

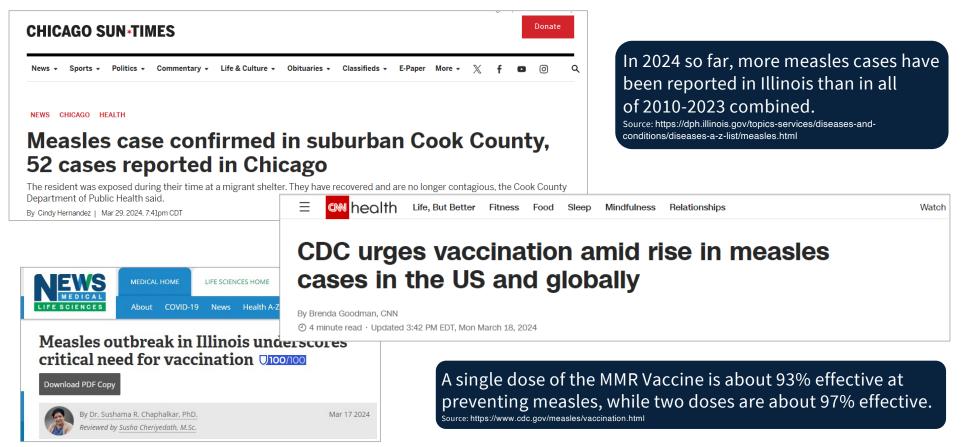
Community Immunization Program







Why do we need an Immunization Program?









Historical Context

- CCDPH immunization clinics closed in 2014, staff transitioned to CCH, lost VFC status
- Intention to deliver immunizations to residents in the setting of PCMH
- Ad hoc mobile clinics done for post-exposure prophylaxis in outbreak setting (measles)
- Responded to IDPH request to increase hepatitis A immunization coverage during multistate outbreak in 2018
- Activities during COVID included contracted in-home and mobile, some CCDPH-run mobile
- Distributed vaccine and therapeutics during 2022 Mpox outbreak





Environmental Scan

Major Program Elements at other Local Health Departments

Direct Immunization

- Brick-and-mortar
- Mobile clinics
- Pop-up events in the community, esp schools

VFC Support

- Technical assistance
- Increase VFC enrollment

Surveillance

 Community-level immunization rates

Provider Education/Outreach

- Timely vaccine updates
- Hot topic Q&A

Public Education/Outreach

- Unified messaging
- Educational materials

School and CBO Education/Outreach

- Regular meetings
- Maintain resource lists







Program Areas

- 1. Data analysis and dissemination
- 2. Community engagement and coordination
- 3. Health education campaigns
- 4. Emergency preparedness: exercises, outbreak rapid response, vaccine redistribution
- 5. Advocacy: decreasing barriers to VFC participation
- 6. Community vaccination events, with linkage to care











Next Steps

- 1. Planning off-hours COVID-19/Influenza immunization clinics at suburban Cook ACHN sites this fall
- 2. Engaging with colleagues at CountyCare to begin to leverage data to improve community provider immunization rates
- 3. Hiring for a Manager Community Immunizations to begin shortly
- 4. Continue planning for program start-up





Emergency Preparedness and Response Unit







Emergency Preparedness and Response Unit - Purpose

The CCDPH Emergency Preparedness and Response Unit (EPRU) coordinates public health efforts in partnership with various disciplines: local, county, state and federal agencies to effectively <u>plan for, respond to, and recover from public health events (natural disasters, disease outbreak or bioterrorism), impacting the health and wellbeing of Suburban Cook County (SCC) residents.</u>

This work is a federal imperative for state and local public health departments and is funded through two ongoing grants from CDC, via IDPH:

- Public Health Emergency Preparedness Grant \$973,840
- Cities Readiness Grant \$207,320





Why do we need an Emergency Preparedness and Response Unit?

The Public Health Accreditation Board (PHAB) has recognized emergency preparedness and response as a foundational public health service because emergencies can disrupt health systems and negatively impact population health.

