

GENESEE COUNTY HEALTH DEPARTMENT



2026 Program Budget

Adopted November 24, 2025

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VISION / MISSION / VALUES

VISION

Everyone in our region can achieve an optimal and equitable level of health and well-being.



MISSION

Genesee Orleans Departments of Health (GO Health) is a shared services arrangement that promotes the necessary safe and healthy environment, and health behaviors, that lead to improved health outcomes and community quality of life.



CORE VALUES

Commitment: We improve our work environment and services through a continuous dedication to each other and staying true to public health principals and our vision.

Integrity: We maintain a high standard of professionalism, transparency, honesty and fairness, building trust as we deliver services and represent the departments and counties we serve.

Respect: We demonstrate in our actions and words that all people are important and deserving of fair and equitable treatment.

Collaboration: We work together as a team, across agencies, and with the community toward our common goals.

Leadership: We embrace a culture of transcending influence throughout our organization and the community.

Excellence: We consistently perform to the best of our abilities in all aspects of the work we do.

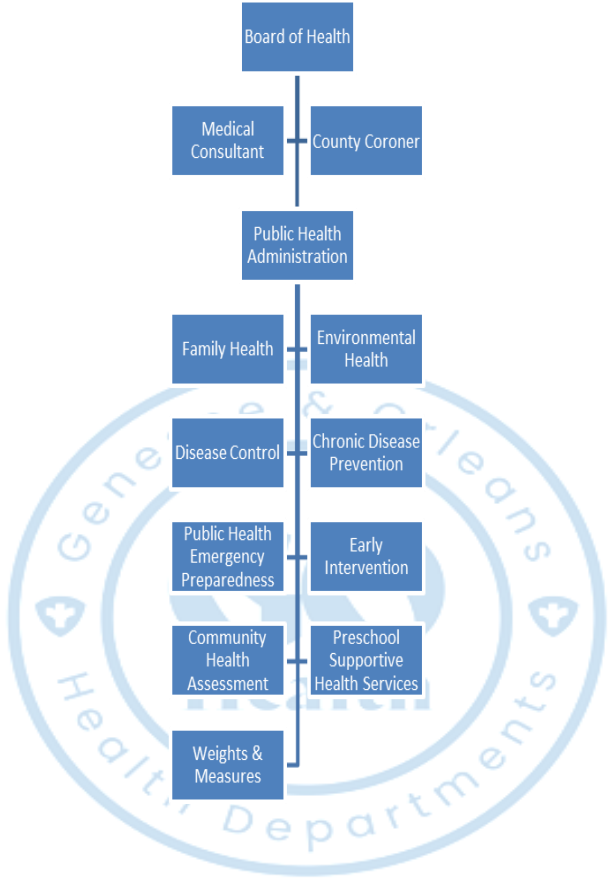


STRATEGIC INTENT

Move from a narrow focus on meeting baseline regulatory-required aspects of public health to a broader population health agenda. With municipal, county, private sector, and regional partners, address the social determinants that influence overall health and well-being.



GENESEE COUNTY HEALTH DEPARTMENT ORGANIZATIONAL CHART



Genesee County Health Department (GCHD) – Overview

The Health Department follows the mandates of the New York State Public Health Law (PHL). PHL mandates that each municipality in the State appoint a Board of Health which is empowered to protect the health and safety of its residents through enforcement of the PHL, New York State and local County Sanitary Codes. In 2015, the Board of Health was combined with Orleans County and now consists of seven members appointed by both County Legislatures to six-year terms, one from each County Legislature, and at least three of whom are licensed physicians. The remaining members are community representatives that have professional backgrounds which strengthen and promote the health care provided by the Health Department. The Board of Health is a policy or rule making body and not an advisory board. The Board of Health, by statute, hires the Public Health Director.

The GCHD is a full-service Public Health Agency, offering a number of diverse programs and activities within the mandated core areas of Family Health, Disease Control, Health Education, Community Health Assessment, Public Health Preparedness and Environmental Health. The department also provides optional programs (Preschool 3-5, Early Intervention, Coroner/Medical examiners services and Weights and Measures) specific to the health needs of Genesee and Orleans residents. There are currently 29 full time, including 8 shared staff working within the above mentioned Health Department divisions / program areas.

2026 Focus Areas

As a department, we continue to lead in many areas when it comes to utilizing technology and enhancing public delivery in New York State. Our shared service model and continued integration of staffing and services are still recognized as a best practice and model approach to improved public health delivery. The landscape we operate in along with expanding un(der)funded mandates continues to shift resulting in the need for highly trained and adaptive staff that can help ensure our residents are safe and prepared during emergency situations. Our ongoing/standard funding streams are forecasted to be relatively flat in 2026. There remains significant uncertainty around Federal funding and impact for NYS as we move forward. This impact may result in additional direct services for under/uninsured residents as we fulfill our SafetyNet role in our community. Our goal is to continue to focus on our Chief Health Strategist role and seek opportunities for community partners to deliver services. Our fiscal approach continues to be conservative and always scanning for changes while seeking additional funding streams to enhance services and reduce county costs.

Core, mandated public health programming will be the focus in 2026. This includes tracking emerging infectious diseases (monkey pox, polio....), wastewater surveillance for infectious disease (COVID, influenza, RSV), core program delivery, collaboration and public education. The use of technology continues to be a priority as the traditional means to communicate and push out information to the public continues to change. All departments are transitioning to electronic media and reporting to be more efficient in both education and service delivery. The department continues to explore ways to be innovative in the way we deliver services including researching ways to leverage AI enhance and expand our reach and data collection in our departmental programs.

