

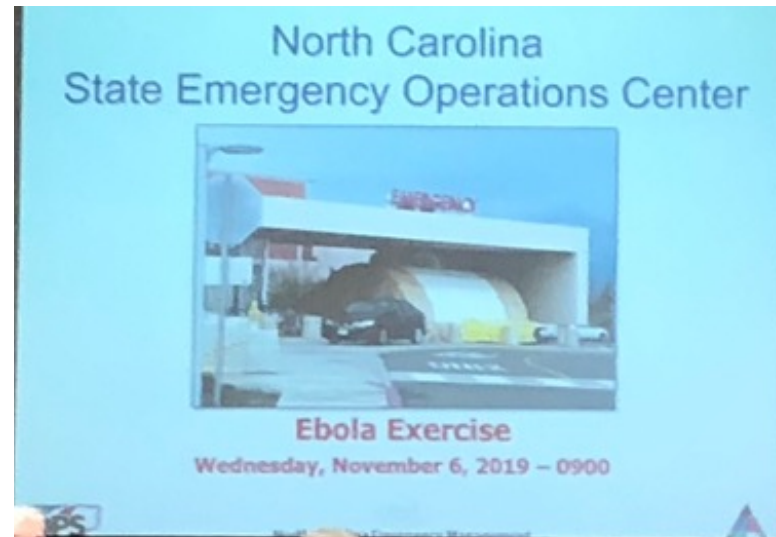
NC High Consequence Pathogens Concept of Operations

NC DPH, NCOEMS, UNC SPARC

March 21st, 2024

High Consequence Pathogens ConOps

- Welcome
- UNC SPARC
- Importance of Preparedness Efforts



<https://nc.readyop.com/fs/4e7Z/d6801ee0>

A High Consequence what??

High Consequence Pathogen; High Consequence Infectious Disease; Special Pathogen

- **Bottomline:**

- We are talking about pathogens for which all forms of medical waste are classified as Category A infectious substances (DOT)

Or

- A pathogen with potential to cause a high mortality rate among healthy people and
 - A risk from clinical specimens to laboratory personnel
 - Secondary airborne spread or unknown mode of transmission
 - No routine vaccine exists.



NC High Consequence Pathogens ConOps

- The purpose of the concept of operations is to provide local, state, and federal partners, relevant healthcare agencies and organizations, and other stakeholders the strategic high-level overview based on our tiered healthcare system's approach ***to prepare for, respond to persons/patients and recover from incidents with suspected or confirmed*** High Consequence Pathogens in North Carolina.+
 - Considered a Framework or Guidance Document
-

Tiered Healthcare System

- **Frontline Healthcare Facilities/Agencies**
 - All Hospitals, Urgent Cares, EMS, physician's office etc.
 - Should maintain the capability to Identify, Isolate, Inform
 - Maintain infection prevention procedures for HCP
- **HCP Assessment Hospitals**
 - Maintain preparedness levels to receive and isolate potential patients and provide care for up to 96 hours. This includes the coordination of testing for high consequence pathogens through their laboratory or with the State Lab of Public Health

