



**Public Health Emergency  
Preparedness Informer**

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**Disaster!!!  
Who's in Charge?**

*(To continue the series of articles on the National Incident Management System. Although volunteers are not required to complete the NIMS training course, some knowledge of the NIMS system will be helpful when responding to a public health emergency.)*

Training and exercising the emergency plan is essential for an emergency plan to be successful during a real emergency. This provides staff with the opportunity to become familiar with the plan and procedures, their roles and responsibilities and the information and skills required to perform their duties during an emergency. In addition to training staff, an exercise tests the disaster plan and allows for revisions and updates as necessary. Records must be maintained to verify that an exercise was conducted. When the exercise is finished, an after action report is completed which evaluates the response of various agencies participating in the exercise.

Training is achieved through exercising the plan without the stress of

an actual disaster or emergency. There are three types of exercises used by most agencies to accomplish learning objectives: **Table Top Exercise, Functional Exercise, and Full-scale Exercise.**

A **table top exercise** provides a convenient and low-cost method to evaluate policy, plans and procedures. It also addresses problems in coordination between agencies and staff responsibilities. This type of exercise is a good way to see if policies and procedures actually do exist to handle certain issues. The table top exercise is also an effective way to strengthen the personal preparedness of staff and their families.

A **functional exercise** is designed to test and evaluate the capability of an individual function (such as communication systems, if back up generators work, evacuation of a building, etc.). This specific exercise is an excellent method for testing the capability of handling evacuation issues or an emergency notification system.

A **full-scale exercise** simulates an actual emergency. In a full-scale exercise, an entire response system is tested including all agencies that

might be involved in a certain scenario.

The U. S. Department of Homeland Security will be holding a full scale exercise for District 3 (which includes Chattanooga) in March 2007. This exercise will provide emergency responders in Hamilton County to work together with neighboring counties in a simulated disaster. Agencies who are participating in the full-scale exercise include state and local Emergency Management, Emergency Medical Services, state and local health departments, fire, law enforcement, hospitals and local industries. Exercising together will allow these agencies to combine specific response strategies and plans. This in turn will help to determine appropriate techniques needed in response to an incident scenario.

**The District 3 full scale exercise in March will provide an opportunity for at least 100 volunteers to act as patients presenting to local hospitals. If you are interested in volunteering to be a patient, please contact Susan McNabb at 209-8068 or by e-mail at [susanm@mail.hamiltontn.gov](mailto:susanm@mail.hamiltontn.gov).**

**Public Health and Food Safety**

The primary goal of public health is to prevent disease before it occurs. Surveillance and monitoring are critical to meet this purpose. The Chattanooga-Hamilton County Health Department has an Epidemiology Department which collects and analyzes data on health related events in Hamilton County in order to prevent or control disease outbreak or spread. This includes the monitoring of foodborne illnesses.

One goal of Health and Human Services is to strengthen our food safety system and address safety issues. Centers for Disease Control monitors the occurrence of illness in the United States linked to the food supply. CDC works with state and local health departments to build their epidemiology capability in foodborne disease surveillance and outbreak response. These surveillance systems are the key to an effective emergency response.

While the American food supply is among the safest in the world, there are still too many Americans stricken by illness caused by the food they consume, and some die as a result. There are many reasons for this. People are eating a greater variety of foods, par-

ticularly seafood and fresh fruits and vegetables. People are eating more meals away from home. As more food workers become involved in preparing our meals, the opportunity for disease causing errors also increases. Persons at highest risk for foodborne illness are children, the elderly, pregnant women and immuno-compromised persons. These high risk groups now comprise nearly a quarter of the population.

The [foodsafety.gov](http://foodsafety.gov) website was established in early 1999 by the FDA in close cooperation with CDC and USDA. Visit this website for tips on food safety. (Resource [www.fda.gov/ola/2001/foodsafety1010.html](http://www.fda.gov/ola/2001/foodsafety1010.html).)

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## *CHCHD Public Health Emergency Preparedness Informer*

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### ***Storm Safety in Winter Weather***

Most of the wintry weather we experience in Chattanooga happens in January through March—don't forget that the Super Storm of 1993 happened in mid-March. Being prepared is the best defense against injury or loss of life during a winter storm. The most important thing is to have a plan for what you are going to do during bad weather.

#### **Have available for your home:**

Flashlight with extra batteries	Extra food and water	Extra medicine and baby items	First aid supplies
Emergency heat source	Extra pet food/water	Fire extinguisher	Battery powered radio

#### **Have available for your car:**

Full gas tank	Blankets	Cell phone charger	Flashlight	First aid kit
Small shovel	Sack of sand	Battery booster cables	Non perishable food	Water
Tool kit				

The primary concerns during a winter storm are loss of heat, power and telephone service. Food provides the body with energy for producing its own heat, so eat and drink regularly. Wear layers of lightweight, loose fitting clothing for warmth.

### ***Exposure to Cold***

Exposure to cold can cause frostbite or hypothermia and become a life-threatening situation. Infants and the elderly are the most vulnerable when exposed to cold temperatures. Wind chill is not the actual temperature, but rather how wind and cold feel on exposed skin. As the wind increases, heat is carried away from the body at an accelerated rate which drives down the body's temperature.

**Frostbite** is damage to body tissue caused by extreme cold. A wind chill of -20 degrees Fahrenheit will cause frostbite in just 30 minutes. Frostbite causes a loss of feeling and a white or pale appearance in extremities such as fingers, toes, earlobes and the tip of the nose. When symptoms are detected, get medical help immediately. If you must wait for help, slowly rewarm the affected areas. However, if the person is also showing signs of hypothermia, warm the body core before the extremities.

**Hypothermia** is a condition brought on when the body temperature drops to less than 95 degrees Fahrenheit. It can kill. For those who survive, there are likely to be lasting kidney, liver and pancreas problems. Warning signs include uncontrollable shivering, memory loss, disorientation, incoherence, slurred speech, drowsiness and apparent exhaustion. Take the person's temperature. If it is below 95 degrees Fahrenheit, seek medical care immediately! If medical care is not available, warm the person slowly starting with the body core (trunk of the body). Get the person into dry clothing and wrap them in a warm blanket covering the head and neck. Use your body heat to help warm them if necessary. **NEVER** warm the arms and legs first if a person has hypothermia. Warming these areas first will drive the cold blood toward the heart and can lead to heart failure. **Do not** give the person alcohol, drugs, coffee or any hot beverage or food. Warm broth is the first food to offer.

#### **Injuries Related to Cold:**

50% happen to people over 60 years old  
(For more information visit [www.noaa.gov](http://www.noaa.gov))

More than 75% happen to males

About 20% occur in the home

#### **Volunteer Information Update**

If you have moved, changed telephone numbers, or are no longer interested in being a volunteer, please complete the form below and return to the address at the top of this page or e-mail Susan McNabb at [susanm@mail.hamiltontn.gov](mailto:susanm@mail.hamiltontn.gov).

Name \_\_\_\_\_ Home Phone \_\_\_\_\_ Cell \_\_\_\_\_ Work Phone \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Work Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_

\_\_\_\_\_ I am unable to be a volunteer at this time. Please remove my name from the active volunteer list.