

**Jefferson County
Public Health Service**

Annual Report 2020



*Jefferson County
Public Health Service*

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Jefferson County Public Health Service

Mission

Empowering people to prevent illness, promote resiliency, and protect the well-being of Jefferson County residents and visitors.

Vision

People living in a safe and healthy environment.

Values

*Access for all · Caring · Excellence · Integrity · Teamwork
ACE IT!*



Jefferson County Legislature

2020 Health and Human Services Committee

John Peck, Chairman
Alan Drake
Anthony Doldo
Robert Ferris

Corey Grant
Scott Gray
Jeremiah Maxon
James Nabywaniec

2020 Health Services Advisory Board

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Richard Duvall
Stephanie Graf
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Maya Lundborg-Gray, MD
Anita Seefried-Brown
Stephen Todd
Jason White, MD
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Roger Ambrose
Ginger Hall
Stephen Jenningsl
Robert Kasulke, MD
Sheri Palmer

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Administration

COVID-19 Pandemic Response

The department participated with the State of New York to manage the COVID -19 pandemic response locally. The strategy for management of the virus was fourfold: population density reduction, identify and isolate positive cases, quarantine contacts to positive cases, and surge capacity for medical services. A fifth strategy is now beginning: vaccination. Guidelines issued by the U.S. Centers for Disease Control, New York State and/or the New York State Department of Health, and the Jefferson County Public Health Service were regularly released to the public for up-to-date education and awareness. Jefferson County's first positive COVID-19 case happened 3/17/2020.

In July 2020, the department formed a partnership with the City of Watertown to submit wastewater specimens to Quadrant Biosciences in Syracuse to test weekly and determine COVID-19 quantifiable prevalence in the city and surrounding communities that utilize the city's wastewater treatment facility. The city's wastewater treatment facility services approximately 55,000 people. In the samples tested 11/17/2020, quantifiable COVID-19 virus was present in influent points A & B of the city's wastewater facility. These reports were in line with the spike in cases happening in Jefferson County during the last quarter of 2020 and were an accurate prediction of increased cases and hospitalizations in future weeks.

Jefferson County's first COVID-19 death happened 7/30/2020. As of 12/31/2020, 2,225 Jefferson County residents have tested positive for COVID-19; 1,769 recovered; 75 were hospitalized; and 13 residents died from COVID-19. Vaccinations began mid-12/2020 for Phase 1A health care personnel and first responders.

Public Health Accreditation

Efforts to pursue Public Health Accreditation Board (PHAB) accreditation were temporarily paused due to the significant resources required to respond to the COVID-19 pandemic. The department plans to pursue accreditation post-pandemic.

2019-2021 Strategic Plan

The Strategic Plan workplan aligns with the CHA and CHIP, as well as the departments QAPI plan. Strategic goals to achieve by the end of 2021 include increase recruitment and prioritize retention of staff; improve organizational culture and quality through communication, teamwork, and support; and increase health equity by maintaining and increasing the quantity and quality of services provided. While the department's focus shifted fully to pandemic response, some aspects of the strategic plan goals were able to be addressed if only in the context of addressing pandemic requirements.

Quality Assurance/Performance Improvement (QAPI)

Even with the challenges of managing the COVID-19 pandemic, the department continued operating its Quality Assurance/Performance Improvement (QAPI) structure, with Quality Management (QM) meeting bi-weekly to discuss department priorities and emergent issues. The Continuous Quality Improvement (CQI) meeting continued bi-weekly to discuss patient care priorities. QAPI Public Health committee met quarterly to discuss communicable disease, clinic, health promotion, and public health emergency preparedness priorities. The QAPI Finance committee met quarterly to discuss department financial priorities, corporate compliance, and other pertinent issues. The QAPI Home Care committee overlaid with QM/CQI meetings to stay current and discuss home healthcare priorities and issues.

