

Lincoln County

Pandemic Influenza Response Plan

March 2024

This document contains the plans and protocols regarding pandemic influenza outbreak. This plan will be reviewed and updated annually or as necessary by the Health Director, Public Health Emergency Preparedness Coordinator, or designee. This version supersedes all previous versions of this document.

The Pandemic and All-Hazards Preparedness Act (PAHPA), Public Law No. 109-417, was passed by the US Congress in 2006, then reauthorized (PAHPRA) Public Law No. 113-5 in 2013. These acts allow the US Department of Health and Human Services to advance national health security through several program areas, including the National Health Security Strategy, funding public health emergency preparedness and response, hospital preparedness, providing for stockpiling medical countermeasures, plus more.

PAHPRA continued the authorization for funding public health to the states and territories. To receive the funding, states must follow the aspects of the cooperative agreement and comply with the required tasks set forth each year by the CDC. Montana has chosen to disburse a portion of this grant funding to local and tribal jurisdictions, but it must be done through contract (via the task order agreement with Montana Department of Public Health and Human Services). Because the funds are federally based, any recipient or sub-recipient must comply with the originating Act.

Promulgation of Authorization

This document serves as the formal declaration authorizing the use of this emergency response plan to protect the public’s health and safety in Lincoln County against pandemic influenza. City-County Board of Health for Lincoln County (BOH) acknowledges that BOH, Lincoln County Health Officer and Lincoln County Health Department (LCHD) have the responsibility and duty to execute this plan in defense of public health.

This plan complies with existing federal, state, and local statutes and agreements made with the various agencies identified within. LCHD, in defense against disease outbreaks in our communities, prepares and maintains emergency preparedness documents and is committed to the training and exercise required to support this plan.

Partners with roles identified in this plan have participated in its development and concur with the processes and strategies found within, which comply with the Public Health emergency Preparedness and Response Capabilities National Standards (CDC, 2019), and adhere to the science-based, industry, and academic standards of disease control.

All partners and stakeholders are responsible for advising LCHD of any changes in their own procedures or operations that could affect any emergency responses undertaken.

This plan is hereby approved for implementation. It supersedes all previous editions.

Signature
Amy Fantozzi, Chair
Board of Health

Date

Signature
Brad Black, MD
Health Officer

Date

Record of Changes

Date	Revisions Made	Approved by:	Distribution Date
1/2016	Total re-write		
6/2019	Update to LCHD roles and responsibilities		
6/2020	Annual Review		
6/2022	Update roles and responsibilities		
1/2023	Added Promulgation of Authorization, added sections: public information, surveillance, resource providers, other prevention strategies and plan maintenance		
03/2024	Annual Review	BOH	

Table of contents

Section	Page
Introduction	5
Situation and Planning Assumptions	6
Roles and Responsibilities	7
Concept of Operations	9
Direction and Control	10
Non-Pharmaceutical Interventions	11
Public Health Services	12
Recovery	12

Introduction: Severe influenza pandemics represent one of the greatest potential threats to the public's health. Pandemics are distinct from seasonal influenza epidemics that happen nearly every year. Seasonal influenza epidemics are caused by influenza viruses that circulate around the world. Over time, people develop some degree of immunity to these viruses and vaccines are developed annually to protect people from serious illness. Pandemic influenza refers to a worldwide epidemic due to a new, dramatically different strain of influenza virus. A pandemic virus strain can spread rapidly from person to person and, if severe, can cause high levels of disease and death around the world. Additionally, new vaccines or treatments may be developed and therefore are not likely to be available for months, during which time many people could become infected and seriously ill.

Purpose: The Lincoln County Pandemic Influenza Response Plan provides guidance to the health and medical community and other partners in health regarding detection, response and recovery from an influenza pandemic. This is a function specific plan that addresses pandemic influenza outbreak or the threat of outbreak and supports Lincoln County's comprehensive emergency plans. The plan is prepared with the knowledge that situations may arise that are more or less significant than planned. Some situations may be unexpected and may not be addressed in this plan.

This plan strives to:

- Define preparedness activities that should be undertaken before a pandemic occurs that will enhance the effectiveness of response measures.
- Describe the coordination, roles and decision-making structure that will incorporate Lincoln County Health Department, the health care system in Lincoln County, other local agencies and state and federal agencies during a pandemic.
- Achieve the following goals:
 - Limit the number of illnesses and deaths
 - Minimize social disruption and economic losses
 - Immunize and/or treat as many individuals as possible
 - Preserve continuity of essential government functions
- Coordinate with the Lincoln County Emergency Preparedness plans and activities and with the plans of state and federal partners.
- Address the unique challenges posed by a pandemic that may necessitate specific leadership decisions and response actions.

