

BIS | Department for Business
Innovation & Skills

PANDEMIC FLU GUIDANCE

Higher and Further
Education Institutions

 **HM Government**



GUIDANCE ON PLANNING FOR AN
INFLUENZA PANDEMIC

Foreword

A worldwide influenza pandemic presents a real and daunting challenge to the economic and social wellbeing of any country and a serious risk to the health of its population. On-going planning and preparation will help to lessen its impact and avoid panic. We recognise that institutions may already have emergency response and business continuity plans in place. This guidance aims to assist in the development of existing plans to ensure that they are well prepared for the effects a pandemic could have on their overall operation including teaching and research practices, taking into account students, staff and the local community.

- As the swine flu pandemic has shown recently, with international travel occurring on a daily basis, a new influenza virus could emerge in the UK within a few days of any new virus being identified in another country of the world. Therefore, the government recommends that all organisations, including those in the public sector at local level, should be as prepared as possible **now** so that plans can be activated promptly when a pandemic becomes imminent, and during a pandemic.
- This guidance has been developed by the Department for Business, Innovation and Skills (BIS) and the Higher Education Business Continuity Network (HEBCoN) in consultation with other sector organisations, informed by experts including, but not limited to, the Department of Health and the Health Protection Agency, to help Vice-Chancellors, Principals and Senior Managers to plan for pandemic influenza by offering a sector-specific perspective. Included in the appendices is a list of key websites to which to refer for further information.
- BIS recommends that Higher and Further Education Institutions and other service providers develop contingency plans now, which should be part of their general emergency response and business continuity planning.
- Given the limited scope for avoiding the increased risk of infection when the pandemic is in the UK, government advice is that in most circumstances the public should carry on with their daily lives for as long and as far as possible within the constraints the pandemic will impose, whilst adhering to government advice, taking sensible personal precautions and adopting good hygiene measures.
- BIS does not expect to advise the HE or FE sector to close. Such decisions are the responsibility of Vice-Chancellors, Principals and Senior Managers. We do, however, advise that the sector plans for a range of scenarios including but not limited to: staying open, reducing operations and/or closing to students, during a pandemic.

Introduction and Background

Government advice

This guidance, specific to the HE and FE sectors, should be read in conjunction with, and in addition to, the following published documents (see [Appendix A](#)):

Department of Health Pandemic Flu guidance – A National Framework for responding to an influenza pandemic and other relevant guidance.

‘Infection Control – how to reduce the spread of pandemic flu: Guidance for further education colleges and higher education institutions’.

This guidance sits alongside other HE and FE contingency plans, adding to, or drawing from, established emergency management, incident management or business continuity plans and practice (such as the HEFCE Guide on Planning for and Managing Emergencies: A Good Practice Guide for Higher Education Institutions).

When a pandemic occurs, it may come in one or more waves several months apart. Each wave may last for three to five months across the UK as a whole, depending on the season.

The government recommends that organisations should be as prepared as possible now so that plans can be in a state of preparedness or activated as and when a pandemic arrives. This guidance is for England only, but parallel guidance has been published by the Devolved Administrations. These are available via the websites listed in Appendix A.

By definition, a pandemic will be caused by a virus strain to which people have little or no immunity. A vaccine closely matching the specific virus in a pandemic is unlikely to be available for the first wave of that pandemic. The Department of Health is increasing its stockpile of antiviral drugs (Tamiflu and Relenza) to be able to treat 50% of the population, or all those who would be infected in our ‘reasonable worst-case scenario’. When used to treat seasonal influenza, antiviral medicines reduce the length of symptoms (by around a day) and usually their severity, as long as they start to be taken within two days of the onset of symptoms. Whilst it is impossible to predict whether antiviral medicines will be equally effective against a new or modified pandemic virus, it is reasonable to anticipate a similar effect and associated substantial reductions in severe morbidity.

Planning for an influenza pandemic presents challenges because it is impossible to predict its characteristics in advance, i.e. whether it will be relatively mild or severe, and whether it will have the same impact on all age groups, or whether it will affect some more than others. If an influenza pandemic were to be similar to those of 1957 and 1968, most of the additional deaths would be among the elderly, but the 1918-19 ‘Spanish’ flu pandemic had a different profile, with young adults being most affected.

