

STATE OF TEXAS, STATE OPERATIONS CENTER (SOC)

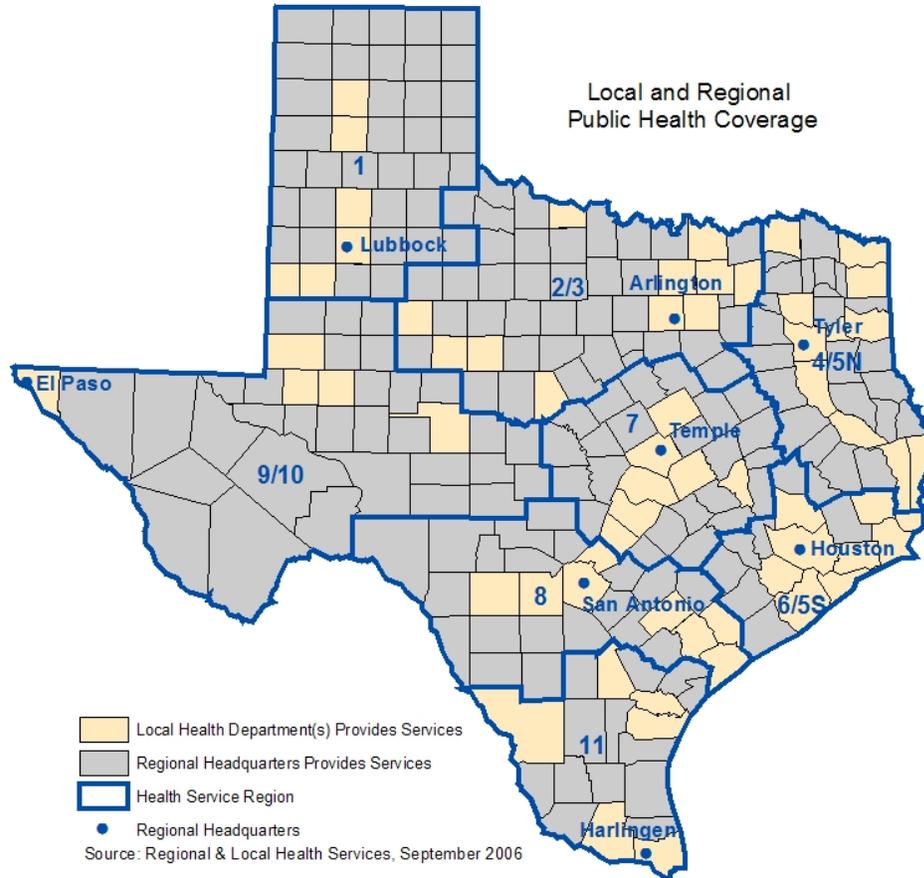
SUBJECT: H1N1 Influenza Preparedness

SITUATION REPORT # 9

**DATE AND TIME COVERED: Thursday, October 29, 2009 through
Thursday, November 5, 2009**

CURRENT SITUATION: During week 42, influenza activity increased in the U.S. Forty-eight states reported geographically “widespread” influenza activity, Guam and two states reported regional influenza activity, one state, the District of Columbia and Puerto Rico reported local influenza activity, and the U.S. Virgin Islands did not report. From August 30 through October 24, 2009, 12,466 laboratory-confirmed influenza associated hospitalizations, 530 laboratory-confirmed influenza associated deaths, 25,985 pneumonia and influenza syndrome-based hospitalizations, and 2,916 pneumonia and influenza syndrome-based deaths, were reported to the Center for Disease Control (CDC). During week 42, 7.1% of all deaths reported through the 122-Cities Mortality Reporting System were due to pneumonia and influenza (P&I). This percentage was above the epidemic threshold of 6.6% for week 42. Including week 42, P&I mortality has been above threshold for four consecutive weeks. Severe disease continues to be seen more often in individuals with underlying health conditions such as lung disease, heart disease, immunosuppression, pregnant women, and in those where treatment has been delayed. 8,268 (42.1%) of specimens tested by U.S. World Health Organization (SHO) and National Respiratory and Enteric Virus Surveillance System (NREVSS) collaborating laboratories and reported to CDC/Influenza Division were positive for influenza. All sub typed influenza A viruses being reported to the CDC were 2009 influenza A (H1N1) viruses. The proportion of deaths attributed to pneumonia and influenza (P&I) was above the epidemic threshold. Twenty-four influenza-associated pediatric deaths were reported to CDC during week 42. Nineteen of these deaths were associated with 2009 influenza A (H1N1) virus infection and three were associated with influenza A virus, for which subtype is undetermined. These deaths occurred between August 23 and October 24, 2009. One death reported during week 42 occurred during the 2008-2009 season. Since August 3, 2009, CDC has received 74 reports of influenza-associated pediatric deaths that occurred during the current influenza season (nine deaths in children less than 2 years old, nine deaths in children 2-4 years old, 27 deaths in children 5-11 years old, and 29 deaths in individuals 12-17 years old). Sixty-five of the 74 deaths were due to 2009 influenza A (H1N1) virus infections, and the remaining nine were associated with influenza A virus for which the subtype is undetermined. A total of 114 deaths in children associated with 2009 H1N1 virus have been reported to CDC. Nationwide during week 42, 8.0% of patient visits reported through the U.S. Outpatient Influenza-like Illness Surveillance Network (ILINet) were due to influenza-like illness (ILI). This percentage is above the national baseline of 2.3%.

The influenza activity level for Texas for the week ending October 24, 2009 was “widespread”. During week 42, 670 (23.5%) of specimens tested by the NREVSS laboratories in Texas were positive for influenza. The proportion of visits for influenza-like illness (ILI) as reported by Influenza-like Illness Surveillance Network (ILINet) providers in Texas was above the regional baseline during week 42. Thirteen hospital laboratories and public health agencies across Texas reported conducting a total of 2,851 influenza tests to NREVSS, sponsored by the Centers for Disease Control and Prevention (CDC). Health Service Regions (HSRs) 6/5S and 9/10 reported the same level of flu activity compared to week 41. HSRs 1, 2/3, 4/5N, 7, and 8 reported a decreased level of flu activity compared to week 41. The vast majority of cases seen continue to be mild to moderate outpatient disease. Severe disease continues to be seen predominately in individuals with underlying health conditions. Since the beginning of this pandemic in April, Texas has had a total of 113 confirmed deaths (19 in the last week). There have been a total of 24 H1N1-related deaths in Texas.

