



U.S. Department of Energy
Office of Inspector General
Office of Inspections and Special Inquiries

Inspection Report

The Department of Energy's Pandemic Influenza Planning

DOE/IG-0784

December 2007

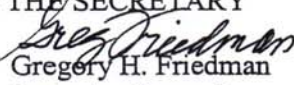


Department of Energy
Washington, DC 20585

December 19, 2007

MEMORANDUM FOR THE SECRETARY

FROM:


Gregory H. Friedman
Inspector General

SUBJECT:

INFORMATION: Report on "The Department of Energy's Pandemic Influenza Planning"

BACKGROUND

According to the U. S. Centers for Disease Control and Prevention, in a worst case scenario, as many as 90 million people in the U.S., including 30 percent of the U.S. workforce, could become sick from a mutated avian influenza (bird flu) H5N1 strain. Proactive steps are therefore necessary to protect U.S. Department of Energy (DOE) personnel and maintain the Department's mission-essential functions.

The Government issued mandates to Federal agencies to conduct pandemic influenza planning. On November 1, 2005, the President announced the "National Strategy for Pandemic Influenza," requiring Federal agencies that perform mission-critical functions, including DOE, to develop agency pandemic influenza plans. On March 29, 2006, the Deputy Secretary of Energy signed a memorandum, "Development of the Department of Energy Pandemic Influenza Plans," which required all DOE entities, including the National Nuclear Security Administration (NNSA), to develop specific pandemic influenza plans with full implementation by May 31, 2006. On November 8, 2006, the White House Homeland Security Council issued a pandemic influenza plan checklist that contained additional criteria for agencies to follow. The objective of our inspection was to determine if DOE was taking appropriate and timely actions regarding its pandemic influenza planning.

RESULTS OF INSPECTION

We concluded that while DOE Headquarters and many Department sites are making progress in their pandemic influenza planning, much remains to be implemented. Specifically, we found that:

- Of the 72 organizations required to submit a pandemic plan by a June 1, 2007, deadline set by the DOE Continuity Program Manager, only 36 (or 50 percent) met the requirement. In addition, only one of the four DOE power administrations submitted a plan, which is of particular concern given their essential role in the Nation's electricity infrastructure;
- As of October 11, 2007, at the conclusion of our field work, 53 of 80 organizations (or 66 percent) had submitted their pandemic plans; the Continuity Program Manager explained



that the number of organizations required to submit plans had increased since the June 1, 2007, deadline;

- Coordination with individual State or U.S. Department of Health and Human Services officials for the release of pandemic vaccines and antivirals had not been completed;
- Of 11 required DOE Biological Event Monitoring Team technical advisory positions and 1 Medical Officer position, 4 advisory positions and the Medical Officer position remained unfilled as of October 11, 2007;
- Although much progress has been made, DOE had not fully implemented an overall corporate process for identifying and reporting employees who would be unable to perform their work during a pandemic;
- DOE had not conducted a social distancing drill (e.g., use of teleworking, limited use of mass transit, and restrictions on meetings and gatherings) to test its ability to perform mission-essential functions while minimizing person-to-person contact; and,
- Although DOE had initiated a pandemic influenza education and information campaign, including a voluntary training course, only 550 of approximately 140,000 DOE Federal and contractor employees were trained as of October 11, 2007.

MANAGEMENT REACTION

The attached report includes recommendations for corrective actions. Management agreed with our recommendations. However, because NNSA had not provided a set of planned corrective actions, a management decision from NNSA is required.

Attachment

cc: Deputy Secretary
Under Secretary
Under Secretary for Science
Administrator, National Nuclear Security Administration
Chief of Staff
Chief Health, Safety and Security Officer (HS-1)
Chief Information Officer (IM-1)
Director, Office of Human Capital Management (HC-1)
Associate Administrator for Emergency Operations (NA-40)
Director, Policy and Internal Controls Management (NA-66)
Director, Office of Illness and Injury Prevention Programs (HS-13)
Director, Office of Internal Review (CF-1.2)
Audit Coordinator, Office of Human Resources and Administration (HS-1.23)

THE DEPARTMENT OF ENERGY'S PANDEMIC INFLUENZA PLANNING

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Overview

INTRODUCTION AND OBJECTIVE

According to the U. S. Centers for Disease Control and Prevention (CDC), in a worst case scenario, as many as 90 million people in the U.S., including 30 percent of its workforce, could become sick from a mutated avian influenza (bird flu) H5N1 strain. Proactive steps are therefore necessary to protect U.S. Department of Energy (DOE) personnel and maintain the Department's mission-essential functions.

