

Presentation to the Harford County Council and Board of Health



Public Health
Prevent. Promote. Protect.

**Harford County
Health Department**

Susan Kelly, Health Officer

October 6, 2015

HEALTHY HARFORD DAY





Public Health
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**Harford County
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NALOXONE CERTIFICATION & TRAINING PROGRAM

UPCOMING TRAININGS

October 8, 2015: Harford County Health Department @ 7:00pm

October 19, 2015: Harford Memorial Hospital @ 12:00pm

November 3, 2015: University of Maryland Upper Chesapeake Hospital @ 12:00pm

To register, please contact Wendy Kanely at the
Harford County Health Department · Division of Behavioral Health
120 S. Hays Street · 3rd floor · Bel Air, Maryland 21014
Ph. 410-877-2355 · Email: wendy.kanely@maryland.gov

What is Naloxone? (Narcan®)

- Reverses opioid overdose by **restoring breathing**
- No potential for abuse or getting high
- No effect on someone who hasn't taken opioids
- Side effects are minimal and rare
- Safe for children and pregnant women
- Intramuscular, intranasal or intravenous
- Wears off in 30 - 90 minutes

***Naloxone is only effective in reversing
opioid overdoses***

Naloxone Certification and Usage

Number trained

Law Enforcement:	
-Sheriff's Office	200
-Aberdeen Police	29
-Bel Air Police	27
-Havre de Grace Police	14
Occupation:	369
Family member:	153
Social experience:	109
<u>Volunteer work:</u>	<u>38</u>
TOTAL	939

Number of Naloxone Usages

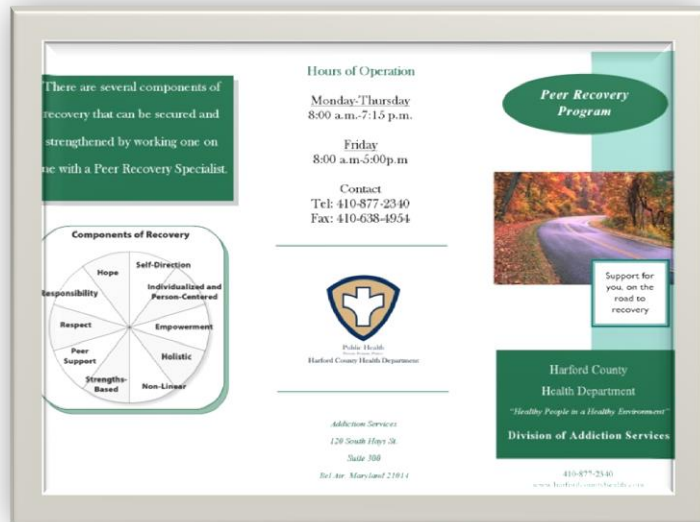
Sheriff's Office	26
Aberdeen Police	4
Occupation	1
<u>Family member</u>	<u>1</u>
TOTAL	32



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Peer Recovery Specialists & The Maryland Overdose Response Program

- ❖ **Overdose Response Calls** – As part of the Harford County Health Department's effort to minimize the devastation of the health epidemic effecting the state of Maryland. Our Peer Recovery Specialists are making monthly outreach calls to individuals identified as receiving Narcan™ in response to an opioid overdose crisis. During these telephone outreach sessions peers speak with individuals and family members of those individuals who were administered Narcan. This is an attempt to link them with treatment and recovery services. As a follow up, they are sent recovery materials in the mail. In this way, we hope that everyone in the household will have access to the Recovery Services materials if they ever need or want them. (See Examples Below)



Recovery Services Brochure



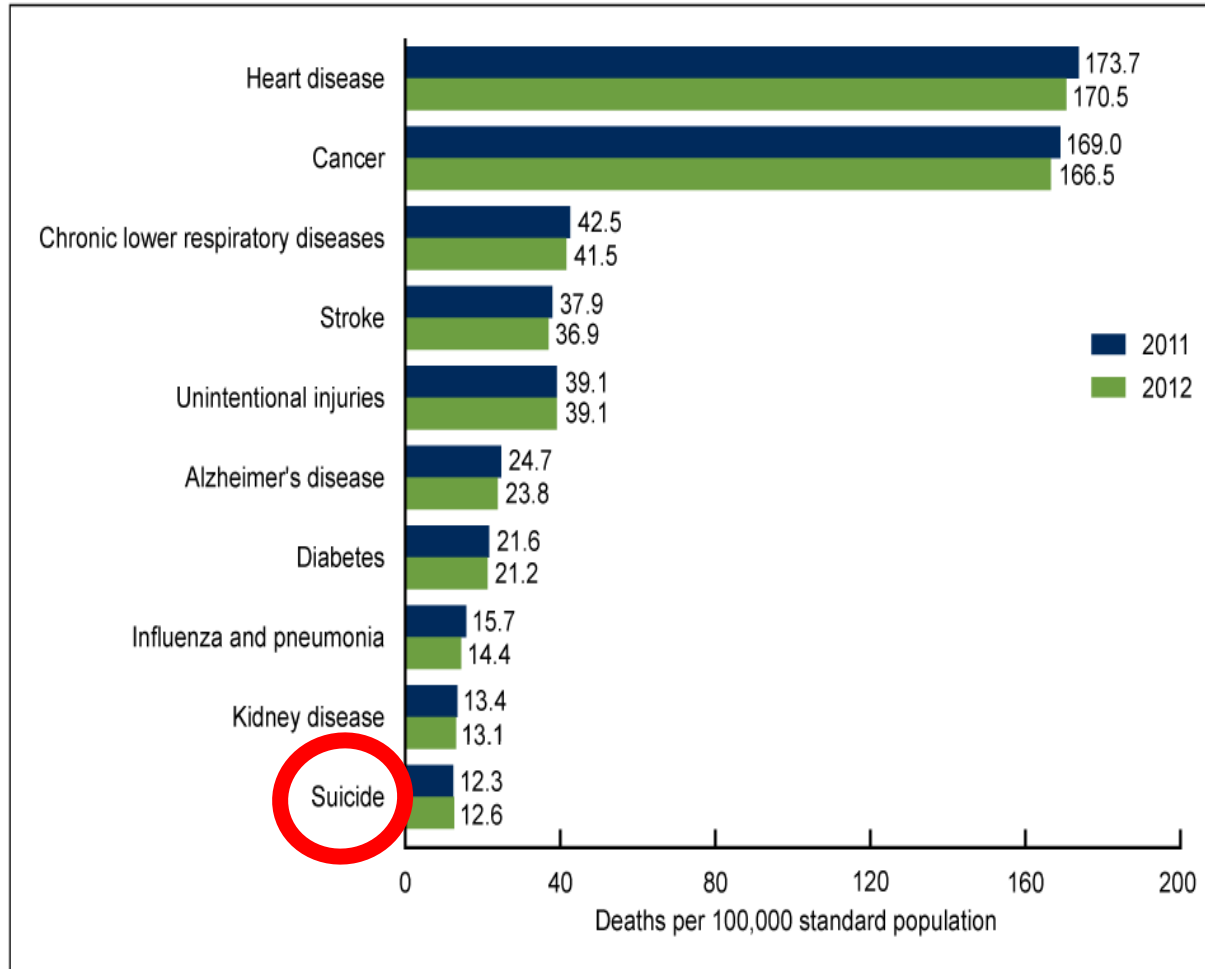
Ready For Help Card

Suicide Prevention

The LHC Suicide Prevention Workgroup

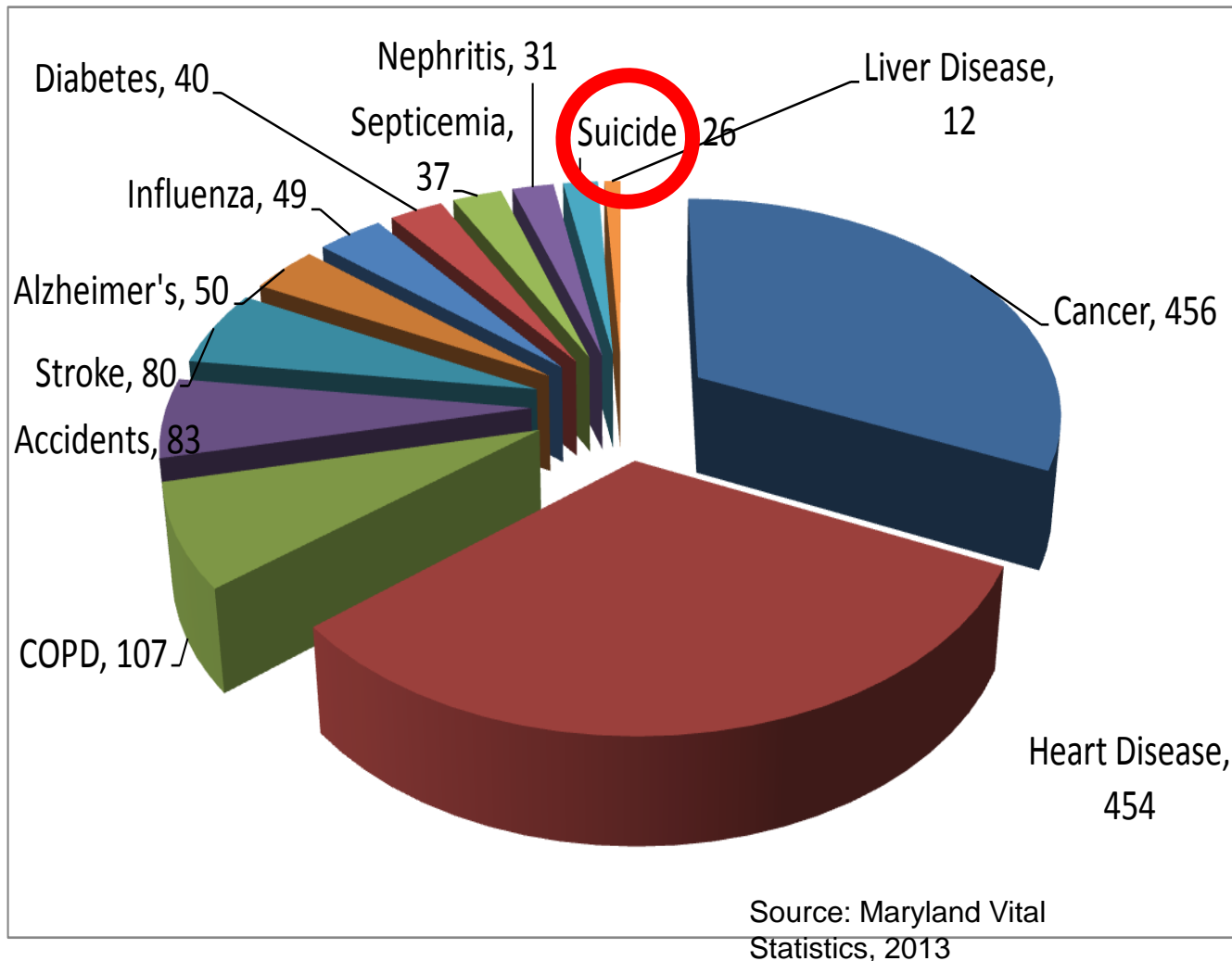
What are the major causes of death in the U.S.?

Figure 3. Age-adjusted death rates for the 10 leading causes of death in 2012: United States, 2011–2012

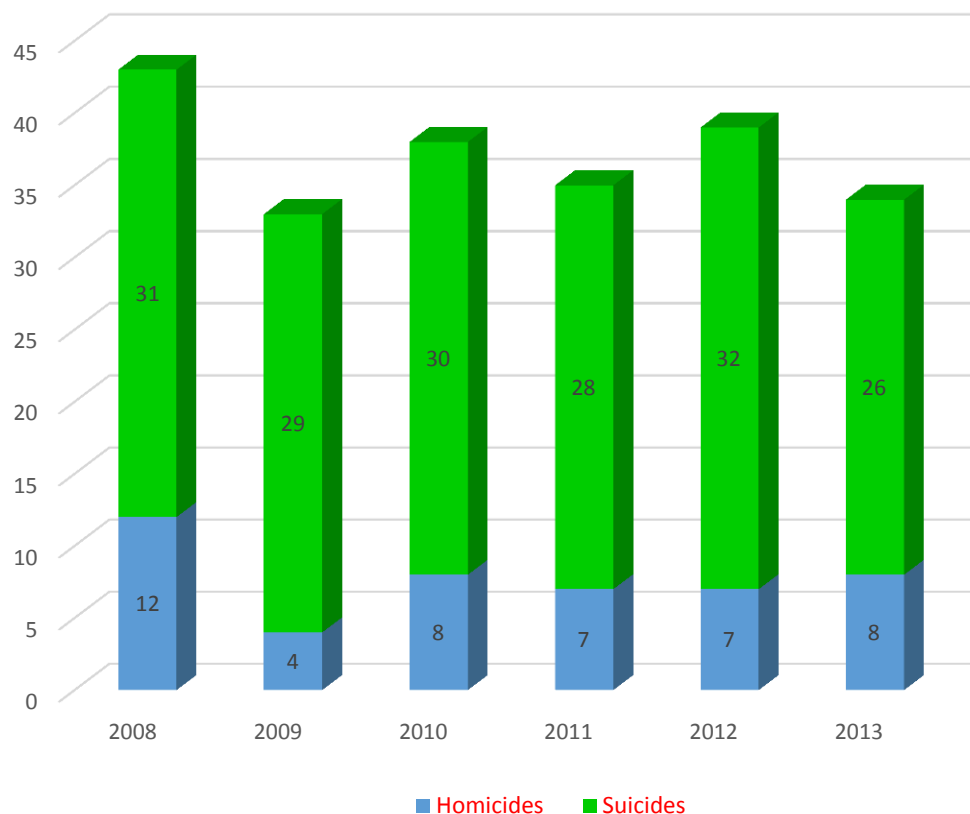


NOTE: Access data table for Figure 3 at: http://www.cdc.gov/nchs/data/databriefs/db168_table.pdf#1.
SOURCE: CDC/NCHS, National Vital Statistics System, Mortality.

What are the major causes of death in Harford County?



