
APPENDIX A

Guidance for Federal Department Planning

Federal departments and agencies are expected to develop their own pandemic plans. This guidance is intended to facilitate department and agency planning.

Relationship between the *Strategy*, the Implementation Plan, and Department Plans

The *National Strategy for Pandemic Influenza (Strategy)*: The *Strategy* articulates the high-level principles and approach of the Federal Government to the threat of an influenza pandemic.

Implementation Plan for the National Strategy (Plan): This Plan proposes actions across the Federal Government in support of the Strategy, and describes expectations of non-Federal entities, including State, local, and tribal governments, the private sector, international partners, and individuals. While the Strategy is built upon pillars (preparedness, surveillance, response), this Plan segregates action on a functional basis (international efforts, transportation and borders, human health, animal health). It also addresses crosscutting issues such as economic issues and the relevant legal authorities in each of these functional areas. Finally, it provides a “playbook” and algorithm that the Federal Government will follow in its response to a pandemic.

Department Plans: Department plans should be operational documents. They should first articulate the manner in which the Department will discharge its responsibilities as defined in this Plan. In addition to describing the manner in which the Department will support the Federal Government efforts, plans should address the operational approach to employee safety, continuity of operations, and the manner in which the Department will communicate to its stakeholders as described below.

Guidance for Department Planning

Unlike other catastrophic events, a pandemic will not be geographically or temporally bounded, and will not directly affect the physical infrastructure of an organization. These facts lead to unique planning considerations. Institutional planning efforts should build upon existing continuity of operations planning by the organization, but be expanded to address the following questions:

1. How will the Department protect the health and safety of its employees?
2. What are the Department’s essential functions and services, and how will these be maintained in the event of significant and sustained absenteeism?
3. How will the Department support the Federal response to a pandemic, and States, localities, and tribal entities?
4. How and what will the Department communicate to its stakeholders during a pandemic?

Protecting the Health of Employees

This portion of the plan should build upon existing employee health and safety efforts. HHS, in coordination with the Department of Labor, and other departments and agencies, will provide recommendations on the protection of employee health to inform this planning.

Maintaining Essential Functions and Services

Maintaining essential functions and services relates to continuity of operations. While some of the guidance in Federal Preparedness Circular - 65, Federal Executive Branch Continuity of Operations (FPC-65) may not seem to be directly relevant to pandemic planning, most of the principles are relevant to the continuity considerations raised by a pandemic.

Supporting the Federal Response and States, Localities and Tribal Entities

This Plan provides high-level direction to departments and agencies for the actions that they are to take in support of the Strategy. Department plans should articulate the manner in which these actions will be executed by the Department, including the roles and responsibilities of operating divisions and more detailed descriptions of the ways the Department will support the Federal, State, local, and tribal response.

Communicating to Stakeholders

Every department and agency has connections to a unique group of stakeholders, whether private sector entities, non-governmental organizations (NGOs), or individuals. As the “face of the Federal Government” for these stakeholders, departments should identify the messages that it will communicate during a pandemic.

Guidance for Organizations and Businesses

Federal departments and agencies; State, local, and tribal governments and organizations; and public and private businesses must ensure preparedness and the communication of roles and responsibilities related to continuity planning and protection of personnel. In the event of pandemic influenza, organizations and businesses will play a key role in protecting employees’ health and safety as well as limiting the negative impact to the economy and society. Planning for pandemic influenza is critical. The Department of Health and Human Services (HHS) has developed the following checklist for large organizations and businesses. It identifies important, specific activities organizations and businesses can do now to prepare. Further information can be found at www.pandemicflu.gov. This checklist is applicable to all organizations and businesses, public or private.

1. Plan for the impact of a pandemic on your business or organization

- 1.1. Identify a pandemic coordinator and/or team with defined roles and responsibilities for preparedness and response planning. The planning process should include input from labor representatives.
- 1.2. Identify essential employees and other critical inputs (e.g., raw materials, suppliers, sub-contractor services/products, logistics) required to maintain business operations by location and function during a pandemic.
- 1.3. Train and prepare ancillary workforce (e.g., contractors, employees in other job titles/descriptions, retirees).