Department of Health advises that any plans should be adaptable, to respond to different levels of infection and fatality. Based on previous pandemics and expert scientific advice, the UK's planning assumptions are that 25-50% of the population may become ill over one or more pandemic waves lasting about 15 weeks and that 0.4-2.5% of those affected may die. This equates to between 50,000 – 750,000 additional deaths in the UK.

Due to the close community contact within HE and FE environments, the spread of an influenza virus may be disproportionately high, leading to an increased transmission rate of the virus. The risk of transmission is increased by staff, students and members of the public who travel to the HE or FE site daily.

HE and FE institutions are now advised to ensure that they are clear about the policies that they would put in place in the event of a pandemic and the procedures that they would follow during the outbreak.

Issues for HE and FE Institutions

Many institutions will already have detailed plans in place to respond to a vast and varied number of scenarios. Such plans should be reviewed on a regular basis to ensure that they meet the needs of the institution and that any key contact details are up to date.

In the event of an influenza pandemic, institutions and their governing bodies should assess the impact the pandemic could have on their existing plans and procedures whilst focusing on:

- How to minimise the spread of the pandemic;
- Ensuring the safety and wellbeing of students and staff;
- Analysing the potential impact upon the day-to-day operations and exploring ways in which these may be maintained;
- How to manage staff absences to include taking time off to care for a sick member of their family;
- Managing clear and sensible internal and external communications;
- Considering whether there are services that should be scaled up/down, and/or suspended, with consideration given to the period of the academic year affected;
- Determining priorities and resourcing day-to-day operations;
- Prioritising demands;
- The longer term implications upon the organisation, including the financial impact;
- Authorising additional resources to support critical services;
- Analysing the impact to the medium/long term corporate objective;
- Setting the agenda for reinstatement of institutional activity following a pandemic.

The following areas have been identified, in no order of priority, as key issues for consideration by HE and FE Institutions:

- 1) Student and Staff Support and Welfare
- 2) Halls of Residence
- 3) EU and International students
- 4) Examinations, accreditations and assessments (both internal and external)
- 5) Online learning
- 6) Suspension of Teaching and Research (scaling down of operations)
- 7) Student and Staff Health Services
- 8) Students and Staff with Clinical Skills
- 9) Students and Staff on Placement
- 10) Student and Staff Engagement
- 11) Communication
- 12) Death of a student or member of staff.

1) Student and Staff Support and Welfare

Institutions will be acutely aware of the need to give priority to the interests of students and staff.

Institutions should engage with their students' union and staff ng representative bodies on any arrangements put in place for the support of students and staff in the build-up to, and during, an influenza pandemic.

Steps taken may include:

- publication of regular updates and the establishment of a webpage providing information on actions being undertaken by the institution and with links to relevant external organisations;
- publication of FAQs – with arrangements for updating as necessary;
- establishment of 'u friend' or similar schemes so as to ensure support is available for students who are taken ill and that no-one slips between the net with no support being available. Support should include checking on the welfare of those affected, and collecting/delivering basic medication and/or food supplies. This may be of particular value for students living alone with no local or family support;
- information about symptoms and basic hygiene measures, about what students and staff should do if they start to display symptoms;
- confirmation of arrangements for reporting illness and monitoring the incidence of u among students and staff;
- reminders of any arrangements in place for students for nancial assistance or funding support in the event of hardship where pandemic influenza has meant they are unable to work.

It should be noted that communication will need to be tailored to meet the needs of student and staff groups as necessary.

2) Halls of Residence/Specialist and Residential Colleges

[This section applies primarily to Higher Education institutions, and some residential Further Education institutions.]

Institutions will wish to pay particular attention to halls of residence when developing plans for pandemic influenza. Guidelines for relevant staff may include :

- infection control measures such as revised specifications for cleaning materials and for cleaning procedures;
- arrangements for installation of additional waste bins and for waste disposal;
- advice on safe working practice, eg. Catch it, Bin it, Kill it campaign;
- development of a flu friend procedure;
- advice to students on looking after themselves and their friends;
- the roles of wardens and cleaners in halls of residence;
- planning for reduced staffing levels;
- consideration of any students who have children living with them;
- advice in the event that accommodation contracts are due to end but travel restrictions prevent the student from travelling home.

It is worth exploring any potential differences in procedures between in-house and contract staff.