Harford County Homicide vs. Suicide Completions 2008- 2013

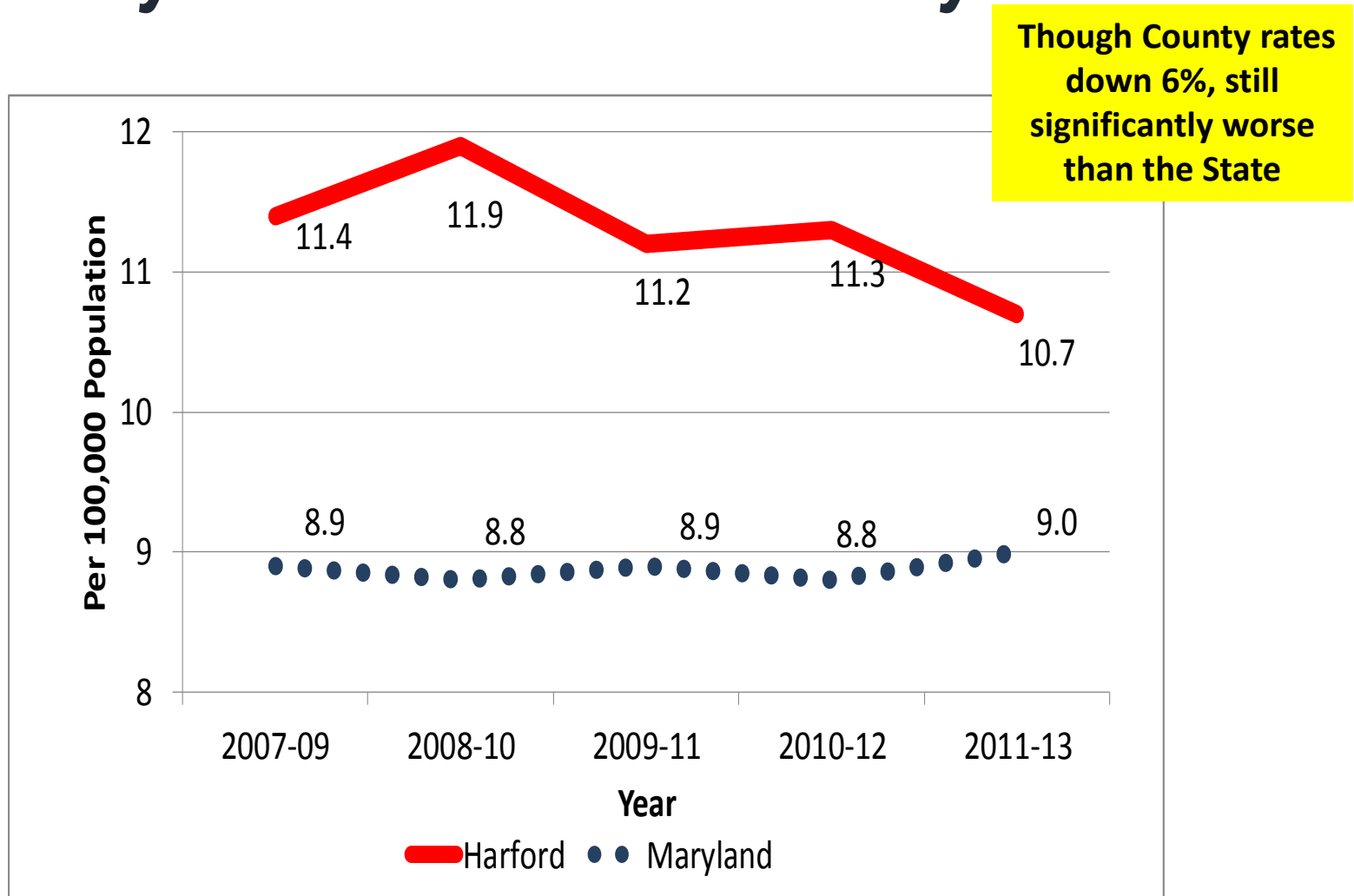


Data Source: 2014 State of Maryland Vital Statistics Administration
Prepared: August, 2015



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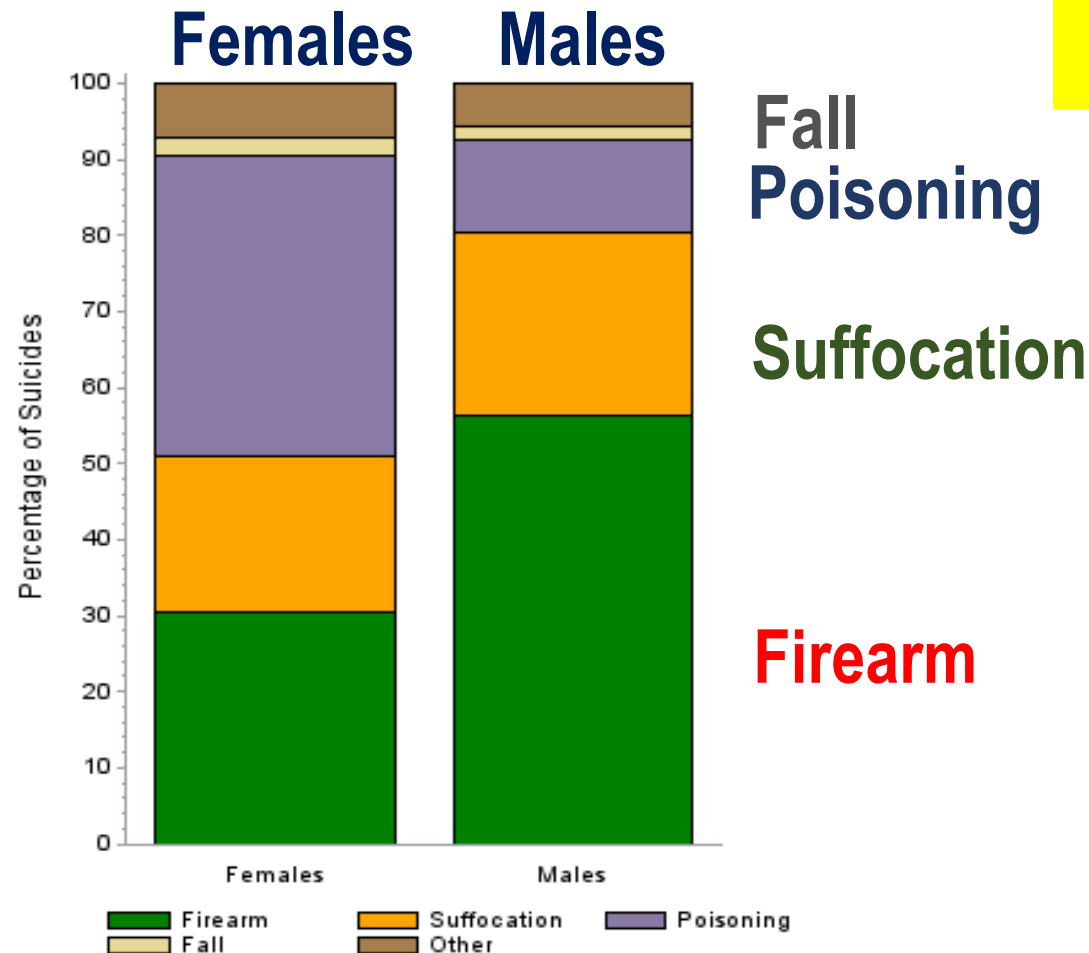
How are suicide rates trending in Maryland and Harford County?



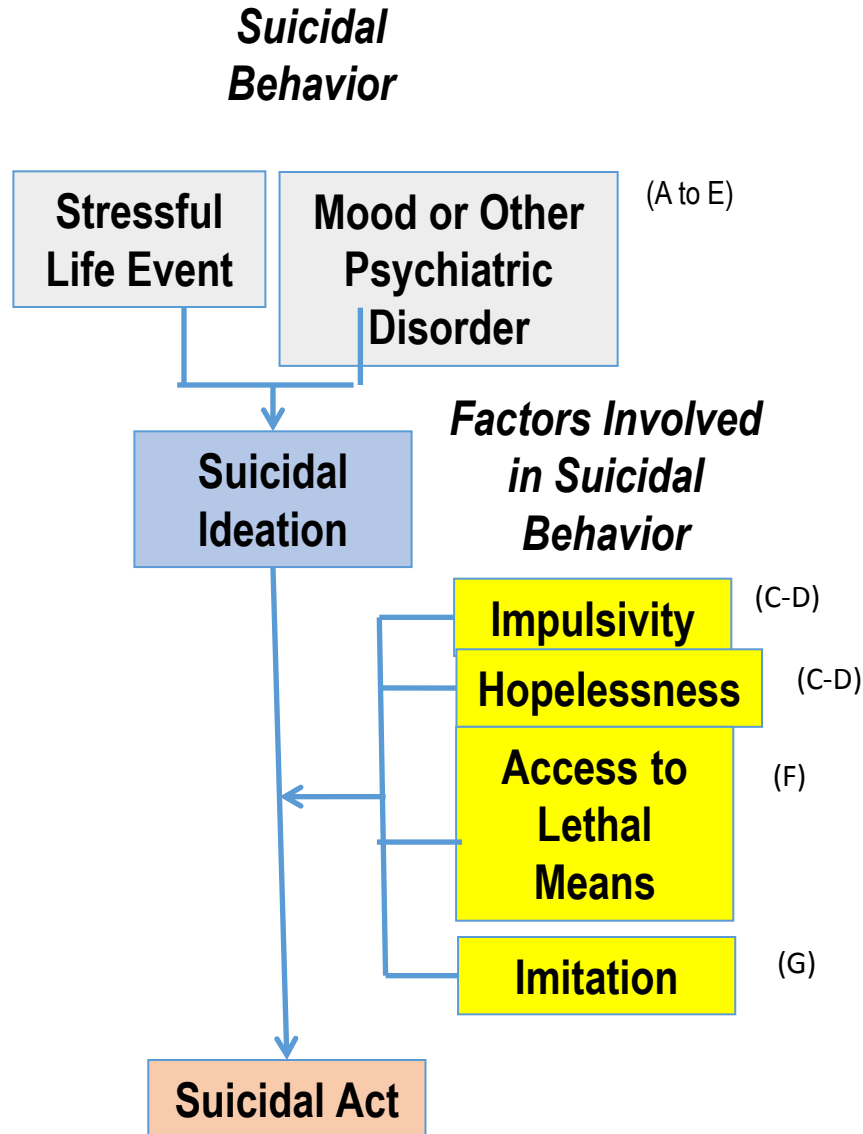
* Age-Adjusted Rates
Source: Maryland Vital
Statistics Reports

What means are most commonly used for suicide, by gender?

Firearms
most
commonly
used



Prevention and Intervention Strategies



Prevention Interventions

(A) Education/Awareness

- Primary Care Physicians
- Community Gatekeepers
- General Public

(B) Screening for High-Risk Individuals

Treatment

(C) Pharmacotherapy (medication)

