

Update

Report on Public Health Emergency Preparedness in Oregon

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PHEP Program Director Mike Harryman (from left) meets with U.S. Health and Human Services (HHS) Assistant Secretary for Preparedness and Response (ASPR) RADM Craig Vanderwagen, ASPR Executive Assistant Lt. Mike McKinnon, HHS Region X Emergency Coordinator Capt. David Kerschner, and ASPR Senior Program Analyst Esmeralda Pereira.

Visit from RADM Craig Vanderwagen

- On April 10, RADM Craig Vanderwagen, the first U.S. Department of Health and Human Services (HHS)
 Assistant Secretary for Preparedness and Response,
 and key Emergency Support Function #8 (ESF #8)
 Region X staff visited with Oregon Public Health
 Division Interim Director Mike Skeels, Ph.D.; Medical
 Epidemiologist Paul Lewis, M.D., PHEP Director Mike
 Harryman, B.S.B./M., and Multnomah County Health
 Officer Gary Oxman, M.D., M.P.H.
- During the visit, Harryman provided an overview of Oregon's Hospital Preparedness Program, and Oxman discussed how funding has assisted the region in healthcare preparedness activities over the past five years.
- In support of the Surgeon General, Vanderwagen served as the U.S. Public Health Service (USPHS) Chief Professional Officer for the Medical Category of the Commissioned Officers Corps. He provides guidance and advice for more than 1,300 USPHS physicians.



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2008-2009 CDC Cooperative Agreement

- The U.S. Department of Health and Human Services' Centers for Disease Control and Prevention (CDC) recently released the guidance for continuation of the Public Health Emergency Preparedness (PHEP) Cooperative Agreement for fiscal year 2008.
- Oregon is slated to receive approximately \$8.5 million in base funding and \$571,687 in Cities Readiness Initiative funding in fiscal year 2008.
- Beginning in fiscal year 2009, five percent of PHEP Cooperative Agreement funding must be matched by non-federal contributions. This amount increases to not less than 10 percent in subsequent years.
- Funds are intended to upgrade state and local public health jurisdictions' preparedness and response to bioterrorism, outbreaks of infectious diseases, and other public health threats and emergencies.
- The Federal Pandemic and All-Hazards Preparedness Act requires states to meet the following goals:
 - Integrating public health and public and private medical capabilities with other first responder systems;
 - Developing and sustaining essential state, local, and tribal public health security capabilities, including disease situational awareness, disease containment, risk communication and public preparedness, and the rapid distribution and administration of medical countermeasures;
 - Addressing the public health and medical needs of at-risk individuals in the event of a public health emergency;
 - Minimizing duplication and assuring coordination among state, local, and tribal planning, preparedness, and response activities in accordance with the National Response Framework,

- the National Incident Management System, and the National Preparedness Goal;
- Maintaining vital public health and medical services to allow for optimal federal, state, local, and tribal operations in the event of a public health emergency; and
- Developing and testing an effective plan for responding to pandemic influenza.
- In addition, states must meet specific evidence-based benchmarks and objective standards established by the CDC.
 - Demonstrated capability to notify primary, secondary, and tertiary staff to cover all incident management functional roles during a complex incident.
 - Demonstrated capability to receive, stage, store, distribute, and dispense materials during a public health emergency.
- Substantial failure to meet these benchmarks and standards, as well as other requirements, will result in withholding of fiscal year 2009 funds.

Hospital Preparedness Program Grant Application

- The Department of Health and Human Services (HHS) Office of the Assistant Secretary for Preparedness and Response (ASPR) recently announced the availability of funding for the Hospital Preparedness Program (HPP) for fiscal year 2008.
- Oregon is slated to receive approximately \$4.98 million in HPP funding in fiscal year 2008.
- The program has set 25 objectives for 2008 in the following areas:
 - o Incorporate National Incident Management System (NIMS) health care objectives into all exercises and prioritize so facilities can meet fiscal

