

# THE PREPAREDNESS REPORT

The Center for Emergency Preparedness and Disaster Response

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ELEVATED THREAT LEVEL

## New Arenavirus Identified as Cause of Cluster of Illness, Death in South Africa and Zambia: **New**



Credit: AFP

The Clinicians' Biosecurity Network has published a report on a new arenavirus identified as the cause of a cluster of illness and death in South Africa and Zambia. Through molecular diagnostic techniques, a previously unknown arenavirus has

been identified as the etiologic agent responsible for four deaths in Africa that occurred in September and October of 2008.

Investigators from the Communicable Diseases Laboratory in South Africa, the US CDC and Columbia University discovered that the virus has similarities to Lassa fever virus. This marks the second new arenavirus identified as a disease-causing agent in the past year; the first was identified after several transplant patients were killed by the "Dandenong" virus as reported in the New England Journal of Medicine in March 2008. To date, there have been five case patients and four fatalities, with clinical characteristics that include a flu-like illness with increasing severity over 7 days, pharyngitis, diarrhea and rash. Upon hospitalization, some clinical improvement was observed, but it was followed by a rapid decline culminating in respiratory failure and shock. The incubation period of this virus has been estimated at 7 to 13 days, with death occurring 9 to 12 days after illness. Although arenaviruses often cause hemorrhagic fevers, bleeding has not been a prominent feature of these cases; nonetheless, full VHF precautions were implemented. To read further, please visit, <http://www.upmc-cbn.org/index.html>.

## Hazardous Chemical Incidents in Schools - United States, 2002-2007: **New**

The federal Agency for Toxic Substances and Disease Registry (ATSDR) conducts national public health surveillance of chemical incidents through its Hazardous Substances Emergency Events Surveillance (HSEES) system. To identify school-related incidents and elucidate their causes and consequences to highlight the need for intervention, ATSDR conducted an analysis of HSEES data for 2002-2007. During that period, 423 chemical incidents in elementary and secondary schools were reported by 15 participating states. Proper chemical use and management is essential to protect school building occupants. Additional education directed at raising awareness of the problem and providing resources to reduce the risk is needed to ensure that schools are safe from unnecessary dangers posed by hazardous chemicals. For more information, please visit <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5744a1.htm>

## Avian Influenza: **New**

According to the World Health Organization (WHO), the cumulative number of confirmed cases of avian influenza H5N1 as of September 10, 2008, is 387 cases and 245 deaths. This is associated with a case fatality rate of 63%. Indonesia and Viet Nam report the largest number of cases. To see a breakdown by country, please visit [http://www.who.int/csr/disease/avian\\_influenza/country/cases\\_table\\_2008\\_09\\_10/en/index.html](http://www.who.int/csr/disease/avian_influenza/country/cases_table_2008_09_10/en/index.html).

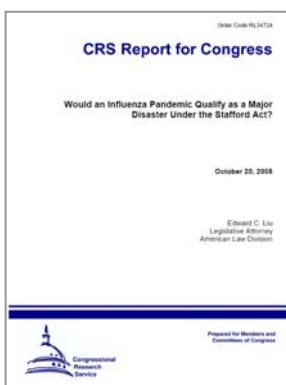


To reduce the burden of secondary bacterial pneumonia during the next influenza pandemic, the CDC urges healthcare providers and state immunization programs to improve pneumococcal vaccination delivery systems for patients under their care so that national vaccine coverage increases. The ideal time to accelerate vaccination efforts is during the inter-pandemic and pandemic alert phases (phases 1 through 3), when the threat of a pandemic is not imminent. At this time, CDC does not recommend changes to existing recommendations for use or stockpiling of pneumococcal vaccines in anticipation of a pandemic. For further recommendations, please visit <http://www.pandemicflu.gov/vaccine/pneumococcal.html>.



Paula Dobriansky, Secretary of State for Democracy and Global Affairs

On October 25, 2008, US Secretary of State for Democracy and Global Affairs, Paula Dobriansky, announced a pledge of \$320 million for international avian and pandemic influenza assistance. U.S. assistance is pledged for bilateral, regional and international programs. It supports stockpiles of non-pharmaceutical supplies such as personal protective equipment, laboratory and decontamination kits for outbreak surveillance, investigation, response and containment; technical and humanitarian assistance and international coordination; wild bird surveillance; international research, including vaccine research; and outreach. To read this release in full, please visit <http://www.state.gov/r/pa/prs/ps/2008/oct/111241.htm>.



