

Attachment 2: Acronyms and Glossary**Acronyms**

AAR	After-Action Report
AAR/IP	After-Action Report/Improvement Plan
CDC	Centers for Disease Control and Prevention
CDMS	Countermeasure Data Management System
CEMP	Comprehensive Emergency Management Plan
ClinOps	Clinical Operations
COOP	Continuity of Operations Plan
DHSES	Division of Homeland Security and Emergency Services
ECLRS	Electronic Clinical Laboratory Reporting System
EOC	Emergency Operations Center
ESF 8	Emergency Support Functions 8 – Public Health and Medical Services
EUA	Emergency Use Authorization
FDA	Food and Drug Administration
FEMA	Federal Emergency Management Agency
FLPHA	Finger Lakes Public Health Alliance
FLRTC	Finger Lakes Regional Training Center
HCS	Health Commerce System
HEPC	Health Emergency Preparedness Coalition
HERDS	Health Electronic Response Data System
HHS	Health and Human Services
HIPAA	Health Insurance Portability and Accountability Act
HOH	Head of Household
HSEEP	Homeland Security Exercise and Evaluation Program
ICS	Incident Command System
IHANS	Integrated Health Alerting Network System
ITPH	Imminent Threat to Public Health
IP	Improvement Plan
JAS	Job Action Sheet(s)
JITT	Just-in-Time Training
LHD	Local Health Department
MAA	Mutual Aid Agreement
MCM	Medical Countermeasure
MERC	Medical Emergency Response Cache
MOA	Memorandum of Agreement
MOU	Memorandum of Understanding
MRC	Medical Reserve Corps
NACCHO	National Association of County and City Health Officials
NIMS	National Incident Management System
NYSDOH	New York State Department of Health
NYSIIS	New York State Immunization Information System
OEM	Office of Emergency Management
OHEP	Office of Health Emergency Preparedness
PHEP	Public Health Emergency Preparedness
PHEPR Plan	Public Health Emergency Preparedness and Response Plan
PIO	Public Information Officer
POC	Point of Contact
POD	Point(s) of Dispensing
PPE	Personal Protective Equipment

PREP Act	Public Readiness and Emergency Preparedness Act
SNS	Strategic National Stockpile
VAERS	Vaccine Adverse Event Reporting System
VIS	Vaccine Information Statement(s)
WRO	New York State Department of Health – Western Regional Office

After-Action Report (AAR): a document intended to capture observations of an exercise and make recommendations for post-exercise improvements. The final After-Action Report (AAR) and Improvement Plan (IP) are printed and distributed jointly as a single After-Action Report/Improvement Plan (AAR/IP) following an exercise.

After-Action Report/Improvement Plan (AAR/IP): the main product of the evaluation and improvement planning process. The AAR/IP has two components: an AAR, which captures observations of an exercise and makes recommendations for post-exercise improvements; and an IP, which identifies specific corrective actions, assigns them to responsible parties, and establishes targets for their completion.

Comprehensive Emergency Management Plan (CEMP): guides county behavior before, during, and after a disaster. It defines who does what, when, where and how, in order to mitigate, prepare for, respond to and recover from the effects of natural, technological and human-caused hazards.

Continuity of Operations Plan (COOP): ensures the county and its departments are able to continue to perform their essential daily functions during a wide range of emergencies. The COOP addresses potential hazards, essential functions, orders of succession, delegation of authority, continuity facilities, continuity communications, essential records management, human resources, testing, training, exercising, devolution, and reconstitution.

Countermeasure Data Management System (CDMS): a software application located on the NYSDOH's HCS. CDMS provides local, regional, and state health departments and tribal nations with a single data reporting tool that may be used regardless of the hazard or agent during a public health incident or event. CDMS is used to capture recipient demographic and visit information related to the distribution of countermeasure (e.g., immunizations, antibiotics, personal protective equipment, diagnostic testing) during clinical operations, community reception centers during a radiological incident, or in support of documentation needs during public health emergency preparedness exercises. Vaccination data entered in CDMS can be uploaded to NYSIIS.

