Section 9. Risk Communication and Public Education

1. INTRODUCTION

Risk communication and public education play a vital role in pandemic flu preparedness and response. Strong risk communications and public outreach activities help build trust, confidence and cooperation, and support effective preparedness and response efforts.

Dissemination and sharing of timely and accurate information will be one of the most important facets of the pandemic response. Instructing the public and partners in actions they can take to minimize their risk of exposure or actions to take if they have been exposed will reduce the spread of the pandemic and may also serve to reduce anxiety and unnecessary demands on vital services.

In conjunction with CCHS’ overall Crisis and Emergency Risk Communications (CERC) plan and Go-Kit, this module will help guide and prepare CCHS in communicating key messages to the general public, the news media, health care providers and other partners and stakeholders (first responders, law enforcement, local government, schools and businesses, etc.) before, during, and after a pandemic influenza.

A. Coordination

The CCHS Communications Officer and communications staff will (in consultation with the county Health Officer, CCHS Communicable Disease staff, the California Department of Health Services (CDHS), and the Centers for Disease Control and Prevention (CDC), as appropriate) identify public health issues and concerns that will or may need to be addressed through public information messages regarding pandemic influenza and identify affected target audiences for messages.

CCHS also will coordinate, as appropriate, dissemination of information with the County Chief Public Communications Officer and the Office of Emergency Services. (See the CCHS CERC Plan for more info).

Because many Contra Costa residents commute to other Bay Area counties and residents of other counties commute to Contra Costa, in conducting its risk communication efforts, CCHS will coordinate with the Association of Bay Area Health Officers (ABAHO) and the Pacific Coast Risk Communication leads.

B. Risk Communications Principles

In all emergency communication efforts, CCHS will make every effort to adhere to risk communication and ethics principles:
- Be first, be right and be credible (Balance the public’s “need to know” information in a timely manner with the need to ensure that the information is accurate)
- Engage the public in a manner that allows non-expert citizens to combine technical facts with their values
- Provide enough information to create “transparency” so the public understands how decisions are made, who is making the decisions and where the resources are going

VI. VULNERABLE POPULATIONS CONSIDERATIONS

CCHS is committed to providing health care services to those in need and most vulnerable, and actively seeks to do so as part of its Reducing Health Disparities commitment. Including vulnerable populations and the organizations that serve them in pandemic flu risk communication planning is consistent with CCHS’ mission to reduce health and health care disparities and serve those most in need and vulnerable in Contra Costa.

The following issues will be taken into consideration as preparedness and response actions are implemented:

1. Key messages delivered in multiple languages (English and Spanish, and others as resources allow).
2. Key messages delivered in multiple communication modes.
3. Key messages delivered through grass roots mechanisms (community- and faith-based) to people who are homeless, geographically or culturally isolated.
4. Key messages delivered to people who are homebound, including those with services (Meals On Wheels, In-Home Support Services, etc.) and without services.

B. Desired Outcomes

1. Provide timely and accurate pre-event information to the public about pandemic influenza, pandemic influenza preparedness and actions, as well as CCHS plans.
2. During a pandemic event, provide the most current and accurate information including what is happening, what is being done, and what people can do to protect themselves.

C. Phases

The World Health Organization (WHO) identifies six distinct phases of a pandemic. For the purposes of planning, CCHS has incorporated these six phases into three periods: Interpandemic/Pandemic Alert Period; Pandemic Period; and Post-Pandemic Period. In CCHS’ CERC plan, these periods correspond to Preparedness Activities; Response Activities; and Recovery Activities. In particular, CCHS will use
the CDC’s Severity Index and the Contra Costa to recommend appropriate actions for CCHS staff, health providers, first responders, partners, schools, stakeholders, the public and the media, along with the WHO phases, the Federal Government Response Stages. (See Sect. 1 Introduction for the Pandemic Flu Phases Table and Sect. 7 Non-Pharmaceutical Interventions for the CDC Severity Index and the Contra Costa Response Triggers Matrix)

II. COMMUNICATIONS INFRASTRUCTURE

CCHS will use a range of communication methods (see Appendix XX CCHS Methods of Communications table for a complete listing of priority communication channels and redundant communications) as appropriate to notify CCHS staff, health providers, first responders, partners, stakeholders, the public and media of changes in pandemic flu stages and to inform them of recommended actions, such as the use of Personal Protective Equipment (PPE) and social distancing.

