

# ***Edmonton Catholic Schools***

## ***Pandemic Preparedness Plan***



EDMONTON CATHOLIC SCHOOLS

Version: November 18, 2009

The purpose of this document is to give information so that Edmonton Catholic Schools will be as prepared as possible in the event of a pandemic. This plan is based on information from a number of sources including, but not limited to information available locally, provincially, federally and internationally. The Edmonton Catholic School Pandemic Preparedness Plan was developed using two key documents: *Pandemic Planning Guide for Alberta School Authorities* (May 2008) and *Alberta's Plan for Pandemic Influenza – A Summary* (January 2009). This document is a work in progress and will be updated regularly and as information is made known to the district.

# TABLE OF CONTENTS

	Page
<b>Part I – Pandemic Information</b>	
• Understanding Influenza	3
○ What is seasonal influenza	3
○ What is pandemic influenza	3
• Potential Effects of Pandemic Influenza	4
• Legal Framework	5
○ Common Law Duties	5
○ Statutory Duties	6
○ Regulations	9
○ Contractual Obligations of School Authorities	11
• Specific Issues of Consideration for Edmonton Catholic Schools	12
• Preparing for Pandemic influenza	16
○ Emergency preparedness	16
○ What to do in each of the four periods of pandemic planning	16
• When Influenza Pandemic Reaches Canada	19
• When Influenza Pandemic Reaches Alberta	20
• Responsibilities during an Influenza Pandemic (External)	21
<b>Part II – District Information and Department Plans</b>	
• District Level Tasks	29
<b>Part III – School Information and Template</b>	31
<b>Part IV – Appendices</b>	33
• Frequently Asked Questions (FAQs)	34
• Resources – links to information	40
• Understanding the H1N1 Flu Virus	41
• The First 30 Minutes of a Crisis	42
• Checklist for Schools	43
• Hand washing poster	45
• Contact Log	46
• Absentee Report	46
• School Pandemic Plan	47

## **PART I – PANDEMIC INFORMATION**

### **UNDERSTANDING INFLUENZA**

Human Influenza is an infection of the lungs and airways caused by a virus. Symptoms can include fever, headache, muscle pain, runny nose, sore throat, extreme tiredness and cough. Influenza is spread easily as the virus passes from person-to-person by droplets when an infected person coughs, sneezes or talks. The virus can also spread when a person touches tiny droplets from coughs or sneezes on another person or an object, and then touches their own mouth or nose before washing their hands. Droplets can enter the body through the eyes, nose or mouth.

#### **WHAT IS SEASONAL INFLUENZA?**

There are various types of influenza virus that circulate throughout the world each year and two types that cause outbreaks of disease - influenza A and B. In North America, influenza usually affects people between November and April. This is called seasonal influenza. While the symptoms of seasonal influenza may be severe, most people recover in a few days. For some, especially the very young, elderly and those with chronic medical conditions, serious complications and death can occur. Albertans are infected by various strains of influenza virus at different times during their life and, as a result of these infections, develop protection (immunity) to those types of influenza virus. Even though the virus may change slightly from year-to-year, most people will continue to have some protection against severe disease because they have been exposed to similar influenza viruses in the past, particularly if they are immunized yearly. New influenza vaccine is developed every year to provide further protection against these new strains. For this reason, influenza vaccine is given each year, beginning in early fall.

#### **WHAT IS PANDEMIC INFLUENZA?**

About three times a century, a more dramatic change occurs in a strain of influenza A virus. When this happens, our immune system will not be able to fight the new strain of virus. Existing vaccines will also be of limited value and a new vaccine may take longer than usual to develop. If the new virus spreads easily from person-to-person, the influenza will spread around the world quickly. This will cause widespread outbreaks of disease, and will likely lead to significant numbers of hospitalizations and deaths. Typically, outbreaks will occur in waves, and the space between waves may vary. This worldwide epidemic is called a pandemic influenza.

Medical experts predict that a pandemic influenza could occur at any time with the potential to cause serious illness, death and extensive social and economic disruption throughout the world. Experts agree that future influenza pandemics are inevitable, but the timing and severity of the next pandemic cannot be predicted. Historic evidence suggests that pandemics occur three to four times a century. In the last century, there were three pandemic influenzas and now the H1N1:

- The Spanish Influenza, in 1918-19, The Asian Influenza, in 1957-58; The Hong Kong Influenza, in 1968-69 and the H1N1 Influenza, in 2009.

The effects of a pandemic would be different than a natural disaster, because a large number of people in workplaces would be sick with influenza. High rates of absenteeism would affect the ability of organizations to provide essential services such as community businesses (for example, grocery stores or service stations) and public safety services (for example, fire, police and ambulance).

## **POTENTIAL EFFECTS OF PANDEMIC INFLUENZA**

To determine the potential effects of a pandemic in Alberta and to be prepared, key assumptions have been developed. The assumptions are not predictions for the next pandemic, but serve as a way of facilitating pandemic planning and preparedness.

### **IMPACT ON HEALTH CARE**

A pandemic will place great pressure on Alberta's health care system. For a pandemic of moderate severity and without any intervention (for example, vaccine and antiviral medications), of those who are clinically ill:

- 50 per cent of people will seek outpatient care (four times a normal influenza year);
- One per cent of people will be hospitalized and recover (four times a normal influenza year); and
- 0.4 per cent of people will die - of these the majority will have required hospitalization, (eight times a normal influenza year).

### **IMPACT ON BUSINESSES**

A pandemic will also affect businesses. Staff will be sick or may need to stay home to care for family members who are ill. Depending on the nature of services or products offered by the business, the demands for services and goods may increase dramatically, placing additional pressure on businesses already coping with increased absenteeism due to the pandemic. Alternatively, a business could suffer a negative economic impact due to the reduced number of customers. Businesses should consider the impact of a pandemic on their staff and customers and make appropriate plans to address the pandemic and its impacts.

### **IMPACT ON SCHOOLS**

Influenza spreads rapidly in schools each winter. Higher than normal student and staff absenteeism are expected during a pandemic and schools may also be affected due to transportation disruptions. School Boards may decide to close schools due to the rate of student and staff absenteeism or to minimize the spread of influenza within a community, particularly if school-age children are among the groups most affected by the virus. School and child-care authorities will collaborate with public health officials to respond to a pandemic.

### **IMPACT ON SOCIETY**

A pandemic will likely place pressure on a number of essential services. Disruption will be the greatest where rates of worker absenteeism impair essential services such as power, water, transportation and communications.

## **LEGAL FRAMEWORK**

School Authorities have obligations imposed on them in several ways. For example, they are subject to obligations and responsibilities imposed by statutes. All levels of government – federal, provincial and municipal – have the ability to make laws regulating or relating to School Authorities.

Through contracts, School Authorities voluntarily assume duties, obligation and liabilities to the parties with whom they have contracts. These are incurred as part of the usual business activities of the school district. Contractual obligations may be enforced against the parties to the contract as they are freely entered into and are supported by compensation or consideration from the other party.

School Authorities also have obligations by “tort” laws. These laws have developed through the common law over a period of centuries and generally involve the duty to take reasonable care for the safety of one’s neighbors. There is a general duty to conduct oneself in a manner that will not cause injury or loss to persons who might be impacted by one’s actions or inactions. These are the laws that provide for compensation for the victims of careless or intentional behavior. Losses following school-related accidents fall in this area.

School authorities have numerous practical and legal obligations in protecting the safety of the staff and students and providing First Aid when injuries or other medical emergencies occur. School Authorities have an obligation under the health and safety legislation to ensure a safe workplace. They must meet these obligations without violating human rights and privacy obligations. The duty to accommodate an employee with a disability or the duty to not to share personal medication information of a student may appear to contradict a School Authority’s duty to ensure schools are safe, particularly when dealing with staff or students who have a communicable disease. School authorities also hold significant infrastructure and must be prepared to address infrastructure issues in the event of an influenza pandemic.

Below is a brief review of the legal framework in which School Authorities would operate in the event of an influenza pandemic and the key contact person in this regard.

### ***Common Law Duties***

#### ***Key Contact – Carole Karbonik 780-441-6093***

The law of negligence is based upon the existence of a duty of care. Generally one must take reasonable care to avoid acts or omissions which one can reasonably foresee would likely injure one’s neighbor. To satisfy the duty of care, one must demonstrate due diligence. This means that School Authorities must exercise a level of judgment, care and prudence that a person would reasonably be expected to demonstrate under the particular circumstances. The standard of care owed by the school district to students is that of a reasonably careful or prudent parent. The case law requires that the actions of a teacher to conform to what a careful parent would do. This included the duty to protect students from reasonably foreseeable risks of harm.

In terms of pandemic planning, the following steps have been taken to reduce risk of injury or illness: creating the district pandemic plan, including checklists, communication plan, resources and practices to prevent and contain the spread of infection.

Employers could face liability issues and so it is essential that **all employees** clearly understand their roles and responsibilities within the pandemic plan.

## **Statutory Duties**

### **LEGISLATION**

#### **A. School Act**

##### **Key Contact – Carole Karbonik 780-441-6093**

School Authorities have a duty to provide education to their students (consistent with the *School Act* and regulations) that will give the students the opportunity to meet the standards of education set by Alberta's Minister of Education. School Authorities also have a duty to provide a safe and caring environment to each student enrolled in their schools that fosters and maintains respectful and responsible behaviors.

School principals and teachers must maintain order and discipline in their schools. School principals must also carry out those duties assigned to him/her by the School Authorities, subject to any applicable collective agreement and the principal's contract of employment. More specifically the school principal has a duty to direct management of the school.

The *School Act* addresses the rights of certain individuals (children) to have access to an education program and their obligation to attend school. School Authorities shall make all reasonable efforts to ensure its students attend school. A student is excused from attending school if he/she is unable to attend by reason of sickness or other unavoidable cause.

The *School Act* (sections 57 and 58) and related regulations address the issue of school closures. Under the *School Act*, School Authorities may temporarily close a school building if the health or safety of the students is endangered. If School Authorities close a school building, the *School Act* requires the School Authorities to forthwith remedy the situation causing the closure and reopen the school building. Also see *Closure of Schools Regulation, Alberta Regulation 238/97* (the *Regulation* expires on November 1, 2008).

#### **B. Occupational Health and Safety**

##### **Key Contact – Darrell Ungstad 780-441-6177**

Employers have a responsibility to take reasonable care to provide their employees with a safe workplace. Alberta's *Occupational Health and Safety Act (OH&S Act)* imposes an obligation on all employers covered by the Act to take all reasonable care for the health and safety of its workers.

