



# Kenosha County Division of Health H1N1 Flu Information & Resources for Schools/Preschools/Daycares

August 28, 2009



**Kenosha County Division of Health  
H1N1 Flu Information and Resources for Schools/Preschools/Daycares**

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# Kenosha County Division of Health

## H1N1 Flu Information and Resources for Schools/Preschools/Daycares

### Background

Novel H1N1 (referred to as “swine flu” early on) is a new influenza virus causing illness in people. This new virus was first detected in people in the United States in April 2009. This virus is spreading from person-to-person worldwide, probably in much the same way that regular seasonal influenza viruses spread. On June 11, 2009, the World Health Organization (WHO) signaled that a pandemic of novel H1N1 flu was underway.

This document provides schools with procedures for local school surveillance, guidance on school closures, and resources for when there is a confirmed case of H1N1 Flu in a school.

See [Attachment A: Beginning of School Template Letter to Parents](#).

### Signs & Symptoms of H1N1 Flu

- fever greater than 100 degrees
- body aches
- coughing
- sore throat
- respiratory congestion
- diarrhea and vomiting in some cases

### Recommendations for School Exclusion

According to the Centers for Disease Control and Prevention (CDC):

- Individual with influenza-like illness should remain home for at least 24 hours after they are free of fever (> 100° F) without the use of fever-reducing medications. For most students, this period will be 3 to 5 day exclusion period.
- Antiviral medications do not decrease the period of infectivity.
- Ill students should be isolated from well students prior to exclusion from school.
- Routine cleaning is all that is necessary.

### School Absentee Reporting Procedure

Levels and kinds of absenteeism can provide valuable information to school district and public health officials regarding normal disease activity at a particular time during the school year and indicate early signs of disease and food borne outbreaks.

In order to have appropriate data for decision making and surveillance we will need each school to submit a daily absenteeism form for both students and staff. This report needs to be submitted **by the end of each day** (for each school building) to the Kenosha County Division of Health. If absenteeism is greater than 25%, immediately call the Kenosha County Division of Health: (262) 605-6765.

Please contact the Kenosha County Division of Health at (262) 605-6765 to register for the online system.

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1. It will be necessary to know if the reason for absence is due to influenza-like illness or other reasons:
  - Students and staff who are sent home during the day should be included in the absentee numbers for the next day.
  - A student who is absent for more than half of the school day due to illness, should be counted as one absence (not a half).
  - Students who are absent due to previously scheduled Doctor/Dentist and therapy appointments are not considered absent due to illness.
  
2. Change your school's call-in procedures to include the following:
  - a. For **recorded messages**, include the following statement:  
"Due to our ongoing efforts to assure the health of all students, if you are calling your child in absent today, please indicate whether it is because:
    - Does your child have an **Influenza-like illness (ILI)** defined as fever (100°F or greater) and a cough and/or sore throat in the absence of a KNOWN cause other than influenza; or
    - your child has other reasons for being absent today."
  
  - b. For **school personnel taking the incoming calls** ask:
    - Does our child have an **Influenza-like illness (ILI)** defined as fever (100°F or greater) and a cough and/or sore throat in the absence of a KNOWN cause other than influenza; or
    - if the child has other reasons for being absent today.
  
3. Record absentee calls using a tracking form (see [Attachment B, School Absentee Calls Tracking Form Template](#)).
  
4. Submit absentee numbers to the Kenosha County Division of Health online Daily School Absenteeism Form at <http://www.co.kenosha.wi.us/dhs/Divisions/Health/NavPages/H1N1Schools-Daycares.php>.
  - a. The form will ask for the following information regarding student and staff absenteeism:
    - Student:
      - Influenza-like Illness
      - Other
      - Unknown
    - Staff:
      - Influenza-like Illness
      - Other
      - Unknown
  
  - b. You will be prompted for a User Name and Password
  
  - c. Complete the absenteeism report
    - Input date
    - Use the drop down menu to indicate the school

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- Complete the remainder of the form (yellow fields only)
- Submit

### Confirmed Case of H1N1 Flu in a School

- A school will be notified by the Kenosha County Division of Health when they have a child with a confirmed case of H1N1 Flu.
- The school will send a letter to parents notifying them of the confirmed case and urging them to monitor their child for signs and symptoms of H1N1 Flu (see [Attachment C, Confirmed H1N1 Flu Template Letter to Parents](#)).
- This template letter can also be found at:  
<http://www.co.kenosha.wi.us/dhs/Divisions/Health/NavPages/H1N1Schools-Daycares.php>.

### CDC Guidance for School Dismissal

See [Attachment D, CDC Guidance for State and Local Public Health Officials and School Administrators for School \(K-12\) Responses to Influenza during the 2009-2010 School Year](#).

