



Service, Support and Information
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Dutchess County Department of Health

2010 Annual Performance Report

William R. Steinhaus
County Executive



Michael C. Caldwell, MD, MPH
Commissioner of Health

Abbreviations/Acronyms Used in this Report

ADAP	AIDS Drug Assistance Program
AED	Automated external defibrillators
AHIP	AIDS Health Insurance Program
AIDS	Acquired Immunodeficiency Syndrome
APIC	ADAP Plus Insurance Continuation
ARRA	American Recovery and Reinvestment Act
ATUPA	Adolescent Tobacco Use Prevention Act
CARE Act	Comprehensive AIDS Resources Emergency Act
CDE	Certified Diabetes Educator
CHHA	Certified Home Health Agency
CMP	Children's Media Project
COBRA	Consolidated Omnibus Budget Reconstruction Act
CORe	Collaborative Outbreak Response team
CPR	Cardiopulmonary Resuscitation
CPSE	Committee on Preschool Special Education
CSC	Children's Services Council
CSHCN	Children with Special Health Care Needs
DCDOH	Dutchess County Department of Health
DDS	Doctor of Dental Surgery
ED	Emergency Department
EI or EIP	Early Intervention or Early Intervention Program
EPA	Environmental Protection Agency
FDA	Food and Drug Administration
FOB	Forward Operating Base
H1N1	Refers to 2009 H1N1 Influenza virus/swine flu
HEAL NY	Care Efficiency and Affordability Law for New Yorkers
HIV	Human immunodeficiency virus
HPV	Human papillomavirus
HVRHON	Hudson Valley Regional Health Official Network
IEP	Individualized Education Plan/Individualized Education Program
ILI	Influenza-like Illness
LRE	Least restrictive environment
LTBI	Latent Tuberculosis Infection
LTHHCP	Long Term Home Health Care Program
M.Ed.	Masters in Education
MD	Doctor of Medicine
MPH	Master in Public Health
MRC	Medical Reserve Corps of Dutchess County
MTBE	methyl-tertiary-butyl-ether (gasoline additive) banned in NYS
NACo	National Association of Counties
NYSDOH	New York State Department of Health
PAD	Public Access Defibrillation Program
POD	Point of Distribution clinics
Ph.D.	Doctor of Philosophy
PHN	Public Health Nurses
PSA	Public Service Announcement
PSE	Preschool Special Education
PWS	Public Water Supplies
REHP	Radiological and Environmental Health Program
RN	Registered Nurse
SPCA	Society for the Prevention of Cruelty to Animals
STD	Sexually Transmitted Disease(s)
TGA	Transitional Grant Area
WNV	West Nile virus
YMCA	Young Men's Christian Association
YTD	Year to date



Dear Community Residents:

We are pleased to provide you with an overview of the services offered by the Dutchess County Department of Health in 2010. The Department's professional, competent, well-trained, and motivated employees continue to make strides toward preventing and reducing the burden of chronic and infectious diseases, informing and educating our residents about health issues, advancing community partnerships, and protecting the health and lives of our residents.

In April of 2010, the Department's contribution to the investigation and control of a nation-wide E-coli outbreak involving contaminated shredded lettuce, led to recognition by the New York State Department of Health and the Dutchess County Legislature for the work done by the Department's CORE (Collaborative Outbreak Response) team. Additionally, the Department continued its response to the challenges of the 2009/2010 H1N1 influenza (swine flu) pandemic. Further, in order to protect our environment and encourage healthy behaviors, the Department engaged in various ongoing initiatives such as *HEARTSafe* Community and the Comprehensive Cancer Control Consortium.

Dutchess County Department of Health is accountable to its residents by communicating what it does through its annual performance report. We remain dedicated to work for the health of the residents of Dutchess County, and we welcome your input and your participation in making Dutchess County a healthy community.

Sincerely,

A handwritten signature in black ink that reads "William R. Steinhaus". The signature is written in a cursive, flowing style.

William R. Steinhaus
County Executive

A handwritten signature in black ink that reads "Michael C. Caldwell". The signature is written in a cursive, flowing style.

Michael C. Caldwell
Commissioner of Health

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Dutchess County Department of Health 2010 Annual Report

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REPORT OF THE BOARD OF HEALTH – 2010

Harry J. Lynch, President

Steve M. Lapidus, MD, Vice-President
William S. Augerson, MD
Suzanne Horn, M.Ed (Special Legislative Liaison)
Robert Sullivan, Ph.D

Joy Godin, RN, Secretary
Helen Fuimarello, RN
Ralph Middleton

New Members: Helen M. Bunyi, RN, Robert Irving Miller, RN, ESQ, Dr. William M. Smookler

MEMBERSHIP

The officers remained the same for 2010. The President of the Board, Harry J. Lynch, resigned in November of 2010. Helen N. Bunyi, RN, was appointed to represent the City of Poughkeepsie, a position that had been vacant since July of 2007. Helen Fuimarello, RN and Joy Godin, RN were replaced by new members Robert Irving Miller, RN, ESQ and William N. Smookler, MD. Robert Sullivan, Ph.D, served the remainder of his term and chose not to seek reappointment. The redistribution of the membership caused the cancellation of some meetings due to the lack of a quorum.

PUBLIC HEALTH PARTNERSHIP AWARD

The Board of Health co-sponsored with the Dutchess County Medical Society a Public Health Partnership Award Ceremony on April 8, during National Public Health Week, April 5–11, 2010. The topic this year was “A Healthier America: One Community at a Time,” and the recipient of the award was the Dutchess County Medical Reserve Corps for their contribution to the successful operation of the H1N1 vaccination clinics.

FLUORIDATION

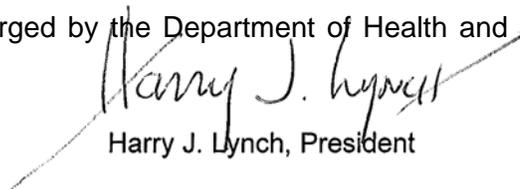
The Board held a Public Hearing in October of 2009 to consider amending the Sanitary Code to mandate fluoridation of public water supplies. They continued discussions on this topic and in April of 2010 they passed a motion to amend the Sanitary Code to approve Fluoridation of Public Water Supplies for public water systems serving over 10,000 residents. In May of 2010, the Board rescinded this motion due to an opinion by the County Attorney stating that the Board did not have the authority.

MISCELLANEOUS ISSUES

The Board discussed the rejection of a Food Service Permit for a Hookah Bar, which is licensed by the Department of Health to sell tobacco and where smoking is allowed. They also considered the concerns of some area residents about Tattoo and Body Piercing establishments, which are not regulated in Dutchess County. The issue of Tanning Salons, which are regulated by the Department of Health as a result of a NYS Sanitary Code Amendment, was also part of their discussions in 2010. Another issue visited by the Board was Medicaid and the enormous costs to the County to fund this program. The Board expressed a desire to gather information to see if there was anything they could do to influence a reduction in expenses.

FEES

In December of 2010 the Board reviewed the fees charged by the Department of Health and approved the immunization rates.

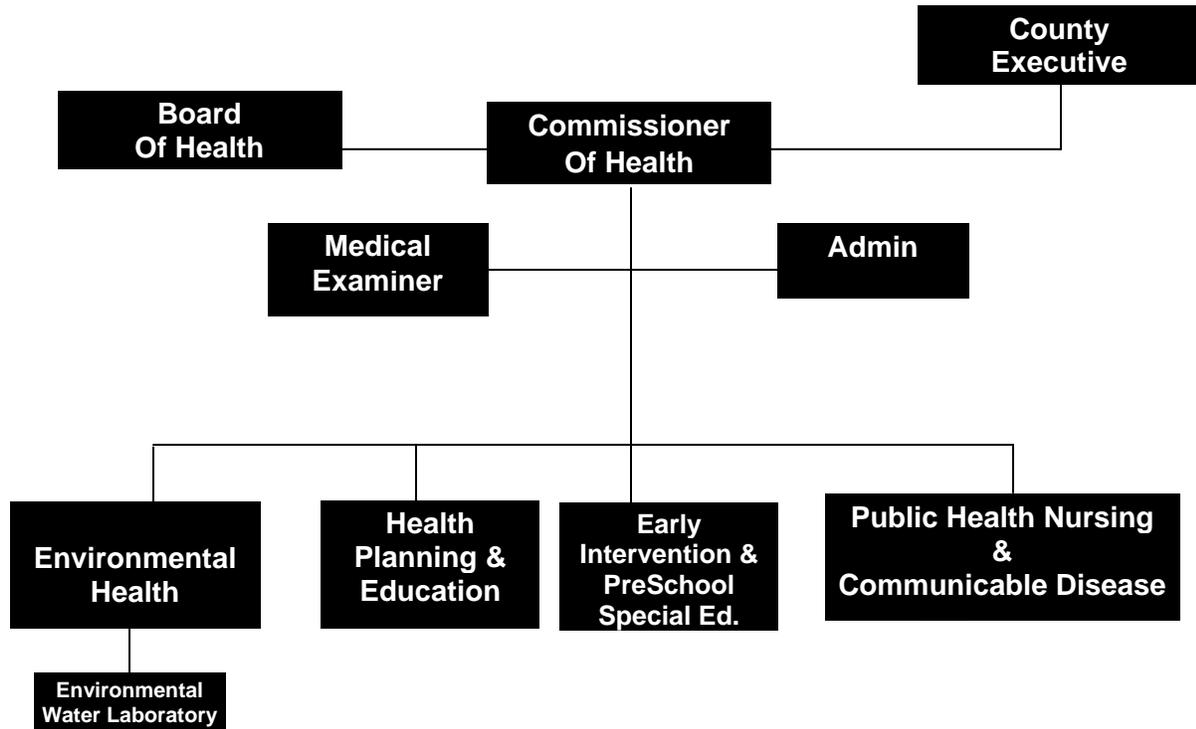


Harry J. Lynch, President

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Dutchess County Department of Health

