



Winston County Schools
Guidance for Pandemic Preparedness Response



This emergency preparedness planning document addresses how the **State of Alabama Department of Education (ALSDE)** and **Winston County School System (LEA)** respond to pandemic influenza through its School System and Individual School Safety Plan. This document will be periodically reviewed and updated by the ALSDE Pandemic Preparedness Executive Planning Committee to ensure that information contained within the document is consistent with current knowledge and changing infrastructure. The Executive Planning Committee will consist of, but not limited to, the ALSDE **Incident Command System (ICS)** designated officers and chiefs.

Before, during, and after a pandemic influenza outbreak, ALSDE and the LEA systems have a responsibility to ensure the continuation and delivery of essential education services. The appendices of this document contain specific guidance and handouts for pandemic preparedness.

II. Purpose

The ALSDE has drafted this **Pandemic Preparedness Plan (PPP)** to assist the LEAs in preparing and responding to a pandemic outbreak.

III. Assumptions

Pandemic preparedness planning is based on the following general assumptions:

- Susceptibility to the pandemic influenza subtype will be universal.
- The clinical disease attack rate will be 30% in the overall population. Illness rates will be highest among school-aged children (about 40%) and decline with age. Among working adults, an average of 20% will become ill during a community outbreak.
- Of those who become ill with influenza, 50% will seek outpatient medical care.
- The number of hospitalizations and deaths will depend on the virulence of the pandemic virus. Estimates differ about 10-fold between more and less severe scenarios. Because the virulence of the influenza virus that causes the next pandemic cannot be predicted, two scenarios are presented based on extrapolation of past pandemic experience.

Risk groups for severe and fatal infections cannot be predicted with certainty.

- Risk groups for severe and fatal infections cannot be predicted with certainty. During annual fall and winter influenza season, infants and the elderly, persons with chronic illnesses, and pregnant women are usually at higher risk of complications from influenza

infections. In contrast, in the 1918 pandemic, most deaths occurred among young, previously healthy adults.

- The typical incubation period (the time between acquiring the infection until becoming ill), for influenza averages 2 days. We assume this would be the same for a novel strain that is transmitted between people by respiratory secretions.
- Persons who become ill may shed virus and can transmit infection for one-half to one day before the onset of illness. Viral shedding and the risk for transmission will be greatest during the first 2 days of illness. Children will shed the greatest amount of virus and, therefore are likely to pose the greatest risk for transmission.
- On average about 2 secondary infections will occur as a result of transmission from someone who is ill. Some estimates from past pandemics have been higher, with up to about 3 secondary infections per primary case.
- In an affected community, a pandemic outbreak will last about 6 to 8 weeks. At least two pandemic disease waves are likely. Following the pandemic, the new viral subtype is likely to continue circulating and to contribute to seasonal influenza.
- The seasonality of a pandemic cannot be predicted with certainty. The largest waves in the U.S. during 20th century pandemics occurred in the fall and winter. Experience from the 1957 pandemic may be instructive in that the first U.S. cases occurred in June but no community outbreaks occurred until August and the first wave of illness peaked in October.

Pandemic preparedness planning is based on the following ALSDE assumptions:

- In the event of a pandemic the ALSDE will have minimal resources available for LEA assistance, therefore, LEAs will be responsible for school specific pandemic preparedness and response plans, including the modification of this document to be LEA specific.
- Local communities may have emergency preparedness plans and/or pandemic preparedness plans in place. The local community leaders and LEAs will communicate existing plans for effective implementation to minimize the pandemic effect.
- An effective response to pandemic influenza will require coordinated efforts of a wide variety of organizations, including public, private, health, and non-health related.
- The federal government has limited resources allocated for State and local plan implementation, therefore the ALSDE will provide supplementary resources in the event of a pandemic, which may include the redirection of personnel and monetary resources from other programs.
- The federal government has assumed the responsibility for developing materials and guidelines, to include basic communication materials for the general public on influenza, influenza vaccine, antiviral agents, and other relevant topics; information and guidelines for health care providers; and training modules. Until these materials are developed, the ALSDE in conjunction with the Alabama Department of Public Health provide such materials for the LEAs.
- A novel influenza virus strain will likely emerge in a country other than the United States, but could emerge in the United States and possibly Alabama.

- According to the federal government it is highly likely that a moderate to severe shortage and possibly no vaccine will exist early in the course of the pandemic.
- The supply of antiviral medications for prevention and treatment of influenza will be limited.
- Infection control measures, such as, isolating the sick, screening travelers, and reducing the number of public gatherings, may help to slow the spread of influenza early in the pandemic period.
- Federal and State declarations of emergency will change legal and regulatory aspects of providing educational services during a pandemic.
- A pandemic will pose significant threats to the educational process due to wide spread absenteeism.

IV. Pandemic Influenza Phases

The **World Health Organization (WHO)** and the CDC have defined phases of pandemic influenza in order to assist with planning and response activities in states. Identification and declaration of the stages outlined in Table 1 will be done at the national level.

