



Republic of the Philippines
Department of Education

04 FEB 2020

DepEd MEMORANDUM
No. 015, s. 2020

FIRST SET OF POLICY DIRECTIVES OF THE DEPED TASK FORCE NCOV

To: Undersecretaries
Assistant Secretaries
Minister, Basic, Higher and Technical Education, BARMM
Bureau and Service Directors
Regional Directors
Schools Division Superintendents
Public and Private Elementary and Secondary School Heads
All Others Concerned

1. The Department of Education (DepEd) issued on February 1, 2020, DepEd Memorandum (DM) No. 011, s. 2020, titled **Creation of a Task Force for the Management of Department of Education Response to Novel Coronavirus Acute Respiratory Disease (2019-nCoV ARD)**, following the expansion of the DepEd Quick Response and Recovery Team (QRRT) that included 2019-nCoV ARD. The memorandum declares that the DepEd regards the 2019-nCoV ARD as a matter of serious and urgent concern, and supports the overall efforts of the Philippine government to manage this public health situation.

2. On February 2, 2020, the President issued a directive on the containment and neutralization of the spread of the 2019-nCoV ARD. Accordingly, all heads of departments, agencies, offices, and instrumentalities of the government were directed to adopt, coordinate, and implement the said guideline and such other guidelines to be issued by the Inter-Agency Task Force for the Management of Emerging Infectious Diseases in the Philippines created by Executive Order No. 168, s. 2014, with the Department of Health as chairperson.

3. Pursuant to the directive of the President and DM 011, s. 2020, and in consideration of current government efforts to contain the 2019-nCoV ARD, this memorandum is being issued for the information and guidance of DepEd officials, personnel and staff at the Central, Regional and Division Offices and schools nationwide.

4. This memorandum provides a background/situationer on the 2019-nCoV ARD, policy directives, and guidelines in the following enclosures:

Enclosure No. 1 - Background and Situationer;
Enclosure No. 2 - Measures for the Prevention and Control of the 2019-nCoV ARD in Basic Education Schools and Offices;
Enclosure No. 3 - Formation/Activation of DRRM Teams in DepEd Regional Offices, Schools Division Offices, and Schools;
Enclosure No. 4 - Operationalizing the Preventive Alert System in Schools (PASS);
Enclosure No. 5 - Safety Precautions and Protocols;

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Enclosure No. 6 - Guidance for School Administrators to Help Reduce the Spread of Seasonal Influenza in K to 12 Schools;
Enclosure No. 7 - Protect Yourself from Coronavirus;
Enclosure No. 8 - Medical Referral Form; and
Enclosure No. 9 - 2019-nCoV ARD Health Situation Report Template.

5. In the interest of public health, all public and private basic education schools and learning centers are duty-bound to exercise due diligence and take precautionary measures to minimize exposure to risks associated with the 2019-nCoV ARD and support government efforts to contain the spread of the virus. Private schools are highly encouraged to adopt the precautionary measures contained in this memorandum.

6. For information, please contact the **Bureau of Learner Support Services-School Health Division**, through email at blss.shd@deped.gov.ph or at telephone number (02) 8632-9935.

7. Immediate dissemination of this Memorandum is desired.



LEONOR MAGTOLIS BRIONES
Secretary

Encls.:
None

Reference:
DepEd Memorandum (No. 011, s. 2018)

To be indicated in the Perpetual Index
under the following subjects:

BUREAUS AND SERVICES
EMPLOYEES
OFFICIALS
SCHOOLS

SMMA, DM First Set of Policy Directives
0079/February 4, 2020

(Enclosure No. 1 to DepEd Memorandum No. 015, s. 2020)

