



Frederick County Board of Health

October 30, 2024

- I. **Call to Order (6pm)** – Dr. Barbara Brookmyer, Health Officer for Frederick County
- II. **Public Comments (6:00p.m. – 6:15 p.m. p.m.) - Members of the public will be given three (3) minutes to provide comments** - available to attendees in the room.
- III. **Approval of Minutes: 5/16/2024 & 8/29/2024**
- IV. **Fall Respiratory Update**
- V. **Overview of School Health Services**
- VI. **Update on the current Community Health Needs Assessment**
- VII. **Update on Maryland Commission on Public Health**
- VIII. **Old Business**
 - a. Orientation for liaisons - completed
- IX. **New Business** - none
- X. **Upcoming Meetings:** May, 2025
- XI. **Adjourn**



Public Comment



Public Comment



The Frederick County Board of Health welcomes and encourages public comment.



Public comment is open to members of the public who are present in the room. Individual providing public comment have up to 3 minutes and will be asked to complete comments when the buzzer sounds. A total of 15 minutes is allocated for public comment on today's agenda.



Public comment is not intended to be a question-and-answer platform with the Board members. Generally, Board members will not respond to comments made.



Members of the public wishing to share additional comments with the committee may do so by emailing boardofhealth@frederickcountymd.gov.



Approval of Minutes



Fall Respiratory Illness Update

by

Elaine Kline



Public Health
Prevent. Promote. Protect.

Frederick County Health Department

Fall Respiratory Virus Season

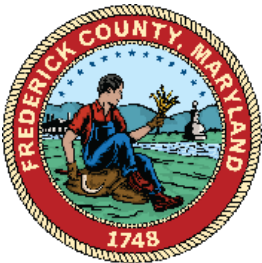
October 30, 2024

Communicable Disease Program

Elaine Kline

Vaccine Preventable/Immunization Team

Frederick County Health Department





Our Mission, Vision, and Values

Mission

The mission of the Frederick County Health Department is to improve the health and well-being of the residents of Frederick County through programs to prevent disease and illness, promote wellness and safety and protect public health.

Vision

Frederick County leads as a community of health and wellness.

Values

Excellence - We strive to maintain the high quality of work as we continue to meet the standards set by our accredited status.

Integrity - We maintain consistency in what we say and what we do. We uphold ethical standards and maintain accountability to each other and the communities we serve.

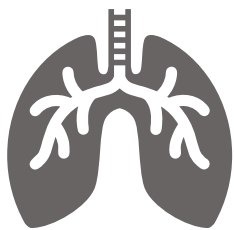
Making a Difference - We believe the department's actions should assist our communities in addressing underlying factors that affect good health.

People - We value our employees as professional colleagues. We treat our customers, clients, partners, and those we serve with respect by listening, understanding, and responding to needs.

Quality - We actively work to maintain and improve our culture of quality, seeking opportunities to improve our daily work and looking for creative solutions to the challenges that face us.



Respiratory Virus Overview



Each year, respiratory viruses are responsible for millions of illnesses and thousands of hospitalizations and deaths in the United States.



In addition to the virus that causes COVID-19, there are many other types of respiratory viruses, including flu and respiratory syncytial virus (RSV).



The good news is there are actions you can take to help protect yourself and others from health risks caused by respiratory viruses.

Season Outlook



The CDC anticipates the upcoming fall and winter respiratory disease season will likely have a similar or lower number of combined peak hospitalizations due to COVID-19, influenza, and RSV compared to last season.



The outlook will be updated every two months throughout the season and as warranted by changes in the trajectories of any of the three diseases.

[CDC 2024-2025 Respiratory Disease Season Outlook](#)



Current Respiratory Stats

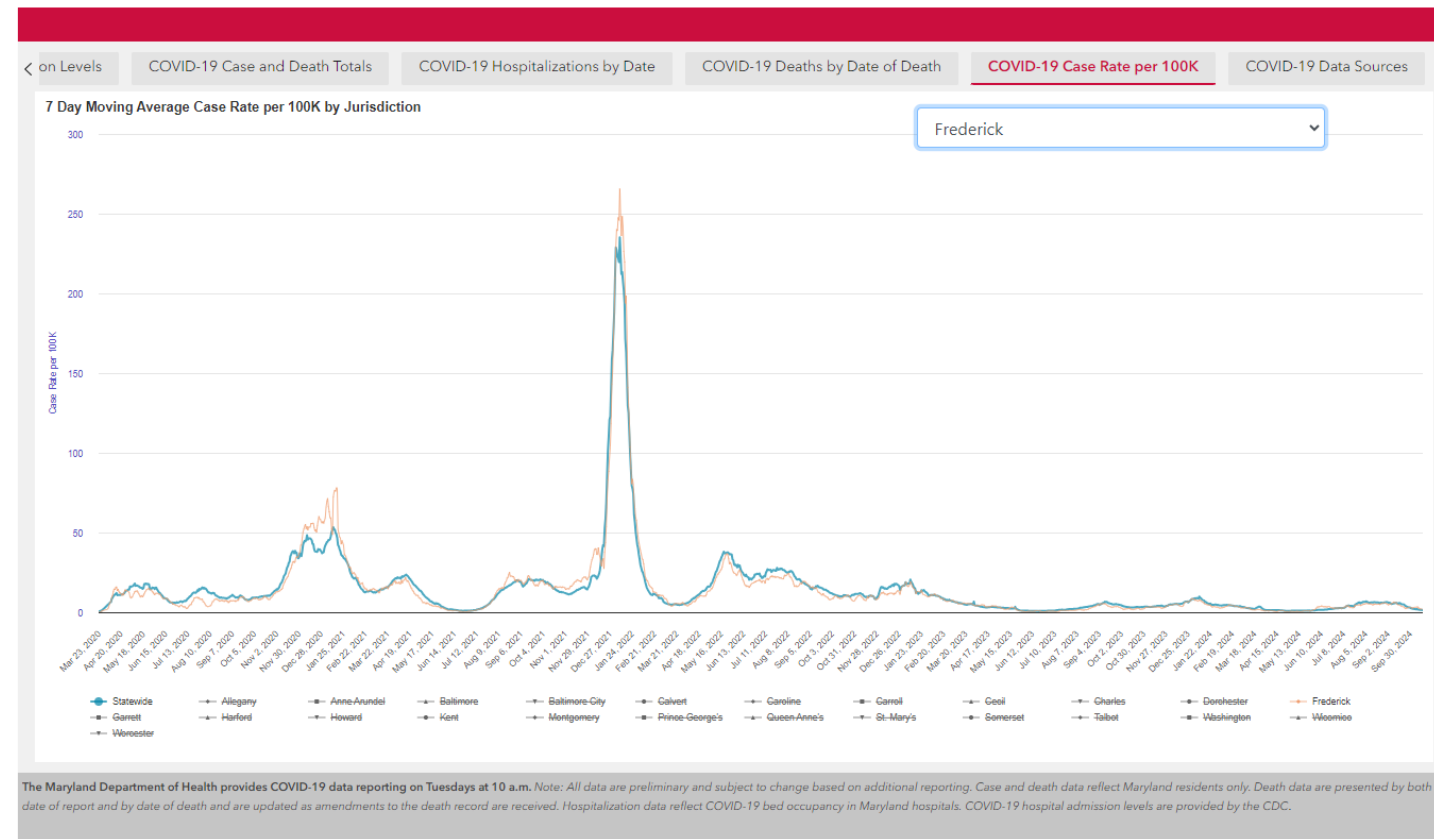
- Per CDC as of October 11, 2024:
 - The amount of acute respiratory illness causing people to seek healthcare is low nationally
 - COVID-19 activity is declining in most areas
 - Seasonal influenza is low nationally
 - Signs of increased RSV activity have been detected in the southeastern United States
 - In Maryland, overall respiratory illness activity is **low**





- COVID-19 Case rate per 100,000
As of 10/15/24, Maryland case rate 1.33 and Frederick 1.93

Maryland COVID-19 Data



Influenza and RSV Surveillance

RSV:

- In Maryland for 2024-25 MMWR Week 40
- 6 new cases: 2 pediatric and 4 adults

MDH FluWatch

Maryland Influenza Surveillance 2024-2025 Season

Updated 10/11/2024

<	Season Summary	Sentinel Provider ILI	ESSENCE ILI	MRITS ILI	Clinical Laboratories	MDH Laboratory	Inf Ho	>
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Respiratory Illness Activity

(Week ending on 10/5/2024)

MINIMAL

Activity Indicators

(Week ending on 10/5/2024)

Sentinel Providers

1.84%
% Visits due to ILI

2.40%
MD Season Baseline

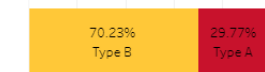
ED Visits

2.15%
% Visits due to ILI

Clinical Testing

8,792
Specimens Tested

1.49%
% Positive



0% 20% 40% 60% 80% 100%

MDH Laboratory

29
Test Performed

6
Positive

Outbreaks

2
Reported (Excl. COVID-19)

Severity Indicators

(Since 9/29/2024)

5
Season Total Hospitalization

0
Total Adult Mortality

0
Total Pediatric Mortality

Footnotes

Interested in getting the flu vaccine? Go to <https://ohpa.health.maryland.gov/influenza/Pages/getvaccinated.aspx> and click on your county/city of residence. You will be redirected to your local health department website for local information on where to get your flu vaccine.

The data presented in this document are provisional and subject to change as additional reports are received. Percentages may not total 100 due to rounding.

Questions? Please contact us at mdh.flu@maryland.gov

**Please note that starting in 2022-23 season, flu data will continue to be updated through the offseason.



Viruses & Vaccines

Seasonal Influenza (Flu)

- CDC recommends everyone 6 months and older receive an updated 2024-2025 flu vaccine
- 2024-2025 flu vaccine is trivalent (protects against 3 strains of the flu virus)
- Most individuals should receive one dose per flu season
 - Exception: Depending on previous flu vaccine history, some children under age 9 will need two doses
- A high-dose flu vaccine is recommended for people 65 and older. However, if high-dose formulation is unavailable, those 65 and older may receive the standard dose of flu vaccine
- Flu vaccine is available at pharmacies, clinics, and primary care providers
- Children who qualify for the Vaccines for Children program can receive the vaccine at FCHD at no cost (appointment required). Two influenza clinics for all Frederick County children took place earlier this month on days FCPS was closed to students.
- The FDA recently approved a nasal [influenza spray that does not need to be administered by a health care provider](#) to prevent influenza disease caused by influenza virus subtypes A and B in individuals 2 through 49 years of age without contraindications. Per CDC, the option for self or caregiver administration is not expected to be available until next flu season (2025-2026)

COVID-19 Vaccine

- CDC recommends everyone 6 months and older receive an updated 2024-2025 COVID-19 vaccine
 - Number of doses depends on age, brand, and vaccine history
 - **NEW** - CDC has recommended people 65 years and older and those moderately or severely immunocompromised to receive a second dose of 2024-2025 COVID-19 vaccine six months after their first dose
- Two mRNA vaccines (Pfizer and Moderna) are available for ages 6 months and older
- Protein subunit vaccine (Novavax) is available for ages 12 years and older
- Must wait at least 8 weeks between receiving the 2023-2024 vaccine and 2024-2025 vaccine
- COVID-19 vaccine is available at pharmacies, clinics, and primary care providers
- Children eligible for VFC can receive the vaccine at no cost at FCHD (appointment required)
- Limited availability of vaccine at FCHD for uninsured and underinsured adults through the COVID-19 Vaccine Initiative at no cost to the patient (appointment required)
- There is no preferential recommendation for one brand or type of age-appropriate vaccine*



COVID-19 Test Kits

- Free test kits
 - Available at FCHD and all FCPLs
 - U.S. households can now order four COVID-19 test kits at no cost through <https://COVIDtests.gov> .
 - The available tests include one that is more accessible to people with disabilities and can be ordered at <https://ACL.gov/AccessibleTests>.

