

ANNUAL
REPORT 2018

Chautauqua County Department
of Health and Human Services

HELPING
PEOPLE
through all walks of life



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2018 DHHS ANNUAL REPORT

Designed By:
Sherri Rater

Administrative Assistant to the Director

Assisted with Photography:
Roy Newman
Social Services Investigator

A MESSAGE FROM DIRECTOR, CHRISTINE SCHUYLER



We are pleased to present the Chautauqua County Department of Health and Human Services' 2018 Annual Report. It is my hope that the figures, facts, stories and photos in this document convey the passion, hard work and dedication of everyone in this Department.

It is an honor and a privilege to serve as the Director of Health and Human Services (Public Health Director and Social Services Commissioner). It is hard for me to believe that 2018 marked 10 years of County service for me. While this time has certainly had its challenges, the rewards are substantial.

Helping people through all walks of life – what a fitting title for this year's annual report! Because the Department of Health and Human Services is the product of the integration of a Department of Health and a Department of Social Services, I've often said that we touch virtually every resident of this county at some point in their lives. The addition of the county's Coroner Program to DHHS in 2018 further extended our public service from pre-conception to beyond the lifespan. Every single thing that every single person in this Department does from Community Health, Environmental Health, Early Intervention, Child Welfare, Adult Protection, Child Support, Legal Services, Youth Bureau, Temporary Assistance, Medicaid, Coroners, Correctional Health, and Administrative Support help people through all walks of life.

We are tackling some of the toughest issues facing our county, state and nation: the opioid epidemic, poverty, homelessness, chronic and communicable disease, and child and adult abuse and neglect. That's heavy stuff. I cannot give enough credit to each and every member of my staff who put forward all they have to uphold our mission and improve the health and well-being of our County's residents. In this report, you'll notice their spirit and generosity.

As I look forward, I promise to continue to lead this Department to the best of my ability as we fulfill our public health and human service responsibilities.

Together, we will continuously evaluate our programs and processes and strive to meet the ever-changing needs of communities and individuals –as well as the ever-changing responsibilities of government operations. Together, we- along with our fellow County agencies, our community and school partners, and our leadership- will continue to help people through all walks of life.

I hope that you enjoy this snapshot of DHHS 2018!

Sincerely,


Christine Schuyler, BSN, RN, MHA
Director

Who We Are

The Chautauqua County Department of Health and Human Services is a community of public health and social services professionals. In collaboration with our partners, we protect and promote the health, safety, and self-reliance of all those in Chautauqua County through the prevention of disease, proliferation of meaningful life, protection of the environment, provision of essential human services, and provision of leadership in public health and social crises.

Our divisions include Administrative Services, Adult Children & Family Services, Legal, Medical Assistance and Services, Temporary Assistance, Public Health and Youth Bureau.

OUR MISSION

The Chautauqua County Department of Health and Human Services (DHHS) is dedicated to building a healthy, safe and strong community. We protect and promote the health of all County residents and provide essential human services, especially for those who are least able to help themselves.

VALUES/PRINCIPLES

- We believe in improving the health and quality of life of our community through the prevention and treatment of disease and other physical, mental health and social conditions.
- We believe that families should be protected from violence and gain support for their efforts to be self-sufficient.
- We value work as a foundation of independence, a means to connect with others and a tool for personal growth and family preservation.
- We believe in measuring our work by the difference it makes for clients and community. We strive to continually improve so that our interactions with clients and the community are efficient, focused, and understandable.
- We value our commitments to others: urgency with the time and lives of clients; thoughtful investment of support from the community; careful consideration for the ideas and efforts of partners.
- We value relationships—with clients, colleagues, and the community—as gifts to be nurtured. We invest in those relationships with honesty and respect. It is through the diversity of our relationships that we make change and are changed.

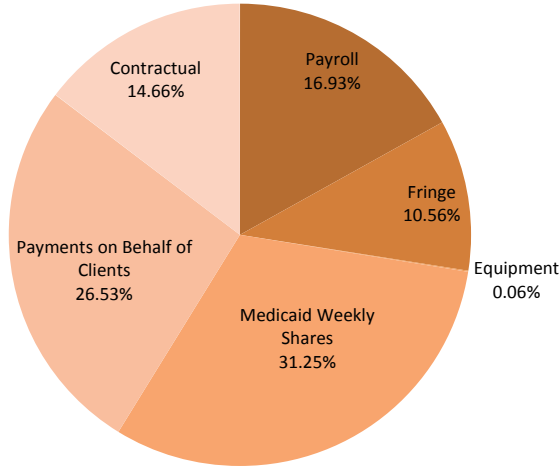
Organizational Wheel



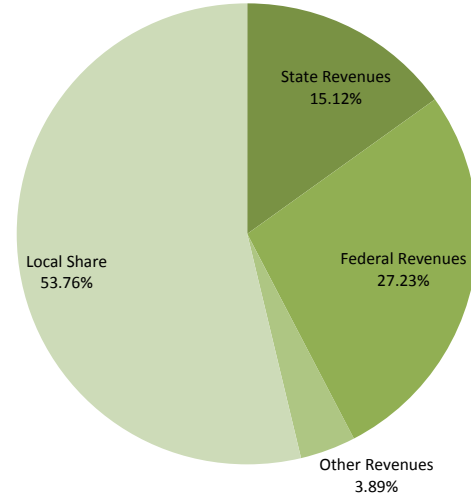
At a Glance

2018 Budget Expenditures totaled \$ 96,832,016. The charts below reference percentages for expenditures and funding.

2018 DHHS Expenditures by Type



2018 DHHS Funding by Source



Program Activities & Caseload Summary

CASELOAD REPORT Caseload on December 31st

	2017	2018
Temporary Aid to Needy Families (TANF)	2,497	1,834
Medicaid (MA)	14,109	9,039
Supplemental Nutrition Assistance Program (SNAP)	11,390	11,562
Adult Protective Services Cases (APS)	511	536
Children in Foster Care	103	109
Children in Day Care	1,219	881

PROGRAM ACTIVITIES Cumulative for year

	2017	2018
Abuse/Neglect Reports Resulting in Investigations	2,486	2,513
TA & SNAP Applications Received	16,012	17,823
Managed Care Enrollment	27,224	26,279
Sanctions	563	562

Social Services Client Expenditures by Program

PROGRAMS	2017	%	2018	%
Medical Assistance	\$30,101,850	51.3%	\$30,263,493	54.1%
TANF	\$8,636,517	14.7%	\$8,162,706	14.6%
Safety Net	\$7,846,197	13.4%	\$7,566,280	13.5%
Day Care	\$4,190,606	7.2%	\$3,423,515	6.1%
Foster Care/Institutional	\$4,761,897	8.1%	\$5,286,002	9.4%
Juvenile Delinquent Care and State Training School	\$2,796,878	4.8%	\$934,518	1.7%
Emergency Aid for Adults	\$133,818	0.2%	\$170,101	0.3%
Other	\$177,569	0.3%	\$149,515	0.3%
TOTAL Expenditures	\$58,645,332		\$55,956,130	

Health Revenues

PROGRAMS	2017	%	2018	%
Preschool Special Education	\$4,549,342	49.7%	\$3,537,714	42.1%
State/Federal Grants	\$2,114,312	23.1%	\$2,440,036	29.0%
State Aid	\$904,304	9.9%	\$956,416	11.4%
Fees for Service	\$551,423	6.0%	\$535,012	6.4%
Early Intervention	\$642,832	7.0%	\$596,591	7.1%
Nurse Family Partnership	\$310,044	3.4%	\$257,812	3.1%
Other	\$84,000	0.9%	\$84,220	0.9%
TOTAL REVENUE	\$9,156,257		\$8,407,801	

STAFF HONORED FOR SERVICE

Lifesaver Program

Our Lifesaver program is an employee recognition program that encourages employees to nominate coworkers for Lifesavers. A Lifesaver helps us to keep our heads above water, take a deep breath, smile and find the motivation to hang in there. Over 100 people were nominated in 2018 for lifesavers! Here are a few of the submissions:

Gladys Rivera, Amy Meyer, Tiffany Dejaiffe, Kim Alquire & Britney

Campbell - Jail Medical—An already challenging environment to work in, the jail has proposed a variety of challenges that each and every member of the medical unit have risen to meet. Transitioning leaderships, transitioning medical providers, and development of protocol and procedures to ensure the utmost holistic caring medical unit for the patients they service. As a new provider I have appreciated the support of this team as we grow and learn together.

Mindy Kaufmann – Children and Family Services Like sunshine Mindy comes to work each day with a warm smile. She is always willing to pitch in and help when needed and has been a great time-saver for Home Finding staff as we prep for GPSII/MAPP classes and complete home studies Thank you Mindy Kauffman for all you do each and every day!!



Gavin Bishop – Medicaid Gavin is an outstanding co-worker. You can count on him to assist you with anything whenever. He is always willing to help out with central intake. Thank you Gavin in case we do not tell you enough!



Linda Musante - - TA Getting around in the snowy conditions here in Chautauqua County can be challenging, even for those of us who are fortunate to be able to do so. Recently, an elderly woman reached out to Senator Cathy Young’s Office as her furnace was not working and she had no money to have it repaired. She had been using a space heater and her gas oven to heat her mobile home and had begun to experience headaches, most likely from the fumes from the oven. She had no transportation to get to the office and no one nearby that was able to help her. Linda Musante braved the cold and snowy elements to conduct the interview in the woman’s home. The relief in this woman’s voice when I told her that someone would be coming to her home was genuine and heartfelt. Thank you Linda for the great work you do every day! It’s truly a blessing to work in the human services field with so many kind and caring co-workers.

help her. Linda Musante braved the cold and snowy elements to conduct the interview in the woman’s home. The relief in this woman’s voice when I told her that someone would be coming to her home was genuine and heartfelt. Thank you Linda for the great work you do every day! It’s truly a blessing to work in the human services field with so many kind and caring co-workers.

2018 RETIREES

Joni Brown, Rosa Cardino, Janice Crandall, Vicki Coan, Jim Cunningham, Nanette Dunham, Joanne Dunn, Carol Gizowski, Penny Gummo, Kathy Hamernick, Janet Holcomb, Theresa Ibach, Sally Keppel, Lisa Lauffenburger, Jacqueline Mann, Deborah Pacheco, Lynn Staszak, JoAnn Tworek, Luanne Wanamaker, Barbara Widrig, Rebecca Winchester

30 YEARS

Diane Anderson
Kelly Ferrugia
Celeste Horton
Don Nadeau



Celeste Horton
30 Years

20 YEARS

Lori Deponceau
Tara Gugino
Kathy Jordan
Amy Josephson
Lisa Lauffenburger
Brenda Lemke
Cathy Melnick
Jennifer Mikula
Natalie Navarro
Sharon Oakes
Wendy Short
Stacy Stebell
Mark Stow
Sue Wilcox



Brenda Lemke
20 Years

10 YEARS

Chris Anderson
Daisy Berrios
JoAnn Brown
Marcy Casler
Angie Damore
Laurie Dolce
Michelle Fellows
Christine Galbraith
Enilda Lebron-Baez
Angela Morello
Shannon Olson
Christine Schuyler
Amy Beth Seekins
Lori Skellie
Georgianna Timmerman



Mark Stow
20 Years

5 YEARS

Janice Echevarria
Tina Gross
Jan Rarig



Georgianna Timmerman
10 Years



Angela Morello
10 Years



Paul Snyder

Paul Snyder: Paul received a commendation at the County Legislature meeting on July 25, 2018. The City of Dunkirk suffered a major water line break due to a construction contractor accident that resulted in the loss of water service to thousands of customers in the northern Chautauqua County region. The Legislature commends Paul who ‘provided his time and talents above and beyond the call of duty to assist the City of Dunkirk in their efforts to repair the water main and conduct water testing to return it to service as soon as possible’ as stated in the certificate that he received. Congratulations Paul!



Bree Agett

Bree Agett: Recipient of the YWCA 2018 Women of Achievement Award in the Health, Wellness and Fitness category. Here is an excerpt from the Jamestown Post Journal: Bree Agett was recognized as the health/wellness/fitness woman of achievement for promoting better living standards and exemplifying healthy lifestyles through leadership and empowering others to follow in her footsteps. She serves as the epidemiology manager for the Chautauqua County Department of Health and Human Services.

In her work, Agett tracks and trends diseases and other health issues impacting county residents. She also oversees the department’s community health assessment and community health planning process. She has worked for the county since 2009, helping out as a sanitarian trainee and public health planner.

“I have achieved nothing in isolation. It’s all been a part of a bigger process that involves many other hardworking and passionate people,” Agett said.

