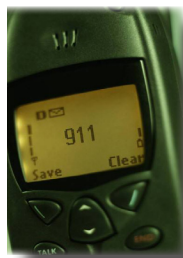


Communication

17 Examples of Social Media and Government Innovation

Citizen 2.0 has listed [17 examples](#) of social media and government innovation. A PDF of the document is available online.



Cell phone Emergency Call Service Failed Following East Coast Quake

The Wireless Priority Service, which is only available to federal/municipal workers and essential public health and safety personnel, [failed](#) immediately after the August earthquake. The service is supposed to grant priority to government and public safety calls even during periods of congestion and is expected to be improved by next year.

YouTube can be your Friend: Sacramento County Public Health Division Success Story

During a public health emergency the media can either be a help or a hindrance in getting accurate information to the public. With the use of video technology and online tools like YouTube, public health officials can quickly create videos to get precise information to the public on immediate health risks. Unfortunately government web restrictions and firewalls can pose a challenge for those who want to use YouTube on their preparedness website. The CDC Risk Communicator Newsletter highlights one local health department's [successful strategy](#) to overcome this challenge.

Research

Nature – Influenza Supplement

The journal Nature published an entire [open access supplement](#) regarding influenza. The supplement covers several aspects of influenza from vaccines to epidemiology. The full journal supplement is available online.

Transmissibility and Temporal Changes of 2009 H1N1 Pandemic During Summer and Fall/Winter Waves

In BMC Infectious Diseases, researchers compare the transmissibility of 2009 H1N1 pandemic influenza during the summer and fall/winter waves. The researchers created a Richards model applied it to epidemiologic data in Taiwan. They utilized Taiwan to represent the northern hemisphere countries. The data shows the summer wave slowed down closer to September. The fall/winter wave, on the other hand, began four weeks after schools were in session. The researchers concluded the transmissibility was lower in the fall/winter wave than the summer wave. They suggest this is due to the possible immunity some of the population gained during the summer wave. The full article is available [online](#).



Health Impact Assessment (HIA) in Michigan

The Michigan Climate and Health Adaptation Program (MICHAP), in collaboration with the Centers for Disease Control and Prevention (CDC), encourages the use of Health Impact Assessment (HIA) to help decision makers better assess proposed climate change policies, projects and programs with respect to their impact on population health, in order that they may avoid adverse health consequences and costs, and improve health.

In August, MICHAP hosted [HIA training](#) facilitated by [Human Impact Partners](#). Training participants included public health professionals, city and county planners, and students from the University of Michigan. HIA is a participatory research approach that encourages citizens, particularly disadvantaged ones, and people from multiple sectors, to work together to promote community health, sustainable development and environmental responsibility.

MDCH is supporting local health departments with [funding](#) and technical assistance to conduct HIAs. If you would like more information about HIA, please contact Dominic Smith at smithd82@michigan.gov

Due to the holidays, there will not be a December 30th issue of *the Guardian*. Make sure to check out the next issue on January 13th!!

Click [HERE](#) to join *The Guardian* list-serv and receive OPHP's e-newsletter directly.

Knowledge of Avian Influenza (H5N1) among Poultry Workers, Hong Kong, China

In Emerging Infectious Diseases, researchers study avian influenza (H5N1) risk knowledge, preventive behavior, and outbreak preparedness in Hong Kong, China poultry workers. An anonymous, cross-sectional survey of 360 poultry workers was conducted during June to November 2009. The survey results showed that the poultry workers had inadequate knowledge of risk, preventative behavior, and outbreak preparedness for avian influenza (H5N1). The full study is available online.



Homeland Security

Blueprint for a Secure Cyber Future

[The Blueprint](#) describes two areas of action: protecting our critical information infrastructure today, and building a stronger cyber ecosystem for tomorrow. The Blueprint is designed to protect our most vital systems and assets and, over time, drive fundamental change in the way people and devices work together to secure cyberspace. The integration of privacy and civil liberties protections into the Department of Homeland Security's cybersecurity activities is fundamental to safeguarding and securing cyberspace.

Michigan-Regional News

USDA Awards \$10.4 Million in Food Safety Grants

Associated Press, 12/08/2011

The U.S. Department of Agriculture said Wednesday it had [awarded 17 grants](#) totaling \$10.4 million for university research projects designed to boost food safety at a time when millions of Americans get food-borne illnesses each year. A \$1.8 million grant to Michigan State University will support the project designed to develop the best possible packaging systems for fresh-cut produce and detect practices that increase the risk of contamination.

