

# **Employers Health Coalition of Ohio Pandemic Preparedness – What Employers Need to Know**

## **After Action Report**

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## **After Action Report**

### **Executive Summary**

The Employer's Health Coalition of Ohio Pandemic Preparedness workshop was designed to bring business and healthcare leaders together to discuss ways in which they will react to an Influenza Pandemic Public Health Crisis. The workshop consisted of a mixture of lectures, panel discussions and a tabletop exercise. The intent of the exercise was to create an environment where participants would work together in a cohesive manner to tackle critical issues as they arose during the course of the simulated "crisis".

This report has been developed to assist local and regional stakeholders in their planning efforts to improve response, recovery and overall preparedness for an influenza pandemic by analyzing exercise results, identifying strengths upon which to build, and identifying areas for improvement. It follows the guidelines set forth by the U.S. Department of Homeland Security's Exercise Evaluation Program (HSEEP).

The recommendations in this report are the results of participant discussion and analysis during the influenza pandemic tabletop exercise. Participants were assembled from the Employers Health Coalition of Ohio, local and regional hospitals, State health department, local businesses, and the American Red Cross, and were charged with exploring key concepts and major planning needs of the region as it responds to a simulated influenza pandemic.

The following objectives were developed for the Pandemic Influenza Tabletop Exercise:

- Establish a consistent pandemic threat assessment and response baseline for businesses and healthcare in the region.

- Clarify the role of state and local government with respect to business and healthcare support before, during and after an influenza pandemic
- Facilitate specific functional dialogues between the various stakeholders
- Capture pandemic planning best practices across the specific functional areas
- Create models to advance regional coordination and preparedness

The scenario for this exercise involved a severe outbreak of respiratory illness identified in a small village in Sri Lanka. With increased surveillance, new cases were documented in surrounding areas. Laboratory analysis of viral isolates concluded that the illness was caused by the Influenza A H5N1 virus. Over the course of several months, the virus was tracked from Sri Lanka to various other parts of Southeast Asia, New Zealand and Japan. It then quickly spread around the globe to become a true pandemic.

Though there were reported cases in all age groups, young adults were most severely impacted, as the case-fatality rate neared 24%. There were limited government stockpiles of antiviral drugs which led to great public outrage. Widespread disruption in society led to a variety of problems and issues that participants were challenged to address

### **Summary of Observations and Findings**

Participants were involved in discussion and response coordination through two modules:

- Early Pandemic (WHO Pandemic Phase 3 to WHO phase 4)
- Late Pandemic (WHO Pandemic Phase 4 to WHO phase 6)

The major discussions in the breakout groups can be grouped into five areas:

1. Issues related to **people**
2. Issues related to **facilities**
3. Issues related to **communication**
4. Issues related to **mission critical activities at risk**
5. Issues related to **technology**

1) People

- a. Employee protection including anti-viral medications and masks
- b. Human resource policy issues including sick leave policies, short and long term disability policies, pay policies, overtime policies and insurance policies
- c. Support for employees traveling overseas
- d. Leadership succession policies
- e. Providing adequate employee psychological support (EAP)

2) Facilities

- a. Maintaining a clean environment during a cleaning staff shortage
- b. Maintaining secure facilities by limiting visitors, contractors and vendors and by adapting additional security procedures
- c. Enabling employees to safely clean their work areas
- d. Safe distancing to limit disease spread in the workplace

3) Communication

- a. How to obtain reliable competent information
- b. Establishing a crisis communication policy outlining who is authorized to speak, the channels to be used to reach key audiences (employees, clients, customers, vendors, board of directors, etc.), key messages and how to work with the media
- c. Working with local government to coordinate messages
- d. How to dispel rumors and correct false information

4) Mission Critical Activities at Risk

- a. Business continuity plans (BCP) development including a pandemic influenza section
- b. Utilization of a well established organized approach to managing a pandemic such as the ICS (Incident Command System) that is used widely through government and many industries

- c. Identification of core business processes and the development of strategies to maintain those processes during a pandemic
  - d. Assessment of the impact of not meeting Sarbanes-Oxley reporting requirements and other regulatory requirements
  - e. Ensuring adequate access to cash or credit to maintain operations
- 5) Technology
- a. Assessing the technology needs of employees working from home and the development of workaround strategies for logjams on the internet and telephone networks
  - b. Corporate IT infrastructure augmentation to support the anticipated number of employees that will be asked to work from home. This includes increased help desk capability to support home users with problems

**See section 4 for a more detailed listing of discussion points and recommendations.**

This exercise achieved its primary goal – to facilitate the assembly of and communication between working groups of local and regional stakeholders related to pandemic influenza preparedness. The participants gathered during this exercise represented a variety of professional expertise and perspective. Their collaborative efforts to share challenges and response plans across various functional areas within the region are exemplary.