Our work:

- Minimizes injuries and deaths
- Prevents disease outbreaks and illnesses
- Ensures safe housing and facilities
- Protects health care facilities and services
- Recovers, rebuilds, and strengthens health systems







Lessons Learned During the COVID-19 Pandemic

- Staff capacity:
 - Gaps in CCDPH staff capacity limited response efficacy
- Facilities:
 - Pandemic response requires large facility and systems to store and distribute PPE, test kits, and vaccine
- Planning:
 - Bioterrorism focused plans lacked specificity for responding to pandemic events
 - Strong relationships with healthcare providers necessary for strong response
- Training and Exercise
 - · All plans require regular training and exercising in order to test and validate





Emergency Preparedness Readiness



CAPACITY EXPANSION



- 7 to 12 FTEs
- Increased capacity for:
 - Management
 - Planning
 - Inventory
- Lessons learned (COVID-19)



- Pandemic Preparedness
- Employee Notification
- All-Hazards
- Mass Dispensing
- 6 Others (in queue)



- 16,000 square feet
- Centrally located
- 10-year lease
- Fully operational Q4

PEOPLE

PLANS

WAREHOUSE



Staff Capacity - Organizational Chart - 2024

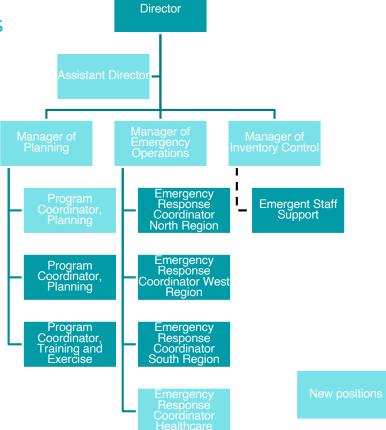
Increased to 12 FTEs to address capacity needs

- Increased overall management capacity
- · Strengthened planning capacity
- Developed inventory management capacity
- Modifying JDs to allow emergency staff support for inventory operations

ALL changes responsive to lessons learned from COVID-19 pandemic







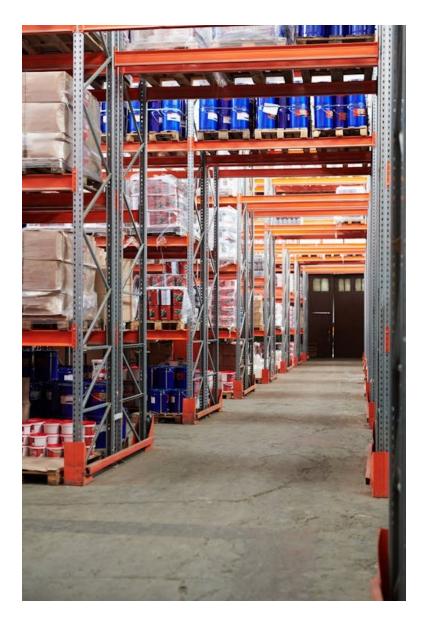
Facilities

New, centrally located warehouse

- Once operational, will be used to store vaccine and therapeutics along with a modest cache of PPE
- May also receive shipments from Strategic National Stockpile (vaccine, medications, PPE, equipment)
- 15,850 square feet, centrally located, close to major expressways
- Lease approved by CCH Board, CC Board of Commissioners
- Renovations underway, expected fully operational Q4 2024 / Q1 2025





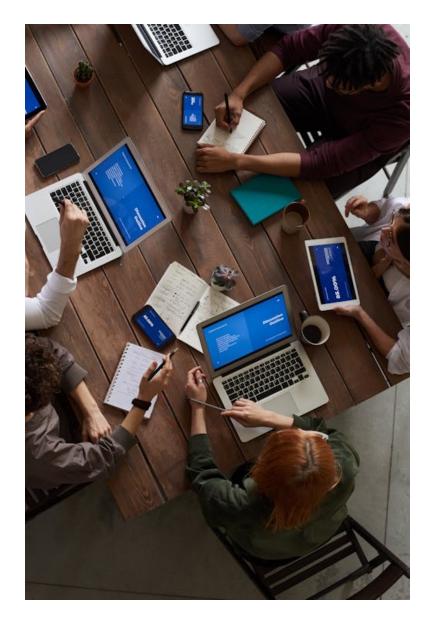


Planning

- Emergency planning is critical to ensure CCDPH staff and partners have the systems, equipment, and capacity to respond to public health emergencies
- All CCDPH emergency response plans strengthened and updated with lessons learned from COVID-19.
- Pandemic Preparedness and Medical Countermeasures
 Dispensing plans will be updated by Q4 2025
- CCDPH has been building relationships with suburban Cook County healthcare providers. We are planning to convene providers for regular public health updates.









Training and Exercise

Staff regularly participate in drills and exercises with Federal, State and local partners

- Southwest suburban chemical spill exercise
- Internal CCDPH Incident Command System Workshop

Trainings and exercises provide a low-risk environment to:

- Test capabilities
- Familiarize personnel with roles and responsibilities
- Foster meaningful interaction with internal and external partners
- Improve communication across organizations

Questions?



