



2022 PUBLIC HEALTH DEPARTMENT ANNUAL REPORT

Mission: To ensure the health, safety and quality of life for all St. Lawrence County residents. The department is dedicated to protecting the health of our community by:

- Controlling the spread of disease;
- Promoting healthy choices;
- Providing timely health information;
- Promoting the health and development of infants and children; and
- Planning for and helping to mitigate public health emergencies.

Our philosophy is prevention is better than a cure, healthy families need healthy environments, safety first must be a way of life, and people must be empowered to take care of themselves.

The COVID-19 pandemic response continued throughout 2022. As the year progressed, we adapted to meet the demands and challenges with the pandemic, including preparing for a return to normal, resumed our base services and grants, while continuing to meet the mission of the department.

This report provides our overall standing for the year, a review of our quarterly financials, and program (or unit) standing as we close out 2022.

2022 Overall Original Budget

CATEGORY	ORIGINAL APPROPRIATIONS	ACTUAL EXPENDITURES	PERCENT USED
PERSONNEL	\$2,190,702	\$1,798,726	82%
EQUIPMENT	\$521,736	\$517,274	99%
CONTRACTUAL	\$7,786,786	\$5,258,880	68%
EMPLOYEE BENEFITS	\$1,203,176	\$948,020	79%
REVENUE	\$(7,754,158)	\$(3,289,070)	42%
TOTAL	\$3,948,242	\$5,233,830	133%

During the year, several positions were open either due to not yet being filled, organizational modifications, and resignations. There was an average of 3-5 positions that were vacant throughout each quarter. We have struggled to fill the vacant nursing positions in 2021 but were able to onboard three nurses in August of 2022. Due to staffing needs and employees being unable to take vacation time due to COVID-19 we did 7 vacation buybacks throughout the year. With many staffing changes within the department over the last two years, we are learning new roles, and putting in place policies and procedures to standardize our work, improve efficiency, and stay abreast with current requirements. We earned less revenue during 2022 than expected due to the COVID-19 pandemic and the fact that our core programs were not functioning at full capacity. Revenue for our grant work started to get back to our pre-pandemic normal levels.

2022 Quarterly Snapshot

CATEGORY	Q1	Q2	Q3	Q4
Personnel	\$401,814	\$383,163	\$467,229	\$546,520
Equipment	\$0	\$0	\$517,274	\$0
Contractual	\$657,778	\$1,203,937	\$1,266,166	\$2,131,049
Benefits	\$205,858	\$213,986	\$252,126	\$276,050
Revenue	\$(50,789)	\$(1,207,812)	\$(1,242,521)	\$(787,948)
NET COST	\$1,214,661	\$593,274	\$1,260,224	\$2,165,671

Q1

Personnel -Our department is at 19% of the 2022 budgeted personnel expenses. We created and filled a full-time keyboard specialist to assist with COVID-19 activities; along with a full-time Public Health Specialist, and 2 part-time Community Health Nurses to assist with our COVID-19 vaccination activities. We currently have the following positions vacant: Community Health Nurse, (2) Public Health Nurses, Service Coordinator, Sanitarian, and Deputy Director.

Contractual – We have expended 12.1% of our overall contractual budget; Admin = \$374 (.8%) - Coroners = \$46,102 (21.1%) - Early Intervention = \$12,729 (5.7%) - PreSchool = \$406,844 (10%) - Prevent = \$190,483 (48.5%). There has not been any major purchases to date with exception of approximately \$122,000 in supplies for our Reopening Schools Grant.

Benefits – N/A

Revenue – The majority of 1st quarter revenue will not be reflected until the second quarter reporting due to the fact that our grants and state aid will not be submitted until after the quarter ends. We can expect an estimated \$80,000 this quarter from our Programmatic Grants. We expect an estimated revenue for our additional COVID-19 grants as follows: \$197,000 from our Reopening Schools Grant, \$35,000 from our COVID-19 Vaccine Grant, and \$85,000 from our ELC COVID-19 Grant. There is an approved overall amount of \$787,758 in state aid this year. Based on what we received last year, the estimated amount of state aid reimbursement for the first quarter would be approximately \$390,000.

Q2

Personnel - Our department is at 35.9% of the 2022 budgeted personnel expenses. We filled the Deputy Director position in May, along with 2 Service Coordinators (April and May). We filled and vacated a Keyboard Specialist (was not vacant March 22-May 25). We currently have the following positions vacant: Community Health Nurse, (2) Public Health Nurses, Keyboard Specialist, and Sanitarian.

Equipment - None

Contractual – We have expended 23.4% of our overall contractual budget; Admin = \$28,835 (64.4%) - Coroners = \$100,849 (28.6%) - Early Intervention = \$91,840 (41.2%) - PreSchool = \$1,121,934 (27.5%) - Prevent = \$518,257 (15.9%).

Benefits – N/A

Revenue – We have an estimated \$70,000 from the 1st quarter from our Programmatic Grants outstanding. We have an estimated \$440,000 from the 1st quarter from our additional COVID-19 Grants as follows: \$160,000 from our Reopening Schools Grant, \$25,000 from our COVID-19 Vaccine Grant, and \$280,000 from our ELC COVID-19 Grant. We \$186,000 from the 1st quarter from our State Aid outstanding. We have an estimated \$120,000 from the 2nd quarter from our Programmatic Grants outstanding. We have an estimated \$200,000 from the 2nd quarter from our additional COVID-19 Grants as follows: \$145,000 from our Reopening Schools Grant, \$40,000 from the 2nd quarter from our COVID-19 Vaccine Grant, and \$30,000 from our ELC COVID-19 Grant. As of April 1st our State Aid Base Grant has increased from \$500,000 to \$577,500. Our prorated amount for the remainder of 2022 will be an additional \$55,812. We will see an increase in the 2nd quarter State Aid reimbursement as we are now allowed to claim up to 50% of fringe benefits related to State Aid activities.

