

ULSTER COUNTY BOARD OF HEALTH

December 13, 2022

AGENDA

CALL TO ORDER

1. OLD BUSINESS

- a. Approval of September and October 2022 Minutes

2. NEW BUSINESS

- a. Slate of Officers – Remains the same until July 2023
- b. 2023 Meeting Schedule

3. Commissioner's Report (Dr. Smith)

- a. Budget Update (Thomas Gibney)
- b. COVID Update
- c. Monkeypox/Polio Update
- d. Flu/RSV Update
- e. Medical Examiner Report

MEETING CONCLUSION

Ulster County Board of Health
December 13, 2022
5:00 p.m.
Golden Hill Office Building
239 Golden Hill Lane
Kingston, NY 12401

PRESENT: Dr. Marta Sanchez, Dr. Ashanda Saint Jean, Stephanie Turco,
Kathleen Rogan, Naomi Stevens

EXCUSED: Dr. Gina Carena

ABSENT: None

UCDOH: Dr. Carol Smith- Commissioner of Health

GUEST: None

Call To Order: 5:15PM

Old Business

a. Approval of Minutes:

- i. A motion to approve the September 13, 2022 minutes was made by Dr. Sanchez, seconded by Ms. Stevens, and unanimously approved.
- ii. A motion to approve the October 18, 2022 minutes was made by Dr. Saint Jean, seconded by Dr. Sanchez, and unanimously approved.

b. Slate of Officers: A note new vote for Board Officers will be conducted in July 2023.

c. Board of Health Meeting Schedule:

- i. The Board discussed the 2023 schedule. It was determined to keep the 5:00 pm start time, however the Board would like to go back to virtual meetings. A discussion ensued regarding the Open Meeting Law, requiring meetings to be in-person. The Board also stated a hybrid meeting allowing Members to attend virtually or in-person would be helpful in Board Member attendance. Virtual meetings allowed more flexibility and greater attendance.
- ii. A motion was made by Ms. Rogan to pursue holding hybrid Board of Health meetings. Ms. Stevens seconded the motion, and the motion was unanimously approved.
- iii. The Open Meeting Law will be emailed to Board Members for further review.

Commissioner's Update: Dr Smith reported on the following:

- a. **2023 Approved Budget:** The 2023 approved budget has not been released. The budget is forthcoming. Dr. Smith will invite Thomas Gibney, Deputy Director for Administration, to attend the January meeting to present to the Board.

d. **COVID Update:**

- Reviewed the most recent COVID numbers (see attached. There have been 405 deaths to-date. Dr. Smith stressed that COVID is not over but still active and ongoing.
- PODs continue to be held once a week at the Best Buy site. Appointments can be made online through the County website. There have been ongoing discussions regarding stopping PODs with the County Executive's Office but it has been recommended to continue until the end of the first quarter in 2023. The new incoming County Executive will then determine if PODs should continue past the first quarter. Approximately 70 individuals are being seen at these PODs as of late.
- The COVID data gathering system, CommCare, used to track COVID cases is being discontinued by the state. The only source for tracking positive cases is through the Health Commerce System, which holds laboratory confirmed cases only. There is no longer a way to track self-reported home tests. Individuals needing documentation for employers are being directed to the NYSDOH website to obtain an attestation form to receive necessary documentation.
- COVID is being downscaled to be track as other communicable diseases such as the flu.

c. **Other Communicable Disease Updates:**

- Polio and Mpox (formerly known as Monkeypox) Update: There have been no reported cases of polio in Ulster County. No recent doses of the Mpox vaccine given.
- Flu: Flu cases are reported to be very high this year. (See Attached)

d. **Medical Examiner Stats:**

- The report was distributed to the Board (see attached).

e. **Other DOH Business:**

- Public Health Funding: Federal funding for those States that applied will be filtered through the CDC to State and Local Health Departments. State DOHs will receive 60% of the state allotment with the other 40% being dispersed to Local DOHs within that state, not including NYC. These monies will be given to help rebuild public health infrastructure. The entirety of the funds must be used solely on public health rebuild. Ulster County is expected to receive approximately \$167,000.00.

Hudson Valley Health Alliance/Westchester Medical Center: Dr Saint Jean announced that the hospital will move from their Broadway location to their newly remodeled Mary's Avenue campus on December 14th. The Kingston Broadway site will be the home of a new Medical Village.

Adjournment: Motion was made to adjourn the meeting by Dr. Sanchez, seconded by Dr. Saint Jean and unanimously approved.

Next Meeting: Scheduled for Tuesday, January 10, 2023 at 5:00 PM, Golden Hill Office Building, 239 Golden Hill Lane, Kingston, NY 12401.

Respectfully submitted by:

A handwritten signature in blue ink, appearing to read 'Stephanie Turco', with a long horizontal flourish extending to the right.