Table 1. WHO Pandemic Phases

WHO PANDEMIC PHASES
<i>Interpandemic period</i>
Phase 1. No new influenza virus subtypes have been detected in humans. An influenza virus subtype that has caused human infection may be present in animals. If present in animals, the risk ^a of human infection or disease is considered to be low.
Phase 2. No new influenza virus subtypes have been detected in humans. However, a circulating animal influenza virus subtype poses a substantial risk ^a of human disease.
<i>Pandemic alert period</i>
Phase 3. Human infection(s) with a new subtype, but no human-to-human spread, or at most rare instances of spread to a close contact.
Phase 4. Small cluster(s) with limited human- to-human transmission but spread is highly localized, suggesting that the virus is not well adapted to humans. ^b
Phase 5. Larger cluster(s) but human-to- human spread still localized, suggesting the virus is becoming increasingly better adapted to humans, but may not yet be fully transmissible (substantial pandemic risk). ^b
<i>Pandemic period</i>
Phase 6. Pandemic phase: increased and sustained transmission in general population. ^b
<i>Postpandemic period</i>
Return to phase interpandemic period.

^a The distinction between *phase 1* and *phase 2* is based on the risk of human infection or disease resulting from circulating strains in animals. The distinction would be based on various factors and their relative importance according to current scientific knowledge. Factors may include: pathogenicity in animals and humans; occurrence in domesticated animals and livestock or only in wildlife; whether the virus is enzootic or epizootic, geographically localized or widespread; other information from the viral genome; and/or other scientific information.

^b The distinction between *phase 3*, *phase 4* and *phase 5* is based on an assessment of the risk of a pandemic. Various factors and their relative importance according to current scientific knowledge may be considered. Factors may include: rate of transmission; geographical location and spread; severity of illness; presence of genes from human strains (if derived from an animal strain); other information from the viral genome; and/or other scientific information.

Reference: WHO/CDS/CSR/GIP/2005.5: WHO global influenza preparedness plan. World Health Organization, Department of Communicable Disease Surveillance and Response. Global Influenza Programme. 2005.

Table 2. LEA Pandemic Influenza Alert Matrix (Epidemic Respiratory Infection)

What type of transmission is confirmed?	Where are the cases?	Are the cases in Alabama/at LEA?	Alert Level
None or sporadic cases only	Anywhere in the world, outside the United States and bordering countries (Canada, or Mexico)	NO	Preparation/Ready (Novel Virus Alert)
Person-to-person transmission	Anywhere outside the United States and bordering countries	NO	Level I-Green (Pandemic Alert)
Person-to-person transmission	In the United States, Canada, and Mexico	NO	Level II-Yellow (Pandemic Imminent)
Person-to-person transmission	In Alabama or bordering states	YES	Level III-Orange (Pandemic)
Person-to-person transmission	In Alabama/at LEA	YES	Level IV-Red (Pandemic)

V. Authority/Legal Preparedness

The ALSDE has designated the **U.S. Department of Health & Human Services (HHS)** to oversee the influenza pandemic planning process in cooperation with local health agencies and partners. During a pandemic, HHS will have primary responsibility for:

- Making recommendations to local health departments, health care providers and facilities, and the general public to aid in minimizing the spread of influenza,
- Maintaining surveillance systems to monitor the spread of disease,
- Keeping the public informed.

While no provision of law addresses pandemic influenza specifically, some statutory provisions authorize relevant actions. The ALSDE and LEAs should be knowledgeable of the following legal issues to effectively plan and respond to influenza pandemic:

- Alabama laws and procedures on quarantine, isolation, closing premises, and suspending public meetings to minimize the spread of the virus.
- Statutes for mandatory vaccination during an infectious disease emergency.
- Medical volunteer licensure, liability, and compensation for ALSDE and LEA health care providers.
- Workers' compensation laws as they apply to health care providers and other essential personnel who have taken antivirals for prophylaxis.

VI. Response Activities by Level of Alertness

A. Level **Ready & Green (LEA alert matrix)/Interpandemic period (WHO)**

1. Access Control
2. Surveillance, Screening and Triage
3. Infection Control/Precautions
4. Communication/Education
5. Additional Preparedness Activities

B. Level **Yellow & Orange (LEA alert matrix)/Pandemic Alert Period (WHO)**

1. Access Control
2. Surveillance, Screening and Triage
3. Infection Control/Precautions
4. Communication/Education
5. Additional Preparedness Activities

C. Level **Red (LEA alert matrix)/Pandemic Period (WHO)**

1. Access Control
2. Surveillance, Screening and Triage
3. Infection Control/Precautions
4. Communication/Education
5. Additional Preparedness Activities

PAGE FOR GUIDANCE IN PREPARATION OF PANDEMIC
PREPAREDNESS PLAN.

