

**Jefferson County  
Public Health Service**

# **Annual Report 2021**



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Public Health Service***

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# Jefferson County Public Health Service

## Mission

*Empowering people to prevent illness, promote resiliency, and protect the well-being of Jefferson County residents and visitors.*

## Vision

*People living in a safe and healthy environment.*

## Values

*Access for all · Caring · Excellence · Integrity · Teamwork  
**ACE IT!***



## Jefferson County Legislature

### 2021 Health and Human Services Committee

John Peck, Chairman  
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Anthony Doldo  
Robert Ferris

Corey Grant  
Scott Gray  
Jeremiah Maxon  
James Nabywaniec

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Jason White, MD  
Denise Young

Ex-Officio:  
Timothy Ruetten  
Ginger Hall  
Stephen Jennings  
Robert Kasulke, MD  
Sheri Palmer

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# Administration

## COVID-19 Pandemic Response

The department continued coordination with the State of New York to manage the COVID -19 pandemic response locally. The strategy for management of the virus in 2021 was fivefold: population density reduction, identify and isolate positive cases, quarantine contacts to positive cases, surge capacity for medical services, and vaccination. Guidelines issued by the U.S. Centers for Disease Control, New York State and/or the New York State Department of Health, and the Jefferson County Public Health Service were regularly released to the public for up-to-date education and awareness.

The Director of Public Health provided timely information and public recommendations based on data and science every day to the County Administrator and Board of Legislators Chairman. The department's leadership team worked under the guidance of the Director of Public Health to address the public health needs of the community due to rapidly changing information regarding cases, vaccination, new regulations, and forecasting.

Mass Vaccination Clinics: With approval from the New York State Department of Health (NYS DOH), the Jefferson County Public Health Service (JCPHS), Carthage Area Hospital, Jefferson Community College (JCC), North Country Family Health Center, River Hospital, Samaritan Medical Center and the Volunteer Transportation Center formed a partnership to work collaboratively to administer COVID-19 vaccine to eligible groups in Jefferson County. The partners submitted a plan to the state to combine allotments of the vaccine and run mass vaccination POD (point of distribution) clinics at Jefferson Community College. The plan was approved and touted as a potential model other local areas may be able to use. JCC was chosen as a premier location because its large gymnasium allowed for social distancing and provided space to vaccinate and observe hundreds of people. The Volunteer Transportation Center provided needed transportation services for those community members who could not easily access the vaccination POD. From January-April 2021, 16,421 individuals received a first dose of vaccine at the JCC vaccination clinics, helping the JCPHS achieve its mission to protect the public in as safe and expeditiously a way as possible.

The Director of Public Health served as Incident Commander to oversee the operation of the mass vaccination clinics at JCC and then throughout the county. This massive undertaking was successful due to an organized, structured, team effort which incorporated continuous self-evaluation by measuring performance and making quality improvements to the process. The team organized and oversaw site floor plans and support services for mass clinics at the JCC gymnasium, at the Jefferson County Public Health Service facility, and community pop-up locations throughout the county; recruited and scheduled personnel for vaccine clinics using local health department and other county department staff, as well Central New York Medical Service Corps (CNYMRC), emergency medical services personnel, local hospital nurses and pharmacists, and other county volunteers including nurses, physicians, and others from community-based organizations; coordinated with the NYSDOH, county purchasing, and the

county Emergency Management Office (EMO) to ensure access to necessary supplies for clinics; ensured access to vaccine clinics for the underserved and special needs communities including those with mobility challenges and developmental disabilities; scheduled clinics in communities with the lowest vaccination rates and/or the highest rates of vaccine hesitation; coordinated clinics with school districts to ensure eligible school-aged children could receive vaccination.

Testing continued and expanded from PCR (polymerase chain reaction) testing only to include rapid antigen tests. Self-administered home tests began in late December 2021. In the Spring of 2021, the department assisted Jefferson-Lewis BOCES with obtaining a Clinical Laboratory Improvement Amendment (CLIA) so that all school districts could test staff at schools. This commenced in the spring and continued in the new 2021-2022 school year. Some school districts also tested children. All positive cases were reported to the NYS Electronic Clinical Laboratory Reporting System (ECLRS) for local health department contact tracing, isolation and quarantine.

COVID-19 information was provided to all stakeholders, including the general public, in a timely manner. The Health Promotion unit in the department utilized a variety of strategies to inform the public during the pandemic, from website postings and links, social media messaging and engagement to include very popular weekly Facebook Live events, to press releases, public service announcements, and press conferences. Information was provided to the public daily, including vaccination/testing clinic marketing, countering of misinformation, and culturally competent key messaging about topics such as vaccine confidence. Detailed guidance regarding reopening, vaccination, and isolation/quarantine protocols were provided in real time to the community as soon as the information was released by the U.S. Centers for Disease Control and Prevention (CDC) and the NYSDOH. Department leaders communicated with the public via press conferences, social media events such as Facebook Live, Zoom conferences such as the Greater Watertown Area Chamber of Commerce Coffee Talks, and regular meetings with Jefferson-Lewis BOCES and K-12 school administrators in Jefferson County to keep them informed regarding policy changes.

The department continued to submit wastewater specimens to Quadrant Biosciences in Syracuse to test weekly and determine COVID-19 quantifiable prevalence in the City of Watertown and surrounding communities that utilize the city's wastewater treatment facility. The Villages of Carthage, West Carthage, and the Thousand Islands Central School District were also added as sites for wastewater testing. Readings fluctuated but in general resulted in quantifiable levels of COVID-19 throughout 2021. Reports with quantifiable readings were in line with case spikes in Jefferson County through the year and continued to be an accurate predictor of increased cases and hospitalizations in future weeks; the readings helped inform hospitals and nursing homes regarding facility visit limits, as well as the need for staff planning.

From the beginning of the pandemic in 2020 through 12/31/2021, 15,348 Jefferson County residents tested positive for COVID-19; 701 were hospitalized; and 145 residents died from

COVID-19. Individuals that had received at least one dose numbered 86,557; those considered fully vaccinated numbered 73,699; and individuals boosted numbered 23,182.

