



# **Government of Saint Lucia**

## **National Influenza Plan Volume 2: Strategic Plan**

*Document of the Saint Lucia National Emergency Management Plan*

*Based upon the World Health Organisation [WHO] Pandemic Response Plan and  
The Government of the Commonwealth of Dominica Strategic Plan for the Avian Flu Pandemic – December 2005*

*Revised: November 16, 2006 | February 25, 2007 | June 27, 2007*

***Cabinet Approved May 7, 2009***

## PLANNING AND COORDINATION

### Glossary

BHE	Bureau of Health Education	GOSL	Government of Saint Lucia
CAREC	Caribbean Epidemiological Centre	HMD	Hospital Medical Director
CEHO	Chief Environmental Health Officer	HSC	Hospital Services Coordinator
CHN	Community Health Nurse	NEMO	National Emergency Management Organisation
CMO	Chief Medical Officer	NEMAC	National Emergency Management Advisory Committee
CVO	Chief Veterinary Officer	NIC	National Influenza Committee
		NPHSRT	National Public Health Surveillance Response Team
DMO	District Medical Officer	PHC	Primary Health Care
DPHC	Director of Primary Health Care	PNO	Principal Nursing Officer
EHO	Environment Health Officer	PPE	Personal Protective Equipment
EPI Manager	External Program for Immunization Manager	SCHN	Senior Community Health Nurse
GIS	Government Information Service	MWA	Media Workers Association

**PLANNING AND COORDINATION**

**Inter-Pandemic Period, Phase 1**

(No new influenza virus subtype have been detected in humans. Influenza subtype may be in animals).

Area of Response	Objective	Activity	Resources	Person/Agency Responsible	
<b>Planning and Coordination</b>	To develop and maintain national influenza pandemic contingency plans which are in harmony with international plans.	Establish a National Influenza Committee. Review areas such as:  <u>Food safety</u> (Animal health, Poultry assoc, food importers, EHD, forestry and wild life, MAFF  <u>Health</u> : NHST, PMH team, Primary care team. Communications: Bureau of Health Education, Media radio, TV, print, GIS, Church rep, DALGA, DARC, CW, Education  <u>Legal</u> : Chief Magistrate, MOLA, PS of Legal Affairs, Bar Assoc.  <u>Disaster coordination</u> : NEMO Secretariat, NEMO sub committees	Technical Staff of Ministries – Health, Agriculture, Education, Legal, Trade, Foreign Affairs, Financial, Food importers, NGO’s, Red Cross, St Johns Ambulance, Poultry Farmers Assoc., Forestry Department, Director NEMO.	Ministry of Health	
		Advocate the importance of pandemic planning to relevant decision-makers	National Influenza Committee [NIC]	NIC – Coordinator [aka National Epidemiologist]	
		Develop and periodically update national plans in close collaboration with relevant partners, including those outside the health sector, and with reference to current WHO guidance.	National Influenza Committee	NIC - Coordinator	
		Ensure implementation of plans and preparedness activities at all levels of public authorities.	National Influenza Committee	NIC - Coordinator	
		To promote national and global capacity to respond to early reports of new influenza virus strains.	Identify, brief regularly and train key personnel to be mobilized in case of emergence of a new influenza virus strain.	NPRST Hospital Management Team PHC - Management Team Hospital – Infection Control	National Epidemiologist
		To develop effective mechanisms for mobilization and rapid deployment of resources to areas of need.	Ensure implementation of plans and preparedness activities at all levels of public authorities.	National Influenza Committee	NIC - Coordinator
			Exercise pandemic plans and use the results to improve and refine plans and preparedness	National Influenza Committee	NIC - Coordinator
		To develop effective mechanisms for decision making and subsequent actions regarding national and international	Develop surge-capacity contingency plans for the internal management of domestic resources and essential workers during a pandemic.	National Influenza Committee	NIC - Coordinator

**PLANNING AND COORDINATION**

	responses to influenza related health emergencies, by strengthening intersectoral and intergovernmental cooperative arrangements that will identify and minimize the risk of human infection with a new influenza virus.	Establish national guidance to address food safety, safe agricultural practices and other public health issues related to infected animals.	Ministry of Health Ministry of Agriculture Food Safety subcommittee	VCO/CEHO
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**PLANNING AND COORDINATION**

**Interpandemic period, Phase 2.**

**(No new influenza virus subtype in humans. However, circulating animal influenza virus subtype poses as substantial risk of human disease)**

Area of Response	Objective	Activity	Resources Needed	Person/Agency Responsible
<b>Planning and Coordination</b>	To ensure a heightened response capacity to address possible human cases.	Activate joint mechanisms for actions with animal health authorities and other relevant organizations.	Review Food Safety Plan [Specific members of the National Influenza Committee]	Director NEMO
		Assess preparedness status and identify immediate actions needed to fill gaps (e.g. with the help of the <i>WHO checklist for influenza pandemic preparedness planning</i> ).*	National Influenza Committee	NIC – Coordinator [aka National Epidemiologist]
	To coordinate implementation of measures in close collaboration with animal health authorities in order to limit the risks of human infection.	Ensure ability to mobilize and rapidly deploy a multisectoral expert response team.	National Influenza Committee	NIC – Coordinator [aka National Epidemiologist]
		Ensure ability to rapidly deploy stockpile resources (national or from regional/global pool) to field locations.	National Influenza Committee	CMO
		Decide whether to deploy part of the stockpile components according to risk assessment.	NPRST Health committee	CMO
		Establish a policy on compensation for loss of animals through culling, in order to improve compliance with emergency measures.	MAFF	CVO

**PLANNING AND COORDINATION**

**Pandemic alert period, 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)**

Area of Response	Objective	Activity	Resources Needed	Person/Agency Responsible
<b>Planning &amp; Coordination</b>	To ensure that mechanisms exist so that imminent potential human health threats can be recognized and dealt with.	Activate national pandemic contingency planning arrangements.	National Influenza Committee	National Epidemiologist
		Implement interventions to reduce disease burden in the initial foci and contain or delay the spread of infection.	National Influenza Committee	CMO/CVO
		Mobilize national response and provide guidance to relevant authorities in reviewing, updating and implementing contingency plans.	National Influenza Committee	CMO CVO
	To coordinate timely interventions that will reduce the risk of a pandemic.	Brief appropriate officials in all relevant government departments (e.g. health, agriculture, executive, legislative/judicial) at national and sub-national levels, regarding the status of the incident and the potential need for additional resources, interventions and the use of emergency powers.	National Influenza Committee	CMO
		Provide assistance to district and local authorities (including private essential services) in implementing interventions.	MoH and MAFF	CMO and CVO

**PLANNING AND COORDINATION**

**Pandemic Alert Period, Phase 4**

(clusters of cases with limited human-to-human transmission but spread is highly localized)

Area of Response	Objective	Activity	Resources Needed	Person/Agency Responsible
<b>Planning &amp; coordination</b>	To ensure that systems exist to detect and characterize outbreaks, and assess the risk of escalation into a pandemic.	Ensure highest levels of political commitment for ongoing and potential interventions/countermeasures.	National Influenza Committee	CMO
		Activate procedures to obtain additional resources; Consider invoking emergency powers.	National Influenza Committee	CMO, CVO, Director NEMO, Prime Minister/Cabinet
		Identify needs for international assistance.	National Influenza Committee	CMO CVO Director NEMO
	To coordinate the implementation of procedures that will delay or contain the spread of human infection within limited foci.	Deploy operational response teams across all relevant sectors.	Ministry of Health Resources Ministry of Agriculture Resources Hospital Management Team Health Centres - Management Team Environmental Health - Management Team Hospital – Infection Control	CMO
		Activate overarching national command and control of response activities, either by formal means or <i>de facto</i> (close oversight of district and local activities	National Influenza Committee National and District Subcommittees of NEMO	CMO CVO Director NEMO

**PLANNING AND COORDINATION**

**Pandemic Period, Phase 5.**

**(Larger clusters but human-to-human spread still localized)**

Area of Response	Objective	Activity	Resources Needed	Person/Agency Responsible
<p><b>Planning &amp; Coordination</b></p>	<p>To coordinate and ensure maximum efforts to delay or possibly avert a pandemic.</p>	<p>Designate special status to affected area in order to facilitate interventions as needed (e.g. state of emergency).</p>	<ul style="list-style-type: none"> <li>• National Influenza Committee</li> <li>• National Epidemiologist</li> </ul>	<p>CMO Director NEMO</p>
		<p>Assist in the ongoing evaluation of interventions</p>	<ul style="list-style-type: none"> <li>• National Influenza Committee</li> </ul>	<p>NHIPC – Coordinator</p>
		<p>Finalize preparations for imminent pandemic, including activation of internal organizational arrangements (within command-and-control system) and staffing surge capacity.</p>	<ul style="list-style-type: none"> <li>• National Influenza Committee</li> <li>• National and District Subcommittees of NEMO</li> </ul>	<p>NHIPC – Coordinator CMO CVO Director NEMO</p>
		<p>Adjust and maximize efforts and resources to reduce disease burden and contain or delay the spread of infection.</p>	<ul style="list-style-type: none"> <li>• Ministry of Health Resources</li> <li>• Ministry of Agriculture Resources</li> <li>• Hospital Management Team</li> <li>• Health Centres</li> <li>• Environmental Health</li> <li>• Hospital – Infection Control</li> </ul>	<p>CMO</p>

