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# SCHOOL PANDEMIC INFLUENZA PREPAREDNESS GUIDELINES

## I. GOALS IN A PANDEMIC

A. Limit death, illness, and emotional trauma.
B. Preserve continuity of essential school functions.
C. Minimize social and educational disruption.
D. Minimize economic losses.

## II. PLANNING AND COORDINATION

Collaboration and coordination with local and state agencies is encouraged. These agencies can provide current information, technical assistance and oversight to your influenza plan.

### A. COORDINATE WITH STATE AND LOCAL AGENCIES

| 1. Coordinate Planning Efforts | At a district level, work with local and/or state health department and education agencies to coordinate with their pandemic plans. |
| 2. School Closure | Develop communication plan to alert schools in the event of school closure. |
| 3. Absenteeism | In conjunction with local health department develop system for receiving daily reporting on numbers of students and staff absent due to influenza. Establish system prior to pandemic and practice during every influenza season. (A substantial increase in absenteeism could be an early warning of a pandemic.) |

### B. PLAN DEVELOPMENT

| 1. District Committee | Identify a district committee to provide guidance to school sites regarding pandemic influenza preparations. |
| 2. School Committee | Each school identifies a committee (3 - 4 people) to oversee implementation of pandemic plan. Committee could serve as an Incident Command Center to receive communication from district office and local health department. *It is recommended to have a school nurse on the committee.* The committee may either provide directly or identify individuals to perform the following: a. Oversee education to staff. b. Oversee education of students (i.e. hand washing, cough etiquette, staying home when sick). c. Provide education to families. |
| 3. Students with Special Needs | Incorporate into plan the requirements of students with special needs (e.g. children with health care needs, low income students who rely on school food service for daily meals), those in special facilities (e.g. juvenile justice facilities), and those who do not speak English as a first language. |
| 4. Review and update | district emergency plan. |
| 5. Practice plan | prior to actual event. |
III. CONTINUITY OF STUDENT LEARNING AND CORE OPERATIONS
The ability to continue with student learning and essential school functions are critical during and after a pandemic.

| A. STUDENT LEARNING | 1. Alternative Instruction
Develop plan for alternative instruction (e.g. web-based distance instruction, telephone trees, mailed lessons/assignments, instruction via local radio/television) in the event of a school closure.

2. Lesson Plans/Substitute Teachers
   a. Encourage teachers to create extensive lesson plans ready for substitute teachers.
   b. Increase number of substitute teachers available.
   c. Develop plan for a shortage of substitute teachers.

| B. CORE OPERATIONS | 1. Continuity of Essential Functions
Develop a continuity of operations plan for essential functions.
   a. Work with human resources regarding school functioning with decreased work force. Look at alternatives (e.g. staggered school times, changes in bussing, and telecommunications.) Custodians, cafeteria workers, plumbers, teachers will all be affected.

2. School Closure
   Develop a plan to address affects of possible school closure. *School closure should be made only after consultation with public health officials.*
   a. How will staff be paid? Will they be paid?
   b. Will school have to extend for the summer?
   c. Will education be available if school is closed?
   d. Will sports and extra-curricular activities be curtailed?
   e. How will this affect graduation?

3. Information/Computer Services
   a. Do you raise/lower firewalls?
   b. What about passwords? Will they need to change?
   c. Who will have passwords?
   d. Is access made easier or harder?
### IV. INFECTION CONTROL POLICIES AND PROCEDURES

Infection control is a critical step in pandemic influenza preparedness. These steps are also valuable in preventing spread of other communicable or infectious diseases.

| A. INFECTIOUS DISEASE PREVENTION | 1. Coordinate with local health department to implement infection prevention policies and procedures that help limit the spread of influenza at school.  
   a. Review and update district communicable disease policies and procedures.  
   b. Provide sufficient and accessible infection prevention supplies (e.g. warm, water, soap, alcohol based/waterless hand hygiene products, tissues, trash receptacles). *Anti-bacterial soap is not required.* See recommended supply list.  
   c. Encourage and enforce hygiene practices, especially meticulous hand washing and hand sanitizing.  
   d. Every student and staff member must wash hands before eating, after using the bathroom, and after coughing/sneezing.  
   e. Students should not be allowed to share food, drinks, etc.  
   f. Practice good cough/sneeze etiquette.  
   g. Work with custodial staff to ensure desks and countertops, etc. are sanitized routinely. |
| B. INFECTIOUS DISEASE CONTROL | 1. Establish policies for isolating ill students and staff.  
   2. Determine location of isolation room.  
      This room should:  
      a. Be able to be transformed to an isolation room quickly when needed.  
      b. Have bathroom attached or located nearby.  
      c. Be out of constant traffic flow.  
      d. Be stocked with supplies such as masks, gowns, gloves, tissues, germicide/viricide, trash bags, hand sanitizer, etc.  
   3. Establish policies for transporting ill students. |
| C. ABSENTEE POLICY | 1. Review and update district student and staff absentee policies.  
   a. Establish policies and procedures students and staff absences unique to pandemic influenza (e.g. non-punitive, liberal leave)  
   b. Establish policies for students and staff suspected to be ill or who become ill at school. Students and staff with known or suspected influenza should not remain at school and should return only after symptoms have resolved. |
V. COMMUNICATIONS PLANNING
A good communication plan is essential to prevent chaos and panic in a pandemic. If staff, students, and families know how to find correct information, they may be better prepared and less likely to panic during a pandemic.

