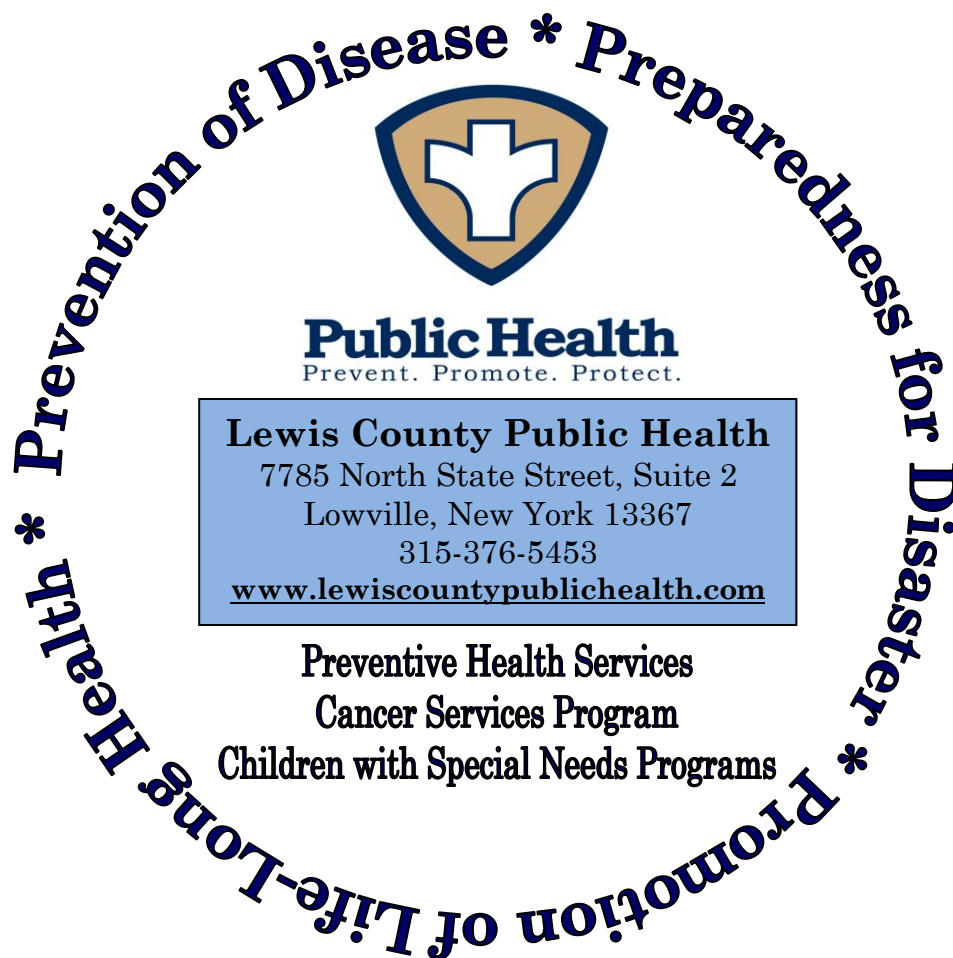




2017 ANNUAL REPORT





Public Health
Prevent. Promote. Protect.

**Director of Public Health
Early Intervention Official**

Penny A. Ingham, MPH

Medical Director

Daniel Root, MD

Supervising Public Health Nurse

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**Children with Special Needs Program Coordinator
Early Intervention Official Designee
Preschool Municipality Representative**

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Cancer Services Program

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**Corporate Compliance Officer
Emergency Preparedness Coordinator**

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Lewis County Rabies Control Officer

Jennifer Nightingale, DVM



Governing Board - Lewis County Board of Legislators

Chairman

Michael A. Tabolt

Public Health Committee Members

Rocky Fawcett

Philip Hathway

Andrea Moroughan, Chair



Public Health
Prevent. Promote. Protect.

2017 Annual Summary

Lewis County Public Health provided a wide array of services to Lewis County residents during 2017. Twenty staff members make up the Public Health Workforce providing preventive services such as immunizations and lead poisoning prevention, disease control services such as rabies prevention and communicable disease outbreak surveillance, children with special needs programs such as Early Intervention and Preschool developmental disabilities programs, screening services such as Cancer Services Program and Hepatitis C, and Population Health and Health Education such as obesity reduction strategies and evidence based education programs.

The overall priorities for 2017 included:

- Implement the Quality Improvement Plan 2017 objectives
- Complete Strategic Plan for 2017-2022, utilizing PH 3.0
- Continue efforts toward Public Health Accreditation
- Prepare Workforce Development and Succession Plan
- Implement (Corporate) Compliancy Group Management System
- Implement Tyler-Munis Fiscal System and determine other fiscal system needs

2017 also was the first full year for implementing the Community Health Improvement Plan. These efforts are only successful when aligned with strategic partnerships in our communities. Several exciting strategies were implemented during the year including worksite wellness.

The 2017-2022 Strategic Plan was completed this year and may be found on our website along with the most current Community Needs Assessment and Community Health Improvement Plan. We are very excited to work toward achieving the five priorities outlined in the strategic plan knowing it will result in a stronger and sustainable Public Health Agency for Lewis County.

LCPH continues to provide services as a Diagnostic and Treatment Center, a Licensed Home Care Services Agency, Partial CLIA Laboratory and as an Early Intervention Services Agency. These designations allow Public Health to provide the services required under New York State Law.

For the Public Health Staff, the Health Services Advisory Committee and our Strategic Community Partners, the health and wellness of the Citizens of Lewis County continues to be our guide as we deliver services of the highest quality with compassion, dedication, and integrity. We continue our readiness to prevent disease, promote life-long health and prepare and protect the citizens of Lewis County.

Penny A. Ingham, MPH
Director

Core Public Health Services

Lewis County Public Health provides a variety of services and programs to promote and protect the health of our community. Following State Article Six Guidelines for General Public Health Work, LCPH offers core Public Health services that include: **Emergency Preparedness and Response, Community Health Assessment, Chronic Disease Prevention, Family Health, Communicable Disease Control, and Environmental Health.**

The Preventive Health Services Programs are designed to promote healthy lifestyles, prevent disease and reduce the impact of disease in county residents. Our programs include: Communicable Disease Surveillance and Control, HIV and Hepatitis C Counseling and Testing, Rabies Prevention, Mosquito and Tick Disease Prevention, Immunizations for Children and Adults, including Travel Vaccination Clinics, Chronic Disease Prevention and Self-Management Programs, Tobacco Cessation Programs, Cancer Screening Services, Maternal Child (MCH) Home Visiting Program, Childhood Lead Poisoning Prevention Program, Blood Lead and Hemoglobin Testing, Dental Health Education, Emergency Preparedness and Response, Health Education, Child Health Consultant, and Population Health Initiatives.

