



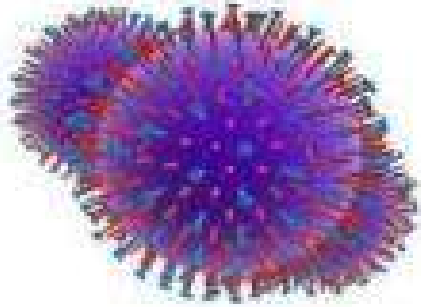
Pandemic H1N1 2009: DrillSafe Update



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Pandemic H1N1 Update

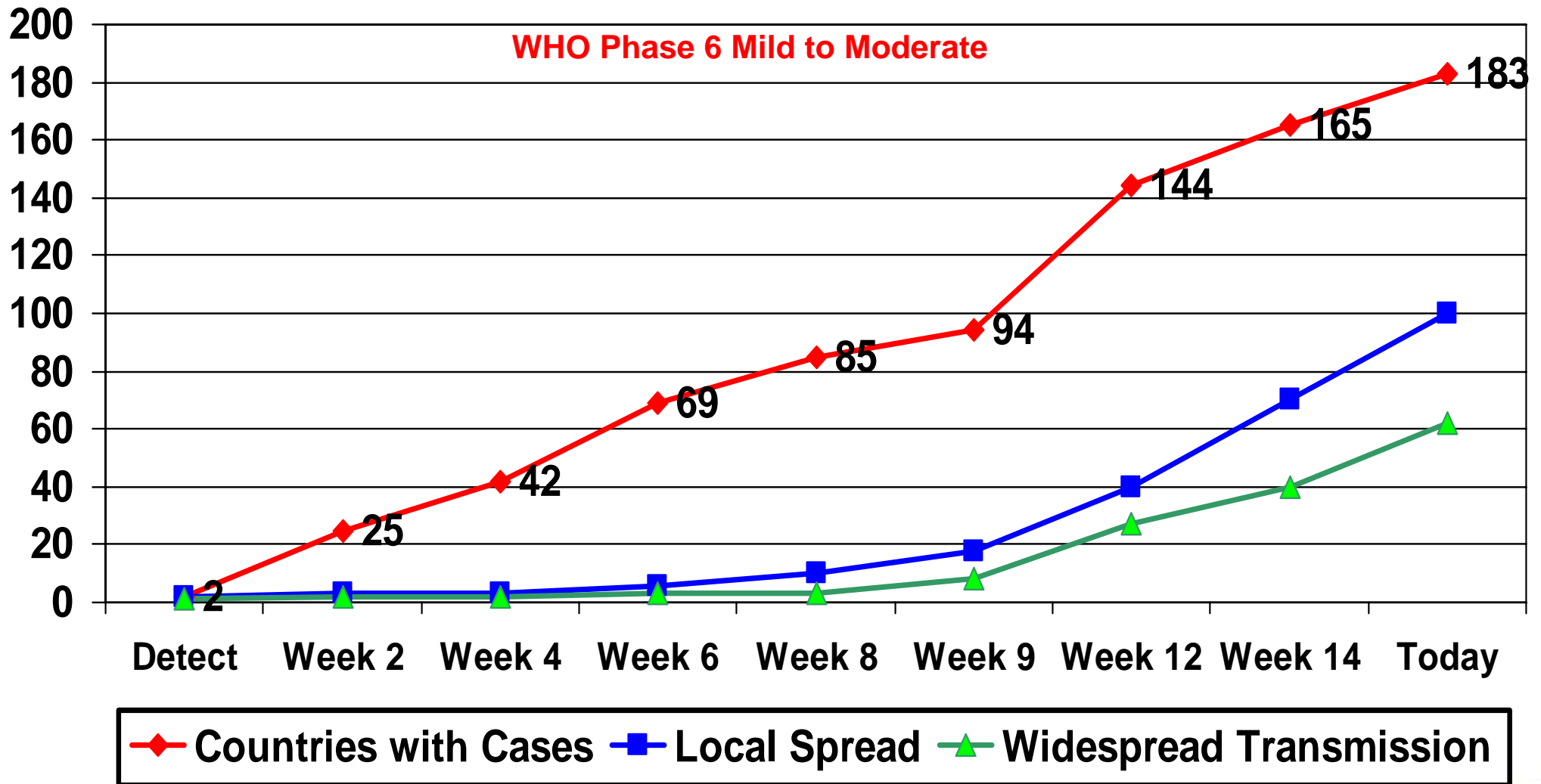


CDC.Gov USA

Pandemic H1N1 Summary Points

- Virus continues to spread with nearly all WHO reporting countries now impacted but remains a very locally driven phenomenon
- WHO stands by its estimate that up to 2 billion people could be infected worldwide
- Spread continues outside the normal influenza season in the Northern Hemisphere but at a much slower rate and has peaked in many communities and re-emerged in others
- Nature of the virus and the isolates has remained stable with no significant mutation or drift identified; most are sensitive to treatment with Tamiflu and Relenza, but treatment may not be essential for mild cases
- Absenteeism and misinformation seem to be the biggest risks to business continuity: Media coverage is confusing

Acting like a Pandemic Virus...

