

**CATHOLIC SCHOOL DEPARTMENT
DIOCESE OF SACRAMENTO**

**PREPARING FOR THE FLU
2009 - 2010**

Preface

This document provides guidance to help decrease the spread of flu among students and school staff during the 2009-2010 school years. It recommends action from the Centers for Disease Control and Prevention (CDC) to take this year and suggests strategies to use if the CDC finds that the flu starts causing more severe disease. The information provided in this packet comes from the *CDC Guidance for State and Public Health Officials and School Administrators for School (K-12) Responses to Influenza during the 2009 - 2010 School year*. The information presented will cover all aspects. Please provide your staff and parents with this information. Spanish speaking families are asked to go to www.flu.gov site. They can click for Spanish. The Catholic School Department will have this packet on its home web page.

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Part I. Action Steps for Schools for Prevention, Response and Care

The following should be followed all the time and not only during a flu pandemic.

- Educate and encourage students and staff to cover their mouth and nose with a tissue when they cough or sneeze. Also, providing them with easy access to tissues and running water and soap or alcohol-based hand cleaners. Remind them to cover coughs or sneezes using their elbow instead of their hand when a tissue is not available.
- Remind teachers, staff, and students to practice good hand hygiene and provide the time and supplies for them to wash their hands as often as necessary.
- Send sick students, teachers, and staff home and advise them and their families that sick people should stay at home until at least 24 hours after they no longer have a fever or signs of a fever (without the use of fever-reducing medicine).
- Clean surfaces and items that are more likely to have frequent hand contact such as desks, door knobs, keyboards, pens, with cleaning agents that are usually used in these areas.
- Move students, teachers, and staff to a separate room if they become sick at school until they can be sent home. Limit the number of staff who take care of the sick child and provide surgical masks for the sick persons to wear if they can tolerate it.
- Have Personal Protective Equipment such as masks available and ensure the equipment is worn by school nurses and other staff caring for sick students at school.
- Encourage early medical evaluation for sick students and staff at higher risk of complications from flu. People at high risk of flu complications who get sick will benefit from early treatment with antiviral medicines.
- Stay in regular communication with local public health officials and the CSD.

Part II. Recommended Steps to Prepare for the Flu during the 2009 - 2010 School Year

- Review and revise existing pandemic plans and focus on protecting high-risk students, teachers, and staff.
- Update student, teacher, and staff contact information as well as emergency contact lists.
- Identify and establish points of contact with local public health agencies.
- Develop a plan to cover key staff positions, such as the secretary, principal, janitorial services, when staff stays home because they are sick
- Develop communication tools (e.g., letters to parents, Web site postings) that can be used to send sick students home, dismiss students, and to remind parents and staff how long sick students and staff should remain at home. Review school policies and awards criteria to encourage social distancing and avoiding any incentives for students and staff to go to school when sick (e.g., cancel perfect attendance awards).

- Develop a school dismissal plan and options for how school work can be continued at home.
- Help families and parish community understand the important roles they play in reducing the spread of flu in schools.

Part III. Recommended School Responses for the 2009-2010 School Year
(Under conditions with similar severity as in the spring of 2009)

- Students and employees should stay home for at least 24 hours after they no longer have a fever, or signs of a fever, without the use of fever-reducing medicines. They should stay home even if they are using antiviral drugs.
- Students and staff who appear to have flu-like illness should be sent to a room separate from others until they can be sent home. CDC recommends that they wear a surgical mask, if possible, and that those who care for ill students and staff wear protective gear such as a mask.
- The new recommendations emphasize the importance of the basic foundations of influenza prevention: stay home when sick, wash hands frequently with soap and water when possible, and cover noses and mouths with a tissue when coughing or sneezing.
- School staff should routinely clean areas that students and staff touch often with the cleaners you typically use. Special cleaning with bleach and other non-detergent-based cleaners is not necessary.
- Students and staff who are high risk for influenza complications who become ill with influenza-like illness should speak with their health care provider as soon as possible. Early treatment with antiviral medications is very important for people at high risk because it can prevent hospitalizations and deaths. Those that are high risk include those who are pregnant, have asthma or diabetes, have compromised immune systems, or have neuromuscular diseases.

Part IV. Recommended School Responses for the 2009 - 2010 School Year
(Under conditions of increased severity compared with spring of 2009)

CDC may recommend additional measures to help protect students and staff if global and national assessments indicate that influenza is causing more severe disease. In addition, local health officials could elect to implement some of these additional measures. Except for school dismissal, these strategies have not been scientifically tested. But CDC wants communities to have tools to use that may be the right measures for their community and circumstances.

- Schools should check students and staff for fever and other symptoms of flu when they get to school in the morning, separate those who are ill, and send them home as soon as possible. Throughout the day, staff should be vigilant in identifying students and other staff who appear ill.
- Those at high-risk of flu complications should talk to their doctor about staying home from school when a lot of flu is circulating in the school or community. Schools should plan now for ways to continue educating students who stay home through instructional phone calls, homework packets, internet lessons, and other approaches.

- Students who have an ill household member should stay home for five days from the day the first household member got sick. This is the time period they are most likely to get sick themselves.

-CDC encourages schools to try innovative ways of separating students. These can be as simple as moving desks farther apart or canceling classes that bring together children from different classrooms.

- Rotate teachers between classrooms while keeping the same group of students in a class (middle and high school).

