NASSAU COUNTY DEPARTMENT OF HEALTH



2017 ANNUAL REPORT

Lawrence E. Eisenstein, MD, FACP Commissioner of Health

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Letter from the Commissioner

It is my great pleasure to present the 2017 Annual Report from the Nassau County Department of Health (NCDOH.) 2017 was a year of great accomplishment and achievement at NCDOH. While we successfully worked towards our mission and made daily progress in protecting the health of the residents of Nassau County, one of our greatest accomplishments came in September when NCDOH was conferred Public Health Accreditation by the Public Health Accreditation Board! NCDOH became the very first large local health department (LHD) in New York to achieve accreditation. Becoming accredited was the culmination of many hundreds of hours of work over the previous 5 years. For our residents, accreditation means that NCDOH has proven to meet the highest standards for public health services to be delivered by LHDs. To become accredited NCDOH comprehensively evaluated our protocols and procedures, and this process has improved our efficiency and performance. It all leads to healthier communities within Nassau County!

Besides achieving accreditation, NCDOH continued to be a leader and innovator in public health. The National Association of County and City Health Officials (NACCHO) awarded NCDOH 3 more model and promising practice awards, bringing the total to 12 since 2013 (by far the most of any county health department in New York State!) These awards are representative of the successful, innovative public health practices put in place by the great professionals employed at NCDOH. Besides these specific awards, many NCDOH employees were honored with speaking opportunities, grant awards, and committee appointments.

As in past years, NCDOH faced many challenges in 2017. Emerging diseases in the previous years included Zika and Ebola, and in late 2017 it became obvious that a severe influenza season was in store. NCDOH was familiar with the emerging data and was fully prepared to respond in order to protect our residents. This preparation and response is not only seen on all communicable diseases (including Sexually Transmitted Diseases and Tuberculosis,) but in our Environmental Health unit too, who worked relentlessly to keep the public water supply safe, gas tanks properly maintained, and beaches and camps safe for our residents to use (among many other responsibilities.) The Division of Maternal Child Health served many thousands of children and their families through

Early Intervention and Pre-school services, the WIC program (Women, Infants and Children,) lead protection, and child fatality review team. Other bureaus within our department were extremely successful in forwarding initiatives and meeting the health needs of our residents. We launched a new Bureau of Analytics, and our Minority Health Bureau continued to make in-roads with community partners working towards addressing health disparities. Many members of NCDOH accomplished above and beyond expectations in 2017!

This report summarizes the incredible amount of work accomplished by the approximately 220 employees at NCDOH. 2017 saw the retirements of more than 30 employees, and we welcomed new staff members to our ranks. I extend my deepest appreciation to those who dedicated their careers to protecting the residents of Nassau County, and I look forward to more continued successes for NCDOH in 2018 and beyond!

Síncerely,

Lawrence Eisenstein, MD, MPH, FACP Commissioner



Nassau County Board of Health

Role and Responsibilities

The Nassau County Board of Health and the Nassau County Department of Health were created in 1938 by the Nassau County Charter.

Members of the Board of Health (hereafter referred to as the "Board") are appointed by the County Executive to five-year terms. The Board enforces the New York State Public Health Law as well as New York State and local sanitary codes. The Board:

- Prescribes the duties of and directs the Commissioner of Health.
- Makes and publishes orders and regulations for the preservation of life and health.
- Creates orders and regulations for the supervision of nuisances and other matters detrimental to the public health.
- Restrains by injunction violators of its orders and regulations.
- Issues subpoenas, compels the attendance of witnesses, and administers oaths and compels testimony.
- Issues warrants to peace officers to enforce the law.
- Prescribes and imposes penalties for violations of, or failure to comply with, its orders or regulations or any of the regulations of the state sanitary code.

Inquiries to the Nassau County Board of Health can be addressed to:

Ellen J. Braunstein, MD, Chair Nassau County Board of Health c/o Nassau County Department of Health 200 County Seat Drive, Mineola, NY 11501

Board of Health Membership Biographies



Anthony Battista, MD, FAAP, attended Chaminade High School, earned a BS in Biology at St. John's University, and received his medical degree from SUNY Brooklyn Health Science Centers. He did his training in Pediatrics at the Steven & Alexandra Cohen Children's Medical Center in New Hyde Park. He practiced Pediatrics in Mineola for 24 years before moving his practice to Garden City in 2008. He is a member of the Nassau County Medical Society and the Nassau Academy of Medicine. He has

served as President of the Nassau Pediatric Society and President of the American Academy of Pediatrics New York Chapter 2.

Ellen J. Braunstein, MD, is the present chair of the Nassau County Board of Health. She is a board-certified Neurologist practicing in Woodmere, Long Island. Dr. Braunstein is a Hofstra University Alumna and a graduate of Chicago Medical School. She spent her internship year in New York City at the Mt. Sinai Hospital/City Hospital Center at Elmhurst and continued her Neurology Residency training at North Shore University Hospital and the Memorial Sloan Kettering Cancer Center, where she attained Chief Residency status. Dr. Braunstein is involved in



many medical community affairs. She is a fellow in the Nassau Academy of Medicine and past president of the Nassau County Medical Society. Through the Medical Society of New York State, she is a member of the House of Delegates and Budget and Finance Committee. She is an active member of the American Academy of Electrodiagnostic Medicine, the American Academy of Clinical Electrophysiology, and the former director of the Multiple Sclerosis Outpatient center sponsored by the National Multiple Sclerosis Society. Dr. Braunstein is an active participant of the American Academy of Neurology where she sits as a section member of multiple committees.