The Leadership Development Series is for nominated individuals from various divisions throughout DHHS who are current supervisors or are not but wish to take on a leadership role in the organization. The purpose of the training series is to foster the philosophy of “leading from any chair.” The theme for 2018 was “Be the Kind of Leader You Would Follow.” Topics in the Leadership Development Series incorporate skill building, dialog or group discussion and application of new learning. It includes six two-hour topics culminating in a Completion Ceremony with the graduates and guests in support of their efforts. The 2018 program was developed by DHHS Staff Development and the Center for Continuing Education at Jamestown Community College. Participants attending these sessions learned about and gained a better understanding of the importance of managing

themselves in a manner that is in keeping with the organization’s mission, principles and customer service statements; their self-awareness, organizational expectations, and professionalism in the workplace; the importance of emotional intelligence and how, when managed well, is an important leadership skill, one’s own leadership strengths and areas for refinement as well as the link between emotional intelligence and critical thinking; techniques for growing leadership in others, growing employee commitment with vision, mission and optimism; and the importance of a professional leadership development plan as well as how self-assessment is key to improving one’s leadership. We had ten graduates: Jennifer Clever, Laurel Gugino, Shawn Hitchcock, Nicole Kimball, Faith Kuhlman, Rosita Rivera, Daisy Rodriguez, Sharoy Ruby, Malinda Stoller, and Theresa Szymanek. We are proud of our graduates and thankful for our partners.



Leadership Development Series Graduates

TA/MA Otter to Ducky events

The Otter Ducky group meets to identify a list of things we “Otter do better” and things that we do “Just Ducky”. Volunteers from Temporary Assistance and Medicaid serve on the workgroup to help to move those things we otter do better to things we do just ducky. The workgroup typically organizes at least one training per year with some type of customer service or team building activity. The program has resulted in improved morale, finding ways to help workers de-stress and strives for consistency between both Temporary Assistance and Medicaid units.

New Employee Recognition and Appreciation Program Late in 2018 a new workgroup was developed to identify ways to enhance employee recognition which resulted in the ERA Program. Here at DHHS, we value and appreciate our employees and want to make sure that they are being recognized for their efforts. New initiatives will be launched in 2019 to make sure that employees who go above and beyond are celebrated. These new efforts include an Employee of the Month Program where Directors nominate employees for being exceptional, the High Five Peer-to-Peer Recognition program (formerly known as Lifesavers), and other recognition components still in development. Future components will recognize things like new initiatives, team work, cross-agency collaborations and much more.



Otter to Ducky Group

Employee Generosity

Strides for Success Clothing Drive

DHHS supported the Strides for Success Clothing Drive by putting boxes at various county building where employees could donate their gently used professional attire. Chautauqua Striders hosted its first ever “Strides 4 Success” professional clothing drive and seminar Tuesday, May 15, in Jamestown. The event will give students the opportunity to obtain professional attire at no cost to them, get a free haircut while learning about the importance of appearance and self-care, and speak with representatives of local employers, colleges and the U.S. Army.



Strides for Success Donations

Preventive Angels

During the Holiday season, Department staff purchased Christmas gifts for 93 children we provide services to. This is a long standing program that we are proud to be a part of.

United Way

Department employees pledged to give more than \$5,000 to the United Way in 2018. Every dollar donated to the United Way stays in Chautauqua County assisting residents through over 35 community partners, offering services like day care, tutoring, mentorship, trauma counseling, afterschool care and many others.

Cards for a Cause

The Center for Elder Law and Justice set a goal of donating 850 handmade cards and letters for seniors. A contest was held within the department and together we made over 150 handmade cards and painted rocks for distribution by the Center for Elder Law and Justice. Our very own Pat Baker (right) selected the winner!

OFA Gift Baskets

Our staff helped the Office for the Aging by donating lip balm, bath soap and dish soap for their 2018 Santa for Seniors Christmas Bags.



Handmade Cards and Painted Rocks for Seniors

ADMINISTRATIVE SERVICES

The Administrative Services Division is responsible for the supervision and coordination of the fiscal and operating functions that support the operation of the Department of Health and Human Services.

Fiscal



Fiscal

Fiscal responsibilities include issuing benefits to eligible social services clients; auditing and processing administrative invoices and employee travel reimbursements; representative payee accounting for clients; processing employee payroll; processing cash receipts; managing credit cards; preparing contracts; tracking vendor insurance certificate renewals; preparing and filing reports and claims for reimbursement; assisting with grant application processing; preparing bank reconciliations; originating purchase orders; dealing with various audits and process reviews; budgeting and managing that budget; and preparing resolutions.

	2017	2018
Checks issued to social services clients	16,666	14,441
Electronic benefits issued to social services clients	49,400	50,719
Bills paid for representative payee clients	15,191	17,015
Open contracts	342	330

Personnel

Personnel has the responsibility of coordinating and completing all personnel related functions for the department. This includes coordination with supervisors and staff during the new hire process, evaluations, promotions, leaves of absences, intradepartmental moves and separation process. Personnel coordinates Civil Service regulations and procedures and acts as a liaison to Chautauqua County Human Resources Department.

	2017	2018
Number of employees	371	373
Position change requests processed	178	141



Personnel

Staff Development

The DHHS Staff Development Unit is operated by a two-person team who perform a wide variety of tasks designed to strengthen the department's ability to function effectively in a rapidly changing, resource lean operating environment while maintaining a focus on the training needs of the front line staff. Special emphasis include assessing training needs, creating and maintaining an environment which staff have timely access to information and training resources to advance their success and ensure greater attention to agency performance outcomes and promoting life-long learning and continuing education services.



Staff Development

Hours of Training	2017	2018
Local	6,388	5,951
State	6,722	7,356
Total	13,110	13,307
Employees in Degree Programs	7	4

HUMAN/SOCIAL SERVICES

Human/Social Services Division encompasses Temporary Assistance, Medicaid, Adult, Children and Family Services and Legal with over 300 staff members to accommodate the needs of Chautauqua County residents.



Jon Anderson
Deputy Commissioner of
Social Services

Temporary Assistance Division

The Temporary Assistance (TA) Division is responsible for the administration of Temporary Assistance, Supplemental Nutrition Assistance Program (SNAP, formerly known as Food Stamps), Home Energy Assistance Program (HEAP), Employment and Child Care programs.

The goals for each of these units are as follows:

- Assist clients in achieving self-sufficiency;
- Provide accessible and timely services to applicants and recipients; and
- Provide a high level of customer service.



Temporary Assistance Supervisory Staff:
Diane Anderson (middle) – Director of Certification
Denise Smith (left) Vicki Coan (right)
Principal Social Welfare Examiners

Temporary Assistance

Temporary Assistance is the program that provides cash assistance to eligible recipients. Recipients receive a cash benefit either paid to them or directly to a vendor, such as a landlord or utility company. The cash grant is based on their household composition, shelter and heating type. Income received by the household may affect the amount of the grant. Resources are also reviewed in determining eligibility for Temporary Assistance.

Applications <i>Family Assistance, Safety Net and Emergency Assistance</i>	2017	2018
Received	9,527	9,716
Approved	1,930	2,243
Denied/Withdrawn	5,603	4,714
Open/Closed	2,163	2,005

Temporary Assistance Caseload (as of 12/31)

2017	2018
2,497	1,834

Dunkirk Assistance Staff
Emergency Assistance, Eligibility, TA, MA, HEAP, Child Support



Supplemental Nutrition Assistance Program (SNAP)

SNAP (formerly known as Food Stamps) is a federally funded program administered by the Department of Health & Human Services for the United States Department of Agriculture. The goal of the program is to provide a higher level of nutrition to income eligible individuals and families by enhancing their ability to purchase food. Eligibility for the program is determined by financial criteria.

SNAP Caseload <i>(as of 12/31)</i>	2017	2018
Temporary Assistance SNAP	530	464
SNAP Only (Non TA Households)	11,390	11,562
TOTALS	11,920	12,026

SNAP Applications	2017	2018
Received	6,485	8,107
Approved	7,260	5,517



SNAP Unit

Expedited SNAP

All SNAP applications must be screened in order to determine those households that qualify for expedited SNAP benefits. This includes, for example, individuals who have terminated income, or pending income. Identification is required of all applicants. Any income received within the month of application, together with liquid resources, is budgeted against amounts to determine eligibility. Interviews are conducted on an immediate basis so those eligible households may receive their SNAP benefit within 5 calendar days.

Employment Unit

The employment unit consists of 15 Case Managers, 2 Clerical staff and 2 Senior Social Welfare Examiners. The unit offers a variety of programs and services to Temporary Assistance recipients to help them gain and retain employment and become self-sufficient.

The programs and services include employability assessment and planning, job readiness training, work experience and job search. Other activities include the Transitional Employment Advancement Program (TEAP) and On-The-Job Training programs.

	2017	2018
Non-Compliant Sanctions	563	562



Employment Unit

Fair Hearings

Fair Hearings is the process applicants and recipients have to review Agency decisions made on their application or active case. The Fair Hearing Representative is responsible to represent the Agency in this process.

Fair Hearings Activity	2017	2018
Hearings Requested	339	375
Held	48	64
Affirmed	34	42
Reversed	7	22
Withdrawn by Client	84	73
Defaults	103	135

Child Care

The Child Care Unit provides child care subsidy to recipients of Temporary Assistance who are participating in employment activities (subsidized employment, unsubsidized employment, work experience, job search, education, training, etc.). Child care subsidy is also provided to recipients of Child Protective Services or Preventive Services. Low income working families and recipients who are transitioning from Temporary Assistance to employment may also qualify for a child care subsidy. These benefits are provided to assist families in obtaining and maintaining employment and self-sufficiency.

	2017	2018
Families Receiving Child Care Services <i>(average per month)</i>	716	669
Children Receiving Child Care Services <i>(average per month)</i>	1,095	914

Home Energy Assistance Program (HEAP)

HEAP provides energy assistance to low income households through payments to their fuel and/or utility suppliers. The program also provides emergency assistance for repair or replacement of essential heating equipment and in fuel emergency situations.

The Chautauqua County Department of Health & Human Services HEAP unit is responsible for the processing of all HEAP applications for those households who do not receive Temporary Assistance or SNAP.

The 2017 – 2018 administrative allocation for Chautauqua County totaled \$333,681. Payments authorized by the County are sent directly from Albany to the vendors. The allocation is for administrative costs only. HEAP is 100% federally funded.

	2016-2017	2017-2018
Administrative Allocation	\$379,444	\$333,681
Applications	2016-2017	2017-2018
HEAP Only	4,674	4,382
Furnace Repair/Replacement	105	138

Undercare Unit



Medicaid Division

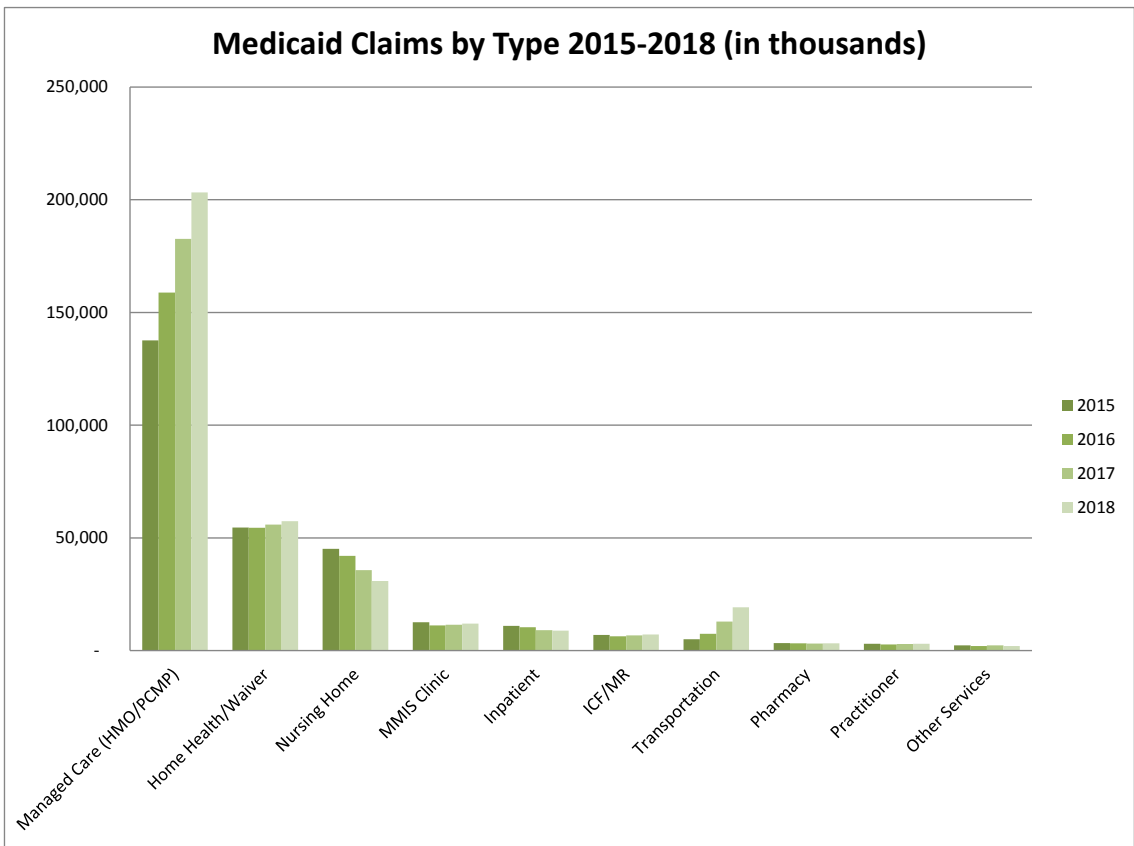
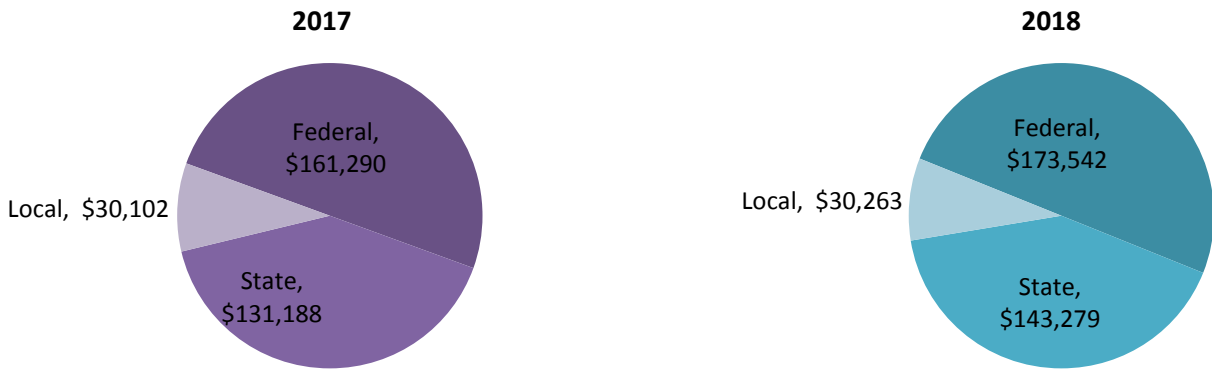
Overview

Generally, the medical plan for low-income American, Medicaid, is financed jointly at the federal (50%) and state (50%) levels. In New York State, however, responsibility for the State's 50% share is borne by both the State (25%) and county (25%) governments. New York is one of the few states in the nation that requires a local contribution. Because of the dramatically rising cost of Medicaid to local governments, New York State enacted a Medicaid cap effective January 1, 2006. This cap limits the growth of each county's Medicaid costs to no more than 3% per year. Chautauqua County is currently responsible for approximately 10% of the cost sharing.



Carmen Hlosta
Director of Certification

Federal, State and Local Shares of Medicaid Claims



The mission of the Chautauqua County Medical Assistance Division is to provide access to cost-effective medical services to all eligible persons in a professional manner through the use of enrolled healthcare providers. The Department of Health and Human Services staff provides application assistance, case management and other duties related to the administration of the Medicaid Program.

The NYS Department of Health began the takeover of Administration of the Medicaid program in 2011. Also occurring simultaneously is the implementation of the Affordable Care Act which includes an increase in the income level for Medicaid eligibility to 138% of the federal poverty level.

In addition to the increase in income levels, the New York State of Health Marketplace was opened in October of 2013. It has been a slow transition and our renewals were taken over by the state in March of 2018.

Medicaid Staff



Community Medicaid

Cases	2017	2018
<i>Measured by case, not individual</i>		
Medicaid	8,376	4,598
Medicaid Social Security Income (SSI)	4,525	4,441
Applications combined	2017	2018
Received	1,559	2,004
Approved	536	718

Cost Avoidance Unit (CAU)

Managed Care Enrollment *(individuals)*

DHHS is a Mandatory Medicaid Managed Care County. In 2010 Governor Cuomo signed Executive Order #5 which created the Medicaid Redesign Team (MRT) in January 2011. The MRT is aimed at redesigning New York's outsized Medicaid program. One overarching theme of the redesign team proposals is to move all Medicaid recipients from Fee for Service reimbursement to Managed Care. If recipients do not select a managed care plan, the State assigns one for the recipient. Each mandatory Social Service District is to maintain a minimum 20% auto-assign rate. Due to successful education and outreach efforts by the Medical Services staff, we remained well below the 20% auto assignment rate.



Cost Avoidance Unit

Plan	2017	2018
Fidelis <i>(NYS Catholic Health Plan)</i>	22,466	21,389
HealthNow <i>(BCBS)</i>	4,525	2,839
United Healthcare	583	599
Your Care	1,553	1,452
TOTAL Enrollment	27,224	26,279

Third Party Resources (TPHI)

In an effort to save Medicaid dollars, clients are encouraged to utilize TPHI. For those applicants eligible for Medicaid that have TPHI, the Cost Avoidance Unit will verify the policy and load into the eMedNY system to block Medicaid from being billed first. Applicants can also apply to have their TPHI premiums reimbursed; for those that have insurance available to them, this is an incentive to pick up that insurance rather than be enrolled in Managed Care, when found cost effective. CAU staff verifies and loads the TPHI, then processes the reimbursements of health insurance and Medicare premiums.

	2017	2018
Care at Home waiver enrollments	13	15

Long Term Care Unit

The Long Term Care unit consists of Skilled Nursing Facility (nursing home) and Assisted Living cases. The Assisted Living cases are considered community cases as they come and go from the Assisted Living Facilities. The Skilled Nursing Facility cases can be budgeted with spousal Medicaid to help keep the community spouse in their home and not losing income. There is a five year look back for Skilled Nursing Facility cases and they can join a Managed Long Term Care Plan (MLTC). Currently Assisted Living cannot join MLTC but will be able to in the future at some point.

Applications	2017	2018
Skilled Nursing Facilities	526	504
Assisted Living Programs	327	323
TOTAL Applications	853	827
Cases	2017	2017
Skilled Nursing Facilities	1,293	1,240
Assisted Living Programs	364	336
TOTAL Cases	1,657	1,576

Managed Long Term Care

Chautauqua County DHHS is a Mandatory Medicaid Managed Care County. In 2010 Governor Cuomo signed Executive Order #5 which created the Medicaid Redesign Team (MRT) in January 2011. The next phase was NY State’s Medicaid Redesign Initiative (MRT#90) to which is to transition Dual Eligible individuals, age 21 and over, requiring more than 120 days of community based long term care services (CBLTCS) to Managed Long Term Care Plans (MLTCP). CBLTCS are defined as: Home Health Care, Personal Care Services, Adult Day Health Care, Consumer Directed Personal Assistance Program, and Private Duty Nursing. This went into effect in Chautauqua County July 1, 2015.

Enrollment	2017	2018
Fidelis Care at Home	171	137
Kalos	165	218
VNA Homecare Options	235	279
Total Senior Care (PACE)	-	1
TOTAL Enrollment	571	635

Other Medical Services

Health and Recovery Plans (HARP)

Introduced in July 2016, HARP is a managed care product that manages physical health, mental health, and substance use services in an integrated way for adults with significant behavioral health needs (mental health or substance use).

	2017	2018
HARP Enrollment	974	1,108

Disability Review

Medicaid Aid to Disabled is a special program to maximize federal reimbursement through the use of the Aid to Disabled category in Medicaid that assists the NYS Department of Health in demonstrating cost neutrality for the 1115 Managed Care Waiver.

	2017	2018
Cases reviewed	41	35
Cases eligible	39	32

Medicaid Fair Hearings

A Fair Hearing is the process applicants and recipients have to review Agency decisions made on their application for Assistance Programs. The Fair Hearing Specialist is responsible to represent the Agency in this administrative process.

	2017	2018
Heard	16	19
Affirmed	11	14
Reversed	2	2
Decision correct when made <i>(new information provided)</i>	3	3
Withdrawn	42	40
Default	24	19
TOTAL Medicaid Hearings	98	97

PARIS Match

PARIS Match is a Public Assistance Reporting Information System (PARIS) to locate individuals who are in receipt of public assistance benefits in other states and may be ineligible to receive cash and/or SNAP (Supplemental Nutrition Assistance Program) benefits in NYS. A federal agency known as the Defense and Manpower Data Collection Department compare lists. When duplicate matches are found local offices are notified. Our local Program Integrity Unit and Cost Avoidance Unit work together to dis-enroll and recover Managed Care capitation fees.

Money Recovered from PARIS Match

2017	2018
\$65,469	\$60,243

CASA Services

The CASA (Community Alternative Systems Agency) Unit monitors service provision in Personal Care Services, nursing home and other long term care programs. This includes informing patients of their rights, and insuring appropriateness of care and level of care requested.

CASA is the central access point for the consumers of long term care, from home care to nursing home. CASA helps families, regardless of age or payer source, to navigate their way through the myriad of long term care options available in Chautauqua County. We are partners with Office for The Aging for NY Connects.

The Long Term Home Health Care Program was closed in May of 2016 by the State as the clients were enrolled into MLTC plans which covered the services they received under the program that closed. Waivered services will be added into state plan services under the Community First Choice Options effective January 1, 2020. This will require the County to contract with the waived services and it will be billed through the MMIS system as FFS MA services are billed currently. MLTC plans will be implementing this at the same time. Care at Home has been moved into the children’s waivers effective 4/1/19 so we will not be involved in these cases longer unless they need state plan services.



CASA

End-of-Year Caseload Report	2017	2018
Traditional Personal Care I & II	79	58
Managed Care- Personal Care I & II	7	14
Shared Aid I & II	8	7
Consumer Directed	35	44
UAS Waiver TBI/Nursing Home Transition Diversion Waiver	7	5
Care at Home (CAH)	14	12
Private Duty Nursing (LPN)	9	4
Drug Restriction (DUR)	17	25
TOTALS	176	174

Personal Care Aides	2017	2018
Level 1 <i>(housekeeping)</i>		
Hours Authorized	12,532	9,714
Money Paid Out	\$213,796	\$193,714
Level 2 <i>(housekeeping, bathing, dressing, etc.)</i>		
Hours Authorized	13,312	17,439
Money Paid Out	\$209,650	\$358,662

Clients hours go un-serviced when personal care aides are not available. There is currently a shortage of personal care aides in our area for this type of service.

Adult, Children and Family Services

The Adult, Children and Family Services Division assists the most vulnerable and at-risk children and adults in our community and includes Adult Protective Services (APS), Child Protective Services (CPS), Preventive Services, Foster Care, Adoption, and Juvenile Services units. The role of Adult Protective Services is to provide protective and preventive services to individuals over 18 where there is an inability to act on their own behalf with the aim of ensuring self-determination, and the ability to live as safely and independently as possible in the community. Child Protective Services role is to investigate, intervene and support family and caregivers ability to safely care for their children where there are allegations of abuse and maltreatment of children. Preventive Services works in the homes of at-risk children providing supportive and rehabilitative services that are trauma-informed, solution-focused, child centered, and strength based to prevent out-of-home placement and to assist families to return their children from foster care at an earlier time, while foster care offers children a safe living environment while assistance is offered to families and caregivers. Finally, the Juvenile Services Team is a community-collaboration aimed at preventing out of home placement and institutional care for juveniles and adolescents to reduce the likelihood of contact with the criminal justice system.



Leanna Luka-Conley
Deputy Commissioner of Adult Children and Family Service

Adult Protective Services

Adult Protective Services (APS) provides protective services for clients over 18 years of age who are unable to act on their own behalf due to mental or physical impairment, while respecting a client's right to self-determination. Preventive services are also available.



Adult Protective Services

	2017	2018
Referrals received	511	536
Referrals assessment	429	410
Guardianship petitions filed	0	4
DHHS Commissioner served as Guardian	9	28
APS Intake	2017	2018
Abuse	132	167
Self-Neglect	81	98
Mental Health	257	272
Financial Exploitation	64	70
TOTAL Intake	534	607



Robin Rafan
A Supervisor
Adult and Juvenile Services

Juvenile Services and Independent Living Teams

Juvenile Services and Independent Living Teams provide preventive services and foster care for children and their families where a child is having behavioral or emotional problems and a child service need may also exist.

