

United States Public Health Service Domestic Deployment Experiences

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Blue Roster, Applied Public Health Team 3
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16 February 2011
PPAC/VetPAC Forum



Introduction: Agency Assignments

- Trained in preventive medicine
- EIS program at CDC (2001 – 2003)
 - National Center for Infectious Diseases
 - Healthcare associated outbreak investigations
 - Healthcare associated disease surveillance among healthcare workers
- Medical epidemiologist at FDA (2003 – 2008)
 - Center for Biologics Evaluation and Research
 - Post-marketing vaccine adverse event surveillance
- Medical officer (2008 – current)
 - National Institute of Allergy and Infectious Diseases
 - Safety oversight of volunteers enrolled in clinical trials

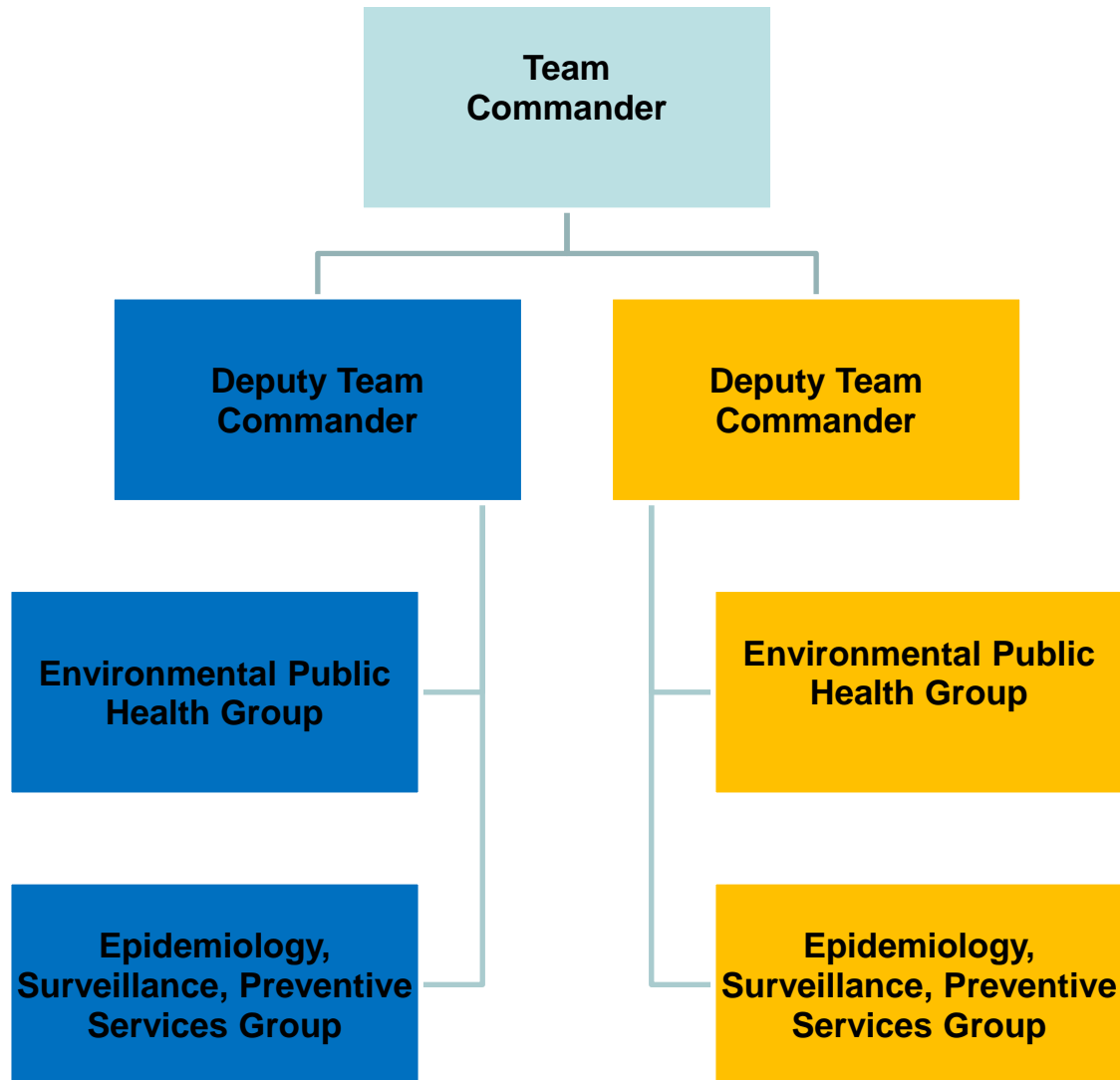
Introduction: PHS Deployment Team

- Applied Public Health Team 3 (since 2006)
 - Member, Epidemiology Section (2006 – 2009)
 - Deployment role: epidemiologist
 - Hurricane Ike response, Texas (2008)
 - Lead, Epidemiology, Surveillance and Preventive Service Group, Blue Roster (2010 – current)
 - Deployment role: team leader
 - ~ 10 officers with specialization in epidemiology, preventive service and health education
 - OFRD medical readiness training, Tennessee (2010)

Applied Public Health Teams

- 5 Teams
- Report within 36 hours
- Provide epidemiology, preventive medicine services and environmental health services and assessments
- 1 team on-call every 5 months with half of the team as primary
- 47 officers per team
- Usually 2-week deployment

Applied Public Health Team Functional Structure



Hurricane Ike Response Timeline (1)

- APHT 3 on call month (September)
- Team conference call (Aug 25)
- On advisory status (Aug 27)
- On alert status for possible deployment (Aug 31)
- On advisory status (Sep 2)
- Activation of CC by HHS Secretary (Sep 3)

Hurricane Ike Response Timeline (2)

- Hurricane Ike landfall in Texas (Sep 13)
- On alert status (Sep 14)
- Mission Assignment authorized by the Federal Emergency Management Agency (Sep 18)
- Travel arrangement by the Secretary's Operation Center (Sep 18)
- Departure flight to Austin; report through chain of command (Sep 19)
- APHT 3 deployed and attached to the Incident Response Command Team with base of operations at the Austin Joint Field Office (Sep 19)
- Demobilization (Sep 28 – Oct 3)
- Return flight to DC (Oct 3)

Hurricane Ike Response: Assignments

- **First Assignment (Sep 22 – 27):**
 - Epidemiological support to Texas Department of State Health Services
 - Lodging and meal: hotel (Austin) and per diem
 - Base of Operation: Austin Joint Field Office
 - Assist state epidemiologist in the analysis and reporting of injury and disease surveillance data from Federal Medical Stations and Shelters
 - Working hours: 8 -12 hours
- **Second Assignment (Sep 28 – Oct 2):**
 - Galveston Island Rapid Community Public Health Needs Assessment
 - Lodging and meal: FEMA tent (Galveston Island) at local airport
 - Base of Operation: Galveston County Health District
 - Conduct a rapid community needs assessment in collaboration with state and CDC health officials
 - Working hours: 8 - 12 hours

Rapid Community Needs Assessment: Data Collection Form



Community Assessment for Public Health Emergency Response Questionnaire, Texas

Date:	Cluster:	# of Housing Units in Cluster:	Survey #:	Interviewer Initials:
Address:		Key: Y = Yes N = No		D/K = Don't Know N/H = Never Had
1. Type of Structure: <input type="checkbox"/> Single family house <input type="checkbox"/> Multiple unit (e.g., duplex, apartment) <input type="checkbox"/> Mobile home <input type="checkbox"/> Other		11. Is there anyone in this house who has trouble getting the medical care that they need?		Y N D/K
2. Since the hurricane, do you feel your home is safe to live in? <i>If no, why?</i>		12. Is there anyone in this house who has trouble getting the following items that they need? <input type="checkbox"/> oxygen <input type="checkbox"/> dialysis <input type="checkbox"/> home health care <input type="checkbox"/> other type of care <i>If yes, why?</i>		Y N D/K
3. Since the hurricane, do you feel safe? <i>If no, why?</i>		13a. Do you have adequate drinking water for everyone for the next three days?		Y N D/K
4. How many people lived in this house before the hurricane?		13b. What is your present source of drinking water? <input type="checkbox"/> Well <input type="checkbox"/> Tap <input type="checkbox"/> Bottled <input type="checkbox"/> No Drinking Water <input type="checkbox"/> D/K		
5a. How many people slept in this house last night? 5b. How many were: 0-2 years _____ 3-17 years _____ 18-65 years _____ 65+ _____		13c. If using well or tap water are you treating the water? <input type="checkbox"/> No <input type="checkbox"/> Yes-Boiling <input type="checkbox"/> Yes-Chemical <input type="checkbox"/> D/K		
6. Was anyone in this house injured due to or since the hurricane? <i>If "yes," what was the injury?</i>		14. Do you have adequate food for everyone in the house for the next three days?		Y N D/K N/H
6a. Strain/sprain		15. Do you have a working toilet?		Y N D/K N/H
6b. Broken Bones		16. Do you currently have electric power from the utility company?		Y N D/K N/H
6c. Cuts, abrasions, or puncture wound?		17a. Since the hurricane, did you use a generator?		Y N D/K N/H
6d. Animal bites		17b. If yes, where and how do you use it? <input type="checkbox"/> Indoors <input type="checkbox"/> Outside, but near an open door/window <input type="checkbox"/> Using open flame as a source of light when fueling <input type="checkbox"/> Other _____		
6e. Other:		17c. Are you still using a generator?		Y N D/K N/H
7. Has every adult in the house had a tetanus shot within the last 10 years?		18a. Since the hurricane, did you use a charcoal gas grill/camp stove?		Y N D/K N/H
8. Since the hurricane, has there been any increase in insect bites/stings from any of the following? a) Mosquitoes Y N D/K b) Ants Y N D/K c) Bees or wasps Y N D/K d) Other: Y N D/K		18b. If yes, where and how do you use it? <input type="checkbox"/> Indoors <input type="checkbox"/> Outside, but near an open door/window <input type="checkbox"/> Using open flame as a source of light when fueling <input type="checkbox"/> Other _____		
9. Has anyone in this house become ill due to or since the hurricane? <i>If yes, what did they have:</i> a) Nausea/stomach ache/diarrhea: Y N D/K b) Sore throat/cough with fever Y N D/K c) Worsened chronic illness Y N D/K d) Other: _____		18c. Are you still using a gas grill/camp stove?		Y N D/K N/H
10. Since the hurricane, is there anyone in this house who has trouble getting the medications that they need? <i>If yes, why?</i>		19. Is your garbage pickup currently disrupted?		Y N D/K
		20. Do you have a working telephone?		Y N D/K
		21. How did you get warning or other information about the hurricane? (check all that apply) <input type="checkbox"/> TV <input type="checkbox"/> Neighbor, word of mouth <input type="checkbox"/> Radio <input type="checkbox"/> Internet <input type="checkbox"/> Newspaper <input type="checkbox"/> Other: _____		
		22. How are you getting health information after the hurricane? (check all that apply) <input type="checkbox"/> TV <input type="checkbox"/> Neighbor, word of mouth <input type="checkbox"/> Radio <input type="checkbox"/> Internet <input type="checkbox"/> Newspaper <input type="checkbox"/> Other: _____		
		23. Finally, what is your greatest need at this moment?		

Hurricane Ike Response: Logistics

- Uniform: BDU including PHS baseball cap
 - boot with steel toe (wear before deployment)
- Equipments and supplies:
 - travel order
 - government credit card
 - government IDs
 - team roster and contact information
 - USB thumb drive
 - reference materials
 - blackberry and cell phone
 - portable GPS
 - personal items (e.g., sleeping bag, linen, flashlight, first aid, etc)

OFRD Medical Readiness Training, Tennessee, March, 2010

- Team Notification (Feb 8)
- Departure to Knoxville, TN (Mar 14)
- Training duration: 1 week
- Return to DC (Mar 21)
- Collaboration with Tennessee Department of Health and Chattanooga-Hamilton County Health Department
 - coordinate with state and county health officials in developing potential missions
 - assist CHCHD in the design and conduct of a survey to assess the knowledge, attitude and behavior towards H1N1 vaccination among county residents
- Lodging and meal: hotel and convention center; per diem
- Working hours: 8 – 16 hours

The End

- Thank you!
- Questions?
- Contact information
 - e-mail: soju.chang@nih.hhs.gov