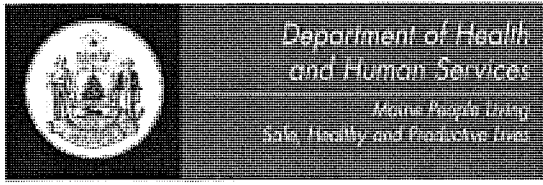


# MAINE STATE LEGISLATURE

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Paul R. LePage, Governor

Mary C. Mayhew, Commissioner

Department of Health and Human Services  
Commissioner's Office  
221 State Street  
11 State House Station  
Augusta, Maine 04333-0011  
Tel.: (207) 287-3707; Fax (207) 287-3005  
TTY Users: Dial 711 (Maine Relay)

October 15, 2014

To: Senator Margaret M. Craven, Chair  
Representative Richard R. Farnsworth, Chair  
Members of the Joint Standing Committee on Health and Human Services

From: Mary C. Mayhew, Commissioner, Department of Health and Human Services

Re: DHHS responses to Enterovirus D68 and Ebola Virus questions for October 15, 2014 HHS interim committee meeting

**Background:**

**Enterovirus D68 (EV-D68)** is one of many non-polio enteroviruses. This virus has not been commonly reported in the United States until this year, when there were several outbreaks. The virus can cause mild to severe respiratory illness. Mild symptoms may include fever, runny nose, sneezing, cough, and body and muscle aches. The virus likely spreads when an infected person coughs, sneezes, or touches contaminated surfaces.

As of August 9, 678 people in 46 states and the District of Columbia were confirmed to have respiratory illness caused by EV-D68. Maine had one confirmed case in a school aged child. The child was hospitalized, but has been discharged and is recovered.

**The Ebola Virus** is an infectious disease. Symptoms may include fever, headache, joint and muscle aches, weakness, diarrhea, vomiting, stomach pain, lack of appetite. In some patients, the symptoms may include a rash, red eyes, hiccups, cough, sore throat, chest pain, difficulty breathing, difficulty swallowing, and bleeding inside and outside of the body.

As of October 5, there have been a total of 8,033 suspect and confirmed cases of Ebola virus disease and 3,865 deaths from the current Ebola outbreak in West Africa. There have been no confirmed cases of Ebola in Maine. Standard treatment is limited to supportive therapy only.

Transmission of the disease is usually through direct contact with the blood, sweat and other body secretions of an infected person. It can also be caused by contact with an infected animal in the affected countries, or exposure to objects, like needles, that have been contaminated with infected secretions.

Ebola can be prevented by avoiding contact with the blood or secretions of an infected person. An individual not exhibiting symptom of Ebola is not infectious to others.

## **Questions:**

### **1. Please describe Maine CDC's emergency preparedness for EV-D68 and Ebola.**

**Response:** The major concern for emergency preparedness is the demand it may place on hospital inpatient volume, particularly pediatric Intensive Care Unit beds.

- Maine has an existing HAVBED system which monitors bed availability. This information is available statewide.
- The Public Health Emergency Preparedness Program (PHEP) can use this information to coordinate patient needs.
- EV-D68 protocols are much like those for the pandemic influenza, so plans are in place and can be implemented if needed.

Regarding preparedness for EV-D68, Ebola and other public health emergencies, the Maine CDC has seven dedicated field epidemiologists located in public health district offices across the state who perform disease investigations and coordinate outbreak response. Maine has a robust disease surveillance system and a highly trained and experienced team that respond to an infectious disease report to conduct investigations and tracing of a disease.

The PHEP and its Healthcare Preparedness Program have built systems that are capable of mitigating the transmission of Enterovirus-D68 and can implement the CDC's All-Hazards Emergency Operations Plan (EOP) in any public health emergency. Components of the EOP include:

- A base plan that outlines roles and responsibilities; descriptions of our emergency operations center and incident command structure.
- Functional annexes including infectious disease response plans and environmental health response plans; and hazard-specific annexes such as Strategic National Stockpile (SNS) and mass vaccination plans.

Maine CDC's emergency preparedness staff facilitates drills and exercises to ensure emergency response staff are ready and prepared to act and maintain operational readiness.

In addition, the Disaster Behavioral Health Volunteer Response Team (DBHRT) can provide mental and behavioral health support to survivors, patients, and families.

Public Health Nurses are available across the state to support our emergency response activities.

Maine's communications capability is significant and includes: the Health Alert Network (HAN) for sending alerts and notifications to hospitals, health centers, long-term care facilities, physician practices, and other public health and emergency response personnel; Electronic Medical Records resources for conducting bed availability polls and other resource requests; and WebEOC for integration with Maine Emergency Management Agency (MEMA) in order to coordinate responses. In addition, the media can be leveraged when appropriate.

