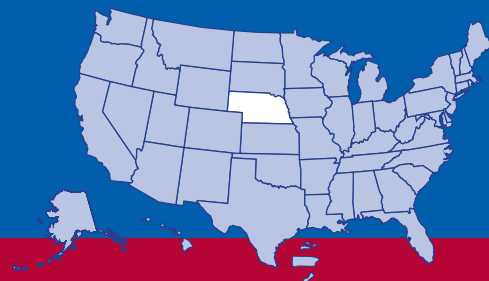


PUBLIC HEALTH EMERGENCY PREPAREDNESS COOPERATIVE AGREEMENT (PHEP) PROGRAM



NEBRASKA

PHEP Then

In response to the deadly events of September 11, 2001, and the subsequent anthrax attacks, Congress established a new program to help health departments across the nation prepare for emergencies. Since then CDC's [Public Health Emergency Preparedness \(PHEP\) program](#) has partnered with state, local, and territorial public health departments to prepare for, withstand, and recover from potentially devastating public health emergencies.

Every year since, the PHEP program has provided vital resources to ensure communities can effectively respond to infectious disease outbreaks, natural disasters, and chemical, biological, radiological, or nuclear events.

PHEP Now

In 2018, PHEP provided \$620 million across public health departments to improve response readiness. Funds are also used to support epidemiologists (disease detectives), lab staff, planners, and other preparedness staff on the ground.

In the future, CDC will continue supporting PHEP recipients by sharing technical expertise, best practices, and lessons learned, along with tools and resources to identify and address gaps.

Learn More

For more information about the PHEP Program, visit www.cdc.gov/cpr/map.htm.

AT A GLANCE

In Nebraska

- ▶ 1.9 million residents
- ▶ 42% reside in Cities Readiness Initiative metropolitan statistical areas (CRI MSA). A federally funded program, CRI helps cities effectively respond to large-scale public health emergencies requiring life-saving medications and medical supplies.
- ▶ 20 local public health departments

Frequent Public Health Emergencies

- ▶ Tornadoes
- ▶ Flooding
- ▶ Fires

Key Emergency Operations Center Activations

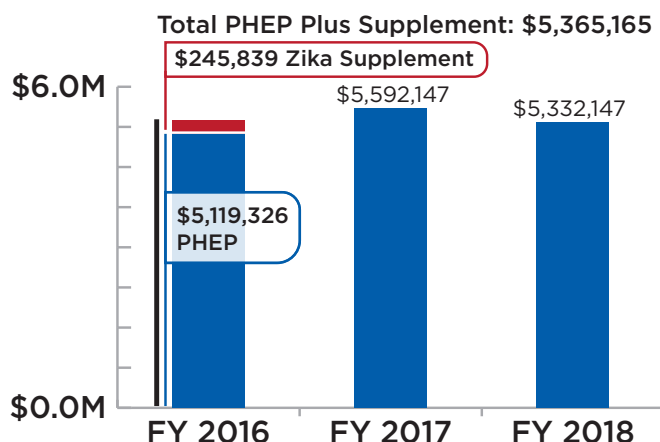
- ▶ 2014: Ebola Response
- ▶ 2015: Avian Flu Outbreak

PHEP funds programs and activities that build and strengthen the nation's preparedness for public health emergencies.

Preparedness and Response Funding Snapshot

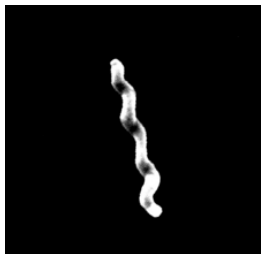
FY 2018 PHEP \$5,332,147

Base Plus Population \$5,132,192
Cities Readiness Initiative \$199,955
Level 1 Chemical Lab \$—



Centers for Disease Control and Prevention
Center for Preparedness and Response

PHEP IN ACTION—NEBRASKA STOPS GASTROINTESTINAL ILLNESS OUTBREAK THANKS TO PHEP



A single Gram-negative, Campylobacter jejuni bacterium

In Nebraska, PHEP supports a CDC veterinary scientist who works with local staff to improve surveillance and strengthen outbreak response. In March 2017, the scientist led a team investigating an outbreak of severe gastrointestinal illnesses. They identified the culprit as *campylobacter jejuni*. Using a questionnaire, they gathered data about food consumption, drinking water sources, exposure to animals, and illnesses from members of the affected community, and traced the source to a nearby animal feeding operation. The operation pumped livestock wastewater through a broken irrigation system, which likely contaminated two of the community's wells. With this knowledge, the community stopped using these wells immediately, preventing further illness.

