

Washington State Department of Health
**Public Health Emergency
Preparedness and Response Program**



**Annual Summary Report
2011 - 2012**



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The Washington State Department of Health

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Peggy Shapiro, Washington State Hospital Association

**Public Health
Emergency
Preparedness
and Response
(PHEPR)**

**Annual Summary
2011-2012**



On the cover:

During the Evergreen Earthquake Exercise in June, the PHEPR program participated in the first collaboration ever between the Receive, Stage and Store (RSS) Task Force and the US Army Reserve’s air assets to deliver emergency medical resources to local partners.

DOH # 821-081
December 2012

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Mary C. Selecky
Secretary of Health



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Special Assistant

The Washington State Department of Health is pleased to present the Public Health Emergency Preparedness and Response Program 2011-2012 Annual Summary. The program works closely with local, state, tribal, federal and private partners to make sure Washington is ready for any public health emergency.

Our activities include everything from planning, training personnel and conducting exercises to providing on-the-ground support during actual emergencies. During the past year, for example, we successfully tested statewide systems through a series of exercises called Evergreen Earthquake. And during the widespread power outages caused by January snowstorms, our agency continued to provide essential public health functions.

While this report captures some of our program's key accomplishments and activities, no report can adequately describe the continued dedication of staff and partners during very difficult and challenging times. The public health system remains committed to helping the people of our state prepare for, respond to and recover from public health emergencies.

About this report

The Public Health Emergency Preparedness and Response (PHEPR) 2011-2012 Annual Summary Report describes activities conducted during the grant year from August 2011 through August 2012. These activities are funded by the Department of Health and Human Services (DHHS) through both the Centers for Disease Control and Prevention (CDC) and the Assistant Secretary for Preparedness and Response.

The report reflects the work done by the department to prepare the state's public health and healthcare system. The program work aligns with federal DHHS capabilities for public health and healthcare preparedness (see page 4). These capabilities guide public health preparedness planning nationwide, by establishing standards for public health and healthcare preparedness and response.

Preparing the State for Public Health Emergencies

The Public Health Emergency Preparedness and Response program is a federally funded statewide program essential to better assure that the state of Washington can respond to a variety of public health emergencies and other disasters.

The work of the Public Health Emergency Preparedness and Response (PHEPR) program meets multiple goals identified in the agency's strategic plan. The PHEPR program promotes efficient use of staff talents and expertise to improve health outcomes during emergencies and disasters. PHEPR staff in offices throughout the agency work under the same program vision, mission and goals.

Vision Statement

Washington State responds effectively to public health threats and emergencies.

Mission Statement

The Public Health Emergency Preparedness and Response Partnership prepares for and responds to major acute threats and emergencies, including terrorism, that impact the health of the people of Washington State.

Program Goals

- Prepare systems and partners for effective emergency response.
- Work toward assuring effective disease surveillance systems are in place statewide.
- Develop surge capacity for the health system response.
- Increase internal and external awareness of public health threats and associated activities.

Key Accomplishments

2011-2012

January snowstorm

Evergreen Earthquake exercise series

WAresponds
WA-SECURES
WAserv

Hospital Preparedness Program (HPP) and
Public Health Emergency Preparedness (PHEP) Capabilities Alignment

COOP exercise planning

Public Health Ready Award



In 2012, the Washington State Department of Health achieved recognition as a “Public Health Ready” agency in one of only three states in the nation thus far. This is the only competency-based recognition program in the country for public health preparedness programs.

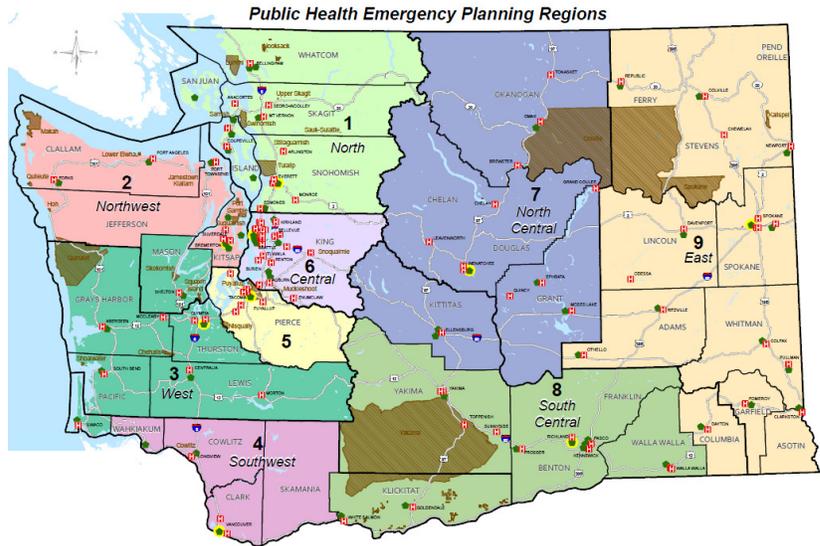
Key events for the Public Health Emergency Preparedness and Response (PHEPR) program during 2011-2012 included:

- January snowstorm — The snow and ice storm caused widespread power outages in January 2012.
- Evergreen Earthquake — The multi-agency functional and operational exercises took place in June 2012.
- WAresponds - New online program launched which contains the WA-SECURES and WAserv applications.
- HPP and PHEP aligned capabilities — For the first time this year, the agency operated under aligned capabilities for public health and healthcare preparedness.
- Continuity of Operations Plan (COOP) — Staff planned for an agency-wide exercise to test the COOP plan.
- Public Health Ready Award — This year the agency became one of only three state health departments in the nation to achieve recognition as “Public Health Ready.”

Looking ahead: Future funding will be used to sustain or continue developing public health emergency response capabilities to increase the efficiency and the effectiveness of emergency public health operations in Washington State.

Working with Partners

The agency collaborates with partners to better prepare Washington State for all types of disasters and emergencies.



Local Health Jurisdictions

Public health emergency response starts at the local level. The agency works closely with Washington 35 local health jurisdictions by providing technical assistance, subject matter expertise and funding to build capabilities for local public health response. Local health jurisdictions contribute knowledge, expertise and community support to statewide emergency preparedness efforts. Nine jurisdictions also serve as regional leads, providing resources, guidance, and opportunities for cross-jurisdictional collaboration to local partners.



Washington State Hospital Association

The Washington State Hospital Association is a membership organization representing community hospitals and several health-related organizations statewide. The association provides issues management and analysis, information, advocacy and other services. The association also assists with policy recommendations on a variety of issues such as strategic planning, medical countermeasures, personal protective equipment and training, and helps foster statewide collaboration between its members and the public health system at both local and state levels.

Tribal Partnerships

The Public Health Emergency Preparedness and Response program offers federal grant funding, technical assistance and support to 29 tribes in Washington State for emergency preparedness activities.



Paddle to Squaxin, July 2012

The agency provides funding to help tribes build public health and healthcare emergency response capabilities in their communities. The agency also works with the Northwest Portland Area Indian Health Board, the Northwest Tribal Emergency Management Council, and the American Indian Health Commission to further develop a comprehensive emergency planning approach for tribes. In addition, the agency works with the Northwest Center for Public Health Practice in the planning and evaluation of annual Tribal Emergency Preparedness conferences.

The agency's partnership with tribes has led to work that is nationally recognized for excellence. Collaborative efforts include:

- *9th Annual Tribal Public Health Emergency Preparedness Conference*
The 2012 conference, hosted by the Squaxin Island Tribe in Shelton, brought together tribal, state, local and federal agency staff to discuss the collaboration and training for tribal emergency preparedness and response.
- *Regional Healthcare Coalition(s)*
Tribes have been active in regional exercises through the healthcare coalitions. Training and medical surge equipment has been provided through grant funds provided by Assistant Secretary for Preparedness and Response and annual PHEPR contracts. Each tribe has a seat at their respective healthcare coalition tables.
- *American Indian Health Commission (AIHC)*
The work of AIHC on behalf of the agency helps tribes determine their individual needs at the tribal community level to determine their individual needs allows for self-determination in how funds are allocated to meet ASPR and CDC capability requirements.
- *Indigenous Health Working Group*
Tribes in Washington are working with other Northwest tribes and First Nations from British Columbia to discuss and collaborate about cross-border public health medical issues.

Additional Partners



The agency works with a number of public and private healthcare sector partners across the state to coordinate emergency preparedness and response abilities.



Region 1 field exercise, May 2012

Regional Emergency Medical Services and Trauma Care Councils

The Regional Emergency Medical Services and Trauma Care Councils are important partners. Many play key roles in leading regional healthcare coalitions that help better prepare the state's healthcare organizations for emergencies. These councils work closely with local public health, healthcare organizations and the Washington State Hospital Association. They work to assure the healthcare systems have response plans in place, exercise their plans regularly and participate in emergency response training.

Additional Partners Contributing to PHEPR Work

- Washington Association of Community and Migrant Health Centers
- Home Care Association of Washington
- American Indian Health Commission
- Washington Poison Center
- Department of Social and Health Services
- Washington Emergency Management Division (Washington Military Department)

**Public Health
Emergency
Preparedness
Capabilities**

**Achieving
Preparedness**

The agency’s preparedness and emergency response work is guided by public health preparedness capabilities

Starting in 2012, two federal programs aligned their preparedness activities, creating an integrated list of capabilities.

The Public Health Emergency Preparedness (PHEP) program within the Centers for Disease Control and Prevention outlines 15 public health preparedness and response capabilities.

The Hospital Preparedness Program (HPP) within the Office of Assistant Secretary for Preparedness and Response has identified eight healthcare preparedness capabilities.

PHEP and HPP Capabilities

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

Community Preparedness

The agency works with partners to prepare for emergencies.



Sally Abbott, RN, leading a volunteer training session during the Evergreen Earthquake exercise, June 2012

Community and Healthcare System Preparedness is the ability of local communities and healthcare systems to prepare for, respond to and withstand incidents that have public health and medical impacts.

Highlights

- Regional Healthcare Coalitions met regularly and included a cross section of community and healthcare partners who created emergency response plans, organized training opportunities, and hosted emergency exercises.
- Resources and partnerships for coalition members were presented at Coalition meetings, including: the renal network, dialysis, safe drinking water, crisis standards of care, vulnerable populations and mental/behavioral health.
- Community preparedness was improved by the training provided to local Medical Reserve Corps volunteers from across the state.
- The agency partnered with the Department of Social and Health Services on a project to map vulnerable populations in the state, improving responders' ability to reach those who may need additional help during disasters.

Community Recovery

The agency works with partners to respond to and recover from emergencies.



