

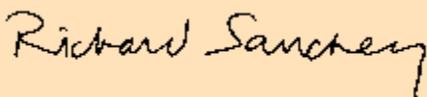


Director's Message

Employees throughout the Health Care Agency (HCA) responded with professionalism and purpose as measles was recently confirmed for the first time this year in Orange County (OC). I'd like to thank staff in Public Health Services (PHS) and Interim County Health Officer, **Dr. Nichole Quick**, for their collaboration and around-the-clock dedication to managing the ongoing disease investigation and the intense interest from members of the media, which helped us get the word out about the safe and effective vaccine. This response is an example of the great work we do here at HCA to protect and promote the health and wellness of residents and visitors in OC.

For a detailed timeline of the response, put together by the staff in Epidemiology, click [here](#) or turn the page.

Best,



Richard Sanchez



Peer-to-Peer: *Vanessa McDowell*

From Intern to Service Chief

"I've always known I've wanted to be a therapist." There was just something inside her that pulled her into therapy said **Vanessa McDowell**, Licensed Marriage and Family Therapist (LMFT) and Service Chief II within Adult and Older Adult Behavioral Health Services (AOABH). Vanessa said when she was a student at Loyola Marymount, she liked the idea of being able to talk to people and build relationships while "getting paid for it," (she laughs), and she said the elective courses on alcohol and drug use were, "informative," and something which just

seemed to click with her.

While she found herself drawn to therapy, finding her first therapy job was a challenge. So Vanessa decided she would volunteer, wherever she could, "I don't remember using Google, I think I used a phone book and I looked up 'alcohol and drug counseling programs.' I was young with no experience, so I called several places and volunteered to work for free, just to get my foot in the door. The door opened for her at the Adult Drug Court. So I started as an intern while continuing my education.

... continued on page 20

One Week+ in the

LIFE OF AN EPI RES

Amidst a background of the highest numbers of measles cases seen in the U.S. for decades, outbreaks in Washington, New York, and Northern California, and media articles about exposures at Los Angeles International Airport (LAX) and restaurants in neighboring communities, things were eerily quiet on the measles front in Orange County (OC). Potential exposures to measles cases in OC from other areas were quickly investigated by OC Health Care Agency's (HCA) Epidemiology (EPI) team. On April 15, 2019, EPI sent out an advisory to the health care community reminding them about measles, infection prevention measures, reporting and testing.

Fast forward to April 29, the first case of measles in an OC resident this year is confirmed by the Public Health Laboratory (PHL) late in the day. This case acquired infection through international travel but had visited several OC locations before the measles diagnosis was reported.

Measles is not new to EPI. Between zero and three cases of measles are reported in the OC each year, associated with travel to an affected area. Outbreaks of measles occurred in OC in 2014 (22 cases) and 2015 (35 cases), with the latter being part of a multi-state outbreak associated with Disneyland.

Responding to these large outbreaks and other high profile

Frequently Asked Questions

What should I do if I have been exposed to measles, mumps and rubella (MMR) in one of those locations in the press releases?

Review your vaccination history if you have not previously had measles. If you have been vaccinated, you are very unlikely to develop illness after exposure. Your health care provider can help determine if you are protected from measles based on your records and/or laboratory tests. Monitor your health for 21 days. Initial symptoms (i.e., fever, runny nose, cough, red eyes) most commonly appear 8-12 days after exposure to an infected person, with rash appearing a few days later.

Should I get a booster dose of measles vaccine (MMR)?

Most adults are considered protected if they have written records of 1 dose of MMR, unless they are in a group considered at increased risk for getting measles. Health care workers, college students, or persons traveling internationally should get 2 doses of MMR, separated by at least 28 days. Children routinely get 2 doses of MMR with the first dose



RESPONSE

Questions about Measles

at 12-15 months and the second dose at 4-6 years.

In the news, some people who have gotten measles have been vaccinated? Why is that?

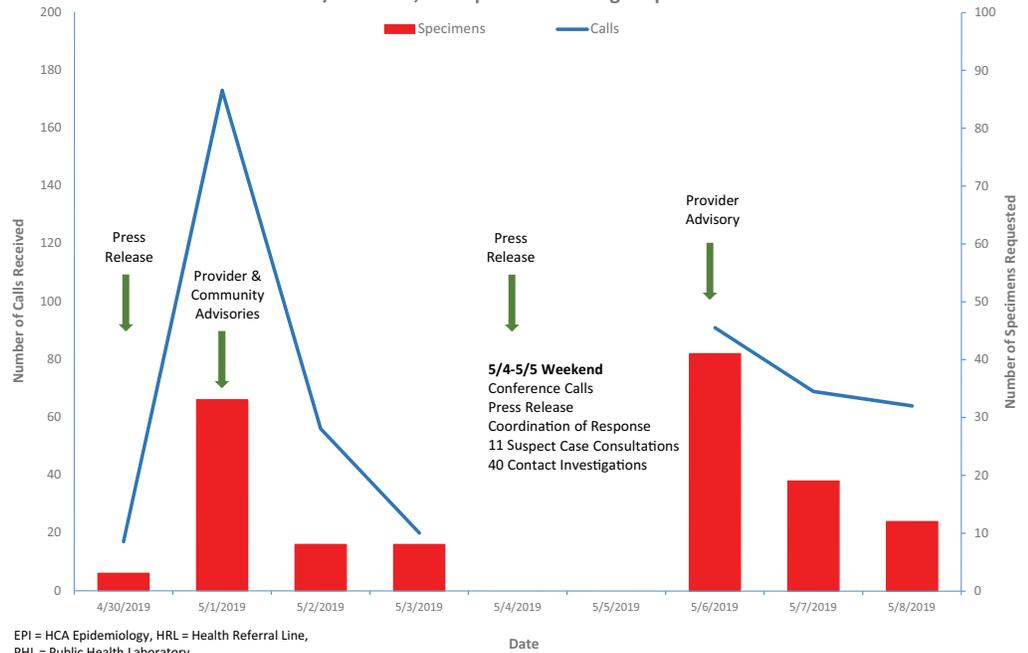
One dose of MMR is 93% effective against measles and two doses are 97% effective. Measles is very contagious and just being in the same room as someone with measles can cause you to be exposed. When so many people are exposed, it is not unexpected for a few people who were vaccinated to get measles; they generally have much milder symptoms.

What should I do if I think I have measles?

If you have been exposed to measles and develop fever, runny nose, cough, red eyes, or rash, stay home and call your health care provider to discuss your symptoms. If you need medical attention, inform your health care provider of your possible measles exposure and symptoms over the phone so appropriate precautions can be taken when you are seen.

One Week+ in an EPI Response - April 30 to May 8, 2019

EPI/HRL Calls, PHL Specimen Testing Requested



communicable diseases requires a coordinated response with EPI, PHL, Public Health Nursing (PHN), Family Health (Health Referral Line [HRL]), Public Information Officer (PIO), Executive Management, and others, depending on the disease. With the report of the first measles case in 2019, EPI springs into action, following up exposures at health care facilities, businesses and a public movie theater. With the [press release](#) on April 30 and health care provider and community advisories on May 1, a surge of calls from the public and reports of suspect measles cases come in. The EPI response is quickly supported by the Family Health Referral Line (see related story on [page 11](#)), which fields dozens of calls each day, PHN, along with a contracted surge nurse. In addition,

the PHL plays a central role in outbreak response by conducting timely testing of all suspect cases requested by EPI.

Late on May 3, the second case of measles is confirmed in the OC, this time in an infant too young to have been vaccinated and with no international travel exposure. This case sought medical care several times in OC while infectious. Simultaneously, EPI received report of a case in Long Beach who is a student at the University of California, Irvine (UCI) and visited other public locations in the OC and Los Angeles (LA) while infectious. A second press release goes out and EPI staff spend the weekend coordinating response with surrounding jurisdictions and with UCI, and working with a local

... continued on page 17

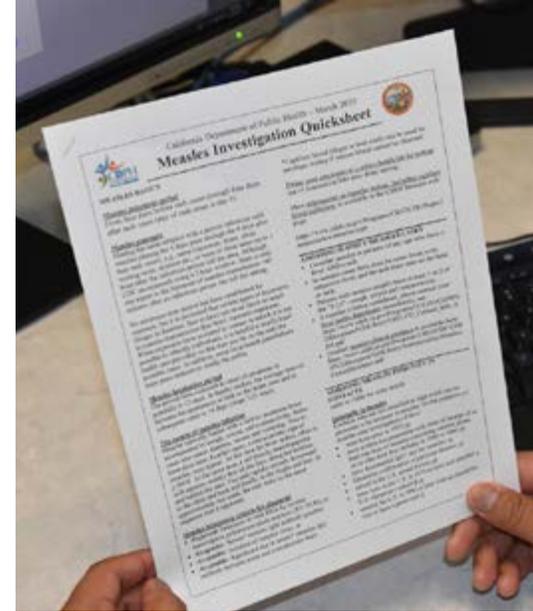
NURSES:

Outbreak, Opioids & OC ACCEPT

As news broke in late April of measles in Orange County (OC), the majority of Public Health Nurses (PHN) in the OC Health Care Agency (HCA) had already gone through their latest training to assist in a disease outbreak. Exactly one week before the first 2019 measles case was confirmed in OC, the first group, of eventually all PHN took part in Epidemiology 101 Training (Epi 101). This was the first of four Epi-training courses being planned for PHN with the subsequent trainings (Epi 102, 103, 104) targeted on the nurses participating in the Public Health Services (PHS) Preparedness teams (Clinical Response Team and Investigation Response Team, see related story [page 6](#)). In addition to the Epi 101 training, nurses

were also given an update on opioids, which included the latest trends in OC and nurses were given an introduction into the [OC ACCEPT](#) program (Acceptance through Compassionate Care, Empowerment and Positive Transformation).

The Epi 101 training, given by **Dr. Michele Cheung**, Deputy Medical Director of Epidemiology and Assessment (E&A), focused on key concepts of communicable diseases, principles of epidemiology and steps of an outbreak investigation. Dr. Cheung said each disease usually will have its own case definition based on the clinical signs and symptoms and laboratory test results. Understanding the key infectious disease concepts,



such as the incubation period (i.e. time from when a person is exposed to the disease to when he/she develops symptoms) and communicable period for the disease (e.g., time during which a person can spread a disease) helps investigators figure out a timeline for the transmission of the disease and determine who might have been exposed to the infected person while he/she was contagious. In their training, PHN were given the chance to practice finding those answers during an exercise where the nurses paired off. They interviewed each other (utilizing





“There really are structural, physiologic changes in the brain of someone who is addicted and someone who is not. This reinforces the idea that opioid misuse is a real disease. That’s important because there is still the mentality among some people that this is a choice that people can just stop using these drugs.”