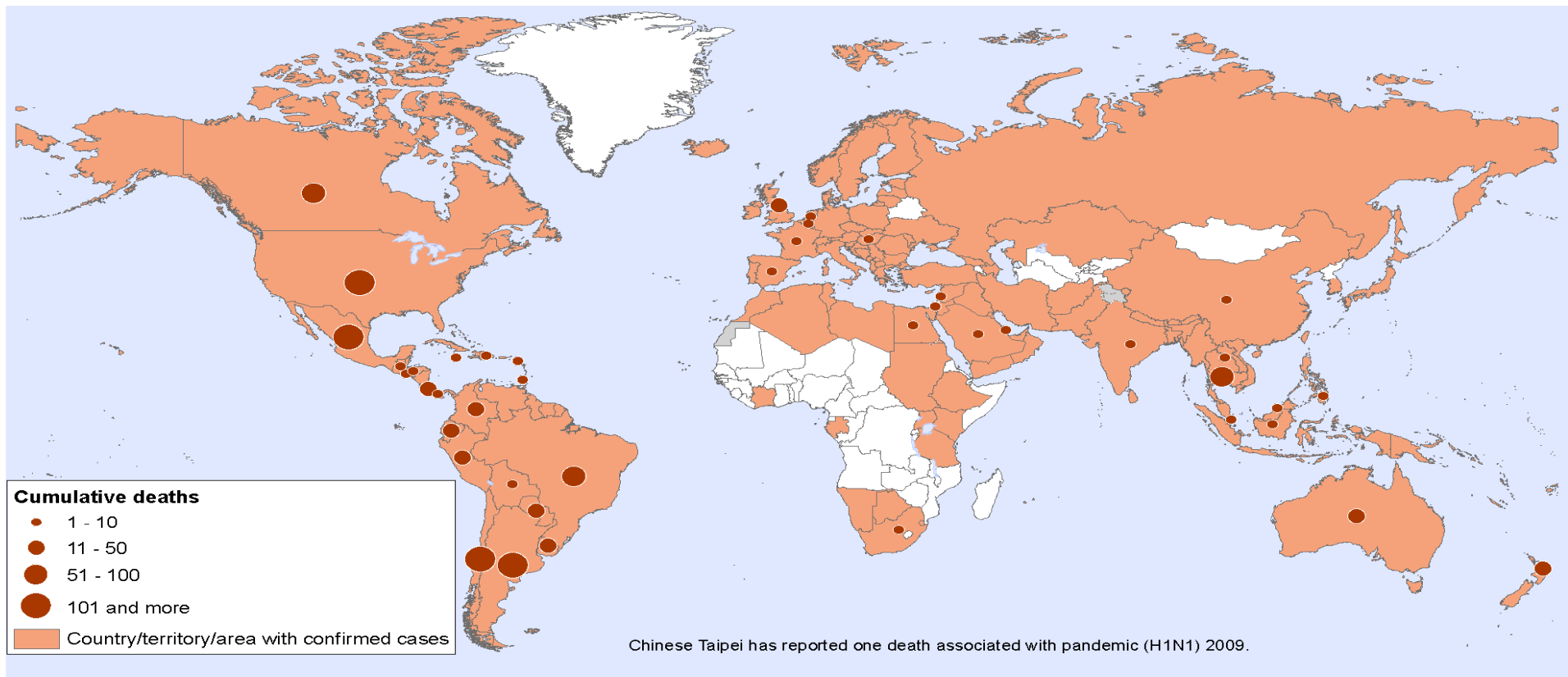


Global Snapshot...

Pandemic (H1N1) 2009

Status as of 06 August 2009

Countries, territories and areas with lab confirmed cases and number of deaths as reported to WHO



The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted lines on maps represent approximate border lines for which there may not yet be full agreement.

Map produced: 10 August 2009 14:00 GMT