Our goal is to meet the health needs of our community in the most efficient and effective way possible, for this reason we provide programs proven to be effective. We also work with a variety of partners throughout the community to meet our vision of *healthy people living in a healthy community*.

COMMUNICABLE DISEASE and STD Investigations

Disease	Number Reported	Disease	Number Reported
Campylobacter	18	Mumps	2
Chlamydia	68	Perinatal Hepatitis B	9
Cryptosporidiosis	16	Pertussis	1
e Coli	12	Powasson	1
Giardia	13	Rocky Mountain Spotted Fever	1
Gonorrhea	4	Salmonella	4
Hepatitis A	1	Shigellosis	1
Hepatitis B, Chronic	9	Strep Pneumonia	5
Hepatitis C, Chronic	99	Strep Group A	2
Hepatitis C, Acute	2	Strep Group B	2
Influenza A	194	Syphilis	6
Influenza B	242	Tuberculosis, Latent	15
Influenza A/B	10	West Nile Virus	1
Legionellosis	1	Yeriosis	1
Lyme Disease	59	Zika	6
Meningitis, Viral	1	Total Investigations (not including flu)	361
Meningitis, Bacterial (non-Neisseria)	1		

LABORATORY TESTING

There were 40 individuals screened for Lead, Hemoglobin, Hepatitis C or HIV in our clinic. An additional 8 individuals were screened for Hepatitis C at Lewis County Jail. All individuals who receive HCV or HIV testing also receive pre- and post-test counseling.

TUBERCULIN SKIN TESTING

There were 286 individuals screened for tuberculosis exposure in our clinic.

RABIES

A total of 184 rabies exposure reports were received in 2017. The Communicable Disease Nurse and the Public Health Animal Control Officer investigated each report, providing education and follow up as needed.

There were 6 positive specimens including 2 skunks, 1 raccoon, 2 cats, and 1 fox. LCPH and the County Rabies Control Officer addressed the human and animal needs related to these outcomes. Rabies Post Exposure Prophylaxis (PEP) was administered to 21 people due to exposures to bats and rabid, or suspected rabid, animals.

Nine rabies clinics were held throughout the year in several different locations within the county. 862 pets were vaccinated. The clinics are provided in collaboration with Countryside Veterinary Clinic.

An aerial rabies bait drop occurred over most of Lewis County in August, 2017. This rabies bait drop will serve to vaccinate wildlife in areas vulnerable to rabies and enhance protection for residents and domestic animals. This bait drop is done in collaboration with U.S. Department of Agriculture's Wildlife Services, Cornell University, USDA, and the New York State Department of Health.

ARTHROPOD BORNE DISEASE PROGRAM (Ticks and Mosquitoes)

Lyme disease is indigenous to Lewis County, and all ticks are considered vectors of Lyme disease. Staff investigated 59 reports of suspected and/or confirmed Lyme disease throughout the year. Surveillance was conducted with physician practices and the emergency room for any meningitis or encephalitis type illnesses that occurred throughout the mosquito season.

Zika virus became a public health priority in the spring of 2016. LCPH was responsible for authorizing Zika testing for individuals who traveled to affected countries who either were pregnant or had developed symptoms of Zika virus. Lewis County Public Health authorized 1 pregnant woman for testing.

IMMUNIZATION PROGRAM

A total of 844 individuals were vaccinated through our weekly clinics, travel clinics, walk ins, and employer sponsored clinics. We bill several insurance plans for privately funded vaccines and for administrative costs associated with state-funded vaccines. 11 uninsured adults received free vaccines through the Vaccines for Adults program. 145 children who were uninsured or receiving Medicaid received free vaccines through the Vaccines for Children program.

A total of 324 adults and 104 children received flu vaccines throughout the year. Six private flu clinics were held at various businesses throughout the county, immunizing a total of 264 individuals.

Travel counseling and vaccines were provided to 28 people through the International Travel Immunization Clinic.

CHRONIC DISEASE

In partnership with Lewis County Office for the Aging, Public Health provides the Chronic Disease Self-Management Program throughout Lewis County, stretching LCPH's reach to various age groups and populations. One workshop was held reaching 11 people. Another important partner of Public Health, The Northern Regional Center for Independent Living, also provided the Chronic Disease Program in Lewis County.

CHRONIC DISEASE -- ARTHRITIS

In collaboration with Office for the Aging, the evidence-based Tai Chi for Arthritis program was offered to community members. Tai Chi for Arthritis is an 8-week program, meeting two days a week for one hour. Research studies have shown that Tai Chi for Arthritis relieves pain and improves the quality of life for people living with arthritis. The program also helps improve muscular strength, balance, relaxation, posture and immunity. One workshop was held reaching 16 people.

CHRONIC DISEASE -- DIABETES

LCPH continued to offer the Diabetes Prevention Program (DPP), a year-long evidence-based program designed to teach people with pre-diabetes how to improve food choices, increase physical activity, and maintain a healthy lifestyle. The 16-week (core) sessions are followed up with four bi-weekly sessions, and 6 monthly post-core sessions, requiring a full year of participant commitment to the program. Seven groups were conducted in 2017. A total of 81 individuals participated with an average weight loss of 12 pounds per participant.

The Diabetes Self-Management Program (DSMP) is an evidence-based program developed by Stanford University and is designed to help people gain self-confidence in their ability to control their symptoms and how diabetes affects their lives. This workshop teaches the skills needed in the day-to-day management of diabetes in order to maintain and/or increase an active and fulfilling lifestyle. Six workshops were held in 2017 with 50 participants completing the 6-week program.

A monthly diabetes education program was held from March through November. The average attendance was 10 individuals. This group offers continued education and support for individuals and family members of individuals diagnosed with diabetes.

CHRONIC DISEASE PREVENTION -- CANCER SERVICES PROGRAM (CSP)

The Cancer Services Program (CSP) serves both Lewis and Jefferson counties. CSP saw a slight increase with 49 new participants referred by various partners. Colorectal cancer testing increased this year resulting in several polyps being removed. CSP also changed the screening test being mailed to participants to a 1 slide fecal sample and this also resulted in an increase of returned kits. A total of 130 people were screened in 2017 between the two counties.

