

Solihull Metropolitan Borough Council

Planning in the Case of an Influenza Pandemic.

NOTE: Whilst there is no reason to believe that a pandemic is imminent, all Government and Health Professionals indications are that at some time in the near future, an emergency situation will arise caused by influenza.

1. Introduction

- 1.1 This guidance sets out a range of information to assist Headteachers in the preparation of plans to deal with flu pandemic and the business continuity of the school or other educational establishment. When a school has anticipated an emergency and made early plans, the response will be more assured than one based upon improvisation.
- 1.2 This guidance is not exhaustive or rigid in its format. It is provided to assist in the development of specific arrangements to support each school's general Emergency Response Plan. It can be adapted, therefore to suit the needs of individual schools or Pupil Referral Units.

2. Aim

- 2.1 To ensure that a flexible and appropriate response to an influenza pandemic is achieved through the essential action outlined in the ***School Pandemic Influenza Action Check List (see Appendix A)***.

3. Objective

- 3.1 To help schools:-
 - Provide accurate, timely and authoritative advice and information to staff, pupils and parents/carers.
 - Reduce the impact of an influenza pandemic on the school community.
 - Minimise the disruption to the provision of education to pupils.

4. Pandemic Influenza

- 4.1 Influenza (flu) pandemics are remarkable events that can rapidly infect virtually all countries at any time of the year. Once international spread begins, pandemics are considered unstoppable, caused as they are by coughing or sneezing. The fact that infected people can shed the virus before symptoms appear adds to the risk of international spread via apparently healthy air travellers.

- 4.2 Flu viruses are constantly changing, producing new strains and varieties. Pandemics occur when a virus emerges that is so different from previously circulating strains that few people, if any, have any immunity to it. This allows it to spread widely and rapidly, causing illness in a high proportion of people.
- 4.3 Three pandemics occurred in the last century; in 1918, 1957 and 1968. Scientists predict that another pandemic will happen, although they cannot say exactly when that will be. It is also difficult to predict just how serious a pandemic will be. It depends on how easily the particular virus spreads, which age groups are affected most, the severity of the symptoms it produces and how many deaths it causes. There may be more than one pandemic wave (with an interval of several months) and if a second wave occurs, it may be more severe than the first. It is likely that pandemic flu will affect far more people than seasonal flu and be a more serious illness. Around a quarter of the population may have been affected by the end of the pandemic.
- 4.4 Once in the UK, a flu pandemic will spread across the country in a matter of weeks and will cause:
- high levels of flu;
 - intense pressure on health services;
 - disruption to many aspects of daily life; and
 - many deaths.
- 4.5 It is unlikely that a vaccine will be available in the early stages of a pandemic occurring in the UK. The lead-time before a new vaccine becomes available in quantity is likely to be at least 4-6 months. Availability will depend upon the production rates achieved. By the time it is available, the pandemic will have been modelled by the World Health Organisation to determine which part of the population is being affected the most. This will help the Coordinating Group/Management Team to decide who in the County Council should be vaccinated first.
- 4.6 In anticipation of flu pandemic, the Government has drawn up an 'Influenza Pandemic Contingency Plan'.

5. Impact

- 5.1 If a pandemic occurs, around a quarter to half of the population could be affected. There may be more than one wave that will peak around week 6 for 2-3 weeks. Each wave will last around 3 months and have several weeks or months in between.
- 5.2 The percentage of those who become ill and who subsequently die could be between 0.37% and 2.5%.
- 5.3 Pandemic flu will spread rapidly in schools. In 1957, for example, up to 50% of schoolchildren developed flu, but even those schools which were most severely disrupted had returned to normal 4 weeks after the appearance of the first case. In residential schools, attack rates reached

90%, often affecting the whole school within a fortnight. Such events will have a major impact upon working parents.

- 5.4 School closures will have a significant impact upon business continuity and the maintenance of essential services, particularly health care, due to parent workers needing to stay at home to provide for childcare.

6. Clinical features of influenza

- 6.1 The clinical features of influenza are:-

- Fever, dry cough and abrupt onset.
- Headache, sore throat, runny or stuffy nose, aching muscles and joints and extreme tiredness also possible.

