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Pat Quinn, Governor

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Health Alert Influenza Resources for Schools

9/18/2009

2009 H1N1 (swine) influenza virus continues to circulate throughout the country, and is currently causing outbreaks in schools and universities. Continued circulation of 2009 H1N1 influenza virus is expected this fall and winter in every county in Illinois, and collaboration between schools and local health departments will continue to be an important component of our efforts to minimize the impact of influenza on health and education. In order to provide additional resources for schools and local health departments, the following documents are attached:

1. Guidance, in question and answer format, on tracking influenza-like-illness (ILI) and absenteeism in schools, as well as other issues that have arisen. This document will continue to be updated as necessary.
2. A form that can be used for ongoing monitoring of absenteeism and dismissals. This form is also available in electronic spreadsheet format.
3. A form for reporting to local health departments excessive rates of ILI visits to school nurses.

Please note that many local health departments and school districts may have already established mechanisms for sharing and responding to absenteeism and ILI data. This document provide resource information regarding absenteeism and ILI data for school districts and local health departments that do not have such arrangements in place, or may wish to modify existing processes.

4. Information that can be distributed to parents regarding recognition of manifestations of severe illness, and the importance of medical care for children at risk for complications of influenza. Although mild illness is the most common manifestation of influenza, and can be disruptive to schools, the most concerning aspect of influenza infection is the serious illness that can occur and in many instances can be prevented with prompt and appropriate care. This information, targeted at prevention and care of severe illness, can be distributed along with other, routine influenza prevention messages.
5. Additional guidance for schools, including template letters to parents (in the communications toolkit) is available on the flu.gov website, at <http://flu.gov/professional/school/index.html>.

Please continue to consult with your local health department as needed regarding issues that arise in your schools.

Information on influenza surveillance in Illinois is available at <http://www.idph.state.il.us/flu/fluupdate08-09.htm> ; additional information is available at <http://www.readyillinois.gov> .



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**Illinois Department of Public Health
FAQs: Influenza-like Illness in Schools
Updated 9/16/2009**

Please note that many local health departments and school districts may have already established mechanisms for sharing and responding to absenteeism and ILI data. This document provide resource information regarding absenteeism and ILI data for school districts and local health departments that do not have such arrangements in place, or may wish to modify existing processes.

What is the importance of monitoring influenza-like illness (ILI) occurring among students while they are at school?

ILI defined as fever of ≥ 100 degrees F with cough and/or sore throat This is an important measure to follow, as occurrence of ILI while students are at school is a clear indication that the school is at risk of being a setting for transmission of influenza

How should data regarding ILI occurring during the school day be used?

Schools should coordinate their approach with local health departments. One strategy, which has been useful and sustainable in some schools, is as follows:

- If a school nurse sees five or more cases of ILI in one day, the school sends a letter to parents stressing the need to keep sick children home, for 24 hours after resolution of fever, without use of fever-reducing medications. (In addition, parents should be reminded not to dose children with antipyretics prior to attending school in order to suppress fever.)
- If a school experiences excessive influenza activity — defined as ≥ 5 percent of the student body (at least 10-15 students) being seen by a school nurse for ILI on a single day — a supervising school district nurse should visit the school to assess the situation. Besides shoring up the school's infection control efforts, the school district nurse supervisor should determine whether the school has students whose health conditions place them at high risk of influenza complications. If a school has a high concentration of medically vulnerable children, additional safety measures may be necessary. Schools should report situations with this level of activity to their local health department using the attached form, unless otherwise advised. (Some local health departments have established alternative reporting protocols with their school districts).

If utilized, this approach can be modified based on local conditions and circumstances.

Note: See attached 1) School Respiratory Illness Report Form; and 2) Daily ILI Surveillance Form (also available in spreadsheet format); and 3)Information for parents regarding children at risk for influenza complications, and recognizing signs of serious illness. This may be distributed/re-distributed as appropriate prior to, and during the influenza season.

What is the value of absenteeism monitoring in schools during the upcoming influenza season?

Absenteeism by itself is not a measure of influenza activity, and the value of this information may vary by school/school district. To determine the significance of an increase in absenteeism, calls to students' (or a sample of students') homes are typically necessary to determine the reason, as absenteeism may be due to numerous causes. As an alternative, consider collecting information about the reason for absenteeism when parents call to report their child will not be attending school.

If absenteeism monitoring is being performed, and there is an increase in absenteeism due to influenza-like-illness (ILI), how would schools use this information?

Absenteeism due to ILI is not necessarily an indication of a transmission risk at the school. In so far as a key objective for schools is to have ill students stay home, ILI absenteeism is an indicator that parents are adhering to recommendations about non-attendance for students with ILI.

If it is determined that during a number (e.g., 5) students from the same group (e.g., a single grade, classroom, athletic team, arts club etc.) are absent within a given time frame (e.g., 1 week) due to ILI, schools may choose to provide information to parents of other members of the group and .

Some schools may use detection of a general increase (e.g. 5-10% absenteeism due to ILI on a single day) as an indication to reinforce key messages with students, parents, and teachers—e.g., regarding hygiene and staying home when ill, information regarding children at increased risk for influenza complications, and when to seek medical care. Some local health departments and schools may choose to data about influenza like illness occurring locally (including near-by communities) to reinforce key messages. Other schools may choose to continually reinforce key messages with parents and students during the influenza season, even in the absence of increased ILI.

If absenteeism monitoring is being performed, and it is determined that numerous students are absent because of another problem (e.g., skin infections or rash), how would schools use this information?

Suspected outbreaks are reportable to the local health department.

Should schools rely on test results to manage influenza-like illness occurring in schools?

In general, it is prudent to assume that influenza, including H1N1 influenza, is circulating in Illinois communities, and not depend on individual test results as the basis for routine decision making in schools. Problematic aspects of relying upon, and/or waiting for, test results for decision making in a given situation include the following: 1) most individuals with influenza do not seek medical care and are not tested; 2) many physicians rely on rapid tests for decision-making, and these tests may produce false positive and false negative results; 3) turn-around time for influenza PCR test results may be several days.

What are lessons learned from schools that have had outbreaks of ILI?

- Do not require a doctor's note for return to school. This requirement overtaxes busy doctor's offices and emergency departments.
- Eliminate, or relax attendance awards when influenza is circulating, as this may have the unintended consequence of increasing transmission in schools.
- Communicate with parents, teachers, and staff. Aim to provide guidance that is consistent and sustainable. Be absolutely sure that parents are aware that they should seek medical attention for children with ILI who are at risk for severe illness (eg due to age or underlying medical conditions) and children that have signs of serious illness.

Is special environmental cleaning necessary if cases of influenza or ILI occur in a school?

School staff should routinely clean areas that students and staff touch often; cleaning should be performed with the cleaners typically used at the school. **Schools should regularly clean all areas and items that are more likely to have frequent hand contact** (for example, keyboards or desks) and also clean these areas immediately when visibly soiled. Use the cleaning agents that are usually used in these areas. CDC does not believe any additional disinfection of environmental surfaces beyond the recommended routine cleaning is required. See the [American Academy of Pediatrics' *Managing Infectious Diseases in Child Care and Schools: A Quick Reference Guide, 2nd Edition \(2009\)*](#) for guidance on cleaning and sanitizing in schools. The EPA provides a [list of EPA-registered products effective against influenza viruses](#) .

Information for Parents with Children at High Risk for Flu Complications

Children with chronic health problems such as asthma, diabetes, heart disease, metabolic conditions, neurologic and neuromuscular disorders, or who are pregnant are at higher risk of having complications from flu. In addition, all children younger than 5 years old are at higher risk of flu complications compared to older children. **If you are not sure if any of your children are at higher risk for flu complications, please check with a doctor.**

Action steps for parents with children at high risk for flu complications:

- 1. Contact your doctor right away if your child develops influenza-like-illness (fever greater than 100 degrees and cough or sore throat).** This is important because the antiviral medicines used to treat flu work best when started within the first 2 days of getting sick. Your doctor will tell you what special care is needed for your child.
- 2. Talk to your doctor and child's school to develop a plan on how to handle your child's special needs.**
- 3. Get your child vaccinated for seasonal flu and 2009 H1N1 flu when vaccines are available.**
- 4. Follow these steps to prepare for the flu during the 2009-2010 school year:**
 - Plan for child care at home if your child gets sick or their school is dismissed.
 - Plan to monitor the health of the sick child and any other children in the household by checking for fever and other symptoms of flu.
 - Identify a separate room in the house for the care of sick family members.
 - Update emergency contact lists.
 - Collect games, books, DVDs and other items to keep your family entertained if schools are dismissed or your child is sick and must stay home.
- 5. Encourage your child to practice good hygiene, including: covering the nose and mouth with a tissue (or using the upper arm/sleeve) when coughing or sneezing and throwing the tissue in the trash after use, and washing hands often with soap and water – especially after coughing or sneezing.**
- 6. Keep up to date on national and state information and guidance, at <http://www.cdc.gov/h1n1flu/parents/> and www.ready.illinois.gov**



