



Archived Information

H1N1 Flu & U.S. Schools: Answers to Frequently Asked Questions

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BACKGROUND

Starting almost two weeks ago, scientists became increasingly concerned about a new and potentially severe form of influenza known as H1N1. Over the last week, H1N1 has spread widely through the United States and the world. The outbreak of H1N1 has prompted school closures and cancellation of school-related events over the last few weeks. As the flu spreads, the Department of Education (ED) encourages school leaders, parents and students to know how to take action to reduce the spread of the virus and report illness.

Surveying the country, the overall impact of H1N1 flu on schools in the United States has been relatively small, so far. On Tuesday, May 5, 2009, more than 700 schools were closed for health reasons. It is important to remember that there are 15,000 school districts and approximately 100,000 schools in the United States.

UPDATED GUIDANCE

Initial cases in the United States were associated with travel to Mexico, and many initial cases occurred among school-aged students and were associated with school-based outbreaks. Based on this initial information, the Centers for Disease Control and Prevention (CDC) recommended school closure as an option to lessen the risk of infection with this novel influenza virus in order to protect students, staff, parents and other caregivers from a potentially severe disease.

New information on disease severity prompted health experts to revise the school closure guidance. The majority of U.S. cases have been less severe than initially reported from Mexico with fewer hospitalizations and deaths. CDC and local and state health officials will continue to closely monitor the severity and spread of this novel H1N1 influenza outbreak.

On May 5, 2009, CDC [updated its guidance](#) to reflect a more developed understanding of the H1N1 virus. Based on this information, CDC changed its recommendation to focus school-based efforts on early identification of ill students and staff, a recommendation to stay home when ill, and good cough and hand hygiene etiquette as the primary means to reduce spread of influenza in schools. Decisions about school closure should be at the discretion of local authorities based on local considerations, including public concern, the impact of school absenteeism, and staffing shortages.

But it is still essential that we all prepare and plan—especially at our schools. Do what is appropriate for the health of your communities, your schools and your students, and rely on guidance from the CDC. Even as this potential threat subsides, schools must be prepared for a range of threats and hazards and develop “all-hazards” plans that address a variety of situations.

ED, in consultation with CDC and other federal public health experts, has attempted to answer here some common questions about H1N1 that are circulating among members of the education community. Remember that the best guidance on health questions comes from physicians, public health agencies and other health experts. ED has relied on CDC guidance to compile the information we are providing here, and we have provided Web links to their sites at the end of this

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Q&A. On ED.gov, we also provide guidance on education policy and an emergency plan focused on elementary and secondary education, to help schools and districts deal with prolonged closures and other issues due to pandemic flu.

GENERAL GUIDANCE FOR SCHOOL LEADERS

Q: What should schools be doing now? Should we close our schools?

A: On May 5, 2009, the CDC changed its guidance to recommend to schools that school closures are not warranted at this time. Schools that have cases do not need to close, and schools that have closed can begin procedures to reopen. Students or staff sick with a suspected or confirmed case of H1N1 should stay home for seven days, even if symptoms subside sooner than that. If someone is sick longer than seven days, that person should stay home for 24 hours after symptoms subside.

This guidance is based on the understanding of the current situation. It is important to check the CDC Web site (<http://www.cdc.gov>) daily to check for updated guidance during this ongoing situation.

Schools should continue developing relationships with their health departments and consider implementing systems to track and potentially follow up on students who are absent from school to determine if absences illness-related. These systems can sometimes provide a clue to school and health officials that there may be high rates of illness in a community. These systems are important not just for this specific situation, but for other outbreaks as well.

Flu symptoms include acute respiratory illness, such as fever greater than 37.8°C or 100°F, plus cough or sore throat. Other possible symptoms are runny nose, feeling very lethargic, loss of appetite, and in some cases, nausea, vomiting, and diarrhea. Most cases in the U.S. have recovered, but at least one death has occurred.

States and local educational agencies can also use this opportunity to identify their authorities for school closures if they do not already know them. Accordingly, local educational agencies, non-public schools, and institutions of higher education (IHEs) should consult their state's pandemic influenza plan for more information about these authorities, state-level planning, and coordination. Information about state pandemic planning efforts can be found at: <http://www.pandemicflu.gov/plan/states/index.html>.

