American Academy of Pediatrics
“Enhancing Pediatric Partnerships to Promote Pandemic Preparedness” Meeting

FLORIDA STATE ACTION PLAN
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Team Members:
Mobeen Rathore, MD, FAAP (Team Leader)
Russell Eggert, MD, MPH
Scott Needle, MD, FAAP
Tommy Schechtman, MD, FAAP

State Model:
Establish Pediatric Preparedness Council in collaboration with the Florida Department of Health (FDOH), Florida Pediatric Society/Florida Chapter of AAP (FPS/FAAP), Public Health Council of the Florida Medical Association, Florida Association of Children’s Hospitals and Florida Association of School Board Superintendents. This Council should include broad representation from groups other than listed above. The Pediatric Preparedness Council could address comprehensive disaster preparedness not just pandemic preparedness.

1. FPS/FAAP to take lead in educating the providers and public on the need for their involvement in local and state preparedness planning, training and exercises, so that unique needs of pediatric populations and medical practices are better addressed.
2. Establish medical homes so that patients have a resource (pediatrician) to contact and engage for correct information on how to prepare and respond to public health emergencies for all children including those with special needs. Fund enhancement of communication technology within the medical home to better accomplish this goal.
3. The proposed Pediatric Preparedness Council take the lead with FDOH in ensuring that the needs of pediatric populations and medical practices (those in the private sector, academia and public sector) are included in all pertinent state and local preparedness plans (special needs shelters, medical surge, community preparedness, mass prophylaxis, isolation & quarantine, scarce resource allocation, etc.).
4. FPS/FAAP and FDOH take the lead to develop and coordinate local and state vaccine and countermeasures distribution and immunization/dispensing plans, based on updated guidance and conditions delineated by CDC.
5. FPS/FAAP work with the Association of School Board Superintendents to develop strategies for successful School Related Immunization Program
6. FPS/FAAP and the FMA (through its Public Health Council) develop and advocate for legislative statutory and rules changes requiring all immunization providers to utilize the state immunization registry (FloridsSHOTS). FDOH provides technical support to providers and continues its enhancements to the registry to meet end user needs.

Key Challenges:
1. Involvement of the Pediatricians in planning
2. School Related Immunization Program
3. Universal Immunization Registry
4. Immunization Distribution Plan

Action Steps:
1. Pediatricians’ Involvement. Establish procedures in collaboration with the Florida Department of Health to assure that pediatricians are represented on preparedness planning groups. Strategies to develop and implement closer linkages between pediatricians and the State and County Health
Departments, such that pandemic and other preparedness and response activities can be better planned and coordinated. Florida Chapter of the AAP should be engaged more effectively. More pediatricians in the private sector need to get actively involved with State and County Health Department’s for preparedness planning. Pediatricians should have representation on the table at the planning, organizational and implementation stages of pandemic preparedness. Pediatricians should be appointed planning committees for both the State and County Health Departments. Better engagement of local/regional health care systems especially those with Children's Hospitals. Children’s Hospitals have close relationships with pediatricians and have credibility in the community. Florida has a network of Children’s Hospitals spread throughout the State. Florida Association of Children’s Hospitals should be engaged more effectively. Pediatricians should be part of the County Emergency Response system. Engage pediatricians in developing local plan for risk communication, vaccine benefits and vaccine distribution and administration.

2. **School Related (Based/Located) Immunization Program (SRIP).** Look into legislation or administrative rules that allow for an effective School Related Immunization Program. School Related Immunization Program should be implemented throughout the State. For SRIP to be successful local pediatricians, School Superintendents and County Health Department (CHD) Directors must work together with local school boards to increase use of SRIP clinics for annual seasonal influenza immunization. SRIP would be an important effort toward pandemic preparedness. It would establish an infrastructure that can be effectively and efficiently used in a pandemic not only for influenza immunization but distribution of other preventive and treatment strategies. Florida is a large State with a large population. Each of Florida’s 67 counties has an independent elected school board. They fall under the State Department of Education (DOE) however DOE has little influence on each school districts which are governed by their own school boards. State and local/regional pediatric medical societies should work closely with school boards, CHD, DOE and DOH to develop strong SRIP. This will require legislative action to provide “sovereign immunity” to school districts and providers working in SRIP in order for the program to be successful. This will allow for effective distribution of vaccine to appropriate outlets in a timely manner.

3. **Universal Immunization Registry.** Need all providers to use state immunization registry, in order to accurately and in real-time track vaccine doses administered. The state health department has duce the time/effort needed to input the high numbers of doses administered at the local level. Additionally, extended automated data upload capabilities were developed and implemented to benefit users. The enhancements made to the registry's functionality and ease of use (to support the H1N1 vaccination campaign), increased the state immunization registry’s. Utilizing existing FL SHOTS registry to coordinate ordering/tracking; state fax updates generally in agreement with CDC updates; local partnerships.

**Immunization Distribution Plan.** State ceding vaccine distribution authority to local control. Local partnerships between CHD and local/regional pediatric society and pediatricians develop distribution and implementation plan for their County. State with involvement of stakeholders should develop and coordinating overall strategy but give local jurisdictions ultimate control/authority over implementation. State should also develop an educational plan for the public at large, CHDs and array of pediatric and healthcare leaders.

4. Improved communication among the planners and pediatric stakeholders and providers on the front lines.

5. Education of public and healthcare providers/leader.

For more information, contact Laura Aird, MS, Manager, Disaster Preparedness and Response American Academy of Pediatrics; laird@aap.org or 847-434-7132.