The department has realized significant programmatic and fiscal savings from our shared services to date. Currently, Genesee County is routinely sharing 8 staff including 5 administrative staff with Orleans County. Ongoing alignment of policies and procedures and a shared vision has been driven by common oversight of the department's core divisions. All staff in both Counties are encouraged to look for opportunities to work collaboratively and integrate services whenever possible. The cross-

jurisdictional sharing (CJS) activities show annual reoccurring savings of approximately \$750,000 in 2026 for both counties by working collaboratively. These savings and other service enhancements have generated savings of over \$4,765,000 since 2012 and are expected to continue moving forward.

Looking ahead, the following is a fluid list of focus areas for the Department in 2026:

- PHAB reaccreditation process – starting 5-year cycle for reaccreditation
- Continue wastewater analysis for various infectious diseases, opioids and monitoring trends in the county, there is a shift from past years with our infectious disease monitoring is now being done by NYS verse internally
- Developing/implementing Emergency Preparedness initiatives including MRC growth, promoting the new Preparedness App, and continuing to support planning and community resiliency.
- Advocacy for rural health and stabilization of revenue and program mandates
- Respond to the changing landscape with conservative approach responses to new un/underfunded mandates.
- Reapplying for the next round of HUD lead grants to ensure resources for our region
- Implementation of current HUD grants (lead and healthy homes) across the GLOW region
- Seek out additional funding streams to offset county cost related to mandate expansion
- Continue to identify ways to leverage additional integration of the CJS relationship and opportunities with other neighboring counties
- Implement the newly developed Community Health Improvement Plan (CHIP).
- Continuing to work with the new GOW CARES Alliance in addressing Substance use and suicide issues
- Continued use of drones for public health applications. Train and certify additional staff to fly drones in the field.
- Continue to evaluate and work on the program challenges and cost implications of the Pre-K program, including issuing a new bid for transportation services in 2026
- Workplace recruitment and retention initiatives – leverage new CDC infrastructure funding to retain and train staff
- Additional program specific goals / service needs are listed under program areas

Although 2026 will be another tight year fiscally, we expect continued departmental stability through leveraging our CJS relationship, working with County administration, community and regional stakeholders for the delivery of public health services to the residents of Genesee and Orleans County.

DEPARTMENTAL DIVISIONS

EARLY INTERVENTION PROGRAM

The Early Intervention Program (EIP) is part of the national Early Intervention Program for infants and toddlers with disabilities and their families. First created by Congress under the Individuals with Disabilities Education Act (IDEA), the EIP is administered by the New York State Department of Health through the Bureau of Early Intervention. To be eligible for services, children must be less than three years of age and have a confirmed disability or established developmental delay, as defined by the State, in one or more of the following areas of development: physical, cognitive, communication, social-emotional, and/or adaptive.

The mission of the program is to identify and evaluate as early as possible those infants, and toddlers, whose healthy development is compromised and provide for appropriate intervention to improve both child and family development. This is achieved by a variety of services, including: family education and counseling, home visits, and parent support groups, special instruction, speech therapy, audiology services, occupational therapy, physical therapy, psychological services, service coordination, nutrition services, social work services, vision services, and assistive technology devices. Research conducted by Rand Corporation has shown, "Well designed early interventions have been found to generate a return to society ranging from \$1.80 to \$17.07 for each dollar spent on the program."¹ Benefits include, but are not limited to, academic achievement, behavior and educational development.

In late 2013, Public Consulting Group (PCG) took over as the New York State Department of Health's State Fiscal Agent for the Early Intervention Program. In 2019, PCG was awarded the State contract to continue as the NYS Fiscal Agent for Early Intervention and they have also developed a new system to replace the current New York Early Intervention System (NYEIS). The new system, called the EI Hub, was released in October 2024. Many issues were identified as problematic with the EI Hub. PCG has worked to fix the issues and the EI Hub is the current system that is used in the Early Intervention Program to do billing and claiming and to enter case management information into for each child in the Early Intervention Program.

There continues to be a severe shortage of providers for Early Intervention and the Preschool Supportive Health Services Programs. Many therapists are leaving these programs for better paying jobs and benefits. The shortage is throughout New York State. In the 2024 New York State budget, a five percent increase was approved for Early Intervention services with an additional four percent increase for rural zip codes (we are not sure if any areas of Genesee is included in the rural zip codes). These rates are to finally go into effect in late 2025 or early 2026. The goal of the increase is to retain the providers we currently have and to try and recruit new providers. There hadn't been a very large increase in rates since the program began in New York State in 1993.

Early Intervention Goals for 2026:

- Locate new providers and/or find innovative ways to make sure all children in the Early Intervention Program are receiving their services as identified on their IFSP.
- Continue learning the new EI Hub system and make sure service coordinators are maximizing what is billable for service coordination.
- Improve on meeting the Federal indicators in the Early Intervention Program at the required 100%.

PRESCHOOL SUPPORTIVE HEALTH SERVICES PROGRAM

In 1975, Congress passed Public Health Law 94-142 (Education of All Handicapped Children Act), which was the first major law to ensure a public education for children with disabilities, ages five to twenty-one. The intent was to provide each student with a disability a free appropriate public education (FAPE). The Act reauthorized several times since, includes children ages three to five years, and is now codified as the Individuals with Disabilities Education Act (IDEA) (PL 108-446). States are required to establish and implement policies that assure a FAPE to all children with disabilities.

The Preschool Supportive Health Services Program (PSHSP) is a mandated partnership between Genesee County and local school districts to provide services for children ages three to five years of age who have a disability or exhibit delays in development, which affect their learning. The purpose of this program is to maximize a child's developmental and educational potential prior to the start of kindergarten. Services include, but are not limited to educational and physical evaluations, transportation, special education teacher services, physical therapy, speech therapy and occupational therapy. Local School Districts guide families through the program while Genesee County and the New York State Education Department share the cost of the educational services.

Section 1903 (C) of the Social Security Act permits payment of certain Medicaid-covered services furnished to children with disabilities if those services are included in an Individualized Education Plan (IEP). Currently, in New York State, Medicaid-covered services for students with an IEP include:

Physical Therapy, Occupational Therapy, Speech Therapy, Psychological Evaluations, Psychological Counseling, Skilled Nursing, Medical Evaluations, Medical Specialist Evaluations, Audiology Evaluations, Special Transportation

Genesee County is responsible for contracting with service providers and transporters. Tuition rates, multidisciplinary evaluation rates and Itinerant Teacher rates are determined by New York State, while County Officials determine related services' rates. The cost of transportation is approved through a bidding process in accordance with the provisions of the general municipal law. The County is reimbursed by the state 59.5% minus any Medicaid payment on eligible children for services and transportation expenditures. The county also receives \$75 per child for administrative costs. In the current 2025-2026 school year the PSHSP will have approx. 290 kids. School districts are reimbursed for each child referred to the Committees on Preschool Special Education (CPSE) in their school district. If an individual school district's costs exceed the federal allocation, and is approved by the New York State Commissioner of Education, the County is then responsible for the additional cost incurred by the district. The County would then receive 59.5% reimbursement from New York State for CPSE administrative costs.

For the 2025-2026 school year, Genesee County continued to contract with a Municipal Representative from the previous years. The Municipal Representative attended most of the Committee on Preschool Special Education (CPSE) meetings held throughout the year. The contracted Municipal Representative is continuing to fight to control unnecessary spending in the program. The representative works carefully to ensure each student receives the correct level of service to meet his/her needs. The Municipal Representative is able to advocate on the county's behalf in an attempt to control unnecessary services from being incorporated into a child's Individualized Education Program.

Related Service (RS) provider shortages continue to persist. Current RS provider rate is \$63 and will increase to \$65 starting in September 2026.

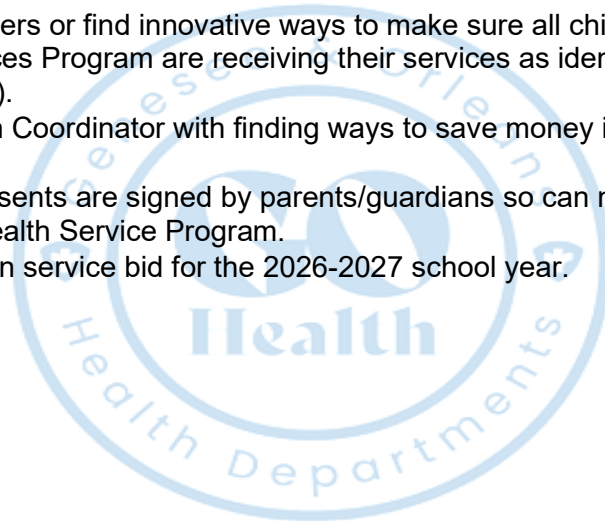
For the 2025-2026 school year, Genesee County will once again be contracting with WNY Bus Company and GLOW ARC Transportation to provide preschool transportation. The (5) year transportation contract with GLOW ARC and WNY Bus Company ends in 2026, a new (5) year contract will be bid out for a start date in September 2026. Since the amount of children attending center-based preschool special education programs has increased in the last few years, so has the cost of transportation. The transportation coordinator is constantly looking for ways to save money to help reduce the cost of transportation. Batavia City school

district is bussing some of their preschool special education students to the Batavia City school district preschool special education program. This is at a reduced cost from what the contractors are paid. Parents are also encouraged to transport their child to their center-based preschool special education program and receive mileage reimbursement.

Throughout 2025, there continued to be a provider shortage in all disciplines for the PSHSP in Genesee County. There was a waitlist throughout the year for some children to receive their recommended services. New York State Education Department has let school districts know that it is their responsibility to have all children with an Individualized Education Program (IEP) receive their services and if the district is unable to locate a provider then the district needs to be the provider. In September 2022 the Batavia City School District opened up a center-based program and for the 2024-2025 school year there were approximately 47 children attending the Batavia School District center-based program from Genesee County. In the 2025-2026 school year, there is predicted to be 36 children from Genesee, Orleans and Wyoming Counties attending the Batavia City School District program. In September 2025, there will be approximately 25 children from Genesee County attending the Batavia City School District program, this is a decrease from the previous two years. Other children that qualify for center-based programs attend programs out of county.

Preschool Supportive Health Services Goals for 2026:

- Contract with new providers or find innovative ways to make sure all children in the Preschool Supportive Health Services Program are receiving their services as identified on their Individualized Education Program (IEP).
- Assist the Transportation Coordinator with finding ways to save money in the transportation costs for the County.
- Make sure Medicaid consents are signed by parents/guardians so can maximize Medicaid billing for the Preschool Supportive Health Service Program.
- New 5 year transportation service bid for the 2026-2027 school year.



ENVIRONMENTAL HEALTH

The Environmental Health Department (EH) provides services to 57,800 residents (2021 population estimate, US census) in the County. Maintaining a healthy environment is central to increasing quality of life and years of healthy life for all Genesee County residents and visitors. EH protects against Public Health threats such as food- and water-borne illnesses, inadequate sanitation, and environmental hazards; prevents and controls rabies, adolescent tobacco use, smoking in public and work places, public health nuisances, injuries, disease, epidemics; and promotes wellness. To ensure these core services are provided, EH has six (6) full-time staff. The Lead Poisoning Prevention Program and its associated housing grants, led by the Lead Program Coordinator and four (4) full-time staff. All EH staff are under the direction of a shared Environmental Director for both Genesee and Counties.