### **Public Health Accreditation**

Efforts to pursue Public Health Accreditation Board (PHAB) accreditation were temporarily paused due to the significant resources required to respond to the COVID-19 pandemic. The department plans to pursue accreditation post-pandemic.

### **2019-2021 Strategic Plan**

The Strategic Plan workplan aligns with the CHA and CHIP, as well as the departments QAPI plan. Strategic goals to achieve by the end of 2021 include increase recruitment and prioritize retention of staff; improve organizational culture and quality through communication, teamwork and support; and increase health equity by maintaining and increasing the quantity and quality of services provided. While the department's focus shifted fully to pandemic response, some aspects of the strategic plan goals were able to be addressed if only in the context of addressing pandemic requirements.

### **Quality Assurance/Performance Improvement (QAPI)**

Despite the challenges of managing the COVID-19 pandemic, the department continued operating its Quality Assurance/Performance Improvement (QAPI) structure, with Quality Management (QM) meeting bi-weekly to discuss department priorities and emergent issues. The Continuous Quality Improvement (CQI) meeting continued bi-weekly to discuss patient care priorities. QAPI Public Health committee met quarterly to discuss communicable disease, clinic, health promotion, and public health emergency preparedness priorities. The QAPI Finance committee met quarterly to discuss department financial priorities, corporate compliance, and other pertinent issues. The QAPI Home Care committee overlaid with QM/CQI meetings to stay current and discuss home healthcare priorities and issues.

### **Corporate Compliance**

Laws and regulations governing the department were continuously reviewed to ensure corporate compliance. DSRIP regional Corporate Compliance Committee financial support ended, and so the department chose to establish an independent arrangement with The Compliancy Group – The Guard for continued vendor services to provide federally compliant privacy and security policy templates, as well as guidance to ensure the department's policies and security systems were appropriately maintained. In 2021, The Compliancy Group updated its platform to version 4.0. The Corporate Compliance Officer (CCO) conferenced with the department's Compliancy Group coach through the second quarter to prepare for the transition, and the department moved from the 3.0 to the 4.0 version in late August 2021. The privacy and security policies were reviewed with no changes made. Annual audits required completion ahead of annual staff training. The Corporate Compliance, Privacy and Security Officers: IT Risk Analysis audit; HIPAA Physical Site audit; HIPAA Privacy audit; HIPAA Hi-Tech audit; HIPAA Security audit; and HIPAA Device audit were all completed between 8/23-9/1/2021. Annual corporate compliance staff training commenced following the audits.

The Compliancy Group worked with the department to ensure annual Security Audits were completed appropriately. The senior Public Health Planner serves as the department's CCO. The Director of Public Health serves as the department's privacy officer. The Jefferson County Director of Information Technology serves as the security officer. The CCO ensures policies are updated and accessible for all staff, ensures staff adhere to compliance requirements in daily work, administers annual training for all staff of the department, and tracks all staff trainings to ensure completion and adherence to regulatory requirements. The CCO is also an active member of the regional DSRIP Corporate Compliance Committee.

## **Health Planning**

### **Community Health Assessment/Community Health Improvement Plan 2019-2021**

The New York State Department of Health waived requirements for local health departments to complete Community Health Improvement Plan (CHIP) progress through the COVID-19 pandemic. However, the department and 3 hospital partners in Jefferson County managed to implement some aspects of the CHIP.

Specific CHIP prevent chronic diseases objectives included increasing the percent of those identified as being nicotine dependent receiving tobacco use counseling from 10% to 7%; increase the number of practices/providers that implement a vaping screening tool at the point of primary and ED care from zero – contingent on establishing a screening tool for vaping; increase the number of participants completing evidence-based self-management programs (EBMSP) 5% from 407; increase the number of participants completing National Diabetes Prevention Program (NDPP) 10% from 11.

Progress toward prevent chronic disease objectives in 2021 included continued community-wide education regarding tobacco prevention; some tobacco cessation programming continued in hospital primary care clinics, but much had to be curtailed because of the pandemic; some clinics began to screen and assess for vaping at visits, and two hospital primary care clinics developed vaping screening tools within their EHRs. 8.6% of those identified as being nicotine dependent received tobacco counseling in the primary care setting. 30 persons were trained in screening tools for vaping. 32 practices reported having a vaping screening query in their EHRs established. Of all patients screened, 7.5% reported active vaping. 166 patients participated in chronic disease evidence-based self-management programs (EBSMP). 165 patients received diabetes self-management education (DSME). 10 patients were referred to the National Diabetes Prevent Program (NDPP) at the Watertown Family YMCA; 2 classes were held.

Specific CHIP promote well-being and prevent mental and substance use disorders objectives included increase the number of unique patients receiving SBI screening by 5% from 12,703 patients; increase the percentage of those diagnosed with an opioid use disorder receiving Medication Assisted Treatment (MAT) from baseline to be established in 2020; increase the percentage of those diagnosed with an opioid use disorder receiving treatment from baseline

to be established in 2020; decrease the opioid analgesics prescription for pain, age-adjusted rate by 5% from 608.4 per 1,000 population to 578.0 per 1,000 population; and increase the percentage of adults who are aware of a suicide prevention resource by 3% annually from 74% to 80%.

Progress in 2021 toward promote well-being and prevent mental and substance use disorders objectives included 10,790 unique hospital primary care clinic patients receiving an Alcohol Screening and Brief Intervention (SBI) screening, and 145 patients referred to treatment as a result of the SBI screening. 550 patients were diagnosed with an opioid use disorder (OUD) in 2021. 46.62% of those with an OUD reported receiving treatment; 31.43% of those with an OUD were documented as receiving medication assisted treatment (MAT). The number of providers in Jefferson County as of 2021 providing MAT is 23. There were 10 Question, Persuade, and Refer (QPR) Gatekeeper trainings held in the county to support individuals in preventing suicides. 71% of adult surveyed Jefferson County residents agreed that they were aware of at least one suicide prevention resource. 10.5% of adult surveyed Jefferson County residents reported that they referred somebody to suicide prevention resources or accessed the resources themselves in the past year.

The specific CHIP promote healthy women, infants and children objective was that at least 75% of children 0-6 will receive fluoride varnish treatment (FVT) at every well-child encounter from their pediatric primary care provider. This section of the CHIP was deferred due to the COVID-19 pandemic.

