

# 2018 Annual Report

## Washington County Public Health

*Prevent \* Educate \* Evaluate \* Empower*



Washington County Public Health  
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*Washington County Public Health is proud to present the*  
*Annual Report for the year 2018*

*We continue to move forward and toward s accomplishing higher standards of health and well-being in our communities.*

***Public Health & Preventive Mission Statement***

By partnering with the family and community, Washington County Public Health Service has a commitment to maximize the quality of life for all, through intervention to eliminate the causes of poor health, education to improve health of families and the community and provision of support necessary to maintain a healthy Washington County.

***Early Intervention/ Committee on Preschool Special Education***

The mission of the Early Intervention Program is to identify and evaluate as early as possible those infants and toddlers whose healthy development are compromised and provide for appropriate intervention to improve child and family development.

***Women, Infants & Children Mission Statement***

Washington County WIC Program is committed to improving the nutrition and health status of women, infants and children by providing nutritious foods, nutrition and health education and referrals to health and human service providers for all eligible families within Washington County.

# *RESPONSIBILITIES OF THE PUBLIC HEALTH SYSTEM*

*All programs are in collaboration and support of each other*

## *Public Health*

- Prevent epidemics and the spread of disease
- Prevent injuries
- Promote and encourage healthy behaviors
- Respond to disasters and assist communities in recovery
- Assure the quality and accessibility of health services
- To provide health care education for individuals, families and our community

## *Women, Infants & Children*

- To provide nutritious supplemental foods to eligible women, infants and children
- To improve prenatal health and birth outcomes
- To promote breast feeding as the preferred infant feeding method
- To promote physical activity at all age levels
- To promote healthy eating habits through the Eat Well Play Hard initiative
- To link families with health and human service providers

## **DIRECTOR'S MESSAGE**

*I am proud to present the Washington County Public Health's 2018 Annual Report. A compilation of a year's work, assessing, monitoring and intervening to improve the health of our residents.*

*The staff is guided by evidence and best practices. Quality Improvement is ongoing. 2018 continued a trend of health care transformation and regulatory change, often without funding to support necessary action. Public Health staff persevered, remained creative and took on the challenges faced. They remain armed with information that guides their practice including: cultural competence, health literacy, the effect of trauma on health, and one's ability to be "healthy" and the ravages of poverty on the health and well-being of those we are dedicated to care for in Washington County.*

*We cannot emphasize enough the importance and value of our collaborators and Community partners on all levels as we all strive to do more with less and face the burgeoning needs of our communities. We contribute our collective knowledge, and expertise which encompasses local Public Health data, community needs assessment and agency resources to make a difference.*

*I am very proud of the professional and dedicated Public Health Staff serving Washington County. We work diligently to improve quality, efficiency and maximize the investment of time and money while being responsive to the needs of our constituents. Their dedication, hard work, and perseverance is the very foundation of Public Health in Washington County.*

*I present this 2018 Annual Report to you our leaders and consumers. This compilation accounts for our challenges and great accomplishments in 2018. Washington County Public Health continually strives to put our communities first and make this county the healthiest place to live, work, learn, play and visit!*

*Sincerely,*

*Patricia Hunt,  
Director  
Washington County Public Health*

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## *Health & Human Services Committee*

Health & Human Services Committee is a subcommittee of the Washington County Board of Supervisors. They advise the full Board of Supervisors regarding Health & Human Services concerns. We appreciate the direction and services provided by the 2018 Health & Human Services Committee Members:

Mr. Sara Idleman, Chairman

Mr. Jay B. Skellie

Mr. Paul Ferguson

Mr. Brian Campbell

Mr. Richard Moore

Mr. Terry Middleton

Ms. Evera Sue Clary

### *We also thank:*

Mr. Robert A. Henke, Board Chairman

Mr. Dan Shaw, Budget Officer

Mr. Chris DeBolt, County Administrator

Mr. Roger Wickes, County Attorney

Ms. Melissa Fitch, Personnel Officer

Mr. Glenn Gosnell, Director of Public Safety

Mr. Tim Hardy, Deputy Director of Public Safety

Mr. Philip Spiezio, Safety Officer

## *PROFESSIONAL ADVISORY COMMITTEE*

The Professional Advisory Committee consists of a group of professional personnel, including one or more physicians, registered professional nurses, representatives from therapies and other professional organizations as well as at least one “consumer” who is either eligible to receive or has received services. Their purpose is to advise the Agency on professional issues, participate in the evaluation of Agency programs and assist the Agency in maintaining liaisons with other health care providers.

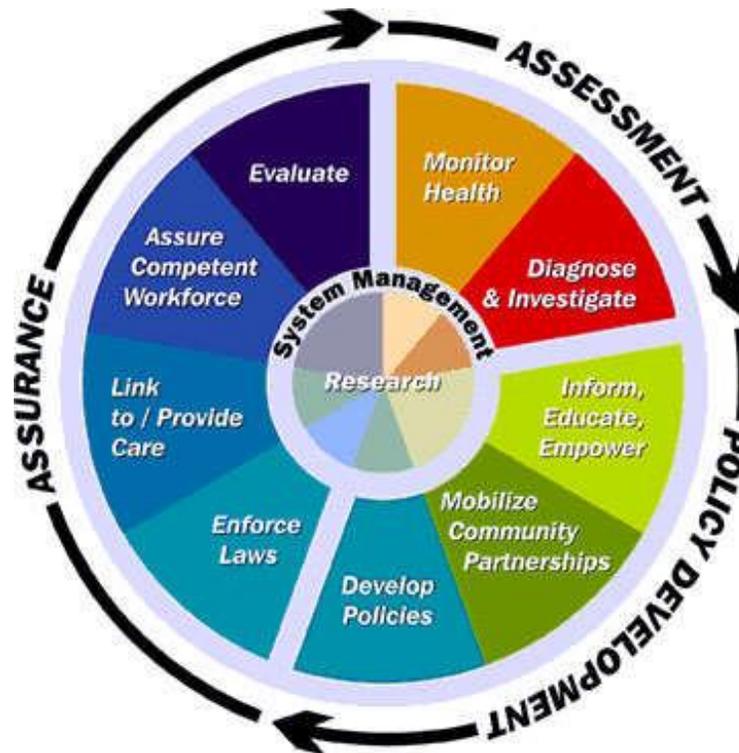
*We express our appreciation to the following 2018 members for their commitment and advice at our quarterly meetings.*

Philip Gara, MD, Medical Director  
Patricia Hunt, Director WC Public Health  
Kathy McIntyre, Asst. Directory WC Public Health  
Amy Baulsir, Community Representative  
Marion Jessen, Community Representative  
Michele Miller, WC Public Health Office Manager  
Claire Murphy, Director, Economic Opportunity Council  
Beth Bruno, RN, Dir. of Home & Community Services, Fort Hudson Nursing Home  
Marie Capezzuti, Infection Control Nurse, Bioterrorism Coordinator  
Courtney Shaler, Adirondack Rural Health Network  
Patricia Godnick, Case Manager, Glens Falls Hospital  
Theresa Roberts, Supervising Public Health Nurse  
Kathy Grant, Community Representative  
Suzanne Smith, Interim Health Care  
Tammy Whitty, RN CFSS, HCR  
Debra Pauquette, Holbrook Adult Home

## Core Functions of Public Health & Preventive Health Care Services

*These services are based on the 10 Essential "Key" Public Health Functions:*

- 1) Monitor the health status to identify 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 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 health services and assure the provision of health care when otherwise unavailable.
- 8) Assure a competent public health and personal health care workforce.
- 9) Evaluate effectiveness, accessibility, and quality of personal and population-based health services.
- 10) Research for new insight and innovative solutions to health problems.



## *Health Services Unit Summary*

	<b><u>2018</u></b>
Lead Screening Program – Children Screened	980
Lead Screening Program – Home Visits / Case Follow-up	13
Flu Clinics	5
Flu Vaccines Administered	180
Pneumococcal Vaccinations Administered	2
Tuberculosis – Active TB Cases	0
Maternal Child Health Patients	108
Maternal Child Health Home Visits	238
MOMS Participants	17
MOMS Clinic Visits	36
Animal Bite Investigations	373
People Receiving Post-Exposure Rabies	33
Rabies Inoculations – Dogs & Cats & Ferrets	990
Animals Positive for Rabies	2
Animals Submitted for Testing	52
Rabies Clinics	11
Blood Titers Drawn for Human Rabies Titers	34



**2018 Visits by Town Encompassing  
MCH, Lead, TB, Moms, Child Find**

Argyle	12
Cambridge	5
Dresden/Clemons	0
Easton	0
Fort Ann	9
Fort Edward	19
Granville	48
Greenwich	9
Hampton	0
Hartford	2
Hebron	0
Jackson	0
Kingsbury	99
Putnam	3
Salem/Shushan	32
White Creek	3
Whitehall	41
<b>TOTAL</b>	<b>282</b>

## ***State Aid Funding Analysis 2018***

<b>Basic Services:</b>	<b>2018</b>
Health Administration	\$195,734
Family Health	\$156,709
Disease Control/Chronic Disease	\$290,876
Environmental Health	\$51,065
Community Health Assessment	\$10,430
Emergency Preparedness & Response	\$28,446
<b>Total Basic Services</b>	<b>\$733,260</b>
Base Grant	\$500,000
Amount Exceeding Base Grant	\$233,260
36% Funding Above Base	\$83,974
<b>Total Basic Services Funding</b>	<b>\$583,974</b>

