

ULSTER COUNTY BOARD OF HEALTH

June 14, 2022

AGENDA

CALL TO ORDER

1. OLD BUSINESS

a. Approval of May 2022 Minutes

2. Commissioner's Report (Dr. Smith)

a. COVID Update

- Up-to-date Stats
- Water Surveillance

b. Elevated Flu Activity in NYS

- Medical Examiner Report
- Community Health Improvement Plan Presentation (Vin Martello)

MEETING CONCLUSION

Ulster County Board of Health

June 14, 2022

5:00 p.m.

Virtual Meeting

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

EXCUSED:

ABSENT:

UCDOH: Dr. Carol Smith- Commissioner of Health
Vin Martello - Director of Community Health Relations

GUEST:

Call To Order: 5:04PM. Dr. Woodley thanked the Board for their flexibility to meet virtually.

1. Community Health Improvement Plan Presentation: Dr Smith introduced Vin Martello as the Department of Health's Director of Community Relations. Mr. Martello gave a presentation on the Community Health Improvement Plan (See Attached). Mr. Martello noted the housing crisis and the need for affordable living. Also noted, there has been a reduction in the County's smoking rate overall, but it is still considered to be high and one of the leading causes of death in Ulster County.

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

a. COVID Update:

- Reviewed the most recent COVID numbers (see attached). The numbers are showing a decline in positivity rate. The County is demonstrating a moderate transmission rate but DOH is still monitoring the numbers closely.
- Vaccination PODs continue to be held every Saturday, except in instances of holiday weekend. There are scheduled pop-up sites in Ellenville and Shandaken.

b. Other Communicable Disease Updates:

- Flu Update: Seeing persistently increasing activity. A(H3) has been the predominant influenza. The State Department of Health has issued a Health Advisory, extending the Surveillance season due the increase in activity. (See Attached)

- c. **Medical Examiner Stats:** The quarterly stats for the Medical Examiner's Office were distributed to the Board. (See Attached)
- d. **Health, Human Services & Housing Committee:** DOH will be scheduled to give a departmental overview presentation. Hopefully this will demonstrate the need for positions as it is crucial for the department to successfully carry out its mandated responsibilities.

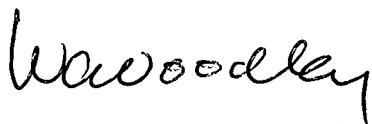
Dr Sanchez stated that the new Institute for Family Pine Street Family Health Center is anticipated to open between the end of 2022 and the beginning of 2023.

Dr Woodley expressed his appreciation to the Board for their energy, time, and interest in serving as a member of the Board.

6. Adjournment: Motion to adjourn was made by Ms. Stevens and seconded by Ms. Rogan and unanimously approved.

7. Next Meeting: Scheduled for Tuesday, July 12, 2022, at 5:00 PM.

Respectfully submitted by:



Walter Woodley, MD - Chair

Ulster County Department of Health



*New York State Prevention Agenda
Community Health Assessment/Community Health Improvement Plan
Overview*

1

What is the New York State Prevention Agenda?

The Prevention Agenda 2019-2024 is New York State's health improvement plan, the blueprint for state and local action to improve the health and well-being of all New Yorkers and to promote health equity in all populations who experience disparities.

Every local Health Department, in every county in New York, is required to complete the following:

1. A **Community Health Assessment** that looks at data from across Federal, State, Local and Academic Institutions sources, in addition to local/regional surveys, to determine where each county falls behind state and regional averages for a multitude of health and behavioral health outcomes and disparities.
2. To use the information and insights derived from the Community Health Assessment to create a **Community Health Improvement Plan** to address the identified poor outcomes and disparities (by enhancing existing interventions or creating new ones)

2

What are the NYS Prevention Agenda Priority Areas?

Every local Health Department must choose to focus on at least 2 of the following Priority Areas:

Prevent Chronic Disease

Promote a Healthy and Safe Environment

Promote Healthy Women, Infants and Children

Promote Well-Being and Prevent Mental and Substance Use Disorders

Prevent Communicable Diseases

Details on these priority areas, and goals within each, can be found [here](#)

3

How is a Community Health Assessment Crafted?