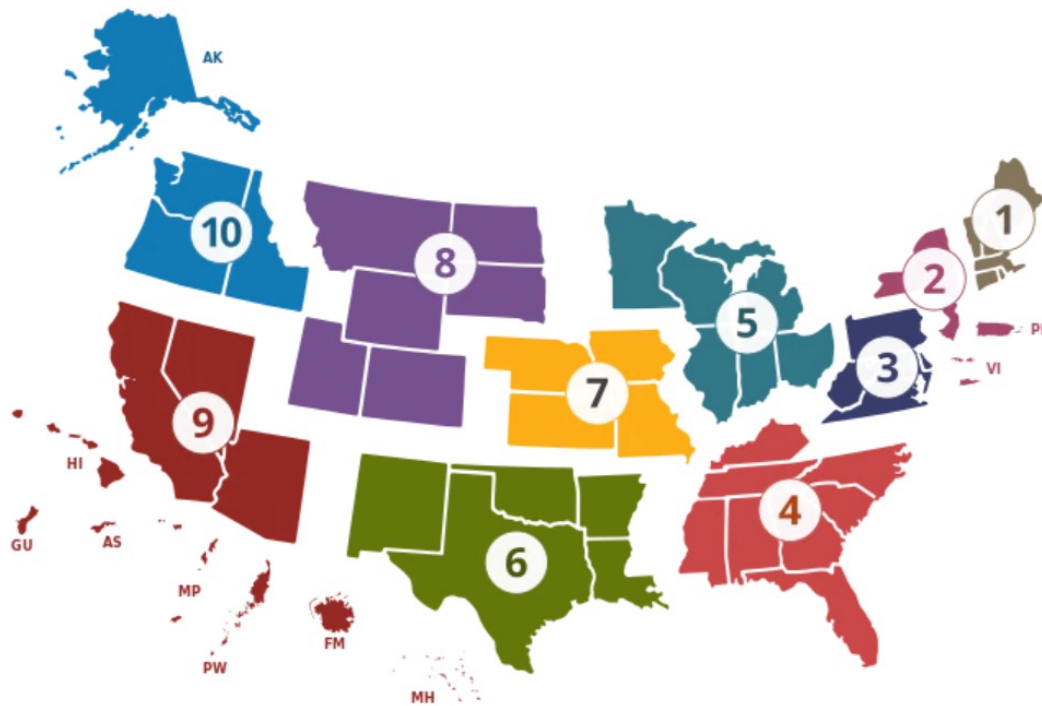
Tiered Healthcare System

- **Regional Emerging Special Pathogen Treatment Centers (RESPTC)**
 - Maintain preparedness level to provide adequate treatment areas, skilled and trained staff, appropriate equipment, and specialized biocontainment facilities.
 - These facilities have the capability to manage a confirmed high consequence pathogen patient for duration of necessary medical treatment.
 - There are **13** recognized RESPTCs across the US

State and Regional Training

– UNC Special Pathogens Response Center (SPARC)

- Plans for educational outreach for frontline and first responder staff throughout North Carolina and Region 4 of the U.S.
 - KY, TN, NC, SC, GA, AL, MS, FL



Partnership with Emory University Hospital

- Emory University Hospital
 - Atlanta, GA

- UNC Hospitals
 - Chapel Hill, NC



Training and Educational Offerings

- **Hands-on training**
 - Didactic overview of information
 - PPE donning with skills stations and PPE doffing sessions
 - Sessions will be held at different locations
 - **Regional newsletters**
 - **Situational Reports (SitReps)**
 - **Online learnings (Emory ECHO program)**
-

Training and Educational Offerings

Hospital based course: designed for medical and nursing staff, emergency management, education and training leaders, and infection prevention staff.

EMS based course: designed for EMS providers of all types, but any health care personnel who are at risk of exposure to patients with a high-consequence infectious disease are welcome to attend.

May 2nd, 2024 – Greensboro, NC

Public Health Surveillance & Activation

- **EPI On-Call is a 24/7 monitored phone line that is used by the public health and healthcare systems to report potential and/or confirmed communicable diseases and to receive communicable disease response technical assistance. The staff for this EPI On-Call line comes from the Communicable Disease Branch.**

Public Health Surveillance & Activation

- **Public Health & Healthcare facilities that identify a potential patient should contact EPI On-Call for consultation and assistance with completing a risk assessment**

- potential risk of HCP?

- HCP laboratory testing needed?