In 2021, 3 dental practices received public health detailing visits to promote and encourage HPV vaccinations in the primary care setting with patients and parents. 395 HPV vaccines were provided by hospital primary care clinic practices. 19.6% of 13-year-olds had completed an HPV vaccine series (2019).

The specific CHIP prevent communicable diseases objective was to increase vaccination rates 6% annually from the baseline rate of 13 year olds that complete age-appropriate HPV vaccine series as reported in NYSIIS 13.60% (2018) to 16.20% (2020). No detailing visits were made in 2021.

Jefferson scored 30<sup>th</sup> healthiest New York State county in 2021 as part of the national Robert Wood Johnson Foundation County Health Rankings. Jefferson scored 30<sup>th</sup> for Health Outcomes and 51<sup>st</sup> for Health Factors. The County Health Rankings can be viewed at [www.countyhealthrankings.org](http://www.countyhealthrankings.org).



# Community Health & Health Promotion Programs

## **General Prevention**

The Health Promotion staff facilitated community health educational programs regarding numerous topics to organizations, schools, worksites, and community settings. Thousands of individuals were reached through program and media outreach. The department actively utilizes Facebook to reach the public and almost doubled the number of followers due to the COVID-19 pandemic.

## **Child Find Program**

The Child Find Program continued as a state-funded program that is connected to, and part of Early Intervention. The goal is to improve the identification, location, referral to care and follow-up of infants and toddlers age 0-3 who may be at risk for physical and developmental disabilities and/or delays.

## **Childhood Lead Poisoning Prevention Program**

The CLPPP continued to review and follow-up on all lead level results for children 6 months to 6 years of age. Primary care providers are responsible for lead screening of children at 1 and 2 years of age. Public Health offers lead screening at Wednesday clinics by appointment. Children found to have elevated lead levels receive case management including completion of risk assessment; education regarding source of lead exposure and risk measures; appropriate referrals to Child Find, Early Intervention, and when appropriate, New York State Department of Health for environmental follow-up; home visits; and notification of need for follow-up lead testing. The blood lead levels identified at or above 5 mcg/dl were regulated to have interventions performed by the department and the Watertown District Office of the NYSDOH. The increase in cases who are receiving care coordination continues to expand.

## **Children and Youth with Special Health Care Needs (CSHCN)**

The CSHCN program continued as a resource and referral to assist families in connecting them to resources in the community for children from birth to age 21. Coordinate diagnostic and treatment for medical to all children who are believed to have physically disabling conditions or serious chronic illnesses.

## **Keep the North Country Smiling**

Much of the Keep the North Country Smiling (KNCS) coalition's work paused through the pandemic. The 2017-2020 workplan concluded. There were no reported anti-fluoridation activities in 2021, and the department continued to promote access to community water fluoridation by making municipalities aware of funding through the NYSDOH to repair and replace outdated fluoridation equipment, as well as to purchase equipment to establish community water fluoridation. Pediatric dental practices continued to be encouraged to

educate children and families about the importance of HPV vaccine to prevent oral cancers as a standard of care.

In a partnership with the Jefferson Physician Organization (JPO) and the NYSDOH, the department completed public health detailing visits to 13 primary care practices to assess whether providers are either currently or previously but stopped providing fluoride varnish treatment (FVT) to children up to age 7. These 13 primary care practices included all that serviced children, not just pediatricians. If practices were not administering FVT, providers were asked to begin administering and to bill for the service. Complimentary education and FVT kits were provided to each practice willing to accept, accompanied by a letter co-signed by the Director of Public Health and the JPO Board Chairman encouraging practices to incorporate FVT into their practices with children as a standard of care. 1 pediatric practice was found to have consistently provided FVT to children for a number of years; 3 other pediatric practices had provided FVT in the past but had stopped. All pediatric primary care practices accepted the educational and FVT kits. None of the primary practices that served children and adults had ever provided FVT; 3 were interested in learning more about FVT and accepted the educational and FVT kits, while the remainder of the practices did not. The conclusion of the exercise was to focus more strongly on ensuring that the pediatric primary care practices consistently provide FVT to their patients ages 0-7.

### **Alliance for Better Communities**

The department remains extremely active with the Alliance for Better Communities, Jefferson County's Drug-Free Communities coalition, and has engaged all community sectors to address substance use problems on multiple fronts. In addition to public education campaigns, advocacy continued with members of the U.S. Senate and House of Representatives, and NYS Senate and Assembly highlighting the substance use problems happening in Jefferson County, what the needs and priorities are, and how local response is being implemented. Data indices continued to track and chart the growth of this problem locally. Overdose deaths decreased 6.25% from 2020, however, deaths caused by fentanyl were the same as the prior year. 68.7% of all overdose deaths occurred in the City of Watertown.

## **Disease Control**

### **Communicable Disease Reporting and Control**

Surveillance for communicable diseases continued. Communicable Disease Control nurses took the lead role in responding to the COVID-19 pandemic, including contact tracing, isolation and quarantine. In addition to COVID-19 cases, leading Jefferson County communicable disease indices continued to be Sexually Transmitted Infections (STI), respiratory, and food-borne generated disease. Communicable disease nurses continued to respond to various disease exposures, including Hepatitis A and B and rabies prophylaxis. Overall STI indices remained stable in 2021 but were slightly lower in what has been an overall trend upward in Jefferson County, New York State, and nationally at significant rates. Educational efforts to address and control STIs are focused on prevention and increasing screening with particular

attention on high-risk populations. The STI Coalition continues to address the increasing numbers of STI cases by coordinating targeted prevention messages utilizing paid social media ads, as well as educating providers on appropriate follow-up with STI patients. Weekly immunization and STI clinics continued.

### **Immunization Services**

Immunization Clinic was offered every Wednesday from 12:30 p.m. until 3:30 p.m. The clinic is by appointment only. Infant, adolescent, and adult vaccines that are required and recommended were offered. Additionally, the department provides Travel Health Services immunizations for individuals going to foreign countries. Vaccine categories for Travel Health include routine, recommended, and required. Nurses discuss which vaccines are appropriate using CDC guidance with each patient. COVID-19 Vaccinations began mid-12/2020 for Phase 1A health care personnel and first responders and expanded to all eligible populations throughout 2021. Mass vaccination clinics were led by Public Health and held at Jefferson Community College, at the department's Immunization Clinic, and at various locations throughout the county.

