

## Frequently Asked Questions about H1N1 (school personnel)

The information below is compiled primarily from the Chief Medical Officer's guidelines of the Public Health Agency of Canada (updated August 2009), the American Centre for Disease Control (2009), and in consultation with the GNWT Department of Health and Social Services (HSS). Information on resources referred to in the document is given on the final page.

### **Q. What general information/education about hygiene and hand washing should schools be sharing with staff and families?**

A. Information that helps people stay well; this includes:

- eating a healthy and nutritious diet, getting plenty of sleep and exercise, not smoking, and maintaining a smoke-free household;
- washing hands regularly (i.e. after sneezing and coughing on hands, before and after eating, after play times, after using the washroom, etc...);
- washing hands carefully and for at least 20 seconds; (TIP: have students rub liquid soap all over hands before using water. Most people do a more thorough job if they use soap first and then rub hands under water to wash the soap off);
- using alcohol-based hand cleaners containing at least 60% alcohol;
- use safe practices for coughing or sneezing - use tissues (and then dispose) or cough into your elbow or shoulder;
- avoiding large crowds; and
- getting a vaccine when available.

### **Q. What steps can schools take to keep students and staff from getting sick?**

A. Follow these steps at all times, not just during a flu pandemic:

- Encourage respiratory etiquette by providing all staff and students with:
  - education and reminders about covering coughs and sneezes; and
  - easy access to tissues, running water and soap, or alcohol based hand cleaners.
- Remind staff and student to practice good hand hygiene, give them the time and supplies to wash their hands as needed.
- Keep additional tissue supplies and waste receptacles in classrooms;
- Have all staff on alert to recognize flu symptoms and isolate anyone with flu symptoms. Arrange to have parents/guardians pick up sick students as quickly as possible. Staff members who are ill should be sent home.
- Advise students, staff, and families that sick people must stay at home until at least 24 hours after they no longer have flu symptoms. It is especially important that they no longer have a fever or signs of a fever (this should be determined without the use of fever-reducing medicines, that is, any medicine that contains ibuprofen or acetaminophen.) They should also stay home until they feel well enough to participate in all school activities.

**Q. Should schools purchase hand sanitizers?**

A. If students are using washing facilities properly and regularly, extra hand sanitizers should not be necessary. The correct use of soap and water will do a perfectly good job of preventing the spread of H1N1.

However, if staff members suspect that students are not regularly washing hands and that the presence of hand sanitizer in classrooms and other areas will better students' hygiene, it might be wise and helpful to make it available.

Alcohol based sanitizer (with at least 60% alcohol) is recommended. Note that student allergies to perfumes may make the choice of the non-scented sanitizer preferable. Also note that regular use of alcohol based sanitizer has a drying effect on the skin. Skin that is chapped and sore will pose a transmission risk. A non-alcohol based product is available and we are currently waiting for health officials' "okay" as to whether it can be recommended.

If alcohol based hand rubs are provided to supplement hand washing facilities, we recommend locked dispensers be permanently attached to a wall located in a supervised area.

Again, hand washing with plain soap and water is the preferred method of hand hygiene in schools. The mechanical action is effective at removing visible soil, as well as microbes. If hands are visibly soiled, alcohol based rubs may not be effective at eliminating the influenza virus.

**Q. What extra cleaning measures should janitorial staff make?**

A. Influenza viruses can survive on some surfaces for hours to days but are rapidly destroyed by cleaning. It is recommended that "high touch" surfaces such as doorknobs, stair rails, etc. be carefully cleaned twice daily.

No special disinfectants are required. Regular commercial cleaning products are sufficient.

Schools are advised to increase the frequency of cleaning during school hours, as well as monitoring hand cleaning supplies. Stock all sinks in washrooms, kitchens and classrooms with hand washing supplies at all times (soap and paper towels/ or operating hand dryers).

**Q. What are the symptoms of H1N1 flu?**

A.