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- year 2008 NIMS objectives
- o Enhance interoperable communications
- Market and train in the use of HOSCAP, Oregon's Hospital Capacity Web site, which is part of the national HAvBed system
- o Activate, market and test the Webbased medical volunteer registry
- o Rollout, train and exercise the Fatality Management Plan
- o Conduct tabletop and functional exercises of the medical evacuation and shelter-in-place plans during Cascadia Peril, the statewide full-scale earthquake and tsunami exercise planned for April 2009
- o Work with the federal regional emergency coordinator to refine plans for alternate care sites
- Demonstrate medical surge capacity as part of the CDC pandemic influenza planning and response.
- In addition, funding will support the following system projects:
 - Annual maintenance of the Health Alert Network (HAN), HOSCAP and medical volunteer registry
 - o Upgrades to the HOSCAP system
 - HAN, HOSCAP and medical volunteer registry training
 - o Support for training and exercises
 - o Chempack monitoring fees
 - o Purchase and leasing of satellite phones for every hospital
 - Automated medical license validation with Oregon and national credentialing boards.
- All of these objectives and system projects are designed to enhance Oregon's ability to respond to an emergency with public health and health care resources and incorporate the concept of 'train how you would respond.'



CDC Cooperative Agreement Project Officer Andrea Davis, Division of State and Local Readiness Branch Chief Jerilyn Gilbert and other CDC staff visited Oregon in March to assess Public Health Emergency Preparedness Program planning activities and accomplishments.

CDC Cooperative Agreement Site Visit

- Andrea Davis, the federal project officer for Oregon's PHEP Cooperative Agreement with the CDC, and other key CDC staff conducted a site visit March 20-25 to assess PHEP program goals, objectives and grant-related issues.
- During the visit, CDC representatives received briefings on key PHEP activities and visited the Oregon Poison Center, Clatsop County Health Department, Grand Ronde Tribal Preparedness Program, and the State Emergency Coordination Center.
- The visit provided CDC partners with an opportunity to gain a better understanding of the PHEP program, including the fiscal and operational constraints under which Oregon must manage the program.
- The PHEP Cooperative Agreement is based on nine preparedness goals intended to frame urgent public health system response concepts for all hazards, including terrorism and nonterrorism events, infectious disease, environmental and occupation-related emergencies.
- In addition to the nine goals, the Cooperative Agreement requires continuation of the Senior Advisory Committee, integration with other

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entities, implementation of interoperable information systems, and completion of a risk mitigation plan based on a hazard and vulnerability assessment.

 Following the visit, Davis noted that Oregon is doing extremely well and demonstrates a strong public health infrastructure and leadership.

Oregon Emergency Management Association Conference

- Several staff from the Public Health Emergency Preparedness program attended this year's Oregon Emergency Management Association (OEMA) Conference April 21-24 in Sunriver. The theme of the conference was Partners in Preparing Oregon.
- PHEP staff showcased the Health Alert Network (HAN) in the exhibit hall and presented information on Oregon's updated public health emergency laws (HB 2185).
- Some of the breakout sessions that staff attended were:
 - National Response Framework and National Incident Management System;
 - Victims Services: A Critical Partner in Terrorism and Mass Casualty Events; and
 - o Use of Incident Management Teams (IMTs) for All-Hazard Response.



The PHEP display was one of many exhibits during Public Health Week, April 7-11, at the State Office Building in Portland.



PHEP Planner Randy Shaw (from left), his wife Mary, and PHEP Director Mike Harryman at the Oregon Emergency Management Association awards ceremony. Shaw received a Member Award for Coordination.

PHEP Planner recognized by Oregon Emergency Management Association

During the Oregon Emergency
Management Association (OEMA)
Conference in April, PHEP Planner
Randy Shaw was honored with a Member
Award for Coordination at the state level.
Shaw played a critical role in the planning
of public health and medical services
activities for the TOPOFF 4 National
Level Exercise in Oregon in October
2007, and was the Incident Manager for
the Public Health Agency Operations
Center during the response and recovery
efforts for the December 2007 winter
storm disaster.

Winter Storm Reimbursement

- Federal FEMA reimbursement has been received for PHEP expenditures during response and recovery efforts for the 2007 winter storm that caused widespread power outages and flooding.
- PHEP's finance officer tracked all expenses related to staffing the Agency Operations Center for five days in support of the health and medical (ESF #8) response and recovery to the statedeclared emergency.

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Chemical Stockpile Emergency Preparedness Program Exercise, National Level Exercise (NLE 2-08)

- For the second time in six-months,
 Oregon Public Health Division (OPHD)
 staff participated in a National-Level
 Exercise (NLE).
- This time the focus was on the Chemical Stockpile Emergency Preparedness Program (CSEPP) exercise, May 5-7. The scenario for the three-day exercise was based on the release of the deadly nerve agent VX, as an aerosol and vapor at the Umatilla Army Depot, with offpost hazards downwind. The fictitious release affected Umatilla and Morrow counties in Oregon and Benton County in Washington. This was a recovery exercise with limited field play.
- The Oregon State Public Health Lab, PHEP Agency Operations Center (AOC), and various other public health employees staffed three incident management teams.
- Many state and federal agencies participated in the exercise, as well. In addition to the AOC, PHEP staff worked at the Oregon Emergency Coordination Center and at the Umatilla County Emergency Operations Center in support of the Multi-Agency Coordination Center (MACC).

Cross-Border Workshop

- PHEP Director Mike Harryman, B.S.B./M., Oregon Department of Justice General Counsel to OPHD Shannon O'Fallon, J.D., and Medical Epidemiologist Paul Lewis, M.D., attended the fifth annual bi-national cross-border workshop, "Public Health Collaboration: Mass Gatherings and Major Events," May 14-16 in Bellingham, Wash
- Workshop participants continued the work of building and maintaining crossborder public health surveillance,

- communication and mutual assistance relationships.
- This annual conference brings together the public health and medical service groups from the Pacific Northwest Emergency Management Arrangement (PNWEMA) signatories, including Alaska, British Columbia, Idaho, Oregon, Washington and the Yukon.
- This year's workshop featured discussions about the 2010 Olympic and Paralympic Winter Games in British Columbia.
- In preparing for the Olympics, British
 Columbia and Washington State are
 developing a cross-border emergency
 medical services plan to manage any
 type of incident that may arise. A primary
 focus for Oregon will be the possibility of
 providing surge resources in public health
 and medical services to Washington
 State, if necessary.

Joint Information Center Exercises

- In anticipation of the annual Chemical Stockpile Emergency Preparedness Exercise, PHEP Public Information Planner Christie Holmgren, B.A., APR, provided a day-long Joint Information System/Joint Information Center (JIS/ JIC) training and functional exercise for Oregon Department of Human Services public information officers (PIOs) and health educators on April 15. Three teams of three PIOs staffed the PHEP Agency Operations Center during the three-day exercise in early May.
- Health Alert Network (HAN) Manager Kevin Cradock, B.A., B.S., provided training on the HAN alerting system, and Holmgren provided training and a functional exercise on the use of the Virtual Joint Information Center for Hospital Preparedness Program Region 6 public information officers on April 17 at Mid-Columbia Medical Center in The Dalles.

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 Holmgren also provided an overview of JIS/JIC for Yamhill County PIOs on May 9 at Willamette Valley Medical Center in McMinnville.

Department of Human Services Vulnerable Populations Task Force Project Update

- The Department of Human Services (DHS) Vulnerable Populations Task Force project, formerly housed with the PHEP program at the state office building in Portland, has moved to the Human Services Building in Salem. The project is moving into a critical phase and interaction with significant DHS staff in Salem will help ensure the success of the project.
- Project Manager Bill Riley, M.S.W., will be reporting to DHS Administrative Services Division Deputy Jeremy Emerson.
- Riley can be reached at 503-754-4679, or via e-mail at: <u>Bill.Riley@state.or.us</u>.

FEMA Regional Advisory Council

- PHEP Director Mike Harryman and Emergency Medical Services (EMS) Director Bob Leopold attended the quarterly FEMA Regional Advisory Council (RAC) meeting for Region X on April 16.
- The day-long meeting brought together cross disciplines within the Region X states of Alaska, Idaho, Oregon and Washington. Other Oregon representatives include Columbia County Commissioner Tony Hyde, Oregon Emergency Management Director Ken Murphy, and Adjutant General MG Raymond Rees.
- A key focus for this meeting was the region's response to the winter storm that hit Oregon and Washington in early December 2007. Hyde gave his insights on the challenges he faced as a local official in responding to and recovering from the flood, and how FEMA processes and programs might be improved.

