

Worksite Preparedness: 2009 H1N1

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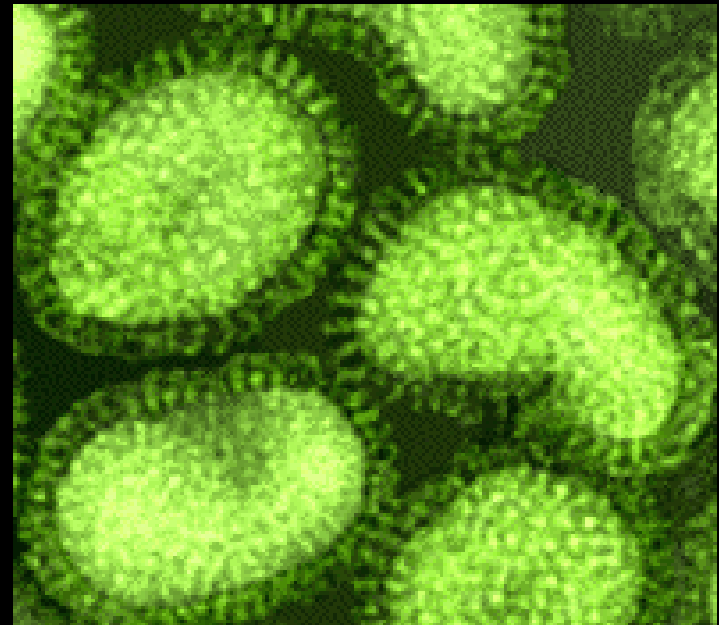
2009 H1N1

- Type of Influenza
- Previously called “Swine Flu”
- Detected earlier this year
- Presents similar to seasonal flu
- Unclear how it will affect population in the coming season
- Most affected groups are different
- Lack of protection

Influenza

- Virus
- Animal reservoirs: horses, whales, birds, humans and... pigs
- Can jump species...
 - Re-assortment
 - Mutations
 - Environmental Factors

Hence the initial name...



2009 H1N1

- Initial testing showed viral genes normally associated with pig subtypes
- Now... it has been concluded that it has viral genes from Asian and European pig types, one human type and one bird

Quadruple Re-assortment

So... 2009 H1N1

2009 H1N1

Currently...

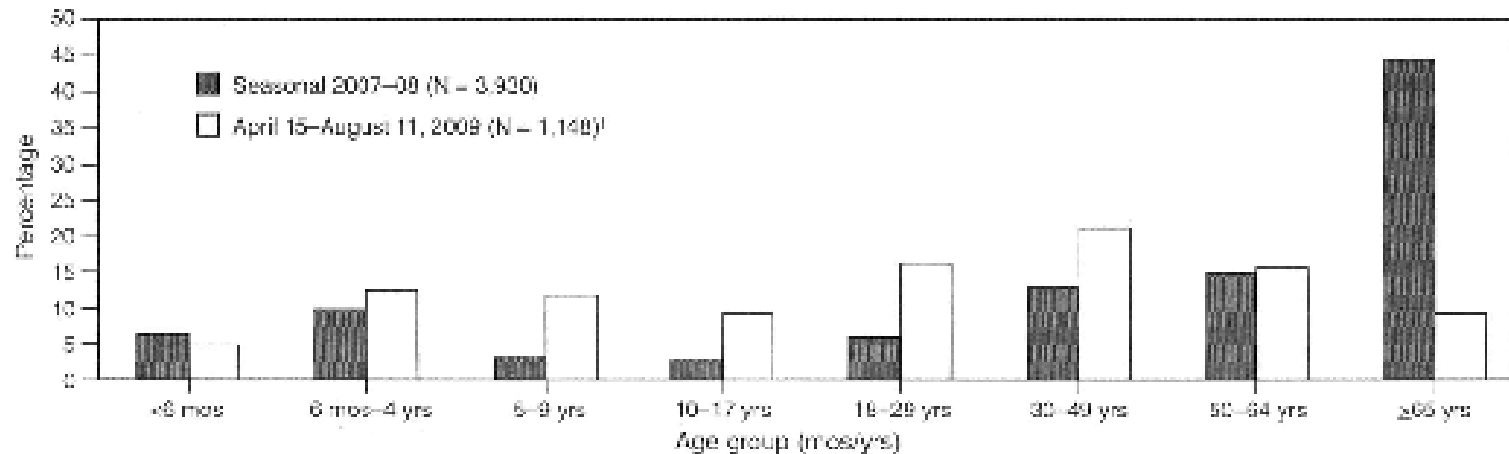
- Mortality rate pretty low
- Most people recover within a 7-day window
- Most do not require hospitalization
- Human-to-human transmission
- Presents like the seasonal flu
- Not everyone exposed will get it
- Infectious from 1 day prior to 24 hours after fever breaks

How do you get it?

- Respiratory droplets... sneezes, coughs
- Contaminated surfaces
 - Influenza resilient... not alive!
 - Stays active depending on surface for up to 48 hrs!
 - Hands can contaminate several surfaces.
- Touching eyes, nose or mouth with contaminated hands
- Being around those who are ill
- Not from pork products!

Groups Most Affected

FIGURE. Distribution by age group of persons hospitalized with laboratory-confirmed influenza,* — United States, 2007–08 winter influenza season and April 15–August 11, 2009



Source: Emerging Infections Program, CDC.

- H1N1 affects the younger population more than seasonal.
- Those older than 65 seem less susceptible to H1N1

This does not indicate those most likely to have complications with H1N1!

Higher Risk for Complications

- Pregnant women
- People with chronic health conditions
- Immunocompromised
- Very young <6 months
- Children under 5 years
- >65 years

**Consult Healthcare Provider about Antivirals
Within 48 hours of Becoming Sick**

Vaccine

- Vaccine available for Seasonal Flu
- Is not effective for H1N1
- 2009 H1N1 vaccine due out in October

**Will be administered
based upon need and risk.**

Vaccine Administration

● First Priority

- pregnant women
- children 6 months through 4 years
- people who live with or care for children younger than 6 months of age
- children ages 5 - 18 years with chronic health conditions
- health care and emergency medical workers with direct patient contact

● Second Priority

- all children aged 5 - 24 years, regardless of health condition
- all health care and emergency medical service personnel
- people ages 25 - 64 years w/ chronic health disorders or compromised immune systems


What can I do?

While it is not 100% avoidable...

Being prepared and taking preventative measures can decrease the chance of infection.

Your health is in your hands!

Worksite Preparedness

- Know the symptoms.
 - Know prevention strategies.
 - Assess your facility.
 - Communicate with and educate your staff about prevention and resources.
- 

Symptoms

Same as the seasonal flu:

- Fever 100F or greater
- Cough
- Sore throat
- Rhinorrhea (runny nose)
- Nasal congestion
- Headache
- Body aches
- Sometimes nausea, vomiting, diarrhea

Prevention Strategies

Stay home when ill!

- Have a thermometer on hand
- Will not be able to easily feel 100F
- Encourage loved ones to stay home if ill
- Schools will require that children remain home
- Do not return to work until fever-free for 24 hrs.
w/o a fever reducer (Tylenol)
- Do not go to the doctor unless “higher risk” for complications
- Be respectful... you wouldn't want your sick coworker to expose you!

Prevention Strategies

- Hand washing!

One of the leading prevention strategies

Think about all of the things your hands touch.....

Which are “clean”?

Which are “dirty”?

Back to School...



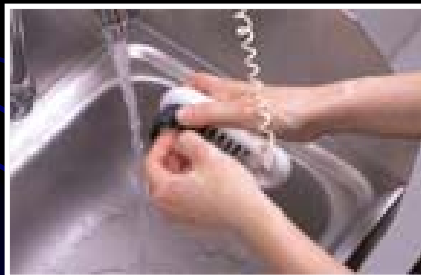
1. Wet your hands with hot running water



2. Apply soap



3. Rub hands together for at least twenty seconds



4. Clean under fingernails and between fingers



5. Rinse hands thoroughly under running water



6. Dry hands w/ paper towel and turn off the faucet before discarding

Hygiene Tools

- Hot water
- Soap
- Paper towels
- Alcohol-based sanitizers
in addition to
hand washing!



When to wash...

Can depend on if you are sick or healthy!

After...

- Touching unclean/common surfaces
- Completing a task where contamination is probable
- Using a tissue

Before...

- Touching nose, eyes, mouth
- Going from a dirty or common item to something clean
- Touching clean surface

Whenever else your hands become dirty or contaminated!
More is better in this case...

Surfaces

- 2009 H1N1 stays active on surfaces
 - On non-porous surfaces: plastic, metal
 - 24-48 hours
 - Has been cultured from hand transfer after 24 hours
 - Porous surfaces: cloths, absorbent
 - 8-12 hours
 - Contaminated hands can transfer virus to several surfaces.

Clean often...

Cleaning and Sanitizing

- Sanitize common surfaces
 - Phones
 - Door knobs
 - Service counters
- Keep supplies separated
 - Pens, pencils
 - Cups
 - Keyboards

While you can't clean all the time, increasing cleaning in general can help!

What is effective?

Most household cleaners!

Use as often as possible...

