

Preparing for A Pandemic Flu

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Overview

- Nature of a flu pandemic
 - Government efforts
 - Role of auditors
 - GAO strategy
 - How we can work together
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What is an Influenza Pandemic?

- A global disease outbreak.
- A pandemic occurs when a new flu virus emerges for which there is little or no immunity in the human population.
- In a pandemic, the virus causes serious illness and spreads easily person-to-person worldwide.



Characteristics of Seasonal Flu Vs. a Pandemic

Seasonal Flu

- Seasonal outbreaks
- Immunity built up
- Elderly, very young hardest hit
- Health systems can usually meet needs
- Average 36,000 deaths per year in U.S.
- Modest impact on society and economy

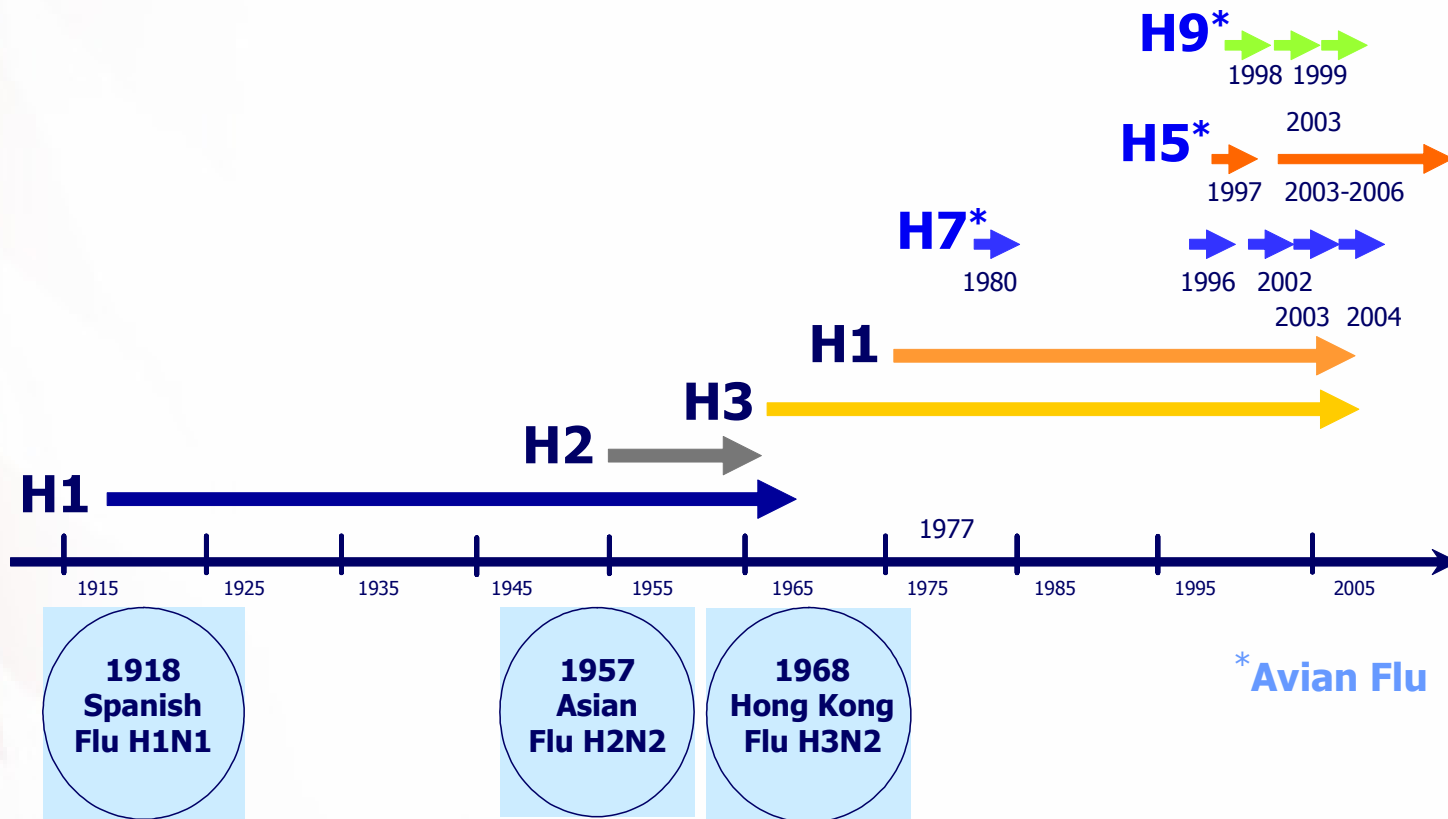
Pandemic Flu

- Occurs rarely
- No existing immunity
- Healthy people at risk
- Health systems likely to be overwhelmed
- Number of deaths could be high (200,000-1.9 million)
- Major impacts on society and economy