Corporate Compliance

Laws and regulations governing the department were continuously reviewed to ensure corporate compliance. Led by the DSRIP Corporate Compliance Committee, vendor services secured through The Compliancy Group—The Guard to provide federally compliant privacy and security policy templates, as well as guidance to ensure the department’s policies and security systems were appropriate were continued through 2020. The Compliancy Group reformatted the privacy and security policies for easier use by agency staff. There were no amendments to any federal or state regulations and laws. With the reformat, one privacy policy changed, three privacy policies were added, and four security policies were added. The Compliancy Group also worked with the department to ensure annual Security Audits were completed. The senior Public Health Planner serves as the department’s corporate compliance officer (CCO). The Director of Public Health serves as the department’s privacy officer. The Jefferson County Director of Information Technology serves as the security officer. The CCO ensures policies are updated and accessible for all staff, ensures staff adhere to compliance requirements in daily work, administers annual training for all staff of the department, and tracks all staff trainings to ensure completion and adherence to regulatory requirements. The CCO is also an active member of the regional DSRIP Corporate Compliance Committee.

Health Planning

Community Health Assessment/Community Health Improvement Plan 2019-2021

The New York State Department of Health waived requirements for local health departments to complete Community Health Improvement Plan (CHIP) progress through the COVID-19 pandemic. However, the department and 3 hospital partners in Jefferson County managed to implement some aspects of the CHIP.

Specific CHIP prevent chronic diseases objectives included increasing the percent of those identified as being nicotine dependent receiving tobacco use counseling from 10% to 7%; increase the number of practices/providers that implement a vaping screening tool at the point of primary and ED care from zero – contingent on establishing a screening tool for vaping; increase the number of participants completing evidence-based self-management

programs (EBMSP) 5% from 407; increase the number of participants completing National Diabetes Prevention Program (NDPP) 10% from 11.

Progress toward prevent chronic disease objectives in 2020 included continued community-wide education regarding tobacco prevention; some tobacco cessation programming continued in hospital primary care clinics, but much had to be curtailed because of the pandemic; some clinics began to screen and assess for vaping at visits, and two hospital primary care clinics developed vaping screening tools within their EHRs. 8.6% of those identified as being nicotine dependent received tobacco counseling in the primary care setting. 30 persons were trained in screening tools for vaping. 32 practices reported having a vaping screening query in their EHRs established. Of all patients screened, 10.8% reported active vaping. 181 patients participated in chronic disease evidence-based self-management programs (EBSMP). 145 patients received diabetes self-management education (DSME). 24 patients were referred to the National Diabetes Prevent Program (NDPP) at the Watertown Family YMCA; 2 classes were held.

Specific CHIP promote well-being and prevent mental and substance use disorders objectives included increase the number of unique patients receiving SBI screening by 5% from 12,703 patients; increase the percentage of those diagnosed with an opioid use disorder receiving Medication Assisted Treatment (MAT) from baseline to be established in 2020; increase the percentage of those diagnosed with an opioid use disorder receiving treatment from baseline to be established in 2020; decrease the opioid analgesics prescription for pain, age-adjusted rate by 5% from 608.4 per 1,000 population to 578.0 per 1,000 population; and increase the percentage of adults who are aware of a suicide prevention resource by 3% annually from 74% to 80%.

Progress toward promote well-being and prevent mental and substance use disorders objectives included 10,504 unique hospital primary care clinic patients receiving and Alcohol Screening and Brief Intervention (SBI) screening, and 242 patients referred to treatment as a result of the SBI screening. 613 patients were diagnosed with an opioid use disorder (OUD). 31.2% of those with an OUD reported receiving treatment; 10.3% of those with an OUD were documented as receiving medication assisted treatment (MAT). The number of providers in Jefferson County as of 2020 providing MAT is 21. There were 13 Question, Persuade, and Refer (QPR) Gatekeeper trainings held in the county to support individuals in preventing suicides. 73% of adult surveyed Jefferson County residents agreed that they were aware of at least one suicide prevention resource. 8.3% of adult surveyed Jefferson County residents reported that they referred somebody to suicide prevention resources or accessed the resources themselves in the past year.

The specific CHIP promote healthy women, infants and children objective was that at least 75% of children 0-6 will receive fluoride varnish treatment (FVT) at every well-child encounter from their pediatric primary care provider. This section of the CHIP was deferred until at least 2021 due to the COVID-19 pandemic.

The specific CHIP prevent communicable diseases objective was to increase vaccination rates 6% annually from the baseline rate of 13 year olds that complete age-appropriate HPV vaccine series as reported in NYSIIS 13.60% (2018) to 16.20% (2020).

Three dental practices received public health detailing visits to promote and encourage HPV vaccinations in the primary care setting with patients and parents. 2,362 HPV vaccines were provided by hospital primary care clinic practices. 10.60% of 13-year-olds had completed an HPV vaccine series.

Jefferson scored 31st healthiest New York State county in 2020 as part of the national Robert Wood Johnson Foundation County Health Rankings. Jefferson scored 31st for Health Outcomes and 49th for Health Factors. The County Health Rankings can be viewed at www.countyhealthrankings.org.

Community Health & Health Promotion Programs

General Prevention

The Health Promotion staff facilitated community health educational programs regarding numerous topics to organizations, schools, worksites, and community settings. Thousands of individuals were reached through program and media outreach. The department actively utilizes Facebook to reach the public and almost doubled the number of followers due to the COVID-19 pandemic.

Governor's Traffic Safety Committee

The department continued Governor's Traffic Safety Committee programming, which coordinates traffic safety activities and shares useful, timely information about traffic safety and the state's highway safety grant.

Radon

The department received radon grant funding to provide home test kits and public education through 2020. 94 kits were distributed in 2020. Numbers of kits testing above the EPA actionable level of 4 pCi/L remain pending.

Child Find Program

The Child Find Program continued as a state-funded program that is connected to, and part of Early Intervention. The goal is to improve the identification, location, referral to care and follow-up of infants and toddlers age 0-3 who may be at risk for physical and developmental disabilities and/or delays.

Childhood Lead Poisoning Prevention Program

The CLPPP continued to review and follow-up on all lead level results for children 6 months to 6 years of age. Primary care providers are responsible for lead screening of children at 1 and 2 years of age. Public Health offers lead screening at Wednesday clinics by appointment. Children found to have elevated lead levels receive case management including: completion of risk assessment; education regarding source of lead exposure and risk measures; appropriate referrals to Child Find, Early Intervention, and when appropriate, New York State Department of Health for environmental follow-up; home visits; and notification of need for follow-up lead testing. The blood lead levels identified at or above 5 mcg/dl were regulated to have interventions performed by the department and the Watertown District Office of the NYSDOH. The increase in cases who are receiving care coordination continues to expand.

Children and Youth with Special Health Care Needs (CSHCN)

The CSHCN program continued as a resource and referral to assist families in connecting them to resources in the community for children from birth to age 21. Coordinate diagnostic and treatment for medical to all children who are believed to have physically disabling conditions or serious chronic illnesses.

Keep the North Country Smiling

The Keep the North Country Smiling (KNCS) coalition continued its work to advance oral health care in Jefferson, Lewis, St. Lawrence and Oswego Counties through a 2017-2020 work plan. Much of the workplan paused due to the COVID-19 pandemic. There were no reported anti-fluoridation activities in 2020, and the department continued to promote access to community water fluoridation by making municipalities aware of funding through the NYSDOH to repair and replace outdated fluoridation equipment, as well as to purchase equipment to establish community water fluoridation. Pediatric dental practices continued to be encouraged to educate children and families about the importance of HPV vaccine to prevent oral cancers as a standard of care.

The department completed public health detailing visits to 3 dental practices regarding the importance of HPV vaccine to prevent oral cancers, and as a standard of care.

Alliance for Better Communities

The department remains extremely active with the Alliance for Better Communities, Jefferson County's Drug-Free Communities coalition, and has engaged all community sectors to address substance use problems on multiple fronts. In addition to public education campaigns, advocacy continued with members of the U.S. Senate and House of Representatives, and NYS Senate and Assembly highlighting the substance use problems happening in Jefferson County, what the needs and priorities are, and how local response is being implemented. Data indices continued to track and chart the growth of this problem locally. Overdose deaths increased 70% over 2019 with a significant increase in deaths caused by fentanyl.

Disease Control

Communicable Disease Reporting and Control

Surveillance for communicable diseases continued. Communicable Disease Control nurses took the lead role in responding to the COVID-19 pandemic, including contact tracing, isolations, and quarantine. In addition to COVID-19 cases, leading Jefferson County communicable disease indices continued to be Sexually Transmitted Infections (STI), respiratory, and food-borne generated disease. Communicable disease nurses continued to respond to various disease exposures, including Hepatitis A and B and rabies prophylaxis. Overall STI indices remained stable in 2020 but were slightly higher in what has been a trend upward in Jefferson County, New York State, and nationally at significant rates. Educational efforts to address and control STIs are focused on prevention and increasing screening with particular attention on high-risk populations. The STI Coalition continues to address the increasing numbers of STI cases by coordinating targeted prevention messages utilizing paid social media ads, as well as educating providers on appropriate follow-up with STI patients. Weekly immunization and STI clinics continued.

Immunization Services

Immunization Clinic was offered every Wednesday from 12:30 p.m. until 3:30 p.m. The clinic is by appointment only. Infant, adolescent, and adult vaccines that are required and recommended were offered. Additionally, the department provides Travel Health Services immunizations for individuals going to foreign countries. Vaccine categories for Travel Health include routine, recommended, and required. Nurses discuss which vaccines are appropriate using CDC guidance with each patient. Vaccinations began mid-12/2020 for Phase 1A health care personnel and first responders.

Rabies Control

Rabies control activities continued, encompassing exposure follow-ups for humans and domestic animals through contact investigations, pre and post-exposure treatments, animal confinements and quarantines, laboratory specimen submissions, vaccination clinics for domestic animals, and community education.

Vector Control

The department continued to provide public education regarding avoidance of Lyme and other tickborne diseases. Additionally, the department provided public education regarding mosquitoes and how to minimize risk for mosquito-borne diseases.

Home Health Care

The Certified Home Health Agency provides multiple in-home care services such as nursing, home health aides, physical therapy, occupational therapy, medical social worker, registered dietician, and case management to patients throughout Jefferson County.

The Home Health Care Programs received 1,441 referrals and provided 16,265 visits to 812 patients over 9 disciplines of care in their homes throughout the year. Public Health Nurses made visits to 4 maternal/child health (MCH) clients. MCH client visits are included in the Home Health Care program statistics.

Home Health Care Programs continued its focus on reducing re-hospitalization of patients. Key areas focused on included patients having either congestive heart failure (CHF), myocardial infarction (MI), chronic obstructive pulmonary disease (COPD), pneumonia, or diabetes as their primary diagnosis. The agency's re-hospitalization rate for 2020 was 15.09%.

2020 National Patient Satisfaction Benchmark System findings for JCPHS home health care patients showed of 544 patients surveyed, 180 responded (33%) with 86% rating their care 9 or 10 on a scale of 0-10; 83% would definitely recommend; 87% satisfied with care received; 84% satisfied with communications about care provided; and 81% satisfied with specific care issues. Satisfaction was essentially stable in all categories over 2019.

Emergency Medical Services

The EMS unit coordinates education programs, systems response planning, support services, quality improvement, and public health preparedness with other emergency and public safety providers, hospitals, agencies and committees. Lewis, St. Lawrence, Oswego, and Onondaga County interactions are maintained. The unit sponsored 13 courses in 2020.

Overdose Alert

The department issued 5 Overdose Activity ALERTs between the months of June – September in 2020, notifying the public that at least 4 overdoses from drug use had occurred within a 24-hour period, with narcotics the suspected primary drug. The department obtained real-time information from first responders, who in late 2019 began using the ODMAP reporting system to submit information from the field on overdoses. The data goes first to the EMS unit, which evaluates the information to use for public notification. The Director of Public Health and District Attorney then together approve issuing the ALERTs.

Public Health Emergency Preparedness

Public Health Emergency Preparedness and Response (PHPR) continued to be a major priority for the department. Significant efforts were organized for local response to the COVID-19 pandemic. Efforts included educating the public to be prepared in the event of an emergency and providing health professionals and citizens to serve as volunteers in Jefferson County communities during health-related emergencies. The department also continued to work with regional, State and Federal levels to assure the most effective response possible to health emergency threats in Jefferson County and the North Country. The department is an active member of the Central New York Alliance, which meets periodically to address preparedness plans and deliverables and discusses coordination of potential response activities regionally. The department is also an active participant with the Central New York Medical Reserve Corps,

which provides opportunities for health professionals and citizens to serve as volunteers during health-related emergencies.

Medical Examiner

The Jefferson County Medical Examiner's (ME) Office is authorized to investigate deaths that fall under [New York State County Law, Article 17A, Section 670](#). The ME Office goal is to provide answers for those affected by sudden and traumatic loss, and help improve the public health, safety and well-being of all Jefferson County residents.

The ME continued to investigate deaths that fell into categories outlined in County Law where the public interest is served by explaining cause and manner of death.

Once Medical Examiner jurisdiction is established, it is the Office's responsibility to determine the cause and manner of death, produce an autopsy report, and issue a death certificate. The cause of death is the disease process or injury that results in the person's death. The manner of death indicates how the death occurred and includes designations of accident, homicide, natural, suicide, or undetermined. Of 34 confirmed overdose deaths in 2020, 26 were attributed to opioids.

2019-2020 Annual Data

Community Health	2019	2020
Child Find		
Referrals	181	163
Cases	38	101
Childhood Lead Poisoning Prevention Program		
Provider Screens	2,605	2,350
Pb>10+ mcg/dl	45	37
Pb 5-9 mcg/dl	95	118
Children with Special Health Care Needs		
Total children served (<21 years of age)	31	28

Health Promotion	2019	2020
CHIP Health Education Indicators		
Educational Events	77	12
Individuals Reached	70,766	116,721
School Classroom Presentations	12	0
Number of Facebook "Likes"	7,748	14,420
Number of Twitter Followers	241	275
Number of Instagram Followers	395	699
Provider Educational Events	18	9
Providers Reached	379	296
Press Releases Completed	17	340
Number of Social Media Campaigns Conducted	4	2
Governor's Traffic Safety Committee		
School Districts Reached	4	1
Individuals Educated	61,606	14,490
Number of Events	12	2
Number of Presentations	10	0

Disease Control	2019	2020
COVID-19	-	2,225
Hepatitis*	139	98
Hepatitis A	28	2
Hepatitis B, Chronic	10	8
Hepatitis B, Infant Perinatal	2	1
Hepatitis C, Chronic	92	85
Hepatitis C, Acute	7	2
Influenza	382	461
Influenza A	337	199
Influenza B	41	261
Influenza Unspecified	4	1
Lyme Disease	42	33
Pertussis	99	4
Sexually Transmitted Infections	930	959
Chlamydia	822	712
Gonococcal	-	1
Gonorrhea	96	236
Lymphogranuloma Venereum	1	0
Syphilis	11	10
Tuberculosis	2	1
All Other Reportable Diseases	260	189

*Hepatitis A = spread through stool; Hepatitis B = spread through bodily fluids; Hepatitis C = spread through blood.

Jefferson County Public Health Service - Diagnostic & Treatment Center Services	2019	2020
STD/HIV		
Number of Clinics	104	28
Number of STD Visits	327	115
Number of HIV Visits	187	42
Number of HCV Tests (Hepatitis C)	64	14
Total Number of Clients	246	48
Tuberculosis		
Number of Skin Tests – PPDs	367	202
Number of Active Cases Monitored	0	0
Number of PPD Converters	11	4
Number of Client Visits	12	0

