

Promoting and protecting the health of our community



2010 ANNUAL REPORT

Onondaga County Health Department 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 **2010 Health Committee**

Robert Warner, Chair Sam Laguzza, Vice-Chair William Meyer Kevin Holmquist Linda Ervin

2010 Advisory Board of Health

Thomas Dennison, PhD, Chair
Marybeth Carlberg, MD
Larry Consenstein, MD
Ruben Cowart, DDS
Peter Cronkright, MD
Rev. Collette Matthews
Ann Rooney
Robert Warner

Table of Contents

Ten Essential Public Health Services	1
Disease Control	2
Communicable Disease	3
Sexually Transmitted Disease	4
■ Tuberculosis Control	
Environmental Health	6
Animal Disease Prevention	6
Community Environmental Health	7
Food Protection	
Residential Environmental Health	8
Temporary Residence and Recreational Facilities	9
■ Environmental Health Assessment	9
Adolescent Tobacco Use Prevention Act	9
Environmental Exposure Response	10
Healthy Neighborhood	10
Incinerator Monitoring	10
Indoor Air	11
New York State Clean Indoor Air Act	11
Radon	11
Rodent Control	
Vector Control	12
Public Health Engineering	13
Water Supply	13
Land Development	
Council on Environmental Health	15
■ Weights and Measures	16
Facilitated Enrollment for Public Health Insurance	17

Table of Contents, cont.

Family Planning Service	
Clinical Services	18
Health Education and Outreach	20
Health Promotion and Disease Prevention	21
Adult Immunization Program	22
■ Cancer Services Program Partnership	23
■ Car Seat	24
 Creating Healthy Places to Live, Work, and Play 	25
■ Dental Health	25
Eat Well Play Hard	26
 Healthy Children Healthy Futures 	
School-Based Childhood Obesity Initiative	28
■ Lead Poisoning Control	29
Migrant Health	31
Public Health Education	32
■ Tobacco Control Programs	33
Maternal and Child Health	35
Community Health Nursing	36
Nurse Family Partnership	37
Family Life Team	
Early Intervention C.A.R.E.S.	37
■ Immunization Action Plan	38
■ Special Children Services	39
Early Intervention Program	
Preschool Special Education Program	
Children with Special Health Care Needs	40
Syracuse Healthy Start	41
■ The Community Health Worker Program	43
■ Women, Infants and Children (WIC)	43
■ WIC Vendor Management	44
Public Health Preparedness	45

Surveillance and Statistics	47
Volunteer Services	48
The Wallie Howard, Jr. Center for Forensic Sciences	51
Forensic Laboratories	51
Criminalistics	52
Latent Print	52
Forensic Chemistry	52
Firearms	52
Trace Evidence	52
Digital Evidence	52
Forensic Biology/DNA	
Forensic Toxicilogy	
Medical Examiner's Office	54
Schedule of Expenditures and Revenues	57
Health Department Organizational Chart	59

Ten Essential Public Health Services

The following Essential Public Health Services provide a working definition of public health and a guiding framework for the responsibilities of the local public health system.

- **1.** Monitor health status to identify community health problems.
- **2.** Diagnose and investigate health problems and health hazards in the community.
- **3.** *Inform, educate, and empower people about health issues.*
- **4.** Mobilize community partnerships to identify and solve health problems.
- **5.** Develop policies and plans that support individual and community health efforts.
- **6.** Enforce laws and regulations that protect health and ensure safety.
- **7.** Link people to needed personal health services and assure the provision of health care when otherwise unavailable.
- **8.** Assure a competent public health and personal health care workforce.
- **9.** Evaluate effectiveness, accessibility, and quality of personal and population-based health services.
- **10.** Research for new insights and innovative solutions to health problems.

Bureau of **Disease Control**

2010 Highlights

showcased in NYS.

- The Bureau of Disease Control, along with NewYork State Health Department (NYSDOH) staff identified and investigated an increase in people aged 25 and under with newly diagnosed HIV. OCHD, NYSDOH, and community partners including AIDS Community Resources, Southwest Community Center FACES Program, Center for Community Awareness, CNY HIV Care Network and SUNY Upstate Designated AIDS Center worked together to respond to this increase through community awareness, focus groups, and expanded testing
- The Bureau of Disease Control Tuberculosis Control Program was asked to host a site visit from the Centers of Disease Control and Prevention (CDC) to present our TB program to the CDC representative and NYSDOH TB Program Administration. The Onondaga County Health Department was selected to present our program and highlight our accomplishments. The visited provided a welcome opportunity to discuss the issues faced by the public health workforce on the frontline of disease prevention. OCHD's program was the only program
- The Bureau of Disease Control Communicable Disease Surveillance Program responded to a pertussis outbreak in our community during the summer of 2010. Over 156 suspected cases were investigated resulting in 125 cases being reported to the NYSDOH.



The Bureau of Disease Control is responsible for the prevention, investigation, reporting, diagnosis, and treatment 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 activity within the community and work closely with Health Administration to develop education, outreach, testing, and treatment strategies to minimize the impact of communicable disease in the community.



Communicable Disease

The Communicable Disease (CD) program is responsible for the investigation, follow-up, surveillance and reporting of almost 70 diseases/conditions identified by the NYSDOH as reportable under the New York State Sanitary Code. Communicable disease nurses review positive laboratory findings, investigate each as indicated, and follow-up with the case patients and their medical providers to ensure that the public health impact of these diseases is minimized. All confirmed cases of reportable diseases are electronically reported to NYSDOH. Staff works closely with the OCHD's Food Protection, Animal Disease Control, and Surveillance and Statistics programs, and with NYSDOH to control and prevent the spread of communicable disease within the community.

In 2010, the Communicable Disease (CD) program investigated an increase in the number of cases of campylobacter in Onondaga County. There were 128 cases investigated, with 122 meeting case criteria in 2010, compared with 42 cases in 2009. No common

source was identified. NYSDOH also reported an increase of cases statewide.

During that same time period, pertussis activity increased and an outbreak was declared. In 2010, over 156 suspect cases were investigated, with 125 meeting NYSDOH case criteria, compared with 12 cases in 2009.

The CD program investigated over 1,650 possible cases of communicable disease with 1,044 diseases being reported to NYSDOH in 2010. This was a slight decrease over the 2009 numbers of over 1,800 cases investigated and 1,137 reports to NYSDOH. In 2010, NYSDOH, through a grant from the CDC, conducted Lyme disease investigations and follow-up for Onondaga County.

The CD program continues to closely monitor potential human rabies exposures, evaluating the need for prophylaxis (rabies shots) administration. In 2010, the OCHD authorized rabies shots for 122 individuals who were identified as potentially having been exposed to rabies.

Sexually Transmitted Disease

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

The STD Program saw a slight increase in the number of gonorrhea, chlamydia and syphilis cases in 2010. In late August 2010, local gonorrhea rates spiked. According to the NYSDOH, this increase was observed in several other counties. The rate has since returned to baseline levels.

	<i>2007</i>	2008	2009	<i>2010*</i>
Gonorrhea	502	357	377	395
Chlamydia	2,306	2,358	2,344	2,383
Syphilis	10	6	6	9
Clinic Visits	6,406	6,583	7,404	7,004

*Preliminary data pending review

An increase in the number of newly HIV positive males 25 years of age and under was identified in early 2010 through a joint investigation with NYSDOH. Ten (10) cases were initially diagnosed between late December 2009 and the end of January 2010. Each case was thoroughly investigated for common links. Collaborative efforts to increase awareness and opportunities for testing were coordinated with many community based organizations, including Syracuse Model Neighborhood Facility (SMNF), AIDS Community Resources (ACR), Center for Community Alternatives (CCA), the Designated AIDS Center (DAC) and the CNY CARES Network.

The HIV counseling and testing (HIV C&T) program provided over 2,760 HIV tests through the STD clinic in 2010.

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 decreases the public health threat posed by cases of active tuberculosis in our community through careful evaluation, closely monitored treatment regimes including directly observed therapy (DOT), and promotion of preventive therapy as indicated for contacts of cases.

Tuberculosis rates in Onondaga County slightly decreased this year. While 20 cases of active disease were reported in 2009; 13 cases were reported in 2010. The highest rate of TB is found in foreign born populations (please see table). Central New York continues to see an increase in the arrival of new refugees to the area. Catholic Charities, Interfaith Works OCHD, SUNY Upstate Medical University, St. Joseph's hospital, Syracuse Community Health Center, and others are working together to address the health care for the refugee population.

The Tuberculosis Control Program utilizes various targeted testing strategies 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 collaborativetargeted 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.

The TB program also had a successful site visit from NYSDOH TB Control in August 2010 where program activities were highlighted. NYSDOH expressed approval of all aspects of the OCHD's TB Program. The OCHD TB Control program then had the honor of being chosen to host a site visit from the Centers of Disease Control and Prevention and NYSDOH in late September Cases of Tuberculosis 2010. It was a welcome opportunity to discuss the challenges faced by disease control staff on the front

lines of public health. OCHD was the only program

visited by CDC staff in NYS.

Onondaga County, 2006-2010

Year	# Cases	% Foreign-born
<i>2006</i>	15	80
<i>2007</i>	14	64
<i>2008</i>	23	91
2009	20	84
<i>2010</i>	13	85

Environmental Health

2010 Highlights

- Eastern equine encephalitis (EEE) virus was detected throughout Central NewYork during the summer of 2010. One death due to EEE virus infection was reported in an Onondaga County resident and three horse deaths due to EEE were also reported in the county. EEE virus was found in mosquitoes in the Cicero area where there is a long history of the virus; however it was also found in the Lysander area where it is not traditionally seen. Aerial spraying of Cicero Swamp was conducted after detecting EEE virus in mosquitoes and horses.
- Food Protection and Communicable Disease staff members were involved in a large food borne illness outbreak following a clambake at Hinerwadel's in September. A total of 96 case histories were obtained during this investigation with 68 individuals reporting symptoms, thirteen of which were confirmed cases of Campylobacter jejuni. Statistical analysis of data collected identified raw clams as the most likely source of infection.
- Water quality monitoring at public bathing beaches resulted in temporary closure of four beaches with one ending their season early because of unacceptable levels of bacteria. Heavy rainwater runoff and an increase in waterfowl activity continue to pose significant challenges to protecting the water quality at our public bathing beaches.

