Pandemic INFLUENZA

Planning and Preparedness Packet

for the Education Community

New York State Department of Health

AWARE PREPARE

KNOWLEDGE IS POWER.

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Important Information From New York State's Health Commissioner

As you may be aware, the global health community is closely monitoring the occurrence of the H5N1 avian influenza virus prevalent throughout Asia, parts of Europe and now Africa. Although it primarily affects birds, there is significant concern that the virus could change to a type that spreads more easily from person to person, producing a worldwide influenza epidemic (referred to as a "pandemic").

Pandemics happen when a new influenza virus emerges to which people have little or no immunity. Although no one knows for sure when the next pandemic will occur, or what new influenza virus will cause a pandemic, the impact on society could be enormous.

An influenza pandemic could circle the globe rapidly and over the course of 2-3 months cause millions to become ill, seriously straining healthcare systems and affecting the ability of government and the private sector to provide essential services. In a severe pandemic, schools and other businesses will experience a dramatic reduction in their work force as one-in-four employees becomes ill and other workers remain home to care for sick family members, or are absent due to child care issues.

The New York State Department of Health's Pandemic Influenza Plan underscores the potential magnitude of a pandemic on New York State. Every local health department in the state is developing their own local plan to implement the strategies outlined in the state plan. You should reach out to your local public health agency for advice and help in getting yourself and your school district prepared.

The State Health Department is pleased to provide you with materials including a K-12 pandemic preparedness checklist, Frequently Asked Questions and educational posters that promote behaviors to help reduce the spread of infectious diseases. I strongly urge you to use them, because preparing for a pandemic response is not something the federal government, or the state government, or your local elected leaders can do alone. Pandemic planning must be everybody's business!

Sincerely yours,

Antonia C. Novello, M.D., M.P.H., Dr. P.H.
Commissioner
New York State Department of Health

MESSAGE TO SCHOOL DISTRICTS:
Pandemic Planning is Everyone's Business!

If you've seen the headlines lately, you may know that health experts are very worried about the possibility of a "pandemic" — a worldwide influenza epidemic. Because pandemics only happen when a brand new flu strain is present, almost nobody would be immune. It would take at least four months to produce a tiny amount of vaccine. Most people would not be able to get vaccinated. Health officials think that 25 percent of the world's population could become ill. Millions would be hospitalized and die. Even those whose symptoms were less severe would be too sick to work. Others would have to stay home to take care of ill family members. Despite the best efforts of government, every part of society would be affected.

AS EMPLOYERS, SHOULD SCHOOL DISTRICTS BE ALARMED?

NO! But you should be concerned enough to take some sensible steps.

FOR INSTANCE?

- Have you thought about how you would continue to operate your schools if up to half of your work force was unavailable at the same time?
- Do you have policies—written or unwritten—that encourage ill employees to come to work? If so, will you change them? (You wouldn't want someone with pandemic flu spreading their germs to co-workers!)
- Can you arrange for alternate supply channels if the ones you usually use are unavailable?

There are many things you can do and it's important to start RIGHT NOW. Find out more at **www.pandemicflu.gov** or **www.nyhealth.gov** or call your local health department.

Pandemic planning is everybody's business!

Pandemic Influenza Frequently Asked Questions

The New York State Department of Health has been working aggressively to develop a detailed plan to prepare for and respond to a possible influenza pandemic. We are moving forward to develop a comprehensive state pandemic plan, in conjunction with other state agencies, local agencies, the healthcare system and the private sector. Although planning will be an ongoing process as the pandemic threat evolves, many facets of pandemic preparedness are already in place as part of our comprehensive initiatives to protect the public health. The following information highlights the answers to the most frequently asked questions about an influenza pandemic:

GENERAL QUESTIONS

Q. What is a pandemic?

A. An influenza pandemic is a global outbreak that results from the emergence of a new influenza virus that can cause serious illness in humans, and spreads easily from person to person.

Q. What's the difference between a pandemic and a seasonal outbreak of influenza?

A. Influenza pandemics are caused by the emergence of a virus that is "novel" (brand new) or radically different from flu viruses that circulated previously. Because people have no or little natural resistance to a new virus, and there is no readily-available vaccine, influenza pandemics often result in much more severe illness and death.

