

Pandemic Continuity in phase 6

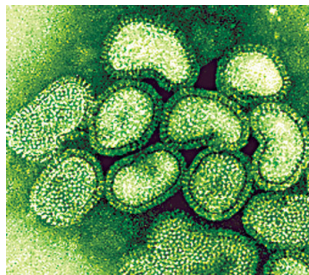
Pandemic Continuity during phase 6

What do companies really have to do
today & tomorrow ?

Marc Vael



Agenda



In this meeting, we will learn about what companies are doing today and will be doing around this new threat in order to protect their employees and to continue their business.



Pandemic Continuity in phase 6

Definition of pandemic flu

- Influenza (commonly known as the flu) is not a 'bad cold'.
- Pandemic influenza is a highly contagious infection that can cause serious illness in anyone affected.
- Complications caused by influenza can be fatal for young children, older adults and other vulnerable people such as those with an existing illness.
- If you are in good health, the flu may only last for around two weeks, but you are likely to be in bed for that time.



Distribution of pandemic flu

- Influenza spreads very easily from person to person by coughs & sneezes. The airborne droplets from a cough / sneeze can last for a long time on door handles, phones and other common surfaces.
- An infected person is contagious before any symptoms appear so it is impossible to simply avoid contact with infected people in the community.
- Video



Pandemic Continuity in phase 6

What about past flu pandemics?



Credit: US National Museum of Health and Medicine

1918: "Spanish Flu"
A(H1N1)

20-40 m deaths



1957: "Asian Flu"
A(H2N2)

1-4 m deaths



1968: "Hong Kong Flu"
A(H3N2)

1-4 m deaths



What about past flu pandemics?

- Severe acute respiratory syndrome (SARS)
first recognized as a global threat in mid-March 2003. first known cases of SARS occurred in Guangdong province (China) in November 2002
- WHO reported the last human chain of transmission of SARS in that epidemic had been broken on 5 July 2003.
- 8098 SARS cases in 26 countries with 774 deaths.
- Since July 2003 : 4 occasions when SARS reappeared.

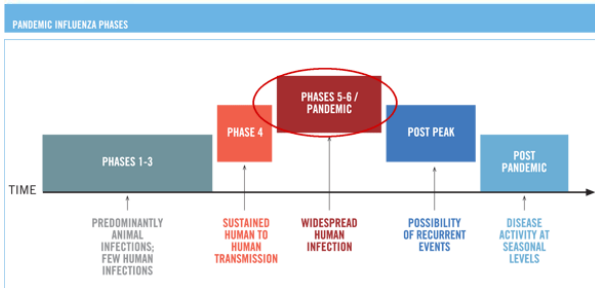


Pandemic Continuity in phase 6

Introduction



Thursday June 11th 2009 :
 the WHO considered all information on transmission of New influenza A (H1N1) and concluded that the criteria for a pandemic have been met.
 Influenza pandemic alert level = **phase 6**



April 27 : 4
 April 29 : 5



Introduction		World Health Organization				
PHASE	DESCRIPTION	MAIN ACTIONS				
		PLANNING AND COORDINATION	SITUATION MONITORING AND ASSESSMENT	COMMUNICATIONS	REDUCING THE SPREAD OF DISEASE	CONTINUITY OF HEALTH CARE PROVIDER
PHASE 1	No animal influenza virus circulating among animals have been reported to cause infection in humans.					
PHASE 2	An animal influenza virus circulating in domesticated or wild animals is known to have caused infection in humans and is therefore considered a specific potential pandemic threat.	Develop, exercise, and periodically revise national influenza pandemic preparedness and response plans.	Develop robust national surveillance systems in collaboration with national animal health authorities, and other relevant sectors.	Complete communications planning and initiate communications activities to communicate real and potential risks.	Promote beneficial behaviours in individuals for self protection; Plan for use of pharmaceuticals and vaccines.	Prepare the health system to scale up.
PHASE 3	An animal or human-animal influenza reassortant virus has caused sporadic cases or small clusters of disease in people, but has not resulted in human-to-human transmission sufficient to sustain community-level outbreaks.					
PHASE 4	Human to human transmission of an animal or human-animal influenza reassortant virus able to sustain community-level outbreaks has been verified.					
PHASE 5	The same identified virus has caused sustained community level outbreaks in two or more countries in one WHO region.	Direct and coordinate rapid pandemic containment activities in collaboration with WHO to limit or delay the spread of infection.	Increase surveillance. Monitor containment operations. Share findings with WHO and the international community.	Promote and communicate recommended interventions to prevent and reduce population and individual risk.	Implement rapid pandemic containment operations and other activities; collaborate with WHO and the international community as necessary.	Activate contingency plans.
PHASE 6	In addition to the criteria defined in Phase 5, the same virus has caused sustained community level outbreaks in at least one other country in another WHO region.	Provide leadership and coordination to multisectoral resources to mitigate the societal and economic impacts.	Actively monitor and assess the evolving pandemic and its impacts and mitigation measures.	Continue providing updates to general public and all stakeholders on the state of pandemic, and measures to mitigate risk.	Implement individual, societal, and pharmaceutical measures.	Implement contingency plans for health systems at all levels.
POST PEAK PERIOD	Levels of pandemic influenza in most countries with adequate surveillance have dropped below peak levels.	Plan and coordinate for additional resources and capacities during possible future waves.	Continue surveillance to detect subsequent waves.	Regularly update the public and other stakeholders on any changes to the status of the pandemic.	Evaluate the effectiveness of the measures used to update guidelines, protocols, and algorithms.	Rest, restock resources, revise plans, and rebuild essential services.
POST PANDEMIC PERIOD	Levels of influenza activity have returned to the levels seen for seasonal influenza in most countries with adequate surveillance.	Review lessons learned and share experiences with the international community. Replenish resources.	Evaluate the pandemic characteristics and situation monitoring and assessment tools for the next pandemic and other public health emergencies.	Publicly acknowledge contributions of all communities and sectors and communicate the lessons learned; Incorporate lessons learned into communications activities and planning for the next major public health crisis.	Conduct a thorough evaluation of all interventions implemented.	Evaluate the response of the health system to the pandemic and share the lessons learned.



