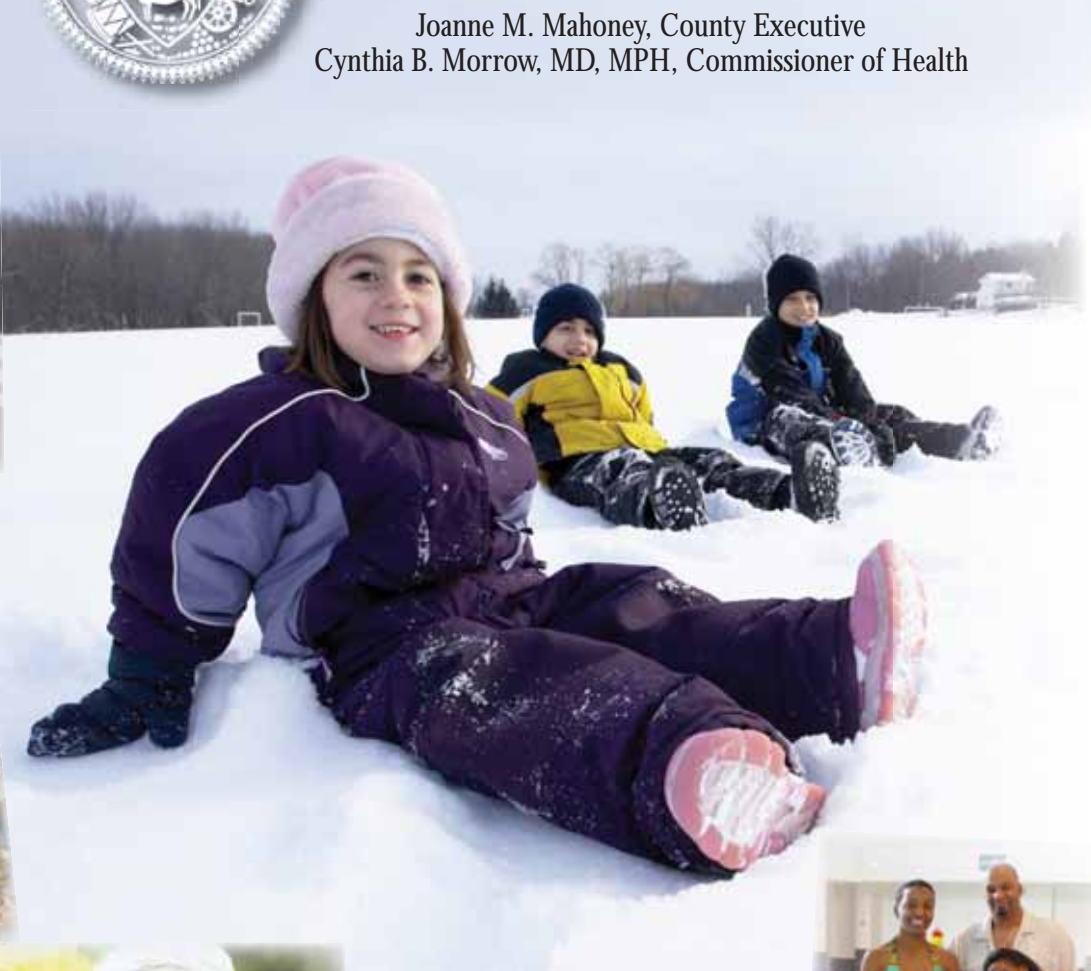


Onondaga County
Health Department

2007 Annual Report



Joanne M. Mahoney, County Executive
Cynthia B. Morrow, MD, MPH, Commissioner of Health





COUNTY OF ONONDAGA HEALTH DEPARTMENT

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JOANNE M. MAHONEY
County Executive

CYNTHIA B. MORROW, MD, MPH
Commissioner of Health

January 31, 2008

Dear County Executive Mahoney,

On behalf of the Onondaga County Health Department, I am proud to present the 2007 Annual Report to you. The Annual Report presents a comprehensive overview of the major accomplishments of the health department and illustrates the many ways in which the Health Department staff continually works to fulfill our mission to protect and improve the health of all residents of Onondaga County through health promotion, disease prevention, public health preparedness, and assurance of a safe and healthy environment.

Improving the health of mothers and children was a priority for the Health Department this year. In January 2007, we established a Division of Maternal and Child Health (MCH) to bring a wide variety of services for mothers and children together, allowing for improved communication and increased program efficiencies. In the spring, MCH launched the Nurse Family Partnership, a new program for young pregnant women at risk for poor birth outcomes. This cost-effective, evidence-based, home-visitation model has been shown to improve the lives of enrolled families, for example, by reducing the incidence of child abuse, reducing welfare use, and improving children's language, cognition, and behavior skills. In the fall, Success by Six, Child Care Solutions, and MCH partnered together to establish, through a grant award by the CNY Community Foundation, a community training program based on the Brazelton Touchpoints[®] approach.

While the Health Department will continue to be proactive in our approach by identifying and implementing new programs to improve the health of all county residents, we will also continue to strengthen our capacity to protect the health of all residents in the face of a public health threat. The fall of 2007 was marked by much media attention about lead poisoning, particularly related to children's toys. The Health Department responded to an emergency request by New York State to assist in the removal of toys from stores. Within 36 hours, Health Department staff visited 150 stores and, when necessary, removed affected toys from sale. Similarly, when media reports about Methicillin Resistant Staphylococcus Aureus (MRSA) generated significant public concern, the Health Department responded by posting reliable information on the website, working with school districts on policies regarding MRSA, and answering public queries about the infection.

Throughout this Annual Report you will find many examples of the Health Department's proactive as well as responsive approaches to ensure that we are making a difference in the health of our community.

Sincerely,

A handwritten signature in black ink, appearing to read "Cynthia B. Morrow".

Cynthia B. Morrow, MD, MPH
Commissioner of Health

Ten Essential Public Health Services

The Essential Public Health Services provide a working definition of public health and a guiding framework for the responsibilities of the local public health system. In 2007, the Onondaga County Health Department fulfilled those responsibilities to the residents of Onondaga County as stated below.

1 *Monitor health status to identify community health problems*

As part of quality improvement efforts, the Food Services section of the Environmental Health Division reviewed documentation of the most frequently cited food service violations in Onondaga County. Educational materials are being developed to fully detail these violation areas and measures to assure compliance. These will be distributed to the food service industry during routine inspections and with 2008 permit renewals.

2 *Diagnose and investigate health problems and health hazards in the community*

The Onondaga County Health Department Communicable Disease staff investigated and provided public education on Methicillin Resistant Staphylococcus Aureus (MRSA) after national and local media highlights generated concern regarding outbreaks of this infection.

3 *Inform, educate, and empower people about health issues*

The Bureau of Special Children Services prepared and distributed two publications: *Resource Directory for Young Children with Hearing Impairments* and *Autistic Spectrum Disorders: Children Under Age 5*. These publications contain relevant information for parents and professionals related to diagnosis, services, and community resources on hearing loss and autism in Onondaga County. Both documents are available in print and on the Health Department website.

4 Mobilize community partnerships to identify and solve health problems

Onondaga County Health Department staff responded to an emergency request from the New York State Commissioner of Health to assist with the removal of toys recalled due to excessive lead contamination. Within 36 hours, 150 stores were visited, two dozen of which were still selling contaminated toys. In total, 125 toys were removed from sale. In all cases, immediate cooperation was received from store management, many of whom did not receive a complete listing of recalled items.

5 Develop policies and plans that support individual and community health efforts

In May 2007, an exercise was conducted to test the key elements of the Health Department's response plan to a Biohazard Detection System (BDS) alarm. The BDS detects the presence of anthrax in mail at major United States Postal Service facilities. The exercise focused on the efficiency of hotline operations, epidemiological response, Point-Of-Dispensing clinics, and pharmaceutical repackaging. Over 60 staff members participated in this successful exercise.

6 Enforce laws and regulations that protect health and ensure safety

In addition to enforcing traditional public health laws such as the Clean Indoor Air Act, the Onondaga County Health Department also supports the criminal justice system. In conjunction with the District Attorney's Office, the Center for Forensic Sciences laboratory oversees the Onondaga County Cold Case Task Force. In 2007, fourteen unsolved homicides were reviewed to determine whether using new forensic technologies would generate investigative leads. Subsequent forensic analysis performed by the laboratory led to the linking of an inmate on death row in Georgia to an unsolved sexual assault and homicide that occurred in Onondaga County in 1975.

7 *Link people to needed personal health services and assure the provision of health care when otherwise unavailable*

In 2007, the New York State Health Department required that all children entering the 6th grade have Tdap vaccination. As a result of that requirement, many children faced exclusion from school. In partnership with a variety of area school districts, the Health Department sponsored clinics offering the immunization, which provided timely access to the vaccine for many families in need.

8 *Assure a competent public health and personal health care workforce*

The Emergency Medical Service (EMS) Bureau sponsored 25 training sites and 130 cardio-pulmonary resuscitation (CPR) instructors through the EMS Bureau's role as a training center for the American Heart Association. Instructors trained 2,954 civilians and first responder personnel in First Aid/CPR/Automatic External Defibrillation at various locations throughout Onondaga County.

9 *Evaluate effectiveness, accessibility, and quality of personal and population-based health services*

In 2007 the Health Department piloted the use of FluMist® for children. FluMist®, a nasal spray vaccine, was offered to healthy children ages two to eighteen. Ninety-seven doses of FluMist® were administered to children this year at the Health Department public flu clinics and feedback from both parents and children was favorable.

Continued

10 *Research for new insights and innovative solutions to health problems*

The Health Department's IT staff completed the implementation of videoconference capability for the Metropolitan Medical Response System, thereby improving emergency preparedness communications in our region. The videoconferencing system facilitates timely, improved coordination of resources in emergencies and eliminates the need for travel to a common site. The network allows face-to-face communication, and the opportunity for visual presentation and training among county and city administration, local hospitals and other emergency response partner agencies.

Mission Statement

The mission of the Onondaga County Health Department is to protect and improve the health of all residents of Onondaga County through health promotion, disease prevention, public health preparedness, and assurance of a safe and healthy environment.

Onondaga County Legislature 2007 Health Committee

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Robert Warner, Vice-Chair
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Patrick Kilmartin
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Correctional Health Services

2007 Highlights

- *Onondaga County's Correctional Health Medical Director, Dr. James Greenwald, made the list of Best Doctors in America. Best Doctors Inc., identifies board-certified physicians in our area recommended by their peers as being the "best" in their specialty. Dr. Sandra Sulik, one of Correctional Health's contracted physicians also made the list.*
- *The Correctional Health program made technological advances in 2007 with electronic prescribing, on-line medical text and electronic bar-coding of health records.*

The mission of Correctional Health is to provide urgent and necessary medical care for inmates in the custody of Onondaga County. Services provided to inmates include: medical and mental health assessments at booking; history and physical exam within 14 days of admission; sick call visits with physicians, nurses, physician assistants and dentists; health education/psychoeducation; emergency medical and psychiatric services; medical housing; case management and discharge planning; medication administration; clinic appointments; and hospitalization as necessary.

The Correctional Medical and Behavioral Health unit is part of a multidisciplinary team, working with the Departments of Health, Mental Health, Corrections and the Sheriff's Office to coordinate care for inmates. Providing health care through these County agencies also serves a wider public health purpose; it allows the County to screen for and treat chronic and communicable diseases in a transient population with little access to consistent, primary medical care.



Continued

Correctional Health continued to witness high volume in the inmate population in 2007, presenting an ongoing challenge to system capacity at the Onondaga County Correctional Facilities. Correctional Health staff provided care to 13,110 persons at the Justice Center and 1,424 at the Department of Correction during 2007, with an average combined daily census of 1,053. The following table demonstrates the growth in the inmate population since 2001.

	<i>Total Average Daily Population (Justice Center and Dept. of Corrections)</i>	<i>Total # of Inmates at Justice Center with stays exceeding 14 days</i>	<i>Total # of Inmates at Dept. of Corrections with stays exceeding 14 days</i>
<i>2001</i>	820	3011	1367
<i>2002</i>	931	3319	1570
<i>2003</i>	932	3291	1481
<i>2004</i>	1011	3570	1892
<i>2005</i>	1031	3818	1993
<i>2006</i>	1114	3555	2250
<i>2007</i>	1053	3434	2257

Correctional Health staff continues to try to improve provision of inmate medical services while maintaining cost efficiencies. As an example of this, E-Corr, an electronic prescribing system which helps reduce errors, control prescribing practices, control cost, and improve work flow was implemented in 2007. Electronic prescribing went live in June 2007. In addition, through grant funding, Correctional Health received space-saving storage and an electronic bar-coding system, allowing consolidation of record space and improvement in efficiency. Overall in 2007, continued cost-containment initiatives from 2006 and improved efficiency strategies resulted in a 16% decrease in pharmaceutical costs compared to 2006.

Bureau of Disease Control

2007 Highlights

- *The Bureau of Disease Control was awarded an increase in funding to support enhanced follow-up of Chlamydia testing. The Bureau will continue its efforts to find and treat individuals in the county who are identified as having had contact with the disease.*
- *The Bureau of Disease Control rapidly implemented new Centers for Disease Control and Prevention treatment guidelines for gonorrhea in 2007.*
- *Communicable Disease staff investigated and educated the public on Methicillin Resistant Staphylococcus Aureus (MRSA) after national and local media attention generated concern regarding outbreaks of this infection.*
- *The Center for Disease Control requested assistance in the screening and treatment of a group of refugees identified as being at risk for malaria. Through the collaborative efforts of the OCHD, New York State Department of Health (NYSDOH), and SUNY Upstate Medical Center, all affected individuals were assessed and treated as needed.*
- *In May 2007, the NYSDOH TB Control program invited key Bureau staff to give a presentation at a statewide conference. The focus of the presentation was on the QuantiFERON TB testing pilot and the County's model TB case review program.*



The Bureau of Disease Control is responsible for the investigation, diagnosis, treatment, reporting, and prevention of reportable communicable diseases in Onondaga County. Programs within the Bureau include Communicable Disease, Sexually Transmitted Disease (STD), HIV counseling and testing, and Tuberculosis Control. Bureau staff members

monitor disease epidemiology within the community and work closely with Administration to develop strategies to prevent and control disease, including education, outreach, testing and treatment.

Communicable Disease

The Communicable Disease program is responsible for the investigation, follow-up, surveillance and reporting of almost 70 diseases identified by NYSDOH as reportable under the New York State Sanitary Code. Communicable Disease nurses review positive lab findings, investigate each as necessary, follow-up with the case patients and their medical providers to ensure appropriate treatment/prophylaxis for public health purposes. All confirmed cases are electronically reported to NYSDOH. Staff work closely with Food Protection, Animal Disease Control, Surveillance staff, and NYSDOH to control and prevent of further spread of communicable disease within the community.

As noted above, in June 2007, the Health Department received an urgent request from the CDC and NYSDOH concerning a group of refugees who had recently arrived in the county and were identified as having been exposed to malaria. All those identified as being potentially at-risk for malaria need an assessment and appropriate medication. The Refugee Assistance Program was instrumental in locating and educating at-risk individuals while physicians from SUNY Upstate Medical University volunteered their time to meet the health needs of this vulnerable population. Through a coordinated effort by the Refugee Assistance Program and staff from NYSDOH, SUNY Upstate Medical University, and the Onondaga County Health Department, every individual received the needed care in a timely fashion.

