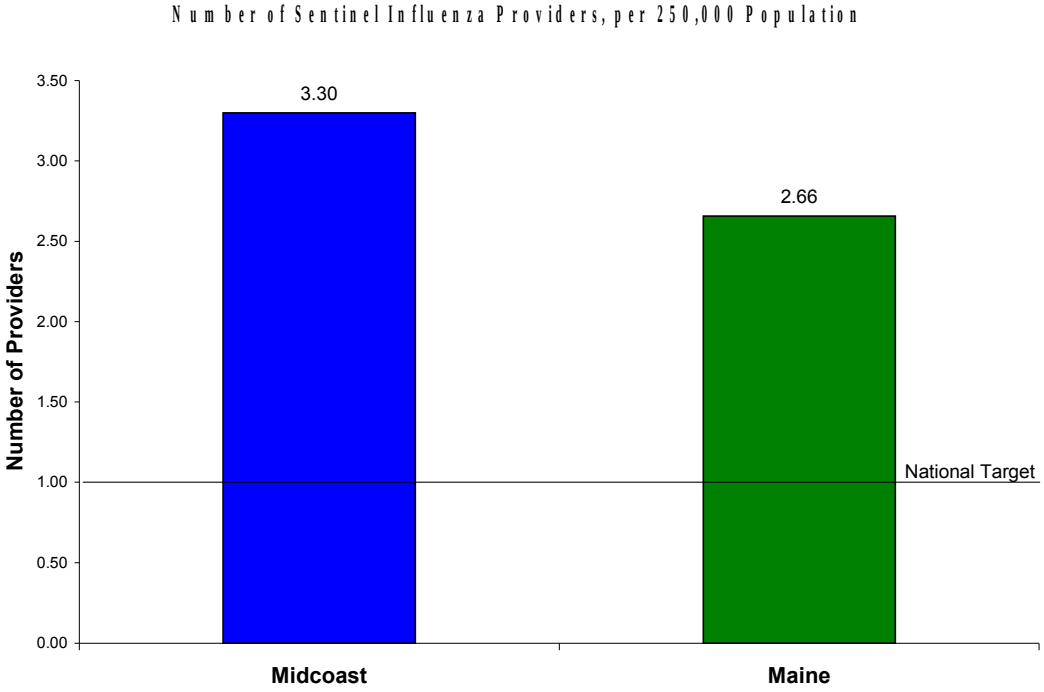
MIDCOAST DISTRICT: Public Health Preparedness

Sentinel Provider Influenza Surveillance Program

The Maine Center for Disease Control and Prevention and a group of primary care providers statewide participate in the federal CDC's Sentinel Provider Influenza Surveillance Program. That program was implemented to meet several objectives. Influenza viruses are constantly evolving and cause substantial morbidity and mortality ever winter. Data from sentinel providers are critical for monitoring the impact of influenza. In combination with other influenza surveillance data, this information can be used to guide prevention and control activities, vaccine strain selection, patient care, and detection of new pathogenic organisms, such as the A:H5N1 avian strain. Sentinel providers receive feedback on the data submitted, summaries of regional and national influenza data, and a free subscription to CDC's Morbidity and Mortality Weekly Report and Emerging Infectious Diseases Journal. The most important consideration is that the date providers are critical for protecting the public's health.

Sentinel providers report the total number of patient visits each week and number of patient visits for influenza-like illness by age group (0-4 years, 5-24 years, 25-64 years ≥65 years). These data are transmitted once a week via the internet or fax to a central data repository at the federal CDC. In addition, sentinel providers can submit specimens from a subset of patients to the State Health and Environmental Testing Laboratory for virus isolation free of charge.

The federal CDC has a target of 1 sentinel provider for every 250,000 population. In addition, Maine has a target of 1 sentinel provider per county and 1 for each Metropolitan Standard Statistical Area (MSMA).



