



LE GOUVERNEMENT
DU GRAND-DUCHÉ DE LUXEMBOURG

Governmental plan Flu pandemic

(translation of the original French document)

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This plan is the framework document for preparation and conduct of the management of a flu pandemic.

It is an active working document which will be completed and updated with the evolution of the threat, scientific knowledge, the epidemiological situation, prophylactic means and available therapies.

The pertinent measures will be decided upon by the authorities dealing with national protection at the opportune time, communicated to the public, and implemented by the departments and services in charge.

Objective

The present plan describes the action to be taken by the government with regard to the risk of a flu pandemic, as well as the bird flu in animals and in humans which precedes it.

It has been drawn up by the government in Council to provide the appropriate planning and preparation, surveillance and prevention, action and management of the consequences in view of the increasing risk of a flu pandemic the A/H5N1 virus might cause.

The term “bird flu” indicates an illness occurring throughout the world only infecting (wild or domestic) birds but which can affect other animal species such as pigs, horses and cats. In exceptional circumstances, the bird flu virus can be transmitted from animals to humans (close, repeated and prolonged contact with infected animals, with their excrement or with infected animal products). The “flu pandemic” is a particular form of human flu which could occur on a world scale following an adaptive mutation of the bird flu virus or a reassortment of the influenza A virus which would permit human-to-human transmission.

The objective is to

- contain the propagation of bird flu in animals, or at least to slow down that propagation, in order to limit the risk of transmission from animals to humans and thus to avoid human casualties and economic losses;
- contain the propagation of a flu pandemic, or at least to slow down that propagation, not only in order to minimise the number of sick persons, but also to gain time while awaiting the optimisation of specific vaccines;
- provide the best medical treatment possible;
- enable management of the consequences, in particular in the socio-economic field.

The plan describes the risks associated with these phenomena, as well as the measures the government intends to apply to achieve its objective. These measures are greatly inspired by those planned in France. At the present time, there is close cooperation with Belgium and Germany, and within the European Union.

For the risks, there are plans for:

- constant monitoring at all levels,
- continuous interministerial analysis,

and, for the elaboration and implementation of measures:

- interministerial coordination,
- coordination between the public sector and the private sector,
- total transparency,
- harmonisation with the actions of neighbouring countries.

In order to guarantee maximum efficiency in its implementation, the plan will be continually adapted, in particular in relation to the evolution of scientific knowledge in the medical and veterinary fields. Its application will be gradual, depending upon the evolution of the epizootic or pandemic on the ground.

History

Since the 16th century, approximately three pandemics have been documented per century, at intervals of 10 to 50 years. That was particularly the case in the last century. The Spanish flu (1918-1919) caused around 40 million deaths. Asian flu (1957-1958) and the Hong Kong flu (1968-1969) cost the lives of approximately 1 million people. By way of comparison, seasonal flu claims 250,000 to 500,000 lives annually on a world scale.

Risks

Bird flu is a threat since it is an infectious illness which can be accompanied by complications liable to cause death. With this illness there is a potential for pandemic, the triggering of which could very rapidly threaten the entire population. That potential increases in particular by virtue of continuous geographic expansion and a raise in the number of case among animals and humans.

The standard scenario for a pandemic provides that it will strike in several waves lasting two to three months, with an interval of several months at least between two consecutive waves. Within those waves, the pandemic will strike rapidly and without prior notice. The second wave is usually more severe than the first.

In the absence of specific vaccines, the vulnerability of humans could be extremely high, in particular as a consequence of the absence of immunity against a new viral strain. Between three and six months will be required for the development of such a vaccine, from the date of isolation of the new strain.

The impact would be felt in the form of morbidity, mortality and a high degree of absenteeism. If these phenomena reach a certain threshold, the fear would arise of a severe socio-economic crisis.

Certain circumstances could attenuate the impact. Medicine is better informed and prepared than at the beginning of the last century. Hygiene and nutrition are far superior to those after World War I.

Other circumstances could make the impact more serious. Vectors of propagation are considerably more rapid and more intensive these days, especially aircraft. The quality of medical care to which we are accustomed could be impossible to provide on a large scale.

It is all the more important to do everything to slow down the propagation of a pandemic.

Risk depends on threat, vulnerability and impact. As in the case of a flu pandemic these three factors could prove to be severe, and the associated risks must therefore be considered important.

Current situation

The plan takes account of the possible prolonged existence of a potentially pandemic flu virus of the subtype H5N1, which has raged in Asia since 2003. We observe that bird flu in animals is highly pathogenic to animals and that the level of fatality among humans is very high (approximately 50%).

Today the mutation of the virus into a form transmissible from human to human has not occurred. So long as that mutation does not occur, there will be no immediate risk of a pandemic. On the other hand, at this stage it is impossible to develop a specific vaccine to protect humans. The experts agree on the certainty of a mutation and therefore, on a world pandemic in an unforeseeable lapse of time.

For some animals there are more or less effective vaccines.

The epizootic having not been checked at source, the mechanisms and vectors of propagation already in place will ensure that the risk persists in the long term.

Uncertainties

Several uncertainties complicate the forecast. The virulence of the virus can only be assessed once it is known that the virus is transmissible from human to human. The relative parameters of the way in which the pandemic develops can vary (the date of commencement of the first wave, the magnitude of the waves and the frequency of the waves). The efficacy of the antivirals we have appears to be good in relation to existing viruses, but would not be guaranteed for the mutated virus. The date of availability of an effective specific vaccine is not known.

