



Centers for Disease Control and Prevention
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CDC Guidance for Businesses and Employers To Plan and Respond to the 2009–2010 Influenza Season

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CDC is releasing new guidance that recommends actions that non-healthcare employers should take now to decrease the spread of seasonal flu and 2009 H1N1 flu in the workplace and to help maintain business continuity during the 2009–2010 flu season.¹The guidance includes additional strategies to use if flu conditions become more severe and some new recommendations regarding when a worker who is ill with influenza may return to work. The guidance in this document may change as additional information about the severity of the 2009–2010 influenza season and the impact of 2009 H1N1 influenza become known. Please check www.flu.gov periodically for updated guidance.

Introduction

The U.S. Department of Health and Human Services' (HHS) Centers for Disease Control and Prevention (CDC), with input from the U.S. Department of Homeland Security (DHS), has developed updated guidance for employers of all sizes to use as they develop or review and update plans to respond to 2009 H1N1 influenza now and during the upcoming fall and winter influenza season. Businesses and employers, in general, play a key role in protecting employees' health and safety, as well as in limiting the negative impact of influenza outbreaks on the individual, the community, and the nation's economy. Employers who have developed pandemic plans should review and revise their plans in light of the current 2009 H1N1 influenza outbreak to take into account the extent and severity of disease in their community as outlined in this guidance.²

Planning for Fall and Winter Influenza Season

Businesses may have already been impacted by the spring and summer outbreaks of 2009 H1N1 influenza affecting their employees. CDC anticipates that more communities may be affected than were in the spring/summer 2009, and/or more severely affected reflecting wider transmission and possibly greater impact. In addition, seasonal influenza viruses may cause illness at the same time as 2009 H1N1 this fall and winter. In response to the anticipated spread of 2009 H1N1 influenza, the CDC has revised its recommendations to assist businesses and other employers of all sizes.

The severity of illness that 2009 H1N1 influenza flu will cause (including hospitalizations and deaths) or the amount of illness that may occur as a result of seasonal influenza during the 2009–2010 influenza season cannot be predicted with a high degree of certainty. Therefore, employers should plan to be able to respond in a flexible way to varying levels of severity and be prepared to refine their pandemic influenza response plans if a potentially more serious outbreak of influenza evolves during the fall and winter. More people and communities are likely to be affected as influenza is more widely transmitted. The CDC and its partners will continuously monitor national and international data on the severity of illness caused by influenza, will disseminate the results of these ongoing surveillance assessments and will make additional recommendations as needed.

Considerations of Appropriate Response Strategies

All employers must balance a variety of objectives when determining how best to decrease the spread of influenza and lower the impact of influenza in the workplace. They should consider and communicate their objectives, which may include one or more of the following: (a) reducing transmission among staff, (b) protecting people who are at increased risk of influenza related complications from getting infected with influenza, (c) maintaining business operations, and (d) minimizing adverse effects on other entities in their supply chains.

Employers should expect to see a wide range of disease patterns across the country. Employers should base their strategies and response to influenza outbreaks on local information from local and state public health authorities. Some of the key indicators that should be used when making decisions on appropriate responses are:

- Disease severity (i.e., hospitalization and death rates) in the community where business is located;
- Extent of disease (number of people who are sick) in the community;
- Amount of worker absenteeism in your business or organization;
- Impact of disease on workforce populations that are vulnerable and at higher risk (e.g., pregnant women, employees with certain chronic medical conditions that put them at increased risk for complications of influenza); and
- Other factors that may affect employees' ability to get to work, such as school dismissals or closures due to high levels of illness in children or school dismissals.

Employers need to plan now to be able to obtain updated information on these indicators from state and local health departments in each community where they have a business presence and to respond quickly to the changing reality on the ground. Employers with more than one business location are encouraged to provide local managers with the authority to take appropriate actions outlined in their business pandemic plan based on the condition in each locality.

Preparedness and Response Recommendations

Planning for 2009 H1N1 and the 2009–2010 influenza season

This guidance is designed to help employers plan for and respond to *two* possible conditions: 1) a continuation of the current level of severity of influenza as was observed during the spring and summer of 2009 and 2) a more severe outbreak. The first situation is what is being experienced in some communities now—an outbreak of similar severity of 2009 H1N1 to the spring. However, even if the severity of the virus does not change, planners should expect that there will be more people who are ill in the fall and winter as 2009 H1N1 outbreaks coincide with the seasonal influenza season, and this level of absenteeism may impact business operations. A second situation involves an outbreak of greater severity including more people with severe illness and thus, more people hospitalized for influenza complications; more deaths from influenza; and a probable escalation of absenteeism.

Businesses should have an understanding of their normal seasonal absenteeism rates and know how to monitor their personnel for any unusual increases in absenteeism through the fall and winter. Business continuity planners should assess their essential business functions now to determine at what threshold of absenteeism those functions would be threatened if absenteeism escalates. Planners can then prepare to take more aggressive measures to protect continuity as absenteeism escalates towards those thresholds.

Even employers in communities that have not yet felt effects from 2009 H1N1 influenza

should plan for an influenza outbreak this fall and winter, and be ready to implement strategies to protect their workforce while ensuring continuity of operations. During an influenza pandemic, *all* sick people should stay home and away from the workplace, hand washing and covering coughs and sneezes should be encouraged, and routine cleaning of commonly touched surfaces should be performed regularly. If the severity of illness increases, employers should be ready to implement additional measures while continuing to rigorously implement the interventions recommended for an outbreak similar to the spring/summer 2009 H1N1 outbreak. If severity increases, public health officials may recommend a variety of methods for increasing the physical distance between people (called social distancing) to reduce the spread of disease, such as school dismissal, child care program closure, canceling large community gatherings, canceling large business-related meetings, spacing workers farther apart in the workplace, canceling non-essential travel, and recommending work-from-home strategies for workers that can conduct their business remotely.

Please remember: employers should develop capabilities to respond to both scenarios and these two conditions serve only as a planning framework. Businesses and other employers should develop flexible capabilities to respond to either situation given the difficulties in accurately predicting the extent and severity of 2009 H1N1 as it unfolds during the 2009–2010 influenza season. Individual businesses may implement additional actions if they experience high absenteeism or business continuity is compromised. In addition, employers should be aware that other emergencies such as hurricanes or other natural disasters may happen during the fall and winter, creating additional challenging problems for businesses and communities.

Work with State and Local Public Health Partners

Coordination with state and local health officials is strongly encouraged for all businesses so that timely and accurate information can guide appropriate responses in each location where their operations reside. Since the intensity of an outbreak may differ according to geographic location, local public health officials will be issuing guidance specific to their communities. Also, businesses could work with public health and community leaders to explore ways of improving accessibility of vaccination for the workforce and in the community.

Keep Sick Workers Home

One of the best way to reduce the spread of influenza is to keep sick people away from well people. However, in the fall and winter, it will not be possible to quickly determine if workers who are ill have 2009 H1N1, seasonal influenza, or any number of other different conditions based on symptoms alone. Local and state health department surveillance information can be helpful to know when influenza is circulating in the community, although the availability, timeliness, and amount of local information on when influenza is circulating may vary substantially from community to community.

Workers who have symptoms of influenza-like illness³are recommended to stay home and not come to work until at least 24 hours after their fever has resolved.⁴ Regardless of the size of the business or the function or services that you provide, all employers should plan now to allow and encourage sick workers to stay home without fear of losing their jobs. CDC recommends this strategy for *all* levels of severity. Employers should plan now for how they will operate if there is significant absenteeism from sick workers. However, employers should know that some persons with influenza, including those ill with 2009 H1N1, do not have fever. Therefore it will not be possible to exclude everyone who is ill with influenza from the workplace.

Be Prepared if Schools Dismiss Students or Child Care Programs Close

In some communities, schools may dismiss students and childcare programs may close,

particularly if the severity increases.⁵ Officials will make these decisions to protect public health, but they will affect your business's functioning, especially affecting absenteeism. Plan now to determine how you will operate if absenteeism spikes from increases in sick workers, those who stay home to care for ill family members, and those who must stay home to watch their children if dismissed from school. Businesses and other employers should prepare to institute flexible workplace and leave policies for these workers.

