

## Upper Canada District School Board

<b>PANDEMIC RESPONSE GUIDELINE</b>			
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## Introduction

Annual influenza epidemics occur because the influenza virus is able to change enough to cause infections within the general populations despite varying levels of immunity from previous infections. The influenza virus is also capable of major genetic changes known as “antigenic shift”. Influenza pandemic will result when the genetic shift causes the sudden and unpredictable emergence of a new influenza virus to which the population has no immunity.

Influenza pandemic is essentially an outbreak occurring over a large geographical area, often worldwide, affecting an exceptionally large proportion of the population with elevated mortality rates. In past century the following pandemics have occurred,

- the Spanish Flu (1918),
- the Asian Flu (1957)
- the Hong Kong Flu (1968)
- the H1N1 (2009)

Most notably, the Spanish Flu pandemic of 1918 resulted in approximately 20 million deaths worldwide. Mortality rates were reduced in both the Asian and Hong Kong pandemics due to improved health care. Experts are certain that pandemics will occur; although, the timing and pattern is unpredictable. Therefore, contingency planning is essential for an effective response.

The following conditions make influenza pandemic more likely:

- ✓ new influenza virus showing antigenic shift
- ✓ a susceptible population
- ✓ evidence that the virus is transmitted from person to person
- ✓ evidence of the “new virus” virulence

## Legal Obligations

1. The Medical Officer of Health determines the actions needed to be taken to protect the population from a communicable disease (Health Protection and Promotion Act 1990).

The Medical Officer of Health has the authority to issue an order if she/he is of the opinion, upon reasonable and probable grounds, that a communicable disease exists or may exist or that there is an immediate risk of an outbreak.

2. Duties of principal under Ministry of Education Act section 265 and the operation of schools under Ontario Regulation 298

## Methods

In 2009 a Task Force was convened and a review of our district’s emergency procedures, and infectious controls was completed. The Task Force included representatives from Labour, IT, Purchasing, Plant, Principals, Communications, Health & Safety, Emergency Planning and our EFAP provider. Since then UCDSB’s Joint Health & Safety Committee have reviewed the UCDSB Pandemic Response Guideline

guideline and provided updates.

## Guideline Overview

The guideline is described in the same manner as local Health Unit plans and the World Health Organization (WHO) pandemic phases to ensure clarity in public communication.

### Inter Pandemic Period

<i>PHASE 1:</i>	<ul style="list-style-type: none"><li>• No new influenza virus subtypes have been detected in humans.</li><li>• An influenza virus subtype that has caused human infection is present in animals.</li></ul>
<i>PHASE 2:</i>	<ul style="list-style-type: none"><li>• No new influenza virus subtypes have been detected in humans.</li><li>• However, a circulating animal influenza virus subtype poses a substantial risk of human disease.</li></ul>

### Pandemic Alert Period

<i>PHASE 3:</i>	<ul style="list-style-type: none"><li>• Human infection(s) with a new subtype, but no human to human spread or at most, rare instances in close contact only.</li></ul>
<i>PHASE 4:</i>	<ul style="list-style-type: none"><li>• Small cluster(s) with limited human to human transmission but spread is highly localized, suggesting the virus is not well adjusted to human hosts.</li></ul>
<i>PHASE 5:</i>	<ul style="list-style-type: none"><li>• Larger cluster(s) but human to human spread still localized, suggesting the virus is adapting to humans, but may not yet be fully transmissible (substantial pandemic risk).</li></ul>

### Pandemic Period

PHASE 6	<ul style="list-style-type: none"><li>• Pandemic Phase: increased and sustained transmission to the general public.</li></ul>
PHASE 7	<ul style="list-style-type: none"><li>• Return to Inter-Pandemic Period.</li></ul>

### Legal Basis

The Medical Officer of Health determines the actions needed to be taken to protect the  
UCDSB Pandemic Response Guideline

population from a communicable disease (Health Protection and Promotion Act 1990).

The Medical Officer of Health has the authority to issue an order if she/he is of the opinion, upon reasonable and probable grounds, that a communicable disease exists or may exist or that there is an immediate risk of an outbreak.

## **Definition of Illness and Reporting Requirements**

A reportable influenza case is defined by the presence of the following:

- fever  $> 38^{\circ}\text{c}$
- acute onset cough or sore throat, and
- malaise, myalgia (muscle discomfort) and/or fatigue

## **Testing**

Under the direction of the Medical Officer of Health, public health staff may complete appropriate testing to determine the exist of a specific virus or disease. The health unit may require access to schools for this purpose.

