Dear Friends and Neighbors,

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

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

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

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

Sincerely,

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

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

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

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

**Assurance**
- Link people to needed personal health services and assure the provision of health care when otherwise unavailable.
- Assure a competent public health and personal health care workforce.
- Inform, educate, and empower people about health issues.
- Mobilize community partnerships to identify and solve health problems.

**ASSESSMENT**

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

**Diagnose and investigate health problems and health hazards in the community**
- Surveillance for communicable diseases and identification of any biological or chemical threats continued.
- Leading Jefferson County Communicable Disease indices continued to be Sexually Transmitted Diseases, respiratory, and food-borne generated.
Jefferson County CD Indices | 2017 | 2018  
--- | --- | ---  
Campylobacteriosis** | 60 | 51.0 | 64 | 56.0  
Cryptosporidiosis** | 32 | 27.2 | 37 | 32.4  
E-Coli Shiga-Toxin | 9 | 7.9 | 21 | 18.4  
Giardiasis | 17 | 14.5 | 21 | 18.4  
Hepatitis B, Chronic | 4 | 3.4 | 5 | 4.4  
Hepatitis C, Acute | 1 | 0.9 | 3 | 2.6  
Hepatitis C, Chronic | 68 | 57.8 | 74 | 64.8  
Influenza, Lab Confirmed | 606 | 531.6 | 1,325 | 1,160.4  
Legionellosis | 3 | 2.6 | 5 | 4.4  
Lyme Disease** | 19 | 16.2 | 53 | 46.4  
Meningitis, Aseptic | 6 | 5.1 | 6 | 5.3  
Pertussis** | 7 | 6.0 | 2 | 1.8  
Salmonellosis | 26 | 22.1 | 30 | 26.3  
Tuberculosis *** | 1 | 0.9 | 0 | 0.0  

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

- Overall STD indices rose in 2018 and continue to trend upward in Jefferson County, New York State, and nationally at significant rates. Educational efforts to address and control STDs are focused on prevention and increasing screening with particular attention on high-risk populations. The Sexually Transmitted Infections (STI) Coalition continues to address the increasing numbers of STI/D cases by coordinating targeted prevention messages utilizing paid social media ads, as well as educating providers on appropriate follow-up with STI/D patients. 
- Lead exposure in children decreased slightly overall. Of 3,007 provider screens, 120 children had lead levels of Pb>10 mcg/dl; 55 children had levels at Pb>40 mcg/dl, which was a 35% decrease from 2017. All 175 children who were lead poisoned were followed-up with.

- Evaluate effectiveness, accessibility, and quality of personal and population-based health services:
  - There was 1 active Physically Handicapped Children's Program case. Total active Children with Special Health Care Needs clients were 47, an increase of 67.8%. The program's data monitoring changed in 2017 to only count new referrals. The program has a focus on outreach and assisting special health care needs families with transitioning to adulthood. The department continued to partner with the Northern Regional Center for Independent Living (NRCIL) to provide educational sessions for families.
  - The Home Health Care Programs continued its focus on reducing rehospitalization of patients. Key areas focused on included patients having either congestive heart failure (CHF), myocardial infarction (MI), chronic obstructive pulmonary disease (COPD), pneumonia, or diabetes as their primary diagnosis. The agency's re-hospitalization rate for 2018 was 12.20%, a slight increase over 2017.
  - 2018 National Patient Satisfaction Benchmark System findings for JCHPS home health care patients showed of 584 patients surveyed, 233 responded (40%) with 83% rating their care 9 or 10 on a scale of 0-10; 75% would definitely recommend; 86% having no problems with care received; 92% satisfied with communications about care provided; and 78% satisfied with specific care issues.
  - The department continued operating its Quality Assurance/Performance Improvement (QAPI) structure, with Quality Management meeting bi-weekly to discuss department priorities and emergent issues; Continuous Quality Improvement (COI) meeting bi-weekly to discuss patient care priorities; QAPI Public Health meeting quarterly to discuss communicable disease, clinic, health promotion, and public health emergency preparedness priorities; QAPI Finance meeting quarterly to discuss department financial priorities and issues; QAPI Home Care quarterly to discuss home health care priorities and issues.

