DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

Centers for Disease Control
and Prevention (CDC)
Atlanta GA 30333

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Patrick J. McConnon, M.P.H.
Executive Director
Council of State and Territorial Epidemiologists
2872 Woodcock Boulevard, Suite 303
Atlanta, Georgia 30341-4015

Dear Mr. McConnon:

Thank you for your letter regarding the Council of State and Territorial Epidemiologists (CSTE) position statement 06-EH-02, "Improving the Tracking of Events, Exposure and Disease during a Chemical/Radiological Disaster or Terrorist Event."

The Centers for Disease Control and Prevention (CDC) agrees with the CSTE Position Statement 06-EH-02. During chemical, radiologic, technological, and naturally occurring emergency events, it is essential that we have the capability of measuring the public health impact of the event through effective and consistent data collection strategies. Your proposal calling for multi-jurisdictional agreements and standard data collection tools can have a significant impact on our ability to both manage an emergency event effectively and compare separate events with consistent data collection instruments, thus improving our ability to respond between public health emergency events. The Centers for Disease Control and Prevention (CDC) appreciates the continued support of CSTE. Our partnership continues to advance our shared goal of protecting the health of the public. We also appreciate the position statement you provided for our review. Enclosed are some comments from CDC staff.

We look forward to continuing to work with you.

Sincerely,

Julie Louise Gerberding, M.D., M.P.H.
Director

Enclosure

CDC Comments on CSTE Position Statement 06-EH-20: "Improving the Tracking of Events, Exposure and Disease during a Chemical/Radiological Disaster or Terrorist Event"

CDC agrees with CSTE statement that recommends developing memoranda of agreement to ensure public health workers share data during emergency events and that data collection instruments that are consistent at all levels of the emergency response infrastructure, including the local, state, and federal levels. CDC supports the CSTE proposal to convene workgroups of state and federal officials to provide in-depth assessments and reports on topics such as: (1) determining best practices regarding memoranda of agreements between local, state, and federal agencies that address how to contribute multijurisdictional information and access this information during and after a disaster and (2) identifying and recommending standard questions, formats, and tools that federal agencies and states have developed and used for obtaining multiple types of information required in a multijurisdictional emergency. These measures can have a tremendous long-term benefit on public health emergency preparedness and emergency response. Actions such as these will improve our ability to coordinate effectively during a public health emergency response and ensure that emergency managers at all levels of the response have access to the same data for making critical decisions in a timely manner. The proposed meeting and outcomes could help to improve all types of public health emergency response, whether biological, chemical, and radiological in nature. Accurate data and rapid dissemination of information are critical for coordinating an appropriate response to such events. Emphasis should also be placed on efficient mechanisms and strategies for data sharing from both a technological and a public health emergency management perspective that takes into account security and privacy issues.

CDC has evaluating commercially available software to determine viable options for sharing data on emergency events simultaneously at the local, state, and federal emergency response levels. We consider this a critical step in shaping our strategy and ability to cllect and provide information during emergency events. The recommendations in CSTE position statement 06-EH-02 are clearly consistent with effort.