

Agenda
Health & Human Services Committee
West Olive Administration Building – Board Room
12220 Fillmore Street, West Olive, Michigan 49460
Wednesday, August 11, 2010
8:30 a.m.

Consent Items:

1. Approval of the Agenda.
2. Approval of the Minutes from the July 14, 2010 meeting.

Action Items:

None

Discussion Items:

3. Children's Special Health Care Services System Update, presented by: Janine Chittenden, Clinic Health Care Team Supervisor
4. Pertussis and Pertussis in Ottawa County Update -- presented by: Dr. Paul Heidel, Medical Director
5. Department Updates

Adjournment

Comments on the day's business are to be limited to three (3) minutes.

HEALTH & HUMAN SERVICES COMMITTEE

Proposed Minutes

DATE: July 14, 2010

TIME: 8:30 a.m.

PLACE: Fillmore Street Complex

PRESENT: Robert Karsten, Matthew Hehl, James Holtrop, James Holtvluwer, Joyce Kortman

STAFF & GUESTS: Keith Van Beek, Assistant Administrator; Lori Catalino, Deputy Clerk; Alan Vanderberg, Administrator; Greg Rappleye, Corporation Counsel; Paul Lindemuth, Juvenile Services; Betty Claar, Juvenile Services; Amy Oosterink, Health Dept.; Pam Curtis, Senior Resources; Amy Florea, Senior Resources; Adam London, Environmental Health Services Manager; Dr. Paul Heidel, Medical Director; Laura Schleede, MSU Extension; Bill Raymond, Michigan Works!/CAA Director; Donna Cornwell, Human Services Coordinating Council Director; Perdasil Foster Reynolds, GVSU

SUBJECT: CONSENT ITEMS

HHS 10-012 Motion: To approve the agenda of today as presented and amended adding Action Item 4A – Election of Vice-Chair and to approve the minutes of the June 9, 2010, meeting as presented.
Moved by: Holtvluwer UNANIMOUS

SUBJECT: SENIOR RESOURCES ANNUAL IMPLEMENTATION PLAN FY 2011

HHS 10-013 Motion: To approve and forward to the Board of Commissioners the Resolution approving the Senior Resources Annual Implementation Plan FY 2011.
Moved by: Holtvluwer UNANIMOUS

SUBJECT: SMOKE FREE AIR COMPLAINTS – PROPOSED NEW FEW STRUCTURE FOR NON-FOOD ESTABLISHMENT

HHS 10-014 Motion: To approve and forward to the Finance and Administration Committee the Resolution establishing fees and procedures for enforcement of the County non-smoking regulation and State non-smoking law. (MCL 333.12601 et seq.)
Moved by: Kortman UNANIMOUS

SUBJECT: ELECTION OF VICE-CHAIR

HHS 10-015 Motion: To nominate Matthew Hehl for Health & Human Services Vice-Chair and to cast an unanimous ballot.
Moved by: Kortman UNANIMOUS

SUBJECT: DISCUSSION ITEMS

1. Ottawa County MSU Extension Journey 4-H Youth Mentoring Program Update – An update of the 4-H Youth Mentoring program was presented by Laura Schleede.
2. Department Updates:

MI Works!/CAA – Bill Raymond reported on recent positions filled within the department and described the four new candidates. He also reported that the US Department of Labor will be coming to review the office/procedures with three other Michigan counties.

Human Services Coordinating Council – Donna Cornwell reported the new Grand Haven health clinic is going great. Hope College will be doing a study on health care for residents. There is national interest in the assessment.

Health Department – Dr. Heidel reported there have been a lot of individual cases of pertussis.

SUBJECT: ADJOURNMENT

HHS 10-016 Motion: To adjourn at 9:45 a.m.
Moved by: Hehl UNANIMOUS



PERTUSSIS

Ottawa County
Health Department

Topics

- What is pertussis?
- What does pertussis look like and sound like?
- What is the prevalence of pertussis?
- What about the vaccine?
- What is being done to prevent pertussis?
- What is the long term outlook for pertussis?

What is Pertussis?

- A bacterial disease characterized by severe coughing spells and shortness of breath, which can be fatal, particularly to infants and small children

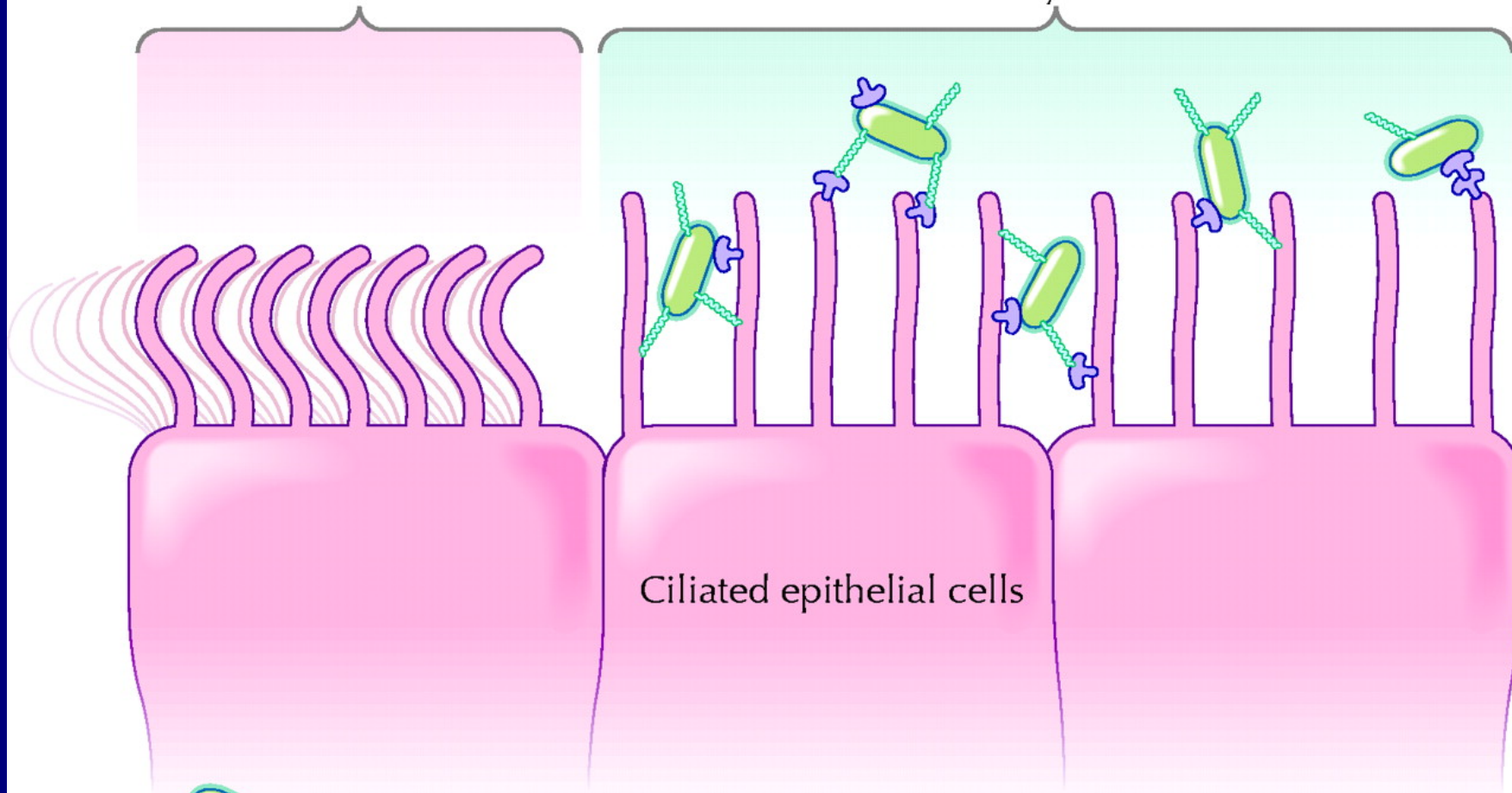
Pertussis Bacteria

- Bacteria attach to cells lining of respiratory tract
- The bacteria produces a toxin (poison)
- Toxin causes inflammation in respiratory tract
- Inflammation reduces the airway size
- Inflammation inhibits clearing of secretions




