

THE PREPAREDNESS REPORT

The Center for Emergency Preparedness and Disaster Response

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ELEVATED THREAT LEVEL

4th Annual Joint Commission Resources Emergency Preparedness Conference



**Extended Deadline:
Abstracts due
February 8, 2008**

Share Your Innovations With a National Audience!

Call for Abstracts: Joint Commission Resources (JCR) and the Occupational Safety and Health Administration (OSHA), in collaboration with the Yale New Haven Center for Emergency Preparedness and Disaster Response (YNH-CEPDR), invite interested participants to submit one or more abstracts for exhibit in the poster presentations track of the conference. The Yale New Haven Center for Emergency Preparedness and Disaster Response will provide the coordination for this track on behalf of the conference. The abstract submission deadline has been extended to **February 8, 2008**. Abstracts will be peer-reviewed for their quality, originality and relevance to the conference. *By submitting an abstract, the author(s) agree in advance that, if accepted, at least one author will register for the conference to present the poster as scheduled.* The format for the preparation of abstracts may be found on the submission form. Abstracts may be submitted via e-mail at center@ynhh.org with the subject line *abstract submission*. Notification of acceptance for poster presentation will be made via email by March 1, 2008. **Abstract submissions should demonstrate hospital-based best practices for emergency management planning, response and recovery including but not limited to:** Hospital Incident Command Systems; Exercise strategies; Surge capacity; Defining and managing staff roles and responsibilities; Education and training; and Topical issues: pandemic influenza, evacuation, fatality management. **Never done a poster before? Don't be nervous – we can help. Contact us at center@ynhh.org with your questions.**

Poster Presentations: Authors of accepted abstracts will be provided with a 4' by 8' board on which to display the poster. Presenters must bring their own tacks to affix the poster to the board. Authors may present their information in any format they choose, but should avoid trying to crowd too much information into the space allotted. Prior experience has demonstrated that a single poster, rather than individual pages, present best. Posters should be readable from a distance of 3 feet. Posters will remain on display for the entire conference. Authors are required to be present during the specific poster presentation times noted in the program. Accepted authors will be offered a reduced registration rate for conference participation. All associated costs of participation (registration, lodging, travel, food) are the responsibility of the author(s).

For details and abstract submission form, log on to:
<http://yalenewhavenhealth.org/emergency/disasterconference/>.

Avian Influenza: **New**

According to the World Health Organization (WHO), the cumulative number of confirmed cases of avian influenza H5N1 as of January 15, 2008, is 350 cases and 217 deaths.



On January 15, 2008, WHO confirmed a new case of human avian influenza H5N1 infection. A 32-year old woman from Tangerang District, Banten Province in Indonesia died on January 10 after being hospitalized the previous day for symptoms developed on January 3. The woman is believed to have had close contact with birds and poultry the week prior to developing symptoms. To read this release in full, please visit http://www.who.int/csr/don/2008_01_15/en/index.html.



New Delhi Outbreak
Credit: AFP

Outbreaks of avian influenza H5N1 infection in domestic chickens and ducks are reported in both Bangladesh and India where authorities are culling birds and encouraging hygiene practices to limit the spread of the virus. In some areas authorities are meeting resistance in villagers who refuse to hand over their birds for culling and others who let their birds loose, making it difficult to catch and cull the birds. No human infections have been reported from either country. To read this new release in full, please visit <http://www.alertnet.org/thenews/newsdesk/SP151769.htm>.

