



2025

ANNUAL REPORT



MISSION

To ensure the health, safety, and quality of life for all St. Lawrence County residents. The department is dedicated to protecting the health of our community by:

- Controlling the spread of disease;
- Promoting healthy choices;
- Providing timely health information;
- Promoting the health and development of infants and children;
- Plan for and help to mitigate any public health emergency.

The department's philosophy is that prevention is better than a cure, healthy families need healthy environments, safety first must be a way of life, and that people must be empowered to take care of themselves.

VISION

A community of empowered people making healthy choices.

QUARTERLY SNAPSHOT

CATEGORY	Q1	Q2	Q3	Q4
Personnel	\$462,992	\$547,798	\$466,692	\$609,103
Equipment	\$0	\$380	\$0	\$0
Contractual	\$920,841	\$1,920,730	\$1,131,694	\$1,558,353
Benefits	\$276,616	\$302,521	\$258,726	\$314,199
Revenue	\$(56,688)	\$(2,219,749)	\$(455,383)	\$(1,625,958)
NET COST	\$1,603,762	\$551,679	\$1,401,730	\$855,697

OVERALL ORIGINAL BUDGET

CATEGORY	ORIGINAL APPROPRIATIONS	ACTUAL EXPENDITURES	PERCENT USED
Personnel	\$2,390,711	\$2,086,585	87.3%
Equipment	\$9,301	\$380	4.1%
Contractual	\$6,093,615	\$5,531,618	90.8%
Benefits	\$1,308,275	\$1,152,062	88.1%
Revenue	\$(5,083,528)	\$(4,357,777)	85.7%
TOTAL	\$4,718,373	\$4,412,868	93.5%

QUARTER ONE

Personnel - In Q1, 19.4% of our budget was expended. The following positions were vacant for Q1: The Sanitarian position was vacant in January but filled in February. Additional vacancies were due to a Senior Account Clerk resignation and the termination of a Service Coordinator in February and March, respectively. The Nurse Practitioner position was vacant for the months of January and February, with the position being filled in mid-March. The Public Health Nurse and Communicable Disease Specialist positions remained vacant for all of Q1.

Equipment - No equipment was purchased in Q1

Contractual – In Q1, 15.1% of our overall contractual budget was expended, as follows:

- Admin = \$8,308 (11.7%)
- Coroners = \$32,461 (10.7%)
- Early Intervention = \$30,232 (9.5%)
- Preschool = \$735,803 (15.1%)
- Prevent = \$114,037 (21.2%)

Revenue – In Q1, 1.1% of our budgeted revenue was received.

QUARTER TWO

Personnel - In Q2, 42.3% of our budget was expended for personnel. The following positions were vacant: Emergency Preparedness Coordinator vacated in June due to resignation, a Public Health Nurse, a Service Coordinator, and a Communicable Disease Specialist position were vacant for all of Q2.

Equipment - In Q2, 4.1% of our budget was expended.

Contractual – In Q2, 46.6% of our overall contractual budget was expended, as follows:

- Admin = \$45,580 (64.15%)
- Coroners = \$56,371 (18.5%)
- Early Intervention = \$132,245 (41.4%)
- Preschool = \$2,280,496 (46.9%)
- Prevent = \$326,879 (60.8%)

Revenue – In Q2, 44.8% of our budgeted revenue was received.

QUARTER THREE

Personnel – In Q3, 61.8% of our budget was expended on personnel. The following positions were vacant: Public Health Nurse, Community Health Educator, Service Coordinator.

Equipment - No equipment was purchased in Q3

Contractual – In Q3, 65.2% of our overall contractual budget was expended as follows:

- Admin = \$53,099 (75%)
- Coroners = \$128,030(42%)
- Early Intervention = \$208,658 (65%)
- Preschool = \$3,166,770 (65%)
- Prevent = \$416,707 (78%)

Revenue – In Q3, 50.4% of our budgeted revenue was received.

QUARTER FOUR

Personnel – In Q4, 87.3% of our budget was expended on personnel. The following positions were vacant: Public Health Nurse, Community Health Educator, Coordinator of Quality Assurance, and Communicable Disease Specialist.

