



RIKSREVISIONEN
The Swedish National Audit Office

RiR 2008:1 Summary

Pandemics - Managing Threats to Human Health

Summary

Starting points of the audit

Riksrevisionen (the Swedish National Audit Office, SNAO) has carried out an audit to examine whether the Government and the government agencies responsible ensure a good level of preparedness for managing an outbreak of pandemic influenza. The audit has been restricted to the management of a pandemic influenza equivalent to the Spanish Flu, the modern pandemic which had the highest morbidity and mortality rates.

In its audit the SNAO assesses whether the action taken by the central government has been sufficient to ensure that society has a good ability to manage an influenza pandemic. It also assesses whether the Government has created sufficient conditions for functioning cooperation among the actors concerned, such as county councils and municipalities, and whether the government agencies responsible provide relevant and sufficient support to the actors concerned.

The SNAO has not assessed the likelihood that an influenza pandemic will break out. However, both historical experience of regular pandemics and increased globalisation indicate that there is a risk of a pandemic outbreak in the relatively near future.

The SNAO's conclusions and recommendations

The SNAO notes that pandemic preparedness in Sweden has developed over the past few years. Many actors state that they are working on improving their ability to manage a pandemic. This should lead to improvements in preparedness over the next few years. However, the audit shows that several key actors have not undertaken sufficient preparations in the form of emergency planning, exercises and other actions to limit the consequences of an influenza pandemic. The SNAO's overall assessment is that the Government and the government agencies responsible have *not* ensured a good level of preparedness for managing an outbreak of pandemic influenza.

The SNAO recommends that the Government should ensure that the Swedish National Board of Health and Welfare (NBHW) has overall responsibility for coordinating pandemic preparedness throughout Swedish society.

Preparedness in society outside the health sector is inadequate

MUNICIPALITIES HAVE INADEQUATE ABILITY

In society outside the health sector, municipalities are central to operational emergency management. The SNAO's assessment is that the municipalities investigated in the audit have an inadequate ability to manage a pandemic. Few of them have established their own pandemic plans or addressed pandemics in their local risk and vulnerability assessments. There is very limited knowledge about the extent to which essential services in the respective municipalities are prepared to cope with a pandemic.

The Government should take a position on how additional actors in all sectors of society, including county councils and municipalities, should plan for a pandemic. In this context, the Government should consider giving all central-government actors concerned the task of planning for a pandemic.

ACTION BY THE GOVERNMENT IS NECESSARY TO ENSURE THE NATIONAL COORDINATION OF EMERGENCY INFORMATION

In the management of a pandemic influenza, county administrative boards (CABs) are to ensure links between the actors concerned in their respective counties (government agencies, municipalities, county councils, businesses and others) and the Government. The SNAO's assessment is that national-level coordination is weak in several areas for which CABs are responsible. There is a risk that CABs will analyse emergencies differently and that they will provide the general public with different information. One problem is the lack of an integrated national system for emergency information and situation reporting used by all actors concerned, including central-government agencies. These shortcomings are attributable to the Government.

The Government should ensure national coordination of regional situation assessments and the provision of emergency information to the general public during an influenza pandemic.

THE GOVERNMENT HAS NOT APPOINTED A BODY TO BEAR OVERALL RESPONSIBILITY FOR COORDINATION

A range of non-pharmaceutical interventions of infection control may have to be made in society during an influenza pandemic, such as the imposition of restrictions on travel to and from affected areas, the closure of nurseries and schools, the introduction of restrictions to public meetings and gatherings, and the isolation of sick or exposed people. The municipalities and CABs investigated in the audit have a limited level of preparedness for implementing such interventions.

The Government should ensure that the NBHW has overall responsibility for coordinating pandemic preparedness throughout Swedish society. This includes a duty to strengthen preparedness for implementing infection-control interventions in all sectors of society.

The Government should ensure that there is a central-government body with the authority to decide on infection-control interventions outside the area covered by healthcare legislation in the event of an outbreak of pandemic influenza.

THE ABILITY OF THE CABs AUDITED IS INADEQUATE

The SNAO's assessment is that the CABs included in the audit have an inadequate ability to manage a pandemic. They lack methods and procedures to prioritise resources in the event that an emergency strikes several counties at the same time. The CABs audited should take action to enhance their knowledge about the extent to which they may have to prioritise resources during an influenza pandemic.

The preparations undertaken by CABs to maintain their internal operations during an influenza pandemic are inadequate at present. The

CABs audited should take action to ensure that their own operations will be maintained during an influenza pandemic.

