

# ULSTER COUNTY BOARD OF HEALTH

June 11, 2018

## AGENDA

### CALL TO ORDER

- **OLD BUSINESS**

- a. Approval of December 2017, February 2018 and April 2018 minutes

- **NEW BUSINESS**

- a. New Board Member
- b. Commissioner's Report (Dr. Smith)
  - Medical Examiner Stats
  - Ulster County Substance Use Task Force 5/24/2018 Meeting
  - Camp request for Polystyrene waiver
  - Tobacco 21
- c. Patient Services Report (Ms. Veytia)
  - Diagnostic & Treatment Center Operation Certificate
  - Point of Dispensing (POD) on 5/1/2018

### MEETING CONCLUSION

Ulster County Board of Health  
June 11, 2018

**Members PRESENT:** Dominique Delma, MD, Vice Chair  
Mary Ann Hildebrandt, MPA, Secretary  
Anne Cardinale, RN GCNS-BC, Board Member

**DOH/DMH PRESENT:** Carol Smith, MD, MPH, Commissioner of Health  
Nereida Veytia, Deputy/Patient Services Director

**GUESTS:** Ann Smoller, UCDOH Supervising Public Health Nurse

**ABSENT:** None

**EXCUSED:** Walter Woodley, MD, Chairperson  
Peter Graham, ESQ, Board Member  
Marc Tack, DO, Board Member  
Shelley Mertens, Environmental Health Director  
Douglas Heller, MD, Medical Examiner

- I. **Approval of Minutes:** The December 2017 minutes, the February 2018 and April 2018 were unable to be voted on for approval at the meeting due to a lack of a quorum. However, the Board Members in attendance asked that an electronic vote be conducted. As a result of the electronic vote, Ms. Hildebrandt motioned to approve the minutes, Dr. Delma seconded the motion, and the minutes were unanimously approved.
- II. **New Board Member:** The Board was informed of a new Board Member appointment. Kathleen Rogan is appointed to the Board as the recommendation from Mayor Noble as specified in the Charter. She will serve a term of 7/1/2018-6/30/2023. (See attached)
- III. **Agency Reports:**
- a. Commissioner's Report: Dr. Smith reported on the following:
- **Medical Examiner Stats:** The Medical Examiner stats were distributed to the Board for review. (see attached)
  - **Ulster County Substance Use Task Force:** The first meeting of the Task Force was held on May 24, 2018 with approximately 55 in attendance. Dr. Smith presented as well as Dr. Grovenburg the Ulster Medical Examiner who is also a medical doctor who provides substance abuse treatment to the community. Ellenville Regional Hospital presented on their opioid abuse reduction initiative called the Max Program. The group then divided in to three focus groups: Treatment, Reduce Supply and Demand, and Prevention. This is an ongoing process and the Task Force will continue to meet periodically.
  - **Machne Rav Tov Camps:** There are four (4) camps located within Ulster County. The camps are continually asking for a waiver from complying with Local Law Number 4 of 2015, banning the use of polystyrene in food service establishments. Their requests have been reviewed and they do not meet the criteria for granting a waiver. The camps were found to be in violation of the Law in 2017 and came

in for a hearing. Based on the Law, a fine of \$1100.00 for the violations was levied. To date the camps have not paid. A Permit to Operate the camps will not be issued if they do not comply with the polystyrene Law and/or do not pay their fine.

- **Tobacco 21:** The Tobacco 21 law has been passed and the County Executive has signed it into Legislation. This Law raises the age of which tobacco products can be purchased from the age of 18 to the age of 21. The Law goes into effect on 1/1/2019. Other counties in New York such as Sullivan and Nassau have also passed this law.

b. Patient Services Report: Ms. Veytia reported on the following:

- **Diagnostic and Treatment Center (D&TC) Operation Certificate:** Still working through the process to receive the D&TC certificate of operation from the State, A new certificate needs to be issued as the location of UCDOH has changed. This process has been ongoing since November of 2017. The next step is for the State to complete an environmental inspection of the site.
- **Flu Stats:** A copy of the most current flu stats were distributed to the Board for review (see attached).
- **Point of Dispensing Drill:** Ann Smoller, Supervising Public Nurse in the Preparedness Program gave a Powerpoint presentation on the overview of the Point of Dispensing drill that took place on May 1, 2018. (see attached)

