The mission of the Sentinel Event Enhanced Passive Surveillance (SEEPS) Program is to develop a sustainable, regional, clinician-based system of early recognition and response to biological threats.

Our goals are:
- To develop an education and training program for regional clinicians focusing on recognition of and response to biological threats;
- To develop collaborative relationships with other jurisdictions;
- To continuously evaluate and improve content and program implementation;
- To produce a viable alternative to syndromic surveillance.

**Introduction**

**Preparedness & Response Guide**

**Purpose**

To provide SF clinicians with a comprehensive, practical and readable resource guide that addresses many aspects of infectious disease emergencies including roles and responsibilities of clinicians and the Health Department, specific steps for preparation, detailed information on bioterrorism related diseases and avian influenza, and information on infection control precautions.

**Implementation**

- Primary team: SEEPS team (Program manager & 2 pt-time MDs) and contracted graphic design firm (contractor #1);
- Feedback & review process: Initially from within team, then designated other physicians within Section. Final review and approval by Section Director

**Results**

- 3,500 hardcopy binders were produced. 3,000 were mailed to clinicians in SF. Others were given to our partner agencies; each binder contained 2 posters, rolodex cards, business cards, and a CD with the entire document. The guide was also posted on our new website.
- The guide was very well received and generated many requests for additional copies, lectures and permission for other jurisdictions to reprint. The Mayor highlighted the guide in a press conference.

**Clinician Advisory Panel**

**Purpose**

To assemble a cross-section of SF clinicians to:
- Provide SFDPH with some indication of the state of preparedness among SF clinicians to recognize, report, and respond to cases of category A BT agents and emerging infections;
- Provide feedback on proposed educational materials & communication channels;
- Assist SEEPS campaign with effective outreach

**Implementation**

- Identify and recruit appropriate clinicians
- Convene a weekend buffet dinner at a convenient, comfortable location and provide an honorarium
- Provide background info, then interactive discussion
- Solicit verbal and written feedback

**Results**

- Attendance: 13 clinicians from a variety of institutions and practice settings representing a variety of subspecialties (ID, Derm, IM, Fam Med, Infect Contrl);
- Support of overall project and suggested content;
- Suggestions: variety of opinions about the best media and method of delivery of info- including paper-based products to entirely electronic products.

**Website**

**Purpose**

To provide easily accessible, useful information for our primary audiences: the public and SF medical communities.

**Implementation**

Website architecture (site map) developed first:
- Team: SEEPS project team. reps from each Unit within the Section, and 2 personnel from a contracted website design and marketing firm (contractor #2);
- Goal: ID website audiences, their needs and an intuitive and easy-to-navigate website;

Website visual design developed next:
- Team: SEEPS project team. Unit reps, and personnel from a contracted graphic design firm (contractor #1);
- Goal: create a warm, helpful but authoritative image;

Website content and code developed last:
- Team: similar to above;
- Goal: provide useful but concise info for our targeted audiences.

**Results**

- Website live Fall, 2005
- Growing audience
- Links from multiple sites
- Useful for on-call Communicable Disease MDs

**Introduction to Guide & Website**

**Purpose**

- To inform clinicians about a new program – local USPS biological agent detection program;
- To “create a void”- ask clinicians if they are prepared to treat exposed patients and if they know where to obtain SF specific information;
- To “fill the void” - inform clinicians about SFDPH website, guide, Health Alerts and provide specific info on anthrax;

**Implementation**

- Contents:
  - Letter (1-2 pages): describing USPS biological agent detection program, creating and filling void (see above)
  - Guide Table of Contents (1 page)
  - Anthrax section of Guide (11 pages)
  - HAND Update Options and Request form (1 page)
  - Microbe Guide Postcard with pre-paid postage soliciting interest in binder;
- Method of Delivery: First class USPS mail (to insure return to sender of undeliverable mail)

**Results**

- 3,000 packets mailed to SF clinicians in our HAND. 300 were returned. 100 requests for the Guide were received.

**Lectures to Clinician Groups**

**Purpose**

To provide ongoing, in-person educational sessions on emerging infectious disease topics of interest to clinicians.

**Implementation**

- Identify and establish contact with target audiences (emergency medicine, primary care, ID, & dermatology groups)
- Identify topics of interest: pan flu, BT, outbreaks
- Develop, deliver and track presentations
- Obtain assessments

**Results**

- Approximately 20 presentations/year
- Consistent ratings of “very useful” & “well-presented”

**For further information**

Visit our website at www.sfdph.org/cdcp for many of these documents. Contact Dr. Karen Holbrook for more information (karen.holbrook@sfdph.org)