



# DELAWARE COUNTY PUBLIC HEALTH SERVICES

99 MAIN STREET, DELHI, NEW YORK 13753

Amanda Walsh, MPH Public Health Director

607-832-5200 Fax 607-832-6021

Early Intervention & Preschool Fax: 607-832-6022

## Health Services Advisory Board Minutes

<b>Meeting Date/Time:</b>	Thursday December 2, 2021 10:10am	
<b>Attendees/Title:</b>		
Joseph Cetta, Town of Walton Supervisor	Wayne Marshfield, Town of Hamden Supervisor	
Dr. Rohan Jayasena, Medical Director	Edward Bartos, District Office	
Tina Mole, Chairman of Board of Supervisors	Betty Scott, Town of Masonville Supervisor	
Terry Whitney, Office of the Aging	Kyra Shew, Compliance Officer	
Amanda Walsh, Public Health Director	Christina Gardner, Accounting Supervisor	

<b>Topic:</b>	<b>Discussion:</b>	<b>Action:</b>
Approval of Minutes	The September 16, 2021 minutes were approved as written.	
Staffing	There is one vacant position in the Public Health budget for a Supervising Public Health Nurse (SPHN). We are required by NYSDOH to hire a Public Health Coordinator for the fellowship grant funding we have received. The fellowship grant is to help increase Public Health staffing and infrastructure by providing fellows to the local health departments. We have received very few applications for fellows who would like to work in rural Delaware County but need to hire a coordinator to facilitate this grant program. We would like to restructure our staffing to change the SPHN position into a Health Education Program Coordinator to meet this need. The final paperwork to make these staffing changes is not yet ready and will be sent to the committee for review when completed but the committee approved making the staff change.	
2020 Annual Report	The 2020 Annual Report is not completely finished. (due to Covid backlog) The committee preliminarily approved the creation of the 2020 Annual Report. The report will be sent out to committee once finalized and prior to distribution to the public.	



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Annual Approval of Policy Books	<p>The committee approved the Public Health policies contained within the Public Health Policy and Procedure books.</p> <p>There are no updated policies to be approved at this meeting.</p>	
Environmental Update	<p>Ed reported that the Oneonta District Office has received additional staffing. They currently have two secretaries and have received approval for a third. They currently have two engineers and have received approval for a third. They will still be short a couple of engineers but they are happy to be adding to their staff. A Principal Sanitarian has been hired to replace one who retired in May of 2020. They hope to hire an additional Sanitarian at the end of this week. The plan is to reevaluate the agency workload with the new staff in place. Ed hopes to allocate 1 full time position to the Lead program. Since the regulation change, requiring lead home inspections at child lead levels of 5mcg/dl or higher, the Lead program workload has increased greatly.</p>	
COVID Update	<p>Numbers are increasing. We have a current positivity rate of 13.55%, which is the highest it's been to date. Yesterday's dashboard reported 111 new cases in a 2 day period, 290 active cases with 18 cases hospitalized. The NYS Contact Tracers are handling 15-20 cases each day but the rest of the case investigations is handled by Public Health staff. There is a backlog with case investigations and people are having to wait for their initial phone call and interview. We have been holding booster and pediatric Covid vaccination clinics. We have hired 2 new per diem staff (1 PHN and 1 LPN) and have a third staff member (LPN) starting soon.</p> <p>Many people are beginning to use home Covid tests (antigen tests). Home testing isn't reported to the NYS ECLRS (Electronic Clinical Laboratory Reporting System) and cases from home testing are not recorded in the NYS CommCare tracking system. If these people are exposed at a later date there is no documented history of them having COVID within the past 90 days as their positive report was not registered in our existing system, therefore there is no way to waive their quarantine requirements (due to history of having disease within 90 day period).</p> <p>While conducting case investigations we've seen a trend in cases where people are working for multiple days with limited or mild symptoms before they really start to feel badly and decide to get tested. This increases the transmission rates. Our vaccination rate is currently at 53.4%.</p>	



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	<p>During the holiday season with lots of gatherings of friends/family we find entire families becoming ill. We encourage people to get tested and stay home if they are not feeling well.</p> <p>Tina inquired about issuing a State of Emergency to assist with this increase in cases. It was explained the state of emergency gives you the ability to request additional resources and funding. At the local level it does not give you extra authority to issue mandates unless you have existing local laws in place or pass a resolution to enact a mandate.</p> <p>People are growing tired of the pandemic, the isolation and quarantine process, as well as the distancing and masking. Compliance with guidelines is waning. Many people are not getting tested even though they are sick. Many people report still working sick because if they don't work they don't get paid and there are staffing shortages. Due to staffing shortages, people feel obligated to work. Our booster clinics are packed but we are not seeing many people coming in for new vaccinations. Our vaccination rate is not increasing very rapidly.</p>	
	<p>Terri inquired about the accuracy of home test kits. Mandy explained that the accuracy of a home test depends on the kit but these should be used as a screening tool. Mandy has informed NYS that there is a need for the state testing sites to return to our area.</p> <p>We started contracting with NYS vested staffing company in the fall to assist with additional staffing for Covid vaccination clinics. Even with this contract we have not been able to routinely find enough staff to run our clinics so some of our staff have been pulled from case investigations to assist with booster vaccination and other clinics.</p> <p>Tina inquired if any of our schools are using remote learning. Mandy explained that last year schools were required to have a remote plan and had the ability to switch from in-person to remote learning more freely. This year the goal has been to keep schools open and in person. Public Health can recommend that a school move to remote learning if it is found that they are having high transmission within the school setting. What we find is that most of the positives identified as related to schools (staff, students) are from transmission outside of school in other settings. The downside of this is that unless the school is able to offer a remote option, the</p>	



