

## Inside

—2—

Director's Message continued  
Supervisors Extinguish  
Secondhand Smoke from Health  
Centers

—3—

Service Excellence  
Honor Roll

Employee Milestones

—4—

Reducing Health Disparities

— African-American  
Children More Likely to be  
Hospitalized for Asthma

—5—

Reducing Health Disparities  
continued

— Clinical Services' Pediatric  
Asthma Program Checks for  
Triggers in the Home

— CCHP's Asthma Program  
Provides Education and  
Case Management

— CW&PP Tackles Asthma  
Triggers in Schools and  
Outdoor Air

—6—

Bay Point Staff Donate Clothing to  
Newborns, Toddlers

Work Plan for Prop. 63 Approved;  
Committees Prepare to 'Go  
Beyond!'

School Pandemic Kit, Senior  
Health Page New Additions to  
Website

—7—

Foundation Forms Advisory  
Group, Switches Gala to  
November 18

Staff Member Brings Good Cheer  
by Creating a Hospital Clown  
Program

Free Tax Preparation Program  
Has Record Year

Environmental Justice Health  
Summit Held in Richmond

—8—

Associate Director Mary Foran  
Retires

Environmental Health Division on  
Cutting Edge

Art Flourishes in CCRMC  
Courtyard

Website, Video Help Prepare Staff  
as Disaster Service Workers

## The Power of Change

The June issue of the Director's Report talked about the recognition Contra Costa Regional Medical Center is receiving for its participation in the nationwide 100,000 Lives campaign spearheaded by the Institute for Healthcare Improvement (IHI). Along with 3,102 health systems around the nation, CCRMC is making changes to prevent avoidable deaths and injuries. At the first year anniversary of the campaign, IHI announced that 122,342 lives were saved across the country in 18 months. I am delighted that we are part of this extraordinary effort. My vision is that we'll apply the campaign strategies in other parts of our department and that other divisions will be eager to begin. At CCRMC that's what has already happened. The campaign started in one department and even before everyone could be trained, staff members were encouraging us to roll out the change more quickly. I've been impressed not only with the concrete results the campaign has accomplished but the sense of team spirit and commitment that it has generated among staff. In all my years with the department, I've never seen a system change that rapidly – and voluntarily at that.

### The Results

First I want to share with you what the six teams at CCRMC have achieved in the IHI campaign areas. (You can see pictures of the teams on iSITE, the CCHS Intranet). Even for those of you who have no medical training, the achievements should be impressive: Ventilator associated pneumonia rates have been reduced by over 90% since January of 2004. The number of patients with completely reconciled medications on admission has improved from 53% to 93%. That means a patient's records are cross-checked to make sure all their medication information is consistent, current and "reconciled" with past records. As a result, we've improved safety for 400 patients a month. CCRMC's new Rapid Response Team can get to a crisis in the facility within three minutes. Early aspirin use for patients suffering

from acute myocardial infarction has improved from 67 minutes after arriving at triage to 8 ½ minutes. We have had a substantial reduction in postoperative total joint replacement infections. The surgical site infection team identified barriers to preventing infections. The team began working with a vendor to create a kit so our providers could go to one location to obtain supplies and equipment needed to place an intravenous line into the heart.

During a visit from IHI representatives, I felt immense pride in our staff for pulling together to achieve these outcomes. Part of that pride comes from knowing many large, well-funded hospitals are participating in the campaign and yet we've had feedback from around the country about how impressive our efforts are, even though we are a small, publicly funded hospital. The fact that we have been chosen as a mentor hospital for our efforts in medication reconciliation – only one of 11 in the nation for that issue – is another source of pride.

When we entered into this effort it was my hope that we could learn quickly from other institutions about how to improve our processes to save lives. I expected some success. It was beyond my wildest imagination that we would become a leader and be recognized so quickly.



Dr. Walker

*Continued next page*

## DID YOU KNOW

Our Health Centers performed **77,100**  
diagnostic imaging tests last year.

### Lessons Learned

I think there is a lot we can learn from these dramatic results. Although the campaign is a national effort and IHI provided participants with a "bundle" of strategies to begin with, the change was driven locally, at the point of service where mistakes happen and problems arise. Solutions were driven by local knowledge, expertise and dedication. Multi-disciplinary teams helped people realize areas they were overlooking, focus on the bigger picture and recognize that the answers were at the table. And we heard about how the best practices being applied in other organizations were having dramatic results.

