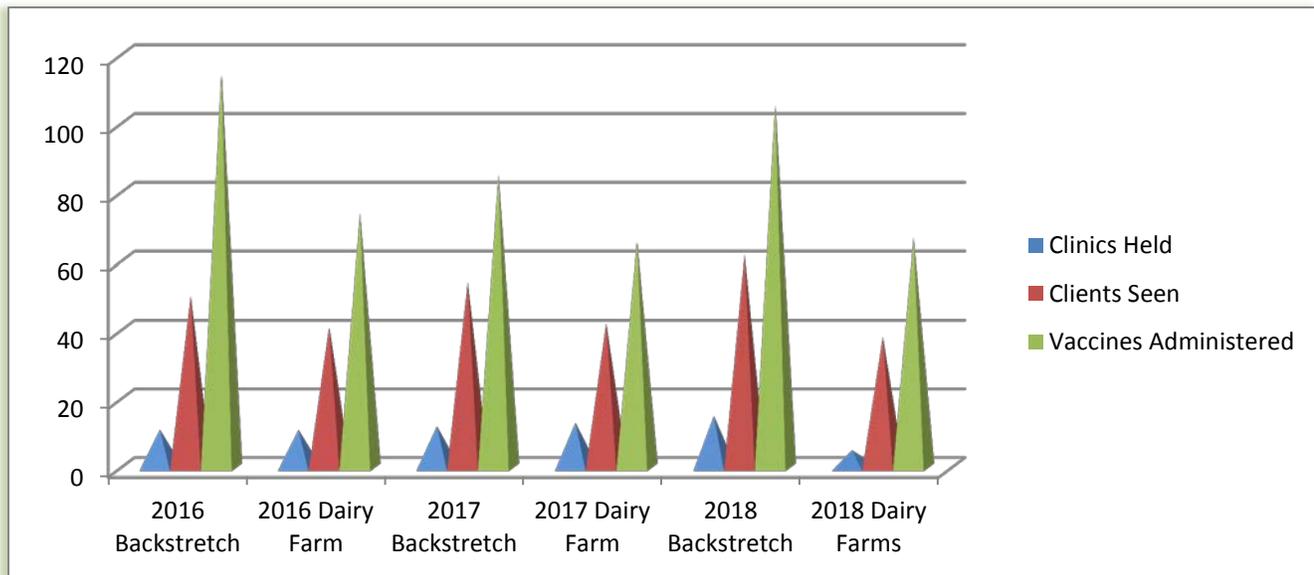
## Migrant Seasonal Farm Worker Initiative

The Migrant Seasonal Farm Worker (MSFW) Initiative is another component of the IAP grant. SCPHS is tasked to reduce disparities among special/underserved populations within Saratoga County.

The vision of MSFW program is to ensure migrant workers, who are living and working in Saratoga County, will have easy access to culturally and linguistically appropriate health services. This will address their needs and improve their quality of life. This is a collaborative effort between Saratoga County Public Health, Saratoga Hospital, the Backstretch Employee Assistance Team (B.E.S.T.) and the Migrant Education Identification/Recruitment Program.

Migrant and seasonal farm workers are defined, for federal funding purposes, as “individuals who are employed in agriculture on a seasonal basis and establish a temporary residence for the purpose of such employment.” This includes individuals who are employed at the Saratoga Race Course during the summer flat track season and dairy farm workers. These workers are often faced with a number of challenges which contribute to their high rate of morbidity such as; hazardous working conditions, long work hours, poverty, isolated living conditions, uninsured/underinsured medical insurance status, linguistic and cultural differences, inadequate transportation, lack of documentation, limited resources and a transient lifestyle. Additionally, these workers are at increased risk for transmitting vaccine preventable diseases due to their lack of immunization history. All of these factors contribute to poor continuity of care which results in significant health disparities for this population.

With the help of interpreters, Saratoga County Public Health Nurses hold immunization clinics at the Saratoga Racetrack Backstretch before, during and after the racing season and at dairy farms throughout the year in Saratoga County.



**Note:** Due to scheduling issues with the interpreter, and stricter vaccine transportation regulations there were less dairy farm visits this past year. There were no dairy farm visits conducted until the second quarter of the year because SCPHS needed to order specific equipment in order to take vaccines offsite and remain in compliance with the new CDC regulations.

**Immunization Clinic’s**

SCPHS offers immunization clinics to adults, children and international travelers in an effort to prevent the spread of vaccine preventable diseases. These clinics are held 3 times a month by appointment only and are increased during back to school season as needed. SCPHS follows the Advisory Committee on Immunization Practice’s (ACIP) immunization requirements.

In addition to offering vaccines to international travelers, these clinics provide vaccines to children and adults who require them for work, college or school and cannot obtain them elsewhere. The clinics are a valuable resource to the community because they also serve the uninsured and underinsured population of Saratoga County.

