



An Immunization Program staff member packages influenza vaccine for distribution to local health departments and providers. The Public Health Preparedness program assisted in responding to the vaccine shortage.



## Public Health Preparedness Planning

The goal of the Public Health Preparedness program is to ensure Oregon's state and local health departments and hospitals are prepared to address challenges that could jeopardize the health of Oregonians.

In 2002-03, Oregon received \$14M in federal funding to further develop our bioterrorism and public health preparedness program. A collaboration of state and local public health officials has worked with hospitals, law enforcement and other critical partners to implement a statewide preparedness plan. For 2004-05, funding was reduced by 22 percent to \$10.9M. Federal funding and local teamwork are vital to maintaining the readiness of our statewide public health preparedness system.

More than 60 staff in local health departments and 40 state public heath staff are currently working to improve Oregon's ability to respond effectively to a bioterrorism event or other public health emergency.

#### **Preparedness activities to date:**

- The State Public Health Officer leads the Public Health Preparedness Leadership Team. The membership includes the State Epidemiologist, doctors, nurses and other preparedness experts and public health leaders from local health departments around the state.
- Closer planning and operational relationships have been established with other state, regional and federal agencies through the Health Preparedness Advisory Committee (HPAC).
- An HPAC sub-committee, the Public Health Preparedness Technical Advisory Committee (HTAC) promotes integration of local and state public heath preparedness with other local, state and private agencies. HTAC includes local and state public health preparedness staff, local and state emergency management staff, EMS and hospital emergency planners. HTAC reviews and suggests revisions to state preparedness plans.

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State preparedness staff routinely participate in local or regional exercises, such as the annual Chemical Stockpile Emergency Preparedness Program functional exercise, Portland-metro area mass casualty field exercise (pictured) and Red Rose II.





- Funds invested in the public health system strengthen our ability to respond to other emergencies. For example, the public health preparedness staff provided significant support for Oregon's response to the current nationwide influenza vaccine shortage.
- The following preparedness plans have been completed:
  - Health and Medical Services
  - Communications
  - Strategic National Stockpile
  - o Pandemic Influenza
  - Post-Event Smallpoxand
  - Agency Operations Center.
- Approval of the West Nile Virus, U.S. Postal Service Biodetection System, Chemical Terrorism and Food Security plans is pending.
- In conjunction with Oregon Emergency Management, the public health exercise design team has established a three-year state and local integrated exercise schedule.
- Orientation exercises have been held for the:
  - Strategic National Stockpile Plan
  - Communication Plan
  - Health and Medical Services Plan
  - Agency Operations Center Plan and
  - o Pandemic Influenza Plan.
- Orientation exercises are scheduled for the West Nile Virus, USPS Biodetection System and Food Security plans. A tabletop exercise of the SNS plan has also been conducted.
- Notification drills of the Health Alert Network are held periodically.
- State preparedness staff routinely participate in joint exercises with state and local partners, such as the annual Chemical Stockpile Emergency Preparedness Program functional exercise, Benton County's Mass Prophylaxis Clinic functional exercise, Portland metropolitan-area mass casualty field exercise, and Red Rose II.
- Two bills passed by the 2003 Oregon Legislature improved the state's ability to respond in the event of a public health emergency. House Bill 2410 allows state public health to set up a registry of credentialed health care professionals available to assist during an emergency. House Bill 2251 expands the power of the Governor to declare an impending public health crisis and authorize special reporting procedures and other public health measures.

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# Hospital Preparedness/HRSA Grants

- Established the Hospital and Health System Preparedness Implementation Committee (HPIC), as a sub-comittee of HPAC, to guide statewide Health Resources and Services Agency (HRSA) planning efforts. HPIC is co-chaired by the Oregon Association of Hospitals and Health Systems (OAHHS) and the State Public Health Officer.
- HRSA funding for 2002 was \$1.5M, funding for 2003 and 2004 was \$6.2M for each year.
- Contracted with OAHHS for distribution of HRSA funds to hospitals and other components of the healthcare delivery system.
- To date, funding for \$360,000 worth of personal protective, decontamination, isolation and communication equipment has been distributed to individual hospitals through the OAHHS.
- Developed seven Healthcare Preparedness Regions to provide organized planning and response of the healthcare delivery system to public health emergencies. This was accomplished through contracting with a lead agency and hiring coordinators in each region.
- Established the Regional Coordinators
   Coordinating Committee to share lessons
   learned, provide peer support and assist
   in developing inter-regional mutual aid
   and surge plans.
- Established the secure Oregon Hospital Capacity Web site, with software for tracking patient census, emergency department status, select pharmaceuticals and equipment, the available number of beds and ability to track on-going events on a regional basis. The Web site is being adopted by the Portland-metro area as its system for managing distribution of patients to hospital emergency rooms.
- Established Hospital Bioterrorism Standards Committee to develop standards for hospital bioterrorism preparedness.

