

## Section 3: Strengthening Collaboration

Ensuring the nation is prepared to respond to public health emergencies cannot be accomplished by CDC alone. Collaboration with the healthcare delivery system (i.e., hospitals, doctors, and other healthcare providers and facilities), other federal agencies, emergency management organizations, and state and local health departments is essential to preparing for and responding to health threats. CDC coordinates extensively with these sectors to ensure our nation is prepared for all hazards.

### Integrating public health and the healthcare system

A key component of CDC's interagency coordination is aligning public health and healthcare preparedness efforts to strengthen the nation's ability to respond to major health events. Since 2010, CDC has partnered with ASPR to align both administrative and programmatic aspects of the ASPR Hospital Preparedness Program (HPP) and CDC's PHEP cooperative agreements. HPP readies healthcare systems for disaster and improves response and recovery efforts to reduce mortality and morbidity during public health emergencies.

In July 2012, as a result of the alignment initiative, ASPR and CDC's HPP and PHEP funds were jointly awarded for the first time. In July 2013, the joint award amount was approximately \$916 million. This combined effort fosters enhanced cooperation between the nation's healthcare and public health systems to improve preparedness and health outcomes for a wide range of public health threats across the country. The programs integrate by conducting joint site visits and coordinating technical assistance. In addition, ASPR and CDC are developing a new information technology system to better support both programs, improve accountability, enhance data reporting and evaluation, and reduce awardee burden. The close alignment of the two preparedness programs not only improves efficiency in grant administration, but also enhances coordination between the nation's public health and healthcare systems at the federal, state, and local levels.



## **PUBLIC HEALTH, HEALTHCARE, AND EMERGENCY MANAGEMENT PARTNER TO PROVIDE THE RIGHT CARE AT THE RIGHT TIME IN THE RIGHT PLACE**

CDC's Healthcare Preparedness Activity (HPA) supports ASPR's HPP mission by fostering community partnerships between public health, healthcare, and emergency management organizations. Such partnerships, forged by HPA community-level workshops, enable local healthcare providers to better care for patients during emergencies. Through HPA-led workshops, community partners develop real-world tools to prepare for medical surge, but more importantly, these partners build relationships to ensure their organizations work together in times of crisis. For example, HPA conducted a partnership workshop in Champaign-Urbana, Illinois, in 2008 to improve pandemic influenza preparedness. When the H1N1 influenza pandemic struck the nation less than a year later, partners within Champaign-Urbana Public Health District (CUPHD) worked together to improve influenza vaccination rates through connections and relationships developed during the HPA-led workshop. CUPHD staff, volunteers, and partner organizations mobilized more than 53,000 residents to provide "community immunity" by being vaccinated against H1N1.

The success of HPA's workshops is demonstrated by demand far exceeding supply – 30 communities applied for the one rural workshop HPA was able to provide in 2013. To help meet planning needs, HPA is developing a Community Healthcare Planning Framework tool that communities can use to conduct healthcare surge planning. Since its creation in 2006, HPA has supported public health, healthcare, and emergency management working together to safely deliver the right care at the right time and in the right place.



CDC collaborates with the Department of Defense, the Department of Veteran's Affairs, state and local health departments, and hospitals across the country to administer the BioSense program. BioSense pulls together information on emergency department visits and hospitalizations from multiple sources and provides public health officials timely data and tools to better prepare for and coordinate emergency responses. Using a cloud computing environment, data sharing, and syndromic surveillance capabilities, BioSense allows users to track health issues as they evolve. This guides decision making and actions by public health agencies at local, regional, and national levels. In 2011 and 2012, CDC's BioSense program provided public health officials with vital information during various public health events, including a heat wave, the Japanese tsunami and nuclear disaster in Fukushima, and the Dengue Detection Project in Florida and Hawaii.

# Did You Know?

**PHPR COLLABORATES WITH 11 OTHER HHS AGENCIES AND MORE THAN 40 OTHER AGENCIES AND OFFICES ACROSS THE FEDERAL GOVERNMENT. SOME OF THESE AGENCIES ARE:**

**DEPARTMENT OF DEFENSE**

**DEPARTMENT OF ENERGY**

**DEPARTMENT OF JUSTICE**

**VETERAN'S AFFAIRS**

**DEPARTMENT OF HOMELAND SECURITY**

**FEDERAL EMERGENCY MANAGEMENT AGENCY**

**DEPARTMENT OF TRANSPORTATION**

**NATIONAL AERONAUTICS AND SPACE ADMINISTRATION**

**ENVIRONMENTAL PROTECTION AGENCY**

**NATIONAL OCEANIC AND ATMOSPHERIC ADMINISTRATION**

**FEDERAL AVIATION ADMINISTRATION**

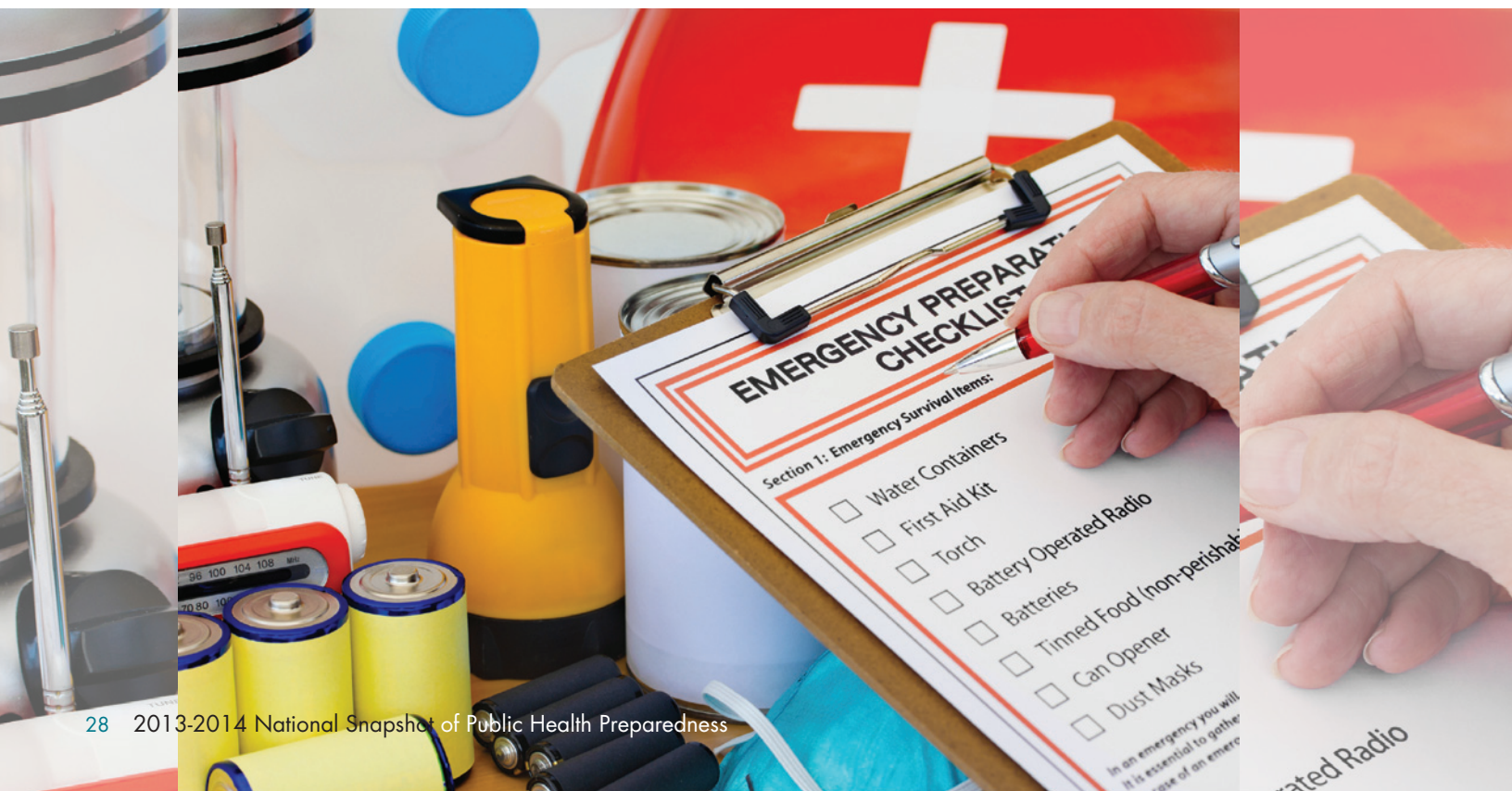
**U.S. DEPARTMENT OF AGRICULTURE**



## Connecting with communities

All public health emergency response begins at the community level. Because of this, CDC connects highly trained preparedness experts to health departments across the United States. Such connections are made possible through the Career Epidemiology Field Officer, Epidemic Intelligence Service, Public Health Associate, and Public Health Prevention Service programs. The Career Epidemiology Field Officer and Epidemic Intelligence Service programs place epidemiologists in state and local health departments; the Career Epidemiology Field Officer program specifically emphasizes strengthening state, local, tribal, and territorial epidemiologic capabilities for public health preparedness and response. Public health professionals within the Public Health Associate and Public Health Prevention Service programs serve public health organizations at the state, tribal, local, and territorial levels. CDC also employs Public Health Advisors that serve as disease control specialists in state and local health departments. During 2012, 112 CDC preparedness field staff were located in public health organizations across the country.

Emergency preparedness and response also extends beyond federal, state, and local governments. Recognizing this, PPHR partnered with the CDC Foundation and FEMA beginning in 2011 on a “Whole Community” approach to emergency management. The Whole Community approach engages the full capacity of the private and nonprofit sectors, including businesses, faith-based and disability organizations, and the general public, alongside local, tribal, state, territorial, and federal government partners. Through these various community participants, the specific resources and capabilities available can be pooled to meet each community’s specific needs during a public health emergency. In 2012, seven programs across the country were funded to continue or enhance their Whole Community approach to emergency management and public health preparedness.





*Photo by Laurelee Koziol*

## **JOPLIN PREPARES THE “WHOLE COMMUNITY” THROUGH DISASTER PLANNING ASSISTANCE**

No community understands the importance of preparing its citizens for emergencies more than Joplin, Missouri, which was devastated by an EF5 tornado on May 22, 2011. Displaced individuals with chronic conditions and special needs were hit particularly hard. However, thanks to The Independent Living Center (TILC), Joplin’s citizens are better prepared for any future disasters.

TILC is a private, non-residential, not-for-profit corporation devoted to meeting the needs of individuals with disabilities. TILC’s work embodies the Whole Community approach to emergency management by integrating the needs, capabilities, and resources of the community. Due to the tornado, many people with chronic conditions lost their prescription medications, and doctor’s offices and pharmacies lost the written prescriptions. To prevent this in the future, TILC built a cloud source option for online prescription storage. This system provides people a place to access their prescriptions in case of another catastrophic incident. TILC has also raised awareness of those with special needs in the community through first responder and volunteer training opportunities. From October 2012 through January 2013, TILC provided three trainings to 98 attendees. In addition, TILC assists individuals with special needs to develop emergency plans and provides emergency preparedness tools.

In 2012, FEMA, the CDC Foundation, and PPHR selected TILC as a promising example of the Whole Community approach to emergency management. TILC has assisted 211 individuals in developing emergency and disaster plans with positive results. In early 2013, a TILC survey showed that 98% of respondents reported they feel more prepared for emergencies as a result of TILC’s disaster planning assistance.



Citizen volunteers are another essential resource and partner who can be mobilized to respond to public health emergencies. Well-prepared communities establish and organize citizen volunteer groups to focus planning and response efforts to help people when disasters strike. These volunteer groups often focus on a specific aspect of incident response. For example, the Medical Reserve Corps (MRC), a national network of local groups of volunteers, includes medical and public health professionals interested in strengthening the public health infrastructure and improving the preparedness and response capabilities of their local jurisdictions. MRC units identify, screen, train, organize, and utilize the volunteers to augment preparedness and response efforts.

## A FLOOD OF VOLUNTEERS IN RURAL ILLINOIS

In 2011, a vast, rural area in southern Illinois suffered catastrophic flooding from the Mississippi and Ohio Rivers. Thousands of residents were affected, and many were forced to evacuate, including the staff of the Southern 7 Health Department (S7HD) that would normally help in such a crisis. As a result, S7HD made establishing a Medical Reserve Corps a preparedness planning priority.

The goal of the MRC is to increase personnel capacity during a public health response by recruiting and training volunteers to supplement staffing for shelters, vaccination clinics, and other medical care sites. Following HHS approval, S7HD formed an MRC Advisory Board consisting of representatives from a variety of agencies and organizations and started recruiting volunteers. S7HD used PHEP funds, plus other grants and awards, to develop public awareness campaigns and provide volunteer training. By early 2013, more than 30 volunteers completed the required MRC training. S7HD believes that such training, coupled with their overall approach to building a robust volunteer workforce, will increase the overall excellence of their public health response efforts should another disaster strike.





## Looking Forward

In uncertain times, safeguarding America's health and security is more important than ever, particularly in a changing threat environment. Fiscal challenges pose difficulties for health departments across the country. Funding decreases have led to reductions in the public health workforce and have the potential to decrease the ability for effective responses by the public health system. CDC remains committed to maximizing the impact of every dollar by emphasizing the agency's three priorities and aligning them with the Presidential Policy Directive 8 (PPD8): National Preparedness.

CDC funded the Association of State and Territorial Health Officials under a cooperative agreement to work together with our stakeholder partners from the preparedness community to develop the National Health Security Preparedness Index (Index). The Index is an annual measure of the country's health security at the national and state levels. Using relevant, actionable information, the Index will be used to strengthen preparedness, inform decision making, guide quality improvement, and advance the science behind community resilience. Specifically, the Index is a resource to:

- obtain a more complete picture of health emergency preparedness nationwide,
- make more informed decisions on the best use of health security preparedness resources,
- define progress made in preparedness and assess changes in preparedness levels over time,
- identify strengths and gaps in health security preparedness, and
- support continuous quality improvement.

Version 1.0 of the Index measures public health and healthcare preparedness, with intent and vision to expand to include other components of health security in coming years. See the current version and learn more at [www.nhspi.org](http://www.nhspi.org).

