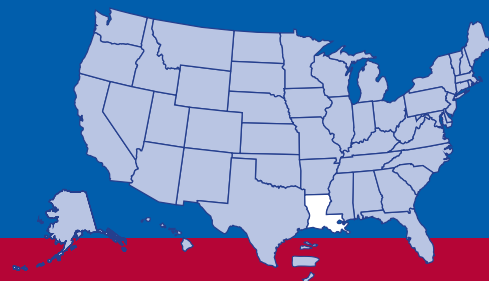# PUBLIC HEALTH EMERGENCY PREPAREDNESS COOPERATIVE AGREEMENT (PHEP) PROGRAM

LOUISIANA

PHEP Then

In response to the deadly events of September 11, 2001, and the subsequent anthrax attacks, Congress established a new program to help health departments across the nation prepare for emergencies. Since then CDC's **Public Health Emergency Preparedness (PHEP) program** has partnered with state, local, and territorial public health departments to prepare for, withstand, and recover from potentially devastating public health emergencies.

Every year since, the PHEP program has provided vital resources to ensure communities can effectively respond to infectious disease outbreaks, natural disasters, and chemical, biological, radiological, or nuclear events.

PHEP Now

In 2018, PHEP provided $620 million across public health departments to improve response readiness. Funds are also used to support epidemiologists (disease detectives), lab staff, planners, and other preparedness staff on the ground.

In the future, CDC will continue supporting PHEP recipients by sharing technical expertise, best practices, and lessons learned, along with tools and resources to identify and address gaps.

Learn More

For more information about the PHEP Program, visit **www.cdc.gov/cpr/map.htm**.

AT A GLANCE

In Louisiana

- **4.7 million residents**
- **45%** reside in Cities Readiness Initiative metropolitan statistical areas (CRI MSA). A federally funded program, CRI helps cities effectively respond to large-scale public health emergencies requiring life-saving medications and medical supplies.
- **1*** local public health departments

Frequent Public Health Emergencies
- Tropical Storms/Hurricanes
- Flooding
- Environmental Contamination
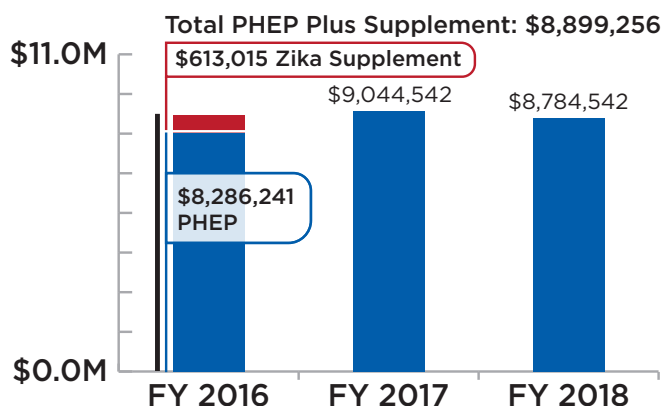
Key Emergency Operations Center Activations
- 2016: Flood
- 2017: Hurricane Harvey

*Health department is centralized at the state level. There is one independent health department located in Orleans parish.

PHEP funds programs and activities that build and strengthen the nation's preparedness for public health emergencies.

Preparedness and Response Funding Snapshot

FY 2018 PHEP $8,784,542
Base Plus Population $8,252,048
Cities Readiness Initiative $532,494
Level 1 Chemical Lab $—

Total PHEP Plus Supplement: $8,899,256

$613,015 Zika Supplement

$11.0M

$9,044,542

$8,784,542

$8,286,241 PHEP

$0.0M

FY 2016   FY 2017   FY 2018

Centers for Disease Control and Prevention
Center for Preparedness and Response

LOUISIANA

In Louisiana, PHEP supports emergency management training for local health department staff, ensuring that they can keep residents safe and connect them with health care providers in a natural disaster or other crisis. In 2017, Louisiana received 223 Hurricane Harvey evacuees, including 87 hospital patients, from neighboring Texas. Years of PHEP-sponsored trainings had prepared Louisiana's local health departments to handle Harvey's effects on their own communities, freeing the state health department to provide needed assistance to neighboring Texas. PHEP-funded employees staffed Louisiana shelters and rapidly found volunteer pediatricians to treat evacuated children. As a result, Texas residents remained safe and healthy while sheltering in Louisiana.

