



UPDATE

Report on Public Health Emergency Preparedness in Oregon



A public health emergency Joint Information System/Center exercise on Sept. 26 tested our ability to coordinate public information with partners throughout the state. More than 60 people participated in the exercise via an electronic Web-based "Virtual Joint Information Center."



Special Populations Task Force

- DHS serves the state's most vulnerable and fragile residents. In the event of a large-scale disaster, we must be able to help locate, notify and evacuate a range of individuals who may require specialized medical care, language translation services, transportation assistance, and temporary housing for themselves, their families and their pets.
- Because of these concerns, DHS Director Bruce Goldberg, MD, recently asked Clyde Saiki, DHS deputy director for operations, and State Public Health Director Susan Allan, MD, JD, MPH, to convene a Special Populations Task Force to bring all DHS divisions together to address all-hazard emergency preparedness issues. The task force will evaluate the needs of such groups as the frail elderly, medically fragile children, individuals with mental illness, people with limited English proficiency, and other groups we serve who will require special assistance in the event of a major disaster.
- DHS, with its community and county partners, will also provide assistance to families, care givers, and service providers to develop or improve plans for an emergency.

Recent State Public Health Emergency Preparedness Exercises

- A "Coastal Sick Ship" exercise in Newport on June 29 explored disease detection and operational communications issues around a theoretical human case of avian influenza with person-to-person transmission. The disease arrived in Oregon via an infected crew member of a commercial vessel. The exercise involved DHS Acute and Communicable Disease program epidemiologists, the Coast Guard, Border Customs Protection, CDC's Global Migration & Quarantine, and representatives of Lincoln, Coos, and Clatsop Counties (all of which have ports).



State preparedness staff routinely participate in state, local or regional exercises. Other recent exercises include a Coastal “Sick Ship” exercise, and Immunization program and special populations tabletops.



- An Immunization Program Business Impact Analysis Tabletop Exercise on July 20 included a facilitated discussion focusing on critical functions and surge capacity within the Immunization Program during a pandemic influenza scenario. The goal of the exercise was to identify continuity of operations planning and training gaps related to Immunization Program functions.
- A tabletop Special Populations Planning exercise was held on Aug. 28, and included representatives from the Department of Human Services Public Health Emergency Preparedness Program, Seniors and People with Disabilities, Children Adults and Families, the Office of Multicultural Health, and the Office of Mental Health and Addiction Services, as well as the Oregon Health Sciences University Center for Children and Youth with Special Health Needs. The exercise focused on pandemic flu issues for a subset of special populations, including healthy children ages 0 to 8, medically fragile children ages 0 to 5, people with limited English-speaking capability, and seniors and people with disabilities residing in long-term care facilities or homebound.
- A functional exercise of the Public Health Emergency Preparedness Joint Information Center took place on Sept. 26. Participants included more than 60 public information officers and public health educators from state and local health departments and hospitals throughout the state. About half participated remotely via a secure web-based “Virtual Joint Information Center.” The exercise was designed to test communication procedures, information sharing tools, roles and responsibilities in an emerging pandemic influenza scenario.

“Pandora” Statewide Full-Scale Pandemic Influenza Exercise

- On Nov. 1 and 2, Oregon State Public Health will conduct a full-scale exercise of its pandemic influenza response plan.
- In addition to command and control and communications issues, the state’s exercise will have special emphasis on public health personnel surge capacity, behavioral health and four special populations: the elderly, healthy children aged 0-8, medically fragile children aged 0-5, and people with limited English proficiency.

- In addition, more than 100 partners, including hospitals and local health departments, will be participating in their own pandemic flu exercises and integrating their messaging and other exercise activities with the state.



Nearly 600 people attended Oregon's Next Steps in Pandemic Influenza Planning Meeting in August at the Oregon Convention Center.

Next Steps in Pandemic Influenza Planning Meeting

- More than 500 partners and colleagues from around the state attended Oregon's Next Steps in Pandemic Influenza Planning conference on Aug. 23.
- In addition to introductory remarks by State Public Health Director Susan Allan, MD, JD, MPH, and Public Health Emergency Preparedness Manager Mike Harryman, there were sessions on best practices relating to business continuity planning, coordination of health care systems, disease surveillance, public information, resource management, and community engagement.
- There was also a session devoted to defining and reaching out to vulnerable populations, including next steps and timelines. The conference also provided a forum for meeting colleagues and getting more work done on some of the more difficult areas of flu planning.

Pandemic Influenza "Strategic Challenges"

- During the Next Steps conference, Harryman gave an update on findings from the recent needs analysis conducted at the state, local and tribal levels.
- The primary challenges facing Oregon's public health emergency preparedness system are the need for a statewide integrated Emergency Medical System (EMS) plan, a tiered approach for medical surge responses and plans, and the need to clarify Unified Command roles and responsibilities related to Pandemic Influenza response with hospitals, local health departments, tribes and state agencies.

Pandemic Influenza Supplemental Funding for Phase II Activities

- The Public Health Division recently submitted the state's grant request to the U.S. Department of Health and Human Services for Oregon's share of the \$225 million in funding for pandemic influenza planning authorized by Congress.
- Oregon's share of the grant is \$2.8 million. The state portion of the grant is 38 percent, with 62 percent allocated to local health departments and tribes.
- The grant guidance directs all grantees to focus their work on gaps in the areas of planning and exercises, anti-viral distribution, mass prophylaxis, statewide pandemic influenza preparedness, and communications.
- The funds will be distributed to all local health departments in mid-September 2006.

Lane County Pandemic Flu Planning Conference

- Approximately 100 people attended Lane County's recent pandemic flu planning conference, including response partners representing businesses, schools, health care, fire, police and others. State Public Health Director Dr. Susan Allan provided an overview of crucial planning issues.

Update on Public Health Law Reviews

- Draft legislation to strengthen public health emergency procedures has been delivered to legislative counsel for final drafting prior to the 2007 Legislative Session. With concerns about pandemic influenza, the state needs to ensure that it has all the necessary tools to deal quickly and effectively with a public health emergency.
- Shannon O’Fallon, Senior Assistant Attorney General, Oregon Department of Justice, general counsel to the DHS Public Health Division, reviewed Oregon laws as they relate to public health emergency preparedness in an attempt to identify any real or perceived gaps in the state’s authority, and identified a number of areas that need to be addressed.
- A Public Health Law Review group, made up of a wide variety of stakeholders, including the Association of Oregon Counties, Conference of Local Health Officials, Oregon Medical Association, Oregon Nurses Association, Oregon Association of Hospitals and Health Care Systems, American Civil Liberties Union, and others provided input into the draft legislation. Former state senator Bob Shoemaker, a member of the State Public Health Advisory Board, chaired the group.
- Shoemaker and Allan provided a report on the proposed legislation to the Joint Interim Committee on Emergency Preparedness on Sept. 26.

Oregon/Washington State Public Health Memorandum of Understanding

- Oregon’s Public Health Division (PHD) and Washington State’s Department of Health (WSDH) have prepared a memorandum of understanding that outlines how the two states plan to work together in the event of a public health

emergency. The document complements the original Pacific Northwest Emergency Management Arrangement (PNEMA) that was signed by Oregon in August 1996. The PNEMA implementation plan was also recently updated.

- The two states also are working on a draft cross-border procedure to ensure the flow of medical supplies from the Strategic National Stockpile across state lines as necessary. These supplies are part of the federal Nation Response Plan (NRP).
- PNEMA partners include Alaska, Idaho, Washington State, British Columbia, Alberta and Oregon. This group continues to meet quarterly to enhance the agreement for all-hazard events and the 2010 Olympics.

Western Region Homeland Security Conference

- Harryman, along with staff from Oregon Emergency Management (OEM), recently attended the annual Western Region Department of Homeland Security conference. The meeting provided participants with an opportunity to hear about best practices and various issues facing the states, including the current fire season.

Coordination with Oregon Army and Air National Guard

- Public Health Emergency Preparedness is working with the Joint Forces Headquarters of the Oregon Army and Air National Guard in coordinating medical personnel and equipment in the event of a disaster.
- Two Air National Guard units have received updated federal missions to support state/local authorities within Oregon at the direction of the Adjutant General.
- Public health worked with the National Guard during the recent “Pacific Peril” tsunami exercise and continues to work

with senior military planners from the Portland Air Guard Base (northern part of the state) and Kingsley Field (southern part of the state). Both units have similar personnel and equipment.

- Public health will continue to develop relations with these units and military planners at the state level to address best uses of these units in support of ESF #8 activities.

**New Board of Medical Examiners
Emergency Management Technician
(EMT) Advisory Committee
Recommendations**

- The Board of Medical Examiners' EMT Advisory Committee has recommended a change to administrative rules to allow EMT-Is and EMT-Ps to administer immunizations and chemical nerve agent antidotes in the following situations: 1) in the event of an outbreak or epidemic; and 2) to the EMT's EMS agency's personnel as part of the agency's occupational health program. The board directed staff to draft administrative rules accordingly.
- CHEMPACKS: It was determined that the issue of chempacks falls under the subject of assisting in outbreaks or epidemics as discussed above.

E-Learning Update

- The DHS E-Learning project is well underway, with near completion of an "Introduction to Public Health Emergency Preparedness" on-line course. A course on "Laboratory Packaging and Shipping" is now in development and testing phases. Both courses should be available before the end of 2006.
- Additionally, we are beginning development on "Basics of Epidemiology Interviewing and Working with Interpreters" and "Introduction to Communicable Disease, Epidemiology and Outbreak Investigation." These courses are scheduled for 2007.

- The availability of the E-Learning courses will enable a great number of public health professionals the opportunity for training. Many may not otherwise have the opportunity to travel to an in-person classroom training.

HRSA Region 1 Tabletop Exercises

- The NW Oregon Health Preparedness Organization, through a contract with Regional Hospital, is conducting a series of three tabletop exercises to test and modify a proposed Health Coordinating System (HCS) for Region 1. The overall purpose of the HCS is to promote a coordinated regional Health/Medical response to significant emergencies.
- The first tabletop exercise, held on Aug. 8, focused primarily on hospitals, utilizing an ICU surge scenario, and included hospitals, city/county emergency management and EMS. The scope of the second tabletop, held Sept. 15, and third tabletop, to be held Oct. 4, includes public health, private sector clinics, and safety net providers. All three will serve to identify which features of the proposed HCS system work and what needs modification.
- These exercises will culminate in a final coordination and communication exercise, conducted as part of the Statewide November 2006 Pandemic Influenza exercise.

Strategic National Stockpile Train-the-Trainer Workshops

- In conjunction with the Centers for Disease Control and Prevention, DHS Strategic National Stockpile Coordinator Brian Mahoney presented three Strategic National Stockpile (SNS) Train-the-Trainer Mass Antibiotic Dispensing Workshops in June and July at various locations around the state. These trainings will be repeated several times a year.

Multnomah County Community Engagement Activities

- A full day pandemic influenza training for community health workers was co-hosted with the Multnomah County Capacitation Center
- A briefing was provided for the Gresham Community Awareness and Emergency Response Group (CAER) representing Gresham/East County business and industry working on preparedness issues
- A briefing was held for all staff for programs administrated from the Immigrant and Refugee Community Organization (IRCO)
- Partnering with the Portland Office of Emergency Management and others to hold an “Are You Ready Portland?” community safety fair at Emmanuel Temple in Northeast Portland.
- A Sept. 22 Multnomah County Health Department and the Multnomah Education Service District (MESD) pandemic influenza tabletop exercise brought together more than 40 school, business, community-based, emergency management and public health stakeholders to discuss the use of time-limited school closure as a mitigation strategy early on in a pandemic.

Multnomah County Business Engagement

- The business engagement process is focused on working closely with the Portland Business Alliance’s Small Business Involvement group, the Alliance of Neighborhood Business Associations, the Oregon Association of Business Continuity Planners and others to develop a business preparedness kit that makes sense for small and medium-sized businesses in Multnomah County.

Links to Recent Preparedness Articles

- Oregon Medical Association article by Dr. Susan Allan on Emergency Preparedness:
http://www.theoma.org/Files/Public_Health_Focus_8-06.pdf
- Oregon Public Health Association article

by Dr. Allan on Avian Flu Planning
http://oregonpublichealth.org/Probe%20Newsletters/probe_summer06.pdf

- Monthly Public Health County Bulletin to improve communications on a host of issues locally, including preparedness. Includes links to related news on emergency issues:
<http://oregon.gov/DHS/ph/lhd/bulletin/vol1no1.pdf>
- Northwest Public Health journal spring/summer 2006 issue, focusing on Special Populations and Public Health. Includes an article by DHS Public Health Emergency Preparedness Public Information Officer Christie Holmgren on communicating with special populations:
<http://www.nwpublichealth.org/>
- The current Northwest Bulletin issue on Emergency Preparedness for Children includes articles by Dr. Allan, Holmgren and Patricia Westling from the DHS Office of Maternal and Child Health: <http://depts.washington.edu/nwbfch/>



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