1. Ulster County Department of Health's team examines a broad array of Federal, State, Regional and local data sources to identify trends and patterns that influence or result in poor health and behavioral health outcomes and disparities. These include social determinant deficiencies, such as housing, education, employment, transportation, food insecurity, access to care, social associations, and others.
2. Ulster County Department of Health collaborates with a consortium of 7 counties in the Mid-Hudson Valley Region to contract with Siena College Research Institute to conduct a phone and online survey of residents to gather their experiences, perceptions, and thoughts on what influences their health and well-being – and what's missing.

4

How is a Community Health Assessment Crafted?

3. All the survey data is combined with the research data compiled by UCDOH to create a comprehensive Mid-Hudson Region Community Health Assessment (CHA). The CHA has breakout sections for individual counties, as well as regional comparisons.

The last Mid-Hudson Valley Regional Community Health Assessment can be found [here](#)

5

Select Ulster County Data: Highlights

The Leading Causes of Death in Ulster County - 2018:

1. Heart Disease
2. Cancers
3. Unintentional Injury (includes drug overdose fatalities)
4. Chronic Lower Respiratory Disease
5. Stroke

6

Select Ulster County Data: Highlights
Where UC Falls Behind the MH Region and/or NYS

Premature Death Rate (< 65 - Blacks)

Ulster County: 21.8

MHR: 13.5

NYS: 18.6

% Children/Adolescents Obese

Ulster County: 20.5

MHR: 16.0

NYS: 17.3

7

Select Ulster County Data: Highlights
Where UC Falls Behind the MH Region and/or NYS

% of Adults <\$25K HHI Obese

Ulster County: 42.4

MHR: 33.7

NYS: 34.4

% of Adults <\$25K Food Insecure

Ulster County: 54.7 *

MHR: 55.3

NYS: 58.4

* Unacceptably High

8

Select Ulster County Data: Highlights
Where UC Falls Behind the MH Region and/or NYS

% of Adult Smokers

Ulster County: 13.4

MHR: 9.6

NYS: 13.9

% of Women w/Preventative Health Visit (past year/ 18-44)

Ulster County: 77.0

MHR: 78.4

NYS: 79.2

9

Select Ulster County Data: Highlights
Where UC Falls Behind the MH Region and/or NYS

Maternal Mortality Rate (per 100K live births)

Ulster County: 22.2

MHR: 16.4

NYS: 17.8

Suicide Mortality Rate (15-19/per 100K)

Ulster County: 15.2

MHR: 5.8

NYS: 7.2

10

Select Ulster County Data: Highlights
Where UC Falls Behind the MH Region and/or NYS

Frequent Mental Distress (past month/adults)

Ulster County: 11.6

MHR: 9.1

NYS: 11.8

% Adults with 2 or More Adverse Childhood Experiences

Ulster County: 42.6

MHR: 36.9

NYS: 36.1

11

Where UC Select Ulster County Data: Highlights
Falls Behind the MH Region and/or NYS

Overdose Fatalities (any opioid/per 100K)

Ulster County: 33.6

MHR: 20.2

NYS: 17.2

Opioid Prescriptions for Pain (age adj./per 1000)

Ulster County: 476.1*

MHR: 304.5

NYS: 372.7

* improved from a high of 700.4 in 2013

12

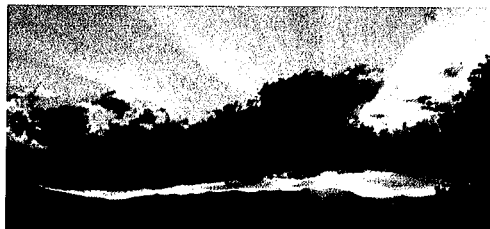
Timeline

- Siena College- Primary data collection for CHA Contract initiated with Siena and Ulster County Dept. of Health: December 2021
- Data collection Survey tool planning with Hudson Valley Public Health Collaborative (7 counties in MH Region - Nov. 2021-February 2022
- Telephone Survey Starting: End March 2022-May 2022
- Survey Results: Estimate June 2022
- CHA Document -Due December 2022
- Planning-Hudson Valley Public Health Collaborative Meetings- May 2021-Present
- Gather data- Access all Secondary data sets, analyze and compare to Mid-Hudson Regional Counties and NYS-October- Present.
- Review data and choose CHIP Priority Areas and Featured Interventions- February-June 2022
- Write document with Hudson Valley Public Health Collaborative- July- October 2022.
- Send CHIP Document to NYSDOH - Due December 2022