The Government issued mandates to Federal agencies to conduct pandemic influenza planning. On November 1, 2005, the President announced the "National Strategy for Pandemic Influenza," requiring Federal agencies that perform mission-critical functions, including DOE, to develop agency pandemic influenza plans. In the event of a pandemic, the U.S. Department of Health and Human Services will lead the public health and medical response and the U.S. Department of Homeland Security will lead nonmedical domestic support and response actions.

On March 29, 2006, the Deputy Secretary of Energy signed a memorandum, "Development of the Department of Energy Pandemic Influenza Plans," which required all DOE entities, including the National Nuclear Security Administration (NNSA), to develop specific pandemic influenza plans with full implementation by May 31, 2006. The memorandum also established the DOE Biological Event Monitoring Team (Monitoring Team) to coordinate with other Federal agencies and develop a plan that would address an avian influenza pandemic. On November 8, 2006, the White House Homeland Security Council issued a pandemic influenza plan checklist that contained additional criteria for agencies to follow. We concluded that the Deputy Secretary's memorandum and the White House checklist were mandatory.

The objective of our inspection was to determine if DOE was taking appropriate and timely actions regarding its pandemic influenza planning.

OBSERVATIONS AND CONCLUSIONS

We concluded that while DOE Headquarters and many Department sites are making progress in their pandemic influenza planning, much remains to be done. Specifically, we found that:

- Of the 72 organizations required to submit a pandemic plan by a June 1, 2007, deadline set by the DOE Continuity Program Manager, only 36 (or 50 percent) met the requirement. In addition, only one of the four DOE power administrations submitted a plan, which is of particular concern given their role in ensuring the Nation's electricity infrastructure;
- As of October 11, 2007, at the conclusion of our field work, 53 of 80 organizations (or 66 percent) had submitted their pandemic plans; the Continuity Program Manager explained that the number of organizations required to submit plans had increased since the June 1, 2007, deadline;
- Coordination with individual State or U.S. Department of Health and Human Services officials for the release of pandemic vaccines and antivirals had not been completed;
- Of the 11 required Monitoring Team technical advisory positions and 1 Medical Officer position, 4 advisory positions and the Medical Officer position remained unfilled as of October 11, 2007;
- Although much progress has been made, DOE had not fully implemented an overall corporate process for identifying and reporting employees who would be unable to perform their work during a pandemic;
- DOE had not conducted a "social distancing" drill (e.g., use of teleworking, limited use of mass transit, and restrictions on meetings and gatherings) to test its ability to perform mission-essential functions while minimizing person-to-person contact; and,
- Although DOE had initiated a pandemic influenza education and information campaign, including a voluntary training course, only 550 of approximately 140,000 DOE Federal and contractor employees were trained as of October 11, 2007.

BACKGROUND

We announced this inspection on November 7, 2006. We suspended our inspection on November 13, 2006, and December 14, 2006, at the request of the Department's Office of Health, Safety and Security (HSS), in order to provide DOE time to implement numerous aspects of its pandemic influenza planning. We started our inspection field work on May 1, 2007.

The lead office for emergency operations relating to the Department's pandemic influenza planning is NNSA's Office of the Associate Administrator for Emergency Operations. This office is also responsible for DOE's overall Continuity of Operations Plan (COOP). The lead office for biomedical aspects of pandemic influenza planning is HSS' Office of Illness and Injury Prevention Programs. This office is responsible for coordinating with the White House Homeland Security Council and providing pandemic influenza education to employees.

During our entrance conference on May 1, 2007, we learned that the Continuity Program Manager had previously chosen June 1, 2007, for the deadline for each Department entity to submit a pandemic plan to him. Based on this date, we chose June 1, 2007, as a snapshot in time regarding DOE's pandemic implementation planning. To most accurately reflect the status of DOE's pandemic planning, we requested and were provided updated information as of October 11, 2007.

We determined that DOE has been proactive in several areas regarding its pandemic influenza planning. Specifically, HSS, the Office of the Associate Administrator for Emergency Operations, and the Office of Human Capital Management (Human Capital) have taken leadership roles in the Department's pandemic influenza planning. As reflected in this report, the Department has taken a number of important steps to address pandemic influenza issues. Appendix C includes a summary of these actions.

