

NASSAU COUNTY
DEPARTMENT OF HEALTH



2015
ANNUAL REPORT

Edward P. Mangano
Nassau County Executive

Lawrence E. Eisenstein, MD, FACP
Commissioner of Health

Nassau County Department of Health • Annual Report 2015

Table of Contents

Letter from the Commissioner of Health.....	3
Nassau County Board of Health.....	5
Role and Responsibilities.....	5
Board of Health Membership Biographies.....	6
Department of Health Vision.....	8
Department of Health Mission.....	8
Division Highlights.....	9
Environmental Health.....	9
Communicable Disease Control.....	13
Tuberculosis Control.....	13
STD Control and HIV Partner Services.....	14
Community and Maternal Child Health.....	15
Quality Improvement, Epidemiology, and Research.....	18
Minority Health.....	19
Public Health Emergency Preparedness (PHEP).....	19
Communications and Health Information.....	21
Human Resources.....	21
Public Health Laboratories.....	22
Appendix A: Fiscal Year 2015 Charts.....	24
Appendix B: Notifiable Communicable Disease Chart.....	28

Letter from the Commissioner of Health

It is my great pleasure to present the 2015 Annual Report from the Nassau County Department of Health. During 2015, NCDOH successfully worked towards our mission of promoting and protecting healthy communities for all residents of the County. While there is long-standing public health work that is a routine part of a local health department's work, 2015 saw the first case of Ebola arrive on American soil. NCDOH responded by training and preparing an Ebola Response team, and participated in collaborative preparatory measures. Thankfully, no cases of Ebola came to Nassau County during 2015, but epidemiologic readiness is a hallmark of our work. Public Health Emergency preparedness remains a vital, life-saving component of NCDOH's work. Our Bureaus of Tuberculosis Control, Communicable Disease Control, and STD/HIV Control worked towards limiting spread of disease, and are ever vigilant. We continue to prepare for whatever Mother Nature will challenge us with next.

2015 also marked incredible growth of the Long Island Health Collaborative, of which NCDOH was a founding member. The joint initiative "Are You Ready, Feet" grew, and NCDOH hosted walking events which included many elected officials and community based organizations. Our academic partnerships also expanded, and we co-hosted our 2nd annual celebration of National Public Health Week at Hofstra University. Once again a Public Health Public Service Announcement film competition was an important part of the meeting, followed by our Minority Health Fair.

NCDOH achieved its 2015 objectives in an innovative and efficient manner. Various aspects of our work were enhanced electronically, with the changeover from paper to tablet in our inspection units, and our Early Intervention units. We continued to be an important voice in water safety and protection, and our Early Intervention, Pre-School, and WIC programs continued to impact and help produce healthy outcomes for children in Nassau County. Our innovation and thought leadership led to two national Promising Practice Awards from the National Association of City and County Health Officials (NACCHO).

We anticipate that in 2016 we will complete the work of applying for Public Health Accreditation, the culmination of years of work! Our pre-requisites are complete, and I look forward to sharing the good news of our application in the next annual report!

Overall, the 2015 challenges of NCDOH were well-met by our almost 250 public health employees, who all worked towards a healthier Nassau. I extend my gratitude to them,

Nassau County Department of Health • Annual Report 2015

our Board of Health, and the administration of County Executive Edward P. Mangano for continual support of our efforts. Enjoy reading about our accomplishments in 2015!

Sincerely,

A handwritten signature in black ink that reads "Lawrence Eisenstein". The signature is written in a cursive style.

Lawrence Eisenstein, MD, MPH, FACP
Commissioner



Nassau County Board of Health

Role and Responsibilities

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

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

The Board:

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

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

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

Board of Health Membership Biographies



Anthony Battista, MD, FAAP, attended Chaminade High School, earned a BS in Biology at St. John’s University, and received his medical degree from SUNY Brooklyn Health Science Centers. He did his training in Pediatrics at the Steven & Alexandra Cohen Children’s Medical Center in New Hyde Park. He practiced Pediatrics in Mineola for 24 years before moving his practice to Garden City in 2008. He is a member of the Nassau County Medical Society and the Nassau Academy of Medicine. He has served as President of the Nassau Pediatric Society and President of the American Academy of Pediatrics New York Chapter 2.

Ellen J. Braunstein, MD, is the present chair of the Nassau County Board of Health. She is a board-certified Neurologist practicing in Woodmere, Long Island. Dr. Braunstein is a Hofstra University Alumna and a graduate of Chicago Medical School. She spent her internship year in New York City at the Mt. Sinai Hospital/City Hospital Center at Elmhurst and continued her Neurology Residency training at North Shore University Hospital and the Memorial Sloan Kettering Cancer Center, where she attained Chief Residency status. Dr. Braunstein is involved in many medical community affairs. She is a fellow in the Nassau Academy of Medicine and past president of the Nassau County Medical Society. Through the Medical Society of New York State, she is a member of the House of Delegates and Budget and Finance Committee. She is an active member of the American Academy of Electrodiagnostic Medicine, the American Academy of Clinical Electrophysiology, and the former director of the Multiple Sclerosis Outpatient center sponsored by the National Multiple Sclerosis Society. Dr. Braunstein is an active participant of the American Academy of Neurology where she sits as a section member of multiple committees.



Nassau County Department of Health • Annual Report 2015



Abby Greenberg, MD, FAAP, has been a member of the Board of Health since December 2009. She was previously with the Department of Health for over 40 years, where she served as Acting Commissioner of Health in 2006 - 2007; 2000 - 2001; and 1993 - 1994. She began her career with the Department in 1968 as a pediatric clinician working in the Department's Community Health Centers. She then became, in subsequent order, Medical Director of the Plainview Health Center, Director of the Quality Assurance Program, Director of Special Children's Services, Director of the Bureau of Health Centers, Director of the Bureau of Infectious Disease Control, Director of the Division of Epidemiology, Director of the Division of Disease Control, Appointed Early Intervention Official for Nassau County, and Director of the Center for Public Health. Dr. Greenberg served a term as President of the Nassau Pediatric Society. She continues to be a member of the Medical Reserve Corps and New York State Department of Health Advisory Council on Lead Poisoning Prevention. Dr. Greenberg is also a pediatric medical expert for Social Security Administration pediatric disability.

Paul A. Pipia, MD, graduated from Archbishop Molloy High School, earned a BS and MS degree from Fordham University, and received his medical degree from SUNY Downstate Medical Center in Brooklyn. His internship training was at Staten Island University Hospital, and his residency in Physical Medicine and Rehabilitation was at NYU Medical Center. He is an attending physician at Nassau University Medical Center, where he was a member of the Board of Managers for eight years and served as Medical Director. Dr. Pipia is board-certified in Physical Medicine and Rehabilitation as well as Sports Medicine. He is currently an Assistant Professor and Division Chief of Physical Medicine and Rehabilitation at SUNY Downstate Medical Center. He is the Co-Director of the Muscular Dystrophy Association Clinic at Downstate Medical Center. He is a fellow in the Nassau Academy of Medicine and past President of the Nassau County Medical Society. Through the Medical Society of New York State, he is a member of the House of Delegates and Chair of the State Legislation and Physician Advocacy Committee. He is an honorary Vice-Chairman for the Toys for Tots program which is run by the United State Marine Corp.



Department of Health Vision

Vision

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

Values

- Integrity
- Professionalism
- Respect
- Dedication
- Innovation

Department of Health Mission

Mission

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

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

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

Division Highlights

Environmental Health

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

Bureau of Environmental Engineering

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

Engineering Plan Review 2015

ON-SITE SANITARY DISPOSAL	45
SWIMMING POOLS	81
PETROLEUM BULK STORAGE	102
REALTY SUBDIVISIONS	136
PUBLIC WATER SYSTEMS	552

Nassau County Department of Health • Annual Report 2015

Bureau of Environmental Investigation

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

Bureau of Environmental Investigations 2015

Lead Hazard Investigations	119
Air Quality Investigations	100
Residential Environment Investigations	1,821
Rodent Free Demolition Inspections	612
ATUPA Compliance Inspections	1,385
Animal Bite Investigations	1,076
Animal Specimens Tested for Rabies	222
Mosquitos Trapped	32,901
Mosquito Pools Tested for Arbovirus	598

Bureau of Environmental Protection

The Bureau of Environmental Protection is focused on the protection of drinking water resources and the regulation of public water supplies to ensure the public is safe from harmful contaminants that can be present in drinking water. The Petroleum Bulk Storage Program protects our groundwater resources through the regulation of heating oil and waste oil tanks (other forms of petroleum are regulated by the Nassau County Fire Marshal). The bureau registers facilities and tanks containing regulated quantities of petroleum products and conducts inspections to ensure that spills and leaks will not endanger the county's Sole

Nassau County Department of Health • Annual Report 2015

Source Aquifer for drinking water. The bureau also regulates the appropriate abandonment or removal of homeowner heating oil tanks. The Public Water Supply Program administers and enforces regulations for the production and delivery of safe drinking water to the county's residents. This program includes site inspections, the collection of public water supply samples and the review of water sample results to ensure that the water quality meets all federal and state standards.

Bureau of Environmental Protection 2015

Petroleum Storage Facility Permits Issued	510
Petroleum Storage Inspections	4,499
Freedom of Information Law Requests	1,389
Microbiological Drinking Water Samples Collected	1,668
Chemical Drinking Water Samples Collected	1,275
Public Water Supply Testing Results Reviewed	~250,000



Nassau County Department of Health • Annual Report 2015

Public Health Engineer, Sal Caruso, inspects a Public Water Supply treatment plant.