EPI On-Call is a 24/7 system

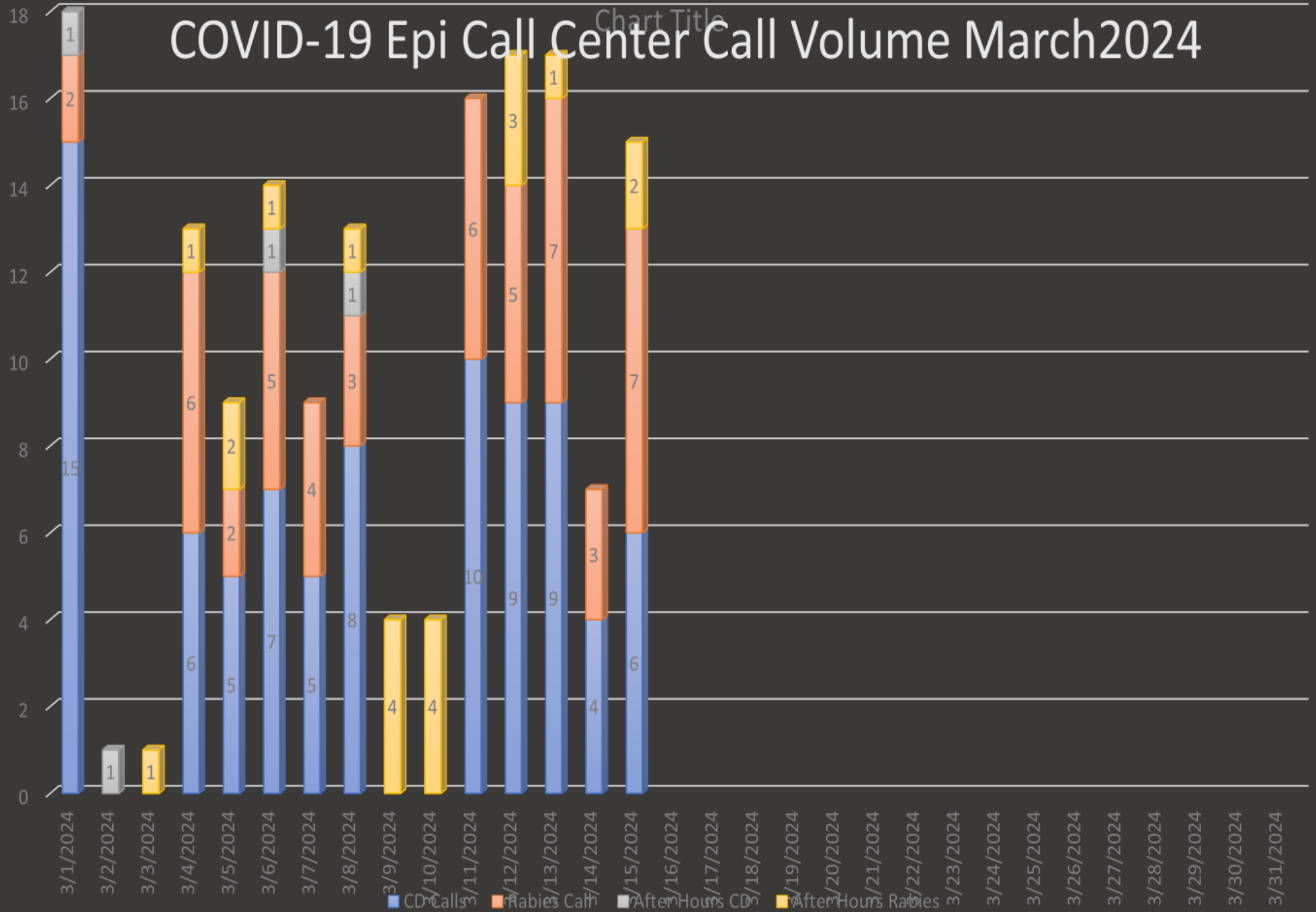
- answered by person from 0800-1700

- monitored voicemail line checked by CDB staff after hours

- public health & healthcare facilities should be prepared to wait 15-30 minutes to receive a call back.