"Seasonal" influenza outbreaks are caused by small changes in the common influenza viruses. Even though these viruses may change slightly from one flu season to another, many people have developed some immunity. Because similar viruses have circulated previously, vaccine is more readily available.

Q. When will the next pandemic occur?

A. Influenza pandemics are known to have occurred several times each century since the Middle Ages. There were three influenza pandemics in the 20th century, in 1918, 1957 and 1968. Experts believe we are overdue for the next influenza pandemic.

No one can predict when a pandemic might occur, but many scientists from around the world are watching the H5N1 avian (bird) influenza situation in Asia and Europe very closely. They are preparing for the possibility that the virus in birds may change and become more easily transmissible among people.

H5N1 AVIAN (BIRD) INFLUENZA

Q. Why is there concern about the H5N1 avian influenza outbreak in Asia and other countries?

A. Although it is unpredictable when the next pandemic will occur, and what strain of flu virus will cause it, the continued and expanded spread of a severe form of avian influenza in birds across eastern Asia and into a few countries in Europe represents a significant threat.

This bird flu virus, known as highly pathogenic "H5N1," has raised concerns about a potential human pandemic because:

- This H5N1 virus is widespread and persistent in poultry in many countries in Asia and has spread to birds in several countries in Europe;
- The virus has been transmitted from birds to a few species of mammals and in some limited circumstances to humans;
- Among humans known to have become infected with the avian H5N1 virus, many have developed serious illness and approximately 50 percent have died;
- Wild birds and domestic ducks have been infected without showing symptoms and have become carriers of viral infection to other domestic poultry species;
- Although most humans who were infected with the H5N1 virus had close contact with infected birds, a few cases of limited person-to-person transmission have been reported;
- Genetic studies confirm that this H5N1 influenza virus, like other influenza viruses, is continuing to change; and
- This H5N1 influenza virus may change in a way that enables it to be easily transmitted from person-to-person.

Q. Is the influenza A (H5N1) virus the only avian influenza virus of concern regarding a pandemic?

Although H5N1 probably poses the greatest current pandemic threat, other avian influenzas have also infected people in recent years. For example, in 1999, human H9N2 infections were identified in Hong Kong; in 2002 and 2003, human H7N7 infections occurred in the Netherlands and human H7N3 infections occurred in Canada. These viruses also have the potential to give rise to the next pandemic.

Q. Will H5N1 cause the next influenza pandemic?

Scientists cannot predict whether the H5N1 avian influenza virus will cause a pandemic. But federal, state and local health officials are working with their counterparts across the world to track H5N1 as it occurs in birds, and to watch for possible human cases.

VACCINE AND ANTIVIRAL MEDICATIONS

Q. Is there a pandemic influenza vaccine?

A. No. Federal officials have contracted with a manufacturer to produce a small supply of human vaccine against H5N1 bird flu, and clinical trials are underway. The vaccine might not be effective if the H5N1 virus changes to a strain that more easily infects humans.

Q. Why isn't there a vaccine available?

A. Large amounts of vaccine cannot be made before knowing exactly which virus is causing a pandemic. Production of a new vaccine takes approximately six months.

Q. Why won't the annual flu vaccine protect people against pandemic influenza?

A. Influenza vaccines are designed to protect against specific viruses that have already been identified, so a pandemic vaccine cannot be produced until a new influenza virus emerges and causes significant human illness. A virus that could cause a pandemic would be very different from the seasonal flu viruses for which there is already vaccine.

Q. Can I get the vaccine once it's developed?

A. Very few people would be able to get vaccinated at first. If a pandemic occurs, federal, state and local governments will work with partner groups to make specific recommendations on the early use of vaccine. Current recommendations are to target limited vaccine supplies to people at high risk and healthcare workers.

Q. What are influenza antiviral medications?

A. These are prescription drugs that can reduce influenza symptoms and shorten the length of time people are sick. The drugs may also make a person less likely to spread influenza to others. To be effective, they must be taken within two days of becoming sick. Some antiviral medications may also be used to prevent influenza if they are taken over a long period of time.

