

**New Jersey Department of Health and Senior Services (NJDHSS) and
New Jersey Department of Education (NJDOE)
School Surveillance Recommendations
November 2, 2009**

In an effort to provide guidance to schools on how to manage influenza illnesses, NJDHSS and NJDOE are providing the below surveillance guidance. Please note that this guidance is based on the assumption that the H1N1 virus circulating this fall will continue to cause mild illness. If H1N1 illnesses become more severe, school surveillance, exclusions and closure recommendations will likely change. Some of these recommendations might include extending the exclusion period of students to 7 days, increasing social distancing measures in schools, and encouraging well students with ill household members to stay home for five days from the day the first household member got sick. If the recommendations do change, NJDHSS and NJDOE will work together to ensure the new recommendations are distributed and posted to our websites.

Prior to any influenza illness occurring in the school, the following actions should be taken:

1. Identify, obtain contact information, and become familiar with the local health department which serves your jurisdiction(s). A list of local health departments can be found at: <http://nj.gov/health/lh/directory/lhdselectcounty.shtml>.
2. With your local health department, discuss routine influenza surveillance activities your school might participate in (e.g., weekly absenteeism reporting).
3. Ensure students and staff are aware of basic infection control precautions.
 - Encourage respiratory etiquette.
 - Encourage hand washing.
 - Encourage parents to keep sick students home.
 - Send sick staff and students home (until 24 hours after fever resolves).
 - Perform routine environmental cleaning. Areas and items that are visibly soiled should be cleaned immediately, and all areas should be regularly cleaned, with a focus on items that are more likely to have frequent contact with the hands, mouths, and bodily fluids of young children (e.g., toys, play areas). See “References” section for additional guidance materials.
 - Ensure proper handling/disposal of used tissues
4. Ensure parents are aware of school exclusion policies if their child becomes ill and provide parents with resources they can refer to for information.
5. Schools should become familiar with the Centers for Disease Control and Prevention (CDC) and NJDHSS guidance documents in case they need to implement the procedures outlined in the documents (see “References” section, below).
6. Identify individuals within the school at high risk for influenza complications, including
 - Individuals with chronic conditions,
 - Pregnant women, and
 - Children <5 years old.

Monitoring and Reporting Guidance

1. Monitor school nurse/medical office visits for students presenting with flu-like illness (i.e., fever $\geq 100^{\circ}\text{F}$ (37.8°C) plus cough and/or sore throat in the absence of another known cause). If the nurse/medical office visits for one day reach or exceed the percentages provided in the chart below for your school population, contact your district office who will reach out to local health officials.

School Population	% of Student Population Reporting to the School Nurse/Medical Office with Influenza-like Illness (ILI)
1200 and above	2%
800-1199	3%
Less than 800	4%

Please note: The above percentages are meant to provide guidance to those schools that might have difficulty determining when to contact local public health officials. They are not meant to replace existing reporting protocols that schools and local health officials might have already established. As the current pandemic evolves, the above reporting guidance may be revised if it is determined that it does not achieve its intended goal of having school officials alert local health officials of a possible ILI outbreak at an appropriate time.

Schools where the school nurse/medical office ILI visits meets or exceeds those described in the chart above should consider the following actions.

1. Work with the district office and local health department to provide the following information: signs, symptoms, grade and class information of those reporting to the school nurse/medical office, absenteeism data for the 7 days prior to the report; predominant reason for call out, number of students/staff ill, total census students/staff, high-risk staff/students (e.g., those who are pregnant or have special needs or chronic underlying medical conditions); and actions already taken by the school (e.g., providing a hand washing in-service, drafting/sending out a parental letter).
2. Consider, at a minimum, monitoring school nurse/medical office visits and absenteeism information on a daily basis. Local health officials can assist with the implementation of appropriate surveillance mechanisms.
3. Symptomatic students should:
 - Be isolated from well individuals,
 - Wear a surgical mask if tolerated and feasible,
 - Be sent home as soon as possible, and
 - Be advised that they may return 24 hours after resolution of fever (without the use of fever-reducing medications).

4. School medical staff should use personal protective equipment when interacting with symptomatic individuals when feasible.
5. Schools should encourage high-risk students and staff who have been in close contacts with individuals who have ILI to contact their healthcare provider for possible prophylaxis. Students who are at high risk of influenza complications but who have not had contact with ILI cases should self-monitor for symptoms and seek medical care promptly if symptomatic.
6. School closures are not recommended unless student/staff absences impede the educational process. Schools should consult their district offices and local health departments if they are considering closure.

References

The following websites can be provided to parents and used as a reference for schools. Guidance is updated on a regular basis and schools should check back frequently for updates.

<http://nj.gov/health/flu/forschool.shtml>

<http://www.state.nj.us/education/schools/security/h1n1/>

<http://www.cdc.gov/h1n1flu/>

<http://nrckids.org>

<http://www.epa.gov/oppad001/influenza-a-product-list.pdf>