Overview

A key component of local and state influenza pandemic response plans is an assessment of social distancing measures, and the authorities and circumstances under which they may be implemented within a specific jurisdiction. Nearly all social distancing measures will have economic and/or social impacts on neighboring jurisdictions. Therefore, influenza pandemic response plans must include protocols that describe how decisions regarding the implementation of social distancing measures (including specific measures, timing and geographic scope) will be:

- made locally
- coordinated regionally, and
- communicated to appropriate stakeholders.

Purpose

The purpose of this protocol is to provide a decision tool for use across the Puget Sound region (King, Pierce, Snohomish, Kitsap and Thurston Counties) by multiple levels of government during an influenza pandemic. This protocol will assist local decision makers with efficiently notifying key partners in the region, coordinating the timing and scope of social distancing measures to be implemented, and providing a mechanism to facilitate consensus. Specific components addressed within the protocol include:

- Types of social distancing measures to be considered for possible implementation;
- Assessment of the social and economic impacts of each social distancing measure;
- Phased and/or simultaneous implementation of specific social distancing measures;
- Primary stakeholders involved in discussing the impacts and implementation of each social distancing measure;
- Coordinating and communicating decisions to all key stakeholders regarding the implementation of social distancing measures within a specific jurisdiction.
Assumptions

Implementation of this protocol is based, in part, on one or more of the following planning assumptions:

- Pandemic influenza strain is spreading from person to person in several locations around the world;
- The WHO has declared Global Pandemic Phase 5 or 6;
- Cases of pandemic influenza are present within the Puget Sound region;
- Local elected officials and the Governor have proclaimed a State of Emergency, or will do so concurrent with the decision to implement social distancing measures.

Types of Social Distancing Measures to be Addressed

1. Direct government agencies to implement pandemic emergency staffing plans (telecommuting, flex shifting) and implement social distancing within facilities.

   All local government agencies would activate telecommuting and flex shifting plans to increase social distancing within government facilities and reduce crowding on public transportation systems. State and Federal officials would direct State and Federal agencies, respectively, to implement telecommuting and flex shifting plans concurrent with local agencies. Plans may be phased to allow for escalation in conjunction with the severity of the incident.

2. Direct private sector to implement pandemic emergency staffing plans (telecommuting, flex shifting) and implement social distancing within facilities.

   All private sector and non-profit organizations within a jurisdiction would activate telecommuting and flex shifting plans to increase social distancing within their facilities and reduce crowding on public transportation systems. Plans may be phased to allow for escalation in conjunction with the severity of the incident.
3. Close all public and private schools.

   All K-12 school facilities within a jurisdiction would be closed. Schools would be encouraged to incorporate web based learning and public access TV media into class curricula, and would encourage home schooling. Schools would provide parents and students with strong recommendations to avoid gathering with friends in other locations.

4. Minimize social interaction at all public and private colleges and universities.

   All public and private college and university facilities would implement measures to minimize social interaction among students and faculty. Measures would include but not be limited to suspending classes, enhancing web-based learning, implementing telecommuting and flex shifting among staff, canceling all recreational activities (intramurals), closing student unions, closing student cafeterias, and canceling all large meetings and public gatherings.

5. Close all licensed child care centers.

   All licensed child care centers within the county would be closed.

6. Implement measures to increase social distancing at all libraries.

   All library facilities would modify operation to restrict the public from gathering in the facility. The public would only be allowed to enter a library facility to pick up materials requested / reserved on line or via telephone.

7. Limit activities at all houses of worship.

   All large public gatherings at churches, synagogues, mosques, temples and other religious facilities would be suspended.

8. Close all community centers.

   All public, private, and non-profit facilities used for community gatherings would be closed.
9. Close all theaters.

   All theaters (film and stage), concert halls, and opera houses would be closed.

10. Suspend large gatherings (sports events, concerts, parades).

   All indoor and outdoor events that cater to large crowds such as sporting events, parades, concerts, and festivals would be suspended.

11. Suspend government functions not dedicated to pandemic response or associated with continuity of critical services.

   All government activities and personnel will be focused on maintaining critical services and responding to the pandemic. Non-critical functions may be suspended in order to redirect staff to backfill employees performing critical tasks. This may be implemented in an escalating manner to match the severity of the incident.

