National Pandemic Summit Exercise

Supported by the Conference of Chief Justices’ and Conference of State Court Administrators’ Pandemic and Emergency Response Task Force

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Made Possible by:

University of Nebraska Medical Center
Nebraska Medicine

State Justice Institute

National Center for State Courts
Facilitated by:

The Center for PREPAREDNESS Education

A Joint Endeavor Between Creighton University School of Medicine and University of Nebraska Medical Center
Exercise Structure:

Isolation and Quarantine - Description and Differences
  Dr. Ted Cieslak

Rules of Exercise Play
  Tonya Ngotel

Scenario - What if this happens in your State

Table Discussion

Table Report Out
Ted Cieslak, MD
Isolation and Quarantine
Isolation is used to separate ill persons who have a communicable disease from those who are healthy. Isolation restricts the movement of ill persons to help stop the spread of certain diseases.

Quarantine is used to separate and restrict the movement of well persons who may have been exposed to a communicable disease to see if they become ill. These people may have been exposed to a disease and do not know it, or they may have the disease but do not show symptoms.
WHO Definitions

“Isolation” means separation of ill or contaminated persons or affected baggage, containers, conveyances, goods or postal parcels from others in such a manner as to prevent the spread of infection or contamination.

“Quarantine” means the restriction of activities and/or separation from others of suspect persons who are not ill or of suspect baggage, containers, conveyances or goods in such a manner as to prevent the possible spread of infection or contamination.
Restriction of Movement & Directed Health Measures

Isolation +
Quarantine +
Travel Restrictions +
Enforced Social Distancing +
Other Directed ICP Measures
  mandated use of PPE
  directed decontamination
Federal Isolation & Quarantine Law

42 USC § 264
- Gives SG & Sec’y, DHHS authority to:
  - Make & enforce regulations necessary to prevent…transmission of communicable diseases…
    - from International sources
    - from State-to-State

EO 13295, 13375, 13674
- Stipulate diseases subject to Federal quarantine
- States may add to list

Title 42 CFR Parts 70 & 71
- Provides details and mechanics
# Diseases Subject to Federal Quarantine

**EO 13295, 13375 and 13674**

<table>
<thead>
<tr>
<th>BCU</th>
<th>Maybe BCU</th>
<th>No BCU</th>
</tr>
</thead>
<tbody>
<tr>
<td>VHFs</td>
<td>TB</td>
<td>Cholera</td>
</tr>
<tr>
<td>SARS</td>
<td>Plague</td>
<td>Diphtheria</td>
</tr>
<tr>
<td>MERS</td>
<td>Influenza</td>
<td>Yellow Fever</td>
</tr>
<tr>
<td>Smallpox</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Measles quarantine orders soar to more than 900 at L.A. universities

Los Angeles County health officials told more than 900 college students and staff members who may have been exposed to measles to stay home this week in one of the largest quarantine orders in state history.

The declaration has raised questions about how exactly the orders will be implemented at UCLA and Cal State Los Angeles, where students have been diagnosed with the disease.
How contagious is Ebola?
How the Ebola virus compares with other contagious viruses. The reproduction rate or $R_0$, calculates the number of people likely to be infected by one person who has a disease.

<table>
<thead>
<tr>
<th>REPRODUCTION RATE ($R_0$)</th>
<th>Initial infected patient</th>
<th>Person he or she has infected</th>
</tr>
</thead>
<tbody>
<tr>
<td>$R_0$</td>
<td>1 to 4 people</td>
<td>2 to 4</td>
</tr>
<tr>
<td></td>
<td>4 to 7</td>
<td>5 to 7</td>
</tr>
<tr>
<td></td>
<td>5 to 7</td>
<td>6 to 7</td>
</tr>
<tr>
<td></td>
<td>12 to 18</td>
<td>12 to 17</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>DISEASE</th>
<th>HOW IT SPREADS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ebola</td>
<td>Bodily fluids</td>
</tr>
<tr>
<td>SARS</td>
<td>Airborne droplets</td>
</tr>
<tr>
<td>Mumps</td>
<td>Airborne droplets</td>
</tr>
<tr>
<td>Polio</td>
<td>Fecal-oral route</td>
</tr>
<tr>
<td>Smallpox</td>
<td>Airborne droplets</td>
</tr>
<tr>
<td>Rubella</td>
<td>Airborne droplets</td>
</tr>
<tr>
<td>Measles</td>
<td>Airborne</td>
</tr>
<tr>
<td>Pertussis</td>
<td>Airborne</td>
</tr>
<tr>
<td>(Whooping cough)</td>
<td>Airborne droplets</td>
</tr>
</tbody>
</table>