Juvenile Services Team (JST) is a collaboration between DHHS staff and the Office of Probation. While there are some placements out of the home, the focus of the team is preventive. PINS diversion services, DHHS preventive services, and CPS assessment and response all work toward preventing out of home placement for children/ adolescents while developing the parental protection factors and strengths to reduce the family stressors and also address child service needs.

	2017	2018
Person in Need of Supervision (PINS)	103	84
Juvenile Delinquents	99	111
TOTALS	202	195

Juveniles in Office of Children and Family Services (OCFS) Care and Custody	2017	2018
Number of Juveniles Served	18	15
Care Days	5,250	4,421
Average Length of Stay	292	295

Child Protective Services (CPS)

CPS receives and investigates reports from the State Central Registry (SCR) concerning the abuse or maltreatment of children. CPS also strives to help families provide for the future safety of children by direct service and referrals.

CPS Standards of Practice:

The role of CPS is to investigate allegations of maltreatment reported to The State Central Registry and to offer rehabilitative services to families as needed, to build on parents' strengths and protective factors to reduce risk of maltreatment in the future. CPS uses a trauma-informed approach to working with families and solution-focused skills to engage families as they focus on the safety of children.



Chris Kowalewski
A Supervisor
Child Protective Services

SCR Reports	2017	%	2018	%
New Reports	2,068		2,114	
Subsequent Reports	418	20.2%	399	18.87%
Consolidated Reports	663	32.0%	639	30.23%
Investigations				
Reports Resulting in Investigations	2,486		2,513	
Determined	2,185		2,218	
Indicated	624	28.5%	623	28.10%
Unfounded	1,561	71.4%	1,594	71.90%

Definitions:

New Reports – also known as initial reports are reports received from the State Central Register (SCR) on a family that we are not currently working with.

Subsequent Reports – reports received from the SCR on families we are currently working with.

Consolidated Reports – subsequent reports that are consolidated into the initial (new) report. Subsequent reports require a separate investigation of the same family whereas consolidated reports do not. Consolidated reports required the allegations in the report be addressed, however forms and reports associated with the initial report do not need redone. While we strive to consolidate as many subsequent reports as possible special circumstances do not allow us to consolidate all.

Indicated Reports – reports where upon investigation the Department has determined there is some credible evidence (Legal Standard of Proof) to support the allegations of abuse or maltreatment.

Unfounded Reports – reports where upon investigation the Department has determined there is no credible evidence to support the allegations of abuse or maltreatment.

CPS and Services, Jamestown



Preventive Services

Preventive Services provides in-home supportive and rehabilitative services that are trauma-informed, solution-focused, child-centered, family-focused and strength based. This guidance to at-risk families is intended to prevent out of home placement of children, enable a child in care to return to his/her family at an earlier time, and to reduce the likelihood that a child will return to foster care once discharged. Creative and individualized family goals will promote safety and self-sufficiency, build on parental protective factors and skills, enhance family dynamics, preserve the family, and envelope the family with a community support system.

Our preventive casework staff use critical thinking skills, case conferences that support group decision-making, and motivational interviewing. A thorough assessment of contributing factors and underlying conditions will be used to build a service plan with the family. The family is seen as the experts on their own lives and a partner in the planning process.

The following is a 2-year comparison of key activities regarding children who have been placed in foster care:

Children	2017	2018
Placed- all levels of care	89	63
Discharged- all levels of care	91	57
Freed for adoption	21	15
Freed with no home identified	1	0
Adoption Finalized	31	17
Children in care	2017	2018
In foster homes (12/31)	84	78
In institutions (12/31)	15	18
In group homes (12/31)	2	2
In therapeutic foster homes (12/31)	2	11
Total children in care	103	109



Services, Dunkirk

Foster Care Services

Foster Care services in Chautauqua County provide out-of-home care for children in the custody of the Commissioner of Social Services. Foster care plays an important role in providing temporary, safe and nurturing homes to children when their parents are unable to care for them. Children are placed in foster homes in situations where they have been removed from their own families due to abuse, neglect or other family problems that endanger their safety. The children may range from infancy through 18 years of age and may have special medical, physical or emotional needs; the children may belong to any ethnicity or race and be part of a group of brothers and sisters who need to be placed together.

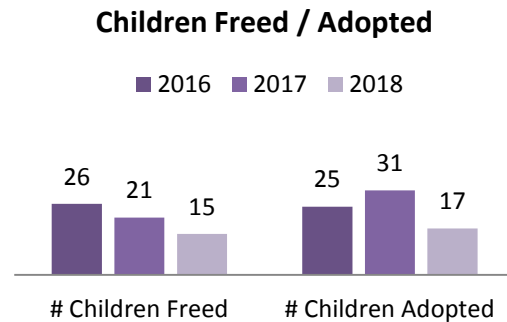
CPS, Dunkirk



Adoptive and Foster Home Finding

Our Home Finding & Adoption Teams work diligently at recruiting new foster parents, equipping our foster parents with the tools they need to succeed and finding forever homes for children in Chautauqua County.

Certified Foster Homes	2017	2018
South County (<i>Jamestown & surrounding area</i>)	34	37
North County (<i>Dunkirk/Fredonia & surrounding area</i>)	22	24
Central County (<i>Rural areas including Westfield, Mayville, Cassadaga, Sherman, Clymer, Ripley, Panama</i>)	17	15
Out of County	10	8
TOTALS	83	84



Youth Bureau

The role of the Youth Bureau is to actively work in collaboration with other government entities, public and private funding agencies, service providers and other segments of the community to develop a comprehensive range of opportunities for positive youth development to promote a positive future for all youth of Chautauqua County.

The County Youth Bureau functions as a fund giver, by acting as a conduit for state aid from the New York State Office of Children and Family Services. The annual funding process provides state aid to public and private not-for-profit agencies to implement quality youth service programs that address identified needs. In addition, the Youth Bureau advocates for the funding and implementation of programs that fill gaps in the youth service system.

2018 Programs Funded	# Youth Served	2018 Allocation
Youth Development – Year Round Programming Partner with CASAC, Salvation Army, YMCA, YWCA, Boys and Girls Clubs and more to host mentoring, tutoring, counseling, recreation, safety and more	6,151	\$108,383
Youth Development – Summer Programming Local City and Town Summer Recreation Programs	1,141	\$17,000
Runaway Homeless Youth Act	77	\$63,455
TOTALS	7,369	\$188,837.95

Chautauqua County Youth Board



Collaborative Programs

Chautauqua County Department of Health and Human Services partners with many organizations throughout the county to enrich the lives of our residence and provide much needed services. Below are a list of a few programs that we sponsor.

Supervision and Treatment Services for Juveniles Program (STSJP)

The Community School Coordinator position funded through the STSJP and Jamestown Public School District assists with community and school engagement for students and their families, as well as coordination of services and communication with juvenile justice system/child welfare. Outcomes measured are an increase in school attendance, increase in grade point average, avoidance of out of home placement and decrease in legal/behavior activity. In 2018, students showed measureable growth in self-confidence and positive identity resulting in better decision making. In some instances, these decisions and increase in self-confidence led to getting involved in extra-curricular activities, allowing the student to part of something that is positive and promotes developing character exhibiting integrity, commitment, and having the self-efficacy to overcome adversity.



Safe Harbour- Commercially Sexually Exploited Youth/Sex trafficking

Commercial sexual exploitation of children occurs when individuals buy, trade, or sell sexual acts with child. Sex trafficking is “the recruitment, harboring, transportation, provision, or obtaining of a person for the purposes of a commercial sex act.” Children who are involved in the commercial sex industry are viewed as victims of severe forms of trafficking in persons, which is sex trafficking “in which a commercial sex act is induced by force, fraud, or coercion, or in which the person induced to perform such an act has not attained 18 years of age.” A commercial sex act is “any sex act on account of which anything of value is given to or received by any person.”

Victims of Trafficking and Violence Protection Act of 2000 [United States of America], Public Law 106-386 [H.R. 3244], 28 October 2000. Section 103(9).



Salvation Army Anew Center

The Children and Family Outreach Program (CFOP) provides services to children and families who are past or current victims of family abuse. This may include child abuse/domestic violence, and/or sexual abuse. The program goal is to build on family strengths and the staff work to improve protective factors, reduce risk factors and to reduce the likelihood of future abuse. The staff work to enhance and support family functioning and resiliency. Topics for in home or group sessions may include, safety planning, effective family communication, conflict resolution, bullying, feelings recognition, foster the child’s self-worth, and appropriate discipline techniques.



Services are free, confidential and client driven, with a trauma-informed standard of care. Evidence based curriculums, lesson plans and family goals are developed with the assistance of the family members. Some of the services provided include; in home or office interventions, small group counseling, domestic violence education classes and Family workshops. Transportation is provided when needed to groups.

Referrals can come from agencies or client’s reaching out to the program themselves and can be made through our hot line services at 661-3897.

GA Accountability Program

The Accountability and Responsibility Program works with at-risk teenagers in Chautauqua County to provide support and opportunities in the community they might not get to experience otherwise. For more information on The Accountability & Responsibility Program please call 716-708-6161.

Tearcell Mobile App

A tool to assist organizations and front-line professionals to identify and respond to children and youth who have been trafficked or who are at a high risk of being trafficked.



Positive Direction and Associates, Inc.

This program offers training for physicians and other medical professionals. The training explains the benefits to connect young adults to substance use disorder services to avoid negative consequences such as incarceration, homelessness and complex trauma, among others. The participants will also learn the options available for young adults in active addiction or attempting recovery.

Transition to Independence Process Model (TIP)

The TIP program involves youth and young adults (ages 14-29) in a process that facilitates their movement towards greater self-sufficiency and successful achievement of their goals by empowering youth voice.

YWCA Supervised Visitation Program

The YWCA supervised visitation program provides a safe, neutral environment for a child(ren) to have a relationship with parents and is often used for high conflict situations.

Collaborative Programs *continued*

Cause and Consequence: A Community-Based Learning and Planning Experience

In 2018 Chautauqua County Department of Health and Human Services, UPMC Chautauqua, Chautauqua Alcohol and Substance Abuse Council, Western Regional Addiction Resource Collaborative, The Resource Center, The Chautauqua Center, STEL, Mental Health Association of Chautauqua County, Chautauqua Tapestry and American Association of University Women collaborated to bring Dr. Ira Chasnoff, an award winning author, researcher and lecturer to Chautauqua County.



Dr. Chasnoff spoke to community members and agencies working with children and/or pregnant women about pregnant and parenting women at risk for alcohol, tobacco and illicit drug use. He spoke of children who are born affected by prenatal exposure, and how prenatal substance abuse prevention and enhanced learning and behavior management early in life can help a community avoid the human and financial costs of prenatal substance exposure and serious emotional and behavioral problems of early childhood.

Drug and alcohol abuse during pregnancy is a serious concern in the Chautauqua County area. According to the last community health assessment, the rate of newborns that test positive for drugs in Chautauqua County is nearly 2x times greater than New York State as a whole.

Adult Protective Services Initiatives

In collaboration with the Center for Elder Law and Justice (CELJ) and the New York State Unified Court System (NYS-UCS), the Department of Health and Human Services has supported the development and implementation of the Elder Advocacy Program (EAP). The result of a federal grant from the Administration for Community Living, the EAP, a pilot project, aims to empower elder abuse survivors by addressing systemic barriers to our justice and social systems, and improve court and long-term outcomes for survivors. The Program acts as a single point of entry for elder abuse survivors, linking them to appropriate legal and non-legal services, while also providing education on elder abuse to various community stakeholders. By educating the community, the Elder Advocacy Program seeks to increase the number of cases of elder abuse identified and referred for assistance. The project therefore provides training to the courts, law enforcement, and community organizations on the prevalence and types of elder abuse, including financial exploitation, as well as criminal and civil laws relating to elder abuse cases, accessibility for older adults, and capacity issues. Since its inception in July 2018, the EAP has assisted 22 elder abuse survivors.

The Elder Abuse Enhanced-Multidisciplinary Team (E-MDT), a component of the Elder Advocacy Program, reviews complex cases of elder abuse with the purpose of increasing prosecution and restitution. The E-MDT is composed of representatives from DHHS, Adult Protective Services, OFA/NY Connects, the DA's Office, law enforcement, Center for Elder Law and Justice, financial institutions, a forensic accountant, and other community stakeholders. The team reviewed 11 cases of elder abuse in 2018.