**POLICY DEVELOPMENT**

- Develop policies and plans that support individual and community health efforts:
  - The QAPI Public Health Committee members continued working on tasks charted in the its 2017-2019 Strategic Plan. Goals and strategic initiatives include:
  - **GOALS**
    - **STRATEGIC INITIATIVES**
      - Promote awareness of public health services in Jefferson County.
      - Strengthen our STD/HIV Clinic: a) add an NP Provider; b) increase social media presence to educate the public.
      - Strengthen maternal/infant care in Jefferson County by contacting every new (first-time) mother of a newborn, and every mother of a high-risk newborn, and referral on a case-by-case basis.
      - Collaborate and integrate all services with Fort Drum (e.g. Dog Control, Communicable Disease Control, NYSDOH, STDs, Preparedness).
      - Measurably impact chronic disease incidence in the population by enhancing diabetes education and impact strategies.
      - Measurably impact mental health and substance abuse in the population by enhancing partnerships to increase community dialogue and develop comprehensive systems strategies that increase prevention programming, as well as access to care and treatment.
      - Advance public health preparedness.
  - A work plan for each strategic initiative continued to be implemented in line with the county’s 2016-2018 Community Health Assessment (CHA) and Community Health Improvement Plan (CHIP). Key tasks achieved included: Hired a Nurse Practitioner to work for the department’s HIV/STD clinic and to see complicated Maternal/Infant/Child Health (MICH) patients in the home setting; hired a part-time RN to work for MICH services; continued to work on increasing the numbers of municipalities that adopt Complete Streets policies by establishing a partnership with the Tug Hill Commission—with Water-town adopted, and the villages of Alexandria Bay, Carthage, and De- feriet Natural Bridge; considered policies; continued to work with schools that high rates of obesity to improve wellness policies supporting healthy environments; worked with partners to measurably increase mental, emotional and behavioral (MEB) health assessment in primary care settings; increased suicide prevention awareness through social and other media campaigns; assisted Pivot with submit- ting a federal Comprehensive Addiction and Recovery Act (CARA) Grant application with a program awarded; continued ongoing emergency preparedness work; quality improvement (QI) priorities encompassed work on included STD billing and clinic marketing, communucable disease report volume as new testing methodologies greatly increased the volume and quality of follow-up required, documentation of QI activities in Health Promotion programming, and immunization clinic issues; quality assurance (QA) work included rewriting the privacy policies to reference more stringent New York State privacy regulations in addition to federal regulation; the department’s overall corporate compliance program remains strong, and progress is documented and reported quarterly to the Professional Advisory Committee and to the regional DSRIP Corporate Compliance Committee; hired Richard Halpin to facilitate and complete the 2019-2021 Strategic Plan—Mr. Halpin will complete the work in 2019.
  - The Keep the North Country Smiling coalition continued its work to advance oral health care in Jefferson, Lewis, St. Lawrence and Oswego Counties through a 2017-2020 work plan. Items worked on included: approaching FDRHPO to advance oral health standards at primary practices, with emphasis on including oral health assessment templates in the electronic health record; developed the primary care practices in the region; continued expansion of fluoride varnish treatment in the pediatric primary care setting—6 practices were actively providing FVT in 2018; continued to promote access to community water fluoridation by making municipalities aware of funding through the NYSDOH to repair and replace outdated fluoridation equipment.
as well as to purchase equipment to establish community water fluoridation; testified at the village of Potsdam hearings where removing community water fluoridation was proposed—The village trustees voted to retain fluoridation 9/17/18; added a new objective to the workplan to have all pediatric dental practices educate children and families about the importance of HPV vaccine to prevent oral cancers as a strategy of CHIP—was approached by the NYS Dental Center Foundation to implement a Dental Demonstration Project to treat adult patients with dental needs through a day of free oral/surgical health services, and then enroll these patients into ongoing treatment with a dental home—the North Country Family Health Center agreed to host the project this Spring of 2018.

- Up-to-date goals, objectives, action strategies, and progress are delineated in the CHIP and measurably improving priority chronic disease and mental health/substance abuse indices.

- Department staff continued to actively participate in the CNY Public Health Alliance (formerly Epidemiology Alliance), led by the Onondaga County Health Department.

- Department staff actively participated on the North Country Prenatal/Perinatal Council (NCPCC) Board of Directors and committees.

- Jefferson County EMS continued active membership with the Jefferson County Emergency Medical Services Cooperative.

- Department Administration, EMS, Medical Investigator, and the Public Health Emergency Coordinator are all members of the Jefferson County Local Emergency Planning Council. These department members also serve on the regional hospital External Preparedness Steering Group, led by Samaritan Medical Center, served to slow overdoses and overdose deaths. Widespread availability of Naloxone to reverse opioid overdose in late 2016 and throughout 2017 are making a measurable difference. The department actively utilizes Facebook to reach the public, and had 7,560 followers at year-end.

- The opioid epidemic continues to adversely impact Jefferson County residents. However, infrastructure improvements put in place in late 2016 and throughout 2017 are making a measurable difference. Widespread availability of Naloxone to reverse opioid overdose in late 2016 and throughout 2017 are making a measurable difference. The department actively utilizes Facebook to reach the public, and had 7,560 followers at year-end.

- The department received radon grant funding to provide home test kits and public education through 2018. 99 kits were distributed in 2018. Numbers of kits testing above the EPA actionable level of 4 pCi/L remain pending.

- The department remains extremely active with the Alliance for Better Communities, and has engaged all community sectors to address the problem from the ground up. The department is an active member of the Northern New York Oral Health Initiative.

- The department submitted 186 animals for rabies testing with 7 positive for rabies, 1,239 domestic animals were vaccinated at Public Health, Dog Control, and Ag & Markets clinics.

- The media examiner investigated deaths that fell into categories outlined in County Law Article 17A where the public interest is served by explaining cause and manner of death. There were 119 cases for the year; 70 cases required autopsy. There were 14 overdose deaths; 9 of the overdoses were attributed to heroin.