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- 1.4. Develop and plan for scenarios likely to result in an increase or decrease in demand for your products and/or services during a pandemic (e.g., effect of restrictions on mass gatherings, need for hygiene supplies).
 - 1.5. Determine potential impact of a pandemic on organization or business financials using multiple possible scenarios that affect different product lines and/or production sites.
 - 1.6. Determine potential impact of a pandemic on organization-related domestic and international travel (e.g., quarantine, border closures).
 - 1.7. Find up-to-date reliable pandemic information from community public health, emergency management, and other sources and make sustainable links.
 - 1.8. Establish an emergency communications plan and revise periodically. This plan includes identification of key contacts (with back-ups), chain of communications (including suppliers and customers), and processes for tracking and communicating business and employee status.
 - 1.9. Implement an exercise/drill to test your plan and revise periodically.
- 2. Plan for the impact of a pandemic on your employees and customers**
- 2.1. Forecast and allow for employee absence during a pandemic due to factors such as personal illness, family member illness, community containment measures and quarantines, school and/or business closures, and public transportation closures.
 - 2.2. Implement guidelines to modify frequency and type of face-to-face contact (e.g., hand-shaking, seating in meetings, office layout, shared workstation) among employees and between employees and customers.
 - 2.3. Encourage and track annual influenza vaccination for employees during regular influenza seasons.
 - 2.4. Evaluate employee access and availability to health care services during a pandemic, and improve services as needed.
 - 2.5. Evaluate and improve access to and availability to mental health and social services during a pandemic, including corporate, community, and faith-based resources, and improve services as needed.
 - 2.6. Identify employees and key customers with special needs, and incorporate the requirements of such person into your preparedness plan.
- 3. Establish policies to be implemented during a pandemic**
- 3.1. Establish policies for employee compensation and sick leave absences unique to a pandemic (e.g., non-punitive, liberal leave), including policies on when a previously ill person is no longer infectious and can return to work after illness.
 - 3.2. Establish policies for flexible worksite (e.g., telecommuting) and flexible work hours (e.g., staggering shifts).

- 3.3. Establish policies for preventing influenza spread at the worksite (e.g., promoting respiratory hygiene/cough etiquette, increasing social distancing among employees and between employees and customers, and prompt exclusion of people with influenza symptoms).
 - 3.4. Establish policies for personnel who have been exposed to pandemic influenza, are suspected to be ill, or become ill at the worksite (e.g., infection control response, immediate mandatory sick leave).
 - 3.5. Establish policies for restricting travel to affected geographic areas (consider both domestic and international sites) and for evacuating employees working in or near an affected area when an outbreak begins, and establish guidance for employees returning from affected areas.
 - 3.6. Set up authorities, triggers, and procedures for activating and terminating the organization's response plan, altering business operations (e.g., shutting down operations in affected areas), and transferring business knowledge to key employees.
- 4. Allocate resources to protect your employees and customers during a pandemic**
- 4.1. Provide sufficient and available infection control supplies. The deployment of infection control measures requires the ready availability of soap and water, hand sanitizer, tissues and waste receptacles, environmental cleaning supplies, for the duration of a pandemic.
 - 4.2. Enhance communications and information technology infrastructure as needed to support employee telecommuting and remote customer access.
 - 4.3. Ensure availability of medical consultation and advice for emergency response.
- 5. Communicate to and educate your employees**
- 5.1. Develop and disseminate programs and materials covering pandemic fundamentals (e.g., signs and symptoms of influenza, modes of transmission), personal and family protection, and response strategies (e.g., hand hygiene, cough/sneeze etiquette, contingency plans).
 - 5.2. Anticipate employee fear and anxiety, rumors, and misinformation and plan communications accordingly.
 - 5.3. Ensure communications are culturally and linguistically appropriate.
 - 5.4. Disseminate information to employees about the organizational pandemic preparedness plan.
 - 5.5. Provide information for the at-home care of ill employees and family members.
 - 5.6. Develop platforms (e.g., hotlines, dedicated websites) for communicating pandemic status and actions to employees, vendors, suppliers, and customers inside and outside the worksite in a consistent and timely way, including redundancies in the emergency contact system.
 - 5.7. Identify community sources for timely and accurate pandemic information (domestic and international) and resources for obtaining countermeasures (e.g., vaccines and antiviral medications).

6. Coordinate with external organizations and help your community

- 6.1. Collaborate with insurers, health plans, and major health care facilities to share your pandemic plans and understand their capabilities and plans.
- 6.2. Collaborate with Federal, State, and local public health agencies and/or emergency responders to participate in their planning processes, share your pandemic plans, and understand their capabilities and plans.
- 6.3. Communicate with local and/or State public health agencies and/or emergency responders about the assets and/or services your business could contribute to the community.
- 6.4. Share best practices with other businesses in your community, chambers of commerce, and associations to improve community response efforts.

Guidance for Schools (K-12)

Schools (K-12) must ensure preparedness, and the communication of roles and responsibilities related to ensuring continuity of instruction and protection of students and personnel. Local educational agencies (LEAs) play an integral role in protecting the health and safety of their district's staff, students, and their families. HHS, in coordination with the Department of Education, has developed the following checklist to assist LEAs in developing and/or improving plans to prepare for and respond to an influenza pandemic.

Building a strong relationship with the local health department is critical for developing a meaningful plan. The key planning activities in this checklist build upon existing contingency plans recommended for school districts by the Department of Education (*Practical Information on Crisis Planning: A Guide For Schools and Communities*). Further information can be found at www.pandemicflu.gov.

