LESSONS LEARNED From School Crises and Emergencies



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H1N1: RESPONDING TO AN OUTBREAK IN NEW YORK CITY SCHOOLS

The New York City public school system is the largest in the nation, with over 1,500 schools and approximately 1.1 million students and 80,000 teachers, spanning across five boroughs with more than 30 districts ranging in size from 7,000 to over 60,000 students each. In addition, there are over 700 private schools and over 80 charter schools in New York City, found in all five boroughs and representing all grade levels. The size and population of individual schools vary widely across the systems. When the H1N1 virus was first identified in New York City schools during the late spring of 2009, the breadth and scope of this school system presented unique issues in the face of a pandemic threat. However, New York City's response to the virus, and experiences gained from the process, are transferable to other cities, schools and systems of all sizes. This document will highlight both the successes and lessons that the New York City public schools learned in responding to the H1N1 virus, and provide important instruction in pandemic planning and response for schools and communities across the nation.

The H1N1 virus was first detected in New York City soon after a number of students from St. Francis Preparatory School in Queens returned from Mexico and exhibited flu-like symptoms. The size of the outbreak resulted in the activation of the Citywide Incident Management System (CIMS), which utilizes an Incident Command Structure.¹ For public health emergencies, such as pandemics, the New York City Department of Health and Mental Hygiene (DOHMH) is the lead city agency, and so it launched a coordinated response according to the DOHMH's *Pandemic Influenza Preparedness* and Response Plan. DOHMH considered school closure as one measure to reduce the impact of the H1N1 epidemic and developed standards for recommending school closure.

DOHMH recommended closure based on evidence of transmission of H1N1 in school. The evidence DOHMH used to recommend school closure came from on-site school nurses who reported the number of students with an influenza-like illness (ILI), defined as fever and one or more flu symptoms. Much of the public, including parents of children attending schools, however, thought that decisions to close should be based on absenteeism and, therefore, expected that schools with very high numbers of absent students would close. This was not the case, rather, the state Department of Education (DOE), in consultation with the mayor, made the final decision to close schools. In cooperation with DOHMH, the DOE closed 54 schools to reduce the transmission of H1N1, and also recommended the closure of three additional nonpublic schools and three charter schools for a total of 60 schools citywide. NYC public schools were closed for no more than five days between the end of April and mid-June, which affected over 33,000 students. DOHMH did not call for "disinfecting" schools, because influenza viruses lives for only short periods on desks and other surfaces. However, the DOE took advantage of the days schools were closed to do a thorough cleaning. While unrelated to the potential spread of the H1N1 virus, such action was reassuring to parents and staff.

Once DOE made the decision to close a school, parents were informed by telephone. Additional information was provided on the DOE and DOHMH Web sites and through emergency call-in lines and letters to parents (written in eight languages). Students with flu-like symptoms were told to stay home. In addition, within a week of the first closure, the NYC Department of Education's Office of Teaching and Learning had assembled learn-at-home

<u>ESSONSLEARNED</u>

¹ ICS is the standardized on-scene emergency management concept specifically designed to allow its user(s) to adopt an integrated organizational structure equal to the complexity and demands of single or multiple incidents without being hindered by jurisdictional boundaries. NIMS and ICS were developed based on lessons learned during actual emergencies. The structure has proven effective in both major and minor emergencies. Utilizing the same system in school emergency plans enables schools to work with first responders in providing a coordinated response to an emergency. For more information on ICS visit the REMS TA Center at http://rems.ed.gov/index.cfm?event=NIMS.

instructional packets for students and families. These learn-at-home instructional activity guides were designed for each grade level from pre-K to grade 8, with an additional packet for grades 9 through 12. These packets provided daily schedules, activities, and Web sites for students to engage in continued learning, including online course work provided via a partnership between NYC public schools and private online learning companies. Guides were accessible online or available for pick-up at centrally located offices.

During the H1N1 pandemic response period, the DOE, DOHMH and Center for Disease Control Web sites served as additional sources of information for parents. The DOE Web site² was used to provide continuing education resources for students and H1N1 FAQs for parents, teachers and community members. The Web site was updated daily with new information, including school closures and attendance reports from each school.

Clear and consistent communication with school leaders was also a vital component of the NYC DOE's response to this emergency. Principals were provided with guidance and support throughout these weeks to help them manage their individual school community needs. Posting information daily helped to manage concern. Daily press conferences with the mayor, the health commissioner and the chancellor were also a key method for conveying information to the public. The appointment of Deputy Chancellor Kathleen Grimm to coordinate all DOE H1N1 initiatives ensured that a common message was transmitted to the public. However, the extraordinary media coverage sometimes created expectations for information and action that were difficult to meet.

A primary lesson learned from this experience from which all LEAs can benefit is that emergency planning is never finished. It is a constant process and one that needs to be reviewed and revised on an ongoing basis. The NYC public schools system was already in the process of updating its emergency plans when the H1N1 virus became apparent in infected students, and now is adding another chapter to the DOE emergency plan specifically related to its experiences this spring with the pandemic flu response. This new chapter will include instructions for step-by-step handling of emergency situations, including H1N1, and will be made available to all school principals both online and in hard copy.

LEAs across the country, and of all sizes, can learn from the experiences of NYC schools in responding to the H1N1 outbreak of spring 2009. Some lessons learned are:

- Communication by school and health officials to the public is key and helps to ensure that the public is as equipped as possible to prevent or mitigate the situation, panic is alleviated, and youths are kept as safe as possible.
- Every effort should be made to keep schools functioning, even through an emergency that requires school closures. This can include providing sustained instructional activities for students, and initiating the school's Continuity of Operations Plan.
- Emergency planning is a continuous process, and updates to plans must be made according to new threats and from lessons learned in responding to those threats. Schools and LEAs everywhere should ensure their emergency plans include provisions for pandemic response, and are updated with the latest lessons learned from the H1N1 outbreak.

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² Access the NYC Department of Education Web site at: http://schools.nyc.gov/Home/Spotlight/swine.htm.

This Lessons Learned publication was written by representatives from the New York City Department of Education during June 2009.

The REMS TA Center was established in October 2007 by the U.S. Department of Education's Office of Safe and Drug-Free Schools (OSDFS). The center supports schools and school districts in developing and implementing comprehensive emergency management plans by providing technical assistance via trainings, publications and individualized responses to requests. For additional information about school emergency management topics, visit the REMS TA Center at http://rems.ed.gov or call 1-866-540-REMS (7367). For information about the REMS grant program, contact Tara Hill (tara. hill@ed.gov) or Sara Strizzi (sara.strizzi@ed.gov).