# Division of Prevention & Wellness Bexley Board of Health Reporting Period: January – March 2023

### Immunization Program/School Nursing Section

#### Adult, Childhood and COVID-19 Vaccination Clinics

In March 2023, 115 clients were vaccinated at FCPHs routine adult and childhood vaccination clinics, and 240 vaccines were administered. A total of 36 COVID-19 vaccines were administered. Flu vaccinations continue to be offered at all clinic locations.

The immunization staff assisted at the COVID/Flu clinic held at Franklin Park Conservatory on Sunday, March 26, 2023. A total of 3 COVID vaccinations and 1 flu vaccination were administered.

#### Get Vaccinated Ohio - Public Health Initiative Grant

An invoice for \$3,029.38 was submitted to Columbus Public Health (CPH) for March 2023 reimbursement for GVO grant completed deliverables.

### Maternal and Child Health Section

### Bexley- FCPH Maternal and Child Health Services

Franklin County Public Health (FCPH) administers the Children with Medical Handicaps (CMH) program to children ages 0-23 years old living in Franklin County. The PHNs in the CMH program provide case management services for children with special health care needs. These services include assisting families with finding quality health care for their children, providing community resources, participating in community outreach, and assisting with coordination of care for children with various healthcare needs. CMH PHNs provide services via telephone communication, email communication, mail, and home visits.

#### Data from January 1, 2023-March 31, 2023:

 Provided case management services to 13 families residing in Bexley regarding CMH services

#### **CMH Program-Home Visits and Safe Sleep**

The Children with Medical Handicaps (CMH) Public Health Nurses (PHNs) continue to provide case management to families with children on the CMH program. Staff member Hannah Buskirk, RN, joined the CMH team on March 27, 2023.

In March 2023, CMH PHNs completed 10 home visits with clients and their families. There were 4 portable cribs distributed by trained FCPH staff to families in need of a safe sleep space for their infant. Additionally, 6 Safe Sleep Assessments were conducted by



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Maternal and Child Health (MCH) staff with families who had an infant under the age of 1 in the home.

#### **Community Partnership Grants**

The PHN Led Home Visiting program continues to collaborate with Heart of Ohio Family Health with funding provided by the Franklin County Board of Commissioners. FCPH was notified of additional funding awarded to the program which will allow us to increase the number of clients being served to 120 individuals and their families. There were 14 home or telephone visits completed with clients in March 2023.

FCPH continues to partner with Restoring Our Own Through Transformation (ROOTT) through a separate Community Partnership grant opportunity provided by the Franklin County Board of Commissioners. ROOTT provides prenatal doula services to Black individuals within Franklin County.

### Advancing Health Literacy Franklin County

#### **Trainings**

Advancing Health Literacy Franklin County continues to provide training at no cost to Franklin County based organizations. In March 2023, 12 Health Literacy trainings were offered. Mental Health Literacy: It Matters! conference was held on March 31, 2023, by Columbus Public Health in partnership with Advancing Health Literacy Franklin County, Nationwide Children's Hospital and Franklin County Public Health. In total, there were almost 200 community, healthcare and public health practitioners in attendance. The intersection of mental health care and health literacy was at the core of the day.

#### Society for Public Health Educators Conference Overview

Two abstracts were accepted for the 2023 National Society for Public Health Educators (SOPHE) Conference held this year in Atlanta, Georgia. FCPH staff provided a presentation regarding our organizational health literacy EnLiven Assessment process. A brief conference summary of key highlights and lessons learned from program staff is below.

Two representatives from The Advancing Health Literacy Franklin County project, had the opportunity to present on the organizational health literacy assessment tool known as EnLiven and overall, Health Literacy project. FCPH staff presented What is your organization's health literacy potential? Lessons Learned in assessing organizational health literacy in Franklin County. This presentation focused primarily on the background of the Advancing Health Literacy Franklin County grant and action steps for participants to be able to return to their organization with ideas for how to implement an EnLiven Assessment to better their organizations health literacy.



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The Annual SOPHE conference topic this year was titled "The New Age of Civil Rights, Advocacy & Equity". Conference topic areas focused on tactical advocacy and how to advocate for policy change; defining vicarious racism which can be experienced by those who are not directly involved with the event but identify with the victim by race; the importance of representation when it comes to cultural competency; and providing practical ways public health practitioners can become social justice warriors and work towards dismantling racism.

