



Pandemic Influenza Planning Checklist

March, 2007



Pandemic Influenza Planning Checklist

Adequate planning for pandemic influenza is critical:

- to reduce the risk to an employee's health and safety as far as possible
- to ensure the continuity of health care services to the public.

The CHPS has developed this checklist to help health science professionals and their health and safety representatives assess and improve current pandemic planning efforts at their workplace.

This checklist is intended to be generic rather than detailed and exhaustive. Each facility will likely need to adapt this checklist to meet its unique needs and circumstances.

This checklist is intended to be just one tool in the response of health science professionals to shaping Canada's pandemic influenza plan.

The CHPS will continue its advocacy efforts on a national and provincial level to ensure there is a comprehensive influenza plan in place, which protects health care workers and the public. The Canadian Health Professionals Secretariat (CHPS) is an umbrella group created by the National Union of Public and General Employees (NUPGE) to advocate for the interests of health science professionals across Canada.

Pandemic Influenza Planning Checklist

How ready are you?

1. Written plan

There is a written pandemic influenza plan for my workplace that has included input from health and safety representatives and union officials. It clearly identifies the person authorized to implement the plan and the organizational structure that will be used. The plan has been distributed to all employees.

COMPLETED

IN PROGRESS

NOT STARTED

2. Multidisciplinary planning committee

The plan includes a multidisciplinary planning committee (including a union representative and a worker health and safety representative) that has been assigned to address pandemic influenza planning and a specific individual has been assigned responsibility for coordinating the plan.

COMPLETED

IN PROGRESS

NOT STARTED

3. Points of contact

Local, provincial and national public health points of contact have been identified for information on pandemic influenza planning resources and someone has been assigned responsibility for monitoring public health advisories and updating the planning committee and coordinator.

COMPLETED

IN PROGRESS

NOT STARTED

4. Information on coordinating

The planning coordinator has contacted other local, provincial, national pandemic planning groups to obtain information on coordinating the facility's plan with other plans.

COMPLETED



IN PROGRESS



NOT STARTED



5. Communication plan

An internal and external communication (including inter-facility communication) plan has been developed to ensure delivery of timely and accurate information.

A specific individual has been assigned responsibility for communications with public health authorities, staff, unions, health and safety committees and patients.

COMPLETED



IN PROGRESS



NOT STARTED



6. Surveillance and detection

A policy is in place for surveillance and detection of the presence of pandemic influenza in staff and residents.

A system is in place to monitor for, and internally review transmission of, influenza among patients and staff in the facility. Information from this monitoring system will be used to implement prevention interventions.

COMPLETED



IN PROGRESS



NOT STARTED



7. Infection control plan

An infection control plan has been developed for reducing spread of pandemic influenza at the worksite, including:

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IN PROGRESS



NOT STARTED



- information promoting hygiene etiquette;
- more frequent cleaning on premises;
- an admission protocol to evaluate incoming patients for pandemic influenza and the appropriate placement and isolation of patients with pandemic influenza-like illness.
- criteria and protocols for closing units or the entire facility to new admissions and for enforcing visitor limitations.

8. Labour legislation and standards

The plan clearly states that all labour legislation and standards and Occupational Health and Safety legislation will be fully respected and it allocates the necessary resources to protect employees.

The plan contains detailed health and safety measures and procedures developed with health and safety committees to protect employees.

The health and safety section of the plan includes consideration of the hierarchy of controls – engineering controls, administrative controls, work practices and personal protective equipment.

The plan specifies that all employees be protected using at the minimum a fit-tested NIOSH approved N95 respirator, which is designed to protect against 95% of all airborne particulates.

COMPLETED



IN PROGRESS



NOT STARTED



9. Education and training

The plan includes a policy that all employees will receive education and training so that protective equipment is used properly at all times and other safety measures are implemented consistently and effectively.

A person has been designated with responsibility for coordinating education and training so that all staff understands the health risks present in an emergency situation, basic prevention and control measures for pandemic influenza, and how to self-assess and report symptoms of pandemic influenza before reporting for work.

Easily-accessible information on pandemic influenza and relevant facility policies have been developed and a plan is in place to disseminate these materials to staff and patients.

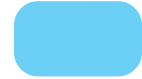
COMPLETED



IN PROGRESS



NOT STARTED



10. Anti-virals and vaccinations

The plan includes a protocol and system for the use and monitoring of anti-viral drugs and vaccinations for staff. The plan includes provisions for prophylaxis to staff as negotiated in a Collective Agreement or protocol or as recommended by public health departments.

COMPLETED



IN PROGRESS



NOT STARTED



11. Sick leave and family leave

The plan respects the sick leave and family leave policies outlined in the Collective Agreement, and establishes leave policies to address

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IN PROGRESS



NOT STARTED



issues unique to a pandemic, and includes a non-punitive policy that addresses the following situations:

- the needs of symptomatic staff;
- the needs of staff at increased risk of complications (e.g. pregnant women);
- the family responsibilities of staff (e.g. they may need to care for family members who become ill or may need to look after their children because of day care and school closures).

The plan is in compliance with reporting requirements under health and safety legislation and workers compensation legislation.

12. Mental health resources

The plan includes the dissemination of materials, which list mental health resources that will be available to provide counseling to staff during a pandemic.



13. Surge capacity

Issues related to surge capacity during a pandemic have been addressed including:

- a contingency staffing plan has been developed that identifies the minimum staffing needs and prioritizes critical and non-essential services and plans for employee absences;



- an individual has been assigned responsibility for conducting a daily assessment of staffing status and needs during a pandemic;

- protocols are in place that deal with issues related to staff who work in multiple facilities;

- a contingency plan has been developed to address likely shortages of beds and supplies including personal protective equipment.