



# **Pandemic Influenza Emergency Plan**

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**Revised: October 2009**

**Emergency Response Manual**

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# **FOREWORD AND ACKNOWLEDGEMENTS**

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## **Foreword and Acknowledgements**

The four local school boards recognized the severity of a Pandemic Influenza and, along with unions and the Sudbury Student Services Consortium, came together to create an Emergency Plan in consultation with the Sudbury & District Health Unit.

# INTRODUCTION



## **INTRODUCTION**

The goal of influenza pandemic preparedness and response at the school board level is to prevent and minimize serious illness and disruption among schools.

Experts agree that future influenza pandemics are inevitable but the timing of the next pandemic cannot be predicted. Since there may be little warning, contingency planning is required to minimize the devastating effects of a pandemic.

The World Health Organization has warned that there is a high risk of the avian influenza (bird flu) becoming the next human influenza pandemic.

The Pandemic Influenza Emergency Plan will be reviewed on an annual and/or needs basis with representatives of the four school boards, unions and the Sudbury Student Services Consortium. This will be done in consultation with the Sudbury & District Health Unit to update and/or respond to unforeseen situations/events.

**BACKGROUND**





## **BACKGROUND**

An influenza pandemic occurs with the appearance of a new influenza virus for which there is little or no immunity. This results in several, simultaneous epidemics worldwide with high numbers of cases and deaths. With the increase in global transport and communications, as well as urbanization and overcrowded conditions, epidemics due to the new influenza virus are likely to be established quickly around the world.

Influenza A and B are two of the three types of influenza viruses and are the strains associated with annual outbreaks and epidemics of influenza. These epidemics are due to minor changes in the influenza viruses that enable them to evade the immunity we have developed after previous infections with the viruses, or in response to vaccinations.

Only influenza A virus can cause pandemics. When a major change in either one or both of the influenza A virus surface proteins occurs spontaneously, no one will have immunity to this completely new virus. When the virus also has the capacity to spread from person to person, a pandemic can occur.

Global pandemics have been reported since Middle Ages. The most well documented pandemics occurred in 1918 (H1N1, the Spanish flu), 1957 (H2N2, the Asian flu) and 1968 (H3N2, the Hong Kong flu).

### **Symptoms of Illness and Reporting Requirements**

Seasonal influenza and the pandemic H1N1 flu virus result in similar symptoms—sudden fever, cough, sore throat, fatigue, and muscle or joint aches. In children under the age of five, vomiting and diarrhea are more common and fever may not be prominent.

During a pandemic, schools will be asked to participate in enhanced surveillance by reporting absenteeism rates to the Sudbury & District Health Unit. In Rainbow Schools, the data will be collected centrally and forwarded to the Health Unit on a daily basis. The Federations/Unions will be advised that this process has begun.

# LEGISLATION



## **LEGISLATION**

Under the Occupational Health and Safety Act, R.S.O. 1990 – Section 25 (2) h), an employer shall take every precaution reasonable in the circumstances for the protection of a worker.

Under the Health Protection and Promotion Act, R.S.O. 1990 - Chapter H.7, Section 28, the Principal of a school who is of the opinion that a pupil in the school has or may have a communicable disease shall, as soon as possible after forming the opinion, report thereon to the Medical Officer of Health of the health unit in which the school is located.

Under the Emergency Management Act, R.S.O. 1990 – Chapter E.9, Section 2.1 (1), every municipality shall develop and implement an emergency management program and the council of the municipality shall by by-law adopt the emergency management program. 2002, c.14, s. 4.

**PREVENTATIVE**



5. **PREVENTATIVE** (Protective Strategies)

A. **Surveillance**

1. ***Supervision of students, staff, contract workers (bus drivers)***

- Absenteeism records (reporting requirements) as per the Ministry of Health and Long-Term care requirements
- Calls from Health Unit (monitoring)

Communication and surveillance will be one of the most important aspects in the pandemic response.

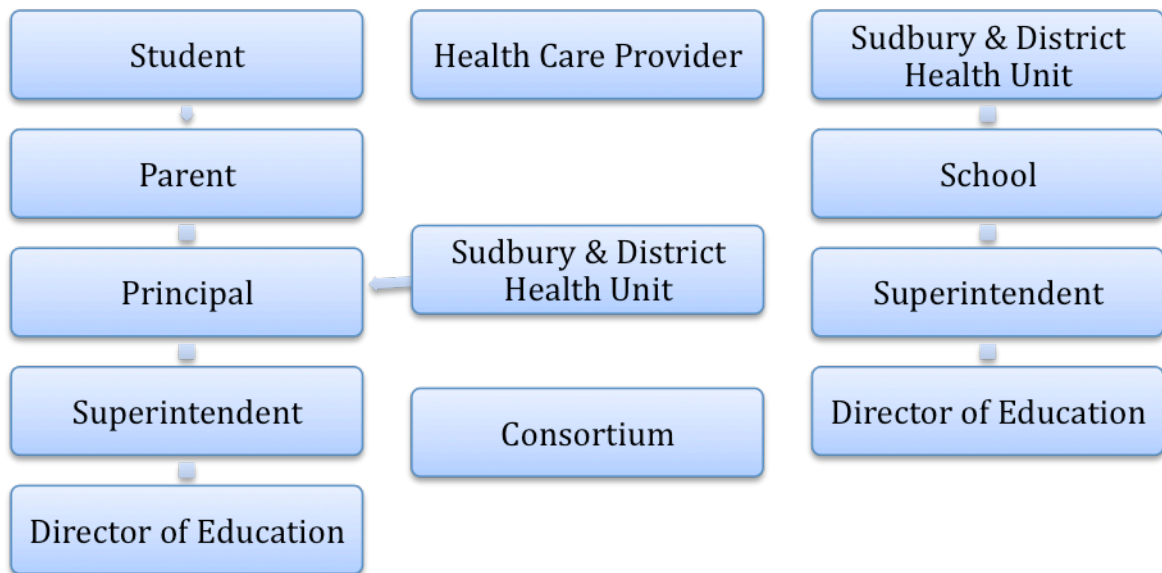
- Ensure school boards who share activities with other boards advise their principals to keep in communication with other principals.

## B. Communication

The Public Health Agency of Canada and the federal government will co-ordinate inter-provincial communