



DEPARTMENT OF HEALTH & HUMAN SERVICES

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Ms. Thuan Nguyen
Chief
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Department of Social Services
744 P Street
Sacramento, CA 95814

AUG 23 2006

Dear Ms Nguyen:

I am pleased to inform you that we have approved your amendment to the State Plan for Emergency Operational Planning for Pandemic Influenza in response to ORR State Letter # 06-10, dated March 17, 2006. We find the amendment acceptable under the current ORR regulations at 45 CFR Part 400.

This amendment approval authorizes California to conduct preparations for the possibility of a pandemic influenza or any other emergency operation. Appropriate preparedness activities include collaborating with the State's governmental emergency planning entity, working with the refugee service network and refugee communities to ensure their inclusion in preparedness activities, and creating and testing the Continuity of Operations Plan of the State refugee program for emergency operations.

With the approved amendment, we ask that you include in your Quarterly Performance Report (QPR) ongoing emergency planning and preparedness activities and developments in the state refugee program. Please identify this report entry with an appropriate section subtitle in the QPR - Schedule A narrative.

We appreciate the significant amount of work that you and your staff have done to help refugees resettle successfully in California. We look forward to continuing our partnership with the California refugee program, particularly in effective program operations during emergencies.

If you have further questions, please contact Pam Green-Smith at (202) 401-4531.

Sincerely,

A handwritten signature in black ink, reading "Martha E. Newton". The signature is written in a cursive, flowing style.

Martha E. Newton
Director
Office of Refugee Resettlement

**THE CALIFORNIA DEPARTMENT OF
SOCIAL SERVICES**

REFUGEE PROGRAMS BUREAU

STATE PLAN AMENDMENT

FOR

PANDEMIC INFLUENZA PLANNING

TABLE OF CONTENTS

| | |
|--|-----------|
| Background..... | 3 |
| Authorities for Pandemic Influenza Planning..... | 3 |
| Goals and Objectives of California’s Pandemic Influenza Preparedness and Response Plan..... | 4 |
| Role of the County Refugee Coordinators..... | 4 |
| Role of the County Refugee Health Coordinators..... | 5 |
| Active Role of the Refugee Health Section..... | 5 |
| Role of the Refugee Program in Demographic Profiling..... | 5 |
| Avenues for Refugees to Participate in Planning..... | 6 |
| Dissemination Activities..... | 6 |
| Continuity of Government and Continuity of Operations..... | 7 |
| State Plan Updates..... | 8 |
| Submission of the State Plan Amendment..... | 9 |
| Acronyms..... | 10 |
| References..... | 11 |
| Attachment 1..... | 12 |

REFUGEE EMERGENCY OPERATIONAL PLAN FOR PANDEMIC INFLUENZA

Background

On March 17, 2006, the federal Office of Refugee Resettlement (ORR) issued ORR State Letter #06-10, which requires a State Plan amendment to address pandemic influenza planning. The purpose of this State Plan amendment is to promote the continuity of the Refugee Program in the event of a pandemic influenza outbreak.

Authorities for Pandemic Influenza Planning

In California, the Governor's Office of Emergency Services (OES) has the overall responsibility to plan and to respond to emergencies and has the authority to delegate activities in the event of a State emergency. The OES has organized a Pandemic Influenza Task Force, which is responsible for coordinating with a number of State agencies to prepare for a pandemic influenza outbreak. One of those agencies is the California Department of Health Services (CDHS), which is the lead agency responsible for public health concerns in California.

The CDHS has prepared a draft Pandemic Influenza Preparedness and Response Plan (PIPRP) to address a pandemic flu. The PIPRP focuses on detection, response and recovery and is an annex to CDHS' overall Public Health Emergency Response Plan and Procedures and builds on the CDHS' general emergency response structure and the State emergency response plan. The PIPRP is designed to follow the management and collaborative structure of the State's Standardized Emergency Management System and is also in compliance with the National Incident Management System as required by federal regulations.

The PIPRP describes the State's public health and medical response and is consistent with the Pandemic Influenza Plan that the United States Department of Health and Human Services released in November 2005. CDHS will continue to work on the draft PIPRP to develop operational detail for many of the actions, working with other governmental agencies and private entities to delineate their roles and responses. The CDHS will finalize the PIPRP in 2006.

The CDHS Refugee Health Section (RHS) will work in collaboration with the CDHS, Office of Emergency Preparedness (EPO) and the CDHS' Division of Communicable Disease Control's (DCDC) Pandemic Influenza Work Group (PIWG) to promote refugee needs related to culturally appropriate education, outreach and training, effective communication channels for information dissemination, interpreter services/linguistic needs, and other challenges in responding to pandemic influenza and other emergency situations.

Goals and Objectives of California's PIPRP

The main objective of the PIPRP is to reduce the morbidity, mortality, social and economic disruption caused by pandemic influenza. Other objectives include:

- Ensure optimal coordination, decision-making, and communication between federal, state, local and community levels;
- Track novel influenza strains;
- Ensure that a vaccine program is in place and monitor of vaccine effectiveness and safety in the event of a pandemic outbreak;
- Ensure that antiviral drug therapy and prophylaxis is available and monitor appropriate use of these agents to avoid antiviral resistance;
- Implement measures to decrease the spread of disease; and
- Ensure that optimal medical care and essential community services are maintained.

