Pandemic Flu Checklist for Child Care Agencies and Preschools in California

Pandemic flu starts when a new flu virus develops and begins to spread around the world. Right now, there is no pandemic flu. But experts believe the current virus that is now seen in birds (avian flu) could change into a virus that can be transferred from person to person. That may lead to a pandemic. There are steps that individuals, families, and communities (including child care agencies) can and should take to prepare.

Child care agencies and preschools must help protect the health and safety of staff and students. Experts believe that up to 30 percent of the population may be sick at the same time. When pandemic flu occurs, there will likely be NO VACCINE for the first six months of the pandemic, and anti-viral medication will be in very limited supply. To control the spread of illness, social distancing, such as closing child care agencies and preschools and having people stay at home, will be the primary approach to preventing the spread of the flu virus. Child care agencies and preschools may have to be closed for a few weeks to a month or more if there is an outbreak of flu in that area.

We hope that the following checklist will help child care agencies and preschool programs plan for a possible flu pandemic. Please note that a separate checklist for schools is available at http://www.cde.ca.gov/ls/he/hn/fluinfo.asp. Not everything on this list will apply to every child care agency and preschool. This list will serve as a guide to child care agencies as they develop their own plans. It is important for all child care agencies to communicate with and know the roles and policies of local agencies, such as the local health department and local office of emergency services. Both of these agencies will have important roles if there is a pandemic.
1.0 Mitigation and Prevention:

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1.1 Create a committee to produce a plan for the preschool or child care program to deal with pandemic flu.\(^1\) The committee should include (if possible):
- Staff members
- Representatives from the local school districts
- Director of the program or preschool
- Representative from the family child care organization
- Parents/family members\(^2\)

1.2 Assign staff to identify reliable sources of information; watch for public health warnings about flu, program closings, and other actions taken to prevent the spread of flu.

1.3 Contact the local health department (find a list of local health officers at [http://www.dhs.ca.gov/cclho/default.htm](http://www.dhs.ca.gov/cclho/default.htm)) to learn who in your area has legal authority to close child care programs if there is a flu emergency.

1.4 Review your facility’s disaster and mass casualty plan and determine if any changes need to be made to respond to pandemic flu.

1.5 Identify all the ways a flu pandemic might affect your program and develop a plan of action.\(^3\)

1.6 Identify individual(s) in your program who will educate and supervise children, staff, and families about washing hands, following hygiene/cough etiquette, obtaining seasonal influenza vaccine, and staying home when sick.

1.7 Develop and implement procedures for routinely sanitizing toys, furniture, and surface areas in your facility.

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\(^1\) Staff of very small programs might consider joining together with other similar programs for planning. Additionally, learn about your community’s disaster response plan from the local health department or office of emergency services.

\(^2\) Include family members who have proficiency in languages other than English; they can help contact community members who have limited English proficiency.

\(^3\) For example, you might have problems with food service, transportation, staffing, facility maintenance, loss of electrical service or other utilities, and loss of income if families remove children from the program or are unable to pay because their income has declined.
1.8 Develop communication and dissemination plans for staff and families, including information about schedule changes, busing changes, and possible school or center closures.  

1.9 Encourage families to have a backup plan for finding care for their children if the program is closed during a flu pandemic or if their child is ill. Give them ideas about where they might seek help based on your knowledge of the local child care community.  

1.10 Identify other sources of meals for low-income children who receive subsidized meals while in your care. (For example, locate community food pantries or food closets.)  

1.11 Learn about services in your area that can help your staff, children, and their families deal with stress and other problems caused by a flu pandemic. Contact the local mental health department.  

1.12 Stage a tabletop drill with key staff members to test your plan and then improve it as needed. Repeat the drill from time to time. Consider volunteering to help in tests of community plans.  

1.13 Talk to other child care and preschool programs in your area to share information that could make your plan better. Discuss ways programs could work together to produce a stronger plan and pool resources.  

1.14 Anticipate the potential fear and anxiety of staff, children, and families due to rumors and misinformation, and plan communications accordingly. Consider developing key messages for various scenarios.  

### 2.0 Preparedness:  

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2.1 Give staff and children’s families reliable information in their language and at their reading level on the issues listed below:
- How to recognize a person who may have the flu and what to do if they think they have the flu (See [http://www.pandemicflu.gov](http://www.pandemicflu.gov)).

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4 Possible avenues of communication may include automated phone messages, e-mail, Web sites, text-messaging, local media outlets, and cable television. Encourage families to keep their emergency information up to date and review it with the family every few months.
• How to care for ill family members (See http://www.hhs.gov/pandemicflu/plan/sup5.html#box4)
• How to develop a family plan for dealing with a flu pandemic (See http://www.pandemicflu.gov/planguide/.)

2.2 Teach staff, children, and their families how to limit the spread of infection by using good hand washing; covering the mouth when coughing or sneezing; and cleaning toys frequently.⁵ (See http://www.cdc.gov/flu/school/ and http://www.healthykids.us/cleanliness.htm.)

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⁵ If the child care/preschool space is shared with other groups/organizations, include them when disseminating infection prevention policies and procedures. Work with other groups/organizations that share the space to ensure that infection prevention procedures are followed by all.
2.3 Educate staff and families about pandemic flu and the school plan. Explain why you need to have a plan. Give them a chance to ask questions. Family resources are online at http://pandemicflu.gov/plan/tab3.html and http://pandemicflu.gov/planguide/checklist.html.

2.4 Plan how you would deal with program closings, staff absences, and gaps in learning that could occur during a flu pandemic.\(^6\)

2.5 Plan ways to help families continue their child's learning if your child care program or preschool is closed.\(^7\)

2.6 Plan ways to continue basic functions if your program is closed.\(^8\)

2.7 Keep on hand several days' supply of soap, paper towels, tissues, and cleaning products you will need to help control the spread of infection.\(^9\)

2.8 Tell families that experts recommend yearly flu shots for all children six months to five years old and for anyone who cares for children in that age range.\(^10\)

2.9 Encourage staff to get flu shots each year. (See www.cdc.gov/flu/protect/preventing.htm.)

2.10 Review procedures for communicating with staff, children, and families.

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\(^6\) Identify the program staff chain of command in case of illness. Establish a back-up chain of command if necessary. Develop a continuity of operations system for essential functions, including payroll, custodial service, waste management, food service, transportation, and facility maintenance (including daily cleaning of all restrooms, kitchen and dining areas, and classrooms).

\(^7\) For example, give families things they can teach at home. Tell them how to find ideas on the Internet. Talk with child care resource referral agencies or other groups that could help families continue their children's learning at home.

\(^8\) For example, assist staff in a time of potential personal economic crisis and keep in touch with staff and children's families.

\(^9\) Store the supplies in easy-to-find places. Clean bathrooms, hand washing facilities, and food preparation areas frequently to prevent the spread of infection. Plan for the buildup of trash in case trash collection is slowed or interrupted.

\(^10\) Consider the appropriateness of a policy that encourages or requires flu shots for children in the program and their other caregivers. (See http://www.cdc.gov/od/oc/media/pressrel/r060223.htm.)
### 2.11 Review the plan for identifying ill children and staff, isolating them as necessary, and sending them home.  

2.12 Identify or develop educational materials for families and staff on topics such as how to support their child(ren) with recovery from pandemic flu, common symptoms of loss and grief, and constructive ways to cope with stress.

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### 3.0 Response:

#### 3.1 Tell families to let your program know if their children are sick or when a family member is sick with the flu. Keep accurate records of when children or staff are absent. Include a record of the kind of illness that caused the absence (e.g., diarrhea/vomiting, coughing/breathing problems, and rash). (See [http://nrc.uchsc.edu/CFOC/XMLVersion/Chapter_3.xml](http://nrc.uchsc.edu/CFOC/XMLVersion/Chapter_3.xml)).

#### 3.2 Use a standard set of steps for checking children and adults each day as they arrive to see if they are sick. Make it clear that any child or adult who is ill will not be admitted. (See [http://www.healthykids.us/chapters/sick_main.htm](http://www.healthykids.us/chapters/sick_main.htm)).

#### 3.3 Have a plan for keeping children who become sick at your program away from other children, such as a fixed place for a sick room, until the family arrives. (See [http://nrc.uchsc.edu/CFOC/XMLVersion/Chapter_3.xml](http://nrc.uchsc.edu/CFOC/XMLVersion/Chapter_3.xml)).

#### 3.4 Require staff members to stay home if they think they might be sick. If they become sick while at the program, require them to go home and stay home.

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11. Teach staff a standard set of steps for checking children and adults each day as they arrive to see if they are sick. Make it clear that any child or adult who is ill will not be admitted. (See [http://www.healthykids.us/chapters/sick_main.htm](http://www.healthykids.us/chapters/sick_main.htm).) Contact other providers in your area and develop a pool of individuals who can be called in to replace workers who are ill when they arrive at work. Research resources within your community to share with families who need care for sick children.

12. A child who is not sick but who may have been exposed to a sick family member may be able to infect others.

13. Contact other providers in your area and develop a pool of individuals who can be called in to replace workers who are ill when they arrive at work. Research resources within your community to share with families who need care for sick children.

14. Consider giving staff paid sick leave so they can stay home without losing wages and encourage employees who accrue sick leave to maintain a reasonable balance in case they become ill with influenza.
### 3.5 Require ill children to stay at home until their flu symptoms have gone and they feel ready to come back to your program.

### 3.6 Hold staff meeting(s) to provide information on the extent of infection in your program and potential changes that may take place.

### 3.7 Conduct timely debriefings with the program pandemic committee to identify lessons learned and make necessary changes to the response plan.

### 4.0 Recovery:

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### 4.1 Hold staff meetings and provide information on the extent of pandemic flu in the community.

### 4.2 Announce counseling support services that are available to staff. Utilize employee assistance programs for coping with loss and stress.

### 4.3 Announce counseling support services that are available to children and families.

### 4.4 Provide rest places for those staff and children who tire easily.

### 4.5 Make educational materials available to families and staff on topics such as how to support their child with recovery from pandemic flu, common symptoms of loss and grief, and constructive ways to cope with stress.

### 4.6 Identify children, families, and staff who may need long-term physical and mental health support or intervention, and refer them to community resources to provide these services.

### 4.7 Monitor the effects of cumulative stress on caregivers.

### 4.8 Consider offering health and mental health services, if available, by community, university, or public/nonprofit mental health agencies, and identify funding to support these services.

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15 Consider developing and disseminating a clear policy on when staff and children are healthy enough to return to the program. Refer to community health resources to develop medically sound criteria.
4.9 Modify work roles and responsibilities or consider adding volunteer or support staff as needed.

4.10 Document “lessons learned” and incorporate them into revisions and training.

References:


Tacoma/Pierce County Health Department, “Pandemic Flu Model Plan—Planning Tool for Schools.” http://www.tpchd.org/files/library/a4eaa3b511a9687a.pdf

U.S. Department of State, “Pandemic Response Matrix.”
http://www.state.gov/m/a/os/c17204.htm