## Section 1: Exercise Overview

**Exercise Name:** Influenza Pandemic Tabletop Exercise

**Duration:** One day

**Exercise Date:** October 23, 2007

**Sponsor:** Employers Health Coalition of Ohio

**Type of Exercise:** Tabletop exercise

**Funding Source:** Exercise was underwritten by funding from Roche Pharmaceuticals

**Facilitator:** Exercise facilitated by MedPrep Consulting Group, LLC  
Stuart B. Weiss, MD, Partner

**Program:** n/a

### Focus

Response

Recovery

Prevention

Other

### Classification

Unclassified (U)

For Official Use Only (FOUO)

By Invitation Only (IO)

### Scenario

Chemical release or threat (C)

Biological release or threat (B)

Radiological release or threat (R)

Nuclear detonation or threat (N)

Explosive detonation or threat (E)

Cyber (Y)

Other/Specify (O)

**Location:** Orange County Emergency Operations Center, Orlando, FL

### Participating Organizations

- Employers Healthcare Coalition of Ohio
- Ohio Businesses
- Ohio Hospital Association
- Ohio Health Department
- Ohio Hospitals
- American Red Cross

- Invited Observers

## **Section 2: Exercise Design Summary**

The Influenza Pandemic Tabletop Exercise was designed to assess the preparedness and response capabilities of local and regional business and healthcare stakeholders in the event of an Influenza Pandemic. The exercise, conducted on October 23, 2007, in Canton, Ohio, was structured to explore challenging concepts, test solutions, provoke thinking, and integrate responses in order to improve the ability of businesses and health care systems to mitigate, prepare for, respond to, and recover from a major public health crisis.

The exercise was developed to address the following:

1. Explore how hospitals will identify and possibly share resources (e.g. staff, supplies, and equipment) as needed during an influenza pandemic through their affiliated networks or geographical relationships.
2. Explore how the recommendations for use of antiviral agents and various infection control issues (e.g. isolation, Personal Protective Equipment (PPE), social distancing) will impact business and healthcare operations.
3. Examine how government resources (city, state and Federal) can support the business and healthcare communities during an influenza pandemic.
4. Examine the local interface among city, county, state and Federal agencies (e.g. information sharing, dissemination to media resources) in the conduct of response activities during a public health crisis.
5. Examine local, state and Federal interactions with the private and public sector during an influenza pandemic.
6. Explore how business and healthcare leaders will handle complex operational issues during an influenza pandemic.

Participants were advised that the exercise was designed as a “facilitated discussion,” and they were encouraged to interact with other participants to

address questions or to ensure coordinated and integrated responses to the issues. Exercise facilitators and scribes were active in collecting information and making observations during each module of the exercise.

### **Exercise Structure**

Through discussion and evaluation of response capabilities, participants from several different business sectors were able to identify key strengths and major areas for improvement and provide recommendations for future preparedness efforts.

The exercise was conducted in a two-module format, with each module commencing following a briefing by an exercise facilitator. The modules, characterized by two unique phases of influenza pandemic – movement from pre-pandemic phase (WHO phase 3) to the early stages of a possible pandemic (WHO phase 4) and then movement from Who phase 4 to a confirmed pandemic (WHO 6) – were each preceded by multi-media depictions of simulated relevant conditions in society. After the briefing, participants were led in discussion to explore ways to resolve problems posed in each module scenario.

Participants were organized into heterogeneous discussion groups with people representing several areas of expertise in each group including:

Logistics, Supply Chain, Support, Human Resources, Communications  
Financial, Legal, Clinical Care, Employee Health, Operations and  
Leadership

Exercise facilitators provided participants with a provocative series of questions specific to each area to stimulate discussion within the working groups. The information in this report incorporates highlights and themes from these discussions, as well as overall observations by exercise facilitators and scribes.

