

How to Use This Resource Manual

I. Introduction

This manual was developed as a byproduct of a partnership between the Washington State Office of Superintendent of Public Instruction (OSPI) and the Washington State Department of Health (DOH), and funded through a grant from the U. S. Centers for Disease Control (CDC). The purpose of this project was to research existing pan flu programs, including those developed locally, and provide the K–12 public school system with a single resource manual on how the school system should deal with this complex issue.

Project staff included Craig Apperson, Director of the OSPI School Safety Center; David Sours, recently retired Student Support Services Administrator from the Central Kitsap School District; Darcy Thomas, RN, who has a background as both a public health nurse and school nurse; and Malaya Fletcher, whose background includes assisting in the development of the Seattle Public Schools Pan Flu Plan, which has received national recognition.

II. How to Use this Resource Manual

This resource manual has been designed to assist school administrators, public health officials, and other stakeholders review the materials associated with the influenza pandemic. These resources have been developed by a wide variety of government agencies and groups that specifically focus on the school system's responsibilities. The sections are organized to provide users with updated guidance and tools to develop plans, policies, procedures, and programs that fit local needs and resources.

As this is the first effort of this type, there may be elements of the planning process that are not included, and school officials might need to discuss their concerns with local public health and related authorities. School officials are recommended to review updated materials on the OSPI Pan Flu Preparedness web site at: <http://www.k12.wa.us/HealthServices/PandemicFluInformation.aspx>.

As illustrated by the cartoon on the following page, three documents frame this resource manual:

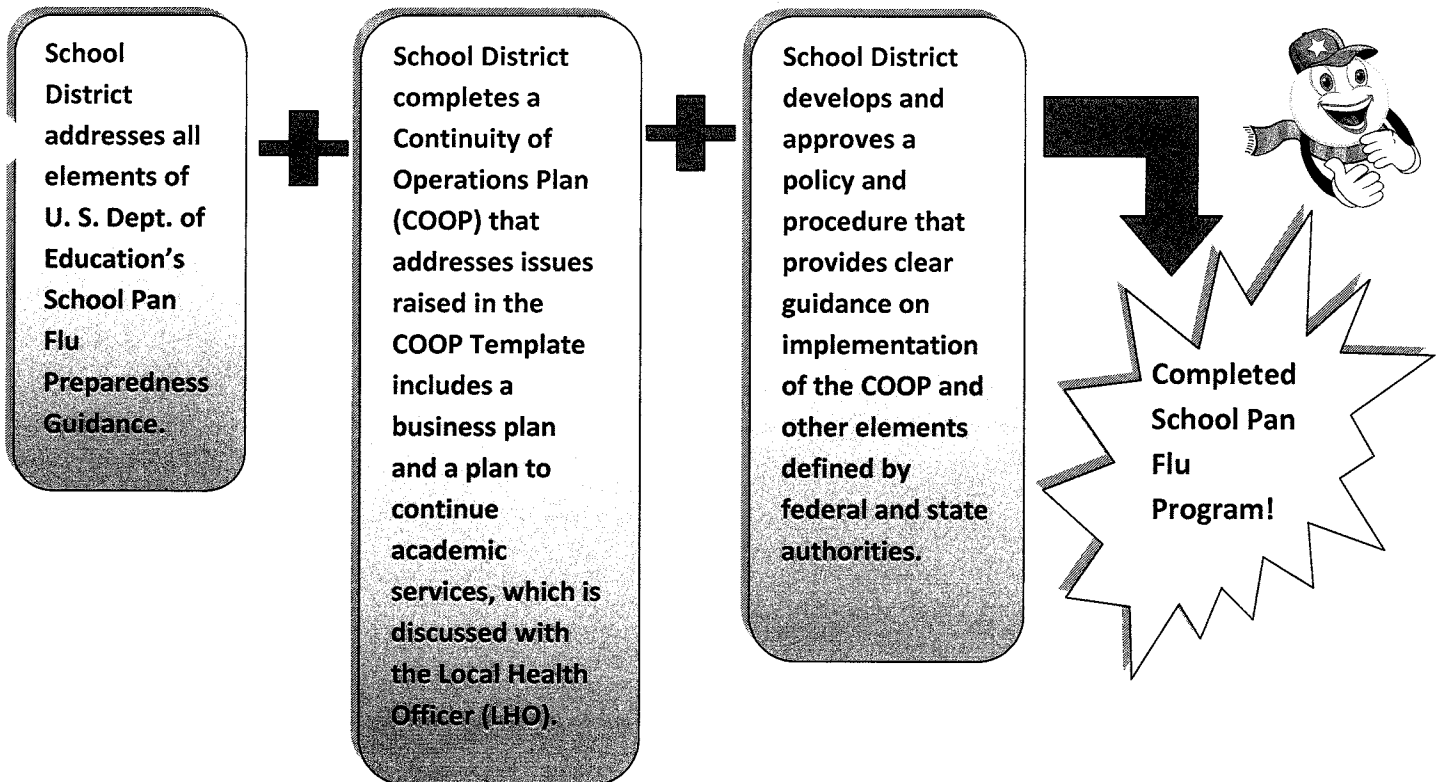
1. U.S. Department of Education's Pan Flu Guidance,
2. Continuity of Operations Plan (COOP) Template, and
3. Infectious Diseases Model Policy and Procedure, coupled with a proposed addendum pertaining to pandemic influenza.

