



Seneca County

Health Department

2020 Annual Report



Public Health
Prevent. Promote. Protect.

Seneca County, NY

Seneca County Health Department

2465 Bonadent Drive, Suite 3

Waterloo, NY 13165

Phone: (315) 539-1920 Fax: (315) 539-9493

Web: www.senecacountyhealthdepartment.com



@senecacountyHD



@SenecaCountyDOH

Table of Contents

Message from the Director	2-3
Mission, Vision, and Core Values	4
Health Department Staff	5
Essential Service 1: Monitor Health Status	6-8
Community Health Assessment & Community Health Improvement Plan	
Essential Service 2: Diagnose and Investigate Health Problems and Health Hazards	9-16
Communicable Disease Services	
Immunization Clinics	
STD/HIV	
Tuberculosis	
Lead Poisoning Prevention Program	
Rabies (See Environmental Health Section Essential Service 6)	
Essential Service 3: Inform, Educate and Empower People about Health Issues	17-18
Health Education	
Essential Service 4: Mobilize Community Partnerships to Identify and Solve Health Problems	19-20
Community Partnerships	
Essential Service 5: Develop Policies and Plans that Support Community Health Efforts	21-22
Strategic Planning & Community Health Improvement Plan	
Public Health Emergency Response Planning	
Essential Service 6: Enforce Laws and Regulations that Protect Health and Safety	23-37
Environmental Health	
Essential Service 7: Link People to Health Services	38-44
Maternal & Child Health	
Special Children’s Services	
Essential Service 8: Assure a Competent Public and Personal Health Care Workforce	45
Workforce Development	
Essential Service 9: Evaluate Effectiveness, Accessibility & Quality of Personal and Population Based Health Services	46-47
PMQI	
Public Health Accreditation	
Essential Service 10: Research for Innovative Solutions to Health Problems	48-49
Regional Collaborations to advance Public Health	
2020 Financial Report	50-51
Governance	52-53

A Message from the Director

Challenging. This is the most appropriate word to describe the year 2020. This annual report will look different from previous reports due to the pandemic. Please make no mistake, the work of the staff cannot be adequately reflected in a report such as this.

At the end of 2019 there were reports in the news of a potentially virulent new virus being identified predominately in China. By the end of January and the beginning of February, this virus had been identified in the United States and in New York State. By then, public health professionals were already gearing up for this new challenge. Little did we know at that time, how quickly this virus would spread and exactly how deadly it would become?

In early January it became evident that this would become a world wide pandemic which we have not experienced since the Spanish Influenza pandemic in 1918. We immediately began to review our emergency plans and protocols. Even though we have had to use Isolation orders in the past for individual Tuberculosis patients, we had never before had to impose orders of isolation and quarantine in many individuals at the same time. In collaboration with our partners at the NYSDOH as well as the S2AY member county health directors, we collaborated to develop Isolation and Quarantine orders and protocols. We strived to make as many decisions on a regional basis so that there was some consistency in the region.

In March we received the report of our first confirmed case of COVID-19 in a Seneca County resident. Since that time, we have had over 1,000 cases identified requiring home visits, placing individuals on Isolation or Quarantine and making daily calls or home visits to check on the status of the individuals. This report will provide detail on some of these activities as well as the ever changing protocols that were implemented to meet the demands and challenges in dealing with this virus.

Many of the “normal” public health programs were put on hold during the rest of the year as our resources were devoted to fighting this pandemic. Some of our programs continued out of necessity such as water supply protection, rabies, and communicable disease investigations. The staff remained vigilant in ensuring the health and safety of our residents at all times.

In addition to the world wide pandemic, the department faced other challenges in 2020. Five long-term employees left us during this year. That is one-third of our staff. Tom Scoles, Senior Public Health Sanitarian, Dianne Traver, Account Clerk/Typist, Rose Mary Barto, CSHCN Coordinator and Mary Jo Flynn, Deputy Director all retired, and Kerry VanAuken, Senior Public Health Educator and Emergency Preparedness Coordinator left. We are still rebuilding our team.

Throughout the year many very difficult decisions needed to be made; who do we place in isolation and quarantine, should schools remain open or closed, should businesses remain open or closed, how do we enforce the mandates of isolation and quarantine, masking in public etc. These decisions were made with the health and safety of all residents in mind and at many times they were not embraced by all and there were many times that the department and staff was not very popular in the community. On the other hand, many community agencies and organizations reached out to the staff and supplied us with lunches for days when we did not have time to leave to take a lunch; we received snack, gift cards and letters of support. Those really helped to lift our spirits during some of the more difficult times

I am very proud of the employees of this department for how they have remained resilient throughout this pandemic. We have supported each other throughout these difficult times. We have been very fortunate that when one person was feeling down, another person was there to help them through the rough spots. I believe we may have kept some of the candy companies going through the pandemic. We had large bowls of chocolate (and still do) and we were able to find some comfort in chocolate.

As 2020 ends we continue to face the challenges of the pandemic. We are hopeful that the worst is behind us, but the residents can rest assured that we all continue to work towards our goal to make Seneca County a “safe, healthy environment where we live, work and play”.

Respectfully,
Vickie Swinehart, R.N., MS
Director of Public Health





Mission, Vision and Core Values

Mission

To improve health by providing quality preventative programs and services that respects the cultural diversity of our residents. Through collaboration with our community partners we promote healthy lifestyles to prevent disease and support safe, healthy environments where we live, work and play.

Vision

To achieve healthy communities and safe environments for all

Values

- Integrity
- Commitment to Excellence
- Ongoing Education
- Collaboration
- Respect

2020 Staff Directory

Administration

Vickie Swinehart
Mary Jo Flynn

Director of Public Health
Deputy Director

Medical Director

Timothy Ryan, MD

Support Staff

Dianne Traver

Principal Account Clerk

Environmental Health Staff

Kevin Serrett
Julie Hoster
Melissa Brown
Jennifer Bates
Scott King

Sanitarian
Sanitarian
Sanitarian
Staff Resource Assistant
Director of Environmental Services

Public Health Staff

Mary Reese
Kristina Knight
Amanda Briggs
Kendra Brigham
Kerry VanAuken

Registered Professional Nurse
Registered Professional Nurse
Registered Professional Nurse
Public Health Specialist
Senior Public Health Educator &
Public Health Preparedness Coordinator
Public Health Educator
Service Coordinator
Service Coordinator
Children with Special Needs Coordinator

Andrew VanCuren

Tiffany Williams

Betty Sherman

Rose Barto

2020 Seneca County Board of Health Members

Dr. Timothy Ryan

Dr. Grace Freier

Martha Bond

Phyllis Motill

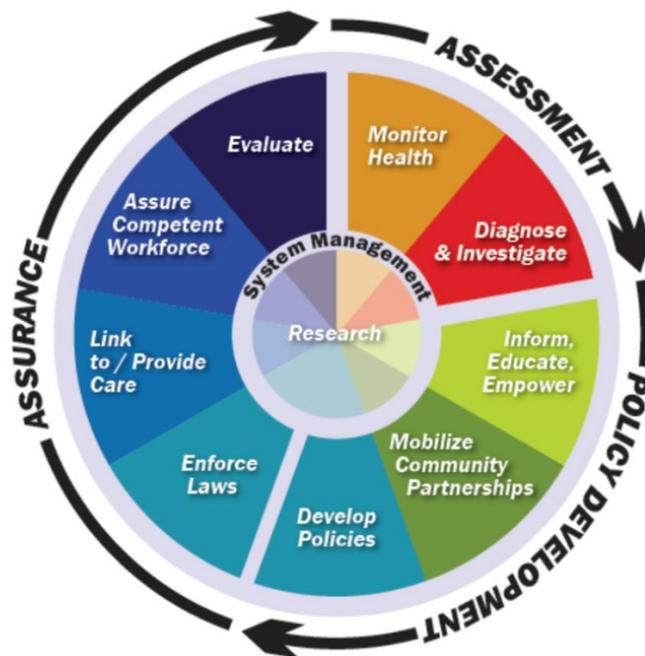
Connie Richardson

Ron McGreevy

The 10 Essential Public Health Services

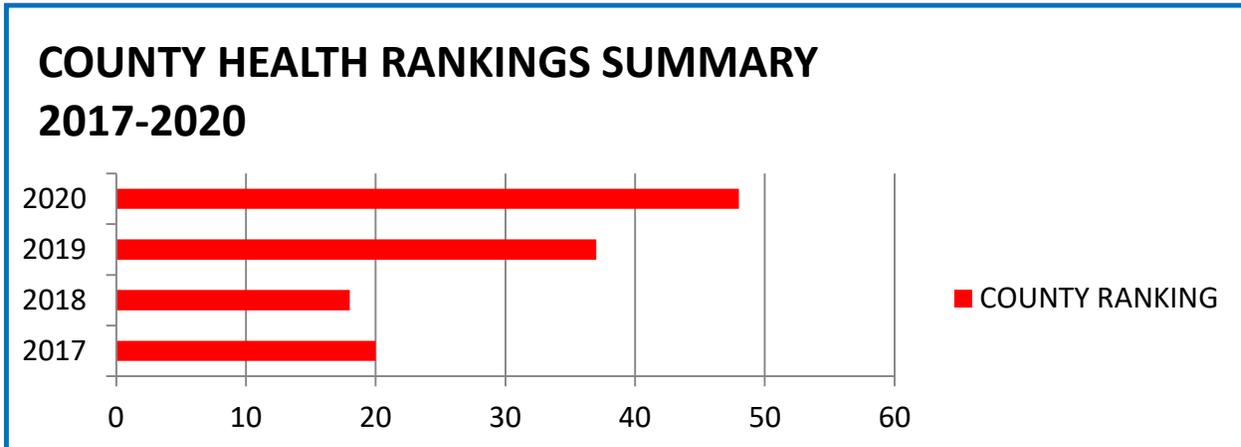
The 10 Essential Public Health Services describe the public health activities that all communities should undertake:

1. Monitor health status to identify and solve community health problems
2. Diagnose and investigate health problems and health hazards in the community
3. Inform, educate, and empower people about health issues
4. Mobilize community partnerships and action to identify and solve health problems
5. Develop policies and plans that support individual and community health efforts
6. Enforce laws and regulations that protect health and ensure safety
7. Link people to needed personal health services and assure the provision of health care when otherwise unavailable
8. Assure competent public and personal health care workforce
9. Evaluate effectiveness, accessibility, and quality of personal and population-based health services
10. Research for new insights and innovative solutions to health problems



Essential Service 1: Monitor Health Status to Identify and Solve Community Health Problems

Introduction: Essential Service 1 activities include assessing the health status of the community through formal and informal needs assessments and data analysis. Seneca County Public Health collaborates with a diverse group of community partners to address community health problems. In this section, the department’s community health assessment, community health improvement plan and health indicators are featured.



Community Health Assessment & Community Health Improvement Plan

The Seneca County Health Department completes a Community Health Assessment (CHA) in conjunction with Geneva General Hospital. Local health department are directed to work collaboratively to develop community health improvement plans with a local hospital by the New York State Department of Health. Seneca County is one of the few counties in the state that does not have a hospital located in the county; therefore the Seneca County Health Department collaborates with representatives from Finger Lakes Health at Geneva General Hospital. Our most recent CHA process was completed in 2018 and resulted in the current Community Health Improvement Plan (CHIP). The CHIP collaborative team known as the Seneca Health Solutions Team includes representatives from Seneca County Health Department, Geneva General Hospital, the S2AY Rural Health Network, STEPS, Cornell Cooperative Extension, Finger Lakes WIC, Seneca County Mental Health and Addictions, the Seneca County Substance Abuse Coalition, United Way of Seneca County, Seneca County Office of the Aging, Tobacco Action Coalition of the Finger Lakes and Common Ground Health.

The priorities of the 2019-2021 Seneca County CHIP are as follows;

1. **PREVENTING** Chronic Disease through initiatives that focuses on:

- Healthy Eating/Food Security
- Tobacco Prevention
- Preventive Care & Management

2. **PROMOTING** Well-Being and **PREVENTING** Mental & Substance Use Disorders through strategies to address:

- Opioid use
- Mental Health
- Suicide

The complete 2019-2021 CHA /CHIP can be viewed on the Public Health website.

Essential Service 2: Diagnose and Investigate Health Problems and Health Hazards in the Community

Introduction: *Essential Service 2 includes provision of epidemiological identification of emerging health threats and active investigation of infectious disease. The following programs/activities are highlighted in this section: communicable disease control, STI, TB, immunization, rabies and lead poisoning prevention.*

Communicable Disease, Sexually Transmitted Infections and HIV Testing

Communicable Disease control is one of the core functions of Public Health. The focus of this program is on the prevention of disease through surveillance, case management, screening and health education. There are many steps in achieving effective communicable disease control. These steps include:

- ✓ Early identification of the disease
- ✓ Thorough investigation of the disease source(s) and methods of transmission
- ✓ Prompt notification to the providers in the community
- ✓ Early and effective communication to the community members regarding risk of transmission and, if necessary, treatment options.

The Health Department staff would not be able to effectively manage a successful disease control program without assistance from our community partners. Through active and passive surveillance, much critical information is obtained. This information allows the agency to be aware of trends in disease prevalence and to alert the providers and residents as necessary.

The Health Department monitors weekly active surveillance with the physicians, schools, nursing homes, veterinarians and emergency departments/urgent care centers in our county. The information received alerts the staff to any trends of illnesses, such as an increased report of GI illness in the schools. This allows the agency staff to develop educational materials to be sent home with students, or to direct public health media releases on disease prevention.

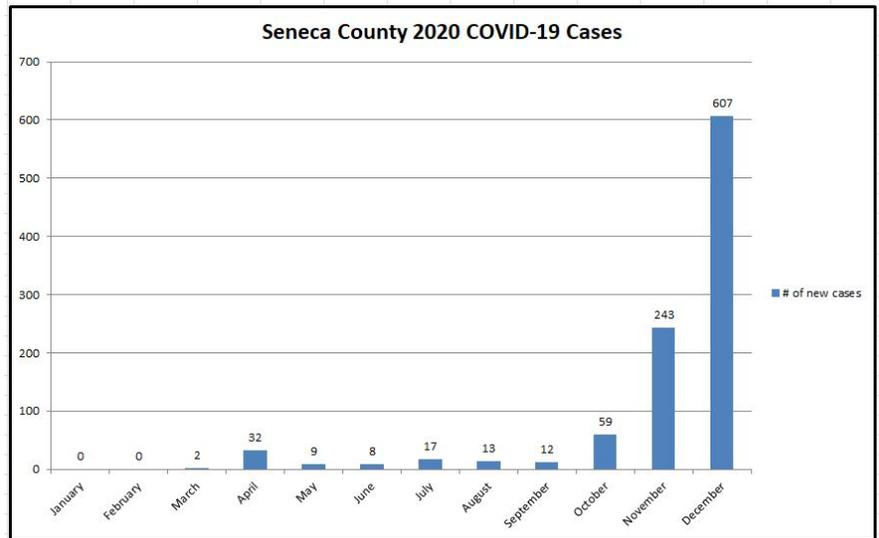
Passive surveillance is completed on an on-going basis. The Health Department staff is available 24 hours a day/seven days a week to receive reports of a reportable illness. Reportable illnesses include hepatitis A, tuberculosis, salmonella, giardia and sexually transmitted infections such as gonorrhea, syphilis, and chlamydia.

The Health Department is also responsible for ensuring the diagnosis and treatment of sexually transmitted infections. Seneca County Health Department has a contract with Finger Lakes Urgent Care and Finger Lakes Community Health to provide testing, treatment and follow-up visits if needed.

The Health Department does not offer on-site HIV testing. For any individual seeking testing, the

Health Department provides education and referral to agencies that will provide confidential counseling and testing.

2020 began as a typical year in terms of communicable disease and STI's until the community wide shut down in March due to COVID-19. Due to stay at home recommendations, residents avoided public places including doctors' offices, urgent care centers and hospitals unless acutely ill. Masking and social distancing orders were also in place. Seneca County's first case of COVID-19 was identified approximately two weeks after the shutdown, with the count surpassing 100 cases seven months later. Just two months after that, by year's end, Seneca County had 1002 cases of COVID-19. The graph below shows the distribution of COVID-19 cases in 2020.



*Public Health Nurses on a
COVID-19 home visit*

Health Department efforts during 2020 were focused on COVID-19 case investigation, contact tracing, daily monitoring of individuals on quarantine, and patient and provider education. Early in the pandemic, Health Department staff completed daily check in calls and home visits for all county residents on quarantine due to exposure or infection with COVID-19. As the pandemic progressed and the number on quarantine grew, the Health Department staff was stretched thin trying to case manage both exposures and positive cases. At this time the Public Health Nurses collaborated with the New York State contact tracing team, CommCare, to obtain help with daily check-ins for quarantined individuals. Through CommCare those on quarantine due to exposure were contacted daily via phone calls or text messages, based on each individual's preference. This allowed Seneca County Health Department staff to focus efforts on the needs of

positive cases. By November the number and rate of new positive cases was exponential so home visits were discontinued and all staff worked together to complete case investigations, contact tracing and daily monitoring of positive cases.

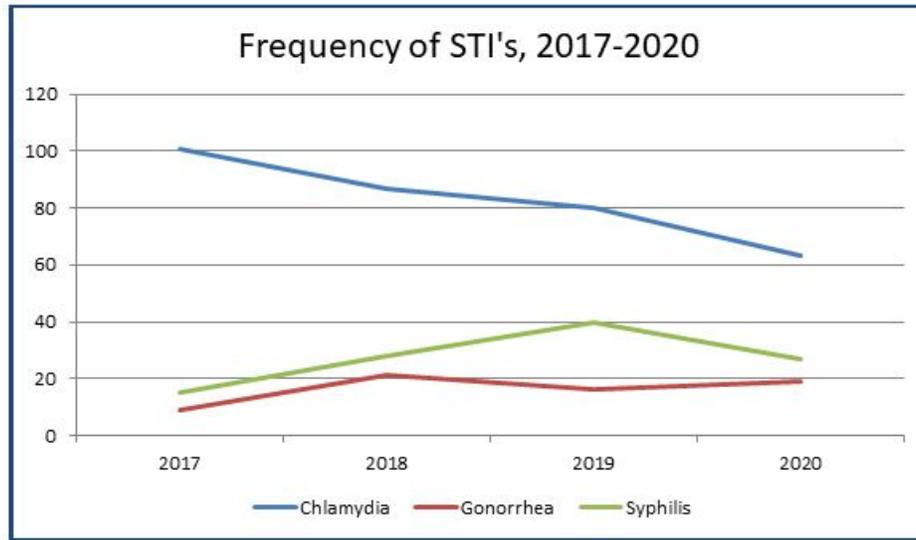
From declaration of the pandemic in March through December, Health Department staff worked 7 days a week including holidays to respond to the public health emergency. All staff members worked outside their typical job duties in an effort to respond to the needs of county residents during this time. The volume of calls coming into the Health Department was at a rate never experienced before. Calls came in from the public, business owners, schools, doctors' offices and healthcare facilities, all looking to the Health Department for guidance on various aspects of navigating the pandemic.

While responding to the global pandemic, Seneca County Health Department faced two other major obstacles: 1) Staff turnover, and 2) Building issues. By the end of 2020, one third of Health Department staff had turned over, taking with them more than a century of combined experience. The positions affected were across the organization, in both Public and Environmental Health, and included both leadership and staff positions. Regarding the building issues, in July, Health Department staff was evacuated due to a safety issue with the building itself. Staff was relocated to an unused office space in the County Office Building for a period of 12 weeks. For any organization at any time, these would have been difficult obstacles to overcome. Seneca County Health Department faced them in the midst of the unprecedented circumstances of COVID-19.

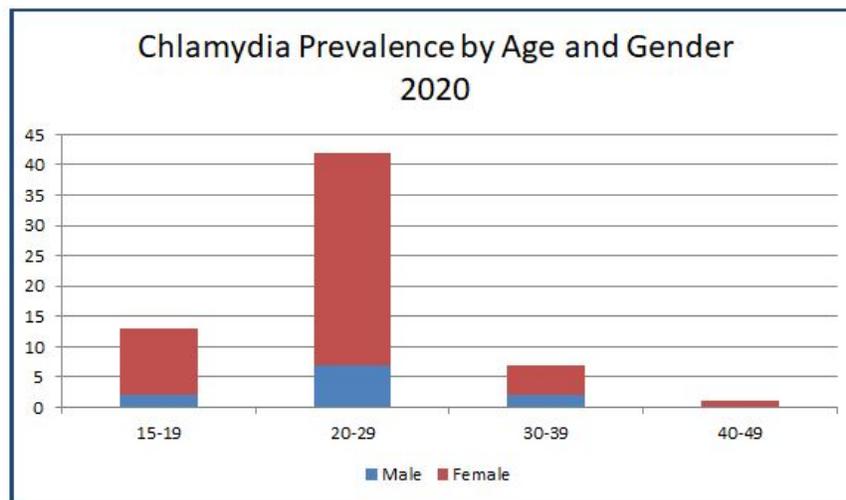
While cases of all other communicable diseases and STI's dropped off very soon after the pandemic was declared, Health Department staff continued to monitor and investigate other disease reports as they arose. The sudden decrease in incidence of communicable diseases and STI's was in part due to stay at home orders, physical distancing and mask wearing leading to less transmission of disease, and due to healthcare and laboratory resources being focused on COVID-19. This resulted in fewer well visits and less routine testing/screening for both communicable diseases and STI's. Refer to the following charts to see the total number of diseases reported in 2020 as compared to prior years, and the STI trends in the county.

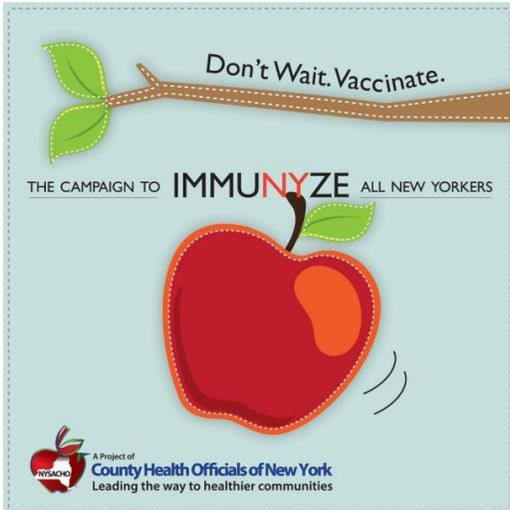
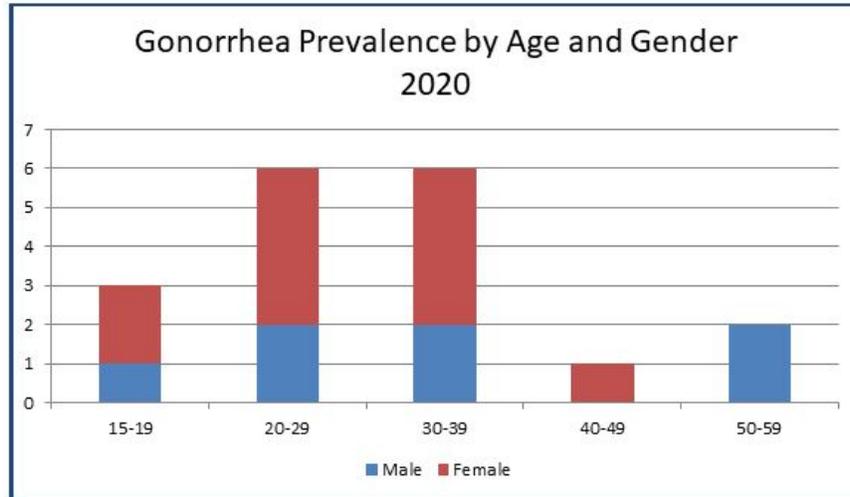
REPORTABLE DISEASE	2018	2019	2020
Lyme	27	35	17
Campylobacter	7	10	13
Chlamydia	87	80	63
Gonorrhea	21	16	19
Hep A Acute	0	0	2
Hep B (chronic)	10	14	11
Hep C (chronic)	597	550	288

Syphilis	28	40	27
Influenza A	182	296	107
Influenza B	112	21	100
Other	31	46	38
Total	1102	1108	685



Chlamydia and gonorrhea are highlighted next as these are the two most common STI's in the nation. The following charts show that in Seneca County, women were more affected than men, with 83% of the chlamydia cases and 63% of the gonorrhea cases in women.





Immunization Program

The Health Department offers immunizations for vaccine preventable diseases to children who do not have health insurance coverage or who are under-insured. These clinics are by appointment and are held twice monthly. Vaccine is obtained through the Vaccines for Children Program from the NYSDOH and is offered to children under the age of 19 years.

During the first quarter of 2020, the Health Department held Vaccines for Children immunization clinics as planned. However, due to the COVID-19 pandemic, clinic operations were suspended during the 2nd quarter. A plan for re-opening clinics was developed and approved, and appointments were scheduled for two clinics per week from July 14th through September 1st. All children who were unable to be immunized due to COVID-19 were given first priority for appointments, and then children who needed immunizations for school were scheduled next. The first clinic post COVID-19 was held on July 14th. The clinic ran smoothly and all aspects of the reopening plan were able to be followed. However, later that same day, Public Health was evacuated from the building due to a safety issue with the building itself. As a result, all clinic appointments between July 15th and August 20th were rescheduled beginning August 25th. Clinics were again resumed on August 25th in the Public Health building, running under generator power and using vaccine coolers to maintain proper vaccine temperatures. Multiple clinics per week were held through mid-October in an effort to catch up children on their school immunizations. As November approached and the COVID-19 cases skyrocketed, clinics were again

suspended as all nursing staff was needed for the COVID-19 response.

All other usual immunization activities were put on hold due to the diversion of staff to COVID-19 response. The suspended activities included: Immunization Quality Improvement Program (IQIP, formerly known as AFIX), Adult Provider Education visits, School Training and Technical Assistance visits, and Amish/Mennonite School Immunization Surveys.

Tuberculosis Control Program

Tuberculosis is *highly infectious* disease that mainly affects the lungs, but it can attack any part of the body such as the throat, kidney, spine, or brain. The bacteria that causes TB (Mycobacterium Tuberculosis or tubercle bacilli) is spread through tiny droplets in the air when a person with active TB disease in their lungs speaks, coughs, sneezes, or sings. People nearby may breathe in these bacteria and unknowingly become infected. However, not everyone infected with TB bacteria becomes sick. As a result, two TB related conditions exist: latent TB infection and active TB disease. Both types of TB are treated with long course antibiotics. Under Public Health Law the Public Health Department is mandated to monitor and manage all tuberculosis cases of residents in Seneca County. Cases of active and latent TB disease are reported to the department by physicians, hospitals and laboratories.

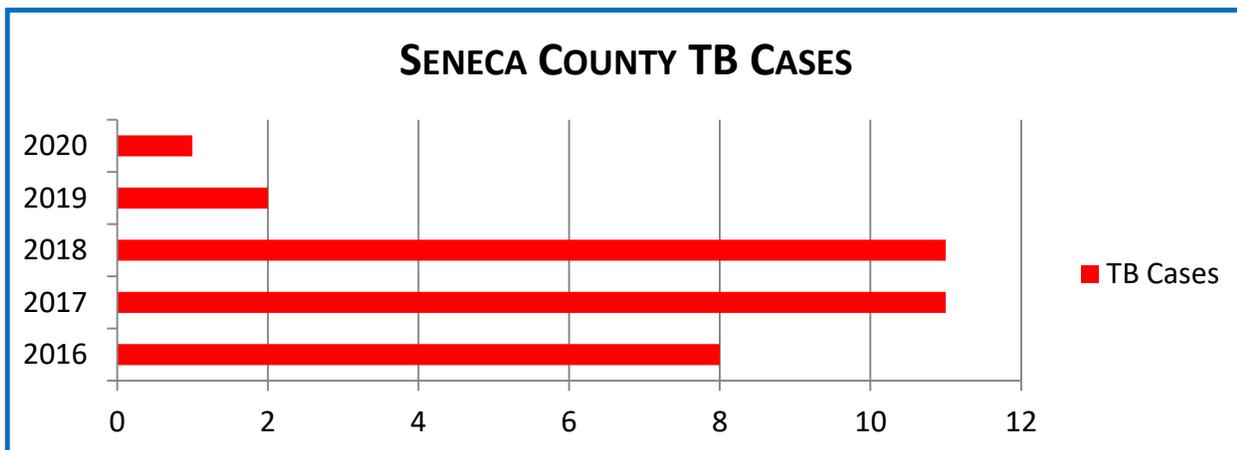
In 2020, Seneca County had no cases of active and just one case of latent TB.

Due to the COVID-19 pandemic, testing for TB was very low due to many people staying home for work and other activities and not seeking out medical checks. Potential cases that did come in were reviewed and followed up but ruled out except for one case which was subsequently treated successfully.

Our program is staffed with a full time nurse and case worker. Dr. Eric Shives is our contract TB physician.

The goal of the Tuberculosis Control Program is to decrease the incidence of TB in Seneca County through effective screening, health education, outreach to those at risk and appropriate treatment.

**Interpreters are available for individuals who need them to assist with interviews.*



Lead Poisoning Prevention Program

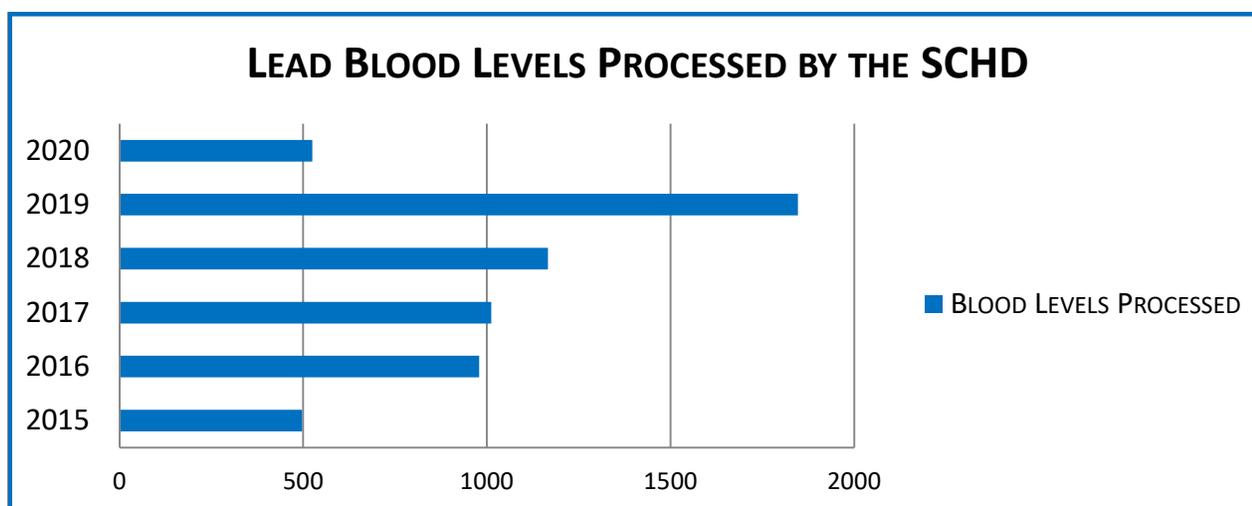
What is Lead Poisoning?

Lead poisoning is a buildup of lead in your body over a period of months or years. Even small amounts of lead can cause serious health problems for children and adults alike. Lead can get into your bloodstream and once this occurs some of it gets stored in your tissues, organs, and bones. This leaves the person at significant risk for intellectual and health complications in life, and is especially harmful for young children.

How does this affect Seneca County?

Children in Seneca County are at a higher risk of lead-poisoning for multiple reasons, but the leading reason is that we have a high percentage of older homes in our county (43% built before 1950). Homes built before 1978 are more likely to have lead-based paint. Painted surfaces deteriorate over time (peel, flake, chip, and become part of the household dust) and become a hazard to occupants of a household. Deteriorated paint is the leading cause of childhood lead-poisoning. Blood lead levels as low as 5µg/dL are associated with loss of IQ, behavior and learning problems as well as a multitude of other health issues.

Due to the widespread COVID-19 pandemic, lead testing by providers dropped significantly in 2020. This was due to the extreme workload taken on by the doctors’ offices, and by many people staying home and not seeking out routine medical checks, as evidenced by the chart below.



Our program is staffed with a full time Public Health Nurse, a Sanitarian, and the Director of Environmental Services. We work in collaboration with all medical practices in and out of Seneca County to provide testing and screening for children. The goal of the Lead Poisoning Prevention Program is to decrease the incidence of Lead Poisoning in Seneca County through effective screening, testing, health education and outreach to those at risk.

Essential Service 3: Inform, Educate and Empower People about Health Issues

Introduction: *Essential Service 3 includes social marketing, targeted-media public communication, and providing accessible health information resources to reinforce health promotion messages and programs. The following activities are highlighted in this section: general health education and the Seneca County Health Department’s social media and website pages and posts.*

The Public Health Educators provide education to target groups and the general public throughout the year on various health topics. Programs and topic areas the public health educators support include all of the Article 6 Mandated Program Areas as defined by the NYSDOH. These program areas include:

- Family Health
- Chronic Disease
- Environmental Health (Injury Prevention, Blue Green Algae, etc.)
- Emergency Preparedness and Response
- Communicable Disease
- Community Health Assessment/Community Health Improvement Plan (CHA/CHIP)
- SCHED Seasonal Newsletter- 1st edition released 9/1/2018: distributed to local Libraries, Providers, Partners and public at events.



The Public Health Educators are also responsible for educating the public about the role of public health in the community. One of the ways they achieve this is through their participation in community events. Public health staff table at various events in the community throughout the year providing outreach and education.





Outreach and Promotion

- Starting in April 2020, posts were made daily on the County Facebook, Twitter and Website to keep the community updated on the current county-level trends for COVID-19
- Free Bike Helmet Program
- Free Car Seat Program
- Health Education Staff was unable to attend any in-person or remote outreach events due to their responsibilities in responding to the COVID-19 pandemic.



2020 Annual In-Service Day

Due to the COVID-19 Pandemic in 2020, no Annual In-Service Day was held.

Community Engagement:

Community Engagement was extremely limited during 2020 due to the COVID-19 Pandemic. Public Health Educators served as Public Information Officers during the Pandemic in addition to supporting local business with educational materials related to COVID-19 guidelines and current protocols. Public Health Educators worked with support staff to visit over 100 businesses in Seneca County on 2 different occasions during the pandemic, offering the educational materials that were created as re-opening occurred.

Essential Service 4: Mobilize Community Partnerships and Action to Identify and Solve Health Problems

Introduction: *Essential Service 4 involves convening and facilitating community groups in undertaking defined preventive and population focused activities in order to capture the full range of potential resources to solve community health problems.*

Community Partnerships

Public Health leads the Seneca Health Solutions Committee that works collaboratively on the CHIP initiatives outlined in Essential Service 1.

As a member of the Tobacco Action Coalition of the Finger Lakes (TACFL) Public Health supports and encourage businesses, municipalities, housing complexes, and media outlets to consider



smoke-free or tobacco-free policies for their grounds or other aspects of their business.

Seneca County Health Department staff is also a member of the Seneca County Substance Abuse Coalition

working with community members and organizations to reduce underage drinking, & tobacco and marijuana use among youth. The Coalition also is working to educate the community about opioid addiction.

Seneca County Health Department staff work in partnership with the Seneca County Mental Health Department to educate the community on opioids and to train law enforcement personnel, first responders and the general community in the use of Naloxone.

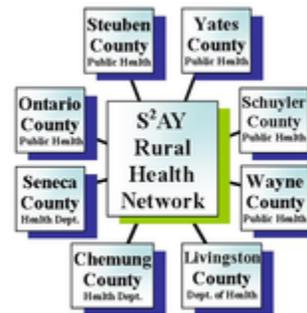


Naloxone is used to reverse an Opioid Overdose. The primary purpose of the program is to reduce the number of unintentional deaths caused by Opioid Overdoses in Seneca County. In 2020, the Seneca County Health Department trained the County Corners in the proper use and administration of Naloxone. The Seneca County Health Department provided Naloxone kits to the Seneca Falls Police Department, Waterloo Police Department, Interlaken Police Department, the Seneca County Sheriff's Department, Seneca County Probation Department, Magee Fire Department and the Border City Fire Department. A usage report is filled out each time Naloxone is administered by participating responders and is reported to the NYSDOH. In 2020, staff from the Opioid Overdose Prevention Program trained 2 individuals to recognize the signs of an opioid overdose and how to properly administer Naloxone. The number of individuals trained was significantly lower in 2020 due to the COVID-19 pandemic.

Representatives from the Seneca County Health Department in conjunction with other Public Health Departments in the S2AY Rural Health Network region, along with community partners and key stakeholders were unable to work toward region goals in 2020 due to the COVID-19 Pandemic. In lieu of in person workgroups, a virtual Unified Messaging meeting was created to support information sharing and education outreach efforts regionally during the pandemic. The goal was to create consistent messaging throughout the eight S2AY Network counties.

Agenda goals in our region;

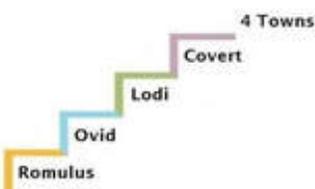
1. Worksite Wellness
2. Chronic Disease Self-Management
3. Hypertension
4. Farm to Cafeteria and
5. The Finger Lakes Breastfeeding Partnership.



During January, February and March, other Community Partnerships and Coalition Representatives from the Seneca County Health Department participated in the following regional collaborative; the Finger Lakes Lead Poisoning Prevention Coalition, the Sexual Health Coalition, Reproductive Health Coalition and several subcommittees associated with the STEPS Neighborhood Improvement Project including; The STEPS Risers, Personal Health and Wellness, and Improving the Physical Environment committees. After March 2020, all meetings were cancelled as the county, region, state and County responded to the COVID-19 Pandemic.



STEPS
7150 N. Main Street
P.O. Box 902
Ovid, NY 14521
(607) 403-0069
Stepscommunity@s2aynetwork.org



Essential Service 5: Develop Policies and Plans that Support Individual and Community Health Efforts

Introduction: *Essential Service 5 involves providing leadership for systematic community and state level planning for health improvement; development and tracking of measureable health objectives as a part of continuous quality improvement strategies; and development of codes, regulations and legislation to guide the practice of public health. Highlighted in this section are the agency's strategic plan, Community Health Improvement Plan and Emergency Preparedness.*

Strategic Planning & Community Health Improvement Plan

Our Strategic Plan outlines the goals for the department to achieve its optimum performance and function. Activities to support and achieve our goals outlined in the Strategic Plan have been identified. The strategic priorities identified for the Seneca County Health Department are 1.) Ensure a competent workforce, 2.) Promote the role and function of the department and 3.) Maintain a continuous quality improvement performance management program. The following strategic plan activities were completed in 2020.

- Increased opportunities to promote the Seneca County Health Department as a brand. Examples include sponsorships; adherence to the department's branding policy, use of logos on staff apparel and promotional items.
- Staff has engaged various civic organizations such as the Rotary and Lions Clubs.
- The Department continued its pursuit of Public Health Accreditation efforts into 2020.
- A focused effort to increase our visibility was also achieved in 2020 with our Facebook, Twitter and our Seasonal newsletter platforms. Increasing our digital visibility and reach.



Community Health Improvement Plan

The current Community Health Improvement Plan became effective January 1, 2017 and will conclude in December 2018 although a new plan will now be in effect until 2020.

Our top priorities of focus to improve the health of Seneca County residents continue to be focused on decreasing chronic disease burdens by the reduction of obesity among children and adults, to reduce hypertension and heart disease as well as to reduce substance abuse and promote mental health. The results of our 2019 survey revealed five priority areas to improve the health of Seneca County residents:

1. Prevent Chronic Disease
2. Promote a Healthy and Safe Environment
3. Promote Healthy Women, Infants and Children
4. Promote Well-Being and Prevent Mental and Substance Use Disorders
5. Prevent Communicable Disease

For more information on the New York State Prevention Agenda and for a copy of the current Seneca County CHA/CHIP visit <https://senecacountyhealthdepartment.com/public-health/community-health-assessment/>

http://www.health.ny.gov/prevention/prevention_agenda/2013-2017/

Public Health Emergency Preparedness Program (PHEP)

The primary responsibility of Local Health Departments (LHDs) is to promote and protect the health of their residents. A critical component of this responsibility is planning for health emergencies caused by deliberate acts, accidents, and naturally occurring events. Health emergencies can include but are not limited to terrorist threats, outbreaks of infectious diseases, and biological, chemical, nuclear, and radiological incidents. To ensure that LHDs are ready to respond to such threats, LHDs must conduct a health emergency preparedness program as a condition of State Aid eligibility. We work cooperatively with our community preparedness partners to plan for all hazards and to be ready to respond to all hazard events including those of a biological, chemical, radiological, nuclear or explosive nature. These may be naturally occurring, large-scale communicable disease outbreaks or natural disasters.

Preparedness Partners and Healthcare Coalition Memberships:

The Seneca County Health Department is a participating member of several preparedness coalitions and councils that work together to ensure our communities are prepared for all hazards including public health emergencies, natural disasters, chemical releases, mass casualty incidents, etc. In 2020 the Public Health Emergency Preparedness Coordinator participated as a member of the following coalitions, committees and/or councils.

- Western Region Health Emergency Planning Coalition (WR HEPC)
- Finger Lakes Area Planning Workgroups (FLAP)
- Finger Lakes Public Health Alliance (FLPHA)
- Seneca County Local Emergency Preparedness Council (LEPC)
- ServNY

2020 Preparedness Activities

- COVID-19 Pandemic Emergency Response (March – December)
- COOP Activation (July – September)
- Deliverables Drill – Drive Through Flu Clinic (Saturday October 24th)

Essential Service 6: Enforce Laws and Regulations that Protect Health and Safety

Introduction: *Essential Service 6 involves enforcement of sanitary codes, especially in the food industry, protection of drinking water supplies, enforcement of clean air standards, and timely correction of public health hazards.*

Environmental Health Services

Seneca County is fortunate to have a full service health department. Enforcement of sanitary codes for the food industry, mobile home parks, campgrounds, public swimming pools, temporary residences, public bathing beaches, the protection of public drinking water supplies, enforcement of clean indoor air laws, investigation of childhood lead poisoning, and follow-up of public health hazards are the primary responsibility of the Environmental Services Division within the Seneca County Health Department. The following outcomes were completed by the Environmental Health Staff in 2020.

Enforcement

Enforcement actions can take many different forms. When a violation occurs at a regulated facility the violation is documented. This is the first form of an enforcement action against a regulated facility. Any time that a public health hazard occurs it is immediately addressed with the staff and management at the facility. The Sanitarian cannot leave the premises until it is addressed and corrected. Many different avenues are taken to gain compliance with the regulation at the time of the inspection.

Before a facility is brought in for a formal enforcement hearing and fines are imposed the Sanitarian will typically explore many different methods to gain compliance. Some of these methods include voluntarily discarding food items that were found to be in violation, closure of a public swimming pool found to be in violation, closure of a facility until compliance can be met, education of staff at in-service trainings provided by our Sanitarians, just-in-time training with cooks/management, boil water notices, sending formal Consent Orders (stipulation agreements) to facility operators and finally, formal enforcement action. Enforcement hearings are normally used as a last resort to gain compliance.

Consent Orders

In 2020, partly as a result of enforcement actions that resulted from New York's COVID-19 Executive Orders & emergency rules and regulations, Environmental Health began utilizing Consent Orders as an enforcement tool. These Consent Orders, which are very similar in legal structure to a Stipulation Agreement, were sent to operators that were alleged to have committed serious violations of the COVID-19 Executive Orders. These Consent Orders were accompanied by a cover letter clearly explaining that if the operator chose to sign and return the Consent Order admitting to the violations, that the Consent Order would then be reviewed/ratified by the Board of Health at their next routine meeting. These Consent Orders very clearly defined the violations that occurred, and often included payment of a civil penalty (a fine). This penalty was determined by the Seneca County COVID-19 Response Committee and by the Seneca County Board of Supervisors, versus by the Hearing Officer. Once the Consent Order was returned to the SCHD it was then forwarded to the Board of Health for their review and ratification. This new Consent Order method resulted in the operators of multiple facilities admitting to the alleged violations, while streamlining the process

somewhat by eliminating the review by the Hearing Officer. This Consent Order process proved to be very efficient in taking formal enforcement actions, collecting civil penalties and, most importantly, in encouraging facilities to come into compliance with various rules and regulations.

Formal Enforcement Hearing

When all other avenues have been exhausted to bring a facility or individual into compliance, or when there is a particularly flagrant or egregious alleged violation, the Health Department initiates the formal Board of Health hearing process by issuing a summons to the alleged violator to appear at a hearing. During the enforcement proceedings the hearing officer listens to testimony and receives evidence from Health Department staff, as well as considering any testimony or evidence offered by the facility operator/owner. Once both sides have presented their testimony and evidence, and answered any questions posed by the hearing officer relating to the issue at hand, the hearing officer makes a decision based on the preponderance of evidence. Often, Health Department staff will have documentation in the form of inspections, pictures, and educational opportunities offered to the facility to support their findings and justify the need for a formal enforcement action and any possible civil penalty (a fine) to be imposed.

The Seneca County Board of Health reviews the findings of the hearing officer and any penalties or orders levied by him and votes to either uphold the hearing officer’s findings, modify the penalty or order, or discard the recommended enforcement.

Food Program: (Food Service Inspections, Complaints, Education, Plan Reviews)

- 1) Food Safety: Issue Permits, collect Workmen’s Comp/ Disability info, Review plans for new food service facilities.
- 2) Food Service Inspections (including pre-operational): restaurants, temporary food services, mobile food vendors and vending machines, institutional food facilities, schools, summer feeding program sites, and others.
- 3) Investigate Complaints of foodborne illness
- 4) Provide education for food workers and operators



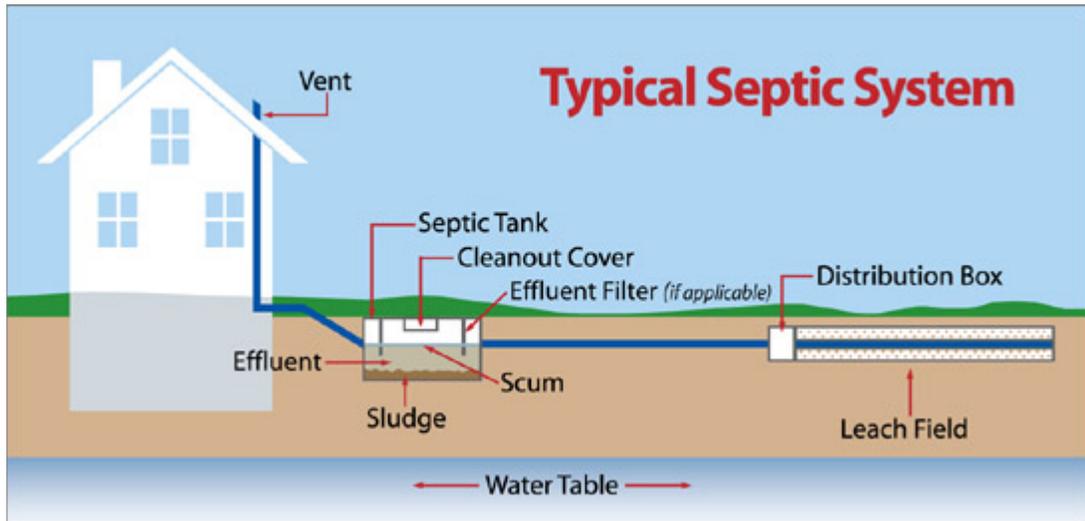
Children’s Camps:

