



CITIES READINESS INITIATIVE

Questions and Answers

Q&A about the Cities Readiness Initiative Pilot Program

What is the Cities Readiness Initiative?

The Cities Readiness Initiative (CRI) is a pilot program to aid cities in increasing their capacity to deliver medicines and medical supplies during a large-scale public health emergency such as a bioterrorism attack or a nuclear accident. The Cities Readiness Initiative will help save lives through timely delivery of medicines and medical supplies during a large-scale public health emergency. It will enable cities to deliver medicines and medical supplies to their populations within a timeframe that will make an appreciable health difference in the event of a bioterrorism attack.

Why is CRI necessary?

CRI is needed to enhance preparedness at all levels of government and to provide a consistent nationwide approach at all levels of government to prepare for, respond to, and recover from a large-scale public health emergency. This pilot program will complement the cities' preparedness planning for first response efforts in the event of such an emergency. As a result of this pilot program, plans from all levels of government (federal, state and local) will be unified to ensure a consistent, effective and timely response in the event of a large-scale catastrophic event or outbreak of disease.

What is the goal of CRI?

CRI will result in unified Federal, State and Local plans to respond to catastrophic events. This effort affords an opportunity for DHS and HHS to work closely with state and local partners to prepare for possible large-scale catastrophic events. Upon completion of the pilot program, DHS and HHS will identify and disseminate examples of robust and well-functioning state and local plans and capabilities to other states and local communities.

Who is participating in CRI?

Multiple agencies are engaged in CRI to ensure coordination of response at Federal, State and local levels. Operationally, the Cities Readiness Initiative brings together the Department of Homeland Security and the Department of Health and Human Services. Within these organizations, the Federal Emergency Management Agency (FEMA) and the Office of Domestic Preparedness (ODP) are represented for DHS; for HHS, the Centers for Disease Control and Prevention (CDC), as well as the Health Resources and Services Administration (HRSA) are involved. The common resource for both Departments, the Strategic National Stockpile (SNS), is a key participant in this pilot initiative, although not the only resource involved. The Assistant Secretary for Public Health Emergency Preparedness (OASPHEP) from DHHS is working closely with the HSC/DC (Homeland Security Council/Deputies Committee). In addition, representatives of the United States Postal Service are interested in participating in the Cities Readiness Initiative to determine the possibility of using mail carriers to deliver material to areas of the cities involved in CRI. The Department of Justice, the Federal Bureau of Investigation, and the Department of Veterans Affairs will also participate in this pilot program.

The Federal government plans to provide direct assistance to cities to help them in achieving optimal preparedness for receipt and dispensing of the Strategic National Stockpile.

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Which cities are participating in CRI?

Criteria for the choice of cities include multiple factors, including population and location. The full list of cities and the funds allocated to each state for this initiative is below:

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|-------------------|---------------|------------------------|---------------|
| • Atlanta, GA | (\$740,000) | • Minneapolis, MN | (\$710,000) |
| • Boston, MA | (\$840,000) | • New York, NY | (\$5,100,000) |
| • Chicago, IL | (\$2,150,000) | • Philadelphia, PA | (\$1,350,000) |
| • Cleveland, OH | (\$770,000) | • Phoenix, AZ | (\$1,280,000) |
| • Dallas, TX | (\$1,190,000) | • Pittsburgh, PA | (\$690,000) |
| • Denver, CO | (\$820,000) | • St. Louis, MO | (\$690,000) |
| • Detroit, MI | (\$1,030,000) | • San Diego, CA | (\$1,220,000) |
| • Houston, TX | (\$1,650,000) | • San Francisco, CA | (\$940,000) |
| • Las Vegas, NV | (\$790,000) | • Seattle, WA | (\$830,000) |
| • Los Angeles, CA | (\$2,670,000) | • District of Columbia | (\$830,000) |
| • Miami, FL | (\$710,000) | | |

When will CRI begin?

Several starting dates for CRI are being considered. The final decision will be announced soon.

What are the criteria for determining if CRI is successful?

Standards for judging the success of the pilot program include:

- Improve and enhance the cities' readiness to receive, distribute and dispense SNS assets based on established guidelines in the SNS Planning Guide.
- Develop city plans that fully incorporate Federal, State and Local capabilities to include, but not necessarily limited to, Fire, Police, Emergency Medical Services (EMS) SNS, and USPS personnel and equipment.
- Develop and provide to cities the models, tools, and templates which will enable city planners to verify key elements of their plans
- Develop and provide training tools which will enable cities to meet objectives.

The specific milestones required to meet these criteria will be determined through collaboration between the agencies, states and cities involved in the pilot program.

How will CRI be funded?

This is a government-wide effort that will give the pilot cities additional financial resources to determine the best way to deliver medicines and medical supplies during a large-scale public health emergency. CRI funding is intended to further support the Public Health Preparedness and Response to Bioterrorism (PA 99051) state and local grant program which was designed to protect the nation against bio-terrorism and to strengthen the public health response. In order to support the CRI, HHS has notified Congress of its intent to reprogram Bioterrorism cooperative agreement funds that go to state and local health departments. The respective Chairmen of the cognizant Senate and House Appropriations subcommittees have responded to HHS stating no objections to the proposed budget reprogramming. HHS is therefore moving forward with a number of new activities, funded through the budget reprogramming and intended to further enhance the nation's ability to respond to emergencies.

What does "Points of Dispensing" mean?

"Points of Dispensing" (POD) is a mechanism for distribution of medicine and medical supplies to healthy people in the area of risk during of a large-scale public health emergency. Medicines and/or other health-protecting supplies will be dispensed from a centralized location. People who are healthy will be asked to go to a POD location to get medicines that will keep them from getting sick. By operating this way, we can

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ensure that hospitals are able to continue treating their existing patients as well as anyone who gets sick as a result of the emergency.

For this pilot program, Points of Dispensing is one of three mechanisms that will be used to ensure that healthy people receive medicines and medical supplies to safeguard them in the event of a large-scale public health emergency. The other mechanisms are delivery of medicines and supplies by U.S. Postal Service employees and the third would involve individual mechanisms identified and developed by cities and states.

For more information, visit www.bt.cdc.gov, or call the CDC public response hotline at (888) 246-2675 (English), (888) 246-2857 (español), or (866) 874-2646 (TTY).