

ANNUAL REPORT 2017

Chautauqua County Department
of Health and Human Services



LOVE YOURSELF
ENOUGH TO
LIVE A HEALTHY
LIFESTYLE



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Who We Are:

The Chautauqua County Department of Health and Human Services is a community of public health and social services professionals. In collaboration with our partners, we protect and promote the health, safety, and self-reliance of all those in Chautauqua County through the prevention of disease, proliferation of meaningful life, protection of the environment, provision of essential human services, and provision of leadership in public health and social crises.

Our divisions include Administrative Services, Adult Children & Family Services, Legal, Medical Assistance and Services, Temporary Assistance, Public Health and Youth Bureau.

Our Mission:

The Chautauqua County Department of Health and Human Services (DHHS) is dedicated to building a healthy, safe and strong community. We protect and promote the health of all County residents and provide essential human services, especially for those who are least able to help themselves.

Values/Principles:

We believe in improving the health and quality of life of our community through the prevention and treatment of disease and other physical, mental health and social conditions.

We believe that families should be protected from violence and gain support for their efforts to be self-sufficient.

We value work as a foundation of independence, a means to connect with others and a tool for personal growth and family preservation.

We believe in measuring our work by the difference it makes for clients and community. We strive to continually improve so that our interactions with clients and the community are efficient, focused, and understandable.

We value our commitments to others: urgency with the time and lives of clients; thoughtful investment of support from the community; careful consideration for the ideas and efforts of partners.

We value relationships—with clients, colleagues, and the community—as gifts to be nurtured. We invest in those relationships with honesty and respect. It is through the diversity of our relationships that we make change and are changed.

A Message From

Director Christine Schuyler

We are pleased to present our 2017 annual report and share some highlights of the Department of Health & Human Services' public service work for the residents and visitors of Chautauqua County. I am very proud of the work of our staff and the partnerships that we continued to cultivate throughout 2017.

2017 marked the fifth anniversary of the official integration of the County's Department of Health and Department of Social Services into one Department of Health and Human Services. Chautauqua is the only county in New York State with such a model and its success further emphasizes the need to work holistically and collaboratively to improve the health and well-being of our residents. We are uniquely poised to assess and address the most important influences on the health and resiliency of individuals, families, communities and the population as a whole. While factors such as access to health care, what we eat and drink, whether or not we smoke or use alcohol or substances, and the amount of physical activity we get play a role, we have come to realize more and more that social factors – the neighborhoods where we live, our support systems, education and income levels – actually play a tremendous role in determining our health and well-being. These social determinants of health are often the root cause of poor health and societal outcomes. DHHS staff work diligently day in and day out, and often unbeknownst to them, to positively impact these social determinants of health and improve the lives of Chautauqua County residents.

Our goal, through policy, education, direct service, advocacy, and partnering, is to help our residents be healthier, stronger, and safer. As you read through this report, you will see many of the people who are dedicated to this goal and learn about all we've accomplished in 2017.

It is an honor and privilege to be part of this Department, County Government, and this community. Together we are making a difference, improving lives, saving futures, changing systems and building a better community for all!



Above, County Executive Vince Horrigan (2017/center) cuts the ribbon celebrating the opening of the new Department of Health and Human Services central intake area at the South County Office Building.

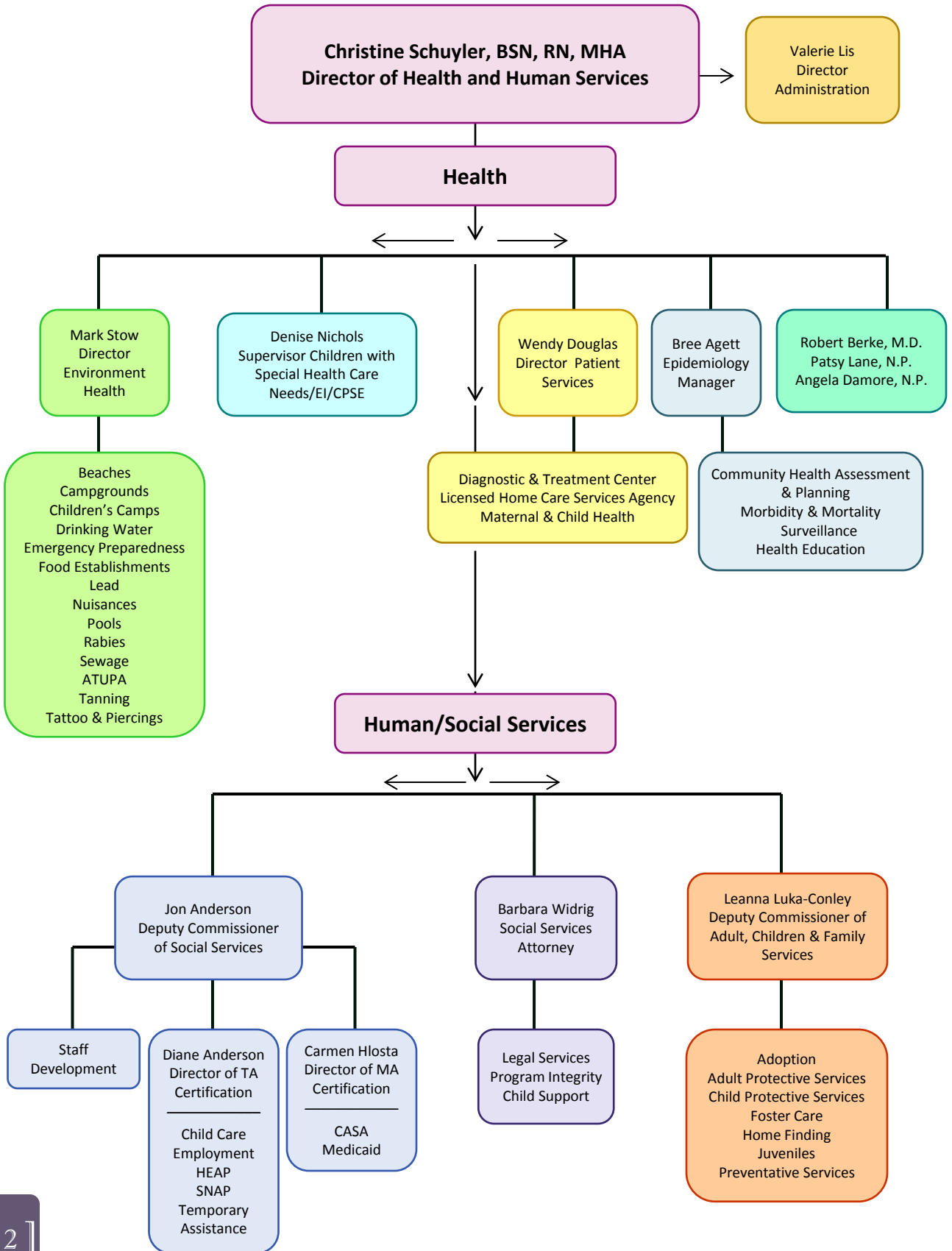
Sincerely,

Christine Schuyler, BSN, RN, MHA
Commissioner of Social Services/Public Health Director

New Central Intake Area Opens at the Jamestown Office

On February 15, 2017 the newly renovated Central Intake area located on the second floor of the building, will serve as the central service access point for the Department of Health and Human Services, which includes Temporary Assistance, Medicaid, Child Support, and Children and Family Services. This move offers a new and improved access point for front end service delivery.

Organizational Chart



Staff Honored for Service:

The following employees received certificates from the Chautauqua County Executive commending them for their years of service to the County.

5 Years

Ranee Culver
Laura Classon
Rebecca Davison-March
Stephanie Gruber
Irma Guzman
Nicole Illig
Sherryl Joslyn
Melissa Krofka
Laura Lamonica
Patsy Lane
Valerie Lis
Tomasina Melice
Stephanie Norrod
Jon Sabella
Debra Woodlee
Amber Zappella

10 Years

Yvonne Ameno
Patricia Bennice
Jennifer Clever
Brandy Freitas
Laurie Dolce
Nanette Dunham
Anne Frankson
Christine Heitzenrater
Charlyn Huntington
Janelle Hartloff
Elizabeth Lessinger
Debra Lintz
Niccho Maione
Corie Maxon
Audra Moeller
Shannon Olson
Christine Ortolano
Paul Phillips
Theresa Rolfe-Szymanek
Chels Sweeney
Rebecca Winchester

20 Years

Colleen Anger
Teresa Crowell
James Cunningham
Lori Everson
Theresa Ibach
Christine Johnson
Aurea Ruiz
Darlene Rowe

30 Years

Debra Pacheco
Brent Sheldon

2017 Retirees

Sue Clawson, Administration
Shari Grice, Health
Pat Hooks, Fiscal
Marietta Kellogg, Nursing
Susan Kestler, TA
Christine Lindberg, TA
Jane Love, Legal

Jim Metzger, Environmental Health
Dave Nelson, Services
Beth Phelps, Administration
Barb Price, TA
Darlene Rowe, Nursing
Linda Spann, MA
Laurie Winkler, Services

-Thank You For Your Service!

Employee Recognition

Our Lifesaver program is an employee recognition program promoting employees to nominate people for Lifesavers. A Lifesaver helps us to keep our heads above water, take a deep breath, smile and find the motivation to hang in there.

Our 2017 Quarterly Lifesaver winners are:

- 1st Quarter: Bree Agett, Health Department
- 2nd Quarter: Sabrina Parrilla, Temporary Assistance, Eligibility Team
- 3rd Quarter: IT WAS A TIE! Corie Maxson, Child Protective Services and Tim Arroyo, Temporary Assistance, Employment Team
- 4th Quarter: Cathy Melnick, Medicaid, Undercare



Sabrina Parrilla



Corie Maxson

~A few of our Lifesavers from 2017~

Irma Guzman, TA Undercare, Irma is a true example of a “team player.” She is always willing to assist her co-workers in any way she can. Often times if she receives work that does not belong to her, she will still choose to complete the work in order to help another worker on the team. Irma is extremely helpful, thoughtful, and caring. The Undercare Team is very lucky to have her!.....submitted by Jennifer Carlson

Debra Woodlee, CSEU, Debra is so patient when going over any fiscal adjustments that I am trying to do. Recently she took the time to do visual references to explain over-disbursements on accounts, and what it looks like when they are fixed. I knew how to fix them, but until Debra took the time to visually show what it looks like I didn't really understand what was happening. Now I do! And we can share her visuals with new staff to explain the accounting better so everyone benefits. Debra is a lifesaver!.....submitted by Kari Wendel

Lisa Schmidtfrerick-Miller, Health, Lisa helped a Village of Westfield resident to make the connections he needed to have a “huge, dangerous county ditch” in front of his house repaired and filled. Until the resident heard of Lisa and her Complete Streets expertise, he struggled to obtain any results from Village or County officials. He is very grateful, and is very proud of the work Lisa did to help him out and to keep pedestrians and motorists safe.submitted by Bree Agett

Louis Tsitso, Cleaner, I would like to nominate Louis Tsitso who is our cleaner in SCOB. The cleaning staff is awesome. Recently I left \$20.00 cash on my desk by accident overnight. Louis came back the next morning on his own time and showed me where the money was put for safe keeping. Other employees have told me similar stories of our cleaning Team's honesty and Integrity. That makes me even more proud to be a Chautauqua County Employee!!submitted by Kathy Hilton



Cathy Melnick

Barb Moore, Services Foster Care, Barb is always willing to help out and goes out of her way to make sure that clients' needs are met. Barb recently stepped in at the last minute to take two children in foster care to visit their mother when the assigned worker had an emergency. This visit was particularly important as it was one child's birthday. Barb also helps out with completing important paperwork and requesting necessary records when children are placed in care. Barb is a great co-worker!...submitted by Sara Becker