IV. **Next Meeting:** The next meeting is scheduled for July 9, 2018, 6:30 PM at the Golden Hill Office Building.

Respectfully submitted by:



Mary Ann Hildebrandt, MPA  
Secretary - Board of Health



# ULSTER COUNTY EXECUTIVE

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MICHAEL P. HEIN  
*County Executive*

ADELE B. REITER  
*Chief of Staff*  
*Deputy County Executive*



ROBERT SUDLOW  
*Deputy County Executive*

KENNETH CRANNELL  
*Deputy County Executive*

May 7, 2018

Hon. Nina Postupack  
County Clerk  
244 Fair Street  
Kingston, NY 12401

Victoria Fabella, Clerk  
Ulster County Legislature  
244 Fair Street  
Kingston, NY 12401

Dear Ms. Postupack and Ms. Fabella,

Please be advised that I am hereby **appointing** the following individual to the Ulster County Board of Health:

Kathleen Rogan  
Kingston, New York  
Term: 7/1/2018 - 6/30/2023

Please be advised that Ms. Rogan is one of Mayor Noble's recommendations pursuant to the Ulster County Charter §C-42 and is replacing Elizabeth Kelly.

**RECEIVED**

MAY 09 2018

MENTAL HEALTH

Very truly yours,

Michael P. Hein  
County Executive

cc: Carol Smith, MD, MPH, Commissioner of Health and Mental Health

# Ulster County Department of Health

## Medical Examiner's Office - Autopsy Cases

### Date of Death between 1/1/2018 and 5/31/2018

Total Number of Cases: 69

<i>Cases by Gender</i>	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Grand Total
F	7	4	4	2	3	0	0	0	0	0	0	0	20
M	10	6	15	4	14	0	0	0	0	0	0	0	49
<b>Grand Total</b>	<b>17</b>	<b>10</b>	<b>19</b>	<b>6</b>	<b>17</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>69</b>

<i>Cases by Manner</i>	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Grand Total
Accidental	9	4	6	4	4	0	0	0	0	0	0	0	27
Homicide	2	1	0	0	0	0	0	0	0	0	0	0	3
Natural	5	2	6	1	2	0	0	0	0	0	0	0	16
Pending	0	1	0	1	11	0	0	0	0	0	0	0	13
Suicide	1	2	5	0	0	0	0	0	0	0	0	0	8
Undetermined	0	0	2	0	0	0	0	0	0	0	0	0	2
<b>Grand Total</b>	<b>17</b>	<b>10</b>	<b>19</b>	<b>6</b>	<b>17</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>69</b>

<i>Cases by Category</i>	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Grand Total
Alcohol	0	0	0	1	0	0	0	0	0	0	0	0	1
Blunt Force Trauma - non-MVA	0	0	1	0	0	0	0	0	0	0	0	0	1
Cardiovascular	3	1	3	1	2	0	0	0	0	0	0	0	10
Cardiovascular and Diabetes	0	0	1	0	0	0	0	0	0	0	0	0	1
Cardiovascular and Obesity	0	1	0	0	0	0	0	0	0	0	0	0	1
Drowning	0	0	1	1	0	0	0	0	0	0	0	0	2
Gunshot Wound	3	1	2	0	0	0	0	0	0	0	0	0	6
Hanging	0	1	1	0	0	0	0	0	0	0	0	0	2
Motor Vehicle Accident	2	0	0	1	3	0	0	0	0	0	0	0	6
Non-Opioid Substance	0	0	1	0	0	0	0	0	0	0	0	0	1
Non-Opioid Substance w/ Other Substances	1	0	0	0	0	0	0	0	0	0	0	0	1
Opioid	3	2	4	0	0	0	0	0	0	0	0	0	9
Opioid w/ Other Substances	2	2	0	1	0	0	0	0	0	0	0	0	5
Other	2	0	3	0	1	0	0	0	0	0	0	0	6
Pending	0	1	0	1	11	0	0	0	0	0	0	0	13
Pneumonia	0	0	1	0	0	0	0	0	0	0	0	0	1
Smoke Inhalation	1	0	0	0	0	0	0	0	0	0	0	0	1
Stab Wound	0	1	0	0	0	0	0	0	0	0	0	0	1
Undetermined	0	0	1	0	0	0	0	0	0	0	0	0	1
<b>Grand Total</b>	<b>17</b>	<b>10</b>	<b>19</b>	<b>6</b>	<b>17</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>69</b>

