

PACIFIC PUBLIC HEALTH EMERGENCY OPERATIONS PLANNING



The Problem and Current Situation

Dealing with natural disasters and public health emergencies requires advanced comprehensive hazard assessment and strong coordinated national and regional health preparedness planning. However, the Pacific islands' overall hazard assessments are at various degrees of completion and their national health emergency operations plans are at different stages of development. Further, there is little in the way of regional hazard assessment or regional health emergency operations planning.

The Centers for Disease Control and Prevention (CDC) has developed and tested a standardized process for writing public health and medical Emergency Operations Plans (EOP's). This "Automated Disaster and Emergency Planning Tool" (ADEPT) has been successfully beta-tested in six public health and ten hospital EOP's in the Pacific. ADEPT integrates objective-based disaster planning with the Sphere project standards and the incident command system.

Overall Project Goal

The overall goal of the five-year, 16 country project, is to promote the use of a standardized public health emergency operations planning (EOP) and hazard assessment tool throughout the Pacific region. It will also support the millennium development goals by developing global partnerships for emergency operations planning that enhance environmental sustainability, promote gender equality, combat disease outbreaks (SARS, pandemic flu, etc.) and reduce mortality in the Pacific.

The five-year project will be implemented in four phases for 16 Pacific Island countries. There will be an Initiation workshop to start off the process and a Regional Meeting at the end. The sequence of when each of the 16 Pacific Island counties will be phased into the project

will be determined at the Initiation workshop based on geographic and risk assessment information. By the end of year one, the first Four Island nation public health (PH) EOP's will be completed, by the end of year two, the second four, by the end of year three, the third four and by the end of year four, the fourth and final group of four Island nation PH EOP's will be completed. The final year will be dedicated to the development of a regional meeting held to discuss lessons learned and to develop regional EOP that links all national EOP's

Objectives, Activities and Indicators

Objective 1: Standardized EOPs and hazard assessment tools are developed in the sixteen Pacific countries

1. An Initiation workshop will be presented for all 16 participating island nations to (1) develop a standardized EOP and hazard assessment tools for the region, (2) select 5 the priority island nations for each phase of the planning process (Phase 1 - 4)
2. A regional EOP will link all national EOP
3. Expected Outcomes
 - 1) An Initiation workshop held within 3 months of initiation of project.
 - 2) EOP formats and hazard assessment tools developed at Initiation workshop

Objective 2: The EOP and hazard assessment phases are initiated

1. Four Island nation PH EOPs will be completed in year 1
2. Four Island nations PH EOPs will be completed in year 2 and year 1 EOPs will be tested
3. Four Island Nations PH EOPs will be completed in year 3 and year 2 EOPs will be tested
4. Four Island Nations PH EOPs will be completed in year 4 and year 3 EOPs will be tested

Objective 3: A concluding Regional Workshop will be held in year five with the following outcomes:

- a) finalize a standard regional EOP format and hazard assessment tool,
- b) discuss lessons learned over the four phases of this project,
- c) discuss and make recommendations on other regional emergency operation planning needs.

Collaborating Agencies

- * Centers for Disease Control/PEHI: will act as the coordinating body and provide for technical assistance and training
- * National Governments: will provide policy support, authorization and requirements for active participation by all government agencies and ministries essential for completion of the project.
- * Secretariat of the Pacific Community (SPC): will provide technical assistance
- * National Ministries of Health: will provide policy support, manpower and logistics support
- * National Emergency Management Organizations

(NEMO): will provide policy support, logistics and overall planning and coordination

- * Local community organization: will be identified by the local and national government to provide input into the planning process.

Monitoring/ Evaluation Methodology

A select committee based on major donors, regional planning experts, technical assistance personnel, members from the pilot pacific islands countries, and countries receiving technical assistance will be responsible for semi annual reporting on progress.

