



Public Health
Prevent. Promote. Protect.

Greene County Public Health Department

Annual Report 2025



Submitted: April 1, 2026

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Director of Public Health
& Public Health Staff**

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*For Community Health (formerly Family Planning), please see separate report.

Introduction: In 2025, Greene County Public Health staff continued to focus their efforts on our core mission and work. We provided more outreach to the community in our mobile health van and undertook several new initiatives with our community partners. The department is pleased to report on the work of this past year and set goals for 2026 as we look ahead.



MISSION

To achieve health equity for all through health promotion, disease prevention, education, and services to support safe and healthy lifestyles.

VISION

Greene County Public Health envisions a healthy community through equitable access to services.

VALUES

- **Commitment:** We are dedicated to providing support and resources to all individuals for a healthy and safe community.
- **Professionalism:** We conduct ourselves with excellence, accountability, and integrity.
- **Excellence:** Our knowledgeable staff continually improve to seek out the best evidence-based practices for all individuals.
- **Inclusion:** We honor the dignity and worth of everyone in our community and aim to uplift equal health access for all.
- **Collaboration:** We communicate effectively with community partners to accomplish our mission.

Local Health Departments:

Are Prepared

- Public Health Emergency Preparedness and Response is a core public health service
- Emergency Response plans include pandemic planning
- Plans are regularly drilled or activated to respond to local emergencies and outbreaks, allowing for lessons learned and plan improvements

Are Communicable Disease Experts

- Activities routinely conducted:
 - Epidemiological investigations
 - Contact tracing
 - Monitoring of suspected cases
 - Mass clinics
 - Isolation and Quarantine

Are Experienced

- Have responded to emerging disease threats over the last few decades and learn and improve the response each time, leveraging staff experience, technology and added expertise

Build Strong Partnerships

- Working hand-in-hand with NYSDOH and CDC to protect the public's health
- Build and maintain strong community partnerships with local hospitals, clinicians, colleges, school districts, businesses, community-based organizations, and individual volunteers
 - All partners are then ready and able to work together in a public health emergency

Are Responding Every Day

- A strong public health response is our best protection against emerging infections, such as COVID-19
- Making sure that the public health infrastructure is well-funded for everyday work assures that local public health experts act quickly and effectively to mitigate the risks posed by new disease threats.

Review of 2025 Public Health Department GOALS:

1. Complete the Public Health Accreditation process with the support of one of our Public Health fellows.

We submitted our first round in the accreditation process. The next steps involve resubmission with more examples. This process was stalled by the loss of our public health fellow due to threatened funding cuts. Our Quality Assurance Supervisor has been diligently working on this so we can complete it by the August 2026 deadline.

2. With our partners, Columbia Memorial Health and Columbia County Department of Health, submit a joint Community Health Improvement Plan that addresses the most impactful public health issues facing our community.

We have just finalized our community health improvement plan for 2025-2030 in partnership with Columbia Memorial Health and the Columbia County Health department have chosen the three priority focus areas:

- I. Economic Wellbeing: Nutrition Security*
- II. Social and Community Context: Tobacco/E-cigarette Use*
- III. Social and Community Context: Suicide*

[*Healthy Capital District :: Explore Health Data > Explore by County > Greene*](#)

3. Address the juuling epidemic among youth by leveraging medical providers, schools, law enforcement, and our community partners to work collaboratively to reduce youth access to and use of vape products, educate about risks, and assist providers to help youth to quit.

*In 2025 we convened **four all-partner** meetings with community stakeholders: school superintendents, parents, and youth, held **two** listening sessions with physicians, nurses, dental staff, and clinicians and provided outreach to our community partner organizations. These are the five focus areas for the settlement money.*



Some highlights include:

- Two focus groups were held with medical and dental staff that informed a medical webinar with St. Peter's Health Partners and Physician experts who will educate our medical providers about nicotine replacement therapy options for younger adults and teens.*
- A survey completed by school superintendents indicated a high level of interest in school programming for school leaders, teachers, coaches and students to help combat the crisis the schools are facing.*
- We worked with the Tobacco Free Action Communities to inform all public health staff, Greenville PTSA and Greenville town board members on how a community can limit access to nicotine products by youth through local laws.*
- Nicotine and e-cigarette use has been chosen as one of the three topic areas for Greene County's health prevention agenda for the 2025-2030 cycle.*

4. **Address chronic disease by partnering with the community to increase access to safe streets for pedestrians and bicycles. Specifically, leverage the findings from the engineering study of State Route 145 in the Town of Durham to see where improvements to pedestrian, bike and school safety can be implemented by applying for a federal transportation grant.**

Progress was made on this project in 2025 when a team from the NYSDOT, Public Health, Economic Development, Administration and Durham officials interviewed and selected an engineering firm to conduct the study. Colliers Engineering firm was chosen and completed the corridor study of a 9-mile stretch of state route 145, with input from local stakeholders. Five areas of focus to improve safety have been proposed. The final report will be released in 2026 which will inform the next steps for the county and town.

A 2025 Highlight

In February of 2025 we held our first Public Health Staff Development Day. Held at the Windham Senior Center; staff had an opportunity to share a hot meal, compete in interactive games and receive training and updates. Training was provided on Strategic Planning processes by our Public Health fellow, and Communication training from In Our Own Voices. Staff feedback indicated a high level of satisfaction with the event.

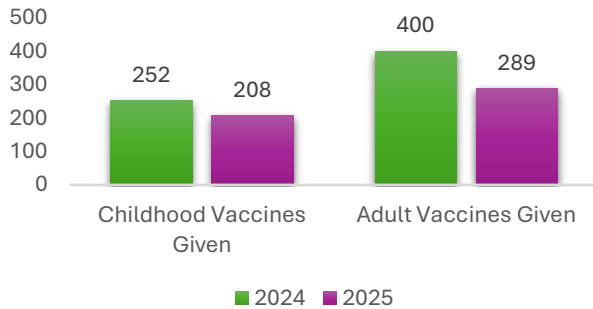


Our goals for 2026:

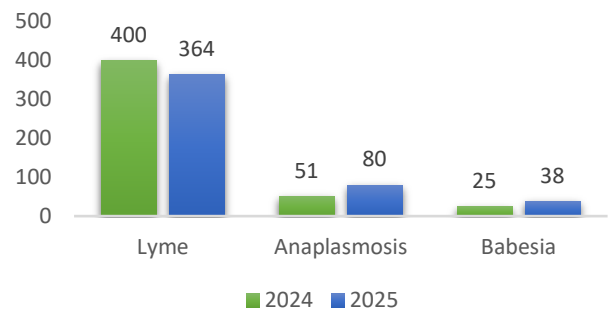
- ✓ Receive Public Health Accreditation
- ✓ Implement performance measures in the Community Health Improvement Plan
- ✓ Public Health Supervisors will complete the ASTHO course- The Essentials of Leadership and Management training
- ✓ Implement Quality Improvement training for PH staff, and County staff working on collaborative Public Health projects via the Public Health Foundation | www.phf.org
- ✓ Prepare for tight NYS budgets and changes to health care coverage that may impact Public Health grants by careful fiscal surveillance.