Actions Employers Should Take Now

- Review or establish a flexible influenza pandemic plan and involve your employees in developing and reviewing your plan;
- Conduct a focused discussion or exercise using your plan, to find out ahead of time whether the plan has gaps or problems that need to be corrected before flu season;
- Have an understanding of your organization's normal seasonal absenteeism rates and know how to monitor your personnel for any unusual increases in absenteeism through the fall and winter.
- Engage state and local health department to confirm channels of communication and methods for dissemination of local outbreak information;
- Allow sick workers to stay home without fear of losing their jobs;
- Develop other flexible leave policies to allow workers to stay home to care for sick family members or for children if schools dismiss students or child care programs close;
- Share your influenza pandemic plan with employees and explain what human resources policies, workplace and leave flexibilities, and pay and benefits will be available to them;
- Share best practices with other businesses in your communities (especially those in your supply chain), chambers of commerce, and associations to improve community response efforts; and
- Add a "widget" or "button" to your company Web page or employee Web sites so employees can access the latest information on influenza: www.cdc.gov/widgets/ and www.cdc.gov/SocialMedia/Campaigns/H1N1/buttons.html

Important Components of an Influenza Pandemic Plan

- Be prepared to implement multiple measures to protect workers and ensure business continuity. A layered approach will likely work better than using just one measure.
- Identify possible work-related exposure and health risks to your employees. The Occupational Safety and Health Administration (OSHA) has developed tools to determine if your employees are at risk of work-related exposures and, if so, how to respond (see www.osha.gov/dsg/topics/pandemicflu/index.html).
- Review human resources policies to make sure that policies and practices are consistent with public health recommendations and are consistent with existing state and federal workplace laws (for more information on employer responsibilities, employers should visit the Department of Labor's and the Equal Employment Opportunity Commission's websites at www.dol.gov and www.eeoc.gov).
- Allow employees to stay home if they are ill, have to care for ill family members, or must watch their children if schools or childcare facilities close.
- Explore whether you can establish policies and practices, such as flexible worksites (e.g., telecommuting) and flexible work hours (e.g., staggered shifts), when possible, to increased the physical distance among employees and between employees and others if local public health authorities recommend the use of social distancing strategies. Ensure that you have the information technology and infrastructure needed to support multiple workers who may be able to work from home.
- Identify essential business functions, essential jobs or roles, and critical elements within your supply chains (e.g., raw materials, suppliers, subcontractor services/products, and logistics) required to maintain business operations. Plan for

how your business will operate if there is increasing absenteeism or these supply chains are interrupted.

- Set up authorities, triggers, and procedures for activating and terminating the company's response plan, altering business operations (e.g., possibly changing or closing operations in affected areas), and transferring business knowledge to key employees. Work closely with your local health officials to identify these triggers.
- Plan to minimize exposure to fellow employees or the public if public health officials call for social distancing.
- Establish a process to communicate information to workers and business partners on your 2009 H1N1 influenza response plans and latest 2009 H1N1 influenza information. Anticipate employee fear, anxiety, rumors, and misinformation, and plan communications accordingly.

Over the past several years, HHS, CDC, DHS, OSHA, EEOC, and other federal partners have developed guidelines, including checklists, to assist businesses, industries, and other employers in planning for a pandemic outbreak. Review these resources to assist in your planning efforts: www.flu.gov/plan/workplaceplanning/index.html .

The recommendations that follow provide guidance on how employers can develop strategies and respond to two levels of severity. Local conditions will influence the decisions that public health officials make regarding community-level strategies; employers should take the time now to learn about plans in place in each community where they have a presence.

Recommended Employer Responses for the 2009-2010 Flu Season

Recommended Action Steps under Current Flu Conditions (similar severity as in Spring/Summer 2009)

If the severity of illness in the fall and winter is similar to that observed in the spring and summer of 2009, the effects of 2009 H1N1 influenza may not have substantial impacts on absenteeism, though some increase in absenteeism over the spring season is anticipated. When larger numbers of people become ill, correspondingly larger numbers of people will become seriously ill and may require hospitalization.

