

**AVIAN FLU OUTBREAK / PANDEMIC
WSU PREPARATION & PLANNING
(Revised February 2007)**

WSU PANDEMIC PLANNING COMMITTEE

Administrative Services
Emergency Management
Student Health
Dean of Students
Housing
Nursing
EH&S
Health Professions
University Relations

RESPONSIBILITIES OF COMMITTEE:

- Address components of pandemic plan
- Become familiar with plan components
- Establish on-campus points of distribution for supplies and/or medicines for students faculty and staff
- Address essential personnel issues
 - How will the University provide protection?
 - Work schedule changes/accommodations
- Establish methods for:
 - Bio-waste disposal
 - Sanitation
 - Custodial
 - Garbage collection
- Communicate pertinent plan components to students, faculty, staff, i.e.
 - Hygiene techniques for prevention
 - Educational awareness campaign
 - Travel issues (to affected areas)
 - How to identify ill students
 - Sheltering-in-Place/Food & housekeeping for affected residence hall students (affected students may be quarantined in residence halls)
- Become familiar with local and state health department plans
- Become familiar with local hospital plans
- Address communication issues
- Integrate plan with University EOP, local, state & federal plans
- Review policies, procedures for:
 - Public Information
 - Cancellation of classes/closures of campus facilities/activities if warranted
 - Working at home and/or telecommunications
 - Deaths, guardian notification, handling of remains
- Facilitate pre-event purchases (for distribution as needed)
 - Alcohol hand cleaners
 - Respirators (fit testing for essential medical personnel)
 - N-95 filtering face mask
 - Resources for student health center

AVIAN FLU OUTBREAK / PANDEMIC WSU PREPARATION & PLAN

Planning

WSU has in place an all-hazard Emergency Operations Plan (EOP) which addresses responsibilities and actions taken in the event of a major event or disaster that will affect the campus. The EOP will be a guide in decisions with regard to an avian flu outbreak/pandemic. The concept of operations outlined in the EOP is as follows:

- a) The EOP may be activated fully or in part by WSU President, the Vice President for Administrative Services, the Police Chief or their designees depending on the type or severity of the event.
- b) Pre-pandemic preparation will be accomplished by assembling a planning team, developing procedures and educating the campus population-see Appendix A.
- c) WSU's avian flu outbreak/pandemic emergency response will generally be classified into one of three operational levels, as soon as an event has occurred, as illustrated in the steps below.
 - ✓ Observation or notification of the event
 - ✓ Identification of the event
 - ✓ Nature and scope of the event
 - ✓ Severity of the event
 - ✓ When the event occurred
 - ✓ Determination of operational level

Level One – Green

This is a pre-event preparedness and monitoring level.

This level includes any incident, potential or actual, which will not seriously affect the overall functional capacity of WSU. WSU will continue to provide prevention and hygiene techniques on their website as well as updates on the status of the avian flu virus. They will additionally provide information regarding the flu in relation to the operations of their campuses.

The WSU pandemic committee members will monitor and assess the situation daily and meet regularly as required.

Level Two – Yellow

This is an elevated level. Avian flu virus has mutated human-to-human and a case has been confirmed in the U.S.

This level includes any incident, potential or actual, which could possibly affect an entire building(s), or area of campus and will disrupt the overall operations of WSU. Major policy considerations and decisions may be required.

WSU sponsored travel may be restricted to and from areas where the flu is present. Students, faculty and staff who travel to and from those areas for personal reasons will be required to disclose that information prior to being treated at the Student Health Center. The Student Health Center will have supplies available to protect their workforce and will provide training necessary for protection. Essential personnel will be given N95 protective masks.

Level Three – Red

This is a High Risk Level. Avian flu has mutated human-to human contact and a confirmed case is in Utah and/or a WSU campus.

This level includes any event or occurrence which has taken place and has seriously impaired or halted the operations of WSU. In the event of a disaster of major proportions WSU would likely be self-sustaining for a period of time because of the lack of medical personnel. Response to a potential avian flu outbreak will be handled through a unified command and control, in which entities such as Student Health, Health Professions, University Relations, Administrative Services, Emergency Management, Weber-Morgan Health Department, Weber County Emergency Management, Ogden City EMS and others designated will come together to assess the current situation. Activation of the campus Emergency Operations Center (EOC) may be necessary to begin response and notification procedures as well as administrative decisions in regards to campus operations (preferably in a virtual EOC setting). This level may require personnel be put on standby and/or report/connect in to the EOC if activated. This level will require integration with local, county and regional entities actions. In some cases mass student/personnel casualties may be sustained. A coordinated effort of all campus resources is required to control the situation effectively. Outside emergency medical services will be essential. The Emergency Operations Plan (EOP) and Emergency Operations Center will be fully activated.

The WSU policy group and coordination group will report/connect in to the EOC where assessment of the situation and assignments can be given. Responsibilities would include assessing the situation, warning the campus populace, evacuating impacted areas, establishing and maintaining communications and employing resources to provide for care and treatment of injured as well as preserving lives and property. It will be necessary to keep the campus population informed of changing conditions and provide them with precautionary instructions.

Assistance from the state will be requested if campus and local resources are fully committed and the WSU President declares the situation to be a “local emergency”.

This Pandemic plan will supplement the EOP and provide specific information regarding an avian flu outbreak/pandemic that could affect WSU students, faculty and staff at Ogden and Davis campus as well as all other WSU learning centers.

This pandemic plan is created to achieve the following goals:

- Limit the number of illnesses and deaths
- Preserve continuity of essential government functions
- Minimize social disruption
- Minimize economic losses

Representatives from WSU will serve on the Weber-Morgan Health pandemic taskforce to coordinate and integrate plans and procedures.