Q. Which antiviral medications would be used in an avian flu pandemic?

A. At this time, Tamiflu® and Relenza® are the most likely antiviral medications to be used in a pandemic caused by the H5N1 virus. The effectiveness of these antivirals would vary depending on the level of resistance an influenza virus may have to one or more of these medications.

Q. Are there enough antiviral medications for everyone if a pandemic occurred now, and if not, who will get them?

A. No. Although the government is stockpiling antiviral medications, there are not enough now for everyone. The federal government has made recommendations about prioritizing who will be the first to receive antiviral medications based on their risk, role in fighting the pandemic, and severity of illness. Discussion continues on the best way to allocate these medications.

Pandemic Influenza Frequently Asked Questions

PREPARING FOR AN INFLUENZA PANDEMIC

Q. What effect would an influenza pandemic have on our communities?

A. The effects of a pandemic could be severe. Many people could become sick at the same time and be unable to go to work. Many of us might have to stay at home to care for sick family members. Schools and businesses might close for a time to try to reduce the spread of disease. Large group gatherings might be canceled. These are examples of challenges that are being considered as we plan for a pandemic response.

Q. What can I do right now to prepare for a possible pandemic?

A. One of the most important things you can do is to help prevent spread of the disease. Begin now to practice simple but important habits that reduce the spread of germs:

- Cover your mouth and nose with a tissue when coughing and sneezing. Throw out the tissue in the nearest wastebasket and wash your hands.
- If you don't have a tissue, don't cough or sneeze into your hand. Instead, cough or sneeze into the crook of your arm so you won't get germs on your hands and spread them to others.
- Wash your hands often with soap and water. When hand washing is not possible, use antiseptic hand gels that contain alcohol.
- Stay at least three feet from people who are coughing or sneezing.
- Always practice good hand washing after contact with an ill person or soiled materials, such as tissues.
- Stay at home when you are sick.
- Keep your children home from school or daycare when they are sick.
- If you go to the doctor's office or emergency department when you are sick, ask for a mask.
- Keep a supply of non-perishable food and other essential household items on hand so you can minimize trips to stores and other crowded places in the event of a pandemic.
- Learn more about the importance of a good home preparedness plan. You can visit the American Red Cross Web site for guidance in preparing one, or visit the federal government's Pandemic Influenza Web site for planning tools.
- Stay informed.

New York State Department of Health's Pandemic Influenza Plan

A **pandemic** is a worldwide epidemic of influenza. Pandemics happen when a **novel influenza** virus emerges to which people have little or no immunity. Although no one knows for sure when the next pandemic will occur, or what new influenza virus will cause a pandemic, experts agree that the potential impact could be enormous.

At present, the World Health Organization and federal health officials are closely watching the **H5N1** highly pathogenic avian influenza **(HPAI)** virus that is prevalent throughout Asia and parts of Europe. Even though it primarily affects birds, there is significant concern that the virus could change to a type that spreads more easily from person-to-person, producing a pandemic.

An influenza pandemic could circle the globe in as little as four days, potentially causing millions to become ill and die, seriously straining healthcare systems and affecting the ability of government and the private sector to provide essential services. *In light of that possibility, health officials at every level—international, national, state and local—are making plans to respond vigorously on all fronts, including here in New York.*

The New York State Department of Health Pandemic Influenza Plan parallels the recently announced national strategy for pandemic influenza, while also addressing New York State's unique characteristics such as our diverse population, our position as an international border state, and the fact that we welcome so many international visitors. It is important to note that this version of the plan reflects the currently available scientific knowledge and data regarding the potential for an influenza pandemic, the expected ramifications on New Yorkers, and the most effective strategies and tactics to support our response. The plan will continually evolve as the pandemic threat unfolds, and as the State and its partners enhance their preparedness.

Potential Magnitude of a Pandemic and the Public's Role

The plan underscores the potential magnitude of a pandemic on New York State. According to the plan's assumptions, a pandemic producing widespread serious illness could severely impact all sectors of society. The health care system would be overburdened; businesses could experience a dramatic reduction in their work force as employees become ill, remain home to care for sick family members, or are absent due to child care issues if schools close for pandemic-induced **snow days**.

