



Make Dutchess County
the Healthiest Place
in New York State

Dutchess County

Department of

Health

2014 Annual Report

Dutchess County Department of Health 2014 Annual Report

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Marcus J. Molinaro
Dutchess County Executive



Kari Reiber, MD
Dutchess County Commissioner of Health

Dear Dutchess County Residents,

We are pleased to present the 2014 Annual Activity Report for the Dutchess County Department of Health. Our Annual Report provides a comprehensive overview of the Department's many efforts to promote the health and well being of Dutchess County residents.

We take pride in the fact that Dutchess County ranks among the 11 healthiest counties in the State and we are committed to making Dutchess an even healthier community in which to live, work, and raise our families. Our 2013-2017 Community Health Improvement Plan was launched in April at the Wallace Center in Hyde Park during National Public Health Week. At this celebratory event, community partners, county officials and representatives from business, health, and education sectors signed a "Declaration of Wellness" to pledge their commitment to help make Dutchess the Healthiest County in New York State.

In 2014, the Department of Health took an active part in the Delivery System Reform Incentive Payment (DSRIP) planning initiative, contributing to the Community Needs Assessment and participating in select chronic disease prevention project work groups. The upcoming merger between the Departments of Health and Mental Hygiene is timely and appropriate given New York State's commitment to integrating behavioral and primary care services and providing New Yorkers with a more holistic approach to health care.

We look forward to the future and its many challenges, and to leading the way to a culture of change that will benefit the residents of Dutchess County.

Best wishes for a Healthy Dutchess!

Dutchess County

Board of Health:

Lobsang T, Lhungay, MD, President
Joseph Calabro, MD, Vice President
William S. Capowski
Helen Bunyi, RN, Secretary
Robert Irving Miller, RN, Esq
Karen Desmond, RN
Gerald Hutchings, County Legislator

Committees:

Health Disparities
Smoking and Tobacco
Sanitary Code
Anti-Obesity Committee

REPORT OF THE DUTCHESS COUNTY BOARD OF HEALTH

The mission of the Board of Health is to protect the life and health of the people of the Dutchess County Health District as encompassed in the Public Health Law, the Sanitary Code of Dutchess County, the Dutchess County Charter Article VII, and the Administrative Code Article VII of the Dutchess County Government.

Subject to the provisions of the Public Health Law and the State Sanitary Code, the Board has the power to formulate, adopt, promulgate, amend or repeal such rules and regulations as may affect public health within the County; to consider any matters that may come to its attention relating to the preservation and improvements of public health within the County; and to advise and make recommendations to the Commissioner of Health thereon.

In August, the Board welcomed Stephen Capowski, a new member who will be chairing the Sanitary Code Committee. Mr. Capowski served Dutchess County for more than 40 years as a Public Health Sanitarian, and as a Supervisor responsible for overseeing the Radiological Health and Environmental Assessment Program, the Hazardous Material Emergency Response Program and the Lead Program. He served as Director of the Environmental Health Services Division from 2000 to 2012 when he retired.

In 2014, the Board of Health continued to focus on reducing the burden of obesity in Dutchess County. In an effort to help low-income residents have better access to healthy fresh produce, the Board heard presentations by the County Transit Administrator on public transportation routes; the founders of Poughkeepsie Plenty and the Poughkeepsie Farm Project; and the education program leader for Cornell Cooperative Extension of Dutchess County.

The Board Vice President, Dr. Calabro, is organizing a one day Anti-Obesity CME event focusing on medical issues directly linked to obesity. Featured speakers will include a pediatric endocrinologist, a nutritionist, a pulmonologist, a weight-loss surgeon, and an orthopedic surgeon. This event will be sponsored by Health Quest and is scheduled to be held March 16, 2016. The Board of Health is the organizing committee for this CME event which will do much to promote awareness of obesity and its complications within the medical community.

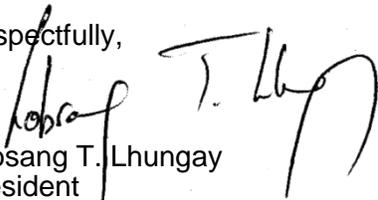
Obesity prevention and substance abuse are both key focus areas of the Department of Health's 2012-2017 Community Health Improvement Plan. The Council on Addiction, Prevention & Education's Executive Director gave a presentation on the Marathon Project, a highly successful after-school distance running program for middle and high school students aged 12-18 years that helps reduce the risk of childhood obesity, school dropout, bullying, and substance abuse. The program currently serves schools in Hyde Park, Webatuck, and Poughkeepsie.

The Board receives regular updates on Department of Health programs and initiatives. In 2014, these update presentations focused on Community Health Improvement Plan activities, tick-borne disease prevention and emerging tick-borne diseases, the Opioid Overdose Prevention Program, and Public Health Emergency Preparedness activities including the County's response to the Ebola Virus epidemic. The Commissioner of Health expressed concern for the increasing popularity of e-cigarettes, and requested that the Board support in advocating for greater regulations. The Board subsequently issued a press release and wrote a letter to the editor of the Poughkeepsie Journal alerting the public to the dangers of e-cigarettes.

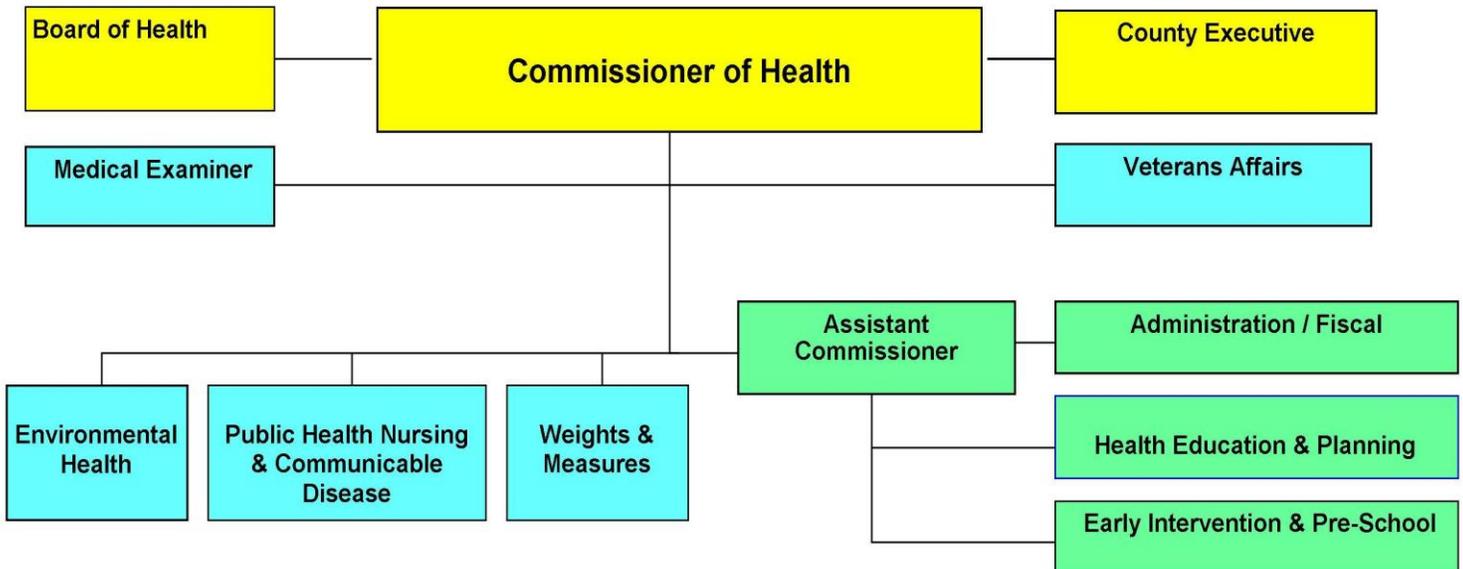
In September, the Board was briefed by the Dutchess County Executive on the proposed merger of the Dutchess County Departments of Health and Mental Hygiene.

Additional accomplishments included approving new fees for vaccines, raising Sanitary Code civil violations from \$1000 to \$2000, and approving the credentialing and professional licenses of the Nurse Practitioner and contracted Physicians who practice at the Dutchess County Department of Health Clinics; the scope of their practice, their performance appraisals and their records will be reviewed every two years.

In 2014, Public Health Partnership Award honorees were Dr. William Augerson, Past President, and member of the Board of Health for more than 12 years, and Cornell Cooperative Extension of Dutchess County for its Nutrition Information Program. This program is a collaborative effort involving more than thirty organizations that educate residents on how to choose and gain access to nutritional foods. The awards were presented in the Legislative Chambers.