Assumptions

- a) An influenza pandemic will result in outbreaks around the world. All individuals across the country may be impacted simultaneously. An outbreak will affect students, faculty and staff
- b) There will be a need for heightened surveillance

- c) Birds with an avian influenza strain may arrive and cause avian outbreaks in Utah and/or Weber State University before the onset of a pandemic, significantly impacting domestic poultry, wild and exotic birds, and other species (See Appendix E for handling of birds)
- d) Antiviral medications will be in extremely short supply. Local supplies of antiviral medications may be prioritized for use
- e) A vaccine for the avian flu virus will probably not be available for 6 to 8 months following the emergence and confirmation of the virus.
- f) Insufficient supplies of vaccines and antiviral medicines will create the need to practice social distancing strategies and utilize public education prevention to control the spread of the disease on campus.
- g) The number of ill people requiring any form of medical care and/or hospitalization will overwhelm the local and regional health care systems.
- h) The University may have to respond while the campus workforce experiences 25-35% absenteeism due to illness
- i) Preventative measures and protection control measures will need to be developed and implemented prior to the pandemic
- j) There could be significant disruption of critical infrastructure to include shopping centers, transportation, banking, utilities, public safety, and medical services
- k) All major buildings and departments on campus will maintain specific avian flu outbreak/pandemic plans relevant to their area operations and will ensure that all personnel concerned are trained and familiar with existing plans and procedures, and capable of implementing them in a timely manner.

Efforts to mitigate, prepare, respond to and recover from a major flu outbreak on campus will involve the forming of an internal planning committee. This committee will also work with Weber Morgan Health Department on the following:

- a) Familiarization of procedures for mass administration/distribution of vaccines
- b) Distribution of medications and/or supplies to students, faculty, staff if situation warrants
- c) Obtaining lines of authority for directing public health emergencies and/or quarantine with names, contact numbers
- d) Familiarization of hospital plans and procedures

Planning Responsibilities and Issues

Departmental

University departments will develop operational plans and/or checklists which will define roles and responsibilities, with reference to how information will be disseminated and who will need to know. How essential services will be provided. Who is in charge and who can take their place if they are not available for work? A template for developing these plans is located in Appendix G, Departmental Guidelines.

Campus-wide Issues

Communication

- The University website will be utilized for disseminating pandemic information. It will be kept up-to-date with appropriate information; signs/symptoms, modes of

transmission, protection strategies, and procedures for sick leave, returning to work, flexible hours, travel procedures etc.

- Communications systems will be created to communicate with students, departmental, and other University personnel that will limit face-to-face contact and address class disruption issues.
- Emergency listings for all personnel should be up-to-date and include office, cell, and home phone numbers.

Response

- In the event of an assumed outbreak on campus or in the outlying community; verification will be confirmed with assistance from the Weber Morgan Health Department. (see Appendix C, Emergency Contacts) This coordination could initiate an alert if confirmed, which will be handled by University Relations according to established procedures, see Appendix F, Pandemic Communication Plan. Information to be disseminated should include:
 - How individuals will proceed if they suspect they have become infected
 - Procedures for informing instructors, managers, seeking medical attention and refraining from attending classes or coming to work, for at least the incubation period and thereafter until it is confirmed that they do not have the disease
 - Isolation procedures if necessary
 - Suggestions for cancellation of all non-essential meetings with external agencies. If meetings must be held encourage personnel to wear face masks and wash their face and hands thoroughly with soap and water before and after the meeting. The same procedure applies to personnel that must deal with the public
 - Outlining procedures for all personnel for using stringent hygiene procedures; such as washing hands for minimum of three minutes with hand sanitizer; keep hands away from mouth, nose, and eyes; use approved gloves etc.
 - Receptionists, secretaries etc, that may have to meet face-to-face with potentially infected individuals will be provided with appropriate protective masks
 - If appropriate for the type of pathogen involved, coordinate with custodial care to clean lavatories, elevators and public areas hourly throughout the day; with a thorough cleaning and disinfecting of offices nightly. *(Custodial staff should have the supplies and knowledge to perform the cleaning as described above)*
 - Encourage avoidance of sharing PC peripherals and phones. Use disinfectant wipes to keep phones and other shared equipment from becoming contaminated
 - Possible closure of campus which could include classes, access to buildings, activities and events
- If a pandemic occurs in other than the Wasatch Front, canceling all travel by University personnel and University sponsored travel to such impacted areas should be considered, in addition cancellation of all meetings with non-university individuals traveling from such impacted areas should be considered

Continuity of Operations

- Departments should identify critical documents, looking at the need for operations. Alternate locations for storage of copied documents in case the primary location becomes contaminated should be identified
- Personnel should be encouraged to become familiar with information provided by health professionals regarding protecting themselves from infection. (See Appendix A, Descriptions – Preventative Measures and Protection.)
- Current policy regarding notification of next of kin will be followed in the event of student/employee deaths

Campus population-medical

The Student Health Center will address campus medical issues in their departmental plan. They may address specific medical needs such as:

- Vaccines or pharmaceuticals that may become available due to a pandemic situation
- Protection of medical staff
- Communication with County and State Health Departments for specific on-campus medical needs
- Utilizing Health Professions and/or Nursing Departments to assist the Student Health Center and Housing, as well as using faculty and supervised upper division students, in supporting quarantine and isolation operations
- Additional health care may be provided by Health professions students as available. They will be given information and supplies to provide necessary protection for their services
- EH&S will assist in ensuring protection equipment is adequate for responders internally and externally

At-risk Populations

In the event of a pandemic situation on campus certain individuals or groups of individuals should be encouraged to take leave or work from home if possible, they could include:

- Pregnant women
- Individuals 64 and older with one or more high-risk conditions (seek medical advice to find out if you fit in this category)
- Individuals 64 and under with two or more high risk conditions (seek medical advice to find out if you fit in this category)
- Individuals who have been hospitalized for flu or pneumonia within the past year
- Individuals who have contact with severely immune-compromised individuals who would not be vaccinated because of the likely poor response to vaccine
- Individuals who have household contact with children younger than six months

Housing

- Pre-designated campus locations could potentially be used for students in campus housing for quarantine purposes. Locations will be coordinated with Dining Services for meal support

- Procedures for disseminating information to students residing on campus and precautions to take will be formulated
- Identification of locations that could be used to house unexposed students that can no longer stay in campus housing due to quarantine measures

Food Services

- Dining Services will address the avenues to provide meals to students who have been quarantined and cannot leave their housing. Mitigation efforts will include establishing stocks of disposable plates, silverware, approved gloves etc, as well as garbage bags for disposal of paper/plastic waste and unconsumed food. Protection of workers that deliver meals, will work with EH&S for protective parameters. Hand washing and other hygiene measures will be utilized to protect workers. If necessary disinfectant wipes will be provided with all meals

Human Resource

- Emergency contact information will be updated for students, faculty and staff
- Development of a work-at-home policy for non-essential personnel will be established
- IT resources for work-at-home students, faculty and staff will be identified
- Pandemic sick leave procedures will be established and communicated to faculty/staff

APPENDIX A DESCRIPTION - PREVENTATIVE MEASURES AND PROTECTION

Avian Flu:

What is Avian Flu?