Action against bird flu in animals

In the event of bird flu appearing in animals in Luxembourg, an intervention plan will be triggered immediately. The measures contained in that plan aim on the one hand to eradicate the virus by the sanitary culling of poultry or other captive birds as well as the cleaning and disinfection of contaminated infrastructures. The propagation of the agent responsible is limited by the implementation of a protection zone with a radius of 3 kilometres and a surveillance zone of 10 kilometres, within which the sanitary surveillance is increased.

Restrictions on the transport and movement of animals, persons and objects likely to be contaminated will contribute to limiting the spread of the virus from that location or outbreak. To the same end, bio-security measures (disinfection devices, wheel baths, disinfection facilities for footwear and so on) will be introduced around the location or outbreak, in commercial poultry farms and within the confines of the protection zone.

The approach of systematic vaccination of poultry has not been adopted so far since that vaccination would enable the sick animal to continue to carry and to transmit the virus, since at the present time there is no test to distinguish a sick animal from a vaccinated animal. The application of vaccines by some countries and the development of new vaccines are being monitored with interest. A vaccination strategy could be adapted to such evolutions.

Action against bird flu in humans

For isolated cases of bird flu in humans a procedure similar to that already adopted in the field of serious infectious illnesses is applied. Sick persons are dealt with by the Service national des maladies infectieuses (National Service for Infectious Diseases), after an epidemiological survey has been carried out by the Inspection sanitaire de la direction de la santé (Sanitary Inspectorate of the Health Directorate).

Action against a flu pandemic

When a flu pandemic is triggered, a network of doctors in charge of bird flu will be activated. The doctors in charge will provide the first line of detection and treatment of isolated cases. In order to slow down the propagation of the virus, the circulation of sick persons will be avoided. That is why doctors in charge of bird flu will make home visits on the basis of a duty system operating day and night. Sick persons suffering from serious complications will be admitted to hospital.

Once the doctors in charge of bird flu are active, the normal duty system for general medical practice will be stopped.

Fourteen pandemic centres will be activated progressively, depending upon the volume and location of patients. The doctors in charge of bird flu will treat sick persons in these centres and continue to make home visits, insofar as possible. Residents will be treated in a centre close to their home. Cross-border workers will be treated in a centre close to their place of work. The antiviral application strategy will be defined once the efficacy of the available antivirals against the pandemic viral strain is known for the various types of people. A national stock of antivirals will be established.

Once a specific vaccine for a pandemic viral strain is available, pandemic centres will be converted into vaccination centres. The vaccination strategy will be defined once the epidemiological characteristics of the pandemic are known. Access to adequate quantities of the pandemic vaccine has been negotiated.

Communication

Government information and communication will revolve around two axes: external communication, which includes communication with the general public and responds to questions from individuals, and internal communication to ministeries, administrations, national and international institutions and the economic sector.

Horizontal coordination of the organisation of external communication will be incumbent upon the Service information et presse du gouvernement (Government Press and Information Service), which will chair a unit consisting of the principal parties responsible and which will operate as the issuing centre for government communication. The media are preferred partners of the unit.

A hotline will be established to answer individual questions from the population, as well as a government Internet site dedicated to bird flu (www.grippeaviaire.public.lu).

Horizontal coordination of the organisation of internal communication will fall to the Haut-Commissariat à la protection nationale (High Commission for National Protection).

Socio-economic action

The organisation of the continuity of economic activity is of primary concern, both at energy and industry level. The maintenance of transport also has repercussions on the economy (for instance the international transport of commodities).

So, if necessary, the distribution of energy resources, commodities, industrial products and essential supplies will be subject to particular control. A price control procedure could possibly be introduced.

If necessary, industrial production, including energy production at a sufficient level and the securing of essential supplies (for instance domestic fuel for home heating) must be guaranteed.

As for transport, the aim is to ensure continuity of services insofar as possible in all phases of a flu pandemic in order to respond flexibly to demand for local, regional, national and international mobility in relation to the needs of the population and economy of Luxembourg.

Limitations and bans in particular on public transport could be introduced gradually or totally and, if necessary, special transport to pandemic centres or any other destinations can be envisaged so as to guarantee that transport is able to respond immediately to the demands placed upon it.

Crisis management organisation

Political and strategic conduct

The Prime Minister directs government action. He assumes political control and strategic direction. He determines the attitude to be adopted by Luxembourg and the predominant risk. The national protection structure assists and advises at a political level. At an interministerial level, the High Commission for National Protection is responsible for the development and coordination of a national strategy, risk analysis, measures, contributions, resources, and the identification of priorities for action and operational control. The Crisis Unit is the platform for interministerial work. While aspects relating to the bird flu epizootic prevail, the Crisis Unit will be co-piloted by the director of the Administration des services vétérinaires (Veterinary Services Department). Once aspects relating to the pandemic prevail, the head of the Health Directorate will assume that role. This mechanism will also apply to socio-economic or public order matters, under the responsibility of a delegate from the Ministry of Economy or Justice respectively.

The Ministry of Foreign Affairs is competent for management of the external aspects of the crisis, in particular concerning Luxembourg citizens abroad.

