

SNAPSHOTS OF PUBLIC HEALTH AND MEDICAL PREPAREDNESS

Iowa

Example of Local Medical or Public Health Preparednessⁱ

In 2006, Iowa was the center of a national mumps epidemic, accounting for nearly 2,000 of the 2,600 cases nationwide. Based on an outbreak investigation by epidemiologists from the Iowa Department of Public Health (IDPH), Iowa quickly determined that 18 to 25 year olds were most at risk. IDPH launched a vaccination program targeting this population of patients in order to stem this emerging, infectious outbreak. Local public health departments set up vaccination clinics based on CDC Strategic National Stockpile exercises to administer the vaccines. Within a month of beginning the vaccination campaign, the number of reported mumps cases decreased by 65%. Within 2 months, the mumps epidemic was stopped.

Public Health Emergency Preparedness (PHEP) Cooperative Agreementsⁱⁱ

All responses to public health emergencies begin at the local level. The Centers for Disease Control and Prevention (CDC) administers the PHEP cooperative agreements to respond to all types of public health incidents and build more resilient communities. The PHEP cooperative agreements provide a critical source of funding, guidance, and technical assistance for state, territorial, and local public health departments. Preparedness activities funded by the PHEP cooperative agreement are targeted specifically for the development of emergency-ready public health departments that are flexible and adaptable. These efforts support the National Response Framework, which guides how the nation responds to all types of hazards including infectious disease outbreaks; natural disasters; biological, chemical, and radiological incidents; and explosions. More specifically, Iowa received the following PHEP funding for FY2007-2011:

	FY2007	FY2008	FY2009	FY2010	FY2011
Total	\$9,779,223	\$7,702,063	\$7,540,433	\$7,565,448	\$6,595,869

Hospital Preparedness Program (HPP)ⁱⁱⁱ

The HPP provides leadership and funding through grants and cooperative agreements to states, territories, and eligible municipalities to improve surge capacity and enhance community and hospital preparedness for public health emergencies. The program is managed by the Office of the Assistant Secretary for Preparedness and Response (ASPR), which provides programmatic oversight and works with its partners in state, territorial, and municipal government to ensure that the program's goals are met or exceeded. More specifically, Iowa received the following HPP funding for FY2007-2011:

	FY2007	FY2008	FY2009	FY2010	FY2011
Total	\$4,280,453	\$4,113,883	\$3,760,725	\$4,039,814	\$3,667,490

Emergency System for Advance Registration of Volunteer Health Professionals (ESAR-VHP)^{iv}

ESAR-VHP is a federal program created to support states and territories in establishing standardized volunteer registration programs for disasters and public health and medical emergencies. As a result of this program, the Iowa Statewide Emergency Registry of Volunteers (I-SERV) was established to coordinate and assemble volunteer health professionals to assist in following a disaster by providing additional staff to meet all health care needs in Iowa and nationally. The program currently has 640 volunteer health professionals.

Medical Reserve Corps (MRC)^v

The mission of the civilian 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 to prepare for and respond to emergencies. MRC volunteers supplement existing emergency and

public health resources for preparedness and response at local levels. More specifically, Iowa has a total of 15 MRC units composed of 1,074 volunteers. In FY2011, MRC units in Iowa reported 45 activities.

ⁱ CDC, Emergency Preparedness and Response: <http://emergency.cdc.gov/publications/feb08phprep/>

ⁱⁱ CDC, Office of Public Health Preparedness and Response:

FY2011 – http://www.cdc.gov/phpr/documents/FundingTable_FY_2011.pdf

FY2010 – http://www.cdc.gov/phpr/documents/Revised_PHEP_BP10_Extension_Funding_Table_Aug2010.pdf

FY2009 – http://www.cdc.gov/phpr/documents/FinalPHEP_BP10_Guidance_508_Version.pdf (Appendix 2)

FY2008 – <http://emergency.cdc.gov/cdcpreparedness/coopagreement/08/pdf/fy08announcement.pdf> (Appendix 3)

FY2007 – <http://emergency.cdc.gov/cdcpreparedness/coopagreement/pdf/fy07announcement.pdf> (Appendix 3)

ⁱⁱⁱ HHS, Office for the Assistant Secretary for Preparedness and Response, Public Health Emergency:

FY2011 – <http://www.phe.gov/Preparedness/planning/hpp/Documents/fy11-fundingtable.pdf>

FY2010 – <http://www.phe.gov/Preparedness/planning/hpp/Documents/2010-foa-fundingtables.pdf>

FY2009 – <http://www.phe.gov/Preparedness/planning/hpp/Documents/2009-foa-fundingtables.pdf>

FY2008 – <http://www.phe.gov/Preparedness/planning/hpp/Documents/FY2008-hppfunding.pdf>

FY2007 – <http://www.phe.gov/Preparedness/planning/hpp/Documents/2007-foa-fundingtables.pdf>

^{iv} HHS, Office for the Assistant Secretary for Preparedness and Response, Public Health Emergency: <http://www.phe.gov/esarvhp/pages/registration.aspx>

^v HHS, Office for the Assistant Secretary for Preparedness and Response, Public Health Emergency: personal communication