Animal Disease Prevention

In 2010, Animal Disease Prevention continued to provide services and education to reduce the incidence of illness transferred from animals to humans. The primary focus of the bureau continues to be the control of rabies in Onondaga County. Staff members investigate reports from the community concerning animal bites or suspected rabid animals. Investigations allow the program 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.

With the assistance of community partners, Animal Disease Prevention conducted 15 rabies clinics for Onondaga County residents. Scheduled from March through December, these clinics took place in various locations throughout the county, including 4 sites in the city of Syracuse. The clinics provided vaccination to 3,120 animals from 2,144 families, including 2,225 dogs, 867 cats, 21 ferrets, 6 goats, and 1 donkey. Clinic attendance slightly increased from 2009.

Animal Disease Prevention oversees the testing of specimens when there has been potential human exposure to rabies. Of the 278 specimens submitted for testing, there were 8 positive animals including 1 cat, 1 raccoon, 3 skunks, and 3 bats. When specimens were not available for testing or were not suitable for testing, post exposure rabies prophylaxis for the exposed individual, or a 6-month quarantine for the animal is required. The Bureau investigated 1,016 animal bites involving 746 dogs, 232 cats, 18 bats, and 20 other species.

Formal enforcement hearings were initiated as needed for individuals who did not comply with supplying proof of rabies vaccinations for dogs that had bitten a human.

Community Environmental Health

The Bureau of Community Environmental Health consists of the Food Protection section, Residential Environmental Health/Environmental Lead Section and the Temporary Residence and Recreational Facilities section.

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 (NYSDOH) conducts periodic review of community environmental health programs. The Bureau of Community Environmental Health achieved satisfactory reviews for all its programs in 2010.

Food Protection strives to ensure that safe and sanitary food is prepared and served to the many thousands of patrons who visit the county's 1,895 food service facilities. To accomplish this, the Food Protection section conducts periodic comprehensive inspections of all 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 of temporary food service providers resulted in high levels of compliance at the majority of the 414 operations permitted during 2010.

In addition to the food borne disease outbreak discussed in the highlights section of this report, the Food Protection section investigated 93 suspected food borne illness complaints in 2010. Food Protection employees advise ill individuals to follow preventive measures to reduce or eliminate secondary transmission of illness to family members or others with whom they are in contact. On the facility end, the Food Protection section implements a combination of education and enforcement measures to prevent 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. In 2010, Food Protection staff investigated 25 complaints involving the Clean Indoor Air Act. In 8 cases, the establishments were determined to be in non-compliance and subsequent enforcement actions were taken, including written warnings, and, for establishments with repeat offenses, Commissioner's Hearings.

Food Protection staff investigated 364 other complaints in 2010. Facilities are required to implement corrective measures in a timely manner when violations are observed. Sanitary code enforcement action is initiated when necessary.

Residential Environmental Health is responsible for inspection of mobile home parks and child care centers. Public health workers in this section also enforce public health housing regulations and investigate citizen complaints of alleged public health nuisances or hazardous conditions. During 2010, staff members inspected 58 regulated facilities and investigated 679 complaints. The majority of facilities demonstrated substantial compliance and most complaints were resolved through education on proper sanitation practices. In situations where education measures did not achieve compliance, Commissioner's Hearings were utilized to enforce Sanitary Code provisions.

In 2010, Residential Environmental Health staff received a record number of requests for information concerning bed bug infestations. Although bedbugs do not pose a risk for disease transmission, substantial time and effort has been required to educate a concerned public about procedures to combat this emerging nuisance pest.

Temporary Residence & Recreational Facilities conducts inspections and sanitary surveys of a variety of different types of regulated facilities, including swimming pools, bathing beaches, hotels and motels, children's camps, migrant farm worker camps, school food services, state institutions, campsites, and rooming houses. During 2010, staff members inspected 513 regulated facilities, the majority of which demonstrated substantial compliance with the Sanitary Code. When deficiencies were identified, the facility was cited and corrections were made; however, Commissioner's Hearings were scheduled if necessary.

Temporary Facilities staff provides ongoing education to facility owners regarding code requirements and proper operating procedures. Staff members also responded to 33 complaints concerning regulated facilities.

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 455 compliance checks in 2010 to asses 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. In 2010, 4 retailers were found to have sold tobacco to a minor.

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. In 2010 there were no retailers that had their registrations suspended. Non-compliant tobacco retailers can avail themselves of state certified training courses on ATUPA. If the retailer provides proof that 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 **Environmental Exposure Response program** conducts surveillance of toxic and hazardous substance sites, investigates environmental radiation incidents, and responds to hazardous spills.



During 2010, the Environmental Exposure Response program provided guidance on health risks associated with hazardous materials incidents. Specific examples include investigating an abandoned house where chemicals were stored, working with other agencies on residential oil spills, and providing assistance to residents living near several local hazardous waste sites.

Staff members continue to respond to a number of radiation incidents although the number continues to decrease. The majority of cases involved loads of trash going to the municipal trash incinerator. Often, the source of radiation is associated with medical 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 identified hazards. During 2010, Healthy Neighborhood staff completed 663 surveys, resulting in 1,321 referrals. The Syracuse Fire Department responded by installing 963 smoke detectors and 500 carbon monoxide detectors in at-risk homes. In addition, as a result of the Healthy Neighborhood intervention, 87 children were tested for lead and 325 residents received training on managing their asthma.

Incinerator Monitoring: As part of Onondaga County's effort to monitor the relationship between the operation of the municipal solid waste incinerator and 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 Onondaga County Resource Recovery Agency. In the monitoring conducted to date, no relationship has been established between the operation of the incinerator and any significant increased levels of constituents in the environment. The

Environmental Health Assessment Bureau issued a report outlining the results of 2009 monitoring and will issue a similar report for 2010 results. A summary of this report is available on the OCHD website.

The **Indoor Air program** investigates complaints associated with indoor air quality, such as mold, asbestos, carbon monoxide, and odors. During 2010, the Indoor Air program investigated or responded to 101 concerns and complaints. Concerns about mold continued to be the predominant issue in 2010. Staff members use 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. Other issues addressed included carbon monoxide problems, asbestos, and unidentifiable odors.

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 7 CIAA waiver applications during 2010. These active waivers, originally issued for financial hardship, continue to decline as facilities change ownership or go out of business. In addition, there were 9 tobacco promotion notices received from establishments (primarily bars) in accordance with the law.

Environmental Health Assessment staff addresses complaints involving smoking in the workplace. In 2010, staff members resolved 16 workplace smoking complaints by answering questions and providing education and guidance on the Clean Indoor Air Act.

The **Radon program** provides County residents with information on home radon testing and mitigation. During 2010, staff members distributed 500 radon detectors to Onondaga County residents through a grant from the New York State Department of Health. Through a competitive process, a new five year radon grant was awarded to the Division.



The **Rodent Control program** investigates rodent complaints and conducts monitoring and baiting activities in the public sewer system. Rodent Control staff, including trained summer aides, checked sewers located in the project areas for the Onondaga Lake Improvement Project. Program personnel applied rodenticide to catch basins and manholes located in these areas.

During 2010, Onondaga County residents entered 7 complaints alleging rodent infestations within the public sewer system. Rodent Control staff investigated these complaints, applying appropriate rodenticide as needed. Additional preventive baiting activities in other areas were conducted when feasible.

The **Vector Control program** conducts mosquito surveillance and control activities in order to prevent disease transmission.

In 2010, West Nile Virus (WNV) and Eastern Equine Encephalitis (EEE) virus were detected in mosquitoes in Onondaga County. There were no reported human cases of WNV infection in Onondaga County in 2010. Three horses tested positive for EEE and one human death was associated with the virus in 2010.

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 virus, California Encephalitis (CE) virus, and other arboviruses. Of the 664 mosquito pools submitted during the period, 1 tested positive for WNV, 10 tested positive for EEE virus.

The Vector Control Program performed mosquito control activities from May through September. Program staff treated 784 catch basins throughout the county with 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.

A total of 12,000 acres were aerially sprayed using Kontrol 30+30 in and around Cicero Swamp on September 11, 2010 in response to concerning EEE virus activity.

Vector Control continued its program to treat abandoned swimming pools with appropriate larvicide. Staff treated five abandoned swimming pools during 2010.