Respiratory Syncytial Virus (RSV)

- RSV season in Maryland typically runs October-March
- There are two approved RSV vaccines, and one monoclonal antibody
- For adults: recommended for all adults age 70+ and for adults ages 60+ with increased risk of severe RSV disease: 1 dose of RSV vaccine is recommended
 - Age recommendations vary by brand
- For pregnant people 32-36 weeks of pregnancy, one dose of maternal RSV vaccine is recommended
- A monoclonal antibody injection is recommended for infants younger than 8 months who are born during or entering their first RSV season, for whom the mother did not receive RSV vaccines during pregnancy .
 - Some children at higher risk of severe disease who are 8-19 months old, a dose is recommended at the start of their second RSV season
 - Available through primary care providers, and for VFC-eligible children at FCHD



Helpful Tips

Respiratory Virus Guidance

Prevention is Key

Immunizations for
Respiratory
Viruses

Hygiene: hand
washing, cover
your cough

Preventing Spread
of Respiratory
Viruses: stay home
when you're sick

Masking

Physical Distancing

Respiratory Virus Guidance (Cont'd)

Effective vaccines against all three major viruses are now widely available:

COVID-19 vaccines cut the risk of severe disease in half. Over 95% of hospitalized adults were not up-to-date with their COVID-vaccine in fall 2023.

Flu vaccines also cut the risk of severe disease by nearly half.

For the first time, in fall 2023, we had an immunization against respiratory syncytial virus (RSV) for older adults, pregnant people, and young children.

Effective treatments are also widely available:

Paxlovid cuts the risk of hospitalization due to COVID-19 by over half and the risk of death by even more (75%).

Treatment of flu with antiviral medications can lessen symptoms and shorten the time you are sick by about a day. Starting antiviral treatment shortly after symptoms begin can also help reduce some flu complications.

Respiratory Virus Guidance Snapshot



Core Prevention Strategies

Immunizations



Hygiene



Steps for Cleaner Air



Treatment



Stay Home and Prevent Spread*



Additional Prevention Strategies

Masks



Distancing



Tests



***Stay home and away from others until,**



and



**Your symptoms are
getting better**

**You are fever-free
(without meds)**

for 24 hrs



**Then take added precaution
for the next 5 days**



Layering prevention strategies can be especially helpful when:

- ✓ Respiratory viruses are causing a lot of illness in your community
- ✓ You or those around you have risk factors for severe illness
- ✓ You or those around you were recently exposed, are sick, or are recovering



Lets Talk About Pertussis

Pertussis

- Pertussis, also known as whooping cough, is caused by a bacterium, *Bordetella pertussis*.
- Pertussis is spread through the air by infectious droplets and is highly contagious. Preliminary data show that more than 5 times as many cases have been reported as of week 40, reported on 5 Oct 2024, compared to the same time in 2023. This is all concerning considering how dangerous whooping cough is for young children and babies where it can result in pneumonia, seizures, brain damage, and death.
- Antibiotics are necessary in treating pertussis cases.

Pertussis (Cont'd)

- All children, beginning at age 2 months, adolescents, and adults need protection against these three diseases— diphtheria, tetanus, and pertussis (whooping cough). Routine booster doses are also needed throughout life.
- All adults should receive a single dose of Tdap as soon as feasible. Then, subsequent booster doses of Td or Tdap should be given every ten years. Pregnant people should receive Tdap during each pregnancy.
- People who had a serious allergic reaction to a previous dose of DTaP or Tdap vaccine should not receive another dose. CDC recommends off-label use of Td (tetanus-reduced diphtheria) vaccine (licensed for age 7 years and older).



Resources

The 3 respiratory viruses combined

- CDC: <https://www.cdc.gov/respiratory-viruses/guidance/index.html>
- Respiratory Disease Season Outlook: <https://www.cdc.gov/cfa-qualitative-assessments/php/data-research/season-outlook24-25/index.html>
- MDH: <https://health.maryland.gov/phpa/Pages/Respiratory-Virus-Surveillance.aspx>
- Vaccines During Pregnancy: <https://www.acog.org/womens-health/infographics/vaccines-during-pregnancy>

COVID

- Free test kits by mail: all FCPLs, FCHD sites, and mail by federal government <https://covidtests.gov/>
 - Test for persons with disabilities: <https://acl.gov/accessibletests>
- COVID-19 treatment guidelines: <https://www.acpjournals.org/doi/10.7326/ANNALS-24-00464>
- Flu/COVID-19 Vaccine combination trials: <https://investors.modernatx.com/news/news-details/2024/Moderna-Announces-Positive-Phase-3-Data-for-Combination-Vaccine-Against-Influenza-and-COVID-19/default.aspx>
- Novavax: <https://www.fda.gov/news-events/press-announcements/fda-authorizes-updated-novavax-covid-19-vaccine-better-protect-against-currently-circulating>

RSV

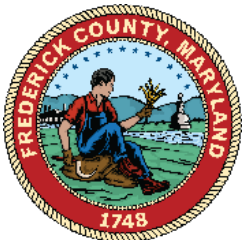
- Protecting baby: <https://www.acog.org/womens-health/infographics/protecting-your-baby-from-rsv>

Influenza

- New FDA approved nasal spray <https://www.fda.gov/news-events/press-announcements/fda-approves-nasal-spray-influenza-vaccine-self-or-caregiver-administration>
- Southern Hemisphere Vaccine Effectiveness: <http://dx.doi.org/10.15585/mmwr.mm7339a1>

THANK YOU

Communicable Disease Program
Vaccine Preventable/Immunization Program
Frederick County Health Department
301-600-1733
CD@Frederickcountymd.gov



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Highly Pathogenic Avian Influenza (H5N1)

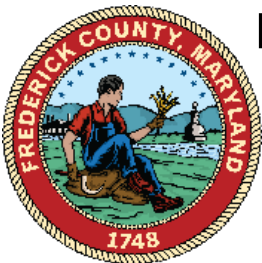
October 30, 2024

Dea Dorsey, RN, BSN, CPST, SBD, CHW-C

Program Manager of Communicable Disease Program

Disease Management Team

Frederick County Health Department



OUR MISSION, VISION, AND VALUES

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CONTENT

- History of H5N1
- Current events
- Clinical presentation in Humans
- CDC/MDH initiative
- Plan to protect Frederick County's Farmworkers

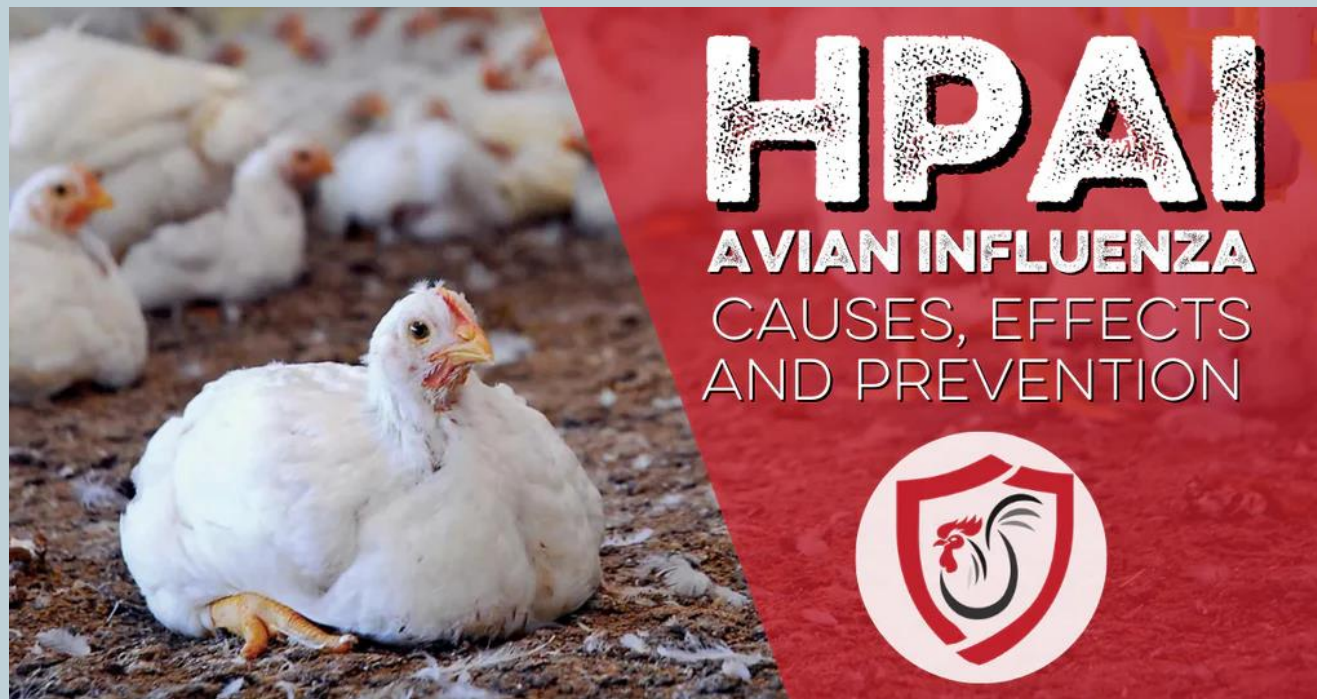
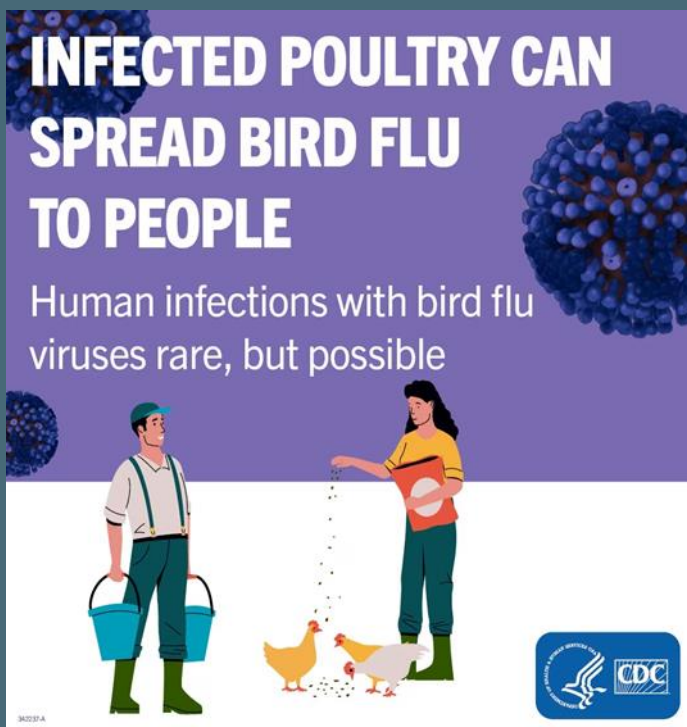


Image: Southland Organics (Dobbins, 2023)

A photograph of a rural farm scene. In the background, there is a large white barn with a blue metal roof. Two tall, cylindrical metal silos with conical tops stand next to the barn. The silos appear to be made of corrugated metal. In the foreground, a herd of black cattle is grazing in a lush green field. Some of the cattle have orange ear tags. The sky is a pale, hazy blue, suggesting early morning or late afternoon. The overall scene is peaceful and idyllic.

HISTORY

Image: Stock Photo



- Since the 90's, Highly Pathogenic avian influenza viruses have caused severe disease and high mortality in infected poultry
- Per CDC: “HPAI A(H5) and A(H7) virus infections in poultry also can spill back into wild birds, resulting in further geographic spread of the virus as those birds migrate” (CDC, 2024)
- Virus infections in mammals have been reported across the globe.

(Current H5N1 Bird Flu Situation in Dairy Cows, 2024)

BACKYARD FLOCK OWNERS: PROTECT YOURSELF FROM BIRD FLU



If you suspect any birds in your flock have avian influenza A virus infection or have any confirmed cases, take the following actions to protect yourself:

- Don't touch sick or dead birds, their feces or litter, or any source that might be contaminated with their feces, saliva or bodily fluids without wearing appropriate personal protective equipment (PPE).
- Wear PPE when around sick or dead birds
- Avoid stirring up dust, bird waste, and feathers to prevent virus dispersing into the air

WHAT ARE THE SIGNS OF AVIAN INFLUENZA IN BIRDS?