Usually, “avian influenza virus” refers to influenza A viruses found chiefly in birds, but infections with these viruses can occur in humans. The risk from avian influenza is generally low to most people, because the viruses do not usually infect humans. However, confirmed cases of human infection from several subtypes of avian influenza infection have been reported since 1997. Most cases of avian influenza infection in humans have resulted from contact with infected poultry (e.g., domesticated chicken, ducks, and turkeys) or surfaces contaminated with secretion/excretions from infected birds. The spread of avian influenza viruses from one ill person to another has been reported very rarely, and transmission has not been observed to continue beyond one person. (quoted from <http://www.cdc.gov/>)

Pandemic:

An influenza pandemic is a global outbreak of disease that occurs when a new influenza virus appears or “emerges” in the human population, causes serious illness, and then spreads easily from person to person worldwide. Pandemics are different from seasonal outbreaks or “epidemics” of influenza. Seasonal outbreaks are caused by subtypes of influenza viruses that already circulate among people, whereas pandemic outbreaks are caused by new subtypes, by subtypes that have never circulated among people, or by subtypes that have not circulated among people for a long time. Past influenza pandemics have led to high levels of illness, death, social disruption, and economic loss.

(quoted from <http://www.cdc.gov/>)

Precautions:

Human influenza is thought to transmit primarily via large respiratory droplets. Standard Precautions plus Droplet Precautions are recommended for the care of patients infected with human influenza. However, given the uncertainty about the exact modes by which avian influenza may first transmit between humans additional precautions for health-care workers involved in the care of patients with documented or suspected avian influenza may be prudent. The rationale for the use of additional precautions for avian influenza as compared with human influenza includes the following:

- The risk of serious disease and increased mortality from highly pathogenic avian influenza may be significantly higher than from infection by human influenza viruses.
- Each human infection represents an important opportunity for avian influenza to further adapt to humans and gain the ability to transmit more easily among people.
- Although rare, human-to-human transmission of avian influenza may be associated with the possible emergence of a pandemic strain.

(quoted from <http://www.cdc.gov/>)

Prevention techniques:

The following measures to contain respiratory secretions are recommended for all individuals with signs and symptoms of a respiratory infection.

- Cover the nose/mouth when coughing or sneezing;

- Use tissues to contain respiratory secretions and dispose of them in the nearest waste receptacle after use;
- Perform hand hygiene (e.g., hand washing with non-antimicrobial soap and water, alcohol-based hand rub, or antiseptic handwash) after having contact with respiratory secretions and contaminated objects/materials.
- Healthcare facilities should ensure the availability of materials for adhering to Respiratory Hygiene/Cough Etiquette in waiting areas for patients and visitors.
- Provide tissues and no-touch receptacles for used tissue disposal.
- Provide conveniently located dispensers of alcohol-based hand rub; where sinks are available, ensure that supplies for hand washing (i.e., soap, disposable towels) are consistently available

The single best way to prevent the flu is to get a flu vaccination each fall. There are two types of vaccines:

- The "flu shot" – an inactivated vaccine (containing killed virus) that is given with a needle. **The flu shot** is approved for use in people older than 6 months, including healthy people and people with chronic medical conditions.
- The nasal-spray flu vaccine – a vaccine made with live, weakened flu viruses that do not cause the flu (sometimes called LAIV for “Live Attenuated Influenza Vaccine”). LAIV is approved for use in healthy people 5 years to 49 years of age who are not pregnant.

About two weeks after vaccination, antibodies develop that protect against influenza virus infection. Flu vaccines will not protect against influenza-like illnesses caused by other viruses. (quoted from <http://www.cdc.gov/>)

Symptoms:

Symptoms of avian influenza in humans have ranged from typical human influenza-like symptoms (e.g., fever, cough, sore throat, and muscle aches) to eye infections, pneumonia, severe respiratory diseases (such as acute respiratory distress), and other severe and life-threatening complications. The symptoms of avian influenza may depend on which virus caused the infection.

(quoted from <http://www.cdc.gov/>)

Advice for International travelers and/or students:

Before any international travel to an area affected by H5N1 avian influenza

Visit CDC's Travelers' Health website at <http://www.cdc.gov/travel> to educate yourself and others who may be traveling with you about any disease risks and CDC health recommendations for international travel in areas you plan to visit. For other information about avian influenza, see CDC's Avian Influenza website:

<http://www.cdc.gov/flu/avian/index.htm>.

Be sure you are up to date with all your routine vaccinations, and see your doctor or health-care provider, ideally 4–6 weeks before travel, to get any additional vaccination medications or information you may need.

- Assemble a travel health kit containing basic first aid and medical supplies. Be sure to include a thermometer and alcohol-based hand gel for hand hygiene. See the [Travelers Health Kit](#) page in *Health Information for International Travel* for other suggested items from website listed above.
- Identify in-country health-care resources in advance of your trip.
- Check your health insurance plan or get additional insurance that covers medical evacuation in case you become sick. Information about medical

evacuation services is provided on the U.S. Department of State web page Medical Information for Americans Traveling Abroad, at http://travel.state.gov/travel/tips/health/health_1185.html.

- During travel to an affected area
- Avoid all direct contact with poultry, including touching well-appearing, sick, or dead chickens and ducks. Avoid places such as poultry farms and bird markets where live poultry are raised or kept, and avoid handling surfaces contaminated with poultry feces or secretions.
- As with other infectious illnesses, one of the most important preventive practices is careful and frequent hand washing. Cleaning your hands often with soap and water removes potentially infectious material from your skin and helps prevent disease transmission. Waterless alcohol-based hand gels may be used when soap is not available and hands are not visibly soiled.
- Influenza viruses are destroyed by heat; therefore, as a precaution, all foods from poultry, including eggs and poultry blood, should be thoroughly cooked.
- If you become sick with symptoms such as a fever accompanied by a cough, sore throat, or difficulty breathing or if you develop any illness that requires prompt medical attention, a U.S. consular officer can assist you in locating medical services and informing your family or friends. Inform your health-care provider of any possible exposures to avian influenza. See [Seeking Health Care Abroad](#) in *Health Information for International Travel* from the website listed above for more information about what to do if you become ill while abroad. You should defer further travel until you are free of symptoms, unless traveling locally for medical care.
- Note: Some countries have instituted health monitoring techniques, such as temperature screenings, at ports of entry of travelers arriving from areas affected by avian influenza. Please consult the Embassy of your travel destination country if you have any questions.
- After your return:
 - Monitor your health for 10 days.
 - If you become ill with a fever plus a cough, sore throat, or trouble breathing during this 10-day period, consult a health-care provider. ***Before you visit a health-care setting, tell the provider the following: 1) your symptoms, 2) where you traveled, and 3) if you have had direct contact with poultry or close contact with a severely ill person. This way, he or she can be aware that you have traveled to an area reporting avian influenza.***
- Do not travel while ill, unless you are seeking medical care. Limiting contact with others as much as possible can help prevent the spread of an infectious illness.
- (quoted from <http://www.cdc.gov/>)

APPENDIX B
SUPPLIES RECOMMENDED FOR STOCKPILING PRIOR TO A PANDEMIC
EVENT

N-95 Protective Masks – disposable, one use

Approved examination gloves

Hand sanitizer

Disinfectant wipes

Biohazard disposal (cans and red bio-hazard bags)

Other supplies if funds are available:

Isolation gowns

Eye protection

Bedpans (small and large)

Extra sheets

Disposable pillow and pillowcases

IV solutions and associated hardware (needles, catheters, etc)

Medical grade oxygen and associated masks

Respiratory support equipment

APPENDIX C
EMERGENCY CONTACTS

Emergency Management Contacts:

Mike Davies – Emergency Manager/Planner
(801) 626-7729
(801) 940-2738
Campus wide emergency notification
WSU Emergency Operations Plan Notification Roster

Ogden City / Weber County
Lance Peterson – Emergency Program Director
(801) 778-6682
Tammy Folkman – Assistant Emergency Management
(801) 778-6686

State Dept of Public Safety, Division of Emergency Services
Nadine Taylor – WSU Liaison
(800) 753-2858

State Public Health Contacts:

Utah Department of Agriculture
P.O. Box 146500
Salt Lake City, Utah 84114-6500
Phone: (801) 538-7101
Fax: (801) 538-7126
Web: <http://ag.utah.gov/>

Utah Division of Wildlife Resources
1594 W. North Temple, Suite 2110
P.O. Box 146301
Salt Lake City UT 84114-6301
Phone: (801) 538-4703
Fax: (801) 538-4709
Web: <http://wildlife.utah.gov/index.php>

Utah Department of Health
288 North 1460 West
P. O. Box 142802
Salt Lake City, UT 84114
Phone: (801) 538-6111
Fax: (801) 538-6306
Web: <http://health.utah.gov/>

Weber County Public Health Contacts:

Administration: 399-7100
Morgan Clinic: 845-4033 or 399-7250
Clinical Nursing Services: 399-7250
Environmental Health: 399-7160
Health Promotion: 399-7180

Executive Director – Gary House
Director of Administrative Services – Kay Larrison
Director of Nursing and Health Promotions – Claudia Price
Director of Environmental Health – Joseph Decaria
Drinking Water, Food Protection and Public Pools Program Manager – Michelle
Cooke
Emergency Response Coordinator – George Chino

Emergency Epidemiology Cell Phone - This number is only to be called by
Physicians or Laboratory Personnel and is only to report bioterrorism events or
unusual communicable diseases (801) 725-1755.

APPENDIX D
RISK LEVELS AND ACTIONS

GREEN LEVEL: This is a pre-event preparedness and monitoring level

Threat Level	Administrative Actions	College/Department Actions	Student/Faculty/Staff Actions
Definition: Monitoring Risk of Pandemic			
GREEN MONITORING RISK	<p>Review Emergency Operations Plan and Pandemic Plan</p> <p>Identify essential staff to maintain operations during yellow and red levels and notify individuals in writing</p> <p>Ensure departmental planning and familiarity with assigned responsibilities during pandemic and preparation for response</p> <p>Review plans and ensure the call-down procedures are current and accurate</p> <p>Provide emergency preparedness information to campus via website, bulletins, e-mail, newsletters, articles and posters</p> <p>Budget for physical security measures</p> <p>Encourage programs for employee immunization and preventive health care</p> <p>Encourage all students, faculty and staff to have necessary immunizations or updates</p> <p>Increase campus emergency preparedness by purchasing supplies, food and storing water</p> <p>Conduct vulnerability assessments of each campus facility and building. Estimate the consequence of shutdown, assign a priority for their needs</p> <p>Conduct tabletop and functional exercises to ensure that response plans are understood and current</p> <p>Test emergency call-down lists</p>	<p>Identify essential staff to maintain operations during yellow and red levels and notify individuals in writing</p> <p>Develop emergency plan (template provided in plan)</p> <p>Prepare for possible lapse in class schedule</p> <p>Develop a communications plan/protocols for key staff</p> <p>Ensure that key staff are familiar with all plans</p> <p>Review and update emergency call down lists/emergency contact information</p> <p>Encourage and assist students, faculty and staff to be prepared; University Health Center will be additional source for campus hygiene and protection information</p> <p>Conduct training: Deans could request faculty to include 5 min. discussion in class and include a paragraph in syllabi outlining continuation/completion of classes in an emergency</p> <p>Develop or review mutual aid agreements with external agencies and/or with local government for use during emergencies</p> <p>Conduct routine inventories of emergency pandemic supplies and medical aid kits</p> <p>Test emergency call-down lists and departmental plans</p> <p>Establish security measures</p>	<p>Be prepared for hazards, disasters, and campus emergencies (See ready.gov)</p> <p>Develop a family emergency plan</p> <p>Have a 72 hour kit for home, office and car</p> <p>Be familiar with flu symptoms, personal hygiene techniques and what measures you can take to protect yourself, family and co-workers (See pandemicflu.gov)</p> <p>Continue normal activities but be aware of pandemic situations</p> <p>Monitor local and national news for pandemic alerts</p> <p>Participate in emergency preparedness training for campus students, faculty and staff</p>

YELLOW LEVEL: This is an elevated level. Avian flu virus has mutated human-to-human and a case has been confirmed in the U.S.

