



KING COUNTY

1200 King County Courthouse
516 Third Avenue
Seattle, WA 98104

Signature Report

December 13, 2005

Ordinance 15348

Proposed No. 2005-0419.2

Sponsors Edmonds and Phillips

1 AN ORDINANCE making an appropriation of \$5,960,000
2 for pandemic flu preparedness; amending the 2005 Budget
3 Ordinance, Ordinance 15083, Section 81, as amended, and
4 adding a new section to Ordinance 15083.

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STATEMENT OF FACTS:

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1. Influenza is a highly contagious viral illness, characterized by a sudden
9 onset of symptoms including fever/chills, cough, muscle aches and pains,
10 headache and fatigue/weakness. The respiratory symptoms can last five to
11 seven days, while fatigue and weakness can persist for up to three weeks.

12

Complications of influenza include bronchitis, sinusitis, pneumonia, and
13 encephalitis. Children, the elderly, and people with immune-suppressive,
14 respiratory or cardiac diseases are most at risk of developing
15 complications.

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2. Influenza spreads when droplets from an infected person's cough or
17 sneeze come in contact with the eyes, mouth or nose of an uninfected

18 person. The virus can live for days on impermeable objects and can
19 thereby infect people who come in contact with these contaminated
20 objects. People are infectious for about one day before they develop
21 symptoms and for up to a week while symptoms are active.

22 3. Humans have no natural immunity to influenza viruses, though persons
23 previously infected with or vaccinated against a certain strain can develop
24 immunity to that strain. The influenza virus mutates rapidly, leading to
25 influenza epidemics occurring virtually every year. In the United States,
26 annual influenza epidemics hospitalize more than two hundred thousand
27 people and kill thirty-six thousand to forty thousand each year.

28 4. An influenza pandemic can occur when three conditions are met. First,
29 the form of the influenza virus must "shift" in a significant way such that
30 the human population has little or no existing immunity against the new
31 emergent strain. Second, the new strain must be capable of infecting
32 humans and causing illness. Third, the new emergent strain must adapt to
33 become easily transmissible from human-to-human.

34 5. Once the conditions of an influenza pandemic are met, the disease
35 spreads rapidly worldwide and could result in an enormous number of
36 illnesses and deaths. The timing of future influenza pandemics is
37 unpredictable. In the 20th century, influenza pandemics occurred in 1918-
38 1919, 1957-1958 and 1968-1969.

39 6. 1918-1919 pandemic was particularly virulent. Estimates of the
40 number of deaths attributable to the pandemic worldwide are more than

41 fifty million, at a time when the world's population was about 1.7 billion
42 (about one-quarter what it is today). The virus killed more people –
43 roughly half of whom were healthy and in the prime of life – in a twenty-
44 four-week period than AIDS has killed in the last twenty-four years. In
45 the United States, out of a population of about one hundred three million,
46 the pandemic killed five hundred thousand people – more than ten times
47 the number of Americans who died in World War I.

48 7. In the last decade, a new strain of the influenza virus – H5N1 – against
49 which humans have no immunity, has emerged in bird populations
50 primarily in Asia, meeting the first condition of a pandemic. H5N1 has
51 also been confirmed in birds in Russia, Turkey, Romania, Croatia and the
52 United Kingdom.

53 8. H5N1 also meets the second condition of a pandemic. As of November
54 17, 2005, the World Health Organization reports one hundred thirty
55 laboratory-confirmed cases of H5N1 infecting humans, with sixty-seven
56 of those cases resulting in death – about a fifty-percent mortality rate.

57 9. H5N1 has not yet met the third condition of a pandemic: easy and
58 sustainable transmission from human-to-human.

59 10. As H5N1 spreads among bird populations worldwide and continues to
60 infect humans who come in close contact with birds, more and more
61 opportunities exist for the virus to adapt such that it becomes easily
62 transmissible among humans.

63 11. Influenza vaccines are currently developed using a manufacturing
64 process that takes six months to produce a vaccine once a viral strain
65 representative of that causing human illness is selected for the production
66 process. Although new and speedier techniques are being researched, the
67 expectation is that a significant lag will exist between the emergence of a
68 pandemic and the availability of a vaccine.

