



# PANDEMIC RESPONSE PLAN

Golden Hills School Division

February 2020

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## **Acknowledgments**

The Canadian Pandemic Influenza Plan  
Pandemic Planning Guide for Alberta School Authorities (AB Education)  
Calgary Regional Health Authority (former)  
David Thompson Health Region Authority (former)  
The World Health Organization  
U.S. Health and Human Services Pandemic Influenza Plan  
Center for Disease Control and Prevention  
Seattle Public Schools Emergency Management Plan  
Contra Costa County Office of Education  
Alberta's Pandemic Influenza Plan  
Pandemic Planning Guide for Alberta School Authorities  
Alberta Health Services

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For further information please contact the Superintendent of Schools at (403) 934-5121.

# BASIC COMPONENTS OF PANDEMIC PLAN

## Introduction & Background information

One of the greatest and most likely threats to the public's health is a naturally occurring event – an influenza pandemic. Influenza epidemics happen nearly every year (often called seasonal influenza), and cause an average of 500-1500 deaths annually in Canada. Influenza epidemics are caused by a few known virus strains that circulate around the world. Over time, people develop immunities to these strains, and vaccines are developed to protect people from serious illness.

Influenza viruses experience frequent, slight changes to their genetic structure. Occasionally, however, they undergo a major change in genetic composition. It is this major genetic shift that creates a “novel” virus and the potential for a pandemic – a global epidemic. The creation of a novel virus means that most, if not all, people in the world will have never been exposed to the new strain and have no immunities to the disease. It also means that new vaccines must be developed and therefore are not likely to be available for months, during which time many people could become infected and seriously ill.

During the 20<sup>th</sup> century, three pandemics occurred that spread worldwide within a year. The influenza pandemic of 1918 was especially virulent, killing a large number of young, otherwise healthy adults. Influenza A viruses have undergone antigenic shift three times in the last century, resulting in pandemics with large numbers of both disease and death.

Pandemics during the last century:

PANDEMIC	SPANISH FLU	ASIAN FLU	HONG KONG FLU	2009 Pandemic
STRAIN	A(H1N1)	A(H2N2)	A(H3N2)	A(H1N1) H1N1pdm09
YEAR	1918-1919	1957-1958	1968-1969	2009-2010
Likely origin	Not known (first cases identified in Europe and USA)	China	China	North American
Estimated deaths:				
Global Canada	20 - 40 million 30,000 - 50,000	1 million 12,000 or more	1-4 million 12,000 or more	100,000-400,000 428
Age group most affected	Healthy young adults (20 - 50 years)	Very young and very old	Very old and those with underlying medical conditions	Young children and young to middle age adults

Predictions based on previous pandemics need to take into account that the modern world is very different from 1918 with huge improvements in nutrition, healthcare and opportunities for interventions. It is important to understand that all impact predictions are estimates and that the actual impact of the next pandemic may turn out to be very different. Recent cases of human disease caused by a widespread and growing avian influenza outbreak suggest that a new pandemic could be developing at this time.

Estimated deaths and hospitalizations during an influenza pandemic:

	EXPECTED DEATHS	EXPECTED HOSPITALIZATIONS
Global	2-50 million	6.4-28.1 million
High-income countries	280,000-650,000	1.5-5.2 million
Canada	11,000-58,000	34,000-138,000
Alberta	800-2,932	2,932-87,989
Calgary Health Region (former)	180-420	5,400-16,000

There are several characteristics of influenza pandemic that differentiate it from other public health emergencies. First, it has the potential to suddenly cause illness in a very large number of people, who could easily overwhelm the health care system throughout the nation. A pandemic outbreak could also jeopardize essential community services by causing high levels of absenteeism in critical positions in every workforce. It is likely that vaccines against the new virus will not be available for six to eight months following the emergence of the virus. Basic services, such as health care, law enforcement, fire, emergency response, communications, transportation, public schools and utilities, could be disrupted during a pandemic. The increased stress from a potential pandemic or actual pandemic will also increase the mental health service needs throughout the schools and community. Finally, the pandemic, unlike many other emergency events, could last for many weeks, if not months.

Schools tend to be affected by outbreaks more than other settings because their occupants—primarily children—easily transmit illnesses to one another as a result of their close proximity and their inefficiency at containing the droplets issued by their coughs and sneezes. High susceptibility of students and staff to exposure to a mutated virus as a result of proximity and a longer duration of the outbreak due to lack of immunity and vaccines could result in lengthy and widespread absenteeism. In a worse-case scenario, the pandemic could force schools to close, (either by Public Health order in an effort to contain the spread or by necessity due to absenteeism rates and potential safety issues), potentially prompting administration to restructure the school calendar and expend additional resources for staff sick leave and substitute teachers.

## **Plan Principles**

**Planning Committee:** In order to plan for a pandemic Golden Hills School Division (hereafter known as Division) will appoint a team/committee that is responsible (and accountable) for developing and maintaining a Pandemic Response Plan.

**Goals:** The Division will utilize their pandemic plan to achieve the following:

- Limit the number of illnesses and deaths
- Preserve continuity of essential school functions
- Minimize educational and social disruption
- Minimize economic and academic losses

The plan will be coordinated with Alberta Health Services, Community Health, Alberta Education and with the plans of other community, municipal, provincial and federal partners.

**Legal/Ethical Considerations:** Throughout the planning process, the Division must be conscious of potential legal ramifications of any policies/procedures or actions developed to respond to a pandemic. Professional advice should be sought as required. Policies and procedures developed to respond to a pandemic should be developed taking into consideration ethical frameworks for decision-making.

**Emergency Management Structure:** An effective emergency management tool is essential to the implementation of a response to any incident including responding to a pandemic. In order to plan effectively for the response to an influenza pandemic, the Division should review the emergency management structure currently utilized in the critical incident response plan (emergency response plan) to ensure that the current emergency management system is capable of effectively managing a response to a pandemic. (Many organizations are currently or have already transitioned to the ICS system including Alberta Health and Wellness, Emergency Management Alberta and many municipalities.)

**Business Continuity/Maintaining Essential Operations:** During a pandemic it is important that people with core skills are available to keep essential parts of schools functioning. Business continuity planning will ensure that the Division has the capacity to respond to reductions in staffing and supplies during a pandemic. These reductions can have negative impacts on normal operations and potentially make normal operations impossible.

The Division should develop continuity plans for student learning and continuity of instruction as well as develop a continuity of operations plan for essential central office functions including payroll and ongoing communication with students and parents.

**Communication and Plan Maintenance:** The Division must assess readiness to meet communication needs in preparation for a pandemic, including regular review, testing, and updating of communication plans.

- It is recommended that all emergency response plans including Pandemic Response plans be reviewed regularly. This review process will identify any areas that require updating such as emergency contact lists and ensure best practices for all policies and procedures are being followed for example infection control recommendations. Plans should be reviewed at a frequency not less than annually.
- Testing of emergency response plans can range from tabletop exercises to full-scale exercises. Tabletop exercises should be conducted in order to test the overall effectiveness of a Pandemic Response plan and to provide training and education to staff and students involved in the response. At least one full-scale exercise is recommended to identify any planning gaps or hurdles to implementation of the written plan.
- Any identified issues from the review or testing of the emergency response plan should be incorporated as soon as possible. A formal approval process for changes is encouraged to allow the tracking of these changes to the response plan. A formal approval process will also ensure that everyone involved in the response is aware of changes to the response protocol.

## **Planning Assumptions**

Information provided by the Canadian Pandemic Plan, the former Calgary Regional Health Authority, the former David Thompson Health Region, Alberta Health Services and the U.S. Health and Human Services Pandemic Plan contain the following information about pandemics, how they might affect school aged children and how local agencies should plan for them. **These assumptions should not be interpreted as predictions for the next pandemic, but rather a reflection of current opinion providing a guide for planning activities.**

### **Course of a Pandemic**

- A pandemic is an inevitable event although the timing and epidemiology of the next pandemic is unpredictable.
- The next pandemic virus will likely first emerge outside of Canada and arrive within three months. This time could be much shorter due to the frequency of global air travel.
- The pandemic virus may arrive in Canada at any time of the year (i.e. not necessarily during the usual influenza season in Canada).
- The first peak in illness in Canada could occur within two to four months after the arrival of the virus with the first peak in mortality expected approximately one month after the peak in illness.
- In an average community, a pandemic outbreak will last six to eight weeks. At least two pandemic disease waves are likely. The space between waves may vary greatly with up to twelve months separating them.
- A pandemic wave will sweep across Canada in one to two months although different areas of the country may experience peak activity at different times. Aid or support from other areas will likely not be available.

### **Pandemic Virus Characteristics**

- The incubation period for the virus will likely range from one to seven days.
- The period of communicability is from one day before to up to seven days after the onset of illness.
- Expected transmission is through droplet and contact routes.
- The expectation is that precautions for controlling the transmission of seasonal influenza strains will also be effective for controlling the transmission of pandemic influenza strains.

### **Extent and Severity of Pandemic**

- Regardless of age, the majority of the population (over 70%) will be infected over the course of the pandemic. Severe illness and death are more likely in all population groups than during the usual annual influenza period.
- However, the clinical attack rate (the percentage of people who will become so sick they won't be able to go to work or school) will average 25-30% in the overall population. Illness rates will likely be highest among school-aged children (as much as 40%) and decline with age. Above-average morbidity peaks could be expected in many services industries, and in particular, education, health care and social assistance.
- Children will shed the greatest amount of virus (they are more contagious than adults) and therefore are likely to pose the greatest risk for transmission.
- On average about 2 secondary infections will occur as a result of transmission from someone who is ill.
- It is anticipated that the school district will need to plan to function with **a total of >35% work force absentee rate** for the entire pandemic outbreak due to a combination of illness, fear of exposure, and staff staying home to care for loved ones. Employees will be exposed to varying degrees of risk; the perception of risk will be high.
- Individuals who recover from illness caused from the pandemic influenza strain will be immune to further infection by that strain.

Whether or not schools will be closed or for how long is impossible to say in advance, since all pandemics are different in their scope and severity. However, it is well established that infectious disease outbreaks most often start in schools and so the Division may close schools early in an event. The duration of school closings can only be determined at the time of the event based on the characteristics of the pandemic, but it is unlikely that schools will be closed for less than 2 weeks (based on the incubation period of the disease and the length of time people are contagious) and could be as long as 8 weeks, as mentioned above.

Other planning assumptions that are being used include:

- Working closely with Alberta Health Services and other stakeholder groups will maximize the health and safety of the school community. Understanding the roles of each agency and their responsibilities will promote coordination and communications. The general public, health care partners, response agencies, and schools will need continuous updates on the status of the pandemic outbreak, the steps the Division is taking to address the incident, and steps the public can take to protect themselves.
- There will be a need for heightened global and local surveillance of symptoms and infection rates.
- Antiviral medications will be in extremely short supply. Local supplies of antiviral medications may be prioritized by Alberta Health Services for hospitalized influenza patients, close contacts of patients, health care workers providing care for patients, or other groups.
- Due to vaccine production and distribution constraints, a vaccine for the pandemic influenza strain will likely not be available for 6 to 8 months following the emergence of a novel virus. As vaccine becomes available, it will be administered to eligible persons and ultimately to the entire population.
- Insufficient supplies of vaccines and antiviral medicines will place greater emphasis on social distancing strategies to control the spread of the disease in the county.
- Social distancing strategies aimed at reducing the spread of infection such as closing schools, community centers, and other public gather points and canceling public events may be implemented during a pandemic.
- There could be significant disruption of public and privately owned critical infrastructure including transportation, commerce, utilities, public safety and communications.



## Identifying Roles and Coordinating Responsibilities

During a pandemic, the presence of overlapping authorities will necessitate close communication and coordination between stakeholders to ensure decisions and response actions are clear and consistent.

- Golden Hills School Division (Division)
  - The Division will be responsible for communicating our ongoing operational status to the staff, public, health authorities, Alberta Education and other local jurisdiction stakeholders and will work directly with stakeholders across all sectors.
- Health Officials
  - Alberta Health Services will be responsible for effecting the local health response within the region by providing frontline service delivery of essential health and public health programs, deploying resources when necessary and where possible, to ensure reasonable equitable access to essential health services. Alberta Health Services may direct the isolation and quarantine of individuals or groups and may declare a State of Local Public Health Emergency to access powers under Section 52.6(1) of the Public Health Act.
    - Section 52.6 provides concurrent authority for AHS's and the Minister of Health and Wellness to:
      - Acquire or use any real or personal property;
      - Authorize or require any qualified person to render aid of a type the person is qualified to provide;
      - Authorize the conscription of persons needed to meet any emergency;
      - Authorize the entry into any building or on any land and, without warrant, by any person; and,
      - Provide for the distribution of essential health and medical supplies and provide, maintain and co-ordinate the delivery of health services.
- Local Government
  - Within the framework of the Emergency Management Act, municipal governments will set priorities for maintaining public safety and other essential services (fire, police, waste management, water and utilities), help provide information to the public, and where necessary, close public buildings and establish alternative care sites for the delivery of health care and immunization to the public.
- Partnership in Surveillance
  - Schools are encouraged to be partners in pandemic influenza surveillance providing regular reporting of absenteeism rates to Alberta Health Services. Reporting activities will likely be directed by health officials and will be used to guide provincial and regional decisions.
- School Closure
  - As a last resort and in consultation with public health officials, dependent upon the significance of the outbreak, the decision to close schools may be required. **Keep in mind that school closures may actually increase disease transmission if not orchestrated correctly.** It is therefore important that decisions for closure be made in conjunction with all stakeholders involved with the pandemic response. Education, communication and guidance to the community that closing schools is a last resort and is only effective for disease containment if the staff and students are directed to stay at home during the school closure.