Operational conduct

While aspects relating to the bird flu epizootic prevail, the Secretary of State for Agriculture, Viticulture and Rural Development will assume responsibility for operational conduct. Once aspects relating to the pandemic prevail, the Minister of Health will assume this role. This mechanism will also apply to socio-economic or public order matters, under the responsibility of a delegate from the Ministry of Economy or Justice respectively. The national protection structure assists and advises at a political level.

The situation/assessment, communication/information, liaison/coordination units form the operational Crisis Unit.

Crisis centre

The crisis centre will be installed in the Government Communications Centre. Political and strategic conduct, as well as operational conduct will be managed from there.

World Health Organisation plan for preparation for a flu pandemic

Phases included in the governmental “Flu Pandemic” plan

| PHASES | PUBLIC HEALTH PRIORITY AIMS |
|--|---|
| <u>Interpandemic period</u> | |
| Phase 1. No new subtypes of the flu virus have been detected in humans. A subtype of the flu virus that has caused human infection may be present in animals. If present in animals, the risk ^a of human infection or disease is considered to be low. | Reinforce preparation for a flu pandemic on a world, regional, national and local scale. |
| Phase 2. No new subtypes of the flu virus have been detected in humans. However, a circulating subtype of the flu virus poses a substantial risk of human disease. | Reduce to a minimum the risk of transmission to humans; detect and report such transmission rapidly if it occurs. |
| <u>Pandemic alert period</u> | |
| Phase 3. Human infection(s) with a new subtype, but no human-to-human spread, or at most rare instances of spread to a close contact. ^b | Ensure that the new viral subtype is rapidly characterised and new cases are detected and notified rapidly and measures taken. |
| Phase 4. Small cluster(s) with limited human-to-human transmission but spread is highly localised, suggesting that the virus is not well adapted to humans. ^b | Contain the new virus within limited outbreak areas or slow down its propagation to gain time in order to adopt measures for preparation, in particular perfecting a vaccine. |
| Phase 5. Larger cluster(s) but human-to-human spread still localised, suggesting that the virus is becoming increasingly better adapted to humans, but may not yet be fully transmissible (substantial pandemic risk). | Endeavour to a maximum to contain or slow down propagation, in order perhaps to avoid a pandemic and to gain time for the implementation of measures to fight the pandemic. |
| <u>Période de pandémie</u> | |
| Phase 6. Pandemic: increased and sustained transmission in general population. ^b | Reduce pandemic effects to a minimum. |
| <u>Post-pandemic period</u> | |
| Phase 7. Return to an interpandemic period. | |

A distinction is drawn in phases 2, 3, 4 and 5 between
 - cases found abroad: 2A, 3A, 4A, 5A
 - cases found in Luxembourg: 2B, 3B, 4B, 5B

^a The distinction between **phase 1** and **phase 2** is based on the risk of infection or illness in humans resulting from the presence of strains circulating in animals. This distinction is based on various factors and on their relative importance taking current scientific knowledge into account. It may be the pathogenic power in animals and in humans, the occurrence of cases in domestic and breeding animals or solely in wild animals, the enzootic or epidemic nature, geographically localised or widespread and/or other scientific parameters.

^b The distinction between **phases 3, 4 and 5** is based on an assessment of the risk of pandemic. Consideration may be given to various factors and their relative importance taking current scientific knowledge into account. It may be the speed of transmission, the localisation and geographic extension of the virus, the seriousness of the illness, the presence of genes belonging to strains pathogenic to humans (if they are derived from a strain encountered in animals) and/or other scientific parameters.

Governmental plan “Flu pandemic” – catalogue of measures

| Reinforcing public organisation | | | | | | | | | | | |
|---|----|----|----|----|----|----|----|------|---|----|---|
| 1 | 2A | 2B | 3A | 3B | 4A | 4B | 5A | 5B/6 | 7 | 1 | Establishing and continuously adapting the crisis management structure. |
| | 2A | | 3A | | | | | | | 2 | Activating the surveillance unit of the food safety coordination committee. |
| | | 2B | 3A | 3B | 4A | | | | | 3 | Activating the pandemic unit of the Ministry of Health. |
| | 2A | 2B | 3A | 3B | 4A | 4B | 5A | 5B/6 | | 4 | Activating the Communication/Information Unit centralising communication and information intended for the media and the population. |
| | | | 3A | 3B | 4A | | 5A | | | 5 | Establishing a unit to monitor infected Luxembourg citizens abroad, in particular through a diplomatic or consular Luxembourg representation, or in the absence of such representation by Belgium or the EU. |
| | | | | | 4A | 4B | 5A | 5B/6 | | 6 | Coordination by the district commissioner at intercommunal level. |
| | | | | | 4A | 4B | 5A | | | 7 | Preparing State departments and the operators concerned with management, in a situation of pandemic, of public order, provisioning the population, supplying energy, electronic communications, postal or banking services. |
| | | | | | 4A | 4B | 5A | | | 8 | Preparing for the implementation of plans for the continuity of departments and operators; interim planning of the persons in charge at all levels; preparation of State departments and the operators concerned with management in a situation of pandemic, of public order, provisioning the population, supplying energy, electronic communications, postal or banking services. |
| | | | | | 4A | 4B | 5A | | | 9 | Detailed and nominative division of staff vital to the operation of structures; planning as many substitutional teams as possible, precisely formatted. |
| | | | | | | | | 5B/6 | | 10 | Establishing a plan for the distribution of health products and protection equipment. |
| | | | | | | | | 5B/6 | | 11 | Establishing a unit for the continuity of economic activity with the Minister of Economy. |
| | | | | | | | | 5B/6 | | 12 | Activating the crisis command post with the Minister of Justice. |
| | | | | | | | | 5B/6 | | 13 | Isolating staff on alert. |
| Avoiding the introduction of the epizootic to Luxembourg and increasing surveillance of the territory | | | | | | | | | | | |
| 1 | 2A | | 3A | | 4A | | | | | 14 | Monitoring the circulation of bird flu viruses in commercial poultry farms. |
| | 2A | | 3A | | 4A | | | | | 15 | Identifying poultry breeders per commune. |
| | 2A | | 3A | | 4A | | | | | 16 | Banning the importation of birds and animal products originating from affected areas, in liaison with the European Commission (possibly suspending the issue of animal import, export and transport certificates). |
| | 2A | | 3A | | 4A | | | | | 17 | Increasing veterinary and customs checks. |
| | 2A | | 3A | | 4A | | | | | 18 | Ordering vigilance and observance of good hygiene practices in particular in commercial poultry farms. |
| | 2A | | 3A | | 4A | | | | | 19 | Implementing specific measures for the protection of commercial poultry farms. |
| | 2A | | 3A | | 4A | | | | | 20 | Monitoring birds of highlighted native and migratory species. |
| | 2A | | 3A | | 4A | | | | | 21 | Assessing the means of veterinary diagnosis and intervention in relation to risk. |

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| | 2A | | 3A | | 4A | | | | | 22 | Implementing emergency plans for bird parks and zoos. |
| | 2A | | 3A | | 4A | | | | | 23 | Defining special rules for hunting: practices to be followed, restriction, bans. |
| | 2A | | 3A | | 4A | | | | | 24 | Determining a strategy for the possible vaccination of threatened species. |
| | | | 3A | | 4A | | | | | 25 | Vaccinating threatened species. |
| | 2A | | 3A | | 4A | | | | | 26 | Provisions relating to the policing of markets where birds are sold, bird sellers and bird shows. |
| Containing the spread of the virus among animals and eradicating it | | | | | | | | | | | |
| | | 2B | | 3B | | | | | | 27 | Confinement of poultry likely to have been contaminated or to be at the origin of the contamination of the infected farm. |
| | | 2B | | 3B | | | | | | 28 | Triggering the Ministry of Agriculture bird flu emergency plan. |
| | | 2B | | 3B | | | | | | 29 | Triggering an epidemiological survey of suspected or confirmed animals. |
| | | 2B | | 3B | | | | | | 30 | Upon confirmation or strong suspicion of a case in an outbreak area, destroying poultry and establishing the perimeters of a protection zone (control of traffic, confinement of poultry, possible preventive culling within the perimeter of that zone) and a broader surveillance zone. |
| | | 2B | | 3B | | | | | | 31 | Destroying or decontaminating produce from infected poultry farms or those situated in protection and surveillance zones. |
| | | 2B | | 3B | | | | | | 32 | Inspecting and controlling farms situated in protection and surveillance zones. |
| | | 2B | | 3B | | | | | | 33 | Informing the European Commission and the World Organisation for Animal Health (formerly: International Epizootic Office). |
| | | 2B | | 3B | | | | | | 34 | Increasing veterinary and customs checks. |
| | | 2B | | 3B | | | | | | 35 | Ordering vigilance and observance of good hygiene practices in particular in commercial poultry farms. |
| | | 2B | | 3B | | | | | | 36 | Taking specific measures to protect poultry farms on all or part of the territory. |
| | | 2B | | 3B | | | | | | 37 | Implementing emergency plans for bird parks and zoos on all or part of the territory. |
| | | 2B | | 3B | | | | | | 38 | Monitoring birds of highlighted native and migratory species. |
| | | 2B | | 3B | | | | | | 39 | Defining special rules for hunting: practices to be followed, limitation, bans. |
| | | 2B | | 3B | | | | | | 40 | Vaccinating threatened species. |
| | | 2B | | 3B | | | | | | 41 | Provisions relating to the policing of markets where birds are sold, bird sellers and bird shows. |
| Preventing any transmission to humans | | | | | | | | | | | |
| | | 2B | | | | | | | | 42 | If there is an outbreak identified as an epizootic due to a highly pathogenic virus, implementing actions provided in the operational intervention plan in case of an epizootic in Luxembourg or in bordering regions in order to prevent any contamination of the persons involved in the poultry business, breeders' families, veterinary inspectors charged with checking the epizootic outbreak. |
| | | 2B | | 3B | | | | | | 43 | Reinforcing measures relating to hygiene in farms either affected or threatened. |
| | | 2B | | 3B | | | | | | 44 | Establishing a scheme of medical surveillance of exposed persons. |
| | | 2B | | 3B | | | | | | 45 | On a decision by the medical inspector of the Health Directorate, chemo-prophylaxis of exposed persons. |
| | | 2B | | 3B | | | | | | 46 | Vaccinating exposed persons against seasonal flu. |

