



Corporate Management Group's Emergency Pandemic Response Procedures

Purpose: The following information contains CMG's internal response to a Pandemic outbreak. In case of an emergency situation all personnel are to follow the processes outlined in the policy.

Scope: The scope of the plan includes all Corporate, Off-site and On-site processes and procedures to follow. Because of the nature of our business many of the On-site processes and procedures will be aligned with the client's internal processes and procedures.

Delegation of Authority: In case of a need to implement the response procedures the following is a delegation of authority in the decision process:

- | | | |
|----|-------------------|--------------|
| 1) | Curt Olson | 507/951-0407 |
| 2) | Matt Forss | 303/748-4651 |
| 3) | Justin Knutson | 763/232-6156 |
| | Margo Sage | 507/990-9693 |
| 4) | Corporate Office* | 866/920-1425 |

***In the event that you need to call Corporate direct your call to Amanda Carnahan for assistance.**

Corporate: All Corporate functions can be done remotely in the event of an emergency. Corporate personnel are directed to follow normal remote procedures.

Off-Site: Off-site personnel's normal office functions are currently done remotely and no alterations are necessary. In the event a site visit has been scheduled follow the authorization response listed above for direction.

On-Site: All on-site personnel are to follow internal procedures outlined below. In the event the Pandemic reaches a stage of significant impact to the client site personnel are directed to follow the client's procedures. These would involve plant shutdown and evacuation procedures. Immediately following personnel evacuation on-site personnel should follow the above authorization response for direction.

If the Pandemic has reach a concerning level impacting, or potentially impacting, a client's business due to high absenteeism please refer to the process as listed below under Planning for Absenteeism.

Pandemic Response Procedures – H1N1

Background

The novel H1N1 flu virus is causing illness in infected persons in the United States and countries around the world. CDC expects that illnesses may continue for some time. As a result, you or people around you may become ill. If so, you need to recognize the symptoms and know what to do.

Symptoms



The symptoms of this new H1N1 flu virus in people are similar to the symptoms of seasonal flu and include fever, cough, sore throat, runny or stuffy nose, body aches, headache, chills and fatigue. A significant number of people who have been infected with this new H1N1 virus also have reported diarrhea and vomiting. The high risk groups for novel H1N1 flu are not known at this time but it's possible that they may be the same as for seasonal influenza. People at higher risk of serious complications from seasonal flu include people age 65 years and older, children younger than 5 years old, pregnant women, people of any age with chronic medical conditions (such as asthma, diabetes, or heart disease), and people who are immunosuppressed (e.g., taking immunosuppressive medications, infected with HIV).

Avoid Contact With Others

If you are sick, you may be ill for a week or longer. You should stay home and avoid contact with other persons, except to seek medical care. If you leave the house to seek medical care, wear a mask or cover your coughs and sneezes with a tissue. In general you should avoid contact with other people as much as possible to keep from spreading your illness. At the current time, CDC believes that this virus has the same properties in terms of spread as seasonal flu viruses. With seasonal flu, studies have shown that people may be contagious from one day before they develop symptoms to up to 7 days after they get sick. Children, especially younger children, might potentially be contagious for longer periods.

Treatment is Available for Those Who Are Seriously Ill

It is expected that most people will recover without needing medical care.

If you have severe illness or you are at high risk for flu complications, contact your health care provider or seek medical care. Your health care provider will determine whether flu testing or treatment is needed. Be aware that if the flu becomes wide spread, there will be little need to continue testing people, so your health care provider may decide not to test for the flu virus.



Antiviral drugs can be given to treat those who become severely ill with influenza. These antiviral drugs are prescription medicines (pills, liquid or an inhaler) with activity against influenza viruses, including H1N1 flu virus. These medications must be prescribed by a health care professional.

There are two influenza antiviral medications that are recommended for use against H1N1 flu. The drugs that are used for treating H1N1 flu are called oseltamivir (trade name Tamiflu ®) and zanamivir (Relenza ®). As the H1N1 flu spreads, these antiviral drugs may become in short supply. Therefore, the drugs will be given first to those people who have been hospitalized or are at high risk of complications. The drugs work best if given within 2 days of becoming ill, but may be given later if illness is severe or for those at a high risk for complications.

Aspirin or aspirin-containing products (e.g. bismuth subsalicylate – Pepto Bismol) should not be administered to any confirmed or suspected ill case of novel influenza A (H1N1) virus infection aged 18 years old and younger due to the risk of Reye syndrome. For relief of fever, other anti-pyretic medications are recommended such as acetaminophen or non steroidal anti-inflammatory drugs. For more information about Reye's syndrome, visit the [National Institute of Health website](#).

- Check ingredient labels on over-the-counter cold and flu medications to see if they contain aspirin.
- Teenagers with the flu can take medicines **without** aspirin, such as acetaminophen (Tylenol®) and ibuprofen (Advil®, Motrin®, Nuprin®), to relieve symptoms.
- Children younger than 4 years of age should not be given over-the-counter cold medications without first speaking with a healthcare provider.

