

ESSEX COUNTY HEALTH DEPARTMENT

NOVEMBER 2024

MONTHLY REPORT

DIRECTOR - LINDA BEERS, MPH



Director's Report

I want to make you aware of my deep concerns regarding the recent rollout of the EI-Hub system for the New York State Early Intervention Program (EIP). As you know, this program is essential in providing critical services to children with developmental needs and supporting families during their early intervention journey. Unfortunately, the newly implemented software is proving to be a serious barrier to effectively managing and delivering these services.

Since its launch on October 15, numerous issues have been reported by counties and providers alike. The new system's data entry process is excessively complicated, requiring multiple additional steps that were not needed in the previous system. Each step has a lengthy load time, and frequent timeouts are making it impossible for staff to enter information efficiently. What once took minutes now takes hours, diverting crucial time and resources away from serving families and children.

More critically, the EI-Hub has shown a high rate of errors in data entry, and much of the existing data from the previous system did not migrate correctly. The most concerning aspect is the impact on provider payment. During the transition, there was a two-week period where no claims could be entered into either system. When claims were finally submitted, many were rejected or denied due to system flaws that do not meet the functionality or standards required by EIP. Consequently, providers are not receiving payment for services rendered, leading to frustration and causing some to leave Early Intervention altogether.

This situation not only disrupts services to children and families but also threatens the sustainability of our Early Intervention workforce. Without prompt remediation and improvement to the EI-Hub system, we risk losing more providers, which will exacerbate delays in care for children who rely on these critical services.

I am working with NYSACHO, and we are involving NYSAC to strongly advocate on the behalf of all counties. We are requesting immediate action from the state to address these issues. It is imperative that we find a resolution that ensures timely and accurate data entry, claims processing, and provider payment to maintain the integrity of our Early Intervention Program.

Health Department Highlights

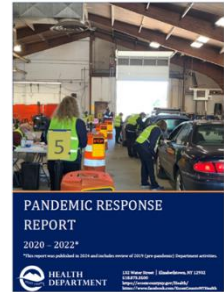
CREDIBLE MIND

As part of a joint initiative with Essex County Mental Health, ECHD announced the launch of CredibleMind, a new online platform designed to support the mental health and wellbeing of the community with resources for anxiety, depression, stress, substance use, caring for aging loved ones, parenting, nutrition, and so much more.

CredibleMind offers a free, comprehensive suite of tools and resources to help navigate life's challenges. ECMH and ECHD believe that this platform will be a valuable resource for the community, providing accessible and informative information on mental health. The partnership aligns with the shared commitment to promoting the overall health and wellbeing of its residents, as outlined in the 2022-2024 Essex County Community Health Improvement Plan.

PANDEMIC RESPONSE REPORT

Prior to the COVID-19 pandemic, ECHD issued an Annual Report to provide stakeholders, partners, and community members a summary of budget and financial information, an overview of mandated activities, and a review of programs and services conducted during the year. Although ECHD was not able to issue this report during the pandemic, we believe it's important to document the efforts of our department during this time, as well to return to the practice of transparency and accountability to the people we serve. To that end, we are issuing a Pandemic Response Report, which covers the years ECHD was primarily responding to COVID-19 (2020, 2021, and 2022) and includes a condensed summary of activities for 2019. Highlights of the report include:



- A detailed timeline of the major pandemic milestones, from the first meeting of the ECHD Emergency Response Team in January 2020 to the transition out of pandemic declarations and mandates in 2022.
- A description of pandemic messaging and communications – a major, ongoing, and ever-evolving component of the department's response activities.
- A summary of the significant ways the department's budget was impacted because of the pandemic, including a massive influx of temporary funding, which required oversight, administration, increased staffing, and execution of required activities and deliverables.
- The toll on staffing and morale – for ECHD and health departments across the state (and nation).

ECHD Program Data – October (unless otherwise noted)

Community Health Assessment (CHA) and Improvement Planning (CHIP)

CHA Progress Updates & Special Reports



The Program Coordinator responsible for managing CHA and CHIP activities is participating on a work group with representatives from various agencies across the state to identify goals, objectives, and interventions for the 2025-2030 Prevention Agenda Domains and Priority Areas. The final product will be the framework used by local health departments and hospitals to develop their respective CHAs and CHIPs.

