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PandOrA – Best Practices and Lessons Learned

- More than 100 entities participated in the Oregon Public Health Division's (OPHD's) two-day, state-wide full-scale pandemic flu exercise on Nov. 1 and 2. Dubbed PandOrA (Pandemic Oregon Activity), the exercise involved the fictional occurrence of a widespread outbreak of a new influenza virus, resulting in hundreds of victims falling ill in communities throughout the state. Participating organizations included more than 30 local health departments, 50 hospitals, two tribal health departments, the State Office of Emergency Management, Oregon National Guard, Office of the State Fire Marshall, Department of Administrative Services, Department of Education, Department of Transportation, and Oregon Board of Pharmacy.
- Key successes and best practices identified during the exercise included good collaboration between the Joint Information Center and the Operations Section, proficiency and teamwork between the epidemiology and immunization staffs, strong knowledge and practical application of the Incident Command System (ICS) and National Incident Management System (NIMS), and frequent monitoring and correction of inaccurate media reports.
- Key opportunities for improvement that are essential to successfully managing the pandemic influenza threat and apply directly to other possible disasters include the need for a larger Agency Operations Center, clarification of the public health-based resource request and filling process between public health and the State Emergency Coordination Center (ECC), review and/or completion of various forms and standard operating procedures, incorporation of a formal documentation management system, and additional training in emergency management software applications.
- The OPHD will be writing a plan to address these opportunities for improvement.

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The PHEP Agency Operations Center served as the state public health command center during the full-scale statewide pandemic influenza exercise on Nov. 1 and 2, 2006.





Incident Commander Katherine Bradley provides a briefing to the AOC staff during the exercise.



Preparing for Statewide Pandemic Flu Exercise

- A September exercise on After-hours Transport of Simulated Pandemic Influenza Specimens to the Oregon State Public Health Laboratory included participation from five sentinel labs.
- A blast FAX exercise in December 2006 incorporated elements of the September exercise (such as sentinel lab communication with county health departments afterhours, and development of transport procedures by county public health departments).
- In preparation for PandOrA, the Immunization Program held two tabletop exercises. Staff conducted a business impact analysis exercise in August. Participants identified critical functions and areas of vulnerability for the program and the need for staff to have home preparedness plans in place should an influenza pandemic emerge.
- An October tabletop tested elements of the Immunization Program's new Vaccine Shortage Plan, including vaccine prioritization and allocation. Participants included local health department and hospital systems representatives, a mass immunizer and OPHD staff. The exercise highlighted the need to explore enhancing the program's capabilities around tracking the distribution of vaccine down to the individual level.
- In preparation for the full-scale exercise of the public health joint information system and center during PandOrA, a functional exercise that included use of the Web-based virtual joint information center on HAN was held in late September. More than 140 partners throughout the state logged onto the secure information source during PandOrA.
- The ACDP program conducted one tabletop and one functional exercise in preparation for PandOrA. State and county vital records offices played a significant role in these exercises since the goal of both was to test the programs' capability for sending, receiving, analyzing and reporting influenza death data in a timely fashion. The functional exercise was designed to simulate real-time death surveillance during a pandemic. Both exercises were valuable in identifying additional procedural and staffing needs during a public health emergency.
- ACDP Program Manager Paul Cieslak, M.D., PHEP Epidemiologist Paul Lewis, MD, and PHEP Program Manager Mike Harryman participated in a higher education pandemic influenza table-top exercise in November at Portland State University. In addition to representatives from higher education, the exercise included local health department community engagement and preparedness staff from Clackamas, Multnomah and

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Washington counties. The exercise brought to light numerous concerns community colleges and universities will face in the event of a pandemic influenza outbreak. Key concerns include what will trigger colleges to close (possibly K-12 schools closing), status of courses and classrooms, and what to do with out-of-state students. PHEP will continue to work with higher education partners on these challenging issues.

