

CLACKAMAS COUNTY BOARD OF COUNTY COMMISSIONERS
Sitting/Acting as Board of Health

Policy & Planning Session Worksheet

Presentation Date: 11/4/14 **Approx Start Time:** 11:00AM **Approx Length:** 30 minutes

Presentation Title: Ebola Planning Updates

Department: H3S – Public Health / Emergency Management

Presenters: Cindy Becker, Dana Lord, Sarah Stegmuller Eckman

Other Invitees: Dr. Paul Lewis, Dr. Christina Baumann

WHAT ACTION ARE YOU REQUESTING FROM THE BOARD?

The purpose of this policy and planning session is to update the Board of County Commissioners (BCC) on the current status of state/regional/local planning efforts currently being implemented related to Ebola.

EXECUTIVE SUMMARY:

The 2014 Ebola outbreak is affecting 3 West African countries (Guinea, Liberia, Sierra Leone). One imported case from Liberia and associated cases in U.S. healthcare workers has been reported in Texas. The CDC, state and local partners across the nation are taking precautions to prevent the further spread of Ebola in the U.S. For example, in New York City local healthcare systems worked quickly to prevent the spread of the disease by isolating a person infected with the disease and prevented any possible harm to the community. No cases have been reported in Oregon, although counties are prepared to monitor individuals arriving from these areas.

The federal government now requires that any travelers coming to the U.S. from Ebola affected countries must go through one of five airport screenings for the disease and will be monitored by the CDC for 21 days.

The state health department (Oregon Health Authority) has activated an Incident Management Team to address risk communications with partners, review planning relating to communicable diseases protocols, and provide both federal and state guidance as required.

Clackamas County Public Health Division is actively participating in a regional planning group with participation from local public health departments, hospitals, EMS, Public Information Officers and Emergency Management to develop messages for the Portland-metro area and assure that there is effective coordination between these agencies in the possible event of a suspect case of Ebola or other emerging exotic disease.

Clackamas County Public Health Division has also activated its Department Operations Center at a low level to prepare for the low possibility of a suspect Ebola case. The division is meeting on a weekly basis with H3S Leadership, Emergency Management and Public & Government Affairs to assure that internal county partners are coordinated in its planning efforts. Clackamas County

EMS agencies are prepared to safely evaluate and transport patients with suspected Ebola virus disease (EVD) to an area hospital.

FINANCIAL IMPLICATIONS (current year and ongoing):

The Public Health Division is tracking costs associated with this response. If this event were to rise to a level that it became a federal emergency, costs could possibly be reimbursed.

LEGAL/POLICY REQUIREMENTS:

The public health officer is a physician licensed by the Oregon Medical Board who performs specific medical responsibilities within the Clackamas County Public Health Division. This responsibility includes the ability to issue an emergency order causing a person or group of persons to be placed in isolation or quarantine if there is probable cause to believe that a situation requires immediate detention in order to avoid a clear and immediate damage to others as defined by ORS 433.123. Clackamas County Public Health has worked with County Counsel and Clackamas County Circuit Judges to expedite the court filing process should these measures be required to protect County citizens 24/7.

PUBLIC/GOVERNMENTAL PARTICIPATION:

N/A

OPTIONS:

None

RECOMMENDATION:

This session is informational only.

ATTACHMENTS:

- Ebola: Know Your Risk Flyer
- FAQs about Ebola

SUBMITTED BY:

Division Director/Head Approval _____
Department Director/Head Approval _____
County Administrator Approval _____

For information on this issue or copies of attachments, please contact Dana Lord @ 503-655-8479

Ebola: Know Your Risk

NO RISK

No travel to Liberia, Sierra Leone or Guinea.

(On Oct. 20 the World Health Organization removed Nigeria from the affected countries.)

REMOTE RISK

In the past 21 days either resided in, or traveled to, Liberia, Sierra Leone or Guinea but had no exposure to an ill person.

LOW RISK

- Shared a household with Ebola patient.
- Provided healthcare to Ebola patient.
- Brief contact with Ebola patient without protection.

HIGH RISK

- Direct contact with infected blood or bodily fluids.
- Contact with dead Ebola victim.
- Needle stick from needle used in infected person.

Frequently Asked Questions about Ebola

October 16, 2014

About Ebola

- **What is Ebola?** Ebola is a virus that can cause a severe, often deadly illness that can spread from person to person. Ebola usually affects animals first. The disease is passed from animals to people through human contact with bush meat or fruit bats. You should not eat bush meat or any fruits that might have been damaged by bats.
- **I've been hearing about Ebola on the news. How many people have been affected, and where?** The current outbreak began in March 2014. The disease has sickened people in Liberia, Guinea, and Sierra Leone. As of mid-September over 3,700 people have had Ebola. More than 1,800 of them have died. Some areas in these countries report that many more people than this have died from Ebola, but they were not tested. Further spread to other countries is possible, but the risk of sustained transmission within the United States is low.
- **How is Ebola spread from person to person?** People can catch Ebola by touching the blood, vomit, diarrhea, urine, or other body fluids of an infected person. Touching objects like dirty needles or soiled linens used while caring for a person sick with Ebola can also cause the illness. When people die from Ebola, their bodies still have the disease. This means touching these bodies can also spread disease. Even if it is customary, family members and friends should not handle the dead bodies. Ebola is spread from people who are infected and showing symptoms (see symptoms below) or who died from Ebola.

Ebola is not spread through the air, and it is not spread through food or water. People without symptoms cannot spread the disease. The one exception is men who have recovered from Ebola- they can spread the disease to their sexual partners through their semen for up to seven weeks after they recover. Men who have recovered from Ebola must avoid unprotected sex for at least seven weeks after they recover.

Spread of the Disease and its Symptoms

- **What can people do to protect themselves while assuring that sick people are cared for?** Avoid touching the blood and body fluids of a person who is sick with or has died from Ebola. People caring for someone sick with Ebola, or the bodies of those who have died, must wear waterproof gloves, gowns, masks, eye goggles, and other protective equipment to protect them from the disease. It is

- important not to touch body fluids of a sick person without this protective clothing. The hands, arms, feet, eyes, nose, and face must be protected. This includes when handling laundry, bed pans, or anything that came in contact with the sick person. Since it is so hard to stay safe while caring for a person with Ebola, it is important that these people are cared for by healthcare workers who have the right equipment.

For ways of sharing traditional greetings without touching a person with Ebola, seek the advice from respected traditional leaders in your community.

- **Are some people at higher risk than others for getting Ebola?** Families, friends, and healthcare workers caring for people sick with Ebola are at high risk. This is because they may come in close contact with body fluids when providing care. Ebola can spread within clinics or hospitals if doctors and nurses do not use masks, gowns, and gloves correctly. It is also important to clean or throw away items used on people sick with Ebola. Also, because the disease stays in the bodies of people who die of Ebola, mourners who touch the dead bodies are at high risk for getting the disease.
- **What are the symptoms of Ebola?** Early symptoms of Ebola are similar to other common illnesses like the flu and malaria. This makes it important for people to seek medical care immediately if they get sick after contact with someone ill with Ebola. The first symptoms are fever, weakness, muscle aches, headache, and sore throat. These are usually followed by vomiting, diarrhea, and weakness. People sick with Ebola may also have bleeding inside and outside of the body. Symptoms appear 2-21 days after exposure to the disease. People may die of Ebola if their bodies lose too much blood and fluids. Their organs – including brain, heart, lungs, kidneys and liver – may no longer function. People can spread the disease as long as their blood and body fluids contain the disease. This means that dead bodies can also spread the disease.

Care and Treatment

- **How is Ebola treated?** There is no cure for Ebola. To treat it, doctors provide supportive care, such as intravenous fluids, to those who are sick until their bodies can fight and kill the disease. An experimental treatment was tried on two Americans who are alive and have been released from the hospital, but it is not known if this new treatment really “cured” these people or if they would have lived anyway. Because caring for people sick with Ebola can expose family and friends to the blood and body fluids of the person, it is important that care is provided by trained healthcare workers who can use protective clothing and other equipment. Also, people sick with Ebola should be kept away from other people and even family members. This helps prevent further spread of the disease.
- **What is quarantine? What is isolation?** Quarantine means keeping healthy people away from others even before they are sick. Isolation means keeping sick people away from people who do not have the disease. Quarantine is done for

diseases like the flu, where people can spread a disease before they have symptoms. Because Ebola is only spread after people get sick, there is usually no need to quarantine healthy people just because they have been in contact with a sick person. Sometimes the word “quarantine” is confused with isolating sick people.

Many areas in affected countries have set up travel restrictions that create large quarantine zones, affecting 1,000’s of people in some areas. This is done when it is not possible to identify the sick people in time to get them isolated and stop the spread of the disease in the community. This might happen for many reasons, such as not enough healthcare centers for people to use or people not trusting the healthcare centers available.

- **What are the chances of survival for someone sick with Ebola?** The survival rate of people who have become sick in the current outbreak has been about 45-50%. People who recover from Ebola cannot spread the disease. That is true except for men- they are able to spread it through unprotected sex for up to 7 weeks after recovery.
- **I heard there is an experimental treatment for Ebola. Why aren’t more people getting it?** There are several drugs designed to fight Ebola infection. None is approved for use in the United States. They have not been fully tested in humans for safety and effectiveness. None of these will likely be available to treat large numbers of people for some time.

Ebola and Oregon

- **Are there any people ill with Ebola here in Oregon?** No one has been diagnosed with Ebola in Oregon. Hospitals in the Portland area are prepared to isolate and manage a person with Ebola. No one has gotten Ebola from a sick person within the U.S.
- **Is it likely that Ebola will appear in Oregon?** There are no direct flights between Oregon and any country in Africa. Because of this any person sick with Ebola who enters the U.S. would most likely be treated before they arrive in Oregon. Someone exposed to Ebola could become sick after arriving in Oregon. Such a person will be isolated and cared for quickly. Local Public Health officials are coordinating with the Portland Airport and area hospitals. We are prepared to care for anyone, and to keep patients and our community safe.

Family Back Home

- **I am concerned for my family and friends in West Africa. What should I tell them about the disease?** Educate your family and friends with facts about the disease. Share with them that sick people should go to a health center where healthcare workers are using infection control practices and have the right supplies to care for those who are ill. Because these clinics might be far from where family and friends are living, or may be in temporary structures, encourage

your family and friends to know ahead of time how to get to these clinics. Also, while very difficult, mourning family and communities must find ways to care for the dead without directly handling the bodies. Many radio messages about the disease – with good information like you will find from the World Health Organization – are airing now in affected countries. Talk with family and friends about these messages, and help them find answers to questions they still have.

Travel Concerns

- **I travelled from one of the affected countries within the last three weeks. If I get sick with symptoms such as a fever, what should I do?** You should seek medical care. Your doctor can help determine if you need testing for Ebola and consider other reasons for your illness. The chance that you would have Ebola is very low unless you were in contact with people sick with Ebola in one of the affected countries.

Someone with possible Ebola should be seen by a doctor quickly. The ill person would be tested for Ebola and other common illnesses. If the person is very ill, they would be admitted to a hospital and cared for using the best supportive treatment available. In the hospital, doctors and nurses would take precautions to prevent spread of the disease. Some of these precautions may be frightening to patients. For instance, healthcare providers may wear head-to-toe protective equipment and limit visits by family and friends. However, these steps are important to keep everyone safe. Healthcare providers should communicate with the family and make every attempt to allow for visits in safe conditions.

- **I plan to go to the affected countries soon, is there a recommendation about travel there?** The Centers for Disease Control and Prevention recommends avoiding unnecessary travel to the affected countries. There is concern that travelers may not have access to healthcare should they need it while in country. If you must travel, avoid direct contact with people sick with Ebola.

What else can I do?

Some hospitals in the affected countries that could treat people sick with Ebola might be lacking supplies. If you want to help in this way, find out what sort of supplies or donations might help before sending things or money. Also, remember that some people use desperate times like these to cheat people out of money or steal supplies meant for the sick. If you do want to send supplies or other support, talk with family and friends in affected areas about who they trust and what they might need.

Sources: <http://www.cdc.gov/vhf/ebola/outbreaks/guinea/qa.html>,
<http://www.who.int/csr/disease/ebola/faq-ebola/en/>,
<http://www.cdc.gov/vhf/ebola/outbreaks/guinea/qa-experimental-treatments.html>