



St. Lawrence County Public Health Department

80 State Highway 310, Suite 2 ▪ Canton, New York 13617-1476

Phone: (315) 386-2325 ▪ Fax: (315) 386-2203

2023 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 2023. As the year progressed, we adapted to meet the demands and challenges with the pandemic, including resuming 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 2023.

2023 Overall Original Budget

CATEGORY	ORIGINAL APPROPRIATIONS	ACTUAL EXPENDITURES	PERCENT USED
PERSONNEL	\$2,372,285	\$1,938,296	81.7%
EQUIPMENT	\$534,4186	\$514,6674	96.3%
CONTRACTUAL	\$7,536,075	\$5,904,2370	78.3%
EMPLOYEE BENEFITS	\$1,262,590	\$1,011,6760	80.1%
REVENUE	\$(7,547,012)	\$(4,534,591)	76.4%
TOTAL	\$4,158,356	\$4,834,285	116%

During 2023, several positions were open either due to not yet being filled, organizational modifications, and resignations. There was an average of 3-5 positions vacant throughout each quarter. We have particularly struggled to fill vacant nursing positions. With many staffing changes within the department over the last three 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.

2023 Quarterly Snapshot

CATEGORY	Q1	Q2	Q3	Q4
Personnel	\$460,745	\$530,0313	\$441,7369	\$505,7830
Equipment	\$2,313	\$512,354	\$0	\$0
Contractual	\$734,878	\$2,001,5517	\$1,443,274	\$1,724,534
Benefits	\$236,212	\$275,662	\$235,1676	\$264,634
Revenue	\$(75,428)	\$(2,483,601)	\$(1,975,563)	\$0
NET COST	\$1,358,721	\$835,9984	\$144,614	\$2,494,951

Q1

Personnel - We are at 21.5% of our budget. We had a Public Health Specialist position vacant for all of Q1.

Contractual – We purchased a new Unified Command Vehicle, which was delivered on the last day of Q1. We also purchased new computers for our NYS Public Health Corps Fellows.

Benefits – N/A

Revenue – The majority of 1st quarter revenue was not received until the second quarter reporting due to our grant vouchers and state aid not submitted until after the quarter ends as required.

We projected an estimated \$80,000 in the first quarter from our Programmatic Grants. We expected 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 was 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 was approximately \$390,000.

Q2

Personnel - We were at 47.1% of our budget. A Public Health Specialist was hired in May.

Equipment - We purchased a new Unified Command Vehicle that was delivered on the last day of Q1.

Contractual – We expended 48.3% of our overall contractual budget: Admin = \$40,798 (74.9%) Travel expenses have increased due to out of County travel - Coroners = \$79,073 (25.1%) - Early Intervention = \$128,130 (55.2%) Promotional items for our CYSHCN Grant & parent transportation - Preschool \$2,028,077 (47%) with the three major contractual expenses being transportation, tuition, and related services - Prevent \$460,351 (60.6%) Purchased items for our new EHR & travel expenses related to our TB program.

Benefits – N/A

Revenue – We have received 48% of our revenue. We estimated a total of \$250,000 in grant revenue for the 2nd quarter. Our estimated 2nd quarter State Aid was \$275,000.

Q3

Personnel – We were at 66.7% of our budget. We had the following positions vacant: Community Health Nurse, Public Health Sanitarian, Senior Account Clerk, and (2) Keyboard Specialists

Equipment - We expended 99.7% of our budget. We paid for a Unified Command Vehicle during the 2nd quarter.

Contractual – We spent 56.3% of our overall contractual budget: Admin = \$41,302 (75.8%) - Coroners = \$136,694 (43.4%) - Early Intervention = \$211,233 (91%) Increase in children receiving services & parent transportation - Preschool \$2,823,829 (65.4%) with the three major contractual expenses being transportation, tuition, and related services - Prevent \$423,254 (90.2%) Expenses related to our TB program, increased vaccine pricing, and overall increase in costs.

Benefits – N/A

Revenue – We received 64.6% of our revenue. We estimated a total of \$824,450 in grant revenue for the 2nd quarter. Our estimated 3rd quarter State Aid was \$275,000.

Q4

Personnel – We were at 81.7% of our budget. We had the following positions vacant: Director, Public Health Nurse, Community Health Nurse, Public Health Sanitarian, and a Keyboard Specialist.

Equipment - No major equipment purchases were made in the 4th quarter.

Contractual – We have expended 78.3% of our overall contractual budget: Admin = \$55,748 (92.2%) - Coroners = \$240,052 (76.2%) - Early Intervention = \$268,793(97%) with an increase in children receiving services & parent transportation - Preschool \$4,146,931 (96.6%) with the three major contractual expenses being transportation, tuition, and related services - Prevent \$513,151 (97.8%) with increase in expenses related to our TB program, increased vaccine pricing, and overall increase in costs.

