

# THE PREPAREDNESS REPORT

The Center for Emergency Preparedness and Disaster Response

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ELEVATED THREAT LEVEL

## Use of MedKits to Augment Rapid Distribution of Antibiotics after Anthrax Attack: **New**

### Clinicians' Biosecurity Network

Clinical information for healthcare providers interested in biosecurity

On March 13, 2008, the Clinician's Biosecurity Network (CBN) reported that following an anthrax attack, many lives could be saved by timely distribution of antibiotics to exposed populations. Today, all states have plans to receive, store and distribute antibiotics from the Strategic National Stockpile (SNS). However, because of the enormous challenges that accompany rapid mass distribution of antibiotics, few localities, if any, are prepared to manage such an undertaking within the required timeframe during an emergency. Therefore, multiple strategies are needed to ensure that the opportunity to save lives is not missed. To learn more about the results of the Emergency MedKits Evaluation Study, the first study to evaluate the feasibility of the current distribution strategy, please visit <http://www.upmc-cbn.org/>.

## FEMA Strengthens Preparedness Levels: **New**



On March 14, 2008, officials from DHS's Federal Emergency Management Agency (FEMA) announced the transfer of specific preparedness administrative and operational authority roles from FEMA Headquarters to the FEMA Regional Administrators. This transfer of responsibilities will significantly enhance FEMA's capability to develop a national preparedness system. This transfer of authority impacts personnel associated with the Radiological Emergency Preparedness Program; Chemical Stockpile Emergency Preparedness Program; Community Preparedness; Assistance to Firefighters Grant program; Continuity of Operations; and Regional Investment Officers. "To meet the responsibilities and follow the tenets of our vision for the new FEMA, we must integrate these programs with those already existing in FEMA and extend their implementation through robust regions to improve stakeholder networks and coordination," said FEMA Administrator David Paulison. For more information, please visit <http://www.fema.gov/news/newsrelease.fema?id=42934>.

## Avian Influenza: **New**

According to the World Health Organization (WHO), the cumulative number of confirmed cases of avian influenza H5N1 as of March 18, 2008, is 373 cases and 236 deaths.



National Institute of Hygiene and Epidemiology  
Credit: AP/Hanoi

On March 18, 2008, the Ministry of Health in Viet Nam announced a new case of human infection of H5N1 avian influenza, which was confirmed by the National Institute of Hygiene and Epidemiology (NIHE). The case is an 11-year old male from Thanh Liem district, Ha Nam province. He developed symptoms on March 4, was hospitalized on March 9 and died on March 14. He had contact with sick and dead poultry prior to his illness. Control measures have been implemented, and close contacts have been identified. All remain healthy and will continue to be monitored. Of the 106 cases confirmed to date in Vietnam, 52 have been fatal. For more information, please visit

[http://www.who.int/csr/don/2008\\_03\\_18/en/index.html](http://www.who.int/csr/don/2008_03_18/en/index.html).

