

ULSTER COUNTY BOARD OF HEALTH

September 12, 2023

AGENDA

CALL TO ORDER

1. OLD BUSINESS

- a. Approval of August 8, 2023 Minutes

2. Commissioner's Report (Dr. Smith)

- a. COVID Update

- Wastewater Report
- Hospitalization Stats
- COVID Commercialization Transition
- VFA Provider Order for COVID vaccines

- b. Lead Rental Registry

- c. Trudy Resnick Farber Building

- d. Medical Examiner

- New Medicolegal Investigator
- Stats

MEETING CONCLUSION

Ulster County Board of Health
September 12, 2023
5:00 p.m.
Golden Hill Office Building
239 Golden Hill Lane
Kingston, NY 12401

PRESENT: Stephanie Turco, Dr. Marta Sanchez, Kathleen Rogan, Dr. Gina Carena

EXCUSED: Naomi Stevens, Christy Keegan

ABSENT: Dr. Ashanda Saint Jean

UCDOH: Dr. Carol Smith- Commissioner of Health

GUEST: None

Call To Order: 5:02 PM

OLD Business: A motion was made to approve the August minutes by Dr. Carena, seconded by Ms. Rogan and unanimously approved.

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

- a. **COVID Wastewater Update:** The Wastewater report was distributed to the Board (See Attached). Dr. Smith explained to the Board that this study is experimental to determine the usefulness of testing wastewater for levels of COVID within a community/township. Currently, with the fluctuating results, it's difficult to make any substantial conclusions other than COVID is still active, although not nearly as active as in the past several years of the pandemic.
- b. **COVID Update:** DOH continues to monitor numbers of individuals with COVID in the hospitals. As of the latest report, Health Alliance reports 8 individuals and Ellenville Regional reports 1 individual.
- c. **COVID Vaccinations:** The COVID vaccine is being commercialized. It will no longer be offered free to every individual. Local health departments will no longer offer it at a POD event (Point of Dispensing). Medicaid, Medicare, and Private insurance will now pay for the vaccine to be administered. The vaccine will be offered free to the uninsured and underinsured population for the providers, such as the Department of Health, who are enrolled in the Vaccine for Children (VFC) and the Vaccine for Adults (VFA) programs. This transition will more than likely occur by the end of September. Ulster County

Department of Health's homebound COVID vaccinations are currently on hold until the vaccine for the latest variant is received.

- d. **Lead Rental Registry Law:** Dr. Smith gave an overview to the Board on the new Lead Rental Registry Law and what that will entail for Local Health Departments. Ulster County Department of Health is diligent with its compliance with Public Health Law, County Law, and the Ulster County Sanitary Code. However, the Department struggles with enforcement, as retaining a Hearing Officer has been a challenge. (See Attached)

- e. **Trudy Resnick Farber Building:** The County Executive is working on an initiative to bring more services to Ellenville, specifically to the Trudy Resnick Farber Building. On May 24, 2023, a community conversation event was held to gather community members requests for services. As a result, an analysis was completed. The Department of Health has been asked to evaluate the service needs of the Ellenville region and begin determining which services DOH can provide at the Trudy Resnick Farber site. The Department is beginning the process by first determine what types of services are currently offered to the community to avoid duplicative efforts.

- f. **Medical Examiner Update:** The Medical Examiner report was distributed to the Board (See Attached). Dr. Smith announced that the ME Office has hired a new Medicolegal Investigator to assist the Team with death scene investigations. Anthony Gariolo is a graduate of Syracuse University's Forensic Science and Medicolegal Death Investigation program. He comes to the Department with experience working in Tompkins County Medical Examiner's Office as a Death Investigator and Onondaga County Medical Examiner's Office as an Autopsy Technician.

Adjournment: A motion to adjourn was made by Ms. Rogan, seconded by Dr. Carena, and unanimously approved.

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

Respectfully submitted by:



Kathleen Rogan, Secretary

Ulster County Wastewater Surveillance Update

DATE: August 29, 2023

TO: Ulster County Health Department, Wastewater Facilities, & Stakeholders

FROM: Shailla Raymond, MPH

RE: Ulster County Weekly Wastewater Surveillance Data Report

Dashboard | Website

This report contains information **Ulster County** treatment plants over the time period of **2023-08-09 to 2023-08-23**.

All Samples from Ulster County				
From to				
Collection Date	Detection Level	Compared to NYS	Quality Control	Two-Week Trend
Village of Saugerties				
August 23, 2023	Detected, <LOQ	lower	good	decreasing
August 16, 2023	Quantifiable	higher	alert ¹	decreasing
August 9, 2023	Detected, <LOQ	lower	alert ¹	decreasing
New Paltz				
August 23, 2023	Detected, <LOQ	lower	good	decreasing
August 16, 2023	Quantifiable	higher	alert ¹	decreasing
August 9, 2023	Detected, <LOQ	lower	alert ¹	decreasing
Kingston				
August 23, 2023	Quantifiable	higher	good	increasing
August 22, 2023	Quantifiable	higher	alert ¹	increasing
August 16, 2023	Detected, <LOQ	higher	alert ¹	increasing
August 15, 2023	Detected, <LOQ	comparable	alert ¹	increasing
August 9, 2023	Detected, <LOQ	lower	good	increasing