### ***State Funding is broken down into the following categories:***

#### **Family Health**

- \* Child Health
- \* Maternal and Infant Health
- \* Reproductive Health

#### **Environmental Health**

- \* Injury Prevention and Control
- \* Lead Poisoning Prevention

#### **Disease Control/Chronic Disease**

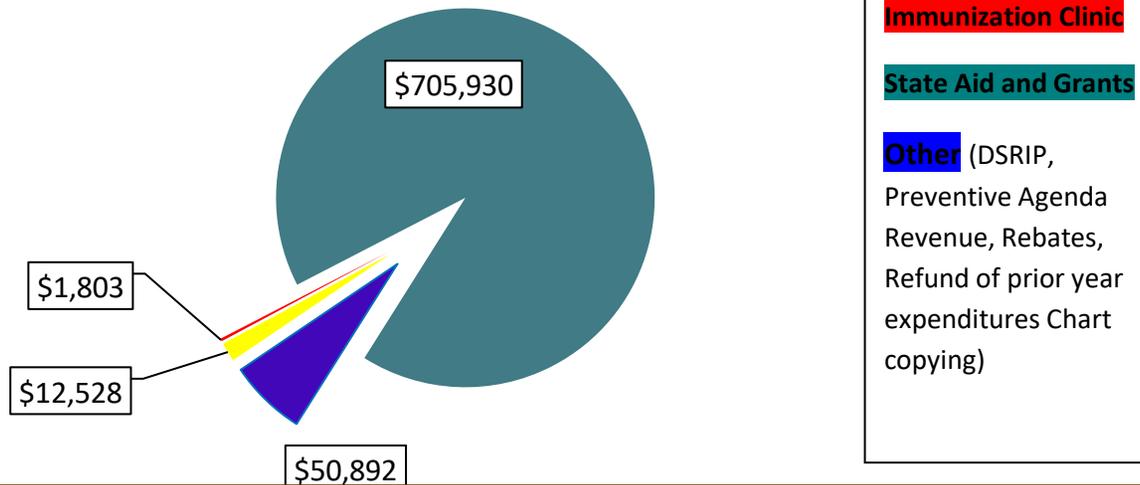
- \* Arthropod
- \* General Communicable Disease
- \* Immunization
- \* Rabies
- \* STD/HIV
- \* Outpatient Tuberculosis

***State Aid Funding from 2017 to 2018 remained consistent with a 2% decrease in total Article 6 funding.***

## Washington County Public Health Expenditures



## Washington County Public Health Revenue



- Home Care**
- Immunization Clinic**
- State Aid and Grants**
- Other** (DSRIP, Preventive Agenda Revenue, Rebates, Refund of prior year expenditures Chart copying)

## *Immunization Action Plan - IAP*

Each year Washington County participates in an Immunization Action Plan (IAP) Grant. A new five-year funding cycle began in 2013. As with previous grant years, there are specific goals delineated. The NYS IAP Grant supports the activities of Washington County Public Health in meeting the overall goals to promote and improve the vaccination status of all residents.

<https://www.cdc.gov/vaccines/schedules/downloads/adult/adult-schedule-easy-read.pdf>

The Washington County Health Department provides immunizations through our weekly clinics. Clinics are currently held weekly for uninsured children, 2 months of age through 18 years of age, college students over 18 years of age and uninsured adults. The program partners with the New York State Department of Health (NYSDOH) and their Vaccines for Children (VFC) program and Vaccines for Adult (VFA) program to improve access to, and education about, recommended immunizations for children and adults. These programs provide vaccines free or low cost for individuals who qualify.

The Agency travels to immunize migrant workers on Farms within Washington County. Educational immunization materials are provided in English and Spanish.

Annual school nurse meeting was hosted by Washington County Public Health. Presentation was given on Meningitis and vaccinations to prevent (MenACWY and MenB.)

SCHOOL  
NURSE



Washington County Public Health distributed vaccine preventable disease information and immunization schedules to the **Health Care Institute** which was hosted by Head Start.

*Clinics Offered*  
Washington County Public Health  
(518) 746-2400  
Wednesdays 2-4  
415 Lower Main Street  
Hudson Falls, NY 12839

*Children and Adults need immunizations throughout their lives. Know what vaccines your child needs to be protected.*

**As of January 1<sup>st</sup>, 2018 Data Loggers are required as part of Vaccine Storage and Handling**



WCPH house two pharmaceutical grade vaccine refrigerators.

WCPH nurses supported Health Care offices implementing the new requirements for:

- VFC ordering
- Provider Profiles
- Inventory
- Recording storage and handling/ temperatures

*As a Vaccine for Children (VFC) provider the staff receives annual training:*

- VFC Provider Requirements
- The Vaccine Cold Chain
- Monitoring Vaccine storage unit temperatures
- Temperature Excursions
- Managing vaccine inventory
- Vaccine Orders

Qualified vaccine storage/transport containers are key to maintaining integrity of vaccine.



Two CoolCube™ Coolers were purchased and are utilized in transporting vaccine to off-site clinics.

## **Lead Poison Prevention Program**

*The mission of the Lead Poisoning Prevention Program is to reduce the prevalence of childhood lead poisoning.*

Environmental lead exposure is a recognized health hazard. Children are particularly susceptible to its affects and pose lifelong health and learning consequences. These affects include learning disabilities, kidney damage, hearing loss, growth problems, anemia, and behavior problems. Symptoms of lead poisoning may not be apparent or may be mistaken for other illnesses. The symptoms may include fatigue, crankiness and stomachaches. However, there are usually no signs. Lead poisoning in its most severe form can be fatal.

**NYSDOH Lead Poisoning Prevention Program Grant has key components (GOALS) to be addressed:**

### **Goal #1- ADMINISTRATION**

*Local Health Departments (LHD) will effectively administer a Lead Poisoning Prevention Program (LPPP).*

- Identify at risk residences during newborn home visits and risk reduction education.
- Assess pregnant women for lead exposure risks.

### **Goal #2 - EDUCATION:**

*Increase knowledge and awareness of the public, healthcare providers, other professionals, and local policy makers regarding lead poisoning and lead poisoning prevention in children and pregnant women. Education is based on the needs of the county, including the specific impact on the local community.*

- Community based education included print media, social media, Lead Recalls for spices.
- Pre-K programs received *Winter* themed backpacks bearing **Prevent Lead Poisoning Logo**
- Health care providers were given information via site visits, mailings and informational meetings.

*Lead House was set up for Early Childhood Conference at Fort William Henry.*



### **Goal #3 – BLOOD LEVEL TESTING AND SCREENING:**

*All children and pregnant women are tested for lead poisoning consistent with NYS Public Health Law*

### **Goal #4 – FOLLOW-UP OF CHILDREN WITH ELEVATED BLOOD LEAD LEVELS:**

*Follow-up for children with elevated BLLs < 18 years of age. All children with elevated blood levels receive timely and appropriated follow-up services, consistent with the Public Health Law, Administrative Rules and Regulations, and CDC guidelines.*

- Case management services provided to families of children with elevated blood lead levels. Services include monitoring lead levels, providing education and assisting parents with reminders for follow up testing.
- Home visits with the NYS District Office to determine location and type of environmental factors impacting lead levels. DOH discusses process of eliminating continued exposure and requires a written plan from the property owner on how the source will be stabilized or removed.

### **Goal #5 – PRIMARY PREVENTION:**

*Lead hazards in the community are identified and controlled before children become lead poisoned.*

#### **Lead Poisoning is Preventable!**

Washington County's Lead Poisoning Prevention Program is funded via a grant from the New York State Department of Health.

#### **\*The key to Lead Poisoning Prevention is to prevent and eliminate any exposure by taking the following steps:\***

- Keep children away from peeling or chipped paint.
- Make home repairs safely by following the “**EPA Lead Hazard Pamphlet**” and **EPA Repair, Renovation, and Painting Rule** (Effective April 2010).
- Hire contractors with Lead-Safe certification and training.
  - \* Children and pregnant women should stay away until the area is properly cleaned with wet cleaning and HEPA vacuuming.
- Wash dust off hands, toys, bottles, windows and floors.
- Check toys for recall at [www.epsc.gov/epsclist.aspx](http://www.epsc.gov/epsclist.aspx)
- Avoid exposure to costume jewelry.
- Remove clothing prior to coming home, whenever possible or have a designated changing room, and wash thoroughly if you have a hobby or occupation that involve contact with lead (painting, plumbing, construction, car and computer repair, firearms, pottery, stained glass).
- Take note of Food Recalls.



***The overall goal for the Maternal Child Health nursing team is to promote and improve the overall health for women and infants during the perinatal, postpartum and newborn period. The health and well-being of mothers and children are fundamental to overall population health. Improving health outcomes for women, infants and children is a priority for the New York State Prevention Agenda.***

***The goal is for the mom to stay well during pregnancy and to be prepared for childbirth and parenting.***

- Prenatal visits are arranged with the expecting mom. (At the Washington County Public Health Office or at another site.)
- Postpartum visits occur in the home through the agency's Licensed Home Care Service Agency (LHCSA).
- Our Registered Nurses assess the mother and newborn. (Referral to community resources is a key focus.)
- The nurse provides support, reassurance, guidance and collaboration with the family's health care provider.
- Standardized teaching is provided utilizing evidence-based best practice materials.

