



## Public Health Preparedness Novel Influenza A (H1N1) Fall 2009

Webcast for Businesses  
October 8, 2009  
Rebroadcast on October 21 & 27, 2009


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### Housekeeping

- ▶ Frequently asked questions for the workplace are posted to the IDPH and Safeguard Iowa Partnership websites
- ▶ IDPH Website: <http://www.idph.state.ia.us/h1n1/>
- ▶ Safeguard Iowa Partnership Website: [www.safeguardiowa.org](http://www.safeguardiowa.org)






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### Safeguard Iowa Partnership Who we are

- ▶ Created in 2007 by the Iowa Business Council along with the Iowa Department of Public Health, Department of Public Safety and Iowa Homeland Security and Emergency Management
- ▶ Strengthen the capacity of the state to prevent, prepare for, respond to, and recover from disasters through public-private collaboration
- ▶ Over 160 public and private partners
  - ▶ City, county, state and federal partners
  - ▶ Small, medium and large for-profit and not-for-profits






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### Safeguard Iowa Partnership Three-year Vision Strategies

- ▶ Expand business resource registry to meet community needs.
- ▶ Develop communication network.
- ▶ Develop educational workshops focused on facilitating business continuity and leveraging community resources.
- ▶ Engage in state and local exercises.
- ▶ Expand funding to facilitate growth and value to Iowa businesses and communities.




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### Safeguard Iowa Partnership Become a Partner

- ▶ Benefits include:
  - ▶ Information
    - ▶ Situation reports
  - ▶ Coordination
    - ▶ Emergency Operations Center liaison
    - ▶ Business resource registry
    - ▶ Participation in educational workshops and exercises
  - ▶ Collaboration
    - ▶ Build trust and relationships
    - ▶ Strengthens resiliency - maintain economic viability
- ▶ To learn more about the Partnership or to apply online go to [www.safeguardiowa.org](http://www.safeguardiowa.org).




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### National Framework for 2009 Novel Influenza A (H1N1) Preparedness and Response

- ▶ **Surveillance** – enhanced efforts to achieve timely and accurate situational awareness of evolving disease in Iowa to mold policy and operational decisions **CADE**
- ▶ **Mitigation Measures** – interventions to slow the spread of the virus and reduce the impact of illness on the population **CDOR**
- ▶ **Vaccination** – actions to secure safe and effective vaccines and ready a distribution, administration and tracking mechanism for immunization **IMM/TB**
- ▶ **Communication and Education** – communication campaign to ensure consistent messaging and education **CAP**




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## Current Characteristics of Novel Influenza A (H1N1)

- ▶ Causing more mild illness than seasonal influenza
  - Like other novel viruses has the potential to become more severe over time
- ▶ Not as transmissible as seasonal influenza
  - Like other novel viruses has the potential to become better at spreading over time
- ▶ Currently susceptible to oseltamivir (Tamiflu®)
  - Some reported cases of Tamiflu® resistance
- ▶ Most common complication is viral pneumonia



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## Why Is Preparedness for the re-emergence of Novel Influenza A (H1N1) Important?

- ▶ Currently causing global disruption
  - May get worse
- ▶ Potential of virus to mutate or re-assort
- ▶ May begin to:
  - Spread easier from person-to-person
  - Infect non-human species
- ▶ May continue to cause waves of infection



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## Signs and Symptoms of Novel Influenza A (H1N1)

- ▶ Same signs & symptoms as seasonal influenza:
  - Fever, cough, sore throat, body aches, chills
  - May include diarrhea and vomiting
- ▶ Most hospitalizations are occurring in persons 5-24 years old followed by 25-49 year olds
- ▶ 43% of deaths have occurred in persons 25-49 years of age



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## Planning Assumptions

- ▶ Severity of illness will remain consistent
- ▶ Affected risk groups will not change
- ▶ Current stockpiles of antiviral medications will remain effective for targeted individuals
- ▶ Vaccines to help protect against the virus will be produced and distributed in a timely manner
- ▶ Vaccines will be safe and effective