Public Health by the Numbers

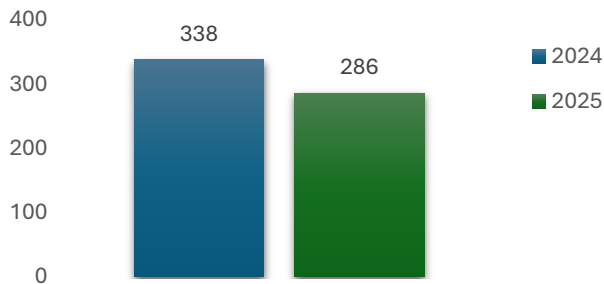
Immunizations



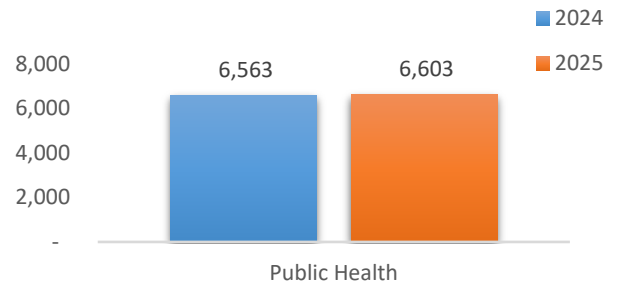
Lyme/Tick-borne Cases



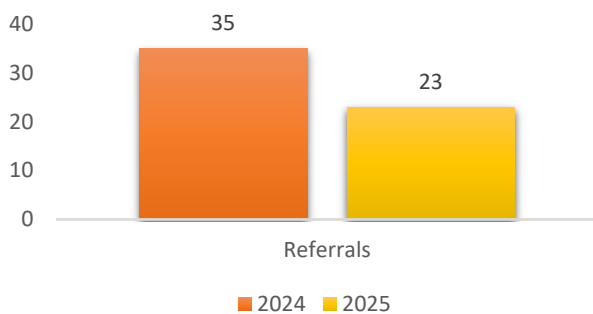
Animals Vaccinated at Rabies Clinics



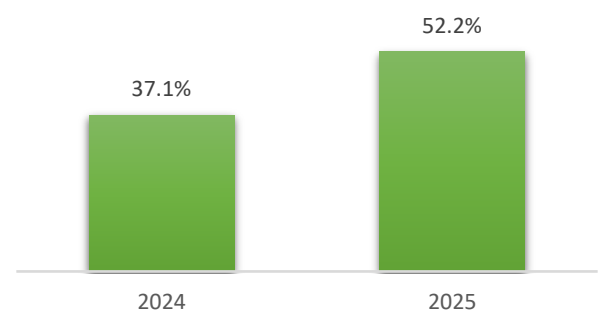
Social Media - Facebook Followers



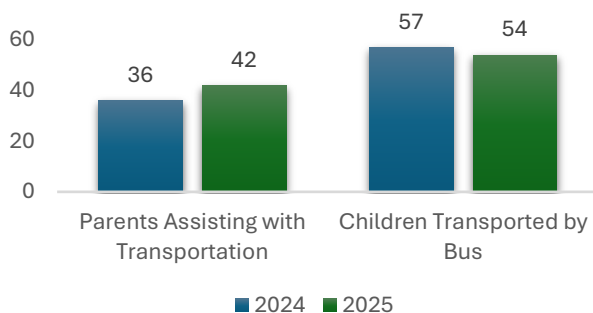
Maternal Child Health Referrals



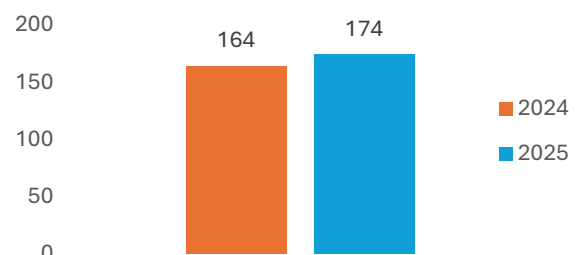
Home Visit Acceptance Rate

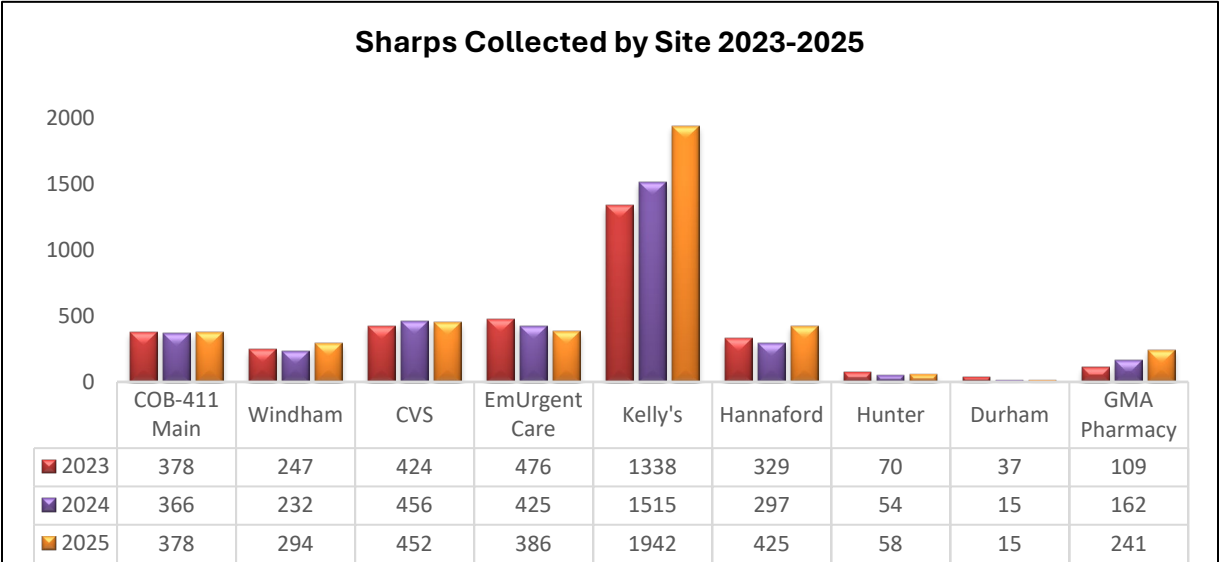
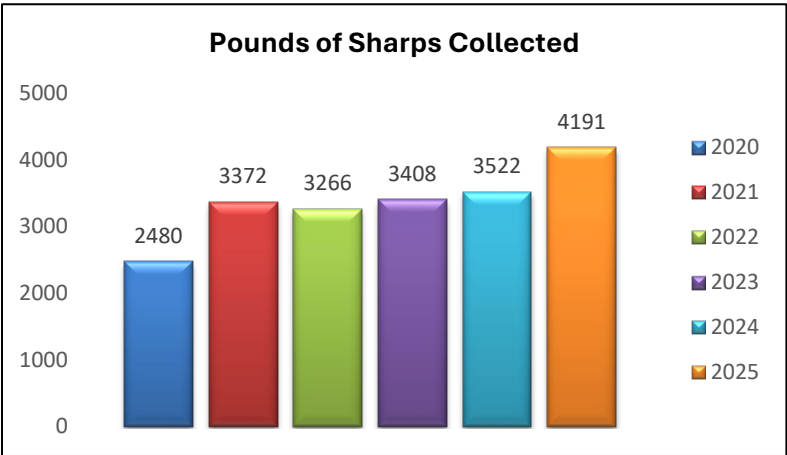


Preschool Transportation



Children with an Individualized Education Plan (IEP)



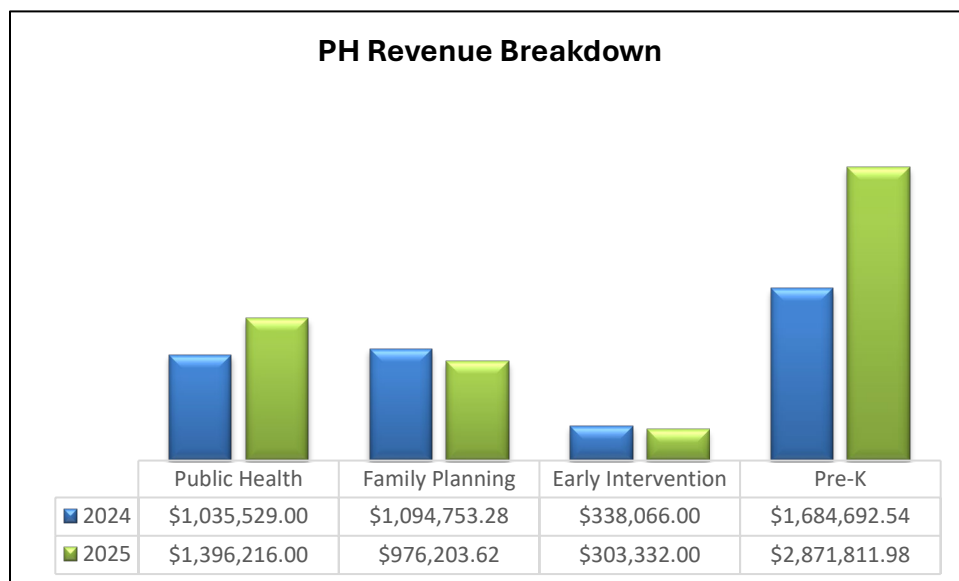
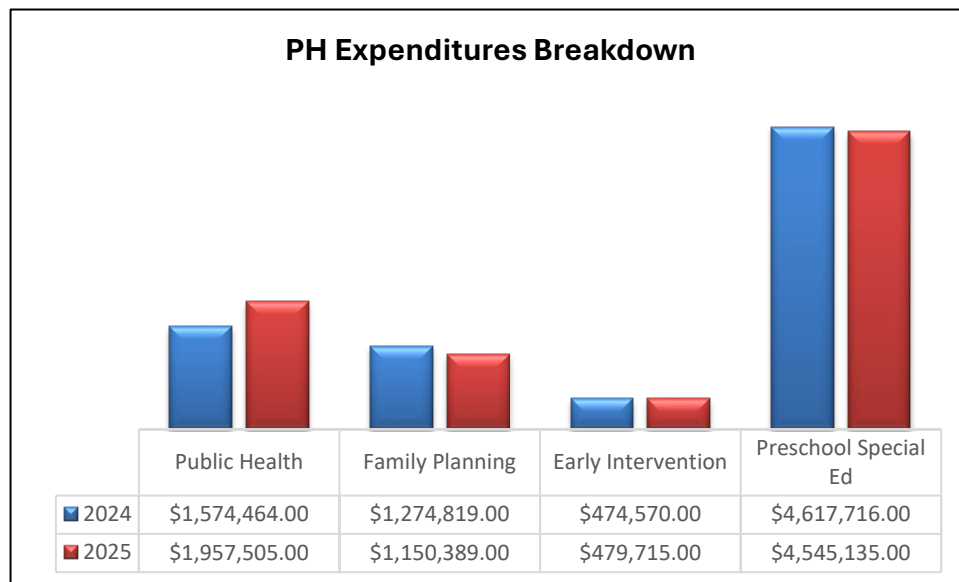