Abby Greenberg, MD, FAAP, has been a member of the Board of Health since December 2009. She was previously with the Department of Health for over 40 years, where she served as Acting Commissioner of Health in 2006 - 2007; 2000 - 2001; and 1993 - 1994. She began her career with the Department in 1968 as a pediatric clinician working in the Department's Community Health Centers. She then became, in subsequent order, Medical Director of the Plainview Health Center, Director of the Quality

Assurance Program, Director of Special Children's Services, Director of the Bureau of Health Centers, Director of the Bureau of Infectious Disease Control, Director of the Division of Epidemiology, Director of the Division of Disease Control, Appointed Early Intervention Official for Nassau County, and Director of the Center for Public Health. Dr. Greenberg served a term as President of the Nassau Pediatric Society. She continues to be a member of the Medical Reserve Corps and New York State Department of Health Advisory Council on Lead Poisoning Prevention. Dr. Greenberg is also a pediatric medical expert for Social Security Administration pediatric disability.

Paul A. Pipia, MD, graduated from Archbishop Molloy High School, earned a BS and MS degree from Fordham University, and received his medical degree from SUNY Downstate Medical Center in Brooklyn. His internship training was at Staten Island University Hospital, and his residency in Physical Medicine and Rehabilitation was at NYU Medical Center. He is an attending physician at Nassau University Medical Center, where he was a member of the Board of Managers for eight years and served as Medical Director. Dr. Pipia is board-certified in Physical Medicine



and Rehabilitation as well as Sports Medicine. He is currently an Assistant Professor and Division Chief of Physical Medicine and Rehabilitation at SUNY Downstate Medical Center. He is also the Co-Director of the Muscular Dystrophy Association Clinic at Downstate Medical Center. He is a fellow in the Nassau Academy of Medicine and past President of the Nassau County Medical Society. Through the Medical Society of New York State, he is a member of the House of Delegates and Chair of the State Legislation and Physician Advocacy Committee. He is an honorary Vice-Chairman for the Toys for Tots program which is run by the United State Marine Corp.



John Robert Zaso, D.O., F.A.A.P. attended Chaminade High School, earned a BA in Psychology at Stony Brook University and received his medical degree from New York College of Osteopathic Medicine. He did his training in Pediatrics at Stony Brook University Hospital. Dr. Zaso has been a pediatrician in Nassau County for 26 years and currently maintains his practice in East Meadow. Dr. Zaso is the Emergency Service Liaison for Nassau University Medical Center. He has served as the Medical Director for the East Meadow Fire Department for the past 10 years and as the Medical Director for the Uniondale Fire Department for the

past 15 years. He also serves as the Secretary on Regional Emergency Medical Advisory Committee and is an active member of the Nassau County Medical Reserve Corps, where he serves as Physician Coordinator.

Department of Health Vision

<u>Vision</u>

The Nassau County Department of Health will lead a public health system that works to create healthy communities.

<u>Values</u>

- Integrity
- Professionalism
- Respect
- Dedication
- Innovation

Department of Health Mission

Mission

Nassau County Department of Health promotes and protects the health of all who live, work, and play in Nassau County.

The mission is accomplished through direct services and community partnerships in the following areas:

- Development and maintenance of individual and community preparedness for public health hazards and events.
- Investigation, prevention, and control of communicable diseases.
- Prevention of environmental health hazards through assessment, regulation, and remediation.
- Promotion of healthy lifestyles through outreach and education.
- Provision for evaluation and services to individuals, children, and families that have developmental delays and concerns.

Health Department News: Accreditation!

In 2017, Nassau County Department of Health received national accreditation status awarded by the Public Health Accreditation Board (PHAB). Public health accreditation of local, state, and tribal health departments is a relatively new process initially launched to promote quality and performance within



health departments. This milestone accomplishment is official recognition that Nassau County Department of Health meets or exceeds the rigorous standards established by PHAB. Accreditation means that this health department is committed to continuous quality improvement so that it can meet the community's needs as effectively as possible. PHAB accreditation demonstrates accountability and credibility to our partners. PHAB accreditation emphasizes process and standardization in policy, protocols, and implementation.

To be accredited, PHAB requires health departments to satisfactorily provide services to its residents that in include the following domains:

- Assess population health.
- Investigate public health problems and hazards.
- Inform and educate the community through policies, programs, and processes.
- Engage community to address problems.
- Keep current policies and plans including strategic, emergency preparedness, and health improvement plans.
- Enforce public health laws.
- Promote access to health care.
- Maintain competent workforce through development.
- Institute a quality improvement culture using performance management.
- Apply evidence-based activities.
- Develop administration and management capacity.
- Engage with governing agency, its Board of Health.

