

Kate Brown, Governor



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Date: June 7, 2017

- TO: Representative Knute Buehler House Committee on Health Care
- FROM: Akiko Saito, Interim Director of Emergency Operations Health Security, Preparedness and Response Program Public Health Division Oregon Health Authority
- SUBJECT: Contingency planning for cellular network traffic during the solar eclipse population surge

Dear Representative Buehler,

Thank you for the opportunity to share the Oregon Health Authority-Public Health Division's plans and concerns related to the solar eclipse predicted for August 21, 2017. We would like to follow up on your question regarding contingency planning for the excessive traffic on cellular telephone networks. I would like to: (a) provide a specific informational contact within state government; (b) share our understanding of cellular telephone limitations during the eclipse population surge; and (c) describe our ongoing strategies for redundant communication with the public health and health care systems.

## **Informational contact**

As part of the Oregon Health Authority, we are end users of cellular telephone networks. Within state government, an informational contact for cellular telephone communications planning is:

Christopher Tamarin Telecommunications Strategist Oregon Business Development Department 121 SW Salmon Street, Suite 205 Portland, Oregon 97204 christopher.tamarin@oregon.gov

## Cellular network congestion during eclipse population surge

As end users, it is our assumption that congestion on the mobile wireless cellular networks will likely affect commercial service which our staff, medical volunteers, health care staff, public health personnel, and general public rely on. This may lead to delays for the general public to reach 911 and other health care contacts via their cellular telephones. We will encourage our partners in the lead agency to assess

and evaluate the options for expanding capacity or reducing congestion in partnership with the telecommunications providers. We understand that the Oregon Business Development Department, listed above, is working on establishing contacts within each cellular telephone carrier for Oregon Emergency Management to contact regarding eclipse concerns if needed. We were glad to learn that one provider, AT&T, has already announced plans to bring two "cell towers on wheels" to central and eastern Oregon. In addition, Verizon Wireless is currently evaluating the potential impact of the Solar Eclipse in the "path of totality" across the nation.

We will also encourage everyone to reduce or limit cell phone usage appropriately if they do encounter network congestion, via our general messaging on eclipse safety concerns that we disseminate directly to partners in health care, public health agencies, and the general public. However, with the concern that cellular network congestion may limit emergency calls to 911 for medical concerns, we will fold this concern into our ongoing survey and outreach to public health and medical partners. Many local partners are planning aid stations to address travelers' minor medical concerns that do not warrant a 911 call or emergency department visit. We will discuss with local partners how those aid stations, and other contingency plans, could address congestion among the cellular networks by providing satellite telephone, radio or direct contact to EMS and transportation.

One concern we are investigating is how out-of-state cell phone area codes will be routed to "211info" and the Oregon Poison Center. Such calls may be routed to the call center for their area code, not necessarily the call center for the state they are physically in. This is a concern because we and other state agencies are going to be coordinating with 211info on additional scripts and possibly additional staffing for the eclipse influx, in order to provide visitors with easy access to health and other information. Oregon Poison Center is a key resource for the public for concerns about exposure to toxic substances, and the Public Health Division has an ongoing relationship with them in order to detect unusual types or volumes of inquiries to their call center, including during the eclipse population surge.

## Redundant communications systems for public health and health care

First, many emergency services such as EMS and fire and rescue already use robust radio communications technology that is unaffected by any cellular network congestion. However, we are concerned that some rural EMS providers, such as those with only one or two ambulances, may rely on cellular telephones for dispatching and routing. We will investigate this for our situational awareness, via the state EMS and Trauma Systems program, which is part of the Public Health Division, and our public health and health care preparedness liaisons around the state.

Within Oregon's public health and health care system, we have developed additional redundant communications systems for disaster response. In addition to land lines and cellular phones which are standard, we sponsor and continuously test a fleet of handheld satellite telephones. Currently, we provide 43 satellite telephones to coastal hospitals and public health agencies, who are at risk from tsunamis and coastal storms, as well as to a limited number of our own staff. In previous years we sponsored satellite phones for hospitals and public health agencies statewide, but reduced the fleet after substantial reduction to our federal grant from the US Department of Health and Human Services. Many, but not all, public health agencies and hospitals maintain satellite phones at their own expense. In preparation for the eclipse we will be updating our directory of satellite telephones users and numbers among public health and hospital emergency preparedness partners.

Another major strategy is to coordinate and/or promote use of the Government Emergency Telecommunications Service (GETS) and Wireless Priority Service (WPS) among public health and health care partners around the state. We promote or provide access to these accounts, which allow only designated governmental and emergency response personnel to gain priority over landline and cellular telephone networks in order to make emergency calls. At the tactical level, we have received a request for satellite communications technology for the multicounty emergency operations center that will be stood up in central Oregon. We expect to send public health and health care preparedness liaisons to serve there, and are likely to meet their request to send twelve satellite telephones and at least one satellite-based mobile WiFi-hotspot internet access.

We maintain Oregon's Health Alert Network, which is a mass notification system for reaching thousands of public health, health care, and emergency management personnel via email, text message and recorded voice telephone messages (both landline and cellular). For many years we have also provided a 24/7 State Public Health Duty Officer that is regularly contacted by emergency response partners and community members.

In closing, I appreciate your inquiry and would be happy to answer any questions or give additional detail on this matter. The eclipse and associated population surges raise many concerns, but we remain excited to use this event as a scheduled opportunity to exercise our ongoing emergency preparedness systems, procedures and personnel.

Sincerely,

Akiko Saito, MPH, MPA Interim Director of Emergency Operations Health Security Preparedness and Response