One or more of the following signs may be seen in infected birds:

- Low energy or appetite
- Sudden death with no prior signs
- Purple discoloration or swelling of various body parts
- Reduced egg production
- Nasal discharge, coughing or sneezing
- Diarrhea
- Lack of coordination

High Path *Avian Influenza* **UPDATE**

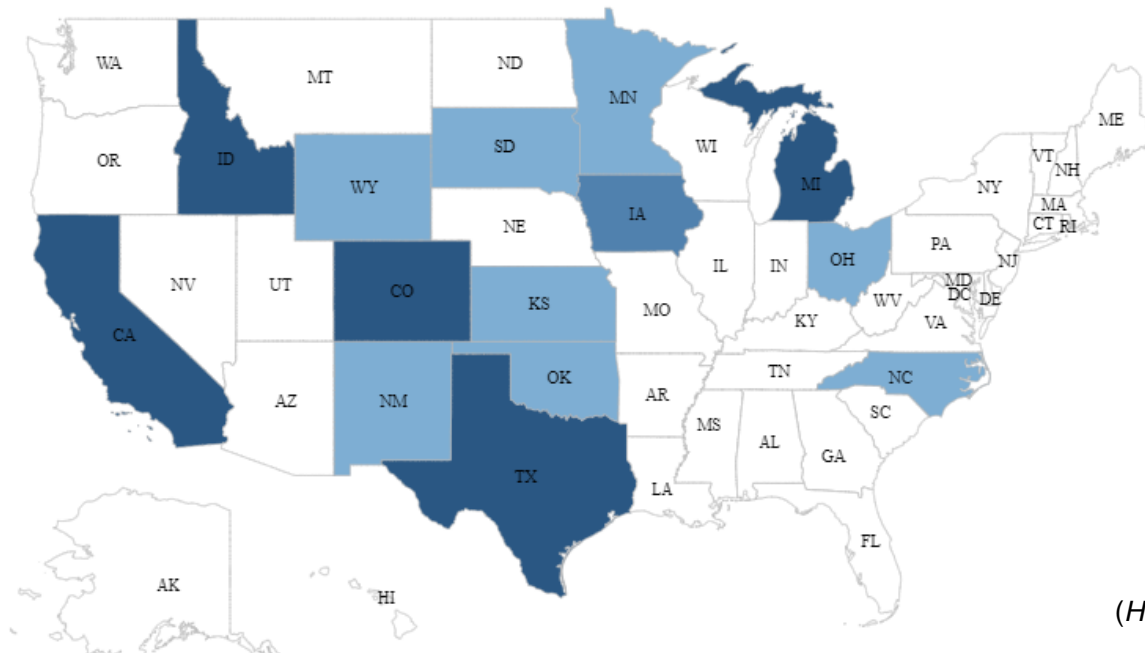
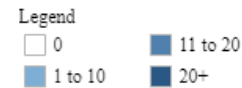


HPAI CONFIRMED CASES IN LIVESTOCK HERDS

Confirmed Cases Total Outbreak
331

States Affected Total Outbreak
14

Number of Confirmed Cases by State



As of October 21, 2024

Last reported confirmed detection Saturday, October 19, 2024 (California).

Last reported case on the East Coast was in April 2024 in Ohio and North Carolina.

HUMAN CASE SUMMARY

27 Total Reported Human Cases in the United States During 2024

**16 of the 27 H5 human cases reported in the US have been confirmed as H5N1. | [Learn More](#)*

**Despite continued detections,
CDC still considers the risk to
be low for the general public.**

Human Case Summary during the 2024 outbreak, by
state and exposure source

Exposure Source

State	Cattle	Poultry	Unknown	State Total
California	13	0	0	13
Colorado	1	9	0	10
Michigan	2	0	0	2
Missouri	0	0	1	1
Texas	1	0	0	1
Source Total	17	9	1	27

CLINICAL PRESENTATION IN HUMANS

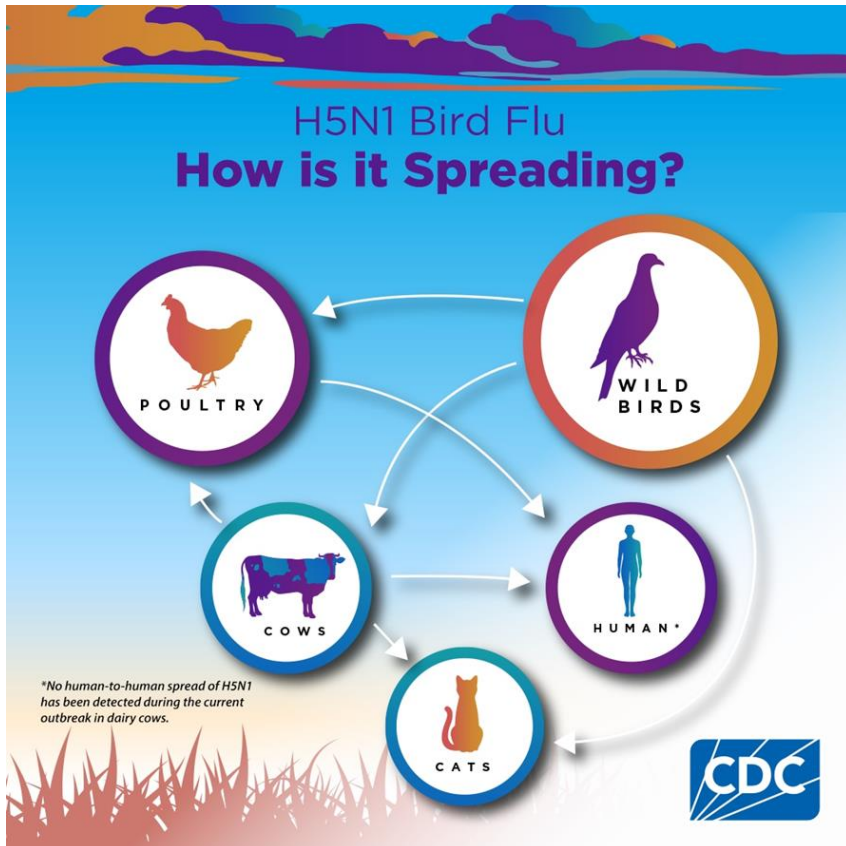
- Human infections with avian influenza type A have become known after close or lengthy unprotected contact
- Infection occurs when it invades a person's eyes, nose or mouth or is inhaled.
- Spread from human to human is very rare.

Clinical symptoms can include:

- Fever (Temperature of 100°F [37.8°C] or greater) or feeling feverish/chills
- Cough
- Sore throat
- Difficulty breathing/shortness of breath
- Eye tearing, redness, or irritation
- Headaches
- Runny or stuffy nose
- Muscle or body aches
- Diarrhea



IS AVIAN FLU CONTAGIOUS PERSON-TO-PERSON?



As of October 2024, no instances of human-to-human transmission of Avian Influenza A viruses have been reported in the United States.



**At this time there are no
HPAI A (H5N1) animal,
or human cases
reported in Maryland**



Image: USDA APHIS

SEASONAL FLU VACCINE FOR FARMWORKERS

- CDC announced two investments to protect the health of farmworkers at heightened risk of exposure to H5N1 bird flu.
 - First, \$5 million will go to partner organizations, including the National Center for Farmworker Health, to support overall outreach and education efforts focused on farmworker safety and health
 - Second, a separate \$5 million investment will be used to offer seasonal flu vaccines to U.S. livestock, dairy, and poultry workers to control and prevent seasonal flu among this group

SEASONAL FLU VACCINE FOR FARMWORKERS

- Seasonal flu vaccine will not prevent infection from bird flu
- However, it can help to:
 - Reduce the prevalence and severity of seasonal flu
 - Protect workers from missing work and inadvertently spreading influenza viruses
 - Reduce the risk of dual infection with seasonal and avian influenza

SEASONAL FLU VACCINE FOR FARMWORKERS

- MDH has ordered 3,000 doses of seasonal flu vaccine, that can be used by local jurisdictions, to assist with efforts to increase seasonal flu vaccination rates in dairy/farmworkers
- 45 Frederick County dairy farms have been identified by MDH
- FCHD Disease Management Team along with Hood Nursing Students contacted farms to evaluate their interest in participating in this initiative.
- Flu vaccine order has been placed with MDH. Frederick County's order will be processed once Maryland has received its allocation from CDC.





FARMWORKER FLU VACCINATION PLAN

- Vaccine received from MDH on 10/24/24
- Schedule clinics for participating farms
- Utilize a county mobile vehicle to directly vaccinate Frederick County's Dairy workers
- Vaccine administered by FCHD Disease Management Team



ROLE OF LHD IN HPAI RESPONSE

- Surveillance for human novel influenza A
- Communication with healthcare providers, Ag industry, local and state agencies, general public
- Coordination of human specimen collection and laboratory testing
 - coordinate those activities with the individual's provider and MDH Laboratory
- Reporting, case investigation, contact tracing
- Treatment
 - Inventory available antiviral (or other) treatments available in the area
 - Provide treatment guidance to local healthcare providers
- Monitoring of exposed persons
 - Active follow-up at 0, 5, and 10 days after last exposure
 - Coordinate access to prophylaxis, if warranted
 - If the individual works for a large poultry or dairy company, the local health department personnel will likely interact with the company's Medical Department

ROLE OF THE DISEASE MANAGEMENT TEAM IN THE FREDERICK COUNTY HEALTH DEPARTMENT

- ✓ Our Disease Management Team monitors all respiratory and non-respiratory outbreaks within Long Term Care Facilities, Acute Care Facilities, Schools, and Daycare settings within Frederick County.
- ✓ On average we receive reports of anywhere from 10-20 COVID and other reportable respiratory outbreaks a month involving more than 2,000 cases. We work closely with MDH and the required reporting facility to help prevent further spread of the illness that was reported.
- ✓ In addition, we investigate routine communicable disease cases and conduct interviews. Our team provides health education on communicable disease prevention and control. Last year we investigated almost 700 reports of communicable diseases within 24 hours of receiving the report.

RESOURCES

- *Avian influenza in pets and backyard flocks*. (n.d.). American Veterinary Medical Association. <https://www.avma.org/resources-tools/animal-health-and-welfare/animal-health/avian-influenza/avian-influenza-companion-animals>
- *Backyard Flock Owners: Protect Yourself from Bird Flu*. (2024, May 3). Avian Influenza (Bird Flu). <https://www.cdc.gov/bird-flu/caring/index.html>
- *CURRENT H5N1 BIRD FLU SITUATION IN DAIRY COWS*. (2024, JUNE 6). CENTERS FOR DISEASE CONTROL AND PREVENTION. HTTPS://WWW.CDC.GOV/FLU/AVIANFLU/MAMMALS.HTM#ANCHOR_1646852808572
- *CURRENT U.S. BIRD FLU SITUATION IN HUMANS*. (2024, APRIL 5). CENTERS FOR DISEASE CONTROL AND PREVENTION. <HTTPS://WWW.CDC.GOV/FLU/AVIANFLU/INHUMANS.HTM>
- Dobbins, I. (2023, October 16). *Highly pathogenic avian influenza*. <https://www.southlandorganics.com/blogs/poultry-biosecurity/highly-pathogenic-avian-influenza>
- *HPAI in Livestock* / Animal and Plant Health Inspection Service. (n.d.). <https://www.aphis.usda.gov/livestock-poultry-disease/avian/avian-influenza/hpai-detections/livestock>
- *H5 Bird flu: current situation*. (2024, October 18). Avian Influenza (Bird Flu). https://www.cdc.gov/bird-flu/situation-summary/index.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fbird-flu%2Fphp%2Favian-flu-summary%2Findex.html
- MDH Biweekly Situational Updates

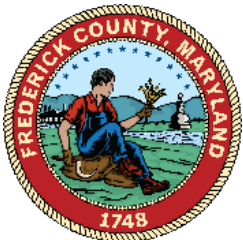
Thank you

Communicable Disease Program
Disease Management Team
Frederick County Health Department

301-600-1733

Outbreak@Frederickcountymd.gov

Health.frederickcountymd.gov



Public Health
Prevent. Promote. Protect.