Organizational Structure



Dutchess County Department of Health

387 Main Street - Poughkeepsie, NY 12601
 Voice: 845.486.3400 TTY: 845.486.3417 Fax: 845.486.3447

Haight Avenue
 845.486.3526 (tel)
 845.486.3554 (fax)

Beacon District Office
 845.838.4800 (tel)
 845.838.4824 (fax)

Millbrook District Office
 845.677.4001 (tel)
 845.677.4020 (fax)

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DUTCHESS COUNTY DEPARTMENT OF HEALTH

VISION AND MISSION STATEMENTS

The Dutchess County Department of Health is a diverse group of capable experienced individuals 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.

We Value ...

- The practice of prevention
- The on-going assessment of the strengths and health needs of our community
- Research and its application to Public Health practice
- The pursuit of innovative solutions to Public Health practice
- Ethical principles in the work place
- Culturally sensitive, courteous, and respectful treatment of people
- Excellence in all areas of Public Health
- Each other's input to guide decision-making
- Encouragement of staff to develop to their full potential
- Community service and volunteerism
- Public and private partnerships
- Written policies and procedures to guide our daily operations
- Sensitivity and accommodation of special needs populations
- Open and honest communications
- Best use of people and resources
- Respect for and management of confidential information
- A quality work environment and safety in the workplace

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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: 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 environmental health services align with the three core functions of public health (assessment, policy development, and assurance).

Assessment

1. Monitor health status to identify community environmental 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 environmental 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



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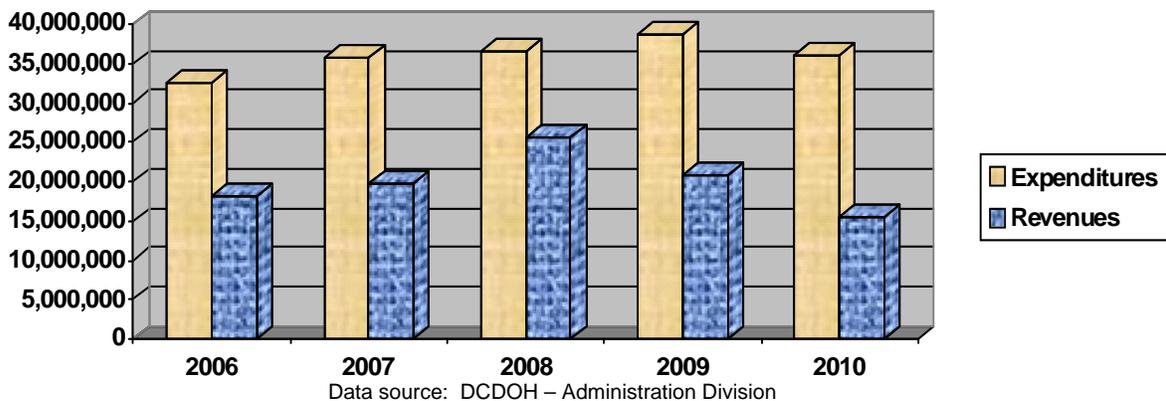
Fiscal Information 2010

Total Receipts: \$ 15,348,434

- General Fund Subsidy
- Grants
- Clinic Fees
- Other Charges
- Environmental Health
- Vital Statistics
- Home Visiting

Total Expenditures: \$ 36,102,846

- Assessment and Health Information
- Environmental Health
- Support Services
- Health Services



The chart above reflects the total expenses incurred and receipts realized by the Dutchess County Department of Health for the fiscal years 2006 to 2010. New York State Aid (Public Health Law, Article 6) continues to be the major funding source for our various Public Health activities. Our revenues in 2008 and 2009 were higher than average due to funding for three clinical trials that commenced that year.

In 2010, Dutchess County Department of Health received 18 different grants totaling \$1,905,120. These grants help to fund a variety of Public Health concerns including diabetes, youth tobacco use prevention, bioterrorism and emergency preparedness, Lyme disease, lead poisoning, immunizations, partner notification, drinking water enhancement, rabies, HEAL NY9, Healthy Communities capacity, and tuberculosis. The individual amounts of these awards ranged between \$20,000 to \$300,000.

Note: This financial report does not include the Ryan White Part A federal funding to provide services to persons with HIV/AIDS, for which the Department serves as the administrative agency.

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A. PREVENTING AND REDUCING THE THREAT OF DISEASES

Seasonal Flu/Pneumococcal Vaccine Program (Flu Information Line - 845.486.3435)

In the summer of 2010, a flu vaccine was approved which contained protection for both the seasonal and the H1N1 strain. In 2010, seven (7) public flu clinics were conducted throughout Dutchess County where **734** persons received seasonal vaccine and **45** persons received pneumococcal vaccine.

H1N1 Influenza A Outbreak and Response

In 2010, we continued to work within the written framework specific to the H1N1 Pandemic Response that outlined our Department's strategies, and implemented several interventions including community mitigation, risk communication, surveillance, and mass vaccination.

Community Mitigation and Non-Pharmaceutical Interventions:

Although the virus activity in the community was beginning to subside, the Department continued its efforts to promote community mitigation and non-pharmaceutical interventions to insure proper control of the spread of the H1N1 virus.

In June 2010, we conducted a community engagement event for school nurses and college health services clinical staff to provide clarification regarding personal protective equipment and respiratory protection policies in a pandemic. Sixty (**60**) school nurses representing most school districts in our County attended the program and provided positive feedback on our efforts to work with them during the pandemic.

Non-pharmaceutical interventions such as antiviral prophylaxis for H1N1 illness continued to be promoted within the medical community via collaboration with the Dutchess County Medical Society and the Federally Qualified Health Centers in our community.

Risk Communication and Public Information:

Timely and accurate information about influenza and the 2009/10 H1N1 Influenza A strain, disease mitigation and vaccination was provided in English and, whenever possible, in Spanish. DCDOH used targeted mailing, radio PSA, billboards, website posting, and a hand washing campaign to target schools and camps using posters depicting cartoon-style germs on fingers and hands with the message Germ Farm and Scrub'em. We distributed **1,200** posters throughout the county.

Epidemiology and Laboratory Surveillance:

The Department engaged in on going monitoring of activity, severity, and virulence of the H1N1 virus. Primary care physicians were encouraged to join the national surveillance network for flu-like illness by reporting suspected cases in their practices. Our staff consulted daily with hospital infection control nurses to document both frequency and severity of H1N1 infection, including the assessment of ILI (Influenza-like Illness) Emergency Department (ED) visits, hospitalizations, and deaths. Our schools transitioned to a state-wide electronic daily surveillance report which enabled us to generate instantaneous reports that were invaluable in monitoring H1N1 activity within the school setting.

Prevention of Disease through Vaccination

The Department continued to lead the collaboration with other departments including Emergency Response, Sheriff, Public Works, Airport, and volunteers from the Medical Reserve Corps (MRC) to vaccinate members of our community.

From January through March 2010, the County operated four (4) Point of Distribution (POD) clinics and administered **856** doses of H1N1 vaccine in an ongoing effort to prevent and control the disease. Additionally, **1,665** doses were redistributed to healthcare providers to enable them to offer the vaccine to their patients. One hundred and ten (**110**) MRC volunteers gave more than **1,138** hours of their time and expertise at the various POD sites.

Childhood Immunization Program (845.486.3409)

The Childhood Immunization Program provides all recommended childhood vaccines to Dutchess County children. Clinic schedules are made available on our website at www.dutchessny.gov. Evaluation of immunization rates in private medical practices continues to be a priority. Staff collects data from participating medical practices and the results of the analysis are used to establish accurate immunization levels and to improve immunization rates in private practices. This information is also used to target programs and services to areas with the highest rates of under-immunized children.

In order to maintain the most up-to-date knowledge, the Department's clinical staff attended an annual vaccines and immunizations training provided by the Centers of Disease Control and Prevention.