Civil Air Patrol's Role in Medical Countermeasures Distribution in Michigan

The Michigan Department of Community Health has published an [article](#) in the Journal of Biosecurity and Bioterrorism: Biodefense Strategy, Practice, and Science featuring its partnership with the Civil Air Patrol (CAP) to distribute emergency medical countermeasures. Following multiple successful exercises, the Department's Office of Public Health Preparedness requested the assistance of the CAP to deliver antivirals during the 2009 Novel H1N1 Pandemic Influenza to the health departments and Medical Coordination Center in the Upper Peninsula. Due to Michigan's unique geographical challenges and months of inclement weather, the CAP proves to be a valuable and reliable mechanism for delivering assets when ground transportation is delayed or unavailable.



Region 5 Uses a Strategic Planning Model to Map Future Activities

The 5th District Medical Response Coalition (5DRMC) was formed as a means to support and develop emergency preparedness within Michigan's 5th District. Its diverse membership, which meets monthly, includes representatives from hospitals and other healthcare-related entities, medical control authorities, emergency management, and public health. As part of its ten year anniversary, the Coalition's Executive Board sought ways to ensure that the Coalition remained relevant and useful to its membership. Taking advantage of current cross-cutting activities and collaborative efforts, the Board made a commitment to go beyond simple project collaboration and move to a process of integrated strategic planning. Over

the last six months, members of the 5th District Medical Response Coalition and the Region's Homeland Security Planning Board have worked to align strategies and improve efficiencies of effort on various projects.

Strategic planning has been an effective tool for planning boards across the region for many years. The 5th District Homeland Security Planning Board began the process in 2009 utilizing "worst case" event scenarios to provide backdrop and direction. The 5th District's Medical Reserve Corps developed a strategic plan in 2010, utilizing a more straightforward business model to achieve their product. Following in the spring of 2011, the 5DRMC Board elected to implement a strategic planning activity that would align their efforts with other regional entities.

Taking advantage of partnerships already in place, the medical coalition was able to engage similar strategic planning resources that were used by the region's Homeland Security Board. The region's emergency managers, as well as many of its planners, participate actively in monthly coalition meetings, and were able to lend assistance. On an ongoing basis, the medical coalition benefits from the assistance of a project coordinator, funded by the regional Homeland Security planning board.



The result of the medical response coalition's planning process was a unique strategic plan that is guiding the coalition through the next phase of its activities. Four areas have been identified as priority areas for the coalition membership. They include information sharing and best practices; compliance and standards; training and exercising; and resource coordination and sharing.

On a regular basis, members of the coalition are tasked to further develop major portions of the document. Deliverables are compiled and are being revised as needed to form ongoing objectives, goals and tasks that actuate the body of the plan. Updates to the plan will be delivered to the Healthcare Planning Executive Board on a regular basis, with quarterly progress reports to the entire coalition. A plan is also in place for an annual review of objectives. The strategic plan will enable the coalition to continue its forward momentum and provide a framework for the implementation of future healthcare preparedness activities.

National News

CERT Volunteers Active in Community Service

The December 2011 CERT Newsletter showcases CERT members making an impact in their communities by providing help whenever and wherever needed. CERT members [assist communities](#) who suffer devastating damage, as well as assisting with non-disaster public safety efforts, such as providing victims for hospital emergency drills, or helping with crime-fighting and emergency preparedness initiatives.

First U.S. Cell-based Flu Vaccine Plant Set for Dedication

The first U.S. facility to use a faster and more flexible technology to make influenza vaccine was dedicated recently, as part of an initiative that could provide vaccine supplies sooner in an influenza pandemic. The plant in Holly Springs, N.C., can create vaccine using cultured animal cells instead of the conventional process of using fertilized eggs. The facility is a public-private partnership of the U.S. Department of Health and Human Services, and Novartis Vaccines and Diagnostics, Inc. of Cambridge, Mass. This partnership will be maintained under contract for at least 25 years.

Quick Response Helps Put Alabama on the Road to Recovery

Staff from Emergency Management interviewed Alabama Governor Robert Bentley in this [article](#) on the response to the 50 tornadoes that hit the state on April 27, 2011.

Resolve to be Ready in 2012

As 2011 - one of the most active years for disasters in recent history - comes to a close and Americans get ready to ring in a new year, the Federal Emergency Management Agency is encouraging all Americans to Resolve to be Ready in the by making a new year's resolution to be prepared for emergencies.

As a recent report by the National Climatic Data Center highlights, 2011 has seen more billion-dollar natural disasters than any year on record. This year alone, the U.S. experienced its first hurricane landfall since 2008, the most deadly series of tornadoes since the 1950s, significant earthquakes and severe flooding - hazards that impacted every region of the country. All of these events have served as important reminders that disasters can strike anytime, anywhere, and being prepared is one of the most effective things we can do to protect our homes, businesses and loved ones.



Today, FEMA kicked off its annual campaign, Resolve to be Ready in 2012, which urges Americans to make preparedness a priority during the holiday season by making a new year's resolution to be ready for disasters or by thinking about preparedness tools for last minute gift ideas.

"One of the most important lessons we can take away from this year is that disasters can impact all of us, no matter what part of the country we live in," said FEMA Administrator Craig Fugate. "While we can't control where or when they might hit, we can take steps in advance to prepare for them - efforts that can go a long way toward protecting our families, homes and business. Resolving to be Ready in 2012 could be the

most important pledge you make this year."

By making a resolution to take a few simple steps in advance, Americans can minimize the impact of an emergency on their families, homes or businesses. To take the pledge, visit www.ready.gov/resolve or www.listo.gov, which includes free information, checklists, and guidelines about how to put together a kit, make a plan, and stay informed.

Resolve to be Ready in 2012 is a nationwide effort to increase awareness and encourage individuals, families, businesses, and communities to take action and prepare for emergencies in the New Year. This effort is led by FEMA's Ready Campaign in partnership with Citizen Corps and The Advertising Council. For more information, visit Ready.gov and CitizenCorps.gov or follow the campaign on Twitter using the hashtags #ready2012 and #resolve.

FEMA's mission is to support our citizens and first responders to ensure that as a nation we work together to build, sustain, and improve our capability to prepare for, protect against, respond to, recover from, and mitigate all hazards.

International News

New Clinical Research Consortium to Tackle Pandemic Threats



This week the International Severe Acute Respiratory Infection Consortium (ISARIC), a collaboration of the clinical research community was [launched](#). The consortium will enable hospital-based clinical research networks to quickly respond to rapidly emerging infectious diseases through data and sample sharing and open-access protocols.

Tools & Resources

New Public Service Announcements Available

Founded by local and state public health and safety agencies ECHO (Emergency and Communication Health Outreach) Minnesota is a collaborative project designed to address the growing health, safety and emergency information needs of Minnesota's rapidly expanding limited English speaking communities. New preparedness public service announcements, available in multiple languages, are available on the ECHO Minnesota website.

Additionally, DVD copies can be requested by contacting olson@echominnesota.org.

- [Shelter In Place](#) (7 languages)
- [Mass Evacuation](#) (7 languages)
- [Extreme Heat](#) (4 languages)
- [Emergency Sirens](#) (4 languages)

National Preparedness System

[This document](#) provides a description of the National Preparedness System's components and how they interact to build, sustain, and deliver the core capabilities in order to achieve the National Preparedness Goal. These components help us understand risk, inform current and future budget year planning and decisions, inform resource allocation plans, and aid in understanding the progress of the Nation. The National Preparedness System's strength relies on ensuring the whole community has the opportunity to contribute to its implementation to achieve the goal of a secure and resilient Nation.

Emergency Multilingual Phrasebook

The Emergency [Multilingual phrasebook](#), produced and updated by the British Red Cross Society with advice and funding from the Department of Health and endorsed by the British Association for Emergency Medicine (BAEM) is translated into 36 languages. It covers the most common medical questions and terms to help first contact staff communicate with patients who do not speak English and make an initial assessment while an interpreter is contacted. The languages covered are: Albanian, Amharic, Arabic, Bengali, Bosnian-Bosanski, Chinese, Czech, English, Farsi, French, German, Greek, Gujarati, Hindi, Hungarian, Italian, Japanese, Korean, Kurdish, Lingala, Macedonian, Pashto, Polish, Portuguese, Punjabi, Romanian, Russian, Slovak, Somali, Spanish, Swahili, Tamil, Turkish, Ukrainian, Urdu, Vietnamese, and Welsh.

The Emergency Management Assistance Compact (EMAC) Preparedness Guide and Deployment Tips for State, Local and Tribal Public Health and Medical Personnel

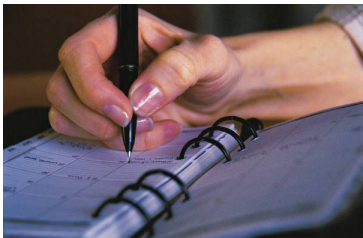
EMAC is a national interstate mutual aid agreement that allows states to share resources across state lines during emergencies and disasters. The compact addresses the critical issues of liability, workers compensation, reimbursement and licensure in advance of the disaster. Developed in a collaborative effort by the National Emergency Management Association (NEMA), with

funding provided through the Centers for Disease Control and Prevention (CDC) and, in cooperation with the Association of State and Territorial Health Officials (ASTHO) and the National Association of County and City Health Officials (NACCHO), the [Preparedness Guide and Deployment Tips](#) document is intended to provide guidance and recommendations to state, local and tribal public health and medical professionals providing or requesting mutual aid assistance between states during a Governor declared state of emergency or disaster.