| Preparing a national plan of action for response to a pandemic | | | | | | | | | | | |
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| | | | 3A | 3B | | | | | | 47 | Operators, particularly those active in sectors of economic activity which are vitally important, establishing their contingency plans aimed at ensuring constant provision of goods and services. |
| 1 | | | | | | | | | | 48 | Defining and testing of prevention capacities and measures as well as those for the fight against a flu pandemic. |
| | | | 3A | 3B | | | | | | 49 | Building up stocks of health products and protection equipment at a national level. |
| | | | 3A | 3B | | | | | | 50 | Establishing stocks of safety equipment (masks, health products) in health establishments. |
| | | | 3A | 3B | 4A | | | | | 51 | Building up stocks of health products and protection equipment in certain diplomatic or consular representations. |
| | | | | | 4A | 4B | 5A | | | 52 | Encouraging the antipneumococcic vaccination of vulnerable persons (protection against certain secondary bacterial infections). |
| | | | | | 4A | 4B | 5A | | | 53 | Checking the availability of diagnostic tests (polymerase chain reaction primers). |
| | | | 3A | 3B | | | | | | 54 | Reserving future pandemic vaccine contractually. |
| | | | | | 4A | 4B | 5A | | | 55 | Organising support for fragile persons within their remit (retirement homes, disabled, children...). |
| | | | | | 4A | 4B | 5A | | | 56 | Organising commune support for the population: proximity networks, contact with social and district associations, etc. |
| | | | | | 4A | 4B | 5A | | | 57 | Securing stocks of health products and protection equipment. |
| | | | | 3B | | 4B | 5A | | | 58 | Securing biological products virally (blood, transplants, etc.). |
| | | | | | | 4B | 5A | | | 59 | Checking the provisions put in place for the organisation of care in health establishments and independent medical practices. |
| | | | | | 4A | 4B | 5A | 5B/6 | | 60 | Forming a pool of personnel for the benefit of other ministries/departments/services. |
| Assisting Luxembourg citizens abroad | | | | | | | | | | | |
| | | | 3A | 3B | | | | | | 61 | Depending upon local sanitary capacities to assume responsibility and the condition of the patient, possible case-by-case repatriation on medical grounds on the decision of the Crisis Unit, in close consultation with the diplomatic or consular representation, subject to guaranteeing the safety of the crew and the medical assistance team; before departure, informing the Ministries of Health and of the Interior with regard to organising reception and admission to hospital. |
| | | | | | 4A | | 5A | 5B/6 | | 62 | Taking in charge or on-site assisting Luxembourg citizens abroad (suspect cases or sick persons), maximising recourse to local resources, whether by instructing a local doctor or by relying on local health structures, if necessary with the support of means stored at the Luxembourg diplomatic or consular representation. |
| | | | | | 4A | | | | | 63 | Recommending the return of expatriate families (separate decisions for affected countries and threatened countries). |
| | | | | | 4A | | | | | 64 | Consulting locally with companies employing Luxembourg expatriates on the reduction of their workforce on site (separate decisions for affected countries and threatened countries). |
| | | | | | | | 5A | | | 65 | Informing Luxembourg citizens abroad about the principle and terms of taking in charge persons on site (suspect cases or sick persons) in affected countries. |

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| | | | | | | 5A | | | 66 | Temporarily closing diplomatic and consular representations not vital to management of the pandemic, repatriation, and/or reallocation of staff. |
| | | | | | | 5A | | | 67 | Examining the opportunity, risks and consequences of a formal recommendation to Luxembourg citizens abroad to leave countries neighbouring affected countries. |
| | | | | 4A | | 5A | | | 68 | Assisting non-resident Luxembourg citizens whose return is no longer possible. |
| Slowing the introduction of cases on national territory | | | | | | | | | | |
| | | | | 4A | | 5A | | | 69 | Monitoring the emergency meetings of the Member States of the European Union in order to study the measures to be taken (limiting air links, quarantine on arrival, limiting the grant of entry visas in the Schengen area); consulting with Member States and the Commission on the nature and scope of control measures planned by Luxembourg (simple information in case of emergency). |
| | | | | 4A | | | | | 70 | Suspending air and sea links with affected areas; for travellers en route from those areas, preventive quarantine on their arrival (very limited capacity). |
| | | | | | | 5A | | | 71 | Suspending air and sea links with affected countries; for travellers en route from those countries, preventive quarantine on their arrival (very limited capacity). |
| | | | | 4A | | | | | 72 | Notices to travellers about to visit affected areas: warning of the potential impossibility of repatriation on medical grounds and possible quarantine of travellers on their return. |
| | | | | | | 5A | | | 73 | Suspending the grant of visas to Luxembourg in affected countries on the basis of coordination at EU/Schengen level. |
| | | | | 4A | | 5A | | | 74 | Increasing health checks at frontiers. |
| | | | | 4A | | 5A | | | 75 | Implementing a system to trace travellers on their arrival. |
| | | | | | | 5A | | | 76 | Widening quarantine measures (limited capacity) or post-exposure treatment to Luxembourg citizens coming from countries neighbouring affected countries. |
| | | | | | | | 5B/6 | | 77 | Interrupting international transport, in particular by air, vector of epidemic importation. |
| | | | | | | | 5B/6 | | 78 | On their arrival, quarantining crews and passengers of flights from affected countries. |
| Assisting affected countries | | | | | | | | | | |
| | | | | 4A | | | | | 79 | Contributing to the World Health Organisation action to aid affected countries to contain the epidemic. |
| | | | | 4A | | | | | 80 | International consultation in order to study the isolation measures to be implemented, in cooperation with affected countries. |
| Detecting and notifying human cases on national territory | | | | | | | | | | |
| | | | 3A | 3B | 4A | | | | 81 | Reinforcing sentinel networks and putting them on alert. |
| | | | | | | 4B | 5A | | 82 | Putting doctors in charge of bird flu in alert. |
| | | | | | | 4B | 5A | | 83 | Reinforcing the flu diagnosis laboratory. |
| | | | | 3B | | 4B | | | 84 | In case of suspicion, immediate put in charge of the Crisis Unit. |
| | | | 3A | 3B | 4A | 4B | 5A | | 85 | Sending biological samples to the World Health Organisation or European Commission reference laboratories for confirmation; informing the World Health Organisation and the European Commission. |
| Taking in charge suspect cases, contact persons and sick persons | | | | | | | | | | |
| | | | | 3B | 4A | 4B | | | 86 | Organising the admission of patients to hospital for observation, nasal-pharyngeal samples and isolation. |
| | | | | 3B | | | | | 87 | Taking in charge confirmed human cases and possible cases of bird flu in accordance with the protocol |