**For emergent concerns, PHP&R can be contacted at
888-820-0520**

COVID-19 Epi Call Center Call Volume March 2024



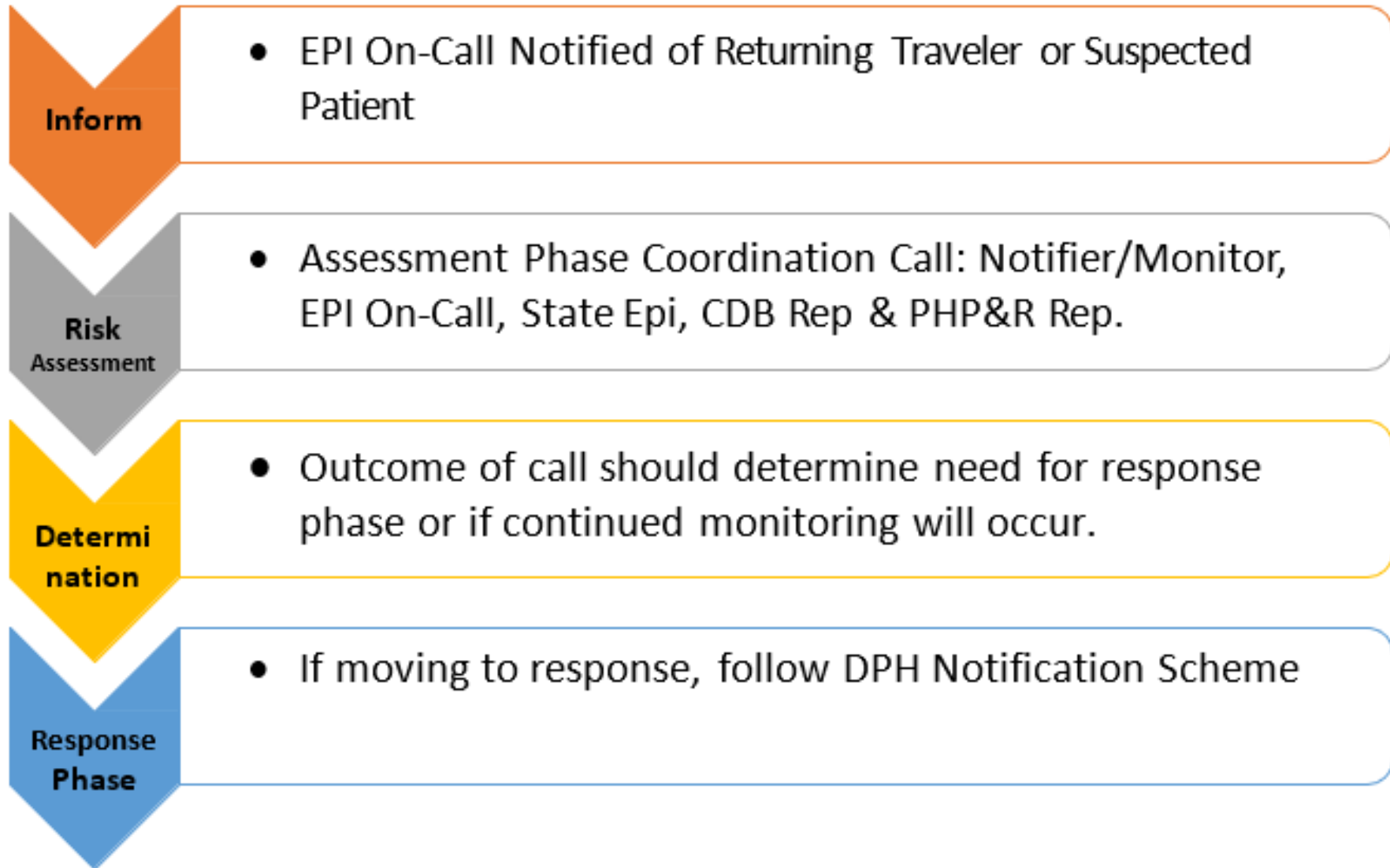


WEBINAR SERIES

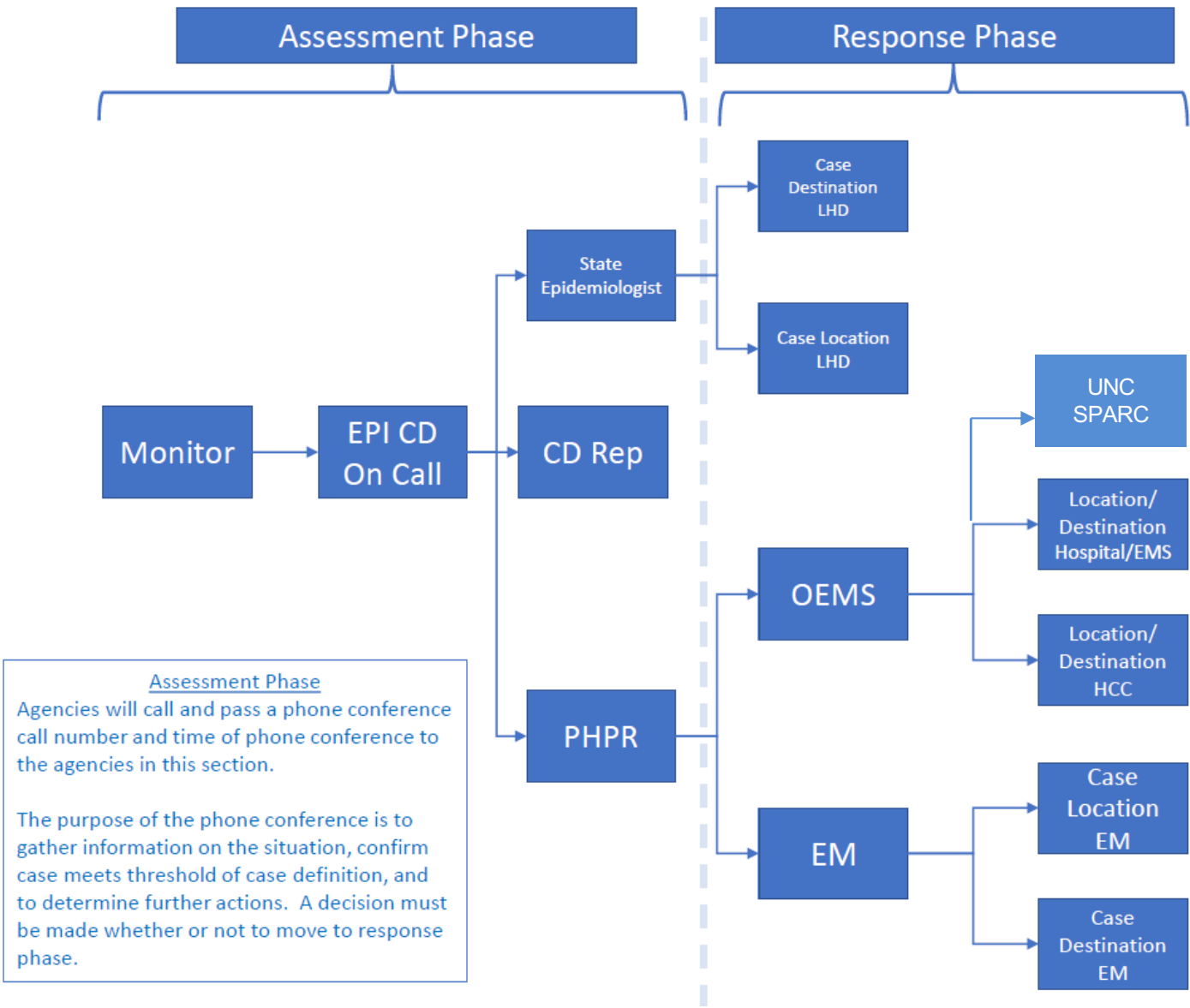
Identify, Isolate, and Inform - The I's Have It!



DPH Notification Scheme Assessment Phase Steps:



**North Carolina
Division of Public
Health
HCP ConOps Alert &
Notification Scheme
February, 2024**



Assessment Phase
Agencies will call and pass a phone conference call number and time of phone conference to the agencies in this section.

The purpose of the phone conference is to gather information on the situation, confirm case meets threshold of case definition, and to determine further actions. A decision must be made whether or not to move to response phase.

Response Phase
Designated agencies from the verification phase will call and pass a phone conference call number and time of phone conference to the agencies in this section.

The purpose of this phase is to conduct a phone conference to brief stakeholders on the situation, and determine a plan for the medical management of the case.

Response Phase

- **Begins when it is determined that an individual meets the threshold for testing for HCP.**