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A PANDEMIC PREPAREDNESS MATRIX

PANDEMIC PHASE	Preparedness/Readiness (Novel Virus Alert)	Level I-Green (Pandemic Alert)	Level II- Yellow (Pandemic Imminent)	Level III-Orange (Pandemic)	Level IV-Red (Pandemic)
BOARD OF EDUCATION	<ul style="list-style-type: none"> ● Maintain quarterly contact with the LEA Nurse/Health Officer for updates on the pandemic. ● Develop a plan to distribute personal protective equipment (PPE). ● Develop a plan to monitor periodic cleaning of work areas. ● Develop a plan to report suspected and confirmed cases of the pandemic to the LEA Superintendent, County Health Department, and appropriate medical personnel. ● Identify essential staff and develop contingency plans for operations under prolonged staff shortages or shortages of other resources. 	<ul style="list-style-type: none"> ● Maintain monthly contact with the LEA Nurse/Health Officer for updates on the pandemic. ● Post informational posters that promote respiratory hygiene cough/sneeze etiquette within work area. ● Offer and encourage staff to receive annual on-site influenza vaccine. ● Staff training pandemic awareness. ● Staff training on proper hand hygiene and cough/sneeze etiquette and use of PPE. 	<ul style="list-style-type: none"> ● Maintain weekly contact with the LEA Nurse/Health Officer for updates on the pandemic. ● Distribute PPE to personnel. ● Implement work area periodic cleaning plan. ● Implement the plan for suspected and confirmed cases of pandemic infections. ● Recommend to the LEA Superintendent, to limit or discontinue travel outside of the school district. 	<ul style="list-style-type: none"> ● Maintain daily contact with the LEA Nurse/Health Officer for updates on the pandemic. ● Recommend to the LEA Superintendent, to inform personnel experiencing signs and symptoms of the pandemic to remain at home for 24 hours and/or until released by a physician. ● Recommend to the LEA Superintendent, to limit or discontinue travel within the school district. ● Distribute surgical masks to personnel. ● Notify LEA Superintendent, County Health Department, and appropriate medical personnel of detected cases of the pandemic. 	<ul style="list-style-type: none"> ● Maintain daily or more frequent contact, via web, dedicated phone line, and/or email, with the LEA Nurse/Health Officer for updates on the pandemic. ● The LEA, with guidance from the County Health Department, will identify close contacts in the department to a suspect or confirmed case of the pandemic. Contacts are defined as those who spent >15 minutes within 3 feet of the case during his/her infectious period (2 days before illness onset to five days after illness onset). ● Recommend to the LEA Superintendent, to suspend all work from work areas (Central Office, etc.).

Topics of consideration:

1. Communication (All pandemic information from ICS)
2. Campus Access
3. Educational Delivery/Instruction
4. Extra-Curricular Activities (Events, Field Trips, Athletics, Clubs, Band, etc.)
5. Personnel
6. Emergency Care (Local Lead Nurse and Staff)
7. School Provided Transportation
8. School Operations (Custodial/Cleaning and CNP/Food Services)
9. Financial Affairs

LEA PANDEMIC PREPAREDNESS MATRIX

PANDEMIC PHASE	Preparedness/Readiness (Novel Virus Alert)	Level I-Green (Pandemic Alert) (In addition to Preparedness/Readiness)	Level II- Yellow (Pandemic Imminent) (In addition to Level I)	Level III-Orange (Pandemic) (In addition to Level II)	Level IV-Red (Pandemic) (In addition to Level III)
SUPERINTENDENT OF EDUCATION	<ul style="list-style-type: none"> ● Maintain quarterly contact with the LEA Nurse/Health Officer for updates on the pandemic. ● Develop a plan to distribute personal protective equipment (PPE). ● Develop a plan to monitor periodic cleaning of work areas. ● Develop a plan to report suspected and confirmed cases of the pandemic to the LEA Superintendent, County Health Department, and appropriate medical personnel. ● Identify essential staff and develop contingency plans for operations under prolonged staff shortages or shortages of other resources. 	<ul style="list-style-type: none"> ● Maintain monthly contact with the LEA Nurse/Health Officer for updates on the pandemic. ● Post informational posters that promote respiratory hygiene cough/sneeze etiquette within work area. ● Offer and encourage staff to receive annual on-site influenza vaccine. ● Staff training pandemic awareness. ● Staff training on proper hand hygiene and cough/sneeze etiquette and use of PPE. 	<ul style="list-style-type: none"> ● Maintain weekly contact with the LEA Nurse/Health Officer for updates on the pandemic. ● Distribute PPE to personnel. ● Implement work area periodic cleaning plan. ● Implement the plan for suspected and confirmed cases of pandemic infections. ● Direct the system administrators to limit or discontinue travel outside of the school district. 	<ul style="list-style-type: none"> ● Maintain daily contact with the LEA Nurse/Health Officer for updates on the pandemic. ● Direct the system administrators to inform personnel experiencing signs and symptoms of the pandemic to remain at home for 24 hours and/or until released by a physician. ● Direct system administrators to limit or discontinue travel within the school district. ● Distribute surgical masks to personnel. ● Notify ALSDE, County Health Department, and appropriate medical personnel of detected cases of the pandemic. 	<ul style="list-style-type: none"> ● Maintain daily or more frequent contact, via web, dedicated phone line, and/or email, with the LEA Nurse/Health Officer for updates on the pandemic. ● The LEA, with guidance from the County Health Department, will identify close contacts in the department to a suspect or confirmed case of the pandemic. Contacts are defined as those who spent >15 minutes within 3 feet of the case during his/her infectious period (2 days before illness onset to five days after illness onset). ● Direct system administrators to suspend all work from work areas (Central Office, etc.).