Electronic Clinical Laboratory Reporting System (ECLRS): provides laboratories that serve New York State with a single electronic system for secure and rapid transmission of reportable disease information to the NYSDOH, LHDs and the New York City Department of Health and Mental Hygiene (NYCDOHMH). ECLRS enhances public health surveillance by: providing timely reporting; improving completeness and accuracy of reports; and generally facilitating the identification of emergent public health problems by monitoring communicable diseases, lead poisoning, HIV/AIDS, and cancer.

Emergency Operations Center (EOC): a predetermined location from which emergency operations can be directed and coordinated. The main functions of EOC include: provide direction, coordination, and support to emergency operations; carry out disaster management functions at a strategic level in an emergency situation; ensure the continuity of operations of the organization; collect, gather, and analyze data; make decisions that protect life and property; maintain continuity of the organization, within the scope of applicable laws; and disseminate those decisions to all concerned agencies and individuals.

Emergency Support Functions 8 – Public Health and Medical Services (ESF 8): Emergency Support Functions (ESFs) is the grouping of governmental and certain private sector capabilities into an organizational structure to provide support, resources, program implementation, and services that are most likely needed to save lives, protect property and the environment, restore essential services and critical infrastructure, and help victims and communities return to normal

following domestic incidents. There are 15 ESFs and ESF 8 – Public Health and Medical Services provides planning and coordination of Federal public health, healthcare delivery, and emergency response systems to minimize and/or prevent health emergencies from occurring; detect and characterize health incidents; provide medical care and human services to those affected; reduce the public health and human service effects on the community; and enhance community resiliency to respond to a disaster.

Finger Lakes Public Health Alliance (FLPHA): a committee through the Pivotal Public Health Partnership (previously the S²AY Rural Health Network) consisting of representatives from the local health departments of Chemung, Livingston, Monroe, Ontario, Schuyler, Seneca, Steuben, Wayne, and Yates Counties. The committee facilitates the development of emergency planning documents and sharing of mutual aid across jurisdictional county lines in the event of public health emergencies.

Finger Lakes Regional Training Center (FLRTC): Health Emergency Preparedness Training Centers (HTCs) (previously referred to as Regional Training Centers (RTCs)) are grant-funded entities tasked with providing training resources and support that enhances the emergency preparedness capabilities of regional hospitals, emergency medical services (EMS), local health departments (LHD), and Emergency Management (EM). The New York State Department of Health (DOH) Office of Health Emergency Preparedness (OHEP) sponsors four HTCs; one for each Health Emergency Preparedness Coalition (HEPC). Chemung County falls under the Finger Lakes Regional Training Center (FLRTC) through the University of Rochester.

Health Commerce System (HCS): is a secure online communications system operated by the New York State Department of Health. It supports the exchange of routine and emergency statewide health information by local health departments and health facilities, providers, and practitioners.

Health Emergency Preparedness Coalition (HEPC): to support planning and infrastructure development to prepare New York State healthcare systems to respond to bioterrorism, outbreaks of infectious diseases, and other public health threats and emergencies, the New York State Department of Health (DOH) Office of Health Emergency Preparedness (OHEP) has four Health Emergency Preparedness Coalitions: Capital District Region, Central New York Region, Metropolitan Area Region, and Western Region. These HEPCs are further broken down into subregions and areas. Chemung County falls within the Southern Area, Finger Lakes Subregion of the Western Region HEPC.

Homeland Security Exercise and Evaluation Program (HSEEP): a program that gives a set of guiding principles for exercise programs. HSEEP provides a common approach to exercise program management, design and development, conduct, evaluation, and improvement planning. HSEEP exercise and evaluation doctrine is flexible, adaptable, and is for use by stakeholders across the whole community. HSEEP is applicable for exercises across all mission areas including prevention, protection, mitigation, response, and recovery.

Imminent Threat to Public Health (ITPH): an event that causes, or has the potential to cause, morbidity and mortality in humans.