Management didn't tell the teams what to do or how to do it. They were exposed to the information that was there. IHI staff provided the tools – and the hope that change was possible. It was up to us to transform our operations and we did. When I meet with the teams, I can feel the passion of the leaders and the excitement generated among the members for a new way of relating to each other and improving their systems.

The improvement process has required unprecedented sharing among many hospitals leading to collaborative learning. It has required that professionals of many disciplines be in the same room instead of each discipline meeting separately. And it has required rapid cycle improvement, a method where you make test improvements immediately on a small scale and improve and test rapidly. It allows for many points of evaluation and revision, which is in contrast to traditional change projects where there are longer phases of planning and implementation with evaluation points later in the process. These are all principles we can apply elsewhere and since we are an integrated health department, there are many opportunities.

Just as some of the system improvement processes originally came from industry and were adapted by hospitals, so can these techniques be taken to other parts of our system. They are certainly not specific to inpatient hospital care. We have many places in our organization where new ways of doing things can significantly impact outcomes and our successes.

Sincerely,



William Walker, MD

### The Power of Change

Each time I hear our staff talk about the 100,000 Lives Campaign and hear recognition for our success, I realize the power of that kind of change to improve the organization.

We are already doing some transformation efforts department wide.

Our Service Excellence commitment has been in place for five years. It has had an impact on the CCHS culture.

Our Reducing Health Disparities initiative is even newer and far more complex. It has the potential to achieve extraordinary results in the long term.

I am very proud of our staff for participating in these change efforts. I want to encourage all of us to believe that improvement and success are possible, no matter how difficult the problems seem. We will have a vital and flourishing organization if we work cooperatively and continuously to improve. – WW

## Supervisors Extinguish Secondhand Smoke from Health Centers

The County Board of Supervisors recently voted unanimously to adopt a smoke-free campus policy for CCRMC and all county Health Centers, making us the second health system in the county (after Kaiser Permanente Diablo Valley Service Area) to adopt such a policy. In a separate but related action, the Board also voted to direct staff to write an ordinance extending protection from secondhand smoke to public parks, housing complex common areas, public trails, public event venues and public service areas such as bus stops, ATM lines and public eating areas. The vote came following testimony by representatives of the American Cancer Society, American Lung Association and Contra Costa Tobacco Prevention Coalition. The Board's actions are, in part, related to the designation of secondhand smoke as a toxic air contaminant by the California Air Resources Board. The actions are also consistent with the U.S. Surgeon General's report last month that concludes that there is no risk-free level of exposure for secondhand smoke.



For more information about the ordinance call Denise Dennis, Tobacco Prevention Project Manager, at 925-313-6214.

# GOING THE EXTRA MILE FOR SERVICE EXCELLENCE

## Honor Roll

### **Mario Arias**

*Clerk Experienced Level  
Pittsburg Health Center*

For showing a lot of patience and caring to assist an elderly cancer patient in getting home. He was very compassionate and diligent.

—Nominated by Esther Gutierrez

### **Dominique Crawford**

*Clerk Experienced Level  
Discovery House*

For greeting all persons admitted to Discovery House with a very sensitive and respectful manner, giving them confidence to take the first step in recovery while doing paperwork for the entire residence.

—Nominated by Bob Kajdan

### **Donna Kaufman**

*Manager  
CCHP Asthma Program*

“She is the answer to my prayers.” I rely on her home visits and for her help in navigating the system.

—A patient

### **Elmina Green**

*Community Health Worker Specialist, Prenatal  
Care Guidance*

*Family, Maternal and Child Health Programs*

For her commitment to homeless pregnant women and children and her outstanding work on the planning committee for the Homeless Prenatal Conference for the past 10 years.

—Nominated by Cheri Pies, Itika Greene and Jane Aloo

### **Dr. Estela Hernandez and the Emergency Department team**

*CCRMC*

For excellent treatment from triage to X-ray to CT scan to discharge and for follow-up phone calls to check on my progress.