The Department of Education's Pan Flu Guidance, located in the Model Policy and Procedure section, focuses on the implications of a prolonged school closure during a severe pandemic. It discusses federal guidelines and continuing education. Continuity of Operations planning will be necessary to consider, and the template was developed to assist schools in using a common language and planning format throughout the state. The proposed addendum to the Infectious Diseases Policy and Procedure outlines procedures specific to an influenza pandemic. When combined with thorough discussions and input from various experts, school safety committees, and stakeholders, these three documents will help lead to a comprehensive plan for dealing with pan flu. The rest of the binder is comprised of resources pertaining to the four phases of coordination.



PROPOSED MODEL FOR DEVELOPMENT OF A SCHOOL PAN FLU PREPAREDNESS PROGRAM

Overview: A “School Pan Flu Program” is the result of a school district’s multi-disciplinary effort to address federal and state guidelines for schools dealing with pan flu, develop a Continuity of Operations Plan (COOP), and articulate the authorization and procedures of those plans through a board-approved policy and procedure.



A School Pan Flu Program is a component of a “Comprehensive Safe School Plan” as defined in RCW 28A.320.125

Background Information and Planning Assumptions

A pandemic is a global disease outbreak. The World Health Organization (WHO) says a pandemic can occur when three conditions are met:

- A disease new to the population emerges;
- The agent infects humans, causing serious illness; and
- The agent spreads easily and sustainably among humans.

Influenza is primarily spread through large droplets (droplet transmission) that directly contact the nose, mouth, or eyes. These droplets are produced when infected people cough, sneeze, or talk, sending the droplets and small sprays in to the nearby air and into contact with other people. Large droplets can only travel a limited range; therefore, people should limit close contact (within six feet) with others when possible. To a lesser degree, influenza is spread by touching objects contaminated with the virus and then transferring the infected material from the hands to the nose, mouth, or eyes. Due to the nature of transmission, health officials recommend social distancing to minimize the spread of disease.

