



# **Government of Saint Lucia**

## **National Influenza Plan**

### **Volume 0: Policy on Influenza**

*Document of the Saint Lucia National Emergency Management Plan*

*Developed by NEMO Secretariat with components from:  
Saint Lucia Ministry of Agriculture Influenza Plan, Saint Lucia Ministry of Health Influenza Plan,  
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[www.spc.int/phs/PPHSN/Outbreak/Influenza/nauru\\_pandemic\\_flu\\_plan\\_draft-version4.doc](http://www.spc.int/phs/PPHSN/Outbreak/Influenza/nauru_pandemic_flu_plan_draft-version4.doc) and  
<http://avian-influenza.w3j.com/policy.htm>*

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## **Preamble**

### **NATIONAL INFLUENZA PLAN**

The National Influenza Pandemic Preparedness Plan is a collection of Documents as listed below.

The procedures are supported by the Saint Lucia National Emergency Management Plans, Policies, Legislation and Standard Operating Procedures.

#### **Volume**

0. Policy
1. Concept of Operations
2. Strategic Plan
3. Communications Strategy
4. Ministry of Health Plan
5. Ministry of Agriculture, Fisheries and Forestry Plan
6. Ministry of Education Plan
7. Law Enforcement, Public Safety, and Security
8. Essential Services
  - a. Ministry of the Public Service
  - b. Saint Lucia Fire Service
  - c. LUCELEC
  - d. Digicel
  - e. LIME
  - f. WASCO
  - g. SLASPA

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## INTRODUCTION

By Ministry of Agriculture and Ministry of Health

The protection of life and property and the alleviation of suffering and hardships caused by disasters is the fundamental responsibility of government. Being cognizant of these responsibilities the government of Saint Lucia is determined that they are met. The overall policy of the government regarding disaster management is to establish and maintain the optimum system for mitigating the effects of disasters. The government has therefore established and implemented program for disaster preparedness and response coordinated by the national office, which has responsibility for coordinating all disaster management activities.

This commitment must expand to embrace new and emerging threats such as the one posed by Avian Influenza.

Influenza is a viral respiratory disease affecting humans and certain animals. Clinical disease ranges from mild non specific illness to life threatening pneumonia and death, depending on the nature of the influenza strain and host characteristics. Human influenza is usually a recurrent seasonal illness which occurs at various times of the year in different continents (for example, typically late winter and spring in temperate countries of the Northern hemisphere). Although seasonal human influenza is certainly responsible for excess seasonal mortality every year all over the world (particularly at the extreme ages of the life and chronically ill), the usual mortality rate is relatively low and only minimal disruption of essential services occurs during a normal influenza season.

However, when a **completely new strain of influenza** emerges among human populations, mortality rates can be much higher than usual (generally from severe respiratory disease); spread can be nearly universal, sometimes within a matter of months, and disruption of all sectors of the society. Such a situation is called a “pandemic.” Major influenza pandemics have occurred three times during the last century, respectively in 1918 (Spanish flu), 1957 (Asian flu) and 1968 (Hong Kong flu). The 1918 pandemic was especially dramatic, causing at least 20 million deaths worldwide. Evidence shows that these new influenza pandemic strains usually originate from animal influenza viruses.

Outbreaks of Avian Influenza are becoming progressively more expensive to control and the economic impact on producers and consumers is very significant and is a reflection of the growth of the poultry industry worldwide. Diagnosis of this disease requires immediate control measures to limit its spread and to avert international embargoes on export of poultry and poultry products from affected countries.

The introduction of Avian Influenza to Saint Lucia would greatly affect this country's dependence on the importation of poultry, poultry meats and its products. A functional hatchery does exist in Saint Lucia but hatching eggs are imported as well as day old chicks for production purposes. The consumption per capita of poultry meats is so high that the local production is unable to meet such demands. Over 80% of poultry meats consumed in Saint Lucia is imported,

but the country is self sufficient in table eggs. All of these factors increase the risk of introducing the Avian Influenza and the catastrophic impact of the disease if it does enter Saint Lucia.