In 2010, **85%** of the children seen at our public clinics were fully immunized by age two.

Adult Vaccine Program (845.486.3409)

The Adult Vaccination Program provides vaccination and health information to individuals 18 years of age and older. Clinic schedules are made available on our website at www.dutchessny.gov. In 2010, **519** individuals received immunizations at the Adult vaccination clinics.

Additionally, the Department received several vaccines through the American Recovery and Reinvestment Act (ARRA) to promote adult immunizations. The vaccines received were: Influenza, Tdap, Pneumonia, and Gardasil. Five hundred and ninety-six (**596**) doses of these vaccines have been distributed to area physicians and given in our clinics throughout the year.

Travel Vaccination Program (845.486.3504)

The International Travel Vaccination Program provides vaccination and health information to travelers and other adults. Clinic schedules are made available on our website at www.dutchessny.gov. In 2010, **319** individuals received important travel advice and vaccinations against at least sixteen diseases: (e.g., typhoid fever, yellow fever, hepatitis A, and meningitis) based on their travel destinations.

Rabies Prevention Program (845.486.3404)

Dutchess County Department of Health (DCDOH) offers vaccination clinics, free to county residents, for domestic cats, dogs, and ferrets. In 2010, the DCDOH hosted three rabies vaccination clinics dispersed throughout the county. The first clinic was held at Bowdoin Park in March, the second at the Dover Highway Garage in July, and the final clinic was held at the Red Hook Firehouse in November. A total of **519** pets (dogs, cats, and domestic ferrets) were vaccinated at the DCDOH-sponsored clinics (165 at Bowdoin Park; 221 at Dover Highway Garage; 133 at Red Hook Firehouse). Notably, 2010 was the first year that the DCDOH-sponsored rabies vaccination clinics were held during normal business hours.

DCDOH also investigates incidents in which people may have been exposed to rabies. In 2010, there were **435** rabies investigations. A follow-up with the victim of a reported bite is conducted by Department staff. During rabies investigations, the Department works with NYSDOH, other county's departments of health, police, and animal control officers.

DCDOH submits animals suspected of being infected with rabies to the Wadsworth Laboratories for testing. This service is coordinated with NYSDOH's rabies exposure investigations and veterinarians. In 2010, **112** specimens were submitted, identifying **9** positives.

When a person is bitten by a confirmed rabid animal (or the animal is a rabies vector species and is not available for testing), a post-exposure regimen of treatment is authorized. This is done in conformance with NYSDOH's "Rabies Treatment Algorithm" and guidelines from the Centers for Disease Control and Prevention. DCDOH authorized the post-exposure treatment of **48 persons** following their exposure to rabid or suspected rabid animals in 2010. Public Health Nurses administered rabies vaccine to **48** of these individuals.

Tuberculosis Control Program (845.486.3505)

The Department has a comprehensive tuberculosis screening program which includes screening and treatment for latent and active tuberculosis. In 2010, there were **12** cases of active TB in Dutchess County, three times as many as in 2009 and more than any year in the past decade. Treatment of the disease is becoming more complicated because of drug resistance and many of these individuals require long-term treatment and extensive contact investigations to insure that others that may have been exposed do not contract the disease.

Seventy-six (**76**) individuals were treated for tuberculosis infection which is a lesser form of the disease but still requires treatment to insure these individuals do not contract active disease. A new trend noted this year is more pregnant women are being referred to our clinic for follow-up for tuberculosis infection treatment to protect them and their child from contracting tuberculosis.

Maternal Child Health Home Visiting Program (845.486.3419)

In 2010, the DCDOH made **2,153** visits and serviced **435** mothers and infants who were enrolled in our Maternal Child Health Home Visiting Program. Education about childhood growth and development, positive parenting skills, injury prevention, immunizations, and the importance of a medical home for themselves and their children was provided. Public Health Nurses focus on safety including prevention of injury, Shaken Baby Syndrome, SIDS, safe sleep, and avoidance of second-hand smoke. The Public Health Nursing and Communicable Disease Control Department staff received training on domestic violence to advance the importance of safety in the home. To address the growing problem of childhood obesity, education is provided regarding breastfeeding, healthy eating, parenting, and age-appropriate activities.

Bilingual case manager aides are available to assist the Public Health Nurses in providing services to Spanish speaking families. The Language Line is available when nurses are working with families that speak languages other than English or Spanish. Cultural Competency training was provided to Public Health Nursing and Communicable Disease Control staff.

The DCDOH continues to be an active partner with local hospitals, healthcare providers and community-based organizations to promote maternal child health initiatives such as:

- The Dutchess County Breastfeeding Coalition to raise awareness about the benefits of breastfeeding. This year we participated in the 5th Annual Breastfeeding Awareness Walk in August with more than 400 participants to raise public awareness about the benefits of breastfeeding infants.
- Vassar Brothers Medical Center to provide home visiting services and education to pregnant and postpartum women and infants.
- Hudson River Health Care to provide home visiting services and education to pregnant and postpartum women and infants.
- Dutchess County Healthy Families to provide consultation services to family support workers on breastfeeding and developmental screening.
- The Lower Hudson Valley Perinatal Network – a network of healthcare and human services providers who meet regularly about maternal child health issues.

Children in Foster Care (845.486.3419)

Public Health Nurses (PHN) provide developmental surveillance on children newborn to age five years who are placed in foster care. The nurses work with the Department of Social Services' workers and foster parents to assure these children are provided routine health assessments, developmental screenings, and referral to needed services. A Public Health Nurse is regularly scheduled at the Dutchess County Department of Social Services to review medical records, ensure that those records are ready for adoption proceedings and make recommendations for needed medical follow-up. In 2010, Department nurses provided home services to **49** foster children and devoted **32** hours for medical record review.

Certified Home Health Agency - CHHA (845.838.4800 or 845.677.4000)

Our CHHA provided skilled nursing, therapy, and home health aide services to Dutchess County residents in their homes.

CERTIFIED HOME HEALTH AGENCY (Unit of Services)		
Type of Service	2009	2010
Nursing	5,220	2,673
Physical Therapy	480	258
Occupational Therapy	75	8
Home Health Aide	708	232
Medical Social Worker	26	7

Data received through the Public Health Nursing Division

Newborn Screening Program (845.486.3419)

Public Health Law sections 2500-a and 2500-1 mandate all infants born in New York State receive metabolic testing for 44 diseases and an infant hearing screening. The testing and blood specimens are done within the first 48 hours of the baby's life. If the hospital needs assistance contacting the family to arrange for repeat of additional testing, the Department of Health is notified. A Public Health Nurse follows up to make sure all additional tests are completed. In 2010, there were **34** infants who received these follow-up services.

Children with Special Health Care Needs Program (CSHCN) (845.486.3419)

The Children with Special Health Care Needs Program (CSHCN) is a state-wide public health program that provides information and referral services for health and related areas for families of CSHCN. The CSHCN program also has a financial component, the Physically Handicapped Children's Program (PHCP). The PHCP assists families in paying medical bills for children with severe chronic illnesses and/or physical disabilities, between birth and 21 years of age, who live in New York State and meet county medical and financial eligibility criteria. In 2010, Dutchess County's PHCP served **38** individuals.

The PHCP has two components: the Diagnosis and Evaluation Program (D&E) and the Treatment Program. The D&E program reimburses specialty providers for the diagnosis and development of a treatment plan for eligible children. The treatment program will reimburse specialty providers for the ongoing health and related services for children who are medically and financially eligible in their county of residence. The County standards are designed to assist families with low incomes. In 2010, Dutchess County served **6** individuals for the D&E program.

In September 2010, a New York State Department training on the Children with Special Health Care Needs Program was offered to the Public Health Nurses and our partners from local hospitals, healthcare providers, Dutchess NY Connects, and other professionals serving children with special health care needs. The goal of the training was to increase knowledge about this program and provide better communication between the partners.

Early Intervention Program and Preschool Special Education Program (845.486.3518)

The Early Intervention (EI) Program

The Early Intervention (EI) Program for Infants and Toddlers with Disabilities and their Families is established in Title II-A of Article 25 of the New York State Public Health Law and Part C of the federal Individuals with Disabilities Education Act. The program aims to enhance development of infants and toddlers from birth up to age three who have significant developmental delays or disabilities and the capacity of families to meet their child's special needs.

New York State Department of Health (NYSDOH), as the lead state agency, is responsible for establishing regulatory standards including programmatic and fiscal components and approval of qualified agencies and/or individuals to deliver services in specific counties.

Other program components include service coordination, multidisciplinary evaluations, and the development of an Individualized Family Service Plans (IFSPs) for eligible children and families. The Early Intervention Program is administered locally by a municipal Early Intervention Official (EIO) designated by the chief elected official of the municipality. Municipalities may choose to contract with NYSDOH approved agencies and/or individuals in accordance with local needs.

In 2010, the Early Intervention Program provided services to **1,244** Dutchess County infants and toddlers with disabilities and their families with an expenditure of **\$4,397,514**. Services may include family training, counseling, home visits, parent support groups, special instruction, speech pathology, audiology, occupational therapy, physical therapy, psychological services, service coordination, nursing services, nutrition services, social work services, vision services, and assistive technology devices and services.

Preschool Special Education Program (PSE)

Part B of the federal Individuals with Disabilities Education Act, and Section 4410 of the New York State Education Law, a preschooler (3-5 years of age) with disabilities may receive appropriate educational opportunities from 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) that is written with the parent and CPSE members. This plan indicates the type, frequency, and location of the service(s) to be provided. The CPSE must consider how to provide the services in the least restrictive environment (LRE) where the child can learn close to home with other children of the same age who do not have disabilities. 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 language development. Busing is provided for families who were unable to supply their own transportation.

In 2010, the Preschool Special Education Program provided services to **974** Dutchess County children ages 3-5 with an expenditure of **\$15,657,110**.

Both the EI and PSE programs have responded to the growing number of Spanish-speaking children and families in each program by contracting with bilingual teachers and therapists in every discipline and collaborating with St. Francis Preschool to provide speech therapy groups for young children with severe speech delays in their native language.

Early Intervention and Preschool Special Education Enrollment Trends

Ages 0-2 Early Intervention			Ages 3-5 Preschool Special Education		
Calendar Year	Number of Children	Percent Change	Calendar Year	Number of Children	Percent Change
1998	618	-	1998	732	-
1999	740	20%	1999	853	17%
2000	896	21%	2000	868	2%
2001	1002	12%	2001	876	1%
2002	1140	14%	2002	896	2%
2003	1156	1%	2003	920	3%
2004	1259	9%	2004	990	8%
2005	1286	2%	2005	1000	1%
2006	1339	4%	2006	1012	1%
2007	1379	3%	2007	998	-1.3%
2008	1378	0%	2008	995	-.3%
2009	1332	-3.3%	2009	997	.2%
2010	1244	-6.7%	2010	974	-2.4%

Data from Early Intervention and Preschool Special Education

Childhood Lead Screening and Prevention Program and (845.486.3419)

New York State law requires healthcare providers to screen all children at or around age one year and again at or around age two to determine if they have elevated lead blood levels. Providers are also required to assess all children ages six months to 72 months/six years at least once annually for risk of lead exposure, with blood lead testing for all children found to be at-risk based on those assessments.

In 2010, **78** children under the age of six (6), were identified with capillary elevated blood levels of >10 micrograms (mcg) per liter. When a child is >10mcg per liter, a venous blood level is taken. If the result is >15mcg per liter, it is referred to the Environmental Health Division to

investigate. In 2010, there were **19 new** cases of Dutchess County children with elevated venous blood lead levels requiring **32** environmental investigations, notice and demand hearings, and follow-up of the completion of controls to control conditions conducive to lead poisoning. Investigations were also conducted of the home environments of **7** pregnant women who had elevated blood lead levels.

Additionally, 2010 was unusual in that we had the highest blood lead level from a child (>70mcg per liter) and from a different family, a woman with a prenatal blood lead level (>50mcg per liter), the highest ever recorded in our program. Blood lead levels of this magnitude require immediate (24-48 hours) investigation and intervention. Both sources of lead affecting these individuals have been controlled and there has been a dramatic reduction in their blood lead levels.

In 2009, supported by a NYSDOH grant, the County established a Lead Primary Prevention grant which continued in 2010. Additional information about this program can be found on page 37 of this report.

Communicable Disease Control (845.486.3402)

Dutchess County Department of Health continues to monitor common and emerging communicable diseases through active disease surveillance, prompt case investigation, and public immunization clinics for persons exposed to communicable disease to prevent further transmission and stop the outbreak of communicable disease.

In April of 2010, the Department was notified of five (5) cases of suspected E-Coli in students from a Dutchess County school district. The Collaborative Outbreak Response (CORe) Team was mobilized and began its investigation. Shredded lettuce was identified as the potential source of the outbreak, and the suspected contaminated lettuce was removed and sent to the NYSDOH Wadsworth Laboratory for analysis. The results revealed that the lettuce was contaminated with the same strain of E-Coli that had sickened the students in previous outbreaks in Erie County, Ohio and Michigan, thus linking Dutchess County to this national public health threat. Dutchess County was instrumental in solving this national investigation by identifying the contaminated sample. This resulted in the prevention of further illness in New York State and across the country. The Department was widely recognized for its contribution.

The Department also provided surveillance and follow up contact investigations for individuals that were reported to have mumps and Pertussis disease. Various foodborne illness cases were also investigated. Salmonella, E-coli, and campylobacter are more readily detected due to improved screening modalities and improved food safety efforts.

Sexually Transmitted Infections (STIs) Clinic (845.486.3401)

In 2010, one thousand nine hundred and twenty-seven (**1,927**) visits were conducted in the Sexually Transmitted Disease (STD) Clinic. Screening and treatment for sexually transmitted infections and immunizations against vaccine preventable diseases (i.e., Hepatitis, cervical cancer) was provided. Breast, cervical, and colorectal cancer screening is also available for high-risk persons who meet financial/medical criteria established by the American Cancer Society Cancer Screening Program.

HIV Counseling and Testing Clinics (845.486.3401)

In September 2010, NYS passed a new HIV screening law that required HIV testing be offered to all individuals receiving primary care and to all patients receiving hospital care as out patients in the emergency department or as in patients. Our Department has been working extensively with community hospitals and healthcare providers to educate them regarding the new testing regulations and assist them with compliance. These efforts followed an initiative begun early in 2010 to improve HIV partner services; local healthcare providers who regularly screen for HIV infection were visited by Department staff and provided information to assist with identifying individuals who may have been exposed to individuals diagnosed with HIV infection.

These outreach efforts combined with the new HIV testing law have contributed to an increase in reported HIV infections over previous years. In 2010, seventeen (17) cases of individuals who tested positive for HIV were reported as compared to six (6) cases in 2009. Finding and treating new cases of HIV infection is the best way to successfully stop the spread of HIV infection and disease.

Ryan White HIV/AIDS Treatment Extension Act of 2009 Part A Program (845.486.3484)

Dutchess County first became eligible for Ryan White federal emergency funds in 1995, under the original CARE Act (Comprehensive AIDS Resources Emergency Act). In October of 2009, the legislation was reauthorized as the Ryan White Treatment Extension Act of 2009 and Dutchess County was designated as a Transitional Grant Area (TGA).

The prevalence of AIDS in Dutchess County has steadily increased, from 536 cases in 2000 to 813 in 2008. The primary risk factors for disease exposures are Intravenous Drug Use (45.76%), followed by Men having Sex with Men (14.88%), and heterosexual transmission (14.39%). HIV prevalence rate is 277.6/100,000 people, which is twice the national HIV rate. The burden of HIV infection falls on minority populations, with 44% of the cases among Blacks and 30% Hispanics. Poughkeepsie and Beacon urban areas are the epi-centers of HIV infection.



With receipt of Ryan White funding, the Dutchess County HIV Services Planning Council was created to establish an effective compassionate and comprehensive system of health care and support for people living with HIV/AIDS in Dutchess County. The Planning Council allocated funds to a range of interventions aimed at services that would keep People Living With HIV/AIDS in primary care, and get into care those who know their HIV-positive status but are not accessing services.

RYAN WHITE PART A PROGRAM REPORT (MARCH 1, 2009-FEBRUARY 28, 2010)	
SERVICE CATEGORY	ACCOMPLISHMENT/OUTCOME
<p>Outpatient/Ambulatory Medical Care</p> <p>The provision of professional diagnostic and therapeutic services rendered by a physician, physician's assistant, clinical nurse specialist, or nurse practitioner in an outpatient setting.</p>	<p>Outpatient/Ambulatory Medical Care services were provided to two-hundred and fifteen (215) clients living with HIV disease, all of which were also provided with appropriate specialty care referrals.</p> <p>One-hundred and thirty-two (132) clients received an individualized medication adherence intake, assessment and adherence specific support sessions.</p>
<p>AIDS Drug Assistance Program (ADAP)</p> <p>Provides FDA-approved medications to low-income individuals with HIV disease who have limited or no coverage from private insurance, Medicaid, or Medicare</p>	<p>In FY2009, two-hundred and twenty-five (225) medications for the treatment of HIV disease were provided to eligible clients.</p>
<p>Substance Abuse</p> <p>Provides medical or other treatment and/or counseling to address substance abuse problems (i.e., alcohol and/or legal and illegal drugs) in an outpatient setting, rendered by a physician, under the supervision of a physician, or by other qualified personnel.</p>	<p>Forty-two (42) clients received substance abuse treatment and counseling services.</p> <p>Forty-two (42) clients were linked to primary medical care and HIV/AIDS service providers as necessary.</p> <p>Forty-two (42) clients were assessed and provided with harm/risk reduction methods and partner notification assistance.</p>
<p>Medical Case Management</p> <p>Client-centered services that link clients with health care, psychosocial, and other support services.</p> <p>The goal is to ensure timely and coordinated access to medically appropriate levels of health and support services and continuity of care. Activities include assessment of client's needs and personal support system, development of an individual service plan, monitoring, and reevaluation to determine the effectiveness of interventions.</p>	<p>A total of eighty-three (83) clients were served between two providers. Medical Case managers assess clients' needs and personal supports as well as mutually develop individual service plans, monitors, and reevaluates to determine the effectiveness of interventions.</p> <p>Medical case managers regularly case conference to support continuity of care and medical adherence. An interdisciplinary team of providers case conferenced forty-three (43) clients during the reporting period.</p>

