

# THE PREPAREDNESS REPORT

The Center for Emergency Preparedness and Disaster Response

Volume 4, Issue 17 | April 28, 2006

ELEVATED THREAT LEVEL

## Pandemic Influenza: **New**

- The Connecticut Department of Public Health has sent out the Pandemic Influenza Hospital Preparedness Checklist modified from the HHS Pandemic Flu Plan, Supplement 3 by the Office of Emergency Preparedness. The checklist is designed to guide hospital pandemic influenza planning by identifying key elements of a comprehensive and effective pandemic influenza plan. It also can serve as a way to evaluate the current status of pandemic influenza preparedness. The Connecticut Department of Public Health has requested that hospitals complete the checklist and e-mail this back to Mary Duley at [mary.duley@po.state.ct.us](mailto:mary.duley@po.state.ct.us) as soon as possible. To download this word document, please visit [http://www.yalenehavenhealth.org/emergency/commu/Pandemic\\_flu\\_hospital\\_checklist\\_1.doc](http://www.yalenehavenhealth.org/emergency/commu/Pandemic_flu_hospital_checklist_1.doc). To download the PDF document, please visit [http://www.yalenehavenhealth.org/emergency/commu/Pandemic\\_flu\\_hospital\\_checklist.pdf](http://www.yalenehavenhealth.org/emergency/commu/Pandemic_flu_hospital_checklist.pdf). For comments, please contact Richard Kleindienst, Sr. at (203) 688-3912 or [richard.kleindienst.sr@ynhh.org](mailto:richard.kleindienst.sr@ynhh.org).
- With growing concern about the spread of avian influenza, the CDC has updated their "Questions and Answers About Avian Influenza (Bird Flu) and Avian Influenza A (H5N1) Virus" with regards to infection of animals including dogs and cats. For more information, please visit <http://www.cdc.gov/flu/avian/gen-info/qa.htm>.
- WHO has published a "healthcare facility infection control recommendations for avian influenza" aid. This aid includes instructions for PPE, infection control recommendations, visitor recommendations and isolation precautions. To view this document in full, please visit [http://www.who.int/csr/disease/avian\\_influenza/guidelines/EPR\\_AM\\_final.pdf](http://www.who.int/csr/disease/avian_influenza/guidelines/EPR_AM_final.pdf).
- Over the next two months, WHO will be hosting three meetings in Geneva to discuss influenza vaccines. Influenza vaccines are an integral part of a global response to an influenza pandemic. Considerable efforts are ongoing to develop and evaluate candidate pandemic vaccines based on existing and licensed technologies. Processes that can provide pandemic vaccines in large quantities and more quickly than current approaches will also be discussed. To learn more about these meetings, please visit <http://www.who.int/csr/disease/influenza/vaccinesconsult2006/en/index.html>.

## Pandemic Influenza: **New**



According to the World Health Organization (WHO), the cumulative number of confirmed cases of avian influenza H5N1 as of April 21, 2006 was 204 cases and 113 deaths.

**Click on map for an enlarged view.**  
Map courtesy of <http://www.pandemicflu.gov/>

- Sudan has been added to the list of countries with poultry or wild birds that have the H5N1 or H5 virus as of April 24, 2006. The list also includes:

**Africa:** Burkina Faso, Cameroon, Niger, Nigeria and **Sudan (H5)-New**

**East Asia & the Pacific:** Cambodia, China, Hong Kong (SARPRC), Indonesia, Japan, Laos, Malaysia, Mongolia, Myanmar (Burma), Thailand and Vietnam

**South Asia:** Afghanistan, India, Kazakhstan and Pakistan (H5)

**Near East:** Egypt, Iraq (H5), Iran, Israel and Jordan

**Europe & Eurasia:** Albania, Austria, Azerbaijan, Bosnia & Herzegovina (H5), Bulgaria, Croatia, Denmark (H5), France, Georgia (H5), Germany, Greece, Hungary, Italy, Poland, Romania, Russia, Serbia and Montenegro (H5), Slovak Republic, Slovenia, Sweden, Switzerland, Turkey, United Kingdom and Ukraine

To read a current update, please visit

<http://www.cdc.gov/flu/avian/outbreaks/current.htm>.