This year, the CSP participated in: Community Health Awareness Day at LCGH and Super Science Saturday at JCC promoting colorectal screening, both county fairs where we displayed the inflatable colon, lobby outreach events at the LCGH in October and March, JRC employee benefit fair, Salmon Run Mall Health Fair, ACS Making Strides, Pink and Pearls Brunch, the Ta-Ta Run, wellness fairs at area school districts, and literacy classes at BOCES promoting cervical cancer and HPV testing. Targeted efforts were focused around a variety of advertising avenues for March and October awareness campaigns, including social media, billboards, placemats, radio, television, buses, newspapers, movie theaters, free media in newsletters, and promotional items.

County	# Individuals Screened	# Needed Diagnostic Testing	Cancer Diagnosis
Jefferson	66 plus Fit Kit Sent - 53 Fit Kit Return - 28	Breast - 11 Cervical – 2 Colonoscopies – 8	Breast – 1 invasive Cervical – 1 CIN, 1 Mild Dysplasia Colon – 3 Hyperplastic Polyps 1 Adenomatous polyp
Lewis	61 plus Fit Kit Sent - 45 Fit Kit Returned - 24	Breast - 8 Cervical – 2 Colonoscopies – 4	Breast – 1 invasive Cervical – 0 Colon – 1 Hyperplastic Polyp 2 Adenomatous polyps

We continue to refer participants to the NYS of Health Plan Marketplace to become insured. We have established a reciprocal referral process with area Navigators. Research at the State level found there are still a number of people who are uninsured in NYS – showing a viable, continuing need for the Cancer Services Program.

TOBACCO CESSATION

We continue to have three staff members trained to provide cessation counseling to anyone in the community. These staff members have been trained in the 5As counseling method.

CARDIOVASCULAR DISEASE

LCPH continued working with the North Country Initiative and Central New York Care Collaborative under DSRIP to assist individuals in preventing or managing cardiovascular disease through our blood pressure screening program. Clinical staff participated in training through the Million Hearts Campaign to ensure protocol is followed during each screening, ensuring accurate results and continuity of care. Clinical staff is available to conduct blood pressure screenings on a walk-in basis.

MATERNAL AND CHILD HEALTH

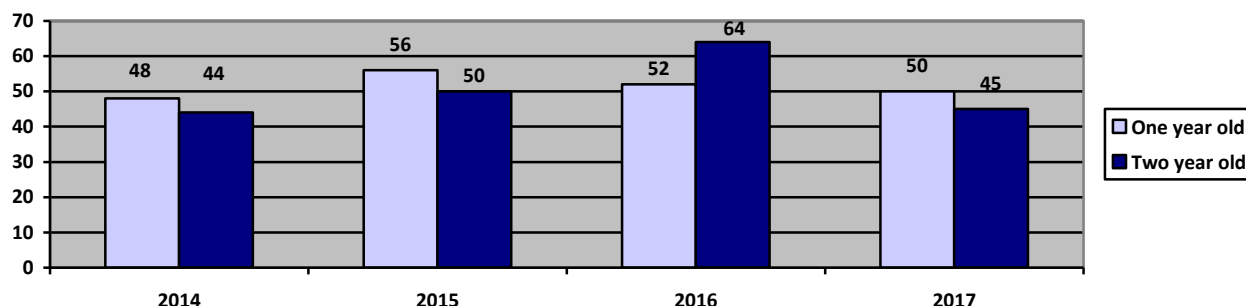
The Maternal-Child Home Visiting Program offers nursing visits by a registered nurse to high-risk pregnant women, new mothers and newborn infants. The nurse provides information on pregnancy, nutrition, labor and delivery, family planning, infant care, breast-feeding and parenting. The agency also serves as a resource to direct clients to other community services. Public Health staff are available to assist with Presumptive Eligibility for Medicaid for Pregnant Women. This enables entry into Medicaid starting with their first prenatal visit.

	Referrals	Admissions	Average Monthly Caseload
Antepartal Health Guidance	0	0	0
Postpartum Health Guidance	5	2	0
Newborn Health Guidance	28	17	2

LEAD POISONING AND PREVENTION PROGRAM

Lead Poisoning is a serious health problem, especially for children, as it can cause learning difficulties, kidney damage, hearing loss, growth problems, anemia, and behavior problems. Therefore, medical providers are required, by law, to test all one and two year old children for the presence of lead. Public Health offers free, on-site lead screening to all one through four year old children via a fingerstick, with results obtained within three minutes. We also provide hemoglobin testing in conjunction with lead testing in an attempt to increase the number of children who are tested for lead. A total of 28 children were tested in our clinic in 2017.

Overall County Rate of Lead Testing



Number of children tested	<10mcg/dl	10-14 mcg/dl	15-19 mcg/dl	20 -44mcg/dl
One Year olds	187	4	0	0
Two year olds	169	8	1	0

DENTAL HEALTH

Dental caries is the most common chronic disease of childhood. As many as 11% of 2-year-old children are affected by dental caries, and prevalence increases rapidly to 44% in 5-year-olds. The consequences of early childhood dental caries includes: pain, tooth loss, impaired chewing and nutrition, below average weight gain, infection, difficulty sleeping, increased caries in permanent teeth, school absences, and future dental work. Fluoride varnish is a proven intervention that strengthens teeth and reduces decay. According to research, children who received ≥ 4 fluoride varnish applications realized a 17% reduction in dental carries-related treatments as opposed to those children who received no fluoride. Very few children under the age of five visit the dentist, and children are 2.5 times more likely to lack dental than medical coverage. For these reasons, LCPH participated in an initiative to implement fluoride varnish in the primary care setting. Public Health detailing to medical providers occurred throughout the year providing education on this promising practice.

INJURY PREVENTION

LCPH participates in the Lewis County Traffic Safety Coalition, a group of individuals from area agencies representing law enforcement, emergency management, highway, schools, trails, and health/human service agencies, with the primary goal of reducing pedestrian and traffic injuries. Outcomes of coalition activities have included road signage, speed zone changes, and car seat distribution programs. LCPH continues to refer clients in need of car seats to nearby agencies who participate in the car seat program administered through the NYS Governor's Traffic Safety Committee.