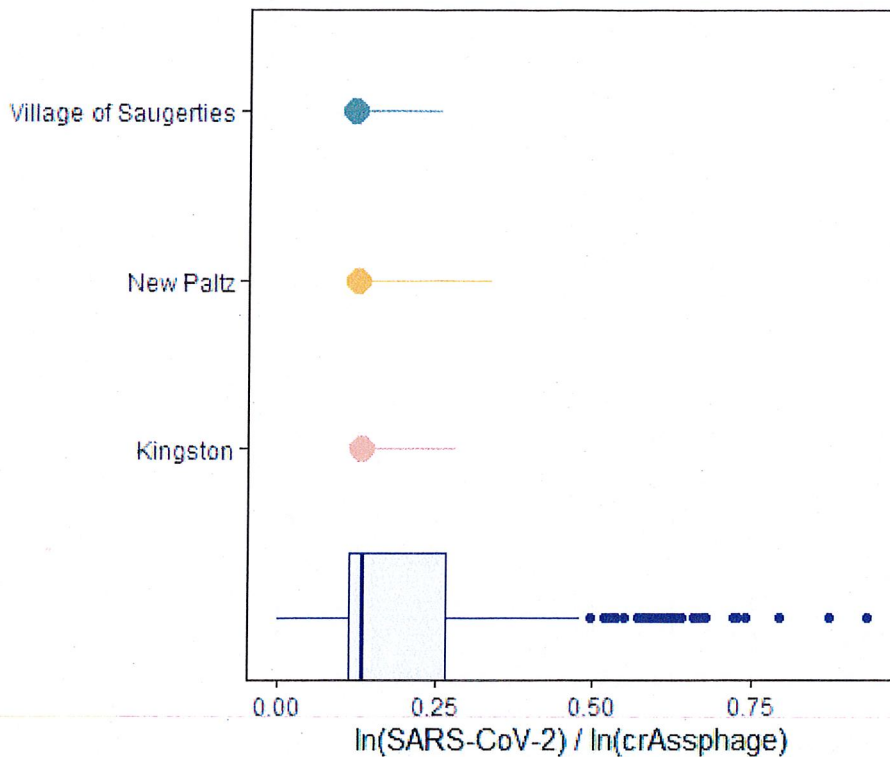
¹ Our quality control variable (oAspChlor) came back with a lower than average value (i.e. 10,000), which suggests that we should be cautious when interpreting this sample.

Above is a table describing the samples collected from the last two weeks. The table includes:

- Catchment location and sample collection date
- Comparison of SARS-CoV-2 from a facility to all NYS wastewater
- Level of SARS-CoV-2 detection: “Quantifiable” and “Detection <LOQ” levels suggest community-level transmission

- Quality control indicator: Samples that are “good” have a crAssphage level > 10,000. Samples that are “alert” have <10,000, suggesting low sample recovery and confidence

