Isolation and Quarantine in a Public Health Emergency

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Roadmap

- Part 1: Background
 - Isolation and Quarantine Template
 - The inside story...
- Part 2: Practical Application
 - What is in the plan?
 - How can I use it?

Priorities and Regional Work Plans

- November 2012: Top Three Priorities
 - At Risk Population Planning and Recovery
 - Risk Communications Training
 - SNS Inventory Management System
- January 2013: Regional Work Plans
 - Mapping of Activities to address the 3 Priorities

Gaps and Strategies

- What's the use?
 - Policy determinate
 - Communications with partners
 - Documentation of basis for measuring progress
- What we've done with this so far
 - Engaged with NC Hospital Association's NC Community Health Improvement Collaborative
 - Collaboration with Community Health Assessment Team at NC DPH
 - Engaged with partner DHHS agencies' disaster coordinators
 - Training and exercise plans
 - Delivering on the strategies.....

Special thanks:
 ALL 85 Local Health Dept Preparedness Coordinators
 All regional office staff
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Overview of the Template

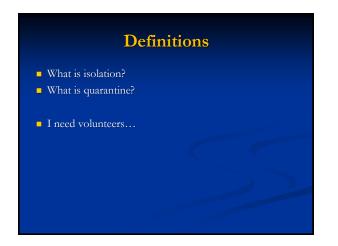
- Introduction & Definitions
- Purpose
- Scope
- Assumptions
- Authorities
- Continuum of I&Q
- Responsibilities
- Concept of Operations
- References, Appendices, Supplemental Materials

Disclaimers

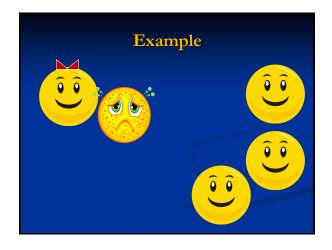
- The plan is LONG...
 - ...we wanted to put in absolutely everything that we could think of that you MIGHT need someday
- The plan uses "Preparedness Language"
 - Concept of Operations?!?
 - It is intended to be an official preparedness plan
 - ...but hopefully this will help demystify it!

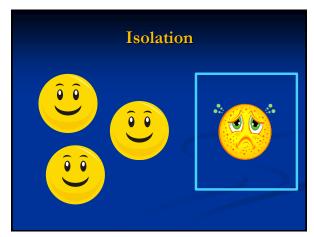
Introduction

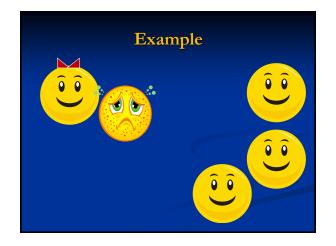
- Communicable diseases threaten the public's health
- Our job reduce that threat
 - Immunizations (prevent disease)
 - STD treatment (prevent spread)
 - Identify outbreaks (stop spread, protect others)
 - Isolation & quarantine stop or reduce spread, protect others)

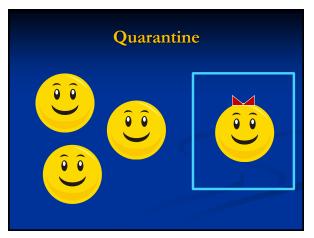


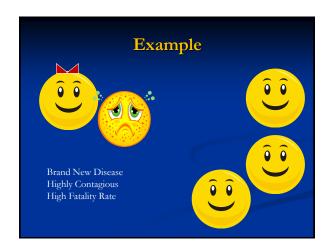
Definitions Isolation – For People Who are Ill Quarantine – For People Who have been Exposed but are not Ill

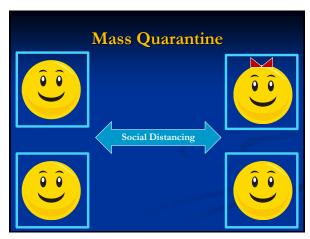












Purpose

- Establish decision making criteria
- Identify roles and responsibilities
- Describe procedures
- Identify additional resources

Scope

- Who does this plan apply to?
 - Your County Health Department
 - Partner agencies (MOU)
 - Community members that are ill/exposed

Assumptions

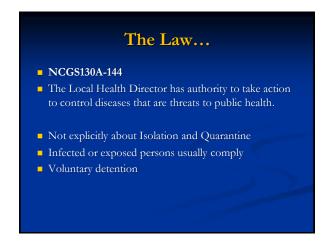
- Must address vulnerable populations
- Must protect PHI
- Applies to individuals and groups, but <u>not</u> places
- You are only responsible for your county
- Voluntary compliance will always come first
- Effective communication is key

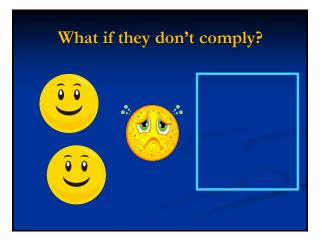
Authorities

- Who has the authority to implement I&Q?
 - Local health director
 - State health director (SHD)
 - Local health director's designee
 - Local health director in consultation w/SHD

Authorities Who has the authority to implement I&Q? Local health director State health director (SHD) Local health director's designee Local health director in consultation w/SHD

The Law... NCGS130A-144 The Local Health Director has authority to take action to control diseases that are threats to public health.





The Next Law...

- NC GS 130A-145:
- The Local Health Director or designee, at his or her sole discretion, may initiate involuntary detention of a person for purposes of isolation or quarantine.

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- NC GS 130A-145:
- The Local Health Director or designee, at his or her sole discretion, may initiate involuntary detention of a person for purposes of isolation or quarantine.
- Explicitly about Isolation and Quarantine
- Infected or exposed person refuses to comply
- Involuntary Detention

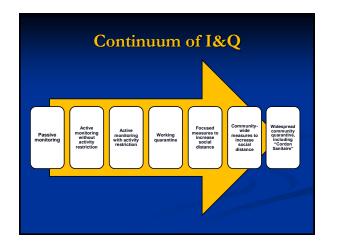
Implementation

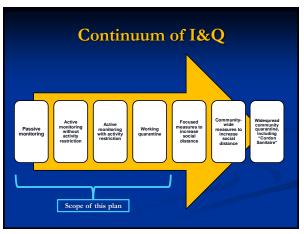
- Three Criteria:
 - 1. The public health is endangered, &
 - 2. All other reasonable means have been exhausted, &
 - 3. No less restrictive alternative exists
- Can be implemented for up to 30 days
- Extensions may be obtained through the court

Consequence

- NCGS 130A-25:
- A person who violates these will be guilty of a misdemeanor.







Responsibilities Coordinated effort Local Health Department Local Law Enforcement County Attorney Support agencies (Red cross, utility companies) Memorandum of Understanding Pre-planning with support agencies "Identify, Assess, Communicate, Agree"

Concept of Operations Answers basic questions Who is in charge? What is the reporting hierarchy? What teams might be necessary? What will each team do? What are the step by step directions? What is a communications plan?

Teams Use what works for YOUR county Two suggestions in the template Epidemiology Team Clinical Operations Team

Epidemiology Team "Keep counts, have the BIG picture" Make contact with person Determine if they need I&Q Hand them off to clinical operations Keep counts of how many I&Q orders Perform contact investigations Have "big view" of outbreak

