



EBOLA VIRUS DISEASE PREPAREDNESS

REPORT FOR SEPTEMBER 1, 2014 – APRIL 1, 2015



In 2014, the world watched with growing apprehension as Ebola Virus Disease (EVD) began spreading in West Africa, amassing a tragic toll of illness, death, and social disruption. When the first United States case appeared in Texas in September 2014, apprehension in this country turned into alarm. Health departments and hospitals across the nation immediately ramped up their disease surveillance and emergency readiness protocols, with guidance and support from the U.S. Centers for Disease Control and Prevention (CDC) and other partners.

The Hawaii Department of Health (HDOH) likewise shifted into high gear. Already closely monitoring the progression of the W. Africa outbreak, the department was able to rapidly mobilize resources and staff, dedicating up to 50 persons during the height of response activities in the latter part of 2014 to further build existing disease outbreak prevention and control capacities.



This summary report provides a brief overview of HDOH activities to date. In preface, we note the following:

First and foremost, the goal of HDOH Ebola preparedness and response efforts continues to be to protect the health and safety of the people of Hawaii, whether from introduction of Ebola or any infectious disease with public health impact.

Second, HDOH Ebola readiness activities are being accomplished within a larger context that extends to all hazards—beyond the threat of Ebola. Much of this work by HDOH and partners will yield lasting benefits to the state, since plans, supplies, equipment, and training provide people with knowledge and skills that will inform and improve Hawaii's preparedness for public health and medical emergencies and disasters in the future.

Third, HDOH public health emergency preparedness for Ebola takes place in close partnership with hospitals and the medical community; state, county, and federal agencies; and many other essential partners within and outside of the healthcare system. This report is not meant to be exhaustive or cover the full breadth and depth of the multi-pronged efforts among many agencies and organizations working together across the state.

*Hawai'i Department of Health
Disease Outbreak Control Division*

HDOH EVD preparedness activity highlights:

ENSURING RESPONDER/WORKER HEALTH AND SAFETY

An EVD Working Group co-chaired by HDOH and the Healthcare Association of Hawaii (HAH) spearheaded efforts to *assist and facilitate healthcare worker, facility and system preparedness to safely respond to and care for an Ebola patient.*

- Public health and healthcare/clinical representatives met regularly to develop response plans and protocols, identify hospital worker training and equipment needs, and discuss other healthcare worker safety measures. HAH continues to coordinate healthcare facilities readiness.
- A protocol was established to safely move a suspect Ebola patient if one presents at their facility. Plans include notification protocols and steps for inter-facility and/or inter-island transfer.



HDOH has worked with first responders and other organizations to determine *effective and appropriate health and safety protections for their roles and responsibilities.*

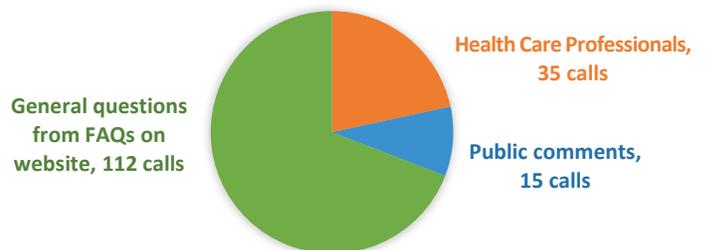
- Met with first responders including firefighters, police, sheriffs, and emergency medical services to address EVD safety issues, readiness levels, and planning related to assessing and transporting a potential EVD case
- Discussed potential EVD waste management issues and environmental infection control policies with county agencies and private waste management/disposal companies.
- Inventoried HDOH supplies of personal protective equipment (PPE) for public health workers and began procuring additional PPE based on assessment of existing supply levels.
- Developed donning and doffing protocols for HDOH Disease Outbreak Control Division staff (DOCD) using CDC guidelines. Protocols were operationalized into checklists.
- Issued guidelines from HDOH State Laboratories Division (SLD) to laboratories on handling specimens from suspect EVD patients, decontamination, documentation, specimen transport, and laboratory tests and procedures.

INCREASING DISEASE SURVEILLANCE AND MONITORING

The probability of Ebola coming to Hawaii is very low. Nonetheless, HDOH continues to work with partners in healthcare and community sectors to inform and prepare for a possible case of EVD or any infectious disease with public health impact.

- HDOH continues to monitor our disease surveillance systems and maintain regular communication with CDC
- HDOH Disease Investigation Branch maintains a 24/7 phone line for suspect cases to be reported: 808-586-4586.

EBOLA CALLS TO THE HAWAII DEPARTMENT OF HEALTH



A total of 162 calls were evaluated from 10/1/14 to 1/3/15, equaling approximately 14.5 hours of staff time.

- State Epidemiologist issued medical advisory to clinicians on EVD screening and patient management procedures.
- SLD has established Ebola testing capabilities in Hawaii.