One of the most important parts of the plan is educating members of the public about their own critical role. ***It cannot be stressed strongly enough that in a severe pandemic, actions of individuals, businesses and community organizations, as much as those of government, will greatly determine the outcome.*** In the event of a pandemic, people would be urged to help reduce influenza transmission by being diligent about hygiene (washing hands frequently, covering their cough, disinfecting telephones, desktops and other surfaces that people frequently touch). It would also be crucial for individuals with flu-like symptoms to refrain from going to work, school or anywhere else they might spread germs. New Yorkers would be advised to stockpile at least a week's supply of non-perishable food, water, medications and essential household items to avoid having to go out in public if **social distancing** is recommended.

Overview of New York State Department of Health's Pandemic Influenza Plan Contents

New York State's pandemic plan includes the following sections: *Command and Control; Surveillance and Laboratory Diagnostics; Healthcare Planning; Infection Control; Clinical Guidelines; Vaccine Procurement, Distribution and Use; Antiviral Procurement, Distribution and Use; Travel-related Disease Control and Community Prevention; Communications; Training and Education; Work force Support; Highly Pathogenic Avian Influence (HPAI) in Animals, and Public Health Preparedness Informatics*. **Highlights of each section follow.**

Command and Control

- Outlines roles, command structure, and decision-making process.
- Incorporates pandemic plan with New York State's Comprehensive Emergency Management Plan.
- Identifies and addresses legal issues.
- Ensures key stakeholders are informed about necessary infrastructure and resources needed to respond and support essential services.

Surveillance and Laboratory Diagnostics

- Updates surveillance guidelines for local health departments.
- Addresses epidemiologic **surge capacity.**
- Addresses laboratory surge capacity and delineates laboratory testing algorithms.

Healthcare Planning

- Outlines hospital planning for responding to a pandemic, including:
- Communications.
  - Education and training.
  - Occupational health.
  - Hospital triage.
  - Hospital surge capacity.
- Addresses roles of long-term care facilities, home health agencies, emergency medical services, triage centers, primary care providers, and volunteers.
- Addresses mass mortality issues.
- Delineates system for tracking hospital resources.

Infection Control

- Delineates infection control guidelines, including:
- Management of infectious patients.
- Infection control practices for healthcare workers.
- Use of **personal protective equipment (PPE),** patient care equipment.
- Disinfection procedures.
- Occupational health issues.
- Specific guidance for healthcare settings.

Overview of New York State Department of Health's Pandemic Influenza Plan Contents

Clinical Guidelines

- Provides guidance for the evaluation and management of patients with possible novel influenza.
- Delineates clinical presentation of pandemic influenza cases.
- Describes procedures for laboratory testing.
- Describes protocols for treatment with **antiviral medications.**
- Describes protocols for treatment of community-acquired pneumonia.

Vaccine Procurement, Distribution and Use

- Outlines process for prioritization of vaccine.
- Describes a strategy for vaccine acquisition and delivery and development of a system to track supplies and adverse events.
- Describes plans for conducting vaccination clinics, as vaccine becomes available.

Antiviral Procurement, Distribution and Use

- Outlines process for prioritization of antiviral medications.
- Describes a strategy for antiviral acquisition and delivery and development of a system to track supplies and adverse events.

Travel Related Disease Control and Community Containment

- Provides recommendations on containment strategies, including:
  - Travel health alert notices.
  - Isolation and quarantine of new arrivals
  - Restriction or cancellation of non-essential travel.
  - Closures of school and public places (snow days).
- Develops plans for **isolation, quarantine and contact tracing**

Communications

- Describes **social marketing** strategies for risk reduction behaviors (e.g., hand washing, respiratory etiquette, social distancing).
- Outlines development of key messages and pre-positioning of communications products to expedite delivery of information during a pandemic.
- Recommends communication strategies to address the **worried well.**
- Describes mass media and alternate strategies for provision of public information.