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Sample CHIP
to NYSDOH

Community Health Improvement Plan



Ulster County, New York

14

Today

Official Counts For

6/14/2022

Data As Of

6/13/2022

Total Tests	750550	+347	Since Yesterday
Confirmed Cases	43790	+50	Since Yesterday
Transferred	-514	-2	Since Yesterday
Recovered	43282	+92	Since Yesterday
Fatalities	386	0	No Change Since Yesterday
Active	122	-44	Since Yesterday

7 day rolling average today is 8.6%

ResTown	Town	Active	Recovered	Deceased	Total Confirmed
City of Kingston	City of Kingston	22	6402	63	6487
Wawarsing	Town of Wawarsing	11	3294	19	3324
Hurley	Town of Hurley	2	1161	11	1174
Lloyd	Town of Lloyd	15	3552	74	3641
Ulster	Town of Ulster	4	2875	69	2948
Marlborough	Town of Marlborough	4	2242	8	2254
Saugerties	Town of Saugerties	11	3973	33	4017
Shawangunk	Town of Shawangunk	9	3166	11	3186
New Paltz	Town of New Paltz	11	3505	22	3538
Esopus	Town of Esopus	5	1588	7	1600
Plattekill	Town of Plattekill	3	2180	15	2198
Rochester	Town of Rochester	4	1364	8	1376
Rosendale	Town of Rosendale	2	879	5	886
Marbletown	Town of Marbletown	4	896	2	902
Gardiner	Town of Gardiner	1	950	6	957
Unknown	Unknown	11	2980	16	3007
Woodstock	Town of Woodstock	2	857	2	861
Olive	Town of Olive	1	685	7	693
Shandaken	Town of Shandaken	0	328	1	329
Denning	Town of Denning	0	50	0	50
Hardenburg	Town of Hardenburg	0	0	0	0
Out of County	Out of County	0	246	5	251
Town of Kingston	Town of Kingston	0	109	2	111
Total		122	43282	386	43790

Patient Facility	Total Confirmed	Total Active	Active - Employees
SAUGERTIES JUNIOR HIGH SCHOOL	48	3	0
Eastern Correctional Facility	196	2	2
Golden Hill Nursing and Rehabilitation Center	344	2	0
Samaritan Daytop Village	65	2	0
ULSTER BOCES	60	2	1
Ulster County DOHMH	12	2	2
Woodland Pond at New Paltz	91	2	0
ARC MID-HUSON (THE)	111	1	0
HIGH MEADOW SCHOOL	14	1	1
HIGHLAND MIDDLE SCHOOL	53	1	1
J WATSON BAILEY MIDDLE SCHOOL	136	1	0
KINGSTON HIGH SCHOOL	260	1	1
Learning Together Daycare	8	1	1
MARLBORO ELEMENTARY SCHOOL	37	1	1
Mohonk Mountain House	148	1	1
ROBERT R GRAVES SCHOOL	43	1	1
RONDOUT VALLEY HIGH SCHOOL	95	1	1
RONDOUT VALLEY INTERMEDIATE SCHOOL	43	1	0
RONDOUT VALLEY JUNIOR HIGH SCHOOL	35	1	1
Ten Broeck Center for Rehabilitation & Nursing	504	1	0
Ulster County DSS	38	1	1
Unknown Kingston City SD	10	1	0
WOODSTOCK ELEMENTARY SCHOOL	28	1	0



Department of Health

KATHY HOCHUL
Governor

MARY T. BASSETT, M.D., M.P.H.
Commissioner

KRISTIN M. PROUD
Acting Executive Deputy Commissioner

May 20, 2022

TO: Healthcare Providers, Clinical Laboratories, Hospitals, Long Term Care Facilities, Healthcare Facilities, Regional and Home Care Agencies, Pharmacists and Local Health Departments

FROM: NYSDOH Division of Epidemiology

**HEALTH ADVISORY:
EXTENDED INFLUENZA SURVEILLANCE SEASON DUE TO
ELEVATED INFLUENZA ACTIVITY IN NEW YORK STATE**
For healthcare facilities, Infection Control Department,
Emergency Department, Infectious Disease Department, Director of Nursing, Medical Director,
Director of Pharmacy, Laboratory Service, and all inpatient and outpatient patient care areas.

