

San Fernando Elementary District #35

Pandemic Response Plan



San Fernando School #35

P.O. Box 80

Sasabe, AZ 85633

Pandemic Response Plan



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Purpose

The purpose of this Pandemic Response Plan is to provide a coordinated school response to protect students, staff and the community should a pandemic incident occur in Pima County, Arizona. This plan has been modeled after the plan format recommended in the Guide for Developing High-Quality School Emergency Operations Plans, 2013, for the U.S. Department of Education under contract number EDESE1200036 with Synergy Enterprises, Inc. Madeline Sullivan served as the contracting officer's representative for the Readiness and Emergency Management for Schools (REMS) Technical Assistance (TA) Center. This plan is based on the four phases of emergency management planning which include Mitigation and Prevention, Preparedness, Response and Recovery.

Introduction

One of the greatest and most likely threats to the public's health is a naturally occurring event – an influenza pandemic. Influenza epidemics happen nearly every year (often called seasonal influenza), and cause an average of 36,000 deaths annually in the United States. Influenza epidemics are caused by a few known virus strains that circulate around the world. Over time, people develop immunities to these strains, and vaccines are developed to protect people from serious illness.

Influenza viruses experience frequent, slight changes to their genetic structure. Occasionally, however, they undergo a major change in genetic composition. It is this major genetic shift that creates a “novel” virus and the potential for a pandemic – a global epidemic. The creation of a novel virus means that most, if not all, people in the world will have never been exposed to the new strain and have no immunities to the disease. It also means that new vaccines must be developed and therefore are not likely to be available for months, during which time many people could become infected and seriously ill.

During the 20th century, three pandemics occurred that spread worldwide within a year. The influenza pandemic of 1918 was especially virulent, killing a large number of young, otherwise healthy adults. The pandemic caused more than 500,000 deaths in the United States and more than 40 million deaths around the world. Subsequent pandemics in 1957–58 and 1968-69 caused far fewer fatalities in the U.S., 70,000 and 34,000 deaths respectively, but caused significant illness and death around the world.

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Introduction, cont'd.

The Centers for Disease Control and Prevention (CDC) estimates that in the U.S. alone, an influenza pandemic could infect up to 200 million people and cause between 100,000 and 200,000 deaths. Scientists and health officials throughout the world believe that it is inevitable that more influenza pandemics will occur in the 21st century. Recent cases of human disease caused by a widespread and growing avian influenza outbreak suggest that a new pandemic could be developing at this time.

Planning Assumptions

According to the U.S. Department of Health and Human Services there are several assumptions that must be made regarding a pandemic event.

1. Susceptibility to the pandemic influenza virus will be universal.
2. Efficient and sustained person-to-person transmission signals an imminent pandemic.
3. The clinical disease attack rate will likely be 30 percent or higher in the overall population during the pandemic. Illness rates will be highest among school-aged children (about 40 percent) and decline with age. Among working adults, an average of 20 percent will become ill during a community outbreak.
 - a. Some persons will become infected but not develop clinically significant symptoms. Asymptomatic or minimally symptomatic individuals can transmit infection and develop immunity to subsequent infection.
4. Of those who become ill with influenza, 50 percent will seek outpatient medical care.
 - a. With the availability of effective antiviral drugs for treatment, this proportion may be higher in the next pandemic.

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Planning Assumptions, cont'd.

5. The number of hospitalizations and deaths will depend on the virulence of the pandemic virus. Estimates differ about ten-fold between more and less severe scenarios. Planning should include the more severe scenario.
 - a. Risk groups for severe and fatal infection cannot be predicted with certainty but are likely to include infants, the elderly, pregnant women and persons with chronic medical conditions.
6. Rates of absenteeism will depend on the severity of the pandemic.
 - a. In a severe pandemic, absenteeism attributable to illness, the need to care for ill family members and fear of infection may reach 40 percent during the peak weeks of a community outbreak, with lower rates of absenteeism during the weeks before and after the peak.
 - b. Certain public health measures (closing schools, quarantining household contacts of infected individuals, "snow days") are likely to increase rates of absenteeism.
7. The typical incubation period (interval between infection and onset of symptoms) for influenza is approximately two days.
8. Persons who become ill may shed virus and can transmit infection for up to one day before the onset of illness. Viral shedding and the risk of transmission will be greatest during the first two days of illness. Children usually shed the greatest amount of virus and therefore are likely to pose the greatest risk for transmission.
9. On average, infected persons will transmit infection to approximately two other people.
10. In an affected community, a pandemic outbreak will last about six to eight weeks.
11. Multiple waves (periods during which community outbreaks occur across the country) of illness could occur with each wave lasting two to three months.