Tim Arroyo

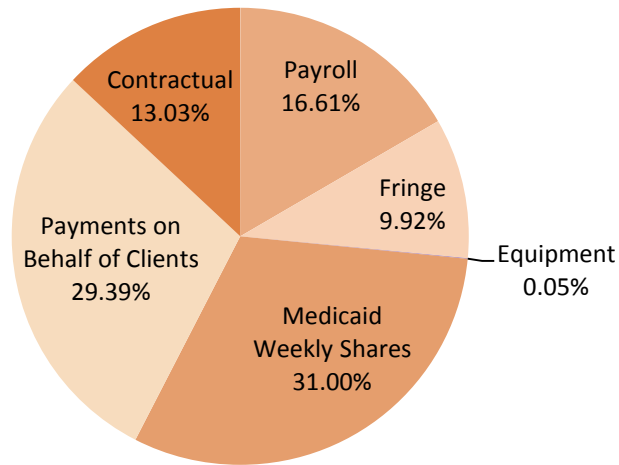
Brenda Lemke, TA Case Management, Brenda has been a true Lifesaver!! Brenda has been available to answer any of my questions regarding my new caseload!! Thank you Brenda!!.....submitted by Chels Sweeney

At a Glance

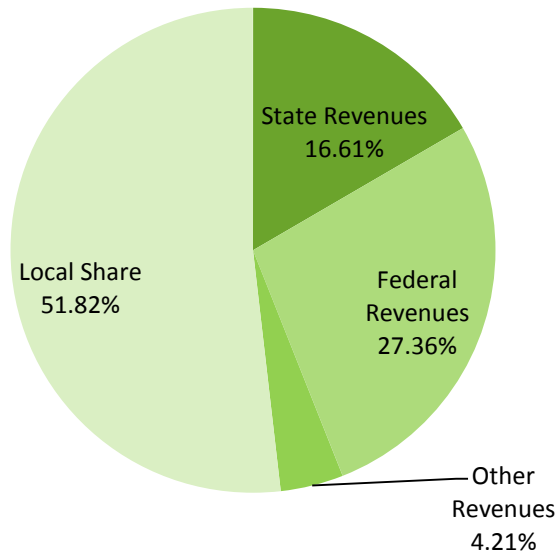


2017 Budget Expenditures totaled \$97,114,353. The charts below reference percentages for expenditures and funding.

2017 DHHS Expenditures by Type



2017 DHHS Funding by Source



Program Activities & Caseload Summary








CASELOAD REPORT Caseload on December 31st

	2016	2017
Temporary Aid to Needy Families (TANF)	2,198	2,497
Medicaid (MA)	21,414	14,109
Supplemental Nutrition Assistance Program (SNAP)	12,365	11,390
Adult Protective Services Cases (APS)	511	511
Children in Foster Care	105	103
Children in Day Care	1,217	1,219

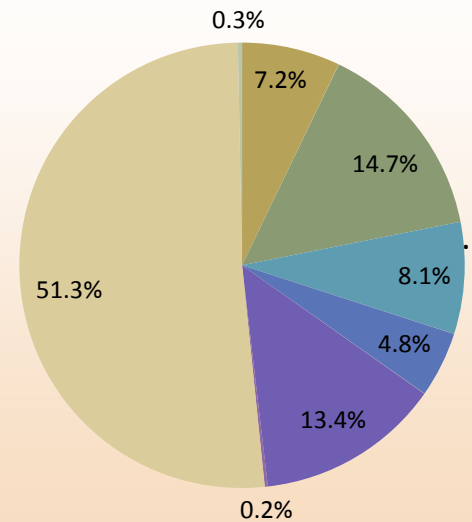
PROGRAM ACTIVITIES Cumulative for year

	2016	2017
Abuse/Neglect Reports Resulting in Investigations	2,468	2,486
TA, MA & SNAP Applications Received	17,474	16,012
Managed Care Enrollment	26,847	27,224
Sanctions	713	563








Social Services Client Expenditures By Program

PROGRAMS		2016	2017
Medical Assistance Program		\$30,441,671	\$30,101,850
Temporary Aid to Needy Families		\$9,254,249	\$8,636,517
Safety Net		\$8,117,614	\$7,846,197
Day Care		\$4,397,777	\$4,190,606
Foster Care/Institutional		\$4,364,833	\$4,761,897
Juvenile Delinquent Care and State Training School		\$693,399	\$2,796,878
Other		\$427,786	\$311,387
TOTALS		\$57,419,730	\$58,645,332

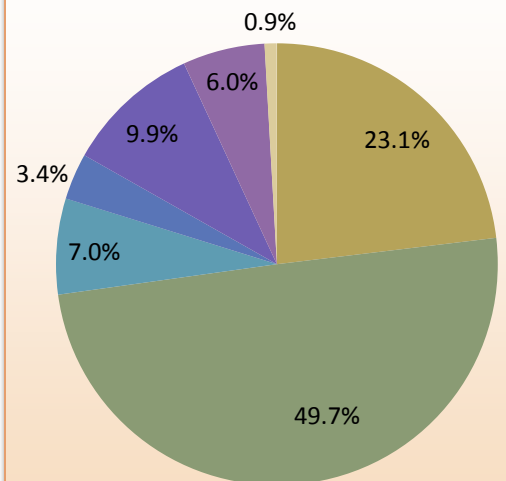
2017 Social Services Client Expenditures



Health Revenues

PROGRAMS		2016	2017
Preschool Special Education		\$3,811,723	\$4,549,342
State/Federal Grants		\$1,937,521	\$2,114,312
State Aid		\$774,138	\$904,304
Fees for Service		\$727,810	\$551,423
Early Intervention		\$534,405	\$642,832
Nurse Family Partnership		\$222,927	\$310,044
Other		\$113,162	\$84,000
TOTAL REVENUE		\$8,121,686	\$9,156,257

2017 Health Revenues



Administrative Services



The Administrative Services Division is responsible for the supervision and coordination of the fiscal and operating functions that support the operation of the Department of Health and Human Services.

Fiscal

Fiscal responsibilities include issuing benefits to eligible social services clients, audit and process administrative invoices ,reimbursement claims and representative paying accounting for clients; processes employee payroll; processes cash receipts; manages credit cards; prepares contracts; tracks vendor insurance certificate renewals; prepares and files reports and claims for reimbursement; assists with grant application processing; processes bank reconciliations and purchase orders; involved in various audits; prepares resolutions.

	2016	2017
Checks issued to social services clients	16,922	16,666
Electronic benefits issued to social services clients	50,911	49,400
Bills paid for representative payee clients	14,904	15,191
Open contracts	331	342



Fiscal Staff

Staff Development

The DHHS Staff Development Unit is operated by a two-person staff development team who perform a wide variety of tasks designed to strengthen the department's ability to function effectively in a rapidly changing, resource lean operating environment while maintaining a focus on the training needs of the front line staff. Special emphasis continued to include assessing training needs and creating and maintaining an environment within which staff have timely access to information and training resources to advance their success and ensure greater attention to agency performance outcomes and promoting life-long learning and continuing education services.

Hours of Training	2016	2017
Local	8,015	6,388
State	5,926	6,722
Total	13,941	13,110

	2016	2017
Employees in Degree Programs	5	7



Personnel

Personnel has the responsibility of coordinating and completing all personnel related functions for the department. This includes coordination with supervisors and staff during the new hire process, evaluations, promotions, leaves of absences, intradepartmental moves and separation process. Personnel coordinates Civil Service regulations and procedures and acts as a Liaison to Chautauqua County Human Resources Department.

	2016	2017
Number of Employees	374	371
Position Change Requests	201	178



HUMAN/SOCIAL SERVICES

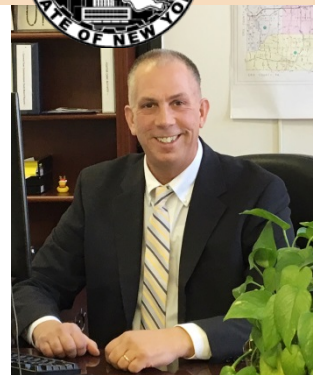


Human/Social Services Division encompasses Temporary Assistance, Medicaid, Adult, Children and Family Services and Legal with over 300 staff members to accommodate the needs of Chautauqua County residents.

The Temporary Assistance (TA) Division is responsible for the administration of the Temporary Assistance, Supplemental Nutrition Assistance Program (SNAP, formerly known as Food Stamps), Home Energy Assistance Program (HEAP), Employment and Child Care programs. Collectively, the Division assists thousands of individuals, families, and children in our community with meeting their basic needs such as housing, home heating and cooling overcoming homelessness, and nutritional supports. In addition, the Division delivers programming aimed at removing barriers to employment including educational, employment, and child care supports.

The Medicaid Division (MA) assists eligible individuals in our community in obtaining necessary and appropriate medical care through programs such as Medicaid, Medicaid Social Security Income (SSI), Personal Care Supports including nursing and personal care aids, managed care insurance, and long-term care supports, among others. The Division is charged with ensuring that eligible individuals, children, and families have access to quality care supports, with the aim of improving community health outcomes.

The Adult, Children and Family Service Division assists the most vulnerable and at-risk children and adults in our community and includes the Adult Protective Services (APS), Child Protective Services (CPS), Preventive Services, Foster Care, Adoption, and Juvenile Services units. The role of Adult Protective Services is to provide protective and preventive services to individuals over 18 where there is an inability to act on their own behalf with the aim of ensuring self-determination, and the ability to live as safely and independently as possible in the community. Child Protective Services role is to investigate, intervene and support family and caregivers ability to safely care for their children where there are allegations of abuse and maltreatment of children. Preventive Services works in the homes at-risk children providing supportive and rehabilitative services that are trauma-informed, solution-focused, child centered, and strength based to prevent out-of-home placement and to assist families to return their children from foster care at an earlier time, while foster care offers children a safe living environment while assistance is offered to families and caregivers. Finally, the Juvenile Services Team is a community-collaboration aimed at preventing out of home placement and institutional care for juveniles and adolescents and reducing the likelihood of contact with the criminal justice system.



Jon Anderson
Deputy Commissioner
of Social Services



Leanna Luka-Conley
Deputy Commissioner of
Adult, Children & Family
Services

Temporary Assistance Division



The Temporary Assistance (TA) Division is responsible for the administration of the Temporary Assistance, Supplemental Nutrition Assistance Program (SNAP, formerly known as Food Stamps), Home Energy Assistance Program (HEAP), Employment and Child Care programs.

The goals for each of these units are as follows:

- Assist clients in achieving self-sufficiency;
- Provide accessible and timely services to applicants and recipients; and
- Provide a high level of customer service.



Temporary Assistance Supervisory Staff
Diane Anderson (middle) – Director of Certification
Denise Smith (left) Vicki Coan (right)
Principal Social Welfare Examiners

Temporary Assistance

Temporary Assistance is the program that provides cash assistance to eligible recipients. Recipients receive a cash benefit either paid to them or directly to a vendor, such as a landlord or utility company. The cash grant is based on their household composition, shelter and heating type. Income received by the household may affect the amount of the grant. Resources are also reviewed in determining eligibility for Temporary Assistance.

Applications

Family Assistance, Safety Net and Emergency Assistance

	2016	2017
Received	5,473	9,527
Approved	1,417	1,930
Denied/Withdrawn	3,267	5,603
Open/Closed	992	2,163



Eligibility Unit

Temporary Assistance Caseload (as of 12/31)

2016	2017
2,198	2,497

Supplemental Nutrition Assistance Program (SNAP)

SNAP (formerly known as Food Stamps) is a federally funded program administered by the Department of Health & Human Services for the United States Department of Agriculture. The goal of the program is to provide a higher level of nutrition to income eligible individuals and families by enhancing their ability to purchase food. Eligibility for the program is determined by financial criteria.



SNAP Unit

SNAP Caseload *(as of 12/31)*

	2016	2017
Temporary Assistance SNAP	564	530
SNAP Only (Non TA Households)	11,801	11,390
TOTALS	12,365	11,920

SNAP Applications

	2016	2017
Received	5,905	6,485
Approved	5,775	7,260

Expedited SNAP

All SNAP applications must be screened in order to determine those households that qualify for expedited SNAP benefits. This includes, for example, individuals who have terminated income, or pending income. Identification is required of all applicants. Any income received within the month of application, together with liquid resources, is budgeted against amounts to determine eligibility. Interviews are conducted on an immediate basis so those eligible households may receive their SNAP benefit within 5 calendar days.

Dunkirk Assistance Staff:
 Emergency Assistance,
 Eligibility, TA, MA, HEAP,
 Child Support



Child Care

The Child Care Unit provides child care subsidy to recipients of Temporary Assistance who are participating in employment activities (subsidized employment, unsubsidized employment, work experience, job search, education, training, etc.). Child care subsidy is also provided to recipients of Child Protective Services or Preventive Services. Low income working families and recipients who are transitioning from Temporary Assistance to employment may also qualify for child care subsidy. These benefits are provided to assist families in obtaining and maintaining employment and self-sufficiency.