Overview of New York State Department of Health's Pandemic Influenza Plan Contents

Training and Education

- Determines the need for and develops trainings for various audiences, including:
  - Local health departments.
  - Physicians, nurses, other healthcare providers.
  - Hospitals, long-term care facilities, community health clinics.
  - Emergency medical services providers.
  - Laboratory directors.
  - Non-medical response partners.

Work force Support

- Ensures psycho-social support services to help workers manage emotional stress during a response to an influenza pandemic, including personal, professional and family issues.
- Addresses preparation of informational materials.

HPAI Avian Influenza in Animals

- Summarizes current capacity and responsibilities for animal surveillance and laboratory testing for HPAI.
- Summarizes disease control activities in domestic poultry or wild bird flocks.

Public Health Preparedness Informatics

- Ensures informatics capabilities systems are in place to support:
  - Alert notifications.
  - Disease surveillance, contact tracing.
  - Tracking vaccine and antiviral supplies.
  - Monitoring vaccine and antiviral adverse events.
  - Tracking hospital resources and needs.

Some Commonly Used "Pandemic Planning" Terms

Pandemic: A worldwide influenza (flu) epidemic.

Antiviral medications: Medicines that can help to lessen the symptoms of diseases that are caused by viruses, such as influenza.

Contact tracing: Looking for people who have been exposed to someone with symptoms of a contagious disease.

H5N1: a severe strain of avian influenza (bird flu) that has killed millions of birds, especially poultry, in dozens of countries—primarily in Asia—and has resulted in some human illness and death. Right now, almost everyone who became ill with H5N1 avian influenza has had close contact with infected birds, but experts are worried that the virus could change so that it spreads more easily from person-to-person, producing a pandemic.

HPAI: Highly pathogenic avian influenza—bird flu that causes severe infection and has a high death rate in birds.

Isolation: Keeping people who are sick with influenza or who have influenza symptoms separate from healthy people.

Novel influenza: A brand new type of influenza virus to which few or no people are immune.

Personal protective equipment (PPE): Gear such as masks and gloves used by healthcare workers to avoid infection when treating patients who have a contagious disease.

Points of Dispensing (PODs): Locations at which mass vaccinations or mass distribution of medicine would be carried out if vaccine and/or antivirals became available.

Quarantine: Keeping people who are not yet ill but who have been exposed to influenza virus separate from people who have not been exposed.

Snow days: In the context of an influenza pandemic, days when schools and other public places will be closed to limit person to person contact and reduce the spread of germs.

Social distancing: In the context of an influenza pandemic, the strategy of limiting person-to-person contact to reduce the spread of germs—for instance, by staying home from work or avoiding public places such as stores.

Social marketing: Employing persuasive tactics such as those used in the advertising and marketing of products to "sell" people on ways to protect their health.

Surge capacity: the ability to handle a much greater than usual amount of work in a very short period of time — for example, if a large number of patients go to a hospital or many laboratory specimens are submitted for testing, all at the same time.

Worried well: Individuals who are experiencing symptoms of a disease because they are anxious or stressed.

School District (K-12) Pandemic Influenza Planning Checklist

Local educational agencies (LEAs) play an integral role in protecting the health and safety of their district's staff, students and their families. The Department of Health and Human Services (HHS) and the Centers for Disease Control and Prevention (CDC) have developed the following checklist to assist LEAs in developing and/or improving plans to prepare for and respond to an influenza pandemic.

Building a strong relationship with the local health department is critical for developing a meaningful plan. The key planning activities in this checklist build upon existing contingency plans recommended for school districts by the U.S. Department of Education (Practical Information on Crisis Planning: A Guide For Schools and Communities **http://www.ed.gov/admins/lead/safety/emergencyplan/crisisplanning.pdf**).

Further information on pandemic influenza can be found at **www.pandemicflu.gov**.

