

## City Council Briefing

Tuesday, Oct. 28, 2014

Briefing on Flood Recovery Status  
memo available at [BoulderFloodInfo.net](http://BoulderFloodInfo.net)

# Flood Recovery Objectives

1. Help People Get Assistance
2. Restore and Enhance Our Infrastructure
3. Assist Business Recovery
4. Pursue and Focus Resources to Support Recovery
5. Learn Together and Plan for the Future

# Objective 1: Help People Get Assistance



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30 housing units remain vacant and uninhabitable.

150 households have active cases with the Long-Term Flood Recovery Group (LTFRG).

# Objective 1: Help People Get Assistance

## 150 Households with Active LTFRG Cases

- **13%** - Located in the floodplain
- **48%** - Annual household incomes below \$25,000
- **57%** - Primary living space with construction needs

# Objective 1: Help People Get Assistance

Eight individual properties with flood damage are proceeding for annexation in Dec 2014/Jan 2015.

The city and county coordinated on a neighborhood survey to gauge residents' interest in annexation.

# Objective 1: Help People Get Assistance

OLD TALE ROAD		
	Count	Percent
Yes	27	96%
No	1	4%
No Reply	0	0%
<b>Total</b>	<b>28</b>	<b>100%</b>

GITHENS ACRES		
	Count	Percent
Yes	6	17%
No	14	39%
No Reply	16	44%
<b>Total</b>	<b>36</b>	<b>100%</b>

CHERRYVALE/ BASELINE ROADS		
	Count	Percent
Yes	7	41%
No	5	29%
No Reply	5	29%
<b>Total</b>	<b>17</b>	<b>100%</b>

**FLOOD  
SAFETY**  
BOULDER, CO

# Objective 2: Restore & Enhance Our Infrastructure



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	<b>Total Flood-Related Projects</b>	<b>Percent of Projects Complete</b>
<b>Citywide Total</b>	<b>329</b>	<b>73%</b>
<b>Department/Division</b>		
OSMP	153	57%
Parks & Recreation	46	91%
PW - Utilities	64	95%
PW - Transportation	32	75%
PW - FAM/Fleet	34	74%

# Objective 2: Restore & Enhance Our Infrastructure

## Citywide Totals

Total Cost\*

**\$27.6 M**



Amount Spent\*

**\$17.1 M**



Remaining Cost\*

**\$10.5 M**

**62% Complete**

\* All figures are estimates and may change as additional assessments and evaluations occur.

# Objective 3: Assist Business Recovery



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Continuing assistance to Boulder businesses.

About 45 people attended the city-sponsored Business Protection Summit in Lyons on Oct. 17.



# Objective 4: Pursue & Focus Resources to Support Recovery



# Objective 4: Pursue & Focus Resources to Support Recovery

## Citywide Totals Reimbursement

Total Cost\*

**\$27.6 M**



Amount Spent\*

**\$17.1 M**



Remaining Cost\*

**\$10.5 M**

Potential from Insurance, FEMA, FHWA, State

**\$16.2 M**

City Share To-date\*

**\$11.4 M**

Actual Reimbursement To-date\*

**\$1.0 M**

\* All figures are current estimates and may change as additional assessments and evaluations occur.

# Objective 4: Pursue & Focus Resources to Support Recovery

Processing reimbursement requests and ensuring work remains eligible.

Continuing to work closely with FEMA and the State.

Pursuing grants – \$257 million in grants is available in CDBG-DR Rounds 2 and 3.