Although closure is not currently recommended as a pandemic response, it is prudent for a school to have a contingency in place for closure. The Division has the authority to close schools for emergency reasons. See Administrative Procedure 131 – Emergency Closing for Schools/Inclement Weather which in part is as follows:

9. In the event of a school plant emergency, which may be related or unrelated to weather conditions, a school closure may be announced. This decision must be approved by the Superintendent.
10. Each Principal shall have a communication plan to inform parents, students and staff in the event of an emergency change in school status or school closure. The communication plan must include provisions for communicating with those who are normally transported by school bus services and those who are not. The communication plan shall communicate the school status or closure with all stakeholders. The use of Social Media, School websites, e-mail and direct contact with parents through phone and text is recommended.

### **Surveillance and Response (Plan Activation)**

In the event of a pandemic, it may be necessary that the province or a region declare a public health emergency. During a declaration of public health emergency, the Alberta Public Health Act provides designated health leaders with extraordinary powers (see Section 3: Communicable Diseases and Public Health Emergencies).

globally. The Alberta pandemic plan is divided into 3 phases. The phase in effect will direct the key responses required by the Province or Region. These key responses are identified in this section. The actions/goals for the Division are in addition to any specific recommendations from local and provincial health officials:

<b>Pre-Pandemic Phase</b>	<b>Triggers</b>	<b>Public Health Goals</b>	<b>Golden Hills School Division Goals</b>
A new type of pandemic virus has not been detected anywhere or a new strain has been found only in a small number of people.		Strengthen pandemic preparedness.	<p>Review and update school emergency plans; include pandemic response procedures. (<i>See Appendix A1.</i>)</p> <p>Ensure that staff members and students are trained in preventative measures such as respiratory etiquette, hand hygiene and universal precautions.</p> <p>Conduct routine inventories of first aid and medical supplies.</p> <p>Verify that illnesses are properly monitored at each school site.</p> <p>Increase pandemic awareness and strengthen training for school staff.</p> <p>Promote the importance of</p>

			reducing the spread of illness; remind parents to keep sick children at home and remind staff members to stay home when they are sick.
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<b>Pandemic Phase</b>	<b>Triggers</b>	<b>Public Health Goals</b>	<b>Golden Hills School Division Goals</b>
The WHO declares that a pandemic is underway and the new flu is detected in Canada. There will be localized outbreaks of the flu to start, followed by broader outbreaks that will occur in waves.	Novel/pandemic virus detected in Alberta.	<p>Ramping up health sector capacity to deal with increasing number of cases.</p> <p>Preparation for vaccine distribution, administration and monitoring.</p> <p>Ongoing surveillance to monitor activity and epidemiological analysis to characterize pandemic.</p> <p>Public and health sector communications.</p>	<p>All areas of the previous phase must be reviewed and addressed as necessary.</p> <p>Communicate the current situation to all staff members and ensure all personnel are knowledgeable about the latest epidemiological information.</p> <p>Establish an internal planning team and develop specific pandemic response procedures.</p> <p>Identify a person (or persons) in the Division who will monitor and disseminate government sources for warnings, coordinate activities/communication with Alberta Health Services, (i.e. collect internal health reports and information), and be a media contact.</p> <p>Begin to consider the possibility of school closures and that staff members may not be able to report to work. Review the procedures on school closures, i.e. timing and responsibility for the decision.</p> <p>Continue to make sure that proper health and hygiene procedures are being followed by staff and students.</p> <p>Review whether the precise characteristics of the</p>

			<p>pandemic threat require the refinement of any current emergency plans.</p> <p>Review and update business continuity plans.</p>
<b>Pandemic Phase</b>	<b>Triggers</b>	<b>Public Health Goals</b>	<b>Golden Hills School Division Goals</b>
<b>Phase 2</b>	<p>Demands for health services start to exceed available capacity.</p>	<p>Prioritization of services needed.</p>	<p>All areas of the previous phases must be reviewed and addressed as necessary.</p> <p>Communicate any change in situation to all staff members.</p> <p>Monitor pandemic surveillance systems for the current characterization of the virus and ensure that best practices for infection detection and control measures are followed.</p> <p>Identify the need to implement any recommended social distancing measures.</p> <p>Encourage students and staff members who become ill after traveling to affected countries to see their health care provider.</p> <p>Report an increase in student and staff illness to the designated Division Contact. <i>(See Appendix D –Monitoring Guidelines)</i></p>

Pandemic Phase	Triggers	Public Health Goals	Golden Hills School Division Goals
Phase 3		<p>Replenishing of supplies as needed</p> <p>Evaluation of response and revision of plans as required.</p> <p>Ongoing surveillance.</p>	<p>All areas of the previous phases must be reviewed and addressed as necessary.</p> <p>Communicate any change in situation to all staff members and parents. Maximize communications with parents related to health and safety.</p> <p>Monitor surveillance systems for the current characterization of the virus and ensure that best practices for infection detection and control measures are followed.</p> <p>Report an increase in student and staff illness to the designated Division Contact. <i>(See Appendix D –Monitoring Guidelines)</i></p> <p>Identify the need to implement any additional social distancing measures including reducing the school activity calendar.</p> <p>Evaluate your chain of command and identify key and alternate decision makers.</p> <p>Ensure adequate resources for staff/student protection. Consider assigning mental health counsellors for students and staff members, if needed. Discuss students' fears concerning a pandemic and offer available resources.</p>

Pandemic Period	Triggers	Public Health Goals	Golden Hills School Division Goals
Phase 4		<p>Administration of vaccine as quickly as possible.</p> <p>Monitoring of vaccine uptake, safety and effectiveness.</p>	<p>All areas of the previous phases must be reviewed and addressed as necessary.</p> <p>Communicate any change in situation to all staff members.</p> <p>Review the Division's chain of command ensuring that a decision maker is available at all times.</p> <p>Gather and provide pertinent information to students, staff and parents.</p> <p>Follow Alberta Health Services guidelines on social distancing, isolation and quarantine measures. Consider cancelling special events.</p> <p>Increase surveillance of staff/student health and attendance and implement administrative procedures to ensure adequate staffing for essential business and school functions.</p> <p>Regularly report levels of student and staff illness to the designated Division Contact. <i>(See Appendix D – Monitoring Guidelines)</i></p> <p>Assess the pandemic condition on a frequent basis and evaluate whether any further protective measures are needed, i.e. necessity for school closure</p> <p>Mobilize Critical Incident Response Teams to meet the mental health needs of students and staff members, if needed.</p> <p>Ensure maximum support and education for ill and affected students.</p>

Post Pandemic Phase	Triggers	Public Health Goals	Golden Hills School Division Goals
	<p>Pandemic is over and normal activities resume.</p>	<p>Completion of pandemic studies and reports.</p> <p>Evaluation of response and revision of plans as required.</p> <p>Preparation for post-pandemic seasonal influenza.</p>	<p>All areas of the previous phases must be reviewed and addressed as necessary.</p> <p>Communicate any change in situation to all staff members.</p> <p>Recovery plans will depend on the severity and duration of the pandemic but will include business recovery plans to mitigate education and financial losses, as well as emotional recovery plans.</p> <p>In consultation with Alberta Health Services, there may be recommendations and specific actions to be taken to return schools and other worksites to pre-event status including environmental sanitation.</p> <p>Conduct post-incident analysis of all components of the pandemic plan; revise as necessary.</p> <p>Implement formal staff recognition program to recognize contributions during pandemic.</p>

## Communication Strategies

Effective communications plans are required to disseminate correct information on the pandemic and any changes to school operation to all partners/stakeholders during a pandemic response. Communications plans must maintain a **consistent** message with that of other jurisdictions /organizations. By delivering a consistent message the anticipated fears and anxiety caused by rumours and misinformation can be minimized.

It will be necessary to develop and test platforms (e.g., hotlines, telephone trees, dedicated websites, and local radio or TV stations) for communicating pandemic status and actions to school district staff, students, and families

- Key audiences:
  - School Division Staff
    - Communicate directly to inform staff on healthy habits and emergency preparedness prior to pandemic and give clear instruction in advance as to where to find up-to-date and reliable information as quickly as possible as the pandemic outbreak occurs.
    - Educational communications should be provided regarding Division policies for employee's compensation and sick leave absences that may be unique to a pandemic.
  - Students
    - Communicate directly to inform students on healthy habits, i.e. respiratory etiquette, self-care and public health guidelines. Engage in honest communication to discuss concerns and allay fears.
  - Parents/Guardians
    - Communicate directly, through the media and the Division website to give up-to-date information as quickly as possible. Communication will be coordinated with local and Alberta Health Services to establish a rapid and consistent message for responding to pandemic.
    - Disseminate information for parents about the potential impact of a pandemic on school functioning (arranging for childcare in the event of school closure, continuity of instruction)
  - Alberta Health Services
    - Communicate directly with designated representatives of Alberta Health Services to relay and receive information relating to the pandemic.
  - Stakeholders
    - Assist key industry and community groups to understand what the response plan is and how they fit within it, (i.e. businesses, industry, and child-care agencies).
- Key messages:
  - information about the pandemic plan
  - prevention and education efforts (hand-washing, cough/sneezing etiquette—See Appendix C)
  - parent information (See Appendix for sample letters)
  - identify reliable media partners
    - press releases (See Appendix for samples)



## **Recovery Plan (return to learning)**

1. School recovery from a pandemic will begin when school officials determine that normal supplies, resources and response systems can manage ongoing school activities.
2. The Division will assess the educational and economic impact of the pandemic.
3. Recovery plans will depend on the severity and duration of the pandemic but will include business recovery plans to mitigate education losses, (i.e. restoration of academic base) and financial losses, (i.e. contractual areas, human resources, union, etc.) as well as psychological/emotional recovery plans including counseling and access to mental health and community supports.
4. In consultation with Alberta Health Services, the Division will recommend specific actions to be taken to return schools and district offices to pre-event status, i.e. physical and structural recovery such as environmental sanitation.
5. The Division will conduct an after-action evaluation of the pandemic response. The evaluation will include recommendations for revisions to the Pandemic Response Plan.

## **Appendices**

- Appendix A
  - A1 Division Plan/ Tasks/Checklist
  - A2 School/Worksite Plan/Checklist
- Appendix B1 Pandemic Planning Framework
  - B2 Superintendents' Office Detail
  - B3 Communications Detail
  - B4 Human Resources Detail
  - B5 Logistics Detail
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- Appendix C
  - Infection Control Practices
- Appendix D
  - Monitoring Guidelines
- Appendix E
  - Sample letters, forms and media releases
    - Parent communications
      - No.1 Influenza-Like-Illness Letter
      - No.2 Pandemic Influenza Outbreak Letter
      - No.3 Expanded Outbreak Letter
      - No.4 School Closure Letter
      - No.5 School Reopens Letter
    - Sample Press Release No.1
    - Sample Press Release No.2
- Appendix F
  - Resources: Key websites and phone numbers

## Appendix A1

### Division Plan/ Tasks/Checklist (for use and development in Interpandemic period)

	Comments
<b>Activation of Pandemic Response Plan</b>	
Determine who has responsibility for activating the Pandemic Response Plan (the “Plan”) for the Division and the identity of that person’s back-up.	See Appendix B
Develop a communication strategy for reaching staff, service partners, and students as a result of implementing any section of the Plan.	
<b>Decision-making and Reporting</b>	
Identify who needs to approve the Plan.	
Identify who is in charge in the event of a pandemic and ensure the roles and decision-making responsibilities of the various stakeholders are clearly defined.	See Appendix B
<b>Agencies and Stakeholder Communications</b>	
Prepare a list of all relevant agencies and stakeholders and their contact information. This list should distinguish between contacts appropriate to the school level versus those appropriate at the Division level. <i>(For example, for efficiency, communication with Alberta Health Services would occur at the Division level.)</i>	
Identify who notifies the various stakeholders.	See Appendix B
<b>Communications with Staff and the Public</b>	
Determine who will be in charge of communicating to the staff and the identity of the back-up person(s) to assume this responsibility.	
Prepare site-specific notification for closures and contacts for the public.	
Determine who will be in charge of communicating with the public.	
Develop a plan to communicate the reduction/temporary termination of education services to local stakeholders and the public.	
Determine who has the authority to issue announcements/news releases and articulate the identity of a back-up person(s).	See Appendix B
Ensure there are alternative arrangements for critical mail delivery if mail service is interrupted.	
Identify where to get up-to-date and accurate information about and the pandemic: Vaccine and antiviral medications information – identify who has this responsibility and articulate the identity of a back-up person(s). Anticipate the potential fear and anxiety of staff, students, and families as a result of rumors and misinformation and plan communications accordingly. <i>(See Resources Section of document.)</i>	
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).	