Scope & Authority: This plan is limited in scope to events that affect or potentially affect public health. This plan also contains activities that may be conducted during non-emergency phases. The responsibility for activation and implementation of the response portion of this plan is the Health Department Director, Health Officer, Board of Health or appointed designee(s) of these listed individuals and entities.

Situation

There are several characteristics that differentiate a pandemic influenza from other public health emergencies.

- It has the potential to suddenly cause illness in a very large number of people and could easily overwhelm the health care system throughout the nation.
- A pandemic outbreak could also jeopardize essential community services by causing high levels of absenteeism in critical positions in every workforce.
- It is likely that vaccines against the new virus will not be available for six to eight months following the emergence of the virus.
- Basic services, such as health care, law enforcement, fire, emergency response, communications, transportation and utilities, could be disrupted during a pandemic.
- Finally, the pandemic, unlike many other emergency events, could last for several weeks, if not months.

Planning Assumptions

- An influenza pandemic may result in the rapid spread of the infection with outbreaks throughout the world. Communities across the state and the country may be impacted simultaneously.
- There will be a need for heightened global, national and local surveillance.
- Lincoln County may not be able to rely on local mutual aid resources. State or federal assistance to support local response efforts may be limited.
- Antiviral medications may be in short supply. Local supplies of antiviral medications may be prioritized by the Health Officer for use in hospitalized influenza patients, health care workers providing care for patients and other priority groups based on current national guidelines and local community need.
- A vaccine for the pandemic influenza strain will likely not be available for six to eight months following the emergence of a novel virus.
- As vaccine becomes available, it will be distributed and administered by LCHD based on current national guidelines and local community need.
- Insufficient supplies of vaccines and antiviral medicines will place greater emphasis on nonpharmaceutical interventions and public education to control the spread of the disease in the county.
- The number of ill people requiring outpatient medical care and hospitalization could overwhelm the local health care system.
- Hospitals and clinics may have to modify their operational structure to respond to high patient volumes and maintain functionality of critical systems.
- The local health care system may have to respond to increased demands for service while the medical workforce experiences increased absenteeism due to illness.
- Demand for inpatient beds and ventilators may increase and prioritization criteria for access to limited services and resources may be needed.

- Emergency Medical Service responders may face extremely high call volumes for several weeks and may face reduction in available staff.
- The number of fatalities experienced during the first few weeks of a pandemic could overwhelm the resources of Medical Examiner's Office, hospital morgues and funeral homes.
- The demand for home care and social services may increase dramatically.
- There could be significant disruption of public and privately owned critical infrastructure including transportation, commerce, utilities, public safety, agriculture and communications.
- Social distancing strategies aimed at reducing the spread of infections such as closing schools, community centers and other public gathering points or cancelling public events may be implemented during a pandemic based on local community need.
- Some persons will be unable or unwilling to comply with isolation directives. For others, social distancing strategies may be less feasible (for example, populations who live in congregate settings). It will be important to develop and disseminate strategies for infection control appropriate for these environments and populations.
- The general public, health care system, response agencies and elected leaders will need continuous updates on the status of the pandemic outbreak, impacts on critical services, the steps LCHD is taking to address the incident and steps response partners and the public can take to protect themselves.

Roles and Responsibilities

Under the Montana Department of Health and Human Services (DPHHS) Emergency Operations Plan (EOP) Annex M, state authorities outline local, state, and federal health jurisdictions' responsibilities in a pandemic influenza event. The following describes specific responsibilities and roles of LCHD during a pandemic influenza event.

Lincoln County Health Department

- Promote routine vaccination and conduct seasonal influenza vaccination clinics.
- Conduct active surveillance for communicable disease with key surveillance partners
- Provide educational resources to community members including promoting disease prevention and healthy lifestyles.
- Coordinate planning with other community partners to monitor influenza levels in the community as directed by DPHHS's influenza reporting rules.
- Educate the health care system partners, response partners, businesses, community-based organizations and elected leaders about influenza pandemics, expected impacts and consequences and preventive measures including nonpharmaceutical interventions.
- Partner with local clinics and labs to quantify suspected and confirmed flu cases.
- Monitor Health Alert Network (HAN) and CDC news releases for messages regarding influenza activity that identifies location, strains detected, and if any circulating strains are showing resistance to antivirals.

