

ASPR TRACIE Technical Assistance Request

Requestor:

Requestor Phone:

Requestor Email:

Request Receipt Date (by ASPR TRACIE): 09 May 2018

Response Date: 9 May 2018

Type of TA Request: Standard

Request:

The requestor asked ASPR TRACIE for assistance in identifying current pandemic influenza resources to inform preparations for an upcoming pandemic influenza exercise.

Response:

The ASPR TRACIE Team developed five resources in the past year that may be particularly useful, which are listed and described in Section I. Section II identifies key resources that are included in the ASPR TRACIE-developed resources as well as recently published items. Section II also includes resources associated with commemorating the 100 year anniversary of the 1918 influenza pandemic.

I. ASPR TRACIE-Developed Resources

[Avian Influenza \(Including H7N9\): Resources at Your Fingertips](#): While focused on avian influenza, this document outlines why there are concerns about rare human infections with avian influenza viruses and the potential for one of these viruses to become able to infect and transmit efficiently among people. The document provides background information on influenza, explains why avian influenza is different than seasonal influenza, provides detection and treatment information, and discusses pandemic risks and planning considerations.

[Considerations for the Use of Temporary Care Locations for Managing Seasonal Patient Surge](#): ASPR TRACIE developed this document in response to a technical assistance request for information on how healthcare facilities across the nation were handling higher than normal patient volumes this past winter. The document describes the major issues healthcare facility emergency managers must consider when determining patient surge management solutions for longer duration incidents, such as weeks to months of managing seasonal illness surge. Many of the planning considerations detailed in the document would also apply during a pandemic.

[EMS Infectious Disease Playbook](#): This playbook synthesizes multiple sources of information in a single planning document addressing the full spectrum of infectious agents to create a concise reference resource for emergency medical services (EMS) agencies developing their service policies. The Special Respiratory Precautions section, beginning on page 6-33, applies to novel influenza strains. The Resources/Special Considerations section includes pandemic influenza information, beginning on page 8-65.

[Epidemic/Pandemic Influenza Topic Collection](#): ASPR TRACIE developed this Topic Collection to help healthcare professionals and emergency medical planners prepare for the next influenza epidemic or pandemic. Resources are categorized under antiviral treatment; epidemiology and surveillance; general information; guidance; guidelines; lessons learned; non-pharmaceutical strategies; pediatric issues; PPE and worker safety; plans, tools, and templates; research; resource allocation and management; and vaccines. Links to other Topic Collections with content relevant to specific aspects of epidemic and pandemic influenza planning are also listed. The Lessons Learned; Plans, Tools, and Templates; and Agencies and Organizations sections could be particularly helpful to exercise preparations.

[Health Care Coalition Pandemic Checklist](#): This document is a planning tool intended to help health care coalitions and their partners in assessing preparedness for an influenza pandemic. The checklist is organized by general coalition-wide activities and safety and infection control activities as well as specific sections for EMS, hospitals and healthcare, public health, and emergency management. The activities listed in the checklist may be helpful to the development of the exercise scenario or the Master Scenario Events List.

II. Recent and Key Pandemic Influenza Resources

American Academy of Family Physicians. (2015). [Pandemic Influenza - Clinical Considerations](#).

This document provides an overview of clinical considerations for pandemic influenza, including sections on immunization, surveillance, reporting, prevention, diagnosis, testing indications and types, treatment, and isolation and quarantine. It also includes information on limiting transmission when managing patients at home.

Centers for Disease Control and Prevention. (2018). [100 Years Since 1918: Are We Ready for the Next Pandemic?](#)

This page links to the slides and transcript of a CDC Influenza Division webinar on pandemic influenza.

Centers for Disease Control and Prevention. (2016). [Influenza Risk Assessment Tool \(IRAT\)](#).

This tool was developed by the Centers for Disease Control and Prevention and other influenza experts to assess the risk of a human pandemic emerging from influenza A viruses currently circulating in animals. The IRAT uses 10 weighted evaluation criteria to

assess the risk of both emergence and public health impact and to classify each virus as low, moderate, or high risk.

Centers for Disease Control and Prevention and Emory University Rollins School of Public Health. (2018). [100 Years of Influenza Pandemics and Practice: 1918-2018](#).

This recording is from a day-long symposium held May 7, 2018. Presenters discussed lessons learned from the 1918 influenza pandemic, current pandemic threats, and ongoing and future preparedness activities.

Christian, M., Devereaux, A., Dichter, J., et al. (2014). [Care of the Critically Ill and Injured During Pandemics and Disasters: Introduction and Executive Summary](#). Chest. 146(4_suppl).

This article provides an introduction to and methodology supporting the consensus statement of the American College of Chest Physicians on the care of the critically ill and injured during pandemics and disasters. Other articles in this supplement focus on specific aspects of such care.

Hanfling, D., Altevogt, B., Viswanathan, K., and Gostin, L. (2012). [Crisis Standards of Care: A Systems Framework for Catastrophic Disaster Response](#). The National Academies of Sciences, Engineering, and Medicine.

This report was designed to help authorities operationalize the concepts first developed in the 2009 Institute of Medicine Report titled, “Guidance for Establishing Crisis Standards of Care for Use in Disaster Situations: A Letter Report.” It provides practical templates and toolkits for the emergency response disciplines and emphasizes the importance of a systems framework. This report also includes a “public engagement” template specifically to guide communities in hosting meetings and encourages the inclusion of citizens in their policy process.

Holloway, R., Rasmussen, S., Zaza, S., et al. (2014). [Updated Preparedness and Response Framework for Influenza Pandemics](#). Morbidity and Mortality Weekly Report. 63(RR06):1-9.

This article describes the Centers for Disease Control and Prevention’s revised framework for pandemic influenza preparedness and response. The authors describe the six intervals along the pandemic curve and eight domains used to organize efforts within each interval.

National Security Council. (2005). [National Strategy for Pandemic Influenza](#).

This document provides a framework for U.S. government planning for and response to pandemic influenza. While somewhat dated, it is the current national-level strategy document for pandemic influenza.

New York City Department of Health and Mental Hygiene. (n.d.). [Mystery Patient Drill Toolkit](#). (Accessed 10/11/2017.)

This toolkit is intended for use by hospital emergency departments, and tests how long it takes for a potential patient with a highly infectious disease to be identified and for staff to begin exposure mitigation procedures; how long it takes for a patient to be transferred to an isolation room; and the capability of the facility to make notifications internally and to the health department. The Toolkit includes scenarios for Ebola Virus Disease, Middle East Respiratory Syndrome, and Measles, but may be modified to suit healthcare facilities of any nature and any type of disease outbreak.

Qualls, N., Levitt, A., Kanade, N., et al. (2017). [Community Mitigation Guidelines to Prevent Pandemic Influenza - United States, 2017](#). Morbidity and Mortality Weekly Report. 66(1):1-34.

These guidelines update Centers for Disease Control and Prevention recommendations on the use of non-pharmaceutical interventions to slow the spread of infectious respiratory diseases, including influenza.

U.S. Department of Health and Human Services. (2017). [Pandemic Influenza Plan: 2017 Update](#).

This updated plan builds upon the 2005 Pandemic Influenza Plan and its subsequent updates, focusing on the seven domains of: surveillance, epidemiology, and laboratory activities; community mitigation measures; medical countermeasures; health care system preparedness and response activities; communications and public outreach; scientific infrastructure and preparedness; and domestic and international response policy, incident management, and global partnerships and capacity building.

U.S. Department of Health and Human Services, Office of the Assistant Secretary for Preparedness and Response. (2012). [An HHS Retrospective on the 2009 H1N1 Influenza Pandemic to Advance All Hazards Preparedness](#).

The authors share lessons learned from the 2009 influenza pandemic, grouped into the following categories: surveillance, mitigation measures, vaccination, and communications and education.

World Health Organization. (2014). [Infection Prevention and Control of Epidemic- and Pandemic-Prone Acute Respiratory Infections in Health Care: WHO Guidelines](#).

This document provides recommendations, best practices and principles for infection prevention and control for acute respiratory infections in health care, particularly those that present as epidemics or pandemics. It includes information on PPE and aerosol-generating procedures. There are also summaries of literature and research reviews on physical interventions for infection control; risk of transmission from aerosol-generating procedures; and effectiveness of vaccination of health care workers to protect patients.