- While the United States are working on their pandemic plans, Europe's pandemic plans continue to struggle with details about distribution of drugs and supplies, collaboration with neighboring countries and triage concerns. The analysis of plans prepared by 21 countries was prepared by Sandra Mounier-Jack, MSC, and Richard J. Coker, MD, of the Department of Public Health and Policy at the London School of Hygiene and Tropical Medicine.

"Governmental commitment in most European countries is strong, and levels of preparedness are broadly good," the authors wrote. "However, gaps in preparedness planning remain, and substantial variations exist between countries, with important implications for the region and nation states. Improved cooperation between countries may be needed to share experience, and to ensure coherence of approaches." For more information, please visit

<http://www.cidrap.umn.edu/cidrap/content/influenza/panflu/news/april2406europe.html>.

- As government and healthcare prepare for avian influenza in the United States, dilemmas of preparedness and equity loom large. Companies may be able to make 900 million doses of a pandemic influenza vaccine, but there are 6 billion people in the world. To read the article in full, please visit <http://www.infectiousdiseaseneews.com/200604/frameset.asp?article=pandemic.asp>
- The Bureau of Epidemiology, Department of Disease Control, Ministry of Public Health, Nonthaburi, Thailand Ministry of Public Health-U.S. CDC Collaboration, Nonthaburi, Thailand has published their analysis and of the trail of avian influenza (H5N1) and their detection in humans. To read about their detection, please visit [http://www.cdc.gov/mmwr/preview/mmwrhtml/su5501a2.htm?s\\_cid=su5501a2\\_e](http://www.cdc.gov/mmwr/preview/mmwrhtml/su5501a2.htm?s_cid=su5501a2_e).

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## Influenza Findings: Updated



The National Institute of Health (NIH) released findings from 30 years of weekly data that tracked interregional spread of influenza through the United States described by virus type, size of population and commuting rates and distance.

Researchers at NIH conclude that the regional spread of annual influenza epidemics throughout the United States is more closely connected with rates of movement of people to and from work than with geographical distance or air travels. They also found that epidemics spread faster between more populous locations.

"This valuable study highlights new approaches to using historical data sources and statistical analysis to create epidemiological models. These models not only help us understand the transmission of influenza but also could guide policy for its control" said Dr. Elias A. Zerhouni, NIH Director. To read these findings in full, please visit <http://www.nih.gov/news/pr/apr2006/fic-19.htm>.

## Ricin: Information and Guidance for Clinicians: New

The CDC has updated ricin information for healthcare professionals including background, epidemiology, clinical description and prevention. Ricin is a potent biological toxin (toxic protein) derived from part of the "waste" mash when beans from the castor plant (*Ricinus communis*) are processed during manufacture of castor oil. It can be in the form of a powder, a mist, a pellet, or it can be dissolved in water or weak acid. Depending on the route of exposure (such as injection or inhalation), as little as 500 µ of ricin could be enough to kill an adult. A greater amount would be needed to cause death if ricin were ingested. For more information, please visit <http://www.bt.cdc.gov/agent/ricin/clinicians/background.asp>.

### Questions or Comments

Questions, comments or suggestions should be forwarded by fax to (203) 688-4618 or by e-mail to [center@ynhh.org](mailto:center@ynhh.org)  
[www.yalenewhavenhealth.org/emergency](http://www.yalenewhavenhealth.org/emergency)

## Many Public Health Staff May Not Report to Work in Pandemic: Updated



A new study by researchers at Johns Hopkins Bloomberg School of Public Health suggests that many public health workers are unlikely to report to work during an influenza pandemic. Of 308 public health employees surveyed in three Maryland counties, just over half (53.8%) said they would likely report to work during such an emergency. Clinical staff members such as physicians and nurses were more likely to perceive the importance of their role in the agency's overall response and to say they would report to work than were technical or support staff such as computer and clerical workers. The authors say the findings suggest that local public health workers need a better understanding of the importance of their role in an influenza pandemic, a belief that they are well trained to cope with emergency responsibilities and confidence the agency will provide adequate protective equipment, psychological support and timely information. To read about this study further, please visit