Communicable Disease (CD) staff were also called upon in Fall 2007 to respond to national and local media attention focused on Methicillin Resistant Staphylococcus Aureus (MRSA) outbreaks, with a particular emphasis on cases associated with area schools. Although MRSA is not a reportable disease, CD staff interviewed and tracked patients in such situations. CD staff also provided education to the public on MRSA in an effort to allay public fears.

The Communicable Disease program investigated over 1,308 possible cases of communicable disease with 916 diseases being reported to NYSDOH in 2007. This was a decrease over the 2006 numbers of 1,502 cases investigated and 1,163 reports to NYSDOH.

The number of confirmed cases of pertussis investigated this year was down dramatically to 28 (compared to 88 confirmed cases of pertussis in 2006.) The Onondaga County Health Department continues to work closely with NYSDOH to alert physicians, school medical personnel, and the public about recommendations for treatment and prevention of this disease.

The CD program continues to closely monitor potential human rabies exposures, evaluating the need for prophylaxis (rabies shots) administration. In 2007, the OCHD authorized rabies shots for 105 people who were identified as potentially being exposed to rabies.

Sexually Transmitted Disease

The Sexually Transmitted Disease program offers free and confidential examination, diagnosis, treatment, education, and partner notification of sexually transmitted diseases for all Onondaga County residents. NYS Public Health Law mandates all positive reports of sexually transmitted disease be reported to the local health department for investigation, assurance of appropriate treatment, and follow-up with possible contacts.

In April 2007, the CDC released new guidelines for the treatment of gonorrhea. Because of emerging resistance to a commonly used antibiotic, the CDC now recommends that all individuals identified as having gonorrhea be treated with an antibiotic that is available only as an injection. The Bureau was able to implement the new guidelines in a timely manner.

The Bureau of Disease Control was awarded an increase in funding for follow-up on all positive cases of gonorrhea, chlamydia, and syphilis reported in Onondaga County. The Bureau of Disease Control used this increase to focus efforts on enhancing chlamydia partner notification and treatment in an effort to impact the county's high rates of this disease. The OCHD is a sentinel site for chlamydia testing in New York State; Onondaga County data is used to accurately capture and report on the extent of this disease in the population.

The HIV counseling, testing, and partner notification activities continued, resulting in an increase in the number of individuals being tested at various outreach sites around the county. This activity was made possible through a NYSDOH grant targeting high-risk groups for off-site testing with the use of Ora-sure oral fluid HIV testing (a rapid test). In fall 2007, the Bureau had a successful 2-day site visit by the AIDS Institute where all partners, including Syracuse Community Health Center, Syracuse Model Neighborhood Facility, and Center for Community Alternatives, had the opportunity to share their programmatic successes and challenges with NYSDOH staff. High-risk women are a focus for this grant funded activity. In 2007 over 2,100 HIV tests were provided through the STD clinic and outreach sites funded by this grant.

	<i>2004</i>	<i>2005</i>	<i>2006</i>	<i>2007*</i>
<i>Gonorrhea</i>	808	498	670	502
<i>Chlamydia</i>	2,366	2,247	2,465	2,306
<i>Syphilis</i>	13	9	17	10
<i>Clinic Visits</i>	6,392	6,351	6,520	6,406

**Some data has not yet been recorded; these numbers are approximate*

Tuberculosis Control

The Tuberculosis (TB) Control program provides comprehensive testing, diagnosis, and treatment of latent and active tuberculosis cases in Onondaga County. The TB Control Program minimizes the public health threat posed by cases of active tuberculosis in our community through careful evaluation, closely monitored treatment regimes, directly observed therapy (DOT), and promotion of preventive therapy.

Tuberculosis rates in Onondaga County remain relatively constant. Fourteen cases of active disease were reported in 2007. The highest rates of TB are found in foreign born populations. (Please refer to below chart.) Various targeted testing strategies are employed to identify those county residents at greatest risk of TB infection. For example, the OCHD partners with the Refugee Assistance Program to provide on-site tuberculin skin testing, assessment, diagnosis, and provision of preventive treatment for individuals who may be at high risk for developing active TB. Similarly, staff continues to monitor the homeless population through collaborative-targeted testing activities. OCHD staff work closely with the Rescue Mission and Oxford Inn staff to provide initial tuberculin skin testing allowing identification, diagnosis, and preventative treatment for individuals identified as being at-risk for TB.

Cases of Tuberculosis, Onondaga County 2003-2007

<i>Year</i>	<i># Cases</i>	<i>% Foreign-born</i>
<i>2003</i>	19	42
<i>2004</i>	14	36
<i>2005</i>	20	75
<i>2006</i>	15	80
<i>2007</i>	14	64

The NYSDOH invited the Bureau Director and the Nursing Supervisor to present on QuantiFERON TB testing and the TB Case Review process at the Statewide TB Controllers conference held in May 2007. The Bureau was able to share its accomplishments and highlight some of OCHD's model programs with other TB Control programs across the state.

The TB program also had a successful site visit from NYSDOH TB Control in June 2007 where disease investigation activities were highlighted. NYSDOH expressed approval of all aspects of the OCHD's TB Program.

Emergency Medical Services

2007 Highlights

- *Partnered with the Central New York Police Academy teaching six 40-hour First Responder courses from the New York State Department of Transportation. As a result of this training, 75 police cadets gained valuable life-saving skills and received emergency medical care certificates of completion.*
- *Sponsored 25 training sites and 130 Cardio-Pulmonary Resuscitation (CPR) instructors through EMS's role as a training center for the American Heart Association (AHA). Instructors from the EMS Bureau also trained 2,954 civilians and EMS/Fire/Police personnel in First Aid/CPR/Automated External Defibrillation (AED) at various locations in Onondaga County in 2007.*
- *Sponsored 11 EMS training courses, enabling the certification or recertification of 131 EMS personnel through EMS's role as a sponsor for the New York State Emergency Medical Services Program.*

The Emergency Medical Services (EMS) Bureau works with Health Department staff and several outside agencies to improve and expand disaster preparedness and education for County employees and the general public. The Bureau plays an active role in updating and refining County response plans for chemical and biological incidents. In addition, the EMS Bureau manages EMS education and field operations and oversees EMS coverage for public events and 911 operations.



Environmental Health

2007 Highlights:

- *Staff responded to an emergency request from the New York State Health Commissioner to assist with the removal of those toys recalled due to excessive lead contamination. Within a day and a half, 150 stores were visited, of these 24 were still offering contaminated toys. In total, 125 toys were removed from sale. In all cases, immediate cooperation was received from store management, many of whom did not receive the complete listing of recalled items.*
- *An improved food borne illness outbreak investigation case history report form and database system were implemented. This system was designed to be readily adaptable to meet the need for data collection and analysis of future food borne illness outbreak investigations as they occur.*
- *An electronic system was devised and implemented for information sharing on emerging issues regarding food product recalls, lead recalls and any other potential public health issues of concern. Implementation of this system provides reporting of up-to-date information to key staff throughout the course of the workday as well as electronic transmission of recall notices to the Syracuse Newspapers.*

Animal Disease Prevention

The Bureau of Animal Disease Prevention provides services and education in an effort to reduce the incidence of illness transferred from animals to humans. The Bureau focuses primarily on rabies control in Onondaga County. Staff members investigate reports from the community concerning animal bites or suspected rabid animals. Investigations allow the Bureau to determine the potential for human exposure to rabies, oversee the testing of specimens, and take the necessary steps to protect the community's health.

In 2007, the Bureau of Animal Disease Prevention investigated 942 animal bites involving 636 dogs, 252 cats, and 54 other species of animals. Of the 286 specimens submitted for rabies testing, a total of 13 animals tested positive, including 3 bats, 1 cat, 4 raccoons, 4 skunks, and 1 fox.

With the assistance of community partners, the Bureau of Animal Disease Prevention conducted 18 rabies clinics for Onondaga County residents in 2007. Scheduled from March through December, these clinics took place in various locations throughout the county, including four sites in the city of Syracuse. The clinics provided free rabies vaccination (with donations accepted), as required by state law, to 2,532 animals in 2007, including 1,647 dogs, 870 cats, and 15 ferrets.



During 2007, 18 dog owners in Onondaga County, whose dogs had engaged in biting, failed to provide proof of rabies vaccination. Animal Disease Prevention initiated formal enforcement procedures in these cases, resulting in 9 scheduled hearings and 4 Commissioner's orders.

Recognizing the importance of pet care in emergency planning, Animal Disease Prevention staff attended a workshop on County Animal Response Teams (CART). Staff also assisted the Department of Emergency Management to develop an emergency pet-sheltering plan. This plan can improve the outlook for both humans and pets in the event of a disaster in Onondaga County.

Community Environmental Health

The Bureau of Community Environmental Health consists of the Food Protection, Residential Environmental Health and Temporary Residence & Recreational Facilities sections.

Bureau activities include inspection of facilities, review of safety plans, dissemination of educational materials to regulated facilities and the public, collection and testing of food and water samples, response to citizen complaints, investigation of injuries and food-borne illnesses linked to regulated facilities, and enforcement of Sanitary Code regulations.

The New York State Department of Health conducts periodic review of community environmental health programs. Onondaga County's Community Environmental Health Bureau achieved satisfactory reviews for all its programs in 2007.

Food Protection strives to ensure that safe and sanitary food is prepared and served to the many thousands of patrons who visit the 1,888 food service facilities in Onondaga County. To accomplish these objectives, the Food Protection section conducts periodic comprehensive inspections of food service facilities as mandated by Onondaga County and New York State Sanitary Codes. The Food Protection Section also provides food safety education and guidance for the food service industry, temporary foodservice operations, media outlets and the general public.



Together, these educational and enforcement activities help achieve and improve compliance with Sanitary Code provisions.

The variety of festivals, field days, and other community events in Onondaga County expand in scope and popularity each year. Temporary food service events continue to require a significant amount of staff time to provide pre-event education, issue permits, and

conduct operational inspections during events. Pre-event education provided to temporary food service providers resulted in significant levels of compliance at the majority of the 462 operations inspected during 2007.

The Food Protection section investigated a total of 120 suspected food-borne illness complaints in 2007. Food Protection employees advise ill individuals to follow preventive measures so as to reduce or eliminate secondary transmission of illness to those they are in contact with. On the facility end, the Food Protection section implements a combination of education and enforcement measures to prevent future food-borne illness events at the restaurant or facility.

The Food Protection section is also responsible for monitoring compliance with the New York State Clean Indoor Air Act. Food Protection staff investigated 68 complaints involving the Clean Indoor Air Act in 2007. In 8 cases, establishments were found to be in non-compliance and inspection resulted in enforcement actions. Enforcement actions include written warnings, and, for establishments with repeat offenses, Commissioner's Hearings.

Food Protection also investigated 480 other complaints in 2007. Where violations were observed, facilities were required to implement corrective measures in a timely manner. Code enforcement action was initiated when necessary.

Residential Environmental Health enforces public health housing regulations and investigates citizen complaints of alleged public health nuisances or hazardous conditions. Staff members responded to 716 such complaints in 2007 and resolved the majority of these complaints through education on proper sanitation practices. In situations where education measures did not achieve compliance, Residential Environmental Health staff utilized Commissioner's Hearings to enforce property codes.

The Temporary Residence & Recreational Facilities section conducts inspections and sanitary surveys of a variety of different types of regulated facilities, including swimming pools, bathing beaches, community and non-community water supplies, hotels and motels, children's camps, migrant farm worker camps, school food services, summer feeding sites, child care centers, mobile home parks, state institutions, campsites and rooming houses. During 2007, staff members inspected 702 regulated facilities for compliance with the Sanitary Code. The majority of facilities demonstrated substantial compliance with the Sanitary Code, and deficiencies observed were cited and corrected. However, Commissioner's Hearings were scheduled when necessary.

Temporary Facilities staff provides ongoing education to facility owners regarding code requirements and proper operating procedures. Staff members also respond to complaints concerning regulated facilities.

Because of new Federal recommendations for school food services inspections, significant effort was undertaken to inspect school food service. All facilities identified as being school food services received a minimum of two inspections during the year, a 100% increase from previous years.

Environmental Health Assessment

The Environmental Health Assessment Bureau is responsible for responding to and investigating issues dealing with the indoor and outdoor environment. The bureau houses the following programs: Adolescent Tobacco Use Prevention Act, Environmental Exposure Response, Healthy Neighborhood, Incinerator Monitoring, Indoor Air, New York State Clean Indoor Air Act, Radon, Rodent Control and Vector Control.

Health assessment staff performed 464 compliance checks in 2007 assessing whether retailers sold tobacco to minors in violation of the **Adolescent Tobacco Use Prevention Act (ATUPA)**. To conduct these compliance checks, trained teenage volunteers, working with an Environmental Health Assessment staff member, randomly visit retailers and attempt to purchase tobacco. Retailers who sell tobacco to minors face penalties and follow-up investigations. 13 retailers sold tobacco to a minor in 2007.



Tobacco retailers who fail the compliance check accumulate penalty points on their registration. If a retailer accumulates three points, his/her registration to sell tobacco is suspended for six months. However, non-compliant tobacco retailers can avail themselves of state certified training courses on ATUPA. If the retailer provides proof the salesperson who sold tobacco to a minor attended one of these courses, the retailer will be assigned only one penalty point instead of two.

The 2006-2007 ATUPA grant included additional funding for activities associated with the Clean Indoor Air Act, such as smoking complaint investigations and response to smoking waiver or tobacco sampling requests.

The Environmental Exposure Response program conducts surveillance of toxic and hazardous substance sites, investigates environmental radiation incidents, and responds to hazardous spills.

During 2007, the Environmental Exposure Response program provided guidance on health risks associated with hazardous materials incidents. This included several petroleum spills

which resulted in odors in a residence, a cleaning chemical spill, and several hazardous substance sites where the Department of Environmental Conservation was conducting sampling.



Staff members continue to respond to a significant number of radiation incidents. The majority of cases involved loads of trash going to the municipal trash incinerator, and often, the source of radiation is medical in nature. Investigation revealed a significant portion of these incidents was from

medical facilities. The Department has alerted these facilities and asked for their cooperation in educating staff and patients on proper disposal of radioactive waste.

The goal of the **Healthy Neighborhood program** is to reduce specific household hazards, such as fire hazards, lead poisoning, and carbon monoxide in high-risk neighborhoods. Staff members conduct door-to-door surveys to determine household needs and identify safety issues. The Healthy Neighborhood program provides households with supplies and referrals to address household hazards. During 2007, Healthy Neighborhood staff completed 617 surveys, resulting in 1,313 referrals. The Syracuse Fire Department responded by installing 407 smoke detectors and 270 carbon monoxide detectors in at-risk homes. In addition, 147 children underwent testing for lead, and 208 residents received training on managing their asthma as a result of the Healthy Neighborhood intervention.

New York State increased Healthy Neighborhood funding for the 2006-2007 grant year, reflecting the State's further emphasis on tobacco control. A total of 207 residents were referred to the NYS Quitline for help with tobacco cessation.

Incinerator Monitoring: As part of Onondaga County's effort to monitor the relationship between the operation of the municipal solid waste incinerator and increased levels of constituents in the environment, Environmental Health staff collected a series of soil and ash samples. Samples were collected in the spring and fall. They were analyzed for metals, PCB's, Dioxins, and Furans. Staff reviewed quarterly reports and annual stack testing reports which are forwarded directly from the Department of Environmental Conservation (DEC). The Incinerator Monitoring program determined 2007 results were within the expected range for urban environments and were below levels associated with health risk. The Environmental Health Assessment Bureau issued a report outlining the results of 2006 monitoring in May and will issue a similar report for 2007 results.