An alternate Emergency Operations Center in use during an agency exercise

Community recovery is the ability to work with community partners, such as healthcare organizations, business, education and emergency management to plan and support the rebuilding of public health, medical and mental/behavioral health systems to pre-incident levels of functioning, and to improved levels where possible.

Highlights

During the past grant year, the agency:

- Partnered with over 100 federal, state, local, tribal, non-governmental, private and international partners to participate in the Evergreen Quake Exercise Series. This exercise series included a tabletop exercise for government agencies.
- Planned a full-scale Continuity of Operations (COOP) exercise to test the agency's decision making process, communication strategies and the relocation of the Agency Emergency Operations Center.
- Continued to be an active member of the Washington Restoration Organization State Agency Workshop to help provide the groundwork for the development of the Washington State recovery plan.



Simulation Cells ("SimCell") like this are used during exercises to simulate real situations

3 — Emergency Operations

2011-2012 Annual Summary

Washington State Department of Health
Public Health Emergency Preparedness and Response

Emergency Operations Coordination

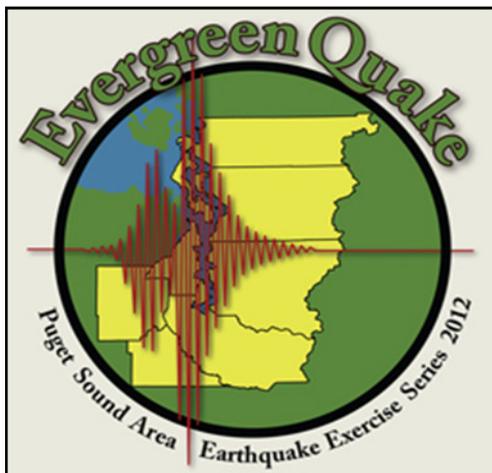
The agency maintains processes consistent with the National Incident Management System for overseeing, organizing and coordinating the state level response to events with public health or medical implications.



Washington State Department of Health's Emergency Operations Center (EOC) in operation during the June 2012 Evergreen Earthquake exercise

Highlights

The Emergency Operations Center (EOC) continues to be exercised on a regular basis. This year the EOC was used during a winter storm and during the Puget Sound area's Evergreen Earthquake series of exercises. The Evergreen Quake series tested local, state, federal and tribal governments' ability to respond to large-magnitude earthquakes over the course of these exercises.



The agency participated in Evergreen Quake 2012 to test and improve emergency operations coordination of local, state, federal and tribal agencies

The agency continues to maintain a robust capability in its emergency operations coordination by:

- Maintaining a 24/7 agency Duty Officer.
- Maintaining and upgrading equipment and software systems.
- Updating the comprehensive training and exercise plan.
- Testing a virtual EOC during the functional and logistics portions of the Evergreen Earthquake exercise.

The dates of the Evergreen Earthquake exercises were:

- Functional Exercise (June 5-6, 2012).
- Logistics Exercise (June 12-14, 2012).
- Recovery Tabletop Exercises (August 8 and 22, 2012).

Emergency Public Information and Warning

The agency develops and disseminates information, alerts and warnings to the public and to emergency responders.



The agency's
"Home Emergency Resource Guide"
is now available in seven languages



This year, the agency launched a new and improved website. As part of that effort, the emergency communications website for the public and the agency's partners was redesigned based on user feedback. The result is a comprehensive resource for users that's easier to access and navigate.

Highlights

During the past grant year, the agency:

- Developed information and materials — including Web resources for the public and partners — to support agency outreach efforts for Washington's pertussis epidemic.
- Directly responded to hundreds of public questions on emergency topics from tsunami debris to carbon monoxide issues through the prepare@doh.wa.gov email box.
- Reprinted the popular booklet "Prepare: Home emergency guide," and translated it into six languages. Several Washington counties also reproduced and distributed it.
- Provided several risk communication trainings for public health and emergency response system partners. Also developed new Just-in-Time (JIT) communication training resources for medication center volunteers.

Fatality Management

The agency coordinates with partners to better assure proper recovery, handling, identification, tracking, storage, transportation and disposal of human remains and personal effects and helps facilitate access to mental/behavioral health services to those involved in the incident.



Pictured above: Volunteers practice triaging casualties during a drill.

Managing large amounts of human remains becomes a priority during events resulting in mass fatalities.

Cascadia Subduction Zone Earthquake/Tsunami Planning

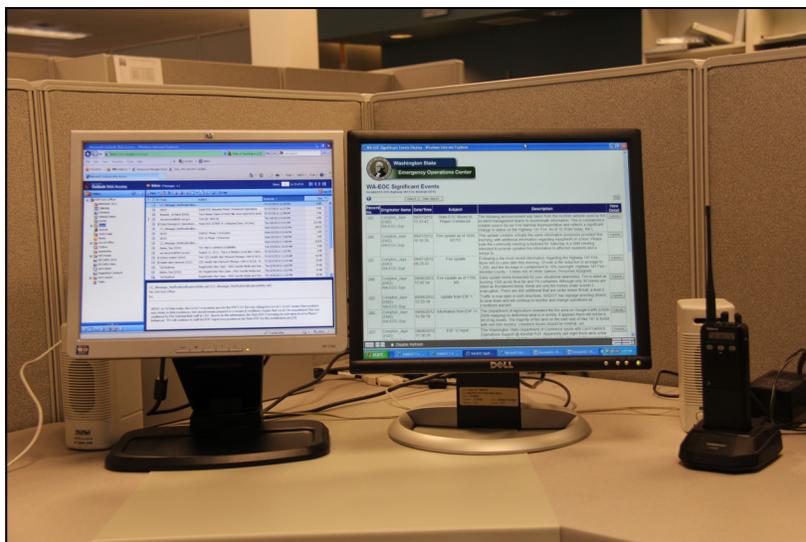
The agency began participating in planning for a devastating earthquake, called the Cascadia Subduction Zone Earthquake, that may encompass the entire west coast. Federal and state officials have met and will continue to meet to plan the fatality management and public health component of this response to such a catastrophic disaster. Planning for this exercise will span several years.