# UCDSB PANDEMIC GUIDELINE OVERVIEW

## *Inter Pandemic Period*

<i>STEP 1</i>	<ul style="list-style-type: none"><li>• Educate the school district and local community on the importance of influenza and novel virus surveillance.</li><li>• Educate the school district and local community on preventative measures to be taken.</li></ul>
<i>STEP 2</i>	<ul style="list-style-type: none"><li>• Review all infection control procedures, educate all plant staff on increased vigilance. *</li><li>• Institute communication strategies to students and parents in the community.</li></ul>

\* Infection control includes practices and procedures used to prevent disease transmission, and includes the knowledge and skills required to choose and maintain appropriate precautions.

## *Pandemic Alert*

<i>STEP 3</i>	<ul style="list-style-type: none"><li>• Educate and reinforce reporting requirements by Principals to Health Units (10% absentism of staff or students).</li><li>• At 10% absentism facilities department will deploy such cleaning and other operation as appropriate based on the guidance of the local health unit or other authorities.</li><li>• Encourage vigilance in handwashing techniques.</li><li>• Encourage use of all preventative programs.</li><li>• Reinforce cross training of jobs to ensure essential services.</li><li>• Reinforce education programs.</li><li>• Enhanced training of Staff.</li></ul>
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The goal of enhanced control practices are to:

- ✓ ensure a consistent, high standard infection control in all settings
- ✓ ensure there are appropriate procedures in place to respond to an outbre

## *Pandemic Alert (Continued)*

<i>STEP 4</i>	<ul style="list-style-type: none"> <li>• Convene Pandemic Response Task Force.</li> <li>• Encourage parents to find alternate childcare options.</li> <li>• Obey all Medical Officers orders, including school closure procedures.</li> <li>• Audit infection control practices. (Plant)</li> <li>• Institute infection control after closure procedures.</li> <li>• Audit controls at other sites.</li> <li>• Cross training with Health Units.</li> <li>• Check with suppliers.</li> <li>• Ensure staff availability.</li> <li>• Transportation to notify bus contractors.</li> <li>• Order disinfectant supplies.</li> </ul>
<i>STEP 5</i>	<ul style="list-style-type: none"> <li>• Institute communication plan Step 5 across the system.</li> <li>• Continue all procedures in Step 4.</li> <li>• Notify community use of school users of possibility of impending school closure.</li> <li>• Restrict and/or cancel community, volunteers, visitors access.</li> <li>• Institute IT support at homes for essential services.</li> <li>• EAP, confirm additional hours.</li> <li>• Transportation institutes enhanced infectious control.</li> </ul>

## ***Pandemic Period***

<b>STEP 6</b>	<ul style="list-style-type: none"><li>• All schools will, in all likelihood, be closed; however, the school may well be commandeered to provide functions under the Medical Officer of Health such as clinics information, dissemination points, daycare centres.</li><li>• Rigorous infection control procedures will be in place and staff access limited to essential services only.</li></ul>
<b>STEP 7</b>	<ul style="list-style-type: none"><li>• Educate Board's community on the importance of influenza and novel virus surveillance.</li><li>• Educate Board's community on preventative measures to be taken.</li><li>• Evaluate action plan.</li></ul>

**NOTE: It is important to note that pandemics are susceptible to waves.**

## ***UCDSB PANDEMIC GUIDELINE SPECIFIC ACTIONS***

### ***STEP 1 - PREVENTATIVE***

#### **Surveillance**

- Regular monitoring of the Upper Canada District School Board's communities assists the public health and may mitigate the effects of any influenza spread.
- All schools should contact the local health unit with updates on absenteeism over 10%.
- At 10% absentism facilities operations managers will direct staff at an affected school / facility to deploy such cleaning and other operation as appropriate based on the guidance of the local health unit or other authorities, as needed.

#### **Education**

- Teaching students and staff on the importance of frequent and effective handwashing is vital to control of all infectious diseases.
- Encouraging staff and students to attend flu vaccination clinics as part of their regular health routine is vital.

### ***STEP 2 - CONTROL(S)***

- The Operations & Maintenance has revised and reviewed their cleaning practices in relation



to viral containment. The custodian mentor leaders have received enhanced infection control procedures.

