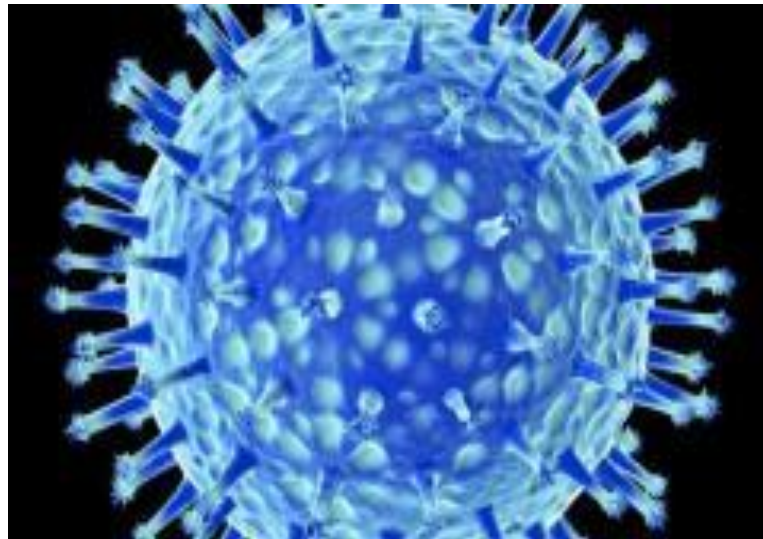


# Public Health Emergency Preparedness Incident Response & HPAI



*Maine Center for Disease  
Control and Prevention*

*An Office of the  
Department of Health and Human Services*

*Paul R. LePage, Governor*

*Mary C. Mayhew, Commissioner*

# Two Federal Programs with Aligned Capabilities and Missions

## **U.S. DHHS - CDC**

- The Public Health Emergency Preparedness Program (PHEP) Cooperative Agreement is housed with the U.S. Department of Health and Human Services, Centers for Disease Control and Prevention (CDC).
- The focus of the PHEP funds is to ensure that Maine's communities are prepared to respond and recover from public health emergencies.
- In 2011, CDC released 15 PHEP Capabilities which are designed to guide whole of community public health preparedness planning.

## **U.S. DHHS - ASPR**

- The Healthcare Preparedness Program (HPP) Cooperative Agreement is housed within the U.S. Department of Health and Human Services, Office of the Assistant Secretary for Preparedness and Response (ASPR).
- The focus of the HPP funds is to ensure that Maine's healthcare system is prepared to respond and recover from emergencies impacting Maine's healthcare systems.
- In 2011, ASPR released eight Healthcare Preparedness Capabilities which are designed to facilitate and guide healthcare preparedness planning.