Regulatory Programs

Regulatory programs and services are designed to minimize environmental health threats in order to protect public health and/or prevent illness in specific populations. Under the direction and guidance of five (5) sections of the New York State Department of Health – Division of Environmental Health Protection, environmental employees provide inspection services to businesses or portions of businesses operating under permit or regulatory acts in the following areas:

- *Adolescent tobacco use prevention (ATUPA)*
- *Agricultural fairgrounds and campgrounds*
- *Childhood lead poisoning prevention*
- *Children's camps*
- *Clean indoor air act (tobacco smoke)*
- *Cooling towers*
- *Drinking water quality/treatment/systems*
- *Food service facilities*
- *Hotels and motels*
- *Lead in School Drinking Water*
- *Mass gatherings*
- *Migrant farm worker housing*
- *Mobile home parks*
- *Public health nuisances*
- *Recreational water safety*
- *Ultraviolet tanning facilities*

Community Health Programs

- *Rabies prevention:* Under Title IV of NYS Public Health Law, the county health authority is responsible for the services and expenses necessary for the suppression of human rabies. As part of the rabies prevention program, environmental employees are required to:
 - Perform prompt investigation of possible exposures
 - Make arrangements for appropriate disposition of animals involved
 - Prepare animal specimens for laboratory testing
 - Verify terms of confinement, observation and quarantines
 - Operate rabies vaccination clinics
 - Provide consultation services for urgent bite situations 24/7, 365 days per year
- *Residential and onsite wastewater treatment (OWTS):* Environmental employees provide technical assistance in the design and construction of residential onsite systems. Technical assistance is provided during on-site visits as well as by phone and includes:
 - *Evaluations of site, soil and/or existing systems*
 - *Dissemination of information on minimum standards acceptable in New York State when residential onsite systems are being designed and/or constructed per 10NYCRR*

2026 Objectives

- Continue supporting municipalities' expansion of water districts to supply safe drinking water to their residents, while prioritizing and considering water supply issues
- Increase the sharing and alignment of services between Genesee and Orleans counties
- Maintain full staffing, ensure all staff is fully trained and has all necessary certifications
- Successful implementation of all current grant programs, continue applying for and receiving new grant funding opportunities
- Raise awareness of the rabies virus and rabies virus prevention, carry out successful rabies vaccination clinics – reevaluate for increased efficiency
- Enhance partnerships with Livingston and Wyoming Counties' Environmental divisions
- Increase lead testing rates in children ages 1 and 2
- Mentor interns that are interested in the field of Environmental Health
- 2025-2030 DWE Grant: Increase of \$9,524 in funding for an annual total of \$95,446.
- Increased Env. Health fees in 2025 to offset increased salaries and fringe.



PUBLIC HEALTH NURSING

For 2026, the nursing division is looking forward to collaborating on some new and existing initiatives, as well as consistently providing core common public health services. Some highlights to come are:

- Partnering with elementary schools to provide asthma education.
- Continue with an opioid overdose prevention program for the training of community members for the appropriate use of naloxone.
- Continue a strong relationship with the Genesee County Jail to provide adult vaccines.
- Participate in the Baby Café to promote lactation
- Work with GCASA to provide adult vaccines to their residential clients.
- Promote the importance of the Hepatitis A vaccine to food service workers.
- Continue the joint-cross jurisdictional partnership with Orleans by aligning public health nursing efforts for both departments.
- Measles education to make sure our population is up to date on their vaccines.

CHRONIC DISEASE PREVENTION

In addition to causing major limitations in daily living and leading to high costs of health care, chronic diseases are among the most preventable. Factors such as reducing or preventing tobacco use, poor diet and physical inactivity are known to protect and to reduce the incidence of chronic disease. Outreach and education methods are more important than ever, as society faces the threats of emerging and resurgent disease. The community is burdened with chronic diseases such as asthma, cancers, heart disease, and diabetes. Ensuring the public is able to acquire information, services and the skills needed to make quality-educated decisions based on sound theories will provide a healthier community and stronger workforce.

Lead Poisoning Prevention Program

There are several goals set out by NYSDOH for the Lead Poisoning Prevention Program. The education of the public, health care providers, other professionals and policy makers regarding the issue of lead poisoning and its prevention in children and pregnant women is ongoing.

An important goal is to improve lead testing rates of all one-year-old children and two-year-old children. In addition, testing should be arranged for or provided for uninsured or underinsured children. If so, it should increase rates as its use has already been shown to do. It would be helpful to consider the expense related to provision of these units. Follow-up of children with elevated blood lead levels is an obvious goal. Finding and getting rid of lead sources before children or pregnant women (or anyone else) is lead poisoned is a primary preventive goal. This is one area which the coordinator has discussed in relationship to the use of GIS mapping to determine where, in neighborhoods, clusters of available lead might be found. The Genesee County Health Dept. teamed up with Orleans, Livingston and Wyoming County for a Lead Poisoning Prevention CDC Grant. We were awarded the grant 5 year (\$1,241,130) grant in August of 2021. The funding will be used to support prevention strategies for childhood lead poisoning prevention, including blood lead surveillance, improving linkages to recommended services and ensuring blood lead testing and reporting.

Immunization program

The area of immunizations seems somewhat less stable since the Centers for Disease Control and Prevention (CDC) has tied the ability to order Vaccine for Children (VFC) vaccine to providers' willingness and ability to enter all the immunizations they provide for children, 0 to 18, into the New York State Immunization Information System (NYSIIS). The Health Department is a safety net and as such, needs to be ready to change direction according to what is needed without wasting resources.

Maternal and Child Health

One of the goals to increase client acceptance is to discover a means of meeting prospective mothers while they are still pregnant. An introduction by someone they know and trust, the obstetrician, for example, would initiate a more positive relationship than a phone call after delivery when Mom is home and too tired to deal with one more unknown. The nurses would continue to attend discharge planning at United Memorial Medical Center (UMMC) as that is a valuable contact.

Rabies

Public Education is being utilized to increase the public's knowledge of the proper way to handle a possible exposure. Education is also essential to inform the public not to touch any wild animals.

Mosquito and Tick Surveillance

Continue mosquito trapping for surveillance of the *Aedes albopictus* species.
Continue working with New York State Department of Health for tick surveillance.

Genesee County Jail

Continue the successful partnership with the Genesee County Jail to administer vaccines through the vaccine for adult program to the inmates. Genesee County Health Department nurses will go to the jail and administer these vaccines.

Opioid Overdose Prevention Program

Develop an opioid overdose prevention program for the training of community members for the appropriate use of naloxone. Health department staff will conduct these community trainings. The prevention program will also work with the opioid overdose taskforce.

Wastewater Analysis

We have a contract with Biobot a wastewater analysis company, to look for chemical substances such as (Fentanyl, Nicotine, Cocaine, Methamphetamines) in two of our communities.

EPIDEMIOLOGY

Structure and Responsibilities

The Deputy Public Health Director/Director of Community Health Services leads a multidisciplinary team comprising two Epidemiologists, three Public Health Nurses, and an Epidemiology Coordinator. The Coordinator also serves as the Accreditation Coordinator and Public Information Officer, while spearheading efforts to expand GO Health's epidemiological capacity.

Each Epidemiologist fulfills a distinct role:

- One is a permanent staff member focused on communicable disease investigations and a broad portfolio of public health initiatives.
- The other is grant-funded, dedicated exclusively to implementing and managing the CDC's Lead Poisoning Prevention Program (CLPPP) across the Genesee, Livingston, Orleans, and Wyoming (GLOW) counties. This includes monitoring childhood lead levels and coordinating a regional Lead Coalition. The grant-funded Epidemiologist reports to the Lead Program Coordinator within the Environmental Health team.

GO Health's permanent epidemiology staff are subject matter experts in investigating over 60 reportable diseases as mandated by NYSDOH. Their expertise has become increasingly critical in addressing emerging threats such as H5N1.

Surveillance

GO Health publishes weekly updates on confirmed cases of COVID-19, Influenza A and B, and RSV, accessible via the department's website. These reports help identify trends, support healthcare planning, and inform vulnerable populations. While case counts offer valuable insights, they likely underestimate true community transmission due to limited testing. Previously, these figures were supplemented by wastewater surveillance data—available until August 2025, when federal funding cuts ended the program. Participating sewer sheds in Genesee County included Batavia, Elba, and LeRoy.

Additionally, an Epidemiologist co-chairs the Community Trends Work Group within the GOW Cares Alliance. This group analyzes current health data to guide decision-making and collaborates across agencies to develop strategies aimed at reducing overdose and suicide fatalities. GO Health also maintains a publicly accessible overdose dashboard featuring fatality trends, demographic breakdowns, and key findings.

Fatality Review Board

In partnership with the Public Health Director, an Epidemiologist coordinates the Fatality Review Board (FRB) in Genesee County. Established in 2024, the FRB is a confidential, multidisciplinary team that reviews overdose and suicide deaths. It brings together experts from substance use treatment, mental health, social services, law enforcement, and elected officials to conduct thorough case reviews. A vital component includes interviews with the decedent's next-of-kin to gain deeper

insights. The FRB aims to identify shared risk factors and systemic gaps, producing actionable, data-informed recommendations to prevent future fatalities. Meetings and implementation efforts are ongoing.

Developing Professionals in Epidemiology

The Epidemiology Coordinator serves as a lead mentor for student interns and fellowship programs. Following the COVID-19 pandemic, there has been a demonstrable increase in student interest in the field of epidemiology. In response to this trend, the Coordinator provides structured mentorship to one to two interns annually. This plays a critical role in cultivating future public health professionals, strengthening workforce capacity, and advancing the department's commitment to education and professional development within the epidemiological sciences.

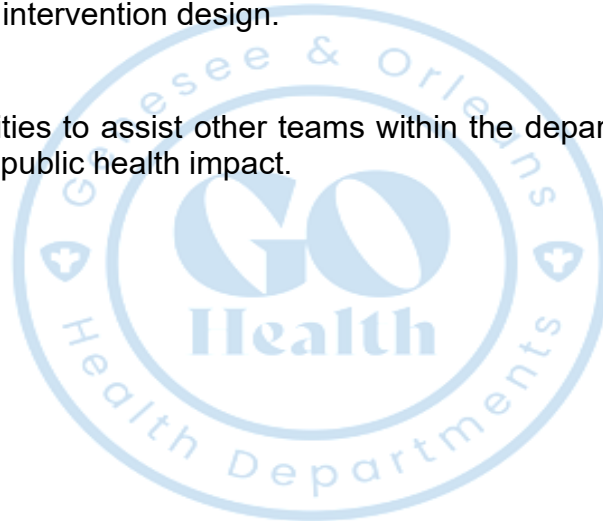
2026 Objectives:

- **Enhanced Data Visualization**

Expand public health surveillance on the GO Health website by integrating ArcGIS mapping tools. Featured datasets may include chronic disease prevalence and social determinants of health. These visualizations will support CHA and CHIP efforts and assist stakeholders in funding proposals and intervention design.

- **Cross-Team Support**

Explore new opportunities to assist other teams within the department, fostering collaboration and enhancing overall public health impact.