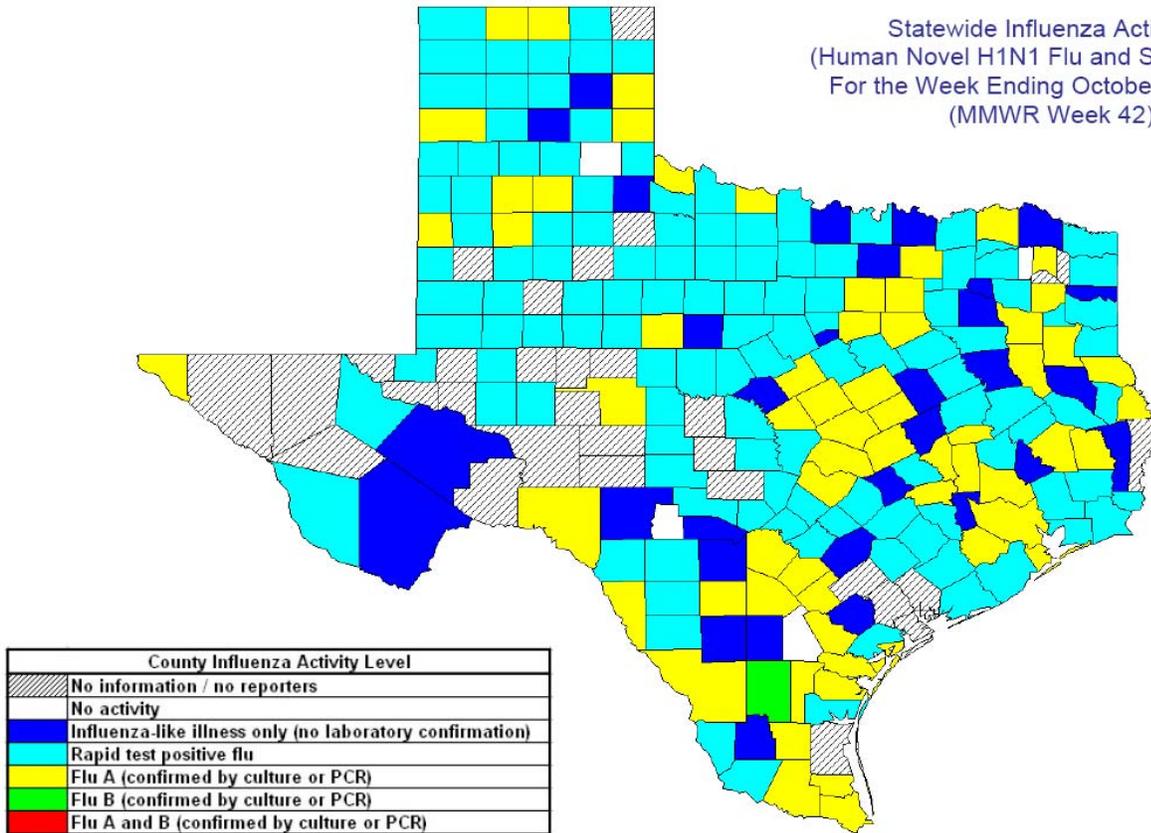


¹ Influenza activity level corresponds to current MMWR week only and does not reflect previous weeks' activity.

² The majority of influenza cases are not reportable by law to the Texas Department of State Health Services. This map contains data from sentinel sites and does not represent all influenza cases.

Over 360,000 courses of antiviral have been sent to pharmacies, Federally Qualified Healthcare Centers (FQHCs), and local and regional health departments across Texas. The State and Federal antiviral cache is being distributed to pharmacy clinics and community health centers every week. 1,200 pharmacies and clinics have received antiviral, and DSHS expects to reach 1,500 in the coming weeks. Texas received 1,020 cases of suspension for children. DSHS has advised that it is very important that the State uses available supplies appropriately. It is recommended that antiviral be used for those in high-risk groups for severe illness or complications or those who are hospitalized. Antiviral should NOT be used as a preventive measure in healthy individuals with no other risk factors.

Statewide Influenza Activity^{1,2}
 (Human Novel H1N1 Flu and Seasonal Flu)
 For the Week Ending October 24, 2009³
 (MMWR Week 42)



