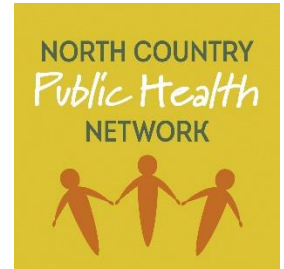# Public Health Emergency Preparedness
Glossary of Terms

Access and functional needs: Refers to persons who may have additional needs before, during and after an incident in functional areas, including but not limited to: maintaining health, independence, communication, transportation, support, services, self-determination, and medical care. Individuals in need of additional response assistance may include those who have disabilities; live in institutionalized settings; are older adults; are children; are from diverse cultures; have limited English proficiency or are non-English speaking; or are transportation disadvantaged (U.S. Federal Emergency Management Agency definition).

Acquire: Refers to requesting medical materiel (inclusive of medical countermeasures) from the stockpile source or otherwise obtaining it from commercial sources or through mutual aid agreements.

Administer: For the purposes of Medical Countermeasure Dispensing and Administration, this term refers to the act of a clinician or other trained provider giving a medical countermeasure to an individual according to protocols established for that incident, ensuring

- The right individual
- The right medical countermeasure
- The right timing, including the correct age and interval, as well as before the product expiration time and date
- The right dosage
- The right route, including the correct needle gauge, length, and technique
- The right site
- The right documentation

Some medical countermeasures must be administered by a clinician or other trained personnel, such as vaccines administered by injection. This task is different from dispensing medical countermeasures when an individual can independently take a pill or use a device without further clinical supervision.

Alert: Time-sensitive tactical communication sent to parties potentially impacted by an incident to increase preparedness and response. Alerts can convey 1) urgent information for immediate action, 2) interim information with actions that may be required in the near future, or 3) information that requires minimal or no action by responders. CDC's Health Alert Network is a primary method of sharing cleared information about urgent public health incidents with public information officers; federal, state, local, tribal, and territorial public health practitioners; clinicians; and public health laboratories.

At-risk individuals: At-risk individuals are people with access and functional needs that may interfere with their ability to access or receive medical care before, during, or after a disaster or emergency. Irrespective of

More terms and general information about Public Health Emergency Preparedness can be found here:

specific diagnosis, status, or label, the term "access and functional needs" is a broad set of common and cross-cutting access and function-based needs. The 2013 Pandemic and All-Hazards Preparedness Reauthorization Act defines at-risk individuals as children,
older adults, pregnant women, and individuals who may need additional response assistance. Examples of these populations may include but are not limited to individuals with disabilities, individuals who live in institutional settings, individuals from diverse cultures, individuals who have limited English proficiency or are non-English speaking, individuals who are transportation disadvantaged, individuals experiencing homelessness, individuals who have chronic medical disorders, and individuals who have pharmacological dependency (U.S. Department of Health and Human Services definition). However, jurisdictions should use their own discretion in determining which populations are at risk to be disproportionately impacted by a particular incident or event.

Chain of custody requirements: Tracking of possession of and responsibility for medical materiel during the distribution process.

Closed point of dispensing (closed POD or CPOD): For the purposes of Medical Countermeasure Dispensing and Administration, this term refers to a dispensing site that servesa defined population and is not open to the public.

Community emergency response team (CERT): A program that educates volunteers about disaster preparedness for the hazards that may impact their area and trains them in basic disaster response skills, such as fire safety, light search and rescue, team organization, and disaster medical operations. CERT offers a consistent, nationwide approach to volunteer training and organization on which professional responders can rely during disaster situations, which allows them to focus on more complex tasks.

Community mitigation strategies: For the purposes of Nonpharmaceutical Interventions, community mitigation strategies refer to

- Isolation
- Quarantine
- Restrictions on movement and travel advisories and warnings
- Social distancing
- External decontamination
- Hygiene
- Precautionary protective behaviors

Critical workforce: For the purposes of Medical Countermeasure Dispensing and Administration, this term refers to personnel required to maintain critical infrastructure. Specific personnel considered to be critical workforce depends on the incident and jurisdictional characteristics.

Demobilize: Release and return of resources that are no longer required for the support of an incident or event.

Deployment: The movement of assets, including personnel, to a specific area.

Dispensing: For the purposes of Medical Countermeasure Dispensing and Administration, dispensing means to prepare and give out a medication to targeted individuals.