Box Plot for Treatment Plants in Ulster County from 2023-08-09 to 2023-08-23

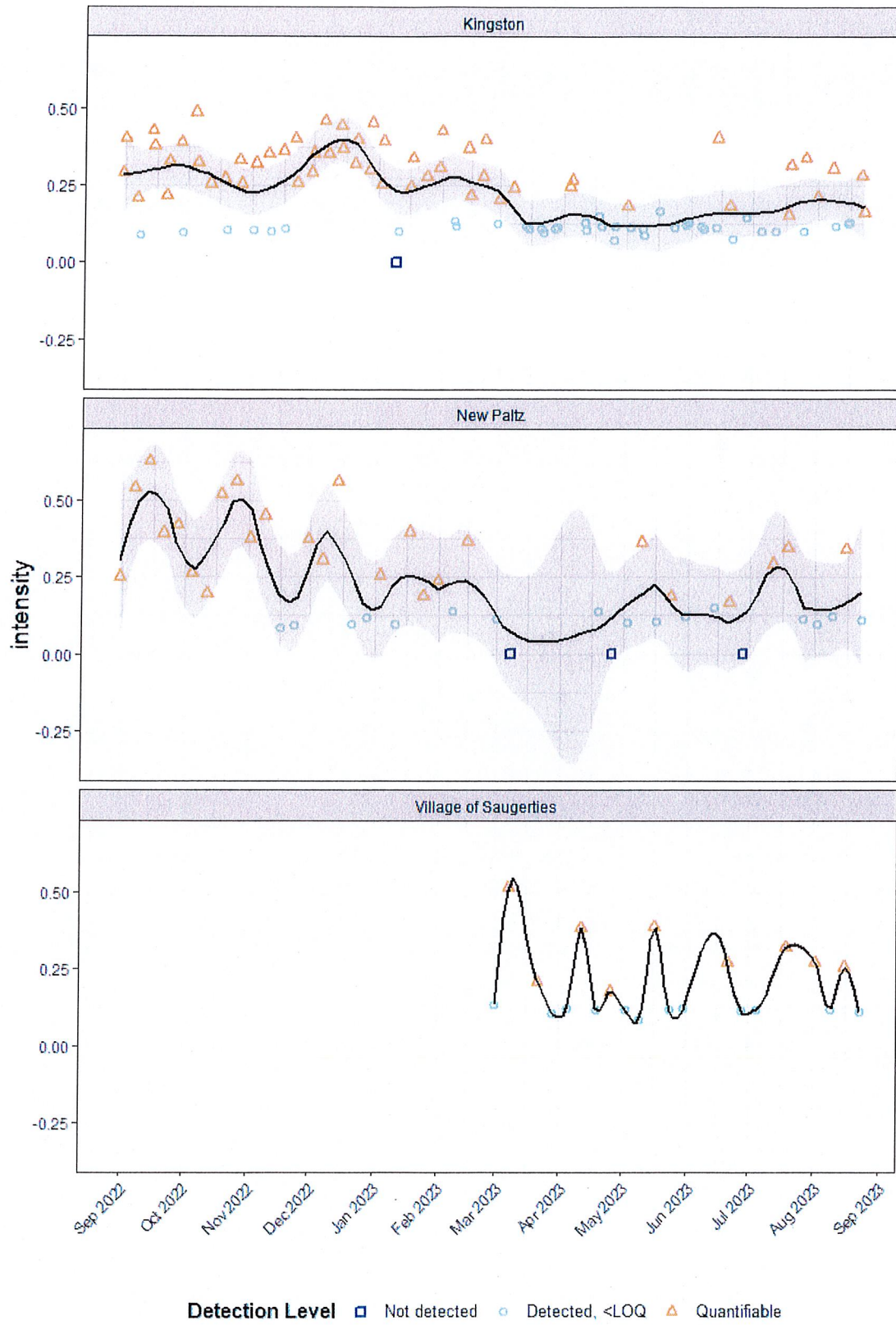


Points represent the SARS-CoV-2 intensity of samples taken at the influent over the last two weeks. The box plot represents all SARS-CoV-2 values from the previous two weeks as observed from wastewater treatment facilities across New York. The box plot shows the median (solid line), first and third quartiles (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, $\ln(\text{SARS-CoV-2})/\ln(\text{crAssphage})$, to give overall intensity.

The most recent sample from Kingston on August 23, 2023 is higher when compared to New York State values.

The most recent sample from New Paltz on August 23, 2023 is lower when compared to New York State values.

The most recent sample from Village of Saugerties on August 23, 2023 is lower when compared to New York State values.



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

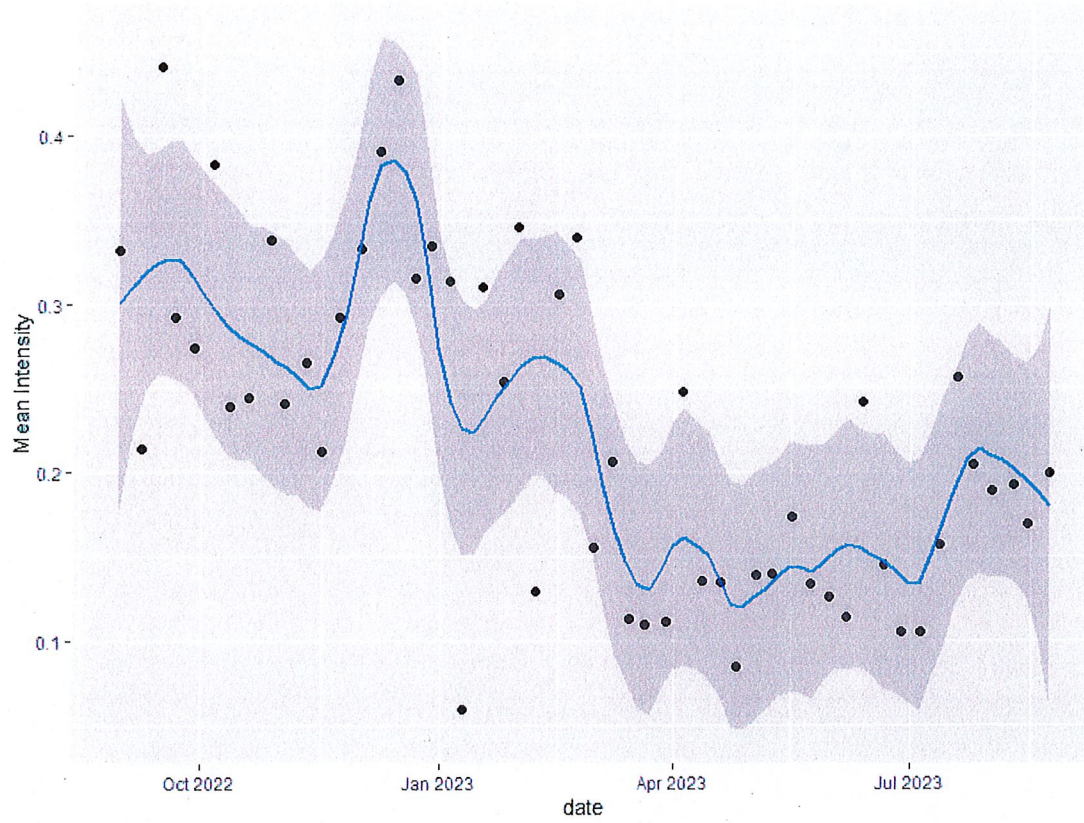
The level of SARS-CoV-2 RNA can tell us roughly how many cases can be expected in a population.

