

ANNUAL REPORT

2011-2012

PUBLIC HEALTH EMERGENCY PREPAREDNESS UNIT

HEALTH READINESS AND RESPONSE SECTION

PUBLIC HEALTH DIVISION



Wyoming Department of Health and Wyoming National Guard coordinated an airlift of medical supplies and countermeasures to Teton County during the May, 2012 Prairie Eagle Exercise.



Wyoming
Department
of Health

Commit to your health.

Public Health Emergency Preparedness Unit

The Public Health Emergency Preparedness Unit contributes to the quality of life in Wyoming by upgrading and integrating State, Tribal and Local Jurisdictions' public health preparedness for, response to and recovery from all hazards emergencies.

The Wyoming Department of Health (WDH), Public Health Emergency Preparedness Unit (PHEP) receives funding annually through a cooperative agreement from the Centers for Disease Control and Prevention (CDC) to support all hazards public health emergency preparedness by state, local and tribal public health agencies and partners. Our close partnerships ensure we can successfully respond to a public health emergency.



Our activities include response planning, training and exercise delivery, medical countermeasure dispensing, medical materiel management, communication coordination, improvement planning, disease surveillance, laboratory testing, epidemiological investigations and volunteer management.

The *Public Health Emergency Preparedness Unit 2011-2012 Annual Report* describes activities conducted during the grant year from August 2011-2012.

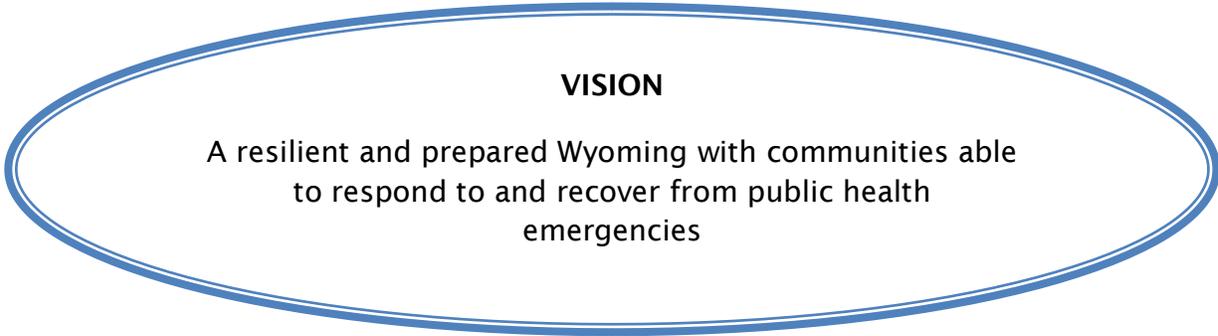
This is the third annual report prepared by the PHEP Unit to summarize activities conducted with the CDC funding. These activities align with the Public Health Preparedness Capabilities: National Standards for State and Local Planning.

- Community Preparedness
- Community Recovery
- Emergency Operations Coordination
- Emergency Public Information and Warning
- Fatality Management
- Information Sharing
- Mass Care
- Medical Countermeasure Dispensing
- Medical Materiel Management and Distribution
- Medical Surge
- Non-Pharmaceutical Interventions
- Public Health Laboratory Testing
- Public Health Surveillance and Epidemiological Investigation
- Responder Safety and Health
- Volunteer Management



MISSION

Ensure communities are prepared to respond to natural and man-made public health disasters and emergencies through proactive planning and preparation



VISION

A resilient and prepared Wyoming with communities able to respond to and recover from public health emergencies

◀ STRATEGIC PLANNING ▶

In April 2011, PHEP undertook a strategic planning process. The process followed the CDC's *Public Health Preparedness Capabilities: National Standards for State and Local Planning* document, which provided a recommended process for identifying past successes and future challenges. In July 2012,



PHEP reviewed and updated the PHEP Five Year Strategic Plan. Changes included documenting the Budget Period 11 activities status and progress, and moving incomplete activities into Budget Period 1, and completed activities into a sustainment status.

