

## STATE AND LOCAL READINESS

### WHAT IS THE PUBLIC HEALTH ISSUE?

The prospect of terrorists unleashing biological, chemical, radiological, or conventional weapons is a terrifying one. To protect the health of Americans, a fully prepared public health system must be in place at the state and local levels—where public health begins and ends. As the lead federal agency for public health, CDC assists state and local health departments in preparations to respond to terrorism, infectious disease outbreaks, and other public health emergencies. A well-planned, rapid, and effective response is critical to saving lives.

Across the country, state and local health officials are reconsidering the capabilities of their health departments to respond to a biological, chemical, radiological, or conventional weapons terrorism incident. Traditionally, the responsibilities of the state health departments have been disease surveillance and management. Health departments now are expanding their roles to include responding effectively to an intentional release of a terrorist agent into an unsuspecting population.

### WHAT HAS CDC ACCOMPLISHED?

Since 1999, CDC has provided funding and support for the State and Local Preparedness Cooperative Agreement Program. The purpose of this program is to upgrade state and local public health jurisdictions' preparedness for and response to terrorism, infectious disease outbreaks, and other public health threats and emergencies. These cooperative agreements comprise the largest public health program outside of Medicare.

#### *Examples of Program in Action*

Since its inception, planning activities for the State and Local Preparedness Program have spread from 5 states or localities to the current 50 states, 4 localities, and 8 U.S. territories. Specific accomplishments achieved by the state and local jurisdictions include

- 100% of participants have identified a state-wide Director of Bioterrorism.
- 98% have established a Bioterrorism Advisory Committee.
- 91% can initiate a field investigation within 6 hours of an urgent disease report from all parts of a jurisdiction on a 24/7 basis.
- 100% established a timeline for a state-wide plan.
- 95% indicate a 24/7 system is in place to activate the response plans.
- 82% have systems established to rapidly detect a terrorist event through mandatory disease reporting.

CDC also initiated the current Public Health Preparedness Project. Working with subject matter experts within CDC and across public health, this project will define public health preparedness indicators. These indicators will improve strategic planning and management of CDC's cooperative agreements. By providing an evaluation framework, the indicators will also link preparedness levels to measurement of progress toward the long-term goals and measures of CDC's terrorism program.

### WHAT ARE THE NEXT STEPS?

Because a chemical, biological, radiological or nuclear (CBRN) attack will most likely occur locally, disease-tracking systems at state and local health agencies must be ready to detect unusual patterns of disease and injury, and epidemiologists at these agencies must have expertise and resources for responding to reports of rare, unusual, or unexplained illnesses. CDC is also developing new methods to rapidly detect, evaluate, and report suspicious health events that might indicate natural or intentional CBRN releases for all state health departments and selected major metropolitan cities and territories.