The *OH&S Act* recognizes that workers themselves have a responsibility to look out for their own safety and for the safety of their fellow workers. Employers and all workers have specific obligations with respect to their own health and safety, and the health and safety of fellow workers and other workers on the job site. The *OH&S Act* provides penalties for failure to fulfill these obligations.

During an influenza pandemic, School Authorities may also have to deal with work refusals. Under the *OH&S Act* no worker shall carry out work if, on reasonable and probable grounds, the worker believes there exists an imminent danger to the health and safety of that worker. Nor shall the worker carry out any work if, on reasonable and probable grounds, the worker believes that it

will cause to exist an imminent danger to the health or safety of that worker or another worker present at the work site.

Decisions of employees to refuse dangerous work taken in good faith are not disciplinable. The *OH&S Act* prohibits any person from dismissing or taking any disciplinary action against a worker by reason acting in compliance with the *OH & S* and regulations, etc.

Without detailing the provisions of the *OH&S Act*, it contemplates that employers will have systems in place to provide a general level of awareness of responsibilities, to identify hazards and risks facing workers, to have a system in place to prevent accidents and mishaps from occurring, to have a system in place to respond to accidents and incidents if they do actually occur, and to provide for education and training of all workers within the employ of the employer.

### **C. *Criminal Code of Canada (Bill C-45)***

**Key Contact – Carole Karbonik 780-441-6093**

Apart from prosecution under the *OH&S Act*, School Authorities, and individuals face potential prosecution for criminal negligence under the *Criminal Code*. The *Criminal Code* was amended (Bill C-45) to require all those who direct work to take reasonable measures to protect employee and public safety. Wanton or reckless disregard of this duty causing death or bodily harm could result in a charge of criminal negligence for employers, officers and directors, and corporations. These provisions clarify to some extent the duty of care owed by employers to employees, and are the result of the Westray Mine disaster in Nova Scotia. The government responded to a large public outcry about the lack of accountability for senior management. This remedy has been rarely used, but the results of a successful prosecution could have devastating effects on an individual.

The duty to take reasonable steps to protect staff and students may also apply to the risk related to an influenza pandemic.

### **D. *Pandemic Response Statutes Amendment Act, 2007***

**Key Contact – Laurie Pelkie 780-441-6119**

On June 19, 2007, the *Pandemic Response Statutes Amendment Act, 2007* (the "Act") came into force. The Act amends and consolidates several other Alberta laws, such as the *Disaster Services Act* and the *Public Health Act*. The Act amends the *Government Organization Act* so that the Minister of Health may authorize the performance of restricted activities for the purpose of preventing, combating, or alleviating a public health emergency.

The Act allows Cabinet, if satisfied that there is a significant likelihood of influenza pandemic and prompt action is necessary, to suspend or modify the application of any provincial enactment, through the responsible Minister.

The Act also strengthens the prohibitions against terminating employment due to absences resulting from a public health emergency.

The length of a Public Health Emergency Order for influenza pandemic is extended to 90 days. Orders will expire at the earlier of the 90-day-Order or by if terminated by Cabinet.

The protection from liability for actions under Public Health Emergency Orders include the Crown, a Regional Health Authority, the Alberta Cancer Board, and provincial health boards for anything done or not done in good faith and directly or indirectly related to public health emergency.

The *Act* amends the *Disaster Services Act* which deals with emergency preparedness. The *Disaster Services Act* applies to the standards and authority for provincial, regional and municipal emergency preparedness and response. The powers of the Minister and the local authorities are laid out in this statute.

The *Public Health Act* deals with communicable diseases and public health emergencies, isolation, quarantine and special measures, and the state of a public health emergency in Alberta.

If a state of public health emergency is called in respect of an influenza pandemic, the Chief Medical Officer may impose , authorize the absence from employment any persons who are ill with influenza pandemic or caring for a family member ill with influenza pandemic.

Under the *Public Health Act* no employer shall terminate, restrict, or in any way discriminate against an employee for an absence from employment that is in respect of and occurs during a public health emergency that:

- Has been declared by reason only of the employee having being subject to a properly issued certificate (under section 39 of the *Public Health Act*);
- Has been declared by reason only of the employee having been subject to an isolation order (under section 44 of the *Public Health Act*);
- Has been declared by reason only of the employee having been conscripted pursuant to section 52.6(1)(c) of the *Public Health Act*;
- Is authorized under section 52.6(1.1) (an order authorizing one to be absent from work who is ill from influenza pandemic or who is caring for a family member ill with influenza pandemic)

According to the *Public Health Act*, where a teacher or a person in charge of an institution knows or has reason to believe that a person under their care, custody, supervision or control is infected with a communicable disease, the teacher or person in charge of an institution shall notify the Medical Officer of Health for the Regional Health Authority.

According to the *Public Health Act*, teachers or a person in charge of an institution who knows of or has reason to suspect the existence of a communicable disease in epidemic form, or another illness or health condition occurring at an unusually high rate, or a communicable disease or another illness or health condition that is caused by a nuisance or other threat to the public health, shall immediately notify the Medical Officer of Health of the Regional Health Authority by the fastest means possible.

According to the *Act*, no action for damages may be commenced against a teacher or a person in charge of institution for anything done or not done by that person in good faith while carrying out duties or exercising powers under the *Public Health Act* or any other statute.

The *Act* amends the *Employment Standards Code*, which sets the minimum employment standards employers must meet.

An employee may make a written complaint to an Employment Standards Officer that his or her employment was suspended or terminated or that employee was laid off contrary to the *Public Health Act*.

#### **E. Human Rights, Citizenship and Multiculturalism Act**

**Key Contact – Doug Aitkenhead 780-441-6061**

The *Human Rights, Citizenship and Multiculturalism Act* sets rules for an employer regarding discriminatory employment practices against their employees on a prohibited ground. For example, no person shall deny to any person any services, accommodations or facilities that are customarily available to the public on the basis of a specified ground of discrimination (see section 4 of this statute). In other words, staff and students may not be subject to discriminatory treatment by a School Authority on the basis of a disability.

#### **F. Freedom of Information and Protection of Privacy**

**Key Contact – Trent Schlosser 780-441-6004**

The *Freedom of Information and Protection of Privacy Act* ("FOIP") sets out an employer's obligations regarding access to, collection of, and disclosure of staff/student personal information.

For instance, *FOIP* sets out cases where personal information may be disclosed without consent. The disclosure of personal information of a student or staff member may be necessary if there are compelling circumstances affecting his/her health or safety. We recommend you discuss this with your labour lawyer.

#### **G. Employment Insurance**

**Key Contact – Jessie Foley 780-441-6058**

The *Employment Insurance Act* allows for a time frame in which special benefits (sickness) are available to an eligible claimant who cannot work because of illness or injury. Normally, there is a waiting period unless the claimant has received paid sick leave from his/her employer for that period. In addition, EI benefit claimants are required to produce a medical certificate issued by a medical doctor or other medical professional.

### **REGULATIONS**

#### **A. Communicable Disease Regulation**

**Key Contact – Laurie Pelkie 780-441-6119**

The *Communicable Disease Regulation* (the "*Regulation*") defines an "epidemic" as the occurrence in a community of persons of a number of cases of a communicable disease in excess of normal expectations. The *Regulation* defines an "outbreak" as a distribution of cases of a communicable disease that is unusual in terms of time, place or persons affected. "School" means:

- a school operating under the *School Act*;

- a place where an early childhood services program is offered or provided, and
- a day care facility licensed under the *Social Care Facilities Licensing Act*.

It is recommended this *Regulation* be reviewed. It includes a list of diseases designated as communicable for the purpose of the *Public Health Act*. More specifically, the *Regulation* contains a section dealing with the influenza pandemic which is a "notifiable communicable disease" under the *Public Health Act*. The *Regulation* speaks about reporting requirements of the Medical Officer of Health, investigation of contacts and source of infection, isolation procedures, quarantine, and special measures.

The *Regulation* sets out very specific responsibilities with respect to reporting the presence of a communicable disease in epidemic form. Under the *Regulation*, a superintendent of any school, a principal and a teacher who knows of or has reason to suspect the existence of a communicable disease in epidemic form *shall* immediately notify the Medical Officers of Health of any Regional Authority by the fastest means possible.

## **B. Student Record Regulation**

**Key Contact – Mike Carby 780-441-6169**

The *Student Record Regulation* requires School Authorities to share personal information about their students with the Medical Health Officer regarding voluntary health programs offered by the Regional Health Authority, including immunization for the purpose of communicable disease control.

## **C. Government Emergency Planning Regulation**

**Key Contact – Laurie Pelkie 780-441-6119**

This regulation sets out the responsibilities of Disaster Services in relation to emergency preparedness. Each Government Department must prepare and maintain an emergency plan, and a business resumption plan.

One of the functions of the Department of Infrastructure in an emergency is the provision of lists of operating schools that may be used in emergency response activities. The Department of Education shall liaise with School Authorities to ensure safety of students and staff.

## **D. First Aid Standards**

**Key Contact – Darrell Ungstad 780-441-6177**

The first aid standards in a medical emergency are found in the *Occupational Health and Safety Code*. There is a general duty on employers to provide and maintain First Aid services, equipment and supplies for employees. We recommend School Authorities review the *Code* regarding their duty to inform employees of the location of First Aid services and supplies at each school site and facility.

## **CONTRACTUAL OBLIGATIONS OF SCHOOL AUTHORITIES - *Key Contact – see each one***

As part of their usual business, School Authorities will have contractual obligations flowing from contractual agreements to which they are parties including the following:

- Employment Contracts – Doug Aitkenhead 780-441-6061
- Collective Agreements – Doug Aitkenhead 780-441-6061
- Joint Use Agreements – Ron Chomyc 780-453-4501
- Transportation Agreements – Boris Radyo 780-441- 6112
- Community Partnership Agreements – Rick Dombrosky 780-944-2000 & Ron Chomyc 780-453-4501

## **SPECIFIC ISSUES OF CONSIDERATION FOR EDMONTON CATHOLIC SCHOOLS**

As part of the planning process, the following issues need to be considered:

### **1. Labor/employee**

**Key Contact Doug Aitkenhead 780-441-6061**

As previously noted, during an influenza pandemic, employee issues are likely to arise. A significant number of staff and students may be absent due to illness, disability, or caring for family members. Staff and students may also be afraid to attend work because of the influenza pandemic.