Influenza causes upper respiratory tract infections with fever, muscle aches, headache, fatigue, dry cough and runny nose. Complications of influenza may be life-threatening and include viral and bacterial pneumonia. The virus is spread through close contact and by respiratory droplets, such as those produced by a cough or sneeze. The Centers for Disease Control and Prevention defines an influenza-like illness as having the following symptoms:

Fever of 101.5° degrees Fahrenheit or higher

AND ONE OF THE FOLLOWING

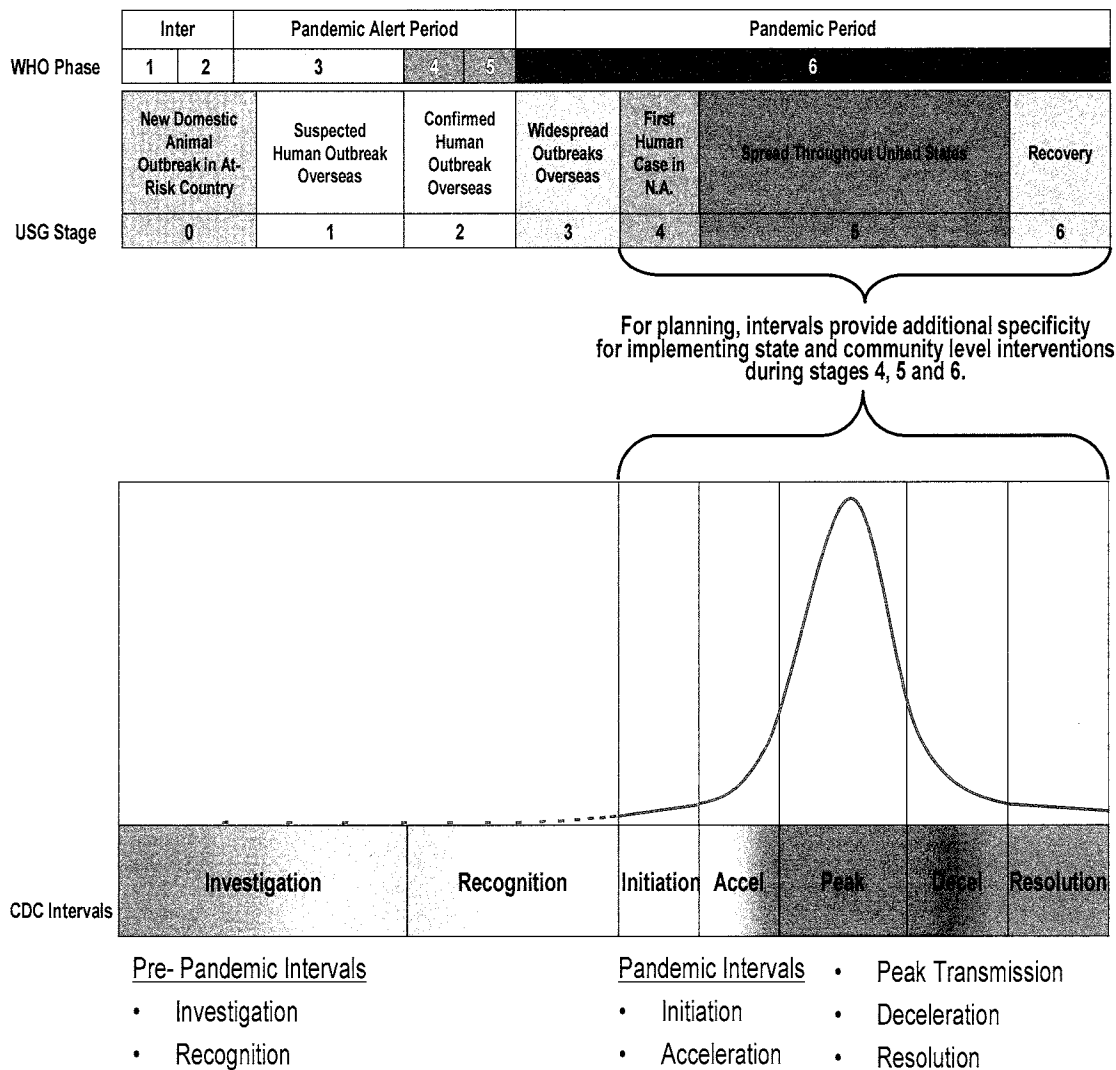
- Cough
- Sore throat
- Headache
- Muscle ache