1. Planning and Coordination:

Completed	In Progress	Not Started	
☐	☐	☐	Identify the authority responsible for declaring a public health emergency at the state and local levels and for officially activating the district's pandemic influenza response plan.
☐	☐	☐	Identify for all stakeholders the legal authorities responsible for executing the community operational plan, especially those authorities responsible for case identification, isolation, quarantine, movement restriction, healthcare services, emergency care, and mutual aid.
☐	☐	☐	As part of the district's crisis management plan, address pandemic influenza preparedness, involving all relevant stakeholders in the district (e.g., lead emergency response agency, district administrators, local public health representatives, school health and mental health professionals, teachers, food services director, and parent representatives). This committee is accountable for articulating strategic priorities and overseeing the development of the district's operational pandemic plan.
☐	☐	☐	Work with local and/or state health departments and other community partners to establish organizational structures, such as the Incident Command System, to manage the execution of the district's pandemic flu plan. An Incident Command System, or ICS, is a standardized organization structure that establishes a line of authority and common terminology and procedures to be followed in response to an incident. Ensure compatibility between the district's established ICS and the local/state health department's and state education department's ICS.
☐	☐	☐	Delineate accountability and responsibility as well as resources for key stakeholders engaged in planning and executing specific components of the operational plan. Assure that the plan includes timelines, deliverables, and performance measures.
☐	☐	☐	Work with your local and/or state health department and state education agencies to coordinate with their pandemic plans. Assure that pandemic planning is coordinated with the community's pandemic plan as well as the state department of education's plan.
☐	☐	☐	Test the linkages between the district's Incident Command System and the local/state health department's and state education department's Incident Command System.
☐	☐	☐	Contribute to the local health department's operational plan for surge capacity of healthcare and other services to meet the needs of the community (e.g., schools designated as contingency hospitals, schools feeding vulnerable populations, community utilizing LEA's healthcare and mental health staff). In an affected community, at least two pandemic disease waves (about 6-8 weeks each) are likely over several months.
☐	☐	☐	Incorporate into the pandemic influenza plan the requirements of students with special needs (e.g., low income students who rely on the school food service for daily meals), those in special facilities (e.g., juvenile justice facilities) as well as those who do not speak English as their first language.
☐	☐	☐	Participate in exercises of the community's pandemic plan.
☐	☐	☐	Work with the local health department to address provision of psychosocial support services for the staff, students and their families during and after a pandemic.

1. Planning and Coordination (cont.):

Completed	In Progress	Not Started	
☐	☐	☐	Consider developing in concert with the local health department a surveillance system that would alert the local health department to a substantial increase in absenteeism among students.
☐	☐	☐	Implement an exercise/drill to test your pandemic plan and revise it periodically.
☐	☐	☐	Share what you have learned from developing your preparedness and response plan with other LEAs as well as private schools within the community to improve community response efforts.

2. Continuity of Student Learning and Core Operations:

Completed	In Progress	Not Started	
☐	☐	☐	Develop scenarios describing the potential impact of a pandemic on student learning (e.g., student and staff absences), school closings, and extracurricular activities based on having various levels of illness among students and staff.
☐	☐	☐	Develop alternative procedures to assure continuity of instruction (e.g., web-based distance instruction, telephone trees, mailed lessons and assignments, instruction via local radio or television stations) in the event of district school closures.
☐	☐	☐	Develop a continuity of operations plan for essential central office functions including payroll and ongoing communication with students and parents.

3. Infection Control Policies and Procedures:

Completed	In Progress	Not Started	
☐	☐	☐	Work with the local health department to implement effective infection prevention policies and procedures that help limit the spread of influenza at schools in the district (e.g. promotion of hand hygiene, cough/sneeze etiquette). Make good hygiene a habit now in order to help protect children from many infectious diseases such as flu.
☐	☐	☐	Provide sufficient and accessible infection prevention supplies (e.g., soap, alcohol-based/waterless hand hygiene products, tissues and receptacles for their disposal).
☐	☐	☐	Establish policies and procedures for students and staff sick leave absences unique to a pandemic influenza (e.g., non-punitive, liberal leave).
☐	☐	☐	Establish sick leave policies for staff and students suspected to be ill or who become ill at school. Staff and students with known or suspected pandemic influenza should not remain at school and should return only after their symptoms resolve and they are physically ready to return to school.
☐	☐	☐	Establish policies for transporting ill students.
☐	☐	☐	Assure that the LEA pandemic plan for school-based health facilities conforms to those recommended for health care settings (Refer to www.hhs.gov/pandemicflu/plan).

