## Forensic Epidemiology Version 3.0

Joint Training for Public Health and Law Enforcement on Coordinated Emergency Response

Course Manager's Guide

## **Preface**

#### **Background**

The 2001 anthrax attacks, 2003 SARS outbreak, and specter of an influenza pandemic have required law enforcement, public safety, and public health agencies to work together to respond to acts of bioterrorism, infectious disease outbreaks, and other public health emergencies. The responses to such threats have affirmed the many similarities in the goals and investigative methods used by both law enforcement and public health officials, while at the same time highlighting salient differences in the two disciplines' approaches. In order to foster further understanding between law enforcement and public health and to strengthen interdisciplinary collaborative effectiveness in response to future threats, the Public Health Law Program of the U.S. Centers for Disease Control and Prevention (CDC) developed training materials in *Forensic Epidemiology* in 2002 that have since been delivered throughout the country. A new scenario has now been developed to be used in conjunction with the original course materials created by the CDC. The new scenario emphasizes public health and law enforcement coordination in response to serious infectious disease threats, such as an influenza pandemic.

#### Disclaimer

Course materials are for instructional use only and are not intended as a substitute for professional legal or other advice. While every effort has been made to verify the accuracy of these materials, legal authorities and requirements may vary from jurisdiction to jurisdiction. Always seek the advice of an attorney or other qualified professional with any questions you may have regarding a legal matter.

## **Additional Information and Support**

For technical assistance in planning or delivering this course, please contact:

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#### **Acknowledgments**

CDC gratefully acknowledges assistance and input received in the development of this course from persons in local, state, and federal public health and law enforcement agencies, and in other organizations.

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## Introduction

## **Training Goal**

As noted above, the primary goal for this training is to enhance the joint effectiveness of law enforcement and public health when both disciplines conduct concurrent investigations and coordinated response to a threat or attack. The case study addresses this goal by bringing law enforcement and public health officials together while working through fact-based case scenarios.

#### **Training Strategy**

The course's centerpiece is a case scenario worked on in small groups. The small groups, which include equal numbers of law enforcement and public health officials, address key objectives by reviewing sets of facts, and then by answering questions matched to the objectives. The objectives span a spectrum of issues, including, for example: conducting epidemiological investigations and public health responses in the setting of a crime scene; meshing criminal investigative procedures with epidemiological, laboratory, and other scientific procedures in such settings; and joint law enforcement and public health operations and communications. In addition to improving understanding of relevant laws, approaches, and procedures, the module's delivery is designed to increase participants' familiarity with their law enforcement and public health counterparts in their home jurisdictions. The module also employs a "train-the-trainer" strategy to emphasize peer teaching and to create a force-multiplier capacity for sustainable, additional training within a state or other jurisdictional level.

The case study is designed to be modified to reflect specifics of the jurisdiction in which training is being conducted. Helpful reference tools and resources are included in the additional resources. This Course Manager's Guide provides direction to assist organizers and instructors in the delivery of the course materials.

CDC intends this training module to be used as a self-contained instructional template in any jurisdiction in the United States. CDC, in conjunction with federal, state, and local partners, piloted the instructional modules in Washington D.C. and North Carolina. Through the pilots, the materials were refined. In addition to the piloting organizations, other organizations were consulted during the preparation and piloting of the materials. Each of these organizations was helpful in the compilation of the final product, but CDC is solely responsible for the materials developed for this course.

#### **Course Objectives**

By the end of the course, participants will be able to:

- Understand inter-jurisdictional mutual aid, investigative, and legal coordination between law enforcement and public health agencies
- Describe the legal role of your agency related to a declared state of emergency
- Explain the legal authorities of public health, law enforcement, and other relevant agencies to implement services in emergencies
- Describe your agency's authority and role in a mass evacuation order

#### **Course Delivery**

#### Nine Things You Need to Do to Conduct the Course

To conduct a successful Forensic Epidemiology training, you should do the following:

- 1. Choose participants
- 2. Select a facility
- 3. Choose a course manager
- 4. Assign participants to breakout groups
- 5. Identify breakout group facilitators
- 6. Conduct facilitator training
- 7. Assemble training materials
- 8. Deliver training
- 9. Conduct final evaluation (optional)

#### **Focus**

The **focus of this course** should be public health and law enforcement cooperation in the investigation phase of response to a threat or attack involving coordinated emergency response. Most of the teaching done in the case study will be peer-to-peer. The course addresses this goal by bringing law enforcement and public health officials together while working through a fact-based case scenario.

