BRANT HALDIMAND NORFOLK
CATHOLIC DISTRICT SCHOOL BOARD

Pandemic Preparedness and Response Plan

February 18, 2010
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Purpose of Pandemic Preparedness and Response Plan

That the Brant Haldimand Norfolk Catholic District School Board (BHNCDSB) be prepared for a pandemic or other large infectious disease event.

That the BHNCDSB communicate effectively with stakeholders about that plan and its procedures prior to an actual event.

Introduction

Public health officials from around the world warn that an influenza pandemic is overdue. These warnings have been underscored by the spread of the avian (bird flu) influenza in Southeast Asia and the resulting toll on human life. Increasingly, health officials are talking not about “if”, but “when” the next pandemic will occur. Pandemic Planning is, therefore, essential for all.

Work has occurred at the Canadian federal government level that has resulted in the development of a contingency plan that reflects the role of the federal government in a pandemic influenza response. At the provincial level, the Ministry of Health and Long-Term Care has developed the Ontario Health Plan for an Influenza Pandemic (OHPIP) that is to guide health planning and response efforts at both the provincial and local levels across Ontario.

The Brant County Health Unit (BCHU) and the Haldimand-Norfolk Health Unit (HNHU) have both developed comprehensive pandemic response plans that provide an integrated response framework for health and emergency services in Brant, Haldimand and Norfolk Counties.

Given the potential for an influenza pandemic occurrence and the impact it could have, it is important for every organization to prepare a response plan. The Brant Haldimand Norfolk Catholic District School Board recognized the need and initiated a Pandemic Planning Committee in the fall of 2009 with the purpose of creating a Pandemic Preparedness and Response Plan.

Background

A pandemic is essentially an outbreak occurring over a large geographical area, often worldwide, affecting an exceptionally large portion of the population with elevated mortality rates. Three pandemics have occurred in the last century – the Spanish (1918), the Asian (1957) and the Hong Kong (1968). 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 another pandemic will occur, although the timing and pattern are unpredictable; therefore, contingency planning is essential for an effective response.

Annual influenza epidemics occur because the influenza virus is able to change enough to cause infections within the general population 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.
Impact on Our Local Communities

The estimated 2006 population of the combined communities of Brant County, Haldimand County, Norfolk County and the City of Brantford is 232,875. (Source: Statistics Canada, 2006 Community Profiles)

Predictions from all levels of government indicate that:
- 40% – 60% of staff could be absent at some point during the course of the pandemic,
- the potential death rate among staff and students who contact the virus could be 1% – 2%,
- two distinct waves of illness, 3 – 9 months apart and each lasting 6 – 8 weeks, could occur.

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

Legislation

A Medical Officer of Health (provincial or county) has the authority, under Section 22 of the Health Protection and Promotion Act, R.S.O. 1990, to issue an order to control communicable diseases if s/he is of the opinion upon reasonable and probable grounds that a communicable disease exists, may exist or that there is an immediate risk of an outbreak.

The Medical Officer of Health determines the actions needed to be taken to protect the population from a communicable disease. These could include an order requiring an individual to isolate himself or herself, to place himself or herself under the care and treatment of a physician, or to submit to an examination by a physician.

The Personal Health Information Protection Act, 2004 (PHIPA) regulates the collection, use and disclosure of personal health information. The Act also specifies that during certain circumstances, consent to collect this information is not required. During a pandemic, the BHNCDSB may be requesting information that will assist health experts in determining the extent of the illness. This may include student/staff absence details and contact information to assist in investigations. The investigation may include illness details to monitor disease spread, evaluate prevention and disease measures, and determine further actions.

World Health Organization’s (WHO) Phase Approach

In the 2009 revision of the phase descriptions, WHO has retained the use of a six-phased approach for easy incorporation of new recommendations and approaches into existing national preparedness and response plans. The grouping and description of pandemic phases have been revised to make them easier to understand, more precise, and based upon observable phenomena. Phases 1–3 correlate with preparedness, including capacity development and response planning activities, while Phases 4–6 clearly signal the need for response and mitigation efforts. Furthermore, periods after the first pandemic wave are elaborated to facilitate post-pandemic recovery activities.