For those clients who are not traveling, Vaccine for Adult (VFA) or Vaccine for Children (VFC) program may be utilized to cover the cost of the vaccine based on eligibility.

There is no cost for the VFA and VFC vaccines. A \$25.00 administration fee per vaccine is charged (max \$75). This fee is billed to Medicaid and Managed Medicaid Plans for VFC/Child Health Plus clients only. A sliding fee scale is utilized for those families who are unable to pay the full amount. No person is denied vaccines due to inability to pay the administration fee. For those who do not qualify for the VFA/VFC program some private insurances are accepted

Saratoga County has 9 medical doctors who provide care to patients but do not offer vaccines. Therefore SCPHS is responsible to provide immunizations until clients can find another provider who will fulfill this need for them. However, adults may obtain certain vaccines at a pharmacy if they have insurance. In January of 2018 the CDC enforced stricter vaccine storage and handling requirements. Unfortunately, these stricter requirements have discouraged providers from wanting to participate in vaccine programs.

Saratoga County has many businesses that employ foreign workers. These employees often bring their families to live with them and are not connected with a provider immediately. Often times, the children are excluded from school until their vaccines are current with the NYS immunization schedule. SCPHS fills this gap in the community and connects these clients with a medical home and health insurance if needed.

**Immunization Clinics-2018**

Total number of clinics: where travel, adult and children’s vaccines were administered - 69			
❖ Total number of children vaccinated (excluding travel)	129	➤ Total number of adults vaccinated (excluding travel)	85
❖ Total number of children visits (excluding travel)	147	➤ Total number of adult visits (excluding travel)	128
❖ Total number of vaccines administered to children (excluding travel)	293	➤ Total number of vaccines administered to adults (excluding travel)	201
❖ Total number of uninsured/underinsured children	53	➤ Total number of uninsured/underinsured adults	34
🌿 Total number of persons who received travel vaccines (children and adults)			85
🌿 Total number of travel visits			99
🌿 Total number of travel vaccines administered			139

## **COMMUNICABLE DISEASE PREVENTION AND CONTROL PROGRAM**

The Communicable Disease (CD) Coordinator is responsible for the surveillance and investigation of over 70 mandated reportable communicable/vector borne diseases. The CD Coordinator follows Center for Disease Control (CDC) and Council for State and Territorial Epidemiologist (CSTE) guidelines for management and surveillance of diseases.

Saratoga County Public Health Services (SCPHS) collaborates and works closely with the New York State Department of Health (NYSDOH), the NYSDOH Environmental District Office, local physicians and other health care providers, urgent care centers, schools, daycare centers, local hospitals and area nursing homes. This is to ensure laboratory confirmed and/or clinically suspected illnesses are investigated in a timely manner. The CD Coordinator then triages reports and initiates investigations to prevent or mitigate any potential outbreaks. The investigation involves contacting providers, laboratories and the local hospital Infection Control Nurses (ICN) to gather necessary information. Once the client is contacted by either telephone, home visit and/or mailing, standard questionnaires are utilized to establish illness history and identify potential sources of exposure. The CD Coordinator provides continuing education, counseling about the disease, and identifies whether the client has been prescribed the appropriate countermeasure per CDC guidelines and if identified close contacts should receive post exposure prophylaxis (PEP). If PEP is recommended, the CD Coordinator communicates with the close contact's provider to discuss PEP recommendations and/or facilitate the contact receiving PEP

Specific diseases require further follow-up testing to ensure a person is no longer infected before returning to work in a sensitive setting (i.e., daycare, school, health care, food handler). The CD Coordinator will follow these clients until the required negative specimens are received, and then release them back to work. During this process the CD Coordinator works closely with the client, their provider, their employer, New York State Communicable Disease Investigation Unit and Environmental Health (if indicated).

Part of the role of the CD Coordinator is to educate our community partners as well as the public. This is accomplished by responding to phone calls and emails regarding disease treatment/testing and infection control issues. SCPHS also disseminates disease updates, new protocols, changes in treatment guidelines, and NYSDOH alerts throughout the year to healthcare providers, hospitals, and urgent care centers in Saratoga County. This is done through blast faxing, mailings and the use of Integrated Health Alert Network System (IHANS).

In October of 2018 there was a measles outbreak within the Hasidic Orthodox Jewish community in downstate New York. The outbreak was directly linked to travel to and from Israel. Measles is a highly contagious vaccine preventable disease. SCPHS responded to this by working with area hospital ICN's to educate local providers, emergency departments and urgent care facilities. Protocols regarding the how to properly diagnose, test and prevent the spread of disease were distributed to providers and facilities within Saratoga County. SCPHS also developed and implemented a screening process for clients of all SCPHS clinics to mitigate the potential spread of disease.