—A diabetic patient

## Employee Milestones

Congratulations to these employees who have given us long years of service: Eileen H. Brooks, Frenda Y.K. Chan, Davida McEachnie, Robert E. Jones, Victoria L. Perry, Pamela Weary, Susan N. Smith, Willie B. Coleman, Vicki Kirk, Yasmin P. Lavaly, Jeffrey Nelson, Donna M. Wigand, Kenneth A. Katzman, Claudia McNabb, Rachel Deguzman-Salumbides, Francisca M. Garcia, Catherine L. Kissinger, Joanne B. Genet, Fatmata N. Longstreth, Brenda J. Parker, Sandra J. Miller (10 years); Maru R. Ferrer, Diana A. Gale, Itika Greene, Judith Jones, Stanley G. Lunt, Peggy A. Stanton, Anthony M. Tharp, Heidi A. Asao, Mary E. Kooyman, Wendy D. Mailer, Angela M. Roche, Nestor Y. Millado, Carol J. Wexler, Rosemarie R. Garcia, Renee M. Garner, Allison F. La Shon, Lilian M. Wilson, Carol D. Raymond, Elena O'Mary, Connie W. Ward (15 years); Maiyoon Chao, Faiza Issaq, Pamela A. Hall, Elizabeth A. Thompson, Dolcie L. Wilks, Mary P. Foran (20 years); James Carpenter, David Suchow, David Hill, Gilbert Elies (25 years); Helen P. Sanchez, Darlene Scarbrough, Grace Marlar, Jeannie A. Detomasi, Leila B. Bito (30 years); Janice M. Vad and Delia Mariscal (35 years). (*We know there are lots of other dedicated employees with long years of service. Because of space limitations, we are only reporting those with 10, 15, 20, 25, 30 and 35.*)

**The Director's Report is published monthly.** Deadline for the September edition is August 10. Publicize your upcoming events and successes by sending information to Julie Freestone at 597 Center Avenue, Suite 255, Martinez 94553, fax 925-313-6219, email: [jfreestone@hsd.co.contra-costa.ca.us](mailto:jfreestone@hsd.co.contra-costa.ca.us). The Director's Report is available online at [cchealth.org](http://cchealth.org) and on iSite, our Intranet, at [cchs](http://cchs).

As part of our Reducing Health Disparities Initiative (RHDI), our divisions have been working on three key areas: improving linguistic access, implementing educational activities on diversity and cultural and linguistic competence, and developing an organizational climate that values patient, customer and employee diversity. Each month, this page highlights what CCHS is doing to address a specific health disparity and what still needs to be done.

## Reducing Health

# Disparities



(Left to right) Donna Kaufman, Sally McFalone and Cedrita Claiborne



## African-American Children More Likely to be Hospitalized for Asthma

This month's Reducing Health Disparities page focuses on asthma. African-American children and children living in Richmond and San Pablo (West County) are more likely to be hospitalized for asthma than the county overall. African-American children throughout Contra Costa also are almost five times more likely to be hospitalized for asthma as white children. (Data is from 1998-2000. See our *Community Health Indicators for Selected Cities and Places in Contra Costa* available online at [cchealth.org](http://cchealth.org) by clicking on Health Data.) Asthma is a chronic disease of the lungs' airways that can be debilitating and life-threatening without appropriate diagnosis and treatment.

CCHS is trying to reduce this disparity by addressing three key factors that contribute to this problem in our community: limited access to health care, lack of effective education about asthma management, and exposure to triggers like air pollutants.

# Here's what we're doing:

## Clinical Services' Pediatric Asthma Program checks for triggers in the home

1

Though asthma can be almost completely controlled with proper medication and care, the disease can be difficult to treat, according to Sally McFalone, who runs the Public Health Clinical Services' Pediatric Asthma Program. "Asthma is particularly difficult to treat in families who are dealing with other competing issues such as lack of insurance, poor living conditions and economic adversity. Our in-home visits have been most effective and we need to do more home care that is coordinated with providers at our hospital and clinics," Sally said.

Public Health Clinical Services' Pediatric Asthma Program provides regular home visits by community health workers to help families properly manage their child's asthma and get rid of environmental triggers – things like secondhand smoke, mold and pet dander – as well as obtain health coverage and care from a medical doctor or nurse practitioner.

These efforts have been successful. Statistics showed that childhood asthma hospitalizations in Contra Costa decreased between 2001 and 2004. The number of children seeking care for their asthma at the North Richmond Health Center also doubled and the number of children coming back for regular asthma care quadrupled.