Distribution assets: Resources needed to transport medical materiel during an incident or event response, such as personnel, equipment, supplies, and technology.

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Distribution site: Locations that receive medical countermeasures for eventual transport to dispensing/administration sites. These locations include receipt, stage, store (RSS) sites, regional distribution sites, local distribution sites, hospitals, or other sites.

Durable medical equipment: Equipment that can withstand repeated use, provides therapeutic benefits to a patient in need because of certain medical conditions or illnesses, and can be recovered after an emergency, such as ventilators.

EMD: Emergency Management Director

EOC: Emergency Operations Center

Essential Public Health Services: Public health activities that all communities should undertake. The Core Public Health Functions Steering Committee developed the framework for the Essential Services in 1994. The committee included representatives from U.S. Public Health Service agencies and other major public health organizations. The 10 Essential Public Health Services are

1. Monitor health status to identify and solve community health problems
2. Diagnose and investigate health problems and health hazards in the community
3. Inform, educate, and empower people about health issues
4. Mobilize community partnerships and action to identify and solve health problems
5. Develop policies and plans that support individual and community health efforts
6. Enforce laws and regulations that protect health and ensure safety
7. Link people to needed personal health services and assure the provision of health care when otherwise unavailable
8. Assure competent public and personal health care workforce
9. Evaluate effectiveness, accessibility, and quality of personal and population- based health services
10. Research for new insights and innovative solutions to health problems

Event: A planned, non- emergency activity, such as a concert, convention, parade, or sporting event.

Health alert network (HAN):
A primary method of sharing cleared information about urgent public health incidents with public information officers; federal, state, local, tribal, and territorial health practitioners; clinicians; and public health laboratories.

Hierarchy of controls: A framework used as a means of determining how to implement feasible and effective control solutions.

Hygiene: Behaviors that can improve cleanliness and lead to good health, such as frequent hand washing, face washing, and bathing with soap and water.

Incident: An occurrence, either human-caused or naturally occurring, that requires action to prevent or minimize loss of life or damage to property or natural resources. In the context of the capability standards, the term "incident" is used to describe any scenario, threat, disaster, or other public health emergency.

Incident Command System (ICS): ICS is a management system designed as part of the Federal Emergency Management Agency's (FEMA's) National Incident Management System (NIMS) to enable effective and efficient domestic incident management by integrating a combination of facilities, equipment, personnel,

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procedures, and communications operating within a common organizational structure. ICS is normally structured to facilitate activities in five major functional areas: command, operations, planning, logistics, intelligence and investigations, finance, and administration. It is a fundamental form of management, with the purpose of enabling incident managers to identify the key concerns associated with the incident—often under urgent conditions—without sacrificing attention to any component of the command system.

Isolation: The separation of persons who have a specific infectious illness from those who are healthy and the restriction of their movement to stop the spread of that illness. Isolation allows for the focused delivery of specialized health care to people who are ill and protects healthy people from getting sick.

Joint Information Center (JIC): A facility established to coordinate all incident-related public information activities. It is the central point of contact for all news media at the scene of the incident. Public information officials from all participating agencies should collocate at the JIC.

Jurisdictions: Planning areas, such as cities, counties, states, regions, territories, and freely associated states.

Local Emergency Operations Plan (LEOP)

MACE: Multi-Agency Coordinating Entity

Medical countermeasures: Medicines and medical supplies that may be used to prevent, mitigate, or treat the adverse health effects of an intentional, accidental, or naturally occurring public health emergency. In the capabilities document

- Medical Countermeasure Dispensing and Administration focuses on the pharmaceutical medical countermeasures, such as biologic products, such as vaccines, blood products, or antibodies)and drugs for example, antimicrobial or antiviral drugs.
- Medical Material Distribution and Management discusses medical materiel, of which medical countermeasure is a subset. Medical materiel also covers personal protective equipment, ventilators, syringes, and other items
- Public Health Laboratory Testing covers diagnostics material to identify threat agents

Other items, such as window screens and insect repellents, may be considered as medical countermeasures, depending on the needs of the public health emergency.

Medical material: Medical Material Distribution and Management, any equipment, apparatus, or supplies that are needed to prevent, mitigate, or treat the adverse events of a public health incident. Medical material may include medicines, vaccines, durable medical equipment, ventilators, personnel protective equipment for responders, ancillary medical supplies, and laboratory supplies and assays.