Sick persons should stay home

- Advise workers to be alert to any signs of fever and any other signs of influenza-like illness⁶ before reporting to work each day, and notify their supervisor and stay home if they are ill. Employees who are ill should not travel while they are ill.
- CDC recommends that employees with influenza-like illness remain at home until at least 24 hours after they are free of fever (100° F [37.8° C] or greater), or signs of a fever, without the use of fever-reducing medications.
- Expect sick employees to be out for about 3 to 5 days in most cases, even if antiviral medications are used.
- Ensure that your sick leave policies are flexible and consistent with public health guidance and that employees are well aware of these policies.
- Talk with companies that provide your company with contract or temporary workers about the importance of sick workers staying home and encourage them to develop non-punitive leave policies.
- Do not require a doctor's note for workers who are ill with influenza-like illness to validate their illness or to return to work, as doctor's offices and medical facilities may be extremely busy and may not be able to provide such documentation in a timely

way.

- Employees who are well but who have an ill family member at home with influenza can go to work as usual. However, these employees should monitor their health every day, and notify their supervisor and stay home if they become ill. Employers should maintain flexible policies that permit employees to stay home to care for an ill family member. Employers should be aware that more workers may need to stay at home to care for ill children or other ill family members than is usual.

Sick employees at work should be asked to go home

- **CDC recommends that workers who appear to have an influenza-like illness upon arrival or become ill during the day be promptly separated from other workers and be advised to go home** until at least 24 hours after they are free of fever (100° F [37.8° C] or greater), or signs of a fever, without the use of fever-reducing medications.
- Those who become ill with symptoms of an influenza-like illness during the work day should be:
 - Separated from other workers and asked to go home promptly. (For recommendations on personal protective equipment for a person assisting the ill employee, see [Interim Recommendations for Facemask and Respirator Use to Reduce Novel Influenza A \(H1N1\) Virus Transmission](http://www.cdc.gov/h1n1flu/masks.htm); <http://www.cdc.gov/h1n1flu/masks.htm>.)
 - When possible and if they can tolerate it, workers with influenza-like illness should be given a surgical mask to wear before they go home if they cannot be placed in an area away from others.
- If an employee becomes ill at work, inform fellow employees of their possible exposure in the workplace to influenza-like illness but maintain confidentiality as required by the Americans with Disabilities Act (ADA). For more information on privacy issues, please refer to: http://www.flu.gov/faq/workplace_questions/equal_employment/index.html#Privacy. Employees exposed to a sick co-worker should monitor themselves for symptoms of influenza-like illness and stay home if they are sick.

Cover coughs and sneezes

- Influenza viruses are thought to spread mainly from person to person in respiratory droplets of coughs and sneezes. Provide employee messages on the importance of covering coughs and sneezes with a tissue or, in the absence of a tissue, one's sleeve. Place posters in the worksite that encourages cough and sneeze etiquette.
- Provide tissues and no-touch disposal receptacles for use by employees.

Improve hand hygiene

- Influenza may be spread via contaminated hands. Instruct employees to wash their hands often with soap and water or use an alcohol-based hand cleaner, especially after coughing or sneezing. Place posters in the worksite that encourage hand hygiene.
- Provide soap and water and alcohol-based hand sanitizers in the workplace. Ensure that adequate supplies are maintained. If feasible, place hand sanitizers in multiple locations or in conference rooms to encourage hand hygiene.

Clean surfaces and items that are more likely to have frequent hand contact

- Frequently clean all commonly touched surfaces in the workplace, such as workstations, countertops, and doorknobs. Use the cleaning agents that are usually used in these areas and follow the directions on the label.
- No additional disinfection beyond routine cleaning is recommended.

Encourage employees to get vaccinated

- Encourage your employees to get vaccinated for seasonal influenza. For information on groups prioritized for seasonal influenza vaccines, please see <http://www.cdc.gov/flu/protect/keyfacts.htm>.
- Encourage your employees also to get vaccinated for 2009 H1N1 influenza when vaccines are available to them. Different groups are prioritized for 2009 H1N1 influenza than for seasonal influenza. For information on groups prioritized for H1N1 influenza vaccine please see <http://www.cdc.gov/h1n1flu/vaccination/acip.htm>.
- Offer opportunities at your worksite for influenza vaccination. Consider granting employees time off from work to get vaccinated if not offered at the worksite.
- Review the health benefits you offer employees and work with insurers to explore if they can cover the costs of influenza vaccination.