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| | | | | | | | | 5B/6 | | 105 | Interrupting collective activities (public transport, gatherings, education and training...) in affected areas. |
| Slowing the transmission of the virus on national territory | | | | | | | | | | | |
| | | | | | | | | 5B/6 | | 106 | During the initial phase of the epidemic, interrupting certain means of public transport, in particular urban transport, places where there is a potential for transmission of the virus; then, and at short notice, activating minimum or at least partial service to cope with vital needs; possible adaptation depending upon the virulence of the infectious agent. |
| | | | | | | | | 5B/6 | | 107 | Closing crèches, educational and training establishments, boarding schools, cultural institutes and establishments, research establishments (except those called upon, if such should be the case, to contribute to easing the crisis), holiday and leisure centres (vital measure the efficacy of which is demonstrated in limiting contagion in flu epidemics). |
| | | | | | | | | 5B/6 | | 108 | Suspending all gatherings of the population: shows, sporting events, fairs and exhibitions, etc. |
| | | | | | | | | 5B/6 | | 109 | Restricting visits and/or controlling access to hospitals, retirement homes, reception centres, prison establishments, etc. |
| | | | | | | | | 5B/6 | | 110 | Restricting non-essential professional, social, educational, cultural and community activities. |
| | | | | | | | | 5B/6 | | 111 | Protection in the shape of a circle around the first cases; isolation measures; taking in charge contact persons. |
| | | | | | | | | 5B/6 | | 112 | Once the pandemic vaccine is available, implementing a vaccination plan. |
| | | | | | | | | 5B/6 | | 113 | Issuing reminders of standard hygiene principles (washing hands, etc.). |
| | | | | | | | | 5B/6 | | 114 | Health personnel and, if possible, other exposed persons wearing breathing apparatus; sick persons wearing surgical masks. |
| | | | | | | | | 5B/6 | | 115 | Strict application, by persons presenting flu symptoms, of instructions to stay at home and of instructions of regulation by the health system. |
| | | | | | | | | 5B/6 | | 116 | Limiting individual journeys only to those which are necessary, calling for a public-spirited approach. |
| Maintaining essential activities | | | | | | | | | | | |
| | | | | | | | | 5B/6 | | 117 | Implementing the contingency plans of ministries, public establishments, local authorities and operators. |
| | | | | | | | | 5B/6 | | 118 | Each ministry checking the consistency of measures taken by socio-economic actors in their sectors of activity with the global strategy defined by the government. |
| | | | | | | | | 5B/6 | | 119 | State departments collating information from companies, distribution platforms and purchasing headquarters, enabling supplies to be properly arranged. |
| | | | | | | | | 5B/6 | | 120 | Activating units to monitor supplies and activities, reporting to the operations centre. |
| | | | | | | | | 5B/6 | | 121 | Checking the distribution of resources in energy, commodities, industrial products and necessary provisions. |
| | | | | | | | | 5B/6 | | 122 | Putting price controls in place. |
| | | | | | | | | 5B/6 | | 123 | Requisitioning persons, goods and services. |
| | | | | | | | | 5B/6 | | 124 | Exploiting alternative modes of organisation: developing tele-working and video conferences at all levels of hierarchy; mutualising resources, certain personnel carrying out additional tasks normally not performed by them, calling on people made available by the closing of establishments; calling on "young retired people", experienced students, volunteers, recovered persons (in principle immunised); |