School Authorities should assess their obligations to pay employees absent from work due to prolonged illness, family responsibilities or school closures. Such matters should be discussed with the planning team, labour lawyer, unions, and out of scope representatives.

School Authorities should also review their policies, collective agreements, employment contracts with regard to work attendance, vacation, sick leave, and other types of leaves, including unpaid leaves. School Authorities can also identify policies that apply or may apply in the event of an influenza pandemic. Policies dealing with attendance, leaves, scheduling, and payment to employees for prolonged absences may need to be modified in the event of an emergency. A discussion may be had whether staff, who have been asked to leave a school site during work hours for exhibiting symptoms of pandemic influenza, be paid the remainder of their work day or shift. In this regard, a review of the application collective agreement may be initially required by a labour lawyer. A School Authority may also look at their staff/student travel policies and also establish staff/student isolation and evacuation procedures.

Policies currently in place for attendance management, such as requiring physician notes following a certain number of consecutive days of absence due to illness, should also be examined as part of the pandemic planning process. School Authorities should discuss with their health official contacts how they intend to proceed if the health care system becomes overwhelmed with people seeking necessary medical attention and/or requests for medical notes.

School Authorities should examine the issue of transferring staff within the jurisdiction should there be a need reduce teaching staff in some schools during an influenza pandemic.

School Authorities should also consider the steps to take should staff/students *begin* to demonstrate symptoms of the influenza pandemic disease while at school. Staff and students may also seek counseling services in relation to an influenza pandemic. This aspect may also be considered as part of the planning process.

Again, the plan should provide for significant staff absences and assess whether the School Authority could provide educational services in the event of staff/student absences. The plan should also take into consideration how the School Authority would continue to operate without a full complement of staff.

## **2. Student Safety**

**Key Contact Ron Chomyc 780-453-4501**

School Authorities owe a duty of care to students akin to that of a conscientious parent. Along with the duties owed to staff as an employer, there is a duty owed to the students to maintain their health and safety. Prevention and pandemic preparation measures in school can greatly reduce the threat and spread of a pandemic disease by students.

## **3. Special Education**

**Key Contact Brenda Willis 780-989-3001**

School Authorities should examine how they will ensure students with special education needs receive instruction during an influenza pandemic. Options such as on-line learning sites, telephone distribution of assignments or media distribution of assignments could be explored in the event of a school closure.

School Authorities should also discuss how it will provide for any physical needs special education students may require at the school sites in the event a full complement of staff does not attend work.

## **4. Infrastructure**

**Key Contact Ron Chomyc 780-453-4501**

A School Authority's current Joint Use Agreements may not cover the influenza pandemic scenario. Agreements should be reviewed to see whether they accord with pandemic planning. School Authorities must also consider that school infrastructure may be required by other local authorities, such as health authorities, during an influenza pandemic. In this scenario, School Authorities would continue to pay for ongoing costs such as utilities, central office costs, and contracted services that were in place prior to the closure. Expenditures directly related to emergency response would be covered through sustainability funding.

School Authorities could also consider if it would be possible to continue to provide educational services from an alternative location and whether staff can work from the alternative location, including from home.

## **5. Board of Trustees**

**Key Contact Board Chair**

**Debbie Engel 780- 481-8457(Chair) or**

**Andrea Klotz 780-441-6002 (Corporate Secretary)**

The Board of Trustees is ultimately responsible for the actions taken within its School Authority. Boards of Trustees should take an active role in pandemic planning and work closely with the superintendent of schools and central office personnel.

## **6. Catholic Education Services & and all central sites**

**Key Contact Laurie Pelkie 780-441-6119**

Good leadership brings the necessary people together from the various stakeholders and sets the tone for the School Authority. Other participants also could be identified to assist in the pandemic planning process such as the school resource officer and a school nurse.

The pandemic planning team may be composed of the superintendent and deputy, central office personnel, a school board trustee(s), communication person, labour legal counsel, facilities director, special education director, and/or school psychologist.

Communication within central office and all the school sites will be vital to a pandemic planning process. Issues such as reporting obligations of individual schools to the central office must be addressed as well as the dissemination of information from central office to the individual schools.

Planning can also take into consideration whether central office staff may have to be redeployed to a school site.

## **7. Administrators**

**Key Contact Laurie Pelkie 780-441-6119**

Who will do what, when, and how at each school site? A clear understanding of who is in charge of what function at each school and central office is required as part of the pandemic planning process. A planning team should be established for each school and facility with the inclusion of the principal, assistant principal, school counselor, school assistant, teacher, school security officer, and head custodian. In the time of crisis, the principal will not be able to do everything. Members of the planning team can also be the principal's eyes and ears for the school. They can deal with student and staff needs, parent concerns, calling 911, meeting emergency needs, rumour control, and keeping the principal informed. Someone may also be responsible for providing central office with staff allocation information.

School Authorities may consider discussing these and related issues with their administrators and their ATA local.

## **8. School sites**

**Key Contact Laurie Pelkie 780-441-6119**

School facilities themselves should be evaluated for availability of space, First Aid equipment, and other disease prevention supplies. School sites must also be evaluated for their ability to be converted into make-shift clinics should the health care system be overwhelmed during an influenza pandemic.

School Authorities could also plan for possible closures, isolation, and containment strategies for each school site.

## **9. Unions and associations**

**Key Contact Doug Aitkenhead 780-441-6061**

Many of the employee issues mentioned above should be planned for in coordination with the local unions. Influenza pandemic issues may be discussed with union officials including a discussion with regard to the collective agreement and changes to policies and procedures in the event of an emergency such as an influenza pandemic.

Other groups, such as bus contractors, should also be consulted regarding pandemic planning.

## **10. School councils**

**Key Contact Andrea Klotz 780-441-6002**

Communication with the community is also key to pandemic planning and appropriate influenza pandemic response. School councils may be involved in the planning process from the beginning to ensure community issues are included in the pandemic plan.

## **11. Communication**

**Key Contact Lori Nagy 780-991-6363**

Local media can be an invaluable resource during an influenza pandemic. Information such as the status of the influenza pandemic, school closures, class assignments, school arrangements, and other school-related information can be disseminated through the local media. Approaching local media outlets during the planning stages may allow for a more immediate response should the situation require it.

As seen further in this *Guide*, School Authorities should determine what type of information might need to be communicated and the most appropriate method of communication. Central office may ensure a system is in place to call staff and ensure principals have current staff and student contact information readily available. Staff and students could also be provided with a central contact number where they may obtain current information on the status of the influenza pandemic and a status report regarding the management by the School Authority of the influenza pandemic within the jurisdiction.

# PREPARING FOR PANDEMIC INFLUENZA

## EMERGENCY PREPAREDNESS

Planning for a pandemic requires the involvement of the health sector, local municipalities, business and industry, and ultimately the participation of all Albertans. All provincial ministries and municipal governments are developing continuity plans for a pandemic influenza, which include plans to keep essential services operating and to identify back-ups for key personnel.

Planning for a pandemic is based on four specific periods, each with internal phases. Each phase and period denotes the progression and severity of the virus strain. These phases are in alignment with the **World Health Organization** (WHO) phases of pandemic alert.

- **Interpandemic Period** (phases 1-2) - a new type of influenza virus has not been detected in people;
- **Pandemic Alert Period** (phases 3-5) - a new influenza virus has been detected in the world, most likely outside of Canada, but only found in a small number of people and transmission of the virus is limited;
- **Pandemic Period** (phase 6) - a pandemic is underway. The new virus is present throughout the world, including Canada, and is easily transmissible from person - to - person; and
- **Postpandemic Period** (no phase assignment) - the number of cases and deaths due to influenza return to normal levels.

In Alberta, there will be one phase assignment for the entire province, which will reflect the highest level of risk at any given time. The determined phase will trigger consistent and appropriate public health activities and associated communications throughout Alberta Health Services.

**Notification:** Once the arrival of pandemic influenza in Canada has been confirmed, Alberta Health and Wellness will notify Alberta Health Services. Alberta Health Services will notify municipalities. The municipal Director of Emergency Management, working with the Medical Officer of Health, will take steps to ensure regional pandemic plans are activated.

Alberta Municipal Affairs, the Alberta Emergency Management Agency and municipalities will assess the impact of the pandemic on essential services in their respective areas of concern, and jointly take steps to return business back to normal as soon as possible. The response to the pandemic will be evaluated to improve future planning and deal with any issues that may have arisen.

## WHAT TO DO IN EACH OF THE FOUR PERIODS OF PANDEMIC PLANNING

### **Interpandemic Period** (phases 1-2 of WHO pandemic alert)

This is the Planning/Preparedness Phase. Tasks to be done in this phase include:

- Establish a planning team and an individual who will direct the development of the pandemic plan
- Create the plan at each level, district, school and site, using available resources, including government agencies

- Work with schools to assist in the development of their plan
- Determine essential duties (e.g. Human Resources, OH & S, payroll, facilities, maintenance, continuity of learning, transportation etc) and identify key contacts and specific roles.
- Determine the chain of command within the school district, Board of Trustees, and at each school and site
- Training should take place so that people know and understand what to do in the event of a pandemic. This also includes training staff, students, and volunteers about key pandemic issues. Determine with personnel will have “back up” duties and the training they are to receive.
- Determine if any staff must receive a vaccine in the event of an influenza pandemic and in which order of priority. Identify and involve the stakeholders in this part of the planning process.
- Clearly identify the pandemic situation which would be considered an “emergency” and trigger the implementation of the plan
- Consider terms of collective agreement and employment contracts as they relate to the key implications of the pandemic plan including: sick leave provisions, shift provisions, lay off provisions, remuneration provisions, ability to transfer individuals from one site to another, and ability to change, amend, or add to an employee’s work related duties prior to and during an influenza pandemic.
- Develop a communication plan to communicate with staff, students, families and the media and notification procedures.
- Obtain necessary response equipment, supplies and materials and create a maintenance schedule for same.
- Ensure appropriate disease recognition procedures are in place and implemented; delegate appropriate staff for this responsibility and train
- Educate students, staff, and school councils on the importance of appropriate personal hygiene. Use non-medical ways to reduce the spread of influenza such as covering one’s coughs and sneezes, washing hands and staying home if you’re sick.
- Decide how/when to encourage or require staff/students to stay home when they are ill. Legal implications must be determined.
- Review the health needs of students. Some students have a greater risk of illness.
- Consider an emergency response drill to ensure everyone understands their responsibilities. Involving other local authorities, such as emergency response personnel, will help ensure a coordinated response.
- Consider alternative learning strategies such as collaborative agreements with the public TV stations, local cable access, teleconferencing, online learning or other measures to provide continuity of learning.