Dr. Nichole Quick
Interim County Health Officer

pre-fabricated case and contact scripts) to better understand the signs, symptoms and transmission of the “disease du jour” (measles), to practice how to conduct case and contact investigations, and to familiarize themselves with the investigation forms. Although the focus of this practice session happened to be measles, Dr. Cheung explained how PHN could prepare for any disease before responding in an outbreak, “Most of the diseases you’ll encounter will have a case investigation form to guide you to know what questions to ask. It’s also good to read up on the disease if you’re called on to

help and to look over the investigation forms beforehand.” Upon arriving for duty, responding surge PHNs will be given a briefing of the situation, resource materials and just-in-time training as needed.

Nurses were then given some encouraging but also concerning information on [opioids](#) in OC from Interim County Health Officer **Dr. Nichole Quick**. She said there’s been a decrease in the county in the number of opioid-related overdose deaths (OD) from prescription opioid use. But the number of OD deaths from synthetic forms of opioids has been increasing in

OC. She also said the county has a higher overall rate of overdose deaths from opioids than the state average. California averages just over five opioid related deaths per 100-thousand residents while OC averages nearly eight. Dr. Quick told nurses opioid use can become an addiction, because it impacts the neurobiology of a person, “There really are structural, physiologic changes in the brain of someone

... continued on page 20

1. Measles Investigation Quicksheet, part of training for public health nurses. **2.** Nurses at Epi 101 training listening to Jenna Sarin, Director Public Health Nursing.



A SUMMIT for LESSONS AND

“The work that we do is so incredibly important and your efforts are greatly needed by the community and public.” That’s the welcome given to several OC Health Care Agency (HCA) personnel who attended the Southern California Preparedness Summit in Riverside in May. The daylong event offered detailed insight into the professional and personal experiences of many who have mobilized and responded to recent emergency incidents in California. In addition to those emergency responses, the summit topics included cybersecurity, health care facility evacuations, behavioral health response and counter-terrorism. Hundreds of medical and health professionals as well as local emergency management from Orange, Riverside, San Bernardino, San Diego, Imperial, Inyo and Mono counties attended the valuable summit.

Attendees heard about the planning, responses and recovery from many incidents including: the [Thomas Fire](#); the [CAMP Fire](#); and the evacuation of one of the two [hospitals](#) forced to move during the [Tubbs Fire](#). There were also discussions on processing and dealing with trauma which can be experienced by emergency personnel as well as those who respond to incidents.

The summit planning team included **Donna Mayer**, who recently joined

HCA from Riverside County, as Health Emergency Management Chief with Regulatory/Medical Health Services. Donna has been working with our county partners to lead the annual summit for the past three years. “This is an annual event which brings together medical and health professionals who are dedicated to serving the public with the best and most up-to-date practices developed from ‘real world’ situations. It also gives everyone from our surrounding counties a chance to network and share information which will be invaluable when we have to mobilize together to respond in any emergency.”



Public Health Creates “Nurse Re

There’s a new opportunity for Public Health Nurses to serve in lead roles on one of two teams, which will be called upon if a public health response or a larger mobilization is needed. Director of Public Health Nursing, **Jenna Sarin** made the announcement to nurses during their recent all division meeting, “This is an effort to build capacity and maintain assurance. Towards those goals, Public Health Services (PHS) has established the formation of Clinical and Investigation Response Teams.

At the direction of the Public Health Nursing Director, these teams will work with Epidemiology and Assessment (E&A), Health Disaster Management (HDM) and staff throughout Public Health Services to train, exercise and respond to communicable disease outbreaks and other circumstances posing threat to public health.”

Jenna said the Clinical Response Team will serve as the lead for communicable disease response efforts in the community. Examples

PREPAREDNESS



2020 will be the Summit's fourth year in existence. Each year the planning team works diligently to improve and create an event that surpasses everyone's expectations. 2020 will be no different;

Orange County [Emergency Medical Services](#) looks forward to its new partnership with other counties and supports this worthy event.

◀ "One of the best events I've been to, well organized and the speakers were great. Could easily expand to 2 or 3 days and maybe add vendors to showcase their products," **Mike Chiles**, Emergency Medical Services-Health Emergency Management, Communications Coordinator

“ The conference was great in terms of both presentations and networking. There was a good mix of expertise and areas of focus. It seemed there was something for everyone! It was very well-organized. ”

— **Vicki Sweet**, MSN, RN, CEN, FAEN, ALS/CQI Coordinator – OCEMS

Response Teams”

of the activities which they will be involved include: clinic set-up and administration of post-exposure prophylaxis and treatment and gathering of necessary specimens.

She said the Investigation Response Team will serve as surge capacity to investigate cases including contact tracing. This will be done at the direction of the E&A Medical Director and Program Manager in communicable disease response efforts.

In partnership with E&A and HDM,



planned training efforts include Epidemiology Principles, Specimen Collection and/or Laboratory Safety Principles, as well as Clinical Skills Overview. In addition, teams will participate in local and state prepared exercises and have the

opportunity to maintain clinical relevance through every day PHS clinics and activity.

▲ **Jenna Sarin**, Director Public Health Nursing announcing Nurse Response Teams to nurses at Epidemiology 101 Training.

MEET TWO NEW CHIEFS OF C

“Working in the jails is the best kept secret there is. The people I work with make every effort to provide quality care to the patients that we serve. Despite the challenges, we all work together to make a difference. This is the reason why I continue to be passionate about the work that I do.”



Joanne Lim
Chief of Operations -
Correctional Health Services

That's how **Joanne Lim**, Chief of Operations for Correctional Health Services (CHS) describes her outlook and career at the OC Health Care Agency (HCA). She started working as a nurse with HCA in 2007 after being recruited by the CHS training educator at the time, **Erin Winger**, the Deputy Agency Director of CHS.

