

HEALTH & HUMAN SERVICES COMMITTEE MEETING MINUTES  
MARCH 30, 2016

HEALTH & HUMAN SERVICES COMMITTEE MEMBERS PRESENT: Shay, LaPointe, Suprenant, Campbell, Pitts, Fedler, Moore

HEALTH & HUMAN SERVICES COMMITTEE MEMBERS ABSENT: None.

SUPERVISORS: Henke, Hicks, Gang, O'Brien

Debra Prehoda, Clerk

Al Nolette, Treasurer

Gina Cantanucci-Mitchell, OFA Director

Sam Hall, Veterans Director

Tammy DeLorme, Commissioner DSS

Public

Chris DeBolt, Assistant Co. Administrator

Roger Wickes, County Attorney

Patty Hunt, Public Health Director

Andrew DePalo, Deputy Dir. Veterans

Mike Gray, Youth Bureau

AGENDA AS PRESENTED IN COMMITTEE NOTICE:

1) Call to Order

2) Accept Minutes – February 27, 2016

3) Department Reports/Requests:

A. ADRC/OFA

1) 2015 Annual Report

B. Department of Social Services

1) Annual Report

2) Program Updates

C. Youth Bureau

1) Agency Update

2) Youth Board Appointments

3) Permission to Change Staffing Pattern – Remove Sr. Account Clerk/Add Court Referral Specialist

D. Public Health

1) County Health Rankings 2016 – Washington County Status

2) Car Seat Grant – Permission to Apply

3) NYSPHA Conference April – Permission to Attend

4) 2016 Agency Goals

5) Miscellaneous

4) Other Business

5) Adjournment

Chairman Shay called the meeting to order at 10:00 A.M.

A motion to approve the minutes of the February 24, 2016 meeting was moved by Mr. Suprenant, seconded by Mr. Moore and Mrs. Fedler and adopted.

ADRC/OFA – Gina Cantanucci-Mitchell, Director, addressed the following items with the committee:

- Software Program – She budgeted for \$4,000 for software in her 2016 budget and the State was supposed to take over after three-months the software expense; be the main hub and pay for the software. The State is not taking over the software yet and the County is responsible to pay. For the committee's information, a budget transfer was processed moving \$10,650.00 from the subcontract line to software to cover this expense

2015 ANNUAL DSS/OFA REPORT – DSS Commissioner DeLorme and OFA Director Gina Cantanucci-Mitchell, distributed and provided an overview of their joint 2015 Annual Report, on file. Questions and comments: The Treasurer mentioned OFA program revenue (meal

donations) is declining noting that the meal count is up but the revenue is down. Donations are voluntary and not tracked; not allowed to track. Gina stated it can be challenging to project. Commissioner DeLorme stated they plan to present more detailed annual reports on the years ending in zero and five and smaller updated revisions other years. She encouraged Supervisors to review the information and if more detail on a program is requested, please let her know. She also highlighted in the report concerning trends which included the following: heroin epidemic and homelessness. ***After the meeting, Commissioner DeLorme followed up with information in response to a question regarding “Number of Reports Called in Per Town in 2015” chart that is on page 10 of the annual report. The chart was tabulated with the following adjustments:***

***Eagle Bridge & Buskirk were put into Cambridge  
Middle & North Granville were put into Granville  
Comstock was put into Fort Ann  
West Hebron was put into Hebron***

DEPARTMENT OF SOCIAL SERVICES – Tammy DeLorme, Commissioner, addressed the following items with the committee:

- Program Updates:
  - Shadow a Worker – handout attached.
  - Work Assignment Locations – handout attached.
  - Able bodied adults without dependents (someone between the ages of 18 and 49 with no one in their caseload under the age of 18) – There had been a waiver in place that did not require DSS to track the recipients of SNAP benefits to tell them if they were working and how many hours but that is back in effect for this year. DSS increased one staff position and good tracking has been developed. If they have not given DSS the information they need, their benefits will be cut. Currently have about 250 cases.
  - iPads – Budgeted and purchased 23 iPads with 20 currently in use in field by Caseworkers. They have provided a lot of efficiencies and she plans to ask for more.
  - Medicaid – Notified by the State that weekly payment will increase because of the way it is divided out over the year; from 53 payments in 2015 to 52 payments.
  - During State budget discussions, the Governor has proposed to end the cap on Medicaid. The County Administrator recommended calls to our legislators. Chairman, Budget Officer and Commissioner will develop a statement to distribute.
  - April is Child Abuse Prevention Month. Wear blue on Friday April 8<sup>th</sup>.

YOUTH BUREAU – Mike Gray, Director, addressed the following items with the committee:

- Agency Update:
  - 2015 Youth Bureau Annual Report – Distributed and provided an overview of the attached 2015 Youth Bureau Annual Report. Recreation funding to the towns will be flat for the next year. Discretionary funding in the amount of about \$24,000 is used to support programs through Big Brothers & Big Sisters, Cornell Cooperative Extension Washington County Alternative Sentencing – Community Service Program, Catholic Charities/ALB Diocese, Fort Edward Historical Association, Homeless Youth Coalition and Council for Prevention. The 2015 accomplishments, 2016 goals and Washington County Youth Stats are included in the report. Working with Public Health on possibly doing a Spartan race; a kids’ obstacle course.

- Youth Board Appointments – A motion to appoint/reappoint the following individuals to the Washington County Youth Advisory Board: Tammy DeLorme, Town of Whitehall, Morgan Harrison, Town of Kingsbury, Polly Monahan, Town of Hebron, Mitchell Suprenant, Torn of Fort Edward, and Anthony White, Town of Kingsbury was moved by Mr. Campbell, seconded by Mrs. Fedler and Mr. Moore and adopted.
- Permission to Change Staffing Pattern – Mentioned and approved yesterday at Public Safety, to correct the Staffing Pattern removing a Senior Account Clerk position and adding a Court Referral Specialist.