Pandemic Continuity in phase 6

Situation in the world

Influenza A(H1N1) - update 51

19 June 2009 07:00 GMT

Laboratory-confirmed cases of new influenza A(H1N1) as officially reported to WHO by States Parties to the International Health Regulations (2005)

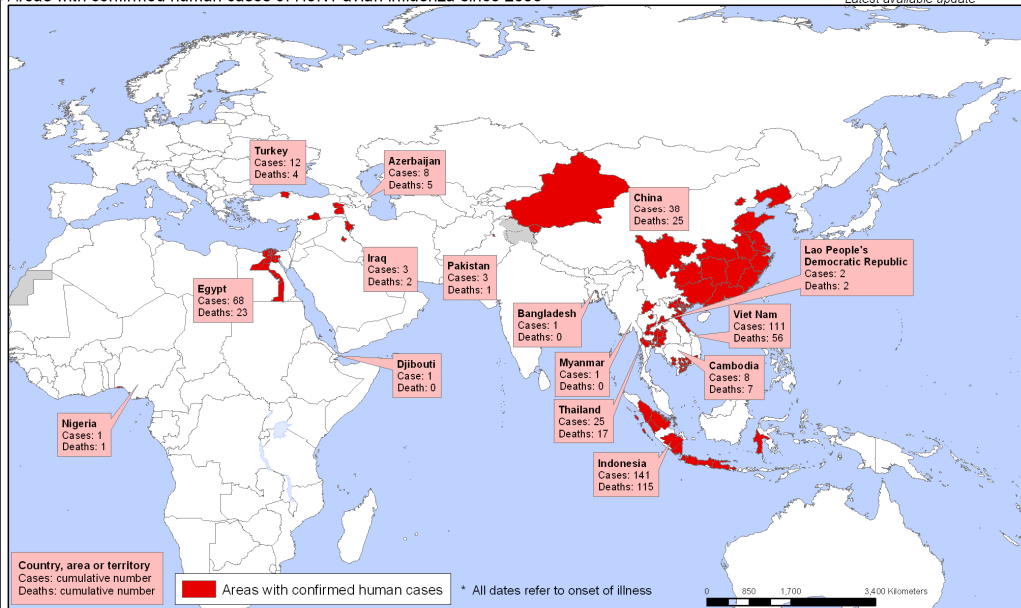
Country, territory and area	Cumulative total		Newly confirmed since the last reporting period	
	Cases	Deaths	Cases	Deaths
Argentina	918	4	185	3
Australia	2199	0	87	0
Canada	4905	12	856	5
Chile	3125	2	790	0
Japan	690	0	24	0
Mexico	7624	113	1383	5
United Kingdom	1752	1	291	0
United States of America	17855	44	0	0
Grand Total	44287	180	4667	13



Situation in the world for A/H5N1

Areas with confirmed human cases of H5N1 avian influenza since 2003 *

Status as of 6 May 2009
Latest available update



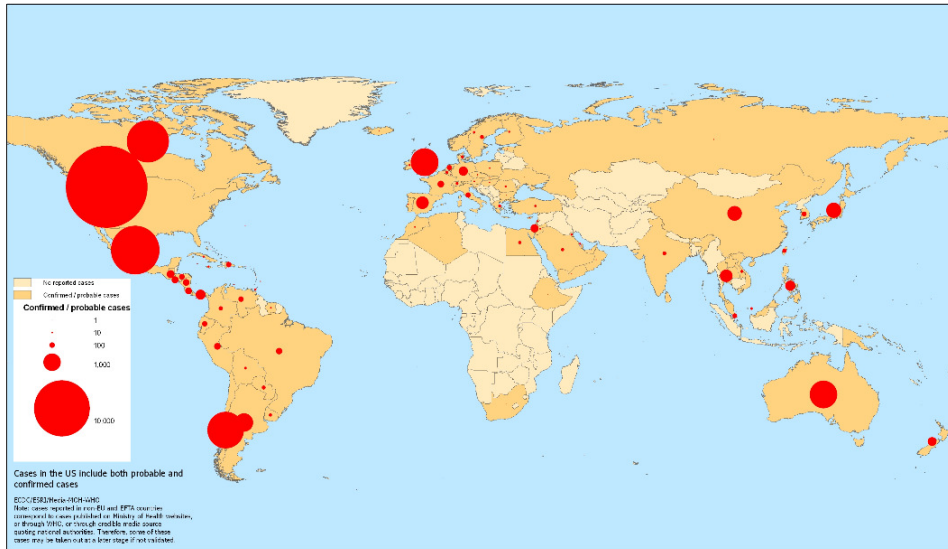
The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted lines on maps represent approximate border lines for which there may not yet be full agreement. © WHO 2009. All rights reserved