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Planning Assumptions, cont'd.

Historically, the largest waves have occurred in the fall and winter, but the seasonality of a pandemic cannot be predicted with certainty.

Mitigation and Prevention

To help with preventing the spread of any infectious disease, schools have an opportunity to educate students, staff, and the community on social etiquette and disease prevention. San Fernando Elementary District #35 has been and will continue to provide continuous education and public health information from the CDC, WHO, and the Arizona State and Pima County Health Department to students, families and other community members in regards to the following health and safety topics:

GENERAL INFLUENZA (PANDEMIC, SEASONAL, AVIAN) INFORMATION

Centers for Disease Control and Prevention (CDC)

<http://www.cdc.gov/flu>

World Health Organization

<http://www.who.int/topics/influenza/en/>

HANDWASHING AND RESPIRATORY ETIQUETTE

Continue to promote proper hygiene with students and staff, including frequent and thorough hand washing; covering coughs and sneezes with tissue or the elbow; and refraining from touching the eyes, nose, and mouth. If soap and water are not readily available, the use of alcohol-based hand sanitizers is recommended.

Centers for Disease Control

<https://www.cdc.gov/flu/school/>

<https://www.cdc.gov/handwashing/why-handwashing.html>

<https://www.cdc.gov/handwashing/videos.html>

National Science Foundation

<https://www.cdc.gov/handwashing/videos.html>

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Mitigation and Prevention, cont'd.

STEPS TO SLOW THE SPREAD IN CASES OF PUBLIC HEALTH INCIDENTS

Avoid Large Groups

People, even those who are well, should stay away from gatherings of people such as sporting events, movies and festivals. During a flu pandemic, these kinds of events could be cancelled because large gatherings of people help spread the flu virus.

Stay at Home or Shelter in Place

People who are sick should stay home. Children should not go to school if they are sick. To limit the spread of disease during a pandemic, staying home will be absolutely necessary. It is extremely important to listen to what your community health leaders are advising and to follow their instructions.

"Sheltering" means to seek shelter (usually in your own home) and remain there during an emergency rather than evacuating the area. During a pandemic, individuals acting out of their own interest would limit their social interaction so they are not exposed to illness. During a pandemic, "sheltering" may be necessary for a period of days or weeks, so it is extremely important that families stock their homes to accommodate a lengthy period of sheltering.

Self-Isolation

Isolation is for people who are already ill. When someone is isolated, they are separated from people who are healthy. Having the sick person isolated (separated from others) can help to slow or stop the spread of disease. Individuals who are isolated can be cared for in their homes, in hospitals or other health care facilities. Isolation is usually voluntary but local, state and federal governments have the power to require the isolation of sick people to protect the public.

Quarantine

Quarantine is for people who have been exposed to the disease but are not sick. When someone is placed in quarantine, they are also separated from others. Even though the person is not sick at the moment, they have been exposed to the disease. They may still become infectious and

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Mitigation and Prevention, cont'd.

spread the disease to others. Quarantine can help to slow this from happening. State and local health departments have the power to enforce quarantines within their borders.

Preparedness

Pandemics differ from the types of emergencies that Arizona schools commonly plan for in that the impact is long-term and beyond the scope of an individual school. Also, a pandemic can result in the closing of schools for a prolonged period of time and/or multiple times because pandemics can occur in waves. Nonetheless, the all-hazards approach that should be employed by schools for emergency management is appropriate for pandemic preparedness. Pandemics should be included as a potential hazard in the school Emergency Operations Plan.