Q3

Personnel – Our department is at 57.2% of the 2022 budgeted personnel expenses. We filled the following positions in August: Community Health Nurse, Public Health Nurse, and we underfilled a Public Health Nurse with a Community Health Nurse. We filled a Keyboard Specialist position in July. We abolished an Account Clerk Typist position and created a Senior Account Clerk position in August. We currently have the following positions vacant: Senior Account Clerk, Sanitarian, and a Public Health Specialist.

Equipment - The encumbrance is for the new Command Vehicle that is expected to arrive March of 2023.

Contractual – We have expended 40.7% of our overall contractual budget; Admin = \$29,517 (63.3%) - Coroners = \$160,908 (45.7%) - Early Intervention = \$140,816 (63.1%) - PreSchool = \$2,059,970 (50.5%) - Prevent = \$736,610 (24.7%).

Benefits – N/A

Revenue – We have an estimated \$50,000 from the 2nd quarter from our Programmatic Grants outstanding. We have an estimated \$288,000 from the 2nd quarter from our additional COVID-19 Grants as follows: \$160,000 from our Reopening Schools Grant, \$16,000 from our COVID-19 Vaccine Grant, and \$112,000 from our ELC COVID-19 Grant. We \$375,347 from the 2nd quarter from our State Aid outstanding. We can expect to see a decrease in revenue in the 3rd quarter from the COVID-19 grants as our Programmatic work returns to normal. We can expect our 3rd quarter State Aid to remain somewhat consistent as we are now claiming 50% of fringe benefits. The Programmatic Grant revenue should increase slightly as they are now our focus.

Q4

Personnel – Our department is at 82.1% of the 2022 budgeted personnel expenses. We created and filled a Communicable Disease Specialist position. Additionally, we filled the following positions in this quarter: Service Coordinator, Sanitarian, Public Health Specialist, and a Senior Account Clerk. We currently have the following position vacant: Public Health Specialist.

Equipment - The encumbrance is for the new Command Vehicle that is expected to arrive March of 2023

Contractual – We have expended 67.5% of our overall contractual budget; Admin = \$42,085 (94%) - Coroners = \$255,720 (72.6%) - Early Intervention = \$191,934 (86%) - PreSchool = \$3,298,422 (80.8%) - Prevent = \$1,459,335 (47.7%).

Benefits – N/A

Revenue – We can expect an estimated \$75,000 from our Programmatic Grants along with an estimated \$868,000 from COVID-19 Grants for the 4th quarter. Our 4th quarter State Aid should remain consistent with 2021 with an estimated \$150,000 as we will be claiming Imminent Threat.

2022 Unit & Program Review

Administration

Category	Original Budget	Actual Budget
Personnel	\$326,694	\$307,529.01
Contractual	\$48,862	\$48,805.06
Benefits	\$159,118	\$140,651.92
Revenue	\$(180,400)	\$(142,645.34)
TOTAL	\$354,274	\$354,340.65

Accomplishments – Staff continued a strong response in the 2nd year of the pandemic, working as a whole unit on various activities. The Deputy Director stepped into the Interim Director position in March 2021 and held both positions concurrently until September 2021, with the Deputy Director position remaining vacant until May 2022. The Department partnered with the New York State Public Health Corps Fellows program and created five 100% grant funded positions, three within the Department and two placed with the St. Lawrence Health Initiative, Inc. One Department fellow position was filled and one Health Initiative position was filled in 2022. The Department was awarded “Friend Of Extension Award 2022” This award is presented to an individual or group whose support and dedication furthered the mission of Cornell Cooperative Extension, for enhancing and expanding outreach and service to County Agricultural Producers. All programs continue to update their policies, procedures and provide quality services. The Department was able to pass all baseline requirements and audits that occurred within the year.

Challenges - The pandemic response took a toll on staff and morale, resulting in increased vacancies. It has been a struggle to recruit and retain staff, especially nurses. Staff were still required to work nights and weekends. As the number of COVID-19 cases increased, staff had to learn new roles and coping mechanisms to adjust to meet the needs. Fiscally, with the increased grants and lack of staff, it was difficult to keep up with the different requirements and reporting deadlines for each grant.

Focus for 2023– We will continue to work on restructuring programs due to our struggle to hire and retain nurses, to ensure continuity of operations should such staff decrease again. We will continue to develop and update policies and procedures for all programs and areas, for standardization. We will monitor grant processes, allocations, and progress throughout the year to modify as necessary in a timely manner. Additionally, we will continue to streamline coordination between fiscal and program quarterly reporting and documentation to prevent the need for multiple submissions. As the pandemic response continues, we will continue to balance programmatic work with response activities. We will focus on workforce development methods, Department wide strategic planning, and completing initial steps towards Public Health Accreditation.

Fiscal

Accomplishments - We underwent a thorough and smooth budget review and submission with engagement from all programs.

Challenges – One senior account clerk position remained vacant for several months. The increase in the number of grants the Department handles has increased by 4. This, combined with the reduction in staff, increased the workload of the remaining staff.

Focus for 2023 – We will continue the development of fiscal policies and procedures for all programs within the department. This will facilitate work flow during times of vacancies and/or staff transitions in the future. Fiscal staff will also plan on participating in governmental accounting training to further improve the overall understanding of fiscal functions within the department. The fiscal unit will continue to cross train and develop a system for checks and balances, particularly in the areas of payroll and grant submissions.