# Objective 5: Learn Together & Plan for the Future

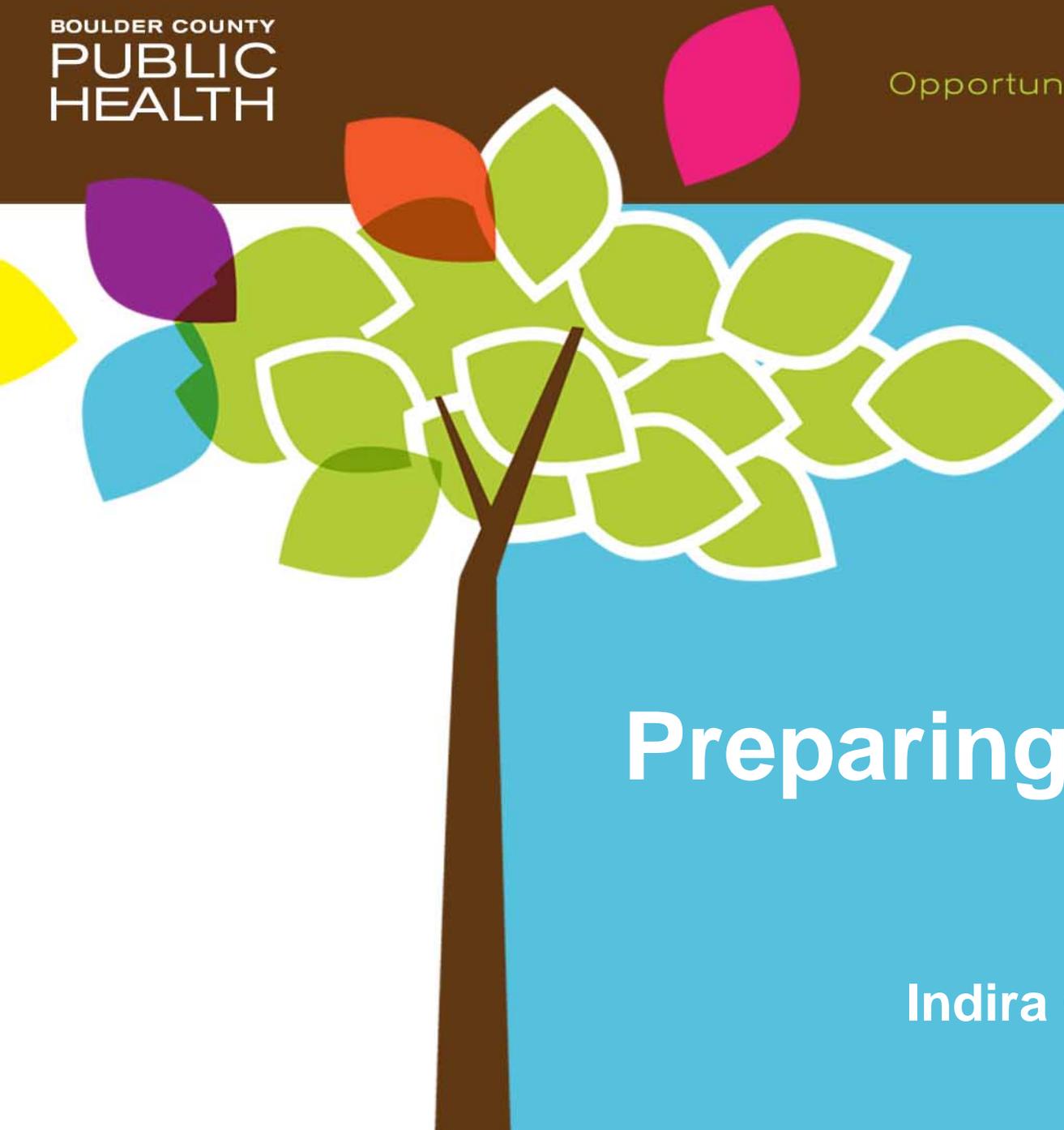


# Flood Recovery Status Update

Future council updates about flood recovery will occur through Information Packet items, as needed.

[www.BoulderFloodInfo.net](http://www.BoulderFloodInfo.net)

**Questions?**



# Preparing for Ebola

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Nick Kell

# **Goal to Provide Background and Update**

1. Ebola Facts
2. Triage and Screening
3. Hospital Isolation & Contact Tracing
4. Public Health Orders
5. Situational Awareness

