San Francisco Ebola Preparedness
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- Readiness Overview
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- Community Outreach
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- Hospital Preparedness
  - Naveena Bobba, MD, Director, PH Preparedness & Response
- San Francisco Health Network Preparedness
  - Albert Yu, MD, MBA, Director, Ambulatory Care
Ebola cases by country (11/12/14)

- **Widespread transmission**
  - Guinea (1878)
  - Liberia (6822)
  - Sierra Leone (5368)

- **Imported or local transmission**
  - Mali (4)
  - United States (4)

- **Previously affected**
  - Nigeria (20)
  - Senegal (1)
  - Spain (1)
Ebola Readiness

Guided by Public Health Strategies & Incident Command System Objectives

Emergency Mgmt -- Public health -- Hospitals -- EMS -- Fire -- Police -- Labs
(Physical distance -- PPE -- Infection control -- Disinfection -- Waste Mgmt -- Corpse Mgmt)

**DETECT**
- Assessment:
  - Exposure risk
  - Exposed
  - Infected
  - Infectious
  - Symptomatic
- Outpatient setting
  1. Identify
  2. Isolate
  3. Inform

**INVESTIGATE**
- Knowledge gaps:
  - Mechanisms
  - Dynamics
  - Containment
  - Infection control
  - Biology, Nat Hist
  - Vaccine
  - Treatment

**CONTAIN**
- Monitoring for Case finding
- Case finding for Isolation
- Contact tracing for Quarantine
- Social distancing
  - Public places
  - Public travel
  - Gatherings
  - Workplace

**CARE**
- Managing patients with suspected Ebola safely and compassionately
- Providing care in a way that protects patients and HCWs
- Cleaning up safely after caring for a possible Ebola patient

Community -- Housing -- Transportation -- Workplace -- Organizations -- Health systems

Transmission mechanisms and dynamics:
Ebola complications = c x P x p x Pr(D/l) x Pr(C/D) x S

Socioecological environment
Community Outreach

Goal: To partner with community to increase knowledge about Ebola and the SFDPH response.
Community Education
October and November 2014

• Partnered with Department of Emergency Management to hold four webinars:
  - Consulates
  - Private sector
  - Public sector
  - Schools and universities
• Trained 311 supervisors
• Trained 10 health educator to provide community presentations
  - Presented to high school
  - Presented to university
• Developed guidance for SFUSD
  - Guidance for schools
  - Sample letter for parents
• Translating fact sheet translation into 4 languages: Spanish, Chinese, Vietnamese, Tagalog
• Strengthening relationships with businesses, security managers.
• Held 3 “town halls” with SFDPH staff
What you can do

Stay Informed: sfdph.org

Share Information & Resources

Care for Our Community

Get Your Flu Shot!
West Africans and West Africa communities in the United States may face stigma because the current Ebola outbreak is associated with a region of the world. Stigma can occur when people associate an infectious disease, such as Ebola, with a population, even though not everyone in that population or from that region is specifically at risk for the disease (for example, West Africans living in the United States). Communities facing stigma can make fear and anxiety worsen. We can prevent stigma by informing ourselves and others.
Hospital preparedness

- Assess and enhance healthcare readiness to receive and manage suspected and/or confirmed Ebola patients.
  - Hospitals being scheduled for onsite Ebola readiness assessments using CDPH tool.
  - Hospitals to provide information on upcoming Ebola exercise and drill activities
  - PPE survey of hospital needs

- Ongoing communications
  - Health advisories, conference calls, e-mails
  - Engagement of Executive staff, Infection Control Providers, Preparedness Coordinators, Clinical Community
Support Preparedness of the SF Health Care System (2/2)

- Provide guidance and support to the SF Emergency Medical System Agency (EMSA)
  - Assistance with developing Ebola specific plans and protocols around EMS response and transport issues
    - 911/Dispatch
    - First Responders
      - SFFD
      - Private Ambulance Companies
- Coordinate with hospitals and pre-hospital care providers in testing/drilling of suspect Ebola patient transport and hand-off
SF Health Network: Standardized Integrated Systemwide

- Educate every ambulatory care patient about contact risk
- Universal screening in a tiered approach
- Standard operating procedures
  - Ask, mask, isolate, communicate, and eliminate
- Designated treatment location and team at SFGH
- Structured PPE fitting and training for staff
- Integrated end-to-end drills
- Regular staff communication
- Network Incident Management Team
Attention All Patients

Please read the following questions:

- Have you been having fevers, diarrhea, vomiting, muscle pain, severe headaches or any unexplained bleeding in the last month?
- Have you traveled to West Africa (Sierra Leone, Liberia, and/or Guinea) or have you been in contact with a person who has Ebola in the past month?

If you answer yes to BOTH questions, please notify staff immediately!

A Todos los Pacientes

Si en las últimas 3 semanas:

- Viajó a África occidental: Guinea, Liberia, Sierra Leona, u otros países donde el ébola está presente;
- Tuvo contacto directo con alguien que haya viajado recientemente a África occidental y estaba enfermo; o
- Tuvo contacto directo con murciélagos, roedores o primates de África occidental.

Y si ha tenido fiebre,

¡Comuníquenselo al personal de inmediato!
Tiered Approach
Universal Screening

• Tier One (high exposure risk, point-of-entry sites)
  – SFGH Emergency Room, Urgent Care Center, Labor & Delivery, and all ambulatory care clinics
  – 14 community primary care clinics and Nurse Advise Line

• Tiered Two sites
  – Community behavioral health clinics
  – Shelters
  – Laguna Honda Hospital units
  – Other Ambulatory Care units: MCAH (family planning, WIC, dental, home visiting, child care)
  – Other public health programs
ASSESS the patient the following question:
- Do you have fever, vomiting, diarrhea, muscle pain, severe headaches, or unexplained bleeding?
- If they answer yes to the first question, ASK the next question:
  - Have you traveled to West Africa (Sierra Leone, Liberia, and/or Guinea) within the past month or had contact with a person with Ebola within the past month?
  - If the patient answers YES to BOTH questions:
    - PROCEED TO MASK
  - If the patient answers NO to EITHER question:
    - Proceed with usual triage and assessment

MASK the patient a mask (yellow ear loop mask) without direct contact, maintaining 3 feet distance
- Model for the patient how to fit the mask making sure it covers BOTH the nose & mouth
- Explain the need to go into the exam room for further evaluation

ISOLATE the patient to the designated isolation room
- Direct to the patient where to sit and how to use the speaker phone to talk with clinician
- Close the door to the room
- Wash hands thoroughly

COMMUNICATE
- Notify clinic lead
  - AND Determine if the patient is stable or unstable
    - If the patient is:
      - Unstable: CALL 911
      - Stable: CALL CDCU 554-2830
- Coordinate a log of staff and patients which will include:
  - Name
  - Contact Phone #
  - Distance from the suspected case
  - AND Follow additional steps on the checklist:
    - (See next page)
SFGH Activated, Prepared and Drilled

- Go Team
- HICS protocol
- Emergency department
- 5B treatment unit
- Clinical lab and radiology
- Environmental services for terminal cleaning
- Daily multidisciplinary Ebola taskforce meetings
Staff Safety is Paramount

- CHS: 7 out of 14
- JHS: 2 out of 2
- Primary Care: 16 out of 23
- SFGH Clinics: 6 out of 7
- UCFS: 3 out of 4
- SFGH: multiple in ED, 5B, clinical lab, radiology and diverse disciplines
- Active union engagement by HR
Keeping Staff and Leadership Engaged and Informed

- Brown bags
- Town halls
- Email communications
- SFGH Ebola Taskforce
- PIO coordinating messages
- Network IMT and DOC team meeting with leadership teams
- PHD and MCAH staff coordinating contact surveillance
San Francisco Ebola Preparedness Questions?