1. Planning and Coordination

- 1.1. Identify the authority responsible for declaring a public health emergency at the State and local levels and for officially activating the district's pandemic influenza response plan.
- 1.2. Identify for all stakeholders the legal authorities responsible for executing the community operational plan, especially those authorities responsible for case identification, isolation, quarantine, movement restriction, health care services, emergency care, and mutual aid.
- 1.3. As part of the district's crisis management plan, address pandemic influenza preparedness, involving all relevant stakeholders in the district (e.g., lead emergency response agency, district administrators, local public health representatives, school health and mental health professionals, teachers, food services directors, and parent representatives). This committee is accountable for articulating strategic priorities and overseeing the development and execution of the district's operational pandemic plan.
- 1.4. Work with local and/or State health departments and other community partners to establish organizational structures such as the Incident Command System (ICS), to manage the execution of the district's pandemic influenza plan. An ICS is a standardized organization

structure that establishes a line of authority and common terminology and procedures to be followed in response to an incident. Ensure compatibility between the district's established ICS and the local/State health department's and State education department's ICS.

- 1.5. Delineate accountability and responsibility as well as resources for key stakeholders engaged in planning and executing specific components of the operational plan. Ensure that the plan includes timelines, deliverables, and performance measures.
- 1.6. Work with your local and/or State health department and State education agencies to coordinate with their pandemic plans. Ensure that pandemic planning is coordinated with the community's pandemic plan as well as the State department of education's plan.
- 1.7. Test the linkages between the district's ICS and the local/State health department's and State education department's ICS.
- 1.8. Contribute to the local health department's operational plan for surge capacity of health care and other services to meet the needs of the community (e.g., schools designated as contingency hospitals, schools feeding vulnerable populations, community utilizing LEA's health care and mental health staff). In an affected community, at least two pandemic disease waves (about 6-8 weeks each) are likely over several months.
- 1.9. Incorporate into the pandemic influenza plan the requirements of students with special needs (e.g., low income students who rely on the school food service for daily meals), those in special facilities (e.g., juvenile justice facilities), as well as those who do not speak English as their first language.
- 1.10. Participate in exercises of the community's pandemic plan.
- 1.11. Work with the local health department to address provision of psychosocial support services for the staff, students, and their families during and after a pandemic.
- 1.12. Consider developing in concert with the public health department a surveillance system that would alert the public health department to a substantial increase in absenteeism among students.
- 1.13. Implement an exercise/drill to test your pandemic plan and revise it periodically.
- 1.14. Share what you have learned from developing your preparedness and response plan with other LEAs as well as private schools within the community to improve community response efforts.

2. Continuity of Student Learning and Core Operations

- 2.1. Develop scenarios describing the potential impact of a pandemic on student learning (e.g., student and staff absences), school closings, and extracurricular activities based on having various levels of illness among students and staff.
- 2.2. Develop alternative procedures to ensure continuity of instruction (e.g., web-based distance instruction, telephone trees, mailed lessons and assignments, instruction via local radio or television stations) in the event of district school closures.

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- 2.3. Develop a continuity of operations plan for essential central office functions (including payroll, ongoing communication with students and parents).

3. Infection Control Policies and Procedures

- 3.1. Work with local health department to implement effective infection prevention policies and procedures that help limit the spread of influenza at schools in the district (e.g., promotion of hand hygiene, cough/sneeze etiquette). Make good hygiene a habit now in order to help protect children from many infectious diseases such as influenza.
- 3.2. Provide sufficient and accessible infection prevention supplies (e.g., soap, alcohol-based/waterless hand hygiene products, tissues and receptacles for their disposal).
- 3.3. Establish policies and procedures for students and staff sick leave absences unique to a pandemic influenza (e.g., non-punitive, liberal leave).
- 3.4. Establish sick leave policies for staff and students suspected to be ill or who become ill at school. Staff and students with known or suspected pandemic influenza should not remain at school and should return only after their symptoms resolve and they are physically ready to return to school.
- 3.5. Establish policies for transporting ill students.
- 3.6. Ensure that the LEA pandemic plan for school-based health facilities conform to those recommended for health care settings.

4. Communications Planning

- 4.1. Assess readiness to meet communications needs in preparation for an influenza pandemic, including regular review, testing, and updating of communications plans.
- 4.2. Develop a dissemination plan for communication with staff, students, and families, including lead spokespersons and links to other communication networks.
- 4.3. Ensure language, culture, and reading level appropriateness in communications by including community leaders representing different language and/or ethnic groups on the planning committee, asking for their participation in both document planning and the dissemination of public health messages within their communities.
- 4.4. Develop and test platforms (e.g., hotlines, telephone trees, dedicated websites, local radio or TV stations) for communicating pandemic status and actions to school district staff, students, and families.
- 4.5. Develop and maintain up-to-date communications contacts of key public health and education stakeholders and use the network to provide regular updates as the influenza pandemic unfolds.
- 4.6. Ensure the provision of redundant communication systems/channels that allow for the expedited transmission and receipt of information.

