

Simcoe Muskoka Catholic District School Board

Pandemic Plan

May 2020



**SIMCOE MUSKOKA CATHOLIC
DISTRICT SCHOOL BOARD**

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1. Responding to a Pandemic: The Perspective of our Faith

As a Catholic school board, faith is always at the centre of our life, and of our work. In times of crisis—like a pandemic—it is more crucial than ever that we turn to the teachings of Jesus, and of our faith, both to anchor ourselves, and to provide the necessary ethical and spiritual guidance for our decision-making. The Church's 2000-year history means that it has extensive experience and wisdom that are essential when difficult decisions are being made about individual and societal relationships, priorities in the allocation of limited resources, care for the weak and vulnerable, and how we practise our religious beliefs.

In the event of a pandemic outbreak, it is vital that, from the outset, our school board leaders root our board response in Catholic Christian values and criteria. They should reference, and draw upon, the principles of Catholic social teaching, Catholic criteria in medical and social ethics, relevant portions of the Catechism of the Catholic Church, and applicable Biblical passages. While the logistical details of our pandemic planning may, in the end, largely resemble those of our public school counterparts, the distinctiveness of our Catholic educational system demands that the reasons for the decisions we take be fully in keeping with our core Catholic beliefs. To the degree that decisions are ours to make, we should consciously, consistently and unashamedly draw upon Catholic sources for guidance and inspiration. A more in-depth discussion of these topics can be found in [Appendix J: Responding a Pandemic: The Perspective of our Faith](#).

2. Executive Summary

In a changing and globalized world, factors such as international travel, migration, and displacement can increase the risk of infectious disease threats. Based on lessons learned from recent infectious disease events in the province, these events have reinforced the need for the Simcoe Muskoka Catholic District School Board (SMCDSB) to ensure infectious disease preparedness is ready and able to manage unexpected or escalating infectious disease threats. A common assumption that is consistent for pandemic planning purposes is that absenteeism rates could range between 40 to 60% during peak pandemic phases.

An infectious disease emergency exists when infectious and emerging diseases of public health significance involving the potential for significant morbidity and mortality require urgent and possibly extensive response. The Pandemic Plan (hereafter referred to as the Plan) is designed to assist the SMCDSB manage and develop ongoing readiness and resilience to respond to infectious disease emergencies. The Superintendent of Education (responsibility for Student Health Care/Healthy Schools) will ensure this plan is reviewed every three years and updated, as applicable.

Goals

- To mitigate potential for infectious outbreaks amongst students and staff;
- To reduce the disruption of academic and business continuity operations of the Board.

Purpose

The purpose of the Pandemic Plan is to have a comprehensive guideline that can be used for large scale incidents and prepare the Board to deal with infectious disease threats (human and environmental). This plan is designed with a flexible and scalable framework for incident management, appropriate and timely interventions and allocation of resources to minimize the consequences of an infectious disease emergency.

For the purpose of the Pandemic Plan, an infectious disease emergency is defined as an event caused by biological agents, such as bacteria, viruses or toxins that have the potential to cause significant illness or death in the population. Infectious disease emergencies may include:

- Naturally occurring outbreaks, e.g., coronavirus, measles, mumps, etc;
- Emerging infectious diseases, e.g., Ebola, Avian Influenza;
- Infection Prevention and Control (IPAC) lapses, and bioterrorism, e.g., anthrax.

The circumstances of infectious disease emergencies may vary by multiple factors, including type of agent, scale of exposure, mode of transmission and intentionality (bioterrorism). Some outbreaks or situations will require limited response activities; other situations will require large-scale response efforts that involve many resources within the Board and the cooperation and coordination of health care stakeholders and community partners.

This plan does not apply to routine disease investigations unless the response requires activation of the plan or a response coordination outside of normal operating procedures.

Glossary of Terms

Influenza - Influenza is a highly contagious, febrile, acute respiratory infection of the nose, throat, bronchial tubes, and lungs caused by an influenza virus. It is responsible for potentially fatal clinical illness of epidemic and pandemic levels.

Infection Prevention and Control (IPAC) - Infection prevention and control refers to practices and procedures that when applied consistently, can prevent or reduce the risk of transmission of microorganisms to students, staff and visitors to our school board locations.

Pandemic - Pandemics refer to influenza based or other emerging infectious diseases that occur over a large geographic area and affect a large proportion of the population.

Emerging Infectious Disease - An emerging infectious disease is a disease that is highly infectious and spreading. Examples of emerging infectious diseases include Avian Influenza, swine flu, Ebola, SARS, MERS, and novel Coronavirus’.

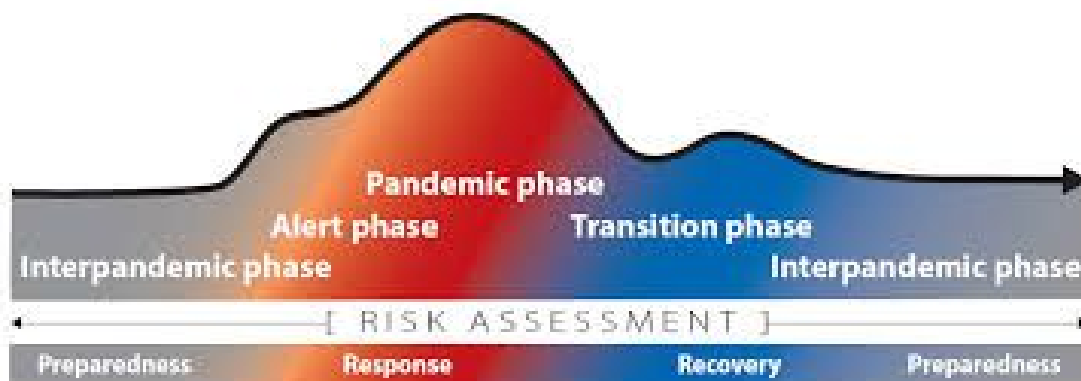
Medical Officer of Health (MOH) - the medical officer of health is authorized under Section 22 of the *Health Promotion and Protection Act* (HPPA) to issue orders under prescribed conditions to control communicable diseases.

World Health Organization (WHO) - World Health Organization consists of a global network of laboratories and surveillance apparatus that monitor for the emergence of new influenza or other emerging infectious diseases. The World Health Organization determines if such outbreaks are capable of becoming pandemics.

3. World Health Organization (WHO) Pandemic Phases

The WHO has identified four global phases: interpandemic, alert, pandemic and transition, to describe the spread of pandemic (specifically influenza). As pandemic viruses emerge, countries and regions face different risks at different times and so we must also work closely with our local health authorities to take into account local risk assessments.

The WHO revised pandemic phases in 2017, in recognition that a risk assessment based approach would allow for greater flexibility in responding to emerging pandemic/infectious disease outbreak threats.



Interpandemic Phase: This is the period between influenza pandemics

Alert Phase: This is the phase when influenza caused by a new subtype has been identified in humans. Increased vigilance and careful risk assessment, at local, national and global levels, are characteristic of this phase. If the risk assessments indicate that

the new virus is not developing into a pandemic strain, a de-escalation of activities towards those in the interpandemic phase may occur.

Pandemic Phase: This is the period of global spread of human influenza caused by a new subtype based on global surveillance. Movement between the interpandemic, alert and pandemic phases may occur quickly or gradually as indicated by the global risk assessment, principally based on virological, epidemiological and clinical data.

Transition Phase: As the assessed global risk reduces, de-escalation of global actions may occur, and reduction in response activities or movement towards recovery actions by countries may be appropriate, according to their own risk assessments.

4. Communications/Organizational Flow Chart

The following [Communications/Organizational Flow Chart \(Appendix A\)](#) provides an overview of the reporting structure and flow of information during a pandemic.

5. Roles and Responsibilities

Role of Pandemic Committee

When a pandemic or infectious outbreak is declared, the Pandemic Committee will be activated and responsible for the following:

- To act as a resource to the director/designate;
- To recommend courses of action to the director/designate;
- To monitor and make recommendations on the overall operation of the system on a daily basis;
- To make clear and complete assessment of situations that may arise;
- To develop the substance of all news releases;
- To act as an emergency resource for superintendents of education, principals, managers and other Board personnel; and
- To the most reasonable extent possible, consult with the various employee associations.

Committee Membership

- Director of Education ex-officio
- Education Leadership Council (ELC)

- Superintendent of Education responsible for healthy schools to chair the committee
- Two system principals
- SMDHU liaison
- Mental Health Lead
- Communications Manager
- Health and Safety Officer
- Manager of Custodial Services
- Risk Management Officer
- Administrative support as required

Continuity Subcommittees

Education Programme and Board Operation considerations will be aligned with the established World Health Organization's pandemic phasing as outlined at the beginning of this document. Recommendations for each program element may be different based on whether the pandemic/infectious disease is in an alert, response or recovery phase. The Board has further subdivided the response phase into tier one and tier two recognizing that the considerations may be different depending on severity of pandemic conditions at a given time.

The Pandemic Committee will establish a number of subcommittees in order to facilitate the continuity of programs, services and business functions in the event of a pandemic or infectious disease outbreak. The Education Leadership Council (ELC), who also have membership in the Pandemic Committee, will also take leadership roles on these subcommittees:

- Secondary Programme (Curriculum, Student Success, Continuing Education)
- Elementary Programme (Curriculum, Early Years, School Effectiveness)
- Special Education & Services Programme
- Board Operations (Business & Finance/Human Resources/Facilities Services)

The [Continuity Subcommittee Spreadsheet](#) outlines a number of considerations for programmes, service and business functions for each of the four subcommittees throughout the pandemic phases.

Role of the Director/ Designate

- To direct the overall operation of the system;
- To receive updates and reports from the Pandemic Committee;
- To make decisions regarding the district/regional operation of the Board;

- To review information items and news releases prepared by the Pandemic Committee and to authorize the sending of media releases;
- To report to the Board on the operation of the system;
- To determine the closing of any school(s) due to excessive absenteeism; and
- To be the spokesperson for all communications initiatives.

Role of the Principals/Vice-Principals/Managers/Supervisors

The role of principals, managers, and supervisors during a pandemic is to maintain the safety and well-being of students and staff. They will also provide and support academic programming within the limitations of available employees and resources.

Under the overall provisions of the Pandemic Plan, principals, managers, and supervisors shall:

- Advise and oversee staff as they fulfill their responsibilities during a pandemic;
- Ensure the security of the property;
- Ensure that student and staff absenteeism is reported in accordance with attendance procedures as directed; and
- Monitor and report staff safety concerns.

Role of Employees

Staff who are on duty either at a worksite or working in a remote capacity are expected to fulfil the assignments established by the principal and/or supervisor. These will be governed by safety considerations. Staff may be required to extend beyond their usual functions to assist other staff and/or complete other duties as required.

6. General School Board Operations

- The Board has a statutory responsibility to maintain school operations and keep the Catholic Education Centre and all schools open. However, the Provincial Government of Ontario, and its agencies, may determine that schools be closed during a pandemic, or other infectious disease outbreak.
- If the Director of Education (through consultation with the Pandemic Committee) has reason to believe that keeping a school open might endanger students, employees or the public, then that school may be closed.
- If the Director of Education decides to close a school or workplace, the students involved will not be permitted to enter, or to remain in the school. The principal,

vice-principals, teachers and any working support employees, may be reassigned.

- Unless the school is closed, the decision to attend during a pandemic emergency is left to the parents/guardians/adult students.
- Closed schools will be re-opened in consultation with local health authorities. Schools will also be subject to enhanced Infection Prevention and Control disinfection after any period of closure.
- The Board may be required to turn over their schools for various health purposes (care and treatment) during a pandemic. If this situation occurs, the Director of Education may be required to order a school's temporary closure or consolidation with another school.
- Depending on the number of employees available, the school program will be offered in as normal a manner as possible. This will vary from school to school and will be subject to daily review by the principal and the appropriate superintendent.
- Study and library resource areas will be open to students attending school provided adequate supervision is available.
- Principals or managers should consult with their superintendent to address any challenging or unexpected situations as they arise.

7. Operational Strategies

- The Pandemic Committee will meet as needed on an adhoc basis throughout the alert and recovery phases. Throughout the response phase, the meetings will intensify in frequency and duration as needed. Meetings will be called by the Pandemic Committee Chair or designate.
- By 1 p.m. each day, the Director of Education's office shall receive updated absenteeism (PowerSchool /ARCS) reports from all schools and departments.
- The Pandemic Committee will assess available data and information relevant to the pandemic. The committee will provide recommendations and direction as required (including school closures, system operations and reallocation of staff) and will be available at all times to respond to an emergency situation.

- The Pandemic Committee will respond to ongoing pandemic events and revise action plans as needed.
- All media requests will be handled by the manager of communications or designate. The Director of Education or designate will be the spokesperson for all media interviews. Schools will refer all media inquiries to the manager of communications or designate.
- All communication regarding the pandemic will go through the manager of communications, with approval from the Director of Education, or designate.
- The executive/administrative assistant to the Chair of the Pandemic Committee shall be designated the recorder for the Pandemic Committee meetings.
- All principals, managers, supervisors, or designates must consult with their superintendent before making any decisions or taking any significant action. This will ensure appropriate consultation and that issues will be addressed in a consistent manner throughout the system.

8. Communications Planning

Guiding Principles

The following principles will guide our decision-making and help share our communication strategies:

- Decisions about closing schools for health reasons will be made by health authorities.
- Decisions about closing schools due to safety concerns, e.g., an inability to provide adequate supervision, will be made by the Director of Education.
- All decisions will be based on available information and with the best interests of students/staff in mind. We recognize that public opinion of our actions/decision will vary, but our primary goal is to ensure stakeholders are informed about our plans and contingency actions

Communications Goals

Our communication goals throughout all phases of the pandemic plan are to provide our internal and external stakeholders with awareness and understanding so that:

- They are confident our Board is well prepared for a pandemic;
- They are aware of how to get information and details about the pandemic and responses/decisions that impact them;
- They have the information they need to make the best possible decisions about their health and well-being; and
- They know their roles and responsibilities throughout the pandemic.

Target Audience/Stakeholder

External Stakeholders

- Ministry of Education
- Local Health Authorities
- Parish Community
- Community Partners
- Media

Internal Stakeholders

- Staff
- Parents
- Students
- Trustees

Communications Tactics

Throughout a pandemic the communications department will use a range of communications tactics to ensure that messages are widely accessible to as many people as possible, as appropriate. These tactics include:

- Direct email, text messaging and voice call outs using SchoolMessenger notification system
- Public facing website

- Employee Intranet
- Social media channels (Facebook, Twitter, Instagram, YouTube)
- Traditional media
- School based communications, e.g., school websites, newsletters and other means usually employed by schools to communicate with students and families

Communicating on Behalf of Partners

SMCDSB has well-established methods to distribute information widely to our various stakeholders. We will work with our various external stakeholders, e.g., Ministry of Education, various health authorities, parishes, etc., to assist with the distribution of important information and resources.

Spokesperson

The Board spokesperson during a pandemic will be the Director of Education.

Key Messages

- The health, safety and well-being of our students and staff is our main priority.
- The Simcoe Muskoka Catholic District School Board is prepared for a pandemic. We have a Pandemic Plan, which is posted for all internal and external stakeholders to view.
- Our priority is to keep schools and board offices open as long as it is safe to do so.
- The Board may be required to make changes to the delivery of programmes and services during a pandemic - these changes will be communicated directly to our stakeholders in a timely fashion.
- During a pandemic the Board takes its direction from the Simcoe Muskoka District Health Unit and other health authorities. Health authorities have the expertise to provide appropriate medical and public health advice.
- The decisions to close schools for health related reasons are made at the discretion of health authorities and/or the Ministry of Education.

- The decision to close schools for safety reasons is made at the discretion of the Director of Education.
- The Board fully cooperates with any directives provided by health authorities and/or the Ministry of Education.
- The Board cannot share information related to potential exposure to virus or infectious disease in our communities - that is the role of the Health Unit.
- The focus of the Board is to provide our families with information and resources related to student learning, mental health and well-being.
- We will reopen our schools according to the direction of health authorities and/or the Ministry of Education.
- We will reintroduce programmes, services and activities based on what is realistic and what is in the best interest of our students and staff.

Communications Flow Chart

The following [Communications/Organizational Flow Chart \(Appendix A\)](#) provides an overview of the communications flow during a pandemic.

9. References

Actions taken during an emergency must be guided by the legal/legislative framework that gives authority to the municipality, public health unit and others for their actions. For the purposes of the Board's pandemic plan the following legislative acts and authorities are referenced:

Legislation and Acts

- Health Protection and Promotion Act, R.S.O. 1990 H.7
- Personal Health Information Protection Act, 2004, S.O. 2004, c.3 Sched. (PHIPA)
- Quarantine Act, S.C. 2005, c. 20
- Occupational Health and Safety Act, R.S.O. 1990, c.O.1
- Designation of Diseases O. Reg. 135/18
- Communicable Diseases – General R.R.O. 1990, Reg. 557
- Emergency Management and Civil Protection Act, R.S.O. 1990 , c.E.9
- Employment Standards Act, 2000, SO 2000, c 41

Legislative Authorities

- World Health Organization (WHO)
- Public Health Agency of Canada
- Public Health Ontario
- Ontario Ministry of Health and Long Term Care
- Ontario Ministry of Education
- Simcoe Muskoka District Health Unit
- North Bay Parry Sound District Health Unit

Other

- Ontario Human Rights Code

10. Appendices

- [Communications/Organizational Flow Chart](#)
- [Continuity Subcommittees](#)
- [Pandemic Plan Handbook](#)
- [Controlled Access Procedure](#)
- [Controlled Access Scheduler](#)
- [Distribution of SEA Equipment Procedure](#)
- [Distribution of Loaner Device Procedure](#)
- [Routine Practices - Infection Prevention and Control](#)
- [COVID Work Access Planning](#)
- [Responding to a Pandemic: The Perspective of our Faith](#)