- However, all employees would be advised to recognize that common phones, photocopy machines, toys, door handles etc. can contain pathogens and are sources of both contamination and spread. Wiping/cleaning with sanitizing cleaners will assist us with controls.

### ***STEP 3 - REINFORCEMENT***

- Since flu outbreaks tend to be cyclical with gaps between events, it is useful to remind all our communities of the potential for outbreaks early in the fall.
- Reinforcement of good handwashing techniques is vital to containment.
- Viruses can live (untreated) on surfaces for 48-72 hours. Therefore, even with enhanced cleaning employees must be encouraged to show vigilance.

#### **Communication to School Administrators and Managers**

- Sample Letter #1 has been prepared to inform Administrators and Managers that the current outbreak has entered into the “pandemic alert” phase and the importance of reporting and monitoring the local Health Units. It is important to note that consistent messaging is vital to the containment of rumors and misinformation.

### ***STEP 4 - ACTION***

- Convene Pandemic Response Task Force.
- Small clusters in localized communities may be obvious. Parents are encouraged to find alternative day care options.
- Some schools may be closed to community use.
- Facilities will be monitoring cleaning practices at some sites.
- Needed supplies will be confirmed with suppliers as the possibility of shortages may occur.
- Human Resources staff will be monitoring the availability deployment of staff.

### ***STEP 5 - ACTION***

- Supplies may be stockpiled.
- Community use of schools may be restricted.
- Relevant agencies will be informed e.g. E.A.P.

### ***STEP 6 - ACTION***

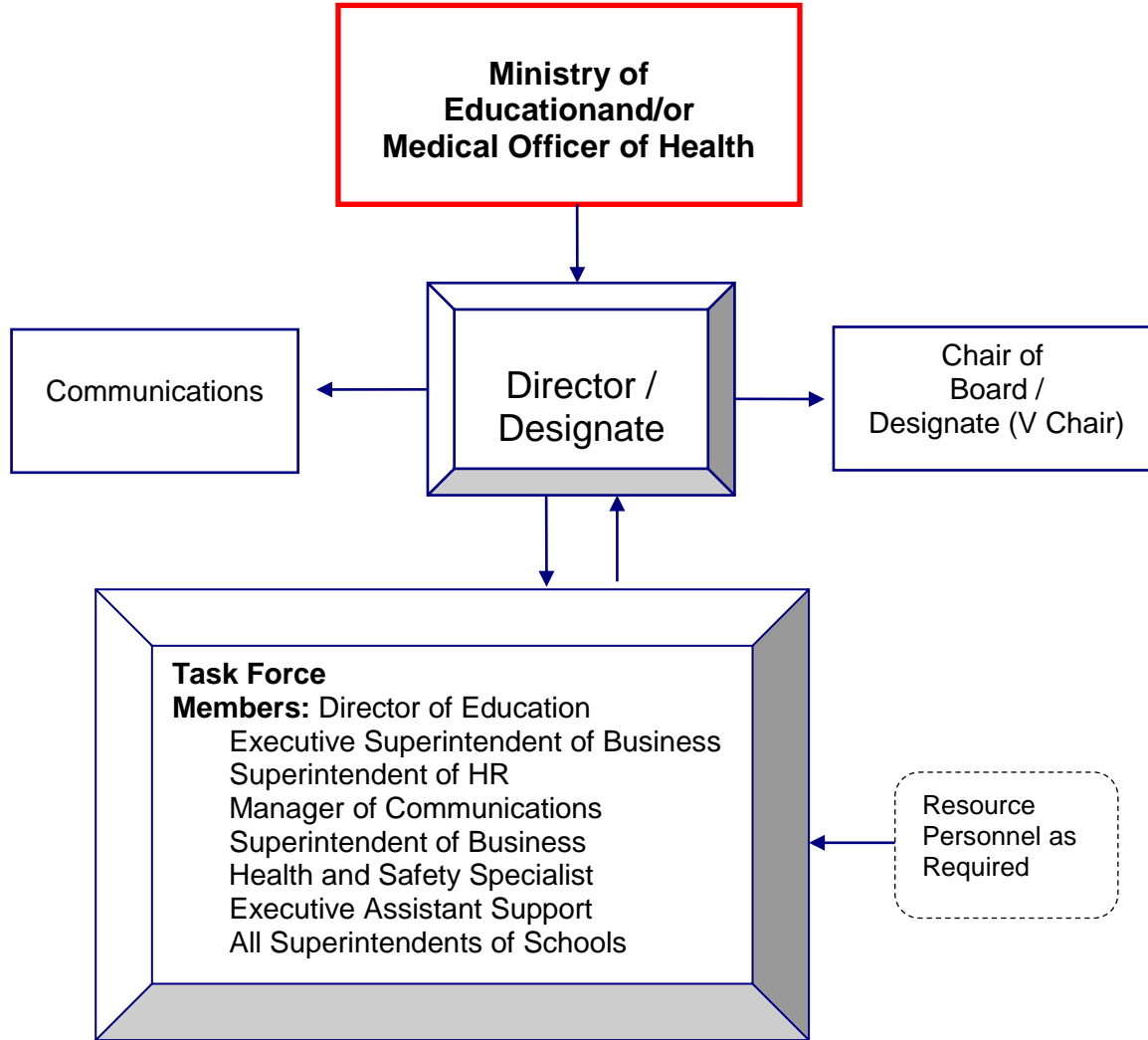
- All or specific schools to be closed subject to the direction of the Medical Health Officer.
- Access to premises will be restricted.

