

Zika Action Plan Summit Report

May 24, 2016

Arizona 2016 Zika Action Plan Summit Report Phoenix, Arizona May 24, 2016

Prepared by: Arizona Department of Health Services (ADHS), Bureau of

Epidemiology & Disease Control Services

Acknowledge: The planning team for the Arizona 2016 Zika Action Plan Summit

gratefully acknowledges the support of the presenters who devoted

their time and expertise to ensuring a shared knowledge and

understanding of Zika in Arizona.

Objectives: 1. Establish a common statewide concept of operations for Zika

virus preparedness and response

2. Ensure shared knowledge and understanding of Zika virus including transmission, symptoms, diagnosis, clinical outcomes,

risk factors, prevention and control

3. Provide a forum for coordinated, statewide planning for Zika

virus preparedness and response

Summit Scope: The Arizona 2016 Zika Action Plan Summit focused on engaging

partners across the Zika preparedness and response continuum to

come together to share information, resources, knowledge and

planning strategies in order to improve Arizona's overall preparedness for Zika response. The Summit served as an

educational opportunity for attendees to learn the latest information

about Zika, but also provide a forum for coordinated statewide

planning to occur.

Summit Attendees:

Nearly 350 partners from across Arizona, partners included; State,

County & Tribal Health • State/Federal Governmental Agencies •

Healthcare Providers and Organizations • Elected Officials •

Environmental Health • Non-Profit Agencies • Border Health • First Responders • Local Emergency Management • Sky Harbor • State,

local and private labs • Higher Education • Collaborative Groups •

Blood Services • Tourism

Public Health Emergency Preparedness (PHEP) Capabilities Alignment

Summit objectives, topics and speakers were chosen based upon the current Arizona Zika posture and what ADHS wanted to communicate to the audience and accomplish going forward; it was then determined that the objectives should be aligned with the Centers for Disease Control and Prevention (CDC) PHEP capabilities. The capabilities provide public health with a consistent system for evaluating and assessing public health and healthcare system preparedness. The table below includes the capability and specific functions that were met for each. Information below was taken from the CDC PHEP Capabilities/National Standards for State and Local Planning document, March 2011.

Public Health Preparedness Capability	Functions
Community Preparedness	(F2) Build community partnerships to support health
	preparedness
	(F4) Coordinate training or guidance to ensure
	community engagement in preparedness efforts
Information Sharing	(F2) Identify stakeholders to be incorporated into
	information flow
	(F3) Exchange information to determine a common
	operating picture
Public Health Lab Testing	(F1) Manage laboratory activities
	(F4) Support public health investigations
Non-Pharmaceutical	(F1) Engage partners and identify factors that impact
Interventions (NPI)	non-pharmaceutical interventions
	(F2) Determine non-pharmaceutical interventions
	(F3) Implement non-pharmaceutical interventions
Public Health Surveillance &	(F3) Recommend, monitor, and analyze mitigation
Epidemiology	actions
	(F4) Improve public health surveillance and
	epidemiological investigation systems

Summit Content:

Holly Ward (ADHS PIO): Welcomed everyone, took care of housekeeping issues and then reviewed the summit goals and objectives.

Opening Remarks: Christina Corieri, JD, who serves as Governor Doug Ducey's Health and Human Services Policy Advisor made opening remarks. **Main General Session:**

<u>Zika 101 Overview</u>, Cara Christ, MD, MS, Director, Arizona Department of Health Services (ADHS), covered the history of Zika and how the world got to where it's currently at today, along with current Zika numbers within the United States, the U.S.

Territories and Arizona. The key components of Dr. Christ's presentation revolved around educating the audience about how Zika is transmitted, common symptoms, how the disease is diagnosed, treated and preventative measures, along with what we know and what we do not know when it comes to Zika and pregnancy. The last part of the presentation laid out the Public Health System Response to Zika and specifically the roles of partners at each jurisdictional level. Dr. Christ concluded with a discussion of Arizona's current preparedness plans and activities, highlights included:

- The Arizona Arboviral Response Handbook;
- Zika Testing Algorithms for Healthcare Providers;
- Monthly Arboviral Workgroup Activities
- Public Education Know The Facts & Prevent Breeding Site info graphics

The Zika 101 Overview presentation is located here

Plenary 1 Session:

Road Map to Zika Success, Joli Weiss, PhD, Manager, Infectious Disease Preparedness Epidemiology, ADHS; Rebecca Sunenshine, MD, Medical Director, Disease Control Division, Maricopa County Department of Public Health (MCDPH), this presentation laid out Zika information specific to Arizona, what happens when travelers come to our state from Zika affected countries and what we, as healthcare professionals, need to do to reduce or stop the spread of the Zika virus within our state. The road map involves healthcare providers, such as Urgent Care, Emergency Departments, Primary Care Providers or Obstetricians; state and local public health; vector control; the Arizona State Public Health Lab (ASPHL); and, of course, patient counseling, pregnancy registry and infant follow-up. Expectations are for healthcare providers to report suspected Zika cases to local public health quickly, to help reduce Zika's spread by advising patients to avoid mosquito bites. Zika Testing Algorithms were presented (included in attendee's packets), that detailed testing for males and non-pregnant females, along with testing for pregnant women.

