

**YATES COUNTY
PUBLIC HEALTH DEPARTMENT**

2008

ANNUAL REPORT

Lauren R. Snyder, RN, MPA
Director of Public Health
417 Liberty Street
Suite 2120
Penn Yan, New York 14527
Phone: (315) 536-5160
Fax: (315) 536-5145
publichealth@yatescounty.org

PUBLIC HEALTH IN AMERICA

Vision:

Healthy People in Healthy Communities

Mission:

Promote Physical and Mental Health and Prevent Disease,
Injury, and Disability

Public Health

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

Essential Public Health Services

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

**YATES COUNTY PUBLIC HEALTH DEPARTMENT
2008 Committee Membership**

Human Services Committee of the Legislature

Douglas Paddock, Chairperson
Deborah Flood, Vice Chairperson
H. Taylor Fitch
Donald House
Timothy J. Dennis

Professional Advisory Committee

Eleanor DeWitt, MD, Medical Director
Vicki Dornberger, Speech Pathologist
Leslie Elliott, Registered Dietician
Mary Griffiths, Public Health Nurse
Deborah Minor, RN, Supervising Public Health Nurse
Lauren R. Snyder, RN, Director of Public Health
Debra Snyder, RN, Supervising Public Health Nurse
Teresa Suave, Occupational Therapist
Susan Thomas, Medical Social Worker
Tammy Smalt, Nurse Practitioner
Patricia Meyers, RN

S²AY (Steuben, Schuyler, Allegany, Yates) Rural Health Network/Health Advisory Committee

Taylor Fitch, Yates County Legislator
Nancy Gates, Commissioner, Department of Social Services
Lauren Snyder, Director of Public Health
Evan Sorber, Community Representative

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

**YATES COUNTY PUBLIC HEALTH DEPARTMENT
2008 Personnel**

Administrative staff:

Lauren R. Snyder	Director of Public Health/Patient Services
Dr. Eleanor DeWitt	Medical Director (contract)
Mary Anne Delcour	FT Administrative Assistant
Heather McLoud	FT Sr Account Clerk Typist
Joy Jensen	FT Sr Account Clerk Typist
Carol Pease *	FT Account Clerk Typist
Patti Rumsey **	FT Account Clerk Typist

Home Care Staff

Debra M. Snyder	Supervising Public Health Nurse
Mary Griffiths	FT Public Health Nurse
Kathleen Hillman	FT Public Health Nurse
Karen Strickland	FT Public Health Nurse
Dayna Meyers	FT Registered Nurse
Karen Gilmartin	FT Public Health Nurse
Brenda Guasp	FT Registered Nurse
Beverly Lewis *	FT Registered Nurse
Ann Murphy	Licensed Practical Nurse
Beverly Boardman	FT Home Health Aide
Anne Gee	FT Home Health Aide
Mary Gee	PT Home Health Aide
Janet Butcher	PT Home Health Aide
Amy Francione	FT Home Health Aide
Deborah Furgeson	FT Home Health Aide
Susan King	PT Home Health Aide
Ann Marie Easling **	PT Home Health Aide
Laura McLoud *	PT Home Health Aide
Lorraine Longstreth *	PT Home Health Aide
Kim Lafler	FT Home Health Aide
Ethel Brown	PT Home Health Aide
Linda Campbell	PT Home Health Aide
Brenda Ingram	PT Home Health Aide
Colleen Murphy	PT Home Health Aide
Susan Thomas	PT Medical Social Worker

Public Health/Prevention Staff

Deborah Minor	Supervising Public Health Nurse Deputy Director of Public Health
Virginia Colf	Data entry/outreach Immunization/Lead (contract)
Melanie Sullivan	Outreach Transitional Case Management (contract)
Christine Warriner	FT Coordinator EMS
Kathy Swarouth	FT Health Educator, Health Education
Julia Field	Clinic Manager
Sara Christensen	FT Public Health Nurse, Maternal-Child Health Supervising Public Health Nurse
Dorothy Volz	FT Public Health Nurse, Maternal-Child Health
Mary Corwin	FT Registered Nurse
Elizabeth Rogers	FT Registered Nurse, Maternal-Child Health
Margaret Brinn	Public Health Emergency Planner (contract)

Special Children's Services Staff

Cynthia Chapman	FT Public Health Assistant, Coordinator
Terri Cadwell	FT Sr Account Clerk Typist
Susan Simmons	FT Public Health Nurse/Service Coordinator, Early Intervention
Lynn Canfield	CPSE Designee (contract)
Nancy Middlebrook	CPSE Designee (contract)

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

The Public Health Department also contracts with numerous agencies and individuals to deliver specialized services to both Home Care Patients and Children with Special Needs.

