



# NEW YORK

The **Preventive Health and Health Services (PHHS) Block Grant** provides funding for health problems that range from tuberculosis to adult physical activity. PHHS Block Grant dollars fund 19 different state health programs.

PHHS Block Grant funds allow the state of New York to use dollars **where** we need them, **when** we need them to protect the public's health. New York's plan provides for funding of prevention programs committed to reducing the burden of the leading causes of death and disability and supports the state's vital public health infrastructure through public health laboratory capacity, environmental radiation surveillance and emergency preparedness, regional epidemiology services, and foodborne disease surveillance. None of these programs could be sustained without PHHS Block Grant funds. Although some receive categorical funds as enhancements, the categorical funds alone are grossly insufficient to enable the programs to accomplish their goals. The following are examples of programs that serve our state's unique health needs:



## **Physical Activity in Adults—Healthy Heart Program**

PHHS Block Grant funds are used to promote and evaluate increases in the number of adults participating in regular sustained physical activity. A formal evaluation of the utilization of at least three trails built by contracted community coalitions since 1998 indicated that use of the trails has nearly doubled since baseline. Bicyclists were the most frequent users, but walking had increased nearly four-fold. Almost 40% used a trail only once a week, but 32% reported using trails 5 days a week. Approximately 53% report using the trail three seasons per year and 37% report using the trail all four seasons.



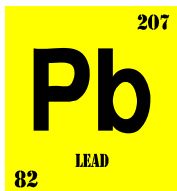
## **Tuberculosis—Tuberculosis Disease Program**

PHHS Block Grant funds are used to reduce the incidence of tuberculosis in New York State. The 2005 statewide incidence was 6.8 cases/100,000 population, a 5.4% decrease from 2004. The case incidence in New York State exclusive of New York City was 2.8 cases/100,000 population, a 5.9% decrease from the year before. Block Grant funds provide essential laboratory support statewide to ensure rapid identification of TB, determination of drug resistance, and DNA typing to uncover linkages between cases along with reporting and case management support.



## **Healthy Neighborhood Problems—Healthy Neighborhood Program**

PHHS Block Grant funds are used to target environmentally related health problems such as asthma hospitalizations, childhood lead poisoning, and other environmental risk factors in high-risk neighborhoods. This is accomplished through the use of outreach workers who survey and intervene in each community. In 2005, 6,522 homes were assessed; 721 were found to have lead hazards, 328 had elevated carbon monoxide levels, 2,258 had inadequate smoke detection devices, and 1,380 had asthmatics in residence. All hazards identified were addressed.



## **Blood Lead—Childhood Lead Poisoning Prevention Program**

PHHS Block Grant funds are used to support environmental assessments of conditions conducive to childhood lead poisonings in dwellings. In 2005, environmental assessments were made following more than 1,200 referrals resulting in investigation of more than 2,000 dwellings (60% were identified with lead hazards) and more than 15,000 field visits. In addition, Block Grant funds supported a comprehensive, web-based lead poisoning case management and environmental lead hazard reduction tracking system called **Lead Web**. This system provides expanded access to up-to-date blood lead test results, nursing assessment, medical management information, environmental assessment, remediation activity, lead investigation follow-up and enforcement tracking. To date, **Lead Web** contains 1.6 million child records and 2.6 million blood lead test lab records.

## **New York State Department of Health**

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## Healthy Children ~ Healthy Futures. Serving the Children of Farm Workers in New York State.

### Issue:

One of the harshest challenges faced by low-income farm working families, especially migrant farm working families, is obtaining reliable and affordable health care for their children. Farm working families enrolled in the Agri-Business Child Development (ABCD) program in New York State report many barriers to securing health care for their children, such as—

- The navigation of complicated health care systems and a limited understanding of critical health care issues. The highest level of education attained in 65% of their households is less than a high school diploma/GED.
- The ability to access affordable health care services provided in the language of the family, 74% of which are of Hispanic/Latino descent, and in 70% of the households, English is not the primary language.
- The availability of health care services during hours that are suitable for farm working families
- Lack of transportation to and from appointments because most live in rural areas with no public transportation.

### Intervention:

ABCD is committed to alleviating barriers to health care for New York State's farm working families. ABCD operates 13 child development centers across the state. In 2005, the agency worked with more than 1,500 children ranging in age from 6 weeks to 5 years old. Each child's health care needs are met at all levels from physical development, dental health, and mental health to nutrition. Services are provided in the language of the family, and agency staff help ensure that the entire family is connected to health services in their community.

Using a portion of the Preventive Health and Health Services Block Grant funding, each ABCD Center employs a Health and Disabilities Coordinator to monitor and assess the children's development. This coordinator also implements the Parent Health Education Training Plan.



The Health and Disabilities Coordinator in each ABCD Center—

- Compiles a health history for every child including, but not limited to, a physical examination, immunization records, dental, and nutrition information.
- Helps families connect to community health services that are language-appropriate and that are available during hours suitable for farm-working families.
- Implements the Parent Health Education Training Plan using materials that are language and literacy-appropriate for the families.
- Arranges transportation and translation services for medical and dental appointments.
- Coordinates the services of other community agencies such as insurance enrollment and dental clinics whenever possible.
- Participates in local health fairs with other community health agencies.
- Serves as a case manager for children with special needs.

### Impact:

Of the 1,500 children served by ABCD in 2005—

- 100% of the children were identified as having a medical home and receiving designated well child care visits within 90 days of entrance.
- 97% of enrolled children were up-to-date on a schedule of age appropriate preventive and primary care by the end of the enrollment year.
- 98% of the families participated in health education workshops presented at ABCD Centers.

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