- **Response phase begins with a coordination call between all designated entities: State Epi, CDB, PHP&R, HPP, LHDs, EMS Agencies, Hospitals, NCEM, Local EM, RESPTC**
- **Identify next steps to include coordination with NC State Lab of Public Health (SLPH) on testing**

SLPH Testing

Bioterrorism and Emerging Pathogens Unit

<https://slph.dph.ncdhhs.gov/ebola/default.asp>

NCDHHS State Laboratory of Public Health

DHHS > DPH > SLPH > Bioterrorism > Ebola Preparedness

Ebola Preparedness: Ebola Virus Testing

Clinical Laboratory Guidance

The following information is provided in the event a specimen is to be collected and sent to the North Carolina State Laboratory for Public Health to be tested for Ebolavirus. This testing is performed by the Bioterrorism and Emerging Pathogens (BTEP) Unit. **All requests for testing must be approved by the Communicable Disease Branch (919-733-3419) prior to collecting samples.** Please refer to the following documents for more information.

- [N.C. SLPH Frequently Asked Questions regarding Ebola Virus Testing](#) (PDF, 237 KB)
- [Checklist for Submitting Ebola Samples to the NCSLPH-BTEP Unit](#) (PDF, 260 KB)

Required Specimen Forms

You must send all 2 forms with each sample set.

- [DHHS 5010: BT and Emerging Pathogens Clinical Form](#)
- [CDC 50.34 DASH Form](#) (CDC website)

Additional Resources

- [DPH > Epidemiology: Ebola Hemorrhagic Fever](#)
- [DHHS Ebola Information](#)
- [CDC Ebola Website and information](#)

BTEP Contact Information

BTEP Main Line: 919-807-8765
24/7 Duty Phone: 919-807-8600
BTEP Fax Number: 919-715-1840

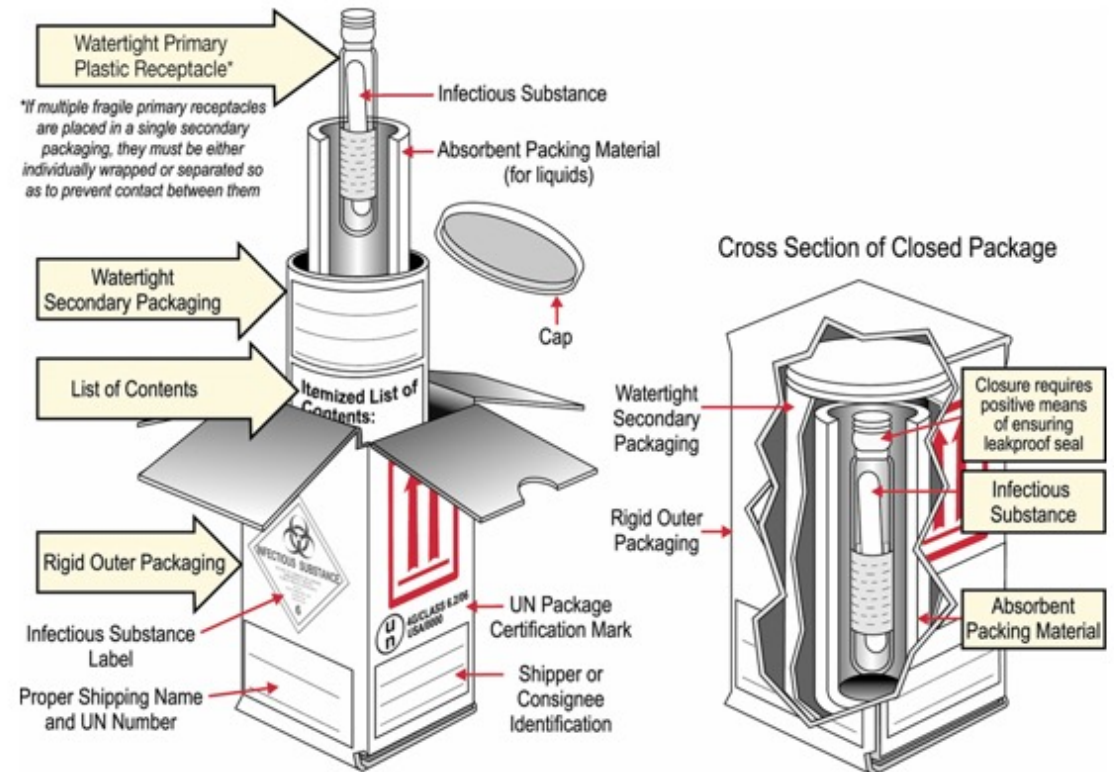
SLPH Bioterrorism Information

- [Agents of Concern](#)
 - [Coronavirus Disease 2019 \(COVID-19\)](#)
 - [Bacillus anthracis](#)
 - [Bacillus cereus biovar anthracis](#)
 - [Brucella spp](#)
 - [Burkholderia spp](#)
 - [Ebola Virus](#)
 - [Francisella tularensis](#)

- Contact BTEP 24/7 at 919-807-8600
 - Epi as well as CDC approval required to conduct testing
- Specimen: 2 plastic EDTA whole blood tubes
 - Adult tubes: 4ml in each
 - Pediatric tubes: 1-2ml in each
- Submission forms
 - DHHS 5010 – BTEP Clinical Form
 - DASH 50.34 – CDC Form
- Category A packaging
- Transportation

Category A Packaging and Shipping

- Triple layer packaging
 - Primary container - sealable specimen container wrapped with absorbent material
 - Secondary container - watertight and leak-proof
 - Outer rigid container that meets Cat A shipping requirements of marks and labels
- Requires training and certification
- <https://slph.dph.ncdhhs.gov/labimprovement/labtraining.asp>