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Information for Parents: Recognizing That A Child May Have Serious Illness due to Influenza

Most illness due to influenza is mild. However, it is important to watch carefully for the signs and symptoms of flu or unusual behavior that may be a sign your child is developing severe illness that needs urgent medical attention. These warning signs include:

- Fast breathing or trouble breathing
- Bluish or gray skin color
- Not drinking enough fluids
- Not urinating or no tears when crying
- Severe or persistent vomiting
- Not waking up or not interacting
- Being so irritable that the child does not want to be held
- Pain or pressure in the chest or abdomen
- Sudden dizziness
- Confusion
- Flu-like symptoms improve but then return with fever and worse cough

If your child has these warning signs, you should obtain urgent medical attention for your child. These warning signs can also occur with illness due to causes other than influenza.

Keep up to date on national and state information and guidance, at <http://www.cdc.gov/h1n1flu/parents/> and www.ready.illinois.gov

School Respiratory Illness Report Form Template

To report excessive influenza activity as defined below, call your local health department and fax this form

Report excessive influenza activity—defined as 5% of the student body (at least 10-15 children) being seen by a school nurse on a single day for influenza -like illness (fever >100 F and new onset sore throat or cough).

Facility Name		Date of Initial Report	
Address, Number, Street	City	State	Zip
Contact Person Name		Phone ()	
Type of Facility <input type="checkbox"/> School <input type="checkbox"/> Daycare <input type="checkbox"/> Other (please specify): _____		Special Ed? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Facility information

Total number of children/students in the school: _____ Total number of staff in the school: _____

What are the business hours for the school/daycare facility? _____AM/PM to _____AM/PM

Is there an onsite healthcare worker (e.g., school nurse)? Yes _____ No _____

If yes, what is his/her schedule? _____

Date excessive influenza activity initially identified ____/____/____	Number of classrooms involved? _____ What grade(s)? _____ Total number of children in those classrooms _____ Overall student absenteeism rate for the school on this date: _____ What percent of absent students have ILI? _____% _____ unknown
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- 1) How many STUDENTS have/had symptoms of illness while at school on the first day that excessive influenza was initially identified _____
- 2) How many STAFF have/had symptoms of illness while at school on the first day that excessive influenza activity was initially identified ? _____
- 3) What are the most common symptoms of illness? Fever Cough Sore Throat Headache
 GI symptoms (nausea, vomiting, diarrhea)
- 4) Did the facility sent ill persons home? Yes No Unknown
- 5) What control steps have been taken or recommended? (check all that apply)
 sent ill students/staff home screened classrooms for others ill
 increased student education/posters sent informational letters to home (**please attach copy**)
 monitored environmental cleaning in-services for staff
 Other: _____
- 6) Have flu vaccines been offered at the school this year? Yes No Unknown
 If Yes, what type? H1N1 ("swine" or "pandemic") Seasonal

Reporter's name (print)	Reporter's signature	Date	Telephone Number ()
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Update Information (refax as requested by LHD)

Of those ill while at school, how many have a known laboratory/physician diagnosis? _____students _____staff
 What were the laboratory test results or physician diagnoses?

How many have been hospitalized? _____ students _____ staff

Has a school district supervising nurse visited the facility? _____

Influenza like illness on subsequent days (refax as requested by LHD)

Date	# of students seen by school nurse with ILI	% absenteeism	% absenteeism due to ILI(if known)

Template: Daily Influenza-Like Illness Surveillance
 Influenza like illness is defined as fever $\geq 100^{\circ}$ F and cough or sore throat

Please note: an electronic spreadsheet is also available for recording this information

School Name _____

Week ending _____

	Monday	Tuesday	Wednesday	Thursday	Friday
Date					
Total School Enrollment					
Number Absent					
Number Absent with ILI (if known)					
% Absent with ILI					
Number Seen by School Nurse with ILI					
% Seen by School Nurse with ILI					

Comments: