



Pandemic Influenza

Get Informed...Be Prepared

A newsletter for Minnesota organizations preparing for a possible influenza pandemic.

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GAO finds gaps in federal pandemic planning

A 52-page analysis of the US government's pandemic influenza preparedness plan by the Government Accountability Office (GAO), Congress's investigative agency, was released September 10th.

The report calls for continued work on clarifying leadership responsibilities and recommends further testing, training, and exercising. It also acknowledges work done by federal officials to prepare for a pandemic, such as establishing an information clearinghouse, developing various planning checklists, and building the Strategic National Stockpile.

Under the federal plan, the Secretary of Health and Human Services would direct the public health and medical response and the Secretary of Homeland Security, the non-medical response actions. The GAO analysis, however, says the plan fails to define how the two departments should collaborate, especially if faced with multiple outbreaks in various locations over an extended period.

Read the full report at:
<http://www.gao.gov/new.items/d07781.pdf>

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The Call to Care: Faith Communities and Emergency Preparedness—An All Persons Approach Conference Update

On August 16th participants from across Minnesota joined together via Interactive Television (ITV) to discover an inclusive approach to preparing, responding and recovering from emergencies/disasters, including pandemic influenza. The conference emphasized methods for stakeholder communities to work together to assist in establishing inclusive preparedness plans for all citizens.

Approximately 280 people attended at eight sites throughout the state. Attendees primarily represented faith/community organizations, public health agencies, and emergency management, as well as persons concerned with the aging, disability, and minority communities

This event was sponsored by the Minnesota Department of Health, the Minnesota Board on Aging, Minnesota State Council on Disability, Minnesota Division of Homeland Security and Emergency Management, University of Minnesota Institute on Community Integration and the Minnesota Faith Health Consortium.

Keynote speakers were June Isaacson Kailes, a consultant and a disability rights advocate and one of the original national leaders in the Independent Living Movement and Dr. Harold Koenig, co-director of the *Center for Spirituality, Theology and Health* at Duke University Medical Center.

Next steps will include looking at web site development, furthering the concept of rapid assessment teams to investigate the emergency status of people with disabilities and activity limitations, and investigating regional faith community networks.

Questions? Please contact Don Sheldrew at don.sheldrew@health.state.mn.us or 651-201-5738.



WHO releases World Health Report 2007: Warns diseases spreading faster than ever

Infectious diseases are emerging more quickly around the globe, spreading faster and becoming increasingly difficult to treat, the World Health Organization (WHO) reported last month.

More than at any other time in history, global public health security depends on international cooperation and the willingness of all countries to act effectively in tackling new and emerging threats. That is the clear message of this year's World Health Report entitled *A Safer Future: Global Public Health Security in the 21st Century*.

"Infectious diseases are now spreading geographically much faster than at any time in history," the WHO said. Since the 1970s, new threats have been identified at an "unprecedented rate" of one or more every year, meaning that nearly 40 diseases exist today which were unknown just over a generation ago.

With more than 2 billion people traveling by air every year, "an outbreak or epidemic in one part of the world is only a few hours away from becoming an imminent threat somewhere else."

Pandemic influenza is described as the most feared threat to health security in our times. Although the H5N1 bird flu virus has not mutated into a form that passes easily between humans, as many scientists had feared, the next influenza pandemic is "likely to be of an avian variety" and could affect some 1.5 billion people.

"The question of a pandemic of influenza from this virus or another avian influenza virus is still a matter of when, not if," the WHO said.

The report sets out the WHO strategic action plan to respond to a pandemic and reinforces the importance of all countries sharing essential health data, such as virus samples and reports of outbreaks.

View the 2007 WHO report at:
<http://www.who.int/whr/2007/en/index.html>

Redefining Readiness: New community engagement practices and tools for pandemic and all-hazards planning

In September 2004, the Center for the Advancement of Collaborative Strategies in Health at the New York Academy of Medicine released the findings of a groundbreaking project on preparedness planning, in its report *Redefining Readiness: Terrorism Planning through the Eyes of the Public*. The study uncovered a fundamental flaw in emergency preparedness: Planners were developing instructions for people to follow without finding out whether it was actually possible for them to be followed or whether the instructions were even the best protective action for certain groups to take.

The 2004 *Redefining Readiness* study documented this problem in preparations for deadly contagious disease outbreaks and shelter-in-place emergencies. Using findings from that report, the Center has recently worked with residents, schools, businesses, and government agencies in four sites around the country to demonstrate how the important benefits of public engagement in preparedness planning can be achieved. The sites ranged from a very rural area to a big city and involved almost 2,000 diverse community members.

The insights generated from small group discussions at the four sites provided the basis for new tools that have just been released that will enable households, work places, schools and early childhood/youth programs, and governments to prepare to respond more effectively to emergencies that might require social distancing or sheltering-in-place. Communities can also use the *Redefining Readiness* small group process to explore what residents would face in the kinds of emergencies most likely to occur in their locality. The tools were just released September 13th during National Preparedness Month.

Read the press release about this project at:
http://www.eurekaalert.org/pub_releases/2007-09/nyao-are091307.php

View the new tools on the *Redefining Readiness* web site at:
<http://www.redefiningreadiness.net/index.html>

Pandemic Influenza Update: Ethics

The Minnesota Pandemic Ethics Project continues to move forward with just a slight adjustment to the time line. We can now expect the final report from the project team (Minnesota Center for Health Care Ethics and the University of Minnesota Center for Bioethics) by February 1st, 2008.

The Resource Allocation Panel continues to meet on a monthly basis along with the six work groups. The following is a short update on what the panel and various work groups are focusing on:

Resource Allocation Panel

The panel is a diverse group of about 45 Minnesotans representing expertise and experience from the following areas: ethics, faith communities, health systems, clinicians, public health, special needs populations, community advocates, communication and public engagement, public safety, law, and business. The panel's charge is to recommend an ethical framework(s) to the Minnesota Department of Health for rationing scarce health-related resources during a severe influenza pandemic. The framework(s) is expected to comprise ethical principles, goals and strategies. The framework(s) will be accompanied by sample plan(s) and the protocol committee's recommendations for implementation. An example of such a framework can be found in a recently published report in the journal *Vaccine*, "Allocating Pandemic Influenza Vaccines in Minnesota: Recommendations of the Pandemic Influenza Ethics Work Group," available at <http://dx.doi.org/10.1016/j.vaccine.2007.05.057>

Resource-Specific Work Groups

Each of the four resource-specific work groups has approximately 15 members, with some overlap in membership on the panel. The charge for each is to develop recommendations to the panel about how Minnesota should allocate a particular type of health-related resource during a severe pandemic. MDH staff and/or other experts have been assigned to each group to provide logistical support and expert consultation as needed.

- Ventilator Work Group
- N95s and Masks Work Group
- Antivirals Work Group
- Vaccine Work Group

Ethics Work Group

This group is focusing in depth on the conceptual and ethical issues of the project and will develop recommendations based on general agreement to submit to the panel.

Protocol Committee

This group will advise about major operational opportunities and impediments and suggest solutions. Ultimately, they will develop protocols to implement the panel's recommendations regarding specific resources.

You will find further updates on this project in upcoming issues of this newsletter. For questions, please contact Denise Dunn at denise.dunn@health.state.mn.us or 651-201-5560.

New publications about pandemic ethics and allocation strategies are frequently produced. Here are links to two of the newest reports:

Prioritization strategies for pandemic influenza in 27 countries of the European Union and the Global Health Security Action Group: a review
<http://www.biomedcentral.com/content/pdf/1471-2458-7-236.pdf>

Ethical dilemmas in a pandemic: proceedings of the Irish Council for Bioethics Conference, October 17th, 2006, Dublin
<http://www.bioethics.ie/pdfs/PandemicProceedings.pdf>

Education and Training

2nd Annual "End-to-End Preparedness for Pandemic Influenza Conference"

Washington, DC, Oct. 29-31, 2007

- End to End Preparedness for Pandemic Influenza for Public-Private Collaboration
- Supply Chain Readiness for Pandemic Influenza Response

Join industry and government representatives as they search for ways to effectively extend the preparedness enterprise to include new types of partnerships.
<http://www.infocastinc.com/pand06.html>
<http://www.apha.org/programs/pubhealthcalendar/infocastflu1029.htm>

Exercises

Working together – Minnesota planning for an influenza pandemic

Although public health influenza pandemic planning efforts began years ago, 2007 found new challenges for the Minnesota Department of Health (MDH) specifically around the logistics of providing antiviral medications to treatment facilities in Minnesota. A Strategic National Stockpile (SNS) Pandemic Influenza Antiviral Distribution Workshop held earlier this year identified the need for state organizations and agencies to work together and develop formal written plans to support Minnesota's distribution of antiviral medications.

In late July, 20 federal, state, and local agencies participated in a tabletop exercise designed to test the state's response to manage and distribute SNS resources in the event of an influenza pandemic. Key objectives were to increase understanding of the responsibilities for all participating agencies, identify gaps in coordination between agencies, and promote continued planning and refinement of current response plans.

The hypothetical scenario for the exercise was an outbreak beginning in Southeast Asia, with the first human case in the U.S. seen in Seattle, WA. Exercise participants were presented with difficult decisions:

- how to activate and deploy state-level operations
- how to provide multi-agency tactical support to manage security and transportation of SNS resources.

Michelle Larson, Minnesota Strategic National Stockpile State Coordinator, believes, "This event was important to help us clarify the responsibilities and expectations of all agencies and organizations that will be critical in an influenza pandemic response. The exercise will improve federal, state, and local partnerships so we will all be better prepared to face emergencies that may arise, such as a pandemic, *together*".

Minnesota has the essential building blocks in place to protect the public from this and other threats. The lessons learned from the tabletop exercise will be used to strengthen public health emergency preparedness and response collaboration between all levels of government to lessen the impact of a pandemic.

For questions, please contact Michelle Larson at michelle.larson@health.state.mn.us or 651-201-5713.

Pandemic Flu Digest

Resources of interest

- HHS announces \$75 Million in supplemental funding for pandemic influenza
<http://www.hhs.gov/news/press/2007pres/08/pr20070830a.html>
- Planning for a possible influenza pandemic: a framework for planners preparing to manage deaths. August 30th report from the UK's Home Office
http://www.ukresilience.info/news/manage_deaths_guidance.aspx
- Homeland Security releases National Response Framework for public comment
http://www.dhs.gov/xnews/releases/pr_1189450382144.shtm
- CDC's Public Health Information Rapid Exchange (PHIRE) sends important real-time health information to subscribers based on their preferences
<http://www.cdc.gov/phire/>

The Last Word...

Can video games help us fight a global pandemic?

The simulated outbreak of a virtual infectious disease named "corrupted blood" (in the online game, *World of Warcraft*) indicates that specialists trying to predict what the next pandemic will look like might want to make use of a real-world laboratory -- the culture of online gamers. Or at least that's what Nina Fefferman, a medical epidemiologist at Princeton University, thinks.

"With very large numbers of players (currently 6.5 million for *World of Warcraft*), these games provide a population where controlled outbreak simulations may be done seamlessly within the player experience," Fefferman wrote. She is now working with Blizzard Entertainment, Inc. to model disease outbreaks in other popular games.

Read more about this curious idea at:
<http://209.190.25.146/viewNews.php?id=925>

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