

THE PREPAREDNESS REPORT

The Center for Emergency Preparedness and Disaster Response

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ELEVATED THREAT LEVEL

DHS Issues Record of Decision on Proposed National Bio- and Agro-Defense Facility: **New**



Kansas State University Campus in Manhattan, Kansas

The Department of Homeland Security's Science and Technology Directorate today released the Record of Decision (ROD) on the National Bio- and

Agro-Defense Facility (NBAF). Manhattan, KS, has been selected as the site for a state-of-the-art, high-security laboratory facility to study foreign animal and zoonotic (transferable from animal to human) diseases that can impact livestock. This formal ROD follows the publication of the NBAF Final Environmental Impact Statement (NBAF Final EIS) in the Federal Register on Dec. 12, 2008 and officially designates a site upon which to build the NBAF. Facility design will begin in 2009 with plans for construction to begin in 2010. It is expected that the NBAF would be operational by 2015. The NBAF will be designed to replace the current facilities at the Plum Island Animal Disease Center (PIADC) in New York. To read the press release, please visit:

http://www.dhs.gov/xnews/releases/pr_1232132671186.shtm.

Urgent Action Needed on Nation's Levees: **New**



New Orleans, LA

A report by the National Committee on Levee Safety said Congress needs to act decisively and set up a commission to oversee the 100,000 miles of U.S. levees to prevent the next catastrophic flood. About \$1.2 billion should be spent

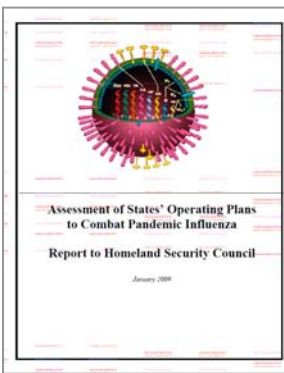
over the next five years to set up the commission and fix aging and inadequate levee systems that protect tens of millions of Americans. The committee estimated that it would cost about \$315 million over the first five years to establish the commission, inspect levees and set up state programs. In addition, the committee recommended setting aside \$923 million to repair levees, build stronger levees and move people out of floodplains over the next five years. To view the entire report, please visit:

http://www.iwr.usace.army.mil/ncls/docs/NCLS-Recommendation-Report_012009_DRAFT.pdf.

Avian Influenza: **New**

The WHO reports the cumulative number of confirmed human cases of avian influenza A/ (H5N1) as of January 19th, 2009 as 397 cases with 249 deaths resulting in a case mortality rate of 63%. To view the cumulative and individual country indexes, please visit:

http://www.who.int/csr/disease/avian_influenza/country/cases_table_2009_01_19/en/index.html.

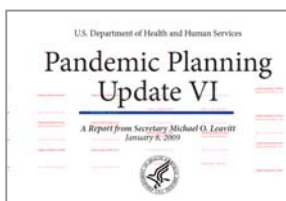


A recent report from HHS reveals that states have made progress in stockpiling drugs and preparing to vaccinate people in case of a flu pandemic but lag far behind in plans for the ensuing months of disruption, the government said on Thursday. The report showed most state agencies responsible for maintaining food supplies during an emergency were ready, but transportation plans were not sufficiently developed. Moreover, all deficiencies have been worsened by the economic crisis. All states got good grades for getting ready to distribute antiviral drugs and vaccines. More difficulties turned up in preparing areas for surge capacity. The overwhelming majority of the deficiencies were noted in the private sector. To read the entire report, please visit:

http://pandemicflu.gov/plan/states/state_assessment.html.

- HHS has awarded a contract worth almost \$500 million to Novartis to construct a plant that will produce cell-based vaccines in Holly Springs, North Carolina. Cell-based vaccine production could more easily meet surge capacity needs because cells could be frozen and stored in advance of an epidemic or developed rapidly in response to an epidemic. Cell-based vaccine production also dramatically reduces the possibility for contamination and promises to be more reliable, flexible and expandable than egg-based methods. The cost of construction will be shared by the company and the federal government. This plant will be used to supply the vaccine in case of a pandemic in the United States with a goal of producing 150 million doses of flu vaccine in six months if required. Manufacturing of seasonal flu vaccines can also be done at the facility. To read the post, please visit:

<http://www.hhs.gov/news/press/2009pres/01/20090115b.html>.