	2016	2017
Families Receiving Child Care Services <i>(average per month)</i>	715	716
Children Receiving Child Care Services <i>(average per month)</i>	1217	1095



Child Care Staff

Home Energy Assistance Program (HEAP)

HEAP provides energy assistance to low income households through payments to those household’s fuel and/or utility suppliers. The program also provides emergency assistance for repair or replacement of essential heating equipment and in fuel emergency situations.

The Chautauqua County Department of Health & Human Services HEAP unit is responsible for the processing of all HEAP applications for those households who do not receive Temporary Assistance or SNAP.

The 2016 – 2017 administrative allocation for Chautauqua County totaled \$379,444. Payments authorized by the County are sent directly from Albany to the vendors. The Allocation is for Administrative costs only. HEAP is 100% federally funded.

	2015-2016	2016-2017
Administrative Allocation	\$339,091	\$379,444

Applications	2015-2016	2016-2017
HEAP Only	4,278	4,674
Furnace Repair/Replacement	71	105

Employment Unit

The employment unit consists of 15 Case Managers, 2 Clerical staff and 2 Senior Social Welfare Examiners. The unit offers a variety of programs and services to Temporary Assistance recipients to help them gain and retain employment and become self-sufficient.

The programs and services include employability assessment and planning, job readiness training, work experience and job search. Other activities include the Transitional Employment Advancement Program (TEAP) and On-The-Job Training programs.

	2016	2017
Non-Compliance Sanctions	713	563



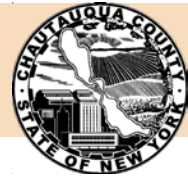
Fair Hearings

Fair Hearings is the process applicants and recipients have to review Agency decisions made on their application or active case. The Fair Hearing Representative is responsible to represent the Agency in this process.

Fair Hearings Activity	2016	2017
Hearings Requested	349	339
Held	43	48
Affirmed	28	34
Reversed	10	7
Withdrawn by Client	103	84
Withdrawn by Agency	96	104
Defaults	88	103



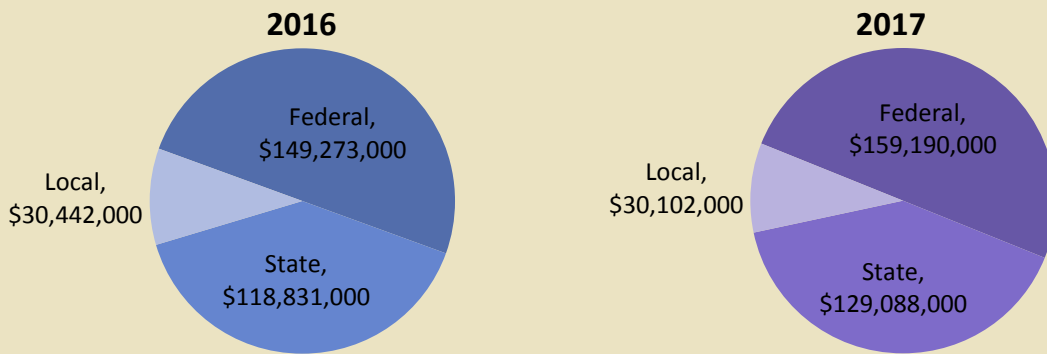
Medicaid



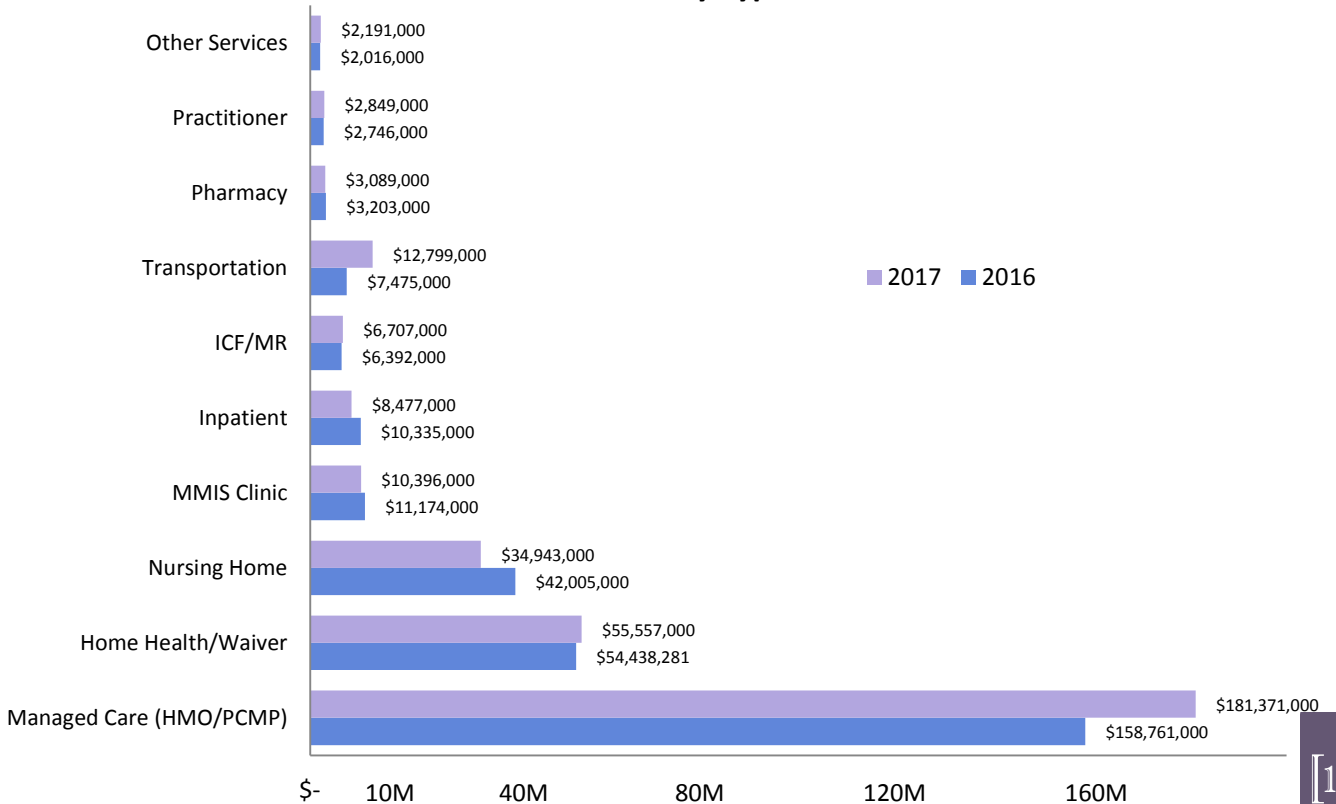
Overview

Generally, the medical plan for low-income American, Medicaid, is financed jointly at the federal (50%) and state (50%) levels. In New York State, however, responsibility for the State's 50% share is borne by both the State (25%) and county (25%) governments. New York is one of the few states in the nation that requires a local contribution. Because of the dramatically rising cost of Medicaid to local governments, New York State enacted a Medicaid cap effective January 1, 2006. This cap limits the growth of each county's Medicaid costs to no more than 3% per year. Chautauqua County is currently responsible for approximately 10% of the cost sharing.

Federal, State and Local Shares of Medicaid Claims



Medicaid Claims by Type 2016-2017



The mission of the Chautauqua County Medical Assistance Division is to provide access to cost-effective medical services to all eligible persons in a professional manner through the use of enrolled healthcare providers. The Department of Health and Human Services staff provides application assistance, case management and other duties related to the administration of the Medicaid Program.

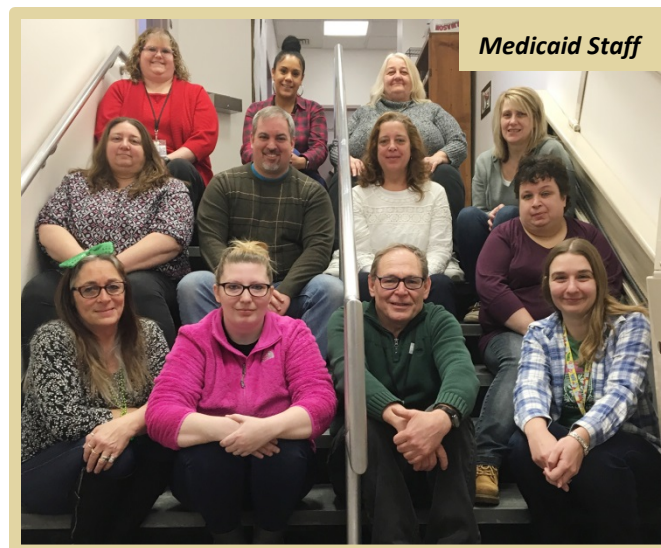
The NYS Department of Health began the takeover of Administration of the Medicaid program in 2011. Also occurring simultaneously is the implementation of the Affordable Care Act which includes an increase in the income level for Medicaid eligibility to 138% of the federal poverty level.

In addition to the increase in income levels, the New York State of Health Marketplace was opened in October of 2013. It has been a slow transition and we keep getting moved back for the takeover of the renewals and at present are slated to go in March of 2018.

Community Medicaid

Cases <i>Measured by case, not individual</i>	2016	2017
Medicaid	14,556	8,376
Medicaid Social Security Income (SSI)	5,179	4,525

Applications <i>combined</i>	2016	2017
Received	6,096	1,559
Approved	4,813	536



Cost Avoidance Unit (CAU)

Managed Care Enrollment (*individuals*)

Chautauqua County Social Services is a Mandatory Medicaid Managed Care County. In 2010 Governor Cuomo signed Executive Order #5 which created the Medicaid Redesign Team (MRT) in January 2011. The MRT is aimed at redesigning New York's outsized Medicaid program. One overarching theme of the redesign team proposals is to move all Medicaid recipients from Fee for Service reimbursement to Managed Care. If recipients do not select a managed care plan, the State assigns one for the recipient. Each mandatory Social Service District is to maintain a minimum 20% auto-assign rate. Due to successful education and outreach efforts by the Medical Services staff, we remained well below the 20% auto assignment rate.



Plan	2016	2017
Fidelis (NYS Catholic Health Plan)	22,422	22,466
HealthNow (BCBS)	2,349	2,622
United Healthcare	462	583
Your Care	1,614	1,553
TOTAL Enrollment	26,847	27,224

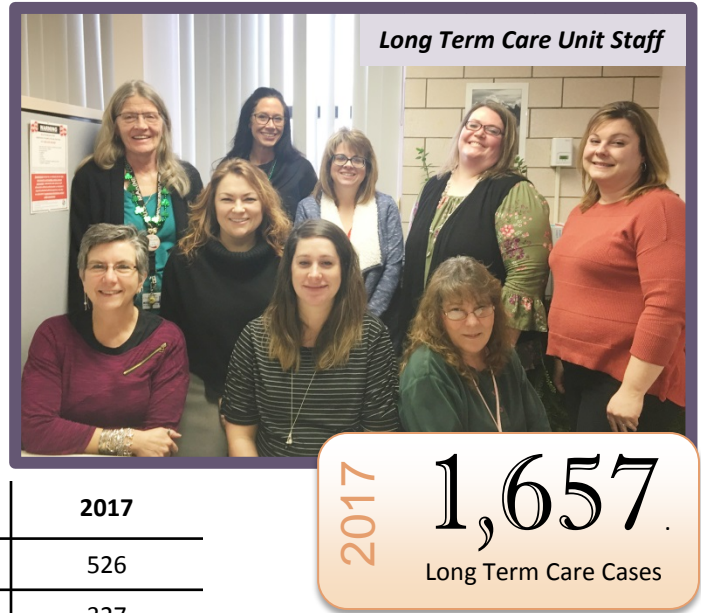
Third Party Resources (*TPHI*)

In an effort to save Medicaid dollars, clients are encouraged to utilize TPHI. For those applicants eligible for Medicaid that have TPHI, the Cost Avoidance Unit will verify the policy and load into the eMedNY system to block Medicaid from being billed first. Applicants can also apply to have their TPHI premiums reimbursed; so for those that have insurance available to them, this is an incentive to pick up that insurance rather than be enrolled in Managed Care, when found cost effective. CAU staff verifies and loads the TPHI, then processes the reimbursements of health insurance and Medicare premiums.