Data Source: WHO
Map Production: Public Health Information and Geographic Information System (GIS)
World Health Organization

Pandemic Continuity in phase 6

Situation in the world

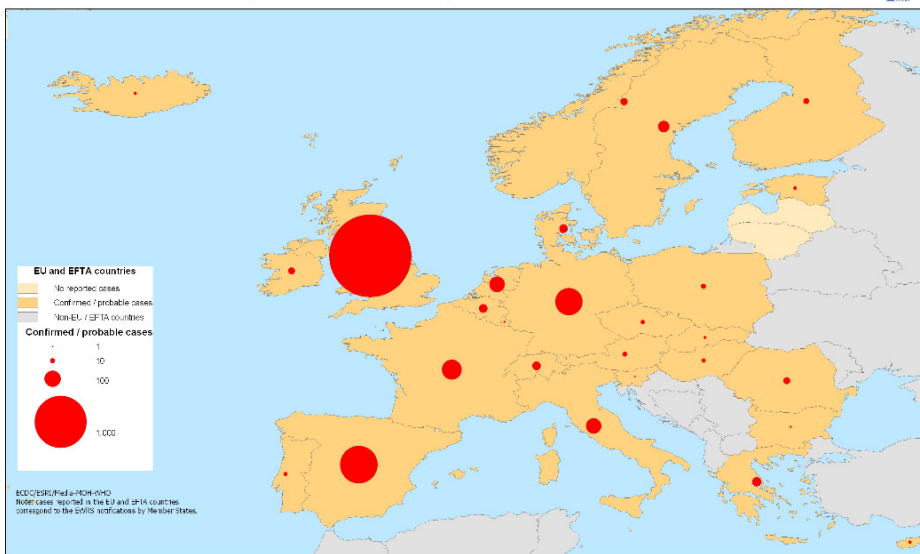
Reported cumulative number of confirmed cases of influenza A(H1N1)v by country, as of 21 June 2009, 17:00 hours CEST



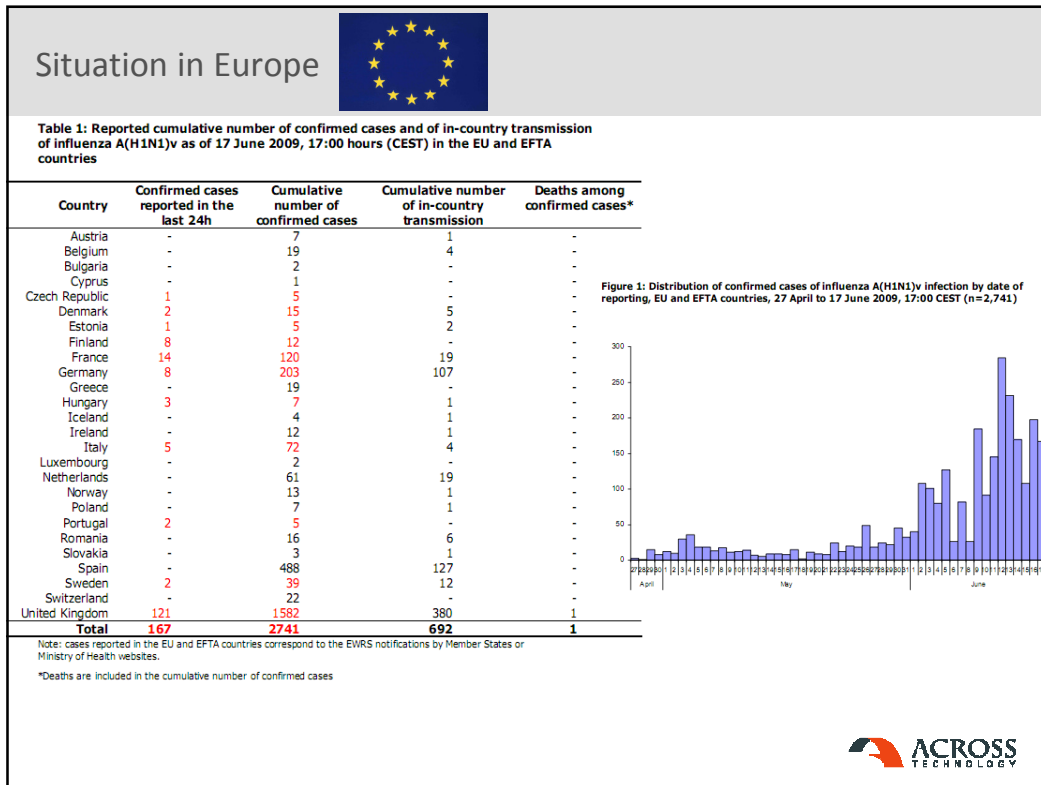
Situation in Europe



Reported cumulative number of confirmed cases of influenza A(H1N1)v in EU and EFTA countries, as of 21 June 2009, 17:00 hours CEST



Pandemic Continuity in phase 6



Situation in Belgium





BERICHT
20/06/2009



DE INTERMINISTERIËLE COMMISSARIS INFLUENZA

**Griep A/H1N1: stand van zaken België op zaterdag 20 juni:
twee stalen testten positief, zes stalen testten negatief.**

Het Interministerieel Commissariaat Influenza laat weten dat bij een analyse vandaag twee nieuwe gevallen van A/H1N1-griep bevestigd werden in België.