**PLANNING AND COORDINATION**

**Pandemic Period, Phase 6.**

**(Pandemic phase – increased and sustained transmission in general population)**

Area of Response	Objective	Activity	Resources Needed	Person/Agency Responsible
<b>Planning &amp; Coordination</b>	1. To provide leadership and coordination of multisectoral resources that will: minimize morbidity and mortality; preserve health-care system effectiveness; minimize societal disruption; and minimize the economic impact of a pandemic.	<b>Saint Lucia not yet affected</b> 1. Activate crisis committee(s) and national command and control of emergency operations (if not already done).	<ul style="list-style-type: none"> <li>Bureau of Health Education</li> <li>National Emergency Management Organization (NEMO)</li> </ul>	NHIPC – Coordinator Director NEMO
		2. Finalize adjustment of official guidelines and recommendations.	<ul style="list-style-type: none"> <li>National Influenza Committee</li> <li>Bureau of Health Education</li> </ul>	NHIPC – Coordinator
		Provide guidance to local authorities in all sectors on implementation and evaluation of proposed interventions.	<ul style="list-style-type: none"> <li>National Influenza Committee sub Committee</li> <li>GIS</li> <li>Bureau of Health Education</li> </ul>	NHIPC – Coordinator
		<b>Saint Lucia Affected</b> 1. Implement all relevant elements of national pandemic plan, including coordination of response and implementation of specific interventions.	<ul style="list-style-type: none"> <li>National Influenza Committee</li> <li>GIS</li> <li>Bureau of Health Education</li> </ul>	NHIPC – Coordinator
	2. To ensure rational access to finite national resources, including pharmaceutical supplies and (when available) vaccine	2. Assess and publicize the current and cumulative national impact.	<ul style="list-style-type: none"> <li>GIS</li> <li>Bureau of Health Education</li> </ul>	National Epidemiologist
	3. To evaluate the effectiveness of specific responses and interventions.	3. Consider applying emergency powers.	<ul style="list-style-type: none"> <li>Attorney General</li> </ul>	Prime Minister/Cabinet
	4. To establish and maintain trust across all agencies and organizations and with the public, through a commitment to transparency and credible actions.	4. Briefing Sessions	<ul style="list-style-type: none"> <li>Entire membership of NEMO</li> </ul>	CMO CVO Director NEMO
	5. To draw lessons from the ongoing pandemic response in order to improve response strategy and inform future planning.	5. Briefing Sessions	<ul style="list-style-type: none"> <li>Entire membership of NEMO</li> </ul>	CMO CVO Director NEMO

**PLANNING AND COORDINATION**

**Post Pandemic Period  
(Return to interepidemic period)**

Area of Response	Objective	Activity	Resources Needed	Person/Agency Responsible
<b>Planning &amp; Coordination</b>	To declare end of pandemic period and evaluate response in order to improve response strategy and inform future planning.	Determine need for additional resources and powers during subsequent pandemic waves.	<ul style="list-style-type: none"> <li>• Cabinet</li> <li>• National Influenza Committee</li> </ul>	Chairperson National Influenza Committee
		Declare end of emergency command-and-control operations, states of emergency, etc.	<ul style="list-style-type: none"> <li>• Cabinet</li> <li>• National Influenza Committee</li> </ul>	PM
		Support rebuilding of essential services, including rotating rest and recuperation for staff.	<ul style="list-style-type: none"> <li>• Cabinet</li> <li>• National Influenza Committee</li> <li>• NEMO Secretariat</li> <li>• Line Ministries</li> </ul>	Cabinet
		Review national plan based on experiences.	<ul style="list-style-type: none"> <li>• National Influenza Committee</li> <li>• All members of NEMO</li> </ul>	Chairperson – NPIPC Director NEMO
		Address psychological impacts.	<ul style="list-style-type: none"> <li>• Ministry of Health</li> <li>• National Stress Response Team</li> </ul>	CMO Consultant Psychiatrist Director NEMO
		Acknowledge contributions of all stakeholders (including the public) and essential staff towards fighting the disease.	<ul style="list-style-type: none"> <li>• Cabinet</li> <li>• National Influenza Committee</li> <li>• Line ministries</li> <li>• NEMO Secretariat</li> </ul>	Cabinet
		Consider offering assistance to remaining countries with ongoing widespread activity.	<ul style="list-style-type: none"> <li>• Cabinet</li> <li>• National Influenza Committee</li> <li>• NEMO Secretariat [through GOSL Donations policy]</li> </ul>	Cabinet

**SAINT LUCIA STRATEGIC PLAN FOR PANDEMIC INFLUENZA**  
**SITUATION MONITORING AND ASSESSMENT**

**Interpandemic period, Phase 1.**

(No new influenza virus subtypes have been detected in humans. Influenza subtype may be in animals).

Area of Response	Objective	Activity	Resources	Responsible Person/Agency
<b>Situation monitoring and assessment</b>	To have available up-to-date information on trends in human infection with seasonal strains of influenza.	Develop or strengthen national systems for influenza surveillance in both humans and animals, based on WHO, FAO and OIE guidance.	<ul style="list-style-type: none"> <li>• NPRST</li> <li>• Vet. Response Team</li> </ul>	National Epidemiologist CVO
		Assess burden of seasonal influenza to help estimate additional needs during a pandemic.	<ul style="list-style-type: none"> <li>• NPRST</li> <li>• Primary Health Care Teams</li> <li>• Medical laboratory</li> <li>• Hospital Management Team</li> </ul>	National Epidemiologist
	To be able to detect animal and human infections with new influenza virus strains, identify potential animal sources of human infection and assess the risk of transmission to humans.	Develop robust national generic surveillance systems for the detection, characterization and assessment of clusters of influenza-like illness or respiratory deaths, with provision for surge capacity and intersectoral and inter institutional collaboration.	<ul style="list-style-type: none"> <li>• NPRST</li> <li>• Primary Health Care Teams</li> <li>• Medical laboratory</li> <li>• Hospital Management Team</li> </ul>	National Epidemiologist
		Report routine and unusual surveillance findings to relevant national, regional and international authorities.	<ul style="list-style-type: none"> <li>• CAREC</li> </ul>	National Epidemiologist
	To develop plans for ongoing assessment of impact and resource needs during the pandemic period.	Develop contingency plan for ongoing monitoring of information, for assessment of impact and resource needs during the pandemic phase (e.g. morbidity, mortality, workplace absenteeism, regions affected, risk groups affected, health-care workers and other essential workers' availability, health-care supplies, bed occupancy/availability, admission pressures, use of alternative health facilities, mortuary capacity).	<ul style="list-style-type: none"> <li>• National Influenza Committee</li> </ul>	NHIPC - Coordinator

**SAINT LUCIA STRATEGIC PLAN FOR PANDEMIC INFLUENZA**  
**SITUATION MONITORING AND ASSESSMENT**

**Interpandemic period, Phase 2.**

**(No new influenza virus subtype in humans. However, circulating animal influenza virus subtype poses as substantial risk of human disease)**

Area of Response	Objective	Activity	Resources	Person/Agency Responsible
<b>Situation Assessment and Monitoring</b>		<b>Saint Lucia Affected and countries with close travel/trade links with affected countries</b>		
	1. To identify interspecies transmission at an early stage and transmit this information to WHO and other appropriate partners.	Implement enhanced animal and human surveillance based on CAREC/WHO, FAO and OIE recommendations; report results rapidly and regularly to the abovementioned international bodies.	<ul style="list-style-type: none"> <li>• NPRST</li> <li>• Vet. Response Team</li> </ul>	CVO Natl. Epidemiologist
		Urgently transmit representative isolates from infected animals to CAREC/WHO- and OIE-designated reference laboratories for confirmation, detailed characterization, and development of diagnostic reagents and consideration of suitability for use to develop candidate vaccine viruses/prototype vaccine strains.	<ul style="list-style-type: none"> <li>• Vet. Laboratory</li> </ul>	CVO
	2. To provide ongoing risk assessment for transmission of viruses with pandemic potential to humans.	Urgently transmit representative isolates from suspected human cases of infection with an animal influenza virus strain to CAREC reference Lab.	<ul style="list-style-type: none"> <li>• Medical Laboratory</li> </ul>	Laboratory Director
		Conduct field investigations (epidemiological, laboratory) in affected area to assess sp read of the disease in animals and threat to human health.	<ul style="list-style-type: none"> <li>• Vet. Response Team</li> </ul>	CVO
		Increase surveillance at Saint Lucia's' (Formal and informal) Points of entry	<ul style="list-style-type: none"> <li>• Environmental Health, Veterinary Services</li> <li>• Customs</li> <li>• Immigration</li> <li>• Medical Services</li> <li>• Saint Lucia Air and Sea Ports Authority</li> </ul>	CEHO

**SAINT LUCIA STRATEGIC PLAN FOR PANDEMIC INFLUENZA**  
**SITUATION MONITORING AND ASSESSMENT**

**Pandemic alert period, 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)**

Area of Response	Objective	Activities	Resources Needed	Person/ Agency Responsible
<b>Saint Lucia Affected and countries with extensive travel/trade links with affected countries</b>				
<b>Situation Assessment and Monitoring</b>	To be able to exclude wider human-to-human transmission, and to detect this as soon as it occurs.	Confirm and report cases promptly using appropriate channels (e.g. International Health Regulations).	<ul style="list-style-type: none"> <li>• NPRST</li> <li>• PHC Teams</li> <li>• Medical laboratory</li> <li>• Hospital Management Team</li> </ul>	CMO
		Assess clinical characteristics of infections in humans and share with relevant international partners.	<ul style="list-style-type: none"> <li>• PHC Teams</li> <li>• Medical laboratory</li> <li>• Hosp. Management Team</li> </ul>	CMO Natl. Epidemiologist
		Identify priority geographical areas and risk groups for targeting with preventive measures.	<ul style="list-style-type: none"> <li>• NPRST</li> <li>• EPI DEPT</li> <li>• Bureau of Health Education</li> </ul>	Coordinator Health Prom Natl. Epidemiologist
	To be able to detect and characterize additional cases (including risk factors for transmission).	Determine the epidemiology of human cases (source of exposure; incubation period; infection of contacts (clinical and sub clinical); period of communicability).	<ul style="list-style-type: none"> <li>• EHO's</li> <li>• CHN's</li> </ul>	DPHC CEHO
		Establish national case definition (or review/modify existing definition) based on WHO guidance.	<ul style="list-style-type: none"> <li>• NPRST</li> </ul>	Natl. Epidemiologist
		Collaborate with international efforts to assess virus pathogenicity in humans.	<ul style="list-style-type: none"> <li>• National Influenza Committee</li> <li>• Medical laboratory</li> </ul>	CMO
		Assess effectiveness of treatment protocols and infection control measures and revise if necessary.	<ul style="list-style-type: none"> <li>• Medical Review Team</li> <li>• Infection Control Team</li> </ul>	CMO