- Not detected: <10 cases per 100,000
- Detected, <LOQ: 10-50 cases per 100,000
- Quantifiable detection: >50 cases per 100,000

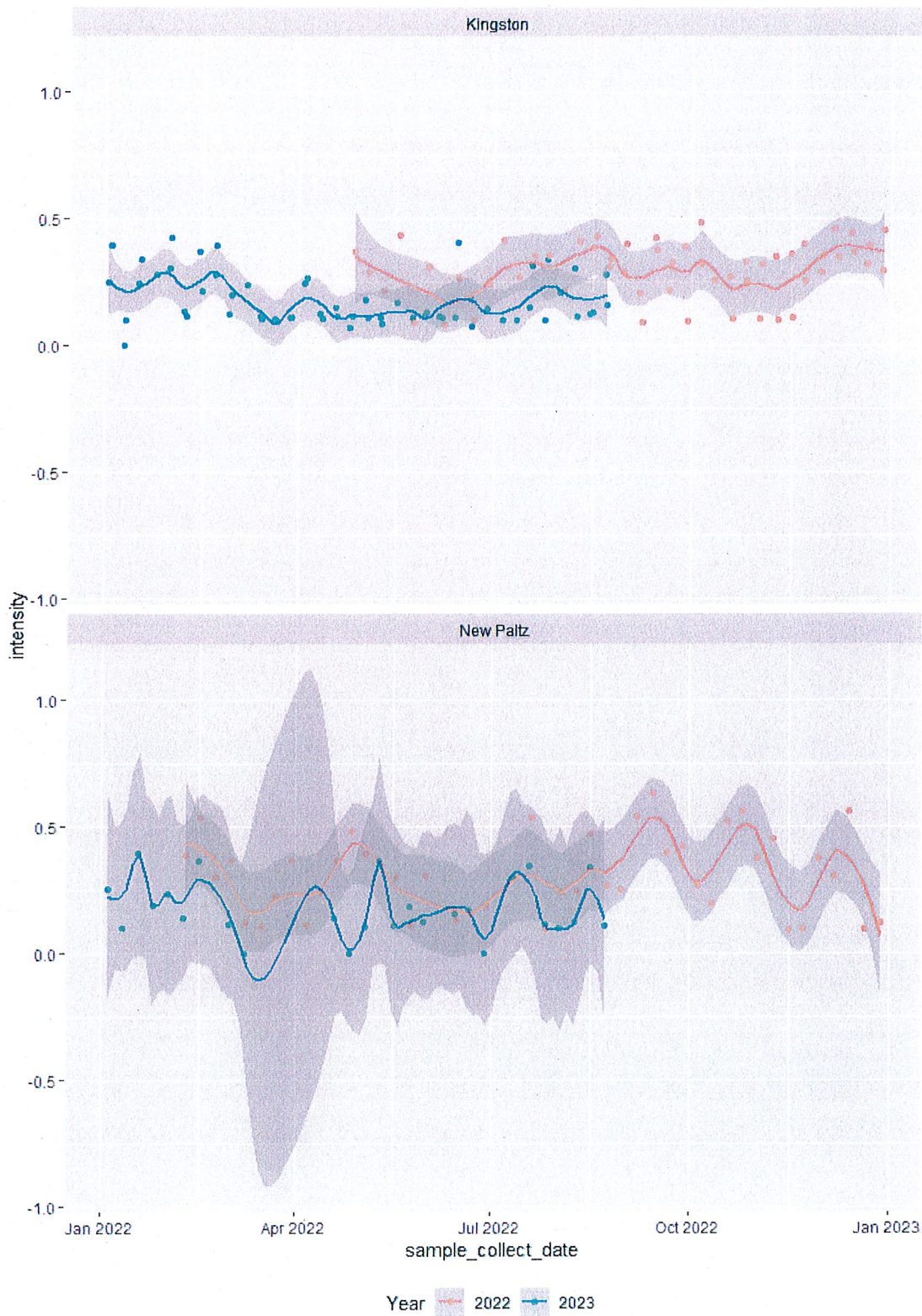
The most recent sample from Kingston on August 23, 2023, had a detection level of “Quantifiable” suggesting daily case incidence of more than 50 cases per 100,000 people.

The most recent sample from New Paltz on August 23, 2023, had a detection level of “Detected, <LOQ” suggesting daily case incidence of 10 to 50 cases per 100,000 people.

The most recent sample from Village of Saugerties on August 23, 2023, had a detection level of “Detected, <LOQ” suggesting daily case incidence of 10 to 50 cases per 100,000 people.