A. Interpandemic/Pandemic Alert Period
During this period, CCHS will:

- Test local communication systems, including ReddiNet, CAHAN, satellite phones, Blast Fax, the CCHS website and website remote access (HEWIE), Health Emergency Information Line (HEIL), the Health Emergency Call Center, the Incident Response Information System (IRIS), etc., through trainings, drills and exercises to ensure that local and statewide communications are functional.
- Establish and maintain health care provider contact info in Blast Fax.
- Maintain Media Blast Fax and email contact list.
- Maintain Blast Fax for CBOS, etc.
- Maintain contact lists for business and industry partners, schools and colleges, day care providers, organizations that serve vulnerable populations, etc. (See complete list of contacts in Appendix XXX and also in the CCHS CERC plan Go-Kit.)
- Utilize 211: as this system rolls out in Contra Costa County, CCHS will make use of the service, which includes the County Online Resource Database (CORD), which is maintained by the Contra Costa Crisis Center and provides a one-stop service for information and referrals for the public (available also on the CCHS website site: www.cchealth.org).

B. Pandemic Period
During a pandemic, CCHS will follow WHO, CDHS and CDC guidance to issue recommendations locally, and will:

- Use CCHS communications methods to notify hospitals, public and private health care providers, first responders, other appropriate Public Information Officers, and other public and private sector partners and stakeholders of the change in pandemic stage.
• Implement contingency plans, if any, for obtaining critical hardware, software, or personnel to expand communications systems if needed for a pandemic.

• Maintain ongoing communication with health care providers, first responders, all partners and stakeholders, including posting information on the CCHS website, CAHAN, and ReddiNet.

C. Post Pandemic Period (Recovery)
• Take appropriate corrective action steps identified in After Action reports.
• Return to Interpandemic/Pandemic Alert Period Activities.

III. COMMUNICATING WITH THE GENERAL PUBLIC

Message Development
Messages are developed with key CCHS staff and are approved by the Health Officer, and as appropriate with the CDHS and CDC. CCHS also will coordinate, as appropriate, with the Association of Bay Area Health Officers (ABAHO) and the Pacific Coast Risk Communication leads.

During the course of pre-event activities and especially during a pandemic influenza event, messages and other information will be updated and customized.

A description of key messages is included in the final section of this module and also included in the Pandemic Flu Section of the CCHS CERC Plan Go-Kit.

A. Interpandemic/Pandemic Alert Period
During this period, CCHS will:
Develop key messages for printed materials, public presentations, and for the news media. Provide a solid foundation of information upon which future actions can be based. Key messages address CCHS activities, including planning efforts, as well as avian influenza education, pandemic influenza and general preparations.

B. Pandemic Period
Update and further develop key messages as the situation warrants. Messages are used primarily for communicating key actions to the general public through the news media. Materials will be posted to the CCHS website as they are developed.

C. Post Pandemic Period (Recovery)
Take appropriate corrective action steps identified in After Action reports. Return to Interpandemic/Pandemic Alert Period Activities.
Public Education & Awareness Campaign
The public is more likely to respond and cooperate more readily if they are involved in the discussions and planning for pandemic influenza, have general knowledge of the situation, are aware of the issues and concerns that are to be addressed, and understand their individual role and responsibilities. Planning checklists for individuals and families, businesses, faith-based organizations and community organizations have been created and are posted on the CCHS pandemic flu web page (www.cchealth.org).

See the appendix for CCHS’ pandemic planning tool kits for schools and day care providers and checklists for law enforcement, media and others.

A. Interpandemic/Pandemic Alert Period
During this period, CCHS will:
Conduct a public education and awareness campaign as resources allow. Key message are used in the various components of the campaign, which is directed to the general public and conducted in two languages, English and Spanish. (See Risk Communication/Public education Strategies section of this module for a full list of communication strategies.)