Het eerste geval betreft een jonge vrouw uit de provincie Henegouwen. Op donderdag 18 juni is zij teruggekomen uit de Dominicaanse Republiek, op dezelfde vlucht als de jongeman die gisteren al positief testte. Omdat ze tijdens deze vlucht als nauw contact van deze jongeman gold, werd ze reeds door de gezondheidsautoriteiten opgespoord. Zij werd daarom gisteren al thuis geïsoleerd en kreeg preventief antivirale geneesmiddelen. Vanaf nu krijgt ze de behandelingsdosis. Sinds haar terugkomst heeft zij nauw contact gehad met 5 personen, allemaal familieleden. Zij worden thuis geïsoleerd en krijgen een preventieve behandeling met antivirale middelen.

Het tweede geval betreft een jonge vrouw uit de provincie Antwerpen. Op donderdag 18 juni is zij via Londen teruggekeerd uit New York. Ze ontwikkelde de eerste griepsymptomen op woensdag 17 juni en nam op vrijdag 19 juni contact op met haar arts, die in overleg met een gezondheidsinspecteur van de Gemeenschap beslist heeft om een test te laten uitvoeren. Vandaag bleek de test positief voor de A/H1N1-griep. De vrouw had sinds haar terugkeer nauw contact met 11 personen. Deze worden thuis geïsoleerd en krijgen een preventieve behandeling met antivirale middelen. Omdat de vrouw mogelijk besmettelijk was tijdens de vlucht, besloten de gezondheidsautoriteiten om de passagierslijst op te vragen. Als er andere passagiers een risico hebben opgelopen tijdens deze vlucht, zal de overheid contact met hen opnemen.

Tot op vandaag zijn in België 28 gevallen van de A/H1N1-griep vastgesteld. Het Interministerieel Commissariaat Influenza blijft alle verdachte gevallen van de A/H1N1-griep in ons land van nabij opvolgen en informeert de pers dagelijks over de stand van zaken.



Pandemic Continuity in phase 6

Situation in Belgium

Commissariat Interministeriel Influenza
Interministerieel Commissariaat Influenza
Interministerielle Koordinationskomitee 'Influenza'
Interministerial Influenza Commission
Coordination I
Place Victor Hortaplein 40 Bte/Bue 10
1050 Bruxelles/Brussel

0800/99.777

Menselijke variant van het varkensgriepvirus
Wees waakzaam!

Variante humaine de la grippe porcine
Soyons vigilants !

Menschliche Variante des Schweingrippe-Virus.
Bleiben Sie wachsam!

Human variant of swine flu
Be cautious !

Kommen Sie zurück aus einem Land in dem es Fälle der menschlichen Variante des Schweingrippe-Virus A/H1N1 gibt?

Bleiben Sie dann wachsam, wenn sich die folgenden Symptome der Grippe zeigen, innerhalb von 7 Tagen nach Ihrem Heimkehr:

- Fieber
- Muskelschmerz oder Gelenkschmerz, Kopfschmerzen
- Husten
- Übelkeit, Erbrechen

Bleiben Sie zu Hause und benachrichtigen Sie unmittelbar Ihren Arzt, und setzen Sie ihn in Kenntnis über Ihre Reise.

Are you coming back from a country where cases of the human variant of the swine flu virus A/H1N1 have been reported?

Please be cautious if you show the following flu symptoms within 7 days after your return:

- Fever
- Painful muscles and/or arthralgias, headache
- Cough
- Diarrhoea, vomiting

Stay at home and immediately call for your GP, and tell him about your travel.

Kommt u terug uit een land waar gevallen gemeld werden van de menselijke variant van het varkensgriepvirus A/H1N1?

Wees dan waakzaam indien u de volgende griepsymptomen ervaart binnen de 7 dagen na uw terugkeer:

- Koorts
- Pijnlijke spieren en/of gewrichten, hoofdpijn
- Hoesten
- Diarree, braken

Blijf thuis en verzorg onmiddellijk uw huisarts en breng hem op de hoogte van uw reis.

Vous revenez d'un pays où des cas de variante humaine de la grippe porcine A/H1N1 ont été mentionnés ?

Soyez très attentifs si, dans les 7 jours qui suivent votre retour, vous ressentiez des symptômes grippaux tels que :

- Fièvre
- Douleurs articulaires et/ou musculaires,
- Maux de tête
- Troux
- Diarrhées, vomissements

Restez à la maison, appelez immédiatement votre médecin généraliste et informez-le de votre voyage !

VIJF VOORZORGSMAATREGELEN OM DE VERSPREIDING VAN DE GRIEP TEGEN TE GAAN!




