CORRECTIONAL FACILITIES PANDEMIC INFLUENZA PLANNING CHECKLIST

Planning for pandemic influenza is critical for ensuring a sustainable health care delivery system within correctional facility settings. The Department of Health and Human Services (HHS) has developed the following checklist to help prison and jail systems to self-assess and improve their preparedness for responding to pandemic influenza. Given the differences among systems, individual facilities should adapt this checklist to meet their unique needs. This checklist should be used as one tool in developing an overall pandemic influenza plan for correctional systems as well as individual facilities. Responsible officials should incorporate information from State, regional and local health departments and emergency management agencies/authorities into the system and individual facility pandemic influenza plan. An additional benefit of this planning is that it can be used for other types of disaster preparedness.

All contact information specified below should include the names, titles, and contact information (i.e., office phone and cell phone numbers and e-mail and physical addresses) for individuals or organizations. These sheets should be provided to the system-level office (for prison and large jail systems). Further information can be found at www.pandemicflu.gov. For information on general emergency planning and continuity of operations, see www.readv.gov.

Develop a pandemic influenza preparedness and response plan Completed In Progress **Not Started** Incorporate pandemic influenza preparedness into correctional facility or system disaster planning and exercises. Review Federal, State, and local public health and emergency management agencies' pandemic plans in areas where you operate or have jurisdictional responsibilities. Ensure that your plan is NIMS (National Incident Management System) compliant and align your plan with the local Incident Command System (ICS) and local pandemic influenza plans to achieve a unified approach to incident management. See "State and Local Governments," www.pandemicflu.gov/plan/states/index.html and http://www.fema.gov/emergency/nims/index.shtm. Assign responsibility for coordinating pandemic influenza preparedness planning to a person with appropriate training and authority. Verify Command and Control areas of responsibility and authority during a pandemic. Develop a plan for back-up if that person becomes ill during a pandemic. Pandemic Influenza Alternate PIP Coordinator Preparedness (PIP) Coordinator Name Title **Contact Information** (Office phone, cell phone, e-mail) Form a multidisciplinary planning committee to address pandemic influenza preparedness specifically. Alternatively, pandemic influenza preparedness can be addressed by an existing committee with appropriate skills and knowledge and relevant mission. Committee Name: Appoint members of the planning committee to include (as applicable in different settings) the representatives listed in the table below: Name and Title Committee **Contact Information** Alternate Representative (office phone, cell Representative phone, e-mail) **PIP Coordinator** Secretary/ Commissioner/ Warden/Sheriff/ Director **Medical Director Health Services** Representative(s)



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Develop a pandemic influenza preparedness and response plan (continued)

Completed	In Progress	Not Started						
			Committee Representative	Name a	nd Title	Contact Info (office phone phone, e-mai	, cell	Alternate Representative
			Infection control expert					
			Environment Health Officer/POC					
			Maintenance Director					
			Staff Trainer(s)					
			Dietary Services Coordinator/Director					
			Pharmacist					
			Security Coordinator/ Director					
			Human Resources Representative					
			Communications Director					
			Others					
			Establish points of contact departments (table below (See: http://www.pandemi	is provid	ed as a guide).	•	the local ar	nd State health
			Agency	Conta	act Name(s) and	Title(s)		Information (office ell phone, e-mail)
			Local Health Dept.					
			State Health Dept.					
			State Corrections Dept.					
			Establish linkages with locas a guide).	cal, regio	onal or State emer	gency prepared	ness group	s (table below is provided
			Emergency Preparedness Groups	Con	tact Name and T	Fitle		Information (office ell phone, e-mail)
			City					
			County					
			Other regional					
			Identify one or more repre hospitalization of seriously (table below is provided as	y ill inma	ates or facilitate to	e hospitals as co cansfer of patier	nts into the	correctional facility
			Acute Care Hospital		Liaison(s) Name and Title	;		t Information phone, cell phone,