# CDC / ASPR Preparedness Capabilities

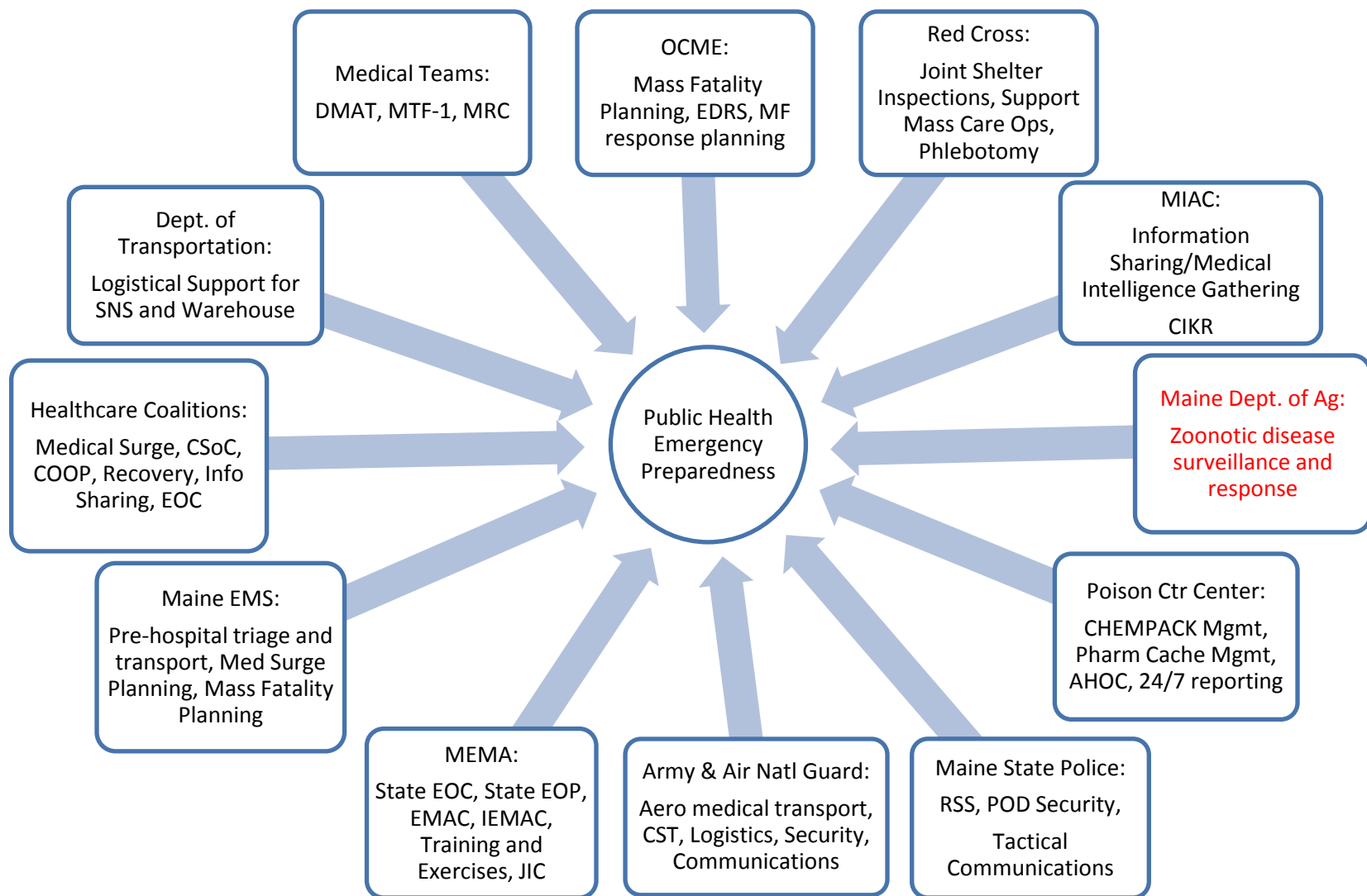


## Capabilities Overview

Public Health Preparedness Capabilities	Healthcare Preparedness Capabilities
1 Community Preparedness	1 Healthcare System Preparedness
2 Community Recovery	2 Healthcare System Recovery
3 Emergency Operations Coordination	3 Emergency Operations Coordination
4 Emergency Public Information and Warning	4
5 Fatality Management	5 Fatality Management
6 Information Sharing	6 Information Sharing
7 Mass Care	7
8 Medical Countermeasure Dispensing	8
9 Medical Materiel Management and Distribution	9
10 Medical Surge	10 Medical Surge
11 Non-Pharmaceutical Interventions	11
12 Public Health Laboratory Testing	12
13 Public Health Surveillance and Epidemiological Investigation	13
14 Responder Safety and Health	14 Responder Safety and Health
15 Volunteer Management	15 Volunteer Management

Hospital Preparedness Program - Public Health Emergency Preparedness Grant Alignment

# PHEP/HPP External Partners



# Maine CDC's Initial Response Team (IRT)

- The Maine CDC Initial Response Team (IRT) is comprised of Maine CDC Administrators and key decision-makers.
- The IRT members are:
  - Director, Maine Center for Disease Control and Prevention
  - Deputy Director, Maine Center for Disease Control and Prevention
  - State Epidemiologist
  - Director, Division of Public Health Systems
  - Director, Division of Infectious Disease
  - Director, Division of Environmental Health
  - Director, Division of Population Health
  - Director, Office of Health Equity
  - Director, Public Health Emergency Preparedness

