WIU PANDEMIC PREPAREDNESS AND RESPONSE PLAN

AN ANNEX TO THE WIU EMERGENCY OPERATIONS PLAN

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I. PURPOSE

An influenza pandemic would disrupt the normal day to day activities of Western Illinois University (WIU). Although a pandemic is not easy to predict, the World Health Organization (WHO) and the Centers for Disease Control and Prevention (CDC) have cautioned the global community that it is not a matter of if a pandemic will occur, but rather, when. When a pandemic does occur, everyone around the world is at risk, including rural communities such as ours.

Planning is the first step in preparing to manage the consequences of a pandemic. Planning can help to reduce the spread of disease, decrease the numbers of deaths and hospitalizations, help maintain essential services, and reduce the disruptions due to a pandemic. Since early 2005 Western Illinois University and community leaders have jointly participated in federal, state and local meetings, exercises and planning workshops. The University has established a Pandemic Influenza Preparedness and Response (PIPR) Committee whose mission is to create a framework for a graduated response based on cooperation and partnership with local authorities.

The Goal of the WIU Pandemic Influenza Preparedness and Response plan is two-fold:

1) Reduce illness and death due to pandemic influenza among students, employees and the community and 2) Provide a plan for business continuity that minimizes the impact of social disruption and economic loss. To achieve this goal, the PIPR Committee has established a prioritized list of planning objectives as follows:

- 1) Reduce the number of pandemic influenza cases and deaths;
- 2) Provide essential care for ill students;
- 3) Maintain critical operations and support services;
- 4) Provide housing and support services for students who cannot leave campus;
- 5) Provide support for students and faculty studying or working abroad;
- 6) Provide for academic continuity; and
- 7) Provide continuity for critical research.

The PIPR has further recognized that certain University operations are critical to successful implementation of the planning objectives. These operations include:

- 1) Communications;
- 2) Water and utilities;
- 3) Support services for essential personnel needed to conduct critical operations;
- 4) Security/public safety;
- 5) Health care services;
- 6) Housing and dining for students;
- 7) Mass distribution of anti-virals and/or vaccine;
- 8) Data preservation; and
- 9) Support for research animals and livestock operations.

II. <u>INTRODUCTION</u>

A pandemic is a worldwide outbreak of influenza that occurs when three conditions occur: 1) a new or novel strain of influenza type A emerges to which humans do not have immunity; 2) the novel virus causes serious illness in humans; and 3) the novel virus is spread easily from person-to-person. The current strain of Avian Influenza Type A H5N1 has met the first two conditions, but has not yet evolved into a strain that can be transmitted easily from person to person.

A pandemic differs from seasonal influenza that is already circulating in the human population. Generally, seasonal influenza is most serious to the very young, the elderly or to infirm individuals, causing annual deaths in the United States in excess of 34,000. On the other hand, the entire human population is susceptible to a pandemic influenza because it is a new virus strain. The 1918 pandemic was a severe pandemic; it is believed that the death toll in the United States alone exceeded 675,000 - disproportionately affecting healthy young adults from 15-35 years of age. This is particularly troubling to University populations that fit this demographic.

During the 1918 pandemic, Western Illinois University (then Western Normal School) temporarily closed its doors for 4 weeks during October and November of 1918. Social distancing measures were imposed including quarantine, closing of public schools, and the canceling of public gatherings places such as theatres. In spite of these measures, the death toll in the community due to influenza and complications increased. Although there was no influenza vaccine available in

III. <u>SITUATION</u>

Western Illinois University is located in West Central Illinois. The residential campus is located in Macomb, Illinois (pop 20,000). Th

- The local resources would likely be overwhelmed during a pandemic, and may require that the university render services and provide assets to support the community response.
- The traditional classroom academic environment cannot be maintained during a pandemic without putting students and staff at increased risk of influenza. To achieve maximum effectiveness, a temporary campus closure should be initiated prior to the onset of widespread pandemic illness.
- It is possible that WIU may be compelled to close campus by local, state, or federal health authorities regardless of its desire to remain open.
- In the case of a temporary suspension of academic programs, the campus would close all university housing facilities.
- Approximately 650 out of state or international students may require temporary housing until travel arrangements could be made. Likewise, it is possible that the University would need to maintain an infirmary for ill students if local hospital resources are overwhelmed.
- Some students may not be able to return home due to worse conditions prevailing in their home community or country.

