

# Veterinarians as Partners in Public Health Preparedness: Qualitative and Quantitative Needs Assessment Results

Elizabeth Ablah, PhD, MPH  
University of KS School of Medicine-Wichita

Lindsay Benson, MPH  
University at Albany, Albany, NY

June Beckman-Moore, BA  
University at Albany, Albany, NY

Kristine M. Gebbie, DrPH, RN  
Columbia University

**NYCEPCE**

New York Consortium  
for Emergency  
Preparedness  
Continuing Education

# New York Consortium for Emergency Preparedness Continuing Education

- **Mission**

- To extend and strengthen the competency of health professionals in New York State and New York City to respond effectively to emergency events.

- **Members include:**

- Columbia Univ. School of Nursing
- Univ. at Albany Center for Public Health Preparedness
- Albany College of Pharmacy
- Community Health Care Association of New York State
- Northeast Regional Public Health Leadership Institute
- Vocational Education and Extension Board of Nassau County
- University of Kansas School of Medicine-Wichita

## Why Assess Training Needs?

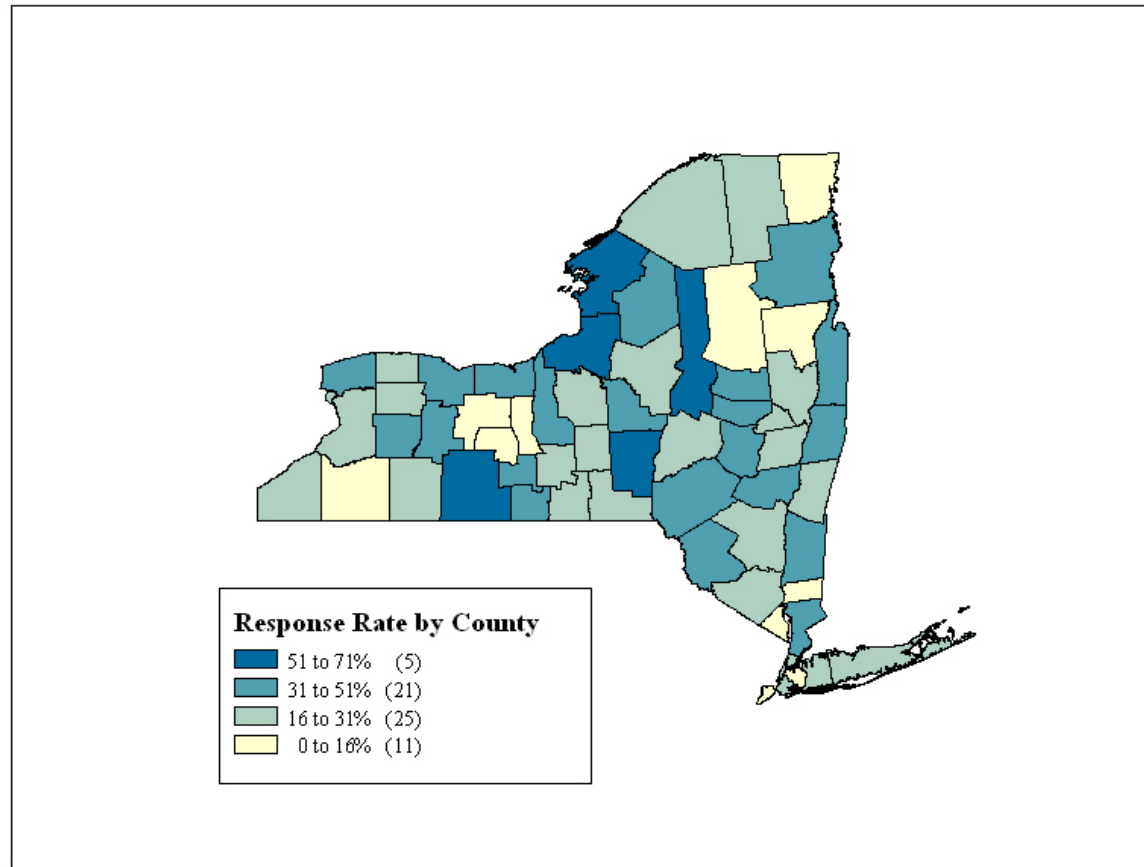
- All response partners will benefit from having veterinarians as a resource.
- Emergency preparedness training needs can be identified.
- Training can then be tailored to fit needs.

# Quantitative Assessment

## Methods

- Human subjects approval obtained.
- 22 items addressing several topics:
  1. Risk of bioterrorism (BT) or zoonotic disease emergency
  2. Preparedness training
  3. Relationship with local health department
- 1,832 randomly sampled, from a total of 3,685 licensed NY state veterinarians.

# Response Rates by County



- N=529
- More than half of the 62 NYS counties had at least a 25% response rate
- Median response rate = 29%

# Demographics

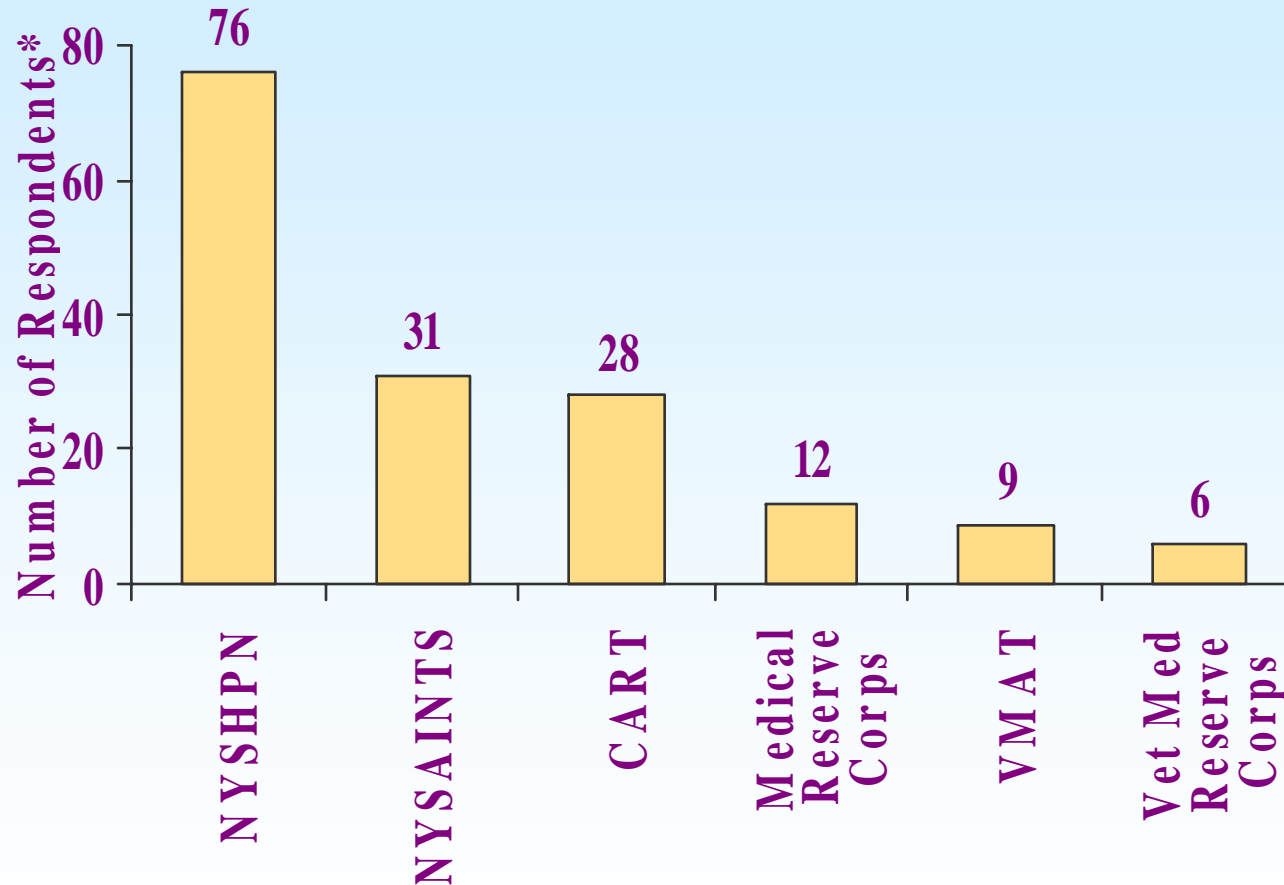
	#	%
<b>Gender</b>		
Female	267	51%
Male	253	49%
<b>Total</b>	<b>520</b>	<b>100%</b>
<b>Age Group</b>		
<40	169	33%
40-59	266	51%
60+	82	16%
<b>Total</b>	<b>517</b>	<b>100%</b>
<b>Specialty</b>		
Small Animal	437	87%
Large Animal	68	13%
<b>Total</b>	<b>505</b>	<b>100%</b>
<b>Work Setting</b>		
Large city	154	30%
Small city	259	50%
Rural	106	20%
<b>Total</b>	<b>519</b>	<b>100%</b>

# Demographics

	#	%
<b>Years Licensed</b>		
<1	16	3%
1-5	83	16%
6-15	134	26%
15+	288	55%
<b>Total</b>	<b>519</b>	<b>100%</b>
<b>Patients Seen Per Day</b>		
<10	82	16%
10-30	353	71%
30+	65	13%
<b>Total</b>	<b>500</b>	<b>100%</b>



# Respondents Participation in Preparedness Organizations



NYSHPN=NYS Health Provider Network and Tracking System

NYSAINTS=NYS Animal Incident Notification

CART=County Animal Response Team

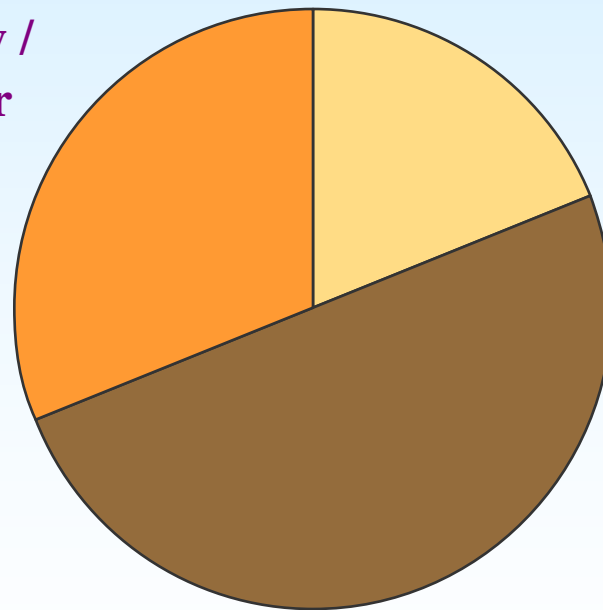
VMAT=Veterinary Medical Assistance Team

\* Respondents could choose more than one organization.

# Perceived Risk

How often respondents reported thinking about a BT or zoonotic disease emergency occurring in NY state (N = 525):

**Rarely /  
Never  
31%**



**Always /  
Very Often  
19%**

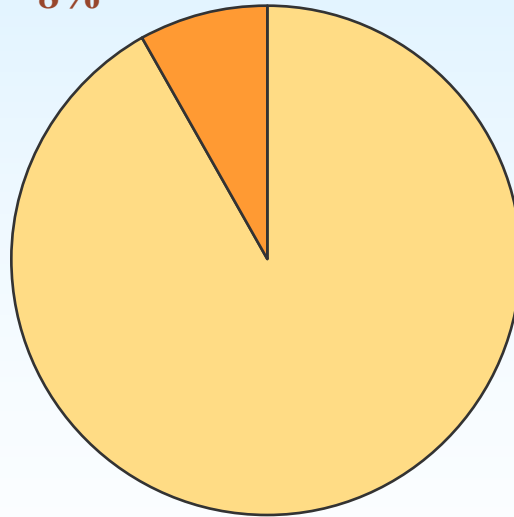
**Sometimes  
50%**

# Importance and Likelihood of Participation in Preparedness Training

Importance\* of preparedness Training (N= 525)