- An expert panel arranged by the WHO reports that the source of exposure to the avian influenza H5N1 virus can not be identified in at least 25% of human infections and says that environment-to-human transmission is possible. The panel's report is an update to the 2005 WHO report "Avian influenza A (H5N1) infection in humans" and includes information from the WHO's Second Consultation on Clinical Aspects of Human Infection with Avian Influenza A (H5N1) meeting that was held in Turkey last year. The report includes early treatment recommendations, observation of median age of avian influenza H5N1 infected patients as 18 years old and the high mortality rate in human disease. To read this release in full, please visit <http://www.cidrap.umn.edu/cidrap/content/influenza/avianflu/news/jan1608h5n1.html>. To read the report published in *The New England Journal of Medicine* in full, please visit <http://content.nejm.org/cgi/content/full/358/3/261>.
- On January 14, 2008, the The Centers for Disease Control and Prevention (CDC) issued a travel notice to people travelling to Asia to celebrate the Lunar New Year. The notice includes a warning about avian influenza H5N1 and how the disease may be acquired from contact with infected poultry and birds or, rarely, from other humans who are visibly ill from avian influenza H5N1. The notice includes specific measures to take before, during and after your trip and includes travel to Bangladesh, Burma (Myanmar), Cambodia, China, Hong Kong (SARPRC), India, Indonesia, Japan, Laos, Malaysia, Mongolia, Pakistan, South Korea (Republic of Korea), Thailand and Vietnam. To read the travel notice in full, please visit <http://www.cdc.gov/travel/content/AvianFluLunarNewYear08.aspx>.
- A kit titled, "Take the Lead – Working Together to Prepare Now", has been developed by Health and Human Services, the CDC and community leaders including the Church World Services, the United Jewish Communities and the Association of Professional Chaplains. This toolkit is designed to provide information and tools to assist an organization understand and prepare for the threat of pandemic influenza. Featured items include sample emails, fact sheets, sample newsletter articles and more. To access this toolkit, please visit <http://www.pandemicflu.gov/takethelead/index.html>.

INSIDE THIS ISSUE

- 2 \$24 Million Grants for IT Pan Prep
- 2 Plague: A Growing Threat?

- 3 Disasters around the World
- 3 January is National Blood Donor Month

- 4 Education and Training Courses
- 5 Upcoming Meetings and Events

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

New 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.

Preparing and Protecting Security Personnel in Emergencies. OSHA 2007.

<http://www.osha.gov/Publications/3335-security-personnel.pdf>

The following resources are identified to assist your preparedness activities:

New/Highlighted Resources:

Adapting Community Call Centers for Crisis Support, a Model for Home-Based Care and Monitoring. AHRQ Sept 2007.

<http://www.ahrq.gov/prep/callcenters/>

Field Guides (Misc.), Wisconsin Chapter, International Association of Arson Investigators

<http://www.wiaai.com/news.htm>

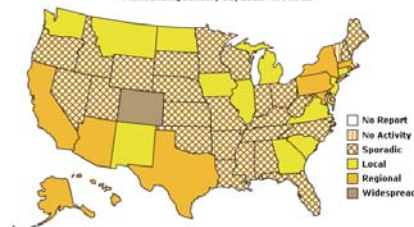
Radiation Issues, Armed Forces Radiobiology Research Institute. Multiple guides and resources, including:

- The Biodosimetry Assessment Tool
 - Adult/Pediatric Field Medical Record
 - Biodosimetry Worksheet
 - AFFRI Pocket Guide—Emergency Radiation Medicine Response
- <http://www.afri.usuhs.mil/www/outreach/biodostools.htm#software>

The medical management of a large-scale radiation accident or terrorist-related radiological/nuclear event will necessitate the ability to separate rapidly those who have received a large exposure of radiation from those who did not receive any radiation. The Armed Forces Radiobiology Research Institute (AFRRI) provides several resources and software products designed to assist first responders and first receivers determine the amount of radiation received by victims of a radiological event. These include the Biodosimetry Assessment Tool (BAT), Adult/Pediatric Field Medical Record, the Biodosimetry Worksheet and the AFFRI Pocket Guide – Emergency Radiation Medicine Response. Complementing these products, Yale New Haven Center for Emergency Preparedness and Disaster Response (YNH-CEPDR) has developed **EM110 – An Introduction to Radiological Emergency Preparedness, A Quick Guide for the Management of Radiation Disaster and the Hospital Emergency Management Plan Annex for Radiation Emergencies**, all of which provide healthcare facilities a framework for coordinating effective responses to radiation emergencies. Topics covered include hospital incident command, triaging of patients with radiological contamination and patient decontamination. In addition, YNH-CEPDR manages one of only a few biological dosimetry laboratories in the nation, providing physicians with information regarding potential radiation injury to victims accidentally or intentionally exposed to radiation. For further information about AFRRI products, please visit <http://www.afri.usuhs.mil>. For information regarding products offered by YNH-CEPDR or the Radiation Emergency Response Biodosimetry Laboratory, please contact YNH-CEPDR at (203) 688-3224 or center@ynhh.org.

