



**Rural Preparedness  
Interactive Session**

**What All Rural Responders  
Must Know about Health  
Emergencies**

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J. David Puposzar, MPH  
Sherie Wallace, BA

UNIVERSITY OF PITTSBURGH  
SCHOOLS OF PUBLIC HEALTH  
**CENTER FOR  
PUBLIC HEALTH  
PRACTICE**  
PRACTICE • PROFESSIONS • TRAINING

 The University of Pittsburgh  
Center for Rural Health Practice

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**Agenda**

Why Rural Preparedness?

Pennsylvania's Preparedness Training: Goals and Objectives

Methodology: Design and Delivery

CDC's and Project's Goals and Objectives

Evaluation

Discussion

BREAK

Course content-overview

Discussion on Future Direction

Summary and Concluding Remarks

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**Why Rural Public Health  
Preparedness?**

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## Why Rural Preparedness?

- Potential targets
- Agriculture Production
- Urban water supplies
- Infectious Disease
- Urban evacuations
- Low threat perception
- Limited resources



Rancho Seco power plant near Sacramento, CA. Paul Orvin/sxc.hu

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## State and Local Public Health Workforce: The Numbers



Esa Oksman/sxc.hu

- 500,000 individuals (approx.)
- 2/3 work for state and local governments
- Exact size is underestimated
- No specialized education or training in public health

Source: Center for State and Local Government Excellence

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## A Workforce in Crisis

- 45% to 50% eligible to retire  
Next five years
- 20% vacancy - 14% turnover
- Shrinking number of individuals ready to fill vacancies
- Limited training capacities

Source: Center for State and Local Government Excellence



Steve Woods/sxc.hu

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## Hardest Hit Professions



- **Public health nurses**
- **Epidemiology**
- **Environmental health**
- **Human Services**
  - *Aging services*
  - *Mental health services*
  - *Social services*

Source: Center for State and Local Government Excellence

CDC/ Judy Schmidt

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## Why are there shortages in these professions?

- **Attrition and retirement**
- **Epidemiologists and IT experts are in demand**
- **Lack of competitive pay and benefits**
- **Budgetary restrictions**
- **Geographic desirability**



Source: Center for State and Local Government Excellence

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## Workforce Trends-Summary



- **50% loss of existing workforce**
  - Next 5 years
- **Shortage affects ability to protect public health and safety**
- **Renew efforts to recruit, retain, and train public health workers**

Source: Center for State and Local Government Excellence

Troy Newell/Asc-hi

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## Workforce Trends-Rural Impact?

- Replacing 250,000 public health workers
  - Next 5 years
- Training an auxiliary workforce of citizens
- Shortages exacerbated by major public health crisis



Casey Deshong/FEMA

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## Training an auxiliary workforce

- Community monitoring
- Investigating health problems
- Educating and empowering others
- Mobilizing resources
- Law and regulation compliance
- Developing policies and plans
- Linking people to health services
- Assessing effectiveness
- Demanding more "practice-based" education

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## Pennsylvania's Rural Preparedness Training: Goals and Objectives

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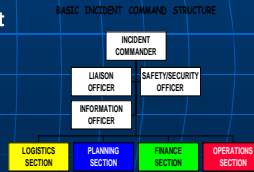
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## Plans – New/Update Process

- **Pandemic/AII- Hazard Mitigation**
- **Must be NIMS compliant**
- **Mandated compliance with NIMS and ICS.**
- **Integrate with NRP, related support plans, and other incident specific plans**



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## Methodology: Design & Strategy

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## Design

- **Advisory Task Force**
- **Text book, video, and slide presentation**
- **Pilot training**
- **Marketing**
- **Evaluation methods**
- **Course delivery**
- **Course evaluations**

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### Advisory Task Force

- Law Enforcement
- Fire & Hazmat Services
- EMS-Pre-hospital Care Services
- Hospital/Healthcare
- Emergency Management (all levels)
- Medical Examiners/Coroners
- Local government/administration
- Agricultural and Veterinary services
- VOADS, Red Cross
- Health and welfare agencies (human services)
- Rural utilities
- Labor, occupational health
- Academic institutions and schools
- Military-civilian support

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### Strategy

- Market through Pennsylvania's nine Regional Task Forces
- Deliver 12 trainings/year in rural counties
- Deliver 3 general presentations on public health preparedness
- Build partnerships to enhance community readiness

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### Methodology: Delivery

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## Project Administration-Bradford

- Initiate contact with County EMA Coordinator
- Agree on a date and location
- Review procedures for expense reimbursements
- Confirm instructor availability
- Copy materials and provide AV equipment
- Release training announcement (template provided)
- Notify PEMA to release announcement
- PADOH – Request credit hours for EMS Continuing Education
- Additional contacts notified
- Print certificates and mail to County EMA
- Process CEUs for EMS
- Analyze results of evaluations with Center for P.H. Preparedness-Pittsburgh

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## Host County Responsibilities

- Select and arrange for training site
- Arrange for food service
- Market course locally
- Register attendees
- Deliver introductory remarks
- Submit invoices
- Mail completed certificates

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## CDC's and Project's Goals and Objectives

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## CDC GOALS

- "Increase the number of frontline public health workers at the state and local level that are competent and prepared to respond to bioterrorism, infectious disease outbreaks, and other public health threats and emergencies".
- "Increase the number, type, and distribution of health professionals that comprise a preparedness and response workforce".

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## Course Objectives

- Know the functional responsibilities of public health
- Understand the integrated roles of public health, emergency management and other government agencies
- Be aware of how public health supports general mass care and treatment systems

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## Course Objectives (continued)

- Understand the principles of risk communication
- Be aware of emergency powers and laws
- Be aware of disaster mental health concerns and resources
- Know how to protect yourself, your family, patients, and others

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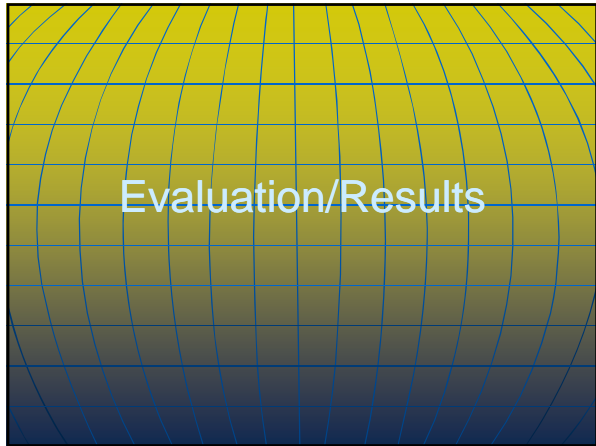
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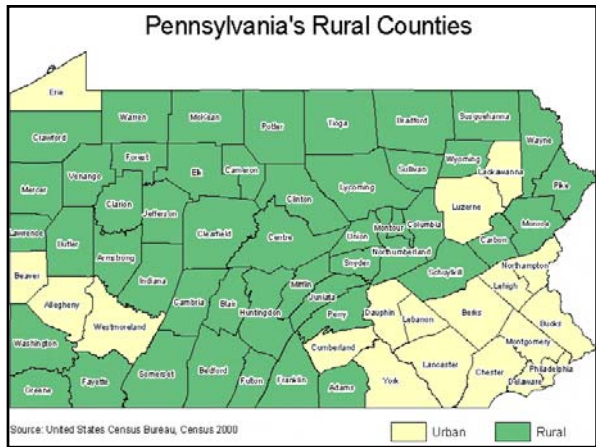
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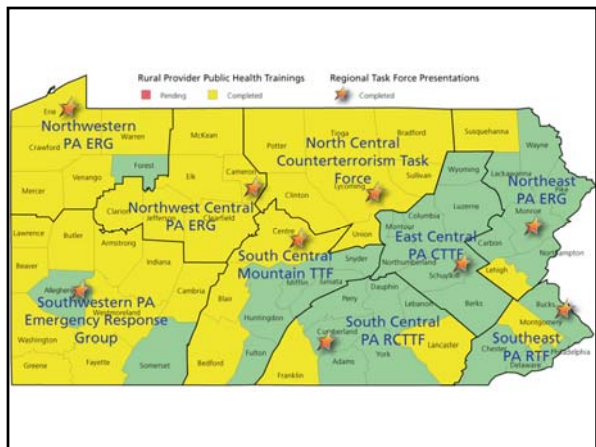
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## Characteristics of Registrants

Male	487 (54.7%)
Average age	46.6 yrs.
Age Range	17 yrs. – 81 yrs.
Race:	
Black or African American	8 (0.9%)
White	861 (97.6%)
Asian	2 (0.2%)
Hispanic or Latino	6 (0.7%)
Other	5 (0.6%)

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## Functional Responsibilities (n=898)

Traditional responders (Police, Fire, EMS)	470 (52.3%)
Elected government official	65 (7.2%)
Nurse or Nurse Practitioner	139 (15.5%)
Health Administrator	22 (2.4%)
Hospital Administrator	12 (1.3%)
Mental Health Practitioner	34 (3.8%)
Principal/school administrator	11 (1.2%)

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## Participant Evaluations: Course Content and Materials

Training content useful:  
99.2% agreed or strongly agreed

- Materials helpful:  
99.6% agreed or strongly agreed

- Knowledge increased an average of 2 points  
on a scale of 1 to 5

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Participant Evaluations –  
How to Improve Course

- Increase time to cover materials
- More detail/more depth on topics
- Share slides used in class

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Discussion

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BREAK

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# What All Rural Responders Must Know about Health Emergencies

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## Content

- CHAPTER 1 - EMERGENCY PUBLIC HEALTH FUNCTIONS
- CHAPTER 2 - PUBLIC HEALTH AND EMERGENCY MANAGEMENT
- CHAPTER 3 - MASS CARE
- CHAPTER 4 - RISK AND CRISIS COMMUNICATION
- CHAPTER 5 - POWERS AND AUTHORITIES (LEGAL ISSUES)
- CHAPTER 6 - DISASTER MENTAL HEALTH ISSUES
- CHAPTER 7 - PROTECTING YOURSELF, YOUR FAMILY, AND OTHERS FROM INFECTIOUS DISEASE
- OSHA RESPONDER PROTECTION PRESENTATION

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# Facilitated Discussion

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## Measuring Community Readiness

- Self-help education and training
- Family support networks
- Communication enhancements
- Volunteer organization & management

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## Measuring Community Readiness?

- Self-help education and training
  - "Infection control in the home"
  - Tele-health information resource
- Family support networks
  - Home meal delivery
  - Pharmacy and home healthcare delivery
  - Childcare services
  - Home-based services (laundry, cleaning, shopping)
- Communication enhancements
  - Where to turn guides
  - Family Support Services-Clearinghouse & Referral
  - One call system (alternative like 9-1-1)
  - Buddy-system (special population needs)
- Volunteer organization & management
  - Expanding CERT, VOAD, and Medical Reserve Corps functions
  - Linkages among Red Cross, Salvation Army, and other care providers
  - Training in home health care and support functions
  - Dispatching of volunteers

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## Expanded Mental Health Content

- Public Health Role in Disaster Mental Health
- Psychological Impacts of Disaster
  - Normal Reactions to Abnormal Situations
- Symptoms of Distress
  - Children
  - Senior Citizens
- Post-Traumatic Stress Disorder
- Disaster Mental Health Effects in Responders

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Thank You

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