

THE PREPAREDNESS REPORT

The Center for Emergency Preparedness and Disaster Response

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ELEVATED THREAT LEVEL



Gaps in Health System

Preparedness: New Report: **New**

A new report from PricewaterhouseCoopers' Health Research Institute, "Closing the Seams: Developing an Integrated Approach to Health System Disaster Preparedness", identifies gaps in the US healthcare system disaster preparedness. The report found that staff and facility resources are limited, healthcare sector preparedness plans are not adequately coordinated and systems for tracking and communications are incompatible. Key findings of the report include:

- disconnected and sporadic disaster planning with increasing frequency of disasters in the US
- primary care physicians are the least prepared to respond to a disaster
- unity of command is vulnerable on several levels including lack of consensus and communication breakdowns
- resources spent to apply for funding are too high to justify the steadily decreasing level of available federal funds for hospital preparedness
- preparedness benchmarks needs to be developed as there is no common definition and requirements are shifting
- current shortage of medical professionals leaves little time for preparedness training
- no current consensus exists that outlines the most appropriate skills emergency responders should have in emergency preparedness
- there is a lack of systems, staffing and training to effectively distribute stockpiles of supplies and medications
- interoperability standards for technologies used to respond to and recover from a disaster are lacking.

The report also provides recommendations to improve readiness for a disaster that are broken into three sets of strategies:

- 1 - Organizational: altered standards of care, alternate care sites, prioritization of pharmaceuticals and supplies
 - 2 - Community: increase staffing supply and capabilities, develop consistent and actionable plans, create formal mutual aid agreements
 - 3 - Societal: develop disaster leaders and a public culture of preparedness, develop sustainable funding sources
- To view the report in full, please visit <http://pwchealth.com/cgi-local/hregister.cgi?link=req/closingtheseams.pdf>.

Avian Influenza: **New**

According to the World Health Organization (WHO), the cumulative number of confirmed cases of avian influenza H5N1 as of October 31, 2007, is 333 cases and 204 deaths.

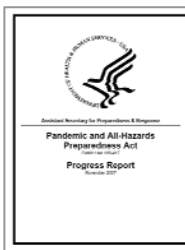


On October 31, 2007, WHO confirmed a new case of human avian influenza H5N1 infection. A 3-year old boy from the Tangerang District in Indonesia's Banten Province became sick on October 14 and has since recovered. The investigation into the source of the infection revealed that poultry had died in the household where the boy lived. To read this release in full, please visit http://www.who.int/csr/don/2007_10_31/en/index.html.

- Researchers at Stony Brook University Medical Center in Long Island, NY, and at the University of Maryland in Baltimore, MD, are conducting a clinical study on an experimental vaccine targeting the avian influenza H5N1 virus. This vaccine differs from earlier H5N1 vaccines in that it is composed of DNA from key surface proteins of H5N1 and is manufactured using genetic technology, not chicken eggs. To read this article in full, please visit <http://www.newsday.com/news/local/suffolk/ny-hsflu315439385oct31.0.6790542.story>.
- On October 31, 2007, a new outbreak of avian influenza H5N1 was confirmed in the Nam Dinh province in Northern Vietnam. A household poultry flock of 400 was culled after more than half of the flock died. The area has also been isolated and disinfected. To read this release in full, please visit <http://209.190.25.146/viewNews.php?id=1315>.

Progress Report: Pandemic and All-Hazards

Preparedness Act: **New**



On October 31, 2007, the US Department of Health and Human Services (HHS) issued a progress report on the Pandemic and All-Hazards Preparedness Act (PAHPA) that was passed in December 2006 with broad implications for preparedness and response activities by the HHS, including the establishment of the Assistant Secretary for Preparedness and Response (ASPR). Activities highlighted in the progress report includes Biomedical Advanced Research and Development Authority (BARDA) and medical countermeasures, domestic and international programs for public health and medical response, grants, at-risk

individuals and National Health Security Strategy. The report also provides a preview of Way Forward which are the activities HHS plans to use in the continued implementation of PAHPA. To read the progress report in full, please visit <http://www.hhs.gov/aspr/conference/pahpa/2007/pahpa-progress-report-102907.pdf>.

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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**



Hurricane Noel
Credit: AFP/Franklin Guerrero

At least 115 people were killed from damages caused by Hurricane Noel that hit the Dominican Republic and Haiti on October 29, 2007 as a tropical storm. The storm damaged about 14,500 homes in the Dominican Republic while close to 2,000 damaged and 745 destroyed homes were reported in Haiti. Rescue workers are not able to reach many communities that are cut off due to widespread flooding and landslides. In Cuba, more than 2,000 homes received flood damage and about 24,000 people were evacuated. The storm hit southeastern parts of the Bahamas on

November 1, bringing over 15 inches of heavy rains leading hundreds of people to evacuate their homes due to flooding. To read this article in full, please visit http://hosted.ap.org/dynamic/stories/T/TROPICAL_WEATHER?SITE=ILMOL&SECTION=HOME&TEMPLATE=DEFAULT.



California Earthquake
Credit: Graphic/Reuters

On October 30, 2007, a 5.6 magnitude earthquake hit the San Francisco Bay area in California, followed by more than 35 smaller aftershocks. No serious injuries or damages were reported. The earthquake originated along the Calaveras Fault which runs along seven major earthquake faults in the region. To read this article in full, please visit

http://hosted.ap.org/dynamic/stories/C/CALIFORNIA_EARTHQUAKE?SITE=PASUN&SECTION=HOME&TEMPLATE=DEFAULT.



