Public Health Emergency Preparedness: Looking Back, Moving Forward

U.S. Efforts and International Dimensions

10th Annual Cross Border Public Health Preparedness Workshop
Pacific North-West Border Health Alliance

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“This directive is aimed at **strengthening the security** and **resilience** of the United States through systematic preparation for the threats that pose the greatest risk to the security of the Nation, including **acts of terrorism, cyber attacks, pandemics, and catastrophic natural disasters**…

…The system will allow the Nation to track the progress of our ability to **build** and **improve** the capabilities necessary to **prevent**, **protect against**, **mitigate the effects of**, **respond to**, and **recover** from those threats that pose the greatest risk to the security of the Nation”

**Requires the development of the following deliverables:**

- a national preparedness goal;
- a national preparedness system;
- a national planning system for all five mission areas along with interagency operations plans and guidance for **State, local, tribal** and **territorial governments**; and
- a national preparedness report
National Response Framework (NRF)

- Single, all-disciplines, all-hazards framework for Federal response in domestic incident management
  - Relationships
  - Leadership
- Links all levels of Government, private sector and non-governmental organizations in a unified emergency response.
- Supports State, Tribal, territorial and local incident managers
- Tiered response
- Scalable, flexible and adaptable operational capabilities
- Unity of effort through unified command

http://www.fema.gov/emergency/nrf
NRF Emergency Support Functions (ESF)

#1. Transportation
Department of Transportation

#2. Communications
National Communications System

#3. Public Works and Engineering
Department of Defense/U.S. Army Corps of Engineers

#4. Fire fighting
Department of Agriculture/Forest Service

#5. Emergency Management
Federal Emergency Management Agency

#6. Mass Care, Housing & Human Services
Federal Emergency Management Agency

#7. Resource Support
General Services Administration

#8. Public Health and Medical Services
Department of Health and Human Services

#9. Urban Search and Rescue
Federal Emergency Management Agency

#10. Oil and Hazardous Materials
Environmental Protection Agency

#11. Agriculture & Natural Resources
Department of Agriculture/Food and Nutrition Service

#12. Energy: Department of Energy

#13. Public Safety and Security

#14. Long Term Community Recovery

#15. External Affairs

ESF #14 - National Disaster Recovery Framework (NDRF)

- **Guidance** that enables effective recovery support to disaster-impacted States, Tribes and local jurisdictions

- **Flexible structure** that enables disaster recovery managers to operate in a unified and collaborative manner

- Focuses on **how best to restore**, redevelop and revitalize the health, social, economic, natural and environmental fabric of the community and **build a more resilient Nation**.

**Roles and responsibilities** of recovery coordinators and other stakeholders

- A **coordinating structure** that facilitates communication and collaboration among all stakeholders
- Guidance for pre- and post-disaster recovery **planning**
- The overall **process** by which communities can capitalize on opportunities to rebuild stronger, smarter and safer.

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<tr>
<th><strong>2006 PAHPA</strong></th>
<th><strong>2013 PAHP-Reauthorization Act (PAHPRA)</strong></th>
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<tbody>
<tr>
<td>• Codifies the <em>Department of Health and Human Services</em> (HHS) as lead of Federal response to public health emergencies <em>(ESF#8)</em></td>
<td>• Clarifies and reaffirms planning, oversight, and duties of the HHS Secretary and ASPR</td>
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<td>• Reauthorizes, clarifies, and provides new emergency response capabilities</td>
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<td>• Establishes that in 2009, the HHS Secretary shall submit the <em>National Health Security Strategy</em> (NHSS)</td>
<td>• Expands and clarifies authorities to approve, license, and use medical countermeasures</td>
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<tr>
<td>• Creates the <em>Office of the Assistant Secretary for Preparedness and Response</em> (ASPR)</td>
<td>• Reauthorizes and strengthens authorities of BARDA and Project Bioshield</td>
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<tr>
<td>• Creates the Biomedical Advanced Research and Development Authority (BARDA)</td>
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*ASPR: Resilient People. Healthy Communities. A Nation Prepared.*
HHS and ASPR

**HHS** is the United States Government's principal agency for protecting the health of all Americans and providing essential human services

- Lead agency for **ESF#8**: Public Health Emergencies, under the National Response Framework

- The **Secretary of HHS delegates to ASPR** the leadership role for all health and medical services support function in a health emergency or public health event.

