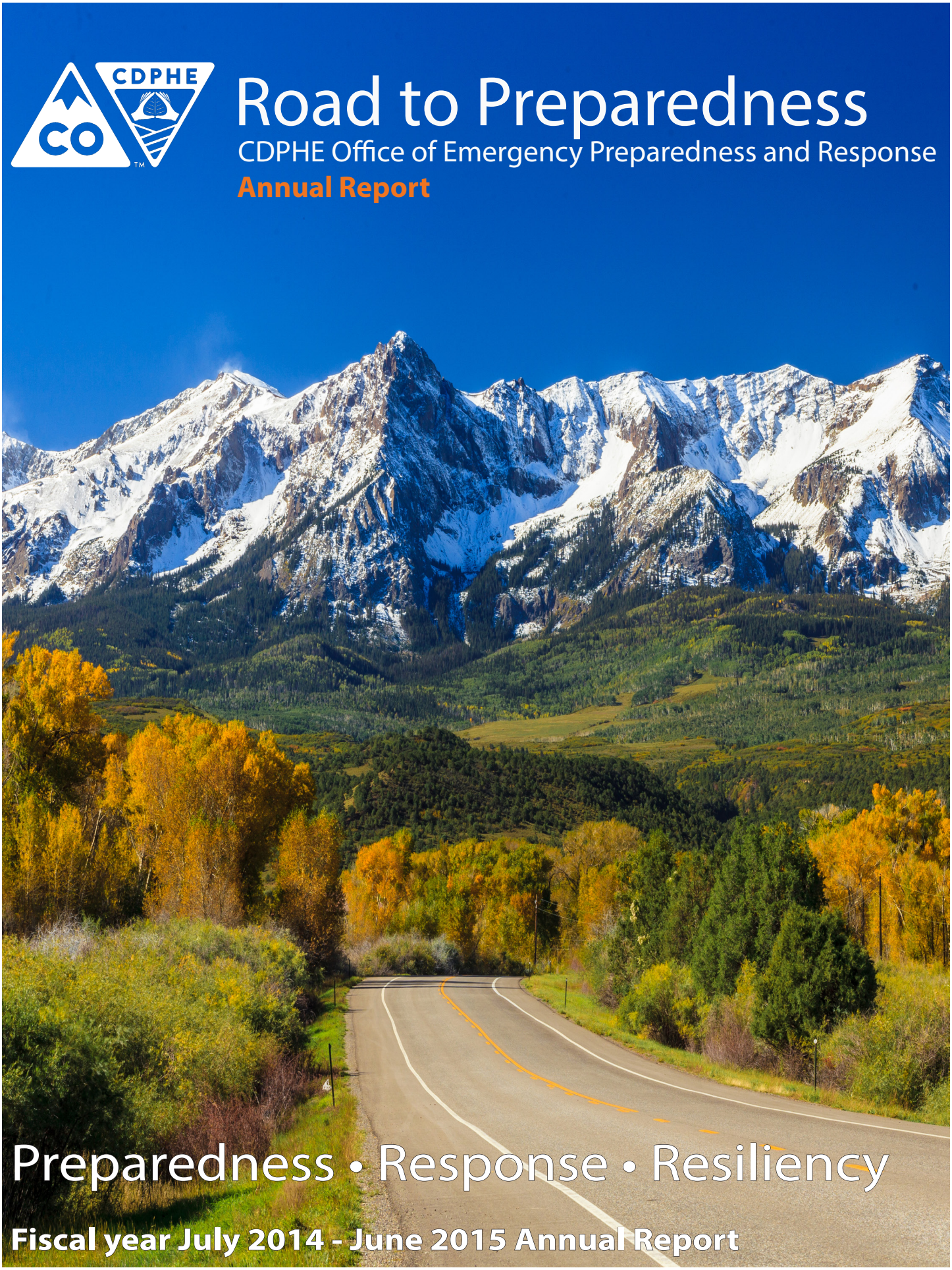
Road to Preparedness

CDPHE Office of Emergency Preparedness and Response

Annual Report



Preparedness • Response • Resiliency

Fiscal year July 2014 - June 2015 Annual Report

Colorado emergencies range from wildfires and floods to active shooter and disease outbreaks.

Preparedness, response and resiliency work keeps our state ready for any obstacle we may face.

TABLE OF CONTENTS

03 Ebola Response
Learn about CDPHE and OEPR's role in the 2014-2015 Ebola Virus Disease response in Colorado, including the five paths to preparedness used.

