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H1N1 Global Update:
What we have learned so far





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Agenda

1. Update on H1N1
 - Global spread
 - Lessons learned - New study by Trust for America's Health
2. Why you should care and do something
3. With limited time...
 - Five things to focus on...
 - Next Steps

June 2009

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Why is influenza so different?

- Business Continuity Planning generally has two assumptions:
 - Back to “business as usual” in 30 days or less
 - Go from the “affected” site to the “unaffected site” and resume business

Neither apply with Pandemic Influenza

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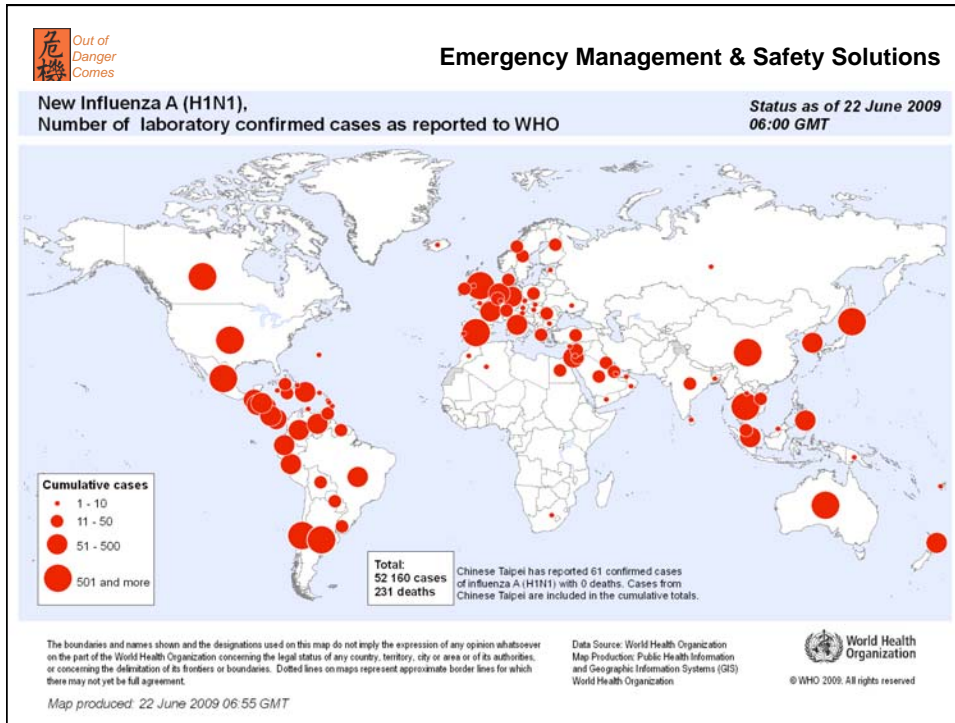
WHO* Confirmed Cases



- World Health Organization (WHO)* reports (22 June):
 - 52,160,+ confirmed cases in 88 countries.
 - 231 deaths in 10 countries.
- Numbers vary greatly by different agencies around the world and due to the change in testing, no longer meaningful.

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CDC* Summary

- It's uncertain at this time how serious or severe this novel H1N1 virus will be in terms of:
 - How many people infected will develop serious complications or die.
 - How this new virus may affect the U.S. during its upcoming influenza season in the fall and winter.
- Because this is a new virus, most people will have little or no immunity against it, and illness may be more severe and widespread as a result.
- In addition, currently there is no vaccine to protect against this novel H1N1 virus.
- CDC anticipates associated with this new virus that there will be:
 - More cases.
 - More hospitalizations.
 - More deaths.