### **Rabies Control**

Rabies control activities continued, encompassing exposure follow-ups for humans and domestic animals through contact investigations, pre and post-exposure treatments, animal confinements and quarantines, laboratory specimen submissions, vaccination clinics for domestic animals, and community education.

### **Vector Control**

The department continued to provide public education regarding avoidance of Lyme and other tickborne diseases. Additionally, the department provided public education regarding mosquitoes and how to minimize risk for mosquito-borne diseases.

## **Home Health Care**

The Certified Home Health Agency provides multiple in-home care services such as nursing, home health aides, physical therapy, occupational therapy, medical social worker, registered dietician, and case management to patients throughout Jefferson County.

The Home Health Care Program received 1,360 referrals and provided 15,429 visits to 884 patients over 9 disciplines of care in their homes throughout the year. Public Health Nurses made 21 visits to 1 maternal/child health (MCH) client. MCH client visits are included in the Home Health Care program statistics.

Home Health Care Programs continued its focus on reducing re-hospitalization of patients. Key areas focused on included patients having either congestive heart failure (CHF), myocardial infarction (MI), chronic obstructive pulmonary disease (COPD), pneumonia, or diabetes as their primary diagnosis. The agency's re-hospitalization rate for 2021 was 17.86%.

2021 National Patient Satisfaction Benchmark System findings for JCPHS home health care patients showed of 510 patients surveyed, 169 responded (33%) with 89% rating their care 9 or 10 on a scale of 0-10; 83% would definitely recommend; 91% satisfied with care received; 87% satisfied with communications about care provided; and 81% satisfied with specific care issues. Satisfaction was essentially stable if not a bit improved in all categories over 2020.

## **Emergency Medical Services**

The EMS unit coordinates education programs, systems response planning, support services, quality improvement, and public health preparedness with other emergency and public safety providers, hospitals, agencies and committees. Lewis, St. Lawrence, Oswego, and Onondaga County interactions are maintained. The unit sponsored 16 courses in 2021.

### **Overdoses**

The department continued to work with first responders to report real-time information into the ODMAP reporting system. The data goes first to the EMS unit, which evaluates the information to use for public notification. The Director of Public Health and District Attorney together approve issuing public ALERTs, generally when 4 known overdoses occur within a 24-hour period. No ALERTs were issued in 2021, but a year-end release was issued regarding the numbers of confirmed overdose deaths to date, as well as an updated listing of resources individuals and families could access for assistance, resources for harm reduction, naloxone training with free kits, and agencies that could assist with safe disposal of prescription medications.

## **Public Health Emergency Preparedness**

Public Health Emergency Preparedness and Response (PHPR) continued to be a major priority for the department. Significant efforts were organized for local response to the COVID-19 pandemic. Efforts included educating the public to be prepared in the event of an emergency and providing health professionals and citizens to serve as volunteers in Jefferson County communities during health-related emergencies. The department also continued to work with regional, State and Federal levels to assure the most effective response possible to health emergency threats in Jefferson County and the North Country. The department is an active member of the Central New York Alliance, which meets periodically to address preparedness plans and deliverables and discusses coordination of potential response activities regionally. The department is also an active participant with the Central New York Medical Reserve Corps, which provides opportunities for health professionals and citizens to serve as volunteers during health-related emergencies.

# Medical Examiner

The Jefferson County Medical Examiner's (ME) Office is authorized to investigate deaths that fall under [New York State County Law, Article 17A, Section 670](#). The ME Office goal is to provide answers for those affected by sudden and traumatic loss, and help improve the public health, safety and well-being of all Jefferson County residents. The ME continued to investigate deaths that fell into categories outlined in County Law where the public interest is served by explaining cause and manner of death.

Once Medical Examiner jurisdiction is established, it is the Office's responsibility to determine the cause and manner of death, produce an autopsy report, and issue a death certificate. The cause of death is the disease process or injury that results in the person's death. The manner of death indicates how the death occurred and includes designations of accident, homicide, natural, suicide, or undetermined. Of 32 confirmed overdose deaths in 2021, 28 were attributed to opioids.

## 2020-2021 Annual Data

<b>Community Health</b>	<b>2020</b>	<b>2021</b>
<b>Child Find</b>		
Referrals	163	140
Cases	101	110
<b>Childhood Lead Poisoning Prevention Program</b>		
Provider Screens	2,350	2,332
Pb>10+ mcg/dl	37	27
Pb 5-9 mcg/dl	118	106
<b>Children with Special Health Care Needs</b>		
Total children served (<21 years of age)	28	8

<b>Health Promotion</b>	<b>2020</b>	<b>2021</b>
<b>CHIP Health Education Indicators</b>		
Educational Events	12	18
Individuals Reached	116,721	116,721
School Classroom Presentations	0	0
Number of Facebook “Likes”	14,420	15,496
Number of Twitter Followers	275	286
Number of Instagram Followers	699	955
Provider Educational Events	9	8
Providers Reached	296	285
Press Releases Completed	340	238
Number of Social Media Campaigns Conducted	2	2

<b>Disease Control</b>	<b>2020</b>	<b>2021</b>
<b>COVID-19</b>	<b>2,225</b>	<b>13,123</b>
<b>Hepatitis*</b>	<b>98</b>	<b>105</b>
Hepatitis A	2	1
Hepatitis B, Chronic	8	10
Hepatitis B, Infant Perinatal	1	3
Hepatitis C, Chronic	85	85
Hepatitis C, Acute	2	6
<b>Influenza</b>	<b>461</b>	<b>327</b>
Influenza A	199	230
Influenza B	261	78
Influenza Unspecified	1	19
<b>Lyme Disease</b>	<b>33</b>	<b>25</b>

<b>Disease Control (cont'd.)</b>	<b>2020</b>	<b>2021</b>
<b>Pertussis</b>	<b>4</b>	<b>4</b>
<b>Sexually Transmitted Infections</b>	<b>959</b>	<b>894</b>
Chlamydia	712	714
Gonococcal	1	0
Gonorrhea	236	166
Lymphogranuloma Venereum	0	0
Syphilis	10	14
<b>Tuberculosis</b>	<b>1</b>	<b>1</b>
<b>All Other Reportable Diseases</b>	<b>189</b>	<b>192</b>

\*Hepatitis A = spread through stool; Hepatitis B = spread through bodily fluids; Hepatitis C = spread through blood.