PUBLIC HEALTH – Patty Hunt, Director, addressed the following items with the committee:

- County Health Rankings 2016 – Distributed and provided an overview of the rankings, handout attached. Improved ranking in adult smoking from the previous year. They are held as a health department accountable and they need to show improvement.
- Car Seat Grant – A motion to authorize permission to apply for car seat grant was moved by Mr. LaPointe, seconded by Mr. Pitts and adopted.
- NYSPHA Conference – A motion to approve attendance at NYSPHA conference on April 21<sup>st</sup> and 22<sup>nd</sup> in Cooperstown with all expenses covered by the Rural Health Network except her time out of the office was moved by Mrs. Fedler, seconded by Messrs. Campbell and Moore and adopted.
- 2016 Agency Goals – distributed attached. Mentioned staffing succession planning with multiple retirements coming up.
- Miscellaneous:
  - Write Off Amounts for 2013 the last year of their operations as a CHHA and Long Term Home Health Care Program - The write off amounts: CHHA \$41,343.09 and LTHHCP \$12,057.27 for a total of \$53,400.36; 1.8% of total revenue. The Treasurer stated a formal resolution is not required because of the sale. A motion to approve write off amounts for CHHA \$41,343.09 and LTHHCP \$12,057.27 was moved by Mr. LaPointe, seconded by Mr. Suprenant and adopted.
  - Internship Request for Summer Semester – This is a seven week unpaid internship for a student from SUNY Potsdam working with the Health Educator. A motion to approve unpaid internship was moved by Mr. Pitts, seconded by Mrs. Fedler and adopted.

VETERANS SERVICES – Andy DePalo, Deputy Director, addressed the following items with the committee:

- Unpaid Volunteer – Requesting to bring on Sam Hall as an unpaid volunteer as needed. A motion to approve request to bring on Sam Hall as an unpaid volunteer was moved by Mrs. Fedler, seconded by Mr. Moore and adopted.
- Sam Hall stated this was his last committee meeting adding that it has been a pleasure to work with everyone. He was granted permission from Chairman Henke to address the Board of Supervisors at the April 15<sup>th</sup> meeting.

OTHER BUSINESS: None.

The meeting adjourned 11:56 A.M.

*Respectfully submitted,*

*Debra Prehoda, Clerk, Washington County Board of Supervisors*

**WASHINGTON COUNTY**  
**DEPARTMENT OF SOCIAL SERVICES**

383 Broadway, Fort Edward, New York 12828

Telephone (518) 746-2300

Fax (518) 746-2355



Tammy L. DeLorme, Commissioner

The Washington County Board of Supervisors members are invited to "shadow" a worker from DSS and/or OFA. The worker that you would be shadowing would be performing normally scheduled tasks while they carry out the standard duties of their assigned program.

If you are interested, please provide the information requested at the bottom of this letter and return it to Gina Cantanucci-Mitchell or me at your earliest convenience. Thank you for your consideration of this offer, which is made to assist Board members in becoming more familiar with the programs administered by the Departments and the duties performed by it's employees.

It is possible to request time with more than one program. We will contact you to make the arrangements for you to join an employee of the Department once we have been able to appropriately link you with the program unit(s) you request below.

Sincerely,

Tammy L. DeLorme

-----

I would like to shadow a worker from the Department(s) as they carry out their standard duties. The time frame/day of the week that would be best for my availability are as follows: (please provide as much information as you can for times that are best for you)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

The program(s) that I am most interested in observing are:

Administration:

Accounting/Claiming

Assistance Programs:

- Reception Area
- Intake Team
- Investigations (Fraud)
- Medicaid
- HEAP(Seasonal)

Aging and Disabilities Resource Center:

- Adult Protective Services
- Resource Center

Children's Services:

- Child Support & Enforcement
- Preventive Services (specify for PINS)
- Child Protective Services (Inv. & FAR)
- Placement Services

Additionally, I understand that I will be asked to read and sign a confidentiality policy before I am permitted to have access to client specific information.

Supervisor \_\_\_\_\_, Town of \_\_\_\_\_  
Best way to contact me: \_\_\_\_\_



Washington County Social Services can assign clients to work for any Federal, State, County, City, Village or Town office or not-for-profit agency. The purpose of this is to help individuals attain economic self-sufficiency through gaining valuable work experience.

Since the individual is working hours based on how much assistance they are receiving, this work would be free to you and your municipality.

Some of the jobs currently being done are: data entry, filing, clerical, reception, highway maintenance, recycling, and printing. We are also looking for work-sites that can accommodate people with limitations and/or disabilities.

Work-site responsibilities include:

1. Provide the work
2. Provide supervision
3. Report to Social Services the progress and hours worked by the individual.

Washington County Department of Social Services will provide each participant with compensation or equivalent protection for on-the-job injuries.

**IF INTERESTED**, please fill out the information below and return to:  
**Judy Taylor, Supervisor of Employment Programs at Washington County Department of Social Services**

Town / Village Name: \_\_\_\_\_

Contact person: \_\_\_\_\_

Telephone Number: \_\_\_\_\_



# 2015 Youth Bureau Annual Report

A central foundation in *youth development* is to provide young people with consistent, positive messages from everyone in their lives.

The *Youth Bureau* is a county agency that supports a variety of resources and tools that promote positive youth development principles to build and strengthen children and youth, families and Washington County communities.

With best practices in place, the *Youth Bureau* is available to offer funding and technical support to Washington County community programs that strive to provide opportunities for youth to gain important life skills and core competencies. With these programs, young people can strengthen their assets, set goals and have a vital role in the future of their communities.

- **According to the 2010 census, there are 16,600 youth between the ages of 0 and 20 in Washington County.**

## What programs does the Youth Bureau support?

### Town/Village Youth Recreation Programs

Youth Served in 2015 = 7,049

#### **Sponsoring Agency**

**Town of Argyle**

#### **Program Title**

**Argyle Youth Recreation Commission**

The program provides year round recreation programs for youth. Sports: Baseball/Softball, Basketball, Soccer, Swimming and Skiing to provide constructive leisure time opportunities.