Frederick County Health Department





Overview of School Health Services by Colleen Whitmore, MSN, MSN, RN, Director School Health Services



Frederick County, Maryland

FREDERICK COUNTY HEALTH DEPARTMENT

SCHOOL HEALTH SERVICES OVERVIEW

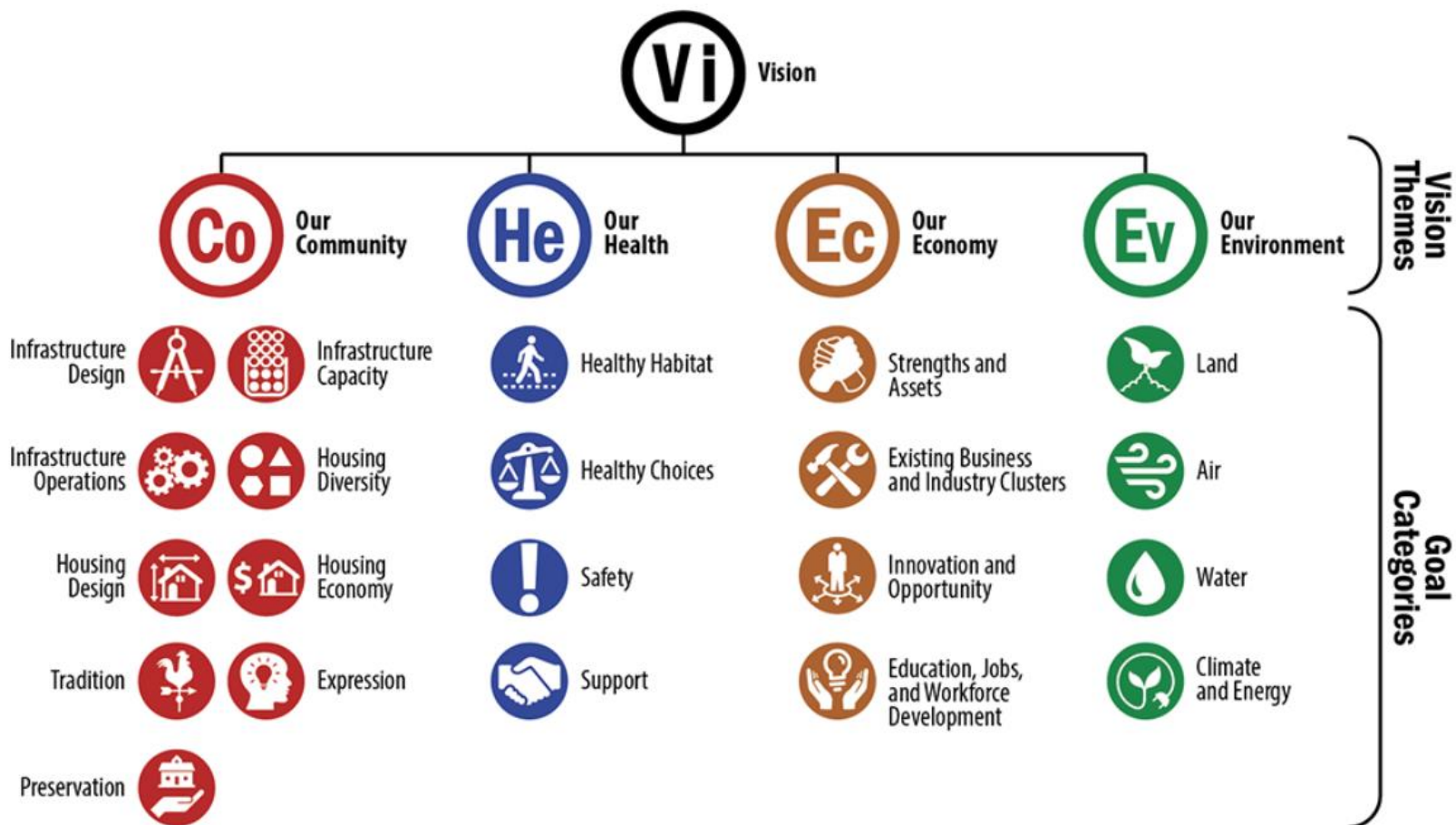
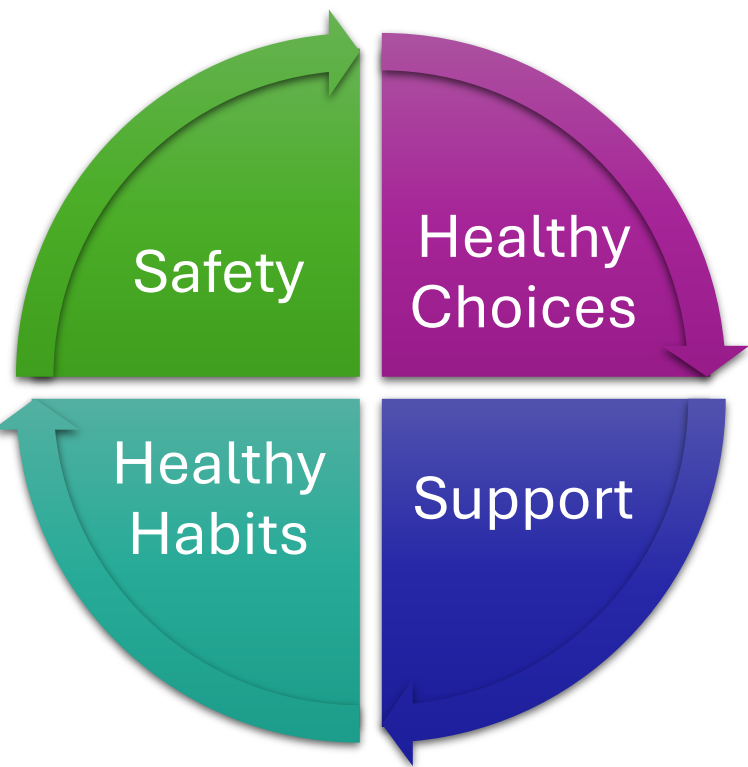
Board of Health Presentation October 30, 2024





Livable Frederick Action Framework

Our Health and Our Economy





Frederick County Health Department Vision and Strategic Priorities

Mission

- Improve the health and well-being of the residents of Frederick County through programs to prevent disease and illness, promote wellness and safety and protect public health.

Vision

- Frederick County leads as a community of health and wellness

Values

- Excellence
- Integrity
- Making a difference
- People
- Quality



Public Health

Prevent. Promote. Protect.

Frederick County Health Department





School Health Services (SHS)

Mission:

- To promote optimal health among students and staff by preventing, identifying, intervening, and remediating health problems.

Population Served:

- Almost 48,000 students in 70 Frederick County Public Schools, including four (4) Public Charter Schools.

Staffing Model: Cluster (mostly*)

- School Nurses - serve as the leaders of the school-based health team
 - Delegating Registered Nurses (RN) - Each school nurse provides health services and supervises the health room staff in 2 to 3 schools.*
 - RNs assigned to one school – Due to HRT/LPN vacancy provide day-to-day care
- Health Room Technicians (HRT) and Licensed Practical Nurses (LPN) - are assigned to a health room and provide the day-to-day care
- *Community Health Nurses- 9 RNs who provide health services and care coordination to students attending nine Community Schools

WHO WE ARE



Role of the Delegating RN

- Conduct yearly student health appraisal and nursing assessments as needed
- Train and delegate nursing tasks to HRTs as mandated through the MD State Board of Nursing
- Conduct monthly assessments for students receiving specialized care by the HRT
- Assess, plan, implement and evaluate health services provided in their assigned schools
- Develop, write and implement Individual Health Plans and Emergency Action Plans for specific individual students
- Train designated school personnel on emergency medication and student specific care
- Investigate and surveil communicable diseases in the school setting
- Attend and participate in faculty, staff and student meetings as pertains to student health
- In the absence of the HRT or LPN, provide on-site health room coverage



Services Provided

WHAT WE DO

- Medication Administration
- Treatment Administration
- Emergency, Sick & Injured Care
- Specialized Nursing Services
- Hearing & Vision Screening –
Public and Private Schools
- Immunization Surveillance
Compliance- COMAR

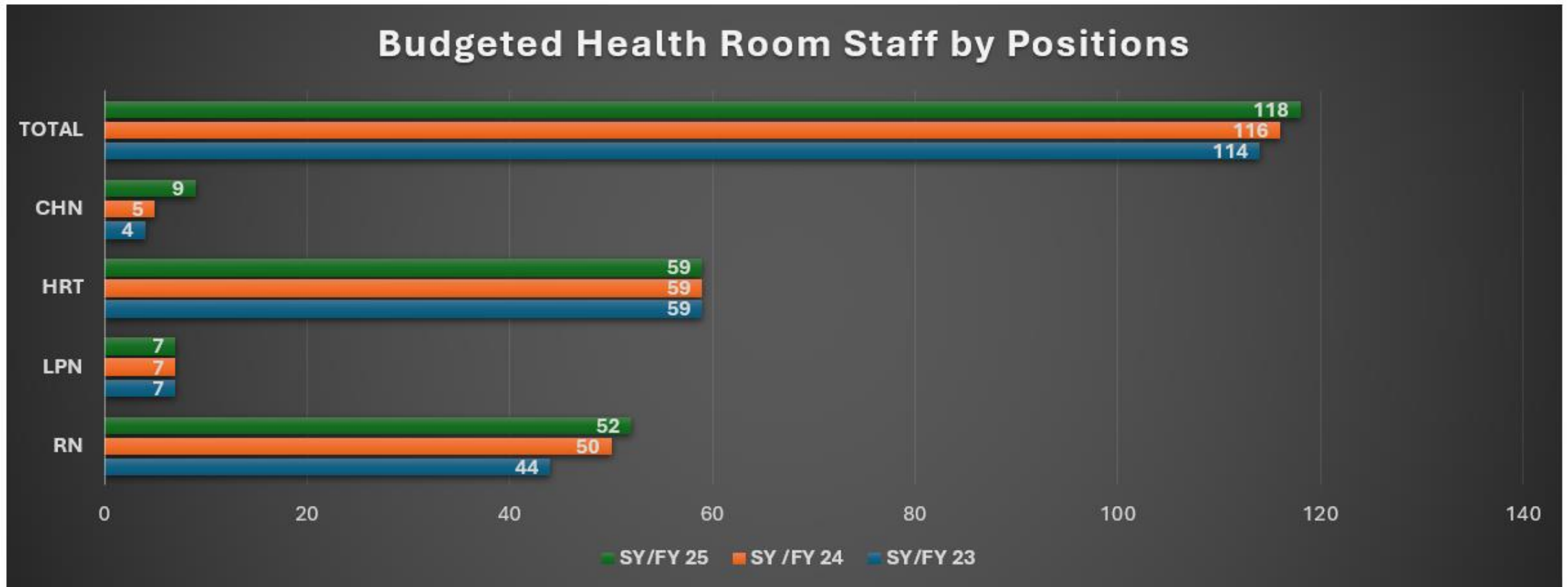


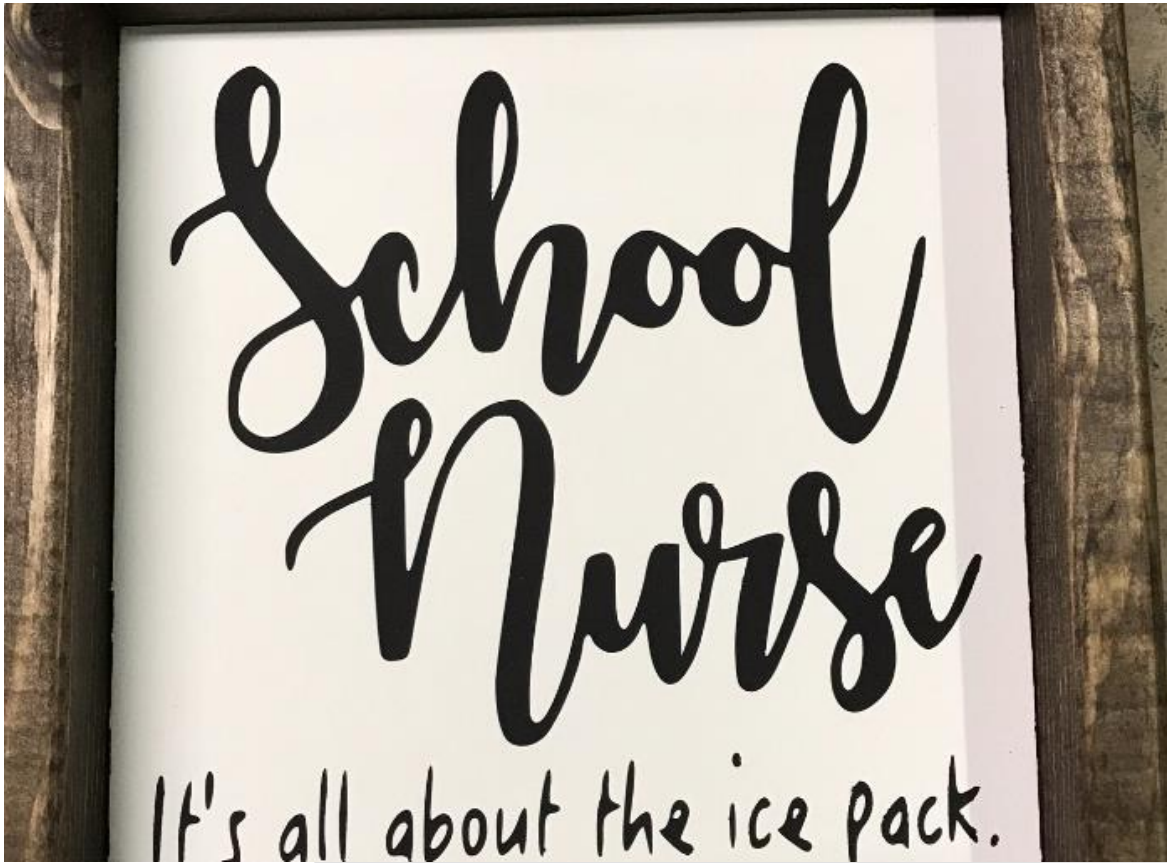
Day in the Life of the Health Room Staff