Data Source: World Health Organization
Map Production: Public Health Information
and Geographic Information Systems (GIS)
World Health Organization



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Worldwide reach Human touch

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Lessons from Past Pandemics

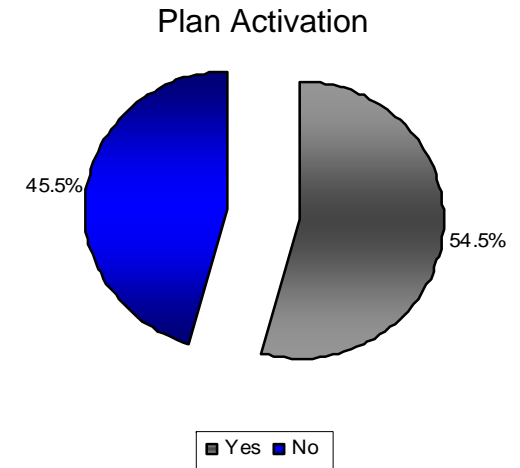
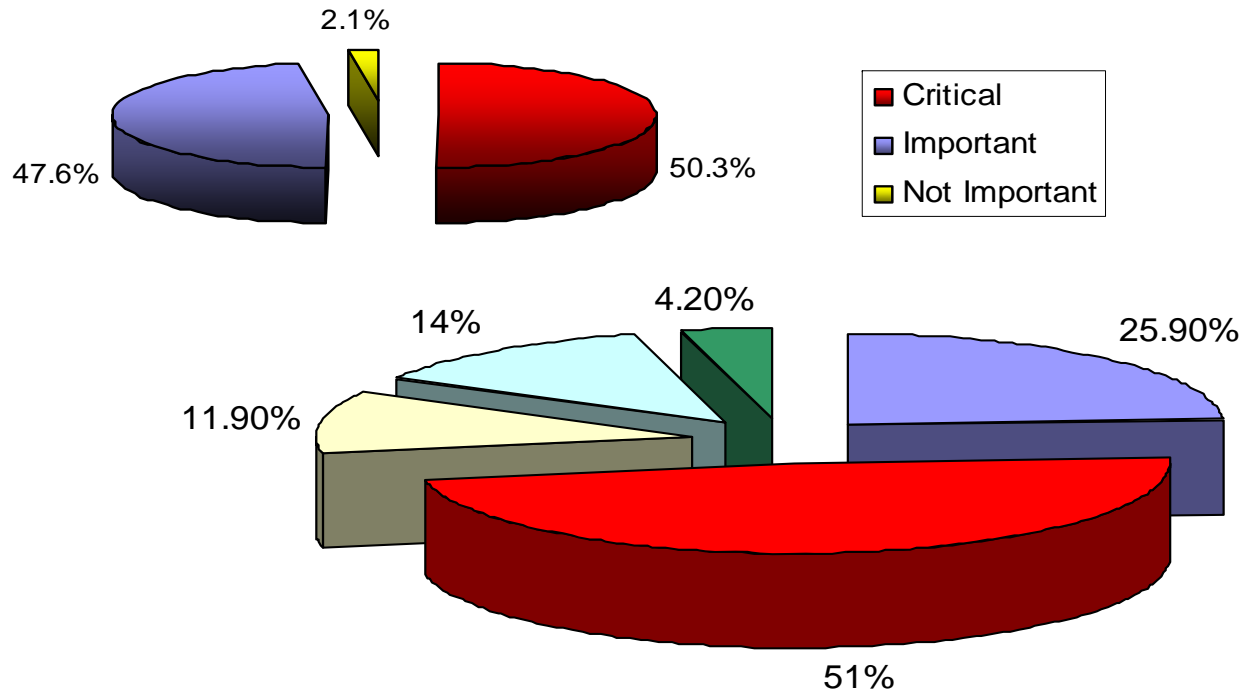
Considerations relating to history repeating

