

# THE PREPAREDNESS REPORT

The Center for Emergency Preparedness and Disaster Response

Volume 5, Issue 10 | March 9, 2007

ELEVATED THREAT LEVEL

## APHA Prescription for Pandemic Flu Report: **Updated**



On February 22, 2007, the American Public Health Association (APHA) released "APHA's Prescription for Pandemic Flu". This report discusses public health workforce issues, the role of non-pharmaceutical inventions, medical countermeasures, ensuring access to care, business and occupational health considerations, incorporating mental health into

pandemic flu preparedness and response and ensuring public health leadership. This report places emphasis on pandemic-related business and occupational health concerns. It urges businesses to consider paid sick-leave policies that encourage employees to stay home when they or their family members are contagious during a pandemic. In addition, it urges increased funding for states, localities, hospitals and public health laboratories to expand their capacity to respond to a pandemic flu. For more information, please visit

<http://www.apha.org/about/news/pressreleases/2007/APHA+Releases+Prescription+for+Pandemic+Flu.htm>.

## FDA Panel Endorses the First Avian Flu Vaccine: **Updated**

On February 28, 2007, the US Food and Drug Administration (FDA) health advisors recommended that the nation's first H5N1 influenza vaccine made by Sanofi Pasteur be approved. The vaccine is based on an H5N1 virus isolated from a Vietnamese patient in 2004 and protected 45% of the 91 people in the clinical trial where antibody titers were measured. Sanofi-Pasteur noted that the 45% is a bit misleading since it would be "unethical to infect clinical trial subjects deliberately with the flu that can kill, it is not possible to say accurately how many people the vaccine can save from death or hospitalization." The government has plans to stockpile enough H5N1 vaccines to protect 20 million doctors, nurses, paramedics, laboratory technicians and other emergency workers in a pandemic event. For more information, please visit <http://www.cidrap.umn.edu/cidrap/content/influenza/panflu/news/feb2707vaccine.html>.

## Avian Influenza: **New**

According to the World Health Organization (WHO), the cumulative number of confirmed cases of avian influenza H5N1 as of March 1, 2007, is 277 cases and 167 deaths.



On February 27, 2007, the Ministry of Health in Lao People's Democratic Republic reported the first human case of infection with the H5N1 avian influenza virus. The 15-year-old female was from Vientiane, where she developed influenza-like symptoms on February 10, 2007, and was hospitalized in Vientiane with fever and respiratory symptoms on February 15. She sought medical care in Thailand on February 17 and is currently in Nongkhai public hospital where she remains in stable condition. Samples taken by Lao epidemiologists and Thai clinicians were

tested by the National Institute of Health in Thailand and were positive for H5N1 infection. The Lao Government is also providing samples to a WHO collaborating center for examination. For more information, please visit [http://www.who.int/csr/don/2007\\_02\\_27/en/index.html](http://www.who.int/csr/don/2007_02_27/en/index.html).

To prepare for a bird flu pandemic, the University of Iowa on March 1, 2007, unveiled a new tool to help public health officials better predict when the disease will strike and plan ways to stem its effects. Through collaboration among the University's Colleges of Business and Medicine, the Iowa Health Prediction Market is launching the "Avian Flu Market (AFM)," an information trading and aggregation system to help public health officials around the world collect and analyze information to forecast the timing and extent of a human-to-human bird flu outbreak. The project is supported by a grant from the Robert Wood Johnson Foundation (RWJF). The AFM is a spin-off of the Iowa Electronic Market (IEM), which, since beginning in 1988, has achieved a prediction record that uses alternative research mechanisms. The University of Iowa Health Prediction Market is the first to use these predictive tools in the medical and public health arenas. For more information, please visit <http://www.rwjf.org/newsroom/newsreleasesdetail.jsp?id=10479>.