Disease	2018 Cases	2017 Cases
AMEBIASIS	0	1
ANAPLASMOSIS**	85	126
BABESIOSIS**	4	10
CAMPYLOBACTERIOSIS**	38	44
CRYPTOSPORIDIOSIS**	1	6
CYCLOSPORA	0	0
DENGUE FEVER**	0	0
ECOLI SHIGA TOXIN	2	4
EHRlichiosis (CHAFEENSIS)**	1	2
ENCEPHALITIS, ARBO**	1	4
ARBOVIRUS, NON-NEURO INVASIVE**	0	1
GIARDIASIS	28	21
HAEMOPHILUS INFLUENZAE, NOT TYPE B	6	4
HEPATITIS A	0	2
HEPATITIS B, ACUTE	0	0
HEPATITIS B, CHRONIC	28	14
HEPATITIS B, INFANT PERINATAL	6	0
HEPATITIS C, ACUTE	2	1
HEPATITIS C, CHRONIC	88	69
HEMOLYTIC UREMIC SYNDROME	1	0
INFLUENZA A, LAB CONFIRMED	1458	857
INFLUENZA B, LAB CONFIRMED	645	348
INFLUENZA UNSPECIFIED, LAB CONFIRMED	9	5
LEGIONELLOSIS	10	7
LISTERIOSIS	0	0

\*\* Confirmed and Probable cases counted; Campylobacter confirmed and suspect

\*\*\*\* These figures represent Sentinel Lyme Disease Surveillance, not the actual number of cases. Sentinel surveillance involves investigating only 20% of positive Lyme disease lab reports.

LYME DISEASE**/ ****	89	121
MALARIA	2	4
MENINGITIS, ASEPTIC	3	5
MENINGITIS, OTHER BACTERIAL	0	0
MENINGOCOCCAL**	0	0
MUMPS**	4	33
PERTUSSIS**	13	4
ROCKY MTN SPOT FEVER**	3	3
SALMONELLOSIS**	19	9
SHIGELLOSIS**	2	0
STREP, GROUP A INVASIVE	13	10
STREP, GROUP B INVASIVE	19	23
STREP, GROUP B INV, EARLY/LATE ONSET	1	1
STREP PNEUMONIAE, INVASIVE**	22	16
TOXIC SHOCK SYNDROME, STREPTOCOCCAL**	0	0
TYPHOID FEVER	0	1
VIBRIO - NON 01 CHOLERA	3	1
YERSINIOSIS	2	1
ZIKA VIRUS (SYMPTOMATIC)**	0	0
SYPHILIS TOTAL	5	9
SYPHILIS PRIMARY OR SECONDARY	5	9
LATE LATENT	6	6
GONORRHEA	74	70
CHLAMYDIA	550	600
<b>Totals</b>	<b>2957</b>	<b>2452</b>

\*\* Confirmed and Probable cases counted; Campylobacter confirmed and suspect

\*\*\*\* These figures represent Sentinel Lyme Disease Surveillance, not the actual number of cases. Sentinel surveillance involves investigating only 20% of positive Lyme disease lab reports.

## **SEASONAL INFLUENZA INITIATIVE**

During the 2017-2018 influenza season, SCPHS focused on vaccinating the underserved populations of Saratoga County, this includes those who are uninsured and underinsured. Vaccination clinics were held at the Salvation Army, Shelters of Saratoga, St. Peters Addiction Recovery Center, Migrant Seasonal Farm Worker Clinics, Backstretch Clinics, Sexually Transmitted Disease (STD) Clinic, Tuberculosis Clinic, soup kitchens. Flu vaccinations were offered during regular immunization clinics throughout the flu season. Private flu vaccine is also available for those clients who do have insurance. Clients who have insurance and are seeking only a flu vaccine are encouraged to get vaccinated at their primary provider or local pharmacy.

SCPHS provided educational campaigns prior to and throughout the flu season to heighten the awareness for flu prevention. This outreach campaign started in July 2017 and ended in May 2018. It consisted of dropping off or mailing educational materials to school nurses, providers, libraries, churches, county buildings, day care centers, health fairs, corporate buildings, nursing homes, adult living communities and community centers. Information was also disseminated on the local news stations and by posting regularly on Facebook, Twitter and our website.

July 31, 2013 a new NYSDOH regulation, *Title 10 NYCRR Section 2.59* took effect. This regulation requires employees of an agency licensed under Article 28 and Article 36 of Public Health Law, who are not vaccinated against influenza, to wear a surgical or procedure mask while working in areas where patients or clients may be present. This decision was made by the New York State Commissioner on December 12, 2017 and was in effect until May 17, 2018.

On November 8, 2018 Saratoga County Public Health made the Immunization Action Coalition Honor Roll for our excellent healthcare worker influenza immunization rates.