BACKGROUND AND SITUATIONER¹

1. Background

- a. On December 31, 2019, the WHO China Country Office was informed of cases of pneumonia of unknown cause detected in Wuhan City, Hubei Province of China. This was later determined to be caused by a novel (new) type or strain of coronavirus not previously detected in people. On January 12, 2020, China shared the genetic sequence of the novel coronavirus. The novel coronavirus is given the interim name "2019-nCoV".
- b. WHO describes coronaviruses as a large family of viruses that can cause respiratory illness ranging from the common cold to more severe diseases. Common signs of infection include respiratory symptoms, fever, cough, shortness of breath and other breathing difficulties. More severe cases can cause pneumonia, severe acute respiratory syndrome, kidney failure and even death. Coronavirus is named as such because of the crown-like spikes on their surface.
- c. The 2019-nCoV has since spread to a number of countries, including the Philippines. WHO has declared the 2019-nCoV outbreak as a Public Health Emergency of International Concern on January 30, 2020.
- d. According to the WHO (February 4, 2020), there are 17,391 confirmed cases globally, of which 17,238 are in China (2,296 severe; 361 deaths), and 153 cases (1 death) are in 23 other countries.
- e. Two of the confirmed cases are in the Philippines, and the lone recorded death from 2019-nCoV outside China is one of the two Philippine cases. The two cases are a 38-year-old Chinese female and her companion, a 44-year-old Chinese male. Both patients are from Wuhan, China, and arrived in the Philippines via Hong Kong last January 21, 2020. They were admitted to the hospital last January 25, 2020. The male patient was reported by DOH to have died on February 1, 2020, the lone recorded death from 2019-nCoV outside China. Contact tracing of passengers aboard the flights of the two positive cases and in places where the patients stayed and travelled are ongoing.
- f. The 2019-nCoV situation is ongoing. As of February 3, 2020, the Philippines has 80 patients under investigation.

¹ Sourced from the Department of Health (DOH) and the website of the World Health Organization (WHO), and additionally from other reputable sources such as the Centers for Disease Control Prevention (CDC) of the United States of America.

2. Reported Transmission of 2019-nCoV

- a. Because 2019-nCoV is a new type or strain of coronavirus, knowledge and evidence on its various aspects are still evolving. The report of China to the WHO indicated that the outbreak was associated with exposures in one seafood market in Wuhan City, suggesting an animal to person transmission. However, person-to-person transmission is now indicated in the current spread.
- b. WHO suspects that human-to-human transmission of the 2019-nCoV can be similar to previous coronaviruses, which is through a respiratory route whereby droplets or small particles from an infected person are expelled such as when one sneezes or coughs. The Centers for Disease Control and Prevention (CDC), the leading national public health institute of the United States, explains that these droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs. It adds that it is currently unclear if a person can get 2019-nCoV ARD by touching a surface or object that has the virus on it and then touching his/her own mouth, nose, or possibly his/her eyes. While WHO has highlighted that the main driver of transmission is symptomatic cases, there are a few reported cases of transmission of 2019-nCoV ARD from infected people before they developed symptoms.

3. Actions by the Philippine Government

- a. The Department of Health reports that it is closely monitoring individuals who manifested signs of respiratory infection and had a history of travel to China, and is coordinating with WHO and China Center for Disease Control for updates. It is also enhancing its coronavirus laboratory testing capacity, hospital preparedness, rapid response, and its risk communication and information dissemination. Personal Protective Equipment are made available at the Bureau of Quarantine, Centers for Health Development, and DOH Hospitals.
- b. The Bureau of Quarantine is working with airlines and airport authorities to strengthen border surveillance, while the Epidemiology Bureau is heightening its community surveillance.
- c. The Inter-Agency Task Force for the Management of Emerging Infectious Diseases in the Philippines (IATF-EID) is mandated by Executive Order No. 168, s. 2014 to establish preparedness and ensure efficient government response to assess, monitor, contain, and prevent the spread of any potential epidemic in the Philippines. The DOH Secretary, as chairperson, convened the IATF-EID for its first meeting on the 2019-nCoV ARD on January 28, 2020. A subsequent meeting was held on January 31, 2020.