The activities of the Yates County Public Health Department (YCPH) can be divided into three major areas of operation: Home Care Services, Public Health Prevention Programs, and Special Children's Services.

HOME CARE SERVICES

The Yates County Public Health Nursing Service operates a Certified Home Health Agency (CHHA) which is licensed and regulated by the State of New York and the federal government (Center for Medicare and Medicaid Services). The CHHA is approved to provide Skilled Nursing, Physical Therapy, Occupational Therapy, Speech Pathology, Medical Social Work Services, and Aide services (Home Health Aide and Personal Care Aide level) on an intermittent basis to homebound patients. Services are provided in accordance with a physician's plan of treatment and based on a nursing evaluation of patient needs. Medical supplies and equipment are provided by arrangement. Services are available seven days per week.

Skilled nursing service is the essential component of the home care program. No other service is provided without nursing assessment, planning and case management. **Therapies** are provided on a part-time basis by contract with individuals and other agencies. **Aide Services** are an extension of nursing and/or therapy service. Home Health Aides are trained in a New York State Department of Health-approved course. A **Home Health Aide** can assist a patient with bathing and grooming, meal preparation, household tasks and *health-related tasks* under the supervision of a nurse or therapist. (*Health-related tasks are not provided under the Personal Care Aide program.*) Reimbursement for home care services comes from several sources: Medicare, Medicaid, private insurance and patient payment based on a sliding fee scale. No resident of Yates County is denied services due to inability to pay. The initial referral for home care services is accepted from any source.

REFERRAL SOURCES	2004	2005	2006	2007	2008
Total Hospital Referrals	397	427	392	513	524
Physician's & Nurse's	101	81	111	105	153
Other Agencies	81	58	145	146	209
Family Members, Self, Friends	38	57	51	55	62
Other	154	167	251	130	33
Total Referrals*	771	790	950	949	981

- Includes referrals for all home visiting programs (Home Care, MCH and TCM programs)
- 2005 home care referrals only 536; 2006 home care referrals only 673, 2007 home care referrals only = 617. 2008 Home Care referrals - 635.

YCPH maintains a 24-hour on-call system for home care patients and referral sources through the County central dispatch. A Supervising Public Health Nurse participates in a weekly discharge planning conference with Soldiers and Sailors Memorial Hospital. Upon request, a Public Health Nurse may participate in discharge planning meetings at other area hospitals, skilled nursing facilities and rehabilitation centers.

HOME VISITS	2004 cases	2004 visits	2005 cases	2005 visits	2006 cases	2006 visits	2007 cases	2007 visits	2008 cases	2008 visits
Skilled Nursing*	795	7,968	805	7,911	869	7,789	948	8,464	871	8,798
Physical Therapy	162	854	156	811	184	874	200	923	198	881
Occupational Therapy	76	400	68	302	89	320	79	189	73	183
Speech Therapy	7	16	3	6	8	26	6	14	12	45
Nutrition Therapy	0	0	2	4	7	30	6	11	7	8
MSW	10	83	25	93	27	108	22	163	14	77
Aide Services:										
Home Health Aide	143	5,837	121	5,318	130	5,147	140	5,433	129	5,597
Hours:		7,894		7,487		7,344		7,495		7,620
Personal Care Aide	109	6,990	107	6,434	116	6,553	140	7,471	120	7,740
Hours:		10,339		8,866		9,113		10,208		10,377
Total Visits		22,148		20,879		20,847		22,668		23,329

*Includes all home visit, not just home care.

The Agency is participating in a three year national Quality Improvement campaign to reduce the frequency of re-hospitalizations and emergent care through the use of best practices by the agency home care staff. To date, the agency has experienced a significant improvement in both measures.

The Department of Social Services has been contracting with the Public Health Nursing Service since 1985 to provide personal care aide services to their Medicaid patients. Personal care services are paid for by Medicaid funds, approximately ten percent of which are county dollars. The Office for the Aging has also contracted with the Public Health Nursing Service since the early 1980s for non-medical personal care aide services for self-paying patients who are age sixty or older. These services are paid for by Community Service to the Elderly (CSE) and Expanded In-Home Services to the Elderly Program (EISEP) and Caregiver grant funds.

