

# Preparing Business for Emergencies

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Fairfax County Health Department  
November 2009

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When you protect your business from disasters or any kind of significant business interruption you are protecting one of your community's most valuable asset.

(Institute for Business & Home Safety)

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# Types of Emergencies

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## □ Infrastructure

- Usually solitary event
- Quick onset
- Short duration
- Primary impact on physical infrastructure
- Examples - flooding, hurricanes, tornados, fires, earthquake, terrorism

## □ Biological

- Disease outbreak
  - Prolonged and/or widespread
  - Primary impact on human resources
  - Examples – SARS, influenza pandemic, bioterrorism
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# Why Prepare for Disasters?

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- ❑ Each year disasters such as hurricanes, fires, floods and tornadoes force businesses to close
  - ❑ At least 25 percent of businesses that close do not reopen
  - ❑ Many that do reopen struggle to stay in business
  - ❑ Small to mid-sized businesses (SMB) are especially vulnerable because few have the resources to assess the disaster risks and develop plans to recover and survive
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# Why Prepare for Disasters?

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- ❑ Of SMBs that experience a disaster and have *no emergency plan*, 43% never reopen and if they reopen, only 29% are still operating 2 years later
  - ❑ Disasters that threaten business can happen anywhere at any time
  - ❑ The consequence of not being prepared for disasters can mean more than property loss. It can mean the loss of business, jobs, economic well-being
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# Pandemic Influenza

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- Global disease outbreak that occurs when the following conditions are met:
    1. Emergence of a new influenza A virus into the human population
    2. Virus causes serious illness because individuals have no existing immunity (protection)
    3. Virus adapts into a strain capable of spreading easily from person to person worldwide
  - World Health Organization (WHO) declared a pandemic on June 11, 2009 in response to novel influenza A (H1N1) outbreaks
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# History of Influenza Pandemics

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- Three pandemics in the 20<sup>th</sup> century
    - **1918 (H1N1)** – 40 million deaths
    - **1957 (H2N2)** – 2 million deaths
    - **1968 (H3N2)** – 700,000 deaths
  - Outbreaks tend to occur in two or three waves over a period of a year or more
  - Severity of subsequent waves can change
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# Influenza vs. Common Cold

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## Influenza

- Fever
- Symptoms severe
- Rarely have runny nose and watery eyes

## Cold

- Rarely have fever
- Symptoms mild
- Usually have runny nose and watery eyes

**It is not possible to tell if someone who is sick with influenza-like illness has novel influenza H1N1 flu or seasonal flu without testing**

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# H1N1 “swine flu” Pandemic: Activity Update

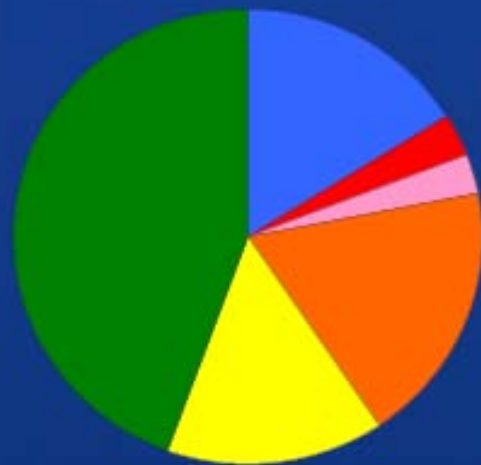
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- Outbreaks of influenza occurring worldwide
  - Spectrum of illness similar to seasonal influenza
    - No symptoms -> mild -> severe illness
    - Most cases seem to be mild and self-limited
    - Tendency to cause more severe and lethal infections in people with underlying medical conditions
  - A younger age group has been affected than seen during seasonal influenza
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# Teens and young adults disproportionately affected