A panel consisting of Drs. Sunenshine and Weiss; Karen Rose, RN, Disease Surveillance Nurse, MCDPH; John Townsend, Division Manager, Environmental Services Vector Control, Maricopa County Environmental Services (MCES); and Victor Waddell, PhD, Director, ASPHL took questions from the audience.

The "Road Map to Zika Success" presentation is located here

Lunch Keynote – Strategies for Managing Mosquito-borne Disease Threats, Lessons from the Field, Yuma County, Arizona, Diana Gomez, MPH, Director, Public Health, Yuma County Public Health Services District; and Richard Cumming & Joey Martinez, both Vector Control Specialists with Yuma County Public Health Services District; outlined how Yuma County has used a coordinated approach (Local, State, CDC and Bi-national) in the past to respond to various mosquito-borne outbreaks within their jurisdiction. This approach included provider education, case investigation and surveillance, public education and community outreach, mosquito control and coordination and strategic alignment. Detailed integrated mosquito management techniques and processes for field surveillance were also shared during the presentation.

The Strategies for Managing Mosquito-borne Disease Threats presentation is located here:

Plenary 2 Session:

Follow Up For A Positive Zika Test, Dianna Contreras, Manager, Birth Defects Monitoring Program, ADHS: Francisco Garcia, MD, MPH, Director and Chief Medical Officer, Pima County Health Department; we're at the point in our Zika journey where we have positive test results; those results are sent electronically from the State Public Health Lab to ADHS Epidemiology and shared with the relevant local health department. Health care providers are critical in communicating with the patient about the test interpretation and providing the appropriate patient counseling/education. A "Next Steps for Pregnant Women after Zika Testing is completed" was presented (included in the attendee's packets). The next stop on the journey was an overview of the role ADHS plays, to include surveillance, weekly CDC reporting, and the need to identify trends, start investigations, detect outbreaks and initiate public health control measures. There is also collaboration with the U.S. Zika Pregnancy Registry to report and follow up with the pregnant women, which ensures information on cases moving to a different state is reported to the state of interest. Zika testing for infants was presented, to include detection of those with microcephaly or intracranial calcification. ADHS has a Birth Defects Monitoring Program that conducts statewide defects surveillance for 37 categories of birth defects.

A panel consisting of Dianna Contreras; Francisco Garcia, MD, MPH; Timothy Flood, MD, Medical Director, Bureau of Public Health Statistics, ADHS; Jefferson Jones, MD, MPH, Epidemic Intelligence Officer, Centers for Disease Control and Prevention (CDC), Nathan Lepp, MD, Neonatologist, NAL, Dee Quinn, MS, CGC, Clinical Lecturer, Colleges of Medicine and Pharmacy, UofA and Irene Ruberto, PhD, MPH, Surveillance Epidemiologist, ADHS took questions from the audience.

The Follow Up for a Zika Test presentation is located here

Summit Breakout Sessions:

Legal Preparedness for Zika Virus: Law as a Tool to Protect Public Health, Aubrey Joy Corcoran, JD, MPH, Assistant Attorney General, Arizona Office of the Attorney General Education and Health Section. The legal presentation provided an overview of mosquito abatement-related laws and state statutes within Title 36. Key laws and regulations lay out the ADHS Director's powers & duties, provide guidance for local inspection and remediation of nuisances and provide for the examination of any premises; however, discrete processes must be followed as outlined in rule. The ADHS Director's powers do not require an emergency declaration. The law can be used as a tool for voluntary compliance and collaboration to reach the desired outcome – reducing the spread of mosquito-borne disease.

The Legal Preparedness for Zika Virus presentation is located here

Public Health Communication, Holly Ward, Communication Director, Arizona Department of Health Services, the public seeks five things from communication: gain wanted facts; empower decision making; be involved as a participant, not a spectator; provide watchguard over resource allocation; and recover or preserve well-being and normalcy. Multiple factors can inhibit operational success as well, such as mixed messaging and not countering rumors and myths in real-time. Currently, Zika community concerns include pregnancy risks and use of chemicals to repel mosquitoes, hence, community engagement is a must! Ms. Ward laid out the six principles of Crisis Emergency Response Communication (CERC) and that ADHS can offer training or at least coordinate with local jurisdictions/agencies to provide support. CDC has online CERC training, along with an ADHS CERC Plan.

The Public Health Communication presentation is located here

Laboratory Diagnostics, Victor Waddell, PhD, Director, ASPHL; William Slanta, Assistant Bureau Chief, ASPHL, Joseph Manfrida, PhD, Chief, ASPHL Biosafety and Biosecurity; Kathryn Fitzpatrick, Virology/Serology Section Supervisor, ASPHL.

Topics included Zika Virus Biosafety specifics, along with Zika Virus testing details (submissions must be approved by the local health department prior to shipping). The Trioplex test is available to test for three different viruses (Chikungunya, Dengue and Zika) by PCR. This presentation provided many details into detection, serology and

molecular testing, specimen collection and the importance of correct packaging and shipping. Please refer to the slide presentation link below for more specific details.

