

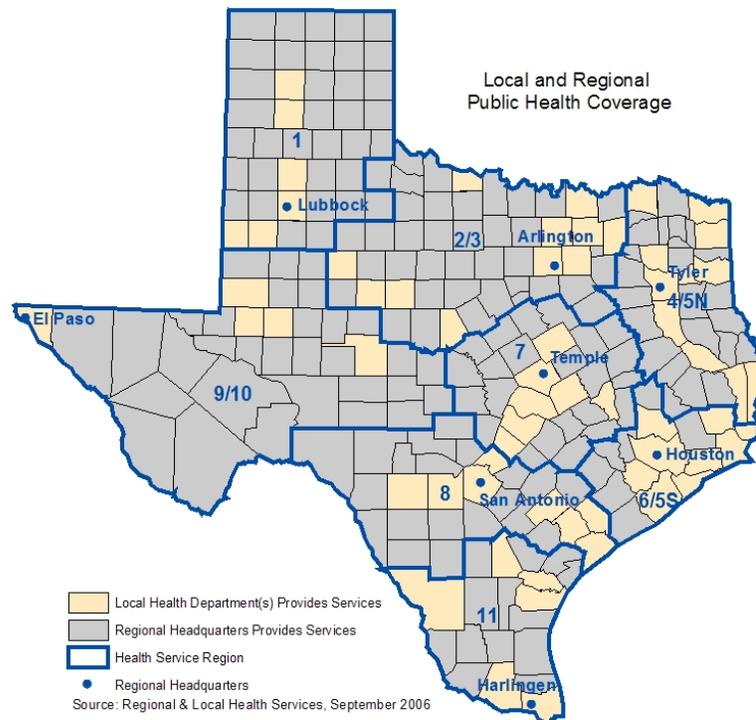
STATE OF TEXAS, STATE OPERATIONS CENTER (SOC)

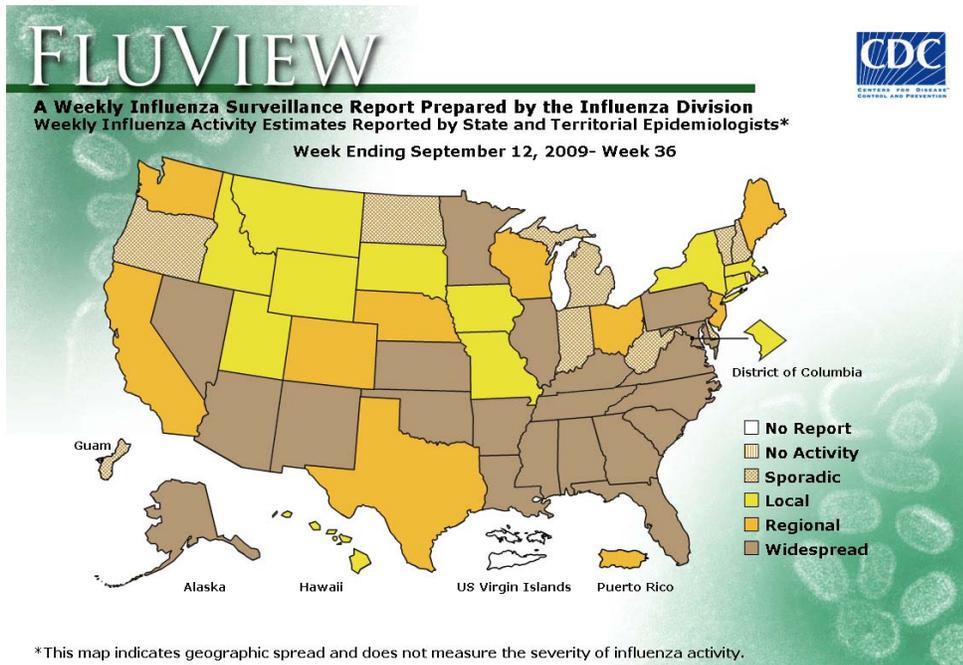
SUBJECT: H1N1 Influenza Preparedness

SITUATION REPORT # 3

DATE AND TIME COVERED: Thursday, September 17, 2009 through Thursday, September 24, 2009

CURRENT SITUATION: During week 36, influenza activity increased in the United States. Ninety-nine percent of 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 below the epidemic threshold. The proportion of outpatient visits for influenza-like illness (ILI) was above the national baseline. Twenty-one states reported geographically widespread influenza activity. Texas is one of nine states that reported regional influenza activity. Data from influenza surveillance providers indicate Texas currently has regional influenza; however, ILI is significantly higher than normal for this time of year. As of today, and for week 37, the flu report will be updated to reflect Texas is classified as widespread. Health Service Regions (HSRs) 1, 2/3, 4/5N, 6/5S, 7, 9/10, and 11 reported an increased level of flu activity compared to week 35. HSR 8 reported the same level of flu activity compared to week 35. 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 44 deaths. Two influenza-associated pediatric deaths were reported, and both were associated with H1N1 virus infection.