- d. On February 2, 2020, the Office of the President, through a statement by Executive Secretary Salvador Medialdea, approved the following recommendations of the IATF-EID:
 - i. Temporarily banning the entry of any person, regardless of nationality, except Filipino citizens and holders of Permanent Resident Visa issued by the Philippine Government, directly coming from China and its Special Administrative Regions;
 - ii. Temporarily banning the entry of any person, regardless of nationality, except Filipino citizens and holders of Permanent Resident Visa issued by the Philippine Government, who, within fourteen (14) days immediately preceding arrival in the Philippines, has been to China and its Special Administrative Regions;
 - iii. A mandatory fourteen (14) day quarantine for Filipinos and Permanent Resident Visa holders coming from any place in China and its Special Administrative Regions;
 - iv. Temporary ban on Filipinos from travel to China and its Special Administrative Regions; and
 - v. Establishment of a repatriation and quarantine facility.
- e. Other government agencies have also initiated their respective actions in support of the overall government efforts to address the 2019-nCoV ARD.
- f. On the part of the Department of Education, its Undersecretary for Administration issued Memorandum 08-0120-0598 dated January 24, 2020, titled Department of Education's Response on Health Problems due to Coronavirus and Re-Emergence of Polio in the Philippines, and addressed to all Regional Directors, Schools Division Superintendents, of and Principals and School Heads. The Memorandum advised all field units to make handwashing a habit, cover one's mouth and nose when coughing or sneezing, avoid contact with people who show signs of respiratory illness, drink plenty of water and ensure proper cooking of food, and consult a health facility if symptoms of cough and colds persist. All units were directed to support measures, awareness and initiatives on the coronavirus.
- g. The DepEd Secretary also called on schools and coordinated with DOH officials for the implementation of DOH guidelines, particularly on any decision for any school lockdown in specific communities should a need arise.
- h. With the confirmation by the DOH of the first case of patient testing positive for the 2019-nCoV in the afternoon of January 30, 2020 and the declaration by WHO of the 2019-nCoV outbreak as a Public Health Emergency of

International Concern later on the same day, DepEd expanded the coverage of its Quick Response and Recovery Team (QRRT)-Taal to include the 2019-nCoV ARD on January 31, 2019.

- i. Also in the morning of January 31, 2019, the DepEd Secretary directed its Executive Committee to meet and discuss the latest developments on the 2019-nCoV ARD and recommend further actions. Upon recommendation by the Executive Committee, the Secretary created the DepEd Task Force nCoV through DepEd Memorandum No. 011, s. 2020 on February 1, 2020, consisting of a Policy Group chaired by the Secretary, with the earlier activated expanded QRRT as its Operations Group.

(Enclosure No. 2 to DepEd Memorandum No. 015, s. 2020)

**MEASURES FOR THE PREVENTION AND CONTROL OF THE 2019-NCOV ARD
IN BASIC EDUCATION SCHOOLS AND OFFICES**

1. Travel limitations and restrictions
 - a. Following the presidential directive on the 2019-nCoV ARD issued on February 2, 2020, all travels (official and personal) to the People's Republic of China and its special administrative regions are temporarily banned.
 - b. Official travels of all DepEd personnel and learners previously approved by the Secretary for the month of February 2020 to countries identified to have confirmed cases or persons under investigation for 2019-nCoV are revoked. All DepEd personnel with approved personal travels to the same countries are highly advised not to proceed.
 - c. The latest list of countries with confirmed cases is accessible in the WHO's site (<https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports>).
 - d. Personnel and learners coming from travel abroad shall comply with the prescribed quarantine procedures of proper government authorities before returning to work or school.
2. Conduct of national, regional, division and school activities

In the interest of public health, all public and private basic education schools and learning centers are duty-bound to exercise due diligence and take precautionary measures to minimize exposure to risks associated with the 2019-nCoV ARD and support government efforts to contain the spread of the virus.

The following precautionary measures shall be observed for DepEd activities for the month of February 2020:

- a. Upon advice of DOH, all national and regional activities involving learners and/or teachers requiring travel and congregation of various schools, divisions, and/or regions are suspended. The Department shall periodically evaluate the necessity of suspending such national and regional activities, and shall, every Monday and/or when the need arises, announce whether such suspension shall continue, depending on the development of the situation and upon the advice of DOH.
- b. All division and district activities that involve the gathering/congregation of various schools are highly discouraged. Organizers are advised to seek the recommendation of local health authorities should the activities push through.

- c. All off-campus activities as defined in DepEd Order No. 66, s. 2017 (Implementing Guidelines on the Conduct of Off-Campus Activities) are suspended.
- d. All personnel and learners exhibiting respiratory infections must not attend activities that involve congregation of learners within the school.