Benefits – N/A

Revenue – We received 76.4% of our revenue. We had an estimated \$160,000 in grant revenue for the 4th quarter. Our estimated 4th quarter State Aid was \$200,000

2023 Unit & Program Review

Administration

Category	Original Budget	Actual Budget
Personnel	\$350,327	\$316,182.51
Contractual	\$60,484	\$48,805.06
Benefits	\$167,081	\$136,428.55
Revenue	\$(240,100)	\$(219,625.62)
TOTAL	\$337,792	\$281,790.50

Accomplishments – Staff continued a strong response in the 3rd year of the pandemic, working as a whole unit on various activities. The Deputy Director stepped into the Interim Director position in October 2023 and held both positions concurrently through the end of the year. The Department continued the partnership with the New York State Public Health Corps Fellows program and filled seven of the nine 100% grant funded positions, five within the Department, two placed with the St. Lawrence Health Initiative, Inc and two with the Seaway Valley Prevention Council. One Department fellow position was filled and two Seaway Valley Prevention Council positions were filled in 2023. 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 - It has been a struggle to recruit and retain staff, especially nurses. Fiscally, with the increased grants and lack of staff, it was difficult to keep up with different requirements and reporting deadlines for each grant.

Focus for 2024– 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 increased by 4 since the start of 2020. This, combined with the reduction in staff, increased the workload of the remaining staff.

Focus for 2024 – 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 GRANTS

Category	Original Budget	Actual Budget
Personnel	\$266,592	\$179,268.90
Equipment	\$523,418	\$514,666.78
Contractual	\$1,987,773	\$485,037.70
Benefits	\$94,823	\$58,168.65
Revenue	\$(2,872,606)	\$(1,791,519.84)
TOTAL	\$0	\$(554,377.81)

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 – In 2020 we were awarded the Epidemiology & Laboratory Capacity (ELC) - COVID-19 grant which was originally \$308,906 but was subsequently increased to \$701,900 to enhance contact tracing efforts, testing, and COVID-19 vaccination activities across their communities, schools, child care programs and other vulnerable populations. This grant is set to end July 31, 2024.

During 2021, we were awarded three additional grants. The first was COVID-19 Vaccine Response grant which totaled \$313,036. This grant’s allowable activities included promoting and increasing COVID-19 and other vaccine uptake including personnel support, replace or repair vaccine storage, and engage in community outreach. The second additional grant award was the ELC Reopening Schools grant and totaled \$3,407,799. The grants allowable activities included testing supplies, personnel support, courier services, and laboratory support. This grant ended in the summer of 2023. The third grant awarded was the New York State Public Health Corps Fellows grant, which totaled \$1,532,660. This funding started to be spent in 2022 with the hiring of seven of the nine 100% grant funded positions, five within the Department, two placed with the St. Lawrence Health Initiative, Inc and two with the Seaway Valley Prevention Council. One Department fellow position was filled and two Seaway Valley Prevention Council positions were filled in 2023.

We hosted 89 COVID-19 vaccination clinics, with a total of 421 vaccinations given. We also provided 63 migrant vaccinations. We collaborated with the IT department, Emergency Services Department and Cornell Cooperative Extension to utilize the Unified Command Vehicle to provide outreach with COVID-19 immunizations to the migrant farms.

In May 2023 the COVID-19 Emergency Declaration ended.

Challenges – There was uptake of the 2023 COVID-19 vaccine formulation at our clinic. However, largely the community response around COVID-19 information and vaccination was met with disinterest, despite the high number of influenza like illness rates.

Focus for 2024 – 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.

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 -With many communities continuing to open up since the start of the COVID-19 pandemic, the SLCPHD staff was able to return to in-person community events. The department conducted approximately 45 community outreach events that included presentations, wellness fairs, and educational sessions. The Health Educator and Public Health Specialists began to reach out to other county departments and community-based organizations to strengthen collaborations. The Community Health Educator, Public Health Specialists, and Communications Specialist began meeting on a regular basis to coordinate health education efforts within the Department. The Community Health Educator participated in the Employee Assistance Committee and assisted in educating SLC employees on various health topics. The Educator helped plan the County Wellness Fair, Walkathons, and developed 4 newsletter issues that were distributed to County employees.

Challenge – One of the biggest challenges was ensuring the Department is reaching the appropriate audiences. Oftentimes, the individuals that benefit the most from health education are the hardest to reach.

Focus for 2024 – The Community Health Education goal for 2024 is to continue to strengthen collaborations with other county departments and community-based organizations to expand health education. Using data, the team will evaluate the program's performance, identify gaps, and make changes as necessary in concert with the department’s strategic plan.

Coroner Program

Category	Original Budget	Actual Budget
Personnel	\$47,709	\$49,068.50
Contractual	\$303,671	\$283,374.67
Benefits	\$81,858	\$72,828.20
Revenue	\$0	\$0
TOTAL	\$433,238	\$405,271.37

Summary - Responds to and determines, under certain circumstances, the manner of death of individuals within St. Lawrence County. There were a total of 265 deaths in SLC processed through the coroner program.

Accomplishments – Dr. Scott LaPoint began signing death certificates and doing autopsies for coroner cases on a more frequent basis in 2022. In 2023, Dr. Lapoint conducted 86 autopsies, 4 were sent out-of-county while he was on vacation, for a total of 90 autopsies. The majority of our cases are being autopsied and having death certificates signed by Dr. LaPoint. Coroner Stephen Cary began January 1, 2023 and has proven to be an asset to our program, with him responding to 31.5% of the cases.

Challenges - We have continued to have rising costs due to increases in the number of deaths in the county attended to by our coroners. However, we have paid less in travel expenses, due to Dr. Lapoint performing the majority of our autopsies in-county. Receiving timely documentation and reporting of deaths from one of our coroners continues to be a challenge, resulting in delays in autopsy completion, reports, and paid invoices. Dr. LaPoint inconsistently sends autopsy reports on a timely basis, this will continue to be addressed.

Focus for 2024 - To ensure all relevant contracts are signed, as well as review the information collected in the Coroner Report, we will be working with Dr. Lapoint to update the form. The coroners will attend continuing education/training. We will begin reporting coroner data to the Board of Legislature's on a more regular basis.

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 and conducting meetings with PHEP partners, and updating Public Health Emergency Preparedness plans, such as the Continuity of Operations Plan, the Pandemic Plan, and the Volunteer Management Plan (within the Public Health Emergency Preparedness and Response Plan). The Emergency Preparedness Coordinator participated in the Hazard Vulnerability Assessments at the local hospitals to assist in the identification of gaps in preparedness. The Emergency Preparedness Coordinator also went to the local hospitals during staff education events to provide education regarding ServNY- New York State's volunteer management program. In addition to the two FEMA courses and Psychological First Aid course that all SLCPHD staff are required to take, all Public Health staff completed an additional FEMA course (IS 800.D: A National Response Framework, An Introduction" that will now be mandatory for all staff to complete upon hire. Staff also completed the "Stop the Bleed" training in October, along with a fire extinguisher training.

The Emergency Preparedness Coordinator completed her New York State Public Health Essentials Certificate through Cornell University, and has also completed training to become a level 1 Certified Healthcare Emergency Coordinator through the National Disaster Life Support Foundation and Augusta University Medical College of Georgia. In January of 2023, the Emergency Preparedness Coordinator and the Maternal-Child Health Nurse were selected to participate in a Virtual Learning Collaborative through the National Association of City and County Health Officials (NACCHO.) The Collaborative focused on integrating the specific needs of the Maternal-Child Health populations into emergency preparedness planning. For participating in the collaborative, the two staff members were granted scholarships to attend a Maternal-Child Health/ Emergency Preparedness and Response tabletop and the NACCHO National Preparedness Summit during April of 2023 in Atlanta, Georgia. In November of 2023, the Emergency Preparedness Coordinator applied for and was granted a full scholarship award through NACCHO to attend next year's National Preparedness Summit and participate in a pre-summit Rural Emergency Preparedness Workshop in Cleveland, Ohio for a second consecutive year.

The Emergency Preparedness program was selected to participate in a Climate and Health Adaptations Project through the New York State Association of County Health Officials (NYSACHO.) NYSACHO granted the Department with \$3,000.00 to fund the Climate and Health Adaptation project: “Battling Extreme Heat in St. Lawrence County” where staff and partners worked to increase equitability of cooling centers and increase community awareness regarding the impacts of extreme heat on health. This project was presented by the Emergency Preparedness Coordinator on a New York State Department of Environmental Conservation webinar, and permission has been granted to NYSACHO to share the project information to a broader audience, which includes but is not limited to other local health departments across New York State, to the public on social media during NY Climate Week, and to UAlbany to be presented to public health undergraduate students. We continued to collaborate with County departments and outside partners who would be supporting our department during any Public Health emergencies, including resuming the monthly St. Lawrence County Health Emergency Preparedness Coalition meetings.

Challenges – From late 2019 to 2022, many identified challenges for the program revolved around pandemic response. As the Emergency Declaration ended in May of 2023, many SLCPHD Emergency Preparedness activities have gone back to pre-pandemic state. The number of deliverables as provided by the grant have returned to normal, and we began to see the number of in-person trainings and meetings increase this year. One of the challenges faced was continuing to engage partners, staff and the community in emergency preparedness activities. We have begun shifting focus from recovery (completing inventory, reviewing processes during the pandemic, etc.) to preparing for the future.

Focus for 2024 – In 2024, we will continue to develop and update necessary plans based on risk assessment in St. Lawrence County. We will work more on integrating special needs populations into our plans, and reconnect with our partners in order to conduct more group exercises and drills in the County. We plan to do more events in the community to provide education about community preparedness, and will continue to look for projects to promote climate change and health adaptations.

Sanitarian

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

Accomplishments – Despite the position being vacant for the last nine months of the 2023, we handled 107 calls/complaints. We continued to work closely with the several partners on issues within their jurisdiction.

Challenges – The Sanitarian position was vacated when the staff person transitioned to a different role within the department in April 2023 and remains unfilled. Concerns were handled by staff in other positions. Many of the calls received fell under other jurisdictions and were referred to appropriate contacts.

Focus for 2024 – We hope to be able to fill the vacant Sanitarian position. We are working on the finalization of a County Sanitary Code in order to establish a framework for addressing public health nuisances. 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 will continue to review

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	\$439,687	\$467,901.04
Contractual	\$281,948	\$281,942.15
Benefits	\$214,576	\$223,388.90
Revenue	\$(333,446)	\$(314,967.86)
TOTAL	\$602,765	\$658,264.23

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.

Accomplishments - In January 2023, EI Service Coordinators started to use the electronic signature program, Pandadoc, to obtain parental signatures via e-mail to speed up turn around times. In March, we underwent a Municipal KEPRO audit. There was turn over of one service coordinator during the year.

In 2023, there were a total of 218 children referred to the EI program. There were a total of 347 home visits, and 862 phone contacts made by service coordinators. We continue to provide Service Coordination to each family with phone calls made prior to visiting to screen for COVID-19, illness. In person visits are planned for Intake and Individualized Family Service Plans (IFSP). Monthly contacts with parents continue to be primarily completed via phone calls. In June, we had a high of 179 total children on caseload. Starting in July service coordinators were required to fill out Child Outcome Summary forms for every qualifying child through the end of September. Additionally, in September, our Keyboard Specialist took another job, but we were able to hire another Keyboard Specialist in December.

Challenges – At the conclusion of 2023, there was a wait list of 38 children for speech services, 21 children for special instruction services, 1 child for occupational therapy services and 4 children for physical therapy service, for a total of 64 children. Families were provided the opportunity to have tele-therapy services when in person services were not available. There were challenges of training new staff, while still performing regular work duties.

Focus for 2024 –We will work on program requirements to continue to ensure the annual performance measures meet state standards. We will continue utilizing Pandadoc for obtaining parent/guardian signatures, electronically via their email. We will look to contract with additional service providers to augment the services available to children of our county and assist with the EI wait list. We would like to have a Speech Pathologist and Special Instruction provider on staff with Public Health to enhance service provision. 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 2023, there were 11 referrals. There are 9 staff who work or assist with the CYSHCN program, currently 5 staff are receiving training.

Accomplishments - In 2023 we hired a 0.5 FTE position, shared Public Health Specialist position. The addition of this position has allowed for planning additional outreach and educational events. We were able to complete several story hours to local libraries who responded to our request, where information on the EI and CYSHCN programs are shared with the community. 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 and community members in need of resources and information. Our Children's Programs Newsletter has seen increased distribution through emails and paper copies at community/ public locations such as Libraries, Daycares, Department of Social Services and the Human Services Building.

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 2024– 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 plan to have several community workshops and our Transition event in 2024 will provide families and the community an opportunity to receive information on a variety of topics as their child becomes an adult.

Maternal Child Health

Summary - Educates new parents during the immediate postpartum period on breast/chestfeeding, 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 2022 there were 10 referrals received and in 2023 we received 24 referrals to the program. Of those 24 referrals, 9 home visits were completed and 10 telephone interviews were completed. All 24 referrals received a Congratulations Parent Packet with educational resources as well as community resources.

Accomplishments – New Public Health Nurse staff trained in the MCH program and a Public Health Specialist. New educational materials were created including two New Program Flyers, a Parent's Reference Guide, Postpartum Mood Disorders Fact Sheet. The MCH Referral Spreadsheet was moved into Google Drive. A Self- Referral Form was created for new parents to fill out themselves. Worked with surrounding birthing facilities to increase awareness of the program to increase referrals received.

Challenges – During the early stages of the COVID-19 Pandemic when MCH home visits were stopped. As a result, getting Hospital Birthing Centers to send over MCH Referrals has been a challenge. Staffing changes is another obstacle the MCH Program is facing. With the loss of a Public Health Nurse, and the Public Health Specialist out on maternity leave, the amount of time being dedicated to MCH Program has decreased due to competing priorities.

Focus for 2024 – We plan to increase outreach to the community through social media posts and having the local Birthing Centers promote the MCH program. Additionally work to increase the number of referrals received, home visits and telephone interviews. As well as work with quality assurance staff to update forms, policies, procedures and create a program manual. Another focus for 2024 is for the MCH program staff to become Certified Lactation Consultants.

Preschool

Category	Original Budget	Actual Budget
Personnel	\$128,012	\$113,046.51
Contractual	\$5,395,008	\$5,347,858.71
Benefits	\$60,754	\$41,396.38
Revenue	\$(3,582,000)	\$(2,742,777.20)
TOTAL	\$2,001,774	\$2,759,524.40

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 134 and the average number of students attending the regular school year (Sept-June) was 174. The average number of First Student buses in 2023 was 5 for the extended school year (ESY) and 5 for the school year (SY); in 2022 there were 1 for ESY and 6.5 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 2023 there were 9 for ESY and 6 for SY. Transportation costs in 2022 were \$720,130 and in 2023 were \$853,102. Parent travel costs for 2022 were \$54,189 and 2023 were \$51,267.

Accomplishments – We have maintained contracts with 15 school districts for 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 on Preschool documentation requirements for submission.

Focus for 2024 – 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	\$882,151	\$841,120.36
Contractual	\$531,116	\$530,769.57
Benefits	\$525,681	\$477,522.37
Revenue	\$(1,155,888)	\$(1,013,186.97)
TOTAL	\$783,060	\$836,225.33

2023 Clinic Revenue		
	Projected	Actual
Immunizations		
Self Pay	(\$5,000)	(\$6,365)
Medicaid	(\$200)	(\$273)
Medicare	(\$500)	(\$69)
Private Insurance	(\$40,000)	(\$47,622)
PPD (TB Skin Test)	(\$1,000)	(\$990)
Travel Immunizations	\$0	(\$2,815)
Total	(\$45,700)	(\$58,134)

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 2023, we held 110 immunization clinics. We administered 1343 vaccines in 963 individuals. Of the 1343 vaccines administered 463 were VFC vaccines, 829 non-VFC vaccines, and 7 VFA vaccines.

Accomplishments - We transitioned to a new Electronic Medical Record(EMR), Patagonia, successfully. The staff have found it user friendly and collects the information needed for providing immunizations as well as STI services and appropriate billing for care. Danny Sekhon PharmD, MBA completed our two pharmacy inspections in 2023 no deficiencies were noted.

In collaboration with Cornell Cooperative Extension we completed two vaccination clinics at multiple farms within our county. Vaccinations offered were COVID-19, Influenza, Tdap, TD and Hepatitis A. One on at the end of November and a second at the beginning of December.. On the first day we visited 4 farms, vaccinated a total of 88 people and they received 187 vaccines. On the second day we visited a total of 3 farms, vaccinated 36 people and they received 81 vaccines. The clinics were well received and the farms are planning on us returning in 6 months. A separate clinic was held at

Leithead Field House on St. Lawrence University, Flu vaccinations were provided for county employees during the EAP fair in October. PH staff were able to start the travel clinic back up once we submitted all the required documentation to NYSDOH.

Challenges - Two nurses resigned who had been with the department around a year, one of which was the Immunization Coordinator. This impacts our education, outreach and vaccination efforts required by the IAP grant. One left during the back to school clinics the other left when we were completing migrant clinics. Our back-to-school clinics resumed in July. Coordination with the school nurses was routine to ensure students did not become excluded from school. It continues to be challenging to determine which students are at risk of being excluded from school due to their need for additional immunizations

Again this fall there was an early surge in respiratory illnesses, including Influenza (Flu), Respiratory Syncytial Virus (RSV) and COVID-19. Our department continues to provide community education regarding the importance of Flu, RSV and COVID-19 vaccines, through a variety of media outlets. In the fall COVID-19 vaccines were no longer being supplied by CDC, so public health had to purchase the vaccine for those who did not qualify for other programs.. In September Dr. Christopher Comeau resigned as our Medical Consultant and Dr. Zachary Mashaw was appointed as the new Medical Consultant. Getting an account set up with Moderna took weeks to correct with our new provider. The cost of 10 vials of Moderna was \$1,156.40, we did not plan for this in our budget and did not want to order more than we would use. The demand was high during November and December. We provided 261 Covid-19 vaccinations. PH staff worked with NYSDOH to submit required documents to receive the yellow fever stamp, this took about 12 weeks. We received it around August and then our Medical consultant retired and we had to go through the process again to change to our new medical consultant.

Focus for 2024 - 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. We will routinely hold travel clinics monthly and provide Yellow Fever, Typhoid, Hepatitis A, Hepatitis B and Polio.

Lead

Summary- This program tracks and monitors children who have been identified with Elevated Blood Lead Levels (EBLLs). We work closely with healthcare providers and the New York State Department of Health (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 23 children were diagnosed with the following EBLLs: **20** between 5-9.9 ug/dl, **2** between 10-14.9 ug/dl, **0** between 15-20 ug/dl, and **1** between 20-45 ug/dl. St. Lawrence County testing rates in 2022 for all 1-year-olds are 45% and 52% for all two-year-olds. On average, approximately 118 children are tested each month for lead. Throughout the year, a total of 1411 lead tests were conducted.