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TECHNOLOGY COORDINATOR	<ul style="list-style-type: none"> ● Maintain quarterly contact with the LEA Nurse/Health Officer for updates on the pandemic. ● Develop a plan to distribute personal protective equipment (PPE). ● Develop a plan to monitor periodic cleaning of work areas. ● Develop a plan to report suspected and confirmed cases of the pandemic to the LEA Superintendent, County Health Department, and appropriate medical personnel. ● Identify essential staff and develop contingency plans for operations under prolonged staff shortages or shortages of other resources. 	<ul style="list-style-type: none"> ● Maintain monthly contact with the LEA Nurse/Health Officer for updates on the pandemic. ● Post informational posters that promote respiratory hygiene cough/sneeze etiquette within work area. ● Offer and encourage staff to receive annual on-site influenza vaccine. ● Staff training pandemic awareness. ● Staff training on proper hand hygiene and cough/sneeze etiquette and use of PPE. 	<ul style="list-style-type: none"> ● Maintain weekly contact with the LEA Nurse/Health Officer for updates on the pandemic. ● Distribute PPE to personnel. ● Implement work area periodic cleaning plan. ● Implement the plan for suspected and confirmed cases of pandemic infections. ● When directed by the LEA Superintendent, limit or discontinue travel outside of the school district. 	<ul style="list-style-type: none"> ● Maintain daily contact with the LEA Nurse/Health Officer for updates on the pandemic. ● When directed by the LEA Superintendent, inform personnel experiencing signs and symptoms of the pandemic to remain at home for 24 hours and/or until released by a physician. ● When directed by the LEA Superintendent, limit or discontinue travel within the school district. ● Distribute surgical masks to personnel. ● Notify LEA Superintendent, County Health Department, and appropriate medical personnel of detected cases of the pandemic. 	<ul style="list-style-type: none"> ● Maintain daily or more frequent contact, via web, dedicated phone line, and/or email, with the LEA Nurse/Health Officer for updates on the pandemic. ● The LEA, with guidance from the County Health Department, will identify close contacts in the department to a suspect or confirmed case of the pandemic. Contacts are defined as those who spent >15 minutes within 3 feet of the case during his/her infectious period (2 days before illness onset to five days after illness onset). ● When directed by the LEA Superintendent, suspend all work from work areas (Central Office, etc.).

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ADMINISTRATIVE ASSISTANT	<ul style="list-style-type: none"> ● Maintain quarterly contact with the LEA Nurse/Health Officer for updates on the pandemic. ● Develop a plan to distribute personal protective equipment (PPE). ● Develop a plan to monitor periodic cleaning of work areas. ● Develop a plan to report suspected and confirmed cases of the pandemic to the LEA Superintendent, County Health Department, and appropriate medical personnel. ● Identify essential staff and develop contingency plans for operations under prolonged staff shortages or shortages of other resources. 	<ul style="list-style-type: none"> ● Maintain monthly contact with the LEA Nurse/Health Officer for updates on the pandemic. ● Post informational posters that promote respiratory hygiene cough/sneeze etiquette within work area. ● Offer and encourage staff to receive annual on-site influenza vaccine. ● Staff training pandemic awareness. ● Staff training on proper hand hygiene and cough/sneeze etiquette and use of PPE. 	<ul style="list-style-type: none"> ● Maintain weekly contact with the LEA Nurse/Health Officer for updates on the pandemic. ● Distribute PPE to personnel. ● Implement work area periodic cleaning plan. ● Implement the plan for suspected and confirmed cases of pandemic infections. ● When directed by the LEA Superintendent, limit or discontinue travel outside of the school district. 	<ul style="list-style-type: none"> ● Maintain daily contact with the LEA Nurse/Health Officer for updates on the pandemic. ● When directed by the LEA Superintendent, inform personnel experiencing signs and symptoms of the pandemic to remain at home for 24 hours and/or until released by a physician. ● When directed by the LEA Superintendent, limit or discontinue travel within the school district. ● Distribute surgical masks to personnel. ● Notify LEA Superintendent, County Health Department, and appropriate medical personnel of detected cases of the pandemic. 	<ul style="list-style-type: none"> ● Maintain daily or more frequent contact, via web, dedicated phone line, and/or email, with the LEA Nurse/Health Officer for updates on the pandemic. ● The LEA, with guidance from the County Health Department, will identify close contacts in the department to a suspect or confirmed case of the pandemic. Contacts are defined as those who spent >15 minutes within 3 feet of the case during his/her infectious period (2 days before illness onset to five days after illness onset). ● When directed by the LEA Superintendent, suspend all work from work areas (Central Office, etc.).

