

Pandemic Influenza Community Preparedness Planning: Second National Congress on Health System Readiness

Kirsten Nadler, MS, and Surajkumar Madoori, MSJ

With a focus on pandemic influenza community preparedness planning, the American Medical Association (AMA), in partnership with the Centers for Disease Control and Prevention (CDC) and the US Department of Health and Human Services, convened the Second National Congress on Health System Readiness in Washington, DC on July 18–20, 2007. The meeting was planned with the help of a committee from more than 25 national health care organizations to encourage local level pandemic preparedness planning to better integrate both community mitigation and medical surge capacity factors when creating/adapting local plans.

As communities across the United States continue to find unique approaches and solutions to public health emergency planning, many have focused efforts on community mitigation factors or medical surge capacity issues, but few have comprehensively encompassed both key objectives. The Second National Congress aimed to showcase local/community-level approaches that exemplify innovative solutions to pandemic influenza preparedness planning that reach beyond traditional health care systems. A key highlight was how communities are tackling and overcoming barriers to pandemic influenza planning in the areas of

- Medical surge capacity
- Community mitigation strategies
- Models of emergency health care delivery
- Alternative care sites
- Maintenance of critical community infrastructure
- Legal and regulatory policy
- Workforce education and safety
- Community education/communication (eg, vulnerable populations)
- Role of the business community/private sector

Before the meeting, prospective communities were solicited for their experiences with pandemic influenza preparedness planning. The review committee looked for innovative and instructive stories featuring links between the health care delivery system and public health (state and local) within the context of the individual community. Of the 30 applications received, 4 communities were chosen to present:

Medical Surge Capacity State Presentations

- Minnesota—NE Minnesota Emergency Preparedness Coalition, presented by Jim Gangl, Emergency Preparedness Coordinator, St Louis County Health and Human Services; Cheryl Stephens, Regional Hospital Resource Center Coordinator
- Virginia—Northern Virginia Hospital Alliance, presented by Dan Hanfling, MD, FACEP, Director, Emergency Management and Disaster Medicine, Inova Health System; Kevin Harlen, Executive Director, Northern VA Hospital Alliance; Karen Drenkard, RN, PhD, CNAA, SVP Nursing/Chief Nurse Executive, Inova Health System; Zachary Corrigan, Manager Regional Hospital Coordinating Center, Northern VA Hospital Alliance

Community Mitigation State Presentations

- Oregon—Multnomah County, presented by Jessica Guernsey Camargo, MPH, Program Supervisor, Multnomah County Health Department; Rebecca Hernandez, Director of Community Building, Hacienda Community Development Corp; Sara Perkins, RN, Supervisor, Multnomah Education Service District; Chuck Cooper, Environmental Health & Safety Officer, Portland State University
- Arizona—Scottsdale, Coyote Crisis Campaign, presented by James Bertz, MD, DDS, FACS, President, Medical Staff, Scottsdale Healthcare; Wendy Lyons, RN, BSN, Vice President of Strategic Development, Scottsdale Healthcare

To reinforce the key elements of these presented plans, the Second Congress also featured grand rounds discussions with leading national experts in both medical surge capacity and community mitigation. Both grand rounds discussions will be detailed further in an upcoming issue of *Disaster Medicine and Public Health Preparedness*.

With more than 500 registrants, the Second Congress attracted attendees from a wide range of sectors including federal, state, and local government, public health officials, clinical medicine, law enforcement, academia, hospital ad-

ministrators, business and public-private partnerships, and nongovernmental organizations and faith-based groups. These individuals included several nationally and internationally recognized experts along with other distinguished guest speakers who shared their perspectives on the state of the science through lectures, keynote addresses, as well as during breakout sessions. Some of the speakers included Drs Ronald Davis, President of the AMA; Julie Gerberding, Director of the CDC; David L. Heymann, World Health Organization (WHO) Assistant Director-General for Communicable Diseases; Frederick Burkle, Director of the Asia-Pacific Center for Biosecurity, Disaster, and Conflict Research; Gabor Kelen, Director of the Johns Hopkins Office of Critical Event Preparedness and Response; Nicole Lurie, Senior Natural Scientist and Paul O'Neill Alcoa Professor of Policy at the RAND Corp; Lindsey Davies, the UK National Director of Influenza Pandemic Preparedness; and Irwin Redlener, Director of the National Center for Disaster Preparedness at Columbia University. (A number of PowerPoint presentations and podcasts are publicly available through the Second National Congress Web site www.ama-assn.org/go/pandemicflu.)

Other events included an interactive and collaborative exercise developed in conjunction with the Oak Ridge Institute for Science and Education, which addressed difficult cross-boundary planning issues, and served as an additional catalyst for attendees to engage partners in planning beyond tradi-

tional public health/clinical medicine in their preparedness plans. Communities that submitted their plans for review also had the option of presenting a poster during the Congress. (All of the submitted community plans are available as an instructive reference on the Congress Web site.)

An awards reception on the final day of the Congress initiated annual recognition of significant achievement in disaster medicine and public health preparedness. Among the initial awardees were the 4 representative communities from Minnesota, Virginia, Oregon, and Arizona, as well as Drs Marvin Birnbaum, Robert Stroube, and James J. James.

Regardless of the origin of a public health crisis such as pandemic influenza, it remains vital to engage and incorporate cross-sector planning into the preparedness process; the Congress planning partners are already exploring opportunities for future meetings that will assist in meeting that challenge.

About the Authors

Ms Nadler is the Conference Manager within the American Medical Association's Center for Public Health Preparedness and Disaster Response (CPHPDR), and Mr Madoori is the eCDLS Project Coordinator for CPHPDR.

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