



---

## SWINE FLU: HEALTH AND SAFETY UPDATE BULLETIN

JULY 2009

---

This bulletin provides up-to-date NUT guidance on swine flu. This further advice has been issued in response to the constantly evolving situation in respect of swine flu, particularly in relation to changing advice on school closures, prescription of anti-virals and testing for the virus. Also included is Health Protection Authority (HPA) advice for pregnant women and people with other medical conditions which may make them particularly vulnerable. Additional advice will be issued as necessary.

### **SCHOOL CLOSURE**

Decisions about whether or not schools close when a case of swine flu is confirmed are made by schools and the local authority, based on advice given by the HPA. Until now the advice appears to have been that schools should close, in order to contain the virus. Now that the virus is spreading widely within communities, that advice is changing, at least in 'hotspot' areas such as London and the West Midlands, since it is the case that closure will no longer help to slow the spread of the virus. Sir Liam Donaldson, Chief Medical Officer, commented on 25 June 2009 that in certain areas with rapid community spread, school closures were not now practical.

The NUT would expect schools and local authorities to follow HPA advice. If the HPA recommends that a school should close, then we would support that and expect closure to take place. If, on the other hand, the HPA recommends that a school should stay open, the NUT would have to accept that.

Schools would, of course, need to close if staff absence meant that they could not safely remain open.

Set out below in italics is a series of questions and answers about school closure taken from the HPA website ([www.hpa.org.uk](http://www.hpa.org.uk)).

#### ***What's the role of the HPA in relation to schools?***

*The HPA provides advice to schools on whether they should close or stay open and also on measures schools can take to try to slow the spread of the disease.*

#### ***What is the HPA's policy on school closures?***

*The decision to close a school is made by the school and the local authority. The HPA will provide detailed advice based on a thorough assessment of all the risks and will only recommend closure if this will help to contain and lessen the spread of the virus.*

*For example, where the virus has spread in a community and there is regular mixing with family and close friends outside the school, closure would not slow the spread of the virus.*

### ***There is a case in our school – why is it still open?***

*If there has been a confirmed case of swine flu at your school, the HPA will perform a thorough risk assessment. Every risk assessment is judged against the same principles but the HPA will also take into account the local circumstances before making a recommendation.*

*If your school is still open, it means that the confirmed case is not considered to have posed risk of further spread to other pupils. Another reason for the school to remain open could be that if the virus is circulating within your community, closing the school would not help to slow the spread of the virus as people could still be exposed outside the school.*

### **SHOULD TEACHERS BE EXPECTED TO ATTEND SCHOOL IF IT IS CLOSED TO PUPILS?**

The initial NUT advice on pandemic flu, issued in 2006, when the DCSF published its first planning guidance, stated that we would not expect teachers to continue working in schools that are closed to pupils. The DCSF advice was, however, clear that staff could be directed to come in, unless they were ill themselves, or caring for a sick relative, or authorised to work at home.

Unless there is a very good reason for teachers not to be able to work at home, we would expect head teachers to authorise home working on the basis that there is no need for staff to be on the premises if there are no pupils on site. As professionals, and because of the nature of their work, teachers should be trusted to work at home.

This policy may, however, be difficult to enforce, given that there is no medical or DCSF advice to rely upon. Also, we would not wish to be in a position where head teachers or local authorities seek to 'claw back' any days where both teachers and children have been away from school. This ought not to be an issue where staff are available for work in school, even though pupils are absent, but it might be a problem if the school was completely closed.

### **PREGNANT WOMEN**

As far as pregnant women are concerned, the advice should be to contact their GP and follow medical advice, which may or may not be to stay away from school, regardless of whether or not it is closed. Pregnant women can take anti-viral medication, on the advice of their GP. The following questions and answers are taken from the following NHS website <http://www.nhs.uk/Conditions/Pandemic-flu/Pages/QA.aspx#Specialrisks>

#### **Will pregnant women get preference for a swine flu vaccine?**

It will be months before a swine flu vaccine becomes available. When it is available, there will be guidelines on which groups of people are a greater priority for vaccination.

#### **Does swine flu pose special risks in pregnant women?**

During pregnancy, you may have an increased risk of complications from any type of flu, especially in the second and third trimester.

## **Can I take antiviral drugs if I am pregnant?**

Yes, on the advice of a doctor. The Department of Health has purchased Relenza, an inhaled antiviral drug that treats flu without reaching the developing foetus.

An expert group reviewed the risk of antiviral treatment in pregnancy, which is extremely small - much smaller than the risk posed by the symptoms of swine flu.

## **OTHER MEDICAL CONDITIONS**

Where members are concerned that they are more vulnerable to swine flu than most others because of a long term medical condition, they should be advised to seek, and follow, the advice of their GP. The NHS website referred to above offers advice to people on a wide variety of long-term conditions.

## **TESTING FOR SWINE FLU**

It has been reported that the HPA has advised GPs in certain areas to stop testing for swine flu because there are now so many cases that the laboratories undertaking the analysis work are unable to meet demand. Clinical diagnosis is considered sufficient. This situation is not likely to change, at least in the short term. The fact that people may no longer receive an actual diagnosis will not affect whether or not a school closes since, based on current policy, this is increasingly likely to only be due to staff illness. Doctors are able to treat patients with anti-viral drugs without first testing them for the virus. This is already happening in certain parts of the country, the West Midlands being one example.

## **PRESCRIPTION OF ANTI-VIRAL MEDICATION**

It would appear that GPs have been advised to be cautious in terms of not over-prescribing the medication, in case over-prescription leads to a developing resistance to the drug. What also seems to be happening is that pupils 'en masse' are no longer being prescribed the anti-virals - just the really close contacts. The HPA advises that where there are significant levels of local transmission of swine flu, children and adults are likely to be repeatedly exposed to the disease, making preventative medication ineffective. Sir Liam Donaldson stated on 25 June 2009 that in certain hotspot areas, issuing anti-viral medication to people who have come into contact with confirmed cases was no longer practical.

## **DEVELOPMENT OF A VACCINE**

The latest advice is that a vaccine may be available from the end of August. Current advice is that frontline health and social care staff, alongside high risk groups and the under 16s would be vaccinated first. The reason for the inclusion of under 16s is that vaccinating them would help slow the spread of the virus in the general population. There is no information currently available on where teachers would be in terms of priority for vaccination. Please note that this advice could change.