Improvement Plan (IP): for each task, the IP lists the corrective actions that will be taken, the responsible party or agency, and the expected completion date. The IP is included at the end of the After-Action Report.

Incident Command System (ICS): a management system designed to enable effective and efficient domestic incident management by integrating a combination of facilities, equipment, personnel, procedures, and communications operating within a common organizational structure.

Integrated Health Alerting Network System (IHANS): a notification system for New York State Department of Health (NYSDOH) and local health department staff to submit alerts, advisories, and informational messages to Health Commerce System (HCS) users by email, phone, or text message.

Isolation: separates sick people with a contagious disease from people who are not sick. In addition to serving as medical functions, isolation and quarantine also are “police power” functions, derived from the right of the state to take action affecting individuals for the benefit of society.

Medical Countermeasure(s) (MCM): medicines (such as vaccines, antiviral drugs, antibiotics, antitoxins, and chemical antidotes) and medical supplies that are used to effectively prevent, mitigate, or treat adverse health effects of an intentional, accidental, or naturally occurring public health emergency.

Medical Reserve Corps (MRC): a national network of volunteers, organized locally to improve the health and safety of their communities. MRC volunteers include medical and public health professionals, as well as other community members without healthcare backgrounds. MRC units engage these volunteers to strengthen public health, improve emergency response capabilities and build community resiliency. They prepare for and respond to natural disasters as well as other emergencies affecting public health.

National Incident Management System (NIMS): a set of principles that provides a systematic, proactive approach guiding government agencies at all levels, nongovernmental organizations, and the private sector to work seamlessly to prevent, protect against, respond to, recover from, and mitigate the effects of incidents, regardless of cause, size, location, or complexity, in order to reduce the loss of life or property and harm to the environment.

New York State Immunization Information System (NYSIIS): was established by to provide a complete, accurate, secure, real-time immunization medical record that is easily accessible and promotes public health by fully immunizing all individuals appropriate to age and risk. The New York State legislature passed the Immunization Registry Law which, as of January 1, 2008, requires health care providers to report all immunizations administered to persons less than 19 years of age, along with the person's immunization histories, to the NYSDOH using NYSIIS.

Public Health Emergency: an event or imminent threat (infectious disease, natural disaster, equipment and infrastructure failure, chemical and radiation, mass casualty, or bioterrorism) that poses a substantial risk to the public by either causing a significant number of fatalities or permanent or long-term disability. A public health emergency declaration releases resources meant to handle an actual or potential public health crisis such as a disaster, significant outbreak of an infectious disease, bioterrorist attack, or other significant or catastrophic event.

Public Health Emergency Preparedness and Response (PHEPR) Plan: a planning and operations-based document that provides guidance for all aspects of health-related emergency management activities and functions. The PHEPR Plan provides the basis for the planning, training, and use of state-, regional-, and county-level public and private public health resources to respond, mitigate, and recover from a public health emergency or disaster in Chemung County.

Point(s) of Dispensing (POD): are community locations at which state and local agencies dispense and administer medical countermeasures (MCMs) to the public. To aid in rapidly dispensing MCMs, local health departments (LHDs) use two types of PODs: open and closed. Open PODs are typically located at public locations such as arenas, community centers, or schools. These locations are often operated by LHDs and are where they dispense or administer MCMs to the public. Closed PODs are sites staffed and managed by organizations and agencies (both public and private) to dispense MCMs only to their own populations while continuing operations during a public health emergency. Open and closed PODs can and should be used simultaneously.

Quarantine: separates and restricts the movement of people who were exposed to a contagious disease to see if they become sick. In addition to serving as medical functions, isolation and quarantine also are “police power” functions, derived from the right of the state to take action affecting individuals for the benefit of society.

ServNY: a volunteer management system, administered by the New York State Department of Health's (NYSDOH) Office of Health Emergency Preparedness (OHEP), which is a web-based registry of individuals who make themselves available to assist on behalf of New York State during a public health emergency.