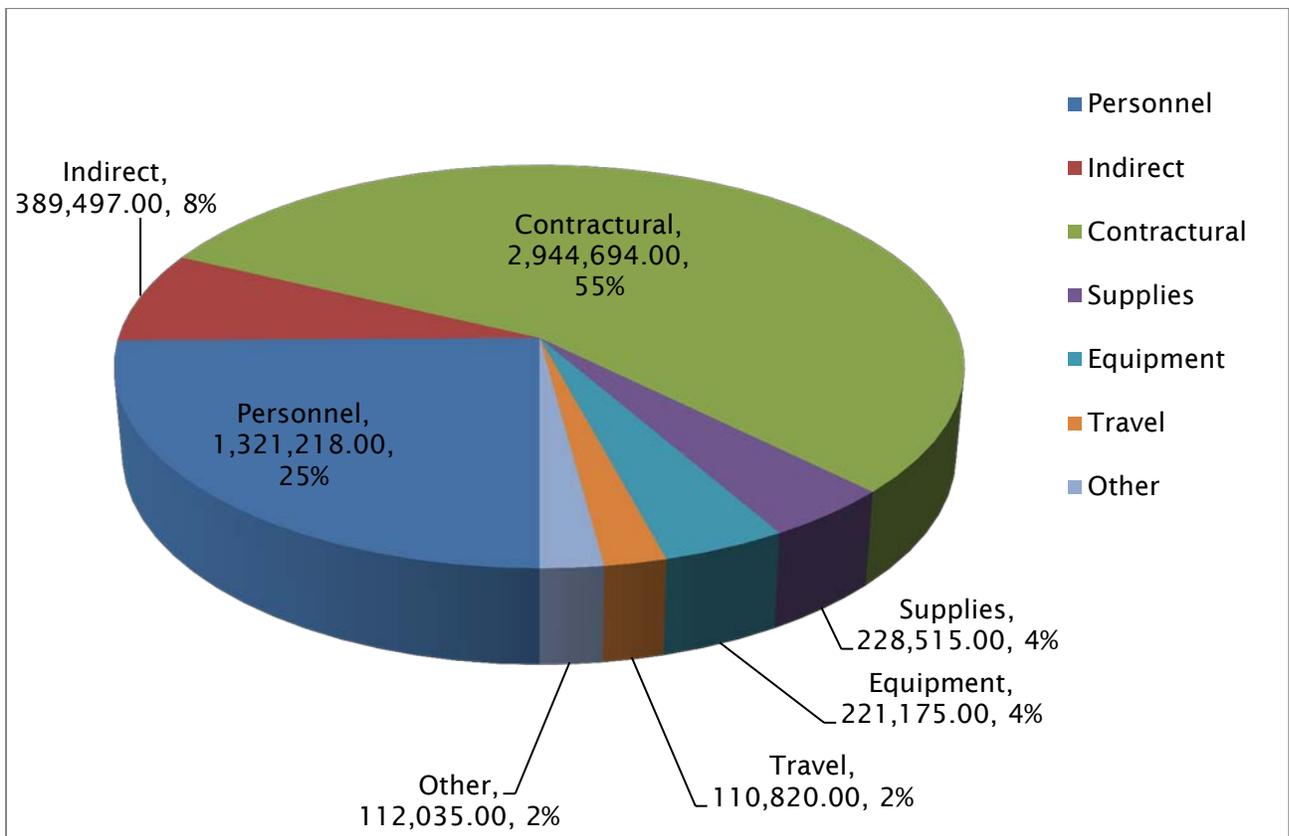
The Wyoming Department of Health, Public Health Emergency Preparedness Unit has made tremendous progress in public health disaster planning, training, exercise, communication, disease surveillance, laboratory testing and response since the inception of bioterrorism funding. This progress can be seen in the accomplishments of the Strategic National Stockpile program, the public health laboratory, epidemiology and surveillance, exercise development, interoperable communication, planning, responses to emergencies, and numerous other programs within the state of Wyoming. This strategic plan will enable PHEP to focus resources and track progress on identified priority areas during the next five years. We remain committed to executing our strategic plan.

For more information regarding our Five Year Strategic Plan, please see our website: <http://health.wyo.gov/sho/hazards/index.html>

◀ SUMMARY OF FUNDING ▶

Public Health Emergency Preparedness funding received from Centers for Disease Control:

- August 10, 2011 to August 9, 2012 - Total Funding = \$5,327,954.00 (\$5,027,379.00 Budget Period 11 funding and \$300,575.00 Carryover from Budget Period 10) \$169,000 designated for Cities Readiness Initiative



◀ CAPABILITY UPDATES ▶

COMMUNITY PREPAREDNESS

The Wyoming Department of Health (WDH), Public Health Emergency Preparedness (PHEP) planning personnel and the public health lab attended planning and exercises for the U.S. Postal Service (USPS) Bio Detection System (BDS) in both Casper and Cheyenne. Personnel assisted with new incident response planning in Casper and confirmed accuracy of incident response plans and the roles of WDH during a BDS activation in Cheyenne.

PHEP conducted training on the Strategic National Stockpile and CHEMPACK at one of the initial meetings of the Cheyenne Regional Medical Center's Emergency Management Committee (EM) and became a participating partner at Cheyenne Regional Medical Center's EM committee meetings.

Planning personnel drafted the WDH Area Operations Plan in order to provide a state level organizational framework for emergency response support to potential or existing public health incidents affecting two or more counties, when resources may be limited and allocation needs to be determined at the State level. This plan is also the basic guidance for deployment and utilization of human resources such as, Public Health Nurses, Epidemiologists, Mass Dispensing personnel and Incident Command support personnel.

In support of community preparedness planning efforts, WDH continues to participate as part of the Wind River Indian Reservation (WRIR) All Hazards Steering Committee meetings, which is made up of Local and Reservation organization representatives, such as, Tribal and County Public Health, Emergency Management, Law Enforcement and other groups.

As part of the budget year August 10, 2011 to August 9, 2012 deliverables, the State mandated that counties collaborate on emergency planning with local Emergency Managers and hospitals; as well as actively participate or lead local preparedness groups made up of various sectors such as business, community leadership, cultural and faith-based groups and organizations, emergency management, healthcare (to include hospitals and Emergency Medical Service (EMS)), law enforcement, fire, social services, housing and sheltering, media, mental/behavioral health, nursing home or senior center, and education or childcare providers, i.e. Local Emergency Planning Committee (LEPC).

