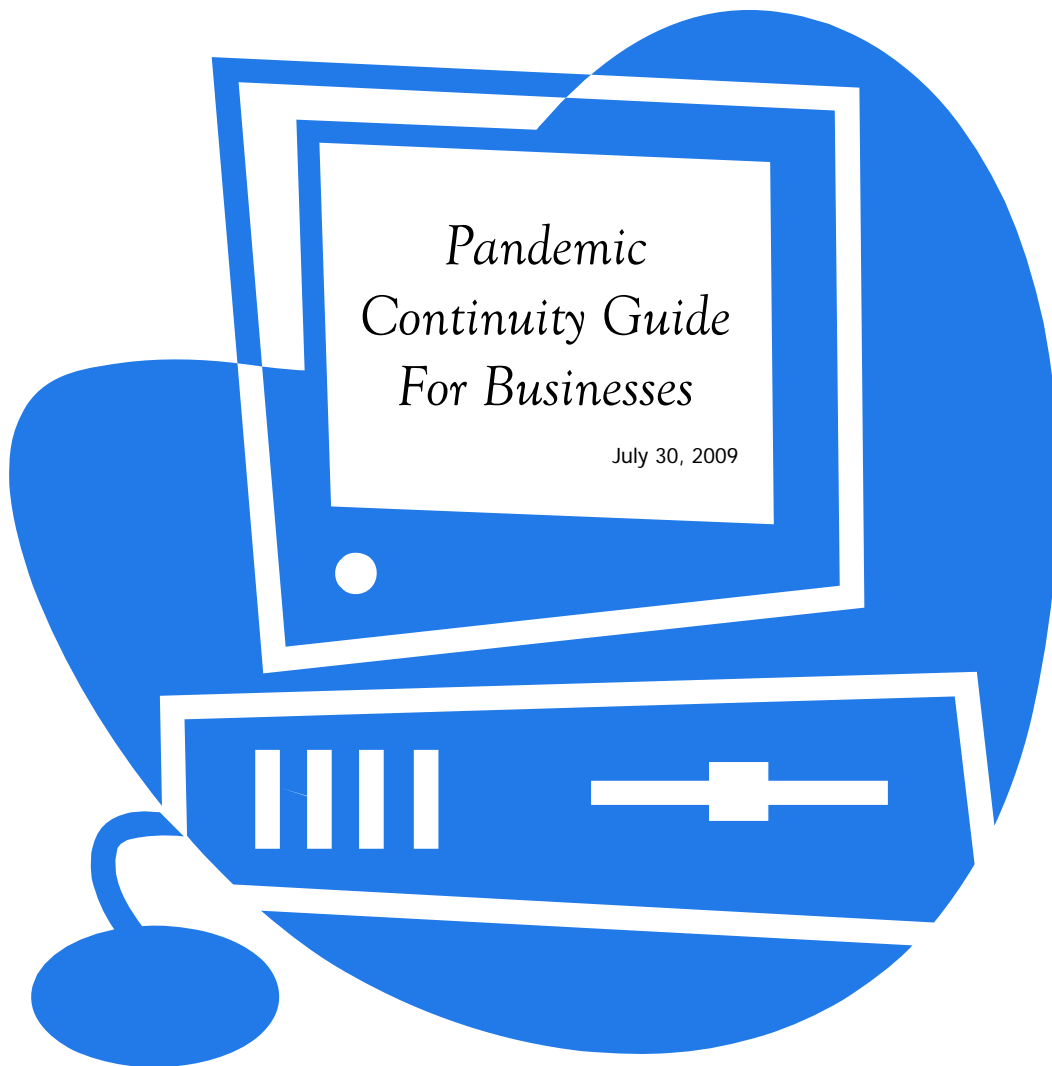


*Keeping communities and businesses going in a  
pandemic event*



Made available to Region 2 Businesses by  
The Regional Water Authority, The Milford Health Department, The Milford Bank and The Milford Chamber of Commerce.

*Materials modified from San Francisco Department of Public Health, Communicable Disease Control and Prevention Section as well as best practices in business Pandemic Flu planning from around North America.*

## **Use of this Guide and Template**

Update: August 1, 2009

The Pandemic Continuity Guide for Businesses was written in 2007 to provide guidance for pandemic flu preparedness. The document was completed before the current strain of H1N1 was reported in April 2009. Although H1N1 influenza has been named a pandemic by the World Health Organization (WHO), we are unable to determine the severity of the strain come fall. The guide provides a general basis of preparedness techniques for pandemic influenza. Although this guide will provide direction in preparing for the fall, H1N1 is a new strain of influenza, and information is being updated and changing regularly. It is important to be aware that this is a new influenza strain, and details regarding H1N1 are still being determined, but preparation can begin now with the assistance of this guide.

### Use of this Guide:

The pandemic influenza planning template has been developed to assist businesses evaluate critical issues related to pandemic influenza and create comprehensive pandemic flu plans. This guide is intended for businesses of any size and may be reviewed by the critical infrastructure of the organization adapting the document. This group may include Administrative, Human Resources and Security personnel as well as any other employees who participate in emergency planning for the organization.

The content within the template is a launching point. It will be necessary to adapt the text to create a final document that accurately represents the organization. The flexible guidance of this template insures that sections may be added or omitted according to the organization's needs.

Throughout the template, there are "Tips", things to "Consider", and other guidance. These notes should assist the organization's planners in developing a comprehensive plan and can be easily erased by highlighting the text and pressing delete.

The annex will also be a critical component of the organization's plan. The annex contains detail on how the organization will operationalize key activities. Examples and worksheets are provided to help develop this information. Also included are sample messages and briefings for employees.

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# Glossary

<b>Avian influenza</b>	Avian influenza, also referred to as bird flu, is a disease of birds (e.g. ducks, chickens). This disease is not necessarily the cause of a future human pandemic. Although it is primarily a disease of birds, a small number of people have also been infected after having close contact with birds. Also see influenza, seasonal influenza, and pandemic influenza.
<b>Chemoprophylaxis</b>	An infection control measure whereby antimicrobial, including antiviral, medications are taken by a healthy individual to prevent illness before or after being exposed to an individual with an infectious disease (e.g. influenza).
<b>Contact</b>	A contact is a term used to refer to someone who has been in close proximity with an individual who is, or is suspected of being, infected with an infectious disease like influenza.
<b>H1N1</b>	H1N1 is a new influenza virus causing illness in people; once referred to as “Swine Flu”.
<b>H5N1</b>	H5N1 is a subtype of flu virus called the “avian influenza”.
<b>Hand hygiene</b>	Hand hygiene refers to the cleaning of ones hands. This is usually done with soap and water, hand sanitizing gel or wipes. To kill an influenza virus, hands should be washed with soap and water for 20 seconds or, if soap and water aren’t available, hand sanitizing gel or wipes with an alcohol content of at least 60% for 10 seconds.
<b>Human-to-human transmission</b>	Human-to-human transmission refers to the ability of an infectious disease to be passed continuously from one person to another. Some viruses can be transmitted between animals (animal-to-animal), some can be transmitted from animal-to-human (and vice versa), and some can be transmitted from human-to-human.
<b>Infection control</b>	Infection control is a broad term used to describe a number of measures designed to detect, prevent, and contain the spread of infectious disease. Some measures include hand washing, respiratory etiquette, use of personal protective equipment (PPE), prophylaxis, social distancing, and in severe circumstances, isolation and quarantine.
<b>Infectious disease</b>	An infectious disease, or communicable disease, is caused by the entrance of organisms (e.g. viruses, bacteria, fungi) into the body which grow and multiply there to cause illness. Infectious diseases can be transmitted, or passed, by direct contact with an infected individual, their discharges (e.g. cough), or with an item touched by them.
<b>Influenza</b>	Influenza is a viral disease that causes high fever, sore throat, cough, malaise and muscle aches. It usually affects the respiratory system but sometimes affects other organs. It is spread by infectious droplets that are coughed or sneezed into the air. These droplets can land in the eyes or mouth or be inhaled into the lungs. Infection can also occur from contact with surfaces contaminated with infectious droplets and respiratory secretions. Also see seasonal, avian, and pandemic influenza.
<b>Isolation</b>	Isolation is a method of separating people who have been exposed to, and are showing

physical symptoms of a specific disease. Those identified are asked to remain in one place (e.g. home, hospital), away from the public, until they are no longer infectious.