PUBLIC HEALTH EDUCATION

Core Responsibilities

The Public Health Education (PHE) team is made up of the Director of Health Promotion and the Public Health Educator/Public Information Officer (PIO). Together, they are responsible for:

- Maintaining and cultivating existing partnerships while identifying opportunities to develop new collaborations
- Promoting departmental services and providing referrals to community resources to support public health initiatives
- Delivering educational presentations to the community and partner organizations on a variety of public health topics
- Developing, implementing, tracking, and evaluating the Community Health Assessment (CHA) and Community Health Improvement Plan (CHIP)
- Assisting in grant writing to secure funding for expanded programming and resources
- Managing the GO Health website and social media accounts to enhance public engagement
- Serving as the Public Information Officers for GO Health, ensuring accurate and timely communication
- Representing the department on multiple local coalitions to foster collaboration and advocacy
- Fulfilling quarterly deliverables associated with grants and departmental programs
- Mentoring public health interns, providing guidance and professional development opportunities

Health Education Programming and Training

The Public Health Education team implements a variety of educational programs and trainings, including:

- **Immunization Program:** Provides educational outreach on the importance of staying up to date with routine vaccinations, the diseases they prevent, and the child immunization schedule.
- **Lead Poisoning Prevention Program:** Offers education and engagement on the importance of lead testing for children and strategies for prevention. The team also promotes the Department of Housing and Urban Development (HUD) grant, the Healthy Neighborhoods Program, and the Centers for Disease Control and Prevention (CDC) Genesee, Livingston, Orleans, and Wyoming (GLOW) Childhood Lead Poisoning Prevention Program.
- **Radon Awareness Program:** Educates residents about the health risks of radon exposure and the benefits of mitigation and testing. The PHE team also advocates for policy changes to encourage radon-resistant construction in new homes and works with contractors and code enforcement officers to promote mitigation practices.
- **Chronic Disease Prevention:** Provides community education on healthy lifestyle practices, including nutrition, physical activity, adequate sleep, preventive screenings, smoking cessation, limiting alcohol use, and making other healthy choices.
- **Substance Use Disorder Education and Prevention:** Actively participates in the Genesee, Orleans, and Wyoming (GOW) CARES Alliance, Community Education Work Group, and Safer Choices Work Group. The team helps plan Overdose Awareness Day, promotes the installation of Naloxone Emergency Boxes in businesses and organizations, supports the Leave Behind Kit program, and delivers naloxone trainings.
- **Trauma-Informed Communities:** Collaborates with organizations to support the GOW region in becoming more trauma informed. GO Health is dedicated to fostering a trauma-informed environment within the Health Department as well as throughout the community we serve. Eight staff members have completed training as Trauma-Informed Champions. This team,

which includes the Director of Health Promotion and the PHE, guides efforts to strengthen both our workplace culture and our community partnerships through a trauma-informed lens.

- **Suicide Prevention:** Serves as an active member of the Genesee County Suicide Prevention Coalition and provides education to residents on suicide prevention strategies and resources.
- **Rabies Prevention and Education:** Provides education to children and adults about rabies risks, safe practices around animals (keeping pets leashed, avoiding wild/stray animals), and the importance of vaccinating pets. The PHE team also assists at rabies vaccination clinics as needed.
- **STOP-DWI Education:** Educates residents on the dangers of impaired driving through community events and shares educational messages on impaired driving via GO Health social media platforms.
- **Community and Organization Trainings:** Offers trainings on a wide range of topics, including First Aid/CPR/AED, Blood borne Pathogens, Food Safety, Health and Nutrition, Wellness, Healthy Relationships, Mental Health, Bike Safety, *What's Up Doc*, *Tending the Roots*, Radon Prevention, Naloxone Administration, and other topics as requested.

The PHE team maintains, develops, and strengthens partnerships with community organizations and businesses to promote wellness and support Health Department services. Collaborations include, but are not limited to: the GOW CARES Alliance; Genesee County Interagency Council; Western New York Public Health Alliance (WNYPHA); Genesee County Suicide Prevention Coalition; Perinatal Taskforce; WNY Youth Anti-Vaping Coalition; City of Batavia Community Schools Program; UConnectCare; United Memorial Medical Center; Genesee County Office for the Aging; Genesee County Sheriff's Office; City of Batavia Police Department; City of Batavia Fire Department; Town of Batavia Fire Department; Independent Living of the Genesee Region; Oak Orchard Health; and Community Action of Genesee and Orleans.

Throughout the year, the PHE team guides and mentors interns, supporting their professional growth. On average, 3-4 students pursuing degrees in Public Health, Environmental Health, Nursing, Human Services, or related fields are provided with a well-rounded internship experience. The department maintains affiliations with universities including SUNY Brockport, University at Albany, University at Buffalo, Nazareth University, Cornell University, and Genesee Community College.

In addition, PHE is responsible for communicating with the media and public on a wide range of public health matters, including emergencies. The team issues press releases, responds to media inquiries, conducts interviews, writes articles, and actively shares updates through the GO Health website, dashboards, and social media platforms. Topics communicated to the community include disease prevention and outbreaks, chronic disease education, environmental health risks, emergency preparedness, behavioral health, and other emerging public health concerns.

2026 Objectives:

- Complete and submit the 2025-2030 CHA and CHIP on schedule to guide community health initiatives.
- Collaboratively work with local partners to implement the 2025-2030 Community Health Improvement Plan.
- Establish and implement community-based programming focused on tobacco and vaping prevention, education, and cessation, with an emphasis on engaging youth and populations at higher risk. To support this effort, the Director of Health Promotion will attend the Tobacco Treatment Specialist Training at Roswell in Spring 2026.