***• Key areas taught include:***

nutrition	Safe Sleep
newborn care	growth/development
maternal depression	community resources
healthy lifestyle choices	immunizations
emergency preparedness	exercise
safety (lead poisoning prevention, car seat)	



*All referrals receive a phone call from a registered nurse and are mailed a newborn information packet.*

**\*Outreach to our community partners is crucial\***

- \* Emphasize the referral process
- \* Promote service availability
- \* Seamless Transition across service providers
- \* Destigmatize any misconceptions about MCH services

**COMMUNITY PARTNERS INCLUDE:**

- Head Start
- Glens Falls Hospital
- South Western Vermont Medical Center
- Albany Medical Center
- WIC
- Wait House
- Open Arms
- School Nurses
- Community Maternity Services
- DSS
- NAS Subcommittee
- Pediatric and OB/GYN offices
- LEAP Head Start

***Prenatal Program***

*Washington County's Prenatal Programs are designed to work in collaboration with a woman's health care provider, by establishing a plan of treatment. Washington County Maternal Child Health nurses provide prenatal services. Services focus on the assessment of the woman's health and risk factors. By utilizing evidenced based standardized assessment and education, the goal is "Healthy Mothers, Healthy Babies!"*

**Women can be referred by:**

- ◆ Self
- ◆ Health Care Provider
- ◆ Community Partners (WIC, Head Start, Community Maternity Services, etc.)

**Education is provided regarding:**

- ◆ Child Birth
- ◆ Labor and Delivery
- ◆ Postpartum Care
- ◆ Infant Care
- ◆ Reducing Health Risks
- ◆ Prenatal Care
- ◆ Infant Growth and Development
- ◆ Parenting Skills
- ◆ STD and HIV Counseling and Testing
- ◆ Family Planning Options

**Assistance is provided in obtaining services:**

- ◆ WIC (food assistance)
- ◆ Birthing and Breastfeeding Classes
- ◆ Transportation to MD Appointments
- ◆ Health Insurance coverage

### ***Our Maternal Child Health nurses are trained in completing the presumptive Medicaid insurance documentation.***

- ◆ Women can use the Presumptive Eligibility Form to verify insurance coverage to a Health Care Provider.
- ◆ The completed Presumptive Eligibility Form supports the eligibility requirements for WIC.
- ◆ If the insurance provider changes from traditional Medicaid to a Managed Medicaid Care provider, our WCPH Nurse can work with the insurance provider in obtaining authorization for visits.
- ◆ Typically, the women enrolled in the MOMS program have more psychosocial needs.
- ◆ There is a higher risk for complications.
- ◆ The majority are first time mothers.
- ◆ Many have a history of domestic violence.
- ◆ Almost a third scored at risk for Lead exposure and were referred to their physician for lead testing.
- ◆ ***Due to the complexity of these cases, WCPH Nurses noted that most women are accepting revisits and postpartum services once a relationship has been established.***

### ***Postpartum Depression***

*Approximately **one third** of women seen in the MOMS Program had a history of a Mental Health diagnosis. Depression during pregnancy may not be as well-known as postpartum depression however, it is estimated that a significant percentage of women experience a depressive disorder during pregnancy. (Depression during pregnancy has been associated with poor prenatal care.) The American College of Obstetricians and Gynecologists (ACOG) encourages screening patients for depression during and after pregnancy.*

**The MCH team utilized the Edinburg Postpartum Depression Scale 100% of the time for MOMs start of care assessments and at their postpartum initial visit.**

#### ***\*Depression affects women of all backgrounds\****

- Depression affects women at a rate of one in five women.
- Over one-third of women of childbearing years have depressive symptoms.
- Mothers living in poverty are over three times more likely to have depression.
- The NYS Community Action Association reported that the poverty rate in Washington County, with women as head of households with children, is 42%.
- Maternal Depression impacts the family.
- Children of parents with depression are at increased risk of behavior, attention, anxiety, and depression disorders.
- **The earlier a woman is identified with maternal depression, the earlier she can receive treatment.**

**\*Evidenced-based treatments exist\***

*Cognitive and interpersonal therapies, medication, peer to peer support programs and support groups are some of the treatments that currently exist. Prior to 2017, the tri-county region was lacking in support groups for moms affected by depression.*

***Mom Connection** was designed to fill this void.*

- *The goal of the **Mom Connection** was to give tools, recognize, identify, and engage family and supports for the women in need.*
- *The long-term goal is to put forth the model and encourage participants to pass it along within the community inspiring individually sustainable groups.*
- *Look for networking and connection in the community.*



## **NEONATAL ABSTINENCE SYNDROME (NAS)**

*NAS is a condition in which a baby has withdrawal symptoms after being exposed to certain substances. Many times the baby is exposed when the mother uses substances such as medications or illicit drugs during pregnancy. Opioid use is the most common cause of NAS.*

- **Neonatal Abstinence Syndrome Subcommittee** Established April 2015 as a subcommittee of **Hometown vs Heroin**
- Started with a small group-ten members, two counties
- Has grown into a robust group meets monthly including: NYS representatives from AIDS Institute, Office of Drug User Health, NYSDOH Division Family Health, OASAS. Linked with national groups: National Center on Substance Abuse and Child Welfare, Center for Children and Family Futures
- Pregnant and Parenting Women with Substance Abuse Disorder Participated in the Interdisciplinary Team Approach (IDTA) provided at Office for Alcoholism and Substance Abuse Services

### **FOUR TASK GROUPS WORKED ON THE FOLLOWING GOALS:**

- Increase universal screening for pregnant women
- Increase identification and engagement in treatment of women and infants
- Develop a scope of practice for the use of parent family/caregiver peer services
- Identify and implement policy and practice changes as needed to comply with CAPTA and promote child well-being

### **COMPREHENSIVE ADDICTION & RECOVERY ACT (CARA)**

**CARA** became law on July 22, 2016 to address the opioid epidemic. There are **Six Pillars** necessary for a coordinated response.

- Prevention
- Treatment
- Recovery
- Law Enforcement
- Criminal Justice Reform
- Overdose Reversal

## Washington, Warren, Saratoga and Essex Counties Public Health Departments were chosen by NYS to pilot the initiation of a Plan of Safe Care (POSC)

- These counties attended an all-day Interdisciplinary Team Approach (IDTA) workshop at Glens Falls Hospital, provided by the Center for Children and Family Futures to launch the **Plan of Safe Care (POSC)** pilot.
- Participation in the project included developing a regional template **Plan of Safe Care (POSC)** to meet the needs of our local population.
- Recovery Fair was held at the Queensbury Hotel, included a 5K Run for Recovery.
- **Plan of Safe Care (POSC)** brochure was developed

### What is a Plan of Safe Care ?

When an infant has been exposed to substances during pregnancy a POSC is developed. The plan is written with the pregnant/parenting mother and her personal and professional support team.

The POSC is a written plan that can be updated and stays with the woman. She is encouraged to share the plan with her support team, throughout her pregnancy. The team helps to ensure resources are available to assist the woman, infant, and family.

The Plan of Safe Care provides an opportunity to refer mothers to important services, educate them about the health and safety of their infants, and prepare them for the challenges of caring for a substance exposed infant.



- Ideally a POSC should be developed during pregnancy or at the earliest point it is suspected that the infant has been exposed to a substance.

### Key Topics with POSC

#### Basic Needs:

- \*Food
- \*Safe housing
- \*Medical care
- \*Clothing
- \*Transportation
- \*Mental health
- \*Substance use treatment

#### Delivery and Discharge Plan:

- \* Prenatal care
- \*Birthing location
- \*Safe sleep environment
- \*Family planning
- \*Sharing plan with other service providers

#### Infant Needs:

- \*Diapers
- \*Breast/formula feeding
- \* Pediatric care
- \*Car seat
- \* Parenting skills

#### Support After Delivery:

- \* Substance use treatment
- \* Home visiting nurse
- \*WIC
- \*Transportation
- \*Medical follow-up for Mom & Baby

## *Child Find Program*

Child Find is a part of the Early Intervention Program. It is designed to locate and identify infants and toddlers (0-3) who are at risk of developmental delay. Identifying children at risk can be facilitated in a number of ways:

- *Hospitals and NICUs*
- *Physicians*
- *Social Services*
- *WIC*
- *Maternal Child Health RN*
- *Head Start*
- *Parents*

The Child Find Program presents a tremendous opportunity for parent education regarding age appropriate developmental milestones. Public Health offers resources and guidance to parents for referral to care and follow-up. Child Find is voluntary and there is no charge to families for the program. Once Child Find is open and if it is determined that further evaluation is needed then referral can be made to Early Intervention or Committee on Preschool Special Education (CPSE) at the home school district. If developmental concerns are identified the Child Find program works closely with Early Intervention program to assure appropriate transition.

## EARLY INTERVENTION

Early social, emotional development, and physical health provide the foundation upon which cognitive and language skills develop. High quality early intervention services can change a child's developmental trajectory and improve outcomes for children, families, and ultimately our communities. There is an urgent and substantial need to identify as early as possible those infants and toddlers in need of services to ensure that intervention is provided when the developing brain is most capable of change.

### *Proven benefits of Early Childhood Intervention Programs:*

- Early childhood intervention programs have been shown to yield benefits in academic achievement, behavior, educational progression and attainment, delinquency and crime, and labor market success.
- High quality early intervention programs for vulnerable infants and toddlers can reduce the incidence of future problems in their learning, behavior and health status.
- Intervention is likely to be more effective and less costly when it is provided earlier in life rather than later.
- Positive early experiences are essential prerequisites for later success in school, the workplace, and the community.
- The brain is strengthened by positive early experiences, especially stable relationships with caring and responsive adults, safe and supportive environments, and appropriate nutrition.
- Early social/ emotional development and physical health provide the foundation upon which cognitive and language skills develop.
- Minimize potential developmental delay and reduce educational costs to our society by minimizing the need for special education services as children with disabilities reach school age.
- Families benefit from early intervention by being able to better meet their children's special needs from an early age and throughout their lives.
- Benefits to society include reducing economic burden through a decreased need for special education.