(D) Psychotherapy

(E) Follow Up Care after a Suicide Attempt

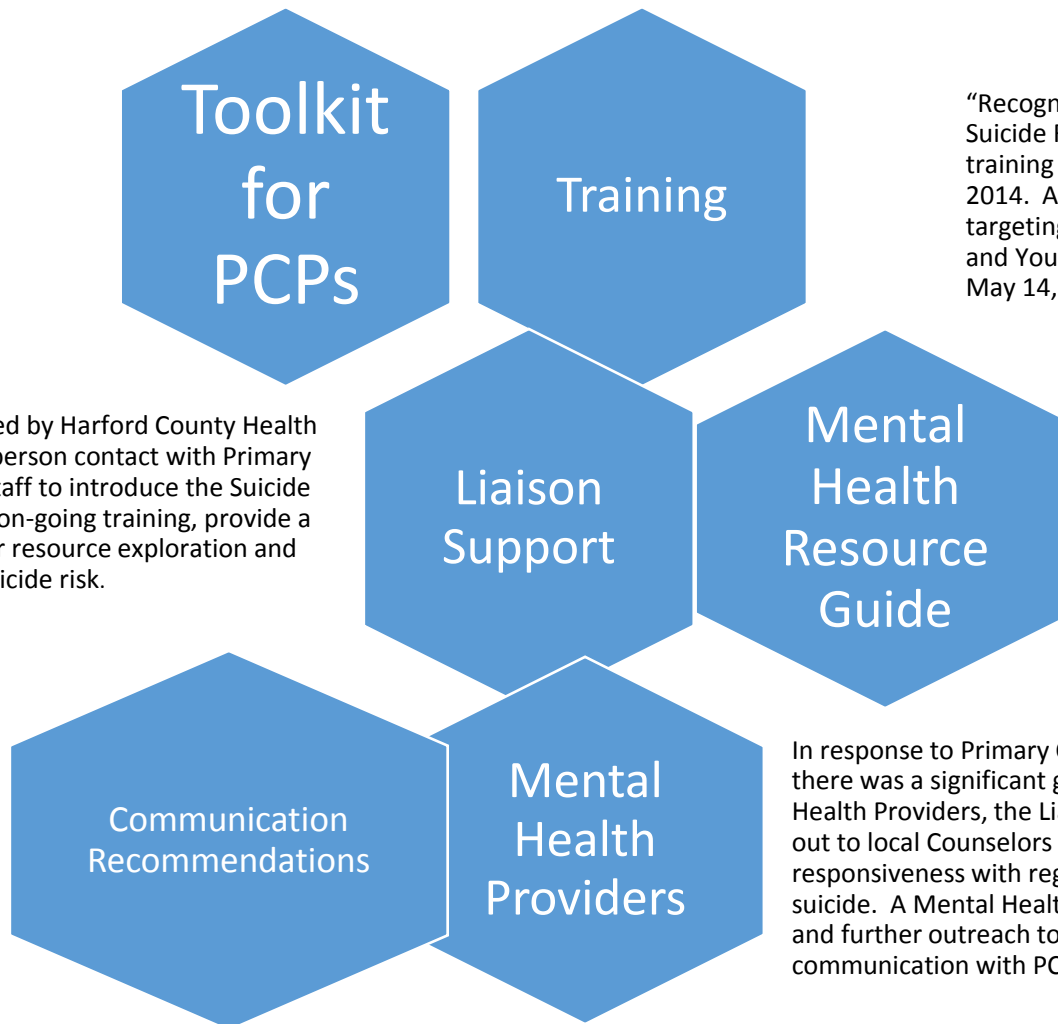
Other

(F) Restriction of Access to Lethal Means

(G) Media Reporting Guidelines for Suicide

Source: From Mann et al. "Suicide Prevention Strategies, A Systematic Review," JAMA, 10/26/05 – Review of 5020 articles from 1966-2005

Primary Care Physician Outreach - The First Initiative of the Behavioral Health Workgroup



A Physician Liaison was hired by Harford County Health Department to provide in-person contact with Primary Care Physicians and their staff to introduce the Suicide Prevention Initiative, offer on-going training, provide a "Toolkit" to providers, offer resource exploration and encourage awareness of suicide risk.

"Recognizing and Responding to Suicide Risk in Primary Care" training was offered in March 2014. A follow up training targeting Providers serving Youth and Young Adults was held on May 14, 2015

In response to Primary Care Providers who felt that there was a significant gap between PCPs and Mental Health Providers, the Liaison and Workgroup reached out to local Counselors and Therapists to encourage responsiveness with regard to PCP patients at risk of suicide. A Mental Health Resource Guide was created and further outreach to MH Providers with regard to communication with PCP is planned.

The next initiative of the Workgroup....

Training 12 Suicide Prevention Champions in QPR –

The QPR (Question, Persuade, and Refer) Gatekeeper Training for Suicide Prevention is a brief educational program designed to teach “Gatekeepers” -- those who are strategically positioned in communities to recognize and refer someone at risk of suicide (e.g., parents, friends, neighbors, teachers, employers, pastors, coaches, caseworkers, police officers)--the warning signs of a suicide crisis and how to respond by following three steps:

- **Question** the individual's desire or intent regarding suicide
- **Persuade** the person to seek and accept help
- **Refer** the person to appropriate resources

These Champions will then offer QPR Gatekeeper Training to community partners free-of-charge or for the price of materials only (under

The Efforts of the Workgroup Continue....

Defining a Strategy for Harford County for Suicide Prevention

- Promoting suicide awareness and prevention via Social Media
- Continuing Mental Health First Aid training
- Supporting the Yellow Ribbon Program in Harford County Public Schools and in John Carroll School
- Partnering with and supporting community-based groups that are raising awareness about and reducing the stigma of mental illness and suicide risk
- Reducing access to lethal means (outreach and education to therapists and counselors about lethal means reduction, increasing protective measures at key locations in Bel Air and Harford County)
- Working with media to develop guidelines for reporting suicides or issues of mental illness and always providing hotline and resource information
- Continuing to encourage primary care providers of adults and youth to include a brief depression/suicide screening in annual exams or sports physicals
- Working to establish a Suicide Fatality Review Board

Resources and Referrals

- **Local:** Harford County Mobile Crisis Team 410-638-5248
- **State:** Maryland Crisis Hotline 1-800-422-0009
- **National:** Nat'l Suicide Prevention Lifeline 1-800-273-TALK
- **Online:** American Foundation for Suicide Prevention
www.afsp.org

Other Community Resources

- Employee Assistance Program counseling through an employer
- United Way : 211
- Family Navigators : 410-420-9880
- Your Primary Care Provider
- Local Mental Health/Behavioral Health Counselors - A Harford County Behavioral Health Resource Guide can be found on the Health Department website <http://harfordcountyhealth.com/>
- Your church, synagogue or faith community
- 911 or Your Local Hospital

If you need help, seek help.
Treatment works.



