

INFLUENZA PANDEMIC CONTINGENCY PLAN

1. INTRODUCTION

- 1.1 An influenza pandemic (such as that caused by bird flu [avian influenza] or swine flu) has the potential to affect severely the College, its employees and their families. It requires specific planning over and above that made for other disasters.
- 1.2 This plan provides a system for the College to plan for, respond to, and recover from a pandemic, using the World Health Organisation pandemic alert phases to trigger College-level actions once evidence emerges of increased human-to-human transmission.
- 1.3 The plan focuses on:
- raising employees' awareness of the threat of a pandemic and testing their preparedness;
 - maintaining health surveillance and hygiene measures; and
 - producing action plans that are specific to each of the College's departments and locations.
- 1.4 During a pandemic, the College's pandemic response team will implement actions that are appropriate to the phase that is decided by the World Health Organisation, and other trigger points used by government and official agencies.

2. BACKGROUND

- 2.1 The World Health Organisation describes the spread and risk of contracting of infectious diseases according to six phases. Influenza (flu) is common and occurs most frequently in seasonal patterns across the world as a reaction to infection with a common form of the Influenza A virus as it gradually changes. As a result the usual level of world alertness to its spread is Phase 3. Flu occurs most frequently in the UK in the cooler months of the year and, thus, this form of flu, which affects many people each year, is described as seasonal flu. Despite the current pandemic, which is caused by a different form of the virus, the risk of contracting seasonal flu continues.
- 2.2 Rarely, does the risk of spread of seasonal flu rise higher than Phase 3 because many people in the population have at least some immunity to getting it because, previously, they have had flu caused by a very similar virus.

- 2.3 However, pandemics, which are at alert level 6 of the scale of risk of spread of infectious diseases, have occurred from time to time across the centuries. The definition of a pandemic depends on the number of regions of the world and countries in them in which cases occur and whether or not the spread of the disease is containable.
- 2.4 During the 20th Century, there were three influenza pandemics. On each occasion, the pandemic occurred because a new form of flu virus emerged to which people in the community had low levels of immunity.
- 2.5 The present form of swine flu is spreading rapidly to affect most countries and regions around the world because the virus is a new variation to which many people in communities around the world have lower levels of immunity than they do to the more usual seasonal flu.
- 2.6 Swine flu is a respiratory disease, caused by a particular strain of the influenza type A virus known as H1N1. It is similar to the strain of H1N1 that causes seasonal outbreaks of flu in humans on a regular basis, but sufficiently different to result in many people having lower levels of immunity. This latest version of H1N1 is different because it contains genetic material that is typically found in strains of the virus that affect humans, birds and swine. Although the strain may have originated in pigs, it is a wholly human disease.
- 2.7 This form of pandemic flu is likely to cause symptoms that are similar, but not necessarily the same as those caused by seasonal flu with which people are familiar.
- 2.8 This form of pandemic flu is much more likely to affect much greater numbers of people. However, it may prove to be the case that some older people have some immunity to the new form of flu because, in the past, they have come into contact with forms of flu that differ from the more common seasonal flu.
- 2.9 In the United Kingdom, the governments worked between April and June 2009 to contain the spread of swine flu. In June 2009, the World Health Organisation decided that the conditions for Phase 6 were met. This is the level at which a pandemic is declared. Since then, the decision was made at the end of June 2009 by the governments of England and Wales to move from public and personal interventions based on containing spread of the illness to the treatment phase.

3. **PLANNING FOR A PANDEMIC**

- 3.1 The Chief Executive is the College's designated pandemic co-ordinator, and a pandemic response team from across the College has been set up. The response team is:

Name	Post
Vanessa Cameron	Chief Executive
Adey Olawande	Deputy IT Manager (CRTU)
Adrian Worrall/Christine Sealey	Head of CCQI, Centre Manager (NCCMH) (CRTU)
Dave Jago	Head of Publications
Deborah Hart	Head of Communications and Policy
Gordon Malcolm	IT Manager
Lesley Cawthra	Head of Facilities
Marcia Cummings	Head of Human Resources
Paul Taylor	Head of Finance and Operations
Richard Burton/Rep from Divisions	Head of Membership Relations/Divisional Managers
Sam Holder	Office Manager (CRTU)

Other Heads of Departments and senior managers may be asked to carry out specific tasks.