- Encourage employees to take time everyday to clean their areas
- Have custodial services clean common areas more often

Coughing/Sneezing

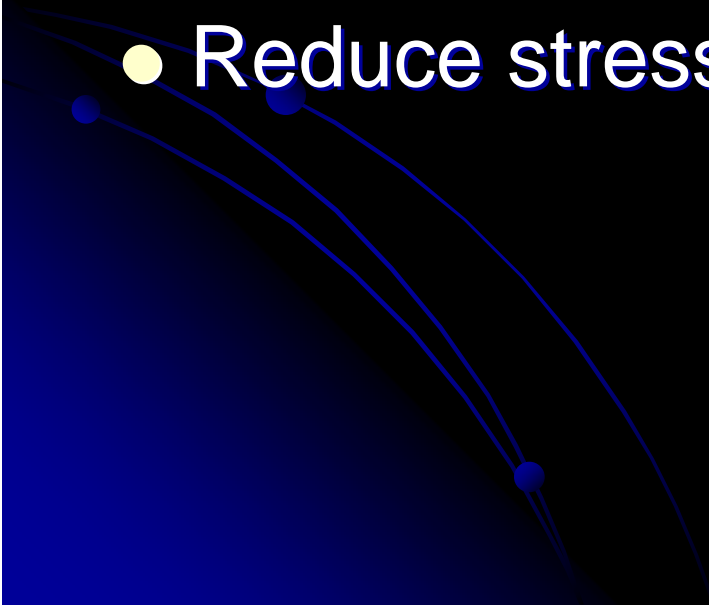
- Uncovered sneezing or coughing...
 - Contamination sprayed into the air
- Coughing or sneezing into hands...
 - Surfaces touched afterward
 - Hand shaking
- Coughing or sneezing into tissue...
 - Must go into garbage
 - Wash hands

Best Practice

Cough or sneeze into your sleeve

- Keeps contamination at a minimum
- Keeps hands cleaner
- Prevents contamination of surfaces

Personal Strategies

- Get plenty of rest
 - Eat healthy
 - Drink plenty of water
 - Be active
 - Reduce stress
- 

In a Nutshell...

Prevention is behavioral...

- Hand washing
- Cleaning and sanitizing more often
- Cover coughs and sneezes
- Aware of contamination
- Adopting a healthier lifestyle
- Staying home when ill

Now that you have the tools...

**Let's Apply Them to
Your Workplace**



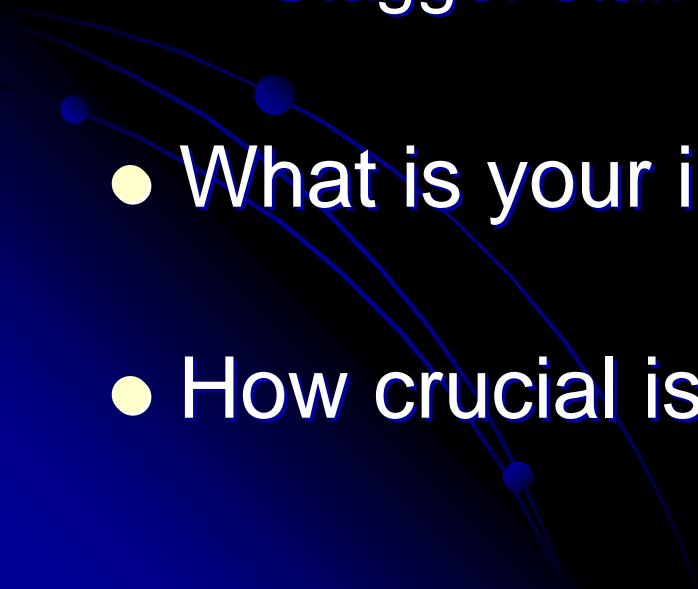
Workplace Application

- Assess the workplace
 - Policies
 - Supplies
 - Staffing
 - Facility
- Educate and Communicate
 - Symptoms
 - Prevention
 - Policies

Assessing the Workplace

- What is your sick policy?
 - Develop one
 - Reassess penalties for missed shifts
 - Allowance for caretaking
 - Reevaluate the requirement for a doctor's note—people are encouraged not to visit the doctor unless at risk for complications
- Do you encourage cleaning?
 - Supplies
 - How often?

Assessing the Workplace

- Do you have “high-risk” employees?
 - Educate employees about H1N1 risk
 - Do you have shifts?
 - Stagger staff shift to minimize contact
 - What is your interface with the public?
 - How crucial is travel to your operation?
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What do you need?

Know your operational minimums:

- Number of employees
- Job positions
- Cross-training options
- Telecommuting options
- Travel reduction
- Minimize public interface

And... Education

Are you encouraging prevention strategies?

- Educate employees about H1N1
 - Symptoms
 - Prevention/Behavior Changes
 - Higher Risk Groups for Complications/Antiviral Info
 - Vaccine Supplies, both Seasonal and H1N1
 - Current Policies and Updates due to H1N1
 - Staying home/Caretakers
 - Hand washing and Sanitizers
 - Cleaning Practices

If you must...

Come to work when sick:

- Wash hands even more frequently especially after contamination
- Cough, sneeze into sleeve
- Keep a distance of 6 feet or more from others
- Do not share supplies
- Wear surgical mask
- Clean surfaces often
- Use hand sanitizers
- Use tissue or towels when touching common surfaces

Information and Updates

- CDC and MCCHD websites:

www.cdc.gov

Google: Missoula Health Department

- MCCHD phone line: 406-258-4636