Disease and Foodborne Illness Outbreak Investigations

- The ability to quickly respond to infectious disease outbreaks is a key component of the state's emergency management capacity. The OPHD and local health departments investigated 201 outbreaks in the first 11 months of 2006. Public health emergency preparedness employees were lead investigators on 30 of those outbreaks.
- In addition, OPHD preparedness staff performed 11 triennial reviews of local health department communicable disease programs in 2006.
- OPHD epidemiologists and Oregon State Public Health Laboratory (OSPHL) staff were instrumental in identifying contaminated spinach as the source of the recent nationwide outbreak of *E. coli* that sickened at least 199 people in 26 states and resulted in 31 cases of kidney failure and three deaths.

Non-pharmaceutical Interventions for Pandemic Influenza

State Public Health Director Susan Allan, M.D., J.D., M.P.H., has been serving as a representative for the Association of State and Territorial Health Officials (ASTHO) on a national planning group convened by the Centers for Disease Control and Prevention (CDC) to discuss the use of "non-pharmaceutical interventions" as part of a community response to pandemic influenza. Non-pharmaceutical interventions are measures, other than medications (antivirals such as Tamiflu)

- or vaccines that may help slow the spread of disease in the communities—such as school closures, increasing "voluntary isolation" for people who are sick with flu, or other possible measures.
- OPHD epidemiologist Paul Lewis, M.D., participated in a CDC planning meeting in Atlanta on Dec. 11 and 12 on behalf of Allan and in a Sloan Foundation/Columbia University meeting in June.
- The recently-convened state Medical Advisory Group (see below) will play a role in helping the state develop guidelines for decision-making regarding special emergency disease control measures.

Medical Advisory Group

- The Medical Advisory Group for the OPHD held its second meeting on Dec. 20, at the Oregon Dental Association in Wilsonville. The topic of the meeting was emergency and non-emergency communication with health care providers.
- The group discussed basic emergency risk communication principles, transparency in communications, current and potential channels for distribution of routine and emergency information, how to achieve consistency in messaging, and communication roles in a pandemic.
- The Medical Advisory Group has been convened to assist the state in developing guidelines for decisions in emergencies such as allocation of scarce resources and altered standards of care. The MAG includes approximately 24 representatives of major health care, health professional organizations, tribal organizations, academia, and local government.

National Public Health Information Coalition Conference

 OPHD staff were instrumental in bringing the National Public Health Information Coalition Conference to Portland in October, and worked on the planning committee for the conference. The conference provided Oregon public health and hospital public information officers with an opportunity to network with counterparts PHEP Update, Pg. 4 January 2007

- from around the country, as well as worldclass training in a number of emergency preparedness topics.
- OPHD Director Susan Allan, M.D., J.D., M.P.H., opened the conference with comments on why Good Communication is Fundamental to Good Public Health.
- Other key session topics included the Importance of Public Health Communication, Communication Planning for Pandemic Influenza, the Role of the News Media in Health Communications, Making Public Health Messages Relevant and Credible to Ethnic Media, Lessons Learned from Mississippi's '05 Hurricane Experience, Emergency Planning for Special Populations, State and Tribal Relationships for Health Policy Making, and Relationship Management in Public Health.
- During the conference, OPHD Public
 Health Emergency Preparedness Public
 Information Coordinator Christie Holmgren,
 APR, received a first-place national award
 for the virtual joint information center she
 developed for sharing information with
 partners around the state during public
 health emergencies.

Oregon State Public Health Laboratory-Laboratory Response Network

- The Laboratory Response Network (LRN) for Public Health Preparedness Advisory Committee is a consortium of public and private sector biological and chemical laboratory management professionals throughout Oregon who share their expertise concerning LRN policy and other business. The biennial advisory committee meeting on Oct. 20 included a presentation on the LRN preparedness structure and response process for LRN sentinel labs and OSPHL microbiology and virology capabilities during a biological or chemical threat event.
- The group also discussed sentinel lab roles and responsibilities, including policies and procedures for referral of suspicious specimens, use of Web-based training modules for bio-threat agent identification,

- plus packaging and shipping of infectious materials.
- The group reviewed and discussed results of the College of American Pathologists Laboratory Preparedness Survey proficiency testing challenge samples from 2003-2006, as well.