### **Section 3: Exercise Event Synopsis**

#### **Scenario of Module One (“A Bad Day in October”):**

October 23, 2007

There had been sporadic cases of infection with a novel influenza A H5N1 virus with rare instances of spread to close contacts. The largest person-to-person spread to date had been in Indonesia in 2005. All of that changed when the World Health Organization (WHO) confirmed multiple small clusters of human-to-human spread in Sri Lanka and Indonesia and raised the world to global pandemic phase 4.

This action had an immediate effect on global travel and movement of goods and oil from that part of the world. Energy prices soared on speculation that the energy supply chain would be interrupted, stock markets tumbled amidst concerns about a global recession and news outlets began a 24 hour a day barrage of news coverage.

In the US, people started stocking up on supplies, food and various over-the-counter medications. Anxiety over this new development was widespread.

#### **Scenario of Module Two (“In the thick of things”):**

January 29, 2008

It’s day number 21 of the first pandemic influenza wave. Ohio is overwhelmed by the number of influenza cases. An estimated seventeen percent of the population is ill with influenza and although Ohio received doses of vaccine, the stockpile is nearly depleted and largely ineffective. The Ohio Department of Health is making plans on how to best utilize the remaining supply of vaccine until more arrives. Hospitals are overwhelmed with both outpatients and inpatients, and facilities are short-staffed.

Hospitals have been operating at capacity for weeks as supplies, particularly those related to infection control and PPE, continue to run low. Thirty to forty percent of health-care workers are absent due to personal illness, caring

for ill loved ones, or simply out of fear for their safety. There is a shortage of mechanical ventilators for treatment of patients with severe respiratory syndromes or postoperative needs.

Food supply is limited, as deliveries to grocery stores have been delayed due to illness among truck drivers. Stock exchanges have shifted to electronic trading after an influenza outbreak occurred among traders on the floor of the New York Stock Exchange and investor confidence remains low.

Analysts are predicting a severe recession, possibly a global depression. Businesses are experiencing 25-30% worker absenteeism. Intermittent Internet and telephone outages, prolonged school closings, and a series of delays or interruptions in the routine availability of goods and services continue to worsen as this pandemic wave progresses.

Nationwide, fourteen states (including Ohio) have confirmed cases of H5N1 and a total of approximately 81,000 deaths. Furthermore, nine additional states have reported suspicious cases of influenza-like illness (ILI) believed to be H5N1. States are considering or have already begun implementation of quarantine and isolation measures.

## **Section 4: Analysis of the Exercise Results**

This section of the report presents the issues discussed by participants during the exercise. The issues and recommendations generated by the various groups were consolidated in this report to avoid redundancy.

Following review and validation of the findings in this report, key stakeholders should take the necessary actions to appropriately incorporate the recommendations into their preparedness planning efforts.

**For an expanded list of issues related to the five areas of planning, please see appendix A.**

The major discussions in the breakout groups can be grouped into five areas:

1. Issues related to **people**
2. Issues related to **facilities**
3. Issues related to **communication**
4. Issues related to **mission critical activities at risk**
5. Issues related to **technology**

### 1) Issues related to People

Discussion Points:

- a. Employee protection including anti-viral medications and masks
- b. Human resource policy issues including sick leave policies, short and long term disability policies, pay policies, overtime policies and insurance policies
- c. Support for employees traveling overseas and an accountability system to track their whereabouts
- d. Leadership succession policies
- e. Providing adequate employee psychological support – the role of the Employee Assistance Program (EAP)

Recommendations related to discussion points:

- a. Employee protection
  - 1) Determine in advance who would receive anti-viral medications. Conduct a risk analysis and consider

stockpiling some medication in advance as it may be difficult to acquire once a pandemic begins. Determine how you would distribute medication to employees who would need it.

- 2) Establish and implement hand washing policies and hand sanitizer stations
- 3) Assess your company's ability to implement employee distancing (keeping employees 3-6 feet apart from each other) and determine your needs for masks and gloves.

b. Human Resources (HR)

- 1) Determine in advance which HR policies related to sick leave, short term disability, long term disability and return to work would need to be relaxed if employees cannot see a physician (i.e. do you require a physician note for Short Term Disability, or Long Term Disability). Determine your pay policies for employees who are prevented from working due to government actions or who refuse to work due to family issues or fear. Determine your policies on overtime pay or "hazard" pay for those employees who put in extra effort to maintain critical operations. Determine how you will pay employees if they cannot access banks or if your payroll function is disrupted.

c. Overseas travel

- 1) Employees traveling overseas will expect support from their company. Develop plans to provide monetary support, medical support, and the ability to communicate with their family at home. In addition, develop a method for keeping employees and their family up to date with information.
- 2) Explore capabilities of overseas medical support companies (International SOS, MedEx, etc.)

d. Leadership succession

- 1) Determine in advance the succession order and obtain board of director approval for the succession plan.
- 2) Determine a succession order at the department or business unit level as well.
- 3) Determine what messages will be communicated to key audiences (employees, shareholders, board of director,

the public, the government) if top leadership is sick or dead.

