Pandemic Response Plan

I. Introduction

A pandemic is a disease which spreads over a wide geographic area and which affects a high proportion of the population. Pandemics which are mild in intensity have occurred in living memory and are not the subject of this report, as they can be dealt with by individuals and the existing health care system without local government intervention. Pandemics with high mortality rates, however, can equal or exceed the other types of disasters addressed in our Emergency Operations Plan in terms of disruption to our community.

In 1918-1919, such a pandemic occurred with the Spanish Flu. Millions of people all across the world died, killing more people than World War One. In recent years, the world has been preparing for Avian Flu (H5N1), which has a much higher mortality rate than the Spanish Flu, but so far has not mutated into being easily transmissible from person to person. As of this writing, there is a Swine Flu pandemic occurring (H1N1), although the lethality rate of this pandemic appears to be very low (except in Mexico, where there have been significant numbers of deaths recorded).

As with all disasters, the likelihood of a highly lethal pandemic occurring in our lifetimes may be judged to be low. However, if the worst should happen, it is important to be prepared so that valuable time will not be lost deciding what to do. In the event of a pandemic, the role of the Borough of Chambersburg will be two-fold. Our first concern will be to continue to provide the same services to our residents that they have always received. Second, we have a duty to try and mitigate the effects on the community.

This document is a plan to make sure that we can meet these objectives. It will be triggered in stages according to the Center for Disease Control’s “Phases of Pandemic Alert” (see appendix A). Aspects of the plan may also be triggered by notice from the State or Federal government. Alternately, in the absence of this determination from higher levels, either the Borough Manager or the Mayor of the Borough of Chambersburg, through his ability to declare a disaster emergency, may initiate the implementation of this plan.
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II. Continuity of Operations

A. In General

The first challenge to the Borough in a pandemic will be to provide the same level of critical services to our residents as have always been provided. For the purposes of this report, “critical services” are defined as police, fire/ambulance, and utilities. Other Borough staff will be considered to be critical only if their lack will prevent the other three areas listed above from functioning (For instance, Borough Council and Borough Manager’s Office, which directs the departments, and the Mayor, who directs the Police Department and also has critical emergency management powers, are also considered to be critical staff.)

B. Protecting the Work Force

The first step in protecting the workforce is education. This can start with the simple basics: reminding employees to wash their hands frequently. This can be supported with posters that remind people of the basic necessities of cleanliness and healthy living.

In addition to education, physical efforts to disinfect work spaces should also be undertaken. Front counter staff can be provided with hand sanitizer. The janitorial staff can wipe down work surfaces twice a day with disinfecting wipes.

Also worth considering is limiting contact with other people as much as possible. This would mean that we would reduce the number of meetings to only the most critical, discouraging shaking hands with visitors, installing plexiglass shields where the public interacts with receptionists, and encouraging people to work from home whenever possible.

Supervisors should be encouraged to monitor their employees. Employees who exhibit flu-like symptoms should immediately be sent to the Borough doctor for a fitness for duty exam. If this is not possible, employees should be ordered to go home until such time as they feel healthy, at which time they can report for duty (and the supervisor will decide anew if they are healthy enough to work). Those employees who have no accrued sick leave should be allowed to borrow sick leave from future years if they are sent home or if they call in sick and request that this be allowed.

Finally, the Borough may have the option to purchase vaccines or other drugs to address the illness. This decision will be based on cost, ability to store the materials until needed, likelihood of receiving supplies from the state, and effectiveness. (For both the Avian and swine flu viruses, Tamiflu is a possible drug to consider stockpiling. At this time, however, the recommendation is not to stockpile, as it is very expensive; it is not
necessarily effective against avian flu and may not store long enough to be useful if needed; and state and federal stockpiles may become available for free).

