

Columbus Public Health

Columbus-Franklin County School Nurses Meeting

September 1, 2009

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Your leadership in H1N1 prevention is key to our communities' health. The teamwork between public health and schools will be stronger and more important than ever.

Today's topics:

- Update on H1N1
- Vaccine discussion – **See Nancy Pry's notes.*
- What is working well with your efforts
- School reporting
- Medical Reserve Corps -- **See Nancy Pry's notes.*

We meet with superintendents on 9/11 and want to hear from you about important messages for them.

What we know today

H1N1 is now the dominant influenza strain worldwide.

WHO is advising countries in Northern Hemisphere to prepare for a second wave of pandemic spread.

No signs that the virus has mutated to a more virulent or lethal form.

Limited Tamiflu resistance to date.

Clinical Picture of Pandemic H1N1 today:

- Overwhelming majority with mild illness
- Large number of people remain susceptible
- Impact of pandemic during the second wave could worsen as larger numbers of people become infected. Plan for 3x the number of seasonal flu cases.
 - Those that do get seriously ill require hospitalization, intensive care for respiratory failure.
 - 15% of those in Southern Hemisphere that were hospitalized required intensive care.
 - Most severe cases and deaths have occurred in adults under the age of 50.
- Increased complications with pregnancy. Also obesity, asthma, diabetes and other chronic conditions.
- Impacts minorities – Blacks and Latinos harder (experience in Boston, Chicago)
- Most cases recover without antivirals. If at high-risk, medical care ASAP
- Children 14x more likely to become ill with H1N1 than adults age 60 or older

Spread of Infection

- Respiratory – we can only do so much; goal is to slow the spread
- Over summer – camp transmission
- Outbreaks in elementary schools in August – Kentucky
- Colleges – arriving ill and spreading

No longer count the # of cases – testing limited to hospitalized clusters and a few other situations. Some screening with rapid test for Influenza A, but not specific to H1N1.

Efforts Now:

We need a level of infection control like we have never seen throughout our community. Schools are key to this.

1 in 5 persons connected to schools

- Teach it
- Students follow it
- Staff practice it and monitor adherence
- Ask kids to model it for others
 - o We saw children change the culture with seatbelt use and other key issues.

HW

Sanitizer

Cover your Cough – tissues

Stay home 24 hours after fever – may change if severity increases

Want to saturate our community with IC message

- Workplace and businesses
- Community organizations
- Health care
- Need to start it with the schools

Goal: Keep kids in schools and sick people home

New guidance for schools

- Separate room for ill students away from others
- Mask for ill person and staff member
- Policies need to support staying home when ill whether for sports, testing and extracurricular participation, etc.

If more severe or increased spread, may change guidance in the following situations:

- Special needs school – pregnant teens and medically fragile
- Large # of students/staff ill with flu
- Parents not following guidance – sending kids with fever

Closure

Limited to building vs. school system

The key message is shared responsibility. We have a part – you have a part.

What we will ask of you?

- Champion safe environments throughout schools
 - Students, staff, visitors
 - Sports

Be our eyes and ears – What is needed and what messages are not getting out

Become a voice re: H1N1, education and information
Engage PTOs

What to cover:

What you are doing to keep schools safe and healthy

Review fact sheet

Continue shared responsibility theme with specific actions

- Have students wash hands when come home
- Keep sanitizer in the car
- Cover your Cough video
- Vaccine – what you know