This policy encourages all those within their organizations as well as frequent visitors etc. to take steps to be safe. Particular attention should be paid to those that have been traveling into areas where the Avian Flu has been detected at current alert levels. As levels increase this will broaden to include those who may have been in a group situation or have friends or family members that have been exposed or are ill.

## *DEFINITION*

### **Seasonal Influenza**

Seasonal influenza or “the flu” is a respiratory illness spread from human to human. It tends to occurs with the start of the school year.

### **Avian Influenza (Bird Flu)**

Avian influenza is a disease that is common among birds, and rarely causes human illness. H5N1 is the current strain of concern worldwide.

### **Pandemic Influenza**

Pandemic influenza results in a global outbreak of the flu that can occur at any time of the year. Scientists do not know when the next pandemic may occur.

## *PURPOSE*

The purpose of this policy is to define the context for the establishment, maintenance and provision of an emergency response to a pandemic within the national emergency management system and available resources.

## *GENERAL POLICY*

It is the policy of the Government to take action to mitigate the effects of natural and other disasters within its available resources. This policy is designed to be of service to the community augmenting the resources of the private sector and non-government organizations to cope with needs resulting from a threatened pandemic or its aftermath.

The functions and services of the national emergency shelter management programme will be maintained in a constant state of readiness in accordance with the national policy for disasters.

## *GOALS OF THE PANDEMIC POLICY*

The Government of Saint Lucia is committed to doing all within its power to prepare for and mitigate the risks of a pandemic to the Government's business and its stakeholders including customers, vendors, employees and contractors as well as their families.

The Government of Saint Lucia will provide education preparedness, policies and procedures as well as strict adherence to the best practices and recommendations of such trusted sources as the World Health Organization CDC, International Red Cross, as well as local and national sources.

The Government of Saint Lucia is committed to fully communicating information to its stakeholders and creating an environment where personal safety and welfare are of the utmost importance.

The goal of the pandemic policy is to:

- a. Ensure that victims of a pandemic have access to the necessary available care.
- b. Establish a mechanism for the provision of services.
- c. Link pandemic management with the national relief and welfare programmes.
- d. Where possible to respect the cultural and religious needs of victims.

## **POLICY STATEMENTS**

### *CONTINUITY OF OPERATIONS*

Government will ensure proactive planning with emergency management, public safety, and government officials to help integrate essential private sector operations into community emergency response plans.

Government will also ensure that its Ministries, Departments and Statutory Authorities shall have continuity plans to ensure essential services are provided if significant numbers of employees become ill during the outbreak as well as if disruptions in other sectors they depend on occur. Ideally such plans should address issues such as the reassignment of personnel to perform critical functions, encouraging personnel to have plans to take care of their families while they are assigned to critical functions, and determining at what point it would be necessary to seek additional assistance.

### *NATIONAL SHUTDOWN*

This policy is intended to make clear that pandemic is a situation where disease is easily spread from person-to-person; it is not safe for large groups of people to gather and as such there

may be a need for a temporary ceasesion of functions as articulated in the Government's *National Shutdown Policy*.

## *AGRICULTURE*

Where the Influenza virus is confirmed all back yard birds will be stamped out.

In the event of an outbreak, an appraisal team will be deployed to value the birds, products and materials destroyed because of infection or exposure to avian influenza.

Compensation will only be given to owners whose birds are caged, or can show proof of ownership for loose birds.

## *HEALTH*

### **Ventilators**

The ventilator policy would take effect in the event of a severe pandemic – such as the 1918 "Spanish Flu" – resulting in a critical shortage of the breathing devices and staff to operate them. It calls for clinicians to evaluate patients based on objective, universally applied medical criteria. Non-clinical factors such as race, ethnicity, socio-economic status, perceived quality of life or ability to pay would not be weighed in the decision-making process.

- In an overwhelming pandemic with a severe shortage of ventilators and staff to operate them, access to ventilators would depend only on which patients have the greatest medical need – and the best chance of survival – if they receive ventilator support.
- Access to ventilators would be limited based on clinical factors that pose the highest probability of mortality, such as: cardiac arrest; end stage organ failure; severe irreversible neurologic condition with high risk of death; metastatic cancer with high risk of death. Age, non-life threatening disability and "social worth" are not exclusion criteria.
- Hospitals will designate supervising physicians who will act as triage officers. These supervising physicians will take responsibility for triage decisions. Doctors who provide direct care for patients will not be asked to make the decision to withhold ventilator support.
- These guidelines would apply only in an acute care setting (when patients are admitted to a hospital or treated in the emergency department). The guidelines would not cause patients in chronic care facilities to lose access to ventilators.
- Palliative care will play a crucial role in providing comfort to patients, including those who do not receive ventilator treatment. The Ministry of Health is collaborating with the Hospice and Palliative Care Association to expand capacity to provide palliative care and



bereavement counseling. Every effort will be made to keep patients comfortable. Patients will receive medications to treat pain and to reduce anxiety.

## Vaccine

Vaccine development cannot commence until the pandemic virus has been isolated. It is expected that no specific pandemic influenza strain vaccine will be available initially. If it becomes available, it will likely be difficult to obtain sufficient doses for the entire population.

Saint Lucia does not have the capacity to manufacture vaccines.

It may take 6 – 12 months after the declaration of a pandemic by WHO before vaccine is generally available for use in Saint Lucia.

The following list should therefore also be used to prioritize persons who will first receive the vaccine.

- |                 |   |
|-----------------|---|
| First Priority  | <ul style="list-style-type: none"><li>▪ National Influenza Committee</li><li>▪ Front Line Doctors</li><li>▪ Nurses, Nurse Aides, Medical Auxiliary Corps</li><li>▪ Medical Laboratory Staff</li><li>▪ Emergency Medical Personnel [e.g. Ambulance Drivers, EMTs, Red Cross, St John Ambulance etc.]</li><li>▪ Pharmacists</li><li>▪ Agriculture Front Line Officers</li><li>▪ Police First Responders</li><li>▪ Fire First Responders</li><li>▪ Medical Quarantine Officers</li><li>▪ Customs Officers</li><li>▪ Immigration Officers</li><li>▪ Port Health Officers</li><li>▪ NEMO Staff and Volunteer Front Line Officers</li></ul> |
| Second Priority | <ul style="list-style-type: none"><li>▪ Governor General</li><li>▪ Prime Minister</li><li>▪ Cabinet Members</li><li>▪ Cabinet Secretary</li><li>▪ Leader of the Opposition</li><li>▪ National Emergency Management Advisory Committee</li><li>▪ Police Officers</li><li>▪ Airport Personnel</li><li>▪ Fire Services</li><li>▪ Communication Officers</li><li>▪ Staff of Utilities (water, electricity, fuel)</li><li>▪ Sanitation Workers</li><li>▪ Meat Processing/Live Stock Farmers</li><li>▪ Judiciary</li></ul>  |

## *NEEDS OF PERSONS CONFINED TO THEIR HOMES*

Persons may be confined to their homes by choice, out of fear of being exposed and becoming ill or by direction from health officials in order to reduce transmission in the community. Persons may also be confined to their home due to a disability.

The provision of food, medical and other essential support for persons confined to their homes will be the responsibility of in the first instance individuals, as the pandemic response required an activation of the National Response Mechanism the responsibility shall transfer to the Agencies of NEMO. House Holds and Communities are encouraged to make use of civic organizations and other volunteers to meet their needs. For instance, Social Groups already engaged in providing services to the homebound (Meals-on-Wheels, etc.) may become the nucleus for voluntary efforts to provide services to people confined to their homes.

## *LAW ENFORCEMENT AND PUBLIC SAFETY*

Ensuring the health and safety of law enforcement officers and others who may be called upon to respond in a pandemic influenza outbreak or any other public health emergency is critical. The Government shall ensure that law enforcement and public safety community shall take appropriate protective measures to minimize their risk of infection, and selected personnel shall be provided training to ensure they are knowledgeable about these measures.

## *EDUCATION*

### Education System

In the event of an avian influenza (AI) pandemic, the Ministry of Education will be responsible for the well-being of the large number of teachers, students, and parents. Schools are a potential focus of transmission. They are also a potential source of positive information and behavior change that can prevent transmission and contain the spread of a pandemic in the school age population.