**SAINT LUCIA STRATEGIC PLAN FOR PANDEMIC INFLUENZA**  
**SITUATION MONITORING AND ASSESSMENT**

**Pandemic alert period, Phase 4.**

(Clusters of cases with limited human-to-human transmission but spread is highly localized)

Area of Response	Objective	Activity	Resources Needed	Person/ Agency Responsible
<b>Situation Assessment and Monitoring</b>	<b>Saint Lucia Affected:</b>			
	1. To assess the extent of human-to-human transmission	Describe and (re) assess the epidemiological, virological and clinical features of infection; identify possible source(s).	<ul style="list-style-type: none"> <li>National Influenza Committee</li> </ul>	Epidemiologist
	2. To detect, notify and characterize additional clusters (including the identification of risk factors and other data concerning transmission as requested by WHO).	Report this information on cases and clusters through appropriate mechanisms, e.g. International Health Regulations, to CAREC, WHO and any other appropriate bodies.	<ul style="list-style-type: none"> <li>Epi Dept</li> </ul>	Epidemiologist
		Assess sustainability of human-to-human transmission.	<ul style="list-style-type: none"> <li>NPRST</li> </ul>	Natl. Epidemiologist
	3. To assess the threat to human health and the impact of any control measures, and identify resources required for enhanced control.	Expand activities already under way in <i>phase 3</i> ; adjust case definition if necessary.	<ul style="list-style-type: none"> <li>National Influenza Committee</li> </ul>	NIC - Coordinator
		Forecast likely impact of the spread of infection.	<ul style="list-style-type: none"> <li>National Influenza Committee</li> </ul>	Natl. Epidemiologist
		Attempt to assess the impact of containment measures to allow for adjustment of recommendations; share findings urgently with the international community (including WHO) to allow updating of national and international policies.	<ul style="list-style-type: none"> <li>National Influenza Committee</li> </ul>	Natl. Epidemiologist
		Enhance surge capacity for surveillance.	<ul style="list-style-type: none"> <li>NPRST</li> </ul>	Natl. Epidemiologist
	<b>Saint Lucia Unaffected</b>			
		Enhance surveillance especially at points of entry in relation to countries with which we have extensive travel/travel links that are affected.		<ul style="list-style-type: none"> <li>NPRST (Port Health)</li> </ul>

**SAINT LUCIA STRATEGIC PLAN FOR PANDEMIC INFLUENZA**  
**SITUATION MONITORING AND ASSESSMENT**

**Pandemic Alert Period, Phase 5.**

(Larger clusters but human-to-human spread still localized)

Area of Response	Objective	Activity	Resources Needed	Person/ Agency Responsible
<b>Situation Assessment and Monitoring</b>	<b><i>Saint Lucia Affected</i></b>			
	1. To determine pandemic risk and exclude spread to other islands/countries/regions and to identify this as soon as it occurs.	Expand and adjust activities in <i>phase 4</i> , to maximum intensity.	<ul style="list-style-type: none"> <li>• NPRST</li> <li>• National Influenza Committee</li> </ul>	NIC - Coordinator
		Report increased spread through appropriate means including the revised International Health Regulations, as a public health emergency of international concern (PHEIC).	<ul style="list-style-type: none"> <li>• Epi Dept</li> </ul>	Natl. Epidemiologist
	2. To determine and monitor public health resources required for pandemic response.	Implement real-time monitoring of essential resources (medical supplies, pharmaceuticals, infrastructure, vaccines, hospital capacity, human resources, etc.).	<ul style="list-style-type: none"> <li>• National Influenza Committee</li> <li>• NEMO Supply Management Committee</li> </ul>	CMO Chair - NEMO Supply Management Committee
		Conduct enhanced surveillance for respiratory disease through surveys (telephone or questionnaires).	<ul style="list-style-type: none"> <li>• Primary Health Care Teams</li> </ul>	DMO's
		Adjust forecasts of the likely impact of both infection spread and control measures.	<ul style="list-style-type: none"> <li>• EPI DEPT</li> </ul>	Natl. Epidemiologist
		Assess impact of containment measures to date in order to allow for readjustment if necessary; share findings with the international community to allow updating of national and international guidance/recommendations.	<ul style="list-style-type: none"> <li>• National Influenza Committee</li> </ul>	CMO
	<b><i>Saint Lucia Unaffected:</i></b>			
	To determine and monitor public health resources required for pandemic response.	1. Enhance surveillance measures to maximum intensity	<ul style="list-style-type: none"> <li>• National Influenza Committee</li> </ul>	Natl. Epidemiologist

**SAINT LUCIA STRATEGIC PLAN FOR PANDEMIC INFLUENZA**  
**SITUATION MONITORING AND ASSESSMENT**

**Pandemic Period, Phase 6.**

**(Pandemic phase – increased and sustained transmission in general population)**

Area of Response	Objective	Activity	Resources Needed	Person/Agency Responsible
<b>Situation Assessment and Monitoring</b>	<b>Saint Lucia not yet affected:</b>			
	To monitor the epidemiological, virological and clinical features, and the course and impact of the pandemic at the national level, in order to forecast trends and optimize the use of finite resources.	1. Continue enhanced surveillance measures as for <i>phase 5</i> (unaffected country).	<ul style="list-style-type: none"> <li>• National Influenza Committee</li> </ul>	NIC Coord.
	To assess the effectiveness of interventions used to date in order to guide future actions.	2. Monitor global situation (vaccine/antiviral availability, recommendations for best practices, etc.).	<ul style="list-style-type: none"> <li>• National Influenza Committee</li> <li>• NEMO Supply Management Committee</li> </ul>	CMO Chair - NEMO Supply Management Committee
		3. Estimate the impact of vaccination and anti viral programmes used elsewhere (safety, efficacy and antiviral resistance).	<ul style="list-style-type: none"> <li>• National Influenza Committee</li> <li>• NEMO Supply Management Committee</li> </ul>	CMO Chair - NEMO Supply Management Committee
	<b>Saint Lucia Affected:</b>			
		1. Monitor geographical spread of disease from point(s) of introduction/first detection.	<ul style="list-style-type: none"> <li>• National Influenza Committee</li> </ul>	National Epidemiologist
		2. Use enhanced surveillance and case-management database to identify initial cases/contacts and track initial geographical spread.	<ul style="list-style-type: none"> <li>• National Surveillance Team</li> </ul>	National Epidemiologist
		3. Monitor for possible changes in epidemiology, clinical presentation and virological features.	<ul style="list-style-type: none"> <li>• Primary Health Care Team</li> <li>• National Epidemiologist</li> </ul>	CMO
		4. Monitor and assess national impact (morbidity, mortality, workplace absenteeism, regions affected, risk groups affected, health-care worker availability, essential worker availability, health-care supplies, bed occupancy/availability, admission pressures, use of alternative health facilities, mortuary capacity, etc.).	<ul style="list-style-type: none"> <li>• National Influenza Committee</li> </ul>	National Epidemiologist
		5. Assess need for emergency measures, e.g. emergency burial procedures, use of legal powers to maintain essential services. If sufficient resources, forecast trends (course of pandemic) and economic impact.	<ul style="list-style-type: none"> <li>• National Influenza Committee</li> <li>• NEMO Secretariat</li> </ul>	CMO Director NEMO

**SAINT LUCIA STRATEGIC PLAN FOR PANDEMIC INFLUENZA**  
**SITUATION MONITORING AND ASSESSMENT**

**Subsided**

**(end of pandemic or between waves) Post Pandemic Period (Return to Interpandemic period)**

Area of Response	Objective	Activity	Resources Needed	Person/Agency Responsible
<b>Situation Assessment and Monitoring</b>	To assess the effectiveness of interventions used to date in order to guide future actions.	1. Evaluate resource needs for subsequent waves if they occur.	<ul style="list-style-type: none"> <li>• National Influenza Committee</li> </ul>	CMO Nat'l Epidemiologist
		2. Identify the most effective surveillance and control	<ul style="list-style-type: none"> <li>• NPRST</li> <li>• National Influenza Committee</li> </ul>	Nat'l Epidemiologist
		3. Report current status through appropriate international mechanisms.	<ul style="list-style-type: none"> <li>• NPRST</li> </ul>	CMO Nat'l Epidemiologist
		4. Review lessons learned.	<ul style="list-style-type: none"> <li>• National Influenza Committee</li> </ul>	Director NEMO
		5. Reinstate enhanced surveillance for early detection	<ul style="list-style-type: none"> <li>• NPRST</li> </ul>	Nat'l Epidemiologist
		6. Share experience gained with international community (lessons learned).	<ul style="list-style-type: none"> <li>• NPRST</li> </ul>	CMO CVO Nat'l Epidemiologist

**SAINT LUCIA STRATEGIC PLAN FOR PANDEMIC INFLUENZA  
PUBLIC HEALTH MEASURES**

**Interpandemic period, Phase 1**

(No new influenza virus subtype have been detected in humans. Influenza subtype may be in animals).