HDOH collaborated with government and private partners in the travel industry, airports, sea ports, and healthcare community to be able to recognize any potential issues with incoming travelers and confirm that plans and procedures are in place.

- HDOH receives advance notification from CDC of any individual under monitoring who will be traveling to Hawaii within 21 days of their last presence in an Ebola-affected nation.

- Each individual under monitoring is contacted by HDOH staff within 24 hours of their arrival into Hawaii.

TRAVELERS MONITORED FOR EBOLA SYMPTOMS BY THE HAWAII DEPARTMENT OF HEALTH* (AS OF APRIL 8, 2015)

0	Individuals with high risk
3	Individuals with some risk**
21	Individuals with low risk**

*per CDC risk definitions (<http://www.cdc.gov/vhf/ebola/exposure/risk-factors-when-evaluating-person-for-exposure.html>)
 **19 have completed the 21-day monitoring period without developing illness.

CONDUCTING TRAINING AND EXERCISES

Lessons learned from the spread of Ebola in W. Africa, as well as the U.S. cases, illustrate that repeated drilling and practice in the use of PPE is critical to protecting healthcare workers' safety. While HAH continues to work with healthcare facilities in training and exercising, HDOH conducts training of public health workers, including training in donning and doffing PPE as well as in bloodborne pathogens (BBP) exposure.

Ebola presents a scenario involving multiple entities that do not intersect or interact on a routine basis. To test the validity of policies and procedures, HDOH has brought and continues to bring diverse constituents together in discussion-based exercises. Exercising plans in advance of potential incidents provides a forum to interact, ask questions, and suggest changes to assure smoother implementation for an actual event.

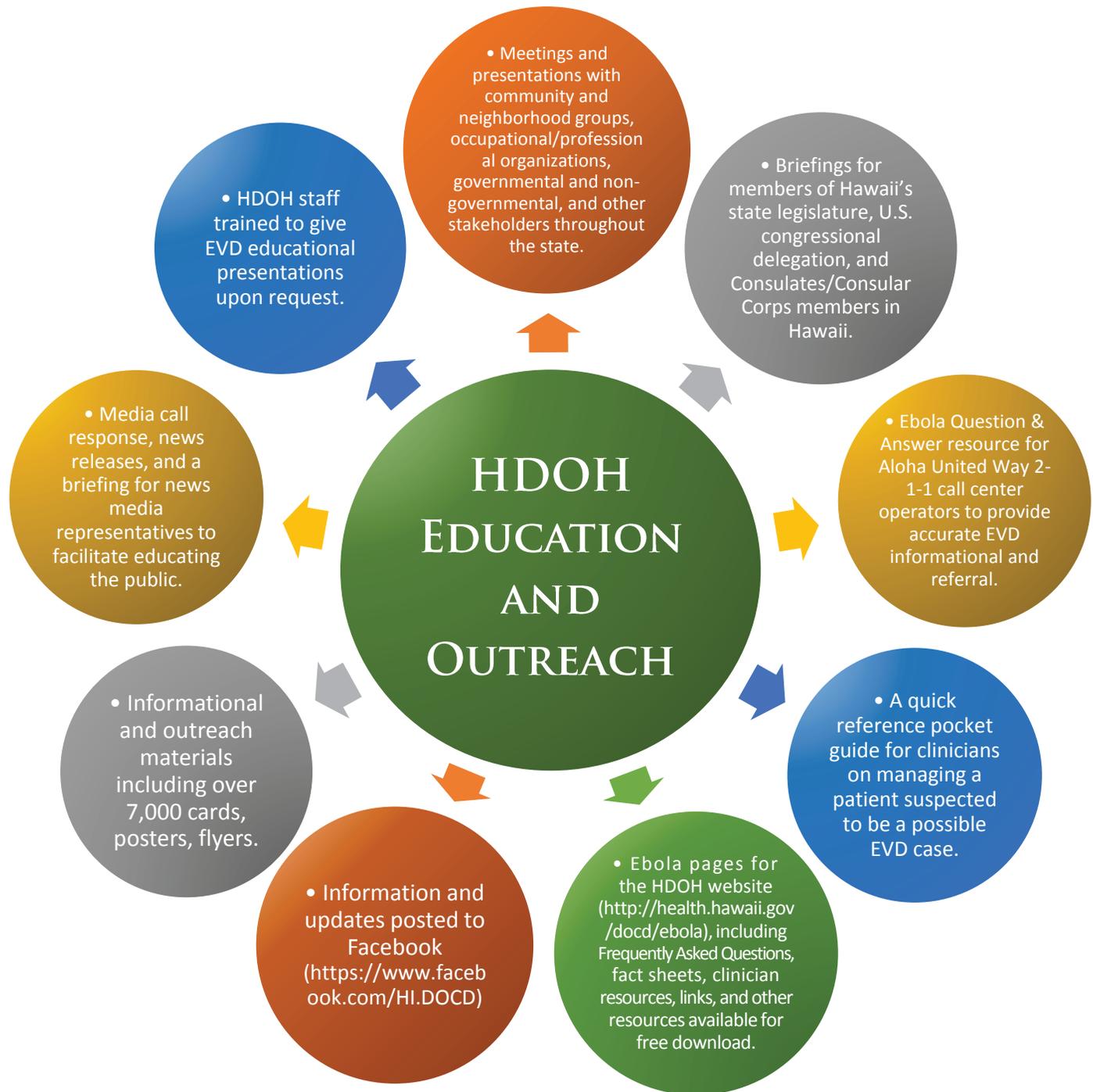
- Statewide Ebola Response Planning Tabletop Exercise (TTX), December 2014—More than 60 participants from health, first responder, waste management, state and county emergency management, and other organizations discussed the roles, responsibilities, and processes involved in handling a suspect Ebola case.
- SLD Laboratory Ebola Preparedness and Response Program TTX, tbd 2015—Laboratories will review EVD testing, HDOH guidance, and laboratory plans as well as exercise medically required laboratory support for suspect and confirmed Ebola cases.
- Additional tabletop exercises will be scheduled to review, practice, and strengthen other critical EVD response areas.