HHS released *Pandemic Planning Update VI*, which details the strides made by the department over the last 33 months as it prepares for a potential pandemic. The report from HHS Secretary Michael O. Leavitt detailed the progress in areas such as vaccine production capacity and state and local preparedness activities. To read the entire report, please visit:

<http://www.pandemicflu.gov/plan/pdf/panflureport6.pdf>

- The 1918 influenza pandemic was the most devastating outbreak of infectious disease in human history, accounting for about 50 million deaths worldwide. In addition to a significant number of cases of secondary bacterial pneumonia, this highly pathogenic strain of influenza A virus caused fatal primary viral pneumonia. *The Proceedings of the National Academy of Sciences* reports on a recent study whose findings strongly implicate the viral RNA polymerase complex as a major determinant of the pathogenicity of the 1918 pandemic virus. This new insight may aid in identifying virulence factors in future pandemic viruses that could be targeted with antiviral compounds. To read the entire study, please visit <http://www.pnas.org/content/early/2008/12/29/0806959106.full.pdf+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 following resources are identified to assist your preparedness activities:

<http://www.ynhhs.org/emergency/links/EMandMedicalWebSites.pdf>

Highlighted Resources:

Emergency Planning Site, for Nursing Homes, Florida Health Care Association:

<http://www.fhca.org/emereprep/index.php>

Personal Medical Information Form designed for people who need care during disasters and similar situations:

<http://www.emergency.cdc.gov/disasters/kiwy.asp>.

Seasonal Flu: Updated

For the week ending January 10th, CDC reported widespread influenza activity in one state (Virginia). Regional influenza activity was reported in five states (Colorado, New Hampshire, New Jersey, New York, and North Carolina). Local influenza activity was reported by 10 states (Arizona, Connecticut, Florida, Hawaii, Illinois, Maryland, Massachusetts, Montana, Pennsylvania, and Texas). Sporadic activity was reported in the District of Columbia, Puerto Rico, and 33 states (Alaska, Arkansas, California, Delaware, Georgia, Idaho, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maine, Michigan, Minnesota, Missouri, Mississippi, Nebraska, Nevada, New Mexico, North Dakota, Ohio, Oklahoma, Oregon, Rhode Island, South Carolina, South Dakota, Tennessee, Utah, Vermont, Washington, West Virginia, Wisconsin, and Wyoming). No influenza activity was reported in one state (Alabama). The complete report can be accessed by going to:

<http://www.cdc.gov/flu/weekly/>. may be

downloaded by visiting:

http://www.emergency.cdc.gov/disasters/winter/pdf/cold_guide.pdf.



Avian Influenza: **New** (Continued)



Health care workers and emergency services personnel who could have direct contact with individuals who are ill during an influenza pandemic should be protected with antiviral drugs throughout the pandemic, even before these workers are exposed or become ill themselves, according to guidance released on December 16th by the U.S. Department of Health and Human Services. The guidance also recommends preventive antiviral drug use for certain individuals following

exposure to someone who is sick with pandemic influenza. These individuals include people with weakened immune systems, as well as for health care and emergency services workers such as law enforcement, firefighter, and emergency services personnel who do not routinely come in contact with ill people, and for residents in nursing homes, prisons and other group residential settings if an outbreak of pandemic illness occurs in the facility. For a copy of the guidance, visit: <http://www.pandemicflu.gov>.

- Researchers from Virginia Tech are developing a computer simulation that matches the movements of all 300 million people in towns across the US. The team hopes that the model will help them understand the spread of contagious diseases such as pandemic influenza. The software, called EpiSimdemics, can provide an accurate simulation of the demographic attributes of groups composed of 1500 people or more. One of the first applications for compiling all this data will be studying how contagious diseases might spread through different regions. The software infects a few simulated individuals with the flu, and tracks them as they go about their daily lives. The model gives each person a different probability of responding to the virus, derived from the individual's data, such as age and general health. To read more on this simulation model, please visit: <http://www.physorg.com/news148018856.html>.

CDC Interim Guidance for Revaccination for Smallpox: **New**

The CDC has proposed a recommendation for an appropriate time-interval for revaccination of public health and health care volunteers who were vaccinated as responders in the US Civilian Smallpox Preparedness and Response Program. This document addresses only the revaccination of public health and health care volunteers and does not address routine revaccination guidance for laboratory workers or primary vaccination of emergency responders. For a copy of the Interim Guidance, please visit:

<http://emergency.cdc.gov/agent/smallpox/revaxmemo.asp>.