If vaccines become available in limited supplies, it will be necessary to prioritize who among the employees will receive these supplies and who will not. The suggested priority, based upon what entities are most likely to mitigate the pandemic for our citizens, is as follows:

1. Management Staff (Manager’s Office; Mayor and Town Council; Board of Health; Borough Solicitor). Management is crucial in a pandemic as it alone can make decisions on operations for all the departments, and can coordinate with higher echelons to receive crucial supplies.

2. Emergency Services Department: Ambulance staff are a crucial part of the health care system. Includes the Emergency Management Coordinator.

3. Police Department: If civil disturbances should break out, no other department will be able to function.

4. Utilities: Necessary for health and welfare of the citizenry. Supports other operations. Priority within this category is based on how much other departments rely on their services: electric; gas; water and sewer.

5. Public works: Assists the utilities.

6. Finance and office staff: Supports the above operations.

7. Immediate family members of the above (spouse and children). As previously noted, sick family members may cause the absence of the above crucial employees.

8. All other employees.

9. Family members of other employees.

In all cases, the Borough Manager (or his designee) is the final arbiter of the distribution of all supplies.

C. Departmental Challenges

There are three specific challenges each of our departments must be prepared to meet. The first challenge will be in the reduction in personnel to carry out the normal functions of the department. It is assumed that there will be significant personnel shortages, either due to employees being sick, taking time off to care for sick relatives, or because they are afraid to come to work and risk infection. The numbers of employees who are absent
during this crisis are purely speculative, but for planning purposes, I am recommending that all department heads prepare to operate with a reduction in their work force of 50%.

Second, each department may be faced with shortages in critical supplies, and must therefore plan now to have at least a 30 day inventory of critical supplies on hand.

Finally, each department may have special challenges related to its function. All three challenges will be addressed below.

D. The Emergency Services Department

The Emergency Services Department is fortunate in that little to no special cross training is required in the event of personnel shortages. Additionally, the 24 hour nature of the operation means that off-duty personnel may be summoned to fill in vacancies. All fire fighters are able to carry on the basic functions of the department, which is to fight fires. The greater challenge may be the ambulance, since there are some senior members of the department who have not gone on an ambulance run in years. These employees should be provided with training to make sure they can cover for other employees who might become indisposed during a crisis.

Most supplies for this department are stockpiled to allow at least a 30 day supply.

Whereas there would not be any likely change in the nature of fire emergencies, ambulance operations may be strongly affected by a pandemic. The number of people who request assistance in travel to the hospital may be increased. Additionally, the exposure of our ambulance workers to the virus will be greatly increased; as such, personal protective equipment, including full masks with eye protection, may be required for all calls during this period. Employees who are exposed to the virus should be decontaminated after operations to avoid carrying the virus to others. Requisite supplies should be acquired now and employees trained in their use.

E. The Police Department

The Police Department is similar to the Emergency Services Department in that all of the police officers are able to carry on the basic operations of the Police Department, i.e., patrolling and arresting criminals. Training in specialized investigative skills (lie detector operation, for instance) should be expanded so that each unique skill has at least two back up operators. As the Police Department is a 24 hour operation, there are enough officers available from off shifts to easily keep the department at normal manning levels even assuming 50% absenteeism; the Chief will have to monitor this closely to address officer fatigue, however.
Most Police Department supplies are already stockpiled to address surge situations, such as ammunition. Contact should be made by the Police Chief with allied organizations that provide crucial services (County prison and State Police, for instance) to ensure that they will be able to continue to assist in the event of a pandemic crisis.

In a crisis, the Police may have to deal with episodes of civil strife related to shortages. If anti-viral medications become available on a limited basis, an ongoing presence at the POD (point-of-distribution) may become necessary. It is also possible (if very unlikely) that Police will be called on to close down public assemblies and to enforce quarantines. Finally, police officers may also be subject to exposure to any virus on a higher than average basis, and should take precautions by using the proper protective equipment.

