

Public Health Preparedness: Risks as We Enter Fall 2013

October 17, 2013

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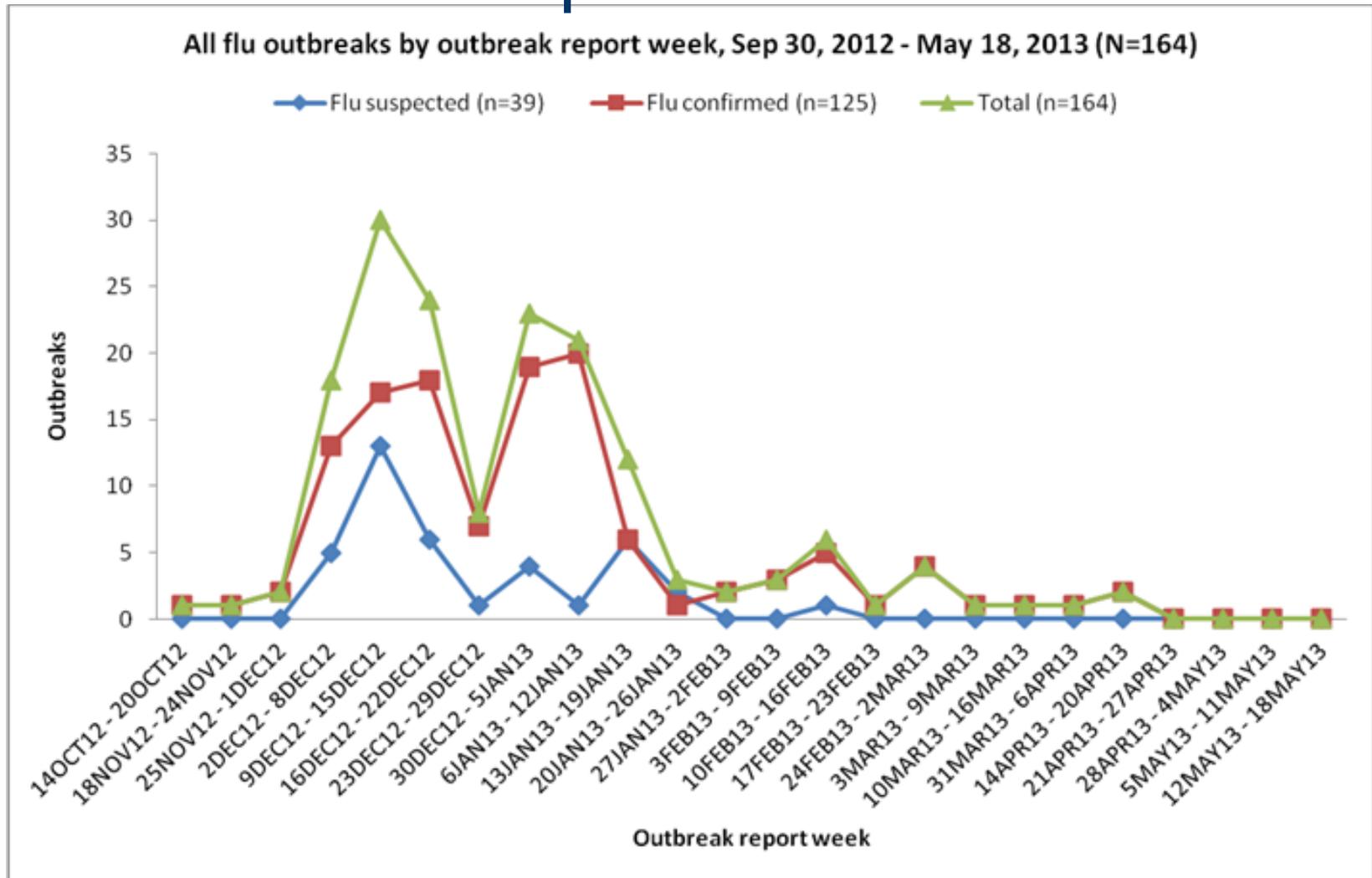
Seasonally Significant Public Health Issues

- Seasonal Influenza
- Novel Influenza
 - A H7N9
 - A H3N2v
- Seasonal Norovirus
- Middle East Respiratory Coronavirus-MERS-CoV
- Severe Weather

Seasonal influenza

- This is one thing we can count on every year
- “Typical” season - October - May
 - Usually peaks December - February
- This year we can expect to see multiple flu viruses circulating
 - Influenza A H3N2, Influenza A H1N1, Influenza B
- Influenza can have a large impact, especially in group residential settings
- Could impact CI/KR staff

