

Mass Dispensing Area #28
Berlin, Newington, Rocky Hill & Wethersfield



Emergency Preparedness Newsletter
2007

We hope that spring and summer have been all you wanted them to be.

We hope to improve our readiness with ongoing involvement of volunteers. We realize that most volunteers are usually the busiest people but we hope that you can find time to help us with some specific readiness issues and tasks. See under the "FEATURED SECTION" for more information.

NATIONAL PREPAREDNESS MONTH: September 2007

During National Preparedness Month, CCHD is encouraging all residents and businesses to take simple steps to prepare for emergencies and disasters including developing emergency supply kits, making emergency plans, being informed about different threats and getting involved in preparing the communities.

One of the simplest things everyone can do to be better prepared is to have an emergency plan. To develop one, ask some important questions. "In the event of an emergency, do we have everyone's contact numbers and an out of town contact?" "Is there a designated place for everyone to meet outside of the home, neighborhood or business?" "What is the emergency plan including the evacuation location of a child's school or a business?" Only you can answer these questions and develop an emergency plan that will suit your unique needs. You can download information to help get you started at the U.S. Department of Homeland Security's website at www.ready.gov. The site also has recommendations for supply kits and information about various types of disasters and terrorist threats.

Residents should volunteer and take opportunities to prepare, train and participate in community exercises with local emergency responders. Knowledge of your community's planning will help you to be better prepared. For more information or to volunteer visit www.ccthd.org or call 721-2816.



STOP BY OUR OFFICE – MEET OUR STAFF
Wethersfield Town Hall-505 Silas Deane Highway

- **Suggest you call before coming 721-2816 or -2818**
- **Have your picture taken for your Emergency ID**
- **Get to know us and us you**
- **Let's talk about your role(s) during a Public Health emergency (**

CCHD emergency planning is moving along with an emphasis this year on the development of training for volunteers before any event and compressed training at the time of an event - called Just-in-Time Training (JITT). We hope that our volunteers take advantage of as many training opportunities as possible.

FEATURED SECTION: VOLUNTEER OPPORTUNITIES

Volunteers are needed to be involved in the training so preparedness and planning is better coordinated. Being trained and knowledgeable assures that the public health response will be timely and effective. Many volunteers assist the Health District with the annual Flu Clinics which are used for live training .

HELP PLAN & TRAIN FOR KEY POSITIONS ***WHAT BEST FITS YOUR SKILLS AND/OR INTERESTS?***



CALL JUDYE @ 721-2816

Operations Section: This section manages the medical and non-medical components of mass vaccination and medication dispensing clinics. The medical component includes Triage, Medical Evaluation, Vaccination and Medication administration, Pharmacy, Exit Review, EMS, Education and Psychosocial components. The non-medical component involves Forms Distribution, Security (Interior & Exterior), Psychosocial and others.

Planning Section: This section tries to plan ahead to meet the needs of an emergency/disaster event. It manages the volunteers and other workers including Intake/Orientation, Credentialing/License Verification, ID/Badging, Scheduling and a Labor Pool. It also oversees Technical Specialists that might be needed.

Logistics Section: This section is responsible for the management of the POD facility and all supplies needed. It provides for Communications, Runners and the feeding of workers.

Finance & Administration: This section is responsible for Medical Records, Costs, Time worked and any Claims.



Volunteers

We still need more volunteers since some volunteers are no longer able to participate due to moving, illness or other commitments.

Contact anytime: Judy Torpey, Emergency Preparedness Coordinator



721-2816



judy.torpey@wethersfieldct.com

See CCHD's Web site at www.ccthd.org for information regarding services, health, emergency preparedness, links to other sites and upcoming events.



Interested in Free Training?
Register on: CONNECTICUT TRAIN
www.ct.train.org
[See Instructions that Follow]



UPCOMING TRAINING OF INTEREST

- **Strategic National Stockpile (SNS): Guidance and Overview Course**
Course is comprised of 23 minute online video and post test. Overview of Strategic National Stockpile (SNS). Is for all public health, healthcare workers, and MDA volunteers.
- **Fundamentals of Crisis and Emergency Risk Communications**
Provides an introduction to communication in a crisis and emergency risk situation – Hot Lines, phone banks & public contact. Dates & locations vary.
- **Smallpox Vaccination Train-the-Trainer**
Part A is online portion of a two part course designed to prepare licensed healthcare professionals who can administer vaccines. **Part B** is the live workshop that will be offered by CCHD. After completing both the online and hands-on sessions you will be able to administer the smallpox vaccine within Mass Dispensing Area 28.
- **IS100 Incident Command System-Intro, IS 200 Basic Incident Command System for Federal Disaster Workers, IS300 Intermediate, IS400 Advanced, IS700 National Incident Management System-Introduction, IS 800 National Response Plan (NRP), An Introduction-** multiple local dates & locations or FEMA online
- **Public Health Emergency Preparedness 101**
Public Health Emergency Preparedness 101 is now open to all state and local public health professionals. Online.



Smallpox Vaccination Training Class CALL JUDYE @ 721-2816.