In such a widespread disaster, a high number of fatalities is expected. Planning for handling these fatalities is included in this effort. To address large numbers of fatalities, the planning includes developing various exercise scenarios, building courses of action for phases of response and establishing partnerships to coordinate response.

Work on developing services for Fatality Management will continue for the next several years.

Information Sharing

The agency conducts multijurisdictional and multidisciplinary exchange of health-related information and situational awareness information among federal, state, local, tribal and private sector response partners on a routine basis, as well as in preparation for and in response to public health events.



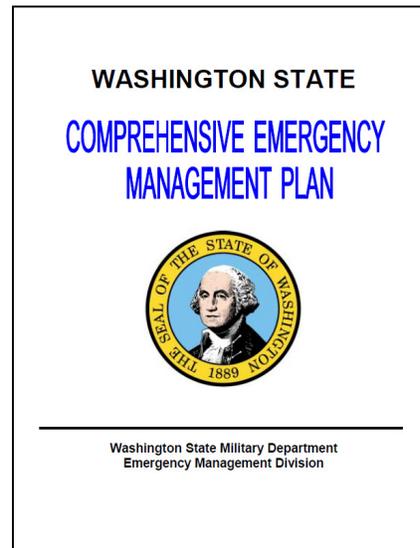
Washington State's Web EOC can be operated from one's own desktop

Highlights

- The agency adopted a new secure internet-based tool for sharing situational awareness information among hospitals, laboratories and other public health agencies.
- The agency migrated the Health Alert System to a new platform that provides greater flexibility for information sharing with partners. This system alerts public health partners to situations with public health impacts.
- Agency PHEPR staff were trained as Fusion Center Liaison Officers to share pertinent public health information with emergency preparedness, law enforcement and response partners as it becomes available.

Mass Care

The agency collaborates with the State Emergency Management Division, DSHS and the American Red Cross to support mass sheltering efforts, and works to identify and fill the public health role in sheltering efforts.



Highlights

The agency works very closely with the Department of Social and Health Services (DSHS), the lead agency for mass care sheltering, to provide technical expertise and guidance on public health issues related to mass care.

During the 2011-2012 grant year, PHEPR staff participated in a DSHS-led Emergency Support Function 6 (ESF6, Mass Care) work group to clarify roles of state agencies with ESF6 responsibilities. The agency provided input to DSHS for the ESF6 Annex of the Washington State Comprehensive Emergency Management Plan (CEMP).

During this year, PHEPR staff:

- Collaborated on and contributed to the Mass Care sheltering plan.
- Participated in state, local and federal work groups to address the issue of general population shelters related to disaster planning.
- Worked closely with local, state and federal partners to support shelter planning efforts for populations of state mental hospitals.
- Supported development of local mass sheltering plans.

Medical Countermeasure Dispensing (MCM)

The agency continues to maintain its ability to distribute and dispense medical countermeasure (vaccines, pharmaceuticals or antidotes) required for an effective response to a disease outbreak or other incident.

Medical countermeasure dispensing provides vaccines, antiviral drugs, antibiotics and other medication to treat or prevent disease in target populations, as recommended by public health guidelines.



Pictured: Pregnant woman receives Tdap vaccine to prevent pertussis (whooping cough), a disease which can be fatal to infants. In 2012, Washington State experienced its worst pertussis outbreak in decades.

Highlights

During the past year:

- State and local jurisdiction partners used previous After Action Reports (AARs) and Technical Assessment Review (TAR) reports to identify gaps and to improve Medical Countermeasures Plans at every level. These improvements were demonstrated during several exercises conducted throughout the year.
- The following local health jurisdictions completed dispensing drills to test their updated plans: Public Health Seattle and King County, Tacoma Pierce County Health Department, Snohomish Health District, Spokane Regional Health District, Kitsap Public Health District and all counties in Washington's Region 4 (Clark, Skamania, Wahkiakum and Cowlitz).
- Cities Readiness Initiative (CRI) jurisdictions completed all required Medical Countermeasures drills. This year Washington State's CRI jurisdictions received their highest composite score to date on the local TARs.

Medical Materiel Management and Distribution



The agency has the ability to receive, store, track and distribute emergency medical supplies such as pharmaceuticals, gloves, masks and ventilators.

The agency also is developing methods for locating and recovering unused federal medical materiel following an incident.