3. Public information and awareness campaigns
 - a. Campaigns, especially classroom discussions, shall focus on the promotion of precautionary and safety measures and healthy behaviors such as, but not limited to:
 - i. personal hygiene, including frequent and proper handwashing with soap and water, the application of rubbing alcohol or hand sanitizer, and proper cough etiquette (maintain distance and cover coughs and sneezes with a tissue or the crook of your elbow);
 - ii. maintaining healthy lifestyles, including proper hydration by drinking 8-10 glasses of water within the day, consumption of nutritious foods, and ensuring food safety;
 - iii. ensuring environmental sanitation; and
 - iv. consulting a physician when symptoms attributable to respiratory infection (e.g. coughs, colds, fever, and other related symptoms) persist, and for extracting information on travel history to affected areas and exposure, based on the latest DOH decision tool accessible via <https://www.doh.gov.ph/2019-nCoV>.
 - b. Enclosure No. 5 of this memorandum provides for safety precautions and protocols to be observed in schools and offices (*Safety Precautions and Protocols*).
 - c. Campaigns, especially classroom discussions, shall also tackle the nature of the 2019-nCoV ARD, ways of transmission, and signs and symptoms.
 - d. This memorandum and its enclosures may serve as reference/discussion materials.
 - e. Official collaterals for display in schools and offices containing these key messages (Enclosure No. 7) may be downloaded at <https://www.dcped.gov.ph/stopncov>. Editable files are available for translation to local languages and dialects.
 - f. All offices and schools are enjoined to use and share only verified and up-to-date information from reliable and official sources such as the WHO via <https://www.who.int/emergencies/diseases/novel-coronavirus-2019> and the DOH via <https://www.doh.gov.ph/2019-nCoV>.
4. Close monitoring of the health status of personnel and learners, and appropriate management and referral of persons exhibiting respiratory infection (e.g. coughs, colds, fever, and other related symptoms)

- a. All offices and schools shall utilize existing referral systems as indicated in the School Health and Nutrition Service Manual for personnel and learners who are exhibiting symptoms of respiratory infection and others.
- b. The Medical Referral Form (Enclosure No. 8) may be downloaded from <https://www.deped.gov.ph/stopncov>.

5. Monitoring and reporting of the general situation and cases

Schools Division Offices shall prepare weekly health situation reports from the field using the attached template (Enclosure No. 9) accessible at <https://www.deped.gov.ph/stopncov> for submission to the BLSS-SHD (medical.nursing@deped.gov.ph), copy furnished Disaster Risk Reduction and Management Service (DRRMS) (drrmo@deped.gov.ph), their respective DepEd Regional Offices, and Local Chief Executive and the City/Municipal/Rural Health Unit, on or before 12 noon every Friday.

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(Enclosure No. 3 to DepEd Memorandum No. 015, s. 2020)

**FORMATION/ACTIVATION OF DRRM TEAMS IN DEPED REGIONAL OFFICES,
SCHOOLS DIVISION OFFICES, AND SCHOOLS**

Regional Offices, Schools Division Offices, and public schools shall form and/or activate their Disaster Risk Reduction and Management (DRRM) Teams, in accordance to DepEd Order No. 21, s. 2015, to lead in the performance of the tasks, roles and responsibilities enumerated below. The DRRM Team, for the purpose of responding to the 2019-nCoV ARD, being a public health concern, shall be led by School Health Personnel, and supported by DRRM Coordinators.