Depending on resources, the following tools may be utilized in a public education and awareness campaign:
- Education materials on pandemic flu
- Media campaigns
- Bill Inserts
- Web Postings
- Scripts
- Radio Ads and PSAs
- Print ads
- Theater and Mall Signs
- Bus Shelters, Bus Interior Signs, Bus Board
- Billboards
- Television ads
- Contra Costa Television shows
- Health Emergency Information Line (HEIL)

B. Pandemic Period
During this period, CCHS will:
Continue and increase public education and awareness campaign as resources allow. Key messages are used in the various components of the campaign, which is directed to the general public and conducted in two languages, English and Spanish.

Use pandemic flu information materials available in Chinese and Vietnamese on the federal government’s pandemic flu website (www.pandemicflu.gov)

Update current materials and develop new materials as the situation warrants. Updated materials will be posted as they are developed to the CCHS website, the HEIL line, etc.
C. Post Pandemic Period (Recovery)
Take appropriate corrective action steps identified in After Action reports. Return to Interpandemic/Pandemic Alert Period Activities.

Material Development

A. Interpandemic/Pandemic Alert Period

During this period, CCHS will:
Develop materials providing information to the general public, media and healthcare and other partners. Pandemic Flu Preparedness Tool Kits have been developed for schools, day care providers and the media and are available for download on the CCHS website.

The following tools are available on the CCHS website (www.cchealth.org) and in the CCHS CERC plan Go-Kit: (Most are available in both English and Spanish)

Planning Tools
- Pandemic Flu School Action Kit
- Pandemic Flu Kit for Child Care Providers
- Pandemic Flu Planning Checklist for Individuals and Families
- Pandemic Flu Planning Checklists for: businesses, travel industry, schools, child care providers and preschools and colleges, law enforcement and media.

Fact Sheets/Brochures (many available in multiple languages)
- Ways to Protect Yourself brochure
- Facts about Pandemic Flu
- Parents Tips
- What You Can Do to Prepare for Pandemic Flu
- Home Care for Pandemic Flu (American Red Cross)
- Resources for Emergency Information

Posters (many available in multiple languages)
- Cover Your Cough Poster
- Germ Free Zone
- Be A Germ Stopper
- Stopping the Flu is Up to You!
- Keep Our School Healthy
- How Does Seasonal Flu Differ from Pandemic Flu?
- Stop Disease
- Wash Your Hands Poster
- During a Flu Outbreak: When do I keep my child home?

Power Points/Videos
- Pandemic Flu Power Point presentation
Locally produced videos on health emergency issues in both Spanish and English, including one on the difference between Avian Flu and Seasonal Flu. (See Appendix XXX)

B. Pandemic Period
Update current materials and develop new materials as the situation warrants. Updated materials will be posted to the CCHS website as they are developed.

C. Post Pandemic Period (Recovery)
Take appropriate corrective action steps identified in After Action reports. Return to Interpandemic/Pandemic Alert Period Activities, as appropriate.

Health Emergency Information Line

A. Interpandemic/Pandemic Alert Period
During this period, CCHS will:
Update the Health Emergency Information Line (HEIL), which already includes pre-recorded scripts in English and Spanish. The HEIL recordings will reflect updated pandemic influenza information.

B. Pandemic Period
HEIL will be fully activated and messages deployed to respond to calls from the general public. Scripts will be updated and staff will be briefed at regular intervals. The Health Emergency Call Center may be activated as part of the EOC activation to handle calls from the public.

C. Post Pandemic Period (Recovery)
Take appropriate corrective action steps identified in After Action reports. Return to Interpandemic/Pandemic Alert Period Activities, appropriate. Messages will be removed as appropriate and returned to normal mode.

CCHS website

A. Interpandemic/Pandemic Alert Period
During this period, CCHS will:
A Pandemic Influenza page has been created on CCHS’s website- which also is available in Spanish- and is updated as new information is available. The webpage includes pandemic planning and preparedness materials for the general public as well as schools, CBOs, law enforcement, media, health care providers, etc. The webpage also includes links to the state health department and CDC.

