

Majority of US Schools not ready for next pandemic, researchers say

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Terri Rebmann, Ph.D., is an Associate Professor at SLU's Institute for Biosecurity. Credit: Riya V. Anandwala, Medical Center Communications at Saint Louis University

Many U.S. schools are not prepared for bioterrorism attacks, outbreaks of emerging infectious diseases or pandemics, despite the recent 2009 H1N1 influenza pandemic that resulted in more than 18,000 deaths worldwide, Saint Louis University researchers say.

The study, led by Terri Rebmann, Ph.D., associate professor at SLU's Institute for [Biosecurity](#), surveyed about 2000 nurses working in elementary, middle and high schools across 26 states. The findings reveal that only 48 percent of schools address [pandemic](#) preparedness and only 40 percent of schools have updated their plans since the 2009 H1N1 pandemic that spread illnesses in more than 214 countries.

"There is a lot of research that shows influenza spreads quickly in

schools because it's a communicable disease and kids interact closely," Rebmann said. "Schools need to have a written pandemic plan in order to be prepared to put interventions into place quickly when an event occurs."

The study suggests that every school should review and update its pandemic preparedness plan annually and address gaps in infectious disease emergency planning. Schools also need to coordinate these plans with the local and regional disaster response agencies, and organize disaster drills and exercises, including holding drills that involve an infectious disease scenario.

Published in the [American Journal of Infection Control](#), the study also found that 44 percent of schools do not participate in community surveillance that tracks the presence of a disease based upon symptoms reported by area residents. These efforts are coordinated through local public health departments to assess indicators of [biological threats](#).

One reason for lack in participation is that many communities may not have a surveillance program that uses school data as an indicator, said Rebmann. Another reason is that several schools might share a nurse, which can lead to inconsistent, inaccurate or unreported data.

In order to have a regular and strong pandemic preparedness program, Rebmann suggests that school nurses should be involved in building and assessing the plan.

"Health care professionals can best inform school administrators about unique aspects of pandemic planning that need to be included in school disaster plans," she said. "Results from this study indicate that better prepared schools were ones that involved their nurses in the disaster planning committee. The school nurse is the best person in a school district to know about infection control and be able to make

recommendations about the best interventions to implement during a biological event."

Provided by Saint Louis University

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