- At this time, officials are not recommending school closures for individual cases of H1N1 flu. However, as with regular seasonal flu, there might recommend closing schools if larger numbers of students or faculty become ill.
- The decision to close schools will be made locally with input from the local public health department.
- CDC is asking that schools report school closures or dismissals using a form located at [www.cdc.gov/FluSchoolDismissal](http://www.cdc.gov/FluSchoolDismissal).

### Targeted Groups for H1N1 Flu Vaccine

In mid October, the Center for Disease Control and Prevention anticipates that the H1N1 vaccine will be available through local public health departments and primary care providers. Targeted groups to receive the vaccine include:

- Pregnant women,
  - Household contacts and caregivers of children under 6 months (*who cannot receive a vaccination themselves*),
  - Health care workers & medical service personnel,
  - Children and adolescents aged 6mos -24yrs, and
  - Persons aged 25-64 years of age with certain Medical Conditions.
- 
- At this time, teachers, without other risk factors, are not considered a targeted group to receive vaccine due to the fact that most of the cases of severe illness have not occurred in the age group.
  - The Kenosha County Division of Health will be conducting school based vaccination clinics for H1N1 Flu.



# COUNTY OF KENOSHA

Attachment A:

John Jansen  
Department of Human Services

Frank G. Matteo, Director  
Division of Health  
8600 Sheridan Road, Suite 600  
Kenosha WI 53143-6515  
Phone: (262) 605-6700  
Fax: (262) 605-6715

August 24, 2009

Dear Parent or Guardian,

As you may know, there is a new form of influenza in our community and in the world—H1N1 Flu (which has been called Swine Flu). H1N1 Flu can be easily spread from person to person. Therefore, we are taking steps to reduce the spread of this type of influenza in Kenosha County schools. We want to keep the school open to students and functioning in a normal manner during this flu season but **we need your help to do this**. In order to monitor influenza-like illness in the community, school officials will be requesting symptoms when a student's absence is being reported. Please be prepared to answer these questions when calling the school.

The **Kenosha Unified School District** and the Kenosha County Division of Health are working closely together to monitor both seasonal and H1N1 Flu conditions and make decisions about the best steps to take concerning schools. One of these steps includes vaccinating children against the spread of H1N1 Flu. This is a different approach than in previous years because school-age children seem to be more likely to develop or "catch" this type of influenza than older persons. For this reason, school-age children are a target group for receiving the vaccine as soon as possible.

**The Kenosha County Division of Health is planning to vaccinate** the children and staff in the **Kenosha Unified School District** in October and November or as soon as the vaccine is available. We will be providing more information on this program in the coming weeks.

In addition, here are a few things you can do to help.

- **Keep sick children at home** for at least 24 hours *after* they no longer have fever or do not have signs of fever, without using fever-reducing drugs. Keeping children with a fever at home will reduce the number of people who may get infected.
- **Do not send children to school if they are sick.** Any children who are determined to be sick while at school *will be sent home*.
- **Have your child vaccinated against regular seasonal influenza.**
- **Teach your children to wash their hands** often with soap and water. You can set a good example by doing this yourself.
- **Know the signs and symptoms of the flu.** Symptoms of the flu include fever (100 degrees Fahrenheit, 37.8 degrees Celsius or greater), cough, sore throat, a runny or stuffy nose, body aches, headache, and feeling very tired. Some people may also vomit or have diarrhea.

For more information about flu in our community, please contact the Kenosha County Division of Health at (262) 605-6700, (800) 472-8008 or visit <http://www.co.kenosha.wi.us/dhs/Divisions/Health/NavPages/SwineFlu.php>. We will notify you of any additional changes to our school's strategy to prevent the spread of influenza.

Sincerely,

Frank G. Matteo  
Health Officer/Director

**Joseph T. Mangi**  
**Superintendent of Schools**





# COUNTY OF KENOSHA

Attachment C:

John Jansen  
Department of Human Services

Frank G. Matteo, Director  
Division of Health  
8600 Sheridan Road, Suite 600  
Kenosha WI 53143-6515  
Phone: (262) 605-6700  
Fax: (262) 605-6715

June 19, 2009

Dear Parent or Guardian,

The Kenosha County Division of Health would like to inform you that a confirmed case of H1N1 flu (swine flu) has been identified in a child attending ### Elementary School or Daycare. The child's family has been notified and the child will not be attending the facility until symptoms subside.

Local officials are continuing to monitor the outbreak of H1N1 flu (swine flu) in Kenosha County. H1N1 flu (swine flu) is spread similar to seasonal flu. Flu viruses are spread mainly from person to person through coughing or sneezing. People may also become ill by touching their mouth or nose with germs on their hands.