B. Pandemic Period
The website will be updated regularly. The website also can be remotely accessed through CCHS’ HEWIE program, though which CCHS communications staff implement an emergency activation status and post information remotely as needed.
C. Post Pandemic Period (Recovery)
HEWIE will be deactivated as appropriate and CCHS will take appropriate corrective action steps identified in After Action reports. Return to Interpandemic/Pandemic Alert Period Activities, as appropriate.

IV. WORKING WITH THE NEWS MEDIA

Media Information/Education

A. Interpandemic/Pandemic Alert Period
During this period, CCHS will:
Develop a packet of materials for the news media. The packet includes CCHS materials as well as approved outside materials. These materials include samples of public education materials, guidelines for business planning, and guidelines for personal protection. CCHS has already distributed a “Media Pandemic Flu Planning Kit” to local media.

The following tools are included in the Media Pan Flu Kit (which is in the CCHS CERC Go-Kit)

- Media Pandemic Influenza Preparedness Checklist
- Self Care for the Media
- Newsroom Planning for Crisis Coverage

Hold informational meetings, which are done as part of periodic Media Roundtables presented by CCHS and the Contra Costa Emergency Public Information Officer team (EPIO), which staff the county’s Public Information Center (PIC) during an EOC activation or would work in a JIC, if activated. (See the CCHS CERC Plan for more info).

B. Pandemic Period
Communicate regularly with the media to disseminate pandemic flu information. Refer to the CCHS CERC plan for more details.

More pan flu education materials will be distributed to the media as appropriate, including:
- Cover Your Cough Poster
- Wash Your Hands Poster
- Home Care for Pandemic Flu (American Red Cross)
- Resources for Emergency Information
- Ways to Protect Yourself brochure

C. Post Pandemic Period (Recovery)
Take appropriate corrective action steps identified in After Action reports. Update materials as needed. Return to Interpandemic/Pandemic Alert Period Activities, appropriate.
V. Communicating with the Media

A. Interpandemic/Pandemic Alert Period
During this period, CCHS will:
Inform the media of ongoing pandemic flu preparedness activities and conduct information meetings.

B. Pandemic Period
During this period, CCHS will:
Updated public information and risk communication materials about pandemic flu will be distributed regularly to the media as part of ongoing media outreach through press releases, web postings, media interviews and press conferences. (See section below for a full list of communication strategies, and refer to the CCHS CERC plan Go-Kit for a complete description of risk communication implementation.)

C. Post Pandemic Period (Recovery)
Take appropriate corrective action steps identified in After Action reports. Update materials as needed. Return to Interpandemic/Pandemic Alert Period Activities, as appropriate.

Spokesperson Training

A. Interpandemic/Pandemic Alert Period
During this period, CCHS will:
Identify, train and drill CCHS and other county spokespersons on specific pandemic influenza risk communications. Conduct an informational training with healthcare provider PIOs and appropriate members of the county’s Emergency Public Information Officer team (EPIO) and/or the Contra Costa PIN group.

The following tools have or will be developed:

- Crisis and Emergency Risk Communication (CERC) trainings
- Talking Points

B. Pandemic Period
Updated public information and risk communication materials about pandemic flu will be distributed regularly as part of ongoing public outreach. Refer to the CCHS CERC plan for a complete description of risk communication implementation.

C. Post Pandemic Period (Recovery)
Take appropriate corrective action steps identified in After Action reports. Update training and materials as needed. Return to Interpandemic/Pandemic Alert Period Activities, as appropriate.
V. COORDINATING WITH HEALTHCARE PUBLIC INFORMATION OFFICERS

A. Interpandemic/Pandemic Alert Period
During this period, CCHS will:
CCHS is currently working with local hospital PIOs through the Hospital Disaster Forum to maintain a hospital PIO contact list. (See section below on Risk Communication Guidance for Hospitals and Sect. 6. Infection Control and Prevention for infection control guidance for hospitals and health care providers.)