World Health Organization Pandemic Phases

<table>
<thead>
<tr>
<th>Phase of Pandemic Alert</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Phase 1</td>
<td>In nature, influenza viruses circulate continuously among animals, especially birds. Even though such viruses might theoretically develop into pandemic viruses, in Phase 1 no viruses circulating among animals have been reported to cause infections in humans.</td>
</tr>
<tr>
<td>Phase of Pandemic Alert</td>
<td>Description</td>
</tr>
<tr>
<td>------------------------</td>
<td>-------------</td>
</tr>
<tr>
<td>Phase 2</td>
<td>In Phase 2 an animal influenza virus circulating among domesticated or wild animals is known to have caused infection in humans and is, therefore, considered a potential pandemic threat.</td>
</tr>
<tr>
<td>Phase 3</td>
<td>In Phase 3, an animal or human-animal influenza reassortant virus has caused sporadic cases or small clusters of disease in people, but has not resulted in human-to-human transmission sufficient to sustain community-level outbreaks. Limited human-to-human transmission may occur under some circumstances; for example, when there is close contact between an infected person and an unprotected caregiver. However, limited transmission under such restricted circumstances does not indicate that the virus has gained the level of transmissibility among humans necessary to cause a pandemic.</td>
</tr>
<tr>
<td>Phase 4</td>
<td>Phase 4 is characterized by verified human-to-human transmission of an animal or human-animal influenza reassortant virus able to cause “community-level outbreaks.” The ability to cause sustained disease outbreaks in a community marks a significant upwards shift in the risk for a pandemic. Any country that suspects or has verified such an event should urgently consult with WHO so that the situation can be jointly assessed and a decision made by the affected country if implementation of a rapid pandemic containment operation is warranted. Phase 4 indicates a significant increase in risk of a pandemic, but does not necessarily mean that a pandemic is a forgone conclusion.</td>
</tr>
<tr>
<td>Phase 5</td>
<td>Phase 5 is characterized by human-to-human spread of the virus into at least two countries in one WHO region. While most countries will not be affected at this stage, the declaration of Phase 5 is a strong signal that a pandemic is imminent and that the time to finalize the organization, communication, and implementation of the planned mitigation measures is short.</td>
</tr>
<tr>
<td>Phase 6</td>
<td>Phase 6, the pandemic phase, is characterized by community level outbreaks in at least one other country in a different WHO region in addition to the criteria defined in Phase 5. Designation of this phase will indicate that a global pandemic is underway.</td>
</tr>
<tr>
<td>Post-peak Period</td>
<td>During the post-peak period, pandemic disease levels in most countries with adequate surveillance will have dropped below peak observed levels. The post-peak period signifies that pandemic activity appears to be decreasing; however, it is uncertain if additional waves will occur and countries will need to be prepared for a second wave. Note: Previous pandemics have been characterized by waves of activity spread over months. Once the level of disease activity drops, a critical communications task will be to balance this information with the possibility of another wave. Pandemic waves can be separated by months and an immediate “at-ease” signal may be premature.</td>
</tr>
<tr>
<td>Post-pandemic Period</td>
<td>In the post-pandemic period, influenza disease activity will have returned to levels normally seen for seasonal influenza. It is expected that the pandemic virus will behave as a seasonal influenza A virus. At this stage, it is important to maintain surveillance and update pandemic preparedness and response plans accordingly. An intensive phase of recovery and evaluation may be required.</td>
</tr>
</tbody>
</table>

(Source: Statistics Canada, Current WHO Phases of Pandemic Alert)
Brant Haldimand Norfolk Catholic District Board’s Three-Level Approach

The Brant Haldimand Norfolk Catholic District School Board recognizes that the WHO is the world authority on health matters. To help guide local response planning for an influenza pandemic, the WHO has identified the phases of a pandemic. Although a ‘phase specific approach’ is warranted during a pandemic, there are limitations to this approach based on severity of illness.

