

# County of Santa Clara

## Santa Clara Valley Health & Hospital System

### Public Health



HHS02 100609


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DATE: October 6, 2009

TO: Board of Supervisors

FROM:   
Kim Roberts  
SCVHHS - Chief Executive Officer

SUBJECT: Various Actions Related to the Public Health Preparedness Program

### **RECOMMENDED ACTION**

Consider recommendations relating to Public Health Preparedness Program.

Possible action:

- a. Approve delegation of authority to Public Health Administrator, or designee, to negotiate, execute, amend, terminate, and take any and all necessary or advisable actions relating to Agreement with California Department of Public Health to provide Public Health Emergency Preparedness Services in an amount not to exceed \$4,530,888 for period July 1, 2009 through August 9, 2010, following approval by County Counsel as to form and legality, and approval by the Office of the County Executive. Delegation of authority shall expire on August 9, 2011.

- b. Adopt Resolution delegating authority to Public Health Administrator, or designee, to negotiate, execute, amend, terminate, and take any and all necessary or advisable actions relating to contracts and contract amendments with participating hospitals, clinics, pharmacies, emergency medical services providers, individuals and other entities for the purpose of implementing the various programs in an amount not to exceed funding made available by the State for the purposes stated for the period July 1, 2009 through August 9, 2011, following approval by County Counsel as to form and legality, and approval by the Office of the County Executive. Delegation of authority shall expire on August 9, 2011.
- c. Introduction and preliminary adoption of Salary Ordinance No. NS-5.10.24 amending Santa Clara County Salary Ordinance No. NS-5.10 relating to the compensation of employees adding 1.0 (Unclassified) Warehouse Materials Handler position in the Public Health Department. (Roll Call Vote to waive reading, Roll Call Vote to adopt)
- d. Approve Request for Appropriation Modification No. 63 - \$1,304,546 increasing revenue and expenditures in the Public Health Department budget, and \$1,104,546, increasing/decreasing receipts and disbursements in the Public Health trust fund budgets. (4/5 Roll Call Vote)

## **FISCAL IMPLICATIONS**

There is no impact on the General Fund as a result of this action. No matching funds or in-kind services are required for this funding resource.

On August 10, 2009, the Public Health Department received a notice of award from the California Department of Public Health (CDPH) related to the Public Health Emergency Preparedness agreement in the amount of \$4,530,888 for period July 1, 2009 through August 9, 2010. This item was listed as a Pending Board Item on the September 16 Health and Hospital Committee agenda.

Since receipt of this notice of award, the Public Health Department (PHD) has been actively working to receive complete guidance from the State and understand how new H1N1 supplemental funding can be used.

There are four on-going awards addressed in this agreement:

1. Centers for Disease Control (CDC) Public Health Preparedness Grant;
2. Cities Readiness Initiative (CRI);
3. State General Fund Pandemic Influenza Preparedness; and
4. Hospital Preparedness Program (HPP).

In addition, there are three new awards:

1. HPP H1N1 Phase 1;
2. Federal Pan Flu Phase 1 and 2; and
3. CDC Epidemiology Lab H1N1 –Phase 1.

The total funding for FY10 is \$4,530,888, a net increase of \$1,104,556 from the prior year.

Funds for the Public Health Preparedness awards are first deposited into appropriate Public Health Preparedness trust funds, and, as expenditures are approved, drawn down into the Public Health Preparedness program for expenditure. Therefore, the budget modification reflects two separate transactions: (1) increasing revenue and expenditures in the Public Health budget in the amount of \$1,304,546; and (2) increasing receipts and disbursements in the PH Preparedness Trust Fund budgets in the amount of \$1,104,546.

In addition to the \$1,104,556 of increased revenue and expenditures from the new awards reflected in the budget modification, there is also a one time carry over of unspent funds from FY2009 reflected in the budget modification in the amount of \$200,000.