Advise school staff, students, and families where to find up-to-date and reliable pandemic information from federal, provincial, and local public health sources.	
Develop and test communication protocols for recommended actions, i.e., hotlines, telephone fan-outs, websites, local radio/TV stations	
Develop and maintain up-to-date communications contacts of key public health and education stakeholders and use the network to provide regular updates as the pandemic unfolds.	
Assure the provision of communication systems/channels that allow for the expedited transmission and receipt of information.	
<b>Planning</b>	
In the event of a pandemic, are the roles of the various stakeholders clearly defined? Who makes what decisions?	See Appendix B
Communicate/coordinate/integrate your pandemic plan with other stakeholders.	
Determine staff capacity and ensure there are provisions to bring in additional staff or volunteers.	
Identify possible key functions, staff positions, and supplies for each key educational service.	
Identify the authorities responsible for declaring a public health emergency at the Provincial and local levels.	
Identify for all stakeholders the legal authorities responsible for executing the community operational plan, especially those authorities responsible for case identification, isolation, quarantine, movement restriction, healthcare services, emergency care, and mutual aid.	
Work with Alberta Health Services, Alberta Education and community partners to establish organizational structures to manage the execution of the Plan. Establish a line of authority and common terminology and procedures to be followed in response to an incident.	
Work with Alberta Health Services or EFAP to address provision of counseling support services for the staff and students during and after a pandemic.	
Develop an internal surveillance process for gathering information within the system that would allow for the Division to alert Alberta Health Services to a substantial increase in absenteeism among staff/students.	
Review and update existing emergency management plans to include planning for a pandemic.	
Participate in exercises of the municipality's or Alberta Health Services' pandemic plan. <i>(It may be advantageous to exercise the Division's plan internally in advance.)</i>	
Review/exercise your Plan regularly and revise it periodically as needed.	
<b>Continuity of Student Learning and Core Operations</b>	
Consider the impact of potential school closures and/or varying levels of student and staff absences related to a pandemic on student learning and extracurricular activities.	
Develop alternative procedures to ensure continuity of instruction (e.g.: web-based distance instruction, telephone	

fan-outs, mailed lessons and assignments, instruction via local radio or television stations) in the event of a school closure.	
Develop a continuity of operations plan for essential central office functions (including payroll, ongoing communication with staff, students, and parents).	
<b>Infection Control Policies and Procedures</b>	
Infection controls – identify who has this responsibility and articulate the identity of a back-up person(s).	
Disseminate information from public health sources covering routine infection control (e.g., hand hygiene, respiratory etiquette), pandemic fundamentals (e.g., signs and symptoms of influenza modes of transmission) as well as personal and family protection and response strategies (e.g., guidance for the at-home care of ill students and family members). <i>(Alternatively, information on sources could be made available to allow for direct and perhaps more timely access to changing conditions and information.)</i>	
Provide sufficient and accessible infection prevention supplies, such as soap, alcohol-based/waterless hand hygiene products, tissues, and receptacles for their disposal. <i>(Preventative practices re: infection control, to be effective should be encouraged in advance of a pandemic event.)</i>	
Establish policies and procedures for students and staff sick leave absences unique to a pandemic (e.g., non-culpable).	
Establish policies for staff/students that have been exposed to a pandemic, are suspected to be ill, or become ill at school (prompt exclusion and/or isolation of anyone with influenza symptoms). Include policies, based on recommendations from your local health authority, on when a previously ill person is no longer infectious and can return to work/school.	
Establish policies for transporting ill staff/students.	
Establish policies for environmental sanitation during and following a pandemic.	
<b>Plan for the Impact on Your Staff</b>	
Provide information and promote “Personal Disaster Preparedness” for all staff within the Division.	
Consider and plan for considerable staff 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.	
Consider staff access to and availability of counselling during a pandemic including Division, community, and faith-based resources.	
Identify each school’s areas of key responsibilities and the individuals who work in those areas (i.e. human resources, payroll, and 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.	

Prepare a list of all staff, complete with telephone numbers (home and business) and job titles (including those recently retired).	
Maintain a fan-out list to contact employees.	
Can staff arrange alternate forms of transportation to work, e.g., carpooling, etc., if lack of transportation, resources becomes an issue?	
Address the issue of staff being unable to report to work due to possible school and daycare closures.	
Prepare an inventory of skills and professional competencies in the event that people from your school/Division are required to perform duties/functions in other areas to maintain essential services.	
<b>Health and Safety</b>	
Maintain a copy of the Health and Safety manual on location in your worksites.	
Address insurance and union issues.	
Prepare an inventory of specialized equipment/facilities that may be needed during a pandemic.	
Address liability issues for volunteers and re-assigned staff.	
<b>Materials and Supplies</b>	
Develop policies and procedures that cover signing authority.	
Develop a mechanism that will ensure that additional equipment (e.g., cell phones, pagers, refrigerators, etc.) can be obtained with minimum delay.	
Determine who has authority (and an alternate) for ordering repair/replacement for equipment.	
Consider developing a 6-8 week stockpile of critical supplies required to maintain your “must do” services, and stockpile of infection control supplies (e.g., soaps, alcohol-based hand sanitizers, tissues, etc.)	
Prepare a contact list for all your suppliers and alternate suppliers.	
Consider a recovery phase for items such as depleted supplies or backlogs.	
<b>Documentation and Record Keeping</b>	
Develop appropriate record keeping procedures for such items as: Complaints and issues raised; Significant decisions that were made; Regular reporting to provincial/federal governments as required; and Documentation to support pandemic emergency response costs.	
<b>Information and Technology</b>	
Maintain a central inventory of passwords to office equipment and electronic files.	
Ensure that if your information and technology person is ill, there is an alternate.	
Prepare a contact list of all equipment repair persons.	
Ensure your school has the staff and equipment for a website/telephone call-in line to update staff and parents.	
<b>Facilities</b>	
Determine if any of the school’s services could be provided from another work location or from home.	

Identify the security contact (and alternate) should there be a problem with physical access to work locations.	
Consider and plan for the utilization of Division buildings or transportation by Alberta Health and Wellness in the support of essential health services.	
<b>Procurement of Additional Resources</b>	
Determine who (and alternate) has the responsibility for procurement matters (e.g., ordering resources and/or equipment) during a pandemic.	
Determine who (and alternate) will be responsible for payment issues related to overtime and/or additional salary issues.	
Determine who (and alternate) has the authority to hire contract/temporary workers and to take on volunteers.	
Develop a pre-approval process for purchasing additional supplies.	
<b>Post Pandemic/Termination of the Pandemic Response Plan</b>	
Develop a process to review lessons learned from the previous wave when planning for possible future pandemic waves? Who will be responsible for evaluating a response to the pandemic?	
What factors should be included in the evaluation?	
Who (and alternate) will have the authority to notify the various employees, parents and stakeholders regarding the school's return to full service?	
Who (and alternate) will be responsible for the decision to reinstate full service?	
Consider programs for staff/student counselling, emotional recovery plans, etc., following a pandemic or other wide spread societal disruption.	

## Appendix A2

### **School/Worksite Plan/Checklist (for use & development in Interpandemic period)**

	Comments
<b>Activation of Pandemic Response Plan</b>	
Determine who has responsibility for activating the Pandemic Response Plan (the "Plan") for the Division and the identity of that person's back-up.	See Appendix B
<b>Decision-making and Reporting</b>	
Identify who is in charge in the event of a pandemic.	See Appendix B
<b>Agencies and Stakeholder Communications</b>	
Prepare a list of all relevant local community agencies and stakeholders and their contact information. This list should only include contacts appropriate to the school level, versus those appropriate at the Division level. <i>(For example, for efficiency, communication with Alberta Health Services would occur at the Division level.)</i>	
<b>Communications with Staff and the Public</b>	
Identify designated person(s) in the Division responsible for providing up-to-date and accurate information about the pandemic	See Appendix B
Develop a dissemination plan for communication with staff, students, families and local stakeholders.	
Determine who on staff (and an alternate) will be in charge of communicating with the school/worksite staff.	
Determine who will be in charge of communicating with the public when directed to do so by Division Office.	
Identify who on staff notifies the various local stakeholders.	
Develop and test communication protocols for recommended actions, i.e., hotlines, telephone fan-outs, websites, local radio/TV stations	
Develop and maintain up-to-date communications contacts of key local public health and education stakeholders and use the network to provide regular updates as directed by Division Office.	
<b>Planning</b>	
Review and update existing emergency management plans to include planning for a pandemic.	
Communicate/coordinate/integrate your pandemic plan with other local stakeholders.	
In the event of a pandemic, are the roles of the various local stakeholders clearly defined? Who makes what decisions?	
Identify possible key functions, staff positions, and supplies for each key educational service.	
Identify for all stakeholders the legal authorities responsible for executing the community operational plan, especially those authorities responsible for healthcare services and emergency care.	
Designate the responsibility for an internal surveillance process for gathering information, which would allow for the Division to alert Alberta Health Services to a substantial increase in absenteeism among staff/students.	
Participate in exercises of the Division's, municipality's or Alberta Health Services' pandemic plan.	
Review/exercise your Plan regularly and revise it periodically as needed.	
<b>Continuity of Student Learning and Core Operations</b>	



Consider the impact of potential school closures and/or varying levels of student and staff absences related to a pandemic on student learning and extracurricular activities.	
Develop a continuity of operations plan for essential functions (including ongoing communication with staff, students, and parents).	
In conjunction with Division plans, develop alternative local procedures to ensure continuity of instruction in the event of a school closure.	
<b>Infection Control Policies and Procedures</b>	
Infection controls – identify a staff member who has this responsibility and the identity of a back-up person(s).	
Disseminate information from Division Office covering routine infection control (e.g., hand hygiene, respiratory etiquette), pandemic fundamentals (e.g., signs and symptoms) as well as personal and family protection and response strategies (e.g., guidance for the at-home care of ill students and family members).	
Provide sufficient and accessible infection prevention supplies, such as soap, alcohol-based/waterless hand hygiene products, tissues, and receptacles for their disposal. ( <i>Preventative practices re: infection control, to be effective should be encouraged in advance of a pandemic event.</i> )	
Establish procedures for students sick leave absences unique to a pandemic (e.g., non-culpable).	
Establish protocols for staff/students that have been exposed to a pandemic, are suspected to be ill, or become ill at school (prompt exclusion and/or isolation of anyone with influenza symptoms). Include a process, based on recommendations from your local health authority, on when a previously ill person is no longer infectious and can return to work/school.	
<b>Plan for the Impact on Your Staff</b>	
Disseminate information provided by the Division and promote “Personal Disaster Preparedness” for all staff.	
Consider and plan for considerable staff 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.	
Consider staff access to and availability of counselling during a pandemic including Division, community, and faith-based resources.	
Prepare a list of all staff, complete with telephone numbers (home and business) and job titles (including those recently retired). Maintain a fan-out list to contact employees.	
Can staff arrange alternate forms of transportation to work, e.g., carpooling, etc., if lack of transportation, resources becomes an issue?	
Address the issue of staff being unable to report to work due to possible school and daycare closures.	
Prepare an inventory of skills and professional competencies in the event that people from your school/worksites are required to perform duties/functions in other areas to maintain essential services.	
<b>Health and Safety</b>	
Maintain a copy of the Health and Safety manual on location in your worksites.	

<b>Materials and Supplies</b>	
Develop protocols and procedures that cover signing authority.	
Determine who has authority (and an alternate) for ordering the repair of or replacement of equipment.	
Consider developing a 6-8 week stockpile of critical supplies required to maintain your “must do” services, and stockpile of infection control supplies (e.g., soaps, alcohol-based hand sanitizers, tissues, etc.)	
Prepare a contact list for all your suppliers and alternate suppliers.	
Consider a recovery phase for items such as depleted supplies or backlogs.	
<b>Documentation and Record Keeping</b>	
Develop appropriate record keeping procedures for such items as: Complaints and issues raised; Significant decisions that were made; Regular reporting to Division Office as required; and Documentation to support pandemic emergency response costs.	
<b>Information and Technology</b>	
Maintain a central inventory of passwords to office equipment and electronic files.	
Ensure your school/worksites has the staff and equipment for a website/telephone call-in line to update staff (and parents).	
<b>Facilities</b>	
Determine if any of the school’s services could be provided from another work location or from home.	
Identify the security contact (and alternate) should there be a problem with physical access to work locations.	
Consider and plan for the utilization of school/worksites buildings or transportation by Alberta Health and Wellness in the support of essential health services.	
<b>Post Pandemic/Termination of the Pandemic Response Plan</b>	
Who (and alternate) will have the authority to notify staff, parents and stakeholders regarding the school’s/worksites return to full service when directed by Division Office?	
Consider programs for staff/student counselling, emotional recovery plans, etc., following a pandemic or other wide spread societal disruption.	
Participate in lessons learned review process for planning of possible future pandemics.	