1

WAS REGELMATIG JE HANDEN



2

BEDEK JE MOND EN JE NEUS MET EEN PAPIEREN ZAKDOEKJE WANNEER JE NIEST



3

GOOI JE ZAKDOEKJES ZORGVULDIG WEG



4

HEB JE GEEN ZAKDOEKJE BIJ DE HAND, BEDEK DAN JE MOND EN JE NEUS



5

BLUF THUIS ALS JE ZIEK BENT

Deze eenvoudige voorzorgen kunnen levens redden!



www.influenza.be - info@influenza.be



Situation in Belgium



Hoe vermijden dat de griep zich verspreidt?

Griep (Influenza) wordt veroorzaakt door een virus dat de ademhalingsaantast (neus, keel, bronchiën en soms ook de longen). De ziekte wordt verspreid van mens op mens of door onrechtstreeks contact. De ziekte kan langer dan een week duren en beperkt blijven tot enkele symptomen, maar kan eveneens complicaties met zich meebrengen.

Een aantal symptomen zijn: een plots aanval van hoge koorts, spierpijn, hoofdpijn enzich in het algemeen nietgoed voelen. Andere symptomen kunnen zijn: vermoeidheid, hoesten, niesten, verstopping of irritatie van de neus, de ogen, de keel en de oren.

De belangrijkste risicogroepen zijn bejaarden en chronisch zieken.

- Was regelmatig je handen
- Bedek je mond en je neus met een papieren zakdoekje wanneer je niest
- Gooi je zakdoekjes zorgvuldig weg
- Heb je geen zakdoekje bij de hand, bedek dan je mond en je neus
- Blijf thuis als je ziek bent

Hoe kan je je beschermen tegen de griep?

Was je handen
zo veel mogelijk. Maak je handen nat en was ze zorgvuldig met zeep. Wrijf goed terug je tot 30 tellen. Spoel daarna je handen goed af en droog ze ook af.

Gebruik altijd papieren zakdoekjes als je je neus snuift, als je hoest of als je niest. Dat is hygiënischer.

Gooi je zakdoek in de vuilnisbak na gebruik. Ga onmiddellijk daarna je handen wassen.

Hou je hand voor je mond wanneer je hoest of niest. Ga onmiddellijk terug je handen wassen.

Blijf thuis als je ziek bent dat is belangrijk om de anderen niet te besmetten.



Griep, wat is dat eigenlijk?

Griep is een ziekte die veroorzaakt wordt door een virus. Als je veel hoort niet en het overal zijn, doe je de hele tijd moet snuiten en je je helemaal niet goed voelt, dan heb je misschien griep. Griep wordt erg gemakkelijk overgedragen. Je kan op verschillende manieren besmet worden door iemand die al ziek is. Het kan via speeksel, wanneer iemand praat en er op die manier kleine druppeltjes speeksel in de lucht terecht komen. Wanneer iemand niest of hoest in jouw richting gebeurt dit ook. Ook wanneer iemand je kust, kun je griep krijgen. Tenslotte kan je ook door het virus besmet raken als je een voorwerp aanraakt dat al aangeraakt werd door een besmet persoon en je daarna je mond, neus of ogen aanraakt. Wanneer veel mensen rondom jou griep hebben, ben je dus best erg voorzichtig!



Pandemic Continuity in phase 6

So?

The outbreak in the Spring of 1918 was not the huge killer. It came back in a second and third wave in the Fall of 1918 and Winter of 1919. The 1918-19 Influenza came in 3 waves.

The first wave was relatively benign; the second wave was deadly; the third wave was benign.

It was the second wave that turned out to be the nasty killer killing approximately between 20-40 million people.



So?

The mortality rate for the annual "flu" = 0.1 %.

In 2008, the annual flu killed about 36.000 and hospitalized about 200.000.



Pandemic Continuity in phase 6

So?

**The mortality rate during the
Great Influenza : 2,5–5 %**

**So, that would imply
between 900.000 –
1.800.000 people.**



BCM



**Installatie van een Business Continuity Planning:
voorbereiding op de uitbraak van een grieppandemie**

Algemene Directie Crisiscentrum - Noodplanning
FOD Binnenlandse Zaken
Interministerieel commissariaat Influenza
FOD Volksgezondheid, Veiligheid van de Voedselketen en Leefmilieu



Pandemic Continuity in phase 6

BCM hypotheses

1. Pandemic consequences = large areas or global : do not count too much on external help.
2. Organisations can experience large % absenteeism :
 - Real sick employees
 - Employees taking care of family
 - Employees refuse to go to work to avoid contamination (office or transportation).
3. Pandemic waves possible (each 8-12 weeks) : affecting 15 - 35 % active population.
4. Pandemic waves in an organisation = similar as global.
5. Sick people = at least 7 working days absent from work.
6. Predicted absenteeism % = 2 x number of real sick people.
7. Supplementary absenteeism in public life (school, public services,...) will evolve similar to organisational absenteeism.



BCM impact

1. **Socio-economic impact :**
people
 - Essential services impact: information- & telecom services, energy, water, food & transportation, banking system (cash availability)
 - Supply chain impact : import problems, delivery & outsourcing services)
 - Supply & demand impact : high demand for health services (hospitals, doctors), security (police), communication services (internet, phone), low demand for entertainment services (tourism, culture, horeca).



