

Public Health Communications
PHASES 1/2 - SITUATION A
Novel (new) influenza virus in birds or other animals overseas
RESPONSE ACTION – WATCH

Action Item 1: Develop a Public Health Communications Plan as an annex to the NJ Department of Health and Senior Services (NJDHSS) Risk Communications Plan

- 1.1 Office of Communications (OCOM) develops a NJDHSS Risk Communications Plan (Appendix 1) that identifies the special actions to take related to risk and emergency communications during a public health emergency. It specifies roles and responsibilities to ensure consistent communications for the duration of the emergency. This plan emphasizes the need to maintain consistent communications with external partners, such as the Centers for Disease Control and Prevention (CDC) and partners within NJ including:
 - Local Information Network and Communications System (LINCS) agencies, the Governor’s Office, NJ Office of Homeland Security (NJOHSP), Office Emergency Management (NJOEM); NJDHSS programs, including Communicable Disease Service (CDS), the Division of Health Infrastructure Preparedness and Emergency Response (HIPER) and other affected divisions; and any other local health officials or administrators, in accordance with federal, state and local emergency plans.
- 1.2 OCOM conducts an inventory of all existing public health information materials in consultation with Communicable Disease Service Health Educators (CDS-HEs). Materials include fact sheets, Frequently Asked Questions, power point presentations, antiviral information, planning checklists and press release templates. Current inventory is located in the OCOM T Drive in Pandemic Influenza 2006 folder (Appendix 2).
- 1.3 OCOM coordinates existing public health messaging and information on avian influenza with Public Information Officers (PIOs) at the NJ Department of Agriculture and the NJ Department of Environmental Protection, Division of Fish and Wildlife.
- 1.4 OCOM develops press release templates, advisories and talking points based on the different triggers for pandemic influenza.
- 1.5 OCOM, in collaboration with CDS-HEs develops a large cache of public awareness and education materials, including a community awareness presentation, a public service announcements (PSA) on preparedness for an influenza pandemic, a dedicated website (www.NJFluPandemic.gov linked to www.pandemicflu.gov), posters and flyers in both English and Spanish, and a campaign called “Get Flu Ready New Jersey.” Presentations are conducted by NJDHSS staff and LINCS agency health educators. The CDS has a Speakers Bureau that fills requests by statewide health and business organizations for pandemic influenza presentations for informational and planning purposes.
- 1.6 OCOM, in consultation with CDS-HEs, populates the website (www.NJFluPandemic.gov) Director of OCOM decides if a dark website needs to be prepared and will direct Risk Communication staff to populate, if necessary.
- 1.7 OCOM shares approved materials with appropriate public health and healthcare partners that include NJ state agencies, LINCS agencies, local health departments, hospitals, Federally Qualified Health Centers (FQHCs) and professional organizations. These are identified in the NJDHSS Risk Communications Plan.

Public Health Communications
PHASES 1/2 - SITUATION A
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RESPONSE ACTION – WATCH

- 1.8 In coordination with CDS-HEs, OCOM develops an operational pandemic awareness plan for general public, media, and health care professionals, state agencies, and other partners as an annex to the NJDHSS Risk Communication Plan.
- 1.9 OCOM serves in an advisory capacity for the statewide influenza pandemic awareness program that CDS-HEs are creating for employers to share with their employees.
- 1.10 OCOM holds monthly meetings with Health Educators/Risk Communicators (HERCs) that include training and education components, including latest information on pandemic influenza as well as risk communications principles.

Public Health Communications
PHASES 1/2 – SITUATION B
Novel (new) influenza virus in birds or other animals in North America
RESPONSE ACTION – WATCH

Action Item 1: Prepare public health information

- 1.1 OCOM reviews and continues all tasks from Phases 1/2 Situation A.
- 1.2 OCOM receives situational updates from World Health Organization (WHO), CDC, NJ Department of Agriculture and NJ Department of Environmental Protection.
- 1.3 OCOM receives information on the implications to human health from the Deputy Commissioner/ State Epidemiologist.
- 1.4 OCOM discusses messaging with appropriate state agency PIOs, including the Governor’s Press Office.
- 1.5 OCOM reviews press release templates on pandemic influenza, specifically templates for novel influenza virus in birds or other animals in New Jersey. OCOM consults with CDS for accuracy and content.
- 1.6 OCOM develops a situational update and preliminary talking points based on the situation, in consultation with CDS staff.
- 1.7 Situational updates and talking points are approved by subject matter experts, Deputy Commissioner/ State Epidemiologist and/or the Commissioner or his/her designee).
- 1.8 Based on situational updates, OCOM edits existing public health messages to reflect the current situation. All changes are approved by the subject matter expert, the Deputy Commissioner/ State Epidemiologist and/or the Commissioner or his/her designee.

Public Health Communications
PHASES 1/2 – SITUATION B
Novel (new) influenza virus in birds or other animals in North America
RESPONSE ACTION – WATCH

- 1.9 OCOM coordinates all mental health messages with the NJ Department of Human Services, Division of Mental Health Services, Disaster and Terrorism Branch (DTB) and CDS-HEs.
- 1.10 OCOM disseminates situational updates, preliminary talking points, public awareness messages and relevant mental health messages to public health partners, including state agency PIOs. List of Partners and contact information is contained in NJDHSS Office of Communications Risk Communications Plan. (Appendix 1).
- 1.11 OCOM and CDS-HEs inventory all previously created awareness program components, including power point presentations and campaigns such as “Get Flu Ready NJ” (Appendix 3).
- 1.12 OCOM and CDS-HEs work with LINCS agencies to implement the public awareness plan.

Public Health Communications
PHASES 1/2 – SITUATION C
Novel (new) influenza virus in birds or other animals in NJ
RESPONSE ACTION - WATCH

Action Item 1: Prepare public health information

- 1.1 OCOM coordinates information disseminated from WHO, CDC, and NJ Department of Agriculture to revise situational update as needed.
- 1.2 OCOM discusses potential public health implications with CDS and the Deputy Commissioner/State Epidemiologist.
- 1.3 OCOM, in coordination with subject matter experts, develops needed public health information.
- 1.4 OCOM reviews and follows all tasks in Phases 1/2 A and 1/2 B as needed.

Action Item 2: Inform the public

- 2.1 OCOM disseminates appropriate public health information to partners including LINCS agencies, NJDHSS Senior Staff, Governor’s Office Press Office and other pertinent state agencies.
- 2.2 OCOM monitors media for effective messaging.
- 2.3 OCOM discusses need with CDS, to open the Emergency Call Center (ECC) for calls from public health workers and health care providers, and/or the Medical Coordination Centers’ (MCCs) phone banks for calls from the public.

Public Health Communications
PHASES 1/2 – SITUATION C
Novel (new) influenza virus in birds or other animals in NJ
RESPONSE ACTION - WATCH

If decision is to open, OCOM:

- Evaluates existing public health messages regarding potential emergency (Director of Communications, Risk Communications Manager in conjunction with CDS-HEs).
- Develops/refines and approves appropriate messages (press release, talking points, public health messages) for dissemination. (Development: Risk Communication Manager and subject matter experts; Approval: Director of Communications, Deputy Commissioner and Commissioner).
- Coordinates with CDS-HEs on scripts.
- Provides Just-in-Time Risk Communication training materials to call staff.
- Publicizes call centers phone numbers.

2.4 OCOM, in collaboration with CDS-HEs, reassesses messages based on situational updates.

Public Health Communications
PHASE 3 – SITUATION A
Human case of novel (new) influenza virus (no human spread) overseas
RESPONSE ACTION - WATCH

Action Item 1: OCOM continues previous Action Items as appropriate.

Public Health Communications
PHASE 3 – SITUATION B
Human case of novel (new) influenza virus (no human spread) in North America
RESPONSE ACTION - ALERT

Action Item 1: Prepare public health information

1.1 OCOM consults with State Epidemiologist and CDS to determine health risk to humans and situational update.

1.2 Director of OCOM makes decision to activate Risk Communication Plan. If activated, Director of OCOM follows plan for staff assignments.

1.3 OCOM discusses need with CDS, to open the ECC and/or MCC phone banks.

If decision is to open, OCOM:

- Evaluates existing public health messages regarding potential emergency (Director of Communications, Risk Communications Manager in conjunction with CDS).
- Develops/refines and approves appropriate messages (press release, talking points, public health messages) for dissemination. (Development: Risk Communication Manager and affected program expert; Approval: Director of Communications, Deputy Commissioner and Commissioner).
- Coordinates with CDS-HEs on scripts.

Public Health Communications
PHASE 3 – SITUATION B
Human case of novel (new) influenza virus (no human spread) in North America
RESPONSE ACTION - ALERT

- Provides Just-in-Time Risk Communication training materials to call staff.
 - Publicizes the call centers phone numbers.
- 1.4 OCOM inventories existing pandemic/avian public health messages. Edits made in collaboration with CDS-HEs reflect the current situation. All changes are approved by the Deputy Commissioner/State Epidemiologist, Director of OCOM, and Commissioner.
- 1.5 Director of OCOM consults with the Governor’s Press Office, Commissioner and other appropriate senior staff members on development of public health messages, including mode of dissemination and appropriate spokespersons.
- 1.6 OCOM and CDS-HEs coordinate mental health messages with DTB.
- 1.7 OCOM coordinates all culturally appropriate and language specific information to reach special needs populations to include:
- Using LINCS Agency HERCs who have been trained in low literacy writing
 - Working with community leaders to communicate with traditionally hard to reach at-risk populations
 - Through HIPER’s Office for Preparedness for Special Health Needs, working with the New Jersey Special Needs Advisory Panel (an advisory body to NJOEM and NJOHSP) to:
 - Enlist their support to explore and address influenza pandemic preparedness planning issues specific to at-risk populations
 - Advocate for strong mechanisms to support at-risk populations during an influenza pandemic.
- 1.8 OCOM anticipates potential public health messages that include:
- Sheltering in place.
 - Lack of vaccine.
 - Antiviral availability/effectiveness/distribution.

Action Item 2: Inform the public

- 2.1 OCOM collaborates with the Deputy Commissioner/State Epidemiologist to provide updates to appropriate public health partners and state agencies via conference call or email. Refer to the OCOM Risk Communication Plan for protocol.
- Updates could include:
- Scope of potential emergency
 - Internal messaging to employees
 - Phone numbers or websites providing update/further information

Public Health Communications
PHASE 3 – SITUATION B
Human case of novel (new) influenza virus (no human spread) in North America
RESPONSE ACTION - ALERT

- 2.2 Based on latest situational updates, OCOM and CDS update public awareness materials, including:
- Power point presentations
 - Fact Sheets
 - Q and A sheets
 - Website content
 - Hotlines
- 2.3 OCOM and CDS share new public awareness materials with appropriate partners including LINC agencies, other governmental state agencies and the private sector.
- 2.4 OCOM assesses if new public messages are being received correctly by monitoring media and phone calls from the public.
- 2.5 OCOM responds through protocols described in NJDHSS Risk Communications Office with specific attention to:
- Staffing assignments for Message Development Team
 - Delivery of Public Health Message to public health partners
 - Delivery of public health message to media
 - Establishing times of updating partners, public and media.
- 2.6 OCOM, in conjunction with IT, updates website (live and dark) with appropriate information, such as hotline phone numbers.
- 2.7 OCOM disseminates information to the Media as follows:
- Once public information messages have been approved, media advisories, press releases and public service announcements are sent out via NJ Newslines, copying HERCs.
 - Releases and PSAs are sent to English and Spanish media outlets, along with other media serving populations affected by the health threat.
 - When NJ Newslines is not available, staff send releases and PSAs to the media by facsimile, using WINFAX and a separate redundant fax machine. Staff send to media outlets in the following order: wire, TV, radio, daily newspaper.
 - In addition to sending media advisories and press releases, NJDHSS may conduct news conferences and teleconferences, as well as telephone calls to print, broadcast and electronic media, through a state Joint Information Center (JIC), if activated. The media will be advised to rely on the NJDHSS website (<http://www.state.nj.us/health/>) for updates. When information is released to the media, LINC agency health officers and HERCs will be copied simultaneously. LINC agencies are responsible for forwarding the information to local health departments (LHDs) in their jurisdictions.
- 2.7 OCOM monitors public health information and messaging through media, the ECC, the MCC and other information sources to assess message effectiveness.

Public Health Communications
PHASE 3 – SITUATION B
Human case of novel (new) influenza virus (no human spread) in North America
RESPONSE ACTION - ALERT

- 2.9 OCOM assesses media needs and disseminates press release emails, provides teleconference media briefings, holds press conferences and responds to media calls.
- 2.10 OCOM consults with Commissioner and Deputy Commissioner/State Epidemiologist on situational changes/updates.
- 2.11 OCOM reassesses response related to timeliness and effectiveness of message and begins response again.