PUBLIC HEALTH PREVENTION PROGRAMS

Public Health Prevention Programs are intended to prevent disease and disability and to promote optimal health. Due to the small number of staff in the agency, response to a public health emergency or disaster would be augmented by the Geneva District and/or the Western Regional Offices of the New York State Department of Health. Some of the preventive health services provided directly by the staff of the agency in 2008 are described below.

Maternal and Child Health Programs, always a priority of public health, include such programs as health guidance for prenatal, post partum and newborn cases; health teaching, developmental screening and immunizations in the Clinic setting as well as in the home; school-based immunization clinics; Lead Testing and Case Management.

Lead Screening Program

In 2008, a total of 355 initial lead screening tests were performed on Yates County children. Of these initial screening tests, 77% were done by the child's primary care provider and the rest (80) were completed by the Public Health Staff (110 in 2006; 74 in 2007.) Children who have a BLL greater than 10mcg/dl receive follow up of letters, phone calls, and/or visit to parents. One child received case management services due to a confirmed elevated

blood lead level (BLL) of 15mcg/dl or greater. Two children had levels high enough (>20mcg/dl), to have an environmental home investigation, and case management. During 2008, Public Health continued to be actively involved in outreach to the public educating about lead poisoning, prevention and testing. Outreach examples included brochures, placemats, newspaper articles, movie theater ads, radio press releases and visits to daycare centers. As a reminder to parents in Yates County to have their child's lead level tested, a birthday card was sent to all one and two year olds. Public Health continues to offer lead testing in the home and at our clinics. Fees are based on a sliding scale and for most families the testing is free.

MATERNAL-CHILD HEALTH VISITS AND CLINICS

	2004 Cases	2004 Visits	2005 Cases	2005 Visits	2006 Cases	2006 Visits	2007 Cases	2007 Visits	2008 Cases	2008 Visits
Prenatal visits	40	89	54	183	54	210	51	185	40	126
Postpartum visits	66	84	61	122	50	145	49	115	31	85
Newborn and pediatric visits	114	162	89	171	133	266	101	210	46	128
Well Child Clinic (Penn Yan)	41	71	46	90	69	100	36	46	8	11
Immunization Clinic (Penn Yan)	27	33	39	57	41	54	18	25	23	28
Immunization Clinic (Dundee)	66	101	75	125	95	146	78	110	55	98
Home Visit Immunizations									205	387

Immunization Program

Immunizations for vaccine-preventable diseases were administered at the Immunization Clinics, in the Public Health Office, at school clinics, community clinics, and at home visits. In January 2007, a pilot project was initiated to offer vaccinations in the home to members of the Mennonite community as they are the primary user of the county sponsored immunization clinics, and to families who have become disconnected from a medical home. The families continue to be very receptive to this project. As you can see above, our clinic numbers have decreased due to the families taking the home visits. Over 700 vaccines have been administered in 2008 in the home to infants, children, adolescents and adults. The families seen that were disconnected from their medical home were offered assistance to become reestablished with a physician and/or with health insurance as appropriate.

Immunizations Administered

	2004	2005	2006	2007	2008
Immunizations Administered (not including flu & pneumococcal)	710	1,131	1,008	1,794	1,270

Immunizations for vaccine-preventable diseases were administered at Immunization Clinics, in the Public Health Office, at school clinics, community clinics, and at home visits. Included in the vaccines administered in 2008 were 25 adult Hepatitis B, 24 adult Hepatitis A, 83 adult Combination Hepatitis A/B, 39 adult Tetanus boosters, and 6 adult measles, mumps and rubella vaccines. YCPH was a committee member of the five-county Finger Lakes Adult Immunization Coalition which works to increase adult vaccination coverage. YCPH also continues to work with the New York State Department of Health on the pilot project aimed at making immunizations available to jail inmates.