A special committee of the Institute of Medicine (IOM) is studying questions about the role of equipment such as masks, gowns and gloves in protecting healthcare workers during an influenza pandemic and is expected to release a report in September. The twelve member committee met in Washington, DC, February 22, 2007, to hear from medical experts, manufacturers, government agencies and other groups with a stake in the use of personal protective equipment (PPE). The panel "is looking for ideas to understand and improve the effectiveness of PPE" in a flu pandemic and also examining behavioral factors that affect health workers' use of such equipment, said Debra Berg, MD, director of the Bioterrorism Hospital Preparedness Program at the New York City Department of Health and Mental Hygiene, who attended the Washington meeting. The meeting's formal agenda included panel discussions on the risks to health workers, designing and engineering PPE, individual and institutional issues in the use of PPE, and certification and regulation of PPE. For more information, please visit <http://www.cidrap.umn.edu/cidrap/content/influenza/panflu/news/mar0107iom.html>.

### I INSIDE THIS ISSUE

- 2 17<sup>th</sup> Nuclear Medical Defense Conference
- 2 Radiological Event Training

- 2 New Madrid Fault Line Exercise
- 3 Education and Training

- 4 Preparing for the Next Disaster
- 5 Upcoming Meetings and Events

## Avian Influenza: **New**



On March 6, 2007, the British pharmaceutical company GlaxoSmithKline (GSK) unveiled findings suggesting that its inactivated H5N1 influenza vaccine may protect humans from more than one strain of the virus, which may build a stronger case for pre-pandemic vaccination and spur more countries to consider stockpiling. GSK's vaccine, based on an H5N1 virus collected in Vietnam in 2004, contains a proprietary adjuvant (an immune-stimulating chemical). Adjuvants enable vaccine makers to produce more doses from a limited supply of antigen. "Vaccines that are effective against more than one strain could strengthen the case for building pre-pandemic vaccine stockpiles" said David Stout, president of GSK Pharmaceuticals in the press release, "We believe this vaccine will provide governments with a new option to help protect their populations against the threat of a future human influenza pandemic." To read further, please visit <http://www.cidrap.umn.edu/cidrap/content/influenza/panflu/news/mar0607vaccine.html>.

## The Medical Reserve Corps Strategic Meeting: **New**

On March 2, 2007, a strategic planning meeting for all nine Medical Reserve Corps (MRC) units in Connecticut was held in Hartford, CT. Led by Mary Duley, Hospital Preparedness Program Coordinator for the State of Connecticut Department of Public Health, the participants discussed developing a Connecticut model for a regional approach for the MRC units. Additional speakers included Jennifer Frenette, Region MRC coordinator, Wayne Sandford, the Deputy Commissioner, DEMHS and attorney Brenda Bergeron, legal counsel for DEMHS. To learn more about the Medical Reserve Corps please visit [www.mrc-ynh.org](http://www.mrc-ynh.org) or contact Eugenie Schwartz, RN, MSN at [eugenie.schwartz@ynhh.org](mailto:eugenie.schwartz@ynhh.org).

## Seasonal Influenza: **Updated**



Illustration Credit:  
CDC

From February 18, 2007 to February 24, 2007, widespread seasonal influenza activity was reported by twenty-five states (Alaska, Arkansas, Colorado, Connecticut, Delaware, Georgia, Idaho, Indiana, Iowa, Kansas, Kentucky, Nebraska, New Jersey, New York, North Carolina, North Dakota, Oklahoma, Oregon, South Dakota, Tennessee, Texas, Virginia, Washington, West Virginia and Wisconsin); regional activity was reported by New York City and nineteen states (Arizona, California, Florida, Hawaii, Illinois, Louisiana, Maine, Massachusetts, Michigan, Minnesota, Montana, Nevada, New Hampshire, New Mexico, Ohio, Pennsylvania, South Carolina, Utah and Wyoming); local activity was reported by the District of Columbia and three states (Alabama, Mississippi, and Missouri); and sporadic activity was reported by three states (Maryland, Rhode Island and Vermont). For more information, please visit <http://www.cdc.gov/flu/weekly/>.

