

ESSEX COUNTY HEALTH DEPARTMENT

DECEMBER 2023

MONTHLY REPORT

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Chronic Disease

The Essex County Health Department partnered with Cornell Cooperative Extension (CCE) to cross-promote #getfitessexcounty with CCE's aging fitness programs, including Range of Motion. Fitness bands featuring #getfitessexcounty will be provided to participants to take home to encourage regular exercise outside of the classes.

Join us for 25 days of fitness! This challenge involves an interactive calendar that reveals a new workout every day. You can click on each day at 5am to see the workout of the day, just like opening a present! If you need modifications for any exercise, you can refer to this link, type in the workout, and it will show you the modification.

The Essex County Health Department is also coordinating a local coalition aimed at the prevention and reduction of vaping and tobacco use in Essex County. The first meeting was held on November 21st, 2023.



NYSDOH Incentive Program

Now in its 12th year, the NYSDOH provides an incentive program with focus area, scope of work and measurable objectives. The award provides departments willing to take on additional activities the opportunity to earn additional dollars to support functions within general public health work. This year the focus is chronic disease prevention; specifically, the promotion of physical activity. Work starts December of 2023 and runs through July 2024.

OBJECTIVES:

1. Participate in Training – 2 parts
2. Submit 2+ completed ACT modules
3. Participate in Action Plan Training
4. Submit an Action Plan for at least 1 community.

FUNDING SUPPORTS:

*multi-sector planning to advance physical activity in community design

*development of "Shovel Ready" plans

FUNDING DOES NOT SUPPORT:

*implementation of those plans/infrastructure

Active Communities Tool

[Print](#)

The Active Communities Tool (ACT): An Action Planning Guide and Assessment Modules to Improve Community Built Environments to Promote Physical Activity

Introduction

The Active Communities Tool (ACT): An Action Planning Guide and Assessment Modules to Improve Community Built Environments to Promote Physical Activity helps committed, cross-sector teams create an action plan for improving community built environments that promote physical activity consistent with their community context.

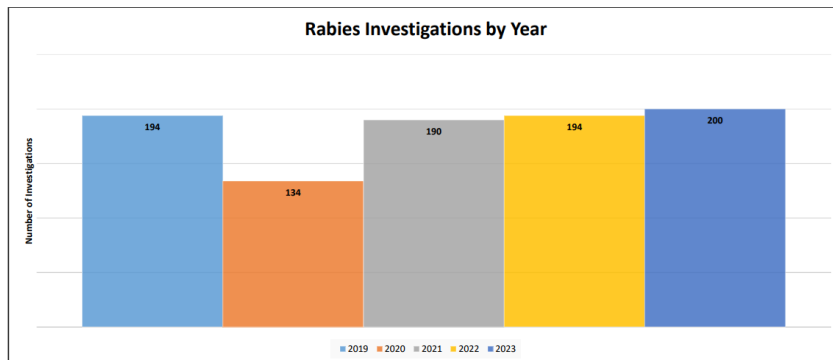
The Active Communities Tool has two parts:

- [The Active Communities Tool \(ACT\): An Action Planning Guide](#)
- [The Active Communities Tool \(ACT\): Assessment Modules](#)



Communicable Disease

Rabies



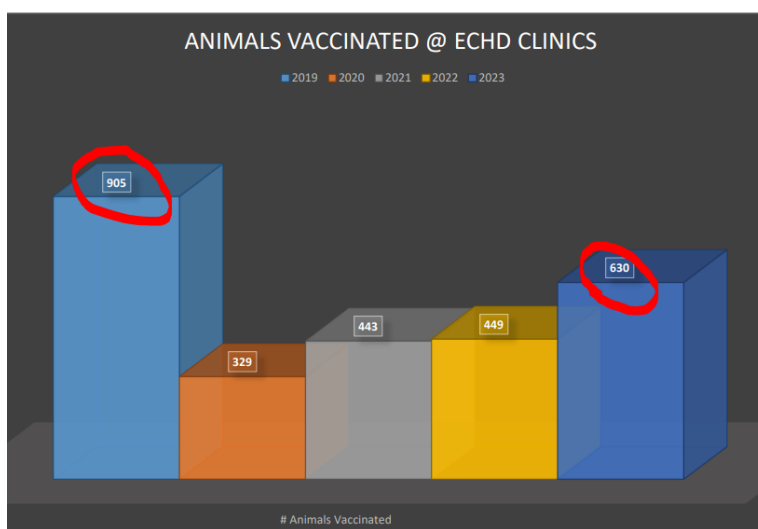
Rabies investigations are one of the most pressing needs of our Department during spring, summer and fall. This year, there were more:

