January - March 2015

The California Department of Public Health (CDPH) is pleased to present “The Stakeholder Brief,” a quarterly update of important upcoming activities, actions and accomplishments from CDPH and involving its partners. Updates include information about meetings, presentations, press announcements, and solicitations for input or services. Sign up to automatically receive this update or to unsubscribe from the list, visit the CDPH Subscribe page. For questions, concerns or suggestions, please contact us at CDPHPress@cdph.ca.gov. Thank you.

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For further information on any of the items in the Stakeholder Brief, please visit the specific website of the Center, Office or Program.

Office of Quality Performance and Accreditation

- On December 12, 2014, CDPH was notified by the Public Health Accreditation Board (PHAB) of its decision to confer the national accreditation status to the California Department of Public Health. The national accreditation program, jointly supported by the Centers for Disease Control and Prevention and the Robert Wood Johnson Foundation, sets standards against which the nation's more than 3,000 governmental public health departments can continuously improve the quality of their services and performance. To receive accreditation, a health department must undergo a rigorous, peer-reviewed, meticulous and multi-faceted assessment process to ensure it meets or exceeds a set of quality standards and measures. Accreditation status is conferred for five years with submission of annual reports to PHAB, demonstrating continual compliance with all 105 measures of quality. California, with its more than 38 million residents, is the largest state to have its public health department achieve such an accomplishment. In demonstrating
conformity with PHAB's accreditation standards, CDPH has affirmed its commitment to protecting and promoting the health of the population it serves.

**California Conference of Local Health Officers**

- **In January, February and March 2015**, the Board of the California Conference of Local Health Officers (CCLHO) will meet in Sacramento. CDPH Director Dr. Ron Chapman plans to provide a CDPH update at the January meeting. All CCLHO meeting information is available on the CDPH CCLHO Web page.

**Center for Chronic Disease Prevention and Health Promotion**

- **On January 5, 2015**, from 9:30 a.m. to 12:30 p.m., the Center for Chronic Disease Prevention and Health Promotion (CCDPHP), Nutrition Education and Obesity Prevention Branch (NEOPB) of CDPH will hold a stakeholders’ meeting at the Sierra Health Foundation in Sacramento. This meeting provides an opportunity for feedback and discussion on the development, integration and evaluation of nutrition education and obesity prevention programs under CDPH-NEOPB, as select state-level Supplemental Nutrition Assistance Program–Education (SNAP-Ed) work transitions from contracted vendors to the state civil service staff. Quarterly stakeholder meetings are specified under 2014 Trailer Bill Requirements (Senate Bill 857, Chapter 31, Statutes of 2014).

  The NEOPB Web page contains information on the stakeholders’ meeting, including registration links. Stakeholders may participate in-person or via webinar. Advanced registration is required. The event is open to the public.

- **On January 23, 2015**, the CDPH Chronic Disease Control Branch (CDCB) will participate in the annual Diabetes Coalition of California meeting. The Coalition mission is to grow a statewide network of volunteers for the prevention of diabetes and its complications in California’s diverse communities. The theme of this meeting will be a call to action for 2015. CDCB will open the meeting by providing an overview of CDCB statewide and local initiatives that address the burden of diabetes. CDCB staff serves on the Board of Directors for the Diabetes Coalition of California. For more information, visit Diabetes Coalition of California.

- **On January 28, 2015**, the Tobacco Education and Research Oversight Committee (TEROC) will meet in Sacramento. The CDPH, California Tobacco Control Program (CTCP); the California Department of Education, Tobacco-Use Prevention Education Program (CDE/TUPE); and the University of California Office of the President’s Tobacco-Related Disease Research Program (TRDRP) will provide program updates to TEROC based on the 2012-2014 TEROC Master Plan objectives. Representatives from the American Cancer Society, American Heart Association, and American Lung Association will also provide updates on current tobacco-related funding, activities and legislation.

  In late January 2015, the TEROC will release the 2015-2017 Master Plan entitled Changing Landscape: Countering New Threats. TEROC has updated its goals for the 2015-17 three-year Master Plan cycle in recognition of the evolving nature of tobacco use in California.
TEROC is a legislatively mandated oversight committee that monitors the use of Proposition (Prop) 99 tobacco tax revenues. TEROC advises the CDPH, CDE/TUPE, and TRDRP on agency, policy, and budgetary issues. TEROC is also responsible for the development of a master plan for the future implementation of tobacco control efforts in California.

