

Chapter 6

Public Information and Communications

OVERVIEW

Communities already have experience in coming together to respond to emergency situations. Public information and communication (PIC) professionals inform, educate, and communicate with the public about health-related and emergency situations on a regular basis.

When SNS assets are deployed, there may be the added challenge of mobilizing the public to obtain prophylactic medications in a short period of time and to adhere to a treatment regimen (e.g., up to 60 days for anthrax). Similar PIC challenges would accompany emergencies requiring mass vaccination, quarantine, movement restrictions, shelter-in-place, and mass evacuations.



In each of these instances, we are not only informing and educating the public but also trying to mobilize it to do something in response to our messages. The ability to effectively inform, educate, and mobilize the public will be critical to the success of any mass treatment effort.

In this chapter, you will learn about

- Pre-event PIC planning needs,
- Who should comprise your public information team;
- Messages, methods, and materials for a PIC campaign;
- Implementing a PIC plan to get people to and through a POD and to follow-up with them once they leave the POD;
- The role of PIC in volunteer recruitment and training; and
- PIC resources available to the public information team.

THE WHY, WHO, AND WHAT OF PIC PLANNING

Why

Implement DSNS may deliver SNS assistance within hours of the federal decision to deploy, but the time it takes to get pills in people depends heavily on PIC planning and how quickly the public will act on your messages. For that reason, it is important to have an SNS-specific communication plan that integrates into the overall all-hazards communication plan. Your community's SNS communication plan should focus on the worst-case scenario of a mass-prophylaxis campaign, which is to provide medication to your entire population in 48 hours. Your plan should include *messages*, *methods*, and *materials* specific to all dispensing methods and combinations of dispensing methods included in your overall SNS plan.

Without a PIC plan you run the risk of increasing public fear, wasting time and human resources, increasing demand for unneeded treatment, alienating the media, contributing to confusion at the dispensing sites, and contributing to fear and mistrust of the government.

Who

Implement We recommend the following professionals for planning and implementing your PIC plan:

- A public information lead with training in health communications, public information and communication, or risk communication;
- Public information liaisons in each POD; and
- Joint Information Center (JIC) personnel.

PUBLIC INFORMATION LEAD

We strongly recommend that you have a PIC professional develop this portion of your plan and that you share this guidance with him or her. You will want to assign a PIC professional to serve as the Public Information Lead to assist with this planning. Your Public Information Lead can be used to develop messages, methods, and materials specific to the public information needs before and during SNS deployment and any mass-prophylaxis campaign.

The coordination between the SNS coordinator and Public Information Lead is vital to the successful development of a PIC plan because it will be based on the policies and procedures that are already outlined in your overall SNS plan. The Public Information Lead must be aware of the policies that can affect PIC planning; for example:

Deploy

- Will adults be allowed to pick up medicines for their entire household, and what age will define an adult?
- How many regimens will each person be allowed to pick up?
- What are the rules regarding patient confidentiality at the POD, and how do those rules affect media policy?
- What will be the media policy at the POD?
- Will identification be required at the PODs?
- What paperwork will be required at the POD, and is there a way for the public to get those papers before they get to the POD?
- Will everyone be going to the POD at the same time, or will people be segmented?
- Are there other means of dispensing (such as distribution to nursing homes)?
- How will dispensing operations function across jurisdictions and borders?

During an event, the Public Information Lead will likely be your Public Information Officer (PIO). You will want to make sure that there is a reliable method for communication among the Public Information Lead, the SNS Coordinator, and the field staff in the PODs.

PUBLIC INFORMATION LIAISON AT THE POD

Because the Public Information Lead will be at the JIC or EOC, we recommend identifying a Public Information Liaison to serve at each POD to coordinate information with the PIO and/or the JIC. This liaison may or may not be a trained communication specialist.