Some Distinguishing Characteristics of Pandemics

- Not a singular event—likely to come in waves, each lasting months, and pass through communities of all sizes across the nation and the world.
 - Could threaten all critical infrastructure by removing essential personnel from the workplace for weeks or months.
 - Extends well beyond health and medical boundaries, to include sustaining critical infrastructure, private sector activities, the movement of goods and services across the nation and the globe, and economic and security considerations.
 - The uncertainties associated with viruses requires flexibility in response.
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History of Pandemics



Phases of a Pandemic

INTERPANDEMIC

Phase 1: No new virus subtypes detected in humans; low risk of infection or disease

Phase 2: A circulating animal virus subtype poses a substantial risk of human disease

PANDEMIC ALERT

****Phase 3:** Human infections with a new subtype but no human-to-human spread

Phase 4: Limited human-to-human transmission; spread is highly localized

Phase 5: Larger clusters; virus becoming better adapted to humans

PANDEMIC PERIOD

Phase 6: Increased and sustained transmission in general population

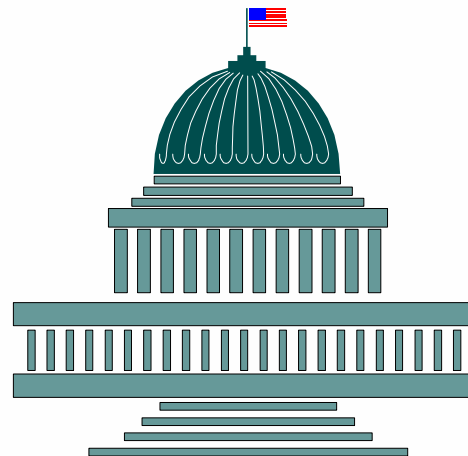
Planning Assumptions for a Moderate to Severe Pandemic in the U.S.

- Illnesses: 90 million people
- Outpatient medical care sought: 45 million people (50%)
- Hospitalizations: 865,000 to 9.9 million people
- Intensive care required for: 128,750 to 1.5 million people
- Ventilators needed for: 64,875 to 745,500 patients
- Deaths: 209,000 to 1.9 million people
- Absenteeism rates: Up to 40% during peak weeks
- Length of outbreak: 6 to 8 weeks
- Multiple waves, each lasting 2 to 3 months

National Strategy for Pandemic Influenza

The National Strategy is intended to guide preparedness and response to a flu pandemic with the intent of

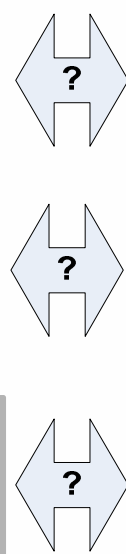
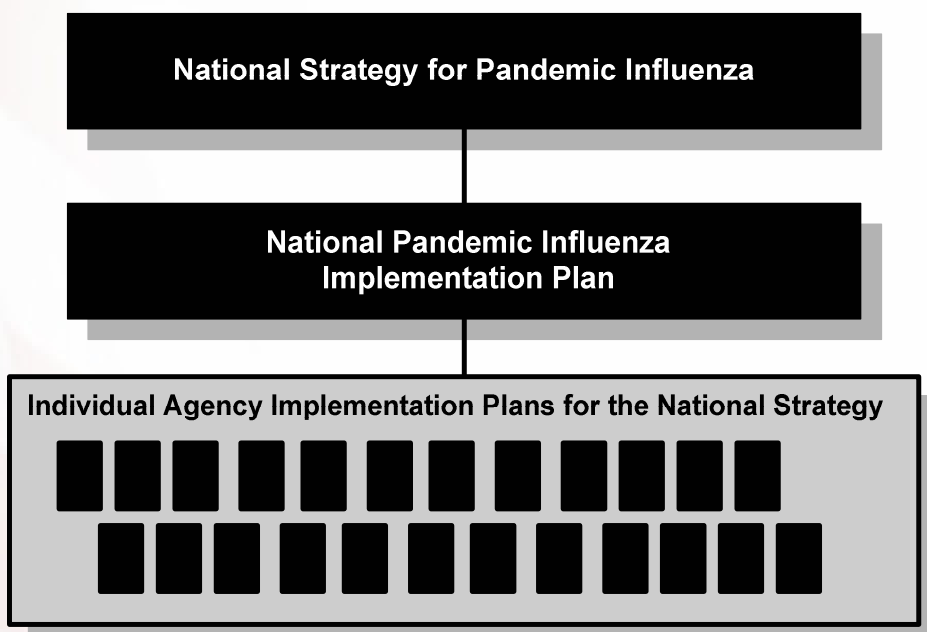
- Stopping, slowing, or otherwise limiting the spread of a pandemic to the U.S.
- Limiting the domestic spread of a pandemic and mitigating disease, suffering, and death,
- Sustaining infrastructure and mitigating impact to the economy and the functioning of society.



