

PANDEMIC FLU

Risk assessment
in the occupational setting



Everyone will be involved in the fight against pandemic influenza (flu) in terms of managing the impact it will have on society and preventing further spread of the infection.

This booklet explains how businesses can help reduce the spread of flu. It provides information to allow businesses to assess the types of measures that may be used in their particular occupational setting.

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INTRODUCTION

The Health Protection Agency and the Department of Health have worked closely with the healthcare sector and certain non-healthcare services, such as the police and fire and rescue services, to develop pandemic influenza infection control guidance for specific occupational settings (available at www.ukresilience.gov.uk/pandemicflu/guidance/sector_specific.aspx). However, it is not possible to outline detailed pandemic influenza infection control guidance for every occupation or to cover every conceivable scenario where a person might be exposed to the risk of infection from flu.

With this in mind, this simple and generic guidance has been developed to raise awareness of the measures that may be employed to reduce the spread of the flu virus at work. It aims to:

- allow businesses to evaluate potential situations where there may be possible exposure to the flu virus
- describe the steps that can be taken to moderate any potential exposure to the flu virus in the workplace
- set out the measures that might be used to reduce the spread of the flu virus in the workplace
- provide a matrix that can be used to consider the best ways of reducing the spread of flu in a work environment
- put into context the relative value of personal protective equipment, including the wearing of face masks,¹ when compared with other environmental and organisational approaches.

Information on pandemic flu specific to businesses can be found on the UK Resilience website (www.ukresilience.gov.uk/pandemicflu/guidance/business.aspx).

¹ 'Face mask' is used to describe a disposable mask of the type commonly worn by surgical staff in operating theatres (surgical face mask). See *The use of face masks during an influenza pandemic: scientific evidence base* (DH 2007), p. 4 (http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_077276?IdcService=GET_FILE&dID=147067&Rendition=Web).

SUMMARY

During a pandemic, the most successful infection control measures will be those which are the most easily understood and followed. Outside the healthcare setting, the primary focus of businesses should be on environmental, organisational and general hygiene measures (see page 11 for more information) to reduce the risk of transmission of flu.

Self-isolation by individuals with symptoms consistent with an influenza-like illness (ILI) is central to containing the spread of the flu virus. In addition, respiratory etiquette (using disposable tissues,² covering the mouth when coughing or both nose and mouth when sneezing) and disciplined hand hygiene will help to reduce the spread of flu among the healthy population. These measures should not be neglected on the assumption that more specific measures, such as the use of face masks, will work.

Broadly speaking, the circumstances where face mask use may possibly play a part in reducing the risk of infection would be where they are used by symptomatic individuals to retain infectious droplets (thereby preventing them spreading the virus to others) or where someone is in close contact (less than one metre away) with someone known to have symptoms consistent with an ILI.

If face masks are worn, staff must follow the procedures for their safe use, paying particular attention to how they are both removed and disposed of. Staff may expose themselves to additional risk of infection if they fail to use or dispose of face masks correctly. The use of a face mask must not decrease the strict application of other, more relevant, infection control measures.

Businesses may want to use this guidance to determine the most appropriate ways to reduce the spread of the flu virus within the work environment and build this into their business continuity planning.

² Disposable tissues are recommended over handkerchiefs. Do not use handkerchiefs or reuse tissues. This practice contaminates pockets or handbags which will recontaminate hands every time they go into those pockets or handbags. This is in line with the Catch It, Bin It, Kill It campaign which stresses the importance of respiratory and hand hygiene. For more information, please see www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_080839

WHAT IS PANDEMIC FLU?

Flu is a familiar infection in the UK, especially during the winter months. The illness, caused by the flu virus, can be mild or severe and, occasionally, can lead to death. Generally, some groups of people are more susceptible to the complications of flu than others, especially older people and people of any age with certain medical conditions. This is why the seasonal flu vaccination is recommended to these groups of people each year.

A pandemic is a worldwide epidemic. Pandemic flu is different from seasonal flu because it occurs when a new flu virus emerges into the human population to which most people will be susceptible and which can be spread easily from person to person worldwide – all countries will be affected. This will result in many more people becoming severely ill and potentially many more deaths than occur due to seasonal flu. Although a pandemic has not yet started, experts warn that the next one could occur soon.

SIGNS AND SYMPTOMS OF FLU

It is likely that the signs and symptoms of pandemic flu will be similar to those of seasonal flu, but they may be more severe and cause more serious complications.

The most significant symptoms are the sudden onset of:

- fever
- cough or shortness of breath.

Other symptoms may include:

- headache
- tiredness
- chills
- aching muscles
- sore throat
- runny nose
- sneezing
- loss of appetite.

The incubation period (time between contact with the virus and the onset of symptoms)

The range is from one to four days, though for most people it will be two to three days.

The infectious period (how long you are infectious to others)

People are most infectious soon after they develop symptoms. They can continue to spread the virus, for example in coughs and sneezes, for up to five days (seven days in children). People become less infectious as their symptoms subside, and once symptoms are gone, they are considered no longer infectious to others.

HOW IS PANDEMIC FLU CAUGHT AND SPREAD TO OTHERS?

It is likely that pandemic flu, just like seasonal flu, will spread from person to person by close contact. Some examples of how it can be spread include:

- large droplets from coughing and/or sneezing by an infected person within a short distance (usually 1 metre or less) of someone
- touching or shaking the hand of an infected person and then touching your mouth, eyes or nose without first washing your hands
- touching surfaces or objects (eg door handles) that have become contaminated with the flu virus and then touching your mouth, eyes or nose without first washing your hands.

WHAT SHOULD INDIVIDUALS DO IF THEY HAVE SYMPTOMS OR ARE ILL?

If an individual feels ill with symptoms consistent with an ILI while at work, it is important that he or she does not simply carry on working.

Their symptoms should be reported immediately to their manager or the occupational health department and, if they are consistent with flu, the individual should be sent home.

They should be advised to contact the National Pandemic Flu Line Service (which will be in operation at the outset of the pandemic) and told not to return to work until the symptoms have cleared and they feel well enough to return.

If individuals develop symptoms while not at work, they should adhere to the following advice:

- Stay at home (self-isolate).
- Do not go to work until you are fully recovered.
- Contact the National Pandemic Flu Line Service for advice and an initial assessment of symptoms in the first instance.
- Inform your employer or occupational health department to let them know you are ill.

WHAT SHOULD INDIVIDUALS DO TO PROTECT THEMSELVES AND OTHERS FROM PANDEMIC FLU?

It is important that the following practices are adhered to:

- Individuals should use a tissue to cover their nose and mouth when coughing and/or sneezing, dispose of the tissue promptly and then wash their hands.
- Tissues should be disposed of in domestic waste – they do not require any special treatment.
- Individuals should not use cloth handkerchiefs or reuse tissues. This practice carries a risk of contaminating pockets or handbags which may then recontaminate hands every time they go into those pockets or handbags.
- Individuals should clean their hands frequently, especially after coughing, sneezing and using tissues. Soap and water is a perfectly effective means of cleaning hands; however, handrubs (microbicidal handrubs, particularly alcohol-based) can be used as an alternative.
- Individuals should minimise touching of the mouth, eyes and/or nose, unless they have recently cleaned their hands.
- Normal household detergent and water should be used to clean surfaces frequently touched by hands.
- Individuals should clean their hands as soon as they get to work and when they arrive home.

MODEL FOR RISK ASSESSMENT

The following section provides details on the route of transmission/spread of the flu virus and the routes for reducing the potential for spread.

SPREAD OF THE DISEASE

For disease to spread within a community there must be a source of infection, a route by which the infection is transmitted, and individuals who are susceptible to the disease. This is illustrated below, along with additional information.



