

Senate Committee on Health and Human Services
February 24, 2010

**Interim Charge #8:
H1N1 and ImmTrac Registry**

Panel 1: Vaccine Distribution

*Dr. David Lakey, Commissioner
Texas Department of State Health Services*



Texas Confronts Novel Influenza

- April 17:** - The CDC lab confirmed the first H1N1 result from California
- April 23:** - DSHS received laboratory confirmation of H1N1 virus in two teenagers from the same school in Guadalupe County
- April 24:** - Confirmation of flu-like illness in Mexico reported
- DSHS activated the department's emergency operations center
- April 25:** - Decision to close Byron Steele High School made
- A third student from the same Guadalupe County school was also confirmed for H1N1 influenza
- Governor Perry made an initial request for antivirals through the Strategic National Stockpile

Texas Confronts Novel Influenza

- April 26:**
- Initiated daily statewide State Operations Center conference calls
 - Governor Perry increased the request for antivirals to 850,000 courses
 - As of this date, the Government of Mexico had reported 18 laboratory confirmed cases of H1N1
 - All 14 schools in the Schertz-Cibolo-Universal City ISD closed
- April 28:** - State Infection Control Presentation webinar
- April 29:** - Confirmation of 1st death in Texas/United States
- May 5:** - CDC announces new guidelines for school closure
- May/June:** - End of school year

Texas Confronts Novel Influenza

- June 11:** - W.H.O. declares pandemic
- June 17:** - Lab confirmed case at summer camp in Tyler
- July 31:** - Approximately 5,200 Texas cases confirmed to date
- August 24:** - School began
- October:** - Flu activity reported “widespread”
- Vaccine becomes available in small quantities
- December:** - Significant decline in H1N1 across Texas, USA
- Vaccine becomes available in large quantities
- Flu activity reported as “local”

DSHS H1N1 Response Activities



Press Conference
with the Governor

Inspection of the
SNS antiviral allotment



Incident Commander
with Planning and
Intelligence Chief at
the DSHS MACC



Epidemiologists
investigated deaths,
established what data and
specimens needed to be
collected & established
policy