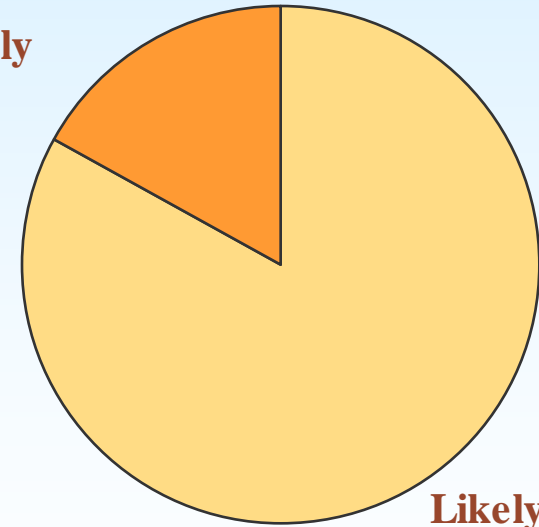
Likelihood† of participation in training (N =523)

**Unimportant**  
8%



**Important**  
92%

**Unlikely**  
17%



**Likely**  
83%

\*Important = very and somewhat important  
Unimportant = somewhat unimportant and unimportant

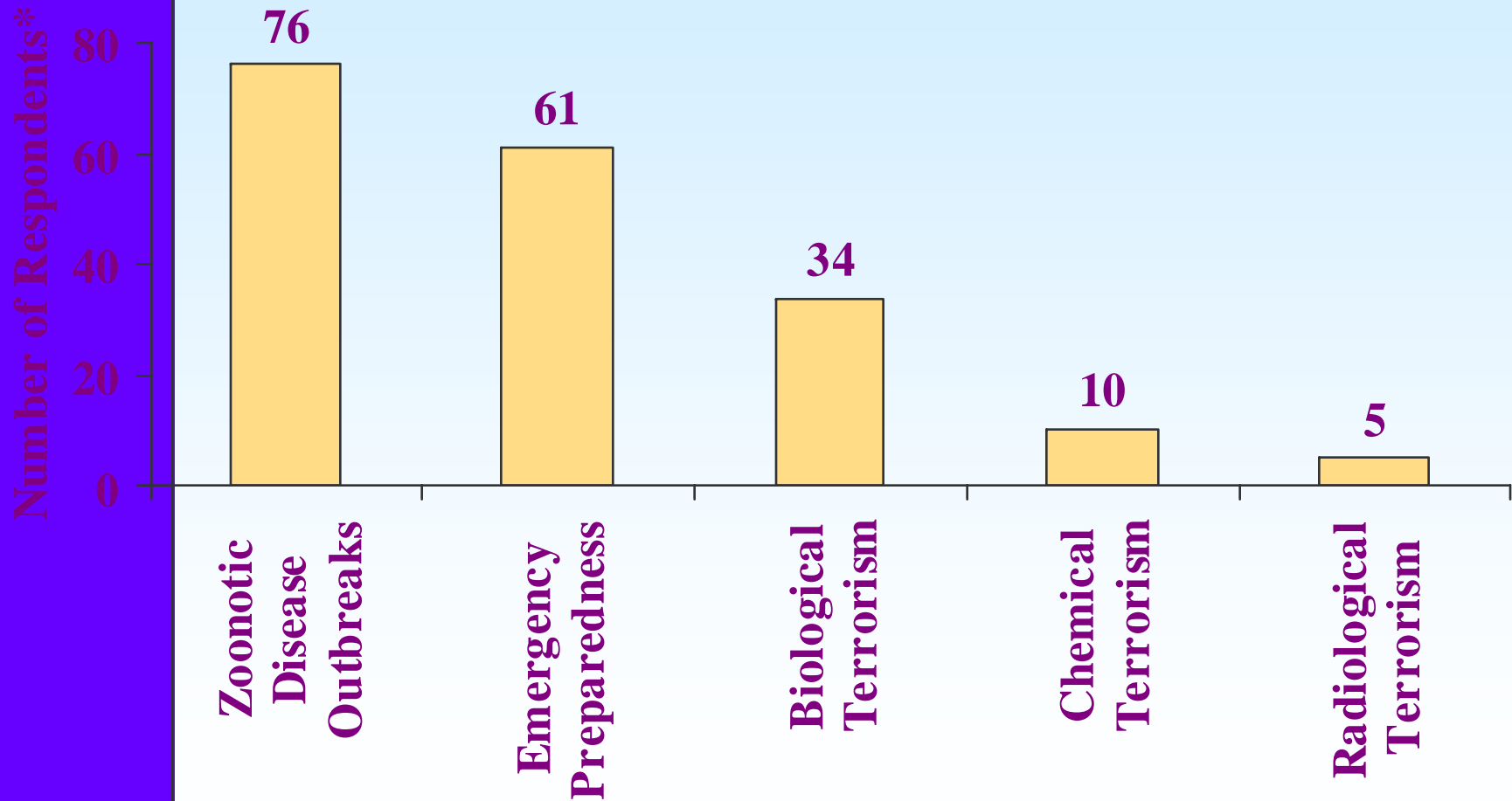
†Likely = very and somewhat likely  
Unlikely = somewhat unlikely and unlikely

## Importance and Likelihood of Participation in Preparedness Training

When compared to respondents who rarely or never think about public health emergencies, those who do were:

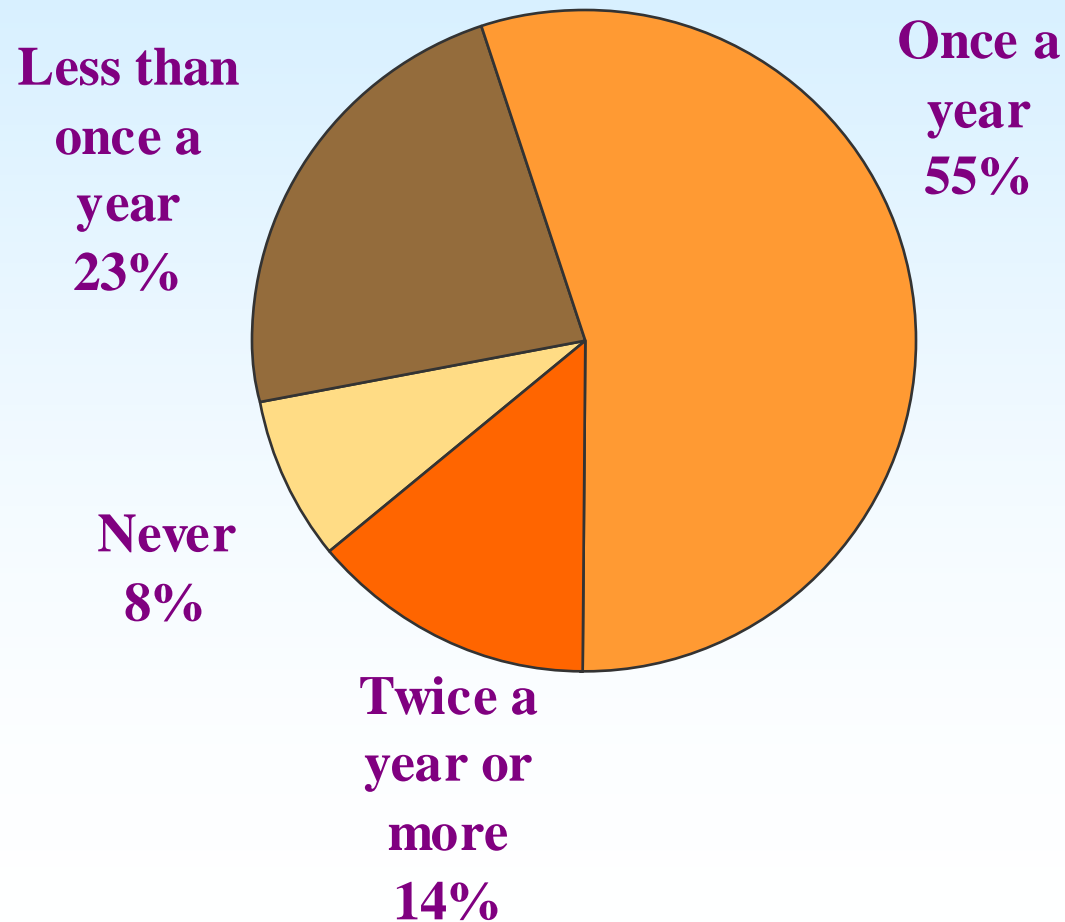
- 5 times more likely to report that it is important to be properly trained (95% CI = 2.6, 9.5).
- 4 times more likely to participate in training (95% CI = 2.3, 5.9).