# Appendix B1 Pandemic Planning Framework

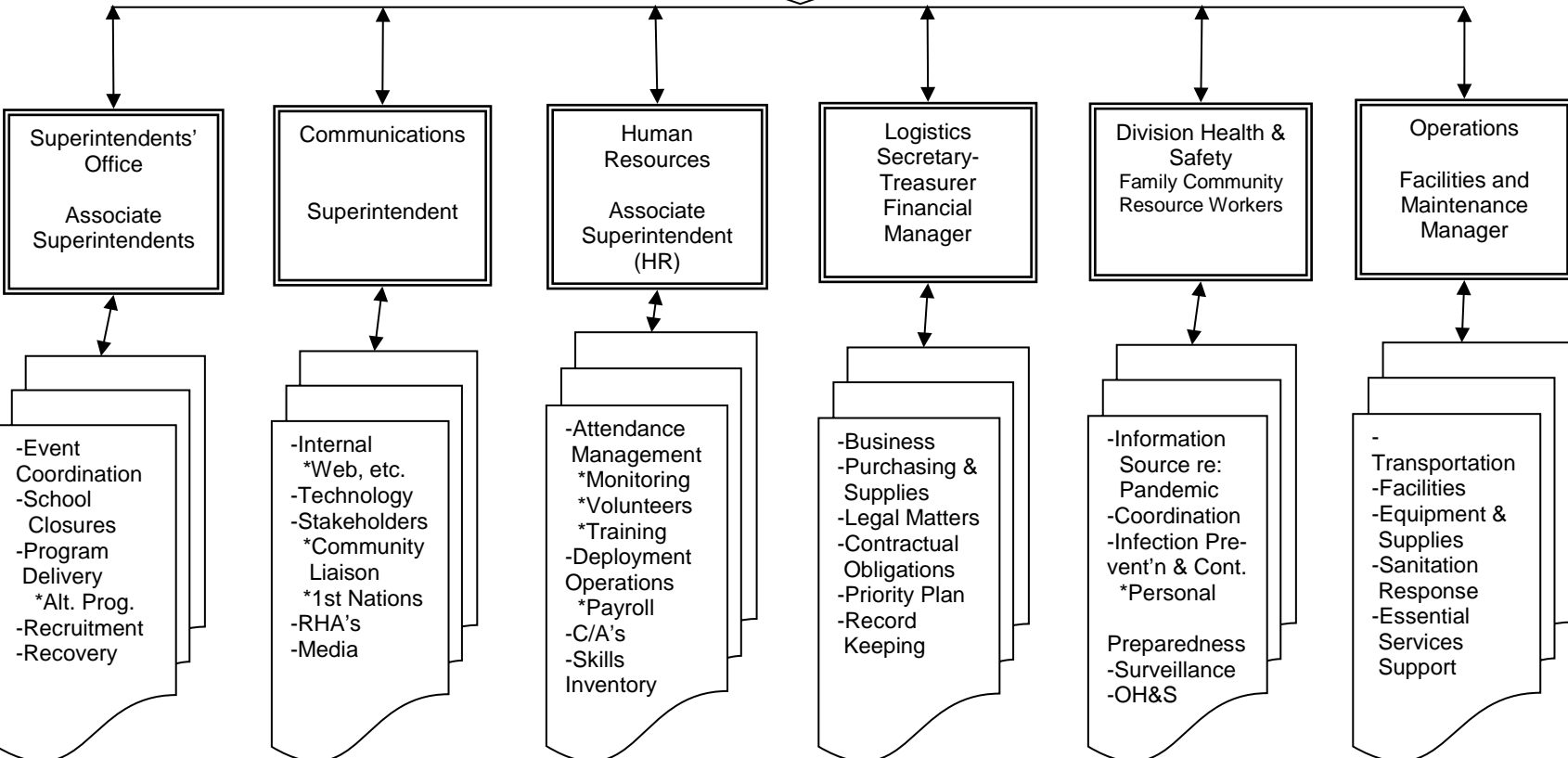


## Golden Hills SD Pandemic Planning Framework

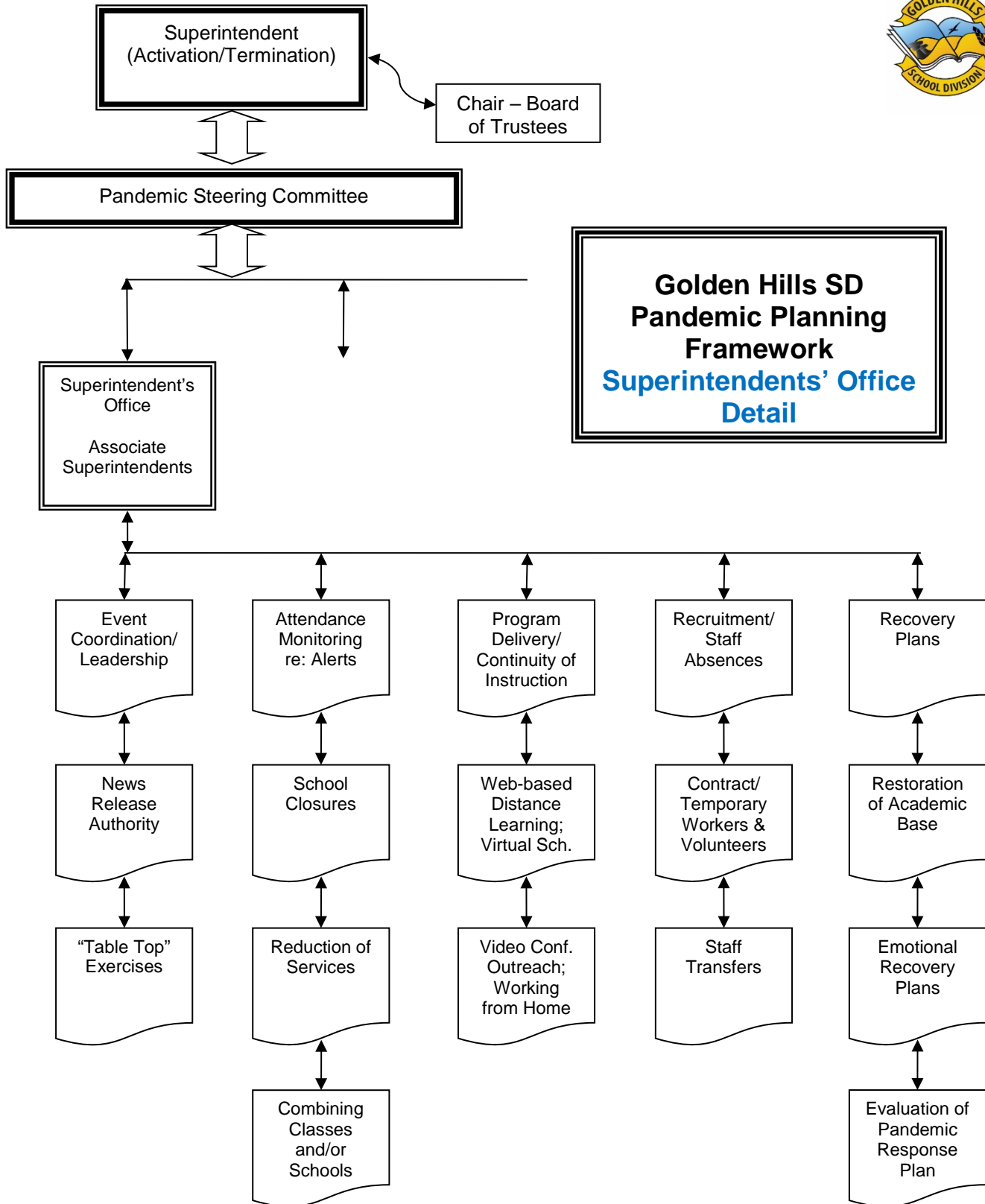
Superintendent  
(Activation/Termination)

Chair – Board  
of Trustees

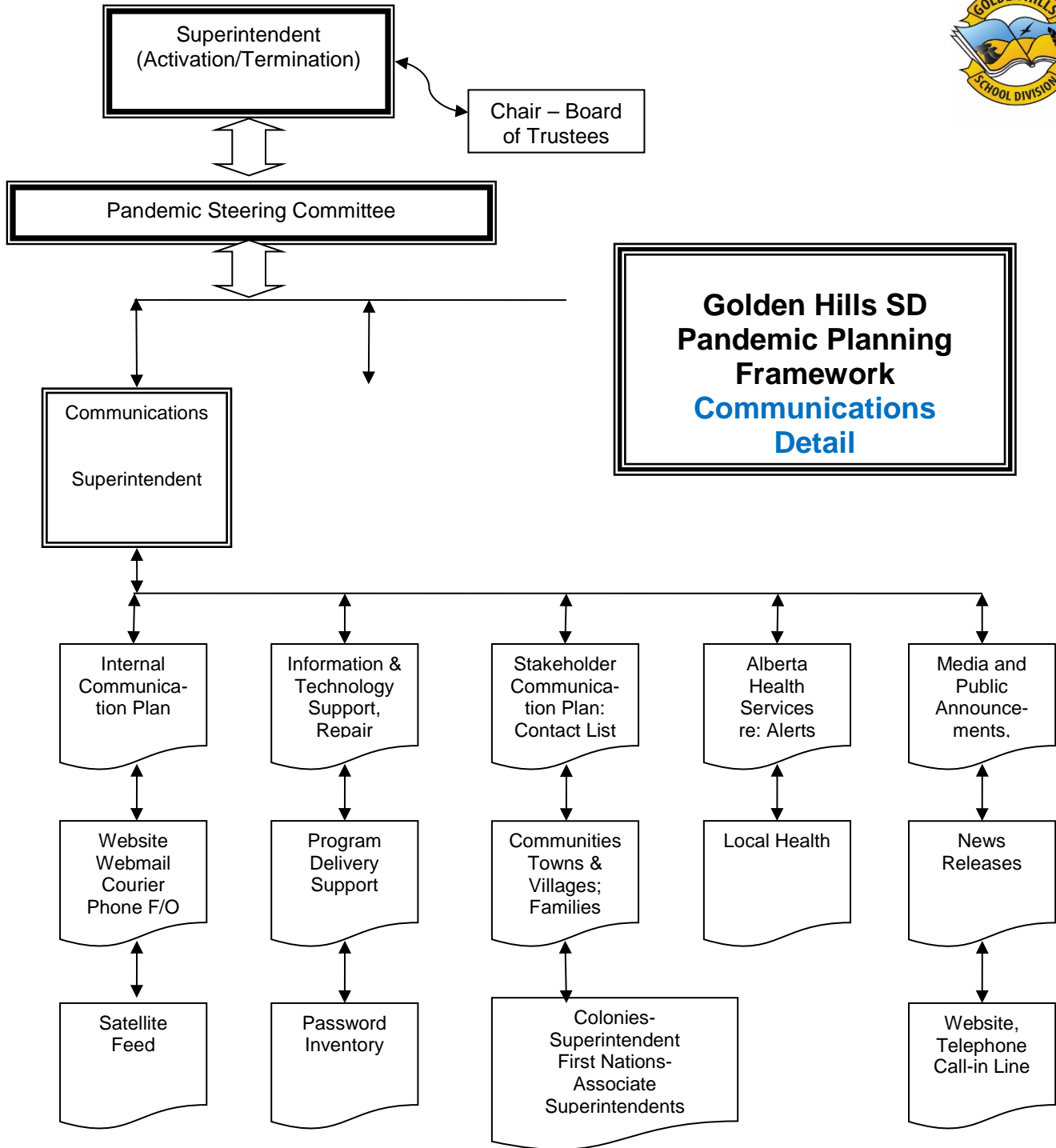
Pandemic Steering Committee  
(Membership as Designated Below)