According to the Federal Emergency Management Agency (FEMA), the most common cause of emergency operations failure is poor management, including confusion around roles and responsibilities and unclear lines of authority. To address this deficiency and to facilitate communication with first responders, the use of the Incident Command System (ICS) as the required management system was incorporated into Arizona's Minimum Requirements in 2006.

In addition to the incident management system, a communications plan is critical.

Arizona School Emergency Operations Plans need to include the following:

- How school response team members will communicate with each other and coordinate with the county/tribal health department;
- The systems that will be used to notify school personnel of an emergency and for communication between personnel;
- The systems that will be used for student and parent emergency notifications and information updates; and
- The person(s) responsible for working with the media and procedures for providing the public with accurate, timely, and useful information and instructions throughout the emergency (defined role within ICS).

Additional steps can be taken prior to an emergency that will facilitate communication during the incident when time is of the essence, such as:

- Ensuring that staff contact lists are current;
- On a regular basis, asking parents to notify the school when

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Preparedness, cont'd.

parental contact information changes;

- Developing alternate means of contact for those families who do not have phones or access to email;
- Developing templates for correspondence in advance that at the time of an emergency need only to be modified to include specifics of the current situation.

- The Department of Emergency and Military Affairs and the Arizona Department of Education co-sponsor the Multi-Hazard Safety Program for Schools. This course provides basic knowledge of emergency management principles, ICS, and the tools to design or strengthen school emergency operations plans. Request this course by downloading the event request form at <https://dema.az.gov/emergency-management/preparedness/training>.

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Response

Pandemic flu will be monitored as it progresses throughout the world. This will provide schools with an opportunity to prepare for a local outbreak and response.

A coordinated school response is critical to the health and welfare of the community. It is imperative that all school staff members work to prevent the spread of influenza through proper hygiene. Building administrators shall be responsible to make sure all building staff are properly trained in infection control measures to prevent the spread of the flu. To assist in this process all staff members will be trained in recognition of symptoms that may indicate infection of influenza. Common flu symptoms include:

- Fever 100.0 F or greater (usually high)
- Headache
- Tiredness (can be extreme)
- Cough
- Sore throat
- Runny or stuffy nose
- Body aches
- Diarrhea and vomiting (more common among children than adults)

A person may be infected with influenza and not present these symptoms for several days. A person may or may not present all the aforementioned symptoms of infection.

The school staff will begin identifying students and staff who may be more vulnerable to infection and encouraging them to consult health care professionals regarding additional health / safety precautions. This will also include requesting parents of students who may have an increased level of susceptibility stay home.

Based on recommendations by the CDC and local health authorities any ill students or staff should voluntarily stay home for 7 - 10 days after flu symptoms are present. The district should be prepared to act liberally with sick leave during the pandemic event. At this time the superintendent will determine critical staff needed to maintain the function of the district should a closure be the next option. If critical staff remains in the district during the closure social distancing should be utilized to prevent potential exposure to the influenza virus.

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Response, cont'd.

Should students become ill at school the district may consider busing ill students to a local medical treatment facility for care. The district will make sure that all students have emergency medical authorizations on file.

At this time the district will prepare for full response to the pandemic event. In consultation with local health authorities, other school districts and/or based on mass student and staff absences the district may:

- Cancel all nonacademic events and/or
- Close schools for an extended period of time

AUTHORITY AND DECISION FOR SCHOOL CLOSURE

In Arizona, the authority to close a school lies with its governing body, but in public health emergencies that authority is also granted to county and tribal health departments. When faced with the decision on whether to close schools, school personnel will work with their county or tribal public health departments.

DISTRICT OR CHARTER CLOSURES

If a school district or charter holder (LEA) governing board takes action to close a school due to “widespread illness,” or “situations affecting the safety of persons or property” pursuant to A.R.S. § 15- 806(B), the LEA may request approval from and/or notify the Department of Education. LEAs may submit these requests via email to SFAAnalystTeam@azed.gov.

