Mass Care/ Emergency Assistance Planning During a Pandemic

Individual Assistance/ ESF #6 Conference

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Presenters

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Why Pandemic Planning?

- History

- Federal Planning Efforts

Pandemic versus H1N1 Planning
Pandemic Scenarios

- Potential Pandemic that could affect communities

- A Pandemic occurring at the same time as a natural or man-made disaster such as a hurricane
Focus of the Planning

- Mass Care/ Emergency Assistance unique planning considerations

- Needs that States would have to support their planning requirements
How the Guidance Was Developed

40 stakeholders representing:

- Health and Human Services: ESF 8 (Health & Medical) and CDC
- USDA Food and Nutrition Services and Animal Plant Health and Inspection Services
- States
- FEMA
- Voluntary Organizations
Federal Legislation

- Robert T. Stafford Disaster Relief and Emergency Assistance Act, as amended
- Direct Federal Assistance for H1N1
- Public Health Services Act

Other Considerations

- Emergency Management Assistance Compact
References

- CDC Guidance for Emergency Shelters for the 2009 - 2010 Flu Season
- Disaster Assistance Policy, 9523.17, Emergency Assistance for Human Influenza
Products

- Guidance in Support of Mass Care/ Emergency Assistance Functions during a Pandemic Period
- CDC Guidance for Emergency Shelters for the 2009-2010 Flu Season
- State Plan Annexes to Mass Care Plan
Emergency Shelter Operations
Role of Public Health During a Pandemic
Objectives

- Definitions and overview of influenza
- Describe the role of public health officials during disaster shelter operations
- Describe factors that may contribute to outbreaks in facilities
- Discuss the CDC Guidance for Emergency Shelters
Influenza H1N1

- Viral illness
- Symptoms:
  - Fever, cough, sore throat, runny nose, aches, chills, and sometimes diarrhea and vomiting
- Transmission:
  - Person to person
  - Contact with objects and surfaces
Epidemic

A disease epidemic occurs when there are more cases of that disease than normal.
A pandemic is a worldwide epidemic of a disease.
Public Health Consequences of Disasters

- Injury and mortality
- Disruption of services
  - Public health
  - Medical and mental health
- Environmental
- Nutritional
- Critical infrastructure
- Population displacements
Public Health Myth

“Post-disaster conditions can cause outbreaks of disease”

- Noji. The public health consequences of disasters
Public Health Triad
Emergency Shelter Example

- Agent
  - Infectious agent
  - Easily transmitted
  - Novel disease

- Environment
  - Crowded conditions
  - Limited hygiene and sanitation

- Host
  - Weakened immune systems
  - Chronic conditions
  - Young/older
  - Pregnant women
  - Unvaccinated and susceptible
Outbreaks of Communicable Diseases in Congregate Facilities

- Military Barracks
- Colleges/ universities
- Day care facilities
- Nursing homes
- Hotels
- Emergency shelters
- Other facilities
Public Health Role in Emergency Shelters

Activities:

- Environmental and health needs assessments
- Disease monitoring activities
- Health information and education
- Infection control
CDC Guidance for Emergency Shelters for the 2009-2010 Flu Season

Located at:
http://www.cdc.gov/h1n1flu/guidance/emergencyshelters.htm

http://www.flu.gov/professional/community/emergencyshelters.html
Why a Guidance Document for Emergency Shelters?

- H1N1 pandemic
- Disasters can occur at any time
Strategies for Influenza Prevention in Shelters*

- Get vaccinated
- Hygiene and sanitation
- Infection control
- Education
- Keep ill workers out of shelter
- Referral to care

- Screening and isolation of ill persons
- Increase distancing between residents
- Additional health staffing
- Health supplies
- Limit access and traffic

* CDC Guidance for Emergency Shelters for the 2009-2010 Flu Season
Summary

- Communicable diseases including H1N1 may be introduced in emergency shelters
- CDC has developed a guidance document for emergency shelters
- Guidance scope is limited but useful for planning purposes
- Public health plays very important role in maintaining the health and safety of shelter residents and shelter workers
State Considerations

- Unique Planning considerations:
  - Staffing considerations
  - Material resources
  - Feeding
  - Sheltering
Unique Planning Considerations

- A pandemic may cause severe disruption of infrastructure and essential services
- With natural/ man-made disaster, access to essential supplies may be limited or cut off
- Medically needy, elderly and other fragile persons may have to be temporarily placed in congregate shelters
- With a natural/ man-made disaster, assistance from other localities may not be possible
Staffing Considerations

- Massive reductions in workforce
- Staff may not be available, or may be unwilling to work in some pandemic environments
- Screening of staff for disease symptoms
- Policies regarding screening, hiring, and termination of staff, as well as use of volunteers
Material Resources

- Pandemic alone: movement & accessibility of resources
- With natural/man-made disaster, not only access and movement, but actual availability
- With a natural/man-made disaster, assistance from other localities may not be possible
Feeding

- **Delivery of food**
  - Schools closed
  - Transportation
  - Staff to assist in delivery

- **Man-made disaster**
  - Some foods rendered inedible
  - Access (e.g. movement of food to people, or people to food)
  - Water supply

- **Distinctive Populations**
  - Infants, the elderly, and people on special diets (medical)
Sheltering

- CDC guidelines
  - Adequate supplies
    - Personal Protection Equipment (PPE): masks, sanitizer, gloves
    - screening
    - cots
  - Policy re: Minor children - unaccompanied
  - Policy re: need for medical help vs. religious beliefs
  - Pets
  - Infants, the elderly, and people on special diets (medical)
Voluntary Organizations: Initial Actions

- Planning
- Information gathering
- Coordination of public information
- Leadership decisions
- Notification of field units and partners
Voluntary Organizations: Roles

- **Activation of Resources for a Pandemic**
  - Is this an appropriate role?
  - Who can fill community needs?
  - What is needed to prompt or sustain action (funding, declaration, mission assignment, contract)?

- **Responding to disasters within a pandemic environment**
  - Red Cross has a Congressional charter mandating disaster relief activities
  - ... but a commitment to protecting the health and safety of volunteers
Voluntary Organizations: Needs

- **Guidance**
  - Internal leadership guidance
  - External scientific partner guidance
  - ... CDC! FEMA! States!

- **Lead role**
  - Responsibility to partner with other SMEs to provide sheltering framework
  - Share collaborative product with field partners
Voluntary Organizations: Unique Considerations

- Availability of volunteers
  - Ability to respond (competing demands)?
  - Willingness to work
  - ... excess willingness to work

- Availability of resources
  - Personal protective equipment (guidance, training, stockpiles)
  - Additional shelter supplies (hand sanitizer, cleaning fluids)
  - Additional medical supplies for health workers and shelter managers (gloves, gowns, draping)
Voluntary Organizations: Protective Measures in Congregate Care Settings

- Implement applicable local and state public health guidance as well as CDC guidance.
- Increase screening and surveillance.
- Minimize the number of people directly exposed to a potentially ill person.
- Provide education to clients and staff.
Personal Protective Equipment (PPE)

- **CDC guidance**
  - For Community settings (a shelter like environment)
  - For Occupational settings (Health Care delivery)

- **Preparedness**
  - N-95 fit testing and training of testers
  - Partnerships with PHD’s or local hospitals for testing

- **Pre-positioning**
  - Supplies
  - Logistics

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[Logos of CDC, American Red Cross, DHR, and FEMA]
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Questions?

Thank you for participating!