69 12. Depending on the lethality of the virus that emerges, a pandemic
70 could result in two million to over one hundred million deaths worldwide.
71 Estimates for the United States range from two hundred thousand to two
72 million deaths.

73 13. Estimates from the Centers for Disease Control and Prevention
74 ("CDC") suggest that, for the first six weeks of a pandemic in King
75 County, a severe pandemic scenario could result in up to 1.2 million
76 people infected, six hundred twelve thousand people clinically ill, four
77 hundred seventy thousand outpatient medical visits, fifty-seven thousand
78 people needing hospitalization and eleven thousand five hundred deaths.
79 To put these numbers in perspective, the county has a total population of
80 1.8 million, averages about two hundred deaths in a six-week period and
81 has about three thousand five hundred hospital beds.

82 14. Though the risk of an influenza pandemic is serious, our ability to
83 monitor the current H5N1 avian influenza outbreak presents an
84 unprecedented opportunity to prepare for the eventuality of the next

85 pandemic before it occurs. Successfully met, this opportunity will allow
86 the effects of an influenza pandemic to be significantly mitigated.

87 15. Pandemic flu preparedness shares many similarities with and
88 components of other emergency planning efforts such as those for natural
89 disasters or terrorism.

90 16. Pandemic flu preparedness also differs in some important ways from
91 other emergency planning efforts. In particular, the pandemic flu: will
92 have a rolling impact on the population over a sustained period of time;
93 has the potential for more heavily impacting healthcare workers and first
94 responders who come in closer contact with the infection; and will mean
95 aid from the federal government or other jurisdictions is unavailable and
96 usual production and supply chains will fail as the impact is felt
97 worldwide.

98 17. Successfully mitigating the effects of a pandemic flu will require a
99 cohesive and detailed pandemic influenza response plan outlining how our
100 community will function for several months under the threat of an
101 influenza pandemic.

102 18. King County is in a unique position to provide regional leadership in
103 development of a cohesive and detailed response plan for pandemic flu.
104 The council recognizes three important roles for the county that should be
105 reflected in such a plan. First, state law vests in King County regional
106 responsibility for both emergency management/preparedness and public
107 health. Second, the county is responsible for providing other essential

108 government services such as Metro Transit public transportation, solid
109 waste disposal, wastewater treatment and a variety of criminal justice and
110 human services programs. Third, the county is a large employer with
111 worksites located throughout the county. The county carries out these
112 roles through the legislative and executive branches in consultation with
113 the separately elected officials.

114 19. In its role as a regional emergency management coordinator and
115 public health provider, the county can take lead responsibility for actual
116 development of a cohesive and detailed pandemic influenza response plan.

117 a. The county's office of emergency management currently
118 coordinates development of the King County Emergency Management
119 Plan, which is organized in four parts: the Basic Plan, which states the
120 disaster missions and responsibilities of County government, branches and
121 departments; the Appendices to the Basic Plan, which include a variety of
122 topics such as legal authorities, terms and definitions, and acronyms and
123 abbreviations; Emergency Support Functions ("ESF"), which describe the
124 policies, situation, planning assumptions, concept of operations and
125 responsibilities for each ESF; and Implementing Procedures, which
126 describe the details of how to apply the concepts described in the Basic
127 Plan, its supporting appendices and ESFs.

128 b. The county's office of emergency management also coordinates
129 development of the Regional Disaster Plan for public and private
130 organizations in the county. The regional disaster planning task force

131 meets regularly and includes representatives from cities, fire service, law
132 enforcement, hospitals, public health, water and sewer, schools,
133 businesses, nonprofits and other associations. The Regional Disaster Plan
134 is a unique agreement that establishes the framework to allow public,
135 private and nonprofit organizations an avenue to efficiently assist one
136 another during a disaster through a plan that addresses organizational
137 responsibilities, an agreement that addresses legal and financial concerns,
138 and support documents that address specific operational elements of any
139 disaster (e.g., transportation, health and medical services; public
140 information, communications, etc.). To date, there are over one hundred
141 fifteen organizations signed-on to the Regional Disaster Plan as partners to
142 help one another when disaster hits our region.