The Brant Haldimand Norfolk Catholic District School Board has taken a ‘Three Level’ approach to pandemic planning based on WHO’s identified phases of pandemic alert. This plan is a ‘fluid’ document and is updated as a situation develops.

The Brant Haldimand Norfolk Catholic District School Board is always in a state of alertness to address infection control issues. Detailed actions have been designated for each level and will be executed based on direction from the local health units and the pre-determined level action items.

BHNCDSB Three-Level Approach

<table>
<thead>
<tr>
<th>Levels and Risk Rating</th>
<th>BHNCDSB Level Action Item Summary</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Level 1</strong> Low risk: No contagious disease threats.</td>
<td>Follow normal standards and frequency of cleaning with regular normal cleaning products. Educate both staff and students on proper hygiene practices such as proper hand washing, covering your cough and staying home when ill.</td>
</tr>
<tr>
<td><strong>Level 2</strong> Medium risk: Highly contagious pathogen in the community area.</td>
<td>Increase reminders for both staff and students on proper hand washing, covering your cough and staying home when ill. Moderately increase the frequency of cleaning all areas using the recommended anti-viral cleaner. Deploy alcohol-based hand rubs in all elementary classrooms and in secondary school high-traffic areas like entry ways, cafeterias and office areas.</td>
</tr>
<tr>
<td><strong>Level 3</strong> High risk: Highly contagious pathogen in the facility/location.</td>
<td>Monitor facility/location absenteeism rates for both staff and students. Increase frequency of reminders about hand washing, covering your cough and staying home when ill. Increase vigilance in identifying students and staff who are ill throughout the day and send them home. Increase cleaning standards and frequency of cleaning using the recommended anti-viral cleaner. This increased standard includes ensuring that all horizontal surfaces (except floors) are being cleaned on a daily basis.</td>
</tr>
</tbody>
</table>

General Information

The health and safety of staff and students is of major importance and will be closely monitored. If health or safety becomes a concern, the Director/designate will consider recommending the closure of specific sites. Special arrangements may be necessary for medically-at-risk students and staff as soon as a pandemic alert is declared in Ontario. It is also possible that the local Medical Officer of Health may make recommendations regarding the closure of individual facilities/locations. It should be noted that while some of the facilities/locations are open during a declared pandemic, normal program expectations and service levels may not be met.

In terms of preparing for the impact of a pandemic alert in the work environment, it has been projected that up to 40% – 60% of the workforce may be absent due to the effects of the virus on individuals and families.
Operations

Organizational Structure

When the pandemic alert is declared in Ontario, the following organization will be implemented:

1. The Director/designate will be responsible for directing the system on a day-to-day basis;
2. A special committee called the Pandemic Committee will be created by the Director of Education. The purpose of the Pandemic Committee is to act as a resource and make recommendations to the Board’s senior staff. The Pandemic Committee shall consist of the Director of Education, Superintendents of Education, the Associate Director Corporate Services, Principal Leaders, Manager of Human Resources, the Coordinator of Communications and Community Relations, Manager of Facility Services, Manager of Transportation, Manager of Information Technology, Custodial Supervisor and the Human Resource Coordinator responsible for health and safety. It shall be the purpose of the Pandemic Committee to act as a resource and to make recommendations to the Director/designate.

Role of the Director/designate

1. To direct the overall operation of the system.
2. To receive updates and reports from the Medical Officer of Health, Superintendents of Education, and the Coordinator of Communications and Community Relations.
3. To make decisions regarding the regional (meaning county by county) operation of the Board.
4. To review information items and media releases prepared by the Coordinator of Communications and Community Relations and to authorize the sending of media releases.
5. To report to the Board of Trustees.
6. To liaise with the Brant County Health Unit and the Haldimand Norfolk Health Unit.
7. To determine the closing of any facility/location due to excessive absenteeism.