[http://www.ahanews.com/ahanews/jsp/display.jsp?dcrpath=AHANEWS/AHANewsNowArticle/data/ann\\_060419\\_pandemic&domain=AHANEWS](http://www.ahanews.com/ahanews/jsp/display.jsp?dcrpath=AHANEWS/AHANewsNowArticle/data/ann_060419_pandemic&domain=AHANEWS).

## Laboratory Testing for Avian Influenza A/H5 (Asian lineage) Virus: New



The following guidance has been issued by the CT DPH Epidemiology and Laboratory Departments. Testing for avian influenza A (H5N1) should be considered on a case-by-case basis in consultation with the DPH Epidemiology Program for hospitalized or ambulatory patients with documented temperature > 100.4 F and one or more of the following: cough, sore throat, shortness of breath, and history of contact with poultry ( e.g., visited a poultry farm, a household raising poultry, or a bird market ) or a known or suspected human case of influenza A (H5N1) in an H5N1-affected country within 10 days of symptom onset.

Laboratory testing for human cases of possible avian influenza (H5N1) is available only through the State laboratory. The State laboratory will provide free testing for avian influenza for any patient reported through the surveillance system who meets the above surveillance criteria. For further specifics, please visit

[http://www.yalenewhavenhealth.org/emergency/links/April\\_2006\\_CT\\_LRN\\_2.pdf](http://www.yalenewhavenhealth.org/emergency/links/April_2006_CT_LRN_2.pdf).

## Laboratory Professionals Emergency Preparedness Conference – June 7, 2006: New

The State of Connecticut Department of Public Health Laboratory and Hartford Hospital Center of Excellence for Bioterrorism and Emergency Preparedness will be hosting a conference on June 7, 2006 from 8:00 a.m. to 4:00 p.m. at Connecticut Hospital Association. Connecticut's clinical laboratories will play a vital role as sentinel laboratories in the identification and management of a terrorism event. This conference will provide clinical laboratory professionals from all areas of the laboratory with current, relevant information on the ongoing initiatives underway in Connecticut to protect our citizens and prepare our healthcare laboratory resources to respond to a large-scale disaster event. For more information or to register for this event, please visit

<http://www.yalenewhavenhealth.org/emergency/links/LabConference.pdf>.



## DHS Names Lead Federal Officials for the 2006 Storm Season: New

The Department of Homeland Security announced on April 26, 2006 the pre-designation of five teams that will coordinate the Federal government's role in support of state and local governments in preparing for, and responding to, major natural disasters this storm season. In total, 27 federal officials have been appointed each with unique expertise and considerable experience, as Primary responsibility for disaster response has always been at the local level. The department appointed the following individuals as Principal Federal Officials (PFO), Deputy Principal Federal Officials (DPFO) and Federal Coordinating Officers (FCO) to facilitate Federal support of state and local governments. To read this press release in full, please visit <http://www.dhs.gov/dhspublic/display?content=5552>.

## Crisis and Emergency Risk Communication Conference Call –

May 2, 2006: **Updated**

The CDC will be sponsoring a conference call to discuss crisis and emergency risk communication on May 2, 2006, from 1:00 to 2:00 EST. Call objectives include understanding the accepted definitions of emergency risk and crisis communication concepts and their applicability to pandemic influenza, exploring the communication needs of the general public and stakeholders during a public health emergency, describing the emotional range expected from by persons involved in chaotic life events and examining the psychology of a public health emergency and what messages the public will need from their health professionals. To participate on this call, please dial (800) 369-1619, passcode: risk communication. Slides for this call will be available at <http://www.bt.cdc.gov/coca/callinfo.asp>.