FEMA Grants to Assist Fire Departments: **New**



The Federal Emergency Management Agency (FEMA) has awarded more than \$64 million in grants to 455 fire departments and fire service organizations across the nation. The grants were distributed through the Assistance to Firefighters Grant (AFG) and Adequate Fire and Emergency Response grant programs. The grants help fire districts purchase trucks and other firefighting and emergency response equipment, as well as pay for training. For information on the grant program, please visit:

<http://www.firegrantsupport.com/>.

FEMA Announces Revised National Incident Management System

On December 18, 2008, FEMA released a revised National Incident Management System (NIMS)—the national standard for incident management. NIMS establishes standardized incident management processes, protocols and procedures that all federal, state, tribal and local responders will use to coordinate and conduct response actions. The new release expands on the original version released in March 2004 by clarifying existing NIMS concepts, better incorporating preparedness and planning and improving the overall readability of the document. To view or download the revised document, please visit: http://www.fema.gov/pdf/emergency/nims/NIMS_core.pdf.

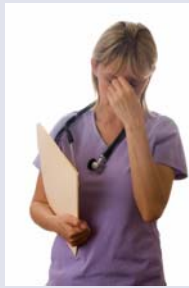
Winter Weather Preparedness

CDC has published a guide that deals with personal protection and safety during periods of extreme cold. There are sections on protecting your car, your home and advice for those who must be outdoors during these events. The page has resources related to protecting oneself from hypothermia and frostbite, dealing with power loss, protecting oneself from carbon monoxide, information about wind chill and a list of other resources you can access for further information and assistance. A copy of the guide may be downloaded by visiting:

http://www.emergency.cdc.gov/disasters/winter/pdf/cold_guide.pdf.

Pandemic Influenza

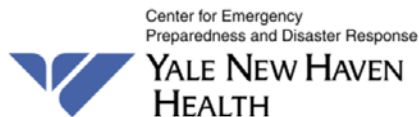
Planning: **New**



A pandemic influenza could result in an estimated 30-40% reduction of workforce and significant absenteeism for up to 12 weeks, negatively impacting patient care and essential services. How will your organization manage the increased demand for services, staff, supplies and other critical resources?

The Yale New Haven Center for Emergency Preparedness and Disaster Response (YNH-CEPDR) can assist your organization in preparing for a pandemic through services such as:

- Development of a business impact analysis, continuity of operation plan and business continuity plan
- Development of pre-event communication messages, workforce surge impact, recovery resources and recovery team task lists
- Assessments of current pandemic influenza planning; review of emergency operations plans and emergency management plans (EMPs) for compliance with The Joint Commission, NIMS, CMS, OSHA, CDC and NFPA requirements
- Online, instructor-led or WebEx training courses recommended for health care workers in acute care hospitals, community health centers, home health agencies, urgent care centers, skilled nursing facilities and public health agencies to address the impact and preparations required pre-pandemic event and during a pandemic event
- Assistance with conducting tabletop exercises to discuss the Incident Command System (ICS), implementation of the EMP, communication practices and mitigation practices during a pandemic influenza event To learn more how YNH-CEPDR can assist your organization, please call (203) 688-3224 or e-mail center@ynhh.org.



Positions Available at YNH-CEPDR

YNH-CEPDR has openings for a Drills and Exercise Specialist and a Senior Financial Contracts Analyst. Please contact YNH-CEPDR at (203) 688-3224 or center@ynhh.org for more information, or apply online at <http://www.ynhscareers.org/>.

Preparedness: **New**

- As Washington celebrated the inauguration of a new president, background planning for a worst-case scenario such as an attack on our homeland. All are deeply aware of the chilling possibility that looms over the transition of power from President Bush to President Obama. The Bush-Obama transition teams have been preparing an unprecedented set of scenarios that could come to the next White House. Scenarios included the US response to events similar to the London and Madrid train bombings and the African Embassy bombings. Other crisis scenarios include a major conflict between India and Pakistan, disruption of energy supplies to the U.S. or a North Korean nuclear explosion, with options for how to respond to them. To read more about these preparations, please visit: <http://www.cbsnews.com/stories/2009/01/18/sunday/main4731897.shtml>.