*The Early Intervention Program for infants and toddlers ages birth up to age three and their families was established in 1994 conforming NYS law to Federal Individuals with Disabilities Act (IDEA), Part C. The New York State Department of Health (NYSDOH) is the lead agency for statewide administration and oversight of this program. The program is implemented at the local level under the direction of the Early Intervention Official (EIO) and the Washington County Public Health Department (WCPH).*



## *Eligibility Requirements for the Early Intervention Program*

Children less than 3 years of age with a developmental delay or diagnosed physical or mental condition with a high probability of a delay in any of the following areas:

- Physical development (vision and hearing included)
- Cognitive development (thinking)
- Communication (understanding or expressing language)
- Social/Emotional (relating to others)
- Adaptive development (self-help skills)

***A developmental delay for the purposes of the Early Intervention Program is a developmental delay that has been documented as:***

- A twelve-month delay in one functional area as described; or
- A 33% delay in a functional area or a 25% delay in each of two areas; or
- If appropriate, standardized testing tools are individually administered in the evaluation process, a score at least 2.0 standard deviations below the mean in one functional area or a score at least 1.5 standard deviation below the mean in each of two functional areas; or
- Due to the child's age, condition, or the type of diagnostic instruments available in the specific domain, a standardized score is either inappropriate or cannot be determined, a child may be deemed eligible by the documented informed clinical opinion of the multi-disciplinary team.
- For Speech only children, 2 standard deviations below the mean are required for the evaluation team to determine a child is eligible for Early Intervention Program Services, or the evaluation team must use other qualitative criteria included in regulation/clinical practice guidelines on communication disorders.

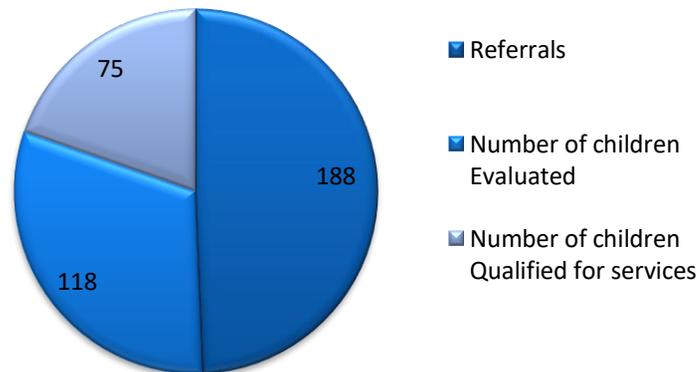
*A child must qualify according to the written standards, to be eligible for services under the Early Intervention Program. If a child does not meet the degree of delay required, parents may pursue services via their primary care physician and primary health insurance.*

### **Early Intervention Services Include:**

- Early identification, screening and assessment
- Special instruction
- Occupational Therapy
- Nutritional Services
- Respite services if qualified
- Assistive technology devices and services
- Family Training, counseling, home visits, parent support groups
- Service coordination
- Speech pathology and audiology
- Physical Therapy
- Vision Services
- Assistance with transportation
- Hearing Services

Early intervention services are provided at no cost to families. Washington County is reimbursed by New York State at a rate of 49% of total costs. Private insurance (licensed and regulated by New York State) and Medicaid are billed for Early Intervention Services paid by the county. All attempts are made to maximize reimbursement and defray Washington County expenses. Providers enter into agreements with New York State directly for services and providers bill insurance companies and Medicaid directly for services first. Any services not covered are then paid for by the county.

### **Number of Children Referred, Evaluated, and Qualified to Early Intervention**



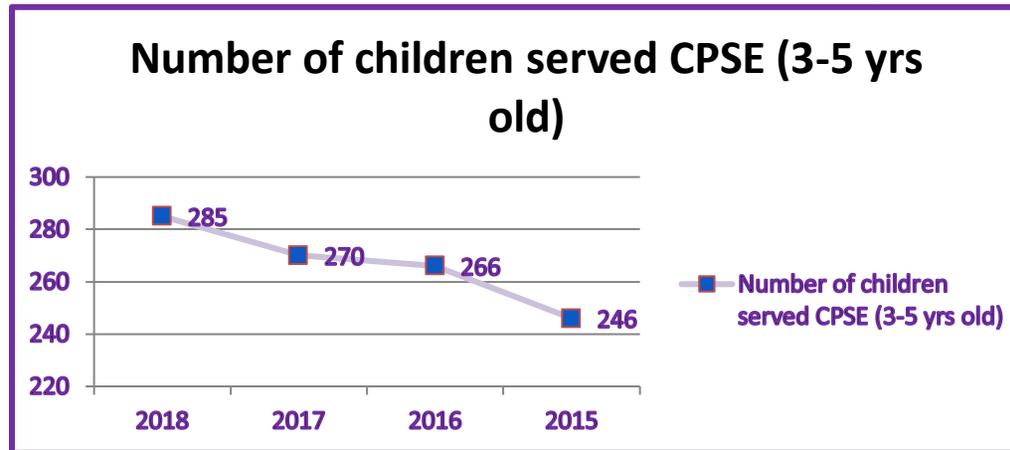
## Preschool Program For Children With Disabilities/ Committee on Preschool Special Education (CPSE)

The Preschool Special Education Program is a Federal and State mandated program for children from three years old until they become age eligible for kindergarten. Each school district has a Committee on Preschool Education (CPSE) who determines if a child qualifies for services as a preschooler with a disability. Eligibility is determined by evaluation, based on criteria established in regulation, and a meeting of the CPSE. New York State Education Department (SED) is the lead agency for statewide administration and oversight.

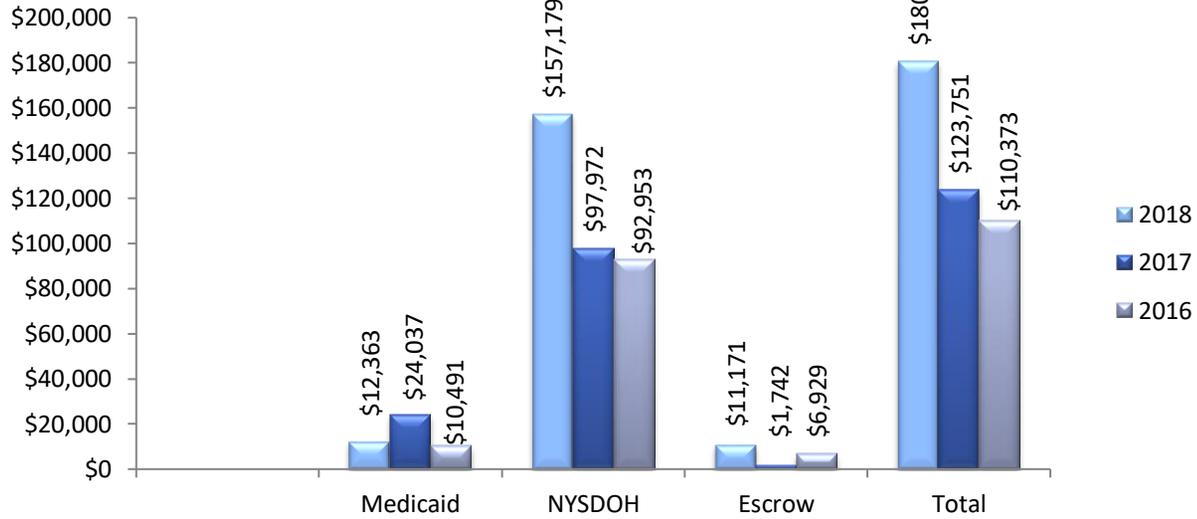
**The mission of CPSE is to ensure that all children age 3 - 5 who are suspected of developmental delay have access to the services they need to achieve their potential. CPSE provides special education related services to meet the educational needs of identified preschool students with disabilities.**

Services are provided at no cost to families. The use of third-party payment (using Medicaid or private insurance) is at the discretion of parents. Children potentially eligible are referred directly to the Committee on Preschool Special Education (CPSE) either by parents, providers or through the transition process from the Early Intervention Program. The child is referred to their home school district. Parents are provided with a list of approved evaluators for Washington County. Parents then select the agency they wish to evaluate their child. All appropriate consents and documentation are secured by the school district CPSE office. Following the child's evaluation, the committee is convened to review the evaluation, determine qualification and eligibility, and discuss the child's needs. Recommendations for services are made at this time if the child qualifies for services. A representative from Washington County Public Health attends all CPSE meetings. These services are voluntary, and the parents may withdraw the child from any program at any time. **The county is reimbursed for its costs at a rate of 59.5% by New York State Education Department. Medicaid is billed for related services such as speech therapy, occupational therapy, physical therapy, nursing, and counseling for all Medicaid eligible children.**

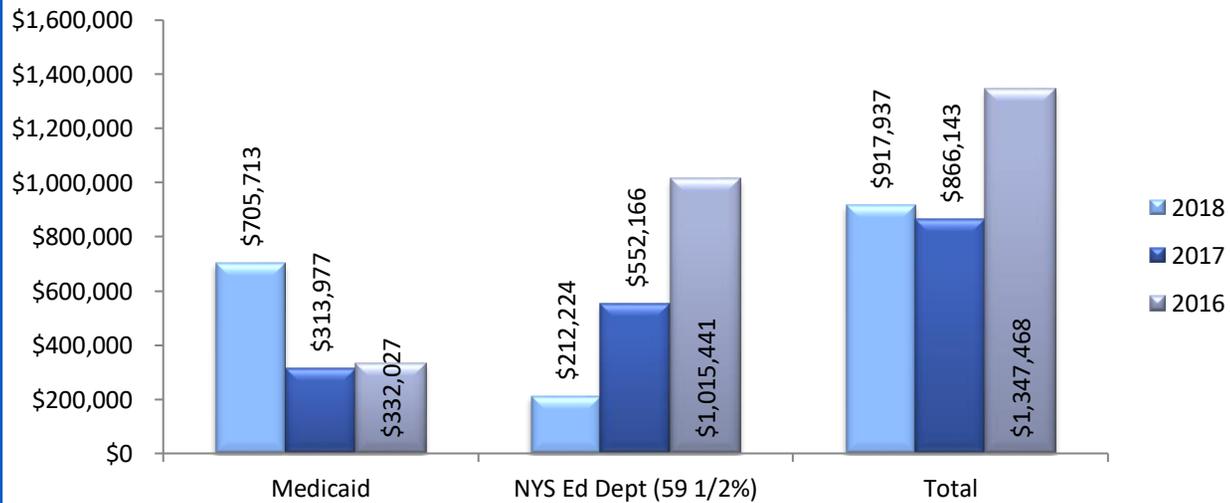
- All attempts are made to maximize reimbursement and defray Washington County's expenses.