Collaborative planning and regular preparedness planning meetings began with the WDH Behavioral Health Division (BHD) and Aging Division, Office of Licensing and Surveys including solicitation of their suggestions for vulnerability indicators to be used in county-specific vulnerable population profiles under development. Future development of an intra-agency

collaborative planning group to develop response capability planning and address planning issues related to Wyoming's Unable to Self-Evacuate (UTSE) and other vulnerable populations. WDH began researching Divisions of Aging and Behavioral Health vulnerability indicators. PHEP began GIS training in preparation for future identification and mapping of vulnerable populations.

A health based, jurisdictional risk assessment (JRA) tool was researched and developed in collaboration with the Texas Department of Health and prepared for use at the state and local level during the 2012-2013 budget period.

Unable to Self Evacuate (UTSE)

During the budget year, Hospital Preparedness Program (HPP) and PHEP contracted with Wyoming Independent Living Rehabilitation, Inc. (WILR) to hire a UTSE program coordinator. Stacie Fagerstone was hired by WILR in March 2012 and has the following responsibilities:

- Develop and maintain a UTSE website-www.wyutse.org, which was completed in May 2012
- Serve as a member and the spokesperson for the Unable to Self Evacuate (UTSE) Core Advisory Group (CAG) at public meetings, conferences, etc.
- Coordinate meetings of the UTSE CAG
- Research and identify best practices from other states and be knowledgeable about events occurring around the US to provide information to the CAG and ideas, guidance, leadership, development, implementation of activities or projects within Wyoming to further the UTSE goals
- Develop appropriate presentations and present information to first responders, community organizations, service providers, consumers, etc.

The UTSE program coordinator was able to begin trainings quickly after she was hired. Service provider trainings were conducted for 8 different agencies throughout Wyoming. These trainings included information about sheltering in place, short term evacuations and long term evacuations and discussions were held about the plans these facilities currently have in place.

Other trainings conducted by UTSE CAG members included a webinar for county public health, hospitals and county emergency managers on UTSE activities and their roles in planning, conducted in October 2011. Service providers of the Aging Division were provided training on their role in emergency preparedness, how they can help prepare their clients and UTSE activities as well as being provided bags for distribution to their UTSE clients during an in person training conducted in late 2011.

The UTSE CAG coordinated with the Wyoming Law Enforcement Academy to produce UTSE training for first responders titled "Unable to Self Evacuate (UTSE) Workshop." This was released in early 2012 and EMTs and peace officers can

receive credit for taking the online course. This online training is in addition to the first responder training conducted by the UTSE program coordinator in 5 counties and presentations at the Wyoming Trauma Conference.

As of August 31, 2012, 2215 UTSE Bags have been given to consumers throughout the entire state. There are 3125 bags remaining. In addition to the bags, a UTSE sticker was produced and will be given to those who are UTSE along with a list of the pros/cons of using the sticker so the individual can make an informed decision about their use.

COMMUNITY RECOVERY

Defined by the Centers for Disease Control and Prevention (CDC) as, "...the ability to collaborate with community partners, (e.g., healthcare organizations, business, education, and emergency management) to plan and advocate for the rebuilding of public health, medical, and mental/behavioral health systems to at least a level of functioning comparable to pre-incident levels, and improved levels where possible."

Restructuring and realignment of programs and priorities of the Wyoming Department of Health (WDH) put an immediate focus on updating the Emergency Operations Plan (EOP) and the Continuity of Operations Plan (COOP). Training and exercise programs to facilitate understanding of each division's roles and responsibilities in an emergency, as well as the activities necessary to ensure viability in an austere environment, has also been a priority due to realignments and staff turnover.

Ensuring seamless coordination and operational support during incidents affecting multiple counties led to the drafting of the Area Operations Plan (AOP). PHEP staff and representatives of Public Health Nursing, and Fremont and Niobrara counties provided comments.

Finally, with the new budget year, PHEP launched an initiative among the Aging, Behavioral Health, and Public Health divisions to develop a unified approach for coordinating requests for emergency mental health, medical, and public health services for all age groups in an affected county, or counties. Still in the infant stage, the ultimate goal (output) is to develop a plan process that:

- Uses a standardized approach to review requests for assistance, identifying duplications and shortfalls
- Prepares and submits a comprehensive support request through the Wyoming Office of Homeland Security (WOHS) to the Emergency Management Assistance Compact (EMAC) Coordination Center, or the Office of the Assistant Secretary for Preparedness and Response (ASPR)

Regional Emergency Coordinator (REC), U.S. Department of Health and Human Services (HHS) Region VIII, and other HHS agencies and offices

EMERGENCY OPERATIONS COORDINATION

Exercises

PHEP provides support, guidance, technical assistance, and will serve as a model for implementation at the state, local, and tribal public health levels for exercises. The exercise program develops emergency-ready public health departments by upgrading, integrating and evaluating state and local public health jurisdictions through drills and exercises which will validate state, local, and tribal Public Health Emergency Operations Plan.