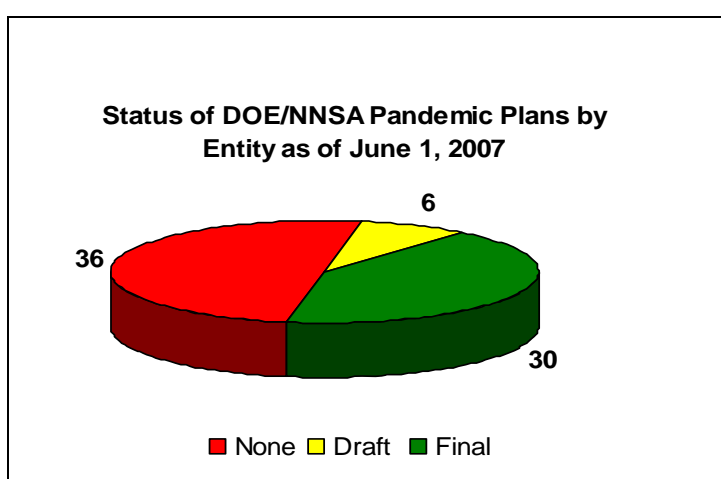
Details of Findings

PANDEMIC PLANS

We found that, of the 72 organizations required to submit a pandemic plan by the June 1, 2007, deadline set by the DOE Continuity Program Manager, only 36 (or 50 percent) met the requirement. In addition, only one of four DOE power administrations submitted a plan, which is of particular concern given their essential role in the Nation's electricity infrastructure.

Figure 1 represents the pandemic plan statistics as of June 1, 2007. Appendix B of this report identifies the status of all program office, support office, and site pandemic plans as of June 1, 2007.

Figure 1¹



On October 11, 2007, at the conclusion of our field work, the Continuity Program Manager informed us that, based on his statistical analysis of the DOE/NNSA organizational components, he determined that the number of organizations required to submit a pandemic plan had increased [from 72 to 80]. According to the Continuity Program Manager's statistics, 53 of 80 (or 66 percent) of the organizations had submitted pandemic plans by that date.

The Continuity Program Manager said that in December 2006, he had informed all entities that they needed a COOP, which would include a pandemic plan, by the June 1, 2007, deadline. He said that he believed that six months was a sufficient amount of time for the entities to complete their plans. The Continuity Program Manager asserted that he was unable to require all entities to develop a plan because there was no enforceable criterion, such as

¹ The Continuity Program Manager said that he planned to conduct a quality assurance review of each pandemic plan prior to his acceptance of the plans as final. As of October 11, 2007, the quality assurance review had not been completed.

a DOE order. He noted that contractors use DOE orders for justification for funding of additional work. He further said that during January 2007, NNSA approved justification for a new Continuity of Programs Order that would include a requirement for pandemic plans. The draft Order is currently under review. We substantiated the lack of a DOE directive or Code of Federal Regulations provision covering this topic.

Further, we were also told by some entities that had not submitted a pandemic plan that they were waiting for a DOE order. Thus, we believe that it is important for there to be an enforceable requirement that all DOE entities have a pandemic plan. Accordingly, we believe that DOE should expedite the process to put such a requirement in place.

DOE has a mission-critical role to ensure that the Nation's energy infrastructure is operational during emergencies. A critical aspect of this is the DOE power administrations. We noted that the Southwest Power Administration Headquarters and its field units were the only DOE power administration entities that submitted pandemic plans. The Bonneville Power Administration, the Southeastern Power Administration, and the Western Area Power Administration stated that they were still working on their pandemic plans at the time of our review.

During our review of Headquarters offices pandemic influenza plans, we observed that none included planning for the Headquarters occupational medical clinics at Germantown, Maryland, and Washington, D.C. The Chair of the Monitoring Team, who is responsible for the medical aspects of DOE pandemic planning, advised that the Headquarters medical clinics are a necessary aspect of DOE's pandemic planning. We determined that Human Capital is responsible for oversight of the Headquarters occupational medical clinic services.

A responsible Human Capital official advised that during a pandemic, Human Capital planned to follow CDC guidelines for medical clinics; however, the official agreed that written details were necessary and agreed to develop written procedures to cover the Headquarters medical clinics. Although we did not review any site pandemic plans to determine if the sites included details covering how their medical clinics would operate during a pandemic, the Monitoring Team Chair stated that she has been providing pandemic influenza guidance to the contractor site office medical directors.

**COORDINATION OF
VACCINES AND
ANTIVIRALS**

We found that coordination with individual State or U.S. Department of Health and Human Services officials for the release of pandemic vaccines and antivirals had not been completed. The Deputy Secretary's March 29, 2006, memorandum stated that DOE is responsible for protecting the health of its employees, which includes the distribution of needed vaccines and antiviral agents. Around May 2006, initial vaccine recommendations for DOE were developed. The Monitoring Team Chair advised that she had instructed the site occupational medical directors to develop a vaccine priority list and coordinate an agreement with officials from the appropriate State(s) or U.S. Department of Health and Human Services for the receipt of Federal stockpiles of pandemic medicines. She said that the sites were working on this task.

On October 22, 2007, a U.S. Department of Homeland Security (DHS)/U.S. Department of Health and Human Services working group developed a set of recommendations that identified priority groups for vaccination. HSS is a member of that interagency working group. HSS management said that it strongly recommends that DOE follow the DHS/U.S. Department of Health and Human Services working group guidance for prepandemic and pandemic vaccine prioritization. HSS management also said that although there are no clear directives on how the vaccines will be distributed, it anticipates that health departments of each State will receive and distribute vaccine according to the DHS/U.S. Department of Health and Human Services recommendations. As such, HSS management said that it continues to encourage each DOE site medical director to enter into a dialogue with his/her respective State health departments for the receipt of pandemic vaccine.

HSS management said that, due to the current lack of vaccine, DOE mission-essential personnel will have the highest priority for vaccinations. HSS management also said that it plans to make a recommendation that DOE program offices and their respective sites compile a list of mission-essential personnel according to function. This list will be used to determine the number of vaccine doses required and the identity of those to be vaccinated.

HSS management further stated that it has no specific recommendation regarding the vaccination of DOE Federal and contractor employees not identified as mission-essential employees. Until vaccine is available for the public at large, the Monitoring Team will recommend that social distancing, hand-washing, and public health practices be implemented to ensure the safety and health of DOE Federal and contractor employees.

MONITORING TEAM POSITIONS

We found that, of the 11 required Monitoring Team technical advisory positions and 1 Medical Officer position, 4 advisory positions and the Medical Officer position remained unfilled as of October 11, 2007. The Deputy Secretary's March 29, 2006, memorandum stated that DOE shall form a Monitoring Team and identified core standing members and their positions. Further, the memorandum identified 11 specific technical advisors to be appointed by the Monitoring Team standing members. The vacant technical advisory positions were for the Offices of Science, Intelligence, and Counterintelligence and a contracting representative.

We also determined that the former DOE Headquarters Medical Officer separated from DOE in September 2006 and a replacement had not been hired. In the interim, the Monitoring Team Chair assumed the Medical Officer's Monitoring Team responsibilities. The Monitoring Team Chair advised us that having all of the required advisors to the Monitoring Team and a Headquarters DOE Medical Officer would enable the process to operate efficiently during a pandemic. The Continuity Program Manager also advised us that the establishment of individuals as advisors in each role would provide cohesiveness to the pandemic influenza plan.

ATTENDANCE PROCESS

Although much progress has been made, we found that DOE had not fully implemented an overall corporate process for identifying and reporting employees who would be unable to perform their work during a pandemic. DOE, therefore, may not be able to ensure continuity of its mission-critical functions. The White House Homeland Security Council directed several agencies, including DOE, to complete a pandemic-related checklist. The checklist included the development of an agency process to determine the status of its employees during a pandemic health crisis for the purpose of monitoring agency workforce levels and for reporting to agencies such as DHS and the U.S. Department of Health and Human Services. In order to implement this checklist item, the Monitoring Team determined that DOE needed to collect information in the following categories during a pandemic: the number of Federal and contractor employees unavailable to work, and identification of the employees' names, organizations, and work locations.

We were told by the Continuity Program Manager that during Exercise Pinnacle 07, a May 2007 continuity of operations exercise, DOE was unable to account for all Federal and contractor employees who were unable to report to work. As a result, the Continuity Program Manager tasked Human Capital to develop a

corporate process for identifying how many people were unable to report to work during an emergency, their identities, and their location of employment. As of August 28, 2007, this capability did not exist.

In November 15, 2007, comments on a draft of our report, Human Capital stated that it had developed a corporate personnel accountability process in December 2005; however, it had not been included in the DOE COOP that was being finalized at that time. Further, Human Capital stated that full implementation will be realized when the next DOE COOP is updated. In addition, Human Capital officials stated that a corporate telephonic call-in process, which the DOE Continuity Program Manager requested to be established, is also being researched and evaluated.

SOCIAL DISTANCING DRILL

We found that DOE had not conducted a social distancing drill (e.g., use of teleworking, limited use of mass transit, and restrictions on meetings and gatherings) to test its ability to perform mission-essential functions while minimizing person-to-person contact. The Deputy Secretary's March 29, 2006, memorandum stated that social distancing is a key component in DOE's pandemic influenza planning.

The Monitoring Team Chair said that a social distancing drill, including teleworking where possible, is necessary because social distancing is a key strategy in DOE's pandemic planning. The Continuity Program Manager also said that a drill that implements the elements of social distancing is essential. He further said that the related DOE Order currently in draft will require the Department to perform drills, including telework drills.

PANDEMIC EMPLOYEE TRAINING

We found that, although DOE had initiated a pandemic influenza education and information campaign, including a voluntary training course, only 550 of approximately 140,000 DOE and contractor employees were trained as of October 11, 2007. Pursuant to the Deputy Secretary's March 29, 2006, memorandum and guidance in the National Strategy for Pandemic Influenza, a pandemic plan is based upon education of its employees.