The following tools have been or are being developed for hospitals:
- Pandemic Flu Fact Sheets
- Frequently Asked Questions, Cover Your Cough posters, etc.
- Pandemic Influenza Updates
- Other Materials as determined and approved

B. Pandemic Period
During this period, CCHS will:
Communicate regularly with hospital PIOs about CCHS activities as well as any new developments regarding avian and/or pandemic flu. Healthcare PIO information will be communicated primarily through email, Reddinet, CAHAN and fax, as appropriate.

Provide updated public information and risk communication materials about pandemic flu will be distributed regularly as part of ongoing public outreach. (See section below for a full list of communication strategies, and refer to the CCHS CERC plan Go-Kit for a complete description of risk communication implementation.)

The following tools will be utilized for providing current information:
- Health alerts
- Pandemic Influenza

C. Post Pandemic Period (Recovery)
Take appropriate corrective action steps identified in After Action reports. Update training and materials as needed. Return to Interpandemic/Pandemic Alert Period Activities, as appropriate.

VI. COMMUNICATING WITH KEY PARTNERS

The CCHS Communications Officer and CEI unit provides support to Public Health staff and programs that are primarily responsible for outreach, coordination and content development with key partners and stakeholders. These key partners include: the County Board of Supervisors, businesses, city governments, colleges and universities, community-based and faith-based organizations, coroner, county government, emergency medical services and pre-hospital responders, environmental health, fire services, County legal/court system, law enforcement agencies, local healthcare system, mental health, news media, airport, local transit and schools.
Maintain contact lists for business and industry partners, schools and colleges, day cares, organizations that serve vulnerable populations, etc. (See complete list of contacts in Appendix XXXX and also in the CCHS CERC plan Go-Kit)

**Provide Existing Materials**

**A. Interpandemic/Pandemic Alert Period**

*During this period, CCHS will:*

Make existing materials available for distribution. Key partners may use these materials for distribution to employees, customers, clients, vendors, etc. Post all information to the CCHS website.

The following tools will be provided to key partner organizations:
- Fact Sheets – Pandemic Flu, Avian Flu, Isolation & Quarantine
- Frequently Asked Questions
- Pandemic Influenza Updates
- Scripts
- Pan Flu preparedness checklists
- Other materials as developed

**B. Pandemic Period**

Updated public information and risk communication materials about pandemic flu will be distributed regularly as part of ongoing public outreach. Refer to the CCHS CERC Plan for a complete description of risk communication implementation.

**C. Post Pandemic Period (Recovery)**

Take appropriate corrective action steps identified in After Action reports. Update training and materials as needed. Return to Interpandemic/Pandemic Alert Period Activities, appropriate.

**VII. RISK COMMUNICATION/PUBLIC EDUCATION STRATEGIES**

CCHS will use the following communication strategies as appropriate to notify providers, first responders, partners, stakeholders, the public and media of changes in pandemic flu stages and inform them of recommended actions to prepare for, prevent, respond to, and recover from pandemic flu. Based on federal and state guidance and in consultation with the County Health Officer and CCHS Communicable Disease staff, CCHS communications staff will perform public education activities and disseminate information on recommended actions to the public, such as the use of Personal Protective Equipment (PPE), school dismissal or closures and other risk reduction measures.

**A. Interpandemic/Pandemic Alert Period**

The CCHS Communications Officer/PIO and staff will prepare on an ongoing basis to respond to a pandemic through the following preparedness activities and strategies:
- Conduct community education and media campaigns on pandemic flu, disease prevention and CCHS preparedness activities.
- Work with schools, child care providers, law enforcement and volunteer organizations (such as the American Red Cross) to coordinate pandemic flu preparedness and response plans (i.e. CCHS’ Pandemic Action Kit for Schools and the Law Enforcement Pan Flu Preparedness Checklist- see CCHS website).
- Maintain and update the CCHS CERC plan and pandemic flu plan components as needed, including fact sheets, media contact lists, Blast Fax list, website.
- Create and maintain a Pandemic Preparedness page on the CCHS website.
- Create and update pandemic flu messages to be activated when needed on the Health Emergency Information Line (HEIL).
- Designate and train appropriate pandemic spokespersons.
- Develop pandemic flu materials for advice nurses and staff that would be in the Health Emergency Call Center.
- Educate CCHS staff about pandemic flu planning, preparedness and response.