Sources: Michigan Center for Public Health; WHO; Transmission Dynamics and Control of Severe Acute Respiratory Syndrome, Nature; Understanding the Dynamics of Ebola Epidemics, National Institute of Health
Diseases that are Contagious before they are Symptomatic

<table>
<thead>
<tr>
<th>Disease</th>
<th>Contagious Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>Influenza</td>
<td>1 day prior to symptom onset</td>
</tr>
<tr>
<td>Yellow Fever</td>
<td>1 day prior to symptom onset</td>
</tr>
<tr>
<td>Varicella</td>
<td>2 days prior to symptom onset</td>
</tr>
<tr>
<td>Measles</td>
<td>4 days prior to rash</td>
</tr>
</tbody>
</table>
Diseases Subject to Quarantine: The Role of Countermeasures
Candidates for Quarantine

Unvaccinated
Under-vaccinated
Vaccine Refusers
Non-compliant
Superspreaders?
Carriers?
Ethics: the Thirty-Year Quarantine
The Gray Zone Between Quarantine and Isolation (Recovery Care)

Leprosaria
TB Sanitarium
Isolation

Airborne
  TB, Varicella, Measles

Droplet
  Strep, Influenza, Mumps, Adenovirus, Meningococcus, many others

Contact
  MRSA, VRE, Clostridium difficile, Shigella, Hepatitis A, Lice, Scabies, many others
The Full Spectrum of High-Level Containment Care

- Exposed but asymptomatic persons may require quarantine
- With some diseases, recovering patients may remain infectious and require ongoing isolation
- Ill persons may require high-level containment care in a BCU
- Quarantined persons may have routine primary care needs
- Quarantined persons may develop illness unrelated to their exposure
- Quarantined persons may become PUIs
- Ill persons may be PUIs without having been in quarantine
Isolation: The Pathogens of Concern

Infectious, Communicable, Highly Hazardous

Pathogens that might warrant care in a BCU or HLCC Unit

Synonyms—

Special Pathogens
Highly Infectious Diseases
High Consequence Infectious Diseases
Highly Hazardous Communicable Diseases
Pathogens of Concern

Infectious, Communicable, Highly Hazardous
Pathogens of Concern: The Role of Countermeasures
Pathogens of Concern:

VHF Viruses capable of PTP Transmission
(Ebola, Marburg, Lassa, others)

Airborne Agents Causing Severe Respiratory Syndromes
(SARS, MERS, Flu)

Certain Orthopoxviruses (SPOX & MPOX)

A Few Miscellaneous Pathogens (Nipah, Hendra, Plague,
XDR-TB)

Pathogens Raising Political or Assuredness Concerns

“Andromeda” or “Disease X”
Outbreaks of Diseases Subject to Isolation or Quarantine 2017-2019
All ‘Special Pathogens’ have been successfully managed in conventional clinical settings and all ‘Quarantine-able Diseases’ have been handled without need for quarantine.

Marburg Fever Confirmed In Colorado Patient

by Sam Savage

Authorities at the U.S. Centers for Disease Control and Prevention (CDC) reported that the country's first case of Marburg hemorrhagic fever has been confirmed in a patient in Colorado.