Take measures to protect employees who are at higher risk for complications of influenza

- People at higher risk for complications from influenza include pregnant women; children under 5 years of age; adults and children who have chronic lung disease (such as asthma), heart disease, diabetes, diseases that suppress the immune system and other chronic medical conditions; and those who are 65 years or older.⁷
- Inform employees that some people are at higher risk of complications from influenza and that if they are at higher risk for complications, they should check with their health care provider if they become ill. Early treatment with antiviral medications is very important for people at high risk because it can prevent hospitalizations and deaths.
- Encourage employees recommended for seasonal influenza vaccine and 2009 H1N1 vaccines to get vaccinated as soon as these vaccines are available. For information on groups prioritized for seasonal and H1N1 vaccines, please see <http://www.cdc.gov/flu/protect/keyfacts.htm> and <http://www.cdc.gov/h1n1flu/vaccination/acip.htm>.
- Employees who become ill and are at increased risk of complications from influenza and ill employees who are concerned about their illness should call their health care provider for advice. Their health care provider might want them to take antiviral medications to reduce the likelihood of severe complications from the influenza.
- See <http://www.cdc.gov/h1n1flu/qa.htm> for more information.

Prepare for increased numbers of employee absences due to illness in employees and their family members, and plan ways for essential business functions to continue.

- Employers should plan to monitor and respond to absenteeism at the workplace. Implement plans to continue your essential functions in case you experience higher than usual absenteeism. Elevated absentee rates can be due to sick workers, those who need to stay home and care for others, or from workers with conditions that make them at higher risk for complications from influenza and who may be worried about coming to work.
- Cross-train personnel to perform essential functions so that the workplace is able to operate even if key staff are absent.
- Assess your essential functions and the reliance that others and the community have on your services or products. Be prepared to change your business practices if needed to maintain critical operations (e.g. identify alternative suppliers, prioritize customers, or temporarily suspend some of your operations if needed).

Advise employees before traveling to take certain steps

- Advise workers to check themselves for fever and any other signs of influenza-like

illness before starting travel and notify their supervisor and stay home if they are ill.

- Advise employees who will be traveling or on temporary assignment about precautions they may need to take to protect their health and who to call if they become ill.
- Employees who become ill while traveling and are at increased risk of complications from influenza and others concerned about their illness should promptly call a health care provider for advice.
- Ensure employees who become ill while traveling or on temporary assignment understand that they should notify their supervisor.
- If outside the United States, ill employees should follow your company's policy for obtaining medical care or contact a health care provider or overseas medical assistance company to assist them with finding an appropriate health care provider in that country, if needed. A U.S. consular officer can help locate health care services. However, U.S. embassies, consulates, and military facilities do not have the legal authority, capability, and resources to evacuate or give medications, vaccines, or medical care to private U.S. citizens overseas.
- See CDC's Travel Website (<http://wwwn.cdc.gov/travel/content/novel-h1n1-flu.aspx>) for more information for travelers.

Prepare for the possibility of school dismissal or temporary closure of child care programs

- Although school dismissals or closures of child care programs are not likely to be generally recommended at this level of severity, they are possible in some jurisdictions.
- Be prepared to allow workers to stay home to care for children if schools are dismissed or child care programs are closed.
- Strongly recommend that parents not bring their children with them to work while schools are dismissed.
- Ensure that your leave policies are flexible and non-punitive.
- Cross-train employees to cover essential functions.
- Read CDC's Guidance for State and Local Public Health Officials and School Administrators for School (K-12) Responses, which can be found at <http://www.cdc.gov/h1n1flu/schools/schoolguidance.htm>, to better understand the conditions under which schools may be dismissed.

Under Conditions with Increased Severity Compared to Spring/Summer 2009

If 2009 H1N1 becomes more severe than during spring/summer 2009, absenteeism will likely be far greater, and additional protective measures to slow the spread of influenza may be considered. Check with your local health department for the extent and severity of disease activity in your community and for recommendations for necessary measures. Decisions about what tools should be used during a severe 2009 H1N1 outbreak should be based on the observed severity of the event; its impact on specific subpopulations; the need to protect workers; the expected benefit of the interventions; the feasibility of success of implementing these measures; the direct and indirect costs of different interventions; and the effects on critical infrastructure, health care delivery, and society. The following are measures that should be considered if influenza severity increases, and are meant for use *in addition* to the measures outlined above.