### The Use of Schools as Shelters or Hospitals

It should be stated at the start that all schools should not automatically be considered for use as shelters or hospitals. Schools, before identification and selection as shelters, will meet specified standards. The schools should meet established criteria as laid out in the Government's *Emergency Shelter Policy*.

## TRANSPORTATION

Government will ensure proactive planning with emergency management, public safety, and government officials to help integrate essential transportation operations into community emergency response plans.

### **Mass Transit:**

Every day, private-sector mass transit organizations transport thousands of passengers, and to a lesser extent, goods and services, by various modes, including bus, ferry and taxicab. Mass transit's role in sustaining the nation's economy is significant. Disruption to these services may cause local, regional, and national challenges.

### **Maritime:**

The Maritime sub-sector serves the nation by moving critical goods and people across the world's oceans and along coastal waterways. Given the importance of maritime trade to the economy disruptions to it can have immediate and significant economic, social and national defense impacts.

### **Aviation:**

The Aviation sub-sector is primarily a service industry that provides safe and secure regional and international movement of goods and people by air. Aviation has two distinct roles in pandemic influenza planning. First, as a potential vector of disease, air travelers can spread infection around the globe in a matter of hours. Second, the Sub-sector supports pandemic influenza response needs while sustaining basic economic stability.

Passenger and cargo carriers as well as private aviation have grown rapidly in the last 30 years. As these critical capacities have increased, so too has the reliance on them for business and leisure travel and delivery of "just in time" goods. A service disruption may severely challenge local, national and regional economic and social stability. In carrying out the primary service of transporting passengers and goods while ensuring passenger, worker, and operational safety and security,

## TOURISM

Tourism is an important engine of Saint Lucia's economy. It is also a potential avenue for the international transmission of avian influenza (AI) into or out of Saint Lucia. In the event of an avian influenza (AI) pandemic, the Ministry of Tourism will have responsibility for monitoring the spread of the disease to and from travelers and protecting both the tourists and the population of the island. The Ministry will communicate timely, accurate, and understandable information

about the outbreak to travelers, travel companies, the media, policymakers, international organizations, and the public.

## *TRAVEL*

Should public health officials determine that an ill passenger meets the clinical and epidemiologic criteria for infection with a novel influenza strain, the patient shall be sent by ambulance to a hospital, using appropriate infection control procedures for transit and patient isolation.

The Ministry of Health, in consultation with CAREC and PAHO, shall decide how to manage an ill person's travel contacts on a case-by-case basis, taking into consideration protocols as laid out in the National Plan.

Once the pandemic has spread outside and within Saint Lucia, screening for arriving ill passengers will become less useful and feasible. Although exit-screening of travelers from affected areas ("source control") is likely to be a more effective disease control measure, its effectiveness will be limited.

### Travel into Saint Lucia

If the situation worsens overseas and there is extensive and sustained transmission in other countries, the Government shall consider:

- Distribution of travel health alert notices to passengers arriving from affected countries (i.e., countries for which health warnings have been issued).
- Canceling or limiting nonessential travel to affected countries.
- Canceling or limiting nonessential travel from affected countries.

### Travel out of Saint Lucia

If the level of influenza transmission in the country presents a high risk for exportation of disease, the Government shall consider:

- Distribution of travel health warnings to outbound passengers who live in or have visited affected areas.
- Recommend the cancellation of nonessential travel to other countries from ports of entry in affected areas.
- Implement pre-departure screening (e.g., temperature screening or visual screening) of outbound travelers.

### Travel within Saint Lucia

If the level of influenza transmission is high in one district and most other districts have not yet been affected, the Government shall consider:

- Limiting travel to that area or to implement increased disease surveillance measures
- Closing mass transit systems (e.g., buses and taxis etc)

## CONCLUSION

*“If a pandemic hits our shores, it will affect almost every sector of our society, not just health care, but transportation systems, workplaces, schools, public safety and more. It will require a coordinated government-wide response including Federal, State and local governments, and it will require the private sector and all of us as individuals to be ready.”* Secretary Mike Leavitt  
US Department of Health and Human Services - 2007