Upcoming Exercises

- The PHEP Exercise Design Team is just starting to work on setting up a tabletop exercise with key leaders from the Department of Education, with a goal to complete the exercise prior to February 1, 2007. PHEP received a training and exercise packet from the CDC as a template for both organizations to use as a guide.
- A cross-border Chemical Threat exercise is planned for June 2007. It will involve Oregon, Idaho and Washington public health and the Oregon National Guard Weapons of Mass Destruction Civil Support Team.

Joint Planning for Avian Influenza

- The Avian Influenza Interagency
 Workgroup, which includes representatives
 from the OPHD and partners at the state
 and federal departments of fish and wildlife
 and agriculture, recently completed an
 interagency response plan to an avian
 influenza animal emergency.
- The Multi-Agency Response to a Highly Pathogenic Avian Influenza Animal Emergency plan outlines the roles and responsibilities of agencies involved in an avian influenza animal emergency, including joint communications, and ties together individual agency plans and protocols.
- The first tabletop exercise of the plan took place in early November. During the exercise interagency workgroup members discussed internal and public communications around a Highly Pathogenic Avian Influenza (HPAI) detection in wild birds and in back yard poultry in Oregon. The Workgroup is modifying the plan based on lessons learned from this exercise.

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Cross-Border Planning for Sharing Chemical Antidotes

- Representatives from Oregon Public
 Health Emergency Preparedness along
 with officials from counties on both sides of
 the Oregon and California border met on
 Nov. 29 in Yreka, Calif., to discuss creating
 written agreements for the movement of
 CHEMPACK containers across the state
 line.
- The CHEMPACK program is designed to place nerve agent antidotes in communities throughout the state to support a quick response to a nerve agent incident. For some incidents, the closest container might be located in a neighboring state. These initial discussions are being held to address specific issues related to deployment of the containers and, with the assistance of a CDC attorney, create a template for similar agreements with other neighboring states.

E-Learning Update

- The Public Health Emergency
 Preparedness Training and Exercise
 Program recently announced the release of "Introduction to Oregon Public Health Emergency Response" and "Laboratory Packaging and Shipping." These two courses are the first in a series of five E-Learning courses available on-line. For more information, visit the DHS Learning Center: https://dhslearn.hr.state.or.us/, or contact training specialist Joy Weyer at 971-673-1094 or joy.weyer@state.or.us.
- E-Learning courses are being developed with "Closed Captioning" to assist learners with hearing impairments. An "HTML version" will be used to assist sight impaired learners, which allows for course navigation by use of the keyboard instead of a mouse.
- Upcoming E-Learning courses for 2007 include "Introduction to Outbreak Investigation and Interviewing," "Working with Interpreters in a Public Health Setting" and "Introduction to Communicable Disease and Epidemiology."

Influenza Clinical Laboratory Outreach Grant

 The OSPHL recently received approval of a \$16,900 grant to improve outreach and provide education programs for clinical laboratory partners to improve the understanding of state laboratory influenza surveillance and pandemic planning efforts, and improve coordination and collaboration between the public health and clinical laboratories as related to influenza surveillance. The funding is provided by the Association for Public Health Laboratories through its Cooperative Agreement with the CDC.

Recent PHEP Speaking Engagements

- Oregon Public Health Director Susan Allan, M.D., J.D., M.P.H., has given a number of recent briefings and talks, including an Emergency Preparedness Briefing for the Governor's Office on Oct. 9, a West Nile Virus update for the Governor's Office on Oct. 16, a preparedness update for the Senate Public Health Committee on Oct. 10, and to the Local Government Advisory Committee on Dec. 8.
- Allan serves as an expert advisor to the RAND Corp. on the advisory group for all of its public health preparedness initiatives, and participated in the Association of State and Territorial Health Officials Global Migration and Quarantine Meeting in November.
- Allan presented at the annual conference of the American Public Health Association in Boston on Nov. 6, as part of a panel concerning the benefits and problems of pandemic influenza planning.
- Since September, PHD epidemiologist
 Paul Lewis, MD, has given more than a
 dozen invited lectures on influenza and
 pandemic influenza planning to public
 health and healthcare professionals,
 including at the Oregon Health and
 Science University Center for Ethics, Good
 Samaritan Hospital in Corvallis, Infectious
 Disease Society of Oregon, American
 College of Physicians-Oregon Chapter,

