

**DALLAS COUNTY HEALTH AND HUMAN SERVICES
PUBLIC HEALTH ADVISORY COMMITTEE**

MINUTES

OCTOBER 16, 2014

The meeting was called to order at 9:30 A.M. by Chairman, Commissioner John Wiley Price. The minutes were distributed. A motion to approve the minutes was moved by Dr. Green and second by Barry Jenkins.

Commissioner Price, Chairman requested a motion to suspend the Agenda for today's meeting in light of what is going on. A motion to suspend the Agenda was approved by Barry Jenkins and second by Perri Kittles.

Zachary Thompson, Director, thanked all of the cities for their support, and he thanked Commissioner Price, as well.

Commissioner Price stated that a lot of e-mails have been banting back and forth and that puts some of you in an awkward position. The meeting called today at 2:00 in Commissioners Court was called with you in mind. The issuance of public safety is not only for first responders, but for you to be able to manage public health in your cities.

Zachary Thompson mentioned that our hands are tied, but hopefully after the 2:00 meeting that will give HHS the tools and access needed, and we'll keep you in the loop.

Dr. Wendy Chung, MD, Chief Epidemiologist provided a summary on Ebola. Dr. Chung provided an opportunity for the group to ask questions. But, not before saying thank you to the committee and Epidemiologist staff. "It has been an incredible intense several weeks," said Dr. Chung. Many of our teams have been operating on very little sleep, working trying to deal with this outbreak. She also thanked the CDC staff for providing guidance to HHS.

Ebola is a rare and severe disease caused by infection with the Ebola virus. Symptoms may appear two to twenty-one days after exposure to Ebola; but the average number of days is eight to ten days. Signs of the Ebola illness typically includes: fever greater than 101.5, severe headache, diarrhea, stomach pain, vomiting or unexplained bleeding or bruising. "When a case is identified, there is an immediate effort to identify as best we can, all persons who have come in contact with the person during the time they were presented with symptoms," said Dr. Chung. Children and adults who were determined to have possibly been in contact with patients with Ebola are being monitored daily for twenty-one days, after exposure by the health department. Their health is being closely observed for appearance of symptoms of Ebola. Any close contacts that develop a fever or illness like symptoms will be isolated and medically evaluated. Persons who remain healthy after twenty-one days are not at risk for Ebola and can stop monitoring for fever.

Infection with Ebola can only be spread to others by direct touching blood or body fluids of a person who is sick with Ebola; or direct touching objects that have been contaminated with blood or body fluids of a person who is sick with Ebola. It is important to remember, Ebola is not spread through air or water. A person infected with Ebola is not contagious until symptoms appear. Currently, there are no known vaccines or medicines that can prevent or treat against Ebola.

There has been a lot of focus on the contact numbers identified. The numbers are posted each day in the afternoon on the CDC web-site. So far, there have been a total of 118 contacts identified that are requiring public health at risk surveillance. This is a way to communicate to the public what we're doing. All contacts at minimum are encouraged to self-monitor themselves. As of this morning, the preliminary numbers are 135 contacts. Every new health care worker who comes into contact with the patient is considered a contact. This number changes on a day-to-day basis. Low risk individuals, self-check themselves in the morning, then again in the afternoon. We complete a follow up assessment on low risk contacts. These measures are designed to make sure no one slips through the cracks.

Commissioner Price, indicated that what concerns him from a public health aspect and what we need to be asking, and Commissioner Price has been told that maybe, the PPE was not in accordance with the guidelines. Who makes the determination that the garments that are on the PPE is in fact in compliance. There's a lot of subjectivity; the last patient, she followed the guidelines.

Dr. Alexander Eastman, Disaster Medical Director, Parkland has been running Parkland's Ebola response unit. Parkland has two full-time employees dedicated to running their hospital preparedness program. Parkland's PPE package exceeds the recommendation from the CDC. Parkland felt that it was important to protect their staff. Parkland insists that we screen at every entrance to the health care system; just our emergency department alone, we have screened more than 44,000 people since the start of Ebola. The staff is very well trained. If they get someone who has a positive initial screen, they put on their PPE package. This is the low level package. For direct care givers, who would be taking much more exposure to their body fluids, Parkland built an enhanced PPE package that far exceed what CDC recommended. Our staff has gone through an eight hour intense training. Mr. Eastman mentioned that if Parkland is called upon, they are ready to go.

Commissioner Price mentioned he is going to approach the court this coming Tuesday as it relates to what Dr. Eastman is speaking about. Has that been disseminated from a regional hospital council? Commissioner Price is not hearing that someone is driving that coach. "I have a comfort level of what is going on at Parkland," said Commissioner Price. Are other hospitals into this preparedness mode?

Jimmy Stephens, Desoto stated that one thing that seems to be the biggest risk is removing the PPE. He believes that's when one of the second cases got exposure. Is there any training being done?

Commissioner Price, the first worker stated, "She had complained that there were gaps in the PPE," when she logged that complaint, she was told to use surgical tape to close the gap. Again, "where are we as a collective on the PPE?"

Tracy Casto mentioned that Parkland has a video on their web-site on how to take PPE off. **Dr. Eastman** confirmed that Parkland have to get 10,000 employees ready to wear this front line stuff as soon as possible. People are comfortable putting it on; we're teaching how to take it off.

Commissioner Price stated that Dr. Bernard, our Chief Medical Examiner, contacted him and he's asking CDC to re-evaluate their PPE, to see if it meets the standard with regards to sufficiency.

Jason Chessher asked, "What is the process of notifying the Local Health Authority of contacts that lives within his jurisdiction?" **Commissioner Price** stated that, that will be a part of the 2:00 o'clock meeting. Mr. Thompson has put it in perspective, at the end of the day we have to make those decisions. **Jason Chessher** mentioned that since our elected officials have appointed a health official, they're looking to us for information.

Dr. Eastman asked for clarification; we are going to get more details after this Public Health Declaration of Emergency meeting about contacts within our own jurisdiction? **Commissioner Price** confirmed.

Zachary Thompson informed the Committee that he would like to know which cities have a health authority, because once this is passed at 2:00 o'clock, that order only impacts the cities that do not have a health authority. The cities that have a health authority will need to utilize the same order as DCHHS in their city. If you do not have a health authority, it will defer back to Dr. Perkins.

No Committee Reports were presented

The meeting adjourned at 10:50 A.M.