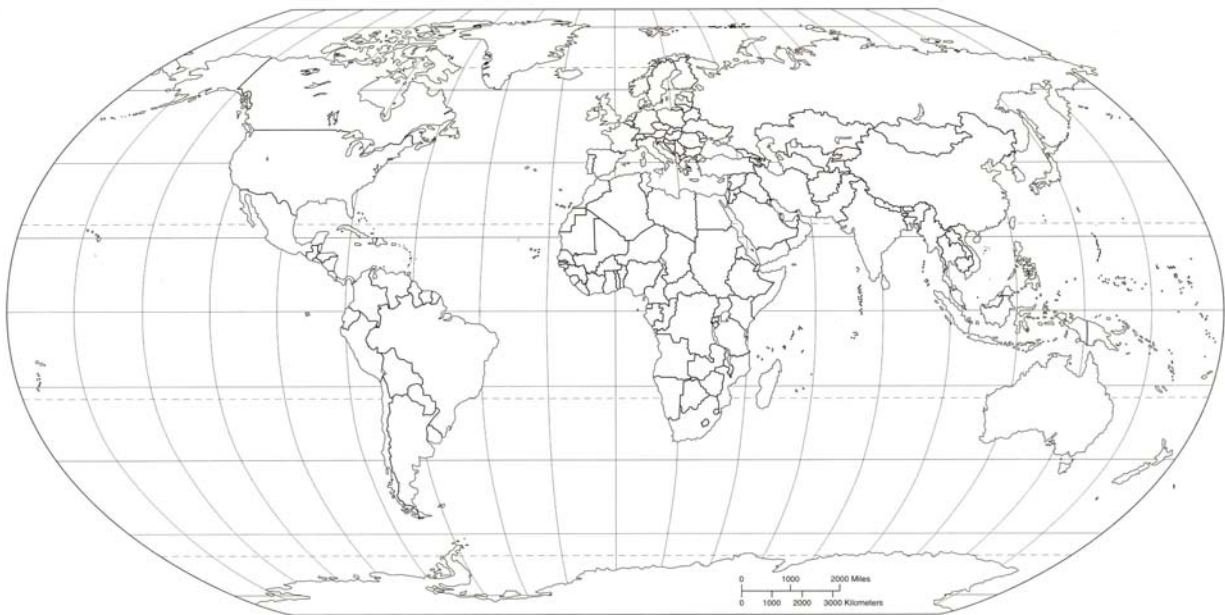


Preparation for

PANDEMIC

Influenza



**Guidance for Business
Continuity Planning**

June 2006



Disclaimer

The information in this document is not intended to cover every situation. You are advised to seek professional advice before applying any information contained in this document to your own particular circumstances, and we recommend that you always obtain appropriate professional advice on the medical issues involved.

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The information in this document was largely derived from the *INFLUENZA PANDEMIC PLANNING BUSINESS CONTINUITY PLANNING GUIDE*, October, 2005 (ISBN: 0-478-28454-3) prepared by the New Zealand government's Ministry of Health. The complete report prepared by the NZ Ministry of Health may be obtained at:

http://www.med.govt.nz/irdev/econ_dev/pandemic-planning/

Our thanks to North Central District Health Department for their work on this document.

1.0 Pandemic Flu Characteristics and Possible Impacts

A pandemic, unlike a physical disaster, has unique characteristics when compared with a more “typical” disaster. For example:

- **Widespread impact:** In all probability, the impact of a pandemic will be widespread, international, and not specific to a particular local area; therefore there may be little outside assistance available. Many business preparedness plans assume some part of an organization will be unaffected and can take up the required capacity.
- **Not a physical disaster:** A pandemic has some unique characteristics that require implementation of activities to limit contact—such as restriction of movement, quarantine, and closure of public gatherings.
- **Duration:** Scientists who have studied previous pandemics note that influenza infection comes in waves. Many people become ill and then there are only a few cases. Assuming the crisis is over, people go back to doing business as usual. Then another wave hits with many people ill. It is expected that if H5N1 evolves into a virus that can be communicated easily from person to person, as many as 35% of the workforce may be out at any given time during a two to three month period. Many business preparedness plans assume the event is short and that recovery can start immediately.
- **Notice:** It is likely there will be some advance warning from the development of the pandemic overseas, but it is always possible that any warning period may be very short. Should pandemic influenza spread to the United States, it will probably be some weeks before the full impact on workforce will be felt, although there may be some early impacts resulting from closures of schools and similar containment measures.
- **Primary effect is on staffing levels:** Unlike natural disasters where any disruption to business service provision is likely to be hardware-related, disruption to business operation in the event of a pandemic is anticipated to be mainly human-resource oriented. **It is generally advised that businesses should plan for up to 50% staff absences for periods of about two weeks at the height of a severe pandemic wave, and lower levels of staff absence for a few weeks either side of the peak. Overall, a pandemic wave may last about 8 weeks.** Note that the pandemic may come in waves of varying severity over time.

Staff absences can be expected for many reasons:

- illness/incapacity (suspected/actual/post-infectious)
- some employees may need to stay at home to care for the ill
- people may feel safer at home (i.e., to keep out of crowded places such as public transport)
- some people may be fulfilling other voluntary roles in the community; and others may need to stay at home to look after school-aged children (as schools are likely to be closed)

A pandemic may have other impacts on businesses, for example:

- supplies needed for ongoing activity may be disrupted if they are imported via air freight, rail, trucking
- similarly, availability of services from sub-contractors may be impacted (this may affect maintenance of key equipment)
- it is possible that utilities could be impacted if those agencies also experience a 25 – 50% absentee rate
- demand for services may be impacted – demand for some services may increase (i.e., internet access is a possible example); while demand for others may fall (i.e., certain types of travel may be reduced)

Using the following information, review business-preparedness plans to ensure that they are effective in the event of significant staff absences and other pandemic-related risks.

1.1 Human Resource Issues

The extent of your planning in this area will depend on the nature of your business/workplace.

Larger businesses, or those providing essential services or infrastructure, should maintain a reasonably high level of preparedness. Larger businesses may be able to include pandemic preparedness into existing business continuity plans.

Smaller workplaces, and those providing “non-essential” services, will benefit from some degree of preparedness. Planning will reduce human cost and improve business viability during and after a pandemic.

1.1.1 Deciding Whether a Workplace Should Stay Open or Close

A workplace may be required to close due to lack of staff, lack of customers, or because it presents an unacceptable level of risk to employees or others. Non-essential workers should be required to stay home and practice social distancing precautions.

Through emergency powers granted by state law, the South Central District Board of Health, through the District Director, has powers to issue Isolation and Quarantine orders if necessary to stop the spread of disease. The Director may call for cancellation of events and closing of schools, businesses, and other congregations of people. Whether you choose to keep a business open may not be your decision alone.

1.1.2 Preparing for the Possibility of a Workplace or Business Closing

It is strongly recommended that employers discuss this possibility with their staff, staff representatives, relevant union representatives, and contractors as part of their preparedness planning. This discussion should include identifying whether services can be delivered outside of the workplace in a way that does not pose any health and safety risk and implementing methods of communicating workplace closure to employees.

In the event that the employer decides, or is required to, suspend business during a pandemic, it is important that the employment conditions during the business suspension are discussed with and made clear to employees. Those discussions may include, for example, the use of vacation leave, sick leave, etc.

Clarification around this topic with your contractors in advance may be necessary if not covered under current contract agreements.

1.1.3 Keep Communication Open and Frequent

In all cases, discuss any likely impacts with employees, unions, and others that may be affected.

Whatever agreement and clarification can be achieved before a pandemic will prove a valuable investment should the emergency occur.

2.0 Business Continuity Planning for a Pandemic

The following information is generic in nature to be adapted to meet the circumstances and needs of different businesses and other organizations.

2.1 Short, Medium, and Long-Term Planning

It is not possible to predict how long a pandemic may last. There could be more than one wave of infection during a pandemic period. Each wave could typically last about eight weeks, building to a peak in week four before abating again. **It is recommended that businesses plan for up to 50% staff absences for periods of about two weeks at the height of a pandemic wave and lower levels of staff absence for a few weeks either side of the peak.**

To ensure business continuity in a pandemic, short-term planning with a health focus is essential. Succession planning (in the event of staff deaths or long-term disability during the pandemic) and back up planning is also essential. Emergency management and overall recovery is greatly facilitated if essential services are available without significant interruption.

Continuity planning for a pandemic should include:

- Identification of essential business activities (and the core people and skills to keep them running) and insurance that these are backed-up with alternative arrangements;
- Mitigation of business/economic disruptions, including possible shortages of supplies; and
- Minimizing illness in workers and customers.