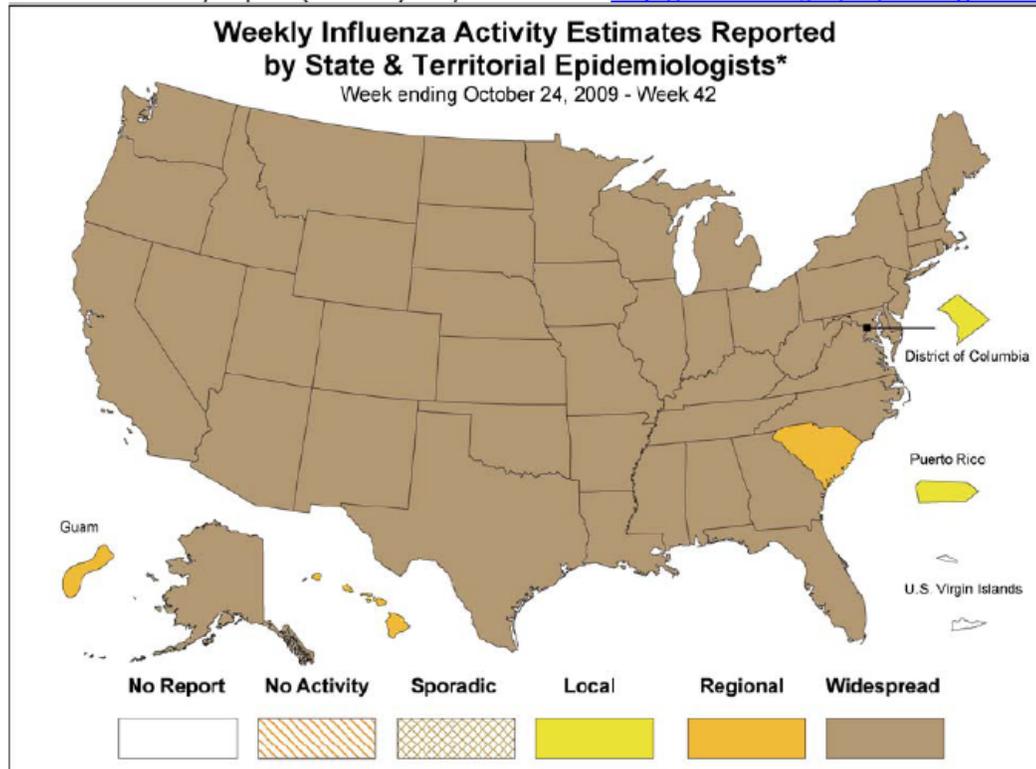
¹Influenza activity level corresponds to current MMWR week only and does not reflect previous weeks' activity.

²The majority of influenza cases are not reportable by law to the Texas Department of State Health Services. This map contains data from sentinel sites and does not represent all influenza cases in the state.

The Texas Department of State Health Services continues to order its full allocation of H1N1 vaccine as quickly as possible, with more than 1.5 million doses ordered as of Thursday, October 29, 2009. More orders and shipments will follow as