# IRT Activation Triggers

- Single case of a disease caused by a Category A agent(s) (i.e. anthrax, tularemia, smallpox, botulism, viral hemorrhagic fevers, or plague)
- Any specimen(s) or sample(s) (clinical or environmental) submitted to public health for analysis that tests positive for a potential bioterrorism-related organism
- Large number of cases with unusual clusters of disease and patients with similar symptoms, diseases, or deaths
- **Novel virus strains that could spread through Human-to-Human Transmission**
- Healthcare surge capacity exceeds the healthcare systems ability to provide medical care
- Inability of the healthcare system to obtain supplies or equipment for durations longer than 96 hours
- Resource requests that cannot be managed by a single division or program
- Resource requests that requires a department-wide response
- Resource requests for public health or medical resources from federal response agencies
- EMAC resource requests either to or from a neighboring state health department

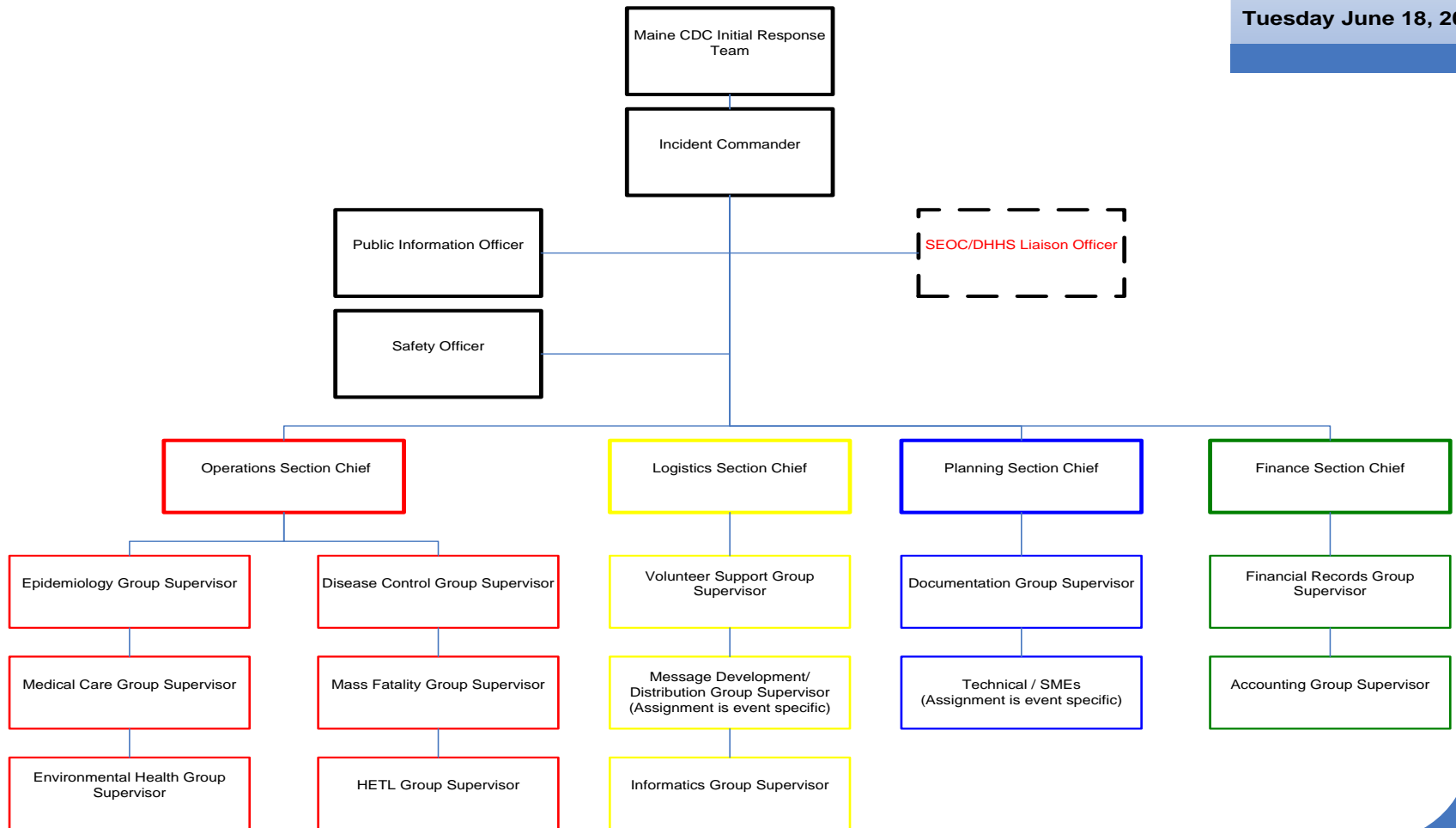
# IRT Functions

- The IRT will convene in-person or virtually by conference call by dialing 1-877-455-0244 and entering the participant passcode 6681820529 whenever an incident or emergency is imminent. Upon convening, the IRT will:
  - Assess the nature of the incident or emergency (CBRNE, Natural Hazard, Infectious Disease, etc)
  - Assess the location(s) of the incident or emergency
  - Assess the size, scope, and severity of the incident or emergency
  - Determine what types of resources, services, and personnel will be required to implement a public health emergency response
  - Determine which public health ICS staff assignments will be activated
  - Determine how and when various components of the Public Health Emergency Risk Communication Plan will be utilized
  - Determine which response plans will be utilized in the response efforts
  - Determine whether to partially activate or fully activate the Maine CDC Public Health Emergency Operations Center (PHEOC)
  - Determine whether to partially activate or fully activate the Maine CDC Emergency Phone Bank

# Activation of the Public Health ICS

## Maine CDC All-Hazards Incident Command Structure

Tuesday June 18, 2013





# Activation of the Public Health EOC

- Central location from which to provide logistical support to public health and healthcare responders



# PHEOC/ICC Levels of Activation

- The Maine CDC utilizes three Levels of Activation for the Public Health Emergency Operations Center (PHEOC).
- The Level of Activation is scalable and dependent on the size, scope, and severity of the potential or actual threat

<b>Level 3: Monitoring &amp; Assessment</b>	This level is a monitoring and assessment phase where a specific threat, unusual event, or developing situation is actively monitored. Notification will be made to those who will need to take action as part of their everyday responsibilities. The PHEOC is staffed only during regular working hours.
<b>Level 2: Partial Activation</b>	Partial activation is typically limited agency activation. Those staff with a role in the incident response are activated and required to report to the PHEOC, which is located in room 16 on the 1 <sup>st</sup> floor of the Maine CDC.
<b>Level 1: Full Activation</b>	In full scale activation, the PHEOC is activated on a 12 hour operational period in response to an imminent threat or occurrence of a disaster. All pre-identified PHEOC staff will be notified through the Maine HAN and required to physically report to the PHEOC within two hours of being notified.

# Strategic National Stockpile (SNS)

- Responsible for sustainment of PHEP Capability 8 Medical Countermeasure Dispensing and Capability 9 Medical Materiel Management and Distribution
  - Works with partners to ensure that the public and critical infrastructure receive timely prophylaxis (e.g. through Points of Dispensing or PODs)
  - Works with private and public sector partner to ensure Maine's ability to efficiently receive, warehouse, and distribute medical countermeasures throughout the state (e.g. to hospitals and PODs)
- Serves as Logistics Section Chief in emergency response efforts
  - SNS coordinator manages PHEP warehouse in Winthrop





# Medical Material Management & Distribution





# Medical Material Management & Distribution





# Medical Material Management & Distribution



# Maine Responds & Medical Reserve Corps



The PHEP *Volunteer Management Coordinator* oversees the development and implementation of our **ESAR-VHP** program in Maine (called “Maine Responds”).



