

Director's Update



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September is National Preparedness Month, a time to reflect on past emergencies, lessons learned and to continue planning for the future. FEMA's campaign, "[Today is the Day Before: Are you ready for tomorrow?](#)" highlights the need for remembering past mistakes in order to be more successful in the future.

On December 17, 1964, the 57-man Oregon State football team flew to the Rose Bowl to face Michigan. With Oregon playing in the bowl rather than a team from California, Oregon was expecting a hostile crowd. On December 18, 1954, after heavy snowfall and record rains, Central Oregon was swamped with a once-every-thousand-years flood. More than 30 bridges became impassable and sections of Salem's surrounding highways were under water. Water pressure from sewers shot gushing waste water out of manholes. More than 100 patients were evacuated from a hospital. After floodwater swamped a sewage treatment plant, raw sewage began flowing into the Willamette River. One man died when a bridge collapsed. The National Weather Service called it "the most severe rainstorm" in Central Oregon's history. This emergency highlights the need for reflection and preparation. Today is the day before: are you ready for tomorrow?

As most of you are aware, we are facing the worst fire season since 2002 — public health programs are coordinating risk communications of droughts, fires and waterborne outbreaks as I write. I would like to take a moment to thank the other state agencies for their leadership during the current fire fighting efforts, namely the Department of Forestry and the State Fire Marshall's Office. I would also like to thank Baker, Douglas and Josephine county staffs who have put in the many hours to support their whole communities. This shows that community resiliency isn't something being talked about, but it really is happening.

September also begins the HSPR Program's annual preparedness conference. The CDC liaisons have been working hard to organize a blockbuster conference. The goal for the conference is coordinating across jurisdictions and ensuring local health authorities, the tribes, hospital partners and other key community partners know who to contact, and how and when to reach back to the state. I hope you can join us September 11–13 in Central Oregon. For more information on sessions or conference logistics, please contact [Justin Schumacher](#) or [Tiffany Stafford](#).

As summer ends, the fall begins and it's time to start preparing for winter storms and flooding. The Health Security, Preparedness and Response (HSPR) Program is reviewing plans and procedures to prepare for any winter storm activations. The HSPR communications team has been busy working with other key public health programs to review the Risk Communication Toolkit for Flooding. If you have any feedback on last year's messaging or have questions about risk communications, please contact [Kathleen Vidoloff](#). The more planning we can do now, the more successful our response will be and the more likely it will successfully protect the public's health.

For us to be able to do preparedness work in Oregon, we work closely with the Assistant Secretary for Preparedness and Response (ASPR) and Centers for Disease Control and Prevention (CDC) to manage grants and follow through with key deliverables. We received our final budget numbers and were not surprised by the numbers. CDC and ASPR projected some losses, for which we had been planning. Overall, Oregon saw reductions in our preparedness grants, the CDC's Public Health Emergency Preparedness reduction (PHEP) was 4.91%, in the Cities Readiness Initiative (CRI) it was 8.07%, and in ASPR's Hospital Preparedness Program (HPP) the reduction was 5.47%. These reductions caused us to make difficult decisions, but working with public health leadership, Conference of Local Health Officials, the tribes, and our health care coalition preparedness partners, we are able to focus our work efforts now on "Surge Management." This work will be the primary focus of both PHEP and HPP so that we can continue to develop partnerships, update plans, and conduct training and exercises that improve our overall state resiliency.

Crook County Health Department of the Year



Crook County awarded Health Department of the Year

By Julie Black

The National Association of County and City Health Officials (NACCHO) announced their first Local Health Department of the Year Awards this July. Only three health departments from across the country, each representing different jurisdiction sizes, were selected. Crook County of Central Oregon was among those chosen for its outstanding local health department achievements.

Crook County won in the small jurisdiction local health department category and was recognized for its innovative use of technology and data to improve the safety and accessibility of walking and bicycle paths. Muriel DeLaVergne-Brown, Public Health Director, “praised the great partnerships with the city of Prineville and Crook County departments.” She also stressed the importance of her “great staff and the work they do every day in the county to improve health.”

The winner of the medium jurisdiction size health department is the Gaston County Health Department, Gastonia, N.C. It was selected for effectively using empirical data to reduce teen pregnancy. Denver Public Health Department, Denver, Colo., won for the large grouping. Denver Public Health was selected for use of mobile technology to improve data capture and processing of immunizations.

The three extraordinary counties were honored during the Grand Award Ceremony at the NACCHO Annual Conference in Dallas on Thursday, July 11. “It was a great honor and says a lot for the ability of small health departments to make a difference in their communities,” DeLaVergne-Brown said.

Learn more about [NACCHO's Local Health Department of the Year Award and this year's winners.](#)

The retirement of Randy Shaw



The retirement of Randy Shaw

By Julie Black

It is with a heavy heart and enormous pride that we celebrate the retirement of our Operations Chief Randy Shaw. His last day with the Health Security, Preparedness and Response Program (HSPR) will be October 31, 2013. "I'm really excited for him," says his wife, Mary Shaw. But she also knows the transition will be a tough one. "He really loves his job."

Randy started his career with the Corvallis Fire Department as a volunteer when he was just 17 years old. He was hired as a full-time firefighter in 1977. He became president of the firefighters union, was promoted to Captain in the early 80s and started the Hazardous Materials (HazMat) Team. He stayed with them until 1994 when he was hired as Chief for the Silverton Rural Fire Protection District. He retired for the first time in 2001.