Respectfully,

Lobsang T. Lhungay
President
Dutchess Board President

**DUTCHESS COUNTY DEPARTMENT OF HEALTH
2014 ORGANIZATIONAL STRUCTURE**



DUTCHESS COUNTY DEPARTMENT OF HEALTH OFFICES

85 Civic Center Plaza (Suite 106) - Poughkeepsie, NY 12601
Tel: (845) 486-3400 TTY: (845) 486-3417 Fax: (845) 486-3447

Weights & Measures

98 Peach Rd, Poughkeepsie
(845) 486-2649 (tel)
(845) 486-2947 (fax)

Medical Examiner's Office

168 Washington Street, Poughkeepsie
(845) 486-3526 (tel)
(845) 486-3554 (fax)

Beacon District Office

223 Main St, Beacon
(845) 838-4801 (tel)
(845) 838-4824 (fax)

Millbrook District Office

131 County House Rd, Millbrook
(845) 677-4001 (tel)
(845) 677-4008 (fax)

Public Health Clinics (at the Family Partnership Center)

29 North Hamilton Street, Poughkeepsie
(845) 486-3535

DUTCHESS COUNTY DEPARTMENT OF HEALTH

MISSION AND VISION STATEMENTS

The Dutchess County Department of Health is staffed by a diverse group of dedicated, experienced and motivated professionals whose **Mission** is to protect and promote the health of individuals, families, communities, and the environment of Dutchess County.

Our **Vision** is to build on our tradition of excellence, leadership, and compassion, using the best available science and resources to promote the highest standards of Public Health in response to emerging issues to protect and assist our community.

PUBLIC HEALTH CORE FUNCTIONS

The Dutchess County Department of Health is committed to the core functions of Public Health and strives to deliver the essential services necessary for people to live healthy lives. **The Core Functions of Public Health** are:

1. **Assessment and monitoring of the health** of communities and populations at risk to identify health problems and priorities;
2. **Formulating public policies**, in collaboration with community and government leaders, designed to solve identified local and national health problems and priorities;
3. **Assuring that all populations have access** to appropriate and cost-effective care, including health promotion and disease prevention services, and evaluation of the effectiveness of that care.

THE 10 ESSENTIAL SERVICES OF PUBLIC HEALTH

A Vision for Public Health was released in 1988 by the Institute of Medicine; *the Future of Public Health* (http://www.nap.edu/catalog.php?record_id=1091) identified both the core functions and ten essential services required to address the mission of public health.

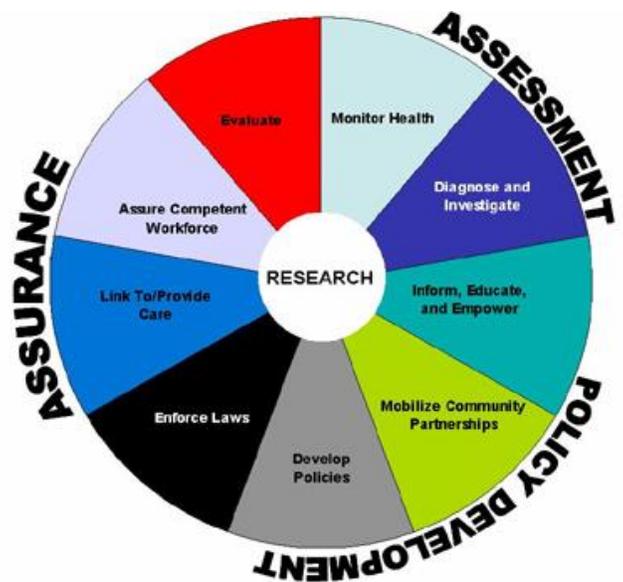
The following text and graphic demonstrate how the ten essential health services align with the three core functions of public health (assessment, policy development, and assurance).

Assessment

1. Monitor health status to identify community health problems
2. Diagnose and investigate health problems and health hazards in the community

Policy Development

3. Inform, educate, and empower people about health issues
4. Mobilize community partnerships to identify and solve health problems
5. Develop policies and plans that support individual and community health efforts



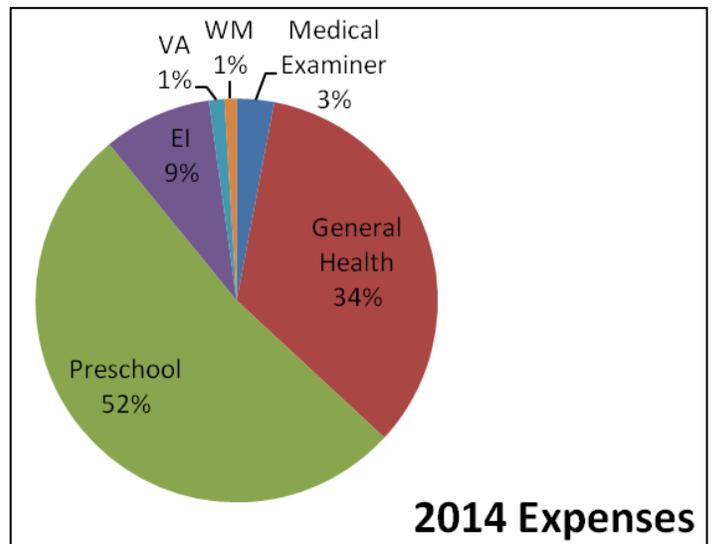
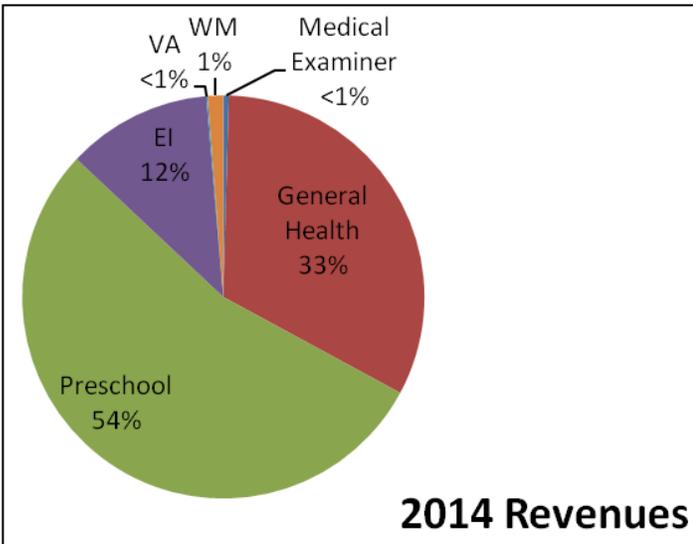
Assurance

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 services when otherwise unavailable
8. Assure a competent public and personal health workforce
9. Evaluate the effectiveness, accessibility, and quality of personal and population-based health services
10. Conduct research for new insights and innovative solutions to health problems

FISCAL INFORMATION

Revenue	2014	2013
Medical Examiner	64,353	14,483
General Health	4,733,187	5,032,224
EI*	1,700,173	2,359,331
Preschool**	7,890,826	8,642,598
VA	17,629	18,222
WM	180,411	319,124
CHHA	-	-
Physically Handicap	-	-
Total	14,586,580	16,385,982

Expenses	2014	2013
Medical Examiner	958,917	974,960
General Health	10,853,688	10,622,981
Preschool	16,724,383	16,246,395
EI	2,789,527	2,830,181
VA	394,704	375,146
WM	311,500	308,149
CHHA	-	-
Physically Handicap	-	-
Total	32,032,720	31,357,812



* EI reimbursement from the Bureau of Early Intervention (BEI) is 49% of all County money spent. Third party insurance is now paying more of their share.

** Preschool reimbursement from State Education Department (SED) is 59.5% of all County money spent. We are still awaiting full reimbursement for previous years.

ENVIRONMENTAL HEALTH SERVICES

The Environmental Health Services Division's core programs focus on providing the community with safe and healthy residential, working, and recreational environments. This includes ensuring public drinking water systems meet legal mandates and standards, private wells and septic systems are properly designed and constructed, the water we swim in is safe and lifeguards properly trained, our camps and educational campuses are safe, and our restaurants prepare, refrigerate, store and serve food according to standards designed to prevent the outbreak of disease. The Division also ensures potential exposures to the rabies virus are investigated and evaluated so that prompt and effective treatment is authorized when appropriate in the event of an animal attack.

SUMMARY OF 2014 ACTIVITIES

Category	Activity	Total
Public Water Supply Monitoring	Public Water Supplies visited	1125
	Inspections done	274
	Violations issued	197
	Spills reported	314
	Spills investigated	314
Engineering	Plans received	660
	Plans approved	168
Coordination with Municipalities	Private well test reports posted	224
	Letters sent to homeowners re: water quality issues	175
Community Sanitation	Camps and recreational facilities inspected	775
	Critical violations found at camps/recreation facilities	53
	Temporary residences inspected	238
	Critical violations found at temporary residences	13
Rabies Clinics	Department rabies clinics	3
	Pets vaccinated at Department clinics	647
Food Safety Trainings	Food Safety Trainings	8
Drowning Prevention	Drowning Prevention Seminars	16
	Attendees	295

PUBLIC WATER SUPPLIES

The Division currently regulates 664 public water supplies. One-third of the population of Dutchess County relies on public water. The larger community supplies, which include the City of Beacon, the City and Town of Poughkeepsie and 203 others, are regulated by the Division's Engineering Section. Another 14 supplies are inspected by Public Health Sanitarians, and the remaining 447 are monitored by the Division's Water Enhancement Program staff.

In 2014, the Division instituted a Public Water Supply Permit program to more efficiently track and monitor public water supplies in the county.

The Division updated the Water Quality Monitoring and Assessment webpage with the Trend Report on MTBE in Public Water Supplies in the County and new educational documents for public water supply customers. The Department website also added four new Frequently Asked Question documents addressing common concerns related to Boil Water Notices, Copper, Lead and Radium. The MTBE report shows that MTBE maximum contaminant level concentration declined by 98% throughout the past decade and no new public water supplies have been found to have MTBE contamination since 2005.

In 2014, the Poughkeepsie Water Treatment Facility obtained approval for upgrades to its water treatment system to reduce levels of disinfection byproducts produced in the finished water distribution. The approval was through a coordinated review with the Dutchess County Department of Health and New York State Department of Health. The system modifications will be completed in the spring of 2016.

The Division continues to work with the New York State Department of Health (NYSDOH) and the New York State Department of Environmental Conservation (NYSDEC) to find a viable and affordable option for the treatment of radium at small public water supplies.

SPILL REPORTS

In 2014, the Division investigated 314 Spill Reports from the NYSDEC. These reports are complaints or reports submitted to the NYSDEC from the public. The Division is notified of the complaint or spill before the NYSDEC has investigated the potential contamination for environmental impact. In an effort to be proactive, the Division investigates whether any public water supply in proximity to the area of the reported contamination has been impacted. If yes, staff can assess the need for additional testing. This allows DCDOH to identify any potential contamination risk as soon as possible.

FOODBORNE ILLNESS INVESTIGATIONS

In 2014, the Division investigated several foodborne illness outbreaks at various locations such as schools, daycare facilities, and camps. An outbreak investigation of *Clostridium perfringens* illness on a college campus led to a modification in the way the facility monitors and provides food for family-style meals served to the students.

DROWNING PREVENTION

In 2014, 16 drowning prevention training seminars were conducted for a total of 295 people at locations throughout the County.

RABIES EXPOSURE PROGRAM

This program is increasingly demanding due to greater numbers of unlicensed and unvaccinated dogs, and more numerous reports of bats in houses. In 2014, there were 756 rabies investigations performed, a 5% increase from 2013 and a 29% increase from 2012. In addition, 38% more specimens were submitted to the New York State Wadsworth Laboratory for testing, resulting in 13 positive rabies specimens including four big brown bats, five raccoons, and four foxes. Sixty-one post-exposures required treatment, up from 43 in 2013.

Enhanced rabies awareness and pet vaccination opportunities included:

- Free Rabies Vaccination Clinics: During 2014, 647 pets were vaccinated at no cost to Dutchess County residents. Dutchess County SPCA was selected through bid process and awarded the contract to administer vaccine at the DCDOH sponsored rabies vaccination clinics with a minimum of three clinics held per year.
- Bat-Proof Poster Display: This poster was displayed at three home/health fairs and demonstrates the proper method of installing/sealing window air conditioners to reduce the number of bats entering homes.



PUBLIC HEALTH NURSING

The Public Health Nursing Division works collaboratively with healthcare providers, other county departments, and community-based agencies to implement strategies to improve the health of families and children in our community. Public health programs focus on maternal child health, children with special health care needs, childhood lead poisoning, and chronic disease prevention.

SUMMARY OF 2014 ACTIVITIES

Category	Sub-Category	Activity	Total
Child Health, Children with Special Health Care Needs (CSHCN), Maternal Infant Health	Health Assessments, Health Education, Referral Services to Pregnant Women, Families, and At-Risk Children 0-21 yrs.	Individuals served year-to-date	372
		Referrals (intake)	510
		Admissions into program	310
		Health assessments	602
		CSHCN consultations	68
	Group and Community-based Education Programs	Events	16
		Participants	34
Childhood Lead Poisoning	Elevated Blood Lead Levels	New cases 5-9 µg/dl	85
		New cases 10-14 µg/dl	12
		New cases ≥ 15 µg/dl	11
	Group and Community-based Education Programs	Events (Professional Groups)	3
		Events (Public)	123
Chronic Disease	Presentations and Outreach Events	Events (Professional Groups)	7
		Events (Public)	11
Public Health Emergency Preparedness	Training and Drills	Staff who completed a training	127
		Emergency Preparedness Drills	5
	Emergency Response Plans	Plans written	9
		Plans reviewed	7
	Medical Reserve Corp Recruitment	MRC volunteers recruited	12

MATERNAL CHILD HEALTH

In 2014, the Division received 510 referrals from hospitals, healthcare providers, and children's services agencies for Public Health Nursing Home Visiting Services. Nursing staff conducted 602 home visits for 372 high-risk pregnant and parenting women, infants and children, providing New York State Department of Health mandated services such as health and nutritional assessments, health education and counseling, assistance with access to health and dental insurance programs, and referrals to primary and specialty healthcare providers and community agencies.

The Division maintains active partnerships with local hospitals, healthcare providers and community-based organizations that promote family and child health, and provides educational programs for a variety of community agencies and partners. In 2014, nursing staff provided outreach and education regarding various maternal child health topics, access to care, and

injury prevention including, shaken baby syndrome, safe sleep practices, childhood poisoning prevention at more than 120 public and professional group events.

2014 ACHIEVEMENTS

- Collaborated with community partners to sponsor a Baby Safe Haven Training Seminar for more than 70 participants from community-based agencies and the public to inform about existing programs and resources that can prevent infant abandonment and potential death.
- Collaborated with the American Red Cross to sponsor a successful blood drive at the Beacon Community Health Center.
- Awarded a \$25,000 grant from the National Association of City and County Health Officials (NACCHO) for breastfeeding support and education to expand breastfeeding services in home visit and clinic programs.
- Awarded a \$1,800 “Million Hearts” Grant from the Association of State and Territorial Health Officials (ASTHO) to support collaboration between the Department and Hudson River Health Care (HRHC) for implementing a home blood pressure monitoring program. Together, nursing staff and biostatisticians developed a participant form and a survey to define best methods to provide patient education and identify perceived barriers to home self-monitoring. A total of 126 patients were enrolled in the program, and these tools were replicated by two other counties. In collaboration with Hudson River Health Care (HRHC), Public Health Nurses developed a four-module educational program to promote healthy lifestyles for patients with hypertension. The work on this program is featured on the Association of Public Health Nurses website under [Million Hearts Stories](#).

LEAD POISONING PREVENTION PROGRAM

This program is a collaborative effort between the Public Health Nursing and Environmental Health Divisions. Nursing staff provide case management for children with lead poisoning and Environmental staff inspect homes and properties in which children with lead poisoning live and play to evaluate for lead hazards.

Case management (Nursing Division):

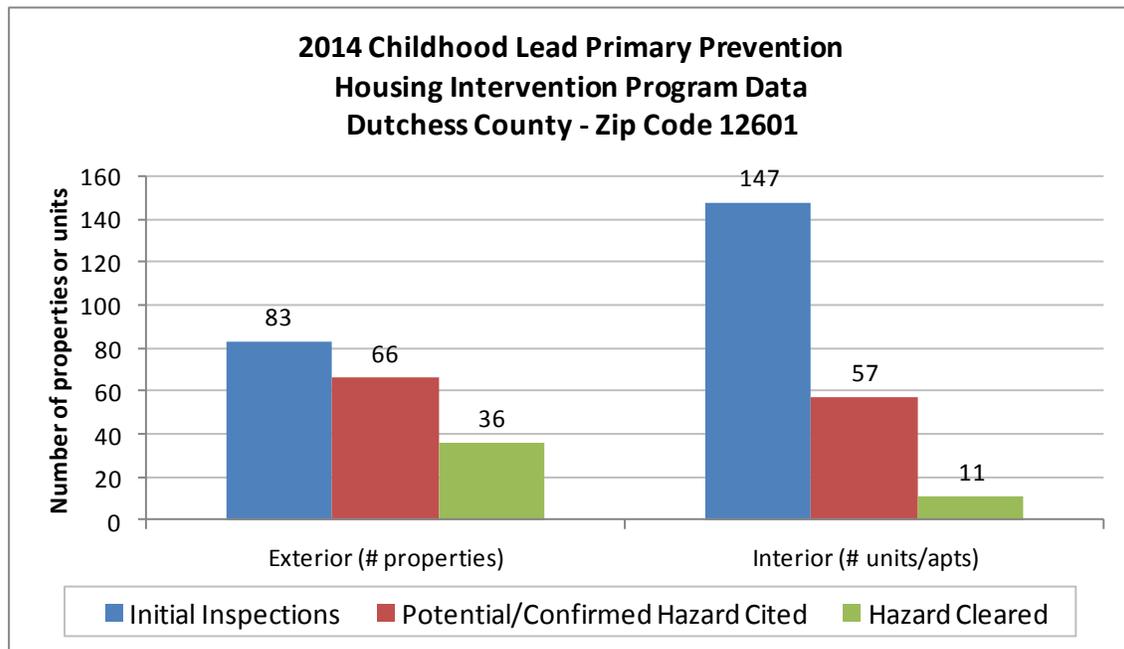
In 2014, nursing staff evaluated 108 children with newly diagnosed elevated lead blood levels, of which 23 required continued monitoring, case management, nutrition education and counseling, and lead poisoning risk reduction education. In addition, the Division provides continuous surveillance of children screened for lead poisoning through the NYSDOH LeadTrak database. In 2014, 75 notification letters were sent to parents advising repeat screening and pediatric follow up for children with elevated lead levels of 5-9 mcg/d. These blood lead levels, although not yet critical, require intervention and monitoring. Public Health Nurses also provide lead poisoning prevention education, technical support, and referrals to the Regional Lead Poisoning Resource Center for healthcare providers, WIC nutrition programs, school nurses,

and parents of children with lead poisoning. Nine outreach events were conducted to disseminate information to the public regarding childhood lead poisoning prevention.

Housing intervention (Environmental Health Services Division):

Primary Prevention focuses on the early identification and reduction of lead hazards to prevent childhood lead poisoning. The Dutchess County Department of Health partners with the City of Poughkeepsie to evaluate for lead hazards in homes within the 12601 zip code, an area identified by the NYSDOH as having the highest incidence of childhood lead poisoning in Dutchess County. Properties are selected for inspection based on a number of factors, including age of the building, presence of children, and referrals from local agencies who work with the Department’s Public Health Nursing staff.

In 2014, 83 property exteriors and 147 individual units/apartments were inspected for the presence of lead, with 92 children in residence. Confirmed or potential exterior hazards were identified in 80% of properties, while 39% of all interior apartments/units had confirmed or potential lead paint hazards. Fifty-five percent of exterior hazards and 19% of interior hazards identified in 2014 were remediated and cleared as of April 2015. While the greatest risk of lead exposure to a child is indoors, exposure risks are also present outside the premises, particularly during the spring and summer months.



Summary Table: Properties/Units Receiving an Initial Inspection in 2014

Exterior Property Inspections	Value
Initial Exterior Inspection	83
Confirmed Or Potential Exterior Lead Paint Hazard	66
Potential Exterior Lead Paint Hazard (% of those inspected)	80%
2014 Exterior Violations Cleared as of 4/2015	36
2014 Exterior Violations Cleared as of 4/2015 (%)	55%
Interior Unit Inspections	
Initial interior inspection	147
Confirmed Or Potential Interior Lead Paint Hazard	57
Confirmed Or Potential Exterior Lead Paint Hazard (% of those inspected)	39%
2014 Interior Violations Cleared as of 4/2015	11
2014 Interior Violations Cleared as of 4/2015 (%)	19%

CHILDREN WITH SPECIAL HEALTH CARE NEEDS

This program provides information, education, and referrals for families of children with special health care needs. The program is designed to improve access to support agencies, health care and services, provide financial assistance, and facilitate linkages to insurance coverage and medical homes. In 2014, the Children with Special Health Care Needs Program serviced 53 families, with 12 families receiving financial assistance for physical handicap services.

NYSDOH NEWBORN METABOLIC SCREENING PROGRAM

Under this program, Public Health Nurses provide tracking and follow-up of infants referred by NYSDOH for comprehensive metabolic disease screening. In 2014, the Department handled 15 such referrals.

INJURY PREVENTION FROM VIOLENCE

In July 2014, the Dutchess County Department of Health joined the newly formed Dutchess County Human Trafficking Prevention Coalition led by the Center for the Prevention of Child Abuse. Human trafficking is a human rights violation in the form of sex trafficking, forced labor, and domestic servitude that has devastating effects on the health and safety of children, adults, families, and our community. The purpose of the coalition is to raise public awareness of human trafficking and to build a community response toward developing resources to identify and assist victims to gain freedom and rebuild their lives. In December, Department staff attended the first community awareness event hosted at the Wallace Center in Hyde Park by the Dutchess County Human Trafficking Prevention Coalition. The Department will continue to work with the coalition to promote ongoing community public awareness and training events planned for 2015 to address this important public health issue.

COMMUNICABLE DISEASE CONTROL DIVISION (CDKD)

The Communicable Disease Control Division conducts surveillance for sexually transmitted and other contagious diseases, monitors and investigates disease outbreaks, oversees tuberculosis and arthropod-borne disease control, and establishes educational programs for healthcare providers and other community partners to enhance and promote science-based treatment outcomes and prevent the spread of disease. The Division also oversees the Public Health Diagnostic and Treatment Center, providing Immunization Clinics for vaccine preventable diseases, screening and treatment for sexually transmitted diseases, travel immunizations, and tuberculosis control and treatment.

SUMMARY OF 2014 ACTIVITIES

Category	Sub-Category	Activity	Amount	
STD, HIV, TB, HCV	Clinic Visits and Screenings	HIV, STDs, TB, or HCV Clinic Visits	2422	
		HIV/STD screenings (Article 28)	1916	
		Tuberculosis screenings (Article 28)	377	
	Lab Reports and Case Investigations	HIV lab reports received	HIV lab reports received	94
			- HIV reports investigated	91
			- Newly identified people infected with HIV	30
		Other STD lab reports received	Other STD lab reports received	1559
			- Other STD reports investigated	1456
			- Newly identified people infected with other STDs	991
		Tuberculosis lab reports received	Tuberculosis lab reports received	148
			- TB reports investigated	148
			- Newly identified people with active TB disease	8
			- Total with active TB disease (monthly average)	2.5
			- Newly identified people with latent TB infection	39
			- Latent TB infection (monthly average)	20.25
			Hepatitis C lab reports received	4550
		Hepatitis C reports investigated	- Hepatitis C reports investigated	2232
			- Newly identified people infected with Hep C	1699
	Education and Technical Assistance		Education sessions provided to medical providers	2
		Education sessions provided to the general public	2	
		Technical assistance calls/visits with medical providers	8	

In 2014, the Department satisfied all New York State mandates and requirements under Article 28 for the Department's clinics, receiving a NYSDOH Limited Service laboratory Certificate (PFI #P968) and a Certificate of Need (NYSDOH CON #131221). The first anniversary of the newly appointed clinic was celebrated at the Family Partnership Building on October 31 with the clinic now receiving walk-in patients as well as patients by appointment resulting in 2,422 visits in 2014.

RESPONSE TO COMMUNICABLE DISEASE OUTBREAKS

The Communicable Disease Control Division worked closely with the Environmental Health Services Division during a Norovirus outbreak in a school district affecting more than 350 individuals within a six-week period. Division staff monitored the outbreak, provided communication recommendations to parents and staff, and implemented appropriate clinical and environmental mitigation efforts. During the last quarter of 2014, the Division worked closely with Emergency Preparedness staff, local hospitals, and Emergency Medical Services in response to the Ebola threat. The Division's responsibilities included creating and updating communicable disease protocols, overseeing drills at the Department clinics, providing training seminars to healthcare providers, faith-based organizations and other community members, and monitoring individuals returning from Ebola-endemic countries.

SEXUALLY TRANSMITTED DISEASE PROGRAM

In 2014, a total of 1,492 sexually transmitted disease (STD) infections were reported in Dutchess County in the Electronic Clinical Laboratory System. Nearly 68% (1003 cases) of these confirmed or new cases (1003) were chlamydia (831), gonorrhea (128) and syphilis (44). One case of congenital syphilis was also reported, the second in two consecutive years. Chlamydia remains the most reported sexually transmitted disease with females accounting for 70% of the cases. The highest rates of chlamydia and gonorrhea are in individuals aged 15-29 years and among non-Hispanic Blacks. Most (90%) of the 20 cases of early syphilis cases reported were males. Outreach efforts specifically targeting obstetrics, gynecology, and pediatric practitioners has been instituted to educate providers about syphilis and its diagnosis.

New York State Department of Health funding was awarded to increase screening compliance for STDs and HIV in pediatric practices within the county. The "Carry It Forward" initiative provided an opportunity to access pediatric practices in order to educate providers and encourage compliance with the recent HIV screening law. The law applies to individuals 13 years of age and older, and includes routine screening for chlamydia which most prevalent among young people aged 15-19. A total of 70 healthcare providers at nine different practice sites were equipped with the knowledge and screening tools to implement the program at a provider workshop held in March. The program was successful in identifying barriers to screening, with more than 140 adolescents screened, and helped pediatricians feel more comfortable testing youth without a parent present. Screening also provided an opportunity to privately discuss other harmful issues and behaviors such as substance abuse, smoking, depression, suicide, and bullying. The caveat is the parent is involved in the conversation only if the adolescent wishes it.

TUBERCULOSIS CONTROL PROGRAM

In 2014, 377 individuals were screened for tuberculosis disease through the Department's Article 28 Adult Screening Clinic. The Latent Tuberculosis Infection program conducted 275 patient visits to manage the nine month treatment regimen required to prevent conversion to active disease in 22 skin test positive patients. Five active TB cases were identified, with four being foreign-born. Contact investigations were conducted in all active cases. A total of 38 contacts were solicited and screened. Three persons were identified as having latent tuberculosis infection; two of the three chose to be treated.

VACCINE PREVENTABLE DISEASE CONTROL

The prompt investigation of vaccine preventable diseases such as measles, pertussis, and mumps remains a priority. In 2014, 160 doses of Tdap vaccine were provided to the Children's Medical Group to be administered to uninsured parents of newborn infants, thus protecting the most vulnerable from pertussis. Sixty doses were administered in 2014.

VACCINE PREVENTABLE DISEASE ACTIVITIES - 2014

Category	Subcategory	Activity	Amount	
Vaccine Preventable Diseases	Vaccinations	Individuals ages 19+ yrs receiving vaccine at DOH clinic	717	
		Children ages 0-18 yrs receiving vaccine at DOH clinic	350	
		19-36 month olds seen in DOH clinic who are fully immunized by 19 months (percent average)	43.7%	
		Vaccine outreach clinics in high-risk populations	6	
		High-risk individuals vaccinated at outreach clinics	55	
	Lab Reports and Case Investigations	Lab reports of vaccine preventable diseases received	- Vaccine Preventable Disease (VPD) reports investigated	1182
			- Newly identified people infected with VPDs	733
				422
	Education and Technical Assistance	Education sessions provided to medical providers		33
			Education sessions provided to general public	19
			Technical assistance calls/visits with medical providers	123

FLU CLINICS

Flu vaccine was provided to uninsured persons at several venues, including: A mobile medical van providing free healthcare services and screenings to uninsured residents of Northern Dutchess County; At "Kinship Group" meetings sponsored by Catholic Charities for Latino families in Dover and Amenia; and the Dutchess County Senior Friendship Centers in the Town of Poughkeepsie and the City of Beacon. In addition, flu vaccine was administered in December to 27 individuals at the Family Partnership Center who seeking dinner meals at the Lunch Box and overnight shelter through Hudson River Housing. Personal hygiene kits were also distributed to participants through the generous donations of Dutchess County employees and the Rite Aid stores in Poughkeepsie.

ARTHROPOD-BORNE INFECTIONS

In 2014, arthropod-borne disease surveillance and prevention remained a major focus of the CDCD staff effort. A total of 4,851 reports for arthropod-borne diseases were received, of which 3,757 were investigated with 606 confirmed and newly identified cases.

In 2014, eight cases of Chikungunya fever were reported in Dutchess County with two confirmed as positive, both cases were acquired through recent travel to known endemic areas. There were no cases of Dengue fever reported.

EDUCATION & OUTREACH

In 2014, a total of 33 education sessions were provided to medical providers and 19 sessions were conducted for the general public. Division staff made 123 technical assistance calls and/or visits to medical providers. Events included:

- Partnership with Vassar Brothers Medical Center to provide guest lecturers for two STD topic Grand Round activities at the Center. Dr. Marguerite Urban addressed expedited partner therapy for contacts to persons with Chlamydia on April 10th. Dr. William Bonnez discussed the provider's role in improving HPV vaccine distribution on April 16th.
- On April 25th, Mary Richard, Community Health Nurse, presented an infectious disease review of emerging diseases such as MRSA and novel influenza for 60 Mental Health America Staff.
- On May 14th, Bryon Backenson from NYSDOH discussed new findings and recommendations for the diagnosis and treatment of Lyme Myocarditis during Vassar Brothers Medical Center Internist's Grand Rounds.
- On April 30th, at the AARRMS (STD) Coalition Meeting, a speaker from Gilead Pharmaceuticals provided an update regarding the significant treatment advances for people infected with Hepatitis C. Barbara Zelig, SPHN and DCDOH immunization coordinator, shared information about the disappointing uptake of HPV vaccine and the important role providers need to play in improving vaccine distribution. Information about the "For Reel initiative," a grant-funded promotion to screen adolescents for Chlamydia was also discussed.
- On May 21, the Legislative Tick Task Force sponsored a public Forum at the Pleasant Valley Firehouse with more than 160 Dutchess County Residents in attendance. Speakers included Andrew Rotans, MPH, SPHA, Dutchess County Department of Health; Brian Fallon, M.D., M.P.H., Professor of Clinical Psychiatry Director at the Lyme and Tick-Borne Diseases Research Center at Columbia University; Dr. Richard Ostfeld from the Carey Institute of Ecosystem Studies; and Jill Auerbach, Patient Advocate for the Hudson Valley Lyme Disease Association.
- Division Staff were also invited to present tick-borne and mosquito-borne diseases and the HPV vaccine education at Dutchess County Medical Society hosted dinner events.

EARLY INTERVENTION AND PRESCHOOL SPECIAL EDUCATION

The **Early Intervention (EI) Program** aims to enhance the development of infants and toddlers from birth up to age three who have significant delays or disabilities, and to strengthen the capacity of families to meet their child's special needs. Program components include service coordination, multidisciplinary evaluations, and the development of Individualized Family Service Plans (IFSPs) for eligible children and their families. Services may include family training, counseling, home visits, parent support groups, special instruction, speech pathology, audiology, occupational therapy, and physical therapy. The program also provides psychological services, service coordination, nursing services, nutrition services, social work services, vision services, respite services, and assistive technology devices and services.

In 2014, 701 children aged 0-3 were referred for early intervention evaluation and 341 found to be eligible for services, with 95% receiving services within 30 days.

The Early Intervention Program saw an increase in delay in services in the 2nd quarter due to a sudden attrition of Occupational Therapists and Physical Therapists moving out of the program or into center-based services. Staff continues to work with local services agencies to recruit therapists in these areas.

The Preschool Special Education Program (PSE) serves children aged three to five. Part B of the Federal Individuals with Disabilities Education Act, and Section 4410 of the New York State Education Law, entitles a preschooler (3-5 years of age) with disabilities to receive appropriate educational opportunities. This includes special programs and services as agreed upon with their respective school district's Committee on Preschool Special Education (CPSE).

In Dutchess County, the Department of Health is responsible for contracting with qualified and licensed professionals for specific related services such as physical therapy, speech therapy, occupational therapy, counseling, assistive technology, and social work. These services are prescribed on a child's Individualized Education Plan/Program (IEP) written with the parent and CPSE members. Services may be provided at an approved or licensed pre-kindergarten or Head Start program, at the provider's facility, the child's home, a hospital, a State facility, or another childcare location. Parents also attend the service sessions to learn techniques to support their child's development. Busing is provided for families whose children are enrolled in a full day center-based program and are unable to supply their own transportation.

In 2014, the Preschool Special Education Program received **969** referrals for evaluation from the **16** local area school districts and provided services to **1,255** Dutchess County children ages 3-5 with an expenditure of **\$16,724,383**.

As we see an increased number of students entering the program with greater needs, we are working with our contract agencies to expand their full day center-based classrooms. Our goal is to ensure that appropriate services are available for all our preschool special education students needing full day placement, to assist them in being better prepared for Kindergarten.

2014 SUMMARY OF EIP/PSE ACTIVITIES

Category	Activity	Total
Early Intervention	Children 0-3 yrs referred for evaluation	701
	Children 0-3 yrs eligible	341
	Children 0-3 yrs that did not receive services within 30 days of evaluation	37
	Children 0-3 yrs that received services within 30 days of evaluation (%)	95%
Pre-School	Children 3-5 yrs referred for evaluation	969
	Children 3-5 yrs eligible	882
	Children 3-5 years eligible for services after evaluation (%)	91%
	Eligible children 3-5 years receiving services (Average)	1255
	Children 3-5 yrs with developmental delays (Average)	1255

2014 HIGHLIGHTS

The Program Coordinator presented information to local pediatricians about the referral process for Early Intervention and Preschool Special Education at the Vassar Brothers Medical Center monthly Pediatric Division meeting in January 2014.

A new transportation provider was contracted for the Preschool Special Education program in April 2014 and the Department received positive feedback from the preschool programs and families regarding the significant improvement in the quality of service provided.

One of the families from the Early Intervention Program participated in a video for the County Executive's "State of the County Address" sharing their daughter's positive experiences in the program.

The Program Coordinator was appointed to the Dutchess County Youth Board by the County Executive in July 2014, as well as appointed to the Mid-Hudson Infant and Toddler Coalition Steering Committee in October 2014, and participated in the County Executive's "Dutchess Dialogue" in December 2014.

Program staff participated in the Special Needs Picnic organized in August 2014 by the Office of the Aging which many of our early intervention and preschool families attend.

PUBLIC HEALTH EMERGENCY PREPAREDNESS

The Public Health Emergency Preparedness Program, supported by a NYSDOH grant, provides oversight and planning for a coordinated and effective response to any public health emergency requiring the activation of County employees and other emergency measures. This mandated program is newly designated a “core” public health service to reflect the Department’s active role in ensuring the community is adequately prepared to respond to emergencies.