Stephanie Turco, LCSW - Chair

Schedule for Board of Health Meetings – 2023

To be held on the **second Tuesday** of the month

5:00 PM

Ulster County Golden Hill Office Building
239 Golden Hill Lane
Kingston, NY 12401

January 10th

February 14th

March 14th

April 11th

May 9th

June 13th

July 11th

August 8th

September 12th

October 10th

November 14th

December 12th

Today			
Official Counts For		12/13/2022	
Data As Of		12/12/2022	
Total Tests	818799	+381	Since Yesterday
Confirmed Cases	52556	+50	Since Yesterday
Transferred	-783	0	No Change Since Yesterday
Recovered	51879	+128	Since Yesterday
Fatalities	405	+2	Since Yesterday
Active	272	-80	Since Yesterday

7 day rolling average today is 11.8%

ResTown	Town	Active	Recovered	Deceased	Total Confirmed
City of Kingston	City of Kingston	58	7797	67	7922
Wawarsing	Town of Wawarsing	19	3862	19	3900
Hurley	Town of Hurley	7	1413	12	1432
Lloyd	Town of Lloyd	21	4364	76	4461
Ulster	Town of Ulster	15	3276	72	3363
Marlborough	Town of Marlborough	5	2599	9	2613
Saugerties	Town of Saugerties	28	4777	34	4839
Shawangunk	Town of Shawangunk	24	3824	13	3861
New Paltz	Town of New Paltz	36	4510	22	4568
Esopus	Town of Esopus	3	1860	8	1871
Plattekill	Town of Plattekill	6	2428	15	2449
Rochester	Town of Rochester	6	1613	8	1627
Rosendale	Town of Rosendale	6	1035	6	1047
Marbletown	Town of Marbletown	5	1128	3	1136
Gardiner	Town of Gardiner	6	1108	7	1121
Unknown	Unknown	15	3550	17	3582
Woodstock	Town of Woodstock	7	1059	2	1068
Olive	Town of Olive	3	807	7	817
Shandaken	Town of Shandaken	1	395	1	397
Denning	Town of Denning	0	62	0	62
Hardenburg	Town of Hardenburg	0	0	0	0
Out of County	Out of County	0	252	5	257
Town of Kingston	Town of Kingston	1	160	2	163
Total		272	51879	405	52556

Patient Facility	Total Confirmed	Total Active	Active - Employees
Golden Hill Nursing and Rehabilitation Center	526	15	5
Eastern Correctional Facility	226	8	0
SUNY New Paltz	1113	8	0
Ten Broeck Center for Rehabilitation & Nursing	612	5	1
ARC MID-HUSON (THE)	190	3	2
KINGSTON HIGH SCHOOL	299	3	3
Mohonk Mountain House	235	3	2
New Paltz Center for Rehabilitation and Nursing	147	3	0
Woodland Pond at New Paltz	123	3	0
Ivy Lodge	71	2	0
MORSE SCHOOL	38	2	1
CAHILL SCHOOL	29	1	0
HIGH MEADOW SCHOOL	25	1	1
KINGSTON CATHOLIC SCHOOL	26	1	0
M CLIFFORD MILLER MIDDLE SCHOOL	134	1	1
NEW PALTZ SENIOR HIGH SCHOOL	80	1	0
Northeast Center for Rehabilitation and Brain Injury	274	1	0
ONTEORA HIGH SCHOOL	88	1	0
Unknown Saugerties CSD	3	1	0

Weekly Influenza Surveillance Report

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).¹

During the week ending December 03, 2022

- Influenza activity level was categorized as geographically widespread². This is the ninth consecutive week widespread activity has been reported this season.
- Laboratories tested 125,521 specimens for influenza, of which 44,426 (35%) were positive, a 64% increase over last week.
- Of the 4,145 specimens submitted to WHO/NREVSS clinical laboratories, 861 (20.77%) were positive. 860 were positive for influenza A and 1 for influenza B.
- Of the 46 specimens tested at Wadsworth Center, 5 were positive for influenza A (H1) and 21 were positive for influenza A (H3).
- The percent of patient visits for influenza-like illness (ILI³) from ILINet providers was 6.66%, above the regional baseline of 3.40%.
- The number of patients hospitalized with laboratory-confirmed influenza was 2,465, a 58% increase over last week.
- There was 1 influenza-associated pediatric death reported this week. There has been only 1 influenza-associated pediatric death reported this season.