- In **February 2015**, the California School Environmental Health and Asthma Collaborative (SEHAC), a statewide coalition coordinated by California Breathing, the CDPH Asthma Program, will launch a new website, www.sehac.org. The website will offer extensive information and resources concerning asthma in schools and homes, including educational videos, data, newsletters and links to important asthma-focused programs, resources and organizations throughout California. The information will be tailored to the needs of school and school district personnel, and parents of K-12 students.

- On **February 4 - 6, 2015**, the Safe and Active Communities Branch’s (SACB) Domestic Violence Training and Education Program will host a networking meeting and training in Sacramento for its four grantees specializing in domestic violence and teen dating violence primary prevention. Grantees are implementing and evaluating the Close to Home (C2H) community-mobilization strategy with a focus on youth leadership development. C2H is a community-driven process that engages youth, adults and organizational leaders to work in their local communities to start conversations and initiate actions to prevent domestic violence. Youth, ages 11-18, build leadership skills to engage their community as valued partners in the prevention of teen dating violence. This project is funded through the Domestic Violence Training and Education Fund (batterers’ fines) and the Blue Shield of California Foundation. Rape crisis centers funded by SACB’s Rape Prevention and Education (RPE) Program that are implementing the C2H strategy in the prevention of sexual violence will also participate.

- On **February 12, 2015**, the Site Assessment Section (SAS) of the CDPH Environmental Health Investigations Branch (EHIB) is holding its 8th annual roundtable to discuss the effects of climate change. This will take place at The California Endowment in Los Angeles. SAS works with California communities located near hazardous waste sites (such as Superfund sites), assessing the communities' health concerns, risks from exposures, and making recommendations to reduce or eliminate exposures. The roundtable serves as a vehicle to discuss environmental public health topics of interest to the communities and stakeholders that SAS works with, including community members and representatives from advocacy groups, local, state and federal agencies. Past roundtables have discussed drinking water quality, long-term land use of brownfields and disease clusters.

- On **March 2 - 3, 2015**, the CDPH Office of Problem Gambling (OPG) will host the 6th annual Problem Gambling Training summit, “Gambling Disorder: Don’t Ignore the Signs,” at the Embassy Suites in South San Francisco. Registration can be accessed online. Workshops include Gambling Disorder and Physical Health; Smoke-free Casinos; Cultural History of Gambling; Co-occurring Disorders - Gambling, Alcohol, Trauma & Depression; Integrated Health and Problem Gambling Screening; and Spirituality and Recovery. The Summit kicks-off Problem Gambling Awareness Month, a national campaign to raise awareness of the signs and symptoms of gambling disorders. 

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• On **March 4, 2015**, OPG will hold its quarterly Advisory Group meeting in conjunction with the Summit in South San Francisco. The Advisory Group will discuss the 2011-2015 Strategic Plan, and OPG staff will update progress related to the plan and OPG initiatives. The meeting is open to the public.

• On **March 13, 2015**, Biomonitoring California’s Scientific Guidance Panel will meet at The California Endowment Conference Center in Oakland. The agenda will be posted on the Program’s [website](#) approximately one month before the meeting. Biomonitoring California is a joint statutory program of CDPH, the California Environmental Protection Agency’s Office of Environmental Health Hazard Assessment and the Department of Toxic Substances Control, and is responsible for measuring toxic chemicals in Californians, tracking exposure trends over time, and helping assess the effectiveness of existing public health and environmental programs in reducing exposures to toxic chemicals.

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**Center for Environmental Health**

• On **January 2, 2015**, the CDPH Food and Drug Branch (FDB) will post on its [Web page](#) an updated list of approved food products that cottage food operators (home-based food processors) can produce in their homes for sale to the public. Assembly Bill 1616, (Chapter 415, Gatto, Statutes of 2012) requires CDPH to maintain the list of approved foods and authorizes the state public health officer to approve the addition or removal of foods from the list. Foods presented on the list must be non-potentially hazardous foods, and the list must be posted on the CDPH website. Based on requests from cottage food operators, FDB plans to add fat icing, marshmallows and popcorn balls to the list.

• On **January 8, 2015**, the CDPH Environmental Management Branch will conduct a meeting with Southern California local enforcement agencies that are responsible for implementing medical waste management programs in their respective counties. This stakeholder’s meeting is required under the provisions of Assembly Bill 333 (Chapter 564, Wieckowski, Statutes of 2014) to collect information necessary to prepare a report that will be submitted by CDPH to the Legislature by January 1, 2016. The legislative report will describe the interaction of federal and state law for the transport of regulated medical waste.

• On **January 9, 2015**, the CDPH Division of Food, Drug, and Radiation Safety will host a Nuclear Detonation Science Symposium in the CDPH Auditorium (1500 Capitol Avenue) from 1p.m. to 4 p.m. Brooke R. Buddemeier a Certified Health Physicist at the Global Security Directorate of Lawrence Livermore National Laboratory will be the presenter. This symposium will define the threat and potential impacts of radiological and nuclear terrorism on California communities using advanced modeling and multimedia presentations. New federal guidance and public health recommendations on population shelter/evacuation decisions, triage and medical issues, decontamination, and how best to mount a public health response will be discussed. The symposium will review new free tools and resources available from the Federal Government that can greatly improve response planning and situational awareness during an event. Attendees are state and local public health and environmental agencies and emergency response personnel who have responsibilities for emergency planning for a radiological event.
• On February 12, 2015, the CDPH Drinking Water and Radiation Laboratory (DWRL) microbiologist will participate in the quarterly Central/Northern California Ocean and Bay Water Quality Monitoring Workgroup meeting. This workgroup was founded by the State Water Resources Control Board (SWRCB) in 2004 to facilitate coordination of beach water quality monitoring, pollution abatement, public education and public notification efforts. DWRL supports this group by evaluating protocols and quality assurance criteria for new rapid-test methods for recreational water quality. Systematic study of the new techniques is essential to ensure public health protection. Stakeholders include state and local public health agencies, environmental regulators, advocacy groups, and wastewater/storm water dischargers.

• The CDPH Food and Drug Branch (FDB) Export Document Program has launched the Export Document Application (EDA) online system, automating the previous manual process. The EDA online system improves customer service by allowing California firms the ability to apply and manage their export document applications for processed foods, seafood, pet foods, cosmetics, drugs, and medical devices online. These commodities are being exported from California to foreign markets and require a certificate assuring safety of the products. For California manufacturers, FDB and the U.S. Food and Drug Administration are the only two sources for these export certificates. FDB recently released the first user guide video, “Episode 1: Creating a New Export Document Application,” which provides a step-by-step guide on completing the online application. The EDA online system also accepts payment with credit cards. The EDA online system is enhancing the Export Document Program’s efficiency in processing export documents. For more information, please visit the FDB Export Document Program’s webpage.

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Center for Family Health

• On February 2-7, 2015, CDPH staff will present at the Society for Maternal Fetal Medicine (SMFM) meeting in San Diego to discuss the latest information on pregnancy-related research and clinical care information. The Society was established in 1977 to give maternal-fetal medicine (MFM) physicians and scientists a place to share knowledge, research and clinical best-practices to improve care for mothers and babies. Scientists from the CDPH Genetic Disease Screening Program, in collaboration with university partners, have produced 11 abstracts that have been accepted. Those include an oral presentation in the opening plenary session by Mary Norton of UC San Francisco, discussing chromosome abnormalities detected through the existing Prenatal Screening Program and evaluating whether these abnormalities would be detected by the new cell-free DNA technology. There are also poster presentations on topics including the loss rate of singleton and twin pregnancies after amniocentesis; the connection between existing screening markers, lipids, and immune markers to predict early preterm birth; the incidence of Down Syndrome in twin pregnancies; abnormalities associated with multiple-screen positive results; first trimester risk-scores for spontaneous preterm birth and the detection of chromosome abnormalities by first trimester and integrated screening.

• On February 10 - 12, 2015, the CDPH Maternal, Child and Adolescent Health Division’s California Home Visiting Program will present at the First 5 California’s Inaugural Child
Health, Education and Care Summit, in Sacramento. CDPH will be part of a panel discussion on “Partnering with Home Visiting: Best Practices for Critical Family Service.” Also attending the event will be site supervisors from Nevada, Shasta, San Diego and Alameda counties. The summit provides the opportunity to find common ground on best practices and policies that will prepare our youngest children to be healthy, well-educated and successful. Attendees will learn new strategies to enhance their partnerships to implement effective changes and improve coordination of services at state and local levels.

- The CDPH Maternal, Child and Adolescent Health (MCAH) Program recently released the 2012 Maternal and Infant Health Assessment (MIHA) survey results. MIHA is a population-based survey of women with a recent live birth in California that collects information about maternal experiences, attitudes and behaviors before, during and shortly after pregnancy. Topics include: health status, nutrition, weight, health insurance, service utilization and content, breastfeeding, infant sleep, pregnancy intention, family planning, intimate partner violence, oral health care, substance use, hardships, and income. MIHA statewide results are available for subgroups of women based on maternal age, education, income, prenatal health insurance, and race/ethnicity. MIHA results are also available for the 20 California counties with the greatest numbers of births and for multi-county regions. Stakeholders can use these results to guide health policies and programs, monitor health outcomes and identify emerging issues for California women, infants and families.

**Center for Health Care Quality**

- On **February 26, 2015**, the CDPH Center for Health Care Quality (CHCQ) will host its semi-annual stakeholder meeting from 2:00 p.m. to 4:00 p.m. at 1500 Capitol Avenue, Sacramento. The meeting will also be available via WebEx. Watch our Stakeholder Forum Web page for additional details. CHCQ will receive questions and facilitate discussion of the Licensing and Certification Program’s first and second quarter performance metrics. The first quarter metrics are available on CHCQ’s Web page and the second quarter metrics will be available in early February.

**Center for Health Statistics and Informatics**

- On **February 5, 2015**, the Center for Health Statistics and Informatics’ (CHSI) Vital Records (VR) will meet with county clerks, recorders and health departments at the quarterly Vision Group meeting in Sacramento. Items to be discussed include issues associated with the issuance and registration of births, deaths, fetal deaths and marriages. The Vision Group meeting is jointly sponsored by the County Recorder Association of California and CHSI-VR.

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**Center for Infectious Diseases**

- In **January 2015**, the CDPH Tuberculosis Control Branch, the California Tuberculosis Controllers Association, local health departments, community providers and academic centers will begin a process to plan for the elimination of tuberculosis in California. The plan
will address ways for public health, community providers, health care institutions, social service providers and decision-makers to work toward the elimination of tuberculosis in California. CDPH will convene stakeholders to develop a feasible plan of action. The planning process will include a review of the evidence for high-impact tuberculosis control and elimination interventions, prioritization of interventions, identification of resources needed to implement actions, and broad dissemination of a tuberculosis elimination plan for California.

- In **January 2015**, the California Reportable Disease Information Exchange (CalREDIE) Electronic Laboratory Reporting (ELR) team will move its sixth cohort of ELR submitters into production, bringing the total to 185 laboratories, handling approximately 14,000 reportable laboratory test results per week. The ELR team will continue to work with key laboratories for electronic reporting, including Planned Parenthood and the US Veterans Health Administration, while also conducting the ELR onboarding process for hundreds of smaller hospital submitters in California.

- In **January 2015**, the CDPH Office of Refugee Health, in collaboration with the Department of Social Services' Refugee Programs Bureau, will hold four regional quarterly consultation meetings/teleconferences with refugee stakeholders. The goal is to help promote community engagement and improve self-sufficiency, adjustment and integration for newly arriving refugees by sharing information on refugee processing and arrivals, health concerns, available funding and resources, and other timely issues affecting refugee placement.

- On **January 13 - 14, 2015**, the CDPH Office of Binational Border Health, including the U.S.-Mexico Border Health Commission, in partnership with Clinicas de Salud del Pueblo, will hold a Promotores de Salud Mental Health train-the-trainers event in Imperial County. The U.S.-Mexico Border Health Commission is currently implementing the Mental Health Gap Action Program Intervention Guide as a train-the-trainer module for border promotores. These trainings will continue through February 2015 in the U.S. border cities. These efforts relate directly to developing strong, resilient communities that resist criminal activity and promote healthy lifestyles.

- On **January 16, 2014 and March 19, 2014**, the CDPH Office of Binational Border Health, in coordination with the County of San Diego Public Health Services, will convene a Consortium of the Californias meeting in San Diego. The Consortium consists of agencies representing government, academia and nonprofit organizations in the California - Baja California border region, to create networking opportunities in order to improve communication, strengthen collaboration and streamline coordination, share knowledge, best practices, and disseminate information among groups/organizations/individuals working in public health in the region.