F. Utilities

All Chambersburg utilities provide 24 hour operations; most facilities, therefore, are staffed for 24 hour operations, and therefore have enough people to staff operations in the event of high absenteeism. As with other departments, department heads must monitor this so that healthy employees are not made ineffective through fatigue. Street crews and some facilities (such as the Waste Water treatment plant) do not have this reserve of employees, and should take steps to cross-train their employees in critical functions. Additionally, utility street crews have a long history of providing mutual support; pooling crews to ensure at least one functioning crew is available for emergencies may be necessary.

All utilities have certified that they have enough supplies on hand for continued operations for at least three months. (Natural gas is a variable in this, but there is no control we can exert over national production and transmission.)

There is no anticipated surge in demand for utility services during this crisis.

G. Public Works

This category is meant to include all sections under the control of the Public Works Director.

As noted, the Public Works department exists primarily to support the utilities, but also has many other functions (such as sanitation). Sanitation is one area where support from other departments may be needed in the event of high absenteeism. Alternately, decreased frequency of trash pick-up may be necessary.
One crucial area that must be monitored is storage of gasoline and diesel for vehicle operation. Fortunately, the Borough typically stores about four weeks worth of fuel, which should be sufficient to get through any supply disruption.

As with the utilities, there is no anticipated increase in demand or services for this department.

**H. Other Departments**

Other departments are considered to be non-critical and therefore, staffing considerations are not an issue. It is possible that some employees from these departments will be tasked to help out in other departments that are having absentee problems. This is not to say that we will expect secretaries to become police officers or firefighters, for instance; however a secretary may be called from finance to replace a police secretary if needed. Again, the critical departments should prepare now by requesting to train non-departmental people to support them during a crisis.

As with all departments, social distancing will be a highly effective tool. This may mean that instead of entering homes of sick people to read meters, estimating or using remote meters will be done instead. With most sporting events cancelled, the Recreation Department will likely be shut down (with employees tasked to help out in other departments).
III. Managing the Crisis in the Community

The Borough of Chambersburg is not a health care provider. The primary burden for responding to a medical crisis will rest upon the medical community—the hospital, the private doctors, and the individual.

Nevertheless, the Borough can exert a very powerful influence on the speed that the community recovers from a pandemic. This will involve significant moral, legal, and physical challenges, which we will address below.

A. Education

As with our own employees, the Borough should assist health providers and the media with putting out information to the general public concerning the best ways to combat the pandemic. The Borough web site can quickly get the word out to anyone with internet access. Utility bill fliers can be effective if timeliness is not an issue. Probably the best method of educating the public will be with the media. Indeed, if a pandemic is occurring, the media will likely have already informed the public without any assistance from the Borough. Nevertheless, the media and other information outlets can be invaluable assets for informing the public of local items of interest related to the pandemic.

B. Social Distancing

One of the most effective methods for controlling the spread of disease is to discourage public assembly, known sometimes as “social distancing.” Once a pandemic is imminent, the Borough should consider cancelling all but the most necessary Borough sponsored events. This will include athletic events, most public meetings, parades, etc. Public gatherings not under the Borough’s direct control can initially be discouraged, but outright bans on public assembly are problematic from both a legal and a moral point of view. More than likely, if the Borough is considering such drastic action, this will have been addressed elsewhere across the state and the nation, and we will be able to follow the guidance of these higher echelons of government before we decide on such stringent measures on our own.

Equally problematic is the possibility of quarantining private homes. The Borough Code implies that the Health Board can do this, although enforcement (especially considering the personnel shortages we may be experiencing in the Police department) will be difficult. At least, quarantined homes can be posted as such, warning visitors that they enter at their own risk; and this, indeed, may do some good. (The Board of Health can also fine violators of quarantine up to $300 or 30 days imprisonment.) As with the above,
guidance on this extreme measure will likely be forthcoming from the state or federal
government in the event of an emergency, and we should await this guidance prior to
taking any action.