Influenza and Pneumococcal Vaccine Clinics

	2003	2004	2005	2006	2007	2008
Pneumococcal vaccine	46	7	53	30	31	19
Flu Vaccine (Inactivated)	1490	297	2015	1128	1,024	972
Flu Mist (Live Attenuated)	-	-	8	0	8	15

The Public Health Office and the Office for the Aging worked jointly to sponsor influenza and pneumococcal immunization clinics for the public. Eight clinics were held for the public which included one long term care facility and two senior citizen apartment buildings. Eleven flu clinics were provided to various work sites in Yates County that wished to offer the flu vaccine to their employees. Public Health Nurses made home visits to vaccinate the homebound. Vaccine was also administered at the office to individuals who were not able to attend a public clinic or who were unable to obtain vaccine at their physician's office. This flu season went well with little to no barriers to providers in obtaining their vaccine supply and vaccinating their patients.

Communicable Disease Control

	2004	2005	2006	2007	2008
Communicable Disease Investigations (not including rabies)	61	52	99	87	106

Communicable
disease control, one of

the core functions of Public Health, focuses on early identification of disease, prompt notification of the provider community, investigation of disease sources, and education to the community members to prevent spread. With the threat of disease outbreaks, whether by natural spread of emerging pathogens such as Avian Flu or by human intent such as bio-terrorism, active surveillance has become an increasingly vital component of the communicable disease program. This active surveillance necessitates a collaborative effort with health department personnel, hospital emergency department staff, school nurses, pharmacists, physicians and other partners. Active surveillance is an attempt to identify trends such as increased purchase of pain, fever and gastrointestinal medications as well as increases

in similar chief complaints of emergency department patients in order to identify clusters or outbreaks of illness quickly. The communicable disease nurse serves as a liaison between New York State Department of Health and the provider community. The communicable disease staff also works collaboratively with the Health Educator to keep the public at large informed and educated regarding infection control and illness prevention measures. Passive surveillance whereby the practitioners and laboratories report designated illnesses such as salmonella, giardia , hepatitis and chlamydia to the Public Health office continued.

Rabies Control Program

	2004	2005	2006	2007	2008
Rabies Investigations	90	87	126	129	150
Specimens Submitted	51	53	40	26	47
Positive Specimens	7	2	5	1	0
Humans Treated	12	20	15	16	19

Since the emergence of raccoon Rabies in Yates County in 1991, considerable staff

time (including a 24-hour on-call system) has been devoted to investigating rabies-related incidents in order to prevent human rabies disease. The on-call system was expanded in 2000 and again in 2001 to include calls related to West Nile Virus (dead and ill birds), bioterrorism-related incidents or inquiries and all other reportable communicable diseases. In 2008 a total of 1140 dogs, cats and ferrets were vaccinated at the county sponsored rabies clinics. A total of 8 clinics were held during 2008 at five sites (Penn Yan, Potter, Benton, Italy and Dundee). The addition of a clinic in Benton was a successful effort to increase rabies vaccination to the many Mennonites farm owners in that area.

West Nile Virus Control Program

	2004	2005	2006	2007	2008
Bird reports	19	7	33	15	8
Birds Submitted	5	2	1	0	0
Positive Birds	0	0	1	0	0
Humans Cases	0	0	0	0	0

In 2002, Yates County confirmed the first human case of West Nile Virus in upstate New York. One human case of West Nile Virus occurred in Yates County in 2003 along with a confirmed case of West Nile Virus in a horse. Since 2004 there have been no confirmed cases of West Nile Virus in humans; however in 2006 one black crow was submitted and tested positive for West Nile Virus in Yates County. Although there is no vaccine available to protect humans from West Nile Virus, there is a vaccine available for horses that can be administered by veterinarians. NYSDOH carried out a mosquito surveillance program for Yates County in 2006. One of the four pools of mosquitoes that were collected and analyzed was positive for West Nile Virus. To date that was the first positive pool collected and reported in Yates County. No mosquito surveillance was performed for Yates County in 2007 or 2008.

Tuberculosis Control Program

Of the 492 individuals (includes 201 inmates at Yates County Jail) who were tested for Tuberculosis in 2008, ten were identified with Latent Tuberculosis Infection (past exposure to TB but no active disease). These individuals were monitored monthly by Public Health staff while they received preventive treatment. TB screening was also provided for employees of YCPH and other county agencies. Since 2002 there have been no active cases of Tuberculosis in Yates County.

