

## Use of EMAC for Public Health & Medical Emergency Response



2005 Hurricane Season

## Presentation Objectives

- Discuss how public health and medical can use EMAC
- Discuss benefits and challenges of using EMAC
- Highlight other mutual-aid agreements

## Total Estimated EMAC Responses 2004 Hurricanes (Florida & Alabama)

- 787 civilian personnel deployed\*
  - Military support #s not captured
  - 331 Health/Medical/Nurses
- \$15 million estimated cost

## Total Estimated EMAC Responses to Hurricanes Katrina and Rita

(FL, LA, MS, AL, TX, NCT, RCT)

- 65,929 personnel deployed\*
  - 19,426 Civilian
  - 46,503 National Guard
  - 2,075 Health/Medical/EMT
- \$830 million estimated cost\*

## Newborn Screenings: An Iowa-Louisiana Story

- Louisiana Public Health Laboratory incapacitated following Hurricane Katrina



## Newborn Screenings: An Iowa-Louisiana Story

- Loss of telecommunications, H<sub>2</sub>O, and electricity (both main lab in New Orleans and regional lab in Amite)
- Forced evacuation of 90% of staff



### Newborn Screenings: An Iowa-Louisiana Story



- EMAC REQ-A issued for newborn screening assistance
- Resulted in agreement with Iowa to screen LA newborn specimens
- Over 51,000 tests (9/05 – 5/06)
- 304 presumptive positive
- Testing still ongoing

### Newborn Screenings: An Iowa-Louisiana Story



- There were challenges to making this happen!

### Mobile Field Hospital Waveland, Mississippi



- Hancock Memorial Hospital inoperable following Hurricane Katrina
- Approximately 7,000 people in Waveland and surrounding area

### Mobile Field Hospital Waveland, Mississippi



- Mobile field hospital deployed from NC to Waveland via EMAC

### Mobile Field Hospital Waveland, Mississippi

- Staffed by two rotations of 65 to 70 nurses, physicians, paramedics, pharmacists, logisticians, and command staff



### Mobile Field Hospital Waveland, Mississippi

- Staff injury/illness during first week of operation
  - Gastrointestinal (11 cases)
  - Heat exhaustion (several cases)
  - “Katrina Rash” (numerous cases)
  - Fall-related head injury (1 case)



### Mobile Field Hospital Waveland, Mississippi

- NC Public Health Strike Team deployed to support mobile field hospital staff
  - Physician/epidemiologist
  - Nurse/epidemiologist
  - 2 industrial hygienists/EH specialists
  - 2 admin/data management staff
  - Team leader



### Mobile Field Hospital Waveland, Mississippi

- Primary objectives were to:
  - Establish electronic surveillance & injury/illness reporting systems
  - Investigate & mitigate environmental hazards/risks



### Environmental Health: Another Iowa-Louisiana Story

- Following Hurricane Katrina, 6 EHRT members sent from IA to LA
- First state to send EH professionals to LA via EMAC



### What Did They Do?

Provided assistance to various agencies in and around New Orleans!

Food Safety Inspections      Sanitation      Damage Assessment Surveys



### What Did They Do?

Water Quality Testing      Sewage      Shelters



...and a whole lot more!

### Benefits of Using EMAC

- Increased collaboration among states in planning, preparedness, and response
- Better awareness and understanding of state and local needs and interests
- Increased access to personnel, equipment, and resources
- Addresses legal issues related to worker's compensation, reimbursement, liability, immunity, and credentialing/licensure

## Key Issues & Challenges

- Education, awareness, and training on EMAC for public health and medical
- Resource typing/categorization
- Credentialing/licensure/privileging
- Redundancy/duplication of resources, assets, and efforts between EMAC, other mutual aid agreements, and federal response system

## Key Issues & Challenges

- Clarity/specificity in requests for assistance and mission assignments
- Deployment under state authority – depletion of local resources and assets

## Other Mutual-Aid Agreements

- Mid-America Alliance – PH Preparedness (CO, IA, KS, MO, MT, NE, ND, SD, UT & WY)
- [www.unmc.edu/dept/midamerica](http://www.unmc.edu/dept/midamerica)
- Great Lakes Border Health Initiative (MI, MN, NY, WI & Ontario)  
[www.michigan.gov/borderhealth](http://www.michigan.gov/borderhealth)
- Pacific Northwest Emergency Management Arrangement (AK, ID, OR, WA, BC & Yukon)

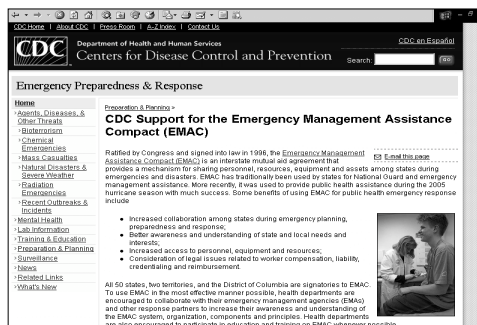
## Other Mutual-Aid Agreements

- International Emergency Management Assistance Memorandum of Understanding (ME, NH, VT, MA, RI, CT, Quebec, New Brunswick, Prince Edward Island, Nova Scotia & Newfoundland)
- Other interstate mutual-aid agreements (bilateral, trilateral, multilateral, regional)

## Other Mutual-Aid Agreements

- Intrastate mutual-aid agreements (city-to-city, county-to-county, regional, etc.)
- Other (cross-border, international, etc.)

## For more information... [www.bt.cdc.gov/planning/emac](http://www.bt.cdc.gov/planning/emac)



The screenshot shows a web browser window displaying the CDC website. The page title is "CDC Support for the Emergency Management Assistance Compact (EMAC)". The content includes a navigation menu on the left with categories like "Agents, Diseases, & Other Threats", "Biodefense", "Chemical Emergencies", "Hazardous Materials", "Infectious Diseases", "Medical Health", "Lab Information", "Training & Education", "Preparedness & Response", "Surveillance", "News", and "Related Links". The main content area features a heading "CDC Support for the Emergency Management Assistance Compact (EMAC)" and a paragraph explaining that EMAC is an interstate mutual aid agreement that provides a mechanism for sharing personnel, resources, equipment and assets among states during emergencies and disasters. It also lists several benefits of using EMAC, such as increased collaboration among states, better awareness of state and local needs, and increased access to personnel and resources. A small image of two people is visible on the right side of the page.

## **Upcoming Programs**

**Preventing Falls at Home**  
February 6, 2008  
Wednesday, 2:00 - 4:00 p.m.

**Understanding Youth Culture:  
Substances of Abuse**  
February 12, 2008  
Tuesday, 1:00 - 3:00 p.m.

**A Guide to Working with Recent Latino  
Immigrant Patients:  
Sowing the Seeds of Health**  
February 20, 2008  
Wednesday, 1:00 - 2:30 p.m.