

Health Committee



AGENDA - REGULAR MEETING

OSWEGO COUNTY, NEW YORK

Date/ Time: May 2, 2023 at 11:00 a.m.

Location: Conference Room E - Legislative Office Building 46 East Bridge Street Oswego

COMMITTEE MEMBERS:

James Karasek, Chair	Legislator, 22 nd District
Michael Solowy, Vice Chair	Legislator, 23 rd District
Nathan Emmons	Legislator, 15 th District
Frank Castiglia	Legislator, 25 th District
Marc Greco	Legislator, 24 th District
Richard Kline	Legislator, 12 th District
James Scanlon	Legislator, 16 th District

CALL TO ORDER:

- Pledge of Allegiance

APPROVAL OF MINUTES:

- Approval of the Minutes for the Health Committee's regular meeting on April 4, 2023

RESOLUTIONS:

- HE-1** Resolution to Accept Public Health Infrastructure Funding from Health Research Inc/New York State Department of Health (HRI/NYSDOH)
- HE-2** Resolution Authorizing Budget Modification to Increase Authorization Level of Capital Project No. 134 Silk Road Action
- HE-3** Resolution to Reclassify Public Health Nurse to Senior Program Health Specialist

COMMITTEE REVIEW & DECISIONS:

Approval of Professional Advisory Committee (PAC) meeting minutes

REPORTING DEPARTMENTS:

- Health Department Updates
- 2022 Annual Program Evaluation (APE)
 - Director's Report

ADJOURNMENT:

Health Committee

DRAFT



MINUTES - REGULAR MEETING

OSWEGO COUNTY, NEW YORK

Date/ Time: Tuesday, April 4, 2023 at 11 a.m.

Location: Conference Room E - Legislative Office Building 46 East Bridge Street Oswego, New York 13126

COMMITTEE MEMBERS:

James Karasek, Chair	Legislator, 22 nd District	Present
Michael Solowy, Vice Chair	Legislator, 23 rd District	Present
Nathan Emmons	Legislator, 15 th District	Excused
Frank Castiglia	Legislator, 25 th District	Excused
Marc Greco	Legislator, 24 th District	Present
Richard Kline	Legislator, 12 th District	Present
James Scanlon	Legislator, 16 th District	Excused

STAFF AND GUESTS:

Vera Dunsmoor Jennifer Walts Noelle Salmonsen Phil Church

CALL TO ORDER:

A Regular Meeting of the Health Committee was called to order at 11:02 a.m. by Committee Chairman James Karasek with Deputy Clerk of the Legislature present. The meeting commenced with the Pledge of Allegiance

APPROVAL OF MINUTES:

Motion to approve the meeting minutes: Legislator Kline

Second: Legislator Solowy

Vote: Unanimous, motion carried

The minutes for the Health Committee's Regular Meeting on March 3, 2023 are approved

RESOLUTIONS:

HE-1 Resolution Appointing Member to the Oswego County Board of Health

Motion to approve: Legislator Greco

Second: Legislator Kline

Vote: Unanimous, motion carried

HE-2 Resolution to Transfer Funds to Capital Project No. 134 from the Insurance Recovery Fund

Motion to approve: Legislator Greco

Second: Legislator Solowy

Vote: Unanimous, motion carried

- HE-3** Resolution to Reclassify Assistant Public Health Engineer to Public Health Engineer
Motion to approve: Legislator Greco
Second: Legislator Kline
Vote: Unanimous, motion carried
- HE-4** Resolution to Reclassify Public Health Engineer to Supervising Public Health Engineer
Motion to approve: Legislator Greco
Second: Legislator Solowy
Vote: Unanimous, motion carried
- HE-5** Resolution Authorizing the Execution of an Agreement with Nascentia Health at Home (“Nascentia”) Regarding Oswego County Hospice Transition Services
Motion to approve: Legislator Kline
Second: Legislator Solowy
Vote: Unanimous, motion carried

COMMITTEE REVIEW & DECISIONS:

None

REPORTING DEPARTMENTS:

Director Vera Dunsmoor reviews Health Department “snapshot”

ADJOURNMENT:

Motion to adjourn at 11:30 p.m. Legislator Kline
Second: Legislator Greco
Vote: Unanimous, motion carried

DRAFT

Matthew Reitz
Deputy Clerk of the Legislature

RESOLUTION NO.

May 11, 2023

**RESOLUTION TO ACCEPT PUBLIC HEALTH INFRASTRUCTURE FUNDING
FROM HEALTH RESEARCH INC/NEW YORK STATE DEPARTMENT OF
HEALTH (HRI/NYSDOH)**

By Legislator James Karasek:

WHEREAS, The Oswego County Health Department has been awarded \$687,346 over five years to strengthen public health workforce and foundational capabilities; and

WHEREAS, Funds may be used to strengthen the public health workforce through hiring new staff, retention of current staff, upgrades to the workplace, provide public health training, and provide public health support services; and

NOW, upon recommendation of the Health Committee of this body, with the approval of the Finance and Personnel Committee, be it

RESOLVED, that the County Treasurer be, and hereby is, authorized to transfer the funds from and to the account as shown on the attached budget modification request, and be it further

RESOLVED, that a certified copy of this resolution delivered to the County Treasurer shall be their authority to affect such transfer and make such adjustments.

RESOLUTION PASSED/FAILED, WITH A VOICE/ROLL CALL VOTE

YES:

NO:

ABSENT:

ABSTAIN:

OSWEGO COUNTY

VERA DUNSMOOR, DIRECTOR OF PUBLIC HEALTH
PHONE 315.349.3545



HEALTH DEPARTMENT

70 BUNNER STREET, OSWEGO, NEW YORK 13126-3357
FAX 315.349.3435

INFORMATIONAL MEMO

SUBJECT: Public Health Infrastructure Grant

PURPOSE: To accept the Public Health Infrastructure funding to strengthen the Oswego County Health Department.

SUMMARY: Health Research Inc./ New York State Department of Health (HIRI/NYSDOH) has awarded the Oswego County Health Department (OCHD) with up to \$687,346 over five years, to strengthen public health workforce and foundational capabilities. Grant funds may be used to strengthen the public health workforce through hiring of public health positions, supporting retention of current staff, making upgrades to the workplace to increase employee satisfaction, providing public health training, and providing public health support services to the public health department. Funds are intended to augment public health staffing capacity and cannot supplant existing commitments.

RECOMMENDED

ACTION: To approve and accept the Public Health Infrastructure funding, and the corresponding budget modification.

COUNTY OF OSWEGO

BUDGET MODIFICATION REQUEST

[illegible]

COMMITTEE SIGNATURES

DATE

COMMITTEE SIGNATURES

DATE

COUNTY TREASURER	DATE
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COUNTY TREASURER	DATE
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HUMAN RESOURCES DIRECTOR	DATE
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HUMAN RESOURCES DIRECTOR	DATE
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COUNTY ADMINISTRATOR

COUNTY ADMINISTRATOR

DEPARTMENT HEAD	DATE
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DEPARTMENT HEAD	DATE
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RESOLUTION NO.

May 11, 2023

**RESOLUTION AUTHORIZING BUDGET MODIFICATION TO INCREASE
AUTHORIZATION LEVEL OF CAPITAL PROJECT No. 134 SILK ROAD
ACTION**

By Legislator James Karasek:

WHEREAS, this body has heretofore established Capital Reserve No. 195 – Silk Road Remediation, and

WHEREAS, the Health Department has identified various maintenance needs at the Silk Road Landfill.

NOW, on recommendation of the Health Committee, with the approval of the Finance and Personnel Committee, be it

RESOLVED, that a Treasurer is hereby authorized to make transfers from Capital Reserve No. 195 according to the attached budget modification and that the authorization level of Capital Project No. 134 – RD/RA-Silk Road Action be increased by \$112,920.

RESOLUTION PASSED/FAILED, WITH A VOICE/ROLL CALL VOTE

YES:

NO:

ABSENT:

ABSTAIN:

**INFORMATIONAL MEMORANDUM**

Subject: Budget modification for Silk Road Landfill.

Purpose: To increase the authorization level of CP#134.