Sexually Transmitted Disease Control

	2004	2005	2006	2007	2008
Gonorrhea Cases	0	0	6	5	2
Syphilis Cases	1	0	1	2	0
Chlamydia Cases	24	14	36	33	37

Diagnosis and treatment of sexually transmitted diseases is a

responsibility of each county health department in New York State. In lieu of operating an STD clinic, Yates County pays for diagnosis and treatment for Sexually Transmitted Diseases by other providers such as the Rushville Health Center and the Family Planning Center. New York State Department of Health personnel perform follow-up of STD cases with assistance from YCPH staff. There continued to be elevated numbers of chlamydia in Yates County during the year 2008. The rise in chlamydia is not limited to Yates County as other counties of New York State reported increases as well. YCPH continues to work with the Family Planning Center to provide education to decrease the numbers of STD cases.

HIV/AIDS Program

Community education and availability of counseling and testing are priority activities in the HIV/AIDS program. YCPH provides both confidential and anonymous HIV testing. Testing can be done either by blood sample or oral swab. A total of 51 individuals were tested for HIV by Public Health staff in 2008. HIV/AIDS counseling and testing was offered at the Yates County Public Health office, at home visits, and at the county jail.

Transitional Case Management

Transitional Case Management is a program that was created in 1997 as a collaborative project between the Rushville Health Center, Department of Social Services, Department of Community Services, Soldiers and Sailors Memorial Hospital, as well as Public Health. This program just celebrated over 10 years of service. It was designed to

assist Yates County individuals/families to make the transition from Medicaid to Medicaid Managed Care. This was achieved by helping individuals/families to learn how to access and utilize health care appropriately. The TCM program has evolved to provide short-term support as well as linkage to other agencies that can continue to provide assistance as needed.

The TCM Team consists of a Public Health Nurse and an Outreach Worker that helps individuals/families referred from the local DSS office, hospital, other health and mental health providers, as well as other community based organizations. To date, the TCM program has served over five hundred (566) individuals and families. Some individuals/families have been admitted for TCM services more than once. A total of 246 visits were made to 83 individuals and families during 2008. Lack of transportation remains a concern of the many individuals and families served in this program, however, the primary needs identified during 2008 were 36 medical/financial issues along with finding suitable housing. 32 individuals/families were in need of assistance with medical bills or in need of housing. The secondary need identified for individuals in the TCM program was that of obtaining Social Security Disability (SSD) or Social Security Supplement Income (SSI).

Jail Services

Public Health continues to work collaboratively with the jail's medical director, nurse practitioner and mental health nurse to address the immediate health concerns of inmates and medication management that is related to inmates with Latent Tuberculosis Infection. The nurse practitioner employed by YCSO and the mental health nurse employed by Community Services have the primary responsibility for daily medical needs, medication management and mental health concerns. A public health nurse visits the jail 2-3 times per week to screen inmates for tuberculosis, offer HIV testing, and offer Hepatitis A and Hepatitis B vaccination for those at high risk. During 2008 more than 45 inmates received HIV counseling and testing through this program and 46 Hepatitis A and or B vaccinations were administered.

Annual tuberculin skin testing was provided and Hepatitis A/Hepatitis B immunization was also offered to the YCSO staff. The nurse answered questions that YCSO staff had in regards to infection control and personal protective equipment.

Worksite Wellness

With the employment of a chronic disease nurse worksite wellness activities began in 2008 as a collaborative effort between the S2AY Rural Health Network and Yates County Public Health nursing staff. Worksite Wellness Programs have been designed with the goal of promoting and improving the health of employees and their families. The Healthy Living Partnership Project is working to engage area employers to commit to a three year plan which provides

annual no cost testing to employees. The goal is to test employees using four key health indicators : BMI - Body Mass Index, % of body fat, random glucose and cholesterol testing, and blood pressure readings. Our 1st Worksite Wellness Champion received biometric screenings on 26 employees in October of 2008.

Chronic Disease Prevention

In an effort to address chronic disease prevention, a new position was added in 2007. This nurse worked to educate and provide screening through the Colorectal Cancer Screening and Prostate Cancer Education Initiative. A total of 27 men /women were screened for colorectal cancer in the 1st quarter of 2008. Through an expansion plan in April 2008 the Cancer Services Program became integrated statewide, offering comprehensive screening to eligible men and women throughout New York. Through outreach and screening efforts an additional 67 men/women were screened for breast, cervical and/or colorectal cancer during 2008.

A new pilot project with Monroe Plan to address new onset or poorly controlled Type II Diabetes was also initiated. The project allows nursing staff to visit identified patients in their home to provide diabetes education to patients and their families. Working collaboratively with a team consisting of nursing, outreach, social work and medical staff we are able to reinforce needed education and encouragement to direct the patient to self-care management of diabetes.