Each of these items are addressed in a separate section in the following pages.

2.1.1 Influenza Manager

When planning for a pandemic, it is a good idea to identify one or more people in your organization who will be responsible for workplace health and safety. Some of the tasks the “Influenza Manager(s)” may perform include:

- Setting up a system to monitor staff who are ill or suspected to be ill in the event of a pandemic, including contacting staff who are unexpectedly absent from work – has their physician or health care provider been notified of their illness? Is someone able to care for them?
- Setting up a process to facilitate / encourage the return of staff to work once they are better or at the end of a quarantine period.
- Ensuring that your workplace has adequate supplies of tissues, medical and hand hygiene products, cleaning supplies, and masks for people who become ill at work. It may be difficult to purchase such products once a pandemic begins.

2.1.2 Medical Advisor

If your business does not already have one, it may be prudent to ensure that you have access to a physician or medical consultant for assistance and advice in the event of a pandemic.

2.1.3 Activation of Pandemic Continuity Plan

South Central District Health is monitoring illness rates throughout the district, not just for influenza, but for more than 60 communicable diseases. If the level of illness (in this case influenza pandemic) rises sufficient to raise concern, South Central District Health will communicate that concern to the public through various media outlets. When that alarm sounds, you will want to have your plan finalized to the point where it can be implemented effectively.

Before your business is impacted, communicate with staff and also provide education to people who will need additional skills to maintain essential businesses practices. Practice elements of your plan, at least discussing key points with staff so they are familiar with the document.

2.1.4 Communication with Staff

There may be anxiety regarding a pandemic, and this is likely to contribute to increased work absence and/or increased distress to staff. Some suggested ways to manage this are as follows:

- Communicate early on the possibility of a pandemic – and your organization’s preparedness to manage it.
- Discuss with staff possible health and safety issues, potential for shut down and leave arrangements if they are ill or need to look after those who are or who have been “shut out” of childcare and school, etc.
- Have a comprehensive management plan in place that is clearly communicated to staff. Ensure that communications management during the pandemic is part of the plan. Have systems in place to allow your agency to communicate in a pandemic.
- When activating your plan, provide clear, timely and pro-active communications to staff, including how your organization is handling the situation.
- Establish a “communications tree” so that people can keep in touch.

2.2 How will essential business activities be maintained?

In the event of a pandemic, it is important that core people and core skills are available to keep essential parts of your business operating.

2.2.1 Identification of Core People and Core Skills

Issues you may wish to consider include:

- What are the “essential” parts of the business?
- Who are the core people required to keep the essential parts of the business running?
- What are the core skills required to keep business running?
- Are there sufficient back ups for people and skills if there is a high level of absence?
- Are there other resources (i.e., volunteers, retirees) that could be drawn on if necessary?
- Is it possible to co-ordinate/operate your business through a “virtual war-room” – that is, remotely located, using telephone and email?
- Who are the core people required to manage the pandemic contingency plan?
- Do you have systems that rely on periodic physical intervention by key individuals to keep them going? How long would the system last without attention?

Once the core people and skills are identified, ensure that they are aware of their positions and how they will be managed in the event of a pandemic. Consider strategies for minimizing the possibility that they become ill with influenza: i.e., working from home even in early stages of a pandemic or other social distancing measures.

If working from home is not a well-established practice in your organization, you may wish to encourage it to aid familiarity and to “iron out” any computer connection/technological issues.

You may wish to have non-essential staff stay home (with appropriate pay arrangements) to minimize the number of staff who may be exposed to the influenza virus.

Make sure anyone backing up the essential staff has received training on the skills needed to fill in for someone who is ill.

2.2.2 Business Planning for Absence

Issues you may wish to consider include:

- What are critical staff numbers and skills required to keep essential sectors of the business running – at what level does business stop?
- What arrangements need to be made to minimize risk to staff?
- Who will make the decision to shut activity down when absence rates threaten safe business continuity?
- Could some, or all, of your business operations shift to having most staff work from home with little warning?

An influenza pandemic may affect regions of the United States and the world differently in terms of timing, severity, and duration. Some regions may be hit earlier, longer, or harder. Businesses with regional offices may need to consider rotating service delivery from hard hit areas to influenza-free areas, or areas that have been declared to be in a post-pandemic period. Restrictions on movement of people from region to region may be imposed. Thus, rotation of staff may be difficult.