HEALTH EDUCATION

One of the Ten Essential Public Health Functions is to “inform, educate, and empower people about health issues.” Lewis County Public Health participated in two large health related events this year:

- On April 22nd staff participated in the annual Lewis County General Hospital’s Community Health Awareness Day. This event is well received by area residents and offers a variety of health education and health screenings. Our agency was present to offer information on cancer screening, early detection, and chronic disease prevention.
- In July, LCPH participated in the Lewis County Fair with an informational booth, focusing on specific topics each day. Although all program information was made available throughout the week, special emphasis was placed on Immunizations, Lead Poisoning Prevention, Cancer Services, and the Chronic Disease Self-Management and Diabetes Prevention Programs. LCPH sponsored the Baby Room and Early Intervention programs were highlighted there.

Additional Education Activities:

- March 18th our Health Educator attended the Beaver River Central School Winter Carnival. Education was provided on dental health, fluoride varnish, and lead poisoning.
- In March staff observed Colon Cancer Awareness Day with an inflatable colon and a screening/ education display in the lobby of Lewis County General Hospital.
- Also in March, LCPH participated in the South Lewis Central School’s College Fair and provided education to students in careers in the public health field.
- National Public Health Week was celebrated the first week of April. LCPH hosted a Healthy Happy Hour in our clinic offering the public information on all of our programs.
- On April 29th our Public Health Specialist provided information on the diabetes prevention program and the chronic disease self-management program.
- On May 24th our Health Educator provided education on poison control to 320 fifth-graders at the Lewis County Fairgrounds during Ag Safety Day.
- On July 11th and September 5th education was provided on rabies, ticks, the diabetes prevention program, and the diabetes self-management program at the Lyons Falls farmers market.
- National Night Out was held September 8th and LCPH provided information on emergency preparedness.
- In October staff attended the Head Start Health Fair and provided information to parents of young children on immunizations, lead poisoning prevention, and early childhood services.
- Four licensed and family daycares received education from our Child Health Consultant on a variety of topics including home and environmental safety, medications, immunizations, and infection control.
- Public Health in collaboration with Mountain View Prevention Services, Cornell Cooperative Extension and the Office for the Aging have created a weekly “Health Matters” article in the Journal and Republican.

COMMUNITY HEALTH IMPROVEMENT PLAN, 2016-2018

The 2016-2018 Community Health Improvement Plan for Lewis County, has 3 major goals: reduce obesity in children, reduce obesity in adults, and prevent substance abuse and other mental emotional and behavioral disorders. In collaboration with community partners, public health is working on several different strategies to meet these goals. The following charts displays the strategies being worked on, the specific activities being implemented, partners we are working with, and progress toward full implementation.

PRIORITY AREA #1: CREATE COMMUNITY ENVIRONMENTS THAT PROMOTE AND SUPPORT HEALTHY FOOD AND BEVERAGE CHOICES AND PHYSICAL ACTIVITY

Strategy 1.1 : Start or expand farm-to-institution programs in hospitals, workplaces, and other institutions.

Major Activity	Lead Agency/Partners	Anticipated Result	Progress Notes
Implement farm to institution at the hospital	LCGH Hospital , Local Farmers	More fresh produce will be available and consumed	An initial vendor was set up by the hospital cafeteria director; the initial vendor chosen did not work out. Different vendors will be contacted in the spring of 2018.

Strategy 1.2 : Start or expand farmers' markets in all settings.

Major Activity	Lead Agency/Partners	Anticipated Result	Progress Notes
Offer and promote nutrition education on how to use and store fresh produce for those who may previously not had access to fresh foods (WIC, SNAP, FMNP participants)	CCEJC , LCPH, OFA, DSS, NCPPC, NCFHC	Increase knowledge and use of how to use fresh produce	CCEJC did 3 educational sessions at the Food Pantry in 2017 and saw 20 people. The sessions included a lesson, food demo and tasting.
Promote or support farmers' market located at the hospital	LCGH Hospital , LCPH, NCFHC, All community partners	Increase utilization of Farmers' Markets	Lewis County General Hospital distributed 40 gift certificates over the course of the 2017 season. The market averaged 100 customers per day.
Promote farmers' markets to the public	CCELC , CCEJC , All community partners	Increase utilization of Farmers' Markets	26 businesses throughout Lewis County promoted the three markets (LCGH, Lyons Falls and Lowville Farmers Market). The 2017 Local Food Guide for Lewis County was also distributed to all county employees.
Develop and/or promote an APP of fresh produce sites	LCPH , LC Planning Office, Chamber of Commerce	App will be utilized to find fresh produce within the county	The content for the APP has already been identified. A contract with WayNorth is moving along.

STRATEGY 1.3: Support and promote community and home gardens

Major Activity	Lead Agency/Partners	Anticipated Result	Progress Notes
Establish relationships between the Food Pantry and existing programs or local businesses that can support these efforts	CCEJC/ Garden Manager(s) , Housing sites, OFA, DSS, Local Businesses	2 community gardens will be started	Lowville Food Pantry has a signed contract with Cornell Cooperative Extension for development of garden. CCE provided funding; Food Pantry planted and harvested a small garden.
Involve a variety of community organizations in the community gardening experience, including volunteers from the ARC, FFA, OFA, 4H, etc.	Garden manager(s) , Housing residents, Volunteers	Volunteers will be engaged to maintain the gardens	Volunteers from the ARC maintained the Lowville Food Pantry garden and harvested it during the 2017 season.
Provide education at the garden site	CCEJC , Housing sites, Volunteers	Increase knowledge of how to use produce	Cornell Cooperative Extension held three educational sessions at the pantry in 2017 and saw 20 people. The sessions included a lesson, food demo and tasting.
Food harvested at community gardens is distributed by local food pantries.	Site Manager Food Pantry, Housing Sites, Volunteers, CCE	Fresh produce available to low income citizens	Food pantry distributed food from 2017 harvest.

STRATEGY 1.4: Promote Worksite Wellness Programs

Major Activity	Lead Agency/Partners	Anticipated Result	Progress Notes
Promote worksite wellness programs and identify interested employers	LCPH , CCE, Lewis County (worksite), LCGH Hospital (worksite), Worksite(s)/Large employers	3 out of 10 worksites agree to participate	Two employers identified with leadership buy-in: Lewis County and Lewis County General Hospital
Assist worksite wellness committees to choose and implement activities or enhance an existing activity(s) utilizing the Partnership 4 Health Toolkit or other evidence-based program	LCPH, Worksite Wellness Committees , CCE, Lewis County (worksite), LCGH (worksite), Worksite(s)/Large employers	3 worksites will implement a new program or enhance an existing one	Completed environmental assessments and initial activities selected based on needs. Committee is composed of employees representing various departments and physical locations. Three county-wide activities implemented in four months.
Participate in Adopting Health Habits Community Coalition's policy work (ex. Healthy Fundraising, Healthy Hosting, Park Farther/Walk More Signs)	CCE , LCPH, Other community partners	AHH Coalition's activities will be implemented in Lewis County	10 worksites received the AHH Menu of Services form. We have received one referral and that organization is in direct contact with CCE. Five county departments are participating in the worksite wellness initiative.