doctors and clinics confirm their orders with DSHS. Texas should receive about 13 million doses of vaccine by the end of January. Vaccine has been allotted to over 5,000 providers statewide. The national supply still is not adequate to meet demand. Texas plans to allocate more vaccine to other groups as it becomes more widely available. Approximately 12,000 Texas providers have registered to receive the vaccine.

National Influenza Activity Map

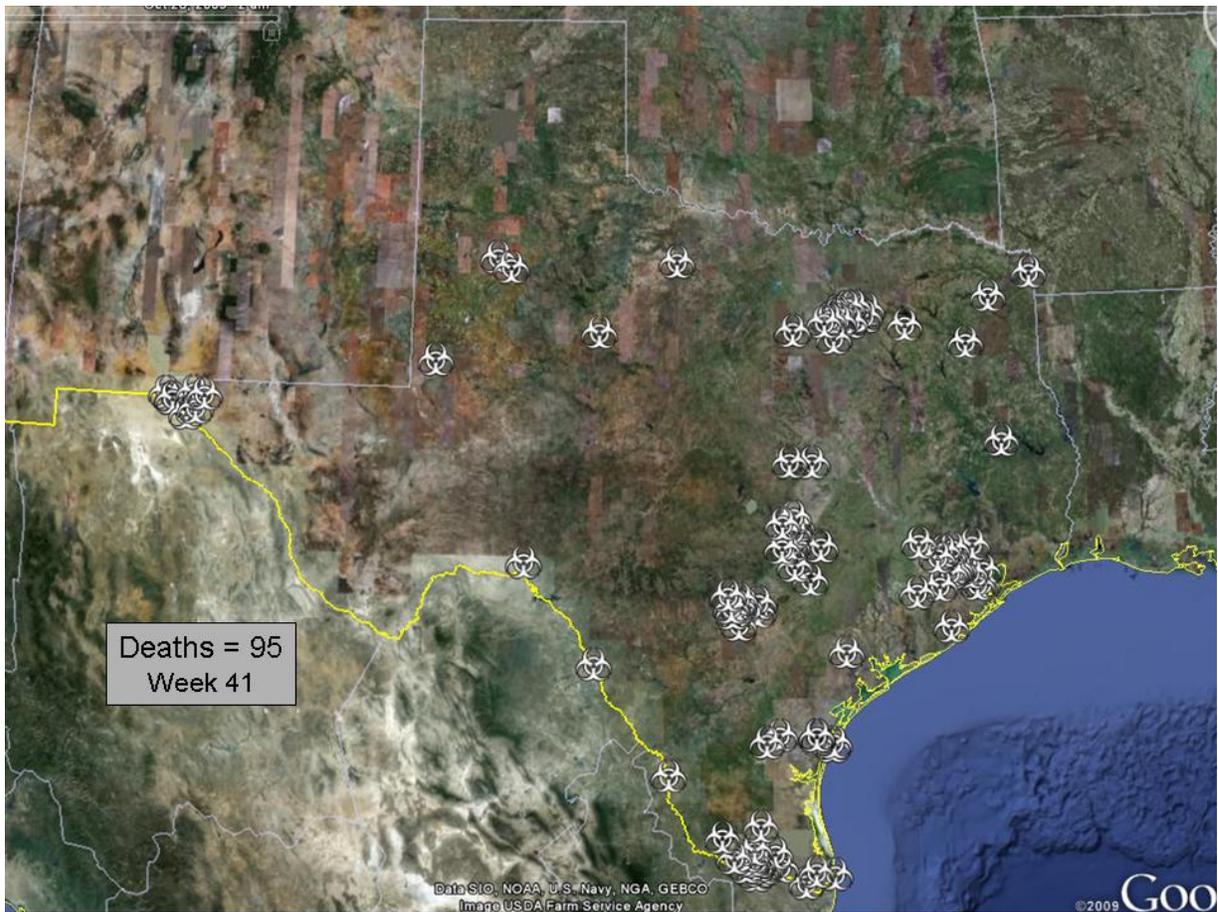
The current U.S. flu weekly report (FluView) may be found at <http://www.cdc.gov/flu/weekly/fluactivity.htm>.