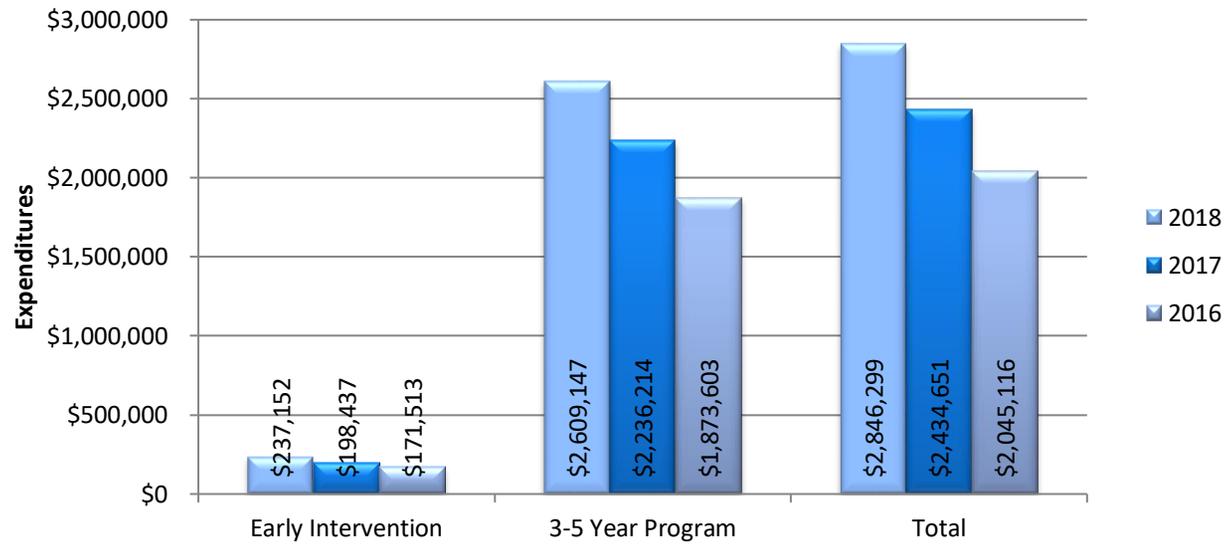
### Early Intervention Cash Receipts By Revenue Source



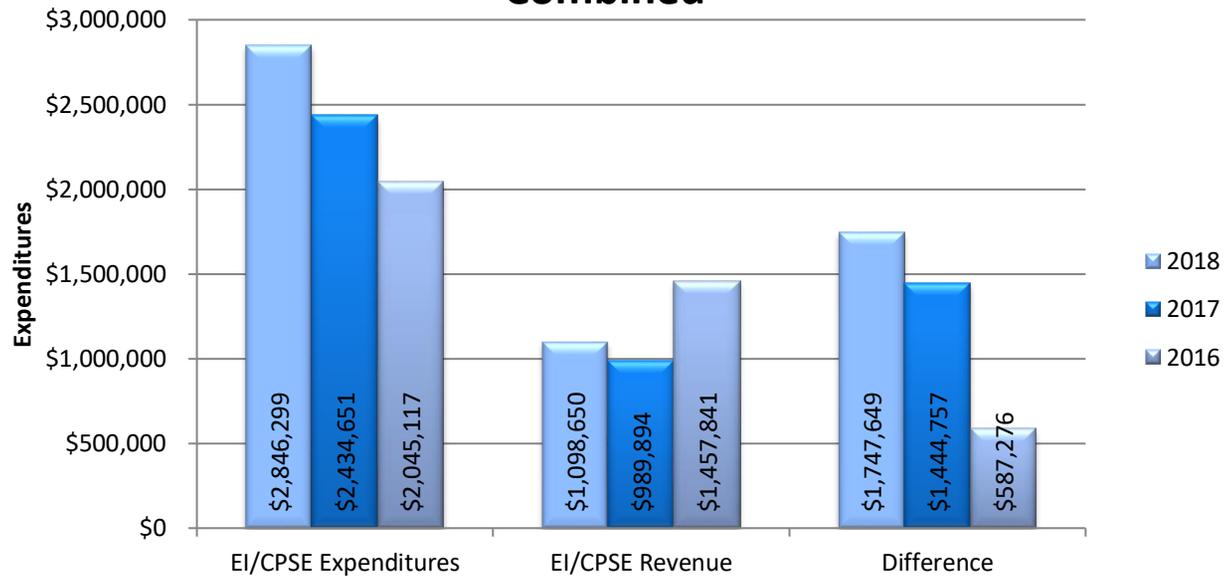
### 3-5 Program Cash Receipts By Revenue Source



## Expenditures for Early Intervention and CPSE



### Expenditures Minus Revenue For EI/CPSE Combined



## **Infection Control / Communicable Disease Control**

***The mission of this program is to prevent the spread of reportable communicable diseases to residents of Washington County through timely reporting, investigation, and containment.***

Washington County Public Health is responsible for the prevention, investigation, reporting, and treatment oversight of reportable communicable diseases in Washington County. Programs within Public Health include Communicable Disease; Sexually Transmitted Disease (STD); HIV referrals for Counseling and Testing; and Tuberculosis Control. Disease surveillance is monitored closely. The staff creates new and diverse ways to develop education, outreach, testing, and treatment strategies to minimize the impact of communicable disease in the community.

***In order to meet the program's mission, the WCPH provides:***

- ✿ Surveillance and reporting of communicable diseases as mandated under Public Health Law.
- ✿ Investigation and follow-up of all reportable diseases in Washington County residents, including coordination of efforts with other health related entities (laboratories, hospitals, infection control practitioners, physicians, etc.)
- ✿ Recommendations for preventative treatment when indicated
- ✿ Screening and exclusion of persons who are suspected/confirmed to have certain communicable diseases and who are in sensitive areas (such as food handlers, infants or toddlers in child care, child care providers, health care providers)
- ✿ Education to community and health care providers
- ✿ Reporting of disease to NYSDOH
- ✿ Information to the public in a timely manner to protect and improve the health of our community
- ✿ Serving as a resource to area schools and businesses in matters of infection control, disease mitigations and prevention.

The number of investigations of communicable disease cases in 2018 totaled 604 cases of confirmed reportable diseases.

### ***Food Borne Illnesses***

A total of 25 food-borne illnesses were investigated in 2018. Food-borne illnesses were noted with Salmonella, Campylobacter and Yersiniosis. Campylobacter cases (15) were the most reported food-borne illness in 2018.

***(Campylobacter is a common gastric illness usually caused from ingestion of raw milk or by handling raw poultry products or animal exposure.)***

*The best defenses to prevent food borne illness.*



- Proper hand hygiene
- Prevention of cross-contamination
- Proper washing and storage of food

*\*Education regarding measures to prevent food-borne illness occurrences is provided to community residents\**

*Washington County's Response to Communicable Diseases is Swift and Thorough*

Washington County Public Health Communicable Disease nurse continues to respond rapidly in collaboration with the Regional New York State Department of Health Epidemiology staff and the NYSDOH District Office, in the event of any outbreak or incidents of concern. Washington County Public Health Communicable Disease staff monitors surveillance locally, regionally, and nationally daily. The Washington County Public Health infection control nurse continues to work closely with other area facilities and school districts regarding issues of concern related to infection control.

## Tuberculosis Control

The Tuberculosis (TB) Control program provides comprehensive testing, diagnosis, and treatment of latent and active tuberculosis cases in Washington County. The TB Control program decreases the public health threat of TB by evaluating and treating positive cases of TB, while promoting preventative therapy as indicated for contact cases.

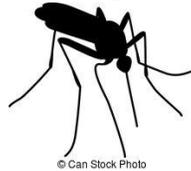
✿ *Washington County contracts with Saratoga County for Chest/TB Clinics. Clinics are held in Saratoga*

### Washington County Provides for TB Control:

- Tuberculin skin testing
- Client assessment
- Case management for active and latent TB cases
- TB surveillance in Washington county
- Community and provider education about tuberculosis

## Mosquito Virus Surveillance

In 2018, one case of West Nile Virus (WNV), a mosquito borne illness, was confirmed in Washington County. This was the first known case of WNV in Washington County since the disease became reportable in in 2012. In late 2015, Washington County Public Health began training for surveillance of the Zika virus. Washington County did not have any cases of Zika in 2017. The mosquito responsible for transmission of the Zika virus is not present to date in the Capital Region of NYS. Surveillance and planning are still being undertaken. The Zika plan is updated annually.



## Lyme and other Tick Borne Diseases

Reported cases of Lyme disease again dropped in 2018 (n=17) confirmed cases that met case definition. A total of approximately over 120 additional suspected cases of Lyme disease were also investigated but did not meet the current case definition.