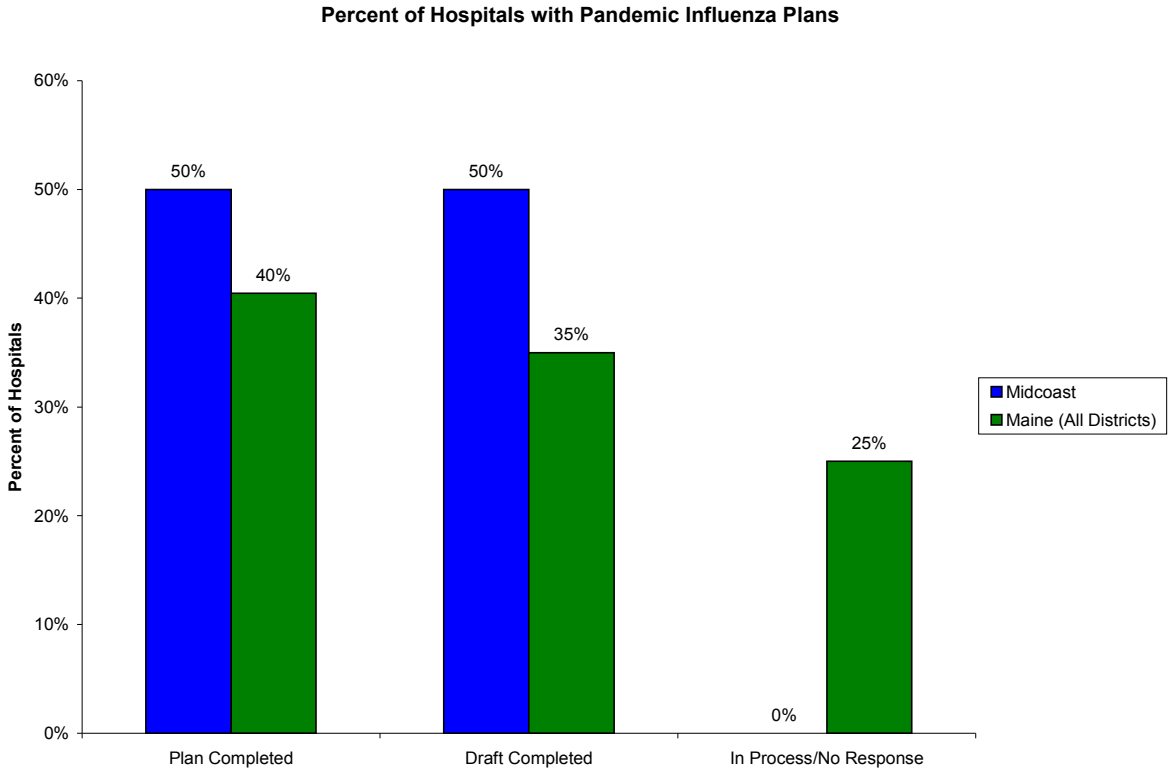
Source: Infectious Disease Epidemiology Program

Number of Maine Hospitals with Pandemic Influenza Response Plans

The Maine Center for Disease Control and Prevention (Maine CDC) has established a Pandemic Influenza preparedness planning process for Maine in coordination with key partners at the federal, state, and local level. The focus is on practical, statewide and community-based procedures that could prevent or delay the spread of pandemic influenza, and help to reduce the burden of illness communities would contend with during an outbreak.

The Maine CDC Regional Resource Centers, representing Maine hospitals have facilitated the development of Pandemic Influenza response plans for all hospitals. A critical component of Pandemic Influenza response in Maine is assuring hospitals have effective Pandemic Influenza plans which are integrated with county level and State plans and define their ability to manage such a crisis.

There are a variety of indicators with which to assess Maine's capacity to respond to an influenza pandemic including the number of hospitals who have completed plans. This measurement defines the percent of hospitals within any district that have completed part of a pandemic planning process.