### **Infectious Disease Section**

# COVID-19 Response Updates FCPH Epidemiology Update for COVID-19

March 24, 2023 - 10:00 AM

COVID-19 Case Data*				
	127,821 (92,066 Confirmed,			
Total Cases	35,755 Probable)			
Age Range	<1 - 105 years			
Median Age	38 years			
Gender	68,618 Female	57,994 Male		
Hospitalized (overall)	1,783			
ICU Admissions (overall)	218			
	1,237 (970 White, 13	37 Black, 32 Asian, 37		
Deaths***	Hispanic, 75 Other, 6 Unknown)			
Presumed Recovered^	125,975			
Onset Date Range	01/15/2020 - 3/13/2023			
Asymptomatic Cases	3,482			
*Data are pulled from the Ohio Disease Reporting System and are subject to change as additional				

<sup>\*</sup>Data are pulled from the Ohio Disease Reporting System and are subject to change as additional information is gathered. Some data may have a lag time based on completion of case finding at the time of this report.

APresumed recovered is defined as cases with an onset date >21 days prior who are not deceased. If onset date is unknown, the earliest known date associated with the case is used as a substitute for the date of illness onset.

Cases in Franklin County Public Health Jurisdiction Residing in Another County				
Franklin	115,699			
Union	898			
Fairfield	5,338			
Delaware	2,172			
Licking	3,465			

#### **COVID-19 County Level for Franklin County**

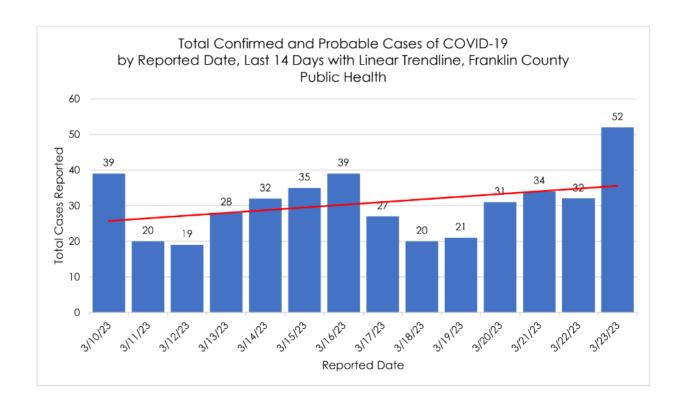
https://www.cdc.gov/coronavirus/2019-ncov/your-health/covid-by-county.html

<sup>\*\*</sup> Probable case counts added to the data as of 4/14/2020.

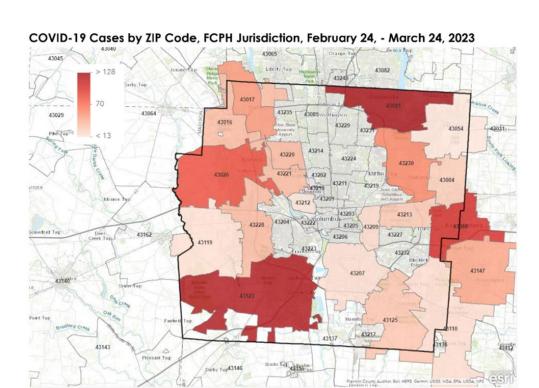
<sup>\*\*\*</sup>Cause of death has not yet been determined.

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7-Day Time Period	Total Reported New	New COVID-19	% Staffed Inpatient	
	COVID-19 Cases Per	Hospital Admissions	Beds Occupied By	
	100,000 People During	Per 100,000 People	COVID-19 Patients	
	the 7-Day Time Period			
02 March – 08 March 2023	64.70	5.7	1.9%	
09 March – 15 March 2023	62.27	5.1	1.7%	
16 March – 22 March 2023	54.3	5.6	1.9%	
General Guidance:  CDC updated on 8/11/22	decide which prevention actions to take based on the latest			



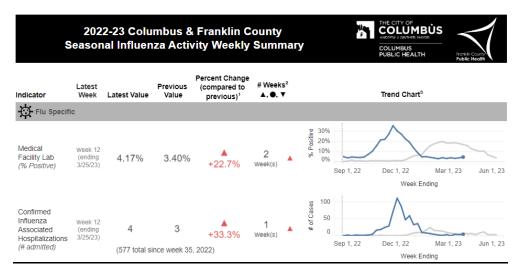
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### 2022-2023 Franklin County Seasonal Influenza Activity

Local influenza activity remains low at this time with decreases in laboratory testing activity and Influenza Associated Hospitalizations (IAH) case reports.

### FRANKLIN COUNTY- LOCAL ACTIVITY

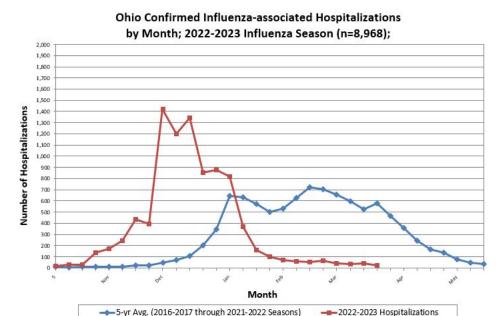


Source: https://public.tableau.com/views/Flu\_Surveillance/Dashboard-FluActivity?:language=en&:display\_count=y&:origin=viz\_share\_link&:showVizHome=no

### **OHIO-STATE ACTIVITY**

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ODH Seasonal Influenza Activity report: <a href="https://odh.ohio.gov/know-our-programs/seasonal-influenza/influenza/influenza/influenza-dashboard/">https://odh.ohio.gov/know-our-programs/seasonal-influenza/influenza/influenza-dashboard</a>



#### State, Regional, and National Data:

#### Ohio Surveillance Data:

- The U.S. World Health Organization (WHO) Collaborating Laboratories System and the National Respiratory and Enteric Virus Surveillance System (NREVSS) has reported 149,370 tests for influenza performed at participating facilities; of these, 1,088 tested positive for influenza A(H1N1pdm09), 1,255 for influenza A(H3N2), 21,563 for influenza A (subtyping not performed), and 166 for influenza B (through 03/25/2023).
- Five influenza-associated pediatric mortalities have been reported so far during the 2022-2023 influenza season (through 03/25/2023).
- No novel influenza A virus infections have been reported so far during the 2022-2023 influenza season (through 03/25/2023).
- Incidence of confirmed influenza-associated hospitalizations in 2022-2023 season = 8,968 (through 03/25/2023).

HHS Regional Surveillance Data\*: During week 11 (March 12<sup>th</sup> - March 18<sup>th</sup>, 2023), the percentage of outpatient visits for influenza-like illness (ILI) in Region 5 (Ohio is in Region 5) was 1.8%, which is **below** the regional baseline of 2.5%.

Source: https://odh.ohio.gov/wps/portal/gov/odh/know-our-programs/seasonal-influenza/ohio-flu-activity/ohio-flu-activity

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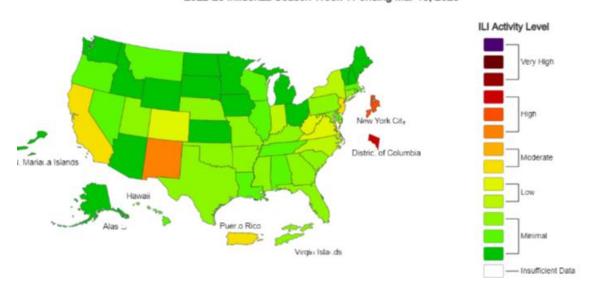
### **NATIONAL ACTIVITY**

National Surveillance Data\*: During 11 (March 12<sup>th</sup> - March 18<sup>th</sup>, 2023), the majority of U.S. states reported Minimal or Low activity, though some states are reporting Moderate or High activity. The percentage of outpatient visits for ILI was 2.4%, which is at the national baseline of 2.4%. Three of 10 HHS regions reported ILI levels at or above their region-specific baseline level.

National activity levels and more information can be found at the following CDC pages:

- http://www.cdc.gov/flu/weekly/usmap.htm
- http://www.cdc.gov/flu/

2022-23 Influenza Season Week 11 ending Mar 18, 2023



Source: <a href="https://www.cdc.gov/flu/weekly/index.htm">https://www.cdc.gov/flu/weekly/index.htm</a>

#### Rise In Group A Strep Infections with US

Bacteria called group A *Streptococcus* (group A strep) can cause many different infections. These infections range from minor illnesses to very serious and deadly disease.