CDC identified 15 public health preparedness capabilities critical to public health preparedness.

2018 NEBRASKA TOP PHEP CAPABILITY INVESTMENTS

1. Community Preparedness
2. Public Health Laboratory Testing
3. Public Health Surveillance & Epidemiologic Investigation
4. Emergency Operations Coordination
5. Medical Countermeasure Dispensing

For a complete list of all 15 public health preparedness capabilities, visit <https://www.cdc.gov/cpr/readiness/capabilities.htm>.

Medical Countermeasure Readiness: Ensuring that medicine and supplies get to those who need them most during an emergency.

KEY STRENGTH

Strong partnerships enables high level of participation within planning and logistics

KEY CHALLENGE

Lack of monitoring and tracking of medical countermeasure activities at the local level

States, territories, and localities are required to develop emergency plans covering children, pregnant women, and other vulnerable populations.

Population	2017
Households included children	38%
Respondents who know they are pregnant	6%
Respondents 65 or older	20%
Respondents who reported having diabetes	9%
Respondents who reported a condition that limits activities	—
Respondents who reported a health problem that required the use of specialized equipment	—

PHEP funds support staff who have expertise in many different areas.

PHEP-Funded Staff	2017
CDC Field Staff	2
Educators	1
Epidemiologists	—
Health Professionals	—
Laboratorians	—
Other Staff	5

PHEP PROGRAM—KEY PERFORMANCE MEASURE RESULTS

In an emergency, it is critical that staff can meet quickly to plan for, lead, and manage a public health response. Public health staff serve as Incident Commanders, Public Information Officers, Planning Section Chiefs, Operations Section Chiefs, and other response roles.

Emergency Operations Coordination	2015	2016	2017
Number of minutes for public health staff with incident management lead roles to report for immediate duty	45	52	41

Timely and effective communication between lab and epidemiologic staff can reduce death and injuries in a public health emergency.

Public Health Laboratory Testing	2017
Results of communication drills between laboratory and epidemiological staff completed within 45 minutes	Drill 1: Completed drill in time Drill 2: Completed drill in time

Laboratory Response Network biological (LRN-B) and PulseNet labs rapidly identify and notify CDC of potential biological health threats to minimize disease outbreaks. CDC manages the LRN-B, a group of public health labs with testing capabilities to detect and confirm biological health threats. CDC also manages PulseNet, a national network of labs that analyzes and connects foodborne illness cases together to identify outbreak sources.

Current number of LRN-B public health labs: 1

Public Health Laboratory Testing: LRN-B	2015	2016	2017
Proportion of LRN-B proficiency tests passed	1/2	2/2	2/2
Public Health Laboratory Testing: PulseNet	2015	2016	2017
Percentage of <i>E. coli</i> -positive tests analyzed and uploaded into PulseNet national database within four working days	97% (target: 90%)	97% (target: 90%)	95% (target: 90%)
Percentage of <i>Listeria</i> -positive tests analyzed and uploaded into PulseNet national database within four working days	100% (target: 90%)	100% (target: 90%)	100% (target: 90%)

LRN chemical (LRN-C) labs rapidly identify exposures to toxic chemicals, aid diagnoses, and minimize further human exposures. CDC manages the LRN-C, a group of labs with testing capabilities to detect and confirm chemical health threats. LRN-C labs are designated as Level 1, 2, or 3, with Level 1 labs demonstrating the most advanced capabilities.

Current number and level of LRN-C Labs: 1 (Level 2)

Public Health Laboratory Testing: LRN-C	2015	2016	2017
Proportion of core chemical agent detection methods demonstrated by Level 1 or Level 2 labs	8/9	8/9	9/9
Number of additional chemical agent detection methods demonstrated by Level 1 or Level 2 labs	0	0	0
Result of LRN exercise to collect, package, and ship samples	Passed	Passed	Passed



For more information on
CDC's Public Health Emergency Preparedness Program, visit
www.cdc.gov/cpr/map.htm