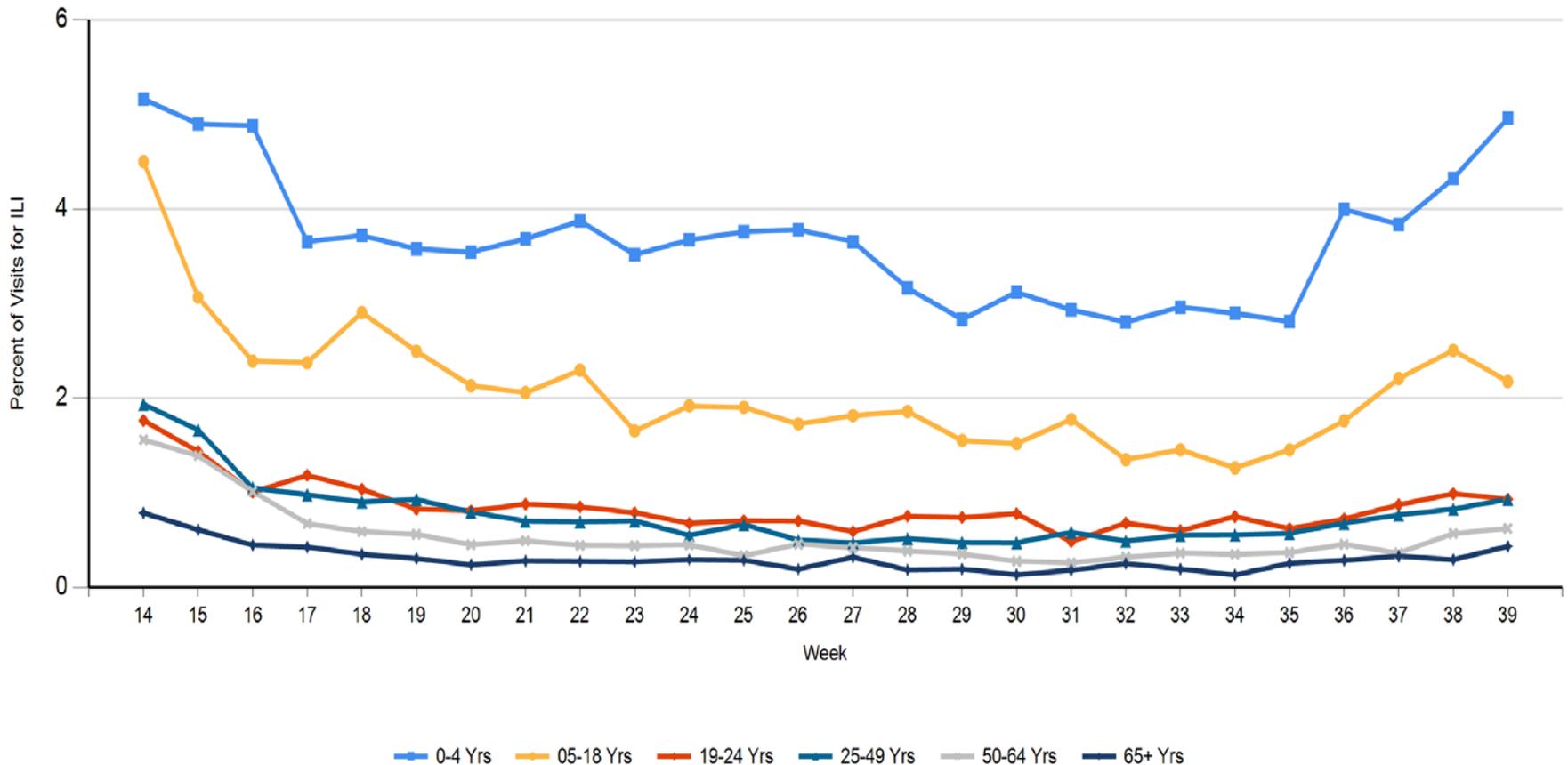
Flu outbreaks reported last season



Visits for influenza-like illness (ILI)

Percent of Visits with Influenza-like Illness by Age Category
Most Recent 26 Weeks