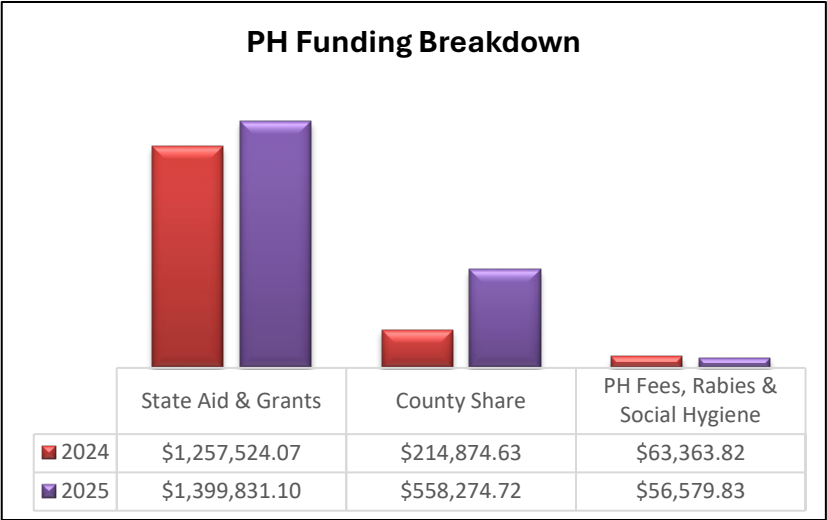
Fiscal

Goals for 2025:

1. Continue to work with budgeting to ensure accurate calculations
2. Review insurance contracts to maximize revenues

In 2025, staff demonstrated continued improvement in grant management and expense tracking, which supported the promotion of several team members to positions with expanded budget oversight responsibilities. We also sustained close collaboration with the budgeting division to ensure the accuracy of financial calculations and expense reporting. Furthermore, we pursued a contract with a revenue cycle management firm to improve reimbursement rates with insurance companies; however, the vendor was ultimately unable to fulfill the terms of the agreement or provide the necessary information regarding potential rate adjustments.





Breakdown of third column:

Funding Source	2024	2025
PH Fees	\$ 49,111.66	\$ 41,743.68
Rabies	\$ 10,944.71	\$ 11,907.94
Social Hygiene	\$ 3,307.45	\$ 2,928.21

Goals for 2026:

1. Review insurance contracts to maximize revenues
2. Improve Budget Forecasting to reduce overages

Quality Assurance

The purpose of Public Health Quality Assurance (QA) is to improve patient care and services by improving quality processes and maintaining program integrity. The QA Officer evaluates systems of care, identifies problems, and works collaboratively to develop solutions and improve performance. New York State Department of Health, federal, and programmatic regulatory requirements are the cornerstone of this work.

In 2025 staff worked to strengthen our strategic plan by working on Internal Collaboration, Community Engagement and Quality Assurance/Quality Improvement. All meeting minutes are kept and shared with all staff. This process guides us towards achieving accreditation.

THE STANDARDS & MEASURES

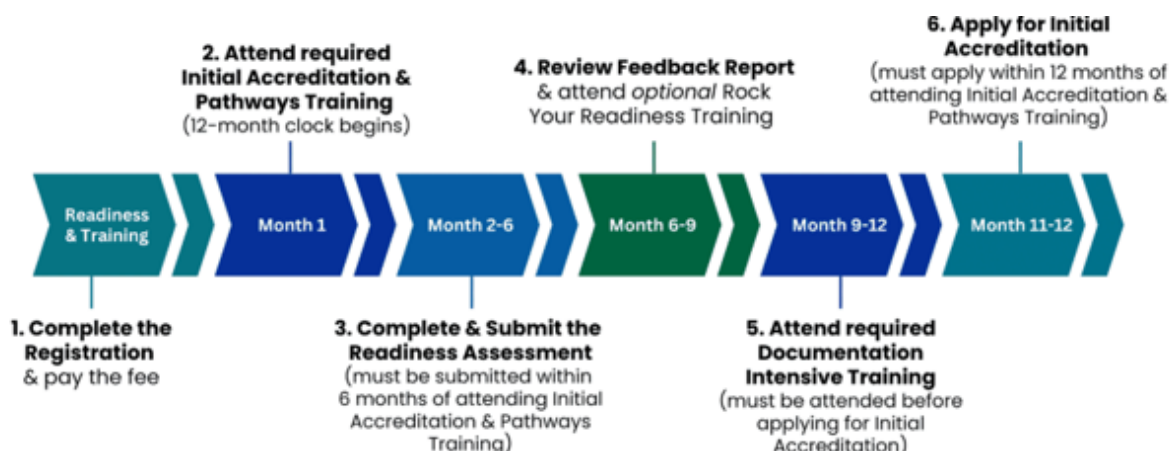
The Standards & Measures are based on the 10 Essential Public Health Services. Each of the 10 domains in the Standards & Measures correspond to one of the 10 Essential Public Health Services outlined here.



Seeking Public Health Accreditation

Accreditation means excellence. It means that a health department is committed to continuous quality and performance improvement. Accreditation is a way to reduce silos and engage all staff in transformation and improvement efforts. Public Health Accreditation Board (PHAB) Accreditation ensures that health departments meet national standards to better support the communities they serve. ([Initial Accreditation - Public Health Accreditation Board](#))

In 2025, Greene County Public Health took steps 1-5 towards Accreditation. Led by a public health fellow, staff were educated and engaged in this process. We are currently at step 5 and plan to submit for initial accreditation in August 2026.



2025 QA Accomplishments:

- ✓ Annual record review of D&TC, Maternal Child Health & Community Health, performed by a NYS Article 28 Registered Health Information Technician (RHIT) accredited reviewer, determined that staff documentation in the Electronic Medical Record (EMR) was complete, and they are performing well.
- ✓ Fellows from the NYS Public Health Corps (PHC) program, assisted us to complete our accreditation readiness assessment, overdose prevention, and epidemiology duties.
- ✓ Facilitated the implementation of the IQS Archive Manager system alongside the IT and Records Management departments and trained staff in Early Intervention, Preschool and Administration.

Staff Education (Annual In-Services):

Required annual in-services and education are accessible to all staff on their respective Share Points. Once completed, an attestation is submitted which remains their staff personnel file ensuring compliance with State and Federal guidelines. In-services are updated annually to reflect current State and Federal regulations and CDC guidelines.

Goals for 2026:

- Apply for initial Accreditation thru PHAB
- Implement annual review/update of all departmental policies along with placing them all on Share drives instead of paper manuals including the Early Intervention Department.
- Lead staff to automate our processes from paper to computer and scan all stored records into the IQS Archive Manager system.
- Increase the amount of patient satisfaction surveys sent out to Public Health patients receiving services with a goal of 4.5/5 score or better.