Communicable Disease

Communicable Disease Surveillance/Epidemiology Investigations

Respiratory Illness investigations (Flu, COVID, RSV, TB) - **75**

GI Illness (Water/Foodborne) Illness Investigations - **1**

STI/Hepatitis & HIV Investigations – **9 (2 chlamydia, 1 gonorrhea, 2 syphilis, 4 hepatitis)**

Arthropod-borne (Mosquitos and Ticks) Disease Investigations - **33**

Food Safety/Outbreak Investigations – **0**

Other Investigations (Strep pneumo invasive, Invasive Group A/B Strep) – **0**

Immunization Program

Clinics in the community – **1 clinic in the community/5 clinic days**

Individuals immunized – **94**

Healthcare provider, school nurse, day care provider or other public health detailing activities: **School districts engaged with public health details for school required immunizations (Keene Central School, Boquet Valley Central School, Minerva Central School, Northwood School)**

IQIP visits - **0**

Stethoscope meetings – **0**; ***Discussion with the Epilepsy Foundation to start working on a 3-hour training for school nurses**

Did you know? In keeping with obligations of our Immunization Program, our local health department must:

- *vaccinate school children who are identified by school authorities to be excluded due to lack of acceptable immunization records and
- *support schools with annually required immunization surveys.



New York State Department of Health Division of Vaccine Excellent (DOVE) is making rounds across the state to visit local school districts and audit school immunization records. This October DOVE made an appearance at Boquet Valley Central School and identified students that did not meet immunization requirements for school attendance. Some families were able to get appointments with their established healthcare providers. Our Department set up a clinic within 2 days to help all other families get caught up with school-required immunizations. DOVE is visiting Minerva Central School in early November and our Department will continue to serve local families in meeting immunization needs.

Our nurses are trained in understanding NYS immunization requirements for school attendance and working with school nurses and families in understanding immunization records and catch up schedules. While many students are under the excellent care of local pediatricians and healthcare providers, others may not have a strong relationship with a provider. Some are new to the area from out of the region or state; some are here as exchange students. All are required to meet NYS requirements and this is where we can help. For each unique situation, we can provide needed immunizations or connect families with healthcare providers and insurance.

Screening Services

HCV Screenings - **0**

HIV Screenings - **0**

TB Screening - **1**

Referrals to Planned Parenthood for STI Testing – **1**

Rabies Prevention Program

Rabies Vaccine Clinics – **1 Schroon Lake**

Pets Vaccinated - **71**

Rabies investigations - **5**

Specimens submitted for testing – **3 (all negative)**

People approved for rabies post exposure prophylaxis – **0**

Emergency Preparedness & Response

Real World Events, Drills & Exercises – **1 (Flu Clinic 10/28/2024)**

Training/Continuing Education - **8**

Community Engagement/Collaborative Planning Meetings - **5**

Volunteer Coordination – MRC Volunteers participated in the Flu Clinic on 10/28/24, and at the Schroon Lake Rabies Clinic on 10/30/24. The finalized MRC Playbook and the new Policy on Spontaneous Unaffiliated Volunteers (SUV) has been submitted for approval.

Plan Updates/Revisions – **0**; Essex CART Plan has been submitted for approval; updates have been made to the Emergency Communications Plan and the Emergency Operations Plan and will be submitted for approval; and the Public Health Asset Distribution Plan continues to be reviewed and updated.

Chronic Disease

Campaigns/Events - 2

Coalition/Collaboration Interactions/Meetings - 7

Public Health Detailing Screenings & Disease Concordant Care - 0

Direct Community Outreach Initiatives – 2

Training/Continuing Education – 0

October Health Campaigns:

- #Getfitessexcounty – “Candy Corn Cardio” →

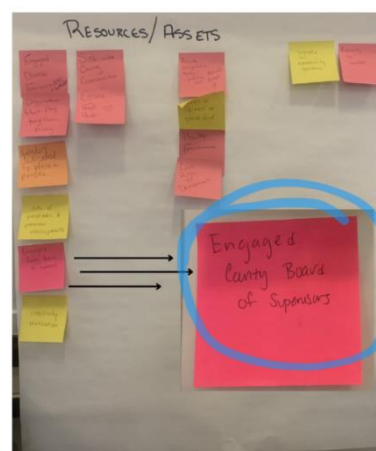


- Breast Cancer Awareness Month – ECHD launched a social media campaign and distributed magnets reminding women to get their recommended mammograms

- The Chronic Disease Outreach Coordinator attended the two day AHI 2024 North Country Leadership Summit focused on leveraging partnerships to enhance the regional health and social care landscape.