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| | | | | | | | | | | | local solidarity (agricultural sector for instance), etc. |
| | | | | | | | | 5B/6 | 125 | Ministries and communes providing closed establishments (educational establishments, sports centres...) to satisfy all the priority needs concerning the fight against the epidemic or to keep the country running. | |
| | | | | | | | | 5B/6 | 126 | For installations which cannot be halted (including some laboratories), implementing precautionary measures such as maintenance measures or relief teams using a "quarantine lock" (isolated premises where the relief team remains for the nominal incubation period). | |
| | | | | | | | | 5B/6 | 127 | Securing installations identified in advance which, if the workforce present were insufficient, could prove dangerous for the population; observance of the moment of halting industrial activities in continuous operation; planning relief persons taken from workforce sent home at the beginning of the crisis. | |
| | | | | | | | | 5B/6 | 128 | Civil-military cooperation in the fields of government continuity, contribution to security and assistance to the population. | |
| | | | | | | | | 5B/6 | 129 | Assistance: giving any kind of aid to persons. | |
| | | | | | | | | 5B/6 | 130 | Public order: carrying out tasks according to priorities defined and updated by the Minister of Justice, taking account of the needs expressed by ministries (protection of hospitals, stocks and transport of protection equipment and health products, shops...). | |
| | | | | | | | | 5B/6 | 131 | Justice: safeguarding penal law activities essential to maintain public order; for the prison administration, maintenance and surveillance of persons in the hands of the law. | |
| | | | | | | | | 5B/6 | 132 | Producing and distributing energy: continuing the "production" function, if necessary in reduced mode; full maintenance of the "security" function; supplying priority transport; supplying domestic fuel for heating homes. | |
| | | | | | | | | 5B/6 | 133 | Food provision: supplying the population, in particular via shops and distribution platforms; food for breeding animals. | |
| | | | | | | | | 5B/6 | 134 | Financial channels and means of payment: supplying banks and ATM (automatic teller machines); delivering social minima, in particular by the National Post and Telecommunications Service. | |
| | | | | | | | | 5B/6 | 135 | Electronic communications: continuity of government liaisons. | |
| | | | | | | | | 5B/6 | 136 | Pharmaceutical and medical industry: acquiring vital health products and medical equipment; supplying the healthcare system. | |
| | | | | | | | | 5B/6 | 137 | Acquiring protection equipment, household and hygiene products: masks of all sorts, single-use gloves, protective spectacles, all antivirus and disinfectant products, soap, disposable tissues. | |
| | | | | | | | | 5B/6 | 138 | Transport: infrastructures and networks; control, regulation and operation services; planning priority transport (foodstuffs, health products, medical oxygen, water treatment products [chlorine...], hydrocarbons, biomedical waste, priority tasks for Météo Luxembourg). | |
| | | | | | | | | 5B/6 | 139 | Continuous operation of drinking water production and distribution installations. | |
| | | | | | | | | 5B/6 | 140 | Maintenance of IT systems of all sorts (networks, IT means...). | |
| | | | | | | | | 5B/6 | 141 | Restriction and health control of access to premises dedicated to means of intervention, means of alert and crisis management centres. | |

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| | | | | | | | | 5B/6 | | 142 | Limitation of relief from military and civil detachments operating or stationed abroad. |
| | | | | | | | | 5B/6 | | 143 | Limitation or cessation of non-essential activities (exercises, courses, missions, etc.). |
| | | | | | | | | 5B/6 | | 144 | Implementation, incentives and organisation, by local authorities, of neighbourhood solidarity actions in favour of isolated persons or dependents, or families kept at home to care for one or more sick persons; use of lists of isolated elderly and disabled persons. |
| | | | | | | | | 5B/6 | | 145 | Recourse to voluntary help relying as much as possible on existing community structures. |
| | | | | | | | | 5B/6 | | 146 | Financial assistance to persons. |
| | | | | | | | | 5B/6 | | 147 | Definition of adapted terms of recovery of debts and claims of essential services. |
| | | | | | | | | | | 148 | Psychological support for the families of victims. |
| | | | | | | | | 5B/6 | | 149 | Assuming responsibility for isolated children and non-sick dependent persons. |
| | | | | | | | | 5B/6 | | 150 | For communes and associations of communes responsible for managing household waste: - collecting and eliminating infectious waste; - suspending selective sorting in waste treatment installations in order to reduce the risk of exposure to the agents concerned, and concentrating means for the collection and elimination of residual household waste; - suspending the composting of certain waste when there are risks of propagation of the epidemic; - protecting those carrying out the collection of waste in order to limit the risks of contamination (masks); - continuous operation of used water purification systems (communes and associations of communes). |
| | | | | | | | | 5B/6 | | 151 | Implementing the hydrocarbon resources plan. |
| | | | | | | | | 5B/6 | | 152 | Immediate installation by operators of a mode of operation with a reduced workforce and the creation of "reserved" relief teams, possibly isolated on a health level. |
| | | | | | | | | 5B/6 | | 153 | Encouraging the implementation of substitution solutions (for example electronic mail). |
| | | | | | | | | 5B/6 | | 154 | Reducing non-essential activities by the postal services (for example advertisements). |
| Assessing the situation and anticipating developments | | | | | | | | | | | |
| | | | | | | | | 5B/6 | | 155 | Each ministry establishing and disseminating a daily situation summary, from indicators which will have been defined in advance (cf. permanent tasks); surveillance aimed at anticipating difficulties which might arise; to that end, association of operators in their respective sectors. |
| | | | | | | | | 5B/6 | | 156 | Updated daily forecasts, if possible, of the evolution of the epidemic, taking account of activity data from health establishments and making an inventory of deaths at home or in hospital. |
| | | | | | | | | 5B/6 | | 157 | Information provided by diplomatic and consular representations in affected countries to the Ministry of Foreign Affairs and the Crisis Unit on the means and measures undertaken in foreign countries. |
| | | | | | | | | 5B/6 | | 158 | Gathering, as quickly as possible, all the parameters and indicators monitoring the health situation with a view to adapting the mechanism for responding to the pandemic. |
| | | | | | | | | 5B/6 | | 159 | Monitoring the balance between consumption and provision of health products as well as hygiene and protection equipment. |
| | | | | | | | | | 7 | 160 | Identifying activities to be restarted as a matter of priority. |
| | | | | | | | | | 7 | 161 | Establishing assessments. |