## **SEASONAL TICK OUTREACH INITIATIVE**

The 2018 outreach initiative began in March with educational messaging on Facebook, Twitter and the SCPHS website. Tick removal kits and educational materials were distributed to 35 adult and pediatric providers, bait and tackle shops, town highway departments, health and wellness fairs/expos, all town supervisors for display at town halls, homeless shelters and encampments, 4H Training Center, feed stores, community centers, Saratoga Racetrack Backstretch, Saratoga County Fair, and state parks.

## **ZIKA ACTION PLAN**

A New York State Health Advisory- *Zika Virus Update*- was released late January 2018 and SCPHS updated their Zika Action Plan (ZAP) accordingly. One of the highlights of the release was that local health departments would no longer need to provide authorization for testing to be sent to Wadsworth. Additionally, interim guidance was provided in the Morbidity and Mortality Weekly Report 8/10/2018 that changed the recommended timeframe to wait before conception after potential Zika exposure. The recommendation for men exposed (either symptomatic or asymptomatic) dropped from 6 months to 3 months. Pre-conception testing continues to **NOT** be recommended. This information was sent out to all OB/GYN providers in Saratoga County.

## **OUTREACH ACTIVITIES**

During the third quarter a food safety initiative was launched. The goal was to educate the public about food safety and handling. Educational information was shared via social media, bulletin boards in the clinic area SCPHS and food safety links were posted on the SCPHS website. A variety of printed educational materials were distributed at the Saratoga County Fair and at all Senior Health Screening Clinics during this quarter.

**SEXUALLY TRANSMITTED DISEASE PROGRAM**

The Sexually Transmitted Disease (STD) Program Coordinator is responsible for the surveillance, investigation and follow-up of all reportable STD's (chlamydia, gonorrhea and syphilis.) Additionally, the STD Coordinator educates the public about the importance of STD prevention and testing and works closely with providers to ensure that current testing and treatment guidelines are adhered to.

In July of 2018 the STD clinic relocated from the Community Health Center to the Saratoga County Public Health Building. Clinics are held weekly on Wednesday from 9:30-11:30 (except holidays.) Confidential STD testing and treatment is available free of charge for Saratoga County residents. STD testing or treatment that cannot be accommodated at the Public Health Clinic will be referred to one of three Planned Parenthood locations for the same services at no cost to the client. Additional referrals are made according to each client's needs. Vaccines are also offered at the STD clinic. Another important component of the clinic is to promote safer sex practices in order to prevent disease transmission. Condoms and educational materials are distributed to clients at no cost.

In 2013 Saratoga County Public Health entered into a partnership with the Ryan White Program of Hudson Headwaters. A counselor from the Ryan White Program is available at each STD clinic to provide rapid HIV testing and counseling as well as Hepatitis C testing and counseling free of charge.

**Sexually Transmitted Disease Clinic Statistics**

Month	Clinics Held		Total Clinic Attendance		HIV Tests		STD Tests	
	2018	2017	2018	2017	2018	2017	2018	2017
					Rapid	Rapid		
January	3	4	6	7	4	7	14	27
February	2	3	6	8	6	6	20	29
March	3	2	8	3	8	2	32	8
April	4	4	11	9	7	7	28	31
May	3	3	7	8	4	6	21	12
June	5	5	11	9	9	6	38	24
July	3	3	9	9	7	9	31	32
August	2	2	7	3	6	3	23	12
September	4	2	9	2	7	2	25	8
October	3	2	6	8	5	7	26	21
November	2	1	6	2	6	1	31	3
December	3	2	8	5	1	5	19	20
<b>TOTALS</b>	37	33	94	73	70	61	308	227

In 2018 a total of 13 referrals were made to Planned Parenthood for STD testing and treatment

