

# THE PREPAREDNESS REPORT

The Center for Emergency Preparedness and Disaster Response

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ELEVATED THREAT LEVEL

## Best Practices Database for Pandemic Flu: **New**



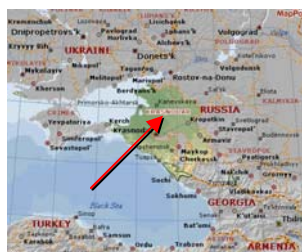
PandemicPractices.org is a new web resource designed to give local communities access to peer reviewed best practices in pandemic flu planning, to assist them with building and improving their own plans. The site, developed by the University of Minnesota Center for Infectious Disease Research and Policy (CIDRAP) and the Pew Center on the States, currently offers a database of 130 "best practices" in three key areas related to pandemic flu preparation and management: altering standards of care, effective communications, and delaying/reducing the impact of a pandemic. Each practice has been peer reviewed by a group of 27 experts, and comments from the reviewers are included with each resource. Developers hope that the database will encourage the widespread adoption of innovative and successful approaches to pandemic planning. The database links to information on practices from 4 countries and 22 states, with more links and information to be added in the future. Read the full story at <http://www.cidrap.umn.edu/cidrap/content/infuenza/panflu/news/sep2407practices.html>. Visit the website at <http://www.pandemicpractices.org>.

## Radiological/Biodosimetry: **New**

Accurate radiation dose measurements in persons overexposed to ionizing radiation is important for effective medical management of radiation injury. To date, the dicentric assay, a laboratory test based on chromosome analysis, is the internationally recognized method of choice for assessing radiation injury. While robust, this "gold standard" methodology is time consuming (i.e., requiring 4 to 5 days) and resource intense. In a publication in this month's issue of Radiation Measurements (Radiat Meas 42:1138-1142), Dr. Albanese and colleagues describe on-going efforts by YNH-CEPDR, in collaboration with the State of Connecticut, to build clinical laboratory surge capacity in the event of a radiological disaster where hundreds of individuals may require testing. The article entitled "Building Connecticut's clinical biodosimetry laboratory surge capacity to mitigate the health consequences of radiological and nuclear disasters: A collaborative approach between the state biodosimetry laboratory and Connecticut's medical infrastructure," may be accessed through <http://dx.doi.org/10.1016/j.radmeas.2007.05.002>. For more information on the Biodosimetry Laboratory or its training programs, please contact Dr. Joseph Albanese by telephone at (203) 688-3316 or by email at [Joseph.Albanese@yhnn.org](mailto:Joseph.Albanese@yhnn.org) or Virginia Kristie by telephone at (860) 545-1213 or by email at [vkristie@harthosp.org](mailto:vkristie@harthosp.org).

## Avian Influenza: **New**

According to the World Health Organization (WHO), the cumulative number of confirmed cases of avian influenza H5N1 as of September 10, 2007 is 328 cases and 200 deaths.



On September 26, 2007, health authorities in Russia said that over 170,000 birds have been culled in the Krasnodar Territory in southern Russia following an outbreak of avian influenza H5N1 at a poultry farm. An additional 77,500 birds will also be destroyed in an effort to contain the outbreak. To read this article in full, please visit <http://209.190.25.146/viewNews.php?id=1138>.

- In Bangladesh's northern Bogra district, it was reported on September 25, 2007 that about 6,000 chickens were destroyed after it was confirmed that birds that died earlier had been infected with the avian influenza H5N1 virus. To read this release in full, please visit <http://209.190.25.146/viewNews.php?id=1137>.

## DHS Largest Counterterrorism Exercise to Date: TOPOFF 4: **New**



On September 24, 2007, the US Department of Homeland Security (DHS) announced it will conduct the largest counterterrorism exercise to date on October 15-19 in Arizona and Oregon. Top Officials 4 (TOPOFF 4) involves several federal agencies and governments from Australia, Canada and the United Kingdom. Homeland Security Secretary Michael Chertoff said "Exercises like TOPOFF help test response capabilities at all levels, strengthen national preparedness and deepen international coordination" and also reinforcing "that we are in a period of increased risk". The full-scale exercise will involve a simulated response to radiological dispersal device attacks (National Planning Scenario 11) with over 15,000 participants from all levels of government, international partners and private sector, and will focus on prevention, intelligence/investigation, incident management, public information and evaluation. To read the DHS press release in full and to access a link for more information about TOPOFF 4, please visit [http://www.dhs.gov/xnews/releases/pr\\_1190667427078.shtm](http://www.dhs.gov/xnews/releases/pr_1190667427078.shtm).