Summary: The Silk Road Landfill falls under the jurisdiction of the USEPA. Maintenance is needed for the site to stay compliant with the EPA O&M guidelines. Itemized tasks below with detailed cost estimates in the attached:

1. Annual engineering contract for reviewing monitoring data, quarterly site inspections, drafting reports to the EPA, RFP/contract development, etc.
2. Well sampling materials, equipment, and lab testing.
3. Leachate monitoring and disposal.
4. EPA fees.
5. Site maintenance for mowing, drainage/erosion repairs, vector/vermin control, fence repairs and parts, etc.

The estimated total cost of the above is \$129,000 while CP#134 currently has \$16,080 available in the account.

Recommended

Action: The Health Committee recommends a budget modification that authorizes CP#134 to be increased by \$112,920 for annual maintenance needs.

**COUNTY OF OSWEGO
BUDGET MODIFICATION REQUEST**

From			To		
ACCOUNT NUMBER			ACCOUNT NUMBER		
ORG.	OBJECT	PROJ.	ORG.	OBJECT	PROJ.
H	450310	134			
			H	529000	134
			A	599014	195
TOTAL AMOUNT					

COMMITTEE SIGNATURES _____ DATE _____

COUNTY TREASURER DATE

HUMAN RESOURCES DIRECTOR DATE

COUNTY ADMINISTRATOR DATE

DEPARTMENT HEAD DATE

RESOLUTION NO.

May 11, 2023

**RESOLUTION TO RECLASSIFY PUBLIC HEALTH NURSE TO SENIOR
PROGRAM HEALTH SPECIALIST**

By Legislator James Karasek:

WHEREAS, due to a current nursing shortage, this position will be reclassified as a non-nursing position; and

WHEREAS, this position will oversee all immunization activities associated with the Oswego County Health Department; and

NOW, upon recommendation of the Health Committee and with approval of the Finance and Personnel Committee of this body, so be it

RESOLVED, that position #4003518802 Public Health Nurse be reclassified to Senior Health Program Specialist, Grade 10 in the Oswego County CSEA Bargaining Unit with an hourly rate of \$23.14, which will not result in any increase to the total Preventive Salaries and Wages line, therefore, no budget modification necessary. This position will remain eligible for Article 6 and grant reimbursement; and be it

RESOLVED, that certified copies of this resolution delivered to the County Treasurer, Budget Officer, and Director of Human Resources shall be their authority to make such changes.

RESOLUTION PASSED/FAILED, WITH A VOICE/ROLL CALL VOTE

YES:

NO:

ABSENT:

ABSTAIN:

OSWEGO COUNTY

JIANCHENG HUANG, DIRECTOR OF PUBLIC HEALTH
PHONE 315.349.3545



HEALTH DEPARTMENT

70 BUNNER STREET, OSWEGO, NEW YORK 13126-3357
FAX 315.349.3435

INFORMATIONAL MEMORANDUM

SUBJECT: Request for reclassification of one position in the Preventive Division.

PURPOSE: To reclassify a position from PHN to Sr Health Programs Specialist

SUMMARY: Due to a current nursing shortage, this position will be reclassified as a non-nursing position. This position will oversee all immunization activities associated with the Oswego County Health Department. In the past, this staff member focused on several different public health programs limiting the time spent on this essential program. The COVID 19 pandemic has proven that this position is essential to the health of the public. Job duties include: ensuring that all Immunization Action Plan grant activities are completed, overseeing all immunization clinics including back to school, general immunizations, COVID 19, and flu. When there is a vaccine preventable threat to public health (recent hepatitis A outbreak, measles, mumps), this staff member will take the lead on preventing further spread using vaccinations. Assisting the with Lead Poisoning Prevention Program as needed This position will be vital to the success of the preventive department and meeting the public health needs of the community.

This would not result in any increase to the total Preventive Salaries and Wages line, therefore, no budget modification necessary. This position would remain eligible for Article 6 and grant reimbursement.

**RECOMMENDED
ACTION:**

The Health Committee approve and recommend the reclassification of position # 403518802 from PHN to Sr Health Program Specialist.

POSITION REQUEST/DELETE BUDGET FORM

DEPARTMENT: Health

DIVISION/UNIT (NUMBER): A4035

A. NEW POSITION REQUEST

1. Position Title Requested:

2. Bargaining Unit: ☐ CO-OP ☐ Highway ☐ Silver Star ☐ Deputies ☐ OCPA ☐ Mgmt.

3. a. Bargaining Unit – Hourly Rate from Grade plan: _____ Grade: _____

b. Management or OCPA – Salary Requested: _____ Grade: _____

4. Percent of Federal and or State Reimbursement: _____ Fringe Reimbursed: ☐ Yes ☐ No

5. Justification of Need (Use additional sheets as necessary):

6. Complete New Position Duties Statement (p. 3 & 4).

B. RECLASSIFICATION REQUEST

1. Present Title: Public Health Nurse 2. Position #: 403518802

3. Present Salary/Hourly: 29.15 Grade: 13

4. Requested Title: Senior Health Program Specialist

5. Requested Salary: _____

a. Bargaining Unit: CSEA Hourly Rate: 23.14 Grade: 10

b. Management or OCPA – Salary Requested: _____ Grade: _____

6. Percent of Federal and/or State Reimbursement: 80% Fringe Reimbursed: ☒ Yes ☐ No

7. Justification of Need (use additional sheets as necessary): Due to a current nursing shortage, this position will be reclassified as a non-nursing position. This position will oversee all immunization activities associated with the Oswego County Health Department. In the past, this staff member focused on several different public health programs limiting the time spent on this essential program. The COVID 19 pandemic has proven that this position is essential to the health of the public. Job duties include: ensuring that all Immunization Action Plan grant activities are completed, overseeing all immunization clinics including back to school, general immunizations, COVID 19, and flu. When there is a vaccine preventable threat to public health (recent hepatitis A outbreak, measles, mumps), this staff member will take the lead on preventing further spread using vaccinations. This position will be vital to the success of the preventive department and meeting the public health needs of the community.

8. Complete New Position Duties Statement (p. 3 & 4).

C. POSITION DELETION

1. Title to be Deleted:

2. Position #

3. Salary Savings: (See attached the memo)

4. Reason for Deletion:

Civil Service Law: Section 22. Certification for positions. Before any new positions in the service of a civil division shall be created or any existing position in such service shall be reclassified, the proposal therefore, including a statement of the duties of the position, shall be referred to the municipal commission having jurisdiction and such commission shall furnish a certificate stating the appropriate civil service title for the proposed position or the position to be reclassified. Any such new position shall be created or any such position reclassified only with the title approved and certified by the commission.

OSWEGO COUNTY DEPARTMENT OF PERSONNEL

NEW POSITION DUTIES STATEMENT

Department head or other authority requesting the creation of a new position, prepare a separate description for each new position to be created except that one description may cover two or more identical positions in the same organizational unit. Forward two typed copies to this office.

1. DEPARTMENTS/SCHOOL
DISTRICT/TOWN OR VILLAGE
Health

DIVISION, UNIT, OR WORK SECTION
Preventive

LOCATION OF POSITION

2. DESCRIPTION OF DUTIES: Describe the work in sufficient detail to give a clear word picture of the job. Use a separate paragraph for each kind of work and describe the more important or time-consuming duties first. In the left column, estimate how the total working time is divided.

Title requested: *Senior Health Program Specialist*

PERCENT OF
WORK TIME

30

Coordinates the overall operation of the immunization program, including overseeing the implementation of project activities; coordination with other agencies, development of materials, conduct trainings on the importance of vaccinations

5

Work as the main point of contact to the public and private providers, Federally Qualified Health Center's, Community Health Centers, Correctional and Long-Term Care (LTC), primary schools, college and universities, hospitals, etc.