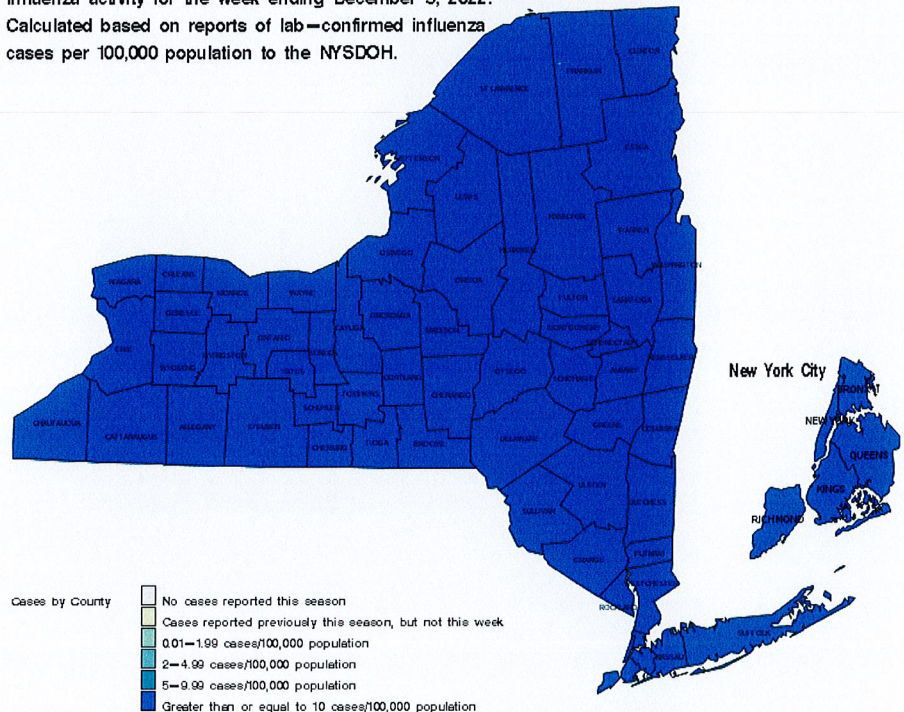
Laboratory Reports of Influenza (including NYC)

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

- All 62 counties reported cases this week.
- Incidence ranged from 55.30-481.30 cases/100,000 population.

Note: Counties with smaller populations are likely to have an incidence rate greater than 10 cases/100,000 population when fewer (less than 10) lab-confirmed cases have been reported.

Influenza activity for the week ending December 3, 2022. Calculated based on reports of lab-confirmed influenza cases per 100,000 population to the NYSDOH.



¹ 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/>.

² **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 is greater than 31 of the 62 counties.

