



## Legislation Details (With Text)

**File #:** 19-90      **Version:** 1      **Name:**  
**Type:** Action Item      **Status:** Approved  
**File created:** 1/30/2019      **In control:** BOARD OF SUPERVISORS  
**On agenda:** 2/5/2019      **Final action:** 2/5/2019  
**Title:** 9:10 A.M. - (a) Consideration of Amended Declaration of a Local Health Emergency and Order Prohibiting the Endangerment of the Community through the Unsafe Removal, Transportation, and Disposal of Fire Debris; and (b) Update on the Mendocino Complex - River and Ranch Fires Recovery  
**Sponsors:** Health Services  
**Indexes:**  
**Code sections:**  
**Attachments:** 1. Amended Declaration of Health Emergency for Mendocino Complex Fire

Date	Ver.	Action By	Action	Result
2/5/2019	1	BOARD OF SUPERVISORS	approved	

## MEMORANDUM

**TO:** BOARD OF SUPERVISORS  
**FROM:** Denise Pomeroy, Health Services Director  
**DATE:** February 5, 2019  
**SUBJECT:** (a) Consideration of Amended Declaration of a Local Health Emergency and Order Prohibiting the Endangerment of the Community through the Unsafe Removal, Transportation, and Disposal of Fire Debris; and (b) Update on the Mendocino Complex - River and Ranch Fires Recovery

**EXECUTIVE SUMMARY:** Attached for your review is a Resolution Amending the original Declaration of a Local Health Emergency regarding the Mendocino Complex Fire.

The Resolution has been amended to reflect signature of our current Interim Health Officer Dr. Erin Gustafson.

In addition the term of reaffirmation of Declaration has been amended to renewal of Declaration every thirty days until the health emergency is terminated, and a typographical error referencing Pawnee Fire in the original Declaration has been changed to Mendocino Complex Fire.

Should you have any questions, or require additional information, please contact myself or Dr. Erin Gustafson Interim Health Officer at 263-1090.

Thank you for your consideration of this request.

**FISCAL IMPACT:** ☒ None ☐ Budgeted ☐ Non-Budgeted

Estimated Cost:

Amount Budgeted:

Additional Requested:

Annual Cost (if planned for future years):

**FISCAL IMPACT (Narrative):** None

**STAFFING IMPACT (if applicable):**None

**RECOMMENDED ACTION:** Your Board's approval is requested and recommended.