STRATEGY 1.5: Engage healthcare providers in prevention and awareness activities

Major Activity	Lead Agency/Partners	Anticipated Result	Progress Notes
Promote evidence based programs to providers (including NDPP, DSMP, CDSMP, Tai Chi) and encourage providers to refer patients to these programs	LCPH , LCGH Hospital, Other Providers, FDRHPO	Increase referrals by 10%	Public Health detailing to all providers has been done. Electronic referral now available for providers to use has resulted in an increase in referrals.

STRATEGY 1.6: Promote access to physical activity opportunities (community wide campaigns)

Major Activity	Lead Agency/Partners	Anticipated Result	Progress Notes
Implement a walking/physical activity program at some or all senior meal sites	OFA , LCPH	Increase physical activity for older citizens	Office for the Aging and PH staff have met to discuss and assessed the meal sites and participants.
Develop or enhance and promote an APP of community physical activity opportunities	LCPH , Planning Dept., LC Chamber	Physical activity app, usage of the app	The content for the APP has already been identified. A contract with WayNorth is moving along.

PRIORITY AREA #2: PREVENT CHILDHOOD OBESITY THROUGH INTERVENTIONS IN EARLY CHILD CARE AND SCHOOLS**STRATEGY 2.1: Establish policies to incorporate fruit and vegetable activities into schools as a way to increase consumption**

Major Activity	Lead Agency/Partners	Anticipated Result	Progress Notes
Promote Smarter Lunch Rooms	CCEJC , LCPH, SNAP-eligible Schools	1 of 3 schools will implement Smarter Lunch Rooms	Presentations at Copenhagen Central School, Harrisville Central School and South Lewis Central School. Two environmental assessments completed and one MOU signed. Implementation at South Lewis Middle/High School has begun.
Promote and implement Harvest of the Month (Eat Smart NY) nutrition education curricula in classrooms.	CCEJC , Schools, LCPH	3 of 5 schools will implement nutrition education curricula	One school participating with monthly sessions. One school ready to start.

STRATEGY 2.2: Encourage school districts to implement Comprehensive School Physical Activity Programs (CSPAP)

Major Activity	Lead Agency/Partners	Anticipated Result	Progress Notes
Promote CSPAP and identify interested schools	LCPH , Schools	2 of 5 schools will commit to implement CSPAP	Training identified.
Meet with school wellness committees or physical activity teams and assist them to implement CSPAP	Schools , LCPH	2 of 5 schools will implement CSPAP	No activity in 2017.

PRIORITY AREA #3: PREVENT SUICIDES AMONG YOUTH AND ADULTS**STRATEGY 3.1: Collaborate through prevention partnerships to integrate, implement and coordinate suicide prevention initiatives**

Major Activity	Lead Agency/Partner	Anticipated Result	Progress Notes
Lewis County Suicide Prevention Coalition	Community Services , LCPH, Prevention/Treatment, Community	Coalition workplan and goals will be realized	Active coalition continues to implement its work plan including Cup of Joe campaign with local businesses, movie theater PSA, community outreach events, development and training of postvention team.
North Country Suicide Prevention Coalition	FDRHPO , County representatives	Coalition priorities will be realized	Three county promotion of suicide prevention through billboards, movie theater PSA's, uniform logo for individual counties to use in their work.

EMERGENCY PREPAREDNESS AND RESPONSE

In March, Public Health held an exercise testing our ability to respond to a disease outbreak. The scenario was an avian influenza outbreak in which we were required to isolate individuals in the county. There was participation from the County Attorney, the County Supreme Court Judge, Office for the Aging, Department of Social Services, Community Services, Emergency Management, EMS, and Lewis County General Hospital. The county isolation and quarantine plan was tested along with public messaging.

In May, Public Health, Office for the Aging, and Lewis County Home Care attended a Regional Access and Functional Needs tabletop exercise to test our ability to address the needs of our at risk populations during a disaster. We were given the opportunity to communicate with the appropriate partners about this important topic.

To build upon lessons learned at the Access and Functional Needs Exercise, Public Health is also sitting on the Consumer Advisory Group. This group is led by the Northern Regional Center for Independent Living and consists of emergency response personnel from various entities as well as individual's with access and functional needs. This group looks at all hazards and planning to ensure we are planning for our at risk populations. The input from the Advisory Group has been very helpful in emergency response planning.

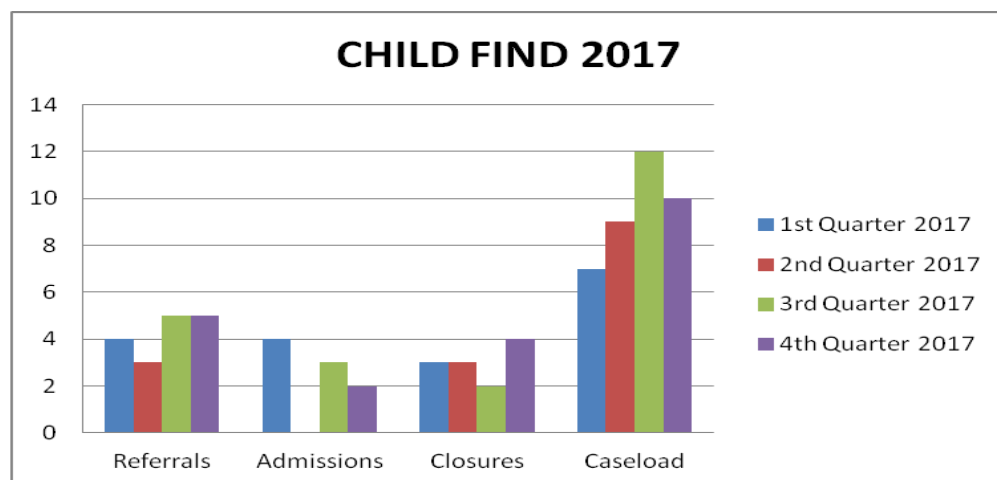
In December a new version of our volunteer tracking software was released. This will more easily allow individuals desiring to volunteer in emergencies to set up an account to be vetted prior to an incident. Outreach has been conducted encouraging health professionals and others to sign up to volunteer during disasters.

