

Pandemic Influenza Community Mitigation Interim Planning Guide for Elementary and Secondary Schools

(from Community Strategy for Pandemic Influenza Mitigation, February 2007)
(<http://www.pandemicflu.gov/plan/community/commitigation.html#app6>)

Purpose

This Interim Planning Guide for Elementary and Secondary Schools is provided as a supplement to the *Interim Pre-Pandemic Planning Guidance: Community Strategy for Pandemic Influenza Mitigation in the United States—Early, Targeted, Layered Use of Nonpharmaceutical Interventions*. The guide is intended to assist in pre-pandemic planning. Individuals and families, employers, schools, and other organizations will be asked to take certain steps (described below) to help limit the spread of a pandemic, mitigate disease and death, lessen the impact on the economy, and maintain societal functioning. This guidance is based upon the best available current data and will be updated as new information becomes available. During the planning process, Federal, State, local, tribal, and territorial officials should review the laws, regulations, and policies that relate to these recommendations, and they should include stakeholders in the planning process and resolution of issues.

Schools will be essential partners in protecting the public's health and safety when an influenza pandemic occurs. This *Pandemic Influenza Community Mitigation Interim Planning Guide for Elementary and Secondary Schools* provides guidance to educational institutions, describing how they might prepare for and respond to an influenza pandemic. When an influenza pandemic starts, public health officials will determine the severity of the pandemic and recommend actions to protect the community's health. People who become severely ill may need to be cared for in a hospital. However, most people with influenza will be safely cared for at home.

Community mitigation recommendations will be based on the severity of the pandemic and may include the following:

- Asking ill people to voluntarily remain at home and not go to work or out in the community for about 7-10 days or until they are well and can no longer spread the infection to others (ill individuals will be treated with influenza antiviral medications, as appropriate, if these medications are effective and available).
- Asking members of households with a person who is ill to voluntarily remain at home for about 7 days (household members may be provided with antiviral medications, if these medications are effective and sufficient in quantity and feasible mechanisms for their distribution have been developed).
- Dismissing students from schools (including public and private schools as well as colleges and universities) and school-based activities and closure of childcare programs for up to 12 weeks, coupled with protecting children and teenagers

through social distancing in the community to include reductions of out-of-school social contacts and community mixing. Childcare programs discussed in this guidance include centers or facilities that provide care to any number of children in a nonresidential setting, large family childcare homes that provide care for seven or more children in the home of the provider and small family childcare homes that provide care to six or fewer children in the home of the provider.¹

- Recommending social distancing of adults in the community, which may include cancellation of large public gatherings; changing workplace environments and schedules to decrease social density and preserve a healthy workplace to the greatest extent possible without disrupting essential services; ensuring work-leave policies to align incentives and facilitate adherence with the measures outlined above.

Recommendations for dismissing students from classes will depend upon the severity of the pandemic. The current three-tiered planning approach includes 1) no dismissals in a Category 1 pandemic, 2) short-term (up to four weeks) dismissal of students during a Category 2 or Category 3 pandemic, and 3) prolonged (up to 12 weeks) dismissal of students from schools during a severe influenza pandemic (Category 4 or Category 5 pandemic).

In the most severe pandemic, the duration of these public health measures would likely be for 12 weeks, which would have educational implications for students. Planning now for a prolonged period of student dismissal may assist schools to be prepared as much as possible to provide opportunities for continued instruction and other assistance to students and staff. Federal, State, local, tribal, and territorial laws, regulations, and policies regarding student dismissal from schools, school closures, funding mechanisms, and educational requirements should be taken into account in pandemic planning. If students are dismissed from school but schools remain open, school- and education-related assets, including school buildings, school kitchens, school buses, and staff, may continue to remain operational and potentially be of value to the community in many other ways. In addition, faculty and staff may be able to continue to provide lessons and other services to students by television, radio, mail, Internet, telephone, or other media. Continued instruction is not only important for maintaining learning but also serves as a strategy to engage students in a constructive activity during the time that they are being asked to remain at home.