2

## CCHP's Asthma Program provides education and case management

Contra Costa Health Plan's (CCHP) Asthma Program also provides a Registered Nurse to do in-home and over the phone asthma education and case management assistance to help patients get the treatment they need to stay healthy, said CCHP Asthma Program Manager Donna Kaufman. A new \$20,000 grant from Kaiser Permanente will allow the program's community advocate to continue doing in-home trigger assessments. These outreach efforts help build trust and bring the service directly to clients' homes, an important service because transportation is an issue for some families. The Asthma Registry also helps CCHP track and manage patients' care.

## 3 CW&PP tackles asthma triggers in schools and outdoor air

While the Pediatric and CCHP asthma programs focus primarily on the medical management of asthma and reducing in-home triggers, our Community Wellness & Prevention Program (CW&PP) is working on the other triggers outside the home.

CW&PP's Community Action To Fight Asthma (CAFA) Project, which previously concentrated efforts in the home, is now focusing on policy change to reduce triggers in the outdoor air and school environments, according to Cedrita



Claiborne, CW&PP's Asthma Program Manager. CAFA is an initiative of The California Endowment and its policy advocacy work is accomplished through the Contra Costa Asthma Coalition. The coalition is composed of community organizations and individuals concerned with addressing the environmental aspects of childhood asthma.

CAFA's policy priorities include encouraging schools to use less toxic cleaners that can exacerbate asthma, as well as reducing the exposure of West County residents to diesel particulate matter, also an environmental trigger. Deluged By Diesel, a diesel pollution study released last year, showed that residents of Richmond, North Richmond and San Pablo are exposed to six times more diesel particulate matter per square mile than the county as a whole. To address this problem, Claiborne's program is one of several projects working with the county Community Development Department through a transportation-planning grant to study truck routes and develop a plan to keep trucks out of residential areas. "We're trying to make the places where our children live, learn and play healthier," Cedrita said. "And this benefits everyone."



Let us know how you like the new RHDI page. Contact Kate Fowlie via email at [kfowlie@hsd.cccounty.us](mailto:kfowlie@hsd.cccounty.us) or call 925-313-6832.

## Bay Point Staff Donating Clothing to Newborns, Toddlers

Many of the clients at the Bay Point Family Health Center are low-income mothers and mothers-to-be. It came to the attention of Dr. Greta Perez that some could not afford clothing or basic items for their newborn babies, and she decided to do something about it. She started asking for donations and a cabinet at the Center was then devoted to storing a collection of new and lightly used clothing for babies aged newborn to 18 months. Upon getting to know a pregnant client, if a provider at the Center believes she could use some help, she is directed to the cabinet and allowed to take whatever she needs. Women are asked to return the items once their baby outgrows them. About 20 people have made donations, mostly Health Center staff, and more than two dozen women have borrowed from the collection. "This is a great service to the community," commented an editorial about the program in the Contra Costa Times. "We commend the Bay Point health care workers and doctors who saw a need and ... created this community closet out of the goodness of their hearts."



Dr. Greta Perez



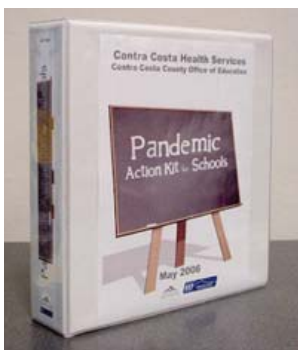
*Donations are still being accepted at the Bay Point Family Health Center. For more information call Mary Sanchez at 925-427-8335.*

## Work Plan for Prop. 63 Approved; Committees Prepare to 'Go Beyond!'

After six months of meetings, conference calls and written responses, our Mental Health Division's Community Services and Supports Plan for the Mental Health Services Act (MHSA, i.e. Prop. 63) was approved recently by the State for the first year of funding. Passed by California voters in November, Prop. 63 levies an additional 1% tax on individuals with taxable incomes of more than \$1 million and directs that revenue to be used to expand mental health services for people with serious and persistent mental illness. The state has allocated \$7 million per year in Contra Costa for four new programs to serve children, transition-age youth, adults and older adults. We're still negotiating with the State Department of Mental Health on the actual dollar amount Contra Costa will get, but hope to have a signed contract sometime soon. The Request for Proposals for new services will be issued soon after that. Our MHSA Communications Work Group developed the slogan "Go Beyond!" for all of our new MHSA activities including our Consumer Involvement Steering Committee, Transition-aged/Young Adult Work Group and new Family Involvement Steering Committee.