RYAN WHITE PART A PROGRAM REPORT
(MARCH 1, 2009-FEBRUARY 28, 2010)

SERVICE CATEGORY	ACCOMPLISHMENT/OUTCOME
<p>Treatment Adherence Services Ensures readiness for, and adherence to, complex HIV/AIDS treatments.</p>	<p>A total of forty-four (44) clients were provided medication adherence, treatment education, peer-based information, and referrals to HIV health care and support services.</p>
<p>Early Intervention Services Includes counseling individuals with respect to HIV/AIDS, HIV testing, and appropriate healthcare referrals.</p>	<p>Twenty-five (25) people living with HIV that were not in care were located and engaged.</p> <p>One-hundred and eighty-nine (189) people with high-risk for HIV were provided with HIV counseling and testing.</p> <p>Twenty-five (25) people living with HIV were provided with referrals and follow up to health care and support services.</p>
<p>Medical Transportation Transportation is provided to access health care services including medical, case management, mental health, and substance abuse services.</p>	<p>The Transportation program provided two hundred and ninety-two (292) rides to healthcare services for forty-one (41) unduplicated clients.</p>
<p>Emergency Financial Assistance Provides consumers with financial assistance for utility, phone, and prescription medicine.</p>	<p>The program assisted twenty-seven (27) eligible clients, including that required emergency assistance for telephone, utilities, and medications; and fourteen (14) clients accessed the program's food pantry. The program notes that all of the prescription assistance requested has been for non-antiretroviral and other non-HIV related medication.</p>
<p>Home Delivered Meals Provides home delivered meals to those recently released from the hospital or homebound for medical reasons.</p>	<p>Eleven-thousand, six-hundred and forty-five (11,645) meals were delivered to twenty-nine (29) individuals.</p>
<p>Health Insurance Premiums Issuance of Health Insurance Premiums as necessary, to prevent gaps in health insurance coverage for clients through the issuance of interim insurance payments, primarily to keep cost-effective health insurance policies COBRA insurance status active for clients who are waiting for their APIC or AHIP applications to be approved.</p>	<p>Eighteen (18) clients were issued Health Insurance Premiums.</p>

Lyme Disease and Other Tick-borne Infections (845.486.3534)

Lyme disease continues to be among the most prominent public health threat to Dutchess County residents. Nationally, Dutchess County has ranked in the top five in case reports and incidence rate. In 2010, based on NYSDOH data, there were **206 confirmed and probable and suspected** cases reported in Dutchess County.

In 2010, emergent infections to include Babesiosis, Anaplasmosis/Ehrlichiosis, and Rocky Mountain Spotted Fever became the focus of the Department's education and prevention efforts. By the end of 2010, Dutchess County reported **38** cases of Babesiosis, **77** cases of Anaplasmosis/Ehrlichiosis and **1** case of Rocky Mountain Spotted Fever. Although these infections are not as numerous as Lyme, they are potentially life threatening.

The Department continues to employ a multifaceted approach including community partnerships, public and provider education, and outreach initiatives to deal with the tick-borne illnesses such as a Lyme Awareness survey, implemented in the fall of 2009, and data analysis done in 2010. It was a random survey regarding knowledge, attitudes and behaviors related to Lyme and other tick borne illnesses was. The results were incorporated in the education and outreach efforts. The survey is currently being distributed to the Hispanic communities and will be compared to the survey given to English speaking residents. Additionally in 2010, DCDOH conducted healthcare provider surveys to assess their current practices in treatment and management of tick borne diseases. This survey is continuing and the data analysis and report will be available in 2011.

West Nile Virus – WNV (WNV Hotline 845.486.3438)

In 2010, there were no reported human cases of West Nile Virus (WNV). The Department continued to conduct bird surveillance. A total of **105** dead birds were reported in 2010. Of the total reported birds, **49** (47%) were tested for WNV and none of them tested positive for the virus. The total number of dead birds reported decreased by 54% from **226** in 2009 to **105** in 2010. The total number of birds that were tested for WNV also decreased from **68** in 2009 to **49** in 2010.

In 2010, there were **33** WNV info-line calls and an additional **105** requests downloaded from the NYSDOH site. Information was offered via mailed packets or referrals to the Dutchess County website.

As part of Dutchess County's educational effort about diseases caused by ticks and mosquitoes, the Dutchess County Department of Health promoted the Centers for Disease Control and Prevention's "*Fight the Bite Poster Contest*." The "*Fight the Bite Poster Contest*"

was open to all fifth and sixth graders across the nation and designed to be a fun and creative way for students to learn more about the importance of using repellent while outdoors to protect themselves and their families from diseases spread by mosquitoes and ticks.

In 2010, two Dutchess County students, Leona Lau, a 5th grade student at Hagan Elementary School in Poughkeepsie and Rachael Ng, a 6th grade student at Rombout Middle School in Beacon, were the two New York State Winners.

The winning posters were:



B. INFORM AND EMPOWER PEOPLE ABOUT HEALTH ISSUES

Health information, health education, and health communication activities designed to reduce health risk and promote better health are crucial to ensure a healthy community. Putting Public Health on the community agenda is one of the critical tasks local health departments are called to do. The Dutchess County Department of Health accomplished this by increasing its communication with the public through the media, participating in health fairs, community events, as well as engaging in direct community educational presentations.

Health Communication Activities

The **Commissioner's Column** in the **Poughkeepsie Journal** appeared on the second Sunday of each month during 2010. This regular column provided ongoing communication with the general public on a variety of health topics, raising awareness, and understanding of public health issues.

News releases and **Public Service Announcements** (PSAs) were sent out throughout the year to all local media. In 2010, a total of **32** news releases and PSAs and **18** Public Health alerts/advisories and recalls were sent out on a variety of topics.

The Dutchess County Department of Health's **web page** on the County website was also regularly updated to provide information to the public. In 2010, there were a total of **1,030** pages on the website with **383,061** website hits. The homepage received **26,173** hits and the top two most requested hits were the Dutchess County Sanitary Code page with **17,853** hits, and 2nd was the design & construction standard for water and waste management with 5,783 hits. In 2010 the flu schedule page had **4,752** hits (4th most requested page) and the Department's News Release web page had **3,182** requests (13th most requested page) among all Department web pages.

Information telephone lines were available for individuals to find out information on health topics such as West Nile Virus (WNV), Lyme, and Adult Public Flu Clinic Program.

Dutchess County Department of Health staff also organized and participated in **special events** such as Lyme Disease Week, Breast Cancer Month, and World AIDS Day. The Dutchess County Department of Health continues to receive requests for **presentations** for health programs from day care providers, camps, colleges, schools, senior centers, faith-based organizations, and the community at large.

Community Education

In 2010, the Department began a **Sugar in Soda** campaign to help combat childhood obesity. which was developed by the New York City Department of Health (NYCDOH). NYCDOH generously provided us with the art work and ability to add the County's Dutchess County Cares logo to the materials. Posters in both English and Spanish depicting the amount of teaspoons of sugar in a soda bottle and a super size cup were distributed starting November 2010. More than **500** posters were distributed to school districts in Dutchess County and pediatrician offices where parents and children.

The Department continued to implement **Fit4ever**, a school-based childhood obesity prevention program designed to teach youth, 6-8th graders how to make healthful decisions for life. Staff partnered with Hudson River HealthCare and AmeriCorps to conduct a six-week afterschool session at the Poughkeepsie Middle School. Each ninety-minute session consisted of a nutrition lesson, healthy snack, and physical activity. Some successful physical activities included: Swimming, Line dancing, Yoga, Hula-hoop, and Power walking. The students improved their nutrition and physical activity, and committed to maintaining this healthy diet and behavior.

The Environmental Health Services (EHS) Division continued to promote recreational and bather safety in 2010 by offering **drowning prevention** seminars to lifeguards and other members of the general public interested in learning about drowning victim recognition. During 2010, the Sanitarian staff conducted **nine** drowning prevention seminars, training a total of **182** individuals.

EHS also provided **food safety training** to restaurant owner/operators, food service managers, and food service workers. During 2010, EHS offered **twelve** sessions, educating about **83** individuals on important food safety principles, and how to implement effective food safety management systems in their food service establishments. Additionally, educational posters for restaurants on eliminating bare-hand contact with ready-to-eat food (food that will not be cooked) were distributed to the restaurants throughout the county.