- Occurs unpredictably, not always in winter
- Great variations in mortality, severity of illness
- Pattern of illness or age most severely effected
- Rapid surge in numbers of cases over brief period of time
- Often measured in weeks
- Tend to occur in waves – subsequent waves may have mutation
- Absenteeism
- Disruption to supply and delivery chains

- **Key Lesson – unpredictability and variation.**

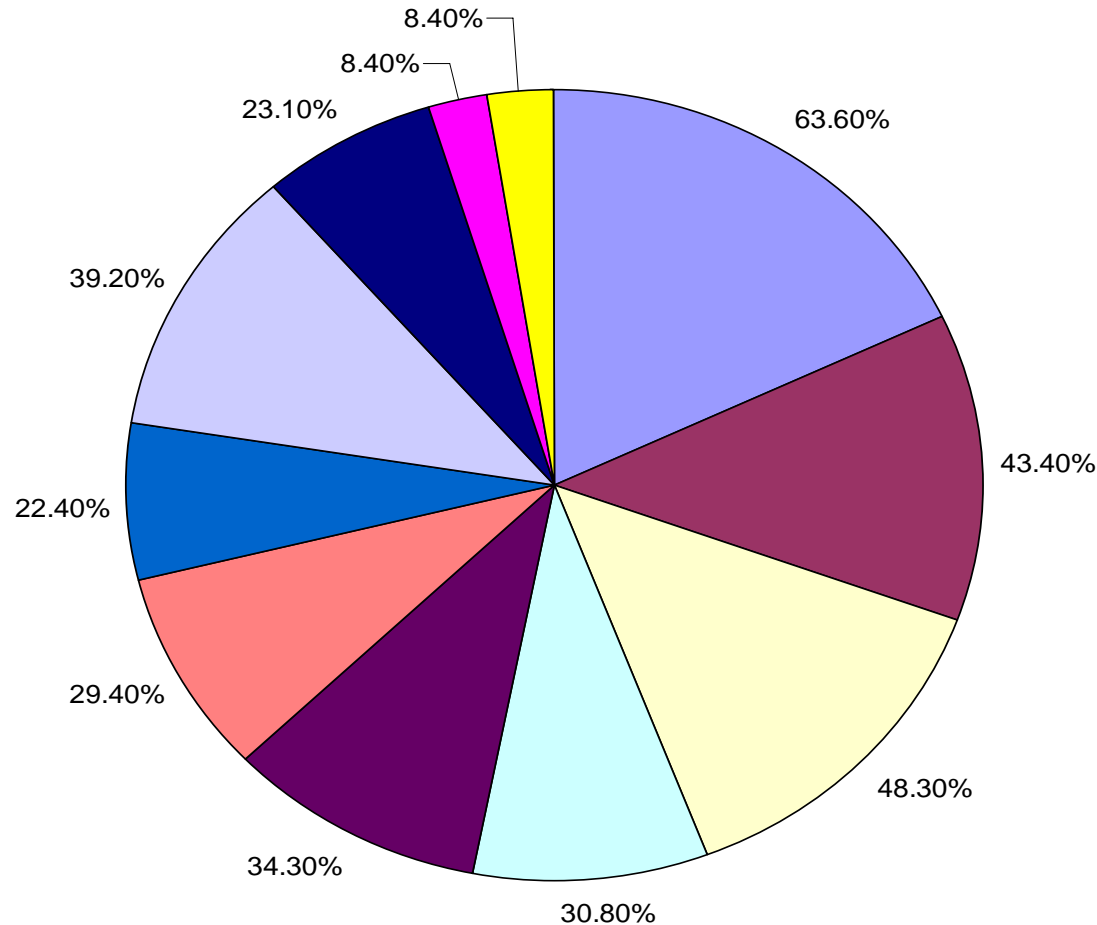


Compare Your Organization...



- Implementation is complete
- Currently implementing e.g. educating the staff, running drills and simulations, implementing travel policies
- Investigating options e.g. developing in-house experts or outsourcing
- Looking to headquarters for direction
- Pandemic is not an issue

Compare Your Organization...



- Help in understanding the relevant issues in pandemic
- Help in educating / orienting senior management to ensure support for our pandemic plan
- Help in collating relevant pandemic information into a useful structure to support our pandemic plan
- Help in building and delivering our corporate pandemic plan
- Help in reviewing and benchmarking our existing pandemic plan
- Help in training our local staff
- Help in testing the plan (i.e. table-top)
- Help in on-going pandemic surveillance (when to activate)
- Help in on-going modification and adjustment of plan once complete
- We do not require any assistance
- No answer

