

Pandemic Influenza Planning

Seattle & King County, Washington, USA

Jeffrey S. Duchin, M.D.

Chief, Communicable Disease Control, Epidemiology & Immunization
Section, Public Health - Seattle & King County

Associate Professor in Medicine, Division of Allergy and Infectious Diseases;
University of Washington

Faculty, Northwest Center for Public Health Practice

Director, Emergency Response, WAMI Regional Center of Excellence for
Biodefense & Emerging Infections

US Health & Human Services (HHS) Pandemic Influenza Plan

Public Health Guidance

- Pandemic Influenza Surveillance
- Laboratory Diagnostics
- Healthcare System Planning
- Infection Control
- Clinical Guidelines
- Vaccine Distribution and Use
- Antiviral Drug Distribution and Use
- Community Disease Control and Prevention
- Managing Travel-Related Risk of Disease Transmission
- Public Health Communications
- Workforce Support: Psychosocial Considerations and Information Needs
- <http://www.hhs.gov/pandemicflu/plan/>

HHS Pandemic Influenza Preparedness Plan

Major Themes

- Coordination among Federal, state and local government
- Surveillance and containment measures
- Stockpiling of antivirals and vaccines
- Increasing health care surge capacity
- Public education and communications
- Sustained human-to-human transmission anywhere in the world will trigger a pandemic response by the U.S.
- At the onset of a pandemic, antiviral drugs from public stockpiles will be distributed to predetermined priority groups.
- At the start of a pandemic, vaccine, will be procured and distributed to state and local health departments for immunization of predetermined priority groups.

Pandemic Influenza

Role of Local Public Health

- Surveillance: early detection, characterize epidemiology, monitor impact
- Distribution of antiviral drug stocks and vaccine
- Provide guidance on clinical management & infection control
- Implement community containment strategies
 - Assure legal preparedness and address overlapping authorities
- Communication to public
- Facilitate healthcare system planning and response
- Psychological and social support to emergency responders

Pandemic Influenza

Surveillance

- **State and local responsibilities:**
 - Enhanced surveillance for detection of the first cases.
 - Surveillance components: virologic, outpatient, hospitalization, and mortality.
 - Weekly data on outpatient visits for ILI, hospitalizations, and deaths
- **National (HHS/CDC) responsibilities:**
 - Issue updated case definitions and guidance for laboratory testing and enhanced surveillance.
 - Assist state and local health departments, as requested.
 - Analyze influenza surveillance data on a regular and timely basis.

Pandemic Influenza

Healthcare System Preparedness

- Develop written healthcare facility plans that address:
 - disease surveillance
 - hospital communications
 - education and training of staff
 - triage, clinical evaluation and surge capacity
 - facility access
 - occupational health
 - use and administration of vaccines and antiviral drugs
 - supply chain and access to critical inventory needs
 - mortuary issues
- Develop regional plans
- Communication between the healthcare and public health sectors
- Legal issues

Pandemic Influenza

Healthcare System Preparedness

- Implement new patient triage, evaluation, admission and clinical management procedures
 - Revise criteria for hospital admission
 - Screen all referrals for admission: no direct admits
 - Limit or cancel elective admissions and surgeries
 - Early discharge of patients: role of home healthcare agencies
 - Standardized evaluation and management protocols
- Use surgical ambulatory care centers for necessary surgeries
Coordinate with outpatient and home health organizations
- Expand ICU and total bed capacity
- Have staffing plans to meet increased demand for services
- Define critical staff for preventive interventions

Pandemic Influenza

Healthcare System Preparedness

- Need a standardized, coordinated and equitable healthcare system response
- Requires uniform understanding (and application) of definitions and “triggers” for:
 - Canceling elective admissions and surgery
 - Early discharge of patients
 - Application of “altered standards of care” in mass casualty event:
Utilization/rationing of critical care resources
 - Antiviral drug and vaccine use
 - Implementation and utilization of community-based surge capacity/facilities

Pandemic Influenza

Healthcare System Preparedness: Healthcare Coalition

- Goals
 - Strengthen the healthcare system's emergency preparedness and response to all hazards
 - Increase medical surge capacity
 - Improve coordination and communication during emergency response
- Objectives
 - Expand the health system's emergency response capacity through regional agreements and plans
 - Coordinate the emergency response of health care organizations through strengthening and/or development of effective communication systems
 - Integrate the health system's response into the larger emergency response
 - Advise public officials on health policy matters during emergencies

Pandemic Influenza Planning

Emergency Management: Maintenance of Critical Services

- Maintain essential services in both the health and non-health sectors
- Impact of widespread absenteeism on human infrastructure responsible for critical community services
- Identify essential services that, if interrupted, would pose a serious threat to public safety or significantly interfere with the ongoing response to the pandemic
- Develop contingency plans to provide back-up of such services and/or replacement personnel

Pandemic Influenza

Communication

- Good communication can guide the public, the media and health care providers in responding appropriately and complying with exposure-control measures
- Provide accurate, consistent and comprehensive information
- Address rumors, inaccuracies and misperceptions promptly
- Need coordination of messages
- Guidance to community members on actions to protect themselves, family members and colleagues
- Contradictions and confusion can undermine public trust and impede control measures

Healthcare System Emergency Preparedness

Pandemic Influenza – Community Containment



Healthcare System Emergency Preparedness

Pandemic Influenza - Legal Authorities

- During a pandemic the Health Officer will evaluate the need for outbreak containment and response measures
- Social distancing: school closures, cancellations of large public gatherings, restrictions on public transportation
- Temporary reorganizing of medical services, potentially including curtailment of medical services -- for example, cancellations of non-urgent elective hospital admissions and/or surgeries -- and redirection of available resources
- Stakeholders need to be involved in developing standards, expectations and policy related to healthcare system response measures

Pandemic Influenza Planning

Potential Community Measures to Decrease Transmission

- Some measures may be most useful early in outbreak and with strains that are not efficiently transmitted
 - Travel advisories/limit travel to affected areas
 - Screening travelers from affected areas
 - Limit large public gatherings; close schools
 - Encourage telecommuting
 - Limit availability of public transportation
 - Quarantine of exposed persons
 - Education to allow early identification and isolation of cases
 - Hand hygiene, respiratory hygiene/cough etiquette
 - Wear masks in public (?)

THANK YOU!