2011-2012 Exercises and Drills

- *Prairie Eagle* which was a four day state level Strategic National Stockpile (SNS) Full Scale Exercise. For more information about *Prairie Eagle* please see the SNS Section on page 14
- WDH Emergency Operations Communication Center Functional Exercise
- Regional Strategic National Stockpile tabletop exercise with SNS partners using webinar.
- Conducted quarterly joint Alerting and Notification Drills with local partners
- Conducted quarterly Hospital Available Beds for Emergencies and Disasters (HAvBED) and Volunteer Notification Drills

Training

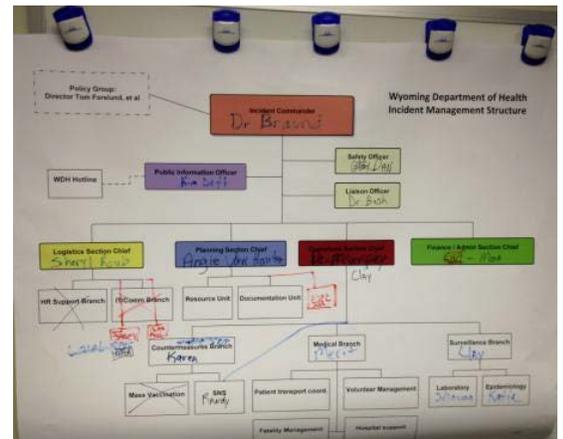
Through the work of the Emergency Preparedness Outreach Technician and expanded use of technology, the PHEP training program continued to make significant strides developing and delivering a wide variety of training to state, local, and tribal partners through onsite and distance learning. PHEP staff conducted over 100 Wyoming Health Alert Network (WyHAN) trainings for state and local partners.

The use of the "TEPINAR Training" ("*Training, Exercise, Planning, Improvement*" webinar) continued to grow and was used for monthly training, exercise planning, and ad hoc training. Training during the last year included:

- National Exercise Schedule (NEXS)
- SNS Inventory Management
- Wyoming Alert and Response Network (WARN)
- Bed Tracking
- Exercise Planning and Design
- Virtual Situation Awareness Tool (VSAT)
- After Action Report and Improvement Plan Writing (AAR/IP)
- Using Exercise Evaluation Guides (EEG's)
- Volunteer Management
- Medical Reserve Corps
- DEA Registrant
- IDS, CSA, and POD Security
- Contract Reporting Tool (CRT)

Other trainings during 2011-2012 include:

- Summer Institute at the Northwest Center for Public Health
- NIMS/ICS Training 100, 200, 300, and 400
- Monthly training for IMT
- CHEMPACK
- Participation in Northwest Center for Public Health Hot Topics
- National course "Medical Response to CBRNE Events"
- Extensive training around the state on the three components of WARN



Wyoming Health Alert Network (WyHAN), Wyoming's Enrolment, Response, Operations, Logistics - Let's Enroll (WYEROLL), and Wyoming Hospital Bed Tracking System)



Learning Management System Wyoming TrainingFinder Real-time Affiliate Integrated Network (WY TRAIN) End of Year Statistics for August 8, 2011 through August 7, 2012

New Learners: 416
 Total Wyoming Learners: 10,708
 Course Registrations: 1,967*
 Courses Offered: 200**

*Wyoming Sessions/Users Only

**Does not reflect national courses or those available from FEMA, CDC, and other TRAIN affiliates

This training was conducted through onsite and live events, webinars, and online courses. This was accomplished through coordination and collaboration with other WDH programs and state agencies including Public Health Nursing, the Wyoming National Guard, WDH Human Resources, Medicaid, Hospital Preparedness Program, Behavioral Health Division, and the Public Health Lab.

PHEP implemented the (WDH) Incident Management Team (IMT), made up of personnel from different WDH Divisions and Programs and started conducting monthly training meetings. All members have had initial incident command and NIMS training course (ICS 100, 200, and 700), and most have had advanced courses (ICS 300, 400). Monthly meetings include continual Incident Command System (ICS) refresher trainings and table top exercise scenarios.

HAvBED - Bed Tracking

Wyoming HAvBED System - Bed Tracking System is maintained by the Hospital Preparedness Program (HPP). The Wyoming Hospital Bed Tracking System is an easy-to-use system for tracking and managing hospitals' available resources, diversion status and capacity to respond to emergencies. Designed by hospital personnel and public health officials to be straightforward, this program is used to manage daily activity as well as for hospital capacity management when a public health or medical emergency occurs. This system enables each hospital to report available beds by type; current facility status (including diversion status); and number of ventilators and influenza patients. This system tracks the number of available beds in all Wyoming hospitals. We have worked with each hospital to keep the system updated and trained hospital and public health personnel in the HAvBED system. We have seen increased participation by hospitals and public health. We have added all Wyoming nursing homes to the system and are working to roll this program out to them.