Nassau County Department of Health is proud to be recognized by PHAB for demonstrating the capacity to protect and promote the health of our community. The achievement of national accreditation will help guide our work to better protect, promote and preserve the health of the people in our community.

Division Highlights

Environmental Health

The Division of Environmental Health promotes healthy drinking water, food, air quality, and recreational, commercial, and residential environments through the regulation, inspection, and enforcement of the New York State Public Health Law, State Sanitary Code, and the Nassau County Public Health Ordinance. It protects the community from adverse effects resulting from environmental pollution, unsanitary conditions, and unsafe practices. The Division operates from five bureaus to regulate public water systems, food service establishments, commercial and residential environments, recreational facilities, and investigates complaints of conditions that may be hazardous to public health. The Division monitors the abatement of lead hazards, prevents the sale of tobacco products to minors, investigates complaints of rodent and insect infestations, and conducts mosquito and rabies surveillance.

Bureau of Environmental Engineering

Ensuring a safe and healthy environment begins with the appropriate design, construction and installation of infrastructure. The Bureau of Environmental Engineering reviews design plans for public water systems, storage of toxic and hazardous materials, public swimming pools, and on-site sewage disposal at realty subdivisions and commercial facilities. The Bureau also evaluates environmental conditions and requires remediation at realty subdivisions prior to map approval and construction.

On-Site Sanitary System Disposal	34
Swimming Pools Plans	88
Petroleum Bulk Storage Plans	83
Other Toxic and Hazardous Storage Plans	114
Realty Subdivisions Plans and Reports	167
Public Water System Plans	578

Engineering Plan Review 2017

Bureau of Environmental Administration and Enforcement

Processing Environmental Health Permit applications and enforcing the codes, rules and regulations necessary to provide a safe and healthy environment are the keystones to the Division's mission. The Division strives to educate permit holders and facility operators, so they can conduct business while complying with all the rules and regulations applicable to their permit. Additionally, the Division has a vigorous enforcement program to ensure that violations and hazards that may endanger public health are corrected. Owners and operators of facilities who fail to correct violations are subject to a formal enforcement process presented before an Administrative Law Judge. In 2017, the Division initiated 386 formal enforcement cases and the Board of Health assessed \$187,155 in fines.

Food Service Establish Permits Issued	6,580
Temporary Food Service Permits Issued	1,921
Recreational Facility Permits Issued	570
Permit Compliance Conferences	366
Enforcement Cases Initiated	386
Formal Hearings Held	873
Fines Assessed	\$187,155
Fines Collected	\$179,805

Permit Administration and Enforcement 2017

Bureau of Environmental Investigation

The Bureau of Environmental Investigation administers multiple environmental health programs to protect the public from disease. The Bureau conducts investigations of the following hazards: lead, air quality, residential environments (rodent and insect infestations, sewage and garbage, lack of utilities at rental housing) and animal bites. The Bureau also conducts surveillance sampling of animals for the rabies virus and mosquitos for arboviruses. The Bureau administers and enforces the Adolescent Tobacco Use Prevention Act (ATUPA) program to prevent sales of tobacco products to minors.

Lead Hazard Investigations	167
Air Quality Investigations	104
Residential Environment Investigations	2,234
Adjoining Property Surveys	4,650
Rodent Free Demolition Inspections	652
ATUPA Compliance Inspections	1,187
Animal Bite Investigations	1,434
Animal Specimens Tested for Rabies	246
Mosquitos Trapped	34,785
Mosquito Pools Tested for Arbovirus	584

Bureau of Environmental Investigations 2017

Bureau of Environmental Protection

The Bureau of Environmental Protection is focused on the protection of drinking water resources and the regulation of public water supplies to ensure the public is safe from harmful contaminants that can be present in drinking water. The Toxic and Hazardous Material (THM) Storage Program protects our groundwater resources through the regulation of gasoline, diesel fuel, heating oil, and waste oil tanks as well as other types of materials. The Bureau registers facilities, tanks, and storage areas containing regulated quantities of toxic and hazardous materials and conducts inspections to prevent spills and leaks that could endanger public health and the County's Sole Source Aquifer for drinking water. The Bureau also regulates the appropriate abandonment or removal of homeowner heating oil tanks. The Public Water Supply Program administers and enforces regulations for the production and delivery of safe drinking water to the county's residents. This program includes site inspections, the collection of public water supply samples, and the review of water quality data and monthly reports to ensure that the water quality meets all federal and state standards.

Bureau of Environmental Protection 2017

Toxic and Hazardous Storage Facility Permits Issued	1,308
Toxic and Hazardous Storage Inspections, Closures and Abandonments	3,795
Freedom of Information Law Requests Processed	1,026
Microbiological Drinking Water Samples Collected	1,430
Chemical Drinking Water Samples Collected	1,376
Public Water Supply Testing Results Reviewed	~250,000

Bureau of Environmental Sanitation

The Bureau of Environmental Sanitation protects the public from disease and illness that could be transmitted by unsanitary conditions at Food Service Establishments, Recreational Facilities (Pools, Beaches, Children's Summer Camps), Body Art Establishments (Tattoo and Piercing), and Temporary Residences (Hotels and Motels). The Bureau conducts facility plan reviews, facility inspections, and compliance conferences. It also investigates and reports Food Borne Illnesses. Finally, the Bureau educates Food Managers in the proper sanitary procedures for safe food handling and facility operation.