Public Health Engineering

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

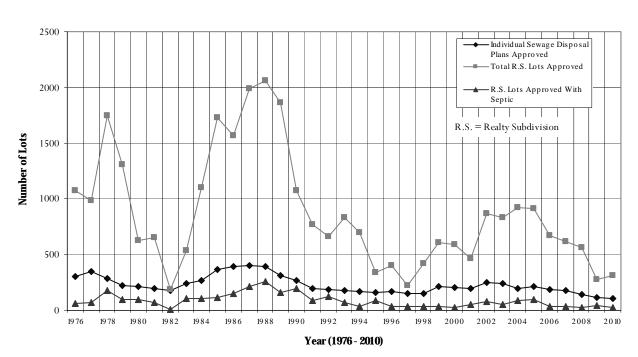
The **Water Supply section** is responsible for surveillance, inspection, and regulatory oversight of the County's Public Water Systems (PWS). This section also provides information and assistance to residents on individual wells. Program highlights from 2010 include the following:

- The Ground Water Rule (GWR) went into effect in December 2009. It requires that all public water systems served by ground water provide at least 4-log (99.99%) virus inactivation and/or removal before or at the first customer. In 2010, the Bureau's engineering staff assisted new and existing public water supplies to meet the requirements of the GWR by:
 - Offering technical guidance
 - Providing engineering design services
 - Reviewing and approving plans for new treatment systems as well as updates to existing systems
 - Evaluating all existing groundwater systems to determine compliance with the GWR treatment requirements
 - Tracking new source water monitoring
 - Issuing GWR public notification as required
- One aspect of the Long Term 2 Enhanced Surface Water Treatment Rule (LT2) requires water systems with uncovered finished water storage to cover their storage facilities or provide additional treatment to inactivate and/or remove microbial contaminants. In 2010, construction of tanks at the Metropolitan Water Board's Eastern and Western Reservoirs was completed. The City of Syracuse Water Department also completed construction on their northern Westcott Reservoir tank. As a result of the Bureau's inspection and Completed Works processes, the tanks were placed online providing the necessary covered storage for the respective water distribution systems. The Bureau worked closely with the water suppliers through all phases of planning and construction to complete these compliance measures.
- Another aspect of LT2 requires unfiltered water systems to provide additional treatment for Cryptosporidium using chlorine dioxide, ozone, or ultraviolet light (UV) disinfection. In 2010, construction of a new UV facility serving the Village of Elbridge and the Village of Jordan was completed and the facility was placed in service. The Bureau worked closely with the villages to attain compliance with this provision, which was completed nearly two years in advance deadline.

- The Bureau was instrumental in expanding the Cross-Connection Control Program in Onondaga County. Ongoing educational and coordination efforts with the major public water suppliers and Onondaga County's Plumbing Control Section have resulted in an increase in the number of plans the Bureau approved for new backflow prevention devices in 2010.
- Seven potential drinking water certified operators were evaluated by Bureau staff under the State's On-site Assessment Program.
- The Water Supply program staff conducted in-depth sanitary surveys of all 110 public water supplies and 44 non-public water supplies in Onondaga County.

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 ensure they conform to public health standards.

Land Development Plans Approved by Category, 1976-2010



In 2010, the number of building lots approved as individual lots by the Land Development section remained relatively steady compared to the past few years. The total number of lots approved under the realty subdivision program showed an increase, the first year to year increase in six years. Of particular note is that 85% (270 out of 317) of the realty subdivision



lots and 63% (70 out of 112) of the individual lot plans approved in 2010 were approved in the second half of the year. The Bureau remains optimistic that this mid-year turnaround indicates an upturn for the economic future for Onondaga County.

The Bureau's program to monitor repairs to existing onsite failing sewage disposal systems continues to evolve. Contractors, engineers and the general public are

increasingly aware of the importance of oversight which increases County involvement in remediation efforts. The number of repair plans submitted to the office for review and approval remains a significant part of the workload for the Land Development Section. Advanced technology continues to be instrumental in resolving many septic system failures on existing, substandard lots. Staff will continue to monitor the efficacy of these systems and will promote this technology for existing, difficult sites.

Under a consent order by the New York State Department of Environmental Conservation, Jordan-Elbridge High School replaced their existing sewage treatment plant with a new onsite sewage disposal system. This office was instrumental in helping to develop and approve plans for the waste disposal design of 8000 gallons per day to groundwater. Significant construction oversight conducted by the Bureau resulted in the successful transition to onsite sewage disposal prior to the opening day of school in September 2010.

Council on Environmental Health

In addition to its regularly scheduled meetings, members of the Onondaga County Council on Environmental Health attended a number of environmental and environmental health related activities pertaining to: Onondaga Lake, natural gas drilling, drinking water supply and watershed protection, soil and water conservation, recycling, alternative energy, and invasive species impacts. Council of Environmental Health members provided more than 250 hours of volunteer service.

Council Activities

- Continued in its designated role as the County's Citizen Advisory Board and lead entity in fulfillment of MS4 requirements for the County's Stormwater Management Program.
- Continued to monitor developments relating to natural gas extraction including hydrofracking in Onondaga County and adjoining areas.
- Began work on the Otisco Lake Management Plan Project including development of a watershed resident opinion survey of lake conditions and in completing an assessment of agricultural/forestry related water quality impacts.
- Submitted comments to regulatory agencies supporting the designation of the State Barge Canal as a no-discharge zone for boat lavatories and on proposed changes to the NYS Section 303 (d) Waterbodies List designations in Onondaga County.
- Commented on proposed Honeywell Onondaga Lake Remediation/Restoration Projects.
- Reviewed the Waste-to-Energy Plant Monitoring Summary Reports.

Weights & Measures

The Weights and Measures program performs annual inspection and testing of scales, gas pumps, and other weighing or measuring devices used for retail services. Staff members inspected a total of 763 facilities and 6,918 devices during 2010. Program staff also conducted investigations of all complaints received during the year.

Facilitated Enrollment

The mission of the Public Health Insurance Program is to expand accessibility and enhance the ease of applying for public health insurance (Medicaid, Family Health Plus and Child Health Plus) within Onondaga County through Facilitated Enrollment. Ongoing collaborations have been established with key community-based organizations, public schools, colleges, and County departments. We strive to strengthen and expand upon these collaborations. All partnering community-based enrollment sites have a Facilitated Enroller on staff to assist and advocate for families in the application process. Enrollers meet at times

and locations convenient for families and offer supportive services.

During 2010, the Public Health Insurance program continued their partnership with Syracuse University and Syracuse City School District's "Say Yes to Education" Program to identify uninsured children and help their families obtain Medicaid, Family Health Plus and Child Health Plus. Health Department staff have worked directly with the administrative, nursing, Say Yes and social work staff at 9 elementary and K-8 schools in the district.



Family Planning Service

2010 Highlights

- In March 2010, Family Planning Service (FPS) received funding from the NewYork State Department of Health (NYSDOH) to expand human papillomavirus (HPV) vaccine services to women between the ages of 19 and 26 years old. The vaccine is now provided at the North Syracuse site as well as at the William H. Harris Health Center on Slocum Avenue.
- In September 2010, FPS received a federal grant award to expand HIV testing at all clinic sites, including the walk-in Pregnancy Testing clinic. These funds have helped FPS to meet an increased demand for testing associated with changes in state regulations regarding "opt-out" HIV testing.
- FPS continues to provide male reproductive health services at both the Slocum Avenue and the North Syracuse clinic sites. In 2010, 162 men received reproductive health care.

Clinical Services

Family Planning Service (FPS) of the Onondaga County Health Department (OCHD) is a program of the Syracuse Model Neighborhood Facility, Inc. and provides clinical services as part of the OCHD. FPS is a preventive health care program funded by the United States Public Health Service and the NYSDOH. 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 2010, FPS provided care to 5,498 unduplicated patients, for a total of 11,705 visits. These numbers represent a decrease in visits and in unduplicated patients when compared with 2009. This may be due to intermittent closures of the Civic Center clinic site due to a county construction project during early 2010. FPS expects a rebound in utilization of clinic services in 2011.

In 2010, 96% of patients were at or below 150% of the federal poverty level. FPS staff members work with uninsured patients to help them access publicly funded insurance

programs such as Medicaid, the Family Planning Benefit Program and Child Health Plus. Patients who cannot afford care and who have no insurance are provided services on a sliding fee scale. Patients eligible for reproductive health care are never turned away due to an inability to pay. FPS also actively partners with the OCHD Cancer Services Program to ensure eligible women receive mammograms, and to provide follow up care for positive cervical cancer testing.

Family Planning Service is committed to reducing the rate of adolescent pregnancy in Onondaga County. FPS continues to operate a "teen-only" clinic 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 2010, FPS provided services to 1,243 unduplicated teens aged nineteen years or younger. FPS 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.



In 2010, FPS provided HIV testing to 1,532 individuals. Two were HIV positive; both were offered accompaniment by FPS staff to their first visit at the Designated AIDS Center at Upstate Medical University.

With the support of funding from the NYSDOH, FPS provided free walk-in emergency contraceptive services to medically qualified women. Walk-in patients were served at both the administrative office and at clinic sites. Each woman received a brief evaluation and counseling and was offered the opportunity to enroll in FPS. In 2010, FPS provided 1,239 patients with emergency contraception.

Health Education and Outreach

Family Planning Service provides information and education to numerous middle schools and high schools throughout Onondaga County. Public health message are delivered 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. Health education and outreach was provided at 52 community-based organizations and health-related events throughout the year.

Health Promotion & Disease Prevention

2010 Highlights

- The Onondaga County Health Department's Cancer Services Program provided breast, cervical, and colorectal cancer screenings for approximately 1,306 uninsured men and women in Onondaga County. Nine (9) breast cancers, two (2) cervical cancers, and one (1) colorectal cancer were diagnosed as a result.
- In 2010, Tobacco-Free Onondaga County actively participated in the statewide Young Lungs at Play initiative. Onondaga County is the first county in NewYork State to have all municipalities implement these policies.
- In February 2010, the Cancer Services Program (CSP) ran a breast cancer screening campaign entitled "Love Yourself" in partnership with the American Cancer Society. The campaign encouraged uninsured women aged 40-64 to get a mammogram to screen for breast cancer. The "Love Yourself" campaign resulted in 130 uninsured women in Onondaga county receiving mammograms.
- The car seat program distributed 632 car seats through the purchase and rental programs, representing the highest number in its nearly 29 year history. This represented a 40% increase from 2009.
- In 2010, the Colleges for Change program continued to work in partnership with Syracuse University and SUNY Cortland. At Syracuse University, the Fraternity and Sorority Event Management Guidelines and Community Expectations document now includes information on a ban on fraternities/sororities from accepting tobacco sponsorship and promotion. This affects a total of 51 organizations.
- EatWell Play Hard staff conducted an evaluation on mini grants to determine the long-term effectiveness of these awards. The intent of the mini grants was to increase the ability to store fresh vegetables, fruits, and fat-free or low-fat dairy products to food pantry patrons and to distribute accordingly. This intervention resulted in a practice change that supports increasing access to healthful foods to low income individuals. The refrigeration mini grant awards have positively impacted an estimated 4,500 food pantry patrons on a monthly basis and will continue to do so for many years to come.