EMERGENCY PUBLIC INFORMATION AND WARNING

This capability states, "Emergency public information and warning is the ability to develop, coordinate, and disseminate information, alerts, warnings, and notifications to the public and incident management responders." Wyoming is prepared to activate the emergency public information systems. The WDH Crisis and Emergency Risk Communication Plan (CERC) has been re-written and submitted for final approval. This was a cooperative effort of the agency Public Information Officer (PIO) and the PHEP Unit.

Notifications and Health Alert Network

PHEP has the responsibility of notifying public health partners and stakeholders of actual and potential events (manmade and natural) which could affect the

health of Wyoming residents. This is accomplished through the Wyoming Health Alert Network (WyHAN), a role-based notification system that allows access and permissions to be set regardless of the individual in that role. Notifications can now be sent via email, cell phone, pager, landline, and SMS text messaging. A role can have one or more people and a person can be in more than one role.

PHEP maintains a secure web portal for access to the Wyoming Alert and Response Network (WARN). The WyHAN is the alerting component of WARN. Alerts are posted on the website as well as other emergency information. When a public health alert is initiated, the target recipients are identified. This can be a statewide alert to all recipients, a region, a county, a specific role, or an individual. The recipient will receive the alert on the devices listed in a self-maintained profile. WyHAN users set up their own contact information and are responsible for keeping it updated. Security requirements include changing passwords on a regular basis. Acknowledging receipt of an alert is required. Acknowledging the alert indicates to the sender that the recipient has received the alert and can/will take the requested action. Alerts that are not acknowledged may require the alert to be resent or some other follow-up action. Other agencies needing to send notifications/alerts to specific individuals or groups are beginning to utilize the communications capabilities of WyHAN. In Wyoming, the Division of Criminal Investigation, within the Attorney General's Office, uses WyHAN to send out Amber Alerts statewide to law enforcement agencies and news outlets.

PHEP maintains a Communications Binder which documents communication resources utilized by WDH for information and warning. This binder ensures our staff has information on communication resources available, how to access them, and their intended use.

During the budget period, the Wyoming Health Alert Network (WyHAN) system was utilized to send 233 alerts and notifications. This includes weekly test notifications, exercise and drill notifications, and real-world events notifications. The Health Communications Coordinator obtained current lists of physicians, radio and newspaper media, and updated contact information in WyHAN. This ensures PHEP has the most recent contact information for our public health partners. During the statewide *Prairie Eagle* exercise, a Health Alert was sent via WyHAN and was used to inform participants of the exercise. Health Alerts were used throughout the exercise to provide updates and coordinate conference calls. The radios in the EOCC monitored the WDH WyoLink talk group and the WDH analog repeater frequency.

During this budget period, PHEP began the process for narrow banding our radios. This task is to be completed by December 31, 2012 to comply with Federal Communications Commission (FCC) regulations. Public health radios are being collected in stages to be narrow banded. Collecting in stages

maintains the ability for emergency communications during this process. PHEP also provided information for narrow banding to Public Health Response Coordinators (PHRCs) to start the process for the public health radios in their respective counties.

PHEP funded installation of two-way radios at Receive, Stage and Store (RSS) warehouse and Public Health Laboratory to provide redundant communications from our Emergency Operations Coordination Center (EOCC). Twice monthly statewide Public Health WyoLink radio tests were conducted between WDH and the county PHRCs. This tests the statewide WyoLink communications system and maintains user proficiency with radios.

PHEP maintains services for WDH Emergency Notification Line for physicians and healthcare providers. The Emergency Notification Line is staffed by WDH personnel 24/7 for reporting public health emergencies, public health hazards, and immediately notifiable conditions. The Emergency Preparedness Epidemiologist analyzes the data and prepares an annual summary report of activities associated with this line.

INFORMATION SHARING

StarLIMS (our public health laboratory information system) securely sends Electronic Laboratory Reporting (ELR) messages to our National Electronic Disease Surveillance System (NEDSS) system. This ensures complete and accurate results are provided to the epidemiologists as soon as possible.

Virtual Situational Awareness Tool (VSAT) is used during an event or exercise to share information within WDH. Key WDH personnel have access to the system to ensure a common operating picture of events or incidents. Emergency operations coordination personnel within PHEP have been identified to provide ESF#8 coordination in the State Operation Center.

MEDICAL COUNTERMEASURE DISPENSING AND MEDICAL MATERIEL MANAGEMENT AND DISTRIBUTION

Strategic National Stockpile

The State of Wyoming received a 99% preparedness rating for SNS from the Centers for Disease Control and Prevention (CDC) in April 2012. Cities Readiness Initiative (CRI) SNS scores for the 2011-2012 year were: Laramie County 81% (13% increase from the previous year) and Natrona County 83% (29% increase from the previous year).



In 2011-2012 CDC began using a 'Composite Score as a collective indicator of preparedness and operational capability of states and CRI jurisdictions'. The score is derived from results of the state and CRI strategic national stockpile annual Technical Assistance Reviews (reviews and scores 12 [CRI] and 13 [state] sections of preparedness with a total of 90 planning elements), drill submissions, full scale exercise and compliance with programmatic standards.

The State of Wyoming received a score of 94.4% for 2012.

PHEP, in cooperation with numerous partner agencies, validated the capability of Wyoming's alternate Receive, Stage and Store (RSS) facility through a series of drills, site updates and preparation and purchase of additional material handling equipment.