Respiratory tract lumen

Normal ciliary movement

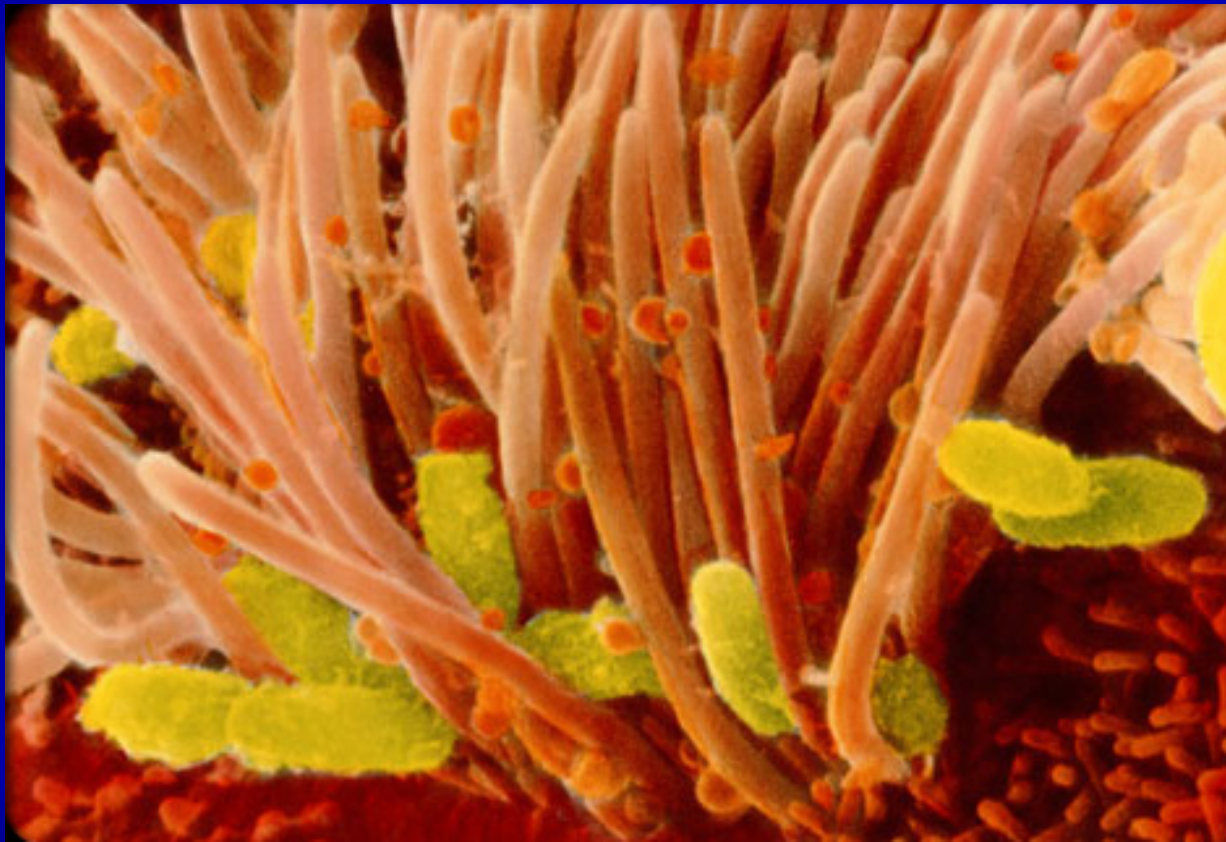
Ciliary stasis



Ciliated epithelial cells

-  *Bordetella pertussis* bacterium
-  Filamentous hemagglutinin
-  Pertussis toxin

Pertussis Bacteria



Pertussis

- Accumulated secretions produce cough
- Cough produces shortness of breath, “whoop”

