



COLLEGE OF  
**LICENSED PRACTICAL NURSES**  
OF ALBERTA

*PANDEMIC LEARNING RESOURCE -*  
OCTOBER 30, 2009



## TABLE OF CONTENTS

<b>INTRODUCTION</b> .....	<b>1</b>
<b>BACKGROUND</b> .....	<b>1</b>
<i>What is Influenza</i> .....	2
<i>How is influenza spread?</i> .....	2
<i>How serious is influenza?</i> .....	3
<i>What is pandemic influenza?</i> .....	4
<i>What is avian influenza?</i> .....	4
<i>What is H1N1?</i> .....	4
<i>Is there a vaccine available for protection against pandemic Influenza?</i> .....	4
<i>Will the annual flu shot provide protection from pandemic influenza?</i> .....	5
<i>What is the difference between a vaccine and an antiviral?</i> .....	5
<b>Pandemic Influenza: Pandemic Stage</b> .....	<b>6</b>
<i>Pandemic Stage: Assumptions</i> .....	6
<i>Pandemic Stage: General Policies</i> .....	7
<i>Implement on-going communication strategies.</i> .....	7
<i>Information for Health Care Workers</i> .....	7
<i>Continue to support and encourage influenza prevention methods such as hand washing, self-care, and respiratory etiquette</i> .....	7
<i>Ways to Prevent the Spread of Influenza</i> .....	8
<i>Self-Care Includes</i> .....	9
<i>Recognizing Influenza Symptoms</i> .....	9
<i>Other Symptoms can Include</i> .....	9
<i>General Self-Care Measures When Ill</i> .....	10
<i>Encourage staff and clients to be immunized with pandemic influenza vaccine when available as a preventive measure</i> .....	10
<i>Encourage social distancing</i> .....	10
<i>Mental health issues should also be addressed during and after a pandemic</i> .....	11
<i>Encourage clients to see their physician or nurse practitioner immediately if the client or someone in their care has any one of the following symptoms:</i> .....	11
<i>When to access medical care?</i> .....	12
<b>Post-Pandemic Stage</b> .....	<b>13</b>
<i>Be prepared to help clients deal with mental health issues and health conditions resulting from the pandemic</i> .....	13
<i>Agencies should be prepared to help clients with the grieving process</i> .....	13
<i>Resumption to normalcy</i> .....	13

**Glossary of Terms..... 15**  
**References ..... 16**  
**Appendix A- Influenza Planning Checklist for Families/Individuals ..... 17**  
**Appendix B – Pandemic Related Website..... 19**

## INTRODUCTION

The College of Licensed Practical Nurses of Alberta is a self-governing body designated under the Health Professions Act. Provincial legislation requires all active Licensed Practical Nurses to be registered with the College. The College's primary responsibility is to ensure its practitioners provide safe, competent, and ethical care to the citizens of Alberta. CLPNA regulates the profession by setting entry-to-practice requirements, establishing, promoting and enforcing standards of practice and conduct, and enhancing the care provided by members of the profession through the Continuing Competency Program.

The purpose of this resource is to inform CLPNA members about the risks of an influenza pandemic and to provide generic strategies and guidelines. This resource aligns with planning underway provincially, nationally and internationally, but it does not detail regional, provincial, or federal responsibilities, which are addressed in each of their own respective jurisdictional plans. The purpose of this learning resource is to inform and educate, and is not intended to provide legal advice.

## BACKGROUND

Population health is influenced by many factors. It is important to understand that healthy behaviors are strongly impacted by social, economic, and physical environment where Canadians live, work, learn, and play. Other factors include income and social status, social support networks, education, employment and working conditions, safe and clean physical environments, biology and genetic make-up, personal health practices and coping skills, childhood development and health services (Federal, Provincial and Territorial Advisory Committee on Population Health, 1994). To that end it is vital that any health-related planning address each of these determinants of health, either implicitly or explicitly. In addition, in the seminal document, *Achieving Health For All: A framework for health promotion* (2001), Health Canada acknowledged that disadvantaged groups have significantly lower life expectancy, poorer health and a higher prevalence of disability than the average Canadian. Therefore it is imperative that any new health initiative address the needs of the vulnerable within our population.

