

NASSAU COUNTY DEPARTMENT OF HEALTH



2018 ANNUAL REPORT

Lawrence E. Eisenstein, MD, FACP
Commissioner of Health



Nassau County Department of Health • Annual Report 2018

Table of Contents

Letter from the Commissioner	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
Epidemiology and Planning	14
Community and Maternal Child Health.....	15
Public Health Emergency Preparedness (PHEP)	19
Communications and Health Information	21
Human Resources.....	22
Public Health Laboratories.....	22
Appendix A: Fiscal Year 2018, Charts	24
Appendix B: Communicable Disease Control Annual Table.....	28

Letter from the Commissioner

It is my great pleasure to present the 2018 Annual Report from the Nassau County Department of Health (NCDOH.) 2018 was a spectacular year for NCDOH. We were awarded “Local Health Department of the Year” by the National Association of County and City Health Officials (NACCHO)! This prestigious award was granted in the large population category and is a testament to the continual effort of NCDOH employees to provide the highest level of governmental public health services to our residents. It is also reflective of the ongoing measures taken to improve and be innovative and efficient. In fact, NCDOH was featured in a 7-page cover story for its Model and Promising Practice Awards in NACCHO’s quarterly magazine, NACCHO Exchange. In 2018 NCDOH was presented with 2 more Model Practice Awards and 1 Promising Practice Award, bringing the grand total to 16 awards since 2010. This is by far the most of any health department in New York and among the highest in the United States!

In last year’s Annual Report letter, I wrote about the great achievement of being conferred Public Health Accreditation by the Public Health Accreditation Board (PHAB). While we were awarded Accreditation in 2017, much work was performed in 2018 to maintain our accreditation status. Ongoing quality assurance and quality improvement activities continued, and we worked diligently to find improvements and new initiatives which will help us meet our mission and truly provide for healthy communities throughout Nassau County.

In 2018 NCDOH continued to be a Chief Health Strategist and leader and innovator in public health. Staff worked towards policy development and provided expertise as legislation emerged on the local and state levels on vital topics including Tobacco 21 (passed in Nassau County in 2018), Legionella, Lead, Early Intervention, and unregulated water contaminants. Our input through leadership positions, and membership in New York State Association of County Health Officials (NYSACHO), NACCHO, and the Centers for Disease Control and Prevention (CDC) Legal Workgroup has helped shape regulations, and hopefully will position NCDOH to make the biggest impact possible on these emerging issues, as we strive to help our residents be healthy.

Nassau County Department of Health • Annual Report 2018

All of the above was achieved as NCDOH faced many challenges in 2018. The calendar year began in the midst of the worst influenza season we have seen in years. The very first week of the year saw us provide emergency influenza PODs (Points of Dispensing), one of which was broadcast on ABC World News Tonight! Towards the end of the year, we encountered the beginning of the largest measles outbreak in many years impacting nearby counties in New York. Our diligent communicable disease investigators worked relentlessly to prevent any cases and spread of disease here in Nassau County! Our efforts to serve children continued, and would grow, as our numbers of Early Intervention and Pre-school cases began to rise. Water protection was a key topic of discussion among the many topics addressed by our Environmental Health Unit, and we were honored to participate in congressional water protection meetings. Our Emergency Preparedness Unit continued to conduct drills and stay ready so that we are able to respond to worst case scenarios in public health. They are aided by our approximately 1,000-member Medical Reserve Corp of volunteers! Our legal team, widely considered among the best public health legal teams in the country, participated in numerous calls and policy discussions on the state and national level! Our Bureau of Analytics continued to evaluate data and work with community and health provider partners to ensure that our health assessment and subsequent initiatives are in line with specific needs of Nassau's diverse communities. We continued to work with vital grants, including WIC (Women, Infants, and Children), IAP (Immunization Action Plan,) and Ryan White. Plus, there is so much more!

*I wish to thank the **incredible** work force of the NCDOH! They are the best in the business! The resident of Nassau County benefit greatly from and are lucky to have them! Wishing you a healthy, happy 2019!*

Sincerely,



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 2018

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



John Robert Zaso, D.O., F.A.A.P. attended Chaminade High School, earned a BA in Psychology at Stony Brook University and received his medical degree from New York College of Osteopathic Medicine. He did his training in Pediatrics at Stony Brook University Hospital. Dr. Zaso has been a pediatrician in Nassau County for 26 years and currently maintains his practice in East Meadow. Dr. Zaso is the Emergency Service Liaison for Nassau University Medical Center. He has served as the Medical Director for the East Meadow Fire Department for the past 10 years and as the Medical Director for the Uniondale Fire Department for the past 15 years. He also serves as the Secretary on Regional Emergency Medical Advisory Committee and is an active member of the Nassau County Medical Reserve Corps, where he serves as Physician Coordinator.