Phases, Stages, and Severity of a Flu Pandemic

Both the WHO and the United States Government have established “Phases” (WHO) or “Stages” (USG) of a pandemic (Figure 1). As of this writing, the United States is currently in “Phase 3” (WHO) or Stage 2 (USG). There have been very few recorded instances of human-to-human transmission of the current flu strain. In each of these instances, very close interpersonal proximity was required for the disease to spread. The disease is still NOT considered to be easily spread from human to human (Phases 4 & 5, Stage 2). Most of the planning and response procedures outlined in this manual correspond to Phases 4 and 5. The CDC recommends that stages 2 and 3 have short-term (up to 4 weeks) dismissal of students and closure of childcare facilities. Washington State Department of Health will not recommend closures until there are

cases in Washington state or the Pacific Northwest (Stage 5). Stages 4 and 5, prolonged (up to 12 weeks) of dismissal of students and closure of childcare facilities will likely be recommended, based on the Pandemic Severity Level. Actual closures will be directed by the Local Health organizations. Also, the decision to have a school closure or class dismissal would be determined by the severity level and the percentage of those who are ill and are expected to die. The more moderate the disease, the shorter the closure.

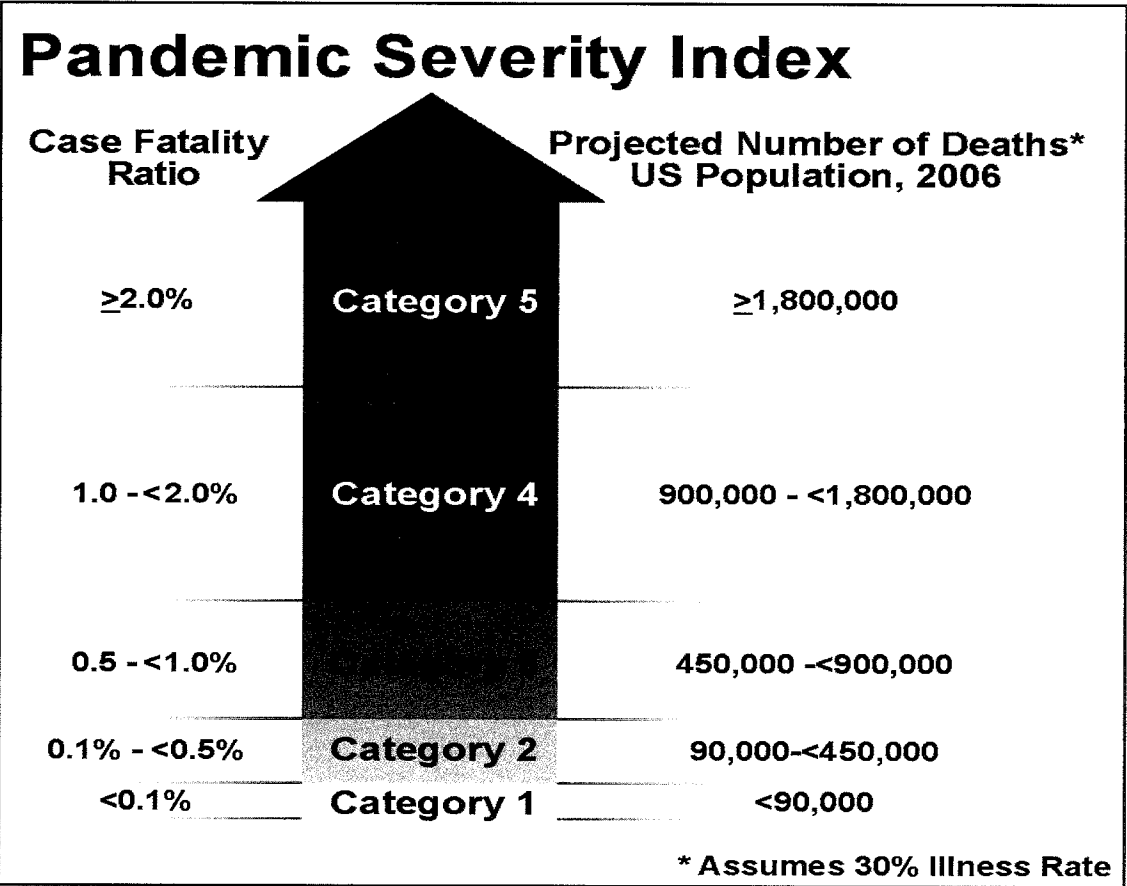
Figure 1: Periods, Phases, Stages, and Intervals

