

**PANDEMIC FLU SCHOOL RESPONSE  
GUIDELINES FOR SUPERINTENDENTS**

*Note:* Implementation of a school district plan will be triggered by the Clark County Health Department declaring a pandemic (a novel virus causing severe illness that is spread human-to-human). However, school district plans can be adaptable to smaller scale outbreaks, such as norovirus.

**PANDEMIC INFLUENZA SCHOOL DISTRICT CHECKLIST**

<i>Done?</i>	<i>Task</i>
	<b><i>PLANNING &amp; COORDINATION</i></b>
	Working with the Clark County Health Department, develop a detailed understanding of the local situation.
	Determine the level of impact within the school district (students and staff).
	Using the school district plan, take appropriate actions.
	Provide for ongoing evaluation and assessment of the situation.
	Determine if there are community plans for alternate use of school facilities (such as being used for a medical dispensary, temporary infirmary, or as an outreach facility to the local community).
	<b><i>CONTINUITY OF STUDENT LEARNING AND CORE OPERATIONS</i></b>
	Determine staff needs (quantity and location), and ensure that the following essential staff is available: <i>Teachers, Paraprofessionals, Administrators, Nurses, Payroll &amp; Accounts Payable, Food Services, Custodial, Maintenance, Transportation, Technology, Counselors &amp; Psychologists, Public Relations, and Others.</i>
	Find ways to fill staff deficits for Teachers and Support Services.
	Determine the best strategy for delivering educational services given the circumstances. <i>(This requires the availability of teachers.)</i> The strategies may include (1) facility or class modifications and/or (2) alternate education delivery systems.
	Determine the best strategy for continuing services to Special Education students, especially the medically fragile.
	Determine the best strategy for how to serve and communicate with homeless students.
	Determine the best strategy for continuing day care services (which affects staff availability).
	Consider the need to cancel extracurricular activities and outside users of school facilities.
	Ensure that needed supplies continue to arrive.
	Plan to access emergency supplies - gloves, masks, disinfectants, etc.
	Determine the best strategy for how to reassess students' educational needs after an extended illness.

*(Continued)*

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**PANDEMIC INFLUENZA SCHOOL DISTRICT CHECKLIST, CONT.**

<i>Done?</i>	<i>Task</i>
	<b><i>INFECTION CONTROL</i></b>
	Ensure that staff and students are aware of hand-washing and respiratory etiquette, necessary related supplies are in place, and staff enforces their use.
	Ensure adequate cleaning practices are being used, and temporary staff is trained.
	Amend and publish revised sick leave policies and procedures.
	Amend and publish revised student absences procedures.
	Implement procedures, facilities, and staff to handle students and staff who become ill at school.
	Establish screening for students/staff returning to school after an illness.
	Ensure that the school nurse role is filled at each school.
	<b><i>COMMUNICATIONS</i></b>
	Establish and publish an emergency hotline phone number that will have pre-recorded statements and updates. Communications professionals should supply (and record) the messages daily. Assure messages align with those of the Health Department.
	Create a dedicated website to post all pertinent information and update it a minimum of twice a day. Publish this website through all media channels and direct mail to parents.
	Use <a href="http://www.flashnews.net">www.flashnews.net</a> for all media information distribution. <i>Flashnews.net is an internet accessed information system used to provide school emergency information to all media at once. The information goes to TV stations, radio, and newspapers in any designated area. It is accessed by one designated contact in the school district.</i>
	Provide regular updates to staff using e-mail, telephone trees and web tools.
	Prepare talking points for front-line staff and those who will be answering the phones. Include how the district/school is addressing challenges, support for students and families, and available services and resources.
	Designate staff who will serve as school district/ family liaisons in the event of a critically ill child, staff or family member. The liaison would be responsible for communication between the family and the school.
	Communicate the availability of crisis and grief counselors and how to access this service. (This may need to occur through phone calls or other means.)
	Establish a means of maintaining on-site staff to staff (school to school) communications when phone systems will be overloaded.