Joanne has worked her way up through CHS, serving as Nursing Senior, Nursing Supervisor, Director of Nursing and now Chief of Operations. As a self-confessed “accidental manager” she believes in the positive influence a mentor can have on someone. To pay it forward, she carves out time to teach Nursing Leadership and Management as an adjunct faculty member of Azusa Pacific University. Joanne believes that working in corrections requires resourcefulness and strong collaboration with various entities to provide the services to this special population. “We are looking at our patients’ health needs

while they are with us and what they need when they leave. The ultimate goal is for patients to be released and hopefully live better lives.”

Joanne started her new role at CHS in March. She sees her responsibilities as strengthening relationships between departments to secure functionality in the growth of CHS. When she's not at work or teaching, she's busy with her 10-year-old twin boys! “They are great kids and they're really curious about my job as are many people.” Overseeing an organization that operates 24/7 is a challenge which is why Joanne also enjoys traveling with her kids. “It is a great way for me to relax and the easiest way for them to learn and broaden their perspectives.”

SUPERVISOR'S TOUR & BRIEFING



Fourth District Supervisor Doug Chaffee recently took a tour and offered praise to staff at the OC Health Care Agency (HCA) Public Health Lab (PHL) and clinics at 17th Street in Santa Ana. The supervisor received a briefing on the facilities and on HCA's role in public health. Among those addressing the supervisor were HCA Director **Richard Sanchez**, Public Health Services (PHS) Deputy Agency Director **David Souleles**, Interim County Health Officer **Dr. Nichole Quick**, Director of Public Health Nursing **Jenna Sarin** and PHL Director **Dr. Megan Crumpler**.

“With my staff, I had the pleasure of visiting the Orange County Public Health Laboratory and Health Care Agency Clinic,” said Supervisor Chaffee. “The agency provides an ongoing range of testing of infectious diseases and clinical

OPERATIONS



Cheryl Meronk
Chief of Operations - Regulatory/
Medical Health Services

“I want to make sure we’re doing the right thing for the public by keeping people healthy and safe. I’m also here to ensure our teams are supported to do their best jobs possible. It’s a privilege to be a part of the OC Health Care Agency (HCA). I am highly impressed by the level of our staff, their professionalism, their technical knowledge and the vast amount of responsibility they have.”

Cheryl Meronk describing her job responsibilities since starting in March as Chief of Operations for [Regulatory/Medical Health Services](#), (R/MHS). She said she’s always enjoyed public service and has tremendous respect for the responsibilities R/MHS, along with HCA, has for ensuring public health, and the health of the County of Orange’s 18-thousand employees, “As I go through my daily life I think, ‘there are so many areas where my team is involved in that.’ I like that. It’s just an enormous responsibility when it comes to how many parts of our daily lives in OC involve either hazardous substances or things that have the potential to pose a health risk. I’m proud and happy to say our teams are

working to keep the community safe on a daily basis.”

Before joining HCA, Cheryl was Director of Strategic Development and Community Relations at CalOptima. Education-wise, she joked that she feels like she’s been to every school in OC, with a Bachelor’s in Psychology from the University of California, Irvine; a Master’s in Gerontology from California State University, Fullerton and an M.B.A. with an emphasis in Health Administration from Brandman University, part of the Chapman University System. In her spare time, she enjoys cooking, especially the challenge of ethnic foods. Cheryl recently took a culinary class on Thai food, while in Thailand on a trip with her family.

services. We are proud of the work the PHS employees undertake to ensure the protection of the community-at-large and to provide individualized health care services to families, individuals and people with special health care needs.”

The supervisor was invited to the lab said Dr. Crumpler, “to show him what we do here, what our role is in protecting the health of the community. We also talked about some of the high-profile things we do such as testing for bioterrorism agents as well as surveillance of any food-borne illnesses.”

The visit offered a chance to give the supervisor insight and understanding into public health said Dr. Quick, “We provided the supervisor and his staff information on our major initiatives and explained what we do in public health. The visit also gave the supervisor an overview of how we intersect and work with other County departments.”



1. Dr. Megan Crumpler (right) answering questions during PHL tour. Pictured (L-to-R) Paulette Chaffee; David Souleles, Deputy Agency Director, PHS; Dr. Nichole Quick, Interim County Health Officer; and Fourth District Supervisor Doug Chaffee. **2.** Fourth District Supervisor Doug Chaffee and wife Paulette Chaffee, meeting Charlotte Egan, 50-Year PHS Microbiologist, (now retired).

Peer Into the Future

After months of hard work on the Peer Workforce Development Initiative, staff with Behavioral Health Services (BHS) took a little time out to celebrate their achievements so far. They also 'peered' into the future of what's next as they continue their goals towards expanding and supporting a peer workforce that is valued by the BHS system. Peers (known as peer specialists, parent partners, youth partners or peer navigators) are an integral part of our BHS system, made up of people who use their lived experience of recovery, along with skills acquired from training, to deliver services in behavioral health, which promote recovery and resiliency.

BHS staff, under the guidance of [Resilience Inc.](#), developed action plans in October, 2018, focused on three key areas of workforce

development: 1) creating a wellness culture and reducing stigma; 2) developing an organizational understanding of the peer role; and 3) strengthening the peer workforce through retention, supervision and developing a career ladder. Three, Activate Resilience Teams (ART), made up of managers, service chiefs, clinicians and peers from across BHS, have been working on implementing these action plans. The effort is part of the Peer Workforce Development Initiative made possible thanks to a grant from the California Office of Statewide Health Planning and Development ([OSHPD](#)) to Resilience, Inc.