Equipment - No equipment was purchased in Q4

Contractual – In Q4, 90.8% of our overall contractual budget was expended as follows:

- Admin = \$61208 (86%)
- Coroners = \$184,820 (61%)
- Early Intervention = \$287,896 (90%)
- Preschool = \$4,482,407 (92%)
- Prevent = \$515,287 (97%)

Revenue – In Q4 85.7% of our budgeted revenue was received.

Administration

CATEGORY	Original Budget	Actual Budget
Personnel	\$330,671	\$359,546
Contractual	\$71,054	\$68,238
Benefits	\$180,698	\$190,268
Revenue	\$(300,100)	\$(303,183)
TOTAL	\$282,323	\$314,868

Department Events

The department held a number of events including a Weather and Health Seminar that was open to the public, and a Measles Planning Tabletop exercise with partners including emergency services and health care providers. The Children's Programs held several workshops and Community Health Education hosted their annual Humans Don't Hibernate 5k and Family Fun Day.

Mosquito Surveillance



The department launched its inaugural Mosquito Surveillance efforts with local academic partners to monitor for diseases such as West Nile Virus and Eastern Equine Encephalitis.

Future Data

We're standardizing and automating department data across key programs to share real-time insights with stakeholders and the public.

Accreditation

The department will officially apply for accreditation through the national Public Health Accreditation Board (PHAB), as all supporting measures including updates to the Community Health Assessment, Community Health Improvement Plan, Department Strategic Plan, Quality Improvement and Performance Management Plan, and Workforce Development Plans have been completed.

Fiscal

\$70,000

in Accounts Receivable adjustments completed in FY25, carrying into FY26 after final review, demonstrates our commitment to financial precision in Pre-K funding.

\$40,000

in previously denied revenue was captured after securing in-network status with three major private insurers in 2024, enabling clean claim billing in 2025.



Going paperless!

In 2025, Fiscal implemented a centralized paperless requisition system with real-time, department-wide tracking from entry to receipt.

Standardized coding improved accuracy, and grant tracking streamlines budgets and compliance.

We are now in-network with Medicare.

The interim Principal Fiscal Officer (PFO) brought the department in-network with Medicare, opening a new reimbursement stream for Medicare-insured patients.

Our Fiscal Team

1 Principal Fiscal Officer
1 Principal Account Clerk
3 Senior Account Clerks

Fiscal staff navigated a transition as the Fiscal Officer stepped in as Interim Principal Fiscal Officer, maintaining leadership and oversight after the Principal Fiscal Officer's departure.



Emergency Preparedness

Extreme Weather Event

The Department hosted an Extreme Weather Event led by the Emergency Preparedness Coordinator and the Public Health Specialist in June with the department and local partners. This extreme weather activity required collaboration with many local partners to ensure the event advertising, site, and distribution practices were inclusive for all populations in the County.

80

Cooling kits were distributed to vulnerable populations during the summer in case of extreme weather.

46

Registrants for the Extreme Weather Event.

20

Attendees at the Measles Tabletop.



Partner Collaboration

The team continued collaborating with County departments and partners, including monthly preparedness meetings, and will keep conducting exercises and trainings to strengthen emergency readiness.



In December, the department hosted a **Measles Tabletop** with key partners to assess the County's ability to detect and manage an outbreak, focusing on coordination, Incident Command System (ICS), healthcare surge, and public communication.

Strengthening Infrastructure, Workforce and Data Systems Grant

The goal of the Strengthening Infrastructure, Workforce and Data Systems Grant is to strengthen county public health departments. The funds may be used to strengthen the public health workforce through hiring of public health positions, supporting retention of current staff, making upgrades to the workplace to increase employee satisfaction, providing training, and support services to public health department staff.

Salary/Fringe

Funding is being used to support our Communication Specialist's salary, who writes and disseminates press releases, posts on social media, and serves as the point of contact for media and our department.

Supplies

These consist of items to improve the working environment, including ergonomic supports and items such as laminator, shelving, headsets, document scanner, etc.

Miscellaneous

This includes Public Health branded professional apparel, social media message boosting, accreditation fees, and various subscriptions.



Travel

This supports staff attendance at professional development opportunities, a key aspect of Workforce Development and Retention. Staff who attend professional development opportunities share what they have learned at department-wide staff meetings so everyone can benefit from key concepts.

