

The Strategic National Stockpile and You

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June, 2023

A Sneak Peek

- What is the Strategic National Stockpile (SNS)?
- What is the history of the SNS?
- What is in the SNS?
- What are the components of the SNS?
- What does the SNS program look like in NH?
- What role might you play in the SNS?
- What is the future of SNS in NH?
- Questions?



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What is the Strategic National Stockpile (SNS)?

Caches of pharmaceuticals, medical supplies and equipment that can be rapidly deployed to areas during public health emergencies to supplement local/regional resources that have been depleted or are in danger of being depleted.

- Maintained by the Administration for Strategic Preparedness & Response (ASPR)
- 4 Main Components:
 - Push Pack
 - Managed Inventory
 - Federal Medical Stations (FMS)
 - ► CHEMPACK
- Purchasing Power
- Continuous Process



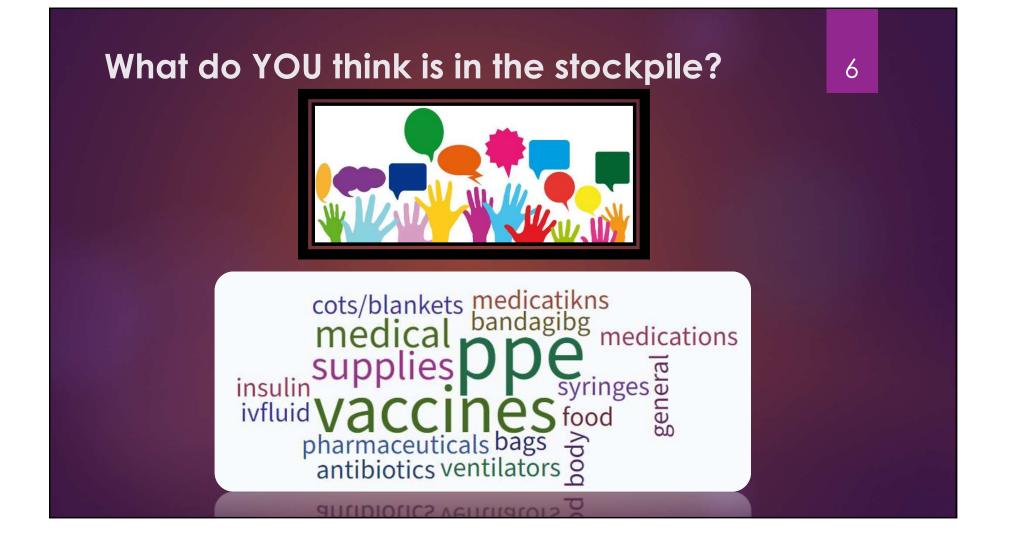
Photo from https://www.npr.org/2022/12/23/1144989780/strategic-national-stockpile-medical-warehouses

A Little History

- Created in 1999
 - Ensure readiness, for diseases such as:
 - ~ Botulism ~ Anthrax ~ Smallpox
 - ~ Plague ~ Tularemia ~ Viral
 - Hemorrhagic Fever ~ pandemic influenza
- Homeland Security Act of 2002
- Project BioShield Act of 2004
- Moved to ASPR in 2018
 - Redesigned and enhanced
 - Division of SNS
- Trainings and exercises



6/5/2023



What is in the stockpile – a sampling 7 As of October 2022, Personal Protective Equipment Available for Deployment Broad spectrum oral and IV (through SNS): antibiotics Other medications for certain illnesses Bandages and wound care items Antitoxins 274 Million 538 Million 4.8 Billion Vaccines Surgical/Face Masks **N95 Respirators** Gloves Ventilators **Respiratory supplies** IV supplies Portable dialysis systems Covid testing kits and vaccine 11.8 Million 59.6 Million 7.6 Million ancillary supplies Surgical Gown & **Face Shields** Goggles Coveralls

