



Emergency Management Department

Public Health and Medical Emergency Preparedness and Response Funding - (State and Federal)

Issue: Funding local health jurisdiction planning, preparedness and response to acts of terrorism, disasters, or other public health emergencies.

Action: Maintain or increase federal and state funding to offset the local costs associated with planning for and responding to the public health and medical consequences of terrorism, natural disasters and/or other public health emergencies.

Support the removal of restrictions on the utilization of grant funds to fund personnel, including permanent and temporary staff positions and contract personnel.

Support the continued use of grant funds for the infrastructure needed for personnel, including such charges as rent, communications equipment and computer support. Continue to allow these costs to be billed as direct line items.

Support the determination of an indirect rate for grant funds that more accurately reflects the overhead costs of local public health departments.

Background: The terrorist activity on and after September 11th 2001, Hurricane Katrina, the October 2007 fires in Southern California, 2009 H1N1 Pandemic Influenza and the 2014 Ebola response are a few examples of events that have highlighted the impact of terrorism, natural disasters and public health emergencies on local, state, and federal medical/health response capabilities.

Federal and state funding often have restrictions on the amount of personnel that can be supported by emergency preparedness and response grants. Although the grants allow for the utilization of contract staff, these staff are unfamiliar with local policies and procedures, do not necessarily have a vested interest in the community in which they are working, and are often only contracted for a short period of time. In addition, some federal and state grants include contract staff in personnel caps. Grant funds provided by the state should not restrict the funding of personnel at the local level; such restrictions severely impair the ability of the local health jurisdiction to develop and support comprehensive activities to combat the evolving threats of terrorism, natural disasters, and other public health emergencies.

Increases in state and federal funding are needed to augment local programs to prepare for and respond to all forms of terrorism, natural disasters or other public health emergencies. Legislation is needed which increases prevention and response capabilities and strengthens the partnerships between state, federal and local agencies to effectively identify, prevent and respond to the medical/health consequences of terrorism, disasters or other public health emergencies. Funding formulas should consider proximity to high profile, high impact targets in nearby jurisdictions as nearby jurisdictions will likely be severely impacted through the provision of mutual aid or by the influx of large numbers of people seeking shelter and/or treatment.