

PREPTalks

New perspectives for emergency managers



CENTER FOR HOMELAND
DEFENSE AND SECURITY
NAVAL POSTGRADUATE SCHOOL

The Next Pandemic: Lessons from History

John M. Barry

Agenda

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Introductions (5 minutes)

Watch the PrepTalks (20 minutes)

Discussion (30 minutes)

Introduction



- John M. Barry is a prize-winning and New York Times best-selling author.
- The National Academies of Science named his 2004 book *The Great Influenza: The Story of the Deadliest Pandemic in History*, a study of the 1918 pandemic, the year's outstanding book on science or medicine.
- His earlier book *Rising Tide: The Great Mississippi Flood of 1927 and How It Changed America*, won the Francis Parkman Prize of the Society of American Historians.

Watch the PrepTalk

<https://www.fema.gov/blog/preptalks-john-m-barry-next-pandemic-lessons-history>

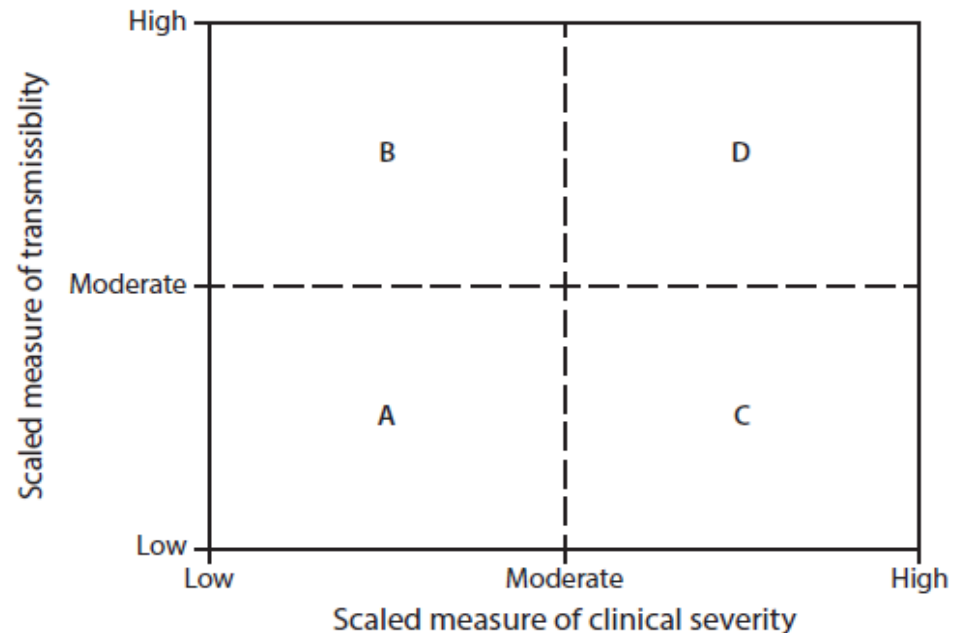
Topics

- Plan for the Next Pandemic
- Medical Care
- Implement Nonpharmaceutical Interventions
- Communicate Effectively

Topic 1: Plan for the Next Pandemic

CDC Pandemic Severity Assessment Framework (PSAF)

- Consider factors relevant to your individual communities, regions, and states when formulating guidance for interventions
 - Access to adequate health care and public health interventions
 - Demographic make-up
 - The presence of vulnerable populations
 - Population density



Planning does not equal preparation. [Plans need to be tested] with table top games [and they] have to be taken seriously. People at the top have to be invested in it.

– John M. Barry

Topic 1: Plan for the Next Pandemic



1. Are all appropriate parties familiar with [influenza basics](#), and understand the difference between seasonal flu and an [influenza pandemic](#)?
2. Have you discussed detection, assessment, and notification with your healthcare system providers? Is your pandemic influenza plan updated to align with CDC's new Pandemic Severity Assessment Framework (PSAF), including both the initial assessment period (first 3-4 weeks) and the refined assessment period when more data becomes available (4-8 weeks)?
3. Does your plan include an up-to-date community profile?
4. Does your pandemic influenza plan outline the roles and responsibilities of different organizations within your jurisdiction? Are all individuals aware of their roles and familiar with the plans? Use the process outlined in [Comprehensive Planning Guide 101: Developing and Maintaining Emergency Operations Plans](#) as a guideline for the planning process.