## Ethical Hazards in Pandemic Flu Planning and Response Satellite Broadcast –

May 11, 2006: **New**

The Center for Public Health Preparedness (CPHP) at the University of Albany School of Public Health will be broadcasting a program via satellite downlink titled "*Ethical Hazards in Pandemic Flu Planning and Response*" with speaker with Harvey Kayman, MD, MPH on Thursday, May 11, 2006 from 10:00 to 11:00 a.m. EST. Dr Kayman is with the University of South Carolina Center for Public Health Preparedness and Public Health representative to the South Carolina Medical Association Ethics Committee. The Upper Midwest Center for Public Health Preparedness will be web casting this program on May 11 from 10-11:00 a.m. and from 4-5:00 p.m. EST. An archive of this web cast will also later be made available on the University of Albany CPHP web-site. For more information and to register for this program, please visit <http://www.ualbanycphp.org>

## "The Flu and You: Old and New Threats" Exhibit at the Harvey Cushing/John Hay Whitney Medical Library, Yale University School of Medicine –

April 19, 2006: **Updated**



Yale New Haven Center for Emergency Preparedness and Disaster Response (YNH-CEPDR) created a display at the Harvey Cushing/John Hay Whitney Medical Library as part of a new exhibit called "The Flu and You: Old and New Threats". The YNH-CEPDR display includes information on infection control and emergency preparedness. Other displays feature the history of influenza, new vaccination research and current and new vaccination methods. The exhibit opened with a ribbon cutting ceremony and included a lecture from Harvey V.

Fineberg, President of the Institute of Medicine, on "Preparing for Avian Influenza: Lessons from the Swine Flu Affair". The exhibit will run for a month. For more information, please visit <http://www.med.yale.edu/library/exhibits/flu/flu.html>.



## MRC National Leadership and Training Conference – April 17-21, 2006: **New**

The fourth annual Medical Reserve Corps (MRC) National Leadership and Training Conference, hosted by the Office of the Surgeon General was held in Dallas, Texas, April 18-21, 2006. More than 500 state, regional and national MRC leaders from all across the country attended. This year's conference featured presentations from the U.S. Surgeon General, VADM Richard H. Carmona, MRC Leaders and other key stakeholders.

The MRC National Leadership and Training Conference provided local leaders with a forum to share information learn of new resources and find innovative ways to improve their community preparedness. Eugenie Schwartz, BSN, MHA, MRC-YNH Program Coordinator and Carol Luddy, RN MA, State of Connecticut Emergency Credentialing Program Coordinator attended the conference. "This was an event I have really been looking forward to attending. MRC Leaders with so many different experiences, backgrounds, challenges and successes came together to share and help their communities," Schwartz stated. "We're looking forward to sharing information about what we learned with our other MRC colleagues in Connecticut" Luddy added. Schwartz spoke at the conference on training MRC volunteers to meet hospital surge capacity.

The MRC at Yale New Haven Center for Emergency Preparedness and Disaster Response is a group of trained volunteers who, when called upon during a disaster or other public health event, will support and enhance a local regional or statewide hospital response. To learn more about becoming a MRC volunteer, please visit [www.ynh-mrc.org](http://www.ynh-mrc.org). For more information please contact Eugenie Schwartz at (203) 688-2659 or [Eugenie.schwartz@ynhh.org](mailto:Eugenie.schwartz@ynhh.org) or Carol Luddy at (203) 688-5544 or [carol.luddy@ynhh.org](mailto:carol.luddy@ynhh.org).