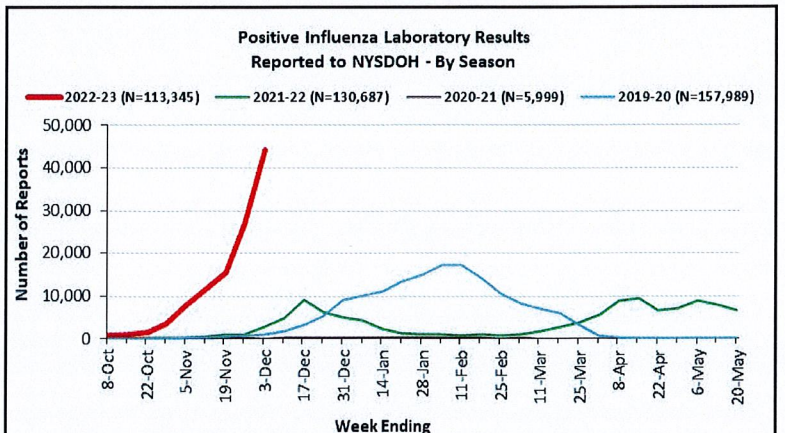
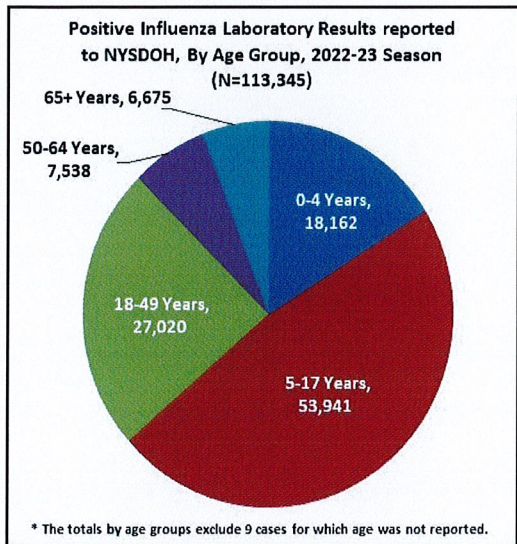
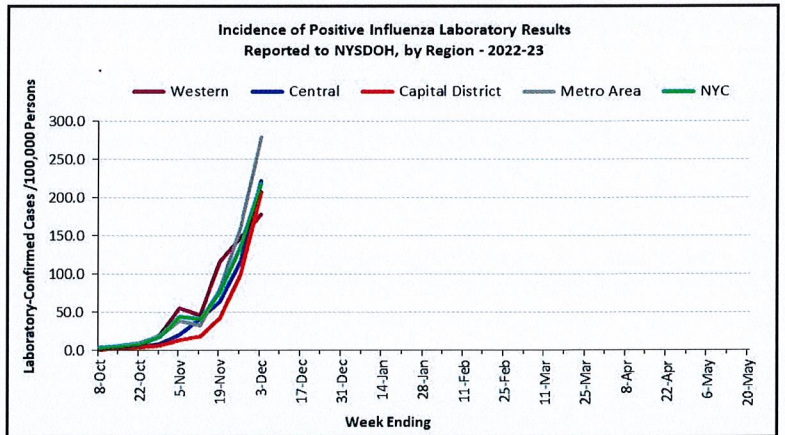
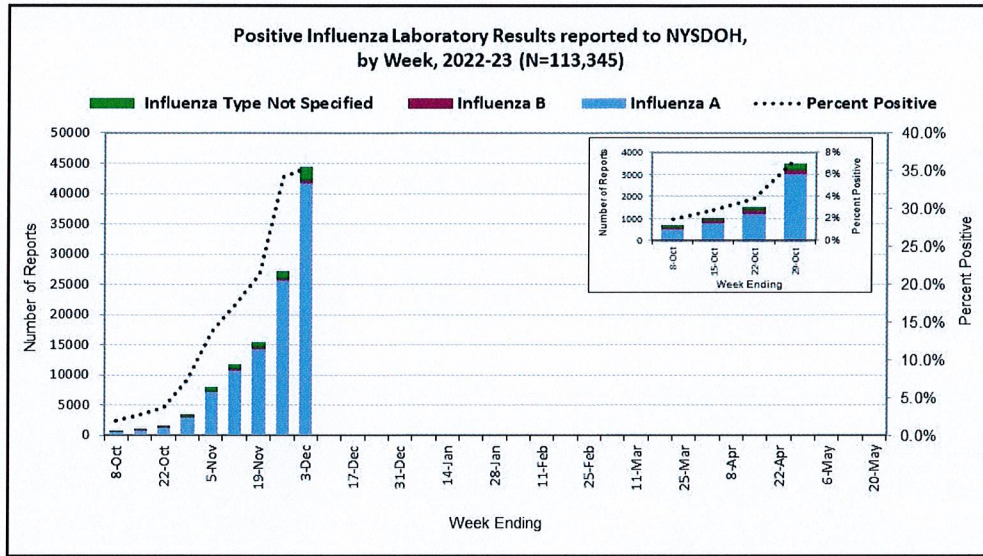
Increased or sustained is defined as 2 or more cases of laboratory-confirmed influenza per 100,000 population.

³ 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).

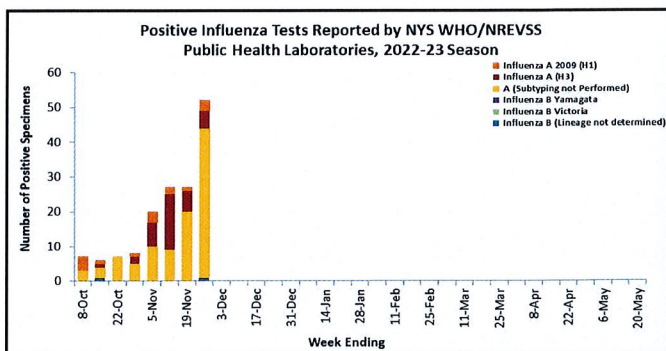
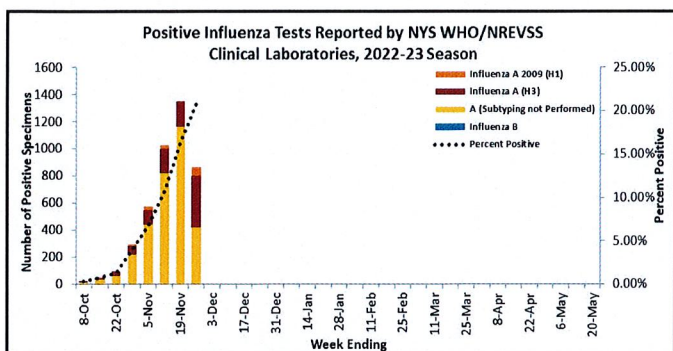
County-level data is displayed on the NYS Weekly Influenza Surveillance (Interactive Views) at <https://nyshc.health.ny.gov/web/nyapd/new-york-state-flu-tracker>. To download the data, please go to Health Data NY at <https://health.data.ny.gov/Health/Influenza-Laboratory-Confirmed-Cases-By-County-Beg/jr8b-6gh6>.



