Oklahoma Pandemic Influenza Management Plan

Public Health Fact Sheet

What is the Oklahoma Pandemic Influenza Management Plan?

An influenza pandemic is a naturally occurring event in which a new flu virus emerges and affects a large number of people in several countries simultaneously. Historically, an average of three influenza pandemics occur each century. In June 2009, the World Health Organization made a pandemic declaration following the appearance and rapid global spread of a new swine-origin H1N1 strain of influenza A virus. Prior to this was the "Hong Kong flu" pandemic occurring in 1968-69. During a pandemic a larger number of people become ill than occurs during a typical flu season, because most persons have no natural immunity to the newly circulating influenza virus and there is often a delay before a vaccine can be produced. Consequently, existing health resources may be strained. Beginning in 2005, the Oklahoma State Department of Health's Pandemic Influenza Committee developed a management plan to address the public health response to a pandemic influenza event. There have been three revisions to the State Plan and the 2009 revision will soon be published. It is intended to be a resource document for public health preparedness at the state, regional and local level to help maximize and distribute our available resources and lessen the impact of a pandemic event.

What are the purpose and the goals of the plan?

The overall goals of the Oklahoma Pandemic Influenza Management Plan are to:

- reduce morbidity and mortality among Oklahomans during a serious influenza season;
- minimize infrastructure disruption and subsequent economic impact caused by an influenza pandemic;
- assist and facilitate preparedness in the health care systems within our state;
- provide a comprehensive and dynamic plan that will be reviewed and updated on an annual basis; and
- assist and facilitate appropriate planning and response at the local, regional and state level.

What specifically does the Oklahoma Pandemic Influenza Management Plan address?

The plan addresses several key areas of preparedness planning and response coordination among multiple agencies. The essential components of the plan are described in ten chapters which are: 1) command, control and management; 2) surveillance and laboratory diagnostics; 3) delivery of vaccine; 4) acquisition and delivery of antiviral medications; 5) health systems and emergency response; 6) community disease control and interventions; 7) infection control in a variety of settings; 8) clinical guidelines; 9) risk communication; and 10) workforce support.

What is addressed in the component of command and management?

An influenza pandemic will require strong and decisive leadership by knowledgeable public health practitioners. The Oklahoma State Department of Health will lead the state response to an influenza pandemic and coordinate public health activities with other state, local and federal agencies.

What is addressed in the component of surveillance and laboratory diagnostics?

Rapid response to a pandemic will require early detection of the pandemic flu virus strain as well as an understanding of its disease distribution within the population. The Oklahoma State Department of Health's Acute Disease Service is responsible for conducting influenza surveillance and monitoring the occurrence of influenza by affected age groups, geographic locations, and severity of illness. They work with physicians and hospitals to monitor the proportion of patient visits for influenza-like illness among a sample of clinical sites and the Public Health Laboratory provides diagnostic testing for influenza viruses and other respiratory viruses of significance. OSDH epidemiologists develop and distribute regular reports of influenza activity within the state and assist with the implementation of strategies to control the spread of influenza.

What is addressed in the components of delivery of vaccine and delivery of antiviral medications?

During an influenza pandemic — particularly early in the pandemic and during the peak activity — there will likely be more demand for vaccine and medications than is available. These components outline the strategies of how and to whom the vaccines and antiviral medications will be delivered through Mass Immunization Prophylaxis Strategy (MIPS) sites and other delivery mechanisms. Vaccine availability will be limited due to the time required to produce vaccine, therefore distribution categories will be outlined to ensure incremental distribution to protect persons most at risk and to maintain critical infrastructure.

What is addressed in the component of health systems and emergency response?
A pandemic influenza event most likely will severely strain our health care systems. It is essential that each county and region develop a local pandemic influenza management plan congruent to the state plan that includes strategies for patient triage, respiratory infection control, and selection of potential alternate medical care facilities.

What is addressed in the component of community disease control and prevention?
Especially during the early stages of an influenza pandemic when a vaccine is not available or vaccine quantities are insufficient to meet demand, non-medical strategies such as voluntary isolation when ill, travel restrictions, school closures, and other methods of "social distancing" will likely be needed to contain the spread of the disease. This chapter describes these containment measures and discusses their application at the individual and community level.

What is addressed in the component of infection control?
This section of the plan is directly adapted from the National Pandemic Influenza Plan, Supplement 4 S-1 and provides guidance to health care workers on the use of infection control measures to prevent transmission of influenza during patient care.

What is addressed in the component of clinical guidelines?
Health care providers will play an essential role in the recognition of patients with pandemic influenza, treating patients with medical complications associated with influenza, and preventing outbreaks of illness within healthcare settings. If implemented early, identification and isolation of cases may help slow the spread of influenza within a community or region. Clinica awareness of novel disease can also benefit the individual patient, as rapid diagnosis and initiation of treatment may avert potentially severe complications. This component is adapted from the National Pandemic Influenza Plan, Supplement 5 S-1 and provides instructions on the clinical procedures for the initial screening, assessment, and management of patients with suspected novel or pandemic influenza.

What is addressed in the risk communication component?
The primary objective of this component is to provide timely and accurate communication to keep the public, health care providers and government leaders informed during a pandemic influenza event. To successfully cope with a pandemic, the public may expect to receive public health messages concerning travel advisories, respiratory hygiene practices, and schedule for vaccine administration. It is essential for the public to receive, understand and follow these messages.

What is addressed in the workforce support component?
During any emergency response event, a well trained workforce is critical to the success of the response. Unlike response to most natural disasters such as tornadoes, ice storms, and floods, an influenza pandemic is a very prolonged event lasting weeks to months. Attention needs to be directed to ensure that the personal, emotional, and physical health needs of public health, medical, and essential service workers are addressed and managed.