Bureau staff responded to a legislative request to respond to the findings of a research study that implied that the incinerator may be a source of mercury in a nearby lake. Initial concerns were resolved after data about the Health Department sampling program and the Health Risk Assessment (performed by an independent contractor prior to the permit for the incinerator being issued) was presented.

The Indoor Air program investigates complaints associated with indoor air quality, such as mold, asbestos, and odors. During 2007, the Indoor Air program investigated or responded to inquiries regarding 112 concerns and complaints. Concerns about mold continued to be a major issue in 2007. Staff members are using a successful protocol to address public questions and complaints about mold in homes, rental units and workplaces. Services included advising residents on how to correct water problems and effectively clean up mold. Staff members also handled other indoor air complaints involving asbestos, carbon monoxide, odors, and general air quality.

Environmental Health is involved in enforcement of the **New York State Clean Indoor Air Act** (CIAA). The success of this legislation is reflected in the continued decline in the number of complaints, waivers, and tobacco promotion requests received each year.

The division received and renewed 8 CIAA waiver applications during 2007, although 1 waiver is no longer valid due to a change in ownership. These active waivers, originally issued for financial hardship, continue to decline as facilities change ownership or go out of

business. In addition, there were 11 tobacco promotion notices received from establishments (primarily bars) in accordance with the law.

Environmental Health Assessment staff address complaints involving smoking in the workplace. In 2007, staff members resolved 40 workplace smoking complaints by answering questions and providing education and guidance on the Clean Indoor Air Act. One establishment was taken to a hearing for repeated smoking complaints.

The Radon program provides residents with information on home radon testing and mitigation. During 2007, staff members distributed 600 radon detectors to Onondaga County residents through a grant from the New York State Department of Health. Early this year there was significant interest in radon due to an article in a local newspaper. This article resulted in over 1,000 calls requesting radon detectors and information.

The Rodent Control program investigates rodent complaints and conducts monitoring and baiting activities in the public sewer system under a cooperative arrangement with the Department of Water Environment Protection. In summer 2007, Rodent Control staff



members checked sewers located in the project areas for this year's and the following year's construction for the Onondaga Lake Improvement Project. Program personnel applied rodenticide to catch basins and manholes located in these areas. No evidence of active rodent infestations was observed during that time. In addition, program staff trained two apprentice applicators.

During 2007, Onondaga County residents entered 19 complaints alleging rodent infestations within the public sewer system. Rodent Control staff investigated these complaints, applying appropriate baiting as needed. Staff members also conducted preventive baiting activities in other areas as time permitted.

The Vector Control program conducts bird and mosquito surveillance and mosquito control activities in order to reduce the risk of arboviral disease transmission.

In 2007, West Nile Virus (WNV) was again detected in birds, and for the first time since 2003, in mosquitoes in Onondaga County. However, for the first time since 2002 there was no evidence of Eastern Equine Encephalitis (EEE), although EEE was detected in mosquitoes in Oswego County. There were no confirmed human cases of WNV or EEE in Onondaga County in 2007.

Program staff conducted vector mosquito surveillance activities from May through September. Each week, the Vector Control program submitted mosquito specimen pools to the Wadsworth Center Laboratory, New York State Department of Health, to determine the presence of WNV, EEE, California Encephalitis (CE), and other arboviruses. Of the 423 mosquito pools submitted during the period, 3 tested positive for WNV and one tested positive for Jamestown Canyon virus. This summer, Dr. Richard Daines, the State's Commissioner of Health, visited the OCHD's Vector Control Program and had a site visit at the Cicero Swamp.

Dead bird surveillance occurred throughout the year. The Vector Control program received reports of 358 dead birds, including 146 crows, during 2007. Program staff following state guidelines collected and submitted only a subset of these birds to the New York State Department of Environmental Conservation Wildlife Pathology Unit and Wadsworth Lab for virus testing. Of the 27 birds submitted, 3 tested positive for WNV.



The Vector Control program performed mosquito control activities from May through September. Program staff treated 18,900 catch basins throughout the county using Altosid XR, a single application, long lasting, briquette larvicide. Nearly 1,000 known breeding sites were checked and treated, as necessary, with granular larvicide or larviciding oil.

Vector Control continued its program to treat abandoned swimming pools with appropriate larvicide. Staff treated three abandoned swimming pools during 2007.

Vector Control staff also continued the tick identification service for county residents concerned about exposure to a tick. Staff identified 7 ticks submitted during 2007.

Public Health Engineering

The Public Health Engineering Bureau consists of the Water Supply section, Land Development section, and the staff for the Council on Environmental Health.

The Water Supply section is responsible for surveillance, inspection, and regulatory oversight of the County's public water systems. This section also provides information and assistance to residents on individual wells. In 2007, substantial progress was made toward eliminating several water supply sources that did not meet current standards. This section also continued to focus on the security and vulnerability of water supplies. Program highlights include the following:

- Three community public water supplies, the Village of East Syracuse, Village of Marcellus and Mountain Glen Water Company substantially progressed toward eliminating their Ground Water Under the Direct Influence of surface water (GWUDI) sources. GWUDI water sources are susceptible to surface water contamination and therefore require additional treatment including filtration and disinfection capable of 99.9% removal and/or inactivation of viruses and *Giardia lamblia* cysts. An alternative to additional treatment is to switch to alternate sources of water. The Village of East Syracuse switched to OCWA water and will eliminate their spring source by the end of the year. Mountain Glen advertised and opened bids for construction of mains to bring in OCWA water, and Marcellus has partnered with the Limeledge Water District to supply OCWA water to them by 2009.
- The recently enacted Long Term 2 Enhanced Surface Water Treatment Rule (LT2) affects all public water systems using surface water or ground water under the direct influence of surface water. This supplemental legislation seeks to protect public health through the control of microbial contaminants, focusing specifically on water systems with elevated *Cryptosporidium* risk. The LT2 rule will require water systems with uncovered finished water storage to cover their storage facilities or provide additional treatment to inactivate and/or remove *Giardia lamblia* and *Cryptosporidium*. The deadline for covering storage facilities or treating the water before distribution, or achieving compliance with a state approved schedule is April 1, 2009. Systems with open reservoirs include the City of Syracuse, Metropolitan Water Board and Town of Skaneateles. Customers receiving Skaneateles Lake water in the Towns of Elbridge, Skaneateles, Camillus, Villages of Jordan, Skaneateles and Elbridge will also be affected.



- For the first time, the City of Syracuse 90th percentile monitoring sample results for lead fell below the 15 parts per billion action level demonstrating they had achieved optimal corrosion control, thus allowing the City the option of reevaluating their lead service replacement program.
- The New York State Department of Health requires the full utilization of the Safe Drinking Water Information System (SDWIS) and proficient use of SDWIS add-ons. Full utilization of the sample results module was a new requirement in 2007. In preparation for this, all inventory data was reevaluated, necessary sample points were designated, and sample schedules for every contaminant/contaminant group were established for each of the County's 111 Public Water Systems (PWS). Sample result data was then entered. All of the 2007 sampling results for bacteriological sampling including both monitoring and surveillance sampling were entered for each system. In addition, all of 2007 and the most recent past (2001-2006) chemical sampling results (primary inorganics, secondary inorganics, principal organics, synthetic organics, disinfection-by-products, etc.) were entered for each system. This accomplishment required a great deal of staff time. The increased SDWIS workload will now be an ongoing responsibility.
- Emergency Response Plans (ERP) and Vulnerability Assessments (VA) are required by Code to be updated every 5 years. By the end of 2007, ten public water systems submitted plans for review and approval by this office.
- The Water Supply program staff conducted in-depth sanitary surveys of all 111 public water supplies in Onondaga County in 2007.



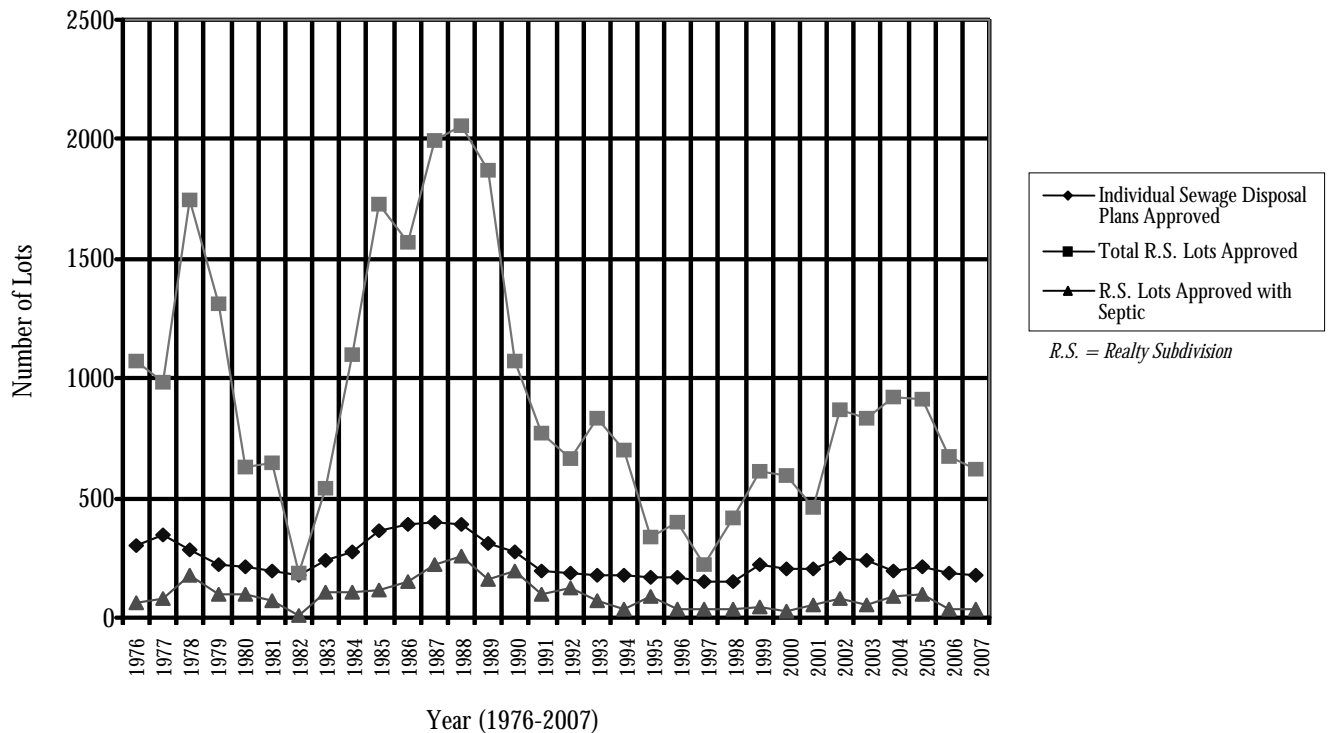
Land Development conducts review and approval of plans for municipal sewer and water extensions, realty subdivisions, individual sewage disposal systems, and public swimming pools to assure they conform to public health standards.

In 2007, the number of building lots approved as individual lots by the Land Development section continued a downward trend. The total number of lots approved under the realty subdivision program was also down in 2007, which is consistent with the slow-down in the housing market.

Bureau staff presented at two Onondaga County Planning Federation conferences this year. This was an important opportunity for the Health Department to interact and establish

relationships with towns within the county. The presentations concentrated on the Health Department's obligations during the review phases of minor and major subdivisions.

Land Development Plans Approved by Category, 1976-2007



The Bureau of Public Health Engineering implemented a procedure to provide improved oversight of the repair of septic systems in Onondaga County. This was a result of a memorandum from the New York State Health Department dictating the need for design professionals in certain types of repairs. This office distributed literature summarizing the criteria for the design and review of septic system repairs to many of the contractors installing systems in the county. This office has processed an increased number of design reviews as part of this program, particularly within the Otisco and Skaneateles Lake watersheds.

The Council on Environmental Health formulates policy recommendations relating to environmental health issues. Citizen members of the Council on Environmental Health provided approximately 250 volunteer hours of expertise on environmental and environmental health issues through monthly meetings, attending public information meetings, field site visitations, document review and report preparation.

The Council is assisted by attendance and/or presentations made by Council ex-officio members, other local and state agencies, private organizations, and interested citizens. Highlights of Council activities in 2007 included the following:

- Designated as the County's Citizen Advisory Board lead entity for fulfilling public participation requirements for the County's Stormwater Management Program.
- Helped develop the rain garden project at the 2007 Parade of Homes to demonstrate an innovative stormwater quantity and quality management technique.
- Provided comment to NYSDEC on proposed SPDES general permits for stormwater discharges from municipalities and construction activities.
- Finalized evaluation on the feasibility of wetlands bank creation for economic development, expediting regulatory review, and environment improvement.
- Helped develop and endorse the County's 2008 aquatic invasive species control program.
- Developed a County Terrestrial Invasive Species Control Strategy
- Developed educational material for the proper maintenance of neighborhood stormwater management structures for proper function and mosquito population prevention.

In addition to providing administrative and technical support, Council staff members carried out the following activities in 2007:

- Served on the County's internal stormwater management team to help the county meet Municipal Separate Stormwater Sewer Systems (MS4) regulatory compliance.
- Presented on water and environmental quality to approximately 100 high school students for World Monitoring Day at Onondaga Creek and to 250 elementary students at Green Lakes State Park on urban nonpoint water quality issues.
- Provided staff assistance for the County's Citizen Flood Advisory Committee.
- Served as a member on the ad-hoc Central New York Water Chestnut Task Force.
- Administered and implemented water quality projects in major County watersheds through the Finger Lakes-Lake Ontario Watershed Protection Alliance program.
- Provided technical assistance on the County's Onondaga Lake Ambient Monitoring Program; technical review and comment on proposed activities related to lake industrial pollution remediation.
- Responsible for permit compliance, field coordination and implementation of the water chestnut mechanical harvesting and chemical control program.

Weights and Measures

The Weights and Measures program performs annual inspection and testing of all scales, gas pumps, and other weighing or measuring devices used for retail services. Staff members inspected a total of 786 facilities and 7,136 devices during 2007. Program staff also conducted investigations of all complaints received during the year.

The program continues to use the systematic method for collecting overdue fees for Weights and Measures facilities. Under this method, facilities that do not pay in a timely manner, despite repeated billing attempts, will have a graduated fine added to their fee. The Weights and Measures program carefully devised the fee collection system to be fair and equitable to all facilities, including those that pay within the time period allowed under New York State Weights and Measures regulations

Facilitated Enrollment

2007 Highlight

- *Attended, at the request of the Governor's office, the New York State Fair representing the forty-one Lead Agencies within New York State.*
-

The mission of the Facilitated Enrollment program is to expand the accessibility and enhance the ease of applying for public health insurance within Onondaga County. In order to accomplish this mission, ongoing partnerships have been established with key community based organizations and County departments. Facilitated Enrollment makes strides to continuously strengthen these partnerships.

All community-based enrollment sites have a Facilitated Enroller on staff. Facilitated Enrollers assist families in the application process for Medicaid, Family Health Plus, and Child Health Plus. Enrollers meet at times and locations convenient for families. They assist and guide families throughout the application process and offer supportive services until the family receives on-going health coverage. In 2007, Facilitated Enrollment processed 2,001 referrals for public health insurance and submitted 1,704 applications to Medicaid and CHPlus B plans. These efforts resulted in the enrollment of 931 adults and 948 children.