- 4.7. Advise district staff, students, and families where to find up-to-date and reliable pandemic information from Federal, State, and local public health sources.
- 4.8. Disseminate information about the LEA's pandemic influenza preparedness and response plan (e.g., continuity of instruction, community containment measures).
- 4.9. Disseminate information from public health sources covering routine infection control (e.g., hand hygiene, cough/sneeze etiquette), pandemic influenza fundamentals (e.g., signs and symptoms of influenza, modes of transmission), as well as personal and family protection and response strategies (e.g., guidance for the at-home care of ill students and family members).
- 4.10. Anticipate the potential fear and anxiety of staff, students, and families as a result of rumors and misinformation and plan communications accordingly.

Guidance for Colleges and Universities

Colleges and universities must ensure preparedness, and the communication of roles and responsibilities related to ensuring continuity of instruction and protection of students and personnel. In the event of an influenza pandemic, colleges and universities will play an integral role in protecting the health and safety of students, employees and their families. HHS, in coordination with the Department of Education, has developed the following checklist as a framework to assist colleges and universities to develop and/or improve plans to prepare for and respond to an influenza pandemic. Further information can be found at www.pandemicflu.gov.

1. Planning and Coordination

- 1.1. Identify a pandemic coordinator and response team (including campus health services and mental health staff, student housing personnel, security, communications staff, physical plant staff, food services director, academic staff, and student representatives) with defined roles and responsibilities for preparedness, response, and recovery planning.
- 1.2. Delineate accountability and responsibility as well as resources for key stakeholders engaged in planning and executing specific components of the operational plan. Ensure that the plan includes timelines, deliverables, and performance measures.
- 1.3. Incorporate into the pandemic plan scenarios that address college/university functioning based upon having various levels of illness in students and employees and different types of community containment interventions. Plan for different outbreak scenarios including variations in severity of illness, mode of transmission, and rates of infection in the community. Issues to consider include:
 - cancellation of classes, sporting events, and/or public events;
 - closure of campus, student housing, and/or public transportation;
 - assessment of the suitability of student housing for quarantine of exposed and/or ill students;
 - contingency plans for students who depend on student housing and food services (e.g., international students or students who live too far away to travel home);

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- contingency plans for maintaining research laboratories, particularly those using animals; and
 - stockpiling non-perishable food and equipment that may be needed in the case of an influenza pandemic.
- 1.4. Work with local public health authorities to identify legal authority, decision makers, trigger points, and thresholds to institute community containment measures such as closing (and re-opening) the college/university. Identify and review the college/university's legal responsibilities and authorities for executing infection control measures, including case identification, reporting information about ill students and employees, isolation, movement restriction, and provision of health care on campus.
 - 1.5. Ensure that pandemic influenza planning is consistent with any existing college/university emergency operations plan, and is coordinated with the pandemic plan of the community and of the State higher education agency.
 - 1.6. Work with the local health department to discuss an operational plan for surge capacity for health care and other mental health and social services to meet the needs of the college/university and community during and after a pandemic.
 - 1.7. Establish an emergency communication plan and revise regularly. This plan should identify key contacts with local and State public health officials as well as the State's higher education officials (including back-ups) and the chain of communications, including alternate mechanisms.
 - 1.8. Test the linkages between the college/university's ICS and the ICS of the local and/or State health department and the State's higher education agency.
 - 1.9. Implement an exercise/drill to test your plan, and revise it regularly.
 - 1.10. Participate in exercises of the community's pandemic plan.
 - 1.11. Share what you have learned from developing your preparedness and response plan with other colleges/universities to improve community response efforts.
- 2. Continuity of Student Learning and Operations**
 - 2.1. Develop and disseminate alternative procedures to ensure continuity of instruction (e.g., web-based distance instruction, telephone trees, mailed lessons and assignments, instruction via local radio or television stations) in the event of college/university closures.
 - 2.2. Develop a continuity of operations plan for maintaining the essential operations of the college/university including payroll; ongoing communication with employees, students and families; security; maintenance; as well as housekeeping and food service for student housing.
- 3. Infection Control Policies and Procedures**
 - 3.1. Implement infection control policies and procedures that help limit the spread of influenza on campus (e.g., promotion of hand hygiene, cough/sneeze etiquette). Make good hygiene a
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habit now in order to help protect employees and students from many infectious diseases such as influenza. Encourage students and staff to get annual influenza vaccine.

- 3.2. Procure, store, and provide sufficient and accessible infection prevention supplies (e.g., soap, alcohol-based hand hygiene products, tissues and receptacles for their disposal).
- 3.3. Establish policies for employee and student sick-leave absences unique to pandemic influenza (e.g., non-punitive, liberal leave).
- 3.4. Establish sick leave policies for employees and students suspected to be ill or who become ill on campus. Employees and students with known or suspected pandemic influenza should not remain on campus and should return only after their symptoms resolve and they are physically ready to return to campus.
- 3.5. Establish a pandemic plan for campus-based health care facilities that addresses issues unique to health care settings. Ensure health services and clinics have identified critical supplies needed to support a surge in demand and take steps to have those supplies on hand.
- 3.6. Adopt CDC travel recommendations during an influenza pandemic, and be able to support voluntary and mandatory movement restrictions. Recommendations may include restricting travel to and from affected domestic and international areas, recalling non-essential employees working in or near an affected area when an outbreak begins, and distributing health information to persons who are returning from affected areas.