The source – the symptomatic individual

It is generally accepted that individuals should be considered potentially infectious from the time symptoms appear to the time their symptoms have completely disappeared. In general terms, the more severe the symptoms, the more infectious a person is likely to be.

Transmission – via droplets over a distance of under 1 metre or direct/indirect contact

Flu is generally transmitted from person to person through close contact and over short distances – in the region of 1 metre. This pattern of transmission is known to be associated with spread by respiratory droplets from coughs and sneezes, by direct contact with an infected person, or indirectly from objects or surfaces which have become covered with virus-infected secretions.

Flu viruses are easily removed or destroyed by soap and water, normal household detergents or handrubs (microbicidal handrubs, particularly alcohol-based).

The recipient – the susceptible individual

In order to pass on the virus, individuals who are susceptible to the disease must be present. Until an individual has acquired immunity, either through natural infection or through vaccination, they remain at risk of infection.

For a person to become infected with pandemic flu, each one of three elements must be present: (1) an individual with symptoms consistent with an ILI (2) who transmits the virus by direct or indirect contact with (3) a susceptible individual.

MITIGATING ACTIONS

Interventions that block all or part of the transmission route of a virus from a person with symptoms consistent with an ILI to a susceptible person have the potential to stop the chain of infection. These interventions generally have one of the following objectives:

1. reduce transmission of infection from an individual(s) with symptoms consistent with an ILI to a susceptible person, and/or
2. reduce the risk of susceptible people becoming infected.

The measures that businesses may want to consider in an effort to reduce the spread of a flu virus within the work environment fall into three broad categories:

Environmental	Actions taken within the environment to reduce the spread of the flu virus
Organisational	Actions taken to modify behaviour and practice in the workplace to help reduce the spread of the flu virus
Individual behaviour	Actions taken at the level of the individual to restrict the spread of the flu virus

These actions are ranked in this way to reflect their potential effectiveness. In general, the most effective measures will be those that are easy to accommodate, implement and interpret within a given workplace.

The use of personal protective equipment, such as face masks, by individuals is deemed to be the least effective because it relies on compliance and interpretation of guidance, and is easy for individuals to misuse, misapply or fail to use. It tends to give a false sense of protection and can lead to the abandonment of other, more effective, control measures. The specific evidence base regarding the use of face masks by the general public is currently too uncertain and too limited to firmly support face masks for use by the public during a flu pandemic.³

³ See *The use of face masks during an influenza pandemic: scientific evidence base* (DH 2007), p. 3 (http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_077276?IdcService=GET_FILE&dID=147067&Rendition=Web).

APPLICATION IN THE WORKPLACE

The following section identifies measures for reducing the spread of the flu virus at work. These are grouped under two main headings, corresponding to the intervention objectives highlighted previously. For each of these channels, the practices are grouped under environmental, organisational and individual behaviour. An abbreviated 'checklist' version of these measures can be found in annex 5.

1. REDUCING TRANSMISSION OF INFECTION FROM A SYMPTOMATIC INDIVIDUAL

The principal action will be to promote the importance of prompt and effective self-isolation by individuals with symptoms consistent with an ILI; such people should be encouraged to stay at home until symptoms resolve.

Where self-isolation is not immediately possible, people with symptoms of an ILI should be encouraged to adopt proper respiratory etiquette and hand hygiene⁴ and, where possible, avoid close interaction and direct contact with other people.

Environmental

1. Prominently displayed signs should be used to discourage staff and visitors with flu symptoms from entering the workplace and remind people of:
 - a) the signs and symptoms of flu
 - b) the importance of self-isolation of individuals with symptoms consistent with an ILI
 - c) the importance of respiratory etiquette and hand hygiene at all times.
2. Surfaces should be cleaned frequently with the usual cleaning materials.
3. Where practicable, effective use of physical barriers (screens and counters) should be made to help restrict close interaction and direct contact with potentially ill customers or visitors.
4. Consideration should be given to improving access to effective hand hygiene facilities. Where practicable, handrubs (microbicidal handrubs,

⁴ The Catch It, Bin It, Kill It campaign stresses the importance of respiratory and hand hygiene. For more information, please see www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_080839.