COVID-19

Category	Original Budget	Actual Budget
Personnel	\$503,159	\$105,348.87
Contractual	\$3,090,171	\$480,804.85
Benefits	\$98,779	\$13,027.64
Revenue	<u>\$(3,692,109)</u>	<u>\$(599,181.36)</u>
TOTAL	\$0	\$0

Summary - Conducts activities related to isolation and quarantine of individuals who test positive and those who are exposed to COVID-19. Provides education to the community and medical providers. Provides vaccination of COVID-19. Supported testing efforts in schools.

Accomplishments – During 2021, we were awarded two additional grants totaling \$3,720,835. The first additional grant awarded was COVID-19 Vaccine Response and totaled \$313,036. This grant’s

allowable activities included promoting and increasing COVID-19 and other vaccine uptake including personnel support, replace or repair LHD vaccine storage, and engage in existing community outreach. The second additional grant award was ELC Reopening Schools and totaled \$3,407,799. The grants allowable activities included testing supplies, personnel support, courier services, and laboratory support.

Our Epidemiology & Laboratory Capacity - COVID-19 grant increased from \$308,906 to \$701,900 enhancing efforts for contact tracing, enhanced testing, and vaccination activities across their communities, schools, child care programs and other vulnerable populations.

We hosted 139 COVID-19 vaccination clinics, with a total of 4,771 vaccinations given. We also provided 92 homebound vaccinations and 92 migrant vaccinations. We partnered with St. Lawrence County Correctional Facility, school districts, colleges, hospitals, and nursing homes to provide vaccination clinics for ease of access to the community. We were able to utilize 29 volunteers throughout the year. We collaborated with the IT department, Emergency Services Department and Cornell Cooperative Extension to utilize the Unified Command Vehicle 1 (UCV1) to provide outreach with COVID-19 immunizations to the migrant farms.

Challenges – Communication from the New York State Department of Health (NYSDOH) was not timely and did not always align with CDC guidance. Changes to the NYS Government also hindered communication from DOH to LHDs. In early 2022 cases remained high from the following fall, due to new variants and loosened mitigation measures. The response requirements on the departmental staff continued to take a mental and emotional toll, as the phone calls and expectations of the public remained high.

Focus for 2023 – We will continue to provide vaccinations in our clinic space. We will increase education provided to the community and provider’s offices. We will be working to re-build credibility with the community that was lost due to mistrust in government information. The public reporting of St. Lawrence county specific data ended in January 2023 as the remaining December 2022 information was reported out.

Community Health Education

Summary - Educates the public on a variety of health topics and concerns through presentations, activities and media; coordinates and leads a variety of preventive programs.

Accomplishments –The program has continued to provide vital information to the community on various health topics. One of the goals of 2022 was to enhance our social media presence by expanding into LinkedIn, Instagram, and YouTube. Due to the expansion into other social media platforms, the Department developed a Social Media Committee. The goal of this committee was to work on a strategic plan for 2023 which includes scheduling monthly topics, creating an approval process, developing standards for content, and evaluating the outcomes.

Challenge – Due to the COVID-19 pandemic and the majority of messaging in 2022 continuing to be about COVID-19, the public has lost sight of the many other programs SLC Public Health has to offer. It is essential in 2023, the other programs provided through the Department are highlighted.

Focus for 2023 – The Community Health Education goal for 2023 is to improve SLC Public Health's social media presence. Using data, the team will evaluate the program's performance, identify gaps,

and make changes as necessary. Ensuring educational materials reach the appropriate audience with relevant and accurate data will allow the Department to impact the health of the community. The majority of the social media content will focus on and highlight the programs offered outside of COVID-19.

Coroner Program

Category	Original Budget	Actual Budget
Personnel	\$44,110.00	\$45,931.21
Contractual	\$352,130.00	\$308,796.54
Benefits	\$89,556.00	\$81,205.07
Revenue	--	--
TOTAL	\$485,796.00	\$435,932.82

Summary - Responds to and determines, under certain circumstances, the manner of death of individuals within St. Lawrence County. There were a total of 280 deaths in SLC processed through the coroner program; 12 suicides, 30 due to/or related to drug and/or alcohol use, and 51 deaths were related to COVID-19. The loaded millage rate increased from \$2.00 per mile to \$2.50 per mile and transportation reimbursement rates increased dependent on in or out of county travel, on April 5th, 2022.

Accomplishments – An overall encompassing policy was created for the entire coroner program. The coroner expense sheets, reports, and cause of death records were imported into a Google Sheet for better multi-user accessibility when assigning case numbers. Additionally, a system was developed for tracking the funeral home for each case that removed the body from the scene to make it easier to identify missing invoices. Dr. Scott LaPoint began signing death certificates and doing autopsies for coroner cases on a more frequent basis.

Challenges - We have a rising cost due to transporting bodies to other area hospitals, as the medical examiner we previously was no longer taking cases from our county. Receiving timely documentation from one of our coroners continues to be a challenge, resulting in delays in autopsy completion. These reports are provided to the medical examiner to assist him in the autopsy process.

Focus for 2023- Dr. LaPoint became full time at St. Lawrence Health so our goal is to have him perform the majority of the autopsies in 2023. We will be setting new rates for transportation for funeral homes. It has been identified the department is lacking in contracts for existing partners and will be addressed in a timely manner. Another area of concern is the information collected on the Coroner Report and we will be working with Dr. Lapoint to update the form. We will also be looking into continuing education/training for the coroners, including a new coroner for 2023.

Emergency Preparedness

Summary - Provides guidance and coordination of preparation, response, and recovery activities related to emergency situations and events under the direction of New York State Department of Health and Center for Disease Control and Prevention .