Community Service

Community service is an integral part of the role of Public Health. Some of the community boards, committees, and partnerships that YCPH personnel participated in during 2008 included: Yates T.B. and Health Association, Office for the Aging Advisory Board, Coordinated Children's Services Initiative Tier I and Tier II, the Finger Lakes Perinatal Advisory Committee and Data System Board, the Council on Alcoholism and Health Quest Foundation , the Domestic Violence Task Force, the Finger Lakes Regional Health System Community Advisory Committee, the Family Planning Center Board, the Tobacco Action Coalition of the Finger Lakes, the Yates Community Health Planning Council, HUBBA, the Ontario-Yates Hospice Board, Keuka Housing Council Board and the transitional housing committee, Finger Lakes Health Systems Agency Board, the Finger Lakes Adult Immunization Coalition, the Keuka Lake School Wellness Committee, the Penn Yan Central School District Wellness Committee, the Drunk-Impaired Driving Victims Impact Panel Task Force , the Yates County Continuum of Care Committee, and the Yates County Children's Center Advisory Board.

Health Education

The Health Education Program in 2008 included programs and projects targeting diverse segments of the county population through a variety of health and safety topics and forms of educational strategies. The variety of

health messages included issues like tobacco cessation, pandemic flu and emergency planning, radon, dental health, hand washing, child safety seats, diabetes, colorectal/cervical/breast/prostate cancers, cardiovascular disease, stroke, metabolic syndrome, underage drinking, rabies, West Nile virus, Lyme disease, cancer support services, injury prevention, HIV/AIDS, lead, fire prevention, osteoporosis, menopause, behavioral health, asthma, immunizations, obesity, food safety, health literacy, long term care, heat-related illnesses, sun & skin safety, poison prevention, recreational water illnesses, toy safety, carbon monoxide, and worksite wellness.

The Health counts newsletter featuring health information is distributed by email, Link to the county website, and in paper form to 37 area employers. The Public Health Department section of the County's website offers information about current alerts, available services, contact information, emergency preparedness, hot topics, as articles and press releases were submitted to local media sources. Articles were also submitted to outside agency publications such as the Office For the Aging newsletter sent to senior adults throughout the County.

An important role of the Health Educator is participation in coalitions and committees. These include the Public Health prevent team, Emergency Preparedness core team, Youth Speak-out, Diabetes Coalition, Yates County Coalition on Underage Drinking, Child Health & Safety Fair, Tobacco Action Coalition of The Finger Lakes, S2AY Rural Health Network, HIV/STD Coalition, Women's Health Forum, Healthy Women's Partnership, Human Resource Network, Lunch & Learn program, Injury Prevention Coalition, and Cancer Services Partnership of Ontario, Seneca & Yates Counties.

Annually, the Public health Educator participates in community events in which health information is delivered to members of the public in face-to-face meetings through various health venues like Conservation Field Day, Good Health Fall Fest, Yates County Fair, summer recreation programs, Child Health & Safety Fair, and dental health month Presentations in area preschools and day care centers. Written information and presentations on health-related topics are shared at these events which reach a broad spectrum of residents throughout the County

Emergency Medical Services Coordination (EMS)

The Emergency Medical Service program is designed to provide recruitment, retention and training to high quality volunteers who provide pre-hospital patient care throughout the county. Courses provided this year were: Certified First Responder (CFR) Original, CFR Refresher, Emergency Medical Technician (EMT) Core and EMT Refresher, also assisted with a Farmedic course. Classes that were provided through this office included Spinal Immobilization Protocol, Weapons of Mass Destruction, Radio Communication Procedures, CPR with AED, and Blood borne Pathogen training.

This program assists the community with emergency planning and preparedness. Our office attended Yates County Safety Fair, Keuka College Experiential Fair, and Soldiers & Sailors Hospital Health Fair through Finger Lakes Health. We also planned and participated in drills with Yates ARC, Medical Reserves Corps, and Penn Yan Central School.

The EMS Coordinator participates in Yates County meetings such as EMS Advisory Board, Fire Advisory Board, Fireman's Association, Health Emergency Operations Planning Task Force, and E-911 Advisory Board. The EMS Coordinator is also a participant in the Yates County Coalition on Underage Drinking, Injury Prevention Team, HUBBA, and other community groups. At the regional level the coordinator is a member of Finger Lakes Regional Emergency Medical Advisory Council and Finger Lakes Regional EMS Council.