**494 Youth Served**

#### **Village of Cambridge**

#### **Cambridge Youth Commission**

The program provides positive, well-supervised, free or low cost activities such as swimming, arts & crafts, field trips and individual recreational sports for the youth in the village of Cambridge, and the towns of Jackson, Cambridge and White Creek.

**137 Youth Served**

#### **Town of Easton**

#### **Easton Youth Commission**

The program provides activities to improve youth commitment and skills in conventional activities (swimming, arts & crafts, kickball, and skiing), developing teamwork and social skills. They provide experience in arts and entertainment at special times of the year: holiday parties and field trips.

**153 Youth Served**

**Town/Village of Fort Ann****Fort Ann Youth Recreation**

The program provides positive leisure time activities: swim lessons, playground activities (softball, kickball, soccer, horse shoes, etc.), arts & crafts and field trips.

**125 Youth Served**

**Town of Fort Edward****Fort Edward Recreation**

The program provides supervised free swimming, swim lessons and positive recreational service time to all youth in the town of Fort Edward.

**1,600 Youth Served**

**Village of Fort Edward****Fort Edward Recreation**

The program provides recreational opportunities and alternatives via activities such as: basketball, softball, dodge ball, golf, bowling, arts & crafts and field trips for the youth of the village during the summer months.

**715 Youth Served**

**Town of Granville****Town of Granville Youth Commission**

The program provides constructive leisure time opportunities: ice skating, baseball and a six-week summer program with arts & crafts, basketball, tennis, track and playground. Hebron Nature Preserve Program.

**561 Youth Served**

**Village of Granville****Granville Youth Commission**

The program provides constructive leisure time activities: swim instruction, safety skills and free swim time. Youth are transported to Lake St. Catherine.

**45 Youth Served**

**Town of Greenwich****Town of Greenwich Youth Commission**

Their goal is to provide and improve youth commitment to conventional activities: ski program in winter, arts & crafts, playground, tennis, a six-week swim program in the summer and a variety of field trips.

**114 Youth Served**

**Town of Hartford****Hartford Youth Commission**

The program provides opportunities for constructive and educational leisure time activities: swimming, arts, skiing and field trips.

**188 Youth Served**

**Town of Hebron****Hebron Youth Commission**

The program provides recreational programs that offer youth opportunities to learn life-long interests and constructive leisure time: swim instruction, free swim and arts & crafts.

**97 Youth Served**

**Town of Kingsbury****Kingsbury Youth Recreation**

The program provides healthy recreation activities: playground, swim, basketball, soccer, tennis, volleyball and field hockey programs; pee wee wrestling, cheerleading camp and ice skating.

**1,860 Youth Served**

**Town of Putnam****Putnam Recreation Program**

The program provides a variety of recreational activities, including a swim program.

**38 Youth Served**

**Town/Village of Salem****Salem Recreation Commission**

The program provides a swimming and middle league baseball program.

**131 Youth Served**

**Town of Whitehall****Whitehall Joint Recreation Program**

The program provides various activities to promote, stimulate, and improve a wholesome mind and body for all ages throughout the year and special programs in the summer. Such activities include: basketball, baseball, arts & crafts and softball.

**791 Youth Served**

**Agency Programs which are monitored/supported through the Youth Bureau**

2,793 Youth served / 77 adults served

**Sponsoring Agency****Program Title**

**Big Brothers & Big Sisters**

**Big Brothers & Big Sisters of Southern Adirondacks**

*One to one mentoring match; sponsored monthly activity; community service opportunities (youth mentors); summer art enrichment programming*

**263 Youth Served**

**Cornell Cooperative Extension****Strong Communities/Healthy Families**

Engage individuals and communities, through education, to develop knowledge, skills and leadership to improve the quality of life for themselves, their families and communities, parenting education programs.

**85 Parents attended / 182 Youth impacted**

**Washington County Alternative Sentencing Agency****Community Service Program**

Community work program as an alternative to traditional forms of incarceration of youth involved in the juvenile system.

**85 Youth Served**

**Catholic Charities/ALB Diocese      Community Maternity Services**

Community services outreach program: offers supportive services to pregnant and parenting adolescents, adolescent fathers and their families.

**49 Youth Served**

**Fort Edward Historical Association      Educational Study Program**

This is an educational study program that teaches our county's youth their rich historical heritage and how we fit into the national historical fabric using our museum collection, etc.

**1,551 Youth Served**

**Homeless Youth Coalition      Warren/Washington County Youth Shelter**

Operation of a NYS certified short-term runaway/homeless youth shelter for youth ages 16-21.

**60 Youth Served**

**Council for Prevention      Tomorrows Leaders**

The Council for Prevention conducted an Olweus Bullying Questionnaire, the most researched bullying prevention program available to date. The results of the survey will provide a catalyst to allow the schools, The Council for Prevention and the Youth Bureau to concentrate on an active, proactive plan to reduce bullying incidences and prevent further problems.

**211 Youth Served**

**Youth Bureau Activities**

**First Aid/CPR Certification**

Youth Bureau Coordinator is a trained CPR facilitator; trainings provided to recreation program staff, Felony Drug Court participants, Youth Bureau/Alternative Sentencing Staff

**26 Youth Served / 39 Adults Served**

**Job Corps Facilitation-Meetings/Tours**

Program coordinator facilitates placement of youth to Northlands Facility in Vermont for alternative educational opportunities.

**10 Youth Served**

### **Youth Leadership Forum (Albany)**

4 youth are chosen to represent Washington County; attend workshops and experience leadership opportunities, they learn to lobby on local issues and meet with local government officials.

**4 Youth Served**

### **Test Assessing Secondary Completion (TASC)**

In collaboration with the Washington County Employment and Training Department.

**13 Youth Received a TASC certificate**

### **Safe Sitter**

Educational program designed to teach young the the knowledge of first aid, rescue skills, behavior management techniques, and life experiences necessary for handling medical, behavioral, or household emergencies which might occur when they are babysitting or watching younger siblings.

**22 Youth/Salem Library & Youth Bureau**

### **Recreation/Volunteer Program Background Checks**

In collaboration with the Washington County Sheriff's Department

**8 Recreation Volunteers**

### **Life Guard Certification**

**13 youth/adults became certified**

### **Safe Harbour Training**

Utilizing funding from OCFS we were able to provide a training on Sex Trafficking and Sexually Exploited Youth to 110 participants.

## **2015 Accomplishments**

- Developed leadership opportunities for Washington County youth.
  - Youth Forum
  - Washington County Youth Board
  - Washington County Winterfest
  - Granville Youth Service Day
- Provided CPR / First Aid training to recreation programs.
- Continued work in our community garden that produced 600+ pounds of produce for Washington County senior citizens.
- Streamlined recreation funds/reporting to towns and municipalities.
- Continued collaborations with other county departments and youth service organizations to provide youth opportunities.
- Continue to be a resource for Washington County youth and families.
- Continue to offer the following programs; Values Improvement Program, Thinking for a Change, Drug and Alcohol Education Awareness Class and Alive @ 25, which help offset the county net cost.
- Continue to offer Safe Sitter training classes for Washington County Youth.
- Facilitated a Life Guard Training for 13 youth/adults
- Safe Harbour Training for 110 participants

## **2016 Goals**

- To increase funding for recreation programs and streamline reporting.
- To be a resource and work with communities to provide youth leadership opportunities.
- To collaborate with other County departments to promote positive youth development in the most cost-effective way.
- To provide fresh produce for Washington County seniors through the Community Garden.

- ❑ To provide an opportunity for youth and families to participate in a day of outdoor winter activities that promote healthy lifestyles.
- ❑ To expand Safe Sitter to other communities in Washington County.
- ❑ To offer at least one Life Guard training.
- ❑ To Collaborate with County and Community Agencies to best provide services that are in line with the Safe Harbour legislation.

## Washington County Youth Stats

### Social Services 2014

134	PINS Referrals
	- 41 Parental
	- 93 School
12	JD Referrals
25	Child Neglect placements
1	PINS adjudication placements

*\*DSS 2014 Annual Reports*

### Graduation Rate

Argyle	85% of 46 total cohort
Cambridge	90% of 61 total cohort
Fort Ann	96% of 26 total cohort
Fort Edward	67% of 33 total cohort
Granville	78% of 100 total cohort
Greenwich	86% of 88 total cohort
Hartford	82% of 39 total cohort
Hudson Falls	73% of 152 total cohort
Salem	87% of 45 total cohort
Whitehall	85% of 65 total cohort

*\* 2014-2015 NYS School Report Card*

### Drop Out Rate

Argyle-	2% of 46 total cohort
Cambridge-	7% of 61 total cohort
Fort Ann-	4% of 26 total cohort
Fort Edward-	12% of 33 total cohort
Granville-	9% of 100 total cohort
Greenwich-	5% of 88 total cohort
Hartford-	5% of 39 total cohort
Hudson Falls-	16% of 152 total cohort
Salem-	9% of 45 total cohort
Whitehall-	5% of 65 total cohort

*\* 2014-2015 NYS School Report Card*

**Teen Pregnancy Rate  
by zip code**

	2009-2011	2010-2012
12839	57.2	46.6
12887	50.8	35.6
12816	49.5	47.9
12828	40.1	33.3
12865	38.7	43.6
12832	38.4	32.3
12827	37.4	33.3
12028	25.2	17.2
12834	25.1	20.9
12809	24.2	31.1
12057	14.9	36.5

**Total County Numbers**

Ages 15-19 Total Rates per 1,000:

Pregnancies	36.7
Live Births	24.9

Actual Number of total births for age 15-19 from 2010-2012: 1,883

\*Zip codes with fewer than 30 15-19 year old females were not included.

\* Pregnancy rates are the number of pregnancies per 1,000 females ages 15-19 years.

\*Table does not display results for zip code areas with fewer than 10 births during 3-yr. period; however the total does reflect all births in County.

Updated March, 2014

[www.health.ny.gov](http://www.health.ny.gov)

**Incarceration (2013 and 2014)**

Age	Males		Female	
	2015	2014	2015	2014
16	3	0	0	0
17	8	15	2	3
18	9	27	1	3
19	19	23	2	1
20	22	32	3	5
Totals	61	97	8	12

\* Washington County Sheriffs 2014 and 2015 Annual Reports

**Overall Lifetime Substance Use (%)**

Substance	2009	2012
Alcohol	60.6	40.6
Barbiturates	2.2	NA
Cocaine	3.7	NA
Crack	3.1	NA
Ecstasy	2.5	NA
Heroin	1.8	NA
Inhalants	11.4	NA
Marijuana	25.3	19.8
Non-RX Cough	NA	4.9
OTC Caffeine	NA	4.3
RX Pain Relievers	NA	15.4
Steroids	1.4	0.9
Synthetic Cannabinoids	NA	7.6
Synthetic Stimulants	NA	1.4

\* Council for Prevention 2009 & 2012 Washington County Student Substance Use Survey Reports