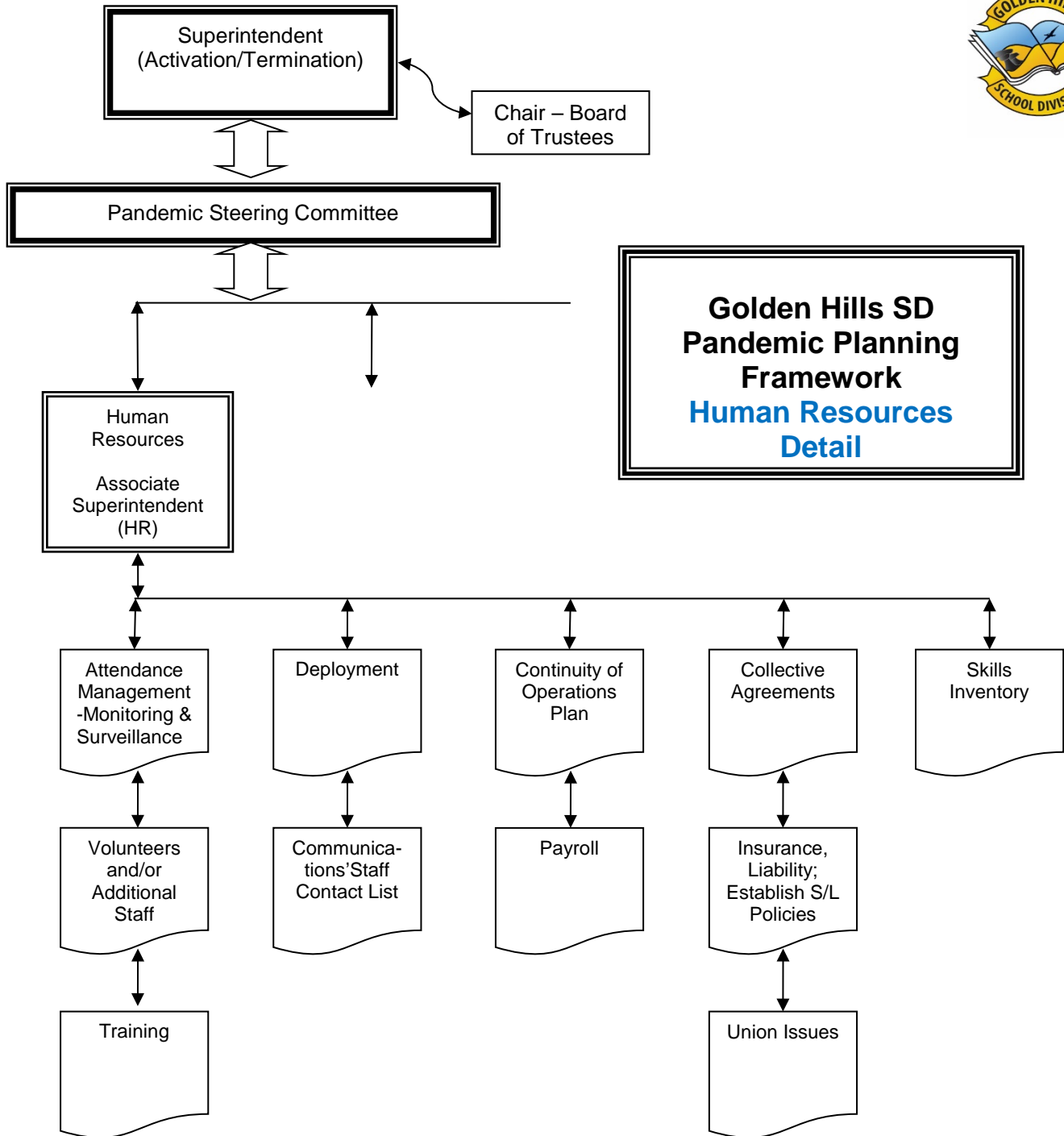
## Appendix B2 Superintendents' Office Detail