**ASPR** leads the nation in **preventing, preparing for, and responding** to the adverse health effects of public health emergencies and disasters

*ASPR: Resilient People. Healthy Communities. A Nation Prepared.*
Vision
A nation prepared to respond to public health emergencies in an interdependent global health security environment

Mission
Provide leadership in international programs, initiatives, and policies that deal with public health and medical emergency preparedness and response*

*Note: The asterisk indicates additional information or qualifications related to the mission statement.
“The health security of each nation is dependent on the health security of other members of the international community”

- NHSS, 2009

“The health of Americans and the health of people around the world are more closely linked than ever before…” — HHS Global Health Strategy 2011-2015

Key Public Health Preparedness and Response Objectives

• Enhance Global Health Surveillance

• Prepare for and Respond to Public Health Emergencies
  – Support coordination mechanisms for addressing public health emergencies consistent with the development of sustainable response capacities and with the International Health Regulations (2005)
  – Develop policy frameworks, agreements and operational plans to facilitate HHS decision-making in response to both single and multiple international requests for emergency assistance, including for the deployment of medical countermeasures and HHS personnel.
A Multifaceted Approach to International Public Health Preparedness and Response

**Multilateral**
- International Health Regulations (IHR)- International capacity building programs
- Global Health Security Initiative

**Regional**
- North American Plan for Animal and Pandemic Influenza (NAPAPI)
- Beyond the Border (BTB)
- Cross-border collaborations

**Domestic**
- Policies and Protocols for IHR implementation
- Frameworks for international assistance during emergencies
“...I urge all nations to join us in meeting the WHO goal of making sure all nations have core capacities to address public health emergencies in place.... That is what our commitment to the health of our people demands.”

– U.S. President Obama, Address to the U.N. General Assembly, September 21, 2011

**Domestic:** Monitoring of USG Domestic Implementation and Compliance with the IHR (2005)

**International:** Support/coordination of the USG IHR (2005) Core Capacity building efforts abroad
Article 21 (Ground Crossings), Part IV (Points of Entry):
Countries sharing common borders should consider entering into bilateral or multilateral agreements or arrangements concerning prevention or control of international transmission of disease at ground crossings in accordance with Article 57.

Article 57 (Relationships with other International Agreements), Part X (Final Provisions):
Nothing in the IHRs shall prevent countries having certain interests in common from concluding special treaties or arrangements in order to facilitate the application of the IHRs, and in particular with regard to the direct and rapid exchange of public health information between neighboring territories of different countries.

Local (city/town/village)  Intermediate (state/region/province)  National  Regional
Funding Opportunity Announcement Number: CDC-RFA-TP12-120102CONT13).

BP2: Guidance for grantees (including border states) for executing inter-jurisdictional preparedness planning and risk assessments to identify hazards, vulnerabilities, and threats.

HPP-PHEP funding can be used to:

- Conduct cross-border risk assessments
  - Inform capability-based planning
  - Prioritize preparedness investments
  - Serve as a basis for coordinating emergency management

- Implement multi-disciplinary planning
  - Assess, notify, and respond to natural, accidental, or deliberate public health events
Global Health Security Initiative (GHSI)

Ministerial-level initiative to strengthen global public health preparedness and response to biological, chemical, radio-nuclear threats (CBRN), and pandemic influenza.
### Examples of GHSI Capabilities and Key Projects

<table>
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<th>Capability</th>
<th>Description</th>
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<tr>
<td>1 Emergency and Crisis Communications</td>
<td>Ability to have effective international communications capabilities among health officials in the event of a critical incident or health emergency. <strong>Emergency Communication Protocol for Senior Officials</strong></td>
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<tr>
<td>2 CBRN and Pandemic Influenza Preparedness</td>
<td>Ability to identify gaps and prioritize risk management activities to inform national and international preparedness planning. <strong>GHSI Medical Countermeasures Survey</strong></td>
</tr>
<tr>
<td>3 Threat and Risk Assessment</td>
<td>Ability to assess the risk potential of CBRN agents by collaborating with the security, intelligence and health sectors. <strong>Threat and Risk Assessment (TRA) Tool for Biological Agents</strong></td>
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<tr>
<td>4 Risk Communication</td>
<td>Ability to inform the policy-making process in risk management and communication by having guidelines for generic risk communications, and specific strategies to address communication needs for key threat agents</td>
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<tr>
<td>5 Laboratory Capacity</td>
<td>Ability to increase communication, collaboration and improved practices in laboratories among GHSI countries. <strong>Laboratory surge capacity; sample sharing</strong></td>
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<td>6 Early Alerting of Public Health Events</td>
<td>Ability to rapidly access open source information for global disease surveillance, specifically related to CBRN agents and pandemic influenza. <strong>Early Alerting and Reporting (EAR) Project</strong></td>
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<tr>
<td>7 Provision of International Assistance</td>
<td>Ability to build capacities to share international assistance, such as medical countermeasures, for international public health emergencies. <strong>International Deployment of Smallpox Vaccine Pilot Project</strong></td>
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North American Leaders Summit (NALS)
North American Plan for Animal & Pandemic Influenza (NAPAPI)

**NALS**
Presidential-level initiative among the United States, Mexico and Canada to promote global competitiveness of the region, foster the well-being of the region’s citizens, and make the three countries more secure

