PUBLIC HEALTH EMERGENCY PREPAREDNESS (PHEP) PROGRAM STORIES FROM THE FIELD



TORNADO IN JOPLIN, MISSOURI

On May 22, 2011, an EF-5 tornado carved a four-mile path through Joplin, MO. Two thousand buildings, including a major hospital, were damaged or destroyed. The Missouri Department of Health and Senior Services (DHSS) activated the PHEP-funded State Emergency Operations Center and Emergency Response Center to integrate public health into the emergency response and, in collaboration with its partners, lead and coordinate the public health and healthcare sectors. DHSS tracked 713 individuals who were injured during the tornado and evacuated them to 42 hospitals in four neighboring states. Local health departments leveraged existing partnerships with health departments in other states to provide mutual aid services, such as

supplying and administering tetanus vaccinations to responders and residents, and notifying neighboring states of incoming evacuees from the Joplin area.

Before the tornado, Joplin health officials had developed a plan for simplifying healthcare delivery and reimbursement in emergency circumstances. This system enabled healthcare providers to continue to provide care when traditional systems were overwhelmed and ensured that responders were compensated in a timely manner. Additionally, per the plan, providers had previously instructed dialysis patients to create an emergency three-day care plan, which they were instructed to implement following the 2011 tornado.





THE INCIDENT

On May 22, 2011, an EF-5 tornado destroyed 2,000 buildings, including a hospital, in Joplin, MO.



THE RESPONSE

DHSS tracked 713
individuals who were
injured and evacuated
them to 42 hospitals.
They provided care for
dialysis and ventilatordependent patients, and
reduced lead exposure
and fungal and mosquitoborne disease.



THE OUTCOMES

With efficient communication among partners, public health staff were able to provide ongoing healthcare and prevent other health threats.

The state also provided a variety of services that not only ensured health services were available, but that residents had access to them. DHSS deployed the state's Mobile Medical Unit, which established a 24-bed emergency room that treated 157 patients. PHEP-funded behavioral and mental health response plans directed mental health professionals to provide care at family assistance shelters. The health department conducted door-to-door checks on residents and addressed medical needs, such as prioritizing ventilator-dependent patients for power restoration.

DHSS assisted local public health authorities and environmental staff in childhood lead surveillance and prioritized lead contaminated property clean-up. They also disseminated information to healthcare facilities and neighboring states to foster early identification and treatment of patients exposed to fungal infections and directed equipment and supplies to reduce mosquitoborne diseases.



CDC's Public Health Emergency Preparedness (PHEP) cooperative agreement program is a critical source of funding, guidance, and technical assistance for state, local, tribal, and territorial public health departments to strengthen their public health preparedness capabilities. Since 9/11, the PHEP program has saved lives by building and maintaining a nationwide public health emergency management system that enables communities to rapidly respond to public health threats.

To learn more about the PHEP program, visit www.cdc.gov/phpr/readiness.