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LETTER FROM THE COMMISSIONER

The year 2022 was one for stabilization, transformation, renewal, and recommitment to the full range of public health activities. This was the year the health department resumed full services in every arena. We held our Public Health Summit in person for the first time in three years; we have restarted our in-person smoking cessation classes for Putnam residents wanting to quit tobacco, and last October, our annual outdoor event for household hazardous waste collection saw record numbers of participants.

As we emerged from the throes of a pandemic and began to live with COVID-19, there were lessons learned that were quickly adapted to address emerging needs, from communicable diseases to emergency preparedness and more. This past fall, confronted by a litany of other infectious diseases, we witnessed a multi-county Monkeypox outbreak, polio transmission in the Hudson Valley, and early season spikes in flu and respiratory virus syncytial virus, known more simply as “RSV.” Our public health and healthcare workforce responded quickly with flu and COVID-19 vaccination promotion that is continuing. Both are now widely available at pharmacies and at our health department and community-based clinics.

Facing pandemic challenges together, we have forged stronger relationships with our partners, both with other county agencies and with community-based organizations. Through our public health emergency preparedness program, and in collaboration with the county’s Bureau of Emergency Services, we conducted a tabletop mass fatality exercise that brought together law enforcement, first responders, not-for-profits, and government agencies to build upon lessons of the past three years and improve preparedness across all fronts.

We all have yearned for and welcomed a return to the way things were. However, the pandemic has changed some things forever, and some for the better. Our seniors and our residents with disabilities were among those at greatest risk during the pandemic. This unfortunate truth has opened opportunities to strengthen specific collaborations with our Putnam County Office of Senior Resources and our Department of Social Services and Mental Health. Our health department staff have taken this task on with careful attention toward the expansion and advancement of efforts to improve health across all communities. There is no turning away from the bright light that has been cast on the entrenched inequities and health outcome disparities for different races, ethnicities, and ages. It has brought heightened public attention and needed support for the public health sector and reminds us of the importance of addressing the determinants of health, such as housing, food access, transportation, education, and other social factors that impact one’s health.

We remain committed to our mission to improve and protect the health of our entire community, and through hiring bilingual staff as well as temporary workforce expansion through the Public Health Corps Fellowship, we have been able to enhance local public health infrastructure, expand programming, evaluation, and communications; and sustain existing and establish new collaborations. I invite you to review this annual report to see what we have accomplished this past year and envision where we can go from here.

Sincerely,



Michael J. Nesheiwat, MD
Interim Commissioner of Health
Putnam County Department of Health

PUTNAM COUNTY DEPARTMENT OF HEALTH Highlights and Events

20 22

PREVENT

- A total of **301 animals were vaccinated** against rabies by a partnering veterinarian during 3 vaccination clinics conducted at Putnam Veterans Memorial Park and Hubbard Lodge.
- February 2022 marked the end of the global pandemic vaccination campaign after administering **approximately 26,000 COVID-19 vaccines**.
- Continued to offer **public flu clinics at drive-thru events** for Putnam County residents and employees, no-cost school flu clinics at every district, and special clinics at the senior centers.
- Continued to **perform in-home lead investigations** and case follow-up activities as needed.
- **Engaged employees and MRC volunteers** in wellness offerings including 2 exercise programs and 12 lunchtime learning events highlighting mental health and well-being.

PROMOTE

- Mother's Group and Maternal Health **home visits resumed** after a COVID-19 related pause.
- **Four additional employees** were NYSDOH Food Safety Inspector Officer certified.
- Ranked the **#1 healthiest county** in the state according to the Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute.
- Hosted the MRC conference for **21 MRC volunteers** to expand their knowledge of the MRC program, increase resilience, and introduce them to emerging health issues in Putnam County.
- Early intervention, along with community stakeholders, started a **community support initiative** with trainings and education for families, children, and daycare centers for social and emotional support.
- Participated in the Public Health Corps program, adding 1 Local Coordinator and 3 Graduate Fellows, allowing PCDOH to **enhance public health infrastructure**.
- **Organized and facilitated** a Public Health Summit with over 92 attendees to share CHA results and discuss CHIP priorities with community partners.

PROTECT

- The Feral Cat Task Force **raised rabies awareness** and limited potential exposure by trapping, neutering and vaccinating 246 cats. From those cats, 75 were adopted or fostered, decreasing the feral cat population.
- The PHEP Coordinator co-developed a **multi-agency Mass Fatality Table Top Exercise** to test the county-wide plan.
- Engineering **received additional funding** for the septic replacement program through NYS DEC and EFX.
- Identified and **corrected 62 critical health hazards** from food operators.

OUR MISSION

The mission of the Putnam County Department of Health is to improve and protect the health of our Community.

OUR CORE SERVICES

Core services include community health assessment, disease surveillance and control, emergency preparedness, environmental health protection, family health promotion, and health education.

- Public Health Nurses **distributed 73 Naloxone Kits to continue opioid harm reduction strategies**.
- Continued **lead poisoning prevention education** by mailing 1,430 reminder postcards for lead testing at ages one and two.
- Offered a **Walk for Wellness Challenge** throughout the month of July and had over 50 employees participate.

- Public Health Fellows recruited over **250 CHA survey responses** from residents.
- **9 Putnam County residents** successfully quit smoking through the Freedom From Smoking program offered by PCDOH in partnership with Putnam Hospital Center.
- Health Education staff attended **12 health fairs** and gave **community presentations** on tickborne diseases, mental health, communicable diseases and more.
- Partnered with the IT department to redesign the health website, making it **more accessible and easier to navigate** for Putnam County Residents.
- Over **100 Hudson Valley residents** attended the screening of the documentary "All the Lonely People" hosted by the Office for Senior Resources in collaboration from Health Education staff, followed by a panel discussion to **discuss the effects of loneliness on mental and physical health**.
- Enhanced access for residents with **27 fillable forms** made available on PCDOH website.
- Provided residents and community health partners with a **comprehensive picture of health** in Putnam County with the release of the triannual Putnam County CHA/CHIP.

- Putnam County MRC received an Operational Readiness Award to offer **CPR/Stop the Bleed and Suicide Prevention trainings** at no cost to volunteers.
- **Investigated 357 Rabies exposures**, resulting in **27 people** receiving prophylaxis for "Reasonable Exposure Probability."
- **Collected household hazardous waste from over 800 residents** during drop off days in April and October.
- Participated in **two drive-up medication take back events** with the Prevention Council, Putnam Hospital Center and Sheriff's Department to collect **550 pounds of medications** to prevent misuse and overdose.

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2022 Board of Health

Daniel C. Doyle, DMD, President
Paul A. Lebwohl, MD, Vice President
Michael Schoolman, MD, Secretary
Kathi Heiber, DVM
Amy Sayegh, Putnam County Legislature

THE PUTNAM COUNTY DEPARTMENT OF HEALTH OVERVIEW



Public Health
Prevent. Promote. Protect.

MISSION STATEMENT

The mission of the Putnam County Department of Health (PCDOH) is to improve and protect the health of our community.

VISION STATEMENT

We will be recognized as bold and innovative leaders, partnering with our community in advocating for public health.

VALUES

- Excellence
- Service
- Professionalism
- Commitment
- Compassion

POPULATION SERVED

The PCDOH serves the entire population of Putnam County. According to the 2020 census, Putnam County has 98,714 residents, with 19.8% of the population under 18 years of age and 25.2% over the age of 60. Spanish-speaking residents account for 10.5% of the population.¹

PUBLIC HEALTH ACCREDITATION

After attaining accreditation status in 2016, the Department was due for re-accreditation in 2021. Due to the COVID-19 pandemic, the Public Health Accreditation Board (PHAB) permitted health departments to apply for extensions. Year-long extension requests were submitted in 2021 and 2022; both were approved, and re-accreditation is now due in early 2023. Throughout 2022, department-wide preparations were made for re-accreditation. Committee work continued in Strategic Planning, Communications, Workforce Development, Quality Improvement and Performance Management, and Personnel. The health department staff diligently prepared documentation and gathered required information outside committee work. The national performance standards of accreditation allow for the health department to remain efficient while providing the highest quality services to the residents of Putnam County.



¹ Source: U.S. Census Bureau; American Community Survey, 2020 American Community Survey 5-Year Estimates, Table S0101

https://data.census.gov/cedsci/table?q=s0101&g=0400000US36_0500000US36027,36071,36079,36087,36105,36111,36119_1600000US3651000&tid=ACSSST5Y2020.S0101

PUBLIC HEALTH PRIORITIES

TEN ESSENTIAL PUBLIC HEALTH SERVICES

The 10 Essential Public Health Services provide a framework for public health to protect and promote the health of all people in all communities. To achieve optimal health for all, the Essential Public Health Services actively promote policies, systems, and services that enable good health and seek to remove obstacles and systemic and structural barriers, such as poverty, racism, gender discrimination, and other forms of oppression, that have resulted in health inequities. Everyone should have a fair and just opportunity to achieve good health and well-being.



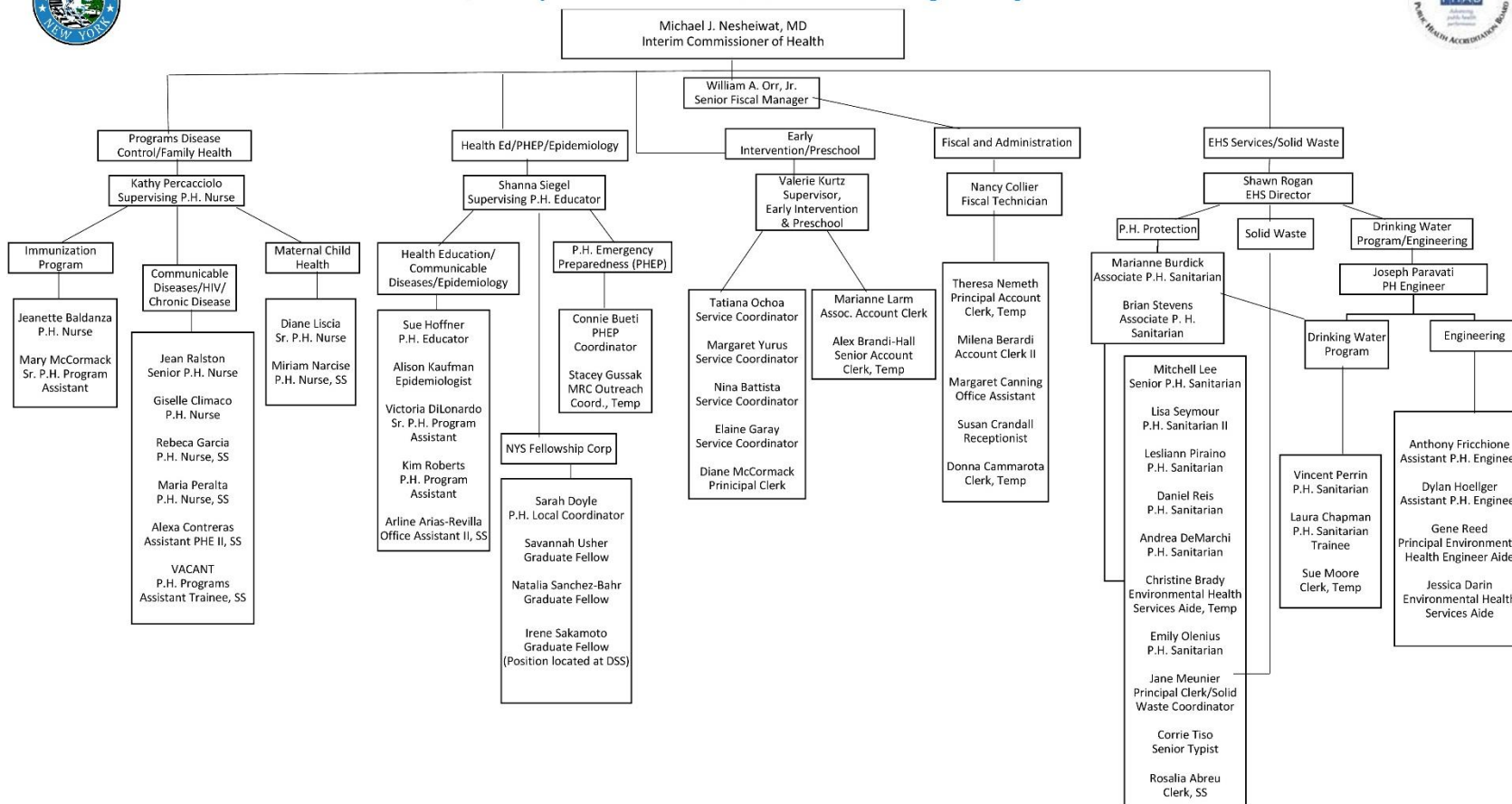
Source: Centers for Disease Control and Prevention (CDC). (2020). 10 Essential Public Health Services. <https://phnci.org/uploads/resource-files/EPHS-English.pdf>

ORGANIZATIONAL STRUCTURE

The PCDOH is divided into five sectors: Early Intervention; Fiscal and Administration; Health Education (includes Planning, Evaluation and Public Health Emergency Preparedness); Nursing and Clinical Services; and Environmental Health Services. While each area operates with distinct staff members, they collaborate to provide Putnam County residents with the highest quality programs and services.



Putnam County Department of Health Organization Chart 2023



P.H. - Public Health
SS - Spanish Speaking

mp: 1/27/23

BOARD OF HEALTH

The Board of Health serves the PCDOH by advising on public health policy. Division managers provide regular reports to the Board and attend meetings at the request of the health commissioner to present and discuss relevant health issues.

FISCAL/ADMINISTRATIVE

The fiscal/administrative division is responsible for the financial oversight at the PCDOH. Preparation of all financial reports, including State Aid reimbursement, grant and fiscal monitoring, purchase orders, and accounts receivable, are performed by fiscal office staff. Department-wide policies and procedures dealing with time accruals, call-in, travel requests and reimbursement are also handled by this division as well as all personnel related needs.

HEALTH EDUCATION

Assessing the health of the community and educating the public about positive health behaviors remain core functions and New York State mandated activities for all local health departments. The Health Education Planning and Evaluation (HEPE) unit coordinates and promotes countless disease-specific prevention campaigns and programs throughout the year to the residents of Putnam County. These may be state-mandated or serve to support the nursing and environmental divisions in promoting various programs and events. Beyond these fundamental duties, HEPE also oversees broader planning, communications, and marketing functions. These include public information and crisis communications, social marketing and branding, media relations, and editorial and design creation for the department. Epidemiologic support is provided within the department and with partner agencies through ongoing data analysis, assessment, and evaluation activities and surveys. These efforts support departmental and countywide planning as well as drive the strategic planning process. HEPE is also responsible for the management of the Putnam County Employee Wellness program, supporting health improvement for all county employees. Additionally, Public Health Emergency Preparedness (PHEP) staff work within the health education division and oversee the planning, implementation, and evaluation of PHEP related activities.

NURSING AND CLINICAL SERVICES

The Nursing Division utilizes a variety of strategies to improve and monitor the health status of Putnam County residents. These include outreach to populations at risk for specific health problems; increasing access to services, either by direct provision of care or by partnering; maternal child health (MCH) consults; screening and surveillance for the early detection of disease; health education and promotion activities to improve prevention; and coalition development within the community to address service gaps. Nursing case management is provided through the Lead Poisoning Prevention, Tuberculosis Control, and Rabies Prevention and Control programs. Clinical services are provided in the areas of immunization, HIV and Hepatitis testing and counseling, and tuberculosis testing, diagnosis, and treatment.

The PCDOH maintains a license for a Licensed Home Care Services Agency (LHCSA) which ensures the ability of the department to continue conducting home visits for the mandated public health programs such as Maternal Child Health, Lead Poisoning Prevention, Communicable Disease, and Immunization. Approval for this program was obtained through the New York State department of health (NYSDOH), which also conducts periodic surveys to assess for regulatory compliance. The PCDOH LHCSA is not a full-service agency as personal care and home health services are not provided.

ENVIRONMENTAL HEALTH SERVICES (EHS)

The Division of Environmental Health Services implements specific strategies and ensures environmental quality in Putnam County. Enforcement of the New York State and Putnam County Sanitary Code and applicable laws, administrative rules, and regulations guides all programmatic activities. Public Health

Protection (PHP) strategies include monitoring and regulating service establishments and other public facilities. Regulations are also enforced to ensure rabies control, lead positioning prevention, and clean indoor air. In addition, environmental quality is guaranteed by monitoring water quality and regulating public water systems, treatment plants, sewage disposal systems, and solid waste facilities; approving realty subdivision plans and construction; providing environmental risk assessment; and responding to environmental emergencies.

EARLY INTERVENTION AND PRESCHOOL PROGRAMS

The Early Intervention (EI) program evaluates infants and toddlers from birth through two years of age for developmental delays (physical, cognitive, communication, social-emotional, and adaptive). If eligible for services, the EI program provides special instruction, speech, occupational, and physical therapy, and other services as appropriate. The Preschool Special Education program provides similar services for eligible children three to five years of age diagnosed with a disability that affects their learning or their ability to participate in age-appropriate activities.

PARTNERSHIPS WITH ACADEMIA

Partnerships with academia are vital to expand public health practice's reach and furthering the public health science base. The PCDOH works with many academic institutions to mentor students, provide relevant work experience and ultimately expand the understanding of the public health field.



UNDERGRADUATE SCHOOL EXPERIENCES

Mount Saint Mary's College sent six Bachelor of Science in Nursing (BSN) students to work with PCDOH nurses to gain exposure to all aspects of community/public health nursing and environmental programs. During their semester-long experience, BSN students select an area of community/public health interest and then create an educational presentation. Their presentation allows them to educate other BSN students and PCDOH staff. One public health student from the College of New Jersey spent a semester working with health education staff as a Putnam Invests in Leader of Tomorrow (PILOT) intern. The EHS Division's PILOT intern was a student at SUNY Binghamton majoring in Biomedical Engineering. This intern assisted the department with biological sampling of area waterbodies and drinking water supplies as well as database management.

DEPARTMENTAL COMMITTEES

To reinforce the culture of quality throughout the department and in accordance with PHAB-accreditation standards, the following committees continue to meet and work toward department-wide goals and objectives outlined in the Quality Improvement/Performance Management Plan and Strategic Plan.

QUALITY IMPROVEMENT AND PERFORMANCE MANAGEMENT (QIPM) COMMITTEE

As the global pandemic began to wind down, the QIPM committee resumed meeting one to two times monthly, monthly QIPM Quick Tips were emailed to all PCDOH employees, and meetings with other committees resumed. Workforce Development and QIPM committees met to review, and revise required trainings related to quality improvement and performance management. The revised QIPM plan was completed in 2022.

STRATEGIC PLAN COMMITTEE

The Strategic Plan Committee focused on addressing the pandemic impact on the strategic plan. The committee worked to ensure objectives that have been met or modified were revised accordingly and updated in the record of changes. The committee also completed re-accreditation measures related to strategic

planning, as well as its intersection with workforce development, Quality Improvement/Performance Management and Communications. In-person meetings resumed in 2022 and the committee began planning for a department-wide meeting to take place in 2023, which will set the foundation for the creation of a new strategic plan.

COMMUNICATIONS COMMITTEE

During 2022, the Communications Committee worked towards accreditation by refining communication protocols and procedures. These updated protocols and procedures allow for the department to disseminate health information to Putnam County residents more effectively and efficiently, while also addressing health inequities.

PERSONNEL COMMITTEE

The Personnel Committee continues to meet on a quarterly basis. Aspects of succession planning, including revising job descriptions to reflect current work expectations more accurately, were a focus. The personnel committee continued to implement a policy and procedure for fair and equal interviews for all candidates. This includes the committee's consistent review of applications to ensure all qualified candidates were considered. A health department-specific orientation manual for new DOH employees continued to be developed after a pandemic-related hiatus. The orientation manual serves to give PCDOH employees the resources and information to make them more confident and comfortable working at the health department.

WORKFORCE DEVELOPMENT COMMITTEE

The Workforce Development Committee resumed meetings and morale boosting events in 2022. Training courses identified during the Training Needs Assessment (TNA) conducted in 2020 were taken by staff and tracked by the committee. The Committee also completed working on Reaccreditation documents.

The Workforce Development Committee met quarterly with the QIPM Committee to review feedback on trainings and discuss identified training opportunities to increase knowledge of Performance Management and Quality Improvement processes.

FISCAL AND ADMINISTRATION

Since the onset of the COVID-19 pandemic, the landscape of public health funding has evolved, with increased opportunities to enhance services and programs through federal and state as well as private grant-supported initiatives. 2022 saw the oversight and management of additional grants increase overall, totaling over 4 million dollars. The grants awarded in 2022, are managed by the fiscal/administrative division in addition to annual grants awarded for mandated or ongoing programs.

Article 6 of the Public Health Law sets forth the statutory framework for the Department's State Aid program, which partially reimburses local health departments for eligible expenses related to specific public health services. Of eligible expenses, PCDOH is reimbursed \$750,000 and 36% thereafter. Of note, in 2022, fringe benefits were added to the eligible expenses.

STAFFING CHANGES

RETIREMENTS AND DEPARTURES

- The Principal Account Clerk working in fiscal for 25 years retired in April 2022 and returned to work for 12 hours per week to train fiscal staff.
- EHS had the retirement of a Senior Typist and a transfer of a receptionist to another department in the County.
- The Nursing division lost two full-time nurses and one support staff in 2022.
- A Principal Account Clerk working in Preschool for 20 years retired in April 2022. An Associate Account Clerk has moved into the position.

NEW HIRES

- PHEP added a part-time MRC (Medical Reserve Corps) Assistant position focused on training and supporting current MRC volunteers and new recruits.
- A Senior Typist was hired in EHS to fill a vacancy created by retirement.
- A new Receptionist was hired to fill a vacancy.
- A full-time EHS Aide position was created and filled to assist Water and Engineering. The employee was previously filling the role in a part-time capacity.
- EI filled the previous Associate Account Clerk position with a part-time Account Clerk.

LOOKING AHEAD

- Fiscal intends to fill a full-time position to restore staffing to appropriate levels and support the management of grants.
- The department is assessing staffing needs related to public health data infrastructure and improvements.
- EHS will look to add an Assistant Public Health Engineer position in the 2024 or 2025 budget to meet the growing needs and workload of the department created by the emerging contaminants regulations for drinking water.
- Nursing positions are advertised as bilingual preferred allowing for an increase in bilingual nursing staff. Nursing will face retirement of at least three key positions in the next 1-3 years, including the Nursing Supervisor position, the Immunization Coordinator, and the Senior Public Health Program Assistant, over 80 years of total experience.
- EI is assessing needs for an additional Service Coordinator.
- EI has two potential retirements in the coming two years.

HEALTH EDUCATION

Public health education is delivered in a variety of formats—from tabling at community events and delivery of formal presentations and classes, to informal discussions with residents and individually tailored conversations with patients. In recent years, mass communication methods have become a central method of educating the public about health. This emphasis is prescient, given the continued growth and popularity of social media, and its evolving role in crisis and emergency communications (CERC). The CERC gold standard continues to be the CDC’s original mantra—be first, be right, be credible. Community partners and residents alike rely on the PCDOH for timely and reliable information on public health issues as well as to stay informed of the overall health of the community. By providing access to resources, data collection, assessment, and guidance, the health department empowers community organizations and coalitions, new and old, to successfully coalesce and improve population health.

In supporting best practices, the NYSDOH encourages population-based approaches to assess the health of the community as a whole and identify health problems and requires local health departments to conduct a Community Health Assessment (CHA) to inform the Community Health Improvement Plan (CHIP). The CHA/CHIP process is about the collective community deciding what is most important and most valued by the community and its residents, based on quantitative and qualitative data provided by the local health department. The required CHA/CHIP document, submitted to the state, describes the health of our the Putnam community, our PCDOH’s process of identifying two major challenge areas, and the interventions selected to help to make improvements in these areas. A plan for implementing and evaluating this work has also been described with measurable goals in place to track progress, this plan will guide our community team over the next few years.

HEALTH EDUCATION THROUGH ASSESSMENT & PLANNING COMMUNITY HEALTH ASSESSMENT AND COMMUNITY HEALTH IMPROVEMENT PLAN

The Prevention Agenda (PA) is New York State’s health improvement plan that continues to be the guide for state and local action. The goal is to improve the health and well-being of all New Yorkers and promote health equity across populations. The COVID-19 pandemic has brought more attention to the issue of health equity, helping to renew efforts and build on what the local public health system has achieved.

The 2019-2024 Prevention Agenda has five priority areas that serve as the foundation for the Putnam County Community Health Improvement Plan (CHIP):

- Promote Well-Being and Prevent Mental and Substance Use Disorders
- Promote Healthy Women, Infants, and Children
- Prevent Chronic Disease
- Promote a Healthy and Safe Environment
- Prevent Communicable Diseases



After review of primary and secondary data from the Community Health Assessment and incorporating information from the Putnam County Public Health Summit (Summit), the PCDOH and its community partners have identified two priorities to report to the NYSDOH. While the PCDOH will only be reporting two priority areas to NYSDOH, work in all PA priority areas continues. The two priority areas being reported are: 1) Promote well-being and prevent mental and substance use disorders, and 2) Prevent communicable diseases.

IDENTIFIED HEALTH PRIORITIES

Promote Well-Being and Prevent Mental and Substance Use Disorders

Prevent opioid and other substance misuse and deaths

- Increase the availability of/access to overdose reversal (Naloxone) training to prescribers, pharmacies, and consumers.
 - Engage county high schools to require naloxone training for graduating seniors; conduct trainings at participating high schools (senior check-outs); distribute kits to all graduating seniors at senior check-outs.
 - Engage on-site consumption liquor licensed establishments (OSCLLE) to participate in Narcan Behind Every Bar (NBEB) program; conduct trainings at participating establishments; distribute kits and opioid overdose emergency cabinets to participating establishments.
- Build support systems to care for opioid users or at risk for overdose.
 - First response agencies (emergency medical service corporations, fire departments, and police departments) will be engaged to participate in naloxone leave behind and peer referral programs.
 - Participating first response agencies will distribute naloxone kits and offer referrals to Certified Recovery Peer Advocate (CRPA) at all opioid related calls, and other substance-related calls.
 - CRPA will reach out to residents who have been referred to offer support and linkage to services within 3 days of referral.

Prevent Communicable Diseases

Improve vaccination rates

- Maximize use of the New York State Immunization System (NYSIIS) for vaccine documentation, assessment, decision support, reminders, and recall. Increased use of the registries can better inform assessments of vaccine coverage and missed vaccination opportunities and help address disparities in vaccine coverage including those for specific age groups.
 - Expansion of current Immunization Quality Improvement Programs (IQIP) activities with recruitment of practices to leverage NYSIIS to improve immunization practice through:
 - Systematic monitoring of data quality through crosschecks between EHR and NYSIIS. Consistent utilization of recall/reminder reports to send notifications to patients due or overdue for 4:3:1:3:3:1:4 series vaccination.

CHIP PRIORITY AREAS

PROMOTE MENTAL HEALTH AND PREVENT SUBSTANCE USE

The Prevention Council of Putnam (PCP) and the PCDOH will utilize shared platforms such as the county-wide behavioral health provider group, the opioid settlement task force, suicide prevention task force, communities that care coalitions and other local collaborative harm reduction forums to share progress on the focus area and associated objectives to ensure community-wide engagement and support. A shared tracking document will enable the PCP and



PCDOH to collaboratively monitor progress of the associated harm reduction activities in real time.

PREVENT COMMUNICABLE DISEASES

The PCDOH will monitor and track progress of participating Vaccines for Children (VFC) practices, through collection of metrics and provision of assistance on the established IQIP follow-up schedule. In the first year of implementation, PCDOH plans to conduct additional assessments (community surveys, focus groups) to further evaluate factors that may contribute to low vaccination rates (lack of access) and other opportunities for intervention.

HEALTH EDUCATION THROUGH COLLABORATION

While the residual impacts of the COVID-19 pandemic are still being felt across sectors, collaboration, and communication among stakeholder groups in Putnam County have benefitted from the strengthened relationships forged early in the pandemic. School district personnel and Putnam Northern Westchester BOCES, town supervisors and other officials, and the mental health community of agencies all continue to work in tandem with PCDOH to support the health and well-being of their communities. Public health is built on collaboration, and the cross-sector alliances are more important than ever.

Throughout the year, coalitions continued to aid health education staff in the dissemination of information. Health education staff provide both written and verbal public health updates to these locally based groups:

TASK FORCE AND COALITION PARTICIPATION

- Community Resource Group
- Health Emergency Preparedness Coalition
- Live Healthy Putnam
- Mental Health Provider Group
- Reproductive Health Coalition
- Disaster Preparedness Community Resilience Task Force
- Communities That Care Coalitions
- Fall Prevention Task Force
- HEALing Grant Steering
- Suicide Prevention Task Force
- School Wellness Committees
- Putnam Hospital Community Health Needs Committee

HEALTH EDUCATION THROUGH COMMUNICATIONS

Mass communication methods have become a more central method of educating the public about health concerns. Both the NYSDOH and PHAB, the Public Health Accreditation Board, focus on population-based approaches and interventions. This focus is bolstered by the continued growth and dependence on social media and its evolving role in crisis and emergency communications or CERC.



The health department utilizes a multitude of channels strategically focused on meeting the residents “where they are,” and where they get their news and health information. As the barrage of COVID-19 messaging has subsided, and the department has stepped up its preparation for re-accreditation in 2023, staff have enhanced their focus on their strategic branding objectives, starting with marketing health programs and services to both the public and our partners. The goal is to raise the visibility and value of the department—to serve as a trusted leader and platform in the community for information dissemination that results in behavior change.

In an increasing digital and social world, the health department upholds this identity seamlessly across all outlets, traditional and digital. Media releases, news briefs and alerts, data reports and dashboards, physician

advisories, social media posts, flyers, and brochures, make up most of the communications tools used. However, the mix of media communications also includes advertisements, letters to the editor, in-depth feature pieces, and email group messages, making optimal use of the department’s visual identity and voice.

While traditional media releases, written and disseminated to print and online contacts continue to earn coverage and visibility, direct-to-resident messaging including website content and social media usage continues to increase. To address barriers to accessing reliable, local health information, health education staff developed an internal process for Spanish language translation of health education messages, including media releases, news briefs, and social media posts. In addition to earned media via releases, the PCDOH continues to be a dependable source for local journalists to access information from subject matter experts on a range of topics.

The main social media accounts on Twitter and Facebook have shown steady growth since their creation in 2010. An Instagram account, utilized consistently since 2020, has also shown steady growth. Not reflected in the graph below are two Facebook accounts for targeted audiences. One engages parents of young children with developmental delays in the Early Intervention community, and the other is dedicated to the County’s MRC volunteers.

TABLE 1
COMMUNICATION MODALITIES

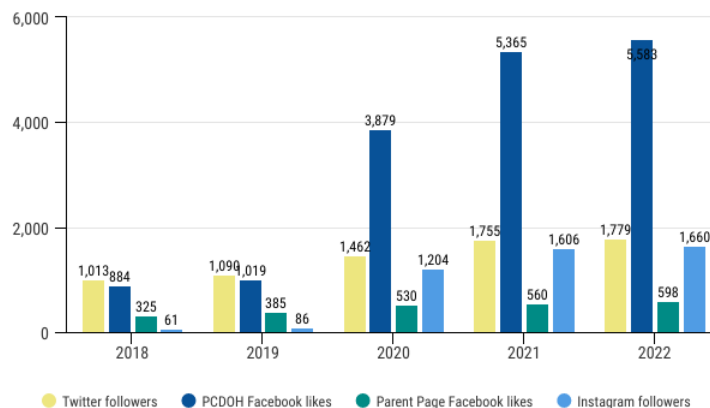
CATEGORY	2022	2021*	2020*
HD website news briefs	30**	63	33
HD website health updates/dashboards (i.e., flu, COVID stats)	87	49	68
Published survey reports and plans	5	3	n/a
Print advertisements	2	0	9
Social Media posts (Facebook, Twitter, and Instagram)	1,635	518	1,615
Media releases distributed (also includes letters to editor)	15	28	27
Emails responded to from COVID19@putnamcountyny.gov	23	472	304

* 2020 and 2021 numbers reflect COVID-only messaging

** 2022 news briefs number is estimated due to website platform transition.

FIGURE 1

SUMMARY OF SOCIAL MEDIA REACH, 2018-2022



HEALTH EDUCATION THROUGH EMPLOYEE WELLNESS

Housed in the health department, the Putnam County Employee Wellness Program's goal is to support well-being, lessen workplace stress, increase productivity, reduce healthcare costs, and improve the lives and health of employees. The wellness program coordinator engages Putnam County employees and MRC volunteers in wellness offerings such as fitness classes, walking challenges, employee blood drive and Lunchtime Learning presentations. The 2022 Lunchtime Learning presentation topics included:



- Battling the Winter Blues
- Naloxone (Narcan) Training
- Summer Food Safety Tips
- Together for Mental Health
- Grow Your Own Microgreens
- Cultivate Calm
- Reducing Home Energy Costs
- Employee Assistance Program (EAP)
- Vaccine Q&A
- Container Gardening
- Emergency Preparedness Tips
- Self-Care & Body Scrubs

County employees also receive emails containing health information such as a digital version of *The Nutrition Action Newsletter*. A monthly wellness calendar is provided to all employees via email as well as on the countywide screensaver. In collaboration with Putnam Hospital Center (PHC), a hospital wellness board is updated monthly to include awareness days and health topics such as sun safety, heart health, mental health awareness, and breast cancer awareness.

NEW YORK STATE PUBLIC HEALTH CORPS. FELLOWSHIP

In July 2021, the PCDOH was awarded approximately \$1.1 million from the NYSDOH through the New York State Public Health Corps (NYSPHC) Fellowship Grant. The purpose of this grant is to augment public health staffing capacity at the State and Local levels to support COVID-19 response operations and increase preparedness for future public health emergencies. The original grant period was January 2022 through June 2023. In February of 2022, a Local Coordinator was brought on to oversee the hiring process of the Graduate Fellows and act as the liaison to NYSDOH. Three Graduate Fellows started in April, May, and September. The three positions include a Bilingual Community Outreach Specialist, a Health Assessment and Planning Specialist, and a School Support Mental Health Worker. Two Graduate Fellows and the Local Coordinator are housed in the health department while the School Support Mental Health Worker Graduate Fellow is located at the Departments of Social Services, Mental Health, and Youth Bureau. This Graduate Fellow is a clinically licensed social worker and has been working closely with Putnam County schools to provide additional mental health services to school-aged students and lighten the burden district mental health staff faced due to the mental health crisis.

The Local Coordinator, Community Outreach Specialist, and Health Assessment and Planning Specialist



participated in activities related to the CHA, such as survey building and dissemination, community and partner engagement, primary and secondary data analysis, and planning the Putnam County Public Health Summit. Of the three surveys built and disseminated by the NYSPHC Graduate Fellows and the Local Coordinator, one was specific to community partners, and two were specific to the public. The three positions also presented their survey data and co-facilitated breakout room sessions at the Summit.

Together, the fellowship program oversees three grants, two federal grants disseminated through NYS, and one awarded from National Association of County and City Health Officials (NACCHO), totaling

approximately \$3.8 million. The oversight of these grants includes writing proposal work plans and budgets, being the point of contact for all communications with grant administrators, managing purchases, and submitting vouchers and additional documentation required during the grant period.

The Graduate Fellows and Local Coordinator have attended over 20 community events in 2022, highlighting and promoting the services and programs offered by the PCDOH, including educating Putnam residents on various health topics.

In November 2022, two of the Graduate Fellows and the Local coordinator attended the 1st NYSPHC Annual Summit in Albany, NY, to present a poster board presentation that highlighted the upstream and downstream benefits of community and partner engagement observed during the Regional CHA activities.

In December 2022, the NYSDOH announced a no-cost extension to the grant, extending the program's end date through June 2024; and additional funding to the PCDOH.

PUBLIC HEALTH EMERGENCY PREPAREDNESS

In 2022, Public Health Emergency Preparedness (PHEP) remained a high priority for the Health Department. Statewide, local public health departments were designated by the NYSDOH to serve as lead agencies for this critical and mandated initiative. The formation and continuation of community partnerships has been essential in emergency preparedness planning and program implementation. PHEP involves coordinating, collaborating, and implementing planning and response activities with key local, regional, and state agencies.

The PCDOH continued to communicate and work closely with multiple agencies and organizations during the past year. A major requirement of the preparedness program, inclusive of PHEP and Cities Readiness Initiative (CRI) has been the quarterly submission to the New York State DOH of time orientated grant reporting requirements, or deliverables, assuring that program mandates are addressed and implemented. Deliverables are specific, time-sensitive, detailed and provide structure and standardization in identifying and addressing specific measurable criteria for each of the federal/state PHEP grant capabilities. The PCDOH maintained a countywide public health leadership role during the year by implementing and performing the following:

DISASTER PREPAREDNESS/COMMUNITY RESILIENCE TASK FORCE

The original Bioterrorism/Disaster Preparedness Task Force organized after 9-11 was revamped as the Disaster Preparedness/Community Resilience Task Force. This group serves as a county-wide advisory committee on emergency preparedness issues and is chaired by the PCDOH and Bureau of Emergency Services (BES) staff. Active committee members consist of individuals from other county government departments and include representatives from state, county and regional agencies, health-care institutions, private and non-profit agencies, and towns. This task force's quarterly meetings include relevant speakers and presentations followed by agency updates.

CITIES READINESS INITIATIVE

The Centers for Disease Control and Prevention CRI is a federally funded program designed to enhance preparedness in the nation's largest cities and Metropolitan Statistical Areas (MSAs). Due to the proximity to New York City, the PCDOH receives grant funds under this initiative. As a result of CRI program requirements, extensive plans/protocols/procedures have been developed to respond to a large-scale public health emergency that could impact Putnam County, including distributing antibiotics or other materials within a condensed period. In May the PHEP Coordinator delivered a virtual presentation to all New York State CRI counties. The presentation focused on *PHEP Capability 15: Volunteer Management* and discussed PCDOH Medical Reserve Corps volunteer best practices during the COVID-19 response.

PLAN AND PROGRAM DEVELOPMENT

In 2022, plan updates included the Point of Dispensing (POD) Standard Operating Guide that details how medications and supplies would be distributed in a local public health emergency in accordance with the technical action assistance plan webinars and discussions from the Administration for Strategic Preparedness and Response (ASPR). The Putnam County Mass Fatalities Response Plan was also updated, which provides cross-sector planning, guidance, and strategies in managing a mass fatality event.

CLINICAL DATA MANAGEMENT SYSTEM (CDMS)

As required by NYS, the PCDOH maintains access and software updates for the CDMS system for use at vaccine clinics. The program is used for patient pre-registration, event check-in, and patient record updates to eliminate paper forms and enable real-time data collection and transmission to the state. Utilizing the program allowed for rapid patient through-put at COVID-19 PODs.

LOGISTICAL SUPPORT AND OPERATIONS

With the goal of having materials ready-to-go that can be used during a public health emergency or mass distribution event, the PCDOH maintains several types of supplies, equipment, and trailers. The trailers are outfitted with items and such as privacy screens, safety equipment, vests, and signage for use at mass vaccination clinics. The trailers and supplies were used extensively during the pandemic and on-site at every PCDOH vaccine POD.

During a power outage or emergency, a natural gas generator purchased with preparedness funds allows full functioning of the PCDOH building, including two on-site incident command rooms. Other critical emergency preparedness equipment includes maintaining items including laptop computers and tablets used at the PCDOH clinics and COVID-19 vaccine PODs.

DRILLS AND EXERCISES

In December, a multi-agency Mass Fatality Tabletop Exercise was conducted at the BES and was facilitated by staff from the NYS Department of Homeland Security and Emergency Services. Participants included local, regional, and state health and related departmental staff. The scenario dealt with a mass fatality event at a county facility. The exercise focused on response as well as recovery. Important conversations and communications occurred among the group, followed by a de-brief. An After Action Report/Improvement Plan summarizing findings of the exercise will be written and provided to the NSYDOH.

COMMUNICATIONS

In 2022, PHEP staff routinely performed and participated in mandatory communications drills via multiple methods such as cellphone and email using NYSDOH communications devices and systems to maintain technical proficiency and continue providing enhanced communication capabilities. Metrics are collected and submitted to the NYSDOH to assure that platforms are working properly so that staff can respond in a timely manner.

INDIAN POINT ENERGY CENTER

Following Unit 2's shut down in 2020, Unit 3 was permanently shut down in April 2021. Emergency response plans of NYS, the counties of Putnam, Orange, Rockland, Westchester, and the plant's owner, Holtec are still in place for 18 months until fuel storage is no longer an issue off site. PCDOH staff participated in trainings for dose assessment and new security access protocols in support of and to prepare for a response, if needed.





TRAININGS AND MEETINGS

In 2022 as part of regional planning, remote and in-person meetings occurred with the seven-county regional Hudson Valley Preparedness Coordinators and NYSDOH Emergency Preparedness representatives. County and regional staff work collaboratively to share and disseminate program information including at the quarterly, regional Health Emergency Preparedness Coalition (HEPC) meetings.

In April, PHEP staff participated in the virtual 2022 NACCHO Annual Preparedness Summit.

SUPPLIES, EQUIPMENT, AND HARDWARE

As noted, the PCDOH maintains three supply/equipment trailers which are used during a mass distribution event or other public health emergency. Equipment maintenance is performed on items such as medical and first aid supplies, auxiliary power and lighting capabilities, supplies, folding cots and beds, wheelchairs, folding tables and traffic safety equipment. The trailers are stored in a secure location and are routinely road tested, inventoried and maintenance is performed. Two of the trailers are identically setup to operate simultaneous Medical Countermeasure Clinical Operations. The third trailer is used as overflow storage for additional inventory including extra folding tables and stanchions used for crowd control. The trailers are kept in a “ready to go” state and can be towed with a health department vehicle or, if needed, with assistance from Highways and Facilities.

MEDICAL RESERVE CORPS.

In its 18th year, the Putnam County MRC has a base of volunteers made up of a diverse group of clinical and non-clinical volunteers. Locally, the Putnam County MRC exists as an integral part of the PCDOH and is also registered as a National Citizen Corps Program. In addition to supporting The PCDOH activities, MRC volunteers are an addition to the county’s Comprehensive Emergency Management Plan.



MANAGEMENT

The PCDOH staff are responsible for coordinating all MRC program activities such as notifying, scheduling, and organizing the volunteer assignments. The PCDOH staff also keep abreast of regional and local MRC program activities to share with current MRC volunteers. In the fall of 2022, a part-time MRC Program Assistant was hired to assist with program activities including maintaining databases, communicating with volunteers, assisting with trainings, creating, and disseminating newsletters, maintaining the Putnam County MRC Facebook page, and orienting new MRC volunteers. An annual MRC Technical Action Assistance program review with Health and Human Services and ASPR staff takes place to discuss Putnam County MRC program activities and establish goals, objectives, and plans for the coming year.

MRC CONFERENCE

In June, the PCDOH staff organized and participated in the first full-day MRC Conference. Presenters included local, state, and federal subject matter experts on topics including: the importance of the MRC from the national to the local level, building resiliency, suicide prevention and harm reduction to promote overall readiness and health promotion.

GRANTS

In 2022, the Putnam County MRC was awarded a \$5,000 NACCHO Operational Readiness Award (ORA) grant which was utilized to offer CPR and Stop the Bleed trainings as well as Suicide Prevention trainings at

no cost to volunteers. In October, a \$25,000 NACCHO COVID-19 Respond, Innovate, Sustain, and Equip (RISE) grant was awarded to the PCDOH which will be used to purchase hardware and supplies for use by volunteers and to establish a training location and satellite emergency operation center (EOC) to support Putnam County continuity of operations.

ENVIRONMENTAL HEALTH SERVICES

To support the mission of the PCDOH, the Environmental Health Services division utilizes the following methods: unannounced inspection, education, and enforcement. The discovery and correction of imminent and critical health hazards (causes of injury, illness, and death) are the most significant benefit to residents.

LEAD POISONING CASE MANAGEMENT

Nursing and EHS provide case management for any child that meets the State criteria for lead poisoning for a child with an elevated blood lead level (EBLL). A sanitarian from EHS assesses the child’s residence and investigates any other factors that may be a condition conducive to lead poisoning. The sanitarian provides guidance for the required correction of any identified lead hazards and conducts case follow-up until any necessary actions are taken (to review the data and the collaborative work on lead poison prevention conducted by the Environmental Health Services and Nursing Divisions, please refer to [page 44](#)).

ENFORCEMENT OF REGULATIONS

The goal of enforcement of regulations is one of the ten essential health services to correct outstanding health hazards or attain compliance from a repeat violator. In many instances an enforcement hearing only occurs after several other informal and educational based approaches have failed to result in continued compliance. This is a testament to the hard work of colleagues working with facilities all over Putnam County to provide education and guidance whenever needed.

In 2022, \$5,720 in civil penalties was collected through the enforcement program. One of the cases dates back to 2011 where the County placed a lien on the property for an outstanding civil penalty. The owner owed significant fees associated with the accumulation of interest and ultimately paid \$2,320 to remove the lien after 12 years.

TABLE 2
ENFORCEMENT OF REGULATIONS, 2018-2022

SELECTED CATEGORY	2022	2021	2020	2019	2018
Food Safety	8	3	10	7	6
Children’s Camps	2	1	0	4	4
Tobacco Sales to Minors (ATUPA)	3	6	5	5	3
Complaints/Sewage Treatment	2	3	5	13	2
Public Water Supply	1	2	0	0	0
Mobile Home Parks	0	0	0	0	0
Solid Waste Management	0	0	0	0	0
Temporary Residences	0	0	0	0	0
Swimming Pools/Bathing Beaches	0	0	1	3	1
Total	16	15	21	32	16

COMPLAINT/REQUEST FOR SERVICE PROGRAM

In 2022, a total of 160 complaints were investigated by the department, involving septic system failures, lake and stream pollution, private and public water supplies, indoor air, hazardous waste investigations, public health nuisance reports and COVID-19. Those found in non-compliance, after official notice, are subject to appropriate legal action and penalties as warranted. Complaints which may cause damage or injury to life and health receive priority attention.

TABLE 3

COMPLAINT DATA BY PROGRAM, 2018-2022

PROGRAMS	2022	2021	2020	2019	2018
Sewage	73	64	72	98	125
Public Health Nuisance	22	21	46	43	66
DEC-Related Complaints	0	1	2	4	2
Indoor Air	0	0	1	4	6
Food	49	32	16	38	38
Water-Public & Private	4	9	7	12	15
Smoking (CIAA)	3	0	1	4	2
Tobacco Sales to Minors (ATUPA)	4	0	1	1	0
Insects/West Nile Virus	1	2	3	9	7
COVID-19	4	57	201	-	-
Total	160	186	350	213	261

FACILITY INSPECTIONS

CHILDREN'S CAMPS

When a children's program qualifies as a camp, it must have a health department permit to operate legally and must operate in compliance with Subpart 7-2 of the State Sanitary Code requirements. Children's camps include overnight and day camp programs.

A permit is issued only when the camp is in compliance with the state's health regulations. Children's camps must be inspected twice yearly by a health department representative. Each camp is inspected to ensure the physical facilities are safe, supervision is adequate, and the facility is in compliance with the New York State Sanitary Code.

Due to the COVID-19 Pandemic additional best practice recommendations related to public health protection and camper safety were recommended by NYSDOH and CDC. The Public Health Protection (PHP) staff worked with Camp Operators to provide education and ensure the safety plans were updated to reflect the changes and the additional recommendations were complied with. There were 76 COVID-19 cases investigated at camps and isolation/quarantine procedures were implemented as required.

Due to COVID-19 some camps chose not to operate in 2022.

INSPECTIONS OF OVERNIGHT CAMPS

Environmental Health Staff conduct pre-season inspections and two operational inspections at every overnight camp each summer. Each camp is inspected to ensure the physical facilities are safe, supervision is adequate, and the facility is in compliance with the New York State Sanitary Code.

Public Health nurses complete field inspections of Putnam County overnight camps each summer, looking for compliance with New York State nursing practice standards of care. The PCDOH nurses also review and educate camp health care and leadership staff regarding nursing “best practices”. Campers’ health records are reviewed, and recommendations are made with a final report sent to EHS has the responsibility of overall camp oversight.

TABLE 4

CHILDREN’S CAMP DATA, 2018-2022

SELECTED CATEGORY	2022	2021	2020	2019	2018
Permits Issued	17	20	9	25	28
Operations Inspected	17	20	9	25	28
Number of inspections	42	41	18	64	67
Critical Hazards Cited & Corrected	1	3	0	0	2
Injury/Illness/Incident Investigations	95	34	6	50	41

STATE AGENCY LICENSED FACILITIES (DAYCARES, PUTNAM CORRECTIONAL, AND NYS PARKS & RECREATION)

Facilities are inspected for lead poisoning hazards, food safety, sanitation, sewage treatment and drinking water quality for the protection of children, inmates, and workers at these facilities.

TABLE 5

NEW YORK STATE AGENCY LICENSED FACILITIES, 2018-2022

SELECTED CATEGORY	2022	2021	2020	2019	2018
Facilities Inspected	25	25	25	25	25
Complaints Investigated	0	0	0	0	0

MOBILE HOME PARKS

Parks are inspected for fire safety, water quality, sewage treatment, nuisance control, sanitation, and structural integrity to ensure that residents have a safe and sanitary living environment.

TABLE 6

MOBILE HOME PARKS, 2018-2022

SELECTED CATEGORY	2022	2021	2020	2019	2018
Mobile Homes Inspected	9	9	9	9	9
Complaints Investigated	1	2	1	1	0
Fires/Incidents Investigated	0	0	0	0	0

MIGRANT FARMWORKER HOUSING PROGRAM

New York State Department of Health defines Migrant and Seasonal Farm Workers as migrants working in horticultural specialties, working with livestock, packing, and sorting procedures in food processing, as well as the traditional farm work of harvesting crops. Effective January 1, 2021, Section 225 of the New York State Public Health Law required all farm and food processing facilities that house one or more migrant workers to comply with Part 15 (Migrant Farm Worker Housing) of the State Sanitary Code (SSC) and to obtain a permit to operate this housing. Previously, SSC only applied to farm and food processing facilities that housed five or more migrant workers, as of January 1, all facilities housing fewer than five migrant workers must now comply with Part 15. This amendment resulted in two migrant farmworker housing facilities to be permitted and inspected in 2022.

TABLE 7

MIGRANT FARMWORKER HOUSING PROGRAM, 2021-2022

SELECTED CATEGORY	2022	2021
Permits Issued	2	2
Operations Inspected	2	2
Number of Inspections	4	4
Critical Hazards Cited & Corrected	0	0

TANNING FACILITIES

Statewide regulations (Subpart 72-1) for the operation of indoor tanning facilities that use ultraviolet (UV) radiation devices were adopted on October 7, 2009, and amended August 16, 2018. As a result, all UV tanning facility operators are required to obtain and display a valid permit to operate, and to meet the requirements contained in the regulation. The amendment prohibits the use of indoor tanning facilities by individuals younger than 18 years old. The purpose of the program is to permit and inspect commercial tanning facilities, as well as increase the public's knowledge of the hazards of indoor tanning, minimize user injuries and limit tanning access by minors. The permit is for two years, and each facility is required to be inspected once during the two-year period. It is the policy of the PCDOH to inspect each facility annually. All required forms and applications are posted on the county's website: www.putnamcountyny.com.

TABLE 8

TANNING FACILITY DATA, 2018-2022.

SELECTED CATEGORY	2022	2021	2020	2019	2018
Permits Issued	2	3	1	3	2
Operations Inspected	4	5	4	5	5
Number of Inspections	5	5	4	5	5
Critical Hazards Cited & Corrected	0	0	0	0	0

TEMPORARY RESIDENCES AND CAMPGROUNDS

The Temporary Residence and Campground program monitors the fire safety, water quality, food service, aquatic safety, structural and operational concerns at hotels, motels, retreat centers and campgrounds. All operations are inspected annually to ensure compliance with the SSC.

TABLE 9

TEMPORARY RESIDENCES AND CAMPGROUND DATA, 2018-2022

SELECTED CATEGORY	2022	2021	2020	2019	2018
Permits Issued	29	29	27	28	28
Operations Inspected	29	29	28	28	28
Number of Inspections	30	30	28	29	28
Critical Hazards Cited & Corrected	1	1	0	2	0

TOBACCO CONTROL PROGRAM

Adolescent Tobacco Use Prevention Act (ATUPA) and Clean Indoor Air Act (CIAA) enforcement occurs by compliance checks, routine inspections, and constituent complaints. The PCDOH received a \$42,252 one-year Tobacco Control grant for continued enforcement, reflective of the successful completion of last year's grant project. The grant period is from 4/1/22-3/31/23. During this grant period the PCDOH had an average of 88 active tobacco retailers. The PCDOH has two under-age employees available to assist with compliance checks.

Under the CIAA there were three complaints and no enforcement actions. The PCDOH completed the annual goals and did not encounter any problems.

TABLE 10

ADOLESCENT TOBACCO USE PREVENTION ACT DATA, 2018-2022

SELECTED CATEGORY	2022	2021	2020	2019	2018
Retail Tobacco Facilities	88	88	95	97	99
Retail Tobacco Inspections	98	48	92	117	164
Tobacco Sales	6	4	6	4	3
Amount of Fines Assessed	\$2750	\$4300	\$3450	\$1650	\$1,650

PUBLIC SWIMMING POOLS

In 2022, 42 public swimming pools were regulated. One pre-operational inspection prior to permitting and two operational inspections after permitting were done at each facility. All pools were sampled for chlorine and pH every two to three weeks. All facilities were routinely checked for rescue equipment, structural safety, and emergency procedures. During 2022, five public health hazards were found involving improper disinfection levels and supervision. All violations were corrected, and the pools were re-opened when appropriate.

TABLE 11

PUBLIC SWIMMING POOLS, 2018-2022

SELECTED CATEGORY	2022	2021	2020	2019	2018
Regulated Swimming Pools	42	37	28	43	42
Swimming Pools Inspected	42	37	28	43	42
Public Health Hazards Found/Corrected	5	6	2	19	16

PUBLIC BATHING BEACHES

In 2022, 32 public bathing beaches were regulated. One pre-operational inspection prior to permitting and two operational inspections after permitting were done at each facility. All beaches were sampled for fecal coliform every two to three weeks. As a result of this sampling, 13 beaches were closed for fecal coliform levels exceeding the state standard. These beaches were allowed to re-open upon receipt of subsequent samples that were satisfactory. 22 beach closures were due to the presence of Blue Green Algae (BGA) which has become more prevalent in Putnam County over the last few years leading to 177 lost swim days this summer.



TABLE 12

PUBLIC BATHING, 2018-2022

SELECTED CATEGORY	2022	2021	2020	2019	2018
Regulated Bathing Beaches	32	32	29	32	32
Bathing Beaches Inspected	32	32	29	32	32
Public Health Hazards Found/Corrected	1*	0*	2*	0*	5*

*Number of violations is believed to be directly related to the increased awareness of Harmful Algal Blooms and the increase in direct reporting and self-closures by the facility operators

FOOD SAFETY

FOOD-BORNE ILLNESSES AND COMPLAINT INVESTIGATION

TABLE 13

FOOD SAFETY, 2018-2022

SELECTED CATEGORY	2022	2021	2020	2019	2018
Operations Permitted / Inspected*	353	338	310	339	340
Food Borne Illness & Injury Investigations	8	11	6	9	7
Critical Health Hazards Corrected	62	49	46	76	109
Complaint Investigations	43	41	131**	42	48
Fires - Floods - Power Outages - Incidents	2	2	2	1	4
Recalled Product Investigation	0	0	0	0	1

*Includes mid-year changes of ownership

**Increase due to COVID-19 compliance complaints

TEMPORARY FOOD SERVICE

Temporary food operations are found at events or fundraisers. This is a unique challenge since many are staffed by those with limited food safety knowledge. All of the PH Food Safety staff are NYS Food Safety Inspection Officers who provide safe food handling education to volunteer workers.

TABLE 14

TEMPORARY FOOD SAFETY, 2018-2022

SELECTED CATEGORY	2022	2021	2020	2019	2018
Operations Permitted	58	34	13*	77	72
Operations Inspected	39	22	2	67	65

*Limited operations due to COVID-19 restrictions for events.

RABIES ANIMAL VACCINATION CLINICS

The PCDOH sponsored three Rabies Vaccine Clinics. During 2022, 301 animals (186 dogs, 105 cats and 10 ferrets) were vaccinated against rabies. These clinics are mandated by NSYDOH to ensure reimbursement to Putnam County for human Rabies Post-Exposure Prophylaxis (RPEP).

To gather input from clients of these clinics, a Rabies Satisfaction Survey was created. As part of the registration process clients are asked to complete the online survey. Those clients who provide an email address are sent an email inviting them to complete the survey. Results are compiled after each clinic and results are discussed. The clinic process is reviewed if issues are identified, and changes made accordingly.



TABLE 43

RABIES ANIMAL VACCINE CLINIC DATA, 2018-2022

SELECTED CATEGORY	2022*		2021*		2020*		2019		2018	
	DOGS	CATS	DOGS	CATS	DOGS	CATS	DOGS	CATS	DOGS	CATS
PC Veterans Memorial Park	145	81	112	142	196	130	**	**	**	**
South Putnam Animal Hospital	**	**	**	**	**	**	103	61	92	71
Hubbard Lodge, Cold Spring	41	24	33	8	**	**	58	34	44	21
Brook Farm Veterinary Center	**	**	**	**	**	**	50	47	52	61
Total	186	105	145	150	196	130	211	142	188	153

*10 ferrets vaccinated in 2022, 2 ferrets vaccinated at PC Park in 2021, 6 ferrets vaccinated in 2020, 4 ferrets vaccinated in 2019, and 3 ferrets vaccinated at Hubbard Lodge in 2018 are not included in the totals

**Due to COVID-19, clinics have only been held at PC Park and Hubbard Lodge Feral Cat Taskforce

The PCDOH partnered with Putnam AdvoCats, Inc. to create a Feral Cat Taskforce which involves the trapping, neutering, vaccinating, and release of feral cats in our area. This is an attempt to address a growing health concern in the county. Feral cats are cats that do not have owners and may be strays and account for a significant number of required rabies treatments. The Trap-Neuter-Return (TNR) concept is a humane and effective approach used for decades in the US after being proven in Europe. Scientific studies show that this practice improves the lives of feral cats, improves their relationships with the people who live near them, and decreases the size of colonies over time. Working with volunteers from Putnam AdvoCats, Inc., and area veterinarians, the goal is to decrease the population of feral cats in our community over time, thereby reducing the risk of rabies.



Cats not immunized against rabies can carry the virus. People who feed or care for stray or feral cats risk exposure to rabies since they can be bitten or scratched. These cats often run off afterward and cannot be captured for observation. This makes the person need to undergo treatment for POSSIBLE rabies exposure. By decreasing the feral cat population through this program, the likelihood of any exposures will be lessened. Two hundred forty-six (246) cats were handled or processed through this program, and 75 cats/kittens from that group were adopted or fostered, which decreased the feral cat population.

TABLE 42

FERAL CAT TASK FORCE DATA, 2018-2022

SELECTED CATEGORY	2022	2021	2020	2019	2018
TNR	246	258	264	196	192
Adopted or fostered	75	76	123	47	53

LAND DEVELOPMENT

To assure that development does not adversely affect the environment, EHS continues to maintain specialized programs in the areas of water supply and wastewater treatment. The focus of the programs of Public Water Supply, Municipal and Non-Municipal Sewage Treatment, Realty Subdivision, Water Supply and Sewage Treatment for Single-Family Residence and Water Supply and Sewage Treatment for Commercial Development is to ensure that engineering and construction are conducted in accordance with applicable rules and regulations.

Commercial development is important to the County as developers try to satisfy the needs and wants of County residents. Commercial developments have again predominated in the Route 22/I-84 corridor and along Route 6. In 2022, residential subdivision and individual lot land development in Putnam County has again remained relatively low. The decrease in residential single-family home construction, as compared to previous years, could be attributable to the prior recession along with the record number of home foreclosures, and difficulty in obtaining bank loans.

All projects proposing the utilization of water supply and/or sewage treatment facilities are required to obtain the necessary approvals prior to construction. The typical activities involved during project review include field inspections; detailed engineering review and analysis of reports, plans and specifications; permit approval; and finally, inspection of construction. These programs also include review and issuance of draft permits and concurrent plan review with other agencies such as the New York State Department of Environmental Conservation (NYSDEC), NYSDOH and New York City Department of Environmental Protection (NYCDEP) which have jurisdiction over certain aspects of a project. One of the major reasons for the reduced land development over the past few years can be attributed to the involvement of the NYCDEP as part of their adopted Watershed Rules and Regulations. This is a result of the NYCDEP filtration avoidance plan approved by the NYSDOH and the Environmental Protection Agency (EPA). The NYCDEP has taken a firm position in protecting the water quality within their watershed by essentially prohibiting the construction of new wastewater treatment plants and surface discharges and by limiting or preventing new development because of their new programs in reviewing project plans.

COMMERCIAL AND INDUSTRIAL DEVELOPMENTS

This program includes all new construction projects of a commercial or industrial nature such as shopping centers, office complexes and manufacturing facilities. In 2022, five commercial construction permits were received and approved, five commercial renewal permits were received, and four commercial renewal permits were approved, two commercial compliances were received, and two commercial compliances approved.

HOUSE ADDITIONS

Due to the housing prices in this region, many homeowners in need of additional living space have found it more desirable to add on to their existing homes rather than purchase a larger home. To this end, the PCDOH requires the submission of plans for the proposed construction when adding bedrooms, to determine if the existing well and sewage treatment system can accommodate any additional water usage. In some instances, the existing well and/or sewage treatment system are required to be upgraded. A total of 14 submissions for house additions we received by the PCDOH in 2022; nine house additions were approved.

REALTY SUBDIVISION

The PCDOH received 11 new subdivision applications in 2022. Nine subdivisions were approved and two are still under review. There were also 2 subdivisions submitted in 2021 that were approved in 2022.

RESIDENTIAL SINGLE-FAMILY WATER SUPPLY AND SEWAGE TREATMENT

Construction activity relative to single-family residences in 2022 remained relatively consistent with the previous year, with 30 new construction permits received and 31 new construction permits approved. Of the 106 applications received in 2022, 30 were for new permits, 35 were permit renewals, 15 were permit revisions and 26 were construction compliances.

SEPTIC REPAIRS PROGRAM

Septic repairs have continued to increase in numbers, while also becoming more complex. This is because many of the older septic systems are reaching their useful life and exhibiting failure. Septic system failures are considered a public health hazard which is defined as an existing or imminent condition which can be

responsible for or cause illness, injury, or death and for which immediate corrective or remedial action is required. The PCDOH reviews all septic system repair permits prior to approval. The involvement of the PCDOH with septic system repairs has evolved through the years since the PCDOH began issuing repair permits in 1986. Beginning in 1986, prior to the involvement of the PCDOH, property owners contracted with septic system installers to repair their failing systems. Results of the previously described practice were the reoccurring septic failures on several systems and a lack of protection to the property owner. Consequently, the PCDOH stepped up efforts in this regard and required all septic system failures to be corrected through a septic repair permit application process as required by Article 3 of the Putnam County Sanitary Code.



The primary goal of the PCDOH in requiring a septic system permit approval for all remediated septic systems is to ascertain that system repairs are proposed and installed to meet applicable guidelines to the extent possible. To achieve the desired outcome, the PCDOH requires all soil testing in the form of soil test pits and/or percolation tests to be witnessed by a representative of the Engineering Staff at the PCDOH. The results of the soil testing are then utilized by the PCDOH and the septic system contractor to determine the appropriate type of repair for the failed septic system. Upon approval of the repair permit, the repaired septic system is inspected by the PCDOH prior to backfilling to further assure permit compliance. The above-mentioned process in handling septic system failures and repairs is incorporated into the NYC Watershed Delegation Agreement the PCDOH entered with the NYCDEP. The Delegation Agreement is a renewable five-year contract whereby the NYCDEP reimburses the PCDOH for all engineering tasks associated with septic system repairs within the NYC Watersheds. As a result of the more intensive and encompassing soil testing and permitting for septic repairs, which equates to considerably more man-hours of the engineering staff, this Department has noticed improved outcomes and satisfactory results on septic system repairs. In 2022, a total of 302 septic repair permits were received and 293 were approved as compared to 392 approved in 2021. All septic system repairs are performed by septic system contractors that are required to obtain a license from the PCDOH to install systems in Putnam County.

NEW YORK CITY WATERSHED RULES AND REGULATIONS

As a part of the NYC Watershed Regulations, the review and approval of sewage systems was delegated to the PCDOH by the NYCDEP. The Department negotiated with the NYCDEP a new five-year contract for the period July 1, 2021, to June 29, 2026, in the amount of \$931,525. The Delegation Agreement has simplified the review and approval process since all applications will be forwarded to the PCDOH rather than being sent in duplicate to the NYCDEP. Putnam County is reimbursed in full for the costs associated with any additional workload required by the NYCDEP Delegation Agreement.

SEPTIC SYSTEM CONTRACTOR LICENSING PROGRAM

The PCDOH revised Article 3 of the Putnam County Sanitary Code in 2007 to provide for the licensing of septic system contractors. The revised Article 3 now requires that all septic system repairs not performed by the owner of the property need to be performed by a licensed septic system contractor. During 2022, a total of 14 septic system contractors were administered examinations. A total of 150 contractors are currently licensed in the County. The septic system license program was also updated in 2022 for better oversight of the program. The changes implemented are as follows:

1. All permits are on the same permitting cycle and expire on May 31st and are renewed starting June 1st.
2. A tracking system for expired permits has been implemented.
3. The original Microsoft Access database was replaced with an Excel Spreadsheet database for easier access and public dissemination.
4. All required documentation for licensure must be provided before the license is issued.
5. Permits were redesigned and updated, and pocket ID cards were created for licensed installers.
6. The questions and answers on the license test were updated to reflect new design code changes.

TABLE 15

LAND DEVELOPMENT, 2018-2022

SELECTED CATEGORY	2022	2021	2020	2019	2018
Septic System Repair Permits Received	302	405	415	287	277
Septic System Repair Permits Approved	293	392	387	267	252
Septic System Contractor Licenses – Valid	150	137	132	125	132
House Addition Permits Received	14	13	18	112	233

MAJOR PROJECTS IN 2022

TERRAVEST INTERNATIONAL CORPORATE PARK: PHASE 3 – SENIOR HOUSING PROJECT

Town of Southeast

The proposed development plans for the Terravest International Corporate Park Senior Housing Project consist of 60 three-bedroom units in 60 separate buildings, a clubhouse, and construction of associated roadways and parking areas, closed piping drainage conveying systems and stormwater treatment facilities. The proposed residences shall be served by sanitary sewer collection and wastewater and water distribution systems which will be connected to the existing Terravest Sewer Plant and a new Water Treatment Plant, respectively. Since the Water Treatment Plant is a new community water supply, the NYSDOH is the lead agency on review and approval. The PCDOH reviewed the sewer main extension to the existing Sewer Plant. Review is complete and the application is approved.

COMMERCIAL CAMPUS AT FIELDS CORNERS

Town of Southeast

The project consists of two large warehouse buildings that will be broken up into several different tenant spaces. The total square footage of both warehouses is 933,100 sq. ft. The proposed number of employees for building A is 375 and the total number of employees for Building B is 665. The design flow for Building A is 4500 gallons per day and the design flow for Building B is 7980 gallon per day. Each building had its own septic system. Since the project is in the NYCDEP watershed and is commercial the project is joint review with the NYCDEP and the PCDOH. The water system for the buildings is classified as Non-Transient, Non-Community. The application for the water system was approved by the NYSDOH on February 23, 2022. The septic system was approved by the PCDOH on April 13, 2022. The project is currently under construction.

KENT MANOR (T)K

Town of Kent

The project is located on Nichols Street between where Nichols Street intersects with Sunset Hill Ct. and Nichols Place on the north side of the road. The property is 133 acres with approximately 50 acres reserved for development. There will be 150 townhome units with a total of 375 bedrooms for a design flow of 41,250 gallons per day. In addition, a clubhouse is proposed with an estimated demand of 3,000 gallon per day (gpd). The total design flow for the project is 44,250 gallons per day. There is an existing wastewater treatment plant that was part of the original design for Kent Manor. The permitted flow for the plant is 103,000 gallons per day. The current flow from the plant is approximately 10,000 gallons per day. This flow is from the previous approved sewer district extension for the Route 52 business district near Nichols St. The Kent Manor design flow of 44,250 will be added to the plant though a wastewater collection system proposed for the project. The wastewater collection system has been approved by the NYCDEP and the PCDOH. A new community public water supply system is proposed to be built. Supply will be provided through three existing on-site wells. There will be a water distribution system to convey potable water to the project. NYSDOH has approved the new community public water supply.

APPLICATIONS FOR PERFLUOROALKYL AND POLYFLUROALKYL SUBSTANCES (PFAS /PFOAS) REMOVAL

We continue to receive applications for PFAS removal in public water systems. Due to the lowering of the Maximum Contaminant Level (MCL) for PFAS by NYSDOH, many systems that complied are no longer in compliance. This requires treatment to remove the PFAS using GAC (Granular Activated Carbon) Filters. All PFAS removal applications are to be submitted by a licensed professional engineer. A form letter stating the required time frames to return to compliance have been finalized and sent to all facilities out of compliance. Applications are being received on a regular basis. Due to the numerous applications, we may reach out to NYSDOH for review assistance if necessary.

STATELINE SUBDIVISION, RESTAURANT DEPOT, STATELINE SUBARU

The new subdivision layout has been approved, from three lots to five lots. The Restaurant Depot was approved on July 17, 2020. The building is completed, and this department has inspected the septic system and the water system. All revisions to the water system have been approved and full compliance for the project has been approved by the PCDOH. The existing approved septic system expansion area was relocated from the current lot 3 (future lot 5) back to lot 2 which is the Restaurant Depot lot. A revision was submitted for review and was approved by the PCDOH and the NYCDEP. The reason for the relocation of the expansion area is to accommodate the proposed Stateline Subaru car dealership on current lot 3 (future lot 5). Stateline Subaru (lot 5) was approved on July 22 and is currently under construction.

THE HAMLET AT CARMEL

The project was formally known as the Putnam County Foundation. It was originally approved to construct 120 senior housing units with a design flow of 14,400 gpd. The water and wastewater were to be connected to Carmel Water District #2 and Carmel Wastewater District #8, respectively by water and sewer main extensions and service connections. The design has been revised; the current property owner now proposes to construct 150 housing units with a total bedroom count of 293 (average of less than two bedrooms per unit). The new proposed design flow is 32,230 gpd, still well below the service agreements executed in July 2002 for 72,000 gpd. The project was approved and is under currently under construction.

G & F SUBDIVISION

Town of Carmel

The project is a seven-lot subdivision totaling approximately 183 acres and is located off Route 6. Different commercial uses are proposed for each lot (hotel/banquet hall, restaurant, pharmacy, offices, assisted living facility, multifamily and senior housing units). The project will be served by public water and sewer from Carmel Water and Sewer districts #2. Water and sewer main extensions are proposed for the new subdivision road and through lots 6 and 7. Due to the low water pressure issues in the Kelly Ridge area (existing homes behind lot 6) a booster pump station is proposed for the multifamily homes on Lot 6. Lot 7 will require a new pump station for the sewer conveyance due to lower elevations than the nearest existing sewer manhole. The overall total design flow is approximately 80,000 gpd. The project has been approved and renewed several times. The latest approvals included some minor revisions. The project was reapproved in late September 2022.

OLD FORGE ESTATES

Town of Carmel

The project is a 14-lot subdivision located along Baldwin Place Road in the Town of Carmel, 1,800 feet south of the intersection of Baldwin Place Road and Route 6N. The property is approximately 45.36 acres and will be a clustered subdivision. The original design was for a conventional 10 lot subdivision but due to costs and a downturn in the economy the project size and scope was condensed to much smaller footprint which will

reduce road length, site clearing, and stormwater impacts. The clustered subdivision will consist of a common septic system to serve the 14 residences; each residence will have four bedrooms. There will be three systems constructed (A, B, and C) with each system able to handle half of the daily design. Two will be in service and one will be inactive for one year. Then the inactive system will be rotated into activity while one of the two active systems goes into inactivity.

MAHOPAC SCHOOLS PUBLIC WATER SUPPLY

Town of Carmel

In November 2020, the PCDOH received an application for an upgrade to the Mahopac Schools non-transient public water supply system. Due to the COVID-19 pandemic and lack of staff at the time, the application was forwarded to NYSDOH for review by the Water Supply Bureau to help facilitate a quicker review. After multiple reviews and resubmissions between NYSDOH and Tetra-Tech (the design engineers) the water system upgrades were approved on June 24, 2022. As per standard procedure the PCDOH was tasked with the inspection of the new facilities. The PCDOH inspected the facility on August 25, 2022, and there were some issues with the installation, particularly what appeared to be a lack of proper chlorine contact time. Also, as part of the completed works requirement, bacteria testing was to be performed to insure to presence of coliform. The PCDOH received those results on September 1, 2022. Due to the presence of coliform, and the inability to resolve all our inspection issues, the schools were required to open on bottled and boiled water. The main issues (chlorine contact and negative bacteria tests) were finally resolved recently and just after Christmas the PCDOH contacted NYSDOH that we had no objection to the completed works approval and the lifting of the boiled water notice. The NYSDOH issued the completed works approval on January 3, 2023. The boiled water notice will be lifted shortly.

SOLID WASTE AND RECYCLING

The Solid Waste and Recycling program oversees the responsible disposal of all waste stream components with a focus on reducing waste. This is done by permitting and educating waste haulers and residents about proper disposal methods.

SOLID WASTE MANAGEMENT PLAN (SWMP)

In 2022, PCDOH continued the renewal process of the SWMP. Building on the work done by a focus group of representatives from all towns and villages, and key agencies such as tourism and economic development, work on the SWMP was ongoing during 2022. The SWMP is being written with guidance from the NYSDEC.

The SWMP is a valuable tool for not only the County Government, but for all municipalities in Putnam County. The document is intended to evaluate the current solid waste management practices, evaluate the options and alternatives available for future solid waste management, and to set forth the implementation steps for a 10-year planning period, along with projections of reduction in waste disposal over the 10-year plan. The goal of the SWMP is to reduce the amount of solid waste destined for disposal by preventing its generation, reducing our solid waste footprint, and increasing reuse, recycling, composting and other organic materials recycling methods.

The SWMP will continue to be developed in a manner that is reflective of the specific characteristics, needs and opportunities of each community. Development and implementation of the SWMP must be consistent with the solid waste hierarchy and strive to achieve reduction in the amount of waste disposed to the maximum extent economically practicable. It is the responsibility of the PCDOH as a community leader to develop a complete and resourceful SWMP that is detailed, attainable, concrete, concise, inclusive, and realistic as possible to ensure it continues to be a valuable and useful tool for the entire 10-year planning period.

HOUSEHOLD HAZARDOUS WASTE

PCDOH organizes drop-off events to provide residents with a safe way to dispose of household hazardous wastes. These events are provided at no cost to the resident and are 50% reimbursed by the NYSDEC. A hazardous waste hauler licensed by NYS collects, transports, and properly disposes of hazardous waste, reducing the chance of hazardous pollution in Putnam County. In 2022, two drop-off events were held in May and October at Fahnestock State Park in partnership with the HAZMAT Team and Kent Police, serving a total of 814 residents.

REGULATORY PERMITTING AND OVERSIGHT

Waste haulers operating in Putnam County are required to apply annually for a permit. The permit application must include specific information as to what amounts of each material have been collected in the county in the previous year and must also indicate the disposal site for each material. This helps the department measure progress towards waste reduction goals and provides information as to where educational efforts should be focused. The permitting process also provides information that must be reported to the DEC and creates a platform for enforcement of any violations of county solid waste laws. A total of 68 waste hauler permits were issued by the PCDOH in 2022, consisting of 42 solid waste and recyclable haulers and 26 septic haulers permitted. Over \$26,000 in revenue was collected through the permitting process. This program covers transporters of all components of the waste stream, including residential waste and recyclables, septage and sewage, construction, and demolition debris, regulated medical waste, and all other waste materials.

PHARMACEUTICALS

Improper disposal of pharmaceuticals has implications for human health both in drinking water contamination and for accidental or intentional misuse. PCDOH collaborates with the Putnam County Communities That Care (CTC), the Putnam County Sheriff's Department, and PHC to provide opportunities for residents to properly dispose of pharmaceuticals. There are 13 medication drop boxes for residents to dispose of unwanted or expired pharmaceuticals, conveniently located in every town in the county. The availability of medication drop boxes has increased options and reduced barriers for proper disposal of unused pharmaceuticals for the residents of Putnam County. PCDOH participated in two drive-by medication take back events held at the Sheriff's Department on the nationwide Drug Enforcement Administration (DEA) Take-Back Days in April and November.

COMPOST

As a waste reduction initiative, backyard compost bins are sold to county residents at cost. This makes backyard composting more accessible to residents as the cost is much less than if purchased elsewhere. Each resident receives education and training when purchasing a bin. The composting program is done in partnership with Cornell Cooperative Extension of Putnam. Backyard composting drastically reduces the amount of food waste thrown away, with downstream impacts on gasoline consumption and air pollution from garbage trucks, as well as the energy needed to incinerate food waste. In addition to the waste reduction aspect, the composting program encourages gardening for stress reduction and eating healthy, homegrown vegetables. There were 26 compost bins sold during 2022.

LITTER PATROL WITH THE ARC NEW YORK (NYSARC)

A roadside litter patrol has been contracted with the NYSARC Inc. chapters of Ulster and Putnam counties. The goal of this program has been to organize litter-patrol clean-up crews who are dispatched to clean up all roadways. Residents, county and town highway departments, county officials and legislators, and the PCDOH can request that roadways be cleared of litter. In 2022, a litter patrol clean-up crew was formed strictly for

litter clean-ups on the rail trail; this program will act as a training program for participants to learn and progress to the roadside clean-up crews.

RECYCLING BINS LOAN PROGRAM

Local organizations hosting events throughout the county and can reduce the amount of waste generated at their event by ensuring bottles and cans are recycled. This can be done through the recycling bins loan program coordinated at PCDOH. During the summer of 2022, two organizations took advantage of this program for three separate events.

KEEP PUTNAM BEAUTIFUL

The PCDOH assists Putnam County communities and local organizations in hosting community clean-up days throughout the county. Educational information on safety and how to host successful events are offered. Safety gear and litter grabbers are loaned out on request.

PUBLIC WATER SUPPLY AND SERVICES

WATER QUALITY IMPROVEMENT INITIATIVE

Under the Water Quality Improvement Initiative, beginning January 1, 2006, the Putnam County Health Department has since assumed all responsibility for required sampling at all Transient Non-Community Water Supplies. The overall result is better public health protection at all small facilities. To fund this project, each small water supply is charged a \$500 service fee, which covers laboratory fees, cost of sampling and correspondence.

DRINKING WATER ENHANCEMENT GRANT

The Drinking Water Enhancement Grant program continued to monitor Putnam County Community and Non-Community Water Supplies in 2022. The PCDOH monitored the operation of 442 regulated water supplies in 2022. Those regulated water supplies are comprised of Community Water Systems (CWS), Non-Transient Non-Community Water Systems (NTNCWS) and Transient Non-Community Water Systems (TNCWS). CWSs are required to be inspected annually and all the county’s 126 CWS inspections were completed. Non-community water supplies are required to be inspected at least once every 3 years, and of the existing 316 non-community water supplies, 46 were inspected in 2022. Seventeen water supplies were found to have coliform bacteria in their water. Only one water supply was found to have recurring, bacteriological problems which required the installation of an ultraviolet treatment and/or chlorine disinfection system. Sixteen water supplies resolved bacterial contamination issues that were identified. Those systems either disinfected and/or made improvements to their wells, or they serviced or replaced their water treatment systems to correct the contamination.

TABLE 16

PUBLIC WATER SYSTEM, 2018-2022

SELECTED CATEGORY	2022	2021	2020	2019	2018
Total Public Water Systems	442	471	456	466	465
Community Water Systems	126	127	126	127	127
Non-community Water Systems	316	344	330	339	338
Community Water System Inspections	126	127	126	127	127
Non-community Water System Inspections	46	102	62	186	56
Total Coliform Failures-Public Health Hazards	17	28	19	20	19
Systems Required to Install Permanent Disinfection	1	9	4	2	2
Systems Required to Disinfect Well/Service Treatment System	16	21	15	18	17

EMERGING CONTAMINANTS

In August 2020, the NYSDOH passed a regulation which set an MCL) for 1,4-dioxane and PFOA/PFOS chemicals in regulated water supplies. The results of the required sampling for these chemicals throughout the County have shown widespread detections of PFOA/PFOS with several areas showing levels above the MCL. The NTNCWSs and CWSs which have shown exceedances are required to install treatment systems with PCDOH approval. The TNCWSs that have shown exceedances have had treatment systems installed by the NYSDEC who will also be handling ongoing sampling and maintenance. The NYSDEC is providing oversight for those facilities due to the current regulation not requiring TNCWSs to sample for PFOA/PFOS unless it is suspected that there is an immediate concern for contamination. The PCDOH along with NYSDOH and NYSDEC are also investigating the PFOA/PFOS contamination in the public wells in various areas in the County. Currently, the main location of this investigation is the Mahopac Business District where widespread PFOA/PFOS contamination has been identified and the area of investigation has continued to grow. During 2022, several treatment systems were approved by the PCDOH or the NYSDOH and they have been installed on effected water supplies.

WATER OPERATOR CERTIFICATIONS

All CWSs and NTNCWSs must be operated by State-certified water operators. Operational requirements for different classifications of water plants are specified in Subpart 5-4 of the New York State Sanitary Code. Applications for water operators working in Putnam County are reviewed by the PCDOH for accuracy, completeness and required experience. Once approved, the applications are forwarded to the NYSDOH for final approval and certificate issuance. In this way, the PCDOH ensures that water systems are operated by New York State certified water operators with the correct certification for that water system. In 2022, 15 applications for water operator certifications were processed.

INDIVIDUAL WATER SUPPLY AND SERVICES

WELL PERMIT PROGRAM

In 2022, the PCDOH continued its program to review and approve permits for the drilling of replacement wells for potable purposes at existing residences in accordance with Article X of the Putnam County Sanitary Code. A total of 43 well permit applications were received. The department recommends that replacement wells be sampled for the contaminants listed in the “Putnam Profile,” i.e., the required testing for new wells.

TABLE 17

INDIVIDUAL WATER SUPPLY, 2018-2022

SELECTED CATEGORY	2022	2021	2020	2019	2018
Well Applications Received	43	45	57	44	27
Well Permits Issued	41	44	57	43	27
Well Applications Pending	2	0	0	1	0
Well Applications Denied	0	1	0	0	0

EARLY INTERVENTION AND PRESCHOOL PROGRAMS

The Individuals with Disabilities Education Act (IDEA) is a federal law ensuring services to children with disabilities throughout the nation. IDEA governs how states and public agencies provide early intervention, special education and related services to eligible infants, toddlers, children, and youth with disabilities.

Infants and toddlers with disabilities (birth to age 2) and their families receive early intervention services under IDEA Part C; in NYS it is called the Early Intervention Program (EIP). Children (ages 3-5) receive special education and related services under IDEA Part B; in New York State it is called the Preschool Special Education Program (PSEP). Each State has some flexibility in determining eligibility criteria, and how these programs are administered.



Part C (early intervention) and Part B, Section 619 (preschool program) of IDEA require that methods and procedures are developed for promoting referrals of infants, toddlers, and preschoolers with identified disabilities or developmental delays by primary referral sources (PRS). PRS include, but are not limited to, physicians and other health care providers, hospitals, information and referral programs, childcare programs, family childcare providers, public health departments and centers, social services agencies,

developmental evaluation centers, other early childhood professionals and practitioners, and parents. However, parental consent is necessary to move forward in the program.

While Early Intervention and Preschool Programs are state-mandated programs, currently, and there are limited resources and tools to support these programs, as well as provider capacity challenges. The EI supervisor has engaged community stakeholders such as Putnam and Dutchess Childcare Council, Green Chimneys, and CoveCare to inspire community partnerships to further address growing social and emotional needs of accessing resources from through Putnam County Programs.

Since October 2022, Putnam County's EI Division has been working on plans for a new training program for families, daycare providers, and therapeutic providers of early intervention and preschool program services that are frequently worked with and will enable them to learn the appropriate ways to deal with children with negative behaviors and give families the support and tools they need.

EARLY INTERVENTION PROGRAM

Based on Federal Law Individuals with Disabilities Education Act, the Early Intervention Program (EIP) is a NYS-mandated program that provides evaluation and therapeutic services for children (and their families), birth through age 2, who have significant developmental delays or disabling conditions that fall under the criteria of NYS Regulations and Guidelines. This program recognizes that there is a wide range of child development and is for children with significant delays that would not be ameliorated over time alone. Since referrals are made based on a referral source's perception of a child's delay, it is difficult to predict future numbers of children who will meet NYS eligibility criteria for EIP.

The NYSDOH, Bureau of Early Intervention (NYSDOH-BEI) is the lead agency, and the local Municipalities administer the EIP for eligible children that reside in their County. All Service providers and County EIP personnel must adhere to NYSDOH-EIP Regulations. Each County funds this program but then receives

partial State reimbursement (NYS share 49%, County share 51%). The PCDOH administers the local Putnam County Early Intervention Program (PCDOH-EIP).

REFERRAL

Parents or other referral sources contact the PCDOH-EIP to make a referral. After referral a family begins a process of meetings which includes a Multidisciplinary Evaluation to determine if the child is eligible for the EIP. If the child is found eligible an Individualized Family Service Plan is created.

ELIGIBILITY

Eligibility is determined by NYS contracted EIP Evaluators based on strict NYS Criteria. Some diagnosed medical conditions (i.e., Down syndrome) make a child automatically eligible for the EIP. Children displaying some delay, but not eligible for the EIP can be referred to the Child Find/At Risk program with parental consent. This program is implemented in Putnam County by the PCDOH Maternal Child Health Nurses, where a child’s development can be monitored using telehealth evaluations. Due to the environment caused by COVID-19, many more children were deemed eligible for the EIP.

SERVICES

Services provided through the EIP include but are not limited to speech therapy, occupational therapy, physical therapy, special instruction, social work services, family training, and service coordination. Most eligible children in the EIP receive home/community services where approved providers go to the home and/or community setting (i.e., childcare, preschool, library, etc.) to work on the Individualized Family Service Plan (IFSP) outcomes. A center-based program may be recommended for a child with more intensive needs. In this case, the child would have their services provided in a specific center, in a "classroom-like" setting.

TABLE 18

EARLY INTERVENTION PROGRAM (EIP) DATA, 2018-2022

SELECTED CATEGORY	2022	2021	2020	2019	2018
New Referrals	365	267	215	263	290
New Referrals Found Eligible	117	116	78	86	103
New Referrals Not Found Eligible	142	69	75	108	131
Never Evaluated/Other	82	72	62	69	56
Total Number of Active IFSP's	221	197	110	186	208
Home/Community Services	196	185	101	170	185
Center-based Program Services	25	12	9	16	23
Utilized County Transportation	18	6	5	12	17
Parent Transport	7	6	4	4	6

MONITORING PROGRESS

IFSP reviews are conducted every 6 months to monitor progress and determine needs. For children whose needs continue after their 2nd birthday, a mandated process coordinated with a child’s local school district must be followed to transition to the Preschool Special Education Program (PSEP).

PRESCHOOL SPECIAL EDUCATION PROGRAM

Based on IDEA, the PSEP is a NYS-mandated program that provides services for children, aged three to five, who have a disability or delay that affects their learning or their ability to participate in age-appropriate activities. The New York State Education Department (NYSED) is the lead agency, and the PCDOH manages the local PSEP. Putnam County contracts with NYSED approved service providers who provide the

PSEP services to eligible children. In the NYSPSEP all school districts are mandated to have a Committee on Preschool Special Education (CPSE). This committee is responsible for making the eligibility determination and service recommendations; however, the Municipality is responsible for funding both the administration of the program and the services. The County receives partial State reimbursement (NYS share 59.5%, County share 40.5%).

Nine school districts that contain Putnam County students feed the Putnam County PSEP. Like the EIP it is extremely difficult to predict the number of eligible students from school year to school year.

REFERRAL

Children are either referred by a family directly to the District CPSE or follow a transition process from EIP to CPSE.

ELIGIBILITY

All children referred to the Preschool Special Education program (CPSE) are provided with a Multi-disciplinary Evaluation (MCE), and eligibility is determined by the CPSE using these results and other information against New York State Educational Department Eligibility Criteria. If a child is found eligible, an IEP is created.

SERVICES

Based on the child's IEP, services include but are not limited to speech therapy, occupational therapy, physical therapy, special education itinerant services (SEIT), and family training. Most eligible children receive home/community services (like the EIP). Children with greater needs who need a more intense, structured program may attend a Center Based Program.

TABLE 19

PRESCHOOL SPECIAL EDUCATION PROGRAM (PSEP) DATA, 2018-2022

SELECTED CATEGORY	2021-2022	2020-2021	2019-2020	2018-2019	2017-2018
Total Children Served*	465	462	498	444	388
Home/Community Services	332	337	371	336	279
Center Based Program Services	133	125	127	108	104
Utilized County Transportation	85	67	107	93	86
Parent Transport	24	21	20	15	23

*Includes children still in the program who entered in prior years

MONITORING PROGRESS

On an annual basis, an Annual Review (AR) is held for each child to review progress and make recommendations for the following school year.

NEW AND UPCOMING PROJECTS AND PROGRAMS

FACILITY TRAININGS

Putnam County's EI Division is facilitating a new training program for families, daycare providers, and therapeutic providers of early intervention and preschool program services that are frequently worked with. A total of four trainings will be held throughout the year which will enable them to learn the appropriate ways to deal with children with negative behaviors and give families the support and tools they need.

The trainings will take place at the Putnam County Training and Operations Services (TOPS) Building. The primary goal of these trainings is to manage negative behaviors and stop children from being thrown out of

daycares and preschools. The first training session will be hosted by CoveCare on February 15, 2023, at 6:15 PM and will be a “crash course” for parents and daycare providers. This should cultivate a harmonious team consisting of parents, daycare and preschool providers and support staff while supporting and encouraging a positive approach to managing negative behaviors in the home, community, and daycare or preschool settings. The second session will be hosted by the Putnam and Dutchess Childcare council and is scheduled for May 10, 2023, at 6:30PM and will be called “Getting Back to Basics.” This session is meant to teach what activities are age appropriate and how to work together to help children to achieve their developmental milestones. The sessions for September and November are currently in the planning phases. September’s training will focus on Behavior vs. Sensory and Intentional Teaching and November’s will encompass the myriad of community resources with an open forum to hear from stakeholders to discuss the work they do and how they can provide support to any family in Putnam County.

NURSING AND CLINICAL SERVICES

COMMUNICABLE DISEASE PREVENTION AND CONTROL

The mission of the Communicable Disease (CD) Prevention and Control division is to prevent, mitigate, and control the spread of disease in Putnam County. To accomplish these goals and to meet the mandates of New York State Public Health Law, the communicable disease nurses, and staff:

- Utilize an array of passive and active disease surveillance tools.
- Investigate cases of communicable diseases in Putnam County.
- Respond to disease outbreaks in Putnam County.
- Provide disease education (information, prevention, and control measures) formally and informally to health professionals and residents.
- Provide free screening for HIV and Hepatitis C on-site and off-site along with linkage to care as needed.

THE COMMUNICABLE DISEASE PREVENTION AND CONTROL DIVISION, IN 2022:

- Maintained twice-weekly no-cost HIV and counseling, testing, and referral clinics.
- Continued to offer HIV testing and counseling services as part of the monthly comprehensive Migrant Worker Immunization Clinic.
- Responded to and investigated individual cases, clusters, and outbreaks of New York State DOH reportable diseases in Putnam County residents.
- Investigated over 1689 individual disease reports (excluding COVID-19 reports) with enteric diseases comprising the largest percentage.

CD staff has successfully partnered with other divisions within the PCDOH, other county health departments, the NYSDOH, local and regional agencies and schools, and community health care providers hospitals, nursing homes, and other local facilities, to achieve the overarching mission to prevent, mitigate, and control disease in Putnam County.

TABLE 20
SUMMARY OF PUTNAM COUNTY COMMUNICABLE DISEASE CASES REPORTED TO NYSDOH, 2018-2022

SELECTED CATEGORY	2022*	2021*	2020**	2019**	2018***
Amebiasis	0	1	3	1	1
Anaplasmosis	32	83	30	29	24
Babesiosis	32	51	25	28	28
Brucellosis	1	0	0	0	0
Campylobacteriosis	38	33	22	29	23
Cryptosporidiosis	5	2	3	2	0
Cyclospora	4	4	4	12	2
E. coli Shigatoxin (positive)	14	4	10	4	2
Ehrlichia chafeensis	5	6	0	2	2
Encephalitis, Powassan virus	0	0	0	0	0
Encephalitis, other viral, non-WNV	0	1	0	1	0
Giardiasis	4	6	3	13	8
Hemophilus Influenzae, not B	0	0	0	2	2
Hepatitis A	0	1	0	0	1
Hepatitis B, acute	0	1	0	1	0
Hepatitis B, chronic	12	18	7	11	8
Hepatitis C, acute	2	4	3	4	7
Hepatitis C, chronic	14	25	24	73	75
Influenza	3900	432	537	438	684
Legionellosis	2	3	6	1	4
Listeriosis (non-pregnant)	1	0	1	1	0
Lyme disease ¹	N/A	N/A	172	279	319
Measles	0	0	0	1	4
Meningitis, aseptic (viral)	0	0	1	2	3

Meningitis, other bacterial	1	1	0	0	1
Mpox	5	-	-	-	-
Mumps	0	0	0	1	0
Pertussis	0	0	4	12	2
Rocky Mountain Spotted Fever	0	0	0	0	2
Salmonellosis	20	14	11	21	16
Shigellosis	3	7	3	5	4
Strep Group A, invasive	2	1	2	7	4
Strep Group B, invasive	8	6	11	11	11
Strep pneumoniae, invasive	8	3	4	7	2
Typhoid	0	0	0	1	0
Vibrio	3	3	2	1	2
Yersiniosis (non-plague)	15	13	9	4	0

*Preliminary count based on report from NYS Communicable Disease Electronic Surveillance System

**Preliminary count released by NYSDOH to local health departments but not yet published

***Final Count as per NYSDOH Communicable [Disease Annual Reports](#)

¹ Putnam is amongst counties with high incidence of Lyme disease where an estimated number of Lyme disease cases is reported based on extrapolation from results of investigation of a sample of positive lab results. Estimates are done at the state level and have not yet been released for 2021 or 2022.

It is important to note that these numbers represent confirmed cases reported to the NYSDOH, not the actual number of investigations. Lab reports received electronically are investigated by the nurses in the CD Program. Only investigations that meet the CDC-definition criteria result in reportable confirmed cases.

2022 OUTBREAKS AND NOTABLE INVESTIGATIONS

According to the CDC, an outbreak is the occurrence of more cases of a disease than would normally be expected in a specific place or group of people over a given period (<https://cdc.gov>, June 5, 2017).

COVID-19

The COVID-19 Pandemic continued into 2022 with record numbers of cases. In 2022, the disease generally caused less hospitalization and death, in large part due to COVID-19 immunization and natural immunity from previous infections. As a result, Covid contact tracing was halted and the Mask Mandate was lifted in early 2022. COVID-19 vaccine clinics for the public operated by PCDOH concluded February 2022, as vaccine was readily available in the community from providers and pharmacies. PCDOH continues to offer COVID-19 vaccines in all scheduled immunization clinics located at the health department.

- Disease information was provided to at risk individuals, congregate care settings, businesses, schools, and the public as state and CDC guidelines continued to change.
- Weekly public data updates continued in an online dashboard and trend summary.

TABLE 21

COVID-19 TABLE, 2020-2022

SELECTED CATEGORY	2022	2021	2020
COVID 19 Cases**	15582	12970	3739
COVID 19 Deaths***	34	39	67

**Data source is NYSDOH COVID-19 Surveillance System known as CommCare. 2020 count includes cases from June-Dec only.

*** Data source is [New York State Statewide COVID-19 Fatalities by County Data set](#).

MPOX

Mpox is a rare disease caused by a virus in the Orthopoxvirus genus in the family Poxviridae first discovered in 1958. The Orthopoxvirus genus also includes variola virus (which causes smallpox), vaccinia virus (used in the smallpox vaccine), and cowpox virus. In response to a multi-country outbreak, the World Health

Organization (WHO) declared Mpox an International Public Health Emergency in July of 2022. The United States followed suit the following week.

The PCDOH conducted disease investigation, contact tracing, education and offered vaccine to prevent further spread of disease.

POLIO

On July 21, 2022, a confirmed case of Polio was announced by Rockland County. NYS initiated wastewater monitoring for Polio to better understand where the virus is circulating. Positives samples were found from Rockland, Orange, Sullivan, and Nassau Counties and from Brooklyn and Queens in NYC. Putnam County offers Polio vaccine for any residents, especially children, that may not be up to date with their vaccines.

EBOLA

The Democratic Republic of Congo and Uganda both announced Ebola outbreaks in 2022. On September 20, 2022, the Ugandan Ministry of Health confirmed an outbreak of Ebola (Sudan virus) in Mubende District, in western Uganda. This marks the sixth Ebola outbreak in Uganda. NYS began monitoring travelers arriving from Uganda in October 2022 for signs and symptoms of disease. The PCDOH continues to keep current regarding Ebola, including monitoring returning travelers and linking individuals to care with minimal exposure in the event of illness.

REGIONAL AND MULTI-STATE OUTBREAKS

253 cases of Salmonella were identified primarily in adults in the Western part of NYS, with onset dates from late September through early October 2022. At times, what initially appears to be an isolated case of a communicable disease, often a foodborne illness, can later be found to be part of a regional, state, or national outbreak through genomic sequencing. In these cases, NYSDOH contacts the local health department and requests that CD staff re-interview the ill individual using a detailed disease-specific form. The same form is used for all cases that are deemed to be part of the same outbreak, and then compared, looking for similarities in foods eaten, food brands, travel history, shared restaurants or attended events, and pet/animal contacts. This assists in the process of locating and then confirming the source of a disease outbreak.

RSV/FLU

Flu surveillance season officially started 10/02/2022 with an unusually high number of reported cases. Throughout flu season PCDOH publishes weekly [flu reports](#) describing trends in local transmission. In addition to flu, Respiratory syncytial virus (RSV) was also reported in record numbers during the fall of 2022. RSV is a contagious virus that is usually mild but can severely affect the lungs and respiratory airways in the young and older adults. NYS released a Health Advisory November 10, 2022, for providers: Increased respiratory syncytial virus activity, especially among children.

OTHER DISEASE CONTROL SERVICES

TUBERCULOSIS

The goal of the Tuberculosis (TB) Program is to eradicate the disease. The program provides free services for Putnam residents with active and latent (inactive) TB (LTBI), including testing, evaluation, and treatment. Staff provided outreach and education to at-risk communities in Putnam County. Displaced Ukrainians, known as humanitarian parolees, that are a part of Uniting for Ukraine program, were assisted with receiving TB testing. The program continued to receive referrals for TB evaluations from various partners in the community.

TABLE 22

TUBERCULOSIS DISEASE PROGRAM DATA, 2018-2022

SELECTED CATEGORY	2022	2021	2020	2019	2018
TB Screening					
Staff TB tested	17	15	9	14	62
TB Outreach/Migrants/Ukrainians*	5	0	0	2	11
General Public/DOH walk-ins	16	14	22	51	87
Clients for Chest X-Rays	8	1	1	6	4
Clients receiving HIV Counseling & Testing	1	0	5	42	0
Totals Screenings	38	29	31	67	153
LTBI					
Started Treatment	6	5	6	5	8
Completed Treatment	6	5	3	5	2
Continuing Treatment	2	2	6	1	2
Incomplete Treatment	0	1	0	0	3
% Completing/Continuing	100%	80%	100%	100%	62%
Office Visits for LTBI Medication Monitoring	10	5	5	10	0
Home Visits for LTBI Medication Monitoring	13	12	5	10	70
Active TB					
Clients starting therapy for Active TB.	1	0	1	2	1
Clients completing therapy for Active TB.	0	0	2	2	0
Home Visits for DOT (Directly Observed Therapy)	104	0	22	97	17
Office Visits for DOT	0	0	0	0	0
Video DOT	16	0	137	90	28

*Uniting for Ukraine program began in 2022 – displaced Ukrainians, known as humanitarian parolees, are being allowed entrance to the US through approved sponsorships. They are required to undergo TB blood testing (IGRA) and vaccination within 90 days of arrival. LHDs can assist with obtaining these services.

TABLE 23

LATENT TUBERCULOSIS INFECTION TREATMENT DATA, 2018-2022

SELECTED CATEGORY	2022	2021	2020	2019	2018
Started Treatment	6	5	6	5	8
Completed Treatment	6	5	3	5	5
Continuing Treatment	2	2	6	1	2
Incomplete Treatment	0	1	0	0	3
% Completing/Continuing	100%	80%	100%	100%	62%

TABLE 24

TUBERCULOSIS DISEASE PROGRAM DATA, 2018-2022

SELECTED CATEGORY	2022	2021	2020	2019	2018
Staff TB tested	17	15	9	14	62
TB Outreach/Migrants/Ukrainians*	5	0	0	2	11
General Public/DOH walk-ins	16	14	22	51	87
Totals Screenings	38	29	31	67	153
Clients starting therapy for Active TB.	1	0	0	2	1
Clients completing therapy for Active TB.	0	0	0	1	0
Home Visits for DOT (Directly Observed Therapy)	104	0	0	97	17
Office Visits for DOT	0	0	0	0	0
Video DOT	16	0	0	90	28
Office Visits for Drug Monitoring	10	5	5	10	0
Home Visits for Drug Monitoring	13	12	5	10	70
Clients for Chest X-Rays	8	1	1	6	4
Clients receiving HIV Counseling & Testing	0	0	5	42	0

*Uniting for Ukraine program began in 2022 – displaced Ukrainians, known as humanitarian parolees, are being allowed entrance to the US through approved sponsorships. They are required to undergo TB blood testing (IGRA) and vaccination within 90 days of arrival. LHDs can assist with obtaining these services.

SEXUALLY TRANSMITTED DISEASES

The PCDOH investigates chlamydia, syphilis, and gonorrhea disease reports. The STD program provides free clinical services to those uninsured/underinsured offering screening, testing, and treatment to residents and their contacts to help stop the spread of STDs in Putnam County. PCDOH also educates residents and providers regarding the STD prevalence and trends in Putnam County.

TABLE 25

STD CLIENT SERVICES, 2018-2022

SELECTED CATEGORY	2022	2021	2020	2019	2018
Total Visits	311	434	160	471	433

Table 26

SUMMARY OF STD INFECTIONS 2018-2022

SELECTED CATEGORY	2022*	2021*	2020**	2019**	2018**
Chlamydia	179	174	138	212	187
Gonorrhea	32	34	31	30	23
Syphilis					
Early ¹	15	14	12	8	16
Late ²	12	6	9	6	9
Syphilis Total	27	20	21	14	25
Annual Total of STD's	238	228	190	256	235

*Preliminary count based on report from NYS Communicable Disease Electronic Surveillance System

**Final count as per NYSDOH STI Surveillance Summary Reports at

<https://www.health.ny.gov/statistics/diseases/communicable/std/>

¹ Early syphilis is an aggregate count of primary, secondary, and early non-primary non-secondary stage cases.

² Late syphilis is an aggregate count of unknown duration and late-stage cases.

HEPATITIS C

Hepatitis C (HCV) is a liver disease that often goes undetected. Undiagnosed, this chronic virus can lead to liver failure and liver cancer. Treatment for Hepatitis C is easily accessible and highly successful. Knowing your HCV status is vitally important.

The PCDOH understands the importance of education, early detection, linkage to care and treatment for Hepatitis C. NYSPHL states all outpatient physicians and most inpatient facilities must offer Hepatitis C testing to any NYS resident born between 1945 and 1965 in their care. Hepatitis C Testing at the PCDOH is free and is available upon request to anyone who has been exposed to Hepatitis C. Risk factors include but are not limited to anyone born between 1945-1965, injectable drug use, snorting drugs, and/or having had a blood transfusion prior to 1992.

HIV/AIDS

The PCDOH provides HIV testing and linkage to treatment. An added focus, in line with the NYSDOH AIDS Institute's mission, is to educate those we test and the community on pre-exposure prophylaxis (PrEP), post-exposure prophylaxis (PEP) and undetectable and untransmittable (U=U).

HIV/HCV CLINICS

Free HIV/HCV counseling and testing clinics are offered Tuesdays and Thursdays from 1:30 -3:30 p.m. by appointment. Hepatitis C testing remains suspended due to test kit control issues. NYS is aware, and we are exploring other opportunities which will allow us to offer Hepatitis C Testing to our community.

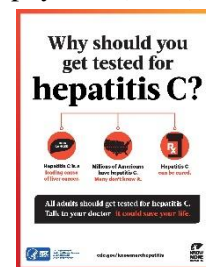


TABLE 27

HIV AND HEPATITIS C TESTS, 2018-2022

SELECTED CATEGORY	2022	2021	2020	2019	2018	2017
HIV tests at PCDOH	6	1	14	58	65	127
HIV tests at Brewster Open Door*	131	110	120	185	215	222
Reactive HIV Tests	0	0	0	0	0	1
Hepatitis C Tests	N/A**	0	9	39	35	81
Reactive Hepatitis C tests	N/A**	0	0	1	0	14

*PCDOH provides funding for HIV testing at Open Door Brewster, a FQHC

**Due to testing reliability issues, Hepatitis C testing on hold

TABLE 28

HIV AND HEPATITIS C TESTS, 2018-2022

SELECTED CATEGORY	2022	2021	2020	2019	2018	2017
HIV tests at PCDOH	6	1	14	58	65	127
HIV tests at Brewster Open Door*	131	110	120	185	215	222
Reactive HIV Tests	0	0	0	0	0	1
Hepatitis C Tests	N/A**	0	9	39	35	81
Reactive Hepatitis C tests	N/A**	0	0	1	0	14

*PCDOH provides funding for HIV testing at Open Door Brewster, a FQHC

**Due to testing reliability issues, Hep C testing on hold

VACCINE DISEASE PREVENTION PROGRAM

The Immunization Program continues to be one of the significant efforts of the PCDOH in preventative care. The role of the Immunization Program during the COVID-19 pandemic in 2021 and 2022 highlighted the importance of preventative medicine.

TRAVEL CLINIC

The Travel clinics continue in popularity with county and non-county residents. PCDOH offers the Yellow Fever, Typhoid, Polio, Rabies, and all ACIP-recommended adult vaccines. CDC country/destination-specific information and preventative education are provided to all clients. In addition to the usual vaccine cost and administration fee for each vaccine given, a one-time \$50.00 clinic fee is charged for this service. A total of 65 people received vaccines at these clinics with a total of 100 vaccines administered.

MIGRANT AND SEASONAL FARM WORKER PROGRAM

NYSDOH defines Migrant and Seasonal Farm Workers (MSFW) as migrants working in horticultural specialties, working with livestock, packing, and sorting procedures in food processing, as well as the traditional farm work of harvesting crops.

The COVID-19 pandemic heavily impacted the MSFW Program. Despite the obstacles presented by the pandemic and the loss of the original clinic location, the immunization staff persevered and are now collaborating with the Community Action Partnership (CAP) program in the village of Brewster and use their offices for the MSFW clinics with COVID-19 safety precautions in place. Two annual fall flu clinics were held in collaboration with the United Methodist Church in the village of Brewster. COVID-19 vaccines were also offered to those eligible at our regular monthly clinics and booster COVID-19 vaccines were distributed at clinics to those eligible. Hosting MSFW clinics increases access to care for a population in Putnam County that may otherwise not be able to receive these services. Access to care is one of the ten essential public health services and serves to expand health equity in our County.

**TABLE 29
ADULT MIGRANT AND SEASONAL FARM WORKER VACCINATIONS, 2018-2022**

SELECTED CATEGORY	2022	2021	2020	2019	2018
Twinrix Hep A/B	20	10	47	68	81
Varicella	11	4	8	35	27
Influenza	51	109	140	103	171
Adult Td	15	8	10	17	26
MMR	14	8	38	50	45
Tdap	20	4	24	29	28
HPV	4	0	1	6	7
Total	135	143	268	308	385

SCHOOL-BASED FLU CLINICS

The fall of 2022 was the thirteenth year in which the Immunization Program offered no-cost influenza vaccinations to students and staff at Putnam County schools. While COVID-19 required a great deal of attention from the Nursing Division, the concern around influenza season was not dismissed. In 2022, clinics were conducted at the County schools as in previous years.

TABLE 30

SCHOOL BASED INFLUENZA CLINICS, 2018-2022

SELECTED CATEGORY	2022	2021	2020	2019	2018
St. James	41	47	40	39	45
Putnam Valley High School	113	124	126	96	115
Haldane (K-12)	153	232	203	269	226
George Fisher Middle School	72	101	40	252	205
Kent Elementary School	57	78	52	135	125
Carmel High School	111	123	83	194	193
Matthew Paterson Elementary School	63	63	63	141	107
Lakeview Elementary School	48	47	47	66	71
Austin Road	63	81	50	125	123
Fulmar Road	49	59	40	65	63
Kent Primary	41	67	40	115	110
Mahopac High School	49	48	67	74	109
Mahopac Middle School	95	125	61	127	127
Garrison School	75	87	70	81	79
Putnam Valley Middle School	105	117	126	108	125
Putnam Valley Elementary School	106	95	151	145	156
Henry H. Wells Middle School	59	56	0	87	102
CV Starr Intermediate School	55	54	0	117	118
Brewster High School	86	82	0	143	129
JFK Elementary School	63	55	40	69	75
Total	1504	1741	1299	2448	2403

SEASONAL INFLUENZA VACCINE CLINICS

Seasonal influenza was offered at three public flu clinics in 2022 to ensure access to flu vaccine for Putnam County residents. The flu vaccine was also offered at each Putnam County Senior Friendship Center to increase access for the elderly.