<b>Jefferson County Public Health Service - Diagnostic &amp; Treatment Center Services</b>	<b>2020</b>	<b>2021</b>
<b>COVID-19</b>		
Number of Clinics	-	300
Number of Clients	-	21,583
Total Vaccines Administered/Client Visits	-	33,299
<b>STD/HIV</b>		
Number of Clinics	28	36
Number of STD Visits	115	65
Number of HIV Visits	42	32
Number of HCV Tests (Hepatitis C)	14	17
Total Number of Clients	48	59
<b>Tuberculosis</b>		
Number of Skin Tests – PPDs	202	120
Number of Active Cases Monitored	0	1
Number of PPD Converters	4	1
Number of Client Visits	0	84
<b>Immunization</b>		
Number of Clinics	75	50
Number of Clients	667	482
Total Vaccines Administered	1,138	830
Number of Client Visits	749	506
<b>Hepatitis B</b>		
Number of Adults	5	22
Total Hepatitis B Administered	16	35
<b>Influenza</b>		
Total Influenza Administered	246	234

<b>Jefferson County Public Health Service - Diagnostic &amp; Treatment Center Services (cont'd.)</b>	<b>2020</b>	<b>2021</b>
<b>Pneumococcal</b>		
Total Pneumococcal Administered	46	29
Pevnar 13	35	25
Pneumovax 23	11	4
<b>Travel Health Services</b>		
Number of Clients	21	14
Number of Visits	24	14
Total Vaccines Administered	32	16
<b>Rabies Exposures</b>		
PRE-Number of Veterinary Practice Personnel	3	6
Number of Doses	5	17
Number of Titers	0	49
POST-Total Exposures	49	31
JCPHS Clients Served	0	2
JCPHS HRIG Doses Administered	0	0
JCPHS HDCV Doses Administered	0	5
Hospital Clients Served	49	30
Hospital HRIG Doses Administered	49	28
Hospital HDCV Doses Administered	193	116
Total Doses HRIG	49	28
Total Doses HDCV	193	119
Total JCPHS Doses HDCV (Nos. 2-4)+	0	3
<b>Total JCPHS D&amp;TC Patient Visits</b>	<b>1,551</b>	<b>34,601</b>

<b>Jefferson County Public Health Service - STD Program Submissions for Testing</b>	<b>2020</b>	<b>2021</b>
Syphilis	68	61
Chlamydia	103	62
Gonorrhea	103	62
HCV (Hepatitis C)	14	17
HIV	42	32
<b>TOTAL</b>	<b>330</b>	<b>234</b>



<b>Jefferson County Public Health Service – Vector Control Program</b>	<b>2020</b>	<b>2021</b>
<b>Human Surveillance</b>		
Lyme Disease Investigations – Confirmed & Probable*	6	25

\*Jefferson is now a sentinel county per the NYSDOH as it has had 3+ consecutive years of >50 cases. As a sentinel county, the department now receives only one-fifth (20%) of ECLRS reports annually to investigate.

<b>Rabies Testing</b>	<b>2020</b>	<b>2021</b>
Jefferson County Public Health Service – Animals Submitted	82	73
Partner Agency (Fort Drum, NYSDEC) – Animals Submitted	193	77

<b>Rabies Vaccinations</b>	<b>2020</b>	<b>2021</b>
<b>Village Clinics</b>		
Dogs	159	344
Cats	88	174
Ferrets	0	3
<b>TOTAL Village Clinics</b>	<b>247</b>	<b>521</b>
<b>Dog Control Clinics</b>		
Dogs	213	341
Cats	75	164
Ferrets	0	3
<b>TOTAL Dog Control Clinics</b>	<b>288</b>	<b>508</b>
<b>TOTAL VACCINATIONS</b>	<b>535</b>	<b>1,029</b>

<b>Home Health Care</b>	<b>2020</b>	<b>2021</b>
Referrals	1,441	1,360
Cases	811	884
Average Daily Census	139	130
<b>Visits By Discipline</b>		
Nursing	8,168	7,979
Home Health Aide	2,096	1,387
Physical Therapy	4,338	4,480
Occupational Therapy	858	921
Nutrition	214	109
Medical Social Worker	591	553
<b>TOTAL Visits</b>	<b>16,265</b>	<b>15,429</b>

<b>Emergency Medical Services</b>	<b>2020</b>	<b>2021</b>
<b>EMS Courses</b>		
Number of Courses	13	16
Number of Students	230	195
<b>EMS Calls</b>	21,925	24,607

<b>Medical Examiner</b>	<b>2020</b>	<b>2021</b>
<b>Causes of Death</b>		
Natural Death	89	103
Accidental Death	53	43
Suicide	11	17
Homicide	0	3
Pending Investigation	0	1
Consultation	0	0
Undetermined	6	6
<b>Cases</b>		
<b>TOTAL</b>	<b>159</b>	<b>173</b>
Total with Autopsy	105	87
Total without Autopsy	54	86
Autopsy to Case Ratio	66	50
Total Scene Investigations	5	3

# Jefferson County, NY COVID-19 Index

## Vaccinations in Jefferson County, NY

People Vaccinated through 12/31/2021 -	At Least One Dose	Fully Vaccinated
Total	86,557	73,699
% of Total Population	78.8%	67.1%
Population ≥5 Years of Age	86,557	73,699
% of Population ≥5 Years of Age	85.5%	72.8%
People Booster Vaccinated through 1/31/2021		23,182
% of Fully Vaccinated Population with a Booster Dose		31.5%

Source: U.S. Centers for Disease Control.

## Testing Data:

Total Positive through 12/31/2021: 15,348  
 % Positive – 7-day Average as of 12/31/2021: 10.6%  
 Source: Jefferson County Public Health Service.  
 Positive Case Rate per 100,000 population as of 12/31/2021 – 273.14  
 Source: U.S. Centers for Disease Control.