- Key signs and symptoms are:
  - Fever (38 degrees C) – although fever may not be prominent in children under 5 years
  - Cough
  - Sore throat
  - Runny/stuffy nose
  
- Other symptoms may include:

Body aches  
Head aches  
Chills  
Fatigue  
Diarrhea or vomiting

**Q. What should schools do when students and staff start showing flu symptoms?**

A. Staff who feel sick should be sent home.

Students who are, or appear, sick (for example, students who appear flushed or to be shivering or sweating) should be moved to a separate room until they can be taken home. It is not advised to let sick children go home on the school bus, as they pose a health risk to other students.

Student in the 'sick room' should be separated from others by a distance of two meters. If using pillows, consider purchasing medical tissue paper that can be changed between students. Use of surgical masks is not recommended, as they create more problems if people do not have the training for their safe use. Consider having buckets available in the sick room as nausea can accompany this flu, particularly in children/youth.

Parents should pick up sick children from school as soon as possible and take them home. Taking students to clinics or nursing stations is not recommended unless they have other medical/ respiratory conditions.

**Q. What if a sick child has to go home on a bus or if the child falls sick while on the bus?**

A. If at all possible, students who are sick should not use school bus services. If this cannot be avoided, and for students who get sick on the bus, bus companies should be advised to have tissues on board so that sick students can cover their mouth and nose. Ideally, a sick child should sit on a bus seat by themselves.

**Q. How long should sick students stay home?**

A. In the current flu conditions, students and staff with flu symptoms should stay home for at least 24 hours after they no longer have fever or do not feel feverish without using fever-reducing drugs.

**Q. What symptoms would alert parents that their child needs to be taken to a medical professional?**

A. Although seeing a medical professional is not recommended when a normally healthy child first falls ill, parents should take a child to see a medical professional if any one of the following symptoms occur:

- shortness of breath, trouble breathing, or blue lips;
- fever for more than three days;
- sluggish behaviour;
- not taking fluids;
- seizures; and
- flu-like symptoms improve but then return with fever and worse cough.

**Q. Which students and staff are at higher risk for complications from the flu?**

A. Anyone can get the flu and serious problems from the flu can happen at any age. However, children under the age of 5, pregnant women, people of any age with chronic medical conditions (such as heart disease, asthma, diabetes, or neuromuscular disorders), and people age 65 and older are more likely to suffer complications from the flu.

**Q. Are there any special considerations for pregnant staff members?**

A. Pregnant women working in or attending schools should follow the same guidance as the general public about, hygiene, routine cleaning and staying home when sick. Pregnant women are at higher risk of complications from flu and should speak to their medical care giver as soon as possible if they develop a flu-like illness to find out whether they should take antiviral flu medications. Any person at high risk for flu complications should do the same. These medications should be taken within the first 48 hours after a person begins to feel unwell. Pregnant women are part of the first priority group to receive the 2009 H1N1 flu vaccine.

**Q. What if teachers suspect that focus on flu is scaring students?**

A. Staff need to communicate the information clearly and within a context of reassurance that lots of people are working hard to keep them safe. Reinforce things that students can do to protect themselves. Staff should model calmness and confidence. Children learn to cope by watching significant adults cope in times of stress. Encourage students to ask questions and allow some time for discussion.

**Q. Will health personnel share information about who is diagnosed with H1N1?**

A. High confidentiality protocols regarding H1N1 diagnosis will be observed even within the health system. Confidentiality protocols that schools have in place regarding any student's health diagnosis must be maintained.

**Q. Should absenteeism levels be reported?**

A. Schools should call their local public health centre when absenteeism of students / staff is 10% greater than normal (pre-flu levels) absenteeism or when unusual or more severe illness is observed.

**Q. What additional steps should schools and families take to keep students and staff from getting sick in the event the flu becomes more severe?**

A. In addition to the steps schools should be taking all the time, if flu conditions become more severe, HSS will advise the following:

- Extend the time sick students or staff members stay home to at least 7 days, even if they feel better sooner. A person who is still sick after 7 days should stay at home until 24 hours after the symptoms have gone away.
- Allow students and staff who are at high risk for flu complications to stay home. These students and staff should make this decision in consultation with their health care provider.
- Screen students and staff for active symptoms upon arrival at the school.
- Increase the social distance between people in the school.