Additionally, as part of the EAP and with support from the Department of Health and Human Services, the Chautauqua County Council on Elder Abuse (CEA) was formed in 2018. The CEA, a coalition of stakeholders serving the older adult population, meets regularly to discuss relevant legislation, advocate for our county's older adults, and provide continuing education to elder care professionals.



Legal Unit

The function of the Legal Unit is to represent the Department effectively in court and administrative hearings, and to advise and furnish legal services in support of the Department's programs. The Legal Unit is responsible for prosecuting in Family Court all cases involving child abuse, child neglect, termination of parental rights, paternity, child support child and all associated appeals. The Legal Unit also represents the Department during Fair Hearings involving reports from the State Central Registry. The Legal Unit also handles Adult Protective Services that may seek court orders for entry into a home, short term intervention orders and establishment of financial and/or personal guardianship for incapacitated adults. The Unit seeks to recover local, state and federal tax dollars through claims on real property, claims against personal injury settlements and verdicts, claims in estates, and claims against any other source of funds obtained by someone who is or has received public assistance benefits.

Caseload	2017	2018
Child Abuse/Neglect – New Children Receiving Protection	203	165
Foster Children Having Legal Proceedings Commenced to Free for Adoption	24	13
Protective Services for Adults-Guardianships	4	8
Recoveries		
Medicaid Nursing Home Care	\$224,602	\$201,295
Casualty Recoveries	\$12,716	\$15,847
TA Recovery Liens	\$24,961	\$21,679
TOTAL Recoveries	\$262,280	\$238,821

Program Integrity Unit (PIU, Fraud and Recovery Unit)

The Program Integrity Unit investigates complaints received on applicants and recipients of benefits including Public Assistance, SNAP, HEAP, Medicaid and Child Care as well as complaints regarding vendors. Furthermore, due to fraud, error on the recipient's part or agency error, the Department is entitled to seek recovery for overpayment of benefits. The PIU also establishes and monitors the payment of over-issued benefits.



Program Integrity Unit

Caseload	2017	2017 Costs Avoided	2018	2018 Costs Avoided
FEDS (Front End Detection System) Number of applications detecting fraud at application	408	\$4,094,168	383	\$3,615,792
PARIS (Public Assistance Reporting Information System) Detecting out of state residency and duplicate benefits	40	\$162,588	34	\$117,144
VED (Verified Employment Data) Detecting unreported income on TANF adult cases	28	\$160,860	52	\$242,586
Prison Computer Match	8	\$13,440	8	\$12,792
IPV (Intentional Program Violations) Disqualification sanctions for those found guilty	33	\$55,440	17	\$30,888
TOTALS	517	\$4,486,496	494	4,019,172

Child Support Enforcement Unit (CSEU)

The Child Support Enforcement Unit (CSEU) is responsible for establishing the paternity of children born out of wedlock through signed Paternity Acknowledgements or through filing of Paternity Petitions in Family Court. The CSEU is responsible for commencing the court process to establish Orders of child support and enforce the child support Orders against legally responsible relatives, on behalf of public assistance applicants/ recipients, as well as non-applicant/recipient individuals who make an application for child support services. The CSEU also has a responsibility to secure a court Order for Third Party Insurance on behalf of all children in receipt of Public Assistance and Medicaid only benefits. Additionally, the CSEU has primary responsibility to collect, monitor, distribute and enforce all support as ordered and made payable through it by any court of competent jurisdiction to petitioners within Chautauqua County and throughout the United States.

Case Management Performance	2017	2018
Paternity Establishment <i>(cases with paternity established / cases)</i>	97.49%	97.55%
Support Establishment <i>(cases with Support Orders established / cases)</i>	92.63%	92.28%
Cases with Current Collections <i>(Amount Collected /Amount of Current Support Due)</i>	69.21%	70.78%
Cases with Arrears Collections <i>(cases with Collection on Arrears / cases)</i>	51.73%	41.25%
Medical Support <i>(cases with Medical Support established)</i>	56.85%	53.16%
Case Load	12,442	11,964

Child Support Collections	2017	2018
Temporary Assistance	\$1,408,567	\$1,504,187
Medical	\$525,073	\$541,249
Total Retained Social Services Collections	\$1,933,640	\$2,045,436
Total General Public Collections	\$11,235,358	\$11,132,249
Total Collections	\$13,168,998	\$13,177,686

Petitions Filed	2017	2018
Paternity	120	116
Support	455	495
Enforcement	1,319	1,175
Reciprocal	105	125
Total Petitions Filed	1,999	1,911

Child Support Enforcement Unit



PUBLIC HEALTH DIVISION

Prevention and wellness are essential components to good health and a high quality of life. The Chautauqua County Department of Health and Human Services is dedicated to improving the health and quality of life for individuals, families, and communities. Good health comes not just from receiving quality medical care, but also from making good choices, clean air and water, safe outdoor spaces for physical activity, safe worksites, healthy foods, violence free environments, and healthy homes.

Purposes and Practices of Public Health

To prevent epidemics and the spread of disease, protect against environmental hazards, prevent injuries, promote and encourage healthy behaviors and mental health, respond to disasters and assist communities in recovery, and assure the quality and accessibility of health services.

10 Essential Public Health Services:

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

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

Information obtained in part by the U.S. Department of Health and Human Services Centers for Disease Control and Prevention



Dr. Berke
County Physician

Making News **McDonald's Gastroenteritis Outbreak**



In August of 2018, the CCDHHS Public Health Division responded to the most obscure outbreak of local foodborne illness in recent memory. The illness, characterized by violent vomiting, diarrhea, and abdominal cramping, was brought on by the consumption of breakfast sandwiches at the McDonald's located on North Main Street in Jamestown.

Environmental Health asked McDonald's to voluntarily suspend sales of two breakfast sandwiches after 6 people who had eaten them presented with symptoms at the UPMC Chautauqua Emergency Room. During the suspension, there were no reports of ill individuals and McDonald's began serving breakfast sandwiches using unopened cases of ingredients. The outbreak appeared to be over until newly ill individuals began self-reporting similar symptoms after eating there the following week. The restaurant

voluntarily shut down to address the problem.

CCDHHS, NYSDOH, and McDonald's jointly issued a press release informing the public of the situation, which gained a lot of attention and resulted in an influx of calls and emails from the public. CCDHHS staff partnered with NYSDOH to interview 132 people who had eaten at the restaurant, 117 of whom met final case definition. Meanwhile, Environmental Health staff inspected the restaurant, conducted staff interviews, collected food items for sampling, and provided guidance to McDonald's. Nursing staff gathered stool specimens and interviewed patients. Human specimens and food items were sent to Wadsworth Laboratory in Albany for analysis. Epidemiology staff analyzed the data to observe trends.

The restaurant was granted permission to reopen after they conducted a deep cleaning of the site, replaced equipment, disposed of all products and obtained a fresh supply of ingredients with which to restart production. The outbreak was contained, however, all stool specimens and food items tested negative for all typical bacterial and/or viral pathogens. Unfortunately, we were not able to identify the pathogen responsible for this illness.

Board of Health

As the overseer of Sanitary Code of Chautauqua County, the nine member Board of Health is a vital force in preventing disease, promoting health and promulgating public health policy. The group represents a broad range of public health related disciplines. Over the years, the Board has enacted countless measures to improve the wellbeing of Chautauqua County residents and visitors.



2018 Chautauqua County Board of Health Members:

Top Left: Thomas Erlandson, PhD (President); Lillian Ney, MD (Vice President); Roland Hewes, DVM; Tariq Khan, MD;
Bottom Left: Elisabeth Rankin; Natasha Souter; John Tallett, MD; Mark Tarbrake; William Geary, MD, PhD (not pictured)

Public Health Grants

In order to fulfill its mission and augment services to the residents of Chautauqua County, the department applies for and receives a variety of grants. These grants are provided by New York State, the Federal Government and non-governmental agencies.



Grant	2017	2018
Integrated Cancer Services	\$167,484	\$85,315
Maternal and Infant Health Initiative	\$282,662	\$225,142
Immunization Action Plain (IAP)	\$55,879	\$59,873
Public Health Emergency Preparedness	\$49,473	\$43,631
Family Planning	\$324,981	\$355,102
Rabies	\$22,915	\$29,303
Adolescent Tobacco Use Prevention Act (ATUPA)	\$42,386	\$23,872
Enhanced Drinking Water	\$156,557	\$177,175
Bathing Beach Water Quality	\$9,305	\$9,305
CDBG Well & Waste Water	\$112,276	-
Childhood Lead Poisoning Primary Prevention	\$271,167	\$253,826
Lead Poisoning Prevention (Screening)	\$65,686	\$68,096
HUD Lead Hazard Reduction Demo Grant	\$553,541	\$1,083,704
Univera Lead Grant	-	\$25,692
TOTALS	\$2,114,312	\$2,440,036

Coroner Program

In July, 2018, oversight of the Chautauqua County Coroner Program was transferred from the County Legislature to the Department of Health and Human Services.

A County Coroner is responsible to respond to the scene of an incident in order to perform preliminary investigation on cause and manner of death. The Chautauqua County Sheriff's Department dispatches the Coroners. In certain instances, a case may be referred to the Erie County Medical Examiner for comprehensive medicolegal death investigation services including autopsy and post-mortem toxicology, if applicable. The Coroners also play a role in developing the county's Mass casualty/Fatality Plan in preparation for any catastrophic incidents, which could be caused by natural, accidental, criminal or infectious means.

Although deaths need to be reported to the Coroner, not all people who have died require further examination. If a death appears to be natural or related to natural diseases, then the body will be released to a funeral home of the family's choosing.

Common situations where the Coroner takes custody of a person who has died include:

- A young person without documented medical history.
- A person with no legal next-of-kin or one that cannot be determined or identified during the initial investigation.
- Any person who has died due to unnatural circumstances including:
 - Suicide
 - Homicide
 - Accident

There are four coroners who conduct death investigations throughout the County. One change to the program implemented in 2018 was the exclusion of deaths in nursing homes or to Hospice patients as coroner cases. This change has resulted in a drastic reduction of the number of coroner cases.

Coroner Cases	2017	2018
Cause of Death		
Natural	777	342
Accident-Non Drug Related	17	24
Accident- Drug Related	33	24
Suicide	20	15
Homicide	3	2
Undetermined	16	4
Pending	-	7
Total Cases	866	418
Coroner cases sent for Autopsy	41	59



Coroners (from right to left)
Francis Migliore, Lead Coroner; Daniel Tyler; Eugene Steele; Richard Mackowiak

Environmental Health Services Division

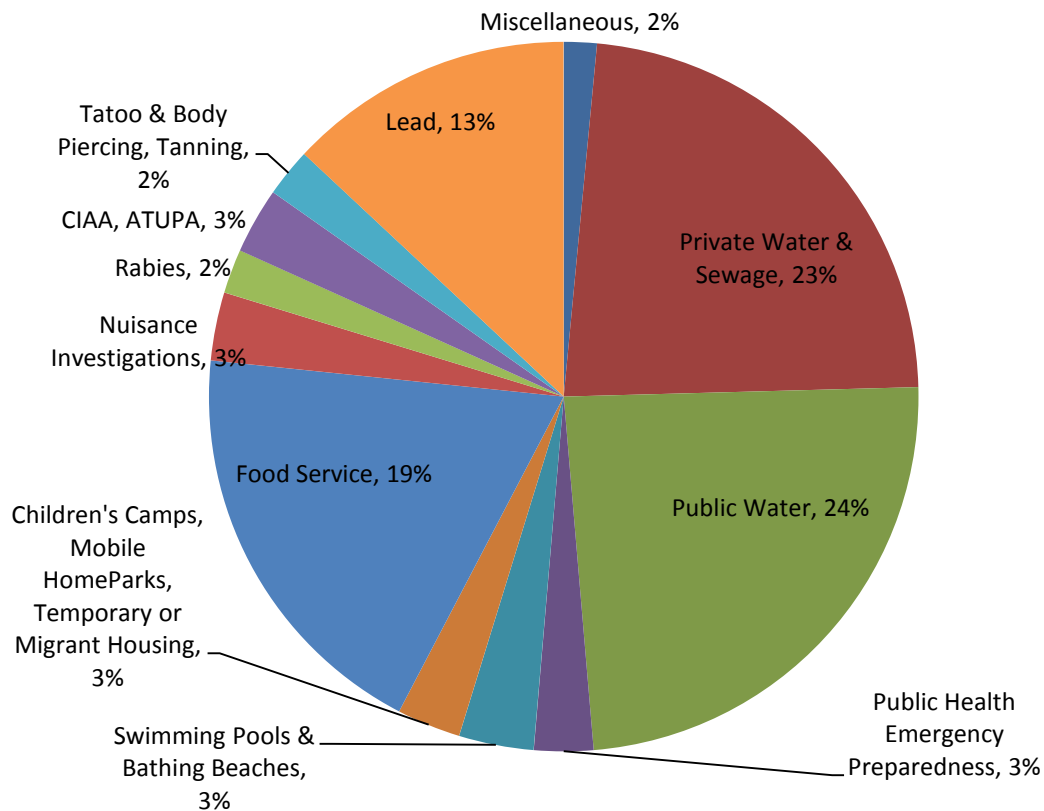
The Environmental Health Division ensures the residents of Chautauqua County a healthful environment through its various programs of inspections, surveillance, and enforcement. Its focus is to prevent disease by responding to emergencies and nuisance complaints, monitoring public water supplies, assisting homeowners with private water and sewage systems, inspecting food service establishments and recreational facilities, and inspecting homes for lead hazards, while preserving a safe and healthy environment for all County residents and visitors.