7. How influenza is spread

- 7.1 Influenza can be spread in the following ways:-

- Adults can be infectious from a day before symptoms begin until about 5 days after illness onset. Typical incubation periods are 1-3 days (typically 2 days)
- Children can be infectious for about 7 days and can infect others for several days before becoming ill.
- The most important routes of transmission are through large droplets (from coughing and sneezing) and direct and indirect contact with infected people, also by hand/face contact or surfaces contaminated with respiratory droplets.
- On hard surfaces the virus is detectable for up to 72 hours but in viable quantities, to be transferable and detectable on hands, for 24 hours.
- Soft surfaces/furnishings: detectable for up to 24 hours but in viable quantities to be transferable and detectable for only 15 minutes.
- Once on hands the virus survives for 5 minutes, but is easily removed by washing or deactivating by alcohol based hand products.

8. Infection Control

- 8.1 Hygiene measures need to be taken to reduce the risk of infection spreading. These include:

- Covering the nose and mouth when coughing or sneezing, disposing of used tissues carefully, sealed in a bag and placed in a bin.

- Hard surfaces should be cleaned at least twice a day using household cleaners, weak bleach solutions or standard detergents. This includes desks, tables, worktops, door handles, phones, keyboards etc.
- Hand hygiene is the single most important practice to reduce the risks of transmission. Staff and students should be encouraged to wash their hands frequently with liquid soap & water for a minimum of 30 seconds and drying with paper towels OR by using alcohol based gels/solutions.
- Parents should be urged to collect children showing signs of infection.

8.2 If someone catches flu, they should:

- stay at home and rest.
- take medicines such as aspirin, ibuprofen or paracetamol to relieve the symptoms (following the instructions with the medicines; children under 16 must not be given aspirin or ready made flu remedies containing aspirin).
- drink plenty of fluids.

8.3 This is both for their own health and to avoid spreading the illness to others.

9. School Closures

9.1 Schools cannot be treated in the same way as other organisations because of the particular needs of children. There is evidence from seasonal flu that children secrete larger quantities of the virus, and for longer, than adults. Their hygiene precautions may also be less effective. Evidence also shows that other infections, for example seasonal flu, spread less among children during school holidays than during term time.

9.2 Depending upon the circumstances at the time, schools may be advised to close for pupils for part of, or all of, a pandemic. Department for Children Schools and Families' (DCSF) advice is, however, that staff should still be asked to continue to work if they are not ill or caring for dependants. This is consistent with Government advice to employers across all employment sectors.

9.3 Schools need to plan to remain open until the pandemic reaches their area and to close, once advice to that effect is received from central government via the local authority.

9.4 When advice to close has been given, the decision on whether to close remains with the school. Normally the governing body would delegate that power to the headteacher. Headteachers could use this power to close their school before this advice is given when, for example, there is a high level of staff absence. The Government believes that where schools are advised to close, headteachers will share the desire to safeguard children's health and will wish to comply with such advice. There are no plans, therefore, to use emergency powers under the Civil Contingency Act 2004 to oblige schools to close.

- 9.5 In Solihull a safe staff-working ratio has been determined as at least one teacher/teaching assistant per class, with one other person available for health and safety purposes.
- 9.6 Class ratios should be based on one adult per 30 pupils.
- 9.7 For short periods of emergency lasting no longer than 1-2 hours, larger staff/pupil ratios may be acceptable but must be based on any ratio of staff to pupils that the school's leadership team considers appropriate and fit for purpose, e.g. while it might be appropriate for the headteacher to take a large number of pupils all together, at the same time, it would not be appropriate for that number to be taken by a non-qualified teacher.
- 9.8 If schools remain open during the period of a pandemic, it is important that they take the measures set out in paragraph 8. above.

10. Sixth Form Colleges and School Sixth Forms

- 10.1 The Government expects Further Education Colleges and Sixth Form Colleges to remain open as far as possible. This expectation also applies to school sixth forms.

11. Special Schools/Residential Special Schools

- 11.1 The DCSF advises that some children in special schools, particularly residential special schools, have complex needs which can be met better in those schools than anywhere else. Such schools will be expected to seek the advice of their designated medical officer and then decide whether the disruption of keeping children out of school outweighs the increased risk of infection within school.

12. Re-opening of a School

- 12.1 If schools close following Government advice, the advice to re-open and any conditions attached to this advice would follow the same communications channels, with the County Council providing the necessary local information.
- 12.2 The Government is currently considering the criteria for determining when schools should re-open. This is likely to be when infection rates reach a sufficiently low level. It is possible that partial re-opening would be advised in the first instance, for example for children who have been infected and who have recovered.