- On March 18, 2008, the Food and Agriculture Organization of the United Nations (FAO) reported that the prevalence of avian influenza in Indonesia remains serious despite containment efforts undertaken by national authorities and the international community. "The human mortality rate from bird flu in Indonesia is the highest in the world and there will be more human cases if we do not focus more on containing the disease at source in animals," said FAO Chief Veterinary Officer Joseph Domenech. Avian influenza has become deeply entrenched in Indonesia with 31 out of 33 provinces infected. The virus is endemic in Java, Sumatra, Bali and southern Sulawesi, with sporadic outbreaks reported from other areas. Since the first outbreaks in 2003, avian influenza has spread rapidly across Java into Bali, Kalimantan and Sumatra. In 2006 the virus spread further east infecting Papua and much of Sulawesi. To learn more about the situation in Indonesia, please visit <http://www.fao.org/newsroom/en/news/2008/1000813/index.html>.
- On March 17, 2008, CIDRAP reported that an Indonesian teenager has been brought forward as a case of simultaneous infection with seasonal and avian strains of influenza; a possibility that health planners have long warned could give rise to a pandemic flu strain. In a paper presented Monday at the International Conference on Emerging Infectious Diseases, Vivi Setiawaty of Indonesia's Center for Biomedical and Pharmaceutical Research and Development described the case of a 16-year-old girl who was tested for flu in Jakarta in April 2007 under a flu-surveillance system established in 2005 by the Indonesian Ministry of Health. "This is the first case-report of a human with both influenza A/H5N1 and H3N2 co-infection," the paper states. "Such infections are of great concern due to the possibility of genetic reassortment leading to the emergence of a H5N1 strain that is more easily transmitted human to human, and emphasizes the importance of advanced laboratory-based surveillance in geographic regions where both human and avian influenza viruses are co-circulating." To read this article in full, please visit <http://www.cidrap.umn.edu/cidrap/content/influenza/panflu/news/mar1708coinfect.html>.
- On March 14, 2008, CIDRAP reported that US DHHS unveiled a comprehensive pandemic influenza guidance document for states with the first of three live web seminars (webinars) designed to assist state officials with planning activities. Introducing the state guidance were William Raub, PhD, science advisor to DHHS Secretary Mike Leavitt and other officials from federal agencies that have central roles in national pandemic planning. The federal role in assisting the states was spelled out in the Bush administration's national pandemic influenza strategy plan, released by the White House's Homeland Security Council in May 2006. DHHS hosted the webinar on the Pandemicflu.gov Web site, where the agency also posted the guidance document and other resources for state planners. The 132-page state guidance document reflects the input of 14 federal departments and includes suggestions received from several states at five regional meetings that were sponsored by the National Governors Association (NGA). For more information, please visit <http://www.cidrap.umn.edu/cidrap/content/influenza/panflu/news/mar1408states.html>.

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

### The Occupational Safety and Health Administration (OSHA) Publication Focuses on Security Personnel

Security personnel (i.e., guards) stand to benefit from a new publication by OSHA entitled **Preparing and Protecting Security Personnel in Emergencies**. This publication addresses emergencies involving hazardous substance releases and provides guidance for employers and their security personnel who may be involved in the emergency response. Printed copies can be obtained by calling OSHA's publications office at (202) 693-1888.

The following resources are identified to assist your preparedness activities:

#### New/Highlighted Resources:

The US National Response Team WMD Subcommittee is proud to announce completion of 25 biological and chemical Quick Reference Guides (QRGs), which are available by visiting [www.nrt.org](http://www.nrt.org) and looking under Hot Topics and Current Events.

March 1888 blizzard along the east coast (over 400 fatalities)  
<http://www.nycsubway.org/articles/1888-blizzard.html>

The Department of Homeland Security (DHS) Selects Schools to Host New Centers of Excellence  
[http://www.dhs.gov/xnews/releases/pr\\_1204061890\\_079.shtm](http://www.dhs.gov/xnews/releases/pr_1204061890_079.shtm)

Emergency Evacuations from Major Cities, Ash Institute for Democratic Governance and Innovation, John F. Kennedy School of Government, Harvard University  
<http://www.innovations.harvard.edu/spotlight.html?id=801&preview=1>

National Disaster Response: FEMA Should Take Action to Improve Capacity and Coordination between Government and Voluntary Sectors. GAO-08-369, February 27.  
<http://www.gao.gov/cgi-bin/getrpt?GAO-08-369>  
Highlights  
<http://www.gao.gov/highlights/d08369high.pdf>

The Great Pandemic, US DHHS, Office of the Public Health Service Historian.  
<http://1918.pandemicflu.gov/>

Congressional Research Service. Homeland Security: Roles and Missions for United States Northern Command  
<http://www.fas.org/sqp/crs/homesecc/RL34342.pdf>

A correspondence course to provide an overview of the new National Response Framework.  
<http://www.training.fema.gov/EMM/eb/IS/IS800b.asp>