#### **Participants**

The **ideal set of participants** for the Forensic Epidemiology course would consist of people who would actually work together during a coordinated emergency response, and any additional experts. This course should be used as a way to build local or regional networks and solidarity.

#### **Outcomes**

**Outcomes** of this course will be both increased participant understanding of specific public health and law enforcement facts and processes and also a list of needed actions at the local level, including protocols, agreements, and further training.

# Where Does Forensic Epidemiology Fit into Your Organization's Overall Public Health Emergency Training Strategy?

Since the ideal set of participants for this course comprises people who would work together during a public health emergency in a given jurisdiction or region, this course can be used to build local or regional networks, and therefore, solidarity between public officials representing different entities.

Consider where in a sequence of tabletops, field exercises, and classroom courses this course should fit. Each jurisdiction should have a preparedness plan that can incorporate this course.

#### Case Study Overview

Designed to fit either into the morning, afternoon, or over lunch, this course will take approximately one half-day to deliver. There are three main sections to the training:

welcome and introduction, case study, and discussion / feedback session. First, a welcome and introduction to the course is made, and then course participants are divided into breakout groups that work through the interactive case study. Most of the teaching in the interactive case study is done on a peer-to-peer basis, by bringing law enforcement and public health officials together for combined learning. The methodology recommended is that of a tabletop exercise where participants read the events and discuss answers to questions given in the scenario. The importance of the breakout sessions is the interaction and networking among the various jurisdictional participants and the beginning of joint planning before an event. After the case study, participants reconvene to discuss what they have learned.

## **Course Materials**

Ideally, each participant will be provided with a course folder. The folder should include the case study, agenda, attendance list, and notepaper as well as needed reference materials.

#### **Jurisdictional Customization**

The case study is designed to be customized for the particular jurisdiction where the course is being presented. Throughout the case study, there are places where (this state) and (the state capital) phrases appear, which should be customized to the state where the training is being given.

## **Course Design**

#### General

The design of this course may vary by state / locality and should be decided upon by the course manager. After the number of participants and the participating jurisdictions are decided, the manager must next decide what materials will be covered during the course.

The course has the following sections:

- 1. Course Welcome and Introduction
- 2. Interactive Case Study
  - The case study begins after the introduction
  - Course participants are divided into breakout groups
  - Designed to be approximately a two hour scenario, with an optional 15 minute break
  - Each breakout group discusses scenario and questions
- 3. Discussion / Feedback Session
  - Breakout groups rejoin in plenary session at the end of the training
  - Important lessons learned and questions from the case study are discussed
  - At the discretion of the instructor, follow-up / action steps for the participants may also be discussed
  - An optional evaluation is completed

#### **Materials Available**

- Case Study Course Manager's Guide
  - o Contains agenda, small group report forms, registration form, and an acronym list that can be customized to specific jurisdictions
- Case Study, formatted for participants (without answers)
- Case Study, formatted for facilitators (with answers)
- Additional Materials
  - o Collected Scenarios from Other Developers
    - 2006 FBI Joint Information Sharing Exercise
    - 2005 LA County Forensic Epidemiology Conference Scenario
    - NYC Joint Investigation Brucellosis Scenario
    - NC Division of Public Health Pneumonic Plague Scenario
    - Centers for Public Health Preparedness (CPHP) Collaboration Group Illness in a Poultry Worker Scenario
    - UAB / South Central CPHP Chemical Attack Tabletop Exercise
  - o Original CDC Scenarios (2003)
    - Suspicious Letter in DeKalb County, Georgia
    - Anthrax in Florida
    - Salmonellosis in Oregon
  - o Supplemental Materials
    - Social Distancing Guidance
    - Joint Investigations Handbook
    - Previous Course Forensic Epidemiology version 1.0: Joint Training for Law Enforcement and Public Health Officials on Investigative Responses to Bioterrorism