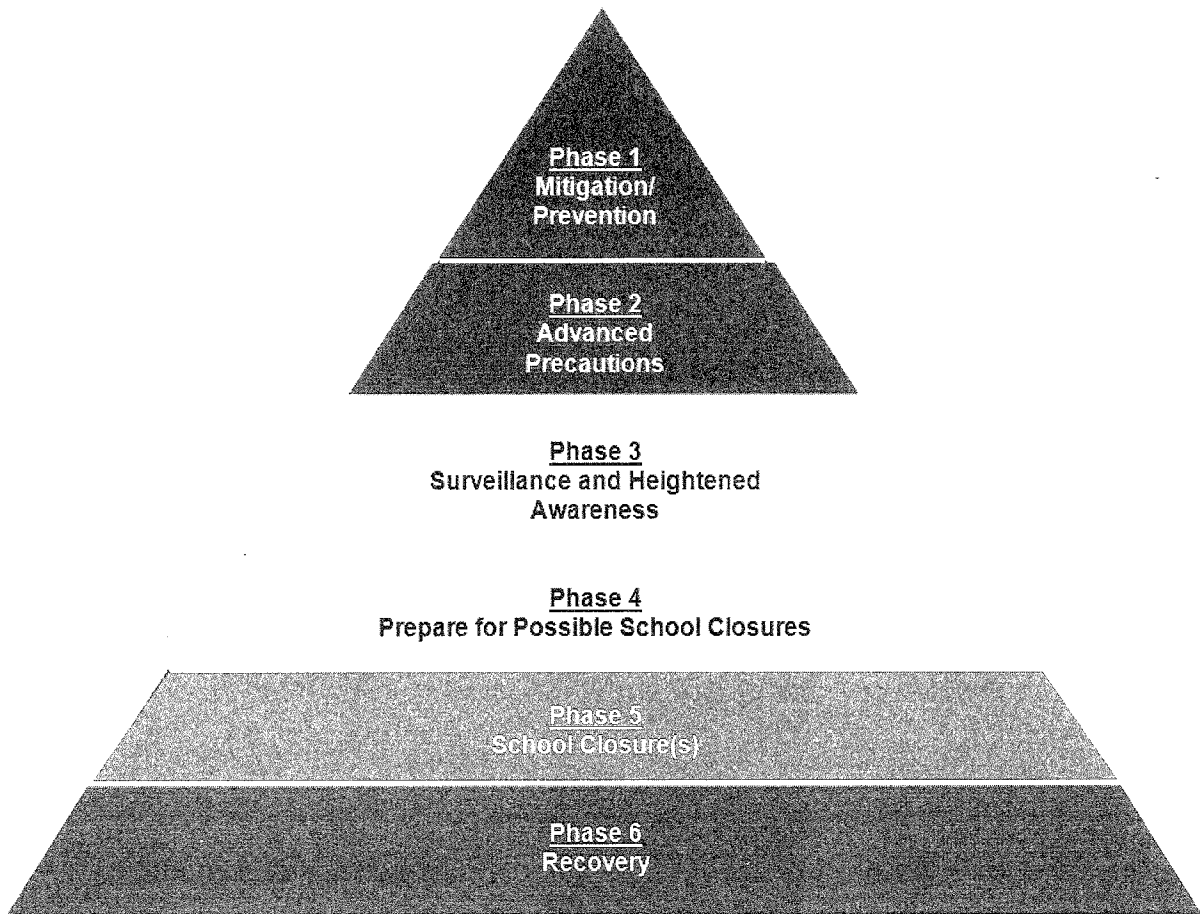


The *Interim Pre-Pandemic Planning Guidance: Community Strategy for Pandemic Influenza Mitigation in the United States* (Centers for Disease Control in February 2007) features the Pandemic Severity Index (Figure 2) which uses case fatality ratios as critical drivers for categorizing the severity of a pandemic. Interventions will be recommended based on the