* This map indicates geographic spread & does not measure the severity of influenza activity

For more information on flu surveillance activities in the State of Texas, please visit the following website:
<http://www.dshs.state.tx.us/idcu/disease/influenza/surveillance/>

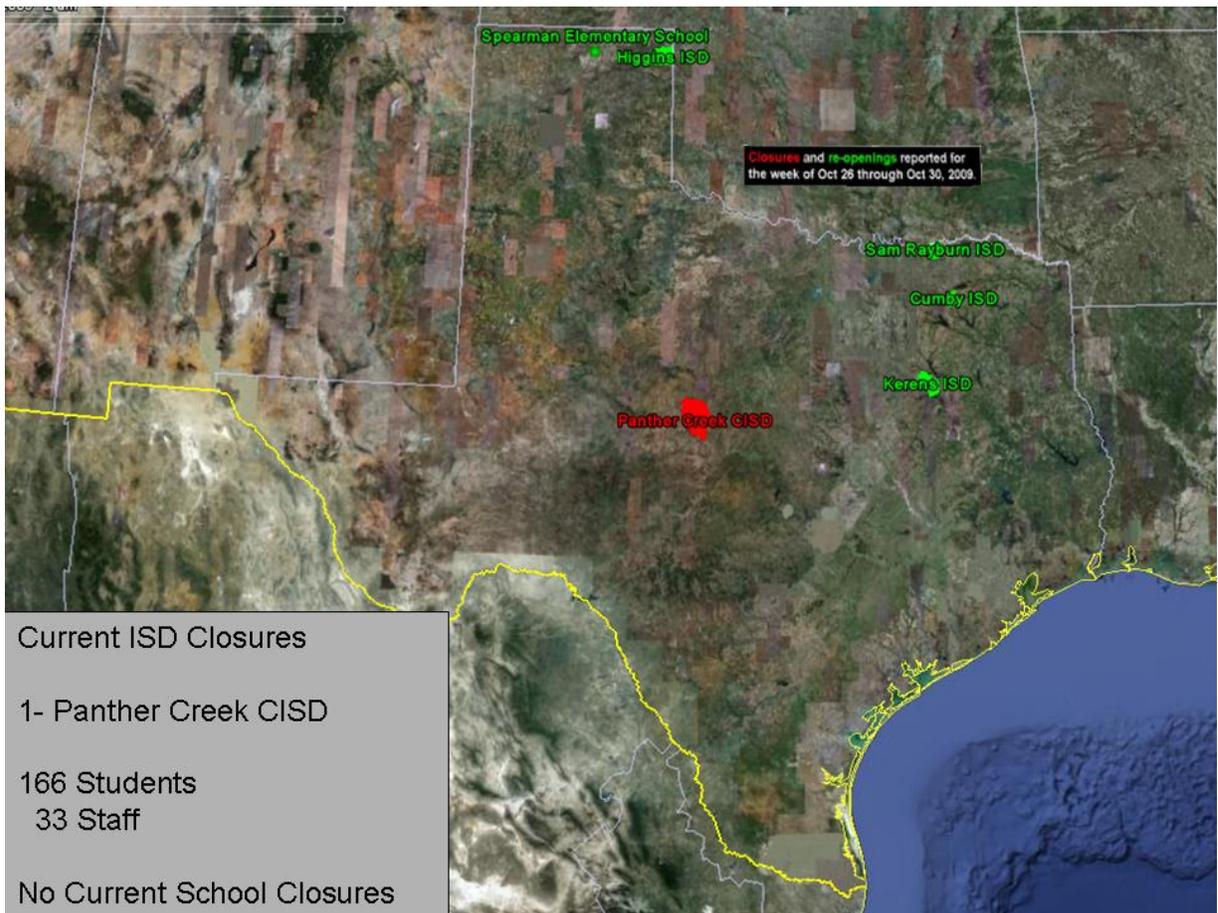
As of Week 42, there have been 113 confirmed fatalities caused by H1N1.
Map of H1N1 deaths in Texas, as of November 5, 2009.