This liaison should be considered part of the command staff at the POD because a portion of his or her duty will be to manage any media requests that come directly to the POD. Make sure that your Public Information Liaison knows what his or her role is if the media calls or shows up at the POD, even if it is just to refer media inquiries back to the JIC. Again, this issue demonstrates the importance of including the communicators as a partner in SNS planning because this issue will be based on the policies and procedures outlined in the overall SNS plan.

JIC PERSONNEL

Personnel working in the JIC should also have an understanding of what the SNS is so that they can better interact with the field staff in the PODs and create more-useful messages for the public. Some basic pre-event or just-in-time training for the JIC staff should be considered.

PIC professionals are sensitive to the needs of their target populations and know how to reach those in the community that may not speak English, are functionally illiterate, are culturally diverse, or may be hearing or seeing impaired. They plan for using alternative communication channels, not only to reach those special

populations who may not respond to mainstream media (television and radio) but also to develop channels of communication in the event of a widespread power outage, where mainstream media may be severely limited.

What

In developing a PIC plan, it is important that you consider the messages, methods, and materials you will need to get pills to people.

MESSAGES

You should prepare messages that are specifically tailored to each audience and channel of communication that you might want to address in an emergency. These messages should be compiled in a way that they can be readily used if needed. While creating these messages, consider the questions that the public will have, such as:

- What is happening?
- What should I do?
- How do I get the medicine I need?
- How much does this cost?
- Can I get medicine for my pets?
- Where can I get more information?
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Your messages will mostly be geared at providing general information that gets people to go to the POD and through the POD. For security reasons, you will need to avoid releasing specific operational information about the assets and the process with which they are distributed to the PODs. You will also want to be sure that any information about the RSS site is not released to the public.

Regardless of the circumstance, the content of the messages must be clear, consistent, and coordinated. You will find it most efficient if the messages are developed at the broadest level possible (state or region) and to anticipate and encourage modification at the local level to address needs and challenges for the local community and special populations.

Deploy

METHODS

Deploy

The public mobilization required for a successful dispensing campaign can be accomplished with the help of mass media: radio, television, local-network broadcasting, Internet, hotlines, flyers/brochures, signs, and sound trucks. Each of these channels has advantages and limitations in the speed of delivery, level of detail, sense of immediacy and import, authority, population saturation, and lin-

gual range that it can deliver. Each channel will also have different planning considerations.

For example, when setting up a public information hotline, consider the following:

- Who will be answering the calls: will the hotline be live, automated, or a combination?
- A process is needed to ensure that the hotline is providing the most current and accurate information.
- Will translation services and TTY phones be available?
- What is the capacity for the phone lines?
- You can use your hotline as a communications feedback loop; if there are many questions about a certain topic, you can then coordinate a mass media announcement to clarify any confusion or misinformation.

Implement

In the planning stages, you will also want to take your communication special populations into account. You can generally think of your communication special populations as those who cannot or will not *receive* your message, cannot or will not *understand* your message, and cannot or will not *act on* your message. Some examples of each of these populations are included in Appendix G, “Public Information and Communication Challenges: Message Development for Mobilizing the Public for Mass Prophylaxis.” General categories of special/vulnerable populations include:

- The economically disadvantaged;
- Those with limited language competence;
- Those with physical, mental, cognitive, and sensory disabilities;
- The culturally or geographically isolated, and
- Those with age vulnerabilities.

PIC professionals are sensitive to the needs of their target populations and know how to reach those populations in the community. You will likely need specialized methods of getting your messages out to and mobilizing these populations. You may consider translated broadcast materials, Reverse 911, AMBER alerts, HAM radios, Meals on Wheels, bullhorns/loudspeakers, WIC programs, senior centers, day care centers, or border control. The best methods of reaching these populations will vary greatly, but it is a good idea to get representatives from the groups in your community to assist you in this part of the planning.

For additional guidance on special populations, refer to the Public Health Workbook to Define, Locate, and Reach Special, Vulnerable, and At-Risk Populations in an Emergency that is located at: www.bt.cdc.gov/workbook.

You should plan for using alternate communication channels not only to reach those special populations who may not respond to mainstream media (television

and radio) but also to develop channels of communication in the event of a wide-spread power outage, where mainstream media may be severely limited.