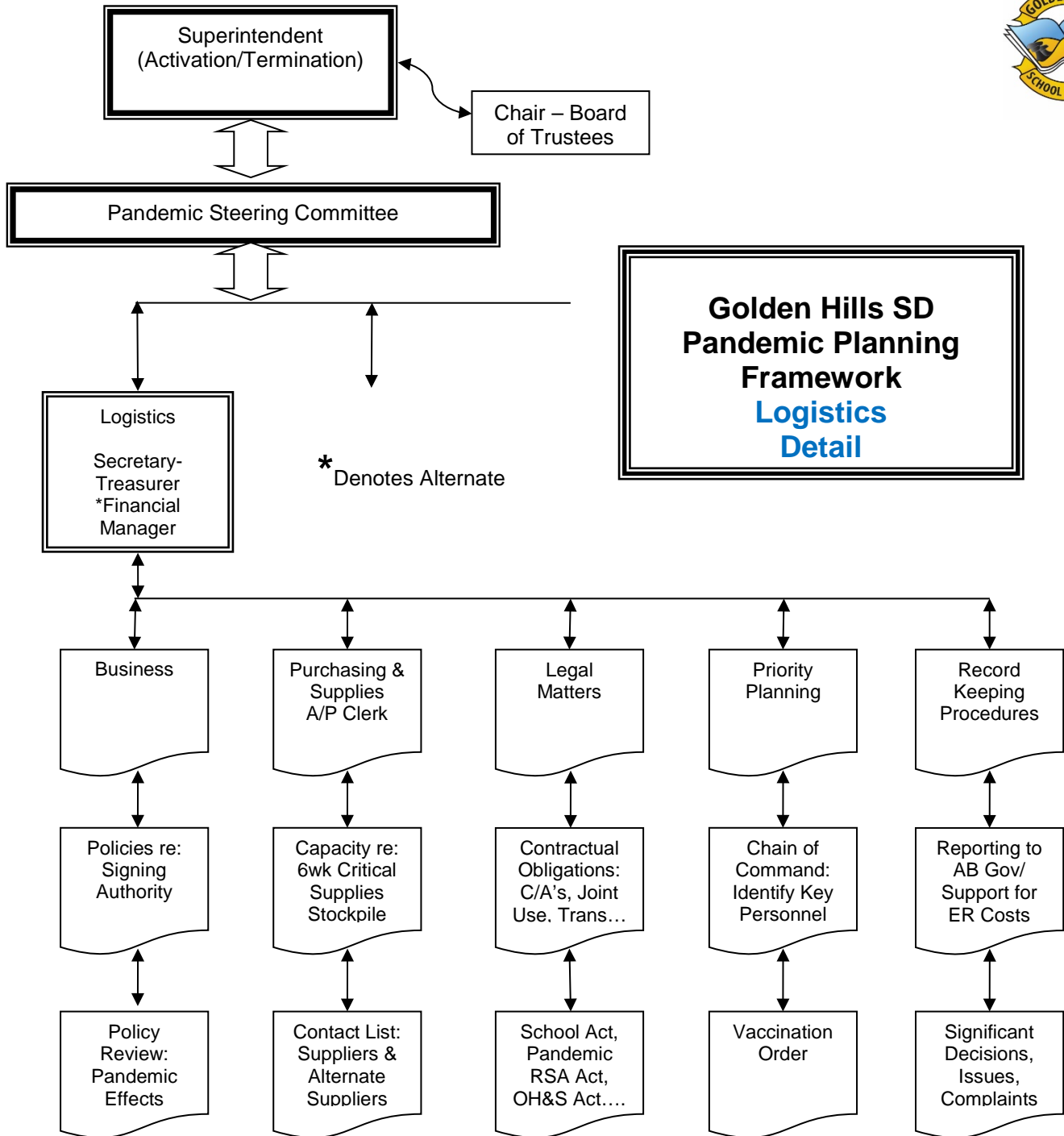
# Appendix B3 Communications Detail



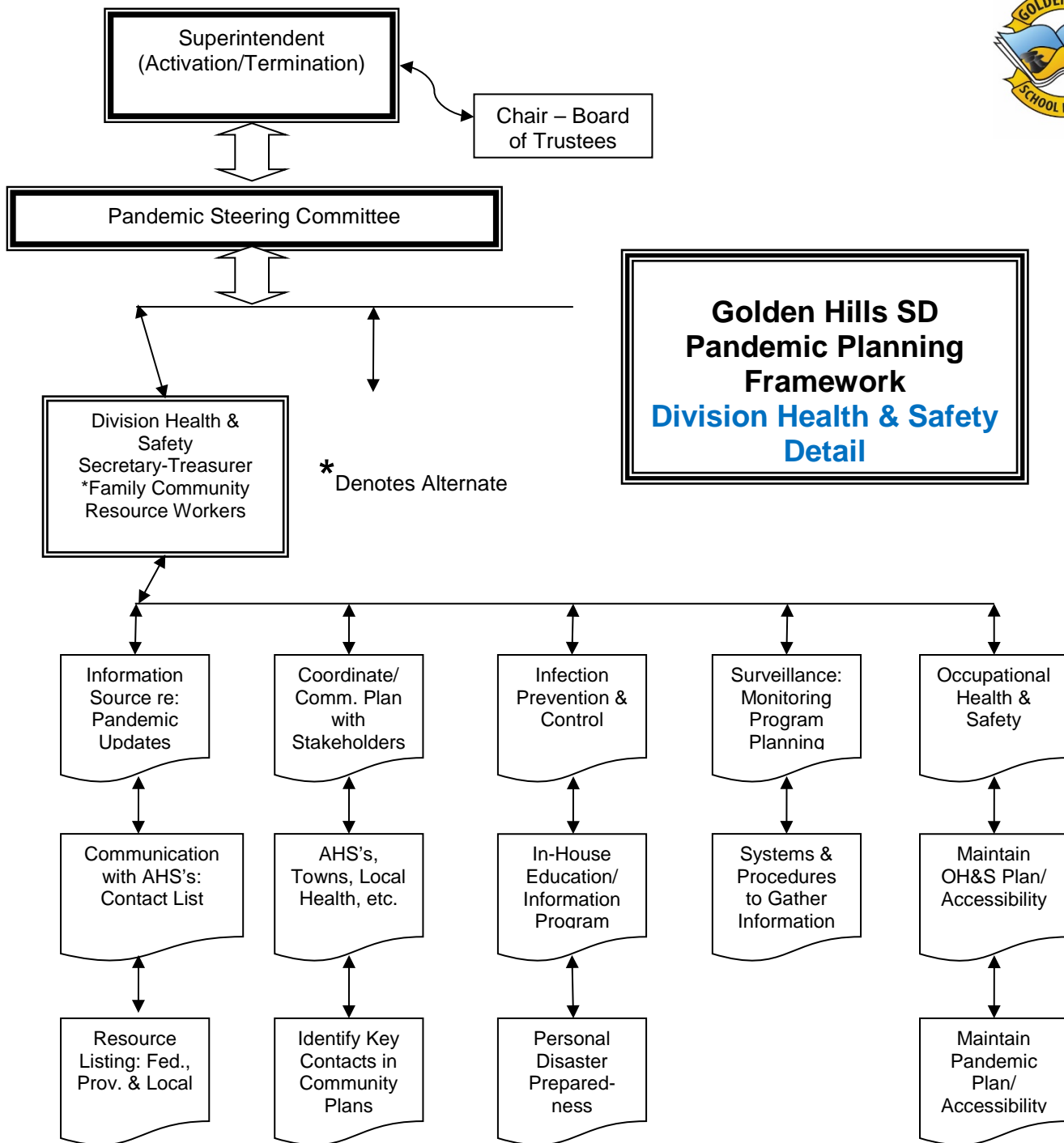
# Appendix B4 Human Resources Detail



# Appendix B5 Logistics Detail

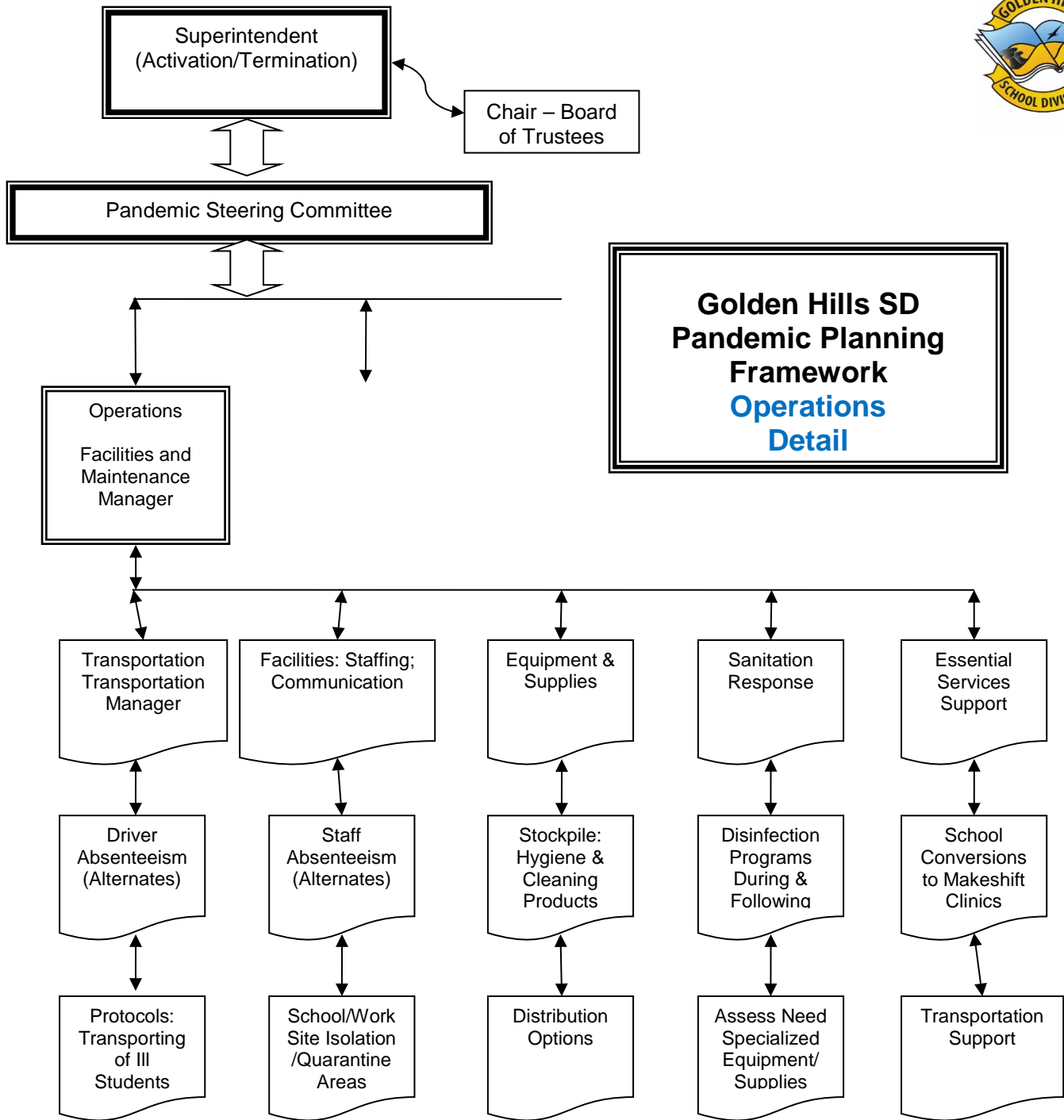


# Appendix B6 Division Health and Safety Detail

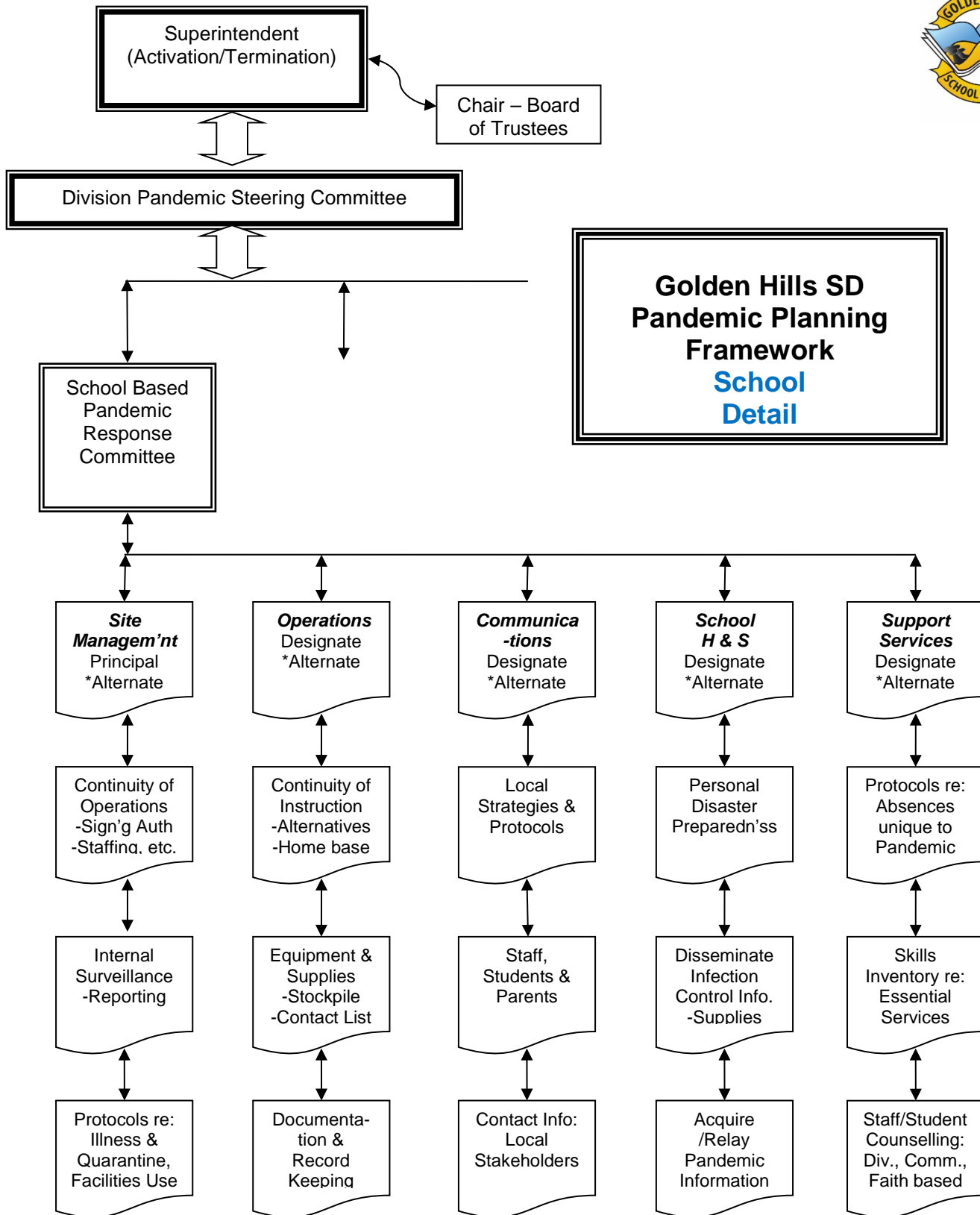




# Appendix B7 Operations Detail



# Appendix B8 School Detail



## Appendix C

### Infection Control Practices

#### Take action now

- Encourage annual influenza vaccination among staff and students. Currently vaccinations for influenza are free to all Albertans six months or older. Review policies and recommendations for annual influenza vaccination
- Work with the public health nurse assigned to your school to ensure timely submission of sentinel data related to student absenteeism
- Institute good infection control practices in your school now. Provide infection control supplies, such as soap, alcohol-based hand sanitizers, paper towels and tissues and receptacles for their disposal. Review policies for use for staff and students
- Provide education and materials covering influenza and pandemic fundamentals. Materials should cover signs and symptoms of influenza, modes of transmission, personal and family protection and response strategies; e.g., hand hygiene, cough/sneeze etiquette

#### Take action then – general infection control recommendations

When Phase 4 Pandemic period is declared;

- Set up prominent notices at all entry points to facility, advising staff, students and visitors not to enter if they have symptoms of influenza
- Consider limiting school entry to one portal. In this way entry screening for influenza in staff, students and visitors may be possible. Information can more easily be provided to all individuals entering the school
- Educate employees, students, parents and visitors on how to stop the spread of the virus by using notices that may be placed around the school (including entrances, notice boards, meeting rooms and restrooms). Notices should contain information regarding hand hygiene, respiratory etiquette, and social distancing. See the respective sections for recommendations on each
- Ensure adequate supplies of tissues, hand sanitizing gels, soap and water, as well as cleaning supplies, are available for employees and students
- Implement planned Social Distancing Techniques. See Social Distancing page 40.

#### Hand hygiene

Effective hand washing and drying routines are a primary means of reducing infections in students and staff. Many disease-causing viruses and bacteria are carried on hands and can be passed from person to person through direct contact with the person's hands or through objects or food that the person has touched. This includes pandemic influenza. Students should be encouraged to take responsibility for their own hand washing and drying but to do so they need a supportive environment.

Hand hygiene includes both hand washing and waterless hand sanitizers.

#### Hand Washing

- Proper hand hygiene campaigns should be implemented before an influenza pandemic.
- Proper hand washing
  1. Wet your hands with warm running water.
  2. Add soap, and then rub your hands together, making a soapy lather. Do this away from the running water for at least 20 seconds (sing Twinkle Twinkle Little Star or Happy Birthday twice), being careful not to wash the lather away. Wash the front and back of your hands, as well as between your fingers and under your nails.
  3. Rinse your hands well under warm running water.
  4. Pat hands dry with a paper towel. Turn off water using same paper towel and dispose in a proper receptacle.

- When to wash your hands:
  - After coughing or sneezing (when the hands have been used to cover the mouth or nose)
  - Before touching eyes, nose or mouth
  - After caring for an ill individual
  - After using the toilet or after handling animals
  - Before, during and after the preparation of food
  - When hands are dirty
- Adequate supplies to last through any supply chain interruptions

#### Soap

- Antibacterial hand soaps are not recommended. Antibacterial soaps offer no benefit over regular soaps in preventing common illnesses and their widespread use can cause antibiotic resistance. Antibacterial soaps and cleaners are readily available - there are hundreds of brands on the market, yet research doesn't support the use of antibacterial soaps and cleaning products over regular soaps and cleaners
- Liquid hand soap is preferable to bar-style hand soaps. Bar soaps are not as hygienic as liquid soaps because they stay moist and attract germs. If bar soap is the only option it should be stored on a rack so that the bar doesn't sit in water
- Soap doesn't actually kill the bad germs. Instead, it's the combination of soap, rubbing, rinsing and drying that helps these bugs slide off your hands

#### Hand drying

- Single use Disposable Paper towels
  - Lower the likelihood of the transfer of infection from person to person
- Roller towels
  - Ensure these are the type that roll and retract once used to avoid spread of infection
  - Younger students may find these difficult to use
- Air dryers
  - Hands must be dried thoroughly to stop the spread of infection (takes approx. 45 seconds)
  - Younger students may find air dryers frightening to use

### **Waterless hand sanitizers**

Hand sanitizers are not a replacement for proper hand washing however they are effective when proper hand washing is not available. Waterless hand sanitizers should only be used if no visible dirt is present on the hands. Waterless hand sanitizers are effective against the influenza virus.

Recommendations for hand sanitizing include:

- Types of products
  - Use alcohol-based waterless hand sanitizers
  - Use of products with alcohol contents between 60-95% will be effective against the pandemic influenza virus
- How to use:
  - It is recommended that you follow the manufacturer's instructions for product use
  - However, in their absence, hand sanitizer use should follow the general steps below:
    1. Remove hand and arm jewellery.
    2. Ensure hands are visibly clean (if soiled, follow hand washing steps).
    3. Apply between 1 to 2 full pumps of product, or squirt a loonie-sized amount, onto one palm.
    4. Spread product over all surfaces of hand, concentrating on fingertips, between fingers, back of hands, and base of thumbs.
    5. Rub hands until product is dry. This will take a minimum of 15 to 20 seconds if sufficient product is used.

- Product placement

- The product should be located to provide convenient access in areas where hand washing is not readily available. E.g., hallways, classrooms, offices etc.
- Consider providing portable dispensers to staff so hand sanitizing can occur at any place
- Cautions on use
  - The products must not be ingested. Therefore it is recommended that children be supervised during use
  - Alcohol-based hand sanitizers are flammable for a short period before the alcohol is fully evaporated. Care in use must be maintained. Follow manufacturer instructions for use

## Respiratory etiquette

Respiratory etiquette is an important tool to prevent the transmission of influenza in educational institutions. Respiratory etiquette programs should include:

- Proper infection control campaigns, including respiratory etiquette, should be implemented before an influenza pandemic
- The following measures to contain respiratory secretions are recommended for all individuals with signs and symptoms of a respiratory infection
  - Cover the nose/mouth when coughing or sneezing
  - Use tissues to contain respiratory secretions and dispose of them in the nearest waste receptacle after use or cough into the inside of the elbow.
  - Perform hand hygiene after having contact with respiratory secretions and contaminated objects/materials
- Schools should ensure the availability of materials for adhering to Respiratory Hygiene/Cough Etiquette in areas for visitors
  - Provide tissues and no-touch receptacles for used tissue disposal
  - Provide conveniently located dispensers of alcohol-based hand rub

## Personal protective equipment

### Masking

A supply of procedural masks (surgical masks) should be available during an influenza pandemic. Mask use must be completed correctly to minimize the risk of infection to the user.

Recommendations for using masks include:

- A mask should be worn once and then discarded
- Change masks when they become moist
- Do not leave masks dangling around the neck
- Upon touching or discarding a used mask, perform hand hygiene
- When mask use is recommended:
  - N95 Particulate Respirators
    - N95 particulate respirators are only recommended during high-risk medical procedures. These include intubation, resuscitation and nebulization or any other procedure when the risk of fine particulate generation exists
    - There should be no need for N95 particulate respirators in schools
  - Procedural (surgical masks)
    - Routine/regular mask use by students and staff is **not** recommended
    - Any individual displaying signs of illness **should** wear a procedural mask to minimize the risk of transmission of influenza to others
    - Individuals providing care to or in close contact with ill individuals **should** be provided with procedural masks

## **Gloves**

Recommendations for glove use include:

- A single pair of patient care gloves should be worn for contact with blood and body fluids, including during hand contact with respiratory secretions (e.g., providing oral care, handling soiled tissues). Gloves made of latex, vinyl, nitrile, or other synthetic materials are appropriate for this purpose; if possible, latex-free gloves should be available for individuals who have latex allergy
- Gloves should fit comfortably on the wearer's hands
- Remove and dispose of gloves after use on an individual; do not wash gloves for subsequent reuse
- Perform hand hygiene after glove removal
- Use other barriers (e.g., disposable paper towels, paper napkins) when there is only limited contact with a patient's respiratory secretions (e.g., to handle used tissues). Hand hygiene should be strongly reinforced in this situation
- Staff should be particularly vigilant to avoid:
  - Touching their eyes, nose or mouth with contaminated hands (gloved or ungloved). Careful placement of personal protective equipment (PPE) before patient contact will help avoid the need to make PPE adjustments and risk self-contamination during use. Careful removal of PPE is also important
  - Contaminating environmental surfaces that are not directly related to patient care (e.g., door knobs, light switches)

## **Environmental issues**

### **Waste disposal**

Standard procedures are recommended for disposal of solid waste that might be contaminated with the pandemic influenza virus:

- Used tissues are not considered medical waste. Discard as usual
- Discard used patient-care supplies that are not likely to be contaminated (e.g., paper wrappers) as routine waste
- Wear disposable gloves when handling waste. Perform hand hygiene after removal of gloves

### **High touch surface cleaning**

Surfaces can be divided into two groups – those with minimal hand contact, such as floors and ceilings, and those with frequent hand-contact, known as “high touch surfaces”. High touch surfaces include items such as doorknobs, light switches, handrails, water fountains, areas around toilets and urinals and fixture knobs.

