

## INFLUENZA PANDEMIC PLANNING: Q&A LOG OF ISSUES RAISED BY INFRASTRUCTURE PROVIDERS

Issue raised / requests	Raised by:	Referred to:	Answer
<b>Why Plan for Influenza Pandemic?</b>			
1	Information re: the likelihood of multiple waves of any influenza pandemic – e.g. how long is each wave expected to last, what is the expected life cycle of the entire pandemic etc.	NZ Water and Wastes Association (24 Aug 2005 meeting)	<p>MoH (24 Aug 2005 email)</p> <p>Planning must take into account the likelihood of more than one wave of influenza.</p> <p>Some pandemics in the past have tended to occur in more than one wave. For example, the 1918 pandemic occurred in three waves in New Zealand (the second wave was the most lethal). However the 1957 pandemic in New Zealand was different in that it was essentially one long wave, lasting about 3 months, with a very high total attack rate (possibly 70% - 80% of the whole population) and no significant following waves. The mortality was very low.</p> <p>Although there are a number of theories, including mutations in the virus as the pandemic progresses, it is not known why waves occur.</p> <p>It is not possible to predict pandemic wave activity, or other features before a pandemic. It is probably safe to say that if there is a very large wave with a very high total attack rate (as in 1957), there won't be another of any size resulting from the same virus (or a slightly mutated form) because many people will have acquired natural immunity.</p> <p>However a wave affecting e.g. 20% of the population, wouldn't preclude another larger one at a later stage (as in 1918).</p>

## Is There Medication That Will Prevent or Treat A Pandemic Influenza?

2	<p>Advice on the effectiveness of Tamiflu / vaccines, and how critical staff can get priority access to these.</p> <p>How can infrastructure providers obtain preferential supplies?</p>	<p>Transpower (9 Aug 2005 letter)</p> <p>NZ Refining Company (15 Aug 2005 letter)</p> <p>Network Tasman (email 21 Oct 2005)</p> <p>STOS (email 19 Dec 2005)</p>	<p>MoH (15 Aug 2005 email)</p> <p>(Answer updated: May 2006)</p>	<p>There are no commercial supplies of vaccine against pandemic influenza virus. As yet, pandemic influenza virus does not exist. Many countries are developing prototype vaccines against one of the avian influenza viruses currently considered to be likely to give rise to pandemic influenza. Vaccines are not likely to be available until some months after the virus mutates into a form that can be easily conveyed between humans - only then will it be possible to establish the genetic form of the virus.</p> <p>New Zealand has entered a formal arrangement with CSL in Australia, the only vaccine manufacturer in the Southern Hemisphere, for a supply of influenza pandemic vaccine once it is developed. From the onset of an influenza pandemic it may take up to six months for a vaccine to be developed and made in sufficient quantities for all New Zealanders.</p> <p>Several medicines have specific activity against the influenza virus; one of these drugs – the anti-viral medication, Tamiflu – is considered suitable for use in a pandemic situation in New Zealand. As advised by WHO, the New Zealand Government has stockpiled enough Tamiflu for 21% of the population, to help reduce the impact of a pandemic on New Zealanders.</p> <p>For normal seasonal influenza, Tamiflu, when used correctly, reduces illness and secondary complications, and reduces the period of infection by 1-2 days. It is anticipated that Tamiflu can play a valuable role both for containment of any pandemic at an early stage, and in reducing hospitalisations if the pandemic spreads. However, Tamiflu has not been tested in a pandemic, so there is no guarantee that it will be effective against a pandemic strain.</p> <p>MoH advises that the Government's stockpile of Tamiflu will be used to treat infected people, and to contain any spread of infection during the "Cluster Control" phase, rather than be allocated for preventative measures (except for first responders, e.g. health workers). Policy concerning the usage of Tamiflu can only be finalised once the nature of the pandemic virus (its epidemiology) can be identified.</p> <p>Infrastructure providers should proceed with their business continuity planning on the basis that they will not be receiving any Tamiflu (for preventative purposes) from the Government. Organisations should consider the purchase and use of Tamiflu as part of their BCP arrangements.</p> <p>Refer to the public position statement on Tamiflu on MoH's website (forthcoming).</p>
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## How Will a Pandemic Be Managed?

