

**Guideline for Pandemic Influenza Preparedness
at Business Entities and Establishments**

**March 26, 2007
Pandemic Influenza Experts Advisory Committee**

Guidelines for Pandemic Influenza Preparedness for Business Entities and Establishments

Basic knowledge of pandemic influenza

Preparations

- 1) **Establish a scheme for crisis management** (headquarters for countermeasures, reporting lines)
- 2) **Establish a scheme for information collection and provision**
- 3) **Review business continuity plans**
- 4) **Prepare for infection control measures** (recommendation of hand washing, examination of telework etc.)
- 5) **Establish stocks of necessary supplies** (masks, gloves, disinfectant alcohol for hands etc.)
- 6) **Review business continuation plans for operations required to sustain social functions** (BCP shall be formulated to ensure continuation of such operations)



Immediate responses

- 1) **Information collection and provision**
- 2) **Preventing the spread of infection** (canceling or postponing meetings, parties, seminars etc., or switching to teleconferencing etc.)
- 3) **Infection prevention of employees assigned or traveling overseas**
Examine whether employees and their families working in countries where outbreak has occurred need to be evacuated, and/or whether business trips to such countries should be cancelled or postponed.
- 4) **Raise awareness on infection control measures** (“coughing manners,” self-evaluation of health status etc.)



Response to wide-spread infection

- 1) **Information collection and provision**
- 2) **Business continuity plans** (limiting operations, instructing employees to stay home etc. as necessary)
- 3) **Preventing spread of infection**
- 4) **Bolster measures to raise awareness of preventive measures**
- 5) **Business continuity plans for operations required to sustain social functions**

Guidelines for Pandemic Influenza Preparedness for Business Entities and Establishments

These guidelines are formulated to provide business entities and establishments with guidance on pandemic influenza preparedness. The Japanese population as a whole should take part in pandemic influenza preparedness, with business offices promoting preparedness measures according to these guidelines.

Outbreaks of pandemic influenza will not necessarily proceed as forecasted and actual situations during a pandemic will vary. Therefore, these guidelines shall be reviewed and modified as necessary in accordance with future developments.

1. Basic knowledge of pandemic influenza

(1) What is pandemic influenza?

- Pandemic influenza refers to influenza caused by infection by any influenza virus that has become capable of infecting humans, amplifying in human bodies, and transmitting efficiently between humans, as a result of mutation from an animal (particularly avian) influenza virus.
- No one can predict when a pandemic influenza will occur. The virus is still unknown to the humankind and nobody is immune to it. Therefore the virus is expected to transmit easily between humans and expand rapidly into a massive global infection (“pandemic”).
- The Spanish flu, a prototypical example of a pandemic, occurred between 1918 and 1919, infecting 25 to 30% of the global population and killing an estimated 40 million people, including 390 thousand among those of 23 million infected people in Japan. The records suggest that, once a pandemic occurs, numerous people will get infected, flooding medical institutions with patients and causing various turmoil, such as difficulty securing human resources required to sustain the life and social functions of the general public.
- The Spanish flu is considered to have spread over the globe in about eleven months. Today, it will take a much shorter time for a pandemic virus to spread throughout the world, regardless of the location of origin, due to an expanded population; concentration in urban areas; development of airplanes and other high-speed, large-capacity transportation methods; etc. Furthermore, it is highly unlikely that Japan will be able to stay clear of the pandemic, even if it originates in another country, considering the universal presence of Japanese businesses and active human exchange. That is why preparations and countermeasures are required to be taken in advance.

(2) Countermeasures at the Central and Local Governments

- The Ministry of Health, Labour and Welfare enacted and published the Pandemic Influenza Preparedness Action Plan in November 2005, based on the pandemic phases classified by the WHO. The Government of Japan also conducted response drills in line with this action plan. The government has also formulated guidelines for public health, medical and social responses to pandemic influenza, which are included in this document.

- The Government of Japan is also promoting countermeasures to prevent the invasion of a pandemic influenza in Japan, including the production and stockpiling of prepandemic vaccines, stockpiling of antiviral drugs, and establishing of required medical services.
- Local governments have also formulated their own pandemic preparedness action plans and manuals based on the national action plan or using a unique format. Please refer to your local government's plans and manuals, which are published on the websites of the public health departments or health centers.