Participation in this training could significantly reduce employees' chances of contracting a pandemic virus. The Monitoring Team Chair said that her medical training strategy was to first provide training to Headquarters personnel, followed by the sites. In an August 13, 2007, Department-wide communication, Department officials announced that they were offering a new pandemic

influenza training course at DOE Headquarters during September and October 2007. HSS indicated that it also planned to incorporate information on pandemic influenza into its next mandatory Federal Employee Occupational Safety and Health training.

On August 23, 2007, in another Department-wide communication, management announced that it would be offering a live televideo on September 20 and 25, 2007, regarding pandemic training and that the training would be recorded on a DVD for future viewing. Therefore, pandemic training would be available to all DOE and contractor employees. We believe that DOE is making significant progress toward full implementation of employee pandemic influenza training even though only a small number of employees are currently trained, but should work to ensure that training is completed by everyone.

RECOMMENDATIONS

We concluded that while DOE Headquarters and many Department sites are making progress in their pandemic influenza planning, much remains to be done. We recommend that the Associate Administrator for Emergency Operations take the following actions:

1. Expedite the issuance of DOE Order 150.1, "Continuity Programs," which includes a requirement for a pandemic plan at all DOE/NNSA facilities and operations and mandatory training requirements;
2. After DOE Order 150.1 is issued, ensure that all entities complete a pandemic implementation plan; and,
3. Coordinate with the Office of the Chief Information Officer to ensure that DOE conducts a social distancing drill (e.g., use of teleworking, limited use of mass transit, and restrictions on meetings and gatherings) to test its ability to perform mission-essential functions while minimizing person-to-person contact.

We recommend that the Chief Health, Safety and Security Officer take the following actions:

4. Ensure that Headquarters offices and their respective sites coordinate an agreement with State or U.S. Department of Health and Human Services officials regarding the receipt of vaccines and antivirals during a pandemic; and,

-
5. Expedite appointments to all Monitoring Team positions, including the Monitoring Team Medical Officer, in order to fully implement pandemic planning.

We recommend that the Director, Office of Human Capital Management, take the following actions:

6. Develop and institutionalize a corporate process for all DOE/NNSA facilities, including Headquarters, to identify and report employees who would be unable to report to work during a pandemic; and,
7. Develop a written procedure for the operation of Headquarters health clinics during a pandemic.

MANAGEMENT COMMENTS

In comments on a draft of this report, management generally concurred with our findings and recommendations. We have included management's comments in their entirety at Appendix D. The comments from HSS and Human Capital included corrective action plans; however, the NNSA comments did not include a corrective action plan.

Specific to our recommendation that NNSA's Associate Administrator for Emergency Operations coordinate with the Chief Information Officer to conduct a DOE social distancing drill, NNSA management acknowledged the appropriateness of a social distancing drill, but considered such a drill to be problematic to implement. NNSA management considered it to be more appropriate to elevate the recommendation to the Deputy Secretary to ensure Department-wide participation.

INSPECTOR COMMENTS

In general, we found the management comments to be responsive to our findings and recommendations, and based on technical comments received, we modified the report accordingly. However, due to the lack of a corrective action plan from NNSA, as required by DOE O 221.3, "Establishment of Management Decisions on Office of Inspector General Reports," a management decision from NNSA is required.

Regarding NNSA's comment about conducting a DOE-wide social distancing drill, we note that on November 6, 2006, the Deputy Secretary of Energy notified all Department elements via a memorandum that he had approved the transfer of management of DOE's Continuity of Government Program from HSS to NNSA's Office of Emergency Operations. We also note that the

memorandum stated that all elements were to give the NNSA Continuity Operations Program Manager their full cooperation because these programs were critical in ensuring DOE's ability to perform its mission-essential functions in the event of a significant disruption. Thus, we believe it is clear the Office of Emergency Operations has the authority to conduct social distancing drills.

Appendix A

SCOPE AND METHODOLOGY

The majority of field work for this review was completed between May and July 2007. However, several data points were updated as of October 11, 2007. Our review included interviews with DOE, NNSA, and contractor officials. We also interviewed U.S. Public Health Service officials regarding DOE's service contract covering the Headquarters medical clinics. We reviewed pertinent policies, procedures, directives, and regulations.

As part of our review, we evaluated implementation of the "Government Performance and Results Act of 1993" in the context of activities included in our review. We did not identify any performance measure issues regarding DOE's pandemic influenza planning.

This inspection was conducted in accordance with the "Quality Standards for Inspections" issued by the President's Council on Integrity and Efficiency.