## Seasonal Influenza: **New**



During week 10 (March 2 - 8, 2008), influenza activity continued to decrease in the United States. One thousand nine hundred thirty-six (21.6%) specimens tested by WHO and National Respiratory and Enteric Virus Surveillance System (NREVSS) collaborating laboratories were positive for influenza. The proportion of deaths attributed to pneumonia and influenza was above the epidemic threshold for the ninth consecutive week. The

proportion of outpatient visits for influenza-like illness (ILI) was above national baseline levels, while the proportion of outpatient visits for acute respiratory illness (ARI) was below national baseline levels. ILI decreased in eight of the nine regions compared to week 9 and fell below the region-specific baseline in the Mid-Atlantic region but remained above region-specific baselines in the remaining eight regions. The West North Central region reported ARI above its region-specific baseline. Forty-two states reported widespread influenza activity; eight states reported regional influenza activity; the District of Columbia reported local influenza activity; and Puerto Rico reported sporadic influenza activity. For more information, please visit

[http://www.cdc.gov/flu/weekly/?s\\_cid=ccu030308\\_seasonal\\_influenza1\\_e](http://www.cdc.gov/flu/weekly/?s_cid=ccu030308_seasonal_influenza1_e).

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



Deadly Central U.S. Flooding  
Credit: AP Photo/Mark Schiefelbein

On March 19, 2008, the AP reported that flooding forced hundreds of people to flee their homes and closed scores of roads across a wide swath of the nation's midsection as a huge storm system poured as much as 12 inches of rain on the region. Four deaths were linked to the flooding in Missouri, a search was under way in Texas for a teenager washed down a drainage pipe, and two people were missing in Arkansas after their vehicles were swept away by rushing water. The National Weather Service posted flood and flash flood warnings from Texas to Pennsylvania on March 19. For

more information about the severe storm conditions across the United States, please visit [http://www.weather.com/newscenter/topstories/031908\\_missouriflood.html?from=hp\\_news](http://www.weather.com/newscenter/topstories/031908_missouriflood.html?from=hp_news).



Tropical Cyclone Jokwe  
Credit: AFP/NASA/MODIS

On March 17, 2008, IRIN reported that the United Nations' World Food Programme (WFP) will provide emergency food aid for 60,000 people affected by cyclone Jokwe in Mozambique's northern regions. Bonifácio Antonio, director of the relief coordination department of the National Disaster Management Institute (INGC), said at least 13,000 houses were destroyed by the cyclone in the northern provinces of Nampula and Zambezia. "We are still doing our assessments so the numbers in need might increase," he said. Mozambique is yet to recover from floods in January 2008

following heavy seasonal rain in its central provinces in December 2007. The floods displaced over 100,000 people, who were moved to government-designated resettlement areas, according to WFP. To learn more about the aid that WFP is providing to this region, please visit <http://www.irinnews.org/Report.aspx?ReportId=77324>.



Mozambique  
Credit: AFP/Carlos Litulo

On March 10, 2008, the AP reported that at least seven people had been killed by a powerful cyclone that lashed northern and central Mozambique, ripping off roofs and leaving many towns without water or power. Cyclone Jokwe, traveling with winds of up to 125 mph, made landfall on March 8 and continued to move south along the coastline of the southeastern African nation. Joao Ribeiro, director of the National Disasters Management Institute, said four people were killed in the coastal town of Quinga, and three died when a mosque collapsed in the town of Namige. For more

information, please visit [http://hosted.ap.org/dynamic/stories/M/MOZAMBIQUE\\_CYCLONE?SITE=CAGRA&SECTION=HOME&TEMPLATE=DEFAULT](http://hosted.ap.org/dynamic/stories/M/MOZAMBIQUE_CYCLONE?SITE=CAGRA&SECTION=HOME&TEMPLATE=DEFAULT).

### Questions, Comments, Suggestions or to Subscribe

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

## Smallpox Administration Training Classes to be Offered in Connecticut: **New**



Smallpox vaccination capacity is still a very important part of public health and emergency preparedness.