* Center for Disease Control

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Canadian Cases



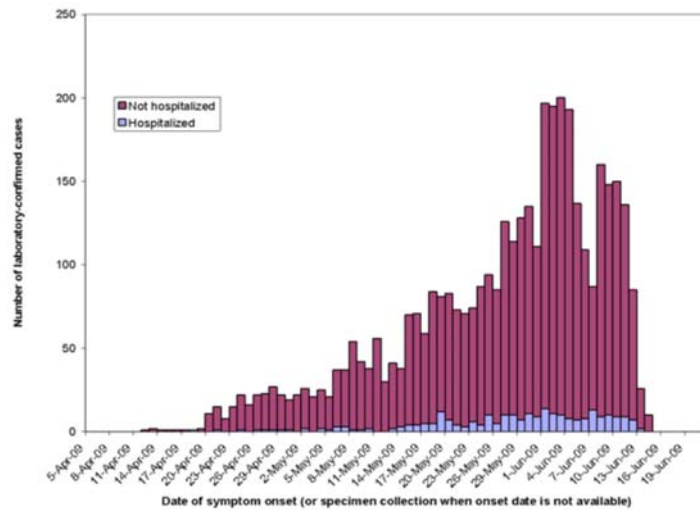
- 6457 cases
- 15 deaths
 - Latest death 6 year old

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Canadian Case Count



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What is happening down under?

- Australia health department has confirmed:
 - 2436+ novel flu cases - the cases are mostly "mild". (21 June)
 - One death.
 - "Government expects the virus to spread across the country".
 - "Melbourne is now the "swine-flu" capital of the world, with the virus twice as prevalent in the Victorian population as it is in Mexico, where the pandemic began". (6 June)



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Singapore



* 15 June

- 168 confirmed cases*
 - Contact tracing **all** cases.
 - MOH advises the public to avoid non-essential travel to affected areas:
 - Melbourne and the State of Victoria in Australia, Kobe and Osaka in Japan, Chile, USA, Canada and Mexico.
 - www.flu.gov.sg

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Chile leads in South America



- Chile's health ministry said yesterday that it had confirmed 4,315 novel H1N1 flu cases, the most in South America (77% recovered as of 19 June)
 - Four deaths
- Argentina reported 1,118 cases, the second-highest in South America (22 June).
 - 7 deaths

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Argentina



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H5N1 Update



- Remains a threat.
- 80th case reported in Egypt
- 39 cases of H1N1 reported in Egypt (22 June)
 - Start praying now that they don't hook up

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WHO to modify Alert Levels



- WHO to modify pandemic alert levels.
- Will likely include:
 - Mild
 - Moderate
 - Severe

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Lessons From the Frontlines

1. Investments in pandemic planning and stockpiling antiviral medications paid off;
2. Public health departments did not have enough resources to carry out plans;
3. Response plans must be adaptable and science-driven;
4. Providing clear, straightforward information to the public was essential for allaying fears and building trust;
5. School closings have major ramifications for students, parents and employers;
6. Sick leave and policies for limiting mass gatherings were also problematic;
7. Even with a mild outbreak, the health care delivery system was overwhelmed;
8. Communication between the public health system and health providers was not well coordinated;
9. WHO pandemic alert phases caused confusion; and
10. International coordination was more complicated than expected.

Trust for America's Health, 5 June 2009

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What could happen next?

- H1N1 will disappear (most agree **very unlikely**).
- H1N1 continues its spread into the southern hemisphere for their flu season (happening now).
- H1N1 will become:
 - Our next pandemic (already is).
 - Like 1957 or 1968 global pandemics (already is).
 - Like 1918 (would require a mutation over the next few months).

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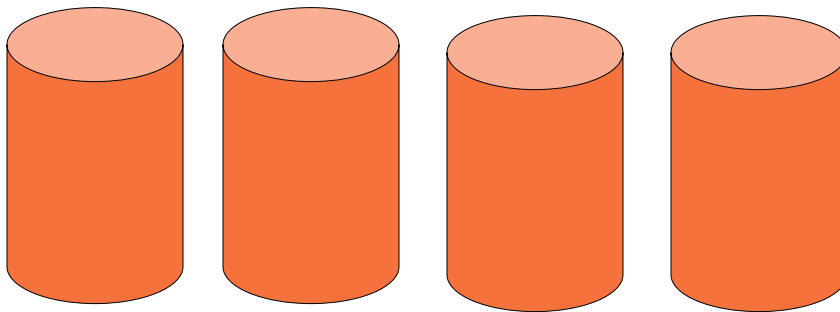


What does this mean for you?