The California Department of Social Services (CDSS) will send an All County Information Notice to County Refugee Coordinators (CRCs), County Refugee Health Coordinators (CRHCs), Refugee Forums, members of the State Advisory Council (SAC) on Refugee Assistance and Services, Mutual Assistance Associations (MAAs), Voluntary Agencies (VOLAGs), Community-Based Organizations (CBOs) and other refugee community representatives informing them of pandemic influenza planning activities and transmitting a copy of the draft PIPRP.

Role of the CRCs

The CRCs are responsible for implementing strategies, funding and operating procedures for refugee services and programs. The CRCs have knowledge and experience in naturalization, immigration and refugee program laws, policies and procedures. The CRCs will assist the State by:

- Working with various sources such as the California Work Opportunity and Responsibility to Kids (CalWORKs) program, school districts, health care, law enforcement, advisory councils, MAAs, local employers, VOLAGs, and experts in education and training to disseminate information on pandemic influenza;
- Providing current emergency contact information of persons who will be actively involved in pandemic influenza planning to the CDSS; and
- Coordinating with the County OES to streamline pandemic influenza planning activities.

Role of the CRHCs

The CRHCs will communicate the importance of including VOLAGs/MAAs in the preparedness process to address California's diverse refugee populations. The CRHCs will assist the State in:

- Reviewing pandemic influenza educational materials and/or the development and translation of information, including fact sheets that are accurate and culturally and linguistically appropriate;
- Coordinating with the County OES to streamline pandemic influenza planning activities;
- Modifying the California Refugee Health Assessment to include screening to identify newly arriving refugees who may be exhibiting flu-like symptoms; and
- Assisting the State in providing technical assistance and information to VOLAGs and MAAs in the development of Continuity of Operations Plans (COOP) to ensure the continuity of the provision of critical services to refugee communities in the event of a pandemic influenza.

Active Role of the RHS

The RHS will take the following actions:

- Develop and implement a Refugee Emergency Operational Plan for Pandemic Influenza in California, in collaboration with the CDSS;
- Network with CRHCs, CRCs, Refugee Forums, SAC members, MAAs, VOLAGs and CBOs to evaluate the PIPRP as related to educational materials and/or the development and translation of information, including fact sheets that are accurate and culturally and linguistically appropriate;
- Modify the California Refugee Health Assessment, in collaboration with CRHCs and PIWG, to include screening tools to identify newly arriving refugees who may be exhibiting flu-like symptoms. Pandemic flu prevention and education will be provided at the point of initial health screening; and
- Adhere to protocols and procedures, in coordination with CRHCs, pertaining to surveillance, containment, prevention and other protocols as delineated in the PIPRP.

Role of the Refugee Program in Demographic Profiling

In order to ensure that current and anticipated refugee populations are represented in the demographic profiling for pandemic planning, the CDSS Refugee Programs Bureau

(RPB) will coordinate with the CDSS representative on the OES Task Force on pandemic influenza planning regarding the languages and cultures of refugees. Information will be shared from the Worldwide Refugee Admissions Processing System, operated by the United States Department of State, which identifies newly arriving refugees and from the CDHS' Medi-CAL Eligibility Data System (MEDS) which contains information on refugees currently on aid.

The RHS captures comprehensive demographic data on arriving refugees via the Refugee Health Electronic Information System (RHEIS), an internet-based system. The RHS will conduct analysis of existing RHEIS and MEDS data to determine the State's representation of current and anticipated refugee populations. This data will be used to guide planning activities to ensure that they target the demographic representation of California's diverse refugee populations.

Avenues for Refugees to Participate in Planning

The RPB and the RHS will create avenues for refugee populations to participate in pandemic preparedness planning by raising awareness in the refugee community and by sharing information with CRCs, CRHCs, Refugee Forums, SAC members, MAAs, VOLAGs, and CBOs on any new developments in the pandemic flu planning process.

The RHS, in collaboration with RPB, will take the following actions:

- Implement trainings to inform and educate CRCs, CRHCs, Refugee Forums, SAC members, MAAs, VOLAGs and CBOs about pandemic influenza and to encourage participation in the preparedness planning process at the State and local levels;
- Work with refugee service providers to identify community leaders and to involve them in the preparedness planning activities;
- Ask CRHCs and CRCs to identify local emergency preparedness coordinators. The goal will be to foster a State, local community network to ensure that refugee populations have a voice in the preparedness process; and
- Compile and maintain a list of all local emergency preparedness entities and make this list available to the EPO, CRHCs, CRCs, Refugee Forums, SAC, MAAs, VOLAGs and CBOs.

