

OHIO DEPARTMENT OF HEALTH DEPARTMENT OPERATIONS CENTER



246 North High Street
Columbus, Ohio 43215

odhdoc@odh.ohio.gov

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

SITUATION REPORT

Report Date: 1100 October 30, 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 17 October 2009, worldwide there have been more than 414,000 laboratory confirmed cases of pandemic influenza H1N1 2009 and nearly 5000 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 State of Ohio Joint Public Information Center (JIC) is open and activated for media inquiries regarding H1N1 information only. JIC hours of operation will be 8:00am-5:00pm Monday through Friday. Only media should contact 614-799-6480. Public Inquiries should be directed to 1-866-800-1404 Monday through Friday 8:00am-9:00pm.

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The ODH anticipates receiving over 400 pallets of N-95 masks the week of November 2nd.

- The ODH has ordered 389,000 doses of vaccines and anticipates receiving it on Monday or Tuesday of next week; it will be distributed on Thursday and/or Friday.
- President Obama has declared the H1N1 outbreak a national emergency and empowered his health secretary to suspend federal requirements and speed treatment for thousands of infected. The declaration authorized Health and Human Services secretary Kathleen Sebelius to bypass federal rules so health officials can respond more quickly to the outbreak that has killed more than 1,000 people in the US.
- The ODH H1N1 TECH LINE received 203 calls on 10/29/2009. The callers are mostly providers with questions about logging in, we have not received vaccine, how to record a vaccination and citizens calling with questions on how to pre-register.
- The ODH H1N1 GENERAL flu information line received 646 calls on 10/29/09. The total number of calls received since the call center started stands at 11,831. Most of the calls are questions related to when and where the vaccines will be available and general frustration over the slowness of the shipments.

Incident Objectives:

1. Order and Report Vaccines in accordance with the 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
2. Report to CDC School and Day Care Closings
3. Track the dispense rate (burn rate) of Antiviral & PPE and Report to CDC
4. Provide General Information to the Public and Technical Assistance to Providers/Patient Registration
5. Provide daily surveillance on Hospitals, Outbreaks & Deaths to Public Affairs–EPI reports to CDC.
6. Monitor Medical Surge and Provide HAVBed reporting to CDC
7. MOSS PORTAL up and running to external partners [OHA, Regional Coordinators, County EMA's].

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8. Develop N-95 Guidance to define triggers for release of PPE to county drop sites. Include the ability to define "shortage."
9. Develop strategy on message addressing Safety of Vaccine and Adverse Events.
10. Continue EPI assessments on trends or associations of Hospitalizations and Deaths to identify potential interventions.

Planning Updates:

H1N1 MOSS/Portal access to external local health departments has been provided.

Disease Parameters:

The influenza A H1N1 pandemic strain circulating in Ohio since April 2009 demonstrates similar characteristics to seasonal influenza with the exception that elderly, above 65, demonstrate less severe 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

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.

Some individuals have progressed to extreme illness, although this is not common. Individuals are encouraged to see their primary physician if they need treatment, or if their illness progresses.

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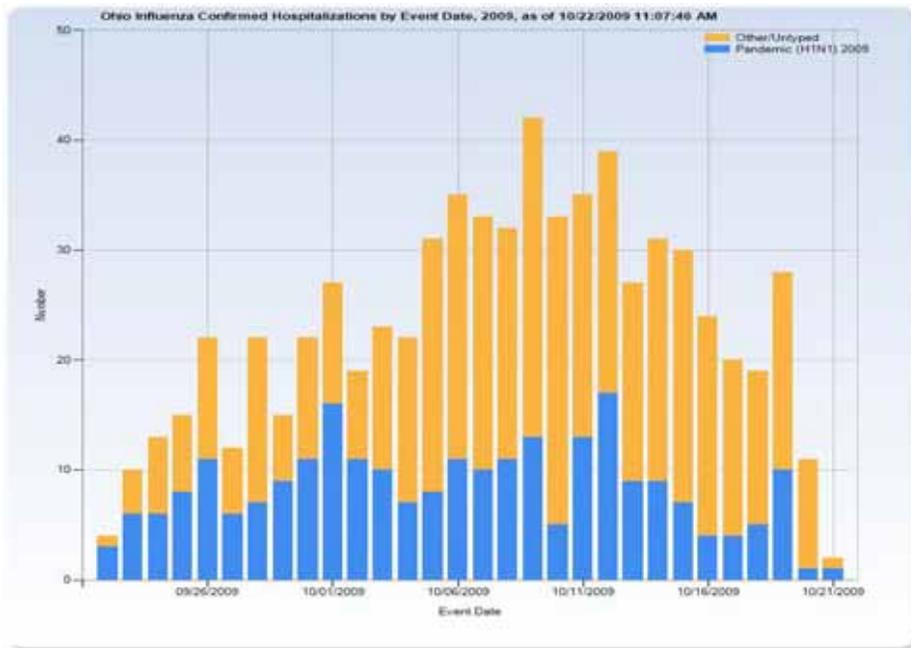
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Expenditures:

As of 10/30/09 the total payroll cost is \$303,758.64 for 119 staff and total procurement cost is \$450,470.00.