Topic 1: Plan for the Next Pandemic



5. Review the CDC's [Public Health Preparedness Capabilities: National Standards for State and Local Planning](#) with your healthcare partners and assess the related National Preparedness System Core Capabilities.
6. Do your jurisdiction's plans for vaccine dissemination include increased locations for points of distribution and staffing plans, including volunteers?
7. Infection from the influenza virus also weakens the immune system and makes people susceptible to secondary infections, including bacterial pneumonia. Do your hospitals have surge capacity plans, including beds, supplies, staffing, and transportation for the sick? Do you have surge capacity for mortuary services?
8. Because pandemics can come in waves (the 1918 pandemic had three waves of infection), do your plans include strategies for sustained efforts?
9. Have you conducted a community level tabletop to exercise and evaluate your plan? The [Homeland Security Exercise and Evaluation Program](#) provides guidelines for developing effective exercises.

Topic 2: Medical Care



- A vaccine for the new virus causing the pandemic will likely take 5-6 months to develop
 - A vaccine for pandemic influenza will likely be limited
- In a moderate pandemic there would be somewhere between 60 [million] and 100 million people sick enough to require medical care

1. Do your plans include ways to detect, assess, and treat patients on a massive scale?
2. Do your plans include methods to prioritize and disseminate the vaccine once it is produced?

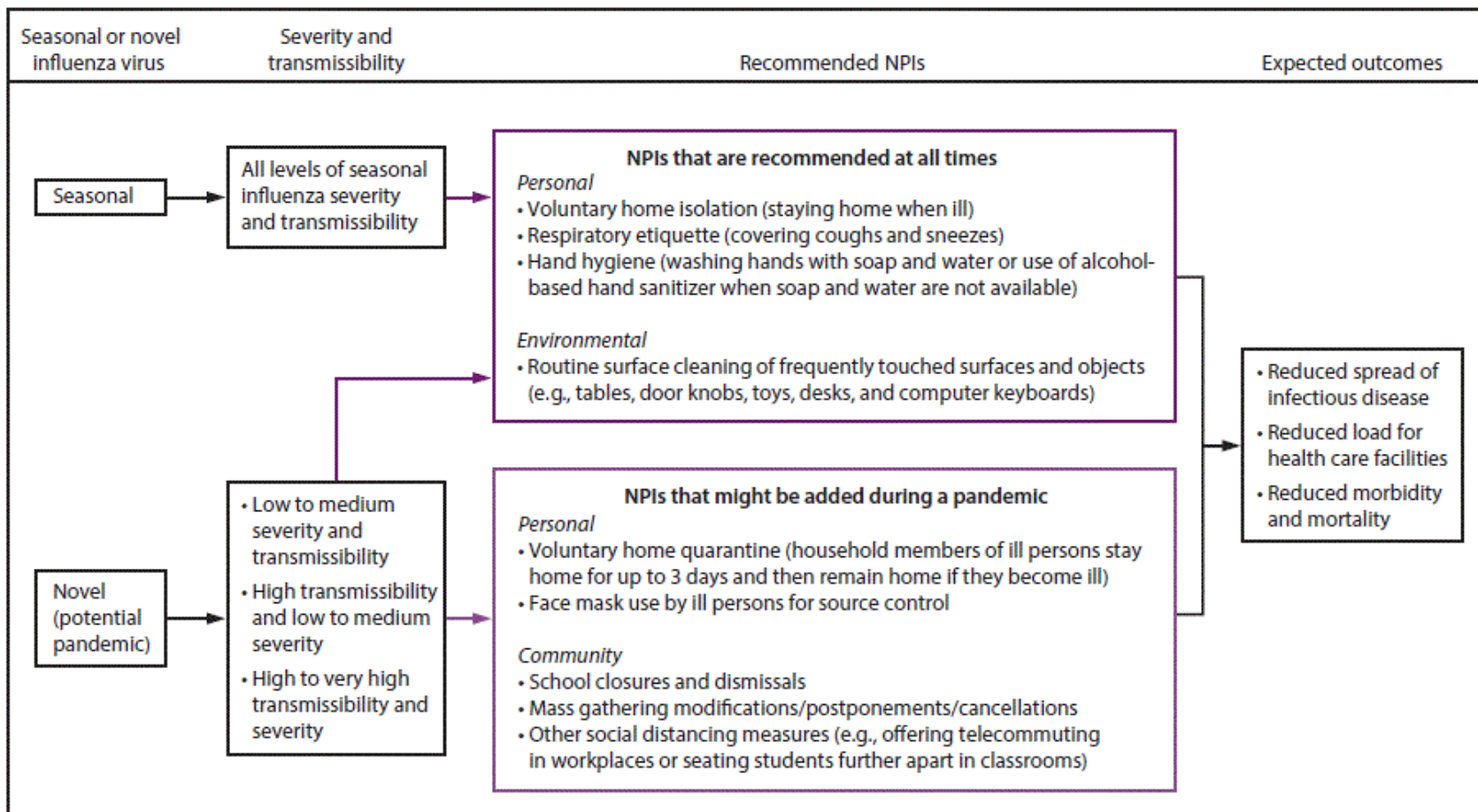
Topic 3: Implement Nonpharmaceutical Interventions

