

Goodhue County Schools H1N1 Response Plan for Student Health September, 2009

On August 27, 2009 school nurses from all school districts within Goodhue County met with Goodhue Co. Public Health Service (PHS) Disease Prevention and Control staff and developed a local plan to respond to the likelihood of H1N1 (Swine Flu) infections in students. Schools and Public Health officials in our county have a long history of working together closely and efficiently to respond to communicable diseases that impact schools and our communities. It is at the request of all of the school nurses in our county that this brief plan be drafted and shared with school superintendents.

Because the H1N1 situation is continually evolving, these plans are fluid and subject to change per the recommendations and guidelines of the Minnesota Department of Health (MDH) and the Centers for Disease Prevention and Control (CDC). Guidance for schools can be found at: <http://www.cdc.gov/h1n1flu/schools/> and www.health.state.mn.us. These plans are directed at student health and do not reflect administrative decisions regarding personnel, school closings, or other policy issues.

I. Reporting: Per the request of MDH, school health personnel will report to MDH, via their on-line system, when the number of student absences for Influenza-like Illness (ILI) reaches 5% of the student population.* (During typical flu seasons, schools report to MDH when illness absences double.) School nurses will notify PHS when this occurs or of any unusual occurrences.

*Since attendance lines currently do not ask for specific information about the reason for a student absence, it is suggested that attendance lines be adjusted to ask for additional information from parents regarding symptoms of illness. Here is a suggested script: "Due to the H1N1 pandemic, schools are monitoring illness absences. Please state the symptoms of your child's illness, specifically if it includes a fever over 100 with a cough or sore throat, or if your child has been diagnosed with H1N1 flu. Students with flu symptoms should stay home for 24 hours after fever subsides without anti-fever drugs."

II. Isolation and exclusion: Students who develop symptoms of influenza while at school will be immediately referred to the student health office. The student will be separated from others until a caregiver can pick them up. Students who are coughing may be asked to wear a regular surgical mask and to wash their hands. The school nurse or attending staff will maintain a distance of 6 feet from the student if possible. When it is necessary for closer proximity to provide care to an unmasked student, a regular surgical mask or N95 respirator should be worn by the staff. (See CDC and OSHA guidelines. Occupational use of a respirator requires a respiratory protection policy, medical evaluation, and fit-testing.) PHS can assist schools to meet these requirements if there are staff who need to use a respirator, such as staff at high risk of complications from the flu who cannot avoid close contact with ill students. Ideally, these staff should be reassigned from this responsibility.)

Students with influenza-like-illness (defined as a fever over 100 accompanied by a cough or sore throat) must stay home from school and activities until they have been fever free for 24 hours without the use of fever reducing medication.* It is not necessary for students with flu-like symptoms to see a physician (unless they have severe symptoms or have a medical condition that puts them at high risk of complications and may need medication) or to obtain a letter from the physician to confirm the illness. Students should not be encouraged to maintain perfect attendance records.

*Additional precautions are recommended for schools with groups of pregnant teens/teen parents and groups of medically fragile students. Students in these settings should stay home for 7 days after onset of symptoms or 24 hrs. after resolution of acute symptoms, whichever is longer.

III. Prevention:

These measures will be promoted in all school and at school activities:

- hand hygiene
- respiratory etiquette (cover your cough using sleeve or tissue)
- routine cleaning
- stay home/ go home when sick
- do not attend events/activities when sick

IV. Public Information Plan

- a) At the start of this school year, schools will distribute the CDC brochure:
H1N1: A Guide for Parents
- b) Each school superintendent will be the designated spokesperson for the district. The school nurse will receive Health Alerts, News Releases, and updates from PHS, and will assist school administration with public information strategies, unless another Public Information Officer (PIO) is designated. PHS will maintain an email distribution list of all PIOs involved in the H1N1 public health response and coordinate the dissemination of public information in an effort to provide accurate and consistent information to the public.
- c) When a child with influenza symptoms is sent home from school, the health staff will send with them the MDH fact sheet: Managing H1N1 Influenza which describes ways to prevent dehydration and when to call the doctor.
- d) If 3 or more students are absent from an elementary classroom due to influenza, the school will send the H1N1 fact sheet from the Infectious Diseases in Childcare Settings and Schools manual either home with students in that school or via a mailing. This one-page fact sheet describes the H1N1 incubation period, contagious period, symptoms, prevention, and when to call the doctor. Other template letters sent to school nurses by MDH can be sent home to parents of students at high risk of complications of influenza who may need preventative medication.

- e) The MDH fact sheet: Worried About H1N1 Influenza? will be used in newsletters and other school publications to provide general and brief information about H1N1 to parents, personnel, and the community. Other fact sheets, parent letters, tools, posters (such as Cover Your Cough) can be used at the discretion of each district. See CDC's [Preparing for Flu: A Communication Toolkit for Schools \(K-12\)](#) Aug 7

IV. H1N1 Vaccination Plan

Because schools are a central and familiar facility in their communities, and because the school nurses and superintendents in Goodhue County have expressed an interest in participating in vaccinating school-age children and their communities, Goodhue Co. Public Health Service will set up mass vaccination clinics in each school district at designated school buildings. All school-age children are recommended to receive the H1N1 vaccine when it becomes available in mid to late October, 2009. H1N1 vaccination is not a requirement and is strictly voluntary.

Dates and locations will be determined based on availability of vaccine and between school and public health officials, so as to minimize disruption to school activities. Since the availability of the vaccine is uncertain, these dates may be subject to change. If 2 doses of H1N1 vaccine are recommended by CDC, these school clinics will be repeated one month later.

Students, whose parents are interested in having their child vaccinated at school, will be vaccinated during the school day with the written consent of a parent. Schools will be responsible to get the consent forms to the parents. Parents will be responsible to get the form returned to the school by the vaccination date, or will be referred to other vaccination locations. IF a fee will be charged to administer the vaccine (CDC is determining if the vaccine will be administered at no charge at public clinics), PHS will provide an envelope addressed to Goodhue Co. Public Health Service to be sent home to parents with the consent forms. This could be mailed directly to PHS or returned to school with the consent form. Sending payment will be at the discretion of the parent. No child will be turned away for inability to pay. Vaccination will be available to all students from any county as there are no border issues for providing vaccine.

At the close of the school day on the date of the school immunization clinic, people in the community, who meet the targeted priority groups according to CDC, will be invited to the school (location to be determined by the school) to get vaccinated. PHS will coordinate the logistics and planning with schools, law enforcement and will staff the clinic. Parents of students who were uncooperative at the school clinic, or who wish to accompany their child while being vaccinated can also use this opportunity. Parents and students who cannot, or chose not to attend the school clinic can receive information about alternative locations for vaccination such as doctors offices, other public clinics, or community retail locations.