

PUBLIC HEALTH EMERGENCY MANAGEMENT & HEALTH PROTECTION CONDITIONS (HPCON)

181st Intelligence Wing / Medical Group / Public Health



Welcome to your interactive
Public Health briefing by
Senior Airman Farkas!

Today we are covering the basics of
Public Health Emergency
Management and HPCON levels.

COVID-19 related prompts
(questions/comments) are
implemented as you follow along with
the material.

Let's go!

Public Health Emergency Declaration:

Trigger Events: Situations that may constitute public health emergencies include the occurrence or the **imminent threat** of an **illness** or **health condition** with a **high probability** of any of the following:

- **A significant # of deaths.**
- A significant # of serious or long-term disabilities.
- **Health care needs exceed available resources.**
- Severe degradation of mission capabilities or normal operations.
- **Widespread exposure of an infectious or toxic agent that poses a significant risk of substantial future harm.**

In reference to Coronavirus SARS-CoV-2, was it an appropriate situation for International, National, State, Local and Military leadership to declare a public health emergency?



Public Health Emergency Decision Algorithm



Can you trace the timeline of events for COVID-19 using this algorithm? Start from the top!

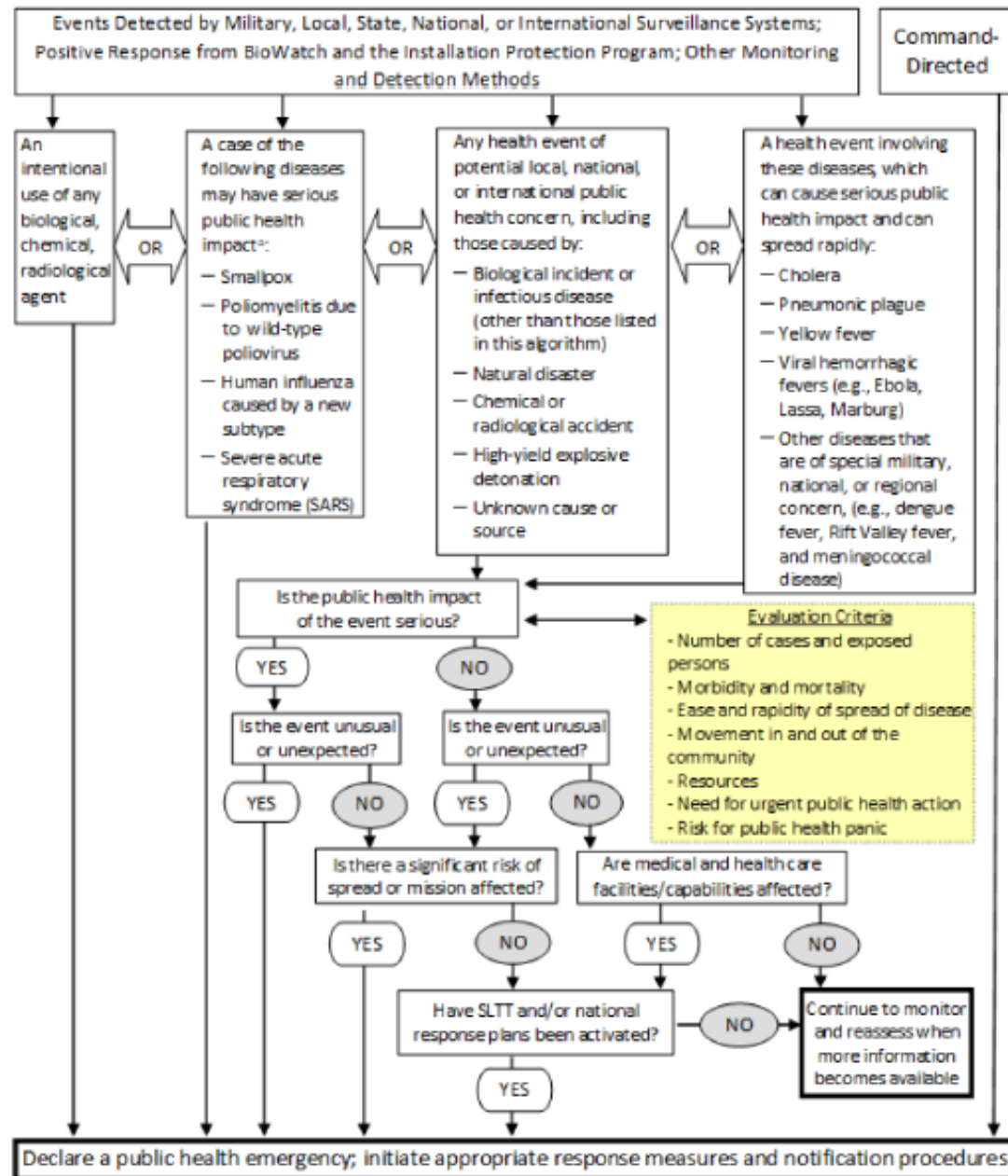


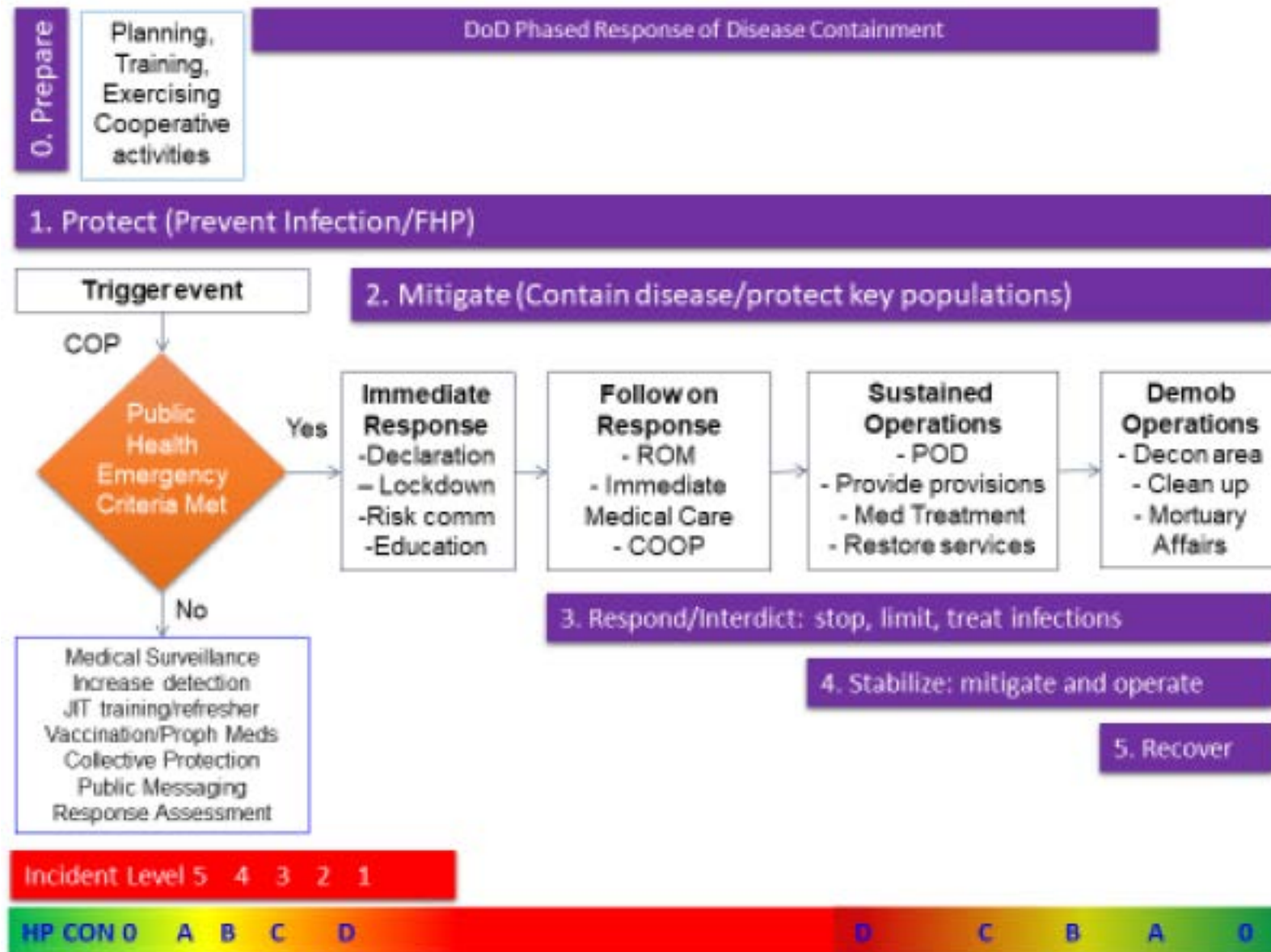
Figure 2.1. Public Health Emergency Decision Algorithm – DoDI 6200.03, p. 16.