V. CONCEPT OF OPERATIONS

- 1. It is the responsibility of Western Illinois University to plan for the deployment of resources during an emergency affecting the students, employees and facilities of the University. The University will coordinate with local, state, and federal agencies to address the needs of the campus community.
- 2. WIU will have representation on or make personnel available to the McDonough County Emergency Operations Center (Macomb Campus), the Rock Island County Emergency Operations Center (Quad Cities Campus), and their respective Joint Information Centers (JIC), as well as any Unified Command or Area Command functions.
- 3. Employees and any group included in the plan will be briefed on the entire plan. Training will be provided to staff and others to assist them in their emergency response responsibilities.
- 4. The WIU response to pandemic influenza is a graduated response based on the intensity of events. It is an annex to the WIU Emergency Operations Plan.

- 5. The overall Direction and Control, and coordination of WIU's pandemic response will be accomplished through the staffing of the WIU Emergency Operations Center in accordance with the WIU Emergency Operations Plan.
- 6. WIU will utilize the National Incident Management System (NIMS) to manage the response to pandemic influenza.
- 7. The Pandemic Influenza Preparedness and Response Committee will function as an advisory body to the WIU Incident Command.

Level 0 Activities: Pre-Event Assessment and Planning

- The Pandemic Influenza Preparedness and Response Committee will meet regularly to discuss preparations for each level of response.
- Campus faculty, staff and students will be encouraged to become familiar with the details of the WIU Pandemic Preparedness and Response Plan.
- Once developed, the new WIU Pandemic Preparedness and Response website will be marketed to members of the University community and updates will be posted as needed.
- Educational campaigns on pertinent subjects such as hand hygiene, cough etiquette, flu shots, etc. will be initiated by Beu Health Center.

Level 1 Activities: Intense WIU Planning and Preparation

- Pandemic Preparedness and Response website will be updated as appropriate.
- E-mail alerts will be sent to the campus community via Tele-STARS.
- International Travel Advisories will be initiated for students and faculty abroad.
- All Departments will provide information to staff and students about departmental issues and care and safety of their families.
- Essential staff will be notified of alert status.

Level 2 Activities: WIU Preparing to Suspend Classes and Close the University.

- Information on the Pandemic Preparedness and Response website will be updated as appropriate.
- E-mail alerts will be sent to students, faculty, staff, parents/families, Trustees, State officials, and vendors apprising them of the status of activities on campus and steps being taken by the institution.
- Media will be alerted to the status of activities on campus and steps being taken by the institution.
- All departments will communicate procedures for closing with faculty, staff and students
- All departments will maintain staff phone trees.
- Study Abroad staff and students will be notified of emergency contact information.
- Essential employees will be briefed on communication methods to be used during temporary closure of University.

Level 3 Activities: WIU Suspends Classes and Temporarily Closes Campus

- Information on the Pandemic Preparedness and Response website will be updated as appropriate.
- E-mail alerts will be sent to students, faculty, staff, parents/families, Trustees, State officials, and vendors apprising them of the status of activities on campus and steps being taken by the institution.

- Media will be alerted to the status of activities on campus and steps being taken by the institution.
- Study Abroad will continue to keep students informed of the situation on campus and the institution's response.