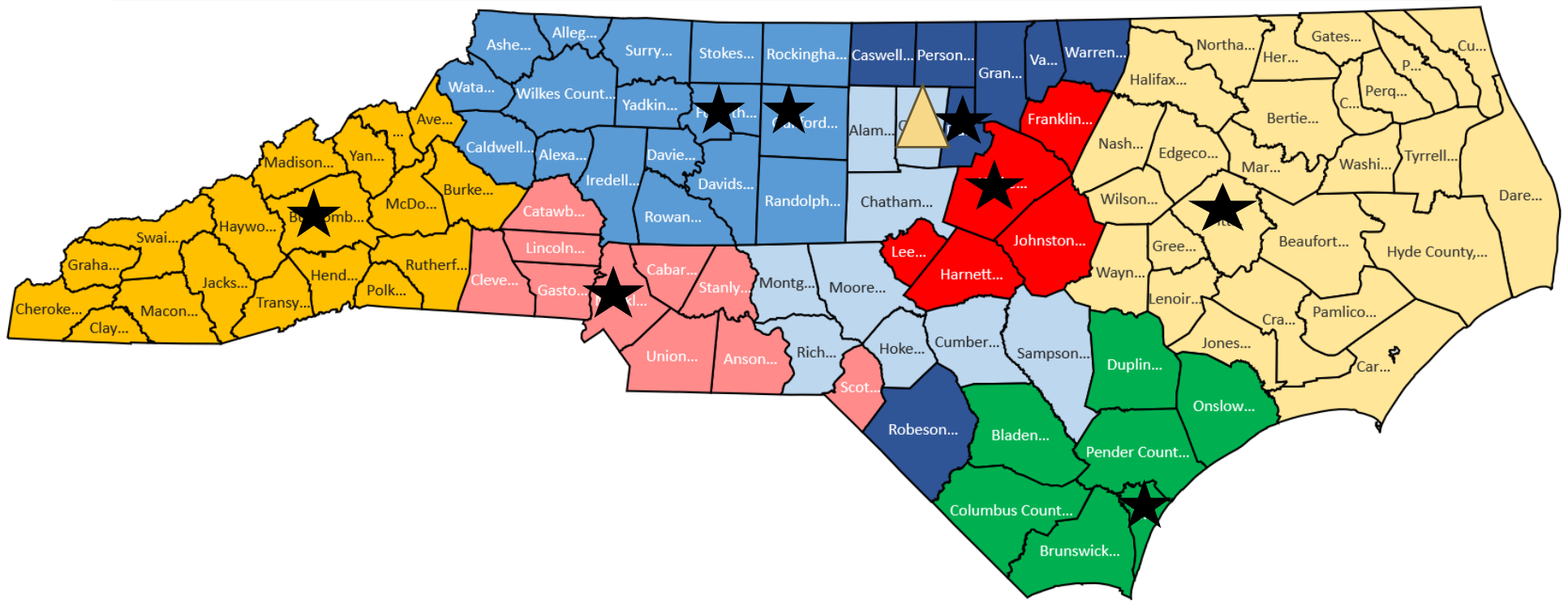
Patient Movement Considerations

- **Personally Owned Vehicle (POV)** – individual is healthy, monitoring at home and able to drive self to hospital etc.
- **EMS Transport** – individual is unable to drive themselves and/or requests to be transported via EMS to hospital etc.
- **Interfacility Transfer** – patient needs to move from hospital to hospital due to higher level of care needed (e.g., to assessment hospital or to treatment center)

Patient Movement Considerations

- **Transportation Time**
- **Timeline for transportation to begin**
- **Weather Status (originating and receiving locations)**
- **Patient Fitness for Travel**
- **Transportation Routes**
- **Pass-through states if applicable**
- **Category A Waste Disposal**

North Carolina HCP Assessment Hospitals



UNC Special PAthogen Response Center (SPARC)



UNC Special Pathogens Response Center (SPARC)

- 1 of 13 Regional Emerging Special Pathogen Treatment Centers (RESPTC) in the US

What is a RESPTC?