Tarrant County: Tarrant County Public (TCPH) reported its sixth flu-related death. A Tarrant County male in his late 50s died of a flu-related illness last month. Laboratory results confirmed that he had the H1N1 influenza. The hospital provided notification of the death to TCPH on Tuesday. The deceased also was in the CDC's target groups recommended to receive the H1N1 vaccine. (TCPH, RLO Sub 1A)

For the seasonal or H1N1 flu information in Tarrant County, check the TCPH website at <http://health.tarrantcounty.com> or call the department's customer service phone line at 817-321-4700.

County Breakdown of School Closures and Re-openings due to High Absenteeism related to Flu-like Illnesses and Accompanying Map.



Coleman/Runnels Counties: Panther Creek CISD re-opened on Monday, November 2, 2009. (TEA)

2-1-1 Texas: During the week of October 21-27, 2009, 2-1-1 Texas took a total of 7,851 calls. 5,025 calls were for Information and Referral (I&R) and 2,826 calls were for the Medical Call Center. Primary referrals (met needs) were for antiviral information and limited vaccination clinic information. Primary unmet needs were for vaccine information (in communities which have not yet announced public clinics). Houston, Dallas, and Austin continue to be the cities generating the highest call volume.

Texas AgriLife Extension Service (ALEXT): To support the Department of State Health Services H1N1 public information and education, ALEXT has activated its public health educators who serve as Family and Consumer Sciences County Extension agents across all rural and urban Texas counties and Extension specialists in the Family Development and Resource Management Department in College Station. The agency has also activated animal science, veterinary medicine and agricultural communications specialists to support Texas Animal Health Commission, Texas Department of Agriculture

and the Texas pork industry regarding public and animal health issues and best bio-security practices related to H1N1.

Department of State Health Services (DSHS): DSHS reported that there has been a tightening of supply with certain types of personal protection equipment (PPE) such as N95 masks. CDC guidance states that health care workers who are in close contact with patients suspected or confirmed to have 2009 H1N1 influenza should wear a fit-tested, disposable N95 respirator. Hospitals may be running into problems meeting CDC guidelines because the commercial pipeline is not sufficient to meet demand fully. DSHS is working to support hospitals and providers to ensure any shortages in PPE can be addressed from their stockpile. Distribution of needed equipment and finalization of distribution plans should be done in early November.

