Happy Mental Health Matters Month! Behavioral Health Services (BHS) is kicking off our annual celebration with a campaign geared towards raising mental health awareness and increasing access to education and resources. This year’s theme is “Strength in Community.”

I’m excited to share the 2019 Mental Health Matters Month activation kit and encourage you to utilize the resources you’ll find inside to raise mental health awareness by joining your colleagues and community partners to promote... continued on page 2

“Hazmat is where I wanted to end up. I like the excitement of going out on calls. I’ve always been tailored towards emergency response type work,” he said.

There have been lots of emergency calls for Gerrit during his 11 years at the Health Care Agency (HCA), along with inspections, investigations and regulatory compliance meetings with business owners. His first six years were with the Food and Pool Safety program and the past five with the Health HazMat team. Although he enjoys the adrenaline and challenges of being at the scene of an emergency, he also welcomes the responsibilities which come from investigating incidents and from preventing them. Those are some of... continued on page 15

Hands On, Team First

Peer-to-Peer, Gerrit Kovach

Deputy Agency Director’s Message

FEATURED ARTICLES

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the statewide Each Mind Matters Movement.

Wearing lime green and starting conversations about mental health not only acknowledges the importance of mental health and reduces the stigma associated with it, but creates ongoing opportunities to build resilience and for people to live longer, healthier and happier lives.

By participating in Mental Health Matters Month, you’ll be supporting existing research that shows resilience is not a trait that people either have or do not have; it can be developed through learned behaviors, thoughts and actions.

Orange County continues to lead the way on mental health, with more individuals and organizations joining the movement every day to ensure that we all understand, respect and prioritize mental health. It’s our collective voices that have been amplified in unison and continue to make our community strong.

For a calendar of Mental Health Matters Month events happening near you, a social media toolkit pre-stocked with messages you can promote on your own accounts, and more, please click here.

Best,

Dr. Jeffrey Nagel
Deputy Agency Director of BHS

More on Mental Health Matters Month:

California has seen more than its share of challenges this year — from devastating wildfires to events causing anxiety and depression, and deadly acts of violence. It’s easy to feel despair when following the news, even if we aren’t personally affected by these challenges. And for those who have been directly affected, the burden can be even heavier.

Strong emotions and uncertainty are common reactions to traumatic events. However, it’s important to remember that there is hope. By creating supportive relationships with meaningful conversations and listening to one another, we strengthen our communities to be resilient.

Fostering connections can occur in: loving, close families; trusted friends; romantic relationships; active relationships with mentors, sponsors and/or teachers; a group of people with a shared ethnic or cultural identity; a peer group at school, the place you worship, your neighborhood, or any other community important to you.

Although strong, supportive relationships are critical for our well-being, only around half of Americans have meaningful in-person social interactions, daily (such as a long conversation with a friend). While new technologies and ways of communicating may play a role in this trend, simply saying people should cut down social media use isn’t the only way to solve the human connection problem.¹

So how do we create more meaningful in-person social interactions? All of us can start close to home (or better yet, at home) by learning how to be a better listener and practicing those skills regularly.

Open, attentive, non-judgmental listening to others helps them feel seen and heard, and increases feelings of connection — for both the person speaking and for you, the listener. Here’s a short list of how to do it:

¹ Strong, supportive relationships are critical for our well-being, only around half of Americans have meaningful in-person social interactions, daily (such as a long conversation with a friend). While new technologies and ways of communicating may play a role in this trend, simply saying people should cut down social media use isn’t the only way to solve the human connection problem.
More on Mental Health Matters Month 2019’s Theme: Strength in Community

- Face your speaker and keep eye contact with them, if appropriate for their culture.
- Be attentive and relaxed.
- Listen without jumping to conclusions, and try to picture what they are saying.
- Don’t interrupt; don’t offer solutions too quickly.
- Ask questions to make sure you understand their views.
- Try to feel what they are feeling, and give cues to show that you’re paying attention.
- Finally, pay attention to what else they are communicating, through body language, gestures, tone of voice and facial expressions.

Take these skills into your community: at work, school, or your neighborhood, and practice the art of really listening to others, especially when you don’t agree with what they’re saying. When others are curious about what you’re doing, pass the skills along to them and you may notice more people in your life listening to you as well.