Pandemic Continuity in phase 6

BCM impact

2. Business impact :

coordination & cooperation between public & private sector is essential, including effective information policy, to handle the problems around pandemic & to limit the impact of a pandemic. Every organisation must be able to:

- Prepare itself to guarantee its proper functioning
- Take care of continuation of socio-economic life + the 'state apparatus' in all its domains via
 - ❑ a monitoring system to review status.
 - ❑ communication of those elements needed to guarantee service continuity
 - ❑ a proper BCP.
- Take care of an effective communication policy, in synch with the global public communication strategy (www.influenza.be).



BCM plan (www.influenza.be)

1. Limit impact on your business
2. Protect employee health & safety
3. Make a policy for execution during a pandemic
4. Prepare adequate education & communication
5. Coordinate activities with external organisations & public institutions



Pandemic Continuity in phase 6

BCM plan 1 : limit impact on your business

1. **Appoint an accountable** for coordination, planning & preparation of PCP.
2. **Split activities** of your organisation according to importance:
 - Critical activities which need permanent functioning
 - Activities that can be shut down during 2 weeks
 - Activities that can be shut down for more than 3 weeks
3. Check which activities are managed by **external people** (subcontractors, outsourcers) and verify these people can guarantee continuity.
4. **Verify the resources** required for continuity of critical activities:
 - people: numbers, capacity, replacement (backup people, at least 2 per key function), list of volunteers, reinforcement possibilities (interim, students, retired)
 - Materials needed to maintain activities (raw materials, energy, budget)
 - Legal and regulatory rules during a pandemic (employee payment, requisitions, vacations, health inspection, specific procedures)



BCM plan 1 : limit impact on your business

5. Educate & prepare all (internal & external) people involved & required during a pandemic.
6. Develop scenarios to enhance / reduce the demand for your products /services.
7. Determine impact on finance & budget during a pandemic.
8. Determine impact on national & international travel (quarantaines, closed borders).
9. Study alternatives:
 - different work locations / behaviour (telework, videoconference)
 - transportation (reduced public transportation)
 - residence (local hotels, sleeping facilities at work)
10. Set up information channels (official, up-to-date, reliable info).
11. Set up a plan for emergency communication, including RACI, backups, escalation path, communication with all organisation and partners, etc.
12. Organise a test of the PCP.



Pandemic Continuity in phase 6

BCM plan 2 : protect health & safety of employees

1. Define criteria for allowing employee absenteeism due to:
 1. Really sick
 2. Family sickness
 3. Collective limitations or quarantines
 4. School / company closures
 5. Reduced / No public transportation
2. Enhance anti-flu protection measures :
 1. Personal hygiene measures (soap, towels, masks, ...)
 2. Office hygiene measures (disinfection of office equipment, frequent cleaning, ...)
 3. Limit contacts between people (internal / external) (social distancing , no handshake, avoid meeting & dining rooms)
3. Encourage annual company inoculation.



BCM plan 2 : protect health & safety of employees

4. Determine which employees risk serious exposure :
 - People in contact with the general public
 - People in contact with the general public which might have the flu (hospital)
 - People that clean
 - Professional in contact with living or dead beings which might have the flu (farmer, undertaker)
5. Determine which employees / partners have specific needs and integrate these in your PCP (health & psycho social support)
6. Guarantee proper environmental care, A/C, waste disposal.



Pandemic Continuity in phase 6

BCM plan 3 : make a policy for execution during pandemic

1. Determine policy for employee reimbursement and sick leave during pandemic + rules when n employee was sick – is healed – wants to come back to work.
2. Determine rules for alternative work places / methodes (telework) and flexible hours
3. Determine rules to prevent flu distribution on the workplace.
4. Determine rules for specific contamination risks for people who are exposed or suspected of being/becoming sick on the workplace:
5. Determine policy for employee mobility:
 1. Reduce travel to (national / international) areas
 2. Evacuate employees in / near areas where pandemic starts
 3. de werknemers die uit de getroffen zone komen, op te volgen
6. Determine which institutions/people can activate / stop the PCP.
7. Determine policy for crisis communication including internal/external communication with personnel, partners, clients, public, but also pre-pandemic communication.



BCM plan 4 : prepare adequate communication & education

1. Determine official (national / international) reliable up-to-date information sources on pandemic + tools to take prevention- & action measures during pandemic.
2. Develop & distribute documents & information on:
 1. Pandemic (symptoms , transmission)
 2. Medical & social care
 3. Possible treatments (antivirals, vaccins)
 4. Measures for personal & family protection & hygiene
 5. Organisational action plans.
3. Anticipate fear, rumours, wrong info and incorporate this in your communication strategy.
4. Ensure all communication is culturally adapted.
5. Instal a contact system (website, emergency numbers) for all employees



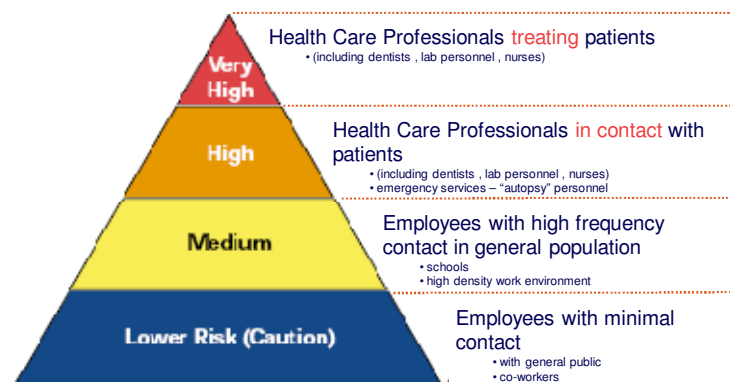
Pandemic Continuity in phase 6

BCM plan 5 : Coordinate activities with external organisations & public institutions