In order for providers to obtain vaccine, they must follow the registration and ordering processes outlined in the memorandum on the DSHS website. This memorandum will be updated as needed and posted on www.TexasFlu.org. Registration and ordering processes have been set up on an online system, and ongoing updates to registered providers will be communicated via email. The DSHS call center has received over 10,000 inquiries from the general public to date. Almost 8,000 calls have been from providers, schools, businesses, pharmacies, day care and other facilities. To date, over 12,000 providers have registered to receive the vaccine. Over 5,000 providers have been allotted vaccine. Providers who do not have internet access or experience difficulties with the online site, can contact the DSHS H1N1 provider call center toll-free at (877) 623-6274, Monday through Friday, 8:00 AM through 5:00 PM, Central Standard Time. TV and radio ads prepared in both English and Spanish are airing statewide and are posted to www.TexasFlu.org.

Seasonal vaccines are available in injection and nasal spray form, recommended for those who are 6 months and older, and takes about two weeks to become effective. It is highly recommended that the following groups be vaccinated as soon as possible:

- Children aged 6 months up to their 19th birthday
- Pregnant women
- People 50 years of age and older
- People of any age with certain chronic medical conditions
- People who live in nursing homes and other long-term care facilities
- People who live with or care for those at high risk for complications from flu, including:
 - Health care workers
 - Household contacts of persons at high risk for complications from the flu
 - Household contacts and out of home caregivers of children less than 6 months of age (these children are too young to be vaccinated)

Information concerning seasonal influenza and H1N1 is available on the Department of State Health Services website at www.texasflu.org.

Texas Education Agency (TEA): TEA reported widespread incidents of flu; however, no campuses or school districts are closed. Waiver applications for missed instructional days and low attendance days below 90% of the average from last year are available. For additional information on waivers, contact the TEA Waivers Division at 512-463-5917. Downloadable flu prevention posters and flyers are available in English and Spanish on the TEA H1N1 website. Any information concerning schools can be found at www.tea.state.tx.us. This website is updated daily at 9:00 a.m., 12:00 p.m., and 5:30 p.m.

Texas Higher Education Coordination Board (THECB): Is in communication with the Texas Department of State Health Services and the Texas Division of Emergency Management concerning the 2009 Novel H1N1 outbreak and will continue to monitor the situation. THECB has begun the development of

emergency contact lists for key personnel in all Texas Institutions of Higher Education. THECB urges institutions to submit their single contact person for the emergency contact list so they may forward them important communications. THECB reported no higher education institution closings. Last week, THECB posted a link to “Blueprint for Pandemic Flu Preparedness Planning for Colleges and Universities” on their website. This document was developed with support from the Gallagher Higher Education Practice Group, and also contains a World Health Organization (WHO) checklist for influenza pandemic preparedness planning.

Southern Association of Colleges and Schools (SACS): In the event that a public institution of higher education closes temporarily due to a concern regarding public health, the institution may request that the Southern Association of Colleges and Schools (SACS) grant an exemption from the contact hour standards. However, SACS has indicated that it is up to the individual institution to ensure positive student outcomes and that the letter is not required. If an institution chooses to submit the letter, it should contain sufficient information for SACS to ensure that the educational standards and objectives of the courses will not be unduly compromised by the limited number of contact hours. If an institution remains closed for an extended period of time, the Coordinating Board will work with the institution and SACS to ensure the best possible outcome for the students. An institution which chooses to submit the letter should address it to their institutional liaison from SACS or to the President of SACS.

