

Public Health Emergency Preparedness (PHEP) Program

Protecting America's health, safety, and security to save lives.



The PHEP Program allows our nation to invest in the people, plans, training, and equipment needed to effectively respond to emerging public health threats.

PHEP-Built Capability	Return on PHEP Investment
Staff Capacity	Trained first responders who reduce health effects of death and illnesses during public health emergencies
Public Health Emergency Management Infrastructure	Standardized, scalable response systems that can effectively manage public health responses
Rapid Threat Detection	Quick detection of life-threatening agents, viruses, and other pathogens
Supplies & Logistics	Delivery of life-saving medicines and medical supplies during an emergency
Coordinated Responses	Maximizes effectiveness of responses, use of resources, and the number of lives saved

A Lifesaving Investment

The PHEP Program, managed by the Division of State and Local Readiness (DSLRL) within the Centers for Disease Control and Prevention, allows our nation to invest in the critical public health resources that contribute to our overall national security. State and local public health departments are uniquely positioned as the first line of defense - as responders, outbreak investigators, and agents of recovery. Investing in public health preparedness before an emergency occurs saves lives.

The Challenge

Since 9/11, critical federal preparedness funding has declined by 42%. Cuts to PHEP Program funding have forced PHEP Program awardees to cut specialized positions, staff trainings and exercises, and equipment. A lack of continued, stable, and adequate funding directly diminishes state and local health department capacity to prepare for and respond to emerging threats in the communities they serve.

Improvements in Public Health Preparedness Since 9/11

PHEP Awardees Who:	Then	Now
Can mobilize staff during an emergency	20%	98%
Have an Incident Command System with pre-assigned roles in place	5%	100%
Include collaboration with healthcare agencies in their preparedness plans	8%	92%
Have sufficient storage and distribution capacity for critical medicines and supplies	0%	98%

The Opportunity

Now is the time to renew the federal commitment to the state and local public health departments responsible for safeguarding the public's health.

PHEP Program funding must be maintained to continue advancing our nation's health security.

Stories from the Field

August 2016 Flood

Situation

On August 11, 2016, prolonged rainfall in southern parts of Louisiana resulted in catastrophic flooding that submerged thousands of houses and businesses. Many rivers and waterways reached record levels, and rainfall exceeded 20 inches in multiple parishes. Many areas in the state that had never flooded before were severely affected.



Intervention

The Louisiana PHEP Program provided support to this response by deploying Medical Strike Teams consisting of medical and behavioral health personnel to deploy to General Shelters. Strike Teams performed medical assessments of evacuated residents to determine medical and behavioral health needs. Louisiana PHEP also coordinated the delivery of vaccinations to first responders. During the event a Medical Special Needs Shelter was opened to care for medically fragile individuals. Additionally, the Louisiana PHEP assisted in the coordination of prescriptions refills in General Shelters by working with the Independent Pharmacy Association.

Impact

Through this united public health and medical effort, the state was able medically assess 1,731 general shelter residents with 119 total shelter visits. Over 7,800 prescriptions were filled and 1,316 tetanus vaccinations were given.

The PHEP Program in Action

Key responses that saved lives due to PHEP Program support:

- August 2017: Tropical Storm Harvey
- December 16, 2016: St. Joseph Water System
- August 12, 2016 – October 2016: Flooding
- March 8, 2016 – April 2016: Flood
- February 4, 2016 – Present: Zika Virus
- October 8, 2013 – January 2014: N. fowleri in water system
- October 4 – 6, 2013: Tropical Storm Karen
- June 13, 2013: Williams – Olefins Plan Explosion
- August 26 – September 2012: Hurricane Isaac

Critical Needs

The PHEP Program supports the following public health and safety functions that are jeopardized when funding is cut.



Biosurveillance

Accessibility to critical medical information and resources is required for mounting a public health response. Collaboration with public health laboratory and epidemiology ensures that resources inclusive of staff, equipment, staffing training, etc. is ready in the case of bio-threats and infection disease outbreaks. A reduction in funding would severely impact the state's ability to prepare for emerging threats.



Incident Management

In Louisiana, it is important to ensure ongoing readiness for disaster response. PHEP funding in this function has been utilized to ensure optimal EOC Readiness and to develop systems to track resources within the state through a shared platform. Resource tracking is an important component to response and helps to determine future response needs.



Community Resilience

Louisiana continues to improve state emergency preparedness planning to save lives and to minimize damage when disaster occurs. Resources provided by the PHEP Program are needed to bring communities back to normal following a disaster. For many communities, recovery is still years in the making.