Legislative Attorney Edward C. Liu has written a report titled "Would an Influenza Pandemic Qualify as a Major Disaster Under the Stafford Act?." This report provides a legal analysis of the eligibility of an influenza pandemic to be declared by the President as a major disaster under the Robert T. Stafford Disaster Relief and Emergency Assistance Act. In 1997, the discovery of a virulent H5N1 strain of avian influenza raised the possibility of a flu pandemic occurring in the United States. In such an event, the Stafford Act could provide authority for federal assistance. Although it is widely agreed that emergency assistance under the Stafford Act could be provided by the President in the event of flu pandemic, questions remain as to whether major disaster assistance would be available. An analysis of the Stafford Act suggests that this issue was not addressed by Congress when it drafted the current definition of a major disaster, and that neither inclusion nor exclusion of flu pandemics from major disaster assistance is explicitly required by the current statutory language. To read this report, please visit <http://www.fas.org/spp/crs/misc/RL34724.pdf>.

### INSIDE THIS ISSUE

2 Seasonal Flu

3 The Readiness Dispatch Newsletter

3 Preparedness

4 Education and Training Courses

5 Upcoming Training, Meetings and Events

6 Contact Information

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

The following resources are identified to assist your preparedness activities:

### Highlighted Resources: **New**

“Model Procedures for Responding to a Package with Suspicion of a Biological Threat” International Association of Fire Chiefs (In cooperation with FBI Hazardous Materials Response Unit, FBI Laboratory Division). October 2008  
[http://www.iafc.org/associations/4685/files/haz\\_1\\_AFCmodelproceduresforbiohazardresponse.pdf](http://www.iafc.org/associations/4685/files/haz_1_AFCmodelproceduresforbiohazardresponse.pdf)

“Would an Influenza Pandemic Qualify as a Major Disaster Under the Stafford Act?” Oct 2008 CRS Report  
<http://www.fas.org/sqp/crs/misc/RL34724.pdf>

### Seasonal Flu: **New**

The University of Minnesota on October 28, 2008 surpassed the single-day Guinness world record for administering seasonal flu vaccine, delivering 11,538 shots at four campus locations. The previous record of 3,271 was set in November 2006 by a hospital in Sanford, Fl. The flu shots were dispensed by the school's Boynton Health Service with help from the School of Nursing, the College of Pharmacy, the Medical Reserve Corps and the Minnesota Visiting Nurses Association. For more information, please visit  
<http://www.cidrap.umn.edu/cidrap/content/influenza/panflu/news/oct3008record.html>.

Sporadic flu activity was reported in the District of Columbia, Puerto Rico and 15 states (Alaska, California, Colorado, Connecticut, Delaware, Hawaii, Idaho, Illinois, Indiana, Massachusetts, Nevada, New York, Pennsylvania, Texas and Utah). No influenza activity was reported in 35 states (Alabama, Arizona, Arkansas, Florida, Georgia, Iowa, Kansas, Kentucky, Louisiana, Maine, Maryland, Michigan, Minnesota, Mississippi, Missouri, Montana, Nebraska, New Hampshire, New Jersey, New Mexico, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Rhode Island, South Carolina, South Dakota, Tennessee, Vermont, Virginia, Washington, West Virginia, Wisconsin and Wyoming). For more information, please visit  
<http://www.cdc.gov/flu/weekly/>.



## Avian Influenza: **New (Continued)**



President-elect Sen. Barack Obama  
Credit: Getty Images

On November 6, 2008, the Government Accountability Office (GAO) has listed public health emergency preparedness and food safety as two of 13 urgent issues that will need attention from President-elect Barack Obama and the new Congress next year. The GAO makes nine recommendations for improving public health preparedness, all of them drawn from previous GAO reports. Five of these explicitly relate to the threat of a flu pandemic:

- The Homeland Security (DHS) and Health and Human Services (HHS) departments should conduct joint testing and training exercises for pandemic flu to ensure that leadership roles are defined and that leaders can effectively carry out shared responsibilities.
- The Homeland Security Council should set up a process and schedule for updating the national pandemic implementation plan in a way that includes nonfederal stakeholders.
- HHS should "expeditiously" complete its guidance to help state and local public health agencies decide how to use limited supplies of antivirals and pandemic vaccines.
- DHS should make fuller use of the coordinating councils that were set up to facilitate joint public-private planning for critical infrastructure protection.
- HHS and DHS should hold more meetings of the states in the five pandemic planning regions to help them address gaps in their planning.

To read further, please visit

<http://www.cidrap.umn.edu/cidrap/content/influenza/panflu/news/nov0708gao.html>.