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- North Pacific Society of Internal Medicine, St. Charles Medical Center, Annual West Coast Epidemiologists Meeting, Northwest Association of Microbiologists, Oregon Association of Practitioners of Infection Control, and the annual conference of the Northwest Occupational Medicine and Industrial Hygiene Association.
- Mike Harryman served as a panel member at the 2006 Winter Meeting for Oregon Society of Healthcare Executives. The panel provided information about local and state preparedness efforts, with a focus on pandemic influenza planning and response efforts. Discussion focused on the healthcare systems' community engagement activities and how those activities interface at the local emergency management level and with the state response system.
- PHEP senior planner Nan Newell, PhD, gave a presentation on pandemic influenza planning for Legacy Health System in October.

Chemical Preparedness

- OSPHL chemical terrorism planner Eric Clark was recently invited by the CDC to present information on how to gain the cooperation of key personnel in private sector labs and medical facilities during a national Webcast on "Best Practices."
- In 2005, approximately 150 health care professionals in about 60 health care facilities in Oregon were trained on coordinating their facilities' chemical incident response with federal and state plans.

PHEP Planning Updates

Public Health Division Emergency Preparedness Manager Mike Harryman recently visited North Dakota's Department of Health as part of an Association of State and Territorial Health Officers (ASTHO)sponsored program to match state preparedness directors who have been in their positions for less than one year with experienced directors from other states. The program provides insight into how

- host states manage their CDC and Health Resources Service Administration (HRSA) grant-funded programs.
- In October 2006, key staff from PHEP attended a Region X update in Seattle that focused on federal and state relationships relating to public health and medical services in responding to an all-hazard incident.

Cross-border Planning

• In October, Harryman attended the quarterly cross-border meeting with Pacific Northwest Emergency Management Agreement (PNEMA) partners, including representatives from Alaska, Idaho, Washington, British Columbia and Alberta provinces. The PNEMA is a 10-year agreement that all Region X states and the Canadian provinces signed to support each other in responding to regional allhazard incidents. The focus of the meeting addressed cross-border issues that will impact the 2010 Olympics being held in Vancouver BC.

Antiviral Distribution Plan

 The OPHD recently completed the hospital component of Oregon's Influenza Antiviral Distribution Plan. This draft plan builds on current federal guidelines that were released in November 2005 from the Department of Health and Human Services Pandemic Influenza Plan. Program staff will start working on a training and exercise plan to take to our external partners during the first six-months of 2007.

Public Health Information Network (PHIN)

 The DHS Office of Information Services has dedicated a technical architect, Paul Aneja, to coordinate and oversee technical projects within the State Office Building in Portland, including the national Public Health Information Network (PHIN) preparedness initiatives. PHIN preparedness focuses on seamless integration of public-health information systems that are used for early event detection (electronic disease surveillance), outbreak management, PHEP Update, Pg. 7 January 2007

partner communication and alerting via the Health Alert Network, connecting laboratory systems, and countermeasure and response administration. The program recently completed self-assessments of all of these functional areas, and is on the way to becoming "PHIN-Certified" by 2010.

Public Health Radiological Emergency Response Plan

- The OPHD recently updated the Public Health Radiological Emergency Response Plan. This involved the cooperation of several programs, including Radiation Protection Services, Environmental Public Health and Public Health Emergency Preparedness.
- The plan will be used and tested during the national TopOff 4 exercise scheduled to take place in Oregon during October 2007. Public health will play a key role in responding to a mock radiological disaster in the drill, which is designed to test federal, state and local preparedness and response capabilities to a complex terrorist attack scenario.