**(There is no human vaccine on the market for the prevention of Lyme disease or any other tick-borne illnesses at this time.)**

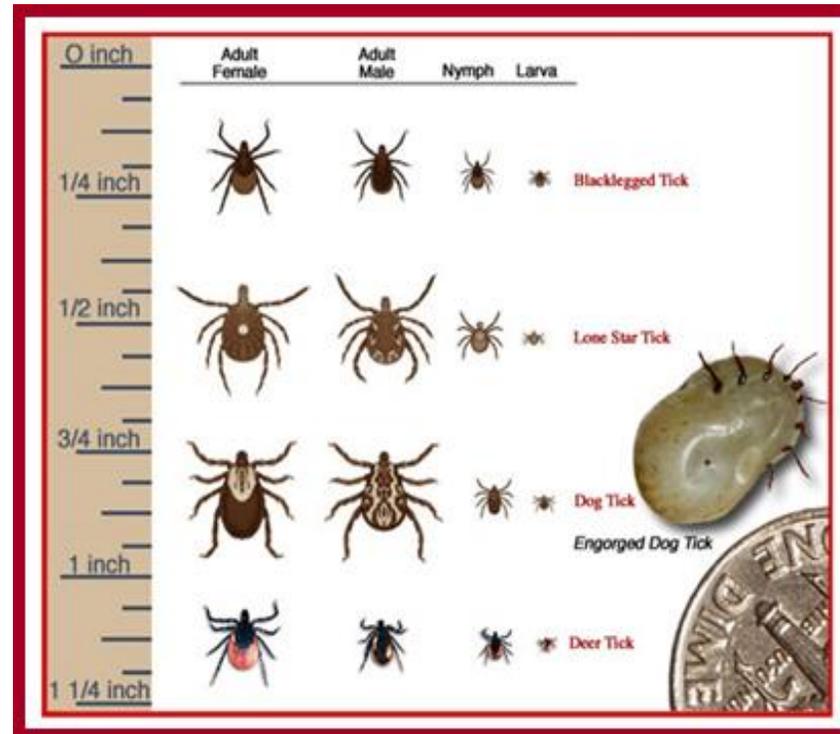
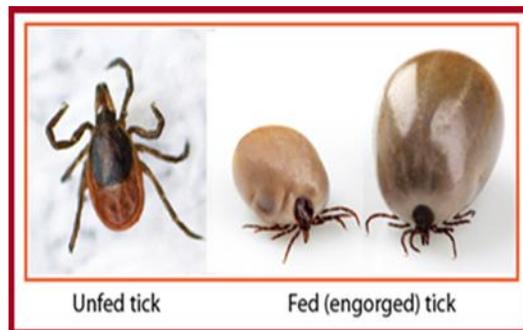
Another arthropod disease specifically, Anaplasmosis, is still prevalent within this region. In 2018, there were a total of 58 cases of Anaplasmosis. Babesiosis and Ehrlichiosis are all reportable to local health departments in NYS. These diseases are also caused from tick bites.

## Washington County is Proactive in preventing Tick Borne Diseases

- Lyme disease awareness as well as other vector-borne education is distributed to area health providers.
- Washington County Public Health provides an educational display for the public yearly at the Washington County Fair.
- Phone inquiries from county residents serve as an opportunity to educate regarding ways to reduce the risk of arthropod exposures.
- Washington County Public Health places innovative social media posts on Facebook, Twitter, and our Public Health website.

## Prevention is an Important Factor in Contracting Tick-Borne Diseases

- Dressing to repel by wearing light colored clothing and using Deet based insecticide help to reduce the incidence of these exposures.
- Tuck pants into socks when outside.
- In addition, animals and humans should be checked for ticks after every outdoor activity especially in wooded areas.



For more information on tick illnesses visit: <http://www.cdc.gov/ticks/>

## Washington County Communicable/Infectious Disease Data

Disease	2018	2017	2016
Anaplasmosis**	58	150	48
Babesiosis**	0	2	5
Brucellosis**	2	0	1
Campylobacteriosis**	15	22	21
Cryptosporidiosis**	7	0	2
Cyclospora	1		
E.Coli O157:H7	5	0	4
Ehrlichiosis (Chafeensis)**	0	2	1
Ehrlichiosis (Undetermined)	0	1	0
Giardiasis	13	6	5
Haemophilus Influenzae, Not Type B	1	1	1
Hemolytic Uremic Syndrome**	0	0	1
Hepatitis A	0	0	0
Hepatitis B, Chronic	4	0	1
Hepatitis C, Acute	1	1	1
Hepatitis C, Chronic	34	39	27
Influenza A, Lab Confirmed	191	125	95
Influenza B, Lab Confirmed	86	37	23
Influenza Unspecified, Lab Confirmed	1	2	4
Legionellosis	0	4	11
Listeriosis	0	0	0
Lyme Disease** ****	17	37	51
Meningitis, Other Bacterial	0	1	0
Meningococcal**	0	0	0
Mumps	0	2	0
Pertussis**	0	4	0
Q Fever**	1	1	0
Rocky Mtn Spot Fever**	0	0	0
Salmonellosis	9	4	10
Strep, Group A Invasive	1	3	2
Strep, Group B Invasive	2	10	5
Strep, GroupB INV, Early/late onset	1	0	0
Strep Pneumoniae Invasive	6	6	11
Toxic Shock Syndrome, Streptococcal**	0	0	0
Tuberculosis	0	0	0
West Nile Virus**	1	0	0
Yersiniosis	1	1	2
Syphilis Total	1	0	0
--Late Latent	0	2	0
--P & S Syphilis	0	0	0
--Congenital Syphilis	0	0	0
--Early Latent	1	0	0
Gonorrhea Total	8	20	23
--Gonorrhea	8	20	23
Chlamydia	136	151	148
Chlamydia P.I.D.	1	2	0
<b>Total NYS Reportable</b>	<b>604</b>	<b>646</b>	<b>679</b>

## *Sexually Transmitted Diseases*

The Sexually Transmitted Disease program is responsible for the investigation, follow-up surveillance and reporting of chlamydia, gonorrhea, syphilis, and HIV.

In 2018, throughout Washington County, the number of chlamydia (n=136) which is a slight decrease over the previous year. Total gonorrhea (n=8) cases dropped. Outreach education through schools and public posters regarding awareness is ongoing. Washington County continues to sponsor a weekly STD clinic along with Warren County. They are held every Tuesday evening from 6-7pm at the Warren County Health Services on Rt. 9 in Lake George. Weekly reminders for the clinic are posted via social media. A social media campaign was also pushed out over several weeks to increase STD awareness, reminding people to get tested and use protection.

### *Washington/Warren County's STD Clinic Report*

*Washington County Public Health works in collaboration with Warren County to provide an STD Clinic. The clinic is held every Tuesday Evening 6PM-7PM at Warren County Public Health.*

- The clinic is staffed by two nurses, one support staff and one physician.
- Prevention is stressed at the clinic.
- Condoms are supplied by NYS and are available at no charge to the patient.
- STD clinic routinely tests for gonorrhea, chlamydia, and syphilis on all clients.
- HIV testing is performed at the clinic (The HIV clinic counselors are from the HIV/Ryan White Program under the sponsorship of Hudson Headwaters.)
- The ages of the participation at the clinic ranges from 17yrs. – 60 yrs. (teenagers-elderly)
- The clinic remains a valuable resource to the community and to those in need of services.

## HIV and STD (Sexually Transmitted Disease) Clinic

	2015	2016	2017	2018
Clinics Held	51	51	46	50
Participants	155	141	151	117
<b>Males</b>	110	103	113	83
<b>Females</b>	46	38	37	34
Age Range	13-69	17-69	16-64	16-67
Warren Co. Participants	114	77	72	76
<b>Washington Co. Participants</b>	<b>31</b>	<b>37</b>	<b>43</b>	<b>24</b>
Saratoga Co. Participants	20	22	26	13
Other Co. Participants	5	5	10	4

### Diseases with Positive Test Results

For all Clinic attendees from Washington and Warren Counties

Diseases	2015	2016	2017	2018
Genital Herpes	0	1	1	0
Genital Warts	0	5	0	1
Chlamydia	16	5	13	6
Gonorrhea	0	0	0	0
Syphilis	0	2	2	3

## *HIV Testing and Counseling*

Washington County Public Health offers HIV Testing and Counseling. The program coincides with the NYS Department of Health regulations for state HIV confidentiality and testing laws.

Washington County Public Health continues to follow the Policy and Procedures in place for Mandated Court Order HIV Counseling and Testing for Victims of Sexual Assault. (There were no court orders requested in 2017)

Washington County residents can be tested for HIV through the Warren/Washington STD Clinic.

In 2017 Washington County Public Health conducted 3 HIV counseling and testing sessions.

*Consenting to HIV counseling and testing is strongly encouraged for all pregnant women. Although it is not mandatory for a pregnant woman to consent to HIV counseling and testing in NYS, it is mandatory for the baby to be tested at birth.*

## *Perinatal Hepatitis B*

*Women are routinely screened for Hepatitis B as part of prenatal blood work. In the event the pregnant woman tests positive for Hepatitis B, the information is transferred by the local health department and physician to the hospital where the mother plans to deliver to assure that the infant receives treatment within 12-hours after birth. In these cases, a mechanism is in place where a referral is made to the local health department to assure that the child receives the Hepatitis B vaccine series on a timely basis. Reports are submitted for statistical tracking to New York State Department of Health whenever a case is identified. There was 1 Perinatal Hepatitis B case investigation in 2017.*



# *Rabies Program*

*New York State Public Health Law mandates that each County Health Agency have a rabies control protocol. The focus is on prevention through vaccination of pets and interaction with animal/dog control services.*

**Washington County Public Health Rabies Program has established a comprehensive rabies response for its residents.**

- ◆ Provides timely surveillance, prevention, education, and control
- ◆ Operates 24 hours a day, 7 days a week (with the assistance of PH nursing on-call staff)
- ◆ Demands prompt case investigation
- ◆ Includes collaboration through communication and coordination with medical providers and agencies.
- ◆ Arranges for laboratory testing and diagnosis of animals suspected of being exposed to rabies.