Businesses with overseas offices, or which use services outsourced from overseas (i.e., call centers), may be disproportionately affected. Not all countries have the means to cope with a pandemic. Employees and staff contracted outside of the United States may have increased rates of illness and absence.

2.2.3 Information Management

Key operating and emergency management information will need to be stored in known, accessible and shared locations.

2.2.4 Communications

Consider communication needs and how they might be maintained with:

- other business units in your organization
- government
- key suppliers
- key customers
- key contractors

2.3 How might supply shortages affect business operations?

Supply shortages may occur due to increased demand during the pandemic (i.e., cleaning supplies, home-based services). Pandemic planning should consider the need for ensuring adequate availability of essential supplies.

Shortages may also occur due to disruptions in transportation systems or inability of suppliers to meet demands because of their own staff shortages. Some supplies travel considerable distances by truck, train, ship or aircraft and are vulnerable to any disruption. Absences of workers/drivers and other transportation staff may affect both the production and delivery of needed supplies. Supply lines may also be affected by mandated or self-imposed travel restrictions (i.e., transporters unwilling to travel through or to infected areas). Discuss with key suppliers a plan for regular shipments in the event of shortages or disruptions in transportation systems. International air movements may be disrupted in a pandemic, which may have an impact on imported goods, especially if they normally arrive in freight-holds of passenger aircraft.

2.4 How can you protect staff and visitors from getting sick?

After identifying the core people and skills to keep the essential parts of your business operating, your pandemic plan should consider how to minimize illness among staff and visitors. The main strategies include:

- Restrict workplace entry of people with influenza symptoms
- Practice good personal hygiene and workplace cleaning habits
- Increase social distancing (i.e., enable telecommuting, avoid face-to-face contact)
- Manage staff who become ill at work
- Manage staff who travel overseas
- Consider handwashing sanitizers for work areas

This section identifies some issues you may want to take into account in your plan as well as offering guidance as to how to address them.

Influenza Protection Measures

Protection measure	Where applicable
Hand hygiene, cough etiquette, ventilation	Everyone, all the time
Organizational policies	Every organization, all the time
Social distancing	Everyone, whenever practical
Protective barriers (examples)	In situations where regular work practice requires unavoidable, relatively close contact with the public
Disposable surgical mask, gowns, gloves, standard procedures	Workers in any community or health care setting who are caring for the sick (this includes first responders) Also as a possible adjunct to protective barriers
Disposable particulate respirator masks, eye protection, gloves, gowns/aprons	Health care workers participating in procedures that may generate small particles of respiratory secretions (i.e., IT tube, bronch, suctioning, nebulizer)

2.4.1 Restrict workplace entry of people with influenza symptoms

Consider putting up notices at all workplace/facility entry points advising staff and visitors not to enter if they have influenza symptoms.

Advise employees not to come to work when they are feeling ill, particularly if they are exhibiting any influenza symptoms and consult a health care provider if necessary. Educate staff about the differences in symptoms between influenza and a common cold. Workers who are ill should stay home until symptoms resolve.

Provide employees with information about how to stay well during an influenza pandemic, (i.e., by distributing the South Central District Health fact sheet at: <http://www.panflusouthidaho.org>).

In your pandemic planning, set up a process for ensuring that ill employees have completed any required quarantine period and *are healthy* before allowing them to return to work.

Note that staff who have recovered from the pandemic influenza are unlikely to be reinfected (they will have natural immunity) and should be encouraged to return to work as soon as they are well.

2.4.2 Personal Hygiene

Basic personal hygiene measures should be reinforced, and people should be encouraged to practice them to minimize potential influenza transmission:

- Cover nose and mouth when sneezing and coughing (preferably with a disposable single use tissue or coughing into the elbow)
- Immediately dispose of used tissues
- Adopt good handwashing/ hygiene practices, particularly after coughing, sneezing or using tissues
- Keep hands away from the mucous membranes of the eyes, mouth, and nose.

Ensure that adequate supplies of hand hygiene products are available. This is a high planning priority as there may be interruption to the supply or shortages of soap and hand towels. Consider purchasing hand sanitizers.

Communicate hand and personal hygiene information to staff and visitors:

- Hygiene notices should be posted in all workplace entrances, washrooms, hand washing stations, and public areas
- Use brochures, newsletters, global emails, employee notice boards, and information included with paychecks to inform your employees of the importance of hand hygiene and environmental cleaning during a pandemic.