**Maine Responds** is a website used to organize and manage all the data in our statewide registry of public health volunteers; including background checks, credential verification and communication for both exercise and event deployment).



One specific program we are working with to develop our PHEP volunteer cadre is the **MRC** program (which has similar roots as ESAR-VHP and can be integrated well into a community by community basis).

# MaineHAN / Bed Availability Tracking (HAvBED) / Emergency Communications

## MaineHAN

- Provides emergency and routine messaging to over 6000 users from all facets of public health.
- Used by other public health and emergency management agencies as their primary alerting tool.

## HAvBED Tracking

- Provides near real-time tracking of bed availability (8 bed types, staffed and available) and other resources at hospitals and health centers.
- Resource tracking system e.g. blood, surgical kits, generators, etc.

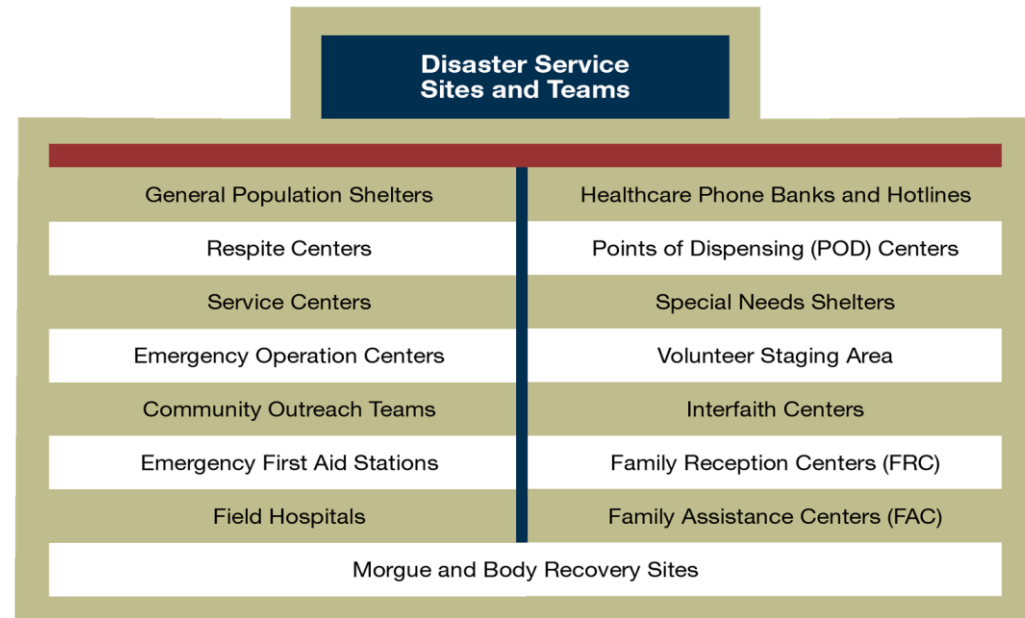
## Emergency Communications

- Manages tactical radio communications during public health events.
- Serves as Communication Branch Director in the Public Health Emergency Operations Center.
- Point of contact for upcoming public health MSCommNet equipment installations.



# Disaster Behavioral Health (DBH)

- Provide behavioral health and spiritual care professionals with the knowledge and skills to respond to the behavioral health, and spiritual needs of vulnerable populations, including children, seniors and functional needs and their families, in the immediate aftermath of disasters and on-going public health emergencies.
- Build a trained network of disaster behavioral health and spiritual care professionals throughout Maine able to provide psychological first aid and skills for psychological recovery.
- Strengthen the disaster response interface between behavioral health and emergency managers, healthcare providers and responders throughout Maine.
- Achieve a workable state of disaster behavioral health preparedness and readiness in Maine Behavioral Health Organizations.



Thank You!