Adult Immunization Program Influenza & Pneumonia Vaccination Program

The Onondaga County Health Department (OCHD) strives to prevent illness and reduce hospitalizations and premature deaths resulting from influenza and pneumococcal disease by making vaccinations accessible to all county residents.

Seasonal Influenza

This season, vaccine was readily available in the community. Many health care providers were able to vaccinate for seasonal flu as early as September.

All persons are susceptible to infection with the flu. Three populations, however, are especially vulnerable to serious complications that can lead to hospitalization or death: children under age two, persons with chronic medical conditions, and seniors ages 65 and older. In an effort to prevent the transmission of influenza to these vulnerable populations, an emphasis was placed on encouraging everyone to get a flu shot.



The OCHD, in partnership with the University of Rochester School of Nursing's Passport Program, conducted 14 clinics in Onondaga County in the fall of 2010. Four of these were designated "family clinics", where parents and children could receive vaccinations together. Clinics were held between October 26 and November 23. A total of 1,337 children and adults were vaccinated at public clinics in 2010.

Three (3) OCHD volunteer nurses, 8 CNY Medical Reserve Corps volunteers, 9 Upstate nursing students and 18 clerical volunteers joined with staff nurses and public health personnel to participate in the operation of the scheduled seasonal flu and pneumonia vaccination clinics.

Drive-through Flu Clinic for First Responders

OCHD has been holding a drive-through flu clinic for first responders for the past five years, thereby providing both a service to the community by vaccinating first responders for seasonal flu and by having an exercise in mass prophylaxis. The Health Department vaccinated 692 first responders at this clinic. Eleven (11) CNY Medical Reserve Corps volunteers joined with staff nurses and public health personnel to participate in the operation of the Drivethrough Flu Clinic.

Cancer Services Program Partnership

The Onondaga County Cancer Services Program Partnership provides free screenings for breast, cervical, and colorectal cancer to medically uninsured women and men in Onondaga County. Key program activities include conducting health education and outreach as well as networking with community partners to increase referrals. In 2010, 9 breast cancers, 2 cervical cancers, and 1 colorectal cancer were diagnosed through this program.

On an ongoing basis, the Partnership provides education and screening for breast and cervical cancer for women as well as education and screening for colorectal cancer for both men and women. Case management services are available to help identify and remove potential barriers to health care and further enhance these screening services. In 2010, the following procedures were performed for Partnership clients:

- 866 clinical breast exams
- 847 mammograms
- 637 follow-up breast screenings
- 285 cervical cancer screenings
- 76 follow-up cervical screenings
- 155 colorectal cancer screenings
- 209 follow-up colorectal screenings
- 32 received case management services
- 2,841 men and women received health education on the importance of cancer screenings

The health care providers who provide screening and diagnostic services for Partnership clients play a vital role in client care. These medical personnel provide breast, cervical,



and colorectal cancer 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 2010, the Partnership, with support from multiple community partners, planned, coordinated, and implemented two clinical screening events. The first event, entitled "Love Yourself" was held in February 2010 and targeted women for breast cancer screening. This event resulted in approximately 130 uninsured women being screened for breast cancer. "Love Yourself" was themed around Valentine's Day and encouraged women to receive their yearly mammogram. The second event entitled, "Get Health Connected" was held in May 2010 and provided health education and screening to 305 medically uninsured and medically underserved individuals. Educational topics at this event included diabetes, cholesterol, nutrition, and several other chronic diseases. Medical screenings were offered for hypertension, cholesterol, kidney disease, vision, HIV/AIDS, and breast, cervical, prostate, and colorectal cancers.



Car Seat Program

The Onondaga County Car Seat Program which was transitioned to our community partner, Child Care Solutions, on October 1, 2010, is part of a community wide effort to increase compliance with the New York State Child Passenger Safety Law. This child restraint seat distribution program allows parents and caregivers to purchase child restraint seats at low cost. Car seats are also available for short-term rentals of 30 days or less. In an effort to reduce barriers for parents to protect their children from injury, the program is open to all parents and caregivers regardless of their income.

The Governor's Traffic Safety Committee provides funding for the car seat distribution program. Additionally, the funds collected from purchases and rentals are deposited in the Car Seat account to purchase additional seats. The Governor's Traffic Safety grant requires that all program recipients receive car seat education on the importance of using child restraints, how to correctly install, and how to use their car seat. A certified Child Passenger Safety Technician provides these demonstrations and also inspects car seats, ensuring they meet proper safety standards. If they do not, the Car Seat Program is able to provide a new seat. This service is provided to the public at no cost.

During 2010, the Onondaga County Car Seat Program distributed 632 child restraint seats, a 40% increase from 2009 sales. In addition, 874 parents and caregivers were trained on how to install their seats correctly.

Creating Healthy Places to Live, Work, and Play

In November 2010, the Onondaga County Health Department was awarded the Creating Healthy Places to Live, Work, and Play grant funded by the New York State Department of Health. This initiative will establish and implement programs to prevent obesity, type 2 diabetes, and other chronic diseases in Onondaga County. This will be achieved by implementing sustainable policies, systems, and environmental changes that will create healthy places for Onondaga County residents. Program plans have been developed and implementation of several interventions will begin next year including:

- Creating healthful policies at child care centers to increase physical activity opportunities, decrease screen time, and increase the availability of foods in high nutritional value
- Advocating for changes in the built environment that will increase opportunities for safe physical activity for Onondaga County residents
- Planning and implementing new Farm Fresh Mobile Market sites and developing a
 gleaning project with local farmers to increase access to affordable and healthful food
 for emergency food site patrons
- Supporting local grocery store initiatives that meet the goals of the grant
- Assisting in the development of "Healthy Grocery Stores"
- Promoting point of sale of healthy foods by requiring calorie posting on menus and menu boards and at the point of sale at food venues

Dental Health

The Dental Health program offers dental health education and promotion of early dental care to pre-school aged children and their parents or guardians. Parents and guardians are given printed health education materials with dental health recommendations about early and regular oral exam appointments for their children. In 2010, the Dental Health program:

- Provided small group presentations at 56 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 245 dental health presentations reaching a total of 2,146 children. This
 program focused on oral health and how to properly care for teeth.
- Conducted 9 presentations about children's oral health to 84 adults at selected parent groups.

Eat Well Play Hard

The Eat Well Play Hard (EWPH) program supports efforts to prevent childhood obesity and chronic disease through policy, system, and environmental strategies. The program's three key objectives are to increase daily consumption of vegetables and fruits, and the intake of low-fat and fat-free dairy products, and to engage in age-appropriate physical activity most days.

During 2010, the final year of this program, several successful interventions were implemented to support the EWPH initiative:

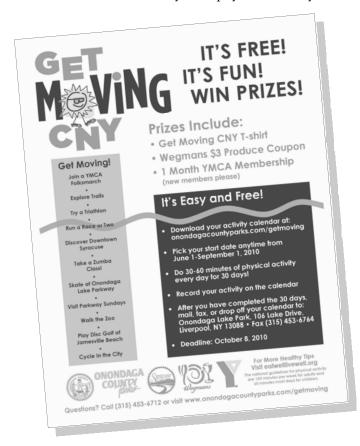
• EWPH and several community partners planned, promoted, and launched a community bicycling event called "Cycle in the City!" The purpose of this event was, in part, to draw attention to "bikeability" in the City of Syracuse by promoting the use of paved surfaces to ride bicycles. Over 200 people participated in guided bicycle rides, a bicycle safety rodeo, farmers' market, bicycle safety check, health fair, and also learned about the "complete streets" advocacy project. From the "Cycle in the City!" event, awareness was raised about increasing opportunities for physical activity by changing the built environment.



■ EWPH, in cooperation with the WIC program, Gifford Foundation, and the Southside Interfaith CDC Working Group, expanded the WIC farmers' markets to two markets per week at WIC, from June through October 2010. The purpose was to increase the availability of fresh produce in this area and to increase the redemption rates of WIC farmer's market coupons. EWPH staff promoted the WIC farmers'

market by developing promotional materials, conducting outreach, offering incentives, and participating in media events to raise the awareness of the WIC farmers markets. In July, a national Public Broadcasting Station (PBS) profiled the WIC Farm Fresh Mobile Market for use in the series, "Building Healthy Communities." This documentary will address how a communities' infrastructure affects public health. This is expected to be aired in 2011.

- In May, EWPH staff conducted refrigeration mini grant evaluations to determine the long-term effectiveness of these awards. The intent of the mini grants was to increase the ability to store fresh vegetables, fruits, and fat-free or low-fat dairy products to food pantry patrons and to distribute accordingly. This intervention resulted in a practice change that supports increasing access to healthful foods to low income individuals. The refrigeration mini grant awards have positively impacted an estimated 4,500 food pantry patrons on a monthly basis and will continue to do so for many years to come.
- EWPH, in partnership with Onondaga County Parks and Syracuse Parks and Recreation, the YMCA, and other community partners coordinated "Get Moving CNY". This countywide physical activity initiative encouraged residents to engage in



physical activity for 30 minutes for 30 consecutive days. In total, over 882 residents participated in this program and over 50 percent self-reported that they plan on continuing to exercise 30 minutes most days.