1. Regional Offices, through their respective DRRM Teams as lead, shall:
 - a. Coordinate with the DOH Regional Health Office for preventive measures and information sharing;
 - b. Prepare and activate a Regional Contingency Plan on the 2019-nCoV ARD;
 - c. Orient all Regional Personnel on the 2019-nCoV ARD;
 - d. Instruct the Regional School Health Personnel to provide technical assistance to SDOs;
 - e. Issue memoranda guiding divisions on how to manage the situation;
 - f. Monitor the situation in the divisions; and
 - g. Provide necessary assistance to divisions.
2. Schools Division Offices, through their respective DRRM Teams as lead, shall:
 - a. Coordinate with the Provincial/City/Municipal Health Office for preventive measures, information sharing, and establishment of referral system for persons exhibiting respiratory infection and/or exposure to a Person Under Investigation or a confirmed case;
 - b. Prepare and activate a Division Contingency Plan on the 2019-nCoV ARD;
 - c. Orient all Division Personnel on the 2019-nCoV ARD;
 - d. Deploy Division Health Personnel to monitor closely the health status of the school populace, conduct health information and dissemination, intensify health education lectures, and assist schools;
 - e. Monitor DepEd offices and schools including learners and personnel exhibiting respiratory infection and refer to the nearest hospital;
 - f. Provide necessary assistance, such as but not limited to, funds and hygiene kits, to schools;
 - g. For identified areas with persons under investigation or confirmed cases as announced by DOH, intensify information campaigns on the prevention of the spread of 2019-nCoV ARD;
 - h. Establish local hotline(s) for the schools for queries and information purposes, to be manned by qualified personnel;
 - i. Adopt alternative delivery modes (ADM) of education in cases of class suspensions or the quarantine of learners; and
 - j. Provide health situation reports from the field to BLSS-SHD and regional office, with copy furnished to DRRMS and the Local Chief Executive and the City/Municipal/Rural Health Unit.

3. Schools, through their respective DRRM Teams as lead, shall:

- a. Coordinate with LGUs and Barangay Health Centers on matters relating to 2019-nCoV ARD;
- b. Disseminate accurate information to school personnel, learners, and parents on the nature of the 2019-nCoV ARD, ways of transmission, signs and symptoms, and precautionary and safety measures, through orientations/meetings, information campaigns, posting of IEC materials in strategic places in school and social media, and other school activities, using the collaterals developed by the DepEd Public Affairs Service accessible at <https://www.deped.gov.ph/stopncov>, where videos and collaterals released by the WHO and the DOH are also available for reference;
- c. Ensure the conduct of daily group handwashing before the first class in the morning and afternoon sessions and before going home;
- d. Intensify health education in the classroom, giving emphasis on personal hygiene, including cough etiquette and proper use of masks, consumption of safe and nutritious foods, and environmental sanitation;
- e. Ensure adequate supply of water and soap in schools, and hand sanitizers and/or rubbing alcohol in the entrance of school gates and offices;
- f. Maintain the cleanliness of schools, including the regular disinfection of doorknobs and handles;
- g. Ensure that classrooms and offices are well-ventilated;
- h. Ensure that food served in school canteens are thoroughly washed and cooked;
- i. Operationalize a Preventive Alert System in Schools (see Enclosure No. 4);
- j. For persons exhibiting respiratory infection, coordinate immediately with the Division School Health Unit or the nearest health facility. Provide appropriate mask and assist on the proper usage prior to referral;
- k. Coordinate with Division, LGU and health authorities for the suspension of classes, if necessary. Non-essential travels of learners and personnel during this period of suspension are discouraged. Resumption of classes will follow the same procedures; and,
- l. Implement ADM of education in cases of class suspensions or the quarantine of learners.



(Enclosure No. 4 to DepEd Memorandum No. 015, s. 2020)

OPERATIONALIZING THE PREVENTIVE ALERT SYSTEM IN SCHOOLS (PASS)

1. The Preventive Alert System in Schools (PASS), based on DepEd Order No. 34, s. 2003, is a systematic relay of information on a child's or teacher's state of health to appropriate personnel and/or agencies in the locality.
2. All school heads shall operationalize the Preventive Alert System in their respective schools.
3. Teachers in-charge shall explain in class how PASS works:
 - a. Learners will observe the well-being of their own classmates and if someone among them is not feeling well or has colds/cough and is feverish, the sick learner will be reported to the teacher for validation of his/her condition.
 - b. Early morning health inspection shall be conducted routinely by the teacher to detect the presence of fever and other signs and symptoms of infection. The teacher shall keenly observe the health status of each learner in the classroom. If the teacher finds out that a learner is sick, this case will be reported immediately to the school head.
 - c. The school head shall notify the family/guardian member of the sick learner. A face mask should be worn by the feverish person and immediately referred to the school health personnel or the nearest barangay/municipal/city health center for evaluation or referral to a hospital if needed. The same process shall be observed for teachers or other personnel who will exhibit symptoms of infection.
 - d. Learners, teachers, and other personnel evaluated by school health personnel/ referred to hospitals shall strictly observe the advice of the health personnel/hospital, including the possibility of home quarantine.
 - e. The condition of the learner, teacher, and other personnel should be closely followed up by the attending school health personnel.
 - f. Learners on home quarantine shall be given ADM of education.
4. School heads shall closely coordinate with the barangay/municipal/city health offices and the SDOs relative to any resident in the community who has traveled to and returned from a country/area affected by the 2019-nCoV ARD.
5. School heads shall conduct daily monitoring of health status of children and personnel, and maintain a record on health status.