severity of pandemic, including: isolation and treatment of ill persons with antiviral drugs; voluntary home quarantine of members of households containing confirmed or probable cases; dismissal of students from school; closure of childcare facilities, and use of social distancing measures to reduce contacts between adults in the community and workplace. The state pandemic plans will take into account implementation of these mitigation strategies and their possible secondary effects. As a home rule state, it will be the Local Health Organization that will make the actual closure or dismissal recommendations.

Figure 2. Pandemic Severity Index





Phases of Response to Pandemic Influenza Related Incidents

Some Differences between Seasonal Flu and Pandemic Flu

Seasonal Flu	Pandemic Flu
Caused by influenza viruses that are similar to those already affecting people.	Caused by a new influenza virus that people have not been exposed to before. Likely to be more severe, affect more people, and cause more deaths than seasonal influenza because people will not have immunity to the new virus.
Symptoms include fever, cough, runny nose,	Symptoms similar to the common flu may be

and muscle pain. Deaths can be caused by complications such as pneumonia.	more severe and complications more serious.
Healthy adults usually not at risk for serious complications (the very young, the elderly, and those with certain underlying health conditions at increased risk for serious complications).	Healthy adults may be at increased risk for serious complications.
Generally causes modest impact on society (e.g., some school closings, encouragement of people who are sick to stay home).	A severe pandemic could change the patterns of daily life for some time. People may choose to stay at home to keep away from others who are sick. Also, people may need to stay at home to care for ill family and loved ones. Travel and public gatherings could be limited. Basic services and access to supplies could be disrupted.

From Implementation Plan for the National Strategy for Pandemic Influenza

Assumptions:

- A new (novel) influenza virus can cause serious illness because there is little or no immunity within the population.
- There will be a significant reduction in the workforce, up to 50%. Healthcare professionals, employees and families will all be affected.
- Healthcare systems will be overloaded.
- Influenza pandemics can occur at any time and may not follow the typical flu season.
- The pandemic may occur in two to three waves over a period of three to six months.
 - It is anticipated that the illnesses will most likely come in two or three waves, implying that not everyone will be sick at one time. Twenty percent or more of the population might be ill during one of these waves.
- Local organizations and governments will not be able to rely on state or federal assistance to support local response efforts.
- Medical supplies will be inadequate. However, there will also be a lack of other supplies, such as gas, food, etc.

- A vaccine will not be available at the onset of the pandemic. It may take several months before an effective vaccine is available and there will likely not be enough for everyone. Thus, there will be a great need for Non-Pharmaceutical Interventions. (NPIs), such as social distancing and respiratory etiquette.
- There will be significant disruption and impact on the community's critical infrastructure, essential services, healthcare, education and social services.
 - Travel bans, closing of schools and businesses, event cancellations will occur.
 - Caring for sick family members and a fear of exposure could lead to a high rate of absenteeism, which will also disrupt services. (pandemicflu.gov)
- The number of ill persons requiring outpatient care and hospitalization will overwhelm the local healthcare system.
- Mortality rates for influenza victims will be high.
- Alternative care sites will need to be identified to triage and care for ill persons. School buildings may be used for this purpose.
- Pandemic influenza response will likely consume all public health resources, and schools will need to be able to function independently.
- Education will continue to the extent possible, especially if the district can implement an Emergency Alternative Operations Plan, and staff will then need to be paid as usual.

(http://www.esd101.net/curriculum/PDF/Supt_Guidelines.pdf)