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ADMINISTRATIVE ASSISTANT	<p>INFECTION CONTROL AND PROCEDURES:</p> <ul style="list-style-type: none"> • Monitor national situation through review of WHO (www.who.int/en/), CDC (www.cdc.gov), HHS (www.pandemicflu.gov) and your local health department. • Maintain quarterly contact with the LEA Director of Communications for updates on the pandemic. • Prepare LEA staff training on pandemic awareness (training should be offered for parents). • Prepare LEA staff training for all personnel and students on proper hand hygiene and cough/sneeze etiquette. • Develop a plan to communicate to all staff and visitors the importance of proper hand hygiene and cough/sneeze etiquette (flyers, posters, etc.). • Develop a plan to distribute personal protective equipment (PPE). • Identify and maintain a safe and suitable area to store PPE. • Identify LEA staff to be N-95 respirator fit tested. • Develop a plan to monitor periodic cleaning of work areas, classrooms, cafeteria’s, etc. Develop a plan to report suspected and confirmed cases of the pandemic to your superintendent, county health department, and, appropriate medical personnel. 	<p>INFECTION CONTROL AND PROCEDURES:</p> <ul style="list-style-type: none"> • Maintain monthly contact with the LEA Director of Communications for updates on the pandemic. • Provide pandemic awareness training on pandemic. • Provide student and personnel training on proper hand hygiene and cough/sneeze etiquette. • Post informational posters that promote proper hand hygiene and cough/sneeze etiquette appropriately throughout LEAs buildings, restrooms, elevators, etc. • Identify staff responsible for distributing PPE. • Monitor work areas, classrooms, etc. for cleanliness. • Offer and encourage all personnel to receive annual on-site influenza vaccine. • Identify personnel who will transport ill personnel in emergency situations. • Identify transport vehicles for emergency transport. • Identify triage location for ill personnel in each building. • Reassess all PPE for suitability of use. • Finalize plans for obtaining resources to secure PPE • Finalize the adoption of liberal leave policies. • Visit LEA’s school-based clinics to assess pandemic preparedness. • Inform essential staff members of specific job responsibilities during the pandemic. 	<p>INFECTION CONTROL AND PROCEDURES:</p> <ul style="list-style-type: none"> • Maintain monthly contact with the LEA Director of Communications for updates on the pandemic. • Distribute personnel PPE to work areas and schools. • Implement LEA plan for cleaning work areas. • Limit all un-necessary visits to schools and office buildings. • Implement LEA plan for suspected and confirmed cases of the pandemic. • Limit all travel outside the state when directed by the superintendent. • Implement infection control plans in school-based clinics as identified by CDC. 	<p>INFECTION CONTROL AND PROCEDURES:</p> <ul style="list-style-type: none"> • Maintain daily contact with the LEA Director of Communications for updates on the pandemic. • Implement leave policies that address exclusion of students and personnel with signs and symptoms of the pandemic. • Activate LEAs triage areas. • Limit or discontinue all travel within the State of Alabama. • Distribute appropriate PPE to all personnel and students. • Notify the county health department of detected cases of the pandemic. • Limit or discontinue all meetings, gatherings, field trips, extra curricular activities, etc., until county health department lifts pandemic conditions. • Place identified essential personnel on alert. 	<p>INFECTION CONTROL AND PROCEDURES:</p> <ul style="list-style-type: none"> • Maintain daily or more frequent contact, via web, dedicated phone line, and/or communications for updates on the pandemic. • Identify close contacts in the LEAs divisions and schools, with suspected or confirmed cases of the pandemic, with guidance from the county health department. Contacts are defined as those who spent >15 minutes within 3 feet of the case during his/her infectious period (2 days before illness onset to 5 days after illness onset) • Suspend all work and school until cleared by the superintendent with guidance from the county health department.

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ADMINISTRATIVE ASSISTANT	<p>INFECTION CONTROL AND PROCEDURES (Cont.):</p> <ul style="list-style-type: none"> Identify resources to provide recommended PPE (tissue, soap, alcohol-based cleaner, bleach, ethyl or isopropyl alcohol, mask, and gloves). NOTE: additional equipment may be required in school-based clinics and certain special education classes. School-based clinics are required to follow special infection control guidelines as identified by CDC. Develop liberal leave policies and procedures to address personnel and students with known or suspected cases with pandemic symptoms. Develop policies and procedures to triage, isolate, and transport students or personnel with known or suspected cases with pandemic symptoms. Identify essential staff and develop contingency plans for operations under prolonged staff shortages or shortages of other resources. 	<p>INFECTION CONTROL AND PROCEDURES (Cont.):</p> <ul style="list-style-type: none"> Finalize plans to report cases of suspected and confirmed cases of the pandemic. 			