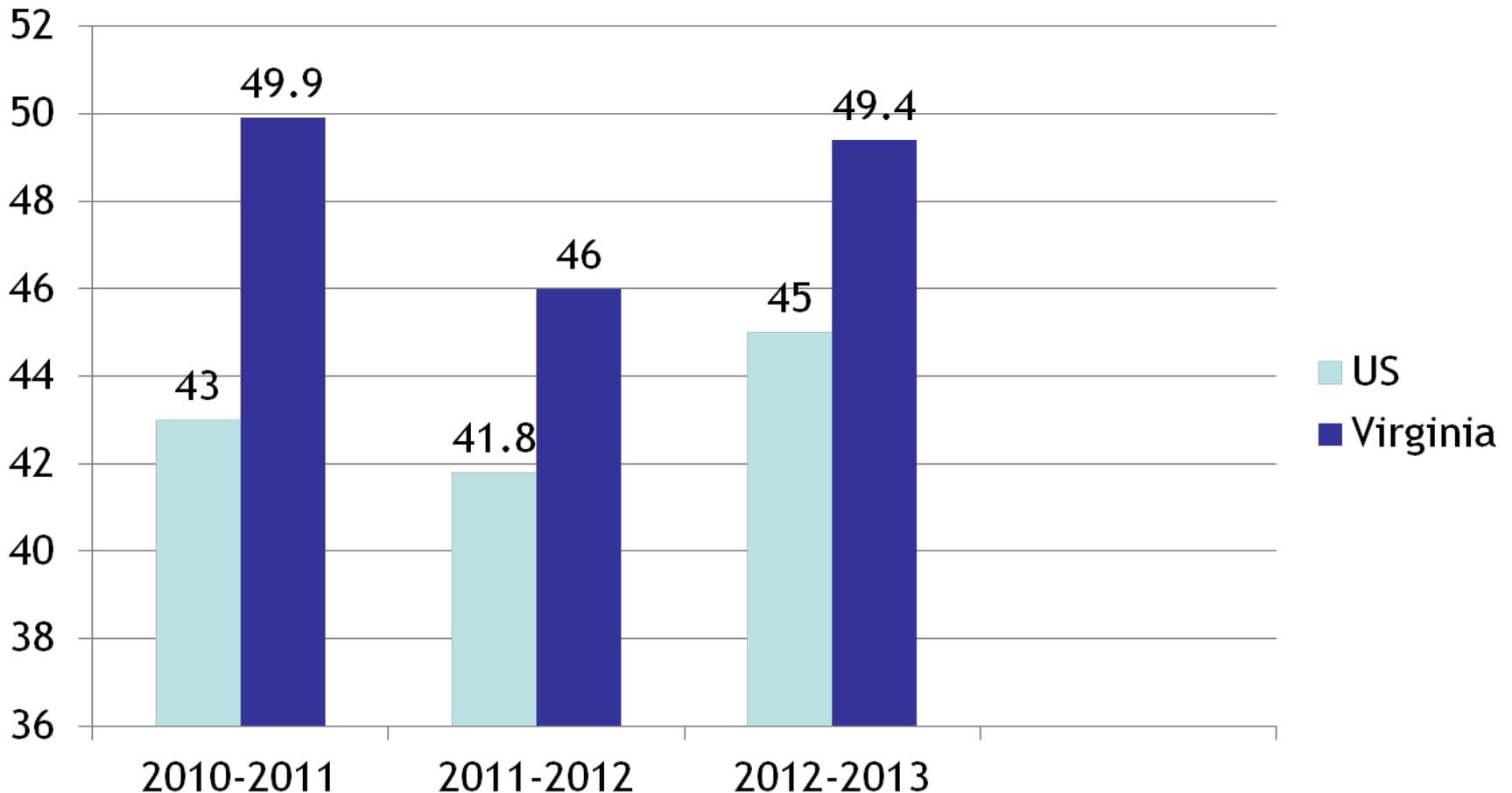
Data From Week Ending Date: 9/28/2013



VDH's flu-related activities

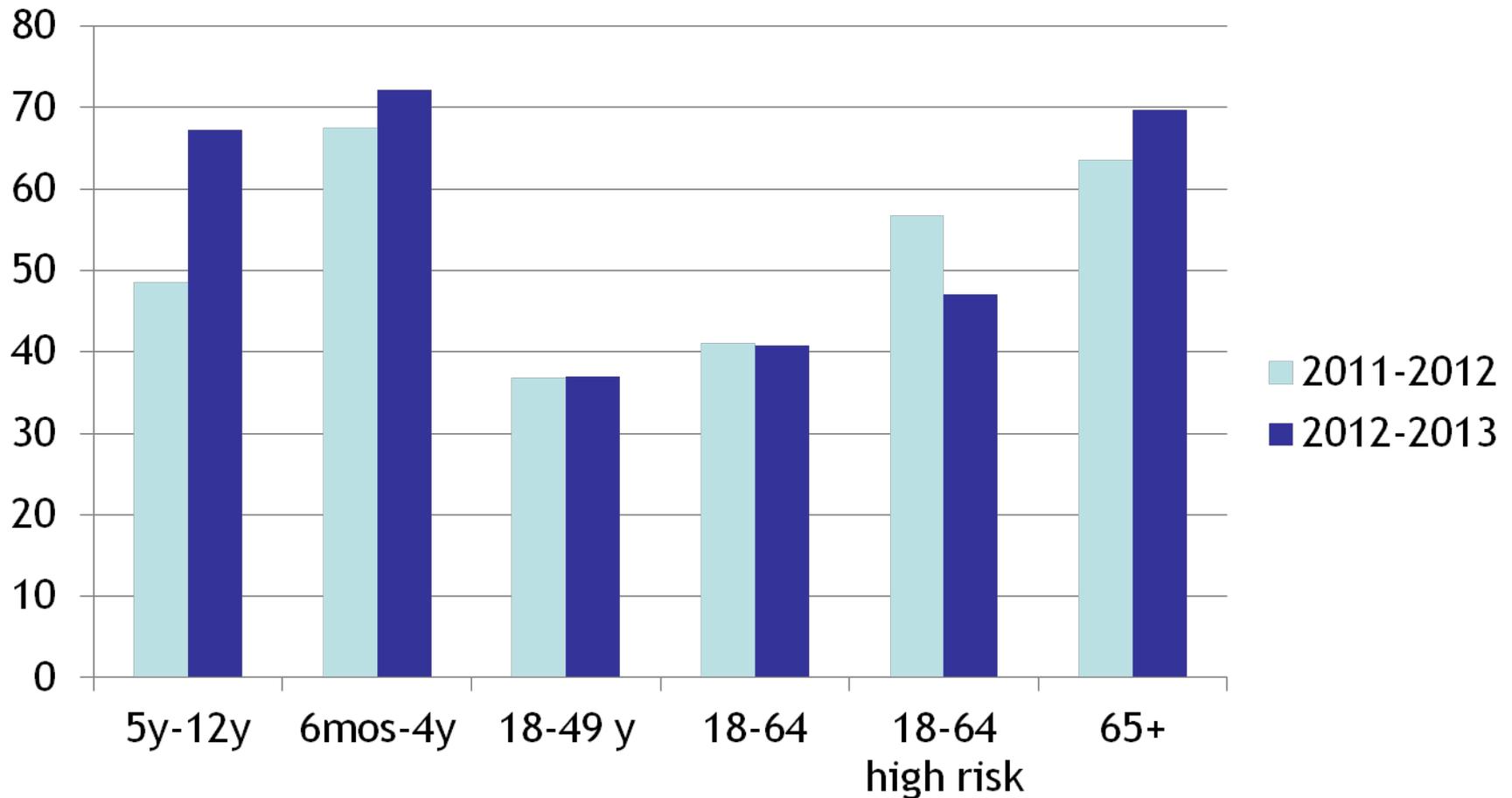
- Surveillance
 - Monitor flu activity based on outbreaks, laboratory findings, and visits for influenza-like illness (ILI)
- Education and Awareness
 - Deliver public messages about covering cough, staying home while sick, washing hands and getting the flu vaccine
- Prevention and Control Measures
 - Give advice on outbreak control to facilities
 - Encourage and provide vaccine
 - VDH also provides our Local Health Districts with annual flu vaccine to conduct mass vaccination exercises

