



*Planning Resolution between  
Secretary of Health and Human Services*

*Michael O. Leavitt and Governor Theodore R. Kulongoski of  
the State of Oregon*

**PANDEMIC  
PLANNING**  
GET INFORMED / BE PREPARED



**Whereas:** Influenza pandemics have occurred three times in the last century, and history and science suggest that the country and the world could face one or more pandemics in this century; and

**Whereas:** A pandemic can cause severe illness, death and disruption throughout the country and the world, and outbreaks can occur in many different locations at the same time; and

**Whereas:** Preparation for an influenza pandemic requires coordinated action at all levels of government – federal, state, local, tribal – and all sectors of society, including businesses, schools, community organizations, families and individuals; and

**Whereas:** The federal government has committed to taking a leadership role in creating a prepared Nation by monitoring international and domestic outbreaks, providing funding and technical assistance to foster local and state preparedness, stockpiling and distributing countermeasures, developing new treatments, and coordinating the national response; and

**Whereas:** The Secretary of the United States Department of Health and Human Services (HHS) has committed to holding pandemic planning summits in all 50 states, assisting states to improve their level of preparedness; and

**Whereas:** President George W. Bush has asked Congress for emergency spending authority to prepare the United States against the possibility of a pandemic and Congress has provided over \$3 billion for that purpose in the Defense Appropriations Act for 2006, including funding for state and local planning purposes; and

**Whereas:** States and local communities are responsible under their own authorities for responding to an outbreak within their jurisdictions and having comprehensive pandemic preparedness plans and measures in place to protect their citizens; and

**Whereas:** HHS may provide additional resources for State and local influenza planning and preparedness activities, and require specific preparedness goals from States and localities as a condition of financial assistance, consistent with its authorities and availability of funding; and

**Whereas:** Preparedness plans must be continuously exercised and updated to make sure they work and to achieve a stronger level of preparedness; and

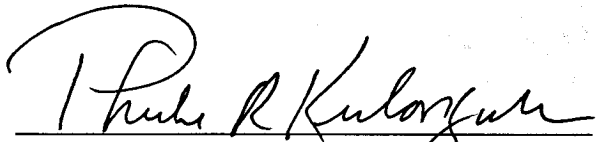
**Whereas:** Pandemic preparedness will help communities deal with any type of medical emergency and will have lasting benefits for the health of our Nation.

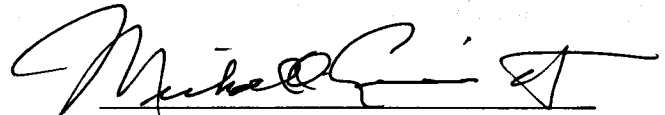
**Be It Resolved by the Governor of the State of Oregon**, in recognition of the shared common goals and our shared and independent responsibilities, HHS and Oregon have agreed to the following:

1. HHS will continue to provide substantial guidance and technical assistance to Oregon as it prepares to respond to a possible influenza pandemic. Among other things, HHS will coordinate pandemic response activities with state, local and tribal public health agencies; support state pandemic planning efforts; communicate and disseminate timely influenza pandemic information and technical guidance to state and local public health departments; and provide direct support and technical guidance for epidemiological investigations and diagnostic services.
2. Consistent with its statutory authorities, direction from Congress, and Departmental regulations and policy, and subject to available funding, HHS will provide Oregon with an initial amount of financial assistance through funds appropriated as part of the FY 2006 Defense Appropriations Act for the purposes of pandemic planning. Terms and conditions of such assistance will state that additional amounts will depend upon achievement of specific preparedness goals as agreed to by HHS and Oregon, including a self-assessment of readiness on the part of Oregon.
3. Recognizing that each state is at a different level of preparedness on the various components of pandemic influenza preparedness, and that each state faces different challenges in preserving the health of its communities, HHS agrees to provide flexibility in the use of the planning funds to allow Oregon to address those issues of greatest benefit to the people of Oregon.
4. Augmenting state and local planning with a State and Local Pandemic Preparedness Summit.
5. Update state pandemic influenza plans based on guidance given in the HHS Pandemic Influenza Plan and the National Strategy for Pandemic Influenza both released in November 2005.
6. Within six months, HHS will review Oregon's plans for use, storage and distribution of antivirals and notify Oregon of its portion of the federal stockpile of pandemic influenza antiviral drugs, how they will be requested and delivered, as Oregon does not intend to purchase additional antivirals on the Federal/State purchase order.
7. Oregon will assure that the operational plan for pandemic influenza response is an integral element of the overall state and local emergency response plan that will coordinate effectively with Emergency Support Function 8, Health and Medical Services, of the National Response Plan and the National Incident Management System.
8. Oregon's established public health and health preparedness planning groups will oversee development and execution of Oregon's pandemic preparedness planning and ensure that all relevant stakeholders are included in the process, including governmental, public health, healthcare, emergency response, law enforcement, agriculture, education, business, communication, community, faith-based and public representatives.
9. Oregon will exercise the state's preparedness plan within eight months of the date of the state planning summit between the HHS Secretary and the Governor of Oregon and participating in a nationwide pandemic planning exercise within twelve months of that date. These planning and response exercises should enable public health and law enforcement officials to establish procedures and locations for quarantine, surge capacity, diagnostics, and communication.

10. Oregon will provide CDC a self-assessment of readiness to receive a portion of funds referenced in 2 at the time of application for those funds.

Dated this 30th day of March, 2006.

  
Governor Theodore R. Kulongoski, Oregon

  
Secretary Michael O. Leavitt