Contractual

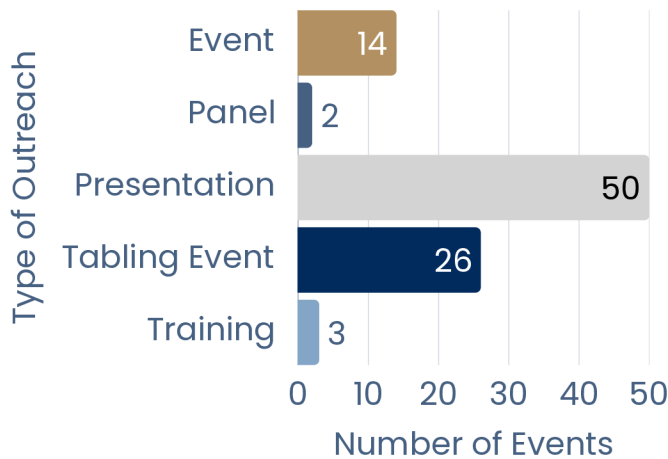
Ascendient guided the department through accreditation, ensuring accurate documentation and implementation of best practices.

Community Health Education

Outreach Efforts

- Presentations
- Community Tabling Events
- Professional Trainings

Allows the team to share vital health information with diverse audiences in a variety of settings.



Led and supported several well-attended events, including Walk with a Doc, Humans Don't Hibernate, including a 5K and Groundhog's Stride or Stroll.

Our CHE Team

- 1 Senior Public Health Educator
- 1 Public Health Educator
- 2 Public Health Specialists
- 1 Communications Specialist

Community Outreach Activities

70%↑

2025 Engagements



95

2024 Engagements



56

New Programming

- LivingWorks ASIST (Applied Suicide Intervention Skills Training)
- School Wellness Committees Collaborative
- Winter Isolation Workshops
- Superheroes of Health - elementary health education series



Coroner Program

Four county coroners share responsibility for investigating deaths that are unexpected or unattended to determine the cause and manner of death. The coroners work with pathologists and law enforcement to ensure accurate findings and identify any broader safety issues. Findings can inform both legal proceedings and community health efforts.