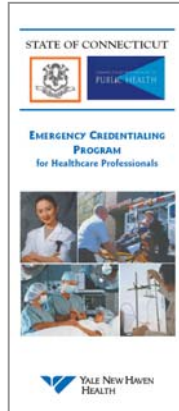
Connecticut's Train-the-Trainer program will be starting up again, with workshops to be held throughout the state and posted on the Upcoming Events Banner on TRAINConnecticut. This training is necessary as the smallpox vaccine is administered using a bifurcated needle, which is distinctive from any other vaccine administration technique. Information regarding the new smallpox vaccine ACAM2000™ will also be included. The training session is designed to prepare licensed healthcare professionals with the ability to administer vaccines to become Smallpox Vaccinator Trainers. This is a two-part training course: Part A is on-line and is a prerequisite to register for Part B, a hands-on workshop. Upon completion of the entire training, participants will be prepared to plan and deliver their own Smallpox Vaccinator Training sessions within their local area or hospital. If you would like to host a hands-on workshop or need support hosting your own workshop, please contact Monica S. Rak, R.N., at (860) 509-7995 or [monica.rak@ct.gov](mailto:monica.rak@ct.gov) for additional information.

## YNH-CEPDR Website Has Changed: **New**



As of April 1, 2008, previews for our online course offerings will be available and will include selected screens from each course, a full outline of the course table of contents and three sample quiz questions. Users with approved access to courses will still have full access to complete versions of their assigned courses, as well as their transcripts and certificates. Those interested in enrolling in the current course offerings may do so by visiting <http://intranet.mis.ynhh.com/ynhhs/oep/educationandtraining.asp>. We are excited to be bringing our users more diverse offerings, as well as other Website improvements in 2008! For more information, please contact us at (203) 688-5000 or [center@ynhh.org](mailto:center@ynhh.org).

## Welcome to Spring: **New**



As we anticipate the end of winter and look forward to spring, our awareness of severe weather, so common at this time of the year, is piqued. The recent tornado that struck downtown Atlanta, while relatively small, had the potential of causing damage and injury on a massive scale in the densely populated area. In the event of unforeseen severe weather, large numbers of casualties could quickly overwhelm hospitals in the area, and resource needs would drastically increase for trained healthcare personnel. The State of Connecticut Emergency Credentialing Program for Healthcare Professionals is a program of both pre-credentialed and credentialed hospital disaster volunteers from many disciplines who have offered to respond when a natural or human-made 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 visit our web site at [www.ct-esar-vhp.org](http://www.ct-esar-vhp.org) to learn more about this program. Enrollment is completed online, and basic disaster related education is provided. If you

have any questions, please contact us at [ecp@ynhh.org](mailto:ecp@ynhh.org), or call Joseph Filakovsky, DNP, APRN, Emergency Credentialing Program Coordinator, at (203) 688-4468.

## Tamiflu Label Updated with Neuropsychiatric Warning

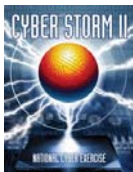


Tamiflu Anti-Virus Capsules  
Credit: REUTERS/Chris Radburn

On March 10, 2008, Roche Laboratories and the Food and Drug Administration (FDA) informed healthcare professionals of neuropsychiatric events associated with the use of Tamiflu® in patients with influenza. The label has been revised as follows: "Influenza can be associated with a variety of neurologic and behavioral symptoms which can include events such as hallucinations, delirium, and abnormal behavior, in some cases resulting in fatal outcomes. These events may occur in the setting of encephalitis or encephalopathy but can occur without obvious severe disease. There have been post marketing reports (mostly from Japan) of delirium and abnormal behavior leading to injury and in some cases resulting in fatal outcomes, in patients with influenza who were receiving Tamiflu®. Since these events were reported voluntarily during clinical practice, estimates of frequency cannot be made, but they appear to be uncommon based on Tamiflu® usage data. These events were reported primarily among pediatric patients and often had an abrupt onset and rapid resolution. The contribution of Tamiflu® to these events has not been established. Patients with influenza should be closely monitored for signs of abnormal behavior. If neuropsychiatric symptoms occur, the risks and benefits of continuing treatment should be evaluated for each patient." For more information, please visit

[http://www.fda.gov/medwatch/safety/2008/safety08.htm#Tamiflu?s\\_cid=ccu031008\\_seasonalnfluenza3\\_e](http://www.fda.gov/medwatch/safety/2008/safety08.htm#Tamiflu?s_cid=ccu031008_seasonalnfluenza3_e).

## The Department of Homeland Security Holds Cyber Storm II Exercise to Further Cyber Security Preparedness



On March 10, 2008, DHS reported that it is conducting the largest cyber security exercise ever organized. Cyber Storm II is being held from March 10-14 in Washington, DC and brings together participants from federal, state and local governments, the private sector and the international community. Cyber Storm II is the second in a series of congressionally mandated exercises that will examine the nation's cyber security preparedness and response capabilities. The exercise will simulate a coordinated cyber attack on information technology, communications, chemical and transportation systems and assets. "Securing cyberspace is vital to maintaining America's strategic interests, public safety, and economic prosperity," said Greg Garcia, Homeland Security Assistant Secretary for Cyber Security and Communications. "Exercises like Cyber Storm II help to ensure that the public and private sectors are prepared for an effective response to attacks against our critical systems and networks." Cyber Storm II will include 18 federal departments and agencies, nine states (CA, CO, DE, IL, MI, NC, PA, TX and VA), five countries (United States, Australia, Canada, New Zealand and the United Kingdom) and more than 40 private sector companies. They include ABB, Inc., Air Products, Cisco, Dow Chemical Company, Harris Corporation, Juniper Networks, McAfee, Microsoft, NeuStar, PPG Industries and Wachovia. To learn more about the objectives of this exercise, please visit

[http://www.dhs.gov/xnews/releases/pr\\_1205180340404.shtm](http://www.dhs.gov/xnews/releases/pr_1205180340404.shtm).

## FEMA Report Shows Mitigation Saves Money



On March 12, 2008, FEMA reported that mitigation work in the Centralia, Washington area after the 1996 floods saved an estimated \$1.9

million in residential home damage in the December 2007 floods. The report, entitled "Evaluating Losses Avoided through Hazard Mitigation: City of Centralia, Washington," evaluated 35 structures that were elevated after the floods of 1996 and 1997 at an average cost of \$29,069 per structure, for a total cost of \$1 million. Investigators from FEMA's Hazard Mitigation branch examined the December 2007 high water marks on each raised home, which were among the most damaged in the 1996 and 1997 floods. This 2007 peak flood stage was then compared to pre-mitigation first floor elevations to derive how much water depth was "avoided" in each home. The investigation found that had the structures not been elevated, the December 2007 flood would have significantly damaged all 35 homes in the study. To learn more about the results contained in this report, please visit <http://www.fema.gov/news/newsrelease.fema?id=42891>.

- On March 12, 2008, FEMA reported that rebuilding stronger and smarter is one of the key lines of defense that residents of the Commonwealth of Kentucky are advised to consider in the aftermath of severe storms and tornadoes that devastated more than a dozen counties February 5-6, 2008. FEMA mitigation specialists are on site at Lowe's Home Improvement stores throughout the commonwealth to educate the public on preparedness and rebuilding after a disaster. Persons interested in learning how they can strengthen the homes they are building or remodeling have the opportunity to learn details from experts in the field this week beginning Wednesday, March 12, in Fayette County at designated Lowe's stores listed in their press release. To read this press release in full, please visit <http://www.fema.gov/news/newsrelease.fema?id=42890>.

## Positions Available at YNH-CEPDR

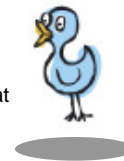
YNH-CEPDR has openings for Network Development Specialists. Please contact YNH-CEPDR at (203) 688-3224 or [center@ynhh.org](mailto:center@ynhh.org) for more information, or apply online at <http://www.ynhhscareers.org/>.

## Don't Forget to CHIRP!



Flu season is definitely upon us, and YNH-CEPDR wants to remind you to CHIRP.

YNH-CEPDR has developed educational tools suitable for distribution to your employees, volunteers, patients and visitors that describe personal infection control practices that can help keep them flu-free. For more information, please contact [center@ynhh.org](mailto:center@ynhh.org).



## Fact Sheet: DHS Five-Year Anniversary Progress and Priorities



On March 6, 2008, DHS stated that they felt there is no parallel in government to their start-up five years ago and the degree of maturity the department has reached in the short period since. They also feel the department's growth is testament to its 208,000 employees, who every day put service before self - patrolling borders, protecting ports, defending the skies, enforcing immigration laws and responding to disasters and emergencies. The department has experienced a number of significant tests in its short history and is intensely focused on the next

major task of ensuring a smooth transition from one administration to the next, through rigorous plans, exercises and best practices. In its five years, the department has achieved much to protect and secure the United States and has issued a report detailing its accomplishments. To read the report in full, please visit [http://www.dhs.gov/xnews/releases/pr\\_1204819171793.shtm](http://www.dhs.gov/xnews/releases/pr_1204819171793.shtm).

## Protecting the Healthcare Workforce



Ensuring that all of your staff know how to protect themselves during a disaster in which they may be exposed to a chemical, biological or radiological substance is an important factor in their decision to come to work and fulfill their role in a disaster and to your facility's ability to provide ongoing healthcare services. OSHA requires that employees performing certain

functions complete training programs that prepare them to don and doff appropriate levels of personal protective equipment (PPE) and recognize when such precautions may be necessary. YNH-CEPDR has developed a comprehensive suites of courses that address these OSHA requirements and provides an effective method to train your staff in proper PPE procedures. Whether your need is for fit testing N95 respirators or operations-level PPE and decontamination training for your decontamination team, YNH-CEPDR has a solution for your organization. For more information, please contact [center@ynhh.org](mailto:center@ynhh.org).

## Regional Practical and Train-the-Trainer Hazmat Course Bring Area Hospitals Together



Eighteen participants from seven hospitals attended a regional training session of **EM220: Best Practices for the Protection of Hospital-Based First Receivers, Operations Level** hazmat and decontamination course recently held at Middlesex Hospital in Middletown, Connecticut. The four-hour course, led by instructors Deborah Smith, David Burich and Samantha Kopp, included a hazardous material identification exercise, practice in donning and doffing of level C personal protective equipment and a decontamination exercise. This was followed by an additional two-hour train-the-trainer session which prepared participants to return to their institutions and train additional staff in the course material. The regional approach allowed participants the opportunity to share ideas and best practices, while learning in a collaborative environment. For information on bringing EM220 to your hospital or region, please contact Deborah Smith at [Deborah.Smith@ynhh.org](mailto:Deborah.Smith@ynhh.org).

## Education and Training Courses



At the request of the Bioterrorism Training and Curriculum Development Program of DHHS, 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](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](http://www.ynhhs.org/emergency/NIMS_Brochure-Final.pdf). For more information, please contact us at (203) 688-3224 or [center@ynhh.org](mailto:center@ynhh.org).



**EM 120: Best Practices for the Protection of Hospital-Based First Receivers.** Information topics include: special threats from specific agents; levels of biological, chemical and radiological protection and isolation; various levels of respiratory protection; principles of decontamination; decontamination procedures; mental health concerns regarding decontamination; and personal safety issues regarding decontamination. For more information, please contact us at (203) 688-3224 or [center@ynhh.org](mailto:center@ynhh.org).