World Health Organization (WHO) and National Respiratory & Enteric Virus Surveillance System (NREVSS) Collaborating Laboratories

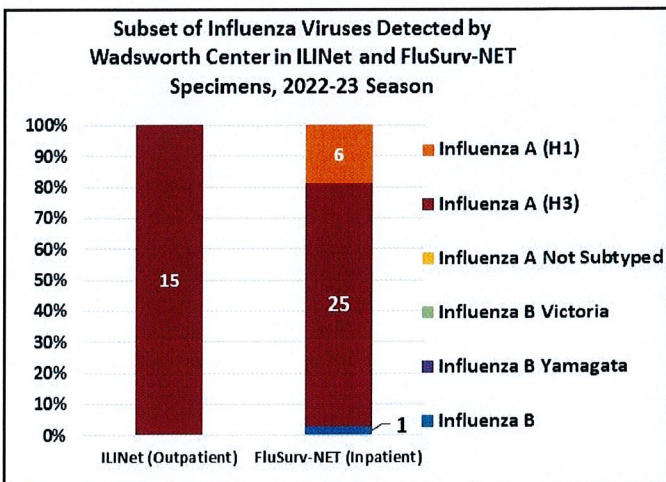
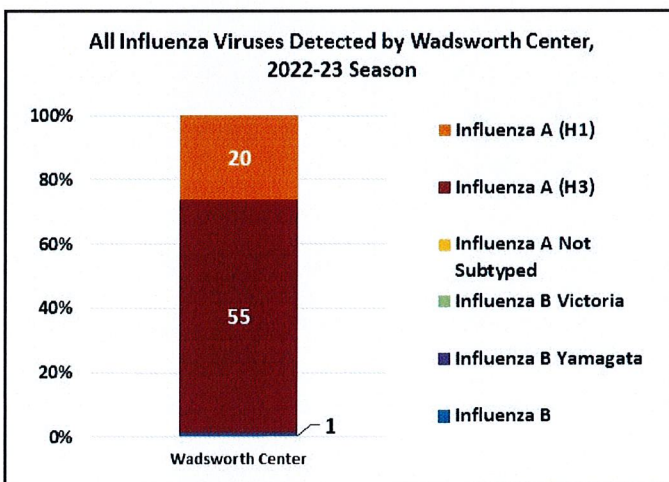
Clinical laboratories that are WHO and/or NREVSS collaborating laboratories for virologic surveillance report weekly the number of respiratory specimens tested and the number positive for influenza types A and B to CDC. Since denominator data is provided, the weekly percentage of specimens testing positive for influenza is calculated.

Public health laboratories that are WHO and/or NREVSS collaborating laboratories also report the influenza A subtype (H1 or H3) and influenza B lineage (Victoria or Yamagata).



Influenza Virus Types and Subtypes Identified at Wadsworth Center (excluding NYC)

Wadsworth Center, the NYSDOH public health laboratory, tests specimens from sources including, outpatient healthcare providers (ILINet) and hospitals (FluSurv-NET). There are 2 common subtypes of influenza A viruses – H1 and H3. Wadsworth also identifies the lineage of influenza B specimens Yamagata or Victoria. Rarely, an influenza virus is unable to have its subtype or lineage identified by the laboratory. Wadsworth sends a subset of positive influenza specimens to the CDC for further virus testing and characterization.



Influenza Antiviral Resistance Testing

The Wadsworth Center Virology Laboratory performs surveillance testing for antiviral drug resistance.⁴

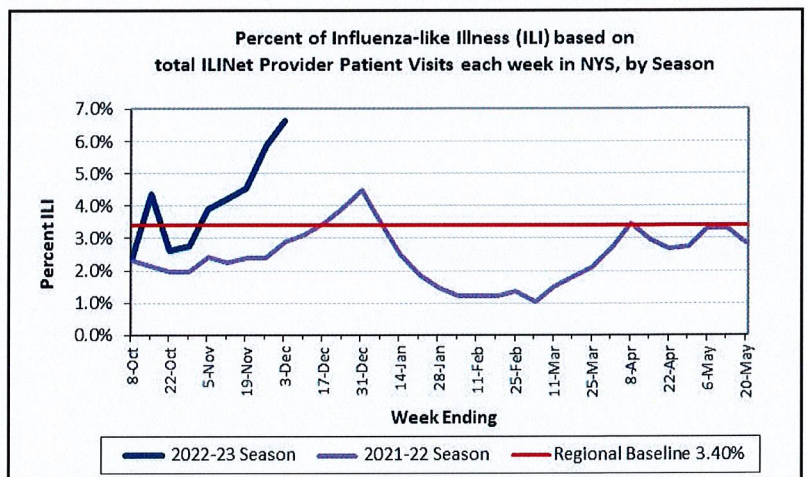
Data will be displayed here later in the season.

Outpatient Influenza-like Illness Surveillance Network (ILINet) (excluding NYC)

The NYSDOH works with ILINet healthcare providers who report the total number of patients seen and the total number of those with complaints of influenza-like illness (ILI) every week in an outpatient setting.

