

A-17 LATE DIST

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From: Geoffery Bard [geofferybard@yahoo.com]
Sent: Monday, April 18, 2011 11:26 PM
To: Gray, Joni; Wolf, Janet; Farr, Doreen; sbcob; SupervisorCarbajal; slavagnino@countyofsb.org
Cc: PHD Disease Control; South Coast Homeless Advisory Committee
Subject: A-17 11-0037 SB Jails (and Shelters) Must Not Be Vectors of Infectious Disease

2011 APR 19 AM 8:33
COUNTY OF SANTA BARBARA
CLERK OF THE
BOARD OF SUPERVISORS

GREETINGS:

This letter is to express concern and support for immediate action regarding the recently released 2010 Environmental Health inspection report on infectious disease control in the jails. I am hopeful there can be rapid correction of the as-yet unresolved non-compliance of several Santa Barbara detention facilities with Section 5199 of Title 8, which contains very important requirements for control of Aerosol transmissible disease (ATD).

If there seems to be a sense of outrage in this letter, it is not directed at Santa Barbara County staffs but rather at the general societal apathy with regard to cough etiquette and other procedures which should be observed not only in jails but in all congregate facilities. These measures protect staff, clientele, visitors and ultimately the whole community.

Despite the failure of voters to pass Measure S, we must assure that our Sheriff's Department has the resources to assure that tuberculosis, pneumonia or pertussis is never the outcome of time in jail for custody deputies, civilian jail staff, visitors or inmates.

I hope and trust that the non-compliance is probably just a more or less normal lag time in updating to new standards or the result of budget constraints. If the latter, please take this letter as evidence that there is public support for nipping in the bud any potential disease outbreak which could end up costing taxpayers much more in the long run. I supported Measure S in part so that state of the art infection control practices could be in place in our jails, including wiring for rapid installation of UV if there is ever a serious outbreak of AID (airborne Infectious disease).

For the benefit of all Santa Barbarans - including correctional officers, people being held in jail, and people who may come into contact with people being released from jail - it is essential to bring our facilities up to state code with all due haste.

What is going on locally with regard to airborne disease vectors? Santa Barbara County has an unusually competent corp of public servants in both county government and in the public service agencies such as Casa Esperanza. During the election season last year I visited San Luis Obispo County and took notice that they lag behind Santa Barbara in terms of indoor air quality management and infectious disease containment at homeless shelters. I provided several written complaints to the non-profit CAPSLO agency and the SLO Public Health Department with regard to what I regarded as their deficient policies for prevention of indoor air contamination. There was some progress, but generally my concerns were NOT addressed in time and thereafter a very nasty little epidemic swept through involving at least one confirmed pneumonia hospitalization and what were undoubtedly other cases.

Unfortunately, the results of the Santa Barbara Health Department summary indicate in only

general terms that there is a compliance problem at several jail facilities with regard to indoor air safety. The summary posted on the Board of Supervisors website does not state what the gaps are and as such it is not immediately possible for the public, perhaps even including the DSA to ascertain the specific deficits, pending release of the full report. From even the most cursory glance at the statute, one can surmise that presumably we need a biological safety officer to design a plan to include provision of airborne infection isolation room or area (AIIR). That is defined as "a room, area, booth, tent, or other enclosure that is maintained at negative pressure to adjacent areas in order to control the spread of ... airborne infectious pathogens." Due to jail overcrowding, it is pretty obvious that is what the deficit might be and thus solution of the problem brings us right back to the need for revenue enhancements. If we wait, we are gambling with the community's resilience in the face of potential incoming vector situations, and we need to plan at minimum for tenting to be available to create the necessary conditions should an outbreak occur at some point in time. This is not brain surgery, nor need it be all that expensive to have a plan if, not when, such a disaster might occur.

One would hope that the health department can provide us with the assurance that the gaps are not severe, that they will be remedied post haste, and that the watchful eye of the Sheriff Deputies Association will double check this situation for the benefit of all. But history shows us that apathy continually rears its ugly head until it is too late and that is why I continue to bring this issue of up before the Board.

Going forward, I in my capacity of citizen advocate expect to bring proposals forward with the intention of promoting indoor and outdoor air quality with respect not only to Air Born Infectious Disease but also with respect to Second Hand Cigarette smoke. Obviously as a lay person I don't make these up but rather research what works in various jurisdictions. What works now would be for the Public Health Department, the Sheriff Deputy Association and the Sheriff's Department to get on their game and push through full implementation of the statutory requirements. If this require moneys, please find them, authorize and appropriate them today.

Thank you for indulging my brief comment on this complex and potentially life-saving area of concern, indoor air quality at the jail, which ultimately affects us all.

Sincerely,

Geof Bard
Public Health Advocate
Founder, California Houseless Information Team/
Crisis Housing Information Team

PS: Addendum

What is this law?

Reference: The state law is posted here: <http://www.dir.ca.gov/title8/5199.html>

Who is Geof Bard to comment?

I have been a public health advocate during various periods since 1989 when as an apprentice

journalist/activist I contacted several world class medical researchers around the country and collaborated with various coalitions addressing research and treatment policy issues. I was fortunate enough, as press, to attend numerous conferences at the National Institute of Health, the New York Institute of Medicine, the Society of Thoracic Surgeons and to communicate with members of the US Senate and Congress in conjunction with this work. I then returned to college and completed almost a full complement of premed undergraduate academic credit hours although I elected to go to law school rather than complete pre med studies. During that time period I published the Intercollegiate Medical Journal for students in the health sciences. From this work I have developed the firm conviction that **public comment is essential to support policy makers** and to drive public policy and also to protect vital social interests, such as individual rights, whenever public health is a matter of deliberation.

How does this background tie in to what I do in Santa Barbara?

Prior to inauguration of the new Board, I have on more than one occasion commented with regard to the importance of maintaining the best possible indoor air quality at all congregate facilities such as jails and homeless shelters. These remarks were part of my bipartisan contribution to a better county because the prevention of airborne infectious disease transmission is of concern to every citizen, particularly those who work or are served by congregate facilities such as custody deputies and staff at such facilities. I consider that background to be a privilege and I consider it my duty to speak up when I see things that are inconsistent with what I know better than to allow to go unchallenged.

Why is an individual citizen so alarmed, can't we just let the system handle this?

Had the strain been highly virulent, a disaster may have occurred, and all because of apathy. Many of the respiratory disease cases at that time which were popularly believed to be simple flu, were in all likelihood undiagnosed "walking" pneumonia. If they were not properly treated, and it seems they were not, the reprehensible result was that the victims suffered through and retransmitted their disease to what I estimate to be between a dozen and a score of other victims. This near-disaster might have been avoided had management imparted a serious determination to improve their practices, but they were so averse to taking public comment and complaints seriously and acting on them that they placed the entire community at risk.

The concomitant evidence of record was that SLO county has maintained an undesirable leadership role in having the second worst record in the State of California regarding the pertussis outbreak of 2010.

There is a vast literature on Infectious Airborne Vector Control including such mundane issues as cough etiquette. These policies are often not implemented by management and staff of congregate facilities, **not just California's jails**. The result impacts clients/inmates, staff/deputies and the larger community. **Apathy** with regard to airborne disease **is a luxury we can no longer afford**.

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