- Established in 2015 by the US Department of Health and Human Services (DHHS) Office of the Administration for Strategic Preparedness and Response (ASPR)
- Goal to improve the capabilities of healthcare facilities to provide safe & effective care to patients with Ebola and other special pathogens in the US
- Enhanced capability and capacity to care for highly infectious diseases, and serve as regional hubs for the National Special Pathogen System (NSPS)
- Continuously ready and available to care for a special pathogen patients medically evacuated from overseas or diagnosed within the United States

UNC SPARC

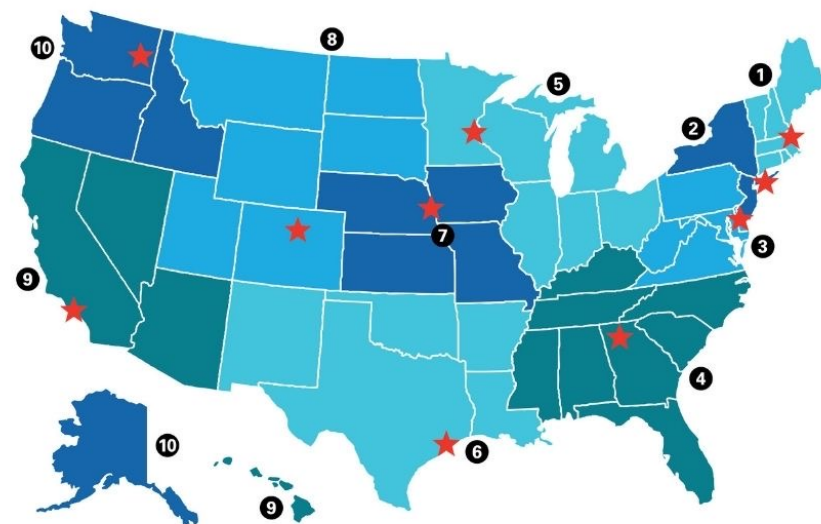


13 Clinical centers, at least one in each HHS region, were established to:

- Care for people with a special pathogen
- Support training and capacity of others in the region

UNC will

- Serve as a leading provider of care to sustain and improve healthcare system preparedness for emerging special pathogens
- Provide training and support to healthcare facilities within Region IV
- Build emerging special pathogen research capacity



Our Responsibilities

- ✓ **Create unit and processes to support care of 2 people with a special pathogen safely within 8 hours of notice**
- ✓ **Train and educate an internal response team**
- ✓ **Train and educate regional healthcare actors to enhance preparedness**
- ✓ **Provide material support during an outbreak**
- ✓ **Provide community education and awareness during and in between outbreak events**

PHP&R MCM UNIT PROVIDES MCM SUPPORT FOR HIGH CONSEQUENCE PATHOGENS

The PHP&R Medical Countermeasures Unit:

- Facilitates countermeasure requests between Local, State and Strategic National Stockpile partners
- Provides guidance and support related to regulatory mechanisms, logistics details, and drug delivery
- Pre-planning with UNC SPARC team to ensure rapid access to treatments

For Urgent MCM Support:

Phpr.nc@dhhs.nc.gov
1-888-820-0520

**Tim Davis, PharmD
MCM Coordinator**
Tim.davis@dhhs.nc.gov
252-822-2477



	Drug	Trade Name	Disease/Threat	Source	Regulatory Mechanism
VAX	<u>rVSV-ZEBOV</u>	<u>Ervebo</u>	Ebola Zaire	SNS	FDA approved
Treatments	<u>Ansuvimab-zykl</u>	<u>Ebanga</u>	Ebola Zaire	SNS	FDA approved
	<u>Atoltivimab, maftivimab, and odesivimab-ebgn</u>	<u>Inmazeb</u>	Ebola Zaire	SNS	FDA approved
	MBP134	-	Ebola Sudan	Mapp Biopharmaceuticals (SNS in the future)	<u>eIND</u>
	MBP091	-	Marburg	Mapp Biopharmaceuticals (SNS in the future)	<u>eIND</u>
	Ribavirin (IV)	-	Lassa Fever	Bausch Health	<u>eIND</u>
	<u>Arevirumab</u>	-	Lassa Fever	<u>Zalgen Labs</u>	<u>eIND</u>

SNS can also provide supportive medications (pain, nausea, IV fluids) and PPE

Questions & Answers

Please sign-in here:



<https://nc.readyop.com/fs/4e7Z/d6801ee0>