Credit: USGS

As part of a multi-pronged research effort to understand the role of migratory birds in the transfer of avian influenza viruses between Asia and North America, scientists with the US Geological Survey (USGS), in collaboration with the US Fish and Wildlife Service in Alaska and the University of Tokyo, have found genetic evidence for the movement of Asian forms of avian influenza to Alaska by northern pintail ducks. In an article published in *Molecular Ecology*, USGS

scientists observed that nearly half of the low pathogenic avian influenza viruses found in wild northern pintail ducks in Alaska contained at least one (of eight) gene segments that were more closely related to Asian than to North American strains of avian influenza. Findings from this study indicate that:

- Migratory bird species, including many waterfowl and shorebirds, that frequently carry low pathogenic avian influenza and migrate between continents may carry Asian strains of the virus along their migratory pathways to North America
- USGS researchers found that nearly half of influenza viruses isolated from northern pintail ducks in Alaska contained at least one of eight virus genes that were related closely to the Asian than North American strains.
- The central location of Alaska in relation to Asian and North American migratory flyways may explain the higher frequency of Asian lineages observed in this study in comparison to more southerly locations in North America. Continued surveillance for highly pathogenic viruses via sampling of wild birds in Alaska is warranted.

To read more about this study, please visit <http://www.usgs.gov/newsroom/article.asp?ID=2044>.

## Protecting the Healthcare Workforce



Ensuring that all of your staff knows 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 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 suite of courses that addresses 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).

### 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.yalenehavenhealth.org/emergency](http://www.yalenehavenhealth.org/emergency)

## The Readiness Dispatch – Quarterly Newsletter for the MRC and ECP Released: **New**



The Emergency Credentialing Program and the Medical Reserve Corps of Connecticut has released the first edition of their quarterly newsletter, *The Readiness Dispatch*. This newsletter focuses on volunteer updates, just-in-time information and more. The threat of pandemic influenza, recent flooding, the devastation caused by record-breaking storms

during the 2008 hurricane seasons and the September 11th terrorist attacks have underscored the importance of having an emergency response plan that allows our hospitals and healthcare systems to quickly mobilize the resources they need to maintain or increase facility, equipment and personnel capacity. By volunteering during a large-scale disaster or public health emergency, you will be ensuring that citizens - your family, friends and neighbors - have uninterrupted access to vital healthcare resources when they need them most! To read this newsletter, please visit <http://archive.constantcontact.com/fs064/1102081560733/archive/1102293984807.html>.

To enroll in the State of Connecticut Emergency Credentialing Program or the Medical Reserve Corps at the Yale New Haven Center for Emergency Preparedness. Please visit [www.ct-esar-yhp.org](http://www.ct-esar-yhp.org) or [www.mrc-ynh.org](http://www.mrc-ynh.org), or call (203) 688-3224.

## 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 us at (203) 688-3224 or [center@ynhh.org](mailto:center@ynhh.org), or visit our web site at <http://www.yalenewhavenhealth.org/emergency/index.html>.

## Preparedness: **New**



On November 6, 2008, the DHS announced the completion of *Southern Exposure*, a full-scale exercise (FSE) marking the culmination of the Southeast Transportation Corridor Pilot (SETCP). The exercise ran from October 23 through November 5, 2008 and was sponsored by the DHS Domestic Nuclear Detection Office (DNDO), along with other federal, state and local participants. The FSE was intended to demonstrate the Southeast region's capabilities to coordinate, communicate and respond during and after a possible

radiological/nuclear threat to the region's interstate highways. To read this release in full please visit, [http://www.dhs.gov/xnews/releases/pr\\_1225999813655.shtm](http://www.dhs.gov/xnews/releases/pr_1225999813655.shtm).



AHRQ has posted the "Rocky Mountain Regional Care Model for Bioterrorist Events: Locate Alternate Care Sites During an Emergency." This model was developed by a multi-agency working group, including representatives from the staffs of major academic medical centers, government, military, public health, emergency management institutions and agencies at the federal, state and local level. The primary purpose of this effort was to develop a Rocky Mountain regional care model for bioterrorist events for federal region VIII that addressed

medical surge capacity needs in the event of a bioterrorist incident. The overarching purpose of this project was to develop an exportable surge capacity model that included exportable tools for regional bioterrorism planners and decision makers at the national, state, local and provider level. To read about this model, please visit <http://www.ahrq.gov/research/altsites/>.