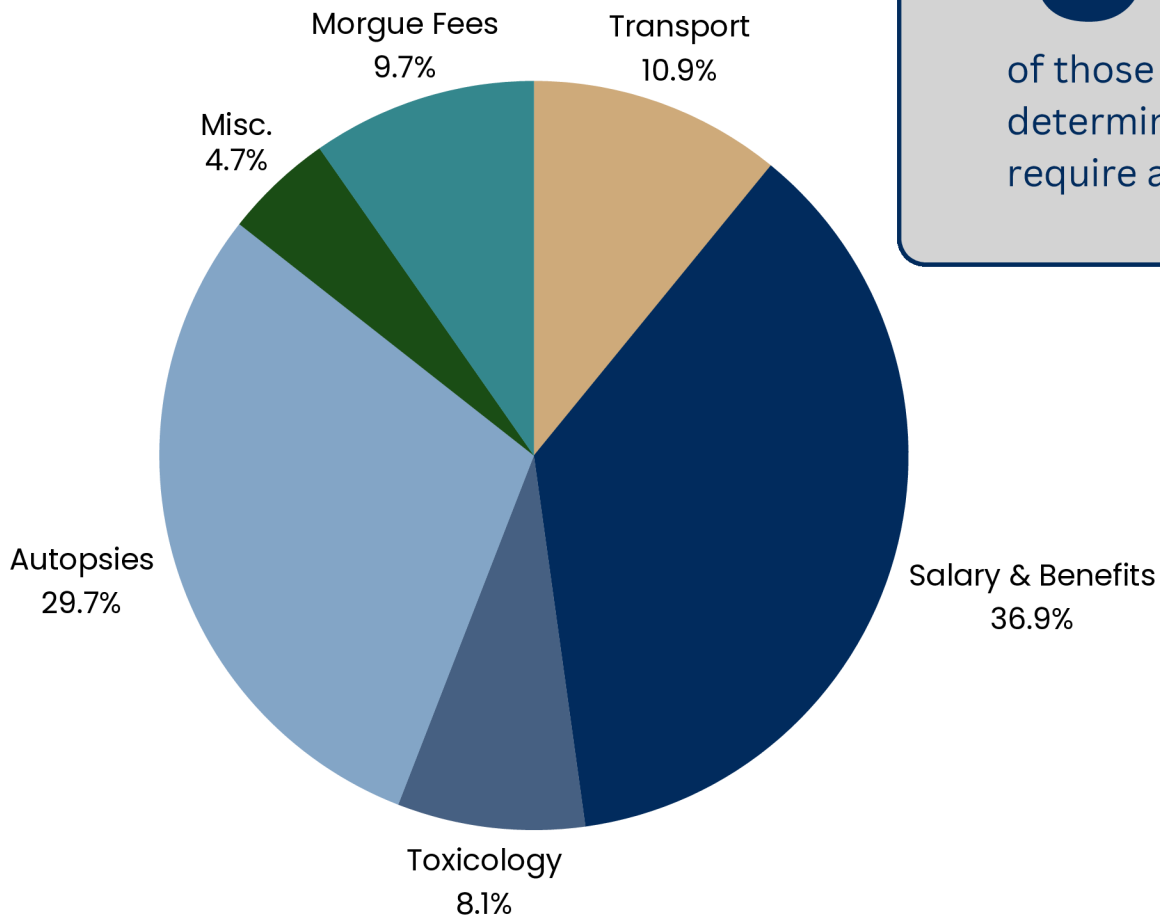
254

deaths responded to in 2025.

The coroner program total YTD for salary, benefits, contractual and revenue equals \$335,506, as broken down in the chart below an overall total of 78% of budgeted \$427,173.

60

of those were determined to require autopsy.



Sanitarian

Mosquito Surveillance

SLCPHD launched its first countywide mosquito surveillance program in 2025 (May–October) in partnership with NYS Department of Health and SUNY Potsdam, SUNY ESF, and Clarkson University. Three collection sites used CDC light traps, gravid traps, and resting boxes. Student interns sorted mosquitoes into pools by location, date, and species, which were then tested at Wadsworth Laboratories for arboviruses including West Nile and EEE.

310

inquiries were handled in 2025.

11

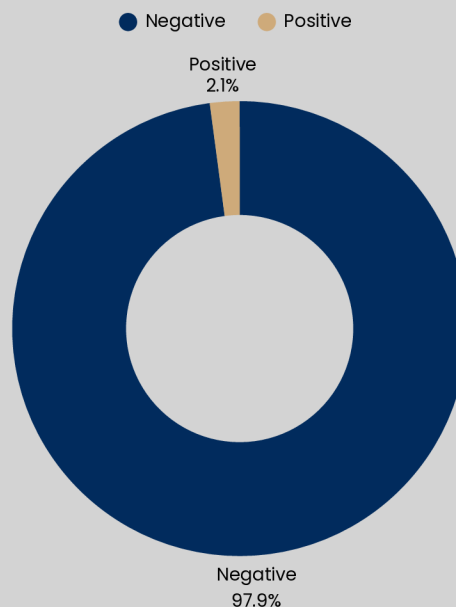
formal complaints were handled, but

10

were not within SLCPHD jurisdiction.

Testing Pools

A total of **381 mosquito pools** were tested, 373 (97.9%) mosquito pools were negative for any viruses tested. 8 (2.1%) mosquito pools were positive. One pool was found to have West Nile Virus and seven pools were found to have Flander’s virus, an indicator for West Nile virus.



Database Audit

A quarterly Sanitarian Database Audit tool was developed in 2025 to track case trends, complaint volumes, document accuracy, and open cases.

Early Intervention (EI)

Children Referred

232

Peak Case Load

154

Child Find Referrals

7

The EI program supports infants and toddlers (birth-3) with developmental delays and helps families meet their needs.

Our Early Intervention Team

1 Supervising Community Health Nurse
1 Senior Service Coordinator
4 Service Coordinators
1 Secretary I
1 Administrative Assistant
1 Clerk

EI HUB

In October 2024, the Bureau of Intervention launched the EI HUB system. Staff continue resolving issues through Web to Case tickets.

By the end of 2025, waitlists included 49 children for speech, 27 for special instruction, 8 for occupational therapy, and 20 for physical therapy, alongside ongoing challenges of training new staff while maintaining regular duties.