Public Health Emergency Response Planning

Yates County Public Health continues to plan for potential biological, chemical, or radiological terrorist events as well as naturally occurring large-scale communicable disease outbreaks or natural disasters. The Health-related Emergency Operations Plan (HEOP) is used as the Preparedness and Response Plan for these events; it is updated regularly as new information is received. The HEOP Task Force composed of representatives from many community organizations and agencies meets quarterly and addresses local concerns in the planning effort.

Focus activities in 2008 included:

- Increased awareness to build community trust through Public Health Emergency Planning and Pandemic Influenza Presentations to several community service organizations, faith based organizations and Office for the Aging 'Lunch and Learn'.
- Continued working to recruit and retain volunteers in the Yates County Public Health Medical Reserve Corps (MRC). Educational programs included formal orientation, National Incident Management training, and a MRC Volunteer table top exercise on a Pandemic Influenza Outbreak. The Pandemic Influenza table top exercise was presented at Region II and III Medical Reserve Corps Conference in Atlantic City. Applied for and received a \$10,000 2008 National MRC- NACCHO (National Association of County and City Health Officials) Capacity Building Award. There are 143 dedicated MRC volunteers at years end.
- Continued networking with NYSDOH in drafting and testing a NYS Volunteer Management System (ServNY) to credential, deploy and maintain records of NYS medical volunteers. Yates County is one of the nine pilot counties scheduled to go live with this new web based program in early 2009.
- Collaborated with the YC Office of Emergency Management and created a new Yates County Office of Emergency Management Community-Wide Emergency Agreement. The document was distributed to appropriate agencies/organizations in the community for their participation.

- Revised annexes to the HEOP plan including the Strategic National Stockpile Annex and the YCPH Nursing Service Home Health Agency Emergency Plan. Formal presentations on the newly revised plan were offered to the Yates County Public Health Emergency Preparedness Core Team and the HEOP Task Force.
- Participated with Finger Lakes Public Health Alliance grant study related to Alternate Care Site Planning during Pandemic Influenza.
- Collaborated with Yates County Chapter American Red Cross to offer community education and activities related to emergency preparedness that included radio broadcasts, weekly flyers to all county church bulletins and school presentations.
- Maintained YCPH staff awareness of personal and community emergency preparedness through formal education and newsletters including emergency preparedness core competencies, a table top exercise on the department Continuity of Operations Plan and quarterly staff notification drills.
- Participated with state and regional agencies on programs, drills and exercises addressing Communication, Radiological Emergencies, and Countermeasures for Dispensing and Distribution.

Yates County Public Health Emergency Planning continues to liaison and participate in planning with regional health care workers, community agencies and emergency providers; regional and state networks; analyze and interpret local, regional and state data; and educate Public Health staff and the community on the preparedness activities through presentations and monthly newsletters.

The S²AY Rural Health Network (Steuben, Schuyler, Allegany, and Yates counties plus Ontario, Seneca and Wayne counties).

Yates County Public Health continued to serve as the lead for this seven-county Rural Health Network which was created in 1998. Originally, the Network explored the possible advantages of a multi-county Certified Home Health Agency (home care program). The initial study, however, did not demonstrate a clear advantage to forming a regional home care agency. The overall mission of the network is “to improve access to care, to improve health outcomes and to improve health status for the residents of the seven counties by integrating delivery of public health programs...” In 2004, the Network completed the process of becoming a 501-C-3 not-for-profit corporation. Network activities in 2008 included policy and procedure development for multiple programs, corporate compliance, enrollment of children and adults in health insurance to promote access to health care in the seven county region (Facilitated Enrollment), training of public health personnel, collaboration with schools on public health issues, in-service education for the home care staff, recruitment and training of medical volunteers (Medical Reserve Corps), expansion from a seven-county to an eleven county Regional Early Childhood Coalition (RECC) and continuation of a regional public health emergency planning coalition “Finger Lakes Public Health

Alliance” (FLPHA) . The Network grant funds have enabled the seven counties to provide programs, to review and monitor quality of services, and to create partnerships that would not be possible on a single county basis.