- The CDC has released a "Questions and Answers: 2006-2007 Influenza (Flu) Season" report. This report discusses the severity of the 2006-2007 flu season, when the peak flu time is measured, morality information and more. For more information, please visit <http://www.cdc.gov/flu/about/qa/0607season.htm>.

## 17th Nuclear Medical Defense Conference: **New**

Drs. Dainiak and Albanese, of the Yale New Haven Center for Emergency Preparedness and Disaster Response, delivered invited presentations at the 17th Nuclear Medical Defence Conference held, February 28th to March 1st, 2007, at the Institut für Radiobiologie der Bundeswehr, in Munich, Germany. This year's conference hosted over 250 clinicians, research scientists and representatives from military and civilian organizations from 30 countries, who came together to discuss various elements of radiation accident management. Also presented were novel results and insights into various aspects of radiation biology and radiation medicine by prominent scientists in the fields of Hematology, Oncology and Nuclear Medicine. At the conclusion of the conference, Drs. Albanese and Dainiak participated in a consensus workgroup tasked with the development of an educational program for physicians working in 500 European Group for Blood and Marrow Transplant (EBMT) Hospitals. The educational program is intended to instruct physicians how to diagnose and treat patients suffering from radiation overexposures. For more information, please contact Dr. Albanese at (203) 688-3316 or [joseph.albanese@ynhh.org](mailto:joseph.albanese@ynhh.org).

## Responding to a Radiological Event Training for the First Responder – April 3 and 4, 2007: **New**

The State of Connecticut Department of Public Health will host a "Responding to a Radiological Event Training for the First Responder" on April 3 and 4, 2007 in Norwich, CT. This two-day course will include hands-on interactive training along with conventional lecture format. Topics to be addressed include; radiation basics, including types and characteristics of radiation, exposure and radiation measurement, personal protective equipment, physiological and psychological effects of radiation, biosimetry, radioactive sources both natural and man-made, instrumentation types and limitations, site protocols for responding to an incident or investigating a site, communications, and radiological terrorism. This course is offered free of charge and is geared towards first responders in police, fire and emergency medical service organizations. For more information, please visit [http://www.ynhhs.org/emergency/commu/CT\\_DPH\\_Trainingfora1stResponder.pdf](http://www.ynhhs.org/emergency/commu/CT_DPH_Trainingfora1stResponder.pdf).

## Universal Access to Shelters: Draft Guidance: **New**

The Department of Emergency Management and Homeland Security (DEMHS) in conjunction with a number of state and local partners, has developed draft guidelines for municipalities to use in developing and reviewing plans for their local disaster relief shelters. These draft guidelines introduce and promote the concept of "universally accessible disaster relief shelters," which are congregate public shelters that are planned, equipped and operated to meet the sheltering needs of a wide variety of community members, including most people with disabilities and older adults. The goal is to ensure that disaster relief shelters in Connecticut are accessible and usable by all community members who normally live independently so that, wherever possible, families and neighbors can shelter together, and the need for "special" transportation and sheltering arrangements is reduced. For more information, please contact Samantha Kopp at (203) 688-2563 or [samantha.kopp@ynhh.org](mailto:samantha.kopp@ynhh.org). To access this document, please visit <http://www.ct.gov/demhs/cwp/view.asp?Q=332624&A=1911>.