Accomplishments – We continued to meet all Emergency Preparedness grant deliverables which included submitting quarterly reports, completing mandatory training and surveys, attending virtual

meetings with PHEP partners, and updating Public Health Emergency Preparedness plans. All staff have completed incident command training and psychological first aid . We continued to collaborate with County departments and outside partners who would be supporting our department during any Public Health emergencies.

Challenges – The COVID-19 pandemic created many challenges during 2020, 2021, and 2022 as Public Health staff were called upon to lead the COVID-19 vaccination clinics in addition to contact tracing and case investigation efforts. Many planned training sessions for the Emergency Preparedness program were postponed or canceled during the last two years. In 2022, the number of deliverables and virtual training increased as less time was being spent in the pandemic response. One of the challenges faced was shifting focus from COVID-19 response to recovery and reintroducing preparedness activities in the department, such as mandatory training and preparedness plan review.

Focus for 2023 – We will continue to develop and update necessary plans based on risk assessment in St. Lawrence County. This includes reviewing Emergency Preparedness plans, policies and procedures to incorporate ‘lessons learned’ throughout the COVID-19 isolation and quarantine protocols, supply distributions and vaccination distribution. We will also focus on restructuring our medical and nonmedical volunteer base and research forming a structured medical reserve corps to be called upon in the event of an emergency. Staff of the Public Health Department will continue to be required to participate in emergency preparedness training and drills in order to ensure that staff are able to appropriately respond during emergency situations.

Sanitarian

Summary – Provides environmental health education and technical assistance for public health concerns relating to rubbish, water quality, and septic systems.

Accomplishments – At the end of 2022, a new Sanitarian was hired. We continued to work closely with the NYSDOH District Office on issues within their jurisdiction.

Challenges – The Sanitarian position was vacated in 2021 and remained vacant for 12 months. Many of the calls received fell under the jurisdiction of Code Enforcement and were referred.

Focus for 2023 – We are working on the finalization of a County Sanitary Code in order to establish a framework for addressing public health nuisances. The Sanitarian will also focus on developing a health education program that will provide public education and presentations related to environmental health issues and concerns.

The current database used to track calls and complaints related to environmental health concerns is outdated and no longer meets the needs of the program. We are in the process of reviewing options for a more current and accessible system that would also allow online submission of complaint forms.

Children’s Programs

Early Intervention

Category	Original Budget	Actual Budget
Personnel	\$427,466.00	\$416,026.31

Contractual	\$223,096.00	\$195,216.15
Benefits	\$199,802.00	\$191,890.17
Revenue	\$(322,580.00)	\$(272,421.20)
TOTAL	\$527,784.00	\$530,711.43

Summary - The program supports and promotes the development of infants and toddlers (birth to 3 years of age) who have special needs related to developmental delays and enhances the capacity of families to meet these needs. There were a total of 270 billable initial and ongoing home visits, and 804 phone contacts made by service coordinators. We continue to provide most Service Coordination activities via telephone. In 2022, home visits were restarted for families with phone calls made prior to visiting to screen for COVID-19, for Intake and Individualized Family Service Plans (IFSP). Monthly contacts with parents continue to be primarily completed via phone calls.

Accomplishments - We hired 3 new service coordinators in 2022. They were successfully trained and were able to carry a caseload. In 2022, the average caseload was 139. We adapted our current procedures and forms to meet the needs of the program, including the creation of the NYEIS Issue Log to assist in timely billing. In 2022, a total of 199 new referrals were received and processed. Additionally, there were a total of 317 children and families served by the Early Intervention (EI) program in 2022.

Challenges - At the conclusion of 2022, there was a wait list of 41 children for speech services, 34 children for special instruction services, 1 child for occupational therapy services and 2 children for physical therapy service, for a total of 88 children. Families were provided the opportunity to have tele-therapy services or choose to have their child be put on a First Available Provider list and wait for in person services.

Focus for 2023 - We will work on program requirements to continue to ensure the annual performance measures meet state standards. We will be utilizing Pandadoc for obtaining parent signatures, electronically via their email. New service providers will be contracted to augment the services available to children of our county and assist with the EI wait list. New quality assurance data will be utilized to review documentation and enhance staff development and services. We will continue to encourage all Service Coordinators to pursue professional development, providing opportunities and time for growth.

Children and Youth with Special Health Care Needs (CYSHCN)

Summary - Provides resources and referrals to ensure access to healthcare, insurance, information and support for children ages birth to 21 years, who have (or may have) a serious or chronic physical, developmental, behavioral, or emotional condition. In 2022, there were 4 referrals. There are 9 staff who work or assist with the CYSHCN program, currently 4 staff are receiving training.

Accomplishments - Late in 2022 we received an increase in grant allocations with the requirement of a 0.5 full time position, which is being met with one of our Public Health Specialist positions. We continue to work with the Strong Center at University of Rochester, the Regional Support Center for our county, to obtain additional information for our CYSHCN families and support for our staff. We have provided information and resources to community members, school nurses, guidance counselors, day care providers, physicians and their staff. We provided phone contact and mailings to families in need of resources and information.

Challenges - Several new staff are training in CYSHCN and their other programs. Prior to new staffing, staff time allocation was a challenge, due to competing priorities.

Focus for 2023- We will continue to improve outreach to schools, physicians and daycares, as well as work to enhance community knowledge of resources for children and their families through these partnerships. We will start CYSHCN library story times at local community libraries.

Maternal Child Health

Summary - Educates new mothers during the immediate postpartum period on breastfeeding, postpartum self-care, and newborn care; offers a one-time nurse home visit for review of education and head-to-toe assessment of the newborn. In 2023, there were 9 referrals to the program and 3 home visits were made.

Accomplishments - In 2023 we successfully completed three home visits with families. This is an increase from 2022 where we weren't able to complete any home visits.

Challenges - Our staff continues to experience a lack of incoming referrals for MCH, despite outreach to the birthing hospitals within St. Lawrence County.