Healthy Children Healthy FuturesSchool-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 with the goal of reducing the prevalence of childhood obesity by promoting healthful eating and physical activity through policy and environmental changes in local schools. As part of the federal Child Nutrition and WIC Reauthorization Act of 2004, all schools receiving federal funding for their lunch programs were required to develop a wellness policy that addressed both nutrition and physical activity and impacted students, faculty, and staff. This five year grant provided support to schools to successfully develop and implement such policies.

Over the course of the grant, the program partnered with 59 of the 82 public school districts in the eight-county Central New York region to help implement new policies. Examples of changes included awarding mini grants, and providing fruit and vegetable sectionizers for the food service program; curriculum-based pedometers for use in physical education programs; and fitness testing software to select school districts. As a result of this grant, 155 school buildings adopted at least one policy or environmental change that increased access to healthy foods and/or physical activity impacting over 50,000 students, faculty, and staff.

In 2010, the last year of the grant, 11 schools received a class set of 30 Walk4Life pedometers; 26 schools received these over the course of the grant. As an overall evaluation for



the grant, a questionnaire to determine the sustainability of policy and environmental changes as a result of grant funded interventions was sent out to the recipients of each award. All respondents reported continued use of the tools, indicating sustained activity. Recipients of the pedometers reported that students were more motivated to actively participate in physical education classes. All districts continue to use the sectionizers and provided favorable feedback on the ease of use and an observed increased in the consumption of cut up fruits and vegetables by school children.

Lead Poisoning Control Program

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

In 2010, the Lead Program continued its efforts to identify and provide case management for children with lead poisoning. This year, 11,194 children in Onondaga County were tested for lead poisoning and 169 children (1.5%) were found to have elevated blood lead levels. Although the prevalence continues its downward trend for the County, rates of lead poisoning in certain neighborhoods in Syracuse exceed 10% and rank among the highest in New York State.

A primary objective of the Lead Program is to increase the number of children who are tested at age 1 and 2 as required by New York State Department of Health (NYSDOH) regulations. A recent report indicated that over 92% of children in Onondaga County had at least one test before age 2. These numbers reflect the Lead Program's efforts over the past several years to notify parents when their child is in need of testing and the increased diligence by providers to meet the requirements.

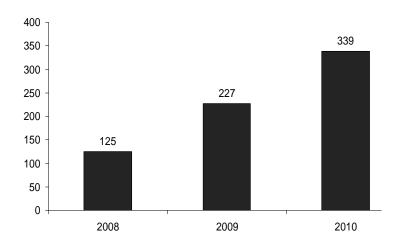
Door-to-door outreach is a critical component of the Lead Program's efforts to identify children affected by lead poisoning in high-risk areas of the city of Syracuse. During the summer of 2010, the Lead Program visited high-risk dwellings, resulting in one-on-one education being provided to 369 families with young children. Of the 73 children tested on the "lead bus" as a result of these efforts, elevated blood lead levels were detected in 22%.



This rate is considerably higher than the countywide rate, illustrating the importance of targeting outreach activities to specific high risk areas of the city.

The Lead Program continued work on a primary prevention grant from NYSDOH aimed at identifying and correcting lead hazards prior to a child becoming lead poisoned. This grant targeted areas of Syracuse where children are at the highest risk for lead poisoning. With this grant support, over 300 primary prevention lead inspections were conducted in 2010, almost three times the number of primary prevention inspections compared to the first year of the program.

Number of Primary Prevention Properties Inspected by Year



In addition to primary prevention inspections, the Lead Program's Environmental Health inspectors conducted 92 inspections of properties associated with children who had elevated blood lead levels, including 74 inspections associated with children with blood lead levels \geq 15 μ g/dL, as required by NYSDOH, and 18 inspections for children with blood lead levels between 10 and 14 μ g/dL.

In 2010, the Lead Program continued to subcontract with both the Onondaga County Community Development Lead Hazard Reduction Program and the City of Syracuse Lead

Program. Under this arrangement, the Lead Program conducts community outreach and health education, provides blood lead testing, and relocates families living in properties undergoing lead hazard reduction by these grant programs. Subcontract agreements were also initiated to provide access to training services for instruction on safely working with lead paint, as well as direct education and services to newly arrived refugee families.



Migrant Health

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

Program funding is provided through a New York State Department of Health Migrant and Seasonal Farmworker Health Program grant. This funding, combined with volunteer support and multi-agency collaboration, provides resources needed for program operation. To initiate



the year's activities, SUNY Upstate faculty and medical students teamed with Onondaga County Health Department (OCHD) nursing and outreach staff to hold the first clinic of the season on June 16, 2010. During the summer and fall, the Migrant Health program conducted 8 medical clinics and 3 influenza vaccination clinics serving 6 farms in Onondaga County. As a result, 107 farm workers received in-camp health care services, for a total of 157 visits.

The Migrant Health program continued to coordinate with Oswego County Opportunities, Finger Lakes Migrant Heath Care Project, Syracuse Community Health Center and other local 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 OCHD provided migrant workers with ongoing health education, advocacy, referral, transportation, and interpretation services for follow-up medical, dental, and community service appointments.

The OCHD nurses and volunteers collaborated with the NYSDOH Immunization Program to provide migrant workers with immunizations during in-camp visits. The Migrant Health program partnered with the Central New York Council on Occupational Safety and Health and the Central New York Occupational Health Clinical Center to conduct in-camp group and individual education, respectively, on ergonomics and other occupational health topics.

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.

Public Health Education

The Public Health Education team works on a variety of initiatives to increase public awareness about local health issues, programs, and events. The Public Health Education team planned and implemented numerous initiatives aimed at enhancing the health of Onondaga County residents.

In 2010, activities included conducting media campaigns utilizing billboard, radio, television, and print media; instituting outreach events to increase the awareness of health programs and services; conducting focus groups to gain qualitative data for future program planning; designing health education materials to target priority populations using low-literacy principles; and networking with area businesses, faith based agencies, and community based organizations for promotion and education initiatives.



In 2010, the Public Health Education team:

- Was awarded funding by the NYSDOH for the "Creating Healthy Places to Live, Work, and Play" grant. The goal of the Creating Healthy Places to Live, Work, and Play initiative is to develop programs that will prevent obesity, type 2 diabetes, and other chronic diseases in Onondaga County.
- Worked cooperatively with community members to plan, develop, and launch multiple Farm Fresh Mobile Market locations. This initiative offers fresh vegetables and fruits at targeted city of Syracuse locations to enhance access to locally grown produce.
- Worked consistently with the local media to provide accurate and timely information about program resources and prevention messages about public health issues such as immunization, pertussis, influenza, and mosquito borne disease.
- Launched social marketing campaigns with select programs such as "Colleges for Change" and with the Onondaga County Cancer Services Program. These pilot campaigns will become the foundation for future promotion utilizing social marketing.
- Updated the OCHD website to offer seasonal health tips to provide prevention messages that support health-enhancing behaviors.
- Successfully transitioned the role of lead agency for the Safe Kids Greater Syracuse Coalition to the Upstate Golisano Children's Hospital. This mission of Safe Kids USA, the parent agency, is to prevent accidental injury and death to those children under the age of 14 years.

Tobacco Control Programs

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.

2010 TFOC activities:

- The 4th Annual Tobacco Control Partners of Onondaga County Recognition Event, recognizing numerous community leaders for their contributions toward tobacco control in Onondaga County, was held.
- The Young Lungs at Play initiative, which included a multi-media campaign combined with strong community education efforts, lead to all municipal parks and playgrounds throughout Onondaga County implementing smoke-free parks and playground policies. Onondaga County is the first county in New York State to have all municipalities implement these policies.
- The 2010 Adult Community Survey was conducted. Survey results are utilized in planning future activities related to program initiatives.



■ TFOC participated with tobacco control programs statewide and the American Cancer Society to conduct events for the Great American Smokeout. TFOC collaborated with the Reality Check Program and other local partners to implement retail store observations on tobacco product marketing. The information gathered was highlighted during the 2010 Great American Smokeout press conference held at Great Northern Mall, one of several press events held in collaboration with the American Cancer Society and Statewide Tobacco Control partners.

Advocacy in Action - Colleges for Change

Colleges for Change (C4C) began in July 2009. The C4C program is a NYSDOH program administered by the Onondaga County Health Department. C4C works in partnership with Syracuse University and SUNY Cortland to strengthen tobacco-related policies to prevent and reduce tobacco use and limit opportunities for exposure to secondhand smoke. The program engages young adult leaders to work on and off the college/university campuses to limit where and how tobacco products are promoted, advertised, and sold, and to advance local and statewide policy action to prevent and reduce tobacco use. Colleges for Change initiatives are part of the New York State Tobacco Control Program's efforts to implement evidence-based and promising strategies to prevent and reduce tobacco use.

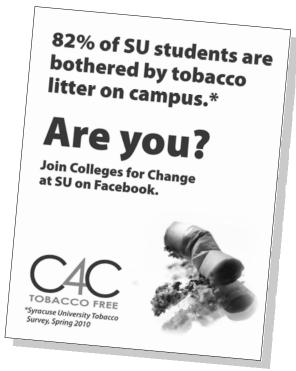
This program has the potential to impact a combined total of over 26,000 students and 6,000 employees at Syracuse University and SUNY Cortland.

In 2010, Colleges for Change:

- C4C contracted with Joel Lalone to conduct college surveys for students and faculty/ staff at Syracuse University and SUNY Cortland. Survey results are utilized in planning future activities related to program initiatives.
- C4C worked with the Director of Greek Life at Syracuse University regarding incorporating a ban on fraternities/sororities from accepting tobacco sponsorship and promotion. This ban was incorporated into the new Fraternity and Sorority Event

Management Guidelines and Community Expectations document. The policy includes language C4C provided and covers all 51 fraternities and sororities at Syracuse University.