Impact on Individuals:

During the week of October 11-17, 2009, influenza activity continued to increase in the United States as reported in FluView. Flu activity is now widespread in 46 states.



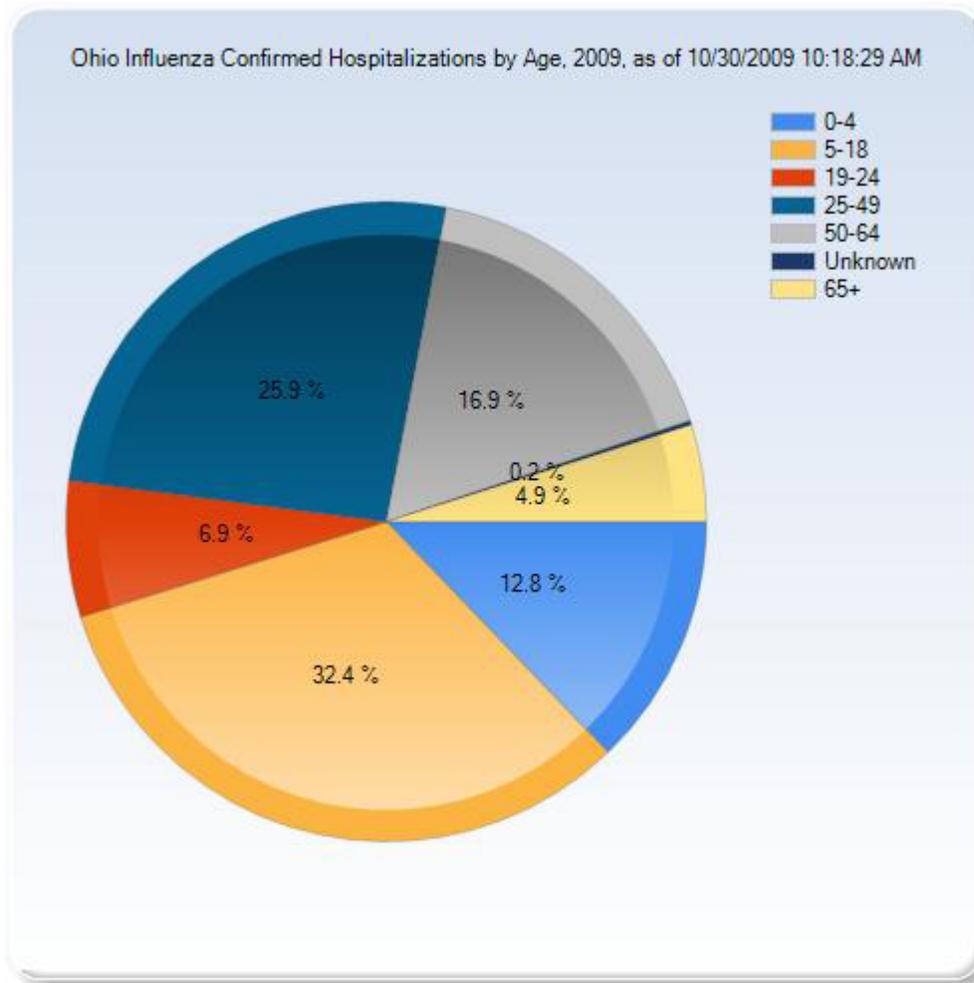
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Resources:

As of October 27th 2009, 404 mobilized personnel (ODH staff).

Incident Potential:

Influenza activity remains increased and has not peaked. Ohio influenza surveillance remains at "widespread." The predominate strain is the 2009 influenza A (H1N1) virus nationally. Continue to expect increased need for medical evaluation and care centered in physician offices and ER's with continued hospital admissions and ICU admissions.

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Weather and Effects:

Today: Cloudy, with a high near 69. South wind between 15 and 18 mph, with gusts as high as 29 mph. We anticipate that the 10-day weather forecast will not impede transportation of vaccine and ancillary supplies at this time.