Focus for 2024 - Improve our relationship with the two birthing hospitals within St. Lawrence County, in order to increase the numbers of incoming referrals. Two MCH staff members are anticipated to complete their Certified Lactation Consultant course in 2024, which will expand the type of services that we can provide to new mothers. MCH staff will work to update program forms, education packet materials, as well as policies and procedures, in order to improve efficiency and allow MCH staff to focus on providing home visits, family education and resources.

Preschool

Category	Original Budget	Actual Budget
Personnel	\$126,296.00	\$120,086.66
Contractual	\$4,807,751.00	\$4,803,601.93
Benefits	\$56,791.00	\$46,916.76
Revenue	\$(2,913,375.00)	\$(1,721,383.75)
TOTAL	\$2,077,463.00	\$3,249,221.60

Summary - Coordinates for the provision of and payment for evaluations, education, remedial and therapeutic services, and transportation to services for children 2-5 years of age with developmental delays or disabilities to facilitate the child's education. The average number of students who attended the extended school year (July & August) was 158 and the average number of students attending the regular school year (Sept-June) was 185. The average number of First Student buses in 2022 was 1 for the extended school year (ESY) and 6.5 for the school year (SY); in 2021 there were 8 for ESY and 8.4 for SY. There has been a decrease in buses needed from First Student Bus Transportation (but an increase in cost per bus from the vendor). Most school districts are transporting their students. The average number of parents transporting in 2022 was 11 for ESY and 9 for SY; in 2021 there were 6 for ESY and 6 for SY. Transportation costs in 2021 were \$725,453 and in 2022 were \$720,130. Parent travel costs for 2021 were \$35,242 and 2022 were \$54,189.

Accomplishments – We were able to increase the total number of school district contracts from 2 to 15 to help provide Preschool transportation.

Challenges –New York State Education Department (NYSED) issuance of classroom tuition rates has been delayed due to delayed paperwork submission by school districts and delayed processing by NYSED. Delayed rates impact submission of our Automated Voucher Listings (AVL). The turnover of Preschool district staff has required training of Preschool documentation requirements.

Focus for 2023 – Department staff will continue to work with NYSED and school districts to receive necessary rates and information in order to process payments, claim AVLs and claim Medicaid. We will continue to look at alternative transportation options for the program. We will continue working to develop transportation contracts with all school districts. We will continue to work to maximize Medicaid claims for services.

Prevent Programs

Overall budget

Category	Original Budget	Actual Budget
Personnel	\$801,608	\$653,895.13
Contractual	\$518,325	\$458,946.76
Benefits	\$515,349	\$393,665.23
Revenue	\$(1,038,732)	\$(667,515.56)
TOTAL	\$796,550	\$838,991.56

Immunizations

Summary - This program provides immunizations for children, and adults, to decrease the incidence of vaccine preventable diseases; educates and provides resources to providers, schools, childcare centers, other partners, and the community at large. In 2022, we held 79 immunization clinics. We administered 946 vaccines in 703 individuals. Of the 946 vaccines administered 263 were VFC vaccines, 357 non-VFC vaccines, and 2 VFA vaccines. Our last clinic for 2022 was on 12/29/22.

Accomplishments - We were able to provide an in-house flu vaccine clinic to St. Lawrence County employees. We also were able to complete migrant worker clinics on 10/25/22, 10/26/22 and 12/14/22. During these clinics we visited 9 farms within St. Lawrence County and were able to provide 52 TDaP, 76 Influenza, 6 Hepatitis A vaccines to their migrant workers. Our staff also provided 7 TDaP and 9 Influenza vaccines to non-migrant staff, and 90 COVID-19 vaccinations overall. The cleaning and sanitation protocols for our clinics were maintained throughout the 2022 year. Danny Sekhon PharmD, MBA completed our pharmacy inspection in 2022, minor suggestions were provided, but no deficiencies were noted. An unscheduled Article 28 facility recertification audit was conducted in July 2022. Three deficiencies were identified, but were addressed in an accepted plan of corrections. The last Article 28 audit was completed in 2015.

Challenges - This fall there was an early surge in respiratory illnesses, including Influenza and COVID-19. Our department provided ample community education regarding the importance of Flu and COVID-19 vaccines, however community members seemed to be reluctant to receiving vaccination. The department also encountered three separate imminent threats to public health at the same time - COVID-19, polio, and monkeypox. This resulted in an increase of community clinics, outside of our regular schedule to ensure access to our residents. Our back-to-school clinics resumed in July. Coordination with the school nurses was routine to ensure that students did not become excluded from school. It was challenging to determine which students risked being excluded from school due to their need for additional immunizations. With the lack of staff, the increase of demands for all the vaccinations, and inability to get some of the vaccinations in the office, we did not host travel clinics. We continue to refer clients to Albany or Burlington in order for them to receive this vaccination; those referred out have chosen to go to that clinic to receive all their vaccinations.

Focus for 2023 - We will continue to administer COVID-19 vaccines at our regularly scheduled immunization clinics. We will work to increase outreach to local providers in an attempt to decrease the number of students being excluded from school due to their vaccination status prior to the 2023-2024 school year. Immunization Quality Improvement for Providers (IQIP) will continue to be a priority for the 2023-2024 grant year, requiring education and outreach to the providers identified by DOH. This is a required activity for SLCPH to promote and support the implementation of provider-level quality improvement strategies that are designed to increase childhood and adolescent vaccine rates consistent with the Advisory Committee on Immunization Practices' (ACIP) recommended routine immunization schedule. We will also continue to work with Cornell Cooperative Extension to offer additional migrant vaccine clinics for the 2023-2024 grant year. There is anticipation our department will be able to resume travel vaccine clinic services in 2023.