C4C coordinated a presentation by Colleges for Change contractors at the New York State College Health Association Annual Conference. The presentation outlined strategies for college health professionals as they work with their respective college/ university campuses in an effort to create a tobacco-free campus policy.



Division of Maternal and Child Health Healthy Families

The Division of Maternal and Child Health (MCH) comprises the Bureau of Community Health Nursing, Special Children Services, Immunization Action Plan, Syracuse Healthy Start, and the Women's, Infants, and Children (WIC) Program. The Division of MCH, now known as "Healthy Families" provides services to new moms, babies, and families in Onondaga County under a unified system.

In February 2010, OCHD Division of MCH, under the New York State Department of Health (NYSDOH) Healthy Mom-Healthy Babies Grant, enlisted a contractor, Robert Schaffer & Associates, to provide professionally facilitated community planning workshops. The contractor assisted OCHD and key MCH partners with identifying strategies to rapidly improve key perinatal indicators through capacity building and organizational realignment, and support the adoption of a universal prenatal screening tool by obstetrical medical providers. The planning culminated in a two-day Work Out meeting attended by 50 key MCH community partners. Team Leaders divided the Work Out group into four smaller Issue Teams, each tasked with focusing on specific short term problematic areas and goals. The following are the four Issue Teams focus areas:

- Increase referrals of high risk pregnant women during prenatal period (AP)
- Increase number of home visits and acceptance of AP services
- Education and outreach in community-increase actual number of referral sources- promote cultural sensitivity-improve home visiting image
- Improve prenatal risk screening (among OB providers and Medicaid Managed Care Providers).

June 2010 brought to fruition much Work Out progress including a newly developed user-friendly program name and logo for home visitation services—"Healthy Families"— with revised visiting protocols and strategies aimed to achieve improved perinatal outcomes. The Division of MCH changed its name to the more



consumer-friendly, "Healthy Families." New strategies, including the creation of a Facebook page, have been instituted to engage potential clients.

Several immediate positive outcomes resulted from this process. Children's Division at the Department of Social Services now routinely refers pregnant women and those with children under age two to Healthy Families. University Health Care Center, serving a large percentage of high risk pregnant women living in Syracuse, dramatically increased the number of women referred to Healthy Families. Existing referral sources have been reintroduced to Healthy Families, and a number of new sources have joined this initiative. Community agencies, including the Center for Community Alternatives, the Determination Center, the Syracuse Literacy Zone, the Salvation Army's Preventive Services and Family Place, Vera House, the Children's Consortium, and the Mary Nelson Youth Center are working with Healthy Families in the community to locate pregnant and parenting families in need of services.

The MCH website, onhealthyfamilies.com, had a total of 4,465 hits in 2010.

The Bureau of 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). While all pregnant women in Onondaga County are eligible to receive services, the Bureau focuses efforts 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 made to some of our most vulnerable residents including incarcerated women and their infants, children with elevated blood lead levels, and families who have

experienced a sudden unexpected infant death.



In 2010, CHN received a total of 1,895 referrals for its entire preventive nursing services and provided 1,730 clients with 4,887 home visits. Under the various home visitation programs, clients received health assessments, case management, health teaching, and referrals to community resources such as drug, alcohol, and/or mental health counseling.

CHN comprises several programs that target the complex needs of at-risk prenatal, postpartum, and newborn/infant clients throughout Onondaga County. The following programs include both home visitation and clinic services.

Nurse-Family Partnership

The Nurse-Family Partnership (NFP) is a collaborative venture between the Onondaga County Departments of Health, Mental Health, and Social Services to provide an intensive, evidence-based, nurse home visitation program to low-income, first time moms throughout Onondaga County. The OCHD NFP, based upon the Nurse Home Visitation Program developed by Dr. David Olds, is one of over 300 such NFP sites across the United States. NFP has provided evidence for numerous short- and long-term socioeconomic benefits for family participants. The OCHD NFP program began enrolling first-time moms in May 2007. In 2010, the NFP served 143 moms and families and 111 infants. Eighteen mothers and their two year olds graduated from the NFP program in 2010.

Family Life Team

The Family Life Team (FLT) program is a collaborative effort between the OCHD Bureau of CHN, the Syracuse City School District (SCSD), and Syracuse Community Health Center's Comprehensive Medicaid Case Management (CMCM) program. The Family Life Team program offers preventive nursing and case management services to all identified pregnant and parenting students in the SCSD schools. In the 2009-2010 school year, 89 out of 115 (77%) identified pregnant students were provided with ongoing nursing and/or case management services. In 2009-2010, FLT

nurses were also available to assist any atrisk student with education and referrals for community services including pregnancy prevention resources and Sexually Transmitted Disease (STD) prevention and treatment services.

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

The Early Intervention C.A.R.E.S. (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 to community resources for infants who are atrisk for developmental delays. In 2010, there were 278 cases referred for Early Intervention C.A.R.E.S. nurse home visits.



Immunization Action Plan

Across New York State, the three primary goals of the Immunization Action Plan (IAP) are to ensure 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 New York State Immunization Information System (NYSIIS). In keeping with program goals, Onondaga County's IAP conducted the following activities in 2010:

- Promoted National Infant Immunization Week using multiple media outlets, including the development of a television commercial to highlight the importance of infant immunizations. Radio ads were also run to encourage parents to talk to their health care provider for reliable immunization information. As part of National Infant Immunization Week, an award was presented to a local pediatrician with excellent immunization rates.
- Conducted education and outreach to promote influenza vaccination for everyone over 6 months of age.
- Enhanced education about pertussis and the benefits of vaccination following an increase in reported pertussis cases. Targeted educational materials were developed and distributed to new parents and families of school aged children.
- Continued collaboration with the Syracuse City School District (SCSD) and the Refugee Assistance Program to establish a system to assist refugee families in receiving their required immunizations in a timely manner. This involved educating SCSD staff on the use of NYSIIS and the current immunization schedule and facilitating vaccinations at the OCHD Immunization clinic for those in need.
- Continued to collaborate with health care providers and schools regarding NYSIIS recordkeeping and vaccine storage and handling.

In support of the Immunization Action Plan, the OCHD holds a weekly immunization clinic at the Dr. William A. Harris Clinic on Slocum Avenue in Syracuse for children 2 months of age through 18 years, and adults who are full-time students. In 2010, the clinic provided vaccines for 971 children and 364 adults. Most of the individuals receiving vaccines were underinsured and/or without a source of medical care.

Beginning in April 2010, OCHD held twice monthly immunization clinics at the Refugee Assistance Program (RAP), providing vaccines to newly arriving refugee children in response to contractual programmatic changes with RAP. In 2010, 312 refugee children were vaccinated at the RAP immunization clinics by OCHD staff.

Special Children Services

Special Children Services (SCS) comprises Early Intervention (EI), Preschool Special Education, and Children with Special Health Care Needs. Each program works closely with the local community to ensure appropriate services and resources are provided to eligible

children with special needs and to the families

of these children.

Early Intervention Program

The Early Intervention (EI) 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 a diagnosed condition with a high probability for developmental delay. In 2010, Early Intervention received 1,375 referrals for EI services with 614 infants/children enrolled at year-end.

- Because of a regulatory change which took effect on 12/31/2010, individual itinerant providers can no longer deliver Early Intervention services. All services are provided by agencies approved by NYSDOH.
- Use of electronic evaluation scheduling for EI children has proven to be an efficient way to manage flow and meet state timelines.
- Staff responded to new EI regulations regarding the transition process between EI and Preschool Special Education services by revising forms and procedures.



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. Twenty-two local school district Committees on Preschool Special Education (CPSE) authorize Preschool Special Education Services. Onondaga County Health Department staff

may serves as County representatives to CPSE, providing assistance to families and CPSE chairpersons. In 2010, the Preschool Special Education Program:

- Continued to work with agencies, evaluators, and CPSE chairs to enhance communication, promote consistency, and streamline the transition process between Early Intervention and Preschool programs. The Early Childhood Direction Center is a major partner in this process, and facilitates monthly meetings with CPSE chairs, approved evaluators, and the longstanding provider group, the CNY Coalition for Young Children with Special Needs. These meetings have fostered greater partnership among the participants.
- Worked with the OCHD Compliance Officer to introduce providers to major changes in training requirements and documentation necessary to claim Medicaid reimbursement through the Preschool Supportive Health Services Program. These changes were a result of the audit settlement between NYS and the federal government and were retroactive to September 2009.

2010 Preschool Statistics:

- Children enrolled in June 2010 (end of 2009-2010 school year): **1,832**
- Children enrolled in 2010 summer session: **1,394**
- Children enrolled at year-end (12/10): **1,477**

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 and identifies resources to obtain necessary health services, including specialty care providers, related health care services, and health insurance. The Children with Special Health Care Needs program is a New York State Department of Health (NYSDOH) grant-funded program, administered by the OCHD through a subcontract with Exceptional Family Resources (EFR), a private non-profit community agency that provides a range of services and referrals for families who need support in caring for a child with significant special needs. In the 2009-2010 grant year, the CSHCN program:

- Provided information and referral services to 100 families.
- Participated in community fairs to increase the visibility of CSHCN, including local schools and businesses.
- Continued to distribute *The Parent Notebook*, a tool developed by the CSHCN Project Coordinator and fourth year medical students to assist parents in coordinating their child's ongoing records and maintain notes for medical and specialty care needs.

Syracuse Healthy Start

Syracuse Healthy Start (SHS) is a federally funded program that began in 1997. SHS facilitates the provision of maternal and child health services to residents of the city of Syracuse. The focus of this grant is on the elimination of health disparities in the community with an overarching goal of reducing infant mortality and poor birth outcomes. The program promotes healthy pregnancies and healthy babies through community partnerships, community referrals, health education, case management, and home visiting. Specific program activities include intensive case finding, one-on-one and community education,

home visiting for pregnant and postpartum women, and referrals to other OCHD resources such as WIC and Family Planning. In 2010, SHS provided services to more than 1,100 women.

Website

The new website, onhealthyfamilies.com, was created and launched in October 2009. The website features an overview of all the services offered by Healthy Families, a Resource Directory, News, Links, and a Document Library. The website allows families to request assistance through webbased referral form. Families are now able to request information and assistance around-the-clock. During 2010, the site received 4,465 unique hits.

Teen Pregnancy

In 2010, Syracuse Healthy Start partnered with multiple agencies in the spring to hold a Teen Pregnancy Forum. The forum brought teen girls, teen boys, and service providers

together to talk about teen pregnancy in the community and to discuss possible ways to decrease the teen pregnancy rate. Seventy-seven teens and service providers attended. As a result of the forum, a teen support group was started at Corcoran High School. In the fall, SHS collaborated with Community Based Adolescent Pregnancy Prevention program and invited teens that attended the forum to attend the screening of "The Gloucester 18: The Realities of Teen Pregnancy." Following the movie screening, a panel discussion was held.

Safe Sleep

In response to the 2009 community-wide media campaign, "Give your baby some space. Share the room. Not the bed," SHS was contacted by the NYS Center for SIDS at Stony Brook requesting permission to adopt the safe sleep materials for statewide distribution. This campaign continued through 2010. The materials for this campaign were further disseminated through the National Association of County and City Health Officials (NACCHO)'s Maternal, Child, and Adolescent Health (MCAH) Toolkit, to be utilized by other local health departments.

In 2010, OCHD developed an arrangement with the Onondaga County Department of Social Services (DSS) whereby SHS participants who are receiving public assistance and who do not have a safe crib/safe sleep environment for their new infant receive additional funding from DSS to purchase a crib. Additionally, DSS formally adopted into practice the requirement of staff to evaluate all sleep environments with all newly referred Child Protective Services cases that involve a child under the age of one year. This close collaboration between county departments developed during OCHD's safe sleep initiative in 2009.

Tobacco Cessation

Center for Maternal and Child Health (C-MATCH) continues to offer provider education in the Syracuse area. Presentations were conducted through two different venues: group education (grand rounds to both Pediatricians and OB/GYN providers); and one-on-one education to providers (in-service to provider offices, clinics, and partner agencies on chosen topics). In 2010, two grand rounds presentations were held for OB/GYN providers on the smoking cessation project, motivational interviewing, and implementing the "5 A's" approach with patients.

Health Education

SHS health education has continued to grow to new sites throughout the City. Five new sites were added through the collaboration with the Syracuse City School District Literacy Zones. In 2010, a total of 73 sessions were held reaching 542 people.

Consortium

The SHS Consortium collaborated with the March of Dimes to host an evening event during Prematurity Awareness Month. Dr. Robert Hingre from Upstate Medical University spoke on "Care for Late-Preterm Infants," which provided an overview of health challenges that late-preterm infants face. The event was held at McKinley-Brighton School and 57 people attended.

The Community Health Worker Program

The Community Health Worker Program (CHWP) is part of Healthy Families and provides outreach, case management, and advocacy to pregnant and parenting families in Onondaga County. Community Health Workers (CHWs) target families who are at highest risk of a poor birth outcome. CHWs assist with access to needed medical and social services while offering education and referrals that support families in having healthy babies and raising healthy children. The CHWP is a New York State Department of Health (NYSDOH) grantfunded program, administered by OCHD via a subcontract with The Salvation Army. In the 2010 grant year, the CHWP received 677 referrals and served 330 clients through 2,948 home visits.

Women Infants and Children

The Special Supplemental Nutrition Program for Women, Infants and Children (WIC) is a federally funded program sponsored locally by the Onondaga County Health Department (OCHD). WIC program participants receive nutrition education, supplemental foods, and referrals for health care services. The WIC program continues to focus on providing nutritious foods and nutrition education to program participants. In 2010, the WIC program:

- Served an average of 10,379 participants per month
- Developed and implemented the enhanced Breastfeeding Peer Counselor Program. WIC Peer Counselor Programs are recognized by the Centers for Disease Control and Prevention (CDC) as effective evidence-based interventions to support breastfeeding. Peer Counseling Programs are among the strategies that represent cost effective, individually-tailored and culturally competent ways to promote and support breastfeeding. Under this program, WIC trained three Breastfeeding Peer Counselors and assigned caseloads of over 100 prenatal WIC women to each.
- Saw an increase from 55.1% to 58.1% breastfeeding initiation rate among women participating in WIC.
- Expanded the on-site Mobile Farmer's Market to twice weekly, improving access for WIC participants to fresh fruits and vegetables.
- Enhanced WIC clinic services by streamlining clinic flow and making improvements to the clinic environment including murals in both permanent WIC clinic sites done by local artists.
- Moved the Bayberry WIC clinic site to a nearby location and enhanced clinic environment to better meet the needs of WIC participants in the Northern part of Onondaga County.

In 2010, of the WIC program participants:

- 24% were women, 26% were infants, and 50% were children
- 58.1% of women who certified for WIC after delivery initiated breastfeeding

In 2010, of the WIC prenatal population:

- 42% were certified within their first trimester of pregnancy
- 44% were certified within the second trimester of pregnancy and
- 14% were certified within the third trimester of pregnancy

WIC Vendor Management Agency

The WIC Vendor Management Agency (VMA) oversees approximately 294 authorized WIC vendors in a 14 county region. WIC VMA is responsible for ensuring vendor compliance with both New York State and federal regulations governing the WIC program.

During 2010, the WIC VMA increased vendor outreach efforts to both chain and independent stores. Forty new vendor applications were reviewed in an effort to ensure that WIC participants have adequate access to vendors. The VMA WIC staff processed new applications for the transition/purchase

of the 31 P&C stores that were converted to Tops and

Price Chopper stores within the region.

In the beginning of 2010, the NYSDOH directed VMA agencies to conduct Local WIC Agency training as part of an information sharing initiative. The VMA staff created PowerPoint training materials and conducted a total of 13 local agency trainings.

In 2010, WIC VMA staff conducted 44 training sessions and more than 247 site visits to monitor vendors. Over the course of the year, WIC VMA identified over 800 WIC vendor violations and saw to their correction. The WIC VMA also received and resolved more than 237 vendor-related complaints throughout the year.

Public Health Preparedness

2010 Highlights

- In October, Public Health Preparedness conducted its fifth annual drivethrough seasonal flu clinic for first responders. This year, 692 fire, police, emergency medical services (EMS), and emergency communications personnel were vaccinated. The amount of time participants spent in the clinic averaged between seven and nine minutes; significantly less than the average time spent at walk-in flu clinics. The 2010 drive-through clinic was held at a new location, the NewYork State fairgrounds. This allowed us to test our ability to conduct a clinic at a venue not previously used for this purpose. The size and set-up of the fairgrounds made it an ideal location to stage a mass vaccination effort in the event of a public health emergency.
- The Central NewYork Medical Reserve Corps (CNYMRC) continued to grow and strengthen its volunteer membership. Volunteers developed skills necessary to assist during emergencies by working alongside county departments at training exercises such as the drive-through flu clinic and the Radiological Reception Center. Volunteers assisted with flu vaccination clinics in four counties, and with volunteer recruitment efforts at the NewYork State Fair. One CNYMRC volunteer was chosen from hundreds of applicants to attend federal deployment training.
- In October, the Onondaga County Health Department and the Onondaga County Department of Emergency Management presented a regional conference titled Children in Disasters. Over 100 stakeholders from more than 34 organizations attended the conference, which addressed the medical, emergency management, psychological, and risk communications aspects of preparing for, responding to, and recovering from emergencies that involve children and their caregivers.

The objectives of Public Health Preparedness are to plan, prepare, and respond to public health emergencies, natural or man-made. Public Health Preparedness staff members work with local, regional, State, and Federal partners to anticipate, manage, and mitigate such threats.

The Onondaga County Health Department continues to update all Public Health Readiness Plans. These comprehensive plans strengthen the Department's ability to protect the health and well-being of Onondaga County residents during disasters and ongoing public health crises.



Surveillance and Statistics

2010 Highlights

- Collaborated with the Division of Maternal and Child Health to develop measurable outcomes and analyze data for the Healthy Mom-Healthy Babies grant.
- Maintained inventory of influenza vaccine and participated in planning for community-based vaccination clinics.
- Provided statistical support for the evaluation of infectious disease outbreaks.
- Supported program staff in grant applications to enhance public health services in Onondaga County.

The Bureau of Surveillance and Statistics monitors the health status of Onondaga County by analyzing and interpreting statistical information about local illnesses, deaths, and their associated risk factors. During 2010, Bureau staff members fulfilled 90 requests for local health statistics, many of which 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 2010, the Office of Vital Statistics issued 22,531 birth certificates and 28,927 death certificates.

Volunteer Services

Volunteer Services program 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.

This year, health department volunteers and interns provided **4,487.50** hours of service to the residents of Onondaga County. This service represents a donation of time valued at **\$77,312.95**.

Volunteers assist at some of the health department's most widely known and utilized programs, including Influenza and Pneumonia Vaccination Clinics, Rabies Vaccination Clinics, and the Hypertension Screening and Education Program.

