

RISK PLAN FOR PANDEMIC FLU

GILL HILL 2006
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RISK PLANNING FOR PANDEMIC FLU

A pandemic is a rapidly-spreading epidemic of a disease that affects the majority of countries world-wide. The symptoms of pandemic influenza are similar to those of ordinary flu but generally are more severe.

The Creation of a Flu Pandemic

Flu viruses change and mutate constantly so producing new strains and varieties. Pandemics occur when a virus emerges that is radically different to previous strains that few, if any, people have immunity to. This lack of immunity, the ability to fight, ensures that the disease will spread widely and very rapidly so affecting thousands, if not millions, of people. A new pandemic virus is usually the result of an animal virus, such as avian (bird) mixing with a human virus to produce a brand new strain.

Differences between ordinary flu and pandemic flu

<u>ORDINARY FLU</u>	<u>PANDEMIC FLU</u>
Occurs every year during the winter	Occurs approximately three times every century
Affects up to 10% of the population	May affect around 25% of the population
For most people it is unpleasant but not life-threatening	It is often a much more serious infection for everyone
The very young, the very old and people with certain chronic illnesses are most at risk	Usually people of every age are at risk of serious illness
Annual vaccinations are available	A vaccine may not be available until several months after the outbreak has begun.
Antiviral drugs are available to treat those at special risk	Antiviral drugs may be in limited supply and will be used to best effect, to keep emergency services etc. running,

Pandemics during the Twentieth Century

- 'Spanish Flu': During the years of 1918 – 1919 directly after the end of the First World War, where millions of lives were lost, another 20-40 million lives were lost to this strain of flu, 250,000 alone in the UK. The age group affected were healthy young adults.
- 'Asian Flu': 1 million died globally in 1957-1958 with 33,000 in the UK. The age group affected were the very young and the very old
- 'Hong Kong Flu': In 1968-1969 1.4 million people died, 30,000 in the UK with the age group most affected being the very old and those already weakened by other medical conditions.

Affect on the UK during the next pandemic

The forecast is that once here the flu pandemic will spread throughout the country in a matter of weeks, from local authority to local authority in days. There will be:

- High levels of flu
- Intense pressure on health services
- Disruption to normal daily life
- Many deaths.

Persons at Risk

All will be at risk although some may be more at risk than others depending on which age group the virus will target. The fact that there may be little or no immunity puts us all at risk and until the strain actually begins to spread there is no way of knowing which age group will suffer the most.

Treatment

There are antiviral drugs available at all times but their use is limited. They need to be given at the start of symptoms and the new strain may not be affected by these drugs. Generally emergency personnel will be treated first to prevent illness starting so they can keep services running. There may not be enough available to treat everyone who will need the medication.

Control measures

The flu virus is normally spread person-to-person through the air when people cough or sneeze. Face masks give little or no protection because the virus is too small for the mask to prevent passage through the defence.

- Cover mouth and nose when sneezing or coughing using tissue, elbow or shoulder
- Maintain good hand-washing procedures to prevent the virus being spread by hand contact
- Avoid crowds
- Enclosed spaces such as planes, trains and buses may encourage spread of the virus.

Affect on the College

In terms of health and safety and risk management the likelihood of occurrence was MEDIUM at November 2006 for bird flu, LOW for swine flu at May 2009. The severity of outcome, however, is always deemed to be HIGH until the nature of the virus is determined. Disruption to society and the College may be inevitable depending upon virulence. Contingency planning and preparation can reduce panic and costs. Planning will carry financial implications but the human and financial cost of not planning would be greater.

The Department for Children, Schools and Families (DCFS) has produced guidance for further education colleges to follow, the National Health Service has produced guidance for the general public and the Health and Safety Executive has produced advice for employers.

The Broad Phases of a Pandemic (as set out in NHS contingency plan)

The phases shown below are defined by the World Health Organisation (WHO). The Health Protection Agency (HPA) is the lead agency to advise and support the UK national public health response to major infectious disease incidents and outbreaks.