Lead

Summary- This program provides coordination to children who have been identified with Elevated Blood Lead Levels (EBLL). We work closely with healthcare providers and the NYSDOH Canton District Office to identify how the child was exposed to lead and to help the family lower the child's blood lead level. This year 14 children were diagnosed with the following EBLLs: 10 between 5-10 ug/dl, 3 between 10-15 ug/dl, 1 between 15-20 ug/dl, and 0 new cases between 20-45 ug/dl. St. Lawrence County testing rates in 2022 for all 1 year olds are at 45% and for all two year olds are 41%. On average, approximately 105 children are tested each month for lead. Throughout the year, a total of 1255 lead tests were conducted.

Accomplishments- The Lead Poisoning Prevention Program (LPP) began conducting joint inspections with the NYSDOH District Office for all new cases of children with EBLLs, further increasing collaboration between the two departments. The LPPP has worked hard to increase communication with local healthcare providers. We now regularly send out Lead Testing Report Cards and digital newsletters are disseminated to all healthcare providers and hospitals to keep practices up-to-date on the current lead poisoning trends across the county. The LPPP has also aimed to increase our social media outreach. Additionally, we issued various social media notices regarding product recalls due to lead poisoning hazards which reached a combined total of 15,003 views. Lead poisoning presentations were provided to the Community Health Center of the North Country, School Nurses, and Human Services. Posters of DIY lead-safe renovations, lead-safe guidance for landlords, and lead-safe guidance for Code Enforcement officers were provided to the President of the St.

Lawrence County Code Enforcement Officers as well as distributed to various hardware stores throughout the county. New educational outreach was created and provided to school nurses to assist them with ensuring all children enrolled in school have been screened for lead. The LPPP created new advertisements to promote the Housing and Urban Development (HUD) Lead Hazard Reduction grant.

Challenges- There were shifts in duties throughout the 2022 year due to vacancies. Some families are not cooperative with answering phone calls for follow-up, making care coordination difficult. Some providers still do not provide the information needed and requested for the best care of the children in the LPPP, or as required by New York State regulations. Additionally, it was discovered many providers were following Healthcare Effectiveness Data and Information Set (HEDIS) guidelines which require only one blood lead test by age 2 as opposed to New York State Law which requires one blood test at age 1 and again at age 2. This discrepancy may be a contributing factor to the chronically low blood lead testing rates across the county. Unfortunately, given the low blood lead testing rates and the age of the county's housing supply, it is possible there is a significant population of children with lead poisoning we are currently unaware of.

Focus for 2023- Education and communication with healthcare providers regarding the necessity of providing blood lead testing to children ages one and two years old will be the primary focus for 2023. This will be accomplished with public health detailing visits to providers, blood lead testing report cards, and digital newsletters. Families will receive a phone call, which includes a risk assessment and mailed educational materials, when a lead result is above 5µg/dL. Coordination with the Planning Department and Housing Council will continue for the HUD grant. Our practices, organization, and educational materials will morph to better suit the community and the associated challenges, including making our current education easier for anyone in the community to read and understand.

Housing and Urban Development (HUD)

Summary - Works in conjunction with the St. Lawrence County Planning Department and North County Housing Council to provide free lead-hazard remediation work to eligible households in St. Lawrence County.

Accomplishments – HUD Program educational materials were updated and re-vamped. HUD program postcards are sent to all children enrolled in the LPPP and are also sent to our Early Intervention program caseload. The HUD program continues to be advertised on our Facebook page, reaching upwards of 1,000+ people per month. The New York State Department of Health continues to provide education about the program while doing their environmental investigations.

Challenges – There were two complaints from homeowners who expressed frustration with the program and alleged poor construction practices. As a result, monthly meetings between St. Lawrence County Public Health, St. Lawrence County Planning, the North Country Housing Council, and NYSDOH Canton District Office resumed.

Focus for 2023 – We will continue to promote the HUD program, utilizing local sources of advertising including social media. We will continue education efforts on the dangers of lead poisoning and

coordinate a Lead Renovation, Repair, and Painting Program (RRP) course in conjunction with the Cornell Cooperative Extension.

Rabies

Summary - This program monitors animal bites, rabies exposures and post exposure treatment. There were 320 dog and cat bites reported this year. We continue to submit animals for rabies testing and the USDA submits animals for surveillance that have had no contact to humans or domestic animals. 183 animals were identified and submitted by PH and the USDA; 1 bat tested positive and 1 domestic cat that was bitten by a raccoon and not vaccinated was positive. 64 people were offered rabies post exposure treatment. The county's rabies clinics vaccinated 1,281 cats and dogs. In August, the USDA distributed oral rabies vaccine throughout St. Lawrence County.

Accomplishments - This year, two new (existing) staff were added to the rabies program, and 8 new staff were trained to answer the on-call staff phone. Program staff worked to update program forms, policies and procedures. In addition, staff worked to integrate Google applications, such as Sheets, Docs and Forms in an effort to streamline processes. 22 rabies clinics were held; 2 by Public Health and 20 by towns. We were able to create a positive relationship with the Akwesasne Animal Society, which resulted in assisting the Animal Society with two rabies clinics at the end of the year. These two clinics, in addition to all clinics hosted by towns and other partner organizations, were scheduled through the New York State Department of Health Countermeasure Data Management System (CDMS) which is the same system that is used during public health emergency or planned mass vaccination events, such as COVID or influenza vaccination events. This system requires individuals to register for an appointment online prior to the clinic. Individuals that do not have access to the internet were prompted to call the hosting organization or our department to assist with registration. Utilizing CDMS has reduced the amount of stress on the pets, owners and vaccination staff by reducing wait times and allowing staff to be better prepared for the clinic by seeing the number of registrations prior to the clinic. CDMS creates a rabies vaccination certificate that is emailed or emailed to participants following the clinic. This year we responded to a case of a positive rabid cat, which had contact with 7 people and 16 other animals. A local veterinarian and an animal control officer worked to vaccinate all 16 animals, and all 7 individuals received rabies post exposure treatment. No further spread occurred with the exposed individuals or pets. We continued to coordinate with the hospitals for rabies post exposure treatment and billing, and coordinate with area veterinarians for submitting animals for rabies testing as appropriate. Additional educational materials were created and made available to the community on the Department website and on social media. These materials promoted rabies clinics being held around the County, in addition to providing information regarding the prevention of rabies for humans, pets, and wild animals.