- The Pandemic Preparedness Plan should be regularly reviewed and revised as circumstances require.

***Pandemic Alert Period*** (phases 3-5 WHO pandemic alert)

- Determine readiness to enact the Influenza pandemic plan (including human and material resources, and the various partners)
- Review plan at all levels, district, school and site and with all stakeholders
- Provide information as per communication plan
- Monitor infection level through WHO and CDC

***Pandemic Period*** (phase 6)

- Activate Pandemic Plan

***Post Pandemic Period*** (no phase assignment)

- Debrief activities, review documentation
- Record changes for future and what worked well
- Review plan and adjust as necessary

## WHEN INFLUENZA PANDEMIC REACHES CANADA

1. Begin heightened disease recognition reporting at each school site.
2. Consider sending a communication to the school community.
3. Work with the local health authority to issue a press release announcing that schools remain open but parents need to prepare for a pandemic.
4. Post influenza prevention signs throughout school sites and administrative offices.
5. Take direction from the Regional Health Authority regarding disinfection efforts: should there be normal cleaning routines or enhanced sanitation efforts? Proper cleaning will significantly reduce pathogens on surfaces. If an additional disinfection step is recommended by health officials, staff should be trained in the proper use of disinfectants.
6. Encourage all students and staff to wash their hands thoroughly with soap and water before eating. When hand washing is not possible, schools could consider providing hand sanitizing rubs that contain at least 60% alcohol. Alcohol-based hand sanitizers can cause skin dryness, irritation or rashes. If used, select a product that contains an emollient or also provide a moisturizing lotion or cream.
7. If hand sanitizer is made available, children should only use it under adult supervision. They should be trained to use it appropriately. **NOTE: hand sanitizer gel may not suitable for children under six.** Always follow label precautions.
8. If room ventilation is poor, alcohol may reach levels in the air that are irritating. This is particularly true when large numbers of individuals are sanitizing their hands at once, if individuals use more of a product than is recommended, and/or if the product is accidentally spilled. Hand sanitizers that contain alcohol are flammable. Do not place dispensers in hallways or near an open flame or source of sparks (e.g. static electricity).
9. Additional cleaning may be carried out throughout the school sites and not targeted to one classroom or site; this will prevent the inadvertent identification of the student with the suspected contagious condition.

## WHEN INFLUENZA PANDEMIC REACHES ALBERTA

1. In the event an influenza pandemic worsens and school closures are necessary, it is recommended that you communicate with Workforce Planning (780) 644-8328 at Alberta Education. In the event it becomes necessary to close a school, school closure procedures will have to conform to the *School Act* and related regulations.
2. If a decision is made to close a school(s), the School Authority will need to communicate effectively with each school's parent community advising of the situation.
3. Our school district may also wish to issue a press release regarding any school closures. This would come directly from the district. However, schools are recommended to stay open during the pandemic.
4. Review all contracts to which the School Authority is a party and ascertain the legal rights and obligations of the School Authority.

### ***Postpandemic Period*** (no phase assignment)

1. The Regional Health Authority may issue an advisory regarding the status of the influenza pandemic which leads a School Authority to reopen a school(s).
2. The School Authority may wish to issue the same letter.
3. The School Authority may wish to continue communicating with Regional Health Authority to see whether the School Authority is required to return to the heightened disease recognition reporting within the schools.
4. Document all activity of the influenza pandemic
5. Review plan and adjust as necessary
6. Communicate as per communication plan

## **RESPONSIBILITIES DURING INFLUENZA PANDEMIC (EXTERNAL)**

Pandemic influenza is a world-wide health event. To effectively manage and respond to a pandemic influenza, co-ordination is required at the international, federal, provincial and local levels. Each province and territory participates in nationwide pandemic influenza planning and response activities and is responsible for planning, developing, organizing, directing and delivering the provision of emergency response services to their populations.

### **INTERNATIONAL**

The World Health Organization (WHO) watches for the emergence of new strains of influenza throughout the world. If a pandemic influenza strain emerges, it will notify federal health authorities and provide information on a number of areas including situation monitoring, prevention and containment.

### **FEDERAL**

The Public Health Agency of Canada will provide nationwide co-ordination for the pandemic influenza response. They will monitor the spread of the disease in Canada, provide information links with the WHO and other nations, and obtain and distribute pandemic vaccine to the provinces and territories. The Public Health Agency of Canada is supported by a number of pandemic committees including the national Pandemic Influenza Committee, with representation from provincial, territorial and federal governments to aid in co-ordination of a national pandemic response.

Public Safety Canada is responsible for the nationwide co-ordination of the pandemic emergency response, including planning, management and recovery efforts.

### **PROVINCIAL**

Alberta Health and Wellness will lead the health sector response. At the onset of a pandemic influenza, Alberta Health and Wellness will establish an emergency operations centre. It will support co-ordination among Alberta Health Services and other health organizations; coordinate the delivery of antiviral medications and vaccine across the province; provide information; collect data on the spread of the disease in Alberta; and help resolve any health related issues that may arise.

The Alberta Emergency Management Agency of Alberta Municipal Affairs will lead the response regarding the non-health consequences of a pandemic. The Agency will communicate with government ministries and municipalities, monitor the effect of the pandemic on essential services, coordinate volunteer sector activities and federal assistance programs and monitor the need for support among families of victims.

### **LOCAL**

Alberta Health Services will provide services to meet priority health needs. In addition, they will provide information on the number of cases, hospitalizations and deaths from influenza; deliver antiviral medications and vaccines; set up alternative care sites for the delivery of health care and immunization to the public and establish; and maintain communications within their region.

Municipal governments will set priorities for maintaining public safety and other essential public services (fire, police, ambulance, waste management, water and utilities), close public buildings where necessary and support Alberta Health Services in providing information to the public.

## **EMERGENCY COORDINATION**

Pandemic influenza will start as a health emergency, but may evolve into a general provincial emergency. Alberta Health and Wellness will be responsible for coordinating the health response and the Alberta Emergency Management Agency will be responsible for co-ordinating the non-health response (provincial government, municipal, societal and essential services response).

Information from the WHO and The Public Health Agency of Canada on pandemic influenza is routinely reviewed and discussed by the Chief Medical Officer of Health (or designate) for the province as well as the Medical Officers of Health and the Alberta Emergency Management Agency. Based on the information available about the disease and the progress of the virus throughout the world, the province, Alberta Health Services and municipalities will begin activating their pandemic response plans and operations centres in anticipation of the arrival of the virus in Canada and Alberta.

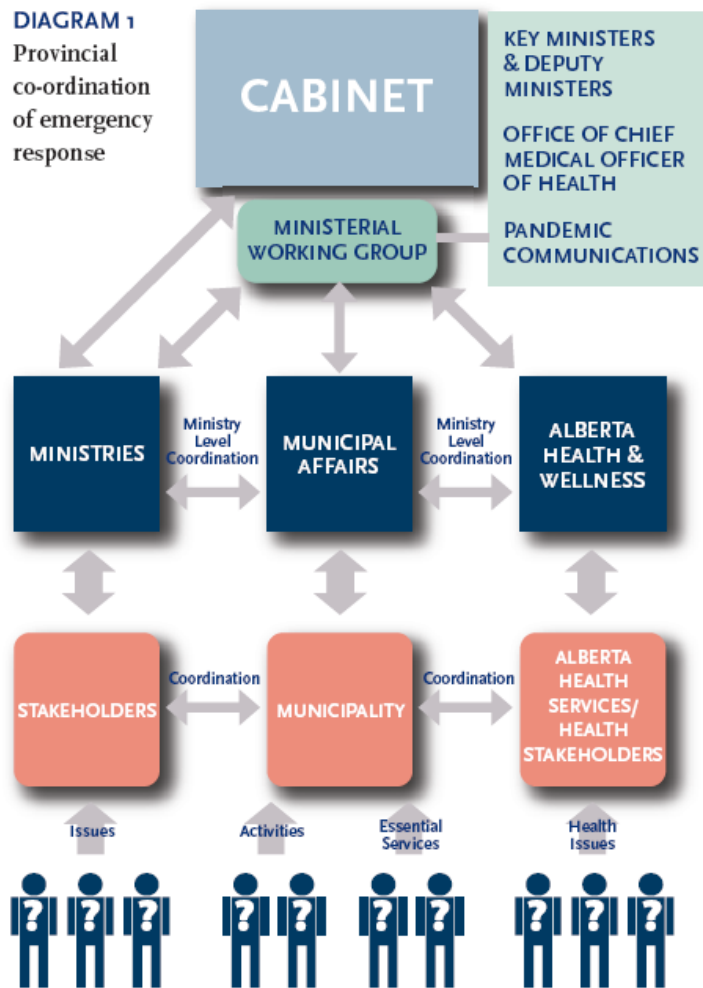
Provincially, the health system's key stakeholders, including Alberta Health and Wellness, Alberta Health Services, First Nations and Inuit Health (Alberta Region) of Health Canada, and the Provincial Laboratory of Public Health, will implement a common emergency management system.

A provincial Ministerial Working Group, which will report directly to Cabinet, will direct Alberta's health and non-health response to pandemic influenza (refer to *Diagram 1: Provincial co-ordination of emergency response*). This group will address key policy issues as they emerge.

The Government Emergency Operations Centre, led by the Alberta Emergency Management Agency, will provide direction to the non-health sector during pandemic influenza. It will have direct links to municipalities and is responsible for co-ordinating the provincial government's operational response to pandemic influenza.

Alberta Health and Wellness will establish the Public Health Emergency Co-ordination Group to guide and coordinate the provincial health response to pandemic influenza. The Public Health Emergency Co-ordination Group will assist Alberta Health Services and other health system key stakeholders by providing a forum for provincial communication and co-ordination of regional response activities.

The emergency operations centres of Alberta Health Services and local municipal governments will communicate with each other at the local level.



## PROVINCIAL GOVERNMENT/MUNICIPAL RESPONSE

### ALBERTA GOVERNMENT ESSENTIAL SERVICES

Each provincial government ministry, including the major agencies, boards and commissions, have business continuity plans in place to ensure that Albertans will not face a significant disruption of those services required to maintain societal and economic well-being. Within the business continuity plans is an identification of the ministry's unique essential services. During a pandemic, or any other widespread disaster, these services will be monitored closely to ensure that service levels are acceptable and, where it is deemed necessary, measures will be taken to increase staffing or support in areas that are affected more than others.