HE and FE institutions will be aware that in most cases they will need to keep halls of residence open (where they have them) even if the rest of the institution is subject to closure. Arrangements for emergency cover will be needed, given likely reductions in staff numbers for cleaning and maintenance purposes due to the impact of flu.

Accommodation staff may be the first point of contact for ill students – guidance on procedures will be needed accordingly.

Many specialist and residential colleges cater for students with a wide range of differing needs. In general, these colleges will want to follow the guidance for other FE institutions. However, we recognise that a number of students with complex needs, including medical needs, many of whom would be in residential colleges (in some cases for 50-52 weeks pa), could not easily be cared for in a different setting. It may, therefore, be in the best interests of those students for their college to remain open. Specialist colleges should consult social and healthcare professionals and continue to care for this group of students, while taking appropriate infection control measures, if the principal/governing body decide exceptionally that it is in the students' best interests.

Department of Health has published 'Pandemic flu guidance for the hospitality industry' and Cabinet Office has published 'Pandemic Influenza: Guidance for Businesses' (see Appendix A for both), which includes advice for Staff and Managers on issues such as training, cleaning and waste disposal.

You may also wish to make contact with the emergency planning unit based in your Local Authority. (CLG website)

3) EU and International Students

It is recognised that in the event of an influenza pandemic, EU and International students may have particular concerns about the situation in their country of origin and about how they will cope in an influenza pandemic in the UK.

Consideration needs to be given to the following areas:

- Do programmes of study need to be extended;
- What impact will this have on visas for international students;
- What advice and support will be needed to complete an application for a visa extension;
- Who will cover the cost of extending the visa and living costs for the student;
- What support is required if the student cannot return to their country of origin due to travel restrictions;
- Advice to staff or students who may be overseas, or planning to travel overseas, during the pandemic;

- What actions would be required in the event of the death of an EU or International student whilst still at the institution – consideration must be given to religious and cultural beliefs;
- Planning for the eventuality that EU or International students are unable to travel to the UK, either because of practical difficulties or because they have concerns about travel advice from their home government.

Additional information in relation to repatriation of EU and International students can be found in Appendix A.

4) Examinations, accreditations and assessments

It is recognised that the failure of an institution to assess the academic standard of students would have a long term detrimental impact on the reputation of the institution and the potential career progression of the students affected.

Consideration should be given to:

- Reviewing any existing guidance for your institution that looks at disruption of examinations;
- Information about the arrangements in place to mitigate the impact on students and to secure academic standards. This will be particularly important to students if the timing of a pandemic is such that it could impact on arrangements for graduation or progression;
- Reminders to students of the procedures for mitigating circumstances if students miss examination or assessment deadlines due to illness. It is expected that institutions will wish to maintain normal procedures as far as possible. Institutions will need to revisit their normal requirements for medical certificates when students miss examinations or assessment deadlines due to illness;
- Liaising with external accreditation bodies to establish the impact of scaling down of teaching or inability to complete placements.

For Further Education institutions:

Regularly updated exam-related advice can be found on the Teachernet website at the following address: <http://www.teachernet.gov.uk/educationoverview/flupandemicqanda/>

The advice covers general qualifications, including GCSEs, GCEs (A levels) and the Principal Learning, Project and Functional Skills components of the Diploma. It also provides links to, and should be read in conjunction with, Joint Council for Qualification (JCQ) publications on special considerations.

Advice on exam contingencies for vocational qualifications, including BTECs and NVQs, is also accessible through the Teachernet weblink.

5) Online learning

The use of online learning is potentially an alternative method of delivering teaching during a pandemic. Online learning is defined as e-learning, or blended learning, both terms which have a range of meanings and cover access to digital resources and/or communication/support networks; use of learning platforms, formative and summative e-assessment tools are all included.

Considerations for online learning are:

- Successful use of e-learning requires planning and, beyond a few simple activities which are mentioned below, could not be introduced at the time of a pandemic without preparation.
- It is possible that complete online courses could continue to be offered throughout a pandemic, although even they may be affected by staff illness, which could affect either the tutorial support and/or the technical maintenance of the necessary systems.
- The following activities could be considered:
 - Learners could undertake project work independently and/or in groups simply using e-mail, digital resources and basic office applications;
 - Tutorial discussions could be held through “chat rooms” or tele-conferencing facilities;
 - Pre-recorded lectures could be distributed or otherwise made available.
- Tutorial and peer support could be provided through any combination of e-mail, telephone and discussion applications.
- E-assessment techniques could be used, if prepared in advance.

