Aon Client Advisory on Ebola Virus

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Ebola Infected Countries

The Worst Ebola Outbreak Ever

- Projected new cases per week, according to the WHO: 10,000
- People infected with Ebola in the 2014 outbreak: 8,997
- Mortality rate stated by WHO: 70%
- Ebola deaths in West Africa this year: 4,400+
- Number of countries that diagnosed Ebola cases in 2014: 6
- For every four known Ebola cases, the number of cases that go unreported: 6
- People getting Ebola from one infected person: 2

Countries most affected by Ebola: West Africa’s Guinea, Liberia, Sierra Leone
What is the Current Response to the Ebola Crisis?

The global response encompassing both governments and NGOs includes:

- The US government has already committed USD $350m to affected nations in West Africa. In the weeks ahead they will commit 3,200 troops with a focus on building hospitals and Ebola treatment units.

- China has committed supplies valued at USD $4.9m and has also sent three expert teams comprised of epidemiologists and specialists in disinfection and protection. Japan has disbursed USD $2m through the WHO and a range of NGOs whilst the United Kingdom announced at the beginning of October that its financial commitment to tackling the crisis in Sierra Leone has increased to GBP 120 million. This includes funding for 1,000 treatment beds and support for healthcare workers and agencies.

- Other sovereign states contributing to the global effort include Australia, Brazil, Canada, Cuba, France, Germany and several African countries.

- Of the NGOs, the humanitarian aid organisation, Doctors Without Borders, is leading the charge with five treatment centers staffed by 210 international workers and 1,650 staff from affected regions.

- The UN Security Council has created the first ever UN mission for a public health emergency, the United Nations Mission for Ebola Emergency Response.

- The World Bank President, Dr Jim Yong Kim has taken a strong stance on dealing with the Ebola Crisis and has committed USD $400m, with the first USD $105m taking just nine days to reach governments of affected countries, a pace unheard of at the Bank.

The WHO has stated that a minimum of USD S1bn is needed to combat the Crisis
Is the Epidemic Now Under Control?

• Health authorities, notably the WHO, have warned that unless there is a significant escalation in the global response that “a lot more people will die” and there will be a huge need to deal with the spiraling number of cases.

• Over the past four weeks, there have been about 1,000 new cases per week. Based upon its current trajectory, the WHO has warned that by December there could be up to 10,000 new cases a week. It is also notable that the first deaths from Ebola have now occurred in Europe and the United States.

• The WHO has described the Crisis as “the most severe acute health emergency seen in modern time and threatens the very survival of societies …could lead to failed states”.

As the Crisis Intensifies, is the Disease Mutating

Health authorities have stated that infection occurs through contact with a symptomatic person’s bodily fluids such as blood, sweat, vomit, feces, urine, saliva or semen. These fluids must have an entry point like a cut or scrape or someone touching the nose, mouth or eyes with contaminated hands or being splashed. In West Africa, it has also been contracted from chimps and fruit bats. It is also known that healthcare workers have contracted the disease from contact with contaminated environments, including Personal Protective Equipment (PPE). The high risk of infection means health workers need extensive training on using PPE and removing contaminated garments without infecting themselves.

The virulent nature of this disease is such that at the peak of illness, an Ebola patient can have 10 billion viral particles in one-fifth of a teaspoon of blood. That compares with 50,000–100,000 particles for an untreated H.I.V. patient and five million to 20 million for someone with untreated hepatitis C.

Both the WHO and CDC have taken the current position that Ebola does not show signs of mutating into an airborne virus.
What is the Risk of Contracting Ebola on a Flight?

- Top Ebola experts have expressed the opinion that they would not expect to be infected even if sitting next to another passenger with Ebola – unless they vomited or bled on them. Ebola can only be spread to others after symptoms begin, which is from 2 to 21 days after exposure. However, given the fact that the virus has been contracted from contact with contaminated environments, travellers should exercise caution, particularly when travelling to affected countries in West Africa.

With Ebola Now Reaching Europe and the US, are Authorities Prepared?

- Whilst health officials on both sides of the Atlantic have offered repeated assurances that they are prepared to safely treat Ebola, there have been concerns expressed about the fact that in both Spain and the US healthcare workers have become infected from treating initial Ebola cases.

- After the first infection of a healthcare worker in Dallas, the CDC Director, Dr Tom Frieden, suggested that it might be necessary for Ebola patients in the US to be treated at one of four specialty bio-contaminant units rather than major hospitals. Meanwhile in Spain, workers at Madrid’s Carlos III Hospital, said they were given insufficient training and supervision to deal with treating Ebola patients.

- In the US, passengers from Liberia, Sierra Leone and Guinea are being screened at New York (JFK), Chicago, Washington (Dulles), Newark and Atlanta airports.
What are the Implications for Organisations?

• It is clear that the Ebola Crisis is a significant risk not only for the countries directly affected but the global community. In appraising the response to the Ebola Crisis in August, Dr Frieden remarked that it was “like we were using a peashooter against a rampaging elephant”. Whilst there have been significant resources committed since, it is notable that both the number of infections and mortality rates have swollen.

• One of the lessons that should be heeded from the experience of communities recently impacted by Ebola is that the time to prepare for its arrival is now. At a minimum, as the crisis unfolds over the coming months, organisations should prepare for disruptions to their supply chain. How would your business adapt if key suppliers in a particular country or region shut down?

• Any person who has come into contact with an individual who has contracted the virus will be placed into quarantine for a period of up to three weeks until their status can be established. If this happened to key employees in your business, how would you cope? What provisions have you established for remote working?

• How prepared is your organisation for the contingency of an infected person, either an employee or visitor, being on your premises? Have you contracted with a specialty firm for the cleansing of your work environment?

• Have you stocked up on Personal Protective Equipment (PPE)? Are staff aware of their responsibilities if they feel unwell? Do you have HR policies pertaining to social distancing for staff? What if an infected employee dies? Are your frequent travellers briefed on the spread of the virus and tracked by your company?

• These are a few of the considerations to keep in mind for the imminent threat Ebola poses today globally.

• One of the challenges with Ebola is that there is an incubation period of several days to three weeks. It is not until a person becomes symptomatic that they are at risk of spreading the illness. This means that it is eminently possible for infected passengers to arrive at airports appearing asymptomatic, but subsequently begin to show symptoms and pose an infection threat to their environment after they’ve left the airport. This is why, for instance, the US has announced that all travelers entering the US from Ebola-affected areas will be actively monitored for 21 days.

• Business leaders bear responsibility for both the financial success of their organisation and the health and well-being of their employees. With the threat posed by Ebola growing by the day, it is critical that organisations review their Business Continuity Plans. The BCP should be structured around different assumptions concerning the severity and timeline of Ebola. Are all colleagues aware of their roles and responsibilities during a time of crisis?

• Based on the seriousness of the threat, and the possible high impact to your organisation, we recommend a review of your Business Continuity and Pandemic Response Plan and coverage afforded under your insurance policies.

• Aon is able to help in an all inclusive review of your Business Continuity and Pandemic Response Plans, and can conduct a gap analysis relevant to the Ebola scenario including aspects of the virus that may impact your business and the environment you operate in.
Contacts

Terry Stephens  
Regional Director  
Aon Hewitt  
Risk Management | Health & Benefits  
terry.stephens@aon.com

Jane Drummond  
Regional Head of Sales & Marketing, Asia  
Aon Risk Solutions  
jane.drummond@aon.com

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