## **RABIES CONTROL PROGRAM**

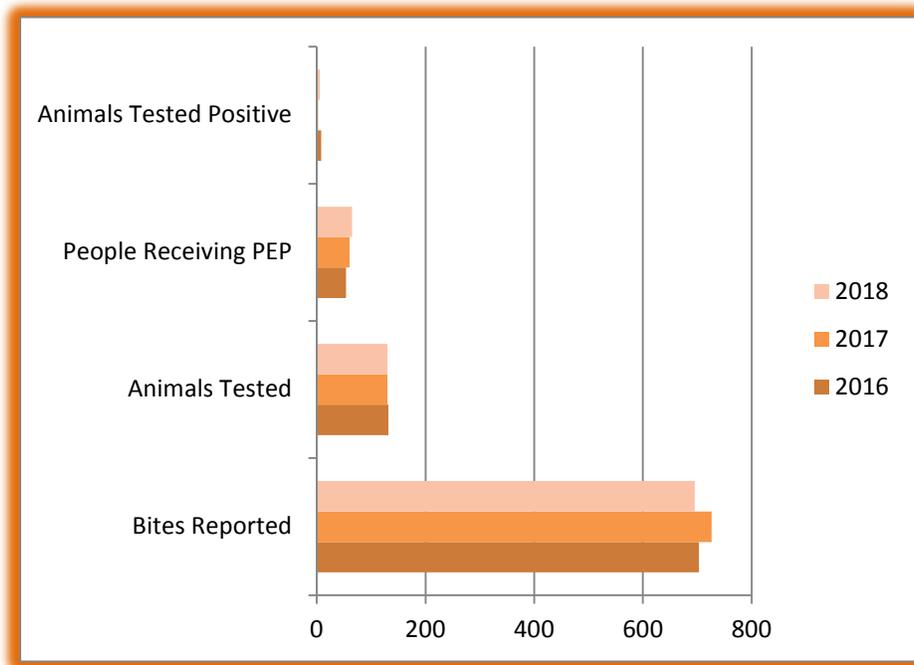
The Saratoga County Rabies Program ensures timely surveillance, follow up, intervention and education to all potential rabies exposures. Public Health Law mandates that all animal bites and potential rabies exposures be reported to the victim's county of residence. In November 2002, a law went into effect which requires all dogs, cats and ferrets are vaccinated against rabies by the age of four months.

In addition to surveillance, Saratoga County Public Health Services (SCPHS) approves rabies specimen testing, authorizes post-exposure rabies prophylaxis and administers pre-exposure rabies prophylaxis to veterinarian office staff, animal control officers (ACO's), Saratoga County Animal Shelter (SCAS) staff and Saratoga County Highway Department staff.

SCPHS Rabies Coordinator collaborates on a regular basis with the ACO's, local veterinarians as well as the SCAS staff regarding rabies specimen prepping/testing, animal confinements, and animal control issues. SCPHS continues to provide rabies education to the residents of Saratoga County, medical providers, ACO's, and veterinarians.

In 2018 SCPHS Rabies Coordinator worked closely with Saratoga Hospital, Wilton Medical Arts and Malta Medical Center to reevaluate the process of communication between facilities when a client has a potential rabies exposure. New forms and policies were developed and a new process for communication was initiated.

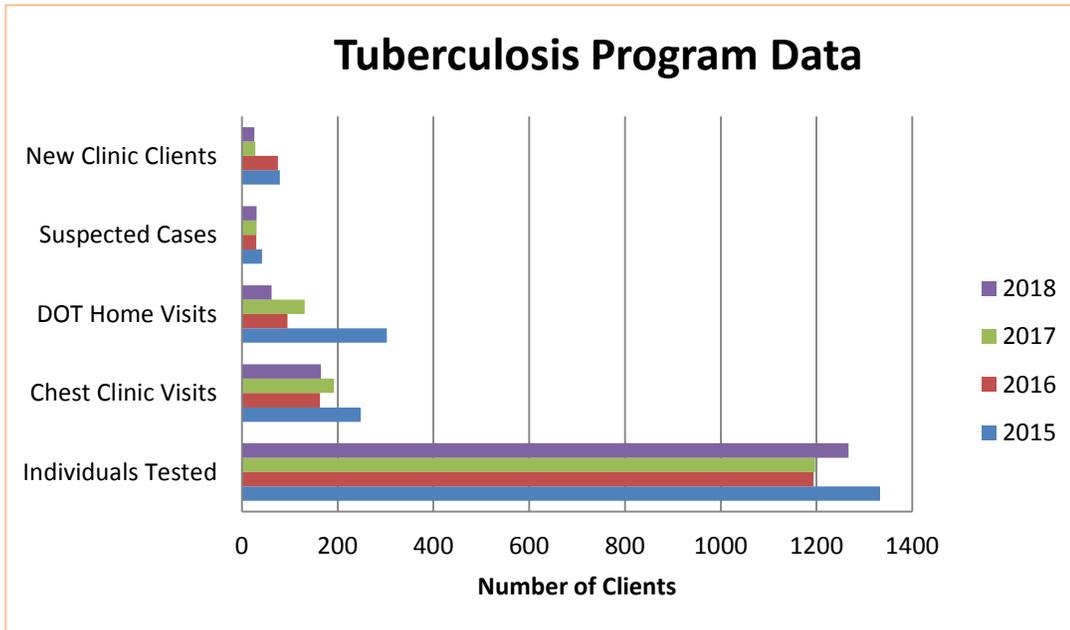
Free rabies clinics are held throughout the year at the 4H Training Center. These clinics are available for Saratoga County residents who are owners to ferrets, cats and dogs.