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LEA PUBLIC INFORMATION OFFICER	<p>Communications:</p> <ul style="list-style-type: none"> ● Maintain quarterly contact with the LEA Nurse/Health Officer for updates on the pandemic. ● Develop a plan to distribute personal protective equipment (PPE). ● Develop a plan to monitor periodic cleaning of work areas. ● Develop a plan to report suspected and confirmed cases of the pandemic to the LEA Superintendent, County Health Department, and appropriate medical personnel. ● Identify essential staff and develop contingency plans for operations under prolonged staff shortages or shortages of other resources. 	<p>Communications:</p> <ul style="list-style-type: none"> ● Maintain monthly contact with the LEA Nurse/Health Officer for updates on the pandemic. ● Post informational posters that promote respiratory hygiene cough/sneeze etiquette within work area. ● Offer and encourage staff to receive annual on-site influenza vaccine. ● Staff training pandemic awareness. ● Staff training on proper hand hygiene and cough/sneeze etiquette and use of PPE. 	<p>Communications:</p> <ul style="list-style-type: none"> ● Maintain weekly contact with the LEA Nurse/Health Officer for updates on the pandemic. ● Distribute PPE to personnel. ● Implement work area periodic cleaning plan. ● Implement the plan for suspected and confirmed cases of pandemic infections. ● When directed by the LEA Superintendent, limit or discontinue travel outside of the school district. 	<p>Communications:</p> <ul style="list-style-type: none"> ● Maintain daily contact with the LEA Nurse/Health Officer for updates on the pandemic. ● When directed by the LEA Superintendent, inform personnel experiencing signs and symptoms of the pandemic to remain at home for 24 hours and/or until released by a physician. ● When directed by the LEA Superintendent, limit or discontinue travel within the school district. ● Distribute surgical masks to personnel. ● Notify LEA Superintendent, County Health Department, and appropriate medical personnel of detected cases of the pandemic. 	<p>Communications:</p> <ul style="list-style-type: none"> ● Maintain daily or more frequent contact, via web, dedicated phone line, and/or email, with the LEA Nurse/Health Officer for updates on the pandemic. ● The LEA, with guidance from the County Health Department, will identify close contacts in the department to a suspect or confirmed case of the pandemic. Contacts are defined as those who spent >15 minutes within 3 feet of the case during his/her infectious period (2 days before illness onset to five days after illness onset). ● When directed by the LEA Superintendent, suspend all work from work areas (Central Office, etc.).

LEA PANDEMIC PREPAREDNESS MATRIX

PANDEMIC PHASE	Preparedness/Readiness (Novel Virus Alert)	Level I-Green (Pandemic Alert) (In addition to Preparedness/Readiness)	Level II- Yellow (Pandemic Imminent) (In addition to Level I)	Level III-Orange (Pandemic) (In addition to Level II)	Level IV-Red (Pandemic) (In addition to Level III)
LEA TRANSPORTATION DIRECTOR	<p>Student Transportation:</p> <ul style="list-style-type: none"> ● Maintain quarterly contact with the LEA Nurse/Health Officer for updates on the pandemic. ● Develop a plan to distribute personal protective equipment (PPE). ● Develop a plan to monitor periodic cleaning of work areas (buses and bus shop). ● Develop a plan to report suspected and confirmed cases of the pandemic to the LEA Superintendent, County Health Department, and appropriate medical personnel. ● Identify essential staff and develop contingency plans for operations under prolonged staff shortages or shortages of other resources. 	<p>Student Transportation:</p> <ul style="list-style-type: none"> ● Maintain monthly contact with the LEA Nurse/Health Officer for updates on the pandemic. ● Post informational posters that promote respiratory hygiene cough/sneeze etiquette within work area. ● Offer and encourage staff to receive annual on-site influenza vaccine. ● Staff training pandemic awareness. ● Staff training on proper hand hygiene and cough/sneeze etiquette and use of PPE. 	<p>Student Transportation:</p> <ul style="list-style-type: none"> ● Maintain weekly contact with the LEA Nurse/Health Officer for updates on the pandemic. ● Distribute PPE to personnel. ● Implement work area periodic cleaning plan. ● Implement the plan for suspected and confirmed cases of pandemic infections. ● When directed by the LEA Superintendent, limit or discontinue travel outside of the school district. 	<p>Student Transportation:</p> <ul style="list-style-type: none"> ● Maintain daily contact with the LEA Nurse/Health Officer for updates on the pandemic. ● When directed by the LEA Superintendent, inform personnel experiencing signs and symptoms of the pandemic to remain at home for 24 hours and/or until released by a physician. ● When directed by the LEA Superintendent, limit or discontinue travel within the school district. ● Distribute surgical masks to personnel. ● Notify LEA Superintendent, County Health Department, and appropriate medical personnel of detected cases of the pandemic. 	<p>Student Transportation:</p> <ul style="list-style-type: none"> ● Maintain daily or more frequent contact, via web, dedicated phone line, and/or email, with the LEA Nurse/Health Officer for updates on the pandemic. ● The LEA, with guidance from the County Health Department, will identify close contacts in the department to a suspect or confirmed case of the pandemic. Contacts are defined as those who spent >15 minutes within 3 feet of the case during his/her infectious period (2 days before illness onset to five days after illness onset). ● When directed by the LEA Superintendent, suspend all transportation and work at the bus shop.