- Expand chronic disease programming to include a Chronic Disease Self-Management Program (CDSMP) to support residents in building skills and confidence to manage their health.
- Increase public awareness and reduce stigma around mental health, trauma, and substance use.
- Research and pilot innovative educational approaches (virtual reality, AI tools, etc.)
- Use participatory approaches (surveys, focus groups, listening sessions) to ensure programming addresses real community needs and seek feedback from the community on public health issues, materials, and the development and implementation of strategies/programs/policies.
- Research innovative programs that address social determinants of health (housing, transportation, food access). Share findings with partners to inform program development and collaborative initiatives.
- Continue to expand the GOW Veteran's Taskforce to ensure veterans, service members, and their families have access to quality healthcare, mental health services, and other public health resources.
- Advance GO Health's development as a Trauma-Informed Organization through the ongoing work of the GO Health Trauma Informed Committee. Collaborate with regional partners to promote a Trauma-Informed approach throughout the GOW region.



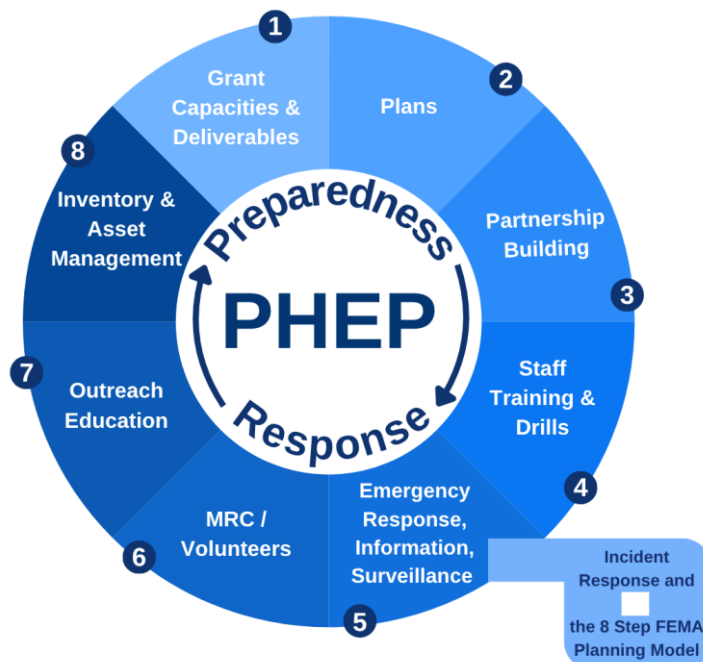
EMERGENCY PREPAREDNESS

Public Health Emergency Preparedness (PHEP) successfully rebranded core programmatic elements beginning in 2024 and through 2025. This allowed for program consolidation and streamlining of efforts, attempting to optimize capacities within the scope of a dual-county team reduced to two persons. The reorganization was also done to allow greater program stability at a time of increased global and local public health threats. Select achievements are noted within core responsibility areas below. In addition to tasks and achievements in core responsibility areas, the PHEP program has also successfully developed and maintained “essential elements” involving specific outreach programs, inventories, and response plans.

Developed in early spring of 2025, as part of wider website and programmatic revision, there are 9 PHEP Outreach Programs intended for targeted public communication as follows:

- Extreme Weather Preparedness
- Personal and Household Preparedness
- Vulnerable Person Preparedness
- Ready Genesee and Orleans Aware
- Pet Preparedness
- Air Quality, Shelter-in-Place, and Evacuation Plans
- Volunteer with the GO Health MRC!
- Community Organizations Active in Disaster (COAD)
- First Aid and Safety Trainings

Summary of Core Responsibility Areas and 2026 Objectives:



1. Grant Capacities and Deliverables:

- Continuation of CDC PHEP cooperative agreement through NYSDOH Office of Health Emergency Preparedness (OHEP), including all associated deliverables and standards.
- Lead for NYSDOH Year 13 Performance Incentive funding involving climate and health.

2. **Planning Documentation:**

- Creation of a new Integrated Preparedness Plan (IPP) involving plan exercise and drills.
- PHEPR All-Hazards Plan with modifications to better include extreme weather.
- Update of the Surge Staff and Volunteer Management with Medical Reserve Corps (SSVM-MRC) Plan with new operational playbook for MRC maintenance and continuity.
- Update of the Medical Counter Measures Clinical Operations and Point of Distribution (MCM-ClinOps-POD) Plan, following NYSDOH deliverable requirements.

3. **Partnership Building:**

- Community Organizations Active in Disaster (COAD) groups formed and actively meeting in both Counties, led by PHEP and local United Way offices.
- Standardized MOU templates created for diverse emergency preparedness operations shared with COADS.
 - Operations include either independent agency-led operations, or County-led operations using agency facilities.
 - Designed to include: Cooling/Warming Centers, 24-Hour Temporary Shelters, Asset Distribution, and Medical Countermeasures.

4. **Staff Exercises, Drills, and Training:**

- Creation of “Annual In-Service Safety Review” intended for all staff, summarizing key components of all safety and preparedness related policies.
- Collaboration with Nursing and Community Health Services to create a GO Health respiratory protection plan, updated a respirator fit-test policy, and bloodborne pathogen training.

5. **Emergency Response, Information, Surveillance:**

- Establishment of a secondary triage point with first aid for the mass casualty event involving the I-90 interstate tour bus crash of 8/22/2025.

6. **Medical Reserve Corps and Volunteer Management:**

- Collaborative trainings with MRC designed to expand capabilities in target areas with prioritized partners:
 - Independent Living collaborative training for access and functional needs
 - Departments of Mental Health collaborative training for mental health resiliency
 - CPR, Stop-the-Bleed, and blood borne pathogen training collaborations with local volunteer fire departments

7. **Public Education and Outreach:**

- Major revision to the PHEP website design, with attention on 9 established PHEP Outreach Programs.
- Continuing education and outreach with 3 MRC educational campaigns including give-away “Safety and Wellness Kits” and newly developed educational materials:
 - Summer Safety Kit
 - Hydration and Cooling Kit
 - Mental Health Resiliency and Self-Care Kit
- New development of summer cooling center and winter daytime warming center educational materials.