Since 1999, OPHD Radiation Protection Services has supplied 51 radiation detection kits to Oregon hospitals.

Radiation Protection Services Exercises

- DHS Radiation Protection Services recently participated in two exercises involving county partners. In early September, Curry County conducted a radiological dispersion device tabletop exercise, in which DHS assisted in the planning and evaluation for the event. This was intended to be a functional exercise, but was changed to a table-top when the majority of players became involved in responding to a local homicide. County officials showed flexibility in their actions for this exercise.
- The second exercise was a full-scale radiological dispersion device event on September 23 in Hood River County. DHS again provided assistance in planning and evaluation. Sixty-eight personnel took part in this all-day event. Hood River and The Dalles hospitals received six to ten patients each from this event, while continuing their day-to-day operations.

Radiation Detection Kits

• Through a grant with the Department of Homeland Security and our Cooperative Agreement with the CDC, DHS Radiation Protection Services has supplied 51 radiation detection kits to Oregon hospitals and medical facilities. The program provides training in how to use the kits. The \$1,200 kits include three pencil dosimeters, one piezoelectric charger and two radiation monitors. The goal of the program is to have kits in all Oregon hospitals by the end of 2007.

Food Defense Planning

 A Food Defense table-top exercise on Dec. 7 involved participants from the U.S. Food and Drug Administration (FDA), Oregon Beef Council, Oregon Department of Education, Department of Agriculture and several OPHD programs, including Food-borne Illness Prevention, Acute and Communicable Disease Prevention, and Office of Multicultural Health and Public Health Emergency Preparedness. The exercise highlighted the complexity of the food system in PHEP Update, Pg. 8 January 2007

Oregon and the fragmentation of food safety responsibilities, which increases the difficulty of responding to food-borne illnesses or an attack on the food supply.

- The Food Defense Project began in 2003 to bring together diverse expertise in responding to emergency situations involving Oregon's food supply. The Food Service Advisory Committee Food Defense Workgroup includes representatives of both the public and private sector of the food industry. including the Oregon Department of Human Services, Department of Agriculture, Department of Education and Department of Corrections, the Oregon Restaurant Association, Oregon Beef Council. Council of Local Environmental Health Supervisors (CLEHS), Sysco Foods Inc., FDA, U.S. Department of Agriculture (USDA), and Federal Bureau of Investigation (FBI) Weapons of Mass Destruction section. Efforts are underway to include representatives from the Northwest Food Processors' Association, the grocery industry, Oregon Food Bank, Oregon Occupational Safety and Health Administration (OSHA), commodity commissions and others.
- The overall goal is to preserve and protect Oregon's food system by effectively anticipating, preventing, responding and recovering from any unintentional or intentional contamination of the food supply.

New PHEP Staff

Public Health Emergency Preparedness
is pleased to welcome two new staff
members. Bill Riley, B.S., M.S.W., is the
new DHS Vulnerable Populations Project
Manager. Riley has managed the operation
of two non-profit residential service
provider programs for children, managed
a statewide referendum campaign
and directed a statewide association
of advocacy programs for people with
disabilities. He worked as strategic planner
for the Montana Justice Department, which
funded a statewide network of group homes
for runaways, as well as 10 Big Brothers

- and Sister programs that provided peercounseling programs in several locations. He earned a Master of Social Work from Syracuse University and a Bachelor of Science degree in psychology from the State University of New York in Brockport, N.Y.
- Lynda Muriera, B.S., J.D., M.P.H., has accepted the position of PHEP Training Manager. She previously worked in several different roles for Wake County Human Services in Raleigh, N.C., including as a disaster response planner, youth development manager, and Women Infants and Children (WIC) program planner. After completing her juris doctoral degree in Public Interest Law at Santa Clara University School of Law, she worked as a staff attorney for Legal Services of North Carolina. In addition, she holds a bachelor's degree in Political Science from San Francisco State University, and a master's degree in Health Policy and Administration from the University of North Carolina at Chapel Hill School of Public Health.



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