The following chart reflects the distribution of manpower attributed to the various programs implemented by the Division of Environmental Health Services.



Environmental Health

Environmental Health Unit Staff Time 2018



Water and Sewage

Water Supply Program

Certified Environmental Laboratory for Water Analyses:

Environmental Health Unit staff maintains a NYSDOH Environmental Laboratory Approval Program (ELAP) certified laboratory. The laboratory is certified to test potable and non-potable water samples for indicator bacteria including coliform and Escherichia coli (E. coli).

Samples Analyzed	2018
Potable Water	3,199
Non-Potable Water	667

Public Water Supply Program: The CCDHHS water resources staff monitors public water supplies to ensure operators are providing safe drinking water to their customers, properly maintaining their water systems, and complying with NYS Sanitary Codes.



Water Sample Testing



North County Water District Project

	2017	2018
Number of Water Systems Regulated	227	226
- Illnesses reported	0	0
Sanitary Surveys Completed	98	86
- Violation Issued	156	107
- Enforcement Taken	99	49

CCDHHS staff also collected 309 surveillance water samples from public water supplies that were tested and analyzed for bacteria in the CCDHHS’s water laboratory.

Department staff work closely with public water supply owners and operators to upgrade their systems, extend water service when appropriate and respond to water supply emergencies. In 2018, CCDHHS worked closely with the City of Dunkirk and the villages of Fredonia, Mayville and Sinclairville on major water system improvement projects; assisted the towns of Dunkirk, Portland, Ripley and Westfield on forming new districts or extending existing districts to unserved areas; and worked with small system owners to improve their water supplies to deliver safe and abundant drinking water to their customers.

In 2018 CCDHHS staff continued to work closely with municipalities from the North Chautauqua County Water District to build a robust water delivery system for the City of Dunkirk to feed portions of the towns of Dunkirk, Pomfret, Portland and Sheridan and the Village of Brocton. Phase I of this regional project was placed into service in September and included decommissioning the Village of Brocton water filtration plant, which will save their customers millions of dollars on plant upgrades.

Private Water Supply Program: CCDHHS staff provided technical advice to private water supply owners whose water required some type of treatment. Contamination of private water supplies by bacteria continues to be a problem with nearly half of all private well samples analyzed in the CCDHHS’s water lab failing to meet drinking water standards and requiring some sort of treatment and resampling.

To ensure the safety of private drinking water, staff sampled 26 homes with private wells located in vicinity of the Ellery Landfill and the closed South Stockton Landfill. These were tested for landfill indicators such as inorganic chemicals and metals; test results showed no impact on wells from the landfills.

	2017	2018
Technical Advise Provided	502	521
Percent of private well samples fail	42.0%	40.7%



Annual Drinking Water Contest
2018 Winner: Jamestown BPU

Water and Sewage *continued*

Private Sewage Permitting and Inspections

The CCDHHS regulates the private sewage system program. Environmental Health staff members conduct onsite inspection, design approval, and inspection of final installation to ensure that the systems comply with standards outlined in Article IV of the Sanitary Code of the Chautauqua County Health District and New York State Code Part 75.

	2017	2018
Septic Permits Issued	232	241
Septic Systems Installed	209	187



Water and Sewage Surveys

The Department conducts Water and Sewage Surveys, also known as Loan Surveys or Property/Realty Transfer Surveys, to private homeowners. The surveys are required by the local sanitary code and by most lending agencies. Sanitarians evaluate sewage system components to ensure that they are functioning in compliance with the local sanitary code. Water system components are also surveyed by sanitarians.

The Department provides guidance to property owners whose system(s) did not pass inspection including recommendations for well disinfection, installing continuous water disinfection systems, and/or repairing or replacing a septic system or water well.

	2017	2018
Water and Sewage Surveys Conducted	633	712

Mandatory Septic Inspection Program

In 2016 Environmental Health Unit staff began implementing the Mandatory Inspection Program. The program targets properties within 250 feet of Chautauqua County lakefront that have onsite wastewater treatment systems that were installed more than 30 years ago or without a permit from the Chautauqua County Environmental Health Unit.

The chart below represents the progress of the program thus far. Areas around Chautauqua Lake that are on track to receive public sewer extensions will be required to connect to the public sewer when it is installed, therefore these areas will be excluded from the inspection program. Some properties were initially identified to be part of the inspection program but have since been determined to be vacant parcels or connected to community sewer systems, such as realty subdivisions. These parcels have been removed from the list of properties to be inspected; they are not represented on the chart below.

	Bear Lake	CHQ Lake Ellery	CHQ Lake Chautauqua	CHQ Lake North Harmony	Findley Lake
Inspection Not Required: treatment system is > 250 feet or < 30 years old	8	5	16	7	20
Inspection Not Required: public sewer opportunity in near future	-	-	31	125	-
Inspection Pending: contact made but weather/occupancy causing delay	5	3	2	-	5
Inspection to be Scheduled	-	-	51	20	113
Inspection Complete: allowed "as-is"	3	1	6	-	4
Corrections Required / Pending	2	-	1	2	10
Corrections Required / Complete	12	-	16	8	12
TOTALS	30	9	123	162	164

Public Sewer Program

Department staff assists municipalities and other county departments in the formation and extension of sewer districts. In 2018, CCDHHS worked closely with the Chautauqua Lake Sewer Agency to extend the South & Center Chautauqua Lake Sewer District boundary along the southwest side of the lake to the Hamlet of Stow and worked with the Town of Ripley to extend public sewers to Shortman Road and West Route 5 to the PA line. CCDHHS has also worked for several years with the Town of Mina to create a sewer district around Findley Lake; in 2018 this project took on a regional approach which to investigate creating a County sewer district that could include several municipalities in addition to Findley Lake.

Food Service

Food Service Establishment Permitting and Inspections

The CCDHHS Environmental Health unit performs regular inspections of permanent, temporary, and mobile food service establishments. Food service establishments are classified as low, medium or high risk. Bar-only operations are classified as low risk and are inspected every two years. Medium-risk restaurants are inspected once per year. These restaurants are commonly referred to as “cook and serve” where foods are prepared for immediate consumption.

High-risk food service establishments prepare foods in advance and then cool the food item to be reheated when served to the customer. The objective is to limit the amount of time that foods are held in the “danger zone.” The danger zone is the temperature range from 41 degrees to 135 degrees Fahrenheit where pathogenic bacteria can begin to replicate into dangerous numbers capable of causing illness. High-risk restaurants must be inspected either two times per year or undergo one inspection and one Hazard Analysis and Critical Control Points (HACCP). During the HACCP process, one potentially hazardous food item is tracked from the point of delivery until it is served to the customer. This process identifies critical points in the process during which food preparers can stop the transmission of foodborne illness.

In the event of a complaint, restaurants are inspected within seven days of the logged complaint. During inspections, sanitarians check to see that service workers are handling food properly, that foods are kept at the proper temperature and are being stored properly. They also ensure that the restaurant environment meets the requirements of the Chautauqua County Sanitary Code which includes the regulations of the New York State Sanitary Code.



	2017	2018
Food Service Establishment Inspections	641	575
Hazard Analysis Critical Control Points	29	32
Red Critical Violations	166	151
Temporary Food Service Establishment Inspections	184	156
Red Critical Violations	22	21

Food Handler Safety Training

The Chautauqua County Sanitary Code requires all food establishments have at least one individual complete a food handler training course approved the Public Health Director. The goal of the program is to reduce the number of violations made by food handlers that lead to foodborne illness. One class was given with help from a translator where we certified 8 individuals from the Hispanic community.

Training Attendance	
2017	2018
106	76

4-H Conservation Field Days educational event
 Photo courtesy of The Post-Journal



Cornell Cooperative Extension of Chautauqua County held its 52nd annual 4-H Conservation Field Days educational event Wednesday and Thursday at the Lake Chautauqua Lutheran Center this week. Nearly 1,000 fifth-grade students from across Chautauqua County visited 33 different interactive stations covering a myriad of conservation topics.

The 4-H Youth Development Program is one of many programs offered by Cornell Cooperative Extension of Chautauqua County. Conservation Field Days exemplifies the New York State 4-H mission of connecting youth to hands-on learning opportunities that help them grow into competent, caring, contributing members of society.

Lead

Childhood Lead Poisoning Primary Prevention Program

CCDHHS is a grantee for the New York State Department of Health Childhood Lead Poisoning Primary Prevention Program. The State Department of Health identified the area of the 14701 zip code within the City Limits of Jamestown as an area with a significant concentration of children identified with elevated blood lead levels. This area was designated as an “area of high-risk” by the Chautauqua County Health Department for the purpose of implementing a program to prevent exposure to lead-based paint. To prevent lead poisoning in children, the CCDHHS inspects poor condition apartments and homes where children reside for lead based paint.

	2017	2018
Homes Inspected	44	80
Received Treatment to Mitigate Lead Exposure	16	31



Lead Poisoning Prevention Program

The Chautauqua County Lead Poisoning Prevention Program (CCLPPP) works throughout the county to reduce the incidence of childhood lead poisoning and associated health consequences. Lead poisoning prevention education, nurse case management, environmental investigation, lead hazard assessment, and abatement follow up activities are conducted in the lead program through a large collaborative county initiative. Monitoring of children with elevated blood lead levels is an important component. Once a child is identified as having an elevated blood lead level of > 10 ug/dL they are tracked to assure that appropriate follow-up services are provided.

	2017	2018
Child blood lead test performed	2,405	2,522
Children followed due to high blood levels	12	10

Lead Testing in School Drinking Water

CCDHHS water staff continued to work closely with public school districts in the County and BOCES to ensure their compliance with NYS’s Lead Testing in School Drinking Water law enacted in 2016. This law requires all public schools to collect samples from all water fixtures used for drinking or cooking, to immediately turn off fixtures that exceed the lead Action Level of 15 parts per billion, and to remediate those fixtures. Once results are received, schools are required to notify parents and staff of any exceedances. The law requires schools to resample drinking water fixtures every 5 years beginning in 2020.

Swimming Pools and Bathing Beaches

Permitted beaches are inspected annually by the Environmental Health Unit to determine if beach staff, safety equipment, and operation records are in compliance with permit requirements. Beach water samples are collected and analyzed for the indicator bacteria Escherichia coli (E. coli) at the CCDHHS Water Lab. When beach samples are determined to be unsatisfactory the beach operator is notified and the beach is closed for swimming until a subsequent sample shows the water to be satisfactory.

All permitted beaches are sampled at least once weekly during their individual swim seasons. Beaches are sampled more often if unsatisfactory E. coli results require subsequent samples or special projects require more information.

	2017	2018
# of Beaches Serviced	36	33
Staff Collected Samples	546	588



Harmful algal blooms (HABs) related to blue-green algae/cyanobacteria are typically observed on Chautauqua and Findley Lakes in late July – August. HABs have become increasingly common and persistent in recent years. The major public health risk associated with HABs is the possible release of toxins during bloom events. Currently there is little understanding as to why or when toxins are released during a bloom, consequently CCDHHS treats all HABs as though they may be releasing toxins.

When HABs become widespread in one or more lakes, press releases/alerts, including educational information about water safety and HABs, are sent to local media outlets in an effort to protect human and domestic pet health. Signs to alert the public of the potential danger are also posted at public access points of the affected areas. The Environmental Health Unit looks for signs of current or impending HABs during routine beach sampling in addition to responding to reported sightings at bathing beaches. If a HAB does develop at a bathing beach, the beach is immediately closed for swimming. Once the HAB dissipates and a water test shows that microcystin toxin levels are less than 4 ppb in the swim area, the beach is re-opened.