Group A strep bacteria can cause a range of illnesses. Invasive disease means that germs invade parts of the body that are normally free from germs. When this happens, disease is usually very severe, requiring care in a hospital and even causing death in some cases. Necrotizing fasciitis and streptococcal toxic shock syndrome are examples of iGAS infections.

In addition to causing uncommon but severe and invasive infections, group A strep bacteria cause common and generally mild illnesses like strep throat and scarlet fever.

#### iGAS infections in 2022

Preliminary 2022 data indicated that iGAS infection levels in children



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- Increased earlier in the season (September through November) than in a typical year
- Occurred during the same time as increases in respiratory viruses (e.g., influenza, respiratory syncytial virus [RSV]) and less severe group A strep infections
- Were higher than pre-COVID-19 pandemic levels in some areas of the country

#### iGAS infections in 2023

Preliminary 2023 data indicate

- iGAS infections have remained high in children in some areas of the country even after respiratory viruses decreased in those areas
  - This is occurring during the time when group A strep infections are normally highest (December through April)
- Some areas of the country have also seen an increase in iGAS infections in adults, particularly in those aged 65 years or older

CDC tracks invasive group A strep infections through <u>Active Bacterial Core surveillance (ABCs)</u>, a population-based, active- and laboratory-based surveillance system. This means local and state health departments routinely contact laboratories to identify all cases, then report those cases to CDC. CDC does not track non-invasive group A strep infections.

https://www.cdc.gov/abcs/methodology/surv-pop.html

### **Candida Auris**

Candida auris is an emerging fungus that presents a serious global health threat. CDC is concerned about C. auris for three main reasons:

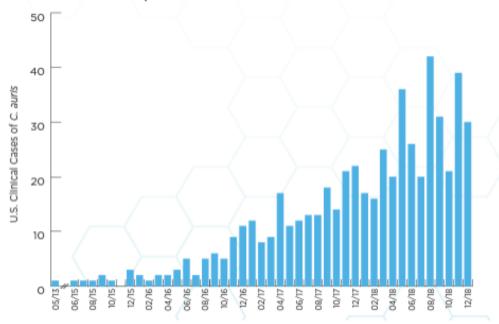
- 1. It is often multidrug-resistant, meaning that it is resistant to multiple antifungal drugs commonly used to treat *Candida* infections. Some strains are resistant to all three available classes of antifungals.
- 2. It is difficult to identify with standard laboratory methods, and it can be misidentified in labs without specific technology. Misidentification may lead to inappropriate management.
- 3. It has caused outbreaks in healthcare settings. For this reason, it is important to quickly identify *C. auris* in a hospitalized patient so that healthcare facilities can take special precautions to stop its spread.

CDC encourages all U.S. laboratory staff who identify C. auris to notify their state or local public health authorities

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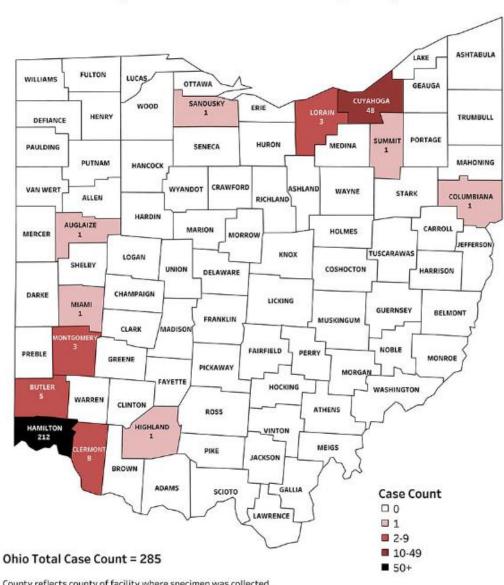
### **CASES OVER TIME**

*C. auris* began spreading in the United States in 2015. Reported cases increased 318% in 2018 when compared to the average number of cases reported in 2015 to 2017.



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# Number of Candida auris cases May 13, 2020 - November 18, 2022 (includes clinical and screening cases)



County reflects county of facility where specimen was collected. All data are preliminary and subject to change. Source: Ohio Disease Reporting System

Respectfully submitted by Alex Jones, Assistant Health Commissioner/Director of Prevention & Wellness, April 11, 2023.