The Pre-Pandemic Period

- Phase 1: No new influenza virus subtypes found in humans
- Phase 2: No new influenza virus subtypes found in humans. Circulating animal influenza virus subtype poses a substantial risk of human disease

The Pandemic-Alert Period

- Phase 3: Human infection(s) with a new subtype, but no new human-to-human spread
- Phase 4: Small cluster(s) with limited human-to-human spread
- Phase 5: Large cluster(s) but human-to-human spread localised

The Pandemic Period

- Phase 6: Increased and sustained transmission in general population

The Post Pandemic Period

- Steps are implemented to return to normal.

RECOMMENDATIONS

1. The College responds in a positive manner to the likelihood that pandemic flu will occur at some point
2. The College designates an Incident Management Team to respond to an outbreak of pandemic flu affecting the College
3. The College works with the local authority and health authorities to ensure the College and its staff and students are given the correct information, reasonable controls and the necessary care
4. Risk assessments are drawn up and agreed by College management, risk control groups and the College Health and Safety Officer
5. Implement the management guidelines detailed below.

MANAGEMENT GUIDELINES

I. Ensure staff and students have access to general guidance to protect themselves and others.

Guidance is available on the Health Protection Agency website and via the NHS. The college can remind staff and students of the basic principles to prevent infection using posters in communal areas such as toilets, LRCs, refectories and open access areas advising them to:

- Cover the nose and mouth when coughing and sneezing
- Use disposable single-use tissues and dispose of them in nearest waste bin
- Wash hands after coughing, sneezing, using tissues or after any contact with other persons who display symptoms
- Avoid touching eyes, nose or mouth.

II. Consider whether there is more that can be done to reduce the risk of infection.

- Ensure hand-washing facilities are working properly
- Ensure bins are available and are emptied regularly by persons wearing protective gloves
- Ensure sufficient stocks of paper towels, soaps and cleaning materials are available
- Introduce hand wipes or alcohol based sprays are provided in areas such as workshops where hand washing may be more difficult due to lack of facilities
- Ensure regular cleaning of hard surfaces that people may handle often such as door handles and common use telephones.

III. Ensure that procedures are in place to come into effect in a pandemic so that students and staff know what to do if they fall ill or their colleagues are taken ill

- Staff should advise colleagues to go home immediately if they display symptoms. Lecturers should advise students to return home if they display symptoms
- Contact numbers are made known to both staff and students for them to contact if they are infectious and cannot come into College
- Students and staff are encouraged to go home and stay away until fully recovered
- A register of high risk students and staff should be kept (asthma, respiratory diseases generally, heart conditions, diabetes, immune deficiency syndromes) to ensure awareness of how many may be at very high risk.

IV. Determine when and at what point the College may need to close short-term

- Closure will be dependent upon how many staff and students are affected and upon the risk presented by having large groups of people in one place
- DCSF/Local Authority guidance is to be sought as well as pursuing advice from Dudley Health Authority, and, where necessary, funding authorities
- Liaison with Dudley MBC, in particular the Education Department is to occur regarding school interaction (pupils taught here via the Services to Schools Team and the spread of disease via family members)
- Where numbers of staff available for work are greatly affected then the College may need to open only on a 'tick-over' basis to ensure the bare minimum needed to keep the College viable is undertaken
- Re-opening will then need to be determined. This will possibly be the same date as the local schools re-open due to the reduction in risk to all. Staff at home looking after their children due to closure of schools can then return to work.

BUSINESS CONTINUITY PLAN PANDEMIC FLU PLAN OF ACTION

PHASES ONE TO THREE: College management is to appraise the situation on a daily basis. The plan shown below will be activated once phase 4 (human to human spread has occurred in small clusters but is still localised). The College Incident Management Team will be determined before the pandemic occurs. Appendix Two gives contact details of the Incident Management Team and other emergency contacts.

EMERGENCY PLAN

Phase 1: No new influenza virus found in humans

1. Put together an Emergency Team from College personnel.
2. All members to be provided with the Pandemic Flu document from DCFS
3. Identify decision makers. There must be more than one to cover for those off sick or caring for relatives during the period the pandemic strikes. The main decision to be made is that of business continuity
4. Establish local authority contacts (Emergency Planning Team and Education Department), Dudley Health Authority and those at the LSC.