In your efforts to listen more, you might notice that people talk about the more day-to-day aspects of their lives but may hesitate to share more difficult topics. That’s ok, you’re still fostering stronger relationships. Connecting with others in a meaningful way doesn’t mean that you are talking about difficult or more painful topics all the time. Ideally, connection should include a mix of everyday topics, celebration, laughing, sadness, shared frustration, remembering, planning, giving help, receiving help and more difficult topics when they arise.

What’s most important is that you create safety in the relationship and let the other person know that if they want to talk about something difficult, you are there to listen and offer unconditional support. If you’re part of an organization, company, school or other community group you can also use tools and activities to help members connect more deeply with one another and reach out when they need support.

We have a lot of challenges to improve our broader society. The problems are complex and deeply-rooted. But by turning our attention to building resilience through better connections in our own lives and strengthening our communities, we’ll take important steps to become happier and healthier.

1 https://www.multivu.com/players/English/8294451-cigna-us-loneliness-survey/

We could go on, but those are some of the words used to describe innovations and improvements, which have recently been made at Public Health Services (PHS), to better serve the people of Orange County. The accolades were given during the Public Health (PH) Quality Improvement (QI) and New Technology (New Tech) Showcase which took place at the PHS Learning Center in Santa Ana, during Public Health Week in early April.

The showcase featured 13 displays and/or table top demonstrations, which were designed and crafted by staff from various programs. The displays highlighted the innovations and improvements which programs have adopted in providing services and the displays were used to compete for prizes, in two categories. The first category, Quality Improvement stories, where staff described improvements to services or processes using a QI Tool or PDSA cycle (Plan-Do-Study-Act); the second category, New Technology, where staff showed how new or innovative technology is used in their programs.

The winners in each category, along with a winner for Most Creative Display, were all chosen by those who attended the event. For Best QI Story, the award went to Health Promotion, Tobacco Use Prevention Program (TUPP) for their display which explained the “Cessation for Homeless” program. The winner in Best New Tech, California Children’s Services for Utilizing Three Dimensional Printing to Enhance Therapy Services. And the award for Most Creative Display went to Health Promotion, TUPP, for their Use of iPads & Survey Pocket app for the Health Retail Project. (You can see other entries on page 12 and click here for descriptions).

PHS managers, along with Deputy Agency Director David Souleles and Chief of Operations Marc Meulman, were presented with a resolution from the Board of Supervisors (BOS) in recognition of Public Health Week. BOS Chairwoman Lisa A. Bartlett’s Community Relations Advisor Sergio Prince delivered the resolution and called the work on display at PHS, “fantastic.” He said, “Everything is just so interesting. So
many facets to the public health work that the County does. I work for the County and I am unaware of all this work. And if I’m unaware, how many people are too?”

David also praised PHS staff for their commitment to quality, “For all of you embracing this culture of quality improvement it has really helped to make us a better, stronger, more protective health department, more able to serve our residents and keep our community safe and healthier. We also have great technology innovations being showcased as well as our quality improvement work and it’s nice to see the diversity in the programs. I take the opportunity to brag about all of you and what you do. You really are the backbone of what makes everything happen.”

Winner Best New Technology - California Children’s Services (CCS) is utilizing 3-dimensional (3D) printing to enhance therapy services. CCS showcased how therapists innovate using 3D printing to create assistive devices and orthotics to support the independence and success of their clients. Pictured: (L-to-R) Nicole Madonia, CCS Physical Therapist; Dennis Chen, CCS Occupational Therapist and Kelly Culhane, CCS Occupational Therapist

Winner Most Creative Display - Tobacco Use Prevention Program (TUPP) is using the latest technology, including mini iPads and SurveyPocket app, to collect data and find out what is being sold in local stores. The store observation survey asks questions about the different types of tobacco, alcohol, and food products and advertisements in stores, all in an effort to encourage healthier options. The data will be used to create a recognition program in Santa Ana that awards stores which offer healthier products. Pictured: (L-to-R) Anabel Bolaños, TUPP Program Supervisor and Alicia Carranza, TUPP Health Educator

Winner Best Quality Improvement Story - TUPP’s Cessation for Homeless poster showed how quality improvement tools helped to dramatically increase the number of homeless clients receiving smoking cessation services. Pictured: (L-to-R) M. Ruth Aguilar, TUPP Information Processing Specialist; Jaina Pallasigui, Tobacco Cessation Manager and Khoi Pham, Tobacco Cessation Specialist

Presentation of Public Health Week Resolution - Pictured: (L-to-R) Jane Chai, PH Projects Manager; Jenna Sarin, Director of PH Nursing; Tamarra Jones, Division Manager, Family Health; Marc Meulman, PH Chief of Operations; Sergio Prince, Community Relations Advisor, Supervisor Lisa A. Bartlett; Lydia Mikhail, PH Lab Manager; Mike Carson, Division Manager, Disease Control; Anabel Bolaños, TUPP Program Supervisor; Carolyn Secrist, Program Supervisor, ADEPT and David Souleles, PH Deputy Agency Director
“The pilot of a passenger jet, which just landed at John Wayne Airport (JWA) from Houston, radioed air traffic control to say there are multiple sick passengers on board. The pilot is asking for paramedics to come to the gate to medically assess the ill passengers. The paramedics determine that five passengers have temperatures above 100 degrees Fahrenheit, along with difficulty breathing and persistent coughing. The five were with a group of health professionals which recently returned from a medical mission in the Middle East. A sixth member in the group arrived in Houston two days earlier and was confirmed with Middle East Respiratory Syndrome (MERS). There were 135 passengers and 6 flight crew members on board the aircraft at JWA.”

This was one of two scenarios put forth last month in John Wayne Airport’s annual, Federal Aviation Administration (FAA) required, Table Top Exercise (TTX), which focused on reviewing and testing sections of the Airport Emergency Plan (AEP) that address communicable disease response. Participants from the Health Care Agency (HCA), JWA, the Orange County Fire Authority (OCFA), the Orange County Sheriff’s Department (OCSD), airline representatives, the Centers for Disease Control and Prevention (CDC), and Customs and Border Protection (CBP) were deployed around four tables, representing the sections which could be mobilized in an actual event. The emergency scenarios and discussion were moderated by the coordinator of the exercise, Richard Steele, Manager of Emergency Preparedness and Security at JWA.

Members of the Unified Incident Command Post (ICP) were stationed at the first table to lead the management of the incident and make decisions on how to handle and assess all those on board the flight. At this table were the HCA’s Epidemiology and Assessment (E&A) Medical Director Dr. Matthew Zahn, and Deputy Medical Director Dr. Michele Cheung. “HCA has been working with JWA on its communicable
disease response plan since 2006 and this is the third TTX we have collaborated on,” said Dr. Cheung, who is Physician Specialist for Infectious Disease Preparedness in Emergency Medical Services. “This year’s exercise was a great opportunity to utilize the resource materials we had developed as an outcome of the 2016 TTX and refine them. Given the various intra-state, interstate and international flights we now have coming through JWA, it is critical for airline and airport response personnel to understand the roles of HCA, CDC, OCFA, OCSD and CBP in managing communicable disease issues in each situation.”

Staffing the second table were personnel comprising the Emergency Operations Center (EOC), Communication Control Center (CCC), and Airport Operations representatives. Their main challenge and questions to answer included: determining who needed to be notified for the response; carrying out the movement of passengers and personnel; supporting the Unified ICP; maintaining situational awareness; managing the operational aspects of JWA since aircraft operations would continue; and incident recovery.

The Family and Friends Assistance and Support Branch (FFAS) gathered at the third table. This branch consists of personnel from the airline, American Red Cross, Airport Operations and HCA Behavioral Health Services (BHS). Representing BHS were Nicole Garcia, Service Chief II, BHS Disaster Response and Rachael Ferraiolo, BHS Disaster Response, Service Chief I. The group works with passengers and, like their name says, the passengers’ families and friends. They are ready to evaluate the needs, provide behavioral health services and make referrals said Nicole, “We are grateful JWA values our services and is inclusive of BHS in these exercises as people involved in such traumatic events need to know there is support available, that we care about them and their loved ones and we are ready and available to provide assistance as needed.”

At the fourth table, the Joint Information Center (JIC)/Public Information Officer (PIO). Among the group, Julie MacDonald, HCA Health Communications Manager. Their objectives included: releasing accurate and timely information to the media and the public by using platforms such as press releases and social media.

The first emergency plan to address the potential threat of infectious disease among passengers arriving at JWA was done in 2006 in response to avian influenza (H5N1) concerns. Dr. Cheung said over the years, the response plan has expanded to apply to any communicable disease, “Which is a threat to public health and can be transmitted on an airplane.” These include (but are not limited to) “Measles, Ebola, novel influenza, Severe Acute Respiratory Syndrome (SARS), MERS and meningococcal meningitis, with the main goal being to prevent the introduction, transmission or spread of suspected communicable diseases.”