Over the past six months, the teams have established a Workplace Wellness Advocate program (in collaboration with the BHS Trauma Informed Care Collaborative);



developed and administered a survey to gauge BHS staff understanding of the peer role; received executive management buy-in for initiating a Peer Specialist class and comp study; developed a comprehensive description of peer roles and responsibilities; adopted peer and peer supervisor self-evaluation tools; and created a peer orientation program for newly hired peers.

In mid-April, the ART members, Resilience Inc., and BHS supervisors and managers gathered to celebrate accomplishments, plan for future work and enjoy lunch. Among the many speakers were Scott Palluck, Director of Operations for Resilience Inc., and Gene Johnson, CEO of Resilience, Inc., both of whom have played critical roles in developing the organizational peer workforce goals. **Dr. Jeffery Nagel**, BHS Deputy Agency Director, also spoke, providing words of appreciation and encouragement, "We all play a role in transforming our behavioral health system to be more





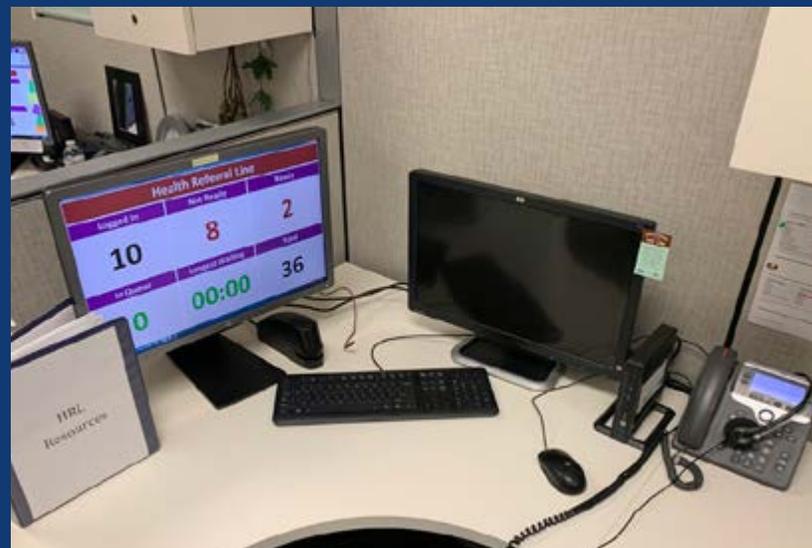
Answering the Public's Call ON MEASLES

“Most callers have been calm and just want information about measles and vaccinations,” said **Dr. Tamarra Jones**, Division Manager with the Family Health Division. The callers have been dialing the OC Health Care Agency (HCA) [Health Referral Line](#) (HRL), a toll free number for OC residents seeking assistance with health related questions or resources. The measles cases in OC did cause an increase in the number of calls to the HRL, said Dr. Jones, and many of those calls were related to clarifying information heard in the media, “The most common questions were about getting vaccinated, confirming vaccination status and how to get a record of vaccination history.”

Dr. Jones said the HRL normally receives approximately 25 calls per day, which are answered by the call center agents. “The staff is very helpful and very patient with the public and they go the extra mile in providing information,” said Dr. Jones. When the public was notified about measles, the number of calls increased, exceeding more than 100 on one day, but by the end of the week after the public notification, “calls had significantly dropped and have been back around their regular numbers since,” said Dr. Jones.

The HRL operates from 8 a.m. until 5 p.m., Monday through Friday, to answer general questions from the public, but when a public health event occurs, such as the recent measles cases, hours and staffing are expanded as necessary to respond to increased demand. “HRL call center agents have talking points and important details regarding topics of interest to the public and that information is updated regularly to assure callers receive current and correct information,” said Dr. Jones.

Meantime other information on HCA services and community resources is also available to callers at the toll free number, (800) 546-8448. The information the call center agents provide



comes from various resource lists and the HCA website, where you can find the latest on measles by clicking [here](#).

◀ Service station used by Call Center Agents at Health Referral Line. Information booklet on left, while computer screen provides number of callers 'In Queue' and 'Longest Waiting' caller.

recovery oriented. Thank you for your willingness to go on this journey.” The group was also entertained by Peer Specialists **Amelia Northcliff** and **Maria Marin** who delivered an amazing performance dancing and singing “folklorico.” Certificates were given to each ART member to acknowledge their tireless efforts on action plans to help achieve the program’s goals. Although there is a lot of work yet to be done, the Peer Workforce Development Initiative is off to a great start with talented and dedicated BHS staff leading the way.

1. “Folklorico” with Peer Specialists Amelia Northcliff and Maria Marin. 2. Those attending the Celebration Event.



Accolades and Thank you

Nurses from throughout the OC Health Care Agency (HCA) were celebrated during National Nurses Week in early May. The celebration included a Nurses Recognition ceremony at the Public Health Learning Center, which was attended by nurses from Public, Correctional, Medical/Regulatory and Behavioral Health Services. The nurses were welcomed by Director of Public Health Nursing (PHN) **Jenna Sarin** who said nurses have a “can-do” attitude, “This is a group that when we have a need, we go and ask and your answer is always, ‘How can we help, and what can we do better?’ Thank you for the expertise and professionalism that you bring every day.”

The nurses were also praised for their dedication and commitment, “day in and day out,” by Public Health Services (PHS) Deputy Agency Director **David Souleles**. In reference to recent measles cases, he said HCA nurses are ready for anything because of the history of measles in Orange County (OC), “With measles in 2014 and 15, for better or worse, you and OC are better positioned to respond because of the experiences we’ve had and the training we’ve put in place.” David also invited nurses who make up the new Clinical and Investigation Response Teams to join him for the presentation of a resolution from the Board of



Supervisors (BOS). The resolution, in part, reads: “... commends our Health Care Agency nurses for their contributions to maintaining the general health of our community...one life at a time.”

