

THE PREPAREDNESS REPORT

The Center for Emergency Preparedness and Disaster Response

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ELEVATED THREAT LEVEL

Additional Flu Vaccine Approved by FDA: **New**



On September 28, 2007, the US Food and Drug Administration (FDA) announced the approval of Afluria which is a seasonal influenza vaccine intended to protect against influenza type A and B flu viruses and can be used for immunization of people 18 years and older. 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 the FDA press release in full, please visit <http://www.fda.gov/bbs/topics/NEWS/2007/NEW01714.html>.

Not All US Labs with Biohazards Are Tracked: **New**



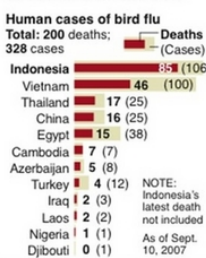
In a Government Accountability Office (GAO) report prepared for the US Congress and made public during a congressional hearing on October 4, 2007, investigators said the US Government is not able to identify every research laboratory that handles dangerous organisms across the United States. 409 monitored laboratories are approved to work with some of the world's deadliest organisms and poisons such as anthrax, avian influenza virus and monkeypox, but laboratories working with organisms such as tuberculosis, meningitis, hepatitis, rabies, SARS, HIV and others are not monitored. The GAO recommends that all laboratories that may be vulnerable to terrorism should be tracked but could not identify any federal agency that would be responsible for monitoring all laboratories. To read this article in full, please visit http://hosted.ap.org/dynamic/stories/D/DANGEROUS_GERMS?SITE=FLMYR&SECTION=HOME&TEMPLATE=DEFAULT.

Avian Influenza: **New**

According to the World Health Organization (WHO), the cumulative number of confirmed cases of avian influenza H5N1 as of October 2, 2007 is 329 cases and 201 deaths.

Bird flu deaths

An Indonesian man died from bird flu in Jakarta, raising the country's death toll from the virus to 86.



SOURCE: World Health Organization AP

On September 28, 2007, a 21-year old male from the Jakarta Province in Indonesia died after being hospitalized 3 days prior with symptoms of avian influenza H5N1. Health authorities in Indonesia confirmed that the death was due to avian influenza H5N1 infection and that the man was an egg seller at a traditional Indonesian market. To read this release in full, please visit http://www.who.int/csr/don/2007_10_02/en/index.html.

The Canadian Food Inspection Agency announced on October 3, 2007, that around 50,000 chickens infected with the highly pathogenic H7N3 strain of avian influenza have been destroyed on a farm in the Regina-area in Saskatchewan. No poultry from the farm were introduced to the food chain and the H7N3 avian influenza virus is not normally associated with serious human illness. To read this release in full, please visit <http://209.190.25.146/viewNews.php?id=1172>.

A research article published in the September 2007 issue of *The Lancet* discusses how the avian influenza H5N1 virus can infect other organs in addition to the lungs following analyses of post-mortem tissues from 2 people infected with the virus. In addition to attacking the lungs, the virus was found in the trachea, lymph nodes and the brain as well as in several organs in a fetus of a pregnant woman infected with the virus. To read this release in full, please visit <http://209.190.25.146/viewNews.php?id=1173>.



NRF Resource Center

National Response Framework: **New**

In September 2007 the US Department of Homeland Security (DHS) released a draft of the National Response Framework (NRF) that will replace the current National Response Plan that was released in 2005. The NRF focuses on providing all-hazard disaster responders with a user-friendly operating structure and details roles and responsibilities across all levels of government and all sectors of communities. The NRF includes recommendations from federal, state, local and tribal governments, non-governmental agencies and associations and the private sector. Supporting documents such as Emergency Support Functions and Support and Incident Annexes have been updated and remain an integral part of the NRF. To read more about the NRF, please visit http://www.dhs.gov/xnews/releases/pr_1189450382144.shtm. You may also want to visit the NRF Resource Center at <http://www.fema.gov/emergency/nrf/>.

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

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.

The following resources are identified to assist your preparedness activities:

New/Highlighted Resources:

A collection of resources for emergency management and specifically medical issues: http://www.ynhhs.org/emergency/US_DHHS_web_sites.pdf.

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.

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

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

Disasters around the World: **New**



South Africa Miners
Credit: AFP/Gianluigi Guercia

On October 3, 2007, more than 3,000 miners were trapped in a gold mine in Carletonville, South Africa, after an air pipe snapped and damaged an elevator used to bring miners to the surface. No casualties were reported as rescuers worked to bring everyone out of the mine. To read this article in full, please visit

http://hosted.ap.org/dynamic/stories/S/SOUTH_AFRICA_MINE?SITE=SCGRE&SECTION=HOME&TEMPLATE=DEFAULT.

At least 19 people were killed when a cargo plane crashed into a crowded neighborhood on October 4, 2007, shortly after taking off from Kinshasa International Airport in Congo. An investigation to determine the cause of the crash of the Russian-made Antonov-26 plane is underway. To read this article in full, please visit http://hosted.ap.org/dynamic/stories/C/CONGO_PLANE_CRASH?SITE=NYWNE&SECTION=HOME&TEMPLATE=DEFAULT.



California Landslide
Credit: AP Photo/XETV

On October 3, 2007, a 60-yard wide landslide in La Jolla, California, forced the evacuation of more than 100 houses and severely damaged a 3-lane road. No injuries were reported as officials had warned residents that the ground was shifting. An investigation continues to identify the cause and magnitude of the shift. To read this article in full, please visit

<http://www.cnn.com/2007/US/10/04/lajolla.landslide/index.html>.

- 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.

Best Practices Database for Pandemic Flu

PandemicPractices.org is a new web resource designed to give local communities access to peer reviewed best practices in pandemic flu planning and 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/influenza/panflu/news/sep2407practices.html>. Visit the website at <http://www.pandemicpractices.org>.

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.
www.yalenehavenhealth.org/emergency

Emergency Credentialing Program

Volunteerism

As of September 27th, almost four thousand professionals have enrolled in the State of Connecticut Emergency Credentialing Program for Healthcare Professionals. These 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 pre-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 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 or call Joseph Flakovsky, DNP, APRN, Emergency Credentialing Program Coordinator at (203) 688-4468.

Connecticut Laboratory Response Network

October Edition of the CT-LRN Newsletter: **New**

The Connecticut Laboratory Response Network (CT-LRN) has published a new edition of their newsletter urging microbiologists to be prepared for the October 2007 Laboratory Preparedness Survey (LPS) and describes the LPS reporting procedure to the State Laboratory. Further information about this can be found in the CT-LRN newsletter by visiting http://www.ynhhs.org/emergency/CT_LRN_October_2007.pdf.

Connecticut Pandemic Influenza Public Education Campaign

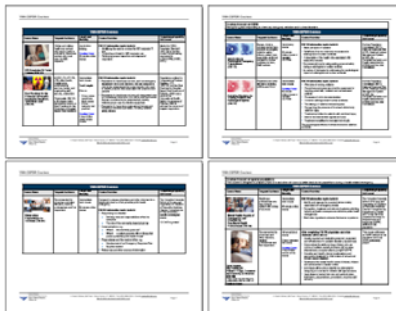
With the statement that "While no one knows for sure when a pandemic will strike, we know that pandemics do happen. Fortunately, we can take steps now to prepare for this potential public health crisis", Governor M. Jodi Rell of Connecticut announced on September 23, 2007 that a public education campaign 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>.

DHS Largest Counterterrorism Exercise to Date: TOPOFF 4



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 reinforced "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.

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. For more information, please contact please contact Mark Schneider at (203) 688-2577 or mark.schneider@ynhh.org.

DHS Announces \$113 Million in Funding for National Preparedness Training Initiatives: **New**

On September 28, 2007, the US Department of Homeland Security (DHS) announced the awarding of over \$113 million in grants to strengthen coordinated training efforts of homeland security preparedness. \$84 million are being awarded to design, develop and deliver training in accordance with DHS guidance and strategies to state and local emergency management and other personnel. This is in addition to over \$98 million awarded earlier this year in Homeland Security National Training Program (HSNTP) grants. Another \$29.1 million is being awarded for innovative training programs addressing high-priority national homeland security training needs as part of the Competitive Training Grant Program (CTGP). For more information and access to a listing of grant award recipients, please visit http://www.dhs.gov/xnews/releases/pr_1191003660041.shtm.

Additional Anthrax Vaccine Stockpiled by HHS

In an effort to increase preparedness against the threat of anthrax attack, the US Department of Health and Human Services (HHS) 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>.

Personal and Family Preparedness

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 or call at (203)-688-2659.

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 for more information, or apply online at <http://www.yalenevhealth.org/info/jobs.html>.

Radiological/Biodosimetry

Accurate radiation dose measurements in persons overexposed to ionizing radiation are 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 the State of Connecticut, in collaboration with YNH-CEPDR, 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 or Virginia Kristie by telephone at (860) 545-1213 or by email at vkristie@harthosp.org.

Joint Commission Resources 3rd 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

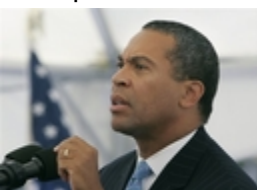
disasters cause 185 deaths per day. The loss of human life, the physical and environmental damages, the disruption to school, homes, business and productivity and the financial impact can be devastating to any community or country. But the impact of many disasters can be sharply reduced if an effort 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.

DHS Awards Grants for Stand-Off Radiation Detector System (SORDS) Demonstrations: **New**

On October 1, 2007, the US Department of Homeland Security (DHS) announced the award of approximately \$33 million to General Electric Global Research, Science Applications International Corporation and the Naval Research Laboratory related to the Stand-Off Radiation Detector System (SORDS) demonstrations. The SORDS program objective is to develop vehicle-sized advanced nuclear detectors with the ability to determine type and location of radiation sources at much greater distances than current technology is able to. A second objective is to minimize false alarms in order to reduce daily security operation interruptions. To read this release in full, please visit http://www.dhs.gov/xnews/releases/pr_1191270633797.shtm.

Massachusetts Unveils Unified Emergency Response Strategy: **New**



MA Governor Deval Patrick
Credit: AP Photo/Charles Krupa

On September 24, 2007, Massachusetts Governor Deval Patrick released a new homeland security plan for the state outlining the need for improved communication among first responders. The plan also stresses the need to streamline cities' and towns response to emergencies by identifying and organizing resources. The plan also calls for a rapid-response unit that will handle chemical, biological, radiological, nuclear and explosive incidents. To read this article in full, please visit http://www.salemnews.com/punews/local_story_268093952.

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 or (203) 688-4482.

Institute of Medicine Committee Recommends Strategies to Improve Pandemic Preparedness

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>.

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.

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. For more information, please contact Mark Schneider at (203) 688-2577 or 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.



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.



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.



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.

Education and Training Courses *(continued)*:



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.



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.

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 lsolomon@emh.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 http://www.jcrinc.com/24835/ .
10.23.07	1:00 p.m. to 2:00 p.m.	Seasonal Influenza Vaccination – Now is the Time! <i>Conference Call Sponsored by CDC Clinician Outreach and Communication Activity (COCA)</i>	For Dial-in Number, Passcode and more information, please visit http://www.bt.cdc.gov/coca/callinfo.asp
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 Jennifer.frenette@hhs.gov .

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