Training & Events

Integrated Public Alert and Warning System Online Training Course

The FEMA Integrated Public Alert and Warning System (IPAWS) Office and FEMA's Emergency Management Institute created a [course](#) that provides alert and warning training. This free course, IS-247 is now available online. Regional, state and local alerting authorities must successfully complete this course prior to being authorized to use IPAWS OPEN to send alerts via EAS and cell phones.



Readiness and Resilience Training Materials for Communities

The American Medical Association Center for Public Health Preparedness and Disaster Medicine has developed a [training course](#), entitled Enhancing Personal Readiness and Resilience for Radiation Disasters, with accompanying Facilitator's Guide, Evaluation Form, and Citizens Guide. These resources seek to empower individuals by providing the information and skills they need to protect their health and safety in a radiation event.

Archived Webinar: Public Health Accreditation & Competency Based Learning

During this [one hour webinar](#), the linkages between Public Health Accreditation, the Council on Linkages Public Health Competencies, and the TRAIN learning management system Self Assessment function will be discussed and demonstrated.

Region 2 South Hosts Third Basic Disaster Life Support (BDLS) Course January 5, 2012, 11:30am-5:00pm Wayne County Environmental Health Building 5454 Venoy Road in Wayne, Michigan

BDLS is a comprehensive, nationally-standardized family of all-hazards training programs developed by the National Disaster Life Support (NDLS) consortium of academic, state and federal centers. This six-hour didactic course is designed to develop commonality of approach and language and to improve the care and coordination of response during WMD disasters and public health emergencies. The curriculum includes an overview of the "D-I-S-A-S-T-E-R" paradigm, injuries and responses associated with different types of disasters, an overview of the public health system and the psychosocial aspects of disasters. Registration is being coordinated by Region 2 South through the regional training SharePoint website at <http://portal.2south.org>. Additional information will be posted on the Region 2 South website in the Education Section.

Supporting Business Continuity during a Foreign Animal Disease Outbreak: Secure Food Supply Plans and Information Management January 6, 2012, 11:00am-12N

[This presentation](#) will provide an overview of the planning activities for business continuity in the event of a foreign animal disease outbreak, including the Secure Egg, Turkey, Milk, and Pork Supply projects. In addition, progress on

designing an information management system to enhance decision making during an outbreak will be summarized. The project received funding support from the United States Department of Agriculture (USDA) and the Department of Homeland Security (DHS) through the National Center for Foreign Animal and Zoonotic Disease Defense, a Department of Homeland Security Science and Technology Center of Excellence, and the Center for Food Safety and Public Health. Click here to register.

Webinar: Implementing Evidence-Based Practice: A European Perspective on Culture and Context

January 25, 2012 (9:00 a.m. PST)

Deborah Gbate, PhD, Colebrooke Centre for Evidence and Implementation, London, UK will explore cultural and contextual considerations that may apply when implementing evidence-based and informed practices throughout the world. While often originating in North America, many such practices are spreading elsewhere. Drawing on examples from the UK, Ireland, and Scandinavia, Dr. Gbate reflects on how variations in culture and in system/service-provider contexts may affect success in implementing evidence-based practice.

Psychological First Aid Course

March 22, 2012, 8am-4:30pm

Saginaw Valley State University

Recommended as the standard acute Behavioral Health Intervention by CDC, World Health Organization, SAMHSA, the National Institute for Mental Health and many other professional organizations Psychological First Aid is aimed at reducing initial post-traumatic distress, and supporting short and long-term functioning following mass disaster events. To register visit: <http://www.region3hpn.org/> If you need assistance with registration call Region 3 Healthcare Coalition: Phone: 989-758-3713.

Public Health Informatics Certificate Training Program

Application Deadline March 15, 2012

The Johns Hopkins Bloomberg School of Public Health is accepting applications for a post-Baccalaureate certificate program in Public Health Informatics. The program is to offer training in methods and concepts of health informatics and health information technology for application to public health. It is designed for current and future public health professionals who wish to develop expertise or specialization in this area. Courses for this program are available completely online. Tuition subsidies available: public health workers in the community are encouraged to apply.

*From everyone at OPHP,
Have a safe and happy
holiday season!*



Mailing Address:

Office of Public Health Preparedness

Capitol View Building - 201 Townsend Street - Lansing, MI 48913

(517) 335-8150 — <http://www.michigan.gov/ophp>



This publication is supported by Cooperative Agreement Number 5U90/TP517018-09 from the Centers for Disease Control and Prevention (CDC). Its contents are solely the responsibility of the authors and do not necessarily represent the official views of CDC.