



**Weekly Local Health Department Ebola Update Call
California Department of Public Health
Wednesday, January 7, 2015
10:00 a.m. to 11:00 a.m.
Meeting Minutes**

Announcements

The LHD Weekly Ebola Update calls will be changed to biweekly, or every two weeks, unless there is a need for a call if information or the situation evolves. The next meeting will be convened on January 21, 2015.

International, National and California Update on Ebola

- The countries with widespread transmission of Ebola continue to include Guinea, Liberia, and Sierra Leone.
- The status of Mali has changed. Per the CDC on 1/6/2014, Mali has been removed from the list of Ebola-affected countries. Travel screening of persons from Mali is discontinued.
- There are currently no Ebola cases in the U.S.
- Across the state, approx. 90+ travelers in 26 California jurisdictions were monitored over the holidays, the number is now decreasing to 56, and most are low risk.
- National Update: last week, CDC reported that there were 1300-1500 persons at any given time being monitored, the majority are low risk. 89 were some risk cases (<5% of total persons monitored). Of 18 that developed symptoms, only 4 persons were tested, all negative.

Update: Ebola Assessment Hospitals

CDPH and CCLHO are discussing the number of Ebola assessment hospitals needed for geographical/regional coverage of the state versus having many assessment hospitals. Most California hospitals are considered to be Frontline level hospitals. There will be very few persons that will need evaluation and balancing the intensive workload and costs to be an assessment hospital versus need is important.

CDPH will review the information on Ebola assessment hospitals obtained from the survey conducted recently, identify facilities to provide regional availability and then reach out to the local health departments to discuss.

The personal protective equipment required for assessment hospitals is being developed by Cal/OSHA. CDPH has heard concerns from LHDs and hospitals about the required PPE levels for assessment and treatment hospitals and is working closely with Cal/OSHA to resolve.



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Update: Sanitation/Sewer System Waste for Ebola

Existing CDC and WHO guidance documents suggest that patient discharges/waste can be safely disposed of in sanitary sewers. CDC also provides wastewater worker safety guidance stating that Ebola is less environmentally resistant than other viruses already in sewage, that US wastewater practices inactivate pathogens, that there is no evidence of transmission via sewage, and that personal protective equipment (PPE) as described should be used in any case.

Nevertheless, wastewater treatment plants have concern for workers who may come into contact with raw sewage prior to treatment at the plant and some hospitals expressed concerns regarding plumbers and other staff that might need to address a blockage or other problem before the waste reached the sewer.

Hospitals have reported differing requirements from wastewater treatment facilities in different localities, including some that understood that they would be required to collect and bag such waste for disposal with medical waste from the patient. As a result, some hospitals currently have expensive and challenging protocols that would capture feces, urine and vomit from EVD patients and dispose of this waste with medical waste (typically shipped out of state for incineration).

Recognizing that a single statewide approach, as much as possible, would be helpful not only to the hospitals but also to the local utilities grappling with issues and politics, CDPH coordinated with the State Water Boards and with the California Association of Sanitation Agencies (CASA) (and other entities) to prepare guidance for a recommended approach for use by local sanitation districts and hospitals as they plan for the potential discharge of waste from a hospitalized EVD patient into the sanitary sewer.

CASA and CDPH had both done research on existing guidances and protocols, and coordinated with some healthcare facilities, and so were able to collaborate on the guidance. The new recommendations, which should be available soon (via a memorandum from CASA to local agencies), will add an additional layer of precaution by including pre-treatment of the waste before it is discharged into the sewer via toilets, drains, and showers. And these recommendations are expected to be utilized statewide.

CDPH and CASA will be available to assist hospitals and/or sanitation agencies if needed as they coordinate on this (once the new memo is out).



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CDPH Laboratory Testing Capacity for Ebola

Effective December 23, 2014, the CDPH Viral and Rickettsial Diseases Laboratory has full capability to conduct Ebola PCR testing with an estimated eight hour turnaround time from receipt of specimen to result. With the CDPH lab and LA County Public Health Laboratory capable of performing Ebola testing, there is excellent coverage in CA.

Laboratory Testing to Rule Out Respiratory Viruses vs. Ebola

With the onset of influenza season, there have been questions raised about the value of conducting testing for respiratory viruses when evaluating an EVD suspect case. Due to the challenges and accuracy of the Influenza Rapid Tests, it is not recommended to use.

Testing for respiratory viruses would not rule out EVD; therefore EVD testing would still have to be performed. Respiratory virus testing could also be performed for diagnostic purposes, as indicated.

Question and Answer Session:

Question:

Thank you for the update and information on sanitation for Ebola sewer waste. Locally, the LHD has spoken with waste management agencies and they could benefit from the information CDPH has on this issue. Would CDPH send the research/information to local agencies?

Answer: CDPH research was a review of the current information available, the types of sanitation used by water agencies and healthcare facilities in California, and national virologist recommendations. There is no evidence that EVD is transmitted via waste water. Some pre-treatment may be needed because waste water entities require it; however, it is not proven, but is acceptable to local sanitation agencies. The emphasis is on safety.

Additional questions can be submitted to Jeocuser43@cdph.ca.gov

Number of attendees on the call: 197