- Hold classes outdoors.

-If influenza severity increases, people with flu-like illness should stay home at least 7 days, even if they have no more symptoms. If people are still sick, they should stay home until 24 hours after they have no symptoms.

-School and health officials should work closely to balance the risks of flu in their community with the disruption dismissals will cause in both education and the school community. The length of time schools should be dismissed will vary depending on the type of dismissal as well as the severity and period. Schools that dismiss students should do so for five to seven calendar days and should reassess whether or not to resume classes after that period. Schools that dismiss students should remain open to teachers and staff so they can continue to provide instruction through other means. Reactive dismissals might be appropriate when schools are not able to maintain normal functioning for example, when a significant number and proportion of students have documented fever while at school despite recommendations to keep ill children home. Preemptive dismissals can be used proactively to decrease the spread of the flu. CDC may recommend preemptive school dismissals if the flu starts to cause severe disease in a significantly larger proportion of those affected.

Part V. Action Steps for Parents if School is dismissed or Children are Sick and must stay Home

- Be prepared to support home learning activities if the school makes them available. Your child's school may offer web-based lessons, instructional phone calls, and other types of distance learning. Have school materials, such as text books, workbooks, and homework packets available at home.

-Have activities for your children to do while at home. Pull together games, books, DVDs and other items to keep your family entertained.

-Find out if your employer will allow you to stay at home to care for sick household members or children dismissed from school. Ask if you can work from home. If this is not possible, find other ways to care for your children at home.

If school is dismissed, monitor the school's website, local news, and other sources for information about return to school.

Part VI. Tips for Taking Care of Children with the Flu

-Stay home if you or your child is sick until at least 24 hours after there is no longer a fever or signs of a fever (without the use of a fever-reducing medicine).

-Cover coughs and sneezes. Clean hands with soap or an alcohol based hand rub often and especially after coughing or sneezing.

-Keep sick household members in a separate room in the house as much as possible to limit contact with household members who are not sick. Consider designating a single person as the main caregiver for the sick person.

Monitor the health of the sick child and any other household members by checking for fever and other symptoms of the flu. A fever is a temperature taken with a thermometer that is equal to or greater than 100 degrees Fahrenheit (37.8 degrees Celsius). If you are not able to measure a temperature, the sick person might have a fever if he or she feels warm, has a flushed appearance, or is sweating or shivering.

Watch for emergency warning signs that need urgent medical attention. These warning signs include:

- fast breathing or trouble breathing
- Bluish or gray skin color
- Not drinking enough fluids
- Not urinating or no tears when crying
- Severe or persistent vomiting
- Not waking up or not interacting
- Being so irritable that the child does not want to be held
- Pain or pressure in the chest or abdomen
- Sudden dizziness
- Confusion
- Flu like symptoms improve but then return with fever and worse cough

-Check with your doctor about any special care needed for household members who may be at higher risk for complications from flu. This includes children under the age of 5 years, pregnant women, people of any age who have chronic medical conditions (such as asthma, diabetes, or heart disease), and people age 65 years and older.

-Have the sick household member wear a facemask when sharing common spaces with other household members to help prevent spreading the virus to others. This is especially important if other household members are at high risk for complications from flu.

-Ask your doctor about antiviral medicines or fever-reducing medicines for sick household members. Do not give aspirin to children or teenagers; it can cause a rare but serious illness called Reye's syndrome

-Make sure sick household members get plenty of rest and drink clear fluids (such as water, broth, sports drinks, electrolyte beverages for infants) to keep from being dehydrated.

If the health department says that flu conditions have become more severe:

-Extend the time sick children stay home for at least 7 days, even if they feel better sooner. People who are still sick after 7 days should continue to stay home until at least 24 hours after symptoms have gone away.

-If a household member is sick, keep any school - aged brothers or sisters home for 5 days from the time the household member became sick. Parents should monitor their health and the health of other school-age children for fever and other symptoms of the flu.

Part VII. CDC Novel H1N1 Vaccination Planning

As of August 10, 2009, CDC instituted the following planning procedures for the Novel H1N1 Vaccination:

- For planning purposes, it should be assumed that vaccine will be administered beginning in the fall.

-Shipping of the vaccine will begin mid-October, although there is a possibility that some vaccine will be available for shipping starting late September.

- Vaccine will be shipped to clinics, offices, health departments, and other project area-designated sites.

- As details of distribution are finalized, CDC will communicate with states about the anticipated time period between placing vaccine orders and receiving shipments.

- The 5 target groups that the CDC has prioritized are: vaccination for pregnant women, people who live with or care of children younger than 6 months of age, healthcare and emergency medical services personnel, persons between the ages of 6 months through 24 years, and people ages 25 through 64 years who are at higher risk for novel H1N1 because of chronic health disorders or compromised immune systems.

- CDC does not expect that there will be a shortage of novel H1N1 vaccine, but flu vaccine availability and demand can be unpredictable and there is some possibility that initially, the vaccine will be available in limited quantities.

-Once vaccine demand among younger age groups has been met, programs and providers should offer vaccination to people 65 or older.

Part VIII. Additional Resources

- Visit www.flu.gov

- Contact CDC 24 Hours/Every day

1-800-CDC-INFO (232-4636) both in English and Spanish/Talk to a Representative

- www.cdc.gov/h1n1flu/vaccination/acip.htm