4. Communications Planning

- 4.1. Assess readiness to meet communications needs in preparation for an influenza pandemic, including regular review, testing, and updating of communications plans that link with public health authorities and other key stakeholders.
- 4.2. Develop a dissemination plan or communication with employees, students, and families, including lead spokespersons and links to other communication networks. Ensure language, culture, and reading level appropriateness in communications.
- 4.3. Develop and test platforms (e.g., hotlines, telephone trees, dedicated websites, local radio or television) for communicating college/university response and actions to employees, students, and families.
- 4.4. Ensure the provision of redundant communication systems/channels that allow for the expedited transmission and receipt of information.
- 4.5. Advise employees and students where to find up-to-date and reliable pandemic information from Federal, State, and local public health sources.
- 4.6. Disseminate information about the college/university's pandemic preparedness and response plan. This should include the potential impact of a pandemic on student housing closure, and the contingency plans for students who depend on student housing and campus food service, including how student safety will be maintained for those who remain in student housing.

- 4.7. Disseminate information from public health sources covering routine infection control (e.g., hand hygiene, cough/sneeze etiquette), pandemic influenza fundamentals (e.g., signs and symptoms of influenza, modes of transmission), personal and family protection and response strategies, and the at-home care of ill students or employees and their family members.
- 4.8. Anticipate and plan communications to address the potential fear and anxiety of employees, students, and families that may result from rumors or misinformation.

Guidance for Faith-Based and Community-Based Organizations

The collaboration of faith-based organizations (FBOs) and community-based organizations (CBOs) with public health agencies will be essential in providing the public's health and safety if and when an influenza pandemic occurs. HHS has developed the following checklist for FBOs and CBOs. This checklist identifies important, specific activities FBOs and CBOs can do now to prepare. Further information can be found at www.pandemicflu.gov.

1. Plan for the impact of a pandemic on your organization and its mission

- 1.1. Assign key staff with the authority to develop, maintain, and act upon an influenza pandemic preparedness and response plan.
- 1.2. Determine the potential impact of a pandemic on your organization's usual activities and services. Plan for situations likely to require increasing, decreasing, or altering the services your organization delivers.
- 1.3. Determine the potential impact of a pandemic on outside resources that your organization depends on to deliver its services (e.g., supplies, travel).
- 1.4. Outline what the organizational structure will be during an emergency and revise periodically. The outline should identify key contacts with multiple back-ups, roles and responsibilities, and who is supposed to report to whom.
- 1.5. Identify and train essential staff (including full-time, part-time, and unpaid or volunteer staff) needed to carry on your organization's work during a pandemic. Include back up plans, cross-train staff in other jobs so that if staff are sick, others are ready to come in to carry on the work.
- 1.6. Test your response and preparedness plan using an exercise or drill, and review and revise your plan as needed.

2. Communicate with and educate your staff, members, and persons in the community that you serve

- 2.1. Find up-to-date, reliable pandemic information and other public health advisories from State and local health departments, emergency management agencies, and HHS. Make this information available to your organization and others.
- 2.2. Distribute materials with basic information about pandemic influenza: signs and symptoms, how it is spread, ways to protect yourself and your family (e.g., respiratory hygiene and

cough etiquette), family preparedness plans, and how to care for ill persons at home.

- 2.3. When appropriate, include basic information about pandemic influenza in public meetings (e.g., sermons, classes, trainings, small group meetings, announcements).
 - 2.4. Share information about your pandemic preparedness and response plan with staff, members, and persons in the communities that you serve.
 - 2.5. Develop tools to communicate to staff, members, and persons in the communities that you serve information about pandemic status and your organization's actions. This might include websites, flyers, local newspaper announcements, pre-recorded widely distributed phone messages, etc.
 - 2.6. Consider your organization's unique contribution to addressing rumors, misinformation, fear, and anxiety.
 - 2.7. Advise staff, members, and persons in the communities you serve to follow information provided by public health authorities -- State and local health departments, emergency management agencies, and HHS.
 - 2.8. Ensure that what you communicate is appropriate for the cultures, languages, and reading levels of your staff, members, and persons in the communities that you serve.
- 3. Plan for the impact of a pandemic on your staff, members, and the communities that you serve**
- 3.1. Plan for staff absences during a pandemic due to personal and/or family illnesses, quarantines, and school, business, and public transportation closures. Staff may include full-time, part-time, and volunteer personnel.
 - 3.2. Work with local health authorities to encourage yearly influenza vaccination for staff, members, and persons in the communities that you serve.
 - 3.3. Evaluate access to mental health and social services during a pandemic for your staff, members, and persons in the communities that you serve; improve access to these services as needed.
 - 3.4. Identify persons with special needs (e.g., elderly, disabled, limited English speakers) and be sure to include their needs in your response and preparedness plan. Establish relationships with them in advance so they will expect and trust your presence during a crisis.
- 4. Set up policies to follow during a pandemic**
- 4.1. Set up policies for non-penalized leave for personal illness or care for sick family members during a pandemic.
 - 4.2. Set up mandatory sick-leave policies for staff suspected to be ill, or who become ill at the worksite. Employees should remain at home until their symptoms resolve and they are physically ready to return to duty.
 - 4.3. Set up policies for flexible work hours and working from home.