Jefferson County Public Health Service - Diagnostic & Treatment Center Services (cont'd.)	2019	2020
Immunization		
Number of Clinics	50	75
Number of Clients	1,107	667
Total Vaccines Administered	1,496	1,138
Hepatitis B		
Number of Adults	8	5
Total Hepatitis B Administered	23	16
Influenza		
Total Influenza Administered	489	246
Pneumococcal		
Total Pneumococcal Administered	60	46
Prevnar 13	40	35
Pneumovax 23	20	11
Travel Health Services		
Number of Clients	94	21
Number of Visits	108	24
Total Vaccines Administered	140	32
Rabies Exposures		
PRE-Number of Veterinary Practice Personnel	1	3
Number of Doses	1	5
Number of Titers	24	0
POST-Total Exposures	92	49
JCPHS Clients Served	1	0
JCPHS HRIG Doses Administered	1	0
JCPHS HDCV Doses Administered	4	0
Hospital Clients Served	91	49
Hospital HRIG Doses Administered	89	49
Hospital HDCV Doses Administered	357	193
Total Doses HRIG	90	49
Total Doses HDCV	361	193
Total JCPHS Doses HDCV (Nos. 2-4)+	0	0
Total JCPHS D&TC Patient Visits	3,163	1,551

Jefferson County Public Health Service - STD Program Submissions for Testing	2019	2020
Syphilis	133	68
Chlamydia	247	103
Gonorrhea	247	103
HCV (Hepatitis C)	64	14
HIV	187	42
TOTAL	878	330

Jefferson County Public Health Service – Vector Control Program	2019	2020
Human Surveillance		
Lyme Disease Investigations – Confirmed & Probable*	32	6

*Jefferson is now a sentinel county per the NYSDOH as it has had 3+ consecutive years of >50 cases. As a sentinel county, the department now receives only one-fifth (20%) of ECLRS reports annually to investigate.

Rabies Testing	2019	2020
Jefferson County Public Health Service – Animals Submitted	117	82
Partner Agency (Fort Drum, NYSDEC) – Animals Submitted	218	193

