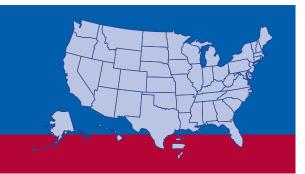
PUBLIC HEALTH EMERGENCY PREPAREDNESS COOPERATIVE AGREEMENT (PHEP) PROGRAM



U.S. VIRGIN ISLANDS

15 Years of PHEP

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. It is now 15 years since CDC initiated the Public Health Emergency Preparedness (PHEP) program.

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 2017, PHEP provided \$612 million across public health departments to improve response readiness. About 40% of funds went to support epidemiologists (disease detectives), lab staff, planners, and other preparedness staff on the ground.

In the future, CDC will continue to support PHEP awardees 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/phpr/map.htm.

AT A GLANCE

In U.S. Virgin Islands

► 106,405 residents

Emergency Operations Center Activations

▶ 2015: Tropical Storm Erika

▶ 2016: Zika Response

Frequent Public Health Emergencies

FY 2016

FY 2017

- ▶ Drought
- Flooding
- ► Tropical Storms/Hurricanes

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

Preparedness and Response Funding Snapshot

FY 2017 PHEP - \$415,036 Base Plus Population - \$415,036 Cities Readiness Initiative - \$Level 1 Chemical Lab - \$ \$0.0M

FY 2015



U.S. VIRGIN ISLANDS

PHEP IN ACTION — SUPPORTING THE ZIKA RESPONSE



In February 2016, the U.S. Virgin Islands (USVI) activated its Emergency Operations Center to respond to the Zika virus outbreak. With normal capacities overwhelmed, USVI hosted more than 100 rotating staff from partner organizations, including CDC, to help with mosquito control, risk communication, and disease tracking. The PHEP-supported Incident Command structure, along with a PHEP-funded epidemiologist who managed the response, allowed for seamless expansion of normal operations.

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

TOP PHEP CAPABILITY INVESTMENTS

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

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

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

who heed them most during an emergency.	
KEY STRENGTH	KEY CHALLENGE
Partner engagement	Lack of site-specific planning for receiving, staging, and storage sites and points of dispensing

PHEP funds support staff who have expertise in many different areas.	
PHEP-Funded Staff	
CDC Field Staff	2
Educators	_
Epidemiologists	_
Health Professionals	_
Laboratorians	_
Other Staff	4

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	2014	2015	2016
Conducted call-down drills to document the ability to contact responders to activate the emergency operations center	Yes	Yes	Yes