<b>Pandemic influenza</b>	A pandemic influenza, or pandemic flu, occurs when a flu virus causes serious illness in the majority of people exposed. This severe flu targets the healthy population as well as those traditionally susceptible to seasonal flu, such as children and those over 65 years old. Also see influenza, seasonal influenza, and avian influenza.
<b>Personal Protective Equipment (PPE)</b>	PPE is specialized clothing or equipment worn to protect someone against a hazard including an infectious disease. It can range from a mask or a pair of gloves to a combination of gear that might cover some or all of the body.
<b>Quarantine</b>	A quarantine is a protective measure used when people who have been exposed to a disease, but appear healthy, are asked to remain in one place, away from the general public, until it can be determined that they have not been infected.
<b>Respiratory etiquette</b>	Respiratory etiquette is a technique to minimize the spread of a disease: Healthy and sick people should sneeze or cough into the inside of their elbow and cover their nose and mouth with a tissue when blowing their nose and then put the used tissue in the trash to prevent the spread of germs.
<b>Seasonal influenza</b>	Seasonal influenza, commonly referred to as the flu, is an infectious disease. The influenza virus is one that has the ability to change easily; however, there is usually enough similarity in the virus from one year to the next that the general population is partially immune from previous infection or vaccination. Each year experts monitor the influenza virus and create a new vaccine to address changes in the virus. For this reason people are encouraged to get a flu shot each year. Also see influenza, avian influenza, and pandemic influenza.
<b>Social distancing</b>	Social distancing is an infection control strategy that includes methods of reducing the frequency and close contact between people to limit the spread of infectious diseases. Generally, social distancing refers to the avoidance of gatherings with many people.
<b>Student dismissal</b>	This term replaces the more general “ <i>school closure</i> ”. While students may be sent home for an extended period of time, it may be necessary to maintain the functioning of the school facilities and/or teacher/administrator presence for distance learning purposes, emergency usage of schools for supply distribution, for vaccination or antibiotic dispensing clinics, or other special circumstances.

# 1. Purpose & Objectives

The primary purpose of the Pandemic Influenza Business Continuity Plan is to enable the [Organization] to respond effectively and efficiently to ensure that essential operations are maintained during an influenza pandemic.

Our [Organization's] objectives during a local pandemic influenza are the following:

1. Reduce transmission of the pandemic virus strain among our employees, customers/clients, and partners.
2. Minimize illness among employees and customers/clients.
3. Maintain mission-critical operations and services.
4. Minimize social disruptions and the economic impact of a pandemic.

## 2. Supporting Plans

The [Organization] has created several plans addressing emergency response and recovery. The Pandemic Influenza Business Continuity Plan will be implemented in conjunction with the following plans:

1. [Insert plan name]
2. [Insert plan name]
3. [Insert plan name]
4. [Insert plan name]

## 3. Overview & Context

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### 3.1 PANDEMIC OVERVIEW

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Severe influenza pandemics represent a serious potential threat to the public's health. Pandemics are distinct from seasonal influenza epidemics that happen nearly every year, causing an average of 36,000 deaths annually in the United States. Seasonal influenza epidemics are caused by influenza viruses which circulate globally. Over time, people develop some degree of immunity to these viruses, and vaccines are developed annually to protect people from serious illness. Pandemic influenza refers to a broad-reaching epidemic caused by a new, dramatically different strain of influenza virus, to which there is little to no immunity. The new virus strain may spread rapidly from person to person and, if severe, may cause high levels of disease and death around the world. The Centers for Disease Control and Prevention (CDC) estimates that in the U.S. alone, an influenza pandemic could infect up to 200 million people and cause between 200,000 and 1,900,000 deaths.

There are several characteristics of an influenza pandemic that differentiate it from other public health emergencies. Unlike other natural disasters, where any disruption to business service provision is likely to be infrastructure-related, disruption to business operations in the event of a pandemic is anticipated to be human and material oriented. A flu pandemic will cause not only a large number of ill people, but will cause high workforce absenteeism. Basic services, such as health care, law enforcement, fire, emergency response, communications, transportation, and utilities could be disrupted during a pandemic. Finally, the pandemic, unlike many other emergency events, could last many months and businesses might not be able to work at full capacity.

The first likely step in a pandemic situation will be to suggest social distancing, improved hygiene and respiratory etiquette to control the spread of disease. The goal would be to make the flu spread slower and have fewer new infections. The most effective strategy to accomplish this is through vaccination. However, vaccines will not be readily available at the onset of a new pandemic strain of influenza and existing antiviral medications will be in short supply. Officials will likely suggest "voluntary quarantine" as a measure to prevent the flu from spreading and only in extreme cases would health officials consider the use of mandatory isolation and quarantine to control the pandemic.

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### 3.2 ROLE OF PUBLIC HEALTH

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Under Connecticut law, once the Governor declares a Public Health Emergency, The Commissioner of Public Health "may delegate to an employee of the Department of Public Health or any local health director, as much of the authority of the commissioner described in this section as the commissioner determines appropriate. Such authorized employee or director shall act as an agent of the commissioner." A local health officer who believes a contagious, infectious or communicable disease exists within the territory under his or her jurisdiction "may order into quarantine or isolation, as appropriate, any individual, group of individuals or individuals present within a geographic area whom the commissioner has reasonable grounds to believe to be infected with, or exposed to, a communicable disease or to be contaminated or exposed to contamination or at reasonable risk of having a communicable disease or being contaminated or passing such communicable disease or contamination to other persons if the commissioner determines that such individual or individuals pose a significant threat to the public health and that quarantine or isolation is necessary and the least restrictive alternative to protect or preserve the public health." (Connecticut Public Health Emergency Response Authority, Section 3(a)).

Your jurisdiction's local health department will likely be the lead agency in coordinating city wide public health and emergency medical response and will request the activation of the city-wide Emergency Operations Center (EOC) when a unified response is necessary.

The epidemiology of the new influenza virus strain and the current situation will influence the health department’s emergency response. Specific guidance and policies, based on up-to-date intelligence, will be provided throughout each alert stage by the CT State Department of Public Health. Table 1 outlines stages of local public health pandemic influenza management strategies and *potential* activities.

**Table 1. Local Public Health Pandemic Management Overview**

Alert Stage*		Local Health Department <i>Overview of Possible Activities</i>
Yellow = Prepare	1. No new human-to-human transmissible virus	<ul style="list-style-type: none"> <li>• Finalize health department pandemic influenza plan</li> <li>• Assist city agencies to develop pandemic influenza plans</li> <li>• Enhance internal disease control surveillance</li> <li>• Educate clinicians, businesses, organizations that serve populations with special needs, and the general public</li> <li>• Send Health Advisory to clinicians</li> <li>• Assist with training of city disaster service workers</li> <li>• Stockpile materials and medications</li> </ul>
	2. Human-to-human transmissible virus identified outside local area	
Red = Respond	3. Few local cases	<ul style="list-style-type: none"> <li>• Initiate city emergency response system</li> <li>• Share real-time accurate information with city agencies and public</li> <li>• Send Health Alert with clinical care guidance to clinicians</li> <li>• Carry out disease surveillance and control activities</li> <li>• Provide infection control guidance (e.g. isolation, quarantine, social distancing)</li> <li>• Coordinate distribution of medicines and/or vaccines as available</li> </ul>
	4. Clusters of local case	
	5. Widespread infection	
Green = Recover	6. Post-pandemic	<ul style="list-style-type: none"> <li>• Resume routine operation, based on available staffing</li> <li>• Assist employees and community in recovery</li> <li>• Evaluate response and update plans</li> </ul>

\* Material resources required to carry out local operations could be limited at any stage due to international and national production shortages and disruptions in distribution systems (e.g. truck, train, aircraft).

## 4. Planning Assumptions

The following planning assumptions were used in the development of the Pandemic Influenza Business Continuity Plan:

- Time period**
- There may be less than six weeks of warning from the time the pandemic is announced before it reaches a community.
  - The time interval between alert stages may be rapid (ranging from days, to weeks, to months).
  - The pandemic may last as long as eighteen months in several waves with mortality and morbidity increasing and decreasing sporadically.
  - Waves of severe disease may last 1 to 4 months.
- Prevention & Treatment**
- A vaccine may not be available for at least 6 to 8 months after an influenza pandemic begins and supplies may be limited.
  - Antiviral medicines may not treat or protect against the pandemic influenza virus strain.
  - If effective, antiviral medications (e.g. Tamiflu, Relenza) may be in very limited supply and their distribution may occur in phases.
  - Infection control (e.g. respiratory etiquette, hand hygiene) strategies will be used to slow the spread of disease.
  - Social distancing strategies (e.g. postponing public gatherings) may be used to control the spread.
  - Isolation of ill people will be required in special circumstances.
  - Quarantine of people exposed to ill people may be implemented until it can be determined that they have not been infected.
- Staffing**
- Up to 20-50% absenteeism from work from staff, vendors, and services within the community *may* occur.
  - Absenteeism will be the result of workers becoming ill, staying home to care for children or family members, or refusing to go to work.
  - Every person who becomes ill is likely to miss a few days to many weeks of work.
  - In a severe pandemic 0.1% - 2.5% of workers who become ill may die.
- Vendors of Services/ Products**
- City services will be stressed, but will remain functional.
  - Critical goods and services provided by contractors, consultants and vendors may be erratic.
  - Communities may not be able to rely on mutual aid resources from local, state or federal agencies to support local response efforts.