Area of Response	Objective	Activity	Resources	Person/Agency Responsible
<b>Public Health Measures</b>  <b>Non-pharmaceutical</b>	To develop a range of containment strategies based on nonpharmaceutical public health actions	Develop/review national guidelines for public health interventions.	<ul style="list-style-type: none"> <li>• Technical Staff of Ministries [Health, Agriculture, Education, Legal, Trade, Foreign Affairs, Finance]</li> </ul>	CMO
		Ensure that proposed interventions are discussed with responsible decision-makers in and outside the health sector (including Cabinet); ensure legal authority for proposed interventions; anticipate and address resource implications for implementation.	<ul style="list-style-type: none"> <li>• National Influenza Committee</li> </ul>	CMO
		Conduct table-top exercises and use the results to update national plan.	<ul style="list-style-type: none"> <li>• National Influenza Committee</li> </ul>	CMO Director NEMO
<b>Pharmaceutical</b>	To ensure adequate supply of vaccines and antivirals medication and other medical supplies are available.	Develop/review national objective for use of pandemic vaccine.	<ul style="list-style-type: none"> <li>• National Influenza Committee</li> </ul>	CMO
		Develop strategy to ensure access to antivirals and vaccines for national use.	<ul style="list-style-type: none"> <li>• National Influenza Committee</li> <li>• Chief Pharmacist/Supplies Manager</li> </ul>	Chief Pharmacist/Supplies Manager
		Set priorities and criteria for deployment of vaccines and antivirals during pandemic alert and pandemic periods.	<ul style="list-style-type: none"> <li>• National Influenza Committee</li> </ul>	CMO

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**Interpandemic period, Phase 2**

**(No new influenza virus subtype in humans. However, circulating animal influenza virus subtype poses as substantial risk of human disease).**

Area of Response	Objective	Activity	Resources	Person/Agency Responsible
<b>Public Health Measures</b>  Non-pharmaceutical	To minimize risk of contact of humans with infected animals	Recommend measures to reduce human contact with affected animals	<ul style="list-style-type: none"> <li>• Ministry of Agriculture</li> <li>• National Pandemic Influenza Committee</li> <li>• CEHO /CHN</li> </ul>	Chief Veterinary Officer
		Prepare for use of further interventions if human infection is detected.	<ul style="list-style-type: none"> <li>• Ministry of Agriculture</li> <li>• Environmental Health</li> <li>• National Pandemic Influenza Committee</li> <li>• CEHO/CHN/Epidemiologist</li> </ul>	CMO
<b>Pharmaceutical</b>	To assess the national availability of antiviral drugs.	Update information on available national supplies of antivirals.	<ul style="list-style-type: none"> <li>• Chief Pharmacist/Supplies manager</li> </ul>	Chief Pharmacist/Supplies manager
		Update recommendations for prophylaxis and treatment with antivirals; consider implementation after formal risk assessment.	<ul style="list-style-type: none"> <li>• National Influenza Committee</li> <li>• CMO,</li> <li>• EPI Manager,</li> <li>• National Epidemiologist,</li> <li>• Chief Pharmacist</li> </ul>	CMO
		Review national strategy for use of interpandemic vaccines to prevent dual infection with human and animal viruses and promote their use in defined risk groups.	<ul style="list-style-type: none"> <li>• National Influenza Committee</li> <li>• CMO,</li> <li>• EPI Manager,</li> <li>• National Epidemiologist,</li> <li>• Chief Pharmacist</li> </ul>	CMO
		Develop contingency plans for procuring seasonal vaccines for distribution once available	<ul style="list-style-type: none"> <li>• Chief Pharmacist/Supplies manager</li> </ul>	Chief Pharmacist/Supplies manager

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**Pandemic alert period, 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)**

Area of Response	Objective	Activity	Resources Needed	Person/ Agency Responsible
<b>Public Health Measures</b>  <b>Non-pharmaceutical</b>	To contain or reduce human-to-human transmission	Implement appropriate interventions identified in Phase 2, in consultation with relevant partners.	<ul style="list-style-type: none"> <li>• Develop Contingency Plans</li> </ul>	National Epidemiologist
		Collect viral specimens from suspected cases	<ul style="list-style-type: none"> <li>• Materials for sample collection</li> <li>• Doctors</li> <li>• Community Health Nurses (trained)</li> <li>• Supplies Manager</li> </ul>	National Epidemiologist
		Send viral specimens to CAREC/PAHO/WHO in a timely fashion to allow for potential pandemic vaccine development and updating of reagents	<ul style="list-style-type: none"> <li>• Finance for transportation of specimens</li> </ul>	Laboratory Superintendent
<b>Pharmaceutical</b>		If associated with animal outbreak(s) consider deploying supplies of antivirals for post-exposure (and possibly pre-exposure) prophylaxis	<ul style="list-style-type: none"> <li>• Antiviral drugs</li> <li>• Related Medical Supplies</li> </ul>	Chief Pharmacist, Supplies Manager
		Promote vaccination with seasonal influenza vaccine to limit the risk of dual infection in those most likely to be exposed to the animal virus	<ul style="list-style-type: none"> <li>• Seasonal influenza vaccine</li> <li>• Related Medical Supplies</li> <li>• Bureau of Health Education</li> </ul>	EPI Manager
		Review/reassess the strategies, guidelines and priorities for use of pandemic and seasonal vaccines with CAREC/PAHO/WHO and local agencies	<ul style="list-style-type: none"> <li>• Finance</li> <li>• CAREC,</li> <li>• PAHO-CPC,</li> <li>• Supplies Manager,</li> <li>• Pediatrician,</li> <li>• DPHC,</li> <li>• SCHNs,</li> <li>• Epidemiologist/ EPI Manager</li> </ul>	CMO
		Resolve liability and other legal issue if not already done*	<ul style="list-style-type: none"> <li>• PS Health,</li> <li>• CMO,</li> <li>• Attorney General,</li> <li>• National Epidemiologist</li> </ul>	CMO
		Assess inventory of vaccines and other materials needed to carry out vaccinations.	<ul style="list-style-type: none"> <li>• EPI Manager,</li> <li>• Supplies Manager,</li> <li>• CHN,</li> <li>• CHNs</li> </ul>	EPI Manager

\*Needs serious attention

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**Pandemic alert period, Phase 4**

(Small clusters of cases with limited human-to-human transmission but spread is highly localized)

Area of Response	Objective	Activity	Resources Needed	Person/Agency Responsible
<b>Public Health Measures</b>  <b>Non-pharmaceutical</b>	To contain or delay human-to-human virus transmission	Implement appropriate interventions identified during contingency planning and consider any new guidance provided by WHO	<ul style="list-style-type: none"> <li>• All Government Agencies,</li> <li>• NGOs</li> <li>• Civil Society.</li> </ul>	Minister of Health
	To gain early experience in pandemic vaccine use under field conditions	Document and monitor field experiences	<ul style="list-style-type: none"> <li>• District Health Centres</li> <li>• Bureau of Health Education</li> <li>• NPHSRT</li> </ul>	Epidemiologist
<b>Pharmaceutical</b>	To contain or delay human-to-human virus transmission	Use antivirals for early treatment of cases, and consider antiviral prophylaxis for close contacts of cases based on risk assessment and severity of illness in humans (review antiviral policy).	<ul style="list-style-type: none"> <li>• National Influenza Committee</li> <li>• Ministry of Finance</li> <li>• Pharmacists</li> <li>• Doctors</li> </ul>	CMO
	To limit morbidity and mortality associated with current human infections	Review the availability of and deploy antivirals, other medications, materials and equipment for patient management	<ul style="list-style-type: none"> <li>• National Influenza Committee</li> <li>• Ministry of Finance</li> <li>• Pharmacists,</li> <li>• Supplies Manager</li> <li>• Doctors</li> </ul>	CMO
	To increase readiness for pandemic vaccine access and deployment	Ensure on-island availability of vaccines and other related Medical supplies	<ul style="list-style-type: none"> <li>• EPI Manager,</li> <li>• Supplies Manager,</li> <li>• DPHC</li> <li>• PS Health</li> </ul>	Supplies Manager
		Ensure deployment of vaccines and other related supplies	<ul style="list-style-type: none"> <li>• EPI,</li> <li>• Supplies Manager,</li> <li>• DPHC</li> </ul>	EPI Manager

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**Pandemic Alert Period, Phase 5**

(Larger clusters but human-to-human spread still localized)

Area of Response	Objective	Activity	Resources Needed	Person/Agency Responsible
<b>Public Health Measures</b>  <b>Non-pharmaceutical</b>	To make massive efforts to contain or delay human-to-human virus transmission and the onset of a pandemic	Implement interventions identified during contingency planning (see Phase 4) and new guidance provided by PAHO/WHO	<ul style="list-style-type: none"> <li>• All Government Agencies,</li> <li>• NEMO Secretariat,</li> <li>• NGOs</li> <li>• Civil Society</li> </ul>	Minister of Health
		<b>Pharmaceutical</b>	<p>Consider/re-consider use of antivirals for early treatment of cases (prioritization may need to be changed).</p> <p>Consider results and lessons learned from use in countries with cases and modify antiviral strategy as appropriate</p> <p>Adjust priority list of persons to be vaccinated (if applicable)</p> <p>Launch mass vaccination campaign (if vaccines and supplies available).</p>	<ul style="list-style-type: none"> <li>• National Influenza Committee</li> <li>• Ministry of Finance</li> <li>• Pharmacists</li> <li>• Doctors</li> </ul> <ul style="list-style-type: none"> <li>• National Influenza Committee</li> <li>• Ministry of Finance</li> </ul> <ul style="list-style-type: none"> <li>• National Influenza Committee</li> </ul> <ul style="list-style-type: none"> <li>• National Influenza Committee</li> <li>• Health Centres</li> </ul>