- 1) Issue permits, perform inspections, review written safety plans, verify camp staff certifications.
- 2) Inspect all areas of camp: Pool/beach, sleeping areas, food, recreation programs, medical requirements, supervision of camps/counselors, food service.
- 3) Screen Directors through NYS Clearance database
- 4) Investigate/Report abuse allegations and submit findings to the State



Onsite Waste Water Treatment Systems (aka Septic Systems)

- 1) Review engineered wastewater system proposals prior to installation. This review includes being certain the proposals meet all aspects of the NYS Sanitary Code for on-site septic systems, and incorporates a site evaluation of each parcel where a system is proposed.
- 2) Maintain records and retain engineering plans of all septic system installations within Seneca County
- 3) Investigate complaints of overflowing septic systems and require repair or replacement of systems that are found to be failing
- 4) Provide advice and guidance to system owners, contractors and design professionals regarding the State requirements for system design and installation



The SCHED Issued Permits for the following:

Permits Issued

Program	2016	2017	2018	2019	2020
Agricultural Fairground	1	1	1	1	0
Bathing Beach	4	4	4	4	0
Campground	13	14	14	14	13
Children's Camp	8	9	8	8	0
Mobile Home Park	27	27	27	27	27
Swimming Pools	12	12	12	12	1
Tanning Facility	3	3	3	3	2
Temporary Residence	10	11	11	10	13
Mass Gatherings	0	0	0	0	0
Migrant Housing	0	0	1*	1	1*
Spray Parks	0	0	0	0	0
Tattoo	0	0	0	0	0
Food Establishment					
High Risk	26	27	28	31	40
Low Risk	60	64	62	58	48
Medium Risk	143	156	163	160	152
Mobile Food	40	41	65	40	21
Temporary Food	107	117	103	94	8
Vending Food	1	1	2	2	2

In addition to Issuing Permits, the SCHED also conducted Inspections for the following:

- Mobile Home Parks, Campgrounds, Public Swimming pools, Temporary Residences (motels/hotels), and public bathing beaches.
- Require hotels/motels to address issues pertaining to bed bugs.
- Swimming pools:
 - ✓ Review safety plans
 - ✓ Assist in drowning investigations

2016-2020 Annual Inspections

Program	2016	2017	2018	2019	2020
Agricultural Fairground	1	1	1	1	0
Bathing Beach	3	4	3	5	0
Campground	12	13	15	13	12
Children's Camp	8	10	10	8	0
Mobile Home Park	8	8	4	3	28
Swimming Pools	12	15	11	13	5
Tanning Facility	0	3	0	3	0
Temporary Residence	7	6	8	9	12
Food Establishment	232	252	250	256	203
Mobile Food	39	26	45	43	10
Temporary Food	100	112	97	90	6
ATUPA	64	66	35 adult 30 youth	32 adult 31 youth	35 adult 0 youth
Water Supply	103	112	105	103	90
Septic Plan Submission	58	55	64	65	84
Backflow Device Review				16	8
Subdivision Review				2	0
UV Light Review				2	1
Campground Review				1	3
Water Main Review				1	6
Administrative Hearing	0	1	5	3	0

Trends

The number of high risk restaurants increased in 2020 primarily due to an informal internal audit of existing facilities which resulted in reclassification of several facilities based on analysis of their current menu. These high risk foodservice facilities require increased time and effort on behalf of the inspectors as these establishments must be inspected twice a year.

The number of mobile food vendors (food trucks) operating in the county dropped by about 50% from 2019. This was caused primarily by the COVID-19 pandemic which resulted in the cancellation of fairs, festivals, carnivals, trade shows and the like across NYS, including here in Seneca County. This also caused a significant reduction in the number of Temporary Food permits issued in 2020. It is expected that permits for Mobile and Temporary foods will rebound in 2021.

In 2020 Environmental Health continued to permit just one Migrant Labor housing facility, as defined by Part 15 of the NYS Sanitary Code. At year's end, however, Environmental staff were working towards inspection and permitting of additional Migrant Labor facilities due to

a recent regulatory change that altered the definition of a Migrant Labor facility from a property housing five or more migrant laborers to a property housing just one or more laborers. It is anticipated that this program area will grow substantially in coming years.

Water Program:

- 1) Public Water Supply systems: 97 total
 - a. 25 Community Water Supplies (23 Municipal, 1 MHP, 1 State Park).
 - b. 67 Non-Community Water Supplies (restaurants, wineries, campgrounds, etc.)
 - c. 5 Non-Community, Non-Transient Water Supplies (Private Mennonite Schools)

On August 12, 2020 Seneca County Environmental Services issued a Conservation Advisory for the Interlaken Water District due to an extended period of dry weather which reduced the water level in the village’s water supply well, putting a strain on the water system. On November 25, 2020 the Health Department issued a Water Conservation Order for the Interlaken Water District because the village was in imminent danger of running out of water, due to the ongoing drought that was affecting the region. The Health Department worked with officials from the village of Interlaken, Seneca County Emergency Management, and the NYS Department of Health to coordinate emergency measures to stabilize the water supply through the Thanksgiving weekend and into early December. Fall precipitation finally arrived in December allowing for the Conservation Order to be lifted. The Health Department is continuing to partner with the Village of Interlaken as they work with village engineers to develop plans for upgrades the water supply system.

Responsibilities include:

- ✓ Annual sanitary surveys (inspections)
- ✓ Oversight of NYS monitoring requirements (sampling and operation reports)
- ✓ Annual water quality report review for the Community Water Systems
- ✓ Enforcement of Part 5 of NYS Sanitary Code
- ✓ Review of emergency plans for 2 Community Systems (population served over 3,300)
- ✓ Review and approval of disinfection systems for new water supplies and Public water supply improvements/modifications.

Smoking Program:

- 1) Clean Indoor Air: Received and investigated 1 adult complaint. Processed requests for bi-annual smoking event.

- 2) Adolescent Tobacco Use Prevention Program (ATUPA) - 34 Facilities.

In November 2019 New York State adopted 21 years of age as the minimum age for the purchase of tobacco products (“*Tobacco 21*”). All facilities selling tobacco product within Seneca County, with limited exceptions due to age restriction of those allowed entry and/or safety concerns, typically receive the following:

- A) An underage compliance check – a person under the age of 21 attempts to purchase tobacco products
- B) A registration and signage compliance check to verify up-to-date DTF licensure and minimum required signage prohibiting sales to underage persons.

Environmental Services takes enforcement against any facilities that sell tobacco products to minors. Unfortunately, the workload resulting from COVID-19, as well as concerns and restrictions in place due to COVID-19, resulted in the Health Department being unable to complete the underage compliance checks in 2020. It is anticipated that these will resume in 2021.

Vector Control:

- 1) **Rabies:** Bite incident investigations and follow up, approval and payment of Rabies Prophylaxis administration to individuals possibly exposed to Rabies within Seneca County, collection and submittal of rabies samples (i.e. bats, raccoons, unvaccinated domestic animals) to Wadsworth lab, oversight of Confinements following a bite incident, 10-day and 6-month confinements, free vaccination clinics provided 4 times annually, and education. Due to the heavy workload placed on Environmental Services staff due to the COVID-19 pandemic the number of vaccination clinics provided in 2020 was reduced to three, which resulted in a reduction in the overall number of animals vaccinated. It is anticipated that 4 clinics will once again be provided in 2021.

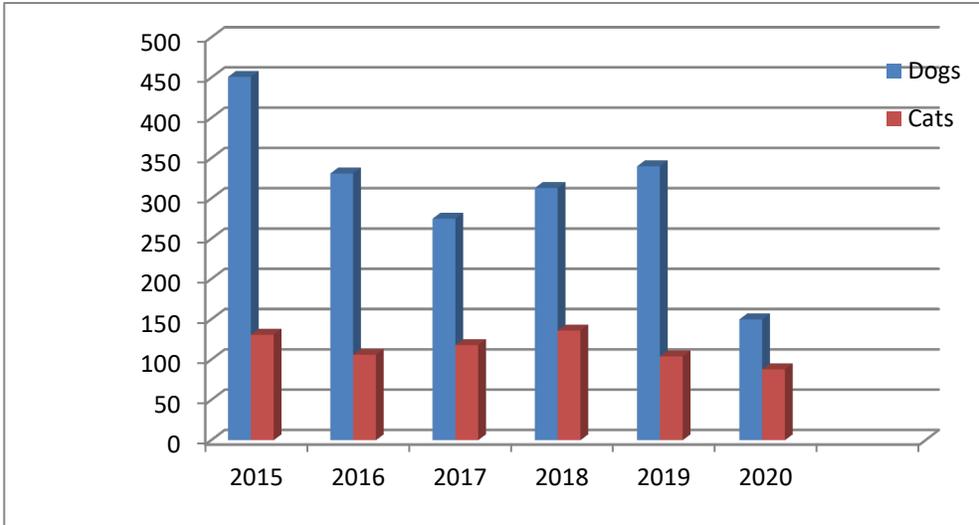


Rabies Program Data:

Free drive-thru rabies clinics were provided with the cooperation of our local veterinarians, animal handlers, and members of the Environmental and Public Health staff. A summary of our Rabies Clinic Activity is as follows;

	2016	2017	2018	2019	2020
# Animals Vaccinated	437	393	449	444	244
# PEP Authorized	31	19	38	17	18
# PEP without insurance	3	6	0	1	3
# of 10 day confinements	58	79	91	96	69
# 6 month confinements	3	1	1	3	0
# animals sent for testing	27	33	27	29	26
# of untestable specimens	5	0	4	0	0
# positive specimens	4	1	1	4	2
Positive Specimens					
Raccoon	1	0	0 1 Submitted by Cornell	2	0
Fox	0	0	0	0	2
Cat	0	1	0	0	0
Bat	0	0	1	0	0
Skunk	2	0	0	2	0
Cow	0	0	0	0	0
Goat	1	0			0

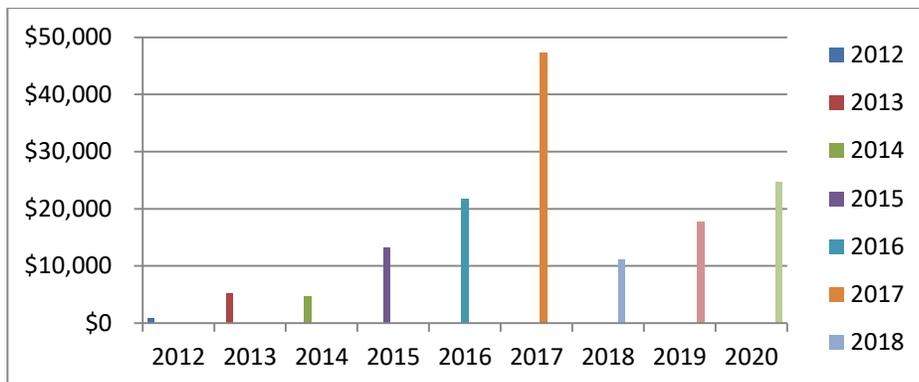
Total Number of Cats and Dogs Vaccinated 2015-2020



In 2020, 244 dogs and cats were vaccinated to protect them from rabies.

Animal bites are reported to the health department and follow-up is conducted to assure that measures are taken to prevent rabies transmission. Public Health Sanitarians conduct follow up of bite reports and approve post exposure treatment if warranted for those persons exposed to rabies. Free rabies clinics were provided with the cooperation of our local veterinarians, animal handlers, and members of the Environmental and Public Health staff. Rabies PEP spending was reduced in 2018 due to the dedication of our Staff Resource Assistant working with Geneva General to ensure all PEP expenses were appropriate and approved and that 3rd party payment was received if the patient had private insurance.