### COMMUNICATION

The Government of Alberta will ensure that all Albertans are aware of the government's plans to manage a pandemic; are aware when pandemic influenza is occurring; and know how to prevent the spread of disease and care for themselves and their families.

To help Albertans prepare for pandemic influenza, the websites of **Alberta Health and Wellness** and the **Alberta Emergency Management Agency** contain information about pandemic influenza:

- Pandemic influenza material which explains what a pandemic is and promotes prevention and self-care for individuals who are ill with influenza;
- Information about emergency preparedness for families and businesses.

During a pandemic, the public, Alberta Health Services and municipalities and other key stakeholders will be made aware of measures that are being taken to protect public health and will be kept up-to-date on the provincial pandemic emergency response.

## **MUNICIPAL RESPONSE**

Under the *Municipal Government Act*, a municipality is responsible for the safety, health and welfare of its citizens through the provision of services and public utilities. The responsibilities of municipalities in relation to pandemic influenza include:

- Ensuring local essential services are maintained;
- Developing a municipal emergency plan for managing a shortage of personnel during a pandemic;
- Co-ordinating pandemic planning with the local health officials and others;
- Supporting the local health response as much as possible;
- Co-ordinating information and action with the Government of Alberta through established emergency channels.

In a pandemic influenza the municipality, in consultation with Alberta Health Services, would be expected to activate emergency plans in order to:

- Continue local government;
- Establish an emergency operations centre if required;
- Maintain public safety services (fire, ambulance, police);
- Maintain the integrity of essential public works, municipal services such as water treatment and delivery, waste management, garbage disposal and utilities;
- Work with Alberta Health Services to provide information and advice to the public via regular announcements and prepared informational guidelines;
- Close public buildings where it is deemed to be in the best interests of public safety and minimizing the spread of infection based upon the recommendations of health officials;
- Assist health officials in establishing alternate care facilities, triage centres, morgue facilities, and immunization sites as requested;
- Interface with local business persons to maintain a level of service to the community, particularly those services involving access to pharmaceuticals, retail food purchases, gasoline and other commerce deemed necessary; and
- Coordinate and direct Family and Community Support Services plus local non-government organization support to the municipal response.

## **HEALTH RESPONSE**

### **PUBLIC HEALTH MEASURES**

Public health measures are interventions intended to limit or slow the spread of pandemic influenza in the community including:

- Treating the first cases of influenza and their contacts;
- Distancing those who are ill from others;
- Follow-up of people who are in contact with the first cases of influenza; and
- Restricting public gatherings.

These strategies will be implemented by Alberta Health Services as required. The public health measures will be reviewed and updated as new information becomes available. While public health measures may delay the spread of a pandemic to allow the health system time to manage the number of ill and reduce the time gap between the first wave of illness and the availability of vaccine, they will not necessarily prevent someone from becoming infected.

### **SURVEILLANCE**

Surveillance is continuous: every year, every influenza season, the disease is monitored. Surveillance is used to determine when, where and which influenza viruses are circulating, and their severity.

The first level of surveillance is international, through the WHO's global influenza network. The second level of surveillance is national, through the National Microbiology Laboratory, Fluwatch (involving ministries of health laboratories, physicians and the federal Centre for Infectious Disease Prevention and Control) and the Sentinel Influenza Surveillance Program.

At the provincial level, surveillance takes several forms:

- The Provincial Laboratory of Public Health identifies new strains of influenza and where they are occurring. Early identification of a new strain allows quicker action to prevent and control the spread of influenza;
- Alberta Health Services monitors and reports to Alberta Health and Wellness on the presence of influenza-like illness - as shown by indicators such as school absenteeism and outbreaks in hospitals or long-term care centres;
- Alberta Health Services also reports on hospital admissions, admissions to intensive care units, deaths from influenza and the number of cases and deaths from pneumonia;
- A sentinel physician system, under the Alberta Viral Watch Program, monitors the outbreak of influenza through reports from physicians throughout the province. The program detects cases that may not be seen in hospitals or other public facilities. As the pandemic escalates, the Viral Watch program will add more physicians to its system and the Office of the Chief Medical Examiner will report on any unusual deaths.

Alberta Health Services will provide regular updates on the number of cases of influenza in the world, Canada and Alberta, as well as provide information on the progress of the disease and on the prevention and care to all Albertans.

In the postpandemic period, the surveillance system will return to normal operations. Alberta Health and Wellness and Alberta Health Services will continue to watch for an unexpected return of

the influenza virus and evaluate the results of surveillance during the pandemic and the operation of the system, to allow improvements for the future.

## **ANTIVIRAL MEDICATIONS**

Antiviral medications are used for early treatment of influenza. If taken shortly after getting sick (within 48 hours) they can reduce influenza symptoms, shorten the length of illness and potentially reduce the serious complications of influenza. Antivirals work by reducing the ability of the virus to reproduce in the body, but do not provide immunity against the virus.

Antivirals will be the first medical intervention used at the start of pandemic influenza, since it is unlikely that an effective vaccine will be available in the early stages. Alberta's antiviral stockpile will be used in three ways:

- To reduce the risk of transmission from the first cases of influenza in Alberta and their contacts to delay or slow transmission of the virus in early stages;
- For early treatment of ill people who go to a designated health-care provider/facility within 48 hours of the first sign of symptoms. This is the best way to decrease illness and hospitalization rates during pandemic influenza; and
- A portion of the stockpile will be reserved for treatment during the second wave.

Antivirals for early treatment will be distributed through the public health system from Alberta Health and Wellness to Alberta Health Services in a manner similar to that currently used for the delivery of seasonal influenza vaccine.

Alberta's antiviral stockpile includes enough antivirals to cover approximately 17.5 per cent of the population; that is enough to provide treatment to roughly half of those who become ill and need medical attention in a moderate pandemic.

## **VACCINE**

Immunization with a pandemic influenza-specific vaccine is the main strategy to decrease illness and death. However, a vaccine cannot be developed until the pandemic begins and the virus strain is identified. It is possible that when pandemic influenza arrives in Alberta, vaccine may not be immediately available, or may be available but only in limited quantities. It could take four to six months until vaccine is available in Canada once a strain is identified.

The federal government will secure supplies of vaccine and distribute them to provinces and territories on an equitable basis.

Alberta Health and Wellness, Alberta Health Services and the Public Health Agency of Canada are working together on plans for distribution of a vaccine during a pandemic influenza. There will be sufficient vaccine to immunize all Canadians. A first dose will be administered within 30 days from delivery followed by a second dose the following month. The Government of Alberta will distribute vaccine to Alberta Health Services to administer the vaccine to individuals. Alberta Health Services is planning for large-scale immunization programs. They will work with municipal governments to identify possible sites for providing vaccine to large numbers of people. Two doses of vaccine will be required, given four weeks apart.

It is likely that vaccine will not be available in time to respond to the first wave of a pandemic. In this case, Alberta will focus on controlling the spread of the disease through alternate control strategies. These strategies include antiviral medication for early treatment of those ill with influenza, self-care, infection control precautions and public health measures to decrease transmission. Efforts will also focus on caring for the ill and emergency response.

## **HEALTH SERVICES**

During a pandemic, demand for health services will exceed the availability of resources. Increased influenza infection will increase the demand for intensive care, ventilators, antivirals and other equipment and supplies. At the same time, health care workers will become ill along with the rest of the population with 20-25 percent of workers expected to be absent during the peak period of illness.

Alberta Health Services has developed pandemic emergency response plans to help maintain health services to the greatest extent possible. These plans involve the identification of essential health services and making the best use of health-care professionals, equipment, facilities and other resources during a pandemic.

Health services for people living on reserve are the responsibility of the federal government; however, not all reserves have primary and/or acute care services. People from these communities will have access to necessary health services from Alberta Health Services. Each reserve will enact their emergency operations plan with direct support from First Nations and Inuit Health (FNIH) of Health Canada. People living on reserves will have access to the same health services as all other Albertans. First Nations people who live off reserve will receive health services from Alberta Health Services.

Alberta Health Services will work with municipal authorities to identify possible sites, outside of hospitals, to care for the large number of people who may become ill with influenza.

Several actions will be taken to cope with this situation:

- Alberta Health Services will implement public health control measures to help limit the spread of the disease;
- Elective/non-essential health services may be suspended;
- Alberta Health Services will implement triaging, to divide patients into three groups: self-care, outpatient care and hospitalized care;
- Alberta Health and Wellness will revise guidelines for caring for the sick in response to new information from the WHO, Public Health Agency of Canada and medical experts. These revised guidelines will be provided to health-care professionals through Alberta Health Services.
- Alberta Health Services will train alternate health care providers to provide some aspects of care, if necessary, due to staff shortages. This may include the use of health care workers in non-traditional roles;
- Alternate care sites will be pre-determined and set up if needed;
- Alternate transportation methods, besides ambulances, will be identified as options and placed on standby.

Once the pandemic influenza is over, Alberta Health Services and FNIH will need to respond to a backlogged demand for non-essential health services. Also during the postpandemic period, Alberta Health Services and municipalities will provide support services for families of victims.

### **INFECTION CONTROL MEASURES**

Implementation of comprehensive infection prevention and control strategies will help prevent the transmission of pandemic influenza and other infectious diseases with or without the availability of medical interventions.

Infection control steps will be shared with the public and health-care professionals through Alberta Health and Wellness and Alberta Health Services. Alberta Health Services will ensure that all their staff are familiar with the recommended precautions.

Influenza Self-Care materials provide information on measures to prevent and treat influenza.

- Key preventive measures, such as covering your cough and washing your hands, reduce the likelihood of contamination of the environment and transmission of respiratory infections. Frequent, thorough hand washing is the cornerstone of infection prevention and control.

## PART II – DISTRICT INFORMATION & DEPARTMENT PLANS

### District Level Tasks

#### Superintendent's Role

- Alerts Board of Trustees of potential risk of pandemic and stage of district preparedness.
- Consults with District Pandemic Committee and is key communicator between the Board of Trustees and the Pandemic Committee.

#### Activation/Termination of Pandemic Response Plan

- Activates Pandemic Plan through communication to schools, parents, students and key service providers.
- Determines back-up person in the event of Superintendent's absence.