The appropriation modification aligns the County budget with the revised funding allocations.

| Grant  | FY10 Award         | FY10 County Budget | Change from prior fiscal year |
|--|--------------------|--------------------|-------------------------------|
| 1 CDC PH Preparedness-Base                           | \$1,379,021        | \$1,727,127        | (\$348,106)                   |
| CDC PH Preparedness-Lab                              | \$259,650          | \$260,000          | (\$350)                       |
| 2 Cities Readiness Initiative                        | \$494,696          | \$506,176          | (\$11,480)                    |
| 3 State General Fund Pandemic Influenza Preparedness | \$123,064          | \$122,766          | \$298                         |
| 4 Hospital Preparedness Program                      | \$737,229          | \$810,263          | (\$73,034)                    |
| 5 HPP H1N1 – Phase 1                                 | \$322,701          | \$0                | \$322,701                     |
| 6 Fed Pan Flu – Phase 1 and 2                        | \$1,021,836        | \$0                | \$1,021,836                   |
| 7 CDC Epi Lab H1N1 – Phase 1                         | \$192,691          | \$0                | \$192, 691                    |
| <b>Totals</b>  | <b>\$4,530,888</b> | <b>\$3,426,332</b> | <b>\$1,104,556</b>            |

*CDC Public Health Preparedness Grant (CDC)*

There is a net decrease of \$348,456. This reduction in funding was addressed by a reduction in service and supplies previously funded by this grant.

*Cities Readiness Initiative (CRI)*

The FY10 award is decreased by \$11,480. This reduction in funding was addressed by a reduction in services and supplies previously funded by this grant.

*State General Fund Pandemic Influenza Preparedness*

The FY10 award is increased by \$298. The Pandemic Influenza Preparedness budget was adjusted to reflect an increase in revenue and expense of \$298.

*Hospital Preparedness Program (HPP)*

This award is a decrease of \$73,034. The reduction in funding was addressed by a reduction services and supplies previously funded by this grant.

*HPP H1N1 - Phase 1*

The award in the amount of \$322,701 will be used by all participating hospitals to address two federal priority areas: 1) healthcare workforce protection and 2) expand healthcare surge capacity along the continuum of care.

*Fed Pan Flu - Phase 1 and 2*

The award in the amount of \$1,021,836 will be used to support local vaccination campaign efforts, antiviral distribution and administration, community mitigation and other associated pandemic and response activities. This will include hiring contract staff and funds to backfill existing staff.

*CDC Epidemiology Lab - Phase 1*

The award in the amount of \$192,691 will be used to address laboratory, epidemiology and surveillance functions related to H1N1. This will include hiring a temporary lab assistant, redirection of an existing epidemiologist, and procurement of supplies and equipment that will improve the lab's ability to process and report results.

## **CONTRACT HISTORY**

In FY07, CDPH created a single Comprehensive Agreement to replace previously individual agreements for CDC Public Health Preparedness Grant, Cities Readiness Initiative, Pandemic Influenza Preparedness, and Hospital Preparedness Program. This was done in an effort to integrate preparedness activities and to simplify the process for applying for separate funding streams. In FY08, CDPH presented the four awards in two agreements, the first being for the three programs funded by the CDC, and the second being for HPP, which was at that time being administered by the U.S. Department of Health and Human Services Office of Preparedness and Emergency Operations.

On October 21, 2008, the Board of Supervisors approved delegation of authority to the Public Health Administrator to execute the FY09 Public Health Emergency Preparedness Comprehensive Agreement with CDPH, which once again included all four funding sources in one agreement.

The FY10 CDPH Agreement will include the four on-going awards as well as funding for three new, one-time awards in one comprehensive agreement.

### *CDC Public Health Emergency Preparedness*

Since 2002, the County has submitted applications and been funded on a yearly basis. In May 2009, CDPH notified PHD of the allocation level for FY10, but guidance for this funding was not issued to Local Health Departments until August 27, 2009 for the term that began August 10, 2009.

### *Cities Readiness Initiative*

Since 2006, the County has participated in the Cities Readiness Initiative, a program coordinated by the Centers for Disease Control and administered by CDPH. The program's goal is to assist cities by increasing their capacity to deliver medicines and medical supplies during large-scale public health emergencies such as a bioterrorist attack or a nuclear accident. On August 12, 2009, PHD received approval of its work plan and budget. (See attached CRI Approval Letter.)

