

**Q&A: Burson-Marsteller H1N1 Flu conference call  
May 1, 2009**

***Question: In your opinion, are the school closures we've seen in the Fort Worth area and around the U.S. deemed to be an overreaction, an under reaction or an appropriate reaction? And what should our response be as a corporation with our employees who may be affected by a 2-week closure in the case of Fort Worth schools and Dallas area?***

Dr. Joan Nichols: Is this an alarmist attitude? No, because these school closings have been requested in areas where they've had confirmed cases. Some of the cases have been in children. As I told you before, you identify that you have influenza in your population when you see kids staying out of school.

In this case it's giving you a way to make sure that we limit what happens in terms of an initial spread of this virus, and right now it's better to be on the side of caution, at least in terms of the schools, and then possibly in the future if similar outbreaks occur in other places. And so that's my best answer.

Michael Chertoff: I know you're all wondering what happens with your businesses and, it's a judgment call. If you have a confirmed case of someone in the business's location, I would first and foremost consult with your medical advisors and local public health authorities.

You also have to consider what you would close or where you would send people. If, in fact, you were going to send people home, wait it out a little bit, you might just want to limit it to the immediate area the person was located in. I don't know that you want to close your whole business down.

But there's not going to be an absolute rule. You're going to have to essentially make a judgment based upon what your medical advisors tell you.

***Question: Just following on from Secretary Chertoff's comment, what are the triggers should we should be looking out for in terms of when is best to execute on any kind of plan that we may have?***

Michael Chertoff: First of all, if you have a plan, a response plan, you start executing now. That does not mean you close your business now, but if you look at the pandemic flu plan you'll see that the response phase is generally deemed to begin when WHO announces a Phase 5, which they did a couple of days ago. And that means things like the social distancing, managing and tracking your workers, making sure people who might have compromised immune systems, take special precautions, things of that sort.

So you would switch on this plan now. However, that doesn't mean that you cancel all travel. What the plan does is it lays out a series of steps you have to be mindful of.

But how far you take it is going to depend on a number of things. First, and foremost, what is the guidance of the CDC? What is the guidance of your local health authorities? Do you have people in your business who are symptomatic or people who are confirmed cases? Are you considering travel to an area where there are a lot of cases, such as Mexico? What are the conditions of travel?



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You're going to have to make a fact-based judgment on all of these issues. What you can do now though is a series of options so when an issue crops up you know you've got a choice to make, and you understand what the implications of the choice are.

**Question: How do you balance the directions that a corporation gives versus those given by markets or individual geographies on the local level?**

Michael Chertoff: Everybody's organized differently. Generally there's got to be high level corporate decision making in terms of the overall plan and what the basic parameters are. If your business unit is in Mexico that's going to be a different decision than if it's in Sweden. You're going to have to tailor it to a responsible individual who's on the ground who can make the judgment that fits in the geographical area.

My view is that ownership of the overall effort has to be at a corporate level because the reality is if something does become a problem it's going to rise very quickly to a senior level and my general experience is that being absent on those issues is not a very helpful place to be.

**Question: What does that mean if things get worse? How do we know what a critical mass looks like so we would know whether to make a decision to postpone an event or not?**

Michael Chertoff: There is no magic number that you get to or a certain number of cases and now you're in a different place. I think what Dr. Nichols said is you're looking at how efficient the transmission is and how widespread it is and how virulent it is.

In the very worst case, if the public health authorities were discussing this as widespread outbreak with efficient transmission -- a significant number of people getting ill and a significant percentage of these being serious illnesses -- then with respect to gatherings in areas where there's an outbreak, you might well decide you wanted to scale back on that.

It's going to be a combination of factors. If it degenerates to a routine flu -- of the kind we always live with -- you might say, well, now we've dealt with this before. It's not a big deal. If you had a higher mortality rate and you had a widespread flu that might very well cause you to think twice about cancellation. You'd also have to consider how important it is.

It is a balancing test. You should look to see what the CDC is saying. You should look to see what the public health authorities in the locality are saying. In other words, are people in the locality saying, "We don't want to have group events." That's going to tell you something. And of course, you want to consult with your own doctors and with others as well.

Dr. Joan Nichols: I think that's real reasonable. I think the one thing you need to understand, because people have been asking this for the last few days, is are there cases in your travel area?

How many cases have been identified in that travel area? How has that changed? You need to start looking before and event is happening. Does this change much on a daily basis? Has it changed much in the last week?