C. Assistance Provided by the Faith-Based Community

The 1918-1919 Spanish Flu saw many instances of whole families that have become so
sick that they were literally unable to take care of themselves. At the most basic level,
this translates as being unable to feed themselves. One logical solution to this problem
would be to find an organization (or organizations) with both compassion for the sick,
and the ability to produce food in quantity. This need can most clearly be met by the faith
based community.

Upon the outset of a Pandemic emergency, the Borough should advertise that families
who are too sick to care for themselves should contact the Borough offices (264-5151).
At this point, the Borough would attempt to seek help through the faith based community
in one of two ways. The first method would be by contacting VOAD (Volunteer
Agencies Active in Disasters). As of this writing, VOAD is attempting to develop a
database of individuals in the faith based community that could deliver services to
families in need.

If, at the time of the pandemic, VOAD has not developed a working system, the Borough
will contact the Churches directly to solicit aid. The request will be made to the closest
Church or Synagogue to the requestor irrespective of denomination. If they can meet the
need, they will deliver the food to the door of person who called. If they can’t meet the
need, the next closest house of worship will be contacted. As this document can’t make
plans for any person who lives outside the Borough, non-residents who call will be
directed to call their houses of worship directly.

Upon approval of this document by Borough Council, all churches in the Borough will be
contacted to inform them that their assistance may be requested during a pandemic.

D. Coordination with Other Borough Organizations

Besides the Borough itself and the faith-based community, there are a number of other
“stake-holders” who will be involved in the recovery effort from a pandemic. These
organizations include:

- Chambersburg Hospital. As the lead agency in any pandemic crisis, the hospital is
  a critical organization to coordinate with. The primary role of the Borough in its
  relationship to the hospital will be to provide whatever assistance is requested. So
far, no assistance has been requested; however, the Borough does have building space (Clark Recreation Center) which could be converted into additional hospital space if needed. The Hospital also receives reports of infectious diseases anywhere in the area; the Board of Health may request frequent updates as to locations of infected houses if posting of properties is to be considered.

- **Franklin County.** The County will control the sites where the vaccines and other supplies will be distributed (Points of Distribution). No details concerning the PODs have yet been disseminated. Franklin County Emergency Services Department also has dedicated staff who are continuing to receive updated information about pandemic crisis world-wide.

- **School District.** In the event of a pandemic, the Board of Health can advise the School District on the necessity of closing down.

- **Chamber of Commerce.** The Chamber of Commerce can act as the point of contact for disseminating information to the Business Community. This can be a reinforcement of health advice to employers on how to protect their employees, and also advice on stocking up on critical supplies in order to keep their businesses going.

### III. Summary

As noted previously, a highly lethal pandemic may be considered unlikely, but it certainly isn’t impossible. The Spanish Flu occurred less than 100 years ago, and was truly devastating. The following is a quote from a review of the book “The Great Influenza”, by John M. Barry:

According to Barry, those still healthy were too panicked by the disease's violent symptoms (rib-cracking coughing spells, intense pain, a cyanosis of the skin so deep blue its like has never been seen since) to even look in on their ill neighbors. Some of the sick, and their children with them, simply starved to death for lack of attention.

He also quoted Victor Vaughan, Surgeon General of the Army at the time—not, according to Barry, some fribbertigibbet given to impulsive pronouncements. In October 1918, Vaughan said, "If the epidemic continues its mathematical rate of acceleration, civilization could easily disappear from the face of the earth within a few weeks." Photographs taken of big cities at the time reveal virtual ghost towns: empty sidewalks and streets, with only a few mask-wearing city workers or an ambulance in sight.

The Spanish Flu killed at least 40 million people world-wide. Would a new epidemic be as severe? Consider that the Spanish Flu had a mortality rate of between 12 and 24 percent for those who caught it. Today, with all our modern medicines and practices, the mortality rate for avian flu is between 40 and 57 percent.
Appendix A: Center for Disease Control
Phases of Pandemic Alert and Associated Borough Actions

**Phase 1**: No new influenza virus subtypes have been detected in humans. An influenza virus subtype that has caused human infection may be present in animals. If present in animals, the risk of human infection or disease is considered to be low.

**Borough Actions**: None

**Phase 2**: No new influenza virus subtypes have been detected in humans. However, a circulating animal influenza virus subtype poses a substantial risk of human disease.

**Borough Actions**: Discuss with County Emergency Management and Chambersburg Board of Health

**Phase 3**: Human infection(s) with a new subtype but no human-to-human spread, or at most rare instances of spread to a close contact.

**Borough Actions**: Review Pandemic Response Plan with Board of Health. Begin educating public through web site material. Stockpile required pandemic supplies. Initiate regular contacts between Board of Health and Hospital epidemiologic staff and Franklin County. Discuss stockpile of Tamiflu or other medical supplies. Direct Department Heads to cross-train crucial staff positions.

**Phase 4**: Small cluster(s) with limited human-to-human transmission but spread is highly localized, suggesting that the virus is not well adapted to humans.

**Borough Actions**: Review Pandemic Plan with Department Heads. If not previously agreed to, discuss purchase of Tamiflu or other medical supplies.
**Phase 5:** Larger cluster(s) but human-to-human spread still localized, suggesting that the virus is becoming increasingly better adapted to humans but may not yet be fully transmissible (substantial pandemic risk).

**Borough Actions:** Brief elected officials. Begin anti-septic wipe downs of counters. Issue hand sanitizer to front counter staff. Educate employees in pandemic avoidance. If not previously done, discuss purchase of Tamiflu or other medical supplies.

**Phase 6:** Pandemic: increased and sustained transmission in general population.

**Borough Actions:** Once Pandemic Phase 6 occurs, The Mayor, Borough Council, and the Borough Manager should discuss declaring a pandemic emergency, and deciding which of the following steps should be initiated: Cancel Borough sponsored public meetings. Monitor State and Federal guidelines on closure of public assemblies and quarantine of infected residents. Begin social distancing including telecommuting where feasible. Consider limiting contact with the general public, taking utility payments through the mail or through the drop off window only. If not previously done, discuss purchase of Tamiflu or other medical supplies.

Notes: The distinction between **phases 1 and 2** is based on the risk of human infection or disease resulting from circulating strains in animals. The distinction is based on various factors and their relative importance according to current scientific knowledge. Factors may include pathogenicity in animals and humans, occurrence in domesticated animals and livestock or only in wildlife, whether the virus is enzootic or epizootic, geographically localized or widespread, and other scientific parameters.

The distinction among **phases 3, 4, and 5** is based on an assessment of the risk of a pandemic. Various factors and their relative importance according to current scientific knowledge may be considered. Factors may include rate of transmission, geographical location and spread, severity of illness, presence of genes from human strains (if derived from an animal strain), and other scientific parameters.
Appendix B:

Excerpt from the Commonwealth of Pennsylvania “Borough Code”

Section 3106. Powers of Board of Health. – The board of health shall have the power, and it shall be its duty to enforce the laws of the Commonwealth, the regulations of the State Department of Health, and all ordinances of the borough enacted to prevent the introduction and spread of infectious or contagious disease; to abate and remove all nuisances which the board shall deem prejudicial to the public health; to mark infected houses or places; to recommend rules for the construction and maintenance of house drains, wash pipes, soil-pipes and cesspools; and to recommend all such other rules and regulations as shall be deemed necessary for the preservation of the public health. Such rules and regulations shall not become effective until they have been approved by the borough council and enacted as ordinances of the borough. The board shall also have the power, with the consent of council, in case of a prevalence of any contagious or infectious disease to establish one or more emergency hospitals, and to make provisions and regulations for the maintenance and management of the same.

The board shall also have the power to recommend to council all necessary rules and regulations not inconsistent with law, for carrying into effect the powers and functions with which the board is invested by law, and the power and authority relating to the public health conferred on boroughs. Such rules and regulations shall not become effective until they have been approved by the borough council and enacted as ordinances of the borough.