Threat Level	Administrative Actions	College/Department Actions	Student/Faculty/Staff Actions
Definition: Elevated Risk of Pandemic			
YELLOW ELEVATED RISK	<p><u>Continue all precautions from Green Threat Level</u></p> <p>Announce Threat Condition ELEVATED to students, faculty and staff</p> <p>Closely monitor current news events and state and federal alerts, warnings and advisories</p> <p>Keep the campus informed on current threat conditions and advisories</p> <p>Review content of internal and external public information announcements. Work with media relations to appoint university spokesperson(s) for media reporting</p> <p>Consult with pandemic committee spokesperson(s)</p> <p>Appoint an Incident Commander</p> <p>Based on U.S. State Department guidelines, travel restrictions and reporting of travel should be implemented</p> <p>Cancel or delay unnecessary employee travel and leave</p> <p>Implement screening of staff/students from travel advisory areas</p> <p>Receive N95 respirators and training on protection from EH&S</p> <p>Recheck emergency supplies</p> <p>Provide information for pandemic sick leave procedures</p>	<p><u>Continue all precautions from Green Level</u></p> <p>Announce Threat Condition ELEVATED to students, faculty and staff</p> <p>Test emergency call down list</p> <p>Monitor security measures</p> <p>Communicate to student, faculty and staff training on hygiene and pandemic precautions</p> <p>Test communications to ensure information can be disseminated</p> <p>Receive N95 respirators and training on protection from EH&S for essential personnel</p> <p>Monitor staff for symptoms</p> <p>Encourage those who have symptoms or have been exposed to stay home</p> <p>Practice social distancing</p>	<p><u>In addition to all previously mentioned precautions, the campus is advised to:</u></p> <p>Continue normal activities, but practice good hygiene and flu prevention techniques</p> <p>Check with campus/local Community Emergency Response Team (CERT) and/or Medical Reserve Corp. team leaders</p> <p>Increase individual or family emergency preparedness through training, maintaining good physical fitness and health, and storing food, water and emergency supplies</p>

RED LEVEL: This is a High Risk Level. Avian flu has mutated human-to human contact and a confirmed case is in Utah and/or a WSU campus

Threat Level	Administrative Actions	College/Department Actions	Student/Faculty/Staff Actions
Definition: High Risk of Pandemic			
RED HIGH RISK	<p><u>Continue all precautions from Yellow and Green Levels</u></p> <p>Announce Threat Condition HIGH to employees and public and explain expected actions to be taken</p> <p>Consult with Incident Commander and Pandemic spokesperson(s)</p> <p>Activate the Emergency Operations Center (virtual EOC if possible)</p> <p>Consider restriction or control access to buildings, critical facilities as needed</p> <p>Closely monitor available information data from state and local public health agencies</p> <p>Instruct employees to be aware of symptoms and ensure those that are sick or exposed to stay home</p> <p>Closely monitor website(s) for information/updates/instructions</p> <p>Control release of information to the public and news media.</p> <p>Limit face to face meetings, conferences etc</p> <p>Provide security/protection for personnel that will be required to stay on campus</p> <p>Administration will be provided vaccination as it becomes available</p>	<p><u>Continue all precautions from Yellow and Green Levels</u></p> <p>Announce Threat Condition HIGH to all students, faculty and staff and explain expected actions to be taken</p> <p>Place essential emergency response personnel on notice</p> <p>Report to Emergency Operations Center if requested or connect to virtual EOC if possible</p> <p>Monitor world and local events. Pass on credible information to key personnel.</p> <p>Instruct students, faculty and staff on social distancing, prevention techniques and hygiene procedures</p> <p>Test communication plans</p> <p>Restrict or suspend some or all deliveries to the facility</p> <p>Be prepared to implement mutual aid agreements with government and with other critical facilities.</p> <p>Faculty and staff identified as essential will be provided vaccination as it becomes available</p>	<p><u>In addition to all previously mentioned precautions, the campus is advised to:</u></p> <p>Expect restrictions/cancellations on classes, access to buildings, cancellation of activities and events</p> <p>Closely monitor news reports and Emergency Alert System (EAS) radio/TV stations.</p> <p>Continue to monitor world and local events as well as local government threat advisories</p> <p>Inventory and organize emergency supply kits and discuss emergency plans with family members</p> <p>Avoid crowded public areas and gatherings</p> <p>Practice social distancing with friends, neighbors, co-workers</p> <p>Restrict travel into areas of the community affected</p> <p>Keep emergency supplies accessible and automobile fuel tank full.</p> <p>Be prepared to evacuate your home or shelter in place on order of local authorities</p> <p>Consider taking reasonable personal safety precautions. Be alert to your surroundings, avoid placing yourself in a vulnerable situation and monitor the activities of your children</p> <p>Avoid passing unsubstantiated information and rumors</p>

APPENDIX E AVIAN INFLUENZA AND WILD BIRDS

Avian influenza is common in wild bird populations, but usually affects small numbers of birds and typically causes few, if any, symptoms. The virus is spread through nasal and oral discharges, and fecal droppings. Few bird viruses are able to infect humans, but influenza viruses are able to adapt and change over time. In 1997, a variety of highly pathogenic avian influenza (HPAI) H5N1 virus in Hong Kong was able to spread directly from birds to humans.

HPAI H5N1 is very contagious among birds and is deadly to domestic poultry, such as chickens and ducks. Mortality rate in poultry can reach 90 to 100 percent often within 48 hours. Occurrence of the HPAI H5N1 virus in wild migratory birds is most frequent in waterfowl and shorebirds.

History of the H5N1 Virus

Since 2003, the HPAI H5N1 virus has spread across Southeast Asia in domestic poultry. Although large numbers of poultry were destroyed to stop the virus, it reached China and Korea by early 2005.

Most human H5N1 infections resulted from direct handling of infected poultry or contaminated surfaces. Limited person-to-person transmission of the H5N1 virus has been documented, and there are no known cases of human infection from wild birds. Since February 2006, human cases of H5N1 have been reported in many countries and HPAI H5N1 has been reported in poultry and wild birds throughout Asia, Indonesia, and Europe.

There are an increasing number of reports that highly pathogenic avian influenza H5N1 virus is infecting and causing death in wild birds, including some species of migratory birds. These events and the associated spread of the HPAI H5N1 virus to new regions in Asia have created concerns about the possibility of the HPAI H5N1 virus being carried into North America by migratory birds. HPAI H5N1 virus has NOT been detected in North America at the present time.

Surveillance for H5N1 in Utah birds by the DWR

The Utah Division of Wildlife Resources has partnered with several federal and state agencies to implement a nationwide surveillance and monitoring program for HPAI H5N1 virus in wild migratory bird populations. DWR plans on testing birds that are most likely at risk for an HPAI H5N1 outbreak during the coming year. Species targeted for testing will include Tundra Swan, Northern Shoveler, Northern Pintail, and Green-winged Teal. Samples will be collected from hunter-harvested birds at game checking stations during the waterfowl hunt; to detect the presence of HPAI H5N1 virus should it appear in Utah. We are also requesting that any large group of dead waterfowl or shorebirds found by the public be reported to local wildlife authorities immediately;

For More Information:

National Wildlife Health Center:

http://www.nwhc.usgs.gov/disease_information/avian_influenza/index.jsp

United States Avian Influenza Site:

<http://www.avianflu.gov/> - <http://www.pandemicflu.gov/>

Centers for Disease Control and Prevention:

<http://www.cdc.gov/flu/avian/index.htm>

For updates on wildlife health in Utah:

<http://www.wildlife.utah.gov/>

Division of Wildlife Resources - Contact Information:

Main Office: (801) 538-4700

1594 W. North Temple, Salt Lake City, UT 84116

Northern Region: (801) 476-2740

515 East 5300 South, Ogden, UT 84405

Central Region: (801) 491-5678

1115 North Main Street, Springville, UT 84663

Northeastern Region: (435) 781-9453

152 East 100 North, Vernal, UT 84078

Southern Region: (435) 865-6100

1470 North Airport Road, Cedar City, UT 84720

Southeastern Region: (435) 636-0260

475 West Price River Drive, Suite C, Price, UT 8450

Recommendations

The general public should observe wildlife, including wild birds, from a distance. This protects you from possible exposure to pathogens and minimizes disturbance to the animal.



Tundra swan

- Avoid touching wildlife. If there is contact with wildlife, thoroughly wash hands with soap and water.
- **Do not pick up diseased or dead wildlife.**
- **If you see a large group of dead waterfowl, contact wildlife authorities. Please do not pick up or handle dead animals!**
- Do not handle or eat sick game.
- Keep your game birds cool, clean and dry.

- Wear rubber or disposable latex gloves while handling and cleaning birds, wash hands with soap and water, and thoroughly clean all knives, equipment and surfaces that come in contact with birds. Disinfect using a 10 percent chlorine bleach solution.
- All game should be thoroughly cooked (well done or 160° F).
- Do not eat, drink or smoke while cleaning game or handling animals.
- If handling healthy wild birds, work in well-ventilated areas to decrease the risk of inhaling aerosols such as dust, feathers or dander.
- Please report any large group of dead waterfowl to local wildlife authorities immediately. Do not handle or pick up dead birds!

Hunter Precautions

Hunters should not be overly concerned about HPAI H5N1 at the present time, but should take common sense precautions about hunting hygiene. Wild migratory birds are not known to spread HPAI H5N1 between regions; there are no known cases of human HPAI H5N1 infection from wild birds; and it is not clear whether HPAI H5N1 is persistent in wild bird populations or whether birds pose a long-distance, long-term risk. Hunters should take these precautions:

- Do not handle birds that are obviously sick or that are found dead.
- Do not harvest any animal that appears sick.
- Keep your game birds cool, clean and dry.
- Wash your hands with soap and water or alcohol wipes after dressing birds.
- Wear rubber or disposable latex gloves while handling and/or cleaning birds, and thoroughly wash hands and all knives, equipment and surfaces that come in contact with birds. Disinfect using a 10 percent chlorine bleach solution.
- All game should be thoroughly cooked (well done or 160° F).
- Do not eat, drink or smoke while cleaning game or handling animals.

Frequently Asked Questions

Q: Can humans catch avian influenza from wild birds?

A: There are no known cases where the highly pathogenic (HPAI) H5N1 virus has been passed from wild birds to humans, but direct transmission from wild birds to humans may be possible.

Q: How could HPAI H5N1 arrive in North America?

A: Migratory birds, particularly waterfowl and shorebirds, cross the Bering Sea between Alaska and Asia during their seasonal cycles of breeding, molting, and wintering. The role of wild migratory birds in the spread of HPAI H5N1 between regions remains poorly understood, and it is not clear whether the HPAI H5N1 virus is persistent in wild bird populations or whether wild birds pose a long-distance, long-term risk. If it arrives in North America, the HPAI H5N1 virus is more likely to be transported by people who are infected, or through virus-contaminated articles or illegally imported birds or bird products.

Q: What is the Utah Division of Wildlife Resources doing about avian influenza?

A: The UDWR will be testing the following hunter-harvested waterfowl species during the fall hunts: Northern Pintail, Northern Shoveler, Green-winged Teal, and Tundra Swan, as part of a surveillance program implemented to provide early detection of HPAI H5N1 should it appear in Utah.