COMMUNICABLE DISEASE CONTROL

Diagnostic & Treatment Center (DTC):

The Diagnostic and Treatment Center handles 3 major programs: The Adult and Childhood Immunization Program, Communicable Disease, and the Lead Poisoning and Prevention Program (see **Environmental**). These programs are very time intensive with required reporting to the New York State Department of Health (NYSDOH).

2025 Highlights:

- *Partnered with Kellys' Pharmacy to provide vaccines to homebound residents with Medicare Part D.*
- *Utilized Mobile clinic van to expand services and outreach in the county*
 - *Mountaintop Library to vaccinate mountaintop residents*
 - *Established guidelines for blood pressure clinics and used the mobile van to provide BP screenings at Senior Club sites*
- *In-person outreach to providers for Immunization Quality Improvement for Providers (IQIP) continued.*
 - *Met and discussed strategies to improve vaccination rates their practices.*
 - *Conducted Adult detailing visits with local providers on all thing's immunization.*
- *Provided guidance to school RNs on interpreting vaccine records and reviewed the validity of medical exemptions with the goal of keeping kids in school.*
- *Administered vaccines in schools and in-home visits, allowing students to avoid exclusion and remain in school.*
- *Reconnected with newly established regional office for NYSDOH.*



Immunization

- Provided free of charge by the NYSDOH or on a sliding fee:
 - Vaccines for Children (all childhood vaccines)
 - Vaccines for Adults (common adult vaccines)
- Criteria to receive free vaccines:
 - Uninsured
 - Under Insured
 - Insured with Medicaid Managed Care

Adult Immunizations Offered

COVID-19	MPox
Hepatitis B	Pneumococcal
TwinRix (combined Hepatitis A & B)	RSV
Influenza	Shingles
MMR	Tdap

School Vaccinations:

- This year, Public Health worked with each school district to assist in getting students up to date with vaccinations.
- All Superintendents agreed to have Public Health vaccinate in school with parents' permission completed prior.
- Vaccinating RN's saw students at:
 - Catskill Elementary
 - Catskill High School
 - Coxsackie Elementary
 - Cairo Elementary
 - Cairo-Durham High School, and
 - Hunter-Tannersville Elementary

Communicable Disease (C/D):

- NYS requires Local Health Departments (LHD) to investigate and provide supporting documentation from providers for over 75 state reportable diseases to indicate that cases are correctly managed
- Staff processed 3,292 positive state reportable lab results

Rabies

	2024	2025
Human rabies exposure investigations	165	196
Human rabies post-exposure treatment given	24	24
		
Rabies vaccination clinics for animals	5	3

2025 Challenges

- Contracted Veterinarian practice was unable to perform all scheduled rabies clinics due to staffing shortages
- Burden of nursing time spent on disease investigations can be problematic when providers don't order full panel of labs consistent with CDC case definitions.
- Emergency departments not calling for authorizations for administering Rabies Post Exposure Prophylaxis
- The shift in the political climate with relation to vaccines offered confusion and hesitancy
- The lack of OB providers in the county limits our ability to educate pregnant Moms on the risks of lead poisoning in the home

Review of 2025 Goals

- **Contract rabies post exposure treatment out to EmUrgent Care:** *Not accomplished due to competing priorities*
- **Partner with Greene County Paramedics to provide in-home services where permitted by statute:** *Statute is still up for review with NYS legislature.*
- **Paperless Department:** *Completed*
- **Reduce nosocomial infections in camps settings:** *Completed, developed a training guide for camp counselors on signs and symptoms along with mitigation to reduce outbreaks in camps*

2026 Goals

- Expand point of care testing services for the van: blood sugar and cholesterol screenings
- Expand partnerships to camps/ski resort for health screenings prior to their season
- Expand the Seal A Smile to other county schools
- Meet with Town Board members throughout the county to expand outreach with the mobile van.
- Partner with local pediatricians to promote fluoride varnish at well visits for their patients

COMMUNITY HEALTH ASSESSMENT

Community Health Needs Assessment (CHNA) and Community Health Improvement Plan (CHIP)

The Community Health Needs Assessment (CHNA) is researched and written by Healthy Capital District and provided to the Local Health Departments in the Capital Region. Additional surveying directly to Greene County residents was completed regarding the needs of our community. The data provided from these reports guided Greene County, along with Columbia County and Columbia Memorial Health, to make choices to directly benefit our community. Greene County Public Health Department, Columbia County Department of Health, and Columbia Memorial Health make up the Columbia Greene Planning Partners, responsible for the creation, organization, and reporting on the Community Health Improvement Plan.

A total of 25 various health concerns were narrowed down into **three health topics** that most affected the community and have multiple areas of opportunity for improvement of resources for the community: nutrition security, suicide prevention, and tobacco/vaping prevention. Stakeholder meetings were an integral part in making the final decisions on topics chosen. The interventions chosen relied heavily on data from other community partners.

Review of 2025 Goals:

- **Develop new goals from the NYS Prevention Agenda under the new guidelines**
This goal was completed.
- **Involve community members and stakeholders to guide the goals of the upcoming CHIP**
This goal was completed.

2026 Goals:

- Work quarterly to gather/report local data from community programs in relation to the CHIP goals.
- Complete and submit the 2026 yearly report to NYSDOH.

Community Health Education

In 2025, Public Health aimed to be a trusted source of health information for residents via social media in response to the immediate needs as seen below:

Greene County Public Health Department
Published by JohnGreene WynneCounty · August 8, 2025 ·

Starting Sunday, heat & humidity with temps into the mid-90s are expected to impact the state through the week. Now is the time to prepare.... See more

EXTREME HEAT PLANNING TIMELINE

Pre-Season	A Few Days Out	During and After
Start planning before hot weather arrives. - Text your county or borough to 333111 to sign up for real-time emergency and weather alerts - Make a plan for power outages - Build an emergency kit - Check that your air conditioners and fans are in working order	If the forecast calls for extreme heat, be ready. - Gather food, water, and medication - Make a list of friends and family to check on and help them prepare - Know your local cooling shelters or other cool locations - Reschedule outdoor events	Remain vigilant and stay informed. - Stay in air conditioning and out of the sun if possible - Check on friends, family, neighbors, and pets - Drink plenty of water - Take breaks and use a buddy system if working outdoors

Greene County Public Health Department
Hazardous Weather and Emergency Services

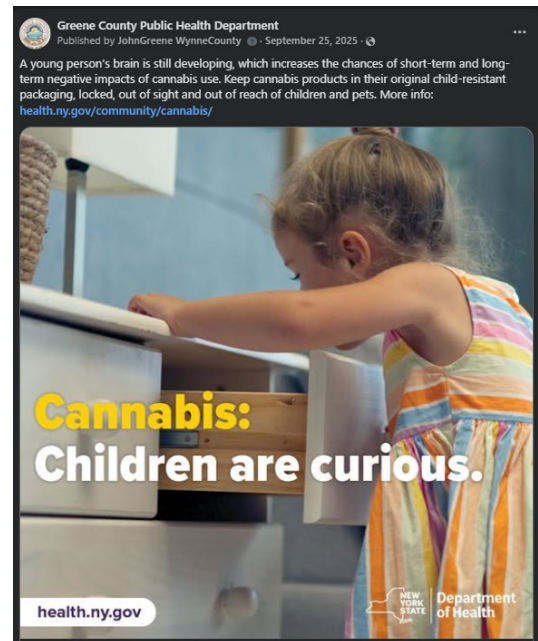
Greene County Public Health Department
Published by JohnGreene WynneCounty · September 24, 2025 ·

It's Child Passenger Safety Week - do you have your little ones in the correct safety seat? Be safe!

MOST PARENTS DON'T KNOW THEY ARE USING THE WRONG CAR SEAT. Do you?

AGES	0-2	2-7	4-12	8-ADULT
STAGES	REAR-FACING Infant (convertible) 3-in-1	FORWARD-FACING Convertible 3-in-1 combination	BOOSTER 3-in-1 combination/Booster	SEAT BELT
Key Points	Many babies outgrow infant seats before 2 years, and a convertible or 3-in-1 will be needed to continue rear-facing	Age is important: The younger children are, the more fragile they are, and the more protection they need.	Easy for you to use: Try out the features of the car seat, choose one that will make it easy for you to use correctly.	Do not move to this stage until the child fits the seat's user best properly, typically when 4' 9" in height
Additional Notes	Know the limits: Always follow the weight and height limits of the car seat.	Maturity matters: A booster is designed for child's mature enough and big enough to sit still in the proper position for the whole ride.	Fits your vehicle: Not every car seat can be installed correctly in every car. Try before you buy.	

Brought to you by New Car Seat Off <http://www.newcarseatoff.com/>



Greene County Youth Fair – July 24-26:

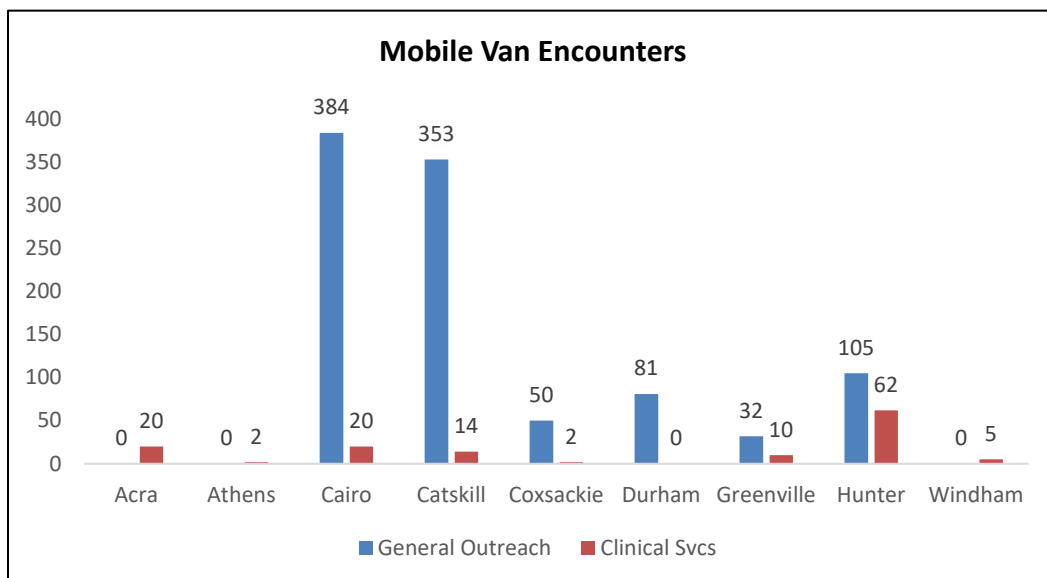
One of the largest events of the year, the Greene County Youth Fair, was incredibly successful in providing resources and education to the community this year. Games, prizes, and interactive stations increased the amount of time spent educating the community on health topics and resources available to them. These games and interactive stations are now part of our regular outreach tabling to provide the best interaction for everyone.

Performance Incentive:

NYSDOH launched the 2025 Performance Incentive to LHDs: Climate and Health. Specifically, this incentive focused on building capacity and awareness in local health departments and their jurisdiction in climate change and public health. NYS released a social media awareness campaign to be shared by all local health departments. Over 40 social media posts regarding the health effects of climate change were disseminated on Facebook and X (formerly Twitter) to approximately 7,000 followers.

Mobile Health Van

In 2025, our Mobile Health Van became much more visible in our community, providing access to health education, testing and treatment, access to birth control, blood pressure screenings, immunizations, and more. The Mobile Health Van frequented community events, such as Music in the Park, Farmer's Markets, summer camps, as well as local pharmacies and libraries.



Review of 2025 Goals:

- **Increase usage of mobile van in the community**
This goal was met and is continuing to increase due to the hiring of a Community Outreach Coordinator.
- **Increase local school and senior center educational programs**
Educational programs in schools increased, however there was not an increase in senior center outreach.

2026 Goals:

- Provide vaping education and cessation for local school staff, faculty, students, and parents.
- Increase community awareness and utilization of Mobile Clinic.

EMERGENCY PREPAREDNESS AND RESPONSE

2025 PHEP Highlights:

- ✓ Emergency Preparedness and MRC information disseminated at the New Baltimore Fire Department's Community Day, Coxsackie-Athens Mental Health Walk, Public Health's Youth Health Fair, Greene County Youth Fair, the Catskill farmer's market, kindergarten folders, Interagency Day at Columbia-Greene Community College, Senior Day, Public Service Job and Volunteer Expo at CGCC, and flu clinics reaching **955** community members.
- ✓ IHANS notification drills to GCPH staff and ServNY notification drills to Greene NY MRC volunteers
- ✓ Participated in Trunk-or-Treat at the Oak Hill Fire Department interacting with **81** parents and children
- ✓ **250** face masks were disseminated to the public
- ✓ Engaged our Medical Reserve Corps (MRC) volunteers to assist with **6** blood pressure clinics around the county at six separate senior sites

Trainings Provided:

- Stop the Bleed trainings provided to students at both Catskill High School, Greenville High School, Questar, and Columbia-Greene Community College reaching **133** students
- Stop the Bleed demonstrations at the Greene County Youth Fair
- Stop the Bleed and Naloxone training provided to **98** Highway employees from all over the county.
- Stop the Bleed and How to build an at home emergency kit at senior centers throughout the county reaching **42** seniors
- Naloxone training at Catskill High School with **34** Students
- AED and Narcan training were provided to all departments at 411 Main Street reaching **98** employees
- CPR and First aid were taught to Coxsackie and Cairo Girls Scout troops reaching **26** scouts
- There were **21** students trained in CPR
- Preparedness training was provided to **7** Catskill High School Students

459 people trained in 2025



2025 Goal Review:

- Start climate change outreach and education for the community.
 - 44 posts on climate change were posted to Facebook
- Complete the MRC Operations Playbook and Spontaneous Unaffiliated Volunteer Policy
 - Both policies are complete and in use

2026 Goals:

- Expand emergency trainings in more of the schools throughout the County.
- Engage the MRC volunteers in more community events

ENVIRONMENTAL HEALTH

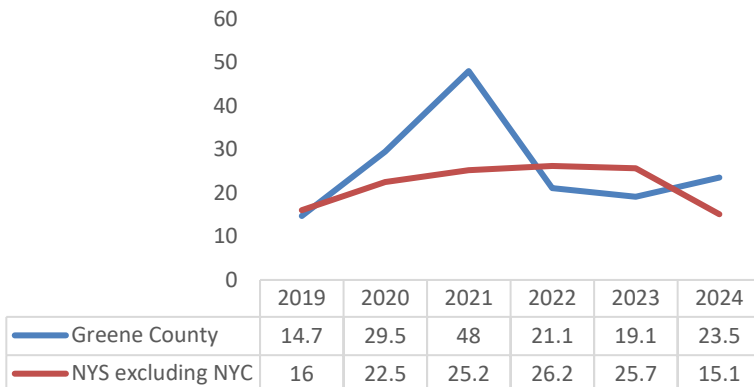
Overdose Prevention

Overdose deaths in Greene County declined dramatically in 2025. Only two overdose deaths occurred in 2025 compared to twelve in 2024. This improvement follows several years of elevated overdose mortality.

Overdose deaths peaked in Greene County in 2021, when the rate of opioid-involved overdose deaths was double the upstate New York average (46.3 per 100,000 vs. 23.5 per 100,000) and the county ranked 2nd among 57 upstate New York counties for opioid overdose deaths. By 2024, the rate had **declined by 51%** locally, and Greene County's ranking improved from 2nd highest to 4th highest among upstate counties.

State data is not yet available for 2025, but it is reasonable to anticipate that the dramatic decline in deaths will correspond to a significant drop in rank.

**Opioid Involved Overdose Death Rates
Greene County vs NYS (excluding NYC)**



In 2023, Greene County Public Health was awarded a 3-year federal grant in the amount of \$996,144 from the Bureau of Justice Assistance (October 2023 – September 2026). The aim of the grant-funded project is to:

- Strengthen collaboration between public health and public safety partners to decrease county-wide overdose rates.
- Decrease sub-county disparities in overdose death rates; and
- Identify and address substance use related disparities among at-risk and marginalized populations.