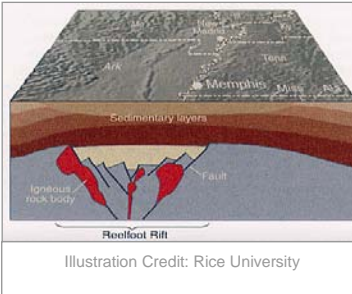
## Education and Training Services: **Updated**

Introduction to Emergency Management with NIMS (EM 103 w/NIMS) and Incident Command Systems for Healthcare (EM 140 w/NIMS) have been approved as compliant by the Department of Homeland Security (DHS) National Incident Management System (NIMS) Integration Center (NIC). These courses are cost-effective, time-efficient and provide a healthcare-focused alternative to required FEMA courses. Together, EM 103 w/NIMS and EM 140 w/NIMS have been approved by the DHS NIC as meeting the required objectives of IS 100, IS 200, IS 700 and IS 800 for healthcare organizations. To access these courses, please visit <http://ynhhs.emergencyeducation.org/>. For more information, please contact Scott Selig at (203) 688-2587 or [scott.selig@ynhh.org](mailto:scott.selig@ynhh.org).

## Education and Training Courses: **Updated**

- **Best Practices for the Protection of Hospital-Based First Receivers (EM 120)** is available at <http://ynhhs.emergencyeducation.org/>. EM 120 is aligned with the Occupational Safety and Health Administration (OSHA) required awareness-level competencies for first receivers. Sample job classifications that will be required to complete EM 120 in order to ensure compliance with OSHA standards include: (1) All employees who work in the emergency department (such as clinicians, housekeeping, security, patient registration, etc.); (2) All employees who are regularly scheduled to be on call for the emergency department; (3) Volunteers and residents assigned to the emergency department; (4) Employees involved in setting up, taking down or maintaining decontamination facilities, regardless of their primary job role and location; (5) Nursing leadership who function as potential nursing administrators on call; (6) All members of the hospital decontamination team. This course is a prerequisite to a series of operations-level courses currently under development and planned for release in March. For more information, please contact Mark Schneider at (203) 688-2577 or [mark.schneider@ynhh.org](mailto:mark.schneider@ynhh.org).

## New Madrid Fault Line Exercise: **New**



Emergency officials across West Tennessee are preparing for a multi-state emergency drill this summer. The exercise, scheduled for June, will test their response in the event of a serious disaster like an earthquake along the New Madrid fault. The seismic area, also known as the Reelfoot Rift, is a series of faults that run along the Arkansas/Tennessee border. A series of earthquakes measuring over 8.0 on the Richter scale hit the area during the winter of 1811 and 1812. The quakes were among the largest in the contiguous United States. Tennessee Emergency Management Agency and officials in 21 West Tennessee counties, as well as their counterparts in

Arkansas, Missouri, Kentucky and Illinois, will be involved. Obion County emergency management director Mike George said communicating without the use of telephones and cell phones could be the biggest difficulty. The county has purchased satellite phones and a new radio system to get ready for the drill and a real emergency. For more information, please visit <http://www.newschannel5.com/Global/story.asp?S=6142126>.

## Education and Training Services: **Updated**

YNH-CEPDR is committed to developing and delivering services that advance healthcare planning, preparedness and response for emergencies and disasters. YNH-CEPDR offers the following services to hospitals, other healthcare delivery organizations, emergency management professionals, the business community and others.

- **ASSESSMENTS:** Hazard Vulnerability Analysis, Business Impact Analysis and Gap Analysis
- **PLANNING:** Emergency management plans, emergency operations plans and business continuity plans
- **EDUCATION and TRAINING:** Course development and course delivery in various modalities (including web-based)
- **DRILLS and EXERCISES:** Design, development, facilitation and evaluation

For more information, please contact Scott Selig at (203) 688-2587 or [scott.selig@ynhh.org](mailto:scott.selig@ynhh.org).

### 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.yalenehavenhealth.org/emergency](http://www.yalenehavenhealth.org/emergency)

## Education and Training Courses: Updated



**Introduction to Emergency Management with NIMS (EM 103 w/NIMS)** is available at <http://ynhhs.emergencyeducation.org/>. Yale New Haven Health System employees should access via the learning management system at <http://www.healthstream.com/hlc/ynhh>. EM 103 w/NIMS has been **certified by the DHS NIMS Integration Center** as meeting the required objectives of IS 100, IS 700 and IS 800 for healthcare organizations and provides awareness-level emergency preparedness training for the healthcare delivery workforce. EM 103 w/NIMS is designed to assist healthcare workers in understanding their role in providing continuous care for existing patients and additional patients in the event of an emergency or a terrorist event. For more information, please contact Mark Schneider at (203) 688-2577 or [mark.schneider@ynhh.org](mailto:mark.schneider@ynhh.org).



**Incident Command Systems (ICS) for Healthcare with NIMS (EM 140 w/NIMS)** is a 50-minute course which offers an introduction to ICS for healthcare workers and is available at <http://ynhhs.emergencyeducation.org/>. Yale New Haven Health System employees should access via the learning management system at <http://www.healthstream.com/hlc/ynhh>. EM 140 w/NIMS has been **certified by the DHS NIMS Integration Center** as meeting the required objectives of IS 200, IS 700 and IS 800 for healthcare organizations. This course describes the ways an ICS can provide a consistent approach to command, control and coordination of all efforts aimed at protecting life, preserving property, supporting the emergency response and stabilizing the operations of a healthcare site during an emergency or disaster. For more information, please contact Mark Schneider at (203) 688-2577 or [mark.schneider@ynhh.org](mailto:mark.schneider@ynhh.org).



**Best Practices for the Protection of Healthcare-Based First Receivers, Operations Level (EM 220)** is a four-hour online course followed by a four-hour hands-on training. EM 220 is designed to advance healthcare workers from the awareness level to the operations level of training for hospital-based decontamination teams. Prior to enrolling in this operations-level course, participants are required to have successfully completed the awareness-level course, EM 120. EM 220 is recommended for healthcare workers with roles in their facility's decontamination process including medical practitioners (MD/DO, PA, NP), nurses (RN, LPN), allied health (ED techs, nurses aides, etc.), maintenance staff, environmental services staff, facilities staff, engineering staff, security and outside contractors. This course prepares healthcare workers to identify possible risks associated with unannounced patients and to fulfill specific roles in the decontamination process and trains healthcare workers to properly use protective equipment. This course adheres to Occupational Health and Safety Administration (OSHA) Standard 29 CFR 1910.120 and the Best Practices for Hospital-Based First Receivers of Patients, which was a result of the OSHA revisions of February 2005 to address the concerns of hospital responders. EM 220 is planned for release in March. For more information, please contact Mark Schneider at (203) 688-2577 or [mark.schneider@ynhh.org](mailto:mark.schneider@ynhh.org).

## Safe and Resilient Hospitals; Preparing for the Next Disaster: Updated

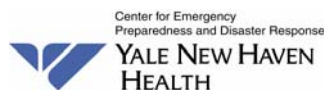


How well do you think your hospital would withstand a large-scale disaster? Would you be able to continue to fulfill your mission to provide ongoing healthcare to your community, or would your organization be yet another victim of the disaster? How does one define a "Prepared/Resilient Hospital", and what are some approaches that hospitals can take to become prepared?

Work has begun through various groups around the world to define guidelines and associated benchmarks for various aspects of healthcare emergency preparedness. However, much remains to be done to provide healthcare organizations with consistent and practical tools that can be used to objectively measure their level of preparedness, regardless of location, culture and population. Equally important is developing recommendations and flexible solutions that can be readily implemented by organizations of various sizes and with other unique characteristics to address identified preparedness gaps and incorporate evidence-based, best practices learned from disaster research. **As an experienced healthcare leader, you will want to be a part of this international benchmarking and implementation process.**

Please join Joint Commission International, the Pan American Health Organization and the Yale New Haven Center for Emergency Preparedness and Disaster Response at the 15<sup>th</sup> World Congress for Disaster and Emergency Medicine as we lead a two-day working session focused on: (1) reaching consensus on 5 key hospital emergency preparedness guidelines; (2) developing a framework for meeting those guidelines through the identification of measurable benchmarks; (3) identifying evidence-based, best practice approaches to guide healthcare preparedness activities; and (4) establishing a process to engage healthcare delivery experts in benchmarking for emergency preparedness. The work completed by the workshop participants will be published and your participation cited.