**TUBERCULOSIS CONTROL AND TREATMENT PROGRAM**

The Saratoga County Public Health Services (SCPHS) Tuberculosis (TB) Program provides follow up on patients with active and latent Tuberculosis. Dr. Desmond Del Giacco, MD, is the medical consultant for the TB program. The TB Program Nurse Coordinator works closely with Dr. Del Giacco to assure that individuals with active and latent TB receive proper treatment. SCPHS provides a monthly TB Clinic for Saratoga County and Washington County residents with active and latent TB. The TB Program Nurse Coordinator conducts contact investigations on active TB cases within the county and provides direct observed therapy (DOT) home visits for Saratoga County Residents with Active and Latent TB. The TB Program Nurse Coordinator and other nursing staff place and read TB tests (PPDs) at the St. Peters Addiction and Recovery Center (SPARC) in

Saratoga Springs on scheduled days each month and in urgent circumstances provide Purified Protein Derivative (PPD) placement via individual appointments outside of the SPARC clinic. SPARC has found this service extremely helpful to their clients as a PPD is required before a client can enter a treatment program. In addition, PPD clinics are held at Shelters of Saratoga (SOS) for high-risk homeless clients who require a PPD for employment or entry in to any program. The SPARC and SOS PPD clinics help to remove a barrier to care for these high-risk populations seeking treatment and employment. The TB Program provides services and medications at no cost to patients in an effort to assure compliance with prescribed treatment and follow up appointments.



Total cases	Active TB	TB
2016	2017	2018
3	2	1

**LEAD POISONING PREVENTION PROGRAM**

The Saratoga County Public Health Services (SCPHS) Lead Poisoning Prevention Program is charged with promoting lead testing for one and two year old children, providing education and follow up to families of children with elevated lead levels, and providing education to providers and the public about Lead Poisoning Prevention. Lead poisoning in children can have many serious health effects such as anemia, delayed growth and developmental, mental impairment, irritability, hyperactivity, and decreased IQ. High lead levels can also cause seizures, coma, and death.

New York State (NYS) Public Health Law requires Primary Medical Care Providers to lead test all one and two-year old children in their practice. The NYS Department of Health (DOH) Lead Web tracks the results of all lead tests done on children age one, two, and three in New York State, as well as compliance rates for lead testing among Primary Medical Care Providers. SCPHS Lead Poisoning Prevention Program Staff check the NYS Lead Web daily and review all lead test results on Saratoga County Children.

The Lead Coordinator tracks all Saratoga County children with elevated Lead levels above 5 mcg/dl. Parents of children with blood lead levels of 5 to 9.9 mcg/dl are sent educational information and a letter encouraging them to contact their medical provider regarding possible follow-up testing. Children with lead levels of 10 or above are admitted to the Lead Poisoning Prevention Program for follow up. The Lead Program Coordinator contacts the parents of children with lead levels of 10 and above to discuss the elevated lead level, offers a home visit, and provides education to the parents. Children with a lead level of 15 and above receive a joint home visit from the SCPHS Lead Coordinator and the NYS DOH Environmental Department staff for assessment and lead testing of the home environment. During the home visit, the Lead Program Coordinator provides further education and an information packet, as well as an assessment to determine any possible sources of Lead exposure in the home. The Lead Coordinator contacts the primary care provider following the home visit, and sends a reminder letter to the primary care provider and parents regarding recommended intervals for retesting per NYS DOH guidance. Reminder letters for repeat lead testing are sent to the parents and the primary medical care provider after each lead test result is received, until the child's Lead level is below 10.

The SCPHS Lead Poisoning Prevention Program is partially grant funded and home visits and follow up are provided at no cost to the families. SCPHS is able to do lead screening for children who are uninsured and /or without a primary care provider and has a sliding fee schedule in place, for families with incomes in excess of 200% of the federal poverty level.

The Lead Poisoning Prevention Program also provides outreach and education to physician offices, daycares, WIC Clinics, libraries, schools, town Building Inspectors/Code Enforcement Officers, hardware stores, hunting and fishing clubs. In addition, educational Lead Poisoning Prevention information is provided to the public through monthly mailings of reminder one and two year old Lead letters, Health Fairs, the Saratoga County website, and Facebook posts.