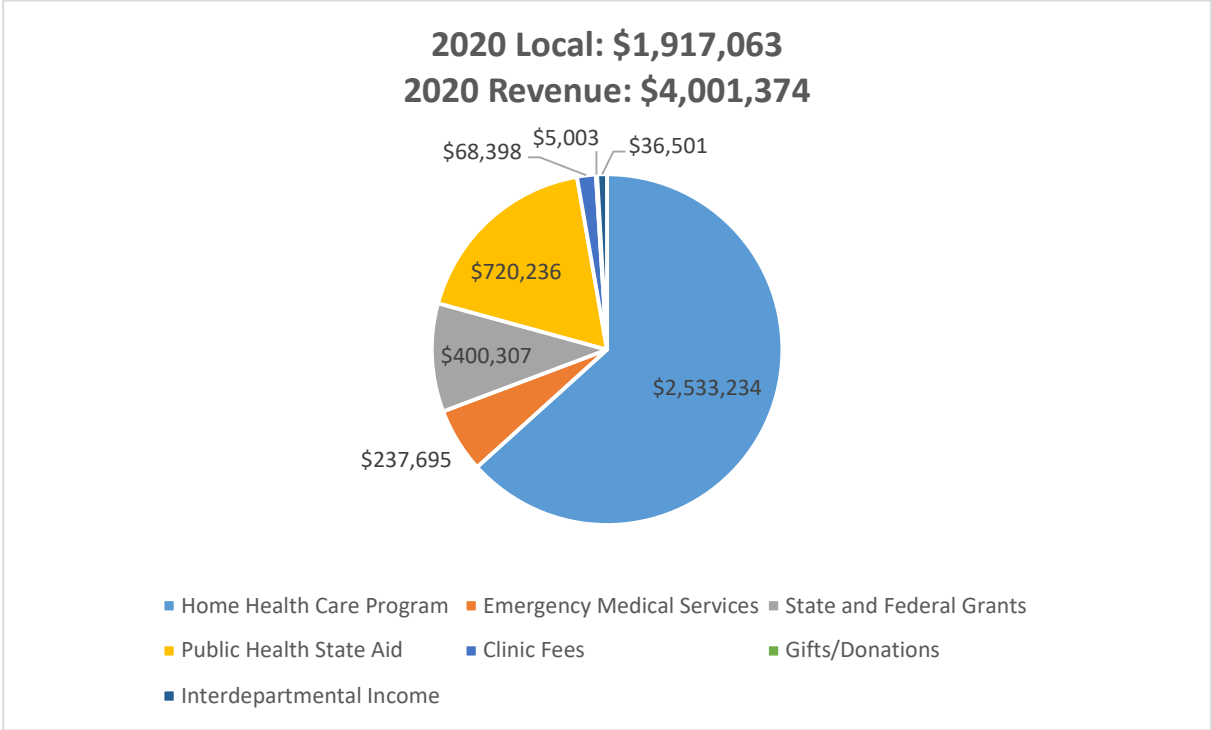
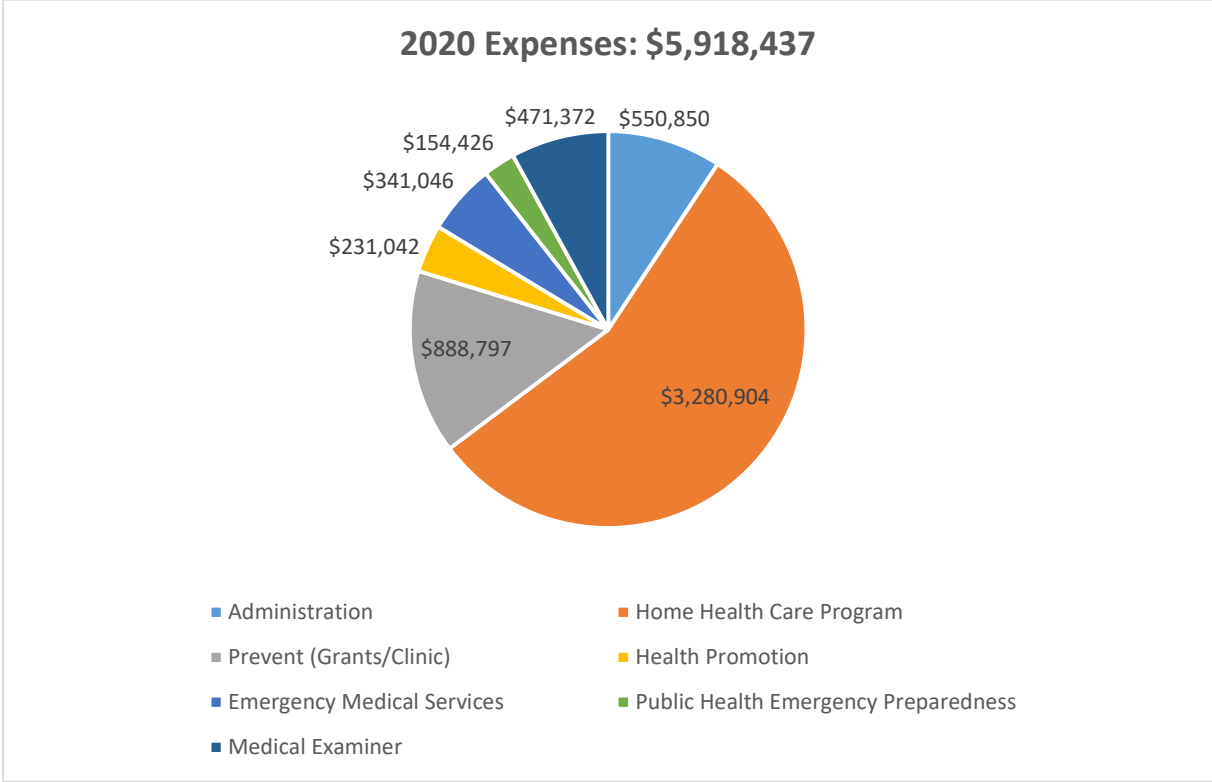
Rabies Vaccinations	2019	2020
Village Clinics		
Dogs	237	159
Cats	112	88
Ferrets	1	0
TOTAL Village Clinics	350	247
Dog Control Clinics		
Dogs	376	213
Cats	155	75
Ferrets	8	0
TOTAL Dog Control Clinics	539	288
TOTAL VACCINATIONS	889	535