#### **Agendas and Presentations**

## Sample Agenda

- A sample agenda for the course follows.
  - The specific customizations of the presentations included in the course are left to the discretion of the course manager, but the following timeline and schedule should be kept in mind

# FORENSIC EPIDEMIOLOGY Dates

## Location

| 8:00 am | Registration                                   |                         |
|---------|--|-------------------------|
| 8:30 am | Welcome  | Course Manager or other |
| 8:45 am | Introduction to scenario and group assignments | Facilitator             |
|         |  |                         |

11:15 am **BREAK** 

9:00 am

11:30 am Discussion / Feedback from Participants Course Manager or other

12:00 pm Adjourn

## **Course Attendees**

Who should participate in the Forensic Epidemiology course?

**Facilitated Group Discussion of Scenario** 

- The course design may vary and should be decided upon by the course manager
- The first decision to be made is which jurisdictions the course should target: one jurisdiction (city), one jurisdiction (county), regional (city and county), multijurisdictional (more than one city and / or county), or statewide
- Another decision to make early in the planning process is the number of participants who will attend the course. Courses with a larger number of participants require more intensive planning and additional help, but will increase networking among those who will work together during an emergency

The Forensic Epidemiology Course is designed for mixed groups of law enforcement and public health participants and small-group facilitators. Additional attendance may come from HAZMAT / fire professionals, agency and prosecuting attorneys, public information specialists, and other disciplines directly relevant to public health and the criminal investigation of outbreaks or threatened outbreaks that may also be crimes. The participants will, to a large extent, teach each other about their disciplines as they work through the case study.

- This course is designed for mixed groups of law enforcement, public health, and affiliated professionals (emergency management, legal, public communication, and others)
- In most successful courses, the mix will be about 40 percent public health, 40

Facilitator(s)

- percent law enforcement, and 20 percent other professional groups
- Participants are chosen by the sponsoring organizations
- Participants have an active role in group discussions during the breakout groups
- The recommended criterion for participation is that the participants should be the people who would actually be working together on the investigation of a deliberately caused infectious disease outbreak in one jurisdiction or set of closely linked jurisdictions (e.g., a city, county, or metropolitan area)
- Persons from adjacent jurisdictions who are thinking about putting on a similar course of their own may want to attend as observers
- An alternative approach to a course is to invite persons from an entire state or large region of a state to attend
- For courses in which all participants are from the same or closely linked jurisdictions (e.g., a city and its surrounding county), more attention can be paid to the details of that community's protocols and interagency relationships
- When participants come from multiple jurisdictions, a large geographic area, or even more than one state (e.g., in multistate metropolitan areas), more attention can be paid to interjurisdictional communications and cooperation rather than any one jurisdiction's internal operations

A list of suggested participants follows:

#### Public Health

- Epidemiologists
- Public health investigators
- Public health nurses
- Public health emergency preparedness representatives
- Public health public information officers (PIOs)
- Other public health professionals
- Health department attorneys
- Emergency room staff
- Infection control nurses

#### Law Enforcement

- City police
- County police
- Sheriff's departments
- State police
- United States Attorney's Office representative
- State Attorney's Office representative
- Judges
- Law enforcement public information officers (PIOs)
- FBI Weapons of Mass Destruction (WMD) coordinator
- FBI Crisis Management Coordinator

#### Other Health and Safety Personnel

- Emergency medical services representatives
- City fire department
- County fire department
- HAZMAT
- Public health laboratory representatives
- Forensic / crime lab representatives
- Public safety
- United States Postal Service inspectors
- Military representatives (if located near a military base)
- Food and Drug Administration representatives
- Medical examiner's office
- Other law enforcement agencies in nearby locations
- Trainers from law enforcement academies
- Airport police representatives
- Federal Aviation Administration (FAA) representatives
- Transportation police representatives
- Port authority police (if applicable)
- Emergency preparedness representatives

#### Observers

Observers may also selected by sponsoring organizations. Observers play an important role during breakout groups. Although they might not read and answer questions, the observers should comment if they believe the group is reaching the wrong conclusion or if they can offer unique expertise. Observers are not required for the course. Some course managers may decide that all attendees are participants.