In the scenarios, as in a real-life incident, the HCA has... continued on page 10
Occupational and physical therapists at California Children’s Services (CCS) are showing they know how to think ‘outside the box’ when it comes to meeting the needs of their clients. In this case, ‘the box,’ is a desktop 3-Dimensional (3D) printer. They’ve been showing their know-how by designing items they can print for the clients they serve, who range in age from newborns to 21 years. The 3D printer they use makes the items out of plastic, with the therapists designing the items and deciding how dense and durable they need to be. So far they’ve created tools, toys and even a bow tie. There’s really no limit to what they can create said Dennis Chen, Occupational Therapist II, “It’s only a tool, but it’s opened a new frontier.”

The new frontier includes giving the therapists the ability to create more customized materials for their clients and let them, “Try before they buy,” said Nicole Madonia, Physical Therapist II, “We can make a prototype for a child and test it. This gives us more opportunities to see what they need and what works. It’s also less expensive than purchasing the materials and getting equipment which might not work or fit properly.”

3D printing has been around for over 30 years in the science and engineering fields, but has only just begun to be used in therapy (for an overview click here). So, when CCS acquired a 3D printer in December, it opened up a new world of possibilities. The team using the printer has been learning as they go said Nicole, “The design capability requires a whole new skill set. This isn’t something that was taught when we went to school to become therapists. The three of us have taken the time to learn this technology. Whoever wants to use this will have to invest their own time as well. But it is well worth the investment so that we can meet the needs of our clients, which is what drives us.”

One of the biggest successes they’ve had so far is working with a 9-year-old boy named Cesar. They designed a device which helps him hold the bow on his violin. “His mom and a friend made something out of materials in their kitchen, it worked, but it kept breaking,” said Dennis who then designed the device which Cesar now uses to hold the bow. “It took only two prints to build a device for him. Now Cesar is in a special music school, playing with his school orchestra and he plays in public concerts too. The key to this technology is, if you can think of a solution, it can come out of the box. Once you have a vision of what you want to create, you can create it with this technology.”

But the team keeps the vision in focus said Nicole, “This is not a replacement for anything and this is not something everyone gets. Sometimes the off-the-shelf tools and equipment work just fine. Cesar’s is a perfect case. We only use the printer when we need it because it can address specific needs. This is not something that is necessary or that works for every client or concern. It’s not perfect yet, it’s not a solution for everything.”
While there is trial and sometimes error, at least there’s no starting over from scratch. Anything sent to the printer is saved on a file said Kelly Culhane, Occupational Therapist II, “If something breaks, the file is saved. So like a word document, you can print it again, or modify it as needed. This lets us try a lot of new things, whether we are creating a device or modifying an existing one. We’ve never had this technology available to us but now we can come up with ideas and create our own tools.”

The team said the 3D printer has allowed them to enhance the overall therapy services they provide and given them more opportunities to, “change disability to ability, through 3-Dimensional printing.”

First MEASLES Case in Orange County in 2019

Just as the What’s Up Newsletter was scheduled to reach your inbox, the Health Care Agency’s (HCA) Epidemiology and Assessment (E&A) confirmed the first case of Measles in Orange County (OC) for 2019. The case involves a resident of Placentia in her 20s who travelled internationally. You can read our press release here. There is also widespread media coverage including this report from KCBS TV here. For HCA’s information on Measles visit www.ochealthinfo.com/measles.

The OC case follows a news release from the California Department of Public Health (CDPH) which urges Californians to make sure you are protected from Measles. The need for vaccination was emphasized by Dr. Nichole Quick, Interim County Health Officer, as she conducted more than 10 interviews with local media on the OC case. “Measles is a highly contagious and potentially severe disease that causes fever, rash, cough, and red, watery eyes,” said Dr. Quick. “It spreads very easily by air and by direct contact with an infected person, and is contagious from approximately four days before the rash appears through four days after the rash appears. The MMR vaccine is a simple, inexpensive, and very effective measure to prevent the spread of this serious virus.”

State officials said there were 39 measles cases in California in late April, including the OC case. That compares to 22 during the same time period in 2018. The measles cases associated with the current infections in California involve people who’ve traveled to India, Cambodia, Thailand, Philippines, Vietnam and Ukraine. Of the 39 measles cases, the CDPH said 15 were due to people traveling internationally and 22 cases were due to the spread of the disease from travelers to people in California. The other 2 cases are from an unknown source.

If you need guidelines or recommendations for measles vaccinations, you can find more from the Centers for Disease Control by visiting here. You can follow reports on measles in California on the CDPH website, which is updated on Thursdays, by visiting here.
When it comes to written communications at the County of Orange (County), there are some tools and guidelines the County Executive Officer (CEO) wants to call to your attention. This is also a good opportunity to share updates from the Health Care Agency (HCA) Communications team and to offer some basic tips for writing, according to the County guidelines. We’ll also share some changes and common misunderstandings in written communications.

To begin, the County follows its own modified-version of the Associated Press (AP) style guide for all of its written communications. The written communications include, but are not limited to: Agenda Staff Reports (ASRs); social media posts; power point presentations (slide shows); as well as flyers, documents and reports. You can see the County's basic guide by visiting here: County Style Guide. (These are in SharePoint, which means they must be accessed by using Internet Explorer.) The County Style Guide explains, among other things, how to refer to members of the Orange County Board of Supervisors and the County/county as well as the basic use of punctuation.

When it comes to ASRs, the CEO has issued additional preparation tools.

These documents are also in SharePoint, and you can find them here: CEO ASR Checklist and ASR Guidance Document. Things to keep in mind:

- Prior Board Action dates: double digits (mm/dd/yyyy #xx)
- Acronyms are not to be used in the Recommended Action and Summary portions
- Numerals: One to Nine are spelled out, 10+ can be numeric
- Commas are to be used after each date used in Background Information

Any questions about ASRs can be directed to Thu Do, ASR Coordinator, Director’s Office at thudo@ochca.com.

As for writing according to the County/AP style, basically there are two types of audiences. The first is writing for a general audience. The idea here is to keep things simple and focus on your audience. When it comes to writing and format for a general audience, AP recommends, “When in doubt, keep it out.” That means for example, if you don’t know whether a word

Overview of participants and onlookers at JWA AEP TTX.
should be capitalized, AP says don’t capitalize it. The second type of audience is scientific or academic which has a more formal style. For these, words such as Measles or Mumps might be capitalized, while for a general audience they are likely lower case. However diseases with a name, such as Alzheimer’s, are always capitalized.

By the way, there are times when the County style and AP format are not in sync and don’t be surprised by that. In April, AP sent out its monthly email which included changes. A couple of those: hyphens are no longer used to identify Americans by heritage. So now, AP uses Asian American or African American or Filipino American, without hyphens. And one change which could impact ASRs in the future, AP now says the % sign is to be used, when it’s with a numeral such as 10%, instead of writing out the word ‘percent’. The County’s ASR Checklist (page 5) says to use numerals and spell out the word ‘percent.’ For now, follow the County guidelines.

It can be frustrating keeping up with the changes, so don’t take the process personally. It takes time for them to be implemented and adopted. Keep in mind, the County updates its Style Guide annually, while AP issues updates at any time. With that in mind, a couple other ‘words in the works’ include ‘health care/healthcare’ and ‘Veterans/veterans.’ For now, even though the singular ‘healthcare’ is becoming more common in the U.S. and is used in Britain, AP still uses two words ‘health care.’ As for ‘Veterans/veterans,’ there are efforts in the U.S. to capitalize ‘Veterans’ on every use as a way to honor Vets. AP still uses lower case ‘veterans,’ unless you’re writing about something specific such as Veterans Affairs. If you want to keep up with changes by the AP, you can subscribe to their monthly email by visiting here.

This also brings up some of the services offered through HCA Communications. We check HCA written materials for spelling, punctuation, format and logo use. We also look for consistency and often ‘read out loud’ the written communications to make sure they ‘sound good.’ Our staff might offer format suggestions on the communications we review, with the understanding you are using ‘your voice’ when you write to your audience, so you decide what to do with any suggestions. Frankly, you’re the expert when you write to your audience and we are another pair of eyes or another audience, simply sharing how your words come across, with the desire to encourage your success. You can visit the HCA style guide here.