TABLE 31

SEASONAL FLU CLINICS, 2018-2022

SELECTED CATEGORY	2022	2021*	2020*	2019	2018
PCDOH Drive-through – 1st clinic	78	157	211	243	271
PCDOH Drive-through – 2nd clinic	102	99	176	126	181
Garrison FD	80	85	141	103	112
Total	260	341	528	472	564

*Drive-thru 2020-22

TABLE 32

OFFICE FOR SENIOR RESOURCES INFLUENZA CLINICS, 2018-2022

SELECTED CATEGORY	2022	2021	2020	2019	2018
Putnam Valley	47	38	0	59	66
Carmel	21	23	0	32	34
Cold Spring	27	15	0	24	15
Mahopac	36	27	0	41	52
Total	131	103	0	156	167

TABLE 33

SEASONAL INFLUENZA VACCINATION DISTRIBUTION, 2018-2022

SELECTED CATEGORY	2022	2021	2020	2019	2018
Office for Senior Resources	131	103	0	156	140
Public Clinics	283	362	560	493	827
Schools	1504	1741	1299	2448	2403
County Employees	169	189	219	227	266
Immunization Clinics/MCH/ Travel/Misc.	50	36	46	102	152
Migrant	168	127	120	94	154
Total	2305	2558	2244	3520	3942

RABIES

Rabies is an almost 100% fatal disease if left untreated. All mammal bites may transmit rabies, but certain species have a higher risk of transmission (raccoon, skunk, fox, bat, feral cat). The PCDOH EHS investigates and follows up on all mammal bites. Dogs, cats, ferrets, and livestock will be monitored by the owner for 10 days to ensure transmission of rabies did not occur at the time of the bite. After investigating a potential rabies exposure, EHS rabies program staff assess the need for Rabies Post-Exposure Prophylaxis (RPEP). Upon approval for RPEP from EHS, the Rabies Coordinator and /or Communicable Disease (CD) nursing staff are actively involved in educating the affected individual and their health care provider(s). PHC Emergency Department staff provides the initial RPEP, the first of 4 necessary treatment visits. The remaining 3 treatment visits are with the individual’s own health care provider, or, occasionally with a PCDOH nurse. Both CD and Immunization nurses work with area health care providers and the exposed individuals to ensure accurate and timely completion of RPEP. Most treatments are due to bat exposures. Rabies will result in death if untreated in humans and domestic pet mammals. The PCDOH goal is to decrease the number of treatments through the use of traditional and social media, informational packets, wellness boards, seminars and at community fairs. In 2022, PCDOH recommended treatment for 27 people and 27 people completed the treatment.

TABLE 34

RABIES DATA, 2018-2022

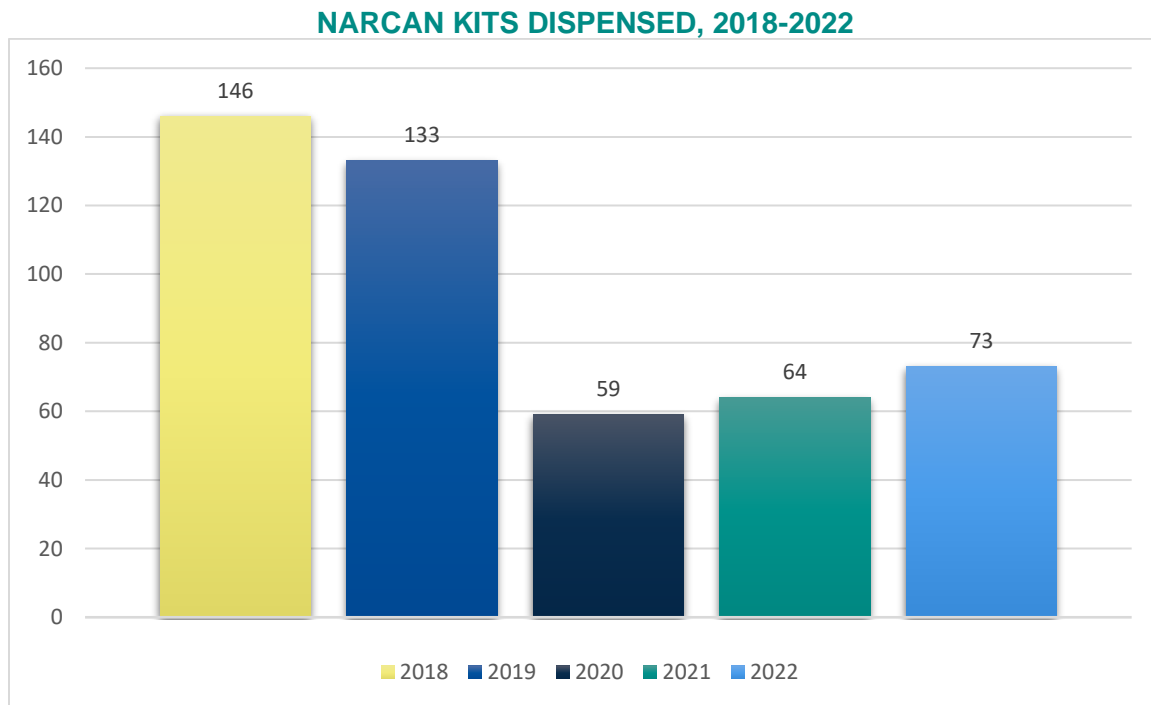
SELECTED CATEGORY	2022	2021	2020	2019	2018
Investigations	357	345	285	446	443
People Treated for “Reasonable Exposure Probability”	27	27	37	35	16
Animals Tested	59	78	78	96	94
Confirmed or Assumed Rabid Animals	0	2*	5*	5*	7*

*Animals were untestable therefore assumed rabid:1 animal in 2021, 2 animals in 2020, 5 animals in 2019, 3 animals in 2018, 2 animals in 2017

OPIOID OVERDOSE PROTECTION PROGRAM

The PCDOH became a Registered Opioid Overdose Prevention Program in 2014. The purpose of this program is to educate the local police departments, school staff, municipalities, ambulance corps, local seasonal children’s camps staff, and any public or private local business that requests education and training for the administration of Narcan (naloxone) in the event of an opioid overdose. Kits are provided based on program need. Individual residents of the community are referred to community organizations or the NCAP program directly to obtain Narcan kits. Currently, there is an increased presence of community partner organizations working on harm reduction, including naloxone distribution.

FIGURE 2



MATERNAL AND CHILD HEALTH

The Maternal Child Health Program (MCH) provides training and educational services to new parents through a holistic approach by offering support groups, classes, telephone consults, and home visits. Educational topics include general parenting, breastfeeding, diet, immunizations, disease control, lead poisoning prevention, sleep safety, postpartum depression, and child growth and development.



Of the two public health nurses in the MCH Program, one is an International Board-Certified Lactation Consultant (IBCLC). The second nurse, who was a Certified Lactation Counselor (CLC), left employment in June. Her position remained vacant for the remainder of the year. The MCH Program utilizes a bilingual nurse from the Lead Poisoning Prevention program to help support Spanish speaking new parents in

Putnam County.

CHILD FIND SYSTEM (FORMERLY INFANT/CHILD HEALTH ASSESSMENT PROGRAM (ICHAP))

The MCH Program at the PCDOH participates in the Child Find System statewide program. This program seeks to identify infants and children under the age of three who are at risk for developmental delays and disabilities and to provide referrals for follow-up and monitoring.

Home visits for developmental screenings and family education continued in 2022. Additional screenings were conducted via mailed Ages and Stages Questionnaires with follow-up phone calls as per parents' preference. Follow-up phone calls were then made to these families to discuss questionnaire results and any parental concerns, and to provide anticipatory guidance.

TABLE 35

COMPREHENSIVE CHILD FIND PROGRAM, 2018-2022

CASE DATA	2022	2021	2020	2019	2018
Total Number Active	18	37	48	64	68
Total Cases Opened	7	11	11	18	37
Total Cases Discharged	12	22	25	32	22
Total Number of Visits	41	13*	*	129	133

*Face-to-face services were stopped in 2020 due to COVID-19

NEWBORN SCREENING PROGRAM

All newborns in NYS are screened before being discharged from the hospital for a variety of rare but serious disorders. All abnormalities that are found during these screenings are then reported to the NYSDOH. A Public Health Nurse at the PCDOH is then notified and assists medical providers and families to ensure the findings are followed-up on per NYS guidance.

TABLE 36

NEWBORN SCREENING PROGRAM, 2018-2022

ENROLLMENT	2022	2021	2020	2019	2018
Referred to Newborn Screening Program	9	2	5	1	0
Retested by Private Medical Doctor	9	2	5	1	0
Results within Normal Limits	7	2	5	1	0
Abnormal Results (hypothyroidism, PKU)	2	0	0	0	0
Infant Death	0	0	0	0	0

PERINATAL HEPATITIS B PROGRAM

The Perinatal Hepatitis B Program seeks to identify pregnant persons with Hepatitis B prenatally or at birth to prevent the spread of Hepatitis B. Education is provided to the case, household contacts, and case management of the newborn ensures completion of the vaccine series.

TABLE 37

PERINATAL HEPATITIS B PROGRAM, 2018–2022

HEPATITIS B PROGRAM	2022	2021	2020	2019	2018
Positive Status Referrals	3	1	0	1	3
Unknown Status Referrals	2	0	0	0	5
Negative	2	0	0	0	5
Positive Status Identified Prenatal	3	0	0	1	3
Unknown – No Prenatal Care	0	0	0	0	0
Cases Closed	2	0	0	1	1

PRENATAL/POSTPARTUM NEWBORN VISITING PROGRAM

Home visits to families with newborn infants resumed in February 2022. While the ongoing COVID-19 pandemic limited the ability of the MCH staff to conduct home visits, the nurses continued to offer telehealth services, as well as the opportunity for support at the bimonthly Breastfeeding Support Group at New York Presbyterian-Hudson Valley Hospital Center. Referrals received were primarily self-referrals made by mothers aware of the Postpartum Newborn Visiting Program, as well as from local healthcare providers and NYP-HVHC. Putnam Hospital had not made any referrals during 2022 as its Maternity Unit had closed in March of 2022 and remains closed at year’s end.

TABLE 38

PRENATAL/POSTPARTUM NEWBORN VISITING PROGRAM, 2018-2022

SUMMARY DATA	2022	2021	2020	2019	2018
Total number of referrals	**	*	*	555	647
Total number of patients admitted	**	*	*	288	257
Not admitted secondary to client refusal/ inability to contact/or out of county residence	**	*	*	267	390
Number of visits made	116	*	*	790	787

*Home visiting program suspended in 2020 and 2021 due to COVID-19

**Transition from previous electronic medical record is in progress. Referral numbers and client numbers are not available.

PARENT SUPPORT GROUPS

The New Moms’ Support Group resumed weekly meetings at the Mahopac Library in March of 2022. The meetings were suspended in September as the library building was closed for renovations. These meetings were open to all new parents at no cost to provide support and education in all areas covered by the MCH program.

A MCH nurse/lactation consultant has attended the bimonthly Breastfeeding Support Group at Hudson Valley Hospital on a limited basis to provide support to mothers and newborn infants.

NEWBORN PACKETS

The Immunization Program, in collaboration with other nursing programs and the Health Education Division, updated the informational packets sent to parents of newborns. In addition to these updates, the collaborative efforts led to an improved dissemination process: a new tab on the PCDOH website with all the educational

materials in digital format. Once the website was finalized and accessible to the public, the packets were replaced with postcards that listed the web address and a brief overview of the information available. This project was undertaken after surveying many new parents in our community. A website, as opposed to a packet of informational materials, would relieve some of the overwhelming amounts of mail that many families experience when bringing a new member home. Furthermore, this decision not only saved Putnam County tax dollars by cutting down on the printing and mailing costs, but also attested to the PCDOH's commitment to reduce waste. In cooperation with the Lead Program, 1,430 postcards were sent to parents of 1- and 2-year-olds for their birthday, reminding them about needed upcoming immunizations and lead check-ups.

LEAD POISONING

The Lead Poisoning Prevention Program's goal is to eliminate the presence or risk of lead poisoning in the children of Putnam County. Lead poisoning is a preventable environmental health hazard and is one of the most common environmental toxins for children. While lead poisoning is often asymptomatic, it can have significant effects on a child's development. The definition of an elevated blood level in a child is 5 µg/dL (previously 10 µg/dL in 2019) This change has increased the number of children who will need Lead investigations. In early 2020, the Maternal Child Health and Early Intervention staff collaborated to update protocols for children who have elevated blood lead levels. While the effects of lead poisoning can be permanent, this new protocol will assist the Public Health Nurse Case Managers to assess the lead poisoned child's developmental status.

The PCDOH continues to express the importance to residents about lead testing at ages one and two, as well as for high-risk pregnant women via social media and by offering educational materials at clinics held in 2022 and with reminder birthday postcards to all Putnam County one and two-year-olds to get tested for Lead on or around their first and second birthday and to immunize their child according to CDC and NYSDOH recommendations. 765 one-year-old and 665 two-year-old birthday postcards for a total of 1430 were mailed in 2022. PCDOH has noticed a significant increase in the number of children tested for Lead at one and two years old (Table 37).

TABLE 39

SUMMARY OF LEAD TESTING, 2018-2022

SELECTED CATEGORY	2022	2021	2020**	2019	2018
Children tested by Private Providers	1953	1602	1493	1782	1681

**COVID-19 restrictions and concerns resulted in fewer children being tested for lead by their physicians

TABLE 40

LEAD TESTING SERVICES, 2018-2022

SELECTED CATEGORY	2022	2021	2020	2019	2018
Children tested using the Lead Care II	0	0	0	0	5
Children with BLLs 5-9 µg/dL	5	3	1	8	14
Children w/Capillary > 10 requiring confirmatory venous tests	0	0	1	0	0
Referred to PCDOH for Environmental Investigation	9	3	3	13	1
Referred for Medical Treatment	0	0	0	0	0
Children with elevations > 10 – 14 µg/dL	2	0	1	4	2
Children with elevations > 15 – 19 µg/dL	2	1	1	1	1
Children with elevations > 20 µg/dL	0	0	0	0	2

TABLE 41

NURSING CASE MANAGEMENT, 2018-2022

SELECTED CATEGORY	2022	2021	2020*	2019	2018
Children added to case management	9	3	3	14	1
Children in case management	15	15	20	16	6
Children discharged from case management	5	9	6	2	2

*2 children moved out of NY in 2020

TABLE 42

EHS INVESTIGATIONS, 2018-2022

SELECTED CATEGORY	2022	2021	2020	2019	2018
Case Investigations Initiated	9	5	4	14	1
Case Investigations concluded (i.e., Hazards in Compliance)	3	4	1	4	1

OTHER DISEASE CONTROL SERVICES

ARTHROPOD

TICKBORNE

Tickborne diseases include Babesiosis, Anaplasmosis, Erlichia chaffeensis, and Powassan. As of January 2022, Lyme Disease is no longer investigated by NYS. NYS noted a surge of anaplasmosis cases in 2021. The 2022 numbers for tickborne are not as high, but still slightly higher than in previous years. There have been no cases of the more serious Powassan virus (also called Deer Tick Virus) in Putnam County in 2022.

CONTACT US

If you have any questions regarding this report or require more information, please contact the Putnam County Department of Health at Putnamhealth@putnamcountyny.gov.