#### Examples of Observers

- Federal public health workers
- Federal emergency workers
- Representatives from schools of public health
- Federal law enforcement officers
- Representatives from Centers for Public Health Preparedness
- Representatives from the U.S. Department of Justice
- Federal agency lawyers
- Representatives from training programs
- Representatives from national public health organizations
- Representatives from national law enforcement agencies and organizations
- Representatives from the media

#### **Facilitators**

The role of the facilitators is to draw out the expertise of the breakout group members and to provide answers to the case study questions if no one else in the group can do so. Facilitators may be drawn from the course participants. The facilitators will have attended a brief facilitator training activity before the course and studied the suggested

answers for the case study questions. Their role also includes assuring that the key points made in the answer guide are brought out in their groups.

## Logistics

## **Course Planning**

Planners are responsible for:

- Identifying course participants
- Identifying facilitators for the case study portion of the course
- Securing presenters if they are needed
- Finding a location for the course
- Identifying the appropriate state / local laws to include within the course materials
- Finalizing all course details
- Arranging for continuing education units (CEUs), if applicable, for participants

#### **Selection of Facilities**

A typical course will consist of introduction, division into small groups during breakout session, and reassembly into the wrap-up at the end of the day.

- The size of the facility depends on the number of course participants.
  - o Introduction and the wrap-up session should be held in a main meeting space that is large enough to accommodate all participants, ideally with classroom style seating tables / desks as well as chairs.
  - o Breakout groups:
    - There should be an adequate number of smaller rooms for the number of breakout groups you will have (please see table in the "Tentative Breakout Groups and Group Size" portion of this section)
    - Each breakout group should have approximately the same number of participants
    - If necessary, you can use the large space for a breakout room if it can be quickly arranged into tables around which the participants can sit
    - Ideally, breakout rooms or spaces should be separated from one another and have doors that close so that the sound of one group's work does not carry into another's area
    - Each breakout room or space should be set up with a central table large enough for all the participants and the facilitators

**Note:** Any observers present can sit in a second row, behind those sitting at the table.

## Lunch

- Providing a lunch is recommended
- The training may also be designed as a "brown bag session," where participants can bring their lunch or order in
- At lunch, participants may sit at tables in self-chosen groups other than the breakout groups
- If participants have come some distance for the course and are staying overnight, give suggestions on places to have dinner that are within relevant per-diem rates

#### **Pre-Registration**

**Note:** The following recommendations are optional.

## <u>Pre-registration Forms</u>

• Forms should be given to confirmed participants well in advance of the course

**Note:** Having a firm list of attendees with job roles allows you to assign people to breakout groups, each of which should be as diverse as possible

- o E-mail registration forms to participants several weeks in advance
- Set a due date (placed on the bottom of the form) of 3-5 business days before the course will start
  - A due date will prompt the participants to enter the required information and return the form
  - The due date should give the course manager enough time to create the appropriate amount of materials
- o Provide several mechanisms (e-mail and fax) for participants to return the forms to the course manager
- o Pre-registration forms should collect the following information:
  - Agency of employment and job title
  - Contact information, including e-mail address

