

Pandemic flu preparedness for school administrators

RISK CONTROL eGUIDE



eResources

[WHO Pandemic Preparedness](#)

[WHO Pandemic Phase Descriptions and Main Actions by Phase](#)

Planning

[Child Care and Preschool Pandemic Flu Planning Checklist](#)

[Colleges and Universities Pandemic Flu Planning Checklist](#)

[Pandemic: Emergency Planning for Schools](#)

[Pandemic Flu: A Planning Guide for Educators](#)

(Also includes grant information)

[School District \(K-12\) Pandemic Flu Planning Checklist](#)

Background

Some things in life are cyclical. Such is the case with pandemic influenza. Disease experts have calculated that, on the average, once every 30 to 50 years (since the 16th century), pandemic influenza affects people globally, resulting in numerous deaths and interruptions to daily life, as well as business and industry operations in both the public and private sectors. The 20th century experienced three pandemics: 1918 – the Spanish flu; 1957 – the Asian flu; and 1968 – the Hong Kong flu. The most serious was in 1918, resulting in the deaths of more than 50 million people worldwide. Experts believe we are due for another pandemic and have been monitoring the status of new strains of influenza viruses that may have the pandemic potential of new strains of influenza viruses.

According to the U.S. Chamber of Commerce, seasonal (non-pandemic) flu kills approximately 36,000-40,000 Americans annually and hospitalizes more than 200,000. The cost to the U.S. economy is more than \$10 billion in lost productivity and direct medical expenses. These figures are minimal compared to what health experts and economists are now warning could happen in the event of a pandemic. Experts say that a pandemic flu could kill more than half a million people in the U.S., hospitalize 2 million more and cost our economy an estimated \$70-160 billion.

Two new strains of the influenza virus are currently being monitored by health officials, including health officials at the World Health Organization (WHO) and Centers for Disease Control (CDC). One is “avian (bird) flu.” Different strains of avian flu have been discovered, including H5N1 and H7N9. While birds can transmit the virus to humans, there has been no human-to-human transmission to date. If the virus mutates, transmission between people could lead to a pandemic. The second strain of influenza virus is “swine flu” or “Novel Influenza A. Common strains of swine flu include H1N1, H3N2, and H1N2. This virus is considered highly contagious and is capable of transmission between humans. Human infections from this virus have been on the rise since April 2009, with reported cases in many countries, including the United States.

In the event of a pandemic influenza, schools in the public and private sectors, kindergarten through institutions of higher education, could be significantly impacted. School employees, students and their families and entire communities could be at risk.

Strategy

Educational institutions, school districts and local and state agencies, including local health officers and emergency responders, play an integral role in protecting the health and safety of school staff, students and families, as well as communities. School closings may occur as a way to reduce the spread of the virus. In some cases, schools could become designated as alternative health facilities for isolating and managing cases.

The pandemic plan. Every educational institution and school district should have a plan in place addressing potential pandemics. The pandemic plan should be coordinated with local health officials and other local and state emergency and health agencies.

Incident Command System (ICS). The plan should be integrated into the institution’s/district’s disaster/crisis and business continuity plans as well as the local/state health and education departments’ ICS. The ICS model became critically apparent during 9/11 and was underscored throughout the educational community after the shootings at Virginia Tech.

Stakeholder coordination. Include stakeholders on the plan committee. Stakeholders can include local/state emergency response agencies, local health officials, school health and mental health professionals, teachers, parent representatives, and food services director. Include community leaders representing different languages/cultures to help with communication activities.

School policies and procedures. Work with local/state health departments to implement effective infection control policies and provide psychosocial support services for staff, students

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Prevention education

[Be A Germ Stopper](#) (posters and handouts)
[Swine Flu Information for Parents](#)
[Taking Care of Yourself and Flu](#)
[Understanding Avian Flu Lesson Plan](#)

Communications

[Getting a Grasp on Pandemic Influenza – What It Means](#)

Continuity of learning

[Legal Preparedness for School Closures in Response to Pandemic Flu and Other Emergencies](#)

Additional resources

[CDC Free Resources](#)
[Flu Prevention Resources, California Dept of Education](#)
[Flu Season and Schools](#)
[OSHA Guide on Preparing for Pandemic Influenza](#)
[OSHA Safety and Health Topics: Pandemic Influenza](#)
[Pandemic Flu Web Site for Schools](#)
[U.S. Department of Education Basic Components of Pandemic Planning](#)

Travelers risk control resources

Use your customer ID on travelers.com/riskcontrol to access the following documents, using keyword search and title names:

[Employer Guide for Preparing for Pandemic Flu](#)
[Avoiding Influenza with Good Personal Health Habits](#) [Can be used as a poster/handout]

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and families during and after a pandemic. Establish policies and procedures for student and staff pandemic sick leave, transportation and return to school.

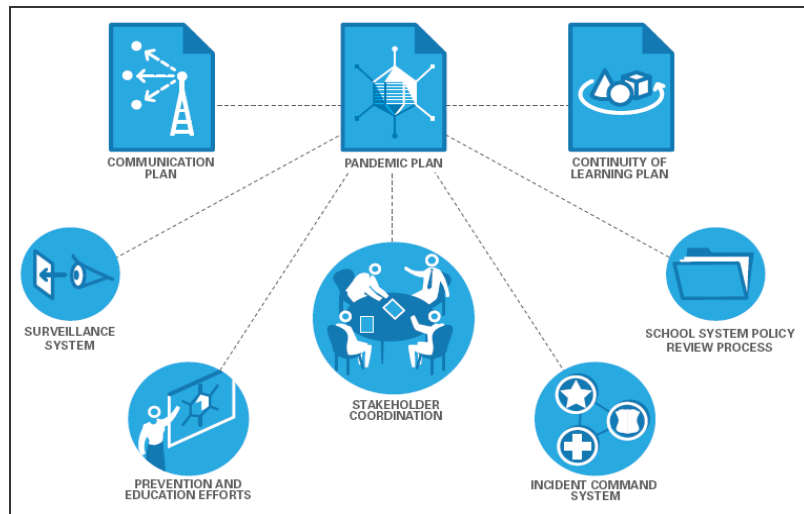
Surveillance system. Work with local/state health officials to develop a surveillance system to alert the health department to student absenteeisms. Reporting outbreaks to local health officials can help local health officials in disease surveillance efforts and plans to work with schools in flu response.

Prevention/education efforts. Include pandemic flu fact sheets and individual hygiene tips to help reduce the viral spread. Hang posters in school hallways, bathrooms, stadiums, auditoriums and other areas of congregation. Provide sufficient infection control supplies, such as soaps and waterless hand hygiene products (at least 60% alcohol). Disseminate information from public health sources on protection tips, illness symptoms and modes of transmission.

A communications plan. School officials should stay in contact with local health authorities. Regularly test and update communications plans. Plan communications for quelling rumors and misinformation. Ensure language, culture and reading level appropriateness. Develop a dissemination plan to students, staff, families and community, including lead spokespersons. Coordinate, as appropriate, with the ICS and other communications networks.

Continuity of learning. Particularly in extended school closings, plan for alternative learning contingencies, such as online learning, instruction via local closed circuit television, or mailings of lessons and assignments.

Special needs. The plan should address requirements of students with special needs; those who depend on lunch programs; and those who do not speak English as a first language.



Basic Components of Pandemic Planning

courtesy of United States Department of Education

Lack of preparedness could have a significant impact on staff, students, families and communities. Be prepared!



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