**EM 121: N95 Respirator and Personal Protective Equipment (PPE) Training for Healthcare Workers.** Information topics include: reasons for respirator and personal protective equipment (PPE) use; proper methods for inspecting, donning and doffing a respirator and PPE; the effective use of a respirator and PPE; and common errors made in PPE and N95 respirator use. For more information, please contact us at (203) 688-3224 or [center@ynhh.org](mailto:center@ynhh.org).

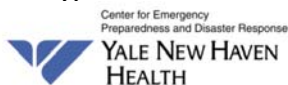


**EM 122: N95 Respirator Fit Tester Training.** Information topics include: identifying the need to conduct the N95 respirator fit test; conducting a fit test for N95 respirator use; and performing proper inspection and disposal of respirators. For more information, please contact us at (203) 688-3224 or [center@ynhh.org](mailto:center@ynhh.org).



**EM 220: Best Practices for the Protection of Hospital-Based First Receivers, Operations Level.** Information topics include: preparation for healthcare workers, such as emergency department clerks and clinicians, who are assigned to work in the contaminant-free areas but who may need to identify possible risks associated with unannounced patients; preparation for healthcare workers with designated roles for contaminant removal or who will be working in areas that are considered to be contaminated (training includes proper use of protective equipment); and preparation for hazardous materials specialists, including radiation safety officers. For more information, please contact us at (203) 688-3224 or [center@ynhh.org](mailto:center@ynhh.org).

## Programs and Services



Center for Emergency Preparedness and Disaster Response

YNH-CEPDR is committed to developing and delivering effective and scalable 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 us at (203) 688-3224 or [center@ynhh.org](mailto:center@ynhh.org).

## UPCOMING Meetings and Events

DATE	TIME	EVENT	LOCATION
3.26.08	2:00 pm-3:00 pm EST	<p>Creating Vigilant, Prepared and Resilient Communities for Homeland Security</p> <p><i>Teleconference sponsored by Live Response, a product of DHS FEMA and the National Integration Center (NIC)</i></p>	<p>A free pre-recorded satellite teleconference</p> <p>For more information, please visit <a href="http://www.dlnets.com/nmpi_26Mar08.htm">http://www.dlnets.com/nmpi_26Mar08.htm</a>.</p>
04.03.08 and 04.04.08	Save the Date	<p>Emergency Preparedness for Facilities: Basic Preparedness Training for Corporate HQ, Public, Commercial, Educational, Healthcare, Manufacturing, Banking, Hospitality, Airport and Related Business Sectors</p> <p><i>Emergency preparedness conference sponsored by Controlled Vehicle Access System (CVAS) and Homeland Defense Journal</i></p>	<p>Homeland Defense Journal Training Center Arlington, VA</p> <p>For more information, please visit <a href="http://www.homelanddefensejournal.com/hdl/Emergency-Preparedness_April08.html">http://www.homelanddefensejournal.com/hdl/Emergency-Preparedness_April08.html</a>.</p>
04.08.08 and 04.09.08	Save the Date	<p>2008 Annual Emergency Preparedness Conference</p> <p><i>Emergency preparedness conference sponsored by Joint Commission Resources (JRC)</i></p>	<p>Hilton Alexandria Mark Center Alexandria, VA</p> <p>For more information, please visit <a href="http://www.jcinc.com/5/Programs2008/">http://www.jcinc.com/5/Programs2008/</a>.</p>

## UPCOMING Training and Education

DATE	TIME	EVENT	LOCATION
05.06.08 to 05.08.08	Save the Date	<p>Hazardous Materials Officer Training</p> <p><i>Training conference sponsored by the State of Maine Department of Defense, Veterans and Emergency Management and the Maine Emergency Management Agency</i></p>	<p>Central Maine Commerce Center Augusta, ME</p> <p>For more information, please visit <a href="http://www.smrrc.org/">http://www.smrrc.org/</a>.</p>

FOR MORE INFORMATION, PLEASE CONTACT:

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<p>Preparedness Report Archive: <a href="http://www.yalenehavenhealth.org/emergency/commu/archives.html">http://www.yalenehavenhealth.org/emergency/commu/archives.html</a></p>			
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