#### Database / Spreadsheet

- Using a database program or a spreadsheet will facilitate data collection
- Contact information and job titles can be entered into a pre-designed database or spreadsheet
- Information can be exported for use in preparing the list of participants
- Exporting the information takes far less time than reentering all contact information into the list of participants
- Additionally, the database can be used to create nametags (discussed in the section below) or sign-in sheets

| SAMPLE COURSE REGISTRATION FORM  |  |  |  |  |
|--|--|--|--|--|
| Name, Title, Fax #   |  |  |  |  |
| Forensic Epidemiology <date></date>  |  |  |  |  |
| Agency:  |  |  |  |  |
| Registrant Name:   |  |  |  |  |
| Registrant Title:  |  |  |  |  |
| Registrant Address:  |  |  |  |  |
| Registrant Telephone:  |  |  |  |  |
| Registrant E-mail:   |  |  |  |  |
| Senior Management / Contact Person:  |  |  |  |  |
| Senior Management / Contact Person Telephone Number:                         |  |  |  |  |
| Please complete and fax or email this registration form by <date> to:</date> |  |  |  |  |
| Course Manager's name<br>Email<br>Fax<br>Phone                               |  |  |  |  |

## **Arranging for Continuing Education Units (CEUs)**

- Course planners / organizers should make arrangements for CEUs for appropriate disciplines
- This should be done early in the planning process
  - Course planners should reach out to state accreditation boards / agencies to determine how to arrange CEUs for the major disciplines expected to attend
  - These key disciplines may include physicians, nurses, lawyers, law enforcement, EMT / Paramedics, HAZMAT team members and other first responders
- For many disciplines, such as those listed above, CEUs are not only an incentive, but also a necessity if they are to be approved for attendance

## **Special Tips**

- **Organization is the key** to preparing this course. Early identification of participants and receipt of their pre-registration forms will lessen the amount of last minute changes
- One last item to take into consideration is any **help that will be needed** with this course. Depending on the course size, help in the registration area will be invaluable. Additionally, having the use of runners will allow things to proceed smoothly. Runners can make extra copies, take messages, ensure food arrangements are proceeding as expected, etc.

## Facilitators and Facilitator Training

#### **Small-Group Facilitators**

- Each breakout group should have at least one facilitator who is either law enforcement or a public health professional. Ideally, two facilitators would be used for each group one from law enforcement and one from public health
- Facilitators should be both expert in their professional responsibilities and skilled as facilitators
- Facilitators should be chosen ahead of the course date and should know that they have been chosen and what their role will be

#### Facilitator Training Timeline

- Facilitator training should occur before the course. While up to 14 days before the course may be ideal, logistics of large courses may require that this training occur the day before the course
  - The prior day option is recommended if participants and facilitators are traveling a long distance
- Typical facilitator training should last approximately 1-2 hours

#### Course Manager's Responsibility

- The course manager should brief the facilitator trainees about the:
  - o Reason for and history of the course
  - o Main training objectives
  - o Process to be followed in the case study
- Emphasize that the focus of the course is on joint training for public health and law enforcement in coordinated emergency response

## Organization of Facilitator Training

- The main point of the facilitator training is to give the facilitators practice with the facilitator role
- This should include taking turns being the facilitator, with the remainder of the training group being the participants
- Each trainee, in turn, should ask the person to his or her left to read and attempt to answer the next question (or set of facts and question) in a case study
- The facilitator will lead the discussion kicked off by that answer

- Then the next person around the table will assume the role of facilitator and repeat the process
- In a training session of approximately 1-2 hours, it should be possible to briefly walk through the entire case study

## Tentative Breakout Groups and Group Size

- CDC developed the methodology for this case study over many years
- In this method, the ideal group has approximately ten participants and a facilitator
  - o The small group size allows all participants to answer questions
  - o Most participants will be comfortable speaking / taking part in discussions
- A larger group size has a couple of advantages as well
  - o It requires fewer facilitators
  - o It allows for a wider range of expertise and skills to be represented

**Note:** This may be particularly important if there are only a few senior law enforcement or public health professionals available with the expertise to offer definitive answers to questions, especially as to local practices or policies.