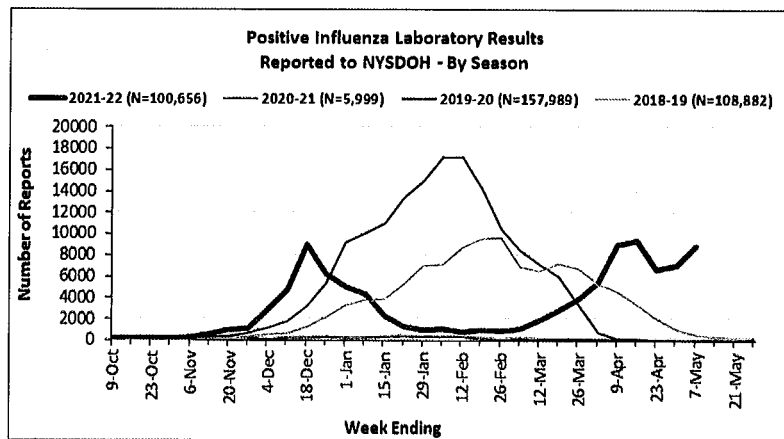
PURPOSE

In view of persisting elevated influenza activity throughout New York State (NYS), this advisory serves to (1) notify healthcare facilities and providers that the New York State Department of Health (NYSDOH) will be extending the influenza surveillance season, and (2) provide updated influenza surveillance information along with links and references to influenza prevention and control resources.

Influenza Surveillance Summary

NYSDOH conducts routine influenza surveillance each October through May. Influenza is unpredictable; and while it is not uncommon for influenza activity to extend into late spring, current activity remains elevated and widespread. Therefore, NYSDOH is extending the surveillance season beyond May until influenza activity has decreased.

Surveillance data shows an unusual bimodal distribution of influenza activity during the 2021-22 season. Following consistent declines during January and low rates in February, laboratory-confirmed influenza cases and hospitalizations have been steadily rising since March with significant increases in laboratory-confirmed cases occurring throughout April. It is unknown if activity will remain at high levels or continue to increase in the coming weeks.



Surveillance data indicate that influenza A(H3) has been the predominant influenza virus circulating this season, accounting for 90% of all NYS influenza cases reported last week. While influenza viruses can cause severe illness in people of all ages, influenza A(H3) viruses are known to cause disproportionately more illness among young children and older adults. Since the start of the current influenza season, 100,656 laboratory-confirmed influenza cases and more than 5,600 hospitalizations have been reported, with 59% of all laboratory-confirmed cases occurring in persons aged 0–17 years and 42% of hospitalizations in persons aged 65 and older. During the week ending May 7, 2022, a total of 8,885 laboratory-confirmed cases of influenza were reported in 56 of 57 New York State counties and in all five boroughs of New York City.

INFLUENZA VACCINE, TESTING AND ANTIVIRAL RECOMMENDATIONS

All persons aged 6 months and older are eligible to be vaccinated. Influenza vaccine for the 2021-22 season can be given through June 30, 2022. Providers should review the influenza testing and antiviral treatment recommendations provided by the Department earlier in the season (linked below). Influenza antiviral treatment decisions should not be delayed pending testing results, nor should they be made based solely upon the results.

Questions or concerns about surveillance, diagnostic testing, treatment and/or chemoprophylaxis should be directed to the Bureau of Communicable Disease Control at 518–473–4439 (bcdc@health.ny.gov), except for those related to Article 28 healthcare facilities. For questions related to Article 28 healthcare facilities and facility-associated reporting, please contact your NYSDOH Regional Epidemiology office (Western Regional Office: 716-847-4503; Central New York Regional Office: 315-477-8166; Capital District Region: 518-474-1142 or Metropolitan Area Regional Office: 914-654-7149).

ADDITIONAL INFORMATION

- NYSDOH Influenza Guidance: <https://www.health.ny.gov/diseases/communicable/influenza/seasonal/>
- NYSDOH Weekly Influenza Surveillance Report: <http://www.health.ny.gov/diseases/communicable/influenza/surveillance/>.
- NYSDOH 2021-22 Annual Influenza Surveillance and Reporting Requirement Advisory can be found at: https://www.health.ny.gov/diseases/communicable/influenza/docs/influenza_health_advisory.pdf
- CDC Influenza Guidance: <https://www.cdc.gov/flu/index.htm>
- Contact information for Local Health Departments can be found at: <https://www.nysacho.org/directory/>

