

Public Health Updates
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New Faces at CDPHE

- ▶ Executive Director/Chief Medical Officer – Larry Wolk, MD, MPH
- ▶ Public Health Program Director – Joni Reynolds, RN, MSN
- ▶ Prevention Services Division Director – Liz Whitley, RN, PhD
- ▶ Immunization Program Director – Lynn Trefren, RN, MSN

Local Public Health Priorities

<http://www.chd.dphe.state.co.us/CHAPS/Flash/WBLocalMap12.swf>



School based health Center New Funding

- ▶ The School-Based Health Center Program will be releasing a Request for Applications on Feb 28, 2014 for three separate funding opportunities.
- ▶ The grant cycle will be from July 1, 2014 – June 30, 2015 with the possible option of a second year of funding, contingent upon availability of funds and contractor performance in the first grant year. These awards will be for:
 - ▶ **Planning Awards** – For communities wishing to plan the opening of a school-based health center. Up to \$25,000 may be requested per community.
 - ▶ **Start-Up Awards** – For communities that have completed a planning cycle and are ready to open a new school-based health center. Up to \$250,000 may be requested per center.
 - ▶ **Support for Existing Centers** – For communities that have an already operational school-based health center. Up to \$100,000 may be requested per center.
- ▶ For more questions, please contact Jo English, School-Based Health Center Program Coordinator at jo.english@state.co.us or [303.692.2386](tel:303.692.2386)

Youth Sexual health

- ▶ Colorado Youth Matter
- ▶ Trend in Teen births
- ▶ http://www.coloradoyouthmatter.org/images/stories/pdf/focuson_births.pdf/
- ▶ <http://coloradoyouthmatter.org/resources/colorado-data-and-resources>

Role of Schools in Prevention

- ▶ Prevention of spread of disease
- ▶ Cleaning protocols
- ▶ Education
- ▶ Reporting

Prevention: Immunization

Immunization surveillance and enforcement

- ▶ In US vaccination programs have eliminated or reduced many vaccine preventable diseases
- ▶ Some continue to exist and others becoming more common again
- ▶ Estimated 45,000 adults and 1,000 children die annually from vaccine preventable disease in US
- ▶ More than 2,000,000 children under the age of 3 do not receive all recommended vaccines
- ▶ Colorado far from the HHS 90% goal vaccine coverage for pertussis

Prevention

- ▶ Education of students, parents and staff on ways to prevent the spread of disease
- ▶ Teach correct hand washing

Resources

- ▶ <http://coughsafe.com/media.html>
- ▶ video (cough in your sleeve)
- ▶ http://www.gojo.com/united-states/market/k-12/resources/educational-materials/cleangenevideogames.aspx?sc_lang=en
- ▶ posters and materials
- ▶ <http://www.itsasnap.org/snap/about.asp>
- ▶ Materials to reduce school absenteeism
- ▶ http://www.cdc.gov/H1N1flu/schools/toolkit/pdf/posters_032310.pdf
- ▶ Posters

Factors to consider

- ▶ Transmission
 - ▶ Incubation period
 - ▶ Period of Infectiousness
 - ▶ Susceptibility
 - ▶ Pathogenicity
 - ▶ Etiology
- [Infectious Disease Guidelines for Schools](#)
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Reporting

[Infectious Disease Guidelines for Schools](#)

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- ▶ Most cases of illness are isolated to one or a few students
- ▶ An outbreak of a particular disease can occur during the school year
- ▶ Suspected outbreaks of any disease must be reported to the state or local public health agency within 24 hours
- ▶ CDE Letter document regarding reporting
- ▶ [CDE Permission to report letter](#)
- ▶ Reportable diseases within 24 hours
- ▶ Reportable diseases within 7 days

Find your local public health agency

- ▶ [Local Public Health Agency contacts](#)

Informing parents of illness

- Dependent on
- ▶ The disease
 - ▶ Potential risk of spread to others
 - ▶ If other staff or students are displaying symptoms
 - ▶ School policies
 - ▶ Local Public health can assist in determining if a letter or notice is necessary

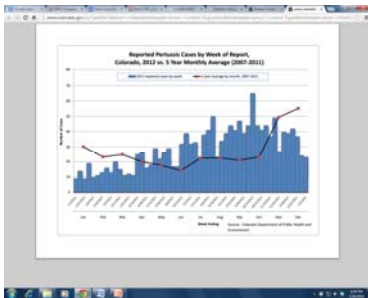
Pertussis

- ▶ See Pertussis Information and guidelines for Schools and Childcare Facilities
- ▶ [Pertussis guidelines for Schools](#)
- ▶ Health Advisory for School Health Care providers

Pertussis

- ▶ Colorado experiencing record number of cases
- ▶ January 1 - October 31, 2013, a total of 1,110 cases reported
- ▶ During 2012 - 1505 cases of pertussis reported
- ▶ Compare an average of 219 during same calendar period in 2007-2011
- ▶ One death in 2012

Pertussis by the week graph



Pertussis by the county

- ▶ Most cases reported from metro counties
- ▶ Jefferson 120
- ▶ Boulder 107
- ▶ Arapahoe County 68
- ▶ Denver 63
- ▶ Adams 61
- ▶ El Paso 45
- ▶ Weld 49
- ▶ Douglas 35
- ▶ Larimer 31

Pertussis

Pertussis by Age

- ▶ Highest among infant's 6 months and younger (9 hospitalized)
- ▶
- ▶ Followed by children 11-14 years and infants 6-11 months
- ▶ [Pertussis](#)

Pertussis Monthly Comparison

- ▶ [Comparison of Pertussis 2012 & 2013 by Month](#)

Best Protection

- ▶ Best protection is up to date immunizations
- ▶ Recommend that staff are immunized as well

School Letter Algorithm

- ▶ Algorithm for public health to assess need to send school letters
- ▶ See Algorithm
- ▶ [Pertussis](#)
- ▶ [Algorithm for Sending School Letters](#)

Clinical Pertussis Information

- ▶ Incubation period 7–10 days
- ▶ Progress of illness
- ▶ Initially runny nose, sneezing, low grade fever & mild cough
- ▶ Cough gradually becomes more severe over 1–2 weeks
- ▶ Cough characterized by coughing fits followed by high-pitched inspiratory whoop, vomiting and/or pause in breathing
- ▶ Severe cough lasts 1–6 weeks and then gradually improves
- ▶ Young infants can present without classic cough and may present with gasping or apnea only

Infectious Period

- ▶ Individuals are infectious (contagious) as soon as symptoms begin through the first 3 weeks of cough or until 5 full days of antibiotic treatment are completed

Testing and Treatment

Testing

- ▶ Special testing available through provider to diagnose pertussis

Treatment

- ▶ Most common antibiotic is azithromycin, but several others may be effective

Primary Objective for Testing, Treatment & Exclusion

- ▶ Primary objective of testing, treatment and exclusion of pertussis cases and prophylaxis for those exposed to pertussis is to prevent illness in persons of increased risk of severe illness or in persons who may exposed those at high risk of developing severe disease

Primary Objective for Testing, Treatment & Exclusion

- ▶ Those at increased risk include (but not limited to): infants less than 12 months of age
- ▶ Immunocompromised persons
- ▶ Patients with neuromuscular disease
- ▶ Patients with moderate to severe lung disease including those with moderate to severe medically treated asthma

Notice

- ▶ 13 of 18 pertussis deaths in the United States reported to CDC in 2012, were among infants less than 3 months of age

Role for Schools

- ▶ Review immunization records to assure students and teachers are appropriately vaccinated and meet state immunization requirements
- ▶ Fully vaccinated children and adults can still get pertussis. However symptoms appear much less severe. Evaluate students for pertussis if they exhibit symptoms
- ▶ Severe cough
- ▶ Persistent cough lasting longer than 14 days

Exclusions

- ▶ Exclude student or adult diagnosed with pertussis until they have completed 5 full days of antibiotics or until 21 days after the cough has begun
- ▶ Siblings should stay at home who also have a cough until completing 5 full days of antibiotics

When to contact local Public Health?

If school has multiple cases of pertussis, this may represent an outbreak

Out breaks : Two or more cases involving two or more households clustered in time (e.g., occurring within 42 days of each other) and either epi-linked or sharing common space (e.g., in one building) where transmission is suspected to have occurred (e.g., a school). One case in an outbreak must be lab confirmed (PCR positive and meets case definition, or culture positive)

Other Interventions

- ▶ Exclusion of students with symptoms consistent with pertussis until seen by a health care provider (might require a note from provider)
- ▶ Offer students and staff with immune system compromising conditions or who are pregnant alternative assignments such as distance learning and duty reassignment
- ▶ Encourage social distancing
- ▶ Frequent hand washing
- ▶ Covering mouth and nose with inner elbow
- ▶ Increasing distance between desks in classroom
- ▶ Staying home when ill
- ▶ Avoiding close contact with ill individuals

Additional Recommendations

- ▶ School personnel should recommend Tdap vaccine for all staff who have not previously received it
- ▶ Educate yourself and school staff on signs and symptoms of pertussis

Resources

- ▶ Pertussis information sheet
- ▶ [Pertussis Information Sheet](#)
- ▶ frequently asked questions about Pertussis (whooping cough)
- ▶ [Frequently asked Pertussis questions](#)
- ▶ Pertussis Information and Guidelines for Schools
- ▶ [Pertussis guidelines for Schools](#)
- ▶ CDC pertussis page
- ▶ <http://www.cdc.gov/pertussis/>

Questions?