Influenza vaccine coverage in Virginia Persons \geq 6 months of age



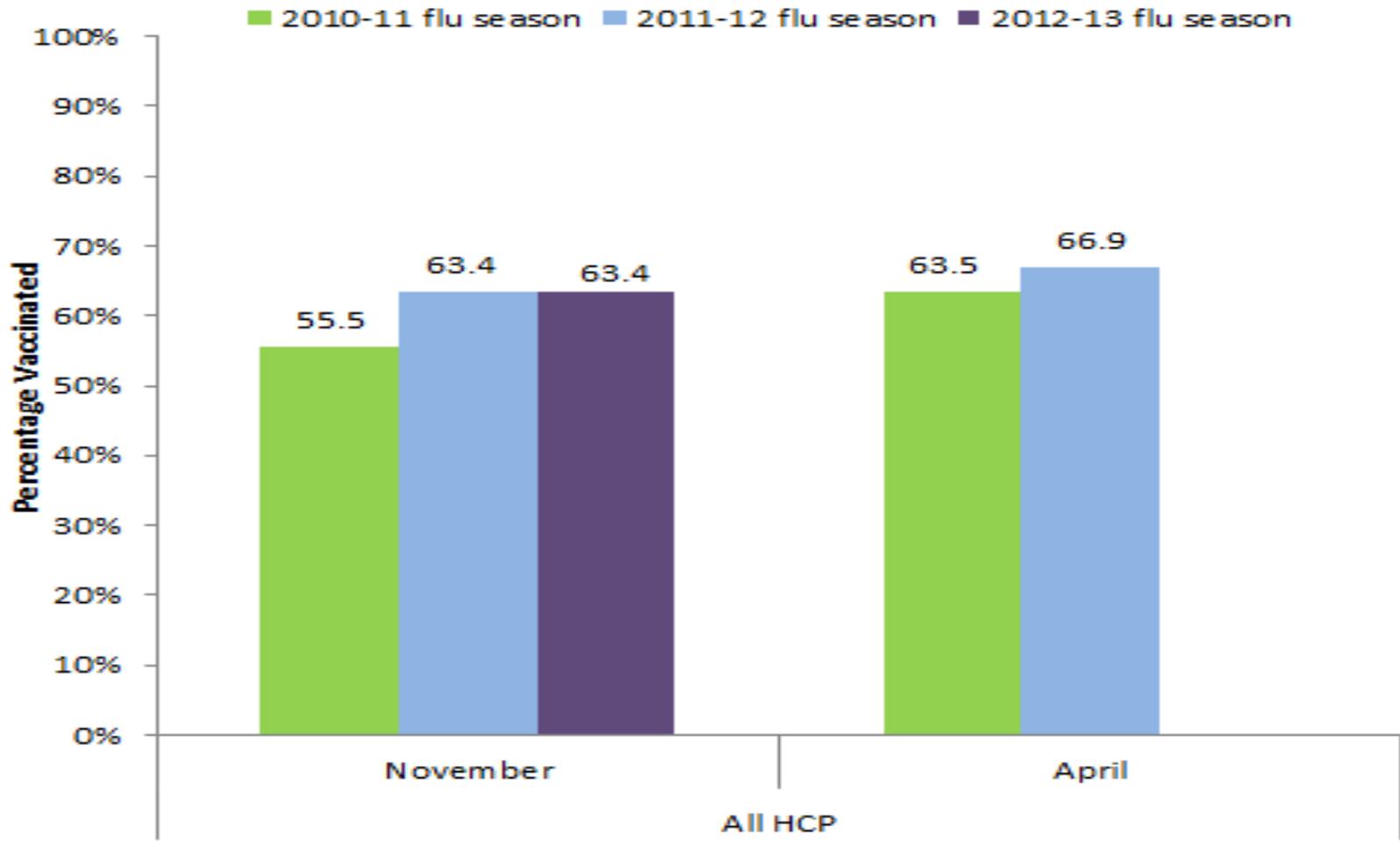
Source: CDC's FluVaxView, <http://www.cdc.gov/flu/fluview/>