3.2 The functions of the pandemic response team include:

- maintaining the team's own awareness of global developments in flu strains (including guidance on containment, prophylaxis, vaccination and treatment);
- developing training and awareness materials for the College;
- briefing senior managers; and
- ensuring links are maintained with stakeholders in planning for a pandemic flu (e.g. the College officers, members, suppliers, insurers, customers and, where relevant, the public).

3.3 Goods, services and functions of the College that are essential to its operations and survival should be defined and the College will:

- put in place a pandemic response team that will take steps to heighten awareness of the College's infection control procedures, particularly provisions covering hygiene;
- ensure that occupational health services are put into place and encourage a high take-up of annual influenza vaccinations by employees, if appropriate;
- provide updates for all workers on personal and workplace protection and actions to take as a pandemic develops (using the World Health Organisation phases);
- ensure that adequate supplies of infection control materials (e.g. alcohol-based hand cleaners or wipes) are held in preparedness for a pandemic;
- produce forecasts of employee sickness absence during a flu pandemic taking into account the potential impact of a pandemic on family members, schools, public transport and containment and quarantine measures;
- ensure that an up-to-date annual plan of events/activities is available for each department;

- develop an order of succession: i.e. plan which services can be carried out by personnel other than those normally given the task and train non-essential back-up staff to perform essential tasks;
- stockpile essential supplies, materials and equipment;
- ensure that maintenance plans are up to date to guarantee that all equipment essential to the business's operation is capable of sustained operation in the event of a pandemic;
- prepare timelines for how long it will be possible for the College to carry out its essential functions without critical supplies, personnel and equipment;
- put in place policies to enable flexible working (e.g. homeworking) in the event of a pandemic.

4. **PANDEMIC RESPONSE**

Working Practices

- 4.1 The College will consider emergency cover plans for senior managers, in particular identifying how and to whom authority would be delegated to in a pandemic.
- 4.2 The College will establish flexible working practices, enabling Heads of Departments to agree homeworking, different shift patterns, or relocation to a site more local to the employee's home where appropriate.
- 4.3 If homeworking is seen as a practical solution, the Homeworking Policy should be used.
- 4.4 Each Head of Department is to identify the key events, activities and roles in their department and assign deputies to ensure operational continuity. The identity of the deputies will be communicated to all staff in the College.
- 4.5 The list of key events and activities should cover a 12 month period of time to ensure that if the flu pandemic became severe, decisions can be taken on whether to continue or postpone a particular event/activity.
- 4.6 The College will ensure that the Department Procedure manuals are kept up-to-date to enable other staff to cover any essential work, if required.
- 4.7 Consideration may be given to assigning higher-risk roles to employees who are fit to return to work following an absence due to flu (and who have developed immunity to the disease) in the light of what is known about the nature of their illness.
- 4.8 Annual leave, flexi or toil arrangements may be reviewed when staffing levels are low to ensure that the operation of the department can continue.

Infection Control

- 4.9 During a pandemic, the College will seek to reduce the general and specific risks to members of staff by taking appropriate control actions (e.g. strengthening guidance on hand washing, unnecessary contact such as hand shaking and coughing).
- 4.10 Basic health protection advice will be issued to all staff, including guidance on:

- staying at home when sick;
- covering mouth and nose when sneezing and coughing;
- cleaning hands; and
- avoiding touching eyes, nose and mouth.

- 4.11 Additional protection measures will be taken to ensure that influenza does not spread through contaminated objects and surfaces, such as handles, railings and counters.
- 4.12 Staff with flu-like symptoms will be required to stay at home until the symptoms disappear;
- 4.13 Staff who have flu like symptoms should log onto the National Pandemic Flu Service website www.direct.gov.uk/pandemicflu or call this service on 0800 1 513 100 or 0800 1 513 200 (Textphone).
- 4.14 Staff who develop symptoms of flu while they are present at College premises should contact their Head of Department/a member of the Human Resources team who will arrange for them to wait in a quiet room while arrangements are made for them to go home.
- 4.15 In the event of a pandemic, staff who are at risk of developing influenza-related complications (e.g. pregnant workers and those people who have compromised immune systems) will be reassigned from work in which they are at high-risk of becoming infected.
- 4.16 The College will remain open throughout a pandemic, if possible, and its senior staff will communicate with staff throughout and give appropriate advice.

