



National Pandemic Plan Checklist: Ten Concerns to Watch for in the Anticipated Plan October 12, 2005

Issues	Questions and Concerns
1. LEADERSHIP	Who is in charge? Are questions of leadership resolved? Is there a single high-level official responsible for coordinating the government's response to pandemic influenza? Does the plan address leadership both during the planning stages and potential outbreak stages?
2. DISEASE SURVEILLANCE	Will measures be taken to improve efforts to track the disease globally and its possible spread to the U.S.? Will the U.S. increase support for the World Health Organization's global surveillance efforts? Will the U.S. increase its ability to achieve closer to real-time identification of a pandemic outbreak in the U.S.?
3. VACCINE PRODUCTION CAPACITY AND SUPPLIES	What specific steps will be taken to build production capacity and ensure enough vaccine for the entire American population? Is the U.S. increasing the amount of pandemic influenza vaccine in the Strategic National Stockpile? Is the U.S. committing to increased research for vaccines, through measures including "candidate" vaccines, dose-sparing approaches to vaccine administration, faster production technologies, and a permanent flu vaccine? Is the U.S. committing to contracts or policies that guarantee increased investment in production capacity by the vaccine industry to permit the 600 million doses of a pandemic vaccine that would be needed to protect the U.S. population? Are liability and compensation issues addressed?
4. ANTIVIRAL SUPPLIES	Is the U.S. planning to purchase enough antiviral medication for 25 percent of the population, the number the World Health Organization says countries should assume will become sick during a pandemic? Also, is increased research proposed to test other antiviral medications for activity against avian influenza?
5. MEDICAL SUPPLIES AND EQUIPMENT	Is the U.S. stockpiling enough other emergency medical equipment and supplies? Is the U.S. building the Strategic National Stockpile to address all potential demand or shortages during a pandemic, such as antibiotics, ventilators, masks, and gloves, and ongoing medical treatment needs for chronic care patients?

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<p>6. SURGE CAPACITY AND WORKING WITH STATES AND LOCALITIES</p>	<p>What steps will be taken to support health care surge capacity that would be required in a mass emergency and what support will be given to state and local officials to build and exercise their response plans? Does the plan identify steps states, localities, private health care institutions, and the federal health systems (VA, Department of Defense, community health centers, and the Indian Health Service) must take to increase surge capacity? Is there a commitment to provide resources to state and local health departments to increase preparedness? Is there a commitment to set minimum standards for state and local pandemic plans and require regular exercising of those plans?</p>
<p>7. QUARANTINES AND OTHER PUBLIC HEALTH MEASURES</p>	<p>Are quarantines, recommendations for use of masks, and other public health measures addressed in detail? Does the plan address the potential effectiveness of measures such as quarantine, restrictions of public gatherings, and use of masks? Does the plan address who has the authority to impose public health measures to assure effective implementation across the country?</p>
<p>8. COMMUNICATIONS</p>	<p>Are specific, consistent messages for informing the public, businesses, and the media in place? Is there a plan for educating the public in advance of a pandemic? Are materials prepared for communicating with various sectors, including the public, businesses, media, and medical communities for each stage of a pandemic? Is support provided to state and local health departments to assure consistent messaging?</p>
<p>9. WORKING WITH BUSINESSES AND OTHER SECTORS</p>	<p>Are all potentially impacted sectors, such as businesses and travel, addressed in the plan to ensure that the economy and communities could function during an outbreak? Are all relevant government agencies engaged at the federal, state, and local levels in contingency planning for their own ability to keep functioning through a pandemic, such as considering the potential impact on travel and transportation, the economy, business operations and stores, and schools? Is the U.S. providing guidance to the business community regarding continuity planning in case of severe absenteeism in the workforce or closure restrictions? Has guidance been provided to the medical community on continuing ongoing care needs during a mass-emergency?</p>
<p>10. FUNDING AND RESOURCES</p>	<p>Most importantly, does the plan include a request for enough resources to implement it? Are specific levels of funding identified for the various elements of the plan? For instance, state and local health departments cannot exercise their plans or create surge capacity without additional funding; and vaccine and antiviral manufacturers will not increase production without firm financial commitments from the federal government. TFAH estimates funding a comprehensive plan for pandemic preparedness could be between \$5-8 billion or higher, depending on levels of commitment to stockpile pharmaceuticals and support surge capacity functions.</p>