#### Decision- Making and Reporting

- Establish a command center in Board Room.
- Appoint an MRP (most responsible person) for the Command Center for decision making in consultation with the Superintendent.
- Establish a key communicator for consistent messaging.
- Establish 7:30 and 3 p.m. as daily meeting times (Manage information, decision making and provide information to schools and departments)
- Schools to e-mail SOS admin support daily at 2 p.m. for compilation of absentee reports of staff and students (including any illnesses, not just flu) and any significant information regarding the pandemic as recorded on contact logging form (contact and absentee logs found in appendix). As is the practice of the district, **schools will continue to report absences of 10% or greater to Alberta Health Services and SOS**. It is suggested that principals communicate to the parents of medically fragile students when there is an absence rate of greater than 10%. If the level of sickness of students or staff seems a concern, then a meeting of the pandemic committee will be convened.
- Alberta Health Services number for calling in illnesses of 10% or more is **780-342-0241**. Schools are asked to call in again when the numbers fall below 10% or any significant changes (eg absenteeism increases to more than 50%)
- Based on 3 p.m. meeting and any developments over the evening, determine by 10 p.m. whether transportation will be cancelled for the next day.
- Activate prioritization of essential services.
- Activate prioritized list for immunization.

#### Communications with Staff and the Public

- Enact the communication plan.

- Establish key communicator.
- Time specific messaging
  - District website updates - daily at 4 p.m.
  - School websites updates – daily at 4 p.m.
  - Notifications to parents, Archbishop, Bishop.
  - Develop key messages.

*Infection Control Policies and Procedures*

- Promotion of hand hygiene, cough and sneeze etiquette.
- Planned cleaning programs.
- Protocol for handling staff/students who become ill at school, including temporary isolation of contaminated areas as well as travel and meeting restrictions.

*Impact on Staff*

- Prepare an inventory of essential tasks in the event that people are required to perform duties/functions in other areas to maintain essential services. Identify primary and secondary responsible individuals.
- Monitor staff absences.
- Maintain a fan-out list of staff.
- Post information for staff only, on the portal.

*Information and Technology*

- Central inventory of passwords to office equipment and electronic files (possibility of overriding all passwords—master key).
- Back-ups for key technology personnel.

*Human Resources Procurement of Additional Resources*

- Develop a plan for the hiring of temporary workers.
- Develop a plan for accessing volunteer workers.
- Security contact for physical access to work location (authority to direct contagious staff to leave site, enhancing security service).

*Post Pandemic*

- Communication plan for staff, parents and stakeholders regarding return to full service.
- Review contact logs from sites and schools.
- Work with regional health authorities and other partners for debriefing.

**Department Plans**

Each department has prepared a detail Pandemic Preparedness Plan to address essential services, key service providers, relevant stakeholders/agency/or organizations, inventories, immunizations, and specific department details.

## PART III – SCHOOL INFORMATION & TEMPLATE

### School Level Tasks

#### Principal's Role

- Clearly communicate and support district message through
  - Letters to Parents
  - Website update
  - Key messages for parents, staff and students
  - Newsletter updates
- Ensure prevention instruction is being done with students, e.g. hand washing, sneezing and coughing instruction. Consider social distancing strategies.
- Ensure cleaning priorities (Staff, students)
  - High traffic areas (washrooms, change rooms)
  - Door knobs and backs of doors
  - Toilet handles, taps
  - Keyboards, desktops and phones
  - Other as necessary
- Consider Human Resource Issues
  - Staff attendance monitoring including administration and support
  - Classes without a teacher
  - Assign back up administrators and office staff
- Manage Bus Transportation
  - Communication system with parents
  - Supervision back up
  - Back up plan for transporting students home (including a walking plan)
- Consider an Education Plan for continuity of learning
- Check Crisis Kit and have ready
  - In addition to current items (list of students, megaphone, flashlight and batteries, pens, paper, cell phone charger and battery, facility blueprints) and depending on your school needs, consider adding items such as:
    - Hand sanitizer
    - Alberta Health Numbers for students and staff
    - Emergency contact for staff
    - Extra cleaning supplies
    - Bottled water
- Determine protocol for handling staff/ students who become ill at school, including temporary isolation of contaminated areas as well as travel and meeting restrictions.

- Prepare an inventory of skills and competencies in the event that people from your school are required to perform duties/functions in other areas to maintain essential service. Identify primary and secondary responsible individuals.
- Maintain a fan-out list of staff.
- Post information for staff only on the portal for your school site.
- Ensure Contact log sheet is in place. Submit the sheet if necessary.
- Monitor and maintain student and staff absences. Use the absence report during the pandemic. Once the system has been activated, submit daily at the specified time. Report absences greater than 10% through the regular Alberta Health channels unless directed to do so differently. (see page 29 of this plan)
- Maintain a central inventory of passwords to office equipment and electronic files.
- Back-ups for key technology personnel.

**Create a Pandemic Plan for your school and site.** This plan needs to be completed and sent to SOS by **September 30<sup>th</sup>**. Please email it to [Claudette.Rosenthal@ecsd.net](mailto:Claudette.Rosenthal@ecsd.net) The purpose of this plan is to articulate the school's readiness to meet the needs of students and staff during the pandemic. Although it is not possible to predict every detail you will need, this plan should meet the education needs of students while ensuring health needs at the same time. The district and school Pandemic Plan should be kept with your Crisis Plan.

### **What to include in your plan:**

Attached is a template you might use to formulate your plan. The school pandemic plan must include the following elements, the description will depend on your school:

- *School or Site Name, date it was written and updated*
- *Responsibility Chart with Primary and Secondary Responsible Person*
  - consider tasks such as – who will phone in attendance to Alberta Health, who will be responsible for admin if sick, website update, communication to parents and SOS, who will update the school plan, substitute teacher lesson plans and other site specific tasks to keep a smooth school operation, etc.
- *Protocols* – includes protocols for continuity of learning, when students or staff become ill at school, updating substitute plan books, etc. Consider the following for continuity of education: posting long term lesson plans, for students/parents to access, posting of weekly plans, developing standardized lesson plans for subs or teachers covering other classes or combining several classes, revelation online during long term absences.
- *Time specific tasks* – for example, daily reporting of absences and contact info, time when website is updated, etc. (see p. 29-30 District tasks for specific tasks and time)
- *Other* – add any specific information that you wish to include in your plan

## PART IV - APPENDICES

### APPENDICES

1. Frequently Asked Questions (FAQs)
2. Resources and links to Information
3. Compare Pandemic H1N1 and Seasonal Influenza – Chart
4. The First 30 Minutes of a Crisis
5. Checklist for Schools
6. Hand washing poster
7. Contact Log
8. Absentee Report
9. School Pandemic Plan

## Pandemic H1N1 Influenza Virus – Common Questions

### Q&A topic sections

1. [About the virus](#)
2. [Prevention and treatment](#)
3. [Pandemic H1N1 influenza vaccine](#)
4. [How to care for yourself and others](#)
5. [Pandemic H1N1 influenza virus in Alberta, Canada and worldwide](#)

### 1. About the virus

#### 1. What is pandemic H1N1 influenza virus?

- It is a new strain of the influenza A virus (2009). The World Health Organization (WHO) has declared it a pandemic virus.
- It contains a combination of genes from pigs (swine), bird (avian) and human influenza viruses that have never previously been detected in humans and swine.
- Most people have no immunity to protect them from getting sick with this new virus.
- This virus is being detected in humans in many countries around the world and is spreading from person to person in communities.

#### [Compare pandemic H1N1 influenza and seasonal influenza](#)

#### 2. Why is the pandemic H1N1 influenza virus sometimes called swine flu?

It was originally called “swine flu” as laboratory testing demonstrated that some of the genes in this new virus were similar to influenza viruses that normally circulate in pigs (swine).

#### 3. How does the severity of illness caused by pandemic H1N1 influenza virus compare to seasonal influenza?

The severity of illness has been similar to seasonal influenza, causing mostly mild illness. However, there have been some cases of severe disease requiring hospitalization and a few deaths.

#### 4. How does pandemic H1N1 influenza virus spread?

- It spreads the same way as seasonal influenza – from person to person through “droplets” that are released through the air when an infected person coughs and sneezes. The droplets can then be breathed in by others.
- The virus can also be contracted through:
  - Shaking hands that are contaminated with the virus; and
  - Touching a hard surface, such as a counter or door handle that has been contaminated with the virus.

- A person then becomes infected by then touching their eyes, nose or mouth.
- The virus is considered infectious for up to eight hours on hard surfaces and only a few minutes on soft surfaces.

## **5. How is pandemic H1N1 influenza diagnosed?**

- People with mild symptoms generally do not require testing.
- If your health care provider feels your symptoms require further investigation, a nose swab may be taken and sent to the lab for confirmation. Other tests, such as bloodwork, may also be ordered.

## **6. What is the incubation period for pandemic H1N1 influenza virus?**

- The incubation period is the time from when people become infected until they develop symptoms.
- It appears to have a somewhat longer incubation period than seasonal influenza of up to four days.

## **7. How long is a person contagious if they develop pandemic H1N1 influenza?**

- Usually persons are contagious from one day before, up to seven days after symptoms begin.
- Children, especially younger children, immunocompromised individuals and those with severe illness may be contagious for a longer period, i.e. up to 10 days
- If you are sick with influenza-like illness, stay home from work or school for seven days from the start of your symptoms or until you are able to resume normal activities, whichever is shorter..
- Avoid close contact with others as much as possible. This is to keep you from infecting others and spreading the virus further.

## **8. What are the symptoms of pandemic H1N1 influenza virus?**

The symptoms of pandemic H1N1 influenza virus in Canada have been generally mild, but illness can be severe for some individuals. The symptoms are similar to seasonal influenza and may include:

- Sudden onset of fever and cough;
- Fatigue;
- Muscle aches;
- Lack of appetite;
- Some people may also experience a runny nose, sore throat, nausea, vomiting and diarrhea.

## **9. How can an influenza virus spread from pigs to people?**

- Different strains of influenza regularly circulate in our environment, including strains that can cause illness in humans, birds and pigs.

- Swine influenza viruses do not normally infect humans. Humans and animals can sometimes pass strains of influenza back and forth to one another through direct close contact, such as in pig production barns and livestock exhibits at fairs.
- When swine influenza does infect a human, there is also a risk that the animal influenza can mutate and then spread directly between humans. The new pandemic H1N1 influenza virus originated in this way.

## **10. Can I catch pandemic H1N1 influenza virus from eating pork?**

No, pandemic H1N1 influenza virus is not spread through eating properly handled and prepared pork or pork byproducts. It does not pose a food safety concern.

