Faith Communities and Pandemic Flu

Guidance for faith communities and local influenza pandemic committees
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June 2008

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This booklet

If an influenza (flu) pandemic happens in the UK, everyone will need to play a part in managing how it affects our society.

This booklet will explain how faith communities can play a part in protecting themselves and others, and how they can help face the challenge should an influenza pandemic occur in the UK. It was produced for Communities and Local Government by the Faith Communities’ Consultative Council.
1. Pandemic influenza

What’s the issue?

Government, on the advice of scientists, is asking us to prepare for a pandemic (worldwide epidemic) of influenza (flu).

A pandemic, if it happens, may be much worse than a seasonal epidemic which happens every year.

What is influenza?

Influenza (often called flu for short) is a viral illness which we are familiar with in the UK, especially in winter. It can be mild or severe, and in some cases it may cause death. Older people and young children, and people with long term health conditions like heart disease, are more susceptible than others. For this reason the Government organises a seasonal flu vaccination programme every year, aimed at the more vulnerable.

There are a number of types of flu virus, and they are able to change into new strains rapidly.

Pandemic flu is different from seasonal flu but the fact that flu viruses can change rapidly is one of the reasons a flu pandemic can happen. A pandemic (ie a worldwide epidemic) happens when a flu virus emerges that is markedly different from recently circulating strains, is able to infect people, can spread rapidly from person to person and is capable of causing illness in a high proportion of those infected.

Because it is very different, few – if any – people have immunity to it. So even healthy adults could become severely ill. This means there will be many more people getting ill than in a normal winter epidemic, and because pandemic flu can often bring complications or more severe forms of illness, many more people can become seriously ill, and possibly there may be many more deaths.

All of the circumstances needed for a flu virus capable of causing a pandemic to emerge exist now. A virus could emerge and cause a pandemic. Although this hasn’t started yet, it could soon. One way that this could happen is if a bird (avian) flu virus combines with an ordinary seasonal flu virus and becomes able to spread rapidly in humans.

Pandemics of human influenza affecting many thousands and in some cases millions of people occurred in 1918 (Spanish), 1957 (Asian), and 1968 (Hong Kong). New subtypes of influenza caused these pandemics. These were probably formed by a combination of genes from both bird and human influenza viruses.
How is Avian flu involved in this?

Avian flu (sometimes called bird flu) is an animal disease caused by flu viruses that normally only infect birds and sometimes pigs and other animals. In terms of risk for human health, there is particular concern about a strain known as H5N1, which is the cause of a number of outbreaks in birds.

H5N1 has jumped from normally causing disease in animals to causing severe disease in a relatively small number of people in 1997 and 2003 and from 2004 onwards. The worry is that if H5N1 combines with a human flu virus, or changes in other ways it could infect humans more efficiently than it can at present, and a pandemic could start.

Since December 2003 there has been a large number of outbreaks of avian influenza in birds with high death rates in those infected, affecting largely poultry in various countries in central, east and south east Asia, Romania (Tulcea County, Danube delta) and Turkey (Manyas region only). These outbreaks are caused by H5N1 subtype of the influenza A virus, the same subtype (but not identical to the virus) that caused an outbreak in Hong Kong in 1997.

How is flu caught?

Ordinary (seasonal) and pandemic flu strains can be spread from person to person by close contact. Infected people pass the virus on to others by droplets when coughing, sneezing and even talking at close distance (three feet or less).

It is also possible to acquire flu by direct contact by, for example, shaking hands with an infected person then touching your own mouth, eyes or nose without first washing your hands in warm soapy water.

It can also be spread from contaminated inanimate objects such as: door handles, worship books, sacred cloths and furniture, sacred vessels used for drinking or eating (as in communion). If someone touches these then touches their mouth, eyes or nose without washing their hands in warm soapy water, they can become infected.

The virus can persist outside the body and can be spread to hands from hard surfaces for up to 24 hours and from soft surfaces such as tissues for up to two hours, although in very low quantities after 15 minutes. With these characteristics, it is not surprising that flu is very readily communicable within communities.

What are the symptoms?