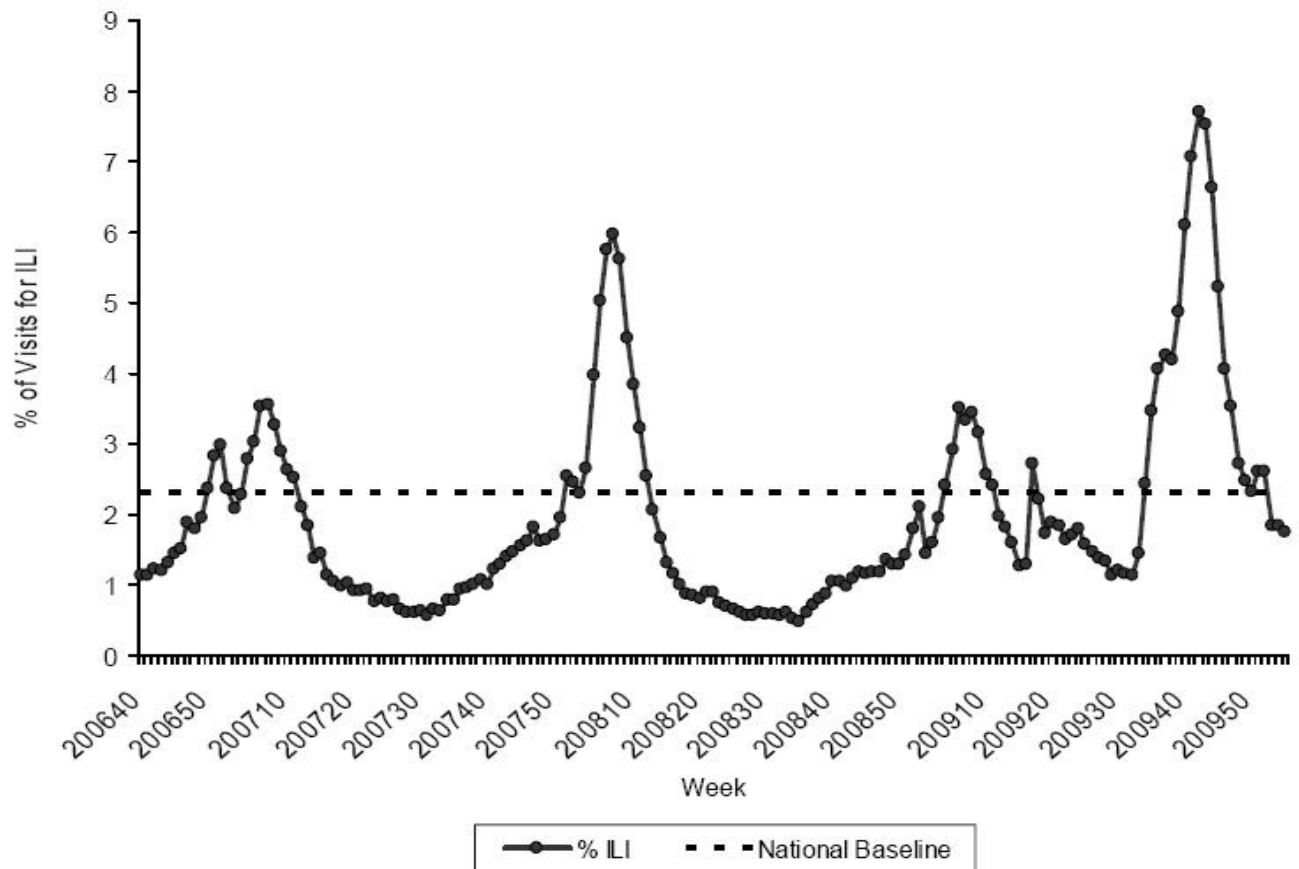


Testifying before U.S.
Congress about H1N1
vaccine availability
November 4, 2009



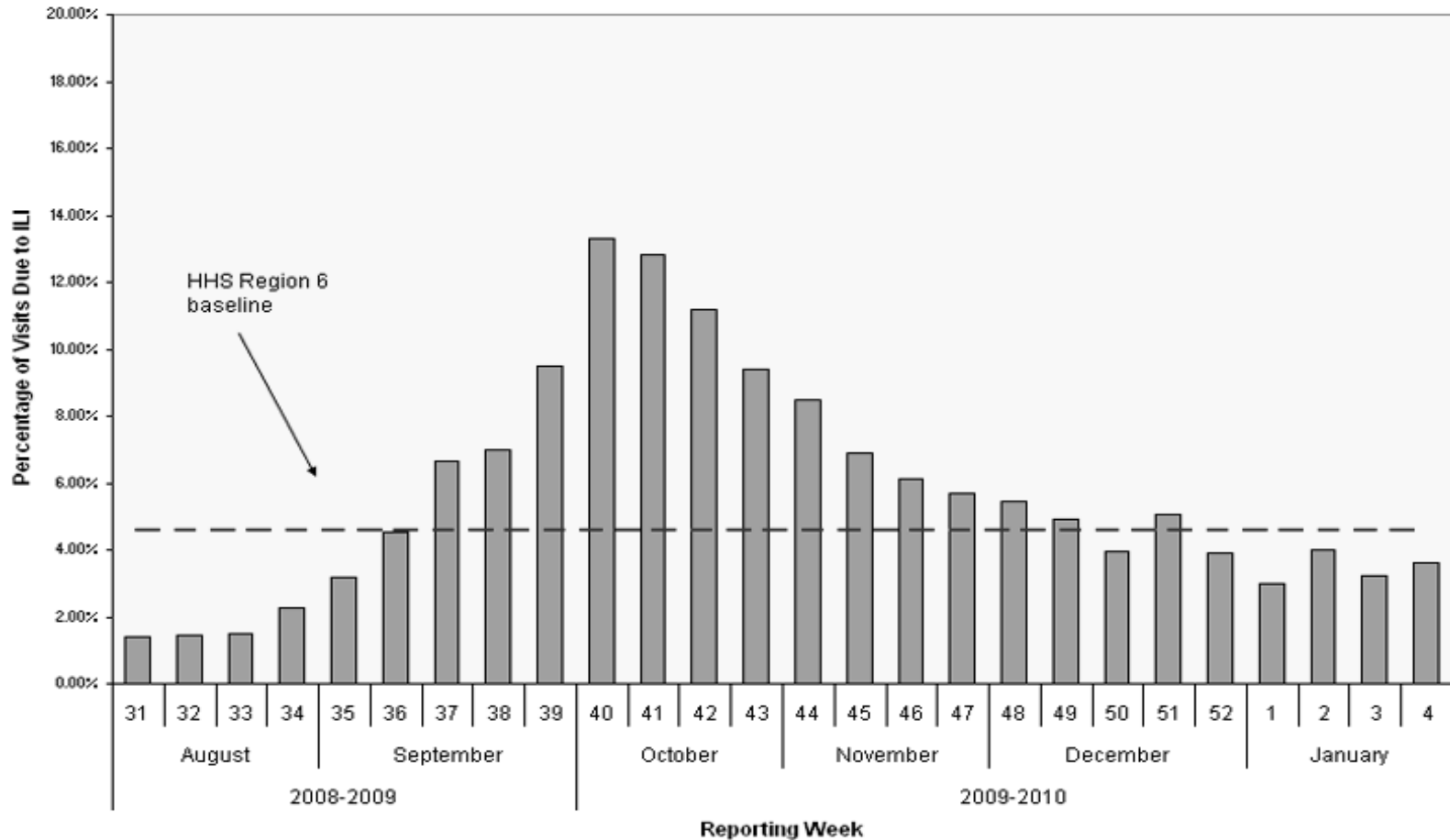
Percentage of Visits for Influenza-like Illness

Percentage of Visits for Influenza-like Illness (ILI) Reported by the U.S. Outpatient Influenza-like Illness Surveillance Network (ILINet), Weekly National Summary, October 1, 2006 – January 23, 2010