## **11. What is being done to test the pandemic H1N1 influenza virus to know if it is changing?**

- Alberta's Provincial Laboratory for Public Health provides samples to the National Microbiology Laboratory, which tests both human and animal virus samples.
- Information on test results is added to an international database used by experts to look for changes in viruses.

## **Prevention and treatment**

### **12. What can Albertans do to protect themselves and others from pandemic H1N1 influenza virus?**

Albertans can take simple measures to minimize the risk of being infected.

1. Stay home from work or school for seven days after your symptoms begin or until you are feeling well enough to resume normal activities, whichever is shorter.
2. Help prevent infection with pandemic influenza by getting the vaccine that is anticipated to be available to the public in November 2009.
3. Clean hands frequently, especially after coughing, sneezing or blowing your nose. Wash your hands with soap and water, or use an alcohol-based hand sanitizer. When done correctly, this is the single most effective way to reduce the spread of infections.
4. Cough and sneeze into your arm, not your hand.
5. Do not touch your eyes, nose or mouth after shaking hands or touching hard surfaces like counters and door handles or other surfaces that may harbour influenza and other viruses. Keep common surfaces clean and disinfected.
6. Stay at least two metres (six feet) away from people who are experiencing influenza-like symptoms. This is called social distancing and includes staying away from crowds when influenza is circulating in the community.
7. Other steps to keep yourself healthy include:
  - Healthy eating;
  - Maintaining an active lifestyle; and
  - Getting enough rest and sleep.

### **13. Should Albertans wear masks to prevent catching pandemic H1N1 influenza virus while out in the community?**

No. Evidence shows that wearing masks is not effective in preventing the spread of influenza in the general public.

### **14. Should people be avoiding exposure to pigs?**

- The pandemic H1N1 influenza virus is spreading between humans. There is no risk from close contact with healthy pigs.
- Individuals with influenza symptoms should avoid close contact with pigs to reduce the possibility of introducing a new influenza virus into domestic swine populations
- For people in close contact with pigs, the recommendations to avoid infection are the same as for regular seasonal influenza – frequent hand cleaning, getting a yearly influenza shot, covering coughs and sneezes, and staying home when ill.

### **15. Can I get antiviral medication if I have symptoms of influenza?**

- Generally, antivirals are not recommended for treatment of mild influenza.
- Severe cases are receiving treatment with antiviral medications.

## **Pandemic H1N1 influenza vaccine**

### **16. Is there a vaccine for pandemic H1N1 influenza virus?**

Efforts are underway to develop, test and produce a pandemic H1N1 influenza vaccine. The pandemic H1N1 influenza vaccine is anticipated to be available to the public in November 2009.

- The seasonal influenza vaccine being used in Canada this year is not effective against this new strain of influenza, but is an important measure to prevent infection with seasonal influenza.
- [Immunization is an important measure to prevent getting influenza.](#)

## **How to care for yourself and others**

### **17. What should you do if you are concerned that you have symptoms of pandemic H1N1 influenza virus?**

- [Refer to answer on pandemic H1N1 influenza home page.](#)

### **18. What should I do if I have been in contact with someone who is sick with pandemic H1N1 influenza virus?**

- If you are well, no further action is needed. Monitor yourself for symptoms of influenza illness for four days.

- The incubation period for the virus is the time from when people become infected until they develop symptoms.
- If you have symptoms of a respiratory infection with a sudden fever and cough, [refer to answer on the home page](#).

## **Pandemic H1N1 influenza virus in Alberta, Canada and worldwide**

### **19. What is being done to contain the spread of pandemic H1N1 influenza virus in Alberta?**

- Surveillance has been increased and Alberta health care providers are on alert and are looking for cases of influenza-like illness.
- The health care system in Alberta is on alert and continues to respond to the pandemic as the situation evolves.
- Health care workers have been provided with detailed advice on how to manage possible and/or confirmed cases.
- Communication to Albertans has been increased to ensure they are well-informed as to how to best protect themselves and their families.

### **20. Is Alberta's pandemic plan in place?**

Yes, Alberta has a pandemic influenza plan in place.

- Alberta's Plan for Pandemic Influenza will direct activities of the Government of Alberta, Alberta Health Services and other key groups in response to pandemic influenza, to provide a coordinated and phased-in response.
  - [Read the Alberta Pandemic Plan](#)
- Alberta's plan is being updated as the current pandemic situation changes.

### **21. What is the government of Canada doing to protect Canadians and control the spread of pandemic H1N1 influenza?**

1. The Public Health Agency of Canada (PHAC) is working with international partners to learn more about how the pandemic H1N1 influenza virus spreads to best control and slow the spread of disease.
2. An overall implementation for the health sector of *The Canadian Pandemic Influenza Plan* is underway.
3. There is close collaboration with provinces and territories to optimize the response to the pandemic alert including monitoring essential health-related resources and supplies.
4. The National Emergency Stockpile System (NESS) which contains hospital supplies, equipment and other pharmaceuticals (including a stockpile of antiviral medications) is being managed.
5. There is ongoing involvement with the vaccine manufacturer for pandemic vaccine development, testing and production.
6. Communicating to Canadians through the Citizen Readiness Campaign to ensure they are well-informed as to how to protect themselves and their families.

## **22. How does the World Health Organization (WHO) determine what level of pandemic alert is required?**

A six-phased pandemic alert is used to determine the approach to activating plans that prepare for and respond to a new influenza virus capable of causing a worldwide epidemic.

- [More information is on the WHO website.](#)

## **23. What does WHO raising the pandemic level to Phase 6 mean for Albertans?**

The Phase 6 designation is measure of where and how widespread the new virus is around the world.

- It is not indicative of how severe the disease is. The risk level to the general public remains low.
- Alberta has a pandemic plan that has been unfolding in response to the levels of pandemic alert.

*Updated: August 19, 2009*

## Appendix 2 – Resources & Links to Information

### RESOURCES AND LINKS TO INFORMATION

Websites that may be useful when searching for information

Edmonton Catholic Schools website

[www.ecsd.net](http://www.ecsd.net)

H1N1 Information on District Site <http://www.ecsd.net/parents/h1n1.html>

Alberta Education Resources for School Administrators

<http://www.education.alberta.ca/admin/resources/healthandsafety/h1n1.aspx>

Alberta Health Services

<http://www.albertahealthservices.ca/>

Pandemic Updates at Alberta Health Services

<http://www.albertahealthservices.ca/13039.htm>

Public Health Agency of Canada

<http://www.phac-aspc.gc.ca/index-eng.php>

H1N1 <http://www.phac-aspc.gc.ca/alert-alerte/h1n1/index-eng.php>

Fight Flu <http://www.fightflu.ca/>

World Health Organization

<http://www.who.int/en/>

Foreign Affairs and International Travel

<http://www.voyage.gc.ca/index-eng.asp>

Government of Alberta Health and Wellness

<http://www.health.alberta.ca/>

Centers for Disease Control (CDC)

<http://www.cdc.gov/>

# Understanding the H1N1 Flu Virus

	Pandemic H1N1 Flu Virus	Seasonal Flu	Common Cold	
<b>What is it?</b>	<p>The H1N1 flu virus is different than regular seasonal flu.</p> <p>In spring 2009, the H1N1 flu virus emerged in North America.</p> <p>This is a new strain of influenza and because humans have little to no natural immunity to this virus, it can cause serious and widespread illness.</p>	<p>Influenza, or the flu, is a common and highly contagious, infectious respiratory disease that affects the nose, throat and lungs.</p> <p>Influenza viruses can change rapidly. That's why there is a new flu shot made every year to protect against the circulating virus strains.</p> <p>Yearly exposure to existing strains of the flu provides some level of immunity to seasonal flu.</p>	<p>A cold is a mild infection of the nose and throat caused by a variety of viruses.</p> <p>Although a cold might linger, the symptoms remain mild.</p>	
<b>Symptoms</b>	<p><b>Almost always</b></p> <ul style="list-style-type: none"> <li>Sudden onset of cough and fever</li> </ul>	<p><b>Common</b></p> <ul style="list-style-type: none"> <li>Fatigue</li> <li>Muscle aches</li> <li>Sore throat</li> <li>Headache</li> <li>Decreased appetite</li> <li>Runny nose</li> </ul>	<p><b>Sometimes</b></p> <ul style="list-style-type: none"> <li>Nausea</li> <li>Vomiting</li> <li>Diarrhea</li> </ul>	<ul style="list-style-type: none"> <li>Runny nose</li> <li>Sneezing</li> <li>Cough</li> <li>Sore throat</li> </ul>

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**Severity Indicators**

If you develop the following symptoms, you need to see a health care provider right away:

- Shortness of breath, rapid or difficulty breathing
- Chest pain
- Bluish or grey skin color
- Bloody or coloured mucus/spit
- Sudden dizziness or confusion
- Severe or persistent vomiting
- High fever lasting more than three days
- Low blood pressure

**Additional symptoms to watch for in children:**

- Not drinking enough fluids or eating
- Not waking up or interacting
- Irritability; not wanting to play or be held

## People at Risk of Complications

The following groups are not more likely to get the H1N1 virus. However, they are more at risk of developing complications if they do get sick:

- Children under five years of age (especially those less than two years old)
- Women who are pregnant
- People with chronic conditions such as:
  - Heart disease
  - Liver disease
  - Kidney disease
  - Blood disorders
  - Diabetes
  - Severe obesity
  - Asthma and chronic lung disease
  - Immunosuppressed (people taking cancer drugs or people with HIV/AIDS)
  - Neurological disorders

**IMPORTANT** If you have flu symptoms and you have one of these risk factors, contact a health care provider as soon as possible — antiviral medications may be needed.

To find out more, visit [www.fightflu.ca](http://www.fightflu.ca) or call 1 800 O-Canada (1-800-622-6232) (TTY 1-800-926-9105)

## Appendix 4 – The First 30 Minutes of a Crisis

### *THE FIRST 30 MINUTES OF A CRISIS*

What is done in the first 30 minutes of a crisis is crucial in controlling rumors and determining people's perceptions of the crisis and how it was handled. Consider the following in a crisis.

- The principal should take charge.
- Gather the facts.
- Define the problems.
- Consider options. Act to ensure the safety of staff and students.
- Designate responsible person for communication.
- Designate specific individuals for specific tasks.
- Communicate with staff and students.
- Brief the news media.
- Prepare for telephone calls and volunteers (for major disasters.)
- Keep records of communication and other related information.
- Decide the best way to communicate with parents.
- Demonstrate competence.
- Make sure information provided is accurate and reliable.