Budget Summary

Year 1 Category	Project Expense	In-Kind Contribution	Total Budget
Personnel Salary/Benefits - 10 Weeks X 2 TA X \$3,200	64,000		
Travel – Initiation Workshop(25 delegates X \$2,000)	50,000		
Travel Expenses - Four EOP development projects (1 week per workshop X \$5,000 X 4 weeks X 2 TA staff)	40,000		
Direct Implementation Costs	1,500	10,000	
Initiation Workshop		2,000	
❖ Conference Room			
❖ Transport			
❖ Printing	6,000		
EOP Development		2,000	
❖ Conference Room (1 week X 4)	2,000		
❖ Local Transportation (1 week X 4)			
❖ Printing			
Equipment	1,000		
Operational Costs	26,250		
Initiation Workshop - Hotels (\$150 X 25 X 7 days)			
Sub Total Project Expense	190,750	14,000	204,750
10 % contingency			20,475
Total Year 1 Expenses			225,225

Year 2 Category	Project Expense (US\$)	In-Kind Contribution (US\$)	Total Budget (US\$)
Personnel Salary/Benefits - 6 Weeks X 2 TA X \$3,200	38,400	5,000	
Travel – Four EOPs (\$5,000 X 4 weeks X 2 TA staff)	40,000		
Direct Implementation Costs			
EOP Development	6,000	2,000	
❖ Conference Room (1 week X 4)			
❖ Local Transportation (1 week X 4)	2,000		
❖ Printing			
Equipment	1,000		
Sub Total Project Expense	87,400	7,000	94,400
10 % contingency			9,440
Total Year 2 Expenses			103,840

Year 3 Category	Project Expense (US\$)	In-Kind Contribution (US\$)	Total Budget (US\$)
Personnel Salary/Benefits - 6 Weeks X 2 TA X \$3,200	38,400	5,000	
Travel Four EOPs (\$5,000 X 4 weeks X 2 TA staff)	40,000		
Direct Implementation Costs			
EOP Development	6,000	2,000	
❖ Conference Room (1 week X 4)			
❖ Local Transportation (1 week X 4)	2,000		
❖ Printing			
Equipment	1,000		
Sub Total Project Expense	87,400	7,000	94,400
10 % contingency			9,440
Total Year 3 Expenses			103,840

Year 4 Category	Project Expense (US\$)	In-Kind Contribution (US\$)	Total Budget (US\$)
Personnel Salary/Benefits - 6 Weeks X 2 TA X \$3,200	38,400	5,000	
Travel Four EOPs (\$5,000 X 4 weeks X 2 TA staff)	40,000		
Direct Implementation Costs			
EOP Development	6,000	2,000	
❖ Conference Room (1 week X 4)			
❖ Local Transportation (1 week X 4)	2,000		
❖ Printing			
Equipment	1,000		
Sub Total Project Expense	87,400	7,000.00	94,400
10 % contingency			9,440
Total Year 4 Expenses			103,840

Year 5 Category	Project Expense (US\$)	In-Kind Contribution (US\$)	Total Budget (US\$)
Personnel Salary/Benefits - 3 Staff X 2 weeks	34,500		
Travel – 25 delegates X \$2,000	50,000		
Direct Implementation Costs ❖ Conference Room ❖ Transport ❖ Printing	1,500	10,000 2,000	
Equipment	1,000		
Operational Costs ❖ Hotels (\$150 X 25 X 7 days) ❖ Facilitator	26,250 10,000		
Sub Total Project Expense	123,250	12,000.00	135,250
10 % contingency			13,525
Total Year 5 Expenses			148,775

Budget Total Year 1 – 5 (US\$)

Year	Project Expense	In-Kind Contribution	10% Contingency	Total Budget
Year 1	190,750	14,000	20,475	225,225
Year 2	87,400	7,000	9,440	103,840
Year 3	87,400	7,000	9,440	103,840
Year 4	87,400	7,000	9,440	103,840
Year 5	123,250	12,000	13,525	148,775
Project total				685,520

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