Emergency Preparedness, Response, and Communicable Disease Surveillance

Tri-County Health Department

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Emergency Preparedness, Response, and Communicable Disease Surveillance

Division and Program Overview

The Emergency Preparedness, Response, and Communicable Disease Surveillance Division (EPRCDS) leads agency efforts to promote coordination, collaboration, and communication among all divisions within Tri-County Health Department (TCHD) to ensure that public health is an effective partner in preparedness, response, and recovery efforts.

EPRCDS also supports Elbert County Health and Human Services to ensure depth of service during incident response including communicable disease efforts.

Held to a high standard, EPRCDS undergoes rigorous federal and state assessments, tests response capabilities through exercises, and responds to real world incidents with a focus on continual improvement.

EPRCDS supports national initiatives through participation on the Centers for Disease Control and Prevention (CDC) Office of Public Health Preparedness and Response (OPHPR) Board of Scientific Counselors and the National Association of County and City Health Officials (NACCHO) Preparedness Policy Advisory Group (PPAG), which is NACCHO’s overarching preparedness workgroup, focusing on national preparedness policy, planning, and implementation issues.
The Communicable Disease Epidemiology Program

The program conducts surveillance, investigation, intervention, prevention and epidemiological studies of communicable disease. The six-member team of Communicable Disease Epidemiologists respond to reports of communicable disease cases and outbreaks for foodborne, waterborne, vaccine preventable and zoonotic diseases in Adams, Arapahoe and Douglas Counties. The epidemiologists monitor trends regarding the incidence of communicable disease and prepare for emerging infectious diseases.

In 2017, the program was recognized by NACCHO with a Model Practice Award for the Rabies Prevention Collaborative: A Community-Based Approach to Rabies Prevention. Staff members also presented at state and national conferences on the topics of 1) innovative analysis methods of a Salmonella outbreak and 2) a unique culturally-driven response to a mumps outbreak. Finally, in 2017, the quarterly disease control publication, Infectious Tidbits, was disseminated to share timely information with community partners.

In 2017, not including animal bites, TCHD investigated 1,031 cases of reportable conditions. This represents a 5% increase in diseases investigated as compared to 2016.

In 2017, TCHD investigated 111 outbreaks representing a 40% increase from the number of outbreaks investigated in 2016 (n=79). The graph shows outbreaks investigated during 2014-2017 and the etiology identified. Influenza and gastrointestinal bugs, including norovirus, account for the majority of the outbreaks investigated across all years. Outbreaks with etiology of Other in 2017 include 2 Salmonella, 1 scombroid toxin and 1 Legionella.
The National Syndromic Surveillance Program

The National Syndromic Surveillance Program in Colorado’s North Central Region (NSSP CO-NCR), formerly called BioSense, is a collaboration between Boulder County Public Health, Denver Public Health, Jefferson County Public Health, and TCHD for the timely exchange of syndromic data for situational awareness and enhanced response to hazardous events, substance overdose, and disease outbreaks. In 2017, NSSP CO-NCR published three quarterly Syndromic Surveillance newsletters that provided information on program updates and data utilization. Additional information regarding Syndromic Surveillance efforts can be found on the TCHD website.

Emergency Preparedness and Response

The Emergency Preparedness and Response (EPR) Program is responsible for maintaining the Public Health Emergency Operations Plan and all associated systems and documentation related to how TCHD, as an agency, responds to any incident impacting Adams, Arapahoe, and Douglas Counties. This program is also responsible for maintaining the agency’s Continuity of Operations Plan, detailing how the agency will continue to protect the public’s health while it is impacted by an incident with a health and medical component.

In 2017, the EPR program received re-recognition and national exemplary practice designation as part of Project Public Health Ready (PPHR) from the National Association of County and City Health Officials (NACCHO). Additionally, TCHD participated in a state-wide medical countermeasures distribution and dispensing exercise.

Internally, TCHD conducted staff notification and incident management team activation. In the following days, TCHD coordinated with Emergency Management partners to test three material distribution sites, hosted emergency preparedness training activities and obtained critical feedback from community partners with access and functional needs regarding points of dispensing (POD) operations. Findings from this exercise are being used to further improve planning and response efforts within the TCHD jurisdiction and across Colorado.

Safety and Security

In 2017, TCHD hired a full-time employee dedicated to developing, coordinating, and consistently applying a standard internal Safety and Security Program within the TCHD organization.

This new position was created to ensure that TCHD meets recommended best practices for safety and security planning and training along with conducting regular safety drills at the 11 TCHD office locations to ensure the safety of staff and the communities served by TCHD.
Cross-Divisional Workgroups

Incident Management

The TCHD Public Health Incident Management Team (PHIMT) creates depth in TCHD’s ability to plan for, respond to and recover from incidents. Over 45 TCHD staff members are trained in command and general staff responsibilities to fill vital incident response positions. They are tasked with setting the framework, crafting the tactics, and supporting the response to any incident above day-to-day operations that impacts Adams, Arapahoe, Douglas, and Elbert Counties.

The EPR Program manages a quarterly training cycle for the PHIMT and includes full team and position specific trainings as well as an exercise during each cycle. The team was activated in response to four incidents and conducted pre-activation planning activities in response to one incident in 2017.

Disease Intervention

Disease Intervention Field Team (DIFT) is a cross-disciplinary team comprised of TCHD Epidemiologists, Environmental Health Specialists, Nurses and Emergency Preparedness and Response Planners established to provide surge capacity in response to large outbreaks or disease-related incidents.

The team consists of four teams (task forces) of six staff, each led by a Communicable Disease Epidemiologist. Each of the four teams are activated three times per year to practice interviewing skills. The DIFT was formally activated in January 2017 to assist with the contact investigation of a measles case requiring 163 people to be contacted and interviewed.
Medical Reserve Corps (MRC) Challenge Award

In 2017, the Rocky Mountain Medical Reserve Corps (MRC) of Colorado received a NACCHO MRC Challenge Award for $13,000. The Challenge Award focuses on innovation in areas aligned with national health initiatives where local MRC units can address community needs.

A major MRC focus area is Building and Sustaining Community Resiliency and the goal of each activity in support of the challenge award is to provide emergency preparedness training to two distinct communities. The Rocky Mountain MRC chose to provide emergency preparedness training and kit building courses to both the deaf community, using an instructor fluent in American Sign Language, and to older adults living independently.

The emergency preparedness training course builds the confidence and skills of individuals with access and functional needs and their family/caregivers to be prepared for disasters in Colorado and provide tools and resources to enhance personal responsibility when disasters occur where they live, work, and play.

Hazard Vulnerability Assessment

In 2017, EPRCDS coordinated facility specific Hazard Vulnerability Analyses (HVA) across all TCHD office locations. An HVA identifies specific hazards that pose the greatest threat to each facility to provide a risk percentage that can inform future safety and security plans as well as preparedness initiatives.

The facility specific HVAs identified multiple areas for improvement in facility safety during an incident, evacuation processes, and office security.
Budget Overview

Division Revenue
$1,545,544

Federal Pass Through Funds
$1,231,992
79.7%

General Funds
$312,361
20.2%

Grants
$1,191
0.1%

Division Expenses
$1,545,544

Salary & Benefits
$1,054,331
68.2%

Indirect
$333,839
21.6%

Operating Expenses
$104,353
6.8%

Capital Equipment
$31,551
2.0%

Contract Services
$21,470
1.4%