# PANDEMIC

## INFLUENZA

Meeting the threat at home

### Planning Checklist For Schools

School boards play an integral part in protecting the health and safety of staff and students. They should be prepared to respond in the event of an influenza pandemic to ensure continuity of instruction and protection of students and staff. Schools may be affected by higher than normal staff and student absenteeism and disruption of transport and other services.

The following checklist has been created to assist in developing and/or enhancing your response plans. It identifies important, specific activities, many of which will also help in other emergencies.

#### Planning/Coordination:

Completed	In Progress	Not Started	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Review and update existing emergency management plans to include a section on pandemic influenza.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Review the organizational structure to manage the execution of your district's influenza pandemic plan. Consider the linkages with Alberta Health Services and Alberta Education.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Identify who is responsible for officially activating your district's pandemic influenza response plan.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Work with Alberta Health Services and Alberta Education to coordinate with their pandemic plans.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Incorporate into the pandemic influenza plan requirements of students with special needs (i.e. low income students who rely on the school food service for daily meals, as well as those who do not speak English as their first language).
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Participate in exercises of Alberta Health Service's pandemic plan, as appropriate.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Exercise your emergency plans regularly and revise it periodically as needed.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Share what you have learned from developing your preparedness and response plan, as possible, with the community and other partners to improve community response efforts (i.e. private schools, other school districts).

#### Plan for Continuity of Student Learning and Core Operations:

Completed	In Progress	Not Started	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Consider the impact of potential school closures and/or varying levels of student and staff absences related to an influenza pandemic on student learning and extracurricular activities.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Develop alternative procedures to ensure continuity of instruction (e.g.: web-based distance instruction, telephone trees, mailed lessons and assignments, instruction via local radio or television stations) in the event of district school closures.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Develop a continuity of operations plan for essential central office functions (including payroll, ongoing communication with students and parents).

Health Link Alberta

Edmonton: **780-408-LINK** (5465)

Calgary: **403-943-LINK**

Toll Free: **1-866-408-LINK**

[www.albertahealthservices.ca](http://www.albertahealthservices.ca)



Adapted from CDC Atlanta - Revised February 2007

**Plan for the Impact on Your Staff:**

Completed	In Progress	Not Started	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Consider and plan for employee absences during a pandemic due to factors such as personal or family members' illness, community containment, measures of quarantines, school and/or business closures and public transportation disruption.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Consider staff access to and availability of mental health and social services during a pandemic including district, community and faith-based resources.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Consider programs for student mental health support following an influenza pandemic or other wide spread societal disruption.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Identify your school's/district's areas of key responsibilities and the individuals who work in those areas (i.e. human resources, payroll, maintenance). The absence of these individuals could impact continuity of services. Build in training redundancy necessary to ensure that their role can be done in the event of absenteeism.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Establish policies and procedures for staff compensation and sick-leave absences unique to a pandemic (e.g. non-punitive, liberal leave).
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Establish policies for staff/students who have been exposed to a pandemic influenza, are suspected to be ill, or become ill at school (prompt exclusion of anyone with influenza symptoms). Include policies, based on recommendations from Alberta Health Services, on when a previously ill person is no longer infectious and can return to work/school.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Establish policies for transporting ill students.

**Limit the Spread of Germs:**

Completed	In Progress	Not Started	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Teach and promote respiratory etiquette within schools/districts now (e.g. cover coughs and sneezes with tissues, dispose of used tissue in a wastebasket and wash hands).
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Maintain a healthy work environment by encouraging healthy behaviors at all times and posting tips on how to stop the spread of germs at school.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Provide sufficient and accessible supplies (e.g. soap, waterless antiseptic hand agents, tissues and receptacles for their disposal).

**Develop a Communication Plan:**

Completed	In Progress	Not Started	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Assess readiness to meet communications needs in preparation for an influenza pandemic or other widespread societal disruption, including regular review, testing, and updating of communications plans.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Develop a dissemination plan for communication with staff, students and families, including lead spokespersons and links to other communication networks. (e.g. Alberta Health Services and local municipalities).
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Ensure language, culture and reading level appropriateness in communications.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Develop and test protocols (e.g. hotlines, telephone trees, dedicated websites, local radio or TV stations) for communicating status of schools (open, reduced, closed) and recommended actions to school district staff, students and families.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Develop and maintain up-to-date communications contacts of key public health (Alberta Health Services) and education stakeholders and use the network to provide regular updates as the influenza pandemic unfolds.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Anticipate the potential fear and anxiety of staff, students and families as a result of rumors and misinformation and plan communications accordingly.

**Educate Your Staff/Students/Families:**

Completed	In Progress	Not Started	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Ensure staff, students and families know where to find up-to-date and reliable pandemic information from regional, provincial and federal public health sources.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Disseminate information about the school's/district's pandemic influenza preparedness and/or general emergency preparedness and response plan (e.g. continuity of instruction, communication plans).
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Consider disseminating information covering pandemic influenza fundamentals (i.e. signs and symptoms of influenza, modes of transmissions), as well as personal and family protection and preparation strategies (i.e. hand-washing, respiratory etiquette).

**Knowing the facts is the best preparation. Accessing accurate and reliable information is important.**

Websites to reference for further information include:

**Alberta Health Services**  
www.albertahealthservices.ca

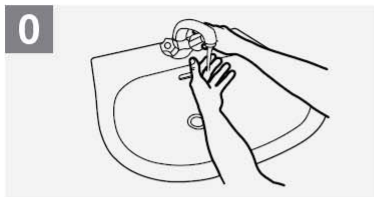
**Alberta Health and Wellness**  
www.health.gov.ab.ca

**Public Health Agency of Canada**  
www.dhac-aspc.gc.ca

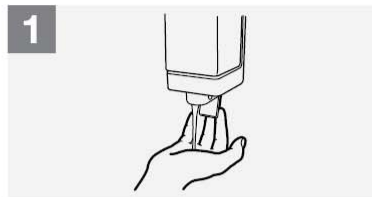
# How to Handwash?

WASH HANDS WHEN VISIBLY SOILED! OTHERWISE, USE HANDRUB

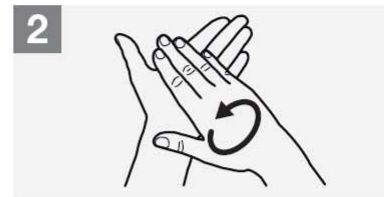
 Duration of the entire procedure: 40-60 seconds



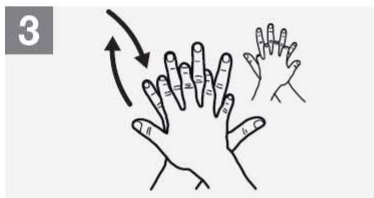
Wet hands with water;



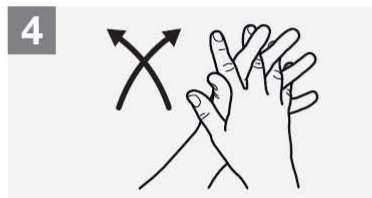
Apply enough soap to cover all hand surfaces;



Rub hands palm to palm;



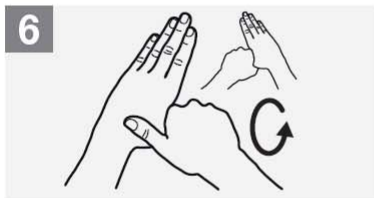
Right palm over left dorsum with interlaced fingers and vice versa;



Palm to palm with fingers interlaced;



Backs of fingers to opposing palms with fingers interlocked;



Rotational rubbing of left thumb clasped in right palm and vice versa;



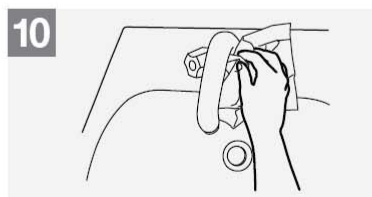
Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa;



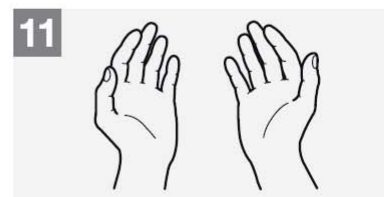
Rinse hands with water;



Dry hands thoroughly with a single use towel;



Use towel to turn off faucet;



Your hands are now safe.



World Health  
Organization

Patient Safety

A World Alliance for Safer Health Care

SAVE LIVES  
Clean Your Hands

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WHO acknowledges the Hôpitaux Universitaires de Genève (HUG), in particular the members of the Infection Control Programme, for their active participation in developing this material.

**Appendix 7 – Contact Log**

**CONTACT LOG DURING THE PANDEMIC**

<b>Date</b>	<b>Time of Contact</b>	<b>Individual(s) Involved</b>	<b>Specifics of Contact</b>	<b>Name of person recording contact</b>

**Appendix 8 – Absentee Report**

**Reporting Daily Absences of Students and Staff Template**

Please use this template to report absenteeism of 10% or greater. E-mail this form to Claudette Rosenthal [Claudette.Rosenthal@ecsd.net](mailto:Claudette.Rosenthal@ecsd.net) with the information requested every day that your school is at or over 10% absenteeism due to illness.

<b>Date</b>	<b>School</b>	<b>Total Number of Students in school</b>	<b>Number of Students absent due to illness</b>	<b>Percentage of students absent</b>	<b>Total number of staff</b>	<b>Number of staff absent due to illness</b>	<b>Percentage of staff absent (include even if less than 10%)</b>

**Appendix 9 – School Pandemic Plan (page 31-32 can help guide your work)**

**A separate template is available for use**

\_\_\_\_\_ **School Pandemic Preparedness Plan 2009-2010**

Plan written/last updated on \_\_\_\_\_

Responsibility Chart

<b>Task/Area</b>	<b>Primary Responsible Person</b>	<b>Secondary Responsible Person</b>
Administrator Absence		
Communication (e.g. parents, SOS, website, newsletter, etc)		

Protocols

<b>Situation</b>	<b>Plan to address it</b>	<b>Special Notes</b>
Continuity of Learning		
Student/Staff Illness while at school		
Updating substitute plans		

Time Specific Tasks (see page 29 -30 for tasks, times will be announced)

<b>Task</b>	<b>Primary Responsible Person</b>	<b>Secondary Responsible Person</b>	<b>Due date or time</b>

Other: