



Pandemic Response Plan

FOREWORD

RESPONDING TO AN INFLUENZA PANDEMIC

In preparing and responding to the potential for an influenza pandemic, Red Deer Public Schools will provide responsive leadership and be guided by and/or work in collaboration with:

- Alberta Health and Wellness
- Alberta Education
- Public Health Agency of Canada
- Centers for Disease Control and Prevention
- City of Red Deer - Disaster Services

Our planning and response is based on currently available scientific evidence about this emerging disease, is based on the Canadian situation and will be subject to review and change as new information becomes available.

RESOURCES AND REFERENCES

Resources and references to support the District Pandemic Response Plan are hyperlinked [LINK] within this document and also available at: www.rdpsd.ab.ca/pandemic

INTRODUCTION AND BACKGROUND INFORMATION

The pandemic (H1N1) 2009 influenza virus (hereinafter referred to as H1N1) has rapidly spread across the world. While influenza activity would normally be expected to wane during the summer months, H1N1 has not and surveillance data suggest that community spread has continued.

To date, infection with H1N1 has resulted in **influenza-like illness (ILI)** similar to seasonal influenza. **Symptoms** of ILI include the acute onset of respiratory symptoms with fever and cough and one or more of the following symptoms: sore throat, muscle aches, joint pain, or weakness. Gastrointestinal symptoms may also be present. Fever may not necessarily be prominent.

H1N1 is thought to be **spread** from person to person in the same way as seasonal influenza where transmission occurs predominantly through coughing or sneezing. Indirect transmission can also occur through self-inoculation after contact with surfaces and objects contaminated with the virus from infected persons.

Like seasonal influenza, H1N1 infection in humans can vary in **severity** from mild to severe, with the most severe disease occurring mainly in known and emerging **risk groups** such as the immuno-compromised and pregnant women. Students with underlying medical conditions may also be at greater risk of severe illness or complications. Most illness from the H1N1 (especially in children) to date has been relatively mild and self-limiting with most cases recovering quickly.

The **incubation** period for H1N1 is understood to be up to 4 days and the period of **communicability** up to 7 days from onset of symptoms in uncomplicated cases. This may be longer (up to 10 days) in individuals with severe illness and children in whom symptoms and virus shedding may persist. Consistent with seasonal flu, transmission of the H1N1 is most likely during the initial days of infection when the individual is symptomatic and has a high viral load.

Although illness among school-aged children and transmission within schools has occurred in various provinces and territories in Canada, in light of the current situation of community spread of this illness, **widespread school closures are not anticipated at this time.** Decisions about individual school closures will be determined at the District level and will be based on considerations such as local public health concerns, guidance and recommendations of public health and/or government, school or local community concerns, the impact of school absenteeism and/or staffing shortages on school operations and potential negative consequences resulting from the school closure on the overall community.

INFECTION PREVENTION MEASURES

Schools are known settings for amplification of influenza transmission including H1N1 and children are also important vectors of transmission of H1N1 at home and in the community. However, schools are very controlled environments and should have the ability to identify potential H1N1 activity and to implement measures to limit transmission of H1N1.

At this time, the **most important factors** in the control of the spread of H1N1 in schools are:

- **Practicing cough/sneeze etiquette and frequent hand cleaning,**
- **Early identification of ill students and staff exhibiting symptoms of ILI and,**
- **Exclusion from the setting of anyone ill with symptoms of ILI.**

Communication and age appropriate **education programs** with parents/guardians, students and staff play an important role in the control of the transmission of H1N1 in school settings.