- Voluntary Home Isolation
- Respiratory Etiquette
- Hand Hygiene
- Voluntary Home Quarantine
- Use of Face Masks by Ill Persons
- Use of Face Masks by Well Persons
- School Closures and Dismissals
- Social Distancing Measures

NPIs will do some good, [but they] have to be sustained. They will save some lives [and] lessen the stress on healthcare.

– John M. Barry

Topic 3: Implement Nonpharmaceutical Interventions



Topic 3: Implement Nonpharmaceutical Interventions



1. How did the example of Ocracoke make you think about a prolonged power outage in your community?
2. What is the history of power outages in your area? What was the cause of these outages? What was the consequence? What went well and what could have been improved?
3. Are there plans in place to mitigate power outages in your community? What is the process to approve funding proposals?
4. How is your emergency management team preparing for an extended power outage? Have you conducted exercises to test how you would operate without power? How can you be more strategic now to ensure basic community functions during a prolonged power outage?

Topic 4: Communicate Effectively

Pandemic Influenza: Communication Recommendations

Provide maximum information to the public.

Tell the truth.

Don't oversell NPIs, but encourage compliance.

Get out in front of the internet/social media.

Create appropriate expectations.

Provide clear messaging: "This will be better in 4 weeks, gone in 8 weeks." (About the time it takes for a disease to move through a community.)

Topic 4: Communicate Effectively



1. How does your pandemic emergency communication plan align with the updated NPI recommendations?
2. Do the strategies and messaging reflect Barry's recommendations based on lessons learned from prior pandemics?
3. Have you exercised the plan to ensure that communications to the public are clear and consistent across organizations?
4. How are you preparing your community now for the next pandemic?
5. Who are the trusted spokespeople for specific audiences within your community and how will you ensure that elected leaders and first responders are communicating the same messages?
6. Develop plans for educational outreach to the community, including business continuity planning, working with houses of worship, non-profits and faith-based organizations, and schools and day care centers.

Discussion of Next Steps

- Revise plans and processes as needed
- Schedule a desktop exercise to include everyone in the decision-making process
- Update your external communications plans
- Disseminate CDC's audience-specific planning resources (included below) to the appropriate organizational leaders in your community.

A large pandemic is going to strike everybody pretty much at the same time, so you're not going to get help from the outside. Each community is going to be pretty much on its own.

– John M. Barry

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www.fema.gov/preptalks