**Flu can kill 49,000
people in one year.**

FLU SAFETY



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Keep you and your family **SAFE** by getting the flu vaccine.

STAY HOME AND AVOID OTHERS IF YOU BECOME ILL.

Flu Symptoms

Fever

Cough

Runny/stuffy nose

Body aches and chills

Diarrhea

Tiredness/weakness

Headache

Vomiting

Flu Toolkit

Juice and liquids (no caffeine)

Hand sanitizer
(soap and water)

Fever reducing medicine
(ibuprofen or acetaminophen)

Thermometer (digital)

Alcohol wipes
(clean thermometer)

Tissues

Household disinfectant
(bleach wipes)

Protection

Get vaccinated

Cover mouth and nose
when coughing or sneezing

Wash hands frequently

Do not touch your mouth,
eyes or nose (use a tissue)

Use disinfectants



For more information regarding the flu,
visit www.harfordcountyhealth.com

410.838.1500



You Can PREVENT THE FLU

1. Avoid close contact.

Avoid close contact with people who are sick. When you are sick, keep your distance from others to protect them from getting sick too.

2. Stay home when you are sick.

If possible, stay home from work, school, and errands when you are sick. You will help prevent others from catching your illness.

3. Cover your mouth and nose.

Cover your mouth and nose with a tissue when coughing or sneezing. It may prevent those around you from getting sick.

4. Clean your hands.

Washing your hands often will help protect you from germs.

5. Avoid touching your eyes, nose or mouth.

Germs are often spread when a person touches something that is contaminated with germs and then touches his or her eyes, nose, or mouth.

6. Practice other good health habits.

Get plenty of sleep, be physically active, manage your stress, drink plenty of fluids, and eat nutritious food.



Avian Influenza

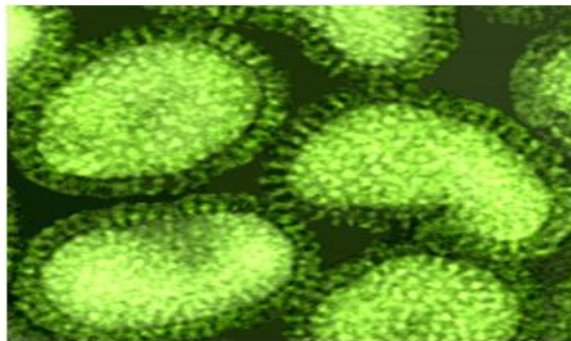


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What is Avian Influenza?

- Influenzas are broadly divided into three types: A, B and C.
- Type A includes most human and all avian influenza viruses.
- Avian influenza is a virus that is naturally found in waterfowl and some species of shorebirds.



High and Low Pathogenic Strains

- Avian influenza is broadly divided into highly pathogenic and low pathogenic strains based on its ability to cause disease in poultry.
- **Low pathogenic** strains cause natural infection in waterfowl with minimal to no signs of illness in domestic poultry and wild birds.
- **Highly pathogenic** strains rarely cause disease in waterfowl but these birds can transmit it to domestic poultry where it can cause severe disease with high case mortality (death).

Birds with Avian Influenza

- Avian influenza is uncommon in most commercial poultry flocks in the US.
- It is most often identified in poultry raised outdoors or those that intermingle with or are exposed to wild birds or their droppings.



How is Avian Influenza Transmitted?

- Avian influenza is most often spread by direct contact between infected birds and healthy birds.
- It may be spread indirectly through contact with contaminated equipment and biological secretions and/or excretions.

The spread of avian influenza between poultry facilities almost always results from the movement of infected birds or contaminated people and equipment (including clothing, boots, and vehicles).

Where is the virus found in the bird?

- Nares (nostrils)
- Mouth
- Eyes
- Droppings



Contact with contaminated droppings is the most common means of bird to bird transmission, although airborne secretions are another means of transmission, especially in poultry houses.

Avian Influenza in the US

- In December 2014, the USDA confirmed the presence of highly pathogenic avian influenza (H5) viruses in both domestic and wild birds in the US.
- The H5N1 virus is a new mixed virus that is genetically different from the Asian avian H5N1 viruses that have caused human infections in Asia and Africa
- **NO human infections with these viruses have been detected in the US.**

Where did the virus come from?

- The virus most likely came from Asia, where wild ducks and geese have developed a resistance to the avian influenza.
- Birds in the United States have not yet developed this resistance and therefore the virus is fatal for them.