MATERIALS

You should develop a kit of materials and templates in advance of any event. Consider including template press releases, public service announcements (PSAs), fact sheets, web sites, and dispensing-site signs in your kit. You should get these materials approved in advance to save time during an event.

You should also save these materials (hard copy and electronic versions) so that they are easy to locate during an event. These materials should only need small adjustments to customize them to a specific event.

IMPLEMENTING YOUR PIC PLAN

You will want to implement your PIC plan early in an event. Personnel located in the JIC, PODs, and other agencies will coordinate a public information campaign based on the event and the state plans and policies for dispensing. These plans may include a combination of several dispensing methods, such as USPS delivery of pharmaceuticals to individual households and delivery of pharmaceuticals to large groups (such as nursing homes and their staff and families). Additionally, plans may be in place to provide prophylaxis to first responders and their families before PODs open. Messages, methods, and materials must provide pertinent information for the public about these dispensing methods. The POD, however, remains the cornerstone of any dispensing operation, and your communication plan should focus on getting people to the POD, getting people through the POD, and getting people to follow-up with post POD activities.

Implement

Getting People to the POD

Getting the right people to the right place at the right time can prove to be challenging. The messages must not only inform but also mobilize people to action. Specialized messages, methods, and materials need to be developed to get the desired population to the dispensing site.

Deploy

You will need to create messages that encourage people to go to the dispensing site. Most of these messages will be based on the policies and procedures that are outlined in your state's SNS plan, so coordination between the planners and the communicators is very important to ensure that consistent, accurate information is disseminated to the public. Some examples of the messages that should be going out to get people to the POD include:

- Going to the dispensing site is important.
- There is enough medication for everyone.

Implement

- Medication is free.
- Go to a special site if you are sick (specify symptoms).
- Some general information should be considered before going to the POD, such as:
 - Who should go (or not go),
 - What they should bring (or not bring),
 - What they can expect, and
 - The drugs that will be dispensed.
- Some information is specific to the PODs in the community, such as:
 - Site locations,
 - Operational houses,
 - Directions,
 - Parking,
 - Alternate transportation options,
 - Normal wait times, and
 - Off-peak times.

Deploy

Information like wait times and off-peak times will need to be updated regularly. In the planning stages, consideration should be taken to address the methods for the JIC to obtain pertinent information about each POD so that it can be reported to the media. This information gathering can be a function of the Public Information Liaison that is in each POD.

Getting People Through the POD

Good communication in the POD can enhance the flow by reducing confusion, ensuring people are prepared, and answering questions before they are asked. Develop communications that can be used at a POD to:

- Inform people about the drug and agent,
- Inform people how to take the medicine (including the importance of taking and continuing to take the medicine),
- Explain how to identify the staff,
- Tell people what to expect in the POD,
- Explain why it is worth the wait,
- Explain that there will be enough medication for everyone, and
- Tell them how they can get their questions answered.

Communication in the POD can be done in several different forms, including posters, signs, videos, handouts, announcements over the loud speaker, and people answering questions. Each form of communication can be used for different functions.

Well-designed and well-placed directional signage can be very useful in aiding people through the flow of the POD. Directional signs should be in clear, simple

language. They should also use arrows or pictures. Make sure that the signs are big enough to be seen and that they are posted in places that make them visible. For example, if you hang signs on the front of a dispensing table and people crowd around it, the signs might not be able to be seen. A better place to hang a sign might be above the table so that it can be seen above the crowd.

Posters and handouts can be used to educate and inform the public about the agent or drug that is being used. You can use informational posters to reinforce any fact sheets you may also be distributing. (Make sure the information is consistent.) When developing posters,

- Give information in chunks,
- Keep it simple,
- Make it big, and
- Make it visually interesting.

Informational videos can also be used to educate the public. If you are going to use a video, make sure that it will not affect the POD flow. Decide what language it should be in, and ensure that people will be able to hear it over any ambient noise.