Ulster County Department of Health

Medical Examiner's Office - Autopsy Cases

Date of Death between 1/1/2022 and 5/31/2022

Total Number of Cases: 67

<i>Cases by Gender</i>	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Grand Total
F	1	3	4	3	6	0	0	0	0	0	0	0	17
M	13	10	7	12	8	0	0	0	0	0	0	0	50
Grand Total	14	13	11	15	14	0	0	0	0	0	0	0	67

<i>Cases by Manner</i>	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Grand Total
Accidental	4	5	3	10	4	0	0	0	0	0	0	0	26
Homicide	1	0	0	0	0	0	0	0	0	0	0	0	1
Natural	7	8	6	1	8	0	0	0	0	0	0	0	30
Suicide	2	0	2	4	2	0	0	0	0	0	0	0	10
Grand Total	14	13	11	15	14	0	0	0	0	0	0	0	67

<i>Cases by Category</i>	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Grand Total
Alcohol	0	0	0	1	2	0	0	0	0	0	0	0	3
Blunt Force Trauma - non-MVA	0	0	0	0	1	0	0	0	0	0	0	0	1
Cardiovascular	2	6	3	0	2	0	0	0	0	0	0	0	13
Cardiovascular and Diabetes	1	0	2	0	1	0	0	0	0	0	0	0	4
Cardiovascular and Obesity	0	1	0	0	1	0	0	0	0	0	0	0	2
Diabetes	1	0	0	0	0	0	0	0	0	0	0	0	1
Drowning	0	0	0	1	0	0	0	0	0	0	0	0	1
Gunshot Wound	3	0	1	1	0	0	0	0	0	0	0	0	5
Hanging	0	0	0	1	0	0	0	0	0	0	0	0	1
Motor Vehicle Accident	0	1	2	2	1	0	0	0	0	0	0	0	6
Non-Opioid Substance	0	0	0	2	0	0	0	0	0	0	0	0	2
Non-Opioid Substance w/ Other Substances	0	0	0	2	1	0	0	0	0	0	0	0	3
Non-Opioid Substance w/ Other Substances and Alcohol	0	0	0	0	1	0	0	0	0	0	0	0	1
Opioid	3	0	0	3	0	0	0	0	0	0	0	0	6
Opioid w/ Other Substances	0	3	0	2	2	0	0	0	0	0	0	0	7
Opioid w/ Other Substances and Alcohol	1	1	0	0	0	0	0	0	0	0	0	0	2
Other	2	1	2	0	2	0	0	0	0	0	0	0	7
Pneumonia	1	0	1	0	0	0	0	0	0	0	0	0	2
Grand Total	14	13	11	15	14	0	0	0	0	0	0	0	67

WASTEWATER SURVEILLANCE UPDATE

[DASHBOARD](#) | [WEBSITE](#)

DATE: 6/8/2022

TO: Ulster County Health Department and stakeholders

FROM: Dana Neigel, on behalf of the New York State Wastewater Surveillance Network

RE: Ulster County Weekly Wastewater Surveillance Data Report

Wastewater samples collected the week of May 30th, 2022 had quantifiable levels of SARS-CoV-2 RNA in the following wastewater treatment plant catchments, indicating substantial or high community-level transmission:

- City of Kingston
- New Paltz

The recent trend in SARS-CoV-2 has been increasing in the following catchments:

- New Paltz

Over the past week, we observed higher levels of SARS-CoV-2 in the following catchments relative to the rest of the state:

- New Paltz
- City of Kingston

Attached with this memo are several figures that you may find useful.

If you have any questions, please contact
Dana Neigel | Epidemiologist
732.993.8772 | dneigel@cdcfoundation.org