30	Creating the Oswego County Immunization Action Plan in coordination with New York State Department of Health, completing all required objectives set forth by the Immunization Action Plan
25	Overseeing all immunization clinic activities, ordering vaccines, overseeing proper receipt and storage of vaccine deliveries, documenting vaccine inventory information and organizing vaccines within storage units, setting up temperature monitoring devices, reading and recording storage unit temps a minimum of two times each workday, reviewing and analyzing temperature data to identify shifts in temperature trends, rotating stock at least weekly so vaccine with the earliest expiration dates are used first, removing expired vaccine from storage units, responding to out-of-range temperatures (temp excursion), maintaining all documentation, such as vaccine inventory and temperature logs
5	Assisting the with Lead Poisoning Prevention Program as needed
5	Other duties as assigned
	(Attach additional sheets if more space is needed)

5/01

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3. Names and titles of person supervising (general, direct, administrative, etc.).		
NAME	TITLE	TYPE OF SUPERVISION
Jennifer Purtell	Supervising Public Health Nurse	Direct Supervisor
Jodi Martin	Director of Preventive Services	Supervisor
4. Names and titles of persons supervised by employee in this position.		
NAME	TITLE	TYPE OF SUPERVISION
5. Names and titles of persons doing substantially the same kind and level of work as will be done by the incumbent of this new position.		
NAME	TITLE	LOCATION OF POSITION
6. What minimum qualifications do you think should be required for this position?		
Education: <input type="checkbox"/> High School _____ years		
<input checked="" type="checkbox"/> College 4+ years, with specialization in Bachelors in human services or wellness management		
<input type="checkbox"/> Other _____ years, with specialization in _____		

Experience (list amount and type): At least five years' experience in Public Health Nursing Programs

Essential knowledge, skills and abilities: *community health resources and programs, programs, policies, and procedures of agency, investigating, interviewing, case recording and report preparation techniques*

Microsoft programs (Word, Excel, PPT), experience with electronic medical records, excellent communication skills, multitasking ability

Type of license or certificate required:

7. The above statements are accurate and complete.

Date:

Title:

Signature:

CERTIFICATE OF OSWEGO COUNTY PERSONNEL OFFICER

8. In accordance with the provisions of Civil Service Law (Section 22), the Oswego County Personnel Officer certifies that the appropriate civil service title for the position described is:

POSITION CLASS TITLE:

JURISDICTIONAL CLASS:

Date:

Signature:



OSWEGO COUNTY HEALTH DEPARTMENT 2022 ANNUAL PROGRAM EVALUATION

CORE PUBLIC HEALTH, HEALTHY FAMILIES, HOSPICE, MATERNAL CHILD HEALTH, PUBLIC HEALTH
CORP FELLOWSHIP, PUBLIC HEALTH EDUCATION, PUBLIC HEALTH EMERGENCY PREPAREDNESS

Vision: a healthy, thriving community for all.

Mission: to promote wellness, prevent disease, and protect all who live, work, play or learn in Oswego County.

Core Values: accountability, collaboration, compassion, education, excellence, health equity, integrity, leadership, service, sustainability, and wellness.

Introduction

The Oswego County Health Department (OCHD) evaluates programs annually to assess trends in service delivery, patient statistics, quality assurance outcomes and to develop goals for the upcoming year. The Annual Program Evaluation is presented each year to the Professional Advisory Committee (PAC) for review. **The Committee is responsible for determining whether services provided were appropriate, adequate, effective, and efficient, and whether the agency's goals were met.**

In terms of the goals for 2023, this report reflects substantial effort to overcome/minimize existing problems, improve care coordination, ensure compliance with Medicaid/Medicare requirements, and maintain an active Quality Assessment and Performance Improvement (QAPI) program. The program conducts continuous quality improvement initiatives that enhance quality of care and minimize risk to the agency. After identifying areas for improvement, they are prioritized. Those that are highest in risk are selected for Performance Improvement Projects (PIPs).

2022 Hospice Program

The Hospice Program provides end of life services to terminally ill patients and their families. The focus is specifically on comfort, dignity and control of distressing symptoms experienced by the patient. Hospice provides palliative care, not curative treatment. Hospice strives to meet the patient's physical, emotional, social, and spiritual needs as well as the needs of the family. Services are delivered in the home by a team of hospice professionals and volunteers. Due to a staffing shortage, a closure plan was created in June of 2022 and approved by NYSDOH and the county legislature. The Hospice department stopped accepting referrals in May and the last patient was referred to Hospice of Central New York in November. Hospice of Central New York, Hospice of Jefferson County, and Hospice and Palliative Care Inc. of New Hartford is working with the NYSDOH and providing care to hospice patients in Oswego County.

Bereavement Services: Assists relatives and friends through the grieving process for 13 months after their loved one has passed away. Bereavement services will continue until the last bereavement family is discharged in September 2023.

Camp Rainbow of Hope: Is a 2-night 3-day residential camp experience for children ages 8-12 who have experienced the loss of a loved one. Camp is a place where children can acknowledge their loss, develop coping skills, and realize they are not alone. Campers are teamed up with “Big Buddies” who are with them throughout the program to help process their experience. Registered nurses, social workers, teachers, and camp professionals lead the program. Camp Rainbow will continue in 2023.

Friends of Hospice: Is committed to supporting hospice patients and families in Oswego County through public awareness, professional education, and financial assistance. Friends of Hospice operates and funds Camp Rainbow of Hope. Friends of Hospice will continue to serve patients and families under hospice care in Oswego County.

Table 1. Statistics for the Hospice Program, 2020-2022

Hospice			
	2020	2021	2022
Referrals	254	176	107
Admissions	128	83	54
Non-Admits	126	93	53
Discharges	129	90	62
Avg LOS (days/episode)	47.29	49.24	46.19

Figure 1. Visit by Discipline for the Hospice Program, 2022

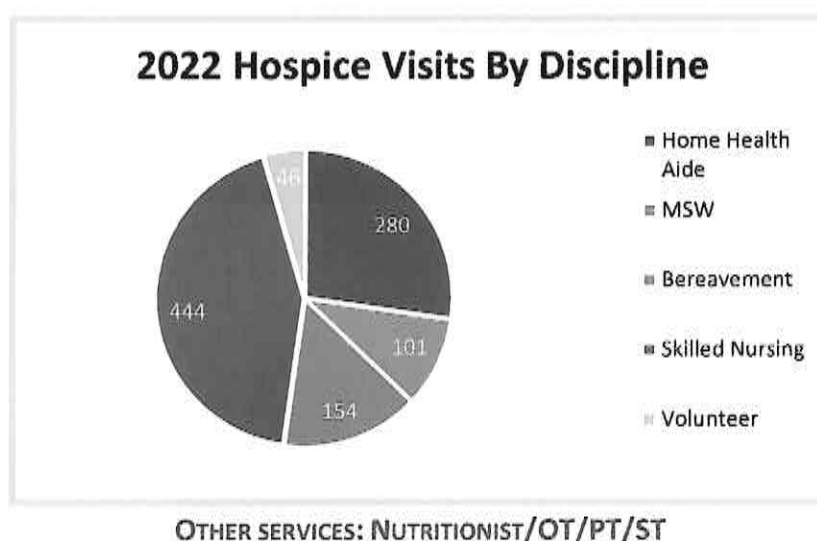


Table 2. The Consumer Assessment of Healthcare Providers and Systems (CAHPS) Survey Results

12 Month Period – 22 Surveys Returned OCHD vs. NYS			
Team Communication	76% vs 84%	Help with Symptoms	72% vs 76%
Timely Help	78% vs 76%	Hospice Care Training	80% vs 76%
Respect	95% vs 92%	Overall Rating	86% vs 84%
Emotional/Religious Support	89% vs 91%	Recommend this Hospice	86% vs 87%
Overall Composite - 81% vs 83%			

Table 3. Hospice Performance Improvement Projects

HOSPICE	1st Q 2022	2nd Q 2022	3rd Q 2022	4th Q 2022
The 485 Plan of Care	98	99	D/C	NA
Personnel Record	100	100	D/C	NA
Aide Assignments and Duties	99	99	D/C	NA
Diabetes Management	100	100	D/C	NA
Fall Prevention	100	100	D/C	NA
HIS Submission HQR	100	100	100	NA

Hospice Incidents

A total of 14 incidents occurred in the Hospice program in 2022. There were no medication recalls or equipment issues reported. Falls (13) represented most incidents reported. The other incident was a medication error.

The QAPI committee categorizes levels of falls according to the severity of injury, enabling the agency to identify patterns and further investigate root causes contributing to the occurrence of incidents.

Table 4. Client Falls by Level of Severity, 2022

Falls	Hospice
<u>Level 1</u> No injury sustained	8
<u>Level 2</u> Minor Injury	5
<u>Level 3</u> Moderate Injury	0
<u>Level 4</u> Severe Injury	0
Total	13

Hospice Complaints

Hospice must measure, analyze, and track quality indicators, including adverse patient events, and other aspects of performance that enable the assessment of care, hospice services, and operations. Hospices may choose to develop their own definition for the term “adverse event” or use a definition developed by a national accrediting organization or industry organization. Oswego County Hospice policy states that any “founded” complaint is an Adverse Event.

There were no complaints lodged in 2022.

Hospice Challenges

1. Staffing shortage resulting in closure of the program. A plan was submitted in June of 2022 and accepted. Planned official closure is December 2023.

2023 Hospice Goals

1. Provide Bereavement Services to families for the full 13 months until the last family is discharged in September 2023.

2022 Preventive Services

Preventive Services provide a wide variety of preventive health services in the areas of maternal/child health, personal care assistance, chronic health issues, and communicable disease control. The goal of Preventive Services is to promote the optimum level of health for all residents of Oswego County through a full complement of comprehensive preventive services.

- Maternal Child Health home visits by Registered Professional and/or Licensed Practical Nurses
- Communicable Disease Prevention and Control: surveillance of all communicable diseases
- Referral for diagnosis and treatment of Sexually Transmitted Diseases (STDs)
- Tuberculosis Control Program
- Immunization Program and Clinics
- Lead Poisoning Prevention Program: prevention, testing, investigation, and case coordination
- County Employee Health Screenings
- Rabies Pre- and Post-Exposure Vaccination Program
- Uniformed Assessment System (UAS) for Personal Care Assistance (PCA) and the Care at Home Program
- Patient Review Instrument (PRI) assessments for nursing home placement

Maternal Child Health/Licensed Home Care Service Agency Statistics

Table 5 provides data for referrals, admissions, discharges, and length of stay (LOS). The Supervising Public Health Nurse is working with staff to increase the number of referrals through increased community/provider outreach. Nursing visits were the predominant service in the Preventive, LHCSA and PCA programs.

Table 5. Statistics for MCH/LHCSA Programs, 2021-2022

	MCH/LHCSA		PCA	
	<u>2021</u>	<u>2022</u>	<u>2021</u>	<u>2022</u>
Referrals	89	79	24	4
Admissions	48	43	19	4
Non-Admits	41	36	5	0
Discharges	38	47	10	22
Avg LOS (days/episode)	50.05	97.18	2090.3	1154.23
Nursing Visits	174	187	71	76
MSW	0	0	0	0

Table 6 depicts the progress made on areas for improvement that were identified in 2021/2022 by the QAPI Program. These Performance Improvement Plans (PIPs) were developed and monitored quarterly. Individuals who provide services are critical to implementing a performance plan and are included in plan development. Staff members are regularly encouraged to offer suggestions, comments, and recommendations regarding methods and processes to ensure a participative approach and to achieve the best possible solutions to problems. In addition, the plan is data-driven and identifies specific benchmarks and timeframes for improvement and methods for ongoing monitoring.

Table 6. MCH/LHCSA Performance Improvement Projects

MCH/LHCSA	1st Q 2022	2nd Q 2022	3rd Q 2022	4th Q 2022
Plan of Care	97	100	100	100
Current Orders Signed/Requested	100	100	100	100
Change of Plan/Treatment Orders Signed and Requested	100	100	100	100
Percentage of Surveys Collected	78%	38%	75%	50%
MCH Client Satisfaction Surveys	98% Excellent 2% V Good 0% Good	92% Excellent 0% V good 8% Good	96% Excellent 4% V Good 0% Good	100% Excellent 0% V Good 0% Good

Diagnostic & Treatment (D&T) Center Statistics

Table 7 provides data on non-home visiting services offered through the Preventive Department. As evidenced in the table, the number of elevated lead cases has nearly doubled in the past couple of years. This is most likely due to families deferring routine medical care during the pandemic to limit in-person visits. Table 7 also shows a vast decrease in the number of COVID-19 immunizations administered. In 2021, OCHD began offering COVID-19 immunizations. As more people became up to date and with vaccines more widely available, the number administered by OCHD in 2022 decreased substantially.

Table 7. D&T Clients Served in 2020 - 2022

D&T Center Clients Served			
	2020	2021	2022
Elevated Lead Cases	55	68	101
Latent Tuberculosis	2	2	1
Active Tuberculosis	0	0	0
Direct Observation of Therapy (DOT)	0	0	0
Video Direct Observation of Therapy (VDOT)	0	0	0
General Immunizations Administered	1,588	1,431	1,502
COVID-19 Immunizations Administered	N/A	21,444	2,821
Immunization Clinics (including COVID-19 Clinics)	150	95	83

Table 8 shows progress made on areas in need of improvement that were identified in 2021/2022 by the QAPI Program. Performance Improvement Plans (PIPs) were developed and monitored throughout the year. The Preventive SPHN is working with staff to develop ways to increase the number of surveys collected from residents seeking services at the D&T Center. The New York State Department of Health performed an audit of the D&T Center in early October 2022. After the inspection was completed, three deficiencies were identified. In accordance with our QAPI program, all three deficiencies were made into PIPs to monitor compliance.

Table 8. D&T Performance Improvement Projects

D&T	1st Q 2022	2nd Q 2022	3rd Q 2022	4th Q 2022
# of D&T Client Surveys Collected	0 Surveys	3 surveys	4 surveys	2 surveys
Survey Rating Scale	NA	100% Excellent 0% V Good 0% Good	100% Excellent 0% V Good 0% Good	100% Excellent 0% V Good 0% Good
Annual Mandatory Staff Trainings Tag T2107 **	NA	NA	All mandatory trainings are up to date except for Human Trafficking and DV – which are scheduled for Dec. and Jan.	Will start monitoring 1 st quarter 2023
Policy and Procedure Review – Tag 2079 **	NA	NA	All policies have been updated and will be reviewed at 3 rd Q PAC	Will start monitoring 1 st quarter 2023
Advance Directives Tag Y4360 **	NA	NA	Updated in P&P. Quarterly monitoring to take place	Will start monitoring 1 st quarter 2023

New York State Performance-Based Incentive Program

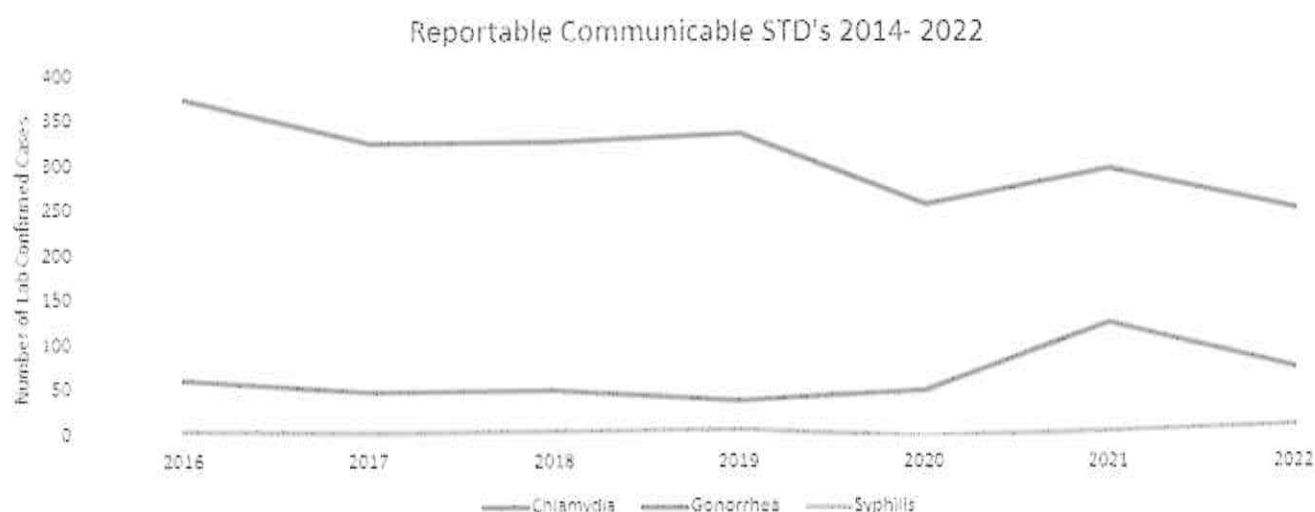
For the 2021-2022 LHD Performance Incentive Program, NYSDOH focused on documenting the LHD experience in responding to the COVID-19 pandemic. The NYSDOH wanted to learn more about successes and challenges in the local response. Three measures were addressed. Measure one was a quantitative survey on LHD response to the pandemic. Measure two was qualitative/open-ended survey of pandemic responses. Measure three was to create a public-facing summary of the LHD's pandemic response, which is currently available at health.oswegocounty.com. The Oswego County Health Department was **awarded a total of \$22,208** for successful completion of all measures.