APPENDIX F
PANDEMIC COMMUNICATIONS PLAN

Pandemic Communication Plan

Physical Emergency Response

- Notification of appropriate emergency response agency or agencies (student health center, external health organizations, local health care providers, resident life, dean of students, etc.) for containment
- Notification of Pandemic EOC (Identify members of EOC Team that need to be involved and notify them)
- Determination of scope and personnel response (isolated to campus, region, state?)
- Assessment of long-term consequences (how are people contracting disease, number of cases, risk to unexposed population, resources available, etc.) How will this affect our campus community and can campus continue to operate with a business as usual status?
- Creation of messages for public and identification of spokesperson
- How do we communicate?
- What are alternatives if traditional means of communication aren't available
- Recommend activation of departmental emergency call-down lists

Public Relations Response

- Assemble meeting with crisis/PR response team (**NOTE:** Depending on nature and scope of pandemic, a conference call meeting may be better option.)
- (Make up of group may include; president, provost, VPs of Student Affairs, UR & maybe Admin. Services, media relations director, legal counsel, along with directors of health center, student life, & resident life, Dean of Students and possible chair of faculty senate, and others as identified/needed.)
- Hold briefing with crisis/PR response group so everyone is familiar with situation
- Determine action items for response team including decision to close campus or suspend classes to minimize exposure to illness. Also decide on cancellation or postponement of campus activities, sporting events, performances, etc. due to health risks/concerns.
- Review Crisis Management Check List (see below)
- Craft university messages/statements/positions for relevant audiences
- Determine key audiences that need to know about situation or response and who will be responsible for informing them (*Also determine means and frequency of communication*)
- Determine university spokesperson for issue
- If necessary, set time for follow-up meeting to update response team on developments, review/revise messages, etc.

Specific Communication Items to Consider for Pandemic

- Develop informational Web pages/materials with tips and steps individuals can take to minimize risk of exposure (Some of this can be developed pro-actively to educate, prior to actual pandemic situation)
- List or provide links to health organizations Web page resources
- Develop, distribute and post “What to Do” guidelines for various campus audiences
- Provide resource information to educate audiences in hopes of reducing panic, misinformation, etc. re: pandemic
- Maintain and update information page with details about current situation on campus and steps being taken, resources available, etc., what to avoid, etc.
- Health Center may have additional suggestions for targeted groups: faculty, students in residents’ halls, non-traditional students with small children at home, etc.

President’s Council/Response Team Crisis Management Communication Check List

- 1) Brief President’s Council, legal counsel and public information contact on situation
- 2) Assess situation and determine message(s) to be delivered, frequency and means
- 3) Decide on a contact point for inquiries from:
 - a. Campus community
 - b. Faculty/staff _____
 - c. Students _____
 - d. Parents/community _____
 - e. Mass media _____
 - f. Government _____
 - g. Deliver messages and contact point information to crisis contact list
 - h. Campus operators and Information Booth
(Assigned to _____)
 - i. WSU Web site (Assigned to _____)
 - j. Mass media (Assigned to _____)

Key campus individuals

- k. Deans/Department Heads (Assigned to _____)
- l. Board of Trustees (Assigned to _____)
- m. WSUSA (Assigned to _____)
- n. Alumni Relations (Assigned to _____)
- o. Campus wide e-mail (Assigned to _____)

Key off-campus individuals

- p. Government officials (state, county, city) (Assigned to _____)
- q. WSU supporters (Wildcat/Gridiron clubs, donors, Alumni Council, etc.)
(Assigned to _____)
- r. Board of Regents (Assigned to _____)

- 4) If Media involved:
 - a. Monitor accuracy of media coverage (Assigned to _____)
 - b. Activate WSU Emergency Web page and update frequently (Assigned to _____)
 - i. Include timeline of events
 - ii. Include university position/response statements
 - iii. University response mechanisms
 - iv. Control the message

If the crisis is massive enough or persistent enough, consider the following steps:

- 1) Hold a press conference or press availability
 - a. This should only be considered if there is already sufficient media interest that responding to individual inquiries becomes too burdensome to administration and the communications staff. **NOTE:** Consult with health officials to determine if press conference is problematic due to risk of infection.
- 2) Hold daily open briefings
 - a. These briefings would be geared toward the campus community, but would allow media participation. They should be headed by the president with participation from all top administrators and personnel needed to answer anticipated questions. **NOTE:** Consult with health officials to determine if daily briefings are problematic due to risk of infection.
- 3) Hold a public memorial service
 - a. To be held in the event of a death or deaths on campus. Several faiths should be represented at such an event.
- 4) Document events as they go along. It will provide instruction for future crises and details for sharing with media or other audiences

After the crisis, consider the following steps:

- 5) Archive and remove the WSU emergency page
- 6) Debrief on crisis and how response (including this list) can be improved
- 7) Send out notes of thanks where appropriate
- 8) Send out notes of condolences where appropriate
- 9) Maintain ongoing, long-term, contact with family members/ loved ones of campus community victims

Update contact lists with latest information

(Updates made every six months by Media Relations secretary)

Additional items to address:

1. Press Conferences:

Locations:

- Dee Events Center (Use for all situations unless basketball team scandal or DEC is location of crisis, damaged etc.)
- Stewart Sky Suites Complex
- Alumni Center
- Union Ballroom

Equipment:

- Podium and or table
- Curtains or backdrop
- WSU banner and/or WSU insignia on podium
(Unless it would be better to distance university from situation)
- Lighting and sound for speakers
- Chairs for reporters
- Space for TV cameras, along with power supplies
- Audio hub or tie-in source for tv/radio to take direct audio

2. Media Filing Center (Thought to be unlikely due to technology advances and medical community's desire to keep people isolated during pandemic):

Locations:

- Dee Events Center
- Stewart Skybox Facility
- Main floor of Promontory Tower (old Delta call center)
- Alumni Center (if limited demand)
- Union Building

Equipment:

- Phone lines
- Data ports, modems, internet access
- Tables/chairs for makeshift work areas
- Copiers, fax machines
- Dedicate parking area or shuttle press in from remote parking lot
- Satellite trucks could be accommodated at DEC or Stewart parking lots.

