

MEDICAL RESPONSE IN EMERGENCIES: HHS ROLE

Overview: The Department of Health and Human Services (HHS) has federal responsibility for meeting the needs of Americans faced with health and medical problems in emergencies. The HHS Office of Emergency Preparedness (OEP) coordinates the federal health and medical response and recovery activities for HHS, working with other federal agencies and the private sector. In addition, HHS' Centers for Disease Control and Prevention (CDC) has special responsibilities in the event of terrorism involving the use of infectious agents.

HHS coordinates Disaster Medical Assistance Teams; Disaster Mortuary Operational Response Teams; Veterinary Medical Assistance Teams; and other medical specialty teams located throughout the country, which can be deployed immediately in the event of natural disasters. In addition, HHS coordinates the National Medical Response Teams for Weapons of Mass Destruction to deal with the medical consequences of incidents potentially involving chemical, biological, or nuclear materials, and is helping metropolitan areas across the nation. More information on these activities can be found on the Web at <http://ndms.dhhs.gov/>.

National Disaster Medical System

HHS is the primary agency for coordinating health, medical and health-related social services under the Federal Response Plan, which provides for medical, mental health and other human services to victims of catastrophic disasters. OEP is the medical "911" for all national catastrophic disasters - both natural and man-made.

OEP leads the National Disaster Medical System (NDMS), a partnership of four federal agencies - HHS, the departments of Defense and Veterans Affairs, and the Federal Emergency Management Agency, and the private sector. The system has three components: direct medical care; patient evacuation; and non-federal hospital care. The NDMS also comprises more than 7,000 private sector medical and support personnel organized into 80 disaster assistance teams. These teams are deployed to provide immediate medical attention to the sick and injured during disasters, as well as mortuary and veterinary care, when local emergency response systems become overwhelmed.

In recent years, HHS has responded to an unprecedented number of challenges, including: natural disasters such as floods, hurricanes, earthquakes, and ice storms; special events such as the NATO 50th Anniversary Summit, World Trade Conferences, and the Centennial Olympic Games in Atlanta; transportation disasters including TWA Flight 800, Egypt Air, and Alaska Air crashes; and terrorist events such as the Oklahoma City bombing. HHS also provides medical teams to assist the FBI, Secret Service and Department of State in the field.

In addition to the private sector component of the NDMS, the Commissioned Corps Readiness Force (CCRF) includes officers within the U.S. Public Health Service available for immediate deployment to disasters. Upon activation by the Surgeon General, the CCRF can provide public health personnel from various categories, which include: physicians, nurses, pharmacists, environmental health officers and mental health officers.

Preparing for Possible Terrorist Acts

Terrorist attacks in Tokyo, Oklahoma City, New York at the World Trade Center, and against U.S. embassies in Africa demonstrate the importance of being prepared to respond. Early responses are critical, particularly for incidents involving explosives and chemical releases. Both injury and public panic may be reduced if the government response is prompt and competent.

Potential terrorist use of nuclear, biological and chemical weapons raises special concerns because of the potential massive effects of such weapons. The primary consequence of such an attack could be a widespread health and medical emergency that would require the rapid and highly coordinated response of the public and private sectors to assist the victims.

Because of the compressed time frame for responding to such terrorist acts, HHS' strategic plan includes developing partnerships with local jurisdictions to develop enhanced Metropolitan Medical Response Systems (MMRS) as the primary local resource in responding to the health and medical consequences of a nuclear, biological or chemical terrorist incident. The MMRS, which enhances capabilities of the local system, serves to coordinate the public safety, public health and health services sector responses to such a terrorist incident. At the same time, HHS is improving the federal capability to rapidly augment state and local responses. The federal medical response component includes four national and geographically dispersed National Medical Response Teams for Weapons of Mass Destruction.

The MMRS concept was generated by a group of state and local subject matter experts that met in July of 1995 at the request of HHS' Office of Emergency Preparedness. The original concept of a Metropolitan Medical Strike Team soon expanded into the current systems approach. Pilot tested in the Washington, D.C., and Atlanta areas, OEP now has contracts with 72 metropolitan areas and will expand to a total of 97 areas by the end of fiscal year 2001 and develop a total of 200 MMRS within the next five years. HHS is currently developing a "balance of the nation" strategy for parts of the country not included in the list of MMRS areas.

The MMRS emphasizes enhancement of local planning and response capability, as well as hospital capacity, tailored to each jurisdiction, to care for victims of a terrorist incident involving a weapon of mass destruction. These systems are characterized by: a concept of operations, specially trained responders, special pharmaceuticals, detection and personal protective equipment, decontamination capabilities, communication, medical equipment and other supplies, and enhanced emergency medical transport and emergency room capabilities. The program includes a focus on biological response, including early warning and surveillance, mass casualty care and plans for mass fatality management. The concept of operations includes the local jurisdiction's plan for federal health and medical augmentation assistance to include the forward movement of patients (when local healthcare systems become overloaded) via the National Disaster Medical System.

HHS recognizes that each city has its own configuration of emergency medical resources. Many have special HAZMAT response capabilities. Therefore, specific plans must be developed for each city that can build on existing systems and adapt them to meet a nuclear, biological or chemical challenge. Implementation of these plans will include special equipment, supplies, and pharmaceutical procurement and training. A "concept of operations" plan will also be developed with each city regarding federal health and medical augmentation assistance in response to a threatened or actual terrorist incident involving weapons of mass destruction.

Note: All HHS press releases, fact sheets and other press materials are available at <http://www.hhs.gov/news>.