In 2010, **188** English and Spanish outreach activities were conducted throughout the county reaching **1,784** individuals through health fairs, health providers, parent groups, clinics, and other County and community-based organizations serving young children. Childhood lead poisoning prevention staff conducted **three** presentations to professional staff reaching approximately **129** individuals

In October 2010, the Department hosted the **10th Annual Mid-Hudson Adult Immunization Coalition Meeting** at the Henry A. Wallace Center in Hyde Park. This annual meeting is an important event in which more than 100 officials from the Centers for Disease Control, New York State Department of Health and Dutchess, Orange, Ulster and Putnam counties gathered to raise awareness and inspire new initiatives in efforts to prevent vaccine preventable illness and disease.



Pictured above left to right: David R. Lynch, Dr. Jean Hudson, Celeste Johnson, Dr. Sherlita Amler, Carol Ryan, and Dr. Michael C. Caldwell.

Additionally DCDOH staff provided presentations on various topics such as Lyme, handwashing, nutrition and physical activity, diabetes, HIV/AIDS/STDs, Go Red Sunday (cardiovascular), and dental care. Over **300** educational/outreach presentations were done reaching more than **8,000** children and adults. Pre- and post-tests and/or as well as satisfaction surveys were utilized for **85%** of these presentations and revealed an overall good rating, as well as good retention of the information presented.

Dutchess County Prescription Discount Card Program (1.877.321.2652)

In 2004, Dutchess County launched a free prescription drug discount card program sponsored by the National Association of Counties (NACo). The Department of Health was tasked to implement this program administered by AdvancePCS, a division of Caremark Rx, Inc. of Nashville, Tennessee. With an average savings of 20% off the retail price of commonly prescribed drugs, the program helps consumers cope with the high price of prescription drugs.

Cards are issued with no enrollment form, no membership fee, and no restrictions or limits on frequency of use. Cardholders and their family members may use the card any time their prescriptions are not covered by insurance. The cards may be used by all county residents, regardless of age, income, or existing health coverage and are accepted at 56 pharmacies throughout the county. A national network of more than 59,000 participating retail pharmacies also will honor the NACo prescription discount card.

For 2010, the program cumulatively has served **9,316** people, with **17,148** prescriptions covered, yielding a year-to-date **\$387,163** or **31.40%** price savings for prescriptions filled.

NACo Prescription Discount Drug Program Monthly Status Report - Dutchess County 2010							
Month	Total Residents Served Per Month	Total Residents Served YTD	Total Prescriptions Covered Per Month	Total Prescriptions Covered YTD	Price Savings Per Month	Price Savings YTD	% Price Savings Per Prescription
January	779	779	1,380	1,380	\$29,768	\$29,768	30.87%
February	694	1,473	1,217	2,597	\$27,020	\$56,788	28.94%
March	801	2,274	1,482	4,079	\$33,098	\$89,886	30.93%
April	792	3,066	1,491	5,570	\$32,774	\$122,660	30.32%
May	774	3,840	1,433	7,003	\$31,720	\$154,380	29.63%
June	820	4,660	1,518	8,521	\$34,264	\$188,644	29.71%
July	834	5,494	1,492	10,013	\$34,176	\$222,820	29.99%
August	810	6,034	1,506	11,519	\$34,128	\$256,948	29.07%
September	761	7,065	1,431	12,950	\$33,484	\$290,432	30.34%
October	766	7,831	1,394	14,344	\$31,054	\$321,486	30.05%
November	762	8,593	1,395	15,739	\$32,199	\$353,685	30.27%
December	723	9,316	1,409	17,148	\$33,478	\$387,163	31.40%

Current totals include prior months adjustments received from NACo's cumulative numbers.

To find out more about this program, log onto www.dutchessny.gov or call **877-321-2652**.

C. COMMUNITY PARTNERSHIPS

Several initiatives addressing chronic diseases were implemented or continued in 2010, including programs addressing childhood obesity, healthy heart, cancer, and diabetes. All of these initiatives involved the community through coalition building and public/private partnerships.

HEART Safe Communities

The **HEARTSafe program** promotes and supports CPR training in the community, public access to defibrillation through strategic placement of automated external defibrillators (AEDs) for use by public safety professionals and other trained community members, early advanced care, and increase of out-of-hospital survival rate.

County Executive William R. Steinhaus and Commissioner of Health Michael C. Caldwell, MD, MPH, presented the *Dutchess County HEARTSafe Community* designations to the Town and Village of Rhinebeck during the Dutchess County Regional Chamber of Commerce's February contact Breakfast in 2010. They were the first municipalities to become **HEARTSafe** in Dutchess County. Currently, there are **54** community and municipal organizations designated as **HEARTSafe** in the county.

Operation Heart Beat

The Dutchess County Public Access Defibrillation (PAD) Program extends to **24** County Government sites with a total of **44** Automatic External Defibrillators (AED) located throughout County-owned buildings.

Each PAD site has a Site Representative to assist with AED maintenance. There are currently **275** certified responders for the buildings. In 2010, a total of **69** AED/CPR drills were conducted at the various sites, followed by a review of CPR and AED protocols.

Comprehensive Cancer Coalition

The Dutchess County Cancer Consortium (DCCC) met **7** times in 2010. The Dutchess County Cancer Control Plan was updated and a resource directory was completed. All information, as well as upcoming events and news were posted on the DCCC website www.cancerfreedutchess.net.

Child Health Plus and Family Health Plus

The Department of Health worked closely with Maternal Infant Services Network to increase Dutchess County referrals to Child Health Plus and Family Health Plus. Information packets were created in English and Spanish and distributed at Department of Health clinics and nursing home visits. A mailing was sent to each superintendent and principal in Dutchess County with complete Child Health Plus information including financial guidelines to be copied and sent home with each child.

Health Care Efficiency and Affordability Law for New Yorkers (HEAL NY)

Dutchess County was part of the Hudson Valley Regional Health Official Network (HVRHON) which received HEAL NY grant funds to put into place local planning efforts aimed at promoting healthy communities by identifying community healthcare needs and aligning the healthcare delivery system with these needs. Based on the findings of the previous community health assessment DCDOH determined three priority areas in which to focus: Chronic Disease Prevention, Maternal Child Health, and Access to Quality Health Care.

Dutchess County conducted **860** consumer and **78** providers' surveys and held consumer and provider focus groups to gather inputs on the status of the healthcare system in the county. The results were shared with local stakeholders toward a strategic action plan addressing the needs of our community.

The Department also helped organize and participated in the Hudson Valley Regional Health Planning Summit on June 10, 2010 in Newburgh, NY with keynote speaker Dr. Richard F. Daines, New York State Commissioner of Health. The summit's purpose was to improve regional health outcomes by identifying cost-effective, community-based, direct delivery models of care, and prevention strategies for specified priority areas.

Senior Housing Study

In partnership with the Office for the Aging, a case-control study was conducted to assess the effects of changes in management, amenities, services and physical environment on residents and their quality of life. A comparison was drawn with nearby The Interfaith Towers (IT), senior housing, owned and managed by a non-profit organization. The findings of this study were documented in a report that was sent to various agencies and was well received by the State Society of Aging.

Lead Primary Prevention Program

In April 2009, Dutchess County Executive William R. Steinhaus and City of Poughkeepsie Mayor John C. Tkazyik announced a new county-city partnership initiative to help prevent childhood lead poisoning. The *Lead Primary Prevention program* targets the City of Poughkeepsie homes in the 12601 zip code, which the New York State Department of Health has identified as the zip code with the highest annual incidence of Blood Lead Level (BLL) in Dutchess County.

In the second year of the grant, October 2009-September 2010, the focus was on the identification of high risk housing units in the City of Poughkeepsie, with conditions conducive to lead, the education of home owners and landlords, and collaboration with building inspectors and housing agencies to further reduce the incidence of childhood lead poisoning. To that end, City of Poughkeepsie Building Department Inspectors conducted **426** housing unit inspections identifying **223** units with potential lead based paint hazards.

The City of Poughkeepsie Building Department provided information on lead paint hazards and the new US Environmental Protection Agency (EPA) training requirements to property owners and contractors applying for building permits. Contractors and property owners were referred to the DCDOH Radiological and Environmental Health Program to obtain training in the US EPA's Lead Safety for Remodeling, Repair and Painting (RRP) Course. Ten (10) RRP classes were held with **220** individuals trained. A one-week long course in the US EPA's Lead Inspector/Risk Assessor course was also held for nine (9) city code enforcement and Department of Health staff.

The Department of Health conducted a Community Outreach Media campaign that included billboards, home shows, Kid's Expo, and health fairs about this serious preventable health issue and emphasized the importance of ensuring that children have a blood lead test at ages one and again at age two, or at any time exposure is suspected. Finally, the Department continues to chair Lead Coalition meetings comprised of twenty critical stakeholders in the community to address lead and housing issues.