## Few cases among elderly

Seasonal 2007-08



N=3,930

- 0-4 yrs
- 5-9 yrs
- 10-17 yrs
- 18-49 yrs
- 50-64 yrs
- 65+ yrs

2009 H1N1 (April - Jun)



N=312

- 0-4 yrs
- 5-9 yrs
- 10-17 yrs
- 18-49 yrs
- 50-64 yrs
- 65+ yrs

\*April 12-June 30



# H1N1 “swine flu” Pandemic: Activity Update

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- ❑ Laboratory confirmed cases represent an under-estimation of total cases as focus now on testing only in persons with severe illness.
  - ❑ Virus appears to be more contagious than seasonal influenza
  - ❑ Current severity of illness caused by virus unchanged from Spring 2009
  - ❑ Potential severity of virus remains uncertain
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# What to Expect This Flu Season

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- ❑ Co-circulation of seasonal and novel H1N1 influenza viruses
  - ❑ Large segment of the population susceptible to novel H1N1 virus
  - ❑ Anticipate higher than normal illness and death in the community
  - ❑ Enormous demands on health care system
  - ❑ Possibly high absenteeism in schools and workplace
  - ❑ Two influenza vaccines will be available
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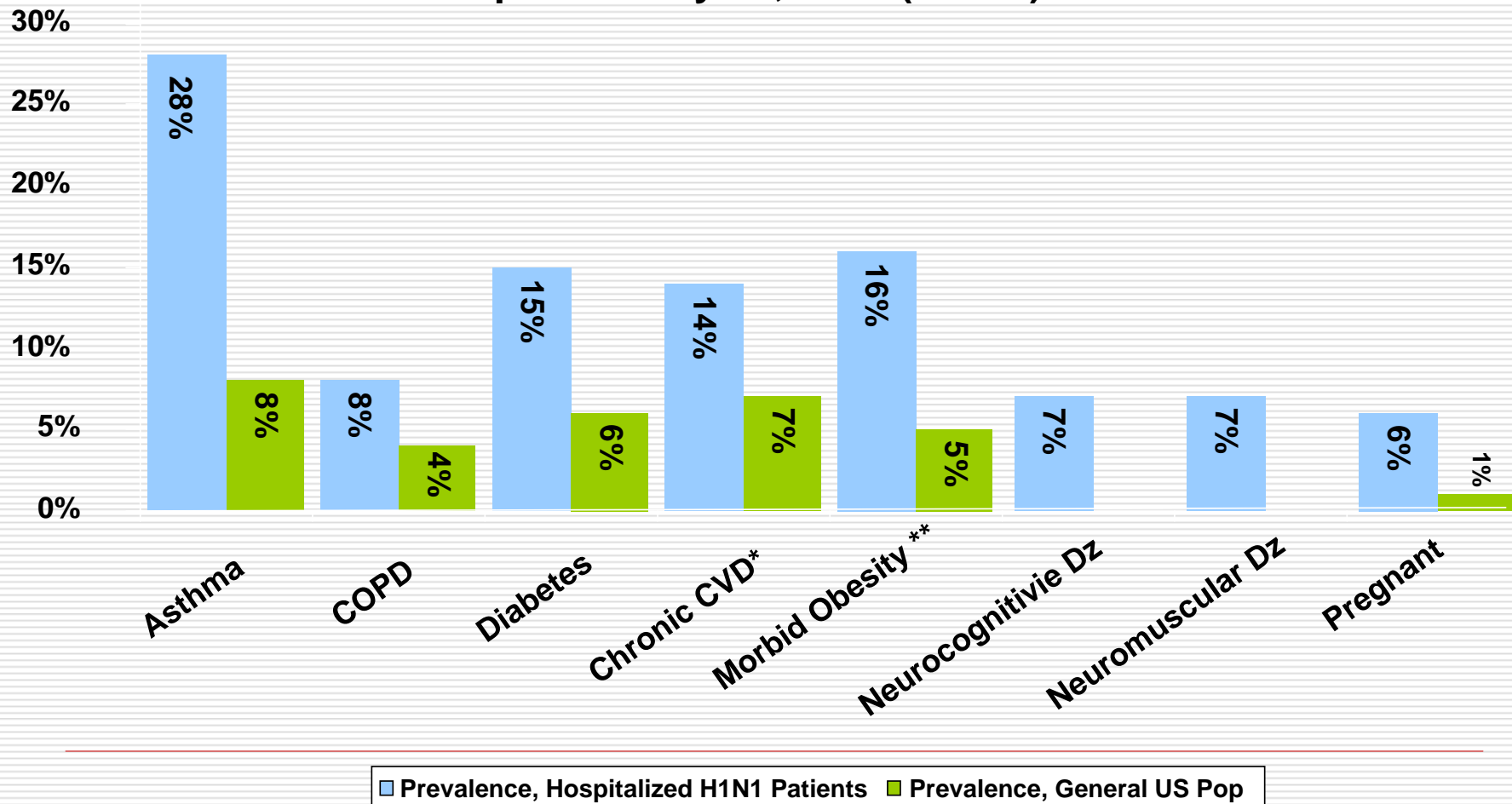
# Influenza Vaccines: H1N1