PHEP provided training for county Public Health Response Coordinators (PHRC) in the use of the Inventory Management System (IMS). The IMS was utilized during the *Prairie Eagle* exercise conducted in May 2012. Currently the PHEP Unit is reviewing several inventory management applications to increase effectiveness and efficiency for tracking SNS inventory.

The WDH participated in a four day full-scale medical countermeasures (MCM) dispensing exercise, *Prairie Eagle*, in order to demonstrate the State's ability to distribute MCM from the SNS to county and tribal health agencies.

In 2011, PHEP began evaluating county health agencies on their SNS planning efforts and progress utilizing the same Technical Assistance Review (TAR) process and tools as the CDC utilizes in evaluating preparedness in designated Cities Readiness Initiative (CRI) locations nationwide (Natrona and Laramie Counties are designated as CRI). Again in 2012, 22 county health agencies' SNS plans were evaluated. Seven of these county reviews were actually conducted as site visit reviews involving partner agencies as well. These site visits were proven to be an invaluable learning tool for public health, both at the state and county level, as well as for local law enforcement, hospitals, county health officers, nurse managers and local emergency managers.

Following are summary scores for the 22 counties reviewed under the TAR during this budget year and last year:

Overall County SNS Average Score 2011: 54.9%

Overall County SNS Average Score 2012: 74.9%

Also, in 2012 PHEP developed a new SNS template for counties to use when developing their SNS Plans. The new template will assist counties in maintaining

their plan in the future and will also provide consistency in planning across the state. Four (4) regional workshops were conducted across the state on the SNS template with county and tribal health agencies. All of the county and tribal health agencies will be switched over to the new plan by March 2013.

Prairie Eagle Full Scale Exercise

On Friday May 11, 2012 over 100 participants across Wyoming received notification of a simulated biological event throughout the state, officially kicking off *Prairie Eagle*, a state wide medical supplies distribution full scale exercise. Federal, state, local, tribal, nongovernmental and private sector partners participated in the exercise.



The over arching objectives of *Prairie Eagle* were to test the capabilities of the Receiving Staging and Storage site (RSS), the distribution of medical supplies, and dispensing of medical countermeasures statewide within 48 hours from the time of request. The CDC guarantees delivery of SNS materials to the state within 12 hours. After arrival at the state's primary RSS site, transports were loaded and on their way to Intermediate Distribution Sites (IDS) around the state in under three hours. Under this exercise scenario, the need to rapidly transport materials across the state to Teton County required that the Wyoming National Guard conduct an airlift of medical supplies and countermeasures to Teton County. This airlift utilized a C-130 aircraft from the Wyoming Air National Guard and provided Wyoming SNS planners the opportunity to exercise this portion of the SNS plan and significantly reduced the time to get material to Teton County from an average of 7 hours to approximately 1 ½ hours delivery time.

During the four day *Prairie Eagle* full scale exercise WDH, 19 counties and other partners successfully demonstrated the capability to fully execute the medical countermeasures distribution and dispensing plan. The



The participants of the *Prairie Eagle* full scale exercise met all of their exercise objectives, identified many planning and resource strengths, and took away from the exercise a great deal of information for improving plans, communications and lessons learned.

PHEP continued working with the UW Pharmacy and Nursing programs, in collaboration with Albany County Public Health, to educate program students

about the Strategic National Stockpile, Public Health Emergency Preparedness and the basics of incident command systems. Students and faculty were utilized during local mass dispensing exercises.

CHEMPACK

The PHEP Unit conducted four CHEMPACK Nerve Agent trainings for first responders, public health, hospitals and regional response teams when requested.

PUBLIC HEALTH LABORATORY TESTING

The testing capabilities of the Bioterrorism Response Laboratory (BRL) within the Laboratory Response Network (LRN) for this timeframe include working in conjunction with Wyoming's Sentinel Laboratories across the state to continue proficiency in ruling out or referring suspicious select agent organisms to the BRL in a timely and safe fashion.

The BRL continues to work within the guidance of the LRN through continuance of equipment maintenance, use of LRN reagents and protocols and ensuring appropriate levels of reagents and supplies to ensure the BRL is prepared to respond to natural or intentional hazardous events.

In July, 2012, the Wyoming BRL successfully passed the mandated select agent laboratory inspection. Inspection was conducted in compliance with the 42CFR, part 73.1 by the Centers for Disease Control and Prevention (CDC). In preparation for inspection, all protocols were updated for the new laboratory facility and all appropriate staff trained on the updates. During the inspection the BRL staff had the opportunity to meet with Bruce Newton from the CDC. Mr. Newton, our technical advisor, toured our new facility and held a discussion with the staff, offering advice and guidance as our advisor.

The BRL offered just-in-time training to the public health laboratory in regards to receiving shipments for the lab. A training course was developed based on guidelines set forth by the CDC and the United States Postal Service and was presented to staff most likely to receive and distribute packages. The Suspicious Packaging training reached 11 laboratorians.

The BRL continues to test the StarLIMS system (Lab Information System).