Maine CDC's Public Health Emergency Operations Center (PHEOC) can be established within an hour and can serve as a centralized location for operations. Maine CDC has planned for continuity of operations to ensure that essential functions are sustained while redirecting non-essential staff into emergency response roles if a long-term response is required.

Regarding communication, hotlines can be set up quickly for both healthcare provider and the general public. If the surge becomes too great, as it did during the H1N1 outbreak, 211 can assist with answering calls from the public.

Maine CDC also maintains a 5,000-square foot warehouse that houses emergency management supplies.

## **2. How is Maine CDC interacting with federal CDC regarding EV-D68 and Ebola?**

**Response:** Maine CDC has a designated epidemiologist who serves as is the contact person for federal CDC for EV-D68 concerns. The epidemiologist receives all communications and updates from federal CDC; participates in all federal calls; and has a direct contact at U.S. CDC if the need for guidance arises.

Maine's Health and Environmental Testing Laboratory (HETL) also has a designated staff member to oversee Enterovirus submissions to federal CDC.

Maine's State Health Officer and acting State Epidemiologist also communicate with several national health and public health agencies and organizations.

As information regarding Ebola is ever-evolving, Maine CDC has frequent conference calls and email communications with federal CDC regarding Ebola Virus Disease. These conversations are taking place daily.

Maine CDC also maintains communications with the federal CDC Emergency Operations Center, which provides subject matter experts available for consultation.

## **3. How is the state educating the public on EV-D68 and Ebola?**

**Response:**

### **EV-D68**

Maine CDC created a web page with Enterovirus information

<http://www.maine.gov/dhhs/mecdc/infectious-disease/epi/airborne/enterovirus.shtml> including an Enterovirus-D68 specific fact sheet. In addition:

- The Health and Environmental Testing Laboratory (HETL) has sample submission information available on their website <http://www.maine.gov/dhhs/mecdc/public-health-systems/health-and-environmental-testing/documents/Important-Announcement-Regarding-Enterovirus.docx>
- Maine CDC issued two Health Alerts to date and a press release:
  - <http://www.maine.gov/tools/whatsnew/attach.php?id=628931&an=2>
  - <http://www.maine.gov/tools/whatsnew/attach.php?id=628006&an=2>
  - <http://www.maine.gov/dhhs/mecdc/press-release.shtml?id=628932>
- Maine CDC is collaborating with the Department of Education to provide basic information on respiratory illnesses including EV-D68 to school nurses and superintendents
- Maine CDC has used social media and mainstream media to provide information
- Maine CDC has a disease reporting and consultation line the public can utilize if they have questions

## **Ebola**

- A web page containing information for the public including the disease's symptoms and methods of transmission has been created.  
<http://www.maine.gov/dhhs/mecdc/infectious-disease/epi/zoonotic/ebola.shtml>
- An Ebola Fact Sheet is also available on the webpage
- Maine CDC utilizes social media and mainstream media to provide information to members of the public and respond to questions.
- As is the case with any public health concern, Maine CDC staff meets with public groups to educate and inform
- Maine CDC is actively working with the Office of Health Equity and Office of Multicultural Affairs to address vulnerable populations

### **4. How is the state educating health care workers on EV-D68 and Ebola?**

**Response:** Education of health care workers regarding EV-D68 has been through the Health Alert Network.

Regarding Ebola, Maine CDC serves as a conduit of information from the United States CDC regarding the most up-to-date guidance regarding Ebola:

- Maine CDC provides checklists and decision flowcharts created by federal CDC to aid hospitals in making sure providers are aware of the symptoms, process, and what precautions should be taken
- Maine CDC is in daily contact with healthcare providers, including hospital infection preventionists to share U.S. CDC's clinical guidelines on treating and testing and to provide infection prevention and control guidance
- Maine CDC is participating and facilitating task forces in all regions of Maine to ensure ports of entry, health care facilities, and airports are prepared to manage Ebola patients should the need arise
- Surveys are being sent to all hospitals and health centers to determine their capacity of trained staff, security, and personal protective equipment to care for an Ebola patient.
- Maine CDC is working with Maine Emergency Medical Services (EMS) providers to ensure they are prepared to safely transport Ebola patients and have adequate equipment.

### **5. Is Maine's Health and Environmental Testing Laboratory (HETL) prepared for an outbreak of Enterovirus in Maine?**

**Response:** The HETL is currently capable of testing for EV-D68 and has multiple staff capabilities to handle these tests. Typing and confirmation of EV-D68 is currently performed by U.S. CDC, and the HETL coordinates sample submission.

The HETL serves as the single point of contact for Ebola testing and is prepared to implement the official protocols of the U.S. CDC. The HETL will ship any suspect Ebola specimens to the CDC for identification.