Phase 2: Animal virus circulating but no human virus as yet

5. Check cleaning arrangements on all College sites
6. Develop communication plans for staff, students and families to include timetable change, department or site closures and transport issues.

Phase 3: Human infection with new subtype virus but no person-to-person spread

7. Consider how the College can support public information campaigns by way of posters, student talks, visiting speakers from health organisations etc.

Phase 4: Small clusters with human to human spread

8. Check with insurance companies the effect pandemic flu may have on our insurance cover
9. Plan for shortfall in monies in the event of a closure of sites and subsequent lack of achievements
10. Review contact lists
11. Update student contact details in readiness including external email addresses
12. Have in readiness a home page giving all necessary details in the event of closure so staff and students (including parents) have information they may need
13. Plan for a skeleton crew to maintain College sites in the event of extended closure period
14. Review arrangements for cover for teaching and non-teaching personnel
15. Review the media contact list for currency. This can be used to inform all College users of the availability of College services during the pandemic period
16. Consider communication difficulties for those whose primary language is not English, who may be blind or deaf or have other special needs.

Phase 5: Large clusters of flu occurring but localised i.e. away from the West Midlands

17. Emergency team mobilised in readiness for the disease approaching our area
18. Review procedures for communicating with staff, students and families
19. Estates to check that there is sufficient supply of hand-washing facilities, including soap and hot water, and sufficient cleaning materials to clean hard surfaces more often than normal
20. Prepare template letters regarding the possible reduction in curriculum provision, the closure of sites and subsequent re-opening
21. Develop telephone/text messaging trees for staff and test them
22. Curriculum staff to develop resources to enable students to work from home
23. Consider how to support staff and students who may return to College following loss of loved ones or dealing with the extra pressure of resuming full service and addressing backlog of work
24. Undertake a 'dry run' to ensure all runs smoothly.

Phase 6: Increased transmission of disease. The flu is country wide.

Government advice will be to maintain essential day-to-day activities where possible

25. Monitor updates from DCFS, the LSC and the local health services
26. Check cover for teaching and non-teaching duties
27. Where a site needs to be closed check whether the activities of that site can be amalgamated with those of another site
28. Liaise with the local media to keep all updated
29. Check resources available for students to work from home either paper format or via email
30. Monitor cleaning regimes constantly, ensuring surfaces and door handles are cleaned regularly and bins emptied carefully where tissues are involved
31. Check availability of healthy staff who may need to take on additional or different roles
32. Constantly update the decision of when and how to close sites
33. Update daily on plans to re-open
34. Ensure that all those who need time to attend to sick ones, funerals etc. are supported.

Post pandemic flu – Re-opening of the College

35. Check with Estates Department that all College sites are ready for re-opening
36. Check with Refectory Manager that the sites can maintain sufficient supplies of food and drink on re-opening
37. Communicate to staff and students the date of re-opening via letter, email, media and telephone as appropriate
38. Re-open
39. Support staff who will now be under pressure to resume normal service but will also have to contend with post-illness pressure, family and grief issues, student support issues, etc.

Inter-pandemic Period		
1	No new influenza virus subtypes detected in humans	UK not affected UK has strong travel/trade connections with affected country UK affected
2	Animal influenza virus subtype poses substantial risk	
Pandemic Alert Period		
3	Human infection(s) with a new subtype, but no new human to human spread to a close contact	UK not affected UK has strong travel/trade connections with affected country UK affected
4	Small cluster(s) with limited human-to human transmission but spread is highly localised, suggesting that the virus is not well adapted to humans	
5	Large cluster(s) but human-to-human spread still localised, suggesting that the virus is becoming increasingly better adapted to humans	
Pandemic Period		
6	Increased and sustained transmission in general population	UK Alert level 1 Virus/cases only outside the UK 2 Virus isolated in the UK 3 Outbreak(s) in the UK 4 Widespread activity across the UK
Post Pandemic Period		
End of pandemic Return to inter-pandemic period		

Appendix Two: Incident Management Team
Names and Contact Details

The table below gives contact details of the members of the Incident Management Team and Affiliate Members together with the names and telephone numbers of organisations and individuals who may be needed in an emergency.