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## IDPH Roles and Responsibilities

- ▶ Implemented internal Incident Management System
  - manage information flow
  - vaccine distribution
- ▶ Increased surveillance
  - enhanced existing seasonal influenza surveillance network
- ▶ Antiviral & vaccine
  - Coordinating distribution with federal, state, and local partners
  - Increased storage & distribution capacity
    - from 4000 sq foot to 8000 sq foot
    - Controlled environment for pharmaceuticals
  - Received in excess of 14 tons of supplies during spring response



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## IDPH Roles and Responsibilities

- ▶ Coordination & information sharing with multiple federal, state, and local partners – a few include...
  - Regular briefings with the Governor and Lt. Governor
  - Government & private business (Safeguard Iowa Partnership)
  - Department of Inspections and Appeals
  - Department of Human Services
  - Department of Education
- ▶ Posting and updating of information on IDPH website
- ▶ Messaging for healthcare workers
- ▶ Messaging and education campaign for public



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**Surveillance**  
Center for Acute Disease Epidemiology  
(CADE)

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**Iowa Influenza Surveillance Network**

- ▶ Both seasonal influenza & novel influenza A (H1N1)
- ▶ Determine types and strains of influenza
  - Comparison of different strains
  - Assess severity of strains
- ▶ Affected geographic locations and age groups

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**Iowa Influenza Surveillance Network**

- ▶ Sentinel Physician Surveillance
  - Outpatient surveillance
- ▶ Sentinel School Surveillance
  - Percent of absence attributed to illness
  - 150+ schools
- ▶ Sentinel Hospital Surveillance
  - 31 hospitals participating
- ▶ Sentinel Long Term Care Surveillance
  - Will report when greater than 10% of residents exhibits signs & symptoms of flu

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## Disease Reporting

- ▶ No longer reporting individual cases of novel influenza A (H1N1)
- ▶ Novel influenza A (H1N1) - related deaths and hospitalizations temporarily reportable
- ▶ Weekly surveillance report published on Fridays and posted to department website
  - Statewide and regional trends and activity



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## Priority Groups

### Initial Target Groups:

- ▶ pregnant women,
- ▶ persons who live with or provide care for infants aged <6 months
  - (e.g., parents, siblings, and daycare providers),
- ▶ health care and emergency medical services personnel,
- ▶ persons aged 6 months--24 years, and
- ▶ persons aged 25--64 years who have medical conditions that put them at higher risk for influenza-related complications



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## Priority Groups

### Subset of Target Groups during Limited Vaccine Availability:

- ▶ pregnant women,
- ▶ persons who live with or provide care for infants aged <6 months
  - (e.g., parents, siblings, and daycare providers),
- ▶ health-care and emergency medical services personnel who have direct contact with patients or infectious material,
- ▶ children aged 6 months--4 years, and
- ▶ children and adolescents aged 5--18 years who have medical conditions that put them at higher risk for influenza-related complications.



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## Mitigation Measures

Center for Disaster Operations and Response  
(CDOR)




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## Mitigation Guidance

- ▶ IDPH & multiple partners reviewed, revised, & developed guidance for:
  - General public
  - Childcare
  - Schools
    - K - 12
    - Post secondary
  - Business
- ▶ All guidance materials are posted on the IDPH webpage

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## Protective Measures

- ▶ Education of public
- ▶ Hand washing
- ▶ Sneeze & cough etiquette
- ▶ Staying at home if ill
- ▶ Handling employees who become ill at work
- ▶ Cleaning of facilities

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## State Stockpile

- ▶ Current inventory
  - Antiviral medications
  - Personal Protective Equipment
    - Face mask
    - Respirators
    - Face shields
    - Gloves
    - Gowns
- ▶ Receipt of additional federal supplies



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## Allocation and Distribution of Assets

