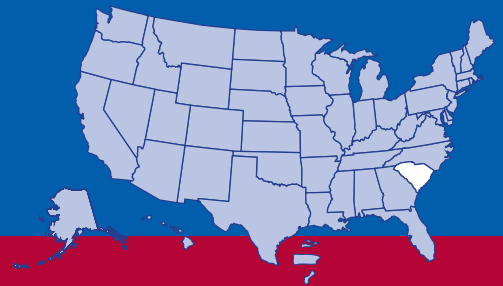


PUBLIC HEALTH EMERGENCY PREPAREDNESS COOPERATIVE AGREEMENT (PHEP) PROGRAM



SOUTH CAROLINA

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 South Carolina

- ▶ 5 million residents
- ▶ 24% 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.
- ▶ 46* local public health departments

*Health department is centralized at the state level. State health department in each county.

Frequent Public Health Emergencies

- ▶ Tuberculosis
- ▶ Hepatitis A
- ▶ Tropical Storms/Hurricanes

Key Emergency Operations Center Activations

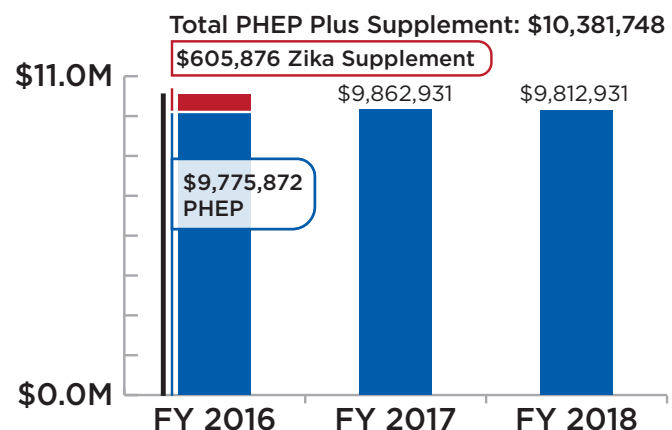
- ▶ 2016: Hurricane Matthew
- ▶ 2017: Hurricane Irma

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 \$9,812,931

Base Plus Population \$8,505,527
Cities Readiness Initiative \$296,405
Level 1 Chemical Lab \$1,010,999



Centers for Disease Control and Prevention
Center for Preparedness and Response

SOUTH CAROLINA

PHEP IN ACTION—PHEP ENSURES SOUTH CAROLINA IS READY TO RESPOND TO SEVERAL HURRICANES



In South Carolina, PHEP trains public health staff in emergency response planning so they can effectively employ the incident command system during emergencies. Between 2016 and 2018, South Carolina dealt with three major hurricanes—Matthew, Irma, and Florence. Thanks to PHEP-supported planning, during all of these events, the state evacuated 19 hospitals, more than 236 nursing homes and residential care facilities, and moved more than 13,464 patients to facilities within and outside of South Carolina. PHEP also supported public education campaigns focused on mold cleanup and mosquito control after the storms, which helped keep residents healthy during recovery.

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

2018 SOUTH CAROLINA TOP PHEP CAPABILITY INVESTMENTS

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

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 to provide assistance with distribution and dispensing functions

KEY CHALLENGE

Staffing gaps between personnel needed and those identified and trained

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

| Population | 2017 |
|--|------|
| Households included children | 35% |
| Respondents who know they are pregnant | 4% |
| Respondents 65 or older | 22% |
| Respondents who reported having diabetes | 13% |
| Respondents who reported a condition that limits activities | 20% |
| Respondents who reported a health problem that required the use of specialized equipment | 11% |

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

| PHEP-Funded Staff | 2017 |
|----------------------|------|
| CDC Field Staff | 1 |
| Educators | 1 |
| Epidemiologists | 15 |
| Health Professionals | 20 |
| Laboratorians | 18 |
| Other Staff | 46 |

SOUTH CAROLINA

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 | 20 | 30 | 30 |

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: N/A |

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 | 100% (target: 90%) | 86% (target: 90%) | 55% (target: 90%) |
| Percentage of <i>Listeria</i> -positive tests analyzed and uploaded into PulseNet national database within four working days | 100% (target: 90%) | 73% (target: 90%) | 58% (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 1)

| 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 | 4 | 4 | 4 |
| 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