Challenges - The local hospital system changed their electronic health record (EHR) early spring causing a variety of issues for their staff and clients. Clients needing follow up Rabies Post Exposure Prophylaxis (RPEP) were having to return to the hospital ER because they were not able to be seen in the infusion room like years past. After months of working with the hospital and the outpatient clinics we were able to streamline the rest of the RPEP treatment to be completed at their off site walk-in clinic. Continuing to provide planning tools while maintaining open communication with towns was necessary for an effective pre-registration process, some towns had new staff and were concerned with the process.

Focus for 2023- Increasing cross training of staff for this program to have adequate coverage. We will continue to utilize CDMS and require the towns to participate to streamline the process. Update

training and provide to the towns about how to run the rabies clinics using the online process. We continue to work with the hospitals to facilitate coordination of RPEP.

Sexually Transmitted Diseases

Summary - Since the pandemic we continue to see a decline in the community using the STD clinic. In 2022 we focused on marketing our clinic on a variety of social media, newspaper and radio ads. We promoted COVID-19 and STD testing along with vaccinations for Hepatitis A, Hepatitis B Human Papillomavirus (HPV) and Jynneos Vaccine (for Mpox) . We continue to have a strong collaboration with the NYSDOH regional office in assisting clients and/or contacts with testing and treatment. In 2022, there were 237 cases of chlamydia reported, 28 cases of gonorrhea and 11 cases of syphilis.

	2022	2021	2020	2019	2018	2017
CHLAMYDIA	237	277	242	308	313	250
GONORRHEA	28	35	28	24	41	21
HEP A ACUTE	1	2	1	2	0	0
HEP B ACUTE	0	0	2	3	0	0
HEP B CHRONIC	11	16	7	7	9	9
HEP C ACUTE	7	3	3	3	4	7
HEP C CHRONIC	72	86	64	118	117	135
SYPHILIS	11	4	5	7	10	5
TOTAL	367	423	352	472	493	427

Accomplishments - We held 30 STD clinics throughout 2022. Twenty three people were screened for sexually transmitted infections. We continued to provide access to treatment for clients who were unable to afford it or were a contact to an STD and needed Expedited Partner therapy (EPT). We did targeting social media campaigns this year and focused on advertising to increase the number of people utilizing our clinic services. We made up safe sex kits with education, condoms and lubricant to be handed out at the Gouverneur County fair and community events. We held clinics at all four local colleges and weekly at SLCPHD clinic administering Mpox vaccinations to eligible populations. We provided 99 first doses and 78 second doses in September through December 2022

Challenges - No show appointments continue to be an issue for our clinic. Some of our social media ads were not well received by the community and we had to remove them. In July SLCPHD had one case of Monkeypox (Mpox). Concern was voiced from local healthcare facilities about appropriate PPE and testing for mpox. However, We had to work with the hospitals. Planned Parenthood and the colleges to assist with testing the targeted population at risk. As an article 28 facility we were tasked

with being prepared to provide testing for clients with Mpox. We worked with both NYS Wadsworth laboratory and Center for Disease Detection (CDD) to coordinate testing for our clinic.

Focus for 2023- With the increase in STDs across the state and country, we will continue to promote/educate our providers on the importance and use of EPT for chlamydia, gonorrhea and trichomoniasis treatment. Nationally there has been an increase in syphilis. We will continue to work with targeted high risk populations to provide access to care, and promote Hepatitis B, Hepatitis A, HPV and mpox vaccinations in the clinics. If we are unable to increase our number of patients seen for STD services, we will be looking to partner with Planned Parenthood for services.

Communicable Disease

Summary- A communicable disease is one that is listed in 10 NYCRR 2.1 or determined by the State Commissioner of Health to be communicable, rapidly emergent, or a significant threat to public health.

Accomplishments- A new position, Communicable Disease Specialist was created in the fall of 2022 to be able to focus solely on communicable diseases. We completed all required investigations.

Challenges- In 2022, there were 3 concurrent imminent threats to public health declared by the Commissioner of Health- COVID-19, polio, and monkeypox. This increased the amount of work required of staff doing surveillance, interviewing, outreach and education. The department also saw a large increase in gastrointestinal and arthropod illnesses requiring additional surveillance and interviews. Due to the mistrust the pandemic has created with public health officials, interviews have become longer as staff try to convince the afflicted individuals that the interview is important and necessary to prevent the spread of disease.

Focus for 2023- We are looking to hire a Public Health Specialist to assist with investigations, surveillance, and education. We would like to be able to offer more education to the community on the different illnesses and what they can do to protect themselves.

Tuberculosis (TB) Program

Summary- In November a person was identified as having active TB. SLCPHD staff completed an investigation and identified 7 contacts needing to be screened initially and in 8 weeks for TB. The client was found to have a multidrug resistant tuberculosis (MDR TB). With the concern of his MDR TB infection, 2 of the identified contacts were recommended to have prophylactic treatment to prevent a TB infection.