CATEGORY	Original Budget	Actual Budget
Personnel	\$472,112	\$487,140
Contractual	\$319,461	\$310,539
Benefits	\$275,715	\$248,629
Revenue	\$(377,433)	\$(361,417)
TOTAL	\$671,855	\$684,890

Children and Youth with Special Health Care Needs (CYSHCN)



The CYSHCN Program provides resources and referrals to ensure access to healthcare, insurance, information and support for children ages birth to 21 years, who have (or may have) a serious or chronic physical, developmental, behavioral, or emotional condition.

Our CYSHCN Team

1 Supervising Community Health Nurse
1 Public Health Specialist
1 Secretary I
1 Administrative Assistant
Early Intervention Staff



The Children's Program Newsletter was sent quarterly via email and paper copy at public locations.

7

Referrals were received, and numerous enabling services were provided.

Events & Outreach

Staff facilitated the COPE event with the Brain Injury Association of New York State, and the events listed below.

5

Nurturing Potential Workshops

1

Childhood to Adulthood Transition Expo

1

Caregiver's Self-Care Day

Maternal Child Health (MCH)

MCH Referrals

44% ↑

In 2025, MCH received 177 referrals to the program compared to 123 in 2024.

The MCH program educates new parents during the immediate postpartum period on breast/chestfeeding, postpartum self-care, and newborn care; offers a one-time nurse home visit for review of education and head-to-toe assessment of the newborn.

Home Visits Completed

25

Educational Phone Calls

112



5/5 Rating

Client satisfaction remained exceptionally high. A survey of home visit recipients yielded unanimous 5/5 ratings for services provided by our Certified Lactation Counselor Public Health Nurse, with 100% of respondents indicating the parent would refer others to the program.

Program Growth

Focus remains on program growth through community and hospital education. Referrals increased significantly, with efforts in 2026 aimed at boosting accepted home visits.

Preschool

CATEGORY	Original Budget	Actual Budget
Personnel	\$185,105	\$131,611.84
Contractual	\$4,867,4079	\$4,958,710.90
Benefits	\$76,4946	\$86,037.41
Revenue	\$(2,707,000)	\$(1,707,335.35)
TOTAL	\$2,422,006	\$3,469,024.80

The Preschool program coordinates evaluations, educational and therapeutic services, and transportation for children ages 3–5 with developmental delays or disabilities, provided by the school district, parents, or First Student.



Transportation

Contracts have been maintained with **15** school districts for preschool transportation.

The average number of First Student buses in 2025 was 6 for the ESY and 6 for the RSY, which is about the same as the year prior. In 2025, there were about 3 parent transporters for the ESY and 5 for the RSY, which is less than in 2024, when there were 7 in ESY and 5 in RSY.

Extended School
Year Students

153

Regular School
Year Students

193

Understanding of AVLs (automatic voucher listings) was a focus in 2025. With training from William Bell at McGuinness, NYS reimbursements was maximized with minimal issues.

Prevent Programs

OVERALL BUDGET

CATEGORY	Original Budget	Actual Budget
Personnel	\$1,068,8211	\$876,613.96
Contractual	\$512,183.69	\$416,675.04
Benefits	\$580,283	\$492,471.12
Revenue	\$(1,135,675.99)	\$(938,060.36)
TOTAL	\$1,025,611.700	\$847,699.76

2025 CLINIC REVENUE

Immunizations	Projected	Actual
Self Pay	(\$9,000)	(\$5,940.06)
Medicaid	(\$200)	(\$0)
Medicare	(\$200)	(\$182.92)
Private Insurance	(\$40,000)	(\$82,971)
PPD (TB Skin Test)	(\$1,000)	(\$1,580)
Travel Immunizations	\$(5,000)	(\$24,100.78)
Total	(\$54,400)	(\$114,774.76)

Immunizations

This program provides immunizations for children and adults, to decrease the incidence of vaccine preventable diseases; educates and provides resources to providers, schools, childcare centers, other partners, and the community at large.

