

OHIO DEPARTMENT OF HEALTH DEPARTMENT OPERATIONS CENTER



246 North High Street

odhdoc@odh.ohio.gov

Columbus, Ohio 43215

Alvin D. Jackson, M.D./Director of Health

SITUATION REPORT

Report Date: 1100 November 4, 2009

Event Type: Public Health Emergency

Operational Period: October 28 through November 2, 2009

Ohio Public Health Situation

| | |
|---|--------------------------------|
| Disaster/Hazard/Disease Type: | H1N1 |
| WHO Phase: | 6 - Widespread Human Infection |
| Governor Emergency Proclamation: | Yes, on October 7, 2009 |
| State EOC: | CAS Level 1 |
| ESF 8 Desk Staffed: NO (on standby) | Number: (614) 799-6444 |
| ODH ICS activated: YES IC: Roger Suppes | Number: (614) 752-9871 |
| ODH DOC activated: YES POC: Jeff Jones | Number: (614) 644-3435 |

World Health Organization:

As of 25 October 2009, worldwide there have been more than 440,000 laboratory confirmed cases of pandemic influenza H1N1 2009 and over 5700 deaths reported to World Health Organization (WHO).

As many countries have stopped counting individual cases, particularly of milder illness, the case count is significantly lower than the actual number of cases that have occurred. WHO is actively monitoring the progress of the pandemic through frequent consultations with the WHO Regional Offices and member states and through monitoring of multiple sources of data.

Current Status:

- The ODH received allotments of H1N1 vaccine from CDC on 10/26, 10/27, 10/28 and 10/29 for a total of 389,500 doses of H1N1 vaccine. The allocation order was submitted to CDC for 296 health department and hospital H1N1 providers.
- The ODH has received 440 pallets of N-95 respiratory masks, to be unloaded today.
- Between Sept. 27 and Oct. 27, the h1n1vaccine site was visited by 232,508 times by 146,224 unique individuals who accessed 2,636,874 page views.

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- The ODH H1N1 GENERAL flu information line received 535 calls on 11/3/09. The total number of calls received since the call center started stands at 13,496.
- The ODH H1N1 TECH Line received 148 calls on 11/3/2009.
- No schools and no daycares are reported closed today.

Incident Objectives:

1. Order and Report Vaccines in accordance with Vaccine Allocation and Ordering Plan 2009
 - a. Continue Allocation Process to ensure focused distribution to LHD's and Hospitals
 - b. Continue tracking who has been vaccinated by geography and category
 - c. Manage and communicate vaccine distribution
 - d. Modify IT systems, to provide technical assistance to providers and registrants
2. Report to CDC School and Day Care Closings
3. Track the dispense rate (burn rate) of Antivirals & PPE and Report to CDC
4. Provide General Information to the Public and Technical Assistance to Providers/Patient Registration
5. Provide daily surveillance on Hospitalizations and Deaths to Public Affairs—EPI reports to CDC
6. Monitor Medical Surge and Provide HAVBed Reporting to CDC
 - a. OHA to request hospitals provide Surgenet/HAVBed website updates on hospital status
7. Develop N-95 Guidance to define triggers for release of PPE to county drop sites. Include the ability to define "shortage"
 - a. Guidance complete and out by the start of this operating period
 - b. Define triggers for release of PPE
 - c. Define triggers for Antivirals request to drop sites and retail chain pharmacies

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- d. OHA to obtain hospital plans on use of PPE
- e. Receipt of Oral Suspension
- f. Develop a Strategy for Distributing N-95 masks to Hospitals
- g. Message to hospitals – manage expectations regarding receipt of additional PPE
8. Develop strategy on message addressing Safety of Vaccine and Adverse Events
9. Report identifying intervention or next steps regarding EPI assessments on trends or associations of
Hospitalizations and Deaths to identify potential interventions
10. Receive SNS PPE
11. Complete and publish ODH Website Redesign for H1N1
 - a. Pursue getting information out on Location and Timing of Vaccine distribution [Map of Flu clinic locations and timing]
 - b. Obtain static Links to locals with same information
12. Identify and Communicate the process and outcomes related to 1135 Waiver (hosp. waiver on CMS)
13. Develop data sets and critical information
14. Develop communications plan around release of Antivirals to Large Retail Pharmacy Chains

Disease Parameters:

The Pandemic strain of H1N1 2009 continues to demonstrate similar characteristics to seasonal influenza. The exception is the elderly, above 65, demonstrate less severe illness. Some individuals have progressed to extreme illness.