2025 Milestones

- Greene County Public Health's MAT program for buprenorphine treatment served **141** patients, including **61** newly enrolled patients.
- Maintained a [website](#) and online ordering form for shipping harm reduction supplies to Greene County residents. In 2025, 16 orders were received and completed.
- Moved the public-facing **Opioid Data Dashboard** from a partner website to Public Health's page on the County website. The dashboard includes information on overdose volume and fatality rates at the county and sub-county level, as well as demographics of overdose decedents and substances involved in deaths.
- Maintained the Overdose Spike Response Plan which details the role of Public Health in identifying and alerting stakeholders of potential overdose spikes.
- Offered the following trainings:
 - *Our Stories Have Power* to more than 20 residents with lived experience to promote advocacy among impacted community members.
 - *Caring for People Who Use Drugs* to county paramedics and EMTs.
- In partnership with Columbia Reentry, expanded case management and peer services for formerly incarcerated individuals in Greene County.
- Distributed 240 naloxone kits, 1200 fentanyl test strips and 1200 xylazine test strips.
- Developed program implementation plan and applied for funding to expand Hepatitis C testing and treatment.
- Continued routine monitoring and surveillance of overdose trends using data from ODMAP, paramedic electronic health records coroner/medical examiner records and developed a real-time fatal overdose reporting system for use by county coroners.
- Continued support of the Greene County Sheriff's Office Impacted Citizens Program (ICP). In 2025, of 108 incidents reported to the ICP, 96% were non-fatal overdoses and 41% of individuals had a known prior history of overdose. Public Health further supported the Sheriff's Office in providing a 40-hour Crisis Intervention Training and a Trauma Informed Policing training completed by more than 40 officers.
- Continued support of MAT program through grant funding for the prescriber and Medication for Overdose Use Disorder (MOUD) Patient Services and Linkage Coordinator and coordinated a rebranding of the "Family Planning Clinic" to "Greene County Community Health" to better advertise available services to potential patients.
- Continued coordination of the Overdose Fatality Review (OFR) Team and launched an interagency Recommendations to Action Workgroup to implement program and policy improvements informed by OFR findings.

2025 Funding Usage:

- Support MOUD treatment capacity at Greene County Public Health. Grant funds support salaries for the clinic prescriber, as well as the MOUD Patient Services and Linkage Coordinator who provides peer recovery services to people receiving treatment for opioid use disorder. Funds also support the Sheriff's Office Impacted Citizens program, which links people who've experienced a non-fatal overdose to MOUD services as appropriate. In 2025, a pilot expansion of Columbia Reentry services into Greene County was also launched to provide case management and peer services to people who've formerly been incarcerated and to link to MOUD treatment at the Health Department as appropriate.
- Expanded capacity for addressing the overdose crisis by law enforcement partners and other first responders. In 2025, funds were used to offer Crisis Intervention Training and Trauma Informed Policing training to law enforcement officers and the grant supported the purchase of a drug testing device that is available for real-time testing of substances found at the scene of fatal overdoses, or through other law enforcement encounters. Additionally, a harm reduction-informed training was offered to paramedics and EMTs covering substance use and overdose trends and best practices for treating overdose via patient-centered practice.
- Additional interagency strategies supported by the project include building harm reduction capacity and preventing overdose fatalities through coordination of an interagency Overdose Fatality Review Board, support of a community and peer-led Community Health Council, and advocacy training for community members and peers.

Additionally, the project convenes three stakeholder groups:

Overdose Task Force

- Made up of county department heads from:
 - Public Health
 - Mental Health
 - Social Services
 - Sheriff's Office Wellness Programs Representative
 - County Administrator Representative
 - Leads from paramedic agencies
 - Director of the Columbia-Greene Addiction Coalition
- Served as a steering committee that provided feedback on project implementation and activities.
- Received policy and service recommendations from the two subcommittees below to implement action plans to address recommendations.

Overdose Fatality Review (OFR) Subcommittee

- Provided comprehensive reviews of overdose decedent cases to identify gaps and opportunities and made recommendations for policy and service changes to prevent future overdose deaths.
- To date, the group has met five times and reviewed 9 overdose fatalities generating a summary of common themes across cases and recommendations to address service gaps and improve availability and uptake of available overdose prevention and substance use support services.
- An interagency *Recommendations to Action Workgroup* was launched in January 2025 and meets quarterly following full OFR meetings to develop action plans relating to OFR findings.

Community Health Council

- The former Health Equity Committee was relaunched as the Community Health Council. The group convenes peers and community members with lived experience to address stigma and inequities negatively impacting members of marginalized populations who use drugs.
- To ensure sustainability beyond grant funding, the council was transitioned to Columbia Greene Addiction Coalition with support and oversight by Public Health.
- The group is strengthening mission and capacity through formal training in community organizing to ensure people most impacted by addiction have an active role in creating positive community change.

Oneonta District Office:

In 1921 legislation was enacted that empowered New York State counties to create county health districts. The purpose of a county health district was to consolidate local authority for the oversight of public health work at the county level, rather than having public health activities dispersed to the constituent county cities, towns, and villages. Counties were not required to create such health districts, and as time passed, it became evident that many rural counties (including Greene) that had not formed a county health district would face increasing logistical and financial challenges that coincided with expanding public health needs and requirements. County health departments that operate in counties without county health districts are known as “partial services” county health departments.

As a matter of policy, not law, the New York State Department of Health (NYSDOH) addressed the need to preserve a baseline of public health in partial services counties by creating District Offices. Historically, District Offices have carried out environmental health protection programs in 21 counties that do not deliver environmental health services through county health departments. District Office staff ensure that suitable water, food, housing, and recreational facilities are provided to the public. Staff identify, investigate, and resolve actual and potential health hazards caused by environmental factors. Some of the programs protect the population at large, such as public drinking water quality, food safety in restaurants, bathing beach and swimming pool safety, as well as children's camps. Other programs are aimed at preventing illness in specific populations, such as lead poisoning prevention, migrant farmworker health, and reducing risks associated with smoking, vaping, and tanning. Currently, there are nine District Offices that operate in New York State, and in Greene County it is the NYSDOH Oneonta District Office (ODO) that provides the core environmental health programs and services to county residents and visitors.

In addition to conducting inspections at these operations, staff perform a myriad of other tasks involving these operations, including but not limited to, issuing operating permits, performing plan reviews, investigating complaints, providing training and education, performing pre-operational inspections, collecting water surveillance samples, completing illness investigations, and conducting enforcement activities. District office staff also conduct activities with jurisdictional mass gathering events, the Clean Indoor Air Act, realty subdivision planning and approval, regulated wastewater treatment systems, as well as emergency response.

Below is a breakdown of the Environmental Health Program inspections completed in Greene County in 2025:

Environmental Health Program	2025 Inspections	Environmental Health Program	2025 Inspections
Agricultural Fairgrounds	1	Migrant Farmworker Housing	6
ATUPA (Adolescent Tobacco Use Prevention Act) (Compliance Checks)	179	Mobile Food Service Establishments	2
Underage Compliance Checks ¹	119	Mobile Home Parks	2
Adult Compliance Checks ²	60	SOFA (Senior Citizen Feeding Site) Food Service Establishments	5
Bathing Beaches	5	Summer Feeding Food Service Establishments	9
Campgrounds	5	Public Water Systems (Sanitary Surveys)	77
Children's Camps	20	Community Water Systems (Sanitary Surveys)	11
Environmental Lead (Risk Assessments) ³	Details available in CLPPP quarterly reports	Non-Community Water Systems/ Transient Non-Community Water Systems/ Non-Transient Non-Community Water Systems (Sanitary Surveys)	66
*Food Service Establishments: High-Risk ⁴	138	**Swimming Pools	98
*Food Service Establishments: Medium-Risk ⁵	205	Tanning Facilities	2
*Food Service Establishments: Low-Risk ⁶	27	Temporary Residences ⁷	42

*Include Institutional Food Services

**Includes Recreational Aquatic Spray Grounds

- Underage Compliance Checks are unannounced purchase attempts of restricted tobacco or vapor products by an underage (<21 years) individual.

2. Adult Compliance Checks involve inspectors verifying that the remaining portions of NYS Public Health Law Article 13-F are in compliance, including but not limited to, prohibited flavored vapor products being offered for sale, storage & display requirements, out-of-package sales and distribution without charge or price reduction.
3. Risk assessments are environmental investigations of a private residence where a child with an elevated blood lead level resides. Childhood Lead Poisoning Prevention Program (CLPPP) reports are generated quarterly by the local health department.
4. High Risk Establishments serve potentially hazardous foods that require a great deal of onsite processing, including, but not limited to cooking, cooling, re-heating, and holding for service (hot or cold).
5. Medium Risk Establishments often serve potentially hazardous foods that do not require a lot of processing onsite. There is typically rapid turnover between preparation and service.
6. Low Risk establishments typically do not serve potentially hazardous foods with possible exceptions including prepackaged sandwiches, specialty items such as pickled meats or eggs, donuts, and other snack foods.
7. Temporary Residences are hotel/motel/cabin facilities.