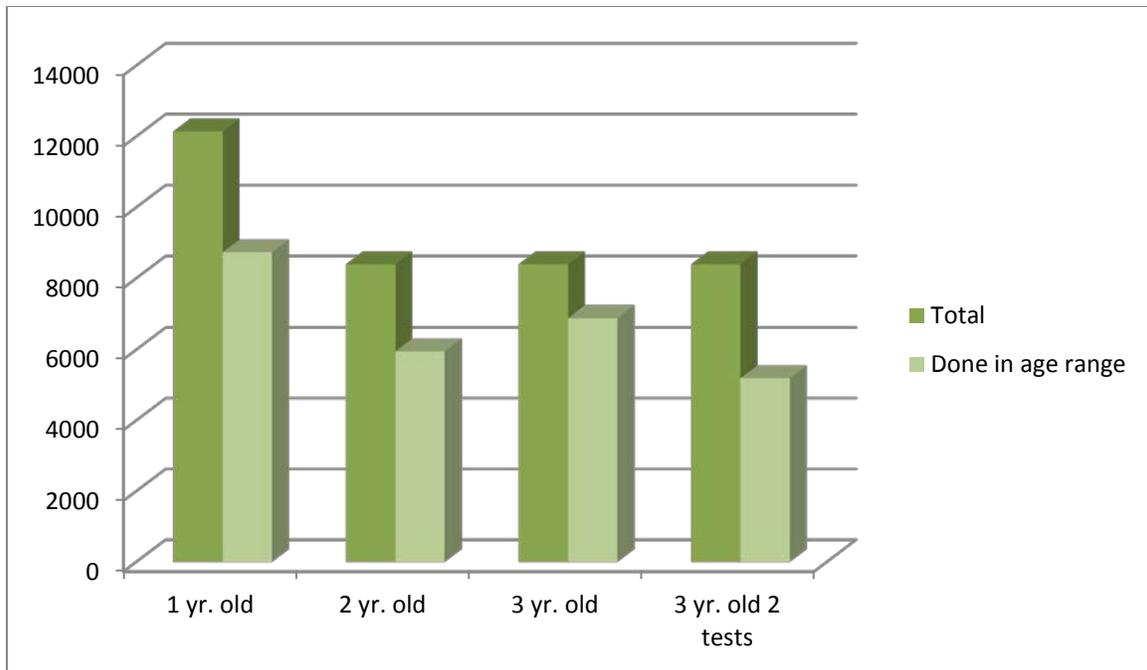
### Lead Poisoning Prevention Program Statistics

	<u>2017</u>	<u>2018</u>
County wide Total Initial Screenings(aged 9 months to 6 years)*	4344	4181

\*Statistical data from Lead Web system

<b>Blood Lead Screening Tests by Age Group Category During Selected Time Frame</b>		
Age (months) at Blood Lead Draw	2017	2018
<9 (before age one)	10	5
9 - < 18 (at or around age one)	1968	1858
18 - <36 (at or around age two)	2064	2061
36 - <48	86	81
48 - <60	82	56
60 - <72	35	39
72+	109	86
<b>Total</b>	<b>4354</b>	<b>4181</b>

## Aggregate Clinical Performance Report for Saratoga County



### **FAMILY HEALTH PROGRAM**

#### **Maternal Child Health**

The Saratoga County Public Health Services Family Health Program which includes Maternal Child Health (MCH) provides nursing services to high risk Antepartum and Post-partum women with health and social concerns, as well as newborns and children with health concerns. Referrals for the program are typically received from hospitals, and physician offices. The MCH nurse, via telephone, contacts families, and a telephone interview tool is utilized to discuss the family's needs prior to a home visit. Home visits are voluntary and offered to all families referred to the program. Families that decline a home visit are mailed an introductory letter that explains the MCH program and offers a home visit. Included with the introductory letter is an educational packet containing brochures, and information sheets regarding antepartum, post-partum, and newborn/infant topics as applicable.

In general, a one-time home visit is provided unless health or social concerns require subsequent visits. Home visits focus on physical assessment of the mother and or newborn/infant, teaching and the provision of educational information regarding nutrition, breastfeeding, safety, dental health, immunizations, family planning, childhood growth and development, and routine primary and preventive medical care. All visits are individualized according to family needs, and the nurse works closely with physicians and other involved service providers to ensure positive outcomes for these high-risk families. Payment from insurance companies is pursued but Insurance companies often do not cover home visiting MCH services. The lack of insurance reimbursement or inability of the family to pay for MCH services is never a barrier to care. Due to the lack of insurance coverage for MCH home visiting services and the declining number of home visiting MCH providers, area Hospitals are now routinely scheduling new moms and babies for a visit to their physician within one week of discharge. In most cases, the new mom and baby have already been seen by the physician and resolved any issues, prior to the MCH provider receiving the referral. The SCPHS MCH program has been without a fulltime nurse since March of 2017 and a part time nurse since August 2017 and has been unable to secure a full or part time MCH nurse despite ongoing recruitment efforts. There were no maternal child visits made in 2018.