The Laboratory Diagnostic presentation is located here

Vector Surveillance and Control, Joli Weiss, PhD, Manager, Infectious Disease Preparedness Epidemiology, ADHS; Hayley Yaglom, MS, MPH, Vector-borne and Zoonotic Disease Epidemiology, ADHS; John Townsend, Division Manager, Environmental Services Vector Control, MCDPH; and Kirk Smith, PhD, Laboratory Supervisor, MCDPH Laws, statutes and best practices were discussed as they pertain to public nuisances dangerous to public health; and mosquito management, along with Arizona Department of Environmental Quality permits and adverse reaction incidents. Various Maricopa-specific maps were presented showing the different mosquito breeding sites and Aedes aegypti activity. Maricopa County has a Dengue/ Chikungunya/Zika Response Plan which lays out conditions, vector presence, vector abundance, along with the appropriate vector response/action and the epidemiologic response/action. Key to mosquito management is physical control or source reduction, biological control, larvacides, adulticides, monitoring for efficacy/resistance, education and community outreach and good, consistent record-keeping.

The Vector Surveillance and Control presentation is located here

Provider and Patient Communication about Zika, Lisa Villarroel, MD, MPH, Medical Director, Epidemiology and Disease Control, ADHS There were three main points emphasized during this presentation including comparing health care providers messaging for Zika and for Ebola: Ebola messaging was more of reassurance whereas Zika messaging is more alarming to provoke preventive actions. Also, what can we do to prevent Zika infection in women of childbearing age? Before a woman becomes pregnant, we can prevent unwanted pregnancy among the 1.3 million Arizonan women of reproductive age, using condoms and other birth control methods. To protect the 100,000 pregnant women in Arizona each year from being exposed to Zika, patients and providers should be educated about ways to prevent Zika infection (such as avoid traveling to Zika affected areas, wear insect repellent or long sleeves, abstain from or have protected sex with the partner who travelled to a Zika affected area, etc.). The ADHS and CDC web sites, the Health Alert Network and the new Infectious Disease App are all good systems which to communicate with health care providers.

The Provider and Patient Communication about Zika presentation is located here

Plenary Session: Next Steps

The last session was used as a forum to survey the summit participants on various Zika-related questions, such as current knowledge levels, gaps that may still exist in Arizona regarding Zika prevention and response, key partners that should be included in future Zika preparedness and response planning and what resources are still needed regarding Zika virus. Audience members were given wireless handheld keypad devices that were used to submit their votes and the results were tabulated electronically via an Audience Response System. Going forward, the results will be used by ADHS to address next steps and will be critical to our Zika preparedness and response planning.

The ARS Zika Summit Results are located here

Summit Outcomes:

Arizona was the first to conduct a Zika summit on the state level. The summit was an important step to ensuring that all Zika response partners have a clear understanding of what Zika is, how to prevent it, and what is already being done to protect Arizonans. Based on the summit participant feedback forms, a large number (a jump from 20% at the beginning of the summit to 70% afterwards) left with a high level of understanding of the Zika virus. Participants expressed that the event was "attended by a wide variety of individuals which was useful in seeing all sides of the issue"; they appreciated "networking and meeting counter-parts from other agencies"; they learned "lab info and what to communicate to my healthcare providers and patients"; and gained an "understanding challenges in mosquito control, along with understanding the challenges in accurately screening for Zika".

In addition to the standard networking, summit attendees were also given conference materials that included a one-page Zika fact sheet; interim Zika testing algorithms for healthcare providers that included Zika testing & counseling considerations and information on case reporting and specimen submission. Power Point presentations and other printed materials are also available on the ADHS Zika website ADHS Zika Website

Next Steps:

The summit underscored just how well prepared Arizona is to respond to Zika across the continuum of response partners, but highlighted the need for additional resources in Arizona to address

human and mosquito surveillance, communication with healthcare providers, and education of the general public, especially pregnant women. ADHS plans to work with partners to address identified needs, including enhanced communication with the public about the need for mosquito bite prevention and reduction of mosquito breeding; enhanced mosquito control; and clear communication to healthcare providers about the rapidly evolving science of Zika virus. ADHS will continue to update and share resources like testing algorithms, test interpretation guidelines, and recommendations for providers to communicate with patients. ADHS will also partner across the Zika response community to ensure that federal funding awarded for Zika in Arizona is used to address identified gaps in Zika planning and response capabilities.

Zika Planning Team:

Jessica Rigler, Holly Ward, Christine Wampler, Ken Komatsu, Don Herrington, Lisa Villarroel, Hayley Yaglom, Jennifer Pistole, Benjamin Palmer, Joli Weiss, Harmony Duport, William Slanta, Victor Waddell, Rosa Lira, Krista Anheluk, Irene Ruberto, Antonio Hernandez, Dianna Contreras, Sylvia Puente-Araiza, Jennifer Cunico, Ruth Penn, Corey Tarango, Paul Barbeau, and Teresa Ehnert