Examples of notices can be found on the following pages. Another good source of notices and brochures is <http://www.panflusouthidaho.org>.

2.4.3 Protecting yourself and others against respiratory illness

Handwashing is the most important thing you can do to protect yourself.

- Cover your nose and mouth when coughing or sneezing
- Use a tissue and dispose of this once used in the waste
- Always wash hands after coughing and sneezing or disposing of tissues
- Keep your hands away from your mouth, nose and eyes
- Avoid contact with individuals at risk (i.e., small children or those with underlying or chronic illnesses such as immune suppression or lung disease) until influenza-like symptoms have resolved

- Avoid contact with people who have influenza-like symptoms
- Ask people to use a tissue and cover their nose and mouth when coughing or sneezing and to wash their hands afterwards

2.4.4 Workplace Cleaning

During a pandemic, implement additional measures to minimize the transmission of the virus through environmental sources, particularly hard surfaces including sinks, handles, railings, objects and counters. Transmission from contaminated hard surfaces is unlikely, but influenza viruses may live up to two days on such surfaces.

Look at other shared equipment. Do staff share a single telephone or pens, staplers, calculators, and other small office equipment? Either ask staff not to share these items or clean them with the appropriate chemicals. Have hand sanitizers available to swipe phones, etc.

Influenza viruses are inactivated by alcohol and chlorine. Cleaning of environmental surfaces with a neutral detergent followed by a disinfectant solution is recommended. Surfaces that are frequently touched with hands should be cleaned often, preferably daily.

Table 2 Workplace Cleaning Products

Disinfectants	Recommended use	Precautions
Sodium hypochlorite: 1000 parts per million of available chlorine, usually achieved by a 1 in 5 dilution of hospital grade bleach.	Disinfection of material contaminated with blood and body fluids.	Should be used in well-ventilated areas. Protective clothing required while handling and using undiluted bleach. Do not mix with strong acids to avoid release of chlorine gas. Corrosive to metals.
Granular chlorine: To be diluted as per manufacturer's instructions.	May be used in place of liquid bleach, if it is unavailable.	Same as above.
Alcohol: e.g., Isopropyl 70%, ethyl alcohol 60%.	Smooth metal surfaces, tabletops and other surfaces on which bleach cannot be used.	Flammable and toxic. To be used in well-ventilated areas. Avoid inhalation. Keep away from heat sources, electrical equipment, flames, and hot surfaces. Allow it to dry completely, particularly when using diathermy, as this can cause diathermy burns.

Remind staff not to share cups and dishes. Thoroughly wash cutlery and eating implements with soap and hot water after use.

Remove all magazines/papers from waiting rooms and common areas (such as tea rooms, kitchens). When a person with suspected influenza is identified and has left the workplace, thoroughly clean and disinfect their work area/office, along with any other known places they have been.

Among other things, planning should identify the basic hygiene practices (including hand hygiene) to be followed by cleaners, protocols for the use of personal protection equipment (if recommended by public health agencies), and methods for waste disposal.

2.4.5 Air Conditioning

Scientific and medical evidence shows that influenza may spread in inadequately ventilated internal spaces. All internal spaces should be well ventilated, preferably by fresh air via opening windows, or otherwise by properly designed and maintained air-conditioning systems.

2.4.6 Increase Social Distancing

Another strategy to protect staff is to minimize their contact with others. Crowded places and large gatherings of people should be avoided, whether in internal or external spaces.

A distance of at least three feet should be maintained between persons wherever practical. Larger distances are more effective.

Visiting of (or other contact with) unwell people should be avoided wherever practicable.

Following are suggestions on how to minimize contact:

- Avoid meeting people face to face – use the telephone, video conferencing, and the internet to conduct business as much as possible – even when participants are in the same building.
- Avoid any unnecessary travel and cancel or postpone non-essential meetings, gatherings, workshops, and training sessions.
- If possible, arrange for employees to work from home or work variable hours to avoid crowding at the workplace.
- Practice “ghost” shift changes wherever possible, with the shift going off duty leaving the workplace before the new shift enters. If possible, leave an interval before re-occupation of the workplace. If possible, thoroughly ventilate the workplace between shifts by opening doors and windows or turning up the air-conditioning.
- Avoid public transport: walk, cycle, drive a car, or go early or late to avoid rush hour crowding on public transport.
- Bring lunch and eat at desk or away from others (avoid the cafeteria and crowded restaurants). Introduce staggered lunchtimes so numbers of people in the lunchroom are reduced.
- Do not congregate in lunchrooms or other areas where people socialize. Do what needs to be done and then leave the area.
- If a face-to-face meeting with people is unavoidable, minimize the meeting time, choose a large meeting room, and sit at least one meter away from each other if possible; avoid shaking hands or hugging. Consider holding meetings in the open air if possible.
- Set up systems where clients/customers can pre-order/request information via phone/email or fax and have order/information ready for fast pick-up or delivery.
- Encourage staff to avoid recreational or other leisure classes / meetings, etc. where they might come in contact with infectious people.