This year volunteers also supported the Health Department by assisting in such diverse activities as:

- Repackaging over-the-counter medications and lancets for the Correctional Health Program at the Justice Center
- Drawing blood for prostate cancer screening as a part of a larger community assistance initiative
- Driving the "Lead Mobile" to targeted neighborhood locations to test children for elevated blood levels of lead
- Assisting forensic investigators at the Medical Examiner's Office



- Conducting compliance checks under the Adolescent Tobacco Use Prevention Act
- Providing nursing and interpreting services at health clinics for migrant workers
- Filing, collating, photocopying and providing general clerical assistance to a variety of programs and projects
- Assembling packets of forms and information needed by Maternal/Child Health nurses and outreach workers in opening new cases
- Providing advisory assistance on environmental and environmental health issues as part of the Council on Environmental Health

Volunteer and Intern Hours Served, 2006-2010

	Volunteer Hours	% of Total	Intern Hours	% of Total
2006	2,245.75	25%	6,912.75	75%
2007	2,339.75	35%	4,335.00	65%
2008	2,158.50	49%	2,229.25	51%
2009	2,593.75	42%	3,583.00	58%
2010	2,359.50	53%	2,128.00	47%





The figures below represent what it would have cost the county to hire and pay workers to perform the same jobs that were completed 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 costs such as benefits.

Value to the Community, 2006-2010

	Volunteer/Intern Hours Served	Value to Onondaga County
2006	9,158.50	\$150,466.34
2007	6,674.75	\$120,420.75
2008	4,387.75	\$81,592.77
2009	6,176.25	\$110,065.25
2010	4,487.50	\$77,312.95

The Wallie Howard, Jr. Center for Forensic Sciences

2010 Highlights: Forensic Laboratories

- The Firearms Section was recognized by the ATF for a major milestone in 2010 and was presented with a plaque for surpassing 500 "hits", matching firearms evidence to crimes through the use of the National Integrated Ballistics Information Network (NIBIN) database. According to the September 2010 NIBIN statistical report, Onondaga County ranked 23rd out of 246 participating sites, for the number of confirmed "hits" in the database. Even more importantly, the section maintains a "hit" matching success rate more than twice the national average. The firearms section of the Forensic Laboratories has achieved tremendous success over the past several years with high quality analysis, fast case turnaround, and a significant reduction in backlogged cases.
- The Forensic Laboratories fully implemented the new countywide evidence tracking/laboratory information system to streamline case communication between police agencies, the District Attorney's Office, and the laboratory. The benefits of this new electronic system include increasing the efficiency of the laboratory and enhancing the coordination between agencies by standardizing the submission of evidence, reducing the amount of time laboratory staff spends responding to examination status requests, and improving lab case management and prioritization of cases, all while providing real time analysis results to the criminal justice community.

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, 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 **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 the crime scene was fired from a particular firearm. To make this determination, examiners conduct test fires with the gun in questions 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. Target data may be in the form of text, photographs, video, audio or any combination thereof.

Forensic Biology/DNA

The Forensic Biology/DNA section 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 for DUI/DWI and drug facilitated sexual assault investigations conducted by law enforcement agencies.

Laboratory Cases Completed by Section for 2010

Arson	32
Digital Evidence	23
Drug Identification	40
Firearms	80
Forensic Bio/DNA	35
Latent Prints	85
Toxicology	89
Trace Evidence	78

Medical Examiner's Office

2010 Highlights

- The Porter Lee BEAST database system was successfully implemented, moving the Medical Examiner's Office to an electronic case file system and integrating the office with the rest of the Center for Forensic Sciences labs and county-wide evidence tracking system.
- The Medical Examiner's Office was awarded \$175,000 in Paul Coverdell Forensic Science Improvement grant funds to purchase a tandem Mass Spectrometer to interface with existing Liquid Chromatography equipment in the Forensic Toxicology laboratory and training funds for OCMEO staff. Funds will improve toxicology and forensic pathology report turnaround time and provide continuing education opportunities for OCMEO staff required to meet National Association of Medical Examiners (NAME), American Board of Pathology (ABP), and American Board of Medicolegal Death Investigation (ABMDI) standards.
- Investigators Joseph Lisi and Matthew Kelly achieved board certification status by the American Board of Medicolegal Death Investigators.

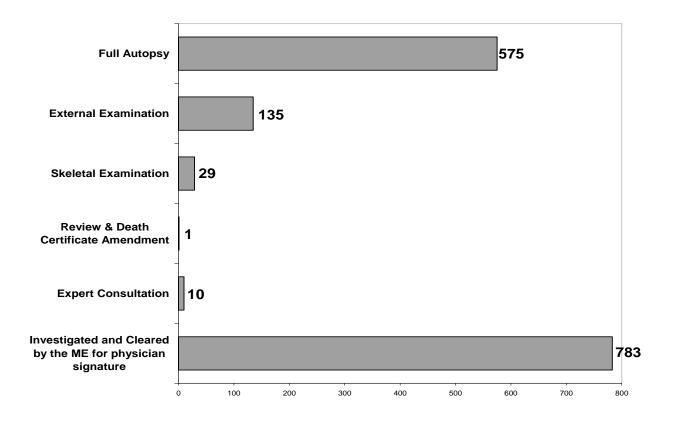
The Medical Examiner's Office (MEO) determines the cause and manner of death in sudden, unexplained, and unnatural deaths in Central New York (CNY) including Onondaga, Cayuga, Jefferson, Lewis, Madison, Oswego, Otsego, Seneca, St. Lawrence, and Tompkins counties. The MEO uses forensic medicine and death investigation skills to recognize and collect evidence for potential use in the criminal justice system and civil litigation. The MEO also helps protect public health by identifying communicable diseases and unsafe environmental conditions that put people at risk for poor health outcomes. 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. In 2010, 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.

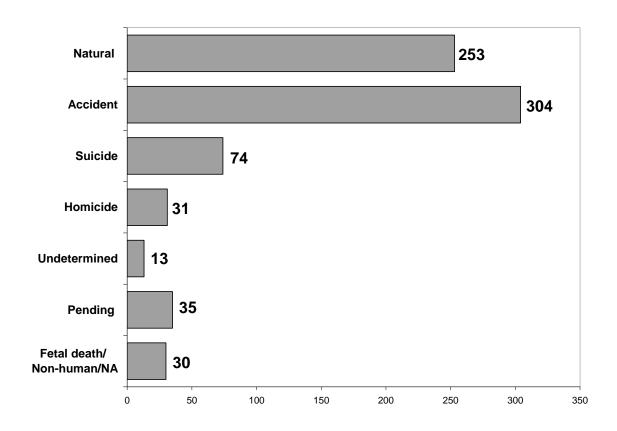
The MEO regularly participates in community public education. Each year, forensic investigators conduct presentations for a number of local middle schools and high schools to educate youth about forensic pathology and medicolegal death investigation. The MEO provides internship opportunities for college-level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

In 2010, 1,533 cases were reported to the Medical Examiner's Office, of which 224 cases were from surrounding counties. (Please see chart below for total cases by category.)

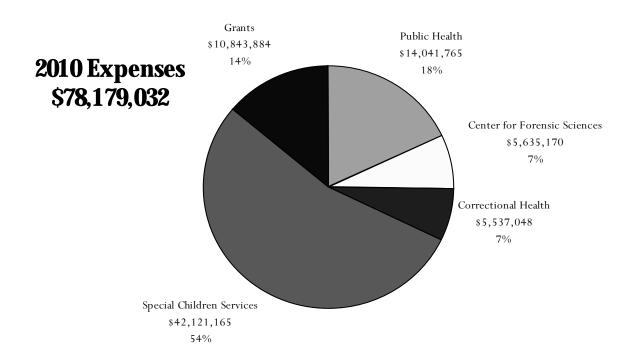
Medical Examiner's Office, 2010 Cases by Disposition [n=1,588]

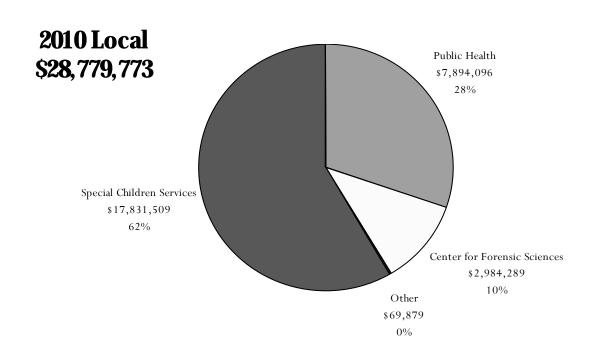


2010 Medical Examiner Cases by Manner of Death [n=740]



2010 Expenses and Local Dollars





Grant Projects, 2010	Expense/Revenue	
Administration		\$1,181,666
Regional Epidemiology	\$5,509	
■ Public Health Preparedness	\$660,571	
■ Facilitated Enrollment	\$479,324	
■ Other	\$36,262	
Disease Control		\$667,342
■ HIV/AIDS/STD	\$436,510	
■ Tuberculosis	\$230,832	
Environmental Health		\$392,091
Health Promotion & Disease Prevention		\$2,524,830
■ Obesity	\$200,979	
■ Cancer Screening Services	\$575,137	
■ Lead	\$1,181,963	
■ Tobacco	\$566,751	
Maternal & Child Health		\$5,010,215
■ Eliminating Disparities (Healthy Start)	\$964,945	
■ Immunization	\$284,021	
• WIC	\$2,711,555	
■ Early Intervention Program	\$435,871	
■ Children with Special Health Care Needs	\$46,118	
■ Community Health Worker	\$214,906	
■ Enhanced Perinatal Care	\$112	
 Healthy Moms/Healthy Babies 	\$352,687	
Center for Forensic Sciences		\$1,067,740
Total Health Department:	\$	610,843,884