Rabies Post Exposure Annual Cost

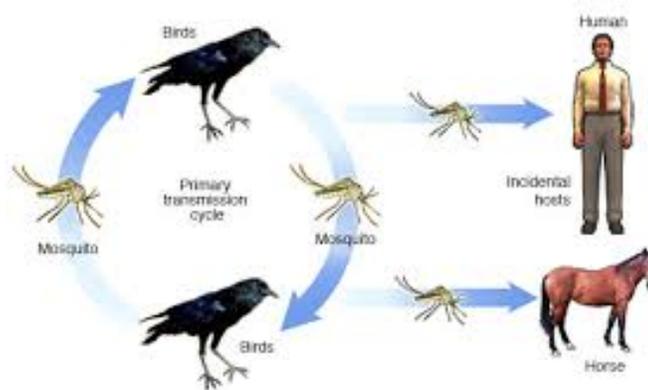


- 2) **Lyme disease:** The Seneca County Health Department’s Sanitarians are trained in the identification of ticks. Ticks brought into the office are observed under a microscope to attempt to determine the tick species. Persons who report having been bitten by a tick are referred to their health care provider for follow-up, while animal owners who removed a tick from their animal are typically referred to seek the advice of a veterinarian. In recent years the deer tick (*Ixodes scapularis*), which is known to carry Lyme disease, has become the dominant tick species in the county.



3) **Mosquito Control:** West Nile Virus, Eastern Equine Encephalitis and Zika Virus:

- The NYS Department of Health performs routine monitoring and surveillance for the presence of WNV, EEE, and Zika virus throughout NYS, including in the Finger Lakes region. If the need arises, Seneca County Environmental Health is prepared to coordinate collection and submittal of mosquitoes (for speciation and number).



© MATHY EDUCATION FOR MEDICAL GRADUATES AND SCIENTISTS. ALL RIGHTS RESERVED.

Public Health Nuisance Complaints:

Onsite wastewater systems, sewage complaints – dye testing as needed, water supply contamination/follow up sampling if required, unsanitary conditions, dog/cat feces, various other.

Nuisance Complaints 2016-2020

Concern (Food)	2016	2017	2018	2019	2020
COVID-19					21
Cleanliness	5	1	3	4	1
Insects	0	0	0	0	0
Health Concerns	1	1	0	0	0
Rodents	1	1	0	0	0
Garbage	4	0	0	0	1
Sewage	0	0	0	0	0
General	0	12	13	8	4
Illness	0	2	1	2	1
Fire Safety	1	0	0	2	0
Smoking (CIAA)	0	1	3	3	0
Motel			0	0	1
Insects	0	0	1	3	0
Mobile Home Parks					
Garbage	0	0	1	0	1
Water	0	0	2	0	1
Fire Safety	0	0	0	0	0
Sewage	0	1	7	0	2
General	0	0	0	0	0
Rodents	0	0	0	0	0
Sewage	7	7	0	1	3
Other	0	0	0	4	11
Total	19	26	31	27	47

Household Hazardous Waste

The Seneca County Health Department provides an annual household hazardous waste collection day each fall. Residents drop off for proper recycling several thousand pounds of hazardous household waste materials ranging from pesticides, hazardous paint, stains and resins, fluorescent bulbs, and mercury. Partial funding for this event is provided by the NYS DEC. Advertising support is provided by Seneca Meadows. In addition to our staff, manpower and the use of facilities is provided by the Seneca County Highway Department. Below is a summary of 2020 household hazardous waste collection efforts.

Product	2017	2018	2019	2020
Antifreeze	275 gallons	150 gallons	0	110 gallons
Automotive Batteries	30	40lbs and 25lb.household batteries	250 lbs.	900 lbs.
Pesticides (Solids)	250 lbs.	400 lbs.	600 lbs.	600 lbs.
Fluorescent Bulbs	1430 lbs.	100 lbs.	800 lbs.	375 lbs.
Hazardous paint	800 gallons	1000 gallons	500 gallons	330 gallons
Pesticides Liquid	800 gallons	100 gallons	800 gallons	72 gallons
Bulk Mercury Liquid	12 lbs.	5 lbs. mercury containing device	0	5 lbs.
Other HHW (liquids)	3162 lbs.	250 lbs.	2,775 gallons	360 gallons
Other HHW (solids)	150 lbs. 600 lbs. of aerosols 6 fire extinguishers	1000 lbs. 800 lbs. other solids and 10 lbs. fire extinguisher	855 lbs.	1,393 lbs.

Harmful Algae Blooms (HAB's)

Harmful algae blooms have become more common across the nation, including here in the Finger Lakes Region. In 2020, staff from the Seneca County Health Department continued to monitor suspect and confirmed HAB outbreaks with our regional partners from the NYSDOH and NYSDEC.

In 2020, there were multiple confirmed reports for harmful algae blooms reported, especially in Cayuga Lake. The anticipated trend is that we will see more harmful algae blooms occurring in Seneca County and around the Region.

Environmental Health staff provides the following in response to harmful algae bloom activity:

- Educate the public on health and safety precautions
- Inform the public on the presence of harmful algae blooms
- Work with regional and local partners when outbreaks are confirmed
- Take water samples and send samples for testing to confirm the presence of algal toxins.
- Work with local Public Water Supply operators to monitor for the presence of any algal toxins in drinking water.



Childhood Lead Poisoning Investigations:

Studies show that no amount of lead exposure is safe for children. Even low levels of lead in blood can affect children's health including: reduced growth indicators; delayed puberty; lowered IQ; and hyperactivity, attention, behavior, and learning problems. Effective October 1, 2019 NYS Public Health Law and regulations were amended to lower the definition of an elevated blood lead level in a child from 15 to 5 micrograms per deciliter. Once a new case has been identified and referred to Seneca County Environmental Health, our staff conducts in-home visits to determine the sources of lead exposure, and provides environmental case management to help families reduce their environmental risks. In 2020 Seneca County Environmental Health Sanitarians investigated **ten** cases of children with elevated blood lead levels and are currently working with those families to correct the identified lead hazards. It is anticipated that the number of investigations will increase in coming years due to the recently amended regulations.

Administrative Tribunals:

When critical or repetitive violations of the NYS Sanitary Code occur at regulated facilities, the health department has the authority under Public Health Law to initiate a formal hearing. Individuals/business owners are notified to appear for a hearing date. The hearing examiner will hear testimony of the events and if it is determined that the respondent is in violation of the New York State Sanitary Code, often imposes a civil penalty (fine) and/or an order to remedy. The Board of Health reviews the findings and any penalty or order and votes to uphold or change the findings of the hearing examiner. The table below summarizes the Administrative Tribunals undertaken by the Seneca County Health Department over the last several years. The water program had the most activity in recent years, primarily due to facility operators not submitting water operation reports in a timely manner. Past enforcement actions in the water program

seem to have had some positive impact on the timely submission of required water reports, as there were no administrative tribunals held for violations in the water program in 2020.

Program	2016	2017	2018	2019	2020
Water			0	0	0
Failure to submit water samples	0	0	0	0	0
Failure to submit water op. report	0	1	0	0	0
Failure to submit total coliform samples	0	0	0	0	0
Failure to submit plans for disinfection	0	0	0	0	0
Septic			1	0	0
Installation of system without plans			1	0	0
Food			2	0	0
Barehanded food contact	0	0	0	0	0
Improper cooling of food	0	0	0	0	0
Food out of temperature	0	0	1	0	0
Standing water in basement	0	0	0	0	0
Floors with food debris	0	0	0	0	0
Food debris on equipment	0	0	0	0	0
Failure to secure a food permit	0	0	0	0	0
Dog in food area			1	0	0
ATUPA					
Sale of tobacco product to individual < 18	0	0	0	1	0
Sale of liquid nicotine (vaping product) to individual < 18				1	0
CIAA				1	0
Campground			1	0	0
Operating without a permit			1	0	0
Swimming Pools			1	0	0
Failure to update safety plan			1	0	0
Total Tribunals			5	3	0

2020-Total number of after-hour environmental health calls: 18 of which 1 was a call out.

Essential Service 7: Link People to Needed Personal Health Services

Introduction: *Essential Service 7 involves assuring effective entry for disadvantaged people into a coordinated system of clinical care; linkage to services for special population groups; ongoing care coordination; targeted health information to high risk population groups and technical assistance for effective worksite health promotion/disease prevention programs. Highlighted in this section are the agency’s Early Intervention program, Special Children’s Services, Maternal Child Health, Certified Lactation Consultants, and Worksite Wellness.*

CHILDREN’S PROGRAMS

The children’s programs administered by Seneca County Public Health include the following:

Maternal & Child Health

The Seneca County Health Department welcomes and encourages prenatal, postpartum, and pediatric referrals for the purpose of providing health guidance and education to new parents. Services that we provide include prenatal and postpartum health education home visits to pregnant women and new moms. We offer parents multiple resources and make appropriate referrals to agencies that provide assistance and or support for families, women, infants and children.



Seneca County MCH 2020 Outcomes and Statistics:

The number of outreach and/or educational encounters provided to new parents in 2020 totaled 22. As part of the Maternal Child Health Program all new parents receive a “Welcome Baby” letter and a Seneca County Resource Guide in the mail. A home visit is can be provided for infants if requested by the parent to provide one on one health education on infant/child safety and care. Home visits were severely limited due to the COVID 19 pandemic. Local resources and services provided to new mothers include programs such as the infant car seat program, immunizations and personal assistance for breast feeding with a Certified Lactation Counselor (CLC).

- Educational topics discussed with parents include tobacco cessation, alcohol and other drug use, safe sleep practices, maternal depression, breastfeeding, birth control, infant feeding and other primary and preventive health recommendations.
- The Public Health Specialist is an active member of the Finger Lakes Breastfeeding Partnership working with partners to increase breastfeeding rates in Seneca County. Seneca County staff is currently working to promote and establish breastfeeding friendly workplace policies, breastfeeding friendly practices and breastfeeding daycare

designations. The Finger Lakes Breastfeeding Partnership provides breastfeeding friendly education and certification for daycares in collaboration with the Child and Family Resource Center. There were no meetings of the Finger Lakes Breastfeeding Partnership in 2020 due to the COVID 19 pandemic.

- Staff development is an ongoing piece to the program. In 2020 all trainings were held virtually due to the COVID 19 pandemic.
- Outreach in the community was severely limited due to the COVID 19 pandemic. Although Seneca County does not have a birthing hospital every attempt is made through the MCH program to connect with families and women of childbearing age.
- The Baby Cafés are a free resource for pregnant and breastfeeding mothers that offer breastfeeding support with trained staff, as well as, opportunities to share experiences and provide support. A CLC from Seneca County Health Department attended the Baby Café held at the Geneva Boys and Girls club until the COVID 19 pandemic occurred.

Early Intervention: addresses the needs of children 0-3 years old who have developmental disabilities or a diagnosed medical condition qualifying them for Early Intervention services. Services available include Special Education, Speech, Physical, Vision, and Occupational Therapies, Psychological Counseling, Medical Social Work, Respite, Nursing, Transportation, and Service Coordination.

Preschool Special Education Program (also known as the Pre-School Program): Provides special education services to children 3-5 years of age who qualify under NY State Education Guidelines.

Child Find: Assures that all infants and toddlers with developmental disabilities, or who are suspected of having a developmental delay, have developmental screenings, a medical home, and health insurance.

Children with Special Health Care Needs Program (CSHCN)

The CSHCN Program is a public health program that provides information and referral services for health and related areas for families of CSHCN. There is no cost to families. Families with children birth to 21 years of age, who have or are suspected of having a serious or chronic physical, developmental, behavioral or emotional condition which will require health or related services of a type or amount beyond that required by a typical child are eligible for the Children with Special Health Care Needs Program (CSHCN). Staff assists families by making referrals to available resources that can assist the families in meeting the needs of their child.



Physically Handicapped Children’s Program (PHCP)

PHCP provides financial assistance, paying co-pays and deductibles for medical services and referrals for medical care for children (newborn-21 years old) who have or are suspected of having a disabling condition or serious chronic illness. Parent payments are based on income guidelines. Providers bill Medicaid and private insurance companies for services. New York State reimburses the county for 50% of the remaining balance. In 2020, the program provided services to 11 children.