3	Advice on what measures can be put in place (e.g. at airports) to help detect people with bird flu symptoms (e.g. thermal detection during the SARS outbreak).	TelstraClear (18 Aug 2005 teleconference)	MoH	<p>Affected countries may put in place exit screening measures.</p> <p>All air and sea craft arriving in New Zealand, and all on board are liable to quarantine and remain so until they receive permission to commence operations after arrival – this permission is called pratique. Pratique procedures vary for sea and air arrivals and for different types of air arrivals. Pratique can only currently be conducted if there is suspicion of quarantinable disease – yellow fever, cholera, plague – but there are powers of inspection which enable health officials to act on suspicion of other notifiable diseases (e.g. avian influenza). Consideration is being given to more rigorous pratique processes according to various pandemic scenarios. And consideration it also being given to other measures that may be applied at the border (i.e. other than those relating to the granting of pratique) to minimise the risk of avian influenza entering New Zealand.</p> <p>Human infection with highly pathogenic influenza viruses that are usually found in birds (and are lethal to birds) is a notifiable infectious disease under the Health Act 1956. This means that a medical practitioner must take certain steps, including advising the government, if he or she has a reasonable suspicion that a person is infected.</p>
4	If a pandemic arises, will a formal state of emergency be declared, either nationally or regionally?	GANZ (email 24 Oct 2005)	MCDEM	<p>It is possible that <u>national</u> or <u>local</u> Civil Defence emergency could be declared to support the Ministry of Health in its lead role in a serious pandemic. Emergency powers under the CDEM Act 2002 enable CDEM Groups and Controllers to (amongst other things): conserve essential supplies, provide equipment, and requisition equipment/ materials and assistance. Through these powers, CD authorities may seek to influence allocation of important goods and services, possibly including gas, working with and through the relevant existing suppliers. However, these powers are likely to be used sparingly.</p> <p>Whether a Civil Defence declaration would trigger force majeure is a matter for consideration between the contracting parties in the context of individual contracts.</p>
5	Which, if any, government department would be in control of essential services, i.e. MoH, MED, Police, Army?	STOS (email 19 Dec 2005)		<p>The Ministry of Health will be the lead agency during a pandemic. Given the seriousness of the emergency, most government agencies will be involved in the response phase, which will be co-ordinated across government.</p> <p>The Ministry of Civil Defence and Emergency Management (MCDEM) will <u>support</u> MoH in operation / response mode using normal Civil Defence and Emergency Management (CDEM) structures. In turn, Police, NZ Defence Force etc. may be required to support CDEM Groups and Controllers to perform their responsibilities as they support the Ministry of Health in its lead role.</p>

6	Is national and/or local co-ordination of Lifelines Groups planned?	An electricity company via the Electricity Commission (24 Jan 2006)	MED	<p>Lifelines Groups do not have a specific role in pandemic preparedness planning. Some have held meetings to exchange information on preparedness issues, whereas others have communicated with their members in other ways.</p> <p>MED, in conjunction with MCDEM, MoT and MoH, is currently working on arrangements to liaise with, and if necessary, support lifelines utilities in a response phase. Local CDEM Groups are likely to have a key role.</p>
7	Will internal borders be imposed to manage the internal movement of people during a pandemic? If so, what are the criteria for allowing essential personnel (e.g. for infrastructure maintenance) to cross any borders?	<p>Transpower (9 Aug 2005 letter)</p> <p>TelstraClear (18 Aug 2005 teleconference)</p> <p>Transpower (via Electricity Commission; email 24 Jan 2006)</p>	<p>MoH and MCDEM</p> <p>(Answer updated: May 2006)</p>	<p>Internal border control issues are currently being considered by the Ministry of Health, working with their technical advisory panels and with other agencies that might be involved in community response. Whether internal boundaries are set up, the manner of their operation, and their duration, will depend on circumstances at the time</p> <p><b>Where does that leave infrastructure providers and transport operators?</b></p> <ul style="list-style-type: none"> <li>• The need for arrangements to permit movements of goods and people where continuity of needed services and the like are at risk has been registered with the Ministry of Health and the Ministry of Civil Defence and Emergency Management.</li> <li>• Planning may alleviate the need for crossing any temporary internal borders in some cases, or there may be some scope for providers and transport operators to set up arrangements at the time.</li> <li>• There is wide acceptance by MoH and MCDEM that, where alternative arrangements are not available, exceptions to arrangements for movement restrictions will be needed to permit continued delivery of needed services.</li> <li>• Possibilities that may be considered to permit boundary crossings include protocols for personnel needing to enter or exit closed areas, together with appropriate identification.</li> </ul> <p><b>What should business continuity planners do at this stage?</b></p> <p>Infrastructure providers and transport operators are expected to plan for, and use their best endeavours at the time to implement, alternative arrangements to enable needed service continuity without crossing any temporary internal border.</p> <ul style="list-style-type: none"> <li>• Providers and operators should, as part of their business continuity planning: <ul style="list-style-type: none"> <li>○ liaise/register their expectations with regional CDEM group(s) in their service area.</li> <li>○ ensure their relevant staff and their vehicles have clear identification.</li> </ul> </li> </ul>

## How Will Communication Be Managed During A Pandemic?

8	If a pandemic arises, the Government may issue [directives] under the Civil Defence and/or Health legislation. How will these be promulgated? How are moves from code white to yellow, and yellow to red, publicly notified?	Shell (29 Aug 2005 phone discussion)	DPMC	Moves from Code White to Yellow, and Yellow to Red (i.e. the steps for escalation of the issues) will originate with MoH. MoH would advise the Interagency Pandemic Group, and at the same time, put the notification on the website and into their media contacts. MED will also take reasonable steps to ensure that relevant key infrastructure providers are made aware.
9	What is the anticipated demand for information from Central Govt?	An electricity company (via the Electricity Commission)	MED	Arrangements are currently under consideration to promote good communication, in both directions, between infrastructure providers and central/local government. As part of this, central government officials may call for information from infrastructure providers about their network's ability to cope with demand etc, in order to brief Ministers so that they can make informed decisions related to infrastructure as required. The level of information requested may depend on the severity of the pandemic.

## Employers' Obligations to Employees during a Pandemic

10	If employers did not provide anti-viral medication, could they be in breach of the HSE Act?	Network Tasman (email to the Electricity Commission 21 Oct 2005)		<p>The HSE Act does not require employers to provide anti-viral medication to employees in the event of a pandemic. However, the HSE Act requires employers to take <b>all practicable steps</b> to mitigate risk and protect employees especially those at high risk.</p> <p>In a pandemic situation, the biggest risk (and, therefore, the thing to try and eliminate, isolate or minimise as much as possible) is close contact between people. Employers should think about their workplace and what is practical for them to do. Examples include:</p> <p><b>Eliminate</b> the risk of possible infection through person-to-person contact:</p> <ul style="list-style-type: none"> <li>- Enable more people to work from home without the need for face to face meetings</li> <li>- Offer internet shopping and other self-service options (and be prepared for more customers to use it)</li> <li>- Work varied shift patterns, or extended or flexible hours to limit the number of people in the workplace at any one time</li> <li>- "Don't be a martyr" – advise staff not to come into the workplace if they are feeling unwell.</li> </ul>
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11	The Health and Safety Act places very high obligations on employers during a pandemic. Is there any intention to change the Health and Safety Act to allow employers some protection from a lower level test during a severe pandemic outbreak?	TrustPower (via Electricity Commission; email 24 Jan 2006)	<p>There is no intention to amend the HSE Act.</p> <p>DoL advises that it is reasonable to expect staff to attend work where practicable measures have been taken to protect them and where they are physically able to attend. "All practicable steps" means everything a reasonable person would do, given the severity of the risks, what is known about them, and the availability and cost of safeguards.</p> <p>If staff are still concerned, they need to raise the issue with their employer (or their Health and Safety representative) and tell the employer the reasons for their concern. If, after discussion, they are still concerned that the measures taken are insufficient to respond to an elevated risk of infection, they can refuse to do a job they believe is likely to cause them serious harm. However, employees are obliged to work with employers to resolve the matter, and can only continue to refuse to do the job if they have reasonable grounds for considering it dangerous.</p> <p>If staff choose to stop working without talking to their employer about their concerns or ways to protect themselves, they are putting their relationship, and ultimately their employment, at risk. Obviously, employers will want to avoid making judgements or taking action about absences before talking to the staff member and gathering all information.</p> <p>DoL has prepared a practical guide for employers about potential employment issues they may face and options they will have in a pandemic situation, including employers' obligations under the HSE Act (<a href="http://www.dol.govt.nz/pandemic/">http://www.dol.govt.nz/pandemic/</a>).</p>