Develop a pandemic influenza preparedness and response plan (continued) Completed In Progress **Not Started** Designate authority (and back-up individuals) to activate the correctional system pandemic influenza Authority Name Title **Contact Information** (Office phone, cell phone, e-mail) Set up chain of command and procedures to signal activation of the agency's influenza pandemic response plan, altering operations (e.g., shutting down non-critical operations or operations in affected areas or concentrating resources on critical activities), as well as returning to normal operations. Ensure all staff are familiar with the local Incident Command System (ICS) and understand the roles and persons assigned within that structure. See http://www.fema.gov/emergency/nims/index.shtm for more information. Determine the potential impact of a pandemic on the agency or organization by using multiple possible scenarios of varying severity relative to illness, absenteeism, supplies, availability of resources, access to legal system representatives, etc. Incorporate pandemic influenza into agency emergency management planning and exercise. Obtain relevant sections of the Department of Health and Human Services Pandemic Influenza Plan (available at http://www.hhs.gov/pandemicflu/plan) for incorporation into the system or facility plan, as appropriate. Obtain copies of available State, regional and local pandemic plans for incorporation into the system or facility plan, as applicable. (When appropriate, facility representatives should participate in development of these plans). (See: http://www.pandemicflu.gov/plan/stateplans.html). Describe organizational structure that will be used to implement the plan. Include provisions for timely and periodic review and revision of the plan, including dated history of revisions and clear identification of most current plan. Include allowances for the administrator or other authorized personnel to modify the plan in response to evolving circumstances that may represent a threat to the well-being and safety of the inmates and/or personnel. Make sure that the plan checklist includes the date and signature of senior managerial representatives to confirm understanding and general conformity with the plan details. Submit a completed plan to the Secretary/ Commissioner's Office by [insert date] for review and approval by [insert dates completed and sent for review]. Elements of an Influenza Pandemic Plan for Each System and Facility Should Include the Following: In Progress Not Started Completed Assign a person(s) (with a back-up identified) the responsibility for monitoring Federal and State public health advisories using the internet (www.pandemicflu.gov) and other appropriate information sources and to notify the pandemic influenza coordinator and the planning committee (system and facility levels) when pandemic influenza is reported in the United States and when it is reported within the geographic area of the correctional facility. **Responsible Person** Alternate Name Title **Contact Information** (Office phone, cell phone, e-mail)

Completed	In Progress	Not Started				
			A plan for surveillance (mo and staff (see www.hhs.gov/	nitoring) and detection of seasonal and <u>pandemicflu/plan/sup1.html)</u> . The pla	d pandemic influenza in inmates in should ensure:	
			Develop a written protocol for monitoring seasonal influenza-like illness in inmates and staff (i.e., weekly or daily number of inmates and staff with influenza-like illness). See: http://www.cdc.gov/flu/professionals/diagnosis/ . Institute a system for tracking illness trends during seasonal influenza to ensure that the facility can detect stressors that may affect operating capacity, including staffing and supply needs, during a pandemic.			
				ction, evaluation, diagnosis and treatmer enza. (see: http://www.hhs.gov/pandemi		
			Institute a system to monitor and internally review transmission of pandemic influenza among inmates and staff in the facility. Information from this monitoring system is used to implement containment measures (e.g., isolation, cohorting).			
			A communication plan. See	: http://www.hhs.gov/pandemicflu/plan	n/sup10.html.	
			Assign responsibility for con system for planning and resp	nmunication with public health authoritie onse.	es and within the corrections	
				Responsible Person	Alternate	
			Name			
			Title			
			Contact Information (Office phone, cell phone, e-mail)			
			laboratories, relevant commu and update as necessary inclu	als/health facilities, emergency medical s nity organizations (including those involuding points of contact to facilitate commions. (Attach a copy to the pandemic pla	lved with disaster preparedness) nunication across organizational	
			and impact of pandemic influ	nmunication with inmates, staff, and the denza in the facility. Develop a plan for b ne voice that speaks for the facility during te information.	ack-up if that person becomes ill	
				are available in appropriate formats for irments) and limited English proficiency.	individuals with disabilities	
			and training program to ens	lan. Each system and each facility should ure that all personnel understand the im enza and the current system/facility and	plications of, and control	
				coordinating education and training on paccess to available programs, as well as training		
			CD-ROM and local training	oll sources for alternative training options programs conducted by the health depart clinical and non-clinical education for cotyprofessionals/training/).	ment, area hospitals, local	
			disabilities), and reading-leve support education and trainin	format (i.e., prepared for individuals will appropriate materials (e.g., brochures, g programs of personnel and inmates. (Sionals/infectioncontrol/index.htm).	pamphlets) to supplement and	
				ining includes information on infection on, such as hand hygiene and sneeze/cough		
			Pre-identify, perform backgro surge capacity.	ound checks, credential and train personn	nel who will be brought in for	
			An infection control plan for includes the following:	or managing inmates and visitors with	pandemic influenza that	
			using one or more of the follo 2) Placing inmates with symp	es for cohorting inmates with known or sowing strategies: 1) Confining ill and expotoms of pandemic influenza together in tic inmates. Policies and protocols for reworking on other units.	posed inmates to their cells, one area of the facility, or closing	