Emergency Warning Signs

If you become ill and experience any of the following warning signs, seek emergency medical care.

In children emergency warning signs that need urgent medical attention include:

- Fast breathing or trouble breathing
- Bluish or gray skin color
- Not drinking enough fluids
- Severe or persistent vomiting
- Not waking up or not interacting
- Being so irritable that the child does not want to be held
- Flu-like symptoms improve but then return with fever and worse cough

In adults, emergency warning signs that need urgent medical attention include:

- Difficulty breathing or shortness of breath
- Pain or pressure in the chest or abdomen
- Sudden dizziness
- Confusion
- Severe or persistent vomiting
- Flu-like symptoms improve but then return with fever and worse cough

Interim Recommendations for Facemask and Respirator Use in Certain Community Settings Where Novel Influenza A (H1N1) Virus Transmission Has Been Detected

This document provides interim guidance and will be updated as needed.

Detailed background information and recommendations regarding the use of masks and respirators in non-occupational community settings can be found on PandemicFlu.gov in the document [Interim Public Health Guidance for the Use of Facemasks and Respirators in Non-Occupational Community Settings during an Influenza Pandemic](#).



Information on the effectiveness of facemasks¹ and respirators² for the control of influenza in community settings is extremely limited. Thus, it is difficult to assess their potential effectiveness in controlling swine influenza A (H1N1) virus transmission in these settings. In the absence of clear scientific data, the interim recommendations below have been developed on the basis of public health judgment and the historical use of facemasks and respirators in other settings.

In areas with confirmed human cases of novel influenza A (H1N1) virus infection, the risk for infection can be reduced through a combination of actions. No single action will provide complete protection, but an approach combining the following steps can help decrease the likelihood of transmission. These actions include frequent handwashing, covering coughs, and having ill persons stay home, except to seek medical care, and minimize contact with others in the household. Additional measures that can limit transmission of a new influenza strain include voluntary home quarantine of members of households with confirmed or probable novel influenza A (H1N1) cases, reduction of unnecessary social contacts, and avoidance whenever possible of crowded settings.

When close contact with others cannot be avoided, the use of facemasks or respirators in areas where transmission of novel influenza A (H1N1) virus has been confirmed should be considered as follows:

1. Persons who are at high risk of complications from novel influenza A (H1N1) infection (for example, persons with certain chronic medical conditions, children less than 5 years, persons 65 or older, and pregnant women) should consider their risk of exposure to novel influenza if they attend public gatherings in communities where novel influenza A virus is circulating. In communities with several reported cases of novel influenza A (H1N1) virus infection, persons who are at risk of complications from influenza should consider staying away from public gatherings.
2. Based on currently available information, for non-healthcare settings where frequent exposures to persons with novel influenza A (H1N1) are unlikely, masks and respirators are not recommended.
3. Persons who are ill with influenza-like symptoms should stay home and limit contact with others as much as possible. When not alone or in a public place, protect others by wearing facemasks¹ to reduce the number of droplets coughed or sneezed into the air and the time spent in crowded settings should be as short as possible.
4. Respirators² should be considered for use by individuals for whom close contact with an infectious person is unavoidable. This can include selected individuals who must care for a sick person (e.g., family member with a respiratory infection) at home.

These interim recommendations will be revised as new information about the use of facemasks and respirators in the current setting becomes available.

For more information about human infection with swine influenza virus, visit the [CDC H1N1 Flu website](#).

The U.S. Equal Employment Opportunity Commission

Planning for Absenteeism

In light of the ADA's requirements, how may employers ask employees about factors, including chronic medical conditions, that may cause them to miss work in the event of a pandemic?

An employer may survey its workforce to gather personal information needed for pandemic preparation **if the employer asks broad questions that are *not* limited to disability-related inquiries.** An inquiry would **not** be disability-related if it identified non-medical reasons for absence during a pandemic (e.g., mandatory school closures or curtailed public transportation) on an equal footing with medical reasons (e.g., chronic illnesses that weaken immunity). Below is a sample ADA-compliant survey that could be given to all employees before a pandemic.

ADA-Compliant Pre-Pandemic Employee Survey

Directions: Answer "yes" to the whole question **without** specifying the reason or reasons that apply to you. Simply check "yes" or "no" **at the bottom.**

In the event of a pandemic, would you be unable to come to work because of any of the following reasons:

If schools or day-care centers were closed, you would need to care for a child;

If other services were unavailable, you would need to care for other dependents;

If public transport were sporadic or unavailable, you would be unable to travel to work, and/or;

If you or a member of your household fall into one of the categories identified by CDC as being at high risk for serious complications from the pandemic influenza virus, you would be advised by public health authorities not to come to work (e.g., pregnant women; persons with compromised immune systems due to cancer, HIV, history of organ transplant or other medical conditions; persons less than 65 years of age with underlying chronic conditions; or persons over 65).

Answer: YES _____ NO _____

May an employer require entering employees to have a medical test post-offer to determine their exposure to the influenza virus?