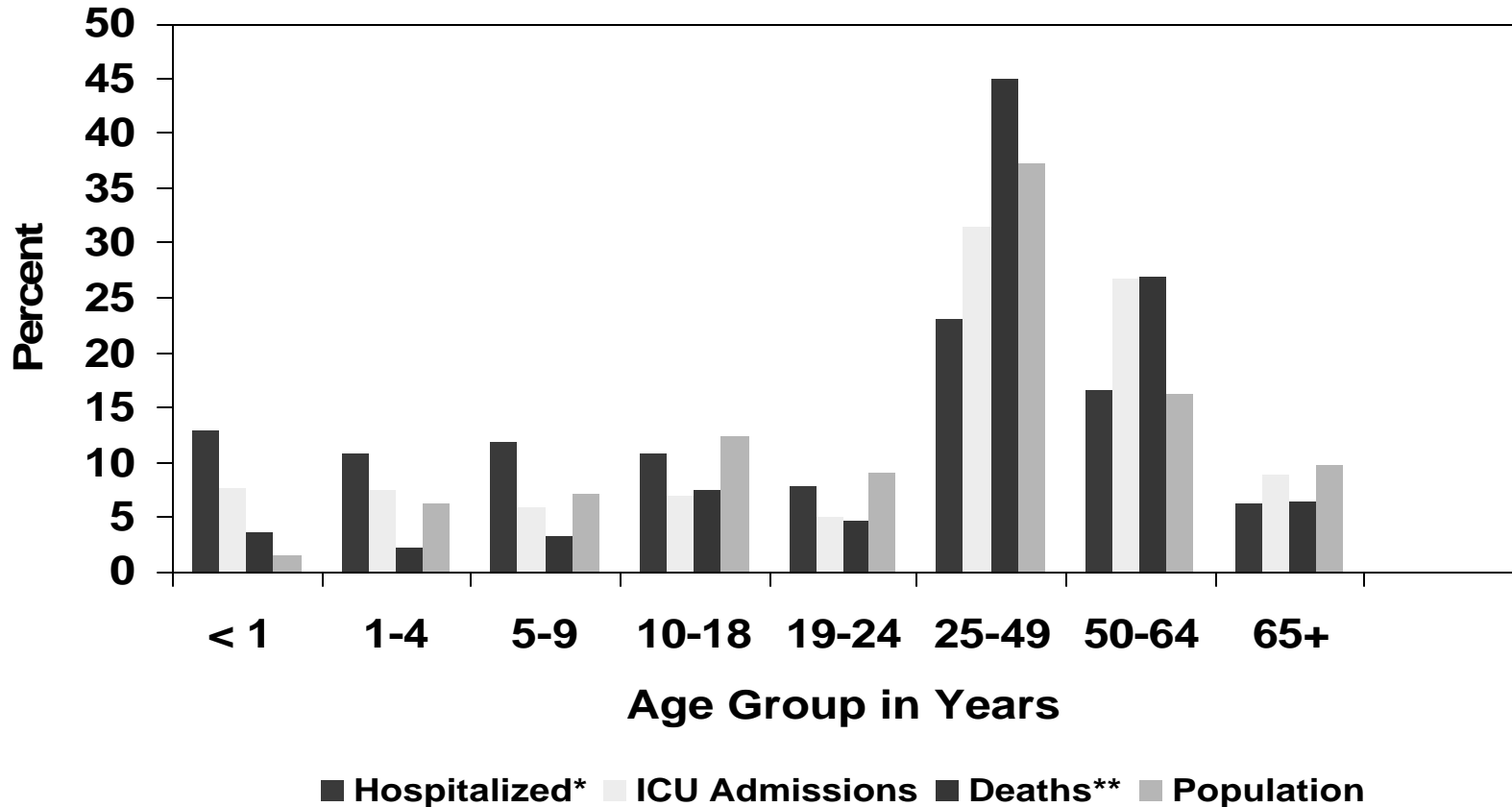


Influenza-Like Illness Reporting

Percentage of Visits Due to Influenza-Like Illness (ILI),
Texas Providers in the U.S. Outpatient Influenza-like Illness Surveillance Network,
2008–2009 and 2009–2010 seasons



Age Distribution for Certain Novel Influenza A (H1N1) Cases Compared to Texas Population as of 2/6/10

