Trudy (<u>00:09</u>):

Welcome to Hotwash. I'm Trudy.

Christine (00:11):

And I'm Christine. We're emergency management and public health professionals...

Trudy (00:16):

Nerds talking about law and policy of emergencies. Today on episode eight of Hotwash, Christine and I are joined by Preeti Emrick, a former CHHS staffer, who is currently the director of Anna Arundel county's office of emergency management. We've discussed the COVID-19 pandemic from the perspective of public health, behavioral, health, and recovery, but we thought it might be interesting to look at it specifically through the lens of emergency management.

Music (00:50):

Ketsa. "Mission Ready." Raising Frequency, https://freemusicarchive.org/static.

Trudy (<u>00:51</u>):

So we want to thank Preeti for being with us at what must be a very busy time. We ask everyone who comes on the show, how they ended up in this field. So can you give us your 30 minute or not 30 minutes, 30 second elevator speech about how you got into this field and where you are now.

Preeti (01:10):

So I got into this field quite accidentally. So I graduated from law school in 2006 practice law decided I really wasn't my cup of tea. So I wanted to do more policy work, which I had focused on in law school. And I heard about this university of Maryland center for health and Homeland security and kind of on a whim I applied. And my first assignment was at DC Homeland security and emergency management agency working on mass care sheltering. That project then turned into creating a mass care shelter plan for the presidential inauguration. Excellent really great experience in which presidential inauguration. I can't give you the number, but it was president Obama's first one. Yeah. So that was quite special. You know, since there, I, I learned about the emergency management field really, you know, appreciated what the field does and it's unique kind of situation in disaster response. And from there on, through the Center for Health and Homeland Security, I worked for the Maryland emergency management agency, a lot of local emergency management agencies, a lot of health departments. So I got a great perspective on kind of what public health does emergency management does in a disaster or an incident. And then from there on once I left the center for health and Homeland security, I focused on hospital emergency management, which has a very unique, different perspective of emergency management. And I really truly enjoyed my time there because in a hospital setting, I'm moving away from public health and actually dealing with what emergency departments do, what, you know, planning such as mass fatality, mass casualty from hospital perspective was really high. After that. I decided I wanted to go back to more government work. So in Anne Arundel County office of emergency management had an opening for a deputy director. And from there on COVID-19 happened, starting a job during a pandemic, nothing like starting job during a pandemic, again, as of a week ago, I became the director. So, you know, my experiences has really run the field of government, private sector, hospital, public health. So I think I have a good overall perspective of how the different fields can come together and how we can coordinate and work together to have an effective response and recovery.

Christine (03:32):

Wow. Yeah. You've just had the gamut of jobs in the field and congratulations on your new position, Madam director. Since you have all this experience in a lot of little sort of niche focuses in emergency management and public health, we'd like for you to talk a little bit about what emergency management actually is. We know that emergency management can be kind of difficult for the general public to conceptualize. It sort of gets simplified into just the work that first responders do. People think emergency management and emergencies and think police and fire. But tell us a little bit about what emergency management is, what you do at the EOC.

Trudy (04:14):

though, just in case our listeners, haven't heard the episode with Megan Timmins, what an EOC is.

Preeti (04:19):

Yeah. When I would give presentations on what emergency management is, especially to hospital leadership, I would put up this cool graphic about, you know, you know, somebody on a horse herding cats. And it really is kind of a perspective of we bring together a lot of stakeholders, not only just County, local or County, excuse me, federal state entities together, but we're talking about other stakeholders such as nonprofits, people who, you know, work in the healthcare field in order to develop plans, policies on how to respond to a disaster or a planned event, or really a lot of things that could run the gamut. Now in emergency management coordination, I think is a word that gets overused, but it is true coordinate. And I do run into people because of the word emergency and emergency management think that we are, the first responders would go out there and we make sure, you know, that we actually put out the fires or to with law enforcement do. And of course that's obviously not obviously not true. I think it's important for emergency management to understand what first responders do, because that really helps us in the perspective of planning. I also want to make sure that my first responders have those plans, have those policies and have the resources in order for them to effectively do their job. And that's where I come in. Right? So in terms of what public health can offer, what nonprofits can offer, we really run the gamut of, we have to understand a lot of these little leashes. I see said what the effective programs are that respond to disaster and coordinate that and make sure that one program is talking to another, in terms of coming up with an effective policy planning, you know, for the response. And a lot of it is behind the scenes work. As I like to say, huge-scale emergencies don't happen a lot, right? I mean, 2020 is kind of testing my theory on that. Maybe they happen all at once. It wasn't in 10 years of silence, but you know, so there's a lot of behind the scenes work of, you know, during the quiet times, making sure we're fostering those relationships between the programs, whether it's training, you know, education wise, exercise wise. That's why I almost emergency management. We're almost like consultants in a way, you know, before the big event happens, we have to make sure that everybody has their plans ready. Everybody is trained. Everybody is exercising. So the emergency operation center, the EOC is where we gathered those agencies and stakeholders together during a response to make sure that we're communicating effectively to make sure that when we do have plans in motion for the response that, and I say this, you know, knowing that what we have trained for what we've exercised for, sometimes it doesn't happen in the practical realm of the response. And so having that emergency operation center is key to make sure that any hiccups or anything that doesn't go as planned as they happen, we have an effective location and ways of communicating with each other, but even that's changing during the pandemic, a lot of EOCs have gone virtual. And I think that's great kind of next step on how an emergency operations center can be effective. Even if physically, we can't be there talking to each other.

Trudy (07:42):

And that is a big shift, right? Because a lot of times, you know, we're seeing this in a lot of different sectors, but especially in emergency management, the idea is everybody all together in the room to have the conversations and now it's happening in a different form.

Christine (07:55):

which sort of brings us back to the initial comparison of hurting cats. You say herding cats, but I mean, it's a totally in a nonjudgmental way, like in emergency management, we understand that we're getting invited in to organizations at the worst possible time and regardless of how prepared and how much planning we've all done, we all know in the planning world that plans don't survive first contact. So the process of planning itself is the value.

Preeti (08:28):

And so, and that's why behind the scenes, we have to work constantly maintaining those relationships. Plans do not get executed as they are written. It's just time and time. It never happens. So maintaining those relationships during the peaceful times, as I like to call it, is key. And that's really done through program management, project management. And that's something I think really emergency needs to focus on is those skills, rather than the response heavy, which we still have to be involved. And we still have to understand how that actually happens project and program management behind the scenes to make sure we have had those plans. And we maintain those relationships.

Trudy (09:11):

I know that there's a lot of times when you start having conversations with organizations that haven't done a lot of their emergency preparedness planning, you ask them. So if this kind of hypothetical disaster occurs, what happens and most of the time, the answer is, well, we call the police or we call the fire department. And that's exactly what you don't want, or don't want is everyone in the County saying, we're going to call the fire. We're going to call the police.

Preeti (09:38):

So, and I think, you know, in my work experience, there have been, you know, local jurisdictions have that, that have been really good about making sure that agencies kind of understand their roles in a response, and that the stakeholders, once they understand that they take ownership of it. And sometimes it works better than others. It's really emergency management's unique in that in some areas, as one person, other areas, it's, you know, 20 people who can do it. I think this pandemic has brought about that emergency management needs more people. It is an important agency is important function that really needs more attention.

Christine (<u>10:15</u>):

And organizations are recognizing that they indivudally need this emergency planning. They all need an office of safety or security or emergency or whatever they want to call it, because as it turns out, COOP applies to everyone. Recovery applies everyone.

Preeti (10:32):

Right, continuity of operations, which I think sometimes in some places they don't recognize is an emergency management function that we could help out. And even before the disaster happens and

after, and it's a word that I think that gets thrown around a lot now, how do we continue operations and business world or in the nonprofit world government during the hospital. And that's something that we could add value and is something that I hope, you know, we say this every time a large disaster happens, whether it's Katrina, whether it's 9/11, whether it's now COVID-19, that I think is the building blocks of recognizing how important emergency management is. And I hope the longevity keeps continuing.

Trudy (<u>11:10</u>):

In the context of COVID-19 what have you and your office been doing for the response?

Preeti (11:16):

It's funny when you say response. So what I hope emergency management learns and what we could take into the future is that the response is so multifaceted and that there's a social services aspect, right? There's a public health. There is the law enforcement fire aspect in terms of like EMS or enforcement of, you know, certain guidelines. So our office has been focusing on not only has been being part of obviously standing up our emergency operations center, whether that's physically or virtually making sure that we're developing plans. So I guess number one, we're kind of developing plans on the fly in terms of not just COVID-19, but things that COVID-19 has affected. So we're talking about sheltering during hurricane or the extreme temperature plans. Those had now have to have a pandemic annex, which we haven't thought of before. And when you talk about what COVID-19 has affected, there's a large population that has food insecurity needs. Are you talking about vulnerable populations that the unsheltered that can't stay home, where do they stay home and how do you, how do you have plans to handle that? And that's where I think emergency management is kind of broadening his perspective of when there is a disaster. It's not just fire police. They're important part of it obviously, but there's all these other sectors that come out economically food insecurity, you know, the unsheltered, there's a lot more plans and initiatives and partnerships that need to be formed. That emergency management can be a part of right now. We have our hands in all of that. And I think it's broadening our perspective of what emergency management can do, developing a lot more plans on the fly, right of the perspective of, you know, sometimes it takes six months to a year to make a plan. We don't have that. So how can we put together plans that are simple yet effective? And I think that's really something that's come out of this that I hope to continue on in the future, but what can we take? What we've learned at quickly tick, you know, developing these plans, also maintaining the relationships in terms of food insecurity in terms of the unsheltered that yes, we should focus on during a disaster, but what can emergency management do in the peaceful times to maintain those relationships? Right. And I think that's something that COVID-19 has taught us and that we hope to continue on.