Department of Health Vision

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

Bureau of Environmental Engineering

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

Engineering Plan Review 2018

On-Site Sanitary System Plans	17
Swimming Pool Plans	77
Bulk Petroleum and Hazardous Material Storage Plans	321
Realty Subdivision Plans and Reports	112
Public Water System Plans	606

Nassau County Department of Health • Annual Report 2018

Bureau of Environmental Administration and Enforcement

Processing Environmental Health Permit applications and enforcing the codes, rules and regulations necessary to provide a safe and healthy environment are the keystones to the Bureau’s mission. The Bureau strives to educate permit holders and facility operators, so they can conduct business while complying with all the rules and regulations applicable to their permit. Additionally, the Bureau has a vigorous enforcement program to ensure that violations and hazards that may endanger public health are corrected. Owners and operators of facilities who fail to correct violations are subject to a formal enforcement process presented before an Administrative Law Judge. In 2018, the Bureau initiated 340 formal enforcement cases and the Board of Health assessed \$323,750 in fines.

Permit Administration and Enforcement 2018

Food Service Establish Permits Issued	6,321
Temporary Food Service Permits Issued	1,704
Recreational Facility Permits Issued	648
Permit Compliance Conferences	445
Enforcement Cases Initiated	340
Formal Hearings Held	878
Fines Assessed	\$657,595
Fines Collected	\$323,750

Bureau of Environmental Investigation

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

Nassau County Department of Health • Annual Report 2018

Bureau of Environmental Investigation 2018

Lead Hazard Investigation Inspections	116
Air Quality Investigation Inspections	120
Residential Environment Investigations	1,350
Residential Environmental Inspections	2,856
Adjoining Property Surveys	3,240
Rodent Free Demolition Inspections	617
ATUPA Compliance Inspections	1,793
Animal Bite Investigations	1,412
Animal Specimens Tested for Rabies	159
Mosquitos Trapped	91,585
Mosquito Pools Tested for Arbovirus	783

Bureau of Environmental Protection

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

Nassau County Department of Health • Annual Report 2018

Bureau of Environmental Protection 2018

Toxic and Hazardous Storage Facility Permits Issued	919
Toxic and Hazardous Material Storage Inspections, Closures and Abandonments	4,521
Freedom of Information Law Requests Processed	730
Microbiological Drinking Water Samples Collected	1,428
Chemical Drinking Water Samples Collected	1,187
Public Water Supply Testing Results Reviewed	~250,000

Bureau of Environmental Sanitation

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

Bureau of Environmental Sanitation 2018

Food Service Establishment Plan Reviews	233
Food Service Establishment Inspections	12,501
Food Manager Training Certificates Issued	2,453
Food Service Operation Compliance Conferences	475
Foodborne Illness Investigations	155
Children’s Camp Inspections	299
Pool Inspections	824
Beach Water Samples Reviewed	3,101
Temporary Residence Inspections	64
Body Artist (Tattoo and Piercing) Certifications Issued	262

Communicable Disease Control

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

In 2018 the Division of Communicable Disease Control:

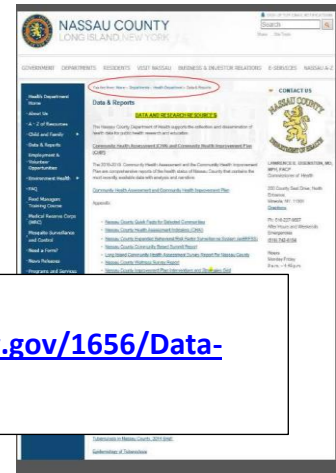
- Investigated 35,866 laboratory reports with case confirmation of 10,624 communicable diseases including: Zika virus disease, hepatitis A, E. coli shigatoxin, legionellosis, mumps, typhoid fever, shigellosis and West Nile Virus.
- Investigated and confirmed 14 human cases of West Nile disease.
- Investigated 194 instances of vaccine preventable illness and responded to over 683 calls on the immunization hotline.
- Rabies/animal bite human surveillance for 113 residents for which post exposure prophylaxis was recommended.
- Measles contact investigations were 13, surveillance and/or post exposure prophylaxis administration, no disease transmission.
- Influenza and ILI (influenza-like illness) community outbreaks, 12. Participated in 3 clinics to provide influenza immunizations to the Nassau County residents.
- Outbreak control activities in the community setting included meningococcal disease, hepatitis A, influenza, gastrointestinal illness and legionellosis.
- Perinatal hepatitis B program conducted surveillance for a daily average of 83 infants and 24 pregnant hepatitis B surface antigen positive females.

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

Epidemiology and Planning

The Division of Epidemiology and Planning promotes the use of data-driven initiatives and programs. Its mission is to utilize information regarding the distribution of disease within the county to properly describe, evaluate, and inform programming to improve community health. The Division includes the Bureaus of Analytics, STD/HIV and Tuberculosis Control. Data is also available to the public.

The Division of Epidemiology and Planning is responsible for maintaining annual reporting required for accreditation, which was achieved last year in 2017.