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- 4.4. Evaluate your organization's usual activities and services (including rites and religious practices if applicable) to identify those that may facilitate virus spread from person to person. Set up policies to modify these activities to prevent the spread of pandemic influenza (e.g., guidance for respiratory hygiene and cough etiquette, and instructions for persons with influenza symptoms to stay home and phone the organization rather than visit in person).
 - 4.5. Follow HHS travel recommendations during an influenza pandemic. Recommendations may include restricting travel to affected domestic and international sites, recalling non-essential staff working in or near an affected site when an outbreak begins, and distributing health information to persons who are returning from affected areas.
 - 4.6. Set procedures for activating your organization's response plan when an influenza pandemic is declared by public health authorities and altering your organization's operations accordingly.
- 5. Allocate resources to protect your staff, members, and persons in the communities that you serve during a pandemic**
- 5.1. Determine the amount of supplies needed to promote respiratory hygiene and cough etiquette and how they will be obtained.
 - 5.2. Consider focusing your organization's efforts during a pandemic to providing services that are most needed during the emergency (e.g., mental/spiritual health or social services).
- 6. Coordinate with external organizations and help your community**
- 6.1. Understand the roles of Federal, State, and local public health agencies and emergency responders and what to expect and what not to expect from each in the event of a pandemic.
 - 6.2. Work with local and/or State public health agencies, emergency responders, local health care facilities, and insurers to understand their plans and what they can provide, share about your preparedness and response plan and what your organization is able to contribute, and take part in their planning. Assign a point of contact to maximize communication between your organization and your State and local public health systems.
 - 6.3. Coordinate with emergency responders and local health care facilities to improve availability of medical advice and timely/urgent health care services for your staff, members, and persons in the communities that you serve.
 - 6.4. Share what you've learned from developing your preparedness and response plan with other FBOs and CBOs to improve community response efforts.
 - 6.5. Work together with other FBOs and CBOs in your local area and through networks (e.g., denominations, associations) to help your communities prepare for pandemic influenza.

Planning Guidance for Individuals and Families

Individuals and families can prepare for an influenza pandemic now. This guidance is designed to help you understand the threat of a pandemic influenza outbreak in our country and your community.

It describes common sense actions that you can take in preparing for a pandemic. Each individual and family should know both the magnitude of what can happen during a pandemic outbreak and what actions you can take to help lessen the impact of an influenza pandemic on you and your community. Further information including a planning checklist can be found at www.pandemicflu.gov.

Pandemic Influenza: What Individuals Need to Know

An influenza (flu) pandemic is a widespread outbreak of disease that occurs when a new influenza virus appears that people have not been exposed to before. Pandemics are different from seasonal outbreaks of influenza. Seasonal influenza outbreaks are caused by viruses that people have already been exposed to; influenza shots are available to help prevent widespread illness, and impacts on society are less severe. Pandemic influenza spreads easily from person to person and can cause serious illness because people do not have immunity to the new virus.

Some Differences between Seasonal Flu and Pandemic Flu

Seasonal Flu	Pandemic Flu
Caused by influenza viruses that are similar to those already affecting people.	Caused by a new influenza virus that people have not been exposed to before. Likely to be more severe, affect more people, and cause more deaths than seasonal influenza because people will not have immunity to the new virus.
Symptoms include fever, cough, runny nose, and muscle pain. Deaths can be caused by complications such as pneumonia.	Symptoms similar to the common flu may be more severe and complications more serious.
Healthy adults usually not at risk for serious complications (the very young, the elderly, and those with certain underlying health conditions at increased risk for serious complications).	Healthy adults may be at increased risk for serious complications.
Generally causes modest impact on society (e.g., some school closings, encouragement of people who are sick to stay home).	A severe pandemic could change the patterns of daily life for some time. People may choose to stay home to keep away from others who are sick. Also, people may need to stay home to care for ill family and loved ones. Travel and public gatherings could be limited. Basic services and access to supplies could be disrupted.

A pandemic may come and go in waves, each of which can last for months at a time. Everyday life could be disrupted due to people in communities across the country becoming ill at the same time. These disruptions could include everything from school and business closings to interruption of basic services such as public transportation and health care. An especially severe influenza pandemic could lead to high levels of illness, death, social disruption, and economic loss.