*For more information contact Kimberly Mayer at [kmayer@bsd.cccounty.us](mailto:kmayer@bsd.cccounty.us) or 925-957-5132.*



## School Pandemic Kit, Senior Health Page New Additions to Website

Check out two exciting additions to our website ([cchealth.org](http://cchealth.org)): the Pandemic Action Kit for Schools to help prepare them for the possibility of a pandemic flu outbreak, and a new Senior Health page. Our Health Emergency Response Unit and the Contra Costa County Office of Education created the school kit, which includes fact sheets on pandemic flu symptoms and prevention and health care tips, guidelines on when schools might need to be closed and other information. There is currently no pandemic flu in people or birds in the United States, but people in other countries have been infected with Avian Flu (H5N1) virus through close contact with infected poultry. The school kit is part of our ongoing pandemic flu planning efforts. It's been given to school districts to distribute and also can be downloaded

from our website. The Senior Health page can be found under Services on the opening page of our website. The new page was created to provide a single location for information on our programs to address the needs of the growing number of seniors living in Contra Costa. CCRMC's Dr Aneela Ahmed inspired the page by requesting that her Geriatric Consultation Team's brochure be posted on the CCHS website.

## Foundation Forms Advisory Group, Switches Gala to November 18

Contra Costa Regional Health Foundation has formed a new advisory group and changed the date of its annual gala out of respect for a religious holiday. The Foundation's Third Annual Gala Event is now Saturday, November 18, at the new Lafayette War Veterans Memorial Building. The theme is "Jazz on the Boulevard." It was brought to the attention of the Foundation Board that the original date of September 23 fell on the Jewish Holiday of Rosh Hashanah. The Board of Directors felt it was important to reschedule. The Board has also formed an Advisory Group to provide assistance and support to the mission of the Foundation. The Advisory Group will serve as a "sounding board" for the Board of Directors. The list of community members who have agreed to serve will be announced in the next Directors Report.



News about the Foundation can also be found in its newsletter and other pages of its website ([www.ccrhf.org](http://www.ccrhf.org)).

## Staff Member Brings Good Cheer by Creating a Hospital Clown Program

There's nothing funny about a stay in the hospital, but as the saying goes, laughter is often the best medicine. With that in mind, Richard Bryan, a storeroom clerk at CCRMC, decided to use his training as a clown to cheer up patients at our hospital. Richard had previously attended classes and conventions about clowning and worked several parades and birthday parties. He created a Hospital Clown program, going from floor to floor as O'no the Clown, spreading good cheer from 11 a.m. to 2 p.m. two Tuesdays each month. He gets advice from a Hospital Clown newsletter and hopes to recruit more clowns into the program. Good job Richard! Laugh and the world laughs with you!



For more information contact Louise Lawson, CCRMC Volunteer Coordinator, at [llawson@bsd.cccounty.us](mailto:llawson@bsd.cccounty.us) or 925-370-5400.



O'no, aka Richard Bryan

## Free Tax Preparation Program Has Record Year

This year's Contra Costa "Earn It! Keep It! Save It!" (EIKISI) program helped 1,987 low-income families and individuals in Contra Costa County file their taxes and collect more than \$2.3 million in tax refunds and credits. The free tax preparation service was provided through volunteers, including eight Contra Costa Health Services employees. In 2005, the program helped about 1,700 Contra Costa families and individuals collect \$2,055,369. Volunteers from CCHS at the Voluntary Income Tax Assistance (VITA) sites included Carmen Nagatani, Natalie Rios, Margarita Allen, Shari Miller, Isabel Ongkingco, Mike Wedl, Glen T. Tipton Jr., Barbara Barton, Ednah Beth Friedman, Cynthia Sokaya and Vicki Kirk. The EIKISI program is sponsored by the Family Economic Security Partnership (FESP), a public, private and nonprofit collaboration including CCHS, the Contra Costa Employment and Human Services Department, United Way of the Bay Area, First Five Contra Costa, IRS, and the East Bay Community Foundation.



For more information, contact program manager Lloyd Madden at [Lmadden@ehsd.cccounty.us](mailto:Lmadden@ehsd.cccounty.us) or 925-313-1736.

