Fiji
in collaboration with SPC/PRIPPP

1. Background

The Secretariat of the Pacific Community (SPC), through delivery of the Pacific Regional Influenza Pandemic Preparedness Project (PRIPPP), is a partner in promoting emergency preparedness across the South Pacific region for both an influenza pandemic (primarily a public health emergency with multisectoral consequences) and an outbreak of avian influenza (primarily an agricultural emergency with public health consequences).

Fiji commenced its influenza pandemic preparedness planning in 2004, which resulted in the development of the *Fiji Islands National Influenza Pandemic Plan* (FINIPP 2006). The Fiji Islands National Influenza Taskforce (FINIT) led the process of national consultation culminating in the development of FINIPP and has subsequently provided a high-level forum through which various issues and gaps in preparedness for an influenza pandemic and an outbreak of avian influenza have been identified and allocated to relevant sectors to be addressed. Although the national taskforce is multisectoral in nature, FINIPP currently remains largely health sector focused. Non-health sectors, such as essential services, law and order, and commercial service providers (e.g. banks and transport companies), will develop sector-specific subplans that link to FINIPP, thus underpinning influenza pandemic preparedness within each sector.

The FINIPP testing exercise took place during 4–5 December 2007.

2. Objectives

The primary objectives of the FINIPP testing exercise were to:

- assess Fiji's existing FINIPP and subplans for completeness and identify and document any gaps in the existing plan;
- provide an opportunity for participants with little previous exposure to FINIPP to familiarize themselves with the plan;
- provide an opportunity for stakeholder participation in the identification of gaps or inadequacies in the existing plan (and subplans) and contribute to the development of improvements and solutions;
- improve linkages within and between the different sectors involved in preparedness for an influenza pandemic or outbreak of avian influenza;
- assess the adequacy of standard operating procedures for specific responses (particularly relevant where untrained personnel are expected to have an emergency response role);
- provide a forum for general discussion on issues relevant to improving emergency preparedness in Fiji for an influenza pandemic and an outbreak of avian influenza.

3. Participating agencies and organizations

Participation in the exercise was wide ranging with 72 representatives from a number of organizations, outlined in Table 4.

Table 4
Participating agencies and organizations

Government of Fiji ministry representatives
Ministry of Health
Ministry of Agriculture, Fisheries and Forestry
Ministry of Primary Industry
Ministry of Education
Ministry of Transport
Fiji Islands Maritime Safety Authority
Regional development partners
United Nations Children's Fund (UNICEF)
WHO
SPC/PRIPPP
Tertiary institutions
Fiji School of Medicine
Private industry
Ram Sami & Sons (poultry production)
Goodman Fielder
Mobil Oil
Volunteer organizations
Red Cross
St John's Ambulance Brigade
Media
Fiji Times

4. Type of exercise

TTX

5. Preparation for the exercise

Planning for the FINIPP testing exercise was undertaken in consultation with the Fiji Ministry of Health (which currently provides the chair of the FINIT), WHO (Suva Office), PRIPPP and numerous other key agencies and stakeholders. A modified TTX format, using a number of different scenarios, was agreed as the method of plan testing that would be most appropriate and would enable engagement of the various participating sectors and agencies. It was also agreed that representation from each of Fiji's main geographic regions (northern, central and eastern divisions) was critical to enable the national plan to be effectively tested from both urban and provincial perspectives.

6. Conduct of the exercise

The plan testing exercise commenced with the delivery of a number of information sessions (including an overview of avian and pandemic influenza, an Asian experience with preparedness planning – case study of the Philippines and an infection control drill) directed by a chairperson.

After the information sessions, scenarios were then introduced to the participants, who were seated at designated tables to enable easy communication between participants within different sectors (disaster management and national planning, health (national and divisional), animal health and agriculture, biosecurity and border control (including port of entry), security (law and order), workforce, volunteer organizations, media, economy, education and institutions, essential services and communications).

The scenarios raised a range of issues relevant to avian and pandemic influenza preparedness and response, including early warning, communications issues, rapid response, border control issues (particularly quarantine), surge capacity and pandemic impact control and management.

Facilitators were identified to moderate sessions, with each scenario being communicated to participants via large screen projection, the session moderator and hard copy.

Subsequent discussions were then held in small (sector-focused) work groups where participants were asked to consider the scenarios in the context of what FINIPP (or relevant subplans) proposed as a response, in order to identify gaps and to suggest possible additions or amendments to improve the existing plans and subplans.

Participants in law, order and security moderated group consider their contribution to an emergency response.

7. Evaluation

A narrative overview of key findings and observations, based on a collation of moderators' comments, reporters' notes and notes received from working groups, was collated and provided to participants via an exercise report. It is expected that FINIT will use the report as a basis for ongoing activities.

8. Lessons learnt

The lessons learnt from this exercise included:

- Leadership arrangements for emergency preparedness (for an influenza pandemic) in non-health sectors need to be clarified through consultation with the National Disaster Management Office (NDMO) in the first instance, and relevant chief executive officers and ministers as required. It may be useful for a third party (such as SPC/WHO) to facilitate discussion between relevant agencies.
- Individual sectors need to move forward subplan development and document emergency response subplans for an influenza pandemic as a high priority. This includes the development of an avian influenza emergency response subplan by the Ministry of Agriculture, Fisheries and Forestry.
- The availability of locally relevant information, education and communication materials to enhance community awareness about avian influenza and pandemic influenza should be reviewed. Awareness-raising materials should include information on disease reporting, disease risks and safe handling and disposal practices for sick or dead birds, as well as information on human symptoms, disease transmission, prevention and infection control measures.
- The adequacy of rapid response triggers in FINIPP should be reviewed, particularly the sensitivity of detection of suspicious clusters of significant human disease that could represent the initial occurrence of a pandemic influenza virus in Fiji.
- The diagnosis of avian influenza and pandemic influenza in humans should be included at relevant

Participants are arranged in groups to maximize opportunity to cross-reference and communicate.

forums for medical practitioners as a means of improving practitioner awareness.

- The adequacy of legislative arrangements to support extraordinary public health measures in a public health emergency should be reviewed.
- The Ministry of Agriculture, Fisheries and Forestry should review its information management systems and arrangements for the management of disease reporting.
- Emergency preparedness planning for animal disease incursions will need to include compensation arrangements to encourage cooperation of producers and livestock owners (commercial, semi-commercial and backyard) when destocking is the preferred management method to achieve disease eradication.
- The adequacy of legislative arrangements to support disease reporting and emergency measures in an animal health emergency should be reviewed.
- A stockpile of suitable PPE should be maintained at ports of entry for the use of border agency personnel, as circumstances require.
- Border personnel should be trained in the use of PPE and must receive training in infection control measures to minimize the risk of disease transmission when they are required to assist in the management of sick passengers.
- The support roles of relevant agencies during a pandemic (particularly the NDMO) should be confirmed.
- FINIPP is an effective, overarching, health sector-focused emergency preparedness plan for an influenza pandemic. In reviewing the plan, consideration should be given to how the plan could be made more user-friendly.
- Testing of divisional emergency operational sub-plans that link to FINIPP should be planned and conducted to enhance health sector operational preparedness for an influenza pandemic.