3. Dedicated phone lines for public and media inquiries.

- Telecommunications sets up.
- Who answers/staffs these lines – Need to identify people to staff these phones
(Campus administrative assistants who regularly deal with public. Hand pick group with good interpersonal skills, knowledge of campus, etc.)
- Rumor control hotline
- Additional phones/radios to assist with internal communications (Pat Malone)

4. Hotels/Catering for press (snacks and beverages for press)

- List of hotels in area press could stay in
- Chartwells
- Elaine Sandoval/Becky Thompson/Teri Wood Slaughter arrange/coordinate this

5. Additional assignments for UC Team

- Monitor coverage to fact check/correct errors in reporting
- Maintain crisis Web site page
- Distribute updates, releases, etc.
- Craft statements for president
- Write letters, communications to various audiences
- Staff phones, update hotline recordings, etc.

6. Outside Agencies/ Resources

- Faculty of Communication Dept.: Josephson, Barlow Hess, Reddout
- USU/John DiVilbiss staff?
- Weber County School District - Nate Taggart
- U of U?
- Former communications staff: Mark Peterson? /Melisa Holmes? /Becky Olsen?

Crisis Response Issues for Events off Campus:

1. Response to event at Davis Campus & Outlying Centers

Davis Campus:	Bruce Davis	395-3482
Morgan Center:	Barbara Anderson	829-3136
West Center:	Galynn Mook	985-1491

Emergency/Crisis Response plans need to be created for these centers.

2. Protocol for faculty and staff traveling with WSU students away from campus if unexpected event occurs. Contact numbers and instructions for responding to a crisis should be provided to those taking groups off campus.

APPENDIX G
DEPARTMENTAL GUIDELINES

**Avian Flu Outbreak/Pandemic
Departmental Operational Planning Guidelines**

Departmental operational plans will be part of the pandemic plan annex located in the University Emergency Operations Plan. The purpose of departmental plans is to cover specific responsibilities and coordination efforts in the event of an avian flu outbreak and/or pandemic situation. Departments need to plan for their own specific needs and responsibilities to their faculty, staff and students.

The following are only guidelines to assist in the planning process. The completed plans will be given to the campus Emergency Management Office and then will be included in the Avian Flu Outbreak/Pandemic Annex.

Communication/Information Dissemination

The ability to make decisions quickly is vital to any emergency, having key players identified before-hand is vital. The WSU Pandemic Plan describes the methods that will be used to distribute information generally to the entire campus. A chain of command is necessary and those individuals should have designated alternates:

Those in charge:

Name	Position	Phone: Office/Cell/Home	E-mail
1.			
2.			
3.			

Individuals designated to receive and distribute information to the department are:

Name	Position	Phone: Office/Cell/Home	E-mail
1.			
2.			
3.			

The contact list for all staff, faculty, students in this department is in the following location and this person had the responsibility for updating it.

Location of contact list:

Person(s) responsible for updating the contact list:

The individual(s) named above will use the following means to deliver information to staff, faculty and students:

Critical Staff/Functions

The following are critical departmental functions:

The following staff members are critical to departmental operations:

The following have been identified as backup/alternatives:

This department relies on the following departments to be able to function properly:

Absenteeism

During a pandemic situation, absenteeism is the issue that will most likely contribute to business related issues. This department has identified the following process(es) for tracking employee absenteeism for the purposes of maintaining their critical functions:

Emergency Lists

Emergency listings for all personnel should be kept up-to-date and include office, cell, and home phone numbers

Travel

This department has identified the following procedures for staff/faculty/students that might be on travel during this kind of event:

Critical Supplies

The following procedures outline maintenance and inventory of departmental critical supplies:

Services/Functions Alternatives

The following procedures could be acceptable alternatives to delivery of services or functions:

Avian Flu Outbreak/Pandemic Departmental Testing/Preparation Guidelines

This section provides testing/preparation suggestions for departments to practice what they have identified in the operational planning section above.

Department Communication Test/Exercise:

The ability to communicate information quickly and efficiently to everyone in the department will contribute to success with overall campus response. The following test can be conducted on a regular basis, at least monthly.

- Develop a test message to be delivered to all persons in your department; for example:
 “This is a test message from <name> in <insert name of department>. We are testing our ability to communicate information to our <students, staff, faculty, visitors>. When you receive this message, please respond to <response site >.”
- Designate a response site (i.e. VM box, email address) for responses
- Use contact lists/individuals identified in planning section, to deliver a test message.
- Select a date/time to conduct this test, and a time frame in which to collect responses (flexible – generally 24-48 hours)
- Send message
- Record responses
- Report results to department management and the campus Emergency Manager, Mike Davies at mdavies1@weber.edu

The following table can be used or adapted; it is a sample test worksheet

Department:
Message:
Delivered by (names):
Method of delivery (email, voice mail, etc)
Date/Time message delivered:
Message delivered to: (could include names and/or numbers)
Responses accepted until: (date/time)
Number of responses received: (could include names and/or numbers)

Department Operation Test/Exercise:

The greatest operational issue for a pandemic influenza response is absenteeism. This is a simple test that can be conducted in less than 15 minutes during a staff or safety meeting.

- Place names of persons attending the staff/safety meeting on pieces of paper and place into a container
- Pull out half of those names. Separate the groups whose names were drawn from those who names were not drawn
- Distribute the worksheet below to one of those groups and read the message.
- Allow for no more than a 10 minute discussion
- Tabulate response to the questions
- If time allows, repeat exercise for other group
- Discuss test/exercise and how to improve internal departmental plans
- Report results to management team and to campus Emergency Manager, Mike Davies at mdavies1@weber.edu

The following table can be used or adapted; it is a sample test worksheet

Department:
Date/Time:
Message: Cases of influenza have been verified in the U.S., some of which have occurred in Utah. There is a public health alert notice from the State Department of Health. School absenteeism rates (all levels) are extremely high, and there have been “unusually light” commutes the last few days. There is high absenteeism in all offices. Some stores have remained closed because of high employee absenteeism and the ones that are open are packed with consumers trying to purchase supplies. Most business is disrupted, which includes normal deliveries of goods and services. Northern Utah hasn’t had any confirmed cases of influenza but, students are leaving as they are being called home by parents. There is high absenteeism among faculty and staff. The campus Emergency Operations Center is activated and monitoring developments. You are the staff that has reported for work today: The Emergency Operations Center is asking for a report from our department in the following areas: What is your absenteeism rate? What are your department’s critical functions today? Can you maintain those with the staff that is present? What kind of additional assistance do you need?