- There should be an equal distribution of participants and observers among groups
- If there are several people with the same job role or responsibility present, divide them among the breakout groups. This will ensure that each group has representation from all disciplines
- The following table has been provided on the next page to help you determine how many facilitators and breakout groups / rooms you will need depending on the total number you would like trained. The column definitions are:
  - Total trained = total number of facilitators (including alternates)
    + total number of participants
  - The number of facilitators includes alternates
  - o Typically, several of your chosen facilitators may not be able to attend the training or be able to function as facilitators
  - o To prevent any problems, it is recommended that you also designate and train alternates
  - o Generally, for every group of 10-20 participants you will need a facilitator and one breakout room
  - o For every two breakout groups, you will need one alternate facilitator

## **Number of Facilitators Needed According to Number of Participants**

| Total Trained | Number of<br>Participants | Number of<br>Facilitators | Number of Groups /<br>Rooms Needed |
|---------------|---------------------------|---------------------------|------------------------------------|
| 12 - 22       | 10 – 19                   | 1-3                       | 1                                  |
| 23 - 43       | 20 - 39                   | 3-4                       | 2 - 3                              |
| 46 - 75       | 40 – 67                   | 6-7                       | 3 – 5                              |
| 75 - 92       | 68 - 84                   | 7-8                       | 4–7                                |
| 97 – 116      | 85 – 104                  | 8-12                      | 5 – 9                              |
| 117 - 147     | 105 - 132                 | 9-15                      | 6 – 11                             |
| 148 - 188     | 133 – 172                 | 10-16                     | 7 – 13                             |

#### **Materials Included in the Folder**

Depending on time and resources available, a folder may be prepared for course participants and facilitators. The materials assembled in the course folder may vary from location to location but should include, at a minimum:

- Agenda
- Attendees list
- Introduction and course objectives
- Case study (version without answers for participants and version with answers for facilitators)
- Reference material

#### On the Day of the Course

## Registration

It is recommended that the course manager begin registration 30-45 minutes before the course is scheduled to start. When course attendees arrive, the registration tables should be ready and waiting. Attendees who arrive early can use this time to meet new people and for refreshments.

#### Preparation for Case Study

- While the participants are listening to a course welcome and introduction, the course manager or a designated person should finalize membership of the small groups during the breakout session
- Announce small group assignments and room numbers after the welcome and introduction is complete

#### Case Study

- Before beginning the case study, facilitators should ask each participant and observer for a self-introduction
- At the beginning of the scenario, facilitators will ask the group to decide who will be the group recorder / reporter. The recorder / reporter will be responsible for

writing down relevant information and may speak for the group at the wrap-up

- Small group report forms will be given to each facilitator before the group begins
  - o The forms are divided into three sections:
    - 1. Unresolved issues
    - 2. Lessons learned and information to pass on
    - 3. Gaps in your jurisdiction and recommendations for action

A reporter from each small group will be given an opportunity to summarize during the closing plenary session, the unresolved issues, lessons learned, gaps identified and other significant information from the groups. Focus should be on overarching issues.

| Small Group Report  |  |  |  |  |
|---|--|--|--|--|
| Small Group #      Reporter Name  |  |  |  |  |
| Co-Facilitators:;(Public Health) ;(Law Enforcement)   |  |  |  |  |
| A reporter from each small group will be given an opportunity to summarize to all course attendees the unresolved issues, lessons learned and information you want to pass on, and gaps in your jurisdiction. Since all groups were discussing the same scenario, the reports should focus on overarching issues, not individual conclusions. |  |  |  |  |
| Unresolved issues:  |  |  |  |  |
| 1.  |  |  |  |  |
| 2.  |  |  |  |  |
| 3.  |  |  |  |  |
| 4.  |  |  |  |  |
| 5.  |  |  |  |  |
| Lessons learned and information you want to pass on to the other groups:  |  |  |  |  |
| 1.  |  |  |  |  |
| 2.  |  |  |  |  |
| 3.  |  |  |  |  |
| 4.  |  |  |  |  |
| 5.  |  |  |  |  |
| Gaps in your jurisdiction (We need to):   |  |  |  |  |
| 1.  |  |  |  |  |
| 2.  |  |  |  |  |
| 3.  |  |  |  |  |
| 4.  |  |  |  |  |
| 5.  |  |  |  |  |

Course planners should float during the breakout session to ensure that the case study sessions are progressing well. If problems are found with particular groups (participants, observers, or facilitators), course planners should deal with the problems in an appropriate manner.