It is likely that the symptoms of pandemic flu will be the same for seasonal flu, but they will probably be more severe.
Most Common

<table>
<thead>
<tr>
<th>Fever</th>
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<tr>
<td>Coughs/shortness of breath</td>
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<td>Suddenly becoming ill</td>
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Others

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<tr>
<th>Headache</th>
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<tr>
<td>Malaise (strong feeling of being unwell)</td>
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<tr>
<td>Chills</td>
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<tr>
<td>Aching muscles</td>
</tr>
<tr>
<td>Sore throat</td>
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<tr>
<td>Running nose, sneezing</td>
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<tr>
<td>Loss of appetite</td>
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</table>

The time from contact to feeling ill (incubation period) is between 24 hours and four days, but is commonly two to three days.

How long is someone infectious for?

People are most infectious soon after they develop symptoms, but can transmit infection for up to five days after the onset of illness. Children can continue to shed the virus for up to seven days. In addition, many people acquire the infection, but may not have signs of clinical illness, although they may be able to pass on the infection.

What should I do if I have symptoms or become ill?

Firstly, if you become ill with flu, you should ensure that you stay at home. Do not go to work or to your place of worship. Before a pandemic starts, the Government will issue advice on the action you should take if you (or someone for whom you are responsible, such as a child) becomes ill – this is likely to include contacting a specific telephone-based national flu line service. They will advise you on what to do next.

It is vitally important that you follow this advice to prevent other people from becoming infected.
2. How will a pandemic affect faith communities?

There are a number of issues affecting faith communities in a pandemic:

- How you protect your community from infection
- How you care for your community
- How you protect your community’s assets
- How you can help your local services respond to the strains and demands of a pandemic by providing support.

What might happen in an influenza pandemic?

An influenza pandemic could have a significant impact on the UK:

- Of the total UK population of about 60 million, anywhere between an estimated 15 million and 30 million people could become ill, depending on the infectivity of the pandemic strain
- Of these, between 55,000 and 750,000 in a worst case scenario could die over a period of one or more waves lasting around 15 weeks each
- The flu symptoms will be worse than seasonal flu, and may take longer to recover from
- The demand for hospital admissions for acute respiratory and related conditions may increase by up to 50 per cent
- The actual numbers will vary depending on a range of factors. We will not know which groups will be most at risk until the pandemic strain of the virus emerges.

These figures are based on our experience in previous pandemics and with seasonal flu and on scientific and expert advice to the Government.

During a pandemic, essential services like the National Health Service (NHS), Fire Brigade and even undertakers and transport systems will become very stretched.

What can you do to stop infections in your faith community?

Faith communities often gather together in large numbers for public worship, and as part of worship or events around it, they may share meals or drinks. Large public gatherings are an ideal opportunity for influenza to spread if people do not properly follow simple prevention measures.
If a pandemic occurs, you should seek to prevent it from spreading in your community as much as you can. There are some really simple measures you can take:

- Always carry tissues
- Cover your nose and mouth with a tissue when sneezing or coughing. Dispose of used tissues in the nearest bin
- Wash your hands with warm water and soap or an alcohol hand rub after coughing, sneezing, using tissues or contact with other people
- Avoid touching your eyes, nose or mouth with hands which may have been contaminated
- If you are visiting a home where someone has the flu, during a pandemic, try to stay at least one metre away from the ill person and wash your hands after visiting. If you have to be in closer contact with the person, you could wear a mask; but if you do so, you should wear and dispose of it properly and you should still wash your hands after visiting
- If you are blessing or anointing someone with flu (eg with oil) or laying hands on them, you should wear a mask, dispose of it properly after use, and wash your hands afterwards. Make sure service books, sacred cloths, oils etc do not become contaminated in case you pass infection from one person or home to another.
- Do not share prayer shawls etc unless they have been washed
- In a pandemic, sharing of common vessels (eg the common cup) for communion should stop
- In a pandemic, situations where a minister may cross-contaminate others should cease (eg communion on the tongue may infect the priest’s fingers. Communion on the hand is preferable. For some communities, common meals after worship may need to cease to prevent risk of infection from people being in very close proximity for periods of time)
- Consider asking people who read from shared sacred books (eg the large Holy Book in your place of worship which people read to the congregation from) to ensure they wash their hands before they do, so that the book does not become contaminated. This will prevent the next person to read from it picking up infection
- Think about using individual disposable service sheets during a pandemic rather than shared song or prayer books, so people attending a service are not at risk of being infected if the book has been contaminated
- Disinfect surfaces which might become contaminated regularly (eg door handles, light switches, sacred vessels) with detergent and warm water, and ensure that sacred cloths do not come into contact with more than one person, and are washed regularly
- If you do wear a mask, eg when visiting people who are ill, do not touch it once you have put it on, change it if it becomes moist, and use it only once (change or remove the mask away from other people who may be infected, and dispose of it in a bin). Don’t re-use masks.
Protecting your congregation