## How Can We Protect Staff From Getting Sick?

12	Advice on workforce management to minimise risks of spreading the virus in critical areas such as control rooms?	Telecom (inserted into Telecom memo, 22 Aug 2005)	MoH and DoL (15 Aug 2005 email)  (Answer updated: May 2006)	<p>MoH advises that in the event of any pandemic, the key message will be asking people to stay at home if they are sick. In pandemic influenza, many people will be bed-ridden and are not likely to be physically able to leave their homes. Masks may also assist to minimise the risk of virus spreading, if worn by people who are coughing and sneezing in public places or gatherings.</p> <p>The Department of Labour's website (<a href="http://www.dol.govt.nz/pandemic/respirators.asp">http://www.dol.govt.nz/pandemic/respirators.asp</a>) contains further information and advice on the use of PPEs.</p>
13	Where can employers purchase PPEs or anti-virals from?	Network Tasman (email to the Electricity Commission 21 Oct 2005)	MoH	<p>The Government does not have a recommended supplier of PPE's. We are aware 3M and Beckton Dickson do supply PPE in New Zealand.</p> <p>Employers wishing to explore the provision of Tamiflu should discuss the issues with a medical adviser.</p>
14	Advice on the use of air conditioning systems to minimise risks of spreading the virus in critical areas.	Telecom (inserted into Telecom memo, 22 Aug 2005)	MoH	<p>Influenza is primarily spread by large and small droplets, i.e. by close exposure to an infected person who is coughing and sneezing. There is no current scientific evidence that influenza can be spread by air conditioning units. However, there is evidence that it can spread within a small, enclosed space that does not have a functioning ventilation or air conditioning system.</p> <p>There is scientific and medical evidence that other viral and bacterial infections, known to be capable of airborne spread, can spread through improperly designed, or inadequately maintained or serviced air conditioning systems.</p> <p>MoH and DoL recommend that all enclosed spaces are adequately ventilated to reduce the risk of droplet spread in enclosed spaces. If air-conditioning units are used to provide such ventilation, rather than open windows, then these units must be properly designed and maintained to the appropriate standards.</p> <p>As part of their workplace health and safety monitoring, employers should gain assurance from the owner of any air conditioned building they occupy that air conditioning systems are maintained regularly and to the appropriate standard. The appropriate standard may be found in the New Zealand Building Code, Clause G4, Ventilation.</p> <p>The above information has been drawn from MoH's website, "Advice for Workplaces on Air Conditioning" (dated 23 Aug 2005), at <a href="http://www.moh.govt.nz/moh.nsf/c7ad5e032528c34c4c2566690076db9b/d2d2b0ccc15f0229cc257066001628a5?OpenDocument">http://www.moh.govt.nz/moh.nsf/c7ad5e032528c34c4c2566690076db9b/d2d2b0ccc15f0229cc257066001628a5?OpenDocument</a>.</p>

15	For maintaining service, will there be priority access to medical assistance and medical supplies for essential staff?	NGC/Vector (email 21 Dec 2005)	MoH and DoL	Infrastructure providers should make their own arrangements for medical supplies for their essential staff as part of their business continuity planning.
16	Recommendation of appropriate public health medical advisors, to assist companies to review their internal health measures (e.g. to advise on personal hygiene, use of disinfectants, use of PPEs etc.)	Transpower (9 Aug 2005 letter)	MoH and DoL (15 Aug 2005 email)  (Answer updated: May 2006)	DoL employs medical practitioners who are available to assist employers wanting specific medical / workplace advice. These medical practitioners can be contacted via DoL's regional offices (see <a href="http://www.osh.dol.govt.nz/about/region-office/index.shtml">http://www.osh.dol.govt.nz/about/region-office/index.shtml</a> for contact details). DoL advises that Dr Chris Walls (ph: (09) 524-4137), a medical practitioner who is well informed on pandemic issues, is able to assist with managing workplace and occupational health risks.

## What About Staff Travelling?

17	If there is human to human infection overseas, would it be sufficient protection to quarantine any staff who had been to an infected country, for 14 days?	Contact Energy (22 Aug 2005 email)	MoH	<p>The incubation period before the development of symptoms after infection is generally accepted as 1-4 days (average 2 days) People are infectious from slightly before symptom onset and while they are unwell (about 7-10 days), although some children can continue to shed virus (i.e. remain infectious) for up to 3 weeks after infection, long after they appear to have recovered.</p> <p>Isolation of adult cases for 14 days is likely to be sufficient.</p> <p>Quarantine of those who have been in contact with someone who might be infected is for 8 days (i.e. double the possible incubation period).</p> <p>Some people can be infected, and remain asymptomatic. If these people are not coughing or sneezing, there is only a low risk that they can spread infection.</p>
18	If staff are required to be quarantined at a NZ-based quarantine facility when returning from overseas, would those facilities will be equipped with unrestricted access to 230Vac power points so that cell phones and laptops can be recharged?	Powerco (via Electricity Commission; email 24 Jan 2006)	MED	It is expected that any quarantine facilities will have 230Vac power points. However, "unrestricted" access cannot be guaranteed.

## How Could Shortages Of Supplies Affect Business Operations?

19	How can Transpower and other infrastructure providers get priority access to petrol if there are shortages? Arrangements exist with BP for petrol supplies to some parties in emergencies. Can these arrangements be extended to cover Transpower and other infrastructure providers and their contractors?	<p>Transpower (9 Aug 2005 letter)</p> <p>NGC/Vector (email 21 Dec 2005)</p> <p>Powerco (via Electricity Commission; email 24 Jan 2006)</p>	<p>MCDEM (15 Aug 2005 email)</p> <p>(Answer updated: May 2006)</p>	<p>Priority access to petrol cannot be assured. Infrastructure providers and others with priority needs should make individual arrangements as part of their business continuity planning, and make their needs known to regional CDEM Group controllers in advance. They may also engage directly with their fuel suppliers over supply in the event of a pandemic.</p> <p>During any crisis situation local CDEM Groups (and government), will monitor the flow of critical services and goods such as energy supplies, and where possible and appropriate, influence their distribution to match any critical needs. Provisions exist in legislation that would enable government intervention in defined circumstances, but these provisions are likely to be used only in situations where disruptions to petroleum supplies are likely to have very serious implications.</p>
20	Exemption for crude and product tankers would be required if borders are closed. Other critical material supplies for oil refinery (e.g. chemicals, additives, catalysts, luboils etc.) are also required from overseas.	NZ Refining Company (15 Aug 2005 letter)	Border Working Group (led by Customs)	<p>MoH / Customs are actively working on border control issues. Customs advises that the Border Working Group has been focusing primarily on the management of the air border. This is because of the greater volumes of passengers arriving in a relatively quick period of time, and therefore the greater risk they would represent in the event of a pandemic outbreak. In addition the following factors relating to the maritime border were noted:</p> <ul style="list-style-type: none"> <li>• The period of time a vessel take to reach New Zealand means any infected persons will be displaying any symptoms prior to their arrival</li> <li>• Vessels are more used to operating and adhering to "pratique"</li> <li>• The numbers of crew on commercial vessels (cruise ships excepted) is relatively low</li> <li>• Vessels could be kept off shore for a period of time with relatively little inconvenience.</li> </ul> <p>Nevertheless, maritime border issues are being considered now that air border issues are well progressed. The various options include isolation measures (minimising close contact between crew and shore-siders while vessels are being cleared and unloaded), selected quarantine measures, screening by health officials prior to landing, and use of personal protective equipment. Other possibilities include limiting the number of ports that accept first port arrivals from overseas.</p> <p>At this stage, the Group has not specifically separated out the tanker trade from other maritime vessels. However, initial discussions suggest that commercial shipping operations could be managed with comparatively little disruption during a pandemic outbreak. Nevertheless, should more stringent controls become necessary, a high priority would be assigned to ensuring continuity of fuel supplies.</p>

21	Advice on preferential access to land or cellular network in the event of medium to long term telecommunication congestion.	Transpower (9 Aug 2005 letter)  NGC/Vector (email 21 Dec 2005)	Telecom (17 Aug 2005 email)  (Answer updated: May 2006)	<p>Telecom advises that a priority calling category within the its fixed line telephone exchanges, can in general, be used to ensure that defined priority customers are not impacted should calling restrictions be placed on the exchange to avoid over-load (except at the highest levels of restriction). Telecom can allocate priority on a customer number basis as requested for Civil Defence / Emergency Management purposes. However, this service cannot be made available to numerous users. Users who wish to use this service should approach their Telecom account manager.</p> <p>It should be noted that this priority category is only applicable for calls originating and terminating on Telecom's fixed network. A call with priority category passed to another network for termination, (e.g. to Vodafone or TelstraClear's network) may not be treated by that interconnecting network any differently than calls without the category. Users should check with suppliers on treatment in their individual cases.</p> <p>There are no features for customer prioritisation on the Telecom cellular network (other than in relation to 111 calls).</p>
22	Advice sought from officials on who should get priority access to phone services in an emergency, given the possibility that landlines could become congested	Telecom (phone conversation 18 Aug 2005)  TelstraClear (18 Aug 2005 teleconference)	MoH and MCDEM	<p>Priorities for utility/service restoration for all agencies and Lifeline Utilities (as defined under the CDEM Act 2002 Schedule 1) are:</p> <ol style="list-style-type: none"> <li>1. Public health and safety (Hospitals, Ambulance)</li> <li>2. Emergency management (police, fire service, emergency operations centres)</li> <li>3. Lifelines infrastructure (energy, communications, water, transport)</li> <li>4. Vulnerable sectors (immobile or vulnerable groups of people such as in rest homes or prisons)</li> <li>5. Isolated communities</li> <li>6. Key areas (e.g. central business districts)</li> <li>7. Commercial producers</li> <li>8. Residential zones.</li> </ol>
23	Advice sought from officials on which customers (e.g. hospitals, police, fire service etc.) should be on Telecom's network faults network repair priority list.	Telecom (phone conversation 18 Aug 2005)	MoH and MCDEM	Refer to answer in question 22.

24	Advice on how telcos can protect themselves from claims by “non-priority” customers with contracts for services that cannot be delivered due to disruptions, because they were not on priority lists.	TelstraClear (18 Aug 2005 teleconference)	MED Legal	This is a matter for telcos to manage in the first instance. Telcos should seek their own legal advice.
25	Assurance that other infrastructure providers (e.g. ICT, electricity, gas, water etc.) are adequately prepared.	NZ Refining Company (15 Aug 2005 letter)	--	<p>Officials (MED lead) are working actively across all infrastructure sectors to encourage infrastructure providers to update their contingency plans.</p> <p>A 3-tier approach is being progressed:</p> <ul style="list-style-type: none"> <li>• provide information, encourage preparation/updating of contingency plans, and maintain relationships with key infrastructure providers;</li> <li>• provide information to the numerous other infrastructure providers, and encourage them to prepare/update their contingency plans; and</li> <li>• work through Lifelines to instigate bottom-up discussion at regional level.</li> </ul> <p>Officials expect that this programme will strengthen the performance of the infrastructure sector if a pandemic arrives.</p>