Website to find reports:
<https://www.nassaucountyny.gov/1656/Data-Reports>

Bureau of Analytics

In 2018, the Bureau of Analytics supported new and innovative performance management, quality improvement projects, and analytic assessments for Divisions within the Health Department. This Bureau is responsible for the Community Health Assessment, the Community Health Improvement Plan, and the departmental Strategic Plan, all of which were in the planning stages for the upcoming 2019 iteration. The Bureau actively participated in the Long Island Health Collaborative (LIHC)/Population Health Improvement Plan (PHIP) in partnership with Nassau-Suffolk Hospital Council, community-based organizations, Nassau County hospital systems, and academic partners. In addition, the Bureau partnered with hospitals, universities, and other agencies and municipalities to carry out research, provide trainings, apply for grants, deliver public health information and data to the community and participate in mentorship opportunities for students.

Bureau of STD Control and HIV Partner Services

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

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

Nassau County Department of Health • Annual Report 2018

investigations. The Bureau provides strong representation to community-based coalitions and agencies.

In 2018, STD Control, HIV Partner Services and, Expanded Partner Services:

- Investigated 257 Syphilis, 4,850 Chlamydia, and 772 Gonorrhea cases.
- Investigated 88 cases of HIV. Each case was contacted and was offered assistance notifying his or her partners who might be at risk.
- Investigated 237 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.

Bureau of Tuberculosis Control

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

Three metro area counties, Nassau, Suffolk, and Westchester, report approximately half of the cases of TB in the State, exclusive of New York City. Eighty-five percent of Nassau County cases are foreign born. In 2018, this Bureau:

- Investigated 2,070 laboratory reports and managed 43 confirmed cases.
- Provided Directly or Skype Observed Therapy visits to 25 cases, approximately 1,900 visits in total.
- Investigated and followed 301 identified contacts.
- Received 225 immigrants for evaluation from the B1B2 program, of whom 77 were in jurisdiction. This program identifies immigrants with potential TB infections and follows their evaluation and treatment.

Community and Maternal Child Health

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

Nassau County Department of Health • Annual Report 2018

Network, 1 in 9 Hewlett House, the Childhood Lead Poisoning Prevention Program and the Women, Infants, and Children (WIC) Program.

Early Intervention (EI)

The Early Intervention Program offers a variety of therapeutic and support services to eligible infants and toddlers with disabilities and their families. Typical services include speech therapy, physical therapy, occupational therapy, special education, and parent training. To be eligible for services, children must be less than three years of age and have a confirmed disability or established developmental delay, in one or more of the following areas of development: physical, cognitive, communication, social-emotional, and/or adaptive. In 2018, the Early Intervention Program received 4,714 referrals, mostly from parents, families, pediatricians, and other providers. A total of 7,605 children were served throughout the year, and 4,179 cases were closed.

Child Find

The Child Find Program performs developmental tracking for developmentally at-risk infants and toddlers and provides education for both primary referral sources and community stakeholders regarding the importance of developmental surveillance and the availability of early intervention services. Child Find conducts 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 continues 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 continues to do/perform outreach at targeted lower socioeconomic communities through *Screen for Success: Early Intervention Program-WIC Developmental Screening Collaborative (SFS)* in conjunction with the added support of Enhanced Service Coordination. This work again gained national recognition as Enhanced – *Early Intervention Service Coordination: A Health Equity Initiative for Early Intervention* was awarded a 2018 Model Practice by the National Association of City and County Health Officials. The synergist effect of these two health department initiatives resulted in a substantial increase in the number of children referred through SFS who successfully completed the evaluation process, services and demonstrated sustained participation in early intervention services.

Referral sources to Child Find included SFS, WIC, Early Intervention transfers, Childhood Lead Poisoning Prevention Program, Foster Care, Child Protective Services, parents, health care providers and hospitals. The New York State Early Hearing Detection and Intervention initiative (EHDI) has resulted in increased referrals to EIP At-Risk of Failed Hearing Screening cases from area hospitals. These cases require determined follow up

Nassau County Department of Health • Annual Report 2018

actions to locate families and ensure repeat testing is completed and reported. Cases are referred to the EIP when indicted.

Child Find continues to engage with other community stakeholders including Help Me Grow, Docs for Tots, and the Early Childhood Direction Center to promote and support the healthy development of Nassau County's youngest residents.

Preschool Special Education Program

The Preschool Special Education Program is available for three and four-year-old preschoolers who have been determined by their school district to have a disability based on a multidisciplinary evaluation. This program is administered by the child's local school district with oversight and guidance from NYS Education Department. The Preschool Program meets with the regional division of the NYS Education Department approximately every two months to discuss current issues. County presence at school district meetings is routinely accomplished by the attendance of municipal representatives. In 2018, the Preschool Special Education Program served a total of 6,732 children throughout the year.