CDC identified 15 public health preparedness capabilities critical to public health preparedness.

2018 LOUISIANA TOP PHEP CAPABILITY INVESTMENTS

1. **Public Health Laboratory Testing**
2. **Public Health Surveillance & Epidemiologic Investigation**
3. **Medical Countermeasure Dispensing**
4. **Medical Materiel Management & Distribution**
5. **Community Preparedness**

For a complete list of all 15 public health preparedness capabilities, visit **https://www.cdc.gov/cpr/readiness/capabilities.htm**.

Medical Countermeasure Readiness: Ensuring that medicine and supplies get to those who need them most during an emergency.

KEY STRENGTH	KEY CHALLENGE
Real world events allow for practical application of state/local planning efforts	Limited staffing and difficulty maintaining operational readiness with fluid guidance

States, territories, and localities are required to develop emergency plans covering children, pregnant women, and other vulnerable populations.

Population	2017
Households included children	38%
Respondents who know they are pregnant	4%
Respondents 65 or older	19%
Respondents who reported having diabetes	12%
Respondents who reported a condition that limits activities	26%
Respondents who reported a health problem that required the use of specialized equipment	10%

PHEP funds support staff who have expertise in many different areas.

PHEP-Funded Staff	2017
CDC Field Staff	2
Educators	1
Epidemiologists	12
Health Professionals	12
Laboratorians	6
Other Staff	30

LOUISIANA

In an emergency, it is critical that staff can meet quickly to plan for, lead, and manage a public health response. Public health staff serve as Incident Commanders, Public Information Officers, Planning Section Chiefs, Operations Section Chiefs, and other response roles.

Emergency Operations Coordination	2015	2016	2017
Number of minutes for public health staff with incident management lead roles to report for immediate duty	32	14	32

Timely and effective communication between lab and epidemiologic staff can reduce death and injuries in a public health emergency.

Public Health Laboratory Testing	2017
Results of communication drills between laboratory and epidemiological staff completed within 45 minutes	Drill 1: Completed drill in time Drill 2: Completed drill in time

Laboratory Response Network biological (LRN-B) and PulseNet labs rapidly identify and notify CDC of potential biological health threats to minimize disease outbreaks. CDC manages the LRN-B, a group of public health labs with testing capabilities to detect and confirm biological health threats. CDC also manages PulseNet, a national network of labs that analyzes and connects foodborne illness cases together to identify outbreak sources.

Current number of LRN-B public health labs: 1

Public Health Laboratory Testing: LRN-B	2015	2016	2017
Proportion of LRN-B proficiency tests passed	0 / 1	1 / 2	2 / 2

Public Health Laboratory Testing: PulseNet	2015	2016	2017
Percentage of *E. coli*-positive tests analyzed and uploaded into PulseNet national database within four working days	71% (target: 90%)	100% (target: 90%)	100% (target: 90%)
Percentage of *Listeria*-positive tests analyzed and uploaded into PulseNet national database within four working days	100% (target: 90%)	88% (target: 90%)	100% (target: 90%)

LRN chemical (LRN-C) labs rapidly identify exposures to toxic chemicals, aid diagnoses, and minimize further human exposures. CDC manages the LRN-C, a group of labs with testing capabilities to detect and confirm chemical health threats. LRN-C labs are designated as Level 1, 2, or 3, with Level 1 labs demonstrating the most advanced capabilities.

Current number and level of LRN-C Labs: 1 (Level 2)

Public Health Laboratory Testing: LRN-C	2015	2016	2017
Proportion of core chemical agent detection methods demonstrated by Level 1 or Level 2 labs	0 / 9	2 / 9	3 / 9
Number of additional chemical agent detection methods demonstrated by Level 1 or Level 2 labs	0	0	0
Result of LRN exercise to collect, package, and ship samples	Passed	Passed	Passed

For more information on
CDC's Public Health Emergency Preparedness Program, visit
www.cdc.gov/cpr/map.htm