**WCPH has an interdisciplinary approach to rabies control.**

- Animal Control
- Dog Control from Towns/Village
- Support from Surrounding Counties
- Law Enforcement
- Schools
- Area Veterinarians
- Treatment Providers

**Rabies Education is routinely provided.**

- WCPH Educator continues to update the most recent information on face book.
- Information sharing at varied community and agency meetings.
- Hudson Falls Dog Control/DCO Todd Humiston presented Pet Safety Education to area children through the cooperation of local schools.
- WCPH Nurses distribute literature to the community, through home visits, school visits, and other venues.
- Rabies Literature is supplied at the Washington County Fair (Nurses are on hand to answer questions about rabies)



**\*Washington County Public Health held and staffed 11 rabies clinics throughout the County\***

*The rabies clinics provide free rabies vaccine to any dog, cat, or ferret, regardless where they reside. During 2018, 990 pets attended the rabies clinics.*



	<b>2018</b>
Reported Animal Bites/ Guidance Calls	<b>373</b>
Animal Specimens Sent for Testing	<b>52</b>
Confirmed Rabid Animals	<b>2</b>
Individuals Receiving Post-exposure Vaccine Series or booster	<b>33</b>
Animal Clinics	<b>11</b>
Animals Received Vaccine at County Clinics	<b>990</b>
Blood Titers Drawn for Human Rabies Titers	<b>34</b>

***Washington County Public Health strives to design and maintain a rabies program that will minimize the incidence of the rabies disease. The goal for Public Health is to ensure the communities throughout Washington County are educated and informed while providing services necessary for the suppression of rabies. Reporting potential and actual exposures along with safe and appropriate containment of animals for observation or testing also remains crucial to an effective rabies suppression program.***

## *Health Education*

*The mission of Washington County Public Health Educator is to protect and promote the health of the entire community through programs and activities designed to address the safety, health and well-being of the people who live in Washington County. The Health Department seeks to create a healthful environment and ensure the accessibility of health services to all.*

To promote an array of health topics, Washington County Public Health utilizes social media. There are several benefits to using Social Media:

- A broad reach
- Ability to target specific groups
- Free or at low cost
- Fast and Easy to use
- Potential to build stronger community relations
- Ability to educate and promote healthy lifestyles in our communities



- **3 Blood Pressure clinics were held in 2018.**
- **31 BP's were checked**

- **2 Blood Drives for Employees were held**
- **49 Units were collected**

## Programs aimed toward children's education and safety

### 9 "Good Health Rules" Programs were conducted including 215 Preschoolers

#### "Good Health Rules"

- 1) Keep Clean
- 2) Eat Healthy
- 3) Go outside and Play
- 4) Cover Germs
- 5) Go to bed when it's bedtime

### Child Passenger Safety

*Washington County Public Health Educator has attended a variety of trainings, webinars, and online learning modules qualifying her to educate and demonstrate the proper use of seatbelts and car seats.*

Our Health Educator conducted 9 Seat Belt Safety Preschool programs including 202 children.

\* Students learn about the importance of buckling up when they are in a car, using a booster seat and riding in the back seat.

### Car Seat Safety Program (\$13,500 was received from the Governor's Traffic Safety Committee to continue this Program)

#### **Schedule A - Permanent Fitting Station**

- 43 car seats checked in the office, 11 were deemed unsafe and were replaced.

#### **Schedule B - Child Passenger Safety Awareness Training**

- WC Health Educator conducted 5 "Car Seat 101" presentations including; Head Start Family Advocates, Social Services Transporters, and the Southern Adirondack Child Care Network Annual Conference. Thirty-six people were educated.
- 9 Seat Belt Safety Preschool programs were presented (202 children attended)

#### **Schedule C - Child Passenger Safety Check Events**

#### **Schedule D - Child Safety Seat Distribution and Education Program**

- 103 Car seats were provided to 89 families
- Individuals must demonstrate correct installation and harnessing child before leaving



# Bicycle Safety

**Bike Rodeos**: *Each class begins with a safety lesson*

- ABC Quick Check
- Brakes
- Checking ourselves
- Helmet fitting
- **“Rules of the road”**
- Focus on bike riding skills through a variety of activities
- Booklets provided, handouts from SafeKids, NHTSA, and other bike lessons plans
- Spoke reflectors and flashing lights given out

Participants included:

- \* Hartford Elementary School (114 students)
- \* Fort Ann School (3<sup>rd</sup> grade – 36 students)
- \* Whitehall Summer Rec (13 children in attendance)

**Bike/Pedestrian Safety Education**: *Teaches bike and pedestrian safety*

- Educated children through **“Road to Safety”** game.
- Bike safety
- **“Rules of the Road”**
- Where and when to cross roads, be seen, crosswalks, crossing signals
- Reflective slap bracelets handed out.
- Helmet Fit

Participants included:

- \* Hudson Falls (200 students)

**Bike Helmet Distribution Program**: *Bike helmets are given to low income families*

- ✿ 19 Helmets were given to 7 low income families (1 helmet was provided to Youth Bureau for drawing winner)
- ✿ Our Rescue Squad partners are trained in distribution using proper helmet fit education (Participants included: Cambridge Valley Rescue Squad, Granville EMS, Salem EMS, and Easton-Greenwich Rescue Squad). The rescue squads distribute to outer areas of Washington County.



## Tai Chi for Arthritis

*Tai Chi for Arthritis is a specifically designed program for people with arthritis. It is modified to help improve their movement and thus quality of life. Tai Chi is evidence based and has had the full support of Arthritis Foundations around the world. Medical authorities agree that Tai Chi for Arthritis helps people with arthritis improve strength, flexibility, proper function of the heart, lungs and muscles as well as improved relaxation, balance, posture and immunity.*

### Tai Chi Classes Offered

- 6 Tai Chi classes were conducted in 2018
- There were 35 registered participants in the six Tai Chi classes.
- WCPH Maternal Child Health Nurse taught 3 classes (Hartford, Fort Edward, and Fort Ann)
- WCPH Educator taught three classes (Greenwich, Cossayuna, and Salem)
- Tai Chi has been positively received by our communities within the County



*Pictures of our Tai Chi Classes are available on the Public Health "Pictures" page [http://www. Co.washington.ny.us/1022/Pictures](http://www.Co.washington.ny.us/1022/Pictures)*

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## **WCPH Educator attends and sits on several committees/coalitions:**

### ◆ [Hometown Vs Heroin & Addiction Coalition of Warren/Washington County](#)

The Hometown Vs Heroin & Addiction Coalition of Warren/Washington County was formed in March of 2014 to address the misuse and abuse of opiates and heroin within our borders. It consists of a group of concerned community members. The goal is to aid in the epidemic of heroin and opioid use which has become prevalent in our counties. Drug addiction affects every member of our communities, whether directly or indirectly.



### ◆ [Domestic Violence Community Coordination Council \(DVCCC\)](#)

The Domestic Violence Project leads local interdisciplinary efforts to build an effective response to domestic violence. It is focused on victim safety and offender accountability.

### ◆ [Head Start Health Advisory Board](#)

### ◆ [Suicide Prevention Coalition](#)

This coalition has established on September 30, 2014 as a result of receiving \$4,000 in mini-grant funds from Mental Health Association of New York State for Suicide Prevention. Our mission is to prevent suicide in our community through education, providing resources, and trainings to our schools and community members. We aim to increase awareness and reduce the stigma of getting help. We strive to strengthen communication and coordination of services to support those impacted by mental illness and suicide.



*Education and Training is available to community groups:*

- Schools
- Professionals within Criminal Justice System
- Legal System
- Court
- Health System
- Substance Abuse Professionals
- Workplace
- Faith Communities
- and Others

*WCPH Educator has provided an array of **educational presentations** to several community organizations:*

**TOPS (Taking Off Pounds Sensibly)**

- February: Sugar Savvy
- May: Walking-Healthy Living Spring Challenge
- June: Walk for the Health Of it – Step Into Summer Challenge
- August: Staying Motivated
- October: Emotional Eating
- November: Tumeric Golden Milk

**Skenesborough Harbor in Whitehall**

- June: Ticks and Lyme

**Whitehall Senior Meal Site**

- June: Ticks and Lyme

*In February 2018, Washington County partnered with the Washington County Youth Bureau and Cornell Cooperative Extension to present Winterfest.*



**Ice Hockey**



**Ice Bowling**



**Ice Skating**



**Horse Drawn Wagon Rides**



**Ice Fishing**

*And so much more!!!*

# *Women, Infants and Children Nutrition Program (WIC) 2018*

The WIC Program is a nutrition program designed to safeguard the health of low- income pregnant and breastfeeding women, infants and children up to the age of five who are at nutritional risk. WIC is administered at the Federal level by the Food and Nutrition Service of the United States Department of Agriculture (USDA). The program provides: supplemental nutritious foods in the form of food vouchers; nutrition education and counseling at WIC clinics; health assessments; and referrals to other health, welfare and social services.