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	<p>student would do their work at home as they do when out due to other illnesses. Tina inquired why school athletics are allowed if our positivity rate is high because last year we were required to be under a certain rate for athletics to occur. Mandy explained that the executive order related to high risk sports ended in June 2021. This year the decision to have school athletics is determined by each school district and their regional athletic divisions.</p> <p>Joe inquired about the NYS memo regarding “Test to Stay”. Test to stay in school is not endorsed by NYS at this time. Test to Stay allows children in quarantine to test each day of quarantine and if negative, the child is allowed to attend school that day. As this is not endorsed by NYS schools would not be allowed to use state resources or funding to support this program. This requires staffing, testing resources, tracking and oversight – none of which can currently be funded by state resources or ELC testing funding. This would fall to local tax payer dollars. All school districts in Delaware County would have to agree to participate to move forward with the program.</p>	
	<p>Dr Jayasena recommends vaccines as the best way to stop COVID. His office will be doing a pediatric clinic.</p>	
<p>3<sup>rd</sup> Quarter 2021 Incident reports</p>	<p>Mandy reviewed the 3<sup>rd</sup> quarter incident reports.</p>	
<p>Corporate Compliance Training and Annual Report</p>	<p>Mandy reviewed our Corporate Compliance Program, policies and procedures, essential elements and code of conduct.</p> <p>Kyra Shew, Compliance Officer, updated the committee with the Corporate Compliance Annual Report. Our 2021 Corporate Compliance activities included:</p> <ul style="list-style-type: none"> <li>• Monthly checks of providers utilizing the kChecks software.</li> <li>• Completed annual staff training</li> <li>• Successful enrollment in Medicare to complete Medicaid revalidation of one of our Medicaid numbers.</li> <li>• Handled delinquent billing issue with Preschool provider.</li> </ul>	



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	<ul style="list-style-type: none"> <li>• Early Intervention CAP was reviewed, accepted and instituted in 2021.</li> <li>• Quarterly Quality Assurance activities.</li> </ul> <p>The committee approved the Corporate Compliance Annual Report.</p>	
<p>PH Program Updates</p>	<p>We are experiencing a shortage of veterinarians who are willing to contract with us to run our free Rabies clinics. We anticipate this to be an issue next year. The monitoring and visualization of dogs has become more difficult for our agency. We have been successful using FaceTime to visualize dogs where the town or village DCO cannot/will not assist. We've had some very vicious dog bites and large number of non-compliant people this year. This continues to be problem and future discussion regarding an animal control officer may be warranted.</p> <p>COVID remains the #1 communicable disease. We have also seen a lot of Lyme disease and the routine GI diseases. Our CD staff is always busy with COVID and it can be hard to find time to deal with the regular/typical communicable diseases that are still here. These are mandated activities.</p>	
	<p>Early Intervention and Preschool programs continue to have a shortage of therapy providers. Speech remains the most needed service. We lost our full time speech pathologist this year and have not received a single application for a speech language pathologist.</p> <p>The Opioid grant is producing a video outreach campaign. FORDO continues to provide services.</p> <p>Immunization is still holding monthly clinics to provide immunizations to the uninsured and underinsured but most other activities revolve around COVID.</p>	
<p>Fiscal Report</p>	<p>Christina reviewed the fiscal report. (see attached) Some revenue accounts exceed 100% as revenue has been placed in the wrong accounts. Some revenue accounts exceed 100% as additional funding was added to the typical funding. State Aid has been completed for the 1<sup>st</sup> quarter only. Most grants have been claimed through the 2<sup>nd</sup> or 3<sup>rd</sup> quarters. Revenue remains</p>	



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	behind. Staffing gaps and supplanting concerns have lead to grants not being maximized as typical grant staff hours were spent on COVID.	
2022 Meeting Dates	January 13, 2022 March 10, 2022 June 9, 2022 September 22, 2022 November 10, 2022	
Meeting Adjourned at: 11:45pm		

Respectfully Submitted By,

Amanda C. Walsh, MPH  
Public Health Director

DELAWARE COUNTY PUBLIC HEALTH  
POLICIES AND PROCEDURES

Administrative Structure and Oversight (Binder 1)

- Compliance Program
- LHCSA
- HIPAA
- Personnel
- Job Descriptions

Public Health Programs (Binder 2)

- Car Seat Safety Program
- Communicable Disease Program
- Hepatitis Program
- Immunization Program
- Lead Poisoning Prevention Program (Childhood)
- Maternal Child Health Program
- Newborn Policies
- Rabies Program
- STD Program
- TB Program