Offshore Challenges

Isolated environment and BCP issues

- You need a plan and you need to audit that plan

Considerations that are unique to offshore environments

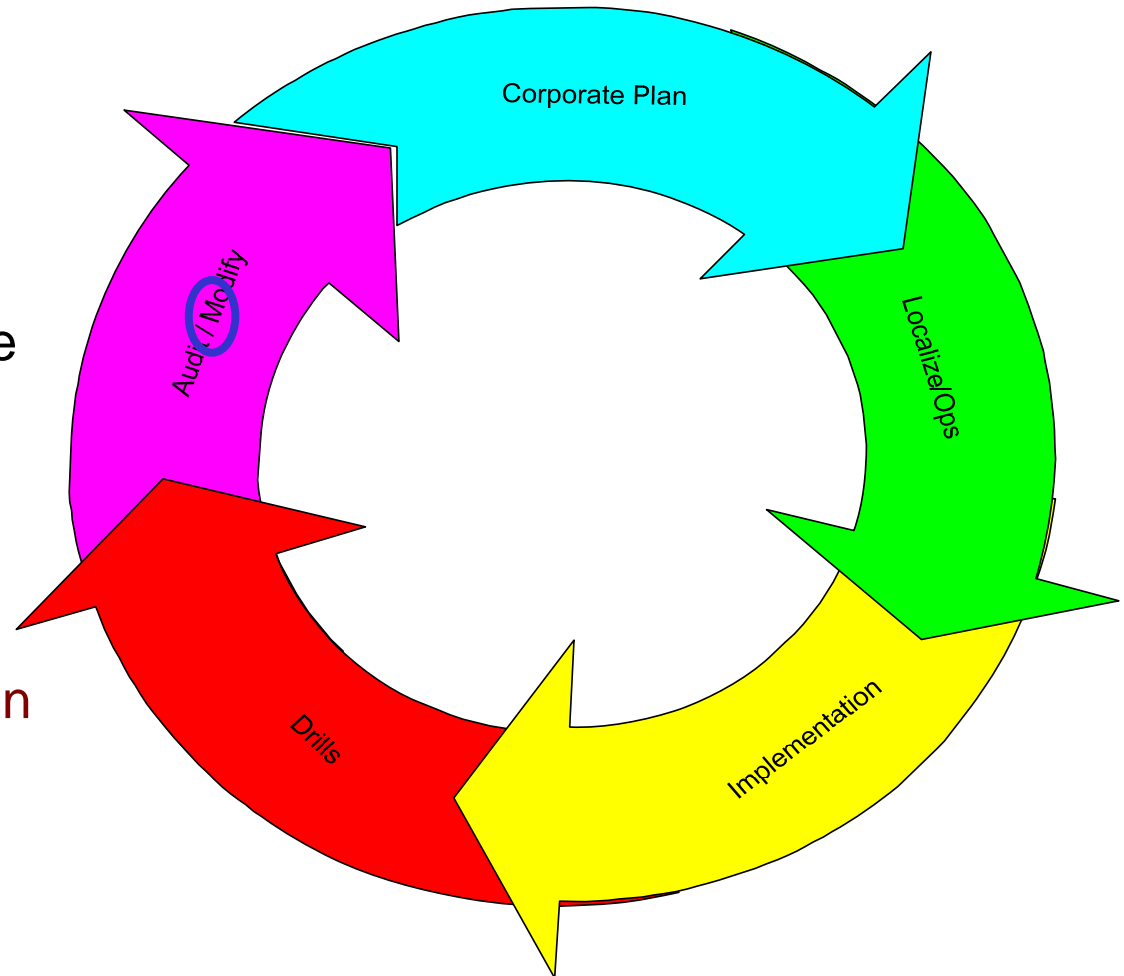
- Infection control protocols
- How to isolate someone
- When and how to evacuate
- Follow up once onshore
- Testing and treating of other staff once a case is identified
- Clinical/Medical implications and that of fear
- Quarantine periods
- Education of Staff and third parties

The answers are paramount to your planning



H1N1: Common Plan Gaps...

- Information sources
 - Decision-making expertise
 - Unanticipated risks
 - Response: Proactive vs. Reactive
 - Policy and Procedure
- The most challenging “gap” according to our survey’s is adapting and modifying the plan in a dynamic real life situation – **KNOWING WHAT TO DO AND WHEN**



