

Director's Update

It's been 11 years since the United States experienced one of the worst terrorist attacks on American soil. The attacks on 9/11 and the anthrax attacks in October 2001 tested the government's capability to respond and protect the homeland. Public health learned the importance of agency coordination and the benefits of emergency risk communication from the October 2001 anthrax attacks. Although 1,500 miles away from Ground Zero, Oregon too learned from 9/11 and is committed to developing community resilience to emergencies.



Community resilience to emergencies is a priority for the Oregon Health Authority (OHA). All disciplines need to come together in an emergency to help communities respond, mitigate harm to the public, and recover and rebuild state and local agencies. Learning from previous emergencies is key to building a "new normal." [Read the personal stories](#) of three OHA staff who experienced and survived a house fire, power outages, and the 2011 Japan earthquake.

Community resilience often starts at home. Make sure you and your loved ones are prepared. Check out our website and resources and commit to do at least one preparedness activity this week. Whether you pull together a few household items for an emergency kit or contact your county emergency manager about hazards in your area, commit today to being prepared.

Another component of community resilience to emergencies is a well-qualified and competent work force. Recently, the Health Security, Preparedness and Response program held 27 [Crisis and Emergency Risk Communication Trainings](#) across the state. It is critical that every public health staff member communicate emergency information with the public and the media during an emergency. Effective emergency communication can save lives and mitigate harm.

Medical volunteers are a strong foundation of community resilience to emergencies. Oregon's Medical Reserve Corp and the Emergency System for Advanced Registration of Volunteer Health Professionals (ESAR-VHP) includes more than 700 medical volunteers who have pledged to serve the public in the event of a public health emergency. OHA Director Bruce Goldberg, M.D., recently recognized Akiko Berman, Medical Reserve Corps (MRC) Coordinator, for her work. Akiko also received the National MRC 2012 Elizabeth Fitch Leadership award. Congratulations, Akiko!

Mike Harryman
Director

State and counties work together on emergency risk communication trainings

Over eight weeks in May and June, Kathleen Vidoloff and Julie Black visited county health departments across the state offering emergency risk communication trainings. The trainings were developed for emergency-designated public health public information officers as well as administrative staff and focused on interacting with the public and the media during emergencies. The trainings were based on [CDC's Crisis and Emergency Risk Communication Trainings](#).



“Communicating during an emergency is different than our day-to-day health communication or health education programs,” said Kathleen Vidoloff, Ph.D., Emergency Risk Communication Officer. “The goal of our trainings was to help staff identify how that emergency context can affect public information and how to improve their skills when handling public and media inquiries.”

The state's Health Security Preparedness and Response Communications Team developed two trainings to address the unique needs of the county's audience. The PIO refresher course offered participants the opportunity to practice media writing and interaction skills within the context of a botulism threat scenario. Participants wrote a press release and talking points. Some even practiced speaking and fielding questions on-camera. The course, developed for administrative staff, focused on building skills to address the public's questions and concerns. Participants were presented with an ever-expanding scenario and had to react based on the information they had at the time. Each person fielded telephone calls from various members of the public and was asked to develop appropriate responses. Both trainings offered information that is foundational to emergency risk communication and encouraged participants to build on existing skills to better prepare them for future events.

The state team worked initially with a small group of county health departments to develop the trainings based on county needs. Both trainings were scalable depending on the county's available time, number of attendees and the specific learning goals. The training offered to administrative staff ranged from an all-day event to one-hour blitzes.

Vidoloff and Black conducted more than 26 emergency risk communication trainings. A total of 224 participants – including county health department staff, hospitals, emergency management and law enforcement--completed the “Frontline Emergency Risk Communication” training while 64 participants completed the “PIO Refresher Course.”

“We have tremendous human resources at our Oregon counties,” said Julie Black, M.Ed., all hazards planner. “Our efforts are well-spent there to maximize our preparedness, as individual counties and as a whole state.”

Oregon MRC volunteers travel north for FMS training

On June 13, Oregon and Washington MRC volunteers teamed up in an unprecedented effort to make the Pacific Northwest more self-sufficient during times of emergency. Crossing state lines, 28 Oregon MRC volunteers joined their northern colleagues at the Puyallup Fairgrounds & Event Center in Puyallup, Washington, for an eight-hour crash course in the assembling and operating a Federal Medical Station (FMS).



An FMS is a rapidly deployable 250-bed alternate care facility capable of housing, triaging, and holding displaced patients when local acute care systems are incapacitated. Deployed by four truckloads from the CDC's geographically nearest Strategic National Stockpile site, each FMS has approximately three days of supplies and consists of three modules: basic support, treatment and pharmaceuticals.

Previous FMS deployments have included the supplies as well as federal staff to help construct the facility. With federal assistance, it takes no longer than 12 hours to get the station operational. This particular training tested a bold new concept – building and staffing an FMS without federal help.

"My goal with the training was to provide some level of familiarization with running an alternate care facility, and using the federal cache of supplies and equipment to do that," said Sally Abbott, medical surge coordinator for the state of Washington and the FMS training's planner. "I think it will take a little bit more work [toward self-sufficiency], but I'm more confident now - after seeing the enthusiasm and the flexibility of the folks that were here - that we could do it."

The training's events included volunteers manually assembling some of the beds, learning about proper bed layout, shelter hygiene and cleanliness, familiarization with FMS inventory, as well as triage and role-playing as mock victims.

"This [training] was a step in the right direction, but it's a baby step, because this is creating a health care facility where one didn't exist before in time of crisis for people who are medically fragile," said Abbott, "This was a barn on Monday; on Tuesday and Wednesday we made it into a health care facility. You're building it from the ground up. That's very challenging and these folks were willing to work with us to do that, so that's incredible."