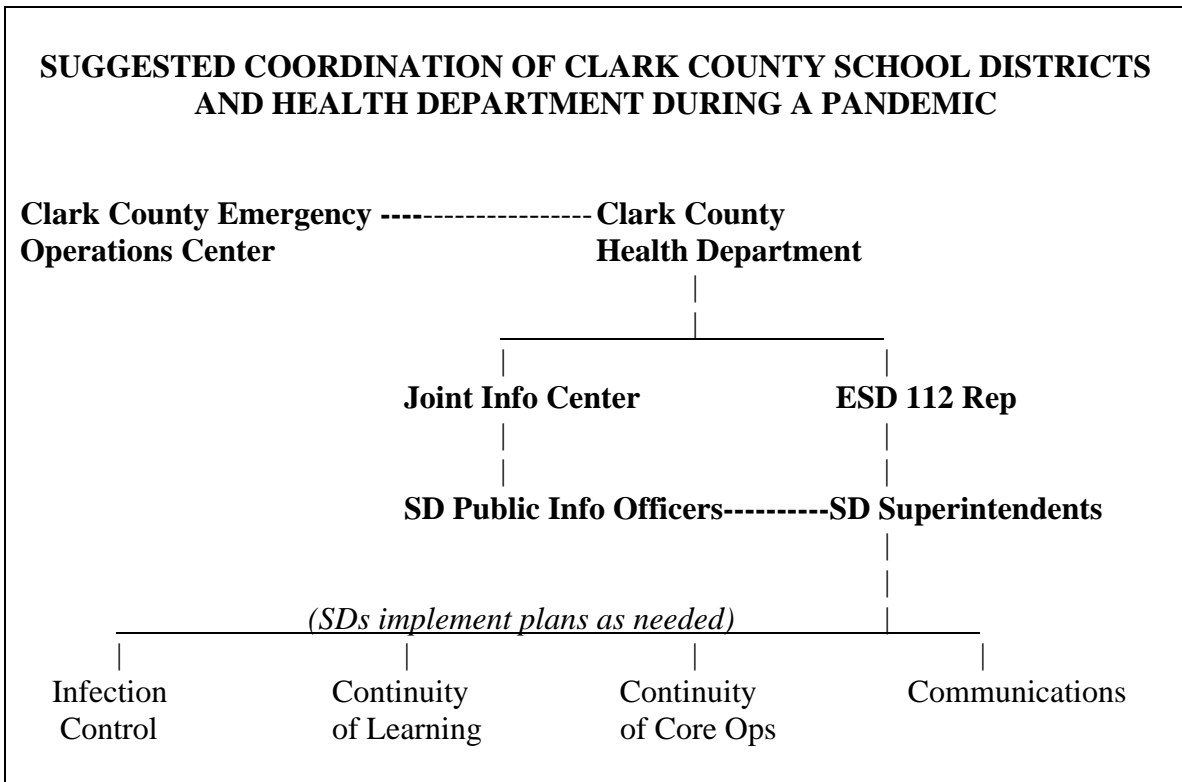
# PANDEMIC FLU SCHOOL RESPONSE GUIDELINES FOR SUPERINTENDENTS

*Note: The following recommendations are not an inclusive list, but rather an outline to initiate preparations.*

## A. RECOMMENDATIONS FOR PLANNING & COORDINATION

*Background:*

- \* Community planning is being coordinated by the Clark County Health Department & Clark Regional Emergency Services Agency. School district planning is being coordinated by ESD 112 and the Clark County Safe Schools Task Force.
  - \* An emergency will be declared and managed:
    - At the State level by the Governor and State Health Officer
    - In Clark County by the Clark County Health Officer/Department Director (*WAC 246-110-020 gives the local health officer the authority to close schools and day care centers to control a contagious disease outbreak.*). The CCHO serves as a Technical Advisor to the Incident Commander.
1. Define coordination and communication for nine school districts, the Deaf and Blind Schools, private schools, and other schools/colleges in a written agreement.
    - a. It is recommended that in a pandemic emergency, communications will be coordinated by the Clark County health Department through the ESD to the superintendents.



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2. Implement school district planning (persons, timelines, deliverables, performance measures).
  - a. Form a core team to develop the plan (reps from safety, human resources, curriculum, student support services, community relations, support services, and finance):
    - i. Plan for continuity of student learning and core operations
    - ii. Establish infection control policies and procedures
    - iii. Plan communications including coordination with ESD and the Joint Information Center (JIC)
  - b. Involve buildings and departments in planning. Have each building or department strategize how to operate with a 50% staff reduction and cover key areas - set service priorities.
  - c. Identify members and establish a District Pandemic Influenza Advisory (reps from CCHD, admin, nurse, mental health spec, teachers, food services, custodial, parents, students, others). The advisory will:
    - i. Review and recommend strategic priorities to the superintendent
    - ii. Review the district operational plan and make recommendations to the core team
3. Coordinate mutually supportive plans (among school districts and the Clark County Health Department and CRESA).
  - a. Ensure ICS organizational compatibility
  - b. Test the plan, especially linkages between agencies  
*(Tabletop exercise scheduled for 9/27/06 in Clark County)*
  - c. Share plans with other LEA's and private schools
4. Develop strong ties with the local Health Department (know key players).

