






# 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

### Response to the Opioid Overdose Epidemic

#### Situation

New Hampshire has been heavily impacted by the opioid epidemic and had the third highest rate of overdose deaths from opioids in the United States in 2014. The state is using surveillance systems, personnel, and community infrastructure funded in part by PHEP to respond to the opioid overdose epidemic.

#### Intervention

A surveillance system partially funded by PHEP is used to track emergency department visits to identify the hardest hit communities. Naloxone kits, which contain an antidote to prevent death from opioid overdose, are distributed by the state health department using personnel and a community infrastructure funded in-part by PHEP.

#### Impact

Naloxone kits have been distributed to public health regions, community health centers, schools, municipal agencies, and other community partners in more than 70 communities across the state. More than 12,000 life-saving naloxone kits have been distributed to people and families affected by opioid addiction so far, ensuring that individuals in at-risk communities are ready to respond to an overdose and prevent deaths.



## The PHEP Program in Action

### Key responses that saved lives due to PHEP Program support:

- 2016-2017 Zika Virus
- 2015-2017 Opioid Overdose Epidemic
- 2015-2017 PFC Contaminated Drinking Water
- 2014-2015 Ebola Virus Disease
- 2013 Hepatitis A Cases at a Restaurant
- 2012 Hospital Hepatitis C Outbreak
- 2009-2010 H1N1 Influenza Pandemic
- 2009 Gastrointestinal Anthrax Case

## Critical Needs

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



#### Biosurveillance

Ongoing resources are required to ensure that public health personnel are regularly trained and exercised, and sufficient staff is available 24/7 to respond to bio-threat agents, high consequence pathogens (like Ebola and pandemic influenza) and other public health threats.



#### Countermeasures & Mitigation

Funding is required to support personnel, information systems, and exercises to assure readiness and continuously improve plans for distribution of medical countermeasures such as antibiotics and vaccine during an outbreak.



#### Incident Management

Ongoing resources are required to maintain a permanent state of readiness to ensure communities are ready to respond to any emergency. A reduction in funds will result in inability to maintain this state of readiness and impact our ability to quickly activate preparedness plans and mobilize our trained response staff.



#### Surge Management

The PHEP Program strengthens our ability to augment response staff resources with trained medical volunteers that aid residents during emergencies. Lifesaving response staff cannot function effectively without ongoing training and support.

*The PHEP Program* strengthens the ability of our nation's communities to prepare for, withstand, and recover from public health threats, *saving lives 24/7/365.*

[www.cdc.gov/phpr/readiness](http://www.cdc.gov/phpr/readiness)