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COORDINATOR OF CURRICULUM & INSTRUCTION	<p>Curriculum Coordinator:</p> <ul style="list-style-type: none"> ● Maintain quarterly contact with the LEA School Nurse(s) for updates on the pandemic. ● Develop a plan to distribute personal protective equipment (PPE). ● Develop a plan to monitor periodic cleaning of system curriculum and instruction areas (e.g. central offices, schools). ● Develop a plan to report suspected and confirmed cases of the pandemic to the LEA Superintendent, County Health Department, and School Nurse(s). ● Identify essential staff and develop contingency plans collaboratively with LEA Technology and Textbook Coordinators for delivering instruction under prolonged staff shortages or shortages of other resources (e.g., preparation of timelines/pacing guides, lesson plans, curriculum plans, use of technology). ● Develop contingency plans collaboratively with LEA Technology and Textbook Coordinators for delivering instruction if schools close (e.g., distribution of timelines/pacing guides, lesson plans, curriculum plans). ● Develop a plan for administering state assessments. ● Develop a plan for communicating to parents and students information regarding instruction delivery, state assessments, and academic competitions. 	<p>Curriculum Coordinator:</p> <ul style="list-style-type: none"> ● Maintain monthly contact with the LEA School Nurse(s) for updates on the pandemic. ● Post informational posters that promote respiratory hygiene, cough/sneeze etiquette within work area. ● Offer and encourage staff to receive annual on-site influenza vaccine. ● Train staff on pandemic awareness. ● Train staff on methods of curriculum delivery. 	<p>Curriculum Coordinator:</p> <ul style="list-style-type: none"> ● Maintain weekly contact with the LEA School Nurse(s) for updates on the pandemic. ● Distribute PPE to appropriate school personnel. ● Implement periodic cleaning plan for school. ● Implement the plan for reporting suspected and confirmed cases of pandemic infections. ● When directed by the LEA Superintendent, limit or discontinue travel outside of the school district. 	<p>Curriculum Coordinator:</p> <ul style="list-style-type: none"> ● Maintain daily contact with the LEA School Nurse(s) for updates on the pandemic. ● When directed by the LEA Superintendent, inform personnel experiencing signs and symptoms of the pandemic to remain at home for 24 hours and/or until released by a physician. ● When directed by the LEA Superintendent, limit or discontinue travel within the school district. ● Distribute surgical masks to appropriate school personnel. ● Notify LEA Superintendent, County Health Department, and School Nurse(s) of detected cases of the pandemic influenza. ● Implement plan for delivering instruction under prolonged staff shortages. 	<p>Curriculum Coordinator:</p> <ul style="list-style-type: none"> ● Maintain daily or more frequent contact, via web, dedicated phone line, and/or email, with the LEA School Nurse(s) for updates on the pandemic. ● The LEA, with guidance from the County Health Department, will identify close contacts in the school system to a suspected or confirmed case of the pandemic. Contacts are defined as those who spent >15 minutes within 3 feet of the case during his/her infectious period (2 days before illness onset to five days after illness onset). ● When directed by the LEA Superintendent, suspend all classes. ● Implement plan for delivering instruction upon the closing of schools.

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LEA FACILITIES DIRECTOR	<p>School Facilities:</p> <ul style="list-style-type: none"> ● Maintain quarterly contact with the LEA Nurse/Health Officer for updates on the pandemic. ● Develop a plan to distribute personal protective equipment (PPE). ● Develop a plan to monitor periodic cleaning of physical spaces. ● Develop a plan to report suspected and confirmed cases of the pandemic to the LEA Superintendent, County Health Department, and appropriate medical personnel. ● Identify essential staff and develop contingency plans for operations under prolonged staff shortages or shortages of other resources. 	<p>School Facilities:</p> <ul style="list-style-type: none"> ● Maintain monthly contact with the LEA Nurse/Health Officer for updates on the pandemic. ● Post informational posters that promote respiratory hygiene cough/sneeze etiquette within work area. ● Offer and encourage staff to receive annual on-site influenza vaccine. ● Staff training pandemic awareness. ● Staff training on proper hand hygiene and cough/sneeze etiquette and use of PPE. 	<p>School Facilities:</p> <ul style="list-style-type: none"> ● Maintain weekly contact with the LEA Nurse/Health Officer for updates on the pandemic. ● Distribute PPE to personnel. ● Implement work area periodic cleaning plan. ● Implement the plan for suspected and confirmed cases of pandemic infections. ● When directed by the LEA Superintendent, limit or discontinue travel outside of the school district. 	<p>School Facilities:</p> <ul style="list-style-type: none"> ● Maintain daily contact with the LEA Nurse/Health Officer for updates on the pandemic. ● When directed by the LEA Superintendent, inform personnel experiencing signs and symptoms of the pandemic to remain at home for 24 hours and/or until released by a physician. ● When directed by the LEA Superintendent, limit or discontinue travel within the school district. ● Distribute surgical masks to personnel. ● Notify LEA Superintendent, County Health Department, and appropriate medical personnel of detected cases of the pandemic. 	<p>School Facilities:</p> <ul style="list-style-type: none"> ● Maintain daily or more frequent contact, via web, dedicated phone line, and/or email, with the LEA Nurse/Health Officer for updates on the pandemic. ● The LEA, with guidance from the County Health Department, will identify close contacts in the department to a suspect or confirmed case of the pandemic. Contacts are defined as those who spent >15 minutes within 3 feet of the case during his/her infectious period (2 days before illness onset to five days after illness onset). ● When directed by the LEA Superintendent, suspend use of facility(s).