Although local, state, and federal agencies are working to contain this outbreak, there are simple steps you can do at home to keep your family healthy. These prevention steps include:

- Cover your nose and mouth with a tissue when you cough or sneeze, or cough/sneeze into your sleeve. If you use a tissue, throw it in the trash after use and wash your hands.
- Wash your hands often with soap and water, especially after you cough or sneeze. Alcohol-based hand cleaners are also effective.
- If you get sick, stay home from work or school and limit contact with others to keep from infecting them.
- Avoid touching your eyes, nose or mouth to reduce the spread of germs.

The health department is urging parents to monitor their children for symptoms of H1N1 flu (swine flu). These include:

- fever greater than 100 degrees
- body aches
- coughing
- sore throat
- respiratory congestion

If your child experiences any of the above symptoms, please contact your health care provider and keep him/her home from school or daycare for at least 24 hours after resolution of fever without the use of fever-reducing medications.

For more information, please contact the Kenosha County Division of Health at (262) 605-6700 or (800) 472-8008.

Sincerely,

Frank G. Matteo  
Health Officer/Director

## **Attachment D:**

# **CDC Guidance for State and Local Public Health Officials and School Administrators for School (K-12) Responses to Influenza during the 2009-2010 School Year** *(August 7, 2009)*

*This document provides guidance to help decrease the spread of flu among students and school staff during the 2009-2010 school year. This document expands upon earlier school guidance documents by providing a menu of tools that school and health officials can choose from based on conditions in their area. It recommends actions to take this school year and suggests strategies to use if CDC finds that the flu starts causing more severe disease. The guidance also provides a checklist for making decisions at the local level. Detailed information on the reasons for these strategies and suggestions on how to use them is included in the [Technical Report](#). Based on the severity of 2009 H1N1 flu-related illness thus far, this guidance also recommends that students and staff with influenza-like illness remain home until 24 hours after resolution of fever without the use of fever-reducing medications.*

*For the purpose of this guidance, "schools" will refer to both public and private institutions providing grades K-12 education to children and adolescents in group settings. The guidance applies to such schools in their entirety, even if they provide services for younger or older students. Guidance for child care settings and institutions of higher education will be addressed in separate documents.*

The guidance is designed to decrease exposure to regular seasonal flu and 2009 H1N1 flu while limiting the disruption of day-to-day activities and the vital learning that goes on in schools. CDC will continue to monitor the situation and update the current guidance as more information is obtained on 2009 H1N1.

About 55 million students and 7 million staff attend the more than 130,000 public and private schools in the United States each day. By implementing these recommendations, schools and health officials can help protect one-fifth of the country's population from flu. Collaboration is essential: CDC, the U.S. Department of Education, state and local public health and education agencies, schools, students, staff, families, businesses, and communities all have active roles to play.

The decision to dismiss students should be made locally and should balance the goal of reducing the number of people who become seriously ill or die from influenza with the goal of minimizing social disruption and safety risks to children sometimes associated with school dismissal. Based on the experience and knowledge gained in jurisdictions that had large outbreaks in spring 2009, the potential benefits of preemptively dismissing students from school are often outweighed by negative consequences, including students being left home alone, health workers missing shifts when they must stay home with their children, students missing meals, and interruption of students' education. Still, although the situation in fall 2009 is unpredictable, more communities may be affected, reflecting wider transmission. The overall impact of 2009 H1N1 should be greater than in the spring, and school dismissals may be warranted, depending on the disease burden and other conditions. (See the [Technical Report](#) for discussion of the kinds of circumstances that might warrant preemptive school dismissals.)

# Recommended school responses for the 2009-2010 school year

## *Under conditions with similar severity as in spring 2009*

- **Stay home when sick:** Those with flu-like illness should stay home for at least 24 hours after they no longer have a fever, or signs of a fever, without the use of fever-reducing medicines. They should stay home even if they are using antiviral drugs. (For more information, visit <http://www.cdc.gov/h1n1flu/guidance/exclusion.htm>.)
- **Separate ill students and staff:** Students and staff who appear to have flu-like illness should be sent to a room separate from others until they can be sent home. CDC recommends that they wear a surgical mask, if possible, and that those who care for ill students and staff wear protective gear such as a mask.
- **Hand hygiene and respiratory etiquette:** The new recommendations emphasize the importance of the basic foundations of influenza prevention: stay home when sick, wash hands frequently with soap and water when possible, and cover noses and mouths with a tissue when coughing or sneezing (or a shirt sleeve or elbow if no tissue is available).
- **Routine cleaning:** School staff should routinely clean areas that students and staff touch often with the cleaners they typically use. Special cleaning with bleach and other non-detergent-based cleaners is not necessary.
- **Early treatment of high-risk students and staff:** People at high risk for influenza complications who become ill with influenza-like illness should speak with their health care provider as soon as possible. Early treatment with antiviral medications is very important for people at high risk because it can prevent hospitalizations and deaths. People at high risk include those who are pregnant, have asthma or diabetes, have compromised immune systems, or have neuromuscular diseases.
- **Consideration of selective school dismissal:** Although there are not many schools where all or most students are at high risk (for example, schools for medically fragile children or for pregnant students) a community might decide to dismiss such a school to better protect these high-risk students.

## *Under conditions of increased severity compared with spring 2009*

CDC may recommend additional measures to help protect students and staff if global and national assessments indicate that influenza is causing more severe disease. In addition, local health and education officials may elect to implement some of these additional measures. Except for school dismissals, these strategies have not been scientifically tested. But CDC wants communities to have tools to use that may be the right measures for their community and circumstances.

- **Active screening:** Schools should check students and staff for fever and other symptoms of flu when they get to school in the morning, separate those who are ill, and send them home as soon as possible. Throughout the day, staff should be vigilant in identifying students and other staff who appear ill.
- **High-risk students and staff members stay home:** People at high-risk of flu complications should talk to their doctor about staying home from school when a lot of flu is circulating in the community. Schools should plan now for ways to continue educating students who stay home through instructional phone calls, homework packets, internet lessons, and other approaches.
- **Students with ill household members stay home:** Students who have an ill household member should stay home for five days from the day the first household member got sick. This is the time period they are most likely to get sick themselves.
- **Increase distance between people at schools:** CDC encourages schools to try innovative ways of separating students. These can be as simple as moving desks farther apart or canceling classes that bring together children from different classrooms.
- **Extend the period for ill persons to stay home:** If influenza severity increases, people with flu-like illness should stay home for at least 7 days, even if they have no more symptoms. If people are still sick, they should stay home until 24 hours after they have no symptoms.
- **School dismissals:** School and health officials should work closely to balance the risks of flu in their community with the disruption dismissals will cause in both education and the wider community. The length of time schools should be dismissed will vary depending on the type of dismissal as well as the severity and extent of illness. Schools that dismiss students should do so for five to seven calendar days and should

- reassess whether or not to resume classes after that period. Schools that dismiss students should remain open to teachers and staff so they can continue to provide instruction through other means.

*Reactive* dismissals might be appropriate when schools are not able to maintain normal functioning for example, when a significant number and proportion of students have documented fever while at school despite recommendations to keep ill children home.

*Preemptive* dismissals can be used proactively to decrease the spread of flu. CDC may recommend preemptive school dismissals if the flu starts to cause severe disease in a significantly larger proportion of those affected.

## **Deciding on a course of action**

CDC and its partners will continuously look for changes in the severity of influenza-like illness and will share what is learned with state and local agencies. However, states and local communities can expect to see a lot of differences in disease burden across the country.

Every state and community has to balance a variety of objectives to determine their best course of action to help decrease the spread of influenza. Decision-makers should explicitly identify and communicate their objectives which might be one or more of the following: (a) protecting overall public health by reducing community transmission; (b) reducing transmission in students and school staff; and (c) protecting people with high-risk conditions.

Some strategies can have negative consequences in addition to their potential benefits. In the particular case of school dismissals, decision-makers also must consider and balance additional factors: (a) how to ensure students continue to learn; (2) how to provide an emotionally and physically safe place for students; and (3) how to reduce demands on local health care services. The following questions can help begin discussions and lead to decisions at the state and local levels.

### **Decision-Makers and Stakeholders**

#### **Are all of the right decision-makers and stakeholders involved?**

- State and/or local health officials
- State and/or local education officials
- State and/or local homeland security officials
- State and/or local governing officials (e.g., governors, mayors)
- Parent and student representatives
- Representatives of local businesses, the faith community, school-employee unions, and community organizations
- Teachers
- Health care providers and hospitals
- School nurses
- School food service directors
- Vendors that supply schools

### **Information Collection and Sharing**

#### **Can local or state health officials determine and share information about the following?**

- Outpatient visits for influenza-like illness
- Hospitalizations for influenza-like illness
- Trends in the numbers of hospitalizations or deaths
- Percent hospitalized patients who require admission to intensive care units (ICU)
- Deaths from influenza
- Groups being disproportionately affected
- Ability of local health care providers and emergency departments to meet increased demand
- Availability of hospital bed, ICU space, and ventilators for influenza patients
- Availability of hospital staff
- Availability of antiviral medications

**Can local education agencies or schools determine and share information about the following?**

- School absenteeism rates
- Number of visits to school health offices daily
- Number of students with influenza-like illness sent home during the school day

**Feasibility**

**Do you have the resources to implement the strategies being considered?**

- Funds
- Personnel
- Equipment
- Space
- Time
- Legal authority or policy requirements

**Acceptability**

**Have you determined how to address the following challenges to implementing the strategies?**

- Public concern about influenza
- Lack of public support for the intervention
- People who do not feel empowered to protect themselves
- Secondary effects of strategies (for example, dismissing schools could impact child nutrition, job security, financial support, health service access, and educational progress)