Virginia flu vaccine coverage estimates, by age group and flu season



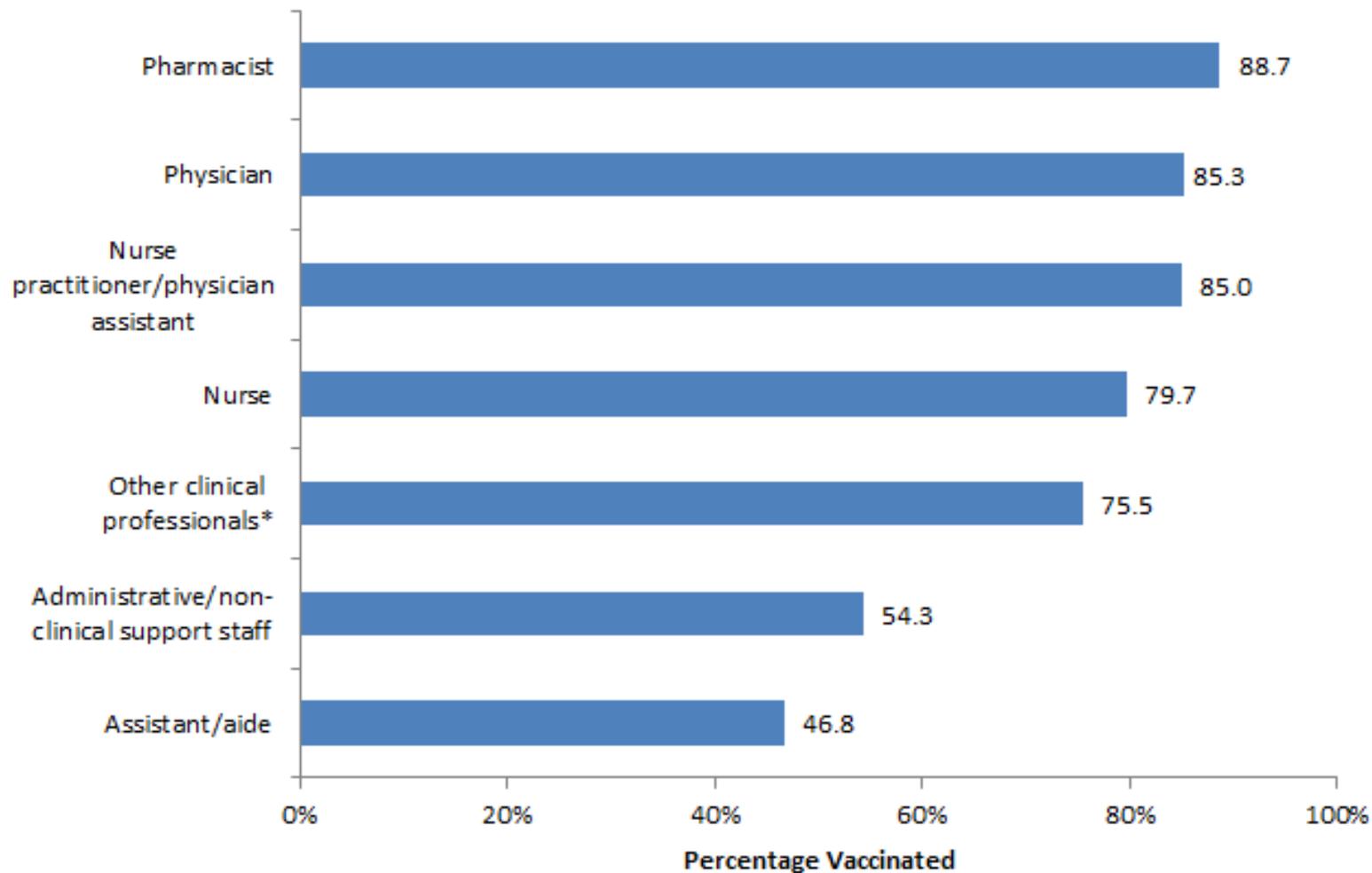
Source: CDC's FluVaxView, <http://www.cdc.gov/flu/fluview/>

Figure 1. Flu Vaccination Coverage among Health Care Personnel by Early-November and Early-April, for 2010-11 and 2011-12 Flu Season, and Early-November for 2012-13 Flu Season, United States



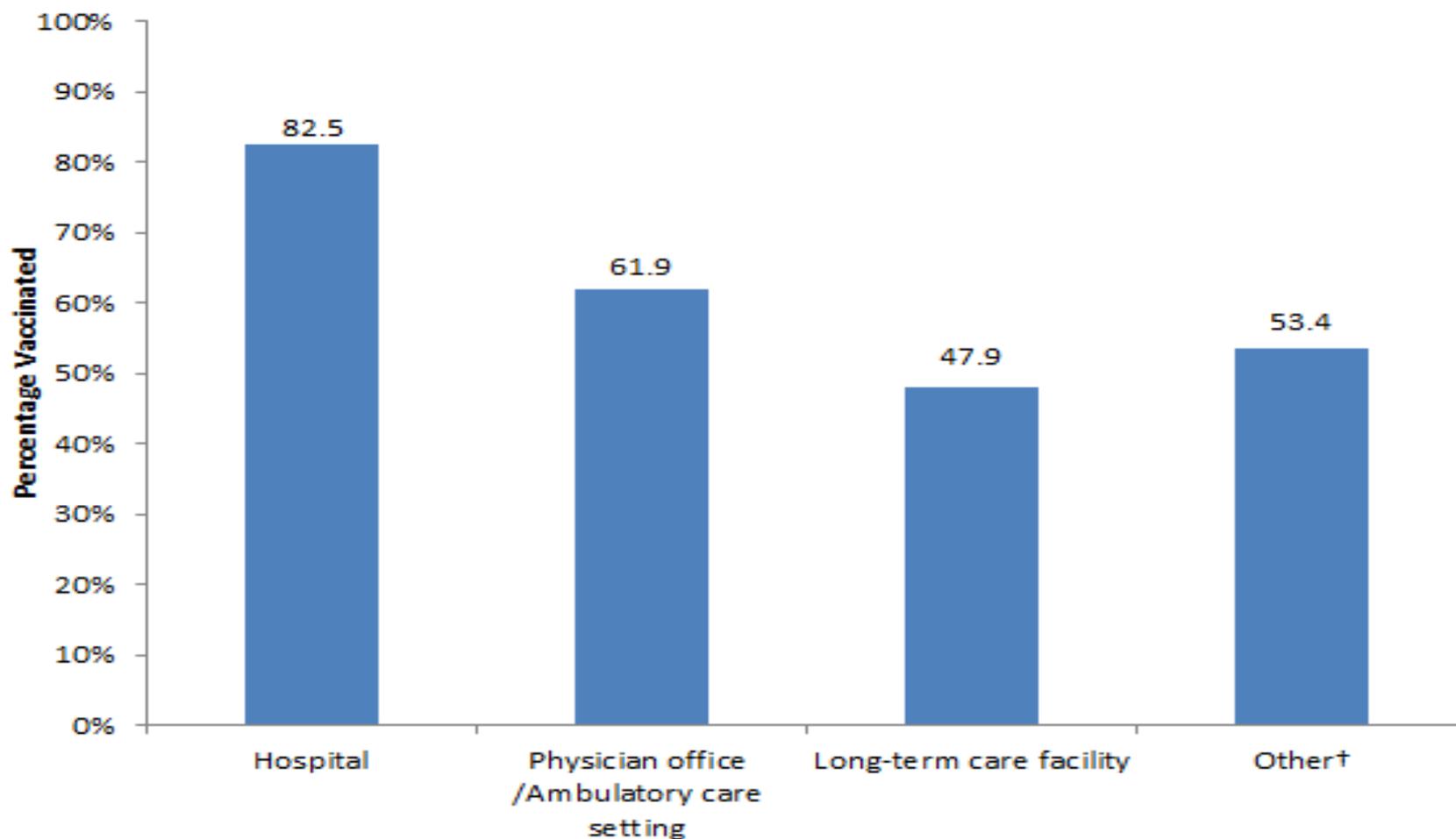
Source: Influenza Vaccination Coverage Among Health-Care Personnel – United States, 2012-13 Influenza Season. MMWR Morb Mortal Wkly Rep 2013;62(38);781-786

Figure 2. Flu Vaccination Coverage among Health Care Personnel by Occupation, Early-November 2012, United States



Source: Influenza Vaccination Coverage Among Health-Care Personnel – United States, 2012–13 Influenza Season. MMWR Morb Mortal Wkly Rep 2013;62(38);781-786

Figure 3. Flu Vaccination Coverage Among Health Care Personnel by Work Setting, Early-November 2012, United States



Source: Influenza Vaccination Coverage Among Health-Care Personnel – United States, 2012-13 Influenza Season. MMWR Morb Mortal Wkly Rep 2013;62(38);781-786

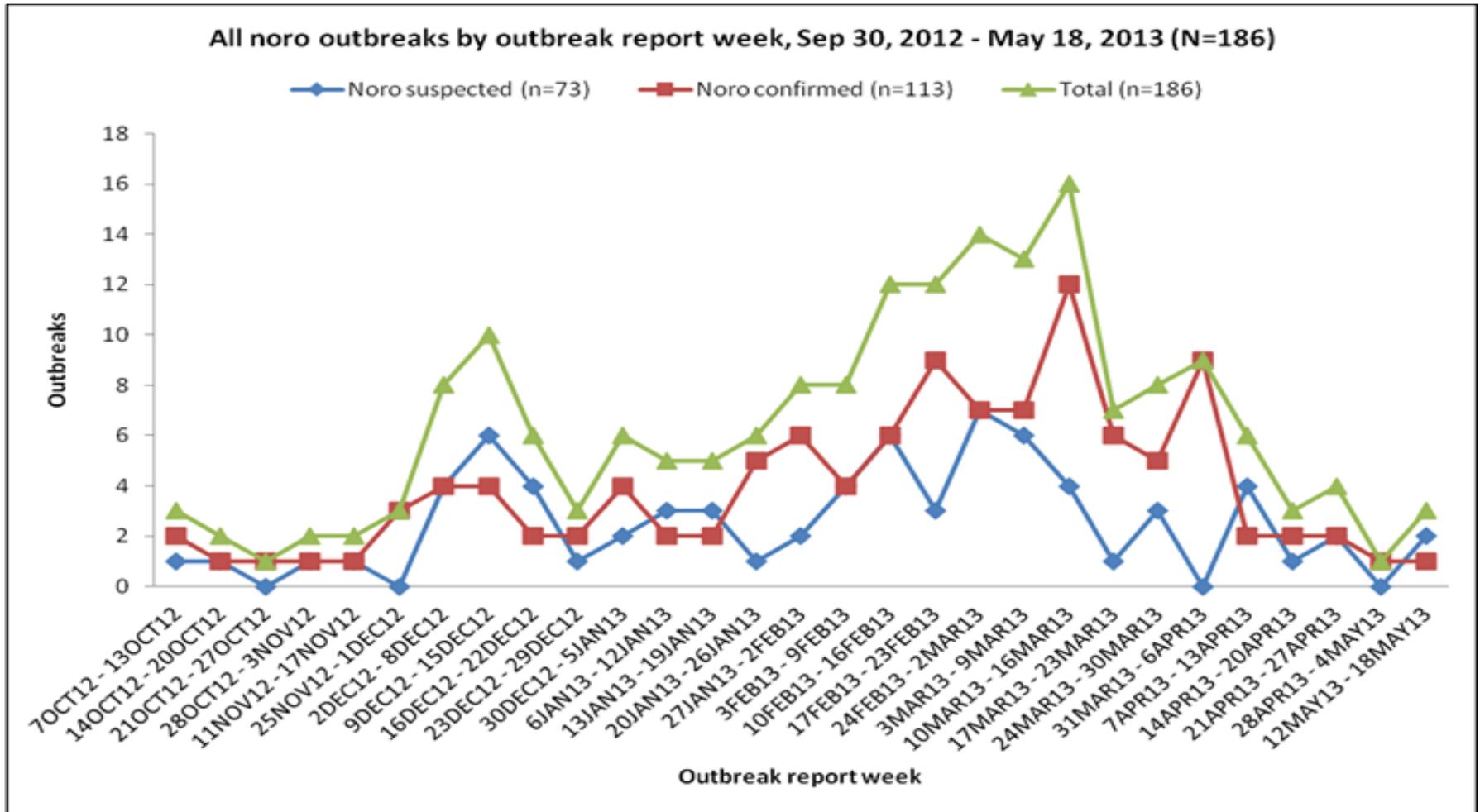
Seasonal norovirus

- At the same time influenza is circulating, we also see a seasonal increase in the activity of norovirus, a gastrointestinal virus, in the community.
- Norovirus symptoms: vomiting and/or diarrhea.