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**Pandemic Period, Phase 6.**

(Pandemic phase – increased and sustained transmission in general population)

Area of Response	Objective	Activity	Resources Needed	Person/Agency Responsible	
<b>Public Health Measures</b>	<b>Non-pharmaceutical</b>	To contain or delay spread using public health interventions, while limiting societal disruption.	Implement interventions identified during contingency planning (see Phase 4) including new guidance provided by PAHO/WHO.	<ul style="list-style-type: none"> <li>• All Government Agencies,</li> <li>• NEMO Committees, NGOs</li> <li>• Civil Society.</li> </ul>	Minister of Health
		<b>Pharmaceutical</b>	To minimize morbidity and mortality through the rational use of available pharmaceuticals, e.g. vaccines and antiviral	Implement pandemic vaccine procurement plans; update vaccine recommendations; re-evaluate dosage and schedule bases on new data and PAHO/WHO recommendations; plan logistics of delivery	<ul style="list-style-type: none"> <li>• National Influenza Committee</li> <li>• Ministry of Finance</li> <li>• Supplies Manager</li> </ul>
Implement pandemic vaccine programme as availability permits	<ul style="list-style-type: none"> <li>• EPI Manager</li> <li>• Health Centres,</li> <li>• Saint Lucia Red Cross,</li> <li>• St Johns Ambulance</li> </ul>			DPHCS	
Implement appropriate public health interventions as identified during contingency planning and consider new guidelines from PAHO/WHO	<ul style="list-style-type: none"> <li>• All Government Agencies,</li> <li>• NGOs</li> <li>• Civil Society</li> </ul>			CMO	
Implement distribution plan; monitor supply; be prepared to contribute to evaluation of safety and effectiveness	<ul style="list-style-type: none"> <li>• EPI Manager,</li> <li>• Supplies Manager,</li> <li>• Chief Pharmacist,</li> <li>• CHNs</li> </ul>			DPHCS	
Assess vaccine coverage to date, efficacy and safety; review/update guidelines as necessary; begin vaccination of persons not yet immunized in line with plans, priority status and availability.	<ul style="list-style-type: none"> <li>• EPI Manager,</li> <li>• SCHNs</li> <li>• Supplies Manager,</li> <li>• Chief Pharmacist,</li> <li>• DPHC</li> </ul>			DPHC	

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**PUBLIC HEALTH MEASURES**

**Post Pandemic Period**  
**(Return to inter-epidemic period)**

	<b>Objective</b>	<b>Activity</b>	<b>Resources Needed</b>	<b>Person/Agency Responsible</b>
<b>Public Health Measures</b>	To evaluate the activities of the influenza pandemic plan	Conduct post pandemic evaluation meeting	<ul style="list-style-type: none"><li>• National Influenza Committee,</li><li>• All Government Agencies,</li><li>• NGOs</li><li>• Civil Society</li></ul>	Director NEMO

SAINT LUCIA STRATEGIC PLAN FOR PANDEMIC INFLUENZA

**HEALTH SYSTEMS RESPONSE**

Interpandemic period, **Phase 1.** (No new influenza virus subtypes have been detected in humans. Influenza subtype may be in animals).

Area of Response	Objective	Activity	Resources	Person/ Agency Responsible
<b>Health Systems Response</b>	To ensure that up-to-date contingency plans and strategies are in place for pandemic response in the health-care sector.	Assess preparedness of Health system for pandemic against PAHO/WHO checklist(s).and address deficiencies according to national resources.	<ul style="list-style-type: none"> <li>• MoH Core Management Team + Chief Pharmacist</li> <li>• Hospital Management Team</li> <li>• Primary Health Care Management Team (DPHC, SCHNs, CEHO, CDO)</li> <li>• Ambulance and Fire Services</li>   <li>• National Influenza Committee</li> <li>• PAHO</li> </ul>	PS
		Establish lines of authority, and communication pathways that are clearly identified for command and control of Health systems in the event of a pandemic.	<ul style="list-style-type: none"> <li>• MoH Core Management Team + Chief Pharmacist</li> <li>• Hospital Management Team</li> <li>• Primary Health Care Management Team (DPHC, SCHNs, CEHO, CDO)</li> <li>• Ambulance and Fire Services</li>   <li>• National Influenza Committee</li> </ul>	PS
		Identify priorities and response strategies for public and private health-care systems for each stage including where relevant: triage systems, surge capacity, human and material resource management.	<ul style="list-style-type: none"> <li>• MoH</li> <li>• Heads of Departments</li> <li>• Saint Lucia Dental and Medical Association</li> <li>• Saint Lucia Nurses Association</li> <li>• Saint Lucia Pharmaceutical Association,</li> <li>• Private hospitals and residential institutions (incl nursing homes)*</li> <li>• Mass Casualty response agencies</li> <li>• NEMO Sub Committees [Supplies Management, Information and Welfare]</li> </ul>	PS
		Produce interim: case-finding, treatment and management protocols and algorithms; infection control guidelines; guidance on triaging; surge capacity Management and staffing strategies.	<ul style="list-style-type: none"> <li>• PMH Infection Control Committee,</li> <li>• PHC Management Team,</li> <li>• National Epidemiologist,</li> <li>• Hospital Management Committee + Senior Medical and Nursing staff.</li> </ul>	CMO
		Ensure implementation of routine laboratory biosafety, safe specimen handling, and hospital Infection control policies.	<ul style="list-style-type: none"> <li>• Esra Long Lab Superintendent,</li> <li>• Chairperson - Hospital Infection Control Committee</li>   <li>• Private Laboratories.</li> </ul>	CMO

**SAINT LUCIA STRATEGIC PLAN FOR PANDEMIC INFLUENZA**

**HEALTH SYSTEMS RESPONSE**

		Estimate pharmaceutical and other materiel supply needs; commence arrangements to secure supply.	<ul style="list-style-type: none"> <li>• Chief Pharmacist,</li> <li>• Supplies Manager,</li> <li>• HSC,</li> <li>• EPI Manager,</li> <li>• HMD,</li> <li>• Matron,</li> <li>• Ministry of Finance</li> <li>• Private pharmacies</li> </ul>	PS Health PS Finance
		Establish emergency/outbreak fund	<ul style="list-style-type: none"> <li>• Chairperson National Influenza Committee, PS Health</li> <li>• PS Finance</li> <li>• CMO</li> <li>• PAHO</li> </ul>	Minister of Health Minister of Finance
		Increase awareness and strengthen training of Health-care workers and volunteers on pandemic influenza.	<ul style="list-style-type: none"> <li>• Bureau of Health Education,</li> <li>• NPHSRT,</li> <li>• PAHO</li> <li>• Saint Lucia Red Cross,</li> <li>• St Johns Ambulance</li> </ul>	CMO
		Test contingency plans regularly, including Command-and-control pathways.	<ul style="list-style-type: none"> <li>• NEMO Secretariat</li> <li>• National Influenza Committee, HSC, DPHC</li> </ul>	CMO

\*need someone to implement this activity including generating action cards etc.

\*implementation of accreditation body for medical institutions

\*legislation needed to enable use of private facilities to take care of surge capacity

\*implementation budget needs to be developed

\*Technical assistance from PAHO

**SAINT LUCIA STRATEGIC PLAN FOR PANDEMIC INFLUENZA**  
**HEALTH SYSTEMS RESPONSE**

Area of Response	Objective	Activity	Resources	Person/Agency Responsible
<b>Health System Response</b>	To ensure that if human infections occur, they will be quickly recognized and that health system will respond appropriately.	Alert local health-care providers to: consider new influenza infection in ill patients with epidemiological link to affected animal species; implement infection control measures; report cases immediately to public health authorities; provide algorithms to assist in case-finding and management.	<ul style="list-style-type: none"> <li>• NPHRST</li> <li>• District Management Teams</li> <li>• Finance (forms, training workshops)</li> <li>• Hospital Management team</li> </ul>	CMO
		Verify availability and distribution procedures for personal protective equipment and antivirals and for vaccine for the protection of persons at occupational risk; consider measures to implement.	<ul style="list-style-type: none"> <li>• HSC,</li> <li>• PNO,</li> <li>• HMD,</li> <li>• DPHC,</li> <li>• Supplies Manager,</li> <li>• Chief Pharmacist,</li> <li>• EPI Manager</li> </ul>	CMO
		Ensure rapid deployment material for diagnostic tests when available.	<ul style="list-style-type: none"> <li>• Supplies Manager,</li> <li>• Esra Long Lab Superintendent</li>   <li>• Private Laboratories</li> </ul>	CMO
		Alert health system to review preparedness plans and be ready to receive presumably small numbers of patients with new influenza subtype infection requiring isolation and clinical care.	<ul style="list-style-type: none"> <li>• National Influenza Committee</li> </ul>	CMO
		Assess health system capacity to detect and contain outbreaks of human disease in hospital settings.	<ul style="list-style-type: none"> <li>• Hospital Infection Control Committee</li> </ul>	HMD
		Alert local health-care providers to consider influenza infection in ill patients with travel or epidemiological link to an affected country, and to recognize the need for immediate reporting to national authorities; provide algorithms to assist in case-finding and investigation.	<ul style="list-style-type: none"> <li>• NPHSRT</li> <li>• Port of Entry Officers</li> </ul>	Chair/NPHSRT