Credit: Tarmizy Harva/Reuters

Indonesia, which is located in an area of intense seismic activity, is extremely vulnerable to earthquakes and the risk of another tsunami such as the one that devastated the country as well as a number of other countries bordering the Indian Ocean in 2004. Indonesia's government has taken measures to improve readiness for such events such as installation of an early warning system and periodic evacuation drills. The Manado tsunami drill Saturday was based on a magnitude-8 earthquake, sending people scurrying through the pouring rain to higher ground for safety. Police and soldiers kept order and simulated the rescue of those trapped inside a shopping mall and in two-story shops, while emergency services were tested for their readiness. For more information about these activities, please visit: http://news.yahoo.com/s/nm/20081227/wl_nm/us_indonesia_tsunami_drill.



According to the National Intelligence Council report *Strategic Implications of Global Health*, a number of infectious and non-infectious health conditions shape the world we live in—and by extension can affect US interests. Infectious diseases for the foreseeable future, however, will remain the top health-related threat to US national security: Issues such as infectious disease outbreaks from diseases originating overseas (such as SARS and HIV), impact on military operations, the effects on the socioeconomic status of developing countries, diplomatic incidents related to travel embargoes and an increased possibility of biowarfare agents being used at home and abroad are discussed. To read the entire report, please visit: http://www.dni.gov/nic/PDF_GIF_otherprod/ICA_Global_Health_2008.pdf.

- New evidence uncovered by Oxford University scientists suggests that very large earthquakes can trigger an increase in activity at nearby volcanoes. "An analysis of records in southern Chile has shown that up to four times as many volcanic eruptions occur during the year following very large earthquakes than in other years. This 'volcanic surge' can affect volcanoes up to at least 500 km away from an earthquake's epicenter." The most unanticipated revelation of this discovery was the great distance from the earthquake rupture to where these eruptions occurred and the length of increased volcanic activity. For additional news on this discovery, please visit: <http://www.sciencedaily.com/releases/2009/01/090110084653.htm>.



Lieberman / Napolitano

Homeland Security and Governmental Affairs Committee Chairman Sen. Joe Lieberman, ID-Conn., met with Secretary of the Department of Homeland Security Janet Napolitano to discuss homeland security priorities for the 111th Congress and the incoming Administration. Lieberman described his 47-minute meeting with Secretary Napolitano as a "very good discussion" and said Napolitano was a "superb" choice. The Secretary of Homeland Security, in current reality, is as critically important to our national security as the Secretary of Defense and the Secretary of State, and in some ways, more urgent," said Lieberman. To read the press release, please visit: http://hsgac.senate.gov/public/index.cfm?FuseAction=PressReleases.Detail&Affiliation=C&PressRelease_id=0a4d8512-3c0e-4dec-aa07-1a73f7676e83&Month=1&Year=2009.

- Modern steel buildings have long been considered among the most sturdy in the event of a major earthquake. But a model of a massive quake in Southern California has sparked debate among scientists and engineers over whether these structures are more vulnerable than previously thought. The Great Southern California ShakeOut, the nation's largest quake drill, suggested that about five high-rise steel buildings in the region would collapse in the modeled magnitude 7.8 quake along the San Andreas Fault. To read the Los Angeles Times article, please visit: http://www.latimes.com/news/printedition/california/la-me-steeltower2-2009jan02_0.293347.story.

Disasters around the World: **New**



Ferry rescue attempt with waves as high as 19 feet

The Teratai Prima ferry left Pare Pare on Sulawesi island in central [Indonesia](#) on Saturday evening for Samarinda, East Kalimantan. The ferry overturned about 4 a.m.

Sunday off the coast of Majena in west Sulawesi after being pummeled with waves as high as 19 feet, Thirty of the 267 passengers were rescued survivors said. Ferries are an important source of transportation between Indonesia's 17,000 islands. For the latest information, please visit:

http://www.cnn.com/2009/WORLD/asiapcf/01/12/indonesia.ferry/index.html?eref=rss_topstories.