| A. DEVELOP COMMUNICATION PLAN | 1. Develop plan to communicate with staff, students, and families.  
| | a. Plan should be managed per your individual School Emergency Plan.  
| | b. Ensure parent and staff phone numbers are updated regularly.  
| | 2. Develop and maintain contact information for key public health and education stakeholders. |
| B. EDUCATION CAMPAIGN | 1. Involve school nurses, PTA or school board members in educating families and the community about the necessity of preparation.  
| | 2. Advise staff, students, and families where to find up-to-date and reliable information regarding pandemic influenza.  
| | 3. Develop messages, fact sheets, and forms in several formats and languages. Ensure all messages are culturally and linguistically appropriate and meet the needs of all students/families with special needs. Coordinate messages with local health department, if necessary. Visit the Utah Department of Health’s website: [www.pandemicflu.utah.gov](http://www.pandemicflu.utah.gov)  
| | 4. Anticipate potential fear and anxiety of staff, students, and families as a result of rumors and misinformation and plan how to address them. |
VI. RESPONSE DURING PANDEMIC

| A. INCIDENT COMMAND | Upon notification of a pandemic, each facility should do the following:  
|                     | 1. Activate your Incident Command Center.  
|                     | 2. Identify the number of staff and students daily absent with pandemic flu. See Surveillance Plan.  
|                     | 3. Hold faculty/staff meeting and provide information on extent of infection at school site and possible changes that may take place at the school.  
|                     | 4. Conduct timely debriefings to identify lessons learned and make necessary changes to response plan. |

B. REDUCING SPREAD OF ILLNESS

1. **Student Spacing (social distancing)** – Refers to distancing individuals and other strategies to reduce the spread of virus between people.  
   a. Education on student spacing should be distributed to all staff, students and parents.  
   b. Student spacing strategies may include:  
      i. Spacing students’ desks three (3) feet apart, in small pods or clusters.  
      ii. Discourage prolonged congregation in hallways, lunch rooms, etc.  
      iii. Staggered school times  
      iv. Staggered bus routes, so fewer people are on each route  
      v. Limit group activities and interaction between classes  
      vi. Cancelling gym classes, choir, or other activities that place individuals in close proximity.  

2. **School Cleaning**  
   a. Disinfect shared work areas, counters, railings, door knobs, and stair wells more frequently during a pandemic.  
   b. Filters of air conditioning/heating systems should be cleaned and changed frequently.  
   c. Telephones should not be shared.  
   d. Specialized cleaning solutions not essential. Standard cleaning products are adequate (including soap and water).  
   e. Where possible, increase ventilation to the facility, either by opening all doors and windows or turning up heating/cooling systems at the end of the day.  

C. MANAGING ILLNESS IN STUDENTS AND STAFF

1. Information should be posted on what to do if people get sick while at school.  
2. Educate staff and students regarding symptoms of illness, when they should stay home, and when they may return.  
3. If a person becomes ill, or if someone observes that another person is exhibiting symptoms of influenza at work/school; make sure the ill person is isolated until he or she is able to leave school.
## VII. RECOVERY AFTER PANDEMIC

### A. PRE-PLANNING FOR RECOVERY

| 1. Identify and pre-screen health and grief service providers. |
| 2. Provide training for school staff regarding grief and possible health problems. |

### B. RECOVERY

#### 1. Mental Health
- a. Provide continued counseling support for students and staff.
- b. Identify students, families and staff who may need long-term mental health support or intervention and develop the school and community resources to provide these services.
- c. Monitor the effects of cumulative stress on caregivers such as office staff, school nurses, teachers, aides, school counselors and other crisis team members.

#### 2. Physical Health
- a. Provide rest places for those who tire easily.
- b. Provide physical assessments if needed, if staff are available or make appropriate community health referrals.
- c. Follow-up with student referrals made to community agencies.
- d. Identify students, families and staff who may need long-term mental health support or intervention and develop the school and community resources to provide these services.

#### 3. Continued Support
- a. Make educational materials available to staff and families on topics such as how to support your student with their recovery from pandemic flu, common symptoms of loss and grief, and constructive ways to cope with stress.
- b. Modify work roles and responsibilities or add volunteer or support staff as needed.

#### 4. Return to Student Learning
- a. Re-establish routine learning process as soon as possible to in recovery.

#### 5. Evaluation
- a. Document “lessons learned” and incorporate them into revisions and trainings.

#### 6. Continuing Recovery - Marking the Anniversary
- a. Plan a response for the anniversary period several months in advance, including a needs assessment to identify students at continued risk.

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**Acknowledgements:**

Salt Lake City School District
Iowa Department of Health
Washington State - Office of Superintendent of Public Instruction
Contra Costa, California Health Services.