 Other RAC members discussed public health impacts, law enforcement issues, special needs population challenges, fire service issues, economic impacts and tribal issues.

Community Partner of Excellence Award

- The NW Oregon Health Preparedness
 Organization recently recognized the
 Oregon Public Health Division PHEP
 program with a Community Partner of
 Excellence award for "Outstanding work,
 commitment to regional collaboration,
 and dedication to safeguarding our
 community's health in the event of a
 disaster."
- The award was presented during the organization's annual emergency preparedness summit on May 27, in Portland.
- Health Care Systems Program Manager Jere High N.D., B.S., and Planner Mike Swinhoe, M.B.A., accepted the award on behalf of the program.

Oregon Emergency Support Function #8 Advisory Committee Meeting

- The bi-monthly Emergency Support Function #8 (ESF #8), Public Health and Medical Services Advisory Committee met on May 29. The primary role of the group is to provide expert advice on policy direction to the OPHD, including the PHEP program.
- Policy recommendations are focused on activities encompassed by Annex F, Public Health and Medical Services (ESF #8): Volume II of the State of Oregon Emergency Operations Plan.
- Updates provided during the meeting included:
 - o Oregon Law Commission
 - o Post Umatilla Chemical Stockpile (NLE 2-08) full-scale exercise
 - The May National Disaster Medical System (NDMS) exercise
 - o Governor's Homeland Security

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- Council
- o CDC & HPP Cooperative Agreements
- o 3-5 year ESF #8 goals
- Medical Reserve Corps (MRC)/ Disaster Medical Assistance Team (DMAT)
- o Oregon medical volunteer registry
- o Olympic track and field trials in Eugene.

Special Director's Excellence Awards

- OPHD and PHEP staff are among numerous DHS employees being honored by DHS Director Bruce Goldberg, M.D., with a Special Director's Excellence Award for their roles in keeping people safe before, during and after the storms and flooding in December 2007.
- OPHD and PHEP staff supported medical responders in the field, provided needed vaccines, disseminated crucial information on protective actions, tested drinking water, and "worked non-stop in difficult conditions to serve the thousands of Oregonians affected by the storms and floods," said Goldberg.

Crisis and Emergency Risk Communication Training

- PHEP Public Information Planner Christie Holmgren, B.A., APR, provided a day-long "Crisis and Emergency Risk Communication By Leaders for Leaders," training in Bend on June 2.
- Participants included public information officers and potential spokespeople from Wasco/Sherman, Deschutes, Crook, Lane, Hood River and Columbia county health departments; St. Charles Medical Center, Cascade Healthcare Community and Mt. View Hospital; and the Confederated Tribes of the Umatilla Indian Reservation.



Clackamas County Community Health Division EMS Supervisor Larry MacDaniels discusses emergency preparedness with other Clackamas County representatives during the Cities Readiness Initiative (CRI) tabletop exercise in June.

Cities Readiness Initiative Tabletop Exercise

- Approximately 50 emergency response partners participated in a Cities Readiness Initiative tabletop exercise on June 10 in Portland. The day-long exercise focused on a biological attack scenario involving anthrax.
- The exercise was designed to evaluate organizational response plans and capabilities, risk communications, and resource ordering and allocation procedures within the five-county Urban Area Strategic Initiative region.
- Exercise participants included representatives from public health, hospitals, law enforcement, transportation, emergency management, critical infrastructure and the private sector from Clark County in Washington, and Multnomah, Washington, Clackamas and Columbia counties in Oregon.



Legacy Health System Director of Security John Reid (above, left) discusses hospital preparedness with Hospital Preparedness Program Region 1 Coordinator Christine Bernsten during the CRI tabletop.

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Harryman Tapped for ASTHO Group

PHEP Director Mike
 Harryman, B.S.B./M., has been invited to participate in a new Association of State and Territorial Health Officers (ASTHO) focus group that will offer



guidance on issues related to healthcare system preparedness.