- The department, as part of its CHIP priorities, advises and assists community partners with writing grant applications like this to ensure needed services are established. The Anchor engages addicted individuals and their families to obtain treatment and counseling services. The Anchor is also a recovery center, where individuals can go for peer support and assistance. The work of the Anchor is credited with reducing overdose and overdose deaths in Jefferson County. The department’s Diagnostic & Treatment Center (D&Tc) provided 84 Hepatitis B, 626 influenza; 55 pneumonia; and 169 tuberculosis vaccinations; these were post exposure vaccinations by JCHPS in 2018. Of 1,725 STD specimens that the department submitted for testing, 90 were positive. Testing increased significantly with hiring a Nurse Practitioner.

- The department continues to be an excellent convener and colleague of partners to identify and collaboratively solve health problems. The department is an active member of the New York State Association of County Health Officials (NYSACHO) and a board member of the Fort Drum Regional Health Planning Organization (FDRHPO). The department convenes the Jefferson County STI and Diabetes Coalitions, and is a member of and chairs the North Country Health Compass Partnership; is a member of several Cornell Cooperative Extension Advisory committees; is a board member of NCPCP to address maternal, infant, child and family health initiatives; is a member of and chairs the Alliance for Better Communities drug prevention task force to address prescription drug and heroin abuse, and overdoses; is a member of the Anchors Recover Center of Northern New York’s advisory committee; is a member of the Jefferson Emergency Medical Services Cooperative; and is a member of and chairs the Keep the North Country Smiling children’s oral health initiative.

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### 2017 EXPENDITURES

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<tr>
<th>Category</th>
<th>Amount</th>
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<td>Medical Examiner</td>
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<td>Administration</td>
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<tr>
<td>Home Health Care Programs</td>
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<td>Prevent (Grants/Clinic)</td>
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<td>Health Promotion</td>
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<td>Emergency Medical Services</td>
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<td>Public Health Emergency Preparedness</td>
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<td><strong>TOTAL</strong></td>
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### 2017 REVENUES

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**JEFFERSON COUNTY PUBLIC HEALTH SERVICE Staff**

**Management**
- Ginger Hall, Director of Public Health
- Bert Burnham, Public Health Fiscal Director
- Heather Campbell, SPHN
- Margaret Hewitt, SPHN
- Troy Mitteer, SPHN
- Gayle Seymour, SPHN
- Tina Siembida, SPHN
- **Medical Director**
  - Robert Kasulke, MD

**Nursing**
- Patricia Barton, PHN
- Cathleen Biggs, RN
- Tracey Biggs, RN
- Faith Campanaro, RN
- Carol Donner, RN
- Deborah Foisy, PHN
- Melissa Fulton, RN
- Kandi Estep, LPN
- Candace Gozalkowski, RN
- Christopher Hague, RN
- Susan Harris, RN
- Katie Hazelwonder, RN
- Sandra Horning, LPN
- Teresa Hughes, RN
- Karen Humphrey, RN
- Kathleen Hunter, RN
- Kala Maguire, RN
- Cynthia Mills, RN
- Jennifer Morocco, RN
- Stephanie Nadelen, LPN
- Kelsey Osteen, RN
- Sonya Otis, RN
- Melissa Reynolds, NP
- Katherine Schuessler, PHN

**Nursing (con’t.)**
- Gladys Serem, PHN
- Shawn Smiley, RN
- Tyler Sorrell, RN
- Tina Sulier, LPN
- Laurie Woodward, PHN
- **Home Health Aide**
  - Beverly Branch
  - Michelle Farrell
  - Petra O’Conner
  - Robin Phillips
  - Candace Smith
- **Physical Therapy**
  - Lisa Boulter, PTA
  - Brian Bouttler
  - Alyssa Gibbs
  - Jessica Lyndaker, PTA
  - Sarah Smith
  - Julie Ward
- **Occupational Therapy**
  - Amanda Mower
- **Medical Social Work**
  - Jeri Fuller, PH Social Worker
  - Amanda Thompson, 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**
- Ethan Brown
- Laurel Carnegie
- Kim Carpenter
- Katie Dandrow
- Pamela Daniels
- Patti Drake
- Jenna Flath
- Kristen Gagnon
- Kimberly Goodale
- Necole Hubert
- Trudy Marselis
- Lisa Marshall
- Penny O’Brien
- Bridget Priest
- Jennifer Salisbury
- Jennifer Snyder
- Michelle Snyder
- Lorraine Sorrell
- Penny Thomas

**Emergency Medical Services**
- Paul Barter, Director
- Judith Brenon
- Debra Fults

**Medical Examiner**
- Samuel Livingstone, MD
- Vonnice Joels, Medical Investigator
- Robert Kasulke, MD—Per Diem

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**Contact Us!**
**Jefferson County Public Health Service**
531 Meade Street . Watertown, NY 13601
Administration: (315) 786-3710
Home Health Care Programs: (315) 786-3770
Fax: (315) 786-3761

Find us on the internet!
jcphs.org OR facebook.com/JCPHS