ULSTER COUNTY BOARD OF HEALTH

October 1, 2012

AGENDA

CALL TO ORDER

- OLD BUSINESS
 - a. Approval of September minutes
- NEW BUSINESS
 - a. Director's Report:
 - Ulster County Public Health Measles Alert
 - West Nile Virus
 - Employee Retirements
 - BOH Schedule
 - b. Medical Examiner Report:
 - No Report
 - c. Patient Services
 - Update Immunization Billing at Clinics
 - Lyme Disease Advisory Committee
 - d. Environmental Health Report:
 - Sanitary Code Vote

MEETING CONCLUSION

Ulster County Board of Health Date: Monday, October 1, 2012

Board Members		Signature
Authenrieth RN, Joan	Vice Chairman	
Delma MD, Dominique	Secretary	Somme un Del
Graham ESQ, Peter	Board Member	Excused
Hildebrandt MPA, Mary Ann	Member	Mary A. Sililariallt
Tack DO, Marc	Chairman	2
Woodley MD, Walter	Board Member	Wewordley
Board Member	Vacant	
Department of Health		Signature
Smith, MD, MPH, Carol	Commissioner of Health	Sunda to left
Heller MD, Douglas	Medical Examiner	Excused
Veytia RN, MSN, Nereida	Acting PH Director/Patient Services Director	Merceda Chyteci
Guests		
Guests	LIC Donout of MII	Signature
Qamar, Cheryl	UC Depart of MH Deputy Acting Commissioner	Che Chi
Cane, Lee	Mid-Hudson League of Women Voters	Lee Cane

Ulster County Board of Health October 1, 2012

Members PRESENT: Joan Authenrieth, RN, Vice Chairman

Marc Tack DO, Chairman

Mary Ann Hildebrandt, Board Member Dominique Delma, MD, Secretary Walter Woodley, MD, Board Member

UCDOH PRESENT: Carol Smith, MD, MPH, Commissioner of Health

Nereida Veytia, Patient Services Director

GUESTS: Lee Cane, Mid-Hudson League of Women Voters

Cheryl Qamar, UC Department of Mental Health Deputy Commissioner

EXCUSED: Graham ESQ, Peter, Board Member

Douglas Heller, MD, Medical Examiner

I. Approval of Minutes: A motion was made by Dr. Tack to approve the September 2012 minutes. The motion was seconded by Mary Ann Hildebrandt and unanimously approved.

II. Agency Reports:

a. Director's Update:

Dr. Smith reported on the following:

- Measles Alert: Dr. Smith distributed the Public Health Alert issued regarding Ulster County's confirmed measles case (see attached) and gave an outbreak status update to Board Members. Dr. Smith also extended kudos the to the UCDOH staff whose response to the outbreak was professional and timely.
- West Nile Virus: The press release regarding the probable West Nile case was shared with the Board (see attached).
- Employee Retirements: Three UCDOH employees are participating in the County separation incentive, 2 RNs (18 and 19 years of service) and 1 Fiscal Officer (30 years of service). All three positions will be eliminated from the Department and will not be back filled. Kristin Carney, Deputy of Administration for Mental Health will now be responsible for fiscal oversight of both Mental Health and DOH.
- BOH Schedule: Dr. Smith would like the Board to consider moving the meeting times to 6:15 or 6:30 pm on the second Monday of the month. She will communicate with Mental Health to ensure there are no conflicts with their board meetings and will report back to the Board for an official vote.
- b. <u>Medical Examiner:</u> No Report. September case information will be reported out at the October Board meeting.
- c. Patient Services:

Ms. Veytia reported on the following:

• Immunization Billing at Clinics: An update on the status of the Immunization Billing at clinics was given. Currently, there is no cost for VFC eligible clients but they will be required to pay

- the \$17.85 administering cost. A sliding scale fee is applied to those who are unable to pay the full administering fee.
- UC Lyme Disease Advisory Committee: The Lyme Disease Advisory Committee Report and Recommendations was distributed to the Board (see attached). This report comes as a result of a Legislative initiative to address Lyme Disease within Ulster County. Dr. Tack extended a thank you to Ms. Veytia for her all her hard work and contribution to this initiative.

d. Environmental Health Report:

• Sanitary Code Vote: The Sanitary Code was amended with a correct effective date of November 15, 2012 and therefore, a revote from the Board was required to take place. Ms. Authenrieth made a motion to adopt this version of the Ulster County Sanitary Code as the Code of the Ulster County Health District, motioned was seconded by Ms. Hildebrandt, there was no discussion, there were no abstentions, no one opposed, all Board members present were in favor and the adoption of the Code was unanimously approved. Next step will be to file the code with NYS.