Childhood Lead Poisoning & Prevention Program (CLPPP)

	2024	2025
Blood Lead Levels (BLL) processed through Lead Web	622	553
Reminder letters sent to parents to contact health care provider to test child for lead	649	622
Children with BLL over 5 µg/dl, requiring case management by Public Health Nurses and Environmental Staff	17	21
Children who met criteria for discharge	9	13

2025 Highlights:

Lead Education:

Educating parents about lead hazards prior their infants becoming mobile is essential, especially in older homes where simple daily action like opening or closing windows and doors can release fine lead dust. Many families are unaware that this invisible dust settles on floors and surfaces that young, orally-fixated children touch constantly.

To address this, our health department provided new parents with early lead-safety education, including printed materials and Q-tip testing swabs linked by QR code to step-by-step instructions for identifying lead on household items. A total of 186 parents participated and shared that the swabs were helpful and that learning basic cleaning methods made them feel more confident about reducing exposure.

The NYSDOH's Environmental Division reported to Greene County that 75% of local lead cases could be closed simply through consistent cleaning practices, underscoring how powerful early education can be. By reaching families proactively, rather than waiting until a child is already lead-poisoned, we were able to give parents practical tools, awareness, and peace of mind at a critical moment in their child's development.

Review of 2025 Goals

- **Requiring lead inspections for any home where young children will reside:** *This will require state or local legislation on rental homes where children reside. Staff were trained on the implementation of local laws and will continue to work on this goal.*
- **Pilot program for new moms regarding lead education/swabs** – Successful results among participants noting a 50% reduction in new lead cases in 2025 with advanced education.

2026 Goals

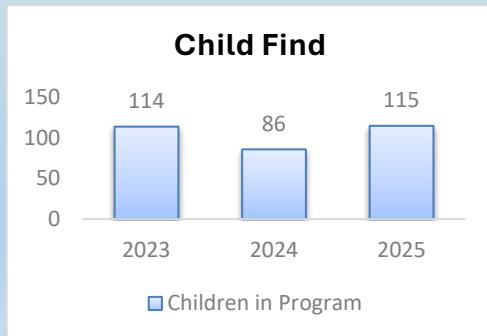
- Work with county legislature to educate on benefits of local lead registry law that will require lead inspections.
- Require lead inspections for any home where young children will reside

FAMILY HEALTH

Early Intervention

Child Find:

- Program requirement to track and provide developmental surveillance for “at risk” children who may be EI eligible
- All birth certificates are reviewed and families sent outreach material
- MCH nurse may identify children with potential developmental delays and refer with parental permission



Early Intervention (EI):

- A program for children from birth to age three that provides evaluations and services for those who qualify
- Services include:
 - Speech Therapy
 - Physical Therapy
 - Occupational Therapy
 - Social Work
 - Special Education
 - Service Coordination
- Referrals come from a variety of sources:
 - Doctors
 - Parents
 - Department of Social Services (DSS)
 - Other counties
- Voluntary participation (only with parental consent)
- Must be evaluated to determine eligibility according to NYS regulations
- Families are asked to provide health insurance information to cover program costs, but at no time incur any costs
- Average number of children in 2025: 55

Review of 2025 Goals:

1. Retain staff and hire a new Senior Administrative Assistant and Service Coordinator.

In 2025 we hired a new Senior Administrative Assistant in April and hired a new Service Coordinator in June. However, the Service Coordinator parted ways with the County at the end of the year for another opportunity.

2. Ensure therapists (Speech, Occupational, Physical, and teachers) have proper training and support from staff to be able to bill in the EI Hub with the goal of provider retention. Senior Administrative Assistant will successfully train and bill properly in the EI Hub for service coordination services.

Multiple barriers occurred with billing in the new EI Hub system that launched in 2024; the challenges with the new system deterred therapists from continuing to provide Early Intervention services. This is a statewide problem which the NYSDOH and NYSACHO are actively working on. Despite the EI Hub's challenges, staff was able to assist therapists with walking them through the billing process, however we lost many providers.

3. Creatively address provider shortages in Greene County so the needs of children can be met.

In 2025, five therapists stopped providing services to due to the challenges of the system. We continue to actively seek new providers and have worked closely with the Preschool program in recruitment.

4. Scan paper files into electronic records retention system.

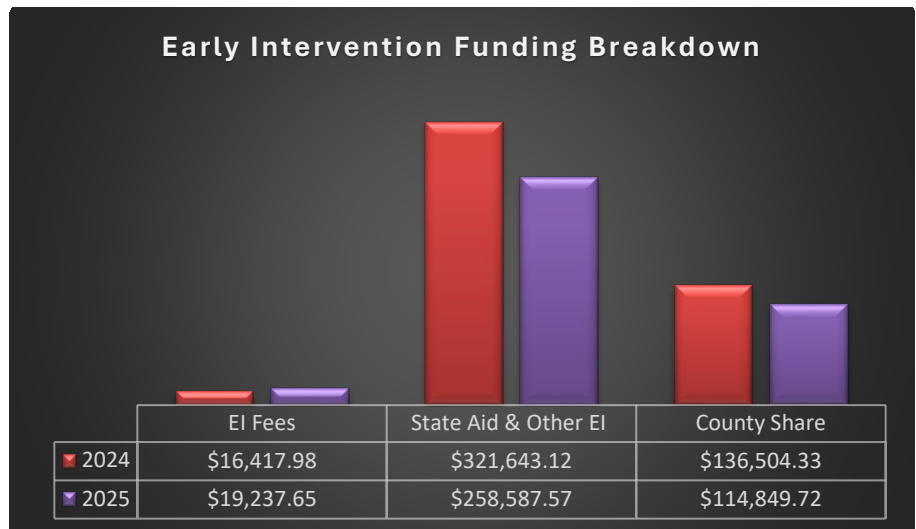
Working alongside the Records Management department, we have begun the process of scanning children's records into IQS (electronic record retention system). This will keep the records secure and allow for easy access, removing the need to keep paper charts. Retention schedules are assigned to each record once entered.

Goals for 2026:

- Supporting Greene County's new Head Start provider Astor by making referrals when indicated
- Staff will successfully train and bill properly in the EI Hub for service coordination services
- Creatively address provider shortages in Greene County so the needs of children can be met
- Update policies and procedures through collaboration with NYSDOH and other counties, with a focus on policies that are related to Greene County as a municipality

Here are a sample of comments from parent surveys from the past year:

- “Wonderful experience! Very knowledgeable, kind and listened to my concerns. I appreciate the staff that took the time to evaluate my child and provide me with the expertise that I was looking for.”
- “It was a nice experience where our child grew thanks to the provider and the help from the county.”
- “Very welcoming and professional manner enjoyed working with our coordinator at every meeting/call.”



Preschool Special Education

Highlights & Successes:

- Staff were trained on the new IQS Records Management system & have started scanning prior year records as part of the transition to a paperless file system.
- Three new provider contracts were established with an occupational therapist, a related services provider & an American Sign Language Interpreter Service for the hearing impaired.
- Created a brochure for parents of preschool-aged children explaining the referral process to obtain an evaluation if there were concerns about their child’s development.
- Collaborated with the Early Intervention & Children and Youth with Special Health Care Needs Programs in planning & organizing the first Greene County Youth Health Fair held May 31st, 2025. Preschool staff attended the fair & assisted parents in meeting vendors, answering questions, etc.

Review of 2025 Goals:

- 1. Complete staff training re: Medicaid billing, contract files & provider insurance/credentials.**
Staff training has been completed regarding Medicaid billing fundamentals, contract insurance requirements & provider credentials.
- 2. Continue to contract with additional providers to address service shortages.**
Contracts were successfully established with three new children’s services providers.
- 3. Encourage school districts to open preschool special education classrooms to alleviate the number of children waitlisted for this service.**
The Catskill Central School District applied and was approved by NYSED to provide a center-based preschool special education integrated program.