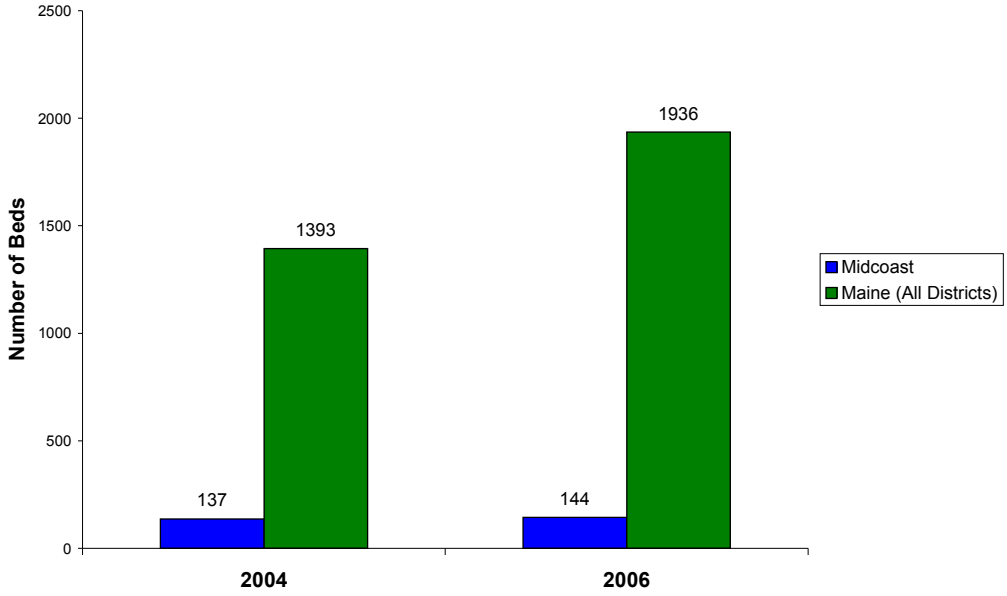
Source: MeCDC Regional Resource Centers

Healthcare System Surge Capacity
Average Number of Emergency Department Beds

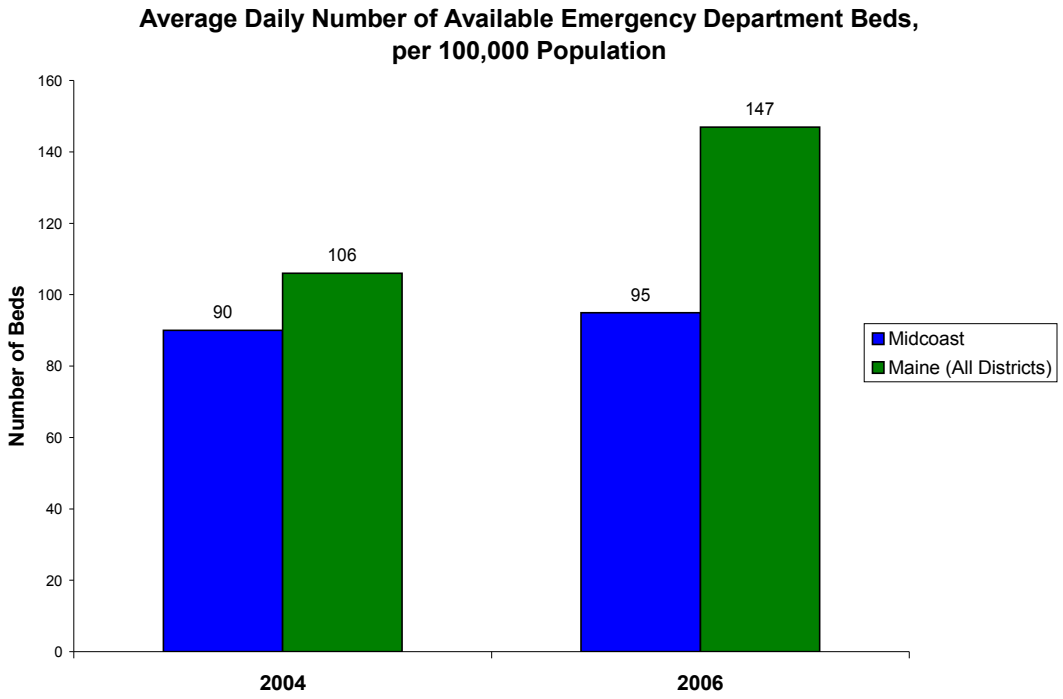
The term surge capacity may be generally defined as the relative ability of any organization or entity to continue to provide services when challenged by demands for those services that are significantly beyond ongoing capacity. Surge demands are often immediate in nature and may offer little warning. Integration of public and private medical capabilities with public health and other first responder systems is required to assure that Maine's healthcare and public health systems are capable of responding well to events that demand surge capacity in response to extreme public health emergencies, or high-impact events, such as a hurricane, severe ice storm or widespread biological or chemical attack.

The Maine CDC, Office of Public Health Emergency Preparedness works with partners statewide to develop operational healthcare system surge plans for the medical response to public health emergencies. Assessment of medical surge capacity in the State provides evidence of its current status and recent contributions to its improvement. There are a variety of indicators with which to assess surge capacity including the number of available hospital emergency department beds. This measurement defines the average number of emergency department beds available on any day, for a specific district and for the state.

Average Daily Number of Available Emergency Department Beds



Source: 2004/2006 MeCDC Hospital Assessment Report



Source: 2004/2006 MeCDC Hospital Assessment Report

The Strategic National Stockpile
Emergency Mass Medication Dispensing

The Strategic National Stockpile (SNS) is a national program that provides large quantities of medicine and medical supplies to protect the American public if there is a public health emergency (terrorist attack, flu outbreak, earthquake) severe enough to exhaust local supplies. Once Federal and local authorities agree that the SNS is needed, assets will be delivered to any state in the U.S. within 12 hours. Every state has plans to receive and distribute SNS medicine and medical supplies to local communities as quickly as possible. Medications are provided at Points of Dispensing (POD); public dispensing centers that are located in pre-determined sites throughout the state. Maine CDC, community leaders and local emergency management have defined sites that will be announced to the public at the time they are opened.

The Cities Readiness Initiative (CRI) is a key SNS activity that focuses on mass-dispensing of emergency medications in each state's most populated cities. In Maine, CRI is centered in Portland and will expand to two other locations within the next year.

The Maine CDC, Office of Public Health Emergency Preparedness manages the SNS program for Maine.