Home Health Care	2019	2020
Referrals	1,781	1,441
Cases	1,012	812
Average Daily Census	166	139
Visits By Discipline		
Nursing	9,794	8,168
Home Health Aide	4,400	2,096
Physical Therapy	4,450	4,338
Occupational Therapy	686	858
Nutrition	152	214
Medical Social Worker	713	591
TOTAL Visits	20,195	16,265
EMS Courses		

Emergency Medical Services	2019	2020
Number of Courses	13	13
Number of Students	124	230
EMS Calls	22,151	21,925

Medical Examiner	2019	2020
Causes of Death		
Natural Death	82	89
Accidental Death	38	53
Suicide	24	11
Homicide	0	0
Pending Investigation	0	0
Consultation	0	0
Undetermined	7	6
Cases		
TOTAL	151	159
Total with Autopsy	112	105
Total without Autopsy	39	54
Autopsy to Case Ratio	74	66
Total Scene Investigations	9	5

Schedule of Expenditures and Revenue



2020 Staff

Management

Ginger Hall, Director of Public Health
Lisa Cooley, Director of Patient Services
Bert Burnham, Public Health Fiscal Director
Heather Campbell, SPHN
Troy Mitteer, SPHN
Gayle Seymour, SPHN
Tina Siembida, SPHN

Medical Director

Robert Kasulke, MD

Nursing

Megan Aguilar, RN
Patricia Barton, PHN
Cathleen Biggs, RN
Kellie Bowhall, LPN
Scott Comstock, RN
Brandi Crutchfield, RN
Erna Davidson, RN
Candice Gozalkowski, RN
Susan Harris, RN
Sandra Horning, LPN
Kathleen Hunter, RN
Joyce James, RN
Yuliya Labko, PHN
Tamie Langdon, RN
Cynthia Mills, RN
Mandy Parker, LPN
Klarissa Parsons, RN
Sharon Riley, RN
Katherine Schuessler, PHN
Michelle Tharrett, LPN
Amy Wonderly, RN
Laurie Woodward, PHN

Home Health Aide

Beverly Branch
Petra O'Conner
Robin Phillips
Candace Smith

Physical Therapy

Lisa Boulter, PTA
Brian Boutilier
Alyssa Gibbs
Jessica Lyndaker, PTA
Sarah Smith
Julie Ward

Occupational Therapy

Amanda Mower

Medical Social Work

Jeri Fuller, PH Social Worker

Nutritionist

MaryBeth Knowlton, RD

Health Planning

Stephen Jennings, MS

Health Promotion

Lisa Lagos

Faith Lustik, MA

Public Health Emergency Preparedness

Jeffrey Leiendecker, MS

Secretarial/Accounting/Office

Jieun Ahn
Kristen Boshane
Katie Dandrow
Patti Drake
Kimberly Goodale
Necole Hulbert
Penny O'Brien
Jessica O'Hara
Bridget Priest
Jenna Roberts
Jennifer Salisbury
Erika Sickler
Michelle Snyder
Penny Thomas

Emergency Medical Services

Paul Barter, Director
Judith Brenon
Christopher Singleton

Medical Examiner

Samuel Livingstone, MD
Vonnice Joels, Medical Investigator
Robert Kasulke, MD – per diem

COVID-19 Temporary

Jonathan Comstock
Naomi Hart
Claire Jennings
Amanda Mason
Elizabeth Mason, SPHN
Sonya Otis, RN
Paul Warneck

Contact Us

Jefferson County Public Health Service

531 Meade Street, Watertown, NY 13601

Administration: (315) 786-3710

Home Health Care Programs: (315) 786-3770

Preventive Services/Disease Control: (315) 786-3730

Emergency Medical Services: (315) 786-3760

Medical Examiner: (315) 786-3755

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