INTRODUCTION

The regional and local pandemic influenza preparedness is a matter of great importance, as it enables to minimize the social impact of a pandemic, and to improve the early detection and diagnosis in order to contain the number of cases as much as possible. Preparedness requires training of all healthcare workers involved in this process. The simulation exercise that is proposed here was developed for WHO phase three pandemic influenza alert.

OBJECTIVES

Training the communication between posts of command and leadership;
Testing the skills of the different stakeholders to answer the incidents produced;
Exercising the planning and the response to an emergency;
Exercising the terminology, the methodology and the procedures of operational planning.

METODOLOGY

It was used a simulation exercise that occurred under the responsibility of the Public Health Department of Northern Regional Health Administration with the collaboration of the Transmissions Command of Defence Ministry that designed the methodology of the exercise.

The exercise was planned in four phases:
1ª - Academic phase – March 2007
2ª - Planning process phase with the elaboration of a Main Incidents List (MIL) and a Main Events List (MEL) - April and May 2007
3ª - Execution phase – 14th and 18th June 2007
4ª - Evaluation phase – 10th July 2007

A scenario was designed to be used as a support to the exercise:

“A native Asiatic family, a couple and two children, that were residents in Portugal, stayed three months in Indonesia with their family in a rural area where there was poultry flocks. The returning travel to Porto was in the X Airline. They left Jakarta at 8:10 pm, and after a three hours scale in Frankfurt Airport, they arrived at Porto (Francisco Sá Carneiro Airport), the day after at 11:10 am. During the flight Frankfurt – Porto the husband, 35 years old, presented breath difficulties, cough and fever; and a meal was served after the appearance of these symptoms. Three hundred passengers travelled in the flight from Jakarta to Frankfurt; 25 of those passengers travel to Porto; 98 new passengers travelled from Frankfurt to Porto in the same plane.”

CONCLUSIONS

We observed:
• reasonable coordination of the entities involved.
• difficulties in obtaining the identification and contacts of passengers of the plane.
• need of the definition of the main circuits of passengers inside the Airport.
• need of more training of some healthcare workers in the use of Individual Protection Equipment.
• the answers obtained showed insufficient training in the procedures.

We proposed:
To plan an annual simulation exercise on pandemic influenza.

EXERCICE

Two Working Groups were organized:
1 – Core Plan Team (CPT) – that was responsible for planning and analysis of the exercise.
2 – Working Group of Control and Arbitration – that observed the development of exercise, using an evaluation form for each expected procedure of the different health care workers and institutions.

The exercise had two components:
1 – One component aimed to test the commands and others leaders, and lasted one morning;
2 – One component aimed to train in the field all sectors involved: Field Training Exercise/Live exercise (FTXL/LIVEX) - an exercise that simulated the intervention of the different institutions involved: National Airports Administration, General Directorate of Health, National Institute of Medical Emergencies, Reference Hospital in Northern Region, Public Health Department of Northern Regional Health Administration, Borders Health Authority in Francisco Sá Carneiro Airport, Health Authorities of the Districts and Municipalities. All the North Region Districts were involved (Braga, Bragança, Porto, Viana do Castelo e Vila Real). In each district two municipalities were chosen.