### *Pandemic Influenza Preparedness*

Since 2006, the County has received funding for pandemic flu preparedness. PHD was notified of the FY10 funding allocation on August 10, 2009.

### *Hospital Preparedness Program (HPP)*

This allocation represents the eighth year of HPP grant funding. PHD was notified of the FY10 HPP funding allocation on August 10, 2009.

### *New One-time Grant Awards*

FY10 represents the first year of funding for the following three awards: HPP H1N1 - Phase 1, Federal Pan Flu - Phase 1 and 2, and CDC Epi Lab H1N1 - Phase 1.

Funds allocated through the Hospital Preparedness Program are to be used to protect the healthcare workforce and to address medical surge needs necessary to respond to H1N1. Healthcare workforce protection activities include the mass vaccination of employees that work in hospitals, clinics and long term care facilities, to minimize absenteeism and maximize workforce availability to manage the surge resulting from this pandemic event. In addition, these funds should address the planning and development of workforce policies aimed at addressing absenteeism, isolation of patients with

influenza like illness, protection of staff and other patients in waiting rooms and emergency rooms, and the procurement of personal protective equipment to protect employees during this flu season.

Healthcare surge capacity activities include planning for the expansion of healthcare delivery beyond normal thresholds, identification of alternative methods of triaging patients aimed at lowering the impact to clinical services and emergency rooms, and improvement of hospital capacity to report in real time the level of bed capacity by type to local, state and federal officials who will monitor the impact on the healthcare system during this flu season.

The CDC has provided funds in two phases to support the medical/health response to flu for the fall and winter season. These funds are divided into two focus areas. Focus area 1: vaccination, antiviral distribution/dispensing and administration, community mitigation, and other association pandemic preparedness and response activities. Focus area 2: Laboratory, epidemiology, surveillance, and related response activities.

Examples of approved focus area 1 activities include, but are not limited to, recruitment and preparation of vaccinators, administration of vaccine, tracking of vaccine, communication with internal and external partners, costs associated with antiviral distribution and dispensing and community mitigation through data, guidance, and social networks.

Examples of approved focus area 2 activities include hospital and school surveillance activities, investigation of outbreaks, guidance for healthcare community, and laboratory enhancements to improve reporting.

#### *Contracts with Participating Entities*

The Public Health Department has used prior delegations of authority to execute agreements with participating hospitals, clinics, pharmacies, emergency medical services providers and individuals/other entities. For example, the Department has executed agreements with all 12 hospitals within Santa Clara County for the distribution of funds associated with the Hospital Preparedness Program and distribution of influenza antiviral medications. In addition, this authority has been used to execute agreements with subcontractors for the development of an emergency resource directory, consultation relating to Strategic National Stockpile training and exercise, development of a Public Health Alternate Care Site Annex, and consultation relating to improvements to the Public Health Department's Emergency and Medical Health Operations Plan

### **REASONS FOR RECOMMENDATION**

On August 10, 2009, the Public Health Department received a notice of award from the CDPH related to the Public Health Emergency Preparedness agreement in the amount of \$4,530,888 for period July 1, 2009 through August 9, 2010.

Of this amount, \$2,993,660 is for ongoing funding for Public Health Preparedness. The ongoing funds will be used for continued improvement of Public Health emergency operations plans, strengthening of surveillance functions including laboratory capacity, workforce training and public health surge capacity.

The new, one-time funding totals \$1,537,228 resulting from an increase in federal grant funding and deliverables associated with H1N1 supplemental funds to local health departments.

The new grant funding will be used to add an unclassified Warehouse Materials Handler position to assist with responsibilities specific to the receipt, storage and distribution of flu antiviral and H1N1 vaccines, and other prophylaxis medications. To support H1N1 response, staff are necessary on an ongoing basis to provide inventory management, deployment and resupply. These staff are key information conduit between the warehouse, DEOC and EOC. The Employee Services Agency supports this recommendation.

As part of the Public Health response, mass vaccination clinics may be necessary. Santa Clara Valley Medical Center and the Public Health Department along with other providers throughout the county are working to implement H1N1 vaccine clinics so that when the vaccine arrives, the community can receive the needed vaccine. SCVMC will operate vaccine clinics for its patients. The Public Health Department will focus on residents who do not have primary care providers or their provider has not registered to receive vaccine.