Dutchess County is now designated a “City Readiness Initiative (CRI)” jurisdiction by the Federal Government for Emergency Preparedness. The Centers for Disease Control and Preparedness’ Cities Readiness Initiative (CRI) is a federally-funded program designed to enhance preparedness in the nation’s largest cities and metropolitan statistical areas. The program was originally established in 2004 with 21 cities selected based on criteria such as population and potential vulnerability to a bioterrorism threat. Through CRI, state and large metropolitan public health departments have developed plans to quickly receive and distribute medicine and medical supplies from the Strategic National Stockpile (SNS) to local communities following a large-scale public health emergency. For Dutchess County, the CRI designation means a higher level of participation, and increased deliverables in emergency planning, as well as an annual review of our plans by the State/Federal Government to ensure the Department and County meets the required standards, with \$60,000 a year in additional funding provided. The program was implemented in July, and in September a full-time dedicated Emergency Preparedness Coordinator was hired to head the Program.



Our Public Health Emergency Preparedness effort continues to focus on refining the County’s All-Hazards Response Plan to address all types of emergencies. One such plan delineates the processes and procedures for selecting, equipping, staffing, and operating an Alternate Care Site (ACS), Community Triage Point (CTP), or Community-based Care Center (CBCC) within Dutchess County. In May 2014, in partnership with the Department of Emergency Response, Department staff completed a full-scale Alternate Care Site (ACS) exercise and training, the first such exercise in New York State, to test the County’s ability to respond to a public health emergency when area hospitals reach surge-capacity. The exercise included module training of the medical care plan and clinical care protocols for DOH staff and Medical Reserve Corps (MRC)

members and activation of the Dutchess County Emergency Operations Center (EOC), followed by set up, operations, and demobilization of the ACS.

In 2014, Department's Emergency Response Plan and Annexes were revised and updated. In October, the Department participated in a State mandated County Emergency Preparedness Assessment (CEPA) exercise to review of our capabilities and areas for improvement for disaster response.

During the 4th Quarter of 2014, the Emergency Preparedness Coordinator together with the Communicable Disease Control Division and Emergency Response staff coordinated the Ebola Response as per State and Federal guidelines and mandates. This collaborative and inclusive team effort included all three local hospitals, local and regional Emergency Medical Services (EMS) agencies, and the Dutchess County Medical Reserve Corps. Ebola 101 training was provided to Department staff as well as 300 first responders from EMS, fire, and law agencies. The team collaborated in the development of an EMS response plan which was adopted by the Hudson Valley Regional Emergency Medical Services Council (HVREMS).

Dutchess County has been an active participant in the NY/NJ/CT/PA Regional Catastrophic Planning Team since its inception in 2009. Medical Examiner staff attended the 5th Annual NYC Regional Mass Fatality Management Exercise held in Brooklyn, New York in June 2014.

AFFILIATED PROGRAM ACTIVITIES

Medical Reserve Corps (Volunteer Emergency Preparedness Workforce)

- Participated in 16 emergency response and public health training/drill sessions with 231 volunteers receiving more than 560 hours of training and education.
- MRC Volunteers provided support through their participation in a high-risk population flu clinic, a health screening, a sheltering operation with the American Red Cross, two Ebola drills at area hospitals, and ten first aid/emergency preparedness stations at senior picnics. Sixty-six volunteers staffed these events providing 217.75 hours of service to Dutchess County.

Public Access Defibrillation (PAD) Program

- Twenty-three county buildings are designated as PAD sites with Automated External Defibrillators (AED) and trained staff to respond to cardiac arrest incidents. Fifty-five AED drills were conducted.
- Twenty-nine CPR Training Sessions were conducted with 115 staff trained, and 46 Department of Public Works staff attended HeartSaver First Aid classes.
- In addition to the Sheriff's Office and Department of Emergency Response trained staff, the County has 240 employees CPR/AED certified.

HEALTH PLANNING AND EDUCATION DIVISION

The Health Planning and Education Division (HP&E) impacts every Division in the Department. Staff is responsible for the development and implementation of health initiatives, the dissemination of public health materials, updating, creating and maintaining the Department's webpages, monitoring the health of the County through ongoing data analysis and report writing, and driving the strategic planning process.

REPORTS

Reports providing health-related snapshots of the County include the Annual Morbidity Report, the Veteran's Newsletter, the Annual Community Health Status Report Card, and the biannual Veterinarian's Newsletter. All reports are available on the [DCDOH website](#).

In 2014, the Division collaborated with Environmental Health Services staff to produce a methyl tertiary butyl ether ([MTBE trend report](#)), which provides an overview of MTBE trends in Dutchess County throughout the past decade.

In 2014, the Department actively participated in the Delivery System Reform Incentive Payments (DSRIP) planning grants efforts. The purpose is to restructure the healthcare delivery system by reinvesting in the Medicaid program, with the primary goal of reducing avoidable hospital use by 25% within a five year period. Division staff provided technical assistance in support of the health assessment activities for Westchester Medical Center and Montefiore.

COMMUNICATIONS AND PUBLIC HEALTH INFORMATION

The Division develops and maintains resources for ongoing and new health-related campaigns and initiatives (e.g. posters, web-based materials, etc) and oversees the Department's website team responsible for website maintenance and updates. In 2014, the Division:

- Distributed 41 News Releases, and 9 Public Health Alerts/Advisories.
- Maintained 1,600 web pages which received 1.4 million hits in 2014, for an average of 133,000 hits monthly.
- Worked with Divisions to update and expand their webpages, including Environment Health Services, Medical Examiner's Office, Veterans, and Weights and Measures.
- Generated new webpages in response to current healthcare concerns in the community, including "Preventing Substance Abuse: A Drug Crisis" and "Healthy Living and Chronic Disease Management."
- Responded to 30 requests from the media and 315 requests for information from the public through the Dutchess Direct web application.
- Developed and tested surveys for Early Intervention and Preschool clients to be distributed in 2015. These surveys will evaluate client satisfaction, program staff

responsiveness, and the extent to which key services provided meet needs of more than 1200 eligible children less than age of 5.

- Promotion of the NACo Prescription Drug Discount Card, which is available at no cost to residents who need assistance with prescriptions. More than 220 individuals participated in 2014 with an average savings of \$25 per prescription filled.

COMMUNITY EDUCATION AND OUTREACH

The Nutrition/Diabetes and Physical Activity programs are offered to healthcare professionals, schools, seniors, and community residents to increase awareness and promote healthier lifestyle choices. Fifty-one programs including “*Know Your Numbers*,” “*Healthy Eating Portion Distortions*,” “*Childhood Obesity*,” and “*Stanford Chronic Disease Self Management*” programs were conducted throughout the year, serving 58 youth and 812 adults and seniors.

Additionally, *Diabetes Sunday*, *Go Red Sunday*, and *the Power to Prevent Stroke Sunday* are five minute educational awareness programs were offered to faith-based congregants on 12 occasions with 2,276 individuals benefiting from these programs.

The Great Halloween Candy Exchange Program’s goal is to help reduce the obesity epidemic in children and promote healthier choices. The Department along with Fishkill All Sport, Children’s Medical group, Learning Insights, the Literacy Connection, and All Access Dental held their 9th annual event where children donated their candy in exchange for books, fun activity passes, bowling, and ice skating. Approximately 1,340 pounds of candy was shipped to military personnel on a USS aircraft carrier in the middle of the Indian Ocean and to troops in Afghanistan.

COMMUNITY HEALTH IMPROVEMENT PLAN (CHIP)

The Dutchess County 2013-2017 CHIP was launched in April at the Henry A. Wallace Center. The plan consists of a comprehensive four year initiative developed in collaboration with local community partners to address top health priorities and promote activities to address those concerns. The event was attended by the State Health Commissioner, County Executive and other elected officials. More than 150 local partners from business, healthcare, education, and other sectors pledged to “Make Dutchess the Healthiest County in the State” by 2017. The County currently ranks 11th for overall health outcomes and 9th for overall health factors in New York State. The Community Health Assessment and the Community Health Improvement Plan are posted on the website at:

<http://www.co.dutchess.ny.us/CountyGov/Departments/Health/HDindexpub.htm>



Dutchess County Executive Marcus J. Molinaro and New York State Commissioner of Health Nirav R. Shah MD, MPH join Dr. Kari Reiber, Dutchess County Commissioner of Health in signing the Declaration of Wellness for Dutchess County at an event on April 8 2014 at the Wallace Center, Hyde Park.