Team /Organisation	Location	Name	Telephone No.
CHAIR PERSON Incident Management Team	HRC	Louise Jones Vice Principal: Finance, Resources & Quality Assurance	01384 344430 W 07967 679641 M
Incident Management Team	HRC	Andy Sylvester Vice Principal: Students and Curriculum Innovation	01384 344476 W 07967 679649 M
Incident Management Team	HRC	Elaine Giles Vice Principal: Corporate Development	01384 344382 W 07967 679608 M
Incident Management Team	HRC	Russ Henry Assistant Principal: Vocational and Professional Studies	01384 344383 W 07967 679616 M
Incident Management Team	ATC	Kevin Stevens Assistant Principal: Construction & Motor Vehicle	01384 343176 W 07967 679605 M
Incident Management Team	HRC	Craig Blake Director of Estates	01384 344415 W 07967 679618 M
Incident Management Team	HRC	Paula Dowdeswell Head of Student Services	01384 344431 W 07967 679609 M
Incident Management Team	HRC	Sue Kennedy Director of Human Resources	01384 344432 W 07967 679650 M
Incident Management Team	HRC	Kim Babb Director, Business Skills Stourbridge	01384 344656 W 07967 999128 M

AFFILIATE MEMBERS

AFFILIATE MEMBER	HRC	Steve Pettifer Director of Corporate Information	01384 344351 W
AFFILIATE MEMBER	HRC	Alex Speed Director of IT & ILT Development	01384 344545 W 07967 679632 M
AFFILIATE MEMBER	HRC	Gill Hill Health and Safety Officer	01384 344405 W 07967 679625 M
AFFILIATE MEMBER	HRC	Mags Winthrop Communication Coordinator	01384 344482 W

EXTERNAL EMERGENCY CONTACTS

Alarm Monitoring (key holders)		Reliance (all sites except Leasowes) Securiplan (Leasowes only)	0121 420 0333 01384 293456
Insurance	Insurers	Zurich Municipal	0800 0280336
Security	Police	Stourbridge (Birmingham control)	0845 1135000 999
Utilities	Electric	British Gas	01865 406261
Utilities	Gas	British Gas	01865 406261
Utilities	Water	Severn Trent (HRC, Longlands) South Staffs (ATC, Ham Lane, Leasowes)	08457 500500 0800 243352
Contractor	Buildings Glazing	HJS Metro Glazing	0121 486 1929 01384 234570
Contractor	Electrical	Mercia	01902 671999
Contractor	Gas (plant)	HAS	0121 248 1848
Contractor	IT infrastructure	Ecommerce	07852978041
Contractor	Plumber	Porters HJS	01384 396719 0121 486 1929
Contractor	Alarms	HRC: ADT ATC: JHS Longlands: Security Design Ham Lane: Autoguard Heath Lane: Autoguard Leasowes: Secure It All	0870 6001009 0121 471 1801 0121 550 8847 01384 374863 01384 374863 0121 423 1119

HEALTH AGENCIES

Health Protection Agency, Russell House, No.1 The Inhedge, Dudley, DY1 1RR
Telephone: 01384 454300
Consultant for Communicable Diseases (CCDC): Dr Dan Killalea

Public Health Department, St Johns House, Union Street, Dudley DY2 8PP
Telephone: 01384 366111

Russells Hall Hospital, Pensnett Road, Dudley, DY1 2HQ
Telephone: 01384 456111

EDUCATION AGENCIES

Dudley MBC Education Department: 01384 814225 or www.dudley.gov.uk/education-and-learning
DCFS: 0870 000 2288 or info@dcfs.gsi.gov.uk
LSC: 0121 345 4888 or www.lsc.gov.uk
Association of Colleges (AOC): 0207 827 4600 or www.aoc.co.uk

DUDLEY MBC except education shown above

Website: www.dudley.gov.uk
Emergency Planning Team: 01384 814736
Environmental Health: 01384 812345

OTHER AGENCIES

Health and Safety Executive (HSE), 1 Hagley Road, Birmingham B16 8HS
Telephone: 0121 607 6200
HSE info-line: 0845 345 0055
Website for flu: www.hse.gov.uk/biosafety/diseases/pandemic.htm