## 5. PREPARE: Stage 1, 2

No New Human-to-human Transmissible Virus; New Human to human transmissible Virus outside of local area

### 5.1 AUTHORITY & PROTOCOLS

**5.1.1 Internal pandemic influenza continuity planning team.** Management should establish a team and/or coordinator for business continuity planning. The team should review existing plans or develop new continuity plans. Draft the plan that will be adopted by management. Attach in *Annex 1: Pandemic Influenza Planning Team*

#### Tip

A pandemic can affect many areas of the Organization. Consider including leaders from various sectors like health and safety, security, communications, human resources to be part of the planning team. You may need to get input from others as well including employees, legal and labor representatives, customers/clients, and vendors.

**5.1.2 Internal Authority.** Set up authorities for activating and terminating the response plan, leadership succession, emergency call-down, altering operations, communicating with internal and external groups, and other planning, response, and recovery activities. Attach in *Annex 2: Authority and Procedures*

#### Consider

Which individuals in the organization are authorized to make decisions to divert employees to essential services when absence rates threaten business continuity? Who can step in if key personnel are absent for lengthy periods?

**5.1.3 Procedures.** Set up triggers and procedures for activating and terminating the response plan, altering operations, and other planning, response, and recovery activities. Attach in *Annex 2: Authority and Procedures*

**5.1.4 Administration and logistics.** Set up a mechanism to maintain complete and accurate records to ensure a more efficient emergency response and recovery.

**5.1.5 Task force.** Work with similar organizations, partners, and vendors in planning to leverage skills and experience.

**5.1.6 Test the plan.** Test the plan with key participants using a pandemic scenario and measurable objectives to ensure that the plan is effective and realistic. Make adjustments to the plan.

#### Tip

Several types of tests, including a tabletop exercise or simulation exercise, can be conducted to find strengths and flaws in the plan.

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## 5.2 OPERATIONS ASSESSMENT

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**5.2.1 Assess essential operations.** Identify essential services and operations required to maintain them. Attach in *Annex 3: Essential Operations*

**Tip**

Remember to incorporate the needs of special populations into the preparedness plan.

**5.2.2 Assess critical inputs.** Identify critical inputs (e.g. raw materials, suppliers, sub-contractor services/products, and logistics) required to maintain business operations and review existing inventory. Attach in *Annex 7: Product and Service Vendors*.

**Consider**

What inputs are used on a daily or monthly basis? How might shortages of supplies affect operations? Consider shortages of nationally and internationally produced goods.

**5.2.3 Assess demand changes.** Assess changes in customer/client demand (increases and decreases) for services/products that may occur during a pandemic. *Annex 3: Essential Operations*

**Consider**

Behavior may change during a pandemic- people may limit their activities and choose to avoid gatherings, they may be fearful, or may be opportunistic. The agency should be prepared to meet these needs (e.g. provide services that can be accessed from home, service at off peak hours, increased security).

**5.2.4 Alternative services.** Identify alternative ways for customers/clients to access the [Organization's] products and services (e.g. expand on-line and self service options). Attach in *Annex 3: Essential Operations*

**Consider**

Can the organization alter routine practices to address the needs of customers/clients during a pandemic? You may want to extend business hours to accommodate customers/clients wanting service at off peak hours or arrange for services to be provided via phone, internet, fax, or mail to minimize the time people are in contact with others.

**5.2.5 Assess security needs.** Identify security needs that will be required for safeguarding personnel, supplies, or buildings during a pandemic.

**5.2.6 Assess financial process.** Identify ways to expedite purchases that may be necessary and unforeseen during each stage. Identify special funding authorities that will apply.

**5.2.7 Assess threshold for business continuance.** Identify and document what factors would require the temporary closure of the organization. Attach in *Annex 5: Pandemic Policies*

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## 5.3 JOB FUNCTIONS

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- 5.3.1 Essential job functions.** Identify essential job functions required to maintain operations during a pandemic if absenteeism equals 20-50%. Clearly document job actions (e.g. job action sheets). Attach in *Annex 4: Essential Job Functions*

### Consider

What are critical staff numbers and skills required to keep essential sectors of the organization running— at what level do certain operations stop? What changes in staff will be needed for expanded or diminished demand of services? Do certain systems rely on periodic physical intervention by key individuals, to keep them going?

- 5.3.2 Preparation within departments.** Create a list of departments within the business and actions to take as confirmed person-to-person cases increase. See *Annex 11: H1N1 Alert Matrix*.

- 5.3.3 Primary and alternate staff.** Assess skill needs and identify core and alternate staff to fill essential positions if absenteeism equals 20-50%. Ensure that contact information, including after hours and emergency numbers, are up to date. Attach in *Annex 4: Essential Job Functions*

### Consider

What other human resources (e.g. volunteers, retirees) could be drawn on if there is a high level of absenteeism?

- 5.3.4 Telecommuting.** Identify which job functions could be done remotely during a pandemic. Enable employees and their alternates to work from home with appropriate security and network applications. Ask designated employees to practice telecommuting to confirm operability.
- 5.3.5 Training.** Train employees how they will be expected to carry out the continuity plan. Cross-train employees so that they can fill essential job functions if needed.

### Tip

- Make sure that the plan and other key operating and emergency management information is stored in known, accessible, and shared locations.
- Hold an exercise to ensure that key staff understand how implementation will occur.

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## 5.4 PANDEMIC POLICIES

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- 5.4.1 Employee leave.** Work with human resources personnel regarding emergency personnel policies that allow for employee compensation during absences due to factors such as personal illness, family member illness, trauma, isolation, quarantines, and/or public transportation closures. See *Annex 5: Pandemic Influenza Policies*

### Consider

How will you deal with employees who have used all their vacation and sick leave? What policies will encourage the sick to stay home? How will you respond to employees who are too afraid to come to work? What about employees who have to stay home and care for ill family members? See Annex 4 for Human Resources policy brainstorming questions.

- 5.4.2. Flexible work.** Work with human resources personnel regarding emergency policies that allow for flexible worksite (e.g. telecommuting) and flexible work hours (e.g. staggered shifts, extended shifts). See *Annex 5: Pandemic Influenza Policies*.

**5.4.3. Health care.** Work with human resources personnel regarding employee access to healthcare services during a pandemic, and improve services as needed. Identify availability of internal medical and mental health consultation for emergency response. See *Annex 5: Pandemic Influenza Policies*.

**5.4.4. Management of ill employees.** Develop a policy on the management of employees who become ill. See *Annex 6: Management of Ill Employees*.

**5.4.5 Travel policies.** Prepare travel policies for possible travel restrictions. See *Annex 5: Pandemic Influenza Policies*.

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## 5.5 PRODUCT AND SERVICE VENDORS

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**5.5.1 Critical vendors.** Identify vendors of critical products and services (e.g. raw materials, suppliers, sub-contractor services/products, and logistics) required to maintain essential operations. Attach contact information in *Annex 7: Product and Service Vendors*.

**Tip**

Have the organization's supplier and service vendors contact information in one place so that any employee can initiate communication if necessary.

**5.5.2 Stockpile critical supplies.** Supplement existing inventory with sufficient critical supplies to keep essential services functioning for 7 days or more.

**5.5.3 Vendor continuity.** Discuss with product and service vendors their plan for ongoing services and/or shipments in the event of absences, shortages, or disruptions in transportation systems.

**Tip**

Suppliers may also be experiencing staff shortages. This may cause disruptions in transportation systems (e.g. truck, train, aircraft), decreases in product production, or inability of suppliers to meet demands.

**5.5.4 Alternate vendors.** Identify other businesses or organizations that can provide essential services and supplies if the regular vendor cannot. Include their contact information in *Annex 7: Product and Service Vendors*.

**Tip**

Look for geographic dispersion of vendors as some regions may be experiencing waves of illness at different times.

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## 5.6 EMPLOYEE COMMUNICATION

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**5.6.1 Information dissemination system.** Establish a communication plan (with redundancy) for providing information to staff. Identify how urgent communications (e.g. work schedules) will be relayed as well as less timely information. Attach in *Annex 8: Information Dissemination Plan*.

**5.6.2 Communication systems.** Ensure that communication systems (e.g. teleconferencing abilities, telecommuting, facsimile services, laptops, radios) are operational, interoperable with other systems, secure, and robust enough to handle increased and constant use. Build in layers of redundancy so that if failure occurs other systems can take over. Test systems regularly.

### Tip

Face-to-face communication may not be desirable at certain pandemic stages and exclusive use of communication systems may be advised. Without the ability to communicate with stakeholders, partners, and employees coordination could become impossible.

**5.6.3 Ongoing communication plan.** Develop a plan to provide regular updates to employees throughout a pandemic. Include mechanisms for developing and finalizing communications and authorizing dissemination. Plan to use multiple dissemination techniques to better ensure that employees hear the message. Attach in *Annex 8: Information Dissemination Plan*

### Tip

There may be a high level of fear, anxiety, rumors, and misinformation regarding a pandemic. Regularly sharing information is one way to reduce staff distress. Always ensure that communications are culturally and linguistically appropriate.