B. Pandemic Period
During this period, communicating information to the public in a timely and accurate manner will be essential to ensure compliance with health directives. CCHS will use a variety of strategies to communicate with partners and the public to provide appropriate messages.

Pandemic Period Strategies
To get out information quickly, CCHS will use a number of redundant communications methods:

- Update the Health Emergency Information Line (HEIL) on a regular basis as appropriate.
- Activate Health Emergency Call Center, as needed.
- Modify and update written materials (such as fact sheets, materials in the Schools Pandemic Action Kit, etc.) as needed.
- Activate emergency mode for CCHS website if appropriate.
- Post documents intended for electronic distribution on CCHS website.
- Provide press releases, web postings, media interviews and press conferences for media on a timely basis
- Modify, if necessary, templates and prepared key messages in the CCHS CERC Go-Kit.
- Implement public information campaigns by creating PSAs to air on local cable television, as well as broadcast media.
- Provide advice nurses, call center staff and any phone answerers with latest pandemic flu information on prevention, treatment, etc.
- Alert schools, child care providers, law enforcement and other local public and private agencies of the need to activate their own pandemic flu response plans.
- Provide risk communication guidance to hospitals in Contra Costa.
- Disseminate guidelines on influenza precautions for workplaces, health care facilities, schools, jails and prisons, public safety agencies, and individuals.
- Provide internal information to employees through the CCHS Employee Emergency Hotline, Intranet, Incident Response Information System (IRIS), All Staff email messages, the media and other mechanisms.
- Communicate with partners and stakeholders (including county Board of Supervisors) and keep them updated, including if and when school and child care closures or dismissals are needed.
- Coordinate messages with appropriate agencies, such as the county Office of Emergency Services, the state health department, the CDC and law enforcement.
- Identify contact person (and backup person) for communication with state Department of Health Services risk communication/PIO staff.
- Use PIO mutual aid as needed.
- Staff Public Information Center at county Emergency Operation Center and/or Joint Information Center (JIC) as needed.

**Pandemic Period Messages**
During a Pandemic Period, messages that need to be communicated will include information on at least the following (See CCHS CERC Go-Kit Pandemic Flu Section for messages.)

- Projected severity of the new virus.
- Current surveillance information.
- Travel alert information received from the State and/or CDC.
- Risk reduction tips and other instructions to the general public, health care providers, first responders, partners and stakeholders, including the importance of hand washing, social distancing and other nonpharmaceutical interventions, as appropriate.
- Availability and location of vaccine supply and antiviral use, as applicable.
- Locations of mass vaccination clinics (PODs) and instructions for getting and taking medications.
- Vaccination priorities, as applicable.
- Availability of CCHS essential services.

**C. Post-Pandemic Period (Recovery)**
Because pandemic flu is predicted to come in waves, the recovery period may be delayed for several cycles. CCHS’ goal is to return CCHS services to normal as quickly as possible. Recovery period activities will include:

- Restore website, HEIL and Employee Emergency Information Hotline to normal function.
- Correct deficiencies identified in After Action Reports.
- Update Fact Sheets and appropriate materials in the CCHS CERC Go-Kit.
- Evaluate media coverage.
- Return to Interpandemic/Pandemic Alert Period activities.
**VIII Hospital Risk Communication**

Pandemic influenza risk communication strategies are a critical and necessary component of pandemic influenza preparedness and response. Hospitals will play an important role in providing vital information to the public, health care providers and hospital staff before, during and after a pandemic to help ensure people respond appropriately to outbreak situations and follow public health measures. To ensure that this information be consistent, accurate and timely, it is critical that hospitals coordinate pandemic flu messages with local public health officials.