## Wrap-Up

- The wrap-up session is used to summarize the unresolved issues, lessons learned, and gaps in your jurisdiction gathered during the course and recorded on the small group report form
- The individual responsible for facilitating the wrap-up session should float among the small groups to observe and gather information for this session
  - o Attending different groups will provide a "big picture" view of the issues that are raised by the different groups
  - The wrap-up facilitator may not be able to attend all of the groups if there are more than a few; however, observing a cross-section is still helpful
- The wrap-up facilitator will then take the notes provided by each of the groups' recorders and synthesize a list of salient issues and action items from each group
- This list will also include the wrap-up facilitator's personal observations. Issues that surfaced in more than one group should be emphasized. As the facilitator presents these issues, he / she should encourage feedback / additional comments from the course participants
- The optional evaluation should be given at the end of the course. Attendees will need approximately ten minutes to complete

**Note:** At the end of the day, distribute the participant list as you collect the evaluations.

#### For Additional Information and Support

For technical assistance in planning or delivering this course:

Please contact
 McKing Consulting Corporation
 CDC Forensic Epidemiology
 FE-PHEL@mcking.com

For additional information on forensic epidemiology, visit the *CDC Public Health Law Program* at <a href="http://www.cdc.gov/phlp">http://www.cdc.gov/phlp</a>

# **Acronyms**

| Acronym | Description   |  |  |
|---------|---|--|--|
| AI      | Avian Influenza   |  |  |
| CBP     | Customs and Border Patrol   |  |  |
| CDC     | Centers for Disease Control & Prevention                            |  |  |
| CDSCU   | Communicable Disease Surveillance and Control Unit                  |  |  |
| DHS     | U.S. Department of Homeland Security (Depending on context, DHS     |  |  |
|         | could also stand for State / Local Departments of Human Services or |  |  |
|         | State / Local Departments of Homeland Security)                     |  |  |
| DHHS    | U.S. Department of Health & Human Services (DHHS or HHS)            |  |  |
| DOJ     | Department of Justice   |  |  |
| EMS     | Emergency Medical Services  |  |  |
| EOC     | Emergency Operations Center   |  |  |
| FBI     | Federal Bureau of Investigation                                     |  |  |
| FEMA    | Federal Emergency Management Agency                                 |  |  |
| H5N1    | Highly pathogenic strain of influenza                               |  |  |
| HIPAA   | Health Insurance Portability and Accountability Act                 |  |  |
| HHS     | U.S. Department of Health & Human Services (HHS or DHHS)            |  |  |
| HPAI    | High Pathogenicity Avian Influenza                                  |  |  |
| HMRT    | Hazardous Materials Response Team                                   |  |  |
| IACP /  | International Association of Chiefs of Police / National Law        |  |  |
| NLEPC   | Enforcement Policy Center   |  |  |
| ICS     | Incident Command System   |  |  |
| IHS     | Indian Health Service   |  |  |
| ILI     | Influenza-Like Illness  |  |  |
| JIC     | Joint Information Center  |  |  |
| JOC     | Joint Operations Center   |  |  |
| JTTF    | Joint Terrorism Task Force  |  |  |
| LE      | Law Enforcement   |  |  |
| MOA     | Memorandum of Agreement   |  |  |
| MOU     | Memorandum of Understanding   |  |  |
| NIH     | National Institutes of Health                                       |  |  |
| NPIs    | Non-Pharmaceutical Interventions                                    |  |  |
| OSHA    | Occupational Safety and Health Administration                       |  |  |
| PH      | Public Health   |  |  |
| PHS     | U.S. Public Health Service (also see USPHS)                         |  |  |
| PIO     | Public Information Officer  |  |  |
| POD     | Point of Distribution   |  |  |
| PPE     | Personal Protective Equipment                                       |  |  |
| SNS     | Strategic National Stockpile  |  |  |
| WHO     | World Health Organization   |  |  |
| USPHS   | U.S. Public Health Service (also see PHS)                           |  |  |