Dissemination Activities

To ensure that refugees have access to and understand pandemic preparedness activities, including when a pandemic influenza is declared and emergency operations are in effect, the RHS will:

- Coordinate with the PIWG on the CDHS' draft PIPRP which identifies communication activities for target audiences, communication partners, the communication stakeholders, the communications team, the material resources to be utilized, media outreach, media management, providing public education, and the team management of parties involved;
- Work in close collaboration with the PIWG, the federal Centers for Disease Control and Prevention, local pandemic response planning groups, CRHCs, CRCs, Refugee Forums, SAC members, MAAs, VOLAGs and CBOs to identify effective communication channels to disseminate information to ensure that messages reach targeted refugee populations. The channels may include public service announcements via ethnic media sources such as TV and radio; neighborhood newspapers; churches; adult education centers; and civic organizations; and
- Promote culturally and linguistically appropriate outreach, education and awareness activities for refugee populations in collaboration with the EPO, which has received State funding for a pandemic influenza awareness campaign.

Continuity of Government and Continuity of Operations

The OES, through Administrative Orders with State agencies, requires that each agency establish a program for Continuity of Government (COG) and a COOP. The COG plan and the COOP provide protocols that help to ensure that agencies are prepared to continue to fulfill their essential roles and functions in the event of a disaster.

In February 2004, a consulting firm funded by the Department of Homeland Security prepared a CDSS Comprehensive Emergency Operations Plan, which included a COG plan and a COOP. Additionally, the CDSS' Welfare to Work Division, which includes the RPB, developed a simplified COG plan and COOP to maintain continuity of government and operations in the event of a disaster. (Refer to Attachment 1).

The CDSS will maintain a current list of CRCs, Refugee Forums, SAC members, MAAs, VOLAGs and CBOs, who will be contacted in the event of a disaster. The CDSS will request that these people/agencies disseminate information to their respective refugee communities and help maintain calm.

The CDHS/RHS will provide technical assistance and consultation to CRHCs, VOLAGs and MAAs in the development of and implementation of COOPs to ensure that critical services to refugee communities continue uninterrupted during a pandemic flu or other emergency.

State Plan Updates

Updates for pandemic influenza planning activities will be reported to ORR in the Quarterly Performance Reports (Form ORR-6).

SUBMISSION OF THE STATE PLAN AMENDMENT

Review and Signature of Governor or Designee

This plan amendment was reviewed and signed by the Governor's Designee, the California State Refugee Coordinator, California Department of Social Services.

Charr Lee Metsker
CHARR LEE METSKER
Deputy Director
Welfare to Work Division
California Department of Social Services

6-11-06
Date

ACRONYMNS

CBO – Community-Based Organization

CDHS – California Department of Health Services

CDSS – California Department of Social Services

COG – Continuity of Government

COOP – Continuity of Operations Plan

CRC – County Refugee Coordinator

DCDC – Division of Communicable Disease Control

EPO – Office of Emergency Preparedness

MAA – Mutual Assistance Association

MEDS – Medi-CAL Eligibility Data System

OES – Office of Emergency Services

ORR – Office of Refugee Resettlement

PIPRP – Pandemic Influenza Preparedness and Response Plan

PIWG – Pandemic Influenza Work Group

CRHC – County Refugee Health Coordinator

RHEIS – Refugee Health Electronic Information System

RHS – Refugee Health Section

RPB – Refugee Programs Bureau

SAC – State Advisory Council on Refugee Assistance and Services

VOLAG – Voluntary Agency

WTW – Welfare to Work

REFERENCES

1. Information by Government – U.S. Department of Health and Human Services
<http://www.pandemicflu.org>.
2. Pandemic Influenza Fact Sheet
<http://cdc.gov/flu/avian/gen-info/pandemics.htm>
3. California Department of Health Services
<http://www.dhs.ca.gov>
4. Governor's Office of Emergency Services
<http://www.oes.ca.gov>
5. World Health Organization
<http://www.who.org>

ATTACHMENT 1

**CALIFORNIA DEPARTMENT OF SOCIAL SERVICES
WELFARE TO WORK DIVISION**

**Continuity of Government/Continuity of Operations (COG/COOP) Plan
Disaster Management Procedures – Pandemic Flu Preparation**

| Task-Event/Activity | Responsible Team Member | Detail or Reference |
|-------------------------------------|--------------------------------|---|
| Maintain telephone trees | WTW Management Team | Each manager responsible for his/her staff |
| Conference Call Capability | WTW Management Team | Obtain conference call lines to be used as needed. |
| Dial-Up Access | WTW Branch Chiefs | If Dial-Up PC access becomes necessary, Branch Chiefs would work with managers to determine who needs access. ISD would then be requested to set up accounts. |
| Communication Plan for Stakeholders | WTW Deputy & Branch Chiefs | Inform stakeholders to refer to website for daily updates on issues. Branch Chiefs would review web content prior to posting. |
| Contact with Federal Government | WTW Deputy & Branch Chiefs | Keep federal officials informed of limitations by program and geographic area. |
| Request Waivers | WTW Management Team | If mandated program activities can not be performed, e.g. face-to-face interviews, then waivers would be requested from federal entities. |
| Seek Executive Order | WTW Deputy Director | If State mandates can not be carried out, e.g., fingerprint imaging, request an Executive Order to suspend mandate. |
| Alternative Operational Guidelines | WTW Management Team | Develop alternative program procedures for mandated activities that can not be performed. |