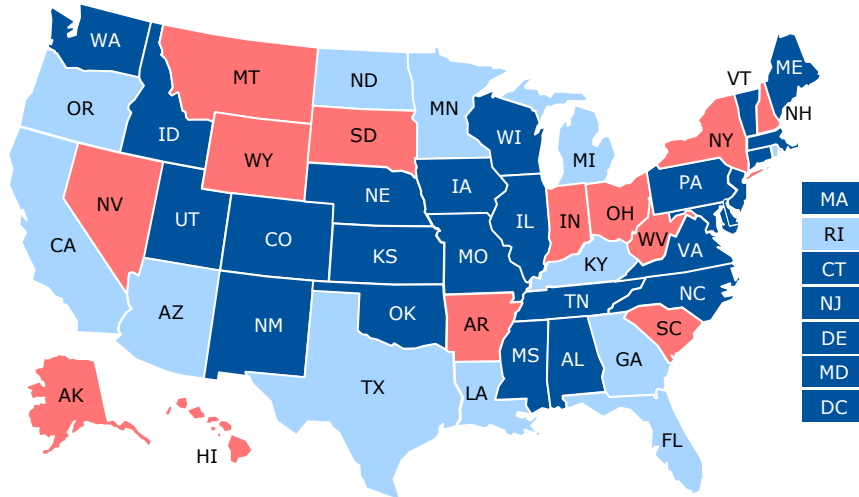


# Ready or Not: Protecting the Public's Health from Diseases, Disasters, and Bioterrorism

## State preparedness to protect the public's health during an emergency

■ High tier (25 states & DC) ■ Middle tier (12 states) ■ Low tier (13 states)



## Preparedness indicators

- Incident Management:** Adoption of the Nurse Licensure Compact
- Cross-Sector Community Collaboration:** % of hospitals participating in healthcare coalitions
- Institutional Quality:** Accreditation by the Public Health Accreditation Board
- Institutional Quality:** Accreditation by the Emergency Management Accreditation Program
- Institutional Quality:** Size of the state public health budget, compared with the past year
- Water Security:** % of the population who used a community water system that failed to meet all applicable health-based standards
- Workforce Resiliency and Infection Control:** % of employed population with paid time off
- Countermeasure Utilization:** % of people ages 6 months or older who received a seasonal flu vaccination
- Patient Safety:** % of hospitals with a top-quality ranking on the Leapfrog Hospital Safety Grade
- Health Security Surveillance:** The state's public health laboratory has a plan for a six-to eight-week surge in testing capacity

## Fast Facts



Only **30 percent** of hospitals, on average, earned top patient safety grades based on measures **critical to patient safety**, especially during outbreaks.



Only **55 percent** of employed people had access to paid time off, the absence of which has been shown to **exacerbate some infectious disease outbreaks**.



In 2018, **7 percent** of state residents got their household water from a community water system that **did not meet applicable health standards**.



Only **49 percent** of Americans ages 6 months and older were flu vaccinated during the 2018-2019 season, **below the 70% target** set by Healthy People 2020.

## Recommendations for Congress



Invest in cross-cutting public health foundational capabilities and preparedness programs, such as the **Public Health Emergency Preparedness Cooperative Agreement, the Hospital Preparedness Program, and CDC Data Modernization**, so the nation is ready for many types of disasters or outbreaks.



Accelerate crisis responses by funding the **public health emergency response fund** and infectious disease rapid response fund.



Support the **vaccine infrastructure and first-dollar coverage for recommended vaccines** to protect against preventable outbreaks.



Create **incentives for discovery of new products to fight drug-resistant infections and increase investments in CDC's Antibiotic Resistance Solutions Initiative**.



Provide long-term funding for the **Medical Countermeasures enterprise**, including BARDA, the Strategic National Stockpile and CDC.



Build the pipeline of **public health workforce** through training, loan repayment and other incentives. Modern biodefense requires a well-trained workforce before emergencies take place.



Provide **job-protected paid sick leave** to protect workers and customers from infectious disease outbreaks.