Family Planning Service

2007 Highlights

- *Family Planning Service (FPS) continued its “About last night...” campaign aimed at increasing awareness about the availability of emergency contraception. The enhanced campaign used brochures, cards, posters, and bus placards to disseminate information about emergency contraception. Provision of this contraceptive method is mandated by funding sources. FPS continues to improve access to emergency contraception, which is available on a walk-in basis at all Family Planning Clinics and at the Family Planning administrative office during non-clinic hours. In 2007, FPS provided 1,509 patients with emergency contraception, registering a 20% increase over 2006.*
 - *Family Planning now offers the OraQuick HIV Rapid Test at all clinic sites. This test uses a small blood sample and allows patients to receive HIV test results in approximately 20 minutes. Since implementation, FPS has provided HIV testing to 1,711 patients, a 101% increase in testing over 2007.*
-

Clinical Services

Family Planning Service (FPS) is a preventive health care program funded by the United States Public Health Service and the New York State Department of Health. Family Planning provides medical, educational, and social services designed to assist women and men in the planning and spacing of children. The program also serves as an entry point to health care.

FPS focuses on women who are at risk for an unintended pregnancy and in need of subsidized family planning care. Priority is given to teenagers and women from low-income families. In 2007, Family Planning Service provided care to 6,505 unduplicated patients. Patients made 13,024 visits to the three FPS clinic sites, and 98% of all patients seen in 2007 were at or

below 200% of the federal poverty level. FPS staff members work with uninsured patients to help them access publicly-funded insurance programs such as Family Planning Benefit Program and Child Health Plus. FPS actively partners with the Cancer Screening Program to ensure eligible women receive mammograms and cervical cancer screening.

Family Planning Service is committed to reducing the rate of adolescent pregnancy in Onondaga County. FPS continues to operate two “teen-only” clinics per week at the Civic Center. In addition, teenagers can access family planning services during after school hours at the Slocum Avenue and North Syracuse sites. During 2007, FPS provided services to 1,727 unduplicated patients aged nineteen years or younger.

Male Services

Family Planning Service offers male clinic services at the Slocum Avenue clinic. This clinic is an after school/evening program serving both males and females, allowing partners to accompany each other and receive services at the same clinic. During 2007 a total of 139 males received reproductive health care. Outreach and education for young males is facilitated through Syracuse Model Neighborhood Facility, Inc.’s Male Responsibility (MR) program.

Health Education and Outreach

Family Planning Service provides information and education to numerous middle schools and high schools throughout Onondaga County. FPS delivers its public health message through a standardized curriculum, discussing appropriate decision-making practices and the long-term health effects of different behaviors. The curriculum is designed to increase knowledge, develop resiliency skills, and build upon student assets. FPS delivered health education and outreach at 12 community-based organizations and health related events throughout the year.

The “Ready or Not” campaign promotes abstinence as a first alternative to sexual activity. However, if someone is sexually active, the program encourages the individual to take advantage of low cost/no cost birth control options. To maximize the impact and utilization of family planning services, the “Ready or Not” campaign targets neighborhoods with known high rates of adolescent pregnancy.



Health Information Technologies

2007 Highlights

- *The Metropolitan Medical Response System videoconferencing network was completed. The system reduces the need for travel and facilitates streamlined communication and coordination of resources in emergencies. The network allows timely face-to-face communication, visual presentation and training between County and City administration, emergency partners, local hospital and other agencies. The federally funded system links 21 videoconferencing units at 12 physical locations.*
- *A thin client computing system during 2007. Designed with built in load balancing to maximize speed and minimize down time, the system permits user access from a choice of locations and may be used for emergency access.*
- *Through collaboration between Health IT and Correctional Health a pharmacy management system was installed. The system makes the most efficient and cost reducing use of our pharmacy supplier.*
- *Health IT managed the integration of a new computerized system to order laboratory tests for the Health Department. The system administers ordering, tracking and reporting and optimizes costs of laboratory tests much more efficiently than the previous paper system.*

Health Information Technology, in coordination with the Onondaga County Department of Information Technology, manages an electronic framework for the smooth exchange of Health Department information. Health IT is responsible for planning, procuring, implementing, managing, and supporting information systems for more than 400 active users in 9 divisions at 7 physical locations. In 2008, Health IT will begin work to implement electronic health records in the Health Department. As medical and other sensitive information continues to move from paper to electronic storage, Health IT will devise secure, efficient and cost-saving strategies for managing the ever-increasing volume of critical data.

Health Promotion & Disease Prevention

2007 Highlights

- ***Get Health Connected:*** In April 2007, the Onondaga County Partnership for Healthy Living, with the support of multiple community partners, planned, coordinated, and implemented an educational and clinical screening event entitled, “Get Health Connected”. This event provided medically uninsured individuals with health education on: diabetes, cholesterol, nutrition, and several chronic diseases. Medical screenings were offered for: hypertension, breast, cervical, and colorectal cancers, kidney disease, vision, and HIV/AIDS. Approximately 500 medically uninsured Onondaga County residents took part in this event. Due to the support generated and our initial success, the Partnership is planning on offering this event again in 2008.
- ***Lead Toy Recalls:*** In 2007, the Consumer Products Safety Commission issued over 100 recalls of children’s products due to unsafe levels of lead. In response to the overwhelming concern from the public and the media, the Lead program worked with a wide variety of community partners to disseminate information about the risk from lead in toys, appropriate methods of testing toys for lead and steps parents and guardians can take to help keep their children safe.
- ***1% Milk Campaign:*** The Eat Well Play Hard Grant coordinated and launched a “Got Low Fat Milk?” media campaign from June through September with local personalities. This campaign utilized billboards, paid media, earned media promotion, milk tastings, and an educational flyer distribution. Local research revealed that 1% milk sales increased during this time and whole milk sales decreased, fulfilling the main goal of this campaign.



Highlights, cont.

- ***Young Lungs at Play:*** All beaches and playgrounds in Onondaga County Parks became tobacco-free on May 3, 2007. All playgrounds, picnic, sporting and recreation areas in the Town of Marcellus Parks became tobacco-free on June 3, 2007. The Town of DeWitt Parks became tobacco-free on August 4, 2007.
 - ***CNY Colleges Take Action on Tobacco*** partnered with Onondaga Community College to implement a more restrictive tobacco policy that limits tobacco usage on campus to parking lots, in May 2007.
 - ***Tobacco Free Onondaga County*** promoted the New York State Smokers' Quitline (1-866-NY QUITTS) and its free nicotine replacement therapy tool kits in Onondaga County. In 2007, calls from Onondaga County residents increased by 82% to the Quitline.
-

Car Seat

The Onondaga County Car Seat program strives to increase community compliance with the New York State Child Passenger Safety Law. This law requires all children under the age of seven to be properly restrained in a federally approved car seat (or an appropriate child restraint system) when riding in a motor vehicle. The Governor's Traffic Safety Committee provides funding for the car seat distribution program.



The Health Department operates a car seat distribution program allowing parents and/or caregivers to purchase child restraint seats at low cost. Car seats are also available for short-term rentals of 30 days or less. The program is open to all parents and/or caregivers regardless of income.

Effective this year, the Governor's Traffic Safety grant requires that all participants in the car seat distribution program receive car seat education on how to properly install and use their seat inside their vehicle and on the importance of using child restraints. The Onondaga County Car Seat program operates a "fitting station" where demonstrations are given to parents and/or caregivers on how to properly install and use car seats. A certified Child Passenger Safety Technician provides demonstrations at no cost to the public. Car seat inspections are also offered and if the car seat does not meet proper safety standards, the Car Seat program is able to provide a new seat.

During 2007, the Onondaga County Car Seat program inspected 314 car seats and trained parents and/or caregivers on how to install them correctly. Of the 314 seats inspected, only 4 were installed correctly. Three key problems associated with improper installation were the seats were too loose, harness straps were too loose, or in the wrong location, and harness retainer clip placement was too low.

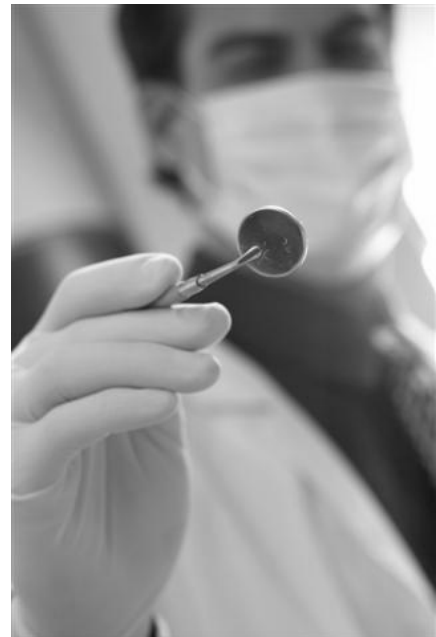
In 2007, the Car Seat program received a one-time shipment of 52 booster seats from the New York State Health Department. These seats were distributed to clients whose children met booster seat criteria. Booster seat recipients were also trained on how to properly use and install the seat. The Onondaga County Car Seat program distributed 273 child restraint seats and provided car seat training to all the participating parents/guardians this past year.

Dental Health

The Dental Health program offers dental health education and referral services to Onondaga County residents. This program targets pre-school aged children in the city of Syracuse and throughout Onondaga County. Parents are given written materials with dental health tips and recommendations about making early and regular oral exam appointments for children.

In 2007, the Dental Health program:

- Provided small group presentations at 55 sites including Syracuse City School District Pre-K programs, PEACE Head Start Programs, day care centers, nursery schools, after school programs, libraries, and community based agencies.
- Conducted 161 dental health presentations to 2,368 children, with literacy levels geared toward three, four, and five year old children. This program focused on oral health and how to properly care for teeth. Educational messages were evaluated throughout the presentations by asking children if they have had a dental visit and if they could identify healthy foods for teeth when playing the “Good Food, Bad Food for Teeth Game”. Responses were recorded and presentations modified based on evaluations results. The percentage of children conducting a hands-on tooth brushing activity was also recorded.
- Conducted 5 presentations to 106 adults at various parent groups about children’s oral health.



Eat Well Play Hard

The Eat Well Play Hard (EWPH) program strives to prevent childhood obesity and chronic disease through the promotion of changes within policy, system, and environmental strategies.

Three key program objectives are to increase:

- daily consumption of vegetables and fruits
- intake of low-fat and fat-free dairy products
- age-appropriate physical activity in children

During 2007, program staff implemented several successful interventions to support Eat Well Play Hard program objectives:

1. Increase daily consumption of vegetables and fruits

In partnership with the Rosamond Gifford Foundation's Farm Fresh Mobile Market Initiative, seven Farmers' Markets were planned and coordinated at Women, Infants and Children (WIC) clinic sites. The goal of these markets was to increase the redemption of WIC farmers' market coupons thus increasing the intake of vegetables and fruits among WIC recipients. In total, \$2,562 coupons were redeemed at the WIC farmers' markets as compared to \$488 in coupons in 2006. In addition \$766 of produce was purchased with cash and food stamps at the 2007 markets.



2. Increase intake of low-fat and fat-free dairy products

EWPH planned, developed, and launched a countywide "Got Low Fat Milk?" campaign from May through September 2007. The goal of this campaign was to increase the consumption of low-fat or fat-free dairy products among individuals two years of age and older. According to the Information Resource Incorporated during the time period of the campaign 1% milk sales increased in Onondaga County by 2.4% in June, 2.5 % in July, 2.2% in August, and 2.1% in October.

3. Increase age-appropriate physical activity

EWPH partnered with the Onondaga County Parks Department and the Syracuse City Parks Department to institute the third annual free summer physical activity program entitled, "Get Moving CNY!" The goal of this program was to encourage increased physical activity among Onondaga County residents of all ages.

Participants completed 30 minutes of physical activity

for 30 days and logged their exercise. Participants who completed this task were rewarded with gift cards for produce and a 30-day gym membership. In total 1,013 Onondaga County residents completed the “Get Moving CNY!” program. This represented an increase of 901 people over the 2006 campaign.

Influenza and Pneumonia Vaccination

The Onondaga County Health Department strives to prevent illness and reduce hospitalizations and deaths due to influenza and pneumococcal disease by making vaccinations available and accessible to all county residents. The influenza vaccine was readily available in the community this season. Many doctors and providers were able to vaccinate as early as September.

All persons are susceptible to infection with influenza. Three populations, however, are especially vulnerable to serious complications which can lead to hospitalization or death: children under age two, persons with chronic respiratory problems, and seniors ages 65 and older. In an effort to prevent the transmission of influenza to these vulnerable populations, the Health Department placed a special emphasis this year on encouraging all persons who come in contact with these populations to get a flu shot.

The Health Department offered flu immunizations to children at 5 of its 16 mass immunization clinics. The Health Department placed special emphasis this year on encouraging parents to vaccinate their children against flu for the protection of the child and the community. This year, children could receive either inactivated influenza vaccine or Flu Mist[®], a live but weakened vaccine administered through a nasal spray. The Health Department vaccinated 234 children against influenza, of whom 97 received Flu Mist[®].



Vaccination Season

This season, the Health Department, in partnership with Visiting Nurse Association and Maxim Healthcare Systems, conducted 16 clinics at 16 different locations in Onondaga County. Five clinics offered vaccination of persons ages 18 and younger. Clinics were held between October 23 and November 21. After November 21, individuals seeking a flu shot from the Health Department could arrange to receive one at the William Harris Clinic on Slocum Avenue.

Staffing

Twenty-three (23) volunteer nurses and thirty (30) clerical volunteers joined with 14 staff nurses and 48 public health personnel to participate in the operation of one or more of the Health Department's scheduled flu and pneumonia vaccination clinics.

Distribution of Vaccine

<i>Distribution and Administration of Influenza Vaccine</i>	<i># of Doses</i>
Doses administered to adults at Health Department partnership clinics.	4,515
Doses administered to children at Health Department partnership clinics.	234
Total Doses Administered	4,749

Lead Poisoning Control

The mission of the Lead Poisoning Control Program (LPCP) is to reduce the prevalence of elevated blood lead levels (defined by the Centers for Disease Control and Prevention (CDC) as $\geq 10 \mu\text{g/dL}$) in children younger than six years of age. The Lead Program achieves its mission by conducting surveillance, screening, case management, environmental investigations, health education, and outreach.

This year, the Lead Program continued its efforts to identify and provide case management for children with lead poisoning. In 2007, 11,958 children in Onondaga County were tested for lead poisoning and 374 children (3.1%) were found to have elevated blood lead levels. This prevalence rate is unchanged from 2006. In addition, rates of lead poisoning in several zip codes in Syracuse continue to rank among the highest in New York State.

In 2007, the Consumer Products Safety Commission issued over 100 recalls of children's products due to unsafe levels of lead. In response to the overwhelming concern from public and media, the Lead Program worked with a wide variety of community partners to provide appropriate information about the risk from lead in toys, appropriate methods of testing toys for lead, and steps parents and guardians can take to help keep their children safe from lead poisoning.

Door-to-door outreach is always a critical component of the Lead Program's efforts to identify children affected by lead poisoning in high-risk areas of the city of Syracuse.

During the summer of 2007, the Lead Program visited 5,330 dwellings. Of the 2,186 dwellings where someone was home, one-on-one education was provided to 445 families with children under age six. A total of 224 children received lead testing at summer fixed-site clinics and on the “lead bus.” Elevated blood lead levels were detected in 32% of the 159 children tested on the “lead bus.” This rate is more than ten times the countywide rate, illustrating the importance of targeting specific areas of the city.