## Where Can We Find More Information?

26	What are the best “official” sources of information – e.g. on national and international pandemic developments, government and civil defence directives, and medical info.	NZ Refining Company (15 Aug 2005 letter)	MoH and MCDEM	<p>Information on these matters is available on MoH, WHO’s and the NZ Government’s websites:</p> <ul style="list-style-type: none"> <li>• <a href="http://www.moh.govt.nz/pandemicinfluenza">http://www.moh.govt.nz/pandemicinfluenza</a></li> <li>• <a href="http://www.who.int/csr/disease/avian_influenza/en/index.html">http://www.who.int/csr/disease/avian_influenza/en/index.html</a></li> <li>• <a href="http://www.govt.nz/services/?treeid=805">http://www.govt.nz/services/?treeid=805</a></li> </ul> <p>Information is also available on the Centres for Disease Control and Prevention website (<a href="http://www.cdc.gov">http://www.cdc.gov</a>).</p> <p>MoH advises that in the event of any pandemic, it will ensure that its website is as up-to-date as possible.</p> <p>Also see question 11 re: government and civil defence directives.</p> <p>DoL has prepared a practical guide for employers about potential employment issues they may face and options they will have in a pandemic situation, including employers’ obligations under the HSE Act (<a href="http://www.dol.govt.nz/pandemic/">http://www.dol.govt.nz/pandemic/</a>).</p>
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## Other Issues

27	What arrangements have been/should be made around plant/site security for major infrastructure providers, given that key sites will have food, PPE, Tamiflu etc and should this become public knowledge the risk of people attempting/ coming ‘on-site’ is high.	NZ Refining Company (15 Aug 2005 letter)  Genesis	MoH and MCDEM  (Answer updated: May 2006)	Companies should make their own arrangements to ensure the security of their personnel and sites. Infrastructure providers with special needs in this area should consider registering their concerns with their local CDEM Group.
28	Financial compensation for any premature unilateral government actions.	NZ Refining Company (15 Aug 2005 letter)	MED Legal	Care would be taken to ensure that any Government action is well justified. The exercise of Government powers is always subject to judicial review (post event).

29	Relaxation of legislative / regulatory restrictions, e.g. - <ul style="list-style-type: none"> <li>- Commerce Act</li> <li>- Petroleum product specifications</li> <li>- Resource consents etc.</li> </ul>	NZ Refining Company (15 Aug 2005 letter)	MED Legal	<p><i>Commerce Act</i> – it is unlikely that the Commerce Act will preclude extensive development of contingency planning, including a range of mutual support arrangements. Officials would like to hear of any specific issues that cannot be resolved within Commerce Act provisions.</p> <p><i>Fuel specifications</i> – It would be useful to receive information from the petrol industry about the opportunities/advantages and practicalities of relaxing the specifications. The Minister of Energy has regulation-making powers to control the demand or distribution of petroleum products, or to direct that a person may acquire, supply, or distribute petroleum products in a way specified by the Minister. However, the Minister may only enact such regulations if the reasonably available supplies of petroleum product are, or are likely to be, insufficient to maintain stocks of petroleum products at normal prudent levels.</p> <p><i>Resource consents</i> – this is a matter for individual companies to consider with the appropriate consenting authority (pre-event). Government has in the past temporarily advised territorial local authorities to relax enforcement of consent conditions in some specific emergency situations (post-event). Depending on the circumstances at the time, consideration might be given to promulgating similar advice in a pandemic.</p>
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Ministry of Economic Development  
 WELLINGTON

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