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| | | | | | | | | | 7 | 162 | Assessing measures implemented during the pandemic phase. |
| Informing the public and professionals | | | | | | | | | | | |
| | 2A | 2B | 3A | 3B | 4A | 4B | 5A | 5B/6 | | 163 | Regularly informing the media and the population through press releases, press conferences. |
| 1 | 2A | 2B | 3A | 3B | 4A | 4B | 5A | 5B/6 | 7 | 164 | Monitoring national and international media. |
| | 2A | 2B | 3A | 3B | 4A | 4B | 5A | 5B/6 | | 165 | Providing information on plans drawn up by the public authorities. |
| | | | 3A | 3B | 4A | 4B | 5A | 5B/6 | | 166 | Activating a government Internet site (www.grippeaviaire.public.lu). |
| | | | 3A | 3B | 4A | 4B | 5A | 5B/6 | | 167 | Activating a hotline to respond to individual questions from the population. |
| | 2A | 2B | 3A | 3B | 4A | 4B | 5A | 5B/6 | | 168 | Providing information on the risks and causes of bird flu at animal and human levels and of the flu pandemic. |
| | 2A | 2B | 3A | 3B | 4A | 4B | 5A | 5B/6 | | 169 | Providing information on the evolution of the situation at a national and international level. |
| | 2A | 2B | 3A | 3B | 4A | 4B | 5A | 5B/6 | | 170 | Providing information on measures decided by the public authorities. |
| | 2A | 2B | 3A | 3B | 4A | 4B | 5A | 5B/6 | | 171 | Advice, recommendations and instructions from the public authorities with regard to hygiene, health, food and socio-economic behaviour. |
| | 2A | 2B | 3A | 3B | 4A | 4B | 5A | 5B/6 | | 172 | Providing information to travellers to affected countries and areas. |
| | 2A | 2B | 3A | 3B | 4A | 4B | 5A | 5B/6 | | 173 | Providing information to the public on the means of taking in charge sick persons. |
| | | | | | | | | 5B/6 | | 174 | Calling for neighbourhood solidarity; issuing reminders of the necessity of keeping sick persons at home; recalling the obligations relating to tasks to be carried out as a matter of priority, etc. |
| | | | 3A | | 4A | 4B | 5A | | | 175 | Obtaining information from air and sea companies and their personnel in the air or at sea, as well as airports and international ports, on the provisions relating to international travel. |
| | | | 3A | | | | | | | 176 | Obtaining information from insurance companies and travel agencies on the provisions relating to international travel. |
| | | | 3A | | | | | | | 177 | Distributing information notices to travellers going to affected areas or returning by direct flights; posting notices in international airports. |
| | | 2B | | 3B | | | | | | 178 | Obtaining information from partners in the health system and persons living within the protection and veterinary surveillance areas. |
| | | 2B | | 3B | | | | | | 179 | Issuing warnings for all suspect case to poultry farmers, vets, other persons involved in breeding and any person in regular contact with wild birds (hunters in particular). |
| | | 2B | | | | | | | | 180 | Information from their supervising ministry, healthcare professionals, doctors, health establishments, emergency services, analytical laboratories, army health service, occupational medical services and educational authorities on the situation and the behaviour to be adopted. |
| | | | 3A | | | | | | | 181 | Information from their supervising ministry to healthcare professionals, doctors, health establishments, emergency services, analytical laboratories, army health service, occupational medical services and educational authorities on the protocols of assuming responsibility. |
| | | | | 3B | | 4B | | | | 182 | Information from their supervising ministry to healthcare professionals, doctors, health establishments, emergency services, analytical laboratories, army health service, occupational medical services and educational authorities on epidemiological monitoring and management of the risk of infection. |
| | | | | | 4A | | 5A | | | 183 | Information from their supervising ministry to healthcare professionals, doctors, health establishments, emergency services, analytical laboratories, army health service, occupational medical services and educational authorities, and making aware of the early detection of any appearance of the virus in Luxembourg. |

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| | | | | | | | | 5B/6 | | 184 | Information from doctors, chemists and the general public on the mechanism for assuming responsibility of sick persons, as well as protective masks and screens. |
| | | | | | | | | 5B/6 | | 185 | Informing associations on their role in the case of pandemic, in particular providing assistance to persons who are isolated or in a dangerous situation. |
| | 2A | 2B | 3A | | | | | | | 186 | Mobilising diplomatic and consular representations to inform Luxembourg citizens abroad of the situation and its consequences. |
| | | | 3A | | | | | | | 187 | Issuing specific recommendations to diplomatic and consular representations, to Luxembourg citizens abroad residing in affected countries and applicants to visas to enter the Schengen area. |