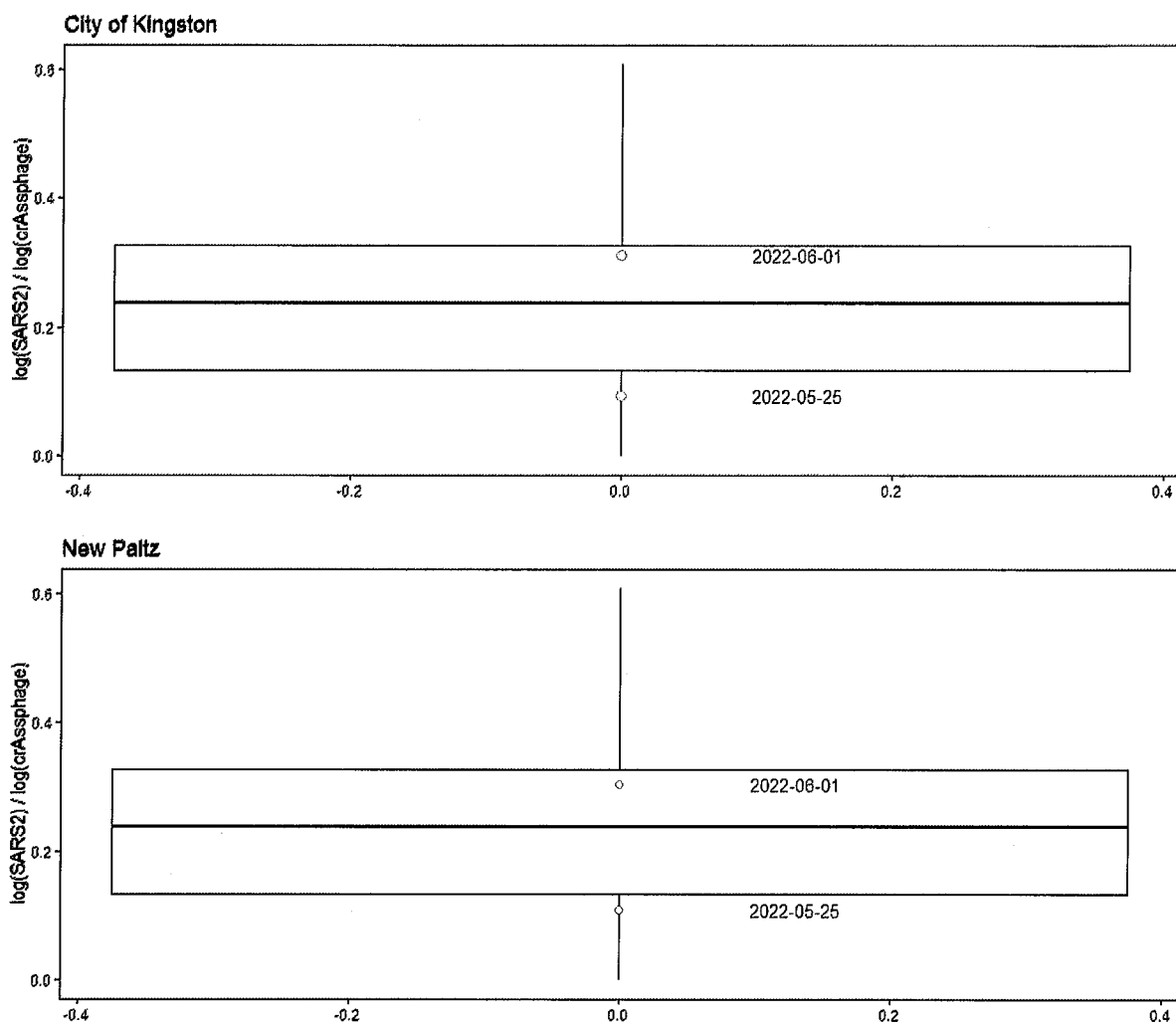


Figure 1: Observed levels of SARS-CoV-2 intensity in Ulster County WWTPs compared to NYS values.

The orange points represent the intensity* of SARS-CoV-2 RNA in samples taken at the influent over the last two weeks. The box plot represents all SARS-CoV-2 values from the previous two weeks as observed from wastewater treatment facilities across New York. The box plot shows the median (solid line), first and third quartiles (box edges), minimum (lower whiskers), maximum (upper whisker), and outliers (black dots) for all NY WWTP's. The concentration of SARS-CoV-2 is normalized by population, $\log(\text{SARS-CoV-2})/\log(\text{crAssphage})$, to give overall intensity.

*The intensity measure is calculated by log-transforming the number of genetic copies of SARS-CoV-2 RNA and dividing that number by the log-transformed number of genetic copies of crAssphage DNA.

Figures 2, 3: SARS-CoV-2 intensity over time at Ulster County WWTPs.

A smooth trend line (blue), uncertainty (gray), and wastewater samples (dots) are shown. Wastewater sample points are color coded to specify the level of SARS-CoV-2 RNA detected. The concentration of SARS-CoV-2 is normalized by population, $\log(\text{SARS-CoV-2})/\log(\text{crAssphage})$, to give overall intensity.

The level of SARS-CoV-2 RNA can tell us roughly how many cases can be expected in a population.