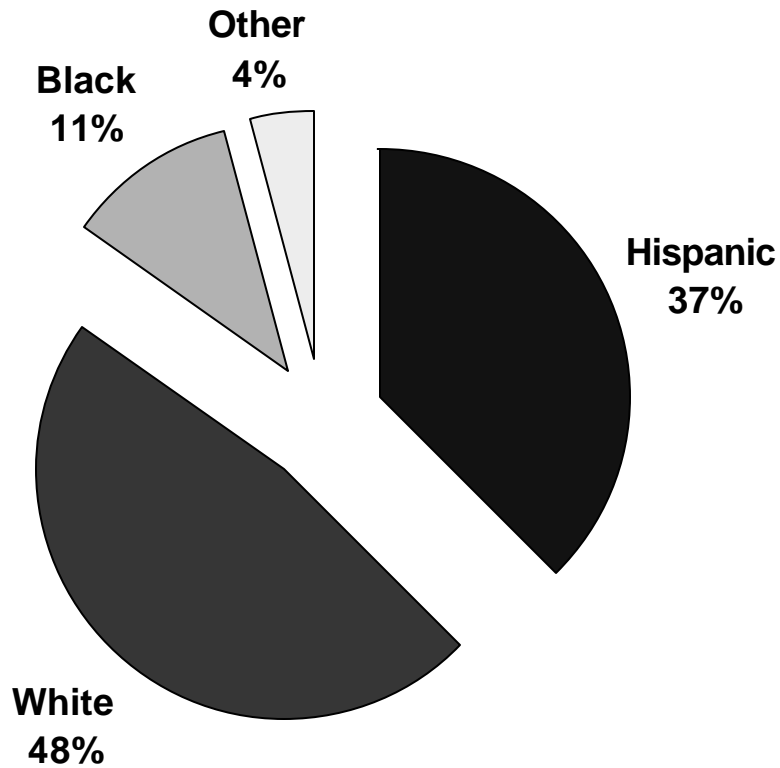


* Hospitalizations reported for 9/20-2/6/10

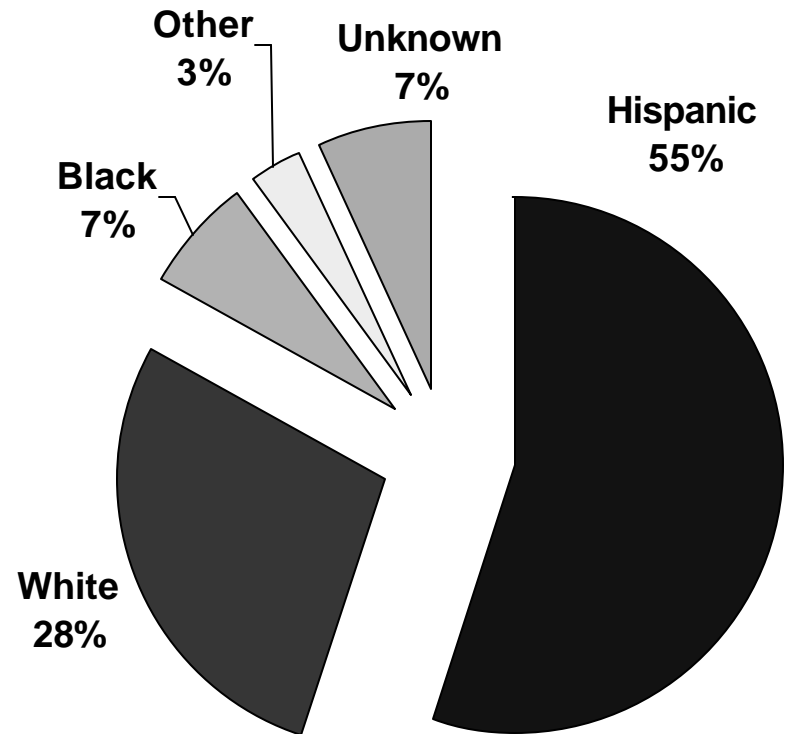
** Confirmed deaths from April to 2/6/10

Race/Ethnicity Distribution

Texas Population Demographics



H1N1 Deaths
N=213 as of 1-31-10



Spring 2009 Response

- **Preparation focused on avian flu from Asia**
 - Instead, swine flu from Mexico
- **Flu spread quickly**
 - Six days after first confirmation, flu appears in Guadalupe County students
- **Disease Identification and Surveillance**
 - Laboratory
 - Epidemiology
- **Intense media coverage**
 - Demand for information on spread of disease across Texas
 - Demand for laboratory testing
 - Pressure on schools
- **Coordination**
 - Closure is decision for local school district in consultation with local health department
 - CDC guidance
 - Close partnership with Texas Education Agency
 - Impact on school nutrition programs
- **Communication**
 - Quick development of messages for best health care practices
 - SOC calls

Update: Swine Influenza A (H1N1) Infections --- California and Texas, April 2009, **May 1, 2009**

Novel Influenza A (H1N1) Virus Infections in Three Pregnant Women --- United States, April--May 2009, **May 15, 2009**

Neurologic Complications Associated with Novel Influenza A (H1N1) Virus Infection in Children --- Dallas, Texas, May 2009, **July 24, 2009**



Emergence of a Novel Swine-Origin Influenza A (H1N1) Virus in Humans, **June 18, 2009**