Three Pillars of National Strategy

- Preparedness and communication
- Surveillance and detection
- Response and containment

National Strategy for Pandemic Influenza and Other Relevant Strategies and Plans



- Selected Other Relevant Strategies and Plans**
- National Security Strategy
 - Homeland Security Strategy
 - National Response Plan
 - ESF #8 Public Health
 - Catastrophic Incident Annex
 - Biological Incident Annex
 - Individual Agency Continuity of Operations (COOP) Plans
 - HHS Agency-Specific Strategic Pandemic Plan
 - International Pandemic Plans
 - State Pandemic Plans
 - Local/Regional Pandemic Plans
 - Private Sector Pandemic/COOP Plans

Source: GAO

Funding for the National Strategy for Pandemic Influenza

- The 2006 Emergency Supplemental Appropriations Act funded \$3.8 billion of the \$7.1 billion President requested to support HHS plan and some international assistance
- President's 2007 budget request includes \$2.3 billion to continue implementing pandemic strategy; \$474 million to further improve readiness across government
- Funds to go to vaccine development and stockpiling, state and local public health preparedness, improved surveillance, other purposes

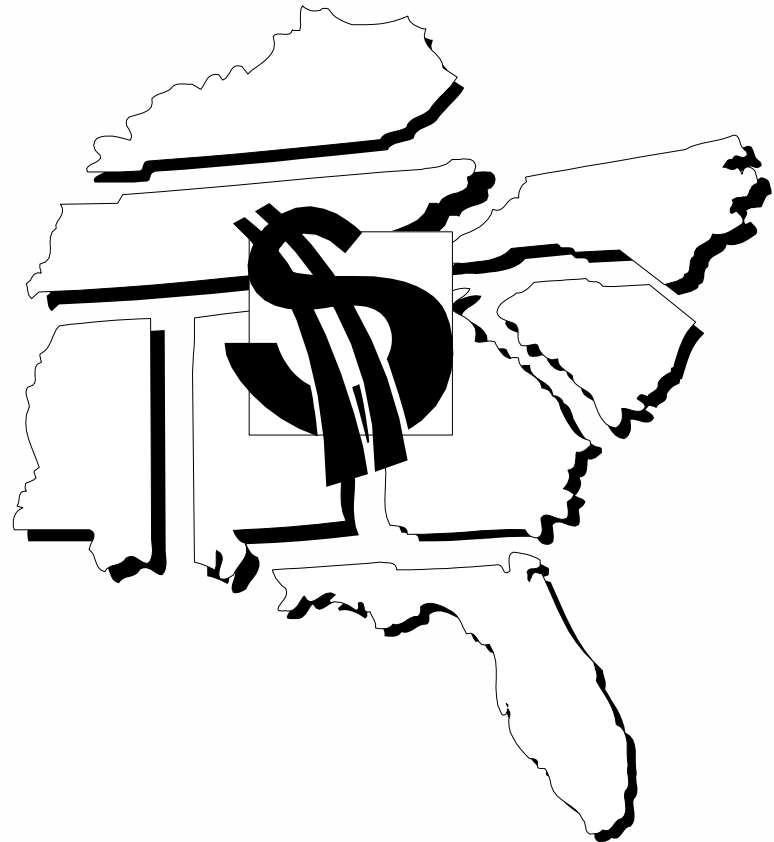
Funding for State and Local Preparedness

- In 2006, HHS awarded \$100 million to accelerate State and local pandemic influenza preparedness efforts
 - Initial grants included a minimum of \$500,000 per state, with additional funds allocated by population
 - Another \$250 million is to be awarded in accordance with guidance that will require progress and performance