CIAA/ATUPA

Clean Indoor Air Act (CIAA)

The Clean Indoor Air Act (CIAA) law indicates that smoking at all worksites, including restaurants and bars is illegal. The Environmental Health unit inspects local establishments to ensure that the CIAA law is being upheld. Where establishments are found to be in violation of the law’s stipulations, the owner or operator is notified. Formal enforcement is issued against the facility owner or operator by confirmed delivery of Notice of Violation within seven days.

Adolescent Tobacco Use Prevention Act (ATUPA)

The Environmental Health division is responsible for performing compliance checks mandated by the Adolescent Tobacco Use Prevention Act (ATUPA). In order to assess compliance of tobacco vendors in the County, the Environmental Health unit takes underage youth (ages 15, 16, or 17) without legal IDs to tobacco vendors where they attempt to purchase cigarettes. If vendors agree to sell tobacco to the youths, the violations are reported to the state. The Department is also responsible for verifying that all tobacco dealers and vendors are registered with the NYS Department of Taxation and Finance (DTF) to sell tobacco, post required signage, and display tobacco and herbal cigarettes behind the counter or in a locked container.

	2017	2018
Adult Compliance Checks	133	102
Minor Compliance Checks	186	111
Retailers Found in Violation	3	0
Fines Paid	\$1,050	0

Public Health Emergency Preparedness

Public health threats are always present whether cause by natural, accidental, or intentional means. These threats can lead to public health incidents. The goal of public health emergency preparedness is to be prepared to prevent, respond to, and rapidly recover from public health threats including infectious disease, natural disasters, biological, chemical, nuclear and radiological events. Through funding from the CDC our PHEP program seeks to build the capacity of our work force to respond to existing and emerging health threats. Specific duties include enhancing our capacity to respond to bioterrorist attacks, establishing communications programs, educating and training public health and health care professionals and the general public in emergency response and preparing to distribute vaccines, drugs and other protective measure or treatments in a timely fashion. Some of the tools we use include surveillance of laboratory testing, epidemiological investigations, information sharing, community preparedness, medical material management and distribution, volunteer management, non-pharmaceutical interventions, and emergency public information and warnings.

Rabies Control

The Environmental Health Division is charged with the prevention of human cases of rabies in Chautauqua County. This includes promoting pet rabies vaccinations, investigating all potential rabies exposures (animal bites & scratches) that are reported to the Department, and submission of certain animal specimens to the NYS Department of Health Wadsworth Laboratory for rabies testing. In accordance with NYS Public Health Law, any person with knowledge of an animal bite is required to report these to the Health Department for investigation.

	2017	2018
Rabies Clinics Held	13	14
Dogs, Cats and Ferrets Vaccinated	2,323	2,192
Post-Exposure Prophylaxis Authorization	28	41
Pre-Exposure Rabies Vaccine	3	9
Incident Reports/Investigations	425	411
Specimens Submitted for Testing	44	52
Animals Testing Positive for Rabies	1	0

Tattoo & Body Piercing, Tanning

Tattoo & Body Piercing Establishment Licensing and Inspections

The Chautauqua County Sanitary Code requires annual licensing and inspection of tattoo and body piercing establishments. All new tattoo / body piercing artists, including temporary guest artists, must pass a County administered test to obtain an artist certificate of sanitation. Established artists must renew their certification annually.

	2017	2018
Number of Establishments	11	11
Number of Artists	39	34

Tanning Facilities

The Sanitary Code of Chautauqua County also calls for the permitting and regulating of tanning facilities in the County. The law establishes standards for safe operation and sanitary conditions of tanning facilities. The CCDHHS works with indoor tanning businesses to ensure compliance with state and local laws. 7 facilities held licenses in 2018.



Rabies Clinic

Children with Special Health Care Needs

Early Intervention Program

The Early Intervention (EI) program serves children from birth up to the age of three years who have been diagnosed with, or are at high risk for, a developmental delay. Services are provided to eligible children by CCDHHS staff, as well as NYSDOH approved EI providers, and include service coordination, assistive technology service, audiology, family training, counseling, parent support groups, occupational therapy, physical therapy, speech therapy, vision services, special education, nursing, medical services for diagnostic or evaluation purposes, nutrition, psychological services, health services and transportation and related costs. Services are provided in a variety of settings which include the home, baby sitter, day care and center-based programs.

	10/16 to 9/17	10/17 to 9/18
New Referrals	323	395
Referrals Qualifying for EI Services	174	191
Referrals for At Risk Children	118	108
EI Program Children Participants	684	739

Preschool Special Education Program

The Preschool Special Education program provides services for the three to five year-old population. Each school district in the County is responsible for authorization of services. Services are provided by certified professionals in three Chautauqua County center-based special education programs and in less restrictive settings including Head Start, regular nursery schools, and the home. New restrictions on the services that can be billed for Medicaid reimbursement present challenges to the Preschool program. The average cost per child is \$ 9,438.00

	2016-2017 School Year	2017-2018 School Year
Children Enrolled in Program	466	456
Children Received Center-Based Services	104	116
Children Received Related Services	362	340

Children with Special Health Care Needs

The Children with Special Health Care Needs program is for families of children ages birth to 21 who have, or may have, a serious health condition. The program gives information and referral services for families of children who need a health or related service beyond those normally needed by children. Conditions may be physical, behavioral, or emotional. From October 1, 2017 to September 30, 2018 there were 24 children and their families assisted through this program.

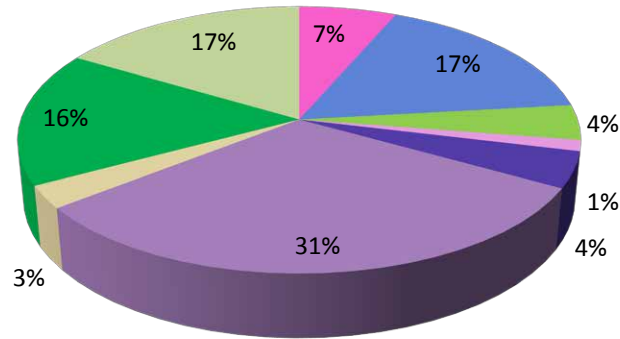


Nursing Division/Community Health

The Nursing Division is a unique component of the Chautauqua County Government in that it operates within a NYSDOH licensed Title X, Article 28 Diagnostic and Treatment Center facility. Clinic operations and community health nursing protect and promote the well-being of County residents through several programs which are featured below.

The following chart reflects the distribution of nursing time and effort attributed to the various disease control, family health programs and jail health implemented by the Division of Nursing Services.

Communicable Disease	7.0%
Family Planning	17.0%
General/Admin	4.0%
HIV/STD	1.0%
Immunization/IAP	4.0%
County Jail	31.0%
Lead Poisoning Prevention	3.0%
Maternal & Child Health	16.0%
Nurse Family Partnership	17.0%



Communicable Disease Control

Communicable Diseases are infections which can be transmitted from one individual to another, directly or indirectly. Control of these diseases is one of the main functions of a public health department. New York State requires over 70 diseases be reported to the local health department, requiring staff to investigate and provide education to prevent further spread of illness and to contact exposed individuals if treatment or monitoring for symptoms is needed.

Public health surveillance helps to detect outbreaks and enable prompt public health intervention. Many hours are dedicated to this program to maintain the community's health.

STI/HIV Program

Sexually transmitted infections (STIs) are among the most commonly reported communicable diseases in the county, state, and nation. The CCDHHS STI/HIV program aims to stop the spread and reduce the incidence of these infections. CCDHHS clinics offer screening and treatment for STIs, disease investigations and safer sexual health counseling. Nurses provide counseling for HIV-positive clients and referrals to specialty providers for treatment. At every visit, STI and HIV prevention education is provided, and condoms are offered. STI/HIV educational information is available to schools, human service providers, and community organizations and other outreach events.

Hepatitis C Testing

A New York State Law requires health care facilities to offer Hepatitis C screening to every individual born between 1945 and 1964. In 2018 our department followed 62 cases of Hepatitis C as part of the communicable disease program.

	2017	2018
STI Clients Seen	231	152
Communicable Disease Nurse Contact and Follow-Up		
Gonorrhea Cases	36	175
Chlamydia Cases	127	250
Syphilis Cases	1	6



Immunization Program

A core public health role is the prevention of vaccine-preventable diseases, especially in children and vulnerable populations. The Immunization Program provides free required vaccinations for children through the state’s Vaccine for Children (VFC) program and in accordance with CDC-recommended immunization schedules. Some adult immunizations such as influenza are also available as well as international travel vaccines. By providing this service, the CCDHHS aims to prevent illness and to reduce the importation of communicable diseases.

	2017	2018
People Vaccinated	987	794

408 under 19, and 386 adult or over 19

Tuberculosis Program

As the Public Health Law specifies the necessity of local health department control activities, Chautauqua County Department of Health and Human Services conducts nurse/physician operated tuberculosis control clinics.

Family Planning Services and Teen Pregnancy Prevention

The Chautauqua County Department of Health and Human Services continues to provide high quality reproductive health services to the community through clinical services and sexual health education.

Vital Statistics for Chautauqua County, compiled by the New York State Department of Health, indicate that teen pregnancy rates (females aged 15-19) have significantly decreased since 1999 but continue to be a major public health concern.

Public health nurses and staff also provide extensive community outreach, health education and public health detailing to a wide array of audiences including but not limited to schools, community agencies, health care providers and inmates.

The reduction in total visits is likely due to increased ability to see primary care physicians, 7.9 % uninsured rate, increase in the use of long-acting reversible contraception methods, and downsizing to one clinic site as we move out of direct service.

	2017	2018
Family Planning Visits	212	188

Correctional Health

On April 1, 2017, public health took over managing the jail health system. This program, although not surveyed as part of the Article 28 Diagnostic and Treatment license, is monitored by the State Department of Corrections. As a County Health Department we recognize those that we serve in the jail are from our community and most will be returning to our community. We are moving from only responding to illness towards health promotion. To meet this goal staff is being trained to recognize prevention and health promotion. We have begun to offer a public health approach to care to include reproductive health including IUDs, vaccinations maternal child and preconception education; increasing referrals and linkage to mental health; dental; primary care when released. The need for qualified nursing staff is critical to cover 7am-10pm seven days a week.

	Apr-Dec 2017	2018
Nursing Visits	3,774	4,962
Accute Nursing Visits		1,229
Scheduled Provider Visits	290	293



Correctional Health Staff

Opioid Overdose Prevention Program

The CCDHHS Public Health Division is registered with NYSDOH as an Opioid Overdose Prevention Program. We work with participating law enforcement and community members to train and supply them with intranasal Narcan kits. Narcan, also known as naloxone, is a lifesaving opioid antagonist which reverses opiate effects of sedation and respiratory depression thereby preventing a fatal overdose.

Opioid Training

62 trainings were provided at 22 locations throughout Chautauqua County to include Colleges, Libraries, Medical Centers, Churches and Jails

	2017	2018
Number of People Trained	815	637
Alstar Administrations of Narcan*	104	73

*Capturing accurate overdose reversal data is difficult as many community responders do not report. Law Enforcement reports directly to the State.

Maternal and Infant Health Programs

The **Community Health Worker (CHW)** Program has been in operation in Chautauqua County since 2013 and provides high-needs mothers in Chautauqua County with assistance obtaining health insurance, nutrition education, prenatal and infant education, smoking cessation services, and case management. Our staff meet moms in their homes, at the clinic, or other community sites to provide assistance during pregnancy and throughout the baby's first year.

The **Nurse Family Partnership (NFP)** Program began offering services in Chautauqua County in September 2015. This program provides nurse home visitation services to low-income (Medicaid eligible) first-time mothers. Nurses begin home visits early in the mother's pregnancy and continue visits until the child's second birthday. This evidence-based program's goals are to: improve prenatal health and outcomes, improve child health and development and improve families' economic self-sufficiency and/or maternal life course development.



Maternal and Infant Health Program Staff

The Maternal and Infant Health Program staff collaborates with the Health Education Division to increase and improve upon community supports for breastfeeding that exist in the County. The divisions jointly monitor a closed Facebook Group, "Chautauqua County Breastfeeding Moms (and moms to be!)" and respond to concerns expressed by mothers in the community. The NFP nurses are also certified lactation counselors and have assisted multiple new mothers on the breastfeeding hotline, and during home visits throughout 2018.

Home Visits	2017	2018
Maternal & Infant Health Program	1,009	1,413
Nurse Family Partnership	796	1,252
TOTALS	1,805	2,665

Referrals Made	2017	2018
Mental Health Services	61	147
Primary Care Providers	83	202
SNAP	50	70
Smoking Cessation Programs	50	94
Dental	62	136
Health Insurance	39	137
TOTALS	192	786

Annual Community Baby Shower



The Maternal and Infant Health Program hosts a Community Baby Shower bi-annually. This is a free event open to all pregnant and new mothers, their family and friends. During the event there are several short presentations on topics like breastfeeding, child development and play, car seat safety, infant CPR, birth control and substance abuse. Information is also provided on safe sleep and the risks of bottle propping.