Also be advised, if you are submitting any written communications which are ‘public facing’ and have any kind of ‘shelf-life,’ they will need to be approved by HCA Director Richard Sanchez and/or your deputy agency director. On a similar note, for public events, many programs submit flyers or communications which feature events that are open to the public. Those public events are now being directed to the County Calendar for possible appearances by supervisors or their staff and they are also being considered for posts on HCA’s Facebook and/or Twitter accounts. So if you have an event you’d like on social media, please let us know.

One final reminder from HCA Communications is the information about PowerPoint Presentations can be found on the HCA intranet. It includes guidelines and templates. You can access them by searching ‘PPT’ or ‘PowerPoint’ on the OCHCA Intranet or by clicking here: PowerPoint.

Any questions, check with your program manager or supervisor. We’re also here to help at hcacomm@ochca.com.
5 Things You Need to Know About:

1. Pertussis or whooping cough, is a highly contagious bacterial disease which affects the respiratory system. It causes coughing that is uncontrollable and often violent, which makes it hard to breathe. It can affect people of all ages, it can last for weeks, and for babies less than a year old, it can be very serious or even deadly.

2. The County of Orange Health Care Agency (HCA) issued a press release stating the last pertussis-related death in Orange County (OC) was in 2007. You can read the HCA press release here. You can also read media reports by clicking on the OC Register or KNBC.

3. Pertussis cases in Orange County were down slightly for 2018 (171 cases) compared to 2017 (193 cases) according to HCA Epidemiology and Assessment (E&A). Epidemics of pertussis in the U.S. occur every 3-5 years. E&A reports the most recent epidemics in OC occurred in 2010 (485 cases) and 2014 (456 cases).

PUBLIC HEALTH QI AND TECH SHOWCASE

▲ Family Health Clinics. Pictured: (L-to-R) Denise Tirol, RN Senior Staff Nurse and Genny Gallegos, LVN, Vaccine Coordinator

▲ The Alcohol & Drug Education & Prevention Team (ADEPT). Pictured: (L-to-R) Chrislyn Nefas, ADEPT Research Analyst and Pauline Stauder, ADEPT Program Supervisor

▲ 17th Street Testing, Treatment and Care. Pictured: Alyssa Haveman, Senior PH Nurse

▲ MyHEALTHOC. Pictured: Henry Torres, myHEALTHOC Webmaster
“The best way to prevent pertussis is to be up-to-date on vaccinations,” said Dr. Nichole Quick, Interim County Health Officer. “Children should receive five doses of DTaP (diphtheria, tetanus, acellular pertussis) as part of their routine vaccination schedule starting at two months of age,” said Dr. Quick. For more on pertussis click here.

There’s also guidance for pregnancies. “During each pregnancy, regardless of when their previous pregnancy occurred, it’s strongly recommended they receive Tdap vaccine during their third trimester (weeks 27 to 36),” said Dr. Quick. “Vaccination during this time stimulates the production of maternal antibodies that are passed on to the infant, offering protection to the baby against pertussis during the first few months of life.” For more on pertussis and pregnancy visit https://www.cdc.gov/pertussis/pregnant/index.html.

For descriptions of each entry, click here.
For Health

Have a beverage! But before you do, consider your options. May 8th is ‘Rethink Your Drink Day.’ This is a state-wide day of action to raise awareness about the health effects of drinking sugar-sweetened drinks and the health benefits of drinking more water.

Adding fresh fruits and herbs can enhance the flavor and help you drink more water. For ideas on how to add flavor to your water, try one of these recipes.

Living healthy doesn’t have to be hard. Making small changes to what you drink can lead to big wins! For more tips on making small changes to your beverages, click here.

WATERMELON, LIME AND MINT WATER

**Ingredients:**
- 1 cup watermelon
- 1 lime
- 5 mint leaves (optional)

**Directions:**
1. Wash all produce.
2. Collect, slice*, and measure all ingredients before starting to prepare the recipe.
3. Add all ingredients plus enough cold water to a fill a 2-quart pitcher. Chill overnight in the refrigerator for the most flavor and store in the refrigerator until ready to drink. The fruit will stay fresh in the water for up to 48 hours after being prepared.
4. After you drink the water, you can eat the fruit or blend it into a smoothie!