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- ❑ Licensed and approved by FDA
  - ❑ Efficacy and safety proven through clinical trials
  - ❑ One dose for >10 years of age; 2 doses for children <10 years
  - ❑ Available as inactivated (“flu shot”) and live attenuated (LAIV) formulations
    - H1N1(flu shot) + seasonal (flu shot) = yes
    - H1N1(LAIV) + seasonal (LAIV) = no
    - Flu shot + LAIV vaccine = yes
  - ❑ CDC Target Groups based on who has been most impacted by H1N1 influenza
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# Hospitalizations From Novel H1N1 Influenza

April 1 – May 30, 2009 (n=268)

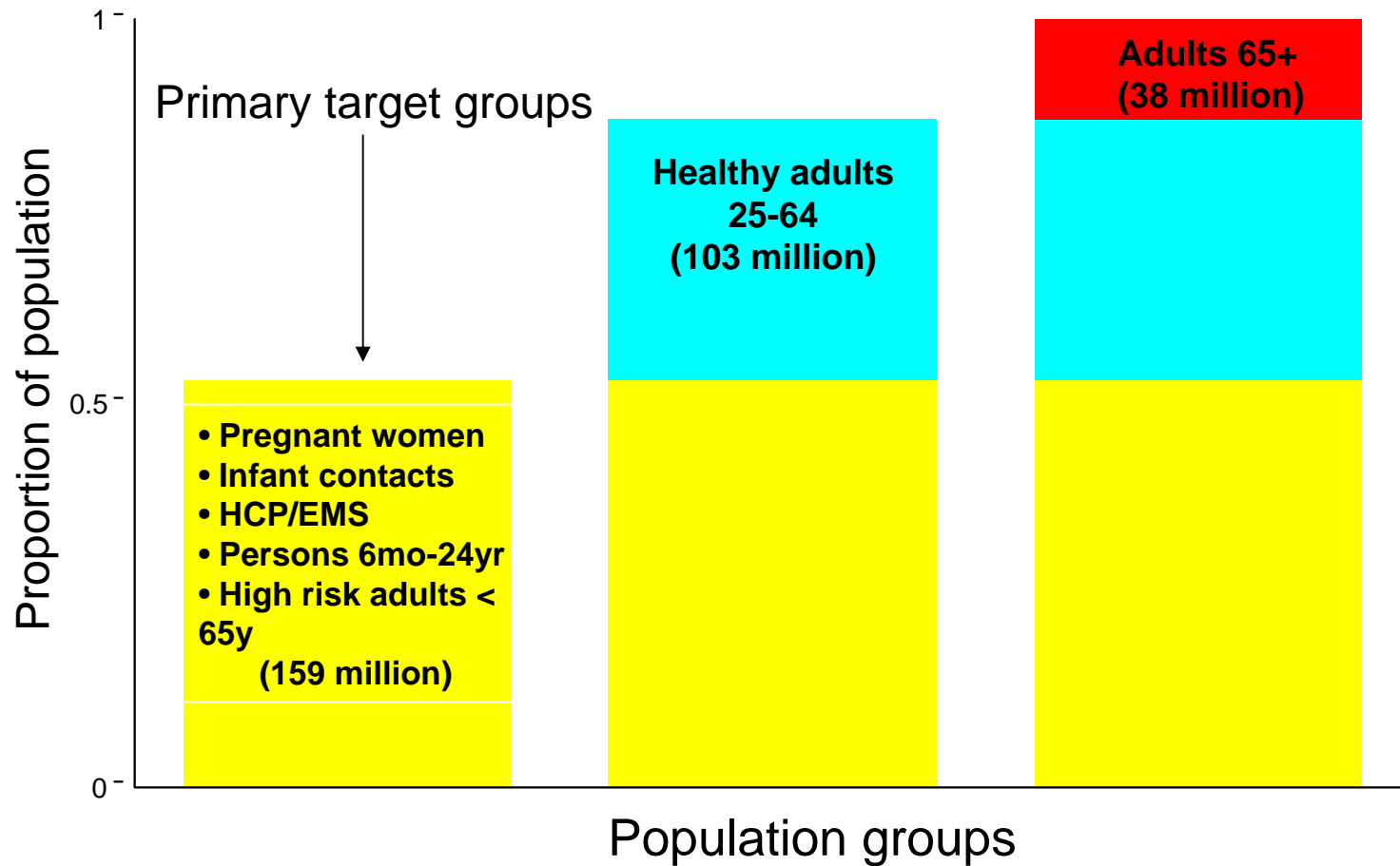


# Influenza Vaccines: H1N1

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- CDC/ACIP Target Groups (159M)
    - Pregnant women
    - Household and caregiver contacts of children < 6 months of age
    - Health care and EMS workers
    - Persons 6 mos. to 24 years of age
    - 25-64 years with chronic medical conditions
  - Fairfax County priority groups available at [www.fairfaxcounty.gov/flu](http://www.fairfaxcounty.gov/flu)
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# Summary Vaccination of Population Groups Over Time





# H1N1 Vaccination Program

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- Vaccine is currently available in limited quantity and more will be available in the coming weeks.
  - Vaccine Delivery
    - Traditional community providers and other private-sector settings
      - Pre-registration still open
    - Public Health
      - Mass vaccination clinics
      - District Offices
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# Fairfax County H1N1 Clinics

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- H1N1 vaccine available at Health Department District Offices
    - Mt. Vernon, Springfield, Fairfax, Falls Church, Herndon/Reston
    - Fairfax County Health Department  
H1N1 Call Center: 703-267-3511
    - Vaccine is free
  - Check website for clinic times and target group information.
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# Recommended Strategies:

## Stay Home when Sick

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- Employees with ILI should stay home for ***at least 24 hours after fever*** (most contagious period) without the use of fever-reducing medications
    - 3 – 5 days in most cases
    - Avoid close contact with others
    - Medical note not required to come back
  - Upon return to work, continue to wash hands and cover coughs and sneezes
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# Recommended Strategies:

## Separate ill staff from healthy staff

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- Staff with ILI symptoms will be moved to a separate room until they can be sent home
    - Surgical masks when near others if able to tolerate
  - No need for medical note when they return to work
  - Liberal leave policies to ensure persons stay home if needed
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# Recommended Strategies: Hand Hygiene and Respiratory Etiquette

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- Wash hands often – especially after coughing and sneezing
  - Alcohol-based hand cleaners are also effective
  - Time, facilities and materials will be provided for employees to wash hands as needed
  - Cover nose and mouth to cough or sneeze
  - Discard tissue after use
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# Recommended Strategies:

## Routine Cleaning

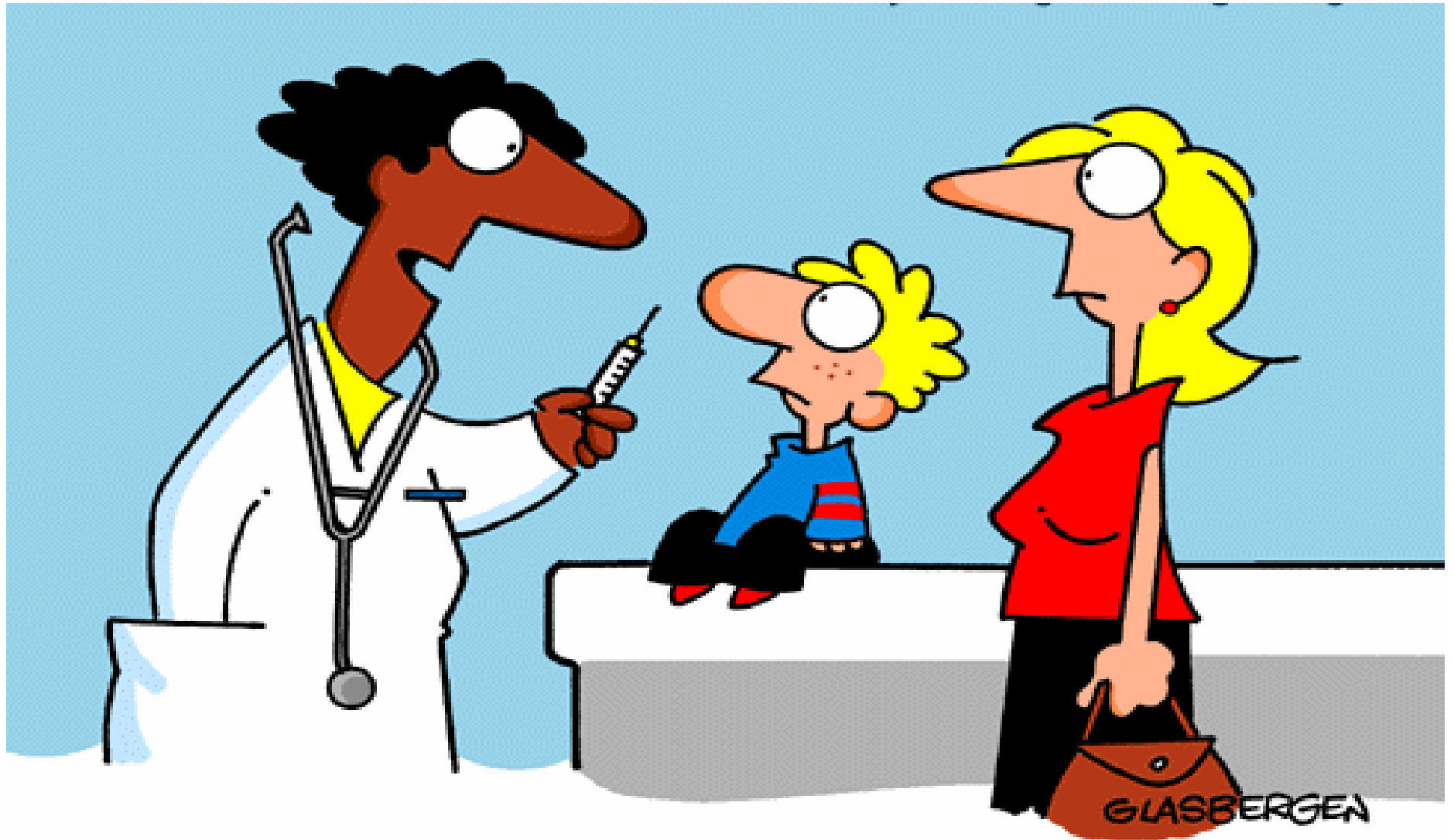
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- Regularly clean areas and items likely to have frequent hand contact and when visibly soiled
  - Use cleaning agents usually used
  - Not necessary to disinfect beyond routine cleaning
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# Guidance for General Community Settings

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- ❑ All persons for whom vaccine is recommended should get vaccinated once vaccine is available
  - ❑ Cover coughs and sneezes with a tissue and throw tissue in the trash after use
  - ❑ Wash hands often with soap and water, especially after you cough or sneeze. Alcohol-based hand cleaners are also effective
  - ❑ Avoid touching your eyes, nose and mouth
  - ❑ Avoid close contact (about 6 feet) with sick people, including anyone in the household who is sick
  - ❑ Stay home when sick for at least 24 hours after fever is gone
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**“Don’t think of it as getting a flu shot.  
Think of it as installing virus protection software.”**