8. **Inventory and Critical Asset Management:**

- Additional shelter supplies made available through new Red Cross facility storage agreements
- Finalization of the grab-and-go preparedness bins (3 in each county for medical counter measures, shelter management, and enhanced PPE needs)

Other Objectives and Needs Looking Ahead:

Throughout 2025 and looking ahead, the PHEP program is prioritizing stability of all major reforms and reorganization efforts. The PHEP program is attempting to maintain diverse capabilities developed in the aftermath of COVID-19 response. Priorities looking ahead involve clearer division of programmatic responsibilities between the management of the PHEP Coordinator, and subprograms maintained by the PHEP Educator. PHEP must also maintain software platforms and physical resources to ensure effective maintenance of all necessary inventories as well as all outreach and response programs.



CORONERS/MEDICAL EXAMINERS

Genesee County operates with four (4) elected Coroners and. As outlined in Article 17-a of New York State County Law, the officials are responsible for responding to the scene of a death to perform the preliminary investigation surrounding the cause of death and, as necessary, refer the case for further services. The Coroners also provide assistance to Emergency Management and Preparedness Officials with preparation for any catastrophic incidents, caused by natural, accidental, criminal, or infectious means.

Serving both as an education and outreach tool, the County Coroner's have requested membership with the New York State Association of County Coroner's and Medical Examiners (NYSACCME). The association was established to better serve death investigators in the advancement of forensic science and its applications to death investigation. The Coroners note the association as the only mechanism for training and education for newly elected and existing officials. With the advancements in forensic science, and a rise of suspicious deaths in Genesee County, the responsibilities of Coroner's have dramatically increased from years ago. The District Attorney, Medical Examiner, law enforcement agents, and medical professionals all rely on the Coroner to perform a thorough investigation and secure evidence associated with the death, therefore making the resources available through NYSACCME essential to their publicly elected position.

There continues to be an increase in cases driven by the heroin and opioid epidemic sweeping across the state. The department and county are actively working to address this issue, including working with our state associations for funding to offset increased cases and testing. We currently send all ME cases to the Monroe County Medical Examiner's office and NMS for testing. Both of these contracts will continue through 2026.

At the beginning of 2023 the coroners started transporting deceased individuals to the ME's office, this will help eliminate funeral homes from transporting deceased individuals, cut down on transportation costs and will eliminate coroners trying to find a funeral home for transport to the ME's office.

2026 Objectives:

- Adjust compensation for coroners. Increase per case compensation from \$100 to \$125 per case and increase stipend per coroner from \$2,000 annually to \$2,500 annually.
- Add a contracted Physician to sign off on death certificates at \$4,000 annually.

WEIGHTS & MEASURES



The Genesee – Orleans County Department of Weights & Measures (GO Health W&M) is responsible for testing all commercial devices used to weigh and measures various commodities.

These inspections are done annually at grocery stores, delis, bakeries, produce stands, laundromats, farms, manufacturing plants, distribution centers, stone quarries, recycling centers, gas stations and non-commercial locations as requested. The department is also responsible for testing the quality of fuel sold within the counties, a task that is 100% reimbursed by NYS (144 fuel samples were taken in 2024).

2024 resulted in **498** inspections, accounting for **1,190** total devices between the two counties. Expected inspection fees in 2026 are expected to stay steady at a budgeted amount of \$17,300.



FINANCE

The Health Department has four major funding streams that support its operations. GCHD is primarily funded through Article 6 of the Public Health Law with other sources of revenue for the department including grants, fees for service and county sources. Article 6 establishes the requirements for Genesee County to obtain State Aid reimbursement for general public health work. Full-service County Public Health Departments are eligible to receive \$750,000 in State Aid and the Health Department is able to get up to 50% fringe rate reimbursed through state aid. After the department has reached these base grant expenditures (reimbursed at 100%) additional state aid expenditures are reimbursed at 36%. With the increase in aid offered by State, the GCHD would not exceed its basic grant of \$750,000 until the 3rd quarter of 2026. Approximately \$1,311,914 is expected in Article 6 State Aid (including fringe) reimbursement for the 2026 calendar year. This amount will vary depending upon what unexpected services or activities are required in 2026, communicable disease response and other revenue sources, e.g. Medicaid, Medicare, insurance payments, fees for services, fines, grants, etc. Additional revenue sources will offset the amount of State Aid used for core public health programs and thereby decrease County costs.

Non article 6 eligible programs for the department continue to drive local county share. Preschool and Early Intervention remain on the state's list of most costly mandated programs. In addition, the coroner's and Weights & Measures budgets continue to be 100% county dollars. We continue to apply for grants to offset all programs that are not offset by article state aid.

2026 County Appropriation Summary							
Program Budget		2025 Adopted County Appropriation	2026 Expense Adopted	2026 Revenue Adopted	2026 County Appropriation	2025-2026 \$ Variance	2025-2026 % Variance
Dept. 1185	Medical Examiners & Coroners	156,894	210,147	24,750	185,397	28,503	18.17%
Dept. 2960	3-5 Preschool Program	1,679,197	4,608,397	2,917,803	1,690,594	11,397	0.68%
Dept. 4010	Public Health	191,732	4,415,930	4,078,126	337,804	146,072	76.19%
Dept. 4059	Early Intervention Program	292,713	582,376	283,433	298,943	6,230	2.13%
Dept. 6610	Weights & Measures	55,359	87,664	25,044	62,620	7,261	13.12%
HEALTH DEPARTMENT TOTAL		\$ 2,375,895	\$ 9,904,514	\$ 7,329,155	\$ 2,575,358	\$ 199,463	8.40%

A more detailed breakdown of the numbers of all the health department's operations can be viewed within departmental budget.