- In order for any of the above to be effective the following must apply:
 - The technical infrastructure must be in place to support the applications and be robust enough to cope with the increased demand and use;
 - Staff and learners should have access (both physical and permissible) to the necessary facilities, both hardware and software.

6) Suspension of Teaching and Research (scaling down of operations)

The government advises that, wherever possible, business should operate as usual. Institutions should remain operational unless staff shortages or other local factors, such as a failure in the transport networks or critical infrastructure, make it impossible to continue operating. Pandemic planning should include identifying parameters and trigger points upon which the full or partial suspension of teaching and research practices should be considered, and the subsequent return to normal operational activity.

The trigger criteria that could lead to the suspension of teaching and research practices will include but is not restricted to:

- Severe shortage of lecturing staff
- Severe shortage of management staff
- Severe shortage of cleaning staff
- Severe shortage of maintenance staff
- Inadequate numbers of security staff
- Severe disruption to public transport network
- Power cuts or other utility failure

In addition, there may be a need for triggers to be agreed regionally, rather than nationally, or at the level of individual institutions, as a pandemic is likely to be concentrated at any one time in regional hotspots. The infection control guidance will help you in considering some of these issues.

It may be problematic to suspend teaching for non-empirical reasons, such as 'as a preventative measure', because this would make it difficult to assess when the institution could 'safely' reinstate teaching and research. In extreme circumstances – for example, if it is clear from the nature and scale of the pandemic that young adults are particularly vulnerable to the disease (similar to the impact of 'Spanish' flu in the 1918-19 outbreak) – BIS may issue further advice in relation to scaling down of operational function.

You and your governing body should ensure that all concerned are clear about the decision-making responsibilities and the process for keeping the institution open, reducing operations, or for agreeing its closure. It is recommended that an incident management team is established and that they should have the appropriate responsibility and authority (or delegated responsibility/authority) to take decisions regarding the day-to-day operations of the institution, whilst ensuring that Vice-Chancellors, Principals and Senior Management are kept informed about the situation.

We advise you to plan in advance what you will need to remain open and what levels of operation you will maintain. This has to be taken in context of what time of year the pandemic could occur.

Areas for consideration when looking at the full or partial suspension of teaching and research practices include:

- Identifying the core services which must be maintained;
- The identification of critical service trigger points to indicate when operations are going to be affected;
- Timing with regard to the academic year, e.g. Autumn admissions;
- How to operate during a pandemic with potentially high rates of absence among staff and students;
- Identifying a central source of communication;
- Lines of authority/succession planning;
- Financial risks and business recovery;
- Student and staff healthcare, provision of healthcare service and support for sick students;
- Admissions, including staff absences, processing of applications, interviews etc;
- Halls of residence, including care of sick students, quarantining, closure;
- Teaching, including alternative non-contact methods eg. distance/open learning options, setting assignments and coursework, use of the web etc., working at home and covering for staff absences such as using recently retired lecturers;
- Student progression and awards including examinations;
- Provision of student financial and other support;

- Working with Unions and Staff Associations to agree appropriate local staff flexibilities, and working practices;
- Availability of suitably qualified staff to maintain operations/deliver services and provision – includes whether it is necessary for HSE to carry out risk assessments where staff undertake new or less familiar tasks;
- Availability of premises officers/key holders to open/close buildings.

Also linked to security and insurance issues:

- Heating and buildings services if caretakers/estates officers absent;
- Effect of lack of cleaning staff at time when improved hygiene required;
- Catering contracts – consider contractual arrangements;
- What to do with students that become ill on campus and whether it is safe to send them home on their own, or on public transport, etc;
- Special advice for medical students or students of other health professions on what to do if they are requested to help the NHS in an emergency;
- Continuation of teacher training courses in the event of school closures and the inability to complete placements;
- Research students, including continuation of work and impact on field work;
- Placement students;
- Marketing and recruitment including open days.

Financial Implications of scaling down operations

Higher Education Institutions

HEFCE will continue to issue the funding council grant according to profile and the levels of agreed recurrent grant for that academic year. It will expect, and encourage, HE and FE institutions to assess and manage the risks arising out of a pandemic.