Importance and Benefits of Being Prepared

It is difficult to predict when the next influenza pandemic will occur or how severe it will be. The effects of a pandemic can be lessened if preparations are made ahead of time. When a pandemic starts, everyone around the world could be at risk. The United States has been working closely with other countries and the World Health Organization (WHO) to strengthen systems to detect outbreaks of influenza that might cause a pandemic.

A pandemic would touch every aspect of society, and so every aspect of society must begin to prepare. State, tribal, and local governments are developing, improving, and testing their plans for an influenza pandemic. Businesses, schools, universities, and other community organizations are preparing plans as well.

As you begin your individual or family planning, you may want to review your State's planning efforts and those of your local public health and emergency preparedness officials. Many of the State plans and other planning information can be found at www.pandemicflu.gov.

The Department of Health and Human Services (HHS) and other Federal agencies are providing funding, advice, and other support to your State. The Federal Government will provide up-to-date information and guidance to the public if an influenza pandemic unfolds. For reliable, accurate, and timely information, visit the Federal Government's official website at www.pandemicflu.gov.

The benefits of preparation will be many. States and communities will be better prepared for any disaster. Preparation will bring peace of mind and the confidence that we are ready to fight an influenza pandemic.

Pandemic Influenza - Challenges and Preparation

As you plan, it is important to think about the challenges that you might face, particularly if a pandemic is severe. It may take time to find the answers to these challenges. The following are some situations that could be caused by a severe pandemic and possible ways to address them. A series of checklists have been prepared to help guide those efforts, to organize our national thinking, and bring consistency to our efforts. You will find two checklists (Pandemic Flu Planning Checklist for Individuals and Families; Family Emergency Health Information Sheet) to help you plan at www.pandemicflu.gov.

Social Disruption May Be Widespread

- Plan for the possibility that usual services may be disrupted. These could include services provided by hospitals and other health care facilities, banks, stores, restaurants, government offices, and post offices.
- Prepare backup plans in case public gatherings, such as volunteer meetings and worship services, are canceled.
- Consider how to care for people with special needs in case the services they rely on are not available.

Being Able to Work May Be Difficult or Impossible

- Find out if you can work from home.

- Ask your employer about how business will continue during a pandemic. (A Business Pandemic Influenza Planning Checklist is available at www.pandemicflu.gov.)
- Plan for the possible reduction or loss of income if you are unable to work or your place of employment is closed.
- Check with your employer or union about leave policies.

Schools May Be Closed for an Extended Period of Time

- Help schools plan for pandemic influenza. Talk to the school nurse or the health center. Talk to your teachers, administrators, and parent-teacher organizations.
- Plan home learning activities and exercises. Have materials, such as books, on hand. Also plan recreational activities that your children can do at home.
- Consider childcare needs.

Transportation Services May Be Disrupted

- Think about how you can rely less on public transportation during a pandemic. For example, store food and other essential supplies so you can make fewer trips to the store.
- Prepare backup plans for taking care of loved ones who are far away.
- Consider other ways to get to work, or, if you can, work at home.

People Will Need Advice and Help at Work and Home

- Think about what information the people in your workplace will need if you are a manager. This may include information about insurance, leave policies, working from home, possible loss of income, and when not to come to work if sick. (A Business Pandemic Influenza Planning Checklist is available at www.pandemicflu.gov.)
- Meet with your colleagues and make lists of things that you will need to know and what actions can be taken.
- Find volunteers who want to help people in need, such as elderly neighbors, single parents of small children, or people without the resources to get the medical help they will need.
- Identify other information resources in your community, such as mental health hotlines, public health hotlines, or electronic bulletin boards.
- Find support systems—people who are thinking about the same issues you are thinking about. Share ideas.

Be Prepared

Stock a supply of water and food. During a pandemic you may not be able to get to a store. Even if you can get to a store, it may be out of supplies. Public waterworks services may also be interrupted. Stocking supplies can be useful in other types of emergencies, such as power outages and disasters. Store foods that:

- are nonperishable (will keep for a long time) and don't require refrigeration.
- are easy to prepare in case you are unable to cook.
- require little or no water, so you can conserve water for drinking.

Stay Healthy

Take common-sense steps to limit the spread of germs. Make good hygiene a habit.

- Wash hands frequently with soap and water.
- Cover your mouth and nose with a tissue when you cough or sneeze.
- Put used tissues in a waste basket.
- Cough or sneeze into your upper sleeve if you don't have a tissue.
- Clean your hands after coughing or sneezing. Use soap and water or an alcohol-based hand cleaner.
- Stay at home if you are sick.

It is always a good idea to practice good health habits.

- Eat a balanced diet. Be sure to eat a variety of foods, including plenty of vegetables, fruits, and whole grain products. Also include low-fat dairy products, lean meats, poultry, fish, and beans. Drink lots of water and go easy on salt, sugar, alcohol, and saturated fat.
- Exercise on a regular basis and get plenty of rest.

Will the seasonal flu shot protect me against pandemic influenza?