**Globally, there have been three pandemics within the last century that have affected Canadians:**

- Spanish Flu (1918 to 1919), affected healthy young adults 20 to 50 years old
- Asian Flu (1957 to 1958), affected the very young and the very old
- Hong Kong Flu (1968 to 1969), affected the very old and those with underlying health conditions

Based on the last two pandemics, it is estimated the next pandemic will arrive in Canada within three months after it emerges in another part of the world, with the understanding that this timeframe could be shorter due to the impact of air travel (Alberta Pandemic Influenza Plan for the Health System, 2008). The first peak of illness in Canada will most likely occur within two to four months after the virus arrives in Canada, and the first peak of mortality will be approximately one month after the peak in illness (Alberta Pandemic Influenza Plan for the Health System, 2008).

A pandemic usually has two or more waves and the space between waves may vary. More than one wave can occur within a 12 month period but there could be up to 12 months between the start of the first wave and the start of the second wave. In a local community, a pandemic wave of illness will generally last six to eight weeks (Alberta Pandemic Influenza Plan for the Health System, 2008).

During an influenza pandemic it is predicted that the majority of Albertans will be infected over the course of the pandemic, with 15-35 percent of the population becoming clinically ill (Alberta Pandemic Influenza Plan for the Health

System, 2008). The majority of illnesses and deaths will tend to occur over a six to eight week period. As a consequence, the number of persons visiting emergency rooms and hospitalizations will rise well beyond current capacity (BC Centre for Disease Control, 2005). Increased absenteeism (approximately 20-25 percent) will be expected as a result of personal illness, care-giving requirements, and possible fear of exposure. Effective, preventive, and therapeutic resources will most likely be in short supply and essential community services are likely to be disrupted (BC Centre for Disease Control, 2005).

## WHAT IS INFLUENZA

Influenza is an infection of the respiratory tract caused by one of three virus types:

- **Influenza A**, which causes the most severe and widespread disease, infects mammals (including humans, pigs and horses) and birds
- **Influenza B**, which infects only humans
- **Influenza C**, which is mild and rare

In North America, influenza usually affects people between November and April.

## HOW IS INFLUENZA SPREAD?

Influenza virus passes from person to person by droplets when an infected person coughs, sneezes, or talks. Viruses can live on hard surfaces for 1-2 days, on cloth and tissue paper for 8-12 hours, and on your hands for 5 minutes.

Droplets can enter the body through the eyes, nose, or mouth. Virus droplets can travel 1-2 metres in the air.

People develop symptoms of influenza one to three days after becoming infected. They are contagious from the day BEFORE they have the first symptoms until five days after the symptoms start.

### **Influenza Symptoms - Primary Symptoms Include:**

- Sudden fever over 38.5°C (101.3°F)\*
- Dry cough
- Aching body, especially head, lower back and legs
- Extreme weakness/tiredness, not wanting to get out of bed

### **Other common symptoms can include:**

- Chills
- Aching behind the eyes
- Loss of appetite
- Sore throat
- Runny/stuffy nose

**Sometimes symptoms can include:**

- Nausea
- Vomiting
- Diarrhea

*\*For people older than 75 years, the temperature may be lower, e.g. 37.2°C (99°F). They may also experience vomiting, diarrhea or abdominal pain.*

Usually fever resolves in three to five days and the person experiences a general sense of improvement. Tiredness and cough can persist for several weeks to a month.

<b>Influenza symptoms are distinct from those of a cold or gastroenteritis</b>			
<b>Identifying influenza, a cold or stomach flu Symptoms / Description</b>	<b>Influenza</b>	<b>Common Cold</b>	<b>Stomach Flu</b>
Fever	Usually high	Sometimes	Rare
Chills, aches, pain	Frequent	Slight	Common
Loss of appetite	Sometimes	Sometimes	Common
Cough	Usual	Sometimes	Rare
Sore throat	Sometimes	Sometimes	Rare
Sniffles or sneezes	Sometimes	Common	Rare
Involves whole body	Often	Never	Stomach/ bowel only
Symptoms appear quickly	Always	More gradual	Fairly quickly
Extreme tiredness	Common	Rare	Sometimes
Complications	Pneumonia; can be life threatening	Sinus infection, Ear infection	Dehydration