	2016	2017
Care at Home waiver enrollments	10	13

Long Term Care Unit

The Long Term Care unit consists of Skilled Nursing Facility (nursing home) and Assisted Living cases. The Assisted Living cases are considered community cases as they come and go from the Assisted Living Facilities. The Skilled Nursing Facility cases can be budgeted with spousal Medicaid to help keep the community spouse in their home and not losing income. There is a five year look back for Skilled Nursing Facility cases and they can join a Managed Long Term Care Plan (MLTC). Currently Assisted Living cannot join MLTC but will be able to in the future at some point.



Applications	2016	2017
Skilled Nursing Facilities	525	526
Assisted Living Programs	367	327
TOTALS	892	853

Cases	2016	2017
Skilled Nursing Facilities	1315	1293
Assisted Living Programs	364	364
TOTALS	1679	1657

Managed Long Term Care

Chautauqua County Social Services is a Mandatory Medicaid Managed Care County. In 2010 Governor Cuomo signed Executive Order #5 which created the Medicaid Redesign Team (MRT) in January 2011. The next phase was NY State's Medicaid Redesign Initiative (MRT#90) to which is to transition Dual Eligible individuals, age 21 and over, requiring more than 120 days of community based long term care services (CBLTCS) to Managed Long Term Care Plans (MLTCP). CBLTCS are defined as: Home Health Care, Personal Care Services, Adult Day Health Care, Consumer Directed Personal Assistance Program, and Private Duty Nursing. This went into effect in Chautauqua County July 1, 2015.

Managed Long Term Care Enrollment	2016	2017
Fidelis Care at Home	137	171
Kalos	102	165
VNA Homecare Options	133	235
Total Senior Care (PACE)	0	0
Total Enrollment	372	571

Other Medicaid Services

Health and Recovery Plans (HARP)

Introduced in July 2016, HARP is a managed care product that manages physical health, mental health, and substance use services in an integrated way for adults with significant behavioral health needs (mental health or substance use).

	2016	2017
HARP Enrollment	735	974

Disability Review

Medicaid Aid to Disabled is a special program to maximize federal reimbursement through the use of the Aid to Disabled category in Medicaid that assists the NYS Department of Health in demonstrating cost neutrality for the 1115 Managed Care Waiver.

	2016	2017
Cases reviewed for Aid to Disabled Category	38	41
Cases eligible for Aid to Disabled Category	35	39

Medicaid Fair Hearings

A Fair Hearing is the process applicants and recipients have to review Agency decisions made on their application for Assistance Programs. The Fair Hearing Specialist is responsible to represent the Agency in this administrative process.

	2016	2017
Heard	5	16
Affirmed	4	11
Reversed	1	2
Decision correct when made (new information provided)	0	3
Withdrawn	36	42
Default	54	24
Total Medicaid Hearings	95	82

PARIS Match

PARIS Match is a Public Assistance Reporting Information System (PARIS) to locate individuals who are in receipt of public assistance benefits in other states and may be ineligible to receive cash and/or SNAP (Supplemental Nutrition Assistance Program) benefits in NYS. A federal agency known as the Defense and Manpower Data Collection Department compare lists. When duplicate matches are found local offices are notified. Our local Program Integrity Unit and Cost Avoidance Unit work together to dis-enroll and recover Managed Care capitation fees.

Money Recovered from PARIS Match

2016	2017
\$87,668	\$65,469

CASA Services

The CASA (Community Alternative Systems Agency) Unit monitors service provision in Personal Care Services, nursing home and other long term care programs. This includes informing patients of their rights, and insuring appropriateness of care and level of care requested.

CASA is the central access point for the consumers of long term care, from home care to nursing home. CASA helps families, regardless of age or payer source, to navigate their way through the myriad of long term care options available in Chautauqua County. We are partners with Office for The Aging for NY Connects.



CASA Services Staff

The Long Term Home Health Care Program was closed in May of 2016 by the State as the clients were enrolled into MLTC plans which covered the services they received under the program that closed. We are going to be adding waived services into state plan services under the Community First Choice Options effective April 1, 2018. This will require the county to contract with the waived services and it will be billed through the MMIS system as FFS MA services are billed currently. MLTC plans will be implementing this at the same time.

End-of-Year Caseload Report	2016	2017
Traditional Personal Care I & II	92	79
Managed Care - Personal Care I & II	7	7
Shared Aide I & II	13	8
Consumer Directed	22	35
UAS Waiver TBI/Nursing Home Transition Diversion Waiver	8	7
Care at Home (CAH)	11	14
Private Duty Nursing (LPN)	9	9
Drug Restriction (DUR)	7	17

Personal Care Aides	2016	2017
Level 1 (housekeeping)		
Hours Authorized	11,507	12,532
Money Paid Out	\$360,130	\$213,796
Level 2 (housekeeping, bathing, dressing, etc.)		
Hours Authorized	16,845	13,312
Money Paid Out	\$218,689	\$209,650

Clients hours go un-serviced when personal care aides are not available.

There is currently a shortage of personal care aides in our area for this type of service.

Adult, Children and Family Services



Adult Protective Services

Adult Protective Services (APS) provides protective services for clients over 18 years of age who are unable to act on their own behalf due to mental or physical impairment while respecting a client’s right to self-determination. Preventive services are also available.

2017

511

Adult protective referrals received.

	2016	2017
APS referrals received	511	511
Assigned referrals for assessment	388	429
Guardianship petitions filed	1	0
DHHS Commissioner appointed Guardian	1	0
DHHS Commissioner served as Guardian	13	9

APS Intake	2016	2017
Adult Abuse	181	132
Self-Neglect	94	81
Mental Health	237	257
Financial Exploitation	99	64



Child Protective Services (CPS)

Receives and investigates reports from the State Central Registry (SCR) concerning the abuse or maltreatment of children. CPS also strives to help families provide for the future safety of children by direct service and referrals.

CPS Standards of Practice:

The role of CPS is to investigate allegations of maltreatment reported to The State Central Registry and to offer rehabilitative services to families as needed, to build on parents' strengths and protective factors to reduce risk of maltreatment in the future. CPS uses a trauma-informed approach to working with families and solution-focused skills to engage families as they focus on the safety of children.

SCR Reports	2016	%	2017	%
New Reports	2,079		2,068	
Subsequent Reports	389	18.7%	418	20.2%
Consolidated Reports	539	25.9%	663	32.0%
Investigations				
Reports Resulting in Investigations	2,468		2486	
Determined	2,104		2,185	
Indicated	589	27.9%	624	28.5%
Unfounded	1,515	72.0%	1,561	71.4%



Chris Kowalewski
CPS Supervisor

Definitions:

New Reports – also known as initial reports is are reports received from the State Central Register (SCR) on a family that we are not currently working with.

Subsequent Reports – reports received from the SCR on families we are currently working with.

Consolidated Reports –are subsequent reports that are consolidated into the initial (new) report. Subsequent reports require a separate investigation of the same family whereas consolidated reports do not. Consolidated reports required the allegations in the report be addressed, however forms and reports associated with the initial report do not need redone. While we strive to consolidate as many subsequent reports as possible special circumstances do not allow us to consolidate all.

Indicated Reports – reports where upon investigation the department has determined there is some credible evidence (Legal Standard of Proof) to support the allegations of abuse or maltreatment.

Unfounded Reports – reports where upon investigation the department has determined there is no credible evidence to support the allegations of abuse or maltreatment.

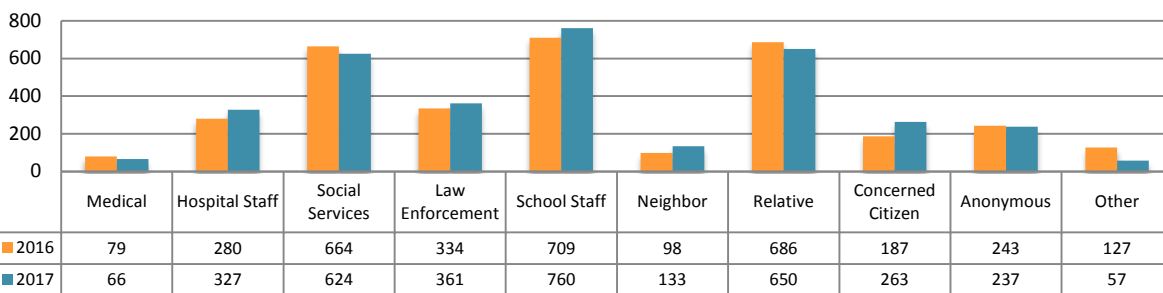
CPS Staff, Dunkirk



CPS Staff, Jamestown



Number of SCR Reports called in by Source



Preventive Services

Preventive Services provides in-home supportive and rehabilitative services that are trauma-informed, solution-focused, child-centered, family-focused and strength based. This guidance to at-risk families is intended to prevent out of home placement of children, enable a child in care to return to his/her family at an earlier time, and to reduce the likelihood that a child will return to foster care once discharged. Creative and individualized family goals will promote safety and self-sufficiency, build on parental protective factors and skills, enhance family dynamics, preserve the family, and envelope the family with a community support system.

Our preventive casework staff use critical thinking skills, case conferences that support group decision-making and motivational interviewing. A thorough assessment of contributing factors and underlying conditions will be used to build a service plan with the family. The family is seen as the experts on their own lives and a partner in the planning process.



Melissa Emke-Gehling,
Preventive & Foster Care
Services Supervisor

	2016	2017
Families Served	211	209
Children Served	427	447

Foster Care Services

Foster Care services in Chautauqua County provide out-of-home care for children in the custody of the Commissioner of Social Services. Foster care plays an important role in providing temporary, safe and nurturing homes to children when their parents are unable to care for them. Children are placed in foster homes in situations where they have been removed from their own families due to abuse, neglect or other family problems that endanger their safety. The children may range from infancy through 18 years of age and may have special medical, physical or emotional needs; the children may belong to any ethnicity or race and be part of a group of brothers and sisters who need to be placed together.

The following is a 2-year comparison of key activities regarding children who have been placed in foster care:

	2016	2017
Children Placed – all levels of care	77	89
Children Discharged – all levels of care	90	91
Children freed for adoption	26	21
Children freed with no home identified	6	1
Adoption Finalized	25	31
Children in foster homes (12/31)	80	84
Children in institutions (12/31)	17	15
Children in group homes (12/31)	0	2
Children in therapeutic foster homes (12/31)	8	2
Children in all levels of care (12/31)	105	103

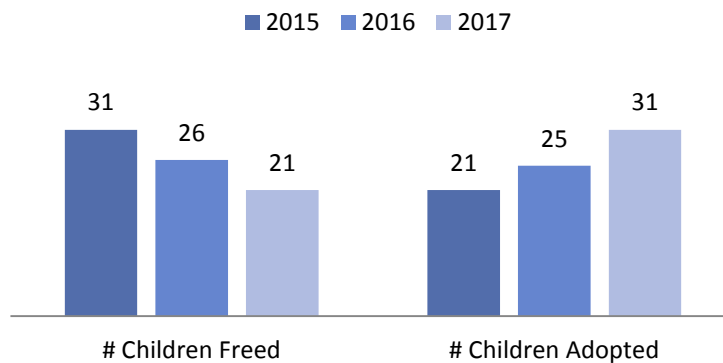
Adoptive and Foster Home Finding

Our Home Finding & Adoption Teams work diligently at recruiting new foster parents, equipping our foster parents with the tools they need to succeed and finding forever homes for children in Chautauqua County.



Certified Foster Homes	2016	2017
South County (<i>Jamestown & surrounding area</i>)	35	34
North County (<i>Dunkirk/Fredonia & surrounding area</i>)	16	22
Central County (<i>Rural areas including Westfield, Mayville, Cassadaga, Sherman, Clymer, Ripley, Panama</i>)	13	17
Out of County	11	10
Totals	75	83

Children Freed / Adopted



Juvenile Services and Independent Living Teams

Provides preventive services and foster care for children and their families where a child is having behavioral or emotional problems and a child service need may also exist.