The CCHS Communications Officer/Public Information Officer (CCHS PIO) will collaborate with the Contra Costa County Chief Public Communications Officer and/or the County’s Emergency Public Information Office (EPIO), taking the lead in development of public health and medical risk communication materials for release to the public, business community, schools, and critical infrastructure including healthcare facilities. Hospital Public Information Officers (PIOs) should initiate and maintain a close working relationship with the CCHS PIO, if they have not already done so.

Information regarding a pandemic and the planning for it is coming from a variety of sources. The federal government provides background information and frequent updates for healthcare professionals through the website, www.pandemicflu.gov. Additionally the Centers for Disease Control (CDC) provide information through CDC’s Emergency Communication System. At the state level, the California Department of Health Services (CDHS) provides clinician alerts using the California Health Alert Network (CAHAN), and convenes regular conference calls with local Health Officers and other partners. Information is also provided by Local Health Officer through CCHS to hospitals and health care centers via alerts, the Hospital Disaster Forum and other partners, such as the Community Clinics Consortium. To reduce the likelihood of conflicting or confusing messages across the healthcare system, every effort should be made to coordinate media content between CCHS and hospitals. This is true during both the Interpandemic/Alert Period and Pandemic Period

**Interpandemic/Alert Period**

During the Interpandemic/Alert Period it is important for hospitals to establish methodologies for assuring that the most current information is being received from and provided to the CCHS PIO. Communication channels may include: REDDINET, CAHAN, Blast Fax, email, etc. (See Appendix XXX CCHS Communication Methods for a full description of the possible communications methods.)

Information received should be shared with those appropriate individuals within the organization, such as health care providers, other staff, patients and partners. Hospitals are encouraged to include risk communications strategies in their hospital pandemic plan, and preparation for implementing the following strategies are recommended:

1. External Communication
The CCHS PIO will maintain a single source of contact with each hospital. Current contact information should be provided by each hospital and a plan developed to ensure the information is updated, as needed.

Hospital PIOs should consider participating in a PIO network, such as the Contra Costa Public Information Network, and/or attending the Hospital Disaster Forum meetings.

Hospitals should prepare, or utilize messages provided by CCHS PIO or EPIO, for use in call centers, websites, hotlines, recorded messages, etc. These messages should be differentiated for patients, community, and employees.

Hospitals should identify and train individuals who may be expected to support the hospital PIO or serve as the hospital spokesperson during periods where there is increased communication flow related to pandemic flu.

2. Internal Communication

Hospitals will develop mechanisms for sharing pandemic flu planning with employees.

Hospitals will develop frequently asked questions, or utilize those provided by CCHS, which target hospital personnel, differentiating them for patients, and the community.

Pandemic Period

During the pandemic period, hospital PIOs are encouraged to:

1. Maintain a single source of contact with the CCHS PIO, ensuring this information is updated, as needed.
2. Use established mechanisms for external communication with the media and a PIO network.
3. Determine how to keep administrators, personnel, patients, and visitors informed of the ongoing impact of pandemic influenza on the facility and the community;
4. Ensure capacity for increases in communication flow related to pandemic flu; and
5. Establish communication with any area Joint Information Center (JIC) as appropriate, if activated. The county Emergency Operations Center may open a JIC.

Education and Training

Each hospital is encouraged to develop an education and training plan that addresses the needs of staff, patients, family members, and visitors. Hospitals will need to assign responsibility for coordination of the pandemic influenza education and training program and identify training materials—in different languages and at different reading levels, as
needed—from HHS agencies, state and local health departments, and professional associations.

The following guidelines, taken from the HHS Pandemic Influenza Plan, provide a basis for inclusion of education and training in the hospital’s Pandemic Influenza Plan. CCHS and/or the state health department will provide current information that should be used in developing education and training content.

**Interpandemic/Alert Period**

Each hospital is encouraged to develop a plan to provide staff education. Topics for staff education should include infection control strategies for the control of influenza, including respiratory hygiene/cough etiquette, hand hygiene, standard precautions, droplet precautions, and, airborne precautions. (See also Sect. 6 Infection Control and Prevention guidelines for health care settings.)