The CDC uses trends from past years to determine a regional baseline rate of doctors' office visits for ILI. For NYS, the regional baseline is currently 3.40%. Numbers above this regional baseline suggest high levels of illness consistent with influenza in the state.

Note that surrounding holiday weeks, it is not uncommon to notice a fluctuation in the ILI rate. This is a result of the different pattern of patient visits for non-urgent needs.

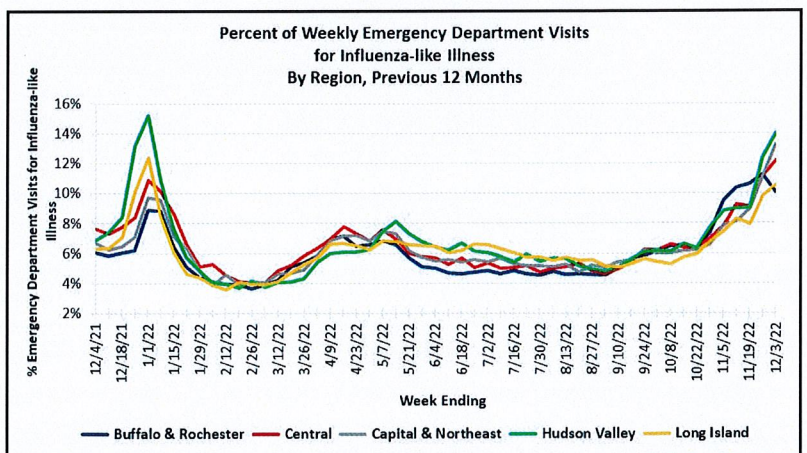


Emergency Department Visits for ILI-Syndromic Surveillance (excluding NYC)

Hospitals around NYS report the number of patients seen in their emergency departments with complaints of ILI. This is called syndromic surveillance.

An increase in visits to hospital emergency departments for ILI can be one sign that influenza has arrived in that part of NYS.

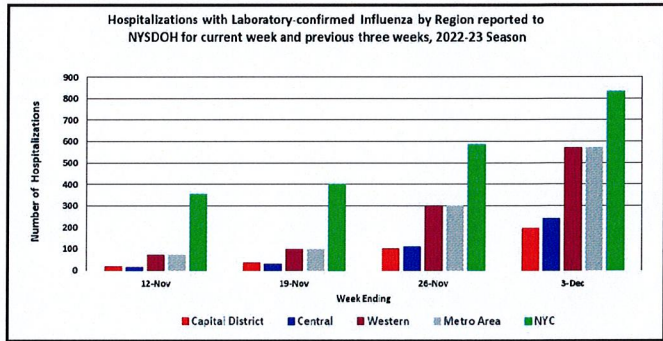
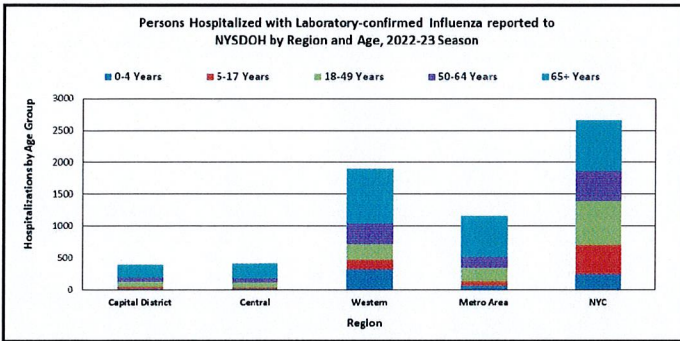
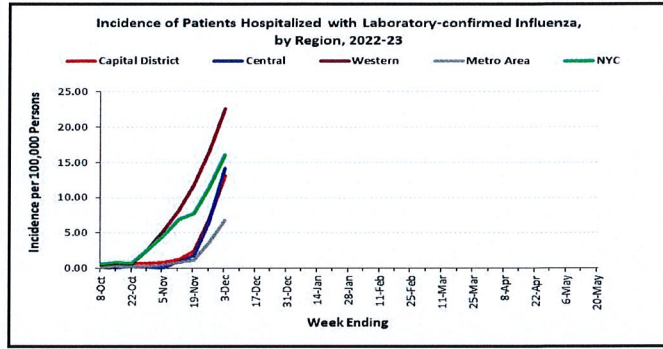
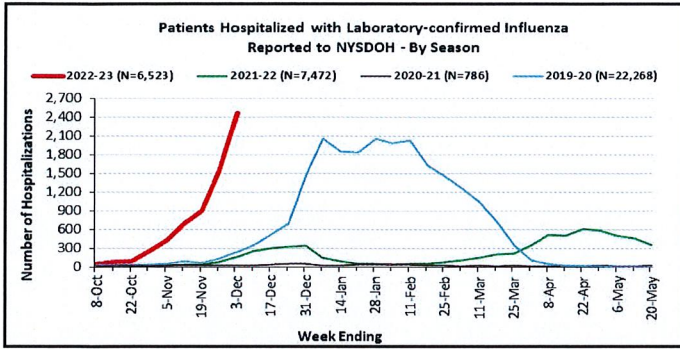
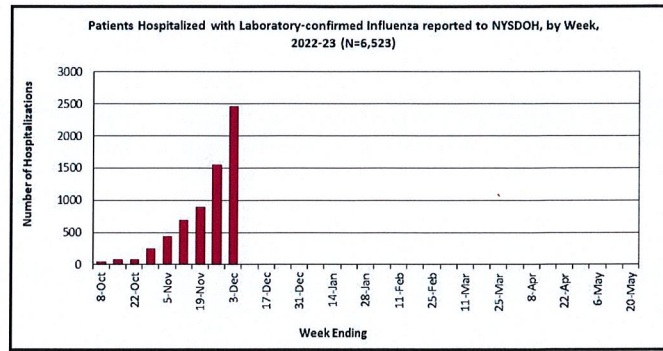
Syndromic surveillance does not reveal the actual cause of illness, but is thought to correlate with emergency department visits for influenza.