Planning now for a severe pandemic will ensure that schools are prepared to implement the community interventions that may be recommended. Be prepared to activate the school district's crisis management plan for pandemic influenza that links the district's incident command system with the local and/or State health department/emergency management system's incident command system(s).

The *Pandemic Flu Planning Checklist for K-12 School Districts* describes approaches to school planning for a pandemic and can be found at www.pandemicflu.gov/plan/school/index.html and

www.ed.gov/admins/lead/safety/emergencyplan/pandemic/planning-guide/index.html. Recommendations for implementation of pandemic mitigation strategies are available at www.pandemicflu.gov, and reliable, accurate, and timely information on the status and severity of a pandemic will also be posted on the Web site. Additional information is available from the Centers for Disease Control and Prevention (CDC) Hotline: 1-800-CDC-INFO (1-800-232-4636). This line is available in English and Spanish, 24 hours a day, 7 days a week. TTY: 1-888-232-6348. Questions can be e-mailed to cdcinfo@cdc.gov.

Recommendations for Planning

1. Plan for ill individuals to remain at home

- Develop a plan for faculty and staff absences due to personal illness. Plan for alternative staffing:
 - Identify critical job functions and plan for alternate coverage of those functions during a pandemic.
 - Review and analyze Federal and State employment laws that identify employer obligations and options for personnel.
- Establish and clearly communicate policies on sick leave and employee compensation.
- Encourage ill persons to stay home during a pandemic and establish return-to-work policies after illness.
- Establish policies for sick-leave absences unique to a pandemic (e.g., liberal/unscheduled leave).
- Develop policies on observation for illness and what to do when a student or staff member becomes ill at the workplace.
- Advise employees to look for information on taking care of ill people at home. Such information will be posted on www.pandemicflu.gov.

2. Plan for all household members of a person who is ill to voluntarily remain at home

- Develop a plan for faculty and staff absences related to family member illness. Plan for alternate staffing:
 - Identify critical job functions and plan now for coverage of those functions.
 - Establish policies for alternate or flexible worksite (e.g., videoconferencing and teleworking) and flexible work hours.
 - Review Federal and State employment laws that identify your employer obligations and options for employees.
- Establish and clearly communicate policies on family leave and employee compensation.
- Establish policies for sick-leave absences unique to a pandemic (e.g., liberal/unscheduled leave).
- Establish policies for employees who have to stay home because someone in their household is ill with pandemic influenza.

- Be familiar with Federal and State laws regarding leave of workers who need to care for an ill family member or voluntarily remain at home.
- Advise employees to look for information on taking care of ill people at home. Such information will be posted on www.pandemicflu.gov.

3. Plan for dismissal of students and childcare closure for employees

- Develop a plan for school operations during all levels of pandemic severity. Even if students are dismissed, schools may remain operational.
- Identify and plan for employees and staff who may have to stay home if schools and childcare programs dismiss students/children during a pandemic.
- Plan for alternate staffing based on your assessment.
 - Identify critical job functions and plan now for coverage of those functions in case of prolonged absenteeism during a pandemic.
 - Establish policies for employees to possibly work flexible work hours and schedules (e.g., staggered shifts) to accommodate their childcare needs.
- Encourage your employees who have children to make their own plans to care for children if officials recommend dismissal of students from schools and closure of childcare programs. Advise that employees plan for an extended period (up to 12 weeks) in case the pandemic is severe. Instruct employees not to bring their children to the workplace if childcare cannot be arranged.
- In a severe pandemic, parents would be advised to protect their children by reducing out-of-school social contacts and mixing with other children. Although limiting all outside contact may not be feasible, families may be able to develop support systems with co-workers, friends, families, or neighbors if they continue to need childcare. For example, they could prepare a plan in which two to three families work together to supervise and provide care for a small group of infants and young children while their parents are at work (studies suggest that childcare group size of less than six children may be associated with fewer respiratory infections).²
- Determine if schools must, may, or cannot compensate, continue benefits, and extend leave to employees who are not working during the pandemic. Inform employees of the decision.
- Work with your State legislatures if modifications to State laws are needed for flexibilities regarding, for example, requirements for the number of instruction days, amount of instruction time, and length of the school day.
- Work with State and local governments and faith-based and community-based organizations to provide any needed assistance to staff who cannot report to work for a prolonged period.