ALSO WATCH
www.ct.train.org FOR CCHD
(MDA 28) TRAINING ANNOUNCEMENTS



CONNECTICUT TRAIN

First responders, town employees and CCHD volunteers are eligible to register. You may take any course unless it is restricted or priority has been given to particular disciplines. Courses may be site, distance learning, or web-based. Search for courses. Create a personal online transcript. Provide and/or read feedback on courses. Sign up for



emails about new courses. The Training Finder Real–Time Affiliate Integrated Network, or TRAIN, is the nation’s premier learning resource for those who protect the public’s health. TRAIN is a project of the Public Health Foundation with funding from The Robert Wood Johnson Foundation, participating states and CDC. TRAIN is accessed through <http://www.ct.train.org/>. It is managed by CT DPH. SEE NEXT PAGE



Please direct questions about problems using the site to Christopher Stan at:
Christopher.stan@po.state.us or 860-509-7133

How to Register: <http://ct.train.org/>

1. Select “**Create Account**” on “**Left**” button
2. Read “TRAIN” Policies – Click “I agree to etc.” box then “**Next**” button
3. **Fill-in** required fields – Click “**Next**” button
4. Click on **down arrow** next to “**Select Agency**”
5. Select “**Smallpox Preparedness & Response**” from the menu
6. Click on **down arrow** next to “Select Smallpox Preparedness & Response”
7. Select “**Mass Vaccination Areas**” from the menu
8. Click on the **down arrow** next to “Select Mass Vaccination Areas”
9. Select “**28**”-“**CCHD**” from the menu. Click on “**Next**”
10. Select **two(2) roles**, then **scroll** to the bottom of the screen and then select “**Volunteer**” as your **third(3)** in “**Professional Roles**” and click “**Next**”
11. Click on “**Official Public Health Agencies**” box and select “**Local**” from the menu as **one of your three (3)** “**Work Settings**” and click on the “**Next**”
12. Selecting Demographic information is optional
13. **Click** on the “**Next**” button **to complete your registration****

****Once you have registered,**
go back to [Http://ct.train.org](http://ct.train.org) to select your training:

1. **Type** in your “Login Name” and “Password”
2. **Click** on the “Course Search” button
3. **Click** on “Browse My State Only” that is in the menu on the left side of the screen and select your course or review the upcoming courses listed on the center or right side of the screen.



CONTROL MEASURES for PANDEMIC FLU PROTECT SELF, FAMILY & OTHERS

Community Measures Prevent Deaths During Pandemic: New Study Findings

School closures and other community strategies designed to reduce the possibility of spreading disease between people during an epidemic can save lives, particularly when the measures are used in combination and implemented soon after an outbreak begins in a community, according to a new study based on public records from the 1918-1919 influenza pandemic.

The findings, which are published in the Aug. 8 issue of the *Journal of the American Medical Association*, provide vital clues to help public officials planning for the next influenza pandemic and highlight the importance of community strategies. These strategies are particularly important because the intervention most likely to provide the best protection against pandemic influenza -- a vaccine -- is unlikely to be available at the outset of a pandemic. Community strategies that delay or reduce the impact of a pandemic (also called non-pharmaceutical interventions) may help reduce the spread of disease until a vaccine that is well-matched to the virus is available.

Scientists from the Centers for Disease Control and Prevention (CDC) and the University of Michigan Medical School's Center for the History of Medicine completed an exhaustive review of public records such as health department reports, U.S. Census mortality data and newspaper archives.

"Communities that were most successful during the 1918 pandemic quickly enacted a variety of measures," said Dr. Martin Cetron, director of CDC's Division of Global Migration and Quarantine and senior author of the study. "Those planning for the next pandemic need to carefully consider how to best use these strategies to protect people and decrease the potential impact of the next pandemic in their communities."

These strategies – voluntary isolation and quarantine, dismissal of students from school classrooms, and social distancing in the workplace and community – form the basis for CDC's guidelines for how American communities can empower themselves to confront the next influenza pandemic.

The JAMA study evaluated public health measures such as school closures and cancellation of public events, which 43 American cities took during the 1918 pandemic. The researchers sought to determine whether the timing, duration and combination of such measures impacted the city's death rate during the pandemic.

To determine the public health measures' effectiveness, the researchers analyzed each city's excess death rate - the number of pneumonia and influenza deaths in excess of the amount expected for the time period.

During a 24-week period in 1918-1919, more than 115,000 excess pneumonia and influenza deaths in the 43 cities were attributed to the pandemic. **Cities that began interventions earlier had more success in decreasing excess deaths** than those that implemented the measures later, regardless of how long the later interventions were in place or how they were executed.

In a telling example, New York City's early and sustained response, including isolation and quarantine and staggered business hours, resulted in the lowest excess death rate for any city on the East Coast during the time period reviewed. By contrast, Pittsburgh was well into its outbreak before implementing the interventions and experienced the highest excess death rate of any of the 43 cities.

"In a world faced by the threat of avian influenza or other novel strains of influenza, it is critical to determine if such costly and socially harsh measures as school closures and cancellation of public gatherings might not only lower death and case rates, but also delay the spread and allow time for the development and distribution of effective vaccines and antivirals," said Dr. Howard Markel, director of the University of Michigan Medical School's Center for the History of Medicine and lead author of the study. "We have demonstrated that these measures can have a real impact."

The interventions assessed fell into three major categories: school closures, bans on public gatherings and isolation of sick people and quarantine of their healthy household contacts. The most common approach was closing schools combined with banning public gatherings. All but three of the 43 communities closed schools during the 24-week period studied.

Influenza pandemics occur when a new influenza virus emerges to which most people have little or no immunity and the virus gains the ability to spread easily between people. The 1918 pandemic sickened about 20 percent of the world's population and caused an estimated 40 million deaths worldwide, about 550,000 of them in the United States.

NOTE: All community-based strategies will be used in combination with individual infection control measures such as handwashing and cough etiquette.

FOR MORE INFORMATION: www.ccthd.org or http://www.pandemicflu.gov/plan/community/community_mitigation.pdf

PICK UP AT CCHD TOWN HALL OFFICES: Pamphlets on "Preparing for Pandemic Influenza – Be Aware, Be Prepared", Children in a Public Health Emergency", "Caring for Someone Living with Alzheimer's or a Related Dementia – Are You Prepared for a Public Health Emergency?" and Public Health Emergencies: Answer the Call!".