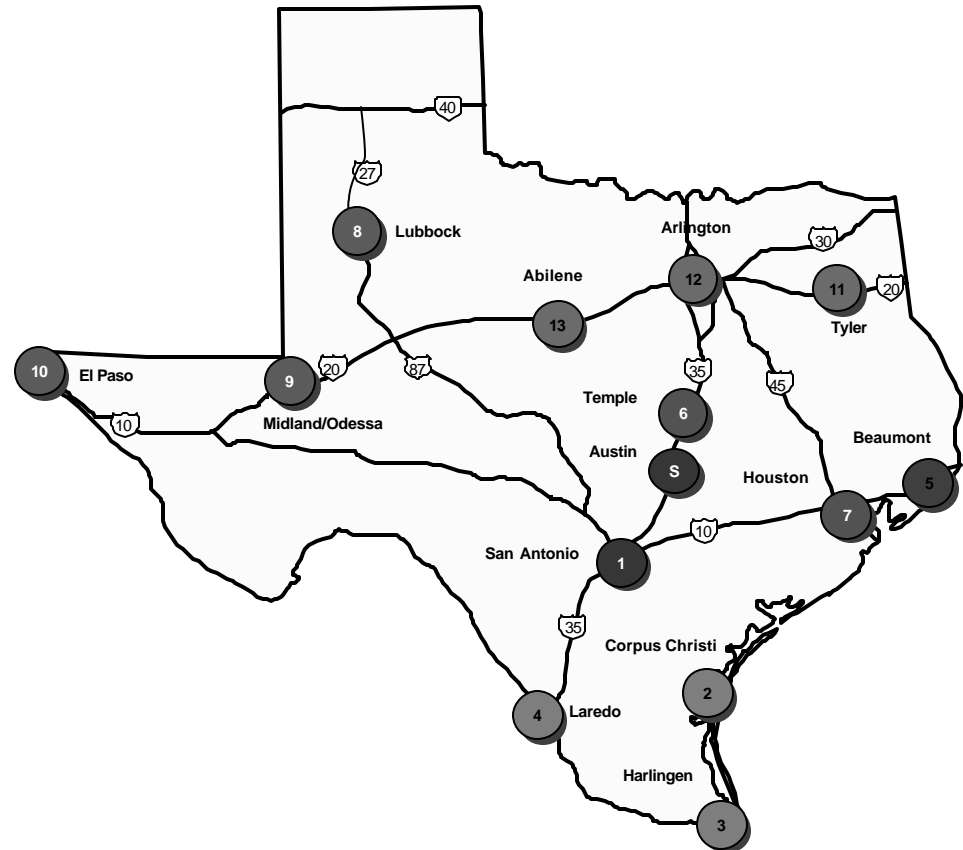


H1N1 2009 influenza virus infection during pregnancy in the USA, **July 29, 2009**

More Than 2500 Attended DSHS' Pandemic Flu Regional Conferences

AUGUST 2009						1
2	3	4	5	6	7	8
9	10 (S)	11	12	13	14 (1)	15
16	17 (2)	18 (3)	19 (4)	20	21 (5)	22
23	24 (6)	25	26 (7)	27	28	29
30	31 (8)					

SEPTEMBER 2009						
		1 (9)	2	3 (10)	4	5
6	7	8	9 (11)	10 (12)	11 (13)	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30			



The objectives of the regional conferences were to:

- Present an overview of the Spring / Summer H1N1 response
- Highlight deliverables / procedures from work groups



Antivirals

- **Goal**
 - Texans medically in need of antiviral medications would have access to them regardless of their ability to pay.
- **Steps to accomplish this goal**
 - State must have sufficient stockpile
 - An efficient stockpile distribution system must be developed
 - Individuals in need of antivirals must have access to stockpile in a timely fashion
 - The public must understand the system

Texas' Stockpile

- **Composed of antivirals purchased with federal funds, state funds, and the strategic national stockpile**
- **Contains ~ 2.4 million courses of antiviral medications**
- **Includes zanamivir (Relenza) and oseltamavir (Tamiflu) in both adult and pediatric formulations**
- **Used for the following purposes:**
 - To fill gaps for those who do not have private means to obtain antiviral medication
 - For use in outbreak control
 - In case of supply chain interruptions

Spring Outbreak of Novel H1N1

Antiviral Medical Allocation and Distribution

Spring 2009



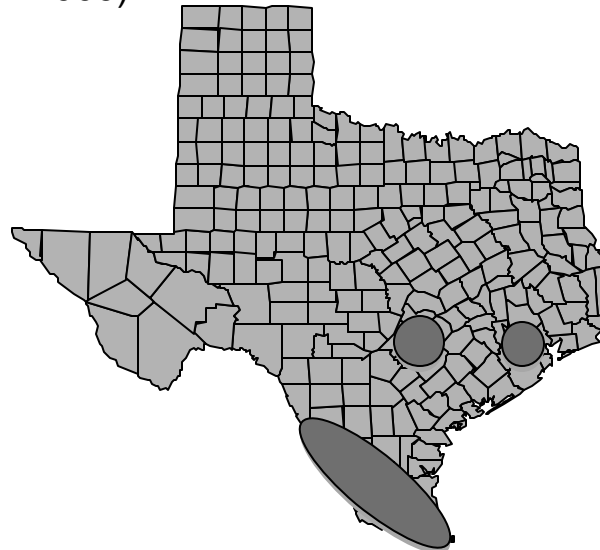
Summer 2009



Fall 2009

- Targeted approach to distribution based on epidemiological data
- Geographic area: Rio Grande Valley, Houston, and Central Texas
- Utilized one private pharmacy chain to distribute AV
- Utilized FQHCs / CHC's in the targeted areas

Map: County areas targeted for antiviral distribution from the state stockpile (Spring 2009)



Spring Data

- 1 retail outlet (H.E.B.)
- In the spring, DSHS partnered with 63 H.E.B. grocery stores.