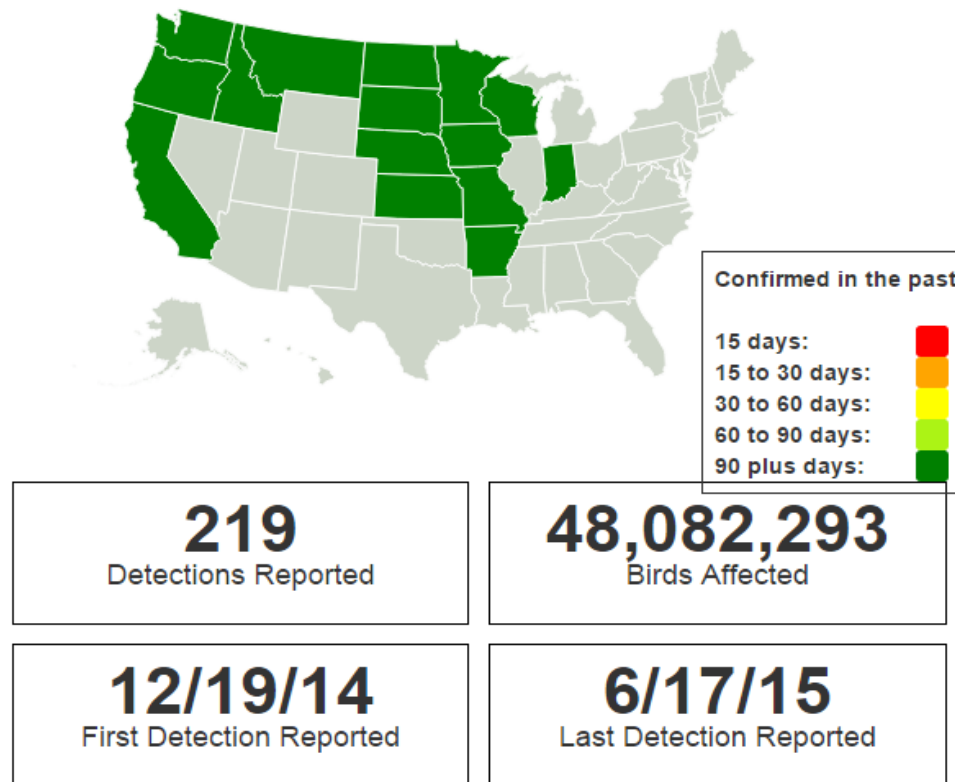


Why is avian influenza a concern?

- Low pathogenic viruses may evolve into highly pathogenic viruses.
- Highly pathogenic viruses may spread rapidly, resulting in significant illness and death among our poultry.
- There could be a significant economic impact due to the lower number of available poultry (meat and eggs)
- Avian influenza could at some point be transmitted to humans if the virus mutates (shifts or drifts).

USDA Reports US Cases of Avian Influenza

Update on Avian Influenza Findings Poultry Findings Confirmed by USDA's National Veterinary Services Laboratories



How do we protect our poultry workers?

Before an outbreak:

- Response planning
- Training workers
- Encourage seasonal flu vaccinations

During a confirmed or suspected outbreak:

- Increase infection control practices
- Increase use of PPE
- Provide antiviral medication
- Ensure medical surveillance (watching for symptoms)

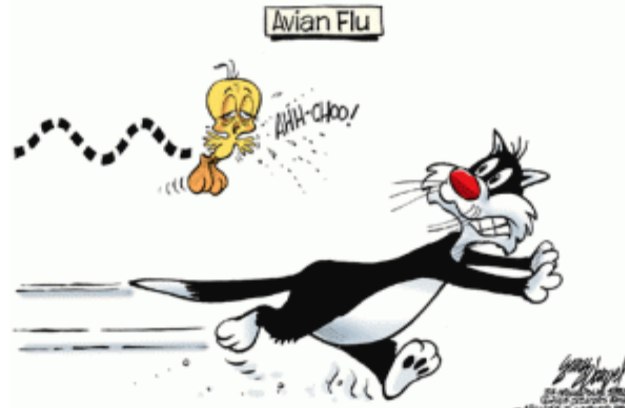
Eating Poultry and Eggs



- You cannot get avian influenza from eggs and poultry products that have been prepared and cooked properly.
- Do not rinse poultry products before cooking them, as this can spread pathogens that may be found on the raw product.
- Anytime you handle raw poultry products, you should wash your hands for 20 seconds in warm running water with soap.
- Be sure to wash cutting boards and utensils thoroughly and avoid their contact with other foods until they are cleaned and dry.

General Precautions

- People should avoid wild birds and observe them only from a distance.
- Avoid contact with domestic birds (poultry) that appear ill or have died
- Avoid contact with surfaces that appear to be contaminated with feces from wild or domestic birds.



Does the seasonal flu vaccine offer protection against avian influenza?

- NO, seasonal flu vaccination will not prevent infection with avian influenza.
- However, it can reduce the risk of co-infection with human and avian influenza viruses and can help minimize the opportunity for human and avian influenza A viruses from recombining.



H5N1

- The H5N1 avian influenza virus found in Asia, Europe, Near East and Africa has human cases associated with it.
- These cases are associated with young children and young adults who have had direct or close contact with H5N1 infected poultry or H5N1 contaminated surfaces.
- It is still considered a rare disease in humans and is not easily spread from person to person, however, 60% of those who are infected have died.

Health Department's Role in an Outbreak

If an avian influenza outbreak is identified within our poultry population, the local health department would:

- 1) Assist with the dissemination of health information
- 2) Collect data for surveillance
- 3) Assist local health providers with the medical evaluation process of those who are exposed
- 4) Offer mental health services, if required
- 5) Assist with environmental health concerns
- 6) Request additional resources
- 7) Work with local and state partners

Current DHMH actions

- Staying apprised of the national situation and guidance
- Participating in the Delmarva Avian Influenza Joint Task Force
- Communicating with other state and regional partners (MD Dept of Agriculture and Dept of Natural Resources)
- Communicating with local health departments and local community health providers

Questions/Comments

Contact us at

www.harfordcountyhealth.com



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