Appendix B

Status of Pandemic Influenza Plans as of June 1, 2007

Chart 1 - DOE/NNSA Entities that Submitted Final or Draft Pandemic Influenza Plan

DOE/NNSA HQ Staff and Support Offices

1. Chief Financial Officer
2. Economic Impact and Diversity
3. Environmental Management
4. Fossil Energy (Draft)
5. General Counsel
6. Health, Safety and Security
7. Hearings and Appeals
8. Human Capital Management (Draft)
9. Inspector General
10. Intelligence and Counterintelligence
11. Management
12. Defense Programs (Draft)
13. Defense Nuclear Non-Proliferation
14. Emergency Operations (Draft)
15. Emergency Operations Training Academy
16. Management & Administration (Draft)
17. Defense Nuclear Security
18. Nuclear Energy
19. Electricity Delivery and Energy Reliability (Draft)
20. Science

DOE/NNSA Field Sites & Organizations

1. Carlsbad Field Office
2. Consolidated Business Center
3. Rocky Flats Project Office
4. West Valley Project Office
5. Moab Uranium Mill Tailings Remedial Action Site Project
6. Golden Field Office
7. National Nuclear Security Administration Service Center
8. Oak Ridge Office
9. Office of River Protection
10. Richland Operations Office
11. Portsmouth/Paducah Project Office
12. Southwestern Power Administration: Gore Maintenance Unit
13. Southwestern Power Administration: Jonesboro Maintenance Unit
14. Southwestern Power Administration: Operations and Engineering
15. Southwestern Power Administration: Springfield Maintenance Unit
16. Southwestern Power Administration: Southwest Headquarters, OK

Appendix B (continued)

Chart 2 - DOE/NNSA Entities WITHOUT a Pandemic Influenza Plan

DOE/NNSA HQ Staff and Support Offices

1. Congressional and Intergovernmental Affairs
2. Energy Efficiency and Renewable Energy
3. Energy Information Administration
4. Information Officer
5. Legacy Management
6. Naval Reactors
7. Infrastructure & Environment
8. Public Affairs
9. Policy and International Affairs
10. Radioactive Waste Management

DOE/NNSA Field Sites & Organizations

1. Ames Site Office
2. Argonne Site Office
3. Berkeley Site Office
4. Bonneville Power Administration
5. Brookhaven Site Office
6. Chicago Office
7. Fermi Site Office
8. Idaho Operations Office
9. Kansas City Site Office
10. Livermore Site Office
11. Los Alamos Site Office
12. Naval Petroleum Reserves in CA
13. Nevada Site Office
14. Y-12 Site Office
15. Pacific Northwest National Laboratory
16. Pantex Site Office
17. Pittsburgh Naval Reactors Office
18. Princeton Site Office
19. Sandia Site Office
20. Savannah River Site
21. Schenectady Naval Reactors Office
22. Southeastern Power Administration
23. Stanford Site Office
24. Strategic Petroleum Reserve Project Office
25. Thomas Jefferson Site Office
26. Western Area Power Administration

Appendix C

HIGHLIGHTS OF DOE'S PANDEMIC PLANNING

As part of DOE's interagency responsibilities, HSS represents DOE on the Federal Interagency Task Group on Vaccine Prioritization. Through participation, HSS was able to ensure the DOE security forces were identified as a high priority for receiving pre-pandemic and pandemic vaccines. HSS developed a website with pandemic information and issued a Department-wide communication to direct employees to this information. HSS initiated educational classes on pandemic influenza starting in September 2007. The classes will be available to everyone on DVD. HSS also plans to incorporate information on pandemic influenza into its next mandatory Federal Employee Occupational Safety and Health training. In addition, on September 7, 2007, the Chief Health, Safety and Security Officer issued a memorandum that stated that HSS developed a pandemic flu awareness website and requested all program offices with websites to establish a link to the HSS website.

The Monitoring Team has met on several occasions and has been coordinating with the site occupational medical directors on a monthly basis regarding DOE-wide pandemic planning and site planning with State or U.S. Department of Health and Human Services officials. The Monitoring Team has also been coordinating with Human Capital regarding employee medical training and numerous personnel issues that must be addressed in a pandemic plan. Human Capital is in the process of reviewing and revising DOE policy regarding absenteeism during a pandemic, contracts with health care providers, and Employee Assistance Programs. Further, during May 2007, under the guidance of the Continuity Program Manager, DOE conducted a continuity of operations exercise at Germantown, MD, called Exercise Pinnacle 07. The Continuity Program Manager said that the exercise identified the lack of a corporate accountability process for reporting who was not at work.


Los Alamos National Laboratory and Sandia National Laboratories have been contracted by DHS to develop pandemic influenza modeling scenarios. Further, the Bonneville Power Administration helped the North American Electric Reliability Corporation develop pandemic emergency guidelines for electric companies.