## **The goals of the WIC Program are to:**

- Improve pregnancy outcomes with fewer premature births and infant deaths
- Improve dietary outcomes for infants and children
- Reduce the incidence of obesity in children
- Support and encourage breastfeeding as the optimal method of infant feeding
- Promote healthier habits by encouraging healthier lifestyle choices
- Provide families with referrals to other health, welfare and social services programs

In 2018, there were 91 WIC Programs sponsored by various health and medical providers in New York State. In Washington County, WIC is sponsored by Washington County Public Health Services. To be eligible for WIC, a family must be at or below 185% of the poverty guidelines.

## *Washington County WIC Clinics*

 <p><b>Hudson Falls</b></p> <ul style="list-style-type: none"><li>• Annex Bldg II</li><li>• Mon. thru Fri.</li><li>• Sat. by app't</li><li>• 972 Served Monthly on average</li></ul>	 <p><b>Cambridge</b></p> <ul style="list-style-type: none"><li>• Village Offices</li><li>• 1st Tuesday Monthly</li><li>• 97 Served monthly on average</li></ul>	 <p><b>Granville</b></p> <ul style="list-style-type: none"><li>• Baptist Church</li><li>• 2nd Tuesday Monthly</li><li>• 98 Served monthly on average</li></ul>	 <p><b>Greenwich</b></p> <ul style="list-style-type: none"><li>• Town Office Bldg</li><li>• 3rd Tuesday Jan, Feb, Apr, May, July, Aug, Oct, Nov.</li><li>• 48 Served monthly average</li></ul>	 <p><b>Salem</b></p> <ul style="list-style-type: none"><li>• United Presbyterian Church</li><li>• 3rd Tuesday- March, June, Sept., Dec.</li><li>• 48 Served monthly average</li></ul>	 <p><b>Whitehall</b></p> <ul style="list-style-type: none"><li>• Recreation Center</li><li>• 4th Tuesday Monthly</li><li>• 97 Served monthly average</li></ul>
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Funding for the Washington County WIC Program is approximately 96.8% USDA and 3.2% New York State. Washington County is reimbursed 100% for sponsoring the WIC Program. In 2018, the cost of operating Washington County WIC was \$1,344,254. The following shows the breakdown of how those funds were allocated:

**Food Dollars - \$ 889,050.**

Food dollars are the value of all redeemed WIC Benefits given to WIC families to purchase foods at approved vendors. All foods provided to WIC participants must be prescribed by the WIC nutritionist and are tailored to meet participants needs.

**Administrative Budget - \$413,322.**

Administrative funds are used to support the administration of the WIC program to include salaries and fringe benefit costs for 10 full and part time staff, physical space and satellite clinic space costs, travel costs and all other operating expenses. This dollar amount includes an addition of a cost of living adjustment of \$43,226.

Farmers Market Coupons - \$20,900. \$20 worth of Coupons are provided to each WIC child over 6 months of age, once per year during the local growing season. Use of these coupons help to support our local agricultural economy while exposing families to fresh, locally grown produce. Of the total amount issued, 31.9 % were redeemed. This was an increase from last year.

**Breastfeeding Peer Counseling Program- \$15,970.**

The Peer Counseling Program is intended to increase the initiation and duration rates of breastfeeding. As a "Peer" program, a Peer Counselor can encourage breastfeeding and other appropriate parenting habits by mentoring mothers.

**Breast Pump Program -\$5,011**

Funds for the breast pump program are supplied by USDA and are considered additional food dollars. A woman that breastfeeds not only provides a healthier start for her infant but also incurs fewer cost by eliminating the need to spend money on formula. Many mothers requesting a pump do so at the time they want to return to work. WIC has been able to lend pumps and provide support to breastfeeding moms throughout Washington County.

## *How WIC Helps*

The WIC Program saves money by improving the health of our growing families. Pregnant women enrolling in WIC receive prenatal care earlier, and have fewer pre-term and low birth weight infants. Improved birth outcomes result in a reduction in health care costs associated with these risk factors. WIC aims to prevent malnutrition and ensure normal growth during childhood. WIC helps to reduce the incidence of iron deficiency anemia and other health problems associated with poor diet by encouraging children to consume more key nutrients. Nationally, the obesity rate of children continues to decline among WIC participants.

Families on WIC acquire healthier habits that can last throughout life. WIC accomplishes this by providing participant-centered nutrition education and counseling, WIC checks for healthy foods, and referrals to numerous agencies and health services. The WIC food package includes fruits and vegetables, juice, whole grains, eggs, low fat dairy, canned and dried beans, and peanut butter.

### *eWIC*

The New York State WIC program has just completed the roll out of a new system called NYWIC whereby participants are able to use an eWIC benefit card to purchase their WIC foods. The eWIC card works like a debit card and makes shopping with WIC benefits more discreet while allowing WIC vendors to be reimbursed faster. A new mobile app called WIC2Go has also been launched. This app, once downloaded on their mobile phone, allows participants to scan bar codes of food items to determine whether they qualify for purchase under WIC regulations. It also allows users to check account balances, view upcoming WIC appointments and locate WIC vendors and clinics.

The eWIC card and the new NYWIC system have improved the shopping experience for consumers. It has also improved a myriad of administrative functions for our local WIC agency, streamlining procedures and making WIC more effective in its mission of improving the health and wellbeing of our participants through our nutrition counseling and referral services.

## *Breastfeeding Promotion and Support*

Washington County receives a portion of its funding to promote breastfeeding as the optimal method of infant feeding. Research shows that breastfeeding provides health benefits to both the mother and infant, therefore, helping to reduce health care costs. Mothers who breastfeed have reduced risk of heart disease, diabetes and certain cancers. Breastfeeding lowers infants' risk of SIDS, infections, and stomach problems as well as obesity, diabetes, and asthma in childhood.

At WIC, we monitor breastfeeding initiation rates and also the duration of breastfeeding. The Healthy People 2020 goal is to have a greater than 80% initiation rate. Many factors can affect a mother's success with breastfeeding. WIC has a positive impact on women choosing to breastfeed their babies and provides support to increase their breastfeeding duration, ideally until to the infant's first birthday.

Washington County has a Breastfeeding Peer Counselor Program, a breast pump program and offers extra foods to mothers choosing to exclusively breastfeed their infants. Since 2007, Washington County's breastfeeding initiation rate has improved from 48% to the current rate of 70.3 % for 2017. Although the 2018 numbers are not yet confirmed, the latest figures from the new NYWIC System indicate that the current average breastfeeding initiation rate may be as high as 75.1%. As this NYWIC System improves, confirmed numbers will become available.

## **Washington County WIC continues to provide quality services to the residents of Washington County.**

Washington County WIC is committed to providing participant-centered and quality services to the residents of Washington County. We gladly serve walk-ins and strive to eliminate barriers to participation in WIC. Our staff includes two American Dietetic Association Registered Dietitians as well as two Certified Lactation Counselors. All staff members receive ongoing education and training. Participants of Washington County WIC benefit by having access to our qualified staff members who strive to provide optimum service, support, and valuable nutrition information to all our WIC families.



## All Hazard Disaster Preparedness Planning

Washington County Public Health consistently works closely with many regional partners to ensure comprehensive emergency planning. Washington County Public Health representatives attend monthly tabletop exercises in collaboration with the Glens Falls Hospital. Biannual, County Partners meetings are also hosted by Washington County Public Health.

The Washington County Public Health BT Coordinator attends monthly regional meetings with 17 other County representatives for networking and training as it relates to County preparedness and deliverables.

**Annual infection control training is mandatory for all Washington County Public Health staff and is updated annually to meet the most current evidenced based standards of practice. Infection control policies and procedures area also reviewed and updated annually to reflect the current best practices.**

### A Full-Scale Point of Dispensing (POD) Drill was conducted in 2018



- \*This drill was designed to test the ability of the health department to dispense medication in the event of a major biological emergency.
- \*The emphasis was put on serving people with functional needs, such as hearing and visually impaired and the elderly.
- \*Participants included clients with seeing-eye dogs, a sign language interpreter and elderly volunteers.
- \*All public health staff participates and are trained in specific roles to respond in the event of a County wide emergency.
- \*NYSDOH assigns specific objectives that must be met by the local health department.
- \*Washington County consistently meets all objectives and deliverables put in place by the NYSDOH.
- \* Quarterly call down drills and deliverables are conducted and submitted as

### NYSDOH has a volunteer registry called Serve NY, created to assist with response to emergencies.

- \***ServNY** is a registry of volunteers, both medical and non-medical people that have stated availability to assist the Health Department in the event of an emergency.
- \*All ServNY volunteers are vetted through NYS to determine their ability to join the program
- \***Register to become a ServNY volunteer at <https://apps.health.ny.gov/pub/servny>**

## Glossary

AFIX – Assessment Feedback Incentives Exchange  
CDC – Center for Disease Control  
CPSE – Committee on Preschool Special Education  
EI – Early Intervention  
EIO – Early Intervention Official  
EIP – Early Intervention Program  
HCP – Health Care Providers  
HCS – Health Commerce System  
HCUP – Healthcare Cost and Utilization Project  
IDTA – Interdisciplinary Team Approach  
IEP – Individualized Education Plan  
IFSP – Individualized Family Service Plan  
LHCSA – Licensed Home Care Service Agency  
LHD – Local Health Department  
LPPP – Lead Poisoning Prevention Program  
MCH – Maternal Child Health  
MOMS – Medicaid Obstetrical Maternal Services  
NAS – Neonatal Abstinence Syndrome  
NYSIIS – New York State Immunization Information System  
OASAS – Office for Alcoholism and Substance Abuse Services  
SEIT – Special Education Itinerant Services  
TB – Tuberculosis  
VFA – Vaccines for Adults  
VFC – Vaccines for Children  
WCPH – Washington County Public Health  
WIC – Women Infant Children