- Spreads easily from person-to-person.
- Can have a large impact in group settings, such as: schools, daycare facilities, long-term care facilities, and social gatherings.
- Could impact CI/KR functions, also

Novel influenza - Update

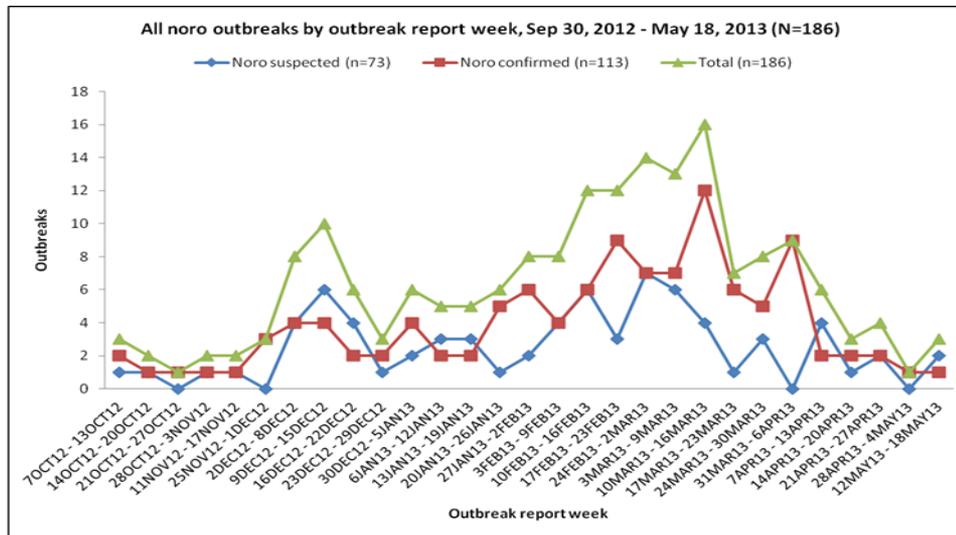
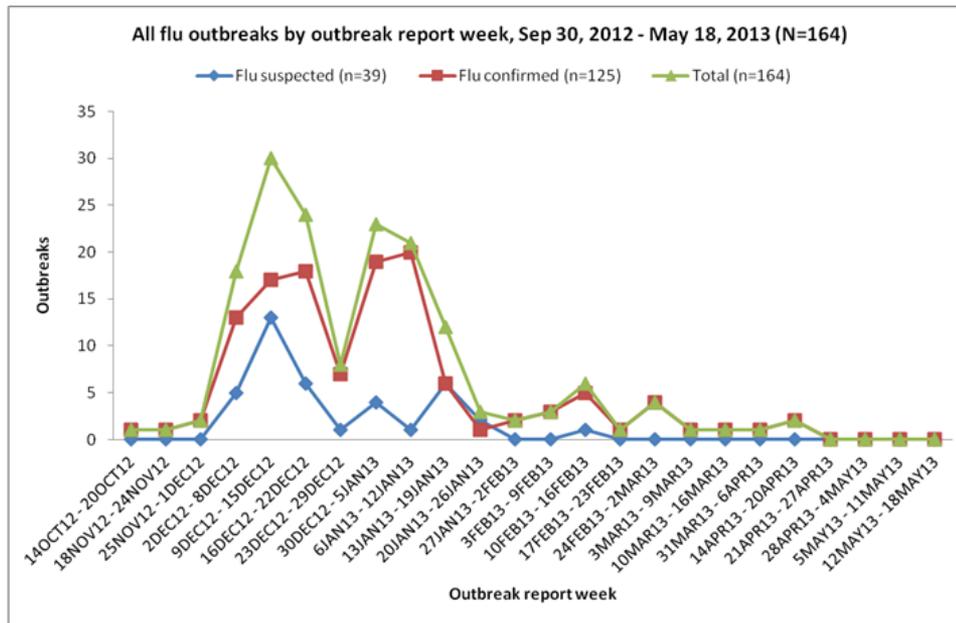
- Influenza A H7N9
 - All cases to date have been in China
 - 135 cases and 44 deaths reported (WHO, 8/12/2013)
 - Few reports of new illness in past several months
 - VDH and DCLS collaborated to test 6 people for H7N9
 - All met screening criteria for testing
 - All tested negative
- Influenza A H3N2v associated with county fairs
 - In 2013, 18 cases identified (CDC, 9/6/2013)
 - 78% were in Indiana
 - One case in an out-of-state resident who had exposure to pigs at a county fair in Virginia