46

Immunization
Clinics

566

Shots
Administered

230

Vaccine for
Children Program

23

Vaccine for
Adults Program

284

Paid Privately or
by Insurance

19

Travel Clinics

73

Travel
Vaccinations

Our Immunization Team

- 1 Supervising Public Health Nurse
- 1 Nurse Practitioner
- 1 Public Health Nurse
- 1 Community Health Nurse
- 1 Public Health Specialist
- 1 Public Health Program Aide
- 1 Keyboard Specialist

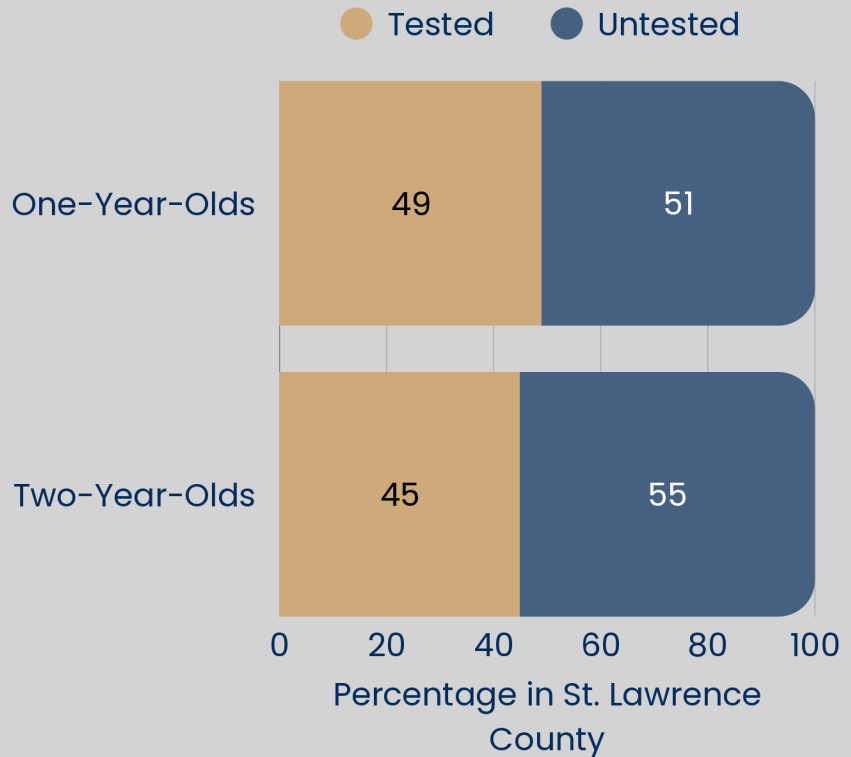
Continuous Improvement

As a result of a weather-related temperature excursion of the vaccine storage containers, an improved critical transport process was developed to mitigate the risk of future incidents. This included the development and implementation of an Emergency Vaccine Transport Guide and upgrading monitoring alerts.

Lead

The Childhood Lead Poisoning Prevention Program (CLPPP) identifies and monitors children who have been identified to have an Elevated Blood Lead Levels (EBLLs). We work closely with healthcare providers and the New York State Department of Health (NYS DOH) Canton District Office to identify how the child was exposed to lead and to help the family lower the child's blood lead level.

In St. Lawrence County, 49% of one-year-olds and 45% of two-year-olds were tested for lead poisoning within New York State required time frames.



143

approximate amount of children tested per month.

1,715

lead tests were conducted throughout the year.

22

children were diagnosed with lead poisoning.

Rabies



Program Infrastructure

- Expanded staff capacity through cross-training to ensure 24/7 program coverage and timely response.
- Developed a visual investigation algorithm to improve consistency and efficiency in case management.
- Continued provider education efforts to support proper administration of rabies post-exposure treatment and documentation compliance.

Post-Exposure Treatment

Rabies post-exposure treatment was offered to 58 people; 54 completed treatment.

Collaboration continues with area hospitals for rabies post exposure treatment and billing, as well as with veterinarians to submit animals for rabies testing as appropriate. Rabies post-exposure treatment continues to be offered at Potsdam Urgent Care, Canton Urgent Care, Gouverneur Hospital, Massena Hospital, and Claxton Hepburn Medical Center.

Vaccinated

1,976

cats, dogs and ferrets to prevent rabies.

Hosted

18

vaccination clinics with local municipalities and organizations.

Responded to

350

reported dog and cat bites, ensuring appropriate follow-up and risk assessment.

SLCPHD submitted

69

animals in the county for rabies testing.

Sexually Transmitted Infections (STIs)

The STI/HIV program provides testing, treatment, and education for sexually transmitted infections, along with confidential HIV counseling and testing.

Our nurse practitioner visited **17 OBGYN and health clinics across the county** to educate providers on the importance of Expedited Partner Therapy in STI testing and treatment.

	2025	2024	2023	2022	2021	2020
CHLAMYDIA	212	211	268	237	277	242
GONORRHEA	12	26	41	28	35	28
HEPATITIS A (ACUTE INFECTION)	0	<10	<10	<10	<10	<10
HEPATITIS B (ACUTE INFECTION)	0	0	0	0	0	<10
HEPATITIS B (CHRONIC INFECTION)	<10	17	17	11	16	<10
HEPATITIS C (ACUTE INFECTION)	<10	<10	<10	<10	<10	<10
HEPATITIS C (CHRONIC INFECTION)	52	75	60	72	86	64
SYPHILIS	<10	19	14	11	<10	<10
TOTAL	292	353	403	367	423	352

Communicable Disease

The Communicable Disease program prevents the spread of infectious diseases through surveillance, contact, follow-up, and treatment. Reportable communicable diseases are defined in 10 NYCRR 2.1 or determined by the State Commissioner of Health to be communicable, rapidly emergent, or a significant threat to public health.

Our Communicable Disease Team

- 1 Supervising Public Health Nurse
- 1 Communicable Disease Specialist
- 1 Community Health Nurse
- 1 Public Health Program Aide
- 1 Clerk



CD Manual

In 2025, the CD manual was completed to provide new employees in the CD program with guidance on how to track and create investigations in HCS for all reportable illnesses. The CD staff collaborated with local area Infection Prevention Nurses to develop measles documentation, which was shared with staff members at a couple of local hospitals.

In response to the nationwide increase in communicable disease outbreaks, the department will continue to provide education to schools, hospitals, and community members on prevention and treatment through social media and training opportunity.

Food and Tickborne Illness

The volume of enteric and tick-borne illnesses continues to rise, along with increased testing for other reportable communicable diseases. The Communicable Disease program continues to encounter difficulties in collecting information during investigations as some community members remain hesitant to participate due to persistent mistrust with the government.

Tuberculosis (TB)



The TB program educates the community and providers on preventing the spread of TB; provides treatment, monitoring, and follow up for individuals with TB infection.

Our TB Team

1 Supervising Public Health Nurse
1 Nurse Practitioner
1 Communicable Disease Specialist
1 Public Health Program Aide
1 Clerk

Timely Investigations

SLCPHD continues to have an excellent rapport with Infection Preventionists, and the department contracted Infectious Disease Provider.

LBTI Medication

Medication backorders for Latent Tuberculosis Infection (LTBI) created challenges in 2025. LTBI occurs when a person has been exposed to tuberculosis bacteria and carries the bacteria without symptoms or being contagious, but it can become active if untreated.

Provider education materials were prepared and outreach planned by our nurse practitioner to local primary care providers on LTBI testing and treatment; this initiative will be scheduled when the national medication shortage improves.

Community Health Assessment and Community Health Improvement Plan (CHA/CHIP)

The St. Lawrence County Community Health Improvement Coalition, Bridge to Wellness, is an active committee with **fifty-four participating organizations**, including

- public health
- higher education
- hospitals
- health centers
- community-based organizations

The Public Health Department facilitates meetings.

268

responses to the
Community
Health Survey

Updated Planning

In 2025, SLCPHD, the Bridge to Wellness Coalition, and local hospitals worked collaboratively to plan the 2025-2030 St. Lawrence County Community Health Improvement Plan (CHIP) and the Community Service Plan (CSP) using the Community Health Survey and the NYS Prevention Agenda as a roadmap.

The CHA is required for local health departments and hospitals under New York State’s Prevention Agenda 2025–2030 and guides the St. Lawrence County CHIP and partner hospitals’ CSPs, following NYS Department of Health guidelines.

Based on the Community Health Assessment and partner input, St. Lawrence County will focus on the following Prevention Agenda priorities and disparities for 2025 – 2030:

Priorities	Prevent Suicide	Prevention of Infant and Maternal Mortality	Nutrition Security	Oral Health
Disparities	Mental Health Sex or gender Age	Socioeconomic Mental Health Substance Use Geography	Socioeconomic status Geography Access to transportation Age	Limited access to dental care Uninsured or underinsured

To read the full report: <https://www.stlawco.gov/Departments/PublicHealth/PreventiveHealth>.