Bureau of Environmental Sanitation

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

Bureau of Environmental Sanitation 2015

Food Service Establishment Plan Reviews	218
Food Service Establish Permits Issued	5,829
Temporary Food Vendor Permits Issued	1,579
Food Service Establishment Inspections	13,000
Food Manager Training Certificates Issued	2,116
Food Service Compliance Conferences	386
Foodborne Illness Investigations	98
Recreational Facility Permits Issued	626
Pool Inspections	977
Beach Water Samples Collected	1,287
Temporary Residence Inspections	72
Body Artist (Tattoo and Piercing) Certifications Issued	60

Environmental Health Enforcement

The Division has a vigorous enforcement program to ensure that violations and hazards that may endanger public health are corrected. Owners and operators of facilities who

Nassau County Department of Health • Annual Report 2015

fail to correct violations are subject to a formal enforcement process presented before an Administrative Law Judge. In 2015, the Division initiated 186 cases and the Board of Health assessed \$272,200 in fines.

Communicable Disease Control

This Division protects the public from the spread of communicable diseases through education, surveillance, investigation, and intervention. Strategies to limit outbreaks include: education, post- exposure prophylaxis, immunization, recommendations, isolation, and quarantine. In 2015 the Division of Communicable Disease Control:

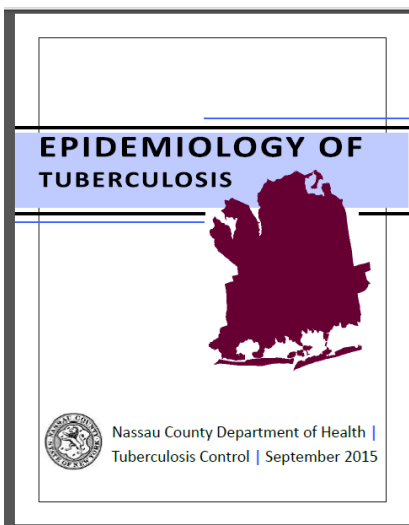
- Investigated 23,501 laboratory reports with case confirmation of 4171 communicable diseases including: the first case of Zika in New York State, dengue fever, encephalitis, meningococcal disease chikungunya, acute hepatitis A, acute hepatitis B, typhoid fever, shigellosis, mumps and an increased incidence of pertussis and legionellosis.
- Investigated and confirmed 9 human cases of west Nile virus disease with no deaths.
- Investigated 161 instances of vaccine preventable illness and responded to over 900 calls on the immunization hotline.
- Outbreak control activities included Ebola direct and active monitoring for 81 individuals twice daily 7 days a week, meningococcal disease with post exposure prophylaxis, mumps, hepatitis A with post exposure prophylaxis and legionellosis. Other outbreak control activities include Influenza, gastrointestinal illness and varicella in assisted living facilities, schools and group homes. An outbreak of giardiasis associated with multiple asymptomatic food handlers was investigated and contained. The abstract for the investigation was selected for presentation at the annual CSTE (Council of State Territorial Epidemiologists) conference in June 2016.

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

Tuberculosis Control

Nassau County's Division of Tuberculosis (TB) Control successfully monitors and manages the spread of tuberculosis, one of the world's deadliest diseases, through case management, Directly Observed Therapy (DOT), Skype Observed Therapy (SOT), contact

investigation, the immigrant program, education, consultation, isolation and quarantine.



Three metro area counties, Nassau, Suffolk, and Westchester, report approximately half of the cases of TB in the state, exclusive of NYC. Eighty-five percent of Nassau County cases are foreign born, comparable to NYS. In 2015, this Division:

- Investigated 3250 laboratory results and case managed 40 confirmed cases
- Provided DOT to 34 cases
- Investigated and followed up 308 identified contacts.
- Referred 13 immigrants for evaluation from the B1B2 program. This program identifies immigrants with potential TB infections and follows their treatment.
- Updated the health department website with current resources and information about tuberculosis in Nassau County.

STD Control and HIV Partner Services

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

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

In 2015, STD Control, HIV Partner Services and, Expanded Partner Services:

- Investigated 445 Syphilis, 3744 Chlamydia and 567 Gonorrhea cases.
- Investigated 161 cases of HIV. Each case was contacted and was offered assistance notifying his or her partners who might be at risk.
- Investigated 299 cases of out- of- care HIV positive. Each case was dispositioned and those who were truly not in care were offered assistance with re-linkage.

Community and Maternal Child Health

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

Early Intervention (EI)

The Early Intervention Program offers a variety of therapeutic and support services to eligible children and their families. To be eligible for services, children must be less than three years of age and have a confirmed disability or established developmental delay, as defined by the State, in one or more of the following areas of development: physical, cognitive, communication, social-emotional, and/or adaptive. Typical services include speech therapy, physical therapy, occupational therapy, special instruction, and parent training. In 2015, the Early Intervention Program received 4,438 referrals, mostly from parents, families, pediatricians, and other providers. A total of 7,049 children were served throughout the year, and 3,863 cases were closed.

Child Find

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

Nassau County Department of Health • Annual Report 2015

Early Intervention transfers, Childhood Lead Poisoning Prevention Program, Foster Care, Child Protective Services, parents, and healthcare providers.

Preschool Special Education Program

The Preschool Special Education Program is designed for three and four year old children who have been determined by their school district to have a disability based on a multidisciplinary evaluation. This program is administered by the child's local school district with oversight and guidance from NYS Education Department.

The Preschool Program staff meets with the regional division of the NYS Education Department approximately every two months to discuss current issues. County presence at school district meetings is routinely accomplished by the attendance of municipal representatives.