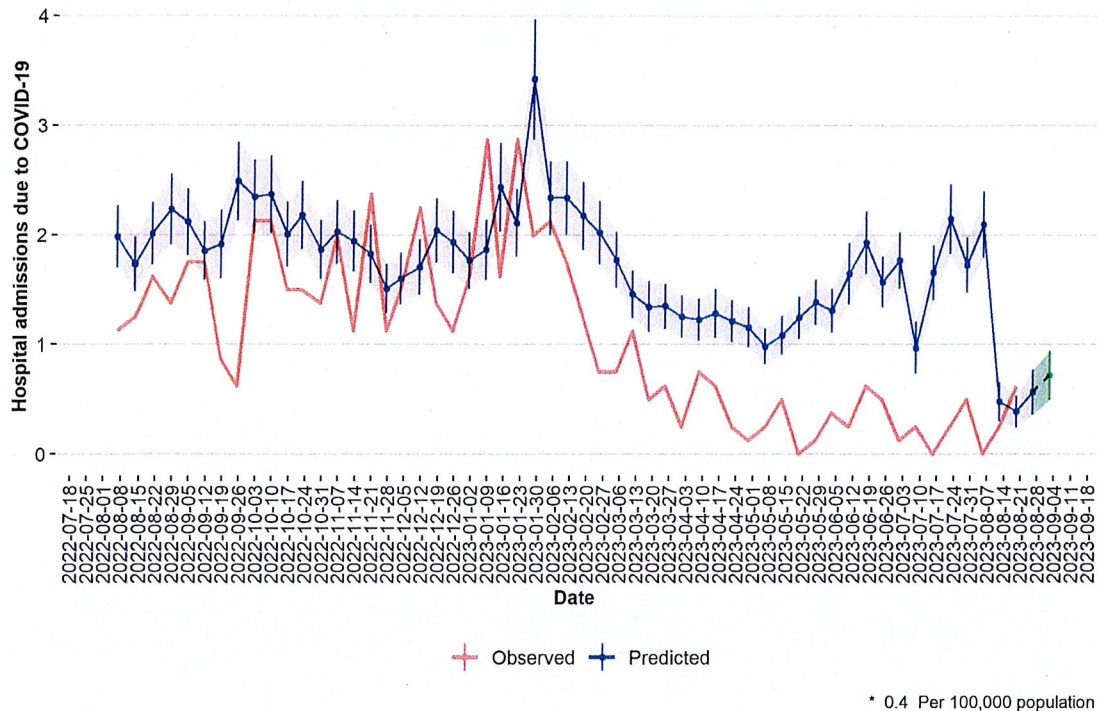


Average intensity (population weighted) for all Ulster WWTP's over the last 12 months.



This figure shows an annual comparison of SARS-CoV-2 intensity. Smoothed trend lines, uncertainty (gray bands), and wastewater samples (dots) are shown. The recent trend is lower than year over year values.

Ulster County COVID-19 in-patient hospitalization trend
 Predicted 7-day average in-patient hospitalizations in the next 10 days: **0.72***
26.32 percent increase from previous week's prediction



This figure shows predicted new in-patient hospital admissions due to COVID-19 for your county. Predictions are calculated from a generalized linear mixed model that fits wastewater data with a ten-day lag, log transformed active case numbers, along with several covariates including population over 50 years old, estimated asthma and cardiovascular disease rate for the county, and county social vulnerability from the CDC social vulnerability index.

UPDATE AUGUST 4, 2023: With the end of the emergency declaration on May 11, 2023, several hospitals changed how they report case data including no longer reporting negative PCR test results. This resulted in an artificial increase in test positivity in those counties and negatively impacted our forecasting. Due to this change, we have removed test positivity and replaced it with the 7-day average of active cases. While not as reliable as test positivity was, this change has helped move the predictions closer to what we are observing.

The new model also includes a regional average for SARS-CoV-2 intensity detection for the past 90 days indicative of the overall state of transmission for a region. This model makes predictions with new data for future hospital admissions and provides uncertainty around the prediction in the form of the 95% confidence interval (the light grey and green band around the predictions). Past predictions are in blue with the current prediction in light green. The red line is actual hospital admissions from the Department of Health HERDS or Health Electronic Response System data. These data are up-to-date for most counties. We will update these data and the models as new data are provided. Estimated new COVID-19 hospitalizations are predictions only and come with several uncertainties including whether new variants have arisen, what the current immunization state of the county is (including booster and bivalent shots or immunity from previous infection), and other factors not captured in the model such as intervention behaviors such as masking. Week to week predictions will vary in their accuracy and the width of the confidence interval around the

prediction due to changes in the data. Week to week predictions will vary in their accuracy and the width of the confidence interval around the prediction due to changes in the data.