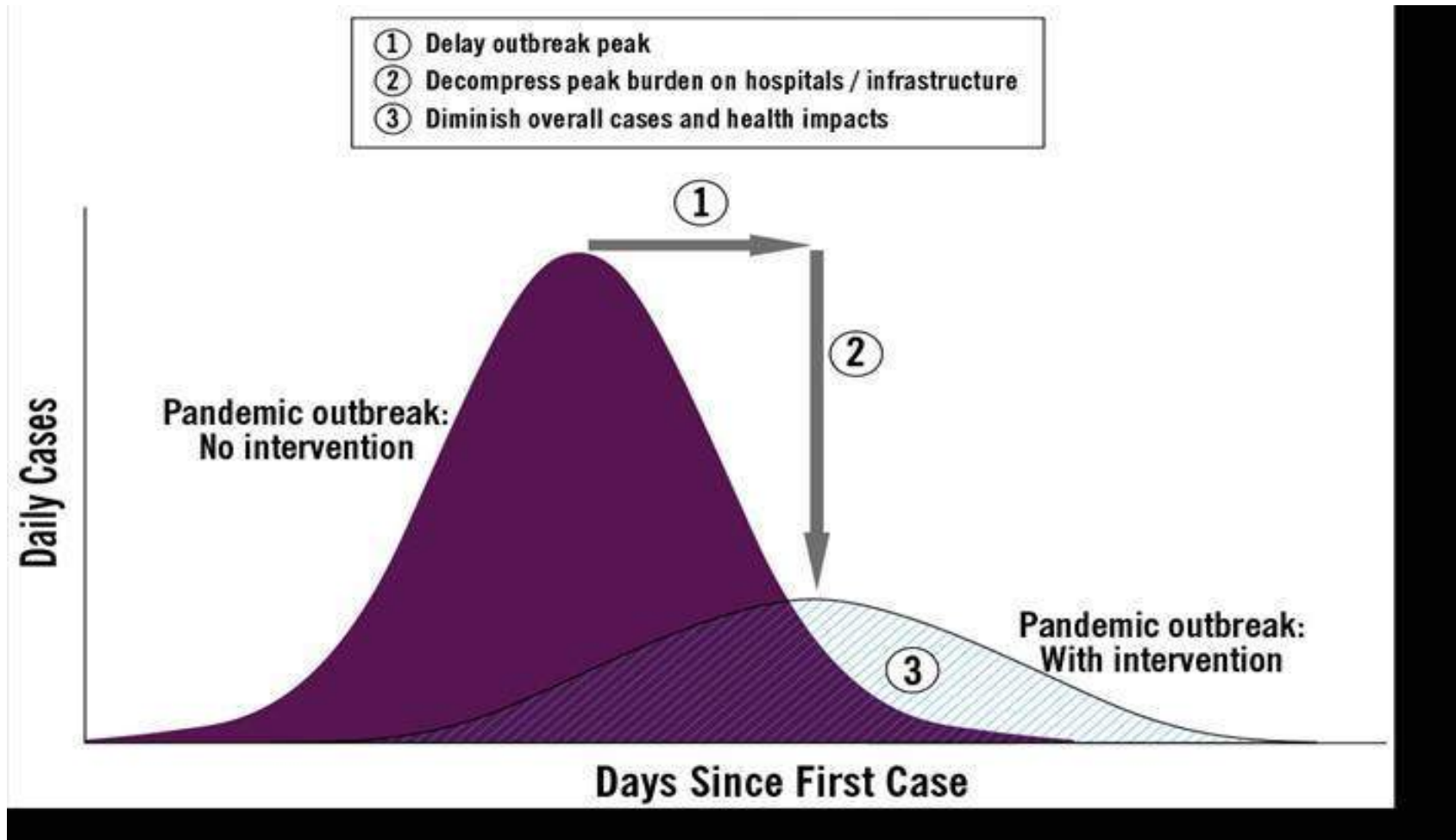
Knowing What to do

Phase 5&6 Trigger Point Definitions

Relationship between spread of a virus and its severity, and the likely impact on a community

No cases reported in country		Cases reported in country							
No cases in country		No local cases		Limited numbers of local cases		Significant or rapidly increasing numbers of local cases		No new cases in community	
No cases in country		Cases in country No cases in local community		Limited transmission in community Gradual increase in number of local cases May or may not be employee cases		Widespread transmission in community and/or Rapid increase in numbers of local cases May or may not be employee cases Considered an AFFECTED community		No (or few) new community cases Existing cases resolving	
Mild / Moderate	Severe	Mild / Moderate	Severe	Mild / Moderate	Severe	Mild / Moderate	Severe	Mild / Moderate	Severe
Likely community impact: NIL No community anxiety No effect on services	Likely community impact: NIL Community awareness/anxiety No effect on services	Likely community impact: NIL No community anxiety No effect on services No restrictions on public gatherings / schools	Likely community impact: NIL Community awareness/anxiety No effect on services Public health communications No restrictions on public gatherings / schools	Likely community impact: LOW Low community anxiety Medical services adequate Essential services unaffected Some employees may be ill - probably mild cases Some public health announcements and interventions Some restrictions on public gatherings / schools No / minimal business disruption	Likely community impact: MODERATE Some community anxiety / fear Medical services strained Essential services strained Some employees ill - may be severe cases Significant public health communications Severe restrictions on public gatherings / schools No new employee cases Most employee cases resolving Some employee cases require ongoing support Some business disruption	Likely community impact: LOW / MODERATE Low community anxiety Medical services adequate / strained Essential services unaffected or mild disruptions Some employees may be ill - probably mild cases Some public health announcements and interventions Some restrictions on public gatherings / schools Minimal business disruption	Likely community impact: HIGH High community anxiety / fear Medical services strained / overwhelmed Essential services strained / overwhelmed Significant public health communications Severe restrictions on public gatherings / schools Significant absenteeism - some employees critically ill Possible effect on workforce availability Supply chain challenges Moderate / severe business disruption	Likely community impact: LOW No community anxiety Medical services adequate Essential services unaffected No restrictions on public gatherings No new (or few) employee cases Most employee cases resolving Few employee cases require ongoing support / counseling Normal business function Preparations for next wave	Likely community impact: MODERATE Reducing community anxiety Medical services adequate / recovering Essential services unaffected / recovering Restrictions on public gatherings being lifted No new (or few) employee cases Most employee cases resolving Some employee cases require ongoing support / counseling Businesses returning to normal functions Preparations for next wave

