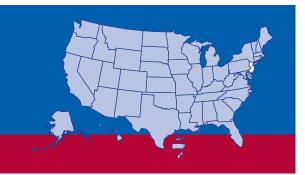
# PUBLIC HEALTH EMERGENCY PREPAREDNESS COOPERATIVE AGREEMENT (PHEP) PROGRAM



### **NEW JERSEY**

#### **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 <a href="https://www.cdc.gov/cpr/map.htm">www.cdc.gov/cpr/map.htm</a>.

### **AT A GLANCE**

### In New Jersey

- ▶ 9 million residents
- ▶ 93% 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.
- ▶ 98 local public health departments

### Frequent Public Health Emergencies

- ► Severe Winter Storms/Tropical Cyclones
- ► Environmental Contamination
- ► Infectious Disease Outbreaks

### **Key Emergency Operations Center Activations**

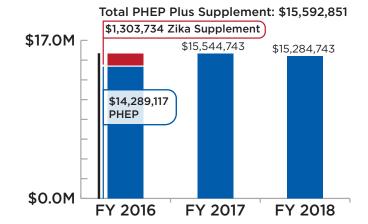
- ▶ 2017: Severe Storms and EMAC Deployment (USVI)
- ▶ 2018: Severe Storms and EMAC Deployments (USVI, NC)

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 \$15,284,743

Base Plus Population \$13,072,939 Cities Readiness Initiative \$2,211,804 Level 1 Chemical Lab \$—





### PHEP IN ACTION-PHEP GIVES NEW JERSEY THE EXPERTISE TO RESPOND TO E. COLI OUTBREAK



In New Jersey, PHEP supports regional epidemiologists who have trained 280 local health department staff in outbreak investigation so that they can rapidly identify and respond if an outbreak occurs. In March 2018, a local health department member who had received training in how to interview patients of gastrointestinal illness linked a group of E. coli cases to a specific chain restaurant. Thanks to this epidemiological expertise, New Jersey was one of the first states to identify this trend and share the findings with CDC, leading to a multistate investigation linking E. coli to romaine lettuce and a swift response to control the outbreak.

Escherichia coli bacterium

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

### 2018 NEW JERSEY TOP PHEP CAPABILITY INVESTMENTS

- 1. Public Health Surveillance & Epidemiologic Investigation
- 2. Information Sharing
- 3. Community Preparedness
- 4. Medical Countermeasure Dispensing
- 5. Medical Materiel Management & Distribution

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

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

#### KEY STRENGTH

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

**KEY CHALLENGE** 

Expanded breadth of partnerships with communities and support of response agencies

Incomplete plans for prophylaxis of Receipt, State, Store staff

pregnant women, and other vulnerable populations.
Population

Population	2017
Households included children	37%
Respondents who know they are pregnant	4%
Respondents 65 or older	20%
Respondents who reported having diabetes	9%
Respondents who reported a condition that limits activities	<del>-</del>
Respondents who reported a health problem that required the use of specialized equipment	_

PHEP-Funded Staff	2017
CDC Field Staff	4
Educators	1
Epidemiologists	3

Health Professionals15Laboratorians10Other Staff3

### 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	22	12	59

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

## Public Health Laboratory Testing Results of communication drills between laboratory and Drill 1: Completed drill in time

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	2/2	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%)	100% (target: 90%)	100% (target: 90%)
Percentage of <i>Listeria</i> -positive tests analyzed and uploaded into PulseNet national database within four working days	N/A	N/A	96% (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	9/9	9/9	9/9
Number of additional chemical agent detection methods demonstrated by Level 1 or Level 2 labs	1	1	1
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 <a href="https://www.cdc.gov/cpr/map.htm">www.cdc.gov/cpr/map.htm</a>