Completed	In Progress	Not Started	
			Develop policies and procedures for handling intake, influenza screening, processing and placement of new inmates with known or suspected pandemic influenza.
			Design an infection control policy for the use of recommended personal protective equipment and infection control measures for staff. (See: http://www.hhs.gov/pandemicflu/plan/sup4.html)
			Develop procedures for implementing respiratory hygiene/cough etiquette for staff and inmates throughout the facility. (See: www.cdc.gov/flu/professionals/infectioncontrol/resphygiene.htm and the Community Mitigation guidance at http://www.pandemicflu.gov/plan/community/mitigation.html .)
			Specify criteria and protocols for appropriately closing the facility to new admissions, including notification of feeder jails and reception (intermediary classification and assessment) centers.
			Develop criteria and procedures for transfer of inmates with known or suspected pandemic influenza to hospitals, if it becomes necessary. Policies and procedures for clinical management of inmates who need hospitalization but must remain in the facility due to limited hospital beds.
			Plan for discharging released inmates with known or suspected pandemic influenza
			Develop criteria and protocols for limiting non-essential visitors, including an education and communication strategy for visitors, especially those traveling long distances. Include policies and procedures for pandemic influenza screening of all persons coming into the facility.
			A plan for the impact of a pandemic on your employees that includes the following: (See: www.hhs.gov/pandemicflu/plan/sup11.html and the Community Mitigation guidance at http://www.pandemicflu.gov/plan/community/mitigation.html .)
			Develop contingency plans for $30 - 40\%$ employee absences. Keep in mind that absences may occur due to personal illness, family member illness, community mitigation measures, quarantines, school, childcare, or business closures, public transportation disruptions, or fear of exposure to ill individuals, as well as first responder, National Guard, or military reserve obligations.
			Identify critical job functions and plan now for to cover those functions in case of prolonged absenteeism during a pandemic. Develop succession plans for each critical agency position to ensure the continued effective performance of your organization by identifying and training replacements for key people when necessary. These replacements should be integrated into employee development activities, and should include critical contracted services as well.
			As necessary, plan for cross-training employees, use of auxiliary personnel and recent retirees, recruiting temporary personnel during a crisis, or establishing flexible worksite options (e.g., telecommuting) and flexible work hours (e.g., staggered shifts) if appropriate.
			Develop a mechanism for employees to immediately report their own possible influenza illness during a pandemic (24/7).
			Establish compensation and leave policies that strongly encourage ill workers to stay home until they are no longer contagious. During a pandemic, employees with influenza-like symptoms (such as fever accompanied by sore throat, muscle aches and cough) should not enter the worksite to keep from infecting other workers. Employees who have been exposed to someone with influenza, particularly ill members of their household, may also be asked to stay home and monitor their symptoms.
			Employees who develop influenza-like symptoms while at the worksite should leave as soon as possible. Explore the availability of resources for testing for influenza in coordination with local and State health departments. Consult with State and local public health authorities regarding appropriate treatment for ill employees. Prepare policies that will address needed actions when an ill employee refuses to stay away from work. Federal agencies can consult guidance provided by the Office of Personnel Management (OPM) at www.opm.gov/pandemic .
			Develop policies that focus on preventing the spread of respiratory infections in the workplace. This policy might include social distancing practices, the promotion of respiratory hygiene/cough etiquette, and appropriate attention to environmental hygiene and cleaning. (For more information see www.pandemicflu.gov/plan/community/mitigation.html as well as OPM's guidance at www.opm.gov/pandemic .)
			 Provide educational programs and materials (language, culture, and reading-level appropriate) to personnel on: pandemic fundamentals (e.g., signs and symptoms of influenza, modes of transmission, medical care) See www.pandemicflu.gov, www.cdc.gov/flu/protect/stopgerms.htm, http://www.cdc.gov/flu/protect/covercough.htm. personal and family protection and response strategies (e.g., hand hygiene, coughing/sneezing etiquette, etc.). Post instructional signs that illustrate correct infection control procedures in all appropriate locations, including offices, restrooms, waiting rooms, processing rooms, detention facilities, vehicles, etc. See www.pandemicflu.gov, www.cdc.gov/flu/protect/stopgerms.htm, http://www.cdc.gov/flu/protect/covercough.htm., and community mitigation interventions (e.g., social distancing, etc.) http://www.pandemicflu.gov/plan/community/mitigation.htm.