- Communicate CDC and DPHHS surveillance findings and recommendations with key surveillance partners.
- Work with local media members to disseminate infection control education materials to community members.
- Review pandemic plans with local emergency response and healthcare partners to identify a situation-specific plan of action.
- Depending on severity, work with local government officials and administration of care facilities to consider closures of schools, restricting visitation to residents or patients of care facilities, cancelling large community events, and other social distancing techniques.
- Should civil unrest occur, work with local law enforcement regarding security of key infrastructure and educational campaigns for the populace (for example: for traffic control)
- Should the community's need for resources exceed local capabilities, PHEP funds may be used to a certain degree to acquire resources when in communication with DPHHS.
- Should the community's need for resources greatly exceed local capabilities, contact Montana State level PHEP employees to request Strategic National Stockpile resources as directed in the LCHD EMC Plan.
- Utilize Crisis and Risk Communication Plan for public information procedures.

Responsibilities of other Entities in Lincoln County

Lincoln County Health Officer: In order to carry out the purpose of the public health system, in collaboration with federal, state, and local partners, local health officers or their authorized representatives shall take steps to limit contact between people in order to protect the public's health from imminent threats, including but not limited to ordering the closure of buildings or facilities where people congregate and canceling events per MCA 50-2-118.

Lincoln County City-County Board of Health (BOH): In order to carry out the purposes of the public health system, in collaboration with federal, state, and local partners, the local board of health shall identify, assess, prevent and ameliorate conditions of public health importance through epidemiological tracking and investigation, screening and testing and isolation and quarantine measures. The BOH may propose for adoption by the local governing body regulations that do not conflict with rules adopted by the department for the control of communicable diseases.

Governing Body: If a directive, mandate, or order is issued by the local health officer in response to a declaration of emergency or disaster by the governor as allowed in **10-3-302** and **10-3-303** or by the principal executive officer of a political subdivision as allowed in **10-3-402** and **10-3-403**, it remains in effect only during the declared state of emergency or disaster or until the governing body holds a public meeting and allows public comment and the majority of the governing body moves to amend, rescind, or otherwise change the directive, mandate, or order.

Healthcare Partners

- Contribute to a task force and participate in an organized response plan facilitated by LCHD to maximize the health care system's ability to provide medical care during a pandemic.
- Essential functions this group will address:
 - Direction and control – coordinate with the LCHD
 - Surveillance and detection – coordinate with Lincoln County Communicable Disease Coordinator to develop enhanced local influenza surveillance activities.
 - Worker safety and infection control – share information with LCHD to enhance infection control plans to triage and isolate infectious patients and protect staff.
 - Triage and patient care – share response plans that address medical surge capacity to sustain health care delivery capabilities when routine systems are overwhelmed.
 - Continuity of operations – develop approaches on how healthcare providers can continue to operate with reduced work force due to illness.

Schools

- The local school superintendents will appoint a representative to sit on the task force. Schools may be closed for an extended period in response to a developing pandemic and based on local community need.
- School nurses represent a possible source of medical resources for surge during a pandemic.

Managers of Critical Infrastructure and Key Resources

- Critical resources including water purification facilities, waste disposal facilities, sewage plants and public safety facilities, could be jeopardized. Managers of critical infrastructure and key resources should plan for staff shortages and ensure that supply chains are as robust as possible.
- Key resources include financial and banking services and food and grocery suppliers. Managers of key resources should be sure that emergency plans support operations with a diminished workforce and interrupted supply chains.

Medical Examiner's/Coroner's Office

- Lead mass fatality planning and response efforts.
- Coordinate with and support hospital regarding mass fatalities planning and response.
- Incorporate funeral home directors into planning efforts for pandemic response.

Concept of Operations

General Concepts:

- LCHD and all response partners will operate under the Incident Command System (ICS) as further defined by the Lincoln County Emergency Operations plan throughout the duration of

the pandemic response. Activation of this plan will be initiated by the Health Officer or designee in consultation with the City-County Board of Health for Lincoln County.

- Response actions will emphasize reducing the spread of infection and providing frequent communication and education to the public about the pandemic, the public health response and steps the public can take to reduce the risks of infection.

Direction and Control: LCHD is the lead agency in coordinating the local health and medical response to a pandemic with local, state and federal agencies and officials. LCHD will activate ICS and incident command to coordinate the county-wide public health and medical response during a pandemic. These activities are described in Lincoln County's Emergency Operation Plans.

Public Information/Risk communications: The general public, health care system, response agencies and elected leaders will need continuous updates on the status of the pandemic outbreak, impacts on critical services, the steps LCHD is taking to address the incident and steps response partners and the public can take to protect themselves. The Crisis and Risk Communication Plan will be used for public information. Information will be shared with key partners through regular email updates and regular (weekly or daily depending on the situation) virtual meetings to share real time updates.