- No, it won't protect you against pandemic influenza. But flu shots can help you to stay healthy.
- Get a flu shot to help protect yourself from seasonal influenza.
- Get a pneumonia shot to prevent secondary infection if you are over the age of 65 or have a chronic illness such as diabetes or asthma.
- Make sure that your family's immunizations are up-to-date.

Get Informed

- Knowing the facts is the best preparation. Identify sources you can count on for reliable information. If a pandemic occurs, having accurate and reliable information will be critical.
- Reliable, accurate, and timely information is available at **www.pandemicflu.gov**.
- Another source for information on pandemic influenza is the Centers for Disease Control and Prevention (CDC) Hotline at: 1-800-CDC-INFO (1-800-232-4636). This line is available in English and Spanish, 24 hours a day, 7 days a week.
- Look for information on your local and State government websites. Links are available to each State department of public health at **www.pandemicflu.gov**.
- Listen to local and national radio, watch news reports on television, and read your newspaper and other sources of printed and web-based information.
- Talk to your local health care providers and public health officials.

Pandemic Influenza - Prevention and Treatment

You have an essential role in preparing and making sure you are informed of prevention activities in your local area. Each community must have plans, each State and each agency of the Federal Government

must work together. The Federal Government is working to boost our international and domestic disease monitoring, rebuild our vaccine industry, build stockpiles of medicines, and support research into new treatments and medicines. Your State will be taking steps to monitor and build supplies too.

Vaccine

Influenza vaccines are designed to protect against specific influenza viruses. While there is currently no pandemic influenza in the world, the Federal Government is making vaccines for several existing bird influenza viruses that may provide some protection should one of these viruses change and cause an influenza pandemic. A specific pandemic influenza vaccine cannot be produced until a pandemic influenza virus strain emerges and is identified. Once a pandemic influenza virus has been identified, it will likely take 4-6 months to develop, test, and begin producing a vaccine.

Efforts are being made to increase vaccine-manufacturing capacity in the United States so that supplies of vaccines would be more readily available. In addition, research is underway to develop new ways to produce vaccines more quickly.

Treatment

A number of antiviral drugs are approved by the U.S. Food and Drug Administration to treat and sometimes prevent seasonal influenza. Some of these antiviral medications may be effective in treating pandemic influenza. These drugs may help prevent infection in people at risk and shorten the duration of symptoms in those infected with influenza. However, it is unlikely that antiviral medications alone would effectively contain the spread of pandemic influenza. The Federal Government is stockpiling antiviral medications that would most likely be used in the early stages of an influenza pandemic. There are efforts to find new drugs and to increase the supply of antiviral medications. Antiviral medications are available by prescription only and not over the counter.

Questions and Answers

Will bird flu cause the next influenza pandemic?

Avian influenza (bird flu) is a disease of wild and farm birds caused by influenza viruses. Bird flu viruses do not usually infect humans, but since 1997 there have been a number of confirmed cases of human infection from bird flu viruses. Most of these resulted from direct or close contact with infected birds (e.g., domesticated chickens, ducks, turkeys).

The spread of bird flu viruses from an infected person to another person has been reported very rarely and has not been reported to continue beyond one person. A worldwide pandemic could occur if a bird flu virus were to change so that it could easily be passed from person to person. Experts around the world are watching for changes in bird flu viruses that could lead to an influenza pandemic.

Is it safe to eat poultry?

Yes, it is safe to eat properly cooked poultry. Cooking destroys germs, including the bird flu virus. The United States bans imports of poultry and poultry products from countries where bird flu has been found.

Guidelines for the safe preparation of poultry include the following:

- Wash hands before and after handling food.
- Keep raw poultry and its juices away from other foods.
- Keep hands, utensils, and surfaces, such as cutting boards, clean.
- Use a food thermometer to ensure poultry has been fully cooked. More information on how to properly cook poultry can be found at www.usda.gov/birdflu.

What types of birds can carry bird flu viruses?

Wild birds can carry bird flu viruses but usually do not get sick from them. Domesticated birds (e.g., farm-raised chickens, ducks, and turkeys) can become sick with bird flu if they come into contact with an infected wild bird. Domesticated birds usually die from the disease.

What is the U.S. Government doing to prepare for pandemic influenza?

The U.S. Government has been preparing for pandemic influenza for several years. In November 2005, the President announced the *National Strategy for Pandemic Influenza*. Ongoing preparations include the following:

- Working with WHO and with other nations to help detect human cases of bird flu and contain an influenza pandemic, if one begins.
- Supporting the manufacturing and testing of influenza vaccines, including finding more reliable and quicker ways to make large quantities of vaccines.
- Developing a national stockpile of antiviral drugs to help treat and control the spread of disease.
- Supporting the efforts of Federal, State, tribal, and local health agencies to prepare for and respond to pandemic influenza.
- Working with Federal agencies to prepare and to encourage communities, businesses, and organizations to plan for pandemic influenza.