ACTION - Student Awareness: Students will be taught and encouraged to:

- practice cough and sneeze etiquette. [\[LINK\]](#)
- use the correct hand washing technique. Practice frequent hand cleaning (i.e. after sneezing or coughing, before and after eating, after recreation/play times, after going to the washroom etc.) [\[LINK\]](#)

Specific lessons and regular reminders will be undertaken at all grade levels using available references and resources. *Responsible: Principal/Classroom Teachers*

ACTION - Pandemic Updates: District Pandemic Updates [\[LINK\]](#) will be prepared, updated as needed and circulated to parents/guardians that includes information on:

- information on cough and sneeze etiquette
- correct hand washing technique
- the importance of frequent hand cleaning
- encouraging them to monitor the health of their children daily for symptoms of ILI.
- taking care of themselves when caring for someone who is ill. [\[LINK\]](#)

Updated information will also be provided on the District website at www.rdpsd.ab.ca/pandemic
Responsible: Community Relations (updates)/Schools (distribution)

ACTION - Vaccination: The District will support vaccination and immunization programs for students as per recommendations by Alberta Health Services. *Responsible: Alberta Health Services*

ACTION – Increased Severity: In the event of conditions of increased severity compared to the spring 2009 influenza virus, the District will consider additional measures to protect students and staff that include:

- active screening
- high-risk students and staff will stay home
- student with ill household members will stay home
- increased distances between people at schools (classroom arrangement, school events)
- extend the period for ill persons to stay home
- protective or reactive school closures

Responsible: Superintendent of Schools/Alberta Health Services

MONITORING

ACTION - Symptoms/Monitoring: Parents/guardians, students and staff will be provided basic information on how to recognize symptoms of ILI and also be encouraged to monitor the health of students and observe for any signs of ILI. [LINK](#). *Responsible: Principal* *more detailed list of symptoms*

ACTION - Recording: Illness reports will be received from parents/guardians and recorded as per present practice. *Responsible: Principal*

REPORTING

ACTION - Absence Reporting: Schools will establish mechanisms to monitor ILI activity in their setting and processes for reporting staff and student illness above normal expected absenteeism levels to Central Services who will advise local public health officials. *Responsible: Principal/Human Resources* *how can schools monitor H1N1 in their schools as opposed to ILI*

ISOLATION

ACTION - Isolate ill students/staff: To the extent possible, schools will promptly **isolate students** who become ill with ILI while in school settings in a room/area separate from others with adequate supervision until they can go home. To help prevent transmission, good respiratory and hand hygiene practices are recommended, as well as, to the extent possible, having the ill children stay two metres away from others. **NOTE:** In the school setting, where people are not typically trained in the proper use of masks, and considering the potential risk of infection associated with improper mask use, the use of masks is not recommended. *Responsible: Principal*

ACTION - Isolation supplies: The District will identify appropriate supplies for isolation facilities and provide necessary items as needed. Included will be training for designated staff on the proper use of supplies. *Responsible: Caretaker Supervisor/Occupational Health and Safety Coordinator*

ACTION - Parent contact: Schools will have up-to-date **contact information** for each student and have protocols in place to **notify** parents/guardians if their child becomes ill with ILI while at school. *Responsible: Principal (with parent support)*

ACTION - Students Sent Home: Students who become ill with ILI while at school should be **sent home** with their parent or guardian and not travel on school buses. If there is no other option and the child must ride a school bus, it is recommended that staff ensure the child sits on a seat by themselves and is able to cover their mouth and nose with a tissue. *Responsible: Principal/Transportation Services*

ACTION - Stay at Home: Students and staff who become ill at home with ILI should **stay at home** until they are symptom free and are feeling well and able to fully participate in all normal day-to-day school activities (e.g., intra/extramural activities and school trips). *Responsible: Principal (with parent support)*

ACTION - Exclusion: Students and staff should be **excluded** from school settings if they are exhibiting

symptoms of ILI and only return once they are symptom free and able to fully participate in daily programs.
Responsible: Principal (with parent support)

ACTION - Isolation: In settings where a large proportion of students have underlying illness that puts them at risk for severe illness or complications from H1N1, consideration should be given to having symptomatic students remain in **isolation** for 7 days after symptom onset or until all symptoms have resolved, whichever is longer. *Responsible: Principal (with parent support)*