	2016	2017	2018	2019	2020
PHCP Program Costs	\$9,136.02	\$8,036.00	11,538.93	\$22,659.29	\$14,345.51
Total CSHCN Families Assisted	10	5	11	9	12
Age <1			5	2	0
Ages 1<3			3	1	4
Ages 3<5			1	1	3
Ages 5<13			1	4	4
Ages 13<19			1	0	1
Ages >19			0	1	0

Assistance provided to families in 2018 includes:

- Physician Services
- Test (labs, x-ray, echo’s, EKG etc.)
- Assistance with special formula and/or other nutritional supplementation for feeding issues
- Supplies (durable medical and disposable supplies)

Early Intervention Program (EIP)

Early Intervention is a statewide program providing early identification, screening, evaluation, special services, and service coordination for infants and toddlers at risk for developmental delays or who have an actual delay. Children birth to 3 years old with suspected developmental delays, a diagnosed disability, or condition affecting development are eligible to receive a multi-disciplinary evaluation at no cost to families. Service Coordinators work with families in their homes to meet the special needs of each child, as well as, assisting and referring families to other community resources. These resources may include Medicaid, SSI, or medical insurance. Depending upon the need of the child services offered may include Special Instruction, Speech Therapy, Physical Therapy, Social Work and Occupational Therapy. These services can be provided within the community setting or the child’s home. Whereas children may also be eligible to receive these services in a structured play group known as a Developmental Toddler Group.



Any person, such as parent, day care provider, family member or primary care physician may make a referral to EIP with the parents’ permission. EI is a voluntary program and the parents can opt out at any time. Contact is made with each parent when a referral is received and an evaluation is scheduled at the parent’s request. Referrals that do not result in services to children are often due to parents opting out of the Early Intervention Program for a variety of reasons, or the child not qualifying for services due to developmental milestone thresholds.

The Early Intervention Program received 82 new referrals in 2020 and a total of 141 children received services through the Early Intervention Program.

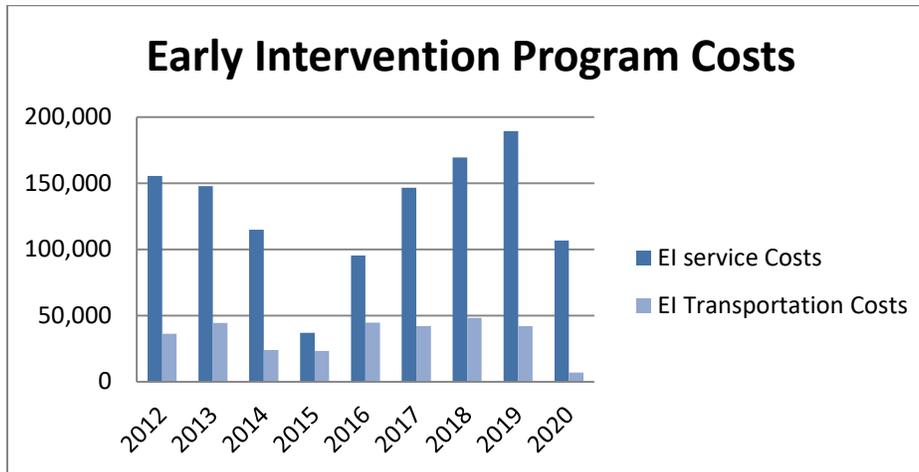
Early Intervention Program			
Program Year	# of referrals	# of referred children who qualified for EI	# of children enrolled in EI
2013	60	24	59
2014	65	28	61
2015	63	36	73
2016	68	56	70
2017	92	66	60
2018	79	46	99
2019	101	63	163
2020	82	20	141

There is a trend that the children who qualify for services are requiring more intensive services especially since more children are being diagnosed at a younger age for Autism Spectrum Disorder (ASD).

Services are provided according to the Individual Family Service Plan (IFSP), which is a written agreement between the Early Intervention Official/Designee and the family.

All services are family centered, with parent participation encouraged. Eligible children must transition to the Preschool program within specified timeframes prior to their third birthday.

The transportation contract for the Early Intervention and Pre-School Programs is provided under contract by Durham School Services. Transportation is provided to children who are eligible to receive services in a center-based setting such as Happiness House in Geneva. The cost to transport a child per day averages \$43.46.



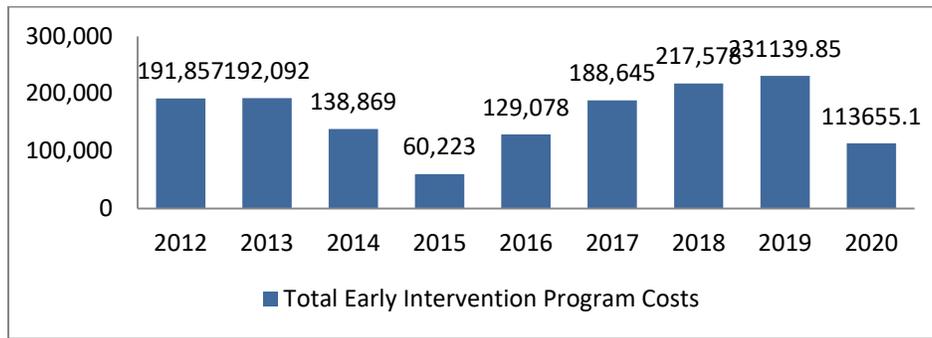
EI cost for the year 2020:

- Service cost \$106,667.59
- Transportation cost \$6,987.52
- Total EI Program cost \$113,655.10
- Net cost to the county after state reimbursement \$57,964.11

We received \$45,574.31 in state reimbursement during 2020.

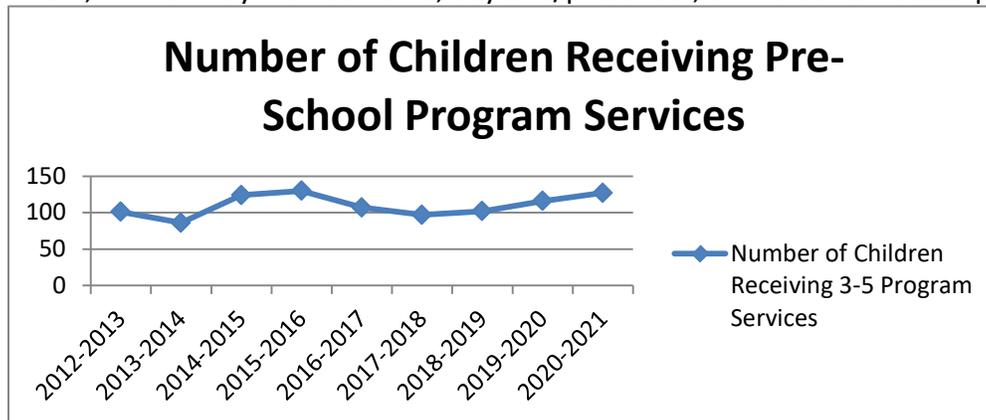
During 2020 the Early Intervention Program was temporarily paused due to COVID until we received guidance on how to proceed with providing services safely for our families. That guidance included a transition to Tele-therapy sessions. Toddler groups did not resume by the end of 2020. Many providers that also provide those groups needed space for the PreK students they also service. As a result, there were many families who tried tele-therapy and didn't feel it worked for them, or who chose to continue a pause in services for their child until in-person services were reinstated. We also had a few providers that chose to pause services as they were not comfortable providing them via tele-therapy. From March through late August, many children received only tele-therapy, or were on pause per family request. All providers who were choosing to resume in-person sessions were given guidance as to required PPE, they were no longer allowed to bring therapy toys and had to work with what was already present in the home, and support on working with families who needed reminding of proper masking/spacing while a provider was in their home. Many families still found successes for their children and greater involvement in therapies increased their understanding of the importance of continuing skills outside of sessions.

Included with Early Intervention is the Child Find component that is charged to assure that all children have developmental screenings, a medical home, and health insurance. NYSDOH has a permanent fiscal agent that does the billing/claiming function of Early Intervention in conjunction with EI providers. While providers now deal directly with the state contracted fiscal agent for payment, the County deposits funds into an Escrow account held by NYSDOH every two weeks. While direct payment for services has shifted away from the county, assurance that the children are receiving adequate services remains the responsibility of the county.

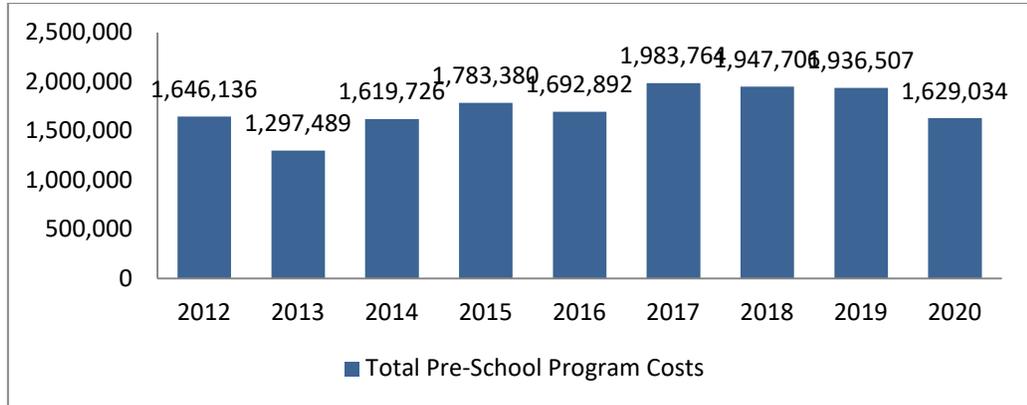
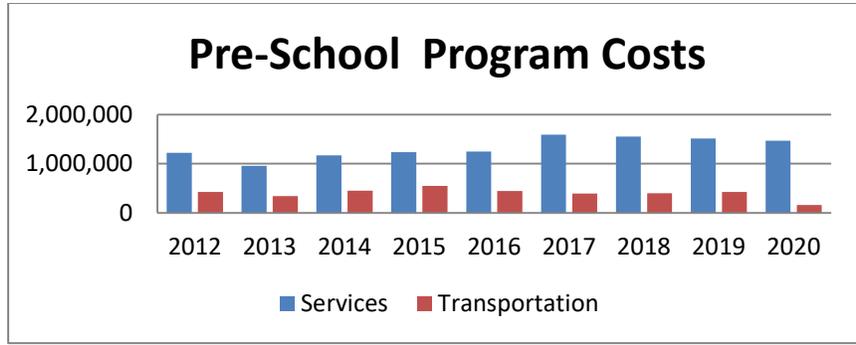


Pre-School

Preschool services are provided to children age three to five years who meet eligibility criteria set forth by the State Education Department. Services are provided in the “least restrictive environment,” which may include home, daycare/preschool, or in a center-based program.



Services are discussed by the CPSE committee after the performance of multidisciplinary evaluation by a county contracted evaluator. Services are then approved by the Committee on Preschool Special Education in the child’s home school district.



Transportation by county vendor is available to any child receiving services in a center-based program. Parents also have the option to transport their child to their program and receive mileage reimbursement. Durham School Services is the current provider of transportation services for both the Early Intervention and Pre-School programs.

The average daily cost per child for transportation in the preschool program averaged \$73.11 to \$317 per child per day. The increased cost is reflective of children being transported from the southern end of the county to the northern end in order to receive center-based programming.

Preschool Cost for 2020:

- Service Cost \$1,468,600.13
- Transportation cost \$160,433.45
- Total cost \$ 1,629,033.58
- State Reimbursement \$ 603,629.26
- Medicaid Reimbursement: \$164,212.56

During 2020 we saw a short pause in services for preschool students. Those in program received mailed packets of work and tele-therapy services by providers. Since students were not being transported to program, there is a reduced expense here. However, when programs resumed in the fall, students were only going to program two days per week and receiving online instruction and therapies. This also caused a reduction in transportation costs.