- Health Rooms (HR) Staffed with an HRT/LPN
 - 2 to 3 days per week only person in the HR
- School RN, if covering for HRT/LPN absence/vacancy
 - 5 days per week only person in the HR
- Typical Health Room Visit consists of :
 - Greet the student, indicate where to sit
 - Obtain the reason for the visit / ask about symptoms
 - Obtain vitals
 - Consult their care plan or the RN if necessary to treat the student
 - Administer care
 - Document the visit
 - Contact family (if reason for visit meets criteria)
 - Print out info for student to take home (if reason for visit meets criteria)



BUDGETED HEALTH ROOM PERSONNEL





No Longer Band-Aids and Ice



HEALTH ROOM VISITS (HRV) OVERVIEW

SY 24-25 – HRV - Day 39

- HRV - 59,365
- Diabetes related visits - 8691
- 911 Calls - 51
 - Transported - 42

SY 22-23 – HRV

- HRV- 290,343
- Diabetes related visits – 25,751
- 911 Calls – 186
 - Transported - 144

SY 23-24 – HRV

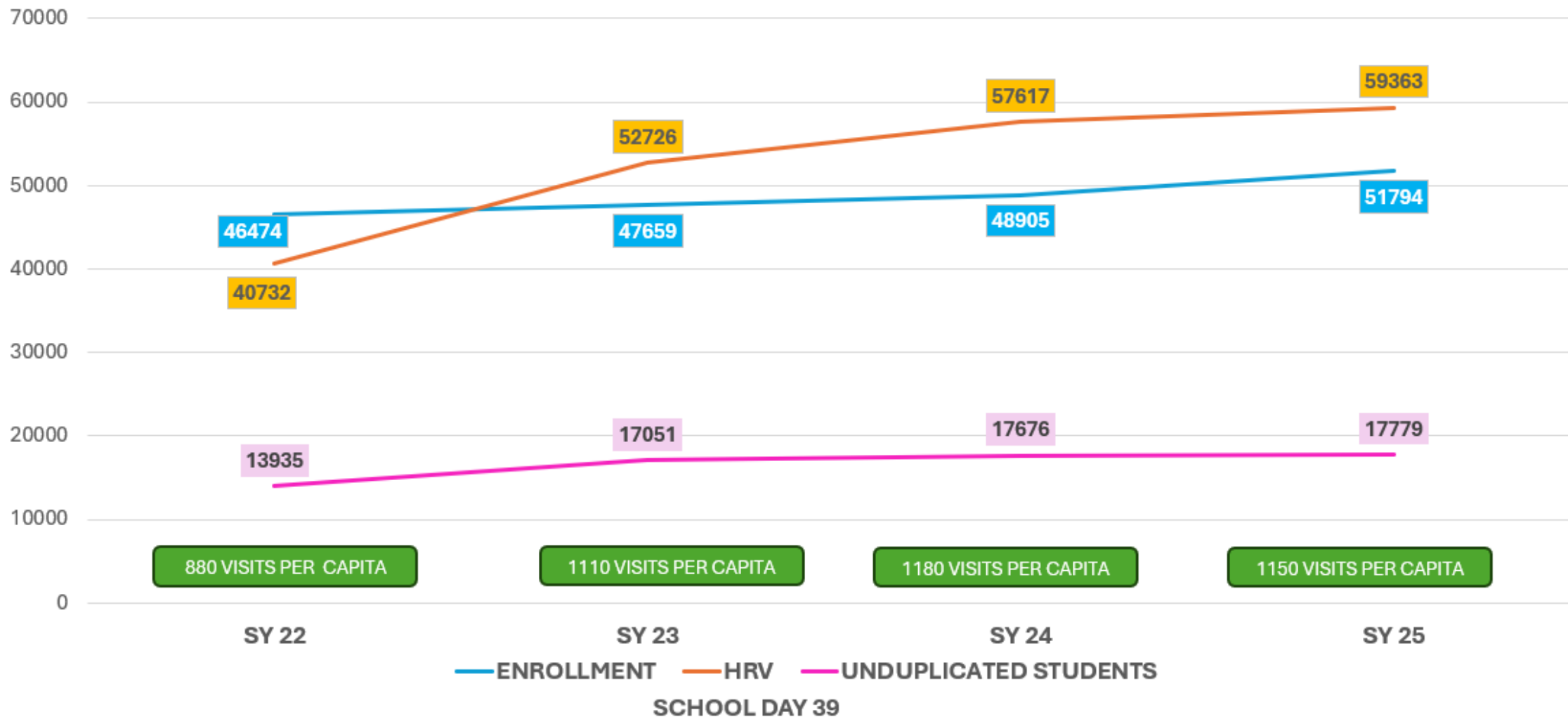
- HRV– 294,525
- Diabetes related visits – 25,134
- 911 Calls - 271
 - Transported - 201

SY 23-24 – HRV – Day 39

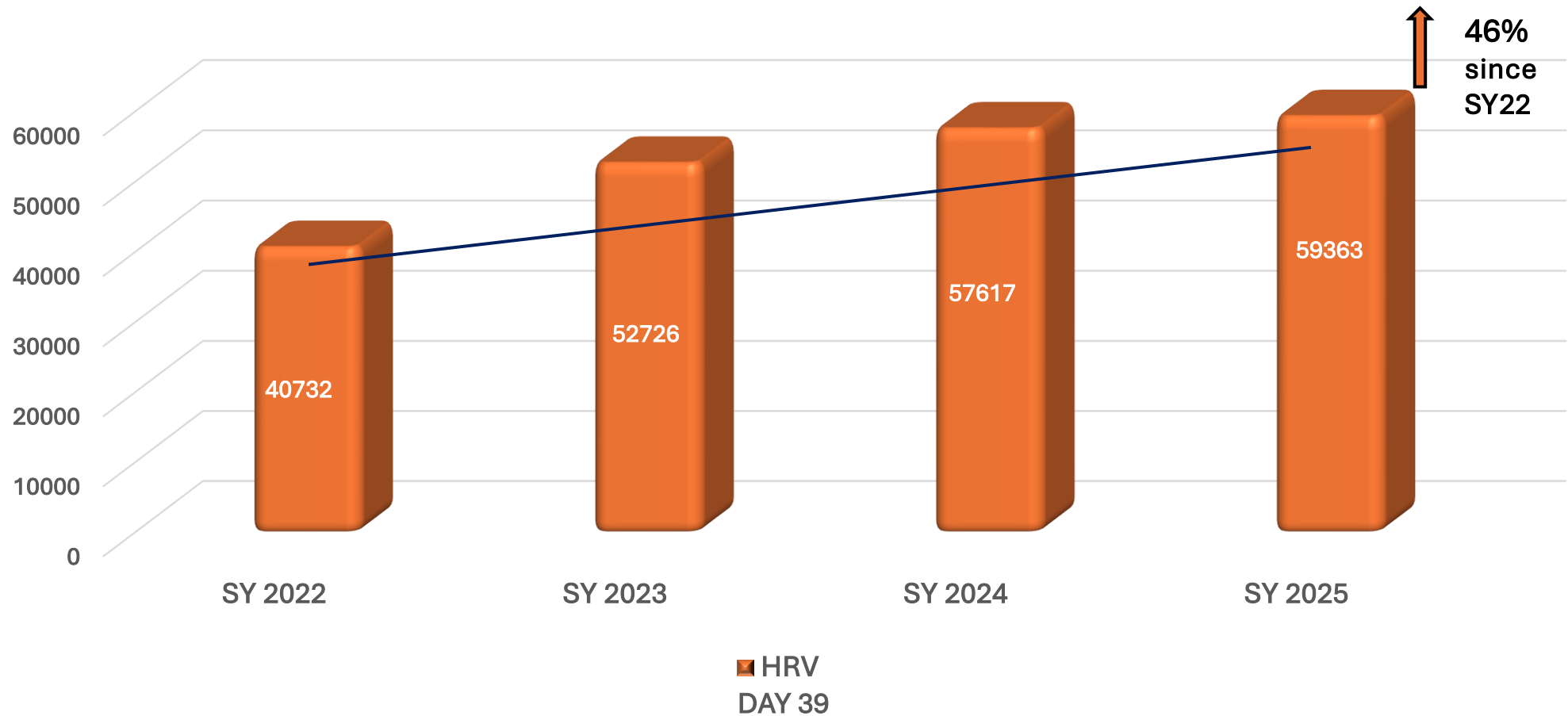
- HRV–59,243
- Diabetes related visits - 5539



HRV PROPORTION TO STUDENT ENROLLMENT FOR THE FIRST 39 DAYS OF SCHOOL-BY-SCHOOL YEAR



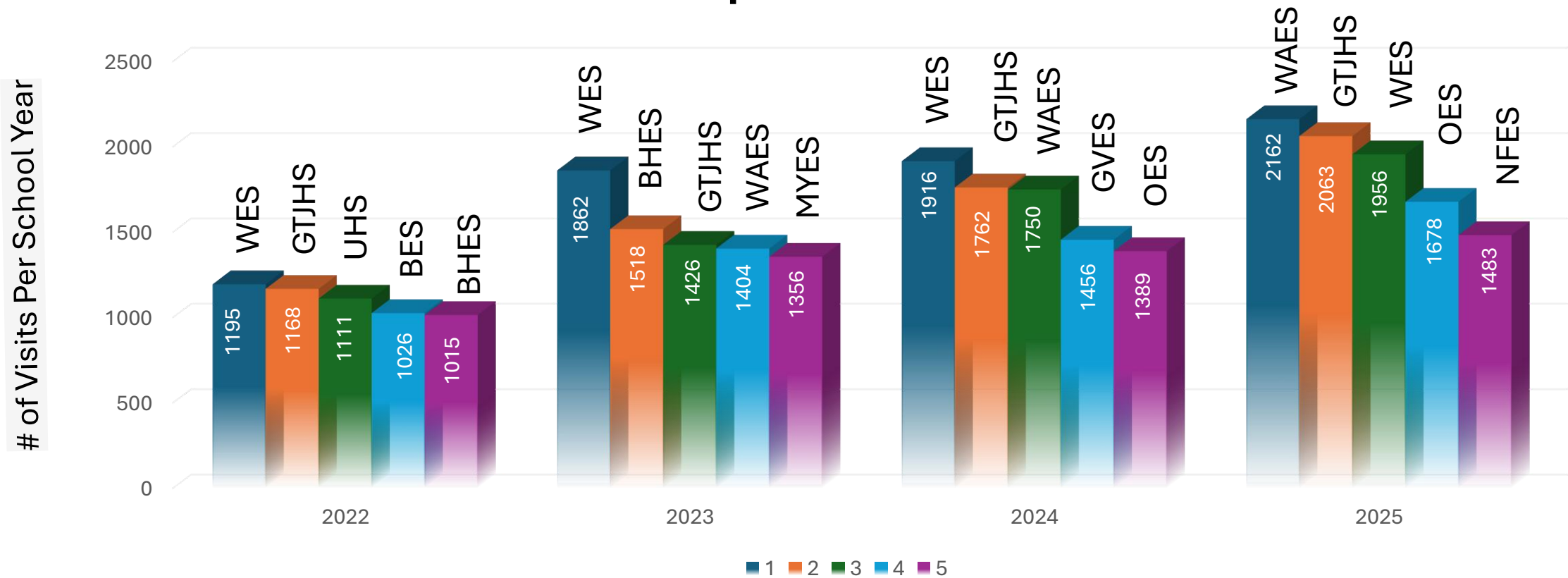
TOTAL HRV COMPARISON FOR THE FIRST 39 DAYS





Top 5 Busiest Health Rooms in the First 39 Days of School from SY2022 through SY2025