### HOW SERIOUS IS INFLUENZA?

Certain groups are at risk to develop serious complications, such as pneumonia, which may even result in death. These groups include:

- Children less than two years and seniors, because they have weaker immune systems
- Those whose immune systems are compromised by disease or medication/treatment

- Those with certain chronic illnesses, such as heart or lung disease

## WHAT IS PANDEMIC INFLUENZA?

Of the three influenza virus types (A, B and C), only type A causes pandemics. It infects birds, humans and other mammals (including pigs and horses), i.e. H1N1, H5N1, etc. Three to four times each century the influenza type A virus forms a completely new strain. Everyone is at risk of infection with the new strain.

If this new virus spreads easily from person-to-person, it could quickly travel around the world and cause serious illness and death for millions of people. This global epidemic is called influenza pandemic. A pandemic differs from the influenza we see every year in that larger numbers of people are infected, the illness is more severe, and more people die.

## WHAT IS AVIAN INFLUENZA?

Avian influenza, or “bird flu”, is a contagious disease of animals caused by viruses that normally infect only birds. Avian influenza viruses are highly species-specific, but have, on rare occasions, crossed the species barrier to infect humans.

## WHAT IS H1N1?

It is a new strain of the influenza A virus (2009). The World Health Organization (WHO) has declared it a pandemic virus. It contains a combination of genes from pigs (swine), bird (avian) and human influenza viruses that have never previously been detected in humans and swine. Most people have no immunity to protect them from getting sick with this new virus. This virus is being detected in humans in many countries around the world and is spreading from person to person in communities. The H1N1 flu virus is contagious and is spread the same way as regular seasonal influenza. This happens when an infected person coughs or sneezes and their germs enter the nose, eyes, or throat of another person. The germs can also rest on hard surfaces like counters and doorknobs, and can be picked up on hands and transmitted to the respiratory system when someone touches their mouth and/or nose. It is not possible to catch it by eating pork or pork products or through blood transfusions.

## IS THERE A VACCINE AVAILABLE FOR PROTECTION AGAINST PANDEMIC INFLUENZA?

Canada has is one of the few countries in the world prepared to have a vaccine manufacturer develop and supply a pandemic influenza vaccine as soon as a new strain is identified. Under a 10-year contract signed in 2001 between the Government of Canada and ID Biomedical (now GlaxoSmithKline Biologicals), the company is able to produce enough vaccine for all Canadians in the event of an influenza pandemic.

The vaccine for H1N1 is available through Alberta Public Health and dates of clinics and locations can be found online at <http://www.health.alberta.ca/>. You may also want to see your physician or local pharmacist.

## WILL THE ANNUAL FLU SHOT PROVIDE PROTECTION FROM PANDEMIC INFLUENZA?

No. The annual flu shot only covers the strains of human influenza that are expected to be in circulation during that year's flu season. While getting a flu shot each year is the most effective way to avoid getting seasonal flu, it will not provide protection from any new influenza strain that emerges to create a pandemic.

## WHAT IS THE DIFFERENCE BETWEEN A VACCINE AND AN ANTIVIRAL?

When you get a vaccine against an influenza virus (usually in the form of an injection or “shot”), it introduces a virus to your body that is either dead or in a weakened state and is harmless. Your body quickly produces antibodies against the vaccine virus. These antibodies provide you with immunity against the virus for about four to six months. If you are exposed to the influenza virus during that time, the antibodies you have created will either prevent you from getting sick or will help reduce the severity of your illness.

Unlike vaccines, antivirals do not stop you from getting sick by providing immunity. An antiviral is a medicine that you take by swallowing a pill or liquid, or by breathing it in. The medicine works by either destroying the virus or interfering with its ability to grow and reproduce. It can be given to patients when they are sick to reduce symptoms, to shorten the length of illness and to minimize serious complications.

## PANDEMIC INFLUENZA: PANDEMIC STAGE

The severity of an influenza pandemic is not predictable. It may be very mild, moderate or severe. Disruptions may last for up to three months or more. To date, health regions have undertaken considerable pandemic planning.