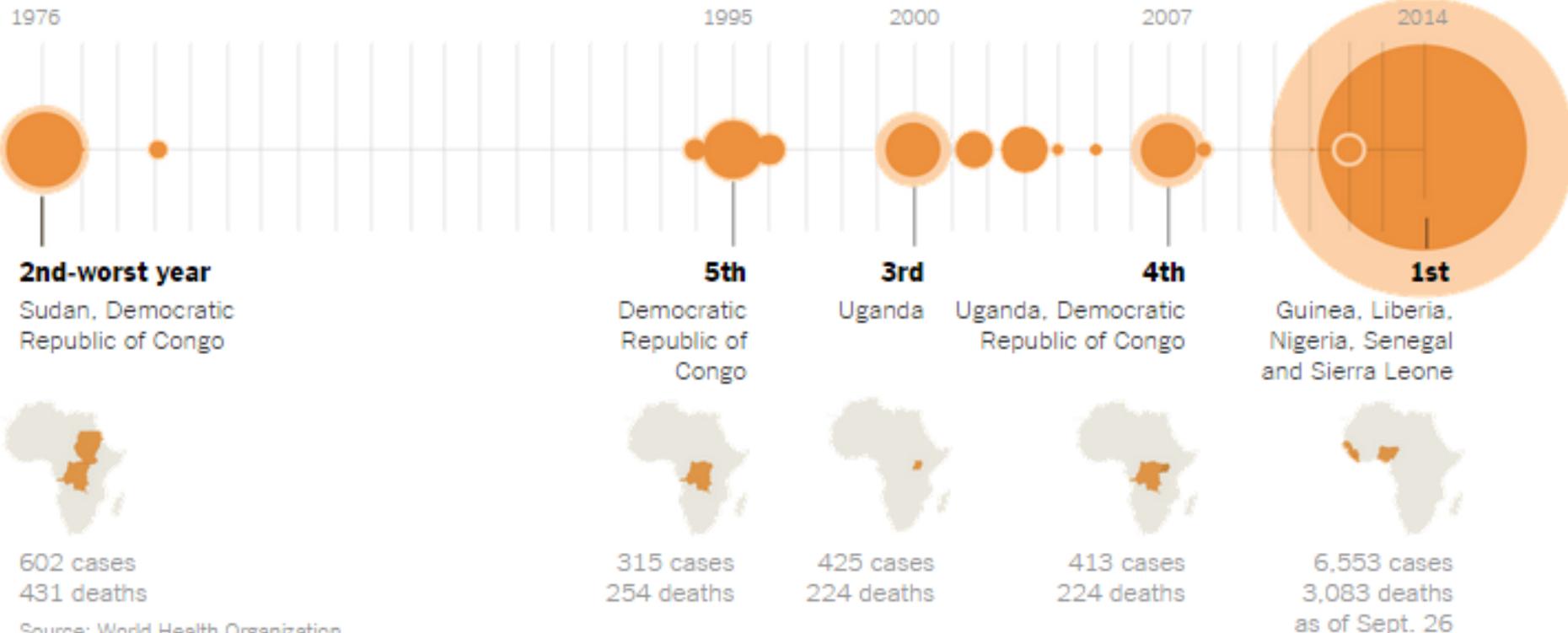


# **Ebola Facts**

**(in 7 minutes or less)**

# Ebola Virus Outbreaks Have Occurred Since the 70s

Ebola cases and deaths by year, and countries affected ● Cases ● Deaths



Source: World Health Organization

# Current Outbreak a Public Health Emergency

- Outbreak started March, 2014
- August 8, 2014 declared a public health emergency
- As of October 20:
  - 9216 cases
  - 4555 deaths
- Fatality rate = 50%

# Transmission from Direct Contact with Body Fluids

- Bodily fluids transmit Ebola virus:

- Feces
- Vomit
- Urine
- Saliva
- Sweat

- Transmission through:

- broken skin
- mucous membranes
  - eyes, nose, or mouth



# Symptoms Are Similar to Flu

## Symptoms include:

- Fever (greater than 101.5° F)
- Severe headache
- Muscle pain
- Weakness
- Diarrhea (2 of 3 people experience)
- Vomiting (2 of 3 people experience)
- Abdominal (stomach) pain
- Unexplained hemorrhage (1 of 5 experience)
- Symptoms appear 2 to 21 days after exposure - average is 8 to 10 days

# STAGES OF EBOLA VIRUS DISEASE

SOURCE: CDC

Contagious through bodily fluids =   
Not contagious = 

## INCUBATION

Virus invades cells throughout the body and replicates

## EARLY SYMPTOMS

8-12 days after exposure, patient develops fever, chills, fatigue, muscle pain, weakness, and **becomes contagious**

**EXPOSURE**  
Virus enters through nose, mouth, eyes, ears, breaks in skin

**DAY 1**

## SYMPTOMS WORSEN

Around 2 weeks after exposure, patients develop diarrhea, vomiting, abdominal pain, rash, red eyes, bleeding

## SPREAD

In the W. African outbreak each person with Ebola infects 1.7 - 2 others

Ebola patients are most contagious at and near death

Survivors (30% in 2014) improve after  $\approx$  6 days of symptoms

## DEATH

6-16 days after symptoms begin (avg 7.5 in 2014), damage to blood vessels causes drop in blood pressure and organ failure