**HEALTH SYSTEMS RESPONSE**

**Interpandemic period, Phase 2 (No new influenza virus subtype in humans. However, circulating animal influenza virus subtype poses as substantial risk of human disease)**

**Pandemic alert period, 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)**

Area of Response	Objective	Activity	Resources Needed	Person/Agency Responsible
<b>Health System Response</b>	To prevent nosocomial transmission and laboratory infections.	Ensure implementation of infection-control procedures to prevent nosocomial transmission.	<ul style="list-style-type: none"> <li>• Infection control manuals,</li> <li>• Personal Protective Equipment (PPE) ,</li> <li>• Hospital Infection Control Officer</li> </ul>	CMO
		Ensure compliance with standards for biosafety in laboratories, and for safe specimen-handling and shipment.	<ul style="list-style-type: none"> <li>• Lab safety manuals,</li> <li>• PPE</li> <li>• Shipping materials,</li> <li>• Lab Superintendent Finance</li> </ul>	CMO
		Train community members in management of home-based patients	<ul style="list-style-type: none"> <li>• Bureau of Health Education</li> <li>• Primary Health Care Teams</li> <li>• NGOs</li> <li>• Saint Lucia Red Cross,</li> <li>• St Johns Ambulance</li> </ul>	Bureau of Health Education
	To ensure heightened awareness among healthcare workers regarding the possibility of cases and/or clusters of cases.	Train health-care workers to detect/identify clusters of cases.	<ul style="list-style-type: none"> <li>• NPHSRT</li> </ul>	National Epidemiologist
		Provide public and private health-care providers with updated case definitions, protocols and algorithms to assist with case-finding, management, infection control and surveillance.	<ul style="list-style-type: none"> <li>• NPHSRT</li> </ul>	National Epidemiologist
		Assess capability/capacity for implementing infection control procedures for ill patients; implement infection control consistent with existing WHO guidance.	<ul style="list-style-type: none"> <li>• Hospital Infection Control Committee</li> <li>• Hospital Management Team</li> <li>• NPHSRT</li> </ul>	CMO
		Explore ways to provide drugs and medical care free of charge (or covered by insurance) to the patient and the health-care delivery system, in order to encourage prompt reporting of new cases.	<ul style="list-style-type: none"> <li>• PAHO</li> <li>• Emergency fund</li> </ul>	PS Health PS Finance

**SAINT LUCIA STRATEGIC PLAN FOR PANDEMIC INFLUENZA**  
**HEALTH SYSTEMS RESPONSE**

Pandemic alert period, **Phase 4** (clusters of cases with limited human-to-human transmission but spread is highly localized)

Area of Response	Objective	Activity	Resources Needed	Person/ Agency Responsible
<b>Health System Response</b>	To prevent nosocomial transmission.	Update and reinforce messages to local health-care providers to consider influenza infection in ill patients, and report findings to public health authorities.	<ul style="list-style-type: none"> <li>• NPHSRT</li> </ul>	National Epidemiologist
		Update case definition, protocols and algorithms for case-finding, management (antivirals and other required drugs), infection control and surveillance as required.	<ul style="list-style-type: none"> <li>• NPHSRT</li> </ul>	National Epidemiologist
	To maintain biosafety	Re-emphasize infection-control measures and issue stockpiles of personal protective equipment.	<ul style="list-style-type: none"> <li>• Hospital Management Team</li> <li>• Hospital Infection Control Committee</li> <li>• Primary Health Care Management Team</li> </ul>	Supplies Manager, HSC
	To ensure capacity is available and used optimally in affected countries.	Implement surge-capacity arrangements and contingency plans for staff shortages in health-care facilities and in all other key activity sectors.	<ul style="list-style-type: none"> <li>• Hospital Management Team</li> <li>• Saint Lucia Red Cross</li> <li>• St Johns Ambulance</li> </ul>	CMO
	Ensure attention to the health and other needs of persons in quarantine.	Activate contingency plans for response to overload of Health facilities with influenza patients, and identify alternative strategies for case isolation and management++.	<ul style="list-style-type: none"> <li>• Hospital Management Team</li> <li>• National Insurance Corporation</li> <li>• Saint Lucia Red Cross</li> <li>• St Johns Ambulance</li> </ul>	CMO

**SAINT LUCIA STRATEGIC PLAN FOR PANDEMIC INFLUENZA**

**HEALTH SYSTEMS RESPONSE**

**Pandemic Alert Period, Phase 5. (Larger clusters but human-to-human spread still localized)**

Area of Response	Objective	Activity	Resources Needed	Person/ Agency Responsible
<b>Saint Lucia Affected:</b>				
<b>Health System Response</b>	To ensure that health systems are ready to scale up response and implement changes in triage and treatment priorities, and that these actions occur as soon as a country becomes affected.	Full mobilization of Health services and full implementation of emergency/contingency plans in affected areas, including coordination with other emergency sectors.	<ul style="list-style-type: none"> <li>• National Influenza Committee</li> <li>• NEMO Committees</li> </ul>	Minister of Health CMO Director NEMO
		Commence triage arrangements and other emergency procedures for efficient use of Health-care facilities.	<ul style="list-style-type: none"> <li>• Hospital Management Team</li> </ul>	CMO
		Arrange for additional human and material resources, and alternative means of Health-care delivery, based on forecasted needs and contingency plans.	<ul style="list-style-type: none"> <li>• Hospital Management Team</li> <li>• Primary Health Care Management Team, Finance</li> <li>• Mass Casualty Agencies</li> <li>• NEMO Committees</li> </ul>	PS

**SAINT LUCIA STRATEGIC PLAN FOR PANDEMIC INFLUENZA**

**HEALTH SYSTEMS RESPONSE**

**Pandemic Alert Period, Phase 5 (Larger clusters but human-to-human spread still localized)**

Area of Response	Objective	Activity	Resources Needed	Person/ Agency Responsible
<b>Health System Response</b>	To ensure that health systems are ready to scale up response and implement changes in triage and treatment priorities, and that these actions occur as soon as a country becomes affected.	Implement corpse-management procedures.  NB: Utility services, directors of funeral homes, to be included on National Influenza Committee	<ul style="list-style-type: none"> <li>• Hospital Management Team</li> <li>• Primary Health Care Management Team,</li> <li>• Finance</li> <li>• Funeral homes</li> <li>• National Protocols on Mass Fatalities</li> </ul>	PS Health Director NEMO
		Prepare health-care workers for potential change in policy regarding antivirals for occupational exposures (Switch from prophylaxis to early treatment).	<ul style="list-style-type: none"> <li>• Antiviral and vaccine sub-committee</li> </ul>	CMO
		<b>Saint Lucia unaffected:</b>		
	To ensure that health systems are ready to scale up response and implement changes in triage and treatment priorities, and that these actions occur as soon as a country becomes affected.	Activate National Influenza Committee	<ul style="list-style-type: none"> <li>• National Influenza Committee</li> </ul>	Chairperson, National Influenza Committee
		Provide public and private health-care providers with updated case definition, protocols and algorithms for case-finding, management, infection control and surveillance.	<ul style="list-style-type: none"> <li>• NPHSRT</li> </ul>	National Epidemiologist
		Explore ways to provide drugs and medical care free of charge (or covered by insurance) to the patient and the health-care delivery system, to encourage prompt reporting and enrolment.	<ul style="list-style-type: none"> <li>• PAHO</li> <li>• Emergency fund</li> </ul>	PS Health PS Finance PS Office of the Prime Minister
		Assess capability/capacity for infection control for ill patients, and implement infection control consistent with WHO guidelines.	<ul style="list-style-type: none"> <li>• Hospital Infection Control Committee</li> <li>• Hospital Management Team</li> <li>• Primary Care Management Team</li> <li>• NPHSRT</li> </ul>	CMO
		Review contingency plans relevant to response at all levels, with special attention to surge capacity arrangements.	<ul style="list-style-type: none"> <li>• National Influenza Committee</li> <li>• National Emergency Management Advisory Committee</li> </ul>	CMO
		Test decision procedures and chains of command, and other pandemic working arrangements to ensure that they are functioning.	<ul style="list-style-type: none"> <li>• Hospital Infection Control Committee</li> <li>• Hospital Management Team</li> <li>• National Emergency Management Advisory Committee</li> </ul>	CMO
		Train health-care workers to detect/identify cases and clusters.	<ul style="list-style-type: none"> <li>• NPHSRT</li> </ul>	National Epidemiologist
	To prevent nosocomial transmission and maintain biosafety.	Re-emphasize infection-control measures and issue stockpiles of personal protective equipment in the laboratory.	<ul style="list-style-type: none"> <li>• Hospital Infection Control Committee</li> <li>• Hospital Management Team</li> </ul>	CMO