And then you go from that to the information about your local health. What are their recommendations? Have they closed schools? Have they restricted any kind of other congregations beyond that? Have they closed churches? That starts to tell you that it's a little more severe.

And then the CDC and WHO -- they keep careful information about locations of outbreaks, how many there are. If you take that into consideration as you consider traveling, then that's going to give you your best ability to stay in touch with this and keep ahead of it in terms of as this spreads.

And this outbreak is going to be extended. Again, as we look for the cases we're going to see a lot more people that have been affected. But it's going to take a little bit of time and effort on the

part of your planning in general if you have an event that's planned, to keep track of where it is and then make a good judgment call. And those are reasonable things to do based on what you see. Right now I would suggest that there should be no travel to Mexico City, definitely, and none to Mexico.

For me personally, if I'm required to go there to evaluate or pick up specimens, or if there's anything involved that I must go as part of something, and there is no way out of it for me because that is my business, then I would take precaution.

I would make sure I carried with me -- knowing that I'm going into a severe outbreak area -- some of the medications, the neuraminidase inhibitors: Tamiflu or Relenza.

And I would make sure that I knew what the symptoms were. You could have a printed sheet of what the symptoms were to look out for and then restrict in terms of social distancing and continually wash your hands, condition yourself. Do not touch your face.

If you are in a social setting make sure, as soon as you can after you've shaken hands with everyone, to constantly remind yourself not to touch your face until you wash your hands. And just be aware of what good health procedures would be if you must go into these areas. Anything further out from a severe outbreak area is just good education about what's happening in that environment.

Michael Chertoff: I think it's important to bear in mind, as you make decisions about canceling things and things of that sort -- because this is going to be an event that could unfold over a period of months -- there's sometimes a tendency at the very beginning of a crisis to be very, very strongly reactive and kind of really push to the extreme in terms of what you do. The problem then becomes, can you maintain that tempo and that policy going forward? Because once you raise the bar to a certain level, you have to be able to explain why you lowered the bar. So, if you were to say, for example, we're going to cancel travel, you're going to live with that decision perhaps for a long period of time.

It's important to consider when you decide you want to put a rule in place that you are going to need to be able to explain when you modify the rule. Now, in some areas, it's not a very difficult thing to do.

If you put a rule in place about hand washing and social distancing and don't come to work if you're sick, you can live with that for a long period of time. But the more drastic things, like shutting an office, are going to require you to have an exit strategy about when you would open your office again.

Finally, one thing I want to mention is when you look at the issue of absenteeism, people staying home, you need to consider how you deal with school closings from the standpoint of parents. There will be parents who rely on school for childcare so you're going to have absenteeism in that way. Also, when parents want to care for a sick child, you say to the parent, come in anyway. Not only are you putting the parent in a difficult position, but you are putting the workforce in a position where they, the parent, might become a vector.

That's why thinking through what alternatives are for telecommuting and who can substitute for who now is going to help you if some of these contingencies arise.

Gavin Grant: Our colleagues here on the call who have global group headquarters or facilities, also need to factor in their colleagues elsewhere on the planet who might be operating under different social or cultural political employment laws, norms, and also of course in different time zones in terms of affecting implementing informational flow and enabling clear decision making to occur.



And as Secretary Chertoff just said, having that clarity of what can be defined and decided locally that requires group clarification in an event which may well be truly global, will be particularly important here. Or else you will untimely have delays, which lead to a lack of confidence or potential criticism, because a decision's been bottlenecked at the group level operating in a different time zone where the incident is taking place. That is another factor to just consider in terms of how your plan might be implemented.

**Question: Can you provide an update on the latest news coming out of Mexico City, because it seems like there was some conflicting information about private enterprise and its need to restrict business operations? In the event that we have employees here in the U.S. who have just been traveling in Mexico returning to the U.S., do you recommend any period of confinement prior to them coming back into the workplace, even if they're asymptomatic? And if somebody came back into town last weekend, for example, would we want them to stay away from our U.S.-based workplace for some period of days, perhaps?**

Michael Chertoff: On the issue of Mexico, I think that probably the right thing to do is to – I don't have the information precisely on what the Mexicans are doing now, but I think if you ask your folks down there to see what the guidance is from the local authorities -- it probably depends on where the office is -- you ought to take the guidance from them at this point. Dr. Nichols, you ought to answer the question about people who come back.