The New York State Department of Health (NYSDOH) collects, compiles, and analyzes information on influenza activity year round in New York State (NYS) and produces this weekly report during the influenza season (October through the following May).<sup>1</sup>

**During the week ending May 19, 2018**

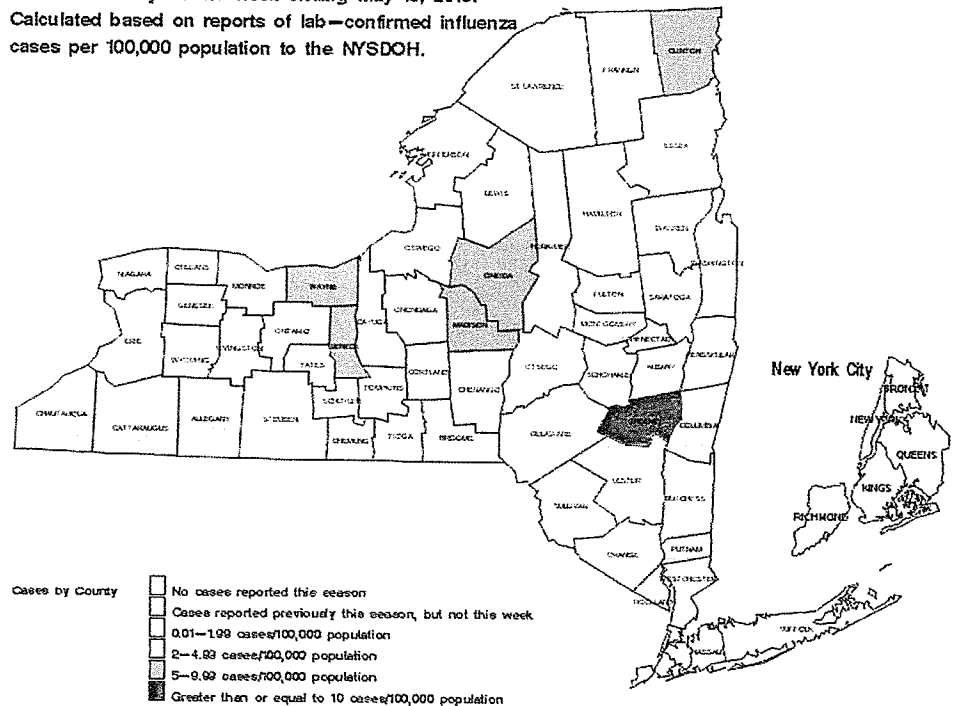
- Influenza activity level was categorized as geographically **local**<sup>2</sup>. This is the first week that local activity has been reported following 23 consecutive weeks of geographically widespread activity.
- There were **232** laboratory-confirmed influenza reports, a **49% decrease** over last week.
- Of the **894** specimens submitted to WHO/NREVSS laboratories, **58 (6.49%)** were positive for influenza.
- Of the **177** specimens tested at Wadsworth Center, **164** were positive for influenza. **9** were **influenza A (H1)**, **106** were **influenza A (H3)**, and **49** were **influenza B (Yamagata)**.
- Reports of percent of patient visits for influenza-like illness (ILI)<sup>3</sup> from ILINet providers was **1.57%**, which is below the regional baseline of 3.10%.
- The number of patients hospitalized with laboratory-confirmed influenza was **55** a **46% decrease** over last week.
- There were **no** influenza-associated pediatric deaths reported this week. There have been **six** influenza-associated pediatric deaths reported this season.
- Preliminary results for **influenza vaccine effectiveness (VE)** are published on CDC's website at [https://www.cdc.gov/mmwr/volumes/67/wr/mm6706a2.htm?s\\_cid=mm6706a2\\_w](https://www.cdc.gov/mmwr/volumes/67/wr/mm6706a2.htm?s_cid=mm6706a2_w).