- ASTHO has received funding from the Assistant Secretary for Preparedness and Response (ASPR) to gather information on how states collect performance measure data from hospitals, healthcare coalitions, and other healthcare organizations.
- ASTHO has invited 12 of the ASPR Hospital Preparedness Coordinators to provide input on this project for the duration of the contract, which ends in May 2009.
- The project aims to identify the information management systems that states have in place for collecting data on
 HAvBED availability, the Emergency System for Advance Registration of Volunteer
 Health Professionals (ESAR-VHP), collection of After-Action Reports (AARs), written plans, and promising practices within the state.
- Members of this focus work group will be interviewed for the collection of this information, offer examples of innovative activities occurring in their own state, and provide insight as needed to fulfill the objectives of this project.

Health Alert Network Brochures Available

The new Health Alert Network (HAN) and Hospital Capacity (HOSCAP) Web site brochure is now available. Partner agencies and organizations can place their order free-of-charge by contacting Michelle Tworoger at michelle.
 b.tworoger@state.or.us. Oregon PHEP is encouraging all partner agencies to retain copies to promote use and training on HAN.

Major Health Alert Network upgrade scheduled for winter 2008

- Health Alert Network (HAN) Manager Kevin Cradock, B.A., B.S., and the HAN staff are preparing the system for a major software upgrade this winter to HAN version 5.0.
- The upgrade will include a migration to Windows SharePoint 2007, and substantially enhance the system's collaborative functionality.
- According to Cradock, the current plan is to upgrade the HAN backup system first to ensure the key functionalities are unaffected and tested. Once the backup system is stabilized, the primary (or production) system will be upgraded overnight.
- The Training and Exercise Design Unit will modify the HAN 201 and HAN 301 training to prepare for this upgrade.
- "This system enhancement is the most significant technology upgrade HAN has undertaken since the initial CDC HAN grant in 1999," said Cradock.

Health Alert Network User Group Begins

- Intermediate Health Alert Network
 (HAN) users (known as collaborators)
 and advanced HAN users (known as
 administrators) will be encouraged to
 participate in monthly user group sessions
 beginning in July. HAN Administrator Nick
 May will facilitate these sessions online
 and via teleconference. This new forum
 will allow users to share best practices,
 learn about new features and review HAN
 use policies and procedures.
- HAN Manager Kevin Cradock, B.A., B.S., says this forum is a model adopted from other states with very strong HAN programs. Several neighboring states often have more than 100 participants per call. The user group will meet on the third Thursday of every month for one hour, except November and December. E-mail HAN.OREGON@state.or.us for more information.

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New Satellite Phones Coming

- Over the past five years, a variety of federal grant funding sources have provided hospitals and health departments with satellite phones, primarily through GlobalStar.
- The GlobalStar satellite constellation is failing, which has resulted in a 70 percent failure rate for satellite calls throughout Oregon. The state has been informed that GlobalStar service quality will continue to worsen.
- An alternate service provider, Iridium, has been evaluated and chosen as an interim provider of satellite voice services. The Iridium network is currently working, and is expected to work reliably for another three to four years.
- Consequently, state public health, local health departments, hospitals, tribes and other key partners will receive new Iridium hand-held satellite phones.
- Each local health department will be issued two Iridium 9505A phones with voice and voicemail. Hospitals and tribes will receive one phone with the same features.
- State public health will re-issue satellite phones to key staff, programs and partners.
- The new phones will help ensure that health departments, tribes and hospitals have a redundant ability to communicate in an emergency, when critical communication infrastructure is lost.
- Since this replacement project is currently out for bid delivery time is still unknown, but estimated for late summer or early fall.
- All costs associated with the new devices will paid in full by the state for two years.
 Public health leadership and our partners will evaluate future funding priorities at that time.
- A complete deployment of reliable satellite phones in the public health and medical system could save hundreds of lives in an emergency.

Health Alert Network Use Expands in Deschutes County

- The Deschutes County Health
 Department (DCHD) is increasing its
 presence on the Oregon Health Alert
 Network (HAN) system by adding 70
 additional staff.
- Many of the health department's core team members already actively use the network for situational awareness, business communications and exercises.
- The goal is to have all county health and emergency preparedness staff enrolled in order to use HAN as their primary notification system.
- Forty participants from Deschutes and surrounding counties attended an on-site HAN 101 training on May 27 and 28. This course is required for all HAN users and provides an understanding of the history and mission of the HAN as well as its operation and user configurations.
- Another 25 individuals will be trained remotely in July.
- DCHD HAN Administrators Colette Whelan, Mary Goodwin and Patricia Thomas spear-headed this initiative.