Surveillance and Contact Tracing: Disease surveillance, case investigation and contact tracing will be conducted as described in the Communicable Disease Response Plan.

Resource Providers: Should additional resources be needed; requests should be made to Lincoln County Emergency Management Agency.

Vaccine and Antiviral Medications: Vaccines serve as one of the most effective preventative strategies against outbreaks of influenza, including pandemics. However, dissemination of an effective influenza vaccine during a pandemic faces several challenges:

- A pandemic strain could be detected at any time and production of a vaccine could take six to eight months after the virus first emerges.
- The target population for vaccination may ultimately include the entire United States population.
- It is expected that demand for vaccine may initially outstrip supply and administration of limited vaccine will need to be prioritized based on national guidelines, in consultation with the MT DPHHS and based on local situation.
- Antiviral medications may be useful for controlling and preventing influenza prior to the availability of vaccines, however, there is a limited supply of antiviral drugs effective against pandemic strains.

Non-Pharmaceutical Interventions: For more detail see Lincoln County Health Department's Non-Pharmaceutical Intervention Plan

Isolation and Quarantine:

- During all phases of a pandemic, persons ill with influenza will be directed to remain in isolation in health care settings or at home, to the extent possible.
- Once person-to-person transmission is established locally, quarantine of individuals exposed to influenza cases may be of limited value in preventing further spread of the disease.
- Quarantine of contacts of influenza cases may be beneficial during the earliest phases of a pandemic and in response to an influenza virus that has not achieved the ability to spread easily from person-to-person.

Social Distancing: Social distancing strategies are non-medical measures intended to reduce the spread of disease from person-to-person by discouraging people from coming in close contact with each other.

- These strategies could include:
 - closing public and private schools,
 - minimizing social interactions at colleges and libraries,
 - closing non-essential government functions,
 - implementing emergency staffing plans for the public and private sector including increasing telecommuting, flex scheduling and other options and
 - closing public gathering places except churches
- Implementation of social distancing strategies in Lincoln County may create social disruption and significant long-term economic impacts. It is unknown how the public will respond to these measures. Decisions may be made jointly or independently by the health officer and the BOH regarding social distancing as authorized by MCA 50-2-116 and MCA 50-2-118.
- The health officer or designee may review social distancing strategies and current epidemiology and coordinate with leadership of towns in Lincoln County regarding social distancing actions that should be implemented to limit the spread of the disease.
- The health officer will also consult with local school superintendents and school boards regarding the closing of any public and private schools, colleges and libraries in Lincoln County.
- If social distancing strategies are initiated, the health officer will monitor the effectiveness of social distancing in controlling the spread of disease and will advise appropriate decision makers when social distancing strategies should be relaxed or ended.

Other Prevention Strategies: Healthy habits to help protect against flu from CDC (CDC, 2021):

- Avoid close contact: Avoid close contact with people who are sick. When you are sick, keep your distance from others to protect them from getting sick too.
- Stay home when you are sick: If possible, stay home from work, school, and errands when you are sick. This will help prevent spreading your illness to others.

- Cover your mouth and nose: Cover your mouth and nose with a tissue when coughing or sneezing. It may prevent those around you from getting sick. Flu viruses spread mainly by droplets made when people with flu cough, sneeze or talk.
- Clean your hands: Washing your hands often will help protect you from germs. If soap and water are not available, use an alcohol-based hand rub.
- Avoid touching your eyes, nose or mouth: Germs can be spread when a person touches something that is contaminated with germs and then touches his or her eyes, nose, or mouth.
- Practice other good health habits: Clean and disinfect frequently touched surfaces at home, work or school, especially when someone is ill. Get plenty of sleep, be physically active, manage your stress, drink plenty of fluids, and eat nutritious food.

Public Health Services: During a pandemic, LCHD may suspend routine department operations to provide staff for flu clinics, triage centers and telephone triage services. The Health Officer, Director or Public Health Manager will assess the need to reprioritize department functions and will direct the mobilization of staff to meet emerging needs of the pandemic.

Recovery: Recovery from an influenza pandemic will begin when it is determined that adequate supplies, resources and response system capacity exists to manage ongoing activities without continued assistance from pandemic response systems.

- In consultation with the healthcare providers and local elected leaders, the health officer will recommend specific actions to be taken to return the health care system and government functions to pre-event status.
- LCHD will assess the impact of the pandemic on the community's health as measured by morbidity and mortality and report findings to all response partners.
- Preparedness program may conduct an after-action evaluation of the pandemic response. The evaluation may include recommendations for amendments to this plan.

Plan Maintenance

This plan is reviewed and signed by the Health Officer and Board of Health Chair or designee(s) annually.