



County of San Diego

HEALTH AND HUMAN SERVICES AGENCY

PUBLIC HEALTH SERVICES

1700 PACIFIC HIGHWAY, SAN DIEGO, CALIFORNIA 92101-2417
(619) 531-5800 FAX (619) 515-6707

NICK MACCHIONE, FACHE
DIRECTOR

WILMA J. WOOTEN, M.D., M.P.H.
PUBLIC HEALTH OFFICER

Community Epidemiology
Emergency & Disaster Medical Services
HIV, STD and Hepatitis
Immunization
Maternal, Child and Family Health Services
Public Health Laboratory
PH Nursing/Border Health
TB Control & Refugee Health
Vital Records

September 30, 2009

Dear School District Superintendents:

As we look ahead to the fall and the likelihood of increased influenza illness in San Diego County, we would like to thank you for your assistance to date and request your continued partnership with influenza prevention and response efforts. Influenza is still circulating within the community and across the United States. The CDC has determined that nearly all the circulating influenza virus right now is pandemic 2009 H1N1 influenza.

We would like to request your assistance on the following:

I.) Surveillance

A. *School Absenteeism Reporting*

School absenteeism surveillance is an important gauge of the impact of pandemic 2009 H1N1 influenza on the community and serves to promptly identify schools that might be adversely affected.

PHS would like to request your district's participation in the following:

1. *Notification to public health of any school site exceeding 10% or greater absenteeism. Please report this to the Immunization Branch at 619-515-6620.*
2. *Weekly absenteeism reporting for each district and school site. This composite district report should be reported to Community Epidemiology on Monday for the previous week. This information can be completed using the attached reporting form (or available at www.sdcounty.ca.gov and click on the H1N1 flu link) and emailed to EPIDIV.HHSA@sdcounty.ca.gov or faxed to 858-715-6458.*
3. *Consider participating as a sentinel site contributing Daily Absenteeism Reporting and Tracking (DART) electronically to Community Epidemiology. Participation in this activity would meet the requirements for reporting described in #1 & #2 above. For more information about this, please contact Lacey Hicks at 619-515-6620.*

B. *School Outbreak Reporting*

Please report any suspect influenza outbreaks to public health. The criteria for elementary school reporting is 5 or more students in a classroom or close setting have onset of ILI within a 7 day period. For middle school and high schools, this would be 10 or more students in a close setting for the same time period. These can be reported to Community Epidemiology at 619-515-6620 for further assessment.

II.) Community Mitigation

A. *Prevention*

1. ***Keep sick children at home.*** Please provide ongoing encouragement to parents to keep children with influenza-like illness at home for at least 24 hours after the fever is gone without the aid of fever-reducing medicine. Also, healthy children (having no underlying medical conditions) without severe symptoms should not be directed to see their health care provider or bring a note for return to school.
2. ***Teachers and staff should stay home when sick.*** Encourage teachers and staff to stay home until at least 24 hours after the fever is gone without the aid of fever-reducing medicine. Also, healthy staff (having no underlying medical conditions) without severe symptoms should not be directed to see their health care provider or bring a note for return to work.
3. ***Remind students and staff to practice good hand hygiene.***
4. ***Encourage parents to have their children vaccinated for both seasonal and pandemic 2009 H1N1 influenza as these vaccines become available.***
5. ***Encourage eligible teachers and staff to get vaccinated for both seasonal and pandemic 2009 H1N1 influenza as these vaccines become available.***

B. *Masks*

1. In general, for students and most staff, the use of masks at a school site is not recommended. This would include N95 masks or surgical masks. However, there may be unique situations in which a mask might be recommended. This would include any student currently at school with influenza like illness symptoms (ILI, fever $\geq 100^{\circ}\text{F}$ *and* cough and/or sore throat) who is waiting to be picked up by a parent or guardian.
2. CalOSHA regulations state that healthcare workers should use N95 masks for care of patients with confirmed or suspected pandemic 2009 H1N1 influenza.

III.) Vaccination

Thank you to all of the superintendents and districts that replied to the survey from PHS about your interest in vaccination clinics for pandemic 2009 H1N1 influenza at school sites. There was great interest in partnering for vaccine delivery at school sites. There were also concerns expressed regarding implementing this plan. Listed below are the steps PHS is taking and how schools can help in this endeavor.

- A. PHS is partnering with the University of California, San Diego (UCSD) to provide for coordination of "School-Located Vaccinations." Consultants will be available to meet with individual school districts to provide technical assistance in selecting appropriate vaccination models for the community and determining staffing needed for vaccine stations and non-medical support. We are assembling forms needed such as consent and medical screening to receive the vaccine. County PHS will also be identifying and scheduling clinics and vaccinators.

- B. PHS is in the process of preparing a Memorandum of Agreement with San Diego Unified School District (SDUSD) based on preliminary discussions that have occurred between the District and PHS. When finalized, it may be used as a template or starting point for other districts. The MOA will address the liability of County PHS and school district.
- C. PHS staff will follow-up with all districts including those that did not respond to the survey to clarify questions and verify interest and/or decision not to participate.
- D. PHS is implementing procurement process to identify commercial vaccinators that can be made available to school sites (at no cost to the schools).
- E. The vaccine for pandemic 2009 H1N1 influenza is expected to be available by mid to late October; therefore, the earliest that schools could begin scheduling vaccine clinics likely would not occur before the 2nd week of November. We should plan to continue vaccinating through December and January.
- F. A County survey indicated that over 50% of persons seeking H1N1 vaccine would turn to their private medical home to vaccinate family members. Also, vaccine will be available at retail pharmacies, community health centers, public health centers, and some places of employment. This should be taken into consideration when scheduling clinics in districts with high percentages of insured families who may have multiple options for obtaining vaccination. In these communities, we may consider planning for perhaps one school site that could be a central vaccination location.

IV.) Communication

Due to the established widespread influenza activity within our region, we will not be notifying schools when we become aware of a confirmed case of pandemic 2009 H1N1 influenza. Instead, we will be issuing frequent reminders to districts and the general community about the need to keep sick children and staff home and work with you to monitor absenteeism. If the flu becomes more severe, we will take additional action in collaborating with school districts to mitigate the spread of this disease.

Thank you for your continued patience and flexibility in working with the County Public Health Department as guidelines change to address this new pandemic. For general questions or more information, please call 619-692-8661.

Sincerely,



Wilma J. Wooten, M.D., M.P.H.
Public Health Officer

Cc: Dr. Randolph E. Ward, Superintendent, San Diego County Office of Education
Jeanne Salvadori, Program Specialist-School Nursing Services, San Diego County Office of Education
Dr. Dean Sidelinger, Deputy Public Health Officer, County of San Diego