Incident Command System and Exercise Design and Evaluation Training

- A series of day-long, position-specific trainings in Incident Command System (ICS) will be offered this fall at four locations around the state.
- In addition, an intensive two and a halfday course on exercise design and compliance with new Homeland Security Exercise Evaluation Program (HSEEP) requirements will be offered at six locations around the state.
- Details of the training sessions are still being finalized. Local health departments and other response partners will be notified when dates and locations have been determined.

E-Learning Update

- Development of the Health Alert Network (HAN) and Hospital Capacity website (HOSCAP) e-Learning course is expected to be completed by mid-summer. This course will allow HAN/ HOSCAP users around the state to learn how to configure their account profiles, confirm receipt of alerts and maximize the usage of the HAN and HOSCAP systems for their organization.
- The e-Learning course is available on-demand and 24/7 to accommodate all users schedules.
- An overview of the Web-based Oregon
 Health Care Volunteer Registry will be
 available in mid-July and will create
 an avenue for licensed health care
 professionals to volunteer for disaster
 response at the local, state and national
 levels, and provide opportunities for
 participation in health-related community
 service projects.
- In addition, a Learning Center Administrators course is expected to be launched this fall.

Strategic National Stockpile Planning

- OPHD Strategic National Stockpile (SNS) Coordinator Kathy Scott, Dr.P.H., attended an Association of State and Territorial Health Officers (ASTHO) SNS Advisory Group meeting in Washington, D.C., on April 10.
- Oregon Department of Transportation (ODOT) Region 2 Emergency Operations Manager Keith Ayers, and Lori Clinton, who is a Supply Operations Manager with ODOT's Fleet Operations, participated in the CDC's 2008 SNS Preparedness Course in Atlanta, Georgia, April 21-25. ODOT is OPHD's transportation partner for the SNS program.

PHEP to Provide Signage for Medication Centers

- Standardized sets of signs to assist people in navigating their way through emergency medication centers or socalled "points of dispensing" are being purchased by PHEP for use by local health departments throughout Oregon.
- The signs are based on those developed by the Washington Department of Health and feature directions in English, Spanish, Russian, Chinese and Vietnamese, as well as simple pictographs to aid in comprehension.
- The signs should be ready for delivery in early August.



Oregon Public Health Division staff presented information on potential public health hazards during workshops held around the state in April and May.

Public Health Hazard Vulnerability Assessment Workshops

- During April and early May, staff from the OPHD Office of Environmental Public Health and the Acute and Communicable Disease Prevention section held four regional trainings on public health hazard vulnerability assessments in La Grande, Bend, Roseburg and Woodburn. Local health department and emergency management personnel from 25 counties attended these sessions.
- OPHD staff discussed technological and human-caused hazards that should be considered when ranking threats to Oregon communities.
- OPHD trainers included Office of Environmental Public Health Services Public Health Toxicologist Michael Holcomb, PH. D.; Epidemiologist/ Emergency Preparedness

Planning Coordinator Michael Heumann, M.P.H., M.A.; and Senior Industrial Hygienist Russ Reasoner, B.S.; and Acute and Communicable Disease Prevention section Clinical Epidemiologist Barbara Progulske, D.V.M., M.P.H., D.A.C.V.P.M.

Oregon Nurses Association Conference

- The Oregon Nurses Association Conference on May 16 featured several speakers from Public Health Emergency Preparedness and the Office of Environmental Public Health Services. The theme of this year's conference was "Altered Standards of Nursing Care in Disasters: Protecting Your Family and Your Community".
- PHEP Lead Planner Nan Newell, Ph. D., participated in a panel discussion titled: "Are We Prepared for Disaster in Oregon?"
- PHEP Pandemic Flu Planner, Michael Kubler, M.S., presented on "Oregon Public Health Division's Pandemic Planning Update."
- Radiation Protection Services Health
 Physicist Justin Spence, B.S., presented
 "Radiological Response Considerations for Medical Professionals."
- Public Health Toxicologist Michael Holcomb, PH. D., provided an "Introduction to WMD and Industrial Chemicals." Public health toxicologists are key responders to chemical emergencies including terrorism incidents.
- Approximately 100 people attended the conference.