Seasonal Influenza: **New**

Weekly Influenza Activity Estimates Reported by State and Territorial Epidemiologists*
Week Ending January 05, 2008- Week 01



During the week of December 30, 2007 – January 5, 2008, widespread activity was reported by Colorado; regional activity was reported by Alaska, Arizona, California, Hawaii, Maryland, Massachusetts, New York, Pennsylvania, Rhode Island and Texas; local activity was reported by the District of Columbia and 12 states (Connecticut, Georgia, Illinois, Iowa, Michigan, Montana, New Jersey, New Mexico, North Dakota, South Carolina, Virginia and Washington); sporadic activity was reported by Puerto Rico and 26 states (Alabama, Arkansas, Delaware, Florida, Idaho, Indiana, Kansas, Kentucky, Louisiana, Maine, Minnesota, Mississippi, Missouri, Nebraska, Nevada, New Hampshire, North Carolina, Ohio, Oklahoma, Oregon, South Dakota, Tennessee, Utah, West Virginia, Wisconsin and Wyoming); no activity was reported by Vermont. To read this report in full, please visit <http://www.cdc.gov/flu/weekly/>.

\$24 Million Grants for IT Pandemic

Preparedness: **New**

Government Health IT

On January 16, 2008, it was reported that the CDC will award a total of \$24 million towards projects that utilize IT in preparing communities for a pandemic outbreak, including utilizing IT in their response to an outbreak. Project types the CDC will consider for funding include electronic laboratory data exchange surveillance, integration of immunization information on a state-based level to track pandemic countermeasures and an electronic mortality reporting system that is Public Health Information Network (PHIN) compliant. Grants will only be granted to 62 previous awardees that received CDC funding in 2006 to identify gaps in preparedness and measures to address those gaps. The application deadline is March 17, 2008, and the awards will be made on April 18, 2008. To read this release in full, please visit <http://www.govhealthit.com/online/news/350174-1.html>.

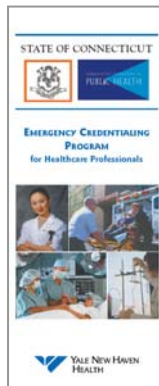
Plague: A Growing Threat?: **New**



Plague Reemergence
Credit: REUTERS/Stringer

On January 15, 2008, researchers at the University of Liverpool warned that plague has appeared in new countries over recent decades and is currently appearing in Africa. The disease has killed between 100 and 200 people over the last 20 years, and the WHO reports around 1,000 to 3,000 cases each year. The researchers worry that outbreaks seem to be on the rise after virtual inactivity during the 20th century with the latest outbreak of pneumonic plague with hundreds of suspected cases taking place in the Democratic Republic of Congo in 2006. The report also discusses how plague has been weaponized throughout history. To read the new release, please visit <http://www.reuters.com/article/scienceNews/idUSL1446129320080115>. To read the report published by the Public Library of Science in full, please visit <http://medicine.plosjournals.org/perlserv/?request=get-document&doi=10.1371/journal.pmed.0050003>.