13. Continuing Education for Pupils

- 13.1 In its current guidance the DCSF refers to the Local Authority's statutory duty to provide education 'at school or otherwise' for children who for any

reason (“illness, exclusion or otherwise”) may not for any period receive suitable education unless such arrangements are made for them.

Acknowledging the practical challenges, the current national DCSF guidance suggests that the most practical way to meet this obligation is for school staff to continue to provide support remotely for pupils working from home. For pupils without Internet Access, it is suggested that hard copy work be sent by post to the pupil’s home. Schools are also invited to consider how best to support examination year students.

NB: After consultation with stakeholders and partners, the DCSF intends to look at how it might provide more curricular support at a national level in the event of school closures. Further guidance on this matter is expected in due course in response to representations made by Local Authorities about the practicality of current Government expectations.

14. Business Continuity Management

- 14.1 A business continuity incident is one that interferes with the ability of an organisation to deliver its goods or services.
- 14.2 Cabinet Office guidance (“Contingency Planning for a Possible Influenza Pandemic”) emphasizes the need for Business Continuity plans to include the potential impact of staff absences from work at the peak of the pandemic wave.
- 14.3 Schools need to carry out their own assessments on the basis that staff may be absent from work if:
- They are **ill with flu**
 - They **need to care** for children or other family members
 - They have **non-flu medical problems**
 - Employers have asked staff to **work from home**
 - There are **other reasons**.

15. Recovery Process

- 15.1 The recovery process should be planned in advance. The prior availability of a concise recovery plan can greatly assist the transition back to normality. Some bullet points are provided at **Appendix B, Recovery Action Check List to assist in this process**. These are by no means exhaustive and should be tailored to suit the needs of the school and the prevailing circumstances.

16. Further Information and Links

Appendix C provides a list of organisations that can give information about flu pandemics and the links to them.

School Pandemic Influenza Action Check List

The following list of questions / actions should be resolved in advance of a pandemic alert so that this form can be converted into a workable plan

1. The following members of staff are empowered to make a decision on the closure and re-opening of the school 1).....
or in his/her absence 2).....
or in his/her absence 3).....

2. The Local Authority liaison contact points for Children’s & Young People’s Services is.....

3. The DCSF guidance on infection control has been provided to all staff and added to the curriculum. This will be repeated each term.

4.has been tasked with the provision of infection control materials/equipment as recommended in the DCSF guidance and the following arrangements have been put in place:

5.has been tasked with meeting with the contracted cleaning services (or other stated service provider) to ensure that during a pandemic the provision of service will meet the requirements detailed in the DCSF guidance.

6. During a pandemic the school will communicate with staff, students, parents/carers via the following systems/arrangements:
 - a)
 - b)
 - c)
 - d)

Draft letters and information sheets have been prepared in advance and attached as appendices to this plan. They will also be provided in the following languages:

 - a)
 - b)
 - c)
 - d)

7. Remote learning will be provided by the following arrangements:
 - a)
 - b)
 - c)

8.has been asked to consider how relevant information will be made available to students who are hearing or sight impaired and for those with special educational needs
9. The contact details for staff, including email addresses, are held in hard copy (in case the person responsible is absent) and updated by.....
10. The contact details for students, parents/carers, including email addresses, are held in hard copy (in case the person responsible is absent) and updated by
11. Cover for absent teaching staff will be arranged byor.....
12.has been asked to list non-teaching jobs in priority order and consider job shadowing so that the highest priority jobs can be maintained in the event of staff absences.
13. Cover for absent non-teaching staff will arranged byor.....
14.has been asked to consider what pastoral arrangements need to be put in place for students and staff during or following a pandemic and whether any additional facilities or training could be put in place in advance.
15. A list of willing volunteer helpers who have been CRB checked is maintained by

Appendix B

School Pandemic Influenza Recovery Plan

1. Select a suitable date to re-open the school
2. Ascertain which teaching staff will be available to return to work
3. Ascertain which non-teaching staff will be available to return to work
4. Decide which year groups will return on which dates
5. Adjust curriculum in line with the above
6. Decide which facilities will not be available
7. If applicable, discuss the provision of transport with contracted provider
8. If applicable, discuss the provision of meals with contracted provider
9. Decide which methods of notification will be used e.g. letter, email, local media etc.
10. Record details of the reopening on school answer-phone
11. Ensure that all areas are disinfected prior to reopening to staff or students
12. Consider whether there may be a need for bereavement counselling for both staff and students
13. Consider whether there may be a need for a memorial service.

