

2009 Highlights

Preventative Health Services Programs were the lead program in dealing with the H1N1 outbreak and were successful in distributing almost 50% of our allotted vaccine, second in the state. We also received a Department of Health survey of our Diagnostic and Treatment Center. Even though we received deficiencies, we successfully submitted a plan of corrections. Most areas needing improvement were related to having written policies and procedures.

Lewis County Certified Home Health Agency has been named to the 2009 HomeCare Elite, a compilation of the top-performing home health agencies in the United States. This annual review identifies the top 25 percent of agencies and further highlights the top 100 and top 500 agencies overall. Winners are ranked by an analysis of performance measures in quality outcomes, quality improvement, and financial performance. “The 2009 HomeCare Elite winners demonstrate a commitment to providing their patients with the best possible care while performing at the highest level” said Nancy Buller, senior director of marketing communications at OCS HomeCare.

The Lewis County Early Intervention Program has undergone reviews/audits this year to ensure a quality program is being offered that aligns itself with NYSDOH & Federal Regulations. We are part of the State Performance Plan (SPP) and each year we receive local performance data. The federal *Individuals with Disabilities Education Act (IDEA)* require states to develop a six-year state performance plan that includes targets improvement strategies for various areas of performance. Each year, New York reports on the State's progress in meeting the targets for 14 performance indicators set in the SPP. This report is called the *Annual Performance Report (APR)*. The APR is reported to the public and the U.S. Department of Education Office of Special Education Programs. This is the third year that we have been involved in the SPP and we currently meet requirements for all indicators. Some of the indicators include timely referral & evaluation, timely initiation of services, services provided in natural environments (places a child may typically spend their day-home, daycare, etc), and timely steps toward transition to preschool services.

The Cancer Services Program (CSP) has faced challenges this program year. Changes to eligibility beginning April 1, 2009 affected women 18-39 who were no longer eligible for CSP services. This population was estimated at approximately 40% of the eligible clients previously served through the CSP. With this change the program has faced the task of locating and recruiting, women 40 and older for breast and cervical screenings and men and women 50 and older for colorectal screening. By increasing outreach at worksites, planning joint community projects and collaborating with partners the program has made a concentrated effort to reach eligible individuals throughout both counties to provide these life-saving cancer screenings.

The Hospice Program continues to be certified by the Centers for Medicare/Medicaid Services and was surveyed in a follow-up survey in 2009. Significant improvements were noted with three of four areas previously found to be in compliance.