In 2007 program staff increased efforts to improve lead testing rates of children at age two. (NYS requires physicians to test children for lead poisoning at age one and at age two). Between April and August 2007, the Lead Program sent letters to parents of 3,175 children who were due for their two-year-old blood lead test. Fifty-one percent of these children received a lead test prior to 9/15/2007 and 2.7 % of those tested were found to have an elevated blood lead level. Statistical analysis of the results confirmed the effectiveness of the intervention. An increase of 16.6 % in the number of two year-old children tested between April and August 2007 was seen as compared with the same timeframe in 2006.

The Lead Program’s Environmental Health inspectors conducted 261 inspections in 2007. This figure includes inspections of primary and secondary properties of children with elevated blood lead levels as well as inspections at repeat properties, multi-unit dwellings, and potential foster care homes. Of the properties inspected, 189 had lead hazards. Overall in 2007, lead hazard reduction was completed on 143 properties. Administrative hearings continue to be a driving force in getting property owners to comply with Lead Program requirements.

The Lead Program continued to subcontract with the Onondaga County Community Development Lead Hazard Reduction Program and the City of Syracuse Lead Program in 2007. Under this arrangement community outreach, testing, and health education are conducted and families living in properties undergoing lead hazard reduction are relocated.



The Lead Program received funding for two new initiatives in 2008, both aim at increasing primary prevention efforts in areas of Syracuse where children are at the highest risk for lead poisoning. A grant through the US Environmental Protection Agency will provide outreach and supplies to reduce lead dust in the homes of young children in the 13204 and 13205 zip codes. Another grant through the New York State Department of Health will provide additional funding for environmental lead inspections in order to identify and correct lead hazards in homes prior to a child becoming lead poisoned.

This prevention of lead poisoning before it occurs is key to meeting the CDC goal of eliminating childhood lead poisoning by 2010.

Migrant Health

The goal of the Migrant Health program is to promote the health of the migrant farm worker population and to protect the health of the community. Program components include: health education, outreach, in-camp health services, advocacy, and referral. Program staff collaborate with SUNY Upstate Medical University and other community organizations to provide in-camp health care and health education services.

To initiate the year's activities, SUNY Upstate faculty and medical students, working through the Salt City Hope Clinic, teamed with Health Department nursing and outreach staff to hold the first clinic of the season on June 20, 2007. During the summer and fall, the Migrant Health program conducted 9 medical clinics and 3 nursing visits at 6 different farms in Onondaga County. 115 farm workers received on-site health care services through these activities.

The Migrant Health program continued to coordinate with Oswego County Opportunities, Syracuse Community Health Center and other local health care providers for off-site health care, enabling farm workers to receive medical, dental, and specialty services at little or no cost. Bilingual outreach workers from the Health Department provided migrant workers with ongoing health education, advocacy, referral, transportation, and interpretation services for follow-up medical, dental and community service appointments.

During 2007, Health Department nurses and volunteers, in collaboration with the NYSDOH Immunization program, provided migrant workers with immunizations during in-camp visits. The Migrant Health program also partnered with the Central New York Council on Occupational Safety and Health to conduct in-camp group education on ergonomics.



The Migrant Health program will continue working with migrant farm workers, growers, medical facilities, and community agencies to address the needs of the county's migrant community.

School-Based Childhood Obesity Initiative

In January 2005, the Onondaga County Health Department received a five-year grant from the New York State Department of Health (DOH) aimed at reducing the incidence of childhood obesity. This grant initiative serves an eight-county region including: Cayuga, Cortland, Herkimer, Madison, Oneida, Onondaga, Oswego, and Tompkins counties. The primary objective of the grant is to promote physical activity and proper nutrition through policy and environmental changes at local elementary schools as well as junior and senior high schools. This is in part achieved by the requirement that all schools receiving federal funding for their school lunch programs develop a wellness policy as part of the Federal Child Nutrition and WIC Reauthorization Act of 2004. The objective of creating a wellness policy is to increase the number of school districts that have policies and environments that will increase age-appropriate daily physical activity, promote healthy eating, and coordinate school health. Schools with existing wellness polices receive support to enhance their policies and environment.



During 2007, the School-Based Childhood Obesity Initiative provided guidance and support to school districts throughout the eight-county Central New Region through the following activities:

- Coordinated and implemented a series of three workshops for school food service directors and wellness team personnel. This workshop offered tips on how to develop action plans and implement wellness policies. The school districts were given nutrition policies adopted by other districts nationwide; age-appropriate fact sheets; teaching tools and recipe suggestions for use in classrooms; and ideas on how to get support from students and parents on these policies. The workshops were attended by a total of 58 school personnel representing 20 school districts within the 8 county region.
- Facilitated School Health Index training for 6 school districts throughout the region. The School Health Index is an assessment tool that helps schools identify how they can enhance their school health environments.
- Awarded Sunkist Fruit and Vegetable Sectionizers, a tool used to prepare fresh fruits and vegetables efficiently, to 7 school districts.
- Developed and distributed resource binders for school nurses, parents, and wellness team members entitled “Nutrition and Wellness Promotion” and “Recipes for Wellness”. These binders provide lesson plans on nutrition and physical activity as well as health education materials to help convey healthy messages throughout the school. The recipe binder included healthy recipes for students. Each recipe was student-tested and approved.

Partnership for Healthy Living

The Onondaga County Partnership for Healthy Living is an initiative providing low cost or no cost medical screening for breast, cervical, and colorectal cancer to medically uninsured women and men. Key program activities include: conducting health education, outreach, inreach, and networking with community partners to increase referrals. The Partnership is pleased to announce that it has entered its 20th year of service to Onondaga County residents. In 2007, the Partnership diagnosed 5 breast cancers, 4 cervical cancers, and 1 colorectal cancer.

A new objective for 2007 was to increase the number of health care providers contracted to provide services for Partnership patrons. These medical personnel provide breast and cervical screening services which are then reimbursed through the Partnership. This approach offers patients the ability to receive screening services at their medical home without a fee for service attached. In 2007, 7 additional medical providers became Partnership providers.

In April 2007, the Partnership, with support from multiple community partners, planned, coordinated, and implemented an education and clinical screening event entitled, “Get Health Screened”. This event provided health education for medically uninsured individuals



on: diabetes, cholesterol, nutrition, and several other chronic diseases. Medical screenings were offered for: hypertension, kidney disease, vision, HIV/AIDS, and breast, cervical, and colorectal cancers. In total, 500 medically uninsured Onondaga County residents took part in this event.

In 2007, the Partnership was selected by the New York State Department of Health, to become a pilot county testing a new colorectal cancer screening kit for individuals without

health insurance. The FIT kit is considered a preferred screening test for colorectal cancer because it is easy to use, has fewer medication restrictions, and fewer dietary limitations thereby increasing patient compliance. During the year:

- 1,809 individuals received colorectal education
- 132 individuals were screened for colorectal cancer using the FIT kit
- 7 patients had follow up testing due to abnormal FIT kit screening
- 44 patients had a colonoscopy due to being at greater risk for colorectal cancer
- 14 patients were diagnosed with polyps and had them removed.
11 were considered precancerous

The Partnership provides education and screening for breast and cervical cancer for women. Case management is also available to further enhance these screening services by removing some of the barriers to care. The following numbers of women were served during 2007:

- 1,787 received women's health education
- 1,162 obtained a clinical breast exam
- 1,426 received a clinical breast exam and mammogram
- 462 required follow up breast screening
- 491 obtained a screening for cervical cancer
- 139 needed additional cervical screening follow up
- 1,215 obtained a complete screening exam
- 34 received case management services

Public Health Education

The Public Health Education team works cooperatively with a variety of Health Department initiatives to increase the public's awareness about local health issues, programs, and events. The Public Health Education team planned and implemented many activities aimed at enhancing the health of all Onondaga County residents. In 2007, these activities included: conducting outreach events to highlight program services, working with local media to address emerging diseases, posting website alerts, designing health education materials for targeted populations (using low literacy language), promoting Health Department programs, and by networking with area businesses, faith-based agencies, and community based organizations.

The Public Health Education team played a vital in the following:

- New York State Health Commissioner, Dr. Richard Daines visited Onondaga County to observe select Health Department programs. Dr. Daines proved to be a very "hands on" Commissioner, as he attempted to locate and identify mosquitoes at the Cicero Swamp, visited the Women, Infant, and Children's program (WIC) to see first hand the benefits received by the WIC recipients and participated in a milk tasting demonstration to see if he could taste the difference between whole milk and low fat milk.
- During the flu season, PHE used media promotion to inform the public about Health Department sponsored flu shot clinics as well as extra Tdap clinics for children entering sixth grade. The flu shot clinics were held in cooperation with Maxim Health Care Systems and the Visiting Nurse Association. Promotion was used to inform county residents that the flu vaccine was in ample supply, to announce the Health Department was offering Flu Mist® for children, and to explain how to schedule an appointment online.



This year the Health Department launched a flu shot media campaign with 20 local well-known television and radio personalities. Media participants were interviewed and then received their flu shots on air. In total 1,230 flu shots were administered at the Health Department flu shot clinics in 2007.

- The Public Health Education team continued efforts to make communication between the Health Department and the public more effective. Staff worked to make all communication follow “plain language” guidelines set by the Center for Disease Control, including print materials, media promotions, and electronic communication such as the Health Department website. Staff also used social marketing techniques to maximize effectiveness in education and promotion efforts.



SHAPE Program

The SHERiff’s Accessible Parking Enforcement (SHAPE) program delivers education and enforcement about the reserved/accessible parking and fire lane law ordinances to residents of Onondaga County. Since 2004, the Onondaga County Health Department (OCHD) has partnered with the Onondaga County Sheriff’s Office to provide a Public Health Educator to coordinate the SHAPE program. The SHAPE program provides ticketing enforcement for accessible parking and fire lane laws through volunteer Special Deputies.

In September 2007, 21 new volunteers were trained as SHAPE Special Deputies. Currently, there are 39 active volunteers in the program. The new volunteers significantly increased the enforcement effort of proper reserved/accessible and fire lane parking. SHAPE Special Deputies distributed 1,161 accessible/handicapped tickets during 2007.

In 2007, various educational activities took place: the SHAPE program Public Health Educator provided education about accessible parking issues at community events, news articles were distributed to local media and informed area businesses about parking regulations, and a mailing campaign was delivered to the Onondaga County Department of Motor Vehicles, town/village clerk offices, and all branches of the Onondaga County Public Library to distribute brochures about the handicapped parking laws.

Tobacco-Free Onondaga County

Tobacco-Free Onondaga County (TFOC) is a partnership of local organizations and individuals committed to creating a tobacco-free Onondaga County. Tobacco-Free Onondaga County's primary goals are to: eliminate exposure to secondhand smoke; decrease the social acceptability of tobacco use; promote cessation from tobacco use; prevent youth and young adults from taking up tobacco use; collect local data on tobacco use; and assist in the development of policy initiatives to support prevention efforts.

2007 TFOC activities:

- 56 organizations and 6 community festivals signed policies refusing tobacco company advertising, sponsorship, and promotion as a result of the **“No Thanks, Big Tobacco”** campaign.
- 44 convenience and grocery stores signed written policies to remove or reduce their tobacco advertising.
- All beaches and playgrounds in the Onondaga County Parks system became tobacco-free on May 3, 2007 as part of the **“Young Lungs at Play”** campaign. All playground, picnic, sporting, and recreation areas in the Town of Marcellus Parks became tobacco-free on June 3, 2007. The Town of DeWitt Parks became tobacco-free on August 4, 2007.
- Onondaga County residents' calls to the New York State Smokers' Quitline (1-866-NY QUITTS) increased by approximately 82% after promotion of its free nicotine replacement therapy tool kits.
- Through television, billboard, radio, and direct mailings, the messages of Tobacco-Free Onondaga County reached thousands of county residents.



CNY Colleges Take Action on Tobacco

CNY Colleges Take Action on Tobacco is a project funded by the New York State Department of Health to strengthen anti-tobacco related policies and reduce tobacco usage at five local colleges. Staff works closely with students and employees on tobacco education, cessation,

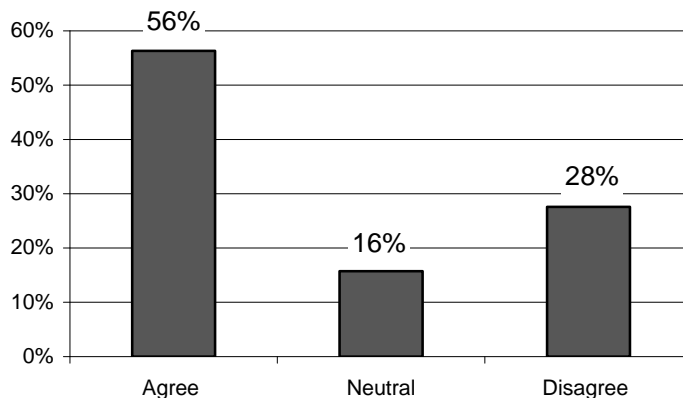


and campus policy development at each campus. This project impacts over 15,000 students and 2,700 employees at the following Onondaga County campuses:

- Bryant and Stratton Colleges (Downtown Syracuse and Liverpool campuses)
- Onondaga Community College
- Le Moyne College
- State University of New York – College of Environmental Science & Forestry (SUNY-ESF)

On May 14, 2007, Onondaga Community College implemented a more restrictive tobacco policy limiting tobacco usage to parking lots only. During Spring 2007, program staff conducted an online survey. There were 2,495 students and 666 employees who responded from the five campuses measuring tobacco-related attitudes and behaviors. Over 50% would support a tobacco-free policy on their campus (please see data below).

I would support a tobacco-free policy on campus.



Traffic Safety

The Health Department's Traffic Safety program conducts education and promotion of traffic safety events in Onondaga County. The New York State Governor's Traffic Safety Committee finances the program through funds allocated by the National Highway Traffic Safety Administration.

During 2007, program staff made 98 presentations to 2,739 individuals on numerous traffic safety topics including: safety belt use, child passenger safety, bicycle safety and helmet use, pedestrian safety, and defensive driving. In addition, the Traffic Safety Program distributed and fit 1,447 low-cost helmets at 11 satellite locations and community distribution events.



In June 2007, program staff participated in the opening day of "Parkway Sunday," a summer event at Onondaga Lake Parkway. The Parkway is closed to motor vehicles on Sundays to provide joggers, walkers, and bicyclists with car-free recreation and exercise opportunities. During Parkway Sunday, Traffic Safety staff checked bicycle helmets for correct fit and size and conducted an observational survey on bicycle helmet use. The survey found 97.5% of bicyclists less than 18 years of age used a helmet while only 44% of adult bicyclists wore helmets. During the year, the Traffic Safety Program also promoted national, state and local observances, such as Child Passenger Safety Week, Bicycle Safety Month, Walk Your Child to School, and Pedestrian Safety Week.

The Traffic Safety Program and the Greater Syracuse SAFE KIDS Coalition, (a member of SAFE KIDS Worldwide), coordinated selected traffic safety activities. SAFE KIDS Coalition members assisted Traffic Safety staff with 6 car seat check events and 2 major helmet give-away events in 2007. The first helmet event took place at a Chiefs home game at the Alliance Bank Stadium during SAFE KIDS week (April 29-May 5, 2007). Coalition members distributed and fit 200 helmets and shared a variety of safety and health messages with the community. At a second event in December 2007, Coalition members participated in a community-wide holiday bicycle giveaway, providing helmet-use education, and distributed over 300 helmets donated by Fayetteville Dodge.



