



Public Health Volunteer Alerting

Fairfax County Health Department

2017 Mid-Atlantic Emergency Management Technology Summit

October 16, 2017

Objectives

- ✓ Review FCHD's recent tuberculosis (TB) case investigation
- ✓ Discuss how volunteers were rostered for TB Points-of-Testing (POTs)
- ✓ Demonstrate Everbridge "polling" alerts for rostering
- ✓ Allow participants to send their own polling alerts for a simulated POD



Medical Reserve Corps

- Housed within the Office of the Assistant Secretary for Preparedness & Response (ASPR)
- VAMRC is housed and managed by the Virginia Department of Health.

Mission: Engage volunteers to strengthen public health, emergency response and community resiliency.

- **982 Units (27 in VA!)**
- **192,508 Volunteers (>10,000 VA)**
- Fairfax MRC
 - **one of the oldest programs in the nation**
 - **582 Active and 146 Pending**
 - **Approximately 65% are non-medical volunteers**



Tuberculosis Investigation Overview

- Notified in late March 2017 of an individual with active pulmonary *M. tuberculosis* disease
- Index case taught at a Fairfax County Public Schools system (FCPS) middle school
- Air handling assessment and household contact interviews determined 100-125 individuals had some risk of exposure
- FCHD activated agency IMT for this response due to complexity and size
- Major tasks:
 - Epidemiologic investigation
 - Call center & public messaging
 - Point-of-testing clinic



When is the IMT Activated?

A disease outbreak

An emerging disease/threat

Large planned events

Any time workload threatens to outpace a unit/program's day-to-day capabilities

Any time a situation is likely to require significant planning and resources

Any time a situation is likely to last longer than a few days

Any time FCHD employees have been asked to support a County emergency response by providing 3 or more resources



What is an IMT?

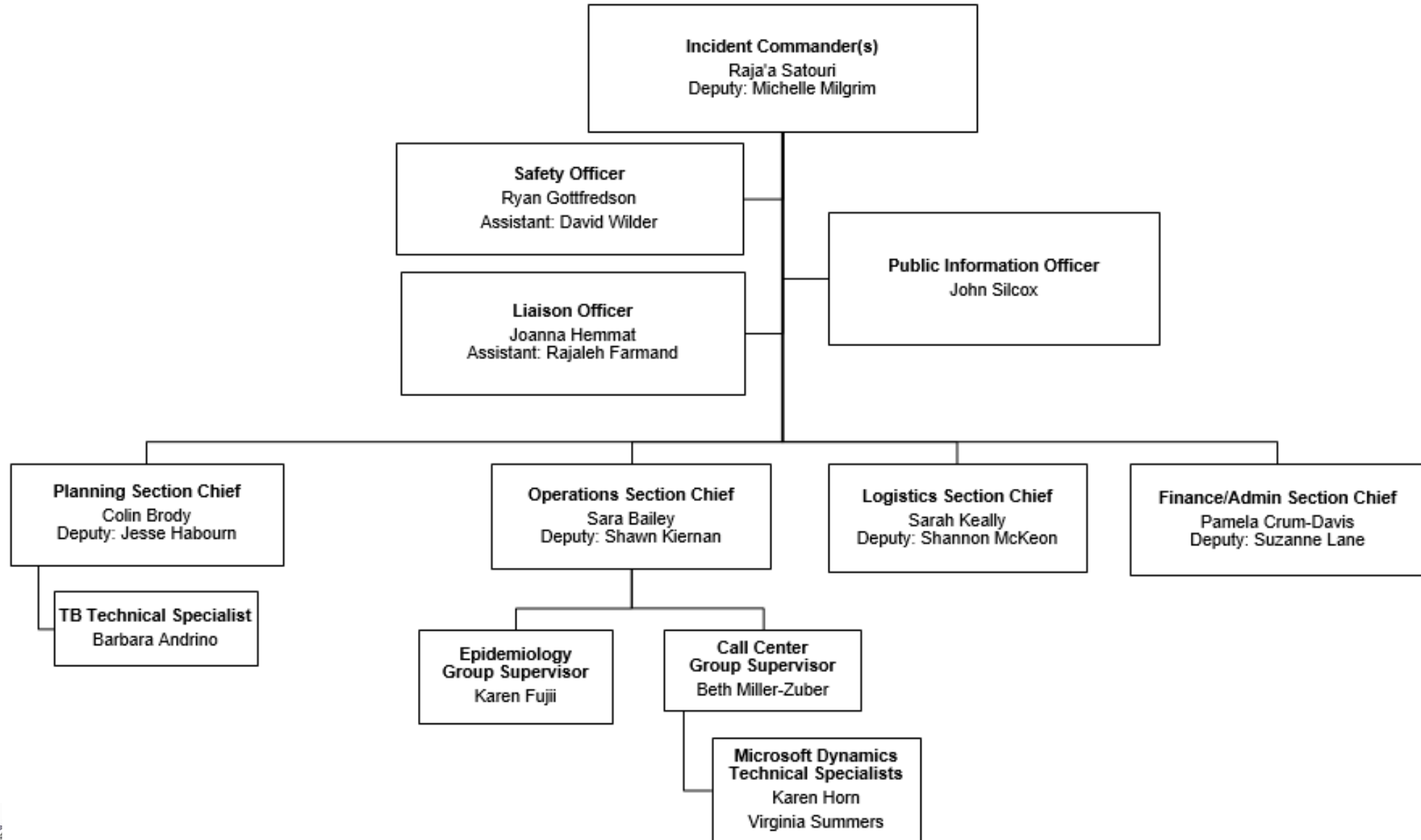
A self-contained team of specially trained Health Department employees immediately available to manage the response to public health emergencies in Fairfax County.

Operates using ICS
Composed of leadership positions organized by function
Operate on common team-based procedures
Available 24/7/365

We are a Type 5 IMT: Single agency, county level, agency/county-specific responses

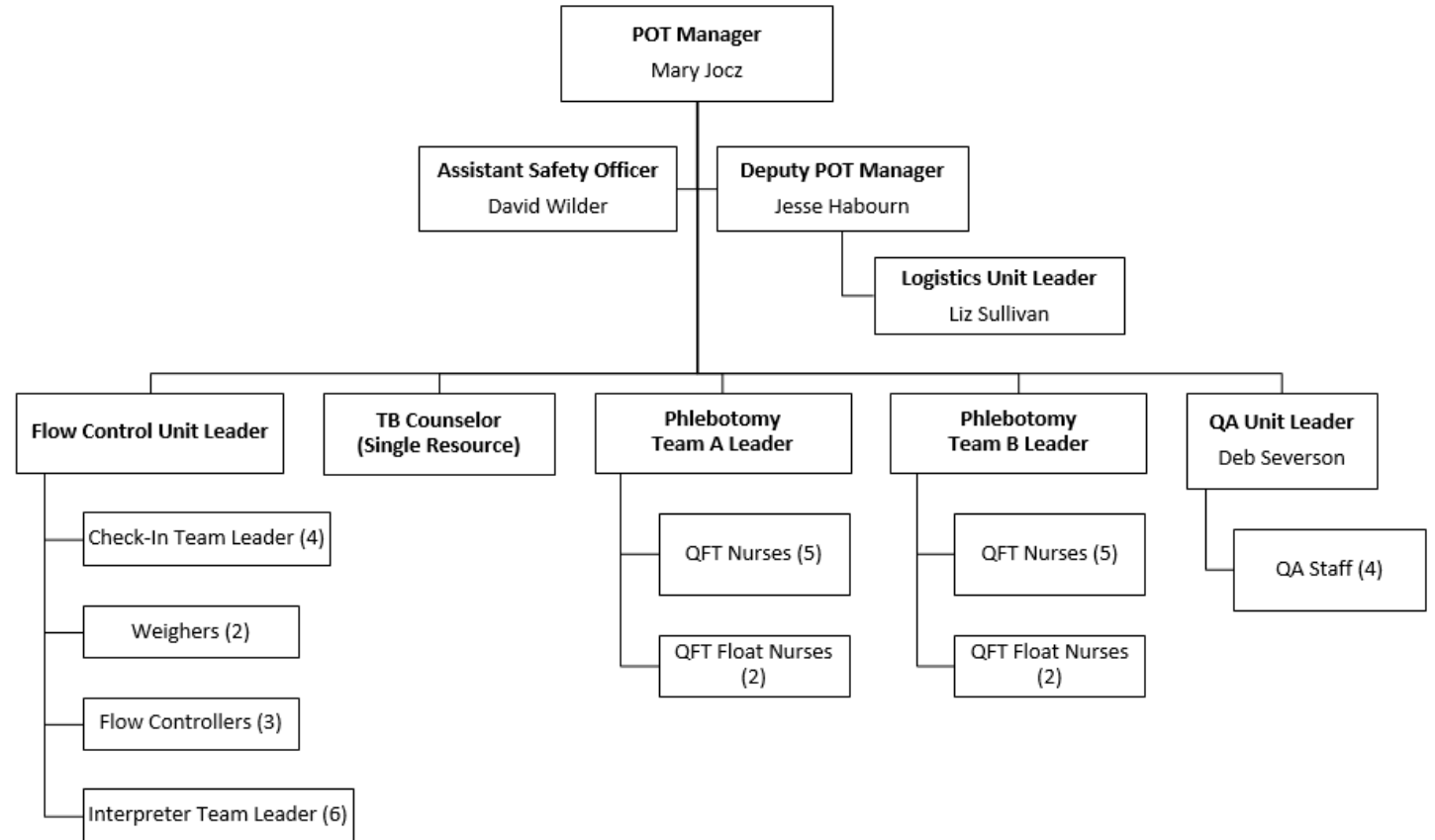


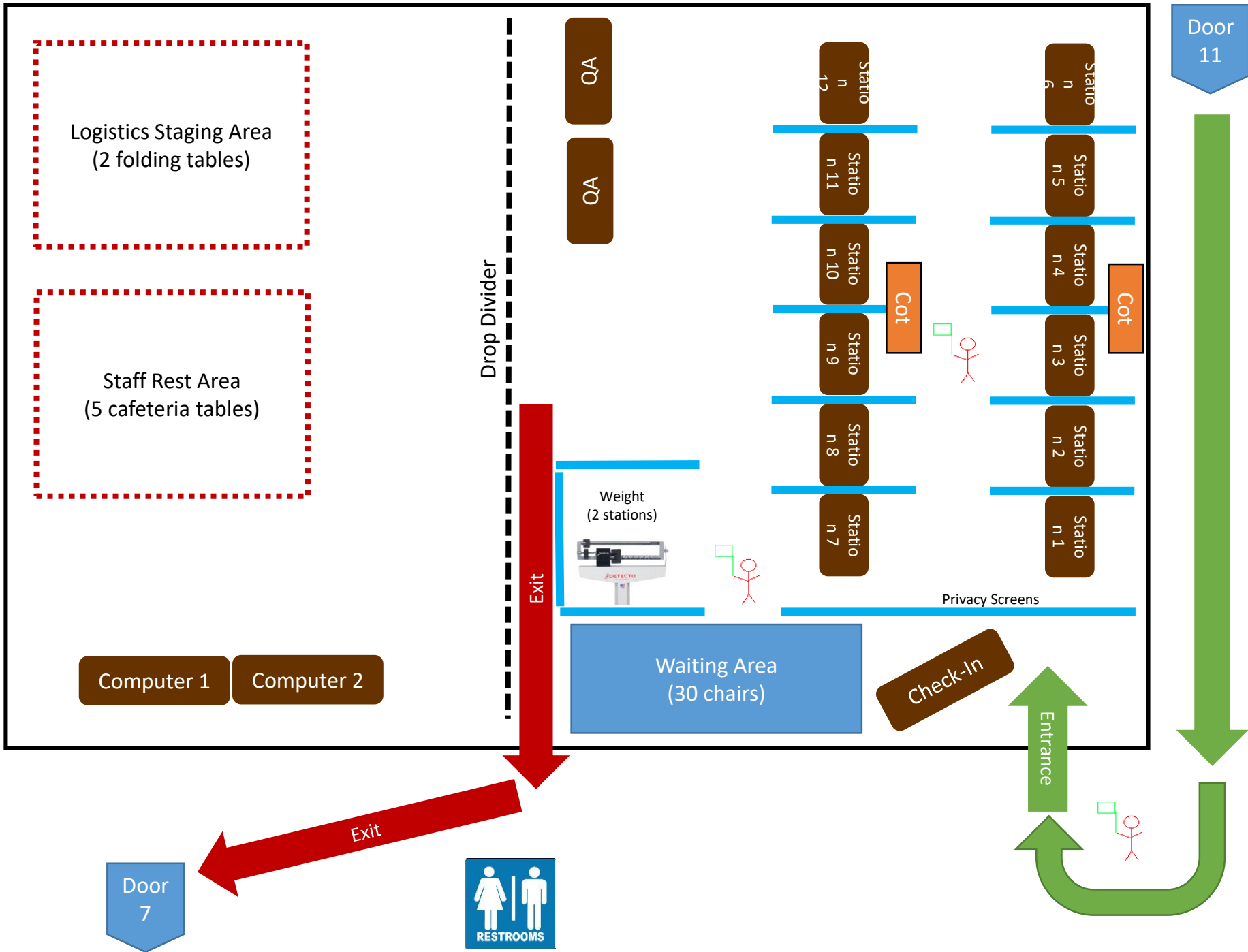
ICS 207 (Operational Period 1)



Point-of-Testing (POT) Clinic

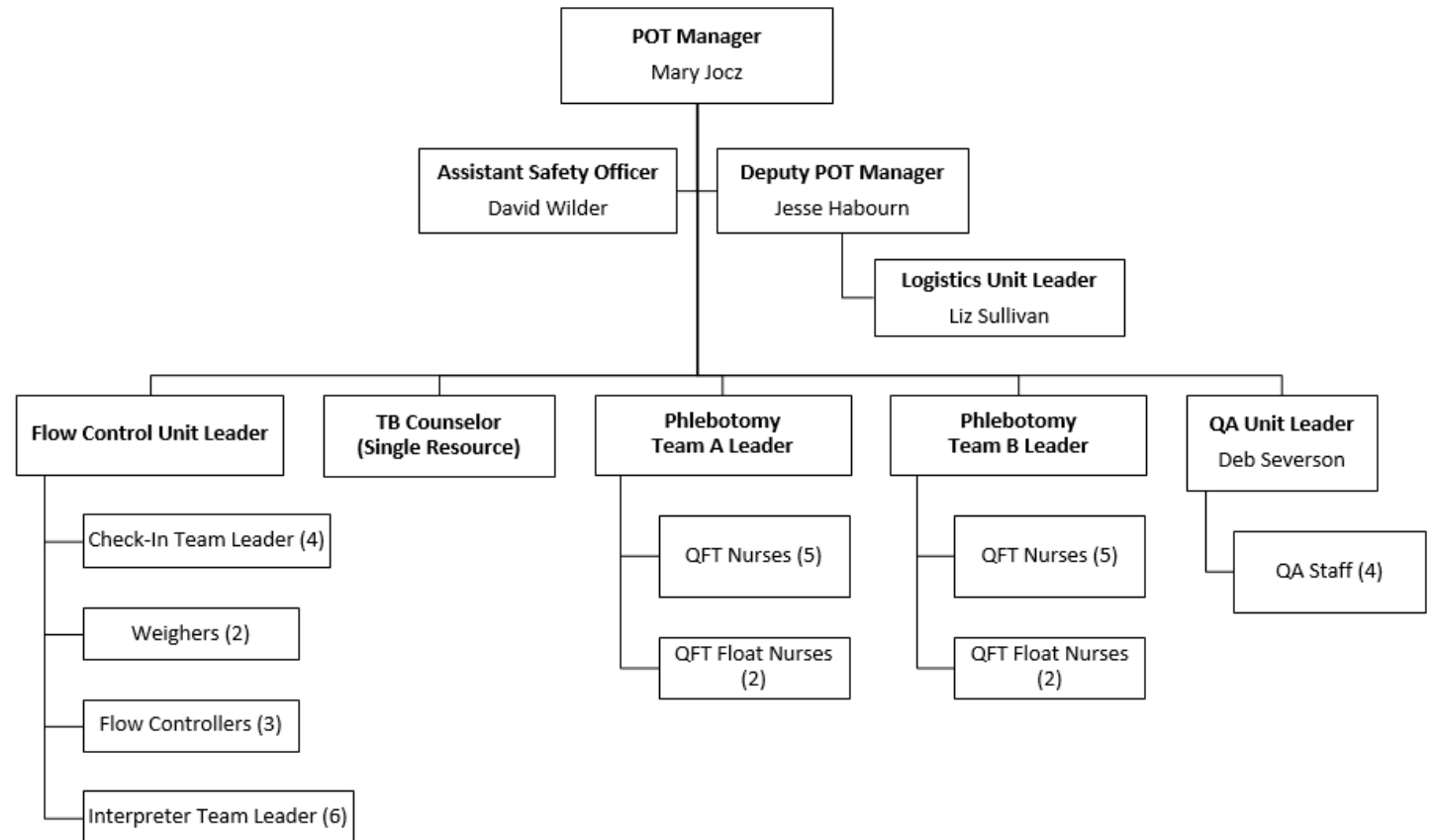
- Round 1 held on Saturday, April 29th from 0900 to 1800
- Between 12 and 30 appointments per hour
- Contacts were pre-screened by FCHD call center in week leading up to POT
- Each visit included
 - Review of “risk screen”
 - Consent to blood test
 - QFT blood draw (5 tubes)
 - Questions