All requests should include the following information:

- CTDS, Name of School and LEA
- Request for approval of closure
- Period of expected closure
- Reasons for the closure, including those related to widespread illness, safety of persons or property
- Summary of expected hours exceeding the minimum required by A.R.S. § 15-901 prior to the school closure

A school governing board that has taken action to close a school pursuant to another section of law or prior to submitting the request of approval to the department of education should follow the same guidelines in submitting notification of school closure to SFAAnalystTeam@azed.gov.

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Response, cont'd.

The rationale for school closure as a mitigation strategy is to provide social distancing that limits person-to-person transmission of the virus. School closure can assist in virus mitigation only if:

- Students do not congregate in large numbers (greater than five) in other places outside of school; and
- School staff also refrain from congregate events.

The decision of whether to close a school is complex; the potential benefits must be considered along with the societal burden. The Centers for Disease Control and Prevention (CDC) provides guidance to state and local health authorities who formulate policy for their own populations based on local conditions. The policy on school closure may vary by county and is subject to change as more information becomes available.

Under a declared state of emergency, the Governor and the Arizona Department of Health Services (ADHS) also have the authority to close schools.

During the pandemic it would be in the best interest of public health that districts work together regarding closure and cancellation of events.

When preparing to dismiss students for an extended period of time, students should take all academic materials home with them. To the extent possible, prior to school staff being dismissed, lesson plans and materials should be prepared to promote student study at home during school closure.

Various avenues of communication to staff and students' families including building phone trees, email, school websites, and social media applications may be utilized to maintain updated information for all.

SCHOOL INSTRUCTION DURING SCHOOL CLOSURE

To the extent possible, schools are encouraged to continue instruction during periods of school closure due to an influenza pandemic or similar public health emergency. Continued instruction is important to maintain learning, and also to engage students in constructive activities while they are not in school.

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Response, cont'd.

Engaging students to any degree will provide them with a sense of normalcy during a crisis situation, as well as providing a constructive outlet for interaction. Maintaining routine or normal activities during an emergency has been found to be a positive coping measure that assists with recovery following the crisis.

Alternative avenues for continued student instruction to promote students learning at home during school closure may include:

- Printed weekly or monthly lesson packets sent home
- Lessons made available online if internet is available or on flash drive to be sent home

The district will continue to communicate to the community via parent letters, email, social media and/or internet throughout the pandemic response regarding any relevant information leading to recovery and return to normal operations.

Statewide orders to close schools and other community places can/may be declared by the governor at any time. Several states' emergency management plans include closing all schools within the state when there is one confirmed case of pandemic flu in that state.

SPECIAL EDUCATION CONSIDERATIONS

The federal Individuals with Disabilities Education Act (IDEA) requires states to make a free appropriate public education (FAPE) available to all children with disabilities. In the event of a school closure, schools must serve the needs of children with disabilities if the school maintains programs for its general student population. The school must create strategies that provide students with disabilities with educational benefits commensurate with those provided to the general population. If a school does not provide services to its general student population during a school closure, it is not required to provide such services to children with disabilities.

A.R.S. § 26-303(D) & -(E): Globe District v. Board of Health, 1919; ARS § 36-787;
A.R.S. § 26-301.15; ARS § 36-788; A.R.S. § 36-624

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Response, cont'd.

FUNDING CONSIDERATIONS

If a school needs to close because of a pandemic or similar public health emergency following the 100th day of instruction, there is no impact on funding. If high absenteeism is due to a pandemic or similar public health emergency, there is no impact on funding.

All student absences associated with a pandemic or similar public health emergency should be reported as excused. Periods of ten or more consecutive excused absences after accumulating absences greater than 10% of the scheduled instructional days will remain fundable for those instances which occur prior to the 100th day or 200th day as applicable.

Information is subject to change depending on the severity of a pandemic. The Department of Education will continue to work with the Attorney General's Office to evaluate the impact, if any, to school funding for schools that have not reached the 100th day of instruction or for schools on a 200-day calendar.