The patient contracted the illness during a trip to Uganda, and has since recovered from the rare disease, which is caused by a virus indigenous to Africa. The virus is spread through contact with infected animals or the bodily fluids of infected people.
Other Communicable Diseases of Public Health Concern

Malaria  Polio
Typhoid   Dengue
Varicella Zoonotic poxviruses
Rabies   Pertussis
Measles  Mumps
Meningococcal disease Rubella
Legionellosis Infectious diarrhea

*Based on their ability to spread and cause significant illness or death*
How to tell when a disease is serious: There is a heavy metal band named after it
Rules of Exercise Play

Introduction to exercise, tabletop roles, etc
Tabletop Process

Guiding Principles:
This is a learning exercise – not a test.
There are no “hidden agendas” or trick questions.
Don’t overthink the scenario
Open and interactive discussion

Gather Information (Scenario)  Discuss Relative to Your Home State  Provide Impact Analysis  Report
Things to Keep In Mind

Public Health and Health Care Experts at each table

Legal experts at each table

My State refers to the State, Territory or Tribe in which you reside
Exercise Objectives:

By the end of this exercise participants will be able to:

• understand isolation and quarantine law.

• understand the role of federal, state and local public health during a quarantine event.

• recognize the difference between voluntary and involuntary quarantine.

• understand the interplay between local, state and federal governance and quarantine jurisdiction.
Scenario

Part I
Jean Francois Visitor
Deputy Minister of Agriculture for the Democratic Republic of Congo (DRC).

Educated in the US, Mr. Visitor is traveling back to My State for a week to meet with experts and officials on ethanol production. Traveling with wife (Gloria) and two children (Alain age 8 and Denisa, Age 6)

Mr. Visitor begins to feel ill shortly after take off from the DRC but determines that he must continue due to the importance of the meeting. As we arrives in Amsterdam he’s got a fever of 100.8 and has become quite ill even vomiting several times. He arrives at the International Airport in MyRegion where the pilot has requested help through the flight control and the regional quarantine station.

The airplane is directed to park on the tarmac and an officer from the quarantine station boards the plan and escorts Mr. Visitor off to a waiting ambulance. Mr. Visitor is transported to MyRegional Medical Center. His family has also been removed and transported via ambulance to be evaluated based on their high-risk.
Questions to Consider

Does Mr. Visitor’s status as a non-U.S. citizen have any bearing on whether he can be isolated?

Who issues the follow-on Mandatory Quarantine order?

- The local health department for the County that holds the International Airport?
- The health department for the State that holds the International Airport?
- The CDC?
Questions to Consider

Which legal authority is in effect at this time?
  Federal regulations?
  State regulations?
  Local or County regulations?

Is there potential for any legal action from Mr. Visitor at this stage?
Table Report Out
Scenario

Part II
The Family:

Back onboard the aircraft, it was identified Mr. Visitor had only vomited in the lavatory; however he had moved throughout the aircraft several times. As a result, all passengers’ contact information was collected and their temperatures were taken prior to disembarking the aircraft.

After seeing Mr. Visitor was safe at the hospital, Mrs. Visitor books a commercial flight to their original destination in MyState the next day. Coincidentally, the day after the family left, the MyRegion, Medical Center requests assistance from the University of Nebraska, Medical Center and the State of Nebraska to transfer Mr. Visitor via a special Phoenix Air jet to the Nebraska Biocontainment Unit in Omaha. The State of Nebraska also appraises Mrs. Visitor of the need for her and her children to be quarantined for 21 days at the Federal Quarantine Facility in that same city. They attempt to get her to sign a ‘Voluntary Quarantine Agreement’.

Mrs. Visitor, who is not presently ill, declines.
Questions to Consider

What are Mrs. Visitor’s legal options?

What are her rights should she be issued the mandatory order?
   Who enforces the order?

Where would she file a Habeus petition?
   District Court in Minnesota/Nebraska/State Specific? Federal Court?
Questions to Consider

What other relief might she seek?

Would anything be different if she were a dual citizen (say she had been a UNL student who met and married Mr. Cornhusker while he was in graduate school)?

Does the involvement of the children change anything?
Questions
Answers
Takeaways