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California's Preemptive Blackouts Put A Strain On People With Home Medical Needs

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FROM  KHN
Kaiser Health News



During recent blackouts in California, people like Fern Brown (left) and her sister, Lavina Suehead, came to a pop-up community center at the Auburn, Calif., fairgrounds to use electricity. Brown, 81, needed a treatment for her chronic lung condition.

Mark Kreidler/California Healthline

Fern Brown, 81, sat in the rear of a tent on the windswept fairgrounds of the historic Gold Rush town of Auburn, Calif., this week, drawing deep breaths through the mouthpiece of a nebulizer plugged into a power strip atop a plastic folding table.

Afflicted for years with asthma and chronic obstructive pulmonary disease, Brown uses the nebulizer twice a day to avoid flare-ups that can be life-threatening. It turns her medicine into a fine mist that she can inhale.

Her machine runs on electricity, and when Pacific Gas & Electric Co. shuts off the power in the region amid wildfire scares, as it did earlier this week, Brown must scramble to find a place where she can administer her treatment.

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"That is the real travesty of this PG&E plan: As the dominoes fall, it's the poor and the disabled who are the most affected by this."

Sandy Jay, Nurse Practitioner, Sonoma County, Calif.

She knows the makeshift "resource center" she visited on Tuesday afternoon, one of several set up by PG&E, is not a viable long-term fix — especially now that this month's power outages and the uncertainty that comes with them seem likely to be a more frequent feature of California's fall fire season.



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"I could rent a generator. Or can you rent to own?" Brown asked. "They're expensive. But that's probably what I'll do. We just want to be ready for the next time."

"That is the real travesty of this PG&E plan," said Sandy Jay, a nurse practitioner at Santa Rosa Memorial Hospital in Sonoma County, about 130 miles southwest of Auburn. "As the dominoes fall, it's the poor and the disabled who are the most affected by this."

Jay supervises a program that for 20 years has sent teams of workers throughout the Santa Rosa area to bring medicine and treatment to those whose conditions prevent them from leaving home or keep them bedbound.

Without power, though, almost all of those patients need help immediately, she said. Air-pumped mattresses, used to prevent chronic bedsores, begin to deflate. Ventilators and nebulizers cease to function. Electric wheelchairs don't respond. And many of the affected people are reachable only by landline telephones, which aren't all reliable when the power's out.

"It's just kind of unconscionable," Jay said.

Hardened by experience of shut-offs imposed by their utility company, many residents of this region – and others up and down the state – have concluded they must prepare for future power cuts.

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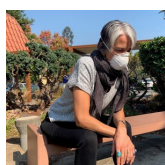
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PG&E confirmed that notion in an emailed statement, saying all its customers should "have an emergency plan to be prepared for any extended outages due to extreme weather or natural disasters." Extended outages, even planned ones, can mean up to a week without electricity, Californians in some areas have been dismayed to discover.

PG&E's statement referred customers to the utility's website page on wildfire safety, adding that local county emergency offices may also offer help.

The PG&E outages that have affected some 1.8 million Californians in the past few weeks, amid nerve-wracking warnings of wind and fire, have only affirmed the company's message.

For those with home medical needs, the quest for a durable fix has taken on real urgency.

Steve Bast, who lives in a rural section of Auburn in the Sierra foothills, has Type 2 diabetes, and his insulin needs to be refrigerated. Bast has been forced to deal with previous outages, both weather-related and PG&E-driven, some lasting several days.

Now, he said, he keeps ice packs in his freezer and puts them on the insulin containers as soon as his power goes down. He then stores the medication inside a soft cooler that zips closed and goes back in the refrigerator for as long as the unit remains cold.

Bast also uses a CPAP machine for his sleep apnea, and it must be plugged in, so he said his next move is to buy a small, personal generator. He notes however, that he would still need to find an open gas station for fuel to keep the generator running during an outage. Gas stations rely on electricity to run their pumps.