12. Recommend that mass transit be used only for essential travel.

   Mass transit will remain operational to the greatest extent possible throughout a pandemic. Government and the private sector will be directed to implement telecommuting and flex shifting to relieve the demand on mass transit systems. The public will be encouraged to use mass transit only for essential travel and only when other means are not available.
Coordinating Social Distancing Decisions

This protocol incorporates a series of decision points. The decision process starts with the recognition of pandemic influenza infection within the local community. The process proceeds with the decision made by local officials to implement one or more social distancing measures within a jurisdiction, coordinated among neighboring jurisdictions and different levels of government, and communicated to all appropriate stakeholders. The key steps in the process are as follows:

- Illness reports and surveillance data, or information from national public health authorities (CDC), leads a local health jurisdiction in the Puget Sound region to determine that social distancing actions may be needed. [Refer to Appendix F, Threshold Determinants for the Use of Social Distancing Measures.]

- The local health jurisdiction notifies the four other local health jurisdictions in the Puget Sound region, as well as the Washington Department of Health (DOH) and the Regional Administrator for the Department of Health and Human Services (HHS).

- By conference call, local health jurisdictions in the Puget Sound region, DOH and the HHS Regional Administrator discuss epidemiological data, social distancing activities occurring nationwide and internationally, social distancing measures under consideration in the Puget Sound region, and the potential timing and duration of these measures.

- On follow up conference calls, public information officers for local health jurisdictions, DOH and HHS coordinate timing and content of public messaging.

Alert and Notification

This protocol will be activated when one or more local jurisdictions within the Puget Sound region determines that social distancing measures may need to be implemented within 72 hours. As a first step, the local health jurisdiction initiating the protocol will contact the four other Puget Sound health jurisdictions and DOH to schedule a social distancing conference call. DOH will notify the HHS Regional Administrator to attend the call. Attendees on this coordination conference call should include:

- Local Health Directors
- Local Health Officers
- Local Directors of Communicable Disease Prevention
- Local Public Health Preparedness Directors
- Local Public Information Officers
- State Secretary of Health
Social Distancing Discussion

The local jurisdiction that initiates this protocol will facilitate the conference call discussion with the parties listed above. All parties will discuss:

1. Current disease surveillance data within local health jurisdictions, and at the regional and national level;

2. Available information and guidance regarding the efficacy and adverse impacts of social distancing measures already in effect nationally and internationally;

3. Specific social distancing measures under consideration and the criteria for the timing and duration of implementation;

4. Implementation of social distancing measures and emergency staffing plans within State and Federal agency facilities concurrent with local decisions;

5. Implementation of social distancing measures on tribal lands;

6. Whether State or Federal authorities will be invoked regarding any or all social distancing measures within the State;

7. Timing of notifications to response partners and the public;

8. Establishing consistency regarding the timing and public announcement of social distancing measures between all local jurisdictions.
Implementation

Each county will implement social distancing measures in a phased manner. Each Action Step listed below describes a series of measures that would be implemented concurrently. Action Steps would be taken in sequential order based on the escalating severity of the event. [Note: Local Health Jurisdictions may decide to implement Action Steps concurrently if warranted by local conditions such as high rate of disease spread and severity of illness.]

Action Step #1

- Close all public and private schools, licensed child care centers.
- Increase social distancing at all libraries and public and private colleges and universities.
- Direct government agencies to implement pandemic emergency staffing plans (telecommuting, flex shifting).
- Direct private sector to implement pandemic emergency staffing plans (telecommuting, flex shifting).

Rationale: Soon after a severe influenza pandemic arrives in the local area, all public and private schools (K-12) and day care centers would likely be closed to decrease social interaction and slow the spread of the disease throughout the community. This Action Step would be implemented when very few cases have been reported in the local area. Libraries, colleges and universities would implement measures as directed by local health officials. Concurrent with this action, emergency staffing plans for public and private sector agencies and universities must be activated to enable a significant portion of the workforce to remain functional while caring for children at home.
Action Step #2

- Limit activities at all houses of worship.
- Close all community centers.
- Close all theaters.
- Suspend large gatherings (sports events, concerts, parades).
- Recommend that mass transit be used only for essential travel.