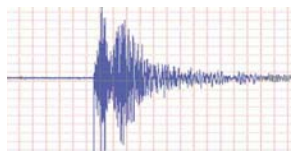


University of Pittsburgh School of Medicine

On October 29, 2008, researchers at the University of Pittsburgh School of Medicine were awarded \$2.7 million from the Biomedical Advanced Research and Development Authority (BARDA), HHS, to develop a radiation mitigator drug that could counter the effects of radiation exposure in case of large-scale public exposure. The ultimate goal of the contract is to develop an easily administered drug that the CDC can store and fly to hospitals and care facilities if and when an emergency occurs. A team of researchers led by Joel Greenberger, M.D., professor and chairman of the Department of Radiation Oncology at the University of Pittsburgh School of Medicine, will develop the GS- nitroxide drug JP4-039, identified by the Pitt research team in 2004 as a radioprotector. Using both mouse model and human cell and tissue research, they have shown that the drug, when delivered 24 hours after irradiation, enhances cell recovery. To read this release in full, please visit

<http://www.upmc.com/MediaRelations/NewsReleases/2008/Pages/BARDA.aspx>.

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



A magnitude 6.3 earthquake was detected on November 5, 2008, at 5:35 a.m. with an epicenter of Vanuatu which is 1210 miles from Brisbane, Queensland, Australia. No ocean-wide tsunamis were predicted, but smaller localized ones could occur due to local underwater landslides. For further information, please visit <http://earthquake.usgs.gov/eqcenter/recenteqswm/Quakes/prp0828504.php>.

- On October 29, 2008, an earthquake in south-western Balochistan Province has killed at least 160 people and displaced another 12 000. WHO is part of a joint mission to assess the two most affected districts of Ziarat and Pishin. A referral hospital has been established at a rural health centre in Ziarat. WHO is also rushing health supplies, including medicines and equipment for trauma injuries to the zone. Food insecurity, low vaccination coverage and compromised water and sanitation conditions are major health concerns. For more information, please visit [http://www.who.int/hac/crises/cod/releases/pak\\_news\\_release\\_29oct2008/en/index.html](http://www.who.int/hac/crises/cod/releases/pak_news_release_29oct2008/en/index.html).



Credit: Walter Astrada/AFP/Getty Images

Given the rapidly deteriorating security situation, WHO is seeking \$2.6 million to meet health needs in the eastern Democratic Republic of the Congo for the next three months. The volatile situation in North Kivu, in particular, has forced thousands of locals to flee their homes, increasing the threat of communicable diseases, including cholera, malaria and measles. WHO has flown 60 metric tonnes of medicines and other health supplies into neighboring Uganda for immediate delivery into affected parts of the Democratic Republic of the Congo. For more information, please visit <http://www.who.int/hac/en/index.html>.

## Education and Training Courses: Updated



The Yale New Haven Center for Emergency Preparedness and Disaster Response (YNH-CEPDR) is pleased to announce that previews for National Incident Management System (NIMS) courses are available at <http://ynhhs.emergencyeducation.org/>. YNH-CEPDR is committed to ensuring that our courses remain current with applicable federal and accrediting agency requirements. The current course updates, meet the requirements outlined in the FEMA February 2008 National Incident Management System (NIMS): Five-Year NIMS Training Plan.