Physically Handicapped Children's Program (PHCP)

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

Childhood Lead Poisoning Prevention Program (CLPPP)

The Childhood Lead Poisoning Prevention Program (CLPPP) identified 64 children with blood lead levels ≥ 10 mcg/dl in 2018. Program staff followed a total of 101 (new and previously reported children) with elevated blood lead levels throughout the year. The CLPPP provides case management services, environmental investigations, and referrals to other services.

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

Nassau County Department of Health • Annual Report 2018

child fatalities based on the team's findings. In 2018, the team reviewed 11 cases and developed recommendations and interventions based on the reviews conducted.

Activities in 2018 included:

- Continued application for grants to securing funding for Cribs for Kids-Nassau County.
- Training additional recruited partner agency staff and delivering 68 cribs to families in need through our Cribs for Kids chapter.
- Coordinated a Halloween Safety press release.
- Coordinated guest speaker subject matter experts for case reviews to guide team in prevention activities.
- Completed the set-up of Safe Sleep zone displays at a 4th birthing hospitals (Northwell Katz Women's Hospital).

Women, Infants, and Children Program (WIC)

The Women, Infants, and Children Program (WIC) spent a significant amount of time in 2018 preparing for NYWIC. In January of 2019 the program will be providing EBT cards that will allow participants to access their benefits instead of using food vouchers. Prior to implementation of the program the staff will need to complete training modules and new computer equipment will need to be installed. In addition, the program launched a media campaign to educate the participants, the community at large and health and human service providers.

The program continues to strive to improve customer service and outreach strategies to improve retention and customer satisfaction. The program continues to utilize the team approach whereby the participant will be served by the same support staff and nutritionist or nurse, currently we have 4 teams. Other initiatives for 2018 include:

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

Perinatal Services Network

The network consists of approximately 25 health and human service providers. In 2018 Nassau County Perinatal Services Network (NCPSN) revised its bylaws and began operating under a new structure. Currently there are 3 work

Nassau County Department of Health • Annual Report 2018

groups education and outreach, perinatal mental health, and the perinatal disparities. Each work group developed their own work plan which included various future activities. The network's ongoing mission continues to be decreasing infant mortality and improving birth outcomes in Nassau County. The network co-sponsored the first "Birth Justice Warriors" Breakfast in March 2018 at Hofstra University, this initiative is focused on birth equity and decreasing maternal and infant mortality in the African American community. The Education and Outreach Work Group begun conducting breastfeeding workshops in the Hempstead Community and have future ones planned. The Perinatal Mental Health Work Group participated with the Post-Partum Resource Center of New York's Annual Sounds of Silence 5K/10K Run during the Mother's Day Weekend. Nassau County Executive Laura Curran attended and supported the event, which promoted awareness of Perinatal Mood and Anxiety Disorders.

1 in 9 Hewlett House

Hewlett House is a Community Learning Resource Center for individuals and families dealing with cancer. Hewlett House conducts support groups, private counseling, and various classes, including Tai Chi, Reiki, Chair Yoga, crocheting, and many other groups, all at no charge. In 2018, Hewlett House participated in and spearheaded many fundraising and awareness events, representing a wide array of creative and athletic activities. Hewlett House enjoys tremendous support from many community partners and serves as a center for hope, knowledge, and empowerment.

Public Health Emergency Preparedness (PHEP)

Public Health Emergency Preparedness (PHEP) is tasked with responding to a range of public health threats—including infectious diseases, natural disasters, and biological, chemical, nuclear and radiological events. Our goal is to build a more resilient community that is prepared to deal with threats and emergencies that affect the health of the public. In addition, the PHEP unit was awarded new grant funding to combat the opioid epidemic.

The Division manages the Nassau County Department of Health's Medical Reserve Corps (MRC) volunteers. Each new member is required to pass a police background check and to participate in a new member orientation training. Free trainings are provided to keep the volunteers engaged and prepared for a public health emergency response. In 2018,

Nassau County Department of Health • Annual Report 2018

18 trainings were held including Basic Life Support, Psychological First Aid, Bloodborne Pathogens, Medical Needs Shelter, Weapons of Mass Destruction, Advanced Cardiac Life Support, and Disaster Triage. In September, 46 Medical Reserve Corps members attended the MRC General Membership meeting which included a Stop the Bleed training. The Office of Emergency Management provided tourniquet kits to all volunteers that completed the Stop the Bleed training.

Public Health Emergency Preparedness staff presented at a Learning Session at the NACCHO (National Association of County and City Health Officials) 2018 Preparedness Summit in Atlanta. Approximately 100 people attended the “All-in-One Point of Dispensing (POD) Tool Kit” presentation. A significant number of attendees requested copies of the Tool Kit and Training and Exercise materials. The POD project and Tool Kit were created to improve the readiness level of our county partners to distribute critical medical countermeasures in the event of a public health emergency. In 2018, ten POD site visits were accomplished in order to develop custom Tool Kits for each location. Three POD exercises were also completed during the year, including one in May, at the Lawrence Yacht & Country Club. Participants included forty-four NCDOH staff, two Nassau County Police Department Homeland Security members, one staff member from the Nassau County Office of Mental Health and Chemical Dependency and the Director of the Office of the Physically Challenged.