Juvenile Services Team (JST) is a collaboration between DHHS staff and the Office of Probation. While there are some placements out of the home, the focus of the team is preventive. PINS diversion services, DHHS preventive services, and CPS assessment and response all work toward preventing out of home placement for children/adolescents while developing the parental protection factors and strengths to reduce the family stressors and also address child service needs.

	2016	2017
Person in Need of Supervision (PINS)	108	103
Juvenile Delinquents	133	99
Totals	241	202

Juveniles in Office of Children and Family Services (OCFS) Care and Custody	2016	2017
Number of Juveniles Served	18	18
Care Days	3,875	5,250
Average Length of Stay	210	292



Collaborative Programs

Chautauqua County Department of Health and Human Services partners with many organizations throughout the county to enrich the lives of our residence and provide much needed services. Below are a list of a few of the programs that we sponsor regarding youth.

Transition to Independence Process Model (TIP)

The TIP program involves youth and young adults (ages 14-29) in a process that facilitates their movement towards greater self-sufficiency and successful achievement of their goals by empowering youth voice.



Samantha Muntz case worker with the Chautauqua County Health and Human Services Department and Arrick Davis a Community School Coordinator with Jamestown Public Schools meet with Marc Fagan to become train the Trainers in the TIP model funded through the Tapestry grant.

Supervision and Treatment Services for Juveniles Program (STSJP)

The Community School Coordinator position is funded through the STSJP and Jamestown Public Schools in partnership with The Chautauqua Center. This position assists with community and school engagement for students and their families, coordination of services and communication with juvenile justice system/child welfare. Outcomes measured are increase in school attendance, increase in grade average, avoidance of out of home placement and decrease in legal/behavior activity.

Arrick Davis Community School Coordinator with Jamestown Public Schools and Tom Langworthy Principal of the Tech Academy at Jamestown High School.



Non-Residential Services for Victims of Domestic Violence

Under contract with the Chautauqua County Department of Health and Human Services, the Salvation Army Anew Center provides a countywide non-residential domestic violence/rape crisis program. The non-residential component of the program offers a variety of services including: 24 hour hotline, case management, legal, medical and personal advocacy, transportation to court and other appointments, crisis intervention, children's program, prevention education, counseling, and support groups. Case management services include providing supportive counseling to victims of violence. Domestic violence and rape/sexual assault commonly contributes to a person's low self-esteem, anger issues, denial or minimization of abuse, financial difficulties, drug and alcohol dependency, and a variety of other problems. Therefore, services are provided to help victims become educated on the dynamics and effects of violence, navigate systems, and provide case specific interventions and goal planning. Individual supportive counseling and attendance at weekly support groups is ongoing during the recovery process. Through identification of strengths and weaknesses, awareness and education, and supportive counseling, victims have greater success in achieving self-sufficiency, ending the cycle of abuse, and recovering from traumatic events.

Collaborative Programs *continued*

Safe Harbour- Commercially Sexually Exploited Youth/Sex trafficking

Commercial sexual exploitation of children occurs when individuals buy, trade, or sell sexual acts with a child. Sex trafficking is “the recruitment, harboring, transportation, provision, or obtaining of a person for the purposes of a commercial sex act.” Children who are involved in the commercial sex industry are viewed as victims of severe forms of trafficking in persons, which is sex trafficking “in which a commercial sex act is induced by force, fraud, or coercion, or in which the person induced to perform such an act has not attained 18 years of age.” A commercial sex act is “any sex act on account of which anything of value is given to or received by any person.”

Victims of Trafficking and Violence Protection Act of 2000 [United States of America]. Public Law 106-386 [H.R. 3244]. 28 October 2000. Section 103(9).



Safe Harbour

GA Accountability Program

The Accountability and Responsibility Program works with at-risk teenagers in Chautauqua County to provide support and opportunities in the community they might not get to experience otherwise. For more information on The Accountability & Responsibility Program please call 716-708-6161.

Positive Direction and Associates, Inc.

This program offers training for physicians and other medical professionals. The training explains the benefits to connect young adults to substance use disorder services to avoid negative consequences such as incarceration, homelessness and complex trauma, among others. The participants will also learn the options available for young adults in active addiction or attempting recovery.

Tearcell Mobile App

A tool to assist organizations and front-line professionals to identify and respond to children and youth who have been trafficked or who are at a high risk of being trafficked.

YWCA Supervised Visitation Program

The YWCA supervised visitation program provides a safe, neutral environment for a child(ren) to have a relationship with parents and is often used for high conflict situations.



YWCA Supervised Visitation Team

Adult Protective Services Initiatives

In 2017 Protective Services for Adults received one of the Elder Abuse Education and Outreach Program (EAEOP) 2017 Community Mini-Grants funded through Lifespan of Greater Rochester. This grant provided the funds for the establishment of the county's first elder abuse focused enhanced-multidisciplinary team (E-MDT) in Chautauqua County as well as the formation of the E-MDT Coordinator, a part-time contracted position.

The E-MDT reviews complex cases of financial exploitation of the elderly with the purpose of increasing prosecution and restitution. The group is composed of representatives from DHHS, Adult Protective Services, OFA/NY Connects, DA's Office, local law enforcement, and Center for Elder Law and Justice in addition to other community stakeholders. The team reviewed ten cases of financial exploitation in 2017. The team is considered an “enhanced” multidisciplinary team because of its access to a forensic account.

Additionally, Protective Services for Adults partnered with Center for Elder Law and Justice and received an Elder Justice Innovation Grant through the Administration for Community Living which will be implemented in 2018.

Youth Bureau

The role of the Youth Bureau is to actively work in collaboration with other government entities, public and private funding agencies, service providers, and other segments of the community to develop a framework from which an effective integrated planning process can be operated. This process ensures that the most needed youth services can be operated.

To ensure that funded youth programs achieve outcomes, all funded agencies are required to report how they will measure performance outcomes and submit yearly Measurable Outcomes. We continue to develop collaborations among local youth serving agencies toward improving the well-being of youth in Chautauqua County.

Our target population is at risk and underprivileged youth but we strive to serve all youth within Chautauqua County.

2017 Programs Funded

Program	# Youth Served	2017 Allocation
Youth Development – Year Round Programming Partner with Striders, Salvation Army, YMCA, YWCA, Child Advocacy Center and more to host mentoring, tutoring, counseling, recreation, safety and more.	5,047	\$112,309
Youth Development – Summer Programming Local City and Town Summer Recreation Programs	1,405	\$22,800
Runaway and Homeless Youth Act	53	\$66,197
Totals	6,505	\$201,306



Above: Chautauqua County Youth Board
Right: Youth Bureau Intern Mikayla Brock

Legal Division



Legal Unit

The function of the Legal Unit is to represent the Department effectively in court and administrative hearings, and to advise and furnish legal services in support of the Department's programs. The Legal Unit is responsible for prosecuting in Family Court all cases involving child abuse, child neglect, termination of parental rights, paternity, child support child and all associated appeals. The Legal Unit also represents the Department during Fair Hearings involving reports from the State Central Registry. The Legal Unit also handles Adult Protective Services that may seek court orders for entry into a home, short term intervention orders and establishment of financial and/or personal guardianship for incapacitated adults. The Unit seeks to recover local, state and federal tax dollars through claims on real property, claims against personal injury settlements and verdicts, claims in estates, and claims against any other source of funds obtained by someone who is or has received public assistance benefits.

2017

203

New children receiving protection

Caseload	2016	2017
Child Abuse/Neglect – New Children Receiving Protection	116	203
Foster Children Having Legal Proceedings Commenced to Free for Adoption	15	24
Protective Services for Adults-Guardianships	2	4

Recoveries	2016	2017
Medicaid Nursing Home Care	\$207,690	\$224,602
Casualty Recoveries	\$5,000	\$12,716
TA Recovery Liens	\$1,560	\$24,961
TOTALS	\$214,250	\$262,280

Child Support Enforcement Unit

The Child Support Enforcement Unit (CSEU) is responsible for establishing the paternity of children born out of wedlock through signed Paternity Acknowledgements or through filing of Paternity Petitions in Family Court. The CSEU is responsible for commencing the court process to establish Orders of child support and enforce the child support Orders against legally responsible relatives, on behalf of public assistance applicants/recipients, as well as non-applicant/recipient individuals who make an application for Child Support Services. The CSEU also has a responsibility to secure a court Order for Third Party Insurance on behalf of all children in receipt of Public Assistance and Medicaid only benefits. Additionally, the CSEU has primary responsibility to collect, monitor, distribute and enforce all support as ordered and made payable through it by any court of competent jurisdiction to petitioners within Chautauqua County and throughout the United States.

Child Support Collections	2016	2017
Temporary Assistance	\$1,678,127	\$1,408,567
Medical	629,203	525,073
Total Retained Social Services Collections	\$2,307,330	\$1,933,640
Total General Public Collections	11,422,743	11,235,358
Total Collections	\$13,730,073	13,168,998

Petitions Filed	2016	2017
Paternity	127	120
Support	530	455
Enforcement	1,663	1,319
Reciprocal	130	105
TOTAL	2,450	1,999



Child Support Enforcement Unit Staff

Child Support Enforcement Unit *continued*

Case Management Performance	2016	2017
Paternity Establishment <i>(cases with paternity established / cases)</i>	97.46%	97.49%
Support Establishment <i>(cases with Support Orders established / cases)</i>	91.78%	92.63%
Cases with Current Collections <i>(Amount Collected /Amount of Current Support Due)</i>	69.45%	69.21%
Cases with Arrears Collections <i>(cases with Collection on Arrears / cases)</i>	40.63%	51.73%
Medical Support <i>(cases with Medical Support established)</i>	60.80%	56.85%
Case Load	12,970	12,442

2017

12,442

Petitions filed through the
Child Support
Enforcement Unit

Program Integrity Unit (Fraud and Recovery Unit)

The Program Integrity Unit investigates complaints received on applicants and recipients of benefits including public assistance, SNAP, HEAP, Medicaid and Child Care as well as complaints regarding vendors. Furthermore, due to fraud, error on the recipient's part or agency error, the Department is entitled to seek recovery for overpayment of benefits. The PIU also establishes and monitors the payment of over-issued benefits.

	2016	2016 Costs Avoided	2017	2017 Costs Avoided
FEDES (Front End Detection System) Number of applications detecting fraud at application	374	\$3,835,314	408	\$4,094,168
PARIS (Public Assistance Reporting Information System) Detecting out of state residency and duplicate benefits	44	\$194,796	40	\$162,588
VED (Verified Employment Data) Detecting unreported income on TANF adult cases	16	\$67,386	28	\$160,860
Prison Computer Match	10	\$16,800	8	\$13,440
IPV (Intentional Program Violations) Disqualification sanctions for those found guilty	71	\$136,980	33	\$55,440



Program Integrity Unit Staff

PUBLIC HEALTH DIVISION



Prevention and wellness are essential components to good health and a high quality of life. The Chautauqua County Department of Health and Human Services is dedicated to improving the health and quality of life for individuals, families, and communities. Good health comes not just from receiving quality medical care, but also from making good choices, clean air and water, safe outdoor spaces for physical activity, safe worksites, healthy foods, violence free environments, and healthy homes.



Dr. Berke, County Physician

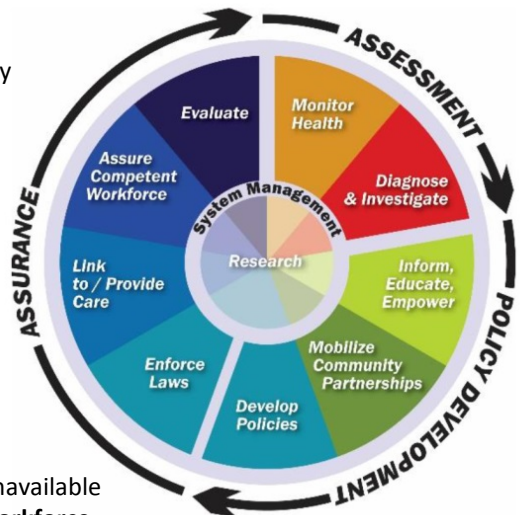
Purposes and Practices of Public Health

To prevent epidemics and the spread of disease, protect against environmental hazards, prevent injuries, promote and encourage healthy behaviors and mental health, respond to disasters and assist communities in recovery, and assure the quality and accessibility of health services.