# Participation in Preparedness Training in the Past Two Years



\*Respondents were allowed to choose more than one

# Willingness to Participate in Preparedness Training



# Training Needs

70% or more of respondents reported they needed more education/training in:

- Signs, symptoms and treatment of biological, chemical and radiological agents.
- Decontamination procedures.
- Notification of agencies.
- Proper use of PPE.
- Methods of effective communication.

# Training Methods

## Most Frequent Exposure to Preparedness Issues:

- Journals
- Newspaper/Newsletter
- Television
- E-mail
- Meetings

## Most Effective Training Methods:

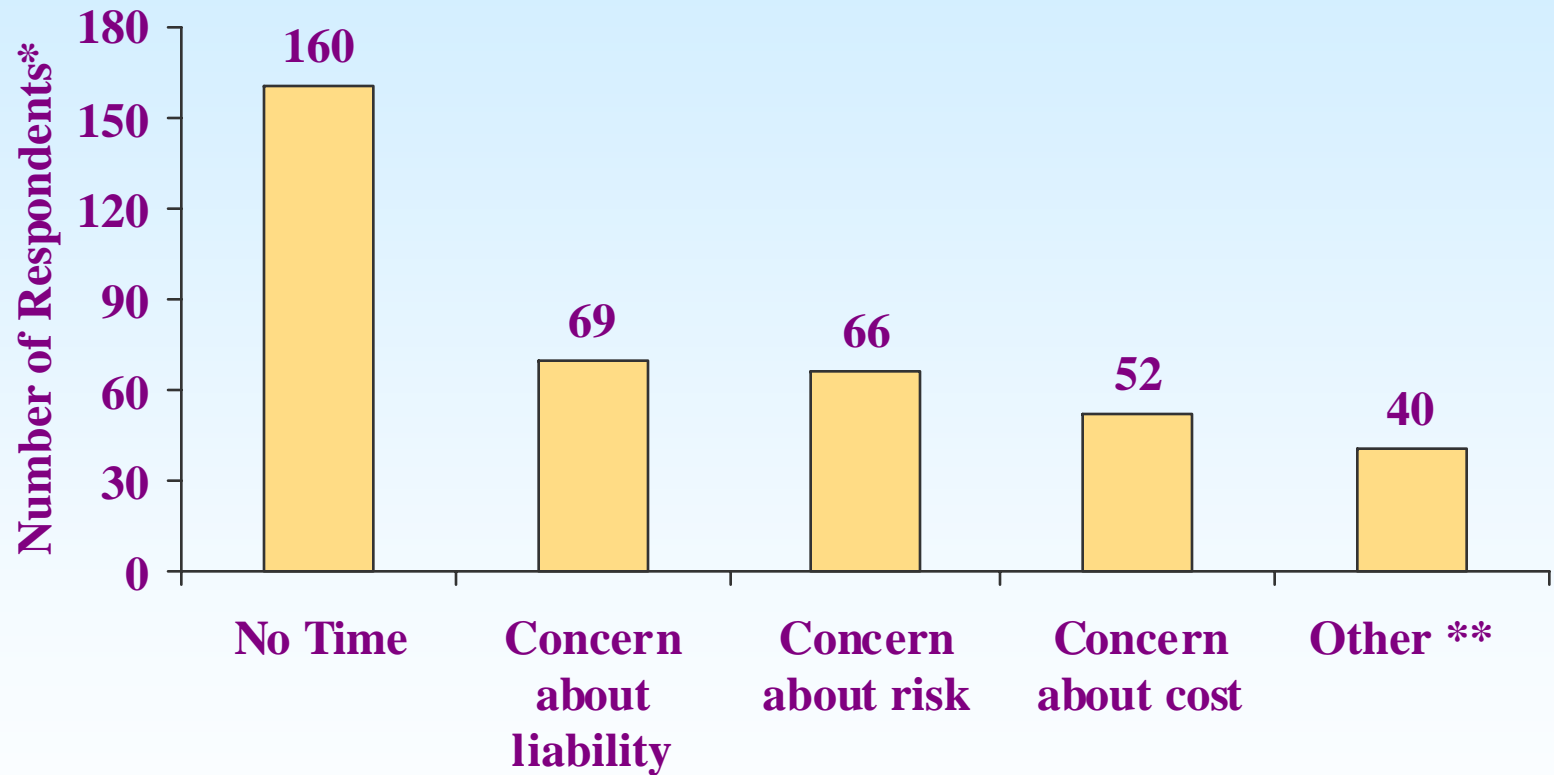
- In person training
- Simulated disaster drills
- Training video/CD
- Online training course
- Tabletop exercise