## Connecticut Pandemic Influenza Public Education Campaign: **New**

With the statement that "While no one knows for sure when a pandemic will strike, we know that pandemics do happen. Fortunately, we can take steps now to prepare for this potential public health crisis", Governor M. Jodi Rell of Connecticut announced on September 23, 2007 that a public education campaign is underway to encourage Connecticut residents to prepare for a possible pandemic influenza. The press release outlined steps everyone should consider to prepare for a pandemic, including becoming more diligent about good hygiene, improving overall personal health and creating a preparedness plan. To read the press release in full and learn more about the public education campaign, please visit <http://www.ct.gov/governorrell/cwp/view.asp?Q=396184&A=2791>.

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## US DHHS Region I (New England) Emergency Planning Office (Office of the Assistant Secretary for Preparedness and Response – ASPR)

**Flu Stafford Act Reimbursement:** A memorandum available on the Federal Emergency Management Agency (FEMA) Web site describes FEMA's policy for Stafford Act reimbursement for pandemic influenza. The document, titled "Disaster Assistance Policy 9523.17: Emergency Assistance for Human Influenza Pandemic," is dated March 31, 2007, and outlines the legal mechanisms, triggers, and areas of eligibility for reimbursement following a pandemic. The Association of State and Territorial Health Officials (ASTHO) is currently examining the policy for its implications for state health agencies. To access the memorandum, please visit [http://www.fema.gov/government/grant/pa/9523\\_17.shtm](http://www.fema.gov/government/grant/pa/9523_17.shtm).

The following resources are identified to assist your preparedness activities:

### New/Highlighted Resources:

A new, electronic newsletter focusing on emergency preparedness and response is now available for health educators. "Emergency Preparedness and Response News U Can Use" is produced biweekly by the Society for Public Health Education (SOPHE). If you are interested in receiving the newsletter list or to learn more about what SOPHE is doing related to emergency preparedness and response, please contact Tanya Maslak at [tmaslak@sophe.org](mailto:tmaslak@sophe.org).

Retention and Recruitment for the Volunteer Emergency Services Challenges and Solutions. U.S. Fire Administration, May 2007: <http://www.usfa.dhs.gov/downloads/pdf/publications/fa-310.pdf>

Planning for a Possible Influenza Pandemic – A Framework for Planners Preparing to Manage Deaths. United Kingdom: [http://www.ukresilience.info/news/manage\\_deaths\\_guidance.aspx](http://www.ukresilience.info/news/manage_deaths_guidance.aspx)

Center for Domestic Preparedness Training Site, Anniston, Alabama, Medical Training Courses: <https://cdp.dhs.gov/resident/healthcare.html> (Courses offered and for the most part fully funded by the federal government)

ICS All Hazard Core Competencies, FEMA: [http://www.fema.gov/emergency/nims/ics\\_comp\\_etencies.shtm](http://www.fema.gov/emergency/nims/ics_comp_etencies.shtm)

## Disasters around the World: **New**



Vietnam Bridge Collapse  
Credit: REUTERS/Kham (Vietnam)

On September 26, 2007, 43 people were killed when the section of a bridge under construction across the Hau River in Can Tho, Vietnam collapsed. An additional 87 people were hurt when the almost 100 feet tall section collapsed over land, overwhelming local hospitals who had to request surgeons from neighboring cities, including Ho Chi Minh City. The cause of the collapse is under investigation. To read this article in full, please visit

[http://hosted.ap.org/dynamic/stories/V/VIETNAM\\_BRIDGE\\_COLLAPSE?SITE=NYONI&SECTION=HOME&TEMPLATE=DEFAULT](http://hosted.ap.org/dynamic/stories/V/VIETNAM_BRIDGE_COLLAPSE?SITE=NYONI&SECTION=HOME&TEMPLATE=DEFAULT).