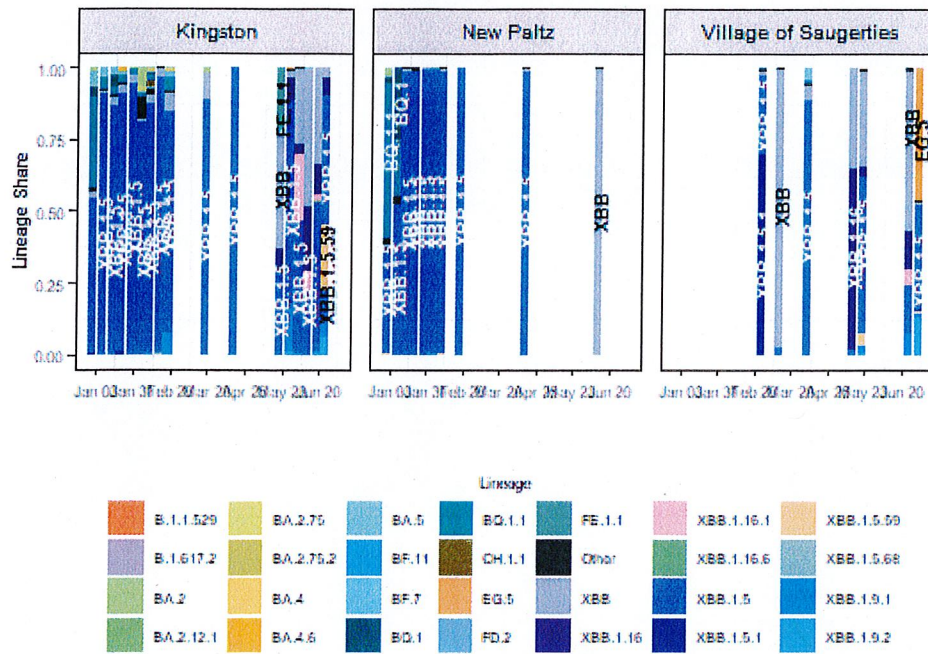
SARS-CoV-2 Genetic Sequencing Data In Ulster County and New York State			
Variant	Label	Presence within last four weeks ¹	Presence within last six weeks ²
CURRENT STATUS			
BA.2	Omicron subvariant under monitoring	detected at state-level	detected at state-level
BA.2.12.1	Omicron subvariant under monitoring	detected at state-level	not detected in state or county
BA.2.75	Variant under monitoring	not detected in state or county	not detected in state or county
BA.5	Omicron subvariant under monitoring	detected at state-level	detected at state-level
BQ.1	Omicron subvariant under monitoring	not detected in state or county	not detected in state or county
BQ.1.1	Omicron subvariant under monitoring	detected at state-level	detected at state-level
CH.1.1	Variant under monitoring; Omicron subvariant under monitoring	detected at state-level	not detected in state or county
EG.5	Variant of interest; Omicron subvariant under monitoring	detected at state-level	detected at state-level
EU.1.1	Omicron subvariant under monitoring	detected at state-level	not detected in state or county
FD.2	Omicron subvariant under monitoring	detected at state-level	detected at state-level
FE.1	Omicron subvariant under monitoring	detected at state-level	detected at state-level
FL.1.5.1	Omicron subvariant under monitoring	detected at state-level	detected at state-level
XBB	Variant under monitoring; Omicron subvariant under monitoring	detected at state-level	detected at state-level
XBB.1.16	Variant of interest; Omicron subvariant under monitoring	detected at state-level	detected at state-level
XBB.1.16.1	Omicron subvariant under monitoring	detected at state-level	detected at state-level
XBB.1.16.6	Omicron subvariant under monitoring	detected at state-level	detected at state-level
XBB.1.5	Variant of interest; Omicron subvariant under monitoring	detected at state-level	detected at state-level
XBB.1.5.10	Omicron subvariant under monitoring	detected at state-level	detected at state-level
XBB.1.5.59	Omicron subvariant under monitoring	detected at state-level	detected in county
XBB.1.5.68	Omicron subvariant under monitoring	not detected in state or county	detected at state-level
XBB.1.5.72	Omicron subvariant under monitoring	detected at state-level	detected at state-level
XBB.1.9.1	Variant under monitoring; Omicron subvariant under monitoring	detected at state-level	detected at state-level
XBB.1.9.2	Variant under monitoring; Omicron subvariant under monitoring	detected at state-level	detected in county
XBB.2.3	Variant under monitoring; Omicron subvariant under monitoring	detected at state-level	detected at state-level

¹ Samples collected from Jul 16, 2023 to Aug 17, 2023
² Samples collected from Jul 02, 2023 to Aug 17, 2023
 Variant classification data sourced from CDC Nowcast and the WHO.

County level variants under monitoring table in the last four and six weeks This table shows variants being monitored by various public health organizations. Variant name, source of information, monitoring status of variant, and presence within the county and state within the last four and six weeks are shown. Each variant is shown at four and six week intervals shown in the footnotes. Not detected within state or county: variant not detected at the state or county-level Detected at state-level: detected somewhere else in the state, but not in the county listed Detected within county: detected within the county showed

Find out more about monitoring status of SARS-CoV-2 variants: [ECDC](#), [WHO](#)