Great Halloween Candy Exchange Program



The **Great Halloween Candy Exchange Program** is in the 5th year of implementation for 2010. It involves collaboration between the Department of Health, Astor Services for Children and Families, Children's Medical Group, All Sport Fishkill, Greater Newburgh YMCA and Literacy Connections. Children exchange their Halloween candy for books and fun activity passes donated by All Sport Fishkill, East Fishkill Golf Central and Fun Central for miniature golf, Hyde Park Roller Magic, and McCann Ice Arena. In 2010, more than **1,500** pounds of candy was collected and shipped to the troops in Afghanistan and Iraq.

Other Coalitions

The Department of Health continues to work with Town of Hyde Park Recreation, National Parks Service (FDR and Vanderbilt), and Winnakee Nature Preserve on promotion of the **Hyde Park Healthy Trails Walkabout** featuring **11** trails and a walking promotion in which individuals can earn a patch by completing **5** of the trails.

The Department's personnel continued to participate in various other coalitions, including but not limited to the Eastern Dutchess Rural Health Network, Dutchess County Housing Consortium, American Cancer Society, Cornell Cooperative Extension Eat Well Play Hard (EWPH), Dutchess Healthy Partnership, American Heart Association, and the Children Services Providers Network to name a few.

D. Hackett Hill Park - Woodland and Guinea Community Trails
(1.1 mile loop)

- Woodland trail (green) easy walking, Guinea Community trail (red) moderate, rough surface.
- Park office information desk and seasonal restrooms.
- Parking is at the Hackett Hill parking lot, on East Market St.

E. Winnakee Nature Preserve Trail
(1.3 mile round trip)

- Easy to moderate walking on dirt-surfaced woods roads with rolling hills.
- Solid lines are measured loop, dashed lines are other open trails.
- Parking is in back of Pete's Famous Cafe & grill on route 9, or at end of Tenwilliger Rd. ext.

F. Roosevelt Woods Trail
(3.3 mile round trip)

- Moderate walking on dirt-surfaced woods roads with some steep hills. Tulip-tree markers and green blazes.
- Henry Wallace Visitor Center info desk, restrooms & seasonal cafe are available.
- Parking is at main parking area for the FDR National Historic Site.

G. Roosevelt Farm Lane Trail
(3.6 mile round trip)

- Easy walking on gravel-surfaced woods roads with gently rolling hills.
- Bicycling permitted March - November on Farm Lane. No biking on Red, Yellow, Blue or any other trails.
- Parking at Rt. 9 trailhead, just north of Hyde Park Steakhouse & Brewing Company, or at Rt. 9S across from Val-Kill entrance.

H. Eleanor's Walk
(1.0 mile loop)

I. Top Cottage Trail
(2.0 mile round trip)

- Moderate walking on woodland paths with some steep hills on both Eleanor's Walk (red) and Top Cottage Trail (tulip-tree leaf marker).
- Visitor Center information desk and restrooms are available seasonally.
- Parking is at the Eleanor Roosevelt National Historic Site parking lot.

J. Blue Trail (2.4 mile one-way)

K. White Trail (1.75 mile one-way)

- Enter & park at Mills Mansion, walk down paved road toward river.
- Hike J: Moderate to steep walking. Rolling hills on paved and woods roads with river views.
- Hike K: Moderate walking along river path. From Mills Mansion take Blue Trail to White Trail.

Hyde Park Healthy Trails Walkabout

Walkabout is a project to promote healthy physical activity - walking on trails. Walk at least 5 trails, see great places, get great exercise, and earn a free sew-on patch.

The Hyde Park Trail system includes nearly 16 miles of trails linking parks and historic sites in the town of Hyde Park, NY. The members of the Hyde Park Trail Partnership and many dedicated volunteers have worked since 1988 to build these trails for local residents and visitors alike.

Enjoy them!

D. PROTECTING THE HEALTH AND LIVES OF DUTCHESS COUNTY RESIDENTS

Enforce laws and regulations that protect health and ensure safety

The Department of Health is responsible for the enforcement of the Dutchess County Sanitary Codes, and through agreements with NYSDOH, to enforce many sections of the New York State Sanitary Code. These Codes address many public health issues, including oversight of the food industry, the protection of our drinking water supply, the enforcement of clean air standards, and the follow up of hazards and exposure-related diseases identified in occupational and community settings.

Enforcement of the Sanitary Code includes unannounced regular inspections to determine and assure compliance with current regulations. During these inspections, violations are cited, and hearings and penalties may follow when code items are out of compliance. The following lists the enforcement actions during 2010.

Enforcement Actions

Type	Number of Violations Cited
Agricultural Fairgrounds	2
Food Service Establishments	6
Mobile Home Parks	2
Total	10

Community Sanitation includes: Food served in restaurants and hot dog trucks, hotels/motels, children's camps, day care centers, sewage systems, water supplies, residential housing, and nuisances.

Community Sanitation

Service Type	# Inspections/investigations completed
Food service inspections and reinspections	3056
Nuisance FV and complaint investigations	636
Subdivision and individual lot inspections and reinspections, and field visits	447
Res. Sanitation (housing) and complaint investigations	606
Residential Lead investigation field services	110
Rabies investigations	435

In comparison to 2009 figures, the DCDOH conducted **114** more rabies (bite) investigations during 2010 than in 2009, representing a 36% increase over last year. There were also **49** more residential lead field services conducted in 2010 as compared to 2009. This represents an 83% increase over 2009.

Clean Indoor Air, Tobacco Sales, and Tobacco Use

The New York State Adolescent Tobacco Use Prevention Act (ATUPA) prohibits the sale of tobacco products (including cigars, cigarettes, chewing tobacco) to minors and requires retailers to obtain positive proof that the person buying these products is 18 years of age and older.

The Dutchess County Sanitary Code requires retailers to obtain a County permit in order to sell tobacco products.

Compliance checks are done in order to verify compliance with current regulations using underage youth to verify that businesses are not selling age restricted tobacco products to minors and confirms that proper permits and signage are properly displayed.

Compliance Check Results From October 1, 2009 through September 30, 2010			
# of retailers	# of vending machines	# of inspections conducted	# of tobacco violations
319	3	384 (55 were adult compliance checks)	26 sales to minors

Tobacco sale to minor citations were sustained against three retailers who had previous tobacco sales to minor violations. These facilities, in addition to the assessed fine, were subject to a 6 month suspension of their state and county tobacco permits and, when applicable, their Lottery licenses.

The Environmental Health Services division also enforces the Clean Indoor Air Act (smoking regulations) at bars, restaurants, and other places of employment. From January 1, 2010 to December 31, 2010, **18** complaints of indoor smoking were investigated.

Dutchess County Sanitary Code Article 25 requires all private schools and public school districts each year to file a smoking policy with the DCDOH by September 30th. Additionally, public and private schools that include grades 6 through 12 are to report to the Department twice a year of any smoking/possession violations that occur on school grounds. Public and private schools combined reported **137** smoking/possession violations during the 2009/2010 school year.

Dutchess County Private School and Public School District Reporting From September 1, 2009 through August 31, 2010			
Schools	Percentage of schools smoking policies received	Number of smoking/possession violations during first report period	Number of smoking/possession violations during second report period
Public School Districts (N=14)	100%	77	51
Private Schools (N=29)	89.6%	4 violations	5 violations

Environmental Hazards

The DCDOH reviews spill reports as provided to the Department by the New York State Department of Environmental Conservation (NYSDEC). These spill reports are evaluated for potential impacts on nearby public and private water supplies. The Department of Health also reviews the results of water samples that are collected to monitor water treatment systems installed at spill sites. In 2010, there were **340** reported oil spills in Dutchess County. Additionally the Department of Health also advises NYSDEC if and when water test results meet the criteria for removal of water treatment systems and also coordinates the response to Indoor Air Quality issues arising from oil spills in private residences and commercial buildings.

The Radiological and Environmental Health Program (REHP) staff is certified by the NYS DOH Bureau of Environmental Radiation Protection to conduct inspections of **274** x-ray facilities encompassing **800** x-ray machines at hospitals, educational institutions, and medical, veterinary, and dental offices. These facilities are evaluated for compliance with the NYS Sanitary Code regulations regarding ionizing radiation. REHP Program also is involved in NYSDOH Radiological notifications and planning for radiological emergencies and is certified by the state to respond to Radiation Emergencies.

The Tanning Program conducts inspections of more than **175** tanning beds in Dutchess County to determine compliance with the Dutchess County Sanitary Code and the NYS Public Health Law. Additional program activities include responding to public inquiries and complaints regarding radon, indoor air quality, mold, asbestos, and other topical environmental health issues.

