



Public Health
Prevent. Promote. Protect.
Cattaraugus County
Health Department
Established 1923

CATTARAUGUS COUNTY BOARD OF HEALTH

1 Leo Moss Drive, Olean, NY 14760, Tel. (716)373-8050, Fax (716) 701-3737



Joseph Bohan, MD, President

James Lapey Vice-President

*Giles Hamlin, MD
Zahid Chohan, MD
Sondra Fox, RN
Richard Haberer
Georgina Paul, FNP
Theresa Raftis
James Snyder*

MINUTES

June 2, 2015

The 837th meeting of the Cattaraugus County Board of Health was held at St. Bonaventure Clubhouse Restaurant, Route 417, Allegany, New York on June 2, 2015.

The following members were present:

Dr. Joseph Bohan
Dr. Zahid Chohan
Dr. Giles Hamlin
Sondra Fox, RN

Richard Haberer
Theresa Raftis
James Snyder

Also present were:

Kevin D. Watkins, MD, MPH, Public Health Director
Mark Howden, County Attorney
Donna Vickman, County Legislator
Gilbert Witte, MD, Medical Director
Dave Porter, Hearing Officer
Susan Andrews, Director of Patient Services
Kathleen Ellis, Administrative Officer
Raymond Jordan, Sr. Public Health Sanitarian
Debra Lacher, Secretary to Public Health Director
Eric Wohlers, Director of Environmental Health

The meeting was called to order by Dr. Bohan. The roll was called and a quorum declared.

Mr. Snyder made a motion to approve the minutes of the Board of Health (BOH) meeting held on May 6, 2015, it was seconded by Dr. Hamlin, and the motion was unanimously approved.

Dr. Hamlin made a motion to approve the minutes of the Professional Advisory meeting held on April 15, 2015, it was seconded by Dr. Chohan, and the motion was unanimously approved.

"Public Health for Healthy Communities"

DIRECTORS REPORT: Dr. Watkins reported that there is a large mosquito population in the area leading to several nuisance complaints fielded by the Health Department. In addition, there have been several complaints of dead bird sightings on Front Street and State Street in Olean. Mr. Snyder added that he had two dead owls in his backyard, and he contacted the Department of Environmental Conservation (DEC) to investigate. Dr. Watkins explained that the Health Department no longer tests dead birds as they are now considered less useful in monitoring for West Nile Virus (WNV) activity within a community, he stated that mosquito collection and testing provides a more reliable indication of WNV activity within a community. He went on to say that the wet weather and high temperatures over the past couple of weeks has created a perfect breeding ground for mosquitos. Dr. Watkins informed the board that mosquito traps have been set in (6) municipalities; Allegany, Carrolton, Great Valley, Olean, Portville, and Salamanca, as these are the areas that have agreed to participate in the mosquito surveillance program. He stated that on May 21st the Health Department posted a notification on its website to inform the public that the department may conduct aerial larvacide spraying to kill mosquito larvae in the breeding areas of the aforementioned municipalities. The proposed aerial application period would be June 14th-June 20th and if there are alternative dates needed the aerial application will be June 21st-June 27th.

Dr. Watkins explained that WNV disease should be considered in any person that has a febrile or acute neurological illness, who has had recent exposure to mosquito bites or blood transfusion, or an organ transplant, especially during the summer months in areas where virus activity has been reported. He stated that the incubation period for WNV disease is typically anywhere between 2-6 days, but can range from 2-14 days and can last several weeks in an immunocompromised individual. He added that about 75% of individuals with WNV have what is considered atypical or asymptomatic symptoms. He went on to say that most symptomatic persons experience an acute systemic febrile illness that often includes headache, weakness, myalgia, and some gastrointestinal symptoms. Dr. Watkins informed the board that less than one percent of symptomatic patients with WNV will develop a neurological manifestation which may include meningitis, encephalitis, or a flaccid paralysis. He stated that there are no vaccines or antiviral treatment for WNV but over the counter medications like pain relievers are used to reduce the fever, and symptoms such as myalgia.

Dr. Watkins also added that in 2014 Cattaraugus County had no reportable human cases of WNV and after submission of multiple pools of mosquitos last year, there were no pools identified with WNV in Cattaraugus County. He stated that larvacide spraying was conducted last year and that the department will have to review more mosquito surveillance reports to determine if we will need to spray this year. He iterated that recommendations are for residents to wear light colored clothing, cover with long sleeves shirts and pants during dusk and dawn when mosquitoes are most likely to feed, use repellant with DEET, remove all receptacles that can accumulate water (garbage cans, old tires, etc.), and place screens in windows and doors of the home.

Dr. Watkins informed the board that in December 2014, the U.S. Food and Drug Administration approved a new and improved vaccine called Gardasil 9 (Human Papillomavirus 9-valent Vaccine, Recombinant) for the prevention of certain diseases caused by nine types of Human Papillomavirus (HPV). Currently, the Health Department has Gardasil that protects against (4) Human Papillomavirus, but Gardasil 9 adds protection against five additional HPV types.

Dr. Watkins stated that the Health Department would like to add this new vaccine to its vaccine formulary but the cost is significantly higher than what the BOH approved earlier this year for Gardasil vaccine. The actual cost of the new vaccine is \$156.60 which is a \$23.54 increase from the old Gardasil vaccine approved in February. Dr. Watkins asked the Board if they would approve adding Gardasil 9 to the current clinic immunization formulary and set a sliding fee rate of \$157.00 and an insurance rate of \$204.00 which is a \$16.90 increase from the old Gardasil vaccine approved in February. Dr. Bohan questioned how many doses were left of the old vaccine, Mrs. Andrews replied (4) doses. Mrs. Vickman asked if insurance companies will cover our fee rate for the new vaccine, Dr. Watkins replied some will cover the fee rate, but others will pay a negotiated or their set rate. Mr. Haberer made a motion to add the new vaccine to the immunization formulary and set the fee for the new Gardasil (9) vaccine as recommended by Dr. Watkins, Mr. Snyder seconded, and the motion was unanimously approved.