USEFUL WEBSITES

Department of Health: www.dh.gov.uk/pandemicflu
Emergency planning: www.teachernet.gov.uk/emergencies
Government advice: www.ukresilience.info/emergencies/health.shtm#guidance
www.wiredforhealth.gov.uk/cat.php?catid=917
WHO information: www.who.int/csr/disease/avian_influenza/phase/en/index.html
Coping with student death: www.teachernet.gov.uk/wholeschool/healthandsafety/pupilmortality

LOCAL PRESS CONTACTS

Last updated: 5th May 2009

Stourbridge News

Chief Reporter: Bev Holder

Tel: 01384 358225

Email: bev.holder@midlands.newsquest.co.uk

Stourbridge Chronicle

Reporter: Andrew Turton

Tel: 01902 319448

Email: Andrew.turton@expressandstar.co.uk

Express & Star

Reporter: Lee Watton

Tel: 01902 319410

Email: Lee.watton@expressandstar.co.uk

Black Country Evening Mail

Reporter: Chris Henwood

Mobile: 07824 606512

Telephone: 01922 639295

Email: chris.henwood@birminghammail.net

Kidderminster Shuttle

Chief Reporter: Peter McMillan

Tel: 01562 633347

Peter.mcmillan@midlands.newsquest.co.uk

The Birmingham Post

News Editor: Sarah Probert

Tel: 0121 234 5186

Sarah.probert@birminghampost.net

Sunday Mercury

Head of Content: Tony Larner

Telephone: 0121 234 5567

Tony.larner@sundaymercury.net

Central TV

www.itv.com/Central/

BBC Midlands Today

Midlands.today@bbc.co.uk

Beacon Radio

Tel: 01902 461260

news@beaconradio.co.uk

Times Educational Supplement

Tel: 020 3194 3000

newsdesk@tes.co.uk

Association of Colleges

West Midlands Regional Administrator: Caroline Southall

Tel: 01902 824399

Email: caroline_southall@aoc.co.uk

Appendix Five: College Risk Assessment for Pandemic Flu

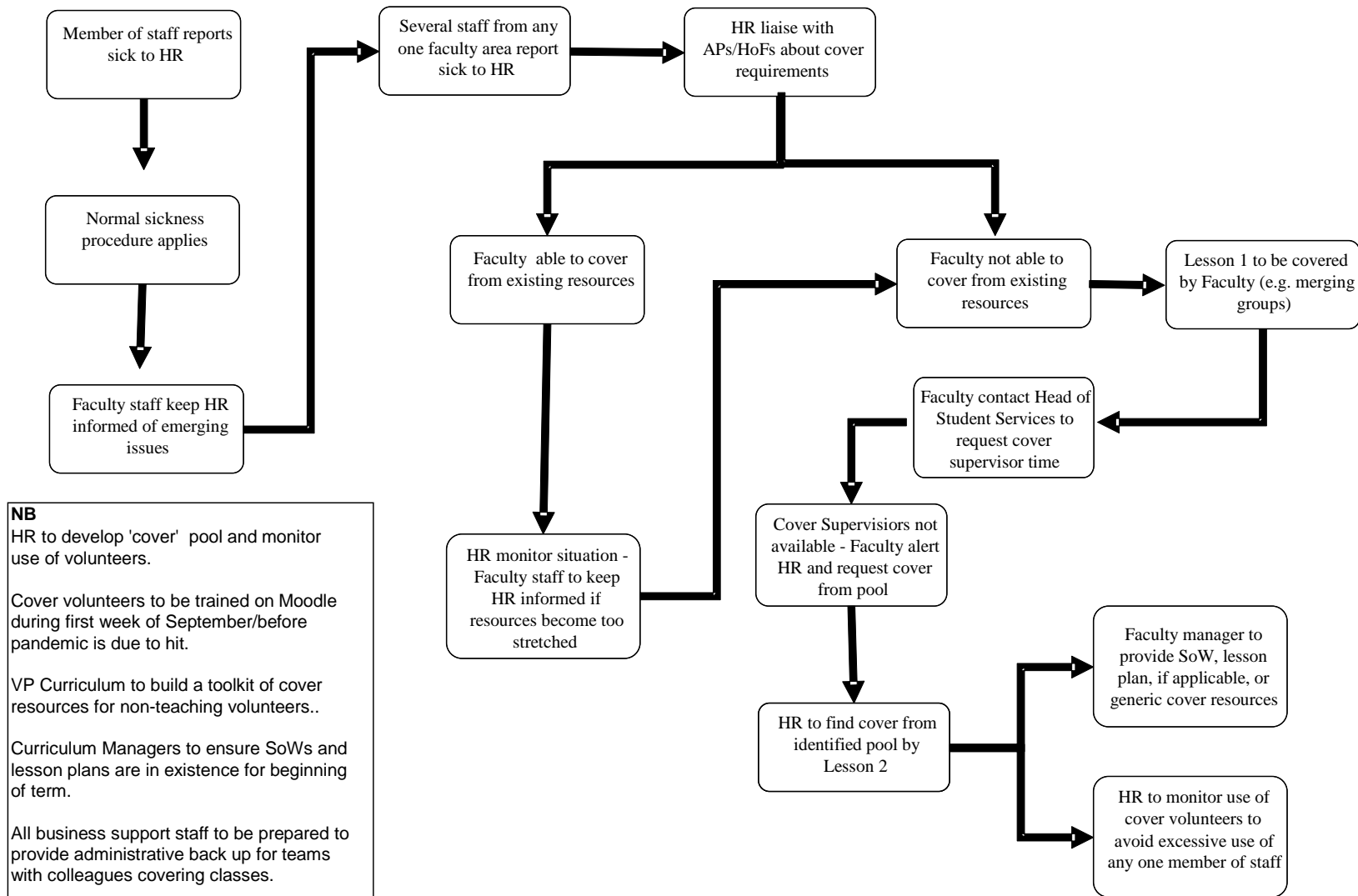
Phases	Issues	Impact	Probability	Severity	Factors	Action
1, 2 & 3 No threat yet to humans	None	N/A	N/A	N/A	N/A	Develop Pandemic Flu Business Continuity Plan
4 (low risk to business) and 5	Increased healthy student absenteeism due to trends, family needs, media 'frenzy' etc.	Slight increase in drop-out rate. Courses not viable or courses cancelled. Students not completing courses – achievement targets not reached. Limited progression. Limited progress against targets. Reduced funding	Low – possibly rising to Medium by phase 5.	Low – rising to Medium by phase 5.	Ignorance, confusion & fear.	<p>At phase 5 mobilise the Incident Management Team</p> <p>Low-level communications approach. Support, raising of awareness and understanding. Delivery of reassuring messages. Develop On-line/Distance Learning strategies.</p>
