

Confronting the Ethics of Pandemic Influenza Planning: Communiqué from the 2008 Summit of the States

Indianapolis, Indiana
July 14-15, 2008

Background

Like many public health emergencies, an outbreak of pandemic influenza will strain the ability of governments, communities, families, health care professionals and institutions to provide for the needs of people. Ethical issues will arise because critical decisions will inevitably challenge strongly held beliefs about personal autonomy, civil liberties and limitations on care. These ethical issues will be magnified because, in contrast with more localized emergencies (even devastating catastrophes like earthquakes or hurricanes), an outbreak of pandemic influenza will be nearly simultaneous across the entire country. Pandemic influenza will result in a prolonged scenario that does not lend itself to outside support or resources, placing an additional burden on local communities to be self-reliant.

Public health officials across the United States and US-affiliated territories are already making comprehensive plans to effectively respond to an occurrence of pandemic influenza, act quickly to limit its spread, treat those who become sick and reduce the overall burden on society. Recognizing the vital role that public health departments play in planning for an outbreak of pandemic influenza, this “Summit of the States” was convened on July 14-15, 2008, on the campus of Indiana University-Purdue University Indianapolis (IUPUI) by the Association of State and Territorial Health Officials, the Indiana State Department of Health and the Indiana University Center for Bioethics. Invitations were extended to all 50 states, 6 territories and the District of Columbia. More than 150 delegates from 35 jurisdictions accepted, making this one of the largest gatherings of senior leadership from state and territorial public health departments ever convened to discuss the ethical issues in pandemic influenza planning. (See below for complete list).

Summit Process

The Summit began with plenary sessions, during which new data from a national public opinion survey were presented and delegates were briefed by several participants on current challenges and best practices in their states. Summit delegates then broke into working groups to identify key ethical challenges that states and territories face in planning for pandemic influenza. In the final plenary, the delegates reached a consensus on the most important ethical issues and how to address them.

Outcomes

The Summit had two significant consensus outcomes:

1. Key Ethical Challenges that States and Territories Face in Planning for Pandemic Influenza

- Meeting the obligation to engage communities in planning and response to ensure fairness, transparency and participation
- Identifying and defining criteria for allocation of scarce health care and critical infrastructure resources
- Defining criteria and mechanisms for implementing altered standards and places of care
- Preventing exacerbation of disparities in access to care
- Balancing the rights and duties of health care and critical infrastructure workers
- Providing palliative care
- Meeting the needs of at-risk populations
- Assuring that community mitigation and containment strategies are appropriate for the severity of the pandemic
- Respecting cultural and religious practices in the face of mass fatalities

2. Action Steps that States and Territories Should Take

Enhance Dialogue and Partnering

- Engage individuals, businesses and organizations in a dialogue about shared responsibilities
- Expand existing partnerships to include the Drug Enforcement Administration, the Food and Drug Administration, home care agencies, hospice providers and pharmacies to allow for robust palliative care in institutional and home settings
- Strengthen alliances and partnerships with professional health associations

Education and Training

- Train health care and critical infrastructure workers to identify, analyze and resolve ethical issues in pandemic response
- Foster education and collaboration among governmental agencies to marshal resources and coordinate shared responsibilities
- Develop suggested components and missions for local and state ethics committees.
- Establish a common website that provides a clearinghouse for ethics-related literature on pandemic influenza
- Create toolkits for local education, planning, partnerships and community engagement
- Establish a process, timeline and tools to reach consensus on key ethical challenges at local, state, regional and national levels

Address Policy Needs

- Engage public health, social service and community organizations in a cooperative effort to identify and meet the needs of at-risk populations
- Engage the Centers for Medicare & Medicaid Services in a discussion concerning regulations and statutes that will need to be waived in order to implement altered standards of care in certified facilities
- Engage third-party payers in discussions about reimbursement issues

Participating State and Territorial Delegations

Alabama	Iowa	Oklahoma
Alaska	Kansas	Ohio
Arkansas	Kentucky	Pennsylvania
California	Massachusetts	Puerto Rico
Delaware	Michigan	South Carolina
District of Columbia	Minnesota	South Dakota
Federated States of Micronesia	Mississippi	Texas
Florida	Missouri	US Virgin Islands
Georgia	Nevada	Utah
Illinois	New Jersey	Virginia
Indiana	New York	Washington
	North Carolina	West Virginia