Accomplishments- Trend Lines show there has been an overall increase in the number of lead tests conducted in St. Lawrence County. This is an accomplishment, as NYS law requires all 1 and 2-year-olds to be tested for lead at Well Child Checks. In March, New York State issued new Guidelines for Local Health Department Follow-up of Children with Elevated Blood Lead Levels for the Lead Poisoning Prevention Program. As a result, the SLCPHD Lead Program updated all Policies and Procedures to align with the new state guidance. The CLPPP has worked hard to increase communication with local healthcare providers. The Lead Program Coordinator personally visited each Pediatric Office in February and again in August. At each visit, offices had the opportunity to ask any questions they might have. They were also provided with educational materials, report cards, and Newsletters specific to lead poisoning trends in our county. The CLPPP has also aimed to increase our social media outreach. We issued various social media notices regarding lead poisoning prevention information along with product recalls throughout the year, which reached a combined total of 38,215 views.

Using funds from the Housing and Urban Development Grant, the CLPPP hosted a series of trainings aimed at construction contractors and Code Enforcement Officers to better address lead poisoning hazards during home renovations. On March 14, an EPA Renovation, Repair, and Painting (RRP) Contractor training was held in the Large Conference Room. Because of the demand, a second RRP course was held on March 31, 2023. A total of 13 individuals became EPA Lead-Safe Certified Contractors. In May, CLPPP staff offered a Code Enforcement Officer training focused on lead hazards and prevention. The training was conducted by 4-Leaf, Inc & Monarch Residential and offered Continuing Education Credits to CEOs in St. Lawrence County. A total of 16 Code Enforcement Officers attended the training. Lastly, a Lead Detailing Program was created and a Public Health Fellow began conducting Lead Detailing Visits at pediatric offices.

Challenges- Consistent with last year, there were shifts in duties throughout the 2023 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 CLPPP, or as required by New York State law. Additionally, at the start of this year, 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. Additionally, having pediatric providers maintain their patient lists in NYSIIS has been an obstacle. Per NYS DOH the way our lead testing rates are calculated are based on the number of children listed at each pediatric provider's office. When patients move away, unless the HCP marks the patient as "inactive" the child will continue to count as "criteria not met" which ultimately lowers the lead testing rate score for that Provider as well as the county as a whole.

Focus for 2024- Education and communication with healthcare providers regarding the necessity of blood lead testing of children ages one and two years old will be the primary focus for 2024. This will be accomplished with public health detailing visits, blood lead testing report cards, and assistance with maintaining patient lists in NYSIIS. CLPPP staff also aims to focus on getting providers to complete all of the assessments required for Health Care Provider Management for Children with Elevated Blood Lead Levels which includes lead risk reduction education, physical and neurological exam, nutritional counseling, laboratory tests to evaluate iron status, and development assessments.

Currently, health care provider's do not provide proof these assessments have been completed for new cases and the tasks ultimately fall on Public Health to do so. To address this, CLPPP staff has updated the cover page that we fax to providers for all new CLPPP cases requesting providers verify required tasks have been completed. We will also begin making phone calls requesting providers complete these forms. Ideally, CLPPP would like to provide lead poisoning prevention trainings to pediatric providers. If available, we would like to invite Dr. Travis Hobart from the State Regional Office to provide the trainings, as we feel the guidance will have more impact coming from a fellow medical doctor.

Housing and Urban Development (HUD)

Summary - Worked 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. This grant officially ended in October, 2023.

Accomplishments – HUD program postcards were sent to all children enrolled in the LPPP and were also sent to our Early Intervention program caseload. The HUD program was advertised on our Facebook page and reached upwards of 1,000+ people per month. The New York State Department of Health also provided education about the program while doing their environmental investigations.

Challenges – As the grant was coming to a close, a number of families expressed an interest in applying for the grant and were unable to do so. It was not until the grant was in the final few months that the program began to take off and become successful.

Focus for 2024 – The Planning Department and the North Country Housing Council may re-apply for such funds in the future and CLPPP staff are in favor. The Lead Program Coordinator offered to assist with future contractor training so that there would be a wider pool of contractors to bid on future projects.

Rabies

Summary - Prevents the spread of rabies through education, pet vaccination, and monitoring of dog bites; provides post-exposure prophylaxis to individuals when an exposure to a potentially rabid animal occurs.

Accomplishments - This program monitors animal bites, rabies exposures and post exposure treatment. There were 335 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; 2 bats tested positive. USDA submitted 104 animals and 1 skunk tested positive. 61 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 vaccines throughout St. Lawrence County.