Further Information and Links

Schools and Children's Services guidance documents:

www.teachernet.gov.uk/humanflupandemic

Government wide planning available from the Department of Health (DOH):

www.dh.gov.uk/pandemicflu

Regional preparedness contacts are at:

www.gos.gov.uk/prepemergencies/preparedness/?a=42496

DCSF / DOH guidance on managing medicines in schools and early years settings:

www.publications.teachernet.gov.uk/default.aspx?PageFunction=productdetails&PageMode=publications&ProductId=DFES-1448-2005

This has a chapter on dealing with medicines safely, including emergency procedures (e.g. staff should never take a child to hospital in their own car; it is safer to call an ambulance). Also see DCSF guidance on First Aid:

www.teachernet.gov.uk/wholeschool/healthandsafety/firstaid

Advice on supporting a school where a pupil has died is at:

www.teachernet.gov.uk/wholeschool/healthandsafety/pupildatay

General background: NHS leaflet for families available from DOH on 08701 555 455 or dh@prolog.uk.com, or at: www.dh.gov.uk/pandemicflu

Information targeted at parents will be at: www.parentscentre.gov.uk or www.direct.gov.uk/Parents/fs/en

The Health Protection Agency website contains more information on relevant issues, including explaining the difference between avian, pandemic and seasonal flu:

www.hpa.org.uk/infections/topics_az/influenza/default.htm

**1. Early Planning :
WHO phases 1 – 4 (see annex i)**

Completed	In Progress	Not Started		Comments
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1.1 Read the guidance, available at www.teachernet.gov.uk/humanflupandemic and share it with others in your school – including staff and governors.	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1.2 Identify who would make any decision on whether to close (and reopen) the school in the case of government advice, staff absence or to prevent the spread of infection (see annex iii for further information).	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1.3 Determine who is the Local Authority (LA) liaison on this issue. [If your LA has a relevant web-page, insert hyper-link here]	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1.4 Read the DfES infection control guidance when it is published early 2007 – will be at www.teachernet.gov.uk/humanflupandemic	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1.5 Check whether your school is suitably equipped with materials needed to implement infection control measures (e.g. tissues and tissue disposal, hot water and soap).	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1.6 Check cleaning arrangements / contracts and whether special provision could be provided during a pandemic.	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1.7 Develop communication and dissemination plans for staff, students, and families, including information about possible closures, any timetable changes, and – where relevant - transport changes. ¹	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1.8 Consider allocating some curriculum time to pandemic flu.	

¹ Possible avenues of communication may include automated phone messages, phone trees, e-mail, Web sites, text-messaging and local media outlets.

**2. Preparedness:
WHO phases 1 - 4**

Completed	In Progress	Not Started	In addition to the steps listed above:	Comments
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2.1 Compile a list of key contacts; including your LA liaison, your local strategic coordinating group (SCG) and others.	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2.2 Check and update pupil and parent/carer contact details. Consider also compiling home email addresses for students and parents/carers who have access to the internet at home.	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2.3 Consider how you might operate in the event of key staff absence (including both teaching and ancillary staff). Review arrangements for covering teaching and non teaching duties.	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2.4 Consider the allocation of responsibilities, duties and cover arrangements during a pandemic, including who would take key decisions in the event of leadership team absence.	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2.5 Review procedures for communicating with staff, students, and families.	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2.6 Consider pastoral needs of the students and staff during a pandemic; are there staff training needs that could be met now?	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2.7 Identify the languages spoken by the student population and their families, and discuss with LA how the information might be made available in those languages. Also consider the needs of blind and deaf students or others with special educational needs.	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2.8 Preplan; develop template letters, both for closure and reopening.	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2.9 Consider developing and testing communications mechanisms in the possible event of school closure e.g. Telephone trees and text messaging services.	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
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<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2.10 Consider compiling a pool of parents / volunteers (who are CRB checked) who could be used to supervise children in times of significant absence.	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2.11 Investigate options with your LA about how students might work from home during a pandemic.	