Activations involved responding to emergencies as well as providing medical support at planned events. When Nassau County activates the Emergency Operations Center (EOC), PHEP staffs the ESF-8 (health desk) to coordinate activities and situational awareness. 2018 activations included:

- Five winter storm ESF-8 activations.
- Four Influenza Points of Dispensing (PODs)
- NCDOH staff and MRC volunteers provided medical support for participants and spectators at the Long Island Marathon, the Empire Games for the Physically Challenged, the Old Bethpage Village Restoration 2018 Long Island Fair and the “I Love Chocolate Fest”, at Old Bethpage Village Restoration.

The Division maintains a cache of medical supplies and more than 400 pieces of equipment—including vehicles, 800 megahertz radios, emergency medical tents, Automated External Defibrillators (AEDs), wheelchairs, cots, computers, and generators.

PHEP also leads the Nassau County Health and Medical Multi-Agency Coordinating Group (HMMACG) which includes all 11 hospitals, 37 nursing homes, 30 adult care

Nassau County Department of Health • Annual Report 2018

facilities, and more than 40 health care partners. PHEP utilized the March 2018 quarterly Health and Medical Multi-Agency Coordinating Group (HMMACG) meeting to present a “Planning for an Active Shooter Event at a Healthcare Facility” conducted by the Nassau County Police Department’s Homeland Security/Emergency Preparedness unit. More than one hundred people attended from a wide range of organizations, including: Nassau County Fire Marshall and Human Services, hospitals, nursing homes, assisted living facilities, mental health providers, and home health care agencies.



Emergency Preparedness education provided at a public event.



Medical Reserve Corps volunteers at the 2018 Long Island Marathon

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 2018, the Nassau County Department of Health participated in meetings and community events, including public forums, and conferences/summits focused on health promotion and disease prevention. Educational literature was distributed through health fairs and provided to community-based organizations. The Office of Communications and Health Information is dedicated to answering the public’s questions and issued over 50 press releases.

Nassau County Department of Health • Annual Report 2018

Human Resources

At year-end, the Health Department employed 214 employees, of whom 203 were full time and 11 were part time. Overall, 78% of the employees' salaries was funded by the County Fund while 22% was funded by various grants.

In 2018, the Health Department experienced a total of 11 separations – 7 retired; 1 was terminated, and the remaining 3 resigned. In turn, the Health Department hired 10 employees. Lastly, 9 employees were rewarded with promotions for their hard work and dedication.

	2017	2018	Net Change
Total Employees	213	214	+1
Full Time	201	203	+2
Part Time	12	11	-1
General Fund	169	166	-3
Grant Fund	44	48	+4

Public Health Laboratories

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

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

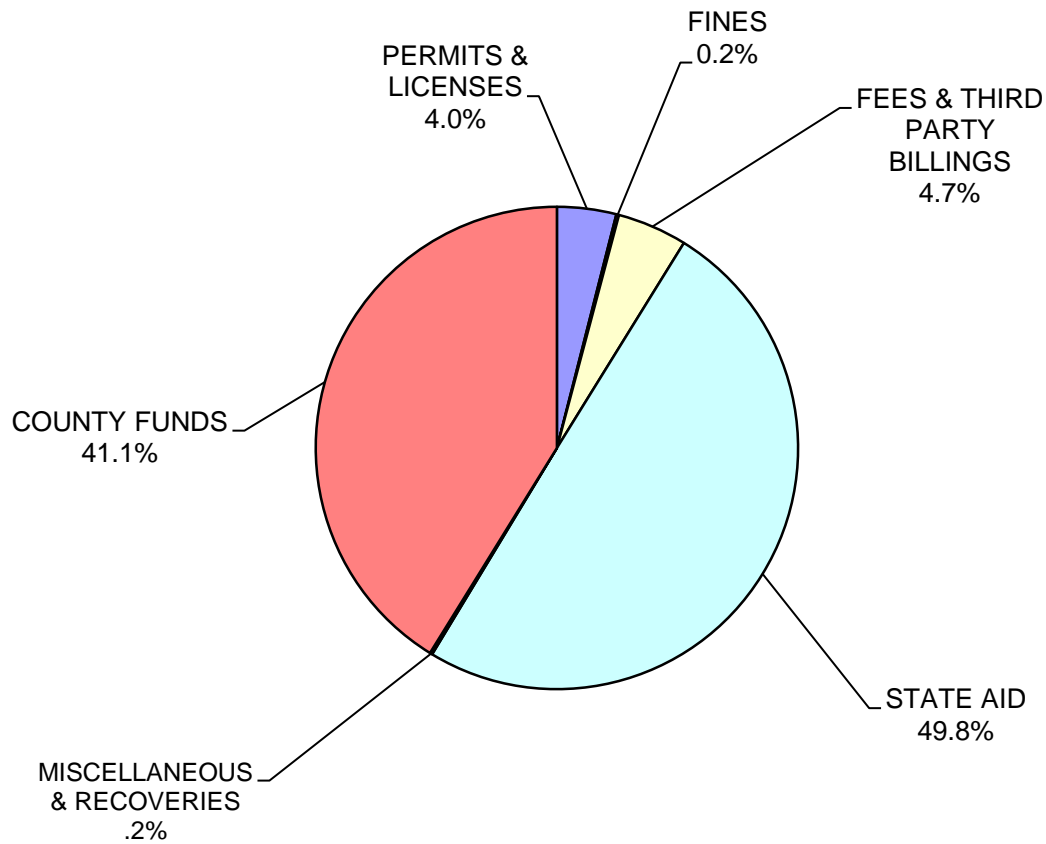
In 2018, the Public Health Chemistry and Microbiology Labs tested 18,717 samples, including beach water, drinking water and wastewater. Also, the Microbiology Lab

