

Pandemic Preparedness Planning Considerations - Commercial Facilities



	INDIVIDUAL OFFICES	FOODSERVICE/CAFETERIA	PUBLIC RESTROOMS	PUBLIC AREAS	EMPLOYEES
Phase 1- Low risk of human cases	Follow Current Procedures				
Phase 2 - Higher risk of human cases	Follow Current Procedures				
Phase 3- No or very limited human-to-human transmission	<p>Follow current procedures. Assess your preparedness status and collaborate with vendor partners on response readiness. CDC's Pandemic Influenza Planning Checklist may be useful- http://www.pandemicflu.gov/plan/businesschecklist.html. Evaluate facility usage, lead times and stock shelf life and their impact on ordering supplies. Identify essential employees and visiting vendors. Reinforce hand hygiene and cough etiquette.</p> <p>Begin employee training regarding infection control, essential employee status, PPE use and communicate Influenza Control Procedures</p>				
Phase 4 - Evidence of significant human-to-human transmission (localized)	<p>Follow Phase 6 procedures in impacted areas.</p> <p>Consider ordering any supplies needed for possible pandemic, including additional cleaning, sanitation and PPE. Finalize and educate all associates on Influenza Control Procedures.</p>				
Phase 5 - Evidence of significant human-to-human transmission (regional)	<p>Follow Phase 6 procedures in impacted areas.</p> <p>Reinforce procedural training.</p> <p>Maintain inventory as needed.</p> <p>Facilities receiving visitors from impacted areas should follow Phase 6 procedures as appropriate.</p>				
	Consider providing personal hygiene materials such as tissues, hand sanitizer, properly registered RTU disinfectant spray or wipes with flu claims.			<ul style="list-style-type: none"> • Closely monitor employee health. • Reinforce personal hygiene. • Consider only essential travel to and from infected region. 	
Phase 6 - Efficient and sustained human-to-human transmission (global)	<p>Follow local public health recommendations related to local activity and need for isolation.</p> <p>Consider offering masks for symptomatic visitors.</p> <p>Limit face-to-face contact between employees, customers, and vendors and modify practices (e.g. hand shakes, work station layout, etc.).</p>				
	<ul style="list-style-type: none"> • Increase cleaning and disinfection frequency especially for touch points such as door handles, tables, etc. • See employee considerations. 	<ul style="list-style-type: none"> • Consider closing food service and cafeteria seating areas and close exposed self-serve food offerings such as salad bars and buffets. • Consider offering take out only. • Diligently practice food safety procedures, especially the potential for cross contamination or contamination by infected individual. Reduce staff to essential employees. • Provide alcohol-based hand sanitizers (dispenser preferred), especially near touch points. 	<ul style="list-style-type: none"> • Deep clean at least 3 times/day with hourly touch point disinfecting when frequently used. 	<ul style="list-style-type: none"> • Consider closing non-essential public gathering areas such as fitness centers. • Increase cleaning and disinfection frequency especially for touch points such as door handles, etc. hourly in high use areas. • Provide alcohol-based hand sanitizers (dispenser preferred), especially near touch points. 	<ul style="list-style-type: none"> • Closely monitor employee health. Reinforce personal hygiene and cough etiquette. Send symptomatic employees home. • Implement telecommuting for non-essential personnel. • Provide personal hygiene materials such as tissues, hand sanitizer, properly registered RTU disinfectant spray or wipes with flu claims. • Have employees wipe down all personal hand contact surfaces like register, keyboards and phones frequently.