Sexual Transmitted Diseases (STDs)

Figure 2 provides data on STDs in Oswego County. Chlamydia accounts for the largest proportion of reported STDs in Oswego County. Over the past several years there has been a slight decline in the number of reported cases. The drop in cases is likely due to decreased STD screening and underdiagnosis rather than a reduction in new infections. In 2021, gonorrhea cases in Oswego County increased by 146% when compared to 2020. Although the number of cases in 2022 has decreased, the current rate is higher than we have seen in the past. Finally, syphilis rates in Oswego County continue to rise. The rate of newly reported cases has nearly doubled from 2021 to 2022. Oswego County STD data is consistent with increasing national trends.

To combat this public health issue, OCHD implemented the Universal Expedited Partner Therapy (EPT) program in January 2023. EPT is the clinical practice of treating the sex partners of patients diagnosed with chlamydia, gonorrhea, and/or trichomonas by providing prescriptions or medications to the patient to take to their partner without the health care provider first examining the partner. All known confirmed cases of chlamydia, gonorrhea, and/or trichomonas will be able to request partner treatment through OCHD.

Figure 2. Reportable Sexually Transmitted Diseases by Year



Tickborne Disease

Tickborne diseases (TBDs) have been increasing in Oswego County since they were first recorded in 2009. As of 2022, the County has reported laboratory-confirmed cases of five different TBDs (4 with local transmission and 1 likely travel-related). **On January 1, 2022, the case definition for Lyme disease changed and no longer requires case investigation. This means that a confirmed diagnosis will be based solely on laboratory data. With this change, NYSDOH expected annual Lyme disease rates would increase by 20%. According to NYSDOH communicable disease data, Oswego County's Lyme frequency increased by over 400% from 2021 to 2022. This increase is likely in part due to the change in case definition and more residents seeking medical care now that the COVID-19 restrictions have been lifted.

Table 9. Tickborne Diseases Frequency in Oswego County

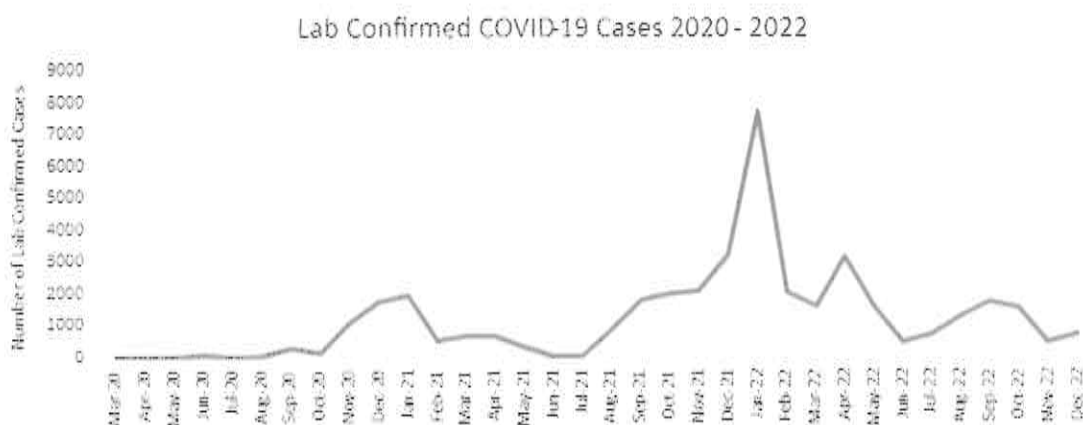
Disease	Year: # Cases
Lyme disease	2009:5; 2011:19; 2013:63; 2018:49; 2019:61; 2020:31; 2021:55; 2022:283
Anaplasmosis	2021:3; 2022:7
Babesiosis	2013:1; 2021:4; 2022:2
Ehrlichiosis	2014:1; 2018:2; 2019:1; 2020:2; 2021:2; 2022:3
Rocky Mountain Spotted Fever	2011:1; 2014:1; 2017:1; 2019:1; 2022:1

* Data obtained from the New York State Communicable Disease Electronic Surveillance System

COVID 19

During 2022, Oswego County reported 23,375 confirmed cases of COVID 19 (Figure 3) and 77 COVID 19 related deaths. Response shifted from case investigations to immunization and education. Case investigations ended on April 28, 2022, however the health department continued to investigate clusters, assist with health care facilities, businesses, schools, and any other facilities that needed assistance. Although the number of incoming calls decreased, the COVID 19 hotline continues to operate. COVID 19 immunization clinics are offered monthly. In 2022, the health department administered 2,821 doses of COVID 19 vaccines during 49 clinics and administered 180 doses to homebound residents.

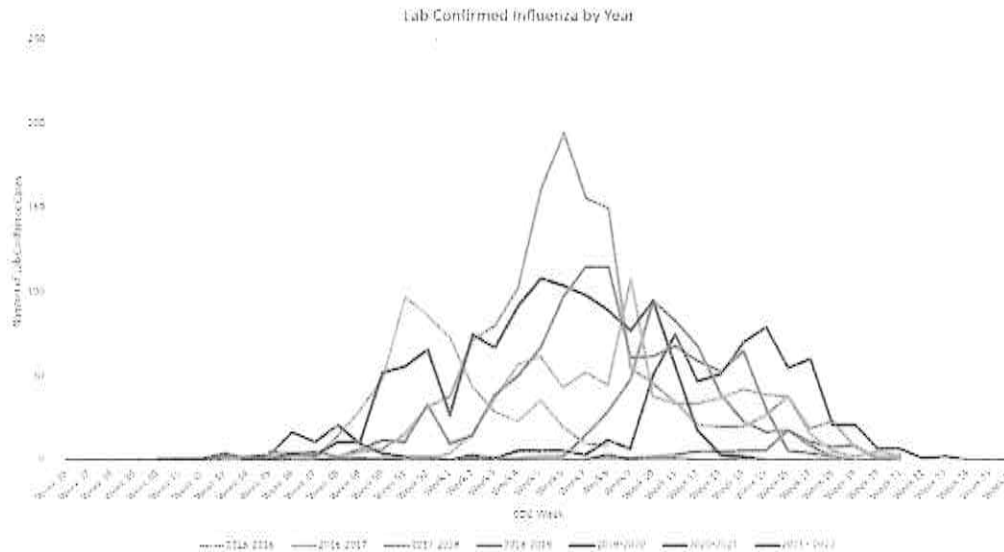
Figure 3. Laboratory Confirmed COVID 19 Cases



Flu Data by Season

Figure 4 illustrates flu activity in Oswego County from 2015 through 2022. Centers for Disease Control (CDC) reports are based on lab confirmed cases and does not account for rapid flu tests in the physician's office or people that do not seek treatment. According to the New York State Department of Health, 44 pediatric deaths occurred in the United States during the 2021-2022 season. Flu numbers increased over the previous year but were still considered mild as compared to pre-pandemic activity. There were two distinct waves noted and was predominately influenza A virus. Adoption of mitigation measures intended to prevent the spread of COVID 19 may have impacted the timing or severity of influenza activity during the 2021-2022 season.