It is expected that HEFCE will continue paying HEIs according to profile and maintain the level of funding for that academic year.

HEFCE will expect and encourage HEIs to assess and manage the risks for themselves arising out of a pandemic. This will be a different risk assessment for each HEI and for some the difficulties could be more acute or prolonged, particularly if they are dependent on students from an afflicted area.

HEFCE will, therefore, assess the position of each HEI in difficulty and, if necessary, use measures available under our Institutional Engagement http://www.hefce.ac.uk/pubs/hefce/2008/08_19 Annex D of the Model Financial Memorandum between HEFCE and HEIs

Further Education Institutions

Any LSC provider that is forced to close to learners for a short period, due to pandemic flu, can continue to claim their planned unlisted funding rates on the assumption that the shortfall in learning support time will be made up before learners complete their programmes. The principles used in the past for foot and mouth outbreaks will be used if a pandemic flu outbreak has a more substantial funding effect on any individual provider.

With regard to EMA payments, in the case of provider closure, we would expect the provider to use discretion in taking the appropriate action. This may include setting work to be completed at home, or making arrangements for learning to take place at another provider or location. In such circumstances, providing that normal EMA conditions are met, EMA payments would continue. Further guidance is available from the LSC in relation to provider operational issues affecting EMA payments.

The LSC has issued separate guidance to Independent Specialist Providers in relation to learners with learning difficulties and/or disabilities.

7) Student and Staff Health Services

Where partnerships are established institutions should liaise with their medical centres. GPs will have access to current information from the Health Service in their region.

Where partnerships are not established, institutions should contact the Health Protection Agency to gain access to their regional NHS Trust. It will also be important to maintain close links with your local Primary Care Trust.

Whilst those without symptoms will be encouraged to carry on as normal, symptomatic patients should be asked to stay at home or in their place of residence.

8) Students and Staff with Clinical Skills

Institutions must ensure that plans are in place to cover the loss of staff and students with clinical skills who may be required to assist with the response of the NHS to an Influenza Pandemic.

Prior planning must be carried out in advance in conjunction with the local NHS Trust to ensure:

- Appropriate insurance is in place for the identified individuals to assist the NHS;
- Contracts are in place outlining the terms and conditions of their time supporting the NHS;
- The impact and implications for any medical students co-opted to the NHS during this period has been considered.

9) Students and Staff on Placement

Under Health and Safety legislation, institutions are legally required to provide a safe working environment, protecting employees from outbreaks of contagious diseases in the workplace.

With reference to this legislation, institutions have a duty of care to both students and staff who are currently on placement away from the institution.

Consideration should be given to the following issues:

- Ensure placement providers have adequate plans in place to ensure the safety and wellbeing of the staff or students concerned;
- Communication to:
 - Medical students on clinical placement
 - Students on placement overseas
 - Staff members who are overseas (including staff on sabbatical)
 - Students on work-based learning placements (WBL) and to employers with employees on WBL

10) Student and Staff engagement

Areas to consider for assistance in engaging with student and staff groups are:

- Students' union (the first point of contact for student clubs and societies)
- Staffing representative groups and Trade Unions
- National Union of Students (NUS) Welfare
- Chaplaincy

11) Communications

In the event of an influenza pandemic, clear communications with your stakeholders (staff, students, families, members of the public, neighbouring institutions, suppliers and key emergency responders) are vital if you are to succeed in responding effectively to the emergency.

Poor communications can cause panic, mistrust, confusion and even increase risk. To mitigate against this, a communications strategy should be devised which should address the following points:

- What is the institution's view on communications?
- Who will be ensuring clear and consistent communications during the emergency?
- The institution's policies on staff absences should be clearly communicated to all staff.
- A clear line of sickness reporting should be established and communicated to all managers and academic and non-academic Heads of Departments.
- What arrangements are in place to communicate with students and staff with physical or mental disabilities?
- What expectations do your stakeholders have of you and you of them?
- To ensure consistency, what arrangements are in place to communicate and/or co-ordinate messages with neighbouring institutions?
- How will business and usual communications be managed?

- What communication platforms are available (text message, email, internet)? How will these be used for internal and external communications?
- How resilient are these platforms and what is your back-up?

Other issues

It is recognised that new issues and considerations will arise during the preparation for an influenza pandemic.

To mitigate for this, it is recommended that you regularly visit the websites in Appendix A and establish communication channels with the local NHS Trust and your local authority emergency planning unit.