**Rationale:** Measures within Action Step #2 reflect limitations on recreational/spiritual public gatherings in an effort to further contain the spread of disease throughout the local community. Action Step #2 would likely be implemented following Action Step #1, and would occur if infection rates continued to rise significantly following the closure of schools and implementation of emergency staffing plans. Delaying the implementation of Action Step #2 may be appropriate during an influenza pandemic to ensure that available surveillance data warrant increased social distancing response. This approach will also help minimize social disruption and economic loss in the community.

Action Step #3

- Suspend government functions not dedicated to pandemic response or associated with continuity of critical services.

**Rationale:** Action Step #3 focuses on further limiting exposure of the public by fully implementing business continuity plans for public and private sector in a manner consistent with a worst-case influenza pandemic event.
### Table 1
Social Distancing Measures, Impacts and Stakeholders

<table>
<thead>
<tr>
<th>Measure</th>
<th>Economic Impacts</th>
<th>Social Impacts</th>
<th>Stakeholders</th>
</tr>
</thead>
<tbody>
<tr>
<td>Direct government agencies to implement pandemic emergency staffing plans (telecommuting, flex shifting)</td>
<td>3</td>
<td>1</td>
<td>All government agencies within the scope of authority</td>
</tr>
<tr>
<td>Encourage private sector to implement pandemic emergency staffing plans (telecommuting, flex shifting)</td>
<td>3</td>
<td>1</td>
<td>All private businesses, non-profit organizations, business associations</td>
</tr>
<tr>
<td>Close all public and private schools.</td>
<td>4</td>
<td>4</td>
<td>All school superintendents and private school directors</td>
</tr>
<tr>
<td>Minimize social interaction at all public and private colleges and universities</td>
<td>2</td>
<td>2</td>
<td>All college and university presidents</td>
</tr>
<tr>
<td>Close all large child care centers</td>
<td>4</td>
<td>4</td>
<td>All public and private child care center directors</td>
</tr>
<tr>
<td>Minimize social interaction at all libraries</td>
<td>1</td>
<td>1</td>
<td>All library facility managers</td>
</tr>
<tr>
<td>Limit activities at all houses of worship</td>
<td>1</td>
<td>2</td>
<td>All faith-based organizations</td>
</tr>
<tr>
<td>Close all community centers</td>
<td>1</td>
<td>1</td>
<td>All public and private facility managers</td>
</tr>
<tr>
<td>Close all theaters</td>
<td>1</td>
<td>1</td>
<td>All public and private facility managers</td>
</tr>
<tr>
<td>Suspend large gatherings (sports events, concerts, parades)</td>
<td>2</td>
<td>2</td>
<td>All facility operators, event organizers, permitting jurisdictions</td>
</tr>
<tr>
<td>Suspend government functions not dedicated to pandemic response or associated with continuity of critical services</td>
<td>3</td>
<td>3</td>
<td>All government agencies within the scope of authority</td>
</tr>
<tr>
<td>Recommend that mass transit be used only for essential travel</td>
<td>2</td>
<td>2</td>
<td>Mass Transit agencies</td>
</tr>
</tbody>
</table>
Table 1
Social Distancing Measures, Impacts and Stakeholders

<table>
<thead>
<tr>
<th>Economic Impacts:</th>
<th>1 = minor (minimal short and long term impacts jurisdiction-wide; specific facilities may experience major impacts)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2 = moderate (noticeable short term impacts to business and government but manageable in the long term for moderate and large organizations)</td>
</tr>
<tr>
<td></td>
<td>3 = significant (major short term economic impacts jurisdiction-wide, governments will allocate significant resources to maintain emergency response actions and critical infrastructure)</td>
</tr>
<tr>
<td></td>
<td>4 = extreme (major disruption of operations for all businesses and governments; long term economic impacts jurisdiction-wide)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Social Impacts:</th>
<th>1 = minor (minimal impacts on community functions or public well being)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2 = moderate (noticeable short term social impacts to communities; significant hardships created for some members of the community)</td>
</tr>
<tr>
<td></td>
<td>3 = significant (major short term social impacts jurisdiction-wide; widespread disruption of normal societal functions)</td>
</tr>
<tr>
<td></td>
<td>4 = extreme (major disruption of social fabric)</td>
</tr>
</tbody>
</table>

| Stakeholder:      | Party that will be directed to modify operations in order to comply with social distancing orders. |