Figure 4: Laboratory Confirmed Influenza Cases by Year



Preventive Accomplishments

1. Jennifer Purtell, SPHN, was accepted into the Leadership Oswego County Program.
2. Jennifer DiGregorio, PHN, was selected to take part in the Rural Health Network funded Certified Lactation Consultant Program.
3. Diane Oldenburg, APHE and Jodi Martin DPHS presented *Pandemic Response: Promoting Health Equity in a Rural County Using a Phone Bank* at the Annual American Public Health Nurses Association Conference.
4. The New York State Public Health Fellowship Corps allowed for the creation of an Epidemiologist and a RN position.

Preventive Challenges

1. Staffing has been a challenge for the Preventive Department. From December 2019 through October 2022, the staff turnover rate was 100%.
2. In late 2022, our seasoned Immunization Action Plan (IAP) Coordinator unexpectedly and suddenly resigned, leaving one of the biggest programs in the department in disarray. The SPHN assumed the coordinator role in addition to being the Lead Poisoning Prevention Program (LPPP) Coordinator.
3. For much of 2022, the department was without a clerical staff member, leaving the clerical duties to the SPHN and nursing staff. This included answering phone calls that ring into one of the main numbers at the health department.
4. Extremely busy back to school immunization season and an increased number of residents requesting homebound vaccination visits put a strain on the understaffed department.
5. Although the Public Health Corp Fellows program can be seen as a major accomplishment for the department, it also posed challenges. Existing staff members took the opportunity to join the program, which left additional vacancies in other departments.

2023 Preventive Goals

1. Continue to provide community outreach and promote the maternal child health home visiting program, increasing referrals and number of families served.
2. Successfully implement the Universal Expedited Therapy Program within Oswego County.
3. Effectively train staff members to assume the LPPP and IAP coordinator positions.
4. Seamlessly implement a new electronic medical record, utilizing it for MCH, immunization clinics and for billing.
5. Continue to collect and analyze public health data.
6. Incentivize, retain and recruit staff.

2022 Public Health Planning and Emergency Response Program

Public Health Education and Emergency Response Program provides a wide variety of public health education and outreach programs across Oswego County. This group is tasked with the development and implementation of the Community Health Assessment and County Health Improvement Plan. The team works closely with community partners to address the health needs of the community and implement policies and interventions to address these needs. Priorities identified in the current plan include reducing smoking, increasing access to safe places for residents of all abilities to be physically active, increasing breastfeeding supports in the county, increasing access to medication assisted treatment for opioid use disorder, and reducing deaths due to overdose and suicide. A main focus of the education team includes presenting a full slate of evidence-based programs designed to prevent and improve management of chronic disease, in addition to preventing injuries and deaths due to falls, overdoses, and suicide. Programs are also available to local school districts' students, faculty, and staff. Popular programs in schools include vaping prevention, handwashing and germ fighting, dental health, hygiene, nutrition, physical activity, tick, and mosquito bite prevention (bug school), rabies, and sun safety. Programs are also available for local community groups and organizations. Additionally, the team is responsible for Public Health Emergency Response activities and works closely with the County's Emergency Management Office to develop, review and revise emergency plans including the medical countermeasure distribution and management plans, mass fatality plans, continuity of operations plans, and pandemic plans. The Public Health Education and Emergency Response program also works to improve public health messaging and provide reliable health information to the community via social media, traditional media, and website updates.

Training and Outreach

This department was expanded in 2022 with the assistance of the New York State Public Health Fellowship Corps, adding several Fellowship positions with the intention of expanding services and programs offered to the community, provide educational opportunities and experience needed to be successful for advancement in a public health career. Positions added include: a public health educator (vacant), an epidemiologist, a public information specialist and a public health education assistant. This program has also allowed Public Health Educators in the department opportunities to advance their careers in the field of Epidemiology, resulting in two public health educator vacancies.

During the first part of 2022 efforts were directed at COVID 19 response. This consisted of phone bank responsibilities, COVID 19 immunization clinic planning and operations, distribution of tests and testing supplies,

and public education via the website and social media. In the summer and fall of 2022, as COVID 19 restrictions began to lift, more education and outreach opportunities opened and allowed for presentations to be conducted at summer camps, schools, and health fairs.

Training and program development were highlights of 2022. Staff were trained or retrained in Chronic Disease Self-Management, Diabetes Self-Management, Stepping On, vaping and the administration of Naloxone. The team also began to explore evidence-based suicide prevention curricula to deliver in the community.

The 2022-2024 Community Health Assessment and Community Health Improvement Plan were submitted to the New York State Health Department. As part of this review, an online Health Assessment Survey was deployed to the community. There were 177 surveys returned. A detailed analysis of this survey was included in the assessment highlighting differences in the survey responses based on age, income and location within the county.

Outreach and education activities included attending the Oswego County Fair, the Senior Fair and Trunk or Treat at the Oswego Speedway, distributing information on ticks and mosquitoes to campers during Super Dirt Week and fisherman along the Salmon River, and a presentation given at the Fellowship Summit in Albany.

The staff is very active in community planning groups and advisory boards including Rural Health Network, Teen Health Conference, Cancer Services Program, Traffic Safety Board, ARISE Emergency Preparedness Advisory Council, Keep the North Country Smiling, Oswego County Breastfeeding Coalition, Nutrition Advisory Committee, and the Falls Prevention Coalition.

Public Health Planning and Emergency Response Accomplishments

- Community Health Assessment and Community Health Improvement Plan submitted to New York State Department of Health
- 174 residents trained in the administration of Narcan (140 Narcan kits distributed)
- Dental health education to 155 elementary school children
- 271 middle school and high school students received education on the dangers of vaping
- Restarted Stepping On falls prevention classes - one class (7 weeks long) was held with 12 participants

Public Health Planning and Emergency Response Challenges

1. Three open Public Health Educator positions
2. Retention and recruitment of staff
3. Implementation and data tracking of the Community Health Improvement Plan

2023 Public Health Planning and Emergency Response Goals

1. Develop consistent offerings of evidence-based classes, including chronic disease self-management, vaping prevention, suicide prevention, and falls prevention
2. Develop OCHD as a training hub for the community to prevent and reduce the burden of chronic disease and injury in Oswego County
3. Continue to update and revise Public Health Emergency Plans
4. Continue recruiting Public Health Fellows
5. Fully implement the Community Health Improvement Plan

2022 Healthy Families Oswego County

Healthy Families Oswego County (HFOC) is a voluntary home visitation program for expectant parents and families with infants. It promotes optimal prenatal care, better birth outcomes, and positive growth and development to improve parent-child bonding, maternal and child health and social outcomes for families at high risk of abuse, maltreatment and poor health outcomes. The program provides intensive home visitation services based on the needs of the family.

Table 10 provides data for the number of families served, home visits made, calls/texts to engage families, successful level changes, and referrals made to outside agencies. The Program Manager is actively working with Cornell Cooperative Extension to fill vacant positions to increase the number of families enrolled in the program.

Table 10. Statistics for the HFOC Program 2021-2022

	<u>2021</u>	<u>2022</u>
Families served	37	35
Home visits made	471	361
Calls/texts to engage families	304	481
Successful Level Changes	11	25
Graduates from Program	0	2
Non-Graduate Discharges	16	19
Referrals to other services	179	385