Agencies need to think about maintaining operations while minimizing influenza transmission to their staff and service users. Decisions will focus on issues such as:

Reducing services and/or closing an agency.

- Changes in staffing levels
- Multiple ill service users
- Possible disruptions in supplies, utilities, and agency support systems (i.e., banking, other organizations)
- An overwhelmed health-care system
- Changes at a societal level (i.e., cancellation of events where people gather –church)
- Potentially more deaths than usual

## PANDEMIC STAGE: ASSUMPTIONS

The impact of pandemic influenza is unpredictable in timing and severity. What is known is that the CLPNA and our members will not be immune to its effects. The College is prepared to maintain all critical regulatory-focused responsibilities during periods of increased demand from its stakeholders and high absenteeism amongst College staff. Depending on its severity not all College functions may be operational during the pandemic.

According to the Public Health Agency of Canada, the anticipated health impacts of a pandemic in Canada are:

- Up to 70 percent of the population could become infected, but only between 15 and 35 percent of the population will become “clinically ill” – which means ill enough to miss work for at least half a day
- For a pandemic of mild to moderate severity, up to 50 percent of the clinically ill will seek outpatient care, 1 percent of the clinically ill will be hospitalized and recover, and 0.4 percent of the clinically ill will die
- Most individuals who recover from illness caused by the pandemic strain will no longer be at risk of infection by that strain
- If the pandemic causes illness in 35 percent of the population, businesses should expect up to 25 percent of their staff to be away from work in the peak two weeks. Some will be ill, and others will be caring for relatives and friends or afraid to go to work. There may also be school closures and other pandemic-related public health measures that affect the work force

## PANDEMIC STAGE: GENERAL POLICIES

These policies take into consideration that pre-pandemic planning has occurred. Upon notification by the Medical Officer of Health that an influenza pandemic has begun, implement your organization's pandemic plan(s).

- Where possible, attempt to maintain regular office hours and services
- Activate partnerships and support plans with other agencies and resources
- As the emergency situation continues or escalates, implement reductions or temporary cancellation of services on a priority level
- As staff absenteeism increases and resources decrease, prepare for potential closure as per pandemic planning

## IMPLEMENT ON-GOING COMMUNICATION STRATEGIES.

- Monitor radio, television and Internet for updated information
- Use other communication methods: cell phones, land lines, e-mail, flyers etc. as previously planned

## INFORMATION FOR HEALTH CARE WORKERS

- An influenza pandemic will place great stress on health service. The health care system is expected to be overwhelmed by demand for urgent care. Higher numbers of people than normal will seek care for influenza and its complications. This will likely result in service delays. As well, some services may not be available
- Alberta Employment & Immigration has created a document outlining employer's responsibilities and rights during a pandemic [http://employment.alberta.ca/documents/WHS/WHS-PUB\\_bp002.pdf](http://employment.alberta.ca/documents/WHS/WHS-PUB_bp002.pdf).
- Adherence to routine infection prevention and control practices and additional precautions will be essential to prevent transmission of influenza and other infectious diseases with or without the availability of vaccine or anti-viral medications to prevent or treat symptoms. Infection prevention and control and occupational health & safety guidelines for pandemic influenza will be posted on the [www.albertahealthservices.ca](http://www.albertahealthservices.ca) website
- CLPNA also expects nurses to keep informed about pandemic plans and public health communication systems. See Appendix D for website links

## CONTINUE TO SUPPORT AND ENCOURAGE INFLUENZA PREVENTION METHODS SUCH AS HAND WASHING, SELF-CARE, AND RESPIRATORY ETIQUETTE

This is when importance of pandemic education around self-care and staying well will be evident. Continue to provide information on caring for the sick and elderly. Next to immunization, hand washing is the best way to prevent influenza.

### **Wash your hands ...before:**

- Handling or eating food or feeding others
- Brushing or flossing teeth
- Inserting or removing contact lenses

### **Wash your hand ...after:**

- Having any contact with a person who has influenza or if you've been in their immediate environment
- Treating wounds or cuts
- Going to the toilet or changing a diaper
- Blowing your nose or wiping a child's nose
- Coughing or sneezing
- Handling garbage

### **How to Wash Hands**

- Use regular soap. Antibacterial soap is not necessary as it can eliminate "good" bacteria and lead to bacterial resistance
- Rub hands vigorously together for at least 15 seconds covering all surfaces
- Rinse under running water
- Dry with a clean or disposable towel
- If using a public restroom, use a disposable towel (if available) to turn off the faucet to avoid further contact with the tap
- Alcohol hand rubs containing 60-95 percent alcohol are effective
- Apply a nickel size amount of the product to open palms
- Rub into hands covering all surfaces, including the front and back of hands, in between fingers, around the nails and cuticles, thumbs and wrists

### **Respiratory etiquette – "Cover your Cough"**

- Throw away tissues after wiping your nose
- Cover your nose and mouth when sneezing or coughing
- Wash hands after coughing, sneezing or using tissues
- Keep your fingers away from your eyes, nose and mouth

### **Wearing Masks**

- There is no evidence that the use of masks in general public settings will be protective when the virus is circulating widely in the community (Canadian Pandemic Influenza Plan, Dec. 2006)

## **WAYS TO PREVENT THE SPREAD OF INFLUENZA**

- Avoid crowds during influenza season
- Visit those who have influenza only if necessary. If visiting is unavoidable, stand more than one metre (three feet) away from them whenever possible

- Keep personal items separate if a household member has influenza. Clean surfaces often with a detergent cleanser
- Do not share personal items that contact bodily fluids, i.e., drinks, cigarettes, etc.

#### SELF-CARE INCLUDES

- Staying well
- Drink plenty of water
- Don't smoke. Avoid second hand smoke
- Exercise regularly
- Take a multivitamin daily
- Decrease stress, stay optimistic and be socially active
- Set and recognize your limits when taking care of others

#### RECOGNIZING INFLUENZA SYMPTOMS

- Sudden fever of 38°C (100.4°F) or higher
- Dry cough
- Aching body, especially head, lower back and legs
- Extreme weakness and tiredness

#### OTHER SYMPTOMS CAN INCLUDE

- Chills
- Aching behind the eyes
- Loss of appetite
- Sore throat
- Runny or stuffy nose
- Nausea, vomiting, diarrhea

## GENERAL SELF-CARE MEASURES WHEN ILL

- Rest
- Avoid contact with others while contagious (five days) if possible
- Drink extra fluids
- Gargle with warm salt water
- Use throat lozenges, saline nose drops and a clean humidifier
- Don't smoke. Avoid second hand smoke
- Talk to others about concerns and ask for help if needed. Keeping in touch with others can help with feelings of aloneness when sick
- Treat symptoms with over-the-counter (non-prescription) medication. Pay careful attention to all guidelines. Talk to your health-care provider about conditions when you should not use the remedy, what products to use, dosage and any possible side effects

## ENCOURAGE STAFF AND CLIENTS TO BE IMMUNIZED WITH PANDEMIC INFLUENZA VACCINE WHEN AVAILABLE AS A PREVENTIVE MEASURE

- Vaccines are available through Alberta Public Health and the announcement of the dates of clinics and locations can be found online at <http://www.health.alberta.ca/>. You may also want to see your physician or local pharmacist
- Antivirals are used for treatment of persons who come to a designated health-care facility within 48 hours of the onset of symptoms

## ENCOURAGE SOCIAL DISTANCING

- Counsel clients to avoid crowds during the pandemic
- Visit those who have influenza only if necessary. If visiting is unavoidable, stand more than one metre (three feet) away from them whenever possible
- If a household member or close living companion has influenza, keep their personal items separate (e.g. toothbrush, towel). Clean surfaces around them frequently with detergent cleanser
- Do not share personal items such as drinks, cigarettes, etc
- Social distancing is different from isolation. Coming together for companionship, prayer and support is important, but should be done while keeping the above precautions in mind

## MENTAL HEALTH ISSUES SHOULD ALSO BE ADDRESSED DURING AND AFTER A PANDEMIC

- It is not unusual for people to feel anxious or fearful because of traumatic events such as an influenza pandemic. Dealing with stress and feelings of isolation and depression is critical as these issues can lead to greater problems. In the event of a severe pandemic, individuals will likely be dealing with the deaths of loved ones
- The best action to take is to follow advice provided by public health officials. They are doing everything possible to contain and treat the disease
- Encourage staff and clients to talk about their feelings with someone they trust