In the event we are unable to identify enough staff to fully operate the vaccination clinics, from registration to screening to vaccinations, SCVHHS may need to rely on contract staff to supplement county staff. Thus, the Public Health Department is continuing to explore the possibility of contracting with a health care services agency, such as Maxim Healthcare Services, to employ temporary medical personnel to give vaccinations. Maxim is working through the State with counties for this purpose.

One-time funding will also support two temporary Public Communications Specialists to assist with the overall Health and Hospital System Risk Communications plan related to H1N1. One position will assist the communications team in updating the public health website on a daily basis and monitor state and federal websites for changes in guidance to the general public, medical and school community. In addition, this position may assist in the development of pre-recorded messages to the public related to changing guidance and vaccine distribution. The second position will assist with communications related to the vaccine clinic campaign being organized by SCVHHS Ambulatory and Managed Care and the Public Health Department.

Other staffing actions may include: one temporary Medical Laboratory Assistant for the purpose of augmenting the ability of the Public Health Laboratory to receive and process influenza specimens; one temporary Epidemiologist II assigned to the Communicable Disease program to assist with surveillance, tracking and reporting of H1N1; and one temporary Associate Management Analyst B to assist with administrative coordination of H1N1 strategies including grant reporting and tracking requirements.

The funds will also support the purchase of new equipment, such as an additional refrigerator in the Public Health Pharmacy to store vaccine, and information systems upgrades to *MLab*, a software system used by the PH Laboratory to communicate with the State laboratory.

While the term of the FY10 agreement with CDPH extends through August 9, 2010, CDPH may amend the grant term for an additional year as it has done in the past. Therefore, both the delegation of authority to execute the CDPH agreement and the resolution delegating authority to execute contracts with participating hospitals, clinics, pharmacies, emergency medical services providers and individuals/other entities will expire on August 9, 2011.

## **BACKGROUND**

Under the direction of the Public Health Administrator and County Public Health Officer, PHD's Public Health Preparedness Program and Emergency Medical Services (EMS) Agency coordinate bioterrorism and other medical/health preparedness activities and lead the County's medical/health disaster planning and response efforts. PHD maintains the Department Emergency Operations Center (DEOC) that forms the core infrastructure for medical disaster response. The DEOC reports to the Medical Health branch of the County Operational Area EOC to coordinate medical/health response for incidents in which the EOC is activated. The Department also has a public health laboratory with Level B capabilities. Key staff from PHD, County Office of Emergency Services and Facilities and Fleet/EOC Logistics meet on a regular basis to maximize all ongoing activities and to ensure mutually beneficial and non-duplicated services.

As a participant in the Cities Readiness Initiative, the Public Health Department joined twenty other cities nationwide (chosen based on population and geographic location), in the development of operational plans to deliver medicines and medicinal supplies within a 48-hour time period during a large-scale public health emergency.

The primary goal of this initiative is to minimize the loss of life during a catastrophic public health emergency by providing drugs to the population identified within a 48 hour time frame. As a CRI recipient, PHD continues to coordinate planning and implement program activities to ensure that hospitals, community health clinics, and local public safety and emergency management agencies are able to mount a collective response to a public health emergency by providing antibiotics to county residents with 48 hours of the decision to do so.

Pandemic flu preparedness funding will be used to meet Federal and State requirements for preparedness activities. These requirements include mandates to work with and educate schools, businesses and the community to effectively respond to and recover from pandemic flu.

PHD continues to receive funding for the Hospital Preparedness Program. An annual application, required in order to be eligible for continued funding, requires a collaborative effort on the part of PHD and fund recipients.

### **CONSEQUENCES OF NEGATIVE ACTION**

Failure to approve the recommended actions may impact the Public Health Department's

ability to address changes to and receive funding for public health emergency preparedness and response activities.

### **ATTACHMENTS**

- PH Preparedness All Allocations Letter FY2010
- CRI Approval Letter FY2010
- FY2010 PH Preparedness Appropriation Modification
- FY2010 PH Prep Signature Authority Resolution
- Salary Ordinance Amendment No. NS-5.10.24