PROVIDING PUBLIC INFORMATION, EDUCATION AND OUTREACH

Disseminating timely, accurate information is essential to any public health emergency response. In addition to communication and collaboration with HAH and an ever-widening circle of response partners, HDOH has actively worked to inform and engage the public as the Ebola outbreak in West Africa continued.

Additionally, public information officers of HDOH, HAH, and healthcare facilities, working in collaboration, have developed emergency public information plans and messaging to help keep the public and media informed should an individual in Hawaii test positive for Ebola.



Partner and Stakeholder Outreach	
Federal	Other
Joint Terrorism Task Force	Air Cargo Association of Hawaii
Tripler Army Medical Center	American Medical Response
U.S. Coast Guard	Hawaii Consular Corps
State	Bio Waste Hawaii
Attorney General's Office	Bio Recovery Hawaii
Department of Education	Funeral directors and mortuaries
Department of Transportation–Airports and Ports	Hawaii Association of Direct Services
Hawaii Emergency Management Agency	Hawaii Life Flight
Hawaii State Emergency Response Commission	Hawaii Visitors and Convention Bureau
Hawaii State Legislature	Healthcare Association of Hawaii
University of Hawaii	Hilo Medical Center
City/County (C&C)	Kaiser Permanente
C&C Honolulu Department of Emergency Management	Kapiolani Medical Center for Women and Children
C&C Honolulu Department of Environmental Services	Kona Community Hospital
C&C Honolulu Medical Examiner Department	Maui Memorial Medical Center
C&C Honolulu Emergency Services Department	Medical Reserve Corps (MRC)
C&C Honolulu Fire Department	NCNS Environmental
C&C Honolulu Police Department	Neighborhood Board No. 5
Hawaii Civil Defense Agency	Outrigger Enterprises Group and Hotel Managers
Kauai Civil Defense Agency	Physicians statewide
Kauai Fire Department	The Queen's Medical Center
Kauai Police Department	Society for Human Resource Management
Maui Civil Defense Agency	Straub Clinic & Hospital
	Wilcox Memorial Hospital

LOOKING AHEAD

As is often the case with public health, the path ahead offers both challenges and opportunities.

Ebola readiness activities have taken significant amounts of time and resources. HDOH staff spent well over 2,000 hours on the activities in just the four months (September–December 2014) covered in this report. This work was conducted even as many of the same staff were being called upon to cover other infectious disease investigations such as measles, chikungunya, and foodborne illnesses. The labor-intensive HDOH Stop Flu at School program, which vaccinated more than 60,000 children and school staff statewide, also took place during this period and tapped many of the staff involved with Ebola readiness. Balancing ongoing duties and responsibilities with competing high priority needs and demands is a continuing challenge.

The Ebola outbreak has provided a wake-up call to public health, healthcare, and emergency management to strengthen existing policies and procedures, and to create needed plans where there were none. It is also a wake-up call for the public to be aware and prepare. Ebola preparedness efforts are yielding lasting benefits to overall state and county public health emergency preparedness and response capacity. Supplies, equipment, training, inter-agency collaboration, community education, and healthcare system infection control measures are just some of the areas where gaps have been addressed and improvements made. HDOH will continue to use Ebola response opportunities to build relationships among diverse community sectors and to remind the public of the importance of being prepared.

Moving forward, HDOH remains committed to meeting the challenges of preparing the state against Ebola and other emerging infectious diseases. The department will continue to dedicate its time, energy, and expertise to serve and protect Hawaii's people.