**Laboratory Reports of Influenza (including NYC)**

All clinical laboratories that perform testing on residents of NYS report all positive influenza test results to NYSDOH.

- 43 counties reported cases this week.
- Incidence ranged from 0-10.52 cases/100,000 population.

Influenza activity for the week ending May 19, 2018. Calculated based on reports of lab-confirmed influenza cases per 100,000 population to the NYSDOH.



<sup>1</sup> Information about influenza monitoring in New York City (NYC) is available from the NYC Department of Health and Mental Hygiene website at <http://www.nyc.gov/html/doh/>. National influenza surveillance data is available on CDC's FluView website at <http://www.cdc.gov/flu/weekly/>.

<sup>2</sup> **No Activity:** No laboratory-confirmed cases of influenza reported to the NYSDOH.

**Sporadic:** Small numbers of lab-confirmed cases of influenza reported.

**Local:** Increased or sustained numbers of lab-confirmed cases of influenza reported in a single region of New York State; sporadic in rest of state.

**Regional:** Increased or sustained numbers of lab-confirmed cases of influenza reported in at least two regions but in fewer than 31 of 62 counties.

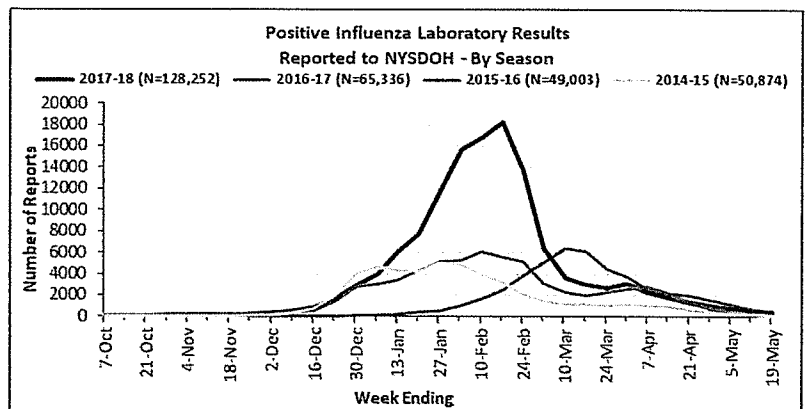
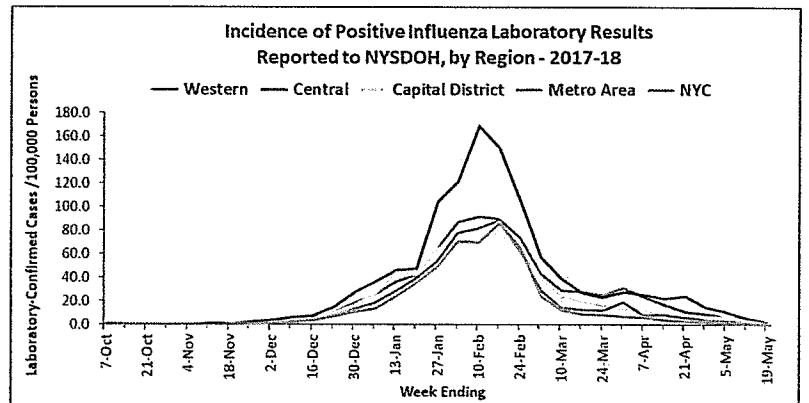
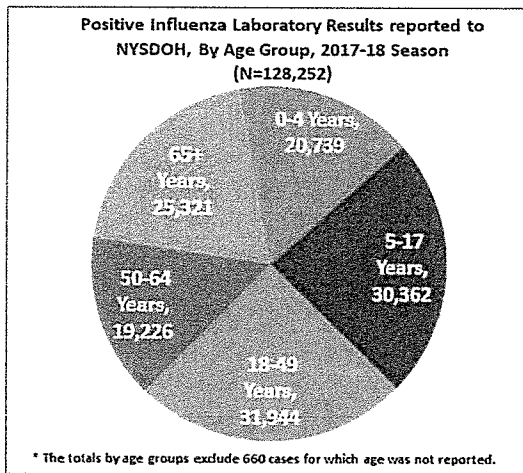
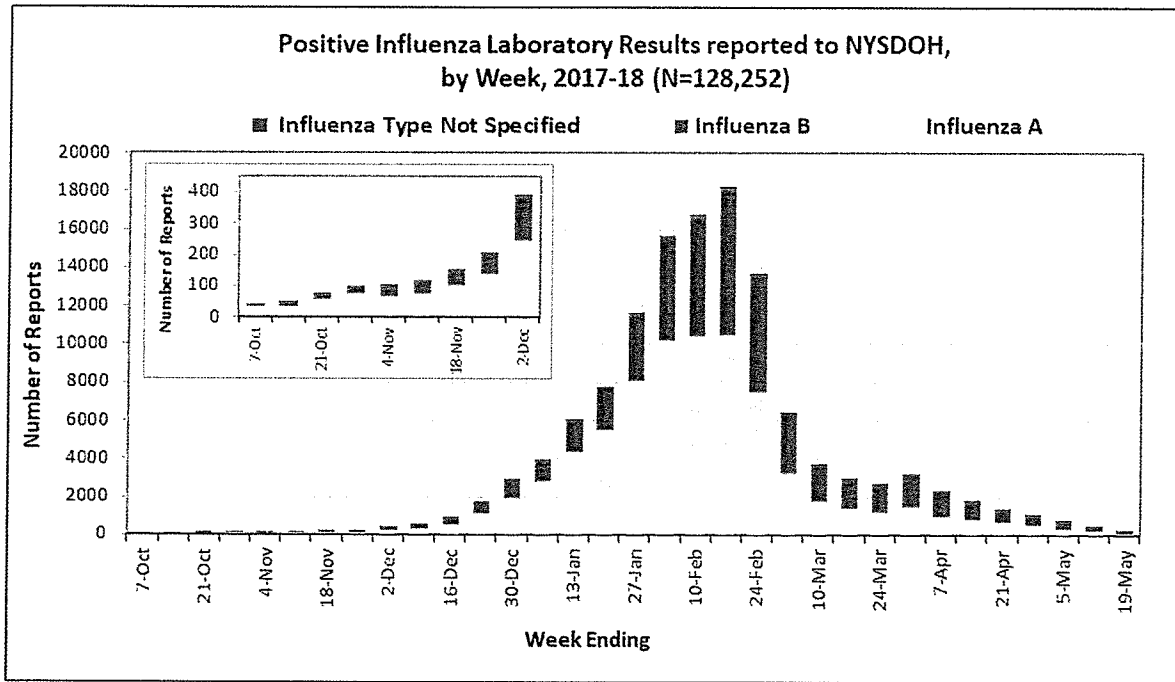
**Widespread:** Increased or sustained numbers of lab-confirmed cases of influenza reported in greater than 31 of the 62 counties.