Consider active screening of employees who report to work

- If influenza severity increases, at the beginning of the workday or with each new shift, all employees should be asked about symptoms consistent with an influenza illness⁸

such as fever or chills AND cough or sore throat. If the severity or the impact of influenza increases, CDC recommends that persons with an influenza-like illness not come to work or travel and remain at home for at least 7 days, even if symptoms resolve sooner. Individuals who are still sick 7 days after they become ill should continue to stay home until at least 24 hours after symptoms have resolved. If influenza severity increases, CDC recommends that people stay home at least 7 days whether or not antiviral medications are used.

- Make sure your sick leave policies are flexible and consistent with public health guidance, and that your employees are aware of these policies.
- Do not require a doctor's note for workers who are ill with influenza.
- Continue to advise workers to check for any signs of illness before reporting to work each day.
- Make contingency plans for increased absenteeism caused by illness in workers or illness in workers' family members that would require them to stay home. Planning for absenteeism could include cross-training current employees or hiring temporary workers.

Consider alternative work environments for employees at higher risk for complications of influenza during periods of increased influenza activity in the community

- Employees with an underlying chronic medical condition or who are pregnant should consider calling their health care provider for advice about how to reduce their risk of exposure to influenza and, if they get sick, how best to get early treatment for influenza.
- If influenza severity increases and if influenza transmission is high in the community, employers may want to evaluate their work environment to see how they can reduce the number of people that high-risk employees come in contact with, such as exploring options for telecommuting from home (if feasible). Employers can also think about how workers at higher risk for influenza complications could be reassigned to duties that have minimal contact with other employees, clients, or customers. If these workers cannot be reassigned duties to reduce contact with others, are concerned about their ability to avoid influenza at the workplace, or will be in crowded conditions at work or while commuting to work, then consider allowing employees at higher risk for influenza complications to stay home from work.
- CDC recommends that ill workers at higher risk of complications from influenza seek early treatment if they become ill.
- See <http://www.cdc.gov/h1n1flu/qa.htm> for more information.

Consider increasing social distancing in the workplace

- If influenza severity increases, local public health officials may recommend that employers implement measures to increase the physical distance between people in the workplace to reduce the spread of influenza. The goal should be for there to be at least 6 feet of distance between people at most times. This is not a simple or easy strategy and would typically require considerable flexibility. These measures may include avoiding crowded work settings, canceling business-related face-to-face meetings, spacing workers farther apart, canceling non-essential travel, increasing use of teleworking, and using staggered shifts to allow fewer workers to be in the workplace at the same time.⁹
- If appropriate for your type of business and feasible, review or develop policies for teleworking including an assessment of the capabilities and gaps of your current computer systems and availability of technical support. Take remedial steps if needed, and test your system in advance to assure it can handle an increase in remote users.
- Recommendations to increase social distancing may affect community functioning. Because supply chain issues may be affected, make sure you have plans for back-up suppliers.

Consider canceling non-essential business travel and advising employees about possible disruptions while traveling overseas

- If the severity of the outbreak worldwide increases in the fall or winter, public health officials may recommend social distancing strategies which include canceling non-essential travel and travel restrictions may be enacted by some countries which may limit the ability of employees to return home if they become ill while on travel status.
- If influenza severity increases, travelers should also be prepared for travel delays, health screenings, and other activities targeted towards travelers. Provide information to travelers about contingency plans and how their travel can be rebooked for these possible delays.