Role of the Pandemic Committee

1. To make recommendations on the overall operation of the system, as needed.
2. To act as a resource to the Director/designate.
3. To recommend courses of action to the Director/designate.
4. To review communications.
5. To act as an emergency resource for Superintendents of Education, Principals, Managers and other Board personnel.

Communications

Goals

The Brant Haldimand Norfolk Catholic District School Board’s Pandemic Preparedness and Response Plan requires that stakeholders are:

- confident that the Board is prepared for a pandemic or other large infectious disease event,
- aware of the ways to get information and provide feedback about the Board’s plan; and
- highly satisfied at all times with the amount of information they are receiving about the status of programs and services.
Spokesperson

The Director/designate, Chair of the Board and/or the Coordinator of Communications will speak on behalf of the Board publically during a pandemic. All requests for information that is not already shared with the general public should be channeled to this group.

Key Messages

- The Brant Haldimand Norfolk Catholic District Board has a pandemic plan that it will follow. The Board is prepared for a pandemic or other large infectious disease event. Our plan is available to staff, parents, students and the community for their information and feedback.
- The top priority during a pandemic is the health and safety of our students and staff.
- The Brant Haldimand Norfolk Catholic District School Board’s intent is to keep facilities/locations open as long as it is safe to do so.
- Non-essential services may be halted to focus on providing the most necessary services to our community.
- During a pandemic or other large infectious disease event, the Brant Haldimand Norfolk Catholic District School Board will follow the advice and guidance of provincial and local public health officials who have the expertise to assess the level of health risk posed by a specific situation.

Strategies

- Post pandemic plan on website.
- Communicate pandemic plan to all employees. Create a template script and package that facility/location administrators and supervisors can use to communicate with their staff. Roll out an infection prevention program.
- Connect with representatives of staff associations to communicate information around the implementation procedures of the pandemic plan.
- Provide updates and opportunities for input from Trustees and senior administration.
- Share details of the pandemic plan with childcare providers located in Brant Haldimand Norfolk schools.
- Establish a Pandemic section on bhncdsb.ca (accessible by all) and the Board’s intranet (resources - accessible by employees).
- Create a dark site to handle www.bhncdsb.ca website traffic.
- Provide information for staff, parents and community members explaining that the Board is now in pandemic response mode. Explain the main ways to access information—website, facility/location voicemail, media reports, etc.

Level 1 Operational Procedures

Facility/Location Procedures

- Follow normal standards and frequency of cleaning with regular normal cleaning products.

Communication Procedures

- After consulting with public health authorities to gain reassurances that there is no imminent health concern in our communities, the Board will communicate to reassure staff, parents and other stakeholders of our commitment to the health and safety of our students and staff.
Educate both staff and students on proper hygiene practices such as proper hand washing, covering your cough, and staying home when ill. Use website to provide factsheets and health expert contact information.

Use the heightened interest to make sure stakeholders understand the Board’s contingency plan and how they can access information.

Communicate with parents and the community that the Board has a pandemic plan. Provide them with instructions to access the plan.

Level 2 Operational Procedures

Facility/Location Procedures

- Moderately increase the frequency of cleaning all areas using the recommended anti-viral cleaner.
- Deploy alcohol-based hand rubs in all elementary classrooms and in secondary school high-traffic areas like entry ways, cafeterias and office areas.