Yes, in limited circumstances. The ADA permits an employer to require entering employees to undergo a medical examination **after** making a conditional offer of employment but before the individual starts work, if all entering employees in the same job category must undergo such an examination.

Example A: An employer in the international shipping industry implements its pandemic influenza preparedness plan when the WHO and the CDC confirm that a new influenza virus, to which people are not immune, is infecting large numbers of people in multiple countries. Because the employer gives these medical tests post-offer to all entering employees in the same job categories, the examinations are ADA-compliant.

Infection Control in the Workplace

During a pandemic, may an employer require its employees to adopt infection control practices?

Yes. Requiring infection control practices, such as regular hand washing, coughing and sneezing etiquette, and tissue usage and disposal, does not implicate the ADA.

May an employer require its employees to wear personal protective equipment (e.g., face masks, gloves, or gowns) designed to reduce the transmission of a pandemic virus?

Yes. An employer may require employees to wear personal protective equipment. However, where an employee with a disability needs a related reasonable accommodation under the ADA (e.g., non-latex gloves, or gowns designed for individuals who use wheelchairs), the employer should provide these absent undue hardship.

May an employer encourage or require employees to telework (i.e., work from an alternative location such as home) as an infection control strategy?

Yes. An employer may encourage or require employees to telework as an infection-control strategy, based on timely information from public health authorities about pandemic conditions. Telework also may be a reasonable accommodation.

Of course, employers must not single out employees either to telework or to continue reporting to the workplace on a basis prohibited by any of the EEO laws.

See generally *EEOC Fact Sheet on Work at Home/Telework as a Reasonable Accommodation* at <http://www.eeoc.gov/facts/telework.html>

Workplaces Classified at Lower Exposure Risk (caution) for Pandemic Influenza: What to do to protect employees

If your workplace does not require employees to have frequent contact with the general public, basic personal hygiene practices and social distancing can help protect employees at work. Follow the general hygiene and social distancing practices previously recommended for all workplaces (see page 26). Also, try the following:

Communicate to employees what options may be available to them for working from home.

Communicate the office leave policies, policies for getting paid, transportation issues, and day care concerns.

Make sure that your employees know where supplies for hand hygiene are located.

Monitor public health communications about pandemic flu recommendations and ensure that your employees also have access to that information.

Work with your employees to designate a person(s), website, bulletin board or other means of communicating important pandemic flu information.

More information about protecting employees and their families can be found at: www.pandemicflu.gov.

Steps Every Employer Can Take to Reduce the Risk of Exposure to Pandemic Influenza in Their Workplace

The best strategy to reduce the risk of becoming infected with influenza during a pandemic is to avoid crowded settings and other situations that increase the risk of exposure to someone who may be infected. If it is absolutely necessary to be in a crowded setting, the time spent in a crowd should be as short as possible. Some basic hygiene (see www.cdc.gov/flu/protect/stopgerms.htm) and social distancing precautions that can be implemented in every workplace include the following:

Encourage sick employees to stay at home.

Encourage your employees to wash their hands frequently with soap and water or with hand sanitizer if there is no soap or water available. Also, encourage your employees to avoid touching their noses, mouths, and eyes.

Encourage your employees to cover their coughs and sneezes with a tissue, or to cough and sneeze into their upper sleeves if tissues are not available. All employees should wash their hands or use a hand sanitizer after they cough, sneeze or blow their noses.



Employees should avoid close contact with their coworkers and customers (maintain a separation of at least 6 feet). They should avoid shaking hands and always wash their hands after contact with others. Even if employees wear gloves, they should wash their hands upon removal of the gloves in case their hand(s) became contaminated during the removal process.

Provide customers and the public with tissues and trash receptacles, and with a place to wash or disinfect their hands.

Keep work surfaces, telephones, computer equipment and other frequently touched surfaces and office equipment clean. Be sure that any cleaner used is safe and will not harm your employees or your office equipment. Use only disinfectants registered by the U.S. Environmental Protection Agency (EPA), and follow all directions and safety precautions indicated on the label.

Discourage your employees from using other employees' phones, desks, offices or other work tools and equipment.

Minimize situations where groups of people are crowded together, such as in a meeting. Use e-mail, phones and text messages to communicate with each other. When meetings are necessary, avoid close contact by keeping a separation of at least 6 feet, where possible, and assure that there is proper ventilation in the meeting room.

Reducing or eliminating unnecessary social interactions can be very effective in controlling the spread of infectious diseases. Reconsider all situations that permit or require employees, customers, and visitors (including family members) to enter the workplace. Workplaces which permit family visitors on site should consider restricting/eliminating that option during an influenza pandemic. Work sites with on-site day care should consider in advance whether these facilities will remain open or will be closed, and the impact of such decisions on employees and the business.

Promote healthy lifestyles, including good nutrition, exercise, and smoking cessation. A person's overall health impacts their body's immune system and can affect their ability to fight off, or recover from, an infectious disease.