Volunteers walking around the POD can also be a valuable source of information because they can explain the process and answer questions. It is important that these volunteers be trained to answer the questions they might be asked. When preparing volunteers to answer questions from the public, think about what questions you would have if you were in the public's situation. These volunteers can also be used as another feedback loop. If they get a lot of questions about a particular subject, this can be reported to the Public Information Liaison at the POD, who can then create additional materials for the POD or can refer it to the JIC to decide if a media release is needed.

As with any communication activity for the POD, ensure that your materials are developed to accommodate special populations specific to the jurisdiction that the POD is serving. You will want a plan for handling both written and spoken language interpretation that will be needed at the POD and to have any agreements for these services signed before an event.

After the POD

Once people leave the POD, make sure they know:

- How to take their medication,
- The importance of taking the full course of treatment,
- Side or adverse effects of the medication,
- If they need to check back, and

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- Where they can go to get additional information (hotline, web site, newspaper, radio/television station, etc) or to ask questions, if needed.

Communications about medication adherence should be repeated, should explain the need for and importance of the medication, and should include a safety valve (a telephone number staffed 24/7 that people can call rather than discontinuing their treatment).

VOLUNTEERS

Implement

As part of your overall SNS planning, you might also consider using health communicators as part of the recruitment plan for volunteers both pre-event and during an event. Your communications staff can assist in the creation of a campaign that will tell volunteers where to go, what to expect, and what skills are needed.

Health communicators can also be helpful in developing any “just-in-time” training for the PODs. They may prove particularly useful in sharing some tips for communicating with the public at dispensing sites.

SNS PIC PLANNING RESOURCES

Implement

- The National Public Health Information Coalition (NPHIC) is an independent organization of professionals who are working to improve America's health through better public health communications. Members of NPHIC are senior public health information officers for their states. They are familiar with CDC bioterrorism grants, particularly Focus Area F, which deals in communications, and are already developing materials for crisis and emergency risk communications. Many NPHIC members are the Focus Area F coordinators for their states. You need to work with your state NPHIC representative when you develop SNS-specific public-information materials.

NPHIC

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<http://www.nphic.org/>

- The mission of the Directors of Health Promotion and Education (DHPE) is to strengthen, promote, and enhance the professional practice of health promotion and public health education nationally and within state health departments. You should contact DHPE to identify health educators in your state health department, to find professionals who are familiar with

the special populations in your community, and to find individuals who can assist in the development of SNS-specific public-information materials.

Directors of Health Promotion and Education (DHPE)
1101 15th Street, N.W., Suite 601
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<http://www.dphe.org>

- *Model Emergency Response Communications Planning for Infectious Disease Outbreaks and Bioterrorist Events*, Third Edition, published by DHPE, is an excellent reference for S/L public-health and emergency-response officials. It provides a framework for public health officials to communicate with other health officials, emergency response organizations, the public, and the media. The publication includes the latest information on infectious disease threats plus a CD-ROM of fact and work sheets for responding to bioterrorism hazards and other public-health emergencies. You can view it online or order it at <http://www.dhpe.org/model.asp>.
- The Department of Homeland Security's Office of State and Local Government Coordination and Preparedness funds the National Memorial Institute for the Prevention of Terrorism in Oklahoma City, Oklahoma, to develop and maintain the Lessons Learned Information Sharing website (LLIS.gov). LLIS is a secure, national; online compendium of lessons learned and best practices designed to help emergency response providers and homeland security officials prevent, prepare for, respond to, and recover from acts of terrorism. LLIS access is restricted to verified emergency response providers and homeland security officials at the local, state, and federal levels. Its information resources have been conceived and developed by homeland-security professionals for their peers and includes an extensive catalog of after-action reports from exercises and actual incidents as well as an updated list of homeland security exercises, events, and conferences.

