PHEP 101

Strategic National Stockpile (SNS) and Medical Counter Measures

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Overview of the Strategic National Stockpile

Purpose

- Deploy medical material to community impacted by an emergency event
- Increase lives saved in community
- Underlying Assumption
 - Deployed if and when all local and state resources depleted

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- Event extensively impacts community

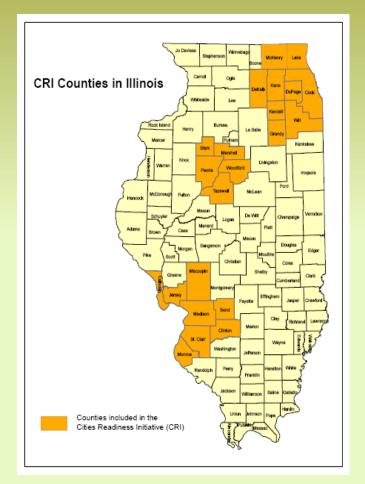
Collaboration and SNS

- Multi-agency Plan and Response from local to state to federal
- Core preparedness mission
 - "Pills in People" OR "Pills to People"
 - Dispense to citizens of Illinois as quickly as possible

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 Chicago CRI MSA
 St. Louis CRI MSA
 (includes 8 LHDs in MO)
 Peoria CRI MSA



Broad Spectrum Support 12-Hour Push Packages

- Push Packages
 - Pre-positioned throughout the US
 - 100 specialized cargo containers
 - 8 semi tractor trailers
 - Broad Spectrum Support [based on Category A Agents (APT)] for post-exposure prophylaxis and treatment



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Specific Item Support

- Managed Inventory (MI)
- Vaccines
- Buying Power/Surge Capacity
- Federal Medical Contingency Station (FMCS)



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Medical/Surgical Supplies

- IV Administration
- Airway
- Pediatric Container
- •Equipment
 - -Ventilators
 - -Suction Units











Federal Medical Contingency Station (FMSC)

- All-hazard mass casualty care event
- Federal-level contingency care program (per HSPR 10)
- Surge capability throughout US
 - Pre-positioned
 - Configured to respond effectively to variety of public health emergencies
- Field Hospitals (Type III)
 - House 250 patients
 - Goal total 138 pre-positioned



SNS Program Focus

SNS Assets Deployed



Operations

Logistics

RSS Warehouse (Receipt, Stage and Ship) & RDC (Regional Distribution Center)

Federal Level

State Level

Local Level

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Dispensing

Sites

PODs

Local Health Department (LHD) SNS Request

- Coordinate with local Emergency Management Agency (EMA)
- Local EMA sends request to State Emergency Operations Center (SEOC)
- SEOC informs IDPH SEOC Liaison of request

Hospital SNS Request

- Coordinate with LHD
- Exhaust resources through normal chain (ie POD hospital, region)
- Request through LHD to local Emergency Management

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Needs dependent on event

Deployment Options

- Metered Package
 - Part 1 (7 days) 25% of each allocated qty
 - Part 2 (7 days) add 25% allocated qty
 - Part 3 (7-10 days) remaining 50% of allocated qty
- Sequential
 - Part 1 100% qty of antiviral drugs
 - Part 2 100% qty of N95 respirators and surgical masks
 - Part 3 100% all other assets (PPE, IV antibiotics, supplies)

Combating Shortage of Resources

- Reach out to all agencies and private organization in community
 - Create a repository of resources
 - Web-based applications available
- Meet regularly with all partners
- Involve public, non-profit, and private organizations in exercises

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- Plan regionally and across regions
- Sustain and maintain

Local Dispensing Goals

- To save lives and prevent illness
- To provide prophylaxis to the entire population in the jurisdiction in 48 hours (based on an anthrax event)