Public Water Supplies (PWS)

The Department currently regulates **681** public water supplies (PWS). In the city of Beacon, and the city and town of Poughkeepsie, approximately 90,000 people rely on public water supply. This represents almost one-third of the population of Dutchess County. These larger community supplies, along with **125** others, are monitored by the Environmental Health Services Division of the Department of Health. Water supplies at facilities under permit (restaurants, motels, camps, day care centers, etc.) are inspected by public health sanitarians assigned to one of three district offices. There are approximately **300** of these water supplies. The remaining supplies (250) are monitored by the Water Enhancement Program staff.

During 2010, as a result of **800** inspections, re-inspections, and sanitary surveys at public water supplies, more than **600** violations were issued. The most common violations cited were: unsatisfactory operation of treatment equipment (67); incomplete or unacceptable reporting by the supplier (57); the presence of a cross-connection between potable and non-potable water (48); failure to monitor for contaminants in a timely manner (38); source water pollution (32); modification to the treatment system without approval (29); and exceeded regulated contaminant level (26).

Samples are taken regularly at PWS to analyze for a variety of contaminants. The combined number of bacteriological samples taken by water supplies and this Department was approximately **6,000** of which 6 % were repeat samples to determine if a violation existed.

Throughout the course of the year at distribution systems and wells, organic chemicals were sampled by water suppliers on **268** occasions, accounting for **497** samples. DCDOH sampled for organic chemicals on **21** occasions, accounting for **25** samples.

One organic chemical of concern remains MTBE (methyl-tertiary-butyl-ether), which, though banned as a gasoline additive in New York State as of January 2004, is still detected in a limited number of wells, wells that had MTBE detections in the past. The water systems served by these wells are treated so that the drinking water available to the consumer meets all NYS standards. There have been no new initial MCL-exceeding instances of MTBE in public water supplies since January 1, 2006.

Continued emphasis is being placed on the detection and monitoring of the presence of chlorides at public water supplies. It is believed that the presence of chloride is in large part attributable to the spreading of salt on roads in winter. Chloride is considered a "secondary contaminant" by EPA in that its presence is not generally a threat to health. It does, however, impart an objectionable taste and can contribute to corrosion of plumbing fixtures and pipes.

The treatment for the removal of chloride is most often "reverse osmosis," which can be expensive and places an undue burden on sewage disposal fields. During 2010, **540** samples were analyzed for chloride, revealing a range of 0 to 3840 parts per million (ppm). Of these, **360** (67%) were below the MCL of 250 ppm. The average level detected across all supplies was 230 ppm.

Engineering

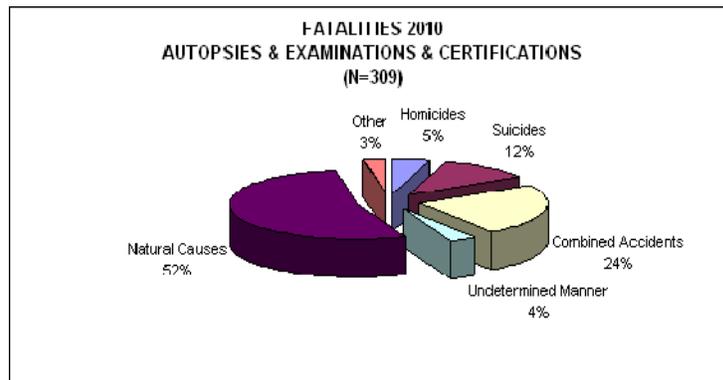
The following are a few highlights of the engineering reviews completed in 2010:

- 1) 801 residential building lots approved, an increase from the 269 approved in 2009.
- 2) 226 plans approved for subdivisions, individual lots, commercial properties, public water and sewage systems, and public swimming pools.
- 3) Dutchess County Department of Health joined with NYSDEC on cooperative well completion report saving duplicate reporting by well drillers to both agencies.
- 4) Bard College temporarily utilized the Town of Red Hook's groundwater supplied system, replaced its stream fed surface water plant and is now utilizing a state of the art microfiltration water treatment plant. In addition to Bard College, Green Haven Correctional Facility has also constructed a state of the art membrane filtration water treatment plant.
- 5) City of Beacon conducted an inflow and infiltration study of their sewage collection system following the occasional occurrence of sewage overflows in the Madam Brett Park area. Immediate remedial actions were conducted to prevent the re-occurrence of sewage overflows. Plan highlights additional long term goals.
- 6) Dogwood Knolls becomes a Town of East Fishkill-owned water system. The resultant Fishkill Plains water district has applied for approval for modifying the water system to treat for iron and manganese.
- 7) DCWWA interconnection on Route 9G is complete and properties in that new district are currently connecting to central water. This includes Hidden Brook, Venture Lake Estates, and Kensington Village.
- 8) Approved plans for a sewage treatment plant for a proposed residential cluster subdivision in Hyde Park, Creekside Estates and for the Park at Inwood, City of Poughkeepsie, a residential development that had redesigned the type of housing to better fit the current housing market.
- 9) DCDOH design approval has been granted for water and sewage services for a Planet Fitness facility located at the NYS Route 55 and Taconic State Parkway intersection. The gymnasium is Phase 1 of a larger project. Plans are currently before the Town Planning Board to add three other buildings on the same site. They will contain a bank, offices, and small retail but have yet to go through review for water and sewage.
- 10) Village of Fishkill completed the construction of its new water treatment facility including the installation of a new well, chlorination system, and equipment automation.
- 11) The Department's Engineering Unit received many applications for approval of remodeling, new construction, and upgrading of water supply and systems expansion.

Medical Examiner Program

In 2010, the Medical Examiner's Office has seen a sharp increase in the number of homicides, suicides, and accidental deaths due to the abuse of illegal drugs and prescription medications. The Medical Examiner's Office works closely with law enforcement and other County agencies, and strives to inform, educate, and support all County and State agencies concerned with the investigation of sudden, unexpected, and violent deaths in the interest of the law and of public health and safety.

The Office is collaborating with neighboring counties and with the New York City Medical Examiner's Office to create a Regional Mass Fatality Management Plan that would facilitate the sharing of resources, expertise and personnel in case of a catastrophic event to the area.



Autopsies and External Exams by Manner of Death

	2006	2007	2008	2009	2010
Total Cases Reported	700	668	703	760	735
Autopsies (A)	202	217	204	207	200
Externals (E) & Certifications (C)	98	86	111	145	109
Total A+E+C	300	303	315	352	309
Total Violent Deaths	110	145	128	136	136
Homicides	8	18	6	6	15
Suicides	22	30	26	27	36
Vehicular Accidents	32	32	32	29	11
Accidental Overdoses	20	30	24	28	36
Other Accidents	22	22	27	34	27
Undetermined Manner	6	13	13	12	11
Natural Causes	179	153	177	208	164
Other	11	5	10	8	9

*Data Source: Dutchess County Medical Examiner's Office*Unclassified: A new category since 2008 includes cases of deaths in utero and skeletal remains*

E. EMPLOYEE ACHIEVEMENTS

- In April 2010, the Department was involved in the investigation of a nation wide E-Coli outbreak involving shredded lettuce. This foodborne illness outbreak investigation provides an example of the kind of work the Department does every day to respond to all outbreaks through its Collaborative Outbreak Response (CORe) team comprised of staff throughout the various divisions. The Department was recognized for their great contribution by the NYSDOH and by the Dutchess County legislature.
- Staff Engineer **Marie Brule-McKiever**, PE spoke at a forum on the effects of road salt at the Cary Institute of Ecosystem Studies
- Public Health Nutrition and Diabetes Education Coordinator, **Ozie Williams**, was recognized in February 2010 by the Poughkeepsie Neighborhood Club for her commitment to public awareness campaign in the area of diabetes, heart, stroke, and childhood obesity.
- In March 2010, **Ozie Williams** was once again recognized by being featured in the Poughkeepsie Journal "Atta Girl" column for her promotion of health, nutrition, and wellness.
- In April 2010, **Christen Hertzog**, Public Health Advisor was recognized by NYSDOH as an outstanding employee who displayed extraordinary dedication to better the health of the residents of Dutchess County and added to the New York State Public Health Honor Roll.



Christen Hertzog has contributed significantly to improving the health of Dutchess County residents through her work with arthropod-borne diseases. Through her work Christen has been responsible for many community outreach and educational innovations including development of the "Tick Smart" curriculum on Lyme disease; and tools like "Tick Check Harry", a plush sheep dog with seeds that represent ticks attached, reinforcing the important health behavior of daily tick checks. Christen has collaborated with NYSDOH on efforts that have measurably reduced the burden of surveillance and reporting activities at the state and local level, and was involved in developing the "Be Tick Free" logo which is now part of all NYS tick-borne disease educational materials. Her work has recently expanded to include West Nile Virus, Malaria, and investigation of other zoonotics such as Q-fever, brucellosis and foreign-borne encephalitis such as Dengue fever. Anaplasmosis, babesiosis, Rocky Mountain spotted fever and other tick-borne diseases remain a staple part of her efforts and she remains steadfast in increasing the county's awareness of these and other arthropod-borne pathogens