MAKEUP DAYS

Arizona law requires that LEAs provide at least 180 days of instruction or the equivalent number of minutes regardless of any approved school closure A.R.S. § 15-341.01(A); A.R.S. § 15-341(B). LEAs should make every effort possible to make-up days and instructional hours lost due to a pandemic or similar public health emergency, including extending the school year or increasing instructional time on presently scheduled days. Information is subject to change depending on the severity of a pandemic. The Department of Education will continue to work with the Attorney General's Office to determine the requirements for making up lost instructional time.

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Recovery

The San Fernando School District will communicate and coordinate with the Pima County Health Department, Pima County Department of Education and all agencies involved regarding the determination of when it is safe for the district to resume normal operation. When it is determined to be safe to resume, the district will notify the community in advance by parent letters, email, and social media any information regarding expectations and schedule changes. As the District resumes normal operation it will remain in contact with the Health Department regarding disease surveillance and any need to return to a response mode. It is estimated that pandemic flu will come in waves and it is understood that the recovery process may repeat several times.

The district will prepare in advance of reopening for needs of staff and students. Prior to reopening, in addition to routine maintenance, it is recommended that hard surfaces are cleaned, especially those that are frequently touched such as counters, furniture, door knobs and telephones. Common disinfectants can be used; no extraordinary measures are required. In addition to physical health concerns, students' and employees' mental/emotional health is to be considered. If available, a local mental health professional will be requested in school to assist staff and student needs when school resumes.

The following mental health considerations are to be noted during public health emergencies such as pandemics:

Everyone has different reactions to and ways of coping with difficult events in their lives. Some individuals may need extra support or even professional help. Long-term mental/behavioral health effects may be seen for an extended time after experiencing a pandemic.

POSSIBLE MENTAL HEALTH SYMPTOMS

Some signs that additional help may be needed include:

- Difficulty communicating thoughts
- Difficulty sleeping
- Difficulty maintaining balance
- Easily frustrated
- Increased Use of Drugs/Alcohol
- Limited attention span
- Poor work performance

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Recovery, cont'd.

- Headaches/stomach issues
- Disorientation or confusion
- Depression or despair
- Guilt and/or self-doubt
- Impulse control problems
- Mood swings
- Fear of crowds, strangers, or being alone
- Violence toward self or others

COPING STRATEGIES

- Talking to mental health professional, staff, or someone you feel comfortable with
- Stay active in daily life routines or adjusting them to improve self-care
- Stay connected with family and friends
- Be aware of and limit the amount of television and other news coverage you and your family watch
- Maintain a normal daily routine, limit demanding responsibilities of yourself and others

More extensive recovery plans will depend on the severity and duration of the pandemic, but will include business recovery plans to mitigate education and financial losses, as well as emotional recovery plans as outlined in the Base Plan.

The San Fernando School District will conduct an after-action evaluation of the pandemic response. The evaluation will include recommendations for amendments to the District's currently adopted Pandemic Response Plan as necessary.



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P.O. Box 80

Sasabe, AZ 85633

IMPORTANT TELEPHONE #'S

<i>Port-of-Entry,</i>	<i>520-823-4230</i>
<i>Border Patrol</i>	<i>520-514-4662 / 520-514-4700</i>
<i>Border Patrol liaison-</i>	<i>520-490-4891</i>
<i>San Fernando Elem. School</i>	<i>520-823-4243</i>
<i>Ari.Clinic</i>	<i>520-407-5500</i>
<i>Ari.Human Res.</i>	<i>520-398-2771</i>
<i>Arivaca Fire District</i>	<i>520-398-2003</i>
<i>Arivaca Vet.</i>	<i>520-398-2833</i>
<i>Post Office</i>	<i>520-823-4294</i>
<i>Sheriff's Dept.</i>	<i>520-351-8111</i>
<i>Buenos Aires Wildlife Refuge</i>	<i>520-823-4251</i>
<i>AZ Highway Patrol-DPS-</i>	<i>520-351-4500</i>
<i>Animal Control-</i>	<i>520-243-5900</i>
<i>Poison Control-</i>	<i>800-362-0101</i>
<i>Wildlife Rescue</i>	<i>520-625-5368</i>
<i>TRICO-</i>	<i>520-744-2944 #2</i>
<i>NOAH - Weather</i>	<i>520-881-3333</i>