Numerous community agencies attend and many prizes are given to new moms and dads.

Community Health Education and Planning

The purpose of the Health Education and Planning Unit is to identify health issues of local importance, develop and implement strategies to address these issues, and strengthen the community's long-term ability to manage and improve the health and well-being of residents.

CCDHHS provides health education and guidance, including the use of information and education to modify or strengthen practices that promote public health and prevent illness. These activities are designed to encourage people to assume personal responsibility for maintaining and improving their own health; increase their capacity to utilize appropriate health services; help them better control an illness they may have; and, provide information to stimulate community action on social and physical environmental factors that impact health.

Current public health research indicates that individuals are more likely to make healthy choices when those choices are also easy and affordable. CCDHHS leads or partners with initiatives that support improved infrastructure for physical activity, access to nutritious foods, and reduced exposure to tobacco in addition to other prevention initiatives.

Protecting and improving the public's health and promoting wellness cannot be managed by an organization, health care provider, government or community agency alone. Partnerships, coalitions and collaborations are essential to the public health effort.



Community Health Education Planning Team

Chautauqua County 2016-2018 Community Health Assessment

Local health departments (LHD) across New York State are responsible for completing a community health assessment (CHA) to ensure that the needs of the community are being met. In 2016, the New York State Department of Health asked LHDs to complete an update to the 2014-2017 Community Health Assessment and Community Health Improvement Plan (CHIP) that would span the years 2016-2018 and continue to work in conjunction with the New York State Prevention Agenda. The update required less detail and community coordination than a typical community health assessment.

The Prevention Agenda 2013-2018 is New York State's health improvement plan that was designed to demonstrate how communities across the state can work together to improve overall health and quality of life for all New Yorkers. The Prevention Agenda envisions New York becoming the Healthiest State in the Nation, and designates five priority areas:

- Prevent chronic diseases
- Promote healthy and safe environments
- Promote healthy women, infants, and children
- Promote mental health and prevent substance abuse
- Prevent HIV, sexually transmitted diseases, vaccine-preventable diseases and healthcare-associated infections

The Prevention Agenda outlines goals and objectives, as well as appropriate and evidence-based interventions for each priority area. Indicators for tracking progress of interventions are provided at the county-level, including racial, ethnic and socioeconomic breakdowns to track changes in health disparities.

LHDs across the state were expected to work collaboratively with county hospitals, which were responsible for completing their respective UPMC Chautauqua WCA, and Westfield Memorial Hospital. Key stakeholders for public health and health care were also invited to assist in the community health assessment process. Collectively, the local health department, hospitals, and community organizations make up the Chautauqua County Community Health Planning Team (CCCHPT). These additional partners included the Chautauqua County Health Network, the Chautauqua County Department of Mental Hygiene, The Chautauqua Center, and The Resource Center. Population Health Collaborative of Western New York provided technical support throughout the entire process, as the Western New York technical assistance lead. Delivery System Reform Incentive Payment (DSRIP) Performing Provider Systems (PPS) working in the Western New York region, Community Health Partners and Millennium Collaborative Care, were also partners in the health planning initiative.

The CCCHPT worked together to gauge the community’s perceived health priorities, assets, and needs through a web-based and paper survey, and four community conversations. The team examined secondary health data provided by the NYSDOH and selected collaborative and individual priorities, disparities, and interventions. Collaborative priorities, along with background data and potential interventions were presented at a community stakeholder meeting attended by local content area experts. Feedback and guidance were provided by community stakeholders. The following collaborative Prevention Agenda priority areas were selected:

- Prevent chronic diseases (CCDHHS and all hospitals)
 - Disparity: Low-income residents
- Promote healthy women, infants, and children (CCDHHS, BMH, WCA)
- Promote mental health and prevent substance abuse (CCDHHS and all hospitals)

In 2018, the Community Health Education and Planning Division and the CCCHPT began preparing for the next community health assessment, which will be submitted to the New York State Department of Health in December 2019.

Public Relations and Outreach

To connect with the public and share messages about programs, health promotion, and community collaborations, the CCDHHS Division of Public Health works with media networks that include local newspapers, Penny Savers, local television news stations, and local radio stations. CCDHHS also uses social media tools such as Facebook, Twitter and YouTube. We receive personal health related questions from the public via the private message feature on our various program-specific Facebook pages. The Chautauqua County Health Department Facebook page gained 399 new likes in 2018, increasing the base by 59% from 671 to 1,070 fans. In 2018, 438 posts were published on the page, resulting in 431,683 views and 20,704 engagements.

The Chautauqua Health Action Team (CHAT), a coalition of community partners working to improve health in Chautauqua County, devised the CHQ250 initiative. CHQ250 – Doing Our Part to Save Hearts, is the tagline for community efforts to prevent heart attacks, strokes, and related deaths in Chautauqua County. In 2018, CHAT members wrote 12 news articles related to heart health; they were published in two County newspapers. 146 people from 9 different agencies, worksites, and community groups were trained in hands-only CPR. 6 blood pressure cuffs were distributed to agencies, worksites, and community groups.

Departmental program experts participate in educational events across the County as appropriate, with a goal of reaching a diverse population of County residents. Venues included schools, shopping centers, ice arena, awareness walks, parks, fairs, soup kitchens, workplaces, municipal buildings, and more. Topics varied but mainly focused on CCDHHS programs and priorities, such as nutrition, physical activity, cancer prevention and screening, food safety, Hepatitis C prevention, lead, maternal and infant health services, breastfeeding, child development, immunizations, arthropod-borne disease prevention, and sexual health.

Cancer Services Program

The Cancer Services Program (CSP) is funded through NYSDOH to provide breast and cervical cancer screening for uninsured/underinsured women and colorectal cancer screening for uninsured/underinsured men and women. The program provides outreach and education about the importance of timely cancer screening, as well as case management during the screening process. If a breast, cervical, colorectal or prostate cancer diagnosis is received, trained DQEs provide clients with application assistance for the Medicaid Cancer Treatment Program. Clients receive services through local physician offices and hospitals.

CSP experienced many changes in 2018- the final year of the current grant package. After a six-month extension, the program was transitioned in October from CCDHHS to St. James Mercy Hospital, which had previously run the program for Steuben County. In the new grant package, NYSDOH combined the programs of four counties- Chautauqua, Cattaraugus, Allegany, and Steuben. Due to the great size of the region and the limited funding, it was not feasible for CCDHHS to apply. CCDHHS continues to partner with St. James Mercy Hospital to assist them in their efforts to reach Chautauqua County residents and providers.

	2017	2018*
Cancer Screenings and Diagnostic Procedures Completed	314	90

The 2018 screenings resulted in the following findings:

- 1 case of cervical intraepithelial neoplasia
- 2 cases of hyperplastic polyps

*Chautauqua County CSP began placing clients on a wait list for screenings beginning 7/1/18. At this time, we began to transition services to the new program.

Dental Van

The CCDHHS Public Health Division continues to partner with the University at Buffalo School of Dental Medicine's dental van- the "S-miles To Go Dental Van." The Department assists with referrals to the dental van, which operates with Article 28 status, and accepts Medicaid, Child Health Plus, or collects fees on a sliding scale.

The Rural Dentistry Project funding started in 2014; which expanded services to areas outside Chautauqua County, including Cuba-Rushford, Andover, Gowanda, Hannibal Central and Randolph. The majority of schools that the team serves are in Chautauqua County. The figures below capture all districts in and outside of the County.

Calendar Year = April 1-March 31	4/16-3/17	4/17-3/18
Dental Van Procedures*	15,736	16,000
Dental Van Visits	2,980	3,102

**Procedures were performed in the dental van and using the portable equipment. Not all procedures were billable, e.g., counseling - tobacco, nutrition, hygiene; re-seals; non-billable Medicaid procedures; etc.*

Linkages and Coalition Building

In an effort to work collaboratively with the community, the CCDHHS participated in nearly 40 coalitions and task forces in 2018.

Opioid Crisis Funds

In 2018, CCDHHS was one of 24 high-burden counties to receive funds from NYSDOH and CDC to address the opioid crisis. The funding aims to support counties in enhancing current and proposed activities to respond to the opioid crisis by improving the quality and timeliness of overdose and drug-related data, rolling out evidence-based strategies at the local level, improving support to medical providers and health systems, and improving linkages to care for people who use drugs. Grant activities and evidence-based interventions take a harm reduction and trauma-informed care approach.

In Chautauqua County these funds are used to help support community naloxone trainings, offer buprenorphine waiver trainings to medical providers, expand access to buprenorphine (a medication for addiction treatment) into new and various medical settings, establish a real-time overdose mapping program (ODMAP), connect people who use drugs with peer services in the jail and community, and facilitate better data sharing with hospitals and the Coroner Program.

Tobacco Use Prevention

CCDHHS collaborates with the Tobacco-Free Chautauqua, Cattaraugus, Allegany (Tobacco-Free CCA) Program administered by the Roswell Park Cancer Institute to carry out tobacco prevention efforts. Tobacco-Free CCA receives funds from NYSDOH to complete their work plan which aims to:

- Reduce the impact of retail tobacco marketing on youth by educating communities about the manipulative marketing tactics of the tobacco industry.
- Establish tobacco-free-community norms through clean outdoor air policies by working with communities to create more smoke-free parks, playgrounds and beaches.
- Lessen secondhand smoke exposure by working with landlords and tenants to implement smoke-free housing policies in multiunit dwellings.
- Diminish tobacco imagery in youth-rated movies by working for change in the rating system to require an R rating for movies that contain smoking imagery.
- Decrease tobacco-industry presence on social media by working with stakeholders and internet sites to enact and adhere to policies that protect youth from tobacco imagery.

In addition to providing support to Tobacco-Free CCA, the CCDHHS explores policy-level actions that can be taken at the county level to prevent tobacco use. The Division of Environmental Health Services continues to enforce the Tobacco 21 law, which took effect in September 2016. CCDHHS assisted storeowners with signage and education about the new law. There were no violations in 2018.

Following a regional coordinated effort to inform parents about the dangers of smoking in vehicles with children present in 2016 and 2017, CCDHHS continued educational efforts in 2018. The department issued public service announcements on the radio and on the department Facebook page. The video that was shared on Facebook generated healthy debate among viewers, and led to wide distribution of the post. CCDHHS continues to collaborate with regional partners on a plan to move forward with smoke-free vehicles legislation.

In 2018, responding to a County Health Rankings statistic that listed Chautauqua County as having the highest adult cigarette smoking rate, CCDHHS held two forums with community stakeholders to discuss tobacco and nicotine use in the community. As a result of what was learned at the forums, the Nicotine Annihilation Team was formed to address youth use of electronic cigarettes. Additional partners on the team include the Chautauqua Alcoholism and Substance Abuse Council (CASAC), Erie 2 Chautauqua-Cattaraugus BOCES, Health Systems Change for a Tobacco-Free WNY, and Tobacco-Free CCA. The group has developed and distributed educational materials to school leaders and parents, educated the public through social media, and is reviewing and providing recommendations for school policies regarding e-cigarette use and disciplinary measures.

Additionally in 2018, CCDHHS partnered with Health Systems Change for a Tobacco-Free WNY to distribute nicotine replacement therapy (gum, lozenges, patches, etc.) to community members interested in quitting smoking.



Chautauqua County
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716-753-4998 . www.CHQHHS.com



Become a Chautauqua County
Foster/Adoptive Parent
Call: 716-661-8051

OFFICE LOCATIONS

South County Office Building

Main Assistance Office and
Children & Family Services
110 East Fourth Street
Jamestown, New York 14701

Hall R. Clothier Building

Health Clinic, Environmental Health,
Child Support, and Administration
7 North Erie Street
Mayville, New York

North County Office Building

Emergency Assistance and
Children & Family Services
319 Central Avenue
Dunkirk, New York 14048

CONNECT

Chautauqua County

www.co.chautauqua.ny.us

Apply for and track SNAP/HEAP benefits:

www.mybenefits.ny.gov

Apply for Medicaid

www.nystateofhealth.ny.gov
(855) 355-5777

HOTLINE NUMBERS

Report alleged Elder Abuse or Neglect

716-753-4447

Report alleged Child Abuse or Neglect

General Public Hotline: 800-342-3720
Mandated Reporter Hotline: 800-635-1522

Report Welfare Fraud:

800-388-5365