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VII. RESPONSE PLAN PHASES

WHO Phase Definition WIU Response Level Criteria

PARTNER AGENCY CONTACT INFORMATION

Illinois Emergency Management Agency

Emergency Hotline (24 hours) and to reach **Illinois Department of Public Health** 800-782-7860 (Illinois only) or 217-782-7860

Illinois Medical Emergency Response Team

1 S. 280 Summit Avenue, Court B-2 OakBrook Terrace, IL 60181 1-866-99-IMERT toll free 630-495-6403 x218 Fax: 630-495-0227

timc@imert.org

McDonough County ESDA

Dan Kreps 309-837-2686

McDonough County Health Department

505 East Jackson Street Macomb, IL 61455 309-837-9951 Fax 309-837-1100

McDonough District Hospital

525 E. Grant Macomb, IL 61455 309-833-4101

Rock Island County Health Department

2112 25th Ave. Rock Island, IL 61201 (309)793-1955 Fax:309-794-7091

U.S. Centers for Disease Control and Prevention (CDC)

Emergency Response Hotline 770-488-7100

SOCIAL DISTANCING AND TEMPORARY CAMPUS CLOSURE

Consistent with *the Guidance for College and Universities* provided by the Department of Health and Human Services and the Centers for Disease Control and Prevention, the WIU plan addresses different outbreak scenarios. The most severe scenario is modeled after the 1918 Pandemic which left WIU campus closed for approximately one month during October and November. Part of the planning process involves identifying criteria that would make it prudent to encourage social distancing, suspend academic programs and close the campus for up to 12 weeks until the rate of transmission would subside.

The decision to increase social distancing measures, including a temporary campus closure rests with the President or his/her designee. Refer to *Declaration of a Campus State of Emergency, WIU Emergency Operations Plan*. The Pandemic Influenza Preparedness and Response Committee will serve as an advising body to the President and the WIU Emergency Management Team. The University will work closely with local and state agencies when making the decision to increase social distancing including temporary campus closure. Due to the nature of pandemic influenza, quarantine will be of little or no value in stemming the spread of illness.

Social Distancing Measures

- Coordinate cancellation of all athletic events with NCAA or other athletic conferences.
- Cancel all public gatherings and WIU sponsored events (orientation, Discover Western, UUB, Recreation Center, club sports, guest speakers, movies, etc.)
- Cancel all WIU related travel.
- Cancel academic programs except alternative (distance, on-line, etc) in some cases.
- Suspend research except that permitted as essential.
- Close residence halls.
- Restrict access to campus except by essential staff performing essential duties.
- Implement Work from Home procedures where possible.
- Maintain 3 feet person-to-person spacing where possible.
- Ghost shift changes separate shifts by 15 minutes.

The following criteria will be used to recommend a temporary campus closure:

- WHO Declaration of Pandemic Phase 6 increased and sustained transmission in the general population.
- First case of pandemic influenza in North America, and specifically the United States.
- High rate of infectivity, morbidity and/or mortality.
- Rate of disease spreading.
- Local, State and/or Federal public health recommendations to increase social distancing.
- Falling class attendance.
- Rising employee absenteeism.
- Other universities or school systems closing

CAMPUS SECURITY AND CONTROLLED ACCESS

WIU's Office of Public Safety will coordinate all aspects of campus security during a pandemic and temporary campus closure including building security, protecting stored supplies and restricting access to campus during a temporary campus closure. Special operations may include campus evacuation, temporary infirmary, temporary housing, POD operations, quarantine, and mass feeding operations.

- 1. OPS will maintain a list of critical functions and tasks by locations, as approved by each Vice-President and the WIU Pandemic Influenza Preparedness and Response Committee.
- 2. OPS will maintain a roster of essential personnel to perform essential functions and tasks as approved by each Vice-President and Human Resources.
- 3. Only essential personnel will be allowed access to campus during a temporary campus closure, and will be required to remain in areas restricted by the campus closure. Essential personnel will be required to wear a visible WIU identification card with a photograph while on University property performing essential tasks. Essential Staff will enter and exit campus through designated access points.
- 4. Visitors to campus will be restricted to approved vendors, cooperating agency representatives, and family members of students leaving campus or those in the temporary infirmary. Visitors must abide by restrictions imposed by OPS.
- 5. Pre-approved Vendors delivering essential supplies and equipment will be required to enter campus through approved access points.
- 6. OPS will assist in transport of ill students if other emergency transport is not available. Personnel transporting will be trained in use