## Environmental Justice Health Summit Held in Richmond

An Environmental Justice Health Summit was held June 10 in Richmond on disparities in health and disease indicators affecting primarily African Americans, Latinos and Asians in West Contra Costa County. Discussion focused on how pollution, poverty and race relate to disease rates. Among the speakers were Cedrita Claiborne, Asthma Program Manager in our Community Wellness & Prevention Program, and Chuck McKetney, Director of Contra Costa Public Health's Community Health Assessment, Planning and Evaluation Unit (CHAPE). Chuck spoke about CHAPE's report titled *Community Health Indicators for Selected Cities and Places in Contra Costa* (available online at [cchealth.org](http://cchealth.org) by clicking on Health Data). Speakers also included County Supervisor John Gioia and representatives of many county, community and environmental justice organizations. The event was sponsored by West County Toxics Coalition, a nonprofit community group working to fight toxic exposure, protect the environment, and protect the health and safety of residents.



For more information contact Michael Kent, Hazardous Materials Ombudsman, at [mkent@bsd.cccounty.us](mailto:mkent@bsd.cccounty.us) or 925-313-6587.

## Associate Director Mary Foran Retires

When CCHS' Associate Director Mary Foran came to the County 20 years ago to be Public Health's Maternal and Child Health Coordinator, her goal was to reduce African American infant mortality. Whether it was that position or subsequent ones, including creator of the Office of Service Integration, her role was always about making change in order to improve the health of the community. She worked with others to develop the Healthy Start Program, lay the foundation for CCHS' very comprehensive set of alcohol and drug services for pregnant women and women with young children, collaborated to launch the Center for Health in North Richmond, the Bay Point Family Health Center, and the Partners for Health project in West County. In 1999, Mary became a founding member of Contra Costa's First Five Children and Families Commission. After her retirement on July 31, Mary will be an advisor to the Reducing Health Disparities Initiative, a departmentwide commitment that she has been nurturing and supporting. She leaves to study for the Unitarian-Universalist ministry.



Mary Foran

## Environmental Health Division on Cutting Edge

Contra Costa Environmental Health is one of the only agencies of its kind to offer two important benefits of electronic communication. First, our Land Use Section's "well permit by email" system has been introduced recently and has run "without a hitch" since March of this year. "A large number of regular clients are opting for the e-mail permits due to improved speed and convenience," said Sherman Quinlan, Director of Environmental Health. "We like it because it saves lots of staff time at the fax machine, and saves a large amount of paper. Inspection appointments can also be scheduled by email, reducing even more fax and 'phone tag' time." Additionally, the Division's new digital plotter and scanner will receive and duplicate plans sent over the Internet. This will save huge amounts of paper and ink and allow us to make comments electronically. Electronic revisions can greatly expedite the plan review process, as well as saving lots of time and space for rolls of paper "blueprints." These innovative approaches for reducing long-standing "bottlenecks" in processing permits and reviewing designs puts Contra Costa Environmental Health on the cutting edge of progress in these endeavors.



For more information call Sherman Quinlan at 925-646-5225, ext. 208.



## Art Flourishes in CCRMC Courtyard

(Left to right) Alex Morphy, Dr. Mark Vukalcic and Dr. John Lee perform during "Healthcare Workers as Creators: An Evening of Art on the Courtyard" on July 13 at Contra Costa Regional Medical Center (CCRMC). About 200 people came out to see and hear the art and music of 50 county doctors, nurses, administrators and other health care workers at the event, which was part of the ArtsChange program. More pictures from the event are available on I-Site (type cchs in your browser). For more information, visit [www.artschange.org](http://www.artschange.org) or call 510-231-1348.

## Website, Video Help Prepare Staff as Disaster Service Workers

Taking time to prepare before a disaster strikes will help speed recovery from the disaster as quickly as possible. The Emergency Services Division of the Office of the Sheriff has a Family Preparedness Resource Guide available online at the County's website ([cccounty.us](http://cccounty.us)). Under Departments, click on Sheriff, then Emergency Services. The website also includes links to additional resource guides, including Disaster Preparedness for Vulnerable Persons, People with Disabilities and Preparedness for Animals. Being prepared for a disaster will also help employees be better prepared to act as Disaster Service Workers. Any county employee may be called to help in the disaster recovery effort. You can learn more about "Your Role as a Disaster Service Worker" by watching the 12-minute video of that name on CCTV at 7:30 pm on the first and third Tuesdays of the month. CCTV is on Comcast Channel 27 or 19, or in some areas of Walnut Creek on Astound Channel 32.



To borrow a copy of the Disaster Services Worker video, call Fowzia Younos at 925-313-6823.