## ***STEP 7 - EVALUATION***

- The importance of reviewing procedures and responses can not be over emphasized.
- Surveys of the district's response in an emergency can be vital in ensuring future responses.
- Reassurance of the district's school communities will be vital to a post pandemic phase.
- Recognition that students and staff may be grieving and need of support during this phase.

# PANDEMIC RESPONSE FLOW CHART

All external communications are issued by the Medical Officer of Health.  
All internal communications and directives will be through the Director's office.



## ROLES AND RESPONSIBILITIES

### *Director*

- ✓ all communication from the Medical Officer of Health will be transmitted to the Director/Designate; the Ministry of Health will handle all media requests for information.
- ✓ ensure all communication directives are promptly communicated.
- ✓ monitor the status of the school communities.
- ✓ convene briefing sessions as needed.
- ✓ convene monitoring Task Force as needed.

### *Communication and Public Relations*

Below is an overview of the needs and responsibilities to be delegated and assumed in the event of a pandemic. These are broad areas of concern. Each of these areas of concern will be further broken down to specific tasks and delegation of responsibility in the following pages.

Public Relations of Board Operations	When a pandemic occurs, the key spokesperson to the media is the Regional Medical Officer of Health, not the Board. In conjunction and co-operation with the Health Units, the communication with media by the school board would address school or school district-specific concerns as outlined below.	Medical Officer of Health
	A critical area for the Board is that of public relations activities, including press releases/conferences, radio and television advertisements, private presentations to such groups as Regional Councils/Municipalities, letters to parents/students, meetings of Student Councils / School Councils, all initiation and discussion will be provided by the Board.	Director of Education or Designate / Manager of Communications
Communications	The Director/Designate will govern public relations and internal communication with respect to schools.	Pandemic Task Force

<b><i>Internal Communications liaison between Pandemic Task Force and Principals / Vice-Principals / Unions</i></b>	Principals and Vice-Principals shall refer to and shall receive from the Director or designate all directions and communications from the Pandemic Task Force except to the extent the Pandemic Task Force may choose to make direct communication by voice mail or e-mail. Principals and Vice-Principals will be expected to monitor voicemail and e-mail regularly throughout the school day.	Director of Education or Designate
<b><i>Communications /Electronic</i></b>	Any electronic communications related to the pandemic will be approved in advance by the Director/designate.	Director of Education or Designate
<b><i>Maintenance of Electronic Communications</i></b>	Specific personnel may be required to maintain e-mail and the Board’s public Web site to maintain ongoing communication and to ensure updates are communicated in a timely manner to schools, other staff and to the media and public.	Pandemic Task Force / Chief Information Officer
<b><i>Visitors to Schools</i></b>	It may be necessary to restrict access to our buildings. Under the direction of the Director or designate, staff may be required to monitor and / or restrict access.	Director of Education or Designate / Pandemic Task Force
<b><i>Liaison Responsibilities</i></b>	Communications with the Ministry of Education, the Ministry of Labour, and other board, would be conducted only through the Director of Education.	Director of Education or Designate / Pandemic Task Force
<b><i>Community Use of Schools</i></b>	Community/school activities shall continue until the Director’s assessment determines that such activities may pose a risk.	Director of Education or Designate
	A letter needs to be sent to all community school users and permit holders, to indicate that the pandemic may result in school closures. Where it is necessary to close a building to the public, every effort must be made to inform permit holders as early as possible.	Director of Education or Designate