Summer Outbreak of Novel H1N1

Planning for Fall Antiviral Medical Allocation and Distribution

Spring 2009

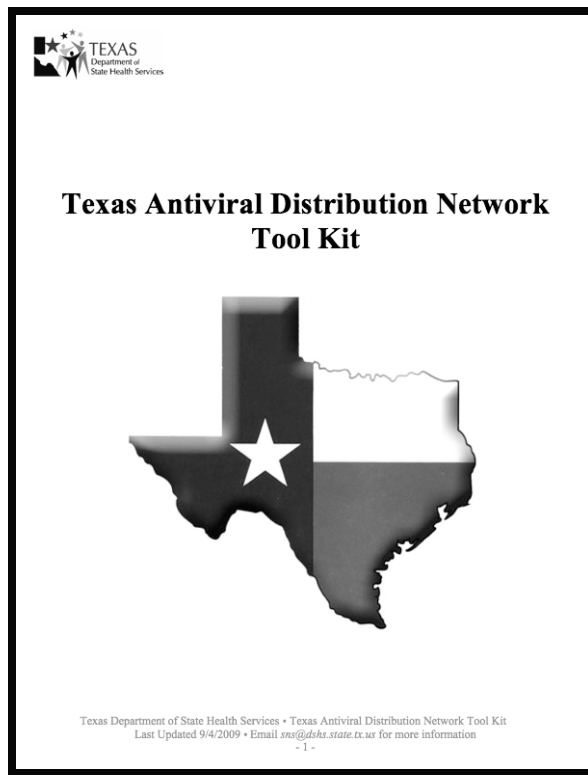


Summer 2009



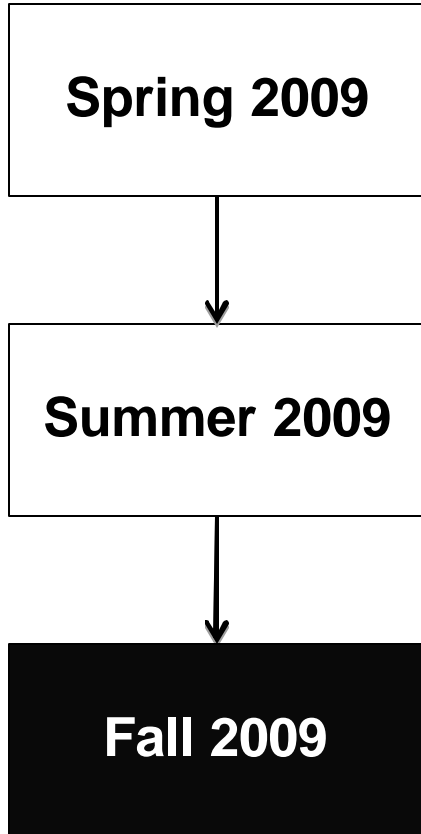
Fall 2009

- Sporadic outbreaks in Texas
- Continued using private pharmacy distribution network
- Opportunity to refine our antiviral distribution toolkit



Fall Outbreak of Novel H1N1

Revised Antiviral Medical Allocation and Distribution



- Expanded pharmacy distribution network
- Established criteria for using the state stockpile

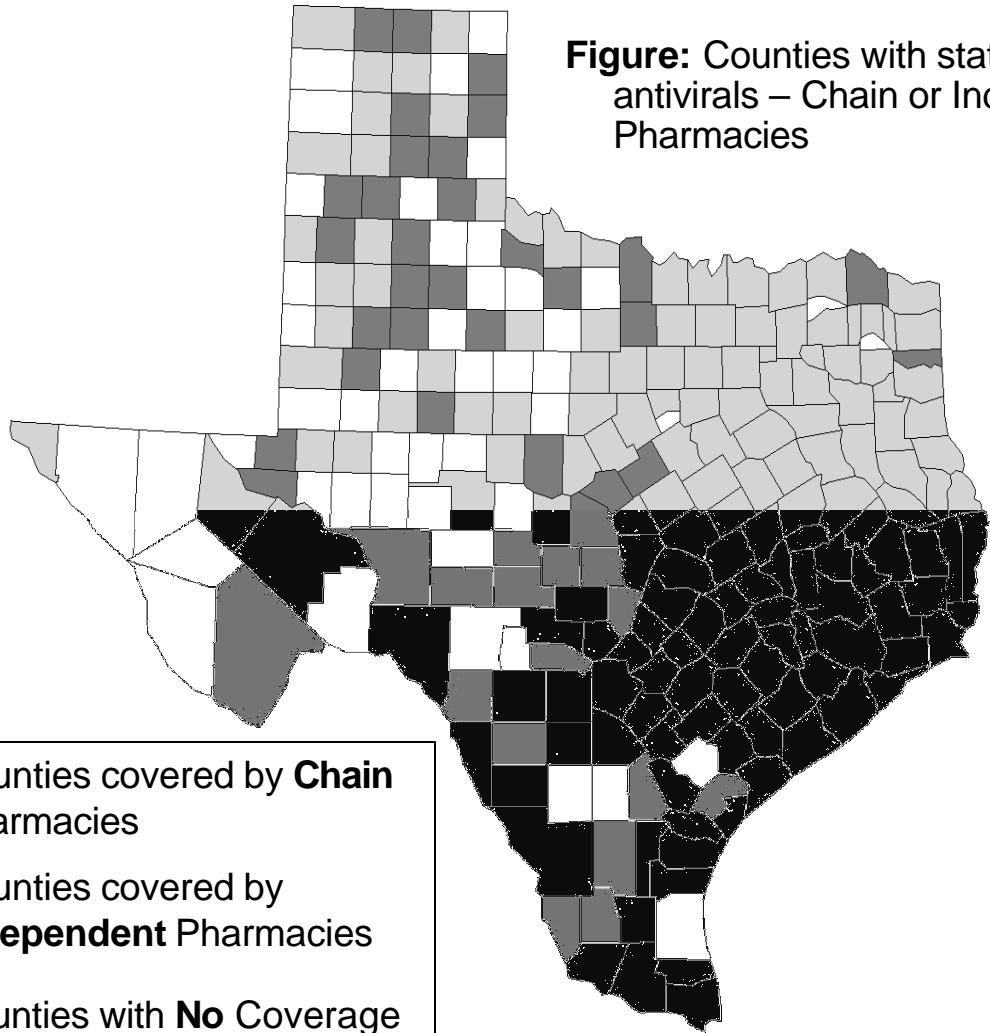
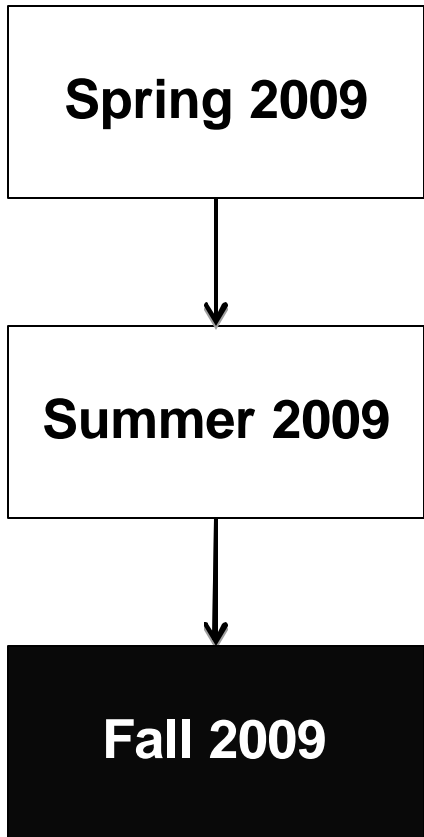
Stockpile Outlets

