

THE PREPAREDNESS REPORT

The Center for Emergency Preparedness and Disaster Response

Volume 5, Issue 9 | March 2, 2007

ELEVATED THREAT LEVEL

APHA Prescription for Pandemic Flu Report: **New**



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

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

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

FDA Panel Endorses the First Avian Flu Vaccine: **New**

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

Avian Influenza: **New**

According to the World Health Organization (WHO), the cumulative number of confirmed cases of avian influenza H5N1 as of February 27, 2007, is 275 cases and 167 deaths.



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

tested by the National Institute of Health in Thailand and were positive for H5N1 infection. The Lao Government is also providing samples to a WHO collaborating center for examination. For more information, please visit

http://www.who.int/csr/don/2007_02_27/en/index.html.



In a February 12, 2007 article in *Computer World*, Patrick Thibodeau writes that a flu pandemic could choke the Internet, requiring usage restrictions as an expected surge in online traffic puts teleworking plans at risk. Many companies and government agencies are counting on teleworkers to keep their operations running in the event of an influenza pandemic. But those plans may be untenable as millions of people turn to the Internet for news and even entertainment, potentially producing a bandwidth choking surge in online traffic. According to business continuity planners who gathered at a SunGard Availability Systems site facility in northern New Jersey, such a surge would almost certainly prompt calls to restrict or prioritize traffic, such as blocking video transmissions when possible. To read this article in full, please visit

<http://www.computerworld.com/action/article.do?command=viewArticleBasic&articleId=9011125&pageNumber=2>.



The CDC has updated its "Questions and Answers Avian Influenza" sheet. This sheet contains information about handling feather products, importing pet birds from countries experiencing outbreaks of avian influenza, infection with the H5N1 virus from cleaning a bird feeder and more. For more information, please visit <http://www.cdc.gov/flu/avian/gen-info/qa.htm>.

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Greenwich Hospital Pandemic Influenza Tabletop Exercises: Updated

In February 2007, YNH-CEPDR facilitated two pandemic influenza Tabletop Exercises (TTXs) for staff at Greenwich Hospital. The two sessions were identical in design and were scheduled so that staff from various shifts could participate. Player assignments were made based upon the Hospital Incident Command System command chart. Selected players were asked to serve in positions that they had never previously assumed. Given the low-stress environment of a TTX, players were encouraged to discuss how they would respond to a real world emergency and identify issues that require further development. Players were also advised that this TTX was just one format in which they would be asked to exercise in preparation for a pandemic event and that other exercises were being developed. YNH-CEPDR is planning to facilitate at least one more TTX for Greenwich Hospital staff. For more information, please contact Michael J. Mozzer at (203) 688-2594 or michael.mozzer@ynhh.org.

Pandemic Influenza Workgroups: Updated

The six statewide Connecticut pandemic influenza workgroups established as a result of the Pandemic Influenza Summit include Triage, Alternate Healthcare Facilities, Human Resources, Risk Communications, Surge Capacity and Ethical/Legal Pandemic Influenza Planning. The Triage Workgroup is evaluating triage management, triage leadership and large-scale diagnostic/treatment determination. The Alternate Healthcare Facilities workgroup is reviewing existing New England/NY Pan Flu AHCF state plans. YNH-CEPDR will participate with the Alternate Healthcare Facilities workgroup at the next New England/New York pandemic planning meeting in early March. The Risk Communications Workgroup and the Human Resources workgroup presently work together to address overlapping issues of communication policies and procedures to protect healthcare personnel. The Surge Capacity workgroup is developing recommendations for the purchase of supply pods for hospital stockpiling and budgetary resource management. The Ethical/Legal workgroup is discussing standards of care regarding directives for ventilator, antivirals, beds and personnel and inter-hospital collaboration. For more information, please contact Dr. Kelly Martens at kelly.martens@ynhh.org or Richard Kleindienst, Sr., at richard.kleindienst.sr.@ynhh.org.

Seasonal Influenza: New



From February 11, 2007 to February 17, 2007, widespread seasonal influenza activity was reported by twenty-four states (Alaska, Arkansas, Connecticut, Delaware, Georgia, Idaho, Indiana, Iowa, Kansas, Kentucky, Massachusetts, Nebraska, New York, North Dakota, Oklahoma, Oregon, South Dakota, Tennessee, Texas, Utah, Virginia, Washington, West Virginia and Wisconsin); regional activity was reported by New York City and fourteen states (Alabama, Arizona, California, Colorado, Hawaii, Illinois, Maine, Minnesota, Montana, Nevada, New Jersey, North Carolina, Pennsylvania and South Carolina); local activity was reported by the District of Columbia and ten states (Florida, Louisiana, Maryland, Michigan, Mississippi, Missouri, New Hampshire, New Mexico, Ohio and Wyoming) and sporadic activity was reported by two states (Rhode Island and Vermont). For more information, please visit <http://www.cdc.gov/flu/weekly/>.

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

Emergency Credentialing Program: Updated



One-hour training sessions for Emergency Credentialing Program (ECP) hospital contacts on using the ECP web-enabled volunteer information system is underway. Thus far, feedback on the application's content and ease of use has been positive. Suggestions for improvements or additional enhancements to the application have already been implemented or will be implemented over the next several weeks. Rapid access to volunteer contact information to arrange for additional medical professional resources is a critical component of a medical emergency response during a large scale disaster or public health emergency. It is strongly recommended that at least two individuals from each hospital become familiar with the ECP and the volunteer management database and that these individuals have a designated and defined role in the hospital's emergency management plan. At the time of an event, the database will be available to authorized users in "real-time" mode via the Internet. In anticipation of internet failure, hospital contacts will be asked to regularly download a complete database copy for local (desktop) access using FileMaker™, a user-friendly and widely used database management tool. Note: FileMaker™ does not require user licensing fees or installation. For more information or to schedule your training, please contact Carol Luddy at (203) 688-5544 or carol.luddy@ynhh.org.

Education and Training Services: Updated

- YNH-CEPDR has developed a series of emergency preparedness courses and workshops designed to prepare healthcare workers in community health centers for their roles in disaster response. These instructor-led sessions combine didactic lecture and group exercises that address topics including triage, personal protective equipment, infection control, risk communications and incident command. The course objectives ensure compliance with NIMS training requirements. These courses may be further adapted to better meet the needs of other healthcare delivery organizations such as home health agencies and skilled nursing facilities. For more information, please contact Mark Schneider at (203) 688-2577 or mark.schneider@ynhh.org.
- YNH-CEPDR is committed to developing and delivering services that advance healthcare planning, preparedness and response for emergencies and disasters. YNH-CEPDR offers the following services to hospitals, other healthcare delivery organizations, emergency management professionals, the business community and others.
 - **ASSESSMENTS:** Hazard Vulnerability Analysis, Business Impact Analysis and Gap Analysis
 - **PLANNING:** Emergency management plans, emergency operations plans and business continuity plans
 - **EDUCATION and TRAINING:** Course development and course delivery in various modalities (including web-based)
 - **DRILLS and EXERCISES:** Design, development, facilitation and evaluation

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

Education and Training Services: Updated

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

Education and Training Courses: Updated

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

Education and Training Courses: Updated



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



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



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

Questions or Comments

Questions, comments or suggestions should be forwarded by fax to (203) 688-4618 or by e-mail to center@ynhh.org www.yalenewhavenhealth.org/emergency

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

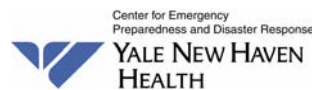


How well do you think your hospital would withstand a large-scale disaster? Would you be able to continue to fulfill your mission to provide ongoing healthcare to your community, or would your organization be yet another victim of the disaster? How does one define a "Prepared/Resilient Hospital", and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

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

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

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



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

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Upcoming Meetings and Events

DATE	TIME	EVENT	LOCATION
3.7.07	1:00 a.m. to 3:00 p.m.	Quarterly NEPHERET Meeting	Providence, RI For more information, please contact Rebecca Chestnutt, (203) 688-2656 or rebecca.chestnutt@ynhh.org
3.13.07	8:30 a.m. to 9:30 a.m.	Statewide Interhospital Working Group	Connecticut Hospital Association
3.13.07	9:30 a.m. to 10:30 a.m.	Southern Tier Meeting	Connecticut Hospital Association

Upcoming Training and Education

DATE	TIME	EVENT	LOCATION
3.22.07	3:00 p.m. to 5:00 p.m.	Psychology of Terrorism and Psychological Counterterrorism: 7 Things You Must Know <i>Sponsored by the Alabama Department of Public Health</i>	To register for this call, please visit http://www.adph.org/alphn/vcomm.asp?action=conflistone&templatenbr=3&deptid=143&templateid=1252 .