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identified 80,142 mosquitoes of 13 different species from 1,152 mosquito traps and prepared the specimens for West Nile Virus and Zika Virus testing by NYSDOH.

Appendix A: Fiscal Year 2018, Charts

NASSAU COUNTY DEPARTMENT OF HEALTH
FY2018 REVENUES
BY TYPE

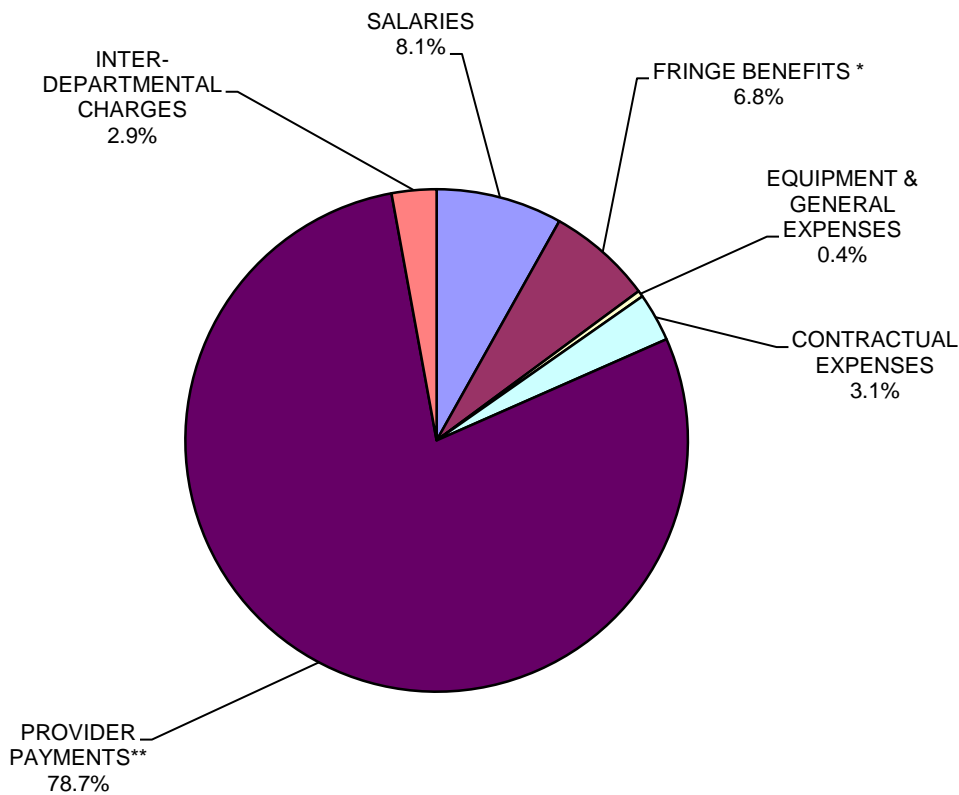


PERMITS & LICENSES	\$6,834,984
FINES	305,885
FEES & THIRD-PARTY BILLINGS	8,063,570
STATE AID	85,822,790
MISCELLANEOUS & RECOVERIES	282,098
COUNTY FUNDS	70,918,302
TOTAL	\$172,227,629