Preschool staff participated in a Regional Forum and follow up workgroups on Least Restrictive Environments, which culminated in a Regional Forum training for families, professionals, special education preschools as well as typical preschool in 2015.

Physically Handicapped Children's Program (PHCP)

The Physically Handicapped Children's Program (PHCP) provides financial assistance to eligible families of children from birth to age twenty-one who meet medical and financial guidelines. Nassau County offers two components of PHCP: the Diagnosis and Evaluation program and the Treatment/Medical program, where the financial eligibility guidelines are 200% above Federal Poverty level. PHCP makes available comprehensive medical, surgical, and rehabilitative services to children diagnosed with a chronic illness or physically handicapping condition.

Child Fatality Review Team (NCCFRT)

The Nassau County Child Fatality Review Team (NCCFRT) is a multidisciplinary team created to review fatalities of Nassau County residents, age 0-17 years, whose death is unexpected or unexplained. The mission of the NCCFRT is to review cases to better understand the causes of these deaths and to make recommendations to reduce future child fatalities based on the team's findings. In 2015, the team reviewed 10 cases and developed recommendations and interventions based on the reviews conducted. Activities in 2015 included: creating a model safe sleep zone at a local birthing hospital which included the display of a full size crib and educational information; Cribs for Kids-

Nassau County Department of Health • Annual Report 2015

Nassau County continued to apply for grants to secure funding for cribs, trained additional recruited partner agencies (Visiting Nurse Services of NY, WIC staff & Early Intervention staff); and delivered 5 cribs to families on need. In addition, a suicide prevention letter to approximately 900 Nassau County pediatricians was mailed; issued a Halloween Safety press release.

Childhood Lead Poisoning Prevention Program (CLPPP)

The Childhood Lead Poisoning Prevention Program (CLPPP) identified 56 new children with blood lead levels ≥ 10 mcg/dl in 2015. Program staff followed a total of 109 (new and ongoing) children with elevated blood levels throughout the year. The CLPPP provided case management services, environmental investigations, and referrals to other services

Women, Infants, and Children Program (WIC)

The Women, Infants & Children Program (WIC) provided food vouchers, breastfeeding support through our breastfeeding peer counseling program and nutrition education for eligible pregnant/post-partum women, infants and children. In 2015, the program began transitioning from five WIC sites to two; Elmont and Roosevelt sites were transitioned to a new WIC agency. WIC served on average more than 10,000 participants in 2015. The program also collaborated with the Cribs for Kids Initiative to promote safe sleep and provide cribs to low income families. In 2015 the outreach staff received the necessary training to provide three cribs to WIC families. The program collaborated with community based organizations, Medicaid Managed Care Plans and Early Intervention's Screen for Success Initiative to promote access to health and human services, health insurance and screening for developmental delays. WIC sites launched the automated appointment reminder system called "One Call Now" to remind participants of their appointments through text and voice messages.

Perinatal Services Network

The Nassau County Perinatal Services Network (NCPSN) is an organization of more than 40 community-based partners. The Network's ongoing mission is to decrease infant mortality and improve birth outcomes in Nassau County. In 2015, a key focus of the network was to promote awareness and to train health and human service providers on

Nassau County Department of Health • Annual Report 2015

the importance of screening for Perinatal Mood and Anxiety Disorders (PMAD). As such, the network participated in the Long Island Screening Day for Perinatal Mood and Anxiety Disorders to promote awareness, encouraged screening by health providers, and provided PMAD screening at WIC sites.

Additional activities to reach the community continued in 2015. The Faith Alliance Committee sponsored several faith based community events aimed at promoting awareness regarding perinatal disparities and promoting preconceptual health in the underserved communities. The Family Resource Guide created by the network and the “You’re Not Alone” campaign were updated.

1 in 9 Hewlett House

Hewlett House is an organization that provides services to individuals and families dealing with cancer. Hewlett House conducts support groups, private counseling, and various classes, including a discussion group on insurance and environmental issues. In 2015, Hewlett House participated in and spearheaded many fundraising and awareness events, representing a wide array of creative and athletic activities.

Quality Improvement, Epidemiology, and Research

In 2015, the Division of Quality Improvement, Epidemiology, and Research supported new and innovative performance management and quality improvement measures for divisions within the Health Department. In addition, the Division partnered with hospitals, schools, and other agencies to carry out research, provide trainings, and apply for grants. The Division founded the Long Island Health Collaborative (LIHC)/ Population Health Improvement Plan (PHIP) in partnership with Nassau-Suffolk Hospital Council, community based organizations, Nassau County hospital systems, NuHealth, Adelphi University, Columbia University, Hofstra University, New York Institute of Technology and Stony Brook University. In 2015, LIHC/PHIP developed methods to monitor various chronic disease programs, survey the community and devise opportunities to receive feedback



Nassau County Department of Health • Annual Report 2015

from the community. In addition, in collaboration, Nassau County continued to participate in the Complete Streets initiative to improve areas of walkability in the county.