Prepare for school dismissal or closure of child care programs

- School dismissals and closure of child care programs are more likely at higher levels of severity. Be prepared to allow workers to stay home to care for their children if schools are dismissed or child care programs are closed. If dismissal is needed, schools are being advised to dismiss students for at least 5 to 7 calendar days or longer if necessary.
- Encourage employees who perform essential functions and who have children to plan for contingencies should local child care programs close or schools dismiss students.
- Be prepared for prolonged absenteeism if schools dismiss students for an extended time. Make sure your leave policies are flexible and non-punitive.
- Employers should strongly recommend that parents not bring their children with them to work while schools are dismissed.
- Implement flexible workplace policies like teleworking and staggered shifts.
- Cross-train employees to cover essential functions.
- Read CDC's school guidance, which can be found at <http://www.cdc.gov/h1n1flu/schools/schoolguidance.htm>, to better understand the conditions under which schools may be dismissed.

Other considerations

- As part of their comprehensive pandemic planning, some public and private sector employers have stockpiled or otherwise arranged for influenza antiviral drugs to be available for their employees during a pandemic. To guide these efforts, HHS released guidance to businesses in 2008 entitled *Considerations for Antiviral Drug Stockpiling by Employers in Preparation for an Influenza Pandemic* (http://www.flu.gov/vaccine/antiviral_employers.html). See updated interim guidance on the use of antiviral agents for treatment and prophylaxis of 2009 H1N1 influenza infection at <http://www.cdc.gov/h1n1flu/recommendations.htm>.
- Employers should be aware that the severity of 2009 H1N1 influenza could change rapidly; therefore, local public health recommendations to communities and businesses could be revised quickly. Planners should identify sources of timely and accurate information so they are aware of changes to recommendations and can promptly implement revised or additional measures recommended by local public health officials.

Resources

Additional tools and guidance documents have been developed by the federal government to assist employers in their planning. These resources are available online at: www.flu.gov/plan/workplaceplanning/index.html .

One-Stop

www.flu.gov

2009 H1N1 Influenza Information

<http://www.cdc.gov/h1n1flu/>

2009 H1N1 Influenza Resources for Businesses and Employers

<http://www.cdc.gov/h1n1flu/business/>

Worker Safety and Health Guidance for a Pandemic

www.osha.gov/dsg/topics/pandemicflu/index.html

OSHA's Guidance on Preparing Workplaces for an Influenza Pandemic

http://www.osha.gov/Publications/influenza_pandemic.html

CDC/NIOSH Occupational Health Issues Associated with 2009 H1N1 Influenza Virus

<http://www.cdc.gov/niosh/topics/h1n1flu/>

¹ This guidance was developed for use by employers that do not provide health care services or have “high and very high exposure risk tasks and operations.” Please see : https://www.osha.gov/Publications/influenza_pandemic.html#classifying_exposure for more information about levels of occupational risk and exposure. Special considerations need to be included for these employers. Resources for health care entities can be found at: <http://www.cdc.gov/h1n1flu/clinicians/>

² In 2006, to help businesses and employers with pandemic planning, the United States government (USG) created response stages to guide actions for state and local government and the private sector. Until the 2009 H1N1 influenza outbreak, the planning was based on the assumption that the next pandemic would start overseas and would be high in severity and therefore the stages served as a guide for planning and response. However, because of the unique characteristics of the 2009 H1N1 influenza outbreak, the stages will no longer be used as a planning and response framework.

³ Symptoms of influenza-like illness include fever or chills and cough or sore throat. In addition, symptoms of flu can include runny nose, body aches, headache, tiredness, diarrhea, or vomiting.

⁴ Fever is usually described as 100°F [37.8°C] or greater.

⁵For more information about CDC's recommendations for schools, see <http://www.cdc.gov/h1n1flu/schools/schoolguidance.htm>.

⁶ Symptoms of influenza-like illness include fever or chills *and* cough or sore throat. In addition, symptoms of flu can include runny nose, body aches, headache, tiredness, diarrhea, or vomiting.

⁷ People older than 65 years of age and older are at lower risk of getting infected with 2009 H1N1 than younger persons. However, similar to seasonal influenza, when people 65 and older do get infected with 2009 H1N1, they are at increased risk of severe illness.

⁸ Symptoms of influenza-like illness include fever or chills and cough or sore throat. In addition, symptoms of flu can include runny nose, body aches, headache, tiredness, diarrhea, or vomiting.

⁹ See this OSHA website for examples of protective social distancing methods for the

workplace:

https://www.osha.gov/Publications/influenza_pandemic.html#medium_exposure_risk

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