If students are dismissed from schools or day care centers, schools should cancel all school-related gatherings and encourage parents and students to avoid gathering outside of school, including at malls, movies theaters, public libraries or friends' houses in large groups.

Q: Should colleges and universities close if there is a suspected or confirmed case on campus?

A: The CDC does not recommend widespread school closure at this time. However, institutions of higher education (IHEs) should consult their all-hazards plans for decisions about how to protect student health and safety. State-run IHEs should consult their state pandemic influenza plans, which are posted at <http://www.pandemicflu.gov/plan/states/index.html>. The American College Health Association has also created guidance on pandemic planning.

Q: We have students or staff in Mexico now, or who have been there recently. Should we send them home?

A: There is no reason to exclude anyone from school merely because he or she has recently visited Mexico. If, however, an individual shows symptoms of influenza (fever above 37.8°C or 100°F, accompanied by cough or sore throat), they should stay home for 7 days, or 24 hours after symptoms subside, if longer than seven days. See below for more information about exposure to Mexico.

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Q: When should we send a student or staff member to the doctor?

A: Any individual with flu-like symptoms—fever above 37.8°C or 100°F accompanied by cough or sore throat—should stay home or be sent home if they become ill at school. They may be referred to a health professional if their symptoms worsen.

Q: What should we do if we have no cases in our community?

A: CDC recommends that schools and childcare facilities in unaffected areas begin developing or reviewing their all-hazards plans, which should include considerations of infectious disease outbreaks, including a potential future resurgence of H1N1 or other viruses. Many districts have developed pandemic plans as part of their all-hazards planning efforts and are encouraged to review those plans. If plans have not been developed, information on getting started can be found at: <http://www.ed.gov/admins/lead/safety/emergencyplan/pandemic/index.html>, <http://rems.ed.gov>, and www.pandemicflu.gov.

Schools and IHEs should always promote good hand-washing and hygiene practices, including cough and sneezing etiquette and ensuring that tissues are disposed of after usage. Schools should also regularly be sure to clean and disinfect any frequently touched surfaces, following directions on manufacturer's labels, particularly if students or faculty become ill at school. More information on preventing the spread of influenza can be found at: <http://www.cdc.gov/flu/school/>.

Q: What steps should school leadership take when there is a confirmed or probable case of H1N1 flu among students or staff on campus?

A: School leadership need not close schools for a suspected or probable case of H1N1. However, schools should continue good health and hygiene practices around cleaning and disinfecting frequently touched surfaces in the school environment, encouraging sick student and staff to stay home, and actively encouraging good hand washing practices. It is also important to communicate with your faculty, students, and families.

Q: What should school leaders do if a sibling of one of their students has a confirmed case of the H1N1 flu (specifically, a sibling that attends another school)?

A: The current CDC guidance recommends that schools need not close to prevent the spread of disease.

Q: Should we call this H1N1 flu or “swine flu”?

A: H1N1 is the name of this particular strain of influenza. Influenza strains often originate with animals and get transmitted to humans. At this point in the progression of this strain, though, transmission appears to be entirely from human to human. Although it appears to have originated with pigs, then to have passed to humans working around pigs, the virus has combined with components of other types of influenza, including avian and human strains of the virus, to create this particular strain that appears to be easily passed from human to human, which is a concern. The H1N1 virus is not transmitted by food. You cannot get this influenza from eating pork or pork products. Eating properly handled and cooked pork and pork products is safe.

Q: Should we buy special products, like antibacterial soap or hand sanitizer?

A: Schools should always maintain adequate stock of personal hygiene products, including soap. There is no need to purchase special anti-bacterial soap, as regular soap and warm water are sufficient cleansers. Schools may consider purchasing alcohol-based hand gel, which can be used if there is no visible dirt on hands, as long as the gel is alcohol-based. Schools should consider the necessity of providing students adequate time to wash hands during the day, particularly before mealtimes.

SCHOOL CLOSURE

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Q: When a school closes and students are dismissed, how long should the school remain closed, and what exactly does that mean?