Dr. Watkins informed the Board that the revisions have been completed on the local law that prohibits the use of e-cigarettes where tobacco use is prohibited within the county. This revision will be in the legislative package for committee approval on tomorrow. If passed in committee, a public hearing will be conducted on June 24th as well as a final adoption before the entire legislative board. Copies of both the original local law and the revised copy were handed out to those in attendance. Revisions include businesses that have vaping lounges will now need a Health Department permit to operate, definitions have been added (i.e. defining the department, defining the director, etc.), and section (3) of the old local law, "sale to minors prohibited", was removed because the state has already adopted this provision as a state law. Once these amendments have been added to the local law and adopted by the legislators, it will get forwarded to the Secretary of the State, and placed on file.

Dr. Watkins reported that there were (2) grants that the department recently received. The first grant is called Spreading Community Accelerators through Learning and Evaluation (SCALE), which was awarded to the department by the Institute for Healthcare Improvement (IHI), in the amount of \$71,000, to assist our community in its efforts to substantially accelerate its health improvement journey.

He stated that we were one of twenty communities selected as a pacesetter community to participate in this 20-month intensive "learning and doing" program that is designed to assist communities to achieve unprecedented results in improving the health and well-being of people, populations and the community-at-large. He added that this SCALE grant is for the Healthy Livable Communities Consortium of Cattaraugus and together we will work to meet the expectation of this grant which is to help improve our county health rankings.

The second grant is from the Allegany Community Out Reach (ACOR) grant program, which is overseen by the Allegany Franciscan Ministries. This grant is a \$5,000.00 award that will be used to support a new innovative collaborative initiative working with Canticle Farms, Olean Housing Authorities and the Health Department, to bring local vegetables to those who cannot afford farmer market priced vegetables. The grant will allow us to purchase the vegetables at Canticle Farms, and drive the vegetables in a "Veggie Mobile" to two housing developments, Alder's Court and Seneca Court and allow the residents of those facilities to choose whatever vegetables they would like, free of charge.

The "Veggie Mobile" will arrive in front of those facilities every Wednesday, from June 24th - September 30th, at 2PM until the vegetables are gone and residents that live in those housing developments can also participate in a demonstration on how to prepare vegetables palatable for all members of the family. The goal is to get the residents to eat vegetables and teach them how to properly prepare them, this initiative will reach just over (100) people.

Mrs. Fox reported from the Suicide Ad Hoc committee meeting which was held on May 15, 2015 as a result of a request by Mr. Snyder for the Board of Health to get involved in Suicide Prevention. This meeting comprised of individuals from the Board of Health, Community Services Board and staff members, the Sheriff's department, and a member of the Legislature. The group looked at the statistics for suicide amongst Cattaraugus County residents. In 2006 there was (6) deaths attributed to suicide, and by the year 2013 the total rose to (12).

Mrs. Fox stated to address suicide prevention, a Suicide Coalition was formed (3) years ago. The coalition is part of Cattaraugus County Mental Health Services Counseling Center, and is operated under the Community Services Board. The office of Community Services has evidence based trainings available to the community to help residents recognize signs of a person who may have suicidal ideations. There are (3) levels of courses; Question, Persuade, Refer (QPR) training which is a one and a half hour course, Safe Tell, Ask, Listen and KeepSafe (SafeTALK) a three hour course, and Applied Suicide Intervention Skills Training (ASIST) which is two eight hour courses. These courses will help to learn how to ask the tough questions, identify the signs, intervene and get the individual the help they require. There is also a new therapy available called Eye Movement Desensitization and Reprocessing (EMDR) that has shown remarkable results. Therapists are saying they can achieve better results in two or three sessions, than they use to achieve in months prior. Mrs. Fox had handouts to share with those in attendance that included suicide warning signs and the crisis hotline numbers.

Dr. Watkins summarized by adding, comparing the annual number of deaths within our community, which is approximately (800) deaths per year, to the most common causes of deaths within the county, it appears that suicides are in the top half, but overall, suicide deaths are not that large compared to other causes of death. He stated that the highest number of suicides noted in the past few years was in 2009 when there were a total of (14), the provisional data for 2014 shows (13) deaths by suicide for Cattaraugus County. He concluded by saying that the suicide coalition is making enrolls in bringing attention to suicides within our community by advertisements and fundraisers and recent suicides committed by famous actors and even residents that are well known to the community has brought to light this very important subject matter.

NURSING DIVISION REPORT: Mrs. Andrews reported that Hepatitis C continues to remain a problem, she informed the board that just this past month there were (9) newly identified Hepatitis C cases, and of those, (7) had a risk factor of intravenous drug use.

There were (3) post exposure rabies vaccinations given last month due to a bat, a cat, and a skunk.

Mrs. Andrews reported that (3) nurses attended a lead training in Rochester. She added that the staff is taking part in education and outreach at point of care testing sites at WIC clinics in both Olean and Franklinville. This service will also be extended to Salamanca and Delevan. There was (1) child with an elevated blood lead level of 14 ug/dl (normal is 0-9 ug/dl).

Homecare census numbers are up, but the nursing division continues to hear of incidents where patients are not being given a choice upon discharge from Buffalo hospitals. Whenever the department is made aware of this situation they follow up and reeducate the discharge planners.

Mrs. Andrews shared that two new full time Home Health Aides have started and have already proven to be very helpful. A new nurse will start with the department in June due to a recent resignation.

ENVIRONMENTAL DIVISION REPORT: Mr. Wohlers reported that the preliminary numbers from the Mosquito surveillance program showed there were almost (1,400) mosquito's in (10) traps the first week they were set. In anticipation of continued rain and hot weather, we expect to see a large number of mosquito larvae and adult mosquito's this season. The notice for larvacide spraying has already been posted in the newspaper.

Mr. Wohlers informed the board that Dr. Gall, the State Entomologist, stated that results from the State lab of ticks tested last year for Lyme disease will soon be made available. Cattaraugus County has averaged 3 to 5 human cases of Lyme disease a year and we expect that number to increase in the future.

Mr. Wohlers reported that staff is busy with temporary food permit programs for summer festivals, and children's camp programs are preparing to start as schools will soon be out of session.

He also reported that the rabies clinic held in May vaccinated 135 cats, 367 dogs, and 4 ferrets. The next clinic will not be held until fall.

Mr. Wohlers stated that the Department of Environmental Conservation (DEC) and the Environmental Protection Agency (EPA) contacted him regarding ground water contamination in East Olean attributed to a number of industries. Last year EPA came and held a public information meeting at the Jamestown Community College Campus regarding a proposal for cleanup and remediation at the former Alcas Cutlery Corp. facility. A notice was recently received from EPA stating there will be an open public comment period and meeting scheduled for later this month. This is for an amended record of decision for cleanup at the AVX site on Seneca Street in Olean which has ground water contamination behind their building of which has migrated down towards East State Street.

Mr. Wohlers informed the board that lake monitoring will soon begin for blue green algae which are the toxic algae blooms seen in the summertime. The US Army Core of Engineers coordinates their monitoring of algae at the Allegheny reservoir with the Seneca Nation of Indians Health Department's environmental protection department.

Mr. Wohlers stated that two new bedbug reports in the City of Olean were received this morning. The latest cases reported; include a boarding house, and an apartment. Heat is the best method used to kill bedbugs.

Hearing Officer, David Porter reported there were no new enforcement cases for this month.

There being no further business to discuss, a motion to adjourn was made by Dr. Chohan, and seconded by Dr. Hamlin and the motion was unanimously approved.

Respectfully submitted,

A handwritten signature in blue ink that reads "Kevin D. Watkins, M.D." The signature is written in a cursive, flowing style.

Kevin D. Watkins, M.D., M.P.H.
Secretary to the Board of Health

KDW/dl

Recommendation: Adjourn the docket for one month to allow respondents attorney and the CCHD to work out proper notification to the lending institution and possible placarding the residence.
Pull the civil compromise.

DOCKET 15-016

The Birdwalk, Inc., 5816 Route 242 East, Ellicottville, NY 14731

Violations: 10NYCRR Sec. 5-1.72 (c) (1) Respondent failed to submit complete daily records for the operation of the noncommunity water supply for the month of May 2015 to this office by the 10th day of the following month. A notice for the administrative hearing was mailed and signed for with a stipulation offer of civil compromise.

Previous Docket #'s: 14-021, 15-001

Administrative Hearing: 7-14-2015

Public Health Sanitarian: Chris A. Covert appeared for CCHD and was sworn in.

Respondent: Properly served but did not appear.

Testimony of Mr. Jordan: a.) P. Ex. #1 Enf.-1 read and affirmed to be true.
 b.) P. Ex. #3 a stipulation offering a \$200.00 civil compromise.
 c.) P. Ex. #2 letter dated 3-20-09 to the respondent explaining
 compliance of reporting per Sec. 5-1.72 May's report has never been
 received.

Hearing Officer Findings: The Respondent is in violation of 10NYCRR Sec. 5-1.72 (c)(1)
 failure to report by the 10th day of the month subsequent to the
 reporting period.

Recommendations: That the respondent's civil compromise offer of \$200.00 be changed
 to a fine of \$400.00 for failure to report per section 5.172(c)(1) of the
 New York State Sanitary Code and also failure to appear for the
 administrative hearing. The fine must be paid by August 31, 2015 or
 a \$10.00 per diem will be levied for every day not paid.

LOCAL LAW NUMBER 6-2015
COUNTY OF CATTARAUGUS, NEW YORK

Pursuant to Article 13F of the Public Health Law and
Section 10 of the Municipal Home Rule Law.

A LOCAL LAW AMENDING LOCAL LAW NUMBER 10-2011 (INTRO NUMBER 16-2011),
ENTITLED "A LOCAL LAW REGULATING ELECTRONIC CIGARETTES
["E-CIGARETTES"] AND HERBAL CIGARETTES"

BE IT ENACTED by the County Legislature of the County of Cattaraugus as follows:

SECTION 1. Legislative Intent. It is the intent of this Local Law to amend Local Law Number 10-2011 (Intro Number 16-2011) to reflect that the provisions of such local law relating to the sale of electronic cigarettes to minors have been preempted by state law and to otherwise amend such local law.

SECTION 2. Amendments. Local Law Number 10-2011 (Intro Number 16-2011), entitled "A Local Law Regulating Electronic Cigarettes ("E-Cigarettes") and Herbal Cigarettes" is hereby amended as follows:

A. Section 1 thereof, entitled "Legislative Intent", is amended by deleting therefrom subparagraph (c) and by relettering former subparagraphs (d) and (e) as subparagraphs (c) and (d) respectively; and by deleting the following words from subparagraph d (formerly e) thereof: "and to ban the sale of such products to persons under the age of eighteen (18)".

B. Section 2 of such local law, entitled "Definitions", is amended in the following respects:

(1) by adding a new subparagraph (f) thereof, which shall read as follows:

"f) "Business" shall mean a sole proprietorship, corporation, limited liability company, partnership or other enterprise in which the primary activity is the sale, manufacture or promotion of e-cigarettes, e-cigarette cartridges, e-cigarette cartridge filler, or accessories, either at wholesale or retail, and in which the sale, manufacture or promotion of other products is merely incidental. A Business shall include but not be limited to a lounge where e-cigarette use is permitted as well as any establishment which sells e-cigarette materials.";

(2) by adding a new subparagraph (g) thereof, which shall read as follows:

"g) "Director" shall mean the Director of the Cattaraugus County Department of Health."; and

(3) by adding a new subparagraph (h) thereof, which shall read as follows:

"h) "Department" shall mean the Cattaraugus County Department of Health".

