

RISKTOPICS

Tips for Addressing a Measles Outbreak

February 2015

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INTRODUCTION

California is currently experiencing an outbreak of measles. The outbreak started in December 2014 when at least 40 people who visited or worked at Disneyland theme park in Orange County in mid-December contracted measles and as of February 2015 has spread to at least half a dozen other states.

DISCUSSION

What is Measles?

Measles is a highly contagious viral disease. It is widespread in many parts of the world, including Europe, Africa, and Asia.

Measles begins with a fever that lasts for a couple of days, followed by a cough, runny nose, conjunctivitis (pink eye), and a rash. The rash typically appears first on the face, along the hairline, and behind the ears and then affects the rest of the body, spreading down the back and trunk, to extend to the arms and hands, as well as the legs and feet. After about 5 days, the rash fades the same order in which it appeared.

When is Measles Contagious?

Infected people are usually contagious from about 4 days before their rash starts to 4 days afterwards.

Measles Immunizations

Children routinely get their first dose of the MMR (measles, mumps, rubella) vaccine at 12 months old or later. The second dose of MMR is usually administered before the child begins kindergarten but may be given one month or more after the first dose.

What to Do during an Outbreak?

According to Dr. Gil Chavez, State Epidemiologist and Deputy Director, Center for Infectious Diseases, California Department of Public Health:

***“CDPH recommends that anyone not already immunized against measles gets immunized at this time. Two doses of measles-containing vaccine (MMR vaccine) are more than 97 percent effective in preventing measles.*”**

If you are unsure of your vaccination status, check with your doctor to have a test to check for measles immunity or to receive vaccination.”

Your physician will review your individual medical history to determine if the vaccination is appropriate.

MMR vaccine as post-exposure prophylaxis

If MMR vaccine is not administered within 72 hours of exposure as vaccine should still be offered at any interval following exposure to the disease in order to offer protection from future exposures.

Evidence of Immunity

Acceptable presumptive evidence of immunity against measles includes at least **one** of the following:

- written documentation of adequate vaccination:
 - one or more doses of a measles-containing vaccine administered on or after the first birthday for preschool-age children and adults not at high risk
 - two doses of measles-containing vaccine for school-age children and adults at high risk, including college students, healthcare personnel, and international travelers
- laboratory evidence of immunity
- birth in the United States before 1957

Possible business strategies for addressing a measles outbreak are discussed below.

GUIDANCE

The current measles outbreak may not impact your business directly, but taking a few steps can minimize the impact on your business should this outbreak or another infectious disease outbreak potentially impact your business. Here are some steps you can take to prepare your business:

Develop employee communication packages. Keep your employees informed with general information on the disease outbreak and what your company is doing to keep them healthy. You will also want to communicate ways that employees can protect themselves, through proper hand washing, coughing etiquette and effective social distancing (see below). Encourage employees who have not received a vaccination (if available) to get one promptly. There are many good resources available for information on public health issues at the US Centers for Disease Control website (www.cdc.gov). Educational information and materials may also be available from your state or local health department.

Promote good personal hygiene. The following is recommended hygiene practices directly from the Center of Disease Control: <http://www.cdc.gov/flu/protect/habits.htm>. Good health habits like covering your mouth when you cough and washing your hands often can help stop the spread of germs and prevent respiratory illnesses like the flu.

1. Avoid close contact. Avoid close contact with people who are sick. When you are sick, keep your distance from others to help protect them from getting sick, too.
2. Stay home when you are sick. If possible, stay home from work, school, and errands when you are sick. You will help prevent others from catching your illness.
3. Cover your mouth and nose. Cover your mouth and nose with a tissue when coughing or sneezing. It may prevent those around you from getting sick.
4. Clean your hands. Washing your hands often will help protect you from germs.
5. Avoid touching your eyes, nose or mouth. Germs are often spread when a person touches something that is contaminated with germs and then touches his or her eyes, nose, or mouth.
6. Practice other good health habits. Get plenty of sleep, be physically active, manage your stress, drink plenty of fluids, and eat nutritious food.

Review sick leave and disability leave policies as well as any government-mandated leave policies. Consider any temporary changes that you may wish to make. For example, you may wish to provide special sick leave to those workers whose current sick leave is exhausted or adjust your sick leave policy to also apply to workers who are caring for sick family members. Encourage healthy employees to come to work and ill employees to stay home.