2.5 Managing Staff Who Become Ill at Work

Your pandemic plan should indicate how your business would manage staff who become ill at work. One possible process is outlined below. You may wish to modify it to suit your business situation. Note that this advice is current as of April 2006. In the event of a pandemic, it is recommended that employers check South Central District Health’s website (<http://www.panflusouthidaho.org>) for the latest advice.

If a person feels ill, or if someone observes that another person is exhibiting symptoms of influenza at work, they are to contact the “Influenza Manager” **by telephone** if at all possible. Using a screening flowchart, the Influenza Manager should:

1. Avoid visiting this person if possible—manage the process over the phone.
2. Check if the employee has any of the symptoms outlined.
3. If the employee does not have symptoms like those listed, they are very unlikely to have influenza. They should be reassured but advised to call the Influenza Manager again later or to see their physician or health care provider if they are still concerned.
4. If the employee does have symptoms that match some of those listed, they should be treated as a “suspect case.” It may be helpful to have a staff influenza notification form completed, including details of any staff and/or visitors they have been in contact with. This information will permit the Influenza Manager to identify recent movements and monitor well-being during the pandemic.
5. The employee should be informed where they can find a surgical mask and instructed to wear it immediately. This is to help protect other staff.
6. The employee should leave work and immediately contact a health professional in the manner advised by South Central District Health on its website at that time. This may involve phoning the person’s normal doctor or nurse or a specially designated centre to seek further advice. The employee’s manager should be informed that they have left work.
7. The employee should, if at all possible, avoid public transport when leaving work.
8. Contact management (see section 3.6 below for further information) – it is helpful for employers to:
 - Identify contacts (once an employee is suspected to be infected)
 - Advise contacts in person that they have been in contact with a person suspected of having influenza
 - Ask contacts to go home, and stay at home until advised otherwise
9. The employee’s work station should be cleaned and disinfected.
10. Your business / Influenza Manager will need to set up a system to manage the absence and return to work of the employee and their contacts. Some issues to consider include:
 - Advice to the employee on how long to stay away from work (the South Central District Health website will have advice on this once the characteristics of a pandemic are known)
 - Decisions on the leave and cover arrangements
 - Checking on the staff member during his/her absence from work. This will facilitate treatment, contact tracing, etc., if they become ill
11. Set up a process in your plan for ensuring that:
 - The employee is healthy before allowing them to return to work
 - That they are encouraged to return to work once they are well

2.6 Contact Management

2.6.1 Contact Definition

South Central District Health currently defines pandemic influenza contacts as people who have had close physical (less than one meter/yard) or confined airspace contact with an infected person, within one to ten days of that person developing symptoms. These are likely to include family members and/or other living companions, workmates (if in close contact situations or confined airspace environments), and some recreational companions.

People who have not been in close proximity nor have shared a confined airspace with a sick person within one to ten days of that person developing symptoms are not considered to be a contact.

Epidemiological evidence from a developing pandemic may change the definition of a “contact”. Employers should check the South Central District Health website (<http://www.panflusouthidaho.org>) for updated definitions and advice should a pandemic occur.

In any circumstances, employers should urge sick staff members with influenza-like symptoms to return home immediately and contact a health professional.

As indicated in the previous section, it is helpful for employers to:

- Identify contacts (once an employee is suspected to be infected)
- Advise contacts in person that they have been in contact with a person suspected of having influenza
- Ask contacts to go home and stay at home until advised otherwise.