# Strategic National Stockpile

- Conducted assessments of local health department mass vaccination and mass antibiotic dispensing plans for the Strategic National Stockpile (SNS) program. The assessment tool will provide information on the relative completeness and utility of mass vaccination and mass antibiotic dispensing plans in Oregon, and will lead to further improvements.
- Leveraged the HRSA hospital preparedness regional concept to enable health departments to plan regional SNS dispensing and (hospital) treatment center exercises. Many smaller counties do not have the required resources, so regional resources will be needed in an actual public health emergency.
- Conducted an orientation exercise attended by approximately 100 state and local staff with responsibilities for deployment of the resources of the Strategic National Stockpile (SNS).
- Conducted a round of table-top exercises with those who would assume leadership roles in deployment of the SNS.
- Established a registry of public health professionals who could be called upon to assist during a public health crisis.
   The Web-based system taps into existing credentialing information to ensure that volunteers possess appropriate skills to assist in a medical response.

# Surveillance and Epidemiology

- Developed an Urgent Epidemiologic Response Team to assist local health departments in investigating disease outbreaks.
   This team has provided assistance for more than 362 local outbreaks in the past two years.
- The Acute and Communicable Disease Program has taken the lead role in developing state response plans for Pandemic Influenza, Post-event Smallpox, Severe Acute Respiratory Syndrome (SARS) and West Nile Virus.
- Sponsored a SARS workshop attended by more than 150 healthcare workers.

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- Developed an exposure control or respiratory protection plan template, based on national guidelines of infection control, for use by local health departments to protect employees from serious airborne and droplet-spread disease exposures.
- Periodically tests local health department 24/7 access for health care providers calling after-hours to report communicable diseases.
- Completed Standard Operating Procedures for:
  - Investigative guidelines on reportable diseases, including Category A bioterrorism agents
  - o Case reporting and investigation,
  - o Epidemiologic investigations
  - Communication about outbreaks or individual cases of public health importance, and
  - State communicable disease day call and 24/7 access of state staff.
- Developed Standing Orders for treatment and prophylaxis in the event of an anthrax, plague or tularemia outbreak.
- Conducted on-site triennial reviews of all county health departments to evaluate timeliness of case reporting, and completed case investigation forwarding to Oregon Health Services.
- DHS/Public Health Preparedness/ Epidemiology is collaborating with Oregon's Department of Agriculture and the State Veterinarian to co-sponsor a series of six meetings on emergency response to zoonotic disease. The first two kickoff meetings were held in the autumn of 2004 and follow-up meetings are scheduled for early spring 2005.
- The National Electronic Disease Surveillance System (NEDSS) staff works with DHS/OIS and DHS communicable disease staff to develop computer applications for disease reporting and secure transmission of data from hospitals, physicians and local health departments to the state and on to the CDC. To date, there is electronic

data interchange with 34 local health departments, and several laboratories.

- Developed a flexible Web-based system, eSentinel, for hospital personnel to report cases of potential public health importance, such as the re-emergency of SARS or other infectious diseases. These include healthcare workers hospitalized with pneumonia (for SARS surveillance), hospitalized pediatric influenza cases, and unexplained critical illnesses with infectious hallmarks. We can easily create and track new case types, as needed, to deal with emerging public health issues. Currently, there are 90 infection control practioners representing 63 hospitals using eSentinel.
- In February 2004, grant funds were offered to Oregon labs to set up electronic lab reporting. Currently, five labs report electronically, and three labs have been awarded grants to defray start-up costs associated with electronic reporting. All 34 local health departments are set-up to receive electronic lab reports.
- Developed an agreement with Kaiser Permanente for syndromic surveillance of influenza-like illness.
- Presentations about bioterrorism agents and potential events have been given this year at 171 health professional meetings and conferences. A total of 6,840 people (potentially duplicated) have participated.
- The epidemiology staff continues to serve as faculty and technical advisors for Oregon's Communicable Disease University training program, which has provided training for 927 participants.
- A medical examiner surveillance system has been established in 13 Oregon counties, representing 76 percent of the population. An abstract recommending further integration with medical examiners was presented at the 2004 International Conference of Emerging Infectious Diseases.

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- Completed an assessment contract including recommendations on how to build an Electronic Death Certificate Reporting System.
- Surveillance for invasive bacterial pathogens continues through the Emerging Infections Program.
- Provide ongoing outreach to healthcare workers and laboratories to encourage timely reporting of unusual cases or clusters of disease of public health significance.
- Two OHSU Infectious Disease fellows initiated epidemiologic projects with the state communicable disease program. Additionally, two staff members completed MPH theses and three additional MPH thesis projects are in progress.
- Instituted a contract to provide Incident Command System for Public Health training for all local health departments, their emergency response partners, and state public health staff.
- Collaboratrd with local, state and federal law enforcement partners and state and local communicable disease staff to present the first forensic epidemiology conference in Oregon. It was attended by an equal distribution of 64 public health and law enforcement partners.

# Laboratory Capacity/Biologic

- The Oregon State Public Health
   Laboratory (OSPHL) has developed
   capacity to identify potential bioterrorism
   agents. The OSPHL is a CDC-certified
   Bioterrorism Response Laboratory,
   coordinating routinely with the
   Oregon State Veterinary Diagnostic
   Lab, the Oregon State Department
   of Environmental Quality (DEQ) Lab,
   the Oregon State Radiation Protection
   Services Lab, and the Oregon State
   Department of Agriculture Lab.
- Contributed technical expertise and assistance in developing the state response plans for Pandemic Influenza, Smallpox and West Nile Virus.

Performs ongoing surveillance for influenza and other emerging infections.

- Fulfilled all Federal requirements for the possession, use and transfer of select biologic agents and toxins, including FBI security clearance for all lab staff and securing the facility for handling and storage of select agents.
- Met all USDA Animal and Plant Health Inspection Service requirements for the possession, use, and transfer of select biological agents regarded as Crossover Agents.
- Developed the Oregon Laboratory
  Response Network (OLRN) consisting of
  60 clinical, environmental, and veterinary
  laboratories. Acting as disease "sentinels,"
  these labs are trained to safely recognize
  and refer potential agents of bioterrorism
  to the OSPHL for further testing and
  confirmation.
- Created a secure web-based communication network for the 160-plus OLRN contacts, ensuring that each member lab has the capability to observe critical content on site, receive and transmit critical information electronically, query using message boards, and receive information via facsimile.
- Provide workshops on the safe transportation of diagnostic specimens and infectious substances, and on bioterrorism agent identification and safety. Since February 2003, 524 participants have received these trainings in 50 workshops.
- Developed a web-based packaging and shipping training module for Oregon Labs to obtain online Department of Transportation certification.
- Developed and periodically drill the Laboratory Services Plan and appendices listed in that plan, and participate in public health preparedness exercises.
- Successfully completed negotiations for a new state lab with Biosafety Level-3 capacity, which is currently under design. Construction begins in 2005, and is

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scheduled to be ready for occupancy in late 2006.

## Laboratory Capacity/Chemical

- In Oregon, the Department of Environmental Quality (DEQ) takes the lead role in planning for the consequences of a chemical attack within the state.
- Under a DHS/DEQ interagency agreement, funded by the CDC, the DEQ developed and coordinated an Oregon Chemical Terrorism Plan. The plan has been incorporated into the Northwest Area Contingency Plan (NWACP), which is the Oil and Hazardous Materials component of the State of Oregon Emergency Management Plan.

#### Health Alert Network

- Outsourced the hosting of the Health Alert Network (HAN) to provide roundthe-clock availability of web-enabled public health emergency information to state and local health departments and other preparedness partners.
- Contracted with Virtual Alert to provide an automated, round-the-clock, statewide notification system for use by public health responders during bioterrorism events or other public health emergencies. The secure, web-enabled system will be able to send voice or text messages via telephone, fax, e-mail, alpha-numeric pagers, cell phones, personal data assistants and wireless devices.
- Contracted with Sytex Inc., to assess, identify and implement network security projects to better ensure that all local health departments can connect with state public health Internet sites in a secure environment. By identifying local health department security requirements, designing minimum standards for security and providing funds for specific equipment to implement those standards, HAN has greatly increased statewide public health data security.



## Communicating Health Risks

- Established a statewide, toll-free hotline for public health emergencies. The hotline automatic call distribution system has a 12-line hunt group and can handle up to 5,000 calls per day. The hotline was recently used by the DHS Immunization program in dealing with the influenza vaccine shortage. In it's first month of operation, the hotline received 16,000 calls.
- Developed standard operating procedures for Telephone Surge Capacity during an emergency.
- Develops risk communications and emergency public information products and systems to improve delivery of information about protective actions to the public during a bioterrorist attack or other public health emergency.
- Updated the Communication Appendix to the Public Health Annex of the State Emergency Response Plan and wrote Standard Operating Procedures for before, during and after an emergency.
- Developed the Joint Information System/ Joint Information Center Operations Plan and joint procedures for sharing information among all state agencies.
- Conducted training and an emergency

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- exercise of the state Joint Information Center with key state agencies, Oregon Emergency Management and the Governor's Office. By ensuring all state public information resources are prepared for major emergencies, response capacity has been improved.
- Provides on-going training in Crisis and Emergency Risk Communication for local health departments, hospitals and their emergency response partners around the state. More than 400 people have received training from this program during the past year and a half, including representatives of 30 out of 34 local health departments.
- Completed a research project to assess the barriers to effective communication with special and hard-to-reach populations during a bioterrorism event or other public health emergency. The information collected will be used to develop specific outreach strategies and effective communication channels for special populations.
- Completed a statewide baseline survey to assess current public knowledge, perceptions and information needs related to bioterrorism and other public health emergencies.
- Established flexible service contracts for emergency radio advertising on one or more of the top three radio stations in all but one Oregon county, including one hispanic station that serves five metropolitan counties.
- Established flexible service contracts for emergency public opinion research, printing and graphic arts, public relations and foreign language translation and interpretation services.

# **Education and Training**

- Developed the Bioterrorism Preparedness Education and Training Advisory Group to improve integration of local and state public heath preparedness training with other local, state and private agencies.
- Provides on-going training to public

- health, health care and public safety staff in identifying bioterrorism.
- Worked in partnership with DHS and the Oregon Department of Administrative Services (DAS) to purchase and implement an electronic learning management system (LMS) to track content and curriculum, registration, scheduling, delivery, certification, accreditation, assessment, testing, evaluation and reporting of compliance, competency and skills for participants in Oregon's preparedness program.
- Developed a partnership with the University of Washington Northwest Center for Public Health Practice for training and needs assessment activities.
- Developed a collaborative relationship with regional state preparedness education and training, workforce development, and distance learning staff.
- Collaboratively presented with regional state education partners at the 2004 NW Portland Area Indian Health Board Emergency Preparedness Conference.
- In conjunction with the OHSU School of Nursing, sponsored a two-day, statewide conference to present practical information on emergency preparedness to approximately 200 Oregon nurses, nursing students and other health professionals.
- Developed a comprehensive training plan for public health preparedness including behavioral health, radiation and chemical terrorism.
- In conjunction with OHSU, Multnomah County, NW Area Indian Health Board, Kaiser Permanente Center for Health Research and Providence Center for Outcomes Research, established bi-monthly meetings of practicing epidemiologists in the Portland area with presentations on a variety of topics around epidemiology, bioterrorism preparedness, communicable disease and infection control. In 2003, there were 102 participants and in 2004, 130 participants.
- Sponsored and mentored 24 student in-

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- terns from a variety of schools.
- Provided two trainings on pre-event smallpox vaccination and clinic for 177 local health department smallpox response teams and bioterrorism coordinators.
- Sponsored and coordinated 2003 West Coast Epidemiologist meeting in Southern Oregon for 58 participants.
- Since 2000, 785 people have participated in the annual annual Oregon Epidemiologist Meeting (OR-Epi), staged by DHS.
- Executing contracts to develop and deliver bioterrorism preparedness training to first-responders, and all-hazards preparedness awareness training for emergency department and ambulatory care professionals.
- Developed and implemented three-tiered training evaluation process, including participant opinion surveys, Pre- and posttests to measure knowledge gained, and long-term evaluation of participant work practice changes related to training topics.
- Established an education listsery to notify local health department and tribal health professionals of public health classes, education and training opportunities.
- Partnering with Office of Mental Health and Addiction Services to provide statewide response training for mental health professionals at community mental health programs, in private practice, at drug and alcohol treatment facilities and for clergy and community volunteers.

## Radiological Protective Services

- Conducted radiological training for more than 700 personnel in HazMat teams, first-response organizations and hospitals in 35 training events this year.
- Played a key role in the Portland-metropolitan area dirty bomb exercise, Red Rose II. Radiation Protection Services staff members take part in or conduct one or two exercises per quarter.

## Drinking Water Program

 Provided security training and worked with key partners to provide survey instruments and require all Oregon community water systems to conduct security vulnerability assessments and incorporate the results into their emergency response plans.

## Food Security

 In 2003, a food security conference was held with representatives from a broad spectrum of food security interests from the farm to the table. A task force was set up to develop the Food Security Appendix to the Public Health Annex of the State Emergency Plan. The plan has been completed and will be presented to food public and private-sector partners at a conference in Feburary 2005.



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