- 8 pharmacy chains in Texas (1,348 stores)
- 71 independent pharmacies in Texas
- 77 FQHC's
- 55 Local health departments
- 8 Health Service Regions

Criteria for Use

- Underinsured / uninsured
- Outbreak control
- Supply chain disruption

H1N1 Fall Outbreak: Revised Antiviral Medical Allocation and Distribution



Geographic Coverage

- Chain Pharmacies: 1,348 (8 retail chains total)
- Independent Pharmacies: 71

County Coverage	#
TOTAL number of counties in Texas	254
Counties covered by chain pharmacies	160
Counties covered by independent pharmacies	47
Total Counties Covered (99.1% of the population)	207
Total Counties Not Covered (28 counties with no pharmacy; 19 in process)	47

Prepare and Plan for Medical Surge

- **Develop alternative care systems**
- **Try to care for ill people at home if possible**
 - Call centers
 - Home care guidance
 - Guidance on when to seek medical care
- **Expand outpatient capacity**
 - Flu clinics
 - ER capacity (tool kits available)
- **Postpone non-essential healthcare activities if needed**
- **Identify local nursing home capacity**
- **Identify in-house surge capacity strategies for critical populations (Pediatrics, OB, Critical care)**
- **Develop alternate care sites as last option**

Medical Surge



Vaccine Strategy & Considerations

- **Must address not only who, but also what vaccine, when to start, and how to deliver.**
- **Based on informed decision-making**
 - Epidemiological evidence
 - Review of past performance
 - Guidance from CDC
 - Input from stakeholders
 - Planning based upon estimates of resources
 - Responding to ever-evolving circumstances
- **Ensure strategy can be flexed to mitigate the disease**
- **Required new vaccine distribution system**

ACIP 2009 H1N1 Priority Groups

(CDC Advisory Committee on Immunization Practices)

- **Pregnant women**
- **Household contacts and caregivers for children <6 months**
- **Health care and emergency medical services personnel**
- **All people from 6 months to 24 years**
- **Persons age 25 to 64 years with chronic medical conditions**

Problem: These priority groups = 159 million

Target Groups in Case of Shortage

- **Pregnant women**
- **People who live with or care for children younger than 6 months of age**
- **Health care and emergency medical services personnel with direct patient contact**
- **Children 6 months through 4 years of age**
- **Children 5 through 18 years of age who have chronic medical conditions**

Problem: Implemented differently across the nation

Texas' Actual Timeline for Priority Groups

Week of:

- **October 4 – children 2-3 years of age and the health care workers that serve them**
- **October 11 – add pregnant women, 4 year olds, children 5-18 years old at high risk of complications and the health care workers that serve them**
- **October 18 – add health care workers who provide direct patient care**
- **November 1 – add children six month to one year of age, and add close contacts of infants under 6 months old**
- **November 15 – add adults at high risk of complications**
- **November 30 - add all ACIP Priority Groups**
- **December 11 – opened up vaccine to general population**

Vaccination Strategies

- **How?**
 - **Private sector**
 - **Local health departments**
 - **Pharmacy chains**
 - **Mass vaccination clinics**
 - **School based clinics**
 - **Occupational medicine clinics**

Health Care Provider Vaccination Registration

- **Total registered as of 1/22/10: 12,861**
 - 59% Private practice
 - 13% Pharmacies
 - 5% Hospitals
 - 2% Schools
 - 20% Other
- **Vaccine apportioned to more than 10,800 providers and other health care facilities**

Vaccine Issues

- **Quantity of vaccine**
 - **CDC expected ~45 - 52 million doses of vaccine available by mid-October**
 - Level of vaccines reached in mid-November
 - Texas expected 3.4 million doses, only received 1.7 million
 - **Priority populations were not served as soon as they expected**
- **Weekly CDC Vaccine Shipment Status Report**
 - Created confusion among media and public
- **New vaccine distribution system**
 - Registration errors, misclassification of facility or of population served
- **Locating vaccine providers**
- **Recalls**

Communications

- **www.TexasFlu.org**

- Information for public, stakeholders, professionals, including school administrators, school nurses and ESCs
- Guidance documents, FAQs, tools
- Sign up for e-mail updates



- **DSHS Call Center / 2-1-1**

- **News media relations**

- Ongoing contact with news media

- **Public awareness campaign**

- Multimedia campaign: information for the public and tools for stakeholders

- **Conference calls with partners and stakeholders**

- Situational awareness and response activities
- Communication with health care provider organizations

2-1-1 as Call Center

- **Started with 2-1-1, to include medical guidance, on September 25, 2009**
- **Total calls answered: 35,685**
- **20,641 from medical providers**
 - Mostly for assistance on vaccine ordering and shipping
- **15,044 from the general public**
 - About 50 percent from sick people needing guidance
 - Also questions on vaccine location and vaccine safety



STOPPING THE **FLU** IS UP TO YOU.