# Working Relationship with LHD

- 60% reported not having a working relationship (21% did).
- Among those who did *not*, nearly half reported that they *would* be interested in working with their LHD.
- 75% had provided assistance to LHD in responding to a potential case of animal rabies.

# Obstacles to Working with LHD



\*Respondents were allowed to choose more than one obstacle.

\*\* Other obstacles included: retirement, poor relationship with LHD, lack of training and lack of information.

# Qualitative Assessment

# Methods

- Human subjects approval obtained.
- Two goals:
  1. Determine what preparedness training is still needed.
  2. Identify obstacles.

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# Demographics Represented

- Large animal veterinarian
- Small animal veterinarian
- State field veterinarian
- President of the NY State Capital Veterinary Medical Society

# Barriers to Preparedness Training

- Personal - Lack of motivation, issue does not seem important
- Time management- Busy schedules, reluctant to attend meetings
- Professional - Divisions between different specialties, disconnect with LHDs

# Requested Preparedness Training

- Introduction to emergency preparedness, including:
  - Incident Command System (ICS)
  - Veterinarian roles and responsibilities
- Emerging and foreign animal disease refresher
- County Animal Response Teams (CARTs)
- How to partner with LHDs and medical professionals

# Specific Strategies for Preparedness Training

- Short, focused, training with a clear sense of purpose (training held at “nice” locations for a few hours on weeknights).
- Sessions available more than once, on multiple days of the week.
- Hands-on, concrete skill development.
- Training materials must be tailored for veterinarians.



# Preparedness Training

- Veterinarians want and need discipline-specific emergency preparedness training.
  - Biological, chemical and radiological agents.
  - Decon.
  - Notification of agencies.
  - Proper use of PPE.
  - Methods of effective communication.

# Thank you!

## Questions?

**Contact Information:**

Lindsay Benson, MPH, CHES

Phone: (518) 408-2334

E-mail: [lbenson@uamail.albany.edu](mailto:lbenson@uamail.albany.edu)