Long Overdue: Environmental Health and Public Health Emergency Preparedness Collide

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Introduction
For those of you who regularly read my column, you will immediately recognize the profound importance of Dr. Funk’s well-written guest editorial below. The Public Health Emergency Preparedness (PHEP) cooperative agreement is the 800-pound gorilla that drives emergency preparedness capabilities across the U.S. Environmental health is explicitly called out in the new PHEP cooperative agreement, and I am delighted. At the same time, Dr. Funk concludes her column with the caveat, “some have advocated for a separate environmental health capability.” That “some” is me. And I’m still working on it.


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Increasing environmental health activities were identified as a priority for the new Public Health Emergency Preparedness (PHEP) cooperative agreement (CDC-RFA-TP17-1701). The purpose of this funding is to strengthen and enhance the capabilities of state, local, and territorial public health and healthcare systems to respond effectively (i.e., mitigate the loss of life and reduce the threats to the community’s health and safety) to evolving threats and other emergencies within the U.S. and its territories and freely associated states. The 2017–2022 funding is anticipated to be awarded July 1, 2017.

Highlights of the environmental health activities are as follows. Under the Characterizing Populations At-Risk section, grantees can now conduct a Community Assessment for Public Health Emergency Response (CASPER) with their funding in addition to attending CASPER training. Grantees may use PHEP funds to support environmental public health tracking data to identify populations at risk for natural, chemical, and radiological events. To identify the at-risk populations, they are encouraged to use the Agency for Toxic Substances and Disease Registry’s (ATSDR) Social Vulnerability Index. These all provide more flexibility for grantees to identify populations at risk for natural, chemical, and radiological events in addition to biological events.

In the Share Situational Awareness Across the Healthcare and Public Health Systems section, grantees are required to develop informatics systems to more rapidly share these data between healthcare systems and public health. This system is something that the National Center for Environmental Health (NCEH) has been working on for years to improve reporting after disasters. Successes have included developing consensus case definitions and standards for certifying disaster-related deaths and developing guidelines and best practices for consistent cause of death reporting using electronic death registration systems.

The Conduct Epidemiological Surveillance Investigation section adds guidance to implement processes for using poison control center data for surveillance. Poison control centers have data that can be particularly helpful in 1) providing situational awareness during a known public health threat, 2) identifying an emerging public health threat, 3) identifying unmet public health communication needs following a public health threat, and 4) providing surveillance for specific exposures or illnesses of concern to health departments. This section continues to recommend disaster epidemiology training in the following: Rapid Response Registry, Emergency Responder Health Monitoring and Surveillance, and Assessment of Chemical Exposures Program. These important programs and trainings have been developed by NCEH/ATSDR and the National Institute for Occupational Safety and Health over the years.

Under the Conduct Laboratory Testing section, the Laboratory Response Network for Chemical Threats program continues to remain an important part of the PHEP program. This program continues to work...
through the refreshing of equipment for laboratories in the network.

The next step is to revise the Public Health Preparedness Capabilities: National Standards for State and Local Planning document. Some have advocated for a separate environmental health capability, but instead we are working to strengthen the language about environmental health in a majority of the capabilities, which provides an overall larger environmental health presence throughout the document.

All of these improvements are positive steps toward increasing environmental health activities throughout state, local, and territorial public health departments. NCEH and ATSDR stand ready to support jurisdictions as they continue to develop their public health emergency preparedness programs.

For More Information

- National Center for Environmental Health’s (NCEH) Community Assessment for Public Health Emergency Response: www.cdc.gov/nceh/hsb/disaster/casper
- NCEH’s National Environmental Public Health Tracking Network: https://ephtracking.cdc.gov/showHome.action
- Agency for Toxic Substances and Disease Registry’s (ATSDR) Social Vulnerability Index: https://svi.cdc.gov
- Disaster Epi: Health Study Branch Staff’s Field Experience Boosts National Data Reporting: www.cdc.gov/nceh/hsb/success_stories/experience_leads.htm
- National Institute for Occupational Safety and Health’s Emergency Responder Health Monitoring and Surveillance: www.cdc.gov/niosh/topics/erhms/default.html
- ATSDR’s Assessment of Chemical Exposures Program: www.atsdr.cdc.gov/ntsip/ace.html
- NCEH’s Laboratory Response Network for Chemical Threats: https://emergency.cdc.gov/lrn/chemical.asp

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