- particularly alcohol-based) could be made available at entrances to premises which are used by customers or visitors.
5. Where practical, consideration should be given to minimising the amount of soft furnishings and other objects that could potentially become contaminated and are difficult to clean.

Organisational

1. Raise awareness among staff of the signs and symptoms of flu and the need for individuals to self-isolate (stay at home) if they have symptoms consistent with an ILI.
2. Consider how best to manage people who develop symptoms consistent with an ILI in the workplace.
3. Promote an environment in which staff who become unwell feel that they can go home and stay at home until they are well.
4. Consider alternatives to direct meetings and visits (eg phone or video conferencing).
5. Where contact with those who may have symptoms consistent with an ILI (customers/visitors) is unavoidable, reduce the risk of transmission of disease to staff and others by encouraging:
 - a) the use of proper hand hygiene before entering premises or handling goods. When handling documents or money, staff should be encouraged to minimise contact with their mouth, eyes and nose until their hands have been cleaned
 - b) the practice of high standards of respiratory etiquette, such as covering the mouth with a tissue when coughing and sneezing.
6. Where practicable, direct contact should be avoided and, where possible, a distance of more than 1 metre should be kept between staff and customers/visitors.
7. Where social interactions are unavoidable, individuals with symptoms consistent with an ILI should be encouraged to minimise close interactions and/or direct contact with people. Alternatively, if contact is unavoidable, consideration may be given to asking individuals with symptoms consistent with an ILI to wear a face mask (if available) while interacting with staff. (The use and limitations of face masks are dealt with at annex 3.)

8. HR policies should reinforce the early recognition of illness and the need for workers to remain at home when ill. HR policies may wish to reflect the impact of a pandemic on dependants and be sensitive to staff needs during times of caring for family members or even bereavement.

Individual behaviour

1. If attendance at a public place or location is unavoidable, then individuals with symptoms consistent with an ILI, where practicable, should be encouraged to clean their hands or use a handrub (microbicidal handrubs, particularly alcohol-based) before entering premises.
2. Encourage individuals with symptoms consistent with an ILI to maintain high levels of respiratory hygiene and to dispose of tissues appropriately: 'Catch it, Bin it, Kill it'.⁵
3. Minimise interactions with people.
4. Where social interactions are unavoidable, in addition to the measures outlined, consideration might be given to asking individuals with symptoms consistent with an ILI to wear a face mask (if available).

2. REDUCING THE RISK OF HEALTHY/SUSCEPTIBLE PEOPLE BECOMING INFECTED

The principal actions will be to try to ensure that healthy people reduce or avoid contact with individuals with symptoms consistent with an ILI and adopt practices that reduce the risk of catching the infection (for example, social distancing measures and effective hand hygiene).

Environmental

1. Assess access to hand hygiene facilities.
2. Clean surfaces frequently touched by hands with normal cleaning agents.

Organisational

1. Raise awareness of the importance of respiratory etiquette and hand hygiene.

⁵ For more information, please see the Catch It, Bin It, Kill It campaign at www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_080839.

2. Consider the practicability of the effective use of social distancing within work environments if social interaction is unavoidable.
For example:
 - a) measures to reduce the frequency of interactions should be considered, eg staggering lunch breaks or reducing the number of people in enclosed places
 - b) reduce face-to-face meetings wherever possible and only undertake essential travel
 - c) encourage the use of video or telephone communication or conferencing
 - d) consider the use of home working for those staff for whom this would be a practical option.
3. Identify individuals who may be at particular risk of the adverse effects of flu and deploy them in areas where contacts are minimal. (The use and limitations of face masks are dealt with at annex 3.)

