staying at ZERO

CDC's Response to the 2014 Ebola Epidemic

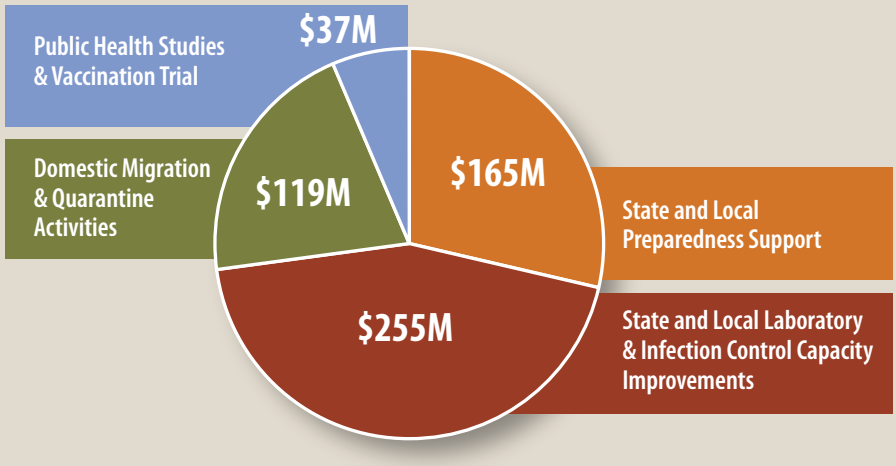
CDC's Domestic Ebola Response

Funding support has made the United States better prepared to respond to Ebola and other infectious diseases.

CDC has:

- Enhanced state and local preparedness and local laboratory capacity
- Improved state and local infection control
- Enhanced communications to travelers and expanded entry screening
- Strengthened public health practice and research activities

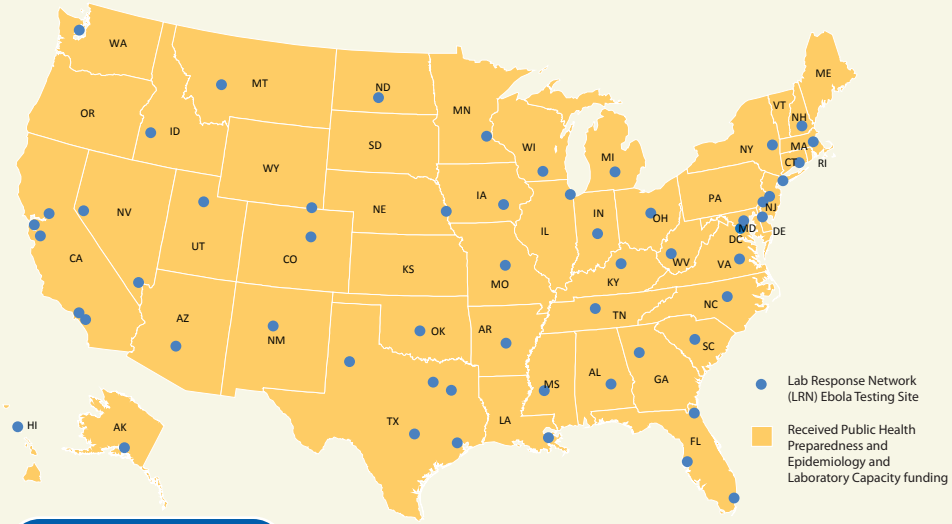
Spending and Awards



Laboratory Response Network (LRN)

The LRN is an integrated network of laboratories equipped to respond to emerging infectious diseases and public health emergencies

CDC provided technical assistance to 57 LRN labs, and collaborated with 10 companies and institutes to develop and validate the rapid Ebola diagnostic assays



Fast Facts

81
Hospitals received Rapid Ebola Preparedness (REP) visits to determine potential to serve as an Ebola treatment facility

61
Hospitals received on-site technical assistance for infection control & prevention

>920,000
Healthcare workers received online training for patient & personnel safety

>35,200
Travelers screened & referred to public health authorities for monitoring

>32,780
CARE (Check and Report Ebola) kits distributed to monitored travelers

EBOLA CARE KIT

>7,250
Vaccinated in STRIVE Ebola vaccine study so far

STRIVE

Department of Health and Human Services
Centers for Disease Control and Prevention

CS260007B

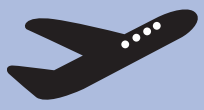
Domestic Funding Snapshot and Activities

State and Local Laboratory and Infection Control Capacity Improvements: $255M

- Expanded capacity for laboratory testing
  - Prior to the outbreak, testing could only be performed at 2 laboratories
  - Today, 57 LRN laboratories in 44 states are approved to test for Ebola, dramatically decreasing turnaround time for results – from 24 hours to less than 6
- Organized CDC Ebola Response Team (CERT), which can be deployed within hours to support U.S. hospitals or clinics when a patient is highly suspected or confirmed to have Ebola
- Designed and implemented a tiered healthcare system approach and implemented tools to assess and improve hospital facility readiness
- Awarded $11 million to 6 new academic institutions through the Prevention Epicenters program to conduct research to prevent healthcare-associated infections and transmission of pathogens

State and Local Preparedness Support: $165M

- Provided supplemental funding for 62 Public Health Emergency Preparedness cooperative agreements
  - Strengthened preparedness capacity at the state and local level across the nation
  - Developed protocols with state and local health departments for monitoring returned travelers and determining public health actions as needed (controlled movement, etc.)
  - Allowed state and local health departments to actively monitor >26,000 travelers returning from Ebola affected countries for 21-days, for a total of more than half a million monitored days
  - Created risk communication messages and notification systems to share information
- Increased quantities of personal protective equipment in the Strategic National Stockpile to protect healthcare teams providing care to patients with Ebola at U.S. healthcare facilities



Domestic and Migration Quarantine Activities: $119M

- Established measures to screen and detect Ebola in travelers from countries with widespread transmission, establishing a national system that ensures nearly 100% of these travelers are in contact with public health authorities
- Enhanced entry screening of travelers from countries with Ebola outbreaks in 5 major U.S. airports: New York JFK, Newark International, Washington-Dulles, Chicago O'Hare, and Atlanta Hartsfield-Jackson
- Developed CARE (Check and Report Ebola) Kits for travelers. Kits include:
  - Information on Ebola signs and symptoms
  - Tools to check temperature
  - Contact information if symptoms develop

Public Health Studies and Vaccination Trial: $37M

- Supported critical Ebola laboratory studies on rapid Ebola diagnostic tests, sequencing of Ebola virus isolates, and assessing other medical countermeasures
- Funded the Sierra Leonne Trial to Introduce a Vaccine against Ebola (STRIVE)
  - Enrolled 8,680 participants and through November 14, 2015 have vaccinated >7,250
  - Completed data collection for a safety sub-study of ~400 participants
  - Completed enrollment and initial follow-up of blood draws in the immunogenicity sub-study (~500 participants)

www.cdc.gov/ebola