



**Weekly Local Health Department Ebola Update Call**  
**California Department of Public Health**  
**Wednesday, December 10, 2014**  
**10:00 a.m. to 11:00 a.m.**  
**Meeting Minutes**

**International, National and California Update on Ebola**

- The numbers of EVD cases continue to rise in Liberia, Guinea, and Sierra Leone. In Mali, the number of cases remains at 8 with limited transmission; the CDC maintains the Level II travel advisory for Mali.
- There are no Ebola cases in the U.S.
- The number of monitored persons is rising slowing, approximately 50 currently. The majorities is low risk and are located generally in metropolitan areas near the identified treatment hospitals.

**Monitoring of Travelers from Ebola-affected Countries**

CDPH thanks local health jurisdictions for getting the monitoring information on travelers to us in a timely manner to facilitate reporting to CDC. Much appreciated.

CDPH has been convening planning meetings with jurisdictions that are monitoring travelers with special circumstances, e.g. pediatrics, pregnant women, rural locations. The planning includes multiple jurisdictions, EMS, and the possible destination hospitals should the monitored person become symptomatic. LHJs are invited to contact CDPH to schedule a planning meeting as needed.

**CDC Site Visits to Identified Ebola Treatment Hospitals**

Last week, the CDC conducted visits to the four hospitals in Southern California, including UCLA, UCI, UCSD, and Kaiser Permanente Los Angeles. With the four hospitals in Northern California, California has good capacity for EVD care across the state, including some capacity for special circumstances (e.g., pediatric, pregnancy, dialysis). CDPH thanks all eight identified treatment hospitals for their efforts and contributions to a statewide strategy for EVD.

Questions have been asked about management of the deceased EVD patient. It is recommended that hospitals work with the local medical examiner and the local health department to plan for managing the deceased.

**CDC Releases Tiered Ebola Hospital Guidance**

CDC released guidance on a tiered approach to hospitals and levels of capability to care for suspected/confirmed Ebola patients.

- Frontline Hospitals: readiness of all hospitals. Identify, Isolate, and inform the local health department, transfer out.



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- Assessment Hospital: Capable of managing a suspected case up to 96 hours for lab testing
- Treatment Hospital: Capable of full management and care of a confirmed Ebola case.

CDPH will be conducting a brief survey for local health departments on possible Ebola Assessment hospitals within each jurisdiction. This will help provide a snapshot of possible Assessment hospitals to inform the statewide strategy.

**Question and Answer Session:**

**Question:**

Some jurisdictions do not have local contractors for the cleanup of homes or other sites post Ebola case. Does the state have a resource for this?

Answer: CDPH has been looking into vendors/contractors that could do this cleanup should it be needed. We will reach out to EPO and Environmental Health to see the progress on this.

**Question:**

Most hospitals consider themselves as Frontline hospitals and the criteria for this type of hospital are clear. However, the criteria for an assessment hospital are not clear.

Answer: CDPH will be developing a tool to outline the criteria form and evaluation of Ebola Assessment Hospitals.

**Question:**

This county is now monitoring a traveler who will be going to another state within the 21 day monitoring period, what processes should be used to inform the other state?

Answer: The CDPH Traveler Team lead will contact this county and provide information. Anytime a LHJ has travelers with complex plans, please reach out to the CDPH Traveler Team lead for assistance and information.

**Question:**

What planning is being conducted in regards to the catchment zone maps? Will there be regional meetings for planning?

Answer: Planning meetings will be conducted in the future.



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**Question:**

For healthcare workers/hospital employees that care for confirmed Ebola patient but had no breach in PPE, what level of Direct Active Monitoring (DAM) should be done?

Answer: CDPH has no recommendation at this time. It is important to minimize the burden of monitoring during the 21 day period and to be efficient for the LHJ and the person monitored. CDPH supports creative solutions (e.g., FaceTime).

**Additional questions can be submitted to [Jeocuser43@cdph.ca.gov](mailto:Jeocuser43@cdph.ca.gov)**

Number of attendees on the call: 225