**Q. What can schools do to increase social distance during a more severe flu outbreak?**

A. School officials should think creatively about ways to increase the space between people but still keep students in school. Not everything is feasible for all communities but it is important to consider options for social distancing if schools are going to remain open. Some options are:

- rotating teachers between classrooms while keeping the same group of students in a classroom;
- cancelling classes that bring students together from multiple classrooms;
- moving desks further apart;
- moving classes to larger spaces; and
- reducing time that staffroom is open.

**Q. What steps can schools take to support learning if students are required to stay home for a longer period?**

A. Consider the options for “distance learning” your school is able to support. Some schools and teachers already provide daily homework communication through websites. Using some form of distance education support will make it easier for both the school and students following an absence.

**Q. When should schools make a decision to close?**

A. Although absenteeism rates may interfere with the “learning agenda”, the value of keeping a school open to allow healthy students to remain in a structured environment and away from those who are ill needs to be considered. However, staffing realities, particularly in small communities, may determine that school closure is the only realistic option.

HSS, in collaboration with Health Canada, is carefully monitoring any change/mutation in the virus to determine if school closures are indicated.

**Q. When are vaccinations available and will school personnel be required to get a vaccination?**

A. It is expected that the H1N1 vaccination will be available to the general public in November/December. Vaccination of those at higher risk of flu complications may begin as early as October. It is likely that schools will be the location for vaccination clinics. Whether or not school staff can be required to become vaccinated is currently under review.

**Q. Are there other steps schools and DEC/DEAs should take now to be best prepared?**

Update all student contact information lists in case parents need to pick up a sick child quickly. Update staff contact lists and design a phone tree in case new information needs to be transmitted efficiently.

If possible, DEC/DEAs and schools are advised to increase the number of people on the substitute teaching list. Since it takes a few weeks to complete criminal record checks on prospective substitute teachers, start this process as soon as possible.

It is also important for schools to consider how they will best isolate several students at the same time. What space in the school can accommodate students being separated by the recommended distance? Does the school have gym mats or other suitable temporary padding? Who would be able to supervise students until their parents/ guardian picks them up?

**Q. What other activities are underway to ensure that schools and DEC/DEAs are prepared for serious flu outbreak?**

A. Territorial government health and education personnel and DEC/A personnel are currently working with specially trained pandemic planning advisors to develop comprehensive preparedness plans. This planning will align with territorial level plans and be communicated to all stakeholders.

**Q. Where can school personnel get further information as it becomes available?**

A. The Depart. of Health and Social Services is regularly updating the flu information website found at [www.hlthss.gov.nt.ca](http://www.hlthss.gov.nt.ca) (language choice page, then click on H1N1 button). Links to other helpful sites are posted there. Information is also available by calling the "Flu line" at 1-888-920-3026.

**Resources:**

Supplies referred to in this document can be accessed through “medical equipment and supplies” in the NWT phonebook yellow pages.

To order additional copies of Dept. HSS resources call 867-920-3368.

The brochure “H1N1 Flu Slow the Spread!” can be quickly accessed at:  
(English)

[http://www.hlthss.gov.nt.ca/pdf/brochures and fact sheets/diseases and conditions/2009/english/h1n1 flu slow the spread.pdf](http://www.hlthss.gov.nt.ca/pdf/brochures%20and%20fact%20sheets/diseases%20and%20conditions/2009/english/h1n1%20flu%20slow%20the%20spread.pdf)

(French)

[http://www.hlthss.gov.nt.ca/pdf/brochures and fact sheets/diseases and conditions/2009/french/h1n1 flu slow the spread.pdf](http://www.hlthss.gov.nt.ca/pdf/brochures%20and%20fact%20sheets/diseases%20and%20conditions/2009/french/h1n1%20flu%20slow%20the%20spread.pdf)

Further guidelines on flu care for your self or others, go to <http://www.phac-aspc.gc.ca/alert-alerte/h1n1/guidance-orientation-05-03-eng.php>