C. Section 3 of such local law, entitled "Sale to Minors Prohibited", is hereby rescinded and deleted in its entirety.

D. Section 4 of such local law, entitled "Restrictions on Smoking of Herbal or E-Cigarettes", is renumbered as Section 3 and amended to read as follows:

"The smoking of herbal and electronic cigarettes shall not be permitted and no person shall smoke electronic or herbal cigarettes in any areas in which smoking tobacco products is prohibited or

restricted pursuant to the Public Health Law. For violations of this section, it shall be an affirmative defense that during the relevant time period actual control of the indoor area open to the public was not exercised by the respondent, but rather by a lessee, a sub-lessee or any other person. To establish an affirmative defense, the respondent shall submit an affidavit and may submit any other relevant proof indicating that the respondent did not exercise actual control of said area during the relevant time period. Such affidavit and other proof shall be mailed by certified mail to the Board within 30 days of receipt of such notice of violation."

E. A new Section 4 is hereby added as follows:

"SECTION 4. Business Registration. Any Business which relies on the provision of on-site sampling as a mechanism to market and/or sell e-cigarettes, e-cigarette cartridges or e-cigarette cartridge fillings and accessories may register with the Department as a Certified E-Cigarette Business. The Department shall develop, and make available to Businesses, a certification form by which a Business may certify that it meets the definition of Business contained within this local law. The certification will also include any provisions which the Department finds necessary to protect the health and safety of the residents of Cattaraugus County. When a Business completes the certification form to the Department's satisfaction, the Department shall add such Business to a registry of Certified E-Cigarette Businesses which it shall control and maintain."

F. A new Section 5 is hereby added as follows:

"SECTION 5. Application. The restrictions contained in Section 3 of this local law shall not apply to Businesses registered as Certified E-Cigarette Businesses pursuant to Section 4 above or to individuals while they are patronizing a Certified E-Cigarette Business. Otherwise, the terms and conditions of this local law shall have general effect county wide."

G. By renumbering the remaining sections of such local law as Sections 6 through 11, respectively.

H. Section 6 of such local law, entitled "Enforcement", subparagraph (c) is hereby amended as follows: at the end, add: ", and in addition thereto, may suspend or revoke any certification issued to the Business committing such violation".

SECTION 3. SEQRA Determination: This Legislature, being the state environmental quality review act (SEQRA) lead agency, hereby finds and determines that this law constitutes a Type II Action pursuant to Section 617.5(c)(20), (21), and/or (27) of Title VI of the New York Code of Rules and Regulations and within the meaning of Section 8-0109(2) of the New York Environmental Conservation Law as a promulgation of regulations, rules, policies, procedures and legislative decisions in connection with continuing agency administration, management and information collection. The County Administrator is hereby directed to circulate any appropriate SEQRA notice of determination of non-applicability or non-significance in accordance with this law.

SECTION 4. Effective Date. This local law shall become effective upon filing with the Secretary of State.

Resolution Referred to:

Finance	<input checked="" type="checkbox"/>	Human Services	<input checked="" type="checkbox"/>
Co. Operations	<input type="checkbox"/>	Develop. & Ag	<input type="checkbox"/>
DPW	<input type="checkbox"/>	Public Safety	<input type="checkbox"/>
Senior Services	<input type="checkbox"/>	Labor Relations	<input type="checkbox"/>
Strategic Planning	<input type="checkbox"/>		<input type="checkbox"/>

AUTHORIZING PUBLIC HEARING ON LOCAL LAW NUMBER 6-2015

Pursuant to Article 5 of the Workers' Compensation Law.

I. WHEREAS, there has been duly presented and introduced at a meeting of this Legislature held on June 10, 2015, a proposed Local Law entitled, "A Local Law Amending Local Law Number 10-2011 (Intro Number 16-2011) entitled 'A Local Law Regulating Electronic Cigarettes ["E-Cigarettes"] and Herbal Cigarettes", and

II. WHEREAS, no local law shall be adopted until a public hearing thereon has been had by the Cattaraugus County Legislature upon at least five (5) days' notice, now, therefore, be it

I. RESOLVED, that a public hearing shall be held on the proposed local law by this County Legislature on the 24th day of June, 2015, at 3:02 p.m. at the Legislature's Chambers, County Center, 303 Court Street, Little Valley, New York, and that at least five (5) days' notice of such hearing shall be given by the Clerk by the due posting thereof upon the bulletin board of each County Court House within the County and by publishing such notice at least once in the official newspapers of the County.

Resolution Referred to:

Finance	<input checked="" type="checkbox"/>	Human Services	<input checked="" type="checkbox"/>
Co. Operations	<input type="checkbox"/>	Develop. & Ag	<input type="checkbox"/>
DPW	<input type="checkbox"/>	Public Safety	<input type="checkbox"/>
Senior Services	<input type="checkbox"/>	Labor Relations	<input type="checkbox"/>
Strategic Planning	<input type="checkbox"/>		<input type="checkbox"/>

**County Health
Rankings & Roadmaps**

Building a Culture of Health, County by County

A Robert Wood Johnson Foundation program

2015 *County Health Rankings* New York



A collaboration between the Robert Wood Johnson Foundation and
the University of Wisconsin Population Health Institute.