04 Preparedness
OEPR's oversite of the Colorado Incident and Reporting line, CO-HELP, EPRnews, Continuity of Operations Planning, training and exercises.

05 Response
OEPR's work in Emergency Management Systems, Strategic National Stockpile management, Disaster Behavioral Health and Colorado's Volunteer Mobilzer.

06 Resiliency
OEPR's work with communities and public health partners in rebounding and positively adapting or thriving after a disaster occurs.

07 Grants & Finances
OEPR's funding streams and the impacts made July 2014- June 2015.

COLORADO
Office of Emergency Preparedness & Response
Department of Public Health & Environment

EBOLA RESPONSE

The Ebola virus disease (EVD) outbreak in West Africa has affected public health preparedness and response around the world.

In summer 2014, American health care workers infected while responding to the outbreak returned to the U.S. for treatment. The U.S. experienced the first diagnosed Ebola case on American soil on Sept. 30, 2014. These events identified gaps and opportunities to improve American public health preparedness and response systems for novel infectious disease outbreaks.

In 2015, the federal Department of Health and Human Services (HHS) appropriated funds for state and local public health departments to create a system that would safely and successfully identify, monitor, transport, isolate, assess, treat, and investigate patients with EVD or persons under investigation for EVD.

In collaboration with local public health agencies and other Colorado health care partners, the CDPHE Disease Control and Environmental Epidemiology Division (DCEED), Office of Emergency Preparedness and Response (OEPR), Health Facilities and Emergency Medical Services Division (HFEMS), and Laboratory Services Division (LSD) began developing a system for the State of Colorado. The system contains five parallel paths of preparedness:

Surveillance consists of a new EVD-specific traveler monitoring protocol and a case-and-contact investigation protocol. While the outbreak lasts, the federal government identifies travelers from Ebola-affected countries and then notifies states where the travelers are bound. States assess the travelers' exposure risks and monitor for symptoms that could be suggestive of EVD infection during the disease's 21-day incubation period. The case and contact investigation protocol guides the public health investigation. In BP3, CDPHE and LPHAs monitored 262 travelers from Ebola-affected countries.

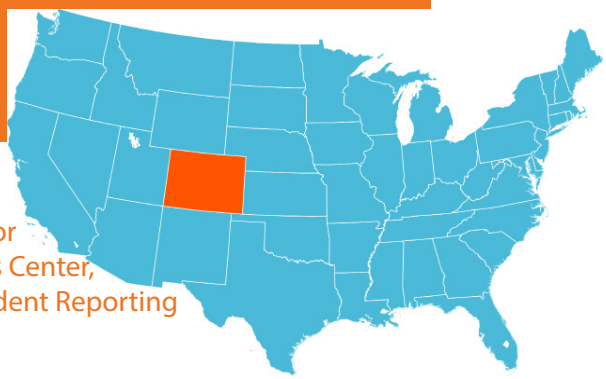
Assessment/treatment system components involve partnering with hospitals to plan for the clinical evaluation and care of a symptomatic traveler or patient diagnosed with EVD. This partnership includes preparing for travelers who slipped through the monitoring system and for travelers that present at an emergency department without first contacting public health.

Transportation must plan for how to move persons with suspected EVD safely. The plan addresses transport to hospitals ready for EVD patients. Good transportation planning includes Colorado's unique geographic and weather conditions in its design.

Laboratory system preparedness consists of educating laboratories about testing practices around a suspected or confirmed EVD patient. The CDPHE Laboratory has acquired the capacity to test specimens for Ebola virus in Colorado, expediting response time to a suspected case.

Communication preparedness and addressing fear for EVD involves all response partners sharing unified, accurate information that allows responders and community members to make educated decisions about their health. Fear compromises information sharing and response system effectiveness. Novel diseases and public health hazards cause fear because they are unfamiliar, and people do not understand their sources or transmission. To support responder and community adaptive functioning, OEPR integrated behavioral health in messaging to address fear.

PREPAREDNESS



We prepare the Colorado Department of Public Health and Environment and local public health partners throughout the state for emergencies through the oversight of the Department of Operations Center, continuity of operations planning, the Colorado Emergency and Incident Reporting line, communications, training and exercises.

The Colorado Emergency and Incident Reporting Line provides emergency support concerning hazardous releases or spills 24 hours a day. OEPR compiles and maintains this information, enabling the department to answer any inquiry concerning the proper action to take to minimize the public health hazards. July 2014- June 2015:

1,031
Calls and notifications

774
Reports created

OEPR funds and oversees **CO HELP.** This help line serves as a resource for the general public during public health events and incidents by providing a manned call center that provides consistent, accurate and up-to-date information.

