
From: Wilson, Joyce A.
Sent: Thursday, October 15, 2009 8:27 AM
To: Mayor and Council and Staff
Cc: Hill, Michael; Hamlyn, Deborah G.
Subject: FW: Agenda Item Today

Several of you have expressed concerns that we have not done sufficient outreach and/or coordination with the local medical/health community relative to H1N1 vaccinations and response to major outbreaks. That is not correct. Attached is an outline of the major local stakeholders who have been meeting and coordinating with our Public Health Preparedness Team (Mike Hill, Pat Fowler and Joanne Bates) over the past year since the initial outbreak. This group meets biweekly to coordinate public education, outreach, confirmed cases and coordination relative to distribution of vaccinations that have been ordered in anticipate of the flu season, which is now upon us. Unfortunately, not all entities participate regularly and I have instructed Mike to make specific outreach to those key players who are not regularly engaged to insist on a point of contact for purposes of communication and coordination.

The Public Health Department is the entity responsible for handling any public health emergency associated with this or any other public health catastrophic event. The Department was instrumental in averting major panic and crisis when the H1N1 first surfaced and no one knew for certain how to respond to an unknown flu strain for which there was no vaccine. We thus avoided over-reaction and unnecessary closures of key facilities and organizations. We assisted the local health care community that was overwhelmed with patients reacting to any symptom that might be associated with this flu virus. As a result, the El Paso Public Health Department is considered a model and has been engaged in state and national planning and a recipient of significant funds to support efforts here.

The email memo below summarizes the purpose of the contract we asked Council to approve earlier this week. Its intent is solely to ensure supplemental capacity to our public health clinics in the event local capacity is exceeded. We again have reached out to the local medical community to identify any surplus local medical support and/or resources that we might tap into in the event we need to mobilize additional clinics rapidly. The firm we selected is one of several firms under contact with the State Public Health Department that can guarantee a rapid mobilization of medical resources in case of a significant event. This firm also committed to utilize local resources first before deploying any external capacity.

I hope this information is sufficient to clarify any misunderstanding.

From: JValenti@umcelpaso.org [mailto:JValenti@umcelpaso.org]
Sent: Tuesday, October 13, 2009 5:03 PM
To: Wilson, Joyce A.
Cc: Hill, Michael
Subject: Re: Agenda Item Today

thanks, Joyce and Michael. Jim

"Wilson, Joyce A." <WilsonJA@elpasotexas.gov>

To "JValenti@umcelpaso.org" <JValenti@umcelpaso.org>

10/22/2009

10/13/2009 09:41 AM

cc "Hill, Michael" <MichaelHill@elpasotexas.gov>
Subject FW: Agenda Item Today

I think this should answer your questions or alleviate concerns of others relative to the intent of this contract. Let me know if you need Mike to meet with anyone in the medical community to explore other collaborations beyond what we've already done thus far. Thx for your interest and concern.

From: Hill, Michael
Sent: Tuesday, October 13, 2009 8:57 AM
To: Wilson, Joyce A.
Cc: Hamlyn, Deborah G.; Fowler, Pat
Subject: Agenda Item Today

To follow up from last night's discussions now that I have a full-sized screen and keyboard in front of me.

Local providers have ordered around 600,000 doses of H1N1 vaccine, this means that the local healthcare system will be pushed to capacity trying to get that vaccine out to their patients, I do not think they would have resources to staff our clinics for us.

We are working with several of the major players in giving out vaccine and will, in fact be providing some support to their programs.

The extra load on our HR system to bring on 25 employees for a 60 day period would not be justified and we would not have as much flexibility to raise and lower the staffing levels as needed.

We are not going to cut a check to Maxim for \$500,000, we will have a contract that sets hourly rates for services and will only be paying for the services that we utilize. I asked for the high amounts based on issues that could come up: 1. the providers in town may have been overly ambitious in ordering vaccine and some of the 600,000 doses might get diverted to me to deal with, 2. the vaccine could be slow to arrive and we could still be giving out vaccine into the winter.

We work closely with our colleagues in the community and this is the first time that anybody has expressed anything but agreement with our decision to proceed this way.

Michael Hill

Director

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10/22/2009