Goals of Intervention...



The Plans that Work

- Crisis Management Team
- Communication
- Screening and quarantine
- Reducing the spread between employees
- Maintaining optimal employee health
- Managing infected employees
- Policies for Personal Protective Equipment (PPE)
- Policies for Antivirals
- Managing Travelers and Expatriates



Worldwide reach Human touch

Vaccine Considerations...

- First doses may be available in late August and September
 - “Fast Track” oversight system developed in 2007 for Avian Flu
 - Quantity of doses available is being downgraded on a regular basis as we approach delivery dates
 - May not be able to get ahead of the N. American flu season
- Clinical trials will likely continue even as product becomes available
 - Assessing safety and *dosage*
 - New seed virus with higher yields released
- Adjuvant controversy
 - Agents added to increase effectiveness of Immune response
 - Used with some experience in Europe
 - No evidence they increase risk



Vaccine Considerations...

- Some risk for confusion: Seasonal vs. Pandemic vaccine
 - Seasonal influenza vaccine still recommended and commercially available
 - 2 + 1 vaccine schedule may be difficult (seasonal+pandemic+pandemic)
 - Access outside of government sponsored locations may be difficult for pandemic vaccine
 - Do I get the vaccine if I already think I “had the flu” ??
- Availability of Pandemic vaccine for Corporate vaccination programs?
 - Full delivery will take many months
 - If yields improve production will improve
- “Mass” Vaccination campaigns unlikely
 - Availability of vaccine
 - Healthcare provider limitations
 - Prioritized groups



Vaccination Priorities...

Will not be 100% uniform

- Most countries will set their own vaccination priorities and EU unlikely reach consensus

General guidelines based on current virus behavior

- Healthcare workers and critical infrastructure
- Pregnant women
- Infant contacts (parents, caregivers) since infants will not be vaccinated
- Kids and young people (babies – 24 years old)
- Adults < 65 with chronic health issues
- Adults < 65
- Adults over 65 years old

This is *very different* than seasonal flu, where vaccination is stressed for the very young and the very old



Proportional and Measured

Recommendations for pandemic response:

- Corporate Health Management
 - Employee education continues to be paramount: MISINFORMATION
 - Nature of the illness
 - Ways to protect themselves and their families
 - Strategies to decrease spread at work
 - Symptoms of illness – seek early medical care for treatment
- Health Incident Risk
 - Sick Employee considerations
 - Manage absentee risks by reducing potential spread in the workplace
- Traveler Risk remains
 - Travel management, Pre-travel advice and Medical assistance
- Monitor Current Recommendations; Country response (aka Quarantine risks)
 - Close, On-going Surveillance for a change in the virus
- Assemble Crisis Management Team: Pandemic/Business Continuity Plan
 - Ensure plans are updated to avoid legal risks
 - Response based on virus severity, risk sensitivity and community level of activity

International SOS



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