Food Service Establishment Plan Reviews	236
Food Service Establishment Inspections	13,470
Food Manager Training Certificates Issued	2,362
Food Service Operation Compliance Conferences	498
Foodborne Illness Investigations	112
Pool Inspections	1,051
Beach Water Samples Collected	1,348
Temporary Residence Inspections	76
Body Artist (Tattoo and Piercing) Certifications Issued	97

Bureau of Environmental Sanitation 2017

Communicable Disease Control

This Division protects the public from the spread of communicable diseases through education, surveillance, investigation, and intervention. Strategies to limit outbreaks include: education, post-exposure prophylaxis, immunization, Infection Control recommendations, isolation, and quarantine.

In 2017 the Division of Communicable Disease Control:

- Investigated 32,085 laboratory reports with case confirmation of 6,279 communicable diseases including: zika virus disease, dengue fever, meningococcal disease, chikungunya, acute hepatitis A, acute hepatitis B, typhoid fever, shigellosis, West Nile, mumps, and an increased incidence of legionellosis.
- Investigated and confirmed 9 human cases of West Nile Virus disease with zero deaths.
- Investigated 199 instances of vaccine preventable illness and responded to over 822 calls on the immunization hotline.

Outbreak control activities included Zika virus disease, meningococcal disease with postexposure prophylaxis, mumps, hepatitis A with post-exposure prophylaxis and legionellosis surveillance. Other outbreak control activities include influenza and gastrointestinal illness in assisted living facilities, schools and group homes.

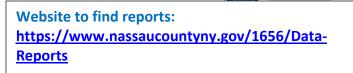
Communicable Disease Control maintains a 24-hour public health consultation service for reporting of notifiable diseases (see Appendix B) and physician consultation.

Epidemiology and Planning

The Division of Epidemiology and Planning promotes the use of data-driven initiatives

and programs. Its mission is to utilize information regarding the distribution of disease within the county to properly describe, evaluate, and inform programming to improve community health. The Division includes the Bureau of Analytics and the Bureau of Tuberculosis Control. Data is also available to the public.

The Division of Epidemiology and Planning was responsible for executing the accreditation



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process. In September of 2017, the Department was accredited by the Public Health Accreditation Board.

Bureau of Analytics

In 2017, the Bureau of Analytics was formed to support new and innovative performance management, quality improvement measures, and analytic assessments for Divisions within the Health Department. This Bureau is responsible for the Community Health Assessment, the Community Health Improvement Plan, and the departmental Strategic Plan, all of which were updated this year. The Bureau actively participated in the Long Island Health Collaborative (LIHC)/Population Health Improvement Plan (PHIP) in partnership with Nassau-Suffolk Hospital Council, community-based organizations, Nassau County hospital systems, and academic partners. In addition, the Bureau partnered with hospitals, universities, and other agencies to carry out research, provide trainings, apply for grants, and participate in mentorship opportunities for students.

Bureau of Tuberculosis Control

Nassau County's Bureau of Tuberculosis (TB) Control successfully monitors and mitigates the spread of tuberculosis, one of the world's deadliest diseases, through case management, Directly Observed Therapy (DOT), Skype Observed Therapy (SOT), contact investigation, the immigrant program, education, consultation, isolation, and quarantine.

Three metro area counties, Nassau, Suffolk, and Westchester, report approximately half of the cases of TB in the State, exclusive of New York City. Eighty-five percent of Nassau County cases are foreign born. In 2017, this Bureau:

- Investigated 1,747 laboratory reports and managed 40 confirmed cases.
- Provided Directly or Skype Observed Therapy visits to 21 cases, approximately 2,557 visits in total.
- Investigated and followed 385 identified contacts.
- Received 160 immigrants for evaluation from the B1B2 program, of whom 82 were in jurisdiction. This program identifies immigrants with potential TB infections and follows their evaluation and treatment.

Community and Maternal Child Health

The Division of Community and Maternal Child Health Services provides a combination of direct services and administrative support to community-based programs and facilitates coordination and integration of services to children and families. The Division includes the Office of Children with Special Needs which includes four programs: Early Intervention, Preschool Special Education, the Physically Handicapped Children's Program (PHCP) and Child Find. The Division is also comprised of the Child Fatality Review Team (NCCFRT), the Community Health Worker Program, the Perinatal Services Network, 1 in 9 Hewlett House, the Childhood Lead Poisoning Prevention Program and the Women, Infants, and Children (WIC) Program.

Early Intervention (EI)

The Early Intervention Program offers a variety of therapeutic and support services to eligible infants and toddlers with disabilities and their families. Typical services include speech therapy, physical therapy, occupational therapy, special education, and parent training. To be eligible for services, children must be less than three years of age and have a confirmed disability or established developmental delay, in one or more of the following areas of development: physical, cognitive, communication, social-emotional, and/or adaptive. In 2017, the Early Intervention Program received 4,822 referrals, mostly from parents, families, pediatricians, and other providers. A total of 7,432 children were served throughout the year, and 3,858 cases were closed.