Norovirus outbreaks reported last season



VDH's norovirus-related activities

- Investigate and seek laboratory confirmation of many outbreaks
- Monitor trends in outbreaks
- Give advice to facilities experiencing an outbreak
- Make available information on the disease and disease prevention and control measures



MERS-CoV - Update

- 136 cases reported (CDC, 10/4/2013)
 - 58 deaths (43% fatality rate)
 - Cases in 8 countries: 83% in Saudi Arabia
- No cases in United States
- No sustained person-to-person transmission, but can spread person-to-person during close contact
 - Family caregivers
 - Healthcare settings
- VDH and DCLS collaborated to test 4 people for MERS-CoV
 - All met screening criteria for testing
 - All tested negative

Severe Weather Preparedness

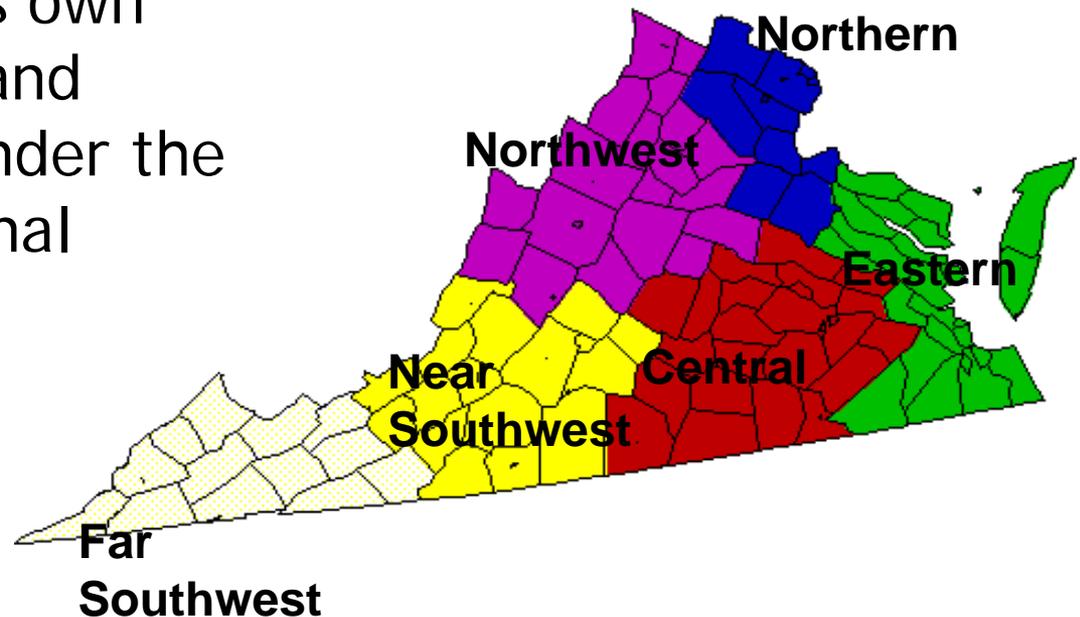
VDH Collaborative Initiatives

- Enhancing long term care facility resiliency
- Building regional healthcare coalitions statewide
- Providing seasonal individual / family readiness advisories to agency personnel
- Collaboration among regional healthcare coordinators and regional health emergency coordinators
 - Improving situational awareness
 - Revising/updating situation reporting methodologies
 - Recovery planning for health care organizations

Commonwealth of Virginia's Statewide Hospital Emergency Preparedness Program

The Virginia Department of Health (VDH) works through the Virginia Hospital and Healthcare Association (VHHA) to coordinate governance and initiatives with the state's Hospital Emergency Management Committee (HEMC), 6 Hospital Regions and 89 participating facilities.

- Each region develops its own regional plans, polices and governance structure under the oversight of their Regional Coordinating Group.



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Central Far SW Northern Near SW Eastern Northwest

Fiduciary Agent

Virginia
Commonwealth
University Health
System

Consulting
Contract with
HPP Coordinator

Northern
Virginia Hospital
Alliance

Near Southwest
EMS Council

Tidewater EMS
Council

Consulting
Contract with
HPP Coordinator

Coalition

Central Virginia
Disaster
Planning
Committee

Far Southwest
Preparedness
Commission

Northern
Virginia Hospital
Alliance

Near Southwest
Preparedness
Alliance

Eastern Virginia
Coordinating
Group

Northwest
Region Hospital
Emergency
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Local Emergency Management & Community Healthcare Coalitions

- **Critical Link**
 - Building coalition effectiveness in a community with engagement and consistent involvement of local emergency management as active partners.
- Threat/Hazard Assessment to Identify Gaps in Preparedness
- Preparedness and Mitigation Planning
- Coordinated Response Including Mutual Aid
- Community Based Recovery from Disaster

Virginia's public health capabilities during partial Federal government shutdown

- VDH's disease and outbreak surveillance/investigation activities continue.
- DCLS's laboratory activities in support of influenza, MERS-CoV, other infectious diseases, and other threat agents continue.
- VDH's programs to provide influenza vaccine and other vaccines to our local health districts and Vaccine for Children (VFC) providers continue.
- VDH continues to communicate and collaborate with the healthcare community and the public in Virginia and with public health partners in other states.

Breaching the Debt Ceiling

*Significant impact on VDH
preparedness capability*

Full continuity planning underway