Texas currently has 2.245 million courses of antivirals (1.77 million Tamiflu and 470,000 Relenza) from an original amount of 2,416,360 courses. A shortage of Tamiflu supplies has been reported nationally, but manufacturers are reporting they are operating at maximum production at this point. DSHS is monitoring this closely and advises that this will not affect the antiviral stock already in the State or the rest of the Strategic National Stockpile (SNS). 206 Texas counties currently have antivirals available and DSHS is working to expand the distribution system throughout the State for the uninsured and underinsured. Shipments of antivirals to five additional retail pharmacy chains, which is comprised of 900 individual stores, will occur this week. Stock should be on their pharmacy shelves next week. Antivirals also have been shipped to the Federally Qualified Health Centers (FQHCs) throughout the State. There are over 60 FQHCs participating, and approximately half already have the state stock in their inventory.

Vaccine shipments will begin next week. The State can request a maximum of 436,00 doses on September 30th. The specifics of who will receive the vaccine will be finalized next week. Clinical trials so far indicate that only a single dose of H1N1 vaccine will be required for adults. Children under age 10 are expected to require two doses. Children under age 9 who have never had a seasonal flu shot will require two seasonal flu shots AND two shots of the H1N1 vaccine. There will be an ongoing monitoring of its safety after its release to ensure any issues are identified early. Approximately 3.4 million doses will be shipped to Texas by October 15th, followed by approximately 1.5 million doses per week. Some may be shipped next week, however, there is no report on the amount of vaccines the State may receive. DSHS will be coordinating the distribution of the novel H1N1 vaccine. As previously reported, the vaccine will not be distributed via the usual private sector channels, but will be made available through DSHS only.

DSHS has advised that it is very important that the State uses available supplies appropriately. It is recommended that antivirals be used for those in high-risk groups for severe illness or complications or those who are hospitalized. Antivirals should NOT be used as a preventive measure in healthy individuals with no other risk factors. Chemoprophylaxis is targeted to close contacts of cases that are at high risk or complications from novel H1N1 influenza or health care personnel, public health workers, educators, and first responders with unprotected direct exposure to patients with novel H1N1 influenza.

Tarrant County: Tarrant County Office of Emergency Management (TCOEM) – Week of 9/14/09 – 09/18/09

In recent news, there have been 2 pediatric deaths in Dallas County related to H1N1 Influenza. As a result, the public is becoming increasingly concerned. Although tragic, the number of deaths due to the illness remains relatively low. There have been 0 fatalities in Tarrant County.

At this point, H1N1 testing by the TCPH Laboratory will be performed only under the following circumstances: a hospitalized (>48 hours) patient with ILI (influenza-like illness as defined by a fever > 100 degrees F AND cough and/or sore throat) PLUS one or both of the following conditions - severe illness, such as lower respiratory tract infection or pneumonia or "unusual presentation" in a child, adult or person with immunosuppression; a person who has died with LIL and have no other known cause of death; pregnant females with ILI; individuals as part of a critical public health investigation; and samples submitted by provider participants in the surveillance system program.

Cases of influenza-like illness, whether caused by pandemic (H1N1) 2009 influenza or seasonal influenza, are not required to be tested (see above explanation) by the local health department or reported to local health officials. Since pandemic (H1N1) 2009 influenza is NO LONGER a reportable condition, health officials rely on healthcare providers and facilities to report hospitalizations and deaths thought to be associated with this virus. Health officials also rely on school health officials to report unusual clusters of illness and/or significant absenteeism thought to be associated with the virus. Testing for the pandemic (H1N1) 2009 virus is now commercially available. In the event a person becomes ill, that individual's healthcare provider may discuss testing, as well as the advantages and disadvantages of antiviral medication use, as a part of evaluation and treatment.

Critical Priorities:

- TCOEM will begin conducting county-wide conference calls. The call information was scheduled to be sent on Monday, Sept. 21, 2009. Please submit any questions that you would like Public Health to address to skparker@tarrantcounty.com.
- The Tarrant County Judge will be sending a letter to Mayors, City Managers and Emergency Managers discussing H1N1 and informing them of TC operational goals.
- Public Health will continue planning with the cities to determine to appropriate way to provide H1N1 to the communities and first responders.
- The weekly TCPH flu surveillance report will be sent to the TCEM List Serve. Last week's is attached as sample and new ones will be sent when released.
- Public Information will continue to update the County website with general H1N1 information.