Funding for SEIAF States

Initial FY 2006 funding includes the following allocations:

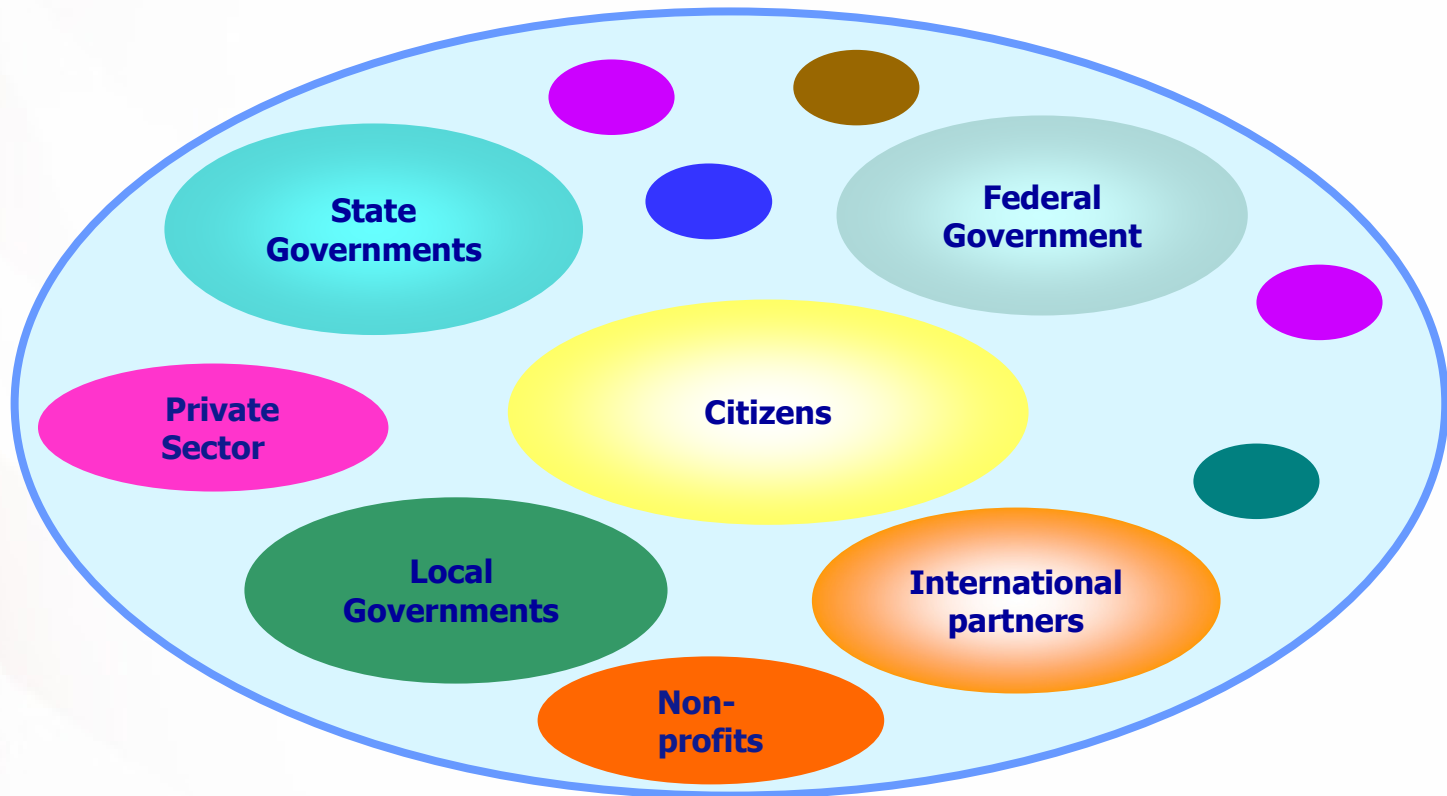
Alabama	\$ 1,595,205
Florida	\$ 4,633,819
Georgia	\$ 2,609,920
Kentucky	\$ 1,501,451
Mississippi	\$ 1,200,982
North Carolina	\$ 2,547,844
South Carolina	\$ 1,508,881
Tennessee	\$ 1,921,423



What Roles Can Auditors Play?