2026 Goals

- Contract with additional providers to address service shortages.
- Encourage school districts to open preschool special education classrooms to alleviate the number of children waitlisted for this service.
- Develop a collaborative working relationship with Astor Head Start regarding children’s services in Greene County, including encouraging Astor to seek NYSED approval for a self-contained preschool special education classroom in Greene County.
- Explore opportunities to leverage transportation through local school districts

Challenges:

Availability of Services:

Children continue placement on waitlists for the following services:

- Special Education Itinerant Teacher
- Related Services (Speech, Occupational, Physical Therapies, etc.)
- Center-Based Services & Evaluations

Classroom Availability:

- Classrooms providing Special Class Integrated Setting have yet to be replaced in Greene County and children continue to be waitlisted.
- A new grantee, Astor Services for Children & Families, is now operating the Head Start program in Cairo. A classroom serving “at risk” children is open. A toddler classroom and an infant room are also planned.
Astor is considering opening a special education classroom in the future, which would be a welcome addition in Greene County.
- Despite Circle of Friends opening a special class program in 2022, another is needed, as we still have children waitlisted for this service.

Transportation Availability:

- **Due to driver/aide shortages:**
 - Our contracted transporter continues to experience difficulties adding new runs, leading to children spending more time than appropriate on vehicles for their age.
- **To help shorten children’s times on vehicles:**
 - We actively encourage parents to assist with transporting their own children to school.
 - We also assist parents in finding places to meet the transporter along the route to school.
 - We work with our transporters and parents to find the most efficient bus routes for our children.



Preschool Special Education Partners:

School Districts (9):

Responsibilities include:

- Taking in referrals
- Tracking timeframes
- Sending out legal notices to parents
- Scheduling Committee for Preschool Special Education (CPSE) meetings
- Authorizing services to begin
- Sending copies of required documentation for children’s files

- Evaluators (18):

NYS Education Department (NYSED) approved Agencies and/or School Districts who assess a child’s developmental functioning

- Center-Based Programs (13):

Agencies that provide special education services in NYSED approved center-based classrooms.

- Related Service Providers

(15 Agencies/17 Individuals)

Teachers and/or therapists, either working individually or for an agency, providing services in a variety of settings throughout the county:

- Children’s homes
- Daycares
- Universal Pre-K classrooms
- Head Start, etc.

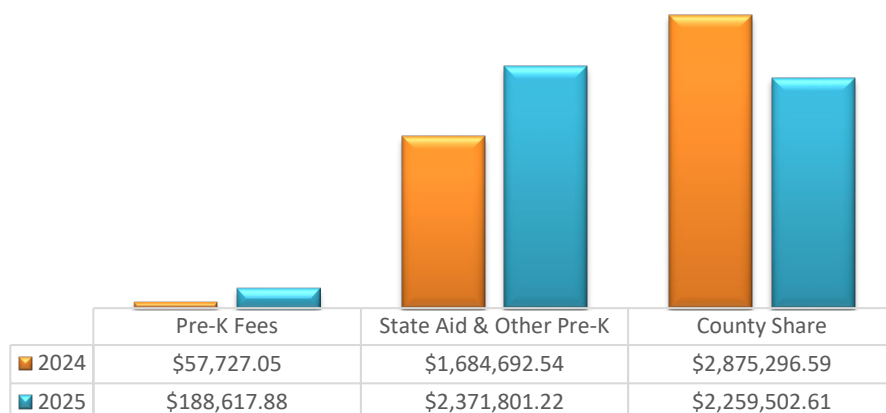
- Transportation Provider (1):

Company that bus children to their CPSE approved center-based programs

- Parents & Legal Guardians (Our Most Important Partners):

Provide the carry-over of recommendations by special education providers to help their children make progress toward their IEP goals.

Preschool Funding Breakdown



Trends Affecting Costs:

NYSED Mandated Costs:

Costs associated with the preschool special education budget over which the County has no control:

Tuition rates for center-based programs (set by NYSED)

- 2024 costs ranged per child between:
 - \$33,770.00 to \$57,978.00 for a 10-month (regular year) special education program
 - \$5,628 to \$9,663.00 for a 6-week Extended School Year (ESY) or summer program
- 2025 costs ranged per child between:
 - \$38,342.00 to \$64,586.00 for a 10-month (regular year) special education program:
 - \$6,100.00 to \$10,293.00 for a 6-week Extended School Year (ESY) or summer program
- Chargebacks that may be unrelated to preschool services.

Cost Saving Measures:

- Encouraging parents to provide transportation to center-based programs for their children.
- Encouraging school districts to provide assistive technology devices for children through grants or equipment loans.
- Promoting participation in regular Head Start classrooms, Universal Pre-K programs at school districts, preschool programs, and daycare settings at CPSE meetings. These programs provide opportunities for related services to be provided in the least restrictive environments for children as a less costly alternative to center-based programming when appropriate.
- Encouraging service providers to contact Greene County & the school district once a child's goals are accomplished, as opposed to waiting until the annual review meeting for declassification.
- Monitoring school districts and evaluation agencies to ensure *bilingual evaluations* are completed to guarantee that children are not classified as disabled due to speaking a language other than English.

Children and Youth with Special Health Care Needs (CYSHCN) Program:

- Provides resources/referrals to families of children, birth through age 21, with a diagnosed disability/medical condition
 - Examples include autism, Down syndrome, hearing loss, and diabetes
- This grant supports families on their child's journey, rather than providing direct services.

Review of 2025 Goals:

- 1. Partner with Cornell University to provide technical assistance and enhance and expand the resources we can provide for families.**

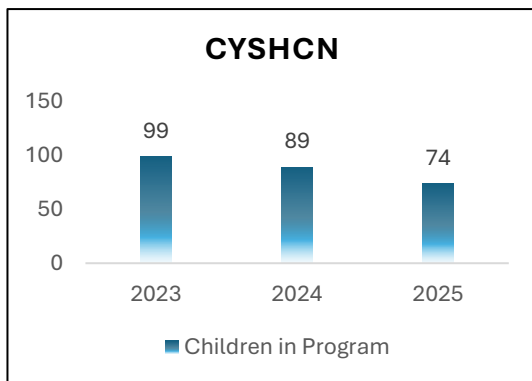
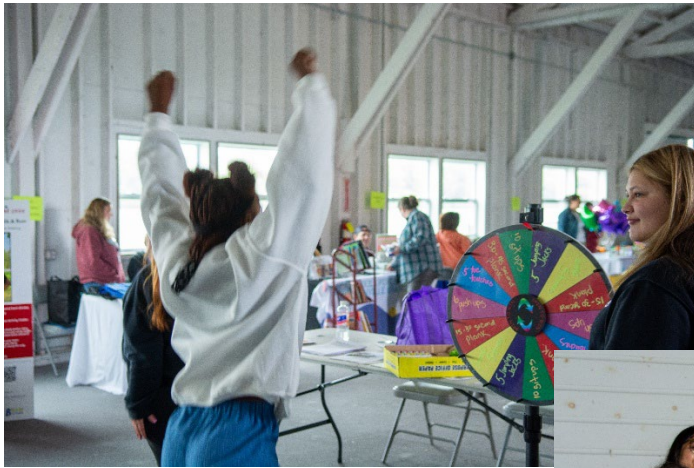
Public Health Staff met with technical advisors from Cornell to complete required grant deliverables. This engagement has been very helpful in guiding the work of the grant. An example is the use of onetime special project funding which will be used to purchase Caroline's carts for families to shop in Greene County Grocery stores more simply with their children.

- 2. Complete a survey of families to determine their unmet needs.**

Families in the CYSHCN program were surveyed in 2025 and asked where the best locations would be for them to access Caroline's carts. The number one choice was grocery stores.

- 3. Host a successful Family Engagement Event titled "Youth Health Fair" for CYSHCN families on May 31, 2025.**

Staff from all branches of Public Health worked together to plan and implement the first ever Youth Health Fair in May 2025. There were 96 community members and 26 vendors who braved the flooding rain at the Historic Point. The children were engaged with face painting, fingerprinted by Sheriff's, entertained by the K9 demonstration, and petting goats. Parents were able to visit and receive resources from the vendors. The most visited vendor was the Autism Society, where families were connected to scarce resources. A majority of the 19 families surveyed that day said they had heard of the program and had accessed services. When asked about gaps, most indicated a need for OT, followed by PT, Speech, transportation and social work.



2026 Goals:

- ✓ Roll out the Caroline's cart program to the grocery stores of Greene County, with paid advertising to raise awareness for parents and families
- ✓ Educate dental providers in Greene County about the need for neurodiverse dental care procedures

