Summer Public Health Preparedness Webinar Series Presents:

# Emergency Management and Public Health Preparedness





### Alignment of Public Health, Healthcare, and Emergency Management Preparedness

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### Background

- The history of the collaboration between public health and emergency management
- Identifying social vulnerability



### **Segment Objectives**

- Highlight the history of the CDC Public Health Emergency
  Preparedness Cooperative Agreement (PHEP) and the capability based approach implemented in 2011
- Communicate the relationship of preparedness capabilities to preparedness and response
- Describe the current status of PHEP program alignment with the HHS/ASPR Hospital Preparedness Program and the DHS/FEMA Homeland Security Grant Program (HSGP)
- Identify synergies between a CDC/PHEP funded risk-based pilot project and the HSGP Threat Hazard Identification Risk Assessment (THIRA) initiative



# Public Health Emergency Preparedness Cooperative Agreement

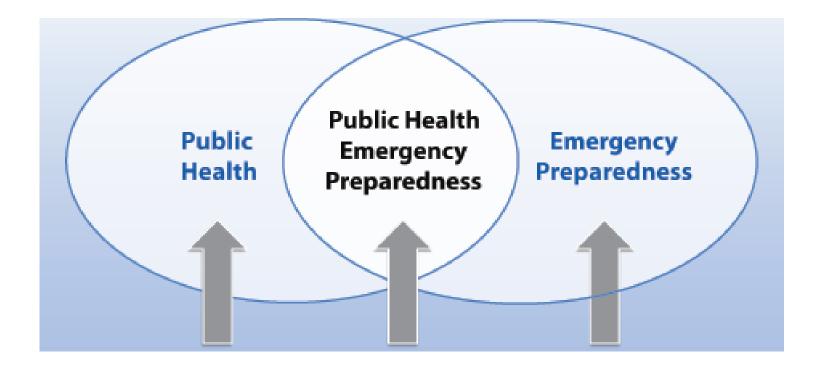
### **Division of State and Local Readiness**

### Public Health Emergency Preparedness (PHEP) Cooperative Agreement



- Strengthens national preparedness through state/local interface
- 62 participating public health departments (state, local, territorial)
- Funding guidance and technical assistance
- Preparedness science and measurement
- 15 public health preparedness capabilities

### National Public Health Preparedness Standards





### Public Health Emergency Preparedness Cooperative Agreement

- Started in 1999 as a \$40 million bioterrorism competitive grant
- □ 2013: formula-based all-hazards preparedness program
  - \$9 billion as of FY 2012 in Congressional investments
  - \$619 million in FY 2012 funding
  - \$580 million in FY 2013 funding (provisional)

•Carve-out funding for the Cities Readiness Initiative

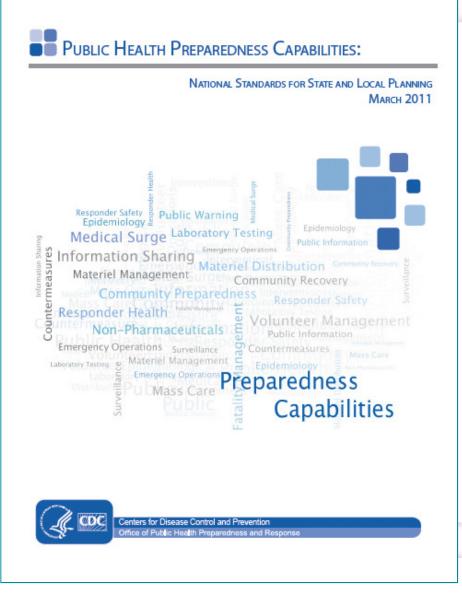
•Carve-out funding for Level – I chemical laboratory capacity

### Based upon capability-based planning standards

Public Health Preparedness Capabilities: National Standards for State and Local Planning, March 2011