Increased or sustained is defined as 2 or more cases of laboratory-confirmed influenza per 100,000 population.

<sup>3</sup>ILI = influenza-like illness, defined as temperature 100° F with cough and/or sore throat in the absence of a known cause other than influenza

### Laboratory Reports of Influenza (including NYC)

Test results may identify influenza Type A, influenza Type B, or influenza without specifying Type A or B. Some tests only give a positive or negative result and cannot identify influenza type (not specified).






## Laboratory Reports of Influenza (including NYC)

Data shown in the table represents the number of laboratory-confirmed cases by county for the current week, previous two weeks, and season-to-date totals.

County	Week Ending			Season-To-Date
	5-May	12-May	19-May	
Albany	20	11	4	1708
Allegany	0	1	1	205
Broome	18	4	3	2214
Cattaraugus	1	2	3	492
Cayuga	10	3	0	1167
Chautauqua	27	19	4	1418
Chemung	6	6	1	485
Chenango	4	1	0	567
Clinton	6	5	8	642
Columbia	2	2	2	336
Cortland	2	1	0	593
Delaware	2	0	0	313
Dutchess	12	4	2	1593
Erie	13	9	5	5173
Essex	0	2	0	168
Franklin	1	1	1	235
Fulton	4	0	1	345
Genesee	6	1	1	728
Greene	3	2	5	236
Hamilton	1	0	0	28
Herkimer	8	5	2	796
Jefferson	4	3	2	1302
Lewis	2	1	0	390
Livingston	6	4	1	693
Madison	5	5	4	645
Monroe	80	58	26	7390
Montgomery	2	1	0	464
Nassau	30	30	20	7886
Niagara	0	0	1	870
Oneida	45	32	15	3745
Onondaga	40	30	12	3298
Ontario	20	7	2	1376
Orange	17	2	2	2418
Orleans	1	1	0	401
Oswego	23	8	2	1333
Otsego	4	3	0	408
Putnam	5	7	4	660
Rensselaer	3	3	1	781
Rockland	9	3	6	1414
Saratoga	22	16	3	2163
Schenectady	25	11	4	1965
Schoharie	3	1	1	170
Schuyler	0	0	0	51
Seneca	3	2	3	303
St. Lawrence	3	5	0	1040
Steuben	5	2	0	608
Suffolk	37	23	15	7630
Sullivan	1	1	1	553
Tioga	6	2	0	613
Tompkins	14	2	1	1139
Ulster	2	0	0	674
Warren	1	0	0	227
Washington	2	0	0	278
Wayne	21	9	7	1414
Westchester	44	19	11	8639
Wyoming	1	1	0	284
Yates	4	2	0	217
<b>Upstate Total</b>	<b>636</b>	<b>373</b>	<b>187</b>	<b>82884</b>
Bronx	42	25	18	11749
Kings	28	11	11	11600
New York	24	16	5	6250
Queens	32	30	9	13511
Richmond	7	2	2	2258
<b>NYC Total</b>	<b>133</b>	<b>84</b>	<b>45</b>	<b>45368</b>
<b>Total</b>	<b>769</b>	<b>457</b>	<b>232</b>	<b>128252</b>



**MCM Dispensing Exercise LHV 2018**  
May 1, 2018

### The Scenario

A 24 year old male employee at the county's largest grocery store (ABC Market) began experiencing fever, abdominal pain, nausea and loose stools 4 days ago. Yesterday his symptoms worsened and he was driven to the ED for evaluation. He was dehydrated and had yellowing of the skin and eyes. He was admitted for further testing and IV hydration. The diagnosis of acute hepatitis A was confirmed by lab testing and the local health department was notified.

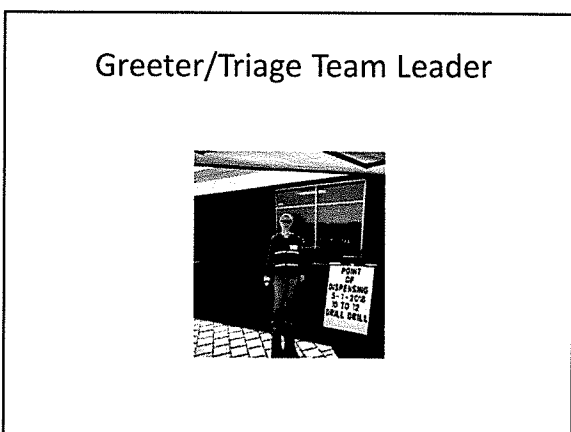
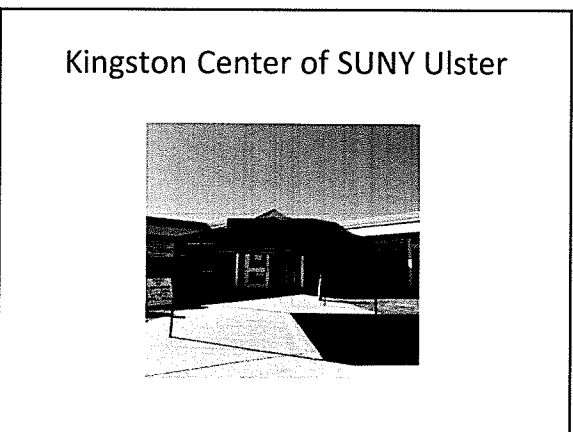
Post-exposure prophylaxis is recommended for any customer that consumed produce purchased from this grocery store between April 17 and April 27. To be effective, PEP should be administered within 14 days of the last potential exposure. Approximately 20% of the county's population consumed produce from the store and may have been exposed to hepatitis A virus. The county health department will open a POD to offer hepatitis A vaccine and immune globulin.