- If we have a **“really bad”** flu season (ala 1957 or 1968):
 - Lots of sick employees, vendors and on-site contractors.
 - Higher than usual absenteeism.
 - Possibly employee or family member deaths.
 - May impact your ability to conduct business.



Employee Categorization



Category One
Essential & “must”
be @ work

Category Two
Essential & “must”
work **BUT** can work
remotely

Category Three
Can work
remotely but not
essential

Category Four
Not essential- no
need for them to
work at this time



Category One Employees

- **Essential staff who must be work:**
 - Social Distancing
 - Masks
 - Health education on handwashing
 - Spread people out on different shifts to spread them out
 - Employee cleans area frequently
 - Eliminate all face-to-face meetings
 - Antivirals?



Category Two Employees

- **Essential staff but can be remote:** install a robust work from home program:
 - High-speed connection
 - Company sponsored computer and all necessary peripherals
 - Work from home at least one day a month
 - Demonstrate in advance that can work from home
 - Desktop support for the home
 - Plan for what to do if working remotely fails



Category Three and Four Employees

- **Not essential to work:**
 - How long do you pay those who aren't working?
 - Pay partially?
 - How long do you continue benefits?
- **Other HR issues**
 - What if they refuse to come to work?
 - What if a family member is sick but the employee is well - do you have them come in?
 - If a person comes down with the flu after being at work it is a workers comp issue?
 - What if schools are closed?

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Expatriate Employees & Families



- Employees abroad - Do you bring them back?
 - When?
 - Families earlier?
- Employees in US – When do you send them back?
- What if they want to come back and you don't think it is appropriate?

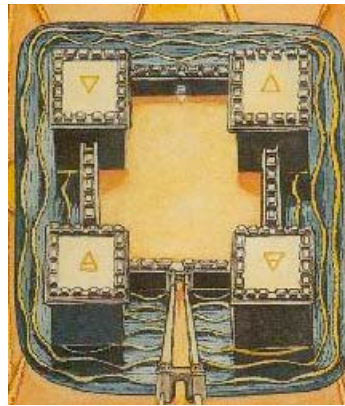
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Four Pillars

1. Education and communication
2. Social Distancing
3. Cleaning
4. Personal Protective Equipment (PPE)



Communicate

- A consistent message is critical.
- What impacts your messaging?
 - Different local conditions, varying infection rates and diverse public health instructions may require different actions.
- Proactive versus reactive communication is critical to “get in front” of the situation.
 - Employees, clients other key stakeholders need to hear a consistent message from your company.



WHO Communication Guidelines

1. Communicate in ways that build, maintain or restore trust.
2. Announce early – message timing, candor and comprehensiveness is essential.
3. Maintaining trust throughout requires transparency.
4. Understand your audience – “this is a dialogue.”
5. Communication is most effective when it is integrated with analysis and planning.

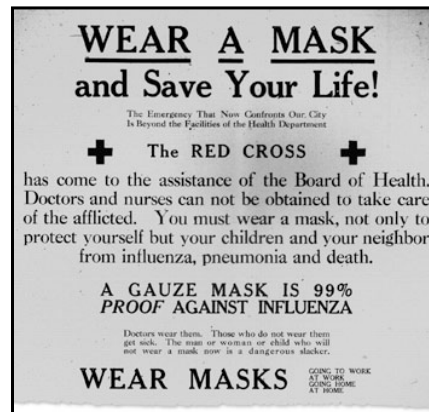
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Education

- Influenza Basics
- Workplace cleaning
- Hand washing technique
- “Cover Your Cough” campaign
- Polite social distancing
- Stay Home if you are sick policy
- Virtual meeting techniques and strategies
- Strategies to minimize face to face contact with customers



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Education- Hand Sanitizers



- Work by stripping away the outer layer of oil on the skin.
 - Must be at least 60% alcohol.
- 99.9% effective
 - Not exactly, tested on inanimate objects, not human hands.
 - Good alternative when you can't wash your hands
 - NO substitute for good hand washing.