This year a positive rabid bat was identified with two Amish community members exposed, both agreed to receiving rabies post exposure treatment. We continued to coordinate with the hospitals for rabies post exposure treatment and billing, as well as 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. Rabies Post Exposure Prophylaxis treatment is now being offered at Potsdam Urgent Care as well as Canton Urgent Care.

This year, a new staff member was trained and assumed the role of Program Coordinator. Program staff worked to update program forms, policies and procedures. In addition, staff worked to integrate Google applications to streamline processes. In total, 22 rabies clinics were held; 2 by Public Health and 20 by town municipalities/community groups. The clinics were scheduled through the New York State Department of Health Countermeasure Data Management System (CDMS) which requires individuals to register for an appointment online prior to the clinic. Individuals without access to the internet were prompted to call the hosting organization or our department to assist with registration.

Challenges - Continuing to educate the local hospital staff and urgent care staff on the treatment plans for people receiving Rabies Post Exposure Prophylaxis (RPEP) has been a challenge given significant healthcare staff turnover. Working with Massena Memorial Hospital to set up treatment for community members in the northern area of St. Lawrence County has presented itself with many obstacles and an MOU was not set in place at the end of 2023. Staffing remains an issue within the department, it has been challenging completing all required tasks while not having consistent staff working in the program.

Focus for 2024- In 2024 we are looking to cross training two Public Health Specialists to assist in animal bites to alleviate staffing issues. 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 and onboard MMH as a regular location to receive RPEP.

Sexually Transmitted Infections

Summary - Since the pandemic we continue to see a decline in the community using the STI clinic. In 2023 we focused on marketing our clinic on a variety of social media, newspaper and radio ads. We promoted STI testing along with vaccinations for Hepatitis A, Hepatitis B, Human Papillomavirus (HPV) and the Jynneos Vaccine (for Mpox). In 2023, there were 268 cases of chlamydia reported, 41 cases of gonorrhea and 14 cases of syphilis. The increase in sexually transmitted infections is a national trend.

	2023	2022	2021	2020	2019	2018
CHLAMYDIA	268	237	277	242	308	313
GONORRHEA	41	28	35	28	24	41
HEPATITIS A (ACUTE INFECTION)	1	1	2	1	2	0
HEPATITIS B (ACUTE INFECTION)	0	0	0	2	3	0
HEPATITIS B (CHRONIC INFECTION)	17	11	16	7	7	9
HEPATITIS C (ACUTE INFECTION)	2	7	3	3	3	4
HEPATITIS C (CHRONIC INFECTION)	60	72	86	64	118	117
SYPHILIS	14	11	4	5	7	10
TOTAL	403	367	423	352	472	493

Accomplishments - We transitioned to a new electronic medical record, Patagonia. This provides us the capability of ordering tests, medications, and billing for the clients receiving services at the clinic. The staff are able to navigate in the system easily and have become proficient with it. Appointments are available weekly for the clinic. We continued to provide access to treatment for clients who were unable to afford it or were a contact to an STI and needed Expedited Partner therapy (EPT). We continue to provide targeting social media campaigns and focus on advertising to increase the number of people utilizing our clinic services. We provide safe sex kits with education, condoms and lubricant in our bathrooms in the HCS building. We held 3 off site clinics to administer Mpox vaccinations to eligible populations.

Challenges - The decreased number of appointments continues to be an issue for our clinic as supplies are required to be on hand but many times do not end up being used. With limited hours available people are going to urgent care, Planned Parenthood, the emergency room or their primary

care providers. In the past we saw two populations, one were college students as they did not want their parents to be notified by their health insurance being billed and the other were uninsured. There doesn't seem to be the concern for students knowing their parents will know they were tested, this is good that families are aware testing is important for their children's sexual health and screenings. We provided service to 10 clients in 2023.

Focus for 2024- With the increase in STIs 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 and a shortage of medication. 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. Utilize social media to get messaging to the community about testing and treatment to prevent the spread of disease.

Communicable Disease

Summary- A communicable disease is one 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- We hired a Public Health Specialist to work with the CD program. She assists with investigations and creates educational materials for social media, school nurses and providers to distribute to community members. We performed an internal audit on the CD investigations to determine if we meet the requirements of completing an investigation and submitting the information to NYSDOH within the 30 day time period. Out of 372 records reviewed from January - July, 8 were outside of the 30 days. This is 2% not completed "timely", Upon further investigation the eight cases were not entered due to a lack of provider response. Diseases not included in the audit were COVID-19, Influenza, or TB.

Challenges- In 2023, the department continues to see an increase in gastrointestinal and arthropod illnesses requiring additional surveillance and interviews. Continued mistrust caused from the COVID-19 pandemic makes interviews a challenge with community members. Explaining to individuals that the interview following the identification of a foodborne illness is important and necessary to prevent the spread of disease remains difficult.