## Emergency Credentialing Program (ECP): **Updated**



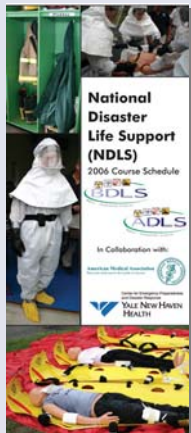
To date, 1 out of 25 healthcare professionals licensed in Connecticut - nearly 3,500 physicians, nurses, respiratory therapists, pharmacists and behavioral health, laboratory medicine and radiology professionals - have enrolled in the State of Connecticut Emergency Credentialing Program (ECP) for Healthcare Professionals. This is a great start, but we need to do more to reach the program goal of 12,000 healthcare professionals or at least 1 out of every 10 healthcare professionals licensed in Connecticut. As you celebrate your hospital volunteers and their daily contributions to patient care during Volunteer Week, April 23<sup>rd</sup> through April 29<sup>th</sup>, remember to talk to your colleagues about the ECP program and encourage them to visit [www.ct-esar-vhp.org](http://www.ct-esar-vhp.org) to enroll online. Although history has shown that healthcare professionals will come forward to help when the need is great, individuals who are enrolled in the ECP will have access to special training and state-sponsored liability and workers compensation coverage. More importantly, by volunteering some of their time to assist during a large-scale disaster or public health emergency, these colleagues will be ensuring that their family, friends and neighbors will have uninterrupted access to vital healthcare resources when they need it most! For additional information about the ECP program, contact Carol Luddy, RN, by email at [ECP@ynhh.org](mailto:ECP@ynhh.org) or by phone at (203) 688-3224.

## AHRQ Releases Standardized Hospital Bed Definitions to Aid Katrina Responders: **New**

Hospital bed definitions that can provide uniform terminology for organizations tracking the availability of beds in the aftermath of hurricane Katrina have been released by the Agency for Healthcare Research and Quality (AHRQ). Developed by AHRQ-supported researchers at Denver Health in Colorado, the definitions will allow hospital systems and emergency responders seeking beds for victims to speak the same language. Definitions currently in use vary among systems and even among hospitals.

These standardized definitions were vetted by a working group assembled by Denver Health with members from Federal and State governments, hospitals around the Nation, and the private sector. To learn more, please visit <http://www.ahrq.gov/research/havbed/definition.s.htm>.

## Training and Education: **Updated**



There is still space available in the May 18<sup>th</sup>-21<sup>st</sup> National Disaster Life Support course to be held in New Haven. Basic Disaster Life Support is an eight-hour course that provides an in-depth overview of disasters for all healthcare and public health professionals. The Advanced Life Support course provides physicians, physician assistants, nurses and paramedics with two days of intensive training on mass casualty triage, decontamination and treatment. Individuals completing the BDLS and ADLS programs will receive CME credits and are eligible to take the instructor course, which prepares them to conduct a course at their own facility. Hospitals are encouraged to consider using some of their HRSA hospital preparedness education and training funds to send appropriate individuals to any or all of these courses. For more information, please contact David Burich at (203) 688-3721 or [david.burich@ynhh.org](mailto:david.burich@ynhh.org).

## Training and Education: **New**



A narrated version of **Introduction to Emergency Management (EM 103)** for hospital employees is available. The CD-ROM based version of EM 103 is playable on most computers and can be used to complement instructor-led training events such as workshops or new hire orientation. This course is available on HealthStream and the YNHHS-CoE Learning Management System. In addition, an EM 103 toolkit is available for healthcare educators and staff development coordinators responsible for conducting instructor led emergency preparedness training to staff. For more information, please contact Mark Schneider at (203) 688-2577 or [mark.schneider@ynhh.org](mailto:mark.schneider@ynhh.org).