Washington State Secretary of Health Mary Selecky and Puyallup Mayor Rick Hansen made brief appearances and toured the fairgrounds. Both extolled the importance of emergency preparedness.

"We didn't have this [FMS] asset available to us [previously]," said Selecky. "We're very pleased that the government continues to invest in community needs."

The training also fostered a sense of camaraderie between the two MRCs - camaraderie that one day may be an asset just as valuable as an FMS.

"I think it's really important for us in the Northwest to work together with our neighbors," said Alisa Ward, Linn County MRC volunteer and a mental health registered nurse, "One of the points that they made several times is that the area affected by the disaster may not have that many available volunteers because those people are going to be involved with their own families, their own jobs. They may require help from outside volunteers to come in and provide some extra support."

Abbott agreed.

"The bottom line is that when we have a disaster, we have people who will need medical care. We share a very long border with Oregon, and I think it's important that we help each other out."

Building community resiliency through vulnerable populations

Sarah Bates, MPH and Beth Appert, MPH, Yamhill County Public Health

"Our hope is to enhance the great work of community organizations to build a community that is more resilient in the face of a disaster," comments Sarah Bates, public health preparedness coordinator. We want organizations to have the skills and support they need to get back on their feet and serve the community during recovery.



A variety of community partners came together to form a taskforce including individuals from agencies representing childcare, assisted living, developmental disabilities, chemical treatment, faith-based organizations, low-income assistance and many more. Local government and emergency response partners augmented the group. Initially the group defined vulnerable populations, and many seemed to have their own definition. Vulnerable populations are people whose life circumstance (temporary or ongoing) requires support beyond standard emergency preparedness, response and recovery measures. These special populations may bear a disproportionate burden of disease and injury, or they may face barriers to accessing services. This may become particularly apparent during a major public health emergency or other disaster.

The task force started by conducting a SWOT analysis of both community resources and communication procedures in the county. This process of identifying strengths, weaknesses, opportunities and threats led to the realization of where gaps exist. Quickly the task force decided to work on improving communication and collaboration among organizations serving the community. With interest and dedication, task force members learned about the role of the Emergency Operations Center, Incident Command System, potential threats in the community, as well as responsibilities and response plans for emergency management and Public Health.

One of the intense efforts of the task force members is to help each other develop or improve emergency response plans. These may include developing business continuity plans, purchasing supplies or further working on communication strategies. It also includes establishing memoranda of understanding with those in the community who may provide needed resources or services. Community partners were also offered disaster preparedness presentations to educate their staff and/or clients about disasters and what they can do ahead of time.

According to Jane Russell, manager of Facilities at Hazelden Springbrook, an addiction treatment center, "Hazelden Springbrook is dedicated to the safety and care of their patients. Involvement in the Vulnerable Populations Task Force provides us with opportunities to improve our ability in preparedness, mitigation, community integration, response and recovery. Helping to improve the community response and resiliency will directly affect our emergency management plan in a positive way."

Promotores de Salud: Preparedness at Home, in the Community and at Work

Beth Appert and Sarah Bates

In early 2012, Yamhill County Public Health (YCPH) partnered with a local community business, Bailey Nurseries, which employs up to 250 during peak season, to train 10 foremen from three sites about the types of disasters that could occur in Yamhill County and how to prepare for them. Since many of these foremen have been employed more than a decade, they are influential leaders at work and in their communities.



Beth Appert, Yamhill County health educator, and Sarah Bates, Yamhill County emergency preparedness coordinator, facilitated the participatory style workshops at the Yamhill headquarters once a month for six months. Partners from the American Red Cross provided bilingual training and resources on how to develop a personal disaster preparedness kit and plan.

Following the personal preparedness session, Alejandro, a longtime foreman, brought in his back-pack kit complete with a stuffed animal to comfort his child and won a hand crank radio for his proactive efforts. The participants also learned about community resources and the need to take care of their own family during a disaster. Additionally, foremen discussed ways to share the information with their crews and in their community. With encouragement, Bailey Nurseries took steps to improve their emergency plans with foremen engaged in identifying procedures that would work for their crew.

The project culminated in a simulated chemical spill exercise in collaboration with Yamhill Communications Agency (YCOM/911) and the Yamhill Fire Department. The group discussed lessons learned and steps for improvement. YCPH and Bailey Nurseries plan to meet once a year for refresher training and to evaluate organizational preparedness. Rosalba Sandoval-Pérez, Bailey Nurseries human resource manager, commented, "I think this helped prove how valuable it is to really know what to do and be prepared, so everyone will continue to be motivated to learn."

This project's main goal was to help strengthen the resiliency among the immigrant, migrant and seasonal farm worker community in order to keep them safe and healthy during an emergency. It was also important to build trust for Public Health, the American Red Cross, YCOM/911 and the local volunteer fire department. In the supportive, casual environment of the workshops questions such as, "Will the 911 operator speak to me in Spanish?" could be asked and answered. Patti Sauer, YCOM/911 dispatch operations manager, worked closely with YCPH to identify a system to email and text foremen with emergency alerts and to register Bailey Nurseries, which included a map of its property, with YCOM/911. This will support a prompt, effective response to emergencies and as Sauer noted, "This is a great project... you're making a difference."

In the month following the project, YCPH has continued to build its relationship with Bailey Nurseries at two health outreach events, one for the employees and one for their families. YCPH distributed Spanish language emergency preparedness materials and public health information and conducted screenings. YCPH hopes to continue to build this relationship and to use this experience to reach out to other similar groups in our community.