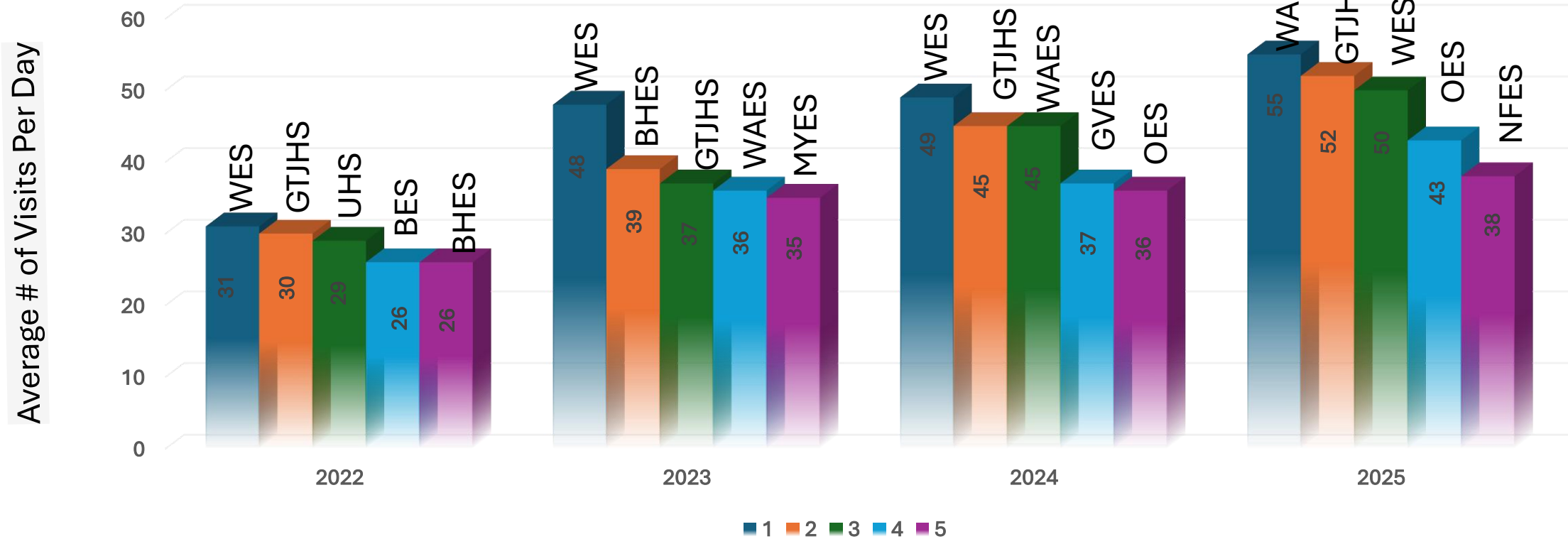
Visits per School Year





Top 5 Busiest Health Rooms in the First 39 Days of School from SY2022 through SY2025