- On **January 26, 2015**, the CDPH Infectious Diseases Branch’s Vector-Borne Disease Section staff will present on the “Current Status of Invasive Aedes Mosquitoes in California and on the importance of monitoring for pesticide resistance in mosquitoes” at the annual Mosquito and Vector Control Association of California meeting in Monterey. For more information, please visit [http://www.cdph.ca.gov/programs/vbds/Pages/default.aspx](http://www.cdph.ca.gov/programs/vbds/Pages/default.aspx).

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In early 2015, the Office of AIDS (OA) expects to make awards to four to six agencies which applied for Expanded HIV Testing in Health Care Settings funding. The goal of this program is to integrate routine opt-out HIV testing into health care settings in California that primarily serve African Americans, Latinos, men who have sex with men (MSM) and injection drug users. An additional goal of this program is to link more than 85 percent of the people who test HIV-positive to care within 90 days. This program receives support from the Centers for Disease Control and Prevention PS 12-1201 (Category B) funds. More information is available at OA’s website.

In early 2015, the Office of AIDS (OA) expects to make awards to up to four demonstration projects for the delivery of innovative, evidence-based approaches to outreach; HIV and hepatitis C virus (HCV) screening; and linkage to, and retention in, quality health care for the most vulnerable and underserved individuals at high risk for HIV infection. Funding for these demonstration projects was established by Senate Bill 870 (Committee on Budgets, Chapter 40, Statutes of 2014). More information is available at OA’s website.

In February 2015, the CDPH-Office of Binational Border Health, including the United States – México Border Health Commission will hold a Border Reproductive Health Technical Work Group meeting in Piedras Negras in the state of Coahuila, México. The technical workgroup consists of subject matter experts from each border state in the U.S. and México to develop a strategic plan as a follow-up to the objectives of the March 2014 Border Reproductive Health Summit in San Diego. The Summit objectives include advancing evidence-based reproductive health practice and policies that support the safety and choices of women and girls around the world.

On February 17 - 18, 2015, the CDPH Tuberculosis Control Branch Chief will participate in a national meeting on tuberculosis elimination. This meeting, in Atlanta, was requested by the Centers for Disease Control and Prevention for state tuberculosis leaders to discuss a national plan for eliminating tuberculosis.

On March 11, 2015, Office of AIDS (OA) will convene a meeting of its California Planning Group (CPG) in Sacramento. OA will present its process for completing the Statewide Coordinated Statement of Need and updating California’s Integrated HIV Surveillance, Prevention, and Care Plan. CPG is a statewide planning and advisory group that works in collaboration with OA to reduce new HIV infections, increase access to care and improve health outcomes for people living with HIV, reduce HIV-related health disparities, and achieve a coordinated response to the HIV epidemic in California. The group members are representative of the HIV epidemic in California and include consumers and others involved in HIV prevention, care, and treatment services/programs. CPG members ensure that the views, perspectives and needs of HIV-affected communities are brought to the statewide planning process. The meeting is open to the public and there will be an opportunity for comment. Information about the meeting will be posted on the OA Web page 30 days prior to the meeting.
On March 24, 2015, CDPH and California will join the global observance of World Tuberculosis Day. California events will include a walk to raise awareness in Los Angeles, in concert with a walk in Atlanta, Georgia and New York City and a media event to launch the Universal Adult Tuberculosis Risk Assessment tool.

The California Reportable Disease Information Exchange (CalREDIE) is a computer application that CDPH uses for web-based disease reporting and surveillance. In spring 2015, the CalREDIE will create additional tools to support CDPH’s response to prepare for the possible emerging public health threat of Ebola. CDPH’s future efforts will include the creation and implementation of additional tools and forms within the CalREDIE system, supplementing those already deployed. Tools already available for use at both the local health department and state-level facilitate the tracking and monitoring of suspected cases of disease. The additional tools will allow for follow-up of travelers and medical workers entering or returning to California from Ebola-affected regions in Africa. The CalREDIE team will also continue development of documentation for and trainings on the use of Ebola-related CalREDIE tools. The team will be responsible for triaging and responding to questions regarding Ebola-related functionality in CalREDIE. The CalREDIE application platform enables CDPH to rapidly and efficiently develop and deploy these valuable tools and resources, putting them quickly into the hands of the public health workforce responsible for responding to this event.

Office of Health Equity

In January 2015, CDPH anticipates announcing a 30-day public comment period for stakeholder review of the draft California Reducing Disparities Project (CRDP) Strategic Plan. The community-authored plan identifies 25 strategies for transforming the California public mental health system into one that better meets the needs of underserved, underserved and inappropriately served communities. Community forums will be held throughout California. Further information can be obtained by signing up for announcements at OHE@cdph.ca.gov.