The frequency of cleaning of minimal hand contact surfaces does not need to be increased during an influenza pandemic. However high touch surface cleaning should be increased. Because the influenza virus can survive on hard surfaces for 24-48 hours, increasing the cleaning of these surfaces may help reduce the transmission of the pandemic influenza virus. Cleaning of all high touch surfaces should be completed during and after high volumes of individuals (e.g., after a break period) have had contact with these surfaces. This is especially important if a staggering school time for natural cohorts has been implemented.

It should be remembered that increased frequency of cleaning and sanitizing of high touch surfaces cannot completely eliminate the risk of virus transmission. The ideal scenario would be to clean and sanitize after every contact with the surface. Because this is not a practical scenario, this infection control technique is limited in effectiveness. Therefore proper hand hygiene is extremely important to reduce the overall risk of transmission in a school setting.

Regular cleaning and disinfecting products are effective for removal of the influenza virus. No special products are required for cleaning environmental surfaces. The physical removal of microorganisms by scrubbing is as important as any antimicrobial effect of the cleaning agents used. Cleaning with a scrubbing action is very important to the proper removal of the influenza virus from high touch surfaces.

### **Linen/Laundry**

Standard procedures are recommended for linen and laundry that might be contaminated with respiratory secretions from individuals with pandemic influenza. Recommendations include:

- Place soiled linen directly into a laundry bag in the person's room. Contain linen in a manner that prevents the linen bag from opening or bursting during transport and while in the soiled linen holding area
- Wear gloves and gown when directly handling soiled linen and laundry (e.g., bedding, towels, personal clothing) as per standard precautions. Do not shake or otherwise handle soiled linen and laundry in a manner that might create an opportunity for disease transmission or contamination of the environment
- Wear gloves for transporting bagged linen and laundry
- Perform hand hygiene after removing gloves that have been in contact with soiled linen and laundry
- Wash and dry linen according to routine standards and procedures

### **Group/Shared equipment**

Schools should pay special attention to policies on use of common touch/group equipment in the school during an influenza pandemic. Common touch /group equipment includes any items that do not belong solely to one individual and used exclusively by that individual, but does not include structural items such as doorknobs. Common use items should not be used or should be replaced with single-use disposable alternatives whenever possible during an influenza pandemic. However if items must be used, ensure that they are cleaned and sanitized between use and proper infection control is implemented during and after use e.g., Hand Hygiene.

### **Reusable dishware**

Regular procedures for washing and sanitizing are sufficient to destroy the influenza virus on dishware and utensils. Where large quantities of reusable dishware are used, for example in a cafeteria, reusable dishware/utensils (including shared coffee mugs) should be washed in accordance with the Alberta Dishwashing Standard for commercial operations available at:

<https://www.albertahealthservices.ca/assets/wf/eph/wf-eh-dishwashing-requirements.pdf>

### **Toys/Sports equipment**

Where possible, common use toys should be removed from use. However, if this is not possible, toys should be washed and sanitized between users. Plush toys should be laundered between users.

Where possible, common use sports equipment should be removed from use. This is particularly true of equipment that has intimate contact with the face or the potential for contamination with respiratory secretions such as shared helmets and face shields. If this is not practical, all common equipment should be washed and sanitized after each use.

In the case of sports equipment that has multiple contacts during use (e.g., baseballs) students must ensure that proper infection control practices are adhered to during and after use. Infection control practices would include minimizing hand contact with the face and proper hand hygiene before and after the activity.

### **Water fountains**

Schools may decide to remove (disconnect) water fountains from use during an influenza pandemic. However there is no current evidence to suggest that water fountains have a

higher transmission rate of the influenza virus than other high touch surfaces. Notwithstanding, hand contact with the face (e.g., wiping excess water from the mouth) after using a water fountain without proper hand hygiene *may* create the potential for increased transmission of influenza within water fountain users. Therefore implementing the precautionary principal suggests it may be prudent to disconnect water fountains during an influenza pandemic. If water fountains are disconnected, an alternate source of drinking water should be supplied to students. Transmission potential associated with any alternate source should be evaluated and incorporated into any decision to remove water fountains from use.

#### **Musical wind instruments**

During an influenza pandemic, schools should suspend the use of shared wind instruments due to the possibility of indirect transmission of the virus. Schools that continue the use of wind instruments during a pandemic must ensure mouthpieces and sections of the instrument that may contain/retain saliva are properly cleaned and sanitized in accordance with school protocols. Hand hygiene should be practiced following the use of wind instruments.

### **Social distancing**

Social distancing is a strategy to minimize the spread of pandemic influenza by minimizing close contact of individuals. By minimizing or eliminating close contact in social settings the transmission of pandemic influenza between individuals is greatly reduced.

#### **General considerations**

General social-distancing practice recommendations should be applied to all individuals at all times during the Pandemic period. These recommendations include:

- Wherever possible ensure a minimum separation of 1 meter between individuals at all times
- Avoid or cancel large gatherings
- Avoid social customs that require close personal contact e.g., handshaking
- When possible, have meetings using telecommunication devices e.g., telephone or video conferencing. If this is not possible, minimize the meeting time and have a minimum of 1 meter separation between participants. Do not use common items (e.g., shared pens for an attendance sheet) during the meeting. Have a general reminder of social distancing practices at the start of the meeting.
- Avoid public transport: walk, cycle, drive a car or go early or late to avoid rush hour crowding on public transport. When public transport is unavoidable, maintain other recommendations for social distancing

#### **Specific to schools**

- Follow all general social distancing recommendations
- Consider procedures to maintain social distancing on all mass student transportation. For example, on school board operated student bussing, consider placing increased supervision to maintain social distancing practices. Also consider increasing the number of transport vehicles to reduce the student density to allow for proper distancing between students
- Stagger lunch and break periods for staff and students based on pre-existing cohorts e.g., by grade. This staggering of break periods will reduce the number of individuals in contact with each other
- If applicable, consider how the school cafeteria should be managed
- Do not congregate in staffrooms or other areas where people socialize
- Set up alternate systems of information transfer to parents that do not require personal contact. For example a telecommunication systems that parents can contact for information
- Encourage students and staff to avoid recreational or other leisure classes or meetings where they might come into contact with infectious people



## Recognizing influenza

To adequately respond to an influenza pandemic, individuals must be able to recognize and identify individuals potentially ill with influenza. Prompt recognition of individuals ill with the pandemic Influenza virus will facilitate immediate isolation and implementation of proper infection control procedures to limit the transmission from the sick individual. The symptoms of pandemic influenza will probably be similar to those of seasonal influenza, but they could be more severe and cause more serious complications. During an influenza pandemic it should be assumed that any respiratory illness is pandemic influenza, and act accordingly. It is better that someone stays at home for a couple of days with what might turn out to be another respiratory infection than going to work or school with the early symptoms of pandemic influenza and pass the influenza virus on to other people.

The symptoms of influenza appear suddenly and often include:

- Fever of 37.7°C (100°F) to 40.0°C (104°F), which can reach 41.1°C (106°F) when symptoms first develop. Fever is usually continuous, but it may come and go. Fever may be lower or absent in older adults. When fever is high, other symptoms usually are more severe
- Body aches and muscle pain (often severe), commonly in the back, arms, or legs
- Headache
- Pain when you move your eyes
- Fatigue - a general feeling of sickness (malaise), and loss of appetite
- A dry cough, runny nose, and dry or sore throat. You may not notice these during the first few days of the illness when other symptoms are more severe. As your fever goes away, these symptoms may become more evident
- Influenza usually does not cause symptoms in the stomach or intestines, such as vomiting and diarrhea

Schools should educate all staff and students about the signs and symptoms of influenza so staff and students can recognize and initiate a response to any potentially unwell individuals.

Schools should create policies for determining what constitutes an unwell individual. This may include developing a signs and symptoms checklist followed by some basic symptom verification devices such as single use disposable body temperature devices. However it is strongly recommended that any individuals displaying signs and symptoms of a respiratory illness be deemed to be infected with the pandemic Influenza virus until proven otherwise. Following this recommendation should negate the requirement for physical verification of the symptoms of potential pandemic influenza cases.

## Dealing with unwell individuals

An important part of the pandemic planning process is to determine the procedures for managing staff and students who present unwell to school or become ill at school.

### Ill individuals coming to school

Whenever possible ill individuals coming to school should be immediately excluded and sent home. If this is not possible, these individuals should be immediately asked to don a mask and be placed in an isolation area. Individuals should be excluded as soon as possible to minimize the number and time that sick individuals are in the school.

Please see [Isolation Area section](#) below for more information on isolating individuals. Schools should provide educational materials and reinforce self-isolation of individuals. If you are unwell, stay at home.

### Individuals becoming ill at school

When an individual is first suspected of or has signs and symptoms of influenza they should be asked to don a mask and be placed in isolation. Procedures for excluding the individual (i.e., send home) should begin as soon as possible. Try to minimize the time

that the unwell individual remains in school. Please see Isolation Area section below for more information on isolating individuals.

### **Record keeping of contacts**

Schools should keep a record of any individual who may have been exposed to an ill individual. Exposed individuals are currently defined as any individuals having intimate contact (<1 meter) with the ill individual during the infectious period. Schools should provide information to parents of any exposed student. Information provided to these parents should include; how to recognize influenza infection, reinforcing self-isolation, and current information on seeking treatment.

### **Isolation area**

Schools should predetermine an area for isolation of ill individuals who cannot immediately be excluded from the school setting. The isolation area should be capable of providing comfortable surroundings for ill individuals separate from others to minimize the contact between ill individuals and well individuals.

An isolation area should:

- Be located separate from population
  - Location must be located to minimize any potential contact with well individuals
  - Location must provide privacy to users
  - Must provide at least a 6-foot separation from any well individuals
  - A separate room is highly preferred – the door may be left open
  - As a last resort use an open area with at least 2 meters of separation from well individuals
- Have, where possible, smooth, impervious and easily cleaned surfaces
- If possible do not let air from isolation area be part of return air in HVAC systems. Block off return air vents where possible. Vent isolation room air to outside. Vented air must be vented where a minimum of 2 meters of separation is allocated for individuals. Note: This is not essential to the infection control techniques for pandemic influenza but may be implemented as a precaution to minimize the risk to well individuals within the school
- Provide comfortable furniture for ill individuals. For example, cots covered with single use coverings, washable coverings changed between users, or plastic coverings that are easily cleaned and sanitized with disinfectant
- Consider providing items to occupy individuals. E.g., television
- Have easy access to hand-washing facilities (located within the isolation area is strongly preferred). Alcohol-based sanitizer should be available as a supplement to hand washing but does not replace hand washing
- Isolation areas should have access to lavatory facilities. Separate facilities for this purpose are recommended
- Have a large supply of infection control products e.g., tissues
- Ill individuals should be separated by physical barriers e.g., privacy screens. However, if not possible, place individuals a minimum of 2 meters apart. Ensure isolation area is large enough to accommodate this
- Any reusable items must be cleaned and disinfected between users. For example, blankets must be laundered between users
- Wear appropriate PPE when caring for ill individuals. See page 36 PPE section
- Policies for providing over-the-counter (OTC) medications to individuals should be reviewed and implemented. For example, the use of acetaminophen
- Isolation areas should be cleaned and disinfected regularly. Cleaning and disinfection of occupied isolation areas includes:
  - Wearing gloves in accordance with facility policies for environmental cleaning and wearing a surgical or procedure mask in accordance with droplet precautions

- Keeping areas around the patient free of unnecessary supplies and equipment to facilitate daily cleaning
- Using any household detergent-disinfectant. Follow manufacturer's recommendations for use: dilution (i.e., concentration), contact time, and care in handling.
- Giving special attention to frequently touched surfaces (e.g., bedrails, bedside and over-bed tables, TV controls, call buttons, telephones, lavatory surfaces including safety/pull-up bars, doorknobs, commodes) in addition to floors and other horizontal surfaces

**Policy issues for isolation**

Consider the following when developing plans for isolation areas:

- Liabilities of providing care to individuals
- Liabilities for care givers becoming ill
- Policies for providing over-the-counter drugs
- Policies for transportation of ill individuals
  - When to transport?
  - How to transport?
  - Communication with parents
- When to seek medical attention
- Dealing with deaths
  - Psychosocial support for families, students and staff affected by the death
  - Body storage - if normal resources are unable to respond immediately; multiple deaths
  - Communications
  - Infection control on handling of deceased individuals

## Appendix D

### Influenza Monitoring Guidelines Golden Hills School Division

#### Principles & Assumptions:

- All schools (excluding Outreach, Colony, Learning Academy & Northstar Academy) shall be provided comparison baseline absentee rates for each month of the school year.
- The assumption is made that non-illness absences are contained within the baseline rates and would appear in the current school year as well. As such, the baseline rate shall be adjusted by the school administrator to **normalize** the baseline rate in order to **exclude** extenuating, non-illness related absences.
- **A school alert is appropriate when the adjusted baseline rate of absences is exceeded by an additional 10%. The administrator (or designate) would report to the Division Office Front Desk.** They will in turn inform HR or others so designated.
- A classroom alert is appropriate when a 25% absentee rate has occurred. The teacher would report to the administrator.
- A staff absentee alert is at the discretion of administration as it relates to the safe operation of the site. **The administrator would report to Associate Superintendent, Human Resources.**
- Outreach, Colony, Learning Academy & Northstar Academy schools will issue alerts at the discretion of the administrator/teacher in charge.
- No alert will be issued when absentee rates meet the above criteria as a result of extenuating circumstances unrelated to a pandemic influenza virus.