Children with Special Needs Programs

CHILD FIND (birth to 3)

The goal of Child Find is to ensure that all children have a primary care provider who is completing developmental screenings at all well child visits. Qualified staff members offer information and support to families with children, birth to age three, who reside in Lewis County. Referrals are received from various sources including primary care providers, parents, social services, and hospitals. At-Risk conditions include foster care placement, indicated reports of child abuse or neglect, prematurity and low birth weight, as well as a parent's perceived concern about their child's development, among others.

Child Find & referral outreach efforts include participation in Head Start meetings, collaboration with local school districts as well as with local health providers and other community programs to ensure Child Find is being offered to families. LCPH staff also work with Lewis County Social Services on Child Abuse Prevention and Treatment Act (CAPTA) referrals. This fall the Children with Special Needs staff attended the DSS Caseworker staff meeting to update them on all of the CSN programs and referral procedures.

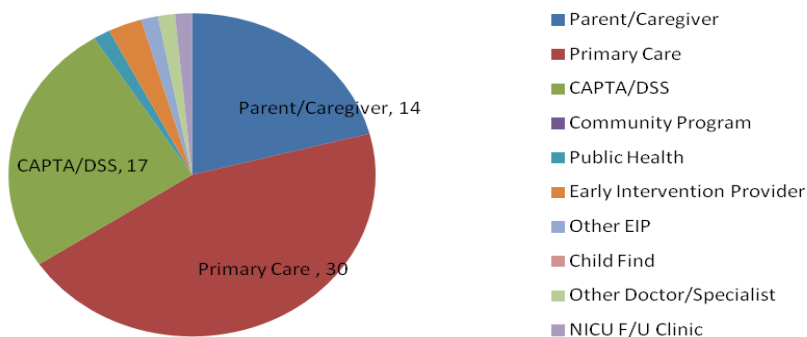


EARLY INTERVENTION PROGRAM (birth to 3)

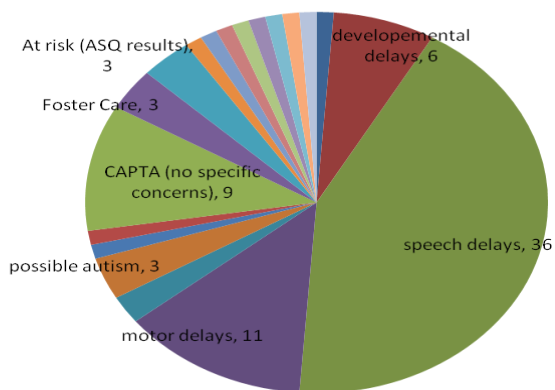
The Early Intervention Program is designed to meet the very special needs of disabled or developmentally delayed children, age birth to three and their families. Early Intervention services are unique in that they usually occur in a child's natural environment so usually the home or caregiver's home or a daycare rather than in a provider location or doctor's office where traditional evaluation and therapy services occur. Early Intervention services include but are not limited to: medical services for diagnosis or evaluation purposes, early identification, screening and assessment, therapy services, family training, counseling, home visits, parent support groups,

respite, transportation reimbursement and service coordination. Referrals are received from various sources including primary care physicians, parents, social services, Head Start and hospitals.

Early Intervention Referral Sources



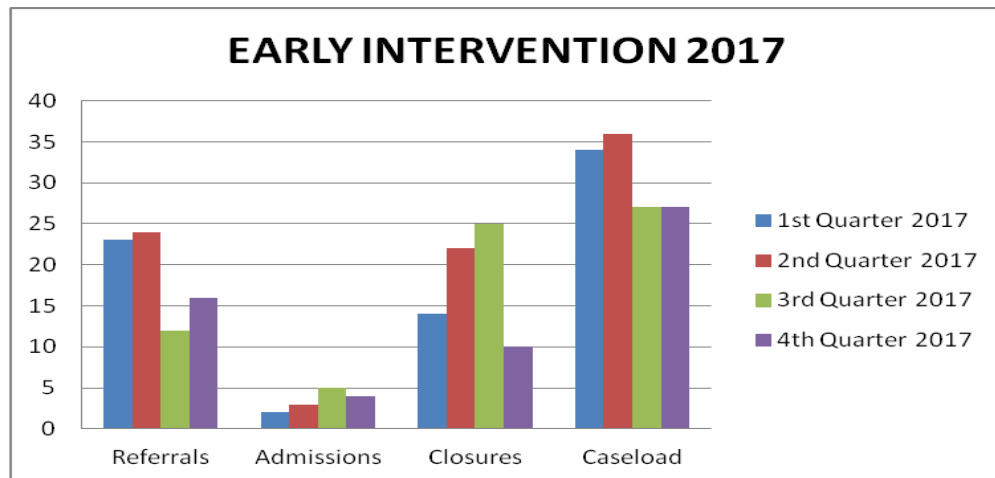
Early Intervention Reasons for Referral



Early Intervention staff promote the EI Services through participating in the Head Start Health Services Advisory Committee Meetings, Lewis County Mental Health & Developmental Disabilities Subcommittees to the Community Services Board, Jeff-Lewis Child Care Training Advisory Council, among others. The Lewis County Fair (Baby Changing & Feeding Area/Information Booth), Baby Show & various other LCPH events throughout the year including Public Health Awareness Week were used to inform the community about the EI program and its services.

The Local Early Intervention Coordinating Council (LEICC) met twice this year. These meetings were well attended by our community partners and agencies as always in addition to our new NYSDOH Program Nurse & EI Regional Contact. The Council continues to identify barriers/gaps in services such as transportation, bilingual services/evaluations, behavioral and social work services, shortage in Speech-Language Pathologists and Special Education Teacher Services, etc. We continue to invite parents to join the Council as the Bureau of Early Intervention requires. This year we now have added an active former parent to our Council. The EI Manager has

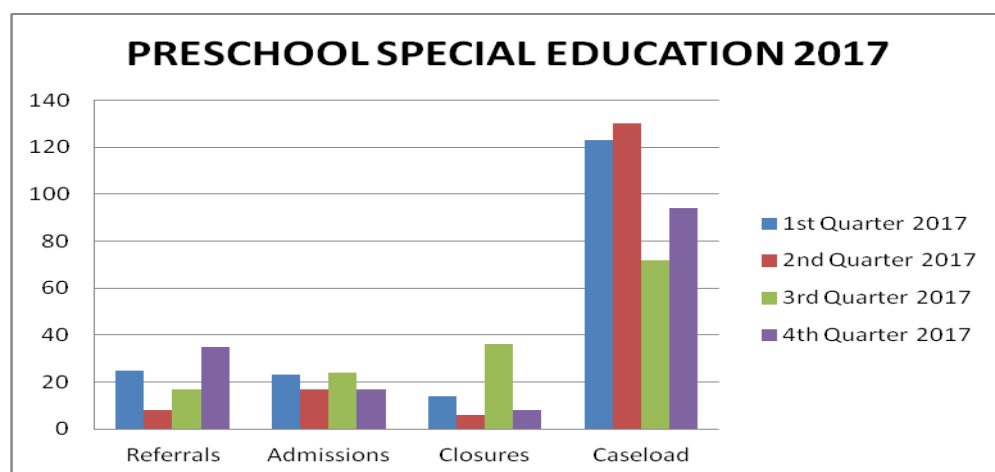
kept the Council up to date on Health Homes and the integration of EI Children into that program as well as informed them of our progress with State Performance Measures.



PRESCHOOL SPECIAL EDUCATION PROGRAM (3-5 years)

The Preschool Special Education Program is for 3 to 5 year olds who are determined by the resident school district as being eligible for services that address their educational needs until they are Kindergarten eligible. Within the evaluation process, specific developmental needs are assessed such as: gross and fine motor skills, speech and language skills, vision and hearing concerns and educational and social development.

LCPH administers the program on behalf of the County. Referrals are made directly to the school district by parents and families, as well as by local agencies involved with children, such as Head Start and Department of Social Services, upon consent of a parent. Services are provided through contracts between LCPH and agencies approved by the State Education Department to provide preschool special education services and evaluations. Local School Districts include Lowville, South Lewis, Beaver River, Copenhagen, Harrisville, Carthage, Adirondack, Camden and South Jefferson.

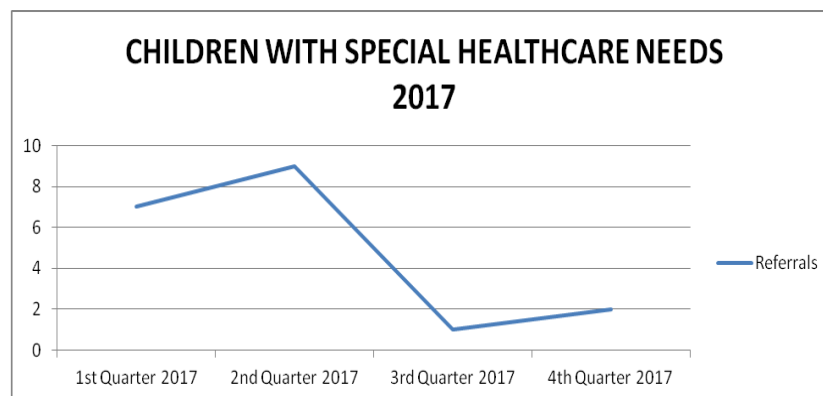


CHILDREN WITH SPECIAL HEALTH CARE NEEDS PROGRAM

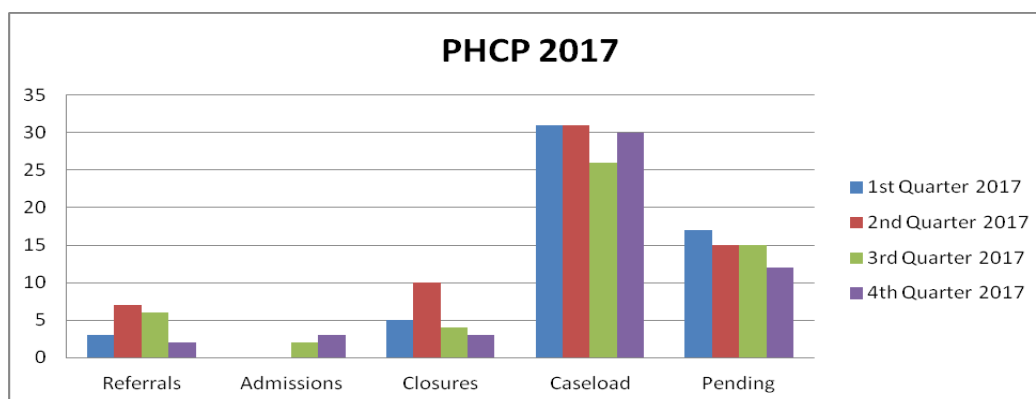
The Children with Special HealthCare Needs Programs are available to children birth to age 21 who have or are

suspected of having a serious or chronic physical, developmental, behavior or emotional condition and who require health and related services of a type or amount beyond that required by children generally. This year the State upgraded to a new Data System so we have been busy migrating active children over to that new program. CSHCN is the umbrella for a couple avenues of service, a resource & referral source for families as well as a financial reimbursement source or assistance program for eligible children.

Resource & Referral includes assisting families to access services from various agencies, organizations and medical facilities who can assist with the needs of the child. Some examples include, SSI, Ronald McDonald Houses, Children's Miracle Network, Exceptional Family Members Program, Committee on Special Education, and Independent Living Centers. Services may include medical travel and accommodations, assistance with insurance issues, SSI applications, mediation, etc. Families can call the CSHCN Program directly or community agencies and health care providers can refer a family. There is no financial component associated with this portion of the program. Children must be Lewis County residents.