Completed	In Progress	Not Started	enne Fian for Each System and Facility Should Include the Following: (continued)
			Provide information to employees to help them and their families prepare and plan for a pandemic.
_			See www.pandemicflu.gov/plan/individual/index.html
ш			Identify employees who may need to stay home if schools dismiss students and childcare programs close for a prolonged period of time (up to 12 weeks) during a severe pandemic. Advise employees not to bring their children to the workplace if childcare cannot be arranged. Plan for alternative staffing or staffing schedules on the basis of your identification of employees who may need to stay home.
			Provide training for law enforcement officers, office managers, medical or nursing personnel, and others as needed for performance of assigned emergency response roles. Identify a training coordinator and maintain training records.
			Stock recommended personal protective equipment (PPE) and environmental infection control supplies and make plans to distribute to employees, contractors, and others (including detainees) as needed. These supplies should include tissues, waste receptacles, single-use disinfection wipes, and alcoholbased hand cleaner (containing at least 60% alcohol). EPA registered disinfectants labeled for human influenza A virus may be used for cleaning offices, waiting rooms, bathrooms, examination rooms, and detention facilities. PPE may include gloves, surgical masks and respirators (disposable N95s or higher respirators or reusable respirators), eye protection, pocket masks (for respiratory resuscitation) and protective cover wear (e.g., impervious aprons). The specific uses for the above supplies will be advised by State and local health officials during a pandemic. Further information can be found at www.pandemicflu.gov , and at https://www.osha.gov/Publications/OSHA3327pandemic.pdf
			Work with State and/or local public health to develop a plan for distribution of pandemic influenza vaccine and antiviral medications to personnel. See current HHS recommendations for pandemic influenza vaccine and antiviral use at http://www.hhs.gov/pandemicflu/plan/sup6.html and http://www.hhs.gov/pandemicflu/plan/sup7.html .
			Encourage and track seasonal influenza vaccination for employees every year. See www.cdc.gov/flu/protect/preventing.htm . Encourage all employees and their families to be up-to-date on all adult and child vaccinations recommended by the Advisory Committee on Immunization Practices. See www.cdc.gov/nip/recs/child-schedule.htm . and www.cdc.gov/nip/recs/child-schedule.htm .
			Evaluate employee access to and availability of health care, mental health, social services, community, and faith-based resources during a pandemic, and improve services as needed. See www.hhs.gov/pandemicflu/plan/sup11.html .
			Develop a plan for managing personnel who are at increased risk for influenza complications (e.g., pregnant women, immunocompromised workers) by placing them on administrative leave, altering their work location, or other appropriate alternatives during a pandemic health crisis, consistent with the EEO laws.
_			A vaccine and antiviral use plan, including:
Ш			Refer to web sites containing current CDC and State health department recommendations and guidance for the use, availability, access and distribution of vaccines and antiviral medications during a pandemic. For more information, see: www.hhs.gov/pandemicflu/plan/sup6.html and www.hhs.gov/pandemicflu/plan/sup6.html .
			Develop policies and a plan that addresses prioritization of personnel and inmates to be vaccinated or treated based on the availability of vaccines, antiviral medications, and other limited quantity treatment or prophylaxis, consistent with HHS guidance and State health department recommendations (see: www.hhs.gov/pandemicflu/plan/appendixd.html).
			Establish an implementation plan for rapid delivery of vaccines, antiviral treatments, and prevention strategies for staff and inmates based on the preceding prioritization strategy.
			A plan to address concerns related to surge capacity during a pandemic including staffing and supply issues. The plan should:
			Develop a staffing plan that specifies the minimum number and categories of personnel necessary to maintain the operation of the prison or jail, based on inmate census and the need to provide medical and nursing care in a safe manner.