Following the guidelines above will help you protect your community from infection. But there are some other key things you need to think about during a pandemic:

- You will need to think about care for those in your community who are ill – who visits them and how they are trained in infection control. Visiting people could help monitor those who are ill when statutory services are very stretched. You might be able to collect essential supplies and medication for them.
- Those who do visit those who are ill may want to keep themselves away from public worship to prevent the risk of infecting others.
- You may need to think about suspending all public worship for a time, during the height of a pandemic. The same may apply to religious instruction classes or community events. But you need to balance spreading infection with keeping up people’s morale.
- You will need to think about religious care of your community – can you use newsletters, holy books, tapes and CDs or the Internet to keep people in touch with their faith?
- You need to consider how you will keep the finances of your faith community going during a pandemic. For example, reduced congregations may mean reduced collections and donations, and this may hamper your work. Moving to direct debit or standing orders during the pandemic might help you minimise any financial loss.
- How will you look after your buildings if 25 per cent of your congregation, including those who may currently do so, are ill?
- Get advice from the Health Protection Agency about communities going on pilgrimage (eg Hajj) during or before a pandemic.
- You will also need to think about the fact that your community is likely to be affected by bereavement. Workers and ministers paid and unpaid may be bereaved. Ensuring that care is provided for everyone who is bereaved will be important.

Helping your local community

Your community could save the lives of others in a pandemic. In preparing for a pandemic, or in recovery from a major incident, you could use your people and networks to ease pressure on statutory services, build community confidence and resilience, and promote social cohesion.

You could perform essential monitoring roles for vulnerable people and you may even be able to distribute anti-virals, essential supplies and food to people in their homes when they have no one else to help.

You should approach your local Pandemic Flu Planning Committee to offer help if you feel you can do any of this. You can contact them through your local Emergency
Dealing with those who have died

Faith communities will be involved in the burial/cremation of those who have died. While it is important to ensure that the proper respect and treatment of those who have died according to your faith is provided, during a pandemic there will be some specific challenges:

- At the peak of a severe pandemic, it may not be possible to bury or cremate those who have died as quickly as your faith may wish, simply because of the large numbers of people who are dying. You need to ensure that you and members of your faith community understand this and do not place additional strain on essential services. It is always best to work with the local Influenza Pandemic Committee before a pandemic to discuss arrangements for body disposal.

- You may need to consider what rituals or other religious or spiritual care you can give to members of your community in situations where there must be a delay in disposing of the body.

- You will need to liaise closely with funeral directors about what is and is not permissible during the funeral, and what is permissible about how bodies will be disposed of. In most cases the usual methods in your faith will be acceptable, unless there are particular circumstances. The funeral director should explain these to you.

- Most ritual washings should be permissible but a funeral director will need to be consulted. Those doing the washing will need to wear gloves and aprons. They will need to be supervised by an undertaker and will need to wash their hands thoroughly with soap and warm water afterwards.
3. A checklist for faith communities

There are many things you can do to prepare for a pandemic. A suggested checklist is given below. This checklist is based on a checklist already used by some faith communities including the Roman Catholic Church, with parts adapted from a United States of America Government checklist for faith communities.

1. **Plan for the impact of a pandemic on your organisation and its mission:**

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<tr>
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<th>In Progress</th>
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<tr>
<td>Assign someone with the authority to develop, maintain and deliver an influenza pandemic preparedness and response plan for your faith community.</td>
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<td>Determine the potential impact of a pandemic on your organisation’s usual activities and services (eg how many will be ill? Will you have enough people for worship? How will you continue the community groups which meet in your buildings? If you run care services, how will they ensure they can deliver essential services?) Plan for situations likely to require increasing, decreasing or altering the services your organisation delivers. Work out what is essential and what you can stop doing during a pandemic.</td>
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<td>Determine the potential impact of a pandemic on outside resources that your organisation depends on to deliver its services (eg your bank, building suppliers, other supplies like paper, food, and travel etc.) How will you cope if these services face problems?</td>
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<td>Outline what the organisational structure will be during an emergency and revise periodically. The outline should identify key contacts with multiple back-ups in case people become ill. Identify roles and responsibilities, and who is supposed to report to whom.</td>
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<tr>
<td>Identify and train essential staff (including full-time, part-time and unpaid or volunteer staff) needed to carry on your organisation’s work during a pandemic. Include back up plans, cross-train staff in other jobs so that if staff are sick, others are ready to come in to carry on the work.</td>
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<td>Test your plan using an exercise or drill, and review and revise your plan as needed.</td>
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2. Communicate with and educate your leaders, members, and persons in the communities that you serve:

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<td>Find up-to-date, reliable pandemic information and other information from the local Pandemic Committee or the Health Protection Agency (<a href="http://www.hpa.org.uk">www.hpa.org.uk</a>). Make this information available to your organisation and others. Place articles in your newsletter and posters on notice boards. Distribute materials with basic information about pandemic influenza, especially this booklet and how to prevent infection spreading.</td>
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<td>When appropriate, include basic information about pandemic influenza in public meetings (eg sermons, scripture study or other classes, trainings, small group meetings and announcements).</td>
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<tr>
<td>Share information about your pandemic preparedness and response plan with staff, members, and persons in the communities that you serve. Have a one page version for members of your community. Develop leaflets/flyers and put information on your website including links to the sites listed in Section 4 below. Consider a pre-recorded message on an answerphone for people who cannot read. Ensure that what you communicate is appropriate for the cultures, languages and reading levels of your staff, members, and persons in the communities that you serve. Information is available in a range of languages from websites at Section 4 below. Consider how your organisation can stop panic, increase morale in the community and correct misinformation. It might be possible to use the means listed above. How will you show leadership in this?</td>
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3. **Plan for the impact of a pandemic on your staff, members, and the communities that you serve:**

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<tr>
<td>Plan for staff absences during a pandemic due to personal and/or family illnesses, quarantines, and school, business, and public transport closures. Staff may include full-time, part-time and volunteer workers.</td>
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<td>Work with your local Primary Care Trust (England) or Local Health Board (Wales) to encourage people who are eligible to get seasonal influenza vaccination every year.</td>
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<td>Identify people with special needs (e.g., elderly, disabled, housebound, limited English speakers) and be sure to include their needs in your plan. Establish relationships with them in advance so they will expect and trust your presence during a crisis.</td>
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### 4. Set up policies to follow during a pandemic:

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<tr>
<td>Ensure you have a policy which covers sick leave for workers and those they care for (e.g., sick family members) during a pandemic.</td>
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<td>Ensure that everyone – paid and unpaid workers and members of your congregation understand that if they become ill they should remain at home until their symptoms resolve and they are physically ready to return to duty. They should follow the advice that the Department of Health and NHS will give about who to contact for help. People who are becoming ill at work should be sent home.</td>
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<tr>
<td>Work out what you can do to help the community in a pandemic. You may be able to offer volunteers to deliver antiviral drugs, staff a helpline or do other practical tasks. Contact your local Pandemic Flu Co-ordinator (through either the Local Authority Emergency Planning Team or the NHS Primary Care Trust/Local Health Board).</td>
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<tr>
<td>Work with the Pandemic Flu Co-ordinator to make sure any volunteers you offer to help the community are appropriately screened and checked before training. Work with them in advance. When a pandemic starts it may well be too late to help.</td>
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<td>Work with Social Services, other faith organisations and other communities to ensure your volunteers are properly trained for helping in any pandemic</td>
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<td>Ensure any agreement you reach is written down in an easily understood plan (it could be a section of the Pandemic Flu Plan held by the Flu Co-ordinator.) Make sure the key people have a copy of it (e.g., local authority, NHS, your staff and team, etc)</td>
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<td>Share what you’ve learned from developing your preparedness with other faith-based and community organisations to improve community response efforts.</td>
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<td>Be clear how you will activate your organisation’s response plan when an influenza pandemic is declared. Also be clear about who will trigger your organisation’s support for the community, and how.</td>
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</table>
4. Sources of help and support

Department of Health website on pandemic flu
www.dh.gov.uk/en/PandemicFlu/index.htm

Health Protection Agency website on pandemic flu
www.hpa.org.uk/infections/topics_az/influenza/pandemic/default.htm

Information for employers on pandemic flu
www.hse.gov.uk/biosafety/diseases/pandemic.htm

A checklist for pastoral planning for a flu pandemic
www.lancasterrcdiocese.org.uk/bishop/checklist.pdf

A pastoral plan for a flu pandemic
www.lancasterrcdiocese.org.uk/bishop/Pastoral_planning_for_a_flu_pandemic:_RevNickDonnelly.pdf