This service benefits OEPR and local public health agencies by offering phone call surge capacity so public health staff can focus on response activities.

CO HELP
1-877-462-2911

CO HELP received **33,602** public health and marijuana registry related calls during July 2014- June 2015.

Impact

- The Department's **Continuity of Operations (COOP) plan** was updated and signed by the CDPHE Executive Director on July 6, 2015. The plan was updated based on the Code of Colorado regulation 8 CCR 1507-40, which stated that all state agencies were required to be in full compliance with the provisions of COOP planning guidance by June 30, 2015.
- OEPR provided 13 preparedness **training and exercise** opportunities throughout the state, resulting in 88 trained partners and community members.

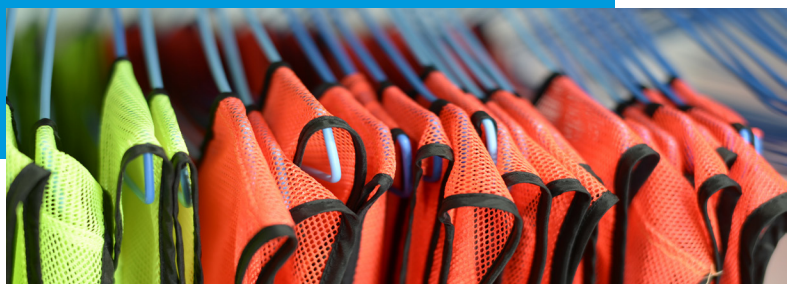
OEPR developed and distributed a new and improved **EPRNews**! This newsletter is a one-stop resource for program, grant resource and training updates. Twelve editions were released between July 2014- June 2015 and can be found via www.colorado.gov/cdphe/eprnews.

EPRnews

COLORADO
Office of Emergency Preparedness & Response
Department of Public Health & Environment

EPRnews is a one-stop resource for program, grant, resource and training updates. If you have information you would like included in the newsletter, questions or comments/suggestions, contact juliann.bertone@state.co.us

RESPONSE



We fulfill the state's Emergency Support Function 8 (Health, Medical and Mortuary) through the integration and coordination of various internal CDPHE divisions, programs and external agencies at the state, local and federal level.

OEPR works with over 3,000 partners statewide to stregthen emergency response via **EMsystems and EMresource**. During July 2014-June 2015 these systems accomplished:

OEPR is responsible for the rapid receipt, storage, distribution and dispensing of the **Strategic National Stockpile (SNS)** in an emergency. July 2014-June 2015:

11 SNS distribution and 3 inventory management system training events, 500 partners tranied

12 Year anniversary of the Cities Readiness Initiative with 8 planning jurisdictions

24 Regional or local transfer points established for distribution of medical countermeasures

230 Open PODs (Points of Dispensing) for medical countermeasures to the public

15000 Staff and volunteers would be required to operate public PODs during a pandemic

The **Disaster Behavioral Health Services** team in OEPR develops resiliency programs for local public health agencies, health care facilities, hospitals, Community Mental Health Center Disaster coordinators, substance abuse treatment management service organizations and faith based and academic communities. Between July 2014-June 2015:

- Distributed **$136,950** in Community Mental Health Emergency Preparedness Capacity Grants to 19 mental health and speciality clinics
- **33** trainers trained in Pyschological First Aid, who went on to teach **186** disaster behavorial health responders
- **20** trained in Disaster Spiritual Care
- **42** trained, from 31 differenct agencies, as trainers in First Responder Resiliency
- **60** trained in the new course Understanding and Using Stress to Our Benefit
- Developed a "**Fearbola**" handout to help address and reduce the fear associated with Ebola

The **Colorado Volunteer Moblizer and Medical Reserve Corps** pre-registers, manages and mobilizes volunteers for disaster response.

282 volunteers joined the system between July 2014 - June 2015
2,634 total volunteers in the system, 1,661 accepted/deployable
17 organizations listed in the Colorado Volunteer Mobilizer

RESILIENCY

We assist Colorado communities and our public health partners in rebounding and positively adapting or thriving after a disaster occurs.