- Not detected: Low Transmission
 - <10 cases per 100,000 in the past 7 days and <5% test positivity.
- Detected: Medium Transmission
 - <LOQ: 10-50 cases per 100,000 in the past 7 days and 5-7.9% test positivity.
- Quantifiable detection: Substantial or High Transmission
 - >50 cases per 100,000 in the past 7 days and 8.0 test positivity or higher.

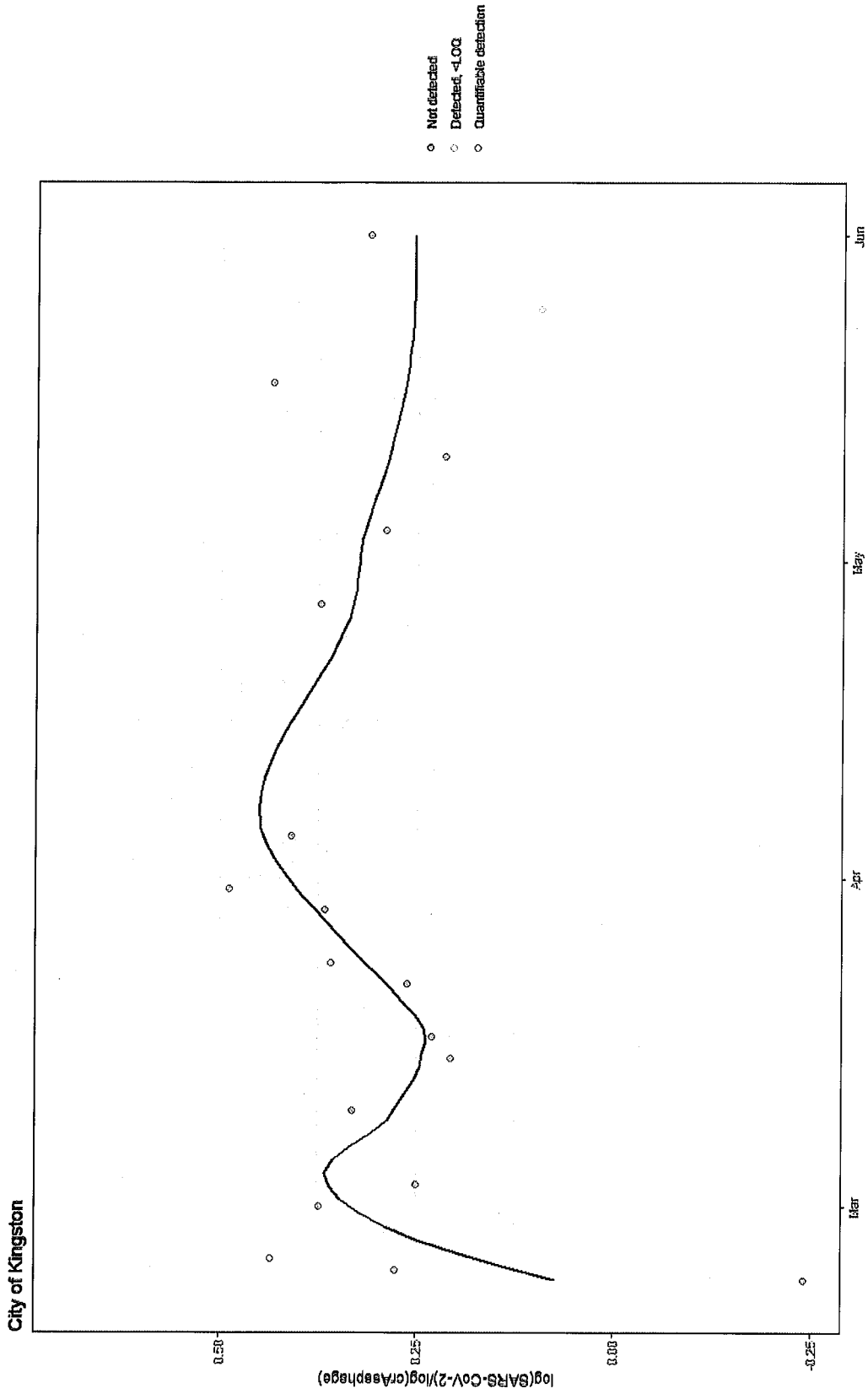


Figure 2: SARS-CoV-2 intensity over time at City of Kingston WWTP.