- The Well Fed Essex County Collaborative partnered with the Adirondack Food Systems

Network to host a roundtable at the Grange in Whallonsburgh to discuss challenges and opportunities in our local food system and bridge new partnerships. The Essex County Board of Supervisors was identified as a strength supporting farmers and access to healthy, local food.



Community Opioid Overdose Prevention Program

Narcan Kits Distributed – 10

- 6 kits to Board of Elections staff
- 2 kits to Ticonderoga Mill
- 2 kits to community

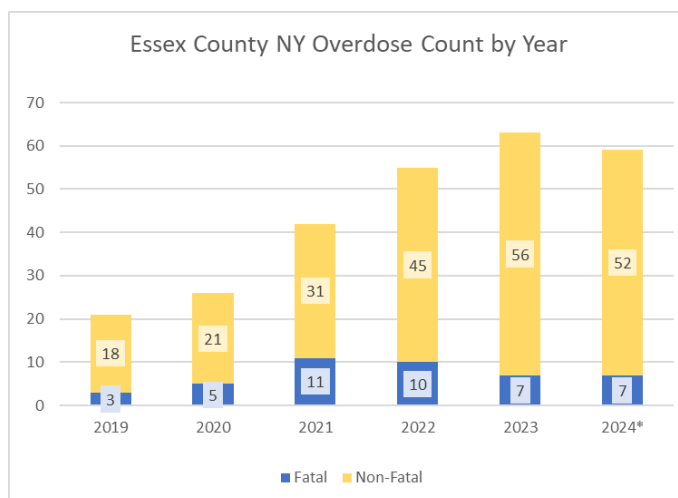
SUDOR Submissions/ODs – 1 non-fatal; 0 fatal

Total Overdoses for the year: 59 (52 non-fatal; 7 fatal)

Trainings attended – 0

Events – 0

*Note: 2024 totals in the graph are year-to-date through October.



Family Health

Baby Steps to Bright Futures

Babies born & families offered the Program – **22 (2 pending)**

Families enrolled in the program – **9 (4 born in August or September but accepted in October)**

Families that were sent a packet as unable to reach or declined the program – **15**

Referrals out to programs and services – **0**

Reached through Little Feeders Support Group – **0** in-person sessions provided; **0** Facebook Live sessions

Childhood Lead Poisoning Prevention Program

Lead Cases open (elevated lead levels in pregnant women or children) – **7** active; **11** pending confirmatory testing

Lead levels screenings performed by our Department – **0**

Environmental lead assessments/home visits completed this month for confirmed elevated children – **1**

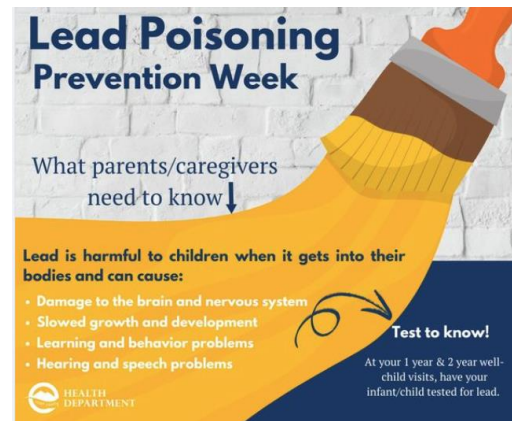
October 20th-26th is National Lead Poisoning Prevention Week - Did you know around 1/3 or 5,300 houses in Essex County were built before 1940? Homes built before this time are 87% more likely to contain lead. The older your home is, the more likely it is to contain lead. Lead can affect almost every organ and system in your body. Children 6 and younger are most at risk to the effects of lead. Even low levels of lead in the blood of children can result in behavior and learning problems, slowed growth, and hearing problems.

Car Seat Program

Car seat check clinics – **3 (Tech Check Tuesdays)** or by appointment

Car seats checked - **6**

Car seats issued as new & installed – **4**



School Nurse Stetho-Scoop Monthly Meeting

Goal to begin offering these meetings in the next couple of months, once our new nurse completes training/orientation.