Register for the Congress and this unique workshop at [http://www.ynhhs.org/emergency/hospital\\_prepared.pdf](http://www.ynhhs.org/emergency/hospital_prepared.pdf) and receive the early bird discount! More information on the Congress may be found at [www.wcdem2007.org](http://www.wcdem2007.org). Don't miss this opportunity. Register today!



Upcoming Meetings and Events

DATE	TIME	EVENT	LOCATION
3.13.07	8:30 a.m. to 9:30 a.m.	Statewide Interhospital Working Group	Connecticut Hospital Association
3.13.07	9:30 a.m. to 10:30 a.m.	Southern Tier Meeting	Connecticut Hospital Association

Upcoming Training and Education

DATE	TIME	EVENT	LOCATION
3.22.07	3:00 p.m. to 5:00 p.m.	Psychology of Terrorism and Psychological Counterterrorism: 7 Things You Must Know <i>Sponsored by the Alabama Department of Public Health</i>	To register for this call, please visit <a href="http://www.adph.org/alphnt/vcomm.asp?action=conflistone&amp;templatename=3&amp;deptid=143&amp;templateid=1252">http://www.adph.org/alphnt/vcomm.asp?action=conflistone&amp;templatename=3&amp;deptid=143&amp;templateid=1252</a> .
4.3.07 and 4.4.07	8:30 a.m. to 4:00 p.m.	Responding to a Radiological Event Training for the First Responder  Sponsored by the State of Connecticut Department of Public Health	For more information, please visit <a href="http://www.ynhhs.org/emergency/commu/CT_DPH_Trainingfora1stResponder.pdf">http://www.ynhhs.org/emergency/commu/CT_DPH_Trainingfora1stResponder.pdf</a> .

FOR MORE INFORMATION, PLEASE CONTACT:

<b>Christopher M. Cannon</b> National Director (203) 688-3224 <a href="mailto:christopher.cannon@ynhh.org">christopher.cannon@ynhh.org</a>	<b>Elaine Forte</b> Deputy Director (203) 688-3391 <a href="mailto:elaine.forte@ynhh.org">elaine.forte@ynhh.org</a>	<b>Louise-Marie Dembry, MD</b> Associate Medical Director (203) 688-4634 <a href="mailto:louise-marie.dembry@ynhh.org">louise-marie.dembry@ynhh.org</a>	<b>Mark Schneider</b> Program Manager, Education and Training (203) 688-2577 <a href="mailto:mark.schneider@ynhh.org">mark.schneider@ynhh.org</a>
<b>James Paturas</b> Deputy Director (203) 688-3496 <a href="mailto:james.paturas@ynhh.org">james.paturas@ynhh.org</a>	<b>Anthony Tomassoni, MD</b> Medical Director (203) 688-3224 <a href="mailto:anthony.tomassoni@ynhh.org">anthony.tomassoni@ynhh.org</a>	<b>Carol Luddy, RN</b> ECP Coordinator (203) 688-5544 <a href="mailto:carol.luddy@ynhh.org">carol.luddy@ynhh.org</a>	<b>Scott Selig</b> Program Manager, Network Development (203) 688-2587 <a href="mailto:scott.selig@ynhh.org">scott.selig@ynhh.org</a>
Preparedness Report Archive: <a href="http://www.yalenehavenhealth.org/emergency/commu/archives.html">http://www.yalenehavenhealth.org/emergency/commu/archives.html</a>			
One Church Street, 5 <sup>th</sup> Floor • New Haven, CT 06510 • Tel. (203) 688-3224 • Fax (203) 688-4618 <a href="mailto:center@ynhh.org">center@ynhh.org</a> • <a href="http://www.yalenehavenhealth.org/emergency">www.yalenehavenhealth.org/emergency</a>			