

## Preparation for the 2009 H1N1 Flu Pandemic

November 4, 2009

As you are aware, Governor Strickland officially declared an emergency that affects the public health on October 7, 2009. This declaration was made due to the national H1N1 influenza pandemic and the additional human resources that Ohio's public health agencies will need to quickly receive, distribute, account for, and provide vaccine to as many Ohioans as possible. Governor Strickland's declaration of emergency allows only EMT-Intermediates and EMT-Paramedics who are certified under Section 4765.30 of the Ohio Revised Code to perform H1N1 immunizations and administer drugs or dangerous drugs related to the H1N1 virus provided they have received the appropriate training and are under physician medical direction. To facilitate compliance with the training requirement, the "H1N1 Vaccinations for Ohio EMS Personnel" training module was created by the Ohio Department of Public Safety, Division of EMS in conjunction with the Ohio Department of Health. The training module is free-of-charge and posted on the Ohio Department of Public Safety, Division of EMS website at [www.ems.ohio.gov](http://www.ems.ohio.gov), and I hope the module has proven useful to all of you.

I have highlighted the importance of frequent hand washing and the utilization of personal protective equipment (PPE) to prevent the transmission of disease in each of my prior updates. During the H1N1 influenza pandemic, the adherence to frequent hand washing and donning appropriate PPE, including gloves, surgical masks, gowns, becomes even more imperative. Additional information on precautions that can be taken to prevent and control the transmission of influenza is described in Section 5 of the Ohio Department of Health's "*Infectious Disease Control Manual*" which can be accessed at <http://www.odh.ohio.gov/healthResources/InfectiousDiseaseManual.aspx>.

Pandemics impose unprecedented stresses upon our emergency care and health care systems, and, analogous to disasters, create scenarios where system needs often exceed the available resources. In these situations, there is a heightened necessity to direct limited resources in a fashion to provide maximal benefit to the affected populations. There currently a shortage of N-95 respirators nationwide. In response to this shortage, the Ohio Department of Health has released a guidance document for the existing supplies of N95 respirators. Effective today, the following actions should be considered by all healthcare workers including EMS personnel:

- Restrict use of N95 respirators to direct airway manipulation procedures including, medications, ventilation with Ambu bags, use of non-invasive positive pressure airway devices for respiratory support, and suctioning.
- Implement N95 reuse policies, as suggested by the Centers for Disease Control and Prevention's (CDC) "*2009 Influenza: CDC Guidance on Infection Control in Healthcare Facilities*" rather than routinely disposing of respirators after each use. (This document can be accessed at [http://www.cdc.gov/h1n1flu/guidelines\\_infection\\_control.htm](http://www.cdc.gov/h1n1flu/guidelines_infection_control.htm))

- Assure that respirators are not commercially available prior to requesting assets from respirator caches purchased with ASPR (Office of Assistant Secretary for Preparedness and Response)/Healthcare Preparedness Program grant funds or supplied by the Strategic National Stockpile (SNS).

In addition, any respirator approved by NIOSH/FDA (National Institute for Occupational Health and Safety/Food and Drug Administration) with a filtering efficiency of at least 95% is appropriate for use in controlling the transmission of H1N1 and seasonal influenza (e.g., N100, P95, R100, PAPRs (powered air purifying respirators), etc.).

- Employees required to wear respirators must be medically cleared, fit-tested, and trained to wear the type(s) of respirators they anticipate using.
- When respiratory protection is not required by an employer, but the employee voluntarily chooses to wear a respirator, the employer must provide training as well as a copy of OSHA's (Occupational Health and Safety Administration) Respiratory Protection standard, Appendix D. Additionally, employees may be required to be medically cleared depending on the type of respirator. (For additional information, refer to OSHA's Small Entity Compliance Guide for the Revised Protection Standard, Section E; <http://www.osha.gov/Publications/secgrev-current.pdf>.)

The implementation of this guidance inherently raises the issue of employer compensation for individuals who become ill from an influenza infection that can definitively be demonstrated to have been acquired in the workplace. I requested and received the current pandemic influenza policy from the Ohio Bureau of Workers' Compensation and it will be posted along on our website ([www.ems.ohio.gov](http://www.ems.ohio.gov)) as an informational resource for you. If you have any questions regarding this policy, I request that you contact the Ohio Bureau of Workers' Compensation directly ([www.ohiobwc.com](http://www.ohiobwc.com)). I am also posting a recent statement from OSHA regarding H1N1 inspections.

Many of our EMS agencies and emergency care systems are exploring varied dispatch and/or transport protocols as manpower and response resources are frequently becoming overwhelmed. During this pandemic, these protocols may serve as important avenues for resource allocation with the goal of directing valuable medical resources to those who need them the most. The EMS Board has approved the creation of a library of various protocols that communities and EMS agencies have found to be beneficial during this pandemic. These files of selected protocols will be posted on our website as an informational resource. We encourage those who wish to share your dispatch and transport protocols with fellow Ohio EMS agencies to submit them to the Ohio Department of Public Safety, Division of EMS. Selected protocols must be approved by the chief or the lead manager of the EMS agency as well as the physician medical director to be considered for posting on the website.

In closing, more patients are accessing our emergency care system than ever imagined. The daily census of many emergency departments has doubled since the onset of the H1N1 influenza pandemic, and EMS transports have simultaneously increased significantly. Needless to say, the patients who have suffered heart attacks, stroke, traumatic injuries, and other emergent illnesses have not and will not go away. The need for our services is not diminished during the days when a large percentage of our workforce may be unavailable due to illness. If your colleagues have not been vaccinated, encourage them to do so as prevention is the key measure to reduce the incidence of infection. The H1N1 influenza pandemic is anticipated to continue for months, and we will need all of you to bond together to support the residents and visitors of Ohio. For your continued invaluable service in the face of multiple challenges, I thank you.

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