### Integrated Health Alerting Network Systems (IHANS)POD Drills

- Site Activation Drill was sent to 19 individuals 24 hours prior to the POD & 17 responded.
- Staff Notification, Acknowledgement & Assembly Drill was sent 24 hours prior to the 34 staff assigned to the POD, directing them to report to the site @ 8:30am 05/01/2018. Response=29.
- Facility Set Up Drill sent 05/01/2018 to 19 @ 7:23am with 15 responding.

### POD Drill Message - Hospitals

- MESSAGE TO ULSTER COUNTY HOSPITALS
- THIS IS A DRILL- THIS IS A DRILL- THIS IS A DRILL FROM ULSTER COUNTY DEPT. OF HEALTH
- Ulster County Dept. of Health has confirmed there is a case of Hepatitis A in a produce worker at the ABC Market in Kingston NY.
- Please notify Infectious Disease and Emergency Department Medical Staff to be on the alert for patients who present with symptoms consistent for Hepatitis A.
- Post exposure prophylaxis is recommended to any customer that consumed produce purchased from this grocery store from Apr. 17 through Apr. 27, 2018.
- Ulster County Dept. of Health will be opening a Point of Dispensing to offer Hepatitis A vaccine and/or Immune Globulin to customers who consumed produce from ABC Market from Apr. 12 – 26, 2018.
- Point of Dispensing will be conducted at Kingston Center of SUNY Ulster, 94 Mary's Ave., Kingston, NY on Tues. May 1 from 10 am until 12 noon. Please park in the upper parking lot for entrance to the Point of Dispensing. Parking lot is handicapped accessible. Customers affected are recommended to pre-register for the POD at: <http://www.health.state.ny.us/go2clinic>
- Anyone experiencing symptoms of Hepatitis A should contact their provider for follow up. Symptoms include but are not limited to: fever, abdominal pain, nausea, yellowing of the skin, eyes and dark urine.
- DO NOT ATTEND POD IF EXPERIENCING THESE SYMPTOMS
- THIS IS A DRILL – THIS IS A DRILL THIS IS A DRILL FROM ULSTER COUNTY DEPT. OF HEALTH



Public Information Officer & Incident Commander in the Command Post



Emergency Manager Steve Peterson in the Command Post



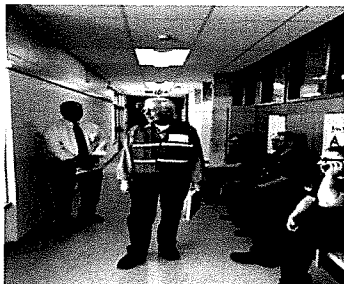
POD Manager Nereida Veytia & Medical Evaluator



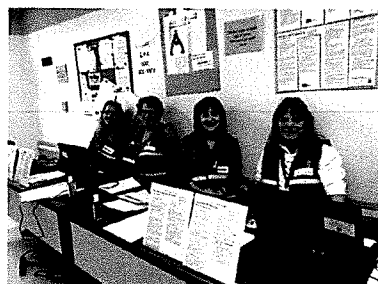
UC Information Services and SUNY Ulster Security



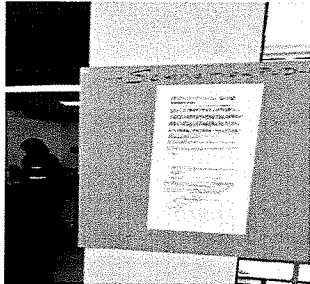
HSEEP Evaluator Ritch Parrish/UC Information Services Team



