

All Hazards Advisory Committee

Thursday, April, 19 2007
CMPD/CFD Training Academy
Room 2110 - EOC

MINUTES

Dave Shimberg opened the meeting at 9:05, following the close of the JHOC meeting, asking for any general announcements that would not be covered in other parts of the meeting. Patti Lamb, noted that the minutes of the 2/15 meeting, incorrectly stated that CMUD did NOT have a Damage Assessment TEAM (DMT), when in fact they have a DMT of 22. Dave will correct the minutes.

Infrastructure Committee. Patti Lamb reported that the committee was reviewing the capabilities and needs of each member organization, and how each could support the other. This review will be expanded to other infrastructure areas over the coming weeks/months.

MCHD Pandemic Influenza Response Planning – Dr Wynn Mabry talked about pandemic planning efforts over the past two years, and the Public Health Department’s work to develop the Mecklenburg County Pandemic Plan. He explained that Bobby Kennedy was leading much of this effort and had looked to other counties and states for best practices, strategies, and models. The resulting plan was sent to the State of North Carolina, has completed it’s first level of reviews, and is now working its way through a second level of reviews. Because of the broad nature of a pandemic, each member of the community has responsibilities that must be met as individuals.

Bobby Kennedy presented a series of slides with an overview of pandemic guidelines. Much of the county plans and estimates are founded on a 1918-like event scenario.

Scenario	Outcome	15% Attack Rate	25% Attack Rate	35% Attack Rate
1918	# Sick	119,456	199,093	278,730
	#Hospitalized1	10,776	17,960	25,145
	#Hospitalized2	12,359	20,599	28,839
	# Deaths	2,261	3,770	5,277

The goals of the Guidelines are to:

- Reduce Mortality and Morbidity
- Minimize Social Disruptions
- Minimize Economic Losses
- Ensure Continuity of Essential Services

The Strategy is to Prevent, Contain, and Treat flu victims.

Key Objectives are to:

- Develop countywide disease surveillance programs to detect pandemic influenza strains
- Have mass vaccination plans in place to rapidly administer vaccine and monitor its effectiveness and safety
- Establish guidelines for the utilization of antiviral medications
- Develop capabilities to implement non-medical intervention measures to decrease spread of disease
- Promote pandemic preparedness planning

- Communicate and educate regarding pandemic flu impact and prevention

The Health Departments Responsibilities are to:

- Communicate with community leaders and health care providers
- Coordinate decisions with the Joint Health Operations Center partners
- Authorize and communicate social distancing strategies and other protective actions
- Plan for and be able to respond to pandemic (includes vaccine/prophylaxis administration/dispensing)
- Be able to continue essential services during pandemic
- Direct isolation and quarantine activities
- Participate in EOC

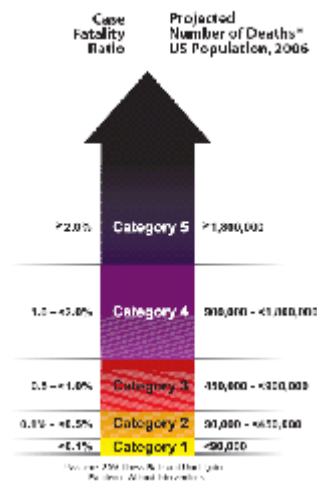
The Health Department's Pandemic Relations Functions are:

- Surveillance
- Disease Investigation
- Data Management
- Laboratory
- Vaccine/Prophylaxis
- Disease Control
- Mass Treatment Coordination
- Communication

He reviewed the WHO pandemic stages, noting we are currently in stage 3 of 6.



Figure A. Pandemic Severity Index



The CDC has also devised a pandemic severity index with categories 1-5 to help determine levels of effort required.

Assistance from the community will include:

- Joint Health Operation Center Partners
- SNS Operations (receiving, storing, transporting, dispensing medicines)
 - School Facilities
 - Law Enforcement (security)
 - Logistics
 - Communications
 - Manpower
- Isolation and Quarantine
 - Enforcement and Care Issues
- Enforcing Social Distancing Measures
- Joint Information Center (JIC)
- Information/Communication Conduit
- Education
- Emergency Support Function Planning (ESF)
- Stay Healthy!!

Several Handouts were also provided and reviewed. These included a list to Essential Support Service Functions (ESFs) Each of the ESF areas listed have their own plan, however, it is essential that these area work together and ensure their plans are integrated. AHAC may have a significant role promoting this integration.

Annex R - Strategic National Stockpile (SNS) Local Implementing Program Guidelines

Plans are under review under the Cities Readiness Initiative (CRI) Grant. Which requires 100% of the population must receive dispensed drugs within 48 hours! Our original plan called for dispensing within 72 hours to a week. Bobby Kennedy, MPH pandemic coordinator will attend meetings April 30-May 1 on specific planning.

In a declared disaster or pandemic, a municipality with approved plans can call for specific materials from the SNS. These will be distributed from Vendor Managed Inventories. If they do not know specifically what is need, "Push Packs" may be shipped on 18 tractor trailers.

ANNEX K-1 – Local response Procedures to a Radiological Incident / Accident has had few changes. The actions prescribed in this annex are largely controlled at the federal level by Department of Energy (DOE), Nuclear Regulatory Commission (NRC), and Department of Homeland Security (DHS), FEMA.

Annual McGuire Exercise is scheduled for 10/16/07 and a task force is meeting monthly to review NRC0654. This primary protocol includes any facility licenses to have radiological sources. These facilities must have an on-site person available during operating hours well versed in dealing with accidents. State and Federal Guidelines provide specific on how nuclear materials must be handled and how accident response must be carried out. There is little local control or input.

ANNEX K-2 – FIXED NUCLEAR FACILITY EMERGENCY PROCEDURES are mandated by NRC, DOE, DHS and FEMA

NEW BUSINESS - Dr Keener announced that DHS has created a series of training programs called "**Ready Business Symposiums**"(RBS) to help businesses better prepare for disasters. Mecklenburg county was working to develop a program, and discovered they were working on a parallel track. Mayor McCrory is on a DHS Advisory Board, and Charlotte will host the first RBS on May 22. The symposium will include workshops. Space will be limited to target audiences in the region. This is NOT our conference.

Adjourned at 10:15am

Next Meeting will be on **Thursday May 17, 2007**, focusing on Annexes L, M, and N