Northwest PUBLIC HEALTH

Policy Watch: Northwest States Prepare for Bioterrorism

Smallpox Pre-Event Vaccination Plans

Note: As a result of the deaths of several vaccinated people in March, the states are reviewing their smallpox vaccination plans. The information below was current as of March 31, 2003.

Alaska's Pre-Event Smallpox Response Plan was developed in collaboration with the Alaska State Hospital and Nursing Home Association, the Alaska Native Tribal Health Consortium, and representatives of the state's military facilities. The plan involved vaccinating public health personnel from around the state and a team of health care providers at one large referral hospital located in Anchorage. Plans to expand to additional health care facilities currently are being evaluated.

Four vaccination clinics, held between February 20 and March 12, immunized 92 persons. A total of about 100 health care workers will be vaccinated. Positions immunized include the public health response team (epidemiology, nursing, laboratory staff, and staff of the Anchorage Department of Health and Social Services), the health care response team of the Alaska Regional Hospital, and staffs of the CDC Arctic Investigations Program and Alaska Veterans Affairs Health Care System.

Alaska is using bioterrorism grant funds to support costs associated with the clinics. The program is managed in the Department of Health and Social Services, Division of Public Health, Section of Epidemiology.

The Idaho Phase I smallpox vaccination program is being coordinated by Idaho Department of Health and Welfare and implemented by each of Idaho's seven district health departments. Ten smallpox response teams were created: seven district health department teams, one state team, and two hospital teams. Each team included physicians, nurses, laboratory workers, epidemiologists, public health personnel, and support staff. Smallpox vaccinations in Idaho began on February 18, 2003. As of March 14, 2003, 149 volunteers had been vaccinated.

Vaccination of state, district, and hospital smallpox response teams continues at six clinic sites across Idaho. Ongoing training and education of vaccination clinic staff members and potential vaccinees by district health departments also continues. Because the vaccination of Idaho's smallpox response teams is not yet complete, the full cost of implementation is not known.

The Montana Department of Public Health and Human Services (DPHHS) is working with CDC, local health departments, and other groups in implementing the state's smallpox pre-event vaccination plan. The Montana DPHHS Immunization Program manages this plan.

A key component of Montana's plan is the development of local public health and hospital response teams. During February 2003, the Montana DPHHS conducted smallpox vaccination training workshops in five sites throughout the state. More than 340 participants attended the trainings.

Vaccination clinics started in March 2003 in 10 sites in Montana. Members of the local public health and hospital response teams without contraindications are being vaccinated. The Montana DPHHS estimates

580 members of the response teams will be vaccinated.

The Montana DPHHS will provide additional education and information packets to physicians and other clinicians on evaluation of vaccination reactions and adverse events.

An estimated 800 Portland Metro-area public health and health care workers are scheduled for vaccinations at the Multnomah County vaccination clinic starting March 12, 2003. Vaccinations at two clinics in southern and eastern Oregon will follow, probably in April.

State and local public agencies manage the program. No specific budget has been developed, but the cost will be paid for with bioterrorism preparedness cooperative agreement funds.

Washington Department of Health (WDOH) began implementation of the state's smallpox vaccination plan in February with two pilot clinics (at Camp Murray in Pierce County and in Moses Lake).

Seventy-nine public health volunteers were vaccinated at the pilot clinics. They will train and immunize others and may participate in regional clinics or smallpox response teams, if needed.

Following the state clinics, regional clinics have been held to vaccinate additional local public health staff and volunteers from hospitals who will make up hospital response teams. As of March 28, 2003, 17 smallpox vaccination clinics vaccinated 350 people, with no adverse events reported.

The estimated cost of WDOH's smallpox planning efforts is just over \$1 million, which includes writing mass vaccination and stage one plans; purchasing all clinic supplies; receiving, managing, and distributing the vaccine; training; pilot clinic operation; and developing laboratory analysis methodology.

After formulating the state smallpox plan, the state health department asked local public health offices to submit a registry of health workers to be vaccinated. The workers had to be part of a public health response team or a member of a hospital response team. Exceptions were later granted to counties with a limited supply of responders so they could form an effective response team. (The exceptions mostly included ambulance and law enforcement personnel.)

Wyoming began vaccinating health workers on January 31 with a clinic in Cheyenne. State teams then fanned out across the state, bringing the vaccine with them to the smallpox clinics. To date, the cost of the program is an estimated \$281,000, but costs are expected to escalate if Wyoming moves to Phase II.

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