Volunteer Rostering: Medical Reserve Corps (MRC)

- Used MRC volunteers as Flow Controllers, Interpreters, Weighers
 - In more recent investigations, MRC volunteers have been used as QFT nurses
- Logistics section of IMT is responsible for staffing both FCHD employees and MRC volunteers
 - Everbridge (“EAN”) is used for employees
 - Everbridge (“Volunteer Alerts”) was used for MRC volunteers



MRC Alerting Tools

VVHS

- Integrates with TRAIN
- Integrates with DHP for healthcare license checks
- Phone, text and email
- Alerting function by:
 - Serving locality
 - ESAR-VHP Level
 - MRC Level
 - Group and Roles
 - Types of alerts: communication, awareness, readiness, activation, training, exercise, emergency and deactivation
- All alerts are stored in the volunteer profile

Everbridge

- Fairfax County mass notification service used for Health Department staff and volunteer alerting.
- Alerting by Groups available
- Duty officer has access to the volunteer side
- Phone, text and email
- Provides redundant alerting capability
- Used for confirmation of staffing assignment
- Updated on a quarterly basis





Everbridge “Polling” Staffing Request



Send Your Own POD Staffing Alert

Incident Summary

3 Operational
Periods

4 Clinical Days
(POT, X-ray)

236 Exposed
Contacts

5 Call Center
Days

89 Days of IMT
Activation

110 FCHD Staff

16 MRC
Volunteers

137 MRC
Volunteer
Hours

126 Total Staff

2,428.8 Total
Hours Worked



Lessons Learned

Epidemiology

- Second round of testing = 4.4% positive (How many students had foreign-born parents?)
 - U.S. TB case rate (2015) = 3.0%
- One conversion
- No need to expand “concentric circle”

Staffing

- Staff and volunteers step up to the challenge of field clinics.
- We need to train more nurses to do QFT blood draws.
- We need to condition our staff to respond quickly to alerts.
- Do not give a “not available” option in polling alerts!
- Send multiple cycles of the same alert to catch people who get distracted and don’t respond.



Questions?



Paula Rosca, MPA

MRC Coordinator

Paula.Rosca@fairfaxcounty.gov

Colin Brody, MS

Senior Emergency Planner

Colin.Brody@fairfaxcounty.gov