- ▶ Assets used within established guidelines
- ▶ Pro rata by county
- ▶ Delivery to single site
- ▶ LPHA will be primary POC
- ▶ Inventory of assets prior to delivery
- ▶ Standing orders as necessary



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## Vaccination

Bureau of Immunization and Tuberculosis  
(IMM/TB)



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## Vaccine

- ▶ Vaccine made using same processes and facilities licensed for seasonal influenza vaccines
- ▶ 5 manufactures producing vaccine
  - FDA has approved four vaccines, approval is pending on one
- ▶ Iowa has begun placing orders for vaccine
- ▶ Local public health agencies direct distribution of vaccine within their jurisdictions
- ▶ Anticipate enough vaccine for the initial target group
- ▶ Vaccine will not be commercially available this year




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## Current Vaccine Information

- ▶ Will be available in:
  - Multi-dose 5 ml vials
  - Pre-filled syringe
  - Intra-nasal (live vaccine - nasal mist)
- ▶ Will require a 2 dose series for children 9 years and younger:
  - 1<sup>st</sup> dose will not provide adequate protection
  - 2<sup>nd</sup> dose at least 21 days after 1<sup>st</sup> dose
  - 2<sup>nd</sup> dose does not have to be from the same manufacture or lot number as the 1<sup>st</sup> dose




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## Vaccine Timing

- ▶ Injectable 2009 H1N1 vaccine (inactivated) can be given with any other vaccine
- ▶ Nasal mist type 2009 H1N1 vaccine can be given with any other live or inactivated vaccine EXCEPT seasonal nasal mist type influenza vaccine.




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# Communication and Education

Bureau of Communication and Planning  
(CAP)

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## Public Education & Messages

- ▶ Three C's Campaign
  - Clean – Clean your hands
  - Cover – Cover your coughs and sneezes
  - Confine – Confine yourself to your home when ill
- ▶ Postcards, emails, & billboards
- ▶ Public service announcements & sound bites
- ▶ Weekly press release templates for local public health departments

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Iowa Governor Chet Cuber  
Iowa Lt. Governor Patty Judge




# Fight the Flu!


Remember the 3 Cs





**Cover your cough.**  
Use a tissue or your elbow.



**Clean your hands.**  
Use soap and water or hand sanitizer.



**Contain germs.**  
Stay home when sick.


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# Recommendations for Businesses



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## Review / Develop Pandemic Plan

- ▶ Understand normal absenteeism rates
  - So you will recognize unusual increases
- ▶ Review sick leave policies
  - Allow sick workers to stay home when ill
- ▶ Explore flexible worksite options
  - IT infrastructure
  - Can employees caring for sick children work from home



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## Review / Develop a Pandemic Plan

- ▶ Continuity of Operations
  - What are your essential functions?
  - Are there critical elements in the supply chain required to maintain operations?
- ▶ Process to communicate with employees
- ▶ Review your plan with / train employees



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### Sick Employee Exclusion Recommendations

- ▶ People with flu symptoms should stay home until 24 hours after fever resolves
  - Without the use of fever-reducing medications
  - Illnesses lasting 3-5 days in adults and up to 7-10 days in children




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### Employees that Get Sick at Work

- ▶ Any employees that get sick at work should be asked to go home
  - If the employee can not leave immediately, they should stay at least 3-6 feet away from other workers (in a separate room if possible)




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### Emphasize Cough, Sneeze, and Hand Hygiene

- ▶ Post signs / messages
- ▶ Provide tissues
- ▶ Hand washing facilities
  - Soap and water preferred
- ▶ Antimicrobial hand gels




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# Cleaning

- ▶ Normal cleaning procedures
- ▶ Most cleaning products effective
  - Soap and hot water
  - Common disinfectants like bleach and ammonia
  - If questions, check the EPA list
  - Follow manufacturer's recommendations
- ▶ Focus on frequently touched surfaces
  - Door handles, phones, key boards, hand rails




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# Templates Available

- ▶ Email
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- ▶ Fact Sheets




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