- *investigations – 200+
- *specimen submissions - 80+
- *Post Exposure Treatments – 59

To date in 2023, ECHD has authorized Rabies Post-Exposure Prophylaxis (RPEP) payment for **59** individuals. Each one of these interactions is potentially an opportunity to link people with health insurance enrollment specialists if during the course of our bite investigation we determine they are uninsured. We are in the process of updating our internal workflow to incorporate this important step. The benefit of securing insurance coverage is two-fold in this situation. For those who become insured through our efforts, the cost to the county for authorizing RPEP is greatly reduced because we can back bill for 90 days after the person becomes enrolled. The individual can also now access healthcare without cost being a barrier.

This year, rabies was identified most frequently in fox. Fox were infected with the raccoon variant and act much more aggressively than other mammals causing a significant increase in exposures.

At the request of Public Health Director and Board of Health Chairperson, Shaun Gilliland, a meeting was conducted on November 16th with members of the NYSDOH, USDA Animal & Plant Health inspection Service (APHIS), Cornell Cooperative Extension, NYS Assemblyman Simpson's Representative, NYSDEC and ECHD.



The meeting provided an opportunity for the Department to express concerns about increasing activity in Essex County, for APHIS to explain the Oral Rabies Vaccine (ORV) Bait Drop Program, and for considerations for future funding and collaboration to occur. Players will continue communication & planning efforts to reduce risk of rabies exposures.

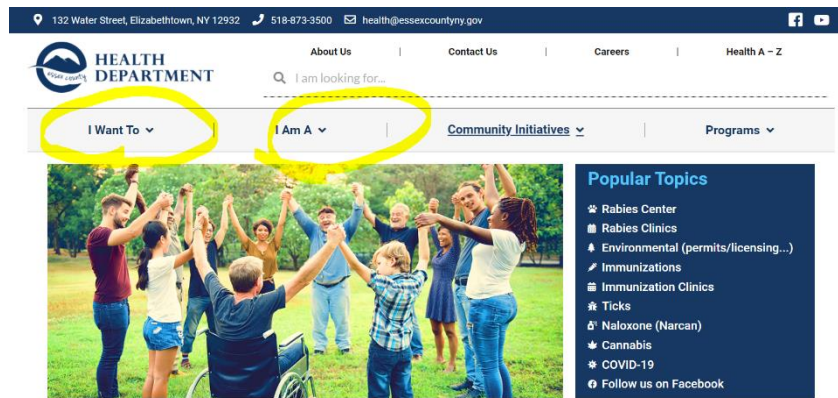
Our FREE rabies vaccination clinics are reaching fewer pets than before the COVID-19 pandemic though small increasing towards pre-pandemic reach were made in the 2023 year.

Website Redesign

The Department has been working on a complete revision of its website. With over 50 pages and one of the most frequented sites for Essex County Government, this project is incredibly important to the communications and campaigns of the Department & ability of our community members to find information. The effort puts a strong emphasis on re-thinking how people may be looking for information.

It's a switch FROM – this is who we are and what we do – TO – **I want to; I am a** (looking for).

With additional health literacy input from trained Health Department staff and accessibility assistance from the IT Department, the goal is to help people find what they're looking for in a language they can understand and within just 3 clicks. The site's anticipated launch is by January of 2024!