- Incident command can be used to provide management over various resources. The management of logistics over a large area is important to priority setting in a large-scale event. Use of incident command can help decide who to evacuate, what property to protect, what types of people and resources are required, healthcare concerns and more. Incident Command for Hospitals, HICS IV, was recently updated by the California Emergency Medical Services Authority. The update not only ensures compliance with the National Incident Management System (NIMS) but cross communication between multiple agencies and jurisdictions in the event of an emergency such as the Los Angeles wildfire. YNH-CEPDR has developed workshops that discuss the HICS IV organizational chart, job action sheets and forms as well as provide an overall context for implementation. For more information on how your hospital or healthcare organization can receive HICS IV training, please contact Kimberly Spaulding at (203) 688-4482 or [kimberly.spaulding@ynhh.org](mailto:kimberly.spaulding@ynhh.org).

## Additional Anthrax Vaccine Stockpiled by

### HHSNew: **New**

In an effort to increase preparedness against the threat of anthrax attack, the US Department of Health and Human Services has purchased an additional 18.75 million doses of BioThrax, an anthrax vaccine. The vaccine, along with an "already substantial supply of antibiotics" is the nation's "first line of defense against an anthrax attack," said Assistant Secretary for Preparedness and Response, RADM Craig Vanderwagen, M.D., USPHS. The purchase will allow HHS to maintain a stockpile of at least 10 million doses of anthrax vaccine through 2011. For more information visit:

<http://www.hhs.gov/news/press/2007pres/09/pr20070926a.html>.

## Institute of Medicine Committee Recommends

### Strategies to Improve Pandemic Preparedness: **New**



Courtesy of FEMA

Following a study on Personal Protective Equipment (PPE) use in a pandemic flu, the Institute of Medicine (IOM) has recommended three key steps to improve the safety of healthcare workers during a pandemic. In a peer reviewed report, the committee concluded that more research on influenza transmission, increased use of PPE by healthcare workers, and improvements in PPE design, testing and certification would result in significant improvements to the nation's pandemic readiness. Specific recommendations included having the US

Department of Health and Human Services (HHS) lead a global research effort to understand the transmission and prevention of seasonal and avian influenza, having institutions promote a "culture of safety" regarding PPE use by their employees, and improving the design, testing and certification process for PPE products. Although not the focus of their study, the committee also addressed family protection, noting that designing respirators that do not require fit testing and making them available to the public would also be beneficial. Read the full article from CIDRAP at:

<http://www.cidrap.umn.edu/cidrap/content/influenza/panflu/news/sep2607ppe.html>.

## Nasal Influenza Vaccine for Children Approved by FDA

The US Food and Drug Administration (FDA) announced on September 19, 2007, that it has approved expanded use of the nasal influenza vaccine FluMist to children between the ages of 2 and 5. The vaccine was previously approved for use in children 5 years or older (and to adults up to 49 years old). Three studies with about 6,400 children aged 6 to 59 months demonstrated effectiveness in preventing the flu while adverse events were reported to be mild in the form of runny nose and/or nasal congestion and slight fever in children between the age of 2 and 6 years. To read the FDA press release in full, please visit <http://www.fda.gov/bbs/topics/NEWS/2007/NEW01705.html>.

## Emergency Credentialing Program: **New**

### Volunteerism

As of September 27<sup>th</sup>, almost four thousand professionals have enrolled in the State of Connecticut Emergency Credentialing Program for Healthcare Professionals. The individuals have made a commitment to "be there" to support activities related to a manmade or natural disaster anywhere in the State of Connecticut. Despite the fact that many of these professionals are very busy in their own roles, they are cognizant of the fact that in a large and overwhelming incident, "human resources" may be a key asset in disaster response. The Emergency Credentialing Program consists of both pre-credentialed and credentialed hospital disaster volunteers from many disciplines who have offered to respond when a natural or manmade event overwhelms a facility, region or state. Volunteers who agree to assist are given facility and event specific "just-in time" training to help them function in their new setting and are covered for liability and workers' compensation. Please check out our web site at [www.ct-esar-vhp.org](http://www.ct-esar-vhp.org) to see if this program is for you. Enrollment is completed on-line and basic disaster related education is provided. If you have any questions, please feel free to contact us at [ecp@ynhh.org](mailto:ecp@ynhh.org) or call Joseph Filakovsky, DNP, APRN, Emergency Credentialing Program Coordinator at (203) 688-4468.

## CDC Announces Large Supply of Seasonal Flu Vaccine

On September 19, 2007, The Centers for Disease Control and Prevention (CDC) announced that 132 million doses of this year's seasonal flu vaccine have been produced to protect America's population against the flu season that usually starts in November with a peak in February. The government is urging everyone, including those at high risk, to get vaccinated as the seasonal flu infects up to 20% of the population every year, hospitalizing 200,000 and killing 36,000. People over the age of 50 or under 5 years old, anyone with asthma, heart disease, weakened immune systems or other chronic illnesses and pregnant women are considered high risk for seasonal flu. To read this article in full, please visit

[http://hosted.ap.org/dynamic/stories/F/FLU\\_SH\\_OTTS?SITE=AP&SECTION=HOME&TEMPLATE=DEFAULT](http://hosted.ap.org/dynamic/stories/F/FLU_SH_OTTS?SITE=AP&SECTION=HOME&TEMPLATE=DEFAULT).

### Questions, Comments, Suggestions or to Subscribe

For questions, comments, suggestions or to subscribe to the Preparedness Report, please e-mail us at [center@ynhh.org](mailto:center@ynhh.org).  
[www.yalenewhavenhealth.org/emergency](http://www.yalenewhavenhealth.org/emergency)



## National Preparedness Month: **New**

September 2007 is the fourth annual National Preparedness Month. This nationwide initiative is sponsored by the U.S. Department of Homeland Security (DHS) and is designed to encourage Americans to prepare for emergencies. The 2007 National Preparedness Month focuses on back-to-school planning, business preparedness, multicultural preparedness and home and family preparedness. For more information, please visit the DHS National Preparedness Month website at <http://www.ready.gov/america/npm07/index.html>.

The Yale New Haven Center for Emergency Preparedness and Disaster Response (YNH-CEPDR) continues to provide information and support to delivery network personnel related to National Preparedness Month and has been distributing information related to family and individual preparedness at Bridgeport Hospital, Greenwich Hospital and Yale-New Haven Hospital. For more information, please contact Samantha Kopp at (203) 688-2563 or [samantha.kopp@ynhh.org](mailto:samantha.kopp@ynhh.org).

### Stay CALM in an emergency

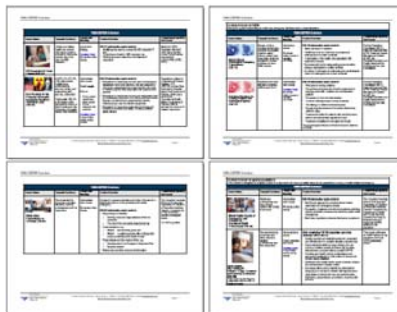


Healthcare workers play an important role in emergency response as healthcare organizations may receive victims of disasters and are perceived as areas of refuge for the general public. Do you know what to do if a disaster arises while you are at work? Remembering the acronym, CALM, can help you through the first few minutes of your disaster response and prepare you to assume your assigned response role in your organization.

- C** *CONTACT* your immediate supervisor for information and instructions
- A** *ASSESS* your personal needs (clothes, money, medications, etc.) and *ARRANGE* for the care of any dependents
- L** *LISTEN* to your immediate supervisor and follow his or her directions
- M** *MANAGE* your assigned response role to the best of your ability

YNH-CEPDR has developed a pocket card that you can carry with you so that, when a disaster strikes, you can remain CALM. For more information on the CALM card and its accompanying stress relief tool, please contact Samantha Kopp at (203) 688-2563 or [samantha.kopp@ynhh.org](mailto:samantha.kopp@ynhh.org).

## Yale New Haven Center for Emergency Preparedness and Disaster Response: Fall 2007 Course Guide



The Yale New Haven Center for Emergency Preparedness and Disaster Response (YNH-CEPDR) develops, delivers and evaluates educational programs designed to prepare the healthcare delivery workforce for effective response to all types of disasters and emergencies. YNH-CEPDR creates and adapts courses for healthcare organizations based on the latest research and developments in emergency response, incorporating national standards and regulations relevant to healthcare emergency preparedness, adhering to industry standards for instructional design and considering the special needs of busy adult learners. To view the new Fall 2007 Course Guide, please visit [http://www.ynhhs.org/emergency/YNH-CEPDR\\_Courses\\_Fall07.pdf](http://www.ynhhs.org/emergency/YNH-CEPDR_Courses_Fall07.pdf). For more information, please contact please contact Mark Schneider at (203) 688-2577 or [mark.schneider@ynhh.org](mailto:mark.schneider@ynhh.org).