Lessons Learned Information Sharing Help Desk
Care of DFI International
1717 Pennsylvania Avenue, NW
Suite 1300
Washington, DC 20006-4614
Phone: (866) 276-7001
Feedback@llis.dhs.gov
<https://www.llis.dhs.gov/>
- The National Association of County and City Health Officials (NACCHO) has been funded by the Centers of Disease Control and Prevention to collect, develop, and disseminate resources that will help local public health agencies prepare to respond to an event like bioterrorism. NACCHO's STOCKbox is an online source for SNS- preparedness tools and resources

developed by state and local public health agencies as well as SNS-related products from NACCHO and its partners.

NACCHO

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Phone: (202) 783-5550

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<http://www.naccho.org/stockbox/>

- CDC has a wealth of information for the public on its Emergency Preparedness and Response website at <http://www.bt.cdc.gov/>. You may refer to it for information (in English and Spanish) and fact sheets about bioterrorism agents, diseases, and other threats. It also lists hotline phone numbers.
- CDC has developed a variety of tools for crisis and emergency risk communication. Its training curricula can help novices to come up to speed and seasoned professionals to hone their skills. Course offerings and resources are at http://www.cdc.gov/communication/emergency/erc_overview.htm
- “The Public Health Workbook to Define, Locate, and Reach Special, Vulnerable and At-Risk Populations in an Emergency” is available to assist you in planning for special/vulnerable populations. This document is currently available at: <http://www.bt.cdc.gov/workbook>
- Appendix G contains health-related communication materials developed by an expert panel of PIC and mass-dispensing professionals that met in Atlanta in April of 2004. It is not meant to be a comprehensive checklist, but it does provide a good overview of the special considerations for PIC activities to support mass-dispensing activities.
- Your state and local health departments are also excellent resources for identifying public information officers, health-communication specialists, and health educators who can help you develop your SNS PIC plan.
- SNS Public Information and Communication Specialists are also available for technical assistance. In addition, a one-day workshop entitled “Mass Antibiotic Dispensing: Public Information and Communication” is available. This workshop introduces state and local communicators to the SNS and helps them better understand their roles and responsibilities in the event of SNS deployment. This course focuses on the development of messages, methods, and materials for disseminating information to specific audiences. To learn more about it, you can contact your state’s DSNS Subject Matter Expert.

PLANNING CONSIDERATIONS

Consideration	Responsibility		
	State	Regional	Local
Have you identified your PIC counterpart and do you have a good understanding of his/her responsibilities for public information and communication?			
Have you identified (and are you maintaining an ongoing collaboration with) the regional, state, and local SNS and communications professionals responsible for the success of your SNS PIC planning?			
Have you identified one individual at each dispensing site who will be responsible for communicating PIC operational information up (and down) the chain of communications during an event?			
As part of your SNS plan, have you identified the SNS mass-dispensing operational information that must be communicated to the public during an event?			
Have you implemented and exercised a plan to provide SNS mass-dispensing operational information to the appropriate PIC professional?			
Have you identified the process for convening the core working group that local, state, and federal public health officials will form if a disease outbreak is suspected or confirmed, and does the state SNS coordinator have a seat at the table of the core working group?			

Implementation Capabilities

Capability	Responsibility		
	State	Regional	Local
Does your all-hazards and/or bioterrorism response plan have a PIC component?			
Have you had a health-PIC professional help you develop the public-information portion of your plan?			
Has your PIC professional developed messages to mobilize members of the public, move them through the PODs, and inform them about alternative methods to obtain treatment and medication?			
Has your PIC professional prepared anticipatory pieces about POD locations, transportation and traffic, what to expect at a POD, and medication regimens?			
Has your PIC professional prepared write-ups for recruiting and processing volunteers?			
Have you prepared messages tailored to each audience and channel of communication that you might need to address?			
Have you accessed and used the SNS-related PIC planning resources?			

Deployment Processes

Process	Responsibility		
	State	Regional	Local
You must be able to mobilize the public to obtain prophylactic medications and to adhere to a treatment regimen.			
Provide the PIC professionals with practical information the public needs to know.			
Make operational information available to the PIC professionals who will communicate it to the public.			

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