2. Preparing for a pandemic influenza

(1) Confirming schemes for crisis management

Business entities shall confirm schemes for crisis management at individual offices as necessary, to enable effective preparations for and responses to pandemic influenza. The schemes shall include provisions on the establishment of headquarters comprising the chief commander of the entity or the establishment, and the company doctor if there is one, as well as the organization of taskforces in charge of actual responses, emergency communication lines with local public welfare departments and medical institutions, and other offices. If the company or the office does not have a dedicated or designated industrial doctor, the crisis management scheme may also have to include consultation with specified local physicians for advice on responses to pandemic influenza.

(2) Establishing schemes for information collection and provision

Business entities shall also obtain information on the outbreak status etc. of pandemic influenza in Japan and overseas as necessary, from the Ministry of Health, Labour and Welfare, the Ministry of Foreign Affairs, and other governmental agencies, as well as from local governments and international organizations such as the World Health Organization (WHO). Businesses shall also exchange information as appropriate with industrial associations and other companies. Businesses shall then refer back to action plans and countermeasures and respond appropriately. Information obtained shall be disseminated to all employees along with instructions on how to respond, which shall reflect both the action plan and the policy of the entity or the office.

[National information]

Website of the Ministry of Health, Labour and Welfare:
<http://www.mhlw.go.jp/>

Website of the National Institute of Infectious Diseases:
<http://www.nih.go.jp/niid/index.html>

Website of the Infectious Disease Surveillance Center, National Institute of Infectious Diseases: <http://idsc.nih.go.jp/index-j.html>

Website of overseas safety information, the Ministry of Foreign Affairs:
<http://www.anzen.mofa.go.jp>

[Prefectural, health center and municipal information]

Please refer to the relevant information and notifications to residents published on the websites of individual prefectures, health centers and municipalities.

[International information]

Websites of the World Health Organization (WHO)

On avian influenza: http://www.who.int/csr/disease/avian_influenza/en/

On influenza: <http://www.who.int/csr/disease/influenza/en/>

(3) Business Continuity Planning (BPC) during pandemic

Infection by pandemic influenza may prevail throughout Japan and the world. Each wave of infection is considered to last for about two months, with the possibility of multiple waves repeating over a year. Companies and offices may experience a substantial number of temporary employee absences due to infection of self of (a) family member(s).

Business entities shall prepare for large-scale absences of employees via Business Continuity Planning, which should involve related businesses and available assistants, and necessary countermeasures.

(Reference)

The U.S. Office of Strategic Health Authorities will provide guidance to businesses experiencing greater than 40% absence rate during the peak of the pandemic.

(4) Preparations for infection control of employees

Even before a pandemic influenza occurs, business entities shall raise awareness of infection control among their employees as necessary, including the following preventive measures.

- Recommendation of frequent hand washing
- Conducting health education that promotes infection control measures and self-monitoring of health status by employees
- Establishing a scheme for collecting information pertaining overseas trips of employees (after the issuance of travel information by the Ministry of Foreign Affairs)
- If possible, consider implementing the following measures to minimize the spread of infection:
 - Shift certain operations to telework,
 - Switch from in-person meetings to teleconferencing or videoconferencing,
 - Refrain from commuting during rush hours or using public transportation,

(5) Establishing stocks of necessary supplies to prevent (the spread of) infection

Masks and other supplies to prevent infection are likely to run short due to buyouts etc. following the outbreak of pandemic influenza. Therefore, it is desirable that individual business establishments establish stocks of necessary supplies in advance.

○ Masks

- Masks shall be used to prevent droplet infection through conversation, coughing and sneezing, and the spread at establishments where close contact with others is unavoidable, such as schools and businesses that provide in-person customer services.
- The use of less penetrable masks such as surgical masks used at medical facilities is preferred, but common marketed masks are considered capable of preventing the spread of viruses through coughing to some degree.
- N95 masks are only required for health care workers who are likely to come into close contact with individuals with influenza symptoms.
- It must be noted that even if a healthy person wears a mask, he or she cannot completely prevent the inhalation of a virus.
- Masks must be worn correctly as indicated in the printed instructions.

○ Gloves

- Gloves shall be worn during disinfection and cleaning operations at offices that have been infected by pandemic influenza.
- It is preferable to use gloves that are water-repellent and disposable.

○ Soap and disinfectant alcohol for hands and fingers

- It is recommended to disinfect hands and fingers frequently with soap. If this is not possible, disinfectant alcohol should be used instead.

(6) Business Continuity Planning (BCP) for operations required to sustain social functions

Business entities involved in operations required to sustain social functions shall formulate BCP to ensure continuation of such operations during a pandemic, such as establishing work shifts and identifying available assistants as necessary. Decisions on measures to maintain continuity shall be made primarily by the manager of the relevant business, but should take into consideration recommendations and announcements issued by governments and other authorities.