- Tropical cyclone Fanele, packing winds of 75 kt with gusts to 90 kt struck Madagascar in the Southern Indian Ocean on January 21st. and was the second tropical system to hit the island within the last two days. The combined storms left one dead, 27 injured and almost 1000 homeless. For further information, please visit:

<http://metocph.nmci.navy.mil/jtwc/warnings/h0909web.txt> or http://www.news24.com/News24/Africa/News/0,,2-11-1447_2456088,00.html.

- There remains no significant tropical weather activity in the central, eastern and northwest Pacific Ocean or the Northern Indian Ocean. The Atlantic Hurricane season ended on November 30th.



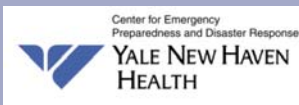
U.S. Airways A320 on the Hudson River

Quick reactions and a well-trained flight crew averted a potentially deadly aviation disaster when a US Airways A320 lost both engines after an apparent collision with a

flock of Canadian geese. The aircraft, which had departed New York's LaGuardia Airport, was safely brought down in the Hudson River with no serious injuries. The captain's decision to land the crippled plane in one of the busiest parts of the river facilitated the quick arrival of rescue vessels and thus minimized the possibility of hypothermic injuries due to the frigid water. To read the initial report of the incident on January 15th, please visit: <http://wcbstv.com/breakingnewsalerts/us.airways.crash.2.909535.html>.

Questions, Comments, Suggestions or to Subscribe

For questions, comments, suggestions or to subscribe to the Preparedness Report, please e-mail us at center@ynhh.org. www.yalenewhavenhealth.org/emergency



Preparedness: **New** (Continued)

- HHS has announced the launch of "MedicalCountermeasures.gov," a new Web-based system that nongovernmental stakeholders can use to request a meeting with representatives of designated federal public health agencies regarding medical countermeasures for public health threats. Relevant agencies include the National Institutes of Health, HHS' Biomedical Advanced Research and Development Authority, the U.S. Food and Drug Administration and the U.S. Department of Veterans Affairs. The meetings are intended to foster information sharing among the various agencies and the private sector. To view a more detailed description published in the *Federal Register* please visit <http://edocket.access.gpo.gov/2008/E8-30150.htm>.



Credit: U.S. Department of Energy

Senior-level government and industry officials in a two-day cybersecurity simulation exercise that concluded on December 18th said it demonstrated the importance of a cross-sector, integrated approach to cybersecurity. The simulation also illustrated some challenges the Obama administration and next Congress will face in terms of cybersecurity. The 230 participants in the Cyber Strategy Inquiry came from the public and private sectors in areas such as homeland security defense, transportation, telecommunications and information technology and intelligence. To view the results of this exercise, please visit: <http://fcw.com/Articles/2008/12/18/Cyberattack-simulation-highlights-security-challenges.aspx>.

Disasters around the World: **New** (Continued)



Credit: Getty Images

FEMA has declared several areas in the United States as disaster areas, eligible for assistance in recovery. Vermont, Massachusetts and Maine were declared as disaster areas due to episodes of severe storms and flooding occurring in mid to late December of 2008. Additionally, FEMA provided assistance with firefighting costs for the Olde Stage Fire, located in Boulder County, Colorado just north of the Boulder city limits. Finally, former President Bush declared an

emergency in the District of Columbia and ordered federal aid to supplement the District's response efforts in support of the 56th Presidential Inauguration. The declaration makes available funding and support for the purposes of ensuring the District of Columbia and the federal government are optimally prepared and postured to respond to the 56th Presidential Inauguration, beginning on January 17 through January 21. For further information and instructions for applying, please visit:

<http://www.fema.gov/news/event.fema?id=11029> (Vermont),
<http://www.fema.gov/news/event.fema?id=10968> (Massachusetts)
<http://www.fema.gov/news/event.fema?id=11008> (Maine),
<http://www.fema.gov/news/event.fema?id=10988> (Colorado)
<http://www.fema.gov/news/event.fema?id=11028> (District of Columbia)

Storm Surge Barrier Going Up to Protect New Orleans



Credit: USACE

Defense of Greater New Orleans' most vulnerable area from storm surge has begun with the groundbreaking for the Inner Harbor Navigation Canal Lake Borgne Surge Barrier Project, the largest design-build civil works project in Corps history. When completed, the 26 foot high, \$700 million surge barrier, similar to a flood wall but much larger, will run for nearly two miles near the confluence of the Gulf

Intracoastal Waterway and the Mississippi River Gulf Outlet. The surge barrier is a new feature, authorized by Congress in 2006, the year after hurricanes Katrina and Rita devastated the area. It is expected to reduce the risk of storm damage to some of the region's most vulnerable areas - New Orleans East, metropolitan New Orleans, the 9th Ward, St. Bernard Parish and Gentilly - to a one percent chance in any given year. For more information, please visit: <http://www.ens-newswire.com/ens/dec2008/2008-12-29-091.asp>.

Protecting the Health care 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 your facility's ability to provide ongoing health care 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.

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 108: Emergency Preparedness for Health care with NIMS (New) Hospitals and many health care organizations are still required to implement the National Incident Management System (NIMS) education and training for appropriate personnel. YNH-CEPDR has developed Emergency Preparedness for Health care Professionals with NIMS (EM 108) as an equivalent IS 700 NIMS course. This course is time-efficient and relevant to public health, hospital and health care workers. The course provides information and action steps all employees can take to ensure a work environment prepared for disasters.

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.

EM 142: Incident Command Systems for Health care with NIMS (New) This course is designed to help health care 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 Health care Organizations. EM 142 is designed for all those who may serve in a leadership role in a health care organization during an emergency or disaster

YNH-CEPDR also offers a number of non-NIMS offerings that address important issues in health care preparedness. Such as Special Populations, Protection of the Health care Workforce and compliance with Joint Commission/CMS regulations. These courses may also be previewed at <http://ynhhs.emergencyeducation.org/>. YNH-CEPDR is committed to ensuring that our courses remain timely and current with best practices and cutting-edge content.

EM 106: Emergency Preparedness for Health care – At Work and At Home (New) Emergency preparedness is the responsibility of every health care 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 health care employees.

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.

EM 121: N95 Respirator and Personal Protective Equipment (PPE) Training for Health care 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.

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.

EM 210: Advanced Radiological Emergency Preparedness for Clinicians (New) 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.

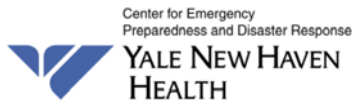
EM 220: Best Practices for the Protection of Hospital-Based First Receivers, Operations Level Information topics include preparation for health care workers, such as emergency department clerks and clinicians who are assigned to work in the contaminant-free areas but who may need to identify possible 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.

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.

EM 260: Geriatric Preparedness, Triage and Treatment in Disasters (New) A course that 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 on any of our courses or to develop a customized course for your specific needs, please contact us at (203) 688-3224 or center@ynhh.org.

Programs and Services



YNH-CEPDR is committed to developing and delivering effective and scalable services that advance health care planning, preparedness and response for emergencies and disasters. YNH-CEPDR offers the following services to hospitals, other health care 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, or visit our web site at <http://www.yalenevhealth.org/emergency/index.html>.

UPCOMING Training and Education

DATE	TIME	EVENT	LOCATION
1.29.09	1:00 p.m. – 2:30 p.m. EST	Mass Antibiotic Dispensing: Partnering with Tribal Governments and Communities <i>Sponsored by CDC</i>	Webcast Please register at: http://www2a.cdc.gov/TCEOnline/
2.11.09 to 2.14.09	See Web Site	Preventive Medicine, 2009 <i>Sponsored by The American College of Preventive Medicine</i>	Hyatt Regency Century Plaza 2025 Avenue of the Stars Los Angeles, CA 90067 Please register at https://www.registrationfactory.com/v3/default.cfm?EventUUID=60C377B2
2.18.09 to 2.20.09	See Web Site	Public Health Preparedness Summit, 2009 <i>Sponsored by The National Association of County and City Health Officials</i>	Sheraton San Diego Hotel & Marina 1380 Harbor Island Drive San Diego, CA 92101 Please register at http://www.phprep.org/2009/register/
3.1.09 To 3.4.09	See Web Site	2009 FAH Public Policy Conference and Business Exposition <i>Sponsored by the Federation of American Hospitals</i>	Marriott Wardman Park Hotel 2660 Woodley Road, N.W. Washington, D.C. 20008 Please register at http://www.fah.org/fahCMS/Documents/Annual%20Meeting/FAH%20Annual%20Conference%20and%20Expo/09_FAH_Conf_Promo3.pdf

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