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 (DSLR) 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 recipients 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.

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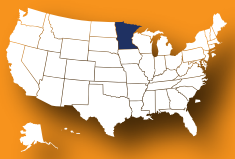
A Closer Look: State and Local Impact

MN



Stories from the Field

2017 Measles Outbreak

Situation

A decline in vaccination coverage among Minnesota's Somali-American community led to a measles outbreak during April–May 2017. As a result, over 80 people in and around Minneapolis were infected with measles.

Intervention

PHEP-funded epidemiologists investigated potential cases and worked to determine the severity of the cases, potential contacts, and vaccination needs. After a child in a local school became infected, potentially exposing many other children, the Minnesota Department of Health (MDOH) set up a PHEP-funded clinic to provide measles antibody injections to prevent illness. The MDOH used its dispensing training to set up the clinic in less than 24 hours and keep the antibody medications at the required cold temperature the entire time.

Impact

The MDOH worked with the local media to ensure factual and timely measles information reached the public. The resulting community dialogue helped dispel vaccine myths and supported a significant increase in vaccinations, further curtailing the outbreak.

The PHEP Program in Action

Key responses that saved lives due to PHEP program support:

- 2017 Measles Outbreak
- 2015 Bird Flu Outbreak
- 2014 Severe Storms, Flooding, & Mudslides
- 2013 Severe Winter Storm

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 lab personnel are regularly trained and exercised, and sufficient staff are available 24/7/365 to test for bio-threat agents, high consequence pathogens, and other public health threats.

Community Resilience

Without effective resources, re-openings of providers and health centers following a disaster will be delayed – putting the health of local residents at risk.

Countermeasures & Mitigation

Sustained funding is needed to support complex exercises to test and continuously improve public health preparedness plans.

Information Management

A reduction in funds will result in an inability to maintain a constant state of readiness and impact our ability to quickly activate and mobilize our trained response staff.

Incident Management

Maintaining a permanent state of readiness and surge capacity is essential to ensure communities are ready to respond to any emergency. A reduction in funds will impact our ability to quickly activate preparedness plans and mobilize our trained response staff.

Surge Management

Services that are available regardless of the size of an incident would not be available 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/coopagreement