- Looking ahead, what needs to be done to ensure that the nation is able to prepare for and respond to a flu pandemic?
 - As auditors, we can draw on both past experience and prospective review to:
 - Enhance sound planning and preparedness
 - Help ensure that investments and activities will stand us in good stead – whether a pandemic emerges or not
 - Strengthen our networks, contributing to our overall infrastructure for emergency preparations and response
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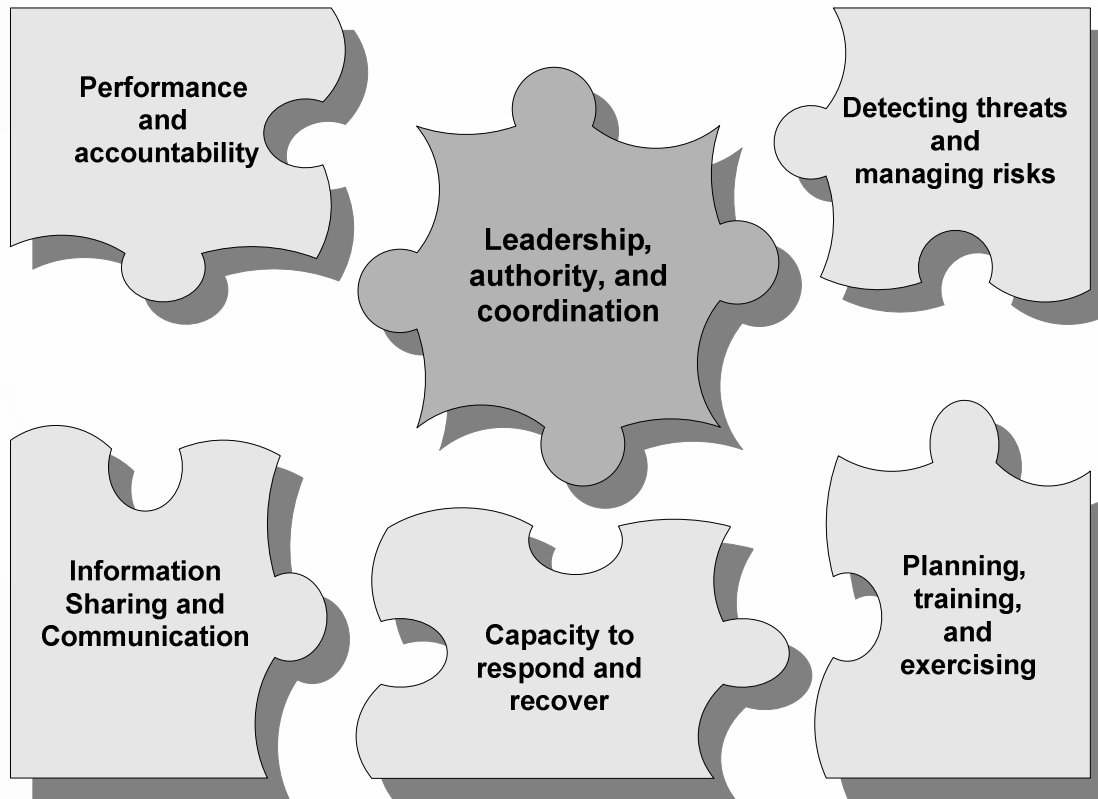
It Takes a Network



GAO's Strategy

- Is an integrated, agency-wide effort intended to help the U.S. prepare for a pandemic in ways that are sustainable over the long-term
 - Builds on lessons learned from prior emergencies, such as Hurricanes Andrew and Katrina, Y2K, SARS, and 9/11
 - Reflects congressional interests
 - Provides the opportunity for collaboration and partnerships that could enhance our knowledge in areas such as key intergovernmental issues and relationships
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GAO Strategy Themes



Source: GAO

How Can We Work Together?

- Sharing information
- Collaborating on methodologies, common criteria, etc.
 - e.g., Criteria for reviewing plans and strategies, including COOP plans
- Partnering and doing joint work, such as
 - Assessing the progress of state and local planning efforts and identifying gaps that need to be addressed on a nationwide basis,
 - Examining legal authorities, capacities at state and local levels to inform national planning
 - Highlighting important networks that have not been appropriately included in federal efforts

How Can We Work Together?

- Partnering (continued)
 - Assessing the effectiveness at the State and local level of federal tools such as grants, regulations, or tax policies
 - Identifying information needs for different audiences and analyzing available sources to assess their accessibility and reliability
 - Examining barriers to and successful practices used in working with the private sector to ensure preparedness and enhance capacities for response
- Others?