

THE PREPAREDNESS REPORT

The Center for Emergency Preparedness and Disaster Response

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ELEVATED THREAT LEVEL

Yale New Haven Center for Emergency Preparedness and Disaster Response Prepares for Pandemic: **New**

The Yale New Haven Center for Emergency Preparedness and Disaster Response Prepares (YNH-CEPDR) has announced that efforts to prepare for a surge of patients in the event of a pandemic influenza outbreak should be complete by the end of the year. The office is stockpiling material, including medical/surgical supplies, basic and advanced personal protective equipment and pharmaceuticals to ensure protection for patients and staff throughout the Yale New Haven Health System. YNH-CEPDR pre-event planning complies with the Center for Disease Control, Occupational Safety and Health Administration and Joint Commission guidelines for a pandemic. Several pandemic influenza workgroups are working on various aspects of preparation. These groups are addressing issues such as triage, alternative health care facilities, risk communication, human resources, surge capacity and ethical/legal issues. These groups will plan for an anticipated major health crisis and help healthcare professionals and employees prepare as much as possible. For more information, please contact us at (203) 688-3224 or center@ynhh.org.

National Strategy for Public Health and Medical Preparedness: **New**

On October 18, 2007, the White House released Homeland Security Presidential Directive 21 (HSPD 21) establishing a National Strategy for Public Health and Medical Preparedness. The Strategy builds on established principles and is set to transform the country's approach in protecting citizens' health against natural or manmade disasters. The Strategy incorporates biosurveillance, countermeasure stockpiling and distribution, mass casualty care and community resilience as receiving highest priority as they are the most critical components of public health and medical preparedness efforts. A Public Health and Medical Preparedness Task Force has been established and will, within 120 days, submit an implementation plan for the Strategy to the President of the United States and annually submit a status report. The Secretary of Health and Human Services serves as chair for this task force and members are the Secretaries of State, Defense, Agriculture, Commerce, Labor, Transportation, Veterans Affairs and Homeland Security, the Attorney General and Directors of National Intelligence and the Office of Management and Budget. To read HSPD 21 in full, please visit <http://www.whitehouse.gov/news/releases/2007/10/print/20071018-10.html>.

Avian Influenza: **New**

According to the World Health Organization (WHO), the cumulative number of confirmed cases of avian influenza H5N1 as of October 25, 2007, is 332 cases and 204 deaths.

- On October 25, 2007, WHO confirmed the death of a 5-year old girl from the Tangerang District in Indonesia's Banten Province of avian influenza H5N1. The girl died on October 22 after being hospitalized for two days. The investigation into the source of the infection revealed that poultry had died in her neighborhood two weeks before she showed symptoms of illness. The read this release in full, please visit http://www.who.int/csr/don/2007_10_25/en/index.html.



Geese in Duisburg, Germany
Credit: AP Photo/Frank Augstein

In a Food and Agriculture Organization of the United Nations (FAO) news release on October 25, 2007, the agency warned that the avian influenza H5N1 virus could be transmitted to chickens in Europe by domestic ducks and geese. Scientists in Germany discovered the H5N1 virus in healthy ducks, indicating the possibility for domestic animals to harbor the virus without showing any signs of illness. Also included in the release was the urging of increased surveillance of domestic duck and geese populations in Europe and a warning that parts of the region could become the next continent where outbreaks of avian influenza H5N1 become an epidemic. To read this FAO release in full, please visit <http://www.fao.org/newsroom/en/news/2007/1000685/index.html>.



On October 24, 2007, a United Nations (UN) senior specialist said that the world needs to prepare for a potential avian influenza pandemic as the current avian influenza H5N1 virus could transform into a human influenza pandemic. The H5N1 virus is entrenched in five countries, and has spread to 60 countries while remaining largely an animal disease. The news release also reported that the WHO anticipates the 2010 global production capacity of influenza pandemic immunization to be 4.5 billion courses. To read this UN news release in full, please visit <http://www.un.org/apps/news/story.asp?NewsID=24402&Cr=flu&Cr1=#>.