## Jefferson County, NY Community Transmission Level: **HIGH**

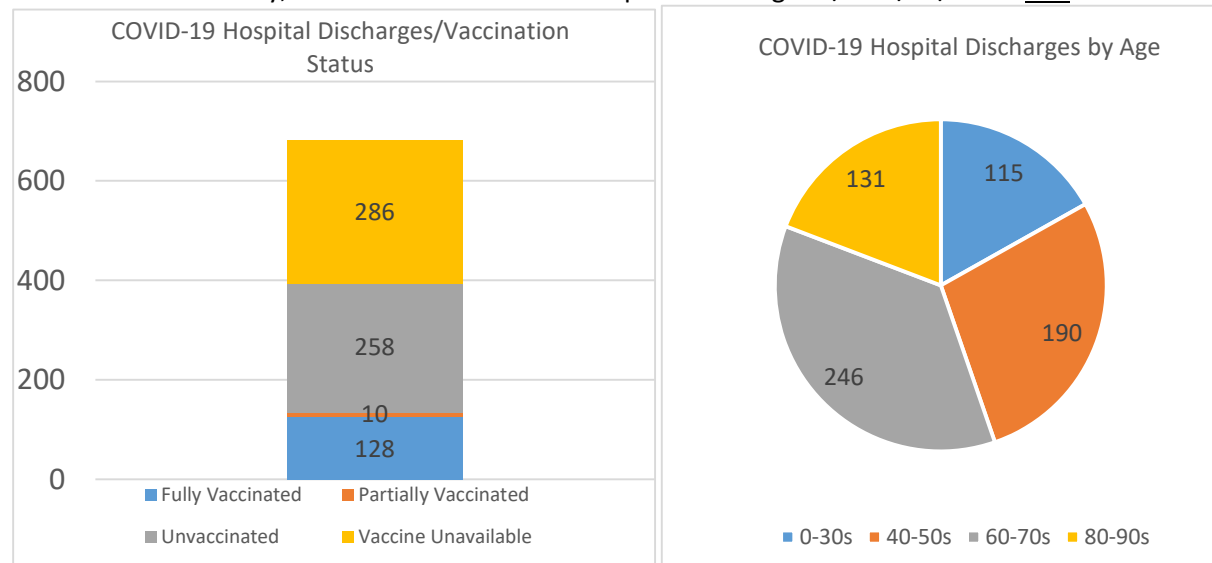
Source: U.S. Centers for Disease Control.

## Wastewater Results:

SARS-CoV-2 City of Watertown, Wastewater Testing Result, as of 12/27/2021: **HIGH**  
 SARS-CoV-2 Village of Carthage/West Carthage, Wastewater Testing Result, as of 12/27/2021: **HIGH**  
 SARS-CoV-2 Thousand Islands Central School District, Wastewater Testing Result, as of 12/27/2021: **HIGH**  
**HIGH** = COVID-19 quantifiable indicating active transmission with remediation needed immediately.  
 Source: Quadrant Viral Testing, LLC.

## Hospital Discharges, 2021:

Total Jefferson County, NY Residents COVID-19 Hospital Discharges 1/1-12/31/2021: **682**

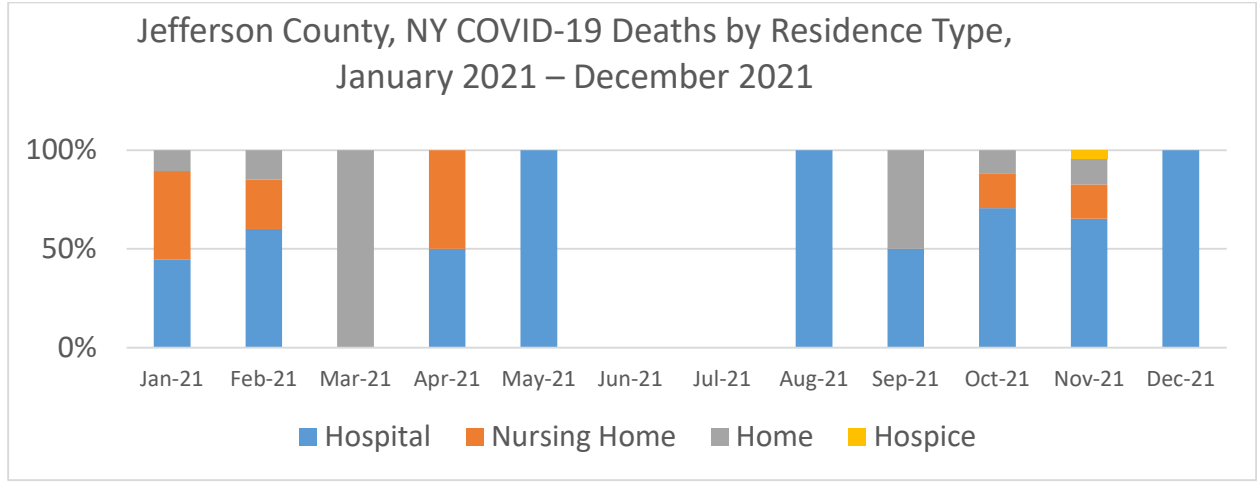


Source: Jefferson County Public Health Service; hospital and long-term care facilities.