Protocols were written to address emergency communication, sentinel laboratory certification in the Wyoming LRN, shipping exercises and maintenance of the sentinel laboratory database.

A Continuity of Operations Plan (COOP) has been written to include the BRL and the WY Public Health Laboratory (WPHL) Microbiology section. Presently,

meetings are being held to incorporate the Chemical Testing section into the COOP for the WPHL. Protocols have been written to identify and address communication with laboratory networks within the jurisdiction.

The statewide courier service to all 23 counties is supported by PHEP, offering transport of samples to the WPHL with 24/7 emergency service available.

Testing of hospital laboratories' abilities to ship specimens during nights, weekends, and holidays is conducted in conjunction with the College of American Pathologists-Laboratory Preparedness Exercise (CAP-LPX) twice a year. At this time it is a voluntary exercise, with the expectation of 2 laboratories per exercise participating. During this time period one laboratory in Johnson County participated. It is our intent to continue testing the sentinel laboratories across the state until all have had the chance to test their shipping infectious substances skills.

The BRL continues to work with the sentinel laboratories in the state. In August of 2011, Transportation of Infectious Substances mandatory training was held in Cheyenne for 21 attendees from 13 Wyoming facilities. Clinical Laboratory Standards Institute (CLSI) documents, specifically the M100-S22, Antimicrobial Susceptibility Testing Guidelines were distributed to all clinical sentinel laboratories in the state; also supplying the new M02 (disk diffusion susceptibility) and M07 (microtiter) updates as needed by the laboratories. The CAP-LPX was also distributed to the sentinel laboratories to focus on the Select Agent Program, with emphasis of the ability to rule out or refer organisms of bioterrorism (or select agents). Thirty-three of thirty-six laboratories participate, including the State Veterinary Laboratory in Laramie, Wyoming.

Starting early in the spring of 2012, Clinical Sentinel Laboratory site visits took place, with visits to all clinical laboratories in the state. Thirty-five facilities were visited reaching 114 laboratorians. New standard operating procedures were rolled out outlining emergency communications (Wyoming Alert and Response Network), shipping exercises, maintenance of the Clinical Sentinel Laboratory Database, and Clinical Sentinel Laboratory Wyoming LRN certification with discussions focusing on biosafety. Continuing Education Credit was issued to all participants.

Analysis of the performance of the laboratories during the site visits resulted in 32 laboratories demonstrating performance at the Advanced Certification level, two laboratories perform at the Basic Certification level and one laboratory does no microbiology in their facility.

Sentinel Laboratory (Advanced or Basic) Certificates were distributed to all laboratories with Basic Select Agent Flow Chart & Evaluation (B-SAFE) Bench Cards given for reference in their microbiology departments.

The first emergency communication test was conducted in July of 2012, with a 37% participation of the laboratories in the state.

BRL Participation in mandatory LRN Exercises

In the 2011-2012 budget year, the BRL participated in mandatory exercises, which demonstrate to the CDC that the staff at this facility is proficient in their laboratory policies and procedures. During this period, WY BRL tested the multi-agent panel, Ricin, and Burkholderia species and passed all proficiency test exercises, proving our capability to test within the National Laboratory Network. This is an ongoing process, which allows the BRL to maintain skills and knowledge needed for being part of the emergency response in regards to laboratory testing.

The BRL also participates in many different exercises, such as the state wide exercise in May of 2012, *Prairie Eagle*. Other exercises the BRL participated in were the United States Postal Service Bio-detection System and Uinta County Public Health/Evanston Regional Hospital Laboratory in August 2012.

PUBLIC HEALTH SURVEILLANCE AND EPIDEMIOLOGICAL INVESTIGATION

The Emergency Preparedness Epidemiologist works closely with the Infectious Disease Epidemiology Unit (IDEU) and is responsible for investigations of bioterrorism agents (Anthrax, Plague, Tularemia, Brucellosis and Q fever), many of which are endemic in Wyoming. The Emergency Preparedness Epidemiologist assists with outbreak investigations, pandemic influenza response, environmental hazard investigations, natural disaster response, fieldwork for investigation purposes and suspicious powder response in coordination with the Wyoming Public Health Laboratory (WPHL). PHEP epidemiology also maintains surveillance systems including the National Electronic Disease Surveillance System (NEDSS), the syndromic surveillance system EpiCenter and Nebraska Regional Poison Control.

Investigations of Note

On March 1, 2012, the Wyoming Department of Health (WDH) was notified by Natrona County public health officials that a local nephrologist had informed them of three persons recently admitted to Wyoming Medical Center (WMC) in Casper with renal failure who also reported recent use of synthetic cannabis (also known as spice or K2). Local law enforcement had also been notified and on March 1 the law enforcement agency released an advisory through the media warning about illness associated with spice. As acute renal failure is not a described adverse event from spice use, the WDH initiated a public health investigation into these illness reports. IDEP and PHEP epidemiologists worked

cooperatively with the Natrona County Health Department and local and state law enforcement agencies.