This Division is responsible for the Community Health Assessment, the Community Health Improvement Plan, the departmental Strategic Plan, Accreditation, and support and advance ongoing activities related to the New York State Prevention Agenda 2013-2017, PHIP and Delivery Reform System Incentive Payment (DSRIP) Program, which builds on the work of the Medicaid Redesign Team.

Minority Health

This Division continues to focus on health education, outreach, and programming in the underserved communities within the county. In 2015, the Division collaborated with Hofstra University School of Public Health and presented the 2nd Annual Minority Health Conference and Health Fair during Public Health Week. Additionally, the Division successfully coordinated the 3rd sponsored Health, Sports, and Fitness Expo which served more than 2000 county residents.



Public Health Emergency Preparedness (PHEP)

PHEP is tasked with improving the department’s ability to respond to a range of public health incidents as well as helping to build a more resilient community. Efforts are geared around planning, activations, training, exercising, maintaining adequate supplies and equipment, and building partnerships.

Nassau County Department of Health • Annual Report 2015

The division also manages the more than 900-strong Medical Reserve Corps (MRC) volunteer program. Meetings and extensive trainings are offered to improve our volunteers' ability to respond and to keep them engaged in the organization.

Planning in 2015 was focused on the new Centers for Disease Control and Prevention (CDC) Operational Readiness Review (ORR) that is intended to identify medical countermeasure response operational capabilities.

Activations involve responding to emergencies as well as providing medical support at planned events. When the Nassau County Office of Emergency Management activates the Emergency Operations Center (EOC), PHEP (and other NCDOH employees) staff the ESF-8 (health desk) to coordinate activities and situational awareness. 2015 activations included:

- A January Winter Storm (declared emergency with road and transportation closures) and Nor'easter Joaquin EOC response
- NCDOH staff Point of Dispensing (POD) clinics to give influenza vaccinations
- On-site emergency medical team for a police officer's funeral and wake
- Medical support for the participants, families and spectators at the Nassau County Empire State Games for the Physically Challenged
- Medical teams and an information education table at the Nassau County Sports, Health & Fitness Expo
- The largest planned response was for the Long Island Marathon. Seven medical stations were stationed throughout the route and a large medical tent was positioned at the finish line.

Close to 40 trainings were held in 2015 for either NCDOH staff or MRC volunteers. Examples of regularly scheduled courses are: Advanced Critical Life Support, Basic Life Support for Health Care Professionals, Psychological First Aid, Crime Scene Safety, Blood Borne Pathogens, Personal Protective Equipment (PPE), and Disaster Triage.

A full-scale POD exercise was conducted to test our ability to respond to an Anthrax event. The staff of 60 NCDOH employees and 15 Medical Reserve Corps volunteers processed more than 390 clients and tested a new online consent form.

The division maintains a cache of consumable medical supplies and more than 300 pieces of equipment— including vehicles, trailers, two-way radios, medical tents, AEDs, wheelchairs, cots, computers, and generators.

Nassau County Department of Health • Annual Report 2015

PHEP also coordinates the Nassau County Health and Medical Coordinating Group (HMMACG) which includes all of the hospitals, nursing homes, adult care facilities and approximately 18 healthcare partners.



Medical Reserve Corps members at a Disaster Triage Drill at the Nassau County EMS Academy.

Communications and Health Information

The Office of Communications and Health Information is responsible for educating Nassau County residents about health issues to support a safe and healthy community. In 2015, the Nassau County Department of Health participated in meetings and community events, including public forums, and conferences/summits focused on chronic disease. Educational literature was distributed through health fairs and provided to community based organizations. The Office of Communications and Health Information is dedicated to answering the public's questions and issued over 50 press releases.

Human Resources

In 2015, the Health Department experienced a net decrease in staffing of 6 employees. At year end, the Department employed 245 employees, of which 229 were full time and 16 were part time. Overall, 74% of the Department's employees' salaries were funded by the County Fund while 26% was funded by various grants.

Nassau County Department of Health • Annual Report 2015

In 2015, in an effort to reduce expenditures, the County offered a Voluntary Incentive Separation Program to all full-time CSEA employees whereby those that applied would receive an incentive payment of \$1,000 for every year of completed service as defined by the CBA. Six Department of Health employees took advantage of the program and left by the end of 2015.

In 2015, the Health Department experienced a total of 23 separations: six incentives; five terminations; one transfer to another County agency and remaining 11 resigned. In turn, the department hired 17 employees, of whom, two previously worked at the Health Department.

Lastly, 14 employees were rewarded with promotions for their hard work and dedication.

	2014	2015	Net Change
Total Employees	251	245	-6
Full Time	236	229	-7
Part Time	15	16	+1
General Fund	180	181	+1
Grant Fund	71	64	-7

Public Health Laboratories

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

The Public Health Laboratory is comprised of two divisions - Microbiology and Chemistry. The Microbiology division monitors the quality of beach water, the efficacy of waste water treatment and quality of drinking water as well as identifies mosquito species for West Nile Virus testing. The Environmental

Nassau County Department of Health • Annual Report 2015

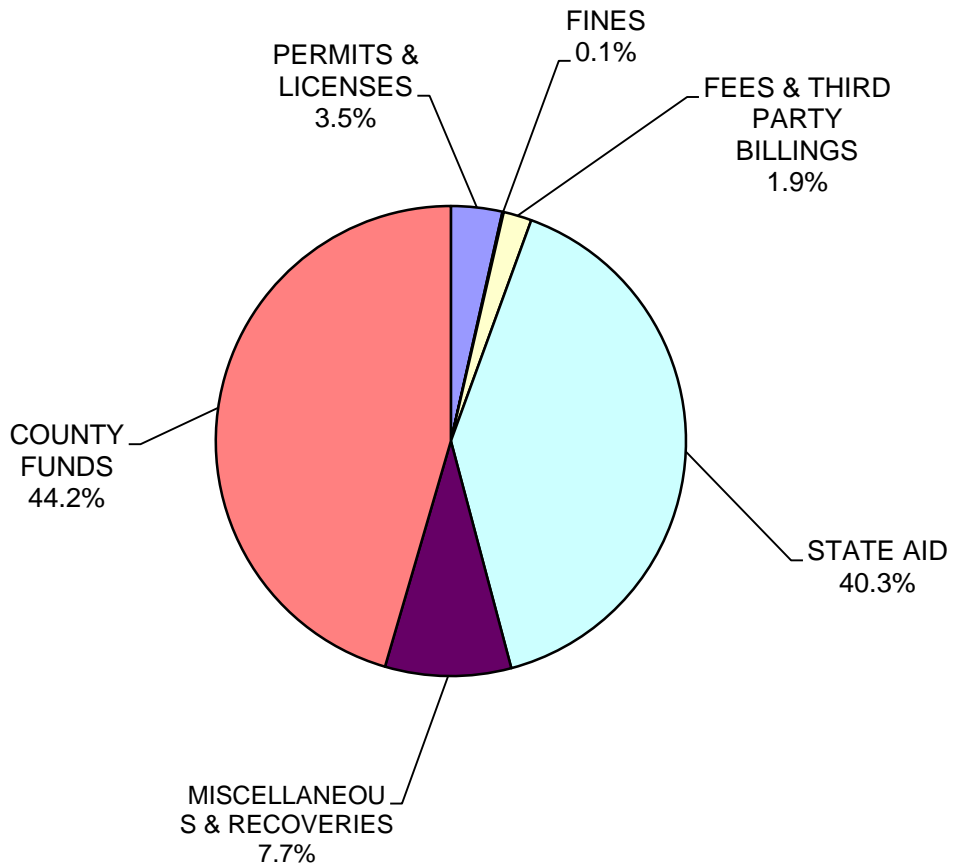
Chemistry Division performs chemical agent analyses in water, air, soil and dust samples.

In 2015, the Public Health Laboratory chemical and microbiological divisions:

- Tested 19,564 samples, including beach water, drinking water and waste water.
- Identified 33,221 mosquitoes of 16 different species from 841 mosquito traps and prepared the specimens for West Nile Virus testing by NYSDOH.
- In January, under a Public-Private Partnership agreement the County entered with United Water Long Island, United Water commenced management of the Bay Park and Cedar Creek Sewage Treatment Plants. United Water Long Island contacted the Laboratory to request testing of water samples from the Bay Park and Cedar Creek Sewage Treatment Plants. The Microbiology Laboratory commenced testing of samples and will continue to do so until United Water's own laboratory (under construction) can handle capacity.

Appendix A: Fiscal Year 2015 Charts

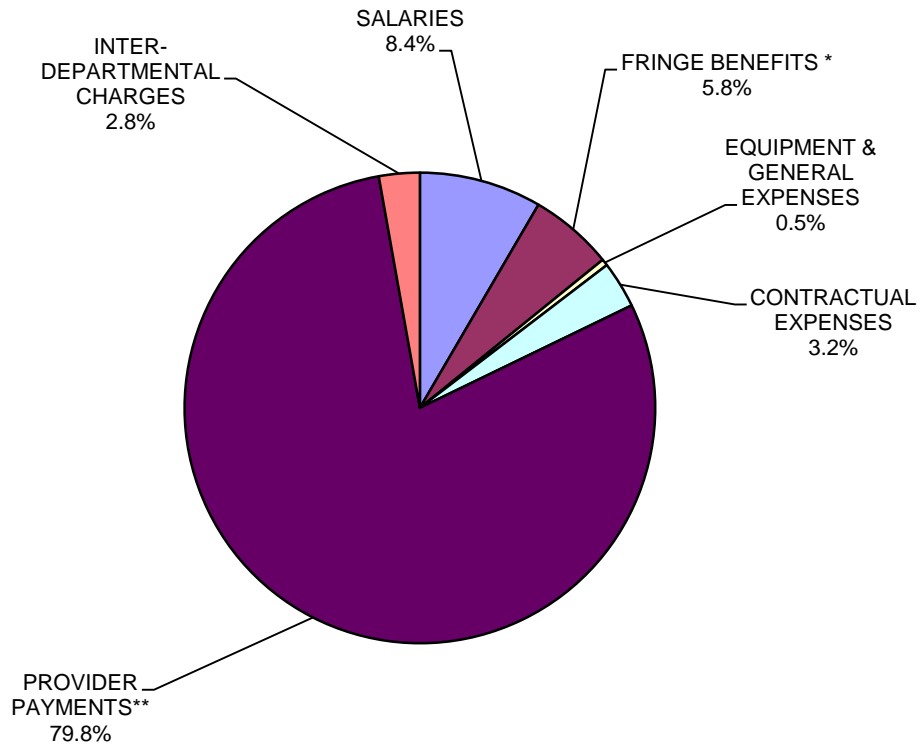
FY2015 REVENUES BY TYPE



PERMITS & LICENSES	\$5,895,817
FINES	149,459
FEES & THIRD PARTY BILLINGS	3,250,624
STATE AID	67,413,474
MISCELLANEOUS & RECOVERIES	14,488,897
COUNTY FUNDS	76,065,585
TOTAL	<u><u>\$167,263,856</u></u>

Nassau County Department of Health • Annual Report 2015

FY2015 EXPENDITURES BY TYPE

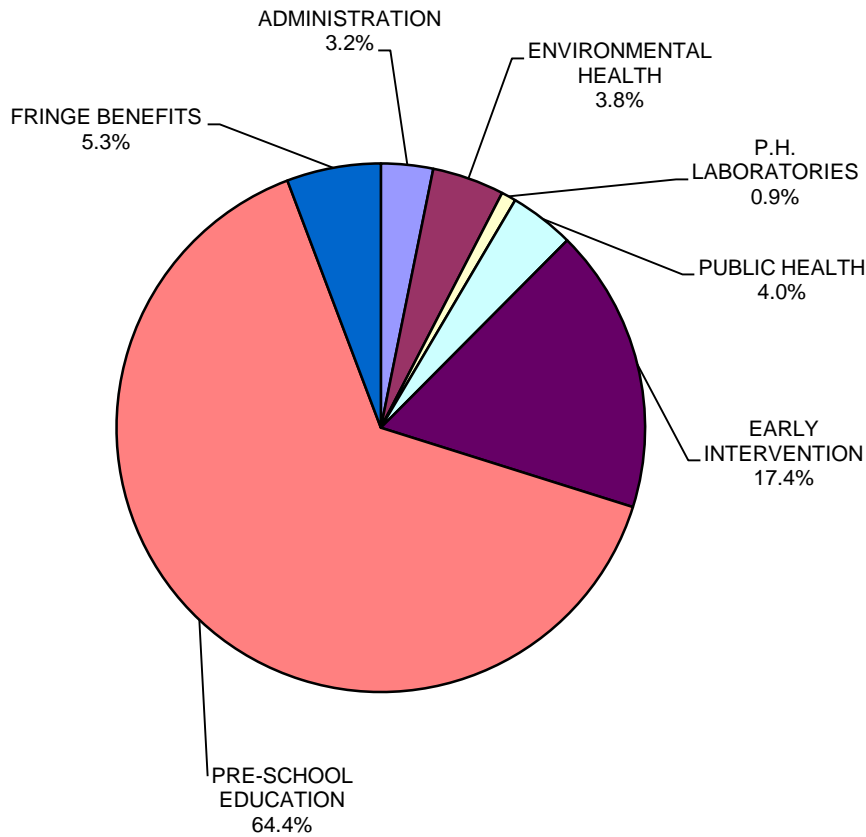


SALARIES	\$14,063,932
FRINGE BENEFITS	9,623,798
EQUIPMENT & GENERAL EXPENSES	762,054
CONTRACTUAL EXPENSES	5,365,563
PROVIDER PAYMENTS	132,766,059
INTER-DEPARTMENTAL CHARGES	4,682,450
TOTAL	<u><u>\$167,263,856</u></u>

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

Provider Payments reflects payments to Early Intervention and Pre-School Education providers.