SARS-CoV-2 Genetic Sequencing in 2023 Sewersheds in Ulster County

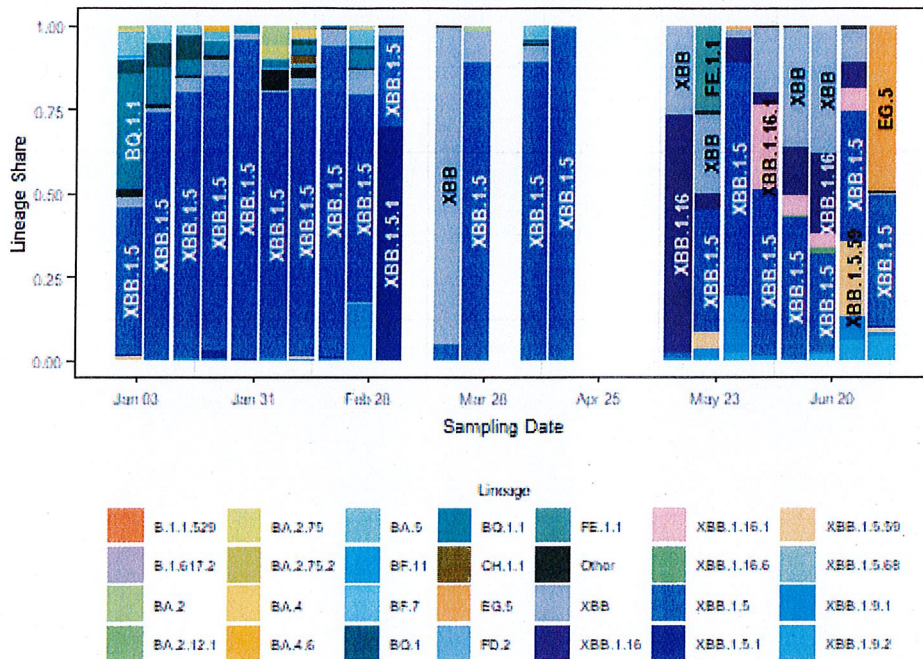


Sewershed level of SARS-CoV-2 genetic sequencing throughout time

Each bar shows the relative abundance of SARS-CoV-2 lineages during a sample collection date. Lineages with an abundance of at least 20% are labeled on the bar sections with the lineage name. The color of the bar corresponds to lineage. See the legend for more information regarding lineages.

SARS-CoV-2 Genetic Sequencing in 2023

Ulster County Aggregation



County aggregation of SARS-CoV-2 genetic sequencing throughout time

Each bar shows the relative abundance of SARS-CoV-2 lineages per sample collection date. Lineages with an abundance of at least 20% are labeled on the bar sections with the lineage name. The color of the bar corresponds to lineage. See the legend for more information regarding lineages.

From: [Carol Smith](#)
To: [Health Department Distribution Group](#); [Johanna Contreras](#); [Michael Iapoce](#); [Susan Koppenhaver](#); [Ashanda Saint Jean](#); [Garryandnaomi](#); ginafcarena@gmail.com; [Kathleen Rogan](#); [Katrina Rocap](#); [Marta Sánchez](#); STurco@gatewayindustries.org; woodley@institute.org
Subject: FW: COVID-19 Vaccine Commercialization Transition Update
Date: Tuesday, September 12, 2023 10:01:58 AM
Attachments: [Vaccine Program Office Hours COVID-19 Vaccine Commercialization Transition.pdf](#)
[image001.png](#)
[image002.png](#)

FYI

Carol M. Smith, M.D., M.P.H., M.S.
Commissioner of Health
Ulster County Department of Health
239 Golden Hill Lane
Kingston, New York 12401
845-340-3009
csmi@co.ulster.ny.us



From: COVID Vaccine ROS <COVIDVACCINEROS-L@LISTSERV.HEALTH.STATE.NY.US> **On Behalf Of** health.sm.Covid19Vaccine
Sent: Tuesday, September 12, 2023 9:37 AM
To: COVIDVACCINEROS-L@LISTSERV.HEALTH.STATE.NY.US
Subject: COVID-19 Vaccine Commercialization Transition Update

[EXTERNAL SENDER]

Dear COVID-19 Vaccination Provider:

The US Government COVID-19 Vaccine response program is transitioning to the traditional public-private vaccine market. On September 6, 2023, the NYSDOH Vaccine Program Office Hours discussed the COVID-19 Vaccine Commercialization Transition. The slides for that presentation are attached and the recording of the meeting can be found [here](#). The audio begins at one minute into the recording.

Yesterday, the [U.S. Food and Drug Administration took action approving and authorizing](#) for emergency use updated COVID-19 vaccines formulated to more closely target currently circulating variants and to provide better protection against serious consequences of COVID-19, including hospitalization and death. The CDC's Advisory Committee on Immunization Practices (ACIP) is expected to review and vote on the recommendations for the updated

2023-2024 COVID-19 vaccines today, September 12, 2023. Agenda and webcast link for that meeting can be found here: <https://www.cdc.gov/vaccines/acip/index.html>.