**SAINT LUCIA STRATEGIC PLAN FOR PANDEMIC INFLUENZA**

**HEALTH SYSTEMS RESPONSE**

**Pandemic Period, Phase 6 (Pandemic phase – increased and sustained transmission in general population)**

<b>Area of Response</b>	<b>Objective</b>	<b>Activity</b>	<b>Resources Needed</b>	<b>Person/Agency Responsible</b>
<b>Health System Response</b>	<b>Saint Lucia Unaffected:</b>			
	To optimize patient care with limited resources.	Keep emergency coordinating arrangements and chains of command for systems fully functional.	<ul style="list-style-type: none"> <li>National Influenza Committee</li> <li>Hospital Management Team</li> <li>Primary Health Care Management Team</li> <li>NEMO Committees</li> </ul>	CMO
		Keep case definition, protocols and algorithms for case-finding, management (including appropriate use of antibiotics to treat suspected bacterial infections), infection control and surveillance updated in line with latest WHO guidance.	<ul style="list-style-type: none"> <li>National Influenza Committee</li> <li>NPHSRT</li> </ul>	National Epidemiologist
	To reduce overall impact of the pandemic (morbidity and mortality).	Maintain health-care worker vigilance for the onset of cases and clusters.	<ul style="list-style-type: none"> <li>NPHSRT</li> </ul>	National Epidemiologist
		Explore ways to provide drugs and medical care free of charge (or covered by insurance) to the patient and the health-care delivery system, to encourage prompt reporting and recognition of the start of pandemic activity.	<ul style="list-style-type: none"> <li>PAHO</li> <li>Vaccine and antiviral sub-committee</li> <li>MoH Core Management Committee</li> <li>Emergency fund</li> </ul>	PS Health PS Finance PS Office of Prime Minister
		Maintain capability/capacity for infection control for ill patients, and implement infection control consistent with latest WHO guidelines; maintain staff competency in use of personal protective equipment(conduct drills).	<ul style="list-style-type: none"> <li>National Influenza Committee</li> <li>Infection Control Committee</li> <li>Hospital Management Team</li> <li>Primary Health Care Management Team</li> </ul>	CMO
	To manage demand on health systems in order to maximize sustainability of response.	Keep under review plans relevant to health system response at all levels down to the smallest functioning health unit; maintain surge-capacity arrangements; prepare for imminent switch to pandemic working arrangements.	<ul style="list-style-type: none"> <li>National Influenza Committee</li> <li>Hospital Management Team</li> <li>Primary Health Care Management Team</li> <li>Saint Lucia Red Cross</li> <li>St Johns Ambulance Fire</li> </ul>	CMO
	<b>Saint Lucia Affected:</b>			
	To manage demand on health systems in order to maximize sustainability of response.	Implement in full pandemic contingency plans for health systems and essential services, at national and local levels where affected; monitor health system status; adjust triage system if necessary; deploy additional workforce and volunteers; ensure staff support; provide medical and non-medical support for ill people in alternative (non-health-care) facilities if needed; provide social/psychological support for health-care workers, victims and communities.	<ul style="list-style-type: none"> <li>National Influenza Committee,</li> <li>NEMO Committees</li> <li>Saint Lucia Red Cross</li> <li>St Johns Ambulance</li> <li>Hospital Management Team</li> <li>Primary Health Care Management</li> <li>Fire and Ambulance Services</li> </ul>	Minister of Health PS Health, CMO

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**HEALTH SYSTEMS RESPONSE**

**Subsided (end of pandemic or between waves) Post Pandemic Period (Return to interpandemic period)**

<b>Area of Response</b>	<b>Objective</b>	<b>Activity</b>	<b>Resources Needed</b>	<b>Person/Agency Responsible</b>
<b>Health System Response</b>	To manage demand on health systems in order to maximize sustainability of response.	Ensure that overworked staff have opportunities for rest and recuperation and psychosocial support.	<ul style="list-style-type: none"> <li>• Hospital Management Team</li> <li>• Primary Health Care Management</li> <li>• Saint Lucia Red Cross</li> <li>• St Johns Ambulance</li> </ul>	CMO
		Restock medications and supplies; service and renew essential equipment.	<ul style="list-style-type: none"> <li>• Supplies Manager</li> <li>• Chief Pharmacist</li> <li>• CMO</li> </ul>	PS
		Review/revise plans in anticipation of subsequent wave(s).	<ul style="list-style-type: none"> <li>• National Influenza Committee</li> </ul>	Chair, National Influenza Committee
		Support rebuilding of essential services.	<ul style="list-style-type: none"> <li>• National Influenza Committee</li> </ul>	Chair, National Influenza Committee
		Adjust case definitions, protocols and algorithms.	<ul style="list-style-type: none"> <li>• NPHSRT</li> </ul>	National Epidemiologist
		Continue with vaccination programme in line with plans, priority order and availability.	<ul style="list-style-type: none"> <li>• Primary Health Care Management</li> <li>• EPI Manager</li> </ul>	CMO

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**COMMUNICATIONS**

Interpandemic period, **Phase 1** (No new influenza virus subtype have been detected in humans. Influenza subtype may be in animals).

Area of Response	Objective	Activity	Resources	Person/Agency Responsible
<b>Communications</b>	To ensure that mechanisms exist for routine and emergency communications between the Ministry of Health and other relevant government and non-Government Agencies/organizations likely to be involved in a pandemic response, and with the public.	Establish phased national communication strategy for pandemic influenza.	<ul style="list-style-type: none"> <li>Ministry of Health</li> <li>Ministry of Agriculture</li> <li>GIS</li> <li>NEMO Welfare Committee</li> <li>DPHCS</li> </ul>	Bureau of Health Education
		Establish formal communication channels with CAREC/PAHO/WHO and other partners for sharing of outbreak information and coordination of communication strategy related to influenza	<ul style="list-style-type: none"> <li>Ministry of Health</li> </ul>	CMO
		Ensure communication infrastructure is adequate for pandemic needs	<ul style="list-style-type: none"> <li>Ministry of Health</li> <li>Ministry of Agriculture</li> <li>Ministry of Social Transformation</li> <li>GIS</li> <li>NEMO Telecoms Committee</li> </ul>	Bureau of Health Education
		Include risk communicators and animators in national committee	<ul style="list-style-type: none"> <li>Ministry of Health</li> <li>National Committee</li> <li>NEMO Information Committee</li> </ul>	CMO
		Strengthen risk communication related to influenza taking into consideration existing WHO Guidelines for outbreak communication and corresponding national contingency plans	<ul style="list-style-type: none"> <li>Ministry of Health</li> <li>Ministry of Agriculture</li> <li>National Pandemic Committee</li> </ul>	PS
	To maintain an appropriate level of awareness among government and other essential partners	To establish and maintain a web site with relevant information	<ul style="list-style-type: none"> <li>Ministry of Health</li> <li>Ministry of Agriculture</li> <li>GIS IT Team</li> </ul>	National Epidemiologist
	To ensure collaborative working relationship with the media and other stake holders regarding epidemics, including the roles, responsibilities and operating practices of public health system	Establish networks among key response stake holders including risks communicators, NGO's professionals and technical groups	<ul style="list-style-type: none"> <li>Ministry of Health</li> <li>Ministry of Agriculture</li> <li>NGO's</li> <li>Professional Groups</li> <li>Government Agencies</li> </ul>	National Epidemiologist
		Familiarize news media with national plans preparedness activities and decision making related to seasonal and pandemic influenza	<ul style="list-style-type: none"> <li>Ministry of Health</li> <li>NEMO Information Committee</li> </ul>	CMO /Bureau of Health Education

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		Develop feed back mechanisms to identify public knowledge about pandemic influenza and emerging public concerns	<ul style="list-style-type: none"><li>• Ministry of Health/MAFF</li><li>• Communication Specialists</li></ul>	Bureau of Health Education
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**COMMUNICATIONS**

**Inter- pandemic period, Phase 2.**

**(No new influenza virus subtype in humans. However, circulating animal influenza virus subtype poses as substantial risk of human disease)**

Area of Response	Objective	Activity	Resources Needed	Person/Agency Responsible
<p align="center"><b>Communications</b></p>	<p>To ensure that relevant information is shared rapidly among health departments, other partners and the public</p>	<p>Establish rapid communication channels to answer questions from health care providers and the public</p>	<ul style="list-style-type: none"> <li>• Ministry of Health</li> <li>• Ministry of Agriculture</li> <li>• Ministry of Social Transformation,</li> <li>• GIS,</li> <li>• MWA,</li> <li>• Communication Specialists</li> </ul>	<p>CMO</p>
		<p>Communicate information on risk and prevention (risk of infection, safe food, animal handling, etc;) based on WHO recommendations</p>	<ul style="list-style-type: none"> <li>• Ministry of Health</li> <li>• Ministry of Agriculture</li> <li>• Ministry of Social Transformation</li> <li>• Gender Affairs Desk,</li> <li>• GIS</li> <li>• MWA,</li> <li>• Communication Specialists</li> </ul>	<p>CMO</p>
		<p>Address possible stigmatization of individuals/population in contact with the animal strain</p>	<ul style="list-style-type: none"> <li>• Ministry of Health</li> <li>• Ministry of Agriculture</li> <li>• Ministry of Social Transformation,</li> <li>• Gender Affairs Desk</li> <li>• GIS</li> <li>• MWA,</li> <li>• Communication Specialists</li> </ul>	<p>Bureau of Health Education</p>

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**COMMUNICATIONS**

		Update all relevant Government Agencies, other partners and stakeholders including at risk groups and the public, with current information on virus spread and risk to humans	<ul style="list-style-type: none"> <li>• Ministry of Health</li> <li>• Ministry of Agriculture</li> <li>• Ministry of Social Transformation,</li> <li>• Gender Affairs Desk,</li> <li>• GIS</li> <li>• MWA,</li> <li>• Communication Specialists</li> </ul>	CMO
	To ensure that mechanisms exists for communication with the Ministry of Agriculture	Establish direct communication links between the MOH & MAFF	<ul style="list-style-type: none"> <li>• Ministry of Health</li> <li>• Ministry of Agriculture</li> </ul>	PS Health PS Agriculture

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**COMMUNICATIONS**

Pandemic alert period, **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)