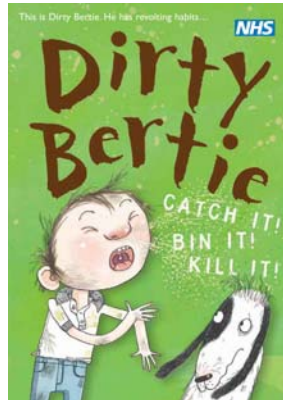
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Education Programs to Emulate

- UK
 - Catch It, Bin It, Kill It
 - Dirtie Bertie



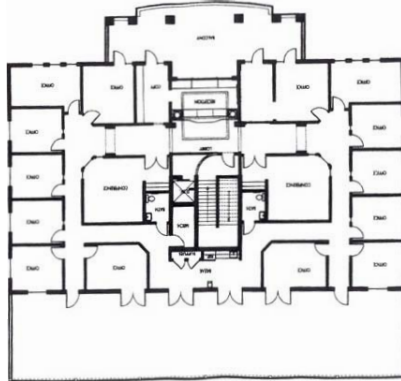
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Out of
Danger
Comes
Opportunity

Social Distancing



- Develop guidelines for social distancing.
 - Floor plans for spreading staff out at least six feet from each other.
 - Investigate shift work, weekends.
 - No shared equipment.

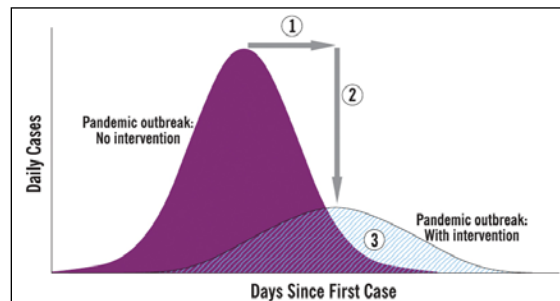
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Out of
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The Impact of Social Distancing



1. Delay outbreak peak
2. Decompress peak burden on hospitals & infrastructure
3. Diminish overall cases and health impacts

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Cleaning



- Cleaning
 - Cleaning procedures
 - Disinfectants that match the surface needs.
- Virus survival:
 - Virus lives on hard non-porous surfaces > 24 hours
 - On porous surfaces 24 - 48 hours
 - Swiss banknotes up to 17 days!

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Cleaning



- Surface cleaning and disinfecting
- **High Touch Areas and surfaces** require increased frequent and more intense cleaning
 - Doorbells
 - Intercoms
 - Handrails
 - Door handles
 - Elevator buttons
 - Steering wheels
 - Common controls (levers, buttons)

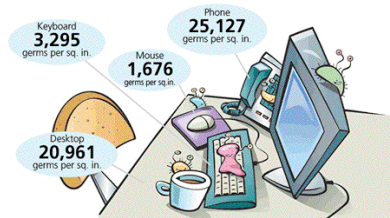
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Out of
Danger
Comes
Opportunity

Cleaning - Infection Control at Work



- Cleaning work areas
 - What are the top four germiest office work areas?
 - Telephone
 - Keyboard/Mouse
 - Desk surface
 - Doorknob

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Out of
Danger
Comes
Opportunity

Personal Protective Equipment (PPE)



- Should you wear PPE?
 - When
 - Why?
- Masks
 - N95
 - Surgical masks
- Gloves
 - Latex
 - Nitrile

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PPE Recommendations

- CDC encourages employers to stockpile facemasks so they can protect employees during a pandemic.
- Discusses various types of respirators and facemasks available for use.
- Provides estimates of the quantity of N95 respirators and/or facemasks employers should stockpile.



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What should you be doing?

- Evaluate your preparedness.
 - Revisit your plans.
 - Be ready to react to a host of different issues and situations.
 - Communicate.
- Stay tuned.
 - What happens next in anyone's best guess.
 - Anyone that tells you that know what is going to happen is kidding themselves.
- This is a wake up call
 - We only have a few months to be ready.
 - Imagine a serious seasonal flu season...

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Flu Season

- The Northern Hemisphere Flu Season is from October – May:
 - That is roughly a little more than three months or 97 days!



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Your Challenge

- Be ready for what could possibly happen – no one knows the likely results.



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Thank you

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