Communication Procedures

- Continue to consult with public health authorities to gain reassurance that there is no imminent health concern in our communities. The Board will continue to communicate to reassure staff, parents and other stakeholders of our commitment to the health and safety of our students and staff.
- Increase reminders to both staff and students on proper hygiene practices such as proper hand washing, covering your cough and staying home when ill. Use website to provide factsheets and health expert contact information.
- Continue to use the heightened interest to make sure stakeholders understand the Board’s contingency plan and how they can access information.
- Continue to emphasize awareness of the services that have been identified as essential during a pandemic and those that would be curtailed during pandemic response mode.
- The Coordinator of Communications and Community Relations provides information received from public health authorities to the Director/designate. Once in a Level 2 Risk Response mode, the Board will act as predetermined in the Pandemic Preparedness and Response Plan
- Provide scripts and handouts for administrators to use in conducting meetings of all full-time and part-time permanent and casual staff, so they can deliver the same consistent messages to all staff at their location.
- Superintendents and Managers will hold staff meetings to provide information about how their department will operate during pandemic response mode.
- All meetings will emphasize the message that, in the event of a pandemic response, the Board expects staff to come to work if they are well, unless public health authorities or the Board closes their facility/location. Provide staff with direction about how to find out if their facility/location or worksite is open or closed (i.e., link on home page of www.bhncdsb.ca, email, media, etc.).

External Communication

- Update website to provide most current information.
- Provide information for staff, parents and community members explaining that the Board is now in pandemic response mode. Explain the main ways to access information—website, facility/location voicemail, media reports, etc.
- Share information with all media, informing them that the Brant Haldimand Norfolk Catholic District School Board will go into Level 3 Risk Response mode if there is a confirmed pandemic or large infectious disease event. This will provide the media with the opportunity to broadcast BHNCDSD activity.
- Communicate with parents and the community that the Board has a pandemic plan. Provide them with instructions to access the plan.
Level 3 Risk Operational Procedures

- The Director/designate will assemble the Pandemic Committee.
- It is the BHNCDSDB’s intent to continue to conduct affairs in accordance with existing policies and operating procedures; however, once a pandemic is declared in Ontario there may be some operational modifications that could be made, based on direction from the Director/designate in consultation with the Health Units.
- As required, updated reports from all Superintendents/Managers including employee and student absenteeism reports, will be submitted to the Coordinator of Communications and Community Relations. The data will be compiled and submitted to the Ministry of Education, as requested.
- Requests by the media will be referred to and received by the Coordinator of Communications and Community Relations. Facilities/locations will be off limits to all media.
- The Director/designate shall be consulted in all cases where an emergency decision must be made.
- Periodically, the full Pandemic Committee will review the data that has been received. The Committee will make assessments of situations and will develop a series of recommendations for the Director/designate. In addition, media releases (substance) will be determined. The Pandemic Committee shall decide how to handle specific requests by the media brought forward by the Coordinator of Communications and Community Relations and Community Relations.
- The Director/designate will be the main contact between the employee group representatives. Each employee group representative will receive updates. All major questions/concerns will be posed through the employee group representative to the Director/designate.

Facility/Location Procedures

Increased Cleaning Standard

The following procedures are in place to help prevent the spread of all communicable diseases:

- The recommended anti-viral cleaner, in combination with microfibre cloth, is an effective virucidal agent to be used in your daily cleaning and disinfecting routine.
- Dilute only with cold water directly from the Ready To Dispense (RTD) system. Hot water can enhance the growth of various germs and bacteria. Follow all MSDS instructions from the manufacturer.
- Clean and disinfect daily all door handles, panic bars, drinking fountains, sinks, faucets, telephones, handrails, and washroom fixtures.
- Disinfect all lunch area flat surfaces on a regular basis.
- Increase daytime washroom patrol to replenish hand soap. Pay particular attention to pre- and post-recess times.
- Address accidental release of body fluids immediately.
- Change bucket water more frequently. Do not wash floors with dirty solution.
- Remember to wear rubber gloves.

(Source: H1N1 Cleaning Protocol memo sent by Don Zelem, Manager of Facilities & Construction Projects, October 29, 2009.)

Other

The following measures may be taken once a Level 3 Risk Rating is reached in a facility/location. If a temporary facility/location closure is required, it will be at the call of the Director/designate. Modifications may vary by location depending on gathered data from the facility/location.

After Hours School Permits

- Existing/new permits for school facility use will be cancelled/not issued at any closed school.

Before and After School Care

- Before and After School Care programs will be cancelled at any closed school.
Board Meetings
- Board meetings be held as scheduled and more frequently, if necessary, and may be held electronically.

Community Use of School
- Access to Community Use of School will be cancelled at any closed school, i.e., before and after school program; fitness centre, etc.

Computer Support
- Computer support will continue to operate provided sufficient staff is available. Items related to pandemic alert communications will be given highest priority.

Co-op Placements
- Co-op placements will be cancelled at any closed facility/location.

Courier
- The courier will operate as usual.

Custodial Services
- Frequency of services may be altered due to staffing levels and to focus on infection control.

Extracurricular Activities
- Extracurricular activities may be cancelled.

Field Trips/Excursions
- There may be a moratorium on field trips/excursions.

Food Programs
- School based food programs may be cancelled.

Garbage Collection
- If possible, the normal process for garbage collection will be maintained.

Home Instruction
- Home instruction may be cancelled.

Instruction/Evaluation/Reporting
- Where possible, the regular instructional program and those activities related to instruction, evaluation and reporting will continue.

Maintenance
- To the best of our ability, the normal procedure shall continue, i.e., emergency calls will be directed to Maintenance Services with a follow-up to the Facilities Manager as soon as possible.
- Maintenance items that are not of an emergency nature should be communicated by telephone to the Facilities Manager in the normal manner.
- Board staff and outside contractors will be used for all types of emergency maintenance. Routine maintenance may be suspended.

Meetings
- Meetings that take administrators or staff out of facilities/locations may be either cancelled or held electronically.
Occasional Teachers
- The normal procedure will continue and central dispatch will be notified of any closed facility/location.

Professional Development Activities
- Professional development activities may be cancelled. Attendance at external conferences by staff may be cancelled.

School Councils
- Principals will have a plan for ongoing communication with the Chair of their School Council.

Security of Facilities
- While facilities/locations are open, security will continue in accordance with current procedures.

Student Transportation
- Subject to daily review, buses maintain regular schedules while facilities/locations remain open.
- Our contracted bus operators have informed us that when the absenteeism level of bus drivers reaches approximately 5%, it will then jeopardize their ability to provide adequate level of service.

Supplies Orders
- If possible, the normal process for order and delivery of supplies will be maintained.

Tragic Events Response Teams
- The Tragic Events Response Teams may not be deployed in the usual manner.

Volunteers
- The present practice regarding volunteers in Brant Haldimand Norfolk Catholic District School Board facilities/locations will be reviewed on a regular basis.

Communication Procedures

Communication Action Items Once the Pandemic Committee is Activated
- Trustees will be notified when the Pandemic Committee has been activated.
- Use website as main information source for parents and the community about the status of facilities/locations.
- Monitor website activity and redirect users to our dark site if traffic increases to the point where the Information Technology Manager becomes concerned.
- Website listing of all facilities/locations that are closed will be updated as needed.
- Provide information on all Board phone lines.
- Use Board's voicemail system to provide overall information and status of facilities/locations.
- Provide facility/location with voicemail scripts to use on their facility/location answering machine to provide parents and staff with the information about the status of their facility/location.
- If facility/location is closed or permit event will interfere with cleaning of the facility, notify permit holders and Trustee of that facility/location, that permits are suspended until further notice.
- Post information on website about all other cancellations.
- Email information to appropriate Brant Haldimand Norfolk Catholic District School Board vendors for whom the Board has contact information. Inform them that the Board is in pandemic response mode. Explain how the pandemic response mode might affect vendors.
- Prepare daily update for media. Distribute to media via email and post on website. Facilities/locations will be closed to media except where special permission is given by the Director/designate.
- Continue reporting procedures as required by the Ministry of Education and/or the Medical Officer of Health.
Trustee Communication

- Trustees will receive daily updates by email following Pandemic Committee meetings. Regular Board meetings may be conducted electronically while the Board is in pandemic response mode, as otherwise determined jointly by the Director/designate and Chair of the Board.

Internal Communication

- Continue to inform all staff of the public health guidance the Board has received. Remind them of the main ways that the Board will function during pandemic response mode, i.e., what essential services will continue and what activities may be curtailed. Remind them of information sources. Remind them that the Board expects them to come to work if they are well, unless public health authorities or the Board closes the facility/location. Remind staff how to find out if their facility/location is closed; www.bhnegdsb.ca, email, media (including radio).

- Provide facilities/locations with scripts, as necessary, for secretaries or the person(s) designated to answer the telephones to answer parent questions regarding pandemic alert response mode.

- In the event that the Pandemic Committee is activated, the Director/designate will relay this information to the heads of employee groups will be the main contact between the Pandemic Committee and the employee group representatives.

External Communication

- Provide information for staff, parents and community members explaining that the Board is now in pandemic response mode. Explain the main ways to access information—website, facility/location voicemail, media reports, etc.

- Emphasize that if they are well, students are expected to come to school. Students should stay home if they are ill.

- Direct parents to check website and media (including local radio stations) daily by 6:30 am for information about bus cancellations.

- Explain that field trips, excursions and school food programs may be cancelled during response mode and let them know they will receive specific information from their school about refunds/rescheduling (most likely after pandemic response mode is over).

- In the event that the Pandemic Committee is activated, set up briefing with heads of all employee groups. The Director/designate will be the main contact between the Pandemic Committee and the employee group representatives. Keep in constant contact to identify staff concerns, questions, etc.
Public Health Contact Information

**Brantford General Hospital - Brant Community Healthcare System** ([http://www.bchsys.org](http://www.bchsys.org))

- 200 Terrace Hill St.
- Brantford, ON N3R 1G9
- 519-752-7871
- [http://www.bchsys.org](http://www.bchsys.org)

**Brant County Health Unit** ([http://www.bchu.org](http://www.bchu.org))

- 194 Terrace Hill St.
- Brantford, ON N3R 1G7
- 519-753-4937
- [http://www.bchu.org](http://www.bchu.org)

**Haldimand-Norfolk Health Unit** ([http://www.hnhu.org](http://www.hnhu.org))

- Simcoe Office
  - 12 Gilbertson Drive,
  - P.O.Box 247
  - Simcoe, ON N3Y 4L1
  - 519-426-6170 or 905-318-6623
  - [http://www.hnhu.org](http://www.hnhu.org)

- Caledonia Office
  - 282 Argyle Street S.
  - Caledonia, ON N3W 1K7
  - 905-318-5367

- Dunnville Office
  - 117 Forest Street East
  - Dunnville ON N1A 1B9
  - 905-774-3333

- Langton Office
  - 22 Albert Street
  - Langton, ON N0E 1G0
  - 519-875-4485

**Willett Hospital - Brant Community Healthcare System** ([http://www.bchsys.org](http://www.bchsys.org))

- 238 Grand River St. N.
- Paris, ON N3L 2N7
- 519-442-2251
- [http://www.bchsys.org](http://www.bchsys.org)
Appendices

Appendix I

The difference between influenza and the common cold:

<table>
<thead>
<tr>
<th>Symptom</th>
<th>Flu</th>
<th>Cold</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fever</td>
<td>Usually present, high (102-104°F or 38-41°C); lasts 3-4 days</td>
<td>Uncommon</td>
</tr>
<tr>
<td>Headache</td>
<td>Very common</td>
<td>Uncommon</td>
</tr>
<tr>
<td>Aches and pains</td>
<td>Common and often severe</td>
<td>Slight</td>
</tr>
<tr>
<td>Fatigue and weakness</td>
<td>Can last up to 14-21 days</td>
<td>Mild</td>
</tr>
<tr>
<td>Extreme exhaustion</td>
<td>Very common at the start</td>
<td>Never</td>
</tr>
<tr>
<td>Stuffy nose</td>
<td>Sometimes</td>
<td>Common</td>
</tr>
<tr>
<td>Sneezing</td>
<td>Sometimes</td>
<td>Common</td>
</tr>
<tr>
<td>Sore throat</td>
<td>Sometimes</td>
<td>Common</td>
</tr>
<tr>
<td>Chest discomfort, cough</td>
<td>Common</td>
<td>Mild to moderate, hacking cough</td>
</tr>
</tbody>
</table>

(Source: Healthy Ontario – Flu and Cold)³
Appendices

Appendix II

Hand Washing Factsheet

Keeping Our Children Safe: Prevent the spread.

One thing we have in common is the safety of our children. Fortunately, our students are healthy and our schools are safe. We have developed this fact sheet with the guidance of the local public health units to remind staff, parents and students of the proper methods of infection control. Although this information is directed towards the prevention of H1N1 flu, this fact sheet contains information that can be used throughout the year, especially during regular cold and flu seasons.

**COMMON QUESTIONS AND ANSWERS**

**About H1N1 flu:**

H1N1 flu is a respiratory illness that causes symptoms similar to those found in regular human seasonal flu. Symptoms include:

- fever
- fatigue
- lack of appetite
- coughing
- sore throat
- chills
- shortness of breath
- muscle aches
- eye pain

**What to do if you have flu-like symptoms:**

- Contact your doctor (or walk-in clinic) by telephone first and let him or her know your symptoms and any travel history, especially in the last seven days before the onset of your illness. The need for treatment and testing will depend on the clinical severity of your symptoms. Calling ahead and speaking with a doctor will ensure that infection control measures are in place to protect the other patients and workers.
- If you are unable to reach your doctor, you may call TeleHealth Ontario at 1-866-797-2600 for further information.
- If you don’t feel well, stay home. Don’t go to work or social events when you are ill. This will help prevent the spreading of germs to at-risk children and friends. Children should also stay home from school and child care centres when they feel sick.

**The best way to protect you and your family against any infectious diseases:**

- Wash your hands regularly.
- If you can’t wash your hands with soap and water, use a hand sanitizer.
- Practice common cough and sneeze etiquette, which includes coughing or sneezing into your elbow or shoulder area.
- Dispose of dirty tissues promptly.
- If you’re not feeling well, stay home.

**How do our schools deal with infectious diseases?**

Our schools follow the direction of the Ministry of Health and local health units with regard to procedures around any infectious disease. Should you or your child be provided with an H1N1 flu diagnosis by your physician, please call the school principal immediately. This information will be passed on, as indicated in the procedure to the local health unit.

The BHNCDSB is committed to protecting the health and well-being of all our students and staff. The Board has a response plan in place and its system response team is available to public health officials.

For more information contact:

- Tiwi Health Ontario, 1-866-797-2600, the Halton Region Health Unit (905-338-6100, www.halr.org), the Brant County Health Unit (519-753-4037, www.brant.ca) or the Public Health Agency of Canada, www.phac-aspc.gc.ca.

[http://bhnresource.bhncdsb.ca/files/koss_h1n1_factsheet_20091028.pdf](http://bhnresource.bhncdsb.ca/files/koss_h1n1_factsheet_20091028.pdf)
Appendix III

Flu-like Symptom Notices

http://bhnresource.bhncdsb.ca/files/staff_flu_like_symptoms_notice.pdf  

Clinically Confirmed H1N1 Notices

http://bhnresource.bhncdsb.ca/files/staff_h1n1_notice.pdf  
http://bhnresource.bhncdsb.ca/files/public_h1n1_notice.pdf
References