Children's Programs (Binder 3)

- CSHCN/PHCP Program
- Preschool Program
- EI Program

Exposure Control Plan

Annual Review

Health Services Advisory Board – approved \_\_\_\_\_ Date 12/02/2021



Committee Chairperson

Starting: Fund 10 Function 14010 Object 01120005  
 Ending: Fund 10 Function 14189 Object 99999999

Report Date: 12/2/2021 9:07AM  
 Starting Date: 01/01/2021  
 Ending Date: 12/31/2021

**Delaware County**  
**Summary of Revenues, Expenditures and Changes in Departmental Balance**

	REVENUES					EXPENDITURES					REV. VS. EXP.	
	Adopted Budget	Modified Budget	Actual Receipts	Variance Bud- Rev	% Act	Adopted Budget	Modified Budget	Actual Expended	Variance Bud- Exp	% Act	Actual Net Income	Variance Budget
<b>0 GENERAL FUND</b>												
4012 PUBLIC HEALTH	545,000.00	792,670.41	1,124,257.00	(331,586.59)	142%	1,144,246.00	1,294,291.41	1,961,166.18	(666,874.77)	152%	(836,909.18)	(501,621.00)
4013 IMMUNIZATION	31,650.00	31,300.00	62,283.04	(30,983.04)	199%	9,800.00	9,800.00	15,878.31	(6,078.31)	162%	46,404.73	21,500.00
4018 SUBSTANCE ABUSE	72,000.00	0.00	18,329.93	(18,329.93)	N/A	35,565.00	0.00	35,955.84	(35,955.84)	N/A	(17,625.91)	0.00
4019 PH EMERG PREPAREDNESS	0.00	0.00	0.00	0.00	N/A	9,860.00	0.00	1,964.27	(1,964.27)	N/A	(1,964.27)	0.00
4035 FAMILY HEALTH PLAN SERVICES	18,000.00	18,000.00	21,439.11	(3,439.11)	119%	6,650.00	7,250.00	14,671.49	(7,421.49)	202%	6,767.62	10,750.00
4042 RABIES CONTROL	15,500.00	16,000.00	11,110.75	4,889.25	69%	21,460.00	26,200.00	10,454.48	15,745.52	40%	656.27	(10,200.00)
4046 PHYSICALLY HANDICAPPED	2,575.00	2,575.00	1,189.00	1,386.00	46%	5,000.00	5,000.00	3,608.76	1,391.24	72%	(2,419.76)	(2,425.00)
4050 CHILDHOOD LEAD SCREENING	27,379.00	27,379.00	25,836.45	1,542.55	94%	3,700.00	4,150.00	4,165.84	(15.84)	100%	21,670.61	23,229.00
4051 CAR SEAT SAFETY PROGRAM	18,200.00	19,200.00	22,197.33	(2,997.33)	116%	26,180.00	27,200.00	34,749.91	(7,549.91)	128%	(12,552.58)	(8,000.00)
4054 SOCIAL HYGIENE	0.00	0.00	0.00	0.00	N/A	15,000.00	15,000.00	3,788.71	11,211.29	25%	(3,788.71)	(15,000.00)
4059 EARLY INTERVENTION PROGRAM	220,500.00	225,500.00	238,793.21	(13,293.21)	106%	553,040.00	551,414.00	907,660.75	(356,246.75)	165%	(668,867.54)	(325,914.00)
4060 CPSE 3-5	1,220,000.00	1,360,000.00	1,170,201.16	189,798.84	86%	2,956,371.00	3,047,349.00	3,632,838.16	(585,489.16)	119%	(2,462,637.00)	(1,687,349.00)
4070 CHILD HEALTH PROGRAM	1,000.00	1,000.00	770.00	230.00	77%	3,300.00	3,300.00	649.35	2,650.65	20%	120.65	(2,300.00)
4074 OTHER COMMUNICABLE DISEASES	0.00	0.00	0.00	0.00	N/A	4,000.00	12,000.00	2,317.07	9,682.93	19%	(2,317.07)	(12,000.00)
<b>Total 10 GENERAL FUND</b>	<b>2,171,804.00</b>	<b>2,493,624.41</b>	<b>2,696,406.98</b>	<b>(202,782.57)</b>	<b>108%</b>	<b>4,794,172.00</b>	<b>5,002,954.41</b>	<b>6,629,869.12</b>	<b>(1,626,914.71)</b>	<b>133%</b>	<b>(3,933,462.14)</b>	<b>(2,509,330.00)</b>
<b>Grand Total:</b>	<b>2,171,804.00</b>	<b>2,493,624.41</b>	<b>2,696,406.98</b>	<b>(202,782.57)</b>	<b>108%</b>	<b>4,794,172.00</b>	<b>5,002,954.41</b>	<b>6,629,869.12</b>	<b>(1,626,914.71)</b>	<b>133%</b>	<b>(3,933,462.14)</b>	<b>(2,509,330.00)</b>

-- End of Report --