- **EM 106: Emergency Preparedness for Healthcare – At Work and At Home (New)** Emergency preparedness is the responsibility of every healthcare employee. Whether meeting The Joint Commission, Centers for Medicare and Medicaid Services requirements or ensuring that employees will come to work during a disaster, emergency preparedness training is essential. This awareness-level course will provide the information and action steps all employees can take to ensure a work environment prepared for disasters and is recommended for all hospital and healthcare employees. For more information, please contact us at (203) 688-3224 or [center@ynhh.org](mailto:center@ynhh.org).
- **EM 108: Emergency Preparedness for Healthcare with NIMS (New)** Hospitals and many healthcare organizations are now required to implement the National Incident Management System (NIMS) education and training for appropriate personnel. YNH-CEPDR has developed Emergency Preparedness for Healthcare Professionals with IS 700 (EM 108) as an equivalent IS 700 NIMS course. This course is time-efficient and relevant to public health, hospital and healthcare workers. The course provides information and action steps all employees can take to ensure a work environment prepared for disasters. 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 respirator and PPE 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 141: Role of the Medical or Technical Specialist During an Incident (New)** A course which explores the roles and responsibilities of medical and technical specialists when the ICS has been activated and includes an interactive case study. During a disaster, members of the command or general staff may require additional information about chemical, biological, radiological or nuclear (CBRN) emergencies, information technology or legal issues, which a designated medical or technical specialist can provide. For more information, please contact us at (203) 688-3224 or [center@ynhh.org](mailto:center@ynhh.org).
- **EM 142: Incident Command Systems for Healthcare with NIMS (New)** This course is designed to help healthcare leaders understand their role in managing continuous care for patients in the event of an emergency or disaster and to meet the federal requirements for IS 100.HC, An Introduction to Incident Command System and IS 200.HC, Applying Incident Command System to Healthcare Organizations. EM 142 is designed for all those who may serve in a leadership role in a healthcare organization during an emergency or disaster. For more information, please contact us at (203) 688-3224 or [center@ynhh.org](mailto:center@ynhh.org).
- **EM 210: Advanced Radiological Emergency Preparedness for Clinicians** This course is designed for clinicians with an interest in understanding radiation concepts, the medical effects of radiation on biological systems, radiation countermeasures and essential elements for dealing with radiological and nuclear emergencies in the health care environment. 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 health care 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 health care 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).
- **EM 250: Small Victims, Big Challenges: Pediatric Triage, Treatment and Recovery for Emergencies (New)** A course which introduces clinicians acting as first receivers to the unique challenges encountered with children in a disaster. Children represent a special subset of individuals at-risk as they have unique physiological and pharmacological considerations. The federal Pandemic and All-Hazards Preparedness Act (PAHPA) encourages the Department of Health and Human Services to promote appropriate pre-disaster activities at the state and local levels to address the medical health needs of children. For more information, please contact us at (203) 688-3224 or [center@ynhh.org](mailto:center@ynhh.org).
- **EM 260: Geriatric Preparedness, Triage and Treatment in Disasters (New)** A course which introduces clinicians acting as first receivers to the unique challenges encountered with the elderly in a disaster. Senior citizens represent a special subset of individuals at-risk as they have unique physiological and pharmacological considerations. The federal Pandemic and All-Hazards Preparedness Act (PAHPA) encourages the Department of Health and Human Services to promote appropriate pre-disaster activities at the state and local levels to address the medical health needs of the elderly. For more information, please contact us at (203) 688-3224 or [center@ynhh.org](mailto:center@ynhh.org).

## Positions Available at YNH-CEPDR



YNH-CEPDR has an opening for an Emergency Management Specialist. 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/>.

## UPCOMING

### Upcoming Training and Education

DATE	TIME	EVENT	LOCATION
11.19.08	8:00 a.m. – 4:00 p.m.	Biosafety and Biosecurity: Minimizing the Risks in the Laboratory, Paramus, New Jersey  <i>Sponsored by the Association of Public Health Laboratories (APHL) and the CDC</i>	Dorothy B. Kraft Center of the Valley Hospital Paramus, NJ  For more information, please visit <a href="https://www.aphlnet.org/eweb/Dynamicpage.aspx?webcode=EventInfo&amp;evt_key=64c64345-3fc3-428f-adfe-dfd6c0f3dff9">https://www.aphlnet.org/eweb/Dynamicpage.aspx?webcode=EventInfo&amp;evt_key=64c64345-3fc3-428f-adfe-dfd6c0f3dff9</a> .
12.2.08	1:00 p.m. – 2:00 p.m. EST	Chemical, Biological, Radiological, Nuclear, and Explosive Threats  <i>Sponsored by the Association of Public Health Laboratories (APHL)</i>	Teleconference Please registrar, <a href="https://www.aphlnet.org/eweb/Dynamicpage.aspx?webcode=EventInfo&amp;evt_key=c25bd276-82da-4917-9495-92014c27943b">https://www.aphlnet.org/eweb/Dynamicpage.aspx?webcode=EventInfo&amp;evt_key=c25bd276-82da-4917-9495-92014c27943b</a> .
12.4.08	1:00 p.m. – 2:30 p.m. EST	Mass Antibiotic Dispensing: Partnering with Tribal Governments and Communities  <i>Sponsored by CDC</i>	Please registrar, <a href="http://www2a.cdc.gov/TCEOnline/">http://www2a.cdc.gov/TCEOnline/</a>

## UPCOMING

### Upcoming Meetings and Events

DATE	TIME	EVENT	LOCATION
11.16.08 to 11.19.08	<i>See web site</i>	International Conference on Rebuilding Sustainable Communities for Children and Their Families after Disasters  <i>Sponsored by the College of Public and Community Service, University of Massachusetts at Boston</i>	University of Massachusetts Boston Campus Center Boston, MA  For more information, please visit <a href="http://www.cpcs.umb.edu/rscbfd">www.cpcs.umb.edu/rscbfd</a> .

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

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US DEPARTMENT OF HOMELAND SECURITY  
FEDERAL EMERGENCY MANAGEMENT AGENCY (FEMA) CONTACT:

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**US Department of Health and Human Services 24x7 Operations Center**  
[hhs.soc@hhs.gov](mailto:hhs.soc@hhs.gov) • (202) 619-7800 • <http://www.hhs.gov/disasters/>