Department of Energy
Washington, DC 20585

November 5, 2007

MEMORANDUM FOR GREGORY H. FRIEDMAN
INSPECTOR GENERAL

FROM: GLENN S. PODONSKY 
CHIEF HEALTH, SAFETY AND SECURITY OFFICER
OFFICE OF HEALTH, SAFETY AND SECURITY

SUBJECT: COMMENTS FOR IG DRAFT INSPECTION REPORT:
Inspection of the Department of Energy's Pandemic Influenza
Planning (SO7IS005)

The Office of Health, Safety and Security (HSS) has reviewed and considered the comments and recommendations in the subject draft report provided by the Inspector General on October 22, 2007, and provide the following comments. HSS agrees with the general comment that considerable progress has been made in regard to pandemic planning in the Department. HSS also agrees with the report's recommendations and finds this report useful in improving the pandemic planning process; this response will only address those recommendations specifically made to HSS.

As chairman of the Biological Event Monitoring Team (BEMT), HSS has had a dual role in the development of pandemic planning. One role serves as the overall coordinator of the activities conducted by BEMT, and the other as the medical and public health experts with regard to pandemic influenza. As the coordinator for the Department's pandemic plan, HSS will continue to work with the other offices to ensure that the issues presented in the inspection report are addressed by BEMT.

The draft report reflects a topic that is complex both from an implementation and a public health standpoint. As such, while the report appears to capture the complexity of pandemic planning for the Department, there are a few areas where further clarification would be helpful. Suggested clarification can be found in Attachment A.

Recommendation 4: Ensures that Headquarters and field sites coordinate an agreement with State or CDC officials regarding the receipt of vaccinations and antivirals during a pandemic.

Management Response: At the current time, all Federal Agencies are looking for direction from the Department of Health and Human Services (HHS) regarding the ability to secure pandemic and pre-pandemic vaccines and antiviral drugs. Although 20 million doses of pre-pandemic vaccine are being stockpiled by the Federal Government,



Appendix D (continued)

pandemic vaccine can only be manufactured once the pandemic occurs. Prepandemic and pandemic vaccine will be distributed according to a prioritization plan developed by the Department of Homeland Security (DHS) and HHS (see further discussion in Attachment A). At this time, there are no clear directives that indicate how the prepandemic and pandemic vaccines will be distributed to medical care providers. HSS has brought this concern to the attention of DHS/HHS working group on vaccine prioritization on several occasions. It is anticipated that State health departments will receive vaccine, and it will be distributed within the recommended DHS/HHS guidelines. As such, HSS continues to recommend that each site medical director enter into a dialogue with their respective State health departments until guidance from HHS is announced. The Office of Human Capital Management (HC), as noted in the report, must continue to work with the contractor that provides occupational medicine services to Headquarters Federal employees to determine how vaccine will be delivered to Federal Agencies.

Recommendation 5: Expedite appointments to all BEMT positions, including the BEMT Medical Officer, in order to fully implement pandemic planning.

Management Response: A memorandum from the BEMT Chair will be sent to the heads of the Offices of Intelligence and Counterintelligence, and Science requesting that a representative to BEMT be identified and put into place immediately. Representatives from the Office of the General Counsel and the Office of Fossil Energy had been identified through the original solicitation of March 2, 2006. These individuals will be contacted to ensure that they will continue to serve in this capacity. The request for the additional standing members will be made by December 1, 2007.

The position of Headquarters Medical Officer is a difficult position to fill, as it requires that a physician have expertise beyond clinical skills and diagnostic ability. A suitable candidate must be Board Certified in Occupational Medicine and have expertise in various areas of public health, such as epidemiology and occupational exposures to radiation and various chemicals, and be able to develop policies for a corporate model of occupational health. An announcement for this position has been advertised and closed on October 5, 2007.

If you have any questions related to this response, please contact me at (301) 903-3777 or Dr. Patricia Worthington of my staff at (301) 903-5926.

Attachment

cc w/attachment:

Director, Office of Human Capital Management (HC-1)

Director, Policy and Internal Controls Management (NA-66)

Chief Information Officer (IM-1)

Appendix D (continued)

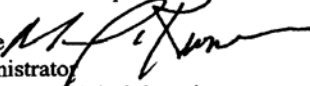


Department of Energy
National Nuclear Security Administration
Washington, DC 20585



November 13, 2007

MEMORANDUM FOR Christopher R. Sharpley
Deputy Inspector General
for Investigations and Inspections

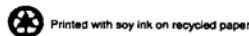
FROM: Michael C. Kane 
Associate Administrator
for Management and Administration

SUBJECT: Comments to Draft Report on Pandemic Influenza
Planning; S07IS005; 2006-31085

The National Nuclear Security Administration (NNSA) appreciates the opportunity to review the Inspector General's (IG) draft report on Pandemic Influenza Planning. We understand that the IG conducted this inspection because the Deputy Secretary has required all elements to develop pandemic influenza plans and that the IG wanted to determine if all have taken appropriate and timely actions regarding pandemic influenza planning.