143 c. The county's public health department coordinates regional
144 Public Health preparedness functions. King County is one of eight
145 counties in the nation identified as an Advanced Practice Center for Public
146 Health Preparedness by the National Association of County and City
147 Health Officials ("NACCHO") in partnership with the CDC. Public health
148 preparedness functions include disease investigation and surveillance,
149 hospital and health system coordination, isolation and quarantine, mass
150 medication distribution and vaccination, mass fatality management,
151 laboratory analysis, public education and risk communication, workforce
152 reassignment for emergency response, activation of the public health
153 emergency operations center and training and exercise development for

154 public health disasters. The director of public health is the county's health
155 officer, who has specific powers under State law in a public health
156 emergency. Public health works closely on preparedness with the office
157 of emergency management.

158 d. In its role as a regional emergency management coordinator and
159 public health provider, the county can: work in concert with federal, state,
160 and surrounding jurisdictions to coordinate activities aimed at mitigating
161 the effects of an influenza pandemic; ensure pandemic flu preparedness is
162 integrated appropriately throughout the King County Emergency
163 Management Plan and the Regional Disaster Plan and that current plans
164 recognize the inability to access mutual aid during an emergency such as a
165 pandemic; ensure elected and top government officials are trained and
166 educated in advance on what their roles and responsibilities will be during
167 an influenza pandemic; conduct TOPOFF-style planning exercises to test
168 the validity of pandemic flu preparedness plans; coordinate in advance
169 with the Port, school districts, private and public educational and day care
170 facilities, and private and public gathering places such as stadiums around
171 quarantine and closure of such facilities and ensure that legal authorities
172 are well understood; work with hospitals and health care providers on
173 healthcare system surge capacity and stockpiling of medical supplies; plan
174 for mass fatalities; develop protocols for vaccine and/or medication
175 prioritization and distribution; build robust mechanisms for disease
176 surveillance; develop preparedness templates for major businesses and

177 other governments to mitigate spread of the disease and economic losses
178 and to ensure the continuity of essential functions; build robust
179 communication plans and networks; conduct public information
180 campaigns prior to the emergence of an influenza pandemic; and ensure
181 adequate protection of food and water supplies.

182 20. In its role as a government service provider, King County must ensure
183 the continuity of essential government services during the several months
184 of a pandemic flu threat and at a time when twenty-five percent to thirty-
185 five percent of employees may be absent. In this role, the county can:
186 ensure pandemic and emergency preparedness are part of departmental
187 business plans; determine which operations are essential and at what levels
188 of services; determine what levels of support services are necessary to
189 continue essential services; establish clear and deeper lines of succession;
190 involve all separately elected officials in planning and the development of
191 business continuity plans for their agencies; establish video-conferencing,
192 conference calling, and telecommuting capability; conduct cross-training
193 for employees to ensure essential functions can be back-filled; and
194 establish appropriate rules and methods for conducting public meetings
195 and establish plans for the closure of county facilities ensuring appropriate
196 public notification.

197 21. In its role as a large employer, King County can provide leadership in
198 establishing business practices that protect and support employees during
199 an influenza pandemic. In this role, the county can: establish human

200 resources policies and practices that would be implemented during an
201 influenza pandemic for telecommuting, flex-time, leave for sick
202 employees and those with sick family members; create a culture where
203 employees are expected to stay at home when sick; develop clear
204 communication protocols; make any necessary improvements in heating,
205 ventilation, and air conditioning systems; ensure "cover your cough"
206 signage and alcohol-based hand sanitizers are prominent in county
207 worksites; and establish plans for counseling services and medical support
208 for employees.

209 22. The county has already begun to undertake many of these and other
210 efforts. For example, the office of emergency management has
211 coordinated regional pandemic flu planning sessions, drafted pandemic flu
212 response plans and hosted public preparedness fairs. The county
213 Executive has initiated a pandemic flu continuity of operation planning
214 process for executive branch agencies and will be scheduling a summit of
215 separately-elected officials to begin a similar process. Public Health has
216 hosted forums for local governments and businesses on pandemic flu
217 preparedness. The council and the King County board of health have
218 passed motions urging Congress to fund an exercise testing the county's
219 plans and capabilities.