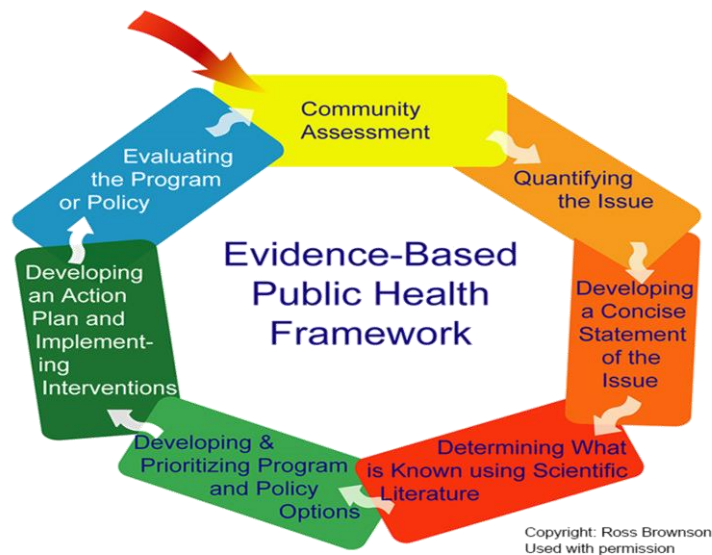
Physically Handicapped Children's Program (PHCP) provides financial assistance for Medical and Orthodontia needs through a pre-approval process when there is no other payer source for the services (other eligibility criteria must also be met). More than 150 medically disabling conditions (juvenile diabetes, club foot, hearing difficulties, cerebral palsy, etc) qualify including certain dental procedures. The Orthodontia component offers assistance to children with **severe dental conditions**, such as cleft palate and severe malocclusions. Referral is required from a local dentist. We work directly with the New York State Dental Bureau to ensure eligibility is met. Again this program is only available to Lewis County residents and is very limited both by eligibility criteria and financial availability.



Administrative Initiatives

QUALITY IMPROVEMENT

The 2016-2017 quality improvement project of increasing evidenced based programs and services offered here at public health was completed in June. The project resulted in 79% of our programs and services being evidenced based. Some required no changes be made, other required changes in order to prove their effectiveness. This project was a yearlong process involving all program staff members. Each program, service and intervention was researched to determine what evidence was available to prove its effectiveness. If a program or intervention did not have sufficient evidence we made changes as we were able to in order to follow a more evidenced based model. Overall this project was a huge success



The next quality improvement project will focus on the immunization program billing and workflow. Our hope is to reduce staff time, decrease wait times, and increase revenue from 3rd party payers.

PUBLIC HEALTH ACCREDITATION

In 2015, we conducted preliminary research on becoming an accredited health department. The Director and Public Health Planner completed the Public Health Accreditation Board's Online Orientation. This gave us a good idea of what is required to become an accredited health department. In 2016, a timeline was established for meeting our goal of becoming an accredited health department.

Several plans and documents must be in place before a health department can even apply for accreditation. These documents include a Community Health Assessment, Community Health Improvement Plan, Strategic Plan, Workforce Development Plan, and a Quality Improvement Plan. The Community Health Assessment, Community Health Improvement Plan, and the Quality Improvement Plan were complete in 2016. The Strategic Plan was completed in 2017.

STRATEGIC PLAN 2017-2022

The Strategic Planning process involved input from all stakeholders. A new mission and vision statement were decided upon as well as new guiding principles.

Mission: To promote and protect the health of our community.

Vision: Healthy people living in a healthy community.

Guiding Principles:



Integrity: We act with honesty and adhere to the highest standards of moral and ethical values and principles.



Teamwork: We have a commitment to reach common goals, leveraging the abilities of all team members.



Community Focus: We demonstrate a passion for community health and wellbeing. Innovation: We creatively apply the most advanced technology, information and research to be modern leaders in public health.



Innovation: We creatively apply the most advanced technology, information and research to be modern leaders in public health.



Excellence: We strive to provide the highest quality services through continuous quality improvement and learning.



Collaboration: We work collaboratively with partners and the community to improve health and support a strong public health system.



Accountability: We honor our commitments, put forth our best effort to meet goals and hold ourselves accountable for results.

Five strategic priority areas were chosen to work on for the next five years. The following are the strategic priority areas and corresponding goals:

Infrastructure

- Become accredited by the Public Health Accreditation Board
- Create an overarching strategy, brand, and market position
- Address Physical space needs
- Build capacity and organizational foundation for institutionalizing cultural competence and cultural humility
- Develop a public health service matrix based on community and health system needs

Workforce Development and Leadership

- Develop, implement and assess a Workforce Development Plan
- Train public health staff in the concept and application of the collective impact model of social change

- Create sustainable methods to measure and improve employee satisfaction
- Maximize staff resources by cross training staff in selected areas
- Creatively look at each position to ensure most effective use of all resources in order to meet changing public health needs

Strategic Partnerships

- Engage community stakeholders across all sectors to form partnerships utilizing the collective impact model
- Ensure population health is central in all community planning and policy efforts

Research and Data Driven Performance

- Utilize evidenced based practices to address health risks, health behaviors, disease prevention, and social determinants of health and wellness
- Utilize current data from a variety of sources to drive quality and process improvement initiatives
-

Lifelong Health and Wellbeing

- Monitor and evaluate the progress of the Community Health Improvement Plan
- Improve capacity of Public Health and partners to help consumers understand basic health information and make informed health decisions
- Increase community access to public health services

DELIVERY SYSTEM REFORM INCENTIVE PLAN (DSRIP)

Lewis County Public Health participates in two DSRIPs that include Lewis County in their service area. These are the Central New York Care Collaborative (CNYCC) and the North Country Initiative (NCI). Both have similar goals but have chosen different priorities. In general, these goals include integrated services, lower healthcare costs, patient care collaboration and improved healthcare quality and accessibility.

Public Health through the CNYCC participates in cardiovascular disease management initiatives including the Million Hearts Campaign and patient activation and coaching. And in partnership with NCI, Public Health participates in diabetes prevention and management.

Both initiatives include numerous strategic partners in Lewis County. Through various meetings such as the North Country Health Compass Partners, Lewis County Regional Project Advisory Committee and Care Transitions Coalition, Public Health staff participate to stay abreast of the latest developments in DSRIP and to be part of the transformation of the health care system in Lewis County.

The 10 Essential Public Health Services

Monitor Health Status
Diagnose and Investigate
Inform...Educate...Empower
Mobilize Community Partnerships
Develop Policies and Plans
Enforce Laws and Regulations
Link People to Needed Health Services
Assure a Competent Workforce
Evaluate Effectiveness, Accessibility and Quality
Conduct Research

Health Services Advisory Committee

Daniel Root, MD
Shereen Palmer, MD
Steve Fuller
Sue Gydesen, CSW
Jennifer Jones
Robert MacKenzie, AEMT-P
Andrea Moroughan, Legislator
Jennifer Nightingale, DVM
Tammy Suiter, RN

Penny Ingham, MPH
Marcia Ashline, RN, BSN
Ashley Waite, RN, BSN
Laurie Simmons
Kathryn Sochia
Megan Kraeger/Anna Platz



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Prevent. Promote. Protect.

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