Child Find

The Child Find Program performed developmental tracking for developmentally at-risk infants and toddlers and provided education for both primary referral sources and community stakeholders regarding the importance of developmental surveillance and the availability of early intervention services. Child Find conducted follow-up activities to locate children with failed Newborn Hearing Screening and compromised Newborn Screen Blood test results as identified by the New York State Department of Health. Child Find continued to collaborate with local hospitals regarding referrals to early intervention and has provided field experiences for pediatric and preventive medicine medical residents. Informational materials have been distributed at several community health events throughout Nassau County. Child Find continued outreach at targeted lower socioeconomic communities through *Screen for Success:* Early Intervention Program-WIC Developmental Screening Collaborative. An Enhanced Service Coordination component was added to *Screen for Success* to ensure that eligible

children get to services. Referral sources to Child Find included WIC, Early Intervention transfers, Childhood Lead Poisoning Prevention Program, Foster Care, Child Protective Services, parents, and health care providers.

Preschool Special Education Program

The Preschool Special Education Program is available for three and four-year-old preschoolers who have been determined by their school district to have a disability based on a multidisciplinary evaluation. This program is administered by the child's local school district with oversight and guidance from NYS Education Department. The Preschool Program meets with the regional division of the NYS Education Department approximately every two months to discuss current issues. County presence at school district meetings is routinely accomplished by the attendance of municipal representatives. In 2017, the Preschool Special Education Program served a total of 6,347 children throughout the year.

Physically Handicapped Children's Program (PHCP)

The Physically Handicapped Children's Program (PHCP) provides financial assistance to eligible families of children from birth to age twenty-one who meet medical and financial guidelines. There are two components to PHCP, the Diagnosis and Evaluation program and the Treatment/Medical program. PHCP makes available comprehensive medical, surgical, and rehabilitative services to children diagnosed with a chronic illness or physically handicapping condition.

Child Fatality Review Team (NCCFRT)

The Nassau County Child Fatality Review Team (NCCFRT) is a multidisciplinary team created to review fatalities of Nassau County residents, age 0-17 years, whose death is unexpected or unexplained. The mission of the NCCFRT is to review cases to better understand the causes of these deaths and to make recommendations to reduce future child fatalities based on the team's findings. In 2017, the team reviewed 9 cases and developed recommendations and interventions based on the reviews conducted. Activities in 2017 included:

- Continued application for grants to securing funding for Cribs for Kids-Nassau County.
- Training additional recruited partner agencies (Long Island FQHC and the EOC) and delivering 37 cribs to families in need.
- Coordinated a Halloween Safety press release.
- Coordinated guest speaker subject matter experts for case reviews to guide

team in prevention activities.

• Completed the set-up of Safe Sleep zone displays at 3 birthing hospitals.

Childhood Lead Poisoning Prevention Program (CLPPP)

The Childhood Lead Poisoning Prevention Program (CLPPP) identified 53 children with blood lead levels ≥10 mcg/dl in 2017. Program staff followed a total of 115 (new and previously reported children with elevated blood lead levels throughout the year. The CLPPP provided case management services, environmental investigations, and referrals to other services.

Women, Infants, and Children Program (WIC)

The Women, Infants, and Children Program (WIC) provided food vouchers, breastfeeding support through its breastfeeding peer counseling program, and nutrition education for eligible pregnant/post-partum women, infants and children. The Department operates 2 sites and has an assigned caseload of 5,700.

The program developed new satisfaction surveys and other outreach materials to improve retention and customer satisfaction. Based on the results of the surveys, the program schedule was adjusted to 8:00am. In addition, the program instituted a new telephone number to which all phones calls were directed 571-1WIC (571-1942) to improve response times. Furthermore, staff continues to practice strategies that are aimed at improving caseload retention. Other 2017 activities included:

- Providing cribs to low income families through the Cribs for Kids Initiative.
- Maintaining facilitated enrollers from Medicaid managed care providers.
- Providing Early Intervention Screen for Success to identify developmental delays linking moms and children to health services.

Perinatal Services Network

The network consists of approximately 25 health and human service providers. In 2017 Nassau County Perinatal Services Network (NCPSN) revised its bylaws and began operating under a new structure. Currently there are 3 work groups education and outreach, perinatal mental health, and the perinatal disparities. Each work group developed their own work plan which included various future activities. The network's ongoing mission continues to be decreasing infant mortality and improving birth outcomes in Nassau County. The network continued to promote awareness and train health and human service providers on the importance of screening for Perinatal Mood and Anxiety

Disorders (PMAD). In addition, the network provided screening for children and moms at WIC sites for developmental delays and for PMAD, respectively.

1 in 9 Hewlett House

Hewlett House is a Community Learning Resource Center for individuals and families dealing with cancer. Hewlett House conducts support groups, private counseling, and various classes, including Tai Chi, Reiki, Chair Yoga, crocheting, and many other groups, all at no charge. In 2017, Hewlett House participated in and spearheaded many fundraising and awareness events, representing a wide array of creative and athletic activities. Hewlett House enjoys tremendous support from many community partners and serves as a center for hope, knowledge, and empowerment.

