

Bi-State Pandemic Influenza Planning and Response Seminar

Isle of Capri Convention Center, Bettendorf, IA

Monday, November 27, 2006

12:30pm-4:30pm

The Bi-State Pandemic Influenza Planning and Response Seminar began with a welcome and introduction from the Scott County Health Department's Director, Larry Barker. He explained the purpose of the seminar and expressed appreciation for all of the participants in attendance. Next, a presentation by Dr. Louis Katz, Medical Director for the Scott County Health Department, was given on "Pandemic Influenza 101". A second presentation was given by Dr. William Candler, Medical Consultant for the Rock Island County Health Department, on "Pandemic Influenza in the Workplace", and lastly, Chief Gerry Voelliger gave a presentation on "National Incident Management System (NIMS) and Emergency Operations Centers (EOCs) in a Pandemic". All presentations are currently available on the Scott County Health Department website http://www.scottcountyiowa.com/health/preparedness_seminar.php.

Shortly following the presentations, the larger group broke off into smaller break-out sessions, with a facilitator, to discuss current and future planning efforts. The attendees were grouped accordingly: Business, Education, Faith Based/Non Profit, Government, Health Care and Law Enforcement. The summary points from the different breakout sessions are attached.

Following the break-out sessions, the larger group reconvened and presentations were given by the facilitators of each session. It was stated that all presentations from the seminar would be posted on both Scott County Health Department's and Rock Island County Health Department's websites: www.scottcountyiowa.com/health and www.rockislandcounty.org. In addition, Carol Schnyder, Deputy Director for the Scott County Health Department, and Wendy Trute, Public Health Administrator for Rock Island County Health Department, provided a wrap up of the half day planning and response seminar, and shared additional resource information.

Lastly, seminar evaluations were completed by each attendee, and these results are attached. They exhibit the issues for discussion and/or clarification from the different groups that met. We have found that overwhelmingly, all groups are ready to move forward with planning efforts, and are willing to meet again in the smaller group setting. The Bi-State Pandemic Influenza Planning Committee will meet after the first of the year to discuss dates and time to hold future smaller group planning sessions.

Summary Points from Breakout Sessions:

I. Business

(Facilitator—Theresa Foes, Assistant Administrator/Director of Health Promotion, Rock Island County Health Department)

How would you address continuity of operations if 35% of your workforce were absent for a few days/weeks/months plus? What positions are mandatory for minimum function, safety, security, and authorizing ability? What would you do if supplies were not being delivered to you?

The group suggested that instead of bodies working at the office during the time of crisis, that they should have access to their work systems from home, so that they can do the work no matter what their situation is. An individual stated that it might be the purchase of new IT equipment for the business/organization that would allow for virtual/video conferencing to occur if in fact a home office is to be constructed for employees from home.

In regards to supplies, the group felt that these should be ordered ahead of time and that storage should be made available for these extra supplies. The level of risk that's involved for that type of county, community or organization should also be taken into consideration when placing supply orders. Otherwise, the group explained that they would work with local and outside businesses to get the supplies needed (i.e. gas stations/mail orders).

What three things can you do now to prepare for a pandemic event?

Education to employees should include self-care for influenza, social distancing, and all employee information should be updated in the form of a phone tree or directory.

Do adjustments need to be made to current policies on pay, sick time, vacation, supervision?

The group stated that policies should be in place, including an updated Family Medical Leave Act with modifications for “pandemic” events. Moreover, these policies and procedures should have risk levels in place, and possibly a secondary plan in time of crisis. Communication is also an important piece to making sure the staff is aware that business/organization cares for them and their safety.

Other Discussion

The group explained that they felt table top exercises should be practiced at the business/organization in order for the employees to be fully aware of the risk that exists. In addition, individuals felt that getting the right message out to the media was very important in order to educate the public correctly.

II. Education

(Facilitator—Nita Ludwig, Emergency Communications Coordinator, Rock Island County Health Department)

How would you address continuity of operations if 35% of your workforce were absent for a few days/weeks/months plus? What positions are mandatory for minimum function, safety, security, and authorizing ability? What would you do if supplies were not being delivered to you?

The group concluded that consistent policies at the local, regional and state level need to be determined and put into place as to when schools should close. Mandatory positions were not discussed in detail because individuals stated that this is different for when the school is open as opposed to closed. Alternative suppliers should be identified, and distribution should be minimized to only necessary items.

What three things can you do now to prepare for a pandemic event?

Plans need to be made and put in place for the employees/staff to retrieve and follow. In addition, the employees/staff need to be educated on those plans, as well as the plans need to be consistent across all schools, health departments and CDC. Moreover, a parent/student notification system should be in place at each school.

What are the long-term implications of mass closures or absenteeism?

Funding was mentioned by the group, as well as colleges/business interruptions in regards to insurance coverage.

III. Faith Based/Non Profit

(Facilitator—Sara Strell, Public Health Planner, Region 6)

The Faith Based/Non Profit group was not able to follow the breakout session questions very closely due to the presence of two local

speakers on disaster planning. The group spoke more of available resources and how to coordinate these resources on a local level.

A presentation was given by Gary Shivers from the local Red Cross chapter. Gary spoke of the importance of “Disaster Supply Kits” that should be in every home or business...stating that it could be up to 72 hours before help is available. The Disaster Supply Kit should include: water (3 gallons per person per day—1 for hygiene, 1 for drinking & 1 for cooking), medicine, food, blankets, radio, clothes (2 or 3 changes), communications plan/media plan and First Aid Kit. Gary stated that more information regarding disaster preparedness can be obtained from the Red Cross in the form of “Together We Prepare”. This is a training seminar offered by the local Red Cross for any business or organization, and can train parishioners or managers on how to be shelter managers. The Red Cross also offers a train the trainer session if that is more beneficial for the institution. Seminars are offered in both English and Spanish...contact the Red Cross at 743-2166 for more information or visit www.redcross.org .

A second presentation was given by Mike Taylor from Grace Lutheran Church. Mike explained that he’s organized a disaster planning committee at his congregation and that they had identified 23 potential disasters that they could make plans for at the church, community, state, national and international level. He stated that the group took a macro view to develop the framework for their plans and details. Mike’s group took the following steps: brainstorming session, complete walkthrough of building and grounds, began interface with property committee, collected data on talent pool from church, and checked all smoke/fire alarms/extinguishes on the premises. Mike’s committee’s goal is to pull other churches into their planning process, so that services during such a disaster would not be duplicated. He explained that the group is identifying essential functions for what would need to be done in the time of crisis, but that they could not plan for everything. By surveying your talent pool, Mike stated that doctors, nurses, counselors, etc. could be identified for future use. He explained that emergency plans build off each other and can be used for different situations, and that a parish directory or company phone tree is very important. In this specific document, notations could be made as to individual’s talents/specialty by their names and phone numbers. Mike invited all denominations to come to any of his parish disaster planning meetings and Kim Overstreet did the same for the VOAD group, to allow for better coordination across the bi-state region. Mike Taylor can be reached at mtaylor41@hotmail.com if anyone should have further questions. Moreover, “social distancing” was discussed in the fact that Sunday services may need to be postponed,

but that spiritual needs for individuals still need to be met in some form by the congregation.

Kim Overstreet from United Way and Infolink went on to further explain that there is a group already established to keep a database of volunteers and volunteer organization that could help in time of disaster. She stated that the group is called “VOAD—Volunteer Organizations Active in Disaster”. VOAD compiles resources such as professional staff, space to warehouse supplies, citizens or debris, etc. Kim stated that if there is any church or non profit organization that could either lend their physical location in time of need, or extend a list of volunteers, they could do so by contacting her directly at 355-9900 or koverstreet@unitedwayqc.org.

IV. Government

(Facilitator—Mark Hunt, Senior Planner, Bi-State Regional Commission)

How would you address continuity of operations if 35% of your workforce were absent for a few days/weeks/months plus? What positions are mandatory for minimum function, safety, security, and authorizing ability? What would you do if supplies were not being delivered to you? How will local governments provide critical services should a pandemic event cause severe worker shortages? (i.e. police, fire, water, sewer, utilities, garbage)

The Government group stated that it would be important to cross-train as much as possible, and also to identify the most important people in the organization and most necessary jobs in order to keep the institution afloat. Persons from non-critical jobs, such as parks and recreation, might be able to perform more urgent public works tasks. In addition, office staff from various departments may be able to fill in critical administrative positions, such as payroll if properly cross-trained.

The group explained that they would try to share resources with other cities/governments. Mutual aid agreements currently exist between police and fire jurisdictions, as well as with private companies to provide service upon request. However, if the entire area is under distress, then these companies and jurisdictions will obviously be dealing with staff shortages as well. Volunteers and Non Profits may be able to provide some of these needed services.

Both Iowa and Illinois mayors have the legal authority to declare a state of emergency, thus reducing the obligation on the city to provide some services. Illinois has the ability to relax licensure laws during certain emergencies. Moreover, plans exist for emergencies and they

are updated regularly. These plans can be adapted to pandemic flu response as well.

What three things can you do now to prepare for a pandemic event?

The group stated that you can begin by including pandemic flu in all disaster plans moving forward, promote family emergency plans, educate the public on the realities of a pandemic, continue to identify and maintain bi-state partnerships, determine how people will get information during a pandemic, and encourage businesses to develop plans to share with the government. It was further suggested that pandemic flu be discussed at local EMS, police and fire meetings.

V. Health

(Facilitator—Ike Sederstrom, Deputy Fire Chief, Moline)

How would you address continuity of operations if 35% of your workforce were absent for a few days/weeks/months plus? What positions are mandatory for minimum function, safety, security, and authorizing ability? What would you do if supplies were not being delivered to you?

The group explained that they would expand the workforce by recruiting retired doctors and nurses, as well as current medical or nursing students, to fill in for a lack of employees. As long as these retired medical professionals have had a license and are in good standing, they can be called upon to help (Public Act 094-0733 Illinois). Retired nurses can be contacted through the Board of Nurses. In turn, vacation days would not be allowed, but postponed, and daily events and non-emergency meetings would be cancelled. The positions that would be mandatory would be those of the medical field...doctors, nurses, medical techs, etc. In addition, security should always be present in time of crisis.

If supplies were not available, the group stated that it would try to borrow from other local agencies or other county's health facilities.

What three things can you do now to prepare for a pandemic event?

The group stated that it would work with the media and PIOs in their field to educate the public and to make sure that the correct message was getting out. They explained that it's also important to tell the public that they need to be prepared, and the group stated that attending some community meetings of various departments would be a good faith effort on their part.

VI. Law Enforcement

(Facilitator—Lieutenant Robert Atherton, Illinois State Police)

How would you address continuity of operations if 35% of your workforce were absent for a few days/weeks/months plus? What positions are mandatory for minimum function, safety, security, and authorizing ability? What would you do if supplies were not being delivered to you? How will local governments provide critical services should a pandemic event cause severe worker shortages? (i.e. police, fire, water, sewer, utilities, garbage)

The Davenport Police explained that they already have a plan for this in place in regards to putting their employees on 12 hour shifts, and dividing their employees equally to continue as many core functions as possible. A level 1 or level 4 lockdown may be enacted at the correctional facility if a shortage of employees exists. The state police went on to say that they would conduct a battalion call out for wide spread disaster. In addition, law enforcement would limit the calls coming into the station by prioritizing and triaging phone calls. A script for non-emergency calls would be in place, and auxiliary manpower may be dispatched to cover administrative/clerical positions. Moreover, the National Guard Reserve can be called upon for extra security and safety measures when other individuals in that field are not present.

Supplies seemed to follow the supply and demand practice with law enforcement officials. They explained that they should begin communications with local suppliers to receive minimal supplies for operations.

What three things can you do now to prepare for a pandemic event?

The group stated that they need to begin making more detailed plans now. They think that a better mechanism might be to perform command post exercises, look at local supplies, besides the minimal supplies kept in house, and begin looking at seizure capabilities.

What are the legal ramifications for officers should they be requested to enforce a quarantine or curfew?

It was explained that for Iowa, this piece already exists in their current pandemic emergency plan. The individuals from Illinois stated that it is the governor who orders the curfew, and then the National Guard carries the order out. In turn, quarantine practices are issued by the

Director of the Rock Island County Health Department for the first 48 hours, and then the orders must continue through the court system.

Do officers have the necessary protective equipment and training to deal with contagious persons?

The officers explained that they do possess Infectious Disease Kits, but are not sure what is considered necessary at all times. They stated that this should be reviewed with health care providers. The representatives from Iowa explained that they currently have very clear directives on social distancing and transportation of infectious populations.

Issues for Discussion and/or Clarification

(Obtained from Pandemic Flu Seminar Evaluations)

Business Session

- Benefit issues for employees
- Continuity of Operations
- Mental health aspects of a pandemic: illness, death, loss of income, stress
- Sharing of other companies' plans and ideas
- Identification of key people in infrastructure: truck drivers, postal workers, etc

Health Care Session

- How to utilize retired physicians and nurses
- Liability issues/scope of practice
- Education of public and staff
- Who receives vaccines and/or antivirals? Priority groups-how to determine
- Exercise plans
- Coordination of public information to media
- Surge capacity (coordination to get extra beds available)
- Mortuary issues
- Employee absentee policies—sick time, when to stay home from work
- Sharing of current plans among partners
- Responsibilities of POD hospital, Public Health, Hospitals, Governor. Who decides what?
- Use of masks and/or other personal protective equipment

Education Session

- Specific Criteria needed in formulating guidelines.
- When and Who decides schools should close/re-open (locally, State, or Fed)?
- How will funding be impacted if schools close?
- Uniformity in plans throughout area school districts and colleges
- Capacity for providing online instruction
- Working from home
- Resource plan for families

Faith Based/Non-Profit Session

- Coordination/Cooperation between agencies
- Coordination of plans of all area churches
- How to mobilize individuals, who and where to call
- How to motivate/educate people to start planning
- How will needs of special populations be met
- Communication methods/education process for the community

Government Session

- Need to educate elected officials: County Board members, Mayors, Aldermen concerning plans for prevention and possible response.
- Include these individuals in exercises so they become familiar with plans.
- Identifying critical personnel
- Can critical government agencies receive help from the medical community to triage sick employees?
- Who decides who is well enough to work? How to define someone as “ill”?
- Safety, assessment of families & protection of children.

Law Enforcement Session

- Interagency coordination
- Event chain of command
- Lines of communication (upward, downward & lateral)