⁴Additional information regarding national antiviral resistance testing, as well as recommendations for antiviral treatment and chemoprophylaxis of influenza virus infection, can be found at <http://www.cdc.gov/flu/weekly/>.

Patients Hospitalized with Laboratory-Confirmed Influenza (Including NYC)

- Hospitals in NYS and NYC report the number of hospitalized patients with laboratory-confirmed influenza to NYSDOH.
- The following graphs display incidence admissions “newly admitted”.
- 174 (93%) of 188 hospitals reported this week.



Healthcare-associated Influenza Activity (including NYC)

Hospitals and nursing homes in NYS report outbreaks of influenza to the State. An outbreak in these settings is defined as one or more healthcare facility-associated case(s) of confirmed influenza in a patient or resident or two or more cases of influenza-like illness among healthcare workers and patients/residents of a facility on the same unit within 7 days. Outbreaks are considered confirmed only with positive laboratory testing.⁵

Week-to-Date (CDC week - 48) 11/27/2022 through 12/3/2022	Capital Region			Central Region			Metro Region			Western Region			Statewide (Total)		
	ACF	LTCF	Total	ACF	LTCF	Total	ACF	LTCF	Total	ACF	LTCF	Total	ACF	LTCF	Total
# Outbreaks* lab-confirmed influenza (any type)		3	3		6	6	15	11	26		14	14	15	34	49
# Outbreaks* viral respiratory illness**			0			0			0			0	0	0	0
Total # Outbreaks	0	3	3	0	6	6	15	11	26	0	14	14	15	34	49
Season-to-Date (CDC week - 48) 10/2/22 through 12/3/2022	Capital Region			Central Region			Metro Region			Western Region			Statewide (Total)		
	ACF	LTCF	Total	ACF	LTCF	Total	ACF	LTCF	Total	ACF	LTCF	Total	ACF	LTCF	Total
# Outbreaks* lab-confirmed influenza (any type)		8	8	2	16	18	25	31	56	9	32	41	36	87	123
# Outbreaks* viral respiratory illness**			0			0			0			0	0	0	0
Total # Outbreaks	0	8	8	2	16	18	25	31	56	9	32	41	36	87	123

ACF - Article 28 Acute Care Facility

LTCF - Article 28 Long Term Care Facility

*Outbreaks are reported based on the onset date of symptoms in the first case

** Includes influenza-like illness outbreaks where no testing is performed or where an alternate etiology was identified (excludes COVID-19)

For information about the flu mask regulation and the current status of the Commissioner's declaration, please visit www.health.ny.gov/FluMaskReg

⁵For more information on reporting of healthcare-associated influenza, visit http://www.health.ny.gov/diseases/communicable/control/respiratory_disease_checklist.htm



Department of Health

Influenza Hospitalization Surveillance Network (FluSurv-NET)