University of Wisconsin
Population Health Institute
SCHOOL OF MEDICINE AND PUBLIC HEALTH

Support
provided by



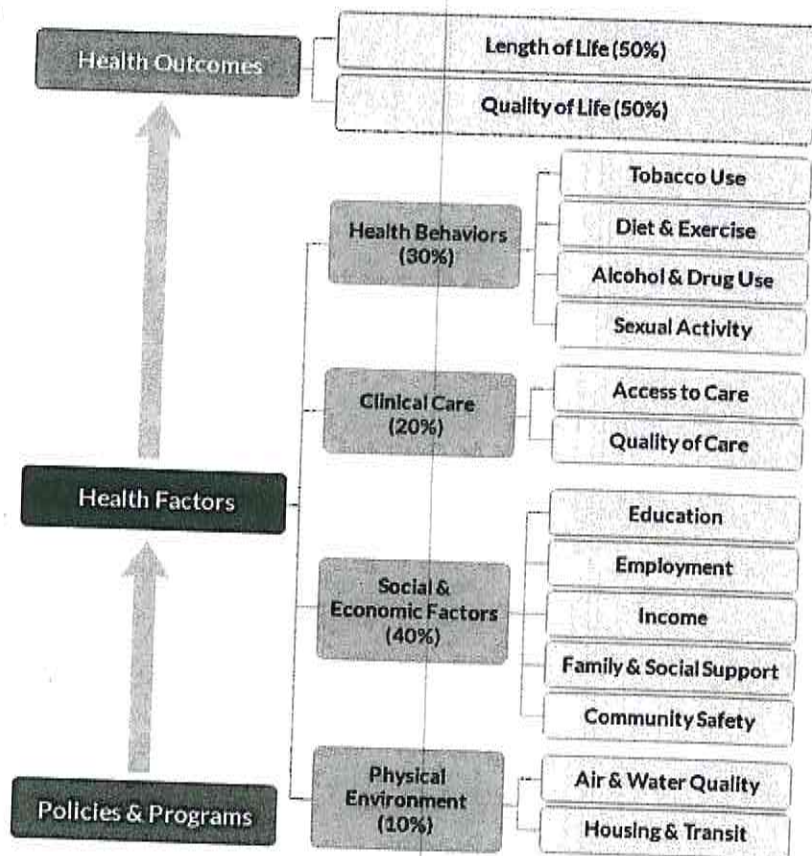
Robert Wood Johnson
Foundation

INTRODUCTION

The *County Health Rankings & Roadmaps* program helps communities identify and implement solutions that make it easier for people to be healthy in their homes, schools, workplaces, and neighborhoods. The Robert Wood Johnson Foundation (RWJF) collaborates with the University of Wisconsin Population Health Institute (UWPHI) to bring this program to cities, counties, and states across the nation. Ranking the health of nearly every county in the nation, the *County Health Rankings* illustrate what we know when it comes to what is making people sick or healthy. The *Roadmaps to Health* and RWJF Culture of Health Prize show what we can do to create healthier places to live, learn, work, and play.

WHAT ARE THE COUNTY HEALTH RANKINGS?

Published online at countyhealthrankings.org, the *Rankings* help counties understand what influences how healthy residents are and how long they will live. The *Rankings* are unique in their ability to measure the current overall health of each county in all 50 states. They also look at a variety of measures that affect the future health of communities, such as high school graduation rates, access to healthy foods, rates of smoking, obesity, and teen births. Communities use the *Rankings* to identify and garner support for local health improvement initiatives among government agencies, healthcare providers, community organizations, business leaders, policy makers, and the public.



MOVING FROM DATA TO ACTION

Roadmaps to Health help communities bring people together to look at the many factors that influence health, select strategies that work, and make changes that will have a lasting impact. The *Roadmaps* focus on helping communities move from awareness about their county's ranking to action to improve people's health. The *Roadmaps to Health* Action Center is a one-stop shop of information to help any community member or leader who wants to improve their community's health by addressing factors that we know influence health, such as education, income, and community safety.

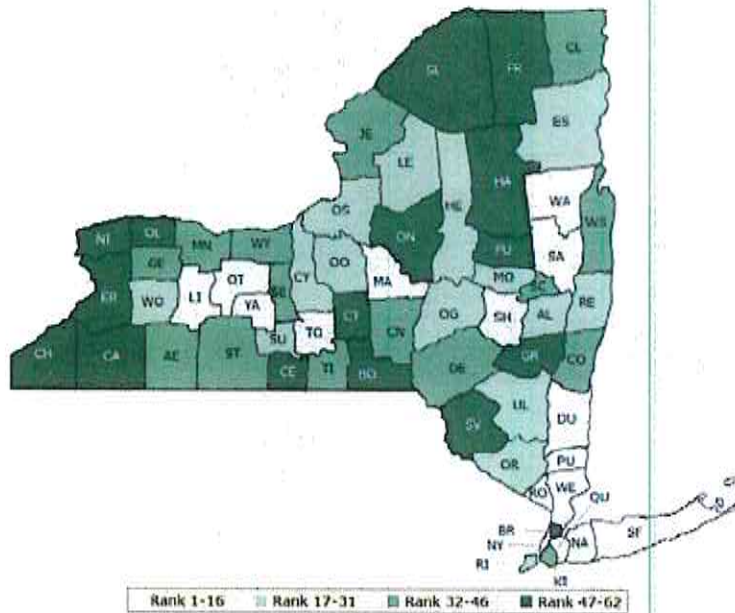
Within the Action Center you will find:

- Online step-by-step guidance and tools to move through the Action Cycle
- *What Works for Health* – a searchable database of evidence-informed policies and programs that can improve health

HOW DO COUNTIES RANK FOR HEALTH OUTCOMES?

The green map below shows the distribution of New York's **health outcomes**, based on an equal weighting of length and quality of life.

Lighter colors indicate better performance in the respective summary rankings. Detailed information on the underlying measures is available at countyhealthrankings.org.