The CABs have a limited overview of pandemic planning and ability to manage an influenza pandemic in their respective counties. They also have a limited idea of the infection-control interventions that may have to be made in society and of the preparedness that various actors in their counties have to implement such interventions. In their capacity as the government agencies responsible for geographical regions, the CABs audited should support and coordinate pandemic preparedness within their respective geographical regions. Regional risk and vulnerability assessments should deal with the threat of a pandemic.

Preparedness in the health sector is inadequate

ACTION BY THE NBHW IS REQUIRED TO ENSURE THE PREPAREDNESS OF COUNTY COUNCILS AND MUNICIPALITIES

In the county councils investigated, the SNAO deems the ability to manage a pandemic influenza to be good, but with certain shortcomings. The ability of the municipalities investigated to manage a pandemic influenza in their health services is deemed to be inadequate. One important reason why the ability of the county councils is deemed to be better than that of the municipalities is that the county councils have much closer ties to the county medical officers of communicable-disease control (CMO-CDCs). This entails that county councils have access to a bank of knowledge and close contacts with the NBHW, which the municipalities lack at present.

All county councils included in the investigation have developed regional pandemic plans. These plans include estimates of the consequences that a pandemic may lead to for the county councils, based on the NBHW's key figures. However, only one of the county councils investigated has made plans to meet the need for hospital beds that can be expected to arise at the peak of the pandemic. The case study at the Karolinska University Hospital shows that this hospital has not planned for a pandemic.

The healthcare services carried out under the responsibility of municipalities will come under severe strain during a pandemic. Hospitals risk becoming overburdened at an early stage, with most infected people being cared for in their homes. Municipalities' preparedness for managing a pandemic in their health services is therefore very important.

The SNAO finds that most of the municipalities studied have not planned for the management of a pandemic. None of them has made estimates of how a pandemic will affect their own health services in terms of the need for beds, additional staff, etc.

Coordination between county councils' and municipalities' areas of responsibility during a pandemic is deemed to be inadequate. The NBHW therefore needs to clarify boundaries between areas of responsibility.

The SNAO recommends that the NBHW should take further action to ensure the coordination of preparedness between county councils and municipalities. The NBHW should issue regulations on the coordination of county councils' and municipalities' responsibilities during a pandemic.

The NBHW should carry out a fundamental evaluation of the county councils' and municipalities' pandemic planning for the health sector.

POINTS OF UNCLARITY AS REGARDS THE PRIORITISATION AND DISTRIBUTION OF ANTIVIRALS

There is a need for national coordination as regards how access to antiviral drugs should be prioritised among various groups of the population. The audit shows that the NBHW has not made it clear that responsibility for drafting, at the initial stage of a pandemic, specific plans defining the groups that will have priority access to antivirals rests with the NBHW and not with the CMO-CDCs. There is a great risk that different county councils will develop different guidelines. None of the CMO-CDCs interviewed has received information about how coordination among county councils will be ensured, if necessary.

The NBHW has failed to develop an operational plan describing how antivirals can quickly be transported to the right places during a pandemic and how their use can be monitored. It is still unclear to the CMO-CDCs how antivirals will be distributed.

The SNAO recommends that the NBHW should develop clearer guidelines on the prioritisation of access to antivirals at the initial stage of a pandemic, including as to who will decide priorities. There is a need to clarify who will be given prophylactic treatment with antivirals within essential services, including the healthcare system. The NBHW should also develop an operational plan describing how antivirals can quickly be transported to the right places during a pandemic and how their use can be monitored.

Inadequate ability may lead to serious consequences

Any assessment of the central government's actions to ensure the ability to manage an influenza pandemic should take into account the progression of the pandemic. Given how previous pandemics have developed, it is probable that a future pandemic will arise outside Sweden and that it will take a few months to reach Sweden. This will give government agencies some time to prepare. However, the SNAO considers the shortcomings observed during the audit to be so numerous and, in some cases, so serious that there may not be time to put them right before the pandemic reaches Sweden. The shortcomings identified should be put right during the present interpandemic period, not once a pandemic has broken out.

The SNAO considers that, as a result of the shortcomings identified in the audit, an influenza pandemic may lead to more serious consequences than would be necessary. As regards the health sector, the insufficient level of preparedness may lead to county councils having greater difficulty in managing their operations. Lack of clarity as regards the allocation and prioritisation of antivirals and vaccine may give rise to delays, increased concern and rumours. There is also a risk that priorities will not be the same in all county councils.

Increased workplace absence as a result of illness may cause serious disruptions to essential services. For example, there may be a crisis in the healthcare system. Food shops may have to close because of a lack of staff

and goods. Fuel and heating may become scarce, and both the fire-and-rescue service and the police may find it difficult to perform their duties.