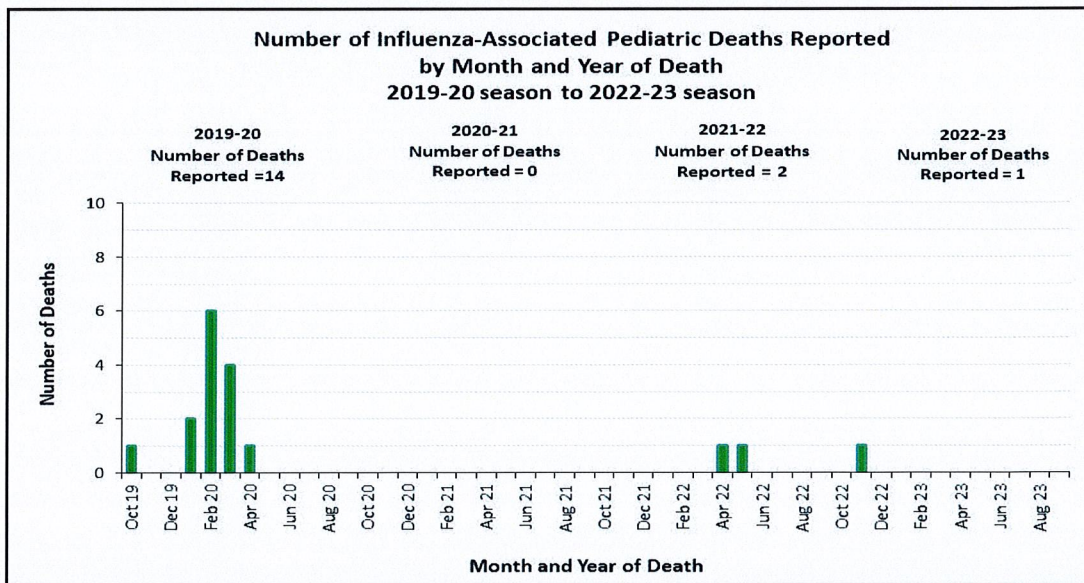
As part of the CDC's FluSurv-NET, the NYS Emerging Infections Program (EIP) conducts enhanced surveillance for hospitalized cases of laboratory-confirmed influenza among residents of 15 counties.⁶ Underlying health conditions are assessed through medical chart reviews for cases identified during the season.⁷

Data will be displayed here later in the season.

Pediatric influenza-associated deaths reported (including NYC)

Local health departments report pediatric influenza-associated deaths to NYSDOH.

Flu-associated deaths in children younger than 18 years old are nationally notifiable. Influenza-associated deaths in persons 18 years and older are not notifiable. All pediatric flu-associated deaths included in this report are laboratory-confirmed.



⁶Counties include, in the Capital District: Albany, Columbia, Greene, Montgomery, Rensselaer, Saratoga, Schenectady, and Schoharie; in the Western Region: Genesee, Livingston, Monroe, Ontario, Orleans, Wayne, and Yates

⁷Data are based on medical record reviews for hospitalized cases currently under investigation and should be considered preliminary.

Ulster County Department of Health

Medical Examiner's Office - Autopsy Cases

Date of Death between 8/1/2022 and 11/30/2022

Total Number of Cases: 79

<i>Cases by Gender</i>	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Grand Total
F	0	0	0	0	0	0	0	6	5	7	6	0	24
M	0	0	0	0	0	0	0	21	7	13	14	0	55
Grand Total	0	0	0	0	0	0	0	27	12	20	20	0	79

<i>Cases by Manner</i>	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Grand Total
Accidental	0	0	0	0	0	0	0	11	4	9	1	0	25
Homicide	0	0	0	0	0	0	0	0	2	1	0	0	3
Natural	0	0	0	0	0	0	0	13	2	4	4	0	23
Pending	0	0	0	0	0	0	0	2	2	6	15	0	25
Suicide	0	0	0	0	0	0	0	1	2	0	0	0	3
Grand Total	0	0	0	0	0	0	0	27	12	20	20	0	79

<i>Cases by Category</i>	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Grand Total
Alcohol	0	0	0	0	0	0	0	1	0	0	0	0	1
Blunt Force Trauma - non-MVA	0	0	0	0	0	0	0	0	0	1	0	0	1
Cardiovascular	0	0	0	0	0	0	0	9	1	2	2	0	14
Cardiovascular and Obesity	0	0	0	0	0	0	0	0	0	0	2	0	2
Drowning	0	0	0	0	0	0	0	1	0	0	0	0	1
Fall	0	0	0	0	0	0	0	1	0	0	1	0	2
Gunshot Wound	0	0	0	0	0	0	0	0	3	0	0	0	3
Motor Vehicle Accident	0	0	0	0	0	0	0	0	0	2	0	0	2
Obesity	0	0	0	0	0	0	0	1	0	0	0	0	1
Opioid	0	0	0	0	0	0	0	4	1	0	0	0	5
Opioid w/ Other Substances	0	0	0	0	0	0	0	4	3	6	0	0	13
Opioid w/ Other Substances and Alcohol	0	0	0	0	0	0	0	1	0	0	0	0	1
Other	0	0	0	0	0	0	0	3	1	2	0	0	6
Pending	0	0	0	0	0	0	0	1	0	3	5	0	9
Pending - Suspected Opioid	0	0	0	0	0	0	0	1	2	3	10	0	16
Pulmonary Disease	0	0	0	0	0	0	0	0	0	1	0	0	1
Sharp Force Trauma	0	0	0	0	0	0	0	0	1	0	0	0	1
Grand Total	0	0	0	0	0	0	0	27	12	20	20	0	79