### **B. RECOMMENDATIONS FOR CONTINUITY OF STUDENT LEARNING AND CORE OPERATIONS**

*Background:* Flu scenario used for planning predicts that flu affects may come in waves and may affect up to 50% of students and staff.

1. Determine what positions would be essential for the school district to continue operations. Essential staff may include:
  - Teachers - To continue student learning
  - Paraprofessionals - To assist with student learning
  - Administrator - To keep schools operating
  - Nurses - For medical screening, medical care, information, etc.
  - Payroll & Accounts Payable - To pay employees & receive money
  - Food Services - To serve free & reduced lunches, possibly do bag lunches from central kitchen

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- Custodial - To maintain sanitation
  - Maintenance - To keep systems operating
  - Transportation - To get students to school (could use limited routes or parent transportation)
  - Technology - To set up and maintain web based learning and communication
  - Counselors & Psychologists - For crisis team to help deal with losses
  - Public Relations - To maintain communications
  - Others?
2. Predetermine and arrange ways to fill staff deficits:
- a. For teaching staff:
    - i. Use of substitutes
    - ii. Use of certificated district office staff
    - iii. Use of retirees (how to find them?)
    - iv. Use of emergency certification through OSPI (accelerated?)
  - b. For Support Services staff:
    - i. Use of cross trained staff
    - ii. Use of district office staff and coaches
    - iii. Use of volunteers (check with PTA and local churches)
    - iv. Through contracts with current business partners
    - v. Use of private companies (predisaster agreements?)
3. Identify what cross training is needed based on essential staff.
4. Predetermine and arrange the best strategies for delivering education services under a variety of pandemic flu circumstances (limited facilities, limited staff, closed school buildings, etc.). *(This requires the availability of teachers.)* Strategies to be evaluated include (and be a combination) of the following:
- a. Facility or class modifications
    - i. Combining classes
    - ii. Modified schedule
    - iii. Limiting the number of schools that are open, combining schools
    - iv. Combining districts
    - v. Modifying the school calendar
    - vi. Use of student tutors
  - b. Alternate education delivery systems
    - i. Use of internet based learning  
(Elearning is expandable, needs teachers at same ratio as classroom; EVSD & VSD uses UCompass Educator; estimated that about 50% of students have computers at home)
    - ii. Use of TV and public access channels
    - iii. Use of videoconference to the TV or computers

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- iv. Use of radio communication
- v. Use of videotaped classes
- vi. Use of pod-casting
- vii. Use of the community resource model, where families get materials but don't stay
- viii. Teachers posting homework, students doing assignments at home
- ix. Use of library bookmobiles
- x. Send class info by mail
- xi. Involve extended family as teachers

*Note: As there may be impacts to the internet because of increased use due to the pandemic, be sure to consider low tech strategies as well as high tech ones.*

- 5. Work with ESD 112 to ensure:
  - a. Continued support services, especially in key areas (listed above, B.1.)
  - b. Assistance with communications (PR)
  - c. Technology support
  - d. Off campus meeting space
  
- 6. Work with OSPI to:
  - a. Streamline the emergency certification process during a pandemic (usually takes one week)
  - b. Provide access to retired teachers (through OSPI Cert list, Retirement System, or Retired Teachers Assn?)
  - c. Consider reimbursement models if districts combine or use non-traditional education strategies or timelines
  - d. Determine how a pandemic would affect WASLs

### **C. RECOMMENDATIONS FOR INFECTION CONTROL POLICIES AND PROCEDURES**

#### *Background*

Implementation of a plan will involve a significant amount of coordination between operations and human resources and the county and state health departments. This requires a change in day to day practices. There is also a budget impact to implementing effective infection control practices now. The State Department of Health and the local Health Department will determine the effective solutions and specific measures to be taken in the event of a pandemic.