Individuals are encouraged to see their primary physician if they need treatment or if their illness progresses. Illness is initially asymptomatic (showing no evidence of disease); progressing to body aches, possible fever, tiredness, and decrease in appetite, upper respiratory symptoms and resolution of illness.

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ODH is conducting daily surveillance on Hospitals, Outbreaks, and Deaths and reporting them to the CDC by noon Wednesdays.

First Tier priority groups for vaccine include:

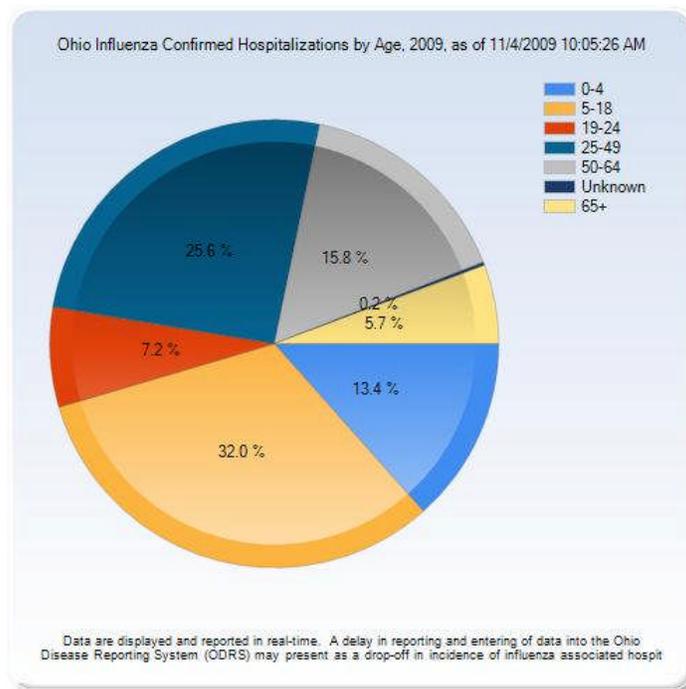
- Pregnant women
- Household contacts and caregivers for children younger than 6 months of age
- Health care and emergency medical services personnel
- Children 6 months through 18 years of age, young adults 19 through 24 years
- Persons aged 25 through 64 years who have health conditions associated with higher risk of medical complications from influenza

Expenditures:

The total payroll cost is \$369K for 129 staff and total procurement cost is \$489K . (This reflects staff's time entered into the MOSS portal on the ICS 252 electronic forms).

Impact on Individuals:

As of 11/4/2009, the confirmed total hospitalizations are 1,689 individuals. Almost 32% of those hospitalized are children and youth between the ages of 5 years and 18 years as indicated below.



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Resources:

As of November 4, 2009, 465 ODH personnel have been mobilized for the ODH H1N1 response; of those mobilized, 219 staff is currently assigned and scheduled.

Planning Updates:

H1N1 MOSS/Portal access to external Local Health Departments has been provided. Also, in an effort to keep essential partners informed of timely H1N1 information, the Ohio Hospital Association, Regional Hospital Coordinators and Local Emergency Management Agencies are being provided read only access to the ODH Situational Awareness Portal.

Incident Potential:

Ohio influenza surveillance remains at "widespread." The predominate strain is the new, novel H1N1 nationally. Ohio anticipates an increased need for medical evaluation and care at both physician offices and ER's, Hospital admissions and ICU admissions continue to increase. Influenza activity has increased and has not yet peaked.

- To date, over 341,922 individuals have pre-registered on the ODH H1N1 Vaccine
- Reported pre-registered providers approved by local health departments is 2,809 out of 5,549 as of November 4,2009

Safety Message:

Dr. Jackson has released a statement to the public regarding long-lines at the various H1N1 vaccination clinics. He stated people should dress appropriately for the weather, carry hand sanitizer and gave the following preventative measures to avoid spreading germs:

- Wash your hands frequently; use alcohol-based hand sanitizers if soap and water are unavailable
- Cover your coughs and sneezes with tissue, or cough or sneeze into your elbow.
- If you are sick, stay home until free from fever for 24 hours without taking fever-reducing medication.

Weather and Effects:

There is a slight chance of showers. The overall pattern will be fairly dry this week. We anticipate that the weather forecast will not impede transportation of vaccine and ancillary supplies at this time.