**5.6.4 Stage 1-2 communication.** Communicate to employees 1) general pandemic influenza information; 2) disaster service worker obligations; 3) components of the [Organization's] pandemic influenza plan; 4) how to develop a personal/family emergency plan; and 5) infection control steps taken to protect the health and safety of employees should a pandemic occur (see *Annex 9: Informational Materials*). Utilize *Annex 8: Information Dissemination Plan* to distribute information.

### Tools

English and Spanish pandemic influenza fact sheets and other materials are provided by the health department (see *Annex 9*). These can be shared with employees. As more is known about the virus, updated materials will be posted on the Connecticut Department of Health's website (<http://www.ct.gov/ctfluwatch/site/default.asp>).

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## 5.7 INFECTION CONTROL & PREVENTION

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**5.7.1 Hand hygiene and respiratory etiquette.** Provide employees with informational materials detailing strategies for stopping the spread of disease (e.g. hand hygiene, respiratory etiquette). See *Annex 9: Informational Materials*. Maintain a supply of infection control products (e.g. hand-hygiene supplies, tissues).

### Tip

- Hold training on “recognizing flu symptoms, hygiene measures, what to do if you think you are sick, and how to keep your family healthy”.
- Local health departments may provide a variety of hand washing and respiratory etiquette signs.

**5.7.2. Social distancing.** Identify ways to modify the frequency and type of face-to-face contact (e.g. telecommuting, teleconferencing, no hand-shaking, limiting shared workstations) among employees and between employees and customers/clients. Practice measures.

**5.7.3 Absenteeism.** Train supervisors to recognize symptoms of the flu and encourage staff to seek medical attention. Reinforce absenteeism as a preventive measure. Advise staff that if they have a fever, respiratory difficulties, or other flu-like symptoms, they should stay home.

**5.7.4. Personal protective equipment (PPE).** Identify personal protective equipment needs (e.g. hand-hygiene products, masks) and procure necessary items.

**5.7.5 Workplace cleaning.** Develop a protocol for cleaning work areas (standard cleaning and if someone becomes ill at the worksite) and stockpile necessary supplies. *Annex 10: Workplace Cleaning Guidelines*

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## 5.8 CUSTOMER/CLIENT COMMUNICATION

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**5.8.1 Customer/client information dissemination plan.** Establish a plan for communicating with customers/clients and the general public. Identify modalities that will be used to disseminate information (e.g. website, press releases, and brochures). Include responsibility for developing and finalizing communications and authorizing dissemination. *Annex 8: Information Dissemination Plan*

**5.8.2 Customer/client Stage 1-2 (Prepare) communication.** Inform customers/clients of the [Organization’s] Pandemic Business Continuity Plan and how regular service may change during a pandemic.

### Tip

Help customers/clients to minimize the impact of a pandemic influenza on their businesses and daily activities by letting them know what services may not be available during a pandemic.

**5.8.3 Community.** Communicate with local organizations (e.g. faith-based organizations, Red Cross, community centers) about collaborating during an influenza pandemic.

### Tip

Share best practices with other organizations, associations, and businesses in the community to improve community response efforts.

## 6. Respond: Stage 3, 4, 5

### Few Local Cases, Clusters of Cases, Widespread Infection

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#### 6.1 ACTIVATION AND AUTHORITY

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- 6.1.1 Activate Stage 3-5 (Respond).** Follow protocol for activating a stage. Alert pandemic leaders and staff of change in pandemic status and activation of Stage 3-5 of the Pandemic Influenza Business Continuity Plan. Re-familiarize leaders and alternates of their duties.
- 6.1.2 Internal briefings.** Disseminate regular briefings. *Annex 8: Information Dissemination Plan-Sample Briefings and Talking Points*
- 6.1.3 External updates.** Assign an individual to check key sources for briefings on local, national, and international pandemic flu status including: 1) Connecticut Department of Public Health ([www.dph.state.ct.gov](http://www.dph.state.ct.gov)); 2) Center for Disease Control ([www.cdc.gov](http://www.cdc.gov)); and 3) World Health Organization ([www.who.int](http://www.who.int)). *Annex 9: Informational Materials*
- 6.1.4 Review continuity plan.** Regularly review and update the pandemic business continuity protocols and procedures to ensure that new issues are addressed.

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#### 6.2 OPERATIONS

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- 6.2.1. Assess operations.** Assess 1) the ability to provide regular services with available human and material resources; 2) increases and decreases in demand of existing services; and 3) the need for new or alternative services. Reference and update *Annex 3: Essential Operations*.
- 6.2.2 Reallocate resources.** As needed, reallocate resources to provide services that are essential, in high demand, and/or are new or alternative. See *Annex 3: Essential Operations*.
- 6.2.3 Essential operations.** Suspend non-essential operations as human resources become limited and/or material resources (e.g. gasoline) must be rationed. See *Annex 3: Essential Operations*.

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#### 6.3 JOB FUNCTIONS

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- 6.3.1. Absenteeism.** Identify absent employees and job functions. Report absences (with job classification codes) to leadership. Track when ill employees will be expected to return to work.
- 6.3.2. Reassign employees.** Reassign personnel to essential or prioritized job functions and provide clear instructions for performing duties (e.g. job action sheets). See *Annex 4: Essential Job Functions*
- 6.3.3 Just-in-time training.** Provide just-in-time training or refreshers to alternate staff taking over new job functions.

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## 6.4 PANDEMIC POLICIES

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- 6.4.1. Employee policies.** Activate applicable policies per procedure (i.e. employee leave, flexible work schedules, travel, health care, management of ill employees). Notify staff of policy changes and provide with necessary claim forms. Reference *Annex 5: Pandemic Policies* and *Annex 8: Information Dissemination Plan*

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## 6.5. COMMUNICATION

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- 6.5.1 Inform employees.** Provide regular (e.g. daily, weekly, bi-weekly) updates to staff on pandemic status and any applicable policy changes, infection control measures, job reassignments, illness reporting etc. that apply during the stage. Utilize *Annex 8: Information Dissemination Plan*.

**Tip**

Communicate regularly with staff to promote confidence in personal safety in the workplace. Throughout the event, updated informational materials will be provided by the Local Health Department, CT DPH and the CDC.

- 6.5.2 Inform product and service vendors.** Inform suppliers and service vendors of any change in supply/service needs. Utilize *Annex 7: Product and Service Vendors*.
- 6.5.3 Inform customers/clients.** Inform customers/clients of any changes to services or products. Utilize *Annex 8: Information Dissemination Plan*.
- 6.5.4 Communication system.** Activate and ensure that communication systems (e.g. teleconferencing, telecommuting, facsimile services, radio, internet) are in working order.

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## 6.6 INFECTION CONTROL

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**6.6.1. Infection control information.** Disseminate information to staff on how to prevent infection at home and at work (e.g. hygiene measures, social distancing). Utilize *Annex 8: Information Dissemination Plan* and *Annex 9: Informational Materials*.

 **Tip**

Post hygiene notices at entrances, washrooms, hand washing stations, and public areas.

**6.6.2 Infection control products.** Ensure that supplies of hygiene products (e.g. soap and/or hand sanitizer, hand towels) are available. See *Annex 10: Infection Control*.

**6.6.3 Personal Protective Equipment (PPE).** Follow Connecticut Department of Public Health guidance regarding PPE use. Employees that routinely use PPE to perform their everyday job should continue to do so until notified otherwise. See *Annex 10: Infection Control*.

**6.6.4. Social distancing.** Review recommendations regarding activation of social distancing strategies (e.g. telecommuting, teleconferences). See *Annex 10: Infection Control*.

**6.6.5 Workplace cleaning.** Arrange for appropriate office sanitation and immediate sanitation of work stations where staff report illness. See *Annex 10: Infection Control*.

 **Tip**

Gain staff and customer/client confidence by maintaining a healthy workplace.

**6.6.6 Illness notification.** Notify employees who they must inform if they become ill.

**6.6.7 Illness reporting protocol.** Follow the protocol for managing staff who become ill at work. Keep records of affected staff. See *Annex 6: Management of Ill Employees*.

**6.6.8 Return to work.** Activate process for employees who have been ill to return to work.

## 7. Recover: STAGE 6

### Post Pandemic

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#### 7.1 ACTIVATION

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- 7.1.1 Activate Stage 6 (Recovery).** Follow protocol for activating Stage 6 (Recovery). Alert leaders and staff to change in pandemic status and return to operations as normal.

**Tip**

Recovery from an influenza pandemic will begin when it is determined that adequate supplies, resources and response systems exist to manage standard ongoing activities without continued assistance from pandemic response systems.

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#### 7.2 OPERATIONS

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- 7.2.1. Assess operations.** Assess the impact of the pandemic on the [Organization's] operations, personnel, customers/clients, partners, and vendors.
- 7.2.1. Normal operations.** Manage the return to routine operations as based on human and material resources.
- 7.2.3. Community recovery.** Identify community recovery needs and provide assistance.

---

#### 7.3 PROCESS ASSESSMENT

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- 7.3.1. Conduct evaluation.** Conduct an internal after action evaluation of the [Organization's] pandemic response.
- 
- 7.3.2. Update plans.** Update the Pandemic Influenza Business Continuity Plan and other emergency response plans as appropriate.

---

#### 7.4. COMMUNICATION

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- 7.4.1 Employee communication.** Notify employees about change in pandemic status, return to business as usual and any applicable policy changes. Utilize *Annex 8: Information Dissemination Plan*.

**Tip**

Ensure that employees have access to mental health services well after disease has dissipated.

- 7.4.2. Product and service vendor communication.** Notify product and service vendors of return to operations as usual. Utilize *Annex 8: Information Dissemination Plan*.
- 7.4.3. Customer/Client communication.** Notify customers/clients and the general public of resumption of services. Utilize *Annex 8: Information Dissemination Plan*.

# Annexes

- 1. Pandemic Influenza Planning Team**
- 2. Authority and Procedures**
- 3. Essential Operations**
- 4. Essential Job Functions**
- 5. Pandemic Policies**
- 6. Management of Ill Employees**
- 7. Product and Service Vendors**
- 8. Information Dissemination Plan**
- 9. Informational Materials**
- 10. Infection Control**
- 11. H1N1 Alert Matrix**

# Annex 1: Pandemic Influenza Planning Team

The pandemic influenza planning team responsible for developing the business continuity plan is:

Role	Name	E-mail	Phone #	Emergency #
Business Continuity Plan Coordinator				
Information Coordinator				
Technical Processes				
Human Resources				
Financial Information				
Legal Responsibilities				
Data Security				
Building Security				
Health and Safety Officer				

**Regular Meeting Times:**

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**Plan Completion Date:**

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**Plan Exercise Date:**

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## Annex 2: Authority & Procedures

The following sections outline the authority and procedures for activating and implementing the Pandemic Influenza Business Continuity Plan:

**Tip**  
The organization may already have this information as part of their overall emergency response plan. If so, attach to Annex 2.

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### LEADERSHIP SUCCESSION

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During an influenza pandemic, management of the [Organization] is delegated to the following persons in the order of succession shown below:

Leadership	Position Title	Name	Contact Method
1.Primary	_____	_____	_____
2.Backup	_____	_____	_____
3.Backup	_____	_____	_____
4.Backup	_____	_____	_____
5.Backup	_____	_____	_____
6.Backup	_____	_____	_____

If a designated individual is unavailable, authority will pass to the next individual on the list. “Unavailable” is defined as:

- The designated person is incapable of carrying out the assigned duties by reason of death, disability, or distance from/response time to the facility.
- The designated person is unable to be contacted within [#] minutes.
- The designated person has already been assigned to other emergency activities.

The designated individual retains all assigned obligations, duties, and responsibilities until officially relieved by an individual higher on the list.

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### DELEGATION OF AUTHORITY

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Ensure that all designated backup personnel are trained and have been delegated appropriate authority to carry out the assigned tasks. The backup will perform:

- All operational tasks normally performed by the person they are replacing.
- Expenditure approval consistent with established organizational procedure.
- Personnel task and work assignments.
- Policy level authority and decision making

---

### PLAN ACTIVATION

---

The jurisdiction’s Local Health Department may provide updates on the status of the pandemic influenza strain both internationally and locally. Updates on the spread of the virus (a few local cases, clusters of cases, and widespread infection) should be made regularly.

The [Organization] director or their appointee or successor activates the Pandemic Influenza Business Continuity Plan when it is necessary to manage and coordinate a response. This decision will be made in consultation with key leaders including [insert position titles].

Internal sections and employees will be notified of the activation of a stage in the Pandemic Flu Business Continuity Plan. Notification will occur through the mechanisms outlined in Annex 8, Information Dissemination Plan.

[Insert additional protocols]



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## CUSTOMER/CLIENT DEMAND CHANGES

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**Tip**

Determine how the needs of customers/clients may change and plan to deliver on those needs. If some of the products or services you normally provide would be in low demand, find ways to re-deploy assets normally dedicated to providing those, to areas that experience increased demand.

The following services/operations may be in high demand during a pandemic:

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The following services/operations may be in low demand during a pandemic:

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## REGULATORY REQUIREMENTS

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The following regulatory requirements may be difficult to fulfill during a pandemic:

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[Use the attached to assess each operation carried out by the organization and attach to Annex 3]

## ROUTINE AND ESSENTIAL OPERATIONS

1. **Daily operation:** \_\_\_\_\_

2. **Unit responsible for operation:** \_\_\_\_\_

3. **Description of operation:** \_\_\_\_\_

4. **Purpose of operation:**

- Customer/Client Service       Internal Service (e.g. administrative, financial)  
 Partner Service                       Other \_\_\_\_\_

5. **Number of staff required to perform operation on a routine basis:**

Required Staff	
Number	Job Level

6. **Supplies required to perform operation:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\* Detailed information attached in Annex 7, Product and Service Vendors

7. **Is this an essential operation if workforce absenteeism equals:**

- 20% \_\_\_\_\_  
 35% \_\_\_\_\_  
 50% \_\_\_\_\_

8. **Changes in demand that may occur during a pandemic:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

9. **Strategy for scaling back operation:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10. **Alternative ways to provide services that limit human-to-human contact:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



## Annex 5: Pandemic Policies

The following policies will be activated as part of the Pandemic Influenza Business Continuity Plan:

**Tip**  
Use the attached brainstorming questions to help develop comprehensive pandemic flu policies.

### 1. Employee Leave

[Insert policy. Include protocol and authority for activating.]

### 2. Flexible Work

[Insert policy. Include protocol and authority for activating.]

### 3. Health Care

[Insert policy. Include protocol and authority for activating.]

### 4. Travel Policies.

[Insert policy. Include protocol and authority for activating.]

[Use the brainstorming questions below to help develop pandemic flu policies.]

## **Brainstorming Questions for Developing Pandemic Flu Policies**

Page 1 of 2

### **Employees Who Become Ill**

1. Businesses may issue guidance that during a pandemic, employees with flu-like symptoms should stay home from work. If the organization chooses to follow this guidance:
  - Will a doctor's note be required? What if that is not feasible?
  - Will employees be required to take sick or vacation days?
  - What if employees have used up all their sick and vacation days?
  - Will sick employees who are required to stay home be compensated if they do not have any sick or vacation time? Will they be dismissed?
2. Will there be a special policy on returning to work after illness with an influenza-like illness? The business may request that individuals with flu-like symptoms stay in home isolation for a certain number of days (e.g. 10 days) until they are better and no longer infectious.
  - Some employees may try to hide their symptoms because they do not want to use personal leave or take a leave of absence. How will you encourage people with symptoms to stay home?
  - Some employees may feel well enough to work before the isolation period is over and may not want to use their personal leave, may not have any personal leave, and/or may be concerned about loss of wages.
3. What will be the protocol for employees who become ill at work? (Example provided in Annex 6)
4. If an employee believes he/she was infected while on the job, is Workers Comp available? Can papers be processed if it is not possible to get a doctor's note?

### **Employees Who are Quarantined**

1. If employees are quarantined, will they be required to use sick or vacation time during the period they are asked to stay home?
  - What if they do not have any sick or vacation days?
  - Will employees who are quarantined be compensated if they do not have any sick or vacation time?
2. Are there any provisions for employees to work while staying at home (without using personal leave) when they are in quarantine? Or when they are recovering from illness?

### **Employees Who Do Not Report to Work**

1. How will you deal with employees who stay home to care for ill family members?
  - Will they be required to take vacation or sick leave?
  - What if they have used up all their vacation and sick leave?
  - Will healthy employees who choose to stay home to care for someone be compensated if they do not have any personal leave time?

# Brainstorming Questions for Developing Pandemic Flu Policies

Page 2 of 2

2. If public or private schools, adult day care centers, etc. are closed and employees must stay home to care for family members will they be asked to use personal leave time?
  - What if they have none? Will they be compensated? Will they be dismissed?
3. How will you respond to employees who are too afraid to come to work because they think a co-worker or a client will infect them?
  - Will healthy employees who choose to stay home due to safety concerns be compensated if they do not have any sick or vacation time? Will they be dismissed?
4. What if an employee believes they have not been given the proper personal protective equipment (e.g. gloves, masks) to keep them from becoming infected and refuses to come to work?
5. What if the stockpile of personal protective equipment runs out. How will you cope with employees who do not want to work without it?

## **Flexible work**

1. Are there policies that allow for flexible worksites (e.g. telecommuting) and flexible work hours (e.g. staggered shifts, extended shifts)?
2. Is there a policy on how “non-essential workers” can be re-assigned for other “essential” duties in other departments?
3. Will policies for “essential workers” differ from those for “non-essential workers”?
4. Will individuals who are more at risk (e.g. immuno-compromised) for severe illness or death from the flu have special assignments in non-direct contact areas that are different from workers who are not considered high risk groups?