**Notes:**
Try these refreshing flavor combinations or create your own!

1. **Watermelon Lime**
   - 1 cup watermelon
   - 1 lime
   - ½ cucumber
   - 5 mint leaves (optional)

2. **Pineapple Grape**
   - 1 cup canned diced pineapple
   - Pineapple juice from can
   - 1 cup grapes

3. **Cucumber Lemon** (or Lime)
   - ½ cucumber
   - 1 lemon or lime

4. **Berry Kiwi** (or Orange)
   - 10 strawberries or blackberries
   - 1 kiwi or 1 orange

*Tips for releasing flavors of the produce:
Watermelon: Cut into small pieces (1 to 2 inches).
Citrus fruit (oranges, lemons, limes): Remove rinds and slice into thin pieces.
the reasons why he said he likes all the trainings that are required for his job, “I don’t want to stagnate, I don’t want to stop learning. I don’t want to hit a point where I just do one thing. It also improves what we do.”

What we do is important to Gerrit, who really wanted to emphasize that his colleagues should receive credit, “For all the good day-to-day work that goes on in Environmental Health (EH).” He said a “team first” attitude is at the core of what EH does, “A lot of it doesn’t make the news; it’s focusing on prevention and makes sure chemicals and other hazards don’t get into the environment. We can also investigate with the District Attorney’s Office and help bring convictions or compliance. And, when you’re surrounded by colleagues, like I am, who work as hard or harder than you, it pushes you to constantly improve.”

Gerrit continues to push himself as well. Even though he earned a Bachelor of Science in Biology and a Bachelor of Arts in Chemistry at Cal State Fullerton, he was recently certified as an Emergency Medical Technician (EMT) and hopes to incorporate that into his job.

When he’s not at work, Gerrit said he does some traveling, 5K runs from time to time and hits the links, “I golf as much as I can. A couple coworkers and I go whenever we have free time. I’m not good at all, but it’s fun. It’s my number one thing to do.”

1. “There are inspectors who help train and work on multiple enforcement cases. Inspectors who handle registrations and inspections of body art facilities every day. They even have supervisors who manage Waste Tire and Used Oil grant programs along with staff who still conduct compliance inspections. The HazMat group even has multiple people who are on statewide Technical Advisory Groups which are involved with working with regulated communities and state legislation.” As much as he is humbled by the recognition, Gerrit said he knows he would be no where without his team and those that have contributed to his current position.

2. Gerrit wearing Level A “space suit” for training. He said special HAZWOPER and HazMat Technician requirements must be met to wear the suit and make entry. For more visit: Hazardous Waste Operations and Emergency Response.

3. Gerrit, second from right, assisting Santa Barbara officials with Dean Freed, EH Supervising HazMat Specialist, (pictured on left with sunglasses), in identifying some of the unknown chemicals after the Montecito mudslides and hazardous waste cleanup. (Jan/2018)
Seeking Nominees for “Challenge Awards”

Nominations are now being accepted for the California State Association of Counties (CSAC) “Challenge Awards.” These awards are given to recognize and honor county programs or projects which serve with “innovative or creative spirit,” by finding “innovative, effective and cost-saving ways to provide programs and services to their citizens.”

There are five categories for entries:

1.) **Administration of Justice & Public Safety** – Includes programs associated with local law enforcement and public safety, adult and juvenile detention, and probation.

2.) **Agriculture, Environment & Natural Resources** – Includes programs associated with agriculture, the environment, air quality, water, flood control, energy, parks and recreation, public lands, forestry, mining, endangered species, solid waste and hazardous waste.

3.) **Government Finance, Administration & Technology** – Includes programs associated with internal operations, employee training and wellness, workers’ compensation, public records, technology, economic development, libraries, elections, food safety and disaster planning/response.

4.) **Health & Human Services** – Includes programs associated with health care, mental health, homelessness, foster care, child welfare services, adult protective services, In-Home Support Services (IHSS), general assistance, aging, CalWORKs, county hospitals/medical facilities, the indigent and veterans.

5.) **Housing, Land Use & Infrastructure** – Includes programs associated with housing, land use, growth, planning, transportation, infrastructure and tribal gaming issues.

If you want to enter, please discuss your entry with your program supervisor and division leadership to secure input and approval.

- Please email your completed submission(s) in WORD document format by Monday, June 3 to Julie MacDonald, Health Communications Manager, jmacdonald@ochca.com.

- HCA Communications will review, edit, and secure an endorsement letter from the CEO’s office and process payment for all agency submissions.

You can find complete details on the Challenge Awards, including how to enter, by clicking here.