1. Work with support services like HRM, Communications, ICT, Purchasing/Budget
2. Work with external organisations : insurers (coverage) & prevention services companies
3. Work with authorities :
 1. FPS Work (employee protection)
 2. FPS Health (health & safety)
 3. Coordination / Crisiscenter of the government
4. Work with health authorities on federal & local level & for emergency situations to:
 1. Know their plans & communicate your plans
 2. Take part in process planning if relevant and requested
 3. Describe what you can offer to the community
5. Share Good Practices / Cases with others to enhance the overall result.

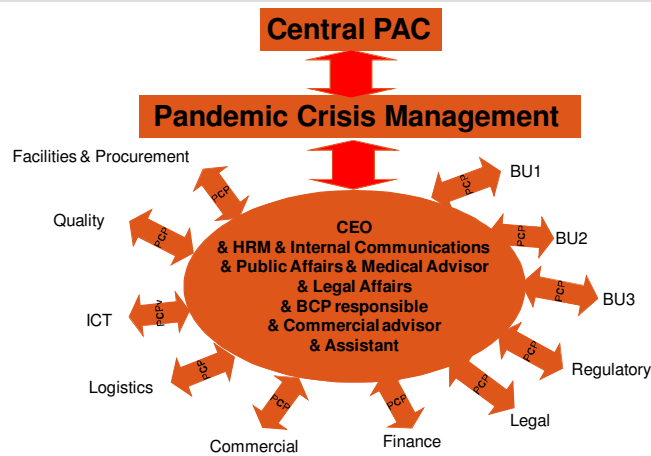


Risk



Pandemic Continuity in phase 6

Case : multinational organisation



Roles & Responsibilities:

1. Coordinate all actions based on PCP
2. Supervise all actions in all business units
3. Report to PAC & PCP Coordinators per business unit
4. Take decision/action!



Case : vision on pandemic

WHO	Company phasing approach
Phase 3 : pre	3 Pre pandemic : rare human to human transmission of disease :
Phase 4 : pandemic	4a Pre pandemic : small clusters of human to human transmission BUT company is not implicated
	4b Pandemic : small clusters of human to human transmission AND company is implicated
Phase 5 : pandemic	5a Pre pandemic : larger clusters of human to human transmission BUT company is not implicated
	5b Pandemic : larger clusters of human to human transmission AND company is implicated
Phase 6 : pandemic	6 Pandemic : <u>Global</u> increased & substantial human to human transmission in general population



Pandemic Continuity in phase 6

Case : vision on pandemic

1. **Phasing** : 3, 4 {4a-4b}, 5 {5a-5b}, 6

Advantages

- In sync with WHO approach
- Allows Country/Zone based approach
- Allows to plan/distinguish more realistically/tangible pandemic related activities, clear distinction between preparation and activation

2. **Plan structure** :

Plan : overall process approach

- Established per department in accordance with existing DRP's
- Every pandemic related aspects are covered per phase
- Aim to maintain full departmental continuity until end PHASE 4
- Gradually fall back on critical departmental processes from PHASE 5,6

Elements of plans : activity approach for support functions

- 2 central procedures :
 - Health & Safety / ICT / Communication
 - HRM
- “Implementation overview per phase”



Case : possible impact on business

• Absenteeism

Actual estimate : up to 60%

• Change in commercial contact patterns of customers:

Avoidance of contacts >> home delivery services

• Supply disruptions

Phase 3 & 4a : Full business = all processes = by managing absenteeism which can occur between 15 & 20%

Phase 4b & 5a : Fall back to **departmental critical processes** = conform current plans and BCP = limited processes per department = by managing backups : absents can increase until 30%

Phase 5b & 6 : Fall back to **4 company critical processes** = by managing backups : absents can increase until 50%



Pandemic Continuity in phase 6

Case : practical guidelines to reduce risk

Sick employees should stay at home !
Stimulate homeworking – distance working (TC – Sametime - ...)
Avoid meetings

Hand hygiene facilities :
Soap and water
Handsanitiser (alcohol)
Tissues

“No touch” trash cans

Do not touch eyes, nose and mouth



Case : practical guidelines to reduce risk

Sneezing and coughing
Cover up your nose
Wash hands after coughing or sneezing

Avoid close contacts (remember 2m!)
No handshaking, kissing !
Wash hands after contacts with others

Cleaning of the whole work area
Floors and furniture
But also : phones – PC

Avoid sharing your working materials with other employees

Wearing of surgical masks (only effective as barrier vs large droplets !)

