Planning Resolution between U.S. Surgeon General Richard Carmona and Governor Linda Lingle of Hawaii

PANDEMIC PLANNING

Whereas:

1. Influenza pandemics have occurred three times in the last century, and history and science suggest that the country and the world could face one or more pandemics in this century;

2. A pandemic can cause severe illness, death and disruption throughout the country and the world, and outbreaks can occur in many different locations all at the same time;

3. Preparing for an influenza pandemic requires coordinated action at all levels of government - federal, state, local - and all sectors of society, including businesses, schools, faith-based and community organizations, families and individuals;

4. The federal government has committed to taking a leadership role in creating a prepared Nation by monitoring international and domestic outbreaks, providing funding and technical assistance to foster local and state preparedness, stockpiling and distributing countermeasures, developing new treatments, and coordinating the national response;

5. The Secretary of the United States Department of Health and Human Services (HHS) has committed to holding pandemic planning summits in all 50 states, assisting states to improve their level of preparedness;

6. President George W. Bush asked Congress for emergency spending authority to prepare the United States against the possibility of a pandemic. The Congress has provided over $3 billion for that purpose in the Defense Appropriations Act for 2006, including funding for state and local planning purposes;

7. States and local communities are undertaking their own measures for responding to an outbreak within their jurisdictions and having comprehensive pandemic preparedness plans and measures in place to protect their citizens;

8. Consistent with its authorities and availability of funding, HHS may provide additional resources for State and local influenza planning and preparedness activities, and require specific preparedness goals and achievement of these goals from States and localities as a condition of financial assistance;

9. Preparedness plans must be continuously exercised and updated to make sure they work and to achieve a stronger level of preparedness;

10. Pandemic preparedness will help communities deal with any type of medical emergency and will have lasting benefits for the health of our Nation; and

11. HHS and Hawaii share common goals, and have shared and independent responsibilities for influenza planning and preparedness.

Be it resolved:

1. HHS will be responsible for:

a) Continuing to provide substantial guidance and technical assistance to Hawaii as it prepares to respond to a possible influenza pandemic. Among other things, HHS, and its operating divisions, coordinates pandemic response activities with state and local public health and health care agencies; supports state pandemic planning efforts; communicates and disseminates timely influenza pandemic information and technical guidance to state and local public health departments and health care agencies; and provides direct support and technical guidance for epidemiological investigations and diagnostic services through the Centers for Disease Control and Prevention (CDC).

b) Consistent with its statutory authorities, direction from Congress, and Departmental regulations and policy, and subject to available funding, providing States financial assistance through funds appropriated as part of the FY 2006 Defense Appropriations Act for the purposes of pandemic planning. Although a portion of those funds will be made available to the state immediately upon receipt of a self assessment of readiness, receipt by Hawaii of additional amounts will depend upon achievement of specific preparedness goals as agreed to by HHS and Hawaii.

c) Within six months, reviewing Hawaii's plans for use, storage and distribution of antivirals and notifying Hawaii of its portion of the federal stockpile of pandemic influenza antiviral drugs.

2. Hawaii will be responsible for:

a) Augmenting state and local planning with a State and Local Pandemic Preparedness Summit.

b) Updating state pandemic influenza plans based on guidance given in the HHS Pandemic Influenza Plan and the National Strategy for Pandemic Influenza both released in November 2005 and any guidance the Secretary may provide concerning the use of countermeasures necessary to address a pandemic.

c) Assuring that the operational plan for pandemic influenza response is an integral element of the overall state and local emergency response plan that will coordinate effectively with Emergency Support Function 8, Health and Medical Services, of the National Response Plan and the National Incident Management System.

d) Establishing a Pandemic Preparedness Coordinating Committee that represents all relevant stakeholders in the jurisdiction (including governmental, public health, healthcare, emergency response, agriculture, education, business, communication, community based, and faith-based sectors, as well as private citizens) and that will assist the State in articulating strategic priorities and overseeing the development and execution of the jurisdiction's operational pandemic plan.

e) No later than July 1, 2006 notifying HHS of the amount, if any, of additional pandemic influenza antiviral drugs that Hawaii will plan to purchase in coordination with HHS, subject to the availability of funding.

f) Exercising the state's preparedness plan within six months of the date of the state planning summit between the HHS Secretary and the Governor of Hawaii, and participating in a nationwide pandemic planning exercise within twelve months of that date. These planning and response exercises

should enable public health and law enforcement officials to establish procedures and locations for quarantine, surge capacity, diagnostics, and communication.

g) Providing CDC a self-assessment of readiness on the part of Hawaii to receive a portion of funds referenced in 1.b) immediately.

h) Achieving specific preparedness goals, targets, and timelines as agreed to by HHS, CDC and Hawaii in order to receive additional funds referenced in 1.b).

Governor Linda Lingle, Hawaii

Richard Carmona, U.S. Surgeon General