<b><i>Reports As Required</i></b>	The Director in consultation with the Task Force will monitor the situation on a daily basis and provide reports to the Pandemic Task Force and make recommendations as required.	Director of Education or Designate
<b><i>Impact on Learning Environment</i></b>	A directive may be provided with respect to the cancellation of classes. Classes may be rescheduled or alternative learning sites provided after consultation with the Task Force.	Pandemic Task Force

## **Pandemic Task Force**

1. Purpose  
The purpose of the Pandemic Task Force is to provide direction and guidance to the school district and staff in the event of a community pandemic.
  
2. Basic Goals  
The basic goals of the Upper Canada District School Board during a pandemic are:
  - a) to ensure systematic co-ordinated response that ensures the safety of students, staff and school properties.
  - b) to ensure clarity in all communications.
  - c) to provide a forum for effective problem solving.
  - d) to minimize any detrimental effect to the system.
  - e) to collaborate with community agencies as necessary.
  - f) to co-ordinate an expeditious and normal return to school functions.
  - g) to foster and maintain positive community relationships.
  - h) to participate in any/all debriefing processes.
  
3. Basic Organization Objectives  
The organization’s objectives are to ensure the school district is responsive rather than reactive. The Task Force will plan orderly closures, audit infection control, monitor communications, respond to requests for services by community agencies, and ensure all processes are followed prior to facilities re-opening.

### ***Pandemic Task Force Membership***

Director of Education  
 Executive Superintendent of Business  
 Superintendent of HR  
 Manager of Communications  
 Health and Safety Specialist  
 Executive Assistant Support  
 All Superintendents of Schools

### ***Resource Personnel (as Required)***

Manager, HR

Manager of Facilities  
Principals / VP as designated  
Comptroller of Finance  
Manager Purchasing  
Manager of Information Systems Services  
Trustee Liaison Officer  
Compensation and Wellness Specialist (EFAP)  
Chief Psychologists

### ***Role of Task Force***

1. to make rapid responsive decisions;
2. to assume responsibilities for and assist communications and information dissemination,
3. to delegate spokespersons as required;
4. to advise and make recommendations to the Director/ Designate;
5. to make decisions and give clear directions to meet all contingencies; and
6. to conduct debriefing process(es).

### ***Principals, Supervisors, Managers***

- ✓ provide consultive advice to the Task Force
- ✓ inform students, staff and parents about the symptoms and measures to be taken to reduce exposure
- ✓ request that symptoms be reported to the principal, manager or supervisor
- ✓ contact the local Health Units to report outbreaks in the school
- ✓ contact the local Health Units to report an outbreak of fever, acute onset of cough, and/or sore throat, malaise, and myalgia (muscle discomfort) and/or fatigue
- ✓ follow all safe schools and school closure procedures
- ✓ follow all communication directives
- ✓ maintain contact with superintendents
- ✓ identify issues for Task Force problem solving
- ✓ facilitate and co-operate with community agencies in school utilization issues

### ***Health and Safety Specialist***

- ✓ provide consultive advice to the Task Force
- ✓ maintain contact with Plant and ensure infectious control audits are complete
- ✓ maintain links with other school boards for enhanced problem solving
- ✓ maintain contact with the Joint Health and Safety Committee
- ✓ identify issues for Task Force problem solving

### ***Facilities, Services and Plant Operations Department***

- ✓ provide consultive advice to the Task Force
- ✓ develop, implement and evaluate infection control program
- ✓ train identified personnel with enhanced infection control procedures
- ✓ assess infection control procedures
- ✓ institute and inspect all post-closure and pre-opening procedures
- ✓ assist community agencies as necessary

- ✓ provide enhanced security as warranted
- ✓ identify issues for Task Force problem solving
- ✓ At 10% a facilities operations manager will direct staff at an affected school to deploy such cleaning and other operational measures as appropriate based upon the guidance of the local health unit or other authorities as needed.

## **Employees:**

The control of influenza diseases is the responsibility of all employees of the Upper Canada District School Board. Maintaining proper immunizations, applying hygiene principles when exposed to viruses, bacteria and body fluids requires knowledge, vigilance and personal responsibility.

Principals/Managers/Supervisors have enhanced responsibilities (Education Act, Occupational Health & Safety Act).

When an outbreak occurs, communication is essential. Employees play a vital role in educating and disseminating accurate information. All enquiries should be directed promptly to your direct principal/manager/supervisor.

## **Designated Services:**

Designated employees are expected to report to work. Where their safety may be in jeopardy, the Pandemic Response Task Force will advise the Board's Business Continuity Committee on operational needs.

The Board's Business Continuity Committee has created and maintained a series of business continuity plans for each business unit that focuses on mitigating risks associated with reduced staffing levels, inability to access primary work locations, and potential IT service outages. These plans ensure that business critical services can continue to operate effectively in a variety of scenarios, including pandemic. Business critical services include payroll, HR, student information system, electronic communication tools and file storage.

Notably, in regard to pandemic risk, the following topics in the business continuity plans are relevant:

- Reinforce the need for cross training in critical job roles to ensure that key tasks can be completed
- Reinforce that staff equipped with laptops and smartphones are to bring the devices home with them every day, to mitigate impact of a quarantine situation
- Encourage managers to proactively allow staff, where possible, to work from home on a staggered schedule to test remote access to key business systems and files, and ensure that ongoing communication can be achieved
- Update communication contact lists for staff, agencies and vendors, and print them for offline access in the event that IT systems are unavailable

In the district's schools and offices locations, facilities personnel will be designated by their



managers.

Some district sites may be appropriated by community agencies ie. Triage centres, information depots, crucial supply lines; therefore, adequate staffing must be maintained.

The following is a list of potential schools and board offices operations scenarios:

- All schools open / all board offices open
- Some schools closed / all board offices open
- Some schools closed / some board office closed
- All schools closed / all board office closed

## Education Programming:

In consultation with the local Health Units, an education program has been designed to:

- Augment prevention initiatives
- Ensure a consistent, sustained approach
- Ensure wide circulation of preventative materials

Promoting and sustaining healthy working and learning environments is a priority, especially during the cold and flu season. To ensure that schools are safe and healthy spaces for students and staff, it is important to remember that curriculum documents provide overall and specific guidelines as well as expectations that can assist in teaching students about the importance of high levels of self-care.

While our curriculum documents provide many opportunities to teach and learn about creating and sustaining healthy environments, the Health and Physical Education curriculum also places a major emphasis on connections with community partners. Cold and flu season is a perfect time for continued relationships with local Health Units. Health care professionals create resources and post information that can assist school staff in communicating and teaching important health concepts (i.e. handwashing, sneezing and coughing in sleeves).

More specially the Eastern Ontario Health unit and the Leeds, Grenville & Lanark Health Unit have a number of resources that can be accessed on their web sites at the following links:

- Leeds, Grenville & Lanark District Health Unit: <https://healthunit.org/>
- Eastern Ontario Health Unit: <https://eohu.ca/en>

## Infection Control Procedures

The Operations & Maintenance has developed enhanced procedures that will be instituted when the situation warrants. These procedures have been developed in consultation with a Certified Infection Control Consultant. Equally important is that additional training has been developed to ensure understanding and compliance with all procedures and equipment:

### Step 1

- Educate custodians (posters on hand washing)
- Emphasize the importance of proper cleaning techniques, and proper washroom sanitation through Supervisors, emails, etc...
- Stress the importance of regular disinfection of contact surfaces such as

- door hardware and light switches
- Continued use of the disinfectant cleaner

#### Step 2

- Train Mentors on an enhanced approach to washroom sanitation with emphasis on chemical contact time and workflow procedures
- Order the needed supply of concentrated disinfectant cleaner per school in readiness

#### Step 3

- Mentors to train elementary and secondary custodians on new procedures
- Implement the enhanced practices with continued use of disinfectant or comparable product

#### Step 4

- Promote and educate a concentrated effort by all staff to prioritize the disinfection of contact surfaces while letting some other duties lag
- Order disinfectant and all supplies for all schools (6-8 weeks supply)
- Introduce the disinfectant into the system as a second wave of attack against a more resistant virus
- Reinstall paper towel dispensers for 4 month period
- Order and supply all washrooms with paper towels

#### Step 5

- Assuming the school closes, the facilities crew will report to an assigned worksite and wash all contact surfaces to prepare the school for re-opening

they do not work against influenza. Some people with influenza may need antibiotics for secondary infections caused by bacteria.