## Personal and Family Preparedness: **New**

It's the Calm Before the Storm. Let's Talk Preparedness Plans.

You can do it in 3 Easy Steps:

1. **Make a Plan**
2. **Build a Kit**
3. **Be Informed**

Surveys show that many people do not prepare for an emergency, but nothing could be more important than having a plan to save your and your family's life. In an emergency, every second counts. To learn more or to schedule a talk in your community contact [Eugenie.schwartz@ynhh.org](mailto:Eugenie.schwartz@ynhh.org) or call at (203)-688-2659.

## Anthrax Symptoms in Children



A recent study presents data suggesting that symptoms of anthrax in children may be more varied than previously believed. The study

"Inhalational, Gastrointestinal, and Cutaneous Anthrax in Children. A Systematic Review of Cases: 1900 to 2005" is published in the September issue of *Archives of Pediatrics & Adolescent Medicine* and suggests that children may present a wider range of clinical symptoms not concurrent with symptoms in adult patients and that mortality rates may be higher than what is observed in adult patients. The study also emphasizes that more research is necessary in order to clarify optimized management and treatment of anthrax in children. To read this article in full and to access a link to the study, please visit <http://www.upmc-cbn.org/>.

## Positions Available at YNH-CEPDR



YNH-CEPDR has openings for Network Development Specialist, Regional Education Specialists and a Grant Research Specialist. Please contact Mark Schneider at (203) 688-2577 or [mark.schneider@ynhh.org](mailto:mark.schneider@ynhh.org) for more information, or apply online at <http://www.yalenevhabenhealth.org/info/jobs.html>.

## Joint Commission Resources 3<sup>rd</sup> Annual Emergency Preparedness Conference



Earthquakes, tornados, heat waves, floods, oil spills, fires, nuclear accidents, dirty bombs, pandemic flu, terrorism threats, hurricanes, blackouts, blizzards; the list of disasters is endless – and continues to grow. On average, natural disasters cause 185 deaths per day. The loss of human life, the physical and environmental damages, the disruption to school, homes, business and productivity and the financial impact can be devastating to any community or country. But the impact of many disasters can be sharply reduced if an effort is made to assess risk and develop and test contingency plans for disaster response before it happens, rather than after the damage is done.

Joint Commission Resources (JCR) will present its third annual emergency preparedness conference at the Hilton Alexandria Mark Center in Alexandria, Virginia, on October 10 and 11, 2007. This outstanding program provides attendees with new ideas, concrete tools, tips, checklists and strategies to help them prepare their organizations and jurisdictions for peak performance, self-sufficiency and constant readiness. Once again, JCR is partnering with the Yale New Haven Center for Emergency Preparedness and Disaster Response (YNH-CEPDR) on the scientific abstract session for the conference. Providing a forum for attendees to share their experience and expertise with colleagues from around the country, the abstract session will be even bigger and better than last year, with 25 submissions being selected for poster presentation and two selected for platform presentation during the conference plenary sessions on October 10, 2007. For more information or to register for this conference, please visit <http://www.jcrinc.com/24835/>, or call JCR Customer Service at (877) 223-6866.

## Pandemic Influenza Hospital Preparedness Drills

On September 7, 2007, ten hospitals in Louisiana participated in drills to test if hospitals in the state are ready to respond should an influenza pandemic occur. Nursing students played the roles of individuals presenting flu-like symptoms, while evaluators gathered information, observed and interviewed players and staff. Lessons learned from the drills will assist both the state and hospitals to adjust its emergency preparedness plans. To read more about these drills, please visit

<http://www.theadvertiser.com/apps/pbcs.dll/article?AID=/20070908/NEWS01/709080312/1002>.

## DHS Awards Additional Grants for Radiological/Nuclear Detection

On September 14, 2007, the US Department of Homeland Security (DHS) announced the award of \$3.7 million to Alabama, Florida, Mississippi, North Carolina and the District of Columbia to deploy radiation detection systems at weigh stations throughout the Southeast Corridor. These funds and non-monetary support is part of the Southeast Transportation Corridor Pilot (SETCP) program designed to detect and interdict illicit nuclear and radiological materials on interstate highways and includes training and exercises for state and local participants. To read this release in full, please visit

[http://www.dhs.gov/xnews/releases/pr\\_1189796880249.shtm](http://www.dhs.gov/xnews/releases/pr_1189796880249.shtm).