SPECIAL CHILDREN’S SERVICES

Physically Handicapped Children's Program (PHCP)

PHCP provides financial assistance for medical care to applicants from birth to 21 years who have, or are suspected of having, a physically disabling condition or serious, chronic illness. The disability may be congenital or acquired and care must be delivered by an approved provider. The family must be financially eligible for the program. Costs for services are shared equally by Yates County and the State of New York. Costs for the initial diagnosis and evaluation are fully funded by the state. While PHCP no longer operates an Orthodontic program in Yates County (due to a lack of providers), children who exhibit severely debilitating cranio-facial anomalies that require orthodontic correction will continue to be treated through this program. The number of active PHCP cases continued to decrease again this year, due primarily to enrollment in public insurances such as Child Health Plus, Family Health Plus, Blue Choice Option/Medicaid, and private insurance plans. Ten families were enrolled in the **Case Management** component of PHCP at the end of 2008.

PHCP Cases	2004	2005	2006	2007	2008
	65	63	64	47	42

Child Find

Child Find is a state-funded program to track infants 0-3 years of age who are at high risk for physical or developmental disabilities. The main focus of Child Find is to ensure children have a health care provider, have health insurance, are receiving ongoing developmental screening from their primary health care provider, and are referred to Early Intervention for a full evaluation if needed. In June of 2005, the New York State Department of Health’s new directive to County Child Protective Services regarding referral of children under the age of three who are involved in substantiated cases of child abuse/neglect went into effect. Basically, the intent of the directive was to ensure that these children are screened to determine the appropriateness of a referral for an Early Intervention evaluation or to continue surveillance through Child Find. During 2008, one child served by the Child Find program was then evaluated through Early Intervention, and was deemed eligible for services. Six children remained active in the Child Find program at the end of 2008.

Early Intervention and Preschool Special Education programs

YCPH also administers the **Preschool Special Education Program** (ages 3-5) and the **Early Intervention Program (EI)** (ages 0-3) for children with disabilities and developmental delays. Services available through these programs include Special Education, Speech, Physical and Occupational Therapies, Counseling, Respite, Nursing, Special Transportation and Service Coordination (EI only). Both programs encourage inclusion of children with special needs in natural settings such as home, day care, preschool or other community settings rather than in segregated, special education classrooms. For the second year in a row, Preschool expenses for 2008 were well below budget estimates, despite an increase in the number of students. The County's efforts to engage the Penn Yan School District to transport preschoolers within their district on buses with elementary school children to the local center based program provider, continues to significantly decrease overall transportation costs. Multiplicity of services and settings for several children with more intensive needs enrolled in the Early Intervention program during the year, account for the appreciably higher expense for 2008.

Special Children's Services	2004	2005	2006	2007	2008
Preschool (ages 3-5)	79	81	99	87	103
EI services (ages 0-2)	74	52	68	84	81
Child Find	10	6	19	32	21
Preschool Expenditures	\$1,127,431	\$1,605,423	\$1,418,045	\$1,362,095	\$1,058,707
EI Expenditures	\$251,054	\$261,021	\$240,172	\$175,276	\$296,466

Public Health Department Budget¹

	2004	2005	2006	2007	2008
Expenditures:					
Revised Budgeted	3,231,228	2,941,294	3,149,715.37	3,257,872	3,549,471
Expended	2,792,127	2,737,317	2,891,237.01	3,022,372	3,195,358
*Revenues:					
Medicare	569,402	515,688	498,609.84	522,416	442,683
Medicaid	409,975	473,945	390,278.55	482,687	414,678
Self-Pay	15,170	17,649	23,540.18	34,934	28,437
BCBS/Other	175,837	213,004	247,181.35	315,056	342,662
CSE & EISEP	74,058	70,394	105,989.44	111,648	109,651
Other: (TCM, LEIA)	24,536	33,990	59,421.39	39,534	43,540
Clinic Fees	3,480	25,561	20,359.43	33,840	10,029
Donation	2,360	2,374	2,242.00	3,706	4,506
Total Fees:	1,274,818	1,352,605	1,347,622.18	1,543,821	1,396,186
State Aid & Grants:	1,597,326	1,471,874	1,506,299.13	1,595,804	1,527,908
Total Revenues:	2,872,144	2,824,479	2,853,921.31	3,139,625	2,924,094
Net Expense:	<80,017>	<87,162>	37,315.70	<117,253>	271,264
Reimbursement Rate:	102%	103%	99%	104%	91.5%

*Revenues from fees are reported on a cash basis.

¹ Does not include service costs for Special Children's Services. See previous chart for those expenses.