

HEALTH EMERGENCY MANAGEMENT

update



PANDEMIC (H1N1) 2009 IS NOT OVER YET



After an incredibly hectic three months it appears the spread of Pandemic (H1N1) 2009 (name change three) is slowing down. DHB's throughout New Zealand are down scaling their pandemic response and "business as usual" is getting the attention it so badly needs. However there is a clear message from the Ministry of Health (MoH) that we should not become complacent and assume it is the last we have seen of this unpleasant virus with still so many unknown quantities. The MoH are adamant that a re-emergence is very likely and we should be prepared to upscale to full response at any time.

For MidCentral District Health Board (MDHB) it is time to take a breath and review what the last three months have been about. Team work, communication, resource sharing and time management have all been vital components in ensuring the successful activation and daily running of our Emergency Operations Centre (EOC). External communication and information from organisations and GP practices has also been crucial in assessing the extent of the risks in our community. Acknowledgement of this support is essential especially in light of the extra workloads placed on everyone.

What went well and what could we do better? These are the questions we will be asking ourselves over the coming months as we review our plans and ensure we are fully prepared for the next wave... re-emergence... or whatever this virus may present to us!

For organisations in our community it is also a good time to review Business Continuity Planning, personal preparedness in the workplace and personal planning at home. But no matter what... don't throw away that hand sanitiser yet... you're going to need it.

BUSINESS CONTINUITY PLANNING



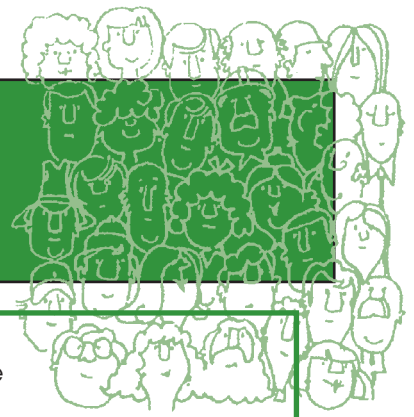
The Gisborne Earthquake in 2007 is a timely reminder to us all to update our insurance policies. Over 30 million dollars worth of insurance claims were processed from this earthquake.

Although a pandemic is a different type of disaster, the effects on our economy can be just as catastrophic. Now is the time to make sure your Business Continuity Planning is up to date and covers all the impacts disaster events will have on your business. This is particularly important for health sector businesses as they are so crucial in supporting communities.

For free assistance with Continuity Planning for your business, please contact PHO Planners from the MoH:

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PUBLIC HEALTH UPDATE ON PANDEMIC (H1N1) 2009



Public Health Services are part of all DHBs and are tasked with protecting and improving the health of the community within their DHB. Responding to the threat of disease outbreaks, such as an influenza pandemic, is core business for public health staff. The key responders within the service are health protection officers, medical officers of health, public health nurses, administration and support staff, and other key workers such as health promoters.

Health protection officers and medical officers of health are guided by key pieces of legislation to respond to pandemic threats – predominantly the International Health Regulations 2005 and The Health Act 1956. This legislation allows border control measures (eg screening of incoming passengers for illness), use of measures such as recommending isolation for sick people and quarantine for contacts of sick people to prevent the spread of illness, and collection of information about cases of influenza to understand the nature of the disease, how best to control the spread of disease and to track the impact of illness on the community.

During the recent response to Pandemic (H1N1) 2009, public health staff were also involved in communicating to healthcare providers and the community on how to manage influenza illness, disseminating guidance provided by the Ministry of Health, and liaising with other key stakeholders such as educational institutions and care facilities around management of influenza illness within institutions. Public Health has a key role during the Keep It Out and Stamp It Out phases and then supports the DHB Emergency Operations Centre during the Manage It phase (when disease is confirmed as circulating in the community).

The response now is ongoing monitoring and surveillance of influenza within our region and nationally to ensure we do not miss any changes in the pandemic strain of influenza from what we currently know about it. We know that for most people this is a relatively mild illness although those at

higher risk of more severe illness include pregnant women and those with chronic underlying health conditions. The virus has tended to affect younger ages more than seasonal influenza, and those people identifying as Maori or Pacific ethnicity have had higher rates of illness and hospitalisation.

The experience of New Zealand hospitals and intensive care units (ICUs) is reflected in an update on the impact of pandemic influenza released by the World Health Organization (WHO). New Zealand ICUs have reported that between 12–15% of patients admitted to hospital with pandemic influenza require treatment in an intensive care unit and this is similar to the rates experienced in other countries.

WHO is monitoring outbreaks from different parts of the world to make some tentative conclusions about how the pandemic might evolve in the coming months. The clinical picture of pandemic influenza is largely consistent around the world – the majority of patients continue to experience a mild illness.

WHO is advising countries in the northern hemisphere to prepare for a second wave of pandemic spread. They advise countries in temperate parts of the southern hemisphere to remain vigilant. International experience has shown that localised “hot spots” of increasing transmission can continue to occur even when the pandemic has peaked at the national level – hence ongoing monitoring locally and nationally. The H1N1 virus is now the dominant influenza strain in most parts of the world, and is expected to remain so during the coming northern hemisphere influenza season.

Given some of the uncertainties around this strain of influenza and what to expect in the coming months and the influenza season next year, it will be important to reflect and learn from our recent response to this influenza pandemic. Pandemic planning for public health services and the health sector in general is just as important as ever.