Kansas CHEMPACK Program
Kansas Department of Health and Environment
Bureau of Public Health Preparedness

Kansas CHEMPACK Program

REVISION DATE	SIGNATURE	REVISION NUMBER	REVISION DATE	SIGNATURE	REVISION NUMBER
08/04/2010	Gilbert Tabares	2			

The CHEMPACK Program
Scenarios that may activate this ESF include terrorist use of chemical weapons and accidental chemical releases including agricultural chemicals. As Kansas is a predominately agricultural state, there are a large amount of organophosphate chemicals routinely available. These chemicals may be accidentally released during transportation or storage or may be intentionally released by criminal action.

Terrorist organizations may have access to many different types of chemical agents to use in WMD attacks. The likely choice may be nerve agents or other organophosphates. Depending on the dose, nerve agents or organophosphates can cause immediate nervous system failure and death. Nerve agent and organophosphate antidotes include:

- Atropine sulfate, which blocks the effects of excess acetylcholine at its site of action;
- Pralidoxime chloride (2PAM), which reactivates acetyl cholinesterase, and therefore reduces the levels of acetylcholine; and
- Diazepam, which reduces the severity of acetylcholine-induced convulsions that can contribute to death or long-term neurological effects in survivors.

The Division of Strategic National Stockpile (DSNS) Program has numerous caches of medical equipment, pharmaceuticals and vaccines in strategic locations throughout the United States, including the medicines described above. Under its mandate, the DSNS Program has a maximum 12-hour response time. However, this response time is inadequate for an organophosphate or nerve agent incident, where treatment must be accomplished quickly in order to save as many lives as possible.

To minimize this response time, the Centers for Disease Control and Prevention (CDC) has established a voluntary participation project known as CHEMPACK for the "forward" placement of sustainable repositories of nerve agent and organophosphate antidotes in numerous locations throughout the United States, so that they can be immediately accessible for the treatment of affected persons. Under this project, the DSNS Program will:

- Maintain ownership of the CHEMPACK stockpile;

- In conjunction with state and local officials, place the antidotes in numerous strategically placed containers under environmentally controlled and security monitored storage conditions for use in the event of an emergency involving nerve agents;
- Implement strategies to maximize the shelf life of the antidotes to minimize re-procurement costs and maintain quality, specifically through the Federal Drug Administration's (FDA) Shelf Life Extension Program (SLEP).

This approach allows the DSNS Program to maintain accountability and the centralized control of the caches to fulfill the criteria for the SLEP program while making the caches immediately available to state and local authorities in case of an actual large-scale event involving organophosphates or nerve agent incidents. To meet the objectives of CHEMPACK deployment, states (i.e., CDC 62 BT Project recipients) and the DSNS Program incur specific responsibilities. These responsibilities are detailed below.

Purpose

This attachment supports the Kansas Response Plan (KRP) Emergency Support Function #10 – Oil and Hazardous Materials Response (ESF #10). ESF #10 provides for a coordinated response to actual or potential oil and hazardous material incidents. This includes the appropriate response and recovery actions to exercise, prepare for, prevent, minimize, or mitigate a threat to public health, welfare, or the environment caused by oil or hazardous materials. Hazardous materials include chemical, biological, and radiological substances, whether accidentally or intentionally released. These include certain chemical, biological, and radiological substances considered Weapons of Mass Destruction (WMD).

Policy

Designated local medical officials at the cache sites have immediate access to antidotes included in the CHEMPACK containers in the event of a chemical emergency. They are not required to request permission to use these antidotes from state or federal officials. State authorities at the SEOC can redeploy these assets to any location within the state when deemed appropriate.

Concept of Operations

A. Local Response.

1. Facilities participating in the CHEMPACK program have Memoranda of Agreement (MOA) that outlines their responsibilities with the Kansas Department of Health and Environment (KDHE) Bureau of Public Health Preparedness (BPHP). A copy of the CHEMPACK State and Local Site MOA can be located at the KDHE BPHP office.
2. Each cache site has designated a Point of Contact (POC) position and Alternate POC position for CHEMPACK and provided contact numbers for normal and after hours to the BPHP CHEMPACK Coordinator and local Emergency Management Office.

3. Each cache site has identified a registered pharmacist, a licensed medical professional, or facility with a Drug Enforcement Agency (DEA) registration that signed for custody of the controlled substances and other pharmaceuticals in the CHEMPACK containers.
4. Each cache site is required to have a plan for CHEMPACK deployment, surveillance and maintenance operations that may be an annex to local emergency operations plans. Plans address asset placement; distribution; coverage areas; procedures for control, authorization and use of CHEMPACK assets; and access coordination procedures including how material could be shared with health care facilities or first responders through use of an MOA or Mutual Aid Agreement.
5. The BPHP CHEMPACK Coordinator has responsibility for managing the implementation of the CHEMPACK program, managing day-to-day operation, and monitoring quality assurance.
6. CHEMPACK containers may be opened at the discretion of the emergency department physicians at the host hospital. First responders and partnering hospitals of a CHEMPACK cache site may request organophosphate/nerve agent antidotes through mutual aid agreements and local and state emergency management. First responders, hospital emergency departments, and voluntary organizations (i.e., Disaster Medical Assistance Team, etc.) will initially use existing supplies of organophosphate/nerve agent antidotes before opening CHEMPACK containers unless the responder agency anticipates exhausting their existing cache of these agents, at which time CHEMPACK containers may be opened.
7. Local authorities will call the BPHP CHEMPACK Coordinator as soon as possible once the decision to open a container has been determined. The BPHP CHEMPACK Coordinator will notify the DSNS Coordinator within one hour of an authorized emergency deployment.

B. State Response.

1. The State Emergency Operation Center (SEOC) Policy Group and SEOC Team will be activated to Level 3 following a disaster or emergency requiring deployment of CHEMPACK, as the assistance of several State agencies is likely to be required. All emergency support function agencies are notified; however, the SEOC is activated and staffed only with Emergency Management personnel and essential State agencies.
2. The BPHP CHEMPACK Coordinator may coordinate with the SEOC Manager for transport and disposal of used CHEMPACK materiel in keeping with state and federal laws.
3. The CHEMPACK may be pre-deployed for high-risk special events. At the discretion of the BPHP CHEMPACK Coordinator, in cooperation with the CDC and local storage cache sites, CHEMPACK containers may be temporarily transferred to a location closer to an event in which the risk of chemical agent exposure to the public is increased. The SEOC is activated to Level 2. The transport vehicle or temporary location will meet all storage requirements for maintaining climate control. Appropriate security will be provided to prevent

tampering with the containers during transit and while temporarily stored away from the containers primary location. At the conclusion of the special event all unopened containers and their unused contents will be returned to their host sites. Empty containers are to be returned to the DSNS CHEMPACK Program per CDC instructions.

4. The SEOC Team is organized in accordance with the SEOC Policy Group in the Kansas Response Plan. It is consistent with and is compatible to the National Incident Management System (NIMS) and the Incident Command System (ICS) will be in place. The SEOC will be brought to Activation Level 3 when a chemical disaster or emergency will require large-scale state and possibly federal assistance in recovery. The SEOC is fully activated with 24-hour staffing from all appropriate SEOC Team members decided by the SEOC Policy Group.

C. Detailed Operation Procedures

1. Detailed Standard Operating Procedures (SOPs) for CHEMPACK will be maintained by BPHP. The SOPs will delineate specific activities related to CHEMPACK.

Administration and Logistics

Quality Control

KDHE BPHP and DSNS shall require each cache storage location to designate:

1. One "Plain Old Telephone System" (POTS) phone line per container,
2. One dedicated 120V AC, 60 Hz outlet with surge protection and facility emergency generator or Uninterruptible Power Supply (UPS) per container,
3. A controlled access system that meets the DEA requirements,
4. A security or surveillance system that is monitored 24-hours a day by Security or Pharmacy personnel, and
5. Personnel to respond within 15 minutes of a security alarm.

The Sensaphone included with each container shall monitor environmental and security conditions of the CHEMPACK container. It shall be the responsibility of the cache storage location to ensure that electrical and communication requirements of the Sensaphone are maintained.

KDHE BPHP shall ensure cache storage locations apply resources and assets to correct non-complying environmental and security conditions in a timely manner (usually within two hours). When conditions cannot be corrected within 12 hours, the BPHP CHEMPACK Coordinator will coordinate with the DSNS Program point of contact for movement of the CHEMPACK container(s) to an acceptable location to protect the quality or security of the material.

Logistical Support

Funding for the initial CHEMPACK installation and sustaining cost can be defrayed by a variety of funding sources including local, state, and other federal such as Department of Homeland Security (DHS), Department of Justice (DOJ), Metropolitan Medical

Response System (MMRS) and private funds. Funding through the CDC Cooperative Agreement for Public Health Preparedness and Response for Terrorism may be used to support the costs associated with receiving and managing CHEMPACK materiel.
The Health and Resources and Services Administration (HRSA) and the U.S. Department of Health and Human Services (HHS) has joined with the DSNS Program CHEMPACK Project to support cache build-out. HHS funds earmarked for Medications and Medical supplies may be used to offset reasonable cost associated with the retrofit of CHEMPACK cache storage facilities to meet FDA/SLEP requirements. Questions related the use of these funds should be directed to the BPHP Program Director. The state will not be responsible for any costs related to the CHEMPACK containers or chemical antidotes, or transportation cost for initial instillation. The DSNS Program will allocate to states, based upon their population, CHEMPACK containers.

Emergency Resources
The Kansas Division of Emergency Management (KDEM), under the Adjutant General's Department, has statutory responsibility for obtaining the resources necessary to respond to disasters in the state of Kansas. Emergency resources related to the movement of CHEMPACK assets will be coordinated through the KDEM and the SEOC.

Communications
Communication infrastructure must be present for adequate and timely notification of critical personnel including SEOC personnel assets. Kansas has made a significant investment in improving the communications interoperability and infrastructure in the state (see ESF 2 – Communications). This investment directly affects the ability of public health and medical providers to communicate in the event of a catastrophic disaster. Most scenarios involving organophosphate and nerve agents do not involve loss of power or the degradation of the communications infrastructure, but it is important that we consider these contingencies in our planning.

- Types of communications used will be telephones, radios, satellite phones, alpha-pagers, the Health Alert Network, Web EOC, and HF Radio (SEOC).
- KDHE personnel have access to 800 MHz radios that can be used to communicate statewide.
- The Kansas Department of Transportation has staffed and equipped two Communications on Wheels systems that can be moved to a site where the communication infrastructure is compromised.

Training and Exercises
The purpose of training is to make sure that individuals are competent at their jobs, that they understand how to work with others in their functional group, and that functional groups understand how to work together. Training to maintain and activate the CHEMPACK will be an ongoing activity. The BPHP CHEMPACK Coordinator is responsible for ensuring that training and exercises are conducted and evaluated for effectiveness and that all training activities are coordinated with other activities. BPHP also employs a Training and Exercise Coordinator who works closely with the BPHP

CHEMPACK Coordinator to ensure exercises are developed and evaluated in a way that encourages process improvement at the state and local levels.

Training Objectives

- Understand CHEMPACK – its mission, contents, and methods of operation;
- Appreciate the different scenarios that would justify the need for the CHEMPACK and understand the way that the plan anticipates operation and notification;
- Provide staff the knowledge and skills they need to perform CHEMPACK tasks effectively.

The KDHE BPHP manages a three-year exercise and training strategy that is coordinated with other homeland security partners and programs.

CHEMPACK Placement

The BPHP has coordinated the installation of 13 CHEMPACK containers in strategic locations throughout Kansas. Fielding of the containers occurred in October of 2007.

CHEMPACK Coverage Area

Utilizing a coverage radius of 100 miles for each CHEMPACK cache location, KDHE BPHP has calculated that 98.4 percent of the state's population can be serviced with Kansas CHEMPACK. The BPHP will contact neighboring states to ascertain if their CHEMPACK assets may be brought to bear to provide coverage for these areas. BPHP will also notify appropriate neighboring states of any Kansas CHEMPACK coverage of their state.