Vaccine Allocations for Pandemic Influenza: **New**

On October 23, 2007, a Federal interagency working group representing all sectors of US Government released a draft report, Draft Guidance on Allocating and Targeting Pandemic Influenza Vaccine, outlining how vaccine supplies would be allocated should a severe influenza pandemic occur in the United States. Under this guidance, allocation of vaccines to states will be in proportion to population and key health and public safety personnel and children will be prioritized to receive vaccinations first. Vaccine will be administered in tiers including four target groups: homeland and national security, healthcare and community support services, critical infrastructures and the general population. The working group is seeking public comments on this draft document that will be considered and contribute to the final guidance. To read the Draft Guidance and to learn more how to submit comments, please visit <http://www.pandemicflu.gov/vaccine/prioritization.html>.

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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.

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**



California Wild Fires
Credit: John Gress/Reuters

On October 24, 2007, a major disaster declaration was issued for the wildfires burning since October 21 in seven California counties. Three people are reported dead due to the wildfires, about 1 million people were evacuated from unsafe areas, 1,800 homes have been destroyed and 490,000 acres have burned. Dry, strong winds helped fuel the fire in an area stretching from Ventura County north of Los Angeles east to the San Bernardino National Forest and south to the US-Mexico border. Investigators suspect that one or more of the fires are the result of arson causing the largest mass evacuation in California history. To read

this article in full, please visit http://hosted.ap.org/dynamic/stories/C/CALIFORNIA_WILDFIRES?SITE=VACUL&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, updated by the California Emergency Medical Services Authority, 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 us at (203) 688-3224 or center@ynhh.org.

Influenza Pandemic Drive-Through Triage



Peter A. D'Souza and Dr. Gregory H. Gilbert
Credit: Dr. Jessica Ngo

During an emergency medicine conference held at Stanford University in California early September 2007, the concept of a drive-through triage system was presented by Drs. Gregory Gilbert and Peter D'Souza. This system is designed to help alleviate strained emergency rooms and hospitals during a pandemic that is likely to cause an overload of patients seeking treatment with a reduced number of staff over a longer period of time. The system will be set up away from the hospital with directional staff and signs sending suspected influenza patients through triage manned by physicians, nurses and other healthcare staff to determine if

home care, hospital admittance or other specialized care is the appropriate next step. To read more about this system, please visit http://www.mdconsult.com/das/news/body/79947160-2/mnfp/0/188769/1.html?nid=188769&WT_mc_id=20071004_twim&date=week&pos=&general=true&mine=true.

Gaps in Pediatric Pandemic Preparedness



On October 17, 2007, the American Academy of Pediatrics (AAP) and Trust for America's Health (TFAH) issued a report identifying gaps in the nation's preparedness planning for treating and caring for children and teens between the ages of 0-19 during a possible influenza pandemic. Key areas of concern included availability of vaccine and medications in child-appropriate doses, management and treatment of pediatric patients, strategies to halt infection in communities and the issue of who will care for this population group should childcare facilities and schools close. The report also found that this age group accounts for almost 46% of avian influenza H5N1 deaths. Specific gaps identified in the report includes the low availability of antivirals for children in the Strategic National Stockpile (SNS); drugs shown to be effective against the H5N1 virus are not licensed for children

under the age of 1; appropriate vaccine would not be available until at least 6 months after start of pandemic; and N95 masks are not produced in children's sizes. The AAP and TFAH provide specific recommendations that call for inclusion of pediatric pandemic preparations at all levels of government pandemic planning, additional studies on vaccines in young children, personal protective equipment (PPE) for children and infection control education in all schools. Additional recommendations and more information may be accessed in the full report at <http://healthyamericans.org/reports/fluchildren/KidsPandemicFlu.pdf>.

Emergency Credentialing Program



EMERGENCY CREDENTIALING PROGRAM
for Healthcare Professionals

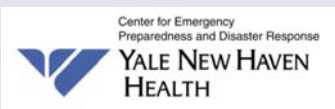


YALE NEW HAVEN HEALTH

Just like the Marine Corps, we are looking for a "few good men and women" to become volunteers in the State of Connecticut Emergency Credentialing Program for Health Care Professionals. Professionals in Medicine, Nursing, Radiology, Physical Therapy, Behavioral Health, Respiratory Therapy as well as many others are needed. This is a program that pre-credentials 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 assist them to function in their new setting, and volunteers 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 contact us at ecp@ynhh.org, or call Joseph Filakovsky, DNP, APRN, Emergency Credentialing Program Coordinator at (203) 688-4468.