4. Plan for dismissal of students

- Develop a plan for continuity of instruction
- Inform teachers, students and parents how alternate learning opportunities will be provided.

- This may include assignments by radio, television, regular mail, e-mail, telephone, and teleconferencing or through the media
- Consider potential restructuring of the school calendar
- Provide school nurses, counselors, school psychologists, special-needs teachers, and social workers guidance on maintaining needed health, counseling, and social services for students with physical and mental/emotional healthcare needs.
- Identify and inform parents on how students who need free meals may qualify for other types of nutrition assistance in the community.
- Provide systematic emergency communications to school staff and families during the pandemic, using a telephone calling tree, an e-mail alert, call-in voice recording, or regular mail to communicate.

5. Plan for workplace and community social distancing measures

- Become familiar with social distancing actions that may be used during a pandemic to modify frequency and type of person-to-person contact (e.g., reducing hand-shaking, limiting face-to-face meetings, promoting teleworking, liberal/unscheduled leave policies, and staggered shifts).
- Plan to operate the workplace using social distancing and other measures to minimize close contact between employees.
- Review and implement guidance from the Occupational Safety and Health Administration (OSHA) on appropriate work practices and precautions to protect employees from occupational exposure to influenza virus during a pandemic. Risks of occupational exposure to influenza virus depends in part on whether jobs require close proximity to people who may be infectious with the pandemic influenza virus or whether employees are required to have either repeated or extended contact with the general public. OSHA will post and periodically update such guidance on www.pandemicflu.gov.
- Encourage good hygiene at the workplace. Provide students, faculty, and staff with information about the importance of hand hygiene (information can be found at www.cdc.gov/cleanhands/) as well as convenient access to soap and water and alcohol-based hand gel in your facility. Educate employees and students about covering their cough to prevent the spread of germs (see www.cdc.gov/flu/protect/covercough.htm).
- Promote social distancing of children and teens outside the school setting by advising they reduce their social interaction and contacts to the greatest extent possible. This may include cancelling after-school and extracurricular group activities.

6. Communicate with faculty, staff, students, and parents/families

- Make sure your school's pandemic plan is explained and understood by faculty, staff, and parents in advance of a pandemic, including expected roles/actions for employees and others during implementation.
- Provide information to school staff and parents/families on what they can do to prepare themselves and their families for the pandemic. Resources are available

at www.pandemicflu.gov/plan/individual/checklist.html and www.ready.gov/america/index.html.

- Be prepared to provide parents/families with information discussing student dismissal from school and the importance of keeping students from congregating with other students in out-of-school settings.
- Provide staff with information on the school district's plan for
 - Assuring that essential central office functions, including payroll, and communications with staff, students, and families will continue.
 - Adapting school facilities to supplement healthcare delivery if needed by local public health officials.
 - Encouraging school nurses, counselors, school psychologists, and social workers to establish supportive long-distance relationships with particularly vulnerable students via the phone, e-mail, or regular mail.
- Coordinate strategies with other districts in your region.

7. Help your community

- Coordinate your pandemic plans and actions with local health and community planning.
- Find volunteers in your school who want to help people in need, such as elderly neighbors, single parents of small children, or people without the resources to get the medical or other help they will need.
- Think of ways your school can help others in your community plan for a pandemic.
- Participate in community-wide exercises to enhance pandemic preparedness.

8. Recovery

- Establish the criteria and procedure with State and local planning teams for resuming school activities.
- Develop communication for advising employees, students, and families of the resumption of school programs and activities.
- Develop the procedures, activities, and services needed to restore the learning environment.

References:

1 American Academy of Pediatrics. Children in Out-of-Home Child Care: Classification of Care Service. In: Pickering LK, ed. Red Book: 2003 Report of the Committee on Infectious Diseases. 26th ed. Elk Grove Village, IL: American Academy of Pediatrics; 2003:124.

2 Bradley RH. Child care and common communicable illnesses in children aged 37 to 54 months. Arch Pediatr Adolesc Med. 2003 Feb;157(2):196-200.