Nurses were also encouraged to hear about the confidence the public has in their profession. **Steve Thronson**, Deputy Agency Director of Regulatory/ Medical Health Services cited a Gallup Survey which found 84% of those questioned hold nurses in High to Very High regards. He said one reason is the dedication of men and women in nursing. “Nurses care like family,”



1. National Nurses Week Proclamation from the Board of Supervisors.
 2. Nurses from throughout HCA at Celebration of National Nurses Week, 2019. 3. Receiving BOS resolution. Pictured (L-to-R) Nicole Dunn, Senior PHN III; Maria Soza, PHN; David Souleles, PHS Deputy Agency Director; Larry Pritchett, PHN III; Sharon Stock, PHN II; Marcia Salomon, Supervising PHN; Bertha Hernandez, Senior PHN; Diane Vu, Senior PHN; and April Orozco, Supervising PHN 4. Welcome to nurses from Jenna Sarin, Director Public Health Nursing.

ou to Nurses



said Steve, “You are saving lives and you are heroes.” That sentiment expressed in a letter to nurses, from a nurse, **Erin Winger**, Deputy Agency Director of Correctional Health Services (CHS). Her words were delivered, by a nurse, CHS Chief of Operations **Joanne Lim**, “Nurses are the hand you hold during the most challenging life events, we are your voice when you cannot speak for yourself, we are your trusted advocates, we are your teacher/counselor when you receive a new diagnosis, we are by your side with compassion and care through all the stages of your life.”

And that ‘heart attitude’ was recognized on behalf of **Dr. Jeffrey Nagel**, Deputy Agency Director of Behavioral Health Services (BHS), who was represented by **Brett O’Brien**, Director, Children, Youth & Prevention BHS, “When good people get caught up in a disease process, or when people do things because of a chronic disease, I believe our nurses and nurses in general, have the capacity of seeing people as human beings and serving them with compassion.”

On Guard for BIOTERRORISM

As part of its mission to protect the public, staff from the Public Health Laboratory (PHL) provided Sentinel Lab Bioterrorism (BT) training to more than 40 clinical lab scientists from hospitals and clinics throughout Orange County (OC). Among their duties, sentinel clinical laboratories serve as the foundation for quickly recognizing potential viruses, bacteria or other germs which could be used in a bioterrorist attack and for initiating an appropriate response. For more on sentinel labs click [here](#) and for more on bioterrorism threats click [here](#).

The training included how to perform “rule-in” or “rule-out” testing for agents of bioterrorism. The laboratorians are responsible for carrying out this testing on samples brought to their labs. If a sentinel laboratory in OC cannot “rule-out” a suspect BT agent, they are required to send the sample to PHL for additional testing and confirmation.

The training also included how to submit samples, safety guidelines for the labs and making sure the work is properly documented said **Dr. Megan Crumpler**, PHL Director, “This training offered a great opportunity to work closely with our sentinel laboratory partners and provide updates on testing protocols, Centers for Disease Control and Prevention (CDC) form completions, sample submission and biosafety in their laboratories. During the session there were great questions and discussion from the group and we received very positive feedback in the evaluation.”

The feedback included comments such as this from one participant: “I had a really great time at the training; it was a great refresher – especially for information on filling out and completing the CDC forms.”

It wasn't long before PHL staff found out the training paid off. Just one week after the training, one attendee called to say her manager asked her why she became suspicious that she had Brucella when the testing she was doing, gave her inconsistent results. She told her manager that she attended our workshop two days earlier and “learned how to be suspicious of such reactions. She said she had Brucella on her mind.”



▲ Staff who presented the training, (L-to-R) Dr. Megan Crumpler, PHL Director; Karen Galliher, Supv PH Micro; Tuminh Pham, PH Micro II; and Lydia Mikhail, PHL Manager

LAB OLYMPICS



▲ Lab Olympic “Medal” winners: (L-to-R) Lisa Perez, Lab Asst.; Stacy Dykman, PH Micro I; Tania Chiem, PH Micro II; Radhika Patel, PH Micro I; Mihyun Kim, PH Micro I; David Maciel, Lab Aid; and Ann Yang, Lab Asst.

In celebration of Laboratory Professional Week, the Public Health (PH) Laboratory held their 2nd annual Lab Olympics. Relay teams of seven lab employees competed to be the fastest in timed trials to complete a specimen test from start to finish. The different relay stations included transcribing a laboratory test request onto a test request form, checking for proper labeling, pouring off the specimen, pipetting the specimen into the test device, and then reading and recording final results. All teams finished under four minutes with the winning time at three minutes 19 seconds.



EVERYONE COUNTS

Going Forward with POINT IN TIME COUNT

The number of homeless from the Point In Time (PIT) count in Orange County (OC), has been submitted by the Board of Supervisors (Board) to the federal government. The PIT counts provide “crucial data” to ending homelessness according to this [report](#) from SAHMSA (Substance Abuse and Mental Health Services Administration). In addition the PIT count is important for determining funding for homeless services according to this [report](#) from the State of California. Health Care Agency (HCA) staff took part in the count, with many working multiple shifts. Among the HCA volunteers, **Jason Austin**, Division Manager,

Behavioral Health Services Homeless Coordinator, “This year’s Point in Time Count was incredible to be a part of. The community came together to directly count the number of people experiencing homelessness. Seeing this information being gathered and knowing it will be used to change people’s lives, is an amazing thing.”

The information is crucial for the County of Orange (County) ‘System of Care’ which provides customized care to individuals. The County has five components in the System of Care and the OC HCA plays a major role. Among HCA’s duties, [Outreach & Engagement](#), [mental health](#)

[and substance use services](#), [Whole Person Care](#) and [Comprehensive Health Assessment Teams-Homeless](#) (CHAT-H).

You can find more information about the homeless in OC which was gathered during the PIT count by clicking [here](#). The count was done for the first time by using a secure mobile app and by reaching out directly to individuals and families instead of conducting a ‘sampling’ of areas in the county. The results in OC are broken down into many areas including number of homeless veterans, how many homeless have family in OC and how many have jobs. As for the numbers, volunteers, over two days, counted 6,860 individuals experiencing homelessness in OC. Of those, 2,899 were sheltered and 3,961 unsheltered. The next count is set for 2021.



▲ (L-to-R) Karen Galliher, Supv PH Micro with Angelica Torres, PH Micro II. Angelica correctly guessed most number of pets to their owners in PHL. (Felicia, bearded dragon, pictured on screen.)



▲ (L-to-R) Tiffany Rios, PH Micro I; Karen McLean, PH Micro II; Samantha Hallis, PH Micro I; Marisa Reed, PH Micro I; Charlotte Egan, PH Micro II (ret.); Vida Mofidi, PH Micro II; and Joe Guzman, Supv PH Micro



▲ (L-to-R) Kim Phan, PH Micro II and Jeanette Salvador, Staff Asst.



▲ (L-to-R) Monique Marquez, Lab Asst. and Vicky Tran, PH Micro II

Sexually Transmitted Disease *Express*

The OC Health Care Agency (HCA) 17th Street Testing, Treatment and Care (TTC) Clinic reports initial success as TTC takes part in a nationwide study to better understand the impact of ‘express testing’ for Sexually Transmitted Diseases (STD) including human immunodeficiency virus (HIV). TTC is one of just seven locations across the country selected to participate in the STD Express Data Collaborative thanks to a grant from the National Association of County and City Health Officials (NACCHO).

The TTC Clinic offers “Quick Check,” which is a walk-in service held every Thursday afternoon to provide a sexual health screening to individuals, under certain criteria. Since being offered for six months, Quick Check has provided express services to 105 clients. The average appointment length is only 37 minutes from check-in to check-out. That ‘express service’ is a success said **Dr. Christopher Ried**, Medical Director for HIV/STD services at HCA, “At a time when STD rates are at historic

highs and the call nationwide is to re-open shuttered STD clinics, Orange County’s STD clinic has consistently remained on the cutting edge of STD care with initiatives such as patient self-swabbing and ‘express’ services.” He said given the success of Quick Check, the TTC Clinic is looking to expand its hours.

Studies have shown express testing for STDs can increase the number of people being tested, while reducing costs and reducing the time it takes for a test to be done, therefore, reducing the time before a client receives treatment. The goal of the NACCHO grant is to better understand the role of express clinics for providing quality services that advance STD prevention efforts. The grant allows for the evaluation of express services across the seven national sites to assess the outcomes related to treatment, capacity, cost and cost effectiveness as well as patient satisfaction.

The “express” services, or triage-based STD testing, is



Express Testing



done without a physical examination. The criteria for clients at TTC is that they have no STD symptoms; they have not been exposed to an STD; and they are an existing TTC Clinic client. The services offered include HIV testing as well as screening for chlamydia, gonorrhea and syphilis. Clinic staff will directly contact clients with positive results, and schedule for a follow-up appointment. STD results are available online and over the phone while HIV results are only available in-person or over the phone.

1. Entrance for TTC Clinic. **2. and 3.** Exam rooms at Testing, Treatment and Care (TTC) Clinic at 17th Street in Santa Ana. TTC is one of seven sites taking part in the Sexually Transmitted Disease (STD) Express Data Collaborative.

One Week+ in the Life of an EPI Response

continued from page 2

hospital to track down exposed persons who are at high risk for severe illness. Contact investigations continue and additional suspect cases, calls and specimens start pouring in. Fortunately, transmission from these cases were limited, and things quiet down quickly.

If cases were to continue, it is reassuring to have plans in place to help support the surge needs to support case management and contact investigations, clinical services, laboratory testing, public and provider calls and media responses. Earlier this year, Public Health Services (PHS), in conjunction with Emergency Medical Services, developed plans for Preparedness Teams including a Clinical Response Team and an Investigation Response Team, (see related story on [page 6](#)). The teams received their first training with EPI in February, and all PHS nursing staff received an Epidemiology 101 training in April, which included measles case management and contact investigation practice (see related story on [page 4](#)). PHS deployed these teams for the first time to support this measles response and they assisted with blood draws to test for immunity of exposed people, specimen collection on suspect cases, and contact follow-up. As the response draws to a close, updated interview forms and investigation processes in EPI are being implemented based on lessons learned and a hot-wash at the end of the event will help identify additional ways we can streamline processes as part of EPI's continuous quality improvement activities. Every investigation and response brings new challenges, PHS is continuously prepping to act quickly and efficiently to protect the public's health.

For updates and information about measles in Orange County, please visit www.ohealthinfo.com/measles.



For Health

Time: 25 minutes

Servings: 8

Ingredients:

1 teaspoon grated lime zest (about 1 lime)

½ teaspoon salt

½ teaspoon ground chili powder or ground chipotle

1 mango, peeled and cut into thick slices

½ medium pineapple, cut into rounds

½ medium papaya, seeded and cut into thick wedges

2 tablespoons lime juice (about 1 lime)

Directions:

1. In a small bowl, stir together the lime zest, salt and chili powder. Set aside.
2. Brush fruit with lime juice.
3. Heat grill to 400°F or prepare hot coals. Arrange fruit evenly on grill rack and cook about 3-4 minutes per side.
4. Transfer fruit to a large platter. Sprinkle with lime zest, chili powder and salt mixture. Serve warm.