10 Essential Public Health Services:

The 10 Essential Public Health Services describe the public health activities that all communities should undertake:

1. **Monitor health** status to identify and solve 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** and action 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 competent public 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



Information obtained in part by the U.S. Department of Health and Human Services Centers for Disease Control and Prevention.

Board of Health



As the overseer of Sanitary Code of Chautauqua County, the nine member Board of Health is a vital force in preventing disease, promoting health and promulgating public health policy. The group represents a broad range of public health related disciplines. Over the years, the Board has enacted countless measures to improve the wellbeing of Chautauqua County residents and visitors.

2017 Chautauqua County Board of Health Members:

John Tallett, MD (President); Thomas Erlandson (Vice President); Robert Berke, MD; William Geary, MD, PhD; Roland Hewes, DVM; Lillian Ney, MD; Susan Sosinski; Mark Tarbrake; Natasha Souter

Public Health Grants



In order to fulfill its mission and augment services to the residents of Chautauqua County, the department applies for and receives a variety of grants. These grants are not a part of the department's operating budget. Instead, the funding for these grants is provided by New York State and/or the Federal Government.

Grant	2016	2017
Integrated Cancer Services	\$198,081	\$167,484
Maternal and Infant Health Initiative	\$322,207	\$282,662
Immunization Action Plain (IAP)	\$70,922	\$55,879
Public Health Emergency Preparedness	\$49,473	\$49,473
Family Planning	\$428,994	\$324,981
Rabies	\$16,280	\$22,915
Adolescent Tobacco Use Prevention Act (ATUPA)	\$33,256	\$42,386
DEC Enhanced Drinking Water	\$145,102	\$156,557
Bathing Beach Water Quality	\$9,305	\$9,305
CDBG Well & Waste Water	\$100,677	\$112,276
Childhood Lead Poisoning Primary Prevention	\$270,335	\$271,167
Lead Poisoning Prevention (Screening)	\$67,651	\$65,686
HUD Lead Hazard Reduction Demo Grant	\$225,238	\$553,541
TOTAL GRANTS	\$1,937,521	\$2,114,312

Environmental Health Services Division

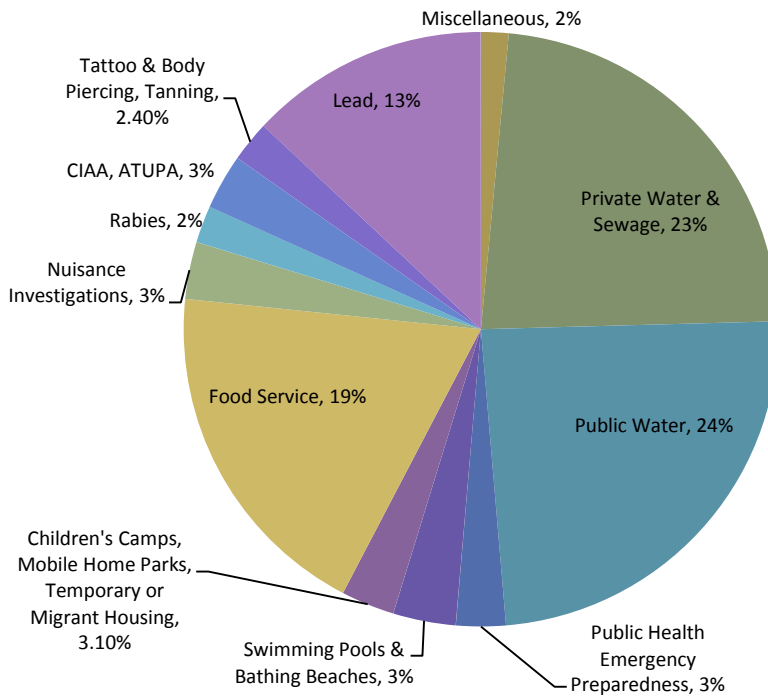


The Environmental Health Division ensures the residents of Chautauqua County a healthful environment through its various programs of inspections, surveillance, and enforcement. Its focus is to prevent disease by responding to emergencies and nuisance complaints, monitoring public water supplies, assisting homeowners with private water and sewage systems, inspecting food service establishments and recreational facilities, and inspecting homes for lead hazards, while preserving a safe and healthy environment for all County residents and visitors.

The following chart reflects the distribution of manpower attributed to the various programs implemented by the Division of Environmental Health Services.



Environmental Health Unit Staff Time, 2017



Food Service Establishment Permitting and Inspections

The CCDHHS Environmental Health unit performs regular inspections of permanent, temporary, and mobile food service establishments. Food service establishments are classified as low, medium or high risk. Bar-only operations are classified as low risk and are inspected every two years. Medium-risk restaurants are inspected once per year. These restaurants are commonly referred to as "cook and serve" where foods are prepared for immediate consumption.

High-risk food service establishments prepare foods in advance and then cool the food item to be reheated when served to the customer. The objective is to limit the amount of time that foods are held in the "danger zone." The danger zone is the temperature range from 41 degrees to 135 degrees Fahrenheit where pathogenic bacteria can begin to replicate into dangerous numbers capable of causing illness. High-risk restaurants must be inspected either two times per year or undergo one inspection and one Hazard Analysis and Critical Control Points (HACCP). During the HACCP process, one potentially hazardous food item is tracked from the point of delivery until it is served to the customer. This process identifies critical points in the process during which food preparers can stop the transmission of foodborne illness.

In the event of a complaint, restaurants are inspected within seven days of the logged complaint. During inspections, sanitarians check to see that service workers are handling food properly, that foods are kept at the proper temperature and are being stored properly. They also ensure that the restaurant environment meets the requirements of the Chautauqua County Sanitary Code which includes the regulations of the New York State Sanitary Code.

2017
641
Food Service Establishment
Inspections



	2016	2017
Food Service Establishment Inspections	660	641
Hazard Analysis Critical Control Points	41	29
Red Critical Violations	232	166
Temporary Food Service Establishment Inspections	164	184
Red Critical Violations	19	22

Food Handler Safety Training

The Chautauqua County Sanitary Code requires all food establishments have at least one individual complete a food handler training course approved the Public Health Director. The goal of the program is to reduce the number of violations made by food handlers that lead to foodborne illness.

Training Attendance

2016	2017
90	106

Tattoo & Body Piercing Establishment Licensing and Inspections

The Chautauqua County Sanitary Code requires annual licensing and inspection of tattoo and body piercing establishments. All new tattoo / body piercing artists, including temporary guest artists, must pass a County administered test to obtain an artist certificate of sanitation. Established artists must renew their certification annually.

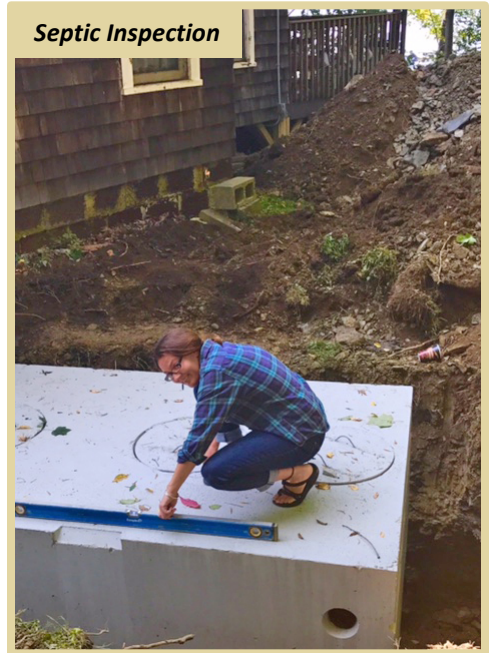
	2016	2017
Number of Establishments	11	11
Number of Artists	32	39

Violators: In 2017 one tattoo/body piercing shop was closed by the Chautauqua County Department of Health and Human Services after an inspection revealed violations of the County Code. The operator was given an opportunity to correct the violations but proved unable to adequately address the issues.

Private Sewage Permitting and Inspections

The CCDHHS regulates the private sewage system program. Environmental Health staff members conduct onsite inspection, design approval, and inspection of final installation to ensure that the systems comply with standards outlined in Article IV of the Sanitary Code of the Chautauqua County Health District and New York State Code Part 75.

	2016	2017
Septic Permits Issued	283	232
Site Investigations	260	206



Septic Inspection

Water and Sewage Surveys

The Department conducts Water and Sewage Surveys, also known as Loan Surveys or Property/Realty Transfer Surveys, to private homeowners. The surveys are required by the local sanitary code and by most lending agencies. Sanitarians evaluate sewage system components to ensure that they are functioning in compliance with the local sanitary code. Water system components are also surveyed by sanitarians.

The Department provides guidance to property owners whose system(s) did not pass inspection including recommendations for well disinfection, installing continuous water disinfection systems, and/or repairing or replacing a septic system or water well.

2017

633

Water and Sewage Surveys Conducted

	2016	2017
Water and Sewage Surveys Conducted	617	633

Public Sewer Program

Department staff assists municipalities and other county departments in the formation and extension of sewer districts. In 2017, CCDHHS worked closely with the Chautauqua Lake Sewer Agency to extend the South & Center Chautauqua Lake Sewer District boundary along the southwest side of the lake to the Hamlet of Stow; worked with the Town of Ripley to extend public sewers to Shortman Road and West Route 5 to the PA line; and has also been working for several years with the Town of Mina to create a new town sewer district around Findley Lake.

Mandatory Inspection Program

In 2016 Environmental Health Unit staff began implanting the Mandatory Inspection Program (MIP). The program targets properties within 250 feet of Chautauqua County lakefront that have onsite wastewater treatment systems that were installed greater than 30 years ago or without a permit from the Chautauqua County Environmental Health Unit.

This chart represents properties identified in 2016 and 2017 along with status of inspection process.

	Bear Lake	CHQ Lake Ellery	CHQ Lake Chautauqua	Findley Lake
Inspection Not Required > 250 feet & 30 years old	9	8	4	20
Corrections Required/Completed	3	1	2	1
Corrections Required/Pending	12	0	0	7
Inspection Pending	2	0	2	65
Follow-up Required	4	2	12	91
Totals	32	12	22	185

Beaches

Ensuring public safety, beaches are inspected annually by the Environmental Health Unit to determine if beach staff, safety equipment, and operation records are in compliance with permit requirements. Beach water samples are collected and analyzed for indicator bacteria, *Escherichia coli* (*E. coli*), at the CCDHHS Water Lab. When beach samples are determined to be unsatisfactory the beach operator is notified and the beach is closed for swimming until a subsequent sample shows the water to be satisfactory.

All permitted beaches are sampled at least once weekly during their individual swim seasons, more often if unsatisfactory *E. coli* results require subsequent samples or special projects require more information.

	2016	2017
# of Beaches Serviced	36	36
Staff Collected Samples	513	546

Beach Sampling



Harmful algal blooms (HABs) related to blue-green algae/cyanobacteria are typically observed on Chautauqua and Findley Lakes in late July – August. HABs have become increasingly common and persistent in recent years. The major public health risk associated with HABs is the possible release of toxins during bloom events. Currently there is little understanding as to why or when toxins are released during a bloom, consequently CCDHHS treats all HABs as though they may be releasing toxins.

When HABs become widespread in one or more lakes, press releases/alerts, including educational information about water safety and HABs, are sent to local media outlets in an effort to protect human and domestic pet health. Signs to alert the public of the potential danger are also posted at public access points of the affected areas.

Tanning Facility Regulations

The Sanitary Code of Chautauqua County also calls for the permitting and regulating of tanning facilities in the County. The law establishes standards for safe operation and sanitary conditions of tanning facilities. The CCDHHS works with indoor tanning businesses to ensure compliance with state and local laws. 13 facilities held licenses in 2016.

	2016	2017
Tanning Facility Licenses	13	9

Rabies Control

The Environmental Health Division is charged with the prevention of human cases of rabies in Chautauqua County. This includes promoting pet rabies vaccinations, investigating all potential rabies exposures (animal bites & scratches) that are reported to the Department, and submission of certain animal specimens to the NYS Department of Health Wadsworth Laboratory for rabies testing. In accordance with NYS Public Health Law, any person with knowledge of an animal bite is required to report these to the Health Department for investigation.