Civil Support Team Visits Oregon State Public Health Laboratory

On May 9, Operations Officer Capt.
 Julia Appt and other representatives of
 the 102nd Oregon National Guard Civil
 Support Team for Weapons of Mass
 Destruction met with Oregon State
 Public Health Laboratory (OSPHL) and
 Department of Environmental Quality lab

- staff and toured the new lab facilities in Hillsboro.
- The focus of the meeting was on coordinating laboratory response activities during emergency events.

Chempack Agreement with California and Nevada

 Oregon has signed an agreement with California and Nevada to be able to share Chempack assets across the border. Chempacks are nerve agent antidote kits, available for emergency use, which are kept at local sites. The agreement can be activated without an Emergency Management Assistance Compact (EMAC) declaration.

PHEP Region 1 News

- Public health regional notification procedures were tested during a Washington County earthquake drill in June. Local public health leaders and state preparedness staff were notified of the exercise emergency via the Health Alert Network (HAN) and then participated in a coordinating conference call.
- The next emergency notification drill will include hospital partners.

Hospital Preparedness Program Region 3 News

- Hospital Preparedness Program (HPP)
 Region 3 Coordinator Tracy DePew,
 EMT-1, and Oregon Disaster Medical
 Assistance Team (DMAT) member Helen
 Miller, M.D., were recognized in May for
 their work in preparedness by outgoing
 Lane County Medical Society (LCMS)
 President Gary Young, M.D.
- Miller led the DMAT that assisted in New Orleans following Hurricane Katrina.
- Young issued the Presidential Citations during the May meeting of the Lane County Medical Society (LCMS).
- Miller was installed as the new LCMS president for this term.

2008 U.S. Olympic Trials Public Health and Medical Preparedness Strategy

- Lane County is playing host to the 2008
 U.S. Olympic Track and Field Trials June
 27–July 6, at the University of Oregon in
 Eugene. In anticipation of this event, local
 public health and health care planners
 and emergency response partners
 developed a comprehensive Public Health
 and Medical Preparedness Strategy that
 includes a plan of care for visitors to the
 area who become ill.
- The visitor/spectator care strategy was developed to create primary care capacity and mitigate potential surge at hospitals and the urgent care system, for nonserious injuries and illness.
- This strategy was developed by the Lane County Medical Society with coordination and support from Hospital Preparedness Program Region 3 and Cascade Health solutions.
- Visitors, spectators and local hotels are being provided with information on how to access the system for their care needs.

Staff Changes

- PHEP Policy Coordinator/Epidemiologist Paul Lewis, M.D., is leaving OPHD to become a deputy Tri-county Health Officer with responsibilities in Clackamas and Washington counties. Concurrently, he will pursue a master's degree in public health through a distance-learning program at the University of North Carolina. Lewis joined the PHEP in the epidemiology group in early 2004, and has taken a lead role in developing the state pandemic influenza plan and provided leadership in creating the Medical Advisory Group.
- Pandemic influenza planner Julie
 Plagenhoef, M.P.H., has accepted a
 position in the Acute and Communicable
 Disease Prevention section working to
 enhance collaboration with the Oregon
 Poison Center. For the next couple

- of months, Plagenhoef will continue to support antiviral planning while transitioning into her new job.
- Bridget Johnson, M.S., has joined PHEP as a public information intern through the InternOregon program. Johnson, who recently completed her master's degree in health education, will be developing pandemic influenza materials for schools.
- Catherine Gonzalez-Maddux has joined the Acute and Communicable Disease Prevention section as an epidemiology and preparedness intern through the InternOregon program. Gonzalez-Maddux, who recently completed the first year of an M.P.H. program in epidemiology, will analyze influenza data and create planning partnerships with critical infrastructure organizations. This will include helping organize a summit between public health and regional power utilities planned for September.



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http://www.oregon.gov/DHS/ph/prepared-ness/phep_newsletter_index.shtml

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