220 23. In transmitting this ordinance, the executive has identified funding to
221 support pandemic flu preparedness and has proposed such funds be used
222 for the purchase of antiviral medications (\$4,760,000), the development of

223 public outreach and information campaigns (\$700,000) and the
224 development of a medical surge plan (\$500,000).

225 24. The council finds that these proposals should be integrated as a
226 pandemic influenza response plan so that the county and the public have a
227 better understanding of where resources should best be invested.

228 Moreover, in order for the response plan to be implemented rapidly and
229 successfully, broad commitment to the plan will be needed in advance,
230 which requires involvement of the public and separately elected officials
231 in the planning process.

232 25. Consistent with the council's "Measuring Up" theme for the 2006
233 budget, the pandemic influenza response plan should state where program
234 decisions will be made, who will make program decisions, who will
235 advise decision-makers, who will oversee the program and, ultimately,
236 who is accountable for the success of the program. The response plan
237 should also identify milestones against which progress in creation of such
238 a plan can be evaluated.

239 BE IT ORDAINED BY THE COUNCIL OF KING COUNTY:

240 SECTION 1. Ordinance 15083, Section 81, as amended, is hereby amended by
241 adding thereto and inserting therein the following:

242 GRANTS – From the grants fund there is hereby appropriated to:

243 Grants \$5,960,000

244 SECTION 2. There is hereby added to Ordinance 15083 a new section to read as
245 follows:

268 include the scope of work, tasks, schedule, needed resources and milestones for creation
269 of the response plan.

270 The status report and response plan required by these provisos shall be filed in the
271 form of 20 copies with the clerk of the council, who will retain the original and will
272 forward copies to each councilmember, to the policy staff director, and to the lead staffs
273 of the committee of the whole, the budget and fiscal management committee, the growth
274 management and unincorporated areas committee, the labor, operations and technology
275 committee, the law, justice and human services committee, the natural resources and
276 utilities committee, the council's regional committees and the transportation committee,
277 or their successors.

278 P2. PROVIDED FURTHER THAT:

279 This appropriation is made with the knowledge that Congress is considering
280 several proposals that would make funds available to local jurisdictions for influenza
281 pandemic preparedness, including the subsidized purchase of antiviral medications or
282 vaccines. The county recognizes that local influenza pandemic preparedness functions
283 will require federal or state resources. This appropriation is adopted with the expectation
284 that King County will receive additional federal and state resources for influenza

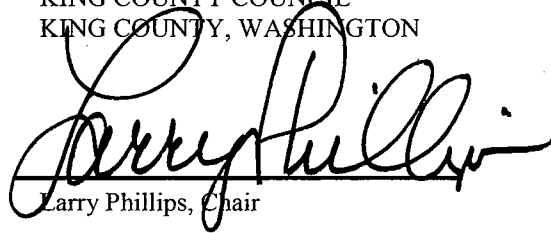
Ordinance 15348

285 pandemic preparedness functions and it is the intent of King County that federal and state
286 resources be used to reimburse this appropriation.
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Ordinance 15348 was introduced on 10/17/2005 and passed by the Metropolitan King County Council on 12/12/2005, by the following vote:

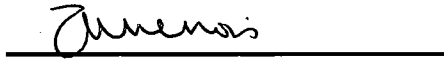
Yes: 10 - Mr. Phillips, Mr. von Reichbauer, Ms. Lambert, Mr. Pelz, Mr. Dunn, Mr. Hammond, Mr. Gossett, Mr. Irons, Ms. Patterson and Mr. Constantine
No: 0
Excused: 3 - Ms. Edmonds, Mr. Ferguson and Ms. Hague

KING COUNTY COUNCIL
KING COUNTY, WASHINGTON



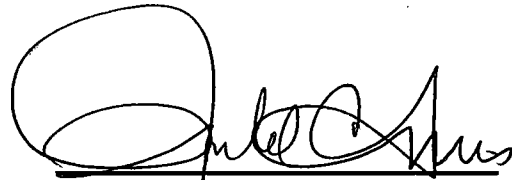
Larry Phillips, Chair

ATTEST:



Anne Noris, Clerk of the Council

APPROVED this 20 day of December, 2005.



Ron Sims, County Executive

Attachments None

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CLERK
KING COUNTY COUNCIL