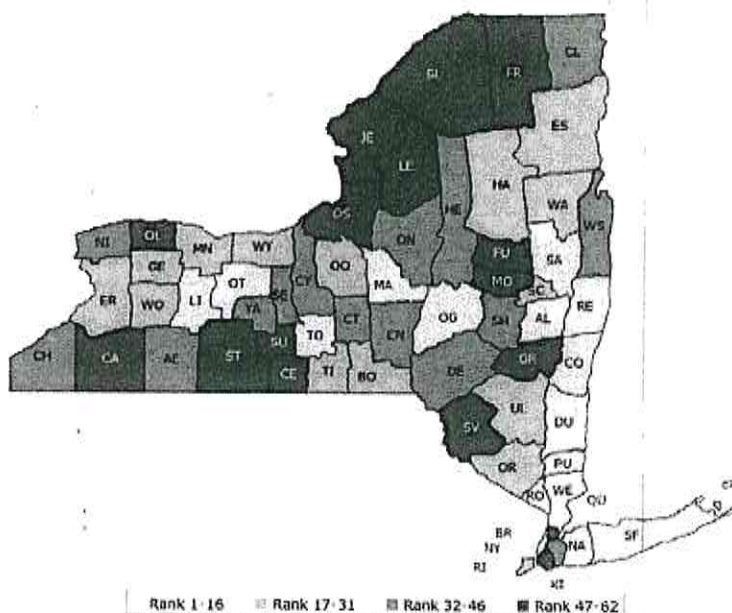


County	Rank	County	Rank	County	Rank	County	Rank
Albany	29	Franklin	50	Oneida	49	Seneca	45
Allegany	42	Fulton	56	Onondaga	28	St. Lawrence	57
Bronx	62	Genesee	40	Ontario	10	Steuben	34
Broome	51	Greene	60	Orange	20	Suffolk	15
Cattaraugus	53	Hamilton	52	Orleans	47	Sullivan	61
Cayuga	18	Herkimer	22	Oswego	31	Tioga	36
Chautauqua	58	Jefferson	44	Otsego	26	Tompkins	4
Chemung	59	Kings	43	Putnam	2	Ulster	21
Chenango	32	Lewis	23	Queens	12	Warren	16
Clinton	37	Livingston	7	Rensselaer	30	Washington	46
Columbia	35	Madison	11	Richmond	24	Wayne	39
Cortland	48	Monroe	38	Rockland	1	Westchester	6
Delaware	33	Montgomery	25	Saratoga	3	Wyoming	17
Dutchess	9	Nassau	5	Schenectady	41	Yates	13
Erie	54	New York	8	Schoharie	14		
Essex	27	Niagara	55	Schuyler	19		

HOW DO COUNTIES RANK FOR HEALTH FACTORS?

The blue map displays New York's summary ranks for **health factors**, based on weighted scores for health behaviors, clinical care, social and economic factors, and the physical environment.

Lighter colors indicate better performance in the respective summary rankings. Detailed information on the underlying measures is available at countyhealthrankings.org.



County	Rank	County	Rank	County	Rank	County	Rank
Albany	9	Franklin	55	Onondaga	18	Seneca	35
Allegany	38	Fulton	53	Ontario	7	St. Lawrence	56
Bronx	62	Genesee	26	Orange	21	Steuben	50
Broome	28	Greene	51	Orleans	59	Suffolk	8
Cattaraugus	49	Hamilton	20	Oswego	61	Sullivan	60
Cayuga	40	Herkimer	45	Otsego	16	Tioga	24
Chautauqua	44	Jefferson	52	Putnam	3	Tompkins	4
Chemung	54	Kings	57	Queens	41	Ulster	30
Chenango	42	Lewis	47	Rensselaer	14	Warren	19
Clinton	34	Livingston	12	Richmond	29	Washington	46
Columbia	13	Madison	15	Rockland	6	Wayne	31
Cortland	32	Monroe	25	Saratoga	2	Westchester	5
Delaware	37	Montgomery	58	Schenectady	17	Wyoming	27
Dutchess	10	Nassau	1	Schoharie	33	Yates	36
Erie	23	New York	11	Schuyler	48		
Essex	22	Niagara	43				

2015 COUNTY HEALTH RANKINGS: MEASURES AND NATIONAL/STATE RESULTS

Measure	Description	US Median	State Overall	State Minimum	State Maximum
HEALTH OUTCOMES					
Premature death	Years of potential life lost before age 75 per 100,000 population	7681	5457	4293	8193
Poor or fair health	% of adults reporting fair or poor health	17%	15%	6%	24%
Poor physical health days	Average # of physically unhealthy days reported in past 30 days	3.7	3.5	2.2	6.5
Poor mental health days	Average # of mentally unhealthy days reported in past 30 days	3.5	3.4	1.6	5.3
Low birthweight	% of live births with low birthweight (< 2500 grams)	8%	8.2%	4.2%	9.8%
HEALTH FACTORS					
HEALTH BEHAVIORS					
Adult smoking	% of adults who are current smokers	21%	17%	9%	31%
Adult obesity	% of adults that report a BMI \geq 30	31%	24%	15%	33%
Food environment index	Index of factors that contribute to a healthy food environment, (0-10)	7.3	8.0	6.3	9.6
Physical inactivity	% of adults aged 20 and over reporting no leisure-time physical activity	27%	23%	16%	29%
Access to exercise opportunities	% of population with adequate access to locations for physical activity	65%	91%	46%	100%
Excessive drinking	% of adults reporting binge or heavy drinking	16%	17%	11%	25%
Alcohol-impaired driving deaths	% of driving deaths with alcohol involvement	31%	24%	11%	60%
Sexually transmitted infections	# of newly diagnosed chlamydia cases per 100,000 population	291	514	109	1209
Teen births	# of births per 1,000 female population ages 15-19	41	24	6	45
CLINICAL CARE					
Uninsured	% of population under age 65 without health insurance	17%	13%	7%	19%
Primary care physicians	Ratio of population to primary care physicians	2015:1	1210:1	5355:1	679:1
Dentists	Ratio of population to dentists	2670:1	1305:1	6280:1	601:1
Mental health providers	Ratio of population to mental health providers	1128:1	443:1	4773:1	146:1
Preventable hospital stays	# of hospital stays for ambulatory-care sensitive conditions per 1,000 Medicare enrollees	65.3	59	38	103
Diabetic monitoring	% of diabetic Medicare enrollees ages 65-75 that receive HbA1c monitoring	85%	86%	78%	93%
Mammography screening	% of female Medicare enrollees ages 67-69 that receive mammography screening	61%	63.1%	52.7%	78.0%
SOCIAL AND ECONOMIC FACTORS					
High school graduation	% of ninth-grade cohort that graduates in four years	85%	77%	58%	90%
Some college	% of adults ages 25-44 with some post-secondary education	56%	65.7%	45.8%	82.5%
Unemployment	% of population aged 16 and older unemployed but seeking work	7%	7.7%	5.0%	11.8%
Children in poverty	% of children under age 18 in poverty	24%	23%	7%	42%
Income inequality	Ratio of household income at the 80th percentile to income at the 20th percentile	4.4	5.5	3.8	8.6
Children in single-parent households	% of children that live in a household headed by single parent	31%	35%	15%	64%
Social associations	# of membership associations per 10,000 population	12.6	7.9	2.5	25.1
Violent crime	# of reported violent crime offenses per 100,000 population	199	400	41	633
Injury deaths	# of deaths due to injury per 100,000 population	73.8	41	29	83
PHYSICAL ENVIRONMENT					
Air pollution – particulate matter	Average daily density of fine particulate matter in micrograms per cubic meter (PM2.5)	11.9	11.7	10.2	13.3
Drinking water violations	% of population potentially exposed to water exceeding a violation limit during the past year	1.0%	26%	0%	50%
Severe housing problems	% of households with overcrowding, high housing costs, or lack of kitchen or plumbing facilities	14%	24%	9%	37%
Driving alone to work	% of workforce that drives alone to work	80%	54%	6%	86%
Long commute – driving alone	Among workers who commute in their car alone, % commuting > 30 minutes	29%	36%	14%	63%