Commitment and Volunteerism: **New**



As of January 17th, almost four thousand professionals have enrolled in the State of Connecticut Emergency Credentialing Program for Healthcare Professionals. These individuals have made a commitment to “be there” to support activities related to a manmade or natural disaster anywhere in the State of Connecticut. Despite the fact that many of these professionals are very busy in their own roles, they are cognizant of the fact that in a large and overwhelming incident, “human resources” may be a key asset in disaster response. The Emergency Credentialing Program 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 prepare 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 to see if this program is for you. Enrollment is completed online and basic disaster related education is provided. For more information or questions, please contact

Joseph Filakovsky, DNP, APRN, Emergency Credentialing Program Coordinator at (203) 688-4468 or email ecp@ynhh.org.

January is National Blood Donor Month: **New**



During the winter months, blood is usually in short supply and January is traditionally a difficult month for blood centers to collect blood donations. AABB, formerly known as the American Association of Blood Banks, is encouraging all eligible blood donors to set aside time to donate at a local blood collection facility in recognition of National Blood Donor Month (NBDM) 2008. NBDM 2008 is a collaboration between AABB, America's Blood Centers and the American Red Cross that offers organizations and blood collection facilities access to promotional materials, creating a unifying theme for January 2008. The promotional materials include fact sheets, flyers, posters, logos, web banner and letterhead. To learn more and for access to promotional materials and additional information about National Blood Donor Month 2008, please visit the AABB website at <http://www.aabb.org/Content>.

Positions Available at YNH-CEPDR

YNH-CEPDR has openings for Program Coordinator - Product and Services Development, Network Development Specialists and a Drills and Exercises 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>.

103,533 Arkansans Immunized Against Influenza in a Three-Day Drill

The Arkansas Department of Health set a new record for its Mass Dispensing Flu Exercise and immunized 103,533 Arkansans against influenza recently. The shots were dispensed during a three-day mass flu vaccination clinic with 81 health units participating. The purpose of the drill was to exercise the state's mass dispensing plan that is designed to insure that health professionals and volunteers are prepared to vaccinate or dispense medication to a large population during a very short period of time. Influenza is a contagious respiratory illness caused by influenza viruses. An influenza vaccination offers 70% to 90% protection against infection and can decrease the severity and side effects if you get sick. For more information on seasonal influenza, please visit <http://www.cdc.gov/flu/>. For more information regarding this drill, please contact Ed Barham, Office of Communications at (501) 280-4147 or Ann Wright, Office of Communications at (501) 661-2474.

Disasters around the World: **New**



With extreme cold hitting many parts of the US, effects can be devastating to the young and elderly. Cold weather and the loss of electricity can create potential health hazards. HHS has created a website to provide information on staying prepared, protecting yourself, managing and coping with stress in a disaster, aid and assistance resources and information about protecting your pet. Please visit <http://www.hhs.gov/ice/> for winter resources.

- 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. 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.

Prepare for Economic Impact of Pandemic Influenza



Dr. David Nabarro

The United Nations (UN) influenza coordinator David Nabarro said on January 10, 2008, that countries around the world and their governments need to further their preparation to meet the major economic impact that will accompany a future influenza pandemic. After collecting and analyzing information from almost 150 countries, it was concluded that although most countries have done some planning, these plans are not addressing the dramatic social and economic outcomes that may total up to 5% of the global gross domestic product – up to \$2 trillion based on World Bank and UN estimates. To read this article in full, please visit <http://www.reuters.com/article/healthNews/idUSL1067804520080110?rpc=401&feedType=RSS&feedName=healthNews&rpc=401>.

Yale New Haven Center for Emergency Preparedness and Disaster Response: Winter 2008 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 Winter 2008 Course Guide, please visit

http://ynhhs.emergencyeducation.org/downloads/YNH-Courses_Winter08.pdf. For more information, please contact YNH-CEPDR at (203) 688-3224 or center@ynhh.org.

Programs and 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 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.



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. This course is also available as an instructor-led workshop combined with a tabletop exercise to reinforce key concepts.



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's **N95 Respirator and Personal Protective Equipment (PPE) Training for Health Care Workers (EM 121)** online course uses both text and video to demonstrate the proper indications for use, maintenance, capabilities, limitations, and donning and doffing of the N95 respirator and personal protective equipment (PPE). This course offers the new or experienced health care worker an introduction or review of how to maximize their safety. This course is designed to align with current practices and terminology established by the OSHA Respirator Standard 1910.134(k), 1910.120, and the armed forces training requirements (USACHPPM, NHRC, AFRL).



The OSHA Respirator Standard 1910.134(k), 1910.120 requires Health Care Workers who wear the N95 respirator in the workplace to be fit tested annually and more often if necessary. YNH-CEPDR has developed the **N95 Respirator Fit Tester Training (EM 122)**, a 20-minute online course which provides training for individuals who will perform fit tests for healthcare workers on an annual basis. It may also be used as a just-in-time training in the event of a pandemic when additional staff may need immediate fit testing. This course meets the OSHA fit-testing requirements as outlined in the Fit Testing Procedures 1910.134 App A.



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
01.22.08, 01.23.08 and 01.24.08	8:00 a.m. to 4:30 p.m.	<p>Introduction to Cameo</p> <p>The <i>Introduction to the CAMEO Suite</i> course provides performance-level training to emergency response personnel, principally by training representatives of local and state agencies who respond to intentional acts, natural occurrence or accidental events.</p> <p><i>Connecticut Department of Emergency Management and Homeland Security</i></p>	<p>East Hartford Public Safety Complex 31 School Street East Hartford, CT 06108</p> <p>For more information, including prerequisites and how to register, please visit http://www.ct.gov/demhs/iCal/eventDetail_page.asp?date_ID=CDC6C7CFC83CDC9CB.</p>
1.28.08	10:00 a.m. to 3:00 p.m.	<p>Emergency Preparedness Forum</p> <p><i>Presented by Connecticut Public Health Committee & Public Safety and Security Committee</i></p>	<p>Room 2C Legislative Office Building 300 Capitol Avenue Hartford, CT</p>
1.31.08	1:00 p.m. to 2:30 p.m.	<p>Emergency Management Assistant Compact</p> <p><i>Alabama Department of Public Health</i></p>	<p>To register, please visit http://www.adph.org/alphnt/vcomm.asp?action=conflistone&templatenbr=3&deptid=143&templateid=1252.</p>
04.08.08 and 04.09.08	<i>Save the Date</i>	<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 http://www.jcrinc.com/5/Programs2008/.</p>

FOR MORE INFORMATION, PLEASE CONTACT:

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<p>James Paturas Deputy Director, Clinical Services (203) 688-3496 james.paturas@ynhh.org</p>	<p>Patrick Ward Deputy Director, Network Development and Contracting (203) 688-4473 patrick.ward@ynhh.org</p>	<p>Louise-Marie Dembry, MD Associate Medical Director (203) 688-4634 louise-marie.dembry@ynhh.org</p>	<p>Mark Schneider Program Manager, Education and Training (203) 688-2577 mark.schneider@ynhh.org</p>
<p>YNH-CEPDR West Coast Office: Kevin M. Storm, NREMT-P (650) 312-1196 kevin.storm@ynhh.org</p>		<p>YNH-CEPDR South West Office: Deanna Bourgeault (469) 619-3005 deanna.bourgeault@ynhh.org</p>	
<p>Preparedness Report Archive: http://www.yalenewhavenhealth.org/emergency/commu/archives.html</p>			
<p>One Church Street, 5th Floor • New Haven, CT 06510 • Tel. (203) 688-3224 • Fax (203) 688-4618 center@ynhh.org • www.yalenewhavenhealth.org/emergency</p>			

US DEPARTMENT OF HEALTH AND HUMAN SERVICES CONTACTS:

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<p>JFK Federal Building, Room 2100 • 15 New Sudbury Street • Boston, MA 02203</p>	
<p>US Department of Health and Human Services 24x7 Operations Center hhs.soc@hhs.gov • (202) 619-7800 • http://www.hhs.gov/disasters/</p>	