Swine-Origin Influenza A (H1N1) Information for Child Care Providers

The Centers for Disease Control and Prevention (CDC) has identified cases of swine-origin influenza A (H1N1) virus infection in people from several states including California, Kansas, Texas, New York and other states. (See updates at www.cdc.gov/swineflu.) The CDC is working with local and state health agencies to investigate these cases. It has been determined that this virus is spreading from human to human.

Mexico has reported increased levels of respiratory disease including reports of severe pneumonia cases and deaths. The swine-origin influenza viruses identified by CDC from cases in Mexico are similar to viruses from patients in the United States. As of April 29, 2009, of 91 patients identified thus far in the US, most have recovered, but five have been hospitalized and one patient, a child, has died. However, the CDC is concerned about these cases in the United States, and the World Health Organization is concerned about continued spread of this new virus. Right now, there is no vaccine for this new virus and the current seasonal influenza is thought to be unlikely to provide protection against this new strain.

Child care providers in community based child care programs in all settings including both center-based and family child care programs should:

- Review their plans for responding to a pandemic. Make sure that they are up to date and that parents know what they are.

- Remind parents and enforce policies for having ill children stay at home during their illness. Children with symptoms of an influenza-like illness should not come to school. Symptoms of influenza include fever, cough, sore throat, body aches, headache, chills, fatigue, and, in some cases diarrhea. The child's health care provider will determine whether influenza testing is needed and when the child can return to child care. In most areas, children with other, mild respiratory illnesses including allergies may be allowed to attend child care as long they are able to participate comfortably and their care does not result in a greater need for care than the staff can provide without compromising the health and safety of the other children (Caring for Our Children- Standard 3.065).

- Remind workers not to come to work while they have an influenza-like illness. They should consult their health care provider to determine whether influenza testing is needed.

- Health departments in areas where cases of persons affected with this new virus have been identified may recommend more rigid exclusion policies so providers will need to stay informed on what is happening in their communities.

- Children with influenza may be infectious for up to 10 days after illness onset with influenza, while adults are thought to likely be infectious for 5-7 days. Public health investigators are working to more precisely learn the length of infectiousness. If a child has been confirmed to have swine-origin influenza, then seek the advice of the child’s health provider and the health department about when the child can return to the child care program.

- Be familiar with local/state plans for child care in the event of a mild or severe pandemic. This information may be available from state or local health authorities, child care licensing agencies or resource and referral agencies. If these plans do not include specific approaches to communicate with and handle situations in child care, do what you can to advocate for updating the plans.

Adapted from the Centers for Disease Control and Prevention (CDC) document, 04/30/09 (minor copy-edits)
• Develop and implement a system to track illness and absence due to illness among children and staff if one is not already in place. The system should be simple and easy to maintain but should record the number of persons with various illnesses (e.g. respiratory, diarrhea, rash) by day or at least by week. See Caring for Our Children Standards 3.001 and 3.002 for information on how to do this, (http://nrckids.org/CFOC/PDFVersion/Chapter%203.pdf – p. 2).

• Review and implement CDC Guidelines and Recommendations for Preventing the Spread of Influenza (the Flu) in Child Care Settings: Guidance for Administrators, Care Providers, and Other Staff, (http://www.cdc.gov/flu/professionals/infectioncontrol/childcaresettings.htm).

• Make sure staff are familiar with the above guidelines and that they are being followed in your program. Remind child care staff to clean/disinfect/sanitize frequently-touched surfaces within the facility.

• Provide information to parents on steps that they could take to prevent flu. (See attached fact sheet that could be distributed to each parent or posted on a door to the facilities with providers calling attention to the posted fact sheet.)

• Monitor the postings on the CDC web site about this virus (www.cdc.gov/swineflu) and information from state or local health departments to see if child care facilities should begin preparing for possible closure or changes in operation.

• Work with parents to consult the child’s health provider if you have questions about a child with a respiratory illness or if you suspect a child might have influenza. Contact your child care health consultant or local public health department if you need help to make decisions promptly that affect the children as a group.

Child care and preschool programs can help protect the health of their staff and the children and families they serve by calling attention to the everyday preventive actions that parents can initiate to protect their children. (Please consider posting or distributing the attached message in your child care facility.)

More information on preventing the spread of influenza can be found at: http://www.pandemicflu.gov/plan/school/preschool.html. For generic information on disaster preparedness, see NACCRA’s web site http://www.naccrra.org/for_parents/coping/disaster.php

Additional generic planning information for child care programs and schools, including examples of state and local plans, can be found on the Department of Education's website at: http://www.ed.gov/admins/lead/safety/emergencyplan/pandemic/index.html.

Note: Conditions and situations are rapidly changing and these recommendations may change over time.

Adapted from the Centers for Disease Control and Prevention (CDC) document, 04/30/09 (minor copy-edits)
Preventing the Flu: Good Health Habits Can Help Stop Germs

Fact Sheet

1. Avoid close contact.

Avoid close contact with people who are sick. When you are sick, keep your distance from others to protect them from getting sick too.

2. Stay home when you are sick.

Stay home from work, child care, school, and errands when you are sick, except to seek medical care. Keep sick children at home except to see medical care. You will help prevent others from catching the illness.

3. Cover your mouth and nose.

Cover your mouth and nose with a tissue when coughing or sneezing. Cover your nose and mouth with a tissue when you cough or sneeze. Throw the tissue in the trash after you use it.

4. Wash your hands often.

Washing your hands and the hands of your children often will help protect you from germs.

5. Avoid touching your eyes, nose or mouth.

Germs are often spread when a person touches something that is contaminated with germs and then touches his or her eyes, nose, or mouth.

6. Practice other good health habits.

Get plenty of sleep, be physically active, manage your stress, drink plenty of fluids, and eat nutritious food.

There is no vaccine available at this time for this new flu virus, so it is important for people living in the affected areas to take steps to prevent spreading the virus to others. If people are ill, they should stay at home and limit contact with others, except to seek medical care. Healthy residents living in these areas should take the everyday preventive actions listed above.

People who live in these areas who develop an illness with fever and respiratory symptoms, such as cough and runny nose, and possibly other symptoms, such as body aches, nausea, or vomiting or diarrhea, should contact their health care provider. Their health care provider will determine whether influenza testing is needed.

Adapted from the Centers for Disease Control and Prevention (CDC) document, 04/30/09 (minor copy-edits)