(Enclosure No. 5 to DepEd Memorandum No. 015, s. 2020)

SAFETY PRECAUTIONS AND PROTOCOLS²

1. General Precautions

- a. DepEd reiterates its earlier directives for the strict observance of precautions recommended by DOH and WHO to reduce the general risk of transmission of respiratory infection, specifically, proper hand and respiratory hygiene, and safe food practices. Proper hand hygiene is needed to minimize the risk of transmission through touching any contaminated object, material or surface; the respiratory hygiene is needed to reduce the risk of spreading the virus by an infected individual; and the safe food practices is to reduce risk of exposure to or ingestion of contaminated food.
- b. The following proper hand and respiratory hygiene, and safe food practices, and related precautions are enjoined:
 - i. Frequently clean hands by using alcohol-based hand rub or soap and water;
 - ii. When coughing and sneezing, maintain distance and cover mouth and nose with flexed elbow or tissue – throw tissue away into a closed bin immediately and wash hands;
 - iii. Avoid close contact with anyone who has fever and cough;
 - iv. If you have fever, cough and difficulty breathing, seek medical care early and share previous travel history with your health care provider;
 - v. When visiting live markets in areas currently experiencing cases of novel coronavirus, avoid direct unprotected contact with live animals and surfaces in contact with animals;
 - vi. The consumption of raw or undercooked animal products should be avoided. Raw meat, milk or animal organs should be handled with care, to avoid cross-contamination with uncooked foods, as per good food safety practices; and
 - vii. Within healthcare facilities, enhance standard infection prevention and control practices in hospitals, especially in emergency departments.
- c. Airflow in classrooms should be improved by opening windows and doors as much as possible.

2. When Respiratory Symptoms Occur

Wearing of medical mask is indicated for an individual exhibiting symptoms of respiratory infections. The medical mask is intended to protect the wearer from respiratory secretions. Thus, it should be worn as much as possible. The

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² Sourced from the Department of Health (DOH) and the website of the World Health Organization (WHO), and additionally from other reputable sources such as the Centers for Disease Control Prevention (CDC) of the United States of America.

individual should also clean his or her hands immediately after contact with his or her own respiratory secretions.

3. Wearing of Medical Mask

- a. Wearing of medical mask is indicated for an individual exhibiting or feeling symptoms of respiratory infections, in order to contain respiratory secretions.
- b. WHO, in its advice on the use of masks, states that a medical mask is not required for non-sick persons. However, in crowded places where one is unsure of any possible exposure, masks may be resorted to.
- c. In using masks, best practices should be followed on how to wear, remove, and dispose of them and on hand hygiene action after removal. WHO provides guidelines in the use of masks:
 - i. If medical masks are worn, appropriate use and disposal are essential to ensure they are effective and to avoid any increase in risk of transmission associated with the incorrect use and disposal of masks.
 - ii. The following information on correct use of medical masks derives from the practices in health-care settings:
 - (1) place mask carefully to cover mouth and nose, and tie securely to minimize any gaps between the face and the mask;
 - (2) while in use, avoid touching the mask;
 - (3) remove the mask by using appropriate technique (i.e. do not touch the front but remove the lace from behind);
 - (4) after removal or whenever you inadvertently touch a used mask, clean hands by using an alcohol-based hand rub or soap and water if visibly soiled
 - (5) replace masks with a new clean, dry mask as soon as they become damp/humid;
 - (6) do not re-use single-use masks;
 - (7) discard single-use masks after each use and dispose of them immediately upon removal.
 - (8) Cloth (e.g. cotton or gauze) masks are not recommended under any circumstance.

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(Enclosure No. 6 to DepEd Memorandum No. 015, s. 2020)

GUIDANCE FOR SCHOOL ADMINISTRATORS TO HELP REDUCE THE SPREAD OF SEASONAL INFLUENZA IN K-12 SCHOOLS

Public and private schools shall be guided by the following recommendations adopted from the Centers for Disease Control and Prevention (CDC), accessed at <https://www.cdc.gov/flu/school/guidance.htm>:

- a. Encourage learners, parents, and staff to take everyday preventive actions to stop the spread of germs.
 - i. Encourage learners and staff to stay home when sick.
 - ii. Teach learners, parents, and staff the importance of staying home when sick until at least 24 hours after they no longer have a fever* or signs of a fever (chills, feeling very warm, flushed appearance, or sweating) without the use of fever-reducing medicine.
 - iii. Review school policies, and consider revising those that make it difficult for learners and staff to stay home when sick or when caring for others who are sick.
 - a. Implement flexible sick leave policies for learners and staff.
 - b. Avoid the use of perfect attendance awards.
 - c. Cross-train staff so that others can cover for co-workers who need to stay home.
- b. Encourage respiratory etiquette among learners and staff through education and the provision of supplies.
 - i. Teach learners and staff to cover coughs and sneezes with a tissue or their bent arm. If they use a tissue, they should put the used tissue in a trash can and wash their hands.
 - ii. Provide adequate supplies within easy reach, including tissues and no-touch trash cans.
 - iii. Encourage hand hygiene among learners and staff through education, scheduled time for handwashing, and the provision of supplies. Teach learners and staff to wash hands often with soap and water for 20 seconds, dry hands with a paper towel, and use the paper towel to turn off the faucet. If soap and water are not available and hands are not visibly dirty, an alcohol-based hand sanitizer containing at least 60% alcohol may be used.
 - iv. Include handwashing time in student schedules.
 - v. Provide adequate supplies, including clean and functional handwashing stations, soap, paper towels, and alcohol-based hand sanitizer.
- c. Encourage learners and staff to keep their hands away from their nose, mouth, and eyes.

- i. Encourage routine surface cleaning through education, policy, and the provision of supplies. Routinely clean surfaces and objects that are touched often, such as desks, countertops, doorknobs, computer keyboards, hands-on learning items, faucet handles, and phones. Empty trash cans as needed.
- ii. Use general cleaning products that you normally use. Always follow product label directions. Additional disinfection beyond routine cleaning is not recommended.
- iii. Provide adequate supplies, such as general EPA-registered cleaning products, gloves, disinfecting wipes, and no-touch trash cans.
- iv. Match your cleaning activities to the types of germs you want to remove or kill.
 - (1) Flu viruses are relatively fragile, so standard practices, such as cleaning with soap and water, can help remove and kill them.
 - (2) Studies have shown that the flu virus can live and potentially infect a person for only 2 to 8 hours after being deposited on a surface. Therefore, special sanitizing processes beyond routine cleaning, including closing schools to clean every surface in the building, are not necessary or recommended to slow the spread of flu, even during a flu outbreak.
 - (3) Some schools may include other cleaning and disinfecting practices in their standard procedures to address germs that are not removed or killed by soap and water alone.

- d. Educate learners, parents, and staff on what to do if someone gets sick.
 - i. Teach learners, parents, and staff the signs and symptoms of flu, emergency warning signs, and high-risk groups. See lists at the beginning of this document.
 - ii. Those who get flu-like symptoms at school should go home and stay home until at least 24 hours after they no longer have a fever or signs of a fever without the use of fever-reducing medicine. Those who have emergency warning signs should get immediate medical care. Those who get flu-like symptoms and are at high risk of severe flu illness should ask a health care professional if they should be examined.
 - iii. Separate sick learners and staff from others until they can be picked up to go home. When feasible, identify a "sick room" through which others do not regularly pass. The sick room should be separated from areas used by well learners for routine health activities, such as picking up medications. Sick room staff should be limited in number and should not be at high risk for severe illness if they get sick.