Get the annual flu shot



Pandemic Continuity in phase 6

Case : health & safety

1. Coffee corners : closed (Facility)
2. Meeting rooms : closed (Facility)
3. Restaurant : closed (Facility)
4. Reception access (Facility)
 - Employees : via alternative entry point
 - Suppliers & Visitors : via external phone
5. Site closure : procedure (Facility)
6. Office : one person per office (Facility & HR)
 - Linked with home working
7. Cleaning : check with cleaning company (Facility)
8. Waste storage & collection : check possibilities (Facility)
9. Trash cans & waste bags (DASRI) : check possibilities (Facility)
10. Food for employees : no
11. Hygiene materials : calculation based on planning per phase (Facility)
Minimum for reception & security & management & support
 - Hydroalcoholic gel disinfection : mandatory in all toilets
 - Masks : optional
 - Gloves : optional
 - Respirators : no
12. Storage & distribution of hygiene materials : to be determined (Facility)
13. Signs/Posters & Reference cards : guidelines from HR (HR + internal communications + Facilities)
14. Sick employee guidance : guidelines from HR (HR)
15. Train first aid employees to escort employees with symptoms (HR)
16. External doctor for assistance on site : guidelines from HR (HR)
17. Extra security staff on site (24/24) : to be investigated (Facility)



Case : ICT

1. All personnel with critical function (departments)
 1. Central list (HR)
2. Check with IT if all equipment is available today (HR & ICT)
3. ICT for people working at home : telework (departments)
 1. Telework is in standard BCP (and thus also in PCP), but only 7% employees telework regularly.
 2. Telework is not a 'break glass in case of emergency' solution
 3. Telework = important part of planning for continuity of operations during emergencies. The organization promotes communication between employees who telecommute, managers and IT professionals.
 4. Telework = key to allowing organization to continue to function during emergency situations, especially when people do not want to go to an office.



Pandemic Continuity in phase 6

Case : communications

Intranet: main vehicle for communications.

E-mail (business/private): supporting intranet communications.

Meetings: if appropriate.

Posters on site: supporting intranet communications (phase 3 & 4 only).

Information boards on site: in collaboration with Facilities.

Telephone/SMS (business/private): if restricted or no access to Intranet system.

Contact Center: depending on pandemic stage (phase 5 and beyond).

Remark : no twitter or facebook or linkedin allowed!



Case : HRM

1. Monitoring (HR)
 1. Available list of critical functions with at least 3 backups
 2. Internal personnel : via special 0800 phone number (tracing absenteeism)
 3. External personnel : no
2. Reporting : no special actions (HR)
3. Communication (HR & internal communications):
 1. Information on
 1. process of getting flu
 2. confirming you can re-work after 10 working days
 3. Only critical activities should be continued : people should try to work from home as much as possible, if needed, travel to office, but antivirals/prevention measures should be foreseen
 2. Special communications to travellers
4. Travel :
 1. Distribute travel packs
 2. Repatriate people traveling abroad
 3. Encourage home-working when possible
 4. Limit local traveling ifo guidelines government
 5. Repatriate business travelers abroad
 6. Check commuters – repatriate or not
 7. Oblige travelers to stay at home for 10 days when coming from infected/dangerous area of pandemic flu – try to work from home if possible



Pandemic Continuity in phase 6

Vaccins against A(H1N1) (status 17 june 2009)

 **Baxter**

 **gsk**
GlaxoSmithKline

 **NOVARTIS**

 **Roche**

 **sanofi aventis**
Because health matters

 **SOLVAY**

May 12, 2009: Roche provides additional donation of 5.65 million packs of Tamiflu to WHO

June 12, 2009: GSK has offered to convert its intended donation to WHO of 50 million doses of H5N1 pre-pandemic vaccine to the new candidate A (H1N1) adjuvanted influenza vaccine once production begins.

June 17, 2009: Sanofi-Aventis will donate 100 million doses of influenza vaccin to WHO (10%)

 **ACROSS**
TECHNOLOGY

And of course ...

- Using messages designed to exploit worries about the swine flu outbreak, **spammers** are trying to infect computers, steal information and drive online pharmacy sales.
- Symantec = spam messages with provocative titles like "Salma Hayek caught swine flu!" and "US swine flu fears" are being widely distributed containing links to online pharmacy sites sent by the Rustock botnet.
- US-CERT = spam messages may contain links to phishing or malware sites, or malicious attachments. It's encouraging Internet users to rely on the Centers for Disease Control Web site for information about the swine flu.
- Trend Micro = spammers are using flu-themed subject lines because references to current events produce better results.
- F-Secure = the swine flu outbreak has prompted a surge of Internet domain registrations related to the swine flu. The company has posted a list of 278 such domains. Most of them will probably be used in conjunction with spam campaigns or other dubious efforts to profit from the outbreak.
- McAfee Avert Labs = Internet domain registrations mentioning the word "swine" are up by factor of 30.

 **ACROSS**
TECHNOLOGY

Pandemic Continuity in phase 6

And of course ...

Reportedly a number of Hollywood movie studios have already put their Swine Flu productions into turnaround. Some Hollywood producers have also been in negotiation with studios in hopes of salvaging something from the failed films.



Conclusion

The main challenge =
companies do have contingency plans, but people move around, systems are changed and the contingency plans are never fully tested... until it really happens.



Pandemic Continuity in phase 6

Relevant websites :

<http://www.who.int>

<http://www.cdc.gov/h1n1flu/>

<http://www.pandemicflu.gov/>

<http://ecdc.europa.eu/>

<http://www.influenza.be>