Dave Owens, RSS Controller
Evergreen Earthquake logistics exercise

Highlights

- In June, the agency participated in the Evergreen Quake 2012 Logistics Exercise with local, state and federal partners, including four healthcare facilities. This exercise sharpened the Receipt, Stage and Store (RSS) Task Force's ability to receive, stage, inventory, store and distribute medical resources from the Strategic National Stockpile to healthcare facilities in four locations in response to major earthquakes.
- This exercise included the first ever collaboration between the RSS Task Force and the US Army Reserve's air assets to deliver emergency medical resources. Two CH-47 helicopters successfully delivered resources to two island locations that otherwise may be unreachable in a catastrophic event.
- During the past year, PHEPR staff developed an online version of the State RSS Annual Training. This enabled RSS Task Force volunteers to increase their knowledge of RSS procedures while having the flexibility to complete the training at their own pace.
- PHEPR staff conducted RSS Task Force monthly notification and response drills during the year. More than 73 percent of volunteer staff responded within 60 minutes, exceeding the standard required to have enough staff to conduct operations within one hour.

← **Pictured left, top to bottom:** Transfer of medical materiel from RSS warehouse to a local health jurisdiction using federal air assets during Evergreen Earthquake exercise in June 2012

Medical Surge

The agency is working with partners, including hospitals, EMS, local public health agencies, pharmacies, emergency management agencies, community health centers, tribes, home care agencies and extended care facilities to plan for medical, mental and other health services during a public health emergency or mass casualty event.



Setup of a Federal Medical Station (FMS) during the Evergreen Earthquake Exercise in June 2012

Highlights

- **Federal Medical Station (FMS):** The agency participated in the Evergreen Earthquake exercise. During the exercise, Just-in-Time (JIT) training was provided to Medical Reserve Corps (MRC) volunteers in setting up a Federal Medical Station (FMS), a type of field hospital. The MRC volunteers successfully requested, received, set up and ran an FMS during a three-day exercise.
- **Crisis Standards of Care:** The Crisis Standards of Care Legal Workgroup developed a matrix of stakeholder concerns and possible regulatory waivers to be used by healthcare facilities and professionals during disaster medical response. Highlights from the Legal Workgroup were shared with key stakeholders, including EMS, public health, hospitals and tribal partners.
- **Patient movement:** A tabletop exercise on patient movement was held during a face-to-face meeting of statewide Disaster Medical Coordination Centers in April. Eight of Washington's nine regions were represented, and best practices were shared among the participants.

Non-Pharmaceutical Interventions

The agency provides recommendations and guidelines for limiting exposure and preventing the spread of disease during an outbreak, and will help local governments implement strategies that might include:

- Hygiene.
- Personal protective behaviors.
- Personal decontamination.
- Shelter-in-place.
- Social distancing.
- Restrictions on movement, travel advisory/warnings.
- Isolation and quarantine.



Images courtesy of CDC

Highlights

During the 2011-2012 grant year, the agency:

- Recommended, implemented and evaluated non-pharmaceutical interventions for large and small scale public health events, such as novel influenza A H3N2v transmission from swine to people described in 2011-12, shellfish toxicities (diarrhetic, paralytic and bacterial shellfish poisoning) that occur every summer in Washington coastal waters, and air quality advisories during wildfires or when pollution is high.
- Streamlined and prioritized recommended public health response and prevention activities for the 2012 Washington pertussis epidemic to focus on infants, those most vulnerable to severe illness and death from pertussis.
- Received a grant to conduct assessments and trainings for counties planning Community Reception Centers where potentially exposed people can be screened for radiologic exposure.

Public Health Laboratory Testing



Laboratorian working in the
Microbiology Laboratory

The PHL (Public Health Laboratories) work to build and maintain capacity to test samples and share data in response to biological, chemical and radiological incidents.

Microbiology Laboratory

During the past year, the Microbiology Emergency Response team processed 39 clinical samples for *Clostridium Botulinum* toxin, *Brucella*, *Francisella*, *Yersinia* and *Burkholderia*. The team also supported law enforcement and first responders testing samples from suspicious substance (“white powder”) incidents.

During 2012, the Microbiology (“Micro”) team successfully passed all proficiency testing with the Laboratory Response Network (LRN) and with the College of American Pathologists, helping to assure the team will be ready to respond to public health threats. The Micro team also passed an exhaustive and extensive inspection of the new Bio-Safety level 3 laboratory. The successful inspection has paved the way for the team to use this new space, greatly increasing the PHL’s emergency response capability.

Chemical Incident Response Laboratory

Over the past year, the Chemical Incident Response Laboratory:

- Responded to seven unknown substance events.
- Completed certification by the federal government in the analysis of every Laboratory Response Network (LRN) Level 2 harmful chemical and toxin.
- Completed a method for speciation of arsenic on the LRN-C (Chemical) instrument.
- As part of the Food Emergency Response Network, the LRN-C and Radiation Laboratories analyzed 40 meat samples from the Republican and Democratic National Conventions for poisons and other suspicious substances.

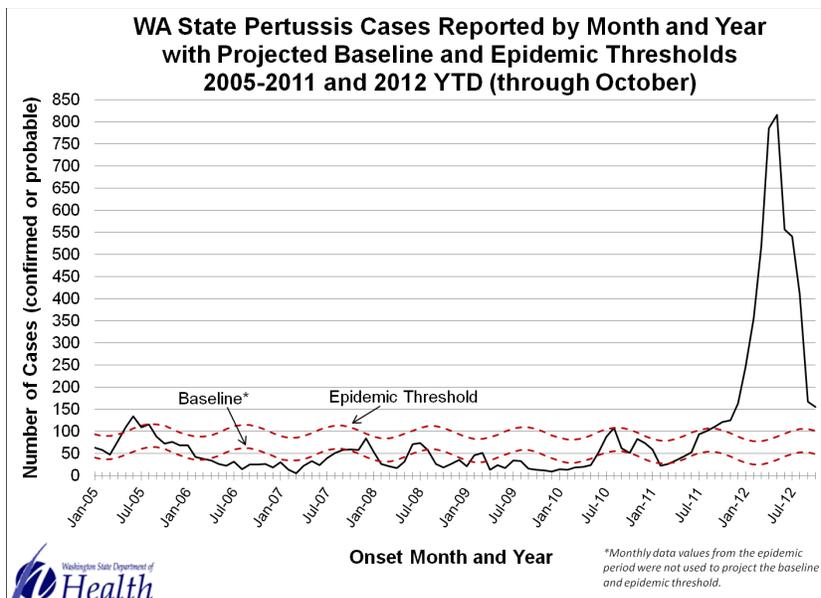
Radiation Laboratory

In the past year, the Radiation Laboratory:

- Confirmed the findings of researchers from Oregon who found small but measureable and non-harmful amounts of a nuclear reactor product from Fukushima in the tissue of migratory tuna fish off the coast of Oregon.
- Successfully identified unexpected radioactive materials in a proficiency sample thought to be undetectable by state labs.

Surveillance and Epidemiological Investigation

The agency continues to strengthen the systems that allow effective detection of disease outbreaks, tracking of diseases and investigation of disease cases. The agency's goal is to better assure these systems are capable of meeting the increased demands of a major public health threat.



In 2012 Washington State experienced its most severe epidemic of pertussis in decades. The PHEPR program helps to put systems in place to prepare for large outbreaks of disease.

Highlights

During the past year, the agency's Office of Communicable Disease Epidemiology:

- Developed and published resources to assist healthcare providers and facilities in enrolling in Meaningful Use electronic data exchange. Meaningful Use is a financial incentive program operated by the Centers for Medicaid and Medicare Services that encourages hospitals and providers to implement certified electronic health record systems to improve individual and population health.
- Participated in conducting trainings for local and state public health partners in waterborne infection investigation and response.
- Participated in several planning meetings with CDC's Department of Global Migration and Quarantine station at Sea-Tac airport to prepare for a major illness response on an arriving flight. Made progress on developing a traveler questionnaire and in identifying jurisdiction for detained travelers.
- Signed a Data Use Agreement between the Department of Health and the Association of State and Territorial Health Officials on May 7, 2012. This agreement allows Washington State to begin participation in BioSense 2.0, a system that improves situational awareness by helping provide timely regional and national pictures of trends in disease.

Responder Safety and Health

The agency works with public health staff, medical personnel and emergency responders to be adequately trained and properly equipped to respond safely during a public health emergency.



Beth Wieman, laboratorian, wearing personal protective equipment (PPE) while investigating disease in the Public Health Lab



Agency staff donning PPE in preparation to collect environmental samples in the field

Responder Safety and Health activities focus on protecting public health agency staff and healthcare workers from a variety of hazards during response and recovery to emergencies. This includes the ability to support, equip, train and provide other resources needed to ensure staff are adequately protected from hazards they may face.

Highlights

- Trained laboratory staff on use of personal protective equipment such as PAPRs (Powered Air Purifying Respirators).
- The agency provided proper personal protective equipment for all laboratory staff to better assure safe and healthy working conditions.
- Continued to support PPE and decontamination training at Washington hospitals.

Volunteer Management

The agency is building systems for coordinating the identification, recruitment, credentialing, training and engagement of volunteers to help public health agencies and healthcare providers respond to incidents of public health significance.



ESAR-VHP
Emergency System for the
Advance Registration of
Volunteer Health Professionals



MRC



Scott Carlson, agency Volunteer Coordinator, working with the new WAserv online registration system for enrolling medical and support volunteers

Highlights

During the past year:

- The agency launched WAserv, its new Web-based volunteer management tool in February 2012. WAserv, which stands for the Washington State Emergency Registry of Volunteers, allows healthcare, public health and support professionals to make it known in advance that they are willing to volunteer in emergencies by going online and providing and registering themselves.
- Local Public Health and Medical Reserve Corps (MRC) partners throughout the state participated in planning and implementation efforts. A local system users workgroup meets to assist in the continued outreach, planning and marketing efforts.
- In May 2012, over 60 registered volunteers participated in the agency sponsored eight-hour Basic Disaster Life Support (BDLS®) training course.
- In June 2012, a total of 47 WAserv registered volunteers and 30 Serv-Or registered volunteers from Oregon were included in the FEMA sponsored Evergreen Earthquake Exercise. Volunteers received training in the setup and operation of a 25-bed Federal Medical Station (FMS) deployed to the Western Washington Fairgrounds in Puyallup, WA.
- By the end of the 2012 grant year over 1,000 volunteers were registered in WAserv.

Operating Budget

2011-2012 Annual Summary

Washington State Department of Health

Public Health Emergency Preparedness and Response

Operating Budget

Funding sources:

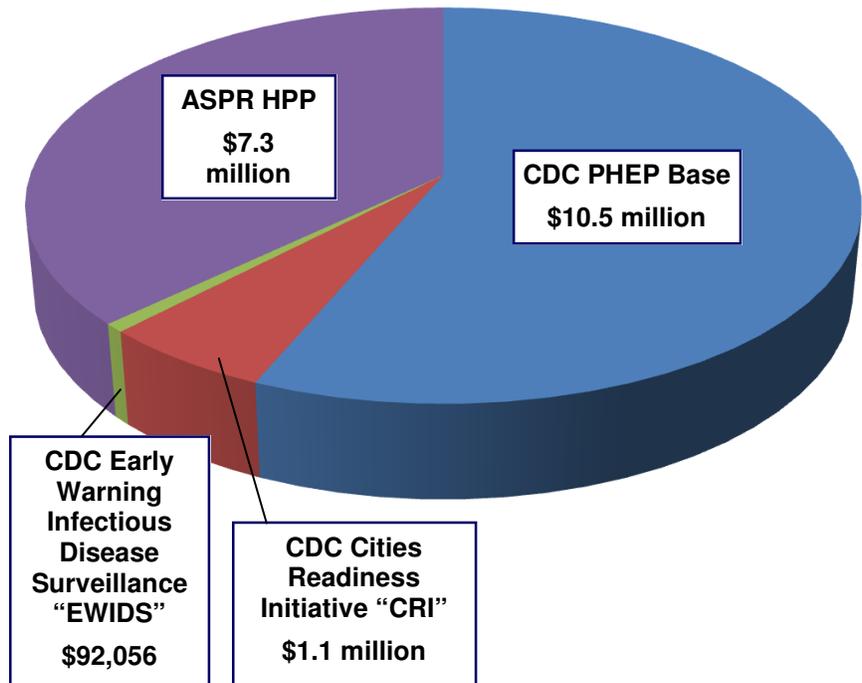
Centers for Disease Control and Prevention (CDC) PHEP