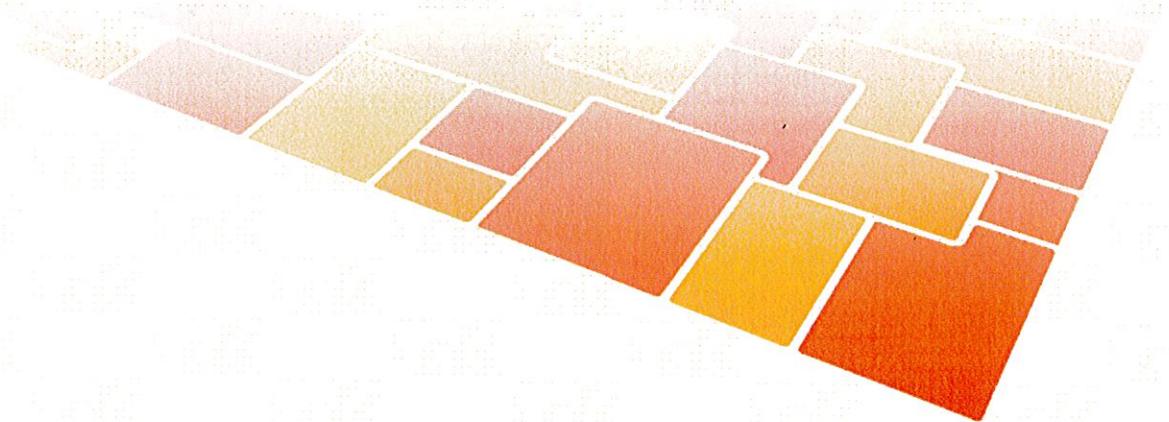
**County Health  
Rankings & Roadmaps**

Building a Culture of Health, County by County

A Robert Wood Johnson Foundation program

**2016 County Health Rankings**

**New York**



A collaboration between the Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute.



Support provided by

Robert Wood Johnson Foundation 

Washington County	Washington County Health Rankings Trend Analysis-2016						
	2016	2015	2014	2013	2012	2011	2010
<b>Health Outcomes</b>	<b>38</b>	<b>46</b>	<b>36</b>	<b>42</b>	<b>44</b>	<b>45</b>	<b>44</b>
Length of Life	36	46	33	33	36	42	46
Premature death	6300	6525	6003	6,003	6245	6645	6916
Quality of Life	31	36	38	45	44	41	32
Poor to Fair Health	12%	16%	16%	17%	19%	18%	17%
Poor phys. Health days	3.3	3.7	3.7	3.9	4.3	4	4
Poor mental health days	3.5	3.1	3.1	3.1	3.3	3.1	2.6
Low Birth weight	8.00%	7.60%	7.70%	7.80%	7.30%	7.40%	7.00%
<b>Health Factors</b>	<b>38</b>	<b>46</b>	<b>40</b>	<b>40</b>	<b>46</b>	<b>36</b>	<b>36</b>
<b>Health Behaviors</b>	<b>41</b>	<b>49</b>	<b>53</b>	<b>56</b>	<b>56</b>	<b>47</b>	<b>53</b>
Adult smoking	15%	28%	28%	28%	30%	29%	28%
Adult obesity	30%	29%	28%	29%	29%	27%	27%
Food Environment Index	8.1	8.4	8.9				
Physical Inactivity	24%	25%	28%	31%	31%		
Access to exercise opport.	62%	64%	43%				
Binge drinking							14%
Excessive drinking	19%	12%	12%	13%	13%	13%	
Motor vehicle crash death rate				15	17	18	19
Alcohol impaired driving deaths	28%	30%	32%				
Sexually transmitted infections	203.4	240	239.00	259	175	116	115
Teen birth rate	31	31	31	31	31	30	30
<b>Clinical Care</b>	<b>29</b>	<b>43</b>	<b>34</b>	<b>26</b>	<b>46</b>	<b>39</b>	<b>38</b>
Uninsured	11%	11%	11%	13%	14%	19%	15%
Primary care provider rate							39
Primary care physicians	2,740:1	2,736:1	2,871:1	2,753:1	3,920:1	3,920:1	
Dentists	4,800:1	4,507:1	4,131:1	4,155:1			
Mental Health providers	900:01:00	971:01:00	1,224:1				
Preventable Hospital stays	52	70	71	67	77	78	85
Diabetic screening	88%	88%	89%	92%	89%	89%	90%
Mammography screening	69%	64.30%	68%	70%	70%	71%	
Hospice use							19%
<b>Social &amp; Economic Factors</b>	<b>39</b>	<b>38</b>	<b>33</b>	<b>28</b>	<b>23</b>	<b>26</b>	<b>25</b>
High School graduation	80%	78%	80%	78%	79%	75%	66%
Some college	49%	45.80%	45%	45%	44%	45%	
college degrees							18%
Unemployment	6%	7.10%	7.80%	7.50%	7.80%	7.50%	6%
Children in Poverty	20%	22%	21%	22%	19%	16%	18%
Social Associations	10.1	10.20					
Inadequate social supports			18%	18%	18%	18%	11%
Children in single-parent homes	35%	34%	31%	29%	28%	29%	9%
Violent crime	138	138	130	141	159	179	169
Injury deaths	58	56	52.00				
Income inequality	4						38
<b>Physical Environment</b>	<b>24</b>	<b>15</b>	<b>24</b>	<b>28</b>	<b>40</b>	<b>24</b>	<b>21</b>
Air pollution-particulate matter	10.9	10.9	10.90	10	0	0	3
<b>Washington County</b>		<b>2015</b>	<b>2014</b>	<b>2013</b>	<b>2012</b>	<b>2011</b>	<b>2010</b>
Air pollution- ozone days					0	0	1
Drinking water safety				22%			
Drinking water violations	Yes	7%	16.00%				
Severe Housing problems	16%	16%	16.00%				
Driving alone to work	78%	80%	80%				
Long commute-driving alone	38%	37%	39%				
Access to recreational facilities				9	13	13	
Limited access to healthy foods				4%	20%	33%	30%
Fast Food restaurants				44%	41%		
Liquor store density							0.8