He came to HSPR in December of 2002 and played a pivotal role in building our program. "Randy was one of the original members of the public health preparedness program. He helped establish our roles and responsibilities and brought our program to the high level of professional standards we hold today," Mike Harryman, HSPR program director. He has managed the planning unit and for a time was the program's only county liaison. He now manages 12 field staff including county, tribal and hospital liaisons, the preparedness information systems and the Health Alert Network personnel.

Some of Randy's contributions include writing the public health portion of the TOPOFF 4 Homeland Security Exercise as a "trusted agent," overseeing the Chemical Stockpile Emergency Preparedness Program (CSEPP), playing a huge role in our response to H1N1 and serving as incident manager for the winter storms of 2007, 2008 and 2012.

Randy is known by all for his vast knowledge, his experience and, maybe most of all, for his sense of humor. He has at times been called our "Chief of Humor."

"Randy is an amazing boss," says Tiffany Stafford hospital preparedness liaison in Region 6&7. "He appreciates people for who they are and their unique talents and respects us as responsible adults to get the job done. His support is greatly appreciated and he will be missed!"

"Randy will be missed," says Deputy Director and Planning Chief Jere High, "He is a mentor, friend and confidant full of knowledge and with a keen sense of what to do next."

So what will Randy do next? His wife Mary tells us that he looks forward to relaxing, doing a little wood working, pursuing volunteer opportunities and beating everyone he can in fantasy football.

We wish you the very best. You will be deeply missed.

Planning for the worst: Exercising emergency preparedness at its best



Planning for the worst: Exercising emergency preparedness at its best

By Erin Corrigan and Lynda Neal

Over three days this May, the Oregon Division of Public Health (OPHD) participated in PACE Setter 2013. The Portland urban area full-scale exercise (FSE) was designed to evaluate the state's and the region's ability to coordinate, communicate and respond to a terrorism incident. PACE Setter ran concurrently with the 2013 Washington State Annual Bioterrorism Exercise (WASABE), sharing the same bioterrorism scenario.

This scenario included attacks that threatened citizens in five Oregon counties as well as Clark County in southern Washington. The intent was to test our ability to share information not only across jurisdictions in Oregon, but also coordinate across state lines with Washington. Counties, tribes and hospitals outside the Portland urban area were invited to participate in a separate but concurrent functional exercise, Trend Setter, to exercise their own plans and procedures, including OPHD play.

The first day, OPHD play was limited to decision making and pre-activation activities. To mimic a real, evolving event, the exercise scenario was designed to unfold without complete information to challenge federal and state public health leaders. A team of more than 20 OPHD leaders participated in an interstate call facilitated by the CDC to walk through the Strategic National Stockpile (SNS) requesting process and to coordinate activities with Washington State Public Health. Immediately afterward, the Health Security, Preparedness and Response Program facilitated an OPHD Intelligence Briefing to decide a number of strategic issues ranging from the activation of the Agency Operations Center (AOC), and the Receipt, Stage and Storage (RSS) site, to the announcement of a joint epi/law enforcement investigation. Regional local health departments were invited to listen in on the briefing and encouraged to ask questions.

The next two days focused OPHD play on Agency Operations Center (AOC) and (RSS) operations. The AOC focused on information sharing, logistics and planning activities, finance tracking and volunteer management. OPHD staff were deployed to provide expertise in the Emergency Coordination Center (ECC) and to the joint epi/law enforcement investigation. The AOC function is to manage the overall OPHD response. This can be challenging during an evolving event when information is coming in constantly that may change the required response. The scenario provided a few twists to encourage participants to be nimble and able to switch gears when needed.

At the RSS, the medical supplies the Centers for Disease Control and Prevention (CDC) shipped arrived early in the morning. The Immunization Program team worked well with staff while breaking down large pallets of material into smaller lots. They worked efficiently to receive, inventory, repack and distribute the SNS assets, including monitoring two Oregon Department of Transportation (ODOT) trucks delivering assets to the metro area local health departments (LHDs).

An important outgrowth of this exercise was the continuing development of relationships with our partners. We were very fortunate to have such strong participation by OPHD leadership and staff, as well as the many observers and players. This included five volunteers, three OHSU doctors, seven CDC employees, two from Region X, and many other federal and state representatives. Our goal in these exercises is just as it is in our everyday work: to improve the lifelong health of Oregonians through our vision of a healthy Oregon.

Preparedness moments to remember



Preparedness moments to remember

By Julie Black

Emergency preparedness is critical to our success and survival. Past events remind us of our purpose, rekindle the importance of our work and inspire public health emergency preparedness process improvement.

August 29, 2013:

marks the eight-year anniversary of Hurricane Katrina's deconstruction of our nation's Gulf Coast. The storm's highest winds were in excess of 170 mph over water, more than 140 mph at landfall and sustained 125 mph over land. Katrina was the third deadliest hurricane in our nation's history and cost \$108 billion in repairs. ([NOAA](#))

September 11, 2013:

is the 12-year anniversary of the terrorist attacks on the World Trade Center's north and south towers, the Pentagon, and United Airlines' Flight 93. A total of 2,996 lives were lost. One World Trade Center, also known as Freedom Tower, was completed on May 10, 2013. It stands on the site of the lost towers and is now the third tallest building in the world. ([World Trade Center](#))

October 13, 2013:

is the international day for natural disaster reduction. The International Day for Disaster Reduction is a day to celebrate how people and communities are reducing their risk to disasters and raising awareness about the importance of disaster risk reduction. The theme for 2013 is people with disabilities. ([UNISDR](#))

October 17, 2013:

at 10:17a.m. is this year's [Great Oregon Shakeout](#) earthquake preparedness drill.

OREGON PUBLIC HEALTH DIVISION