## ENCOURAGE CLIENTS TO SEE THEIR PHYSICIAN OR NURSE PRACTITIONER IMMEDIATELY IF THE CLIENT OR SOMEONE IN THEIR CARE HAS ANY ONE OF THE FOLLOWING SYMPTOMS:

- Shortness of breath while resting or doing very little
- Difficult or painful breathing
- Coughing up bloody spit/phlegm
- Wheezing
- Chest pain
- Fever for three to four days without improvement
- Feeling better, then suddenly having a high fever or becoming ill again
- Extreme drowsiness and difficulty awakening
- Disorientation or confusion
- Severe earache
- Sudden inability to function in a normally independent elderly person
- Constant vomiting, especially in an elderly person
- Adults who have heart or lung disease or any other chronic condition that requires regular medical attention
- Adults who are frail and have an illness or are on treatments that suppress the immune system

*(Adapted from the Influenza Self-Care Strategy with permission from Alberta Health and Wellness)*

## WHEN TO ACCESS MEDICAL CARE?

By providing information on when to seek medical care will reduce the burden on the health system.

Call Health Link Alberta, if you have questions or concerns. Health Link Alberta is a 24 hour service that provides highly trained registered nurses who will offer advice and information about health symptoms and concerns.

Inform clients that they may be asked for their name and some personal information when they call. This information is collected to improve the services of Health Link Alberta and may or may not be requested during a pandemic.

1 (866) 408 5465

Calgary (403) 943 LINK (5465)

Edmonton (780) 408 LINK (5465)

## POST-PANDEMIC STAGE

This policy and procedure section refers to strategies for successfully addressing the aftercare measures needed following an influenza pandemic. Post-pandemic phase begins when the number of cases of influenza returns to pre-pandemic levels. This stage deals with assessing the affect of the pandemic and evaluating the pandemic response.

## BE PREPARED TO HELP CLIENTS DEAL WITH MENTAL HEALTH ISSUES AND HEALTH CONDITIONS RESULTING FROM THE PANDEMIC

- Post-traumatic stress disorder can arise after a person experiences a traumatic event such as a loss of a loved one or sudden changes in their daily living

## AGENCIES SHOULD BE PREPARED TO HELP CLIENTS WITH THE GRIEVING PROCESS

- Provide information on funeral or memorial services
- Community memorial
- Agency-specific
- Ethno-cultural considerations
- Dealing with loss. See Appendix E

## RESUMPTION TO NORMALCY

Keeping current with community and regional trends, and outcomes as well as re-establishing a number of contacts for both the agency and its clients. Review and update links to:

- Other agencies (social workers, outreach workers)
- Banks, accountants
- Lawyers, probation officers
- Physicians, community nurses
- Employers
- Building repairs, maintenance
- Staff
- Friends and family

- Community members
- Continue to support updated immunization, hand washing, and other disease prevention strategies such as personal health practices. Establish an evaluation process to look at lessons learned for future emergency situations

## GLOSSARY OF TERMS

**Epidemic:** An outbreak of infection that spreads rapidly and affects many individuals in a given area or population at the same time.

**H1N1:** A strain of influenza Type A virus that appeared in 2009 in swine and has infected humans. It contains a combination of genes from pigs (swine), bird (avian) and human influenza viruses that have never previously been detected in humans and swine.

**Health-Care Workers (Pandemic):** Health-care workers are those persons whose functions are essential to the provision patient care. They include health professionals, trainees, and retirees, non-professionals, and volunteers involved in direct patient care in designated health-care facilities or services.

**High-Risk Groups:** Those groups in which epidemiologic evidence indicates there is an increased risk of contracting a disease.

**Pandemic:** Referring to an epidemic disease of widespread prevalence around the globe.

**Symptoms:** Any perceptible, subjective change in the body or its functions that indicates disease or phases of disease, as reported by the patient.

**Vaccine:** A substance that contains antigenic components from an infectious organism. By stimulating an immune response (but not the disease), it protects against subsequent infection by that organism.