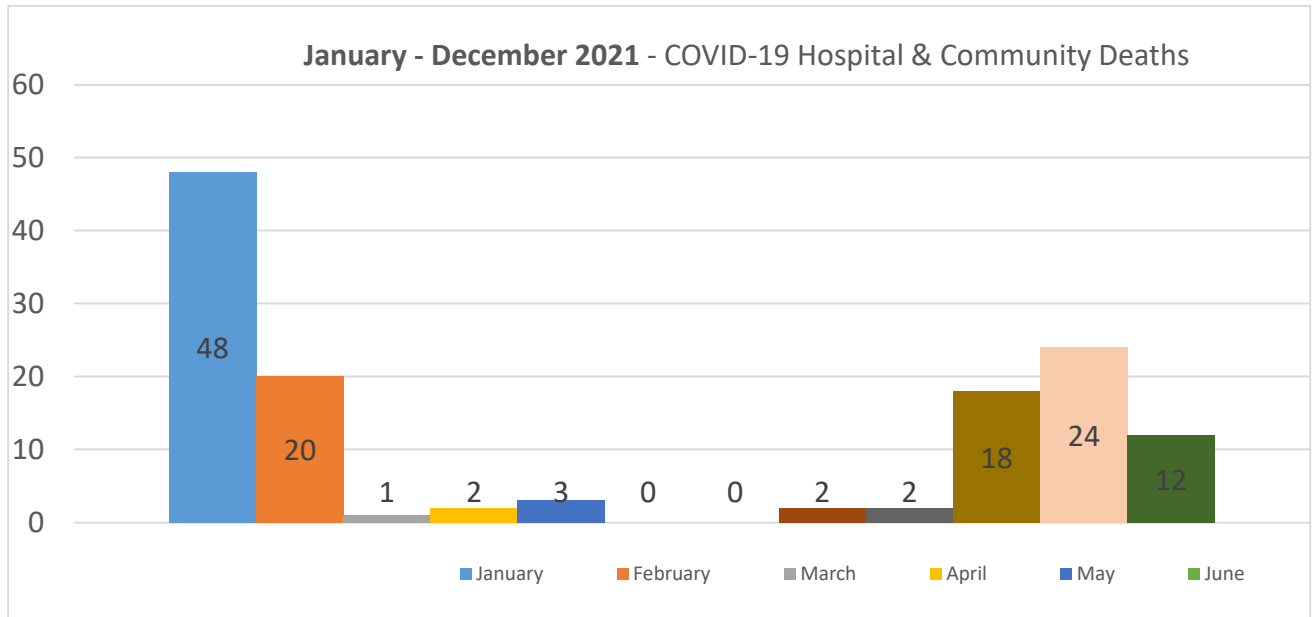
**COVID-19 Deaths:**

Total Jefferson County, NY Residents COVID-19 Deaths 1-12/31/2021: **132**

January 2021 – 48; February 2021 – 20; March 2021 – 1; April 2021 – 2; May 2021 – 3; June 2021 – 0; July 2021 – 0; August 2021 – 2; September 2021 – 2; October 2021 – 18; November 2021 – 24; December 2021 – 12.

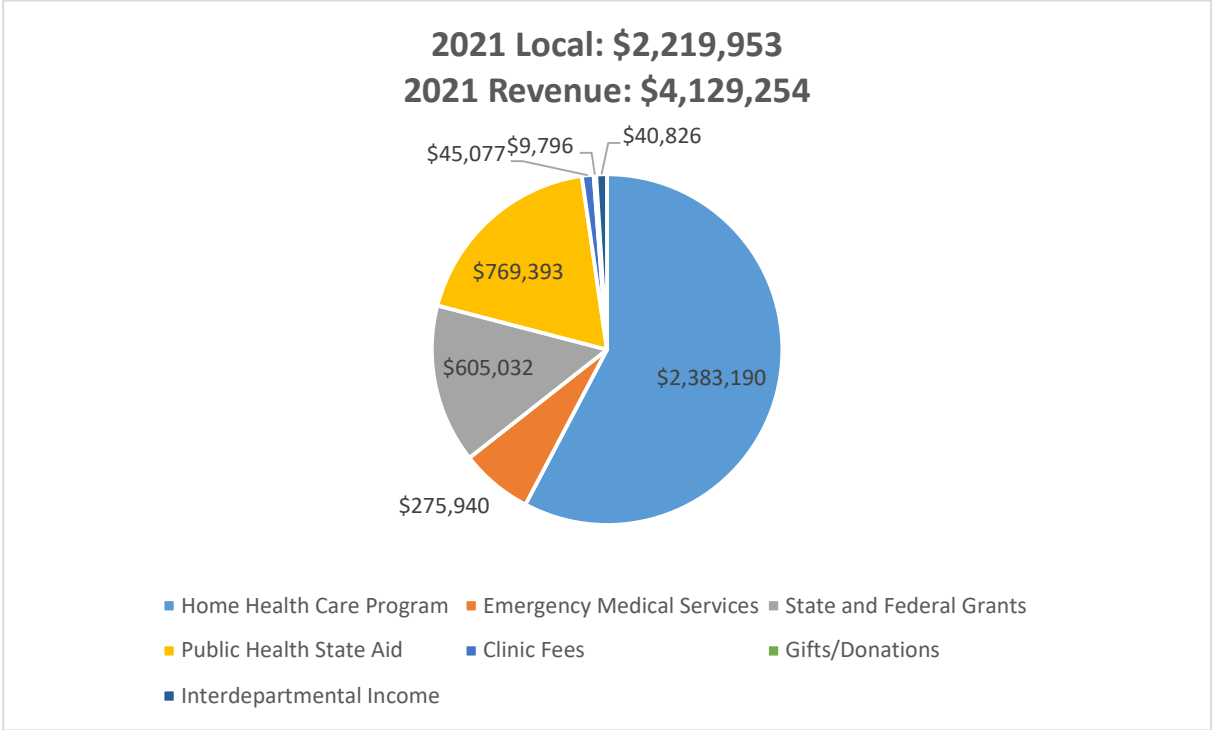
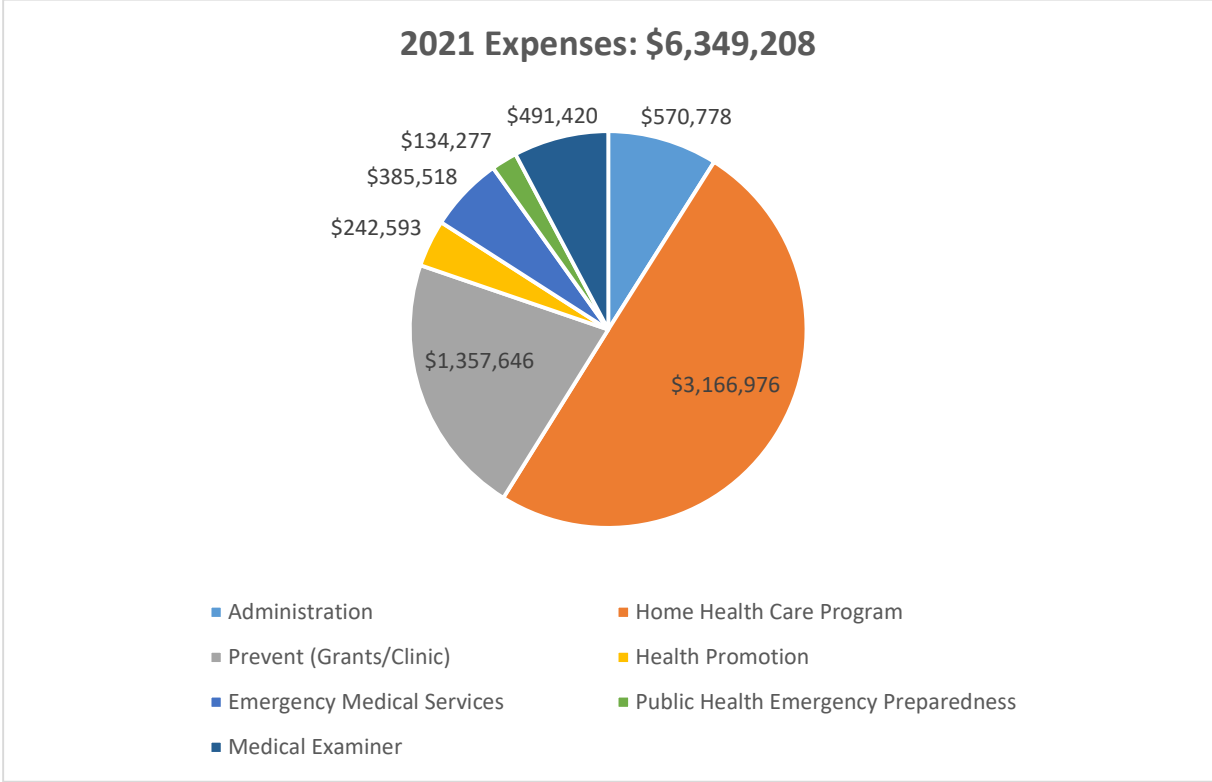