Next Meeting: The next meeting is scheduled for November 5, 2012.

Adjournment: A motion was made to adjourn the meeting by Dr. Tack, seconded by Joan Authenrieth and unanimously approved.

Respectfully submitted by:

Katrina Kouhout

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Secretary to the Public Health Director

On behalf of UC Board of Health

Measles Case confirmed in Ulster County

Continued Surveillance Necessary during incubation period

Reissued September 28, 2012 - The period of measles incubation for individuals potentially exposed to the index case encompasses the weeks of September 24, 2012 through October 5, 2012.

SUMMARY:

- Ulster County Department of Health (UCDOH) is advising healthcare providers of a confirmed case of Measles in Ulster County
- Proper respiratory isolation of potential cases is extremely important to avoid unnecessary exposures.
- Providers should call the UCDOH immediately if they suspect measles at (845-340-3090) - <u>Please DO NOT wait for laboratory confirmation</u>.

Recently the Ulster County Department of Health (UCDOH) has confirmed a measles case in an individual in Ulster County following international travel. We are asking health care providers to assess for any suspected cases and report them immediately to the UCDOH. Please do not wait for laboratory confirmation before reporting.

Symptom presentation:

Initial symptoms include cough, fever, coryza, conjunctivitis, malaise, diarrhea, anorexia and lymphadenopathy, followed by a generalized maculopapular rash lasting at least 3 days AND Fever of 101 degrees F or higher.

Diagnostic recommendations:

Obtain serologic specimen for measles IgM and IgG and viral samples (urine and nasopharyngeal swabs) for disease confirmation NOTE IgM may be falsely negative for up to 72 hrs after onset of rash.

Submit specimens to:

NYSDOH Wadsworth Lab; Diagnostic Virus Reference Surveillance Laboratory

120 New Scotland Avenue

Albany, NY 12208

recommendations, directions, and address (pgs 5-6) may be found online at:

http://www.health.ny.gov/prevention/immunization/providers/docs/measles_outbreak_control_guidelines.pdf

Exposure prophylaxis recommendations:

Measles is communicable for 4 days prior and 4 days after onset of rash. Vaccination of exposed persons who can not document immunity to measles should be administered within 72 hrs after exposure. IG should be provided within 6 days of exposure for persons meeting the following criteria: Household contacts not vaccinated within 72 hrs unless they have had at least 1 dose of MMR after 12 months of age; Pregnant women; infants under 6 months of age; infants 6-12 months of age who do not receive vaccination within 72 hrs of exposure; immunocompromised persons, including HIV infected persons regardless of immunization status.

Measles Case confirmed in Ulster County

September 20, 2012 - 3:00 pm

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FOR IMMEDIATE RELEASE

PROBABLE CASE OF WEST NILE VIRUS IDENTIFIED IN ULSTER COUNTY

Kingston, NY – Ulster County Health Commissioner, Dr. Carol Smith, announced today that a probable case of West Nile Virus (WNV) has been identified in the County. The case is under investigation by the New York State Department of Health and the Ulster County Department of Health and involves an individual who had recently traveled out-of-state; therefore it is uncertain exactly where the infection may have been acquired.

WNV is most often spread by the bite of an infected mosquito. Mosquitoes become infected when they feed on infected birds. Infected mosquitoes can then spread WNV to humans and other animals they bite.

To date, New York State Department of Health surveillance has not found any test positive mosquito pools in Ulster County. Positive pools have been identified in the southern and central portions of the State.

Although WNV can be a potentially serious illness, the overwhelming majority of people who are infected show symptoms ranging from none to mild and the illness generally improves on its own in a few weeks. Approximately 1 in 150 people (.007%) infected with WNV can develop serious symptoms and illness, which can result in permanent neurological damage. Persons who experience symptoms of severe WNV illness, such as unusually severe headaches or confusion, should seek immediate medical attention.

The easiest and best way to avoid WNV is to avoid mosquito bites, utilizing the following preventative measures:

- Use an EPA-registered insect repellent, according to directions.
- Wear long sleeves and pants and use insect repellent, or remain indoors, at dusk and dawn, when mosquitoes are most active.
- Make sure you have good screens on windows and doors to keep mosquitoes out.
- Get rid of mosquito breeding sites by getting rid of all standing water around your home, including flower pots, buckets, barrels, tire swings and other sources.

For more information, please call the Ulster County Department of Health/Communicable Disease Division at (845)-340-3090 or visit the New York State Department of Health online at http://www.health.ny.gov/diseases/west nile virus/fact sheet.htm

Media inquiries can be directed to Dr. Smith, by phone, at (845) 340-3009.