* As per WHO case definitions

This algorithm is adapted from the WHO International Health Regulations (2005), Annex 2

Guide for response to a Public Health Event

Pinpoint where your AFSC applies on this guide. What is your role & responsibility at each stage?





In the following slides, think back to the Closed Installation POD we performed at the hanger. There was a lot of planning, preparing, implementing, execution, and summarizing.

Points of Distribution:

Objective: establish capabilities for mass treatment or prophylaxis of large outpatient population at risk (PAR) in a short period of time in response to chemical, biological, radiological and/or nuclear (CBRN) events or naturally occurring diseases (e.g., Pandemic Influenza (PI)).

Things to consider:

- The size and # of base population needed to maintain installation operations and carry out the base's mission.
- The availability of medical and public health resource during a base health emergency response.
- **The ability of the installation and its MDG to serve as a POD and provide medical countermeasures to its entire population.**
- Patients who will be treated.
- **An Air Force small-scale response is a mass prophylaxis plan designed for a PAR of 5,000 patients or less.**

Global Campaign Plan (GCP) for Pandemic Influenza and Infectious Disease

Phase 0 – Prepare, Planning, Surveillance, Training.

This is a continuous phase incorporating:
These activities will continue through all phases.

- Adaptive disease containment planning.
- Routine medical surveillance.
- Education, training, exercising the DCP for key personnel, interagency, and other partners and stakeholders.

Global Campaign Plan (GCP) for Pandemic Influenza and Infectious Disease

Phase 1 – Protect, Receipt of Surveillance, Intel trigger.

Begins upon receipt of information of human infection and/or zoonotic disease of operational concern and should involve:

- An assessment with a threat/hazard/risk analysis.
- Assess resources and ensure the availability of supplies, medications, support material if a response is needed.
- Identify LIMFACS.
- Confirm existing MOUs/MOAs that may be implemented and review for currency.
- Increase surveillance measures.
- Implement vaccination and prophylaxis, if indicated. See the Mass Prophylaxis Plan (MPP) [equivalent to Closed Installation POD?]
- Identify training deficiencies and conduct just-in-time training/education.
- Ensure adequate reporting capabilities are in place.
- Ensure the recall/mass notification process is ready to execute.

Global Campaign Plan (GCP) for Pandemic Influenza and Infectious Disease

Phase 2 – Mitigate. Common Operating Picture, expand Disaster Response Force (DRF), risk communication, prepare for Phase 3.

The installation will mitigate the effects of an operationally significant disease outbreak on mission assurance and its forces.

The focus of this face is the protection of mission essential functions. Actions are immediate and should be completed within about 2-3 hours.

Global Campaign Plan (GCP) for Pandemic Influenza and Infectious Disease

Phase 2 – Continued...

- Provide a common operating picture.
- Declare a PHE if indicated.
- Take necessary action to contain the disease to the smallest area possible. Restriction of Movement (ROM) if appropriate.
- Establish and expand DRF/Incident Command System (ICS).
- Identify key personnel and begin force protection/infection control measures – Personal Protective Equipment (PPE), medications, social distancing and isolation.
- Begin education/risk communication message distribution.
- Prepare for Phase 3 interdiction actions.

Global Campaign Plan (GCP) for Pandemic Influenza and Infectious Disease

Phase 3 – Respond.

Interdict, plan execution (isolation, quarantine, legal authorities).

Execution is in the 12 hours following commencement of containment activities:

- Risk communication message delineating “what is sick” reporting instructions and when to seek medical attention.
- Establish initial treatment/triage area. Establish isolation and quarantine areas.
- Plan for the collection and disposition of the deceased.
- Determine ROM with appropriate Public Affairs (PA) message and legal review.
- Prepare for the next operational period/phase and possible Point of Dispensing (POD) operations and determine need to request Strategic National Stockpiles (SNS).
- Begin movement of personnel to isolation/quarantine areas.

Global Campaign Plan (GCP) for Pandemic Influenza and Infectious Disease

Phase 4 – Stabilize.

Provide sustained response to contain disease based on the defined operational period (usually 12-24 hours).

- Establish POD operations.
- Execute mass care plans with isolation/quarantine.
- Establish collection, handling and disposition of the dead (FSRT).
- Plan for next operational period.
- Plan for recovery.



Next we will discuss
health protection
conditions, measures,
and hierarchy of
controls.

HEALTH PROTECTION CONDITION (HPCON)

The following actions listed are in approximate order; however, many actions occur simultaneously and some may deviate from sequence.

All should be considered.



HPCON NORMAL: Routine. No community transmission.

Take everyday actions to stop the spread of germs:

- Avoid close contact with people who are sick.
- Wash your hands often and for at least 20 seconds with soap and water.
- Cover your cough/sneeze with a tissue, then throw it in the trash; cough/sneeze into your elbow if tissues are unavailable.
- Avoid touching your eyes, nose, and mouth.
- Ensure all immunizations are up to date, including your seasonal flu shot.
- Stay home if you are sick, and avoid close contact with family members and pets.

HPCON ALPHA: Limited. Community transmission beginning.

Continue all previous actions and:

- Routinely clean and disinfect frequently touched objects and surfaces.
- If you are sick, call your medical provider for instructions on receiving care before going to the clinic.
- Stay informed by routinely checking reliable sources of information such as the Center for Disease Control and Prevention (CDC) and your local public health agencies.

HPCON BRAVO: Moderate. Increased community transmission.

Continue all previous actions and:

- Avoid unnecessary contact with others, such as shaking hands and hugging.
- Avoid unnecessary travel, especially to areas known to be experiencing active disease transmission.
- Ensure supplies of food, medication, and other items needed for babies and pets are available to last at least 14 days.
- Prepare for travel restrictions and cancellation of public gatherings, such as school, religious, and other community activities; make alternative arrangements for childcare.
- Observe local guidance on movement restrictions and access requirements for military installations.
- Seek guidance from employers and unit leaders about changes to work practices (e.g., telework) and training events.
- Comply with medical orders for self-isolation or quarantine.

HPCON CHARLIE: Substantial. Sustained community transmission.

Continue all previous actions and:

- Expect cancellation of in-person gatherings (e.g., schools, daycare, and all community activities) and restricted ability to travel.
- Plan activities for family members, especially children, in case you are restricted to your home for prolonged periods of time.
- Prepare for the potential of limited access to supplies and services, including severely restricted access to military installations.
- Implement remote work procedures as directed by your employer.
- If outside the United States, authorized or ordered departure actions may be implemented.

HPCON DELTA: Severe. Widespread community transmission.

Continue all previous actions and:

- Expect to remain at home for extended periods of time as movement in the community may be restricted, and at-home isolation or quarantine may be directed.
- Follow all directives and guidance from local, state and Federal authorities; these actions are to protect the health and safety of you and your family.

HEALTH PROTECTION MEASURES

Situation	HPCON	Example Health Protection Measures
Normal Baseline	0	Routine: Standard precautions such as routine hand washing, cough on sleeve, diet, exercise, vaccinations, education, stockpiling, planning, routine health alerts, etc.
Report of unusual health risk or disease	A	Limited: Health Alert, communicate risk and symptoms, review plans, verify preparation: training, stocks, posture, prepare to diagnose, isolate, and report new cases
Outbreak or heightened exposure risk	B	Moderate: Strict hygiene (no handshaking, wipe common use items); if exposed, self-isolate (wear mask or remain home); avoid contaminated water/food or risk area; vector control
High morbidity epidemic or contamination	C	Substantial: Social distance (limit: meetings, socials, TDYs); shelter in-place indoors; or, if directed, don respirators; mass distribution of medical countermeasures, if applicable
High mortality epidemic or containment	D	Severe: Restrict movement (quarantine), mass evacuation, mass decontamination, subsist on secure food/water sources



It's important to identify key personnel and begin force protection/infection control measures – personal protective equipment (PPE), medications social distancing and isolation.