**Vox**

# Caregivers and Healthcare Workers at Greatest Risk

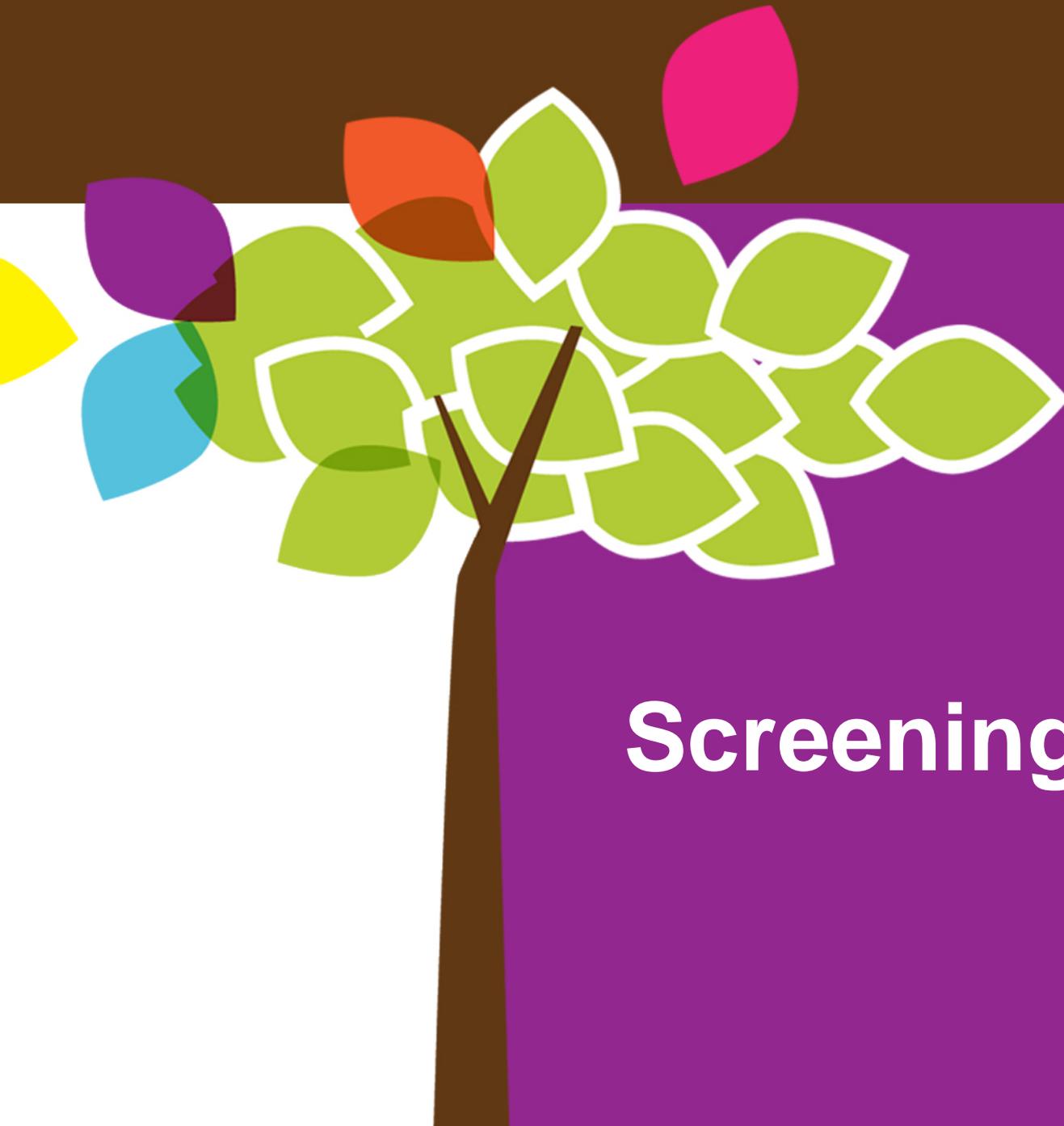
Transmission requires direct contact with:

- Bodily fluids
- Contaminated objects such as needles/syringes

# Threat from Flu is Greater

## The Threat from Influenza and Norovirus is Greater in our Community

	Incubation	Viral Shedding	Spread	Symptoms
<p>Influenza</p> <p>Average of 30,000 deaths per year</p>	1 – 4 days	Virus can spread 1 day prior to symptoms & 5-7 days after being sick	<p>Droplets - cough, sneeze or talk.</p> <p>Touching a surface/object another has touched</p>	<p>Fever or feeling feverish/chills</p> <p>cough; sore throat; nose;</p> <p>muscle aches</p> <p>headaches;</p> <p>fatigue (very tired)</p>
<p>Norovirus</p> <p>Cause of up to 60% of all GI illness</p>	12-48 hours	Virus may spread prior to symptoms and up to two weeks after symptoms have subsided.	Droplet, contact (can live on surfaces for weeks, food)	<p>Acute onset vomiting;</p> <p>watery, non-bloody diarrhea with cramps;</p> <p>nausea; may have low grade fever; body aches</p>
<p>Ebola</p>	2 – 21 days	Day 1 of symptoms the viral load is low, increases as symptoms progress	Direct contact with bodily fluids OR contact with objects (syringes)	<p>Fever; headache, muscle pain, weakness, fatigue, diarrhea, vomiting</p>



# Screening & Triage

# Screening and Triage Requires All of Us



# Screening and Triage is Key to Stopping Spread



**Ask!**  
About Ebola



**ASK**

**About travel**  
To Sierra Leone, Guinea, Liberia (in West Africa) in the past 21 days.

**And exposure**  
To persons with Ebola.

**And symptoms**  
Fever, headache, joint & muscle aches, weakness, fatigue, diarrhea, vomiting, stomach pain, loss of appetite, sometimes bleeding.

**ISOLATE**  
If travel or exposure criteria are met and the person has symptoms of Ebola, place the person in a private room.

**CALL US**  
Notify hospital leadership and CDPHE at 303.692.2700 (after hours 303.370.9395).  
[www.colorado.gov/ebola](http://www.colorado.gov/ebola)



# If Screening is “Yes”, Isolate

## **In Healthcare setting:**

- Place patient in room with a bathroom
- Use CDC Recommended PPE Ebola patients
- Call CDPHE 303-692-2700 (day)/303-370-9395 (night)

## **In community setting:**

- Use CDC Recommended PPE Ebola patients
- Call CDPHE

*First responders: maintain log of all persons who had contact with patient*

# Some Guidance Still Unclear

- Transport to nearest hospital or a designated hospital (University Hospital, Denver Health, or Children's Colorado)?
- CPR and resuscitation guidance?



# Hospital Isolation & Contact Tracing

# Isolation and Tracing Requires Many of Us



# State and CDC Will Help with Hospital Isolation

- CDC Strike Team focused on hospital infection control
- All hospitals should have plan to:
  - Isolate patient
  - Minimize number of staff interacting with patient

# Hospital Isolation Separates Contagious from Others

Isolation requires:

- Single patient room (with private bathroom) with the door closed
- Maintaining log of all persons entering patient's room
- Limiting visitors to patient's room

# Personal Protective Equipment (PPE) is Vital

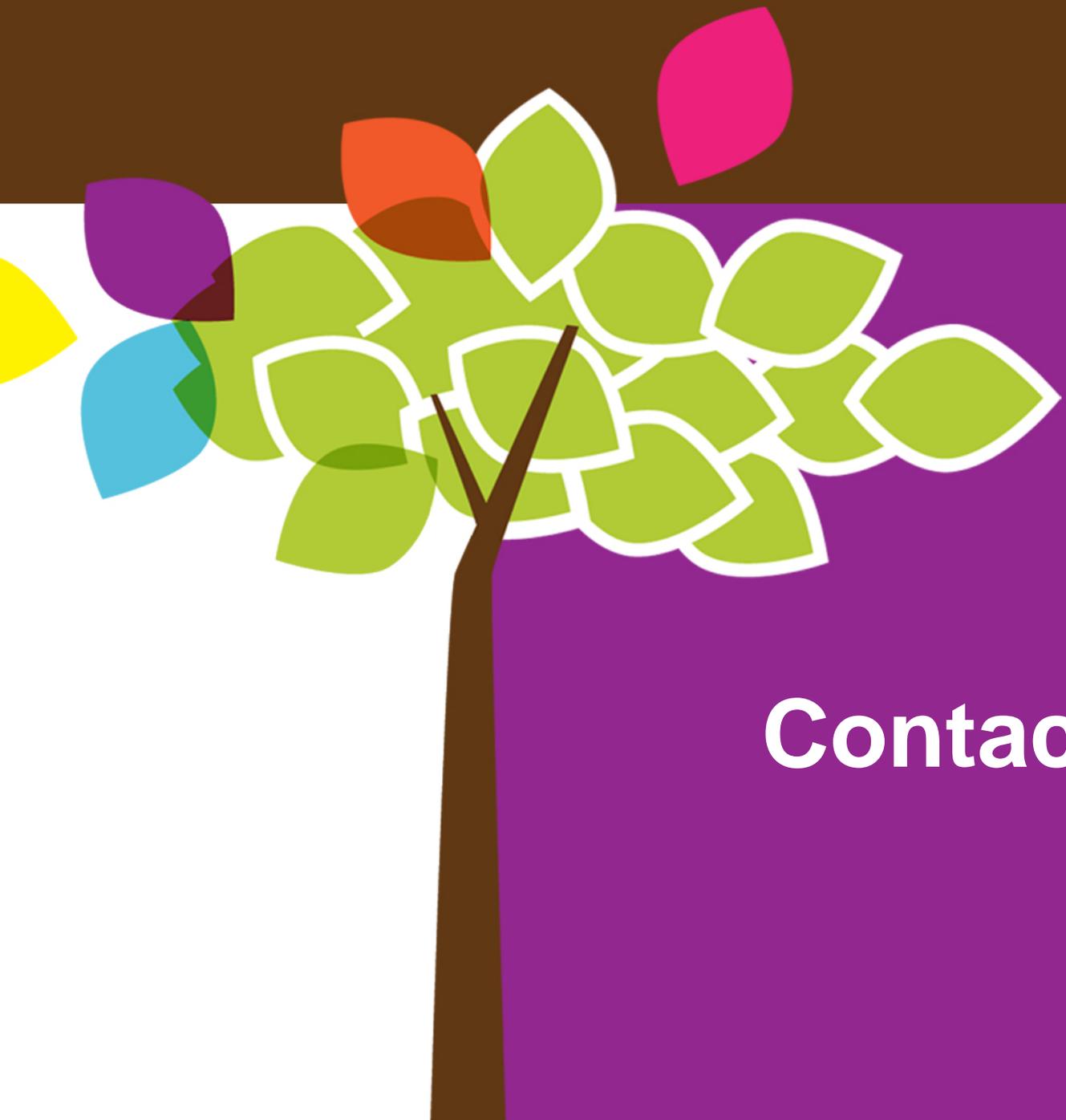
New CDC guidelines for Healthcare workers:

- Use N95 mask or Powered Air Purifying Respirator (PAPR)
- No skin exposed
- Correct PPE donning and doffing, with trained observer always present



# Some Hospital Isolation and Care Guidance Still Unclear

- Dedicated hospitals for Ebola. Be prepared to accept patients, but for how long?
- Transport of hazardous waste guidance



# Contact Tracing

# Public Health Traces all Contacts

- Starts with call from EMS and/or hospital or CDPHE
- CDPHE and CDC support
- Part of everyday disease investigation

# Tracing Identifies All Possible Contacts

- **Identifies** everyone in contact with sick patient since
- **Assesses Risk** to determine control measures:
  - Isolation
  - Quarantine
  - Monitoring



# Public Health Orders

# Public Health Orders May Be Required to Stop Spread

- **Issued by Boulder County Public Health**
  - Isolation
  - Quarantine
  - Active Monitoring
- Enforcement may be required

# Isolation Order Requires Staying at Hospital

## Isolation Order

- For hospitalized patients with confirmed Ebola virus
- Ensures patient stays at the hospital
- Prohibits patient from leaving Against Medical Advice
- May require security at hospital

# Quarantine Order Requires Individuals to Stay Home

## Quarantine Order

- For individuals with a high risk of exposure but **without** symptoms
- Prohibits individual from leaving residence for 21 days
- Requires active monitoring of symptoms
- May require enforcement

# Active Monitoring Requires Some Individuals to Check-In

## Active Monitoring Order

- For those with some risk of exposure
  - Cared for someone with Ebola virus
  - Had direct contact with bodily fluids using personal protective equipment
  - Travelers from one of the 3 countries
- Prohibits travel by air, train, bus, or ship.
- Requires active monitoring of symptoms for 21 Days

# Non-Compliance May Require Additional Order

- Quarantine Order can be issued if non-compliant with Active Monitoring Order
  - Individual entitled to hearing
  - Likely would require enforcement support

# Monitoring or Quarantine will Include Support

- Support plan will include:
  - Case management
  - Mental health support
  - Financial support
  - Housing support

# Together, We Can Protect Boulder County

Remember...

- Ask, Isolate, and Call
- Community awareness is key to identifying and stopping transmission

# Resources

- For more information on Ebola, call COHELP at 303.389.1687
- For more information about BCPH response to Ebola, call 303.413.7523
- Every Friday CDPHE 3:00PM Call
  - 1-888-245-0920
  - Passcode: 975295



**Together, We Can  
Stop the Spread and  
Care for Our  
Community**