Social Health Initiatives

Bureau of Minority Health

This Bureau continues to focus on health education, outreach, and programming in the underserved communities within the county. In 2017, the Bureau collaborated with more than 60 community organizations including the NYS Ending the Epidemic Regional team and Nassau Knows Committee which was established by the Bureau of Minority Health. Additionally, the Bureau successfully coordinated a sponsored the 5th Annual Minority Health Fair which was held during National Public Health Week at Hofstra University.



Bureau of STD Control and HIV Partner Services

Activities of this Bureau focus on a comprehensive approach to disease intervention including risk reduction, counseling and education, early identification, and partner notification. These activities are done in partnership with health care providers, community organizations, schools, and other county agencies.

The Bureau staff has extensive experience in field epidemiology, case interviews, confirmation of treatment, partner elicitation and notification, counseling and referral services, and has the capacity to use innovative approaches to case and partner investigations.

In 2017, STD Control, HIV Partner Services and, Expanded Partner Services:

- Investigated 380 Syphilis, 4842 Chlamydia, and 781 Gonorrhea cases.
- Investigated 120 cases of HIV. Each case was contacted and was offered assistance notifying his or her partners who might be at risk.
- Investigated 149 cases of out- of- care HIV positive. Each case was dispositioned and those who were truly not in care were offered assistance with re-linkage.

Public Health Emergency Preparedness (PHEP)

Public Health Emergency Preparedness (PHEP) is tasked with responding to a range of public health threats—including infectious diseases; natural disasters, and biological, chemical, nuclear and radiological events. Our goal is to build a more resilient community that is prepared to deal with threats and emergencies that affect the health of the public.

The Division manages the Nassau County Department of Health's Medical Reserve Corps (MRC) volunteers. Each new member is required to pass a police background check and to participate in a new member Orientation training. Free trainings are provided to keep the volunteers engaged and prepared for a public health emergency response. In 2017, 18 trainings were held including Basic Life Support, Psychological First Aid, Bleeding Control, Medical Needs Shelter, Weapons of Mass Destruction, Advanced Cardiac Life Support, and a Triage Training and Drill. In April, 54 members attended a General Membership meeting at the Nassau County Office of Emergency Management, in Bethpage, where Dr. Eisenstein spoke on "Emerging Infectious Disease." Membership rose from 938 members to 962 during the year and 126 volunteers reached "10 years of service."

A Point of Dispensing (POD) Exercise was conducted at the "Yes We Can Community Center" in Westbury. Positions were filled by 28 Department of Health staff, 15 Community Emergency Response Team (CERT) members, and 19 Medical Reserve Corps volunteers. Clients included 18 participants from the Mill Neck Organization, four from the Access and Functionally Needs Advisory Coalition (AFNAC), four from The Town of North Hempstead, and a representative from the Nassau County Office of the Physically Challenged.

Activations involved responding to emergencies as well as providing medical support at planned events. When Nassau County activates the Emergency Operations Center (EOC), PHEP staff the ESF-8 (health desk) to coordinate activities and situational awareness. 2017 activations included:

- Two winter storm ESF-8 activations.
- NCDOH staff and MRC volunteers provided medical support for participants and spectators at the Long Island Marathon and the Empire Games for the Physically Challenged.

The Division maintains a cache of medical supplies and more than 400 pieces of equipment—including vehicles, 800 megahertz radios, emergency medical tents, Automated External Defibrillators (AEDs), wheelchairs, cots, computers, and generators. The PHEP unit collaborated with the Nassau County EMS Academy to develop and deliver a two-and-a-half day Occupational Safety and Health Administration (OSHA) Operations-level Hazmat training that included practice donning and doffing NCDOH Personal Protective Equipment (PPE). The 10 Environmental Health employees that compromise the NCDOH Emergency Response Team (ERT) members completed the training.

PHEP also leads the Nassau County Health and Medical Multi-Agency Coordinating Group (HMMACG) which includes all 11 hospitals, 37 nursing homes, 30 adult care facilities, and more than 40 health care partners. During 2017, PHEP helped numerous health care partners with interpreting new Center for Medicare and Medicaid Services (CMS) regulations and meeting certain requirements. Meetings also focused on Active Shooter Planning (provided by the Nassau County Homeland Security unit), a tabletop exercise for the New York State Department of Health's eFinds system for tracking patients/residents during an evacuation, and the new Health and Human Services Empower web site that provides a mapping tool with electricity-dependent equipment Medicare claims.



Leslie Samilo and Barbara Rowan donning during the ERT Training.



Dr. Greenberg and Ana Sousa at the POD exercise on 2/27/17.

Communications and Health Information

The Office of Communications and Health Information is responsible for educating Nassau County residents about health issues to support a safe and healthy community. In 2017, the Nassau County Department of Health participated in meetings and community events, including public forums, and conferences/summits focused on health promotion and disease prevention. Educational literature was distributed through health fairs and provided to community-based organizations. The Office of Communications and Health Information is dedicated to answering the public's questions and issued over 50 press releases.