Each year, the Traffic Safety Program and Greater Syracuse SAFE KIDS Coalition work together to conduct a 4-day training program for nationally certified Child Passenger

Safety Technicians. In addition, both organizations sponsor a 1-day update workshop for currently certified technicians. During 2007, Traffic Safety staff and Coalition members certified 14 new technicians and provided renewal training for 55 technicians. Onondaga County registered a 92% seat belt use rate for 2007, the same percentage as last year.

Through its Car Seat Program, the Health Department operates a fitting station where parents/caregivers can receive education on installing car seats and have their car seats checked, free of charge, by a certified Child Passenger Safety Technician. In total, 14 fitting stations are currently available in the county. The car seat misuse rate for 2007 was 92%.

Maternal and Child Health

2007 Highlights

The Division of Maternal and Child Health (MCH) was formed in January 2007; bringing together the Bureau of Community Health Nursing, the Bureau of Special Children Services, Immunization Action Plan, Syracuse Healthy Start, and the Women's Infants and Children (WIC) Program. This merger allows the Division of Maternal and Child Health to provide services to new moms, babies, and families in Onondaga County under a unified system.

- *As part of the merger, MCH bureau/departmental programs were evaluated and assessed. Refocused collaborative initiatives were implemented to improve client provision of service, eliminate duplicative staff efforts, and promote fiscal savings.*



- *The Division established a partnership with Success By Six and Child Care Solutions for a training initiative based on the Brazelton Touchpoints[®] approach. The Touchpoints[®] approach was created by Dr. T. Berry Brazelton, an internationally renowned pediatrician. This collaborative effort was awarded a \$65,000 grant by the CNY Community Foundation to provide community level training in Onondaga County. The training for home visiting professionals and paraprofessionals, focuses on improving communication with families so they can better understand child development and optimize relationships. Eight staff members have been trained at the Brazelton Touchpoints Institute in Boston. Those who attended the Boston training will in turn train all staff from the Division of MCH, Early Intervention Providers and some community childcare staff throughout 2008 and 2009.*
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- *The Division of MCH worked with the Medical Examiner's Office (MEO) to develop messages about the importance of "safe sleep" environments. The MEO reviewed data on infant deaths over the last five years and determined that every year, 50-70% of infant deaths investigated by the MEO were associated with an unsafe sleeping environment. Upon learning of this data, Syracuse Healthy Start and the Division of Maternal and Child Health joined with community partners to educate families about the importance of providing safe sleep environments for babies. Actions taken included: radio ads featuring a safe sleep message during October, which is safe sleep month; distribution of onesies, donated by United Healthcare, with a safe sleep message, to all three birthing hospitals in Onondaga County; distribution of informational packets and posters for waiting rooms of obstetrical providers in the community; distribution of brochures and flyers to all families with infants, by outreach staff from WIC, Community Health Nursing, Early Intervention and Syracuse Healthy Start; and promotion of press conference featuring the Commissioner of Health and the Chief Medical Examiner.*
 - *In 2007, Syracuse Healthy Start (SHS) reported nearly 36% of pregnant women enrolled in SHS smoked at some point during their pregnancy. While many women would stop or attempt to decrease the number of cigarettes smoked while pregnant; the majority resumed smoking once their baby was born. In an effort to help women quit smoking, Syracuse Healthy Start formed a research team in partnership with the Department of Psychology at Syracuse University. The team, lead by Monica Webb, PhD, will conduct several focus groups to learn more about the smoking habits of SHS participants. These focus groups will be used to develop smoking intervention targeted for pregnant and parenting women. Home visitors throughout the Division of Maternal and Child Health will be trained on the new smoking intervention. Training and data collection will begin in 2008.*
 - *In 2007, a new initiative, the Nurse-Family Partnership (NFP) program, was implemented. NFP is a collaborative venture between the Onondaga County Departments of Health, Mental Health, and Social Services. The NFP is one of over 270 such programs operating across the United States and is based upon the Nurse Home Visitation program developed by Dr. David Olds. Staff provide an intensive, evidence-based, nurse home visitation to low income, young, first time moms throughout Onondaga County. Under the NFP, Community Health Nurses provide frequent, structured home visits to low income, first time pregnant women, from early in pregnancy through the baby's second birthday. Community Health Nurses receive extensive, ongoing training with supervisory support and follow very specific curricula, protocols, and guidelines for each visit.*
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Community Health Nursing

The Bureau of Community Health Nursing (CHN) operates a preventive nurse home visitation program under the New York State Department of Health (NYSDOH) Licensed Home Care Service Agency (LHCSA). The Bureau focuses on reaching pregnant women whose pregnancy outcomes are identified as being at-risk for infant mortality, low birth weight, or developmental delays or disabilities. Preventive maternal/child nursing visits are also made to incarcerated women and their infants, to children with elevated lead levels, and to families whom have experienced a sudden infant demise.

In 2007, the Bureau of CHN received a total of 3,321 referrals for all its preventive nursing services and provided 1,718 clients with 6,052 home visits. Under the various home visitation programs, clients received health assessments, case management, health teaching, as well as referrals to community resources such as drug, alcohol, and/or mental health counseling.

The Bureau of Community Health Nursing (CHN) comprises several programs that target the complex needs of at-risk prenatal, postpartum and newborn/infant clients throughout Onondaga County. These programs include both home visitation and clinical services.

Nurse-Family Partnership

Four Community Health Nurses, along with their Nursing Supervisor, and a clerical person make up the OCHD Nurse-Family Partnership (NFP) program. The NFP nursing team attended the first two phases of mandatory training in Denver, CO in April 2007 and again in October 2007. The OCHD NFP program began enrolling first-time moms on May 1, 2007. In 2007, NFP enrolled 69 clients. NFP has a target goal of serving 100 moms in its initial phase.



Family Life Team

The Family Life Team (FLT) program is a collaborative effort between the OCHD Bureau of Community Health Nursing, the Syracuse City School District (SCSD), and the Salvation Army which provides preventive nursing and case management services to any identified pregnant and parenting student in the SCSD schools. In the 2006-2007 school year, 116 out of 133 (87%) of all identified pregnant students were provided with ongoing nursing and/or case management services. In 2006-2007, FLT nurses were also available to assist any at-risk student with education and referrals for community services including pregnancy prevention resources and STD prevention and treatment services.

Early Intervention C.A.R.E.S.

The Early Intervention CARES (Children At-risk Early Screening) program is part of a statewide Early Intervention Child Find program that identifies children, birth through two years, who are at risk for developmental delays. Community Health Nurses provide home visits for health assessments, teaching, and referrals for community resources for infants who are at-risk of developmental delays. Children may be referred to Early Intervention if a delay is suspected. In 2007, there were 400 cases referred for EI CARES nurse home visits.

Enhanced Perinatal and Pediatric Care

Enhanced Perinatal and Pediatric Care (EPPC) is a grant program funded by the Onondaga County Department of Social Services. The overall objective of the program is to enhance the provision of prenatal, postpartum and pediatric care for pregnant and parenting families whose income falls below 200% of the federal poverty level. In 2007, the EPPC staff served 522 unduplicated clients and provided interventions via home visits, telephone contacts, referrals, case coordination and management.

Prenatal Care Assistance

The Prenatal Care Assistance Program (PCAP) staff provides low-income women, without insurance and without primary obstetrical care, a centralized entry point for complete



pregnancy care and health supportive services. Women must be income eligible (with income below 200% of the federal poverty level). PCAP offers routine pregnancy check ups, hospital care during pregnancy and delivery, full health care for woman until at least two months after delivery and full health care coverage for the baby up to one year of age. PCAP provides women assistance in obtaining Medicaid, WIC, testing for HIV, education about nutrition, labor, delivery, breastfeeding, and contraceptive and

reproductive care. PCAP offers two weekly clinics, one in the city of Syracuse and one in North Syracuse. In 2007, 478 women were evaluated and 411 were enrolled in the OCHD PCAP.

The total number of OCHD contractual providers for PCAP was expanded thus increasing client obstetrician/midwife and delivery options.

Medicaid Managed Care

In 2007, the Medicaid Managed Care Office maintained its status as the central intake point for referrals for both the Bureau of Community Health Nursing and Syracuse Healthy Start. In 2007, 3,828 referrals for Syracuse Healthy Start, Community Health Nursing, Community Health Worker Program, Social Work, and Nutritionist were processed. Of these 3,828 referrals, 1,122 (29%) were clients enrolled in one of the three contractual Medicaid Managed Care plans (United Healthcare, Fidelis, and Total Care) with 1,744 number of billable events. A fourth contract with Blue Choice was signed in November 2007.

Immunization Action Plan

The three primary goals of the Immunization Action Plan are to ensure that children are up-to-date with all recommended immunizations, to educate adults about the importance of flu and other adult immunizations, and to oversee the Central New York Immunization Registry throughout the 14-county Central New York region. The Immunization Action Plan conducted the following activities in 2007 in keeping with program goals:



- Distributed back-to-school immunization education kits to 200 Onondaga County school nurses. The kits provided nurses with current immunization recommendations and tools to educate parents and promote immunization within schools.
- In 2007, extensive promotion of the new Tdap requirement for 6th grade entrance occurred. In addition, Tdap clinics were held throughout the county to help parents meet this new requirement.
- Promoted National Infant Immunization Week using multiple media outlets. Messages encouraged parents to make sure their children were up-to-date on their immunizations.
- Conducted A “Get the Dirt On Tetanus” education campaign in the spring. The campaign objective was to encourage adults to receive their tetanus booster shot before working outside during the summer months.
- Conducted outreach and promotion of flu and pneumonia shots at Health Department vaccine clinics. During 2007, outreach and education efforts focused on a number of groups, including seniors, parents, and health care providers. Extensive outreach was done with each of our flu clinic sites to promote the vaccine to the populations they serve. Also, a “Vaccinate Your Staff” campaign was conducted to encourage health care providers to receive their flu shot.

In support of the Immunization Action Plan, the Onondaga County Health Department holds a weekly immunization clinic at the Dr. William A. Harris Clinic on Slocum Avenue in Syracuse. In 2007, the clinic provided shots for 1,549 children and adults. Most of the individuals receiving shots were underinsured and/or without a source of medical care, making it difficult for them to receive immunizations elsewhere.

This year included many exciting changes for the Central New York Immunization Registry. After several years of planning, New York State began implementation of a new statewide web-based registry system. This new system will incorporate many of the features and advancements made by the CNY Registry community. The transition from our regional system to this new state system will be facilitated by the legislation effective January 1, 2008, requiring health care providers to report all immunizations administered to persons younger than 19 years old. The Central New York Immunization Registry team has been working with the New York State Department of Health to transition all data from the existing registry database, HealthyShot, into the statewide registry. Education, training classes, webinars, newsletters, and user meetings have been offered to educate providers on the upcoming changes to the Registry. This new web-based Registry and reporting requirement for all providers will speed our progress toward the Healthy People 2010 goal of enrolling 95% of children, age birth to 6 years, in an immunization registry.

Special Children Services

The Bureau of Special Children Services includes the Children with Special Health Care Needs, Early Intervention, and Preschool Special Education programs. The Bureau works closely with the local community to ensure high quality delivery of services to children with special needs. In 2007, the Bureau:

- Prepared and distributed two publications: *Resource Directory for Young Children with Hearing Impairments* and *Autistic Spectrum Disorders: Children Under Age 5*. Both publications, targeted to parents and providers, contain relevant information related to diagnosis, services, and community resources about hearing impairments and autism respectively in Onondaga County. Both documents are available in print or on the Health Department website.
- Completed the second year of the Onondaga County Autism Mapping Project. The goal of this project is to identify educational and capacity needs to inform local school districts and improve future countywide planning efforts. Information was collected through 6/30/2007 on children under age 5 who have been clinically diagnosed with Autism



Spectrum Disorders (ASD). 166 children under the age of five in Onondaga County who are enrolled in the Early Intervention and Preschool Programs and have a diagnosis on the Autism Spectrum were identified.

Children With Special Health Care Needs

The Children with Special Health Care Needs (CSHCN) program assists families of children (birth to age 21) with special health care needs obtain necessary health services and community resources, including specialty care providers, related health care services, and health insurance. CSHCN provides access to the Physically Handicapped Children's Program (PHCP), which funds authorized medical and orthodontic services not covered by insurance. Diagnostic and financial requirements must be met for PHCP eligibility.

The Bureau is continuing its partnership with Exceptional Family Resources (EFR), a private non-profit community agency. This alliance serves to broaden outreach efforts to families of children ages 3 to 21. In 2007, the partnership with EFR provided information and referral services to over 160 families. In addition, the following were done:

- Quarterly newsletters on topics of interest to families of CSHCN
- Distribution of the Parent Notebook, developed by the CSHCN project coordinator and fourth year medical students
- School nurse workshop: overview of CSHCN program, as well as other Health Department programs related to school nursing, such as flu, immunization, and teen pregnancy

Early Intervention Program

The Early Intervention Program is a Federally and State mandated program that provides therapeutic and educational services for children, birth through age two, who have a developmental delay or who have a diagnosed condition with a high probability for developmental delay.

A new database for the Early Intervention Program is currently under development by the New York State Department of Health (NYSDOH). Onondaga County has been participating in a County workgroup assisting NYSDOH in developing the New York Early Intervention System (NYEIS) data system and will be a pilot county for the system in fall of 2008.



Preschool Special Education Program

The Preschool Special Education Program provides mandated evaluation, educational, therapeutic, and transportation services for three- and four-year-old children with special needs. Services are authorized by 22 local school district Committees on Preschool Special Education (CPSE). Staff members from the Preschool Special Education Program serve as County representatives to CPSE and provide technical assistance to families and CPSE chairpersons.

Bureau Statistics

Early Intervention

- EI Referrals: 1,251
- EI enrolled at year-end: 831
- EI receiving services at year-end: 698

Preschool

- Children enrolled in June 2007 (end of 2006-2007 school year): 1,607
- Enrolled in 2007 summer session: 1,242
- Enrolled at year-end: 1,364

Syracuse Healthy Start

The Syracuse Healthy Start (SHS), a federally funded program, began in 1997. SHS facilitates the provision of maternal and child health services to residents of the city of Syracuse. The program promotes healthy pregnancies and healthy babies through community partnerships, community referrals, health education, case management, and home visiting. SHS focuses on the elimination of health disparities in the community, working towards reduction of infant mortality and negative birth outcomes such as low birth weight. Specific functions of the program include intensive case management, one-on-one and community education, home visiting for pregnant and post partum women, and referrals to other OCHD resources.



Breastfeeding

In 2007, Syracuse Healthy Start launched a breastfeeding project to increase program participant breastfeeding rates. Currently, the program is working with students from LeMoyne College and SUNY Upstate Medical University. The LeMoyne College project uses a questionnaire asking SHS families about their thoughts and attitudes with respect to breastfeeding. Following the completion of each questionnaire, a brochure is provided that explains the benefits of breastfeeding. SUNY medical students interviewed medical professionals about the obstacles and challenges of increasing breastfeeding numbers in the city of Syracuse.