## **Health care at work**

1. Will workers have access to medical and mental health services?

## Annex 6: Management of Ill Employees

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### RESTRICT WORKPLACE ENTRY OF PEOPLE WITH INFLUENZA SYMPTOMS

---

During an influenza pandemic an effective way to limit the spread of disease is to ask infected individuals to remain home. During Stage 3-5 (Respond) the [Organization] will:

1. Notify employees they should not come to work if they are unwell, particularly if they are exhibiting any influenza symptoms.
2. Post notices at all workplace/facility entry points advising staff and visitors not to enter if they have influenza symptoms.
3. Advise employees to call the organization's health and safety staff if they become ill at home or work (provide a designated phone number for reporting illness).
4. Provide health and safety staff with protocol for employees who become ill (attached).
5. Ensure that ill employees have completed the required isolation period and are healthy and no longer infectious before allowing them to return to work. Note that staff who have recovered from the pandemic influenza are less likely to be re-infected and should be encouraged to return to work.

---

### PROTOCOL FOR EMPLOYEES WHO BECOME ILL

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Advise employees that if a person feels ill, or if someone observes that another person is exhibiting symptoms of influenza at work, they are to contact their manager or other designated person. Telephone communications are preferable.

Duties of health and safety staff:

1. Speak with the individual by phone.
2. Check if the employee has any influenza symptoms.
  - If the employee does not have any symptoms they are unlikely to have influenza and should be reassured and advised to call again later or to see their doctor if they are still concerned.
  - If the employee has influenza symptoms they should be treated as a "suspect influenza case."
3. Complete a Suspect Influenza Case Form (attached).
4. If the employee is at work, provide them with a surgical mask and instruct them to put the mask on immediately. (This is to help protect other staff).
  - Instruct employee to leave work. If possible, public transportation should be avoided. If public transportation is unavoidable, instruct the employee to keep the mask on and cough or sneeze into a tissue while traveling.
5. Advise the employee to contact a health professional. This may involve phoning the person's normal doctor or a specially designated center to seek advice.
6. Advise the employee on how long to stay away from work (the Connecticut Department of Public Health website, [www.dph.state.ct.us/](http://www.dph.state.ct.us/), will post isolation guidance).
7. Have the employee's work station cleaned and disinfected as indicated in *Annex 10: Infection Control*
8. Local Health Department may ask employers to 1) identify contacts (once an employee is suspected to be infected); 2) advise contacts that they have been in contact with a person suspected of having influenza; and/or 3) ask contacts to go home, and stay home until advised otherwise.

9. Advise supervisor and human resources of employee absence and need for cover.
10. Check on the employee during his/her absence from work.
11. Encourage employees to return to work once they have recovered.

## SUSPECT INFLUENZA CASE FORM FOR MANAGEMENT OF STAFF WHO BECOME ILL AT WORK

*Details of affected employee*

<b>Name:</b>	<b>Date:</b>	<input type="checkbox"/> <b>Visitor</b> <input type="checkbox"/> <b>Employee</b>	<b>Date of Birth:</b>
<b>Job Title:</b>	<b>Worksite:</b>	<b>Location of Isolation:</b>	
<b>Address:</b>			
<b>Telephone no:</b> _____ (Work) _____ (Home) _____ (Other)			
<b>Symptoms noticed:</b>			
<input type="checkbox"/> <b>Fever</b> <input type="checkbox"/> <b>Headache</b> <input type="checkbox"/> <b>Dry cough</b> <input type="checkbox"/> <b>Cold</b> <input type="checkbox"/> <b>Body aches</b> <input type="checkbox"/> <b>Fatigue</b> <input type="checkbox"/> <b>Other:</b> _____		<b>Time of fever on-set:</b> _____ <b>Time of isolation:</b> _____ <b>Date expected to return to work:</b> _____	
<i>* Symptoms and isolation periods will be updated by your Local Health Department as information becomes available following the emergence of a pandemic influenza virus strain.</i>			
<b>Where referred:</b>			
<b>Notes:</b>			

Details of Reporter

<b>Name:</b>
<b>Job title:</b>
<b>Telephone no.:</b> _____ (Work) _____ (Home) _____ (Other)





## Annex 8: Information Dissemination Plan

Throughout Stages 1-6 the [Organization] will need to provide accurate and up-to-date information to key audiences. The information dissemination plan describes who will develop and authorize content, audiences, messages, and the information dissemination strategy. Also included are sample briefings and talking points from the Milford Health Department.

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### RESPONSIBILITY AND AUTHORITY

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#### Content Development

The following individuals and alternates will be responsible for creating and/or coordinating the development of content for communicating with employees, customers/clients, the general public, suppliers and service vendors, and partners.

Name	Job Classification	Section/Unit	Contact Information	Primary/Alternate

#### Approves Content

The following individuals and alternates will be responsible for authorizing the content and information dissemination strategy.

Name	Job Classification	Section/Unit	Contact Information	Primary/Alternate

---

### AUDIENCES

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The [Organization] will be responsible for providing information to the following audiences:

- **Employees.** Senior managers, administrative staff, field staff.
- **Product and service vendors.** See Annex 7 for product and service vendors.
- **Customers/clients/general public.** Special needs groups.
- [Insert additional audiences as appropriate]

See attached table, Modes for Communicating Pandemic Influenza to Primary Audiences.

---

### COMMUNICATION MESSAGES

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The [Organization] will provide ongoing information and guidance to the above audiences- employees, customers/clients/general public, and product and service vendors- throughout each stage. Important communication messages include:

**Stage 1-2 (Prepare)**

- General pandemic influenza information
- Components of the [Organization's] Pandemic Influenza Business Continuity Plan
- Infection control preparations taken by the [Organization]
- How to develop a personal/family disaster kit
- Where to get information during an emergency (e.g. website, telephone information line)

**Stage 3-5 (Respond)**

- Activation of Stage 3-5
- Updates on the status of the pandemic
- Policy changes
- Infection measures to be utilized at work
- Illness reporting
- Job reassignments
- Vendor product/supply needs
- Services available to the public

**Stage 6 (Recover)**

- Activation of Stage 6
- Updates on the status of the pandemic
- Job reassignments
- Policy changes

See *Annex 9: Informational Materials* for fact sheets and other communication products.

**SAMPLE EMPLOYEE LETTER#1**  
**Prevention Letter: Stage 1**

**Use this letter to help prepare employees and their families for pandemic flu – before there are human pandemic flu or bird flu cases in the U.S.**

Dear Employee,

It is important to know that at this time, there is no pandemic flu of any kind in the United States. Should a flu pandemic occur, it would be a very serious event. The best time to learn about a flu pandemic is *before* it occurs. Use the sources in this letter to keep informed. In the event of a flu pandemic, you will likely be asked to follow the guidelines below:

- Stay at home when you are sick. Consult your doctor and do not come to work ill.
- Practice good hygiene by washing your hands regularly with soap and water for 20 seconds. Teach your family to do the same.
- Cover your coughs and sneezes with tissues or by coughing into the inside of your elbow. Be sure to set a good example for your family by doing this yourself.
- Try to stay at least three feet away from people who are sick.

Enclosed with this letter is a checklist to help your family get ready for a pandemic flu outbreak. This information can also help your family get ready for other emergencies. *<Insert HHS family checklist with this letter>*

The Health Department encourages all families to get their flu immunizations this and every flu season.

**If you have questions, please contact your healthcare provider.**

**You can get more information from the [Local Health Department]**

Call [phone number].

**The federal government website with information on planning for individuals and families:**

<http://www.pandemicflu.gov>

American Red Cross

<http://www.redcross.org>

## **SAMPLE EMPLOYEE LETTER #2**

### **Initial Pandemic Flu Outbreak: Stage 3 Use this letter when the pandemic reaches the local community**

Dear Employees,

This letter will give you information about a flu outbreak in [town name]. Every year, some people get sick with the flu during the fall and winter months. This year, there is a new flu virus that is making many people in [town name] sick. So many people are sick in [town name] and the United States that health officials call it a “pandemic flu.”

Many employees at [Organization] are sick with the flu. We hope they will all get better quickly.

At this time, the health department tells us that employees who are not ill can safely come to work. The [Organization] will remain open. We will keep you updated with any important information.

To keep the flu from spreading to more people, we ask you to stay at home when you are sick. Any employee who exhibits flu-like symptoms will be sent home.

Public health officials want you to protect yourself and your family against pandemic flu. Here are some ways to stop the spread of germs and sickness:

- Stay at home when you are sick. Consult your doctor and do not come to work ill.
- Practice good hygiene by washing your hands regularly with soap and water for 20 seconds. Teach your family to do the same.
- Cover your coughs and sneezes with tissues or by coughing into the inside of your elbow. Be sure to set a good example for your family by doing this yourself.
- Try to stay at least three feet away from people who are sick.
- People who are sick should stay home from work or school and stay away from other people until they are better.
- Stay away from shopping malls, movie theaters or other places where there are large groups of people.

We are also giving you some tips about how to care for your family if they are ill.