**Rankings & Roadmaps**  
 Building a Culture of Health, County by County

**HEALTH OUTCOMES - OVERALL RANK**

Rank	County
1	Saratoga (SA)
2	Nassau (NA)
3	Rockland (RO)
4	Putnam (PU)
5	Westchester (WE)
6	Madison (MA)
7	Tompkins (TO)
8	Wyoming (WO)
9	Suffolk (SF)
10	Dutchess (DU)
11	New York (NY)
12	Livingston (LI)
13	Ontario (OT)
14	Warren (WA)
15	Yates (YA)
16	Ulster (UL)
17	Queens (QU)
18	Schuyler (SU)
19	Otsego (OG)
20	Schoharie (SH)
21	Wayne (WY)
22	Lewis (LE)
23	Orange (OR)
24	Cayuga (CY)
25	Seneca (SE)
26	Richmond (RI)
27	Genesee (GE)
28	Herkimer (HE)
29	Columbia (CO)
30	Clinton (CL)
31	Steuben (ST)
32	Rensselaer (RE)
33	Monroe (MN)
34	Onondaga (OO)
35	Albany (AL)
36	Tioga (TI)
37	Essex (ES)
38	Washington (WS)
39	Chenango (CN)
40	Jefferson (JE)

41	Cortland (CT)
42	Delaware (DE)
43	Oneida (ON)
44	Orleans (OL)
45	Oswego (OS)
46	Montgomery (MO)
47	Fulton (FU)
48	Allegany (AE)
49	Schenectady (SC)
50	Chemung (CE)
51	St. Lawrence (SL)
52	Kings (KI)
53	Franklin (FR)
54	Hamilton (HA)
55	Niagara (NI)
56	Broome (BO)
57	Erie (ER)
58	Chautauqua (CH)
59	Greene (GR)
60	Cattaraugus (CA)
61	Sullivan (SV)
62	Bronx (BR)

**Overall Rank**

An overall ranking for all Health Outcomes combined.



**HEALTH FACTORS - OVERALL RANK**

Rank	County
1	Nassau (NA)
2	Putnam (PU)
3	Westchester (WE)
4	Saratoga (SA)
5	Suffolk (SF)
6	Tompkins (TO)
7	Dutchess (DU)
8	Rockland (RO)
9	Albany (AL)
10	Ontario (OT)
11	New York (NY)
12	Warren (WA)
13	Columbia (CO)
14	Rensselaer (RE)
15	Hamilton (HA)
16	Schenectady (SC)
17	Madison (MA)
18	Orange (OR)
19	Ulster (UL)
20	Otsego (OG)
21	Onondaga (OO)
22	Genesee (GE)
23	Livingston (LI)
24	Wyoming (WO)
25	Monroe (MN)
26	Tioga (TI)
27	Essex (ES)
28	Richmond (RI)
29	Cortland (CT)
30	Wayne (WY)
31	Broome (BO)
32	Erie (ER)
33	Queens (QU)
34	Seneca (SE)
35	Cayuga (CY)
36	Delaware (DE)
37	Chenango (CN)
38	Washington (WS)
39	Schoharie (SH)
40	Yates (YA)

41	Schuyler (SU)
42	Clinton (CL)
43	Greene (GR)
44	Allegany (AE)
45	Niagara (NI)
46	Lewis (LE)
47	Oneida (ON)
48	Steuben (ST)
49	Herkimer (HE)
50	Montgomery (MO)
51	Chautauqua (CH)
52	Jefferson (JE)
53	Chemung (CE)
54	Cattaraugus (CA)
55	Orleans (OL)
56	Fulton (FU)
57	Oswego (OS)
58	St. Lawrence (SL)
59	Sullivan (SV)
60	Franklin (FR)
61	Kings (KI)
62	Bronx (BR)

**Overall Rank**

An overall ranking for all Health Factors combined.



# County Health Rankings & Roadmaps

Building a Culture of Health, County by County

## Washington (WS)

	Washington County	Error Margin	Top U.S. Performers <sup>^</sup>	New York	Rank (of 62)
<b>Health Outcomes</b>					<b>38</b>
<b>Length of Life</b>					<b>36</b>
Premature death	6,300	5,500-7,000	5,200	5,400	
<b>Quality of Life</b>					<b>31</b>
Poor or fair health**	12%	12-13%	12%	17%	
Poor physical health days**	3.3	3.1-3.5	2.9	3.6	
Poor mental health days**	3.5	3.4-3.7	2.8	3.7	
Low birthweight	8%	7-9%	6%	8%	
<b>Health Factors</b>					<b>38</b>
<b>Health Behaviors</b>					<b>41</b>
Adult smoking**	15%	15-16%	14%	14%	
Adult obesity	30%	23-37%	25%	24%	
Food environment index	8.1		8.3	7.9	
Physical inactivity	24%	18-31%	20%	24%	
Access to exercise opportunities	62%		91%	91%	
Excessive drinking**	19%	18-20%	12%	17%	
Alcohol-impaired driving deaths	28%	20-36%	14%	23%	
Sexually transmitted infections	203.4		134.1	489.5	
Teen births	31	28-34	19	23	
<b>Clinical Care</b>					<b>29</b>
Uninsured	11%	10-12%	11%	12%	
Primary care physicians	2,740:1		1,040:1	1,200:1	
Dentists	4,800:1		1,340:1	1,280:1	
Mental health providers	900:1		370:1	420:1	
Preventable hospital stays	52	46-58	38	53	
Diabetic monitoring	88%	81-96%	90%	86%	
Mammography screening	69%	60-77%	71%	62%	
<b>Social &amp; Economic Factors</b>					<b>39</b>
High school graduation	80%		93%	77%	
Some college	49%	45-52%	72%	66%	
Unemployment	6.0%		3.5%	6.3%	
Children in poverty	20%	15-25%	13%	23%	
Income inequality	4.0	3.7-4.3	3.7	5.6	
Children in single-parent households	35%	29-40%	21%	35%	
Social associations	10.1		22.1	7.9	
Violent crime	138		59	400	
Injury deaths	58	49-66	51	42	
<b>Physical Environment</b>					<b>24</b>
Air pollution - particulate matter	10.9		9.5	11.7	
Drinking water violations	Yes		No		
Severe housing problems	16%	15-18%	9%	24%	
Driving alone to work	78%	76-80%	71%	54%	
Long commute - driving alone	38%	35-41%	15%	36%	

<sup>^</sup> 10th/90th percentile, i.e., only 10% are better.