Locations of Critical Operations

Limited access for critical functions/tasks:

- Heating Plant
- Mowbray Hall (OPS and Command Center)
- Morgan Hall (Data Center)
- Olson Hall (temporary housing center)
- Western Hall (temporary infirmary)
- Sherman Hall Basement (telecommunications)
- Sherman Hall Third Floor (University Relations)
- Thompson Hall (West Dining facilities)
- Physical Plant (maintenance and motor pool)
- Beu (medical supply storage)
- Memorial Hall (Communications and ESDA)

Animal Care and Research:

- Waggoner Hall (animal colonies)
- University Farm (animal facilities)
- Currens Hall (research)

STAFFING PLAN DURING A PANDEMIC

During a temporary campus closure due to a pandemic, essential personnel will be needed to conduct critical operations identified in the planning process. Each Dean, Department Chair, Director is responsible to identify critical functions under their jurisdiction, and essential staff positions needed to carry out these functions. WIU's *Policy on Limiting University Operations Because of Emergency Conditions* provides general guidance for staffing under emergency conditions.

1. During a temporary campus closure, only esse

9. Go-West Transit may assist with evacuation to transport students to nearest transportation hub. Drivers will be trained in appropriate PPE and infection control procedures. Passengers with respiratory symptoms will be required to wear a surgical mask during transit. Buses will be equipped with disinfectants, surgical masks, biohazard bags and disposable gloves. After campus is closed, Go-West transportation will coordinate with McDonough County Transit System to temporarily suspend normal operations.

DEPARTMENT PRE-CLOSING CONSIDERATIONS

Pre-Closing tasks:

- 1. Identify any or all mandatory or essential operations, functions, or services to be staffed and maintained by members of your department, by off-campus service providers, and/or by affiliates that must remain partially or fully in operation during a temporary campus closure.
- 2. Identify essential staff members who are responsible for each task, as well as back-ups. Essential staff should be notified in writing of their status, and should be advised of the communications protocol during a closure. Essential staff should be told that they are not to report to work if they are sick and must call in until they are recovered. Essential staff should be offered influenza vaccinations and/or anti-viral medications if available to encourage compliance with this procedure.
- 3. Identify which, if any, work assignments can be completed from home by essential employees during a temporary closure.
- 4. Ensure departmental communication plan is in place and all employees have been notified of this protocol. Employees should update contact information as necessary.

Business and Administrative Operations

- 1. Ensure how current staff will continue to process timecards and approvals and assure sufficient back-up approvers are identified to process timecards and other payroll transactions in the event of a prolonged closure.
- 2. Identify which and how staff will continue to review/approve P-Card transactions during a closure, and which essential staff will be allowed to continue to process transactions.
- 3. Ensure all cash and check receipts are properly deposited prior to closure.
- 4. Identify any service contracts that include terms for services that must be curtailed once a temporary closure is announced.
- 5. Departments that maintain network servers containing essential business databases should determine the best means to continue these IT services.

Adapted with Permission from University of Maryland

STUDY ABROAD AND FOREIGN TRAVEL

The WIU Center for International Studies is responsible for coordination of international programs on campus, including the Office of Study Abroad. Existing University policies and procedures are in place for study abroad including communication protocols, pre-travel counseling, emergency procedures, evacuation, and repatriation. This office will be critical during an influenza pandemic to communicate with students and faculty traveling abroad, and assist in arrangements needed to ensure their safe return.