After commercialization, providers will need to purchase COVID-19 vaccines from the commercial market for most patients, as they do for other vaccines. For uninsured and underinsured patients, after commercialization, providers can obtain no-cost COVID-19 vaccines through two programs:

- Vaccines for Children (VFC)
- Vaccines for Adults (VFA), also known as the Bridge Access Program for COVID-19 Vaccines

Providers currently enrolled in New York State's VFC and VFA programs were informed today they could begin placing initial orders of updated COVID-19 vaccines for their eligible populations based upon supply at CDC's vaccine depot.

Fortunately, although providers will need to purchase COVID-19 vaccines for most patients, patients will not need to pay out-of-pocket to get vaccinated. Please ensure your staff can answer patient questions about vaccine costs. Here is information by insurance type:

- **Medicare:** Provider supplies vaccines. [Medicare](#) reimburses for the cost of the vaccine and for administration. No patient cost sharing/co-insurance.
- **Medicaid/Medicaid Managed Care/Child Health Plus (CHP):**
 - *For children ages 18 years and under*, the VFC program provides vaccines to enrolled providers at no cost. Medicaid/plan reimburses administration fee.
 - *For adults*, provider supplies vaccines. Plan reimburses for the cost of the vaccine and for administration. No patient cost sharing/co-pay.
- **Commercial/Private:** Provider supplies vaccines. Plan reimburses for the cost of the vaccine and for administration. COVID-19 vaccine has been added to the Affordable Care Act preventive services list based on ACIP recommendation, so there is no patient cost sharing/co-pay/co-insurance for in-network vaccination services for most commercial insurance plans.
- **Uninsured/Underinsured:**
 - For children ages 18 years and under, the VFC program provides vaccines to enrolled providers at no cost.
 - For adults ages 19 and older, the federal [Bridge Access Program](#) will provide vaccines at no cost for New York State's participating VFA providers and certain chain pharmacies. Providers receiving these vaccines will provide no-cost vaccination services to uninsured and underinsured adults. The public will be able to find a Bridge Access provider or pharmacy by using www.vaccines.gov.

Additional details on the steps providers should take as the COVID-19 Vaccination Program

comes to an end will be provided when direction is received from CDC.

Thank you for your commitment to vaccinating New Yorkers through the COVID-19 Vaccination Program.

If you have any questions, please email Covid19Vaccine@health.ny.gov.

NYSDOH COVID-19 Vaccine Team

To unsubscribe from COVIDVACCINEROS-L, send email to:
COVIDVACCINEROS-L-signoff-request@listserv.health.state.ny.us

Ulster County Department of Health

Medical Examiner's Office - Autopsy Cases

Date of Death between 1/1/2023 and 9/10/2023

Total Number of Cases: 148

<i>Cases by Gender</i>	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Grand Total
F	4	5	6	3	5	9	3	3	0	0	0	0	38
M	12	13	17	13	15	8	17	13	2	0	0	0	110
Grand Total	16	18	23	16	20	17	20	16	2	0	0	0	148

<i>Cases by Manner</i>	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Grand Total
Accidental	6	7	12	5	7	8	5	1	0	0	0	0	51
Homicide	1	2	0	0	1	0	1	0	0	0	0	0	5
Natural	6	7	6	6	9	8	5	8	0	0	0	0	55
Pending	1	0	0	1	0	1	6	6	2	0	0	0	17
Suicide	2	2	5	4	2	0	3	1	0	0	0	0	19
Undetermined	0	0	0	0	1	0	0	0	0	0	0	0	1
Grand Total	16	18	23	16	20	17	20	16	2	0	0	0	148

<i>Cases by Category</i>	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Grand Total
Alcohol	0	1	0	1	1	0	0	1	0	0	0	0	4
Blunt Force Trauma - non-MVA	0	2	1	0	3	0	1	0	0	0	0	0	7
Carbon Monoxide	0	0	1	0	0	0	0	0	0	0	0	0	1
Cardiovascular	4	4	1	3	5	5	2	3	0	0	0	0	27
Cardiovascular and Diabetes	0	0	2	1	1	1	2	1	0	0	0	0	8
Cardiovascular and Obesity	1	0	1	0	2	1	0	0	0	0	0	0	5
Diabetes	1	0	0	0	0	0	0	0	0	0	0	0	1
Gunshot Wound	2	2	1	2	1	0	4	1	0	0	0	0	13
Hanging	0	1	3	1	0	0	0	0	0	0	0	0	5
Infant	0	1	0	0	0	0	0	0	0	0	0	0	1
Motor Vehicle Accident	1	0	1	0	0	3	1	1	0	0	0	0	7
Non-Opioid Substance	0	1	0	1	0	0	0	0	0	0	0	0	2
Non-Opioid Substance w/ Alcohol	0	0	0	1	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-Related	3	2	7	4	6	4	3	0	0	0	0	0	29
Other	1	4	5	1	0	2	1	2	0	0	0	0	16
Pending	0	0	0	1	0	1	3	2	1	0	0	0	8
Pending - Suspected Opioid	1	0	0	0	0	0	3	4	1	0	0	0	9
Smoke Inhalation	1	0	0	0	0	0	0	0	0	0	0	0	1
Undetermined	0	0	0	0	1	0	0	1	0	0	0	0	2
Grand Total	16	18	23	16	20	17	20	16	2	0	0	0	148