Medical Reserve Corps (MRC): A national network of local groups of volunteers engaging local communities to strengthen public health, reduce vulnerability, build resilience, and improve preparedness, response, and recovery capabilities.

Memorandum of understanding (MOU): A document that describes a broad concept of mutual understanding, goals, and plans shared by the parties.

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Mental/behavioral health: An overarching term to encompass behavioral, psychosocial, substance abuse, and psychological health.

National Disaster Medical System (NDMS): A cooperative asset-sharing program that augments local medical care when an emergency exceeds the scope of a community's hospital and health care resources. The emergency resources, which include approximately 8,000 medical and support personnel, come from federal, state and local governments, the private sector, and civilian volunteers.

National Incident Management System (NIMS): A comprehensive, national approach to incident management developed by FEMA that is applicable at all jurisdictional levels and across functional disciplines. It is intended to

1. Be applicable across a full spectrum of potential incidents, hazards, and
2. impacts, regardless of size, location or complexity
3. Improve coordination and cooperation between public and private entities in a variety of incident management activities
4. Provide a common standard for overall incident management

NIMS provides a consistent nationwide framework and approach to enable government at all levels (federal, state, local, tribal, and territorial), the private sector, and nongovernmental organizations (NGOs) to work together to prepare for, prevent, respond to, recover from, and mitigate the effects of incidents regardless of the incident's cause, size, location, or complexity. Consistent application of NIMS lays the groundwork for efficient and effective responses, from a single agency fire response to a multiagency, multijurisdictional natural disaster or terrorism response.

Pandemic influenza alert level: Pandemic influenza phases reflect the World Health Organization's risk assessment of the global situation regarding each influenza virus with pandemic potential that is infecting humans. These assessments are made initially when such viruses are identified and are updated based on evolving virological, epidemiological, and clinical data. The phases provide a high-level, global view of the evolving picture.

Partners and stakeholders:
As referenced throughout the capabilities, partners and stakeholders refer to the diverse array of groups and individuals that public health agencies should engage to support the preparedness and response needs of the whole community. Many different kinds of communities, including communities of place, interest, belief, and circumstance can exist both geographically and virtually, such as online forums. A whole community approach attempts to engage the full capacity of the private and nonprofit sectors, including businesses, coalitions, faith-based organizations, disability organizations, and the public, in conjunction with the participation of federal, state, local, tribal, and territorial governmental partners.

PHN: Public Health Network

Personal protective behaviors: Personal behaviors to prevent the transmission of infection, such as coughing into your elbow, cover sneezing, hand washing, and keeping your hands away from your face.

Ports of entry: Places where persons and goods are allowed to pass into and out of a country, such as airports, water ports, and land border crossings, and where U.S. Customs and Border Protection officers are stationed to inspect or appraise imported goods.

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Preparedness cycle:
A continuous cycle of planning, organizing, training, equipping, exercising, evaluating, and taking corrective action in an effort to ensure effective coordination during incident response. This cycle is one element of a broader National Preparedness System to prevent, respond to, and recover from natural disasters, acts of terrorism, and other disasters.

Quarantine: The separation and restriction of movement of people who were exposed to a contagious disease to see if they become sick.

RCC: Regional Coordinating Committee

Regional Public Health Emergency Annex (RPHEA) provides the organizational and operational framework to prepare for, respond to, and recover from public health emergencies in the North Country Public Health Region (PHR).

Receipt, stage, store (RSS) facility: Acts as the hub of the distribution system of the state or local jurisdiction to which assets are deployed.

Situational awareness: Capturing, analyzing, and interpreting data to inform decision making in a continuous and timely cycle. National health security calls for both routine and incident-related situational awareness.

Situational awareness helps identify resource gaps, with the goal of matching available and identifying additional resources to current needs. Ongoing situational awareness provides the foundation for successful detection and mitigation of emerging threats, better use of resources, and better outcomes for the population.

Social distancing: Within the workplace, social distancing measures could take the form of

- Modifying the frequency and type of face-to-face employee encounters, such as placing moratoriums on hand-shaking, substituting teleconferences for face-to- face meetings, staggering breaks, and posting infection control guidelines
- Establishing flexible work hours or work sites, such as telecommuting
- Maintaining three-feet spatial separation between individuals
- Implementing strategies that request and enable employees with influenza to stay home at the first sign of symptoms

Spontaneous volunteers: Unaffiliated or unregistered volunteers with known participating volunteer organizations during an incident or event.

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