### National Public Health Preparedness Standards



- **1** Community Preparedness
- 2 Community Recovery
- **3 Emergency Operations Coordination**
- 4 Emergency Public Information and Warning
- **5 Fatality Management**
- 6 Information Sharing
- 7 Mass Care
- 8 Medical Countermeasure Dispensing
- 9 Medical Materiel Management and Distribution
- 10 Medical Surge
- 11 Non-Pharmaceutical Interventions
- 12 Public Health Laboratory Testing
- **13 Public Health Surv and Epi Investigation**
- 14 Responder Safety and Health
- **15 Volunteer Management**



### West, Texas Explosion

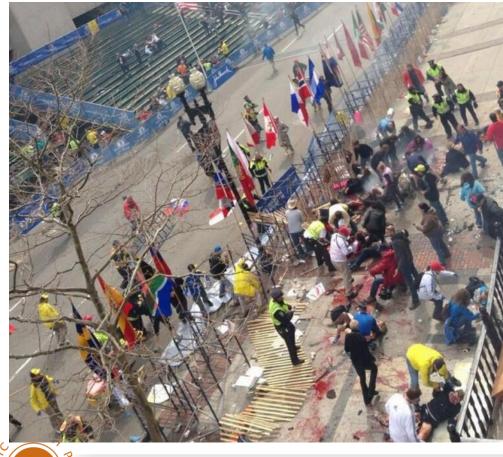
### Public Health Prepareadness Capabilities

Fatality Management Community Preparedness Medical Surge





### Boston Marathon Explosion



**Public Health Preparedness Capabilities Community Preparedness Emergency Operations** Public Info/Warning **Information Sharing** Medical Surge **Public Health Surveillance Responder Safety** Volunteer Management

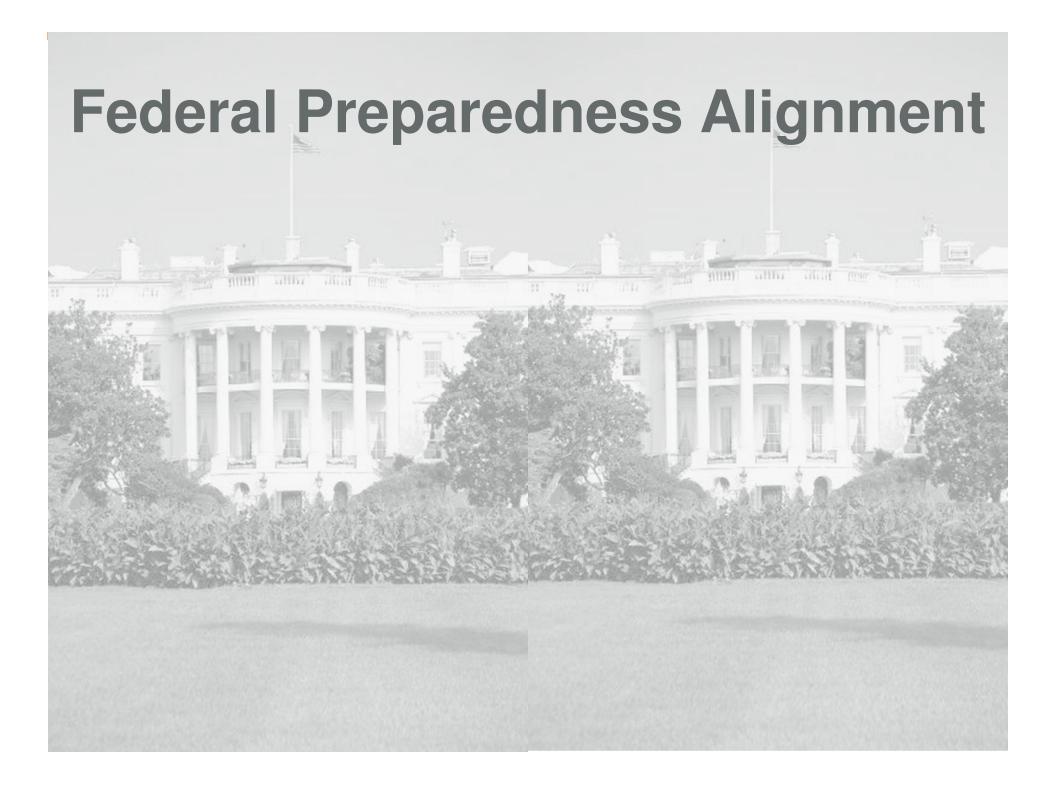


## **Hurricane Sandy**

### **Public Health Preparedness Capabilities**

Community Preparedness Emergency Operations Information Sharing Medical Surge Responder Safety Community Recovery Public Info/Warning Mass Care Public Health Surveillance Volunteer Management





## **Federal Preparedness Alignment**

### Alignment with ASPR/Hospital Preparedness Program

- In second year
- Single application and funding award
- Joint site visits
- Joint measures/synergistic capabilities

### Alignment with FEMA

- Recently initiated
- Reciprocal grant/cooperative agreement language
- Capability crosswalk
- Risk Assessment (THIRA)



### National Public Health Preparedness Standards



- 1 Community Preparedness (PHEP) Healthcare System Preparedness (HPP)
- 2 Community Recovery (PHEP) Healthcare System Recovery (HPP)
- **3** Emergency Operations Coordination
- 4 Emergency Public Information and Warning (PHEP/HPP)
- 5 Fatality Management (PHEP/HPP)
- 6 Information Sharing (PHEP/HPP)
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- 15 Volunteer Management (PHEP/HPP)

### **Common Language in Respective Funding Opportunity Announcements - HSGP**

- States must ensure SPRs reflect THIRA targets...activities and input from...emergency management agency partners, such as the public health department, the health care sector...(pg14)
- CDC's 15 public health preparedness capabilities and ASPR's eight healthcare preparedness capabilities serve as operational components for...NPG core capabilities... (pg. 45)
- States and Urban Areas must coordinate among...Federal partners, national initiatives and grant programs to identify opportunities to leverage resources when implementing their preparedness programs. (pg. 47)



### **Common Language in Respective Funding Opportunity Announcements – HPP/PHEP**

- Public health department and the healthcare sector awardees must actively participate...in FEMA's annual State Preparedness Report (SPR)...a self-assessment of preparedness capabilities in comparison with capabilities established in the state THIRA (pg. 5)
- HPP and PHEP awardees must coordinate activities with their emergency management and homeland security counterparts (pg. 6)
- Budget Period 2 will focus on collaboration with the U.S. Department of Homeland Security's (DHS) Federal Emergency Management Agency (FEMA) and other federal emergency preparedness programs.



### **Linking HHS Capabilities with Core Capabilities**

### Draft crosswalk of PHEP/HPP capabilities with the FEMA 31 Core Capabilities

- Jurisdictional approach encouraged to identify capability associations and relationship
  - •Qualitative relationship dependent upon "jurisdictional lens"
  - •Recommend partnership with state public health agency and local EMA
  - •State public health partnership with state EMA also recommended



## Core Capabilities List

PREVENT	PROTECT	MITIGATE	RESPOND	RECOVER
Planning	Planning	Planning	Planning	Planning
Public Information and Warning	Public Information and Warning	Public Information and Warning	Public Information and Warning	Public Information and Warning
Operational Coordination	Operational Coordination	Operational Coordination	Operational Coordination	Operational Coordination
Forensics and Attribution	Access Control and Identity Verification	Community Resilience	Critical Transportation	Economic Recovery
Intelligence and Information Sharing	Cybersecurity	Long-Term Vulnerability Reduction	Environmental Response / Health and Safety	Health and Social Services
Interdiction and Disruption	Intelligence and Information Sharing	Risk and Disaster Resilience Assessment	Fatality Management Services	Housing
Screening, Search, and Detection	Interdiction and Disruption	Threats and Hazard Identification	Infrastructure Systems	Infrastructure Systems
	Physical Protective Measures		Mass Care Services	Natural and Cultural Resources
	Risk Management for Protection Programs		Mass Search and Rescue Operations	
	and Activities Screening, Search, and		On-Scene Security and Protection	
	Detection Supply Chain Integrity		Operational Communications	
	and Security		Public and Private Services and Resources	
(DATA)			Public Health and Medical Services	
😻 FEMA			Situational Assessment	5

### **PHEP/HPP Capability Crosswalk**

STEDNESS

PREVENT	PROTECT	MITIGATE	RESPOND	RECOVER
Planning	Planning	Planning	Planning	Planning
Public Information and Warning	Public Information and Warning	Public Information and Warning	Public Information and Warning	Public Information and Warning
Operational Coordination	Operational Coordination	Operational Coordination	Operational Coordination	Operational Coordination
Forensics and Attribution	Access Control and Identity Verification	Community Resili <u>e</u> nce	Critical Transportation	Economic Recovery
Intelligence and Information Sharing	Cybersecurity	Long-Term Vulnerability Reduction	Environmental Response / Health	Health and Social Services
Interdiction and Disruption	Intelligence and Information Sharing	Risk and Disaster Resilience	and Safety Fatality Management Services	Housing
Screening, Search and Detection	Interdiction and Disruption	Threats and Hazard Identification	Infrastructure Systems	Infrastructure Systems
	Physical Protective Measures		Mass Care Services	Natural and Cultural Resources
	Risk Management for Protection Programs and Activities		Mass Search and Rescue Operations	
	Screening, Search and Detection		On-Scene Security and Protection	
	Supply Chain Integrity and Security		Operational Communications	
			Public and Private Services and Resources	
HEALTY			Public Health and Medical Services	
HEALTA PRED	Unofficial W	<b>Jorking Draft</b>	Situational Assessment	

### **CDC Risk-Based Pilot Project**

### Project purpose

 Provide risk-based funding for select jurisdictions to promote accelerated development of risk reduction strategies that mitigate the public health risks associated with higher population areas

### Project goals

- Bring to scale resources, processes and findings that inform risk reduction strategies and advance planning
- Public health and medical/behavioral health risk reduction models and interventions
- Promising practices and approaches that can inform the larger HPP/PHEP awardee community
- Integrate findings that contribute to jurisdictional all-hazards risk reduction.



### **CDC Risk-Based Pilot Project**

### □ \$10 Million – 10 Metropolitan Statistical Areas (MSA)

- Boston; Chicago; Dallas/Fort Worth/Arlington; Houston; State of New Jersey; Los Angeles/Long Beach; New York City; Philadelphia; San Francisco Bay; and National Capital Region (Washington D.C.)
- Eighteen awardees received funding

### Nine RBF Pilot Projects

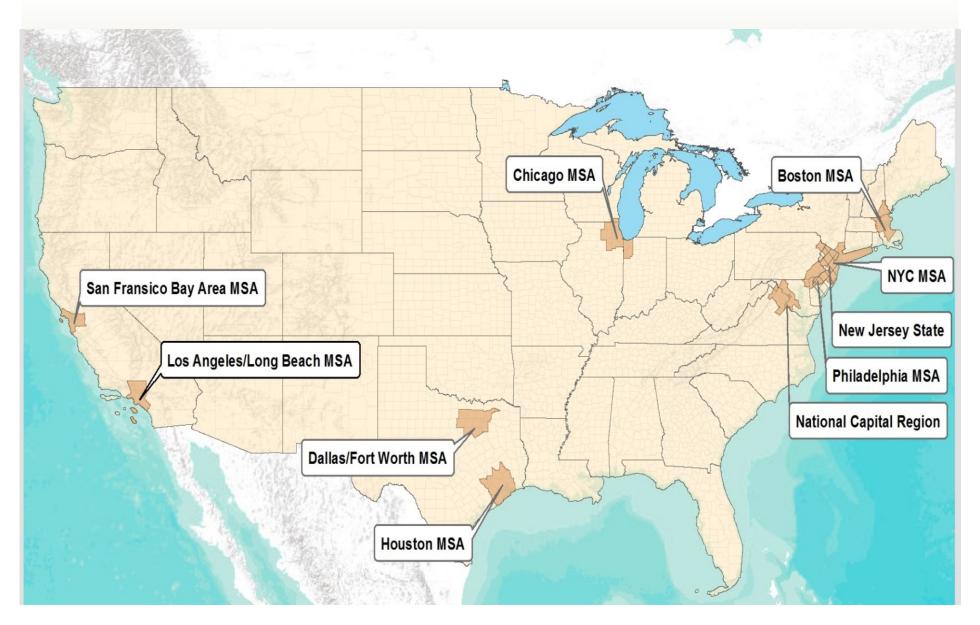
New Jersey participating with NYC MSA and Philadelphia MSA

### Project concludes in August, 2013

 Evaluation plan developed; distillation of findings will be available in the fall



### **RBF Projects - geographic areas covered**



# Coordination of CDC Risk-Based Funding Pilot with FEMA THIRA

Potential Associations				
THIRA	PHEP Planning Model (2011)			
Identify the Threats and Hazards of Concern	Review Jurisdictional Inputs			
Give Threats and Hazards Context	Assess Organ izational Roles and			
	Responsibilities			
	Assess Resource Elements			
Examine the Core Capabilities Using the	Assess Performance			
Threats and Hazards	Prioritize Capabilities and Functions			
Set Capability Targets	DevelopShort-term and Long-Term Goals			
	Plan Organizational Initiatives			
	Plan Capacity Building/Sustain Activities			
Apply the Results	Plan Capability			
	Evaluations/Demonstrations			

### So What?

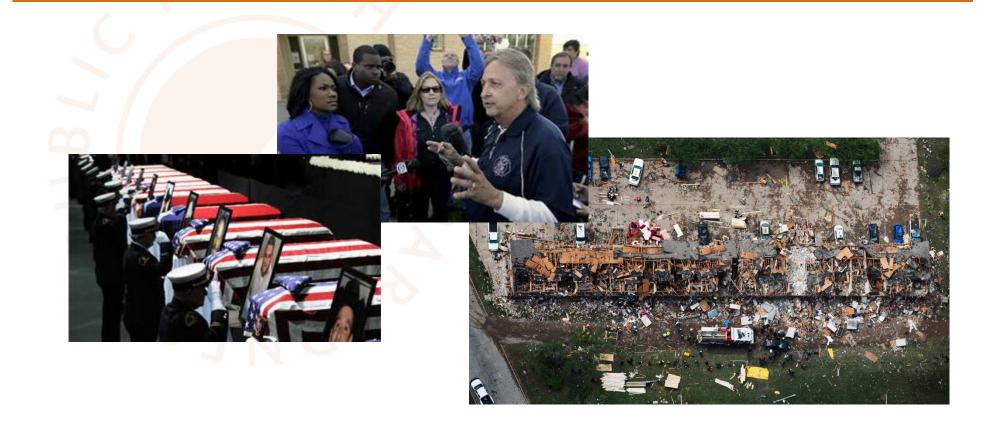
#### **Risk Pilot Project supports PPD-8**

- Directly supports whole of community planning
- Potentially will strengthen state THIRA findings through increased emphasis on social vulnerability data
- Enhances operational partnerships between public health, healthcare systems and emergency management
  - Facilitates comprehensive operational response planning
  - Provides a common point of operational interface between public health, healthcare systems and emergency management
  - Contributes to the requirement to complete a comprehensive state THIRA



### **Go Forth and Prosper:**

How the Public Health-Emergency Management Partnership Worked in the West Explosion Response



## A look at McLennan County

Population: ~235,000 City of Waco – 127,018 City of West – 2,831 Located between Dallas and Austin IH35 runs through the middle West, TX located ~15miles north of Waco



## How West is Unique

- Strong Czech heritage
- Tight-knit community
- Fiercely independent
- Agrarian based economy
- Located on a major interstate



Serviced by Waco-McLennan County Public Health Outside of OEM jurisdiction





## The Explosion

First fire alarm: 7:30pm

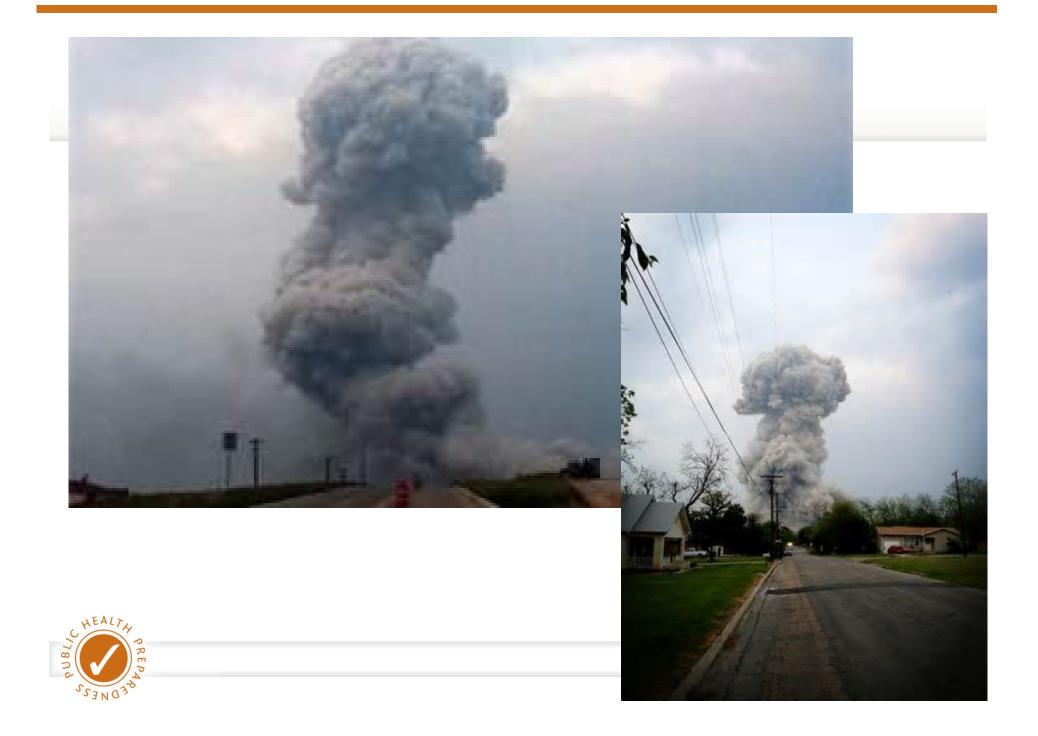
Explosion: 7:50pm

Nursing home and apartment complex located across the street

12 first responders killed in initial response

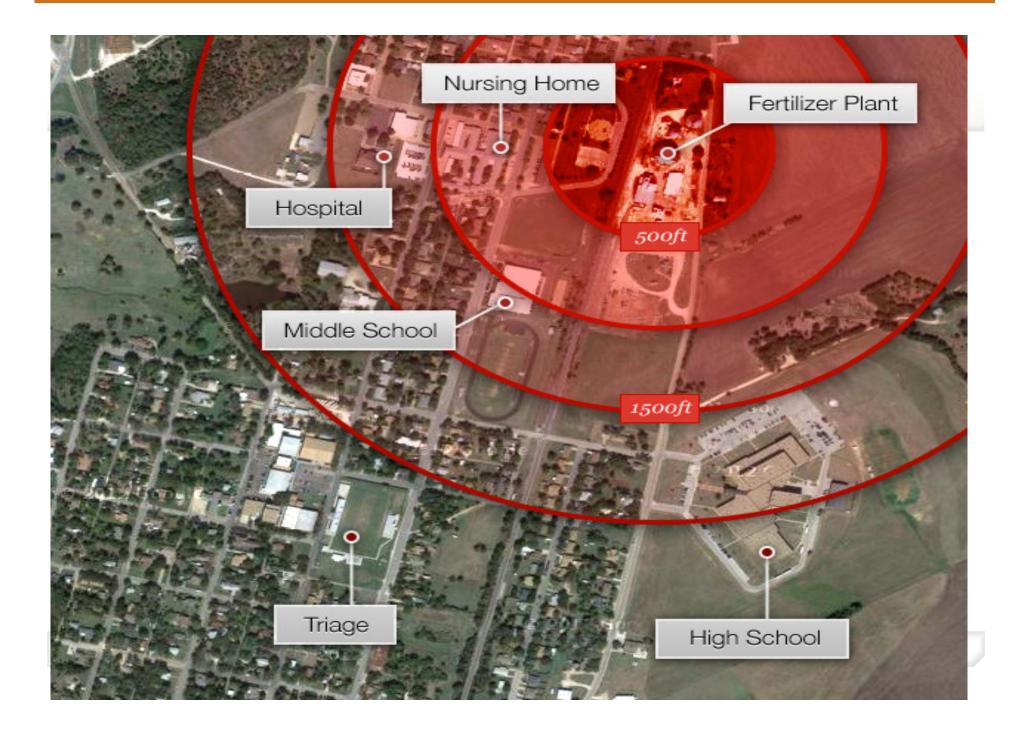
350 homes damaged – 142 of those were destroyed



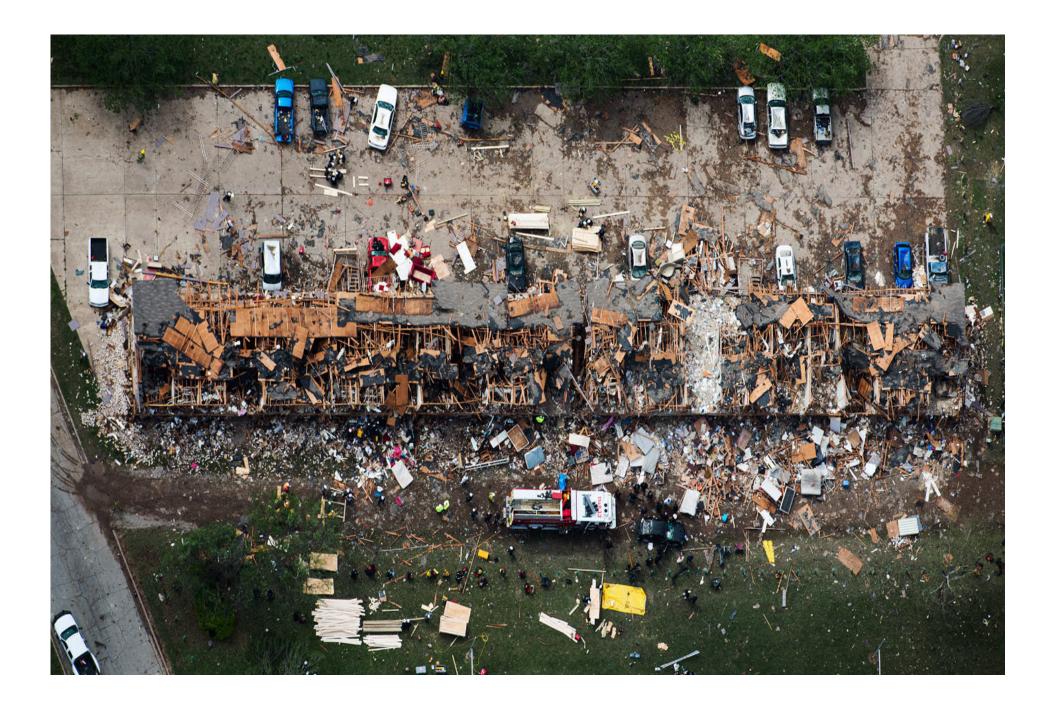












## **Key Partnerships**

Waco-McLennan County OEM - Assumed IC role in West response

Heart of Texas Regional Advisory Council – Hosts the Regional Healthcare Coalition

DSHS Region 7

MHMR – Local Mental Health Authority

Local VOADs



## "Work with local Emergency Management"

Yes, it's important!

Because:

Helps you better understand your role.

Helps you understand the role of other agencies.

Familiarizes you with local resources.



## In Real Life!

How we benefited

Gave us credibility

Outside agencies utilized our services and trusted our input.

Created mutual trust

Emergency Management did not micro-manage our response.

Emergency Management trusted us to know our role.



## **Other Lessons Learned**

You can't anticipate every need, but you can understand the capabilities of your organization and those of your partners.

Having a working knowledge of your assets will allow you to utilize them effectively.

Don't self deploy!



### Waco-McLennan County Public Health District

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# Questions?

Thank you for participating today. Please take the webinar survey!