## Education and Training Services

YNH-CEPDR is committed to developing and delivering effective and scaleable 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 additional information about these services, please contact Kimberly Spaulding at [kimberly.spaulding@ynhh.org](mailto:kimberly.spaulding@ynhh.org) or (203) 688-4482.

## Education and Training Courses



At the request of the Bioterrorism Training and Curriculum Development Program of the HHS, the YNH-CEPDR EM 103 w/NIMS and EM 140 w/NIMS courses were reviewed by the NIMS Integration Center. These courses provide a solution to address elements 9 through 11 of the NIMS Implementation Activities for Hospitals and Healthcare Systems. **These courses meet all of the required objectives defined by the NIMS National Standard Curriculum Training Guidance as demonstrated on the YNH-CEPDR NIMS Competency Crosswalk, which may be accessed at [http://www.ynhhs.com/emergency/YNH\\_CEPDR\\_NIMS\\_CompetencyCrosswalk.pdf](http://www.ynhhs.com/emergency/YNH_CEPDR_NIMS_CompetencyCrosswalk.pdf).** EM 103 w/NIMS and EM 140 w/NIMS were approved as being NIMS compliant for healthcare education and training requirements by the State of Connecticut Department of Public Health and the State of Connecticut Department of Emergency Management and Homeland Security. To download a brochure, please visit [http://www.ynhhs.org/emergency/NIMS\\_Brochure-Final.pdf](http://www.ynhhs.org/emergency/NIMS_Brochure-Final.pdf). For more information, please contact Mark Schneider at (203) 688-2577 or [mark.schneider@ynhh.org](mailto:mark.schneider@ynhh.org).



YNH-CEPDR has developed a strategic partnership with HealthStream to distribute EM 103 w/NIMS and EM 140 w/NIMS. This partnership supports a broader dissemination of these courses as a strategy for hospitals and healthcare systems to become compliant with NIMS education and training requirements. For more information, please contact Mark Schneider at [mark.schneider@ynhh.org](mailto:mark.schneider@ynhh.org).



**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 the course via the learning management system at <https://www.healthstream.com/HLC/Login/Login.aspx?organizationID=6e27bcaa-71bd-db11-bf7b-000423d6b5c1>. EM 103 w/NIMS meets 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 the course via the learning management system at <https://www.healthstream.com/HLC/Login/Login.aspx?organizationID=6e27bcaa-71bd-db11-bf7b-000423d6b5c1>. EM 140 w/NIMS meets 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 coordinate 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, Awareness-Level (EM 120)** is available at <http://ynhhs.emergencyeducation.org/>. Yale New Haven Health System employees should access the course via the learning management system at <https://www.healthstream.com/HLC/Login/Login.aspx?organizationID=6e27bcaa-71bd-db11-bf7b-000423d6b5c1>. EM 120 is aligned with the Occupational Safety and Health Administration (OSHA) required awareness-level competencies for first receivers. Sample job classifications that may 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. For more information, please contact Mark Schneider at (203) 688-2577 or [mark.schneider@ynhh.org](mailto:mark.schneider@ynhh.org).



The online publication *Emerging Infectious Diseases* article entitled "Respirator Donning in Post-Hurricane New Orleans" states that "An observational study of 62 healthcare workers in three California hospitals found that 40 (65%) improperly put on N95 FF respirators before entering the room of a patient in isolation for tuberculosis," <http://www.cdc.gov/eid/content/13/5/700.htm>. Properly fit personal protective equipment can help control the spread of airborne infections including pandemic influenza. YNH-CEPDR is currently developing **N95 Respirator Fit Tester Training (EM 122)**. This 20-minute online course provides an in-depth look at the fit testing process used to test the seal of the N95 respirator and meets OSHA fit-testing requirements. The N95 respirator is worn by healthcare workers treating patients with infectious airborne diseases, including pandemic influenza. This course is designed to provide just-in-time training to healthcare workers that must perform fit tests. The use of text and video combined with a cue card, available to print, gives fit testers a more robust learning experience and a useful job aid. The anticipated release is the fall of 2007. 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 healthcare-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 fulfill specific roles in the decontamination process and trains healthcare workers to properly use protective equipment. It meets OSHA Standard 29 CFR 1910.120 and the Best Practices for Healthcare-Based First Receivers of Patients, which was a result of the OSHA revisions of February 2005 to address concerns of hospital responders. For more information, please contact Mark Schneider at (203) 688-2577 or [mark.schneider@ynhh.org](mailto:mark.schneider@ynhh.org).