What Pertussis Looks Like





What Pertussis Sounds Like

- A 3 year old child
- A 40 year old adult

3 Stages of Pertussis

(1) Catarrhal stage: 1-2 weeks

Runny nose, sneezing, low grade fever

(2) Paroxysmal cough stage: 1-6 weeks

Bursts of rapid cough, high pitched whoop

(3) Convalescence stage: weeks to months

Cough less violent, slowly disappears

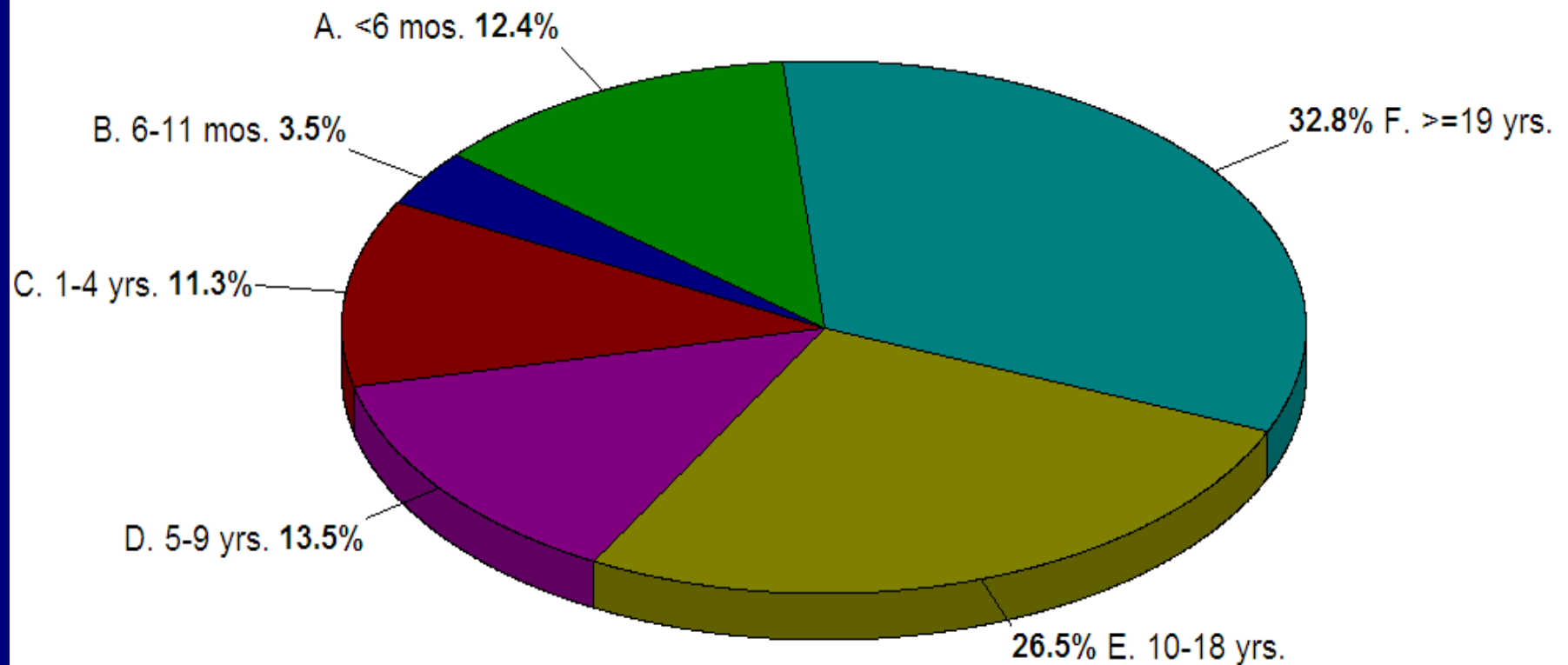
Pertussis in Children

- More serious in children, especially in infants
- Complications:
 - Pneumonia (22%)
 - Seizures (3%)
 - Encephalopathy (1%)
- 2004-2006:
 - 84 US deaths
 - 69 (84%) 3 months of age or younger
- 2002: 294,000 childhood deaths worldwide

Pertussis in Adults

- Usually milder disease than in children
- May be asymptomatic or “full blown”
- Currently almost 2/3 of cases are in adults
- 25% of childhood cases come from adults

