

Coping with a Case of H1N1 Flu

American Association of State Colleges and Universities

Recommendations for Residential Students

- Students who are ill with H1N1 should “self-isolate”—i.e., severely curtail their interactions with others except to seek medical care—until at least 24 hours after they no longer display fever symptoms without the aid of fever-reducing medicine.
- If possible, ill students should return home to recuperate and minimize the risk of infecting others if they live nearby and can do so without using public transportation.
- Students who cannot return home should be isolated as much as possible. (The CDC suggests students serve as “flu buddies,” pairing up to take care of each other when ill to limit contact between sick and well people, but this may not be practical for all campuses.)
- Schools with shared dormitory facilities rather than private dormitory rooms may wish to set up alternative isolation areas for sick students who cannot leave campus.

Recommendations for Commuter Students

- Commuter students ill with H1N1 should practice self-isolation (whether at their own home or the home of a friend/relative) and not return to campus until they have recovered.
- Commuter students who can utilize distance-learning methods may be able to continue studies even while ill. (This also applies to resident students.)

Recommendations for Faculty, Staff, and Administration

- Faculty, staff, and administration suffering from H1N1 should follow the same self-isolation guidelines as students.
- Faculty are encouraged not to require doctors’ notes to excuse absences from class due to illness; administrators are encouraged not to require doctors’ notes to excuse absences from work. This is due to the CDC’s anticipation that students and employees may not be able to obtain doctors’ notes in a timely manner after recovering from H1N1 or other illnesses due to the burden on health care facilities.
- Facilities administrators should ensure facilities—particularly dormitories, classrooms, elevators, dining halls, and other high-contact areas—are cleaned frequently.
- Administrators and faculty are encouraged to develop distance learning strategies, flextime and remote working arrangements, and other methods of limiting face-to-face contact while maintaining operations in the event of a campus outbreak of H1N1 flu. Such planning should include course coverage for faculty and continuity of business operations for administrators and staff.
- Administrators are encouraged to tailor leave policies to accommodate the possibility of a widespread outbreak of H1N1 on campus and/or further CDC recommendations for campus closures/event cancellations in case of a major outbreak.
- Senior administrators are encouraged to discuss setting up vaccination clinics on campus when vaccine supplies for H1N1 become available (at this writing, estimated to be October 2009). AASCU will continue to monitor the situation closely and advise members as the fall flu season develops.

Information Resource Links

- CDC guidance specific to colleges and universities:
<http://www.flu.gov/plan/school/higheredguidance.html>
- President's Council of Advisors on Science and Technology, *Executive Report: U.S. Preparations for the 2009-H1N1 Influenza*: http://www.whitehouse.gov/assets/documents/PCAST_H1N1_Report.pdf
- <http://www.flu.gov/> (Federal one-stop information site)
- <http://www.cdc.gov/flu/> (CDC flu site)
- <http://www.dhs.gov/files//programs/swine-flu.shtm> (Homeland Security flu site)
- <http://www.hhs.gov/> (U.S. Health and Human Services flu site)
- <http://www.ed.gov/admins/lead/safety/emergencyplan/pandemic/index.html> (U.S. Department of Education flu site)