



# Alcan Special Committee Avian Influenza Preparedness



December 8, 2005



# Agenda



Current Status



Alcan Preparedness Strategy



Alert Levels



Actions Taken:

***EHS FIRST*** Health

Corporate Security

Communications



Global Preparedness Status



Next Steps



# Avian Influenza Current Status



## WHO IS BEING AFFECTED?

- At this time, workers and families living in/near poultry farms and live animal markets.

## HOW THEY HAVE BEEN INFECTED?

- Avian influenza virus is contained in the feces of infected birds.

## IS IT TRANSMITTING FROM HUMAN-TO-HUMAN?

- There are no significant evidence so far that the virus has acquired this ability.

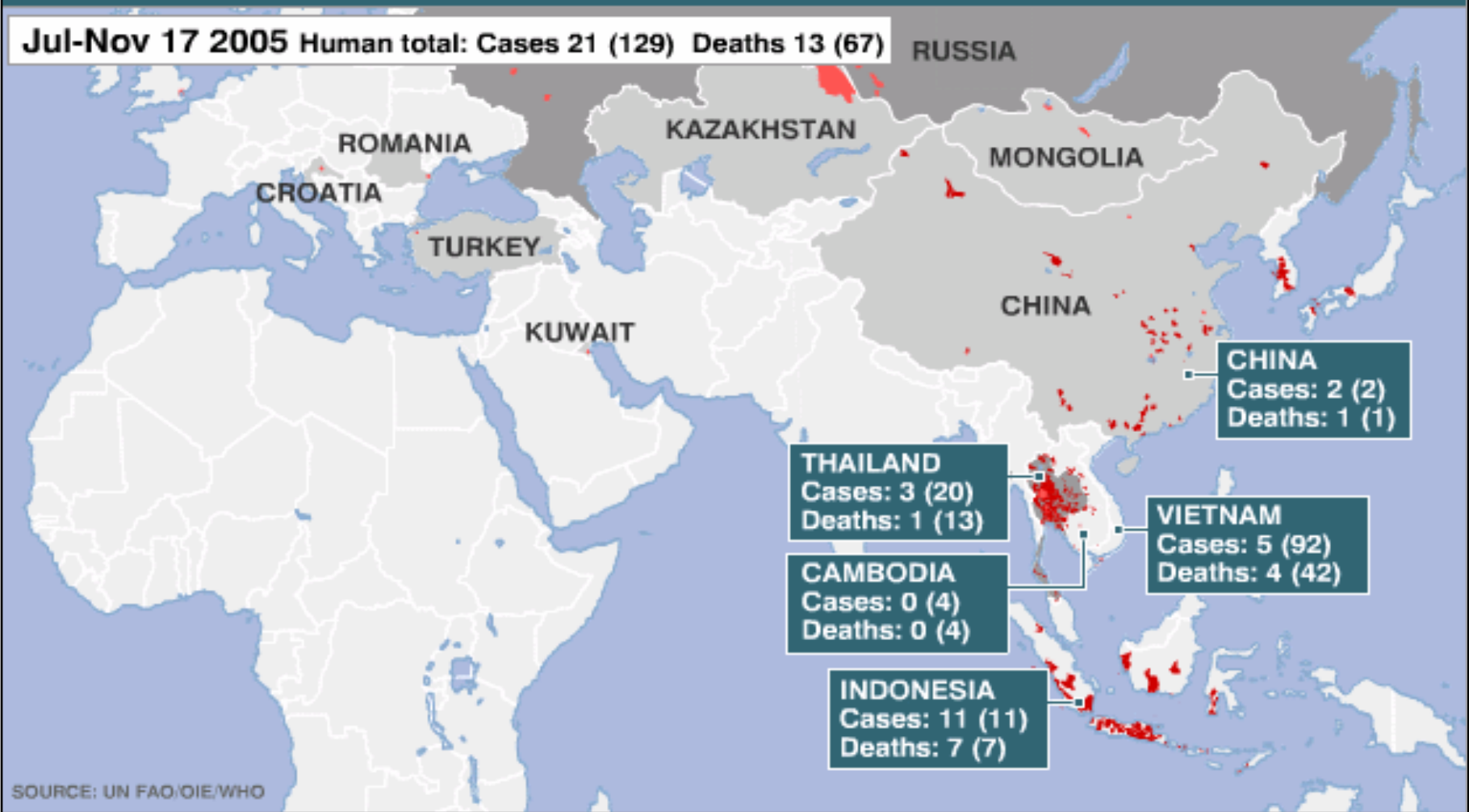


# Current Status as of November 17, 2005



## HUMANS: Countries with cases/deaths (total)

Jul-Nov 17 2005 Human total: Cases 21 (129) Deaths 13 (67)



SOURCE: UN FAO/OIE/WHO



# Alcan Avian Influenza Preparedness Strategy



## AVIAN INFLUENZA SPECIAL COMMITTEE

- A Special Committee composed of **EHS FIRST** medical officers, Corporate Security and Corporate Communication has been created to assess the potential threat caused by an Avian Influenza outbreak and/or pandemic, and to prepare Alcan should such an outbreak occur.