Public Health Communications
PHASE 3 – SITUATION C
Human Case of novel (new) influenza virus (no human spread) in NJ
RESPONSE ACTION – ALERT

PHASE 3 – SITUATIONS D and/or E
First case of human to human spread of novel (new) influenza virus overseas
and/or in North America
RESPONSE ACTION - RESPONSE

Action Item 1: Continue activities from Phase 3B

Public Health Communications
PHASE 3 – SITUATION F
First case of human to human spread of novel (new) influenza virus in NJ
RESPONSE ACTION - RESPONSE

Action Item 1: Prepare public health information

- 1.1 OCOM continues activities from Phase 3B.
- 1.2 OCOM activates Risk Communication Plan.
- 1.3 OCOM determines staffing needs for potential pandemic, including working from home, staffing statewide.

Action Item 2: Inform the public

- 2.1 OCOM coordinates messaging with the Health Command Center (HCC), if activated, the Commissioner, and the Deputy Commissioner/State Epidemiologist.
- 2.2 OCOM staff communicates with State Emergency Operations Center (SEOC)/JIC or appropriate PIO.

Public Health Communications
PHASE 3 – SITUATION F
First case of human to human spread of novel (new) influenza virus in NJ
RESPONSE ACTION - RESPONSE

- 2.3 Director OCOM activates a communication response team responsible for:
- Message development
 - Rumor/misinformation management
 - Media triage/media calls
 - Logistics
 - JIC staffing
 - HCC staffing
 - Hotlines
- 2.4 OCOM staff participate in conference calls with appropriate partners as necessary, i.e., CDC, U.S. Department of Homeland Security; Governor’s Office, NJOHSP, NJ Department of Human Services, Hospitals and LINCS agencies, and:
- Provide situation updates for media calls; and
 - Assess statewide communication needs.
- 2.5 OCOM activates full NJDHSS Risk Communications Plan with protocols, contact lists, etc. that includes:
- Establish links with CDC Office of Communications
 - Conference call with LINCS Agency HERCs and any other appropriate partners
 - Establish regular briefing schedule with partners
 - Establish media briefing schedule
 - Identify appropriate spokesperson(s)
 - Activate expedited review and approval process for public health messages
 - Develop key public health messages for specific incident
 - Activate dark website (if established) or update NJDHSS website
 - Support risk communication efforts at HCC and/or JIC
 - Develop and disseminate internal communications
 - Update messaging as needed
 - Provide crisis communication support to LHDs including potential on-site deployment
- 2.6 Director of OCOM informs Governor’s Office, SEOC, and HCC commander of approved risk communication protocols.

Public Health Communications
PHASE 4 – SITUATIONS A, B and C
Clusters of cases of human spread overseas, in North America and/or in NJ
PHASE 5 – SITUATION A
Widespread cases of human to human spread of novel (new) influenza virus overseas
RESPONSE ACTION - RESPONSE

Action Item 1: Continue activities from Phase 3F

Public Health Communications
PHASE 5 – SITUATION B
Widespread cases of human to human spread of novel (new) influenza virus in North America
RESPONSE ACTION - RESPONSE

Action Item 1: Address staffing issues

- 1.1 Director of OCOM, in consultation with Senior Staff, decides whether to assign staff to work at home.

Public Health Communications
PHASE 5 – SITUATION B
Widespread cases of human to human spread of novel (new) influenza virus in North America
RESPONSE ACTION - RESPONSE

Action Item 2: Prioritize activities

- 2.1 When staff are assigned to work at home, Director OCOM reviews activities in Phase 3F and prioritizes which activities will be done.

Public Health Communications
PHASE 5 – SITUATION C
Widespread cases of human to human spread of novel (new) influenza virus in NJ
RESPONSE ACTION - RESPONSE

Action Item 1: Prioritize activities

- 1.1 Director of OCOM continues to prioritize OCOM activities based on availability of staff and importance of activity.
- 1.2 Highest priority activities are continued.

Public Health Communications
PHASE 6
Increased and sustained transmission in the general population
RESPONSE ACTION - RESPONSE

Action Item 1: Prioritize activities

- 1.1 Director of OCOM continues to prioritize OCOM activities based on availability of staff and importance of activity.
- 1.2 Highest priority activities are continued.

Public Health Communications
BETWEEN WAVES
RESPONSE ACTION - ALERT

Action Item 1: Inform the public

- 1.1 OCOM works with CDS, the Deputy Commissioner/State Epidemiologist, the Office of the Commissioner and the Office of the Governor to communicate to the public that the threat is over and there will be a return to normal operations.
- 1.2 OCOM develops and disseminates public awareness as needed.
- 1.3 OCOM begins recovery communications operation.

Action Item 2: Evaluate

- 2.1 OCOM evaluates communications response, determines ways to improve operations, and modifies plans accordingly.