Area of Response	Objective	Activity	Resources Needed	Person/Agency Responsible
<b>Communications</b>	To communicate transparently with the public regarding possible outbreak progression and contingencies to be expected	Provide regular updates to CAREC/PAHO and other international and domestic partners on the evolving national situation	<ul style="list-style-type: none"> <li>Ministry of Health</li> </ul>	National Epidemiologist
		Review and update information for news media, general public, health workers and policy-makers	<ul style="list-style-type: none"> <li>Ministry of Health</li> <li>Bureau of Health Education</li> <li>GIS</li> </ul>	National Epidemiologist
		Review communication structures/systems and facilities to ensure that they are functioning optimally and the contact list are updated	<ul style="list-style-type: none"> <li>Ministry of Health</li> <li>Ministry of Agriculture</li> <li>National Influenza Committee</li> </ul>	National Epidemiologist
	To ensure rapid sharing of appropriate information among health departments other, relevant Government Agencies and other partners including what is known and what is unknown	Identify target groups for delivery of key messages  Develop appropriate materials  Format language options (Creole etc.)	<ul style="list-style-type: none"> <li>Ministry of Health</li> <li>Ministry of Agriculture</li> <li>Bureau of Health Education</li> <li>MWA</li> </ul>	Bureau of Health Education
		Address the issue of stigmatization of individuals, families, communities affected by human infection with the animal strain	<ul style="list-style-type: none"> <li>Ministry of Health</li> <li>Ministry of Agriculture</li> <li>MWA</li> <li>Churches</li> <li>Private sector</li> </ul>	Bureau of Health Education

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**COMMUNICATIONS**

Pandemic alert period, **Phase 4** (clusters of cases with limited human-to-human transmission but spread is highly localized)

Area of Response	Objective	Activity	Resources Needed	Person/Agency Responsible
<b>Communications</b>	To ensure rapid sharing of information among health departments, other relevant Government Agencies and other partners, including what is known and what is unknown	Activate emergency communication plan	<ul style="list-style-type: none"> <li>Ministry of Health</li> <li>National Influenza Committee</li> <li>NEMO Secretariat</li> </ul>	CMO
		Reinforce and intensify key messages on prevention of human to human spread	<ul style="list-style-type: none"> <li>Ministry of Health</li> <li>Comm. Specialists</li> <li>Churches</li> <li>MWA</li> <li>Private sector</li> <li>National Education Learning Program [NELP]</li> <li>NEMO Information Committee</li> </ul>	Bureau of Health Education
		Provide instructions in self-protection	<ul style="list-style-type: none"> <li>Ministry of Bureau of Health Education</li> <li>Private sector</li> <li>CBOs</li> <li>GIS</li> </ul>	Bureau of Health Education
		Explain rationale and update the public on all aspects of the outbreak response and likely steps to be taken	<ul style="list-style-type: none"> <li>Ministry of Health</li> <li>Ministry of Agriculture</li> <li>GIS</li> </ul>	CMO
		Develop general health protection educational material for national and local application	<ul style="list-style-type: none"> <li>Ministry of Health</li> <li>Ministry of Agriculture</li> <li>Ministry of Education</li> <li>GIS</li> <li>Private sector</li> <li>National Printing Corporation</li> </ul>	Bureau of Health Education

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	To prepare the public and partners for possible rapid progression of events and other possible contingency measures	In conjunction with partner organizations update communication messages	<ul style="list-style-type: none"> <li>• Ministry of Health</li> <li>• Ministry of Agriculture</li> <li>• Media representatives</li> <li>• GIS</li> </ul>	Bureau of Health Education
		Re-emphasize infection control measures in the community, health care settings and long term care settings	<ul style="list-style-type: none"> <li>• Ministry of Health</li> <li>• Health Centres</li> </ul>	CMO

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**COMMUNICATIONS**

**Pandemic Alert Period, Phase 5. (Larger clusters but human-to-human spread still localized)**

Area of Response	Objective	Activity	Resources Needed	Person/Agency Responsible
<b>Communications</b>	Publicly address community emotions as cases intensify the pandemic.	Public addresses in by Senior members of the Public Administration	<ul style="list-style-type: none"> <li>• GIS</li> <li>• CMO</li> <li>• CVO</li> <li>• National Influenza Committee</li> </ul>	Prime Minister
	To prepare the public and other partners for likely progression of events, additional contingency measures and disruption to normal life.	Re-define key messages, set reasonable public expectations; emphasize the need to comply with public health messages despite their possible limitations	<ul style="list-style-type: none"> <li>• Ministry of Health</li> <li>• Health Centres</li> <li>• Community Leaders</li> <li>• GIS</li> <li>• Private sector</li> <li>• Churches</li> <li>• MWA</li> </ul>	Bureau of Health Education
	To ensure rapid sharing of appropriate information among all key stakeholders	Utilize last window of opportunity to refine communication strategy and system in anticipation of imminent pandemic	<ul style="list-style-type: none"> <li>• Ministry of Health</li> <li>• Health Centres</li> <li>• Community Leaders</li> <li>• GIS</li> <li>• Private sector</li> <li>• Churches</li> <li>• MWA</li> <li>• NEMO Information Committee</li> </ul>	Bureau of Health Education
		Inform public about intervention that may be modified or implemented during a pandemic	<ul style="list-style-type: none"> <li>• Ministry of Health</li> <li>• Health Centres</li> <li>• Community Leaders</li> <li>• GIS</li> <li>• Private sector</li> <li>• Churches</li> <li>• MWA</li> <li>• NEMO Information Committee</li> </ul>	Bureau of Health Education

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**COMMUNICATIONS**

**Pandemic Period, Phase 6 (Pandemic phase – increased and sustained transmission in general population)**

<b>Area of Response</b>	<b>Objective</b>	<b>Activity</b>	<b>Resources Needed</b>	<b>Person/Agency Responsible</b>
<b>Communications</b>	To ensure public access to regularly -updated official national sources and focal points for credible, consistent information related to the pandemic.	Keep news media, public, professional partners and other stakeholders informed about progress of pandemic in affected countries; prepare audiences for imminent onset of pandemic activity.	<ul style="list-style-type: none"> <li>• National Influenza Committee</li> <li>• NEMO Information Committee</li> </ul>	GIS Bureau of Health Education
	To maintain open and accessible channels for advice to the public on specific subjects (e.g. travel, social gatherings, etc.).	Redefine key messages; set reasonable public expectations; emphasize need to comply with public health measures despite their possible limitations	<ul style="list-style-type: none"> <li>• National Influenza Committee</li> <li>• NEMO Information Committee</li> </ul>	GIS Bureau of Health Education
	To achieve public acceptance and support for national responses and contingency measures.	Utilize last “window of opportunity” to refine communications strategies and systems in anticipation of imminent pandemic.	<ul style="list-style-type: none"> <li>• National Influenza Committee</li> <li>• Bureau of Health Education</li> <li>• NEMO Information Committee</li> </ul>	Bureau of Health Education
		Inform public about interventions that may be modified or implemented during a pandemic, e.g. prioritization of Health-care services and supplies, travel restrictions, shortages of basic commodities ,etc.	<ul style="list-style-type: none"> <li>• National Influenza Committee</li> <li>• Bureau of Health Education</li> <li>• NEMO Information Committee</li> </ul>	Bureau of Health Education
		To ensure rapid sharing of information of the pandemic among health authorities, other relevant government departments and other partners regarding progress.	<ul style="list-style-type: none"> <li>• National Influenza Committee</li> </ul>	Bureau of Health Education
<i>When Affected</i>				
<b>Communications</b>	To ensure public access to regularly -updated official national sources and focal points for credible, consistent information related to the pandemic.	Keep news media, public, professional partners and other stakeholders informed about progress of pandemic in affected countries; prepare audiences for imminent onset of pandemic activity.	<ul style="list-style-type: none"> <li>• National Influenza Committee</li> <li>• Bureau of Health Education</li> <li>• NEMO Information Committee</li> </ul>	NEMO Information Committee
<b>When Affected</b>	To ensure rapid sharing of information regarding progress of	Maintain capacity for meeting expected domestic and	<ul style="list-style-type: none"> <li>• Cabinet</li> <li>• National Emergency</li> </ul>	NEMO Information Committee

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	the pandemic among health authorities, other relevant government departments and other partners.	international information demands.	Management Advisory Committee <ul style="list-style-type: none"> <li>• National Influenza Committee</li> <li>• Bureau of Health Education</li> </ul>	
		Activate all elements of communications plan.	<ul style="list-style-type: none"> <li>• Bureau of Health Education</li> <li>• NEMO Information Committee</li> </ul>	NEMO Information Committee

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<b>Areas of Response</b>	<b>Activity</b>	<b>Resources Needed</b>	<b>Person/Agency Responsible</b>
<b>Communications</b>	Acknowledge and provide information necessary to deal with public anxiety, grief and distress associated with pandemic.	<ul style="list-style-type: none"> <li>• MoH Psychiatric Services</li> <li>• Churches</li> <li>• Private sector</li> <li>• CBOs, NGOs</li> <li>• NEMO Welfare Committee</li> <li>• NEMO Information Committee</li> </ul>	NEMO Welfare Committee
	Audit outcomes of communications activities to refine current response and inform future pandemic planning.	<ul style="list-style-type: none"> <li>• National Influenza Pandemic Planning Committee</li> <li>• NEMO Committees</li> </ul>	Director NEMO

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**Post Pandemic Period (Return to interepidemic period)**

<b>Areas of Response</b>	<b>Objective</b>	<b>Activity</b>	<b>Resources Needed</b>	<b>Person/Agency Responsible</b>
<b>Communications</b>	Audit outcomes of communications activities to refine current response and inform future pandemic planning.	Evaluate communications response during previous phases; review lessons learned.	<ul style="list-style-type: none"> <li>• National Influenza Committee</li> <li>• NEMO Membership</li> </ul>	Director NEMO
	Publicly address community emotions after the pandemic.	Public addresses in by Senior members of the Public Administration	<ul style="list-style-type: none"> <li>• GIS</li> <li>• CMO</li> <li>• CVO</li> <li>• National Influenza Committee</li> </ul>	Prime Minister