Human Resources

In 2017, the Health Department experienced a net decrease in staffing of 24 employees. At year-end, the Department employed 213 employees, of whom 201 were full time and 12 were part time. Overall, 79% of the employees' salaries was funded by the County Fund while 21% was funded by various grants.

In 2017, in an effort to reduce expenditures, the County offered a Voluntary Incentive Separation Program (VSIP) to all full-time CSEA employees whereby those that applied would receive an incentive payment of \$1,000 for every year of completed service as

defined by the CBA. Twenty-One Department of Health employees took advantage of the program and left by September 15th.

In 2017, the Health Department experienced a total of 38 separations – 21 VSIP; 7 retired; 2 transferred to other County agencies, and the remaining 8 resigned. In turn, the Health Department hired 15 employees. Lastly, 10 employees were rewarded with promotions for their hard work and dedication.

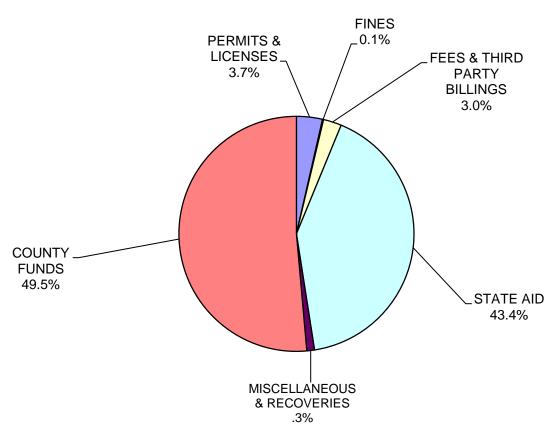
	2016	2017	Net Change
Total Employees	237	213	-24
Full Time	223	201	-22
Part Time	14	12	-2
General Fund	189	169	-20
Grant Fund	48	44	-4

Public Health Laboratories

The Division of Public Health Laboratories provides essential analytic and diagnostic laboratory services which assesses the status of community health in Nassau County. It maintains the necessary technical expertise and instrumentation to test for the presence of bacterial and chemical contaminants in the environment. This Division is available to respond to public health emergencies 24 hours a day, 7 days a week.

The Division is comprised of two laboratories - Microbiology and Chemistry. The Microbiology Lab monitors the quality of beach water, the efficacy of waste water treatment, and quality of drinking water as well as identifies mosquito species for West Nile Virus testing. The Chemistry Lab performs chemical agent analyses in water, air, soil, and dust samples.

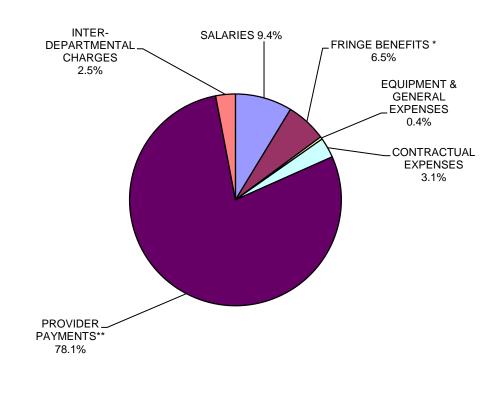
In 2017, the Public Health Chemistry and Microbiology Labs tested 19,700 samples, including beach water, drinking water and waste water. Also, the Microbiology Lab identified 36,090 mosquitoes of 13 different species from 1,088 mosquito traps and prepared the specimens for West Nile Virus and Zika Virus testing by NYSDOH.



Appendix A: Fiscal Year 2017, Charts

PERMITS &	
LICENSES	\$6,295,826
FINES	\$178,995
FEES & THIRD-PARTY BILLINGS	\$5,203,505
STATE AID	\$74,172,641
MISCELLANEOUS & RECOVERIES	\$443,442
COUNTY FUNDS	\$84,537,477
TOTAL	\$170,831,886

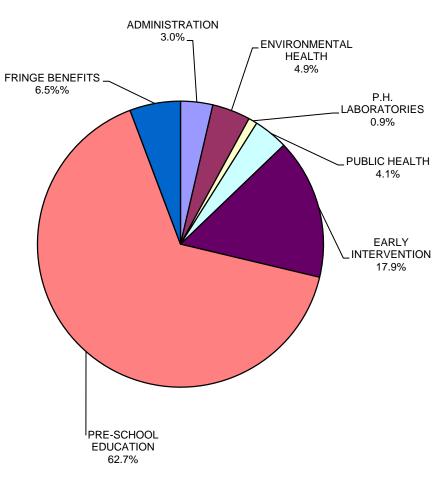




SALARIES	\$16,191,551
FRINGE BENEFITS*	\$11,139,480
EQUIPMENT & GENERAL EXPENSES	\$690,193
CONTRACTUAL EXPENSES	\$5,237,203
PROVIDER PAYMENTS**	\$133,315,811
INTER-DEPARTMENTAL CHARGES	\$4,257,648
TOTAL	\$170,831,886

*Fringe benefits are budgeted centrally by the County. The amount above represents the fringe benefit costs allocated to the Health Department.