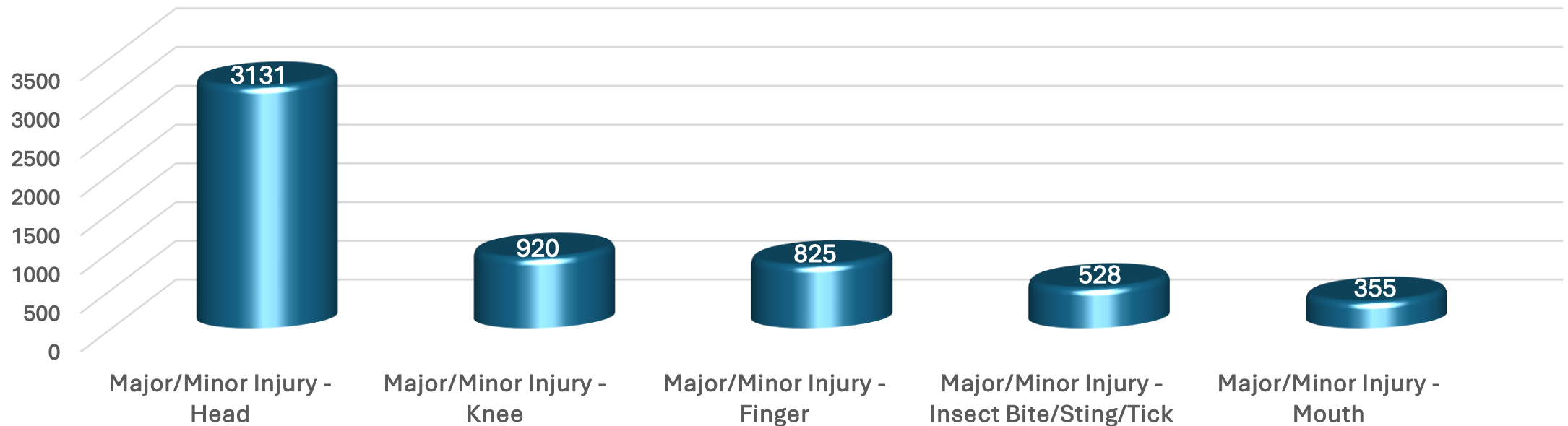
Average # Visits Per Day





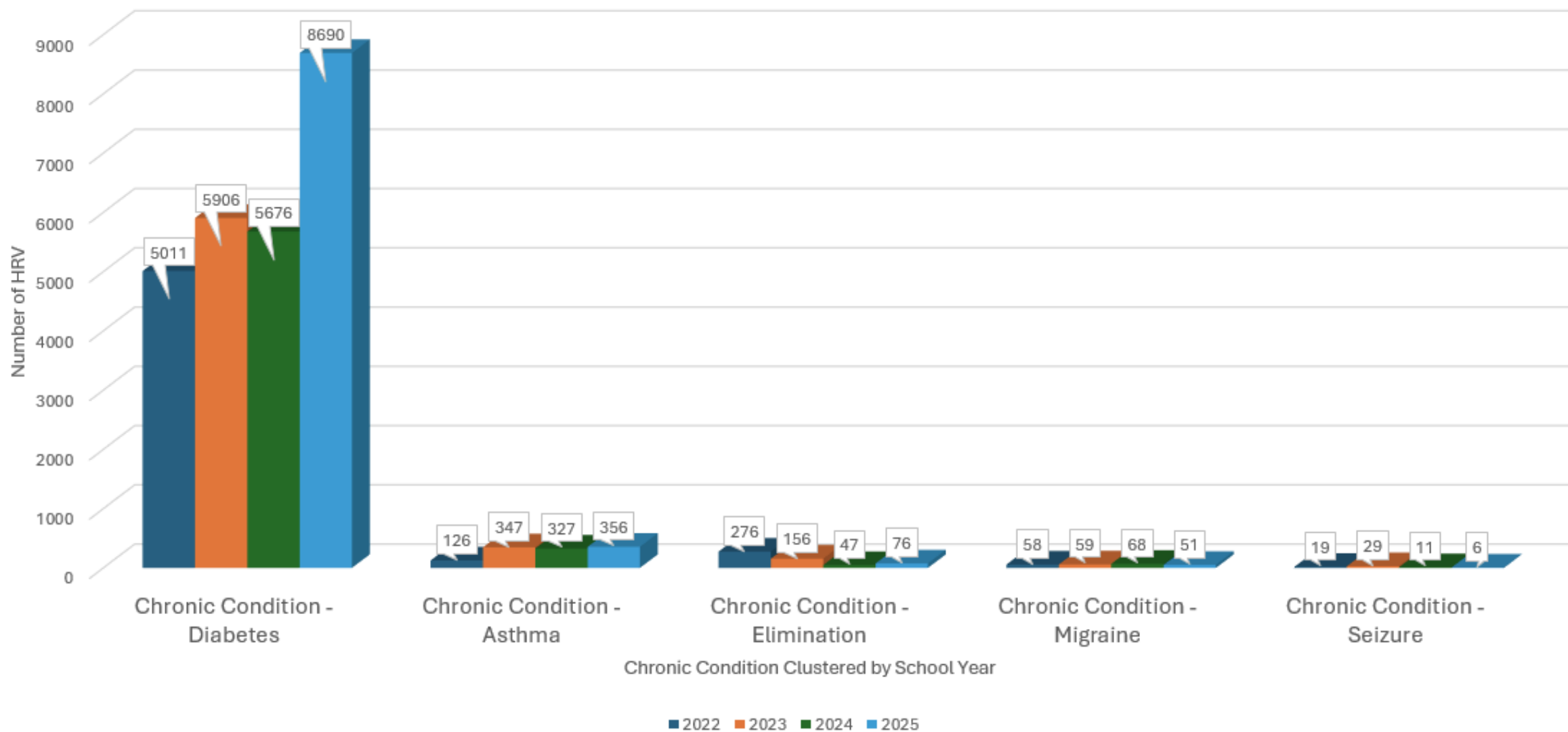
TOP FIVE INJURY VISITS BY TYPE

SY25 FIRST 39 DAYS OF SCHOOL

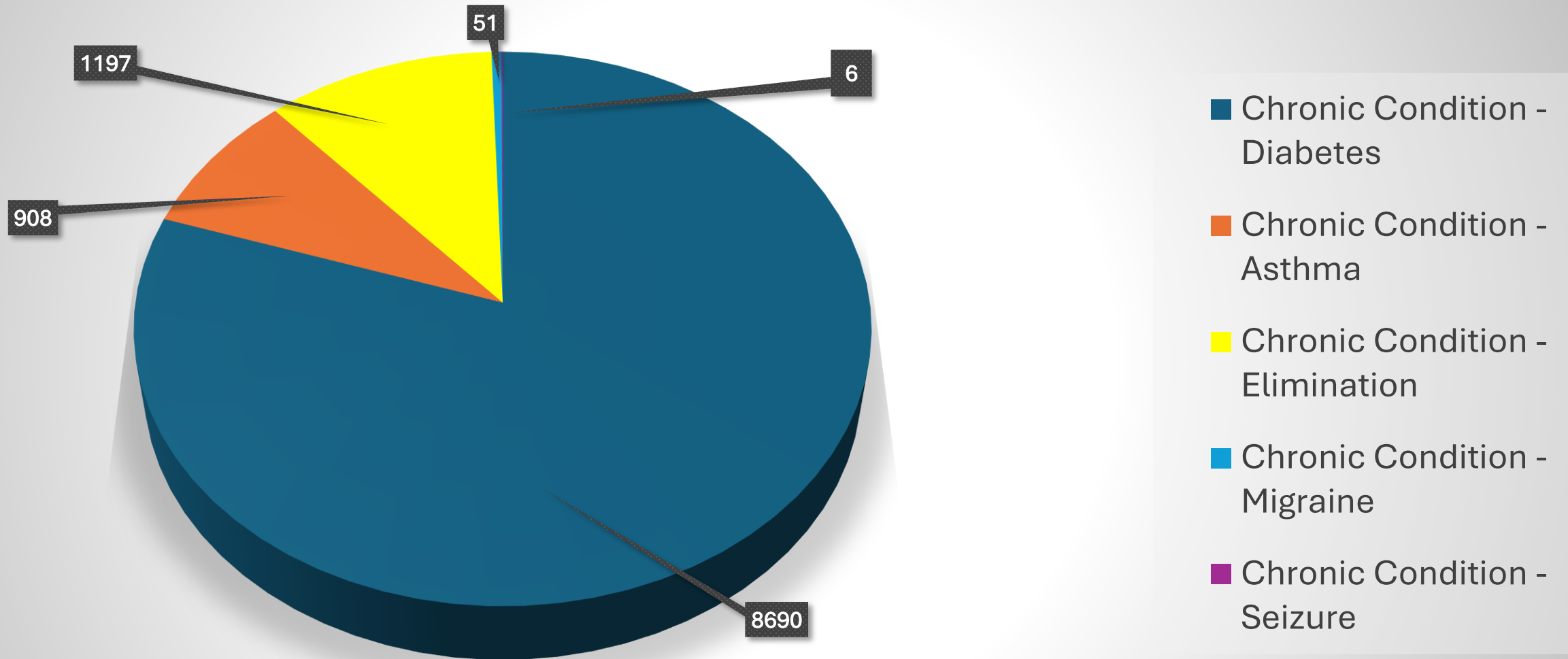




STUDENTS WITH CHRONIC CONDITIONS TOP 5 HEALTH ROOM VISITS



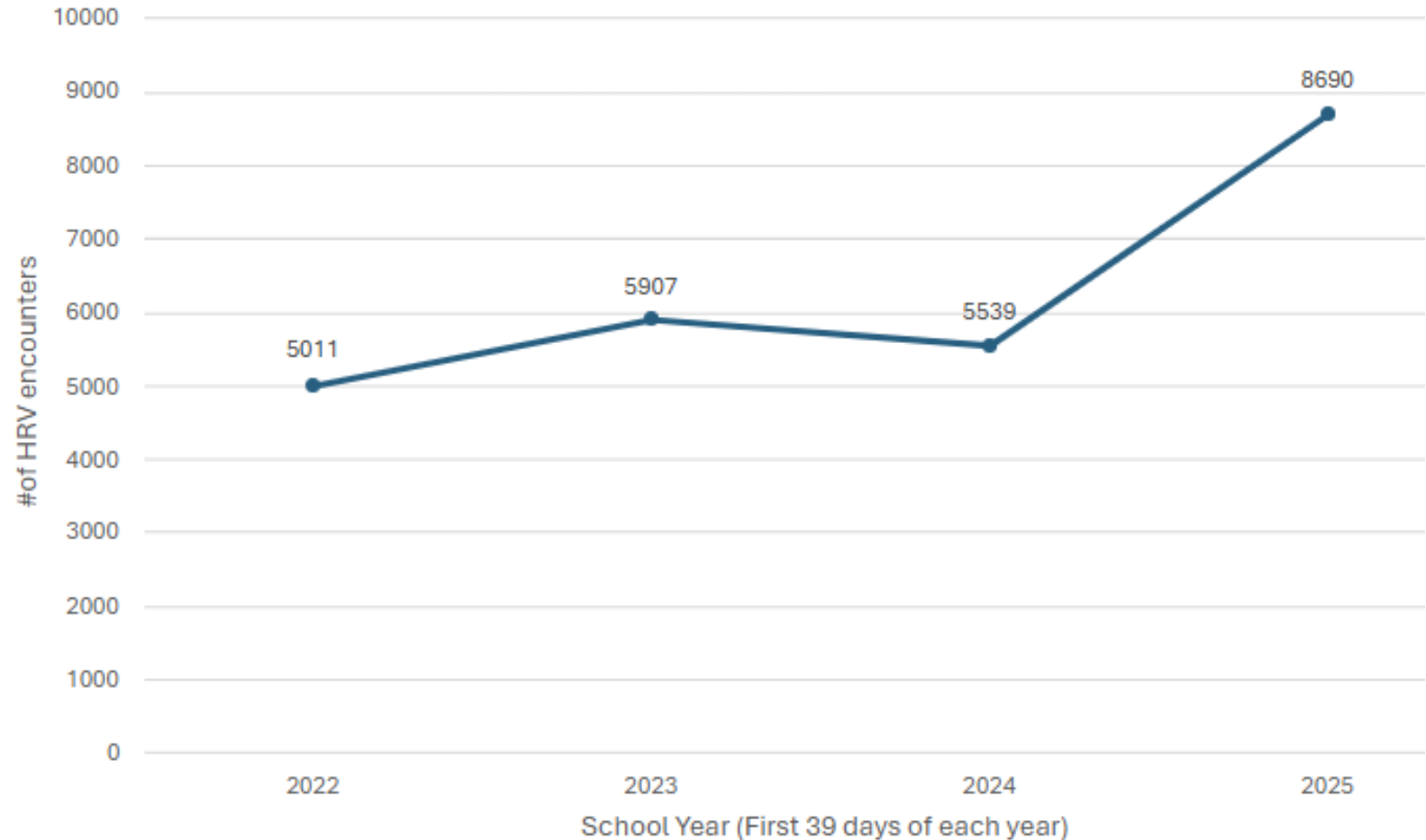
HRVs CHRONIC CONDITIONS SY 25 (FIRST 39 DAYS OF SCHOOL)





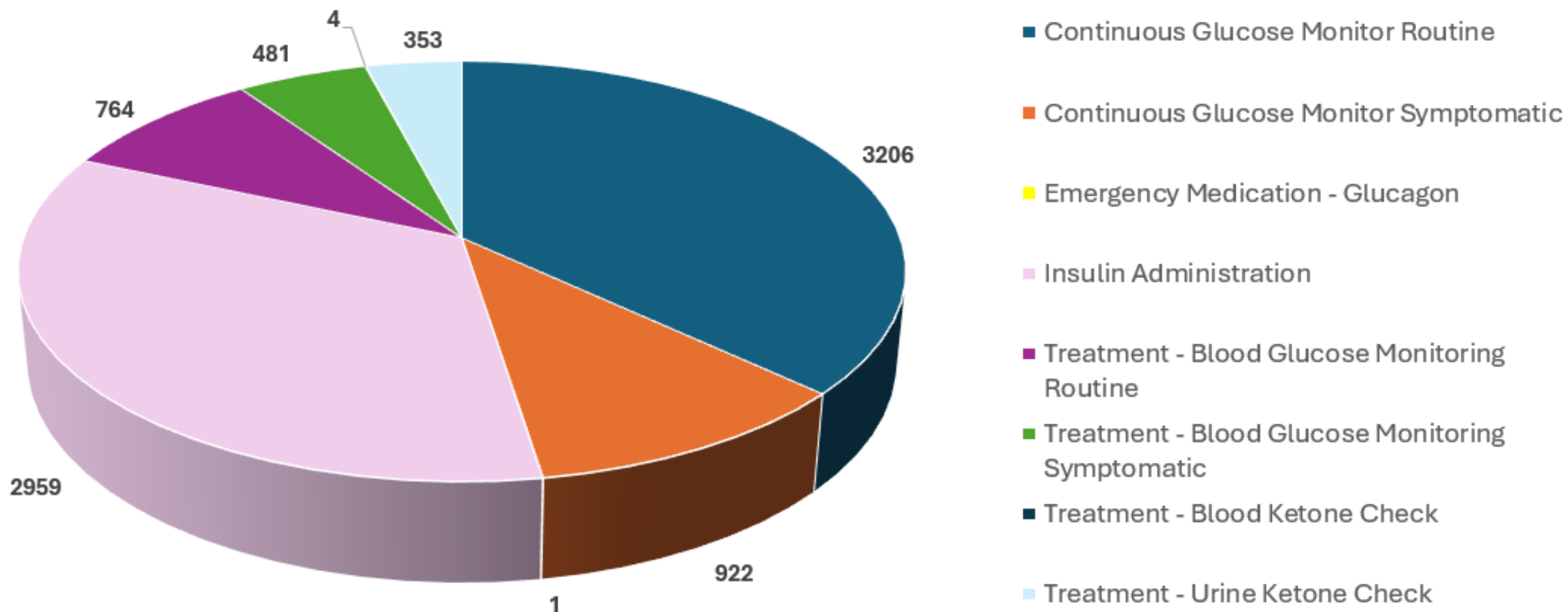
DIABETES MANAGEMENT VISITS IN THE FIRST 39 DAYS OF SCHOOL FOR SY22-25

Number of Diabetes Encounters in the First 39 Days of School Years
2022 Through 2025

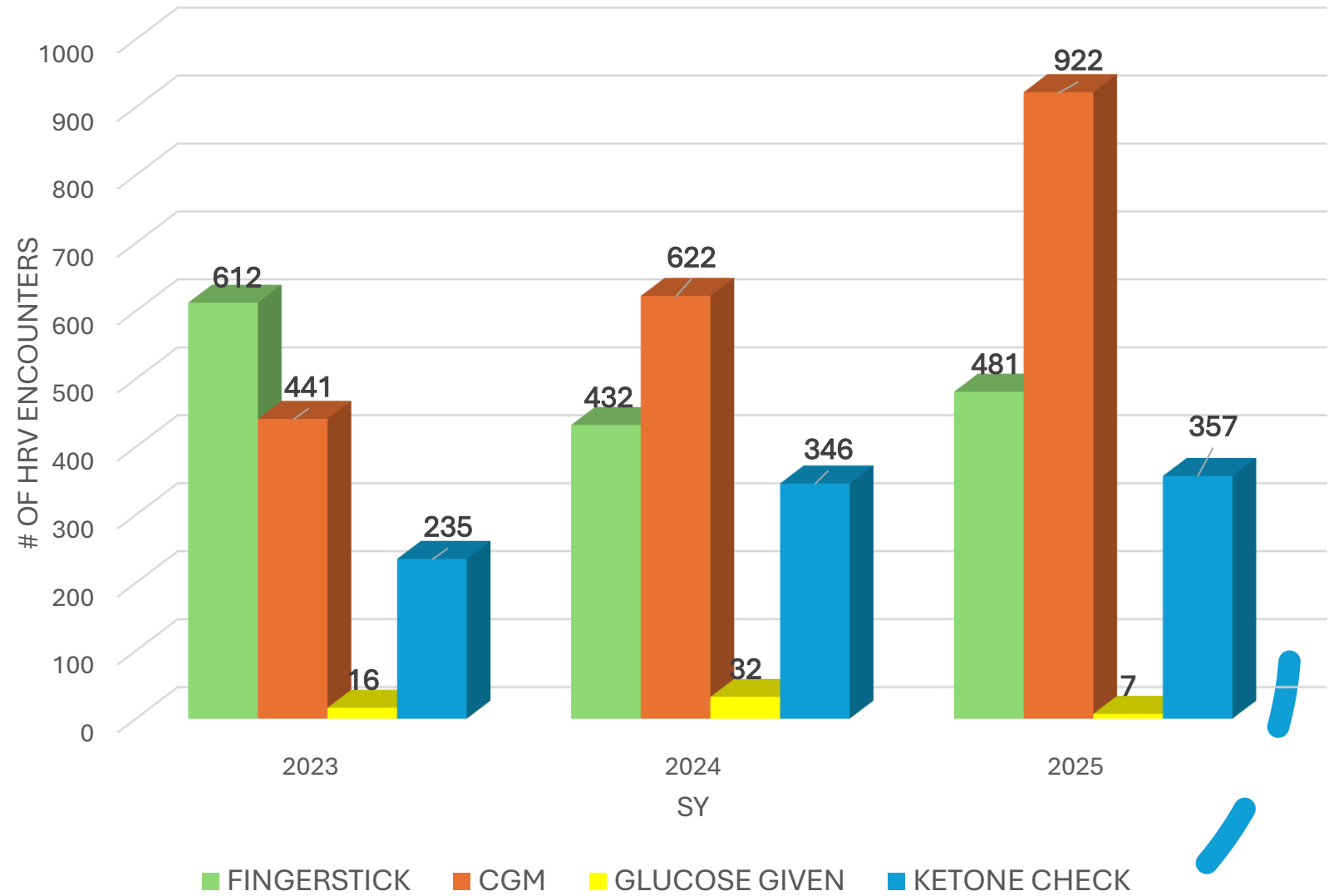




DIABETES MANAGEMENT BY TREATMENT CODE (SY 25 – FIRST 39 DAYS OF SCHOOL)

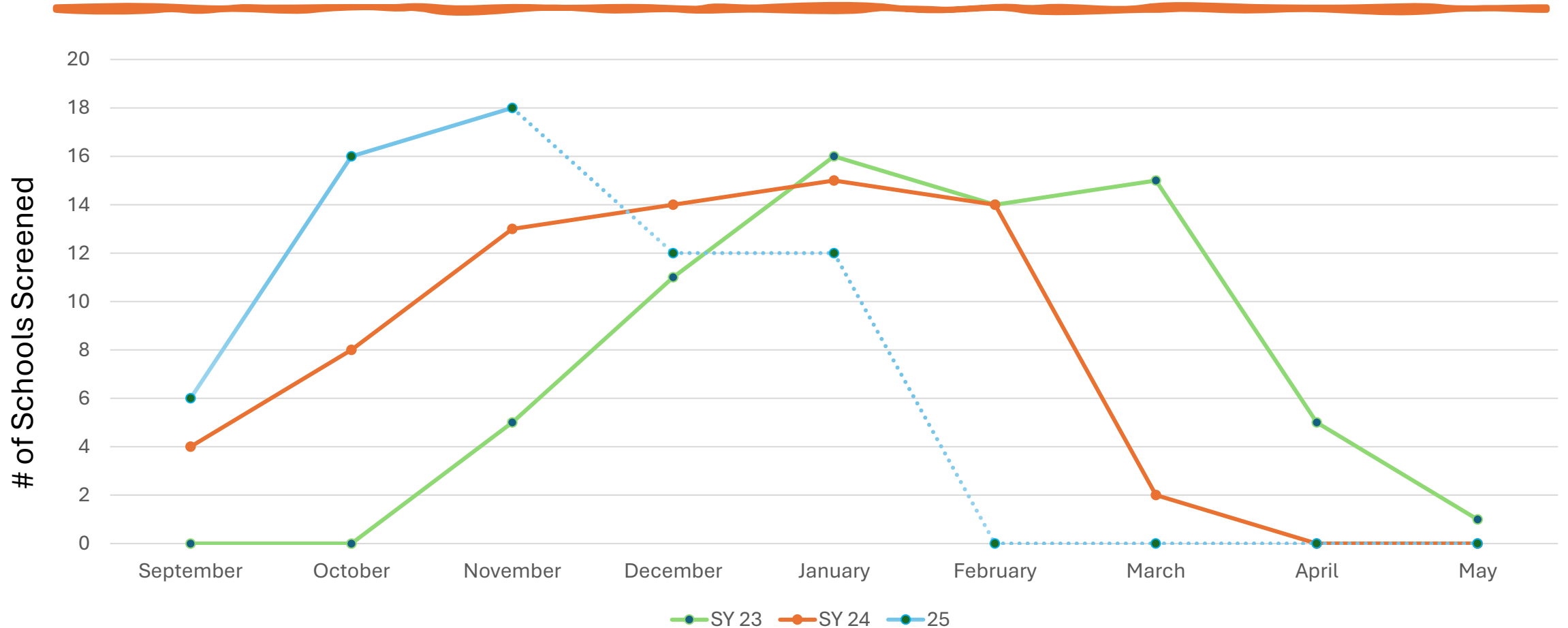



DIABETES
MANAGEMENT
SY 23 - 25
NON-ROUTINE CARE
DURING THE FIRST 39
DAYS OF SCHOOL





HEARING AND VISION SCREENING COMPARISON SY 22 , SY 23 AND SY 24 – BY MONTH





When you are a health professional, you know that every day, you will touch a life, or a life will touch yours.