**Virus:** A group of infectious agents characterized by their inability to reproduce outside of a living host cell. Viruses may upset the host cells' normal functions, causing the cell to behave in a manner determined by the virus. A virus cannot be treated with antibiotics.

[Source: Public Health Agency of Canada. (Reference from the web July 23, 2006). [www.phac-aspc.gc.ca/influenza/pandemic\\_e.html](http://www.phac-aspc.gc.ca/influenza/pandemic_e.html)].

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## APPENDIX A- INFLUENZA PLANNING CHECKLIST FOR FAMILIES/INDIVIDUALS

**(Place a checkmark once task is complete)** Plan for a Pandemic

Completed	Action
	Store a <i>six week to three-month supply</i> of non-perishable food and bottled water. During a pandemic it will be important for you to have extra supplies on hand, in the event you cannot get to a store or if stores are out of supplies. This can be useful in other types of emergencies, such as power outages and disasters.
	Store an extra supply of your regular prescription drugs if possible. Talk with your doctor about this.
	Have non-prescription drugs and other health supplies on hand, including pain medication, stomach medications, cough and cold medicines, fluids and electrolytes (e.g. Gatorade™, Pedialyte™) and vitamins.
	Talk with family members and loved ones about how they would be cared for if they got sick, or what will be needed to care for them in your home.
	Teach children to wash hands frequently and properly with soap and water, and model that behaviour.
	Teach children to cover coughs and sneezes with tissues and to wash hands afterwards, and be sure to model that behaviour.
	Teach children to stay away from others as much as possible if they are sick. Stay home from work and school if and when you think you are sick.

### Items to have on hand for an extended stay at home

#### Examples of non-perishables food items :

Ready-to-eat canned meats, fish, fruits, vegetables, beans, and soups. Have a manual can opener, not electric.

Protein bars or fruit bars.

Peanut butter or nuts.

Dried fruit.

Crackers.

Canned juices.

Bottled water.

Canned or jarred baby food and formula.

Canned evaporated milk and/or skim milk powder.

Pet food.

#### Examples of medical and health supplies:

Prescribed medical supplies i.e. glucose and blood-pressure monitoring equipment.

Prescribed medications

Medicines for fever, such as acetaminophen (Tylenol™) or ibuprofen (Motrin™).

Thermometer.

Anti-diarrhea medication.
Vitamins.
Fluids with electrolytes (Ask your pharmacist for suggestions, e.g. Gatorade™, Pedialyte™).
Cleansing agent (disinfectant).
Soap (not antibacterial).
Alcohol-based (60-95 percent) hand wash.
<b>Examples of emergency supplies:</b>
Flashlight and batteries.
Portable radio and batteries.
Garbage bags.
Tissues, toilet paper, disposable diapers.
Soap.
Water.
Alcohol-based (60-95 percent) hand wash.

## APPENDIX B – PANDEMIC RELATED WEBSITE

### Canadian Government Sites

Public Health Agency of Canada

<http://www.phac-aspc.gc.ca/influenza/pandemic-eng.php>

The Public Influenza Plan for the Health Sector

<http://www.phac-aspc.gc.ca/cpip-pclcpi/index-eng.php>

Flu Watch

<http://www.phac-aspc.gc.ca/fluwatch/index-eng.php>

Health Canada

<http://www.hc-sc.gc.ca/hc-ps/dc-ma/influenza-eng.php#pand>

Government of Alberta – Health and Wellness

<http://www.health.alberta.ca/health-info/pandemic-influenza.html>

### International Government Sites

World Health Organization

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

Checklist for Pandemic Preparedness – WHO

[http://www.who.int/csr/resources/publications/influenza/WHO\\_CDS\\_CSR\\_GIP\\_2005\\_4/en/index.html](http://www.who.int/csr/resources/publications/influenza/WHO_CDS_CSR_GIP_2005_4/en/index.html)

Centers for Disease Control and Prevention

<http://www.cdc.gov/>

Pandemic Flu (U.S.)

<http://www.pandemicflu.gov/index.html>

Department of Health, UK

<http://www.dh.gov.uk/en/PublicHealth/Flu/PandemicFlu/index.htm>

Australian Department of Health & Ageing

<http://www.health.gov.au/>