- 1. Students and faculty traveling abroad are provided with an updated copy of *Outbreak Notice*, *Human Infection with Avian Influenza A (H5N1) Virus Advice for Travelers* from the Centers of Disease Control and Prevention as part of their pre-travel counseling. http://www.cdc.gov/travel/other/avian influenza se asia 2005.htm
- 2. Situation updates of the Avian Flu from the WHO are routinely monitored by Study Abroad staff. http://www.who.int/csr/disease/avian_influenza/updates/en/index.html
- 3. Currently, the WHO does not recommend travel restrictions to areas experiencing outbreaks of highly pathogenic H5N1 virus. The University may, however, exercise the right to suspend official travel to such areas.
- 4. Currently the WHO does not recommend a restriction on screening travelers returning from areas affected by H5N1 Avian influenza. Depending on circumstances, the University may require monitoring of the health of recent travelers, prior to returning to duty or class.
- 5. During a temporary campus closure, students returning from a study abroad will be required to return directly to their homes or alternate living locations, and not to campus.
- 6. Official campus travel abroad for faculty/staff or students will be suspended during an influenza pandemic and temporary campus closure.
- 7. Faculty/Staff and Students already in a Study Abroad program or other official travel program when an influenza pandemic occurs will be contacted by the Center for International Studies for further action.

International students unable to return home or to alternate living locations during a temporary campus closure will be allowed to remain on campus in temporary housing until travel arrangements are completed. See Appendix: Housing.

EMERGENCY PLAN FOR DINING FACILITIES

Sodexo and Housing/Dining will make every effort to provide adequate safe food and water during a temporary campus closure. Supply chain disruptions are anticipated, and plans are in place for alternative food vendors and bottled water sources. Despite planning efforts, staffing and food supply issues may cause interruptions in services.

- 1. Upon the announcement of a temporary campus closure, Dining services will begin the process of converting to emergency procedures. Once campus is closed, food service will be restricted to Thompson Hall West Dining.
- 2. The availability of food items will determine the menu, with perishable foods to be utilized first. Food choices will be limited, and dependent upon available supplies. Efforts will be made to observe special diet requirements (i.e. non-meat entrée).
- 3. Food will be portioned into carry out containers with disposable utensils. Congregate dining will not be permitted in order to increase social distancing.
- 4. Each person will be limited to one meal and beverage during each meal; unlimited portions will not be available.
- 5. Each person will swipe their own meal card using a portable card reader; cash will not be accepted.
- 6. Sodexo will work with Health Center staff to provide meals for ill students in a temporary infirmary.
- 7. WIU and Sodexo will work together to provide food and water to assist community response efforts if needed.
- 8. Essential staff may obtain food from the dining facility during a temporary campus closure, but are encouraged to bring food and beverages from home to increase social distancing.

INFECTION CONTROL DURING A PANDEMIC

Infection Control includes the use of personal protective equipment, cough etiquette, hand hygiene, and environmental controls designed to reduce the risk of transmission of infection. These recommendations are adapted from the basic guidance found in the *HHS Pandemic Influenza Plan Supplement 4: Infection Control* and are subject to change as a pandemic evolves and more information becomes available. Refer to at http://www.hhs.gov/pandemicflu/plan/sup4.html for updated information.

Influenza is mainly transmitted person to person through close contact (large respiratory droplets, direct contact or close by exposure to aerosols). For planning purposes, the University will focus on standard and droplet precautions as the standard for personal protective equipment (PPE).

The addition of airborne precautions, including respiratory protection (N95 filtering face piece respirator or other appropriate particulate respirator), may be considered for strains of influenza exhibiting increased transmissibility, during initial stages of an outbreak of an emerging or novel strain of influenza, and as determined by other factors such as vaccination/immune status of personnel and availability of antivirals. As the epidemiologic characteristics of the pandemic virus are more clearly defined, CDC will provide updated infection control guidance, as needed.

Basic Infection Control Measures

- The University will coordinate with local hospital and health care agencies for isolation of ill persons.
- If needed, the University will establish an infirmary to care for ill persons that cannot be accommodated at the local hospital or health care facility and are too ill to be at home (see Appendix: Infirmary).
- The University will promote respiratory hygiene/cough etiquette.
- The University will promote hand hygiene.

Infection Control for Patient Care

- Wear a surgical or procedure mask for close contact with infectious patients.
- Use contact and airborne precautions, including the use of N95 respirators, when appropriate.
- Wear gloves (gown if necessary) for contact with respiratory secretions.
- Perform hand hygiene after contact with infectious patients.
- Instruct persons who have "flu-like" symptoms to use respiratory hygiene/cough etiquette
- Promote use of masks by symptomatic persons in common areas (e.g., waiting rooms in physician offices) or when being transported (e.g., in emergency vehicles).