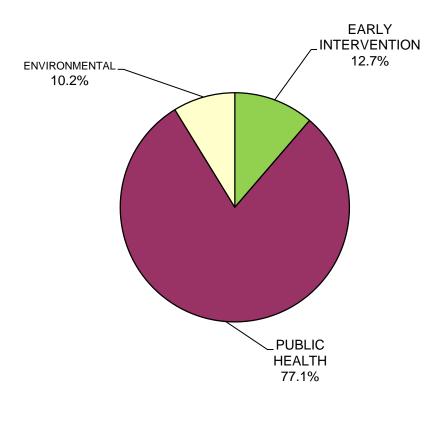
**Provider payments reflect payments to Early Intervention and Pre-School Education providers.



FY2017 EXPENDITURES BY CONTROL CENTER

Fringe benefits are budgeted centrally by the County. The amount above represents the fringe benefit costs allocated to the health department.

FY2017 GRANT SUPPORT BY PROGRAM



EARLY	
INTERVENTION	\$704,236
PUBLIC HEALTH	\$4,291,237
ENVIRONMENTAL	\$570,861
TOTAL	\$5,566,334

	2017	2016	2015	2014	Average
					(2014- 2016)
Disease	Annual #	Annual # Cases	Annual # Cases	Annual #	Annual # Cases
	Cases			Cases	
AMEBIASIS	18	20	21	17	19
ANAPLASMOSIS**	4	5	1	3	3
BABESIOSIS**	7	5	8	9	7
BOTULISM	0	0	0	1	0
CAMPYLOBACTERIOSIS**	268	220	291	287	266
CHIKUNGUNYA**	2	2	13	43	19
CRYPTOSPORIDIOSIS**	7	7	10	10	9
CYCLOSPORA	0	4	5	3	4
DENGUE FEVER**	2	9	6	3	6
DENGUE-VIRAL HEMORRHAGIC FEVER**	0	0	0	1	0
ECOLI SHIGA TOXIN	17	19	12	25	19
EHRLICHIOSIS (CHAFEENSIS)**	3	2	0	1	1
EHRLICHIOSIS (UNDETERMINED)**	4	1	0	0	0
ENCEPHALITIS, OTHER	0	2	0	3	2
GIARDIASIS	67	105	91	79	92
HAEMOPHILUS INFLUENZAE, INV B	1	1	1	0	1
HAEMOPHILUS INFLUENZAE, NOT TYPE B	25	37	14	25	25
HEPATITIS A	13	10	8	6	8
HEPATITIS B,ACUTE	3	3	4	6	4
HEPATITIS B,CHRONIC	37	173	189	209	190
HEPATITIS C,ACUTE	10	3	2	7	4
HEPATITIS C,CHRONIC	829	467	562	573	534

HERPES INF, INFANT =< 60 DAYS	0	1	2	0	1
INFLUENZA A, LAB CONFIRMED	3014	2548	2272	2047	2289
INFLUENZA B, LAB CONFIRMED	1393	874	299	1166	780
INFLUENZA UNSPECIFIED, LAB CONFIRMED	6	6	6	5	6
INFLUENZA PEDIATRIC DEATH	0	0	1	0	0
LEGIONELLOSIS	85	57	65	77	66
LISTERIOSIS	9	9	6	10	8
LYME DISEASE** ****	33	48	44	25	39
MALARIA	6	12	6	9	9
MENINGITIS, ASEPTIC	28	69	69	40	59
MENINGITIS, OTHER BACTERIAL	9	6	6	6	6
MENINGOCOCCAL**	1	0	2	1	1
MENINGITIS, UNKNOWN	0	1	0	0	0
MUMPS**	7	56	1	4	20
PERTUSSIS**	45	87	68	34	63
ROCKY MTN SPOT FEVER**	6	2	1	1	1
SALMONELLOSIS	162	145	156	121	141
SHIGELLOSIS	37	38	79	62	60
STREP, GROUP A INVASIVE	53	44	29	46	40
STREP, GROUP B INVASIVE	154	126	98	97	107
STREP,GROUP B INV,EARLY/LATE ONSET	8	10	5	12	9
STREP PNEUMONIAE,INVASIVE**	104	83	78	85	82
TYPHOID FEVER	7	3	2	3	3
VISA	0	0	0	2	1
VIBRIO - NON 01 CHOLERA	10	6	11	8	8
WESTNILE VIRUS**	7	6	7	4	6
WESTNILE FEVER**	2	1	2	0	1

YERSINIOSIS	11	3	7	11	7
ZIKA VIRUS (SYMPTOMATIC)**	5	52	1	0	18
ZIKA VIRUS INFECTION (ASYMPTOMATIC)**	6	7	0	0	2

*Based on month case created, or December for cases created in Jan/Feb of following year

Confirmed and Probable cases counted; Campylobacter confirmed and suspect *Not official number

**** In 2014,18 counties investigated a sample of positive laboratory results; 2015-2016, 25 counties, and in 2017, 27 counties sampled.