2017

2,323

Animals Vaccinated

	2016	2017
Rabies Clinics Held	16	13
Dogs, Cats and Ferrets Vaccinated	2,700	2,323
Post-Exposure Prophylaxis Authorization	25	28
Pre-Exposure Rabies Vaccine	7	3
Incident Reports/Investigations	397	425
Specimens Submitted for Testing	39	44
Animals Testing Positive for Rabies	1	1



Lead

Childhood Lead Poisoning Primary Prevention Program: CCDHHS is a grantee for the New York State Department of Health Childhood Lead Poisoning Primary Prevention Program. The State Department of Health identified the area of the 14701 zip code within the City Limits of Jamestown as an area with a significant concentration of children identified with elevated blood lead levels. This area was designated as an “area of high-risk” by the Chautauque County Health Department for the purpose of implementing a program to prevent exposure to lead-based paint. To prevent lead poisoning in children, the CCDHHS inspects poor condition apartments and homes where children reside for lead based paint.

	2016	2017
Homes Inspected	39	44
Received Treatment to Mitigate Lead Exposure	14	16

Lead Poisoning Prevention Program: The Chautauque County Lead Poisoning Prevention Program (CCLPPP) works throughout the county to reduce the incidence of childhood lead poisoning and associated health consequences. Lead poisoning prevention education, nurse case management, environmental investigation, lead hazard assessment, and abatement follow up activities are conducted in the lead program through a large collaborative county initiative. Monitoring of children with elevated blood lead levels is an important component.



	2016	2017
Child blood lead test performed	2,478	2807
Children followed due to high blood levels	10	10

Once a child is identified as having an elevated blood lead level of ≥ 10 ug/dL they are tracked to assure that appropriate follow-up services are provided.

Lead Testing in School Drinking Water: CCDHHS water staff continued to work closely with public school districts in the County and BOCES to ensure their compliance with NYS’s Lead Testing in School Drinking Water law enacted in 2016. This law requires all public schools to collect samples from all water fixtures used for drinking or cooking, to immediately turn off fixtures that exceed the lead Action Level of 15 parts per billion, and to remediate those fixtures. Once results are received, schools are required to notify parents and staff of any exceedances. The law requires schools to resample drinking water fixtures every 5 years beginning in 2020.

Water Supply Program

Certified Environmental Laboratory for Water Analyses: Environmental Health Unit staff maintains a NYSDOH Environmental Laboratory Approval Program (ELAP) certified laboratory. The laboratory is certified to test potable and non-potable water samples for indicator bacteria including coliform and Escherichia coli (E. coli).

Samples Analyzed	2017
Potable Water	3266
Non-Potable Water	642

Public Water Supply Program: The CCDHHS water resources staff monitors public water supplies to ensure operators are providing safe drinking water to their customers, properly maintaining their water systems, and complying with NYS Sanitary Codes.

	2016	2017
Number of Water Systems Regulated	226	227
- Illnesses reported	0	0
Sanitary Surveys Completed	59	98
- Violation Issued	125	156
- Enforcement Taken	35	99



Environmental Health staff also collected 316 surveillance water samples from public water supplies that were tested and analyzed for bacteria in the CCDHHS's water laboratory.

Private Water Supply Program: CCDHHS staff provided technical advice to private water supply owners whose water required some type of treatment. Contamination of private water supplies by bacteria continues to be a problem with nearly half of all private well samples analyzed in the CCDHHS's water lab failing to meet drinking water standards and requiring some sort of treatment and resampling.

To ensure the safety of private drinking water, staff sampled 26 homes with private wells located in vicinity of the Ellery Landfill and the closed South Stockton Landfill. These were tested for landfill indicators such as inorganic chemicals and metals; test results showed no impact on wells from the landfills.



Annual Drinking Water Contest
2017 Winner: Cherry Creek

	2016	2017
Technical Advice Provided	518	502
Percent of private well samples fail	42%	42%

Clean Indoor Air Act (CIAA)

The Clean Indoor Air Act (CIAA) law indicates that smoking at all worksites, including restaurants and bars is illegal. The Environmental Health unit inspects local establishments to ensure that the CIAA law is being upheld. Where establishments are found to be in violation of the law's stipulations, the owner or operator is notified. Formal enforcement is issued against the facility owner or operator by confirmed delivery of Notice of Violation within seven days.

Adolescent Tobacco Use Prevention Act (ATUPA)

The Environmental Health division is responsible for performing compliance checks mandated by the Adolescent Tobacco Use Prevention Act (ATUPA). In order to assess compliance of tobacco vendors in the County, the Environmental Health unit takes underage youth (ages 15, 16, or 17) without legal IDs to tobacco vendors where they attempt to purchase cigarettes. If vendors agree to sell tobacco to the youths, the violations are reported to the state. The Department is also responsible for verifying that all tobacco dealers and vendors are registered with the NYS Department of Taxation and Finance (DTF) to sell tobacco, post required signage, and display tobacco and herbal cigarettes behind the counter or in a locked container.

	2016	2017
Adult Compliance Checks	110	133
Minor Compliance Checks	126	186
Retailers Found in Violation	3	3
Fines Paid	\$1,600	\$1,050

Emergency Preparedness

Public health threats are always present whether cause by natural, accidental, or intentional means. These threats can lead to public health incidents. The goal of public health emergency preparedness is to be prepared to prevent, respond to, and rapidly recover from public health threats including infectious disease, natural disasters, biological, chemical, nuclear and radiological events. Through funding from the CDC our PHEP program seeks to build the capacity of our work force to respond to existing and emerging health threats. Specific duties include enhancing our capacity to respond to bioterrorist attacks, establishing communications programs, educating and training public health and health care professionals and the general public in emergency response and preparing to distribute vaccines, drugs and other protective measure or treatments in a timely fashion. Some of the tools we use include surveillance of laboratory testing, epidemiological investigations, information sharing, community preparedness, medical material management and distribution, volunteer management, non-pharmaceutical interventions, and emergency public information and warnings.

Children with Special Health Care Needs



Early Intervention Program

The Early Intervention (EI) program serves children from birth up to the age of three years who have been diagnosed with, or are at high risk for, a developmental delay. Services are provided to eligible children by CCDHHS staff, as well as NYSDOH-approved EI providers, and include service coordination, assistive technology service, audiology, family training, counseling, parent support groups, occupational therapy, physical therapy, speech therapy, vision services, special education, nursing, medical services for diagnostic or evaluation purposes, nutrition, psychological services, health services and transportation and related costs. Services are provided in a variety of settings which include the home, baby sitter, day care and center-based programs.



Early Intervention Staff

	10/15 to 9/16	10/16 to 9/17
New Referrals	409	323
Referrals Qualifying for EI Services	201	174
Referrals for At Risk Children	146	118
EI Program Children Participants	775	684

Preschool Special Education Program

The Preschool Special Education program provides services for the three to five year-old population. Each school district in the County is responsible for authorization of services. Services are provided by certified professionals in three Chautauqua County center-based special education programs and in less restrictive settings including Head Start, regular nursery schools, and the home. New restrictions on the services that can be billed for Medicaid reimbursement present challenges to the Preschool program. The average cost per child is \$10,932.00.

	2015-2016 School Year	2016-2017 School Year
Children Enrolled in Program	406	466
Children Received Center-Based Services	98	104
Children Received Related Services	308	362

Children with Special Health Care Needs










The Children with Special Health Care Needs program is for families of children ages birth to 21 who have, or may have, a serious health condition. The program gives information and referral services for families of children who need a health or related service beyond those normally needed by children. Conditions may be physical, behavioral, or emotional. From October 1, 2016 to September 30, 2017 there were 81 children and their families assisted through this program.

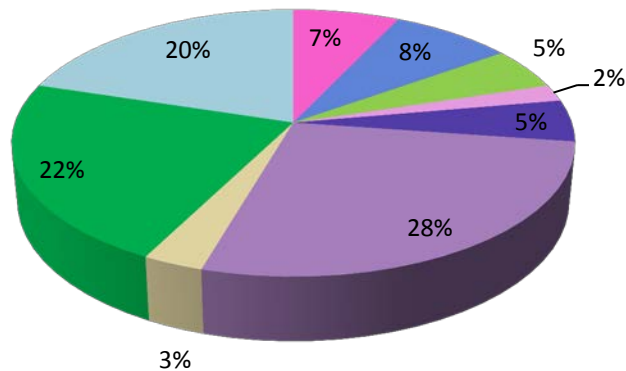
Nursing Division/Community Health



The Nursing Division is a unique component of the Chautauqua County Government in that it operates within a NYSDOH licensed Title X, Article 28 Diagnostic and Treatment Center facility. Clinic operations and community health nursing protect and promote the well-being of County residents through several programs which are featured below. On April 1, 2017 public health took over management of the county jail health system.

The following chart reflects the distribution of nursing time and effort attributed to the various disease control, family health programs and jail health implemented by the Division of Nursing Services.

Communicable Disease		7.0%
Family Planning		8.0%
General/Admin		5.0%
HIV/STD		2.0%
Immunization/IAP		5.0%
County Jail		27.0%
Lead Poisoning Prevention		3.0%
Maternal & Child Health		22.0%
Nurse Family Partnership		20.0%



Communicable Disease Control

Communicable Diseases are infections which can be transmitted from one individual to another, directly or indirectly. Control of these diseases is one of the main functions of a public health department. New York State requires over 70 diseases be reported to the local health department, requiring staff to investigate and provide education to prevent further spread of illness and to contact exposed individuals if treatment or monitoring for symptoms is needed.

Public health surveillance helps to detect outbreaks and enable prompt public health intervention. Many hours are dedicated to this program to maintain the community's health.

STI/HIV Program

Sexually transmitted infections (STIs) are among the most commonly reported communicable diseases in the county, state, and nation. The CCDHHS STI/HIV program aims to stop the spread and reduce the incidence of these infections. CCDHHS clinics offer screening and treatment for STIs, disease investigations and safer sexual health counseling. Nurses provide counseling for HIV-positive clients and referrals to specialty providers for treatment. At every visit, STI and HIV prevention education is provided, and condoms are offered. STI/HIV educational information is available to schools, human service providers, and community organizations and other outreach events.

	2016	2017
STI Clients Seen	271	231
Communicable Disease Nurse Contact and Follow-Up		
Gonorrhea Cases	118	36
Chlamydia Cases	539	127
Syphilis Cases	4	1

Hepatitis C Testing

A New York State Law requires health care facilities to offer Hepatitis C screening to every individual born between 1945 and 1964.

Community Health Staff



Immunization Program

A core public health role is the prevention of vaccine-preventable diseases, especially in children and vulnerable populations. The Immunization Program provides free required vaccinations for children through the state’s Vaccine for Children (VFC) program and in accordance with CDC-recommended immunization schedules. Some adult immunizations such as influenza are also available as well as international travel vaccines. By providing this service, the CCDHHS aims to prevent illness and to reduce the importation of communicable diseases.



	2016	2017
People Vaccinated	947	987

Tuberculosis Program

As the Public Health Law specifies the necessity of local health department control activities, Chautauqua County Department of Health and Human Services conducts nurse/physician operated tuberculosis control clinics.

Family Planning Services and Teen Pregnancy Prevention

The Chautauqua County Department of Health and Human Services continues to provide high quality reproductive health services to the community through clinical services and sexual health education.

Vital Statistics for Chautauqua County, compiled by the New York State Department of Health, indicate that teen pregnancy rates (females aged 15-19) have significantly decreased since 1999 but continue to be a major public health concern.

Public health nurses and staff also provide extensive community outreach, health education and public health detailing to a wide array of audiences including but not limited to schools, community agencies, health care providers and inmates.

The reduction in total visits is likely due to increased ability to see primary care physicians, 7.9 % uninsured rate, increase in the use of long-acting reversible contraception methods, and downsizing to one clinic site.

	2016	2017
Family Planning Visits	256	212

County Jail Medical

On April 1, 2017, public health took over managing the jail health system. This program, although not surveyed as part of the Article 28 Diagnostic and Treatment license, is monitored by the State Department of Corrections. As a County Health Department we recognize those that we serve in the jail are from our community and most will be returning to our community. We are moving from only responding to illness towards health promotion. To meet this goal staff is being trained to recognize prevention and health promotion. We have begun to offer a public health approach to care to include: reproductive health including IUDs, vaccinations maternal child and preconception education; increasing referrals and linkage to mental health; dental; primary care when released. The need for qualified nursing staff is critical to cover 7am-10pm seven days a week.

	Nursing Visits	Scheduled Provider Visits	Refusals
April-December 2017	3,774	290	238



Opioid Overdose Prevention Program

The CCDHHS Public Health Division is registered with NYSDOH as an Opioid Overdose Prevention Program. We work with participating law enforcement and community members to train and supply them with intranasal Narcan kits. Narcan, also known as naloxone, is a lifesaving opioid antagonist which reverses opiate effects of sedation and respiratory depression thereby preventing a fatal overdose.

Opioid Training

Training was provided at 23 locations throughout Chautauqua County to include Colleges, Libraries, Medical Centers, Churches and Jails

	2016	2017
Number of People Trained	925	815
Alstar Administrations of Narcan*	76	104

*Capturing accurate overdose reversal data is difficult as many community responders do not report. Law Enforcement reports directly to the State.

Maternal and Infant Health Program



The Maternal and Infant Health Program has been in operation in Chautauqua County since 2013 and provides high-needs mothers in Chautauqua County with assistance obtaining health insurance, nutrition education, prenatal and infant education, smoking cessation services, and case management. Our staff meet moms in their homes, at the clinic, or other community sites to provide assistance during pregnancy and throughout the baby's first year.

The **Nurse Family Partnership (NFP)** admitted the first clients 9/2015; this is offered in collaboration with the Catholic Health System out of Erie County. This program provides nurse home visitation services to low-income (Medicaid eligible) first-time mothers. Nurses begin home visits early in the mother's pregnancy and continue visits until the child's second birthday. This evidence-based program's goals are to: improve prenatal health and outcomes, improve child health and development and improve families' economic self-sufficiency and/or maternal life course development.

Home Visits	2016	2017
Maternal & Infant Health Program	1,266	1,009
Nurse Family Partnership	791	796
Total Home Visits	2057	1805

The Maternal and Infant Health Program staff collaborates with the Health Education Division to carry out the **Creating Community Supports for Breastfeeding in Chautauqua County** grant program. The goal of this project is to increase the amount of supports that exist in the community to assist breastfeeding mothers. Duration rates (breastfeeding for 6 months or more) for breastfeeding are far lower in Chautauqua County than in the rest of New York State, as identified during the 2016-2018 Community Health Assessment process.



Community Health and Nursing Family Partnership Teams

Referrals Made	2017
Mental Health Services	61
Primary Care Providers	83
SNAP	50
Smoking Cessation Programs	50
Dental	62
Health Insurance	39
Total Referrals	192

Community Health Education and Planning



The purpose of the Health Education and Planning Unit is to identify health issues of local importance, develop and implement strategies to address these issues, and strengthen the community's long-term ability to manage and improve the health and well-being of residents.

CCDHHS provides health education and guidance, including the use of information and education to modify or strengthen practices that promote public health and prevent illness. These activities are designed to encourage people to assume personal responsibility for maintaining and improving their own health; increase their capacity to utilize appropriate health services; help them better control an illness they may have; and, provide information to stimulate community action on social and physical environmental factors that impact health.

Current public health research indicates that individuals are more likely to make healthy choices when those choices are also easy and affordable. The CCDHHS leads and/or partners with initiatives that support improved infrastructure for physical activity, access to nutritious foods, and reduced exposure to tobacco in addition to other prevention initiatives.



**Community Health Education
and Planning Team**

Protecting and improving the public's health and promoting wellness cannot be managed by an organization, health care provider, government or community agency alone. Partnerships, coalitions and collaborations are essential to the public health effort.

Chautauqua County 2016-2018 Community Health Assessment

Local health departments (LHD) across New York State are responsible for completing a community health assessment (CHA) to ensure that the needs of the community are being met. In 2016, the New York State Department of Health asked LHDs to complete an update to the 2014-2017 Community Health Assessment and Community Health Improvement Plan (CHIP) that would span the years 2016-2018 and continue to work in conjunction with the New York State Prevention Agenda. The update required less detail and community coordination than a typical community health assessment.

The Prevention Agenda 2013-2018 is New York State's health improvement plan that was designed to demonstrate how communities across the state can work together to improve overall health and quality of life for all New Yorkers. The Prevention Agenda envisions New York becoming the Healthiest State in the Nation, and designates five priority areas:

- Prevent chronic diseases
- Promote healthy and safe environments
- Promote healthy women, infants, and children
- Promote mental health and prevent substance abuse
- Prevent HIV, sexually transmitted diseases, vaccine-preventable diseases and healthcare-associated infections

The Prevention Agenda outlines goals and objectives, as well as appropriate and evidence-based interventions for each priority area. Indicators for tracking progress of interventions are



Chautauqua County 2016-2018 Community Health Assessment (cont'd)

provided at the county-level, including racial, ethnic and socioeconomic breakdowns to track changes in health disparities.

LHDs across the state were expected to work collaboratively with county hospitals, which were responsible for completing their respective community service plans. In Chautauqua County, partner hospitals included Brooks Memorial Hospital, TLC Health Network (Lakeshore Hospital), UPMC Chautauqua WCA, and Westfield Memorial Hospital. Key stakeholders for public health and health care were also invited to assist in the community health assessment process. Collectively, the local health department, hospitals, and community organizations make up the Chautauqua County Community Health Planning Team (CCCHPT). These additional partners included the Chautauqua County Health Network, the Chautauqua County Department of Mental Hygiene, The Chautauqua Center, and The Resource Center. Population Health Collaborative of Western New York provided technical support throughout the entire process, as the Western New York technical assistance lead. Delivery System Reform Incentive Payment (DSRIP) Performing Provider Systems (PPS) working in the Western New York region including Community Health Partners and Millennium Collaborative Care were also partners in the health planning initiative.

The CCCHPT worked together to gauge the community's perceived health priorities, assets, and needs through a web-based and paper survey, and four community conversations. The team examined secondary health data provided by the NYSDOH and selected collaborative and individual priorities, disparities, and interventions. Collaborative priorities, along with background data and potential interventions were presented at a community stakeholder meeting attended by local content area experts. Feedback and guidance was provided by community stakeholders. The following collaborative Prevention Agenda priority areas were selected:

- Prevent chronic diseases (CCDHHS and all hospitals)
 - Disparity: Low-income residents
- Promote healthy women, infants, and children (CCDHHS, BMH, WCA)
- Promote mental health and prevent substance abuse (CCDHHS and all hospitals)

Public Relations and Outreach

To connect with the public and share messages about programs, health promotion, and community collaborations, the CCDHHS Division of Public Health works with media networks that include local newspapers, Penny Savers, local television news stations, and local radio stations. The CCDHHS also takes advantage of social media outlets such as Facebook, Twitter and YouTube. We receive personal health related questions from the public via the private message feature on our various program-specific Facebook pages. The Chautauqua County Health Department Facebook page had a 150% increase in page likes in 2017, and there was a significant increase in overall reach from 2016 to 2017.

The Chautauqua Health Action Team (CHAT), a coalition of community partners working to improve health in Chautauqua County, devised the CHQ250 initiative. CHQ250 – Doing Our Part to Save Hearts, is the tagline for community efforts to prevent heart attacks, strokes, and related deaths in Chautauqua County. In 2017, CHAT members wrote 12 news articles and 52 weekly tips related to heart health; they were published in two County newspapers. 950 people from 44 different agencies, worksites, and community groups were trained in hands-only CPR. 14 blood pressure cuffs were distributed to agencies, worksites, and community groups.

Departmental program experts participate in educational events across the County, reaching a diverse population of County residents. Venues included schools, shopping centers, ice arena, awareness walks, parks, fairs, soup kitchens, religious centers, workplaces, rehabilitation centers, municipal buildings, and more. Topics varied but mainly focused on CCDHHS programs and priorities, such as healthy beverage selection, nutrition, physical activity, cancer prevention and screening, food safety, Hepatitis C prevention, lead poisoning prevention, maternal and infant health services, breastfeeding, child development, immunizations, and reproductive health.

Dental Van

The CCDHHS Public Health Division continues to partner with the University at Buffalo School of Dental Medicine's dental van- the "5-miles To Go Dental Van." The Department assists with referrals to the dental van, which operates with Article 28 status, and accepts Medicaid, Child Health Plus, or collects fees on a sliding scale.

The Rural Dentistry Project funding started in 2014; the project's success is reflected in the increase of visits and procedures in the 2015-2016 and 2016-2017 years, since the project was in its planning stages in 2014-2015. These figures include Cuba-Rushford, Andover, Gowanda, Hannibal Central and Randolph Central but the majority of schools served are in Chautauqua County.

Calendar Year - April 1-March 31	2016-17	2017-18
Dental Van Procedures*	15,736	16,000
Dental Van Visits	2,980	3,102

*Procedures were performed in the dental van and using the portable equipment. Not all procedures were billable, e.g., counseling - tobacco, nutrition, hygiene; re-seals; non-billable Medicaid procedures; etc.

2017 Kids received fluoride varnish application at their pediatrician or general practitioner's office. **1,043**

Linkages and Coalition Building

In an effort to work collaboratively with the community, the CCDHHS participated in nearly 40 coalitions and task forces in 2017.

Cancer Services Program

The Cancer Services Program (CSP) is funded through NYSDOH to provide breast and cervical cancer screening for uninsured/underinsured women and colorectal cancer screening for uninsured/underinsured men and women. The program provides outreach and education about the importance of timely cancer screening, as well as case management during the screening process. If a breast, cervical, colorectal or prostate cancer diagnosis is received, trained DQEs provide clients with application assistance for the Medicaid Cancer Treatment Program. Clients receive services through local physician offices and hospitals.

	2016	2017
Cancer Screenings and Diagnostic Procedures Completed	441	314

The 2017 screenings resulted in the following findings:

- 1 case of non-invasive breast cancer
- 1 case of atypical ductal hyperplasia
- 3 cases of hyperplastic polyps
- 2 cases of diverticulitis



Tobacco Use Prevention

CCDHHS collaborates with the Tobacco-Free Chautauqua, Cattaraugus, Allegany (Tobacco-Free CCA) Program administered by the Roswell Park Cancer Institute to carry out tobacco prevention efforts. Tobacco-Free CCA receives funds from NYSDOH to complete their work plan which aims to:

- Reduce the impact of retail tobacco marketing on youth by educating communities about the manipulative marketing tactics of the tobacco industry.
- Establish tobacco-free-community norms through clean outdoor air policies by working with communities to create more smoke-free parks, playgrounds and beaches.
- Lessen secondhand smoke exposure by working with landlords and tenants to implement smoke-free housing policies in multiunit dwellings.
- Diminish tobacco imagery in youth-rated movies by working for change in the rating system to require an R rating for movies that contain smoking imagery.
- Decrease tobacco-industry presence on social media by working with stakeholders and internet sites to enact and adhere to policies that protect youth from tobacco imagery.

In addition to providing support to Tobacco-Free CCA, the CCDHHS explores policy-level actions that can be taken at the county level to prevent tobacco use. In 2016, CCDHHS worked with the Board of Health and the Chautauqua County Legislature to garner community support for the Tobacco 21 law- a law that increases the minimum legal sale age for all tobacco products from 18 to 21. With overwhelming community support, the Chautauqua County Legislature voted to pass a Tobacco 21 law for this county in April, and County Executive Vince Horrigan signed the law in May. The Division of Environmental Health Services is responsible for the enforcement of the law, which began in September 2016. CCDHHS assisted storeowners with signage and education about the new law. There were no violations in 2017.

In late 2016 and 2017, CCDHHS worked with neighboring counties and other regional partners to explore the feasibility of enacting a law that prohibits smoking in vehicles while children are present. Education on the dangers of secondhand smoke in vehicles was provided to parents of young children through medical practices, home visiting programs, and childcare centers. Public service announcements on the radio, social media placements, and print ads informed the general public of these dangers. This information was also presented to the Chautauqua County Board of Health, who was in favor of the establishment of a local law and in further educational messaging. CCDHHS continues to collaborate with regional partners on a plan to move forward with smoke-free vehicles legislation.

For More Information



Additional information regarding services provided by the Chautauqua County Department of Health and Human Services may be obtained by calling 1-866-604-6789 or visiting the Department's webpage at www.CHQHHS.com



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