- **Reminder: Best Practices for the Protection of Hospital-Based First Receivers (EM 120)** is now available on CD-ROM and on the YNHHS-CoE Learning Management System (LMS) at [http://ynhhs.emergencyeducation.org/sign\\_in\\_em120.asp](http://ynhhs.emergencyeducation.org/sign_in_em120.asp). This course meets the awareness-level training requirements of the Occupational Safety and Health Administration (OSHA) and is a prerequisite for an operations-level course. The course provides information on hazardous substances and the risks associated with them as well as procedures needed to ensure the safety of healthcare workers. For more information, please contact Mark Schneider at (203) 688-2577 or [mark.schneider@ynhh.org](mailto:mark.schneider@ynhh.org).
- **Bioterrorism Preparedness for Clinicians (EM 201)** is a 50-minute course designed to prepare physicians and other clinicians for a bioterrorist event or other potential public health emergency. Now available at <http://ynhhs.emergencyeducation.org/>, EM 201 helps clinicians recognize bioterrorism agent disease syndromes, learn the precautions they should take and understand their roles in the event of a public health emergency. This course is available in a Connecticut and a national version. For more information, please contact Mark Schneider at (203) 688-2577 or [mark.schneider@ynhh.org](mailto:mark.schneider@ynhh.org).
- **Introduction to Radiological Response (EM 110)** is expected to be available in the Spring of 2006. At the end of the 30-minute course, individuals will be able to describe the harmful effects of radiation, identify steps that can ensure personal safety from harmful radiation and identify ways to assist in the response to a radiation emergency including decontamination and psychological first aid. A more advanced radiological preparedness course is under development and will be released later this year. For more information, please contact Mark Schneider at (203) 688-2577 or [mark.schneider@ynhh.org](mailto:mark.schneider@ynhh.org).



**Mental Health Aspects of Emergencies and Disasters for Non-Mental Health Professionals (EM 230)** is currently under review on the YNHHS-CoE LMS and is expected to be available later this month. This 50-minute course will train health professionals in the recognition, treatment and referral of patients exhibiting behavioral health consequences related to public health emergencies and will incorporate brief video vignettes to enhance the learner experience. For more information, please contact Mark Schneider at (203) 688-2577 or [mark.schneider@ynhh.org](mailto:mark.schneider@ynhh.org).

- As part of compliance with the National Incident Management System (NIMS), organizations are required to document completion of FEMA- sponsored incident management training or its equivalent by all staff. In order to facilitate compliance by healthcare organizations, YNHHS-CoE is working on incorporating the FEMA training objectives into EM 103, currently a requirement for all YNHHS-CoE staff and recommended by the State of Connecticut Department of Public Health for other healthcare organizations in Connecticut. Additional objectives targeted to staff at the supervisory level and above are being incorporated into EM 140, Incident Command Systems for Healthcare. YNHHS-CoE will develop recommendations for which hospital staff should be required to take this intermediate-level course. For more information, please contact Elaine Forte at (203) 688-3391 or [elaine.forte@ynhh.org](mailto:elaine.forte@ynhh.org).

## Upcoming Meetings and Events

DATE	TIME	EVENT	LOCATION
5.4.06	8:30 a.m. to 10:30 a.m.	Southern Tier Meeting	Connecticut Hospital Association

## Upcoming Training and Education

DATE	TIME	EVENT	LOCATION
5.2.06	1:00 p.m. to 2:00 p.m. EST	Crisis and Emergency Risk Communication Sponsored by the CDC	To participate, please call (800) 369-1619 Passcode: Risk Communication  Slides for this call can be found at: <a href="http://www.dlnets.com/ntpi_26Apr06.htm">http://www.dlnets.com/ntpi_26Apr06.htm</a> .
5.16.06-5.18.06	8:00 a.m. to 5:00 p.m.	Emergency Response to Domestic Biological Incidents  Sponsored by the RI Emergency Management Agency	Radisson Airport Hotel, 2081 Post Road, Warwick, RI  To register, please visit <a href="http://www.yalenewhavenhealth.org/emergency/Domestic_Bio_Incidents.pdf">http://www.yalenewhavenhealth.org/emergency/Domestic_Bio_Incidents.pdf</a> .
6.7.06	8:00 a.m. to 4:00 p.m.	Laboratory Professionals Emergency Preparedness Conference  Sponsored by The State of Connecticut Department of Public Health Laboratory and Hartford Hospital Center of Excellence for Bioterrorism and Emergency Preparedness	To register, please visit <a href="http://www.yalenewhavenhealth.org/emergency/links/LabConference.pdf">http://www.yalenewhavenhealth.org/emergency/links/LabConference.pdf</a> .

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