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HEALTH DISTRICT

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Updated Guidance on School / Childcare Closures for H1N1 Influenza (swine variant) in Grant County Grant County Health District, May 4, 2009

BACKGROUND

Over the past week, consistent with guidance from CDC and the Washington State Department of Health, public health officials in several Washington counties have recommended temporary closure of schools when there was a student with a confirmed or suspected case of H1N1 (Swine) Influenza A. At the onset of this outbreak, it was prudent to close affected schools while we learned more about the behavior of this new disease and worked to develop a proper strategy for community measures to prevent illness. The closures provided valuable time for us to gather information about this new H1N1 influenza strain in our community. Because Grant County has not yet had a confirmed or suspected case, no schools have been closed in our area.

Based on information we have gathered from national, state and local officials, Grant County Health District is issuing this revised guidance for responding to the new H1N1 strain in schools and child care.

UPDATED GUIDANCE

At this time, we are no longer recommending a routine and/or blanket closure of individual schools or school districts based on diagnosis of the first H1N1 influenza cases in students or staff. Although decisions will be made on a school-by-school basis, we expect that in most schools we will recommend keeping all students/staff with symptoms of influenza out of school during their period of illness and recuperation when they are potentially infectious to others (specific details below),

This strategy does not differ significantly from what we usually recommend during seasonal influenza (late fall to late spring). Special circumstances in an individual school (such as a large spike in absenteeism from flu-like illness or cases of severe illness) may result in closure, but this is not the default recommendation based on the first few suspected or confirmed cases. All closure decisions will be made through active collaboration between school officials and public health.

Interim Recommendations for Management of H1N1 Influenza in Schools and Day Care

- Each morning, all parents/caregivers should assess all family members and especially all school-age children for symptoms of influenza (fever and cough or sore throat cough) or other symptoms that might be influenza.
- Each morning all school staff should assess themselves for symptoms of influenza. Temperature of 100F or greater can be used as the most sensitive tool in deciding about a possibility of the influenza-like illness.
- Students or staff with influenza-like illness (temperature $\geq 100F$ and cough or sore throat) should stay home and not attend school. All sick students and staff should stay out of school for at least 7 days even if their symptoms resolve sooner. Students and staff who are still sick after 7 days should continue to stay home from school until at least 24 hours after they have completely recovered.
- If a child or adult is ill with other symptoms, they should stay home at least one day to observe how the illness develops and until completely well for 24 hours. A few cases of H1N1 influenza begin as a gastro-intestinal illness.
- Schools should screen students and staff for visible signs of possible influenza illness upon arrival at school. Public health will provide screening checklists and other tools to assist schools in implementing these measures.
- Students and staff who appear ill at arrival or become ill at school should be promptly isolated and sent home.
- Persons who are ill should stay home and not go into the community unless they need medical care. Ill students may not attend alternative child care.
- As always, situations can be individualized and school authorities may close school based on many considerations, including public health recommendations. Parents may use their judgment regarding the risk and benefits of sending their children to school during this influenza outbreak as they would during a seasonal influenza outbreak.
- As is the practice with seasonal influenza, schools may be closed if larger numbers of students or staff become ill and school functioning becomes disrupted.
- It continues to be extremely important to wash hands frequently with soap and water (30 seconds), or use hand sanitizer (>60% alcohol content) if hands are not soiled, cover one's cough. Schools should make efforts to make these personal hygiene items readily available and use this opportunity to educate students on proper respiratory and hand hygiene.

DISCUSSION

Recommendations for disease control measures in the schools (and the rest of our communities) are made based on what we know about the illness and its spread. We also consider the practicality and consequences of the measures, including personal, family and community disruption. Important facts:

- Epidemiological information from case investigations and surveillance (statewide and nationally) suggests that this new strain has spread more widely in communities and will continue, at least for a time, to be transmitted from person to person, including children.
- Available information from health care providers, emergency departments and hospitals, as well as information from other states, suggests that **so far** the severity of illness from the new H1N1 influenza strain is not greater than the typical seasonal influenza that circulates in our community every year.

SUMMARY

Widespread school closure makes less sense at this time in the outbreak given what we are observing about disease transmission and the severity of illness currently associated with this H1N1 strain. If this strain of flu was severe enough to require school closure upon diagnosis of the first case, all schools should probably be closed. Closing the schools where cases happen to be diagnosed first, while leaving most schools with undiagnosed cases open, makes less sense as an ongoing influenza control strategy in our community for this strain. Public health authorities are acutely aware of the educational and economic disruptions caused by school closure, and are committed to using that approach only when truly necessary. At the same time, public health officials are continuing to monitor the situation and will alter policies as needed as the situation changes. Our priority continues to be the protection of our community's health. It is prudent to remember that even "routine" seasonal influenza can be a severe disease. Each year in the United States more than 200,000 people are hospitalized for flu-related complications; and about 36,000 people die from flu-related causes. Given this fact, unfortunately, as in every influenza season, we need to be prepared for the possibility of additional cases including severe cases in our communities. Preventing the spread of influenza requires all of us – schools, families, businesses and government – to cooperate and work together.