- 4) Determine how critical company knowledge will be transferred to new leaders during a crisis.
- e. Employee psychological support
  - 1) Review the capabilities of your EAP provider and assess whether they can provide services via telephone and if they can handle a significantly increased volume.

## 2) Issues related to Facilities

### Discussion Points

- a. Maintaining a clean environment during a cleaning staff shortage. Enabling employees to safely clean their work areas.
- b. Maintaining secure facilities by limiting visitors, contractors and vendors and by adapting enhanced security procedures
- c. Safe distancing and infection control procedures to limit disease spread in the workplace.

### Recommendations related to discussion points:

- a. Cleaning
  1. Determine how common areas will be used and cleaned during a significant worker shortage in your cleaning contractor. This may involve closing some common areas or alternating which restroom facilities are open, etc.
  2. Train employees to clean their own work areas and provide adequate cleaning supplies to accomplish this. Determine whether employees can bring in their own cleaning supplies and if so, which ones are effective, safe and will not ruin furniture and interior surfaces.
  3. Determine how high risk common touch areas will be cleaned such as elevator buttons, door knobs, telephone receivers, computer keyboards, computer mice.
  4. If in a multitenant or leased site, determine what plans the landlord has to maintain or augment cleaning services during a pandemic.
- b. Maintaining secure facilities
  1. Determine your policies for visitors, contractors and vendors during a pandemic.

2. Determine what, if any, screening will take place at entry points.
  3. Determine what areas would need extra security (i.e. do you make products that the public might perceive as life saving which would need added security)
- c. Infection Control
1. Assess your company's ability to implement employee distancing (keeping employees 3-6 feet apart from each other).
  2. If you have areas where employees share telephone handsets or computer keyboards (i.e. call centers, help desks, etc.) strongly consider providing each individual with their own telephone headset, keyboard and mouse.

### 3) Communication

#### Discussion Points

- a. How to obtain reliable competent information and dispel rumors and correct false information
- b. Establishing a crisis communication policy outlining who is authorized to speak, the channels to be used to reach key audiences minimizing the need for face to face meetings (employees, clients, customers, vendors, board of directors, etc.), key messages and how to work with the media
- c. Working with local government to coordinate messages
- d. Work with local media to disseminate correct information

#### Recommendations related to discussion points:

- a. Reliable information
  1. Determine sources of reliable information in advance. Reach out now to local health department or office of emergency management.
  2. Develop a procedure for verifying information before disseminating it to employees.
- b. Crisis communications plan
  1. Develop messages in advance for those areas that can be anticipated.
  2. Pre-identify who is authorized to speak for the company to the public and to the media. Ensure that they are adequately trained in advance.

3. Explore communication channels to quickly disseminate important information to critical employees.
  4. Pre-determine the frequency of regular communications to key audiences so an information vacuum doesn't develop.
  5. As there could be legal ramifications to your crisis communications (especially if communications are not clear and concise), involve your legal department in the development of this plan.
  6. Ensure that you disseminate a consistent message across all forms of communication (i.e. websites, hotlines, the media, written communication, etc.)
- c. Coordination with government
1. Develop linkages with key government public information officers.
  2. Institute the incident command system (ICS) for crisis management and ensure that your public information officer has sufficient training in advance.
- d. Media
1. Ensure regular and accurate information flow to your local media.
  2. Develop relationships with local media outlets in advance
  3. Determine ways to use the local media to disseminate valid information to your employees and the public.
  4. Ensure that there is consistency of information across all forms of communication.

#### 4) Mission Critical Activities at Risk

##### Discussion Points

- a. Business continuity plans (BCP) development including a pandemic influenza section
- b. Utilization of a well established organized approach to managing a pandemic such as ICS that is used widely through government and many industries
- c. Identification of core business processes and the development of strategies to maintain those processes during a pandemic
- d. Assessment of the impact of not meeting Sarbanes-Oxley reporting requirements and other regulatory requirements

- e. Exploring finance activities. Ensuring adequate access to cash or credit to maintain operations and payroll.