NNSA generally agrees with the report and the corresponding recommendations. We do offer the following comments:

1. All references to Continuity of Operation Plan Coordinator or COOP Coordinator should be changed to Continuity Program Manager.
2. Under "ATTENDANCE PROCESS" - the second paragraph, first sentence - Suggest rewording to "...that during the May 2007 continuity Exercise Pinnacle 07, DOE...."
3. Page 8 - Second Paragraph last sentence states "He further said that the related.....social distancing drill. Recommend it states: He further said that the related.....require the department to perform drills which telework would be included.
4. Page 9 - The "RECOMMENDATIONS" for the Associate Administrator for Emergency Operations should be rewritten as follows:
 - Expedites the issuance of the DOE Oder 150.1, "Continuity Programs" which includes a requirement for a pandemic plan for all DOE/NNSA Facilities and operations; and



Appendix D (continued)

- Once DOE Order 150.1 is issued, ensure that all entities complete a pandemic implementation plan and
 - Coordinates..... [NNSA acknowledges that this recommendation is appropriate but believes that the implementation—the conduct of a teleworking drill—is a bit problematic. Equally, NNSA notes that it is more appropriate for the Deputy Secretary to ensure that a teleworking drill occur than for the Associate Administrator to ensure that the entire Department participate in a teleworking drill.]
5. Appendix B Chart 2 - Delete “Science” (DOE/NNSA HQ Staff and Support Offices #12); and Add “Science” to Appendix B Chart 1 because it does have pandemic planning, but it is embedded in the plan
 6. Appendix B Chart 2 - Delete “Health, Safety and Security” (DOE/NNSA HQ Staff and Support Offices #4); and Add “Health, Safety and Security” to Appendix B Chart 1.

Should you have any questions regarding this response, please contact Richard Speidel, Director, Policy and Internal Controls Management.

cc: Joseph Krol, Associate Administrator for Emergency Operations
Frank Russo, Senior Advisor for Environment, Safety and Health
Karen Boardman, Director, Service Center

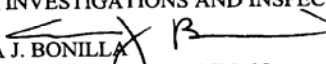
Appendix D (continued)



Department of Energy
Washington, DC 20585

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MEMORANDUM FOR CHRISTOPHER R. SHARPLEY
DEPUTY INSPECTOR GENERAL
FOR INVESTIGATIONS AND INSPECTIONS

FROM SARA J. BONILLA 
DIRECTOR, OFFICE OF HUMAN
CAPITAL MANAGEMENT

SUBJECT Draft Report on the Inspection of "Department of Energy's
Pandemic Influenza Planning"

The following represents the Office of Human Capital Management's comments on the facts, conclusions, and recommendations presented in the October 19, 2007 Draft Report on the Inspection of "Department of Energy's Pandemic Influenza Planning." The Office of Human Capital Management (HC) agrees that pandemic planning is very important and has taken an active role in the Department's planning and implementation efforts. It is important to note, however, that the White House Homeland Security Council checklist referenced in the draft report serves as an excellent aid in evaluating an agency's pandemic plan and preparation, but did not serve to establish requirements. Agencies could indicate that an item was not applicable in whole or in part and explain why. We agree that the document was appropriate for the IG review to evaluate DOE's program and status of preparations.

The Office of Human Capital Management concurs with the two recommendations presented in the report that are directed to this office:

1. Develop a corporate process for all DOE and NNSA facilities, including Headquarters, to identify and report employees who would be unable to work during a pandemic.

The Office of Human Capital Management has completed work along this line that is not reflected in the draft report. This office developed a corporate personnel accountability process in December 2005. However, it was not included in the DOE COOP Plan that was being finalized at that time. Subsequently, HC continued work with the DOE COOP Manager to institutionalize this process. HC Coordinators asked all COOP Coordinators to utilize those forms as part of COOP exercises so that they could be tested and revised as necessary. Those forms were subsequently updated following these exercises and sent to the DOE COOP Manager on September 26, 2007, once the Office of General Counsel concurred. The COOP Manager then distributed them to COOP Coordinators DOE-wide. Full implementation will be realized when these documents are included in the next DOE COOP Plan update. A corporate telephonic call-in process that the DOE COOP Manager wants established is being researched and evaluated.

2. Develop a procedure for the operation of the Headquarters health clinics during a pandemic.

The Office of Human Capital Management is currently updating its Continuity Plans and will add language to the Pandemic section relating to the operation of the Headquarters health clinics during a pandemic.

If you have any comments or questions on these comments, please contact Mr. Bruce Murray on 202-586-3372 or Mr. Alan Perry on 202-586-4484.



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