Note: Blank values reflect unreliable or missing data

\*\* Data should not be compared with prior years due to changes in definition/methods

2016

**County Health Rankings & Roadmaps**

Building a Culture of Health, County by County

	New York	Washington (WS), NY	Warren (WA), NY	Saratoga (SA), NY	Essex (ES), NY
Health Outcomes		38	14	1	37
Length of Life		36	14	6	30
Premature death	5,400	6,300	5,500	4,500	6,000
Quality of Life		31	15	2	43
Poor or fair health	17%	12%	11%	10%	12%
Poor physical health days	3.6	3.3	3.2	2.9	3.3
Poor mental health days	3.7	3.5	3.5	3.3	3.4
Low birthweight	8%	8%	7%	7%	9%
Health Factors		38	12	4	27
Health Behaviors		41	14	9	20
Adult smoking	14%	15%	14%	14%	14%
Adult obesity**	24%	30%	26%	26%	29%
Food environment index**	7.9	8.1	8.1	8.6	8.1
Physical inactivity**	24%	24%	21%	23%	27%
Access to exercise opportunities	91%	62%	95%	87%	100%
Excessive drinking	17%	19%	19%	21%	19%
Alcohol-impaired driving deaths	23%	28%	24%	26%	30%
Sexually transmitted infections**	489.5	203.4	302.1	208.4	177.1
Teen births	23	31	25	13	20
Clinical Care		29	1	3	41
Uninsured	12%	11%	10%	7%	11%
Primary care physicians	1,200:1	2,740:1	880:1	1,300:1	2,420:1
Dentists	1,280:1	4,800:1	1,070:1	1,600:1	3,220:1
Mental health providers	420:1	900:1	330:1	710:1	700:1
Preventable hospital stays	53	52	46	49	60
Diabetic monitoring	86%	88%	89%	90%	86%
Mammography screening	62%	69%	71%	67%	69%

	York	NY	NY	NY	NY
Social & Economic Factors		39	20	2	28
High school graduation**	77%	80%	83%	86%	85%
Some college	66%	49%	65%	77%	58%
Unemployment	6.3%	6.0%	6.5%	4.6%	6.9%
Children in poverty	23%	20%	21%	10%	18%
Income inequality	5.6	4.0	4.3	4.0	4.1
Children in single-parent households	35%	35%	33%	25%	33%
Social associations	7.9	10.1	12.9	8.2	15.2
Violent crime**	400	138	164	65	122
Injury deaths	42	58	43	38	62
Physical Environment		24	26	21	19
Air pollution - particulate matter	11.7	10.9	11.1	11.1	11.1
Drinking water violations		Yes	Yes	Yes	Yes
Severe housing problems	24%	16%	16%	12%	17%
Driving alone to work	54%	78%	82%	83%	76%
Long commute - driving alone	36%	38%	27%	37%	26%

\*\* Compare across states with caution  
 Note: Blank values reflect unreliable or missing data

2016

## Highlighted health gaps in New York

Highlighted measures (➔) indicate *meaningful gaps* that policymakers and leaders may want to examine more closely. We define *meaningful gaps* as those that are noteworthy or statistically different from a state or U.S. value for factors that have the greatest influence on health (e.g., social and economic factors have a greater influence than clinical care). The best and worst counties represent the top and bottom 10% of county-level values for a given measure in the state or the U.S., respectively.

HEALTH FACTORS	WASH CO.	Best NY Counties	Worst NY Counties	NY Mean	Best US Counties
<b>Health Behaviors</b>					
2016					
Adult smoking: adults who are current smokers	15%	13%	28%	17%	14%
Adult obesity: adults that report a BMI of 30 or more	30%	24%	31%	24%	25%
Food environment index: access to healthy food and food insecurity	8.1	8.8	7.6	8.0	8.4
Physical inactivity: adults reporting no leisure-time physical activity	24%	21%	27%	23%	20%
Access to exercise opportunities: adequate access to locations for physical activity	62%	98%	55%	91%	92%
Excessive drinking: adults reporting binge or heavy drinking	19%	13%	22%	17%	10%
Alcohol-impaired driving deaths: driving deaths with alcohol involvement	28%	14%	36%	24%	14%
Sexually transmitted infections: newly diagnosed chlamydia cases per 100,000 population	203.4	189	541	514	138
Teen births: births per 1,000 females ages 15-19	31	14	33	24	20
<b>Clinical Care</b>					
Uninsured: population under age 65 without health insurance	11%	9%	13%	13%	11%
Primary care physicians: ratio of population to primary care physicians	2,740:1	1,039:1	2,999:1	1,210:1	1,039:1
Dentists: ratio of population to dentists	4,800:1	1,245:1	3,701:1	1,305:1	1,362:1
Mental health providers: ratio of population to mental health providers	960:1	383:1	1,340:1	443:1	383:1
Preventable hospital stays: hospital stays for ambulatory-care sensitive conditions per 1,000 Medicare enrollees	52	52	80	59	41
Diabetic monitoring: diabetic Medicare enrollees, ages 65-75, that receive HbA1c monitoring	88%	89%	84%	86%	90%
Mammography screening: female Medicare enrollees, ages 67-69, that receive mammography screening	69%	72%	59%	63%	71%

HEALTH FACTORS

2016  
WASH CO.

Best NY  
Counties

Worst NY  
Counties

NY Mean

Best US  
Counties

Social & Economic Factors

	2016 WASH CO.	Best NY Counties	Worst NY Counties	NY Mean	Best US Counties
→ High school graduation: ninth-grade cohort that graduates in 4 years	80%	87%	75%	77%	93%
Some college: adults ages 25-44 with some post-secondary education	49%	72%	51%	66%	71%
→ Unemployment: population 16+ that are unemployed but seeking work	6%	6%	9%	8%	4%
→ Children in poverty: children under age 18 living in poverty	20%	13%	29%	23%	13%
→ Income inequality: ratio of 80 <sup>th</sup> /20 <sup>th</sup> percentile of income	4.0	4.0	5.1	5.5	3.7
→ Children in single-parent households: children that live in a household headed by a single parent	35%	23%	39%	35%	20%
Social associations: social associations per 10,000 population	10.1	15	7	8	22
→ Violent crime: violent crime offenses per 100,000 population	138	75	457	400	59
Injury deaths: deaths due to injury per 100,000 population	58	38	58	41	50

Physical Environment

Air pollution: average daily density ( $\mu\text{g}/\text{m}^3$ ) of fine particulate matter (2.5)	10.9	10.8	12.7	11.7	9.5
Drinking water violations: population potentially exposed to water exceeding violation limit during past year	YES	0%	31%	26%	0%
→ Severe housing problems: households with $\geq 1$ of 4 housing problems: overcrowding, high housing costs, lack of kitchen or plumbing facilities	16%	13%	24%	24%	9%
Driving alone to work: workforce that drives alone to work	78%	60%	83%	54%	71%
→ Long commute - driving alone: among workers who commute in their car alone, those that commute more than 30 minutes	38%	19%	47%	36%	15%



# What can be done to help close gaps in New York?

Here are some examples of evidence-informed strategies to improve the above highlighted health factors:

## ➔ Education (High school graduation)

- Community schools Combine academics, physical health, mental health, and social service resources for students and families through partnerships with community organizations
- Dropout prevention programs Provide services such as remedial education, vocational training, case management, health care, and transportation assistance, to help students complete high school
- Targeted truancy interventions Support interventions that provide at-risk students and families with resources to improve self-esteem, social skills, discipline, and unmet needs in order to increase school attendance
- Universal pre-kindergarten (pre-K) Provide pre-K education to all 4-year-olds, regardless of family income

## ➔ Employment (Unemployment)

- Unemployment insurance Extend or raise the compensation provided to eligible, unemployed workers looking for jobs
- Vocational training for adults Support acquisition of job-specific skills through education, certification programs, or on-the-job training

## ➔ Income (Children in poverty, Income inequality)

- Earned income tax credits Look for ways to expand various earned income tax credits for low to moderate income working individuals and families
- Funding for child care subsidy Increase financial assistance to working parents or parents attending school to pay for center-based or certified in-home child care
- Living wage laws Establish locally or state mandated wages that are higher than federal minimum wage levels
- Paid family leave Provide employees with paid

time off for circumstances such as a recent birth or adoption, a parent or spouse with a serious medical condition, or a sick child

## ➔ Family and Social Support (Children in single-parent households)

- Early childhood home visiting programs Provide parents with information, support, and/or training regarding child health, development, and care from prenatal stages through early childhood via trained home visitors
- Extracurricular activities Support organized social, academic, or physical activities for school-aged youth outside of the school day

## ➔ Community Safety (Violent crime)

- Focused deterrence strategies Coordinate law enforcement and community agencies' implementation of focused deterrence strategies (pulling levers) to target particular crimes
- Neighborhood watch Support the efforts of neighborhood residents to work together in addressing local crime and reporting suspicious or potentially criminal behavior
- Restorative justice Develop interventions for victims and offenders focused on repairing the harm a crime caused and collectively determining offender reparations

➔ **Housing and Transit (Severe housing problems, Long commute - driving alone)**

- **Housing rehabilitation loans and grants** Provide funding, primarily to low or median income families, to repair, improve, or modernize dwellings and remove health or safety hazards
- **Low-income housing tax credits** Provide funding via tax credits at the state and local level for the development costs of low income rental housing
- **Mixed-use development** Support a combination of land uses (e.g., residential, commercial, recreational) in development initiatives, often through zoning regulations
- **Service-enriched housing** Coordinate permanent, basic rental housing with social services available onsite or by referral, usually for low-income families, seniors and people with disabilities
- **Public transportation systems** Support transportation options that are available to the general public and run on a scheduled timetable (e.g., buses, trains, ferries, rapid transit, etc.)

Visit *What Works for Health* at [countyhealthrankings.org/what-works-for-health](http://countyhealthrankings.org/what-works-for-health) for information on these and other strategies to improve health in New York.



### Choosing strategies that work

Taking time to choose policies and programs that have been shown to work in real life and that are a good fit for your state will maximize the chances of success. Focusing on policy, systems, and environmental changes – or implementing programs in a broad, systematic way – can lead to the most substantial improvements over time.

The strategies listed above are among many resources in *What Works for Health*, a searchable database of policies or programs that have worked in other places or are recommended by unbiased experts.

## Washington County Public Health Nursing – Department Goals 2016

1. Staffing-navigate multiple retirements (4) this year of key staff. Succession planning, onboarding and transition/training of new or promoted staff.
2. Medent- training and implementation of new electronic medical record application for agency staff.  
Archive existing medical records.
3. Inter-department collaboration, integration, joint planning and training  
Opioid overdose prevention work/ Neonatal abstinence syndrome, impact to families and Community.  
Trauma informed care training and implementation.  
Human trafficking training /awareness  
Bridges out of Poverty training and implementation  
Evidenced based Falls Prevention / Tai Chi work with ADRC.
4. Community Health Assessment/Community Health Improvement Plan /County Health Rankings priority setting process for health department 2016.
5. CLIP- County Lifestyle Improvement Program.  
Program planning and collaboration with Personnel