OHIO DEPARTMENT OF HEALTH
DEPARTMENT OPERATIONS CENTER

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

SITUATION REPORT

Report Date: 1100 November 13, 2009 **Event Type:** Public Health Emergency

Operational Period: November 11 through November 18, 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: OPEN		CAS Level 1
ESF 8: YES	POC:	Number: (419) 564-9192
OEMA Assessment Room: YES		Number: (614) 799-3903
ODH ICS activated: YES	IC: Roger Suppes	Number: (614) 752-9871
ODH DOC activated: YES	POC: Dan Deskins	Number: (614) 644-3435

World Health Organization:

GlaxoSmithKline (GSK) is to donate 50 million doses of pandemic H1N1 vaccine to the World Health Organization (WHO) under an agreement signed at WHO headquarters in Geneva by the WHO Director-General, Dr Margaret Chan, and the Chief Executive Officer of GlaxoSmithKline, Mr Andrew Witty.

GSK expects to prepare the first shipments of vaccine to the WHO by the end of November. The WHO has a list of 95 developing countries that are eligible to receive donated vaccines, and aims to secure enough vaccines to cover 10 percent of the population of these countries.

The Centers for Disease Control and Prevention:

Forty-eight states are reporting widespread influenza activity at this time. Almost all of the influenza viruses identified so far are 2009 H1N1 influenza A viruses. These viruses remain similar to the virus chosen for the 2009 H1N1 vaccine, and remain susceptible to the antiviral drugs oseltamivir and zanamivir with rare exception.

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.

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

Impact on Individuals:

- As of 8:10 a.m. on 11/13/2009, the Ohio influenza confirmed hospitalizations are 2,304 individuals per ODRS.
- To date, 43.6% of those hospitalized are between the ages of 0 and 18 years.
- Influenza activity continues to **DECLINE** in Ohio. Most data sources indicate that the peak was reached during the week of October 18th.

Incident Potential:

- Ohio anticipates continual “widespread” influenza activity over the next month.

Current Status:

- CDC has indicated that they do not anticipate achieving the projected supply of vaccine this week or next. They are trying to get additional information on the magnitude and reasons for this problem. CDC will release revised projections.
- The GSK vaccine has now been licensed by the FDA. GSK anticipates producing about 7.5 million doses that will be available in late December.
- Doses available for Ohio to order on November 12 are a total of 116,100 doses, down from 434,800 doses last week, in the following presentations: 21,100 in .25 ml prefilled syringes; 67,100 in .5 ml prefilled syringes; 27,900 in multi-dose vials; 0 LAIV (mist).
- The tentative plan is to include approved local health district, hospital, OB/gyn, pediatric, family practice, and FQHC providers in the orders that will be placed on November 13. ODH tentatively plans to begin processing orders for pharmacy providers on December 4 or 11. This plan is based on vaccine availability.

- An upload feature for HDIS data is now available in the h1n1vaccine web application. The upload feature can be accessed from the drop-down menu bar at the top of your home page. ODH will be providing detailed instructions.
- The ODH H1N1 **GENERAL** Flu information line received **490** calls on 11/12/09. The total number of calls received since the call center started stands at **16,774**. Most of the calls continue to be related to general questions, vaccine availability and clinic locations. However, we are still receiving some calls relating to people being turned away by the LHDs because they do not reside in that particular county (i.e., Butler County Health Department & Cincinnati Health Department). Summit County called with the concern they may be receiving to much vaccine. The ODH H1N1 **TECH Line** received **103** calls on 11/11/09.
- Finally, some of the LHDs are not informing parents when the second dose of H1N1 should be administered to children; there is also a discrepancy with the waiting time between doses. The CDC is recommending 28 days, but some of the LHDs are telling parents 14 to 21 days.
- As of 11/12/09, over 489,349 individuals have pre-registered on the ODH H1N1 Vaccine Application Site.
- Reported pre-registered providers approved by local health departments are 2,887 out of 5,549 as of November 12, 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 and evaluate expanded distribution beyond LHD's and Hospitals
   b. Develop application for tracking and reporting of who has been vaccinated by geography and category
   c. Develop application to show vaccine distributed
   d. Communicate vaccine distribution
   e. Identify all unapproved providers (e.g. Pediatricians, OBGYN's, Family practice, etc.) and take action to get them approved as appropriate (in order to direct ship).
   f. Identify and issue guidance to those who have been approved and have requested less than 100 doses.
   g. Develop guidance to LHD's for notifying unapproved providers.
2. Provide General Information to the Public and Technical Assistance to Providers/Patient Registration.
3. Report to CDC and/or EOC:
   a. School and Child Day Care closings
   b. County reporting of dispense rate (burn rate) of state and federal cache Antivirals & PPE
   c. Daily surveillance on Hospitalizations and Pediatric Deaths
   d. Medical Surge and Provide HAvBed
      (1) OHA to request hospitals provide Surgnet/HaveBed website updates on hospital status
      (2) Reporting on 1135 waivers
      (3) Hospital reporting of consumption of PPE and antivirals
   e. Monitor commercial antiviral dispensing from Retail Pharmacy Chains(RPC) for action

   f. Report call center statistics
   g. Regional Hospital Coordinators issue weekly report on existing supply of N95 PPE in Regional Caches
4. Complete and publish ODH Website Redesign for H1N1.
   a. Update information on Current Location and Timing of Vaccine distribution. [Map of Flu clinic and county search functions that includes locations and timing]
   b. Maintain links to locals with same information
5. Evaluate status of data sets and critical information and confirm dissemination.
6. Develop communication plan around release of Antiviral Oral Suspensions:
   a. Large Retail Pharmacy Chains
   b. County drop sites
7. Ship Antiviral Oral Suspension to RPC and necessary county drop sites.
8. Complete Plan for Call Center to cover through January 15, 2010 (current contract ends 11/30). Include schedule and what are the requirements for coverage.
9. Develop a report that identifies interventions or next steps based on EPI assessments on trends or associations of Hospitalizations and Deaths.

Expenditures:

The total payroll cost as of November 13, 2009 is $611,203.41 for 175 staff and total procurement cost is $518,012. (This reflects staff's time entered into the MOSS portal on the ICS 252 electronic forms).

Resources:

As of November 10, 2009, 457 ODH personnel have been mobilized for the ODH H1N1 response; of those mobilized, 248 ODH staff is currently assigned and scheduled.

Planning Updates:

H1N1 MOSS/Ohio Situational Awareness Portal access (read only access) was provided last week to the Ohio Hospital Association, Regional Hospital Coordinators and Local Emergency Management Agencies in an effort to keep essential partners informed of timely H1N1 information.

Safety Message for Public:

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:

Over the next ten days, Ohio will be experiencing cold temperatures and cold chain management guidance needs to be followed.