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Pandemic Preparedness Checklist

Pandemics are widespread international outbreaks of a dangerous infectious disease. This checklist will help your business, employees and community prepare for a pandemic as well as any regional or localized epidemics.

| ~ | Before The Pandemic |
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| \checkmark | Impact of a Pandemic on Your Business |
| | Identify a pandemic coordinator and/or team with defined roles & responsibilities for preparedness and response planning. The planning process should include input from labor representatives. |
| | Identify essential employees & other critical inputs (i.e. raw materials, suppliers, sub-contractor services/products & logistics) required to maintain business operations by location and function during a pandemic. |
| | Train and prepare ancillary workforce (i.e. contractors, employees in other job titles/ descriptions, retirees). |
| | Develop & plan for scenarios likely to result in an increase or decrease in demand for your products and/or services during a pandemic (i.e. effect of restriction on mass gatherings, need for hygiene supplies). |
| | Determine potential impact of a pandemic on company business financials using multiple possible scenarios that affect different product lines and/or production sites. |
| | Determine potential impact of a pandemic on business-related domestic and international travel (i.e. quarantines, border closures). |
| | Find up-to-date, reliable pandemic information from community public health, emergency management, and other sources and make sustainable links. |
| | Establish an emergency communications plan and revise periodically. This plan includes identification of key contacts (with back-ups), chain of communications (including suppliers & customers), and processes for tracking and communicating business and employee status. |
| | Implement an exercise/drill to test your plan, and revise periodically. |
| \checkmark | Impact of a Pandemic on Your Employees and Customers |
| | Forecast and allow for employee absences 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. |

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| | Implement guidelines to modify the frequency and type of face-to-face contact (e.g. hand- shaking, seating in meetings, office layout, shared workstations) among employees and between employees and customers |
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| | Encourage & track annual influenza vaccination for employees. |
| | Evaluate employee access to and availability of healthcare services during a pandemic, and improve services as needed. |
| | Evaluate employee access to and availability of mental health and social services during a pandemic, including corporate, community, and faith-based resources, and improve services as needed. |
| | Identify employees and key customers with special needs, and incorporate the requirements of such persons into your preparedness plan. |
| ~ | During the Pandemic |
| | Establish policies for employee compensation and sick-leave absences unique to a pandemic (i.e. non-punitive, liberal leave), including policies on when a previously ill person is no longer infectious and can return to work after illness. |
| | Establish policies for flexible worksite (i.e. telecommuting) and flexible work hours (i.e. staggered shifts). |
| | Establish awareness and policies for preventing illness spread at the worksite (i.e. transmission of body fluids, respiratory hygiene/cough etiquette, and prompt exclusion of people with symptoms). |
| | Establish policies for employees who have been exposed to pandemic illness, are suspected to be ill, or become ill at the worksite (i.e. infection control response, immediate mandatory sick leave). |
| | Establish policies for restricting travel to affected geographic areas (consider both domestic and international sites), evacuating employees working in or near an affected area when an outbreak begins, and guidance for employees returning from affected areas. |
| | Set up authorities, triggers, and procedures for activating and terminating the company's response plan, altering business operations (i.e. shutting down operations in affected areas), and transferring business knowledge to key employees. |
| | Provide sufficient and accessible infection control supplies (i.e. hand-hygiene products, tissues and receptacles for their disposal) in all business locations. |

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| Enhance communications and information technology infrastructures as needed to support employee telecommuting and remote customer access. |
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| Ensure availability of medical consultation and advice for emergency response. |
| Develop and disseminate programs and materials covering pandemic fundamentals (i.e. signs and symptoms, modes of transmission), personal and family protection and response strategies (i.e. contaminated fluids, hand hygiene, coughing/ sneezing etiquette, contingency plans). |
| Anticipate employee fear & anxiety, rumors & misinformation & plan communications accordingly. |
| Ensure that communications are culturally and linguistically appropriate. |
| Disseminate information to employees about your pandemic preparedness & response plan. |
| Provide information for the at-home care of ill employees and family members. |
| Develop platforms (i.e. hotlines, dedicated websites) for communicating pandemic status and actions to employees, vendors, suppliers, and customers inside & outside the worksite in a consistent and timely way, including redundancies in the emergency contact system. |
| Identify community sources for timely and accurate pandemic information (domestic and international) and resources for obtaining counter-measures (i.e. vaccines and antivirals). |
| Collaborate with insurers, health plans, and major local healthcare facilities to share your pandemic plans and understand their capabilities and plans. |
| 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. |
| 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. |
| Share best practices with other businesses in your communities, chambers of commerce, and associations to improve community response efforts. |
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| ~ | After the Pandemic |
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| | Prepare for the 2nd/ 3rd waves of an outbreak. |
| | Determine the immediate lessons learned from the previous wave. |
| | Share successful response strategies, best practices, and lessons learned with other health insurers, businesses, and organizations in your communities, chambers of commerce, and associations to improve overall preparedness and response efforts. |
| | Develop "what if" scenarios and conduct practice drills to test your plan, and revise based on lessons learned. Participate in drills conducted by local, state, and national governments to test linkages between the company and relevant authorities. |
| | Share best practices with other businesses in your communities, chambers of commerce, and associations to improve community response efforts. |
| | Develop a pandemic charitable-giving program for those employees hardest hit, and for a key charitable organization. |
| | Be sure psycho-social services have been provided for. |
| \checkmark | Your People |
| | Have all employees, vendors, client contact information on hand. |
| | Use the Alert Notification System on myAgility to keep all posted on status and next steps. |
| | Following the pandemic, notify all critical people of next steps, based on impact. |

Know the Terms:

CDC – Centers for Disease Control and Prevention. Located in Atlanta, Georgia, the CDC is part of the US Department of Health and Human Services.

Ebola – Also called Ebola Virus Disease (EVD) or hemorrhagic fever

Epidemic – A disease occurring suddenly in humans in a community, region or country in numbers clearly in excess of normal.

Ground Zero – The location where the first case occurred.

Pandemic – The global outbreak of a disease in humans in numbers clearly in excess of normal.

Pandemic Phases – WHO has divided pandemics into six phases:

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Pandemic Phase 1 – Low risk of human cases. No viruses circulating among animals have been reported to cause infections in humans.

Pandemic Phase 2 – Higher risk of human cases. An animal influenza virus circulating among domesticated or wild animals is known to have caused infection in humans, and is therefore considered a potential pandemic threat.

Pandemic Phase 3 – No or very limited human-to-human transmission. An animal or human-animal influenza reassortant virus has caused sporadic cases or small clusters of disease in people, but has not resulted in human-to-human transmission sufficient to sustain community-level outbreaks. Limited human-to-human transmission may occur under some circumstances, for example, when there is close contact between an infected person and an unprotected caregiver. However, limited transmission under such restricted circumstances does not indicate that the virus has gained the level of transmissibility among humans necessary to cause a pandemic.

Pandemic Phase 4 – Evidence of increased human-to-human transmission. Human-to-human transmission of an animal or human-animal influenza reassortant virus able to cause "community-level outbreaks." The ability to cause sustained disease outbreaks in a community marks a significant upwards shift in the risk for a pandemic. Any country that suspects or has verified such an event should urgently consult with WHO so that the situation can be jointly assessed and a decision made by the affected country if implementation of a rapid pandemic containment operation is warranted. Phase 4 indicates a significant increase in risk of a pandemic.

Pandemic Phase 5 – Evidence of significant human-to-human transmission. Human-to-human spread of the virus into at least two countries in one WHO region (Figure 4). While most countries will not be affected at this stage, the declaration of Phase 5 is a strong signal that a pandemic is imminent and that the time to finalize the organization, communication, and implementation of the planned mitigation measures is short.

Pandemic Phase 6 – Efficient and sustained human-to-human transmission. The pandemic phase, is characterized by community level outbreaks in at least one other country in a different WHO region in addition to the criteria defined in Phase 5. Designation of this phase will indicate that a global pandemic is under way.

Symptoms (of Ebola) – Fever (greater than 101.5°F), Severe headache, Muscle pain, Weakness, Diarrhea, Vomiting, Abdominal pain, Unexplained hemorrhage (bleeding or bruising). Symptoms may appear anywhere from 2 to 21 days after exposure to Ebola, but the average is 8 to 10 days.

Transmission (of Ebola) – Ebola is spread through direct contact (through broken skin or the eyes, nose, or mouth) with body fluids of an infected person. Ebola is not spread through the air, water, or food.

WHO – Located in Geneva, Switzerland, the World Health Organization is the directing and coordinating authority for health within the United Nations system.

Agility is your trusted advisor and partner in preparedness through these events. Please contact Agility with any imminent threat and place us on Alert. When faced with an interruption please contact Agility to quickly recover, by dialing 877.364.9393.