Essential Service 8: Assure a Competent Public Health Care Workforce

Introduction: *Essential Service 8 involves educating and training personnel to meet the needs for public and personal health service; adoption of continuous quality improvement and life-long learning and active partnership with academic institutions. In order to provide the highest quality public health service, the Seneca County Health Department strives to ensure that all our staff possesses the knowledge, skills, and abilities necessary to perform their jobs effectively and efficiently. Highlighted in this section is Workforce Development.*

Workforce Development

The Seneca County Health Department maintains a workforce development plan. In 2020, staff competencies were assessed and training needs were identified.

The public health core competencies identified requiring additional staff training were:

- Systems Thinking and Leadership
- Analytical Assessment
- Cultural Diversity



An annual staff training plan is developed. All staff members are provided opportunities to increase their competencies. Some training is assigned while others can be selected based on interest. In 2020 staff was trained on the following:

- CLAS Standards (Culturally Linguistic Appropriate Services)
- How to facilitate effective meetings
- Confidentiality
- Cultural Diversity
- Performance Management Quality Improvement

Essential Service 9: Evaluate Effectiveness, Accessibility & Quality of Personal and Population Based Health Services

Introduction: *Essential Service 9 calls for ongoing evaluation of health programs to assess program effectiveness and to provide information necessary for allocating resources and shaping programs. Measures for assessing this essential service indicate a need for strengthening Seneca County Health Department activities in this domain. Highlighted in this section are our activities related to pursuit of accreditation with the Public Health Accreditation Board (PHAB, and the professional advisory committee meetings.*

Performance Management and Quality Improvement

The Seneca County Health Department has adopted a PMQI system. Implementation of our PMQI process is conducted by a PMQI committee. The Senior Public Health Educator chairs the PMQI committee. The committee is tasked with evaluating the performance and quality of public health systems. The committee meets monthly.



Performance Management is a systematic process which helps an organization achieve its mission and strategic goals by improving effectiveness, empowering employees, and streamlining decision making.

In practice, performance management often means actively using data to improve performance, including the strategic use of performance standards, measures, progress reports, and ongoing quality improvement efforts to ensure an agency achieves desired results.

Public Health Accreditation

The Seneca County Health Department, along with five other local county health departments – Ontario, Schuyler, Steuben, Wayne, and Yates – worked collaboratively to set the foundation for a multijurisdictional accreditation application to the Public Health Accreditation Board (PHAB) to become nationally recognized as an accredited local health department. Throughout the year, the counties met to identify documents or examples of joint efforts that met measures spanning 12 domains of Public Health work:

- ✓ Domain 1: Conduct and disseminate assessments focused on population health status and public health issues facing the community
- ✓ Domain 2: Investigate health problems and environmental public health hazards to protect the community
- ✓ Domain 3: Inform and educate about public health issues and functions
- ✓ Domain 4: Engage with the community to identify and address health problems
- ✓ Domain 5: Develop public health policies and plans
- ✓ Domain 6: Enforce public health laws
- ✓ Domain 7: Promote strategies to improve access to health care
- ✓ Domain 8: Maintain a competent public health workforce

- ✓ Domain 9: Evaluate and continuously improve processes, programs, and interventions
- ✓ Domain 10: Contribute to and apply the evidence base of public health]
- ✓ Domain 11: Maintain administrative and management capacity
- ✓ Domain 12: Maintain capacity to engage the public health governing entity

A statement of intent for the counties to apply for accreditation jointly was submitted to PHAB in June 2015. The counties applied for accreditation in June 2016, and the documentation to support the application was uploaded to PHAB on May 27, 2017. A site visit by PHAB was made in August 2018 which involved a two person team from PHAB meeting with staff and members of our governing body to review and discuss documentation to support that we successfully met their standards and measures.

k

In 2020, the Seneca County Health Department became one of six counties (Seneca, Wayne, Yates, Schuyler, Steuben and Ontario) who achieved National Public Health Accreditation through the Public Health Accreditation Board (PHAB). It was during the COVID-19 pandemic that the Seneca County Health Department staff received notification that their application was approved.

More information on the Public Health Accreditation process is available at www.phaboard.org.

Essential Service 10: Research for New Insights & Innovative Solutions to Health Problems

***Introduction:** Essential Service 10 includes continuous linkage with appropriate institutions of higher learning and research. Highlighted in this section is Seneca County Health Department's participation with the S2AY Rural Health Network and Common Ground Health.*

S2AY Rural Health Network

The S2AY Rural Health Network is a unique horizontal network comprised of the Public Health Departments of eight contiguous rural counties (Seneca, Schuyler, Steuben, Ontario, Wayne, Yates, Chemung and Livingston), along with a legislator, consumer and provider from each county. This network has been in existence since 1997 and began with three founding counties (Steuben, Allegany and Yates). The area served covers 4,668 sq. miles of the Finger Lakes and surrounding counties in New York with a population of 528,493 people.

Our objectives:

- Developing comprehensive cost-effective health care systems, including dental care, that increase access to care and fill gaps in service delivery.
- Increasing and strengthening cooperation through affiliation, coalitions or partnerships that enhance and coordinate the array of needed health care services.
- Improving the financial viability of rural health care providers and in the existing health care economy.
- Increasing community involvement and locally-generated, innovative solutions to health care system issues.
- Increasing the number of health care personnel trained and practicing in rural communities.
- Strengthening the accountability of local providers for improvements in key public health and/or health care outcomes in the communities they serve.

Major network activities:

A wide variety of Public Health Quality Improvement and Assurance initiatives, including Corporate Compliance, In-service Training, over 200 joint policies and procedures, and staff committees on Public Health, Early Childhood and regional sub-committees to support member county's Community Health Improvement Plan strategies and interventions. A Performance Management Quality Control Coordinator has been employed by the S²AY Network and their expertise is shared among counties to assist member counties with strengthening and maintaining their Performance Management and Quality Improvement processes and use of researched based interventions and strategies. Significant effort has been focused on the preparation and submission of the joint accreditation application to the Public Health Accreditation Board (PHAB) for six of the eight Network Counties, which includes Seneca County.

Cardiovascular disease is one of the leading causes of death in Seneca County. High blood pressure is a leading contributor to heart disease and reducing sodium consumption is an evidence-based approach to prevent and treat it. The recipes for all senior meals were analyzed to determine sodium content.

Participation and leadership on various groups, such as NYSARH, R-AHEC, the Finger Lakes Perinatal Network, the New York State Oral Health Coalition, The Finger Lakes Performing Provider System (FLPPS), and the Common Ground Health (formerly the FLHSA) Partnership on the Uninsured.

With the help of the Network staff, Seneca County undertook the task of assessing the health of the county and its residents. After the compilation of county and regional data by Common Ground Health, and analysis of additional data and holding focus groups by the Network, the CHIP committee Seneca Health Solutions developed a CHIP work plan. The Network ensured that the CHA/CHIP met the necessary NYSDOH and IRS requirements as well as were in line with PHAB standards and measures. The use of evidence based Public health intervention is stressed in the Seneca County Community Health Improvement Plan. The Network worked with our staff from the Seneca County Health Department, Geneva General Hospital and several community partners to complete the community health assessment process.

Joint regional efforts focused primarily on worksite wellness, farm to cafeteria, breastfeeding and hypertension in an effort to work regionally to prevent and reduce the burden of chronic disease in Seneca County and across the Finger Lakes region.

2020 Financial Report

The following analysis includes the operational budget of both Public and Environmental Health departments. The programs included in these budgets are Rabies, Emergency Preparedness, Chronic Disease, Lead Poisoning Prevention, Early Intervention, Preschool, Rabies, Injury Prevention, Family Health, and Communicable Disease.

Program	2020 Budget	2020 Actual Cost	2020 Revenue	2020 Cost to County
PH/EH ADMIN	\$1,332,535.00	\$1,224,901.56	\$764,563.77	\$460,337.79
CSHCN	\$17,393.00	\$13,009.33	\$12,613.79	\$395.54
EMERGENCY PREPAREDNESS	\$152,698.00	\$121,776.97	\$124,007.92	-\$2,230.95
LEAD	\$27,396.00	\$18,815.52	\$14,168.95	\$4,646.57
IMMUNIZATIONS	\$31,050.00	\$18,223.02	\$19,338.72	-\$1,115.70
EI ADMIN	\$18,088.00	\$22,089.19	\$11,821.00	\$10,268.19
CYSHCN-SS	\$20,000.00	\$14,345.51	\$8,507.90	\$5,837.61
ATUPA	\$27,294.00	\$2,611.80	\$15,460.38	-\$12,848.58
WATER GRANT	\$92,849.00	\$63,607.92	\$85,565.26	-\$21,957.34
RABIES	\$10,234.00	\$25,629.18	\$14,115.92	\$11,513.26
HHW	\$18,000.00	\$11,838.49	\$13,418.48	-\$1,579.99
EARLY INTERVENTION	\$265,000.00	\$113,655.11	\$55,226.81	\$58,428.30
PRESCHOOL	\$2,050,000.00	\$1,629,033.58	\$767,168.28	\$861,865.30
GRAND TOTALS	\$4,062,537.00	\$3,279,537.18	\$1,905,977.18	\$1,373,560.00

During 2020 staff time that was usually spent under certain grants, but staff was diverted to COVID response, was allowed to be claimed as part of those grants. For this reason the above chart does show some revenues that exceeded actual expenses for those grants as only expense for time spent in the grant was recorded here.

2020 Financial Report

Environmental Health Revenues:

	2018	2019	2020
Food Service Permits Hotel/Motel/Campground/MHP	11730.00	12070.00	9220.00
Tanning Permits	0	1290.00	0
Septic Plan Application Fee	3200.00	3200.00	4325.00
FOIL Copies	0	39.75	0
Subdivision Fee	350.00	0	0
Plan Review Fee	1125.00	3950.00	1400.00
Administrative Fines			
ATUPA	0	350.00	350.00
Water	0	500.00	0
CIAA	0	0	0
Food	450.00	0	0
COVID19	0	0	2000.00
Donations			
Rabies	1120.00	727.00	756.25
Total Revenue	17,975.00	22,126.75	18,051.25

Governance /Seneca County Board of Health: The Seneca County Board of Health serves as the governing authority for the Health Department. Departmental activities and programs are monitored and reports are provided to the Board of Supervisors monthly. Members of the Board of Health are appointed by the Board of Supervisors and serve a six year term. As stipulated in Public Health Law, board membership consists of; three physicians who reside in Seneca County, three community members, and one representative from the Board of Supervisors.

2020 Board of Health Members

Timothy Ryan, MD
Grace Freier, MD

Dr. Andrew Reese
Ron McGreevy

Phyllis Motill
Martha Bond

2020 Board of Supervisors Public Health Committee:

Ron McGreevy - Supervisor Town of Tyre (Chair)
Michael Reynolds, Supervisor – Town of Covert (Vice-Chair)
Joseph Borst, Supervisor – Town of Ovid
Michael Enslow, Supervisor – Town of Waterloo
James Cleere, Supervisor – Town of Waterloo

Health Advisory Committee: Members of the Health Advisory Committee are appointed by the Director of Public Health. The purpose of this committee is to provide oversight to the Quality Improvement Program of the Health Department and to assist the Board of Health with program guidance and recommendations. The Health Advisory Committee meets quarterly to review the following Quality Improvement activities:

- Policies and Procedures
- Complaints
- Incidents
- Grant quarterly/annual reports
- The Community Health Improvement Plan
- Quality Improvement Activities including: Patient/Client satisfaction surveys, Program record audits, Provider quality improvement outreach and agency specific quality improvement activities.

2020 Committee Members:

Chris DeVaney
Olivia Vendetti
Angela Reardon
Diana LaPrade
Timothy Ryan, MD
John Quattrociochi
Lacey Page

Vickie Swinehart
Mary Jo Flynn
Carmen Bello
Sharon Galasso
Mary Sawall
Dr. Jeanmarie Burke
Kerry VanAuken

AJ VanCuren
Harleen Gilbert
Connie Richardson
Tom Scoles
Erica Callahan
Mary Reese