

Highlights of GAO-10-73, a report to the Chairman, Committee on Homeland Security, House of Representatives

Why GAO Did This Study

The current H1N1 pandemic highlights the threat posed to our nation by an influenza pandemic. The previous administration's Homeland Security Council (HSC) issued the Implementation Plan for the National Strategy for Pandemic Influenza (Plan) in May 2006 to help address a pandemic. GAO was asked to (1) determine how the HSC and responsible federal agencies monitor the progress and completion of the Plan's action items; and (2) assess the extent to which selected action items have been completed. To do this, GAO interviewed officials from the HSC and the six federal agencies responsible for implementing most of the Plan, and analyzed a random sample of 60 action items. While this report does not assess the response efforts for the H1N1 pandemic, GAO continues to monitor the outbreak and the federal response.

What GAO Recommends

GAO makes recommendations to the HSC related to the Plan and any future updates, including developing a monitoring and reporting process for action items intended for nonfederal entities, identifying the types of information needed to carry out the responserelated action items, and improving how completion is assessed. The Principal Deputy Counsel to the President stated that the administration will consider GAO's recommendations. The HSC also provided technical comments. Comments from other agencies are discussed in the report.

View GAO-10-73 or key components. For more information, contact Bernice Steinhardt at (202) 512-6543 or steinhardtb@gao.gov.

INFLUENZA PANDEMIC

Monitoring and Assessing the Status of the National Pandemic Implementation Plan Needs Improvement

What GAO Found

To oversee agencies' progress in implementing the Plan's action items, the HSC, which is supported by the White House National Security Staff in this administration, convenes regular interagency meetings, asks agencies for summaries of progress; and leads the interagency process that monitors the progress of the Plan. Officials from the six agencies stated that they monitor action items tasked to more than one agency by selecting one or two agencies to report a consolidated summary of progress, approved by each responsible agency, to the HSC. However, neither the HSC nor the agencies monitor or report on the 17 action items intended for nonfederal entities, including, for example, action items asking state, local, and tribal entities to ensure their preparedness plans address mass immunization, even though the information may have been available from other sources, such as the interagency review of state pandemic plans led by the Department of Health and Human Services. In addition, the Plan does not describe the types of information needed to carry out the Plan's response-related action items, although agencies may have operational plans or other existing guidance that would provide this information.

The HSC reported in October 2008 that the majority of the 324 action items were designated as complete. However, GAO's review of 60 action items found that it was difficult to determine the actual status of some of the 49 designated as complete. All of the action items reviewed have both a description of activities to be carried out and a measure of performance, which the HSC stated that it used to assess completion. However, for more than half of the action items considered complete, the measures of performance do not fully address all of the activities contained in their descriptions. While the HSC's progress summaries sometimes corrected for this by either referring to activities in the action item's description or some other information not reflected in either the measure of performance or description, future progress reports would benefit from using measures of performance that are more consistent with the action items' descriptions.

The Plan is predicated on a type of pandemic different in severity and origin than the current H1N1 pandemic, but it is serving as the foundation for the response to the outbreak, supplemented by an additional plan tailored specifically to the characteristics of the H1N1 pandemic. Nevertheless, the *National Strategy for Pandemic Influenza* and Plan will still be needed for future events as most of the action items in the Plan were to be completed by May 2009. As recommended in earlier GAO work, but not yet implemented, the Plan should be updated to take into account certain missing elements and lessons learned from the H1N1 pandemic; the update should also address the monitoring and assessment improvements GAO identified in this report.