Trudy (13:37):

You know, there's so much in the news right now, and so many stories that you kind of can get overwhelmed. But one of the things that I think is coming out of this pandemic is some really great innovation from all different sectors and fields. And I think those stories are the ones that I hope we start to hear more and more about cause they're from when we close schools and worrying about food insecurity for those students and how jurisdictions handled that to larger issues. There's just been some really great innovation coming out. And I think emergency management has been a key part of those innovations.

Preeti (14:11):

You know, especially with the schools. I mean, I have an eight year old, so we do remote learning. So, you know, continuity of operations, even in the school setting, which I think sometimes have been siloed or maybe emergency management hasn't been involved in, I think it shows the importance of what we can do to assist what we could do in terms of planning and, and technology. And the use of technology is incredible. It's it has its downfalls obviously, but I think we really need to lean in and take advantage where we can and understand is not the, you know, the ultimate answer. There's always going to be breakdowns, but, you know, kind of incorporating that into our everyday work. I think it's a good start and shows that we really got to understand technology little bit more and utilize it more.

Trudy (<u>14:53</u>):

Yeah. I mean, it's really a thought exercise to think about if this pandemic had happened to even 10 years ago and we didn't have the technology that we have now, what would the response of look like? What all these things, you know, people are relying on online orders and contactless pickup. We didn't have any of that 10 years ago

Preeti (15:12):

We would have found a way. And I think even as we get overwhelmed, you know, we talk about plans of what we could do. We will find a way, and it's always something I tell my staff that we, human beings are very capable and we may not have the perfect answers, but we'll do our best to, you know, serve who we can. So I always like to keep that as a reminder, we always find a work around. We always find a way.

Christine (<u>15:34</u>):

I think that's a really interesting and important point to bring out is that emergency management very frequently has to work very quickly to find the best solution with very limited resources and time. So it's not necessarily finding the perfect solution, but it's finding what works right now. So much of my work in emergency management has been like, well, what's the workaround.

Preeti (16:00):

Right. And I think my work, especially in the hospital has taught me that emergency management can be flexible. It's command system can be flexible, even maybe outside of what they normally teach us. And often the courses and stuff like that. There are creative ways to use the incident command system to fit what we have and the resources we have. I mean, this isn't any field, what we learned in the classroom and how we apply. It are two different things. I mean, it's in law, it's in whatever field we are. And I think this has really taught us a lot in how to effectively apply that. And maybe ways we didn't learn in our training, we really have to make sure to keep in touch with our partners, whether it's public health, whether it's the hospitals and less in those fields to understand what they're doing. And so whether it's getting involved in their trainings, get involved in their exercises. I know in the past, when I was working in the hospital, the office of emergency management came and evaluated my exercises at the hospital. And that was great because they knew what the strengths we had, the shortcomings we have, what we can improve upon. And they got an understanding of what we did, but also we got an understanding of what they could provide. Again, it's continuous building, but I think there is a way we can work together.

Christine (<u>17:12</u>):

I think it's, it's an interesting dynamic between public health and emergency management, because conceptually there's a lot of overlapping functionality. I mean, you have the FEMA core capabilities and

then you have the Public Health Emergency Preparedness (PHEP) capabilities and they're very, very similar. But I think as emergency management continues to recognize and address some of the cascading effects, the unexpected effects of emergencies, I think it's an opportunity to really pull in some of the public health resources that are out there.

Preeti (17:42):

Absolutely. And maybe it's because of my background in public health and in the hospital that I don't see. So of it being a contrast more than that, we could compliment each other and you're right. Maybe the core, there's a similarity of core capabilities. Could we maybe align them a little better? Absolutely. So that we're talking, you know, the same language at the same time, but I think, I mean, there's a way to, I think come to an understanding of these overlapping capabilities and how we can work together maybe as an optimistic viewpoint.

Christine (<u>18:13</u>):

Optimism is welcome, Madam director.

Preeti (18:15):

Yes, thank you. I always see the glass half full.

Trudy (18:19):

So we're still in the response phase and early in the recovery, depending on where you are in the country, but are there lessons learned? You've talked a lot about the need for building on relationships and figuring things out as those issues arise, but are there lessons learned or best practices so far from this that you would like to share

Preeti (18:38):

In terms of lessons learned, I think is to keep flexible. So part of the difficulty with recovery is that we don't know exactly what's going to happen in a hurricane. You know, the devastation it's done and we can move forward in a blizzard. It lasts a couple of days. It's done, we can move forward. And here it's almost, there's a difficulty of moving forward because we just don't know what's going to happen. Obviously there's a very high chance it's going to come back in the fall. So how do we mesh response and recovery at the same time, the response could come in waves and peaks such as what COVID-19 is probably going to do. And what I counsel is that there are different stages of recovery that can correlate with the different stages of response that both are not going to be heightened at the same time or be down at the same time. I think that's what it is kind of lessons learned is being flexible in that approach. We have to understand that as businesses reopened, there's a recovery aspect, the economic recovery aspect, but there's also still the long-term recovery aspect of it. There's people who still need food. There's still going to be the unsheltered. And how do we plan long-term for that in terms of also combination of response and recovery. And this is such a unique situation in that the recovery is going to be entangled with a response. I think recognizing there's just going to be stages of it and being flexible and being open to what is going to happen, thinking ahead of talk about PPE, making sure we have those resources for the fall. What we're doing right now in our feeding initiative is less extended out until the end of the year, because we will see that need continuing, depending on what might happen.

Christine (20:15):

It's really challenged the whole framework of emergency response and planning.

Preeti (20:21):

This is definitely pushing emergency management and its boundaries in terms of, you know, what had spoken about earlier, there are some offices that have one person and another has 20. So you're talking about staff exhaustion. Well, we're dealing with COVID-19 with hurricane season with protests that are happening around the country. How do you maintain your own staff for the long term, right. And how do you, and that's when the partnerships become so important because it cannot just be the opposite of emergency management. And that's where building those relationships help because everybody's exhausted. Everybody understands that this is for the long term. So how do you maintain staff positivity? Making sure there's no burnout, making sure that there's not a brain drain, which I've seen happen in some of the other offices that some people are like, maybe this is not for me. And I think that's also important to look within the offices of emergency management on how we can maintain happy well-being of staff members and encouraging them to talk openly about the stresses and, you know, making sure that they're being healthy at the same time for this long-term response recovery effort that's going on.

Christine (21:30):

That's a really important point that we've heard from essentially everyone else we've talked to. We're seeing that stress and that concern about staffing sustainability throughout all of the offices. All of our colleagues are having the same question.

Trudy (<u>21:43</u>):

Those hours, aren't uncommon in emergency management and public health emergency preparedness, but I think what's different. And what I think everyone is starting to realize is this is as they say a marathon, not a sprint. So when you say you're going to work 16 hour days for two weeks, that sounds tough. Right. But doable. But when you're looking at a year, it's a completely different story.

Preeti (22:06):

So what we're doing, and I know other offices are probably doing the same thing is incorporating. We use the term new normal, probably a little too much, but it's really incorporating this into how do we get back to kind of a new normal business where the COVID-19 response is incorporated into our just everyday kind of response. And that's, I think part of the recovery for the office of emergency management is how do we incorporate it? So we don't burn out where there is hurricane season. How can we incorporate this into, okay, this is just kind of the, not a heightened response anymore, but how do we incorporate this into our own continuity of operations as well? This is a COVID-19 program. Now that's just going to get incorporated into our office. We're still doing the good work, but making sure we have room for other stuff that will happen and it will happen

Christine (<u>23:02</u>):

Preeti, a lot of times we like to ask our guests to sort of provide a summation or provide three tips on how the public or others in the field can move forward. Do you have anything like that you'd like to share?

Preeti (23:15):

So number one, I think specifically to emergency management, I think this is a new age for emergency management and that we can expand some of the boundaries. I think we've put ourselves in, in terms of our outreach to the community. We talk about the whole community approach, but I don't think it's really been tested before this, in terms of social services or really how we can help the community. And I think that will help broaden our perspective of what whole community actually is so that after COVID-19 ends. And I put that in quotation marks that we could still continue the good work and the partnerships that we have built upon what I'd like the public to take away is that there is an office of emergency management and, you know, we're small but mighty, and that we're doing a lot of good work in coordinating a lot of these programs and we are behind the scenes people, right? We're not out there in the field sometimes. I think it's important to understand, to understand that. But I also think is important for the office of emergency management to sometimes be in the field in terms of being at those testing sites and being at those food giveaways at the pantries, because we are involved in the planning of that we are involved in this initiative. So to be in the public, also assisting in those things, I think would be really helpful to the public to understand that we are involved. But I also think it helps us in our understanding of what our partners do.

Christine (24:41):

So thank you for joining us, Preeti. Thank you for taking the time out of your busy day, Madam Director to join us and discuss I'm going to have to continue to use that.

Preeti (24:51):

It's okay. Sometimes they call me doctor. You too, can be a doctor.

Christine (25:00):

So folks at home, please join us next time.

Speaker 2 (25:18):

Ketsa. "Mission Ready." Raising Frequency, https://freemusicarchive.org/static.