Health System Response to Pandemic Influenza: A Clinician's Perspective

Mary M. Klote, MD
Walter Reed Army Medical Center
Disclosures

• Financial: None

• The views expressed in this presentation are those of the author and do not reflect the official policy of the Department of the Army, Department of Defense, or US Government.
WHO 2005 Plan

• Revised from 1999
  – Redefined the phases to more clearly aid in coordination of containment of the disease
  – Potentially allow for increased lead time for vaccine development
WHO Phases

Interpandemic Period
• Phase 1 - Animal infection - low risk to humans
• Phase 2 - Animal infection - risk to humans

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Pandemic Alert Period
• Phase 3 - Close contact human transmission
• Phase 4 - Increased transmission
• Phase 5 - Virus adapting and spreading

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Pandemic Period
• Phase 6 - Generalized transmission
Phase Subcategories

- Planning and Coordination (PC)
- Situation Monitoring and Assessment (MA)
- Prevention and Containment (PreCon)
- Health System Response (HSR)
Phase 1 WHO Goal

To promote contingency planning by health-care systems for response to an influenza pandemic.

WHO/CDS/CSR/GIP/2005.5
Who to Vaccinate

• Tiered vaccine structure?
  – 1st responders
    • Their families?
  – Healthcare workers
  – Other Hospital/clinic employees
  – City/County Service Workers
    • Waste removal
    • Electrical
    • Water
Contingencies to Consider

• Delivery of Quality Immunizations:
  – Immunization techniques
  – Record keeping
  – Adverse event tracking
  – Legal Regulations
Contingencies to Consider

• **Delivery Teams:**
  - Right combination of skills
    • Administrative
    • Technical
  - Right place
  - Right time
  - Right equipment
Contingencies to Consider

• Method of Delivery:
  – “Push Out”
    • Send teams to communities
      – Security
      – Vaccine storage
  – “Pull In”
    • Centralized locations
      – Security
      – Staffing
      – Transport of vaccinees
Contingencies to Consider

• Hospital Manning
  – Who will come to work?
  – How much of your staff works at another hospital part-time?
  – Will you allow anyone to go home?
  – Where will you house them?
  – How will you feed them?
Contingencies to Consider

• Surge capacity
  – How many patients can your hospital hold?
  – How many ventilators?
    • Are you prepared for family members to “bag” patients?
  – How many in your morgue?
  – Scrubs?
  – Linen?
  – Cleaning supplies?
  – Regulated Medical Waste Bags?
    • Sharps containers?
Contingencies to Consider

• Security
  – Access to Hospital
    • Staff
    • Patients
    • Visitors
  – “Quarantine” Wards
  – Triage outside of hospital
Managing the Unexpected

- Adverse Events
  - Swine Flu experience
  - Myopericarditis with Smallpox Vaccine
Questions?