On February 24, 2015, CDPH Office of Health Equity’s (OHE) Climate and Health Team will host the Climate Action Team (CAT) - Public Health Working Group (PHWG) quarterly meeting from 1-4 p.m. at the Sierra Room in the Cal Environmental Protection Agency building in Sacramento. This meeting will focus on Health Equity and Climate Change. More details, including speakers and agenda, will be available in February on the Air Resources Board’s website.

In February 2015, the CDPH OHE Advisory Committee will hold its quarterly meeting (date and location to be determined). The OHE Advisory Committee was created to advance the goals of OHE and is comprised of 25 representatives from state agencies and departments, local health departments, community-based organizations, vulnerable communities, and stakeholder communities. More information will be available at OHE’s Web page.
In March 2015, CDPH anticipates the release of multi-component solicitations for the California Reducing Disparities Project (CRDP), Phase II. Phase II will provide four years of funding totaling $60 million to implement the practices and strategies identified in the CRDP Strategic Plan. Phase II will focus on demonstrating the effectiveness of community-defined evidence in reducing mental health disparities. CDPH plans to fund selected approaches across the five CRDP-targeted populations: Native Americans, Latinos, Asian/Pacific Islanders, African Americans, and Lesbian, Gay, Bisexual, Transgender, and Questioning with strong evaluation, technical assistance and infrastructure-support components. To learn more, please visit the CRDP Web page.

Public Health Emergency Preparedness

On January 21, 2015, California’s Joint Advisory Committee on Public Health Emergency Preparedness (JAC) will meet in Sacramento. The JAC consists of subject matter experts and representatives from local, regional, state and federal levels, as well as local health departments, health care providers, first responders, hospitals and non-governmental organizations, who bringing their expertise to coordinate and develop public health and medical preparedness efforts and strategies on the local, state and national level. The JAC advises CDPH on setting statewide preparedness strategies for public health and medical care during disasters. Such strategies strengthen coordination within the public health and medical system during unusual events and emergencies.

On March 10, 2015, CDPH and the Emergency Medical Services Authority, in collaboration with the federal Department of Health & Human Services (DHHS), are conducting a joint tabletop exercise to test preparedness objectives among federal, state, local, and private response partners. The scenario will be a catastrophic earthquake in California. If such an event were to happen, there would be a large number of fatalities, injuries and displaced people, and it would cause major disruption to community health care resources. This first-ever formal California and federal exercise will test how the state will prioritize the immediate public health and medical needs in the first 96 hours after a catastrophic earthquake in Southern California. The exercise will focus on prioritizing requests and coordinating public health and medical assets between local, state, federal and private-sector partners. Participants and observers will include local government public health and medical response partners, the Regional Disaster Medical Health Specialists, state public health, emergency medical, and emergency management representatives, and federal response partners from the Department of Defense, FEMA and DHHS.

On November 20, 2014, CDPH and the Emergency Medical Services Authority (EMSA) hosted the annual Statewide Medical and Health Exercise. This annual emergency preparedness exercise is a focused effort among partners in the Public Health and Medical Services Emergency Function as described in the State Emergency Plan. Participants included representatives from local, regional and state agencies, including local health departments, local emergency medical service agencies, local environmental health departments, acute care hospitals/facilities, emergency medical services/ambulance providers, behavioral health, long-term care facilities, community health centers/clinics, emergency management, medical examiners/coroners, law enforcement and fire service. Several scenarios were exercised in this year’s event including Ebola virus disease, Middle
East Respiratory Syndrome (MERS-CoV), a weaponized anthrax attack, and hazardous materials releases. Local partners determined their own level of exercise play, from tabletop exercises to functional exercises. Regardless of the scenario used or the level of play, the coordinated exercise effort allows partners at the state and local levels to test and validate policies, plans, procedures, training, equipment and agreements, clarify roles and responsibilities in an emergency, and identify gaps in resources and response plans. The 2014 exercise also helped meet Joint Commission exercise requirements for hospitals and well as the Centers for Disease Control and Prevention’s Cities Readiness Initiative requirements for a functional biohazard exercise in the Bay Area. The development of the annual Statewide Medical and Health Exercise is supported through the federal Hospital Preparedness Program (HPP) and Public Health Emergency Preparedness (PHEP) grants.

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