Review physical and security considerations - Look around your workplace and consider promoting social distancing between employee workstations to minimize potential infections. Social distancing involves reducing crowding conditions so that the likelihood that a sneeze or cough will spread the flu is minimized. It is generally suggested that good social distancing involves people spacing of 3 to 6 feet (or 1 to 2 meters).

Temporary or permanent barriers can be added to facilities and work areas to reduce the potential for the spread of virus from individuals who are sick. For example, you could increase the divider height between cubicles in an office or place a glass barrier at teller windows in a bank or at a cashier station at a convenience store.

Isolation may be needed when you have a sick individual in the work area. Examples might be a separate exam room in a doctor's office or hospital, placing an ill worker in an empty office or conference room or isolating a sick child in the school nurse's office. Consider what parts of your businesses may need isolation opportunities and look for areas in your facilities that could serve as an effective isolation point until the sick individual can be moved.

You may need to make changes in heating and air conditioning (or HVAC) systems. Hospitals have isolation rooms with separate ventilation systems, but you may wish to increase fresh intake and circulation and change air flow depending on your facilities configuration. Contact a qualified HVAC professional for advice on ways to improve your ventilation systems.

Review cleaning and disinfection practices. Some viruses can live as long as eight hours on some surfaces. Proper cleaning and disinfection are effective ways to minimize the spread of the virus through surface contact. Whether you have in-house janitorial staff or a contract cleaning service, it is important to have a comprehensive cleaning plan to help ensure all parties understand their responsibilities.

Planning is a critical component to a cleaning and disinfection program. To be effective, the plan should address four important components:

- Areas to be cleaned / disinfected
- Frequency of cleaning
- Cleaning / disinfection materials that will be used
- Material-specific cleaning procedures and techniques

Guidance from the U.S. Centers for Disease Control (CDC) indicates that routine cleaning will be appropriate for most areas. Certain high traffic areas such as the ones listed below may need additional cleaning (as often as several times daily):

- Door knobs
- Elevator buttons
- Light switches
- Faucet handles
- Publicly used telephones
- Computer monitors, mice and keyboards
- Counter tops and conference tables
- Cafeteria tables, coffee pots and vending equipment

The cleaning frequency for each area should be covered specifically in the plan and should match the significance of the cleaning and disinfection task. For example, the cleaning plan for a hospital emergency room would be different from that for an office or retail occupancy. You may also wish to provide disinfecting wipes for employees and have them available at high traffic areas such as conference rooms, shared workspaces and in the cafeteria.

For personal safety, it is important that all janitorial staff or cleaning service providers receive training on all items in the plan, including the use of appropriate personal protective equipment (PPE) such as gloves and goggles per manufacturer's recommendations. This training should also include specific processes, requirements for each area cleaned and how they will address the increased cleaning needed during a disease outbreak.

The use of disinfectants registered by the U.S. Environmental Protection Agency (EPA) is recommended whenever these are available. Lists of all registered disinfectants can be found at: <http://www.epa.gov/oppad001/chemregindex.htm>.

Many, if not all, of these products indicate potency for several target pathogens on the label. It is best to match the disinfectants as best as possible to the disease(s) of interest.

Finally, each cleaning/disinfection material has specific procedures for use that enhances its effectiveness. These materials specific procedures must be integrated into your routine cleaning and disinfection plan. Also, the cleaning and disinfection plan should be clearly documented in writing and communicated to all interested parties.

CONCLUSION

The current measles outbreak has raised concerns about the spread and impact of an infectious disease outbreak. By following some of the suggestions in this document, businesses can minimize the impact that a measles or other infectious disease outbreak may have on their business.

REFERENCES

Key websites for further information

- U.S. CDC Seasonal Flu Information for Business and Employers: Web. Accessed 20 February 2015. <http://www.cdc.gov/flu/business/>
- U.S. OSHA guidance on preparing workplaces for influenza outbreak: Web. Accessed 20 February 2015. <https://www.osha.gov/dts/guidance/flu/index.html>
- US CDC, Interim Guidance on Environmental Management of Pandemic Influenza Virus: Web. Accessed 20 February 2015. <http://www.pandemicflu.gov/professional/hospital/influenzaguidance.html>
- CleanLink. H1N1 Fact Sheet for Cleaning Professionals. Web. Accessed 20 February 2015. : <http://www.cleanlink.com/cp/article/H1N1-Fact-Sheet-For-Cleaning-Professionals--10915>

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