CHIP FOCUS AREA: Chronic Disease/Obesity Prevention

- The Chronic Disease Prevention Team partnered with the Board of Health to host a School Wellness Committee summit to assist local schools in the fight against childhood obesity.
- The Team also provided 29 nutrition and diabetes management educational presentations to 1,200 participants throughout the county, in city centers as well as the towns of Pine Plains, Rhinebeck, Red Hook, Tivoli, Clinton, Dover, Stanford, Amenia, Millerton, Beekman, and Millbrook.
- The Team partnered with the Hudson Valley Farm-to-School program, a school-based program that encourages the use of fresh, local farm produce in cafeterias, as well as offering classroom-based cooking classes along with nutrition and food system education such as hands-on learning through gardening. More than 400 students participated in a pilot study designed to gauge their base knowledge and measured changes in attitudes following the Chef-in-the-Classroom services. Cafeteria taste tests were compared with similar tests at non-participating schools. This served to assess the impact of the program on the student's willingness to try the featured vegetable dish and determine whether or not students liked the vegetable. More than 90% of students tried the vegetable dish prepared in each class, and the majority of students reported they would try the featured vegetable again. This pilot study provides preliminary evidence of predominantly favorable reactions to the Chef-in-the-Classroom experience. The school-wide taste tests generated an outcome assessment report which will enable the program to enhance and define its next steps.

CHIP FOCUS AREA: Tick-borne Disease Prevention

- A tick identification service program was instituted for healthcare providers and veterinarians to have ticks identified at the Department to facilitate the initiation of appropriate treatment.
- One thousand Property Management Guide for Tick Bite Prevention brochures were distributed at home and garden retailers throughout the county as well as community day events and home shows.
- A [Tick-Borne Disease survey](#) was developed and distributed to 111 medical providers to assess their knowledge, practices and attitudes regarding the diagnosis and treatment of various tick borne illnesses. These data provide the means to identify gaps and enhance provider education. The survey report will be published in 2015.
- Together with CHIP partners, CDC Division staff, and the Cary Institute, up-to-date, evidenced-based guidance for FAQs regarding environmental and personal protection against tick bites was developed and will be launched in the spring of 2015.
- The Team organized and coordinated a “Be Tick Free!” Poster Contest, along with the Dutchess County Legislative Tick Task Force, for 5th and 6th graders to raise awareness of prevention strategies for tick and mosquito-borne diseases. Two winners each received a \$100 US Savings Bond, an Award Certificate, and a back-pack. The winners were recognized among their peers by the County Executive and other officials at an event at the trailhead in Hyde Park in May. The winning posters were duplicated as part of the Tick Prevention Education Messaging local rail trails, including the National Park Service’s Hyde Park Trail system and the William R. Steinhaus Dutchess Rail Trail.



Fifth grader Nathan Ogden (left) from Faith Christian Academy and sixth grader Tegan Moeller (Right) from Harlem Valley Girl Scouts with their Be Tick Free! posters.

CHIP FOCUS AREA: Substance Abuse Prevention

- The Team continued to serve as a member of the Substance Abuse Workgroup of the Health and Human Services Cabinet and contributed to an updated report on the Committee's activities for the County Executive.
- The Commissioner participated in two County-sponsored Forums on substance abuse, several high school discussion panels, the fall Health Quest quarterly physicians meeting, and numerous grass roots community events, to educate and promote awareness about substance abuse, the addiction epidemic, and its impact on public health.
- The Department was certified by the New York State Department of Health as an Opioid Overdose Prevention Program to provide the opioid antidote nalclex and nalclex training to law enforcement officers, first responders, and community members at risk for witnessing an overdose. From June to December 2014, the program provided nalclex training for 500 individuals and distributed 580 kits. The Department assisted Putnam, Sullivan, and Ulster Counties in providing trainings and setting up their own Prevention Programs, and presented Dutchess County's nalclex program at the October meeting of the New York State Association of County Health Officials.
- A Substance Abuse Communications Team was established with members from the Departments of Health, Aging, and Mental Health and the Council on Addiction Prevention and Education (CAPE) and developed a dedicated substance abuse prevention website.

DEPARTMENTS OF HEALTH (DOH) AND MENTAL HYGIENE (DMH) MERGER INITIATIVE

The Merger Transition Team began working to transition administrative functions and initiate discussions on program integration in view of the pending merger between both Departments. Efforts in 2014 have focused on:

- Transitioning DOH clinic billing to DMH.
- Transitioning the DMH Office for Information Technology (OIT) to the County OCIS Department to facilitate data sharing and standardizing technology between both Departments.
- Customizing the Cerner Electronic Health Record system to develop a DOH Clinics record component.
- Shared staff training: Six DOH staffs were trained to provide Screening, Brief Intervention, and Referral to Treatment (SBIRT) screening services for individuals attending clinic programs; Three DOH staff members received Suicide Prevention training; and One DOH staff became a Mental Health First Aid trainer and will be training other DOH staff in the coming year.

- Assessing current fiscal and administrative functions at each of the two Departments to identify synergies and determine the most efficient structure for a merged Department.

STAFF DEVELOPMENT

Division staff convenes a Staff Development and Training Committee that meets quarterly to review staff development needs, and coordinate and assist with trainings and webinars for related public health programs and initiatives. The Department conducted five in-service trainings and participated in 49 learning webinars. Topics include:

- Blood-borne Pathogen Exposure Control Plan training for internal staff and representatives from 12 County Departments.
- Chronic Disease Prevention and Control including diabetes and hypertension self-management programs.
- Communicable Disease Prevention and Control including HIV and Sexually Transmitted Disease Prevention, Immunizations, and Lyme Disease Prevention.
- Ebola Virus Identification and Response.
- Maternal Child Health topics including Breastfeeding Education and Support.
- Violence and Injury Prevention including Domestic Violence and Human Trafficking Identification as well as Suicide Intervention Skills.

MEDICAL EXAMINER'S OFFICE

The Medical Examiner's Office investigates all sudden, unexpected, violent or suspicious deaths within the County to establish cause and manner of death. The Medical Examiner's investigation includes visits to scenes of death when appropriate, postmortem examinations of the deceased, and court testimony in criminal cases. The Office may also be called upon to collaborate with police investigative agencies in the identification of unknown remains.

In early 2014, the Sexual Assault Forensic Exam (SAFE) nursing program was incorporated into the Division, broadening the scope of forensic investigations to include live victims of violence. Existing SAFE and Forensic Nurse Examiner protocols were revised and updated, and non-clinical training was provided to three new SAFE nurses, which work in partnership with Family Services, Inc. and other community partners.



(Medical Examiner's Office - 168 Washington Street, Poughkeepsie)

POSTMORTEM ACTIVITIES (2004 – 2014)

Annual Medical Examiner Cases											
	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Cases Reported	641	623	700	668	703	760	735	812	770	873	830
Cases Declined	349	318	393	349	372	386	407	465	453	475	510
Cases Accepted	292	305	307	319	331	374	328	347	317	398	320
Autopsies	202	190	202	217	204	207	200	220	176	247	224
External Exams	38	53	41	29	45	63	39	49	54	57	15
Certifications	45	56	54	53	66	82	70	64	79	75	67
Consultations	7	6	10	20	16	22	19	14	8	19	14

CASELOAD BY MANNER OF DEATH (2008 – 2014)

Autopsies, External Exams and Certifications by Manner of Death							
	2008	2009	2010	2011	2012	2013	2014
Total Cases Reported	703	760	735	812	770	873	830
Autopsies (A)	204	207	200	220	176	247	224
Externals (E) & Certifications (C)	111	145	109	113	133	132	82
Total A+E+C	315	352	309	333	309	379	306
Total Violent Deaths	128	136	136	156	149	203	158
Homicides	6	6	15	8	6	15	11
Suicides	26	27	36	31	23	46	36
Vehicular Accidents	32	29	11	37	17	36	25
Accidental Overdoses	24	28	36	32	51	63	45
Other Accidents	27	34	27	41	38	37	35
Undetermined Manner	13	12	11	7	15	6	6
Natural Causes	177	208	164	165	152	169	146
Other *	10	8	9	12	8	7	2

EDUCATIONAL PROGRAMS, ACADEMICS & TRAININGS

- Established a forensic internship rotation program, to provide college students with an opportunity to conduct a forensic research project toward completion of their course work and present at a national meeting.
- Offered a total of 10 lectures/seminars/classes throughout the year, covering varying topics pertaining to medicolegal investigations, such as the role of the medical examiner and medicolegal investigator, fire scene investigation, forensic evidence handling, the medicolegal autopsy, and child death scene investigations. Attendees included high school students, law enforcement, paramedics, hospital emergency staff, and Air National Guard Fatality Search and Recovery Teams depending on the topic covered.
- The Chief Medicolegal Investigator gave a “Child Death Scene Investigation” presentation at the Child Advocacy Annual Seminar at the Wallace Center in June 2014.
- Sponsored a workshop on aquatic death and homicidal drowning for police, fire, and crime scene technicians at Emergency Response in June 2014.
- Submitted three scientific papers for presentation at the American Academy of Forensic Sciences Annual Meeting in February 2015; all three were accepted.