2.7 Staff Travel

If your staff travel overseas for business reasons, your plan will need to include consideration of their management in the event of a pandemic. For example, on declaration of a pandemic, if any staff had recently (within the last one to ten days) traveled to countries known to be affected by the disease, your business should:

- Advise the employee not to report to work for the duration specified for the disease (as of April 2006, this was ten days).
- Ask them to follow instructions on the South Central District Health website for self-checking for influenza symptoms, which may include advice to telephone (rather than visit) their medical center to seek advice immediately if symptoms occur. They should report their travel history to the treating doctor.
- Ask them to document all the people they have been in contact with since returning to the United States.
- Check on the staff member during his/her absence from work.
- Set up a process for ensuring that the employee has completed the time duration and is healthy before allowing them to return to work.

Border closures overseas may also cause disruption to travel.

2.8 Personal Protection Equipment

The following information provides the best guidance available as of April 2006.

2.8.1 Using masks

Influenza is known to be spread by droplets. These droplets usually do not travel great distances. Social distancing (maintaining a healthy distance from other people) will usually protect individuals from infection. Hand washing is also a vital link in protecting from infection. Alcohol hand sanitizers should be used when hand washing facilities are not available. The use of surgical masks can be helpful during an outbreak situation. Surgical masks may reduce transmission of influenza virus if ill individuals must be out in public or if well individuals must go out in crowded situations where social distancing is not practical.

2.8.2 Protective Barriers

Protective barriers in the form of Plexiglas or glass may provide useful protection for people such as front-counter staff or public transport drivers, whose duties require them to have frequent face-to-face contact with members of the public where social distancing is either not possible or not practical.

2.9 Where Can We Find More Information?

The following websites provide further information about pandemic influenza:

- **South Central District Health** (<http://www.panflusouthidaho.org>)
- **Centers for Disease Control and Prevention** (<http://www.pandemicflu.gov/>) – background information about avian influenza, how it is spread, vaccines, outbreak information, travel advice and professional guidance
- **World Health Organization** (www.who.int/csr/disease/avian_influenza/en/index.html) – updates of global situation, pandemic phases, fact sheets

WHAT ARE THE SYMPTOMS OF INFLUENZA AND HOW IS IT SPREAD?

What are the Symptoms of Influenza?

Influenza is a highly contagious viral disease of the respiratory tract.

Influenza is characterized by rapid onset of respiratory and generalized signs and symptoms including: a high fever, headache, muscle aches and pains, fatigue, cough, sore throat, or a runny nose.

What is the Difference Between Influenza and a Common Cold?

SYMPTOM	INFLUENZA	COMMON COLD
Fever	Usual, sudden onset 100-104F and lasts 3-4 days	Rare
Headache	Usual and can be severe	Rare
Aches and pains	Usual and can be severe	Rare
Fatigue and weakness	Usual and can last 2-3 weeks or more after the acute illness	Sometimes, but mild
Debilitating fatigue	Usual, early onset can be severe	Rare
Nausea, vomiting, diarrhea	In children < 5 years old	Rare
Watering of the eyes	Rare	Usual
Runny, stuffy nose	Rare	Usual
Sneezing	Rare in early stages	Usual
Sore throat	Usual	Usual
Chest discomfort	Usual and can be severe	Sometimes, but mild to moderate
Complications	Respiratory failure; can worsen a current chronic condition; can be life threatening	Congestion or ear-ache
Fatalities	Well recognized	Not reported
Prevention	Influenza vaccine; frequent hand-washing; cover your cough	Frequent hand-washing, cover your cough

How is seasonal influenza spread?

Influenza is spread from person to person in the respiratory droplets generated by coughs and sneezes. It can also be spread when a person comes into contact with the respiratory droplets of another person by touching items on which droplets are present, and then touches their own eyes, mouth or nose before washing their hands. The virus may enter through the eyes, or more commonly through the nose or mouth, and into the throat and lungs where it begins to multiply. The time from first exposure to when symptoms begin is one to four days.

INFLUENZA NOTIFICATION

Influenza is a contagious disease. There is currently an increase in the numbers of people in the State of Idaho with influenza. In order to reduce the spread of influenza in this workplace, the following is required of everybody:

DO NOT COME TO WORK if you have:

- chills, shivering and a fever (temperature >100° F)
- onset of muscle aches and pains
- sore throat
- dry cough
- trouble breathing
- sneezing
- stuffy or runny nose
- tiredness.

If some of the above apply to you, please stay home and wait until you have recovered before returning to work.

If you have recently arrived from overseas or returned from overseas, please ask to speak to the Influenza Manager.

If you start to feel ill at work,

DO NOT leave your work area.

Call your Influenza Manager.