Pertussis in Michigan, 2009

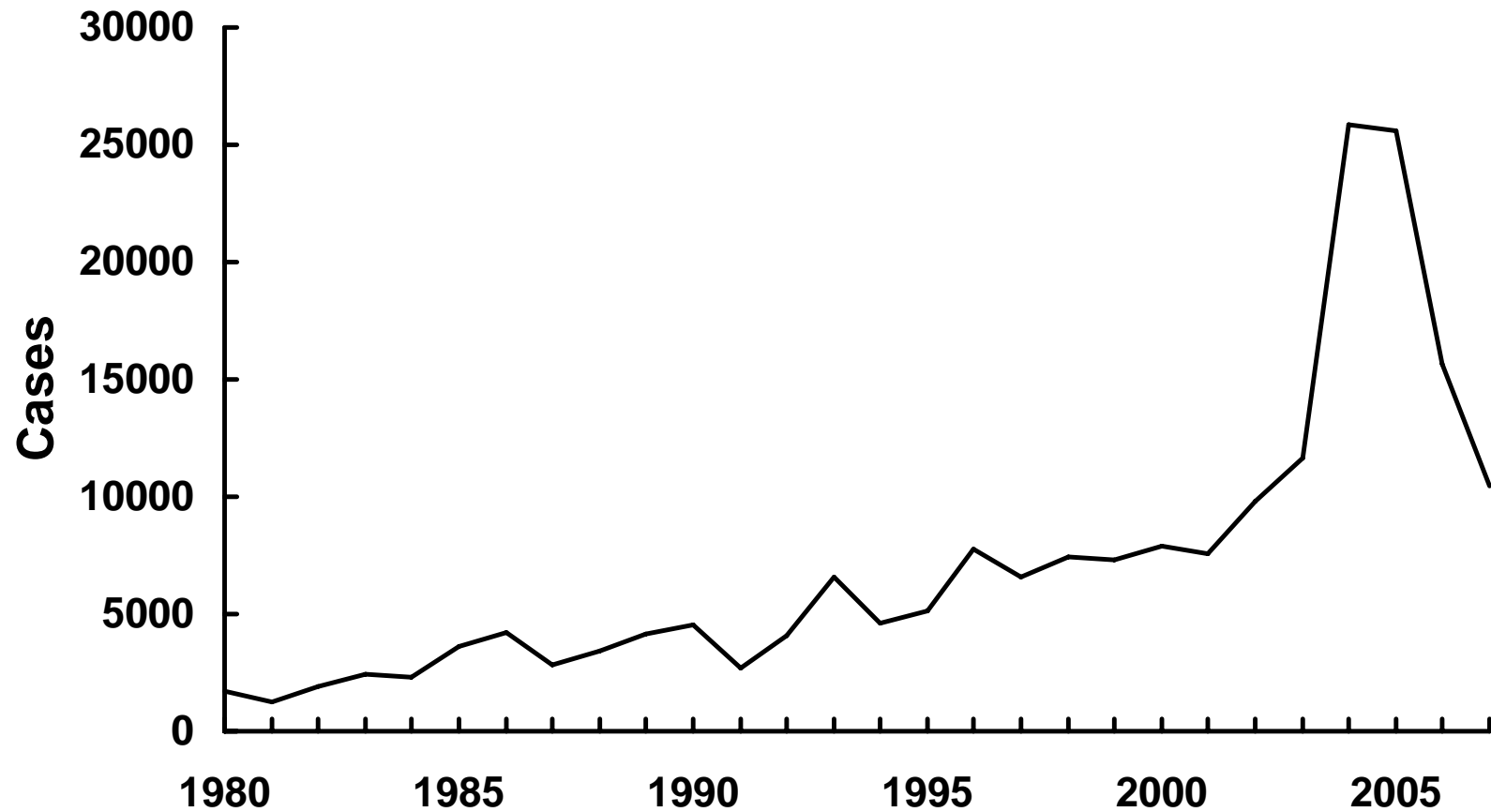


History of Pertussis

- Pre-1940's: 200,000 US cases annually
- Pertussis vaccine introduced in the 1940s
- 1960: 15,000 cases annually
- 1970: 5,000 cases annually
- 1980: 2,900 cases annually
- 1980's: cases began increasing
- 2005: more than 25,000 cases

- Last 52 weeks: 13,848 cases in the US

US Pertussis, 1980-2007



Top 4 “Pertussis States” in the US

- In the last 52 weeks:

Texas: 1341 cases

California: 730 cases

Ohio: 614 cases

Michigan: 441 cases

Pertussis by Counties, 1/10-7/10

- Ottawa 28 cases
- Kent 3 cases
- Allegan 8 cases
- Muskegon 11 cases

Why doesn't the vaccine work?

- “Non-vaccinated” children/adults
- Incomplete vaccination series
- Waning immunity
- Vaccine not 100% effective
- Better testing/reporting ???

28 Ottawa County Cases

- Unimmunized: 8
 - 2 were too young to be immunized
- Immunized (up-to-date): 14
- Partially immunized: 4
- Status unknown: 2

Vaccination schedule

- DTaP for children:
 - 2, 4, 6 months
 - 15-18 months
 - 4-6 years
- Tdap for adolescents and adults:
 - 10-64 years

What needs to be done?

- Stay current on immunizations!
 - Children need the full pertussis series
 - Adults need to get the Tdap booster
- Increased pertussis awareness by physicians
 - Diagnosis
 - Reporting
 - Treatment

What is being done?

- OCHD informing the public, medical community
- Pertussis information press release
- “Medical alerts” to community partners:
 - Hospitals
 - Physicians
 - Caregivers
 - Emergency first responders
 - Schools
- “Contact” notification by OCHD

Long Term Outlook



QUESTIONS ?