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www.kdheks.gov

As the state's environmental protection and public health agency, KDHE promotes responsible choices to protect the health and environment for all Kansans.

Through education, direct services and the assessment of data and trends, coupled with policy development and enforcement, KDHE will improve health and quality of life. We prevent illness, injuries and foster a safe and sustainable environment for the people of Kansas.

KS Preparedness Times

KDHE Helps Lead Response to 2009 H1N1 Influenza A Virus Outbreak

By: Mike Heideman, Communications and Training Specialist

On Saturday, April 25, the Kansas Department of Health and Environment (KDHE) announced that two cases of H1N1 flu had been confirmed involving two adults residing in the same household in Dickinson County. One of the patients had recently traveled to Mexico. Both persons had become ill with the same unique strain of flu that at the time had been identified only in Mexico, California and Texas.



The Department Operations Center on the third floor of the Curtis Building in Topeka has proven to be an indispensable resource for KDHE to coordinate the state-level response to the H1N1 outbreak.

So began the agency's response to H1N1, which everyone expects to be ongoing at least until the fall of this year when the frequency and severity of cases could increase.

The Response to H1N1

The earliest hours of the response involved a remarkable chain of events. The KDHE Office of Surveillance and Epidemiology had received a report of flu-like illness from Dickinson County on the afternoon of Friday, April 24. Respiratory specimens were collected from the two initial patients and were received by KDHE on Friday evening. At about 2 a.m. on Saturday, the Kansas Health and Environmental Laboratories reported preliminary results that

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A Minute with Mindee

By Mindee Reece, CPHP Director



I think I speak for everyone in the health preparedness community when I say that the past couple of months have been truly remarkable and significantly challenging.

I've been most impressed by the Kansas response to the outbreak of the 2009 H1N1 influenza A virus that began suddenly in late April. Health professionals at local health departments, hospitals, doctors' offices, clinics and laboratories across the state pulled together to demonstrate once again why Kansas hometowns, cities and counties are special places to live and work. I believe that our partnerships will be strengthened across all levels as a result of this response.

We have been preparing for a response to a novel influenza virus for many years. Local and state health professionals have been working hard to develop plans and resources for communities to mitigate, respond to and recover from a severe outbreak of influenza or a pandemic.

The first two confirmed H1N1 cases in Kansas were identified on April 25, triggering the activation of the Kansas Department of Health and Environment's Incident Command System and distribution of antiviral medications to Kansas from the Strategic National Stockpile and in turn to communities statewide. In the following weeks, the department partnered with other agencies to issue guidance to hospitals,

schools, daycares and parents for dealing with H1N1. Laboratory shipping materials were distributed in order to facilitate the rapid delivery of specimens for analysis at the Kansas Health and Environmental Laboratories.

The World Health Organization declared a flu pandemic on June 11, raising the world pandemic alert level to Phase 6, the highest level on the scale. Phase 6 recognizes that the first flu pandemic of the 21st century is underway with person-to-person spread documented in at least two continents, North America and Australia. It has been about 40 years since the world last encountered a pandemic strain of influenza virus.

As fall approaches, we must remain vigilant while the virus has more time to mutate and a greater opportunity to swap genes with other influenza viruses. This coming flu season will likely pose some unique communications and operational challenges. Public concern over H1N1 could rebound at a time when seasonal flu viruses are becoming more prevalent. Additionally, we are planning for a very complex and sustained H1N1 influenza vaccination campaign that likely will kick off this fall.

As the flu pandemic continues to unfold and guidance continues to flow from the federal level, I will do my best to maintain open lines of communication with all of you. Thanks for your continued hard work and dedication not only regarding this event, but in all aspects of preparedness and response.

KDHE Helps Lead Response to H1N1

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were positive for influenza A but were unsubtypeable, a strong indication that these were cases of the new virus. By 3 a.m., KDHE had notified the Dickinson County Health Department of the preliminary results, which notified the attending physician.

Around that same time, KDHE obtained the use of Gov. Kathleen Sebelius' plane to safely and securely transport the samples as rapidly as possible to the CDC labs in Atlanta for confirmatory analysis

to determine if the viruses were of the (H1N1) strain. A staff member with the KDHE Center for Public Health Preparedness handed the samples to a CDC representative at about 6 a.m. on Saturday, and the samples reached the CDC labs at about 6:30 a.m. KDHE convened staff in its Department Operations Center (DOC) at 10 a.m. Saturday, and was notified by CDC of the confirmatory results at 2:30 p.m. KDHE

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KDHE Helps Lead Response

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announced the results at a news conference later that day at 4:15 p.m.

The response has been continuing since April 25. Individuals who have been in contact with the patients are being interviewed and tested. Local health departments, clinics, hospitals and doctors' offices in Kansas are providing reports to KDHE and performing local case management. Many KDHE staff members have volunteered to assist in the DOC, answer calls and e-mails from the public, and help distribute medications to communities.

OSE Staff Co-Author New England Journal of Medicine Article

Notably, staff members from the Office of Surveillance of Epidemiology co-authored an article published in The New England Journal of Medicine on May 7 titled, "Emergence of a Novel Swine-Origin Influenza A (H1N1) Virus in Humans." The article, available online at <http://content.nejm.org/cgi/content/full/NEJMoa0903810?query=TOC>, adds to the body of knowledge that is being developed to help the public health community better understand the H1N1 virus. Charlie Hunt, Interim State Epidemiologist, and Ingrid Garrison, Environmental Health Officer and State Public Health Veterinarian, along with Cheryl Banez-Ocfemia, Senior Epidemiologist, and Daniel Neises, Epidemiologist, were the individuals who co-authored the article on behalf of Kansas.

Symptoms and Prevention of H1N1

The symptoms of H1N1 flu are similar to the symptoms of seasonal flu and include:

- Fever greater than 100 degrees
- Body aches
- Coughing
- Sore throat
- Respiratory congestion
- In some cases, diarrhea and vomiting

Individuals who experience the above symptoms should contact their physician, who will determine whether testing or treatment is needed. There is no vaccine available right now to protect against H1N1

flu. As with any influenza virus, individuals are encouraged to take these steps to reduce spread:

- Wash your hands thoroughly with soap and warm water or use an alcohol-based hand sanitizer to get rid of most germs, and avoid touching your eyes, nose and mouth.
- Stay home when you are sick to avoid spreading illness to co-workers and friends.
- Cough or sneeze into your elbow or a tissue, and properly dispose of used tissues.
- Stay healthy by eating a balanced diet, drinking plenty of water, and getting adequate rest and exercise.

For more information and updates, please visit the KDHE website at www.kdheks.gov/h1n1.

University of Kansas
Center for Telemedicine and Telehealth
will host
**Health 3.0: Kansas Health Information
Technology Conference 2009**
July 14 & 15
Hilton Airport Hotel - Wichita, Kansas

In conjunction with this conference, there will be a 1-1/2-day Exhibitors Showcase.

Attendees will include:

- Hospital and Clinic Administrators
- IT Management
- EMS Personnel
- County Public Health Personnel
- Physicians, Nurses, Clinical Personnel
- Strategic Planners at all levels

The 2009 conference is sponsored by:
The Center for Telemedicine and Telehealth,
University of Kansas Medical Center Kan-ed,
The Midwest Alliance for Telehealth &
Technology Resources
(A federally-recognized Telehealth Resource Center)

For questions or additional information:
http://www2.kumc.edu/telemedicine/HIT/HIT_Intro.htm
or contact Gordon Alloway, Project Manager, KUCTT,
at Galloway@kumc.edu or 913-588-2257.

Nobody Left Behind

By Michael Fox and Cat Rooney Howland,
KU Research and Training Center
on Independent Living

While improving the health and quality of life for people with disabilities is a national priority, there is an immediate need for translating what we've learned from research into effective community planning so that vulnerable populations do not bear a disproportionate hardship when disasters strike. Developing emergency management information systems that are accessible to all persons in a community starts by targeting the needs of those most vulnerable within the community first.

Earlier articles in this column have identified some of the work KU researchers are involved in which helps gain greater recognition and understanding of these efforts. Their work, available at www.nobodyleftbehind2.org, identifies gaps at the county level that influence preparedness, evacuation, shelter and recovery for persons with disabilities. Several recommendations for action have come out of this, including the need to do the following:

- Increase awareness of county-level emergency managers to the needs of persons with disabilities and participation of persons with disabilities in the planning process;
- Identify and implement new ways to increase knowledge, relevance, and participation in disaster preparation and emergency response education; and
- Improve local surveillance systems so that emergency planners know approximately how many persons will need additional services related to their mobility disability in an emergency.

In the months since our last column in *KS Preparedness Times*, our team has been at work on a number of projects, including developing a draft strategic plan for training and education on disability emergency preparedness for all Kansas counties, working on pandemic flu preparedness curriculum, and compiling an inventory of county best practices that we hope to share with our partners in the coming months. But it has been the work that we've witnessed and helped participate in with our friends at the Lawrence-Douglas County Health Department

that has really caught our attention and imagination. Starting literally from scratch in October 2007, they have developed a community partnership called Together Prepared, which started as a good idea and in a matter of months has developed into a viable public health preparedness project that brings together disparate elements of persons and organizations in the county representing vulnerable populations. Together Prepared is a single effort to make progress towards each of the three goals (awareness, education, and surveillance, mentioned above) that would directly improve emergency preparedness and response for persons at highest risk in Douglas County.

Using the "Vision, Mission, Objectives, Strategies, Action" (VMOSA) model of community action as a starting point, the health department and emergency management department have extended relationships with 13 non-profit, social service and governmental agencies. The group exemplifies collaboration and outreach with existing groups that serve a wide range of individuals within the community to address gaps in preparedness planning for vulnerable populations. The group includes the Bert Nash Mental Health Center, Independence Inc., Lawrence Housing Authority, Visiting Nurses Association, and KU Watkins Health Center among others. Members represent a variety of fields and knowledge areas and are committed to working together, along with representatives of community-based organizations and their consumers to ensure that this important community effort continues. More information about VMOSA is available in the University of Kansas Community Toolbox, at http://ctb.ku.edu/tools/sub_section_main_1085.htm.

The mission of Together Prepared that resulted from early meetings is: "To ensure that local capabilities exist for enhancing personal readiness through training and education so that a disaster's impact on vulnerable populations is minimal." For their purposes, "vulnerable populations" defines groups whose needs are not fully addressed by traditional service providers or those who cannot safely access standard preparedness, response and recovery resources. Together Prepared has focused its efforts on these groups:

- Economically disadvantaged
- Culturally or geographically isolated or with limited English language proficiency

- Physically, cognitively or sensory disabled
- Elderly or very young
- Mentally ill or chemically dependent
- Chronically ill

On November 6, Together Prepared held its first forum for community-based organizations to discuss concerns and challenges they encounter in preparing for an emergency. Participants reported that their consumers lacked education and resources or that their personal preparedness levels were quite low. Evaluations from the first forum indicated that 100% of attendees found it helpful and 98% wished to continue preparedness efforts. The overwhelming positive response to such efforts led to a second forum in February 2009, and another in May 2009.

Efforts to extend outreach have led to the awarding of two grants related to the work of Together Prepared in Douglas County. The first is from Compassion Kansas to expand program services and better engage the community when it comes to emergency planning for vulnerable populations in Douglas County. The plan is to get faith-based groups and neighborhood associations more involved in looking out for our populations that are vulnerable, especially during an emergency. The second grant is from the National Library of Medicine/National Institutes of Health through their Continuity of Health Information program. The major components of this grant are: 1) To have the Lawrence Public Library serve as the “call center” in the event of an emergency or disaster. Trained staff, including Medical Reserve Corps (MRC) and Community Emergency Response Team (CERT) volunteers, will staff the call center. The grant also will make it possible for the library to expand its mission before and during an emergency and become an information hub for the public, a place where they can get printed information as well as be able to access the internet. 2) Create a website for Together Prepared; and 3) Provide classes on preparedness to at-risk groups in places like senior living centers.

Kim Ens, RN, is the Preparedness Coordinator for Lawrence-Douglas County Health Department. She and Health Department Americorps VISTA member Laura Poskochil attribute its early success to “everyone involved with Together Prepared has a

shared vision and passion for making sure Douglas County residents are all prepared and that no one gets forgotten during an emergency...We all have a passion to make this happen.”

Together Prepared has demonstrated the ability of people to act on this “shared vision and passion” in ways that will lead to improved disaster preparedness for residents with unique functional needs. Please let us know if your community has similar efforts in place which we can share with readers. Contact the KU Research and Independent Living Center by phone at 785-864-4095, or e-mail at rtcil@ku.edu.