2015 COUNTY HEALTH RANKINGS: DATA SOURCES AND YEARS OF DATA

Measure		Data Source	Years of Data
HEALTH OUTCOMES			
Length of Life	Premature death	National Center for Health Statistics – Mortality files	2010-2012
Quality of Life	Poor or fair health	Behavioral Risk Factor Surveillance System	2006-2012
	Poor physical health days	Behavioral Risk Factor Surveillance System	2006-2012
	Poor mental health days	Behavioral Risk Factor Surveillance System	2006-2012
	Low birthweight	National Center for Health Statistics – Natality files	2006-2012
HEALTH FACTORS			
HEALTH BEHAVIORS			
Tobacco Use	Adult smoking	Behavioral Risk Factor Surveillance System	2006-2012
Diet and Exercise	Adult obesity	CDC Diabetes Interactive Atlas	2011
	Food environment index	USDA Food Environment Atlas, Map the Meal Gap	2012
	Physical inactivity	CDC Diabetes Interactive Atlas	2011
	Access to exercise opportunities	Business Analyst, Delorme map data, ESRI, & US Census Tigerline Files	2010 & 2013
Alcohol and Drug Use	Excessive drinking	Behavioral Risk Factor Surveillance System	2006-2012
	Alcohol-impaired driving deaths	Fatality Analysis Reporting System	2009-2013
Sexual Activity	Sexually transmitted infections	National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention	2012
	Teen births	National Center for Health Statistics – Natality files	2006-2012
CLINICAL CARE			
Access to Care	Uninsured	Small Area Health Insurance Estimates	2012
	Primary care physicians	Area Health Resource File/American Medical Association	2012
	Dentists	Area Health Resource File/National Provider Identification file	2013
	Mental health providers	CMS, National Provider Identification file	2014
Quality of Care	Preventable hospital stays	Dartmouth Atlas of Health Care	2012
	Diabetic monitoring	Dartmouth Atlas of Health Care	2012
	Mammography screening	Dartmouth Atlas of Health Care	2012
SOCIAL AND ECONOMIC FACTORS			
Education	High school graduation	data.gov, supplemented w/ National Center for Education Statistics	2011-2012
	Some college	American Community Survey	2009-2013
Employment	Unemployment	Bureau of Labor Statistics	2013
Income	Children in poverty	Small Area Income and Poverty Estimates	2013
	Income inequality	American Community Survey	2009-2013
Family and Social Support	Children in single-parent households	American Community Survey	2009-2013
	Social associations	County Business Patterns	2012
Community Safety	Violent crime	Uniform Crime Reporting – FBI	2010-2012
	Injury deaths	CDC WONDER mortality data	2008-2012
PHYSICAL ENVIRONMENT			
Air and Water Quality	Air pollution – particulate matter ¹	CDC WONDER environmental data	2011
	Drinking water violations	Safe Drinking Water Information System	FY2013-14
Housing and Transit	Severe housing problems	Comprehensive Housing Affordability Strategy (CHAS) data	2007-2011
	Driving alone to work	American Community Survey	2009-2013
	Long commute – driving alone	American Community Survey	2009-2013

¹ Not available for AK and HI.