PERSONNEL PROTECTIVE EQUIPMENT (PPE) FOR STANDARD AND DROPLET PRECAUTIONS

PPE is used to prevent direct contact with the pandemic influenza virus. PPE that may be used to provide care includes surgical or procedure ma

no data upon which to base a recommendation for reusing an isolation gown on the same patient. To avoid possible contamination, it is prudent to limit this practice.

Goggles or face shield: In general, wearing goggles or a face shield for routine contact with patients with pandemic influenza is not necessary. If sprays or splatter of infectious material is likely, goggles or a face shield should be worn as recommended for standard precautions.

PPE for aerosol-generating procedures: During procedures that may generate increased small-particle aerosols of respiratory secretions (e.g., endotracheal intubation, nebulizer treatment, bronchoscopy, suctioning), healthcare personnel should wear gloves, gown, face/eye protection, and a N95 respirator or other appropriate particulate respirator. Respirators will be used within the context of the WIU Respiratory Protection Program that includes fit-testing, medical clearance, and training. Essential personnel will be rostered for just-in-time fit testing as the situation unfolds.

CLEANING AND DISINFECTION OF ENVIRONMENTAL SURFACES

Disposal of solid waste

Standard precautions are recommended for disposal of solid waste (medical and non-medical) that might be contaminated with a pandemic influenza virus:

- Contain and dispose of contaminated medical waste in accordance with facility-specific procedures and/or local or state regulations for handling and disposal of medical waste, including used needles and other sharps, and non-medical waste.
- Discard as routine waste used patient-care supplies that are not likely to be contaminated (e.g., paper wrappers).
- Wear disposable gloves when handling waste. Perform hand hygiene after removal of gloves.

Linen and laundry

Standard precautions are recommended for linen and laundry that might be contaminated with respiratory secretions from patients with pandemic influenza:

• Place soiled linen directly inndle laundry that might be contaminated with x

Dishes and eating utensils

Standard precautions are recommended for handling dishes and eating utensils used by a patient with known or possible pandemic influenza:

- Wash reusable dishes and utensils in a dishwasher with recommended water temperature
- Disposable dishes and utensils (e.g., used in an alternative care site set-up for large numbers of patients) should be discarded with other general waste.
- Wear gloves when handling patient trays, dishes, and utensils.

Patient-care equipment

Follow standard practices for handling and repro

Cleaning and disinfection after patient discharge or transfer

- Clean and disinfect all surfaces that were in contact with the patient or might have become contaminated during patient care. No special treatment is necessary for window curtains, ceilings, and walls unless there is evidence of visible soiling.
- Do not spray (i.e., fog) occupied or unoccupied rooms with disinfectant. This is a potentially dangerous practice that has no proven disease control benefit.

INFIRMARY

Depending on the severity and circumstances of a pandemic, it may be necessary to establish an on-site infirmary at Western Illinois University to care for ill students, staff and even members of the general public who are too ill to care for themselves.

1. Beu Chief of Staff will be the primary contact for the decision to establish a temporary infirmary on campus. This decision will be based on several factors including: the severity of the pandemic, the numbers of ill persons, the number of medical and support staff available to provide 24 hour care, the availability of beds at McDonough District Hospital, and whether or not a temporary community based facility has been established. The Beu Chief of Staff will consult with McDonough District Hospital Chief of Staff to determine if and when a temporary

- 7. Signs will be posted on the entrances to the infirmary as to restricted access, visiting hours, and requirements for PPE.
- 8. Beu Health Center will disseminate information to students in temporary housing, as well as on-site housing staff regarding the signs and symptoms of pandemic influenza. Students who become ill while residing in temporary housing w

MONITORING AND CARE FOR ILL PERSONS

Keep a care log. Record the following information about the ill person at least once each day or more often as symptoms change, along with the date and time.