Positions Available at YNH-CEPDR



YNH-CEPDR has openings for Network Development Specialists; Drills and Exercises Specialist; Regional Education Specialists; and a Grant Research Specialist. Please contact YNH-CEPDR at (203) 688-3224 or center@ynhh.org for more information, or apply online at <http://www.yalenewhavenhealth.org/info/jobs.html>.

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.yalenewhavenhealth.org/emergency

Prepared for Disaster? Make Your Plan Now: **New**

If you had to flee your house in the next 5 minutes, would you be ready? What can you do to help prepare yourself and your family in case of a disaster? The wildfires in California have reminded us of the importance of preparation. As we have all seen on television, about 1 million people have had to be evacuated from their homes. Make a plan. Build a Kit. Be informed. Do it now when you have time. A few things you can do to get started:

1. Copy your documents
2. Buy a fireproof safe
3. Prepare an emergency kit
4. Talk to your family and develop a family plan

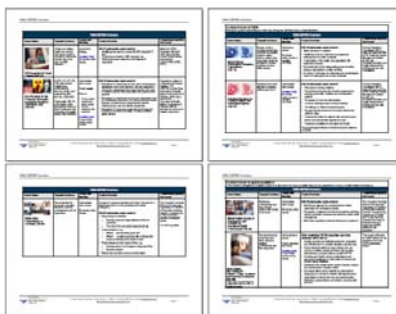
For more information or to schedule a talk about preparedness in your community or for your organization, contact Eugenie Schwartz at (203) 688-2659 or Eugenie.schwartz@ynhh.org.

Joint Commission 2008 Annual Preparedness Conference: **New**



The Joint Commission Resources (JCR) will present its 2008 annual emergency preparedness conference at the Hilton Alexandria Mark Center in Alexandria, Virginia, on April 8 and 9, 2008. The Joint Commission has announced a call for presenters to deliver a 60 or 90 minute live presentation that highlights new processes, technologies, techniques and/or tools, creativity and innovation used within any health care setting for the purpose of meeting any of the four phases of emergency preparedness: mitigation, preparation, response and recovery. **Presentation topic and outline must be submitted by November 30, 2007, to emergprep@jcrinc.com.** For more information or to register for this conference, please contact Leslie LaBelle, RN, MSN, MBA, CPHQ at (630) 792-5435 or emergprep@jcrinc.com.

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



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 the YNH-CEPDR at (203) 688-3224 or center@ynhh.org.

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 YNH-CEPDR at (203) 688-3224 or center@ynhh.org.

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_CompencyCrosswalk.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 us at (203) 688-3224 or center@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 us at (203) 688-3224 or center@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 us at (203) 688-3224 or center@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 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 us at (203) 688-3224 or center@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 us at (203) 688-3224 or center@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 who 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 us at (203) 688-3224 or center@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 us at (203) 688-3224 or center@ynhh.org.

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 Meetings and Events

DATE	TIME	EVENT	LOCATION
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 .
11.3.07	9:00 a.m. to 12:45 p.m.	Healthcare Summit on Emergency Communications, Response and Recovery <i>Sponsored by the Federal Commission's Public Safety and Homeland Security Bureau and US Department of Health and Human Services</i>	Federal Communications Commission 445 12th St., SW Washington, D.C. Commission Meeting Room (TW-C305) Open to the public, admittance limited to available seating. To register please visit http://www.fcc.gov/pshs/summits/healthcare . A live webcast will be available at http://www.fcc.gov/realaudio/ .
11.8.07	9:00 a.m. to 4:00 p.m.	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 For more information, including summit agenda, and to register, please visit http://www.i95coalition.org/PDF/Meetings/CIM/I-95_CC_Regional_Evacuation_Summit_Package_final.doc .
11.12.07, 11.13.07 and 11.14.07	<i>Save the Date</i>	Joint Commission Annual Conference "Organizational Greatness: Actions for Healthcare Excellence" <i>Sponsored by the Joint Commission</i>	Hilton Chicago Chicago, IL For more information, including conference agenda, and to register, please visit http://www.jcinc.com/14493/ .
04.8.08 and 04.09.08	<i>Save the Date</i>	2008 Annual Emergency Preparedness Conference <i>Emergency Preparedness Conference Sponsored by Joint Commission Resources (JRC)</i>	Hilton Alexandria Mark Center Alexandria, VA For more information, please visit http://www.jcinc.com/5/Programs2008/

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Preparedness Report Archive: <http://www.yalenehavenhealth.org/emergency/commu/archives.html>

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