Interconceptional Care

The interconceptional period is the time between pregnancies. For women who are planning to have more children, interconceptional care involves encouragement and education about good health habits. SHS and community partners introduce interconceptional care during the 6-week postpartum check and family planning visits. In an effort to increase public awareness of the importance of interconceptional care, SHS and several community partners developed two documents:

- The *Pre-Pregnancy Checklist*: Created to assist women identify probable risks, both medical and environmental, that could cause a negative birth outcome if not addressed. Women are encouraged to complete the checklist and share it with their medical providers before becoming pregnant.
- SHS and Family Planning created a brochure that specifically defines good interconceptional care. The brochure stresses the importance of attending regular medical check-ups, maintaining good nutrition, and avoiding the dangers of alcohol, drugs, and tobacco.



Anniversary Celebration

Syracuse Healthy Start celebrated its 10th Anniversary with a community-wide breakfast at the Rosamond Gifford Zoo. Over 100 people gathered at the zoo to celebrate ten years of Syracuse Healthy Start. The Commissioner of Health emphasized that infant mortality rates have improved during the last 10 years, but more work needs to be done. Chauncey Brown was introduced as the new Chairperson of the Syracuse Healthy Start Executive Council. After the 2-hour program, Syracuse Healthy Start families enjoyed a beautiful day at the zoo.

Media Campaign

Syracuse Healthy Start (SHS) conducted a media campaign from June through October 2007. This campaign highlighted SHS services and provided important information regarding safe sleep for infants, breastfeeding, fatherhood, and not using alcohol, drugs, or tobacco during pregnancy. Billboards and advertisements in Centro buses were seen throughout the city of Syracuse. Messages were rotated monthly.

Access to Prenatal Care

During the summer of 2007, SHS released a report on access to prenatal care entitled *Prenatal Care: Provider Perspectives*. The Center for Maternal and Child Health at Upstate Medical University evaluation team conducted qualitative interviews with the five most frequently used facilities for prenatal care in Syracuse. The report identified systemic barriers to early

and ongoing prenatal care for low-income urban women. The report included a list of recommendations which were shared with area prenatal clinics.

Community Health Worker Program (CHWP)

The CHWP is part of the Division of Maternal and Child Health. Program staff provide outreach, case management and advocacy to pregnant and parenting families in Onondaga County. Community Health Workers (CHWs) target families who are at highest risk for having a baby with poor birth outcomes. CHWs assist with access to needed medical and social services while offering education and referrals to help families have healthy babies and raise healthy children. CHWP is a NYSDOH grant-funded program, administered by OCHD via a subcontract with The Salvation Army. In 2007, the CHWP received 450 referrals and accomplished 1,249 home visits.



Women, Infants and Children (WIC)

The Special Supplemental Nutrition program for Women, Infants and Children (WIC) is a federally funded program sponsored locally by the Onondaga County Health Department. WIC program participants receive nutrition education, supplemental foods and referrals for health care services.

The WIC program continues to focus on community outreach and strengthening community partnerships. In 2007 the WIC program staff:

- Partnered with Catholic Charities to enroll and serve the increasing number of Somalian and Burmese refugee populations in Onondaga County.
- Worked in collaboration with the OCHD Eat Well Play Hard grant to host weekly Farmers' Markets at the West Onondaga Street site in the months of July and August 2007.
- Participated in a study with the NYSDOH and University of Albany for "Fit WIC Families on the Go". The study strives to increase physical activity among 2-5 year olds enrolled in the WIC program.
- Initiated an enhanced education and outreach campaign to increase WIC participation among eligible residents of Onondaga County.
- Installed an updated phone system at the West Onondaga Clinic site. The system will allow WIC staff to enhance the quality of customer service provided to program participants.

Nutrition education and WIC checks were issued to an average of 9,821 participants per month in 2007; 24% of these participants were women, 28% were infants and 48% were children. 47.9% of women certified for WIC after delivery initiated breastfeeding. Forty two percent of the WIC prenatal population were certified within their first trimester of pregnancy, 44% were certified within the second trimester of pregnancy and 15% were certified within the third trimester of pregnancy in 2007.

WIC Vendor Management Agency

The WIC Vendor Management Agency (VMA) oversees approximately 305 authorized WIC vendors in a 14 county radius. WIC VMA is responsible for ensuring vendor compliance with both State and Federal Regulations governing the WIC Program.

Vendor Management Agency staff conducted 34 training sessions and more than 500 visits to monitor vendors. Over the course of the year, WIC VMA identified over 900 WIC vendor violations and saw to their correction. The WIC VMA also received and resolved more than 220 vendor-related complaints throughout the year.



In addition, staff received and reviewed 25 new vendor applications in an effort to ensure adequate access of vendors for WIC participants.

During 2007, the WIC Vendor Management Agency increased vendor outreach efforts to both chain stores and small independent stores, and continued assisting WIC vendors with the reauthorization process.

The WIC VMA targeted 56 vendors in our region for “fat-free/1% milk” vendor education. Agency staff visited stores and distributed vendor educational materials to ensure that WIC participants are receiving the correct type of milk from our vendors.

In May 2007, this Agency was selected by the NYSDOH to participate in a presentation on WIC VMA procedures and efficient practices to WIC staff from the state of California.

Public Health Preparedness

2007 Highlights

- *In May 2007, an exercise was conducted to test key elements of the Health Department's response to a Biohazard Detection System (BDS) alarm. The BDS detects the presence of anthrax in mail at major United States Post Office facilities. The exercise focused on the efficiency of hotline operations, epidemiological response, Point-Of-Dispensing clinics, and pharmaceutical repackaging. Over 60 staff members participated in this exercise thereby improving the Department's ability to rapidly respond to an activation of the BDS alarm.*
 - *Onondaga County leads an eight county Epidemiological Alliance whose goal is to strengthen public health preparedness across county borders. Participating counties include Cayuga, Cortland, Jefferson, Lewis, Madison, Oswego, and Tompkins.*
 - *Under the leadership of the Onondaga County Department of Emergency Management, the OCHD has continued to train personnel in the National Incident Management System (NIMS) to the level required by the U.S. Department of Homeland Security.*
 - *In October 2007, Public Health Preparedness conducted its second annual drive-through flu clinic for first responders. 427 fire, police, and emergency medical services (EMS) personnel were vaccinated, nearly doubling the number vaccinated in 2006. Participants spent an average of 13 minutes in the drive through which is less than the average time spent in a walk-in flu clinic.*
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The objectives of the Public Health Preparedness section are to plan, prepare, and respond to biological, chemical, and radiological terrorism as well as any other public health threat, whether natural or man-made. Public Health Preparedness staff work with local, State, and Federal partners to anticipate, manage, and mitigate such threats. These partnerships strengthen continuity of operations planning throughout our community.

The Onondaga County Health Department completed its comprehensive Pandemic Flu Preparedness and Response Plan. The plan strengthens the Health Department's ability to protect the health and well being of Onondaga County residents in the event of a global flu outbreak. During 2007, OCHD conducted over 30 educational presentations on pandemic flu to support pandemic planning efforts by other community organizations, including hospitals, schools, law enforcement agencies, businesses, and members of the public. These discussions better enable the community as a whole to respond to public health threats.

Surveillance and Statistics

2007 Highlights

- *Ordering of vital records online became fully functional.*
- *Began an initiative to apply geographic information systems (GIS) mapping software which will support emergency preparedness within the Department.*
- *Organized and convened a departmental data-review meeting to support evidence-based decision making for Health Department programs.*
- *Provided consultation on study design and statistical analysis in support of the department's quality improvement initiatives.*



The Bureau of Surveillance and Statistics monitors the health status of Onondaga County by analyzing and interpreting statistical information about local illnesses, deaths, and associated risk factors. During 2007, Bureau staff members fulfilled 90 requests for local health statistics, many came from local agencies needing health data for grant applications or project reports.

The Office of Vital Statistics keeps records of all births and deaths in Onondaga County and provides birth and death certificates by request. During 2007, the Office of Vital Statistics issued 15,324 birth certificates and 27,326 death certificates.

Volunteer Services

2007 Highlight

- *For the first time, this year the New York State Health Department required that all children entering the 6th grade have Tdap vaccination. As a result of that requirement, many school children faced exclusion from school. In partnership with a variety of area school districts, the Health Department sponsored clinics offering extra vaccine clinics thereby providing access to care for a number of families in need. Health Department volunteers were responsible for coordinating and packing school supplies for students attending these clinics, providing both an incentive for the students and a level of customer service that was appreciated by students, parents, and staff.*
-



The Volunteer Services Office recruits and places public health volunteers and interns in a variety of professional, paraprofessional, and support services throughout the Onondaga County Health Department. The program strives to provide the Health Department with a multi-skilled, multi-trained, adjunct workforce prepared to support public health programs, projects, and initiatives. Volunteers staff some of the Health Department's most widely known and utilized programs, including Influenza & Pneumonia Vaccination Clinics, Rabies Vaccination Clinics, and the Hypertension Screening and Education Program.

This year the program supported more than 17 Health Department programs, projects, and initiatives assisting in such diverse activities as:

- Repackaging over-the-counter medications and lances for the Correctional Health Program at the Justice Center

- Drawing blood for prostate cancer testing in conjunction with community partners as a part of a cancer screening initiative
- Driving the “Lead Mobile” to targeted neighborhood locations in order to test children for elevated blood lead levels for the Lead Poisoning Control program
- Assisting as forensic investigators at the Medical Examiner’s Office
- Reading to and serving as “Playmaids” for children of parents attending Healthy Start and WIC presentations
- Conducting compliance checks under the Adolescent Tobacco Use Prevention Act
- Providing nursing and interpreting services at health clinics for migrant workers
- Answering phones and taking messages for several programs
- Filing, collating, photocopying and providing general clerical assistance to a variety of programs and projects
- Assembling materials for Maternal/Child Health nurses and outreach workers to provide to families
- Making infant quilts for distribution throughout the Healthy Start program

This year, Health Department volunteers and interns provided approximately 6,675 hours of service to the residents of Onondaga County. This service represents a donation of time valued at over \$120,420.

Volunteer and Intern Hours Served, 2000-2007

	Volunteer Hours	% of Total	Intern Hours	% of Total
2000	2,567.00	46.8%	2,915.25	53.2%
2001	3,402.75	54.5%	2,843.00	45.5%
2002	2,843.75	42.8%	3,804.00	57.2%
2003	3,036.25	42.7%	4,075.00	57.3%
2004	3,056.00	36.0%	5,422.00	64.0%
2005	3,330.50	32%	7,045.00	68%
2006	2,245.75	25%	6,912.75	75%
2007	2,339.75	35%	4,335.00	65%

**The average Volunteer/Intern donated 27 hours of service in 2007.*

**Volunteer and Intern Hours Served,
Value to the Community, 2000-2007**

	Volunteer/Intern Hours Served	Value to Onondaga County
2000	5,482.25	\$ 77,645.16
2001	6,245.75	\$ 82,283.00
2002	6,647.75	\$ 94,793.67
2003	7,115.25	\$ 104,793.67
2004	8,478.00	\$131,614.41
2005	10,374.5	\$170,317.05
2006	9,158.50	\$150,466.34
2007	6,674.75	\$120,420.75

**All Volunteer/Intern Hours listed are reported hours only. No estimates were made for unreported volunteer hours.*

The figures above represent what it would have cost the County to hire and pay workers to perform the same jobs that were performed by volunteers and interns. Figures were computed by multiplying the total number of volunteer hours spent in the performance of a particular job (clerical, nursing, research) by the **lowest** salary on the pay scale that the county pays a staff person to perform that same job. These figures do not take into account additional costs such as benefits.



Blood Pressure Screening and Education

The goal of OCHD's Hypertension Screening and Education program is to reduce the prevalence of elevated blood pressure. Program activities include:

- Educating individuals in the management and control of blood pressure
- Identifying individuals with elevated blood pressure
- Referring individuals requiring post-screening follow-up

This year, 10 volunteer staff members including nurses and clerical staff conducted 75 scheduled clinics at 7 locations throughout Onondaga County.

On average, clinics ran 1-2 hours in length and were staffed by one nurse who performed 25 readings. In addition to regularly scheduled screenings, blood pressure readings were conducted at 2 community events.

2007 Statistics

<i>BP Readings</i>	<i>Number of Screenings</i>	<i>% of Total Screenings</i>
<i>Total # of BP Screenings</i>	1890	100%
<i>Screenings of Persons with No History of Hypertension</i>		
<i>Total Normal</i>	231	12%
<i>Total Pre-Hypertensive</i>	231	12%
<i>Total Stage 1 Hypertensive</i>	58	3%
<i>Total Stage 2 Hypertensive</i>	11	<1%
<i>Screenings of Persons Diagnosed as Hypertensive But Not on Hypertension Medication</i>		
<i>Total Normal</i>	17	<1%
<i>Total Pre-Hypertensive</i>	89	5%
<i>Total Stage 1 Hypertensive</i>	33	2%
<i>Total Stage 2 Hypertensive</i>	7	<1%
<i>Screenings of Persons Diagnosed as Hypertensive Who Are Taking Medication for Hypertension</i>		
<i>Total Normal</i>	184	10%
<i>Total Pre-Hypertensive</i>	752	40%
<i>Total Stage 1</i>	221	12%
<i>Total Stage 2</i>	56	3%

The Wallie Howard, Jr. Center for Forensic Science

2007 Highlights: Forensic Laboratories

- *Received \$949,187 in grant funding from the New York State Department of Criminal Justice Services and the National Institute for Justice during 2007. The funding is primarily being used for upgrading equipment, increasing the analysis capacity of the laboratories, and funding several scientific positions.*
 - *Participated in the review of 14 unsolved homicides to determine if analysis using newer forensic technologies would generate investigative leads. In conjunction with the District Attorney's Office, the laboratory oversees the Onondaga County Cold Case Task Force. Subsequent forensic analysis performed by the laboratory led to the linking of an inmate on death row in Georgia to an unsolved sexual assault and homicide that occurred in Jamesville during 1975. The laboratory was also able to aid 42 criminal investigations in 2007 through hits to CODIS (Combined DNA Index System.)*
 - *Utilized the Firearms NIBIN (National Integrated Ballistics Information Network) system to connect cases using ballistic comparisons. The system is primarily used for acquiring digital imagery of ballistic markings on cartridge cases, coding those markings, and searching existing databases for similar characteristics. The firearms staff has made over 150 of these connections to date, putting this lab in the top 17% of all NIBIN sites nationwide.*
 - *Initiated the discipline of Digital Evidence to serve as a regional resource for computer evidence analysis in response to a request from Federal and local prosecutors for additional computer forensics support. The section began casework in February 2007. This section analyzes seized computers to assist in criminal investigations and prosecutions including computer-based child pornography, kidnapping, internet communications, drug trafficking, and white collar crime such as fraud and property theft.*
-

The Forensic Science Laboratories provide high quality scientific laboratory services in support of the administration of justice and public safety programs for the citizens of Onondaga and surrounding counties.

Criminalistics

The Criminalistics section of the laboratory houses the following forensic disciplines: Latent Prints, Questioned Documents, Forensic Chemistry, Firearms, Trace Evidence, and Digital Evidence.

The **Latent Print** section is responsible for developing fingerprints, palm prints, and footprints from items of evidence using various chemicals, powders, dye stains, and light sources. The Latent Print section compares recovered latent prints to known fingerprints in order to identify individuals. Identification may involve searching unidentified latent fingerprints in the Statewide Automated Fingerprint Identification System (SAFIS).

The **Questioned Documents** section is responsible for performing handwriting comparisons, analyzing paper items for indentations, and differentiating inks and obliterations contained on documents.