Health Surveillance

- 4.17 The College will implement health surveillance protocols and processes to monitor the health status of employees, members etc.
- 4.18 A health surveillance questionnaire covering swine flu symptoms will be developed and will be used to assess the fitness for work of staff who suspects they may have contracted the virus, those who have had a period of sickness absence due to the condition.

Communications

- 4.19 The College will circulate information on the pandemic flu that:
- gives information to employees on the symptoms of the influenza and modes of transmission;
 - informs employees of personal protection and response strategies (e.g. sneezing and coughing etiquette and hand washing);
 - reinforces the message that employees should not come to work if they are not well.

Business and Personal Travel

- 4.20 Only essential business travel will be permitted during a pandemic, and procedures for approving travel will be tightened.
- 4.21 Staff who are required to visit pandemic-affected areas of the world on business will be provided with appropriate health advice and personal protective equipment (e.g. alcohol-based wipes etc.), and employees will have the right to refuse to travel to such areas.
- 4.22 Staff who visit certain places for non-business purposes during a pandemic may be required to stay away from work for a period of quarantine where they would be expected to carry out work related tasks at home during their normal working hours.

5. RECOVERY FROM A PANDEMIC

- 5.1 Interventions in the case of a flu pandemic should take into account the likelihood of follow-on-waves, which may place the College in a critical response phase for up to a year.
- 5.2 Actions taken to promote recovery must be balanced with actions to prepare the College for the next wave of a pandemic.
- 5.3 Communication and information-sharing channels with external stakeholders will be kept open during the recovery phase, and regular updates on recovery interventions and preparedness for subsequent waves of a pandemic will be provided.

6. TESTING AND REVIEW

- 6.1 This plan, and the processes that it describes, will be reviewed in order to ensure that the College is fully prepared to respond and recover from a severe flu pandemic.
- 6.2 The team will monitor and assess actions as they are implemented to ensure that the plan is on target. It will be adjusted every 90 days during the early stages of a pandemic, and more frequently thereafter.

Marcia Cummings
Head of Human Resources

Vanessa Cameron
Chief Executive

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Appendix 1

Collection of Prescriptions and Delivery of Medications 'Flu Friends'

In order to ensure that the College is flexible on employees who need to collect prescriptions for someone who has swine flu/suspected swine flu and the delivery of the medication to this person 'Flu Friends', the following process will take place:

- Employees need to let their Head of Department know by 10.30 am on the day they intend to collect the prescription and deliver the medication. This should be carried out in the same way that an employee reports their sickness.
- Evidence would need to be produced to confirm that they had to collect this medication. For example, a copy of the appropriate dated prescription with confidential or sensitive details 'blacked out'.
- As with doctor's appointment etc., employees should try to pick up the prescription/medication and return it back to the person who needs it, as early as possible in the morning or late in the afternoon, as much as it is reasonably possible to do.
- For employees at Belgrave Square, we would then credit their hours to show that they either arrived at work at 10.00 am or left at 4.00 pm.
- In the case of employees at Standon House and the Divisional Offices, the employee will be seen as arriving at work at their normal starting time or leaving at their normal leaving time.

Living with someone who swine flu or suspected swine flu

The general advice for an employee if their partner, friend or children etc. who they live with displays flu like symptoms, is that they should still come to work as normal, as long as they are not demonstrating any of the symptoms themselves. However each situation will be reviewed individually and if this person has been diagnosed as having swine flu/suspected swine flu and the employee needs to stay at home to look after this person, then we will consider how this time should be given. For example, whether it is possible for them to work at home, if not whether they should take this time as flexi, annual leave etc.

29 July 2009

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