Accomplishments- Coordination with NYSDOH and TB consultant was excellent and resulted in the best care possible for our patient. We were also able to consult with the New Jersey Global Tuberculosis Institute.

Challenges- The treatment of TB requires direct observed therapy (DOT), visual confirmation the individual has taken the TB medication daily. During the month of December the client was hospitalized and DOT was done by hospital staff. The 2 contacts were monitored with DOT for two weeks, then the SLCPHD staff were able to transition to electronic DOT (eDOT), where we used "Whatsapp" to watch the clients take their medication. The medication to treat MDR TB is not commonly used or stocked at local pharmacies, even with insurance the PH staff had difficulty obtaining the medications.

Focus 2023- When a client has MDR TB, the treatment can take longer than the usual 6-9 months as the bacteria does not respond quickly. It is unknown how long the client will be contagious and need to continue with treatment. As long as the client is infectious we are required to complete DOT 7 days a week in person. Once the client's sputum is no longer infectious we will be able to provide DOT 5 days a week and transition to eDOT on weekends.

Community Health Assessment and Community Health Improvement Plan (CHA/CHIP)

Summary - The St. Lawrence County Community Health Improvement Coalition, Bridge to Wellness, is an active committee with fifty-four participating organizations, including public health, higher education, hospitals, health centers, and community-based organizations. The St. Lawrence County Health Initiative, Inc. and the Local Public Health Department facilitate meetings. Partners work collaboratively to plan, implement, and oversee the St. Lawrence County Community Health Improvement Plan and Hospital Community Services Plans. Based on the Community Health Survey conducted by the Fort Drum Regional Health Planning Organization, regional needs are identified that guide a strong data-driven health improvement plan for St. Lawrence County. The community health survey is incorporated into a Community Health Assessment using New York State and local data sources.

Accomplishments - 2022 was a planning year for the new Community Health Improvement Plan. The Bridge to Wellness Coalition, along with the SLCPHD and local hospitals, brought the community partners together to review the Community Health Assessment and other local data to determine priority areas of the New York State Prevention Agenda to complete the Community Health Improvement Plan. The Nutrition and Physical Activity Committee and the Mental Health and Substance Use Committee of the Bridge to Wellness Coalition completed the planning. SLCPHD was responsible for organizing and facilitating these monthly meetings.

Based on the Community Health Assessment and our region's capacity, Bridge to Wellness Committees identified Prevent Chronic Disease and Promote Well-Being and Prevent Mental and Substance Use Disorders as priorities for the new 2023 Community Health Improvement Plan (CHIP). Based on the NYS Prevention Agenda and a thorough review of the county's needs, Bridge to Wellness chose to focus on the following areas:

- Improving healthy eating and food security
- Physical activity
- Tobacco Prevention
- Preventative care and management
- Preventing mental health and substance use disorders

Challenges - With 2022 being a planning year for the Community Health Improvement Plan, the biggest challenge was making sure the focus areas and goals of the Community Health Improvement Plan aligned with the data and our partner's capacity to do the job. The committees' work allowed a wide range of partners to be at the planning table to ensure the Coalition could complete the goals. An additional challenge was interpreting the data. With the addition of a New York State Public Health Corps Fellow, Community Health Epidemiologist, data were analyzed and data-driven goals were recommended.

Focus for 2023 - SLCPHD staff will actively participate and assist in leading the Bridge to Wellness Coalition and Committee meetings. The SLCPHD team will assist in developing agendas, scheduling and facilitating meetings, and taking minutes. The Department will also help the Coalition ensure the Community Health Improvement Plan goals are met by supporting activities, collecting data, and evaluating progress.

Opioid Response Grant

Summary– The SLCPHD was awarded \$75,000 for a three-year grant ending in August 2023. Goals have been focused on obtaining accurate and timely overdose data using the Overdose Detection Mapping Application Program (ODMap) system; providing education to various populations in the community surrounding stigma, language, harm reduction, and harm reduction training; and educating the public as a whole on Narcan, the Good Samaritan Law, and the Partners 4 Substance Use Prevention Coalition.

Accomplishments– Through our PSA campaign with local TV and radio stations, we continued to provide education regarding Narcan/how to become Narcan Trained, and the Good Samaritan Law. To make Narcan more available in the community, Naloxboxes were placed in five county buildings. These boxes contain Narcan to be used in the event of an overdose and for general community members to take if in need of Narcan. This year, the Public Health staff worked with three local overdose prevention partners to record new PSAs to educate the community on services available in St. Lawrence County. These PSAs were shared on the Public Health YouTube Channel, the Partners for Overdose Prevention website, and local radio stations. Overdose data continued to be monitored through the OMDAP surveillance system. SLC Public Health staff worked with ODMap, High Intensity Drug Trafficking Areas (HIDTA), SLC Sheriff's Office, and SLC Addiction Services to ensure overdoses were inputted into ODMap within 24 hours. This data was used to alert the public of spike alerts (3 or more overdoses in a 24-hour period).

Challenges- With the loss of an overdose prevention grant and the continuation of COVID-19 responsibilities, it was challenging to ensure the work of the Overdose Data to Action (OD2A) grant was completed.

2023 Focus– 2023 is the final grant year of the Overdose Data to Action grant. The focus of this year will be working with the NYSDOH and other county agencies on a sustainability plan. We will continue expanding community awareness of the Partners for Overdose Prevention and activities associated with the OD2A grant through the Partners for Prevention website and Public Health social media platforms. We will also be working to promote many St. Lawrence County treatment and recovery resources within the community through PSAs featuring the agency(s) that directly provide services. Overdose Data collection will continue to be a priority by collaborating with organizations to obtain overdose data from all sources. We will continue marketing Narcan training and educating the community about Good Samaritan Law.