

Mid-America Alliance – Preparing for the Future

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A group of 10 state public health laboratories is working on a new collaborative effort to strengthen regional lab capability and capacity during a public health crisis in which one state's system is severely stressed or overwhelmed. The group is a

subcommittee of the Mid-America Alliance (MAA), a coalition of the 10 state health departments in federal Regions 7 (IA, KS, MO, NE) and 8 (CO, MT, ND, SD, UT, WY) that has embarked on an ambitious initiative to strengthen regional public health emergency preparedness. Other subcommittees are working on epidemiology capacity, licensure, training/workforce development, and shared resources. The initial focus of the laboratory



subcommittee's work centers on issues related to surge capacity and data exchange.

The laboratory subcommittee has two projects underway aimed at developing a system for rendering mutual assistance to other state laboratories. One project is mapping out the specimen courier systems of each state and the second one is development of a secure electronic system for real time information exchange between state laboratories. The subcommittee is chaired by Dr. Eric Blank, Director of the Missouri State Public Health Laboratory, and co-chaired by Mike Smith, Administrator of the Office of Laboratory Services in the South Dakota Department of Health.

The idea for development of the "courier map" project arose out of discussions among the subcommittee representatives regarding what they would do if one state's laboratory facilities were incapacitated or at full capacity and there was an outbreak of an infectious disease such as *Bordetella pertussis*. There were questions regarding where a state would send its specimens and how they would be transported to another state's laboratory. The group decided to develop a visual aid outlining courier routes across states lines, identifying where routes intersect, and exchanging contact information for each state's courier. This information is currently being gathered from each of the 10 states. According to project lead Mike Smith, such a map will help determine how to facilitate rapid, secure movement of specimens between states during any emergency situation.

In addition, the group discussed the growing need for timely and efficient electronic communication and reporting between state laboratories as well as with local public health departments. The second subcommittee project, development of a laboratory data exchange system, involves collecting state specific testing information and organizing it into a secure, centralized database that state laboratory directors can access to determine which states in the region can perform specified testing during an emergency situation (such as suspected bioterrorism or an infectious disease outbreak). Development of such a system requires comparison of each state's laboratory

methodologies and certification requirements, and analysis of mechanisms of payment for interstate laboratory services. Dr. Eric Blank believes that capturing such information in a secure yet rapidly accessible format will help all 10 state labs understand each others' capabilities and capacities, and utilize such information in state and regional public health emergency planning and response efforts.

The public health laboratory group is one of five ongoing subcommittees within the MAA, whose overall mission is to establish a framework for mutual assistance among the 10 states during a public health emergency which stresses an individual state's resources but does not rise to the level of a Governor-declared state emergency. This is important because Governor declaration of a state emergency is the threshold for implementation of the Emergency Management Assistance Compact (EMAC). EMAC is a nation-wide agreement between the states that enables them to provide assistance to each other under a blanket of legal and financial protections. But since most public health crises do not rise to the level of a Governor-declared state emergency, health departments are often faced with providing assistance to each other without those EMAC protections.

The MAA is the largest coalition of states in the country working on development of formal mutual aid arrangements between states for the sharing of public health resources (e.g. data and information, equipment and capacities, and personnel) during an emergency. The MAA Director is a recently retired U.S. Public Health Service Commissioned Corps officer, Captain (Ret.) Kathleen Hastings, whose office is located in Colorado. The other member of the MAA staff is Traci Camilli, a public health fellow, who currently has an office at the University of Nebraska Medical Center within the Center for Biosecurity.

The current MAA structure consists of an advisory panel with representatives from all 10 states, and four additional work groups exploring various aspects of interstate public health collaboration (legal issues, epidemiology, shared resources database and public health training/workforce development). These work groups are identifying each state's existing public health legal authorities and resources, examining potential barriers to development of interstate mutual assistance arrangements, and exploring mechanisms to overcome or minimize those barriers. The MAA just completed a strategic planning process with representation from all 10 states and federal partners, which identified priorities for organizational development that will help the coalition better address interstate issues.

For further information visit the MAA website at www.midamericaalliance.org or contact Kathleen Hastings at (402) 290-5980, khastings@unmc.edu or Traci Camilli at (402) 559-6009, tcamilli@unmc.edu.