The **Forensic Chemistry** section analyzes powders, tablets, and plant material for the presence of controlled substances. This section is also responsible for analyzing fire debris and liquids collected in arson investigations to determine if accelerants are present.



The **Firearms** section examines firearms to determine the operability status of submitted weapons. Firearms examiners are also responsible for determining whether or not a projectile or casing recovered at a crime scene was fired from a particular firearm. To make this determination, examiners conduct test fires with the gun in question and use a comparison microscope to examine markings on recovered projectiles and casings that are unique to that gun. The laboratory uses a computerized database, called the Integrated Ballistic Identification System, to aid in connecting shootings from different crime scenes.

The **Trace Evidence** section examines evidence items in order to recover and compare hairs, fibers, and glass. Hair and fiber evidence are usually compared microscopically to known hair or fiber standards to determine whether the hair or fiber under question could share a common origin with the known standard.

The **Digital Evidence** section examines submitted electronic media (e.g. hard drives, optical discs, flash memory, digital cameras, etc.) for the purposes of acquiring, retrieving, preserving, and presenting relevant data that has been electronically processed and stored on the item. Target data may be in the form of text, photographs, video, audio, or any combination thereof.

Forensic Biology/DNA

The Forensic Biology/DNA section of the Center receives biological evidence from criminal investigations of homicide, sexual assault, burglary, and other crimes. The section identifies bodily fluids obtained as evidence and performs DNA analysis on items of probative value to the case. Current DNA technologies can be used to link suspects to a crime or eliminate individuals from suspicion. The DNA laboratory serves as a local casework database site for



entry and searching of profiles in the national Combined DNA Index System (CODIS). The CODIS database can be used to link unsolved crimes, identify a previously convicted offender as a contributor to crime scene DNA, or associate unidentified remains with missing persons.

Forensic Toxicology

The Forensic Toxicology Laboratory assists the Medical Examiner's Office in determining the cause and manner of death by utilizing the methods of analytical forensic toxicology. Employing such techniques as gas chromatography, liquid chromatography, mass spectrometry, immunoassay, and other analytical methods, the laboratory determines if drugs, alcohol, and/or poisons are present in submitted specimens. The Toxicology Laboratory also conducts testing on specimen submissions from DUI/DWI and drug-facilitated sexual assault investigations conducted by law enforcement agencies.

Laboratory Cases Completed by Section for 2007

Arson	25	Drug Identification	349
Firearms	612	Footwear	5
Forensic Bio/DNA	339	Latent Prints	741
Questioned Documents	47	Trace Evidence	85
Toxicology	878	Digital Evidence	6

Medical Examiner's Office

2007 Highlights

- *In March 2007, the Madison County District Attorney/Coroner's Office called upon the forensic expertise of the Onondaga County Medical Examiner's Office (OCMEO) to work cooperatively with various state and local authorities in recovering human remains, which surfaced when graves were flooded out from St. James Cemetery in Cazenovia. The search and recovery effort, lasting nearly four weeks, resulted in the collection of all human remains displaced from the flood. The remains were respectfully recovered and returned to the cemetery for re-burial.*
- *The OCMEO continued to enhance mass disaster/fatality preparedness with the purchase of radiation detection equipment. The radiation monitor will detect and activate an alarm at specified levels of radiation exposure and Geiger counter equipment will pinpoint the source of exposure. The equipment was purchased using funding from the Metropolitan Medical Response System (MMRS) grant.*
- *The OCMEO purchased and implemented new Microsoft servers, thin client devices, and an upgraded version of the LYNX photo-evidence database with Paul Coverdell Forensic Sciences Improvement grant funds. The LYNX database has numerous improved features that provide quick access to images taken at autopsy and death scene investigations necessary to corroborate autopsy findings and death investigation reports for prosecution and civil litigation.*



The Medical Examiner's Office (MEO) determines the cause, circumstances, and manner of death in sudden, unexplained, and unnatural deaths in Central New York (CNY) including Onondaga, Cayuga, Jefferson, Lewis, Madison, Oswego, Otsego, Seneca, St. Lawrence and Tompkins counties. The Medical Examiner's Office uses forensic medicine and death investigation skills to recognize and collect evidence for potential use in the criminal justice

system. The MEO also helps protect public health by identifying communicable diseases and unsafe environmental conditions that put people at risk as well as by examining the quality of acute medical care and long-term care for CNY residents. The services of the MEO also extend to other public agencies that call upon the expertise of forensic pathologists to interpret injury patterns in living victims of trauma, abuse (child, domestic, and elder), and other suspected violent acts.

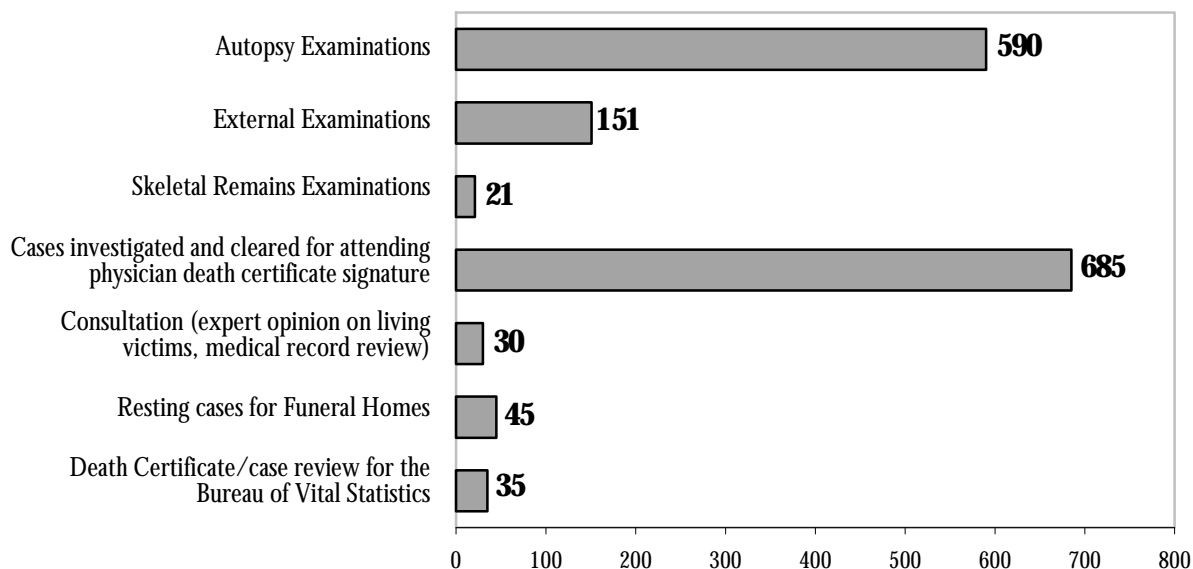
MEO staff members participate in continuing education opportunities each year through organizations such as the National Association of Medical Examiners, the American Academy of Forensic Sciences, the New York State Association of County Coroners and Medical Examiners, and other specialized conferences.

Two Forensic Investigators achieved registry certification status with the American Board of Medicolegal Death Investigators in 2007. In addition, several staff members successfully completed training in forensic pathology and medicolegal death investigation to meet the standards of the National Association of Medical Examiners and American Board of Medicolegal Death Investigators.

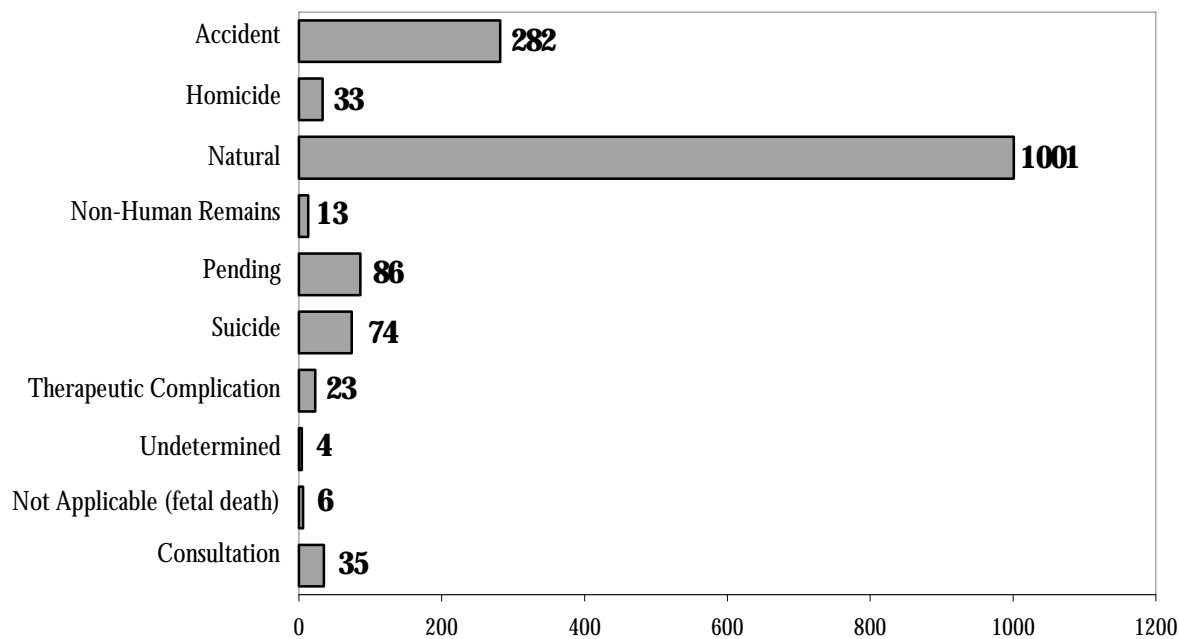
The MEO regularly participates in community public health education. Each year, forensic investigators conduct presentations for a number of local middle schools and high schools to educate youth about forensic pathology and medicolegal death investigation. The Medical Examiner's Office also provides internship opportunities for college-level students in medical and criminal justice fields. Forensic Pathologist staff members play a critical role in educating postgraduate pathology residents as well as medical students.

In 2007, 1,557 cases were reported to the Medical Examiner's Office, of which 225 cases were from surrounding counties. (Please see chart at right for total cases by category).

Medical Examiner's Office-2007 Cases by Disposition [n=1,557]

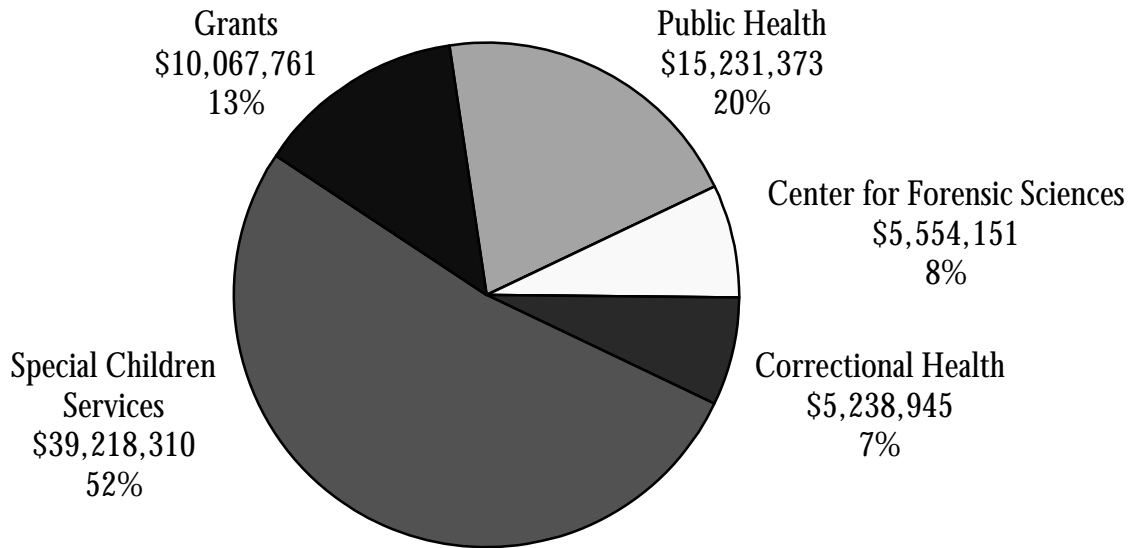


Cases by Manner of Death [n=1,557]

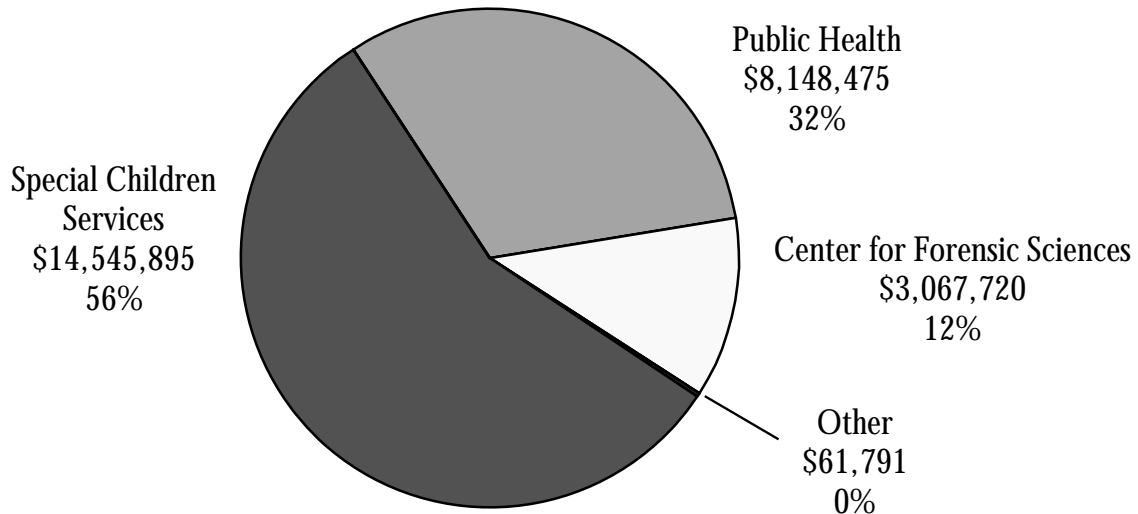


2007 Expenses and Local Dollars

Onondaga County Health Department 2007 Expenses \$75,310,540



Onondaga County Health Department 2007 Local \$25,823,881



Grant Projects, 2007	Expense/Revenue
Administration	\$1,024,398
▪ Regional Epidemiology	\$41,678
▪ Public Health Preparedness/Response for Bioterrorism	\$434,214
▪ Facilitated Enrollment	\$497,019
▪ Migrant Health	\$38,225
▪ Other	\$13,262
Disease Control	\$794,034
▪ HIV/AIDS/STD	\$510,454
▪ Tuberculosis	\$283,580
Environmental Health	\$427,590
Health Promotion & Disease Prevention	\$2,223,628
▪ Obesity	\$201,405
▪ Cancer Screening Services	\$666,243
▪ Lead	\$660,362
▪ Tobacco	\$614,611
▪ Other	\$81,007
Maternal & Child Health	\$5,005,558
▪ Eliminating Disparities (Healthy Start)	\$958,215
▪ Immunization Action Plan	\$957,264
▪ WIC	\$2,225,582
▪ Early Intervention Program	\$425,826
▪ Community Health Worker	\$195,053
▪ Enhanced Perinatal Care	\$243,618
Medical Examiner's Office	\$6,998
Laboratory	\$582,286
Correctional Health	\$3,269
Total Health Department:	\$10,067,761

Onondaga County Health Department 2007 Organizational Chart