Tarrant County Influenza Surveillance Weekly Report: CDC Week 35: August 30 – September 05, 2009

- The percentage of reported influenza like illness (ILI) in Tarrant County increased from 4.4% in week 34, to 4.8% in week 35 and is currently at the 2008-2009 baseline (4.8%).2
- The percentage of flu screen positive tests decreased from 29.6% in week 34 to 11.9% in week 35.
- During week 35, 19 specimens were tested for influenza and 2009 influenza A (H1N1) virus was detected in 84.2% of these specimens.
- 2009 influenza (H1N1) Activity as of 9/5/2009: In Tarrant County a total of ten (10) patients required hospitalization.

No deaths associated with 2009 influenza A (H1N1) virus have been reported in Tarrant County.

The Tarrant County Influenza Surveillance Weekly Report is available on the Tarrant County Public Health web site at: www.tarrantcounty.com/Flu.

Tarrant County reporting quadrants consist of Northwest, Northeast, Southwest and Southeast regions within the boundaries of Interstate 35 and Interstate 30.

Questions regarding a reportable disease or condition? Contact the Epidemiology and Health Information Division:

- Main office number : (817) 321-5350
- 24-hour contact number: (817) 994-3708

2-1-1: Has partnered with the Texas Department of State Health Services (DSHS) to provide a H1N1 information line for medical providers and the public. This information line will begin operation at 1:00 p.m., Friday, 28 September 2009. 2-1-1 is ramping up operations for the H1N1 calls.

- Knowledge Base Disaster Database (KB): Providing technical assistance for 2-1-1 Area Information Centers (AICs) regarding H1N1 article information; Ascertaining antiviral availability for indigent populations; Implementing disaster database (KB) updates; Reviewing/testing last environment for disaster database (KB) changes; Approving articles on KB, Revising KB training to include changes and preparing to train DSHS staff.
- Technology activities: Tested DSHS handsets with TIRN telephones; configuration of new phone is in process; phones have been distributed to AICs for staff expansion; Script has been written for the DSHS toll free telephone ingress point; translation to Spanish has been arranged for all scripts; Statewide clinical staff skilling has been defined; Telephony design of the ingress point for the DSHS toll free telephone number has been completed.
- Training and Support activities: Information and Referral Specialist training materials have been reviewed, call center training materials for DSHS clinical staff have been prepared and training scheduled for 09.24.09. Media releases have been forwarded to Area Information Centers (AICs). Language Line access and training materials have been secured for DSHS clinical staff. Office of Eligibility Services (OES) has been alerted to the accelerated time frame for project launch so 2-1-1 Eligibility Support Services (ESS) staff will be prepared. Necessary steps have been taken to secure temporary HHSC FTEs for the project.

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): 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. To date, DSHS has received 1,984, the majority of

which were from doctors' offices. 1,284 were from doctors' offices regarding immunizations/provider registration and also hospitals, schools, pharmacies, long-term care facilities, and local health departments. The overwhelming majority of these calls were focused on questions about immunizations and provider registration. 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.

Note: The call center is being phased out as DSHS's partnership with 211 Network is established. This Friday at 1:00 p.m., 2-1-1 Network will begin taking calls from the general public and providers regarding flu and flu vaccinations. Individuals with questions about flu and/or flu vaccinations should call their physician or 2-1-1 Network for assistance.

DSHS is increasing communications activities for public awareness. Updates have been made to TexasFlu.org home page and other areas of the site. TV and radio ads begin Thursday. The messages will focus on basic public health messages (hygiene and getting both H1N1 and seasonal flu shots). TV ads will be 15 or 30 seconds and radio ads will be 10 or 15 seconds. Subsequently, these ads will be posted to www.TexasFlu.org. The next phase will include the development of materials such as posters and flyers that can be posted on www.TexasFlu.org and used by the agency's partners.

DSHS strongly encourages health care systems to promote the seasonal influenza vaccine among the health care work force. Recommendation to get seasonal influenza and H1N1 vaccine is NOT mandatory. Individual health care system employers may choose to enact stricter or mandatory vaccination requirements for their work force but DSHS would defer to their autonomy.

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 mild to moderate flu outbreaks among students in regional areas. Some campuses or districts may need to close due to teacher absenteeism, staff-student ratios, student absenteeism, or local ability to sustain educational capacity. 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. TEA recommends that when attendance falls below 85%, school officials should consider closing campuses and schools. TEA has begun elimination of the term "Swine flu" from web links on their website, and will continue to do so. 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. Public institutions of higher education may purchase federally subsidized antiviral medications through DSHS. Information and forms are available on the DSHS website. The deadline for ordering is October 16th.

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 only 17 requests for waivers. 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.

4. **CASUALTIES:** 44 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, September 30, 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

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