The **resiliency branch** was developed from identified gaps within CDPHE and OEPR received from partner and internal feedback, and a need for addressing previous requirements that are placed upon the public health and medical community when concerned with emergency preparedness and response. Main objectives entrenched within the resiliency branch:

1. Resiliency efforts from the Governors Office and the Office of Resiliency and Recovery
2. Board of Health/Public Health Act requirements and verification
3. Quality Improvement

Resiliency in Colorado

In September of 2013, Colorado experienced the single most devastating natural catastrophe in the state's 138-year history. The 2013 Floods witnessed unprecedented levels of rainfall in 24 counties, forcing over 18,000 people to be evacuated from their communities, 10 Coloradans losing their lives, 1,852 homes destroyed, and 28,363 dwellings impacted. The 2013 floods created an estimated $3.9 billion in damages to housing, infrastructure and the economy.

This disaster was preceded by the three most destructive wildfires in State history, resulting in the loss of more than 1,000 homes, significant and lasting impacts to watersheds, and subsequent post-wildfire floods and debris flows that further impacted homes and infrastructure. The High Park, Waldo Canyon, and Black Forest fires were also declared presidential disasters.

Throughout all of this, Coloradans have demonstrated a resolve to recover and to rebuild better, stronger and more resilient communities.

Colorado Resiliency Working Group

Impact

- Co-leads the Health and Social Sector of the **Colorado Resiliency Working Group (CRWG) and State Resiliency Framework**
- Builds and enacts the implementation plan for the **Board of Health/Public Health Improvement Act**
- Development of a **quality improvement process** for the Regional Point of Contact (RPOC) model
- Reviewing after action reports and cataloging issues to **create a list of identified gaps**, to discover common themes of gaps to then build improvement processes

GRANTS & FINANCES

Impact

- All Colorado Local Public Health Agencies (LPHAs) updated **Emergency Operations Plans**.
- All Colorado LPHAs updated **Pandemic Influenza Plans**.
- All LPHAs and the majority of local Health Care Coalition partners participated in **tabletop exercises testing response coordination** amongst partners.
- OEPR grants team collaborated with DHHS and CDC federal representatives to **identify and develop strategies** for success.

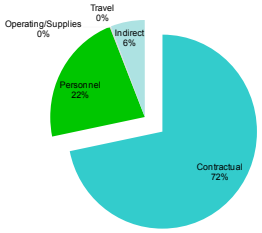
Each of Colorado's nine All-Hazards regions has **regional public health emergency preparedness and response staff** funded by OEPR. Regional staff members include planners, epidemiologists and coordinators to assist with public health preparedness activities. July 2014-June 2015 OEPR funded:

39 Regional Staff Members

55 EPR Coordinators

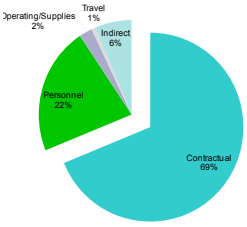
July 2014- June 2015 Grant Funding

Hospital Preparedness Program
$3,223,094



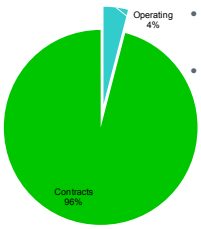
- Contractual $2,314,115
- Personnel $715,994
- Operating $1,742
- Travel $6,218
- Indirect $187,025

Public Health Emergency Preparedness
$9,767,690



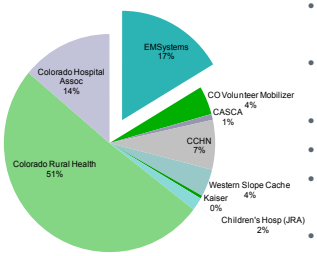
- Contractual $6,240,218
- Personnel $1,981,649
- Operating $205, 164
- Travel $63,927
- Indirect $578,364

Cities Readiness Initiative
$698,368



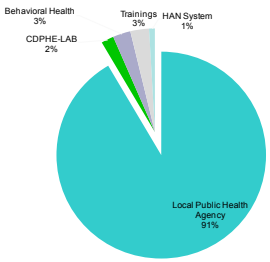
- Contractual $670,069
- Operating $28,299

Hospital Preparedness Program
Contractual Distribution $2,314,115



- EMSystems $381,132
- CO Volunteer Mobilizer $98,214
- CASCA $20,000
- CCHN $170,100
- Western Slope Cache $95,000
- Kaiser $10,000
- Children's Hosp (JRA) $45,000
- Colorado Rural Health $1,173,599
- Colorado Hospital Assoc $321,070

Public Health Emergency Preparedness
Contractual Distribution $6,240,218



- Local Public Health Agency $5,713,673
- CDPHE-LAB $121,096
- Behavioral Health $170,000
- Trainings $180,000
- HAN System $55,449

COLORADO

Office of Emergency Preparedness & Response

Department of Public Health & Environment