FY2015 EXPENDITURES BY CONTROL

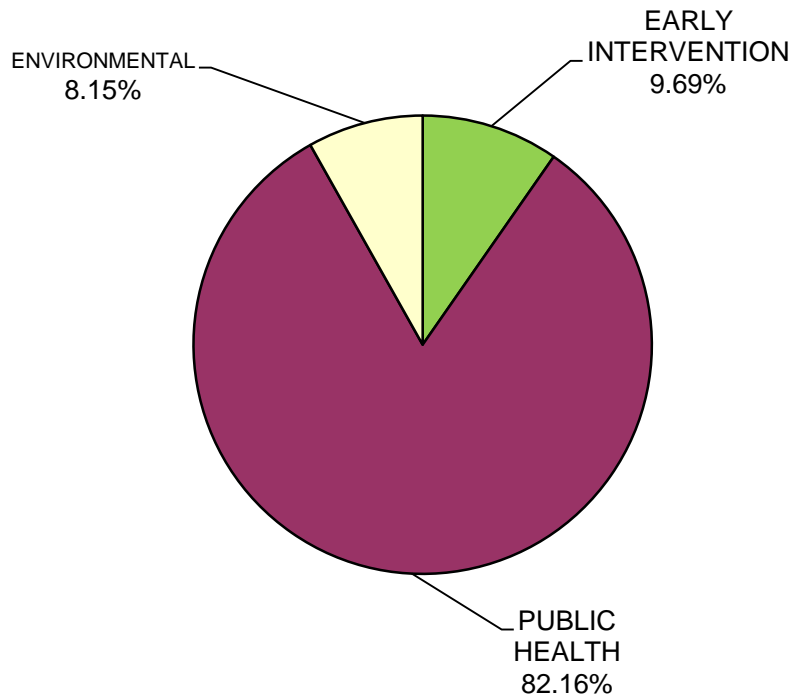


ADMINISTRATION	\$5,322,159
ENVIRONMENTAL HEALTH	7,372,332
P.H. LABORATORIES	1,507,374
PUBLIC HEALTH	6,636,405
EARLY INTERVENTION	29,094,677
PRE-SCHOOL EDUCATION	107,707,111
FRINGE BENEFITS	<u>9,623,798</u>
TOTAL	<u>\$167,263,856</u>

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

Nassau County Department of Health • Annual Report 2015

FY2015 EXPENDITURES BY GRANT



EARLY INTERVENTION	\$674,991
PUBLIC HEALTH	\$5,723,380
ENVIRONMENTAL	\$568,079
TOTAL	<u>\$6,966,450</u>

Appendix B: Notifiable Communicable Disease Chart

Disease	2015	2014	2013	3 Year Ave
	Annual # Cases	Annual # Cases	Annual # Cases	(2013-2015) # Cases
AMEBIASIS	21	17	23	20
ANAPLASMOSIS**	1	3	4	3
BABESIOSIS**	8	9	8	8
BOTULISM	0	1	0	0
BRUCELLOSIS**	0	0	1	0
CAMPYLOBACTERIOSIS**	291	287	289	289
CHIKUNGUNYA**	13	43	0	19
CRYPTOSPORIDIOSIS**	10	10	7	9
CYCLOSPORA	5	3	1	3
DENGUE FEVER**	6	3	11	7
DENGUE-VIRAL HEMORRHAGIC FEVER**	0	1	0	0
E.COLI 0157:H7	6	7	2	5
EHEC, SEROGROUP NON-O157	6	18	9	11
EHEC, NOT SEROGROUPED	0	0	0	0
EHRlichiosis (CHAFEENSIS)**	0	1	4	2
EHRlichiosis (UNDETERMINED)**	0	0	1	0
ENCEPHALITIS, OTHER	0	3	1	1
GIARDIASIS	91	79	72	81
HAEMOPHILUS INFLUENZAE, INV B	1	0	0	0
HAEMOPHILUS INFLUENZAE, NOT TYPE B	14	25	24	21
HEMOLYTIC UREMIC SYNDROME**	0	0	1	0
HEPATITIS A	8	6	14	9
HEPATITIS B,ACUTE	4	6	5	5
HEPATITIS B,CHRONIC	169	201	161	177
HEPATITIS C,ACUTE	2	7	14	8
HEPATITIS C,CHRONIC	561	578	497	545
HERPES INF, INFANT =< 60 DAYS	2	0	0	1
INFLUENZA A, LAB CONFIRMED	2272	2047	1666	1995
INFLUENZA B, LAB CONFIRMED	299	1166	1074	846
INFLUENZA UNSPECIFIED, LAB CONFIRMED	6	5	5	5
INFLUENZA PEDIATRIC DEATH	1	0	1	1

Nassau County Department of Health • Annual Report 2015

LEGIONELLOSIS	65	77	35	59
LISTERIOSIS	6	10	10	9
LYME DISEASE** ****	44	25	25	31
MALARIA	6	9	7	7
MEASLES	0	0	2	1
MENINGITIS, ASEPTIC	69	40	49	53
MENINGITIS, OTHER BACTERIAL	6	6	2	5
MENINGOCOCCAL** ##	2	1	5	3
MENINGITIS, UNKNOWN	0	0	0	0
MUMPS**	1	4	4	3
PERTUSSIS**	68	34	28	43
ROCKY MTN SPOT FEVER**	1	1	1	1
SALMONELLOSIS	156	121	148	142
SHIGELLOSIS	79	62	27	56
STREP, GROUP A INVASIVE	29	46	46	40
STREP, GROUP B INVASIVE	98	97	113	103
STREP, GROUP B INV, EARLY/LATE ONSET	5	12	6	8
STREP PNEUMONIAE, INVASIVE	78	85	103	89
TRICHINOSIS	0	0	1	0
TYPHOID FEVER	2	3	5	3
VISA	0	2	3	2
VIBRIO - NON 01 CHOLERA	11	8	19	13
WESTNILE VIRUS**	7	4	6	6
WESTNILE FEVER**	2	0	2	1
YERSINIOSIS	7	11	12	10
ZIKA VIRUS**	1	NA	NA	0

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

**Confirmed and Probable cases counted; Campylobacter confirmed and suspect

***Not official number

**** From 2013-2014, 18 counties investigated a sample of positive laboratory results; 2015-2016, 25 counties sampled.