

ACA News Bulletin – Swine Flu – April 29, 2008

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A public health emergency was declared on Sunday, April 26, 2009, following the discovery of swine influenza in U.S. patients. Homeland Security Secretary Janet Napolitano said, “This is standard operating procedure and allows us to free up federal, state, and local agencies and their resources for prevention and mitigation; it allows us to use medication and diagnostic tests that we might not otherwise be able to use... and it releases funds for the acquisition of additional antivirals.”

Two main characteristics distinguish this flu pandemic: a new and distinct strain of the virus, to which few members of the population have immune resistance, and its rapid spread to more than one continent. According to the World Health Organization, which tracks pandemics globally, the 2009 swine flu pandemic is in **Phase 4**, “small cluster(s) [of cases] with limited human-to-human transmission but spread is highly localized, suggesting that the virus is not well adapted to humans.” Although it is believed this strain of virus made its way from pigs to humans, swine flu cannot be spread by eating pork products.

Sixty-four cases of swine flu have been confirmed in the United States, in California, Texas, Ohio, Kansas and New York; as of April 29, 2009, one death in Texas has been attributed to the virus. However, officials are confident that because the United States’ flu season is ending, the pandemic will not strike here with particular virulence. Dr. Richard Besser, acting head of the Centers for Disease Control (CDC), views the swine flu outbreak as “a marathon” to be run with diligent application of antiviral medications where needed, along with common-sense health precautions.

What You Can Do

There are clear guidelines to curb the spread of swine flu or any contagious illness. Following these practices, as outlined by the CDC, will help reduce the chance of swine flu infection in your office or institution.

Avoid close contact. Do not visit people who become ill. Avoid working in close proximity to others if you are sick or suspect you are getting sick.

Stay home when you are sick. If you are diagnosed with swine flu, stay home from work.

Cover your cough or sneeze. Use a tissue to cover your mouth and nose. Immediately discard the tissue after using it. This may prevent airborne transmission of the virus.

Wash your hands. Use warm water and soap. Wash your hands for 20 seconds, about as long as it takes to sing “Happy Birthday to You.” If warm water and soap are not available, use alcohol-based hand sanitizer or wipes.

Keep your hands away from your eyes, nose, and mouth. It is easy for a virus to pass through sensitive skin and membranes.

Take a proactive approach to healthy habits. Stay hydrated, eat and sleep regularly, and do your best to reduce stressors at home and in the workplace. Go to the doctor if you are sick.

If you become ill and experience any of the following warning signs, seek emergency medical care.

In adults, emergency warning signs that need urgent medical attention include:

- Difficulty breathing or shortness of breath
- Pain or pressure in the chest or abdomen
- Sudden dizziness
- Confusion
- Severe or persistent vomiting

Source: www.cdc.gov. *Questions and Answers: Swine Flu and You*. Page last updated April 26, 2009, 6:00PM ET.

If the Pandemic Reaches Your Area

Pandemic influenza is a “crowding disease” – historically, it thrives in densely-populated areas such as those provided by correctional environments. The CDC recommends “closing places where groups of people gather,” but this is not possible for the majority of correctional facilities. To protect staff and inmates, consider *adult social distancing*: stagger shifts, use e-conferencing or teleconferencing when possible, and make every reasonable effort to keep sick staff members at home.

The Bureau of Justice Assistance has outlined some expectations for correctional professionals in the event of local pandemic swine flu. Correctional officers should be prepared to assist law enforcement and public health agencies, “limit family visits, limit inmate intakes, restrict inmate trips to parole hearings,” and implement plans to stem the spread of disease to the offender population. Community corrections programs should “plan and coordinate with courts and other releasing authorities to reduce or restructure monitoring of probationers, including pretrial supervision clients and parolees.”

Stay Safe on the Job

The Occupational Safety and Health Administration (OSHA) has no specific standard for pandemic influenza, but “a number of its standards for workplace safety and health may be applicable during an outbreak:”

- respiratory protection standard ([29 CFR 1910.134](#)),
- personal protective equipment standards ([29 CFR 1910.132](#) and [29 CFR 1910.133](#)), and

- bloodborne pathogens standard ([29 CFR 1910.1030](#)).

For more information, reference the following ACA standards, found in *Performance-Based Standards for Correctional Health Care in Adult Correctional Institutions, 1st Ed.*, updated by the [2008 Standards Supplement](#). These standards apply to any highly contagious communicable disease.

- [1-HC-1A-07](#)
- [1-HC-1A-08](#)
- [1-HC-1A-09](#)
- [1-HC-1A-11 and 1-HC-1A-11-1](#)
- [1-HC-1A-19](#)

Further Resources

Visit the World Health Organization's Epidemic and Pandemic Alert and Response (EPR) to learn the updated [stage of the pandemic](#).

For continuous updates on swine flu in the U.S., visit <http://www.cdc.gov/flu/swine/investigation.htm>

[Basic facts](#) on swine flu are also available at the CDC's website.

To learn more about the responsibilities of correctional professionals in the event of a pandemic, see [Preparing the Justice System for a Pandemic Influenza and Other Public Health Emergencies](#).

