

NEMA-ASTHO-GHSAC Joint Policy Workgroup Meeting
January 23, 2020
Little Rock, Arkansas
Meeting Summary

Chairs:

Dr. Randall Williams (ASTHO) and Director Pete Landon (GHSAC)

Agenda Topics

- Bringing It All Together
- Crisis Leadership and Navigating Complex Systems
- CDC Updates
- NGA's Public Health Preparedness Workshop
- Ebola Exercise Update
- Gun Violence as a Public Health Threat
- Disasters Toll on Mental Health

Bringing It All Together

Dr. Paul Halverson and Mr. Dave Maxwell

In celebration of the tenth anniversary of the joint policy work group, the past presidents of ASTHO and NEMA reminded everyone of the value of the group and "in order to be successful will be when we do it together." Both have seen the tests of such success from Y2K to 9-11 to H1N1 and emphasized that timely coordination, information sharing, and collaboration begins with the relations you have in your network. Policy groups such as the NEMA ASTHO GHSAC Joint Policy Work Group are how the progression continues to be innovated as people share their experience and knowledge.

Crisis Leadership and Navigating Complex Systems

Mr. Joseph M. Henderson, Distinguished Senior Fellow, Harvard National Preparedness Leadership Initiative

In consideration of the fundamentals of meta-leadership, Mr. Henderson took the list of provided challenges from the work group and crafted a session on skills that will help leaders and their team to pivot when needed and how best to drive the transformative process. What would success for an agency look like? When you reached a high morale within your agency; people want to work in your organization, and you gained competitors' interests; and stakeholders sing your praise (where you don't have to say a thing).

Mr. Henderson focuses on the development of crisis leadership and navigating complex systems utilizing the Meta-Leadership Framework. Following thirty-three years of service, Mr. Henderson retired from the U.S. Government in 2018 as a senior executive with the Centers for Disease Control and Prevention (CDC) and served nine years in the United States Air Force. Mr. Henderson is also a co-author of the book "*You're It – Crisis, Change, and How to Lead When it Matters Most*", published in June 2019.

CDC Updates

Dr. John Dreyzehner, Director, Center for Preparedness and Response
Todd Talbert, Associate Director, Division of State and Local Readiness

Dr. Dreyzehner shared his new role with the CDC and how he looks to continue the great partnerships across the Nation. His priorities as he settles into his new role is to see if CDC and partners are doing the right thing; at the right time; in the right way; and for the right reasons. Since Coronavirus

outbreak had quickly ensued, Dr. Dreyzehner provided a brief update on the airport screening (more airports were being added as well as what measures they were taking in China) and the installment of regular regional conference calls were added to the efforts of collaboration to keep States/Nation informed on what the outbreak looks like in the United States, especially for those who had infected cases and/or suspects.

Mr. Talbert asked for the group to keep their Governors informed about the PHEP Cooperative Agreement. The capabilities built under PHEP are more operational and have built in areas that prove to be more inclusive about vulnerable capabilities, cyber, and social media. In addition, the outreach of States updating their chemical laboratories has proven successful as the labs have been upgraded in the last four years.

The work group helped the CDC in four major projects that proved very successful. Advocating for the chemical labs and seeing the success of those labs having the upgrades they desperately needed was a monumental task. In consideration of the CDC's relationships within the Fusion Centers across the Nation, a greater CDC representation are in the centers to help coordinate the public health initiatives. Identifying public health threats in the coordination with THIRA was a direct effort of collaboration between public health and emergency management. And lastly, the information share of the various models of best practices enhanced multiple projects the CDC looked to accomplish.

NGA's Public Health Preparedness Workshop

Lauren Stienstra, Program Director, NGA Solutions: Homeland Security and Public Safety

Cheryl Petersen-Kroeber, Preparedness Director, NM Department of Health

Andrew Pickett, Preparedness Director, PA Department of Health

NGA partnered with the CDC to design a project to help states improve their ability to plan for and respond to public health emergencies. The strenuous process begins with an application period that includes a letter of commitment from the Governor. NGA has taken the workshop series and created a Governors Guide to Public Health Preparedness, <https://www.nga.org/center/publications/hsps-publications/governors-guide-to-public-health-preparedness/> that serves as a quick study on the fundamentals of public health preparedness. One of the key takeaways as a result of the project that Ms. Petersen-Kroeber spoke of was the job action sheet for elected officials in Minnesota. The one pager focused on the coordination aspect of public health and homeland security officials. Mr. Pickett discussed how Pennsylvania took on how emergency management law impacts public health in areas such as the opioids crisis and medical countermeasures (MCM) and how best they can move the needle to ensure that their policies are aligned.

The next workshop series will begin with an outreach asking for applications in March. NGA oversees the application process and provides six months of technical support for all programs selected so that each state is successful during the day and half workshop.

Ebola Exercise Update

Paul Petersen, Emergency Preparedness Director, TN Department of Health

Mike Sprayberry, Director, NC Division of Emergency Management

The regional health and medical exercise, Operation Wesley, was a coordinated effort between states, locals, ASPR, CDC, Universities, and private sector entities. There are ten regional centers that focus on the Ebola outbreak within the United States and will continue to be funded until May 17, 2020. After that, not sure of the future of those centers. Vanderbilt University Medical Center played a huge role in the exercise in Tennessee. The exercise tested state and local staff; hospitals; and emergency medical service vehicles, as well as pediatrics with a scenario that involved a child. Emergency management provided the wrap around services to make sure public health was successful. Lessons learned from the coordinated effort:

- The force multiplier is to engage all partners and to have all the decision makers in the State Emergency Operations Center (SEOC). The coordination of communications improved the public messaging and the efficiencies of the activities to respond quickly. Having the joint information center proved critical to get ahead of the messaging.
- The Ebola outbreak gobbles up resources extremely fast. When exercises occur, it is imperative to send the invitation to all agencies and get everyone involved.
- Waste management was a big concern. It is most helpful to have your contracts in line and ready to go prior to an incident. If you do not have an entity that will discard of the waste, you need to act now to get a contractor in place.
- It's critical to also be aware of the federal resource availability. It will help in the long run to figure out what your State will be up against.

Gun Violence as a Public Health Threat

Parham Jaberri, Chief Deputy Commissioner, VA Department of Health

Through an immense amount of statistics, Virginia is considering gun violence as a public health threat. By turning the conversation to more of a health perspective, it allows more creative solutions on how to prepare for and mitigate against the threat. One brainstorm mentioned was to research if there are any lessons learned from the opioids crisis that can be replicated to help minimize the risk of gun violence. A taskforce has been developed per the directive of the VA Secretary of Health and Human Resources and the VA Secretary of Public Safety and Homeland Security that will look to further the narrative. Where is no guarantee for a one size fits all solution, the taskforce looks to build a consensus that this is an issue and what may be the impacts to build awareness with the change in narrative.

Disasters Toll on Mental Health

Bryan Tuma, Assistant Director, NE Emergency Management Agency

Randall Williams, Director, MO Department of Health and Senior Services

Director Tuma opened the conversation by setting the stage to show the immense flooding and ice damage during the Spring of last year and the impact such a disaster had on the communities. Nebraska's entire story has been documented: netnebraska.org/basic-page/television/television The title is "And Then the Floods Came." Bridges that connected life-saving resources were demolished in an instant and the impact on the livelihoods of the community, livestock, and farmland created a recovery effort that continues to this day. The University of Nebraska was an incredible partner in helping provide crisis counseling resources and created an online toolkit. One of the major challenges was the stigma of asking for help, so it took a huge educational effort from the State to make sure the communities understood what their options were. The State is preparing for another wave of ramping up their crisis counseling initiatives in the summer when farmers and ranchers will get hit with the impacts of losing their families' only funding source.

Dr. Williams eloquently stated that it is not just the immediate trauma that is the most worry; it's the secondary trauma States must make sure are also a critical part of the recovery plan. In Missouri's case they have farmland that will not be able to be used until two additional seasons – that is two full years of growing seasons to a community that needs their farmers and farming families that need their income. When you look at life quality, plans must be purposeful in counseling efforts within the first 15 months of the disaster. Helplessness can bring on its own level of depression. Most coordinated efforts in States use the resources that are local, then may staff up to help. Coping tips and when to seek professional help prove to be very resourceful in educating the community on what triggers to notice if the disaster has had an impact on people. Best call to action is to prepare both personally and professionally; collaborate with behavioral health departments; and learn the emotional basics on triggers and healthy coping strategies.