Individual behaviour

1. Staff should adopt good hand hygiene practices and minimise touching the mouth, eyes and/or nose.
2. Increase social distancing and try to avoid being part of a crowd. Where it is unavoidable, adopt good respiratory and hand hygiene.
3. Minimise any contact with any individual with symptoms consistent with an ILI.
4. If close proximity (less than a metre) with an individual with symptoms consistent with an ILI is inevitable, then consideration might be given to using a face mask. If face masks are worn, staff must follow the procedures for their safe use, paying particular attention to how they are both removed and disposed of. Staff may expose themselves to additional risk of infection if they fail to use or dispose of face masks correctly. The use of a face mask must not decrease the strict application of other, more relevant, infection control measures. (The use and limitations of face masks are dealt with at annex 3.)

RISK ASSESSMENT MATRIX

There is no single approach or measure that can be taken to reduce the spread of flu. Prompt self-isolation together with proper respiratory etiquette and effective hand hygiene should be actively promoted, encouraged and applied. An approach where environmental, organisational and individual actions are combined and applied will help to reduce the spread of the flu virus within the workplace.

To provide a simple framework to help businesses assess the practicality/practicability of possible mitigation measures, a matrix has been developed. This is illustrated below.

The matrix outlines ways of reducing the spread of the flu virus which combine the different levels of intervention and how they might be used to reduce individuals with symptoms consistent with an ILI spreading infection, as well as reduce the risk that susceptible individuals might become infected.

	1. To reduce transmission from a symptomatic individual to healthy/susceptible people	2. To reduce the risk of healthy/susceptible people becoming infected
Environmental (action taken to alter the immediate environment)		
Organisational (measures taken to modify the organisation/pattern of daily life)		
Individual (actions taken at the level of the individual to modify behaviour)		

A scenario showing how the assessment matrix might be applied is given in annex 1.

Businesses will need to consider the practicability of any measures within their respective workplace and arrive at solutions and emphasise various interventions depending on the nature of their occupation and interaction with the public. In a school, for example, a teacher in front of a class of 30 apparently healthy children would have different needs to a staff member looking after a sick child while waiting for the child's parents to collect him/her.

FURTHER INFORMATION

1. *Overarching government strategy to respond to pandemic influenza: Cabinet Office analysis of the scientific evidence base* (DH 2007), www.dh.gov.uk/en/Publichealth/Flu/PandemicFlu/DH_080760
2. *Pandemic Flu – Workplace Guidance* (Health and Safety Executive 2008), www.hse.gov.uk/biosafety/diseases/pandflu.htm

ANNEX 1: ASSESSMENT SCENARIO

A WORKER IN A RETAIL ESTABLISHMENT

	To reduce transmission from a symptomatic individual to healthy/susceptible people	To reduce the risk of healthy/susceptible people becoming infected
<p>Environmental (action taken to alter the immediate environment)</p>	<p>Encourage those who are ill to remain at home</p> <p>Individuals with symptoms consistent with an ILI would be encouraged to stay away from retail stores unless essential. If unavoidable, symptomatic people are advised not to visit places of business during busy periods</p> <p>Utilise electronic transactions rather than cash</p> <p>Encourage the use of the postal system, telephone and internet to carry out transactions</p> <p>Ensure, wherever possible, that there are physical barriers between the customer and the member of staff, such as a counter</p>	<p>Provide signage reminding people of the signs and symptoms of flu and the steps that can be taken to minimise risk of infection</p> <p>Easy access to hand hygiene facilities</p> <p>Increase environmental cleaning – normal cleaning agents can be used to clean those surfaces frequently touched by hands</p> <p>Provide waste bins for contaminated tissues</p>

	To reduce transmission from a symptomatic individual to healthy/susceptible people	To reduce the risk of healthy/susceptible people becoming infected
Organisational (measures taken to modify the organisation/ pattern of daily life)	<p>Educate staff on the signs and symptoms of flu to promote early recognition</p> <p>Be aware of organisational procedures for dealing with individuals with symptoms consistent with an ILI</p> <p>Individuals with symptoms consistent with an ILI should be encouraged to stay at home</p> <p>Home deliveries should be made to infected people so that they are able to self-isolate and stay at home; this would have to be balanced against other considerations such as staff availability for deliveries etc</p> <p>Promote an environment in which staff who become unwell feel that they can stay at home until they are well</p>	<p>Educate staff on the signs and symptoms of flu to promote early recognition</p> <p>Consider the feasibility of limiting, restricting or controlling the number of customers in the retail establishment so as to decrease social interactions and increase social distancing</p>
Individual (actions taken at the level of the individual to modify behaviour)	<p>Individuals with symptoms consistent with an ILI should be encouraged to wear face masks if attendance at face-to-face interactions are unavoidable. Good hand hygiene should be employed by all</p>	<p>Encourage staff to clean their hands frequently and properly and not to touch their mouth, eyes and/or nose unless they have cleaned their hands</p> <p>If close contact with an individual with symptoms consistent with an ILI is unavoidable, consideration might be given to the staff member wearing a face mask, bearing in mind the potential for cross-contamination if not used and disposed of properly</p>

ANNEX 2: GUIDANCE ON HAND HYGIENE

Training on proper hand hygiene is advisable to avoid a situation where people risk contaminating themselves.

This poster can be downloaded from www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_063674.



 Wet

 Soap

 Wash

 Rinse

 Dry

Stop germs spreading.
The power is in your hands.

Have you washed your germs away? Wash your hands.

ANNEX 3: GUIDANCE ON THE USE OF FACE MASKS

Broadly speaking, the only circumstances where face masks may play a part in reducing the risk of infection would be a situation where a healthy individual was unavoidably in close (less than 1 metre) contact with an individual with symptoms consistent with an ILI.

If close proximity (less than a metre) with an individual with symptoms consistent with an ILI is inevitable, then consideration might be given to using a face mask. If face masks are worn, staff must follow the procedures for their safe use, paying particular attention to how they are both removed and disposed of. Staff may expose themselves to additional risk of infection if they fail to use or dispose of face masks correctly. The use of a face mask must not decrease the strict application of other, more relevant, infection control measures.

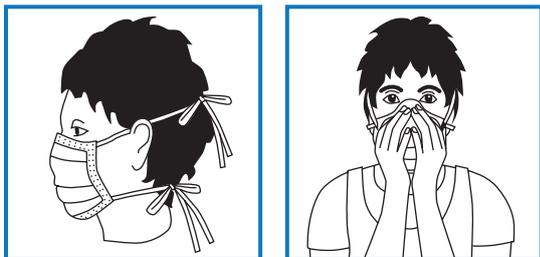
Without appropriate advice on the proper use of face masks, there is a risk of users contaminating themselves from the outside of the mask after use.

GENERAL ADVICE ON THE USE OF A FACE MASK

Putting on a face mask

A face mask should be put on before coming into contact with an individual with symptoms consistent with an ILI. **Hands should be washed thoroughly before handling the mask.**

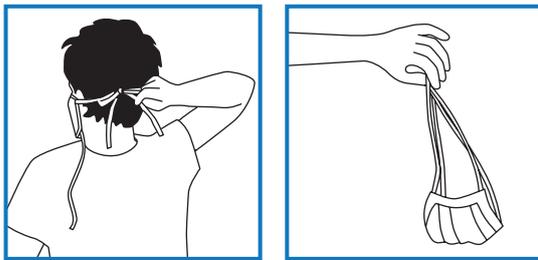
- Secure ties or elastic bands at middle of head and neck.
- Fit flexible band to the bridge of the nose.
- Fit snug to face and below chin.



Removing a face mask

The face mask should be removed once there is no longer any likelihood of close contact with an individual with symptoms consistent with an ILI. Once removed, the mask should be bagged and may be disposed of in domestic waste. Hands should be washed thoroughly after the mask has been removed and disposed of.

- Assume that the front of the face mask is contaminated.
- Untie or break the bottom ties, followed by the top ties or elastic, and remove the mask by handling the ties only.
- Discard appropriately.
- Wash hands thoroughly after touching the mask.



Other points to keep in mind

Face masks should:

- cover the nose and mouth
- not be allowed to dangle around the neck after or between each use
- not be touched once put on
- **be worn once only and then discarded.**

ANNEX 4: COMMUNICATION MATERIALS

Department of Health communication material, including hygiene posters, can be downloaded from www.ukresilience.gov.uk/pandemicflu/communication.aspx.

ANNEX 5: CHECKLISTS

1. To reduce transmission from an individual with symptoms consistent with an influenza-like illness to healthy/susceptible people

Environmental issues to consider		Tick when completed
1.	Use prominently displayed signs reminding people of the signs and symptoms of flu and measures to be adopted	
2.	Clean surfaces frequently with the usual cleaning materials	
3.	Where practicable, make effective use of physical barriers to help restrict close interaction and direct contact with potentially ill customers or visitors	
4.	Consider improving access to hand hygiene facilities, eg making handrubs available	
5.	Minimise the amount of soft furnishings and other objects that could potentially become contaminated and are difficult to clean	
Organisational issues to consider		Tick when completed
1.	Raise awareness of the signs and symptoms of flu and the need for an individual with symptoms consistent with an influenza-like-illness (ILI) to self-isolate	
2.	Consider how best to manage people with symptoms consistent with an ILI in the workplace	
3.	Promote an environment in which staff who become unwell feel that they can stay at home until they are well	
4.	Consider alternatives to direct meetings and visits (eg phone or video conferencing)	
5.	Where visits from individuals with symptoms consistent with an ILI are unavoidable, encourage the proper use of respiratory etiquette and hand hygiene	
6.	Where practicable, direct contact should be avoided and, where possible, a distance of more than one metre should be kept between staff and customers or visitors	
7.	Where social interactions are unavoidable, individuals with symptoms consistent with an ILI should minimise close interactions and direct contact	
Individual issues to consider		Tick when completed
1.	Encourage proper hand hygiene	
2.	Encourage proper respiratory hygiene	
3.	Minimise interactions with people	
4.	Consider asking individuals with symptoms consistent with an ILI to wear a face mask	

2. To prevent the risk of healthy/susceptible people becoming infected

Environmental issues to consider		Tick when completed
1.	Assess access to hand hygiene facilities	
2.	Clean surfaces frequently touched by hands	
Organisational issues to consider		Tick when completed
1.	Raise awareness of the importance of respiratory etiquette and hand hygiene	
2.	Consider the practicability of the effective use of social distancing within work environments	
3.	Reduce face-to-face meetings wherever possible and only undertake essential travel	
4.	Encourage the use of video or telephone communication or conferencing	
5.	Consider the use of home working for those staff for whom this would be a practical option	
6.	Identify individuals who may be at particular risk of the adverse effects of flu and deploy to areas where contacts are minimal	
Individual issues to consider		Tick when completed
1.	Encourage proper hand hygiene practices and minimise touching of mouth, eyes and/or nose	
2.	Increase social distancing	
3.	Minimise contact with individuals with symptoms consistent with an ILI	
4.	Consider asking individuals with symptoms consistent with an ILI to wear a face mask	

Further information

Additional infection control training materials, which are aimed primarily at the healthcare sector, can be accessed at: www.dh.gov.uk/PandemicFlu. This includes posters on the correct use of personal protective equipment (PPE) and effective hand hygiene.

Produced jointly by the Department of Health and the Health Protection Agency in collaboration with the Health and Safety Executive, Department for Business, Enterprise and Regulatory Reform and Cabinet Office.

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294137 1p 1k Mar 09

Produced by COI for the Department of Health