4. Communications Planning:

Completed	In Progress	Not Started	
☐	☐	☐	Assess readiness to meet communication needs in preparation for an influenza pandemic, including regular review, testing, and updating of communication plans.
☐	☐	☐	Develop a dissemination plan for communication with staff, students, and families, including lead spokespersons and links to other communication networks.
☐	☐	☐	Ensure language, culture and reading level appropriateness in communications by including community leaders representing different language and/or ethnic groups on the planning committee, asking for their participation both in document planning and the dissemination of public health messages within their communities.

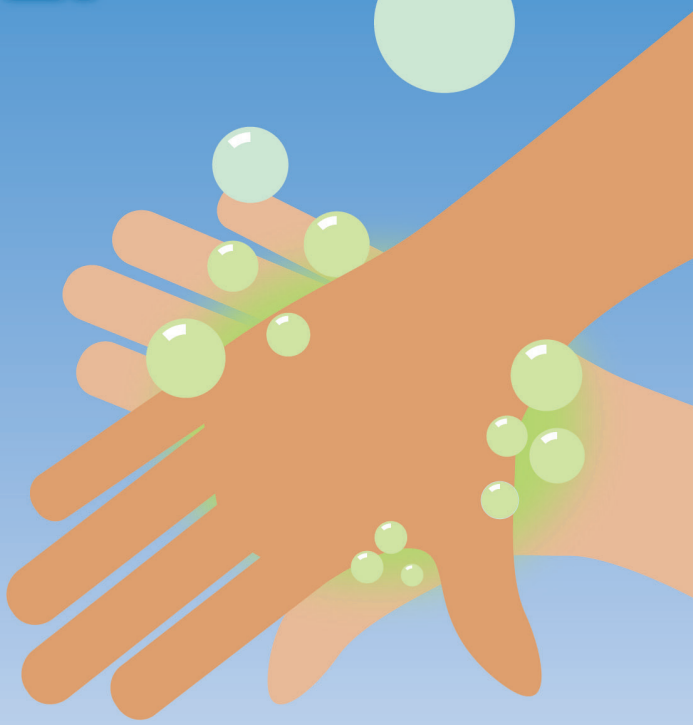
4. Communications Planning (cont.):

Completed	In Progress	Not Started	
☐	☐	☐	Develop and test platforms (e.g., hotlines, telephone trees, dedicated websites, and local radio or TV stations) for communicating pandemic status and actions to school district staff, students, and families.
☐	☐	☐	Develop and maintain up-to-date communications contacts of key public health and education stakeholders and use the network to provide regular updates as the influenza pandemic unfolds.
☐	☐	☐	Assure the provision of redundant communication systems/channels that allow for the expedited transmission and receipt of information.
☐	☐	☐	Advise district staff, students and families where to find up-to-date and reliable pandemic information from federal, state and local public health sources.
☐	☐	☐	Disseminate information about the LEA's pandemic influenza preparedness and response plan (e.g., continuity of instruction, community containment measures).
☐	☐	☐	Disseminate information from public health sources covering routine infection control (e.g., hand hygiene, cough/sneeze etiquette), pandemic influenza fundamentals (e.g., signs and symptoms of influenza, modes of transmission) as well as personal and family protection and response strategies (e.g., guidance for the at-home care of ill students and family members).
☐	☐	☐	Anticipate the potential fear and anxiety of staff, students, and families as a result of rumors and misinformation and plan communications accordingly.

KEEP YOUR GERMS TO YOURSELF

Wash your hands with soap and hot water, or use a waterless hand cleanser after:

- Blowing your nose or coughing
- Using the bathroom
- Being near someone who is ill.



We'll all feel better!

www.nyhealth.gov
www.pandemicflu.gov

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KEEP YOUR GERMS TO YOURSELF

Use a tissue or
cough and sneeze
into your upper arm.

We'll all feel better!

www.nyhealth.gov
www.pandemicflu.gov

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07/06

Keep your germs to yourself.

STAY HOME

and avoid close contact with others.

Think you have the flu?
Think you should try to go
to work or school, anyway?
THINK AGAIN!

www.nyhealth.gov
www.pandemicflu.gov

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