The pandemic influenza outbreak is predicted to occur in multiple waves, each of which is likely to last for about two months. “Workers in social services etc.” shall include individuals involved in social services that may threaten the life and social functions of the general public in the case of two-month discontinuation.

1) Security

Principle: Individuals involved in social services that may threaten social security and order if the service is discontinued

e.g. Firefighters, police officers, self defense force members, coast guard officers, and reformatory officers

2) Utilities

Principle: Individuals involved in social services that may threaten the minimum quality of life if the service is discontinued

e.g. Staff at electricity, water, gas and oil utilities; food merchandisers

3) Crisis management at the central and local governments

Principle: Individuals involved in social services that may threaten the minimum quality of life and social order if the service is discontinued

e.g. Diet members, local council members, governors, mayors, central and local government officials involved in crisis management

4) Information provision to sustain the minimum quality of life

Principle: Individuals involved in services that may threaten social order due to lack of information if the service is discontinued

e.g. Members of press, important network services and management

5) Transportation

Principle: Individuals involved in the transport of supplies required to sustain electricity, water, gas, oil, food and other utility services

e.g. Staff of railroad, road, cargo, air and sea transportation

Business entities involved in operations required to sustain social functions shall examine and confirm the following points, and formulate action plans as necessary, taking into consideration the major impact the relevant operation may have on society during a period of confusion.

○ Confirmation of crisis management schemes

○ Examination of functions, operations, equipment and other resources required to sustain

relevant operations

- Identify departments essential for sustaining operations and consider infection prevention measures for such departments (e.g. routinely taking temperatures of departmental members, bolstering surveillance, refraining from in-person meetings)
 - Consider the requirement of human resources and assistants necessary for sustaining operations, and the necessary changes in work patterns of relevant employees (e.g. changing commuting methods to avoid crowded trains, minimizing the necessity to leave the office building by stocking up on food, blankets and other supplies)
 - Consider the establishment of alternative decision making systems to sustain essential business functions
 - Consider the use of alternative equipment necessary for sustaining essential operations
- Stocking of masks and other necessary supplies
 - Examination of infection prevention measures at the office, and confirmation of response measures to a suspected infection case
 - Examination of the above issues and other measures required for sustaining business operations, the relevant training of employees, and the review of BCP as necessary

3. Immediate response following the outbreak of pandemic influenza in Japan or overseas

(1) Information collection and provision

Business entities shall also obtain information on the outbreak status etc. of pandemic influenza in Japan and overseas as necessary, from the Ministry of Health, Labour and Welfare, the Ministry of Foreign Affairs, and other governmental agencies, as well as from local governments and international organizations such as the World Health Organization (WHO). Businesses shall also exchange information as appropriate with industrial associations and other companies. Businesses shall then refer back to action plans and countermeasures and respond appropriately. Information obtained shall be disseminated to all employees along with instructions on how to respond, which shall reflect both the action plan and the policy of the entity or the office.

(2) Infection control in offices

Business entities shall take the following measures to protect their employees from infection at offices.

- Provide employees with accurate information on pandemic influenza
- Raise awareness to promote required preventive measures and self-monitoring of health status by employees
- Request employees to refrain from coming to the office if they develop a fever of 38°C or

higher, coughs, generalized fatigue, or other influenza-like symptoms

- It is recommended that businesses suggest employees to consult the company doctor or other experts before requesting them to stay home.

(3) Infection control for employees assigned or traveling overseas

To prevent infection of employees and their families assigned or traveling overseas, business entities shall take the following measures on a corporate- or office-wide basis, referring to the Guidelines for Pandemic Influenza Preparedness at Business Entities with Employees Assigned to Overseas (revised on October 1, 2004, Japan Overseas Health Administration Center, Japan Labour Health and Welfare Organization) and other reference materials.

- Consider the appropriate options for evacuation of employees and their families residing in foreign countries and regions where pandemic influenza has occurred. Refer to the travel information (on risks of infectious diseases etc.) issued by the Ministry of Foreign Affairs, information provided by the Japanese Embassies in the relevant countries and regions, and other related information. Also identify the local status of business operations and the infection status of employees and their families (after travel information has been issued by the Ministry of Foreign Affairs)
- Minimize trips to countries and regions where pandemic influenza has occurred. Refer to travel information on risks of infectious diseases etc. issued by the Ministry of Foreign Affairs (after travel information has been issued by the Ministry of Foreign Affairs)
- Employees and their families returning from countries and regions where pandemic influenza occurs shall follow the Quarantine Guidelines.

If any of such employees or families develop symptoms suggesting pandemic influenza, business entities shall immediately report them to health centers that shall in turn provide instructions to consult designated medical institutions in the relevant prefecture.

(4) Awareness raising on preventive measures among employees

Business entities shall raise their employees' awareness of the following points of infection prevention, taking into consideration inputs from the central government and the extent of the pandemic.

- Each individual shall make efforts to be aware of the status of the pandemic influenza in Japan and overseas, key points in preventing (the spread of) infection, and other related information. Every employee shall refrain from panicking, but judge and act appropriately based on the information provided.
- Each individual shall refrain from traveling to countries and regions where pandemic influenza has occurred. Refer to the travel information on risks of infectious diseases etc. issued by the Ministry of Foreign Affairs.
- Each individual shall wear masks, gargle and wash their hands frequently in regions where pandemic influenza has occurred.

- Each individual shall practice “cough etiquette”

“Cough etiquette” refers to manners expected to minimize the chances of infecting others when you have a cold.

- * Cover your mouth and nose when you cough or sneeze, turning your face away from others and keeping a distance of at least one meter.
- * Install covered trash boxes so that tissue paper containing respiratory secretions (such as nasal mucus and phlegm) can be contained and disposed of then immediately.
- * Urge coughing individuals to wear masks.

The use of less penetrable masks such as surgical masks used at medical facilities is preferred, but common marketed masks are considered capable of preventing the spread of viruses through coughing to some degree.

It must be noted that, even if a healthy person wears a mask, he or she cannot completely prevent the inhalation of virus.

- * Masks should be worn correctly, as indicated in the printed instructions.

- Managers shall urge employees to be attentive of their health status.
- Employees shall refrain from going to unnecessary large meetings, entertainment facilities or other locations visited by unspecified crowds in regions where infections have occurred.
- Employees shall refrain from leaving the office unnecessarily

4. Bolstered measures to raise awareness on preventive measures among employees in the case of further spread of pandemic influenza in Japan

(1) Information collection and provision

Business entities shall continuously collect and provide information on pandemic influenza.

(2) Business Continuity Planning

- Reduce operations and/or request employees to stay home as necessary
- Respond to requests from the central and local governments (public welfare departments etc.) as much as possible
- Retain sanitary conditions of business establishments, taking into consideration advice from public welfare departments etc.

(3) Infection prevention at business establishments

- Bolster infection prevention measures that were in operation pre- and post-pandemic influenza
- Consider closing canteens, resting areas and other facilities where employees often gather
- If possible, consider implementing the following measures to minimize the spread of infection:
 - Shift certain operations to telework,
 - Cancel or postpone unimportant meetings, parties, seminars, etc.,
 - Switch from in-person meetings to teleconferencing or videoconferencing,
 - Refrain from commuting during rush hours or using public transportation.

(4) Bolstered measures to raise awareness of preventive measures among employees

Business entities shall bolster measures to raise their employees' awareness of the following points of infection prevention, taking into consideration inputs from the central government and the extent of the pandemic.

- Each individual shall make efforts to be aware of the status of pandemic influenza in Japan and overseas, key points in preventing (the spread of) infection, and other related information. Every employee shall refrain from panicking, but judge and act appropriately based on the information provided.
- Each individual shall refrain from traveling to countries and regions where pandemic influenza has occurred, referring to travel information on risks of infectious diseases etc. issued by the Ministry of Foreign Affairs.
- Each individual shall wear masks, gargle and wash hands frequently.
- Each individual shall practice "cough etiquette"
- Managers shall urge employees to be attentive of their health status.
- Employees shall refrain from unnecessary going to large meetings, entertainment facilities or other locations visited by unspecified crowds in regions where infections have occurred.
- Employees shall refrain from unnecessarily leaving the office

(5) Business Continuity Planning (BCP) for operations required to sustain social functions

Business entities involved in operations required to sustain social functions shall ensure the continuity of such operations during a pandemic, preferably in line with the BCP formulated in advance, concerning work shifts and the identification of available assistants. Decisions on

measures to maintain continuity shall be made by the primarily by the manager of the relevant business, but should take into consideration recommendations and announcements issued by governments and other authorities.

Business entities involved in operations required to sustain social functions shall emphasize the following points in particular, taking into consideration the major impact the relevant operation may have on society during a period of confusion.

- Begin appropriate intelligence activities and activate crisis management schemes
- Secure operations, equipment and other resources required to sustain the relevant operations
 - Implement infection prevention measures for essential departments (e.g. routinely taking temperatures of departmental members, bolstering surveillance, refraining from in-person meetings)
 - Investigate work styles suitable for infection prevention at essential departments (e.g. change commuting methods to avoid crowded trains, minimize work outside the office through effective shift rotations)
 - Put into motion an alternative decision making system that is appropriate for the extent of infection spread, such as turning on alternative equipment, etc.
- Respond appropriately to a suspected case of infection
- Implement appropriate public relations and appropriate information provision to employees and their families

References

1. Cleaning and disinfection of contaminated locations

In the case of normal seasonal influenza, droplet infection is the main route of infection, followed by contact infection, and airborne infection under special circumstances around patients (e.g. treatment generating air-borne materials from patients). There has not been any clear evidence proving infection and transmission by routes other than droplet infection. The possibility of airborne infection is seen predominantly in patients receiving special treatment etc. In general, it will not be necessary to consider the possibility of air-born infection, such as that caused by inhaling influenza virus rising with dust from the floor of hospital rooms after the discharge of patients (like Noro virus).

For details on infection routes of normal influenza and pandemic influenza and infection control measures, please refer to the Guidelines for Infection Prevention at Medical Facilities. Indicated below are principles of cleaning and disinfection of locations where patients have stayed, based on the abovementioned guidelines. Public health workers are requested to guide patients' families and related workers based on the following principles.

(1) Cleaning

1) Cleaning the floor

To remove virus coated with organic substances, the floors of locations where patients stayed shall be wiped with a mop or dust cloth. The effectiveness of wiping can be increased by using detergent. If there is an obvious deposition of blood, bodily fluid, secretions (excluding perspiration), excretions etc. from a patient, disinfect that area (see (2) below)

2) Cleaning locations that were in direct contact with patients

Locations which are considered to have been in frequent direct contact with patients (such as door knobs, toilet seats, light switches, stair rails, tables, chairs, bed rails etc.) shall be cleaned with a mop or dust cloth. The effectiveness of wiping can be increased by using detergent. Electronic equipment such as PCs, telephone sets and fax machines shall be disinfected with alcoholic agents, because they may break if water enters inside.

3) Cleaning walls and the ceiling

The walls and the ceiling need not be cleaned unless there is an obvious deposition of blood, bodily fluid, secretions (excluding perspiration), excretions etc. from a patient. If there is a deposition of blood, bodily fluid, secretions (excluding perspiration), excretions etc. from a patient, disinfect the deposition and the surrounding areas.

4) Cleaning dishes, clothes and linens

Dishes, clothes and linens should be washed and cleaned as usual. If there is a deposition of blood, bodily fluid, secretions (excluding perspiration), excretions etc. from a patient on clothes or linens, and if it is difficult to wash out, disinfect that area

with an alcoholic agent. If applicable, hot water disinfection (soaking in water over 80°C for more than ten minutes) is another alternative.

5) Cleaning goods

Goods that patients used shall be wiped and cleaned as appropriate.

(2) Disinfection

Use a sodium hypochlorite solution or either isopropanol or a disinfectant ethanol agent for disinfection.

1) Sodium hypochlorite solution

Use a solution with a concentration between 0.05 – 0.5 w/v % (500 – 5,000 ppm). Soak items to be cleaned in the solution for thirty minutes, or wipe them with a towel, dust cloth etc. soaked in disinfectant solution. Disinfectant agents shall not be sprayed, because it may cause incomplete disinfection or rising of a new virus strain, as well as being a health hazard to individuals administering the disinfectant.

2) Isopropanol or disinfectant ethanol

Use isopropanol or disinfectant ethanol of 70v/v%. Wipe items to be cleaned with a towel (paper towel etc.) or an absorbent cotton completely soaked in disinfectant agent. Disinfectant agents should not be sprayed, because it may cause incomplete disinfection or rising of a new virus strain.

(3) PPE to wear during cleaning

Cleaning individuals shall put on masks (surgical masks as a rule), goggles or other eye protection, and gloves, when they perform cleaning, disinfection etc. Gloves need not be sterilized, but should be made of tough and impermeable materials.

(4) Hand hygiene

Individuals who are cleaning or disinfecting should always wash their hands with soap and water, or disinfect their hands and fingers with a quick drying rubbing disinfectant alcohol agent, following cleaning or disinfection operations. Hygiene of hands and fingers is the basics of all infection prevention measures. Individuals shall also wash or disinfect their hands and fingers after touching objects possessed by patients in hospital rooms, before serving meals, before having meals, and after urination or excretion. Individuals shall also be instructed to wash or disinfect their hands and fingers after coming home.