Mexico Flooding
Credit: AFP/Gibertoo Villasana

After a week of heavy rains, parts of Mexico are experiencing its worst flooding in 50 years. In the Gulf state of Tabasco it is estimated that 700,000 people had to leave their homes due to damages from flooding. As much as 80% of the state capital, Villahermosa, was under water with services such as drinking water and public transportation shut down. The country's president, Felipe Calderon, said "This is one of the worst natural disasters in the history of the country". To read this article in full, please visit

http://hosted.ap.org/dynamic/stories/M/MEXICO_FLOODING?SITE=ILEDW&SECTION=HOME&TEMPLATE=DEFAULT.

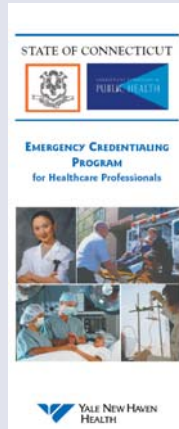
- Incident command can be used to provide management over various resources. The management of logistics over a large area is important to priority setting in a large-scale event. Use of incident command can help decide who to evacuate, what property to protect, what types of people and resources are 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.

Emergency Preparedness Gaps in

Financial Sector: **New**

The US Department of Treasury has announced results of the September 24 through October 12, 2007, exercise conducted to test the country's financial services sector preparedness and response to an influenza pandemic. The results revealed that most of the over 2,700 organizations that were registered for the exercise were not prepared to deal with the consequences of a pandemic and need to improve their all-hazards plans. Participating organizations spanned across the financial sector and included banks and credit unions (62%), security firms (23%), insurance companies (11%) and other groups (4%). The exercise consisted of online simulated outbreak scenarios that were updated weekly with a peak absentee rate of 49%. Participants were asked questions about absenteeism, human resources during a pandemic, business continuity plans and the sectors dependency on services ranging from transportation, energy and telecommunications. At the end of the exercise, only 12% reported that their business continuity plans were very effective, 56% reported they were moderately effective, 28% were minimally effective and 4% reported their plans were not effective at all. A majority of 91% said their business continuity plans would be revised based on lessons learned during the exercise. To read the US Treasury press release in full, including a link to a presentation of the results, please visit <http://www.treasury.gov/press/releases/hp643.htm>.

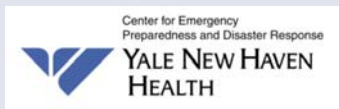
Expect the Unexpected: **New**



The appearance of Tropical Storm Noel in the Caribbean serves to demonstrate that the unexpected can happen at any time. With the unexpected, there is always the possibility of a public health crisis which may tax the resources of an institution or even an entire region, particularly the human resources involved in the care and welfare of the public. A great way to prepare for potential crises is to become a volunteer 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 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

DHS Urges Preparedness in Schools: **New**



The US Department of Homeland Security (DHS) urges schools to prepare for emergencies and on October 30, 2007, DHS released a fact sheet with planning and training resources available to schools in preparing a comprehensive all-hazards emergency preparedness plan that is exercised regularly and includes partnerships with local community leaders and first responders. The resources detailed in the fact sheet include:

- Safe School Initiative
- Protecting Our School's Infrastructure
- Protecting Against Man-Made or Terrorist Incidents
- School Preparedness Training Courses
- Lessons Learned Information Sharing (LLIS)
- DHS "READY" Campaign
- Citizen Corps

The fact sheet also lists the availability of funding and additional resources. To access a complete list of emergency preparedness resources for schools, please visit http://www.dhs.gov/xprevprot/programs/gc_1183486267373.shtm. To read the DHS Fact Sheet: Creating a Culture of Preparedness Among Schools, please visit http://www.dhs.gov/xnews/releases/pr_1193754645157.shtm.

Prepared for Disaster? Make Your Plan Now

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



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.

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

The Yale New Haven Center for Emergency Preparedness and Disaster Response Prepares (YNH-CEPDR) has announced that Yale New Haven Health System (YNHHS) 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. YNHHS is stockpiling material, including medical/surgical supplies, basic and advanced personal protective equipment and pharmaceuticals to ensure protection for patients and staff throughout the YNHHS. YNH-CEPDR pre-event planning complies with the Centers for Disease Control and Prevention, 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

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 identifies biosurveillance, countermeasure stockpiling and distribution, mass casualty care and community resilience as areas of 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>.

Vaccine Allocations for Pandemic Influenza



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>.

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_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 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=6e27bca4-71bd-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.

Education and Training Courses (*continued*):



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 Meetings and Events

DATE	TIME	EVENT	LOCATION
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 .
11.8.07	10:00 a.m. to 11:15 a.m.	<i>Risk Communication & Psycho-Social Issues in Radiation Events</i> <i>Presented by the University of Albany Center for Public Health Preparedness</i>	University at Albany School of Public Health, George Education Center Auditorium University at Albany East Campus Rensselaer, NY Also available as a webcast. Nursing Contact Hours, CHES and CME credits are available upon completion of evaluation and post-test. For more information, including program description, objectives and to register, please visit http://www.ualbanycphp.org/GRS/eventCurrent.cfm?id=96 .
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.jcrinc.com/14493/ .
12.6.07	1:00 p.m. to 2:30 p.m.	Mass Antibiotic Dispensing: Taking Care of Business <i>Strategic National Stockpile (SNS) and Public Health Training Network Satellite Broadcast and Webcast sponsored by the Center for Disease Control and Prevention (CDC)</i>	For more information, including goal, objectives and a link for registration, please visit http://www2a.cdc.gov/PHTN/business/default.asp .

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

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