	New York	Cattaraugus (CA)	Rockland (RO)
Health Outcomes			
Length of Life		53	1
Premature death		59	2
Quality of Life	5,457	7,068	4,294
Poor or fair health	15%	38	5
Poor physical health days		18%	12%
Poor mental health days	3.5	4.0	2.5
Low birthweight	3.4	2.9	2.8
Health Factors	8.2%	7.4%	6.4%
Health Behaviors		49	6
Adult smoking		44	1
Adult obesity	17%	23%	9%
Food environment index	24%	29%	24%
Physical inactivity	8.0	8.3	8.5
Access to exercise opportunities	23%	29%	24%
Excessive drinking	91%	64%	95%
Alcohol-impaired driving deaths	17%	12%	11%
Sexually transmitted infections	24%	26%	23%
Teen births	514	214	261
Clinical Care	24	35	15
Uninsured		55	9
Primary care physicians	13%	13%	11%
Dentists	1,210:1	2,037:1	1,045:1
Mental health providers	1,305:1	2,254:1	1,000:1
Preventable hospital stays	443:1	1,052:1	430:1
Diabetic monitoring	59	61	52
Mammography screening	86%	87%	89%
Social & Economic Factors	63.1%	53.1%	66.8%
High school graduation		49	8
Some college	77%	80%	87%
Unemployment	65.7%	54.2%	65.9%
Children in poverty	7.7%	8.1%	5.9%
Income inequality	23%	29%	25%
Children in single-parent households	5.5	4.3	5.0
Social associations	35%	34%	16%
Violent crime	7.9	14.3	9.9
Injury deaths	400	207	160
Physical Environment	41	53	29
Air pollution - particulate matter		58	61
Drinking water violations	11.7	13.0	10.9
Severe housing problems	26%	13%	45%
Driving alone to work	24%	14%	25%
Long commute - driving alone	54%	78%	71%
	36%	27%	40%

**Century Health
Century & Partners**

	New York	Wyoming (WYO)	Cattaraugus (CA)	Allegany (AE)	Chautauqua (CH)	Erie (ER)	Niagara (NI)	Genesee (GE)	Orleans (OL)
Health Outcomes		17	53	42	58	54	55	40	47
Length of life		15	59	42	56	57	54	47	44
Premature death	5,457	5,624	7,068	6,233	6,970	6,994	6,824	6,561	6,435
Quality of life		18	38	37	57	44	54	17	48
Poor or fair health	15%	14%	18%	16%	16%	13%	14%	12%	19%
Poor physical health days	3-5	3-9	4-0	3-6	4-4	3-9	4-2	4-0	5-0
Poor mental health days	3-4	4-5	2-9	3-3	4-1	3-3	4-2	4-2	3-4
Low birthweight	8.2%	5.6%	7.4%	7.6%	8.2%	8.3%	8.2%	6.1%	7.0%
Health Factors		27	49	38	44	23	43	26	59
Health Behaviors		21	44	42	48	30	47	27	55
Adult smoking	17%	18%	23%	21%	24%	16%	23%	18%	29%
Adult obesity	24%	28%	29%	31%	26%	29%	30%	29%	31%
Food environment index	8.0	8.3	8.3	8.3	8.0	7.7	7.9	8.7	7.9
Physical inactivity	23%	25%	29%	24%	27%	23%	24%	24%	27%
Access to exercise opportunities	91%	60%	64%	55%	73%	95%	87%	67%	74%
Excessive drinking	17%	19%	12%	22%	21%	19%	18%	18%	13%
Alcohol-impaired driving deaths	24%	11%	26%	27%	29%	29%	28%	29%	20%
Sexually transmitted infections	514	232	214	180	416	554	429	293	367
Teen births	24	17	35	20	33	26	27	23	28
Clinical Care		49	55	42	22	10	41	54	62
Uninsured	13%	11%	13%	11%	10%	9%	10%	11%	11%
Primary care physicians	1,210:1	2,327:1	2,937:1	2,545:1	1,964:1	1,256:1	2,364:1	2,999:1	5,355:1
Dentists	1,305:1	3,195:1	2,254:1	3,701:1	1,848:1	1,299:1	1,896:1	2,831:1	5,279:1
Mental health providers	443:1	681:1	1,052:1	659:1	837:1	492:1	1,035:1	803:1	2,346:1
Preventable hospital stays	59	73	61	61	52	43	76	71	103
Diabetic monitoring	86%	86%	87%	84%	84%	85%	86%	85%	85%
Mammography screening	63.1%	59.8%	53.1%	60.8%	68.2%	60.3%	63.3%	58.9%	58.7%
Social & Economic Factors		19	49	25	44	33	34	11	50
High school graduation	77%	85%	80%	87%	80%	80%	83%	84%	86%
Some college	65.7%	51.4%	54.2%	54.3%	60.4%	71.3%	65.2%	63.9%	48.7%
Unemployment	7.7%	7.8%	8.1%	7.6%	7.9%	7.4%	8.0%	6.7%	9.0%
Children in poverty	23%	17%	29%	26%	30%	23%	20%	19%	25%
Income inequality	5-5	3-9	4-3	4-3	4-6	5-0	4-7	4-0	4-1
Children in single-parent households	35%	34%	34%	30%	36%	38%	37%	29%	41%
Social associations	7-9	15-8	14-3	18.6	17.1	10.1	10.6	13.2	13-3
Violent crime	400	95	207	151	226	468	378	172	173

	New York	Wyoming (WYO)	Cattaraugus (CA)	Allegany (AL)	Chautauqua (CH)	Erie (ER)	Niagara (NI)	Genesee (GE)	Orleans (OL)
Injury/deaths	41	49	53	56	54	49	56	55	46
Physical Environment		57	58	43	51	49	50	46	54
Air pollution - particulate matter	11.7	12.7	13.0	12.7	13.3	12.9	12.8	12.7	12.7
Drinking water violations	26%	16%	13%	6%	1%	0%	0%	0%	0%
Severe housing problems	24%	11%	14%	14%	14%	16%	14%	13%	16%
Physical disability									
Driving alone to work	54%	82%	78%	72%	80%	81%	86%	84%	83%
Long commute - driving alone	36%	37%	27%	30%	19%	23%	27%	31%	38%

	2010	2011	2012	2013	2014	2015
Health Outcomes	56	54	50	51	52	53
Mortality	59	59	58	57	57	59
Morbidity	41	34	35	34	33	38
Health Factors	56	56	53	53	55	49
Health Behaviors	58	52	43	42	44	44
Clinical Care	55	62	54	56	54	55
Socioeconomic Factors	50	54	51	53	55	49
Physical Environment	15	32	11	37	58	58