Sexual/Reproductive Health Program

Schools/Camps/Groups – **1**

Classes – **various**

Students reached - **100**

CAP Pack Distribution:

- 20 placed in the bathrooms of Schroon Lake Town Hall
- 10 placed in the lobby of the Health Department

Children's Services

Early Intervention

Referral received in to the program - **6**

Children found eligible & enrolled (have a plan) - **21**

Children awaiting evaluation - **5**

Speech Therapy – **12** receiving; **5** waiting

Occupational Therapy – **1** receiving; **0** waiting

Physical Therapy – **3** receiving; **1** waiting

Special Instructional Services – **10** receiving; **3** waiting

Group Developmental Services – **2** receiving; **0** waiting

Preschool Program

Children in process of evaluation, referrals - **24**

Children enrolled - **70**

Children waiting for services: **27**; Counseling – **2**; Occupational Therapy – **9**; Physical Therapy – **4**; Speech Therapy – **7**;
Special Education Itinerant Teacher - **19**

Children Attending Center Based Classrooms in County - **8**; Out of County - **11**

Children and Youth with Special Healthcare Needs

Children enrolled – **31**

WIC

Target Caseload – **600**

Current Enrollment – **546**

Current Participation - **515**

High Risk Participants - **27**

Nutrition Education sessions/contacts – **189**

Referrals made to other programs/services - **90**

Breastfeeding initiation rate – **84%**

\$ Redeemed (spent) through the WIC program – **not available at time of report**

Emily French spoke to the Rotary Club recently. The Rotary of the ADK's sponsored the 2024 WIC-N-Pick. WIC shared statistics on obesity, fruit and vegetable consumption, and exercise from the Community Health Assessment that provided some rationale for the 2023-2024 goals for the program. This led to many questions about the chronic disease rate of our area and an increased interest and discussion about the ways that the club could help.



WIC continues to work with the Essex Food Hub to distribute local food to WIC families. In October, WIC families received \$21,400 of local food on top of their WIC benefits bring the year to date total distributed to \$81,662 since April.

Home Health Care

As we celebrate National Care at Home Month, we proudly reflect on the incredible work, dedication, and compassion of our Essex County Certified Home Health Agency team. This annual observance each November invites us to highlight the invaluable role home care plays in our healthcare system. It's a chance to raise awareness among our communities, media, and policymakers about the profound impact home care has on individuals and families—keeping loved ones safe, supported, and empowered right where they feel most at ease: at home.

Since 2011, our agency has been a beacon of support, care, and resilience for over 7,000 residents across all 18 townships in our county. Through countless miles—over 1.5 million—and more than 160,000 home visits, our dedicated professionals have bridged gaps, provided healing, and lifted spirits. On average, our team members travel more than 11 miles for each visit, committing their time, energy, and skills to meet our patients wherever they are.

The impact of their work is reflected in every visit made, every mile traveled, and every moment of care provided. Here are just some of the impressive accomplishments our team has achieved:

- Home Health Aides: 51,000 visits
- Occupational Therapy: 7,000 visits
- Physical Therapy: 40,000 visits
- Skilled Nursing: 65,000 visits
- Speech Therapy: 1,500 visits

Every visit is not only a touchpoint of care but a testament to the thorough documentation that Medicare requires for skilled clinician services. With Medicare coverage for home care services—including wound, ostomy, and catheter supplies—our patients face no copays, deductibles, or visit limits. This commitment to accessible, quality care helps bridge a crucial gap, ensuring that patients receive the services they need without financial burden.

It's also worth noting the efficiency of home care. A single hospital day costs more than 60 days of home care, where one clinician can serve as many as 20 patients—a powerful comparison highlighting the vital role home care plays in relieving strain on hospital resources.

With a team of 7 skilled nurses, 4 home health aides, 4 physical therapists, 2 physical therapy assistants, 2 occupational therapists, and 1 speech therapist, we're able to provide each patient an average of 6-7 visits per month. Our care encompasses a wide range of needs: 30% of our patients have wounds, 35% face challenges related to stroke or neurological conditions, 4% manage respiratory conditions, 8% have cardiac issues, and 7% live with diabetes.

Our agency receives referrals from hospitals and physicians throughout New York and surrounding states—over 16,000 in total—with partners like UVM, Glens Falls Hospital, Champlain Valley Physicians Hospital, Adirondack Medical Center, Elizabethtown Community Hospital, Albany Medical Center, and Sloan Kettering Hospital. Thanks to our services, many patients avoid prolonged hospital stays, nursing home admissions, or costly assisted living alternatives.

At the heart of all we do is a deep commitment to providing patient-centered, high-quality care in the setting where patients feel the most comfort and peace: home. It's a privilege to offer our patients a continuum of care that honors their dignity, autonomy, and well-being. Our team's dedication to this mission shines brightly, and we're deeply grateful for every mile traveled, every visit made, and every life touched.