[MAIN](#) | [MATERIALS](#) | [NEWS MEDIA](#) | [ESPAÑOL](#)

TEXAS FLU INFORMATION



The most recent Texas flu information in one convenient location.

Flu Vaccine Locator SEARCH. FIND. PREVENT.

Click here to find out where flu vaccine is available in your area.



KEY INFORMATION

- ★ [FLU SURVEILLANCE](#)
- ★ [H1N1 VACCINE DISTRIBUTION](#)
- ★ [FLU ANTIVIRAL INFORMATION](#)

SPECIFIC INFORMATION FOR:

- ★ [VACCINE PROVIDERS \(VORS SIGN IN\)](#)
- ★ [FAMILIES AND INDIVIDUALS](#)
- ★ [HEALTH CARE PROFESSIONALS](#)
- ★ [CHILD CARE, SCHOOLS, CONGREGATE SETTINGS](#)
- ★ [COMMUNITIES AND EMPLOYERS](#)
- ★ [LABORATORIES](#)
- ★ [NEWS MEDIA](#)

LATEST FLU NEWS

! **Vaccine Allocation:** Texas has been allocated about 10.5 million doses of the H1N1 vaccine by the CDC.

! **Vaccine Providers:** [Materials and resources available in the Online Provider Toolkit](#)



DSHS LAUNCHES FLU FIGHTERS TOUR

[Click here](#) for information and downloadable materials for elementary school students.

FLU SEASON IS HERE. HERE'S WHAT YOU CAN DO.

1 STAY INFORMED

TexasFlu.org is the DSHS site for flu information in Texas. Bookmark it. Sign up to receive [Twitter](#) and [e-mail notices](#) when information is posted. Dial 2-1-1 for flu advice.

2 GET SHOTS

Get an H1N1 flu vaccination now. Get a seasonal flu vaccination if still available in your community. Flu vaccinations are the best way to protect yourself and others.

3 STOP THE SPREAD

Wash hands frequently. Cover coughs and sneezes. Stay home if you're sick. Have a plan to care for sick family members at home.



VACCINE NOTICE

DSHS is encouraging everyone to get an H1N1 flu vaccination. Check with your usual health care provider, use the the [Flu Vaccine Locator](#) service or dial 2-1-1 for vaccine availability in your community.

Flu Vaccine: Locator

Flu Vaccine Locator

Find flu clinics near you

Vaccine supplies may be limited. Check availability; call ahead.

Find flu shots near:

GO

powered by Google

VISIT FLU.GOV
SHARE THIS WIDGET

Google maps

[Get Directions](#) | [My Maps](#)

Flu Shot Finder

By: maps.google.com - [Save to My Maps](#)

Flu shots near 78701- [Change location](#)

Please call ahead to confirm availability, as flu shot supply changes regularly. The [Texas Department of State Health Services](#) may have additional listings.

📍 Seasonal flu shots
📍 H1N1 flu shots
📍 Both

A

Rosewood-Zaragosa Neighborhood Center

2800 Webberville Rd, Austin, TX
(512) 972-5520
M, T, W, Th, F

B

Toney Burger Center

3200 Jones Road, Austin, TX
(512) 972-5520
Starting 12/11/09 - 1:00 PM to 6:00 PM

C

Toney Burger Center

3200 Jones Road, Austin, TX
(512) 972-5520
Starting 12/17/09 - 1:00 PM to 6:00 PM



Funding Information

- ~ **\$93 Million in Total Public Health Emergency Response (PHER) funding**
- **Allocated to Local Health Departments:**
 - ~ \$57 million or 61% of total
- **Allocated to DSHS Health Service Regions:**
 - ~ \$11 million or 12% of total
- **Allocated to Laboratory Response Network (LRN) Laboratories:**
 - ~ \$1.7 million or 2% of total
- **Allocated to Poison Control Centers:**
 - ~ \$300,000 or .4% of total
- **Allocated to DSHS Central Office:**
 - ~ \$22.8 million or 24.5% of total

Texas Health Care Systems Preparedness Program

- Assistant Secretary for Preparedness and Response (ASPR) provides federal funds to States to improve surge capacity and enhance community and hospital preparedness for public health emergencies
- DSHS received base funding of \$26,204,000 for FY10
- **An additional \$6,951,000 to assist surge capacity for pandemic influenza**
 - **Includes ~428 ventilators purchased with these funds**
- DSHS administers the Hospital Preparedness Program for the State by contracting with 18 trauma regional advisory councils (RACs) and one hospital council (Hospital Preparedness Council of North Texas)

Next Steps

- Monitor for and respond to possible 3rd wave
- Continue vaccination
- Finalize ethics committee report
- After Action Process - Spring 2010
 - Identify successful actions that should be continued
 - Identify areas that need improvement
 - Review state and national processes
 - Will include numerous stakeholders
 - Will occur statewide