Then there's the cost: A personal generator sells for between \$400 and \$1,000, meaning it could be out of reach for people of limited means.

PG&E's temporary resource centers, of the type Fern Brown visited, are small, tented areas where up to 100 people at a time can power up devices of all kinds and get free bags of ice, cases of water and snacks. The centers are set up when an area is plunged into a utility-ordered shut-off, and they close once power is fully restored to that area.

But such centers cannot solve the bigger problems. During the last power shut-off a few weeks ago, Debrah Vitali went to check on her neighbor, 88-year-old Joan Casper. She and Casper have become close friends in their neighborhood in Santa Rosa, and Vitali knows that Casper wears an emergency calling device around her neck, which she can use to alert medics if she needs help.

The device is tied to Casper's landline, but what neither woman realized was that the landline operates through her internet connection. When the power went out, so did the internet — and with it Joan's ability to summon help.

"I couldn't believe it," Vitali said. "So we've just agreed as a group of neighbors to take turns checking on her, because she'd have no way to let anyone know she was in trouble."

California's Health and Human Services Agency this week established an ongoing, nonemergency hotline (833-284-3473) to help residents find health services in their communities during any power shut-off.

Gov. Gavin Newsom, meanwhile, has announced a \$75 million fund that state and local government leaders can tap to help purchase generators and other backup energy sources that would keep local emergency services going in their communities.

For people whose medical treatment begins at home, however, the solutions also need to begin there.

At the PG&E center in Auburn, Fern Brown completed her 30-minute treatment before speaking. She said that her asthma and COPD have become worse over the past couple of years and that skipping a nebulizer session is not an option.

Brown and her sister, Lavina Suehead, who cares for Brown, drove a half-hour from their home in the remote town of Foresthill to reach the resource center at Auburn's Gold Country Fairgrounds. They said they would be seeking another solution, both for Tuesday night's treatment and beyond.

"We'll have to do something," Brown said. "We're out of power a lot."

This story was produced by Kaiser Health News, which publishes California Healthline, an editorially independent service of the California Health Care Foundation. KHN is not affiliated with Kaiser Permanente.

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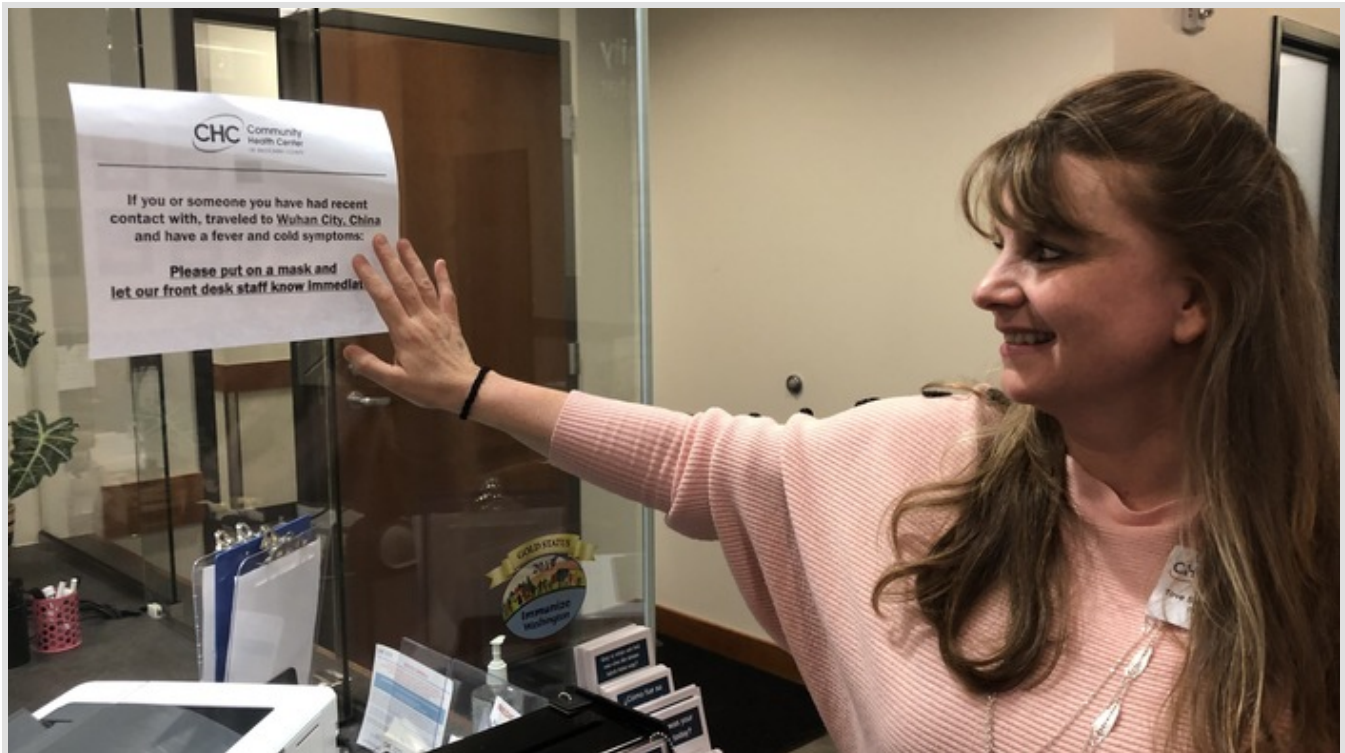
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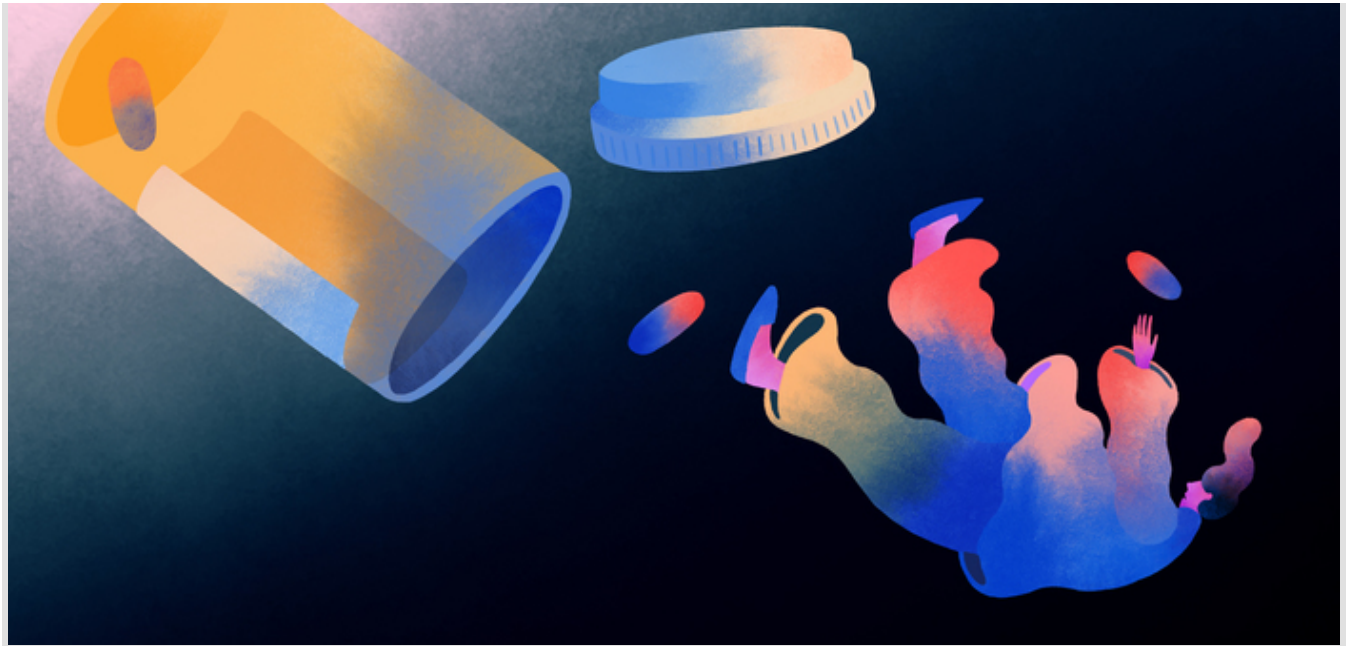
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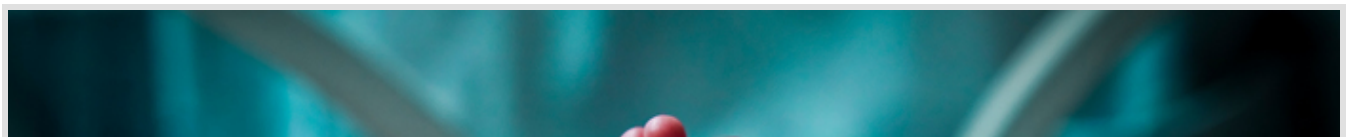
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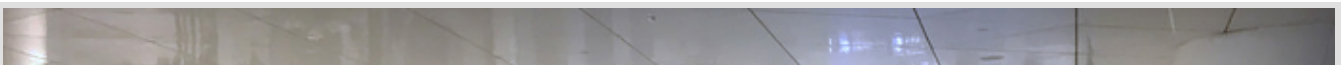
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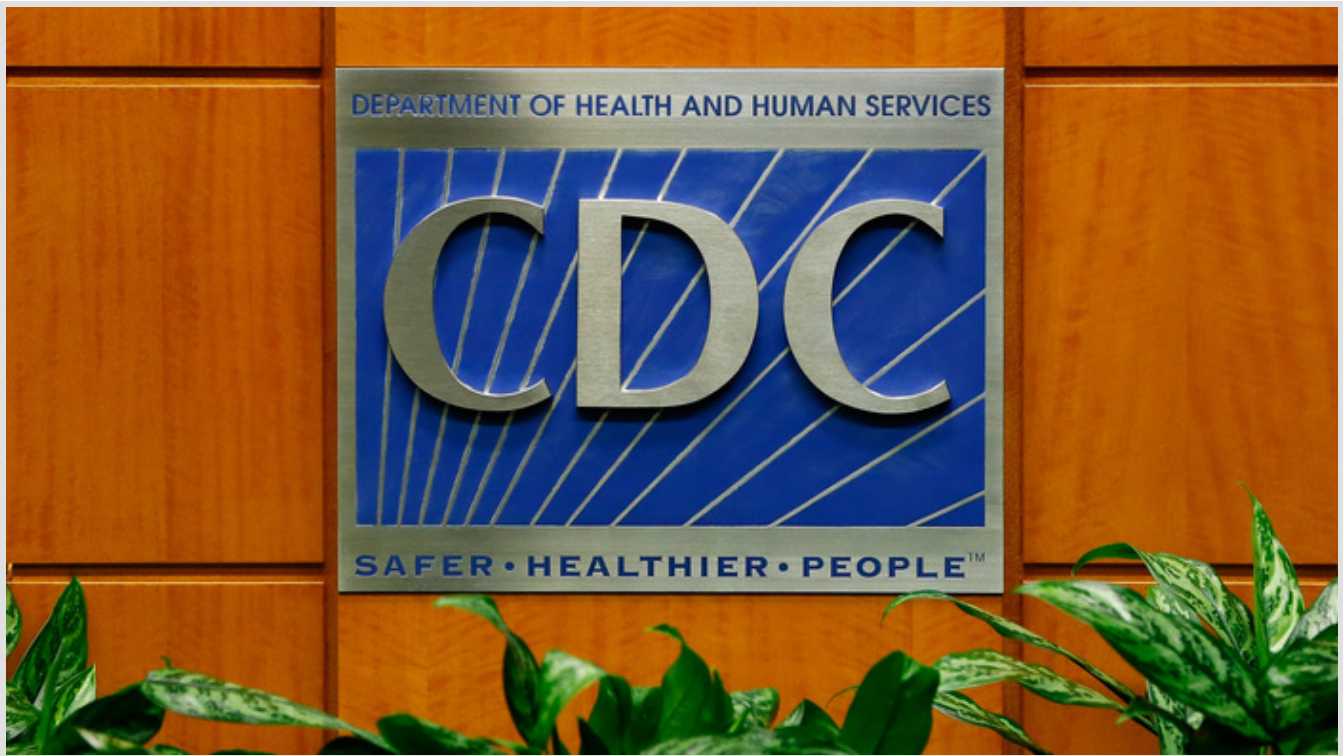
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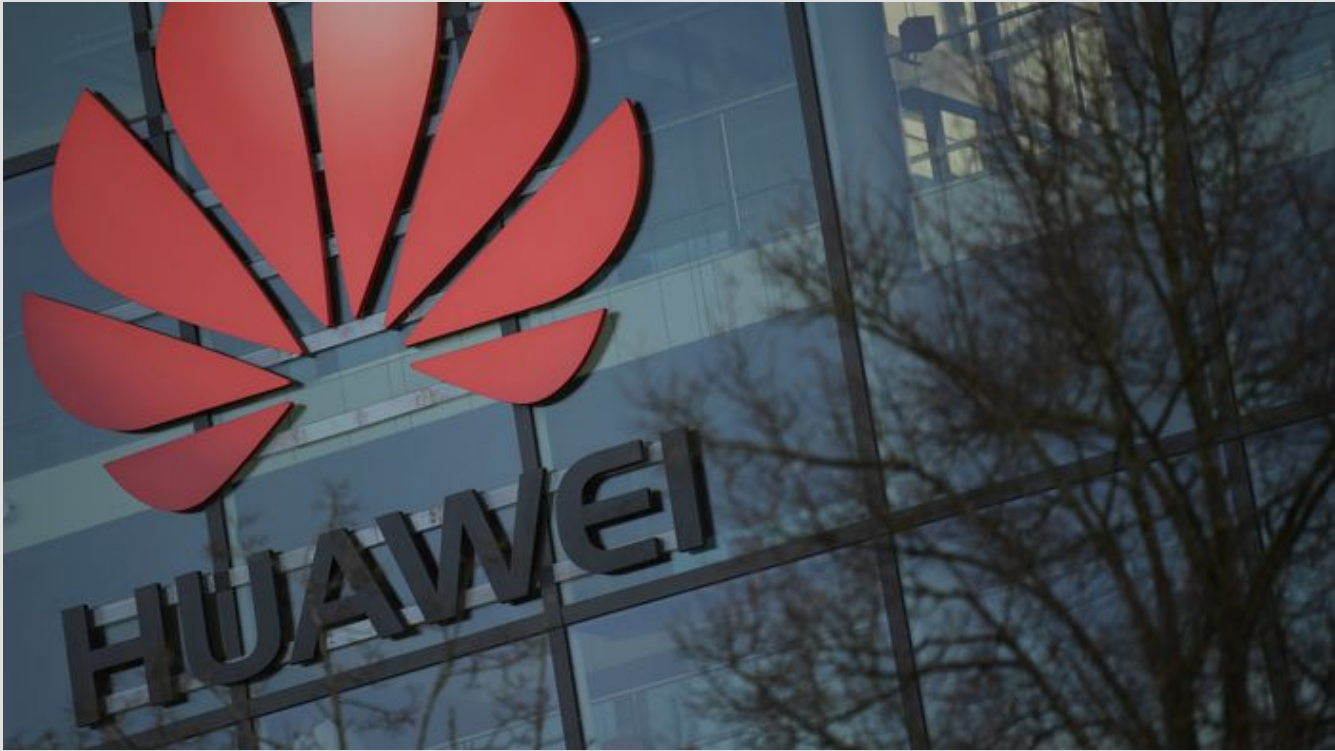
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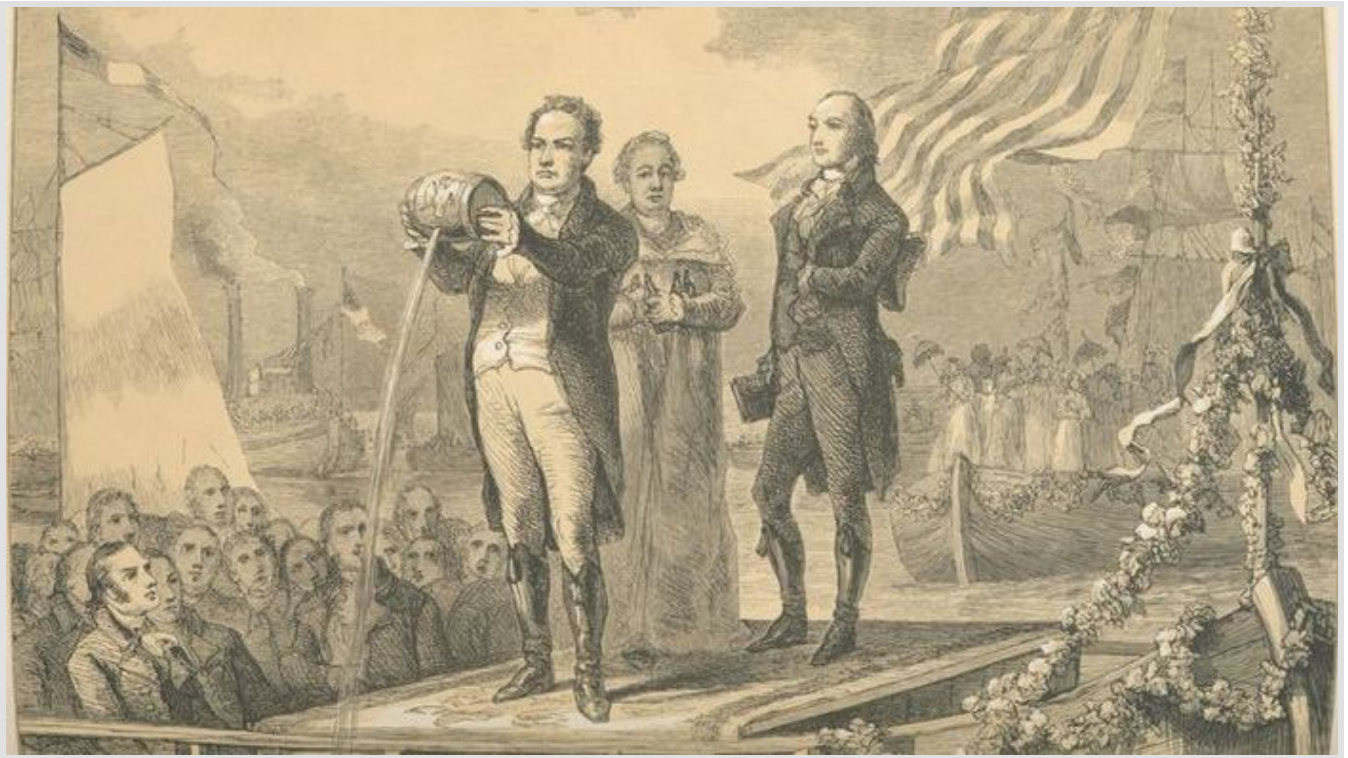
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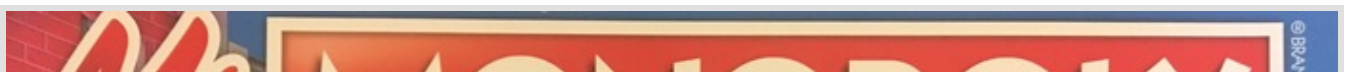
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