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EVENT/VENUE					
Field Trips Clubs Band Gymnasium Football Field Baseball Field Softball Field	<ul style="list-style-type: none"> ● Maintain quarterly contact with the LEA Nurse/Health Officer for updates on the pandemic. ● Develop a plan to distribute personal protective equipment (PPE). ● Develop a plan to monitor periodic cleaning of work areas (buses and bus shop). ● Develop a plan to report suspected and confirmed cases of the pandemic to the LEA Superintendent, County Health Department, and appropriate medical personnel. ● Identify essential staff and develop contingency plans for operations under prolonged staff shortages or shortages of other resources. 	<ul style="list-style-type: none"> ● Maintain monthly contact with the LEA Nurse/Health Officer for updates on the pandemic. ● Post informational posters that promote respiratory hygiene cough/sneeze etiquette within work area. ● Offer and encourage staff to receive annual on-site influenza vaccine. ● Staff training pandemic awareness. ● Staff training on proper hand hygiene and cough/sneeze etiquette and use of PPE. 	<ul style="list-style-type: none"> ● Maintain weekly contact with the LEA Nurse/Health Officer for updates on the pandemic. ● Distribute PPE to personnel. ● Implement work area periodic cleaning plan. ● Implement the plan for suspected and confirmed cases of pandemic infections. ● When directed by the LEA Superintendent, limit or discontinue travel outside of the school district. 	<ul style="list-style-type: none"> ● When directed by the LEA Superintendent, cancel all extra-curricular activities. 	<ul style="list-style-type: none"> ● When directed by the LEA Superintendent, cancel all extra-curricular activities.

***NOTE: In addition to the above procedures, refer to selected sections of your school safety plan that specifically address pandemic influenza (e.g., catastrophic/communicable diseases).**

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ACCESS CONTROL	<ul style="list-style-type: none"> ● Maintain quarterly contact with the LEA Nurse/Health Officer for updates on the pandemic. ● Develop a plan to distribute personal protective equipment (PPE) to access control staff. ● Develop a plan to monitor building access. ● Develop a plan to monitor vendor and visitor access to the facility. ● Develop a plan to report suspected and confirmed cases of the pandemic to the LEA Superintendent, County Health Department, and appropriate medical personnel. ● Identify essential staff and develop contingency plans for operations under prolonged staff shortages or shortages of other resources. ● Staff training on proper hand hygiene and cough/sneeze etiquette and use of PPE. 	<ul style="list-style-type: none"> ● Maintain monthly contact with the LEA Nurse/Health Officer for updates on the pandemic. ● Post informational posters that promote respiratory hygiene cough/sneeze etiquette at access areas. 	<ul style="list-style-type: none"> ● Maintain weekly contact with the LEA Nurse/Health Officer for updates on the pandemic. ● Distribute PPE to access control personnel. ● Implement the plan for suspected and confirmed cases of pandemic infections. ● When directed by the LEA Superintendent, limit or discontinue access to vendors and visitors from outside the school district. 	<ul style="list-style-type: none"> ● Maintain daily contact with the LEA Nurse/Health Officer for updates on the pandemic. ● When directed by the LEA Superintendent, inform access control personnel experiencing signs and symptoms of the pandemic to remain at home for 24 hours and/or until released by a physician. ● When directed by the LEA Superintendent, limit or discontinue access to vendors and visitors from within the school district. ● Distribute surgical masks to access control personnel. ● Notify LEA Superintendent, County Health Department, and appropriate medical personnel of detected cases of the pandemic. 	<ul style="list-style-type: none"> ● Maintain daily or more frequent contact, via web, dedicated phone line, and/or email, with the LEA Nurse/Health Officer for updates on the pandemic. ● The LEA, with guidance from the County Health Department, will identify close contacts within access control to a suspect or confirmed case of the pandemic. Contacts are defined as those who spent >15 minutes within 3 feet of the case during his/her infectious period (2 days before illness onset to five days after illness onset). ● When directed by the LEA Superintendent, suspend all access to the facility(s).

SOURCE: Winston County Board of Education, Double Springs, AL
 APPROVED: May 28, 2009