Hierarchy of Controls

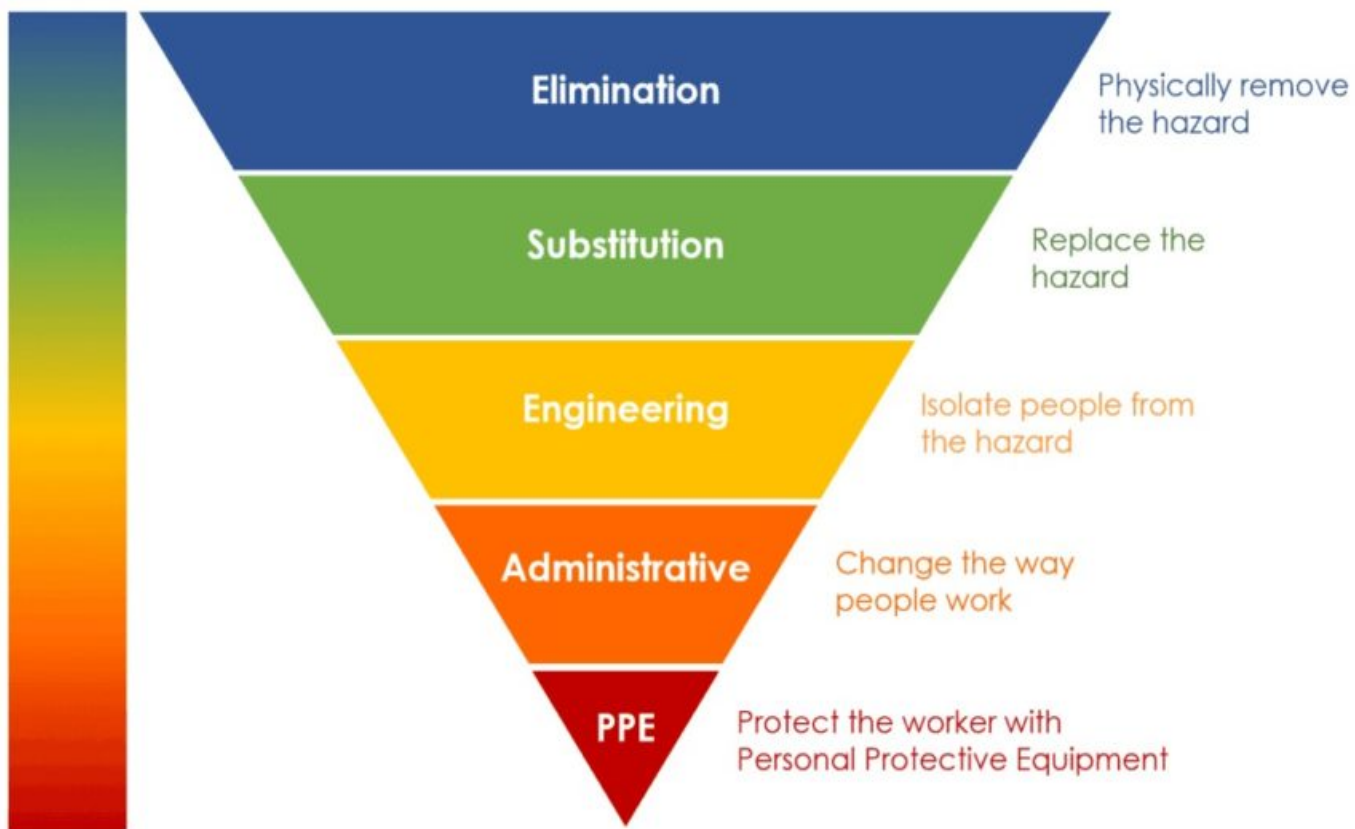


For all workers, regardless of specific exposure risks, it is always good practice to:

- Frequently wash your hands with soap and water.
- Avoid touching your eyes, nose, or mouth with unwashed hands.
- Avoid close contact with people who are sick.

Most effective

Least effective





Each job specialty requires different levels of control measures:

- Lab requires: washed hands and gloves.
- Dental requires: washed hands, gloves and face mask.
- Public health just disinfects their work area.

How could the supplies of PPE be better rationed to prevent a shortage?



Thank you for following along!

If you have any questions or
input, feel free to email me at
jessica.a.farkas.mil@mail.mil.

Stay safe!

References/Resources/Guidelines

- Public Health Emergency Management Guide IAW AFI 10-2519
- <https://phc.amedd.army.mil/topics/campaigns/covid19/Pages/Communication-Materials.aspx>
- DoDI 6200.03, Public Health Emergency Management Within the Department of Defense