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Date: June 5, 2017

TO: The Honorable Mitch Greenlick, Chair

House Committee on Health Care

FROM: Akiko Saito, Interim Director of Emergency Operations

Health Security, Preparedness and Response Program

Public Health Division Oregon Health Authority

SUBJECT: Public health planning for the total solar eclipse population surge

I am Akiko Saito, the interim Director of Emergency Operations for the Oregon Health Authority's Public Health Division. I manage the Health Security, Preparedness and Response program, which is funded by the US Department of Health and Human Services to develop the emergency preparedness and response capacity of Oregon's public health agencies, hospitals, health care systems, and public health and medical workforce. Thank you for having me here today to provide an overview of planning we are undertaking with partners to support the influx of visitors expected during the eclipse predicted for August 21, 2017.

Estimates suggest that up to one million visitors will be present across the eclipse's path in Oregon. Large events are common in Oregon, but normally they are staggered; county fairs are scattered across the summer calendar so there is less competition for attendees and resources. The eclipse gatherings will be simultaneous -- to the day, hour and minute. Therefore, resources will be scattered and scarce, challenging public health, medical, law enforcement, and private industry to meet local demands.

The Public Health Division is collaborating with partner agencies across the state to prepare. Through Oregon Emergency Management is the hub for our coordination with state agencies. We are partnering directly with the tribal, county and regional partners in public health, health care, and emergency management. We convene seven regional healthcare preparedness coalitions, which provide an opportunity for hospitals and health systems to coordinate their plans to respond to any public health issues that arise from the event.

Our role is to monitor and investigate threats to the public's health; providing data for situational awareness to drive decision-making during the event. We will leverage partnerships in order to monitor demand for health care, track emergency department visits to identify trends, manage health care volunteers, all in a coordinated fashion as part of larger preparedness and response structure. For the eclipse, we also have specific day-to-day programs which are critical, as the Public Health Division oversees the rules for mass gatherings and foodborne illness prevention, and our environmental health

program has been advising agencies and event planners on meeting the requirements for gatherings large and small.

The population surge may affect the public's health in many ways. In addition to the health risk of eye damage, there may be challenges related to weather, traffic, communicable diseases, and wild fires.

Access to common services may be hindered by traffic, increased demand, and limited cell phone access. Traffic congestion may hinder resident's ability to reach medical care, prescriptions, food, and caring for others that depend on them. Travelers who are unaware of the great distances between fuel services in central and eastern Oregon may become stranded, and could be at-risk from combinations of heat, cold, lacking food, water, and regular medications. Any of these risks can have even more serious health consequences for infants, elderly, and those with certain medical conditions.

Health care services will be in high demand and impeded by traffic. Emergency medical services (EMS) support about 500,000 calls per year. Over the six days around the eclipse we might normally see about 8,200 EMS calls. With a surge of one million visitors, estimates suggest an additional two thousand EMS calls. At hospitals and health care clinics in the most popular eclipse viewing regions, there may be additional patients due to incidents related to the gatherings, such as motor vehicle crashes, as well as the regular medical conditions seen in an emergency department: heart attacks, stroke, injuries, untreated chronic conditions, and prescription refills. Hospitals are reviewing staffing levels and schedules for non-emergency medical procedures.

We have heightened concerns for wildfires and the spread of foodborne diseases, as well as the management of human waste and garbage. The rural counties in the path of the eclipse have limited staff for conducting food and restaurant inspections for temporary food vendors. Visitors may not be familiar with Oregon's wild fire risks. Many will require education about Oregon's recreational marijuana laws.

While the eclipse gatherings will stress local infrastructure, this is an opportunity to build community resiliency and practice for unplanned population displacements which can occur after natural disasters. Emergency preparedness and response is a foundational capacity for public health, and our statewide public health planning for this event demonstrates why.

I appreciate the committee's time and would be happy to answer any questions or give additional detail on this matter.