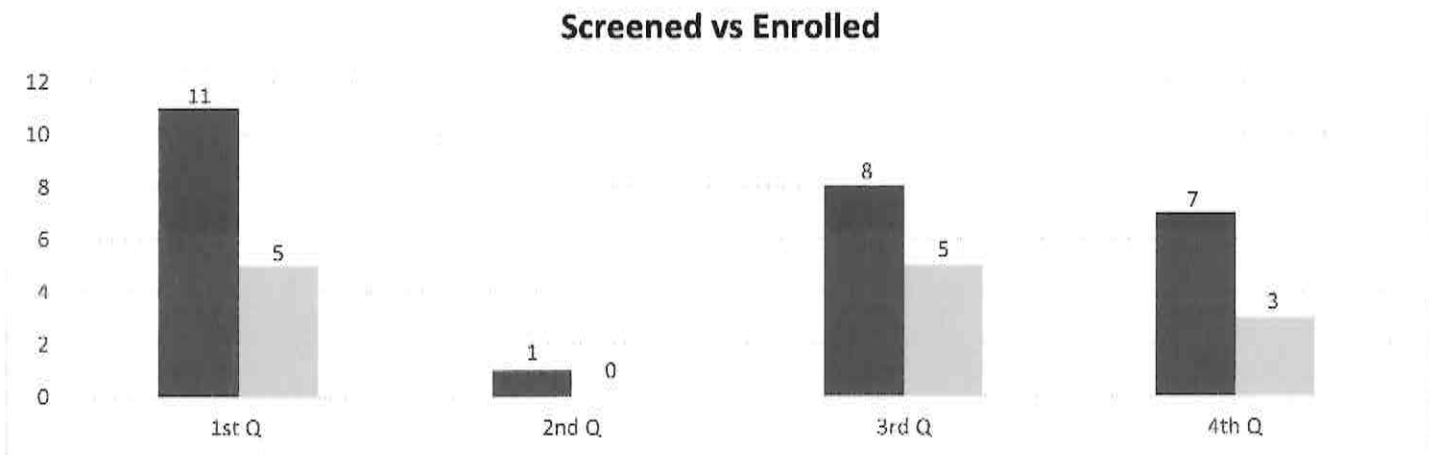
HFNY programs are monitored for adherence to 13 performance indicators twice a year. These indicators focus primarily on important program processes, structural aspects of the program, or areas that HFNY has deemed in need of improvement. Each indicator has an associated target that program sites must meet in order to be considered as operating within program requirements. Table 11 shows HFOC's progress towards the 13 performance indicators for each quarter of 2022.

Table 11. Performance Indicators for HFOC 2022

<u>Performance Indicators</u>	1st Q 2/28/22	2nd Q 5/31/22	3rd Q 8/31/22	4th Q 11/30/22
Quarterly Performance Targets 9 of 12 Performance Targets achieved	74%	62%	78%	67%
Program Capacity NYS target Performance is 85%	37%	27%	18%	40%
Retention Rate at 1 year NYS target Performance is 50%	0%	0%	0%	0%
Creative Outreach Percentage of Families not on NYS target Performance is 90%	82%	69%	82%	100%
Home Visit Rate NYS target Performance is 75%	48%	62%	63%	76%
1 st Home visit prior to 3 months after birth NYS target Performance is 95%	100%	88%	100%	100%
Prenatal enrollment NYS target Performance is 65%	33%	0%	N/A	83%
Assessment completed Prenatally or within 2 weeks of birth (FROG) NYS target Performance is 80%	40%	33%	0%	100%
Follow-up Forms Completed on time NYS target Performance is 75%	N/A	20%	100%	66%
Use of CHEERS Check-in NYS target Performance is 90%	92%	89%	70%	89%
Trainings for Orientation, Core, Shadowing, Prenatal and FGP	0%	50%	63%	100%
Wraparound Trainings for 3, 6, &12 month	0%	50%	67%	100%
Protected Supervision NYS target Performance is 75%	25%	20%	27%	100%
Supervisor Observations 1 per quarter	0%	67%	0%	67%

Figure 5 compares the number of families screened vs. enrolled in the program. The Program Manager is working with staff to increase the number of screens received and the number of families enrolled in the program.

Figure 5: Number of Screens Received vs Number of Families Enrolled in the Program



Healthy Families Accomplishments

- 13 policies revised/rewritten
- 53 Case Conference Reviews
- Improvement in nearly all performance indicators (see table 10)
- Successful collaboration with contract agency, Cornell Cooperative Extension

Healthy Families Challenges

- Frequent staff vacancies resulting in limiting the number of families served.
- Numerous changes at all levels leading to inexperienced staff.
- Limited outreach resulting in a decreased number of screens.

2023 Healthy Families Goals

- Continue to provide services, support, and staff that are reflective of the needs of our community.
- Continue to restructure HFOC to meet HFNY standards of care.
- Increase staffing, outreach and number of families served.
- Meet HFNY performance indicators and targets.

2023 Oswego County Health Department Goals and Objectives

- Complete and implement a strategic plan for the Oswego County Health Department
- Begin Pathways Recognition toward accreditation
- Review all relevant policies and procedures
- Improve recruitment and retention of staff
- Provide educational opportunities to staff
- Continue to explore actionable items from Staff Satisfaction Survey
- Implement updated emergency plans

The Oswego County Health Department will continue to evaluate its programs to assess trends in service delivery, patient statistics and quality assurance outcomes. We look to this committee to determine whether the services we provided were appropriate, adequate, effective and efficient.

**PROFESSIONAL ADVISORY COMMITTEE**

December 8, 2022

ATTENDANCE:

Jodi Martin, Director of Preventive Services, OCHD
Vera Dunsmoor, Interim Director of Public Health, OCHD
Diane Oldenburg, Associate PHE, OCHD
Brenda Hillman, Administrative Secretary, OCHD
Betty Dunsmoor, Healthy Families Coordinator, OCHD
Becky Mackey, Supervising Public Health Nurse, OCHD
Jennifer Waits, Principal Accountant, OCHD
Jeanne King, Compliance Program Administrator, OCHD

Christina Liepke, M.D., Medical Director, OCHD
Chelsea Spier, Cornell Cooperative Extension
Tricia Peter-Clark, President & CEO, ConnexCare
Amanda Barbera, Program Coordinator, PICH, Reach CNY
Linda Eagan, Community Member
Sara Sunday, Director, OFA
Cathy Hogan, Medical Director, Staffings

1. Call to Order

Jodi Martin called the meeting to order at 1:32 PM.

2. Approval of Minutes

Jodi Martin asked for a motion to accept the minutes of the September 15, 2022 PAC meeting. Motion to accept was made by Diane Oldenburg; seconded by Betty Dunsmoor. All voted in favor. Motion passed.

3. Nursing Dashboard Review & Branch Summaries**Preventive/LHCSA/D&T-Jennifer Purtell****MCH – Jodi Martin**

- End of quarter 2, 10 total served, 14 referrals, 5 admits, 9 non-admits, 9 discharged. Average length of stay is 55.
- Staffing – 1 FT Sr. LPN, 2 FT PHN; Vacant – 1 RN, 1 LPN, 1 Sr. PHN, 1 Typist, 1 Account Clerk.
- Referrals – accepting referrals, Outreach at Oswego Hospital has been very successful. 1 PHN focused solely on this program.
- Lead – Visit from NYSDOH on 10/27/22 – reviewed both care coordination and environmental health aspects of the program. Very informal and great learning experience.
- Headlice – Increased number of headlice referrals.

D&TC – Jodi Martin

- Immunizations – Back-to-school clinics were very busy, although wrapping up now. Immunization Coordinator resigned effective November 18, SPHN is now overseeing this program until a new staff member is trained. Continue to offer vaccines at the jail; Hep A, COVID-19 and flu.
- Communicable Disease – Did see a slight increase in the number of Salmonella cases due to recent outbreak.
- COVID-19 – Continue monthly. Homebound vaccinations continue. Numbers remain low at this time.
- Influenza – Clinics held at several county buildings and adult homes throughout the community. Homebound vaccinations continue. Flu clinics are held at OCHD every Monday and Friday from 9 am-11 am and 1 pm-3 pm. As of December 4, there have been 852 lab confirmed cases reported. Last week there were 444 lab confirmed cases reported which is doubled from the previous week.

- State Visit for D&TC – October 3, 2022. Received 3 tags: Advance Directives; Organization and Administration – Operating Policies and Procedures; Organization and Administration – Personnel.
- Plan of correction was submitted and accepted.
- Performance Improvement Projects have been created for all tags.
- Operating Certificate for both Oswego and Pulaski were outdated with services listed that are not provided.
 - Submitted a closure plan for Pulaski
 - Updated the listed services for Oswego

Lead – Jodi Martin

- End of Quarter – 83, Total served 83, Referrals 6, Admissions 6, 0 Non-Admits, 0 Discharges.

PCA–Jodi Martin

- Dashboard – 54 end of quarter census, served 57, 0 referral, 0 admits, 0 non-admits, 3 discharged. Average length of stay went to 905.
- Staffing –1 FT RN.
- Visits – In home visits continue. Working on training other staff on this program.