[NYSDOH Launches New Flu View](#)

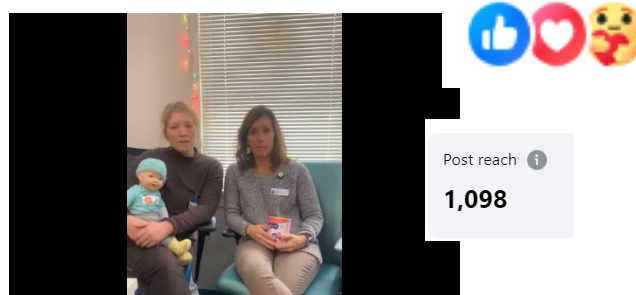
Please check out the new flu view available through the NYSDOH. This replaces what used to be issued as a weekly flu report.



The CDC has updated their annual flu media and messaging for National Influenza Vaccination Week: *A flu vaccine can take flu from Wild to Mild*. This year, the annual observance runs from **December 4-8, 2023**, and is a reminder for everyone 6 months and older that there's still time to get a flu vaccine this season.

Family Health

Little Feeders Circle of Support: CLC Facebook Live Sessions Launched & Loved



Children's Services

Early Intervention:



There are currently 31 children enrolled in the Early Intervention program. The program is currently experiencing a waitlist for evaluations. This evaluation is called a Multidisciplinary Evaluation (MDE). "Multidisciplinary" means that a team of qualified professionals from different disciplines or professions will take part in your child's evaluation. Children with certain diagnosed conditions are automatically eligible for the EIP. For these children, the purpose of the MDE is to assess your child's strengths, needs, and current level of functioning in all areas of development. The five areas of development that will be looked at to assist in developing the IFSP are: cognitive (learning and thinking), physical (growth, vision and hearing, gross and fine motor abilities), communication (understanding and using words), social-emotional (relating to others), and adaptive (self-help skills, such as feeding).

The delay in MDE is due to Mountain Lake Services being the only team to offer in home evaluations and the only county-based organizations. We have three other evaluation teams located outside the County that have resorted to doing them at the office only due to provider shortages and not all families can travel. Two of those agencies are in Clinton County and the other is in Warren County. There are 16 children currently waiting for their MDE evaluation to establish if they are eligible for Early Intervention Services. Of those evaluated children, we currently have a waitlist for Physical Therapy (3), Speech (8) Special Instruction (6) and Occupational Therapy (4).

Preschool:



There are currently 86 children enrolled in the Preschool program and 27 in the referral process. The program raised the rates for one-on-one aides from \$15-\$18 per hour. Without a center-based special education classroom in the County, we have all of our special needs children in Pre-K and Head Start classrooms and they need additional supports.

Three of the Children's Service Unit Staff were trained in Mental Health First Aid USA. This will help provide initial help to families we work with that may be experiencing a mental health or substance abuse challenge.

WIC



The Monday before Thanksgiving, WIC staff in collaboration with the Lake Placid Ecumenical Food Pantry was able to give 87 WIC families Thanksgiving dinner. Also, the Hub on the Hill and Rolling Hills Farm donated close to 900 pounds of frozen, vacuum-packed cuts of beef to WIC; an estimated value of close to \$9,000. Therefore, along with the turkeys, each family received close to 10 pounds of locally raised beef. We are certainly grateful to live in an area where our partners are as concerned about food security as we are.

WIC also launched breastfeeding support efforts for WIC Program participants.

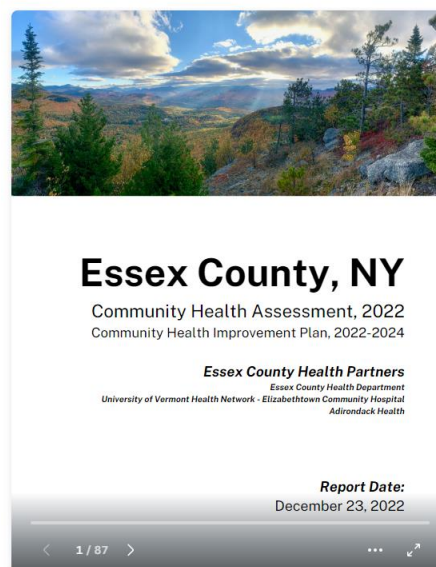


Community Health Assessment

ECHD received the following feedback from the NYSDOH's review of our submitted 2022 Community Health Assessment and 2022-2024 Community Health Improvement Plan:

We recognize the effort involved in collaborative planning and appreciate the commitment made to work with all the partners in the community to develop and implement this plan. In addition to the strong collaboration, reviewers liked the following about your submission:

- The executive summary provides a snapshot to help the community understand the public health improvement efforts underway.*
- The Community Health Assessment is strong as it includes current data, a variety of data sources, compares county data to standards and to similar counties.*
- Intersectoral partners outside of health and health care and citizens were engaged at the planning and implementation levels.*
- The prioritization process is clear.*
- For at least one priority, you are working with partners to promote health equity and the report clearly identifies output and/or local outcome measures.*



The NYSDOH also announced that 2023 updates would not be required from Local Health Departments and their hospital partners, as work is underway to develop the 2025-2030 State Prevention Agenda.

Home Health

Some people think home care is a 9-5 job. I am here to tell you it is not. The nurses and therapists each have a caseload of patients who they spend multiple hours a day managing their care. Even off duty the patients will send text messages to their case manager with either questions or concerns or to let them know about changes in the scheduled visit times. When the clinician runs later than expected the patients call with a worried concern for their safety well aware of the dangerous snow/ice covered road conditions. When the clinician calls the patient and they receive no response, they start calling other family members to ensure the patient has not fallen. On snowy days, or when the weather does not cooperate, this heightens the concerns for both the patients and clinicians. The walkways are snow covered and driveways are not plowed. The homebound patient cannot perform this task. The clinicians will put on YakTrax to prevent their own slips, trips or falls knowing there is no one available to help them if this happens in remote patient areas.

With foul weather, we frequently lose power in the North Country. Every patient has an emergency plan upon admission to home care for this and many other situations that may arise. If electricity is necessary, the patient chart provides the warning for required electricity. Some patients have inflated mattresses, electric recliners or lift chairs, CPAP or oxygen concentrators which all require electricity. The case manager will prepare patients in advance of a storm teaching about alternate electricity plans. This may include a call to emergency services to place a generator on site, identifying an alternate bed or 72 hours of bottled oxygen available. Telehealth and remote patient monitoring offer each patient an extra level of care 24 hours a day.

When clinicians make home visits, they are not just performing the ordered task of wound care or therapy; they are also assessing the environment. Is the home too warm or too cold? What is the patient eating? Are there slipping or tripping hazards? Is there caregiver strain? How many days of dressing supplies are on hand? Does the patient or caregiver know all the medications, how to take them, the side effects and intended use? Are any prescriptions about to run out or expire? Are there things they can do to make everyday tasks easier or safer? Did they write down any upcoming medical appointments on a calendar? Does the patient or caregiver need assistance completing forms or understanding a notice?

After completing the ordered tasks, there are doctors to call, notes to write, conferences with other clinicians to coordinate the care. There are remote patient monitoring alerts to review and follow up on. If labs were drawn, there is follow up to be sure the provider has reviewed the results and acted on any abnormal findings. If the patient had a clinic visit there is follow up to determine if the wound care changed or if there are any medication changes. If the patient went to the ER or was admitted to the hospital there is follow up and on call services after hours for any last-minute schedule changes.

Finally, there are schedules to make and adjust based on the newly ordered services or treatments, patients coming home from the hospital, or unexpected provider appointments. And of course, if a patient falls or sustains an injury, they will be on the visit list to see what can be done to prevent any future falls or injuries. Well, if that is not enough the clinician will read through 50 pages of the patient referral or return from the hospital information to identify all the changes and be ready for the visits to start all over again. All of this will keep our residents safe, happy and healthy in their own home while receiving the best home care possible. As you can see this cannot all happen 9-5.