Dr. Joan Nichols: This is a consideration. This is important because I've been trying to think about this, too. If I have to go to set up sample shipments to the United States and I'm required to go to Mexico City, the consideration is the incubation period of the virus. Depending on the individual, and how severe your infection when you first acquired it, the incubation is 3 to 7 days -- to give you a little bit wider window than what we would normally talk about.

So that means if you were there and you'd been traveling, and you'd been there for a few days and you come home, it might be prudent to -- if you know you've been in an area that you know had a number of outbreaks that were identified and that you were -- allow yourself a few days before you return back to the normal workforce, just to evaluate your condition overall.

I think that's quite reasonable. And that's only if you're going to target areas like Mexico City. Outside of that, again, if it's just small localized outbreaks, you don't have to use these same measures. But this is going to move so your ability to evaluate over time what happens -- we'll be watching where these outbreaks are, knowing exactly where they're located and how many people are involved.

And realize that if they've identified a few cases and they've got it restricted, it's not as severe a situation as right now in Mexico City which is a very different situation because you have large numbers of people that are affected and we don't even know how far this may have spread.

Michael Chertoff: For whatever guidance you get out of this, the Mexican government did decide to suspend government services if you were going to do government work for the next 7 to 10 days, around the Cinco de Mayo celebration. So that gives you some idea how they're dealing with it and that may help you a little bit.

**Question: I understand the restrictions as far as travel and meetings, but we're getting a lot of questions here about traveling for shows in our industry as May and June are our busiest months.**

Michael Chertoff: It depends on when we're talking about these shows occurring. If it's in the next couple of days you'll probably be able to take some guidance from where the current outbreaks seem to be manifest.

The other thing you can always consider is scaling it back. If you're sending a delegation you may want to judge whether you send fewer people. You also may want to ask your employees if they have children at home or if they've got people at home who are otherwise more vulnerable. Maybe they want to opt out and send somebody else instead.



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It's a judgment call and I think it would be an overreaction to simply say you're going to not attend any events because you might find yourself in that position for a considerable period of time. So look to the CDC, look at where the distribution is. See if you can only send the essential people and then really follow it day by day.

**Question: My question surrounds the integrity of products and how and when companies, if at all, should get the word out that these products are safe, especially if they're consumable products with possible production facilities in Mexico or wherever there might be cases?**

Dr. Joan Nichols: Influenza is short-lived when it hits any given surface. In terms of production and then packaging and transport, the virus is really so sensitive that it really should not survive any of those situations you know for very long. And that would be in the situation where you had a lot being applied by any given person who may have coughed on something along the way.

Nor can it be contracted by eating pork or pig products. Again, because they are cooked you would destroy anything. I would worry more about bacterial contamination than I would viral contamination with influenza.

So, generally products tend to be very safe because this virus doesn't survive, cannot do anything unless it infects an individual in terms of replication. It really isn't even considered live outside of infecting an individual cell.

Michael Chertoff: Finally, and this just comes from my own experience managing a very, very large enterprise with a lot of different people, I think it's important to locate a small number of people who will own this problem for a period of time in the sense that they will be knowledgeable about it.

They will follow it and they will implement what is decided at the top because if it. You will find if this thing drifts away from you as a senior manger and a problem arises that you'll be all of a sudden consumed with a need to figure out what happened and repair the damage. So having a few people own the problem and continue to manage it is critical.

Dr. Joan Nichols: The one thing that's a key overall is to make sure that people have the appropriate sites and I can't stress this -- CDC sites, WHO sites -- the ones that you can trust, the ones that we use to keep track of what's going on, and that we feed information to as scientists, are the ones that you really need to focus on.

And ignore most of everything else that's out there because there's a great deal of misinformation about the virus, about transmission of it and how many cases actually exist. And that keeps you away from the scenario where you're over reactive and gives you the information that you need.

And what you need right now is good, current, constant information over the next months or possibly even year to keep track of what happens as this whole scenario unfolds. And that's the best thing that I can tell you.

In terms of emerging infectious diseases, the world is a very small place now. We move so quickly there's a possibility of these cases spreading even more and that should show you exactly what I mean about how small the world is just based on the cases as individuals visiting Mexico have moved out and carried this virus with them.

That's the one thing to remember: that if you're educated on where the outbreaks are and you keep up on that on a daily basis, then you're right, someone really needs to own this and keep track of it for any individual group so that you know what's happening overall.

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