- o Check the patient's temperature
- o Check the patient's skin for color

Fluids & Nutrition

š If the patient is <u>not</u> vomiting, offer small amounts of fluids frequently to prevent dehydration, even if he or she does not feel thirsty. If the ill person is not eating solid foods, include fluids that contain sugars and salts, such as broth or soups, sports drinks, like Gatorade® (diluted half and half with water), Pedialyte® or Lytren® (undiluted), ginger ale and other sodas, but <u>not</u> diet drinks. Regular urination is a sign of good hydration.

Recommended minimum daily fluid intake, if not eating solid food:

- o Young children 1-1/2 oz. per pound of body weight per day
- o (Example: A 20 lb. child needs approximately 30 oz. fluid per day)
- \circ Older children and adults 1-1/2 to 2-1/2 quarts per day
- if the patient is vomiting, do not give any fluid or food by mouth for at least 1 hour. Let the stomach rest. Next, offer a clear fluid, like water, in very small amounts. Start with 1 teaspoon to 1 tablespoon of clear fluid every 10 minutes. If the patient vomits, let the stomach rest again for an hour. Again, try to give small frequent amounts of clear fluid. When there is no vomiting, gradually increase the amount of fluid offered and use fluids that contain sugars and salts. After 6-8 hours of a liquid diet without vomiting, add solid food that is easy to digest, such as saltine crackers, soup, mashed potatoes or rice. Gradually return to a regular diet.
- š Babies who are breast-fed and vomiting can continue to nurse. Feed smaller amounts more often by breast-feeding on only one breast for 4-5 minutes every 30-60 minutes or by offering teaspoonfuls of Pedialyte® or Lytren® every 10 minutes.
- š Make sure the patient avoids drinking alcohol and using tobacco.
- š Watch for signs of dehydration: Weakness or unresponsiveness
 - o Decreased saliva/dry mouth and tongue
 - Skin tenting: check this by picking up layers of skin between your thumb and forefinger and gently pinching for 1 second. Normally, the skin will flatten out into to its usual shape right away. If patient is dehydrated, the skin will "tent" or take 2 or more seconds to flatten out. This is best checked on the belly skin of a child and on the upper chest of an adult.
 - Decreased output of urine, which becomes dark in color from concentration. Ill persons who are getting enough fluids should urinate at least every 8-12 hours.
- š If the ill person is dehydrated, give sips or spoonfuls of fluids frequently over a 4-hour period. Watch for an increase in urination, a lighter color of the urine and improvement in the patient's overall condition. These are signs that the increased

fluids are working.

o Children under 5 years: Give 1 oun

COUNSELING

Although little data is available on the mental health impacts of outbreaks of disease, it is anticipated that an influenza pandemic would generate increased stress in family and work environments, including traumatic stress, especially in response personnel. Behavioral risk factors of alcohol and drug use may increase under increased stress. Po

REFERENCED MATERIAL

Blueprint for Pandemic Flu Preparedness planning for Colleges and Universities, Gallagher Higher Education Practice Group, Jan 2006

Campus Housing Guidelines for Pandemic Planning, ACUHO-I, Sept 29, 2006

Colleges and Universities Pandemic Influenza Planning Checklist, Dept of Health and Human Services and the Centers for Disease Control and Prevention, Version 2.2, March 20, 2006

Guidelines for Pandemic Planning, American College Health Association Guidelines, July 7, 2006

HHS Pandemic Influenza Plan, November 2005

http://www.umd.edu/emergencypreparedness/pandemic_flu/

McDonough County Health Department's Pandemic Influenza Plan, August 1, 2006

Mental Health and Behavioral Guidelines for Response to a Pandemic Flu Outbreak, Center for the Study of Traumatic Stress and American Public Health Association

Pandemic Influenza Preparedness and Response Plan, State of Illinois, Version 2.04 (final draft), March 17, 2006

Report on the Estimated Impact of the Next Influenza Pandemic on Illinois, Illinois Department of Public Health, April 10, 2006

www.pandemicflu.gov