Exercise and Planning

In 2012, PHEP epidemiology worked with county and state partners in developing exercise scenarios regarding radiological and biological response. PHEP Epidemiology also reviewed and updated the Standard Operating Guidelines for the WDH Epidemiology Response Center (ERC). The ERC provides a central working location, meeting place and call center for WDH Epidemiologists responsible for surveillance and epidemiological response to major disasters to include infectious diseases and bioterrorism; chemical emergencies; radiological emergencies; environmental health emergencies; natural disasters and severe weather. In July 2012, PHEP Epidemiology developed and distributed the 24/7 WDH Emergency Notification Line Handbook to all WDH on-call staff. The 24/7 WDH Emergency Notification Line was established for agency and interagency response partners and Wyoming citizens to contact the WDH in a public health emergency. The hotline is staffed on a rotating basis by the Public Health Emergency Preparedness Unit and Infectious Disease Epidemiology Unit (ID Epi) epidemiologists who take week long 24/7 shifts. The purpose of the handbook is to provide basic guidelines on how to respond to Emergency Notification Line calls.

2012 Wildfire Season

The 2012 wildfire season proved to be a busy time in Wyoming. PHEP epidemiology worked with the WDH staff including the Public Information Officer, State Epidemiologist, and other PHEP staff to review and update the wildfire fact sheet, Health Threats from Wildfire Smoke. The purpose of this document is to provide information on health affects and warning signs of smoke exposure and ways to limit exposure. PHEP Epidemiology also worked with county and state partners, along with Wyoming 2-1-1, to develop a Wildfire Resource Guide. This guide aims to provide relevant information to citizens who are affected by wildfires. In the event of a wildfire, 2-1-1 has the ability to populate this document with situational updates regarding the particular fire, immediate resources, health considerations, insurance, legal services, document replacement and considerations for returning home and cleanup after an evacuation.

Presentations

In July 2012, PHEP Epidemiology worked with Dr. Kerry Pride, Epidemic Intelligence Service Officer with the Centers for Disease Control and Prevention, to develop GIS maps for a study Dr. Pride was presenting entitled “Assessment of Vaccine Exemptions among Wyoming School Children, 2009 and 2011.” The maps were created to show the percent change between 2009 and 2011 of children with vaccine exemptions by county.

RESPONDER SAFETY AND HEALTH

Our public health safety coordinator position was vacant for nearly seven months of the budget period. Responder safety and health risks identified and addressed include the distribution of masks to epidemiologists who were investigating a hanta virus case. The WDH Epi Go Bag inventory was completed and expired or consumed supplies were replenished. An inventory of Personal Protective Equipment (PPE) materials was reviewed and replenished. This PPE (Level D basic safety equipment such as gowns, coveralls, gloves, safety glasses, escape mask, N95 or surgical masks) is stockpiled for use by public health responders participating in a clinical scenario.

VOLUNTEER MANAGEMENT

Coordination with Hospital Preparedness Program (HPP) ESAR-VHP - WYeROLL

The Wyoming Volunteer Registry, “WYeROLL—Wyoming Enrollment, Response, Operations, Logistics, Let’s Enroll”, system provides a statewide web-based volunteer registry system for medical and non-medical volunteers. This system is a work in progress as volunteer groups and individuals register on the system on a daily basis. Our intent is to register, notify and inform individuals who are interested in volunteering their time and skills in the event of a public health or medical emergency.

In the past year we have continued a strong marketing campaign to recruit volunteers and agencies to join the WYeROLL system. During the budget year we raised our volunteer numbers from 372 to over 900 volunteers! We have partnered with the American Red Cross, Volunteer Organizations Active in Disasters (VOAD) and the Medical Reserve Corps (MRC) to use WYeROLL as their volunteer management system. We have utilized various media outlets to promote to all Wyoming communities. We have placed information about WYeROLL in the Wyoming Nurse Magazine, cinema, newspapers, radio and have

attended conferences to promote and recruit various medical and non-medical volunteers. ESAR-VHP volunteers also participate in state and local exercises and drills. Through our continuous efforts to help Wyoming prepare we have seen an increase of volunteer activity. For more information about WYeROLL please visit <http://www.wyeroll.org> or for ESAR-VHP please visit <http://www.phe.gov/esarvhp>.

Medical Reserve Corps (MRC)

The mission of the MRC is to engage volunteers to strengthen public health, emergency response and community resiliency. MRC units are community-based and function as a way to locally organize and utilize volunteers who want to donate their time and expertise to prepare for and respond to emergencies and promote healthy living throughout the year. MRC volunteers supplement existing emergency and public health resources. MRC volunteers include medical and public health professionals such as physicians, nurses, pharmacists, dentists, veterinarians and epidemiologists. Many community members—interpreters, chaplains, office workers, legal advisors, and others—can fill key support positions.

Wyoming has been promoting the Medical Reserve Corps to counties around the State. We currently have five (5) active MRC Units in Northwestern Wyoming, Cheyenne, Sweetwater County, Natrona County, and Albany County. We are working hard to create a presence in Wyoming for Medical Reserve Corps as these units would help Wyoming communities in various ways. Locally, MRC units have recruited from events such as fires, floods, exercises and drills and other community outreach. The MRC units are registered in WYeROLL and utilize the registry for volunteer management. For more information visit <http://www.medicalreservecorps.gov>.

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