1. Hospital-specific topics for staff education should include:
   a. Policies and procedures for the care of pandemic influenza patients, including how and where pandemic influenza patients will be located;
   b. Pandemic staffing contingency plans, including how the facility will deal with illness in personnel;
   c. Policies for visitation;
   d. System for reporting suspected cases of infection caused by novel influenza strains during the Interpandemic and Alert periods to CCHS; and,
   e. Measures to protect family and other close contacts from secondary occupational exposure;

2. Hospitals should also:
   a. Establish a schedule for training/education of clinical staff and a mechanism for documenting participation. Use annual infection control updates/meetings, medical Grand Rounds, and other educational venues as opportunities for training on pandemic influenza;
   b. Cross-train clinical personnel, including outpatient healthcare providers, who can provide support for essential patient-care areas (e.g., emergency department, ICU, medical units);
   c. Train intake and triage staff to detect patients with influenza symptoms and to implement immediate containment measures to prevent transmission;
   d. Create a mechanism for supplying social workers, psychologists, psychiatrists, and nurses with guidance for providing psychological support to patients and hospital personnel during influenza pandemic. Hospitals should also provide psychological-support training to appropriate individuals who are not mental health professionals (e.g., primary-care clinicians, leaders of community and faith-based organizations); and,
e. Develop a strategy for “just-in-time” training of non-clinical staff who might be asked to assist clinical personnel (e.g., help with triage, distribute food trays, transport patients), students, retired health professionals, and volunteers who might be asked to provide basic care (e.g., bathing, monitoring of vital signs); and other potential in-hospital caregivers (e.g., family members of patients).

3. Education of patient, family members, and visitors
   a. Patients and others should know what they can do to prevent disease transmission in the hospital, as well as at home and in community settings.
   b. Identify and utilize language-specific and reading-level appropriate materials, provided by CCHS, CDHS and CDC for educating patients, family members, and hospital visitors during an influenza pandemic. Develop a plan for distributing information to all persons who enter the hospital.
   c. Identify staff to answer questions about procedures for preventing influenza transmission.

Pandemic Period

Hospitals will implement the mechanisms created to distribute updated informational and educational materials to hospital visitors, patients, and patient community, on an on-going basis. It will be essential that the hospital PIO maintain regular contact with the CCHS PIO to ensure the hospital receives the most updated pandemic flu guidance and to the assigned Education and Training staff receive the most current information to use in their training.

Training and education should be ongoing and include information on:

   a. Disease prevention precautions.
   c. The need to either postpone non-critical appointments or procedures or provide alternative ways for patients to be seen for non-urgent needs.
   d. The need to advise public to only use the Emergency Department for true medical emergencies.

Section 9 Risk Communication and Public Education Tools

Some of these materials are included in the Appendix.
See also the CCHS CERC Go-Kit for these materials and more or visit CCHS website (www.cchealth.org)
Most of these materials are available in both English and Spanish

Planning Tools
  • Pandemic Flu School Action Kit
- Pandemic Flu Kit for Child Care Providers
- Pandemic Flu Planning Checklist for Individuals and Families
- Pandemic Flu Planning Checklists for: businesses, travel industry, schools, child care and preschools and colleges.

**Fact Sheets/Brochures**
- Ways to Protect Yourself brochure
- Facts about Pandemic Flu
- Parents Tips
- What You Can Do to Prepare for Pandemic Flu
- Home Care for Pandemic Flu (American Red Cross)
- Resources for Emergency Information

**Posters**
- Cover Your Cough Poster
- Germ Free Zone
- Be A Germ Stopper
- Stopping the Flu is Up to You! (English and Spanish)
- Keep Our School Healthy
- How Does Seasonal Flu Differ from Pandemic Flu?
- Stop Disease
- Wash Your Hands Poster
- During a Flu Outbreak: When do I keep my child home?

**Power Points/Videos**
- Pandemic Flu Power Point presentation
- Locally produced videos on health emergency issues in both Spanish and English, including one the difference between Avian Flu and Seasonal Flu.