Update on the current Community Health Needs Assessment
by
Rissah Watkins, MPH, CPH
Director of Planning, Assessment and Communication



MAPP 2.0 Process

Centered around

- Health equity
- Community involvement



Requirements for Community Health Assessment

Required by Public Health Accreditation Board (PHAB) for public health to conduct every 5 years.

We partner with Frederick Health which has an IRS requirement of every 3 years, so we work on their timeline.

Partner with Coalition for a Healthier Frederick County on process.

Health Department required elements:

- Primary data
- Secondary data from 2+ sources
- Qualitative data
- Quantitative data
- Demographic description of population including languages spoken
- Description of health challenges and disparities of health status and behaviors



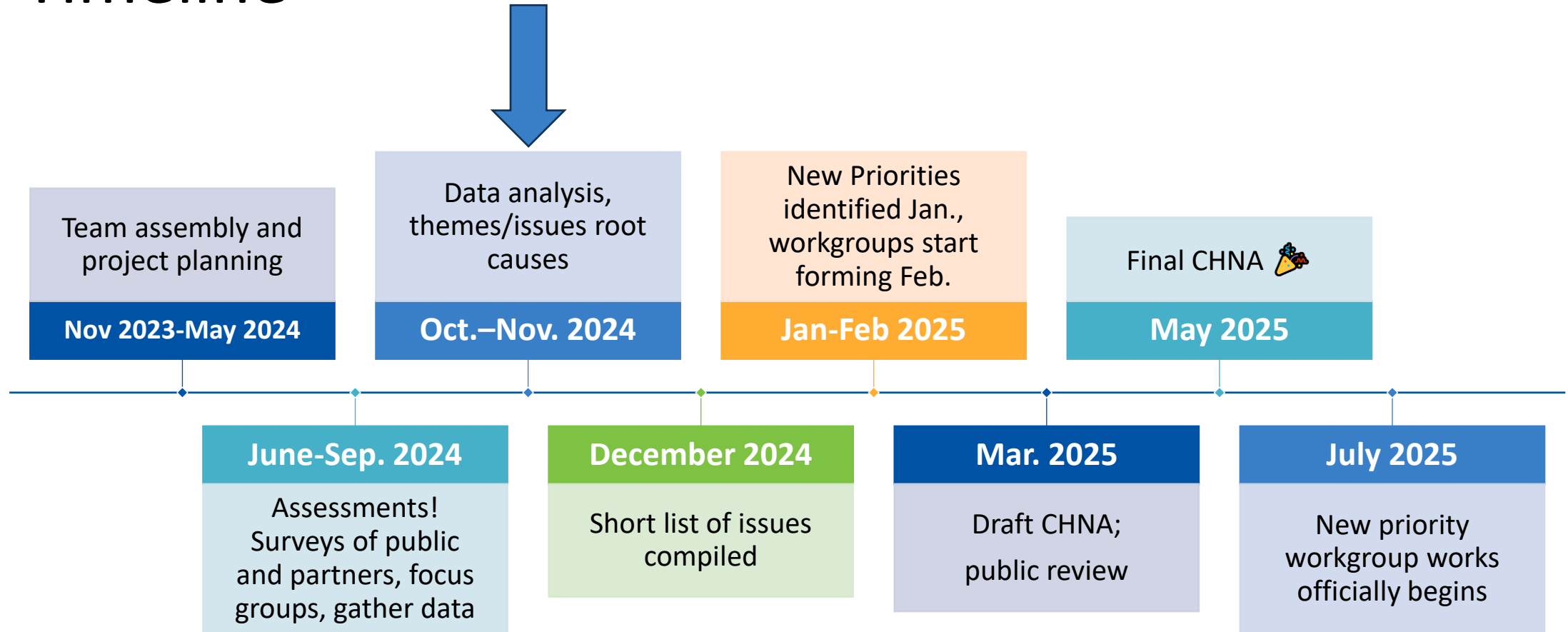
Requirements for Community Health Assessment

Our data:

- Community Survey – this is primary, quantitative and qualitative data.
- Focus groups - this is primary qualitative data
- 40+ health indicators from 12+ other reports – this is secondary quantitative data and includes our demographic data
- All data sources provided input into description of health challenges and disparities of health status and behaviors.



Timeline





Brief report on the
Maryland Commission on Public Health
by
Dr. Barbara Brookmyer



Commission on Public Health - Charge

Maryland's Commission on Public Health is tasked with

- ✓ assessing the *foundational public health capabilities* of state and local health departments in Maryland and
- ✓ analyzing the state's ability to respond to major public health challenges.

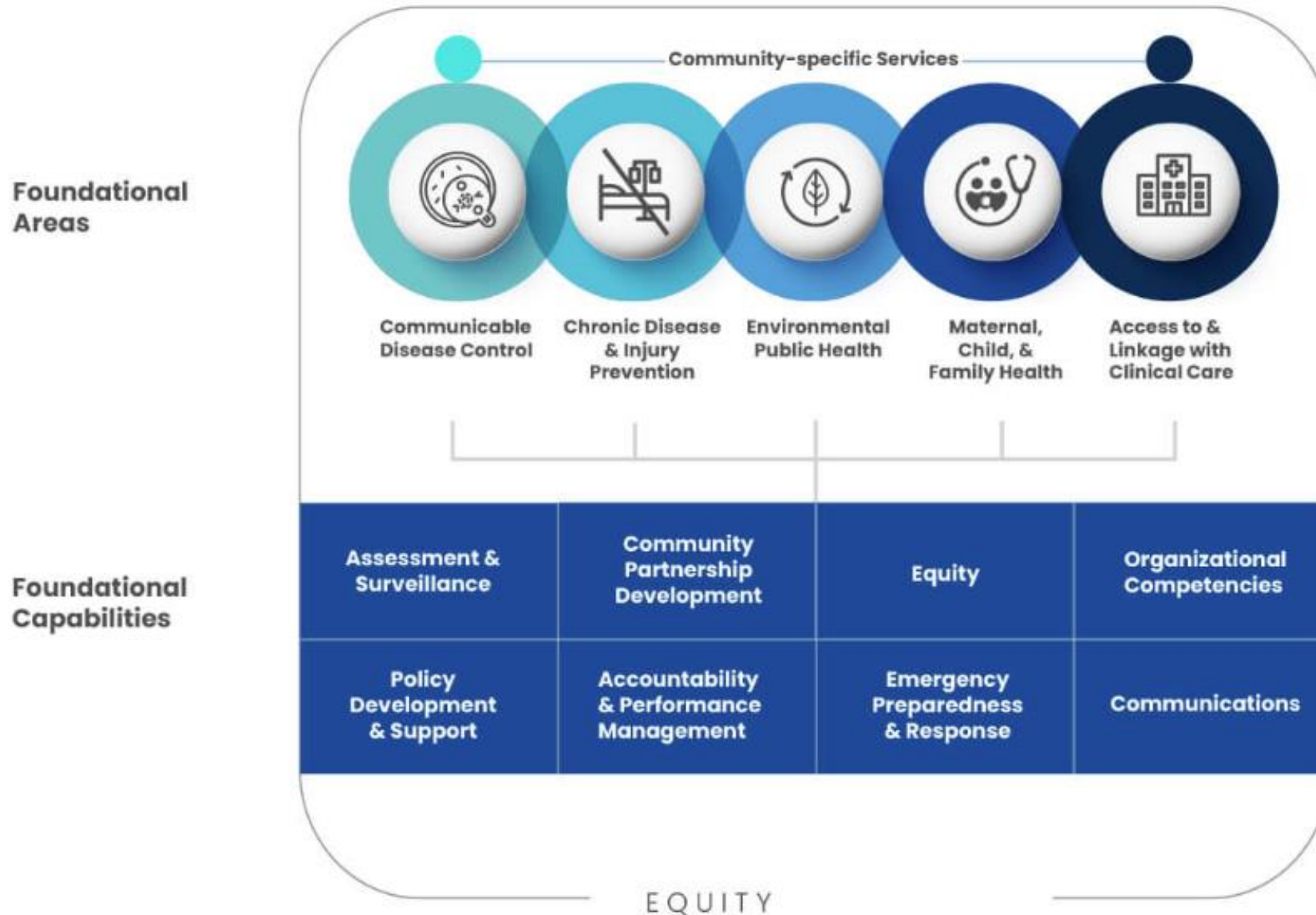
The Commission will make recommendations for reform in several areas, including:

- the organization of [state and local] public health departments
- how the departments use information technology, exchange information with other organizations, and collect and report data
- the people, funding, and contract processes departments need to do their work
- how the departments communicate with and engage community members and groups

Final Report – anticipated submission date = October 2025



Foundational Public Health Services





CoPH Required Workgroups

(I) FUNDING;

(II) GOVERNANCE AND ORGANIZATIONAL CAPABILITIES;

(III) WORKFORCE;

(IV) DATA AND INFORMATION TECHNOLOGY; AND

(V) COMMUNICATION AND PUBLIC ENGAGEMENT.



Assessment Framework

- Surveys
 - Organizational surveys
 - Individual staff surveys
- Key informant interviews
 - Local Health Officer / Deputy LHO*
 - Select stakeholder organizations (mandated and recommended)
- Focus groups
 - System staff by function, interest, or role
- Site visits
 - 5* local health departments
- Public input
 - 5* listening sessions
 - Online comment form (and other accessible options)

Themes Generated from Workgroup Feedback

Organizational Structure

*Internal Governance,
Defining Roles,
Relationship to State*

Funding

*Allocation, Decision Making,
Funding Sources*

Communicating Health Information

*Tools/Methods,
Communication about
Specific Issues*

Technology and Data Systems

*Accessibility, AI,
Tracking Health Metrics,
Financial Systems, EHRs*

Workforce

*Recruitment & Retention,
Training and Continuing
Education, Preparedness,
Medical Reserve Corps*

Partner & Public Engagement

*Identifying Key Partners,
Communication Strategies,
Community Engagement*

★ *Challenges/needs and equity
considerations were cross-cutting topics*



Timeline

Commission Final Interim Report – December 1, 2024

Assessment Final Report – Spring 2025

Commission Final Report – October 1, 2025



CoPH - Communications

Website: <https://smchd.org/commissiononpublichealth/>

LinkedIn: <https://www.linkedin.com/company/maryland-commission-on-public-health>



Old Business



Frederick County Board of Health

October 30, 2024

- I. **Call to Order (6pm)** – Dr. Barbara Brookmyer, Health Officer for Frederick County
- II. **Public Comments (6:00p.m. – 6:15 p.m. p.m.) - Members of the public will be given three (3) minutes to provide comments** - available to attendees in the room.
- III. **Approval of Minutes: 5/16/2024 & 8/29/2024**
- IV. **Fall Respiratory Update**
- V. **Overview of School Health Services**
- VI. **Update on the current Community Health Needs Assessment**
- VII. **Update on Maryland Commission on Public Health**
- VIII. **Old Business**
 - a. Orientation for liaisons - completed
- IX. **New Business** - none
- X. **Upcoming Meetings:** May, 2025
- XI. **Adjourn**