The population served by the City of Kingston WWTP is experiencing a stabilizing trend, although there's a fair amount of uncertainty. This would mean the population could potentially expect a comparable number of case counts in the coming weeks, if this trend continues.

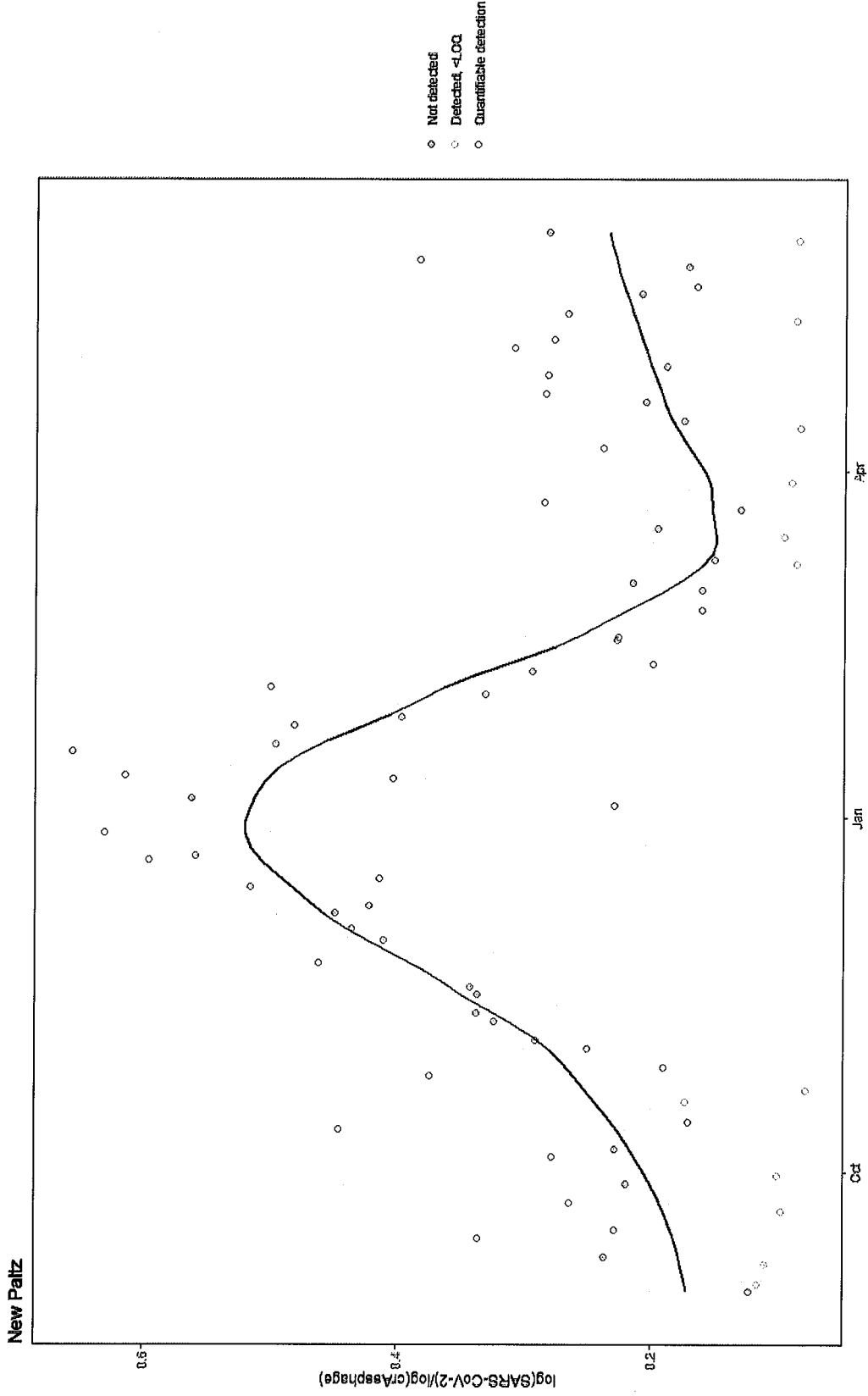


Figure 3: SARS-CoV-2 intensity over time at the New Paltz WWTP.

The population served by the New Paltz WWTP is experiencing an increasing trend, although there's a fair amount of uncertainty. This would mean the population could potentially expect a rise in daily COVID-19 cases in the coming weeks, if this trend continues.