Recommendations related to discussion points

- a. Business Continuity Plan development
  - 1. It is important to develop business continuity plans in advance and to train on those plans. Normal business-as-usual processes may not function during a pandemic.
  - 2. With a solid plan in place and good training, key employees will have confidence in themselves and will know what steps to take and in what order to maintain critical business functions.
  - 3. Strong business continuity planning gives businesses the best chance at sustaining operations and viability during and after a pandemic.
  - 4. If employees are informed in advance how they will be protected and what to expect from their company, it increases the likelihood that they will come to work.
- b. Incident Command System (ICS)
  - 1. An organized incident management structure will allow a business to rapidly respond to the changing business conditions during a pandemic.
  - 2. ICS is used throughout government and will allow for seamless communication with all government entities.
  - 3. ICS may be required for some regulated industries or for companies that do business with government agencies.
- c. Core Business Processes
  - 1. Determine in advance what business processes must be maintained during a pandemic.
  - 2. Determine critical inputs that business processes need and ensure their availability. Make sure that critical suppliers have pandemic plans in place.
  - 3. Review banking relationships to ensure access to cash/lines of credit. Review supplier contracts to allow for continued supplies if payments are late.
  - 4. Review contracts with customers to determine your liability if you cannot provide service because you are unable to obtain the necessary raw materials.
- d. Sarbanes-Oxley

1. Review with your legal and regulatory department the legal ramifications of not meeting SOX reporting requirements.
- e. Finance
1. Review banking relationship to ensure access to cash and/or lines of credit.
  2. Determine how you will pay employees if they cannot access their banks or if your payroll process is disrupted. Determine how you will pay employees who are working from home (i.e. If you require employees to punch in/out for work to track their hours, etc.)
  3. Establish a procedure for emergency purchases or unanticipated expenditures that can occur quickly in response to a changing business environment.
  4. Establish procedures for purchasing if your normal purchasing process is interrupted (i.e. software problem, personnel shortage, etc.)

## 5) Technology

### Discussion Points

- a. Assessing the technology needs of employees working from home and the development of workaround strategies for logjams on the internet and telephone networks
- b. Corporate IT infrastructure augmentation to support the anticipated number of employees that will be asked to work from home. This includes increased help desk capability to support home users with problems

### Recommendations related to discussion points

- a. Work from home technology
  - 1) Determine triggers when work from home technology (laptops, modems, internet connections, etc.) will be procured, distributed, installed, tested and when employees will be trained on its use.
  - 2) Pre-identify company sponsored remote work sites where employees can go to work and not come to headquarters. Ensure social distancing by staggering work times, limit number of people who have access, provide cleaning supplies for high touch items such as keyboards, mouse and telephone handset.

- 3) Determine what types of data transfers will be allowed to limit bandwidth use (for example, disallow downloading of video or large pictures).
- b. Corporate IT infrastructure
- 1) Anticipate and plan for the IT needs for the number of employees that will work from home.
  - 2) Plan for security needs to protect important data. A crisis is not the time to relax corporate IT security protocols. Some people will look for the chaos of a crisis to steal important data.
  - 3) Plan for the increased help desk needs for employees who are not accustomed to working from home.

## **Section 5: Conclusion**

The overall mission of this workshop including the exercise was to educate participants and facilitate effective discourse between key stakeholders on issues relating to pandemic influenza preparedness. Participants were able to come together in working groups and openly communicate their ideas, difficulties and recommendations in a positive, collaborative atmosphere.

One of the major themes and recommendations from this exercise is the importance of having an adequate supply of essential resources in anticipation of an influenza pandemic. Participants consistently highlighted the significance of investing in employee protection strategies such as anti-viral medications and vaccines, personal protective equipment, social distancing and other infection control materials, in addition to reinforcing overall pandemic influenza planning. Additionally, strong emphasis was placed on the practice of cross-training staff in order to address potential staffing shortages during a crisis. Both of these issues relate to pre-pandemic planning and point to the importance of businesses and healthcare organizations working to develop an effective pandemic influenza preparedness plan.

There were several important lessons learned during the exercise. Principal among these is the need for collaboration and communication among local and regional stakeholders. Additionally, it was evident that although some of the stakeholders were experienced in emergency response planning, this was not uniformly true of all businesses.