<b>Total Male:</b>	<b>63</b>	<b>Age 30s:</b>	<b>4</b>	<b>Youngest:</b>	<b>30</b>
<b>Total Female:</b>	<b>69</b>	<b>Age 40s:</b>	<b>3</b>	<b>Oldest:</b>	<b>99</b>
<b>TOTAL:</b>	<b>132</b>	<b>Age 50s:</b>	<b>12</b>	<b>Average Age:</b>	<b>75</b>
		<b>Age 60s:</b>	<b>23</b>		
		<b>Age 70s:</b>	<b>33</b>		
		<b>Age 80s:</b>	<b>32</b>		
		<b>Age 90s:</b>	<b>25</b>		



Source: Jefferson County Public Health Service; Jefferson County Medical Examiner.

# Schedule of Expenditures and Revenue



# 2021 Staff

## **Management**

Ginger Hall, Director of Public Health  
Lisa Cooley, Director of Patient Services  
Bert Burnham, Public Health Fiscal Director  
Heather Campbell, SPHN  
Troy Mitteer, SPHN  
Gayle Seymour, SPHN  
Tina Siembida, SPHN

## **Medical Director**

Robert Kasulke, MD

## **Nursing**

Patricia Barton, PHN  
Cathleen Biggs, RN  
Scott Comstock, RN  
Brandi Crutchfield, RN  
Erna Davidson, RN  
Patricia Dooley, PHN  
Candice Gozalkowski, RN  
Susan Harris, RN  
Sandra Horning, LPN  
Joyce James, RN  
Yuliya Labko, PHN  
Kaylee Nortz, RN  
Mandy Parker, LPN  
Klarissa Parsons, RN  
Tamie Reynolds, RN  
Sharon Riley, RN  
Katherine Schuessler, PHN  
Susan Smith, PHN  
Keyawanna Stroud, RN  
Amy Wonderly, RN  
Laurie Woodward, PHN

## **Home Health Aide**

Beverly Branch  
Petra O'Conner  
Robin Phillips

## **Physical Therapy**

Lisa Boulter, PTA  
Brian Boutilier  
Alyssa Gibbs  
Jessica Lyndaker, PTA  
Julie Ward

## **Occupational Therapy**

Amanda Mower

## **Medical Social Work**

Jeri Fuller, PH Social Worker

## **Nutritionist**

MaryBeth Knowlton, RD

## **Health Planning**

Stephen Jennings, MS

## **Health Promotion**

Lisa Lagos  
Faith Lustik, MA

## **Public Health Emergency Preparedness**

Jeffrey Leiendecker, MS

## **Secretarial/Accounting/Office**

Jieun Ahn  
Ingrid Bartlett  
Kristen Boshane  
Katie Dandrow  
Maria Davis  
Patti Drake  
Kimberly Goodale  
Necole Hulbert  
Penny O'Brien  
Jessica O'Hara  
Bridget Priest  
Jenna Roberts  
Jennifer Salisbury  
Michelle Snyder  
Penny Thomas

## **Emergency Medical Services**

Paul Barter, Director  
Christopher Singleton

## **Medical Examiner**

Samuel Livingstone, MD  
Vonnice Joels, Medical Investigator  
Victoria Romine, Medical Investigator  
Robert Kasulke, MD – per diem

## **COVID-19 Temporary**

Diana Chaffee  
Jonathan Comstock  
Deborah Foisy, PHN  
Maria Foisy  
Gregory French  
Naomi Hart  
Claire Jennings  
Amanda Mason, MSW  
Elizabeth Mason, SPHN  
Sonya Otis, RN  
Yvonne Pike  
Paul Warneck

# Contact Us

## Jefferson County Public Health Service

531 Meade Street, Watertown, NY 13601

Administration: (315) 786-3710

Home Health Care Programs: (315) 786-3770

Preventive Services/Disease Control: (315) 786-3730

Emergency Medical Services: (315) 786-3760

Medical Examiner: (315) 786-3755

**Find us on the Internet:**

[www.jcphs.org](http://www.jcphs.org)

**OR**

[www.facebook.com/JCPHS](https://www.facebook.com/JCPHS)