12) Death of a Student or a Staff Member

Institutions should consider how they would cope with any death(s) within the HE/FE community during a pandemic. At the same time, it is important to emphasise that most people who contract influenza will recover.

For staff members, HR policies on 'death in service' should be consulted.

For UK, EU and International students, institutions should review their existing guidance on coping with the sudden death of a student.

Further Information

Information contained in this guidance is correct at the time of publication and a review has been established for January 2010 to provide updates as required.

If you have any comments or feedback on this guidance prior to the review in January 2010, please email them to

Flu.planning@bis.gsi.gov.uk

Appendix A

Details of web links referred to in this Guidance

The Department of Health and the Cabinet Office have published a National Framework for responding to an influenza pandemic:

http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_080734

Emergency Planning – consider the former DfES’s existing generic guidance on emergency planning, including a draft Emergency Plan for schools which might be adapted for college use: www.teachernet.gov.uk/emergencies

Government advice on pandemic flu planning at www.dh.gov.uk/pandemicflu and at www.ukresilience.info/emergencies/health.shtm#guidance

NHS Important Information:

www.nhs.uk/AlertsEmergencies/Pages/Pandemicflualert.aspx

Advice to schools and childcare providers at:

<http://www.teachernet.gov.uk/humanflupandemic>

Specific advice for Businesses at:

http://www.cabinetoffice.gov.uk/media/187638/flu_businesses_risk_guidance.pdf

Business Continuity Institute (BCI): www.thebci.org

Emergency Planning Society: www.the-eps.org

Specific advice for the Hospitality Industry at:

http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_082434

National Union of Students: www.nus.org.uk

Catch it, Bin it, Kill it: Respiratory and hand hygiene campaign at:

http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_080839

And the current World Health Organisation (WHO) phase of alert at:

www.who.int/csr/disease/avian_influenza/phase/en/index.html

NHS leaflet for families available at www.dh.gov.uk/pandemicflu – includes answers to Frequently Asked Questions – such as why antibiotics don't work on flu; why there will be no effective vaccine in the first wave of a pandemic; and why a pandemic can strike at any time of the year.

International travel advice can be found at:

http://www.who.int/csr/disease/swineflu/frequently_asked_questions/travel/en/index.html

<http://www.fco.gov.uk/en/travelling-and-living-overseas/swine-flu>

“Guidance on infection control”, including personal hygiene, at:

www.wiredforhealth.gov.uk/PDF/infect_poster.pdf

Employees have rights to time off for dependants:

www.dti.gov.uk/employment/employment-legislation/employment-guidance/page19475.html

Higher Education Business Continuity Network (JISC Mail): www.hebcon.org.uk

HSE's general guidance to employers at:

www.hse.gov.uk/biosafety/diseases/pandemic.htm

Coping with deaths in the college or community during the pandemic. DCSF advice for schools in coping with the sudden death of a student, might be relevant in some cases:

www.teachernet.gov.uk/wholeschool/healthandsafety/pupilsfatality

The Government is unlikely to seek to use emergency powers under the Civil Contingency Act 2004. For those interested, see: www.resilience.gov.uk

Infection control guidance for contractors or managers of cleaning and catering staff:

www.hse.gov.uk/biosafety/diseases/pandflu.htm#11

www.dh.gov.uk/en/PublicHealth/Flu/PandemicFlu/DH_085433

For the Government's latest advice on planning assumptions:

http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_080734

Good practice recommended by HSE: www.hse.gov.uk/biosafety/diseases/pandemic.htm

Guidance for unions: www.tuc.org.uk/h_and_s/tuc-13401-f0.cfm

Other sources of Government Advice through Directgov: www.direct.gov.uk

LSC: www.lsc.gov.uk

HEFCE: www.hefce.ac.uk

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Scottish Government

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Universities and Colleges Admissions Service

Universities UK

Association of Learning Providers

British Association of Health Services for Students in Higher Education

British Universities Finance Directors Group

Cabinet Office

Health Protection Agency

Higher Education Academy

Nursing and Midwifery Council

Office of the Qualifications and Examinations Regulator

Quality Assurance Agency

Sixth Form Colleges Forum

Supporting Professionalism in Admissions

UK Council for International Student Affairs

Universities and Colleges Employers Association



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