	Increased healthy staff absenteeism	Increased staff workload, possibly leading to stress and/or non-flu related illness for staff remaining at work. Courses cancelled as a result (leading to impacts as outlined above).	Low rising to Medium at phase 5	Low rising to Medium at phase 5	As above	<p>As above but ensure contact details are up-to-date.</p> <p>Maintain up-to-date list of agency staff who may be available at short notice to cover staff off work</p> <p>Schemes of work for whole of academic year and recent lesson plans plus course material available on-line (to assist staff remaining at work as well as agency staff)</p> <p>Note: Strict cleaning regime throughout all phases of pandemic to limit infection rates</p> <p>Estates to liaise with cleaning contractors + additional signage</p>

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Phases	Issues	Impact	Probability	Severity	Factors	Action
6	Increased healthy student absenteeism.	Disease spread within the College Increased drop-out rate Courses not viable or courses cancelled. Students not completing courses, achievement targets not reached. Limited progression. Limited progress against targets. Reduced funding	High	High	Illness, confusion, fear, care responsibilities, transport.	IN ALL CASES Implement the Pandemic Flu Plan. Assess the Impact using the Business Continuity Plan. Phase 6 of the pandemic include flexible learning, on-line/distance learning approaches etc. Clear lines of communication. Deliver clear advice and guidance
	Infected student absenteeism	As above + closure of college providers	High	High	As above	As above
	Increased healthy staff absenteeism.	Increased staff workload, possibly leading to stress and/or non-flu related illness for staff remaining at work.	High	High	As above	As above
	Infected staff absenteeism.	Courses cancelled (leading to impacts as outlined above).	High	High	As above	As above
	Service to College providers unable to maintain service	As above	High	High	Illness amongst providers/ suppliers. College unable to provide full range of service.	As above + source alternative suppliers of foodstuffs for catering needs

End

FLU PANDEMIC - FLOWCHART OF ACTION WHEN LECTURER SICKNESS IS REPORTED



**BUSINESS CONTINUITY PLAN
FACULTIES – GENERIC**

It is expected that team meetings take place frequently and information given verbally and fully discussed. This plan needs to be discussed with staff before term begins.

ABSENCE: One or more actions may need to be implemented depending on the scale of the pandemic.

	ACTION 1	ACTION 2	ACTION 3	ACTION 4	ACTION 5	ACTION 6
Management ill	Aug: Designate 'Line of Responsibility'.	End Aug: Communicate this 'Line' to all faculty staff, HR & reception + determine critical roles.	'Line of Responsibility' to be fully briefed each week on meetings, procedures & critical roles. Provide training for critical roles.	HR liaise with Jan Howes in case of both evening and SMTday duty.	'Line of Responsibility' to check diary & calendar.	
Lecturers ill	End Aug: SoW, lesson plans & Moodle up to date for each course.	Each morning determine sickness level. Cover classes in-house.	Ask for 'Cover Supervisor' assistance via student services.	Ask HR for cover list of named, appropriately checked staff.	Students to access LRC resources IF agreed with SC. Homework & assignments given early.	Close course: letter to parents, moodle accessibility (check students can access from home), interaction via email, text & phone.
Students ill	Moodle up-to-date, check students can access from home.	Homework & assignments produced & given early in term.	50% off sick - combine class with another. Allow assignment work.	50-75% off – close class for one week. Liaise with Essential Skills & 'referral staff'. Parents letter emailed/posted.	Homework & instructions given via email, website, txttools.	Information re: re-opening dates via letter, email and college website & to 'referral staff'.
Faculty admin ill	Daily contact with remaining members to share load.	75% ill – ask other faculties if aid can be given.	Decide priority tasks for the week and stick to them e.g. student sickness, student data (transfers & withdrawals), CRB checks for hourly paid new appointments.	Designated member of staff to liaise with finance re: orders & hourly paid contracts or timesheets & student services for EMA payments.		

CIS ill	Register not available/inaccurate, lecturer to keep paper records. Supply of temporary registers on every site with faculty admin.	Lecturer to ensure enrolment of late students is detailed and accurate – refer to student services. CH produce crib sheet for evening lecturers on how to enrol.	Census returns date critical to LSC. CH, AS, LJ to oversee procedure.	Telephone enrolments: trained pool of casual staff.		
Services to Schools – faculty liaison	Alert Services to Schools if unable to accommodate schools.	Services to Schools to alert schools in good time (course or college closure).	Inform Services to Schools in good time as to when service can be restored.	Website info for schools to use, updated daily.	Plan to ensure contract hours are honoured – schools to advise how to comply.	
Exams – faculty liaison	Exams to liaise with exam boards to obtain each boards procedure re: pandemics.	Lecturers and exams to liaise regarding registration of students, monitored by PAMs for accuracy.	SP to monitor exam staff illness situation & liaise with faculties.	Exams to be ready to process registration 2 weeks prior to normal year.	Exams to liaise with exam boards re: student illness + liaise with faculty Late registration or sit at later date = double charge. Exam Fees Recharge Policy to be produced by VPs.	
LSA's – high dependency personal care	HR alert Essential Skills, to alert team. PAM/GC contact family for advice – student to stay home or family provide personal care.	If family provide care ensure proof is obtained of family identity or person known by college as a relative, or written permission by family.	Inform family on return of LSA.			
Work placement/ placement providers (either will not let our students in if college have swine flu cases or they, themselves are closed.	Each faculty BCP have full and comprehensive details re: how it will affect their teams – teaching/learning in world of work, assessments & achievement	Comprehensive information shared between faculty and placement staff to include placement provider as is relevant.				

REFERRAL STAFF

The following must be informed of the decision to close classes:

Elaine Giles (VP), Andrew Sylvester (VP), Reception, Student Services and Faculty Administrators (relative to the curriculum area).

RELATED ISSUES AND CONTROLS

MEDIA CONTACT

No-one unless authorised is to talk or deal with the media. Various statements have been pre-prepared to cover the following possible events:

- General information on what the college is doing on a weekly basis as regards the swine flu outbreak
- Closure of the college
- Fatality of either a student or a member of staff
- Answers to questions likely to be posed.

COMMUNICATION

- Letters have been prepared to go to all full time students, parents or guardians regarding the college swine flu plan and procedures.
- Induction of full time students is to include information on swine flu and how to access course details, resources etc.
- An A4 fact sheet has been prepared ready for the start of term for both staff and students (both full and part time) as regards the general information on college procedure and weekly meetings.
- For full time students a course specific letter has been prepared in case that syllabus area has to close (a total of one week only closure is estimated).
- As above but for a full college closure (one site only is envisaged, not all sites at the same time).
- Website updated daily as regards closure of classes or college and re-opening dates and times. Info to be given to IT (TW) by relevant personnel daily.
- Information and notification will be given to staff via email, team meetings, pigeon holes/home addresses and attached to payslips.
- Crib sheets have been prepared to go to reception, faculty administrators, the student attendance officer and HR in case of external queries or parental concerns. This information will be sent via email to all staff as back-up so that information given is consistent.

FACULTY SPECIFIC BUSINESS CONTINUITY PLANS

Each faculty has produced a Business Continuity Plan (BCP) containing faculty specific and staff detail as regards the operation within that particular faculty. Both this BCP, which gives consistency to all, and the faculty BCP is to be used in conjunction with one another.

INTERACTION WITH OTHER COLLEGE TEAMS – EFFECTS IF LINK TEAM IS SHORT STAFFED

HR need to be aware of the effect certain staff absence can have on faculties and other teams so that information can be given in good time.

TEAM	POSSIBLE EFFECT	CONTROLS
Finance	Orders not sent – non-delivery of materials or resources. Invoices not paid – poor credit rating, no future business.	Faculty admin & PAMs/course coordinators to liaise weekly with finance (two way process). Finance to request assistance from other knowledgeable staff.
Pay-roll	Hourly paid staff salary not paid.	Faculty admin to liaise with payroll to determine extent of the problem and alert those who may be affected.
Student Services	EMA payments not processed and available to students.	Faculty admin to liaise with Student Services on a weekly basis. Faculty to communicate with students in good time if problem is perceived.
Services to Schools	Schools do not sent pupils in/pupils off sick.	Alert faculty concerned as soon as knowledge gained. Faculty to determine how the missed time can be made up.
LRC	LRC staff ill. LRC needed for resources if lecturer ill.	Rota system of opening for each of the 3 sites, shorter opening hours. Must have prior agreement with SC + detail of syllabus/lesson plan Designate A and C block classrooms for IT, liaise with Voc & Prof, decision to be made by VP.
CIS	See first table 'ABSENCE'.	
Estates	Opening and closing of sites and rooms if caretakers sick. Evening provision (lock-up, help required etc.) affected.	Estates to liaise with sites if illness is a problem and agree opening and lock-up procedure well in advance. Evening – Estates to alter rota to accommodate, provide training to other team staff on lock-up procedure. Two evening duty managers to be on site if no caretaker assistance.
HR	Unavailability of Lecturer Cover List or appropriate safeguarding checks not available. Sickness statistics not up-to-date/unavailable and information not shared on a daily basis to those teams affected.	Copy to be provided for VPs and student services. Answer-phone access (those reporting in sick) to be given to Eileen Attwood and Kayleigh Curtis.
IT team	Lack of support if technical problems occur (lack of service, moodle etc.) & lack of daily update. Unable to train cover stand-in staff on moodle.	Skills share (BW & TW, AE & PP). External contractor back-up: Express Commerce. Train August/early September 2009.