A: According to the CDC's May 5th guidance, schools that have been closed can reopen.

Q: Why do experts think that reopening schools is the right step at this time, particularly because the news reports more and more cases of H1N1 flu?

A: Initial cases in the United States were associated with travel to Mexico and many initial cases occurred among school-aged students and were associated with school-based outbreaks. Based on this initial information, CDC recommended school closure to lessen the risk of infection with this novel influenza virus and protect members of the school community from a potentially severe disease.

New information on disease severity led scientists to review the school closure guidance. The majority of U.S. cases have been less severe than initially reported from Mexico with fewer hospitalizations and deaths. CDC and local and state health officials will continue to closely monitor the severity and spread of this novel H1N1 influenza outbreak.

CDC recommends as this time that the focus of school-based efforts should be on early identification of ill students and staff, recommendation to stay home when ill, and good cough and hand hygiene etiquette as the primary means to reduce spread of influenza in schools. Decisions about school closure should be at the discretion of local authorities based on local considerations, including public concern, the impact of school absenteeism, and staffing shortages.

Q: Are there resources to help me figure out how to discuss this situation with my children?

A: Parents should first ask their children what they've heard and what they already know to help address specific concerns and clarify or correct misinformation. It is important for parents to be calm and reassuring and provide as much factually information is developmentally appropriate. Additional FAQs for parents, as well as information about how to talk to your child about this situation, can be found at: <http://www.cdc.gov/h1n1flu/talkingtokids.htm> and http://www.nasponline.org/resources/Talking_With_Children_About_Flu_FINAL.pdf.

Q: What should schools do if standardized testing is planned but they have suspected cases of H1N1 flu?

A: CDC does not recommend widespread school closure based on available scientific information. However, if there is a sufficient number of students absent, the school may want to consider pushing back testing, if at all possible.

Q: If this happens again and we have to close schools and dismiss students, should we plan to continue educating students?

A: Many state and local educational agencies have been working on plans to consider educating students in the event of a prolonged school closure. State pandemic plans may include information about this, as may local plans. Educational resources are also available at www.ed.gov.

Q: Are there resources available to help us start developing partnerships with community entities?

A: Information on developing community resources to support youth can be found at www.findyouthinfo.gov.

EXPOSURE TO MEXICO

Q: If a student took a vacation in Mexico recently, should the student be kept at home?

A: There is no reason to exclude a student from school merely because he or she has recently visited Mexico. If, however, that student shows symptoms of influenza (fever above 37.8°C or

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100°F, accompanied by cough or sore throat), that child should be sent home and advised to stay home for seven days or 24 hours after symptoms subside if longer than seven days.

Q: We have a school trip to Mexico planned, and students and their families are planning to travel to Mexico once school lets out for the summer. Should we cancel?

A: The CDC advises Americans to postpone and avoid all non-essential travel to Mexico until further notice. More information: <http://wwwn.cdc.gov/travel/content/SwineFluMexico.aspx>.

Q: For schools in areas where migrant or seasonal workers are employed, are there additional precautions that should be taken, particularly if those workers are from Mexico?

A: It's important to remember—and to remind students, parents, and staff—that by their very nature, viruses are indiscriminate and equal opportunity. No one has immunity to this particular strain of influenza, so everyone is equally at risk of getting sick. Isolating, blaming, discriminating against or otherwise singling out individuals or sub-groups of a school's population is not helpful; using common sense to prevent flu and monitoring for any symptoms is. School leaders should be vigilant about preventing bullying and harassment in schools. Additional information on bullying prevention can be found at: <http://www.stopbullyingnow.org>.

At any school, with any population, school health officials should assess risk and take action appropriately. Schools should continue to maintain clean environments and encourage common-sense preventive measures: wash hands, cover mouths when coughing, and avoid close contact. School closure should be strongly considered where there is a confirmed case of H1N1 flu and may be considered when there is an outbreak in the community

ISOLATING CONFIRMED FLU CASES

Q: When should an infected child (or adult) be allowed to return to school?

A: Students may come back to school after seven days or, if symptoms persist after seven days, they should stay home for 24 hours after symptoms have been gone.