# Elements of Preparedness Planning

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- I. Continuity Planning (COOP)
  - II. Prepare the workforce
  - III. Address workplace safety
  - IV. Promote individual preparedness
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# I: Continuity of Operations Planning

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- Create an all-hazards disaster plan and keep a copy in an off-site location
  - Know what kinds of emergencies might affect the business both internally and externally
  - Identify operations critical to survival of the business
  - Establish procedures for succession of management
  - Define crisis management procedures and individual responsibilities in advance
  - Plan for payroll continuity
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# Pandemic Specific COOP

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- ❑ Planning should take into account that employees are most affected
  - ❑ Prepare now to prevent the spread of flu in the workplace
  - ❑ Prepare for a temporarily reduced workforce
  - ❑ Consider replacing in-person meetings with teleconferencing
  - ❑ Allow employees to work from home if possible if sick or have childcare needs.
  - ❑ Maintain a sound sick leave program that allows employees to stay home when sick
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## II: Preparing your Workforce

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- Involve employees from all levels in emergency planning
  - Communicate response plans to employees and help them understand what is expected of them
  - Regularly educate, train employees and practice emergency plans
  - Include preparedness trainings in new employee orientation
  - Provide employees with information on disaster preparedness and pandemic influenza
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# III: Workplace Safety

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- Encourage annual flu vaccinations
  - Promote good health habits among employees that will minimize potential for spread of germs
    - Post respiratory and hand hygiene signs
    - Expand the number of soap and sanitizer stations throughout the building
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## IV: Individual and Family Preparedness

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- Community preparedness begins with YOU
  - Encourage employees/co-workers to
    - Get an emergency kit
    - Make a family plan
    - Stay informed
    - Stop germs from spreading
      - Wash hands often
      - Cover coughs and sneezes
      - Stay home when sick
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# How do Businesses Begin?

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## □ Ask what if:

- 40% of the staff were absent from work for weeks or months?
  - A sick employee came to work and infected others? Are there leave policies in place?
  - Products or services that the business relies on were unavailable or limited?
  - The Health Department instituted community infection control measures that discouraged public gatherings? Can the business operate remotely?
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# Ask what if:

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- ❑ Demand for a product increases or decreases significantly?
  - ❑ The clients/customers wanted the business' services but were not able to get there? Can the business be done on-line, delivery, or other ways?
  - ❑ There was decreased data communications from the lines being down or overburdened? Is data backed up daily? Are there redundant communication methods available?
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# Ask what if:

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- The business couldn't operate at all? Is there business interruption insurance?
  - Banking response was delayed? How would this effect payroll, loans, effects on the business credit?
  - The business has resources (tangible or human) that would be useful to other businesses affected by a pandemic or other disaster?
  - The business had to relocate to an alternate facility?
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# Fairfax County's Hand Washing Campaign

## “Your Health is in Your Hands: WASH”



FAIRFAX COUNTY HEALTH DEPARTMENT  
FAIRFAX, VIRGINIA

703-246-2411 • TTY 711 • [www.fairfaxcounty.gov/hd](http://www.fairfaxcounty.gov/hd)

# Resources

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- Department of Homeland Security
    - [www.ready.gov/business/index.html](http://www.ready.gov/business/index.html)
    - [www.pandemicflu.gov/index.html](http://www.pandemicflu.gov/index.html)
  - Institute of Business and Home Safety
    - [www.ibhs.org](http://www.ibhs.org)
  - Fairfax County Health Department
    - [www.fairfaxcounty.gov/hd](http://www.fairfaxcounty.gov/hd)
  - CDC
    - [www.cdc.gov/h1n1flu/business/toolkit](http://www.cdc.gov/h1n1flu/business/toolkit)
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