Nassau County Department of Health • Annual Report 2018

FY2018 EXPENDITURES BY TYPE

NASSAU COUNTY DEPARTMENT OF HEALTH FY2018 EXPENDITURES BY TYPE

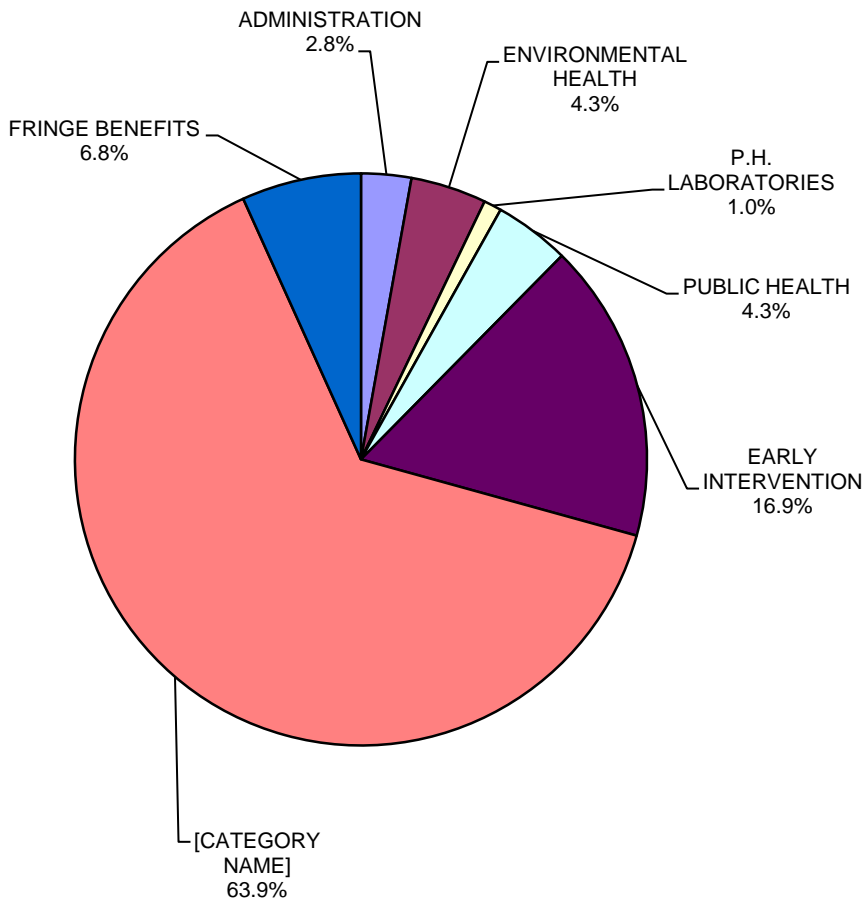


SALARIES	\$13,984,401
FRINGE BENEFITS *	11,633,128
EQUIPMENT & GENERAL EXPENSES	692,828
CONTRACTUAL EXPENSES	5,380,781
PROVIDER PAYMENTS**	135,579,638
INTER-DEPARTMENTAL CHARGES	4,956,853
TOTAL	\$172,227,629

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

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

**NASSAU COUNTY DEPARTMENT OF HEALTH
FY2018 EXPENDITURES
BY CONTROL CENTER**

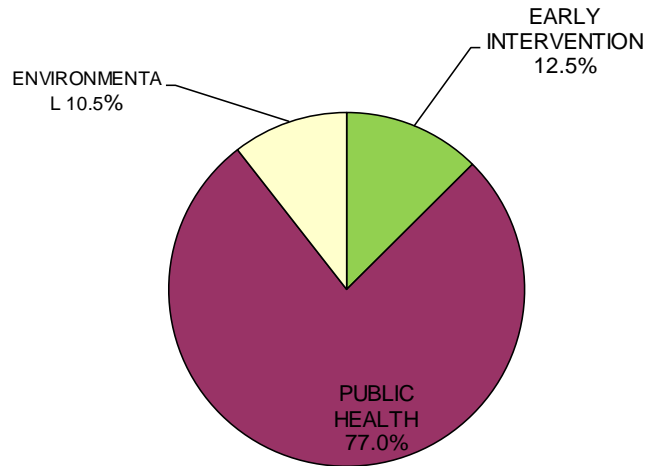


HE10 -	ADMINISTRATION	\$4,880,347
HE20 -	ENVIRONMENTAL HEALTH	7,371,468
HE30 -	P.H. LABORATORIES	1,730,837
HE40 -	PUBLIC HEALTH	7,361,217
HE51 -	EARLY INTERVENTION	29,108,684
HE54 -	PRE-SCHOOL EDUCATION	110,141,948
FB10 -	FRINGE BENEFITS	11,633,128
	TOTAL	<u><u>\$172,227,629</u></u>

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 2018

NASSAU COUNTY DEPARTMENT OF HEALTH FY2018 GRANT SUPPORT BY PROGRAM



EARLY INTERVENTION	\$697,714
PUBLIC HEALTH	\$4,299,146
ENVIRONMENTAL	\$587,252
TOTAL	<u>\$5,584,112</u>

* Environmental Grants list:

Adolescent Tobacco Use Prevention Act (Atupa)
Bathing Beach Water Quality Monitoring & Notification
Drinking Water Enhancement
Rabies

* Public Health Grants list:

Child & Family Safety
Childhood Lead Poisoning Prevention
Children with Special Healthcare Needs
HIV Expanded Services
Immunization Action Plan
Improving HIV Outcomes
Performance Incentive - Disease Control
Public Health Campaign - STD
Public Health Emergency Preparedness (PHEP)
Response to Ebola Preparedness
State Homeland Security Program
STD Disease Intervention Services
Tuberculosis Prevention & Control Program
Women, Infant, & Children (WIC)

Nassau County Department of Health • Annual Report 2018

Appendix B: Communicable Disease Control Annual Table

	2018 December	2018 YTD	2017 YTD	2016 YTD	2015 YTD	Ave (2015- 2017)
Disease	# Cases	# Cases	# Cases	# Cases	# Cases	# Cases
AMEBIASIS	1	13	18	20	21	20
ANAPLASMOSIS**	0	4	6	5	1	4
BABESIOSIS**	4	9	7	5	8	7
CAMPYLOBACTERIOSIS**	25	351	275	220	291	262
CHIKUNGUNYA**	0	0	2	2	13	6
CRYPTOSPORIDIOSIS**	1	13	7	7	10	8
CYCLOSPORA	0	10	0	4	5	3
DENGUE FEVER**	1	2	2	9	6	6
ECOLI SHIGA TOXIN**	4	46	18	19	12	16
EHRlichiosis (CHAFEENSIS)**	0	3	3	2	0	2
EHRlichiosis (UNDETERMINED)**	0	1	1	1	0	1
ENCEPHALITIS, OTHER	0	1	0	2	0	1
GIARDIASIS	3	65	73	105	91	90
HAEMOPHILUS INFLUENZAE, INV B	0	0	1	1	1	1
HAEMOPHILUS INFLUENZAE, NOT TYPE B	3	32	26	37	14	26
HEMOLYTIC UREMIC SYNDROME**	0	1	0	0	0	0
HEPATITIS A	0	11	15	10	8	11
HEPATITIS B,ACUTE	0	2	4	3	4	4
HEPATITIS B,CHRONIC**	140	409	487	410	412	436
HEPATITIS C,ACUTE**	0	14	12	4	2	6
HEPATITIS C,CHRONIC**	231	466	507	576	565	549
HERPES INF, INFANT =< 60 DAYS	0	0	0	1	2	1
INFLUENZA A, LAB CONFIRMED	720	5004	3076	2548	2272	2632
INFLUENZA B, LAB CONFIRMED	62	3299	1402	874	299	858
INFLUENZA UNSPECIFIED, LAB CONFIRMED	2	32	6	6	6	6
INFLUENZA PEDIATRIC DEATH	0	0	0	0	1	0
LEGIONELLOSIS	4	87	88	57	65	70
LISTERIOSIS	0	11	9	9	6	8
LYME DISEASE** ****	2	31	30	48	44	41
MALARIA	0	6	6	12	6	8
MENINGITIS, ASEPTIC	1	41	58	69	69	65
MENINGITIS, OTHER BACTERIAL	1	4	10	6	6	7
MENINGOCOCCAL**	0	0	1	0	2	1
MENINGITIS, UNKNOWN	0	2	0	1	0	0
MUMPS**	0	15	8	56	1	22
PERTUSSIS**	9	35	47	87	68	67
ROCKY MTN SPOT FEVER**	0	3	7	2	1	3
SALMONELLOSIS**	17	168	168	145	156	156

Nassau County Department of Health • Annual Report 2018

S.PARATYPHI	0	4	0	0	0	0
SHIGELLOSIS**	7	121	45	38	79	54
STREP, GROUP A INVASIVE	5	44	54	44	29	42
STREP, GROUP B INVASIVE	6	108	156	126	98	127
STREP, GROUP B INV, EARLY/LATE ONSET	1	5	8	10	5	8
STREP PNEUMONIAE, INVASIVE**	7	99	109	83	78	90
TOXIC SHOCK SYNDROME, STREPTOCOCCAL**	0	1	0	0	0	0
TYPHOID FEVER	0	4	7	3	2	4
VISA	0	0	1	0	0	0
VIBRIO - NON O1 CHOLERA**	0	18	12	6	11	10
WESTNILE VIRUS**	1	12	7	6	7	7
WESTNILE FEVER**	0	2	2	1	2	2
YERSINIOSIS	1	11	11	3	7	7
ZIKA VIRUS (SYMPTOMATIC)**	0	0	5	52	1	19
ZIKA VIRUS INFECTION (ASYMPTOMATIC)**	1	3	6	7	0	4
CONGENITAL ZIKA VIRUS INFECTION (ASYMPTOMATIC)**	1	1	0	0	0	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

**** In 2015-2016, 25 counties investigated a sample of positive laboratory results; in 2017, 27 counties sampled; in 2018, 30 counties sampled.

Green: Heightened Surveillance

Yellow: Immediate Response