Sacramento County Public Health Advisory Board

Meeting Minutes June 5, 2019 (12:00 - 1:30 PM)

Meeting Location

Primary Care Center 4600 Broadway Sacramento, CA 95820 Conference Room 2020

Moderator:	Dr. Steven Orkand
Scribe:	Theresa Vinson
Board Attendees:	Jennifer Anderson, Jofil Borja, Paula Green, Steve Heath, Farla Kaufman, Barbara Law, Steven Orkand, Christina Slee, Kimberly Sloan, Kathleen Wright, Jack Zwald
Guests:	Karen Boxley, Sherri Chambers, Angela Madrid, Jennifer Messer Schmidt, Mike Unimuke,
Board Members Excused:	Sandy Damiano, Olivia Kasirye, Emanuel Petrisor, Jeff Rabinovitz, Phillip Summers
Board Members Absent:	

Guest Speakers:	David Magnino, Medical Health Operational Area Coordinator (MHOAC) Medical Health Coordination Office of Emergency Services County of Sacramento
	Steve Cantelme, Chief Sacrament Office of Emergency Services Count of Sacramento
Meeting Opened	12:00 PM

Welcome and Introductions

Dr. Orkand welcomed PHAB members, speakers, and guests.

Review of Minutes

The minutes of the May 2019 meeting were approved w/1 abstention.

PHAB Vacancies and Appointments

The Board currently has one opening (Felicia Bhe resigned in March); the Executive Committee is full.

Announcements

HIV Planning Council Appointments were approved Kimberly Sloan announced her resignation from the Public Health Advisory Board – Effective August 8, 2019

PRESENTATION Medical Health Operational Area Coordinator (MHOAC) and Program

- David Magnino, Administrator, Sacramento County Emergency Medical Services Agency (EMS)

The EMS Agency is responsible for serving as coordinator for the medical health operational area. Each county is considered an operational an area. This program allows counties to work with other counties for Behavioral Health (BH), mutual aid, private ambulance mutual aid, environmental services etc. MHOAC works in conjunction with the Office of EMS for the County, if EMS is activated for any reason in county or out, Dave responds as the MHOAC to pool resources, to assist ether within Sacramento County or another county.

The concept and processes include basic reporting, request of resources and communications. Mr. Magnino discussed the overview of the medical health coordination. The California Health and Safety Code 1797153 is the statute that requires us to designate and create the MHOAC Program. When we need assistance, we reach out to the region, which includes eleven counties from San Joaquin to the Nevada border, and north to the Oregon border. Sacramento is the biggest County in that region. If needed, we work directly with the State Office of Emergency Services, and we are responsible for assuring the development of the program, and a disaster plan for this County. There are 17 functions listed in the statute, which are assigned to different entities within the County's program.

Roles and Communication - Situational Awareness Reporting:

If an Agency experiences an unusual event that may require coordination with other medical health partners, the agency then creates an initial SitRep (Report); that report is emailed or faxed to MHOAC, health partners, DHS Director, Sacramento Office of Emergency Services.

Resource Requesting

Medical and Health System sends Resource Request including hospitals, Emergency Medical Department providers, clinics, skilled nursing facilities, laboratories, physician offices, veterinary facilities, hazardous materials handlers, drinking water systems, and others including MHOAC, PH, and EMD.

MHOAC Program Activation - Medical and Health System

Including hospitals, EMS providers, clinics, skilled nursing facilities, laboratories, physician offices, veterinary facilities, hazardous materials handlers, drinking water system and others.

MHOAC has 17 primary functions (Lead agencies vary as noted)	Lead Agency
Assessment of immediate medical needs	LEMSA
Coordination of Disaster medical and health resources	LEMSA
Coordination of patient distribution and medical evaluations	LEMSA
Coordination with in-patient and emergency care providers	LEMSA
Coordination of out-of-hospital medical care providers	LEMSA
Coordination-integration w/fire agencies, personnel, resources,	
emergency fire prehospital services	LEMSA
Coordination of providers (non-fire based prehospital emergency	
medical services)	LEMSA
Coordination/establishment of temporary field treatment sites	LEMSA
Health Surveillance/epidemiological analysis of community health status	PH
Assurance of food safety	EMD
Manage exposure to hazardous agents	EMD
Provision of coordination of mental health services	BHS
Provision of medical/health public information protective action	PH
Provision of coordination of vector control services	Yolo Vector/Sac Ag Comm
Assurance of drinking water safety	County Water Resources
Assurance of the safe management of liquid, solid, and hazardous waste	EMD Sanitation
Investigation and control of infectious diseases	PH

PRESENTATION

Sacramento County Office of Emergency Services

-Steve Cantelme, Chief, Sacramento County Office of Emergency Services (OES)

The primary purpose of EMS is to manage events that occur in Sacramento County or to assist other agencies where they have jurisdiction. Within (EMS) there are three levels of staffing; 80 people at level 1, 25-35 people at level 2, and 1-5 people at level 3 (monitoring opposed to managing the incident). In the event of a disaster EMS depends on help from within Sacramento County and partners.

Within Sacramento County there are a number of potential emergency threats; flood being the largest. There are others such as active airports, State Capital, Sacramento Delta, major rail corridors, interstates, lots of hazardous materials coming through the highways, public health events, cyber security, utilities/power, etc. Currently, there are approximately 35 plans to address all of these issues, if they were to materialize.

On a daily basis for Sacramento County, EMS manages homeland security grants via the Federal government, State and Sacramento County. EMS monitors situational awareness/incidents that may be occurring in County. Radios are consistently monitored, when needed field officers report to incidents to assist anyone needing help, and they assist with evacuations, establishing shelters, etc. The primary charge of EMS is sheltering working with PH and other jurisdictional agencies to provide shelter services.

EMS office coordination requires a regular and consistent effort to maintain relationships with partners and to coordinate services, when necessary. Having these relationships and making the effort in advance is beneficial for all parties involved to address, and resolve situations as efficiently and professionally as possible, as they occur.

The Emergency Operations Center (EOC) has a planning staff responsible for developing current disaster plans and for future situations, they are creating documents, storing information, identifying evacuation routes working closely with the Director/CEO. EOC also has oversight for briefings as well as any information shared in briefings.

Public Comment

Mercy Nurses and a representative of their union were in attendance to address concerns regarding the County masking mandate. Nurses stated the masking mandate is a trend coming from other entities trying to get people to vaccinate, and offered to present in detail to PHAB at a later date.

Announcements

Dr. Orkand and PHAB Board Member Farla Kaufman recently met with the Chiefs of Staff to the Board of Supervisors, and discussed Accreditation efforts and the letter PHAB sent on behalf of the Division of Public Health. They also discussed a letter supporting various DHS programs identified as 'at-risk' due to realignment of funding. The chiefs advised some realignments were changed, and would be reflected in the Budget which came out June 4, 2019.

Discussed proposals developed by the EMS agency, as PHAB has been advised the agency is underfunded.

Dr. Orkand stated there is a tentative date set up to meet with school representatives this summer to introduce the Impact Teen Driver Program into public schools. Attendees expected: County Superintendent of Schools, the Director of Impact Teen Driving, Dr. Orkand, Farla Kaufman. The date is tentatively set for July 24. Details for that meeting will be announced in PHAB at a later date.

Board Member Jofil Borja stated legislation regarding distracted driving (previously discussed at PHAB) has received resistance in the legislature so no new and/or recent laws have been enacted.

The meeting was adjourned at 1:30 PM

Submitted by Steven Orkand, Chair