SNS Component – Push Pack

- ► 130 cargo containers
- Broad-range pharmaceuticals and medical supplies
- Treatment for broad spectrum of illnesses/threat agents
- Prepackaged for quick delivery
- Ill-defined disease/threat



Photo from https://www.gchd.org/about-us/public-health-preparedness/strategic-national-stockpile

General categories of contents:

- Oral antibiotics
- Intravenous meds and supplies

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- Respiratory meds and supplies
- Pediatric supplies
- Medical/surgical supplies

SNS Component – Managed Inventory

- Bulk of Stockpile
- Pharmaceuticals, Medical Supplies and Equipment
- Storage facilities or vendor contracts
- Threat-Specific/customized
- Speed based on deployability and need
 - ► Typically within 24-36 hours
- ▶ First choice or follow up to Push Pack
- Increased variety of items



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Photo from https://scm.ncsu.edu/scm-articles/article/re-thinking-the-strategic-national-stockpile

SNS Component – Federal Medical Stations

Federal Medical Stations (FMS)

- Assist with patient surge
- ▶ 50 250 patients
 - Primary or critical care
- Pre-identified locations
- Tailored to situation
- ASPR provides start-up supplies
- Jurisdiction responsible for staffing and wrap-around logistics



Photo from https://aspr.hhs.gov/SNS/Pages/Federal-Medical-Stations.aspx

SNS Component - CHEMPACK

- Forward-placed caches of Organophosphate/Nerve Agent antidotes.
 - Faster response times
 - Quicker treatment to limit morbidity and mortality
- EMS and Hospital configurations
- Supplement state and local antidote stocks.
- Containers can be prepositioned near events and
- 'target rich environments.'



- State oversight
 - Cache site (Hospital) partnership
- Federally-managed = sustainable and costeffective.
 - Shelf Life Extension Program



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Photo from https://delvalle.bphc.org

SNS in New Hampshire



- Funding through CDC Public Health Emergency Preparedness cooperative agreement
 - Establish and maintain Point of Dispensing (POD) or Dispensing/ Vaccination Clinic (DVC) sites
 - Maintain Receive, Stage, Store (RSS) warehouse
 - Planning, Training, and Exercises
 - Points of Distribution (POD) and Dispensing/Vaccination Clinics (DVC)
 - ► CHEMPACK
 - Receive, Stage, Store (RSS warehouse)
- Operational Readiness Review
- Cooperation and coordination among multiple partners
 - Increased level of preparedness to respond to real incident
 - ► Familiarity with program and process







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The Push Pack Arrives

- 130 large cargo containers full of a wide variety of STUFF arrives
- NH DHHS needs help! Just <u>some</u> of the tasks to be completed:
 - Receiving
 - Put away
 - Storing
 - Picking
 - Loading
 - Delivering
 - Paperwork/reporting

Distribution

- Deliver to Regions
- Same tasks as RSS
- Different locations



Point of Dispensing Dispensing/Vaccination Cli<u>nic</u>

- Multiple roles, including (but not all!):
 - Greeting and Triage
 - Registration
 - Screening
 - Dispensing
 - Behavioral Health
 - Medical Consult
 - Traffic control/parking
 - Vaccinator, if applicable
 - ► Exit
- Clinical and non-clinical



Other Possibilities.... 19 - Call center Homeland Security Exercise and Evaluation Program (HSEEP) Communications _ Trainings and Exercises Federal Medical Station Integrated Preparedness Plan - Pet assistance

The Future of SNS in NH

- Continue to create and build strong relationships
 - State, local, and private partners
 - Regional Public Health Networks
- Proactive outreach
 - Workshops
 - Training (online and in person)
 - Exercises
- Plan, policy, and procedure maintenance
 - Lessons learned from previous responses
- Always look for ways to improve the program and collaboration



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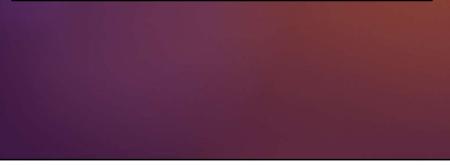


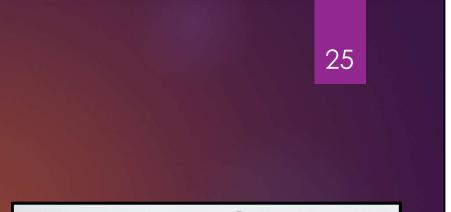




Pics from past exercises



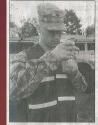






Pics from past exercises

Vaccinations



Army Spc. Jeff Hagan fills a syringe with flu vaccine during the drive-up flu clinic in Hillsborough. NANCY BEAN FOSTER

through registration and partment was to get as many vaccination. people through the clinic as "We wanted to practice in quickly and safely as possmall numbers," said Car- sible. rier. "And the Guard gave us

a captive audience." Each year, the soldiers are have accidents," said Carrequired to get a flu shot, ac- rier. "Our goal is to not have cording to Maj. Mike Terry, and since this was a drill we can keep things moving. weekend, it made sense to bring the soldiers in for the tered upon entering the line test run of the clinic. Terry by having his or her driver's said he was happy to give license scanned into a hand-DHHS an opportunity to held device. A bar code car-test the clinic, but said it was rying the person's identity also good training for some was then affixed to the solof the soldiers who partici- dier's arm. That enabled volpated in administering the unteers at the vaccination station to keep track of who

vaccines. The challenge for the de- was getting the shots.

"The biggest task is con-trolling traffic so we don't bottlenecks at any time so Each soldier was regis-



Continued from Page A1

Volunteers give flu shots to members of the Army National Guard in Hillsborough on Saturday morning during the state Department of Health and Human Services' first practice of a drive-up vaccination clinic.

Soldiers test drive-up vaccine program

state is required to be ready to respond to crises.

By NANCY BEAN FOSTER Union Leader Correspondent

Services practiced its first "We must be prepared to drive-up vaccination clinic. safely and efficiently be able

situation arises, according provide for." to Vicki Carrier of the DHHS HILLSBOROUGH - Members Emergency Services Unit. ment partnered with the of the Army National Guard One of the ways the depart- Army National Guard's in Hillsborough received ment is exploring to deliver 744th Forward Supply Comannual flu shots without emergency medicine as pany in Hillsborough to

• For emergencies: The Under guidance from the to get everyone in the state Centers for Disease Control, treated in case of an emereach state needs to be pre- gency," said Carrier. "We pared to offer vaccinations have a population of 1.3 milor antidotes to threats such lion people in the state, and as anthrax if an emergency that's a large population to

On Saturday, the departleaving the comfort of their quickly as possible, and to hold its first drive-up clinic, cars Saturday as the Depart- as many people as it can, is which allowed soldiers to sit ment of Health and Human through drive-up clinics. in their cars while they went



Sgt. Joe Reed gets a flu shot from volunteer Kim Galbraeth during a drive-up flu clinic for Army National Guard See Vaccinations, Page A6 members in Hillsborough on Saturday. NANCY BEAN FOSTER

The bar codes also help the number of vaccination "We're fortunate to be the department keep track stations. able to work with a very of the clinic's efficiency, so In all, the department was special population," said tweaks can be made to im-propert to give 75 vaccina-from the to an to the to an to a sturday, and the natured, and we haven't had adding personnel to the reg- troops seemed happy with an accident." istration line or increasing the clinic. nfoster@newstote.com



Please list at least one thing you learned from today's presentation

"SNS history" "There are caches of needed supplies" "Depth of medical response and resources availability"

"SNS purpose"

"Chempacks"

"Acronyms" "10 SNS [CHEMPACK] sites" "Pushpack" 27

"Response"

"Chempacks"

"Chempacks!"

"That there are 10 pods [CHEMPACK] located throughout NH"

"It takes a lot of folks to manage" "Comprehensive knowledge of NH SNS OPS"

"How many SNS sites there are" "Logistics"



Questions?



Thank you!

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