MATERNAL CHILD VISITS		
	<u>2017</u>	<u>2016</u>
NEWBORN	16	130
POST PARTUM	14	116
ANTEPARTUM	0	8
No Charge/Not Paid By Insurance	11	198
Paid by Insurance	19	47
<b>TOTAL VISITS</b>	<b>30</b>	<b>245</b>

### Newborn Screening Program

The New York State Department of Health (NYS DOH) Newborn Screening Program oversees testing for 40 different disorders on all newborns in NYS. Newborns are initially tested in the hospital of their birth when they are at least 24 hours old. Repeat testing is required if, specimens are unsuitable for testing, if the blood test was done prior to the newborn being 24 hours of age, if the newborn was receiving Total Parenteral Nutrition or a transfusion, or if the initial results were not within normal limits.

The program works closely with health care providers and local health departments to ensure that newborns receive repeat testing if needed, and that newborns with abnormal test results receive proper medical diagnosis and treatment. The program first notifies the hospital or the private physician of the need for repeat testing. If a repeat specimen is not received within 3 weeks of the initial notification, then the local health department in the county where the newborn resides is notified by letter. When SCPHS receives a letter from the NYS DOH Health Screening Program, every attempt is made to locate and make contact with the parent. Follow up with the parent and physician is done to ensure that repeat testing is completed. If the parent does not have the means to get the child to the physician office or laboratory for testing, SCPHS can make a home visit to collect the specimen and deliver it to the laboratory. SCPHS keeps the NYS DOH Newborn Screening Program apprised of follow up efforts and outcomes.

### Children with Special Healthcare Needs (CSHCN)

#### *Overview*

In New York State, it is estimated that between 800,000 and 1.6 million children have special health care needs. These children account for the majority of pediatric health care expenditures in New York State. Part of Article 6 State aid funding includes an initiative known as Children with Special Health Care Needs (CSHCN), whereby to address these large expenditures, the county is responsible to provide assistance, information, and referral services for health and related services for resident children with chronic illness and/or physical disabilities. The Saratoga County CSHCN continually partners with children’s programs, striving for collaborative efforts with community stakeholders and providing outreach to the community about various services and supports for families.

#### *Staffing Changes*

Because of continued decline in calls to the program, in March 2017, an Outreach Care Worker was hired to implement public health detailing, spread more in depth education and information sharing to the community. The New York State Department of Health continues to provide funding to counties to facilitate outreach efforts as well as to supplement the Physically Handicapped Children’s Program (PHCP). Counties are responsible for submitting quarterly data to the NYS Department of Health that tracks all of the information and intake shared with families and community partners for the CSHCN grant. This tracking helps to identify “gaps” with insurance coverage for children’s services or limited resources for children in the community that might be corrected through further state funding and initiatives.

## Continued Efforts

In addition to the outreach efforts with community partners, CSHCN continues to maintain informational booklets for various categories of illness/disorders for children (birth to 21). Categories include *ADD/ADHD, Asthma, Cancer, Eating Disorders and Nutrition and Fitness, Deaf/Hard of Hearing, Diabetes, Autism Spectrum Disorder (ASD), Cerebral Palsy/Muscular Dystrophy, and Blind/Visual Impairment*. The handbooks include specific resources and contact information for different areas of need such as, financial information, support groups, medical, dental, recreational resources, important phone numbers and emergency help. The handbooks were written at an appropriate literary level and are available on the Saratoga County website. In 2018, all of the handbooks will be updated to include website and social media information as applicable.

The Outreach Care Worker has become involved in a variety of focus groups and community partnerships. These include joint ventures of health and interagency awareness fairs, the Saratoga County Fair, the Saratoga County Economic Opportunity Council (EOC), Head Start Program, Family Partnership/Health Advisory Board, the Capital District Infant Mental Health Association, the Saratoga County Infant Toddler Mental Health Task Force, the Lion's Club, Saratoga Hospital Pre-diabetes Coalition, the area crisis action network and the Center for Autism and Related Disabilities (CARD) stakeholder group.

Program staff, upon request, also offers educational in-services to child service providers, primary care physicians and any other interested groups.

## Accomplishments

Of notable mention this year, in partnership with the Saratoga County Infant Toddler Mental Health Task force, CSHCN offered a six-week parenting course in the Pyramid model <http://www.nysecac.org/ecac-initiatives/pyramid-model/>.

The course included childcare and dinner for the families, and provided practical, positive parenting techniques to a variety of families. The course was well attended and a significant waiting list was gathered. Additional families, who would have liked to attend something similar, if offered in the future.

An in-service was provided to the county school nurses offering support and assistance to families of children with special needs in local school districts.

Through participation in the Parent University planning committee for the Saratoga Springs School District, the Outreach Care Worker achieved inclusion of lecture and seminar topics pertinent to parenting a child with special needs, as part of the Parent University program.

<http://www.saratogaschools.org/parents.cfm?subpage=423705>

## 2019 Goals

Saratoga County Public Health Services will improve collaboration efforts with the county Departments of Social Services and Child Protective Services, as well as with local Head Start programs.

Interagency collaboration for all outreach and support for families will continue to improve.





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