Completed	In Progress	Not Started			
			Assign responsibility for assessing day-to-day staffing and other needs during an influenza pandemic to someone with proper authority and training.		
]	Responsible Person	
			Name		
			Title		
			Contact Information (office phone, cell phone, e-mail)		
			Define criteria for declaring a "staffing alternatives.	g crisis" that would enable the use of emergency staffing	
			system regulations. Assess the value of	ity and medical staff overtime within applicable State law or f voluntary emergency staffing agreements, preferably written, rs for all-cause disasters prior to implementing mandatory	
			mandatory crisis staffing on a collabor	nedical staffing. Arrangements should be made for voluntary or ative basis. Contract providers do not have the same authority as he, so cooperative planning is necessary.	
			Provide cross training of facility staff t	to help sustain operating capacity.	
		□	Include linkages to local and regional p widespread healthcare staffing shortag	planning and response groups to collaborate on addressing es during a crisis.	
			Estimate consumable resource needs (six to eight weeks and consider stockp flexibility, and other facility-specific considers are significant to the stock of the	e.g., masks, gloves, hand hygiene products) for approximately iling these quantities depending on storage capacity, purchasing onsiderations.	
				cy plan to address supply shortages, including detailed sition of supplies through normal channels as well as procedures conditions.	
			Development of a strategy to help in Plans should consider:	crease health care bed capacity in the community, if feasible.	
				d concerns associated with temporary use of facility space for for addressing these issues with both security and medical	
				ty that could be used to create additional acute care beds for availability with local and regional planning groups.	
				tals and/or other providers for the facility to accept non-influenza als to focus on the most seriously ill patients with pandemic	
				ing and storing increased numbers of deceased persons, contacting appropriate family members or others regarding uld:	
			Address expanding morgue capabilitie	s with local hospitals and other relevant institutions.	
			Identify an area in the facility that coul	ld be used as a temporary morgue.	
_	_	_	Coordinate your plan with other age	encies and organizations	
			outside the agency, including employe	aredness and response plan with key stakeholders inside and e representatives, and determine opportunities for collaboration, opment of complementary responsibilities.	
			agencies in your community, region or strategies, and improve community res mutual aid agreements, if necessary. M	s with other correctional agencies and law enforcement support. State in order to share resources, identify collaboration sponse efforts. Develop, review, and modify local and State futual aid during an influenza pandemic can not be counted on as a may be affected simultaneously and have limited aid to offer.	

Completed	In Progress	Not Started	
			Coordinate all requests for assistance with the next higher level governmental entity (e.g., local officials coordinate with State officials, State officials coordinate with Federal officials). Coordination is essential to ensure the assets: (1) can be provided in accordance with existing laws, (2) the requested resources are available. During a pandemic influenza, assistance from the next higher level of government may be limited due to competing higher priority demands and the effects of the influenza pandemic on these assets.
			Integrate planning with emergency service and criminal justice organizations such as courts, law enforcements, probation and parole, social services, multi-jurisdictional entities, public works, and other emergency management providers (fire, EMS, mutual aid, etc.).
			Security functions are essential during a pandemic influenza. Through your city or county attorney, corporation counsel or other appropriate authority, collaborate with the Office of the State Attorney General to clarify and review security needs and resources available to your facility.
			Identify local or regional entities, such as health-care agencies, community organizations, businesses, or critical infrastructure sites, to determine potential collaboration opportunities. This collaboration might involve situational awareness, exercises or drills, or public safety training.

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