Focus for 2024- 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. This will be done in a variety of ways, presentations to different agencies, community programs, schools and colleges. Increase social media education and awareness of prevention of CD. The department was chosen as a host site location for the 2024 Summer St. Lawrence University Public Interest Corps program, the proposed project involved a college student sharing information about foodborne illness prevention at local farmers markets.

Tuberculosis (TB) Program

Summary- SLCPHD educates the community and providers on preventing the spread of TB; provides treatment, monitoring, and follow up for individuals with TB infection.

Accomplishments- In September 2023, a St. Lawrence County resident was identified as having active TB. Public Health staff completed a contact investigation, revealing 8 people requiring initial

screening and additional testing 8 weeks later for TB. None of the contacts needed treatment for active or latent TB. One client identified as having multidrug resistant tuberculosis (MDR TB) in 2022 successfully completed treatment with no medical complications in 2023. Continued coordination with NYSDOH and our TB consultant was excellent and resulted in the best care possible for both our clients. Our CD staff were asked by Rutgers New Jersey Medical School Global TB Institute to provide a case study on our client with MDR TB in December. The new case of TB, PH staff were able to coordinate with our TB consultant and get the client started on treatment quickly.

Challenges- The treatment of TB requires direct observed therapy (DOT), visual confirmation the individual has taken the TB medication daily. After the client is no longer infectious we transition to electronic direct observed therapy (eDOT). The medication to treat MDR TB is not commonly used or stocked at local pharmacies, even with the diagnosis of multidrug resistant TB we received constant push back by the insurance company to fill the prescriptions. Our case manager spent hours on the phone with the pharmacy, the insurance company and our TB consultant weekly to order the medications. The insurance company would only fill one prescription for 10 days, one for 24 days, one for 26 days and one for 30 days at a time. Due to all of the meds needing to be filled at different times it was a constant struggle to complete these tasks so the client did not run out of medication and not miss any required doses. This process was a huge time commitment when it should have only taken a few minutes to get a refill.

Focus 2024- To have our current client successfully complete treatment without any complications. We plan to continue with eDOT six days a week with one day of DOT. We are planning on collaborating with our TB consultant to provide education for the providers in our community regarding latent TB for testing and treatment best practices as more testing is being done for TB as a requirement to start certain medications.

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 - The Bridge to Wellness (BTW) Committees have continued the work to Prevent Chronic Disease and Promote Well-Being and Prevent Mental and Substance Use Disorders for the current Community Health Improvement Plan (CHIP) in the following areas:

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

The SLCPHD staff supported the work of the CHIP and the BTW Coalition partners. The following programs and events were lead and organized by the SLCPHD staff:

- Facilitated monthly committee meetings (Nutrition and Physical Activity, Mental Health and Substance Use, and Communications)
- Humans Don't Hibernate - North Country Fitness Initiative
- Walk With A Doc planning
- School Narcan Policies – Seven school districts passed Narcan policies
- Two Networking Events. These events allowed members of the BTW Coalition to network and learn more about the work they offer.
- Spring Fling Wellness Fair in collaboration with the Gouverneur Lions Club
- Working with local hospitals to bring MAT training to the area. The goal of this training is to expand medicated assisted treatment to patients admitted to hospitals.

Challenges - Making sure as many sectors are represented at Coalition and Committee meetings is vital to keeping the work moving forward. The challenge for the Bridge to Wellness Coalition and Committees is keeping current partners engaged, identifying gaps, and finding new members to close those gaps.

Focus for 2024 - SLCPHD staff will actively participate and assist in leading the Bridge to Wellness Coalition and Committee meetings. The SLCPHD team will work with the Committees to determine the goals the committee members would like to work on in 2024. We will identify gaps in Committee membership and work to bring in new partnerships.

Opioid Response Grant

Summary– SLCPHD facilitates county substance use prevention coalition, awareness events and resource connections; provides community education and linkages to care.

Accomplishments– 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.

The Overdose Data to Action (OD2A) grant was completed in August 2023. Public Health staff successfully presented a proposal to the Community Services Board to obtain Opioid Settlement funding. This settlement money will allow the Department to continue the work started under the OD2A grant. Overdose data continues 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 data is in ODMap within 24 hours. This data is used to alert the public of spike alerts (3 or more overdoses in a 24-hour period). The Community Health Educator was asked to present “Delivering Harm Reduction Services in a Rural Setting” at a New York State Association of County Health Officials Harm Reduction Conference.

Challenges- With the loss of an overdose prevention grant, it will be imperative to continue to work with other partners and the Community Services Board to ensure sustainability of public health overdose prevention work.

2024 Focus- The Department will continue expanding community awareness of overdose prevention and harm reduction. The staff will work closely with behavioral health partners and communities to identify needs around substance use and mental health. Based on the needs, overdose prevention resources, events, and training will be supported in St. Lawrence County.