Assistant Secretary for Preparedness and Response (ASPR) HPP

FFY11 PHEPR Funding

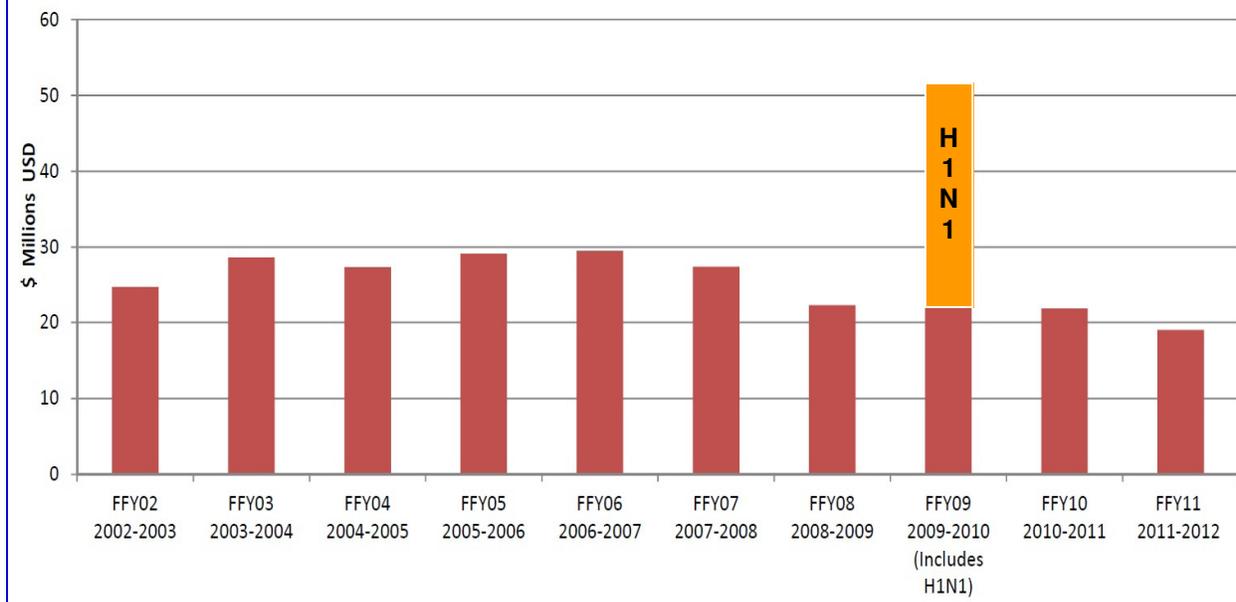
Total = \$19,006,665

all sources



Historical PHEPR Funding

2002 - 2012, all sources



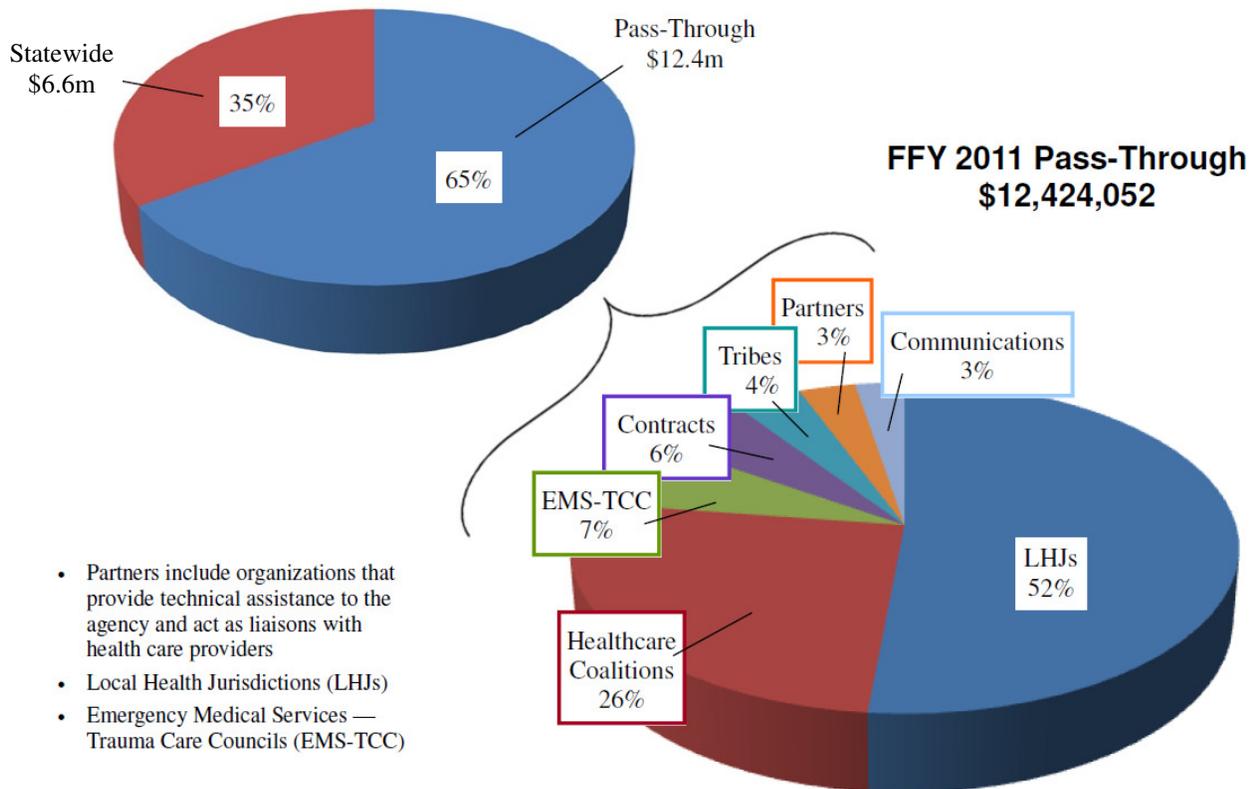
Using Resources

The agency’s Public Health Emergency Preparedness and Response program is dedicated to effectively using its resources to improve the public health and healthcare systems’ ability to respond to public health emergencies.

With its partners, the agency builds statewide preparedness capacity and capability. Primary activities include:

- Planning for emergency response and continuity of operations.
- Exercising plans annually to determine areas for improvement.
- Training staff.
- Providing technical assistance and emergency response support to regional and local partners.
- Helping local and regional partners obtain response equipment and supplies.
- Developing relationships with partners at the local, state, tribal, private and federal levels.

FFY 2011 PHEPR Budget — \$ 19,006,665



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Websites

Note: ALL Department of Health Web links
were updated in 2012

Public Health Emergency Preparedness and Response

[http://www.doh.wa.gov/AboutUs/
ProgramsandServices/OfficeoftheSecretary/
PublicHealthEmergencyPreparednessandResponse](http://www.doh.wa.gov/AboutUs/ProgramsandServices/OfficeoftheSecretary/PublicHealthEmergencyPreparednessandResponse)

Emergency Medical Services

[http://www.doh.wa.gov/
PublicHealthandHealthcareProviders/
EmergencyMedicalServicesEMSSystems.aspx](http://www.doh.wa.gov/PublicHealthandHealthcareProviders/EmergencyMedicalServicesEMSSystems.aspx)

Emergency Communications Toolkit

<http://www.doh.wa.gov/PHEPR/toolkit>

Pandemic Influenza Resources

[http://www.doh.wa.gov/YouandYourFamily/
IllnessandDisease/Flu/Pandemicflu.aspx](http://www.doh.wa.gov/YouandYourFamily/IllnessandDisease/Flu/Pandemicflu.aspx)

Emergency Resources — Multilingual

[http://www.doh.wa.gov/Emergencies/
EmergencyPreparednessandResponse/Factsheets.aspx](http://www.doh.wa.gov/Emergencies/EmergencyPreparednessandResponse/Factsheets.aspx)

Washington State Public Health Laboratories

[http://www.doh.wa.gov/AboutUs/
ProgramsandServices/
DiseaseControlandHealthStatistics/
PublicHealthLaboratories.aspx](http://www.doh.wa.gov/AboutUs/ProgramsandServices/DiseaseControlandHealthStatistics/PublicHealthLaboratories.aspx)

Notifiable Conditions

[http://www.doh.wa.gov/
PublicHealthandHealthcareProviders/
NotifiableConditions.aspx](http://www.doh.wa.gov/PublicHealthandHealthcareProviders/NotifiableConditions.aspx)

Communicable Disease Epidemiology

[http://www.doh.wa.gov/AboutUs/
ProgramsandServices/
DiseaseControlandHealthStatistics/
CommunicableDiseaseEpidemiology.aspx](http://www.doh.wa.gov/AboutUs/ProgramsandServices/DiseaseControlandHealthStatistics/CommunicableDiseaseEpidemiology.aspx)