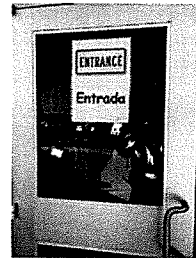
POD Registration



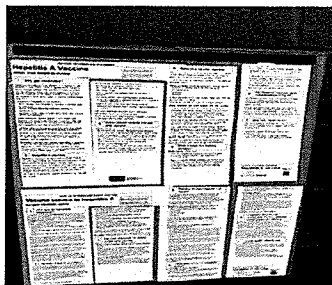
POD Scenario



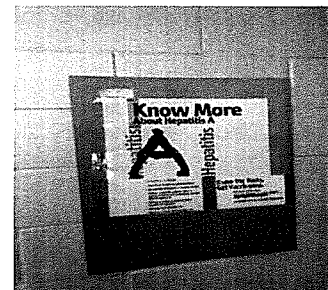
POD Signage



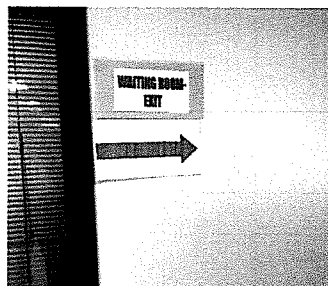
Hepatitis A-What You Need To Know



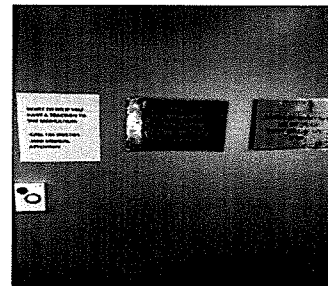
POD Signage



POD Waiting Room/Exit



Exit/Observation Room Signage



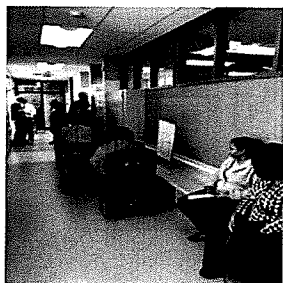
ServNY Ulster Volunteer Bonnie Brill



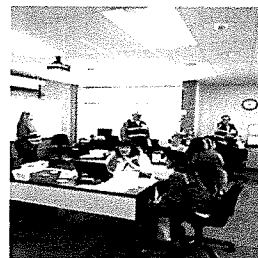
POD Volunteers



POD Volunteers To Dispensing Room



POD Dispensing Room



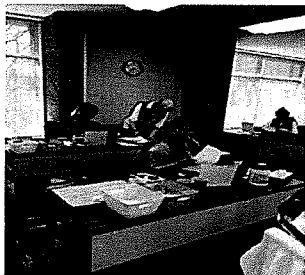
Immune Globulin (Ig) Station



POD Medical Evaluator



Medication/Vaccine Dispensers



POD EMS and Controller



POD Controller and HEPC Intake-Situation Reports



POD Behavioral/Mental Health



Behavioral Health in Action



Line Monitor, Vaccine Medication Supply Team Leader & Runner



POD Safety



Exit /Observation Team Educates about Adverse Events



Volunteer Receives a Preparedness Grab Bag



POD Exit/Observation Room



The Hotwash to review the POD for the After Action Report. What went well & what can improve. No judgement!  
Ex: CDMS issues causing increased waiting in lines & the screening questionnaire didn't say drill causing concern for some volunteers. Line monitors 1 more needed staffing did not allow. Smooth flow through POD.  
Two radio's didn't hold charge.

Radios are old but work, new batteries ordered and Emergency Manager programed them to communicate with his radios. Cold chain was monitored but went below temp and wasn't reported, form revised to include temp ranges and JAS updated.

**Not all staff in Command Post had a vest. Vest labeled for next POD.**

- Environmental Health & Patient Services field staff are out of the facility much of the day, and were reminded to check their emails daily. They were reminded to respond to the drills by clicking the link to acknowledge receipt of the drill.
- Facility Set Up Drill was sent the am of the POD and not all had access to their computers, and the previous day were instructed to report directly to the POD site.

**Wrap up**

At start of POD 107 registrants. 44 volunteers participated by walking through POD, some multiple times. Throughput was 76, 22 were referred for vaccine, 14 were referred for Ig, 38 for medical evaluation, 5 referred for medical care and 1 deferred r/t medical condition.

**Recipients listed by age group attending POD reports**

- Recipients under 19 years = 1
- Recipients 10 - 64 years = 63
- Recipients 65 years and older = 5

Thank You From Ulster County Dept. of Health  
Public Health Preparedness

