

Public Health Emergency Preparedness and Response

The goal of public health preparedness is to improve the ability of Lewis County and its residents to prepare for and respond to public health emergencies.

Prior to the terrorist attacks of September 11, 2001 and the subsequent use of anthrax as a weapon of mass destruction, county health departments were generally not considered partners in emergency planning and were rarely seen as participants in local or state emergency response. Within the last decade the role of health departments in local, state, and national emergency planning and response has been clearly identified and developed. Among the responsibilities assigned to local health departments are essential lead roles in local response to natural and man-made disease outbreaks and bioterrorism.

Public health is a vital planning and response partner for chemical and radiological disasters, mass casualties and severe weather emergencies, among others.

Each funding year the New York State Department of Health (NYSDOH) requires county health departments (LHDs) to complete a series of quarterly deliverables. Each deliverable is carefully designed to assist LHDs in the progressive development and strengthening of a long list of public health emergency preparedness and response capabilities. In 2009 the following capabilities were addressed:

- The LCPH plan to request, receive and redistribute Strategic national Stockpile assets was updated and submitted to NYSDOH for review and comment. LCPH subsequently received a total of 27,620 N-95 masks of various sizes and 960 capsules of Tamiflu from the SNS.
- LCPH staff attended NYSDOH provided training on Regional Radiological Response training.
- LCPH staff attended NYSDOH provided training on Medical Counter Measure Distribution and Dispensing.
- LCPH attended NYSDOH provided training on multi-agency Mass Fatality Planning.
- LCPH staff attended incident Command training, to the appropriate level.
- LCPH participated in the required Commerce Notification system drills.

In March 2009, H1N1 was rapidly spreading worldwide. In New York State local health departments led the response. NYSDOH compiled a list of H1N1 deliverables for LHDs to complete in preparation for the impact of the novel virus on NYS communities. The following H1N1 deliverables were accomplished:

- LCPH provided H1N1 vaccination distribution to assure the maximum access to vaccines by Lewis County residents identified as being in the CDC target groups. Local health care and school system mass vaccination programs were coordinated by LCPH. Gaps in vaccination plans were identified and plans developed to fill those gaps.
- Mass distribution of the H1N1 vaccine was provided by LCPH through multiple points of distribution (PODs) in all Lewis County school districts.
- LCPH submitted required doses administered data for all 2009 H1N1 influenza monovalent vaccinations, and other data points.

In 2009 the primary focus in emergency planning was in anticipation of an influenza pandemic. For Lewis County the issues, concerns, and countywide planning for the disease and its impact on Lewis County are the responsibilities of the Lewis County Pandemic and Disaster Preparedness Coordinating Committee. The committee of key Lewis County stakeholders and decision makers was appointed by resolution of the Lewis County Board of Legislators in April of 2007. The committee has provided the central planning forum for pandemic influenza in Lewis County. Among the issues addressed by the Committee in 2009 were:

- Inventory review of personal protection equipment (PPE) in Lewis County available for emergency response.
- Review of the emergency supply distribution policy for Lewis County.
- Development and review of the LC Mass Fatality Plan.
- Discussion and determination of pandemic response priorities to protect the public health.
- Special meetings for H1N1 updates, topics included: status of vaccination of migrant workers, schools, Amish, jail population, and other hard to reach populations. Also topics on hospital infection control and the LCGH infection control plan, SNS, and H1N1 specific information on signs, symptoms, prevention, transmission, etc.
- County planning re: Continuity of Operations Plans (COOP)
- Employee issues concerning mandatory sick leave, vaccine availability, public information, public communication.
- Local, state and national public health orders.
- H1N1 clinics for schools, community and the vaccine shortage.
- Planning for the next wave of H1N1.

For 2010, Lewis County Public Health, with the guidance and support of the New York State Department of Health, the Lewis County Pandemic and Disaster Preparedness Coordinating Committee, its Lewis County health planning partners and the communities of Lewis County, will continue to develop the critical skills, and secure the training and necessary resources, to effectively prepare for and respond to the future challenges of the emerging diseases, natural disasters, and potential man made disasters that could impact the public health of Lewis County.