Hospice–Becky Mackey

- Dashboard – End of quarter census is 2, 6 total served, 1 number of referrals, 1 admission, 0 non-admits, 4 discharges and the average length of stay is 163. Medicare continues to be the highest payor source followed by Other Insurance.
- Staffing – 1 SPHN, 1 Clerical Staff – no open positions at this time due to closure.
- Staff Training – Hospice Webinar: Providing Whole Person Care: The Role of Social Work.
- CAHPS – Based on 7 completed surveys. Pretty good, indicative to the Hospice closing.
- Hospice Compare – Above local Hospice and National Average.
- CMS Hospice Compare Quality Measures is based on the information that the nurses put into the system. We are above the quality HIS Comprehensive assessment measure requirements.

Healthy Families Oswego County – Betty Dunsmoor

- Dashboard – End of quarter census is 11, 16 total served, 2 number of referrals, 0 admissions, 2 non-admits, 5 discharges. 3 Prenatal, 3 L1, 4 L2, 2L3, 2L4 and 1CO, 1TO.
- Staffing: Sub-contractor CCE has 1 FT FSS/FRS and 1 Supervisors/FRS position available.
- Referrals: on hold at this time.
- Proposal – Has been approved.
- Site Visit – Performance improvement plan has been accepted.
- Quarterly Data – Changed way to present information to PAC. Now presenting information on 14 Indicators that combines information reviewed during site visit.

QAPI Committee – Jodi Martin

- QAPI committees meet quarterly. Branch subcommittees meet to discuss details of nursing programs. Participants include: Hospice, LHCSA, Preventive, D&T Center, Healthy Families and Finance.

PIPs

- Healthy Families
 - 9 of 12 Performance Targets achieved 78%

- Program Capacity 18%, NYS target performance is 85%
- Retention rate at 1 year 0%, NYS target performance is 50%
- Creative Outreach Percentage of Families not on 82%, NYS target performance is 90%
- Home Visit Rate 63%, NYS target performance is 75%
- 1st Home visit prior to 3 months after birth 100%, NYS target performance is 95%
- Prenatal enrollment N/A, NYS target performance is 65%
- Assessment completed prenatally or within 2 weeks of birth (FROG) 0%, NYS target performance is 80%
- Follow-up forms completed on time 100%, NYS target performance is 75%
- Use of SHEERS Check-in 70%, NYS target performance is 90%
- Trainings for orientation, core, shadowing, prenatal and FGP 63%
- Wraparound trainings for 3, 6, & 12 month 67%
- Protected supervision 27%, NYS target performance is 75%
- Supervisor Observations 1 per quarter 0%
- LHCSA/Preventive
 - Plan of Care – 100%
 - Current orders signed/requested – 100%
 - Change of plan/treatment orders signed/requested – 100%
 - HealthConnections Consent – N/A
 - MCH Satisfaction Surveys – 3, submitted, 75%. 96 % Excellent, 4% Very Good
- D&TC
 - Annual Mandatory Staff Trainings – Tag T2107 – All mandatory trainings are up to date except for Human Trafficking and Domestic Violence – which are scheduled for Dec and Jan
 - Policy and Procedure Review – Tag 2079 – All policies have been updated
 - Advance Directives – Tag Y4360 – Updated in P&P. Quarterly monitoring to take place
 - D&T Center Survey – 4, 100% Excellent
- Hospice
 - 485 Plan of Care – Discontinued
 - Personnel Record – Discontinued
 - Aide Assignments and Duties – Discontinued
 - Diabetes Management – Discontinued
 - Fall Prevention – Discontinued
 - HIS Submission HQRP – 100%

4. Compliance Report

Incidents

- Client Falls
 - Preventive/LHCSA/D&T
- Hospice – 3 L1 (2), L2 (1)
- Medications
 - Preventive - 2
 - Hospice – 0
- Employee Incident
 - Preventive – None
 - Hospice – None

Complaints

- Preventive/LHCSA/D&T Center
 - None
- Hospice
 - None
- Administrative
 - None

5. Public Health Education/Public Health Emergency Planning – Diane Oldenburg

Public Health Educator activities in the last quarter included:

- Stepping On class completed. To be offered again in Healthy Living Workshop class in January. The next class to start in January and held at Towpath Towers in Fulton.
- Community Health Assessment and Community Health Improvement Plan is going through final updates.
- Team worked on developing a survey for community engagement for the Community Health Assessment.
- Strategic planning committee hosted 2 in-services for staff on Adverse Childhood Events, as part of our OCHD Presents Series.
- Many requests for education and outreach activities.
- Will participate in training on “Catch My Breath” program on vaping.
- Participated in Trunk or Treat at Oswego Speedway and gave out approximately 1900 toothbrushes.
- Working on Centro bus ads promoting COVID Booster shots.
- Send out community newsletter.

6. Emergency Preparedness – Diane Oldenburg

- Participated in Radiological drills.
- Many surveys completed in HERDS.
- Continue to assist with COVID-19 vaccination clinics.
- Budget modifications for the grant.
- Submitted as abstract for the NACCHO PHEP Summit.
- Trainings for staff on psychological first-aid, CPR.

7. OD2A – Overdose Data to Action – Diane Oldenburg

- Working to improve data collected on overdoses.
- Continuing Narcan trainings.
- Fentanyl test strip distributions.

8. New York State Public Health Corps – Diane Oldenburg

- Attended NYSPHC Fellowship Summit.
- We still have Fellowship openings available.
- New Coordinator will start soon.
- Fellows continuing to work on their projects. Grant extended through 7/2024.

9. Booster Campaign – Thank you to those who got vaccinated and remind them to stay up-to-date. Commercial for movie theater, social media.

10. Policies & Procedures

A motion to approve the policies and procedures was made by Tricia Peter-Clark and seconded by Sara Sunday. All were in favor.

11. Community Updates

Jennifer Walts – Busy with budget mods, COVID billing, grants and yearly budget.

Linda Eagan – Highlighted as an age friendly program for to be replicated around the state and the country. We help people of all abilities to stay and live where they want to stay and live. If they want to be in their own home, some of the improvements allows them to do that.

Sara Sunday – Looking to get some staff trained for Walk with Ease. This is an evidence-based program sponsored by the arthritis foundation. Able to do this through Shine SNAP Ed grant. Finally have a nutrition educator for the Shine grant, Beth McCarthy. The program will start January 1st. Will get this evidence-based program out in the community as well. Majority of the program will be here at Oswego but will also go to Lewis and Jefferson counties. The OFA hall is full of gifts for the Santa for Seniors program. Last year there were 67 participants and this year there is 211. Distribution will be next week. We have had a tremendous outpouring from the community.

Cathy Hogan – Survey by DOH in the Oswego branch office. Two tags – one on care plans – home visit, hearing aids were not on the patients care plan and two was for not doing all the hours and it was because of the client being away. Still trying to get aides –vaccination barrier. Hired four new aides in Oswego.

Amanda Barbera – As of July 1st we officially transitioned into new 5-year grant called PICHC, Perinatal and Infant Community Health Collaborative. Changes more on the community level. Charged with developing a community action board. One of the OPTIONS former community health worker has transitioned into the community health supervisor's positions. Still going to the hospital for breastfeeding support and offering services. Still doing the virtual breastfeeding groups. OCO applied for a large breastfeeding grant that will serve, if awarded, Cayuga, Jefferson, Oswego and St. Lawrence counties. Building breastfeeding capacity in all different realms: different breastfeeding friendly worksite designations, primary care facilities, building different breastfeeding groups. Only six awards throughout the state with 15 applications.

Tricia Peter-Clark – Applied for a school-based health center dental grant at Pulaski school. Will give an update next meeting. We be getting money for COVID vaccine and administration across the county. Hoping to get for all vaccines.

Sara Sunday added that OFA purchased four aluminum ramps. Arise has them. Also have suitcase ramps for those that have one or two steps and can't get into their house because of those steps. Have squawker walkers that are birds that remind the patients to use their walkers.

12. Closing and Adjournment

Motion to adjourn at 2:41 pm by Linda Eagan and seconded by Dr. Liepke.

The PAC will meet next on Thursday, March 9, 2023 at 1:30 PM in the Training Room
at Oswego County Health Department