Local and regional stakeholders should use the findings generated by this exercise to develop and refine preparedness plans and procedures. Furthermore, the resulting recommendations should guide stakeholders in educating and training their employees in those plans.

The primary goal of this exercise was to facilitate communication concerning pandemic influenza preparedness between groups of local and regional stakeholders. This goal was realized as participants of varying degrees of experience and functional expertise assembled together to share ideas and challenges related to preparedness planning. Their efforts and resulting recommendations are commendable.

## Appendix A: Expanded list of planning issues

The five broad areas that must be included in business action plans are: People; Facilities; Technology; Mission Critical Activities at Risk; and Communications.

### Area 1 – People

- Staffing
  - What strategies will your company use to keep operations going during a staffing shortage?
  - Do you have policies to use retirees, freelancers or contract workers?
  - If you bring in retirees, freelancers or contract workers, how will you ensure that they have the skills to perform their job?
  - Will you implement flexible work schedules to limit contact between employees?
  - Do you have a policy that encourages telecommuting?
- Sick Time or Paid Time Off (PTO)
  - Will sick employees be required to use up their sick time and Vacation before other benefits begin?
  - What is the company policy if an employee stays home to care for a sick family member?
  - How will Short Term Disability come into play?
  - How will Long Term Disability come into play?
  - How will FMLA (Family Medical Leave Act) come into play?
- Pay
  - If an employee is subject to government-imposed quarantine or isolation requirements, will they continue to get paid?
  - If a healthy employee refuses to come to work, will they get paid?
  - If an employee is screened at the entrance to work and is refused entry, will they get paid?
- Unions
  - Have you engaged union leadership in pandemic planning?

- Illness
  - Will your company require a note from a medical provider if the employee is out sick for more than a certain number of days?
  - Does your disability policy require “medical certification” prior to benefits beginning?
  - Will your company screen employees at the entrance to a work place? If so, how will they be screened?
  - How will sick employees be tracked?
  - Will you modify the normal way employees call in sick?
  - How will employees return to work? Will you require medical clearance?
  - If an employee gets sick at work, how will they be handled? Do you have a designated place for them to be placed until they are sent home or to a medical facility? Who decides where to send an employee that gets sick at work?
  
- Bereavement
  - If an employee has a death in the family, will they receive time off? What if there are multiple deaths in a family?
  
- Travel
  - What is the company travel policy as the pandemic phases increase? Do you restrict travel? If so, when?
  - Will you restrict personal travel?
  - Do you have a mechanism in place to bring internationally traveling employees home if they get sick while overseas?
  - Who tracks employees in transit?
  - Will you have a home quarantine policy for employees returning from overseas?
  - If you have expatriate employees, when do you bring them home?
  
- HR Policies
  - Are there HR policies that would be modified, waived or expanded during a pandemic?
  - Have the policies that would be changed during a pandemic been identified and associated with triggers?
  - How would changed HR policies be communicated to employees?
  - What is the process that is used to change HR policies during a crisis?
  
- Personal Protective Equipment
  - Have you purchased or decided to purchase PPE such as masks or gloves?
  - What masks have been purchased and how many (as a percentage of employees)?
  - What gloves have been purchased and how many? How will gloves be used?
  - Have you purchased other PPE in addition to masks and gloves?

- How will you train your employees on the proper technique to put on (don) and take off (doff) PPE?
- If an employee refuses to wear PPE, what are the consequences?
- If an employee cannot wear PPE due to facial hair, what is your policy?
  
- Anti-viral Medications
  - Have you considered stock-piling any anti-viral medications?
  - Are you or have you purchased anti-viral medications? If so, how much?
  - What are the barriers to purchasing anti-viral medications?
  - How would medications be distributed and when?
  - Would anti-viral medications be pre-distributed?
  
- Personal Hygiene
  - How will employees be trained on the need for increased hand washing or the use of waterless hand sanitizers?
  - What personal hygiene supplies are you ordering and when?
  - Are waterless hand sanitizers available now in your company?
  
- Work Environment
  - Have you reviewed the layout of your work environment so that social distancing can be implemented?
  - If you have call centers, at a minimum, do employees have their own headsets and keyboards?
  - Who is responsible for cleaning and maintaining employee work areas?
  - Have you designed strategies to limit face to face meetings between employees and between employees and customers?
  
- Family Care and Pet Care
  - What support will your company provide employees who care for elders, children, pets?
  
- Employee Assistance Program (EAP)
  - How will the emotional needs of your employees be supported during a high stress time or when there are significant numbers of deaths in the community?
  - Does your EAP provider have the ability to provide telephone or virtual counseling?
  - Does your EAP provider have the capacity to handle the surge in demand for services?
  
- Succession Planning
  - Do you have alternates for senior executives?
  - Do you have alternates for the Incident/Crisis Management Team?

## Area 2 – Facilities

- Are you planning to increase your janitorial services during a pandemic to twice a day cleaning?
- How will you achieve an increased level of janitorial services?
- Will employees be responsible for cleaning their own work areas? If so, how will they be trained?
- Who will clean bathrooms, isolation rooms, etc.?
- How will common items and high touch items be cleaned such as door knobs, elevator buttons, door bells or door releases, intercoms, etc.?
- Cleaning Solutions
  - Have you determined which cleaning solutions you will use for different types or surfaces?
  - Have you stockpiled cleaning solutions?
  - Have you determined if cleaning solutions have any health side effects?
- Hand Sanitizers
  - Have you made hand sanitizer solutions available to your employees?
  - Have you mounted dispensers on walls in your workplace?
  - Have you made sure that alcohol based sanitizer solutions are not near electrical switches or outlets to prevent a fire hazard?
- Security
  - Will there be any increased security needs during a pandemic?
    - To protect stockpiled supplies
    - To protect medications
    - To protect closed facilities
  - Will you restrict vendors and customers from coming on your site?
  - Will you screen visitors and vendors? Will you require them to wear PPE? If so, how will you train them?
- Are there facilities that you will close during the pandemic wave?
- HVAC
  - How often do you currently change filters and how often will you change them during a pandemic?
  - How will you handle contaminated HVAC filters and are these HEPA or allergenic?
  - How much air in your building is recycled?
- If you are a tenant in a multitenant building, have you worked with the building management on pandemic planning?

### **Area 3 – Technology**

- Have you identified technology systems and computer applications across your company that must be maintained to support mission critical activities?
- Have you developed strategies to maintain critical systems during a personnel shortage?
- Do you have the technology infrastructure in place to support social distancing (IT, telecom, etc.)?
- What modifications are required in your company's IT network to allow an employee to telecommute?
- What security precautions have been taken to maintain the integrity of your networks when large numbers of employees are working from home?
- Have you considered increasing remote operating, monitoring and control capabilities?
- Have you determined the equipment requirements to promote working from home (i.e. laptops, VPN, Internet connectivity)?
- Have you identified and decreased single points of technology failure?
- Will you suspend upgrades and changes during a pandemic wave?
- How will you expand help desk capability to support workers at alternate sites or home?
- Will you expand critical hardware spare parts inventory?

### **Area 4 – Mission Critical Activities at Risk**

- Have you identified activities or processes that are critical to sustaining operations?
- How will you sustain these activities during a severe staff shortage?
- Have you developed categories of jobs ("buckets") based on their criticality to your company?
- How will you serve your customers differently to avoid contact?
- How will you handle supply chain disruptions?
- In manufacturing, how will you make it safe for employees to come to work?
- Have you assessed pandemic plans of outside vendors/contractors that provide critical services?
- Are there certain jobs that are so critical that you are considering sequestering those employees? If so, how will you provide for their needs and the needs of their families? Will you provide these employees with anti-viral prophylaxis?
- Have you done financial projection assuming revenue reductions of 10-20-30% for 90-120 days?
- What will be the impact of suspending non-critical functions?

### **Area 5 – Communications**

- How will you communicate with key stakeholders?
  - Employees and former employees
  - Customers
  - Regulators
  - Board of Directors
  - Shareholders
- Are there languages that key messages should be translated into?
- Have you done message mapping or pre-planning of key messages at different pandemic phases?
- Have you designated spokespersons for Pandemic and have they received any special training?
- Is there an emergency notification system in place?
- Do you have alternative communication methods if the phones are overloaded?
- Do you have an employee hotline, customer hotline?
- Can you quickly change your website to reflect new information? Do you have a dark website that is ready to go during a crisis?
- Do you have pandemic planning materials on your company website to inform your employees on company planning activities and to help your employees create a personal family plan (i.e. link to [www.ready.gov](http://www.ready.gov))?
- The Media
  - Do you have a way to communicate with the media without holding a press conference?
  - Do you have a media policy for your employees?
  - Do you have a press briefing area that follows social distancing guidelines?