ACTION - Medical Assessment: Given the potential for more severe illness or complications from influenza infection, schools should inform parents/guardians and staff about the need to contact their health care provider for rapid **medical assessment of high-risk students or staff**. *Responsible: Principal*

ENVIRONMENTAL CLEANING

Influenza viruses can survive on some surfaces for several hours to days but are rapidly destroyed by cleaning. Cleaning of objects and surfaces that are frequently touched by multiple students or staff, high touch surfaces such as doorknobs, faucet handles, toys, computer keyboards, telephones, school bus hand rails, etc., will help to prevent the transmission of the influenza virus from person to person through contaminated hands.

ACTION - Cleaning Requirements: Schools are advised to increase the **frequency of cleaning** during school hours. High touch surfaces in schools are to be cleaned at least daily. No special disinfectants or waste handling practices are required for influenza; regular household or commercially available cleaning products are sufficient for this purpose, and waste handling would be according to usual standards. Personnel other than caretakers, including students, may be asked to assist in cleaning activities.
Responsible: Principal/Caretaker Supervisor

ACTION - Caretaking Requirements: Caretakers will play an important role in prevention and response to an influenza pandemic. As such, appropriate **training and supervision** will be provided to maintain cleaning standards, as well as respond to any increased needs that an elevated threat of influenza pandemic may require. Modification of assigned duties may be required to meet cleaning requirements.
Responsible: Caretaker Supervisor

ACTION - Cleaning Supplies: Schools shall monitor **hand-cleaning supplies**. All sinks in washrooms, kitchens and classrooms will be well stocked with hand washing supplies at all times. (i.e., soap, paper towels, tissues). Additional cleaning supplies will be provided as needed. *Responsible: Caretaker Supervisor/School Caretakers*

HAND HYGIENE AND RESPIRATORY ETIQUETTE

Hand hygiene and covering coughs and sneezes are important means of preventing the transmission of H1N1. Information on hand hygiene and cough etiquette is available at [LINK](#). It should be noted that **hand washing with plain soap and water is the preferred method** of hand hygiene in schools as the mechanical action is effective at removing visible soil as well as microbes. In instances where hand washing sinks are not available, supervised use of hand sanitizers may be considered. If hands are visibly

soiled, hand sanitizers may not be effective at eliminating the influenza virus.

ACTION - Hand-washing stations: Consideration will be given to providing increased numbers of **hand wash stations** as well as tissues and waste receptacles throughout schools. It is recommended that additional tissue supplies and waste receptacles be kept in supervised areas (i.e., classrooms).

Responsible: Principal/Caretaker Supervisor

ACTION - Hand sanitizers: Consideration will be given to the supervised use of **hand sanitizers** in classrooms. *Responsible: Principal/Caretaker Supervisor*

ACTION - Prevention Promotion: Posters outlining proper hand-washing procedures [[LINK](#)] and prevention strategies [[LINK](#)] should be posted in appropriate locations in schools with regular reminders of the importance of prevention in minimizing the impact of H1N1. *Responsible: Principal*

OUTBREAK RECOMMENDATIONS

Schools will have programs for **monitoring illness** students and staff illness. Through this monitoring, the District will have in place a strategy to recognize an outbreak H1N1 and/or other triggers that warrant consultation with local public health officials. Prompt action will help to ensure appropriate measures can be implemented to mitigate the impact and spread of the illness to both students and staff.

ACTION - Public Health Consultation: Notification and consultation by the Superintendent of Schools with public health officials will occur in outbreaks or unusual situations. Examples of such situations would be when absenteeism of students/staff is greater than what would normally be expected on any day or when unusual or more severe illness is observed. *Responsible: Superintendent of Schools*

SCHOOL CLOSURE

In light of the current situation of community spread of this illness, **widespread school closures are not anticipated at this time**. The decision to close schools, either *proactively* (in anticipation of disease or outbreaks), or more typically *reactively* (in response to disease or outbreaks), **lies at the discretion of appropriate local authorities** and would typically be based on considerations such as local public health concerns, school or local community concerns, the impact of school absenteeism and/or staffing shortages on school operations and potential negative consequences resulting from the school closure.

Proactive Closures: At this time, the Public Health Agency of Canada and the Alberta Education **do not recommend widespread proactive school closures** during the pandemic. While some studies have shown potential for reduced transmission through proactive school closures, the benefit must be weighed against high economic and social costs, ethical issues including undue burden on specific populations and the possible disruption of key services such as healthcare. Currently, the virus is known to be easily spread from human to human and has been detected throughout Canada primarily causing mild illness. If the epidemiology of the disease changes and the virus were to become highly virulent, these **recommendations will be reconsidered** along with other social distancing strategies.

The District Pandemic Response Plan has **proposed measures to mitigate the spread of H1N1** in

schools. Widespread proactive school closures as a control measure have the potential of coming at **high economic and social costs** since this would impact many families that have one or both parents working outside of the home. Increases in workplace absenteeism could lead to societal disruption and may lead to a less optimal pandemic response if significant absenteeism occurs among workers critical to the response. Consideration needs to be given to students congregating elsewhere in less controlled environments thus reducing the intended benefits of school closures.

Reactive Closures: Should reactive closures be considered at the local level, it is anticipated that public health officials and District administration may take into account considerations such as the impact of school absenteeism and/or staff shortages on **safe school operations** while balancing these factors against the goal of minimizing social disruption & child safety. If schools close reactively, consideration should be given to whether some can continue in order to mitigate the effect of the closure.

It is important to note that there are many **protective factors** present in schools that must be considered especially during a time of disruption such as a pandemic. Such settings are excellent places to:

- educate, inform and communicate with children and their families in an efficient and timely manner,
- support the economic and social elements of the community by allowing parents to continue to work and volunteer, provide a structured environment able to support efficient and effective administration of vaccines to an important sub-group of the community.

ACTION - School Closure Decision: Notification and consultation by the Superintendent of Schools with public health officials will occur in **outbreaks or unusual situations**. Examples of such situations would be when absenteeism of students/staff is greater than what would normally be expected on any day or when unusual or more severe illness is observed. Decisions regarding school closure(s) will be made by the Superintendent of Schools, or potentially under a directive by public health or government officials.

Responsible: Superintendent of Schools

CONTINGENCY PLANNING

Red Deer Public Schools will provide **responsive leadership** during the H1N1 influenza pandemic. Senior administration, affected departments and school sites will anticipate the impact an influenza pandemic will have on matters such as continuity of students learning, business continuity and crisis response as the situation develops and provide appropriate leadership. While many pandemic plans suggest detailed preparations for a variety of circumstances, given the uncertainty and wide range of possible outcomes, the District will respond as necessary, as we have demonstrated in addressing other emergent matters.

In responding appropriately to potential outcomes related to influenza pandemic, Red Deer Public Schools will work in collaboration with our partners including:

- Alberta Health and Wellness
- Alberta Education
- Alberta School Boards Association
- Public Health Agency of Canada
- City of Red Deer - Disaster Services

ACTION – Contingency Plans: To ensure safe environments for students and staff, Red Deer Public Schools will monitor the status of H1N1 and work in collaboration with partners to ensure an appropriate response to influenza pandemic. *Responsible: Superintendent of Schools*

CONTACT INFORMATION:

For more information on the Red Deer Public Schools - Pandemic Response Plan, please contact your school principal or:

Bruce Buruma, Director of Community Relations
Red Deer Public Schools
4747-53 Street
Red Deer, Alberta T4N 2E6

Bus: 403-342-3708
E-Mail: bburuma@rdpsd.ab.ca