Laboratory Training Conference Focuses on Preparedness

By Shannon Gabel, Laboratory Training Coordinator

The National Laboratory Training Network (NLTN) and the Association of Public Health Laboratories (APHL) sponsored the state laboratory training coordinators (STCs) conference, “NLTN 20/20: Celebrating 20 Years of Success and Preparing for the Challenges of the Future,” on June 10-12. Forty-one states, including Kansas, participated.

Keynote speaker May Chu of the World Health Organization (WHO) highlighted the need for international gatekeeping to prevent dangerous pathogens from coming “ashore,” meaning anywhere in any country. Countries were asked to utilize international health regulations and strengthen core capabilities in preparedness. The program stressed the value of partnerships to improve global preparedness against outbreaks of new and re-emerging pathogens.

Most STCs provide training to sentinel laboratories in their states, and many more train state laboratory and first responder personnel as well. Many STCs also have job recruitment on their plates. New technologies, combined with a smaller workforce, present significant challenges. Some talks emphasized economic training techniques, and newer STCs were assigned mentors.

Additional breakout sessions addressed biosafety cabinet training, as well as preparing for full Homeland Security Exercise and Evaluation Program (HSEEP) exercises. In the 20 years that the NLTN has been providing support to laboratories nationwide, the organization has supported smart, effective training for everyone in public health.

KS-TRAIN Online Courses

By Debbie Nickels, RN, BSN, Office of Local and Rural Health, KDHE

Looking for training close to home? Have new preparedness employees? Why not use the KS-TRAIN course library as one of your quality improvement tools to increase the competency of your workforce. Login to your KS-TRAIN account at <http://ks.train.org>, and click the link to learn more.

Pandemic Influenza - Homeland Security, Keeping Kansans Safe (1015657). This video presentation was the fourth in a series of Kansas Homeland Security broadcasts produced by Kansas public television. The Center for Public Health Preparedness (CPHP) gratefully thanks Kansas public television for the opportunity to share this information with the workforce. The moderator and presenters discuss critically important state, local, and personal preparedness related to the potential threat of pandemic influenza. Please allow approximately one hour to complete the video. For further resources on pandemic influenza go to the Kansas Department of Health and Environment's website, at http://www.kdheks.gov/cphp/pan_flu.htm.

Strategic National Stockpile: An Introduction (1007933), RSS Training Video: Strategic National Stockpile (1004825), and Sedgwick County MMRS: Mass Pharmaceutical Dispensing Medication Preparation Video (1004248). These classes offer an introduction to the Strategic National Stockpile (SNS), the warehouse actions for the receipt/storage/distribution (RSS) of the SNS, and details the step-by-step medication preparation process for preparing an antibiotic for mass pharmaceutical dispensing.

The SNS online course is one hour and is divided into four modules describing an overview of the SNS, as well as the local, state and federal responsibilities. The course is recommended for new health and medical staff/volunteers needing more information about SNS response, medical staff/volunteers who would like to refresh or update their knowledge of SNS, or anyone who is interested in knowing more about SNS response.

The RSS course from the Centers for Disease Control and Prevention is 20 minutes and goes through a step-by-step tour of the receipt of SNS materials, re-packaging, and shipping to local receiving sites.

The mass pharmaceutical distribution medication preparation is a 15-minute video created by Sedgwick County MMRS as a way to train volunteers and just-in-time workers. This course assists the workforce in developing an understanding of the step-by-step process for preparing an antibiotic for dispensing to the public, and provides information on the materials, equipment, and supplies needed for preparation of the antibiotic to the public. The video also presents scenarios for development of a mass medication dispensing process.

Nurses on the Front Line: Preparing for and Responding to Emergencies and Disasters (1013008). Presented by George Washington University Department of Nursing Education and the National Nurse Emergency Preparedness Initiative (NNEPI), "Nurses on the Front Line: Preparing for and Responding to Emergencies and Disasters" was developed with funding from the U.S. Department of Homeland Security. The NNEPI course uses video, animation, and case scenario-based activities to engage the learner throughout the interactive course. Nursing continuing education credits are available post completing this course.

Do you have news about your agency's preparedness efforts?

If you would like to include it in the next issue of the KS Preparedness Times, please e-mail your news to Mike Heideman at mheideman@kdheks.gov or Cait Purinton-Day at cpurinton-day@kdheks.gov.

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