CLINICAL FORENSICS (LIVE VICTIMS)

Exam Type	SPHN		Contract RN		Total
	Business Hrs	Off Hrs	Business Hrs	Off Hrs	
SAFE with kit (non-DFSA)	4	6	0	19	29
SAFE w/o kit (non-DFSA)	0	1	0	2	3
SAFE-DFSA with kit	1	2	0	1	4
SAFE-DFSA w/o kit	1	0	0	0	1
SAFE Total	6	9	0	22	37
FNE	23	3	0	7	33
Total SAFE and FNE	29	12	0	29	70

Definitions:

SAFE = Sexual Assault Forensic Exam

DFSA = Drug Facilitated Sexual Assault

With kit = Evidence kit collected

Without kit = Client declined evidence collection



DIVISION OF VETERANS SERVICES

The Dutchess County Division of Veterans Services (DVS) connects veterans, members of the armed forces, and their families with the economic, medical, and social benefits available to them as a result of active duty military service. Their core mission is to provide benefits, counseling, and advocacy for Dutchess County's **18,500** veterans and their families. In 2014, the Division had 15,959 contacts and rendered 25,858 services to the community.

VETERANS SERVICES RENDERED IN 2014

Category	Activity	Total	Q1	Q2	Q3	Q4
Assistance with Benefits	Total services rendered	25858	5410	6904	6365	7179
	Education/vocational	444	111	185	54	94
	Pension*	1487	299	358	445	385
	Burial and Insurance Compensation	1367	275	365	275	452
	Discharge Papers, Medals, and Military and Health Records	1741	378	492	381	490
	Blind Annuity	87	19	45	4	19
	Loan	333	78	138	34	83
	Medical	1241	166	263	386	426
Referrals	Department of Labor	197	43	71	36	47
	Partial-Property Tax Exemption Information	882	263	201	147	271
Benefit Counseling	Veteran Inquiries	4239	999	1010	1125	1105
	Veteran Claims	410	104	116	100	90
	Family Inquiries	2446	466	470	761	749
	Family Claims	275	95	70	49	61
Favor Cards	Cards issued	396	157	79	76	84

FINANCIAL SUPPORT RENDERED TO VETERANS IN 2014

Compensation and Pension dollars amounting to \$46,099,000.00 were provided to Dutchess County veterans for the following programs: Veterans' Compensation for service-connected disabilities; Dependency and Indemnity Compensation for service-connected deaths; Veterans' Pension for non-service-connected disabilities; and Burial and other benefits to veterans and their survivors.

Medical Care expenditures amounting to \$73,506,000 were made available for medical services, medical administration, facility maintenance, educational support, research support, and other overhead items.

COMMUNITY OUTREACH ACTIVITIES

The Division of Veterans Services reaches out to veterans and their families providing advocacy and counseling, and ensuring benefits granted by law for their service to our country are rightly received. Outreach activities include attending events such as Dutchess County Office for the Aging Senior Socials and Picnics, Community Day celebrations/fairs, ribbon-cutting ceremonies, American Legion committees, and working closely with Veterans Affairs Medical Center Outreach staff.

The Division participates in a variety of coalitions and workgroups to ensure the healthcare, disability, and unemployment needs of veterans are met, including:

- Dutchess County Housing Consortium
- Dutchess County Long Term Care Council
- Dutchess County Workforce Investment Board
- New York State Industry for the Disabled (NYSID - Preferred Sources Solutions)
- New York State Department of Labor

Division staff attended seminars and conferences held by the Department of Veterans Affairs, American Legion, New York State County Veteran's Service Officers Association and New York State Division of Veterans Affairs. These trainings enable staff to remain current with the frequently changing benefits and services available to veterans.

The Division hosted an information booth at the 3rd Annual Southern Dutchess Health and Wellness Fair and an informational booth at the Dutchess County Fair connecting with more than 1200 veterans and their families.

The DutchessDelivery feature was added to the redesigned and restructured Veteran's Division website providing veterans with the capability to sign up and receive electronic notifications.

EVENTS HONORING VETERANS IN 2014

- The 3rd Annual Memorial Day Eve Illumination of the Walkway was celebrated with several hundred attendees.
- Dutchess County Route 40A was dedicated as "Veterans Memorial Highway" on June 14th.
- Five veterans were recognized for their extraordinary service in the military at the 9th Annual Veterans' Appreciation Day event in Hyde Park, in the presence of more than 400 individuals, making this the highest attended Veterans' Appreciation Day to date.

- And finally, the Division assumed responsibility for the Dutchess County War Memorial, where Memorial Day and other veterans' events will be celebrated in years to come.



Care of Dutchess County War Memorial Transferred to Dutchess County Government

From left to right: Town of Poughkeepsie Highway Superintendent Marc Pfeiffer, Dutchess County Legislator Joe Incoronato, Dutchess County Legislator Rob Weiss, Dutchess County Clerk Brad Kendall, Town of Poughkeepsie Town Supervisor Todd Tancredi, Director of Dutchess County Veterans Services Nelson Eddy Rivera, Dutchess County Legislature Chairman Rob Rolison, Dutchess County War Memorial Committee (DCWMC) Chairman William Gannon, Dutchess County Executive Marc Molinaro, DCWMC members Andy Mihans, Gene Santiago and John Santiago.



Dutchess County War Memorial is located at the corner of Raymond Avenue and Main Street in the Town of Poughkeepsie.

DIVISION OF WEIGHTS & MEASURES

The Division enforces several Dutchess County and State laws, including Article 16 of the New York State Agricultural and Markets Law. Inspections are performed annually at every Dutchess County establishment that uses a weighing or measuring device to sell a product. These inspections protect both the buyer and seller by assuring the buyer receives the proper quantity and the seller is assured of fair competition in the marketplace. In 2014, the Division updated and expanded its webpage to allow the public more complete access to the services provided by the Division including the Precious Metal License application and law; the posting of other laws enforced by the Division; requests for device inspection; and general information including resources and complaint forms.

ACTIVITIES IN 2014

Regulation Class	Activity	Total
Department of Agriculture & Markets - Article 16 Mandated inspections*	Establishments inspected	1044
	Devices inspected	4864
	Devices found correct	4719
	Inspection fee generated (\$)	\$78,875.00
Local Law 2 of 1986 - Gasoline test to ensure quality*	Samples taken	311
	Samples meeting standard	311
	Reimbursement (\$) (Annual Amount - Paid quarterly)	\$19,101.09
Gas Signage Law - Monitoring of gas station signage	Inspections	332
	Found in violation	1
Scanner Accuracy Law - Scanner inspections	Inspected	66
	In violation	4
	Civil penalties issued (\$)	\$8,625.00
	Civil penalties collected (\$)	\$8,625.00
Item Pricing Law - Item pricing inspections	Establishments inspected	29
	In violation	11
	Civil penalties issued (\$)	\$79,500.00
	Civil penalties collected (\$)	\$72,000.00
Local Law 8 of 1987 - Precious metal licensing/violations	Licenses	51
	Inspections	82
	Violations	9
	Renewal Licenses Amount (\$)*	\$840.00
	New Licenses Amount (\$)	\$675.00

**Precious Metal Licenses are renewed every two years and are therefore not equally distributed across years.*

LEGAL MANDATE:

The Division is responsible for enforcing Dutchess County local laws pertaining to the following:

- *Gasoline:* The sale of motor vehicle fuel, the prohibition of water contamination, lead contamination, and the proper labeling of motor vehicle fuels for use in both vehicles and engines is monitored.
- *Precious Metal Licensing Law:* Persons engaged in the business of purchasing or exchanging precious metals including gold, silver, and platinum and coins, utensils, or objects of art containing one or more of these metals are monitored. Twenty Precious Metal Log Book inspections were conducted in collaboration with the Dutchess County Sheriff's Office. The log books record items purchased by the licensed precious metal dealers and are a resource for local, county, and state law enforcement in attempting to locate stolen precious metal items. Dealers found to be in violation of the Local Precious Metal Law were issued civil penalties and some had their license suspended.
- *Supermarkets:* Enforcing the local law for item pricing, which ensures that individual items in supermarkets are marked, is a vast undertaking for the Division. In 2014, the Division conducted twenty-nine (29) inspections at local supermarkets. Eleven (11) of these inspections resulted in violations, which represents a thirty-eight percent (38%) failure rate.
- *Unfair and Deceptive Trade Practice Law:* This local law includes the regulation of gas stations' road signage. In 2014, the Division addressed a total of thirty-four (34) complaints which included gas signage, weight discrepancy, amount of gas dispensed, item pricing in supermarkets and supermarket scale accuracy.



(W&M Staff on "Go Red Day")

WINNERS OF THE 2014 COMMISSIONER'S AWARD



Left to Right:
Tanya Clark, Environmental Health Services Director
Jim Fouts, Associate Public Health Sanitarian
Monique Jones, Associate Public Health Sanitarian

Tanya, Jim, and Monique were nominated by Dan Zoller in acknowledgement of their superb leadership during a very difficult transition. Following the retirement of the three senior-most Division Administrators, they stepped up to the plate as a team, took responsibility, and managed to both assume new responsibilities and run the Environmental Division for a period of 15 months, despite many challenges. The nomination was accepted by the State for the Public Health Honor Rolls and a celebratory reception was held in November during Public Health Worker's Day.



National Walking Day - April 2nd



Community Health Fair



DCDOH Volleyball Team



National Women's Day Walk - March 8th



Demobilizing the Alternate Care Site Drill



Dutchess Heart Walk