The School Nurse (or designee) has a key role in a pandemic. Before the outbreak, the nurse is involved in training and prevention. At the onset, the nurse assists with surveillance of the illness. During the outbreak, the nurse may have many duties

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including assisting in the sick room, assessing students and staff as they become ill and then return to school, and providing advice and consultation to staff. *We note that most districts have no nurse substitutes, so non-nurses have to be trained to perform some of the nursing duties.*

1. Hand-washing and Respiratory Etiquette
  - a. Provide all staff with in-service on the need for infection control and the areas of infection control: transmission and the importance of hand washing, respiratory etiquette, and environmental clean-up. (The recommendation was to coordinate the JUST IN TIME TRAINING with the Health Department for nurses and additional staff in August. A second cohort would receive the training at a later time.).
  - b. Infuse curriculum for students with hand-washing and respiratory etiquette.
  - c. Include information on hand-washing (etc) in parent meetings and events.
  - d. Post hand-washing posters next to sinks, in restrooms and in classrooms.
  - e. Begin use of anti-bacterial hand cleaner:
    - At the start of each lunch line
    - In each classroom by the wastebasket
    - In computer labs
    - In music programs
  - f. Target practices related to food service for the start of the school year.
    - Actively discourage the sharing of food and beverages.
    - Use a side dish to hold tongs for food in buffets or bars.
    - Discourage sharing of food among staff as well.
  - g. Add tissue to the supply list for students.
  - h. Have tissue available at several stations in the classrooms and meeting rooms.
  
2. Infection Prevention Practices: Cleaning
  - a. Have posted a clearly defined communication plan to ensure all staff will have access to the information needed for clean-up (maintenance, custodial, teachers, staff assistance, etc.).
  - b. Begin now to use universal precautions for any bathroom cleaning, emptying of wastebaskets and vomit clean-up.
  - c. Provide refresher in-service on the necessity of clean-up solutions being prescriptive for the specific bacteria or toxic agent being treated.
  - d. Have adequate and appropriate supplies readily available.

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3. Policies and Procedures for Sick Leave for Staff
  - a. Provide inservice training for staff on the potential for an outbreak. Include information on the option of ‘short term salary insurance’ and encouragement of getting the flu shot.
  - b. Amend sick leave policy to cover such an outbreak with clarity of not being punitive to staff for absences. Policy to include language regarding exceeding sick leave consequences.
  - c. Provide a dedicated phone line and email address for staff to report absence. This will include name as well as symptoms. The Health Department will have joint access.
  - d. Include, in files at building location, emergency contact for staff.
  
4. Policies and Procedures for Student Absences
  - a. Amend student attendance policy to include “the superintendent is able to modify this policy as necessary.”
  - b. Provide dedicated phone and email line to report student absences with information including student name, parent and family name, symptoms, school, etc. The Health Department will have joint access for surveillance.
  - c. Plan with the Health Department the ‘alert’ for fragile or health compromised students. Consideration of including a note in the health care plan for fragile students recommended action in event of influenza outbreak (Doctor’s orders on school attendance during pandemic).
  - d. Establish clear policy on ‘return to school’ with length of time to be symptom free. Students interviewed on return. Specific details set by the Health Department.
  
5. Students and Staff Becoming Ill at School
  - a. Update student information on an annual basis. This includes phone and emergency contacts.
  - b. Space will be available to ‘hold’ students and staff who are ill with the same virus. This ‘health room’ will be staffed by designated staff who has received training.
  - c. If no family is available to transport, the students will be transported home on the school bus. Protective masks will be used when transporting these students.



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### **D. RECOMMENDATIONS FOR COMMUNICATIONS PLANNING**

1. Use the Pandemic Flu Communications Plan template (available July 2006) to prepare your district's detailed communications plan. The plan will identify target audiences (media, parents, students, staff); avenues for information dissemination; and all necessary communications tasks.
2. Prepare a letter to parents for distribution at the beginning of the year, outlining preparedness efforts in conjunction with local health officials. Discuss operational details in the case of pandemic flu, communication practices and key contact information.
3. Assure pandemic flu prevention efforts are occurring in schools and are being communicated to all target audiences. (Translation of materials may be necessary.)
4. Establish chain of command flow chart (and back-up chain of command). Your flow chart should identify who communicates what to whom, how and when.
5. Identify two to three individuals who will serve as point of contact for media. These people will work closely with the health officials, school nurses and administrators – now and in the case of outbreak. Let staff know who has been designated and what their role is.
6. Once your strategy for continuity of instruction during a pandemic flu is developed, communicate the details to parents, students and staff and explain how they will access distance learning opportunities, web tools, video, etc.
7. Develop and maintain up-to-date communication contacts of key public health and education stakeholders. This contact list will be your key communicators as the pandemic flu unfolds. Update telephone trees, email addresses and contact information for all staff, parents and key contacts.