TROPICAL FRUIT PLATE

Summer arrives this month! It's that time of the year when we fire-up the barbeques and spend more time outdoors.

This June during Great Outdoors Month,[®] spend time with family and friends enjoying your favorite outdoor activities such as hiking, biking, swimming or walking. Don't forget to take a healthy snack with you to keep you energized! This can be as simple as making your own trail mix! Just combine your favorite unsalted nut, cereal and dried fruit.

If you plan to barbeque, try grilling fruit for a special dessert. The flavors of the fruit will intensify as the natural sugars caramelize and the grill marks on the fruit will look amazing. Surprise your family and friends with this sweet treat at your next barbeque by making this Tropical Fruit Plate!

Swapping Healthy Drinks for Sugary Drinks



Public Health (PH) nutritionists served up some tangy, sweet, herbal and tropical drinks to Orange County (OC) residents for Rethink Your Drink Day on May 8. (Check some of the recipes here.) The flavored waters were given out to highlight the benefits of choosing water instead of sugary drinks. Shoppers got to sip the drinks at stores throughout OC. They were given different recipes to flavor their water and to encourage to make drinking water the healthy choice. One shopper shared, “I think it’s great you all are out here motivating people to drink more water instead of sugar-sweetened beverages, especially with diabetes being so prevalent in the Hispanic community.”

Rethink Your Drink Day is a State-wide Day of Action in California hosted by the CalFresh Healthy Living program. Research has shown that consuming too much sugar, contributes to obesity and leads to risks such as type 2 diabetes, heart disease, arthritis, asthma and certain types of cancer. In OC, 1-in-5 adults reports being obese and the rate of diabetes has increased by 22.4% between 2005 and 2014. In fact, sugar-sweetened beverages represent the leading source of sugar in the American diet.

Living healthy doesn’t have to be hard. Making small changes such as choosing a healthier drink can

lead to big victories for your overall health. For example, naturally-flavored water that is infused with fruits or herbs (such as mint, basil or rosemary) is refreshing and healthier than sugar-added beverages including soda, sweetened teas and sweetened coffees, along with energy and sports drinks. **Mari-det Ibanez**, Administrative Manager of OC Health Care Agency Nutrition Services shared, “This annual activity allows OC residents to gain ideas on how to make healthy choices. In doing so, together we can become a healthier OC.”

To learn more about Rethink Your Drink Day click [here](#) or visit myHealthOC.com for more tips.

1. Flavored water given at Northgate Market in Placentia. Pictured on left Sylvia Aguas, Community Health Assistant II; on right Champion Mom/Peer Educator Maria Cortez and in center Maria’s daughter Kathia.

2. Display at Superior Market in Santa Ana. Pictured (R-to-L) Gina Navarro, Community Health Assistant II; Guadalupe Melchor, parent volunteer; and Guadalupe’s son Brandon.



Peer-to-Peer

continued from page 1

I was eventually hired as a Mental Health Specialist and continued my education, while in Drug Court, to earn a Master's in Clinical Psychology, with an emphasis in Marriage and Family Therapy." Vanessa is now a Licensed Marriage and Family Therapist. "Looking back on it, I don't know where I got the guts to make those initial calls that got me started."

With her foot in the door at the OC Health Care Agency (HCA), Vanessa poured herself into her work, "As soon as I started. I was in the field of Substance Use Disorder (SUD), I really connected. I liked the people, I liked the long-term therapeutic relationships and seeing the change in people."

In her new role as a Service Chief II, she'll continue to

work with SUD, while adding responsibilities from the mental health area. Vanessa said she's looking forward to continuing to learn and grow in her career with the HCA and to have a hand in the great work that is being done here.

Those who have worked with her, have said Vanessa goes above and beyond in her duties and is a team player. Vanessa said it's "flattering" to be recognized by her colleagues as a Peer-To-Peer recipient because, as Vanessa put it, "We have great therapists providing great services. It is exciting to see all the programs that are available for people in our community and that are providing quality treatment."

Nurses: Outbreak, Opioids & OC ACCEPT

continued from page 4

who is addicted and someone who is not. This reinforces the idea that opioid misuse is a real disease. That's important because there is still the mentality among some people that this is a choice that people can just stop using these drugs." She also gave nurses an assessment of the medicines being used to treat opioid addiction, which are naltrexone (Vivitrol), methadone and buprenorphine.

After the Epi 101 Training and Opioid Report, nurses then heard from **Lu Pham**, Service Chief I with OC ACCEPT, and **Mark Ramirez**, LMFT. Lu told nurses there is a great need for the work being done by the program as staff works with clients to eliminate barriers and affirm people in their sexuality. Speaking from personal experience, Lu said the process is oftentimes difficult especially when working within immigrant communities. Under the program's grant, staff works with people for a year then helps them transition into a community agency. OC ACCEPT is looking into various ways (e.g., outreach, hiring, trainings) to expand the program and offer services to our LGBTIQ (Lesbian, Gay, Bisexual, Transgender, Intersex or Questioning) and partners' community. OC ACCEPT strives to be inclusive, multicultural and culturally competent in the services that are being offered to the communities.



MISSION

In partnership with the community, protect and promote the health and safety of individuals and families in Orange County through:

- Assessment and planning
- Prevention and education
- Treatment and care



Connect with Us



The **What's Up** newsletter is created and distributed monthly by HCA Communications. Please call (714) 834-2178 with any suggestions or comments.