## UPCOMING

### Upcoming Meetings and Events

DATE	TIME	EVENT	LOCATION
10.10.07 and 10.11.07	<i>Save the Date</i>	Preparing for the Unknown: "Are You Ready?"  <i>Emergency Preparedness Conference Sponsored by Joint Commission Resources (JRC)</i>	For more information, please visit <a href="http://www.jcrinc.com/24835/">http://www.jcrinc.com/24835/</a> .
10.26.07 and 10.27.07	<i>Save the Date</i>	The New England MRC Leadership and Education Conference  <i>Emergency Preparedness Conference Sponsored by Joint Commission Resources (JRC)</i>	For more information, please contact Jennifer Frenette at <a href="mailto:Jennifer.frenette@hhs.gov">Jennifer.frenette@hhs.gov</a> .
11.8.07	<i>Save the Date</i>	Regional Evacuation Summit focusing on cross-border evacuations and best practices  <i>Sponsored by the I-95 Corridor Coalition</i>	Baltimore Convention Center in Baltimore, MD  The I-95 Corridor Coalition website <a href="http://www.i95coalition.org">http://www.i95coalition.org</a> will contain additional information as the event nears.
11.16.07	<i>Save the Date</i>	Public Health Law Symposium: "Limited Health Care Resources: Prioritizing Access In A Community Emergency - A Cross-Border Perspective"  <i>Organized by the University of Buffalo Law School</i>	For more information, please contact the Baldy Center for Law & Social Policy at (716) 645-2102.

## UPCOMING

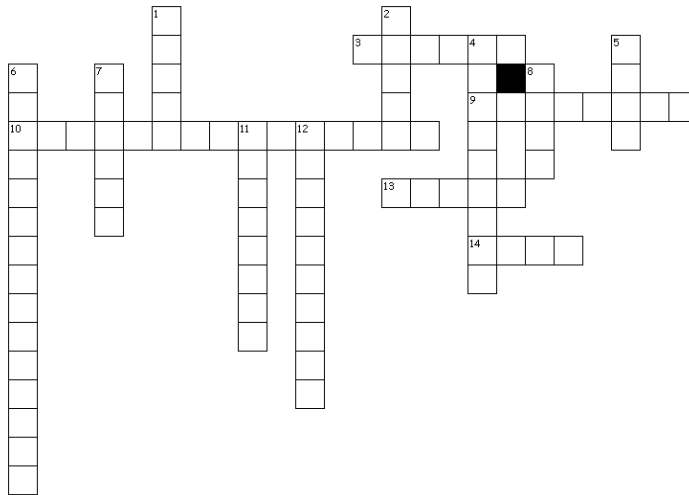
### Upcoming Training and Education

DATE	TIME	EVENT	LOCATION
10.29.07 and 10.30.07	7:30 a.m. to 4:00 p.m.	Emergency Triage Toolbelt: A 2 day Comprehensive Seminar  <i>This continuing nursing education activity is offered by the Northeastern Maine Regional Resource Center</i>	Spectacular Event Center, Bangor, Maine  For more information, please contact Lorraine Solomon at (207) 973-5756 or <a href="mailto:lsolomon@emh.org">lsolomon@emh.org</a> .

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# Emergency Preparedness 101 Crossword Puzzle

Use the clues to complete the crossword puzzle.



## Across

3. Contact, Assess, \_\_\_\_\_, Manage
9. During a fire you should \_\_\_\_\_ horizontally first, then vertically
10. The system utilized by agencies during a disaster
13. The "C" in CHIRP
14. Continuity Of Operations Plan (abbreviation)

## Down

1. \_\_\_\_\_ capacity - the ability to expand patient care capabilities in response to prolonged demand
2. This agent can be made from castor beans
4. In Case of \_\_\_\_\_
5. The "P" in PEACE
6. The agency that regulates hospital Emergency Management Standards
7. The sorting of patients
8. The powered respirator used in Level C PPE
11. A choking agent recognized as a weapon of mass destruction and can be found out in the community
12. National Incident \_\_\_\_\_ System

Created by [Puzzlemaker](#) at [DiscoverySchool.com](#)



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