**NAPAPI** is a trilateral framework for cross-sectoral collaboration on preparedness and response to animal and pandemic influenza

### Key NAPAPI Focus Areas
- Lessons Learned from H1N1
- Includes Animal Influenza
- Operational Frameworks for Joint Response and Mutual Assistance
- Cross-sectoral collaboration
- Trilateral emergency and public communication strategies:

### Governance
- **Senior Coordinating Body (SCB):**
  High level forum to discuss and facilitate trilateral collaboration on influenza preparedness and response
- **Health Security Working Group (HSWG):**
  Develops and completes actions to implement the NAPAPI goals

*AP photo: April 2, 2012*
Beyond the Border Initiative (BTB)

Beyond the Border articulates a shared approach to security in which both countries work together to address threats within, at, and away from our borders, while expediting lawful trade and travel

Health Security Working Group

- **Goal:** To enhance our collective preparedness and response capacity for health security threats
- Four areas of focus:
  - **Risk Assessment:** Developing a shared understanding of the health security risk environment
  - **Information Sharing:** Enhancing laboratory networks and sharing of epidemiological and surveillance information
  - **Cross-Border Partnerships:** Leveraging existing cross border partnerships such as the Canada – U.S. Pan-Border Public Health Preparedness Council (PBHPC) to help inform policy and operational issues
  - **Interoperability:** Identifying and addressing barriers to sharing medical countermeasures and personnel

Responding to International Requests for Assistance during Public Health Emergencies
Increasing Frequency of International Requests for Medical Countermeasures

- **1982**
  - Feb '82: PAHO Agreement
  - Oct ‘05: Pledge to WHO Smallpox Vaccine

- **2008**
  - Jul ‘07: 2009 H1N1 Flu Antivirals – 14 requests
  - Nov ‘08: Donation to Mexico & PAHO Vaccines – 16 requests
  - Feb ‘09: Donation to WHO

- **2009**
  - Sep ‘09*: 2009 H1N1 Flu Antivirals – 14 requests
  - Sep ‘11*: Donation to WHO

- **2010**
  - Oct ‘10*
  - Dec ‘09*
  - 2011
  - Jan ‘13*

- **2012**
  - Feb ‘12
  - Jun ‘12

- **2013**
  - Mar ‘11

**Timeline**

- ~9 months to respond to request
- ~7 months to deploy H1N1 vaccine
- ~24 hours from request to patient administration

* MCM deployed in response to request
DRAFT USG Policy Frameworks

Medical Countermeasures

- Policy Framework for Responding to International Requests for Public Health Emergency Medical Countermeasures from the U.S. Department of Health and Human Services

HHS Personnel

- Department of Health and Human Services Policy Framework for the Deployment of Personnel During International Medical and Public Health Emergencies

Pandemic Influenza

- United States Government Policy Framework for Responding to International Requests for Public Health and Medical Assistance during an Influenza Pandemic
Leveraging Cross-Border Collaborations: United States and Canada
## Leveraging Cross-Border Agreements to Complement Federal-level Actions

<table>
<thead>
<tr>
<th>US State – Canadian Province Agreement</th>
<th>Liability based on incoming medical personnel as agents of the receiving state</th>
<th>Licenses, certificates, and permits held by one signatory are recognized by the requesting signatory during an emergency to the extent that the requesting signatory allows</th>
</tr>
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<tr>
<td>International Emergency Management Assistance Compact</td>
<td>Yes for tort liability and immunity purposes</td>
<td>Yes</td>
</tr>
<tr>
<td>Operation Plan for Moving Emergency Medical Services Staff and Resources Across the Washington and British Columbia Border (2009)</td>
<td>Yes, but must be registered as emergency worker</td>
<td>Yes, but must be registered as emergency medical service provider in order for the receiving jurisdiction to recognize the assisting jurisdictions’ licenses</td>
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Leveraging the Canada – U.S. Pan-Border Public Health Preparedness Council

- Support IHR implementation and the Local, State/Province level
  - ✓ Build IHR core capacities
  - ✓ Contribute to annual report to WHO
- Complement and/or inform federal-level initiatives for the provision of mutual assistance
  - ✓ Processes for the deployment of personnel and medical countermeasures
  - ✓ Hospital and laboratory surge capacity
  - ✓ Outbreak investigation
- Contribute to bilateral joint risk assessments
- Identify bilateral public health preparedness gaps that needs a bilateral solution
Moving Forward

• Coordinated agendas for multilateral, regional, bilateral and cross-border initiatives
  
  — GHSI, NAPAPI, BTB, PBHPC
  
  — Key role of the PBHPC to enhance communication and information sharing through established regional alliances:
    • e.g. Pacific North-West Border Health Alliance

• Identification of resources
Thank You

A world prepared, a nation prepared