## AVIAN INFLUENZA PREPAREDNESS PLAN

The committee has developed an Avian Influenza Preparedness Plan composed of the following key elements:

- Avian Influenza Crisis Management Plan;
- **EHS FIRST** Avian Influenza Medical Preparedness Plan;
- Communication Planning;
- Business Continuity Planning.



# Avian Influenza Alert Levels



**Corporate and local alert levels have been established.**

<b>CRISIS MANAGEMENT ALERT LEVELS</b>	
<b>CORPORATE</b>	<b>LOCAL</b>
<b>Limited number of cases transmitted from sick birds to humans.</b>	
<b>Recognized evidence of human to human transmission, but cases are limited to small clusters.</b>	
<b>Major outbreaks in specific areas.</b>	<b>This site is located within proximity of an affected area.</b>
<b>Worldwide global epidemic (Pandemic).</b>	<b>This site is located within an affected area.</b>



# Actions Taken: *EHS FIRST* Health



## ESTABLISHMENT OF REGIONAL MEDICAL SUPPORT

### ▪ Three stages:

1. Identification of potential regional health providers.
2. Selection of regional health providers, including assignment of a coordinator physician.
3. Establishment of the regional health providers, including training and implementation of technical guidelines and procedures.

## AVIAN INFLUENZA DECISION MATRIX PROCESS

### ▪ A decision matrix has been developed for workers, contractors, suppliers, travelers and visitors. It includes:

- Screening process;
- Self assessment questionnaire;
- Cases management guidelines including quarantine requirements.

## SEASONAL INFLUENZA VACCINATION

### ▪ Seasonal Influenza Vaccination is being provided in many Alcan locations.



# Actions Taken: *EHS FIRST* Health



## DEVELOPMENT OF HEALTH GUIDELINES

### Standard Precautions

- Hand washing
- Cough etiquette

### Airborne Precautions

- Use of face masks

### Contact Precautions

- Contact tracing Process
- Contact Management



# Actions Taken: Corporate Security



## AVIAN INFLUENZA CRISIS MANAGEMENT PLAN

- This plan contains various levels of alert and for each of them there is a respective action plan.

## CRISIS MANAGEMENT READINESS LEVEL

- Significant Incident Report Database (SIRDB) and CMC update ongoing with Alcan facilities.
- Crisis Management Centre Exercises (Avian Influenza Scenario)



# Actions Taken: Corporate Security



## BUSINESS CONTINUITY PREPAREDNESS

- Business Continuity Planning Guidelines have been developed and sent to Alcan Facilities.

## TRAVELERS SECURITY

- Continuous monitoring.
- Special travel advisories.

## EXPATRIATES SECURITY

- Continuous monitoring.
- Local evacuation guidelines distributed to facilities.



# Communications Objectives and Strategy



## OBJECTIVES

- Protect our employees from being infected
- Minimize impact on Alcan employees and businesses, in case of an outbreak

## STRATEGY

- Monitor media coverage to follow development of bird flu
- Raise awareness and common understanding about the situation
- Ensure coherent and coordinated communications should an outbreak occur
- React in a timely and appropriate fashion



## Actions Taken: Communications



- Implementation of a dedicated email database to send information and receive feedback (avian influenza committee@alcan.com)
- Translation and posting of all avian influenza–related documents on the Corporate Security and **EHS FIRST** intranet sites in 13 languages
- Intranet Spotlight on Health Recommendations posted from October 28 to November 4, 2005
- Meeting-in-a-box (PowerPoint presentation for line managers - Editorial and Health Recommendations) sent to all Managers/ Communicators/Security Officers via InternalCom on October 31, 2005
- Avian Influenza Crisis Management Plan and Key Points sent to all Managers/Communicators/Security Officers via InternalCom on October 14, 2005
- Draft of *Message from Travis* developed
- Q&A developed – currently being translated in 13 languages and to be posted on the intranet
- Active role in development of local communications on avian influenza (Maison Alcan)
- Leverage all internal communications tools
- BG heads of communications to ensure efficient cascading to business
- Ongoing media monitoring



# Avian Influenza Global Preparedness Status



In order to provide Global Preparedness status we have selected five performance indicators:

## 1 Crisis Management Readiness Level

- % of facilities who have updated CMC (by region).

## 2 Business Continuity Preparedness Status

- % of facilities who have prepared a BCP (by region).

## 3 Masks Stockpiling

- % of stockpiling based on defined needs (by region).

## 4 Level of Seasonal Influenza Vaccination

- % of employees vaccinated against seasonal influenza (by BGp).



# Avian Influenza Global Preparedness Status



In order to provide Global Preparedness status we have selected five performance indicators:

## 5 Establishment of Regional Medical Support

Three stages:

1. Identification of potential regional health providers
2. Selection of regional health providers, including assignment of a coordinator physician
3. Establishment of the regional health providers, including training and implementation of technical guidelines and procedures.



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