Q: Should special attention be made to cleaning our schools, in light of this outbreak?

A: School leaders should always uphold a high standard of cleanliness in their school buildings. Schools should continue to clean frequently touched surfaces, such as desks, doorknobs, or pencil sharpeners or, for younger children, toys or classroom manipulatives. Schools can use standard products according to directions on the product label. It is not necessary to do extensive cleaning of surfaces where it is not likely that children have touched, such as walls or the insides of lockers, since it is not likely that children will spread germs from these surfaces.

Information about products shown to kill influenza A viruses can be found at: <http://www.epa.gov/oppad001/influenza-disinfectants.html>.

Schools and parents should continue to promote careful hand- washing and covering one's mouth when coughing or sneezing.

Q: Should we hand out masks at school in the future?

A: If someone is coughing and sneezing and is suspected of being infected with H1N1 mask use should be considered. But masks don't entirely prevent the spread of viruses, particularly if they are not fitted to the person wearing it. Students and staff with flu-like symptoms or confirmed cases of the flu should isolate themselves at home, not put on a mask and continue to come to school.

School nurses or those caring for sick students may want to consider wearing OSHA-approved masks (also known as "respirators"). Guidance for health care workers can be found at: <http://www.pandemicflu.gov>.

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SHARING INFORMATION

Q: What sort of information should school leaders share regarding this flu outbreak with parents as well as teachers?

A: Many parents have already heard of the potential for H1N1 flu outbreaks through the media, and as with many sensitive issues, misinformation is always a potential problem. School leaders are trusted figures in a community and should continue to provide accurate, yet not inflammatory, information about the spread of this virus, effects in the school community, and as well as encourage students or staff to stay home if they are sick.

Q: Are school districts permitted to disclose information on affected students to local, State, and Federal authorities in the case of a severe pandemic?

A: Balancing an individual's privacy with public health is important, but there are provisions for sharing such information appropriately between health and education authorities in the event of an emergency. The Family Educational Rights and Privacy Act (FERPA) permits school officials to disclose, without consent, education records, or personally identifiable information from education records, to appropriate parties in connection with an emergency, if knowledge of that information is necessary to protect the health or safety of the student or other individuals. ED provides additional guidance on FERPA and emergencies flu-related emergencies at <http://www.ed.gov/admins/lead/safety/emergencyplan/pandemic/guidance/pan-flu-guidance.pdf>. School officials may contact ED's Family Policy Compliance Office with any questions by calling (202) 260-3887 or by e-mailing FERPA@ed.gov.

Q: I have a question you haven't answered. How can I ask it?

A: E-mail ED's Office of Safe and Drug Free Schools at flu@ed.gov. We will do our best to get you an answer, and we will share the question and response here if we think there would be broad interest. Don't forget, though, that the best guidance on health questions comes from physicians, health agencies and other experts. The Department of Education has relied on their guidance to compile the information we're providing here.

ONLINE RESOURCES FOR SCHOOLS REGARDING FLU and PUBLIC HEALTH

Centers for Disease Control and Prevention:

- H1N1 Flu updates: www.cdc.gov/swineflu
- Recommendations for affected schools and communities: <http://www.cdc.gov/swineflu/mitigation.htm>
- Information on disease prevention and mitigation: <http://www.cdc.gov/flu/school/>
- The Centers for Disease Control and Prevention (CDC) Hotline (1-800-CDC-INFO) is available in English and Spanish, 24 hours a day, seven days a week.

Pandemic Flu.Gov: www.pandemicflu.gov

- State pandemic influenza plans: <http://www.pandemicflu.gov/plan/states/index.html>
- Checklists for schools, communities, and individuals and families: <http://www.pandemicflu.gov/plan/checklists.html>

Department of Education:

- Emergency planning for schools: www.ed.gov/emergencyplan
- Pandemic-specific planning information: <http://www.ed.gov/admins/lead/safety/emergencyplan/pandemic/index.htm>
- Readiness and Emergency Management for Schools' Technical Assistance Center: <http://rems.ed.gov>
- Resources for teaching and learning online: <http://www.free.ed.gov>

World Health Organization:

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- General information about WHO actions: <http://www.who.int>