#### Sample Calculations:

##### No.1 School

**For a school with an enrollment of 500 students and an adjusted baseline absentee rate of 4% in October, (i.e., normalized from 6% to 4%), the acceptable daily number of absentee students is:**

$$500 \times 0.04 = 20$$

A school alert would be triggered based on the following:

$$20 + (500 \times 0.10) = 70 \quad \text{i.e., when 70 or more students were absent due to illness}$$

**If in November, the enrollment changes to 480 students and the adjusted baseline rate is now 5%, (i.e., normalized from 7.5% to 5%), the acceptable daily number of absentee students becomes:**

$$480 \times 0.05 = 24$$

A school alert would be triggered based on the following:

$$24 + (480 \times 0.10) = 72 \quad \text{i.e., when 72 or more students were absent due to illness}$$

##### No.2 Classroom

For a classroom with an enrollment of 24 students, an alert would be triggered based on the following:

$$24 \times 0.25 = 6 \quad \text{i.e., when 6 or more students were absent due to illness}$$

## Appendix E

### Sample Parent Letters, Media Releases & Family Checklist



#### **No.1 SAMPLE PARENT LETTER-- INFLUENZA LIKE ILLNESS OUTBREAKS Use this letter to notify parents under the direction of the Division when there is a influenza like illness outbreak at the school.**

Dear Parents,

Our school has recently experienced an increase in the number of students/staff with influenza-like-illness (ILI). We have notified and are working with Alberta Health Services, Public Health to further investigate and implement measures to limit transmission of illness.

This increased illness may be due to seasonal or pandemic influenza or other respiratory viruses. The recommended control measures are effective for any respiratory viruses.

As recommended by Public Health, the school is:

- Promoting and reminding students and staff of basic infection control practices such as respiratory etiquette, and frequent hand cleaning.
- Notifying parents if students become ill with ILI at school. Ill students will be kept separated from others until picked up by parents.
- Advising ill staff to stay home.
- Carrying out frequent environmental cleaning including high touch surfaces.
- Monitoring student and staff absentee rates due to illness.

We ask that parents keep ill children at home until they are free of symptoms and feeling well, and are able to fully participate in all normal daily activities. Encourage and remind your children to use respiratory hygiene (i.e. cover their mouth and nose with a tissue when coughing or sneezing, or cough and sneeze into their sleeve, dispose used tissue and wash hands afterwards using soap and water).

**If you have questions, please contact (School Name) or your healthcare provider. You can call the school at xxx-xxxx.**

**You can get more information from Alberta Health Services:**

Visit online at <http://www.xxxx.com> or call the Health Emergency Information Line: 1-800-xxx-xxxx.

**The federal government website with information on planning for individuals and families:**

<http://www.xxxx.com>



## No.2 SAMPLE LETTER TO PARENTS

### **Initial Pandemic Flu Outbreak: Use this letter to let parents know schools are still open.**

Dear Parents,

This letter will give you information about a flu outbreak in (*Name of town, etc.*). Every year, some people get sick with the flu during the fall and winter months. This year, there is a new flu virus that is making many people sick.

A lot of students and teachers in our school are sick with the flu. We hope they will all get better quickly.

At this time, the (*local health authority*) tells us that students who are not ill can safely come to school. The schools will remain open. We will keep you updated with any important information.

To keep the flu from spreading to more people, we ask you to keep sick children home. Any children who are sick in school will be sent home.

Here are some ways to stop the spread of germs and sickness:

- Keep children who are sick at home. Don't send them to school.
- Teach your children to wash hands a lot with soap and water for 20 seconds. Be sure to set a good example by doing this yourself.
- Teach your children to cover coughs and sneezes with tissues or by coughing into the inside of the elbow. Be sure to set a good example by doing this yourself.
- People who are sick should stay home from work or school and stay away from other people until they are better.
- Stay away from shopping malls, movie theatres or other places where there are large groups of people.

**If you have questions, please contact (*School Name*) or your healthcare provider. You can call the school at xxx-xxxx.**

**You can get more information from Alberta Health Services :**

Visit online at <http://www.xxxx.com> or call the Health Emergency Information Line: 1-800-xxx-xxxx.

**The federal government website with information on planning for individuals and families:**

<http://www.xxxx.com>

If the pandemic flu continues to spread and more students become ill, students may be dismissed from school for days or weeks. The purpose of student dismissals will be to keep children from getting sick. If students are dismissed, children should stay at home. Begin planning now for childcare in your home.



### **No.3 SAMPLE LETTER TO PARENTS--Expanded Outbreak:**

#### **Use this letter to let parents know schools are open and urge ill children to stay home.**

Dear Parents,

We wrote to you recently to tell you about a pandemic flu outbreak in our community. Here is some new information:

There are now even more students and staff in our school who are ill with this flu virus. At this time, under the guidance of (*Local Health Authority*), we believe that students who are not ill can safely attend classes and schools will remain open. We will keep you updated with any important information.

To keep the flu from spreading to more people, we ask you to keep sick children home. Any children who are sick in school will be sent home.

Public health officials want you to protect yourself and your family against pandemic flu. Here are some ways to stop the spread of germs and sickness and take care of your family

- Keep children who are sick at home. Don't send them to school.
- If some of the people in your home are sick with the flu, keep them away from the people who are not sick.
- If some of the people in your home are sick with the flu and you cannot see a health provider, some things you can do to help them are:
  - o Have them drink a lot of liquid (juice, water)
  - o Keep the ill person as comfortable as possible. Rest is important.
  - o For fever, sore throat and muscle aches, in adults, use ibuprofen (Motrin) or acetaminophen (Tylenol). Do not use aspirin with children or teenagers; it can cause Reye's syndrome, a life- threatening illness.
  - o Keep tissues and a trash bag within reach of the sick person.
  - o Be sure everyone in your home washes their hands frequently.
  - o Contact a healthcare provider for further advice. If the ill person is having difficulty breathing or is getting worse, contact the healthcare provider right away.

**If you have questions, please contact (*School Name*) or your healthcare provider. You can call the school at xxx-xxxx.**

#### **You can get more information from Alberta Health Services:**

Visit online at <http://www.xxxx.com> or call the Health Emergency Information Line: 1-800-xxx-xxxx.

#### **The federal government website with information on planning for individuals and families:**

<http://www.xxxx.com>

If the pandemic flu continues to spread and more students become ill, students may be dismissed from school for days or weeks. The purpose of student dismissals will be to decrease contact among children

and staff in order to decrease their risk of getting sick and to limit the spread of infection. If schools are closed, children should stay at home. Begin planning now for childcare in your home.





## No.4 SAMPLE LETTER TO PARENTS--School closure:

### Use this letter to inform parents that students are dismissed from school.

Dear Parents,

*(Local health officials)* in cooperation with the Golden Hills School Division have ordered all students be dismissed from schools in the Division. This order is because of the pandemic flu situation. All students are dismissed immediately until further notice and children should stay home.

The student dismissals may last for days or even weeks to reduce contact among children and stop the spread of the flu. As soon as we learn when we can reopen the school, we will let you know.

We know that many students and their families are very sick. We know this is a hard time for our community and our hearts go out to those who are ill.

Because the flu is easily spread from person-to-person, it is not safe for large groups of people to gather. During this time, both children and adults should stay away from other people and groups as much as possible. They should not gather in other locations such as shopping malls, movie theaters or community centers.

We know that it may be hard to get a doctor's appointment, go to a clinic or even be seen in a hospital emergency room. Here are some tips for helping those who are sick with the flu:

- Have them drink a lot of liquid (juice, water)
- Keep the sick person as comfortable as possible. Rest is important.
- For fever, sore throat and muscle aches, use ibuprofen (Motrin) or acetaminophen (Tylenol). Do not use aspirin with children or teenagers; it can cause Reye's syndrome, a life- threatening illness.
- Keep tissues and a trash bag within reach of the sick person.
- Be sure everyone in your home washes their hands frequently.
- Keep the people who are sick with the flu away from the people who are not sick.

**If you have questions, please contact *(School Name)* or your healthcare provider. You can call the school at xxx-xxxx.**

**You can get more information from *Alberta Health Services*:**

Visit online at <http://www.xxxx.com> or call the Health Emergency Information Line: 1-800-xxx-xxxx.

**The federal government website with information on planning for individuals and families:**

<http://www.xxxx.com>

Again, we will contact you as soon as we have information about when students will be allowed to return to school.



## **No.5 SAMPLE LETTER TO PARENTS: Students are allowed to return to school:**

### **Use this letter to inform parents that students are allowed to return to school.**

Dear Parents,

*(Local health officials)* in cooperation with Alberta Health and Wellness have declared the pandemic influenza is under control. Students are allowed to return to our school on \_\_\_\_\_.  
At this time, students may safely return to class.

Even though students may return to class, there are still some people who are sick from the influenza virus. As well, health officials say that pandemic flu outbreaks sometimes happen in waves. This means more people could become sick soon again. If more people get sick, students may need to be dismissed again. We will continue to give you any important information.

**Because the influenza can still be spread from person-to-person, please keep children who are sick at home. Don't send them to school.**

We are looking forward to seeing your children again.

**If you have questions, please contact *(School Name)* or your healthcare provider. You can call the school at xxx-xxxx.**

**You can get more information from Alberta Health Services:**

Visit online at <http://www.xxxx.com> or call the Health Emergency Information Line: 1-800-xxx-xxxx.

## **SAMPLE PRESS RELEASE No.1**

**School Authorities may work from this draft press release to announce schools remain open.**

For release (DATE) Contact: (name and number)

### **School Authority (name) schools are open but parents should prepare**

Our School Authority schools remain open despite the influenza pandemic outbreak in Alberta. However, parents are asked to prepare for possible closures if the virus continues to spread. We are working together with health officials to monitor the situation and parents will be updated with any important information.

"At this time, we believe students can safely attend classes and schools will remain open. Our thoughts are with all of our families and children who are affected," said (health official). If the influenza pandemic continues to spread and more students become ill, health officials say they may need to order schools closed for a period of time. They urged parents to begin planning now for childcare in their home.

Health officials say parents can help protect their children and prevent the spread of influenza pandemic as they would colds and other influenza by taking the following precautions:

- Teach your children to wash hands frequently with soap and water for 20 seconds. Be sure to set a good example by doing this yourself.
- Teach your children to cover coughs and sneezes with tissues or by coughing into the inside of the elbow. Be sure to set a good example by doing this yourself.
- Teach your children to avoid proximity with people who are sick, and stay home from work or school if you are sick.

Our recommendations may change during the course of an influenza pandemic outbreak. For school updates, parents can call the Golden Hills School Division hotline at (1-800-xxx-xxxx) or Alberta Health Services Emergency Information Line at: (xxx) xxx-xxxx.

For more information on influenza pandemic, visit the Alberta Health Services website at <http://www.xxx> or the federal government website at <http://www.phac-aspc.gc.ca/influenza/pandemic-eng.php>

## **SAMPLE PRESS RELEASE No.2**

**School Authorities may work from this draft press release to announce school closures. A similar press release may be issued when school re-opens.**

For immediate release (DATE) Contact: (name and number)

### **Order of closure of schools in Golden Hills School Division**

\_\_\_\_\_ has ordered the closure of schools as a result of the influenza pandemic outbreak in \_\_\_\_\_.

Schools may be closed for a period of time – several days or even weeks. Because the virus is easily spread from person-to-person, Alberta Health Authorities have also ordered other educational institutions to close.

Because it is unsafe for large groups of people to gather, health officials warn people to stay away from shopping malls, community centres and other places where germs can be spread.

"We know this is an anxious time for our community and our thoughts are with those who are ill. We are working closely with the schools to deal with the situation and will keep parents updated with any important information," said (Local Health Official).

According to an Alberta Health Services, the purpose of closing schools is to decrease the risk of staff and students getting sick and to limit the spread of infection.

More information on influenza pandemic is available on the Alberta Health Services' website at <http://www.xxx> or call the XX Emergency Information line at (xxx) xxx-xxxx.

## Appendix F

### Resources

#### Key websites & phone numbers

- You can get more information from Alberta Health Services:
  - Visit online at <http://www.albertahealthservices.ca> or call the Alberta Health Link Information Line: 811.