



Australian Government
Department of Health and Ageing

Appendix to the PROTECT Annex to the Australian Health Management Plan for Pandemic Influenza

Updated 21 September 2009

Appendix 1 - Protocols for special situations in PROTECT

This appendix should be read in conjunction with the PROTECT annex.

Special situations include education and childcare facilities, correctional settings and cruise ships.

Business owners and facility managers have a responsibility to provide a safe environment for staff and visitors. In addition to good infection control and general hygiene in the workplace, employers can prevent transmission by:

- Encouraging people with acute respiratory illness to keep away from the workplace.
- Providing tissues, no touch waste bins and facilities for people to wash their hands frequently.

Recognition of Cases and Outbreaks

Pandemic (H1N1) 2009 is a mild disease in most cases but a severe disease in some people. Prompt action is needed if pandemic (H1N1) 2009 is suspected. This includes being able to recognise an outbreak as early as possible so that immediate steps are taken to prevent the spread of illness.

The occurrence of three new cases of ILI in a;

- child care centre
- single class within a school or
- single dormitory within a boarding school
- in a single cell block or residence of a correctional facility
- on board a cruise ship or other passenger vessel

within a period of three days represents a likely outbreak of influenza. Any suspected outbreaks of influenza should be reported promptly to your local Public Health Unit.

The aim of the PROTECT phase is to treat the vulnerable who become ill, to treat those with moderate and severe disease and to reduce the spread of disease by isolating the ill. Those at risk of more severe outcomes are identified in Part 2.1, Table 1 of this document. You should be on the alert for influenza-like illness (ILI) in those groups.

Transmission

Pandemic (H1N1) 2009 is spread through three main ways:

- **Droplet transmission:** droplets may be spread by coughing, sneezing, or talking.
- **Direct contact transmission:** this occurs during skin-to-skin or oral contact.
- **Indirect contact transmission:** takes place when a person has contact with a contaminated object, such as bedding, furniture or utensils, which has previously been contaminated by an infectious person.

Prevention

Good hygiene and thorough frequent hand washing with soap and water or alcohol hand wash is recommended.

The pandemic (H1N1) 2009 virus can survive on hard surfaces for up to 48 hours after the surface was contaminated. Surface cleaning with a neutral detergent is therefore important to help prevent spread. To limit the spread of pandemic (H1N1) 2009 you should follow good hygiene practices. You should clean visibly soiled surfaces immediately and regularly clean frequently touched surfaces, such as handrails, desks, doorknobs, computer keyboards, toys etc.

Isolation

The only people who need to stop their normal activities are:

- People who have influenza-like illness (ILI)
- People who have been confirmed as having pandemic (H1N1) 2009.

When caring for an ill person you should refer to Part 3.9 Infection control in the workplace.

Identification of Close Contacts

Advice should be given to staff, visitor's parents and children that a case has been identified and that they should be vigilant for the emergence of influenza-like illness (ILI) in others.

Staff at risk of complications if they become infected (because they are in the vulnerable group) should avoid ill people. Ill staff should stay away from the facility or workplace until their fever resolves*

Educational Facility and Childcare Protocol

Closure of educational facilities, boarding schools and child care centres is, in general, not recommended. Teachers and child carers should be alert for any staff or children who exhibit symptoms and refer them to their health care provider in the first instance.

Children

Children who are ill with ILI should stay home and not return to the educational facility boarding school or childcare centre until fever resolves*

Siblings of ill children can still attend the facility.

The ill child should be cared for at home or away from other students if remaining at a boarding school. Ill pupils at boarding schools should be cared for in single rooms and kept separated from other students until their fever resolves*

Staff

Staff caring for students with ILI should limit contact with other staff and students until the ill student's symptoms have resolved.

Staff do not need to stay away from educational facilities, boarding schools and childcare centres unless they develop influenza-like illness (ILI).

Parents

Do not need to stay away from educational facilities, boarding schools and childcare centres unless they develop influenza-like illness (ILI).

Correctional Facility Protocol

Closure of correctional facilities is not recommended. Custodial officers should conduct daily health checks on all staff and inmates. All visitors should be checked for ILI before being permitted to enter the correctional facility.

Inmates

Inmates with ILI should be cared for in single rooms and kept separated from other inmates until their fever resolves*

Staff

Staff who are supervising inmates with ILI should limit contact with other staff and inmates until the ill inmate's fever resolves *

Staff do not need to stay away from correctional facilities unless they develop ILI

Visitors

Do not need to stay away from correctional facilities unless they have ILI

Cruise Ship or Other Passenger Vessel Protocol

Cessation of voyages is not recommended. Passengers and crew members who are ill with ILI prior to commencement of the voyage should not join the vessel until their symptoms have completely resolved. In regard to this pre-embarkation screening for ILI is important.

During the voyage, crew should encourage staff and passengers to immediately report ILI. Passengers and local support staff in places visited should not board if they have ILI.

Cruise ships are recommended to:

- Provide frequent messages to passengers and crew about hand hygiene, cough and sneeze etiquette, and seeking medical assessment if they develop respiratory symptoms and fever.
- Provide ready access to hand hygiene measures throughout the vessel (including alcohol based hand-rub and soap and running water)

Passengers

Passengers who develop ILI during the voyage should be cared for in single rooms and kept separated from other passengers until their fever resolves.¹

Staff

Staff who are caring for passengers with ILI should limit contact with other staff and passengers until the ill passenger's fever resolves.¹

Staff who develop ILI during the voyage should be cared for in single rooms and kept separated from other passengers until their fever resolves.¹

Passengers and staff who are vulnerable to serious complications of influenza (see Part 2.1 Table 1) need to reconsider their attendance on a cruise ship as contact with large numbers of people can increase the risk that they come into contact with the infection.

¹ This means the absence of fever for 24 hours, without the use of antipyretics, such as paracetamol.