Texas Department of Agriculture (TDA): Continues to monitor animal/livestock health and food safety issues. TDA urges School Administrators to obtain a waiver request to continue school breakfast and lunch supplemental programs during periods of school closure due to H1N1. This special program allowance may be invoked only upon the declaration of a public health emergency. To date, TDA has received applications for waivers from 188 School Feed Authorities (SFAs) for 2,766 feeding sites. None of these ISDs have asked to use their waivers. To assist school districts with the application process, TDA has sent information to the schools. Texas Division of Emergency Management strongly urges local officials to contact their school administrators about applying for waivers for the “Square Meals” program, citing previous successes of the program in Texas. The forms and guidance SFAs and COs will need to ensure their schools can continue providing meals in the event of an H1N1-related closure are located on the TDA Food and Nutrition website at www.squaremeals.org/H1N1. A waiver request and agreement addendum, if applicable, must be received and approved by TDA prior to meal service to allow for meal reimbursement. The forms must be completed and returned to TDA as soon as possible. Any SFA or CO requiring assistance in completing the forms can contact the TDA Food and Nutrition Division at 1-877-TEX MEALS.

Texas Animal Health Commission (TAHC): TAHC continues to work with DSHS, the Texas pork industry, and sister agriculture agencies on issues concerning public and animal health issues related to the H1N1 Flu. TAHC has response protocols in place and is also providing bio-security protocols through public information channels.

Information concerning seasonal influenza and H1N1 can be found at the below listed public web sites:

Public Health Information:

www.texasflu.org (Department of State Health Services)
www.cdc.gov/h1n1flu (Centers for Disease Control & Prevention)

Texas Education Agency Information:

www.tea.state.tx.us
www.tea.state.tx.us/waivers/waiverapps.html (Waiver Applications for Missed Instructional days and low attendance information)
<http://flu.gov/plan/school/>

Food Safety:

www.texaspork.org/News.htm (Information concerning pork safety)

School Nutrition Programs:

http://www.squaremeals.org/fn/render/parent/channel/0,1253,2348_2380_29978_0,00.html#29978

Higher Education Information:

The following guidance and resources for colleges and universities during the 2009-2010 academic year, is provided by the federal Centers for Disease Control and Prevention (CDC):

- [Guidance for Responses to Flu for Institutions of Higher Education during the 2009-2010 Academic Year](#)
- [Technical Report on CDC Guidance for Responses to Flu for Institutions of Higher Education during the 2009-2010 Academic Year](#) - *detailed explanations of the strategies in the above guidance*
- [Preparing for the Flu: A Communication Toolkit for Institutions of Higher Education](#) - *information and communication resources to help students, faculty, and staff implement recommendations from the above guidance*

2. AREAS AFFECTED BY EVENT: Statewide

3. RESPONDING AGENCIES/ORGANIZATIONS AND RESOURCES COMMITTED:

| Agency/Organization | Resources Committed |
|---|---|
| Texas Department of State Health Services (DSHS) | Multi-Agency Coordination Center (MACC) Activated |
| Texas Education Agency (TEA) | Assisting Independent School Districts |
| Texas Animal Health Commission(TAHC) | Monitor Livestock health |
| Texas Department of Agriculture | Monitor Livestock and feed production/School Nutrition Program Guidance for Independent School Districts during School Closures due to H1N1 |
| Texas Higher Education Coordinating Board (THECB) | Assisting Higher Education Institutions |
| Texas AgriLife Extension Service (ALEXT) | Public Health Educators, Animal Science, Veterinary Medicine and Agricultural communications. |
| 2-1-1 Texas | Call Center |

4. CASUALTIES: 113 deaths in the State.

5. EVACUATIONS: None

6. SHELTERS: None

COMMENTS:

The Texas Division of Emergency Management continues to monitor the situation and will issue additional reports as necessary. The State Operations Center will conduct the next conference call on Wednesday, November 11, 2009 at 10:00 a.m. (CDT) to provide maximum situational awareness. The SOC is at Level I (Emergency Conditions) to support border security operations.

The four levels of SOC activation are:

- Level I (Emergency Conditions)
- Level II (Escalated Response Conditions)
- Level III (Increased Readiness Conditions)
- Level IV (Normal Conditions)

This Situation Report can be found on the DEM Homepage at www.txdps.state.tx.us/dem

Jack Colley
Chief, Texas Division of Emergency Management