For those employees with children: If the pandemic flu continues to spread and more students become ill, schools may close for days or weeks. The purpose of closing schools will be to keep children from getting sick. If schools are closed, children should stay at home. Begin planning now for childcare in your home.

If you have questions, please contact your healthcare provider. You can get more information from [a local health department {phone number}]

Recommendations may change during the course of a pandemic flu outbreak.

## **SAMPLE EMPLOYEE LETTER #3**

### **Expanded Outbreak: Use this letter to urge ill employees to stay home**

Dear Employees,

We wrote to you recently to tell you about a pandemic flu outbreak in our community. Here is some new information.

There are now even more employees in our [Organization] who are ill with this flu virus. Still the city health department tells us that employees who are not ill can continue to work in the office. The [Organization] will remain open. We will keep you updated with any important information.

To keep the flu from spreading to more people, we ask you to stay at home when you are sick. Any employee who exhibits flu-like symptoms will be sent home.

Public health officials want you to protect yourself and your family against pandemic flu. Here are some ways to stop the spread of germs and sickness and take care of your family:

- Stay at home when you are sick. Consult your doctor and do not come to work ill.
- Keep children who are sick at home. Don't send them to school.
- If some of the people in your home are sick with the flu, keep them away from the people who are not sick.
- If some of the people in your home are sick with the flu and you cannot see a health provider, some things you can do to help them are:
  - Have them drink a lot of liquid (juice, water)
  - Keep the ill person as comfortable as possible. Rest is important.
  - For fever, sore throat and muscle aches, in adults, use ibuprofen (Motrin) or acetaminophen (Tylenol). Do not use aspirin with children or teenagers; it can cause Reye's syndrome, a life-threatening illness.
  - Keep tissues and a trash bag within reach of the sick person.
  - Be sure everyone in your home washes their hands frequently.

Contact a healthcare provider for further advice. If the ill person is having difficulty breathing or is getting worse, contact the healthcare provider right away.

Call the [local health department {phone number}]for more information.



## Tips for coping with pandemic flu

### Plan for an extended stay at home during a flu pandemic.

- Ask your employer about how business will continue during a pandemic.
- Ask your employer if you can work from home during a flu pandemic.
- Plan for a possible reduction or loss of income, if you are unable to work or your place of employment is closed.
- Check with your employer or union about leave policies.
- Plan home learning activities and exercises. Have materials, such as books, on hand.
- Plan recreational activities that your children can do at home.

### Items to have on hand for an extended stay at home:

#### **Examples: Non-perishable foods**

- ~Ready to eat canned meats, fruits, vegetables, soups
- ~Protein or fruit bars
- ~Dry cereal or granola
- ~ Peanut butter and jelly
- ~Dried fruit, nuts, trail mix
- ~Crackers
- ~Canned juices
- ~Bottled water
- ~Canned or jarred baby food
- ~Baby formula
- ~Pet food

#### **Health and emergency supplies**

- ~Prescribed medical supplies such as glucose and blood pressure monitoring
- ~Soap and water or alcohol based hand wash
- ~Medicines for fever, such as acetaminophen (Tylenol) or ibuprofen (Motrin)
- ~Thermometer
- ~Vitamins
- ~Fluids with electrolytes, such as Pedialyte®
- ~Flashlight with extra batteries
- ~Portable radio with extra batteries
- ~Manual can opener
- ~Garbage bags
- ~Tissues, toilet paper, disposable diapers

### If someone in your home develops flu symptoms (fever, cough, muscle aches):

- ✓ Encourage drinking plenty of fluids .
- ✓ Keep the ill person as comfortable as possible. Rest is important.
- ✓ For adults with fever, sore throat and muscle aches, use ibuprofen (Motrin) or acetaminophen (Tylenol).
- ✓ Do not use aspirin in children or teenagers; it can cause Reye's syndrome, a life- threatening illness.
- ✓ Sponging with tepid (wrist-temperature) water lowers fever only during the period of sponging. Do not sponge with alcohol.
- ✓ Keep tissues and a trash bag for their disposal within reach of the patient.
- ✓ All members of the household should wash their hands frequently.
- ✓ Keep other family members and visitors away from the person who is ill.
- ✓ Contact a healthcare provider for further advice. If the ill person is having difficulty breathing or is getting worse, contact the healthcare provider right away.

For more information, call your healthcare provider or call the [local health department {phone number}] or visit the federal government's pandemic flu website: <http://www.pandemicflu.gov>

## SAMPLE TALKING POINTS FOR BUSINESS OFFICIALS: PHASES 3 & 4

- We know this is an anxious time for our community and our hearts go out to those who are ill. We are working closely with local health officials to deal with the situation and will keep employees updated with any important information.
- At this time, with the assistance of the local[insert name]Health Department, we believe employees can safely come to work and the Organization will remain open. Our thoughts are with all of our families and children who are affected.
- If pandemic flu continues to spread and more employees become ill, health officials may recommend closing the Organization for an extended period of time (for example, up to 6 weeks).
- The purpose of closing the Organization will be to decrease contact among employees and the public in order to decrease their risk of getting sick and to limit the spread of infection. If Organization is closed, employees should stay at home.
- We urge parents to plan now for the possibility of schools closing. Arrange day care, and home schooling. The purpose of closing schools will be to decrease contact among children in order to decrease their risk of getting sick and to limit the spread of infection. If schools are closed, children should stay at home.
- Families can help protect themselves and their children and prevent the spread of pandemic flu as they would colds and other flu by taking the following precautions:
  - Stay at home when you are sick. Consult your doctor and do not come to work ill.
  - Practice good hygiene by washing your hands regularly with soap and water for 20 seconds. Teach your family to do the same.
  - Cover your coughs and sneezes with tissues or by coughing into the inside of your elbow. Be sure to set a good example for your family by doing this yourself.
- Recommendations may change during the course of a flu pandemic. We will make public announcements through the media and employees can contact the Personnel hotline at (INSERT HOTLINE).
- For more information on pandemic flu and prevention, call the [local health department {phone number}]

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## MODES OF DISSEMINATION

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Information will be disseminated to audiences throughout each stage using the modes of communication described below. Multiple strategies will be used to create redundancy and ensure that intended recipients receive messages.

- **Telephone Systems.** Internal agency information line [insert telephone number], external public information line, mass voice mail message, call center/phone bank, call-down tree
- **Electronic Systems\*.** Mass e-mail message, website posting [insert web address], intranet posting, on-line chat
- **Hard copy\*.** Mailing, interoffice mail, mass faxes, notice board postings, pay check mailing
- **In person.** Meeting, presentation, training
- **Media- TV, Radio, Newspaper.** Press releases, press conferences

\* Information may be packaged in the form of letters, memos, fact sheets, brochures, newsletters, etc.

See attached:

1. Table: Modes for Communicating Pandemic Influenza to Primary Audiences.
2. Personal roster with after hours and emergency contact information. [Attach information to Annex 8]
3. Instructions for operating modes of communication (e.g. information telephone line, web postings) with key contacts and required access numbers. [Attach information to Annex 8]

[Modify table as appropriate.]

## MODES FOR COMMUNICATING PANDEMIC INFLUENZA INFORMATION TO PRIMARY AUDIENCES

Mode of Dissemination	Audience				Good for urgent communication	Strength/Weaknesses
	Employees	Partners	Customers Clients	Vendors		
<b>Telephone System</b>						
Internal Organization Emergency Information Line	✓				Yes	A voice message can be pre-recorded and updated off site. Access to the voice message can be controlled by using a PIN provided to all employees. (Good for relaying instructions on reporting to work.)
External Information Line	✓	✓	✓	✓	Yes	
Mass Voice Mail Message	✓				Maybe	Some employees may not have a designated work phone with voice mail.
Call center/phone bank	✓	✓	✓	✓	Yes	Some individuals may prefer speaking to a live person vs. a recorded message.
Call-down tree	✓				Yes	A call-down tree can be used for relaying simple and short information by phone. Each person is designated to call another once they have received the message.
<b>Electronic</b>						
Mass E-mail message*	✓				No	Some employees may not have a designated e-mail address or be able to access e-mail at home.
Website Posting*	✓	✓	✓	✓	Maybe	Not all people will have access to a computer.
Intranet Posting*	✓				No	Not all employees will have access to a computer.
On-line chat			✓			Not all people will have access to a computer.
<b>Hard Copy</b>						
Mailing*	✓	✓	✓	✓	No	Delivery may take a few days. May be costly.
Interoffice Mail*	✓					Not all employees will have a mail box for receiving interoffice mail.
Mass Faxes*		✓		✓	Yes	Database with fax numbers and mass fax system required.
Notice Board Posting*	✓		✓		Maybe	
Pay check mailing*	✓				No	All employees will receive information.
<b>In Person</b>						
Meeting/Presentation	✓	✓	✓	✓	Maybe	During some stages it may not be advisable to hold gatherings.
Training	✓				No	May take time to coordinate.
<b>Media- TV, Radio, Newspapers</b>						
Press release*	✓	✓	✓	✓	Yes	
Press conference	✓	✓	✓	✓	Yes	

\* Examples of informational content include letters, memos, fact sheets, brochures, and newsletters.

