

PERFORMANCE AUDIT IN BRIEF

Major Infectious Disease Outbreaks: Readiness to Respond

NSW Health



THE AUDIT OFFICE
OF NEW SOUTH WALES

About the audit

The existence of new and re-emerging disease threats such as severe acute respiratory syndrome (SARS) and the ongoing outbreak of avian influenza have prompted countries around the world to examine closely their capacity to prevent, detect and respond to serious infectious diseases.

This audit focuses on the critical role of NSW Health. We wanted to know if the NSW public health system is ready to respond to a public health emergency arising from a major infectious disease outbreak.

Audit opinion

NSW Health is working to increase its preparedness to respond to a major infectious disease outbreak. It is also contributing to the development of national policies, strategies and capabilities, which affect its level of preparedness.

NSW Health has focused on contingency plans to respond to an influenza pandemic and has accomplished much. The plans need to be further developed and tested. There is to be close integration with private health providers. Capacity limits are being analysed and options for surge capacity developed.

NSW Health indicated to us that their progress has been dependent upon the need to develop a better understanding of what is required, the need to ensure national consistency in approach, and the need to adequately involve and integrate the Area Health Services in developing the response.

NSW Health also has plans for the management of some other types of infectious disease outbreaks, such as smallpox, which could be modified to suit types of disease outbreaks that are not documented. Additionally, the work on the influenza pandemic could be used to develop broader contingency plans for other types of major infectious disease outbreaks.

We found little evidence that other jurisdictions were significantly further advanced than NSW in preparation and testing of plans for a pandemic. This is a major task. It also needs to be addressed in the face of competing priorities that are much closer to hand. But there is much to do and there may only be a limited time in which to complete preparations.

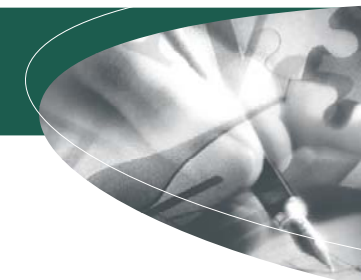
Key findings

Is the public health system well organised to respond to an emergency?

A clearly defined command and control structure is in place for health emergencies. Area Health Services have initial responsibility for case management and containment. A whole-of-health, and possibly whole-of-state, approach would be used if the situation escalates.

The completeness and quality of plans is an important indicator of preparedness. NSW Health has a high level emergency plan known as 'HEALTHPLAN', but most of the specific plans that support it are incomplete and in draft form and not available for use. There is a NSW whole-of-government plan and a NSW Health plan for an influenza pandemic. But most of the plans that support this are incomplete and in draft form. The need for some of these plans is being reviewed. NSW Health also has plans for the management of some other types of infectious disease outbreaks, such as smallpox, which could be modified to suit types of disease outbreaks that are not documented.

Until recently there was relatively little formal testing of plans, although experience was gained with the outbreaks that do occur. The first national exercise testing for a major human disease outbreak was *Exercise Cumpston* in October 2006. In addition NSW Health is planning to conduct *Exercise Paton* to test the ability of NSW hospitals to identify and respond to cases in the early stage of a pandemic.



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Is the public health system preparing to respond to a full range of emergencies?

NSW Health continually monitors the risks of a pandemic, based on information from the World Health Organization. NSW Health also monitors the risks of other infectious diseases. Although we found NSW Health to be very much aware of the risks associated with infectious diseases, we did not see any structured and systematic assessment of the threats they present to NSW, as outlined in the Australian risk management standard.

Is there likely to be sufficient and timely advice to all?

NSW Health's surveillance system is a critical part of its preparedness. Its systems are well established and it has a program for their further development. It needs to continue to develop and test its surveillance systems and the capability of its contact tracing system to deal with a public health emergency.

There has been considerable emphasis on effective communications with the public. NSW Health has established improved systems for rapid communication of urgent advice to GPs and other medical practitioners and is working on further improvement.

There is also recognition of the need to communicate information about the situation clearly among both government and private health providers.

In NSW much of this information is collected and used at Area Health Service level. NSW Health developed an information system for use in *Exercise Cumpston*. The system relied on regular situation reports from the Area Health Services. There is scope to further develop such systems.

Is there likely to be sufficient capacity in the health system?

We were able to conclude that NSW was likely to have adequate supplies of vaccine and antiviral drugs, due to the size of the National Medical Stockpile. NSW Health is examining how this may be deployed, but actual plans will depend on circumstances at the time.

NSW Health has indicated that there is likely to be adequate laboratory capacity to handle a major outbreak. Further planning should confirm this.

Depending on its severity, a pandemic could severely stress the current healthcare system. The increase in patients requiring hospitalisation and critical care could result in shortages of staff, resources and supplies. We were unable to establish whether there was likely to be sufficient capacity. Key areas include emergency staffing needs, isolation facilities, intensive care units, assisted ventilation services, hospital beds and medical supplies.

NSW Health has identified some possible ways of temporarily increasing capacity. But there is further work to do to determine surge requirements, capabilities and formal escalation processes.

Summary of recommendations

We recommend measures to:

- strengthen organisational arrangements
- develop systematic risk assessment processes
- assess and address the need for improved information systems
- assess and address the need for surge capacity.