## Annex 9: Informational materials

The following informational materials are available by downloading them from the internet. Additional materials will be made available prior to, during, and after a pandemic at [www.dph.state.ct.us/](http://www.dph.state.ct.us/).

- 1. Pandemic Influenza: State of Connecticut Preparedness**  
<http://www.dph.state.ct.us/avian/av-pan.htm>  
<http://www.ct.gov/ctfluwatch>  
Tips Hotline: 866-HLS-TIPS (866-457-8477)
- 2. Pandemic Influenza Infection Control Strategies for Work & Home**  
<http://www.pandemicflu.gov/plan/business/index.html>  
<http://www.ct.gov/ctfluwatch/cwp/view.asp?a=2533&q=314886>
- 3. Personal and Family Disaster Kit**  
<http://www.pandemicflu.gov/plan/individual/index.html>
- 4. Hand washing posters**  
<http://www.pandemicflu.gov/plan/business/index.html>
- 5. Federal Business Pandemic Influenza Planning Checklist**  
<http://www.pandemicflu.gov/plan/pdf/businesschecklist.pdf>
- 6. Public Health Information Line, 2-1-1**  
The Connecticut Department of Public Health has provided material to the operators at the state's Information Line, providing the public with information about health emergencies including pandemic flu. The line also has information about diseases, their symptoms, treatment and how to prevent them.

### Other Resources

- 7. American Red Cross South Central CT Chapter, 203-787-6721**  
Offers brochures and other literature with emergency preparedness information for the general public. Also offer emergency preparedness training for groups of 20 or more people.
- 8. American Red Cross Preparedness Information, <http://www.preparenow.org>**  
An emergency preparedness website with downloadable material to help prepare for natural and man-made disasters. Information for parents and educators to help children cope with fears and anxieties related to disasters.
- 9. Connecticut Department of Emergency Management and Homeland Security**  
<http://www.ct.gov/demhs/site/default.asp>
- 10. Centers for Disease Control and Prevention. 1-800-CDC-INFO (1-800-232-4636) or 1-888-232-6348 TTY in English and Spanish**

- 11. National Center for Post Traumatic Stress Disorder, 1-802-296-6300**  
The National Center for Post Traumatic Stress Disorder is an education and research center. They have an information line that can provide you with a list of contact organizations, treatment referrals and information about assessment.
  
- 12. National Institute of Mental Health Information Center 1-866-615-6464**  
The National Institute of Mental Health Information Center can provide you with free publications and other educational material about various mental health issues including post-traumatic stress disorder.

## Annex 10: Infection Control

Safeguarding the health of employees, customers, vendors, and the public during an influenza pandemic is a key objective for the [Organization]. A variety of infection control measures, including heightened hygiene practices, social distancing, and infection control equipment may be utilized to slow the spread of disease.

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### HYGIENE

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Employees will be educated and reminded of hygiene measures that help to limit the spread of disease. These include:

- Use respiratory etiquette (e.g. cough into inside of elbow or sneeze with a tissue or cloth).
- Properly clean hands with soap and water or hand sanitizer regularly.
- Avoid direct skin to skin contact with others, such as hand shaking. Substitute hand shaking with alternatives like waving, smiling, nodding, and bowing.
- Keep work areas and home clean and disinfected.
- Stay home when ill and do not send ill children to school or day care.
- [Add additional hygiene messages as appropriate.]

Informational materials are provided in Annex 9, and can be distributed following the procedures in Annex 8, Information Dissemination Plan.

The following hygiene measures will be taken to reduce the spread of disease:

- Hand washing instructions will be posted in shared washrooms.
- Cover Your Cough reminders will be posted in waiting rooms and common areas.
- Magazines/papers will be removed from waiting rooms and common areas.
- Hand sanitizer will be available in waiting rooms and common areas.
- Tissues and trash cans will be available in waiting rooms and common areas.
- [Add additional measures as appropriate.]

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### SOCIAL DISTANCING

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The [Organization] has the ability to utilize the following social distancing strategies to reduce close contact among individuals:

**Telecommuting.** The number of employees who have the technological capability to telecommute from home and can adequately perform their primary functions from home is [insert number].

**Teleconferences.** Teleconferences *can* be held within the following units: [insert unit names]. Teleconferences *cannot* be held within the following units: [insert unit names].

**Staggering work shifts.** The number of employees who do not need to perform their work during the same time of the day and can be spread out in the 24 hours period are [insert number]. The number of employees who can work an extended number of hours in fewer days are [insert number].

**Face-to-face barriers.** The number of employees who have regular face-to-face contact with the public that can provide services behind a barrier, by telephone, etc. is [insert number]. Services that can be re-organized to be provided to the public without face-to-face contact are [insert number and type of

service]. Systems that can be put in place to minimize direct face-to-face contact with the public are [insert systems].

\* Other infection control strategies can be used to reduce the spread of disease between employees who must have face-to-face contact with others.

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## INFECTION CONTROL SUPPLIES

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Increased use of infection control supplies may be advisable during an influenza pandemic. The following infection control supplies are regularly available and may be needed by employees during a pandemic.

Supplies	No. of Employees with Access	No. of employees who may need access during a pandemic
Soap within bathrooms		
Soap within kitchen areas		
Hand sanitizer (min. 60% alcohol content)		
Paper towels		
Tissues		
Garbage bags and trash cans		
Office cleaning supplies (details below)		
Personal protective equipment		
- Gloves		
- Surgical masks		
- N95 masks		
- Other Respirators		

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## WORKPLACE CLEANING

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During a pandemic, thorough workplace cleaning measures will be required to minimize the transmission of influenza virus through hard surfaces (e.g. door knobs, sinks, handles, railings, objects, and counters). The influenza viruses may live up to 12 hours on such surfaces.

When a person with suspected influenza is identified and has left the workplace, it is important that their work area, along with any other known places they may have been, are thoroughly cleaned and disinfected. Cleaning is the removal of visible dirt or soil. It is usually accomplished by physical scrubbing using detergent and water. To disinfect, use any of the disinfectants listed in the table below and follow the manufacturer's recommendations.

Influenza viruses are inactivated by many EPA approved disinfectants including alcohol and chlorine. Surfaces that are frequently touched with hands should be cleaned and disinfected often, preferably daily. Clean the surface to remove dirt and soil with a cleaning agent and disinfect following manufacturer's recommendations (see table below). The person cleaning and disinfecting should wear a mask and gloves and should discard them afterwards. Hands must be washed or sanitized at the completion of the procedure.

## RECOMMENDED WORKPLACE DISINFECTANTS

Disinfectants	Recommended use	Precautions
<p><b>Sodium Hypochlorite</b> 1 part bleach to 100 parts of water, or 1:100 dilution. Usually achieved by ¼ cup bleach for 1½ gallons water.</p>	<ul style="list-style-type: none"> <li>• Disinfection</li> </ul>	<ul style="list-style-type: none"> <li>• Should be used in well-ventilated areas.</li> <li>• Utilize gloves while handling and using bleach solution.</li> <li>• Do not mix with strong acids to avoid release of chlorine gas.</li> <li>• Corrosive to metals and certain materials.</li> </ul>
<p><b>Alcohol</b> (e.g. Isopropyl 70%, ethyl alcohol 60%)</p>	<ul style="list-style-type: none"> <li>• Disinfection</li> <li>• Smooth metal surfaces, tabletops and other surfaces on which bleach cannot be used.</li> </ul>	<ul style="list-style-type: none"> <li>• Flammable and toxic. To be used in well-ventilated areas. Avoid inhalation.</li> <li>• Keep away from heat sources, electrical equipment, flames, and hot surfaces.</li> <li>• Allow it to dry completely.</li> </ul>
<p><b>EPA-Approved Product</b> (see product container for instructions)</p>	<ul style="list-style-type: none"> <li>• Follow directions on label</li> </ul>	<ul style="list-style-type: none"> <li>• Follow precautions on label.</li> </ul>

## Annex 11: H1N1 Alert Matrix

Department	Level 1(Cases in New England/New York)	Level 2 (Cases Reported in Local Area)	Level 3 ( Increased Cases Reported in Local Area)
Human Resources	Review medical leave policies. Develop mandatory “stay home if you’re sick” policy/Provide flu information Flu shot program funding.	Curtail all non essential company travel. Provide flu shots (if available).	Develop daily pandemic updates. Telecommute. Curtail meetings. Reduce the use of public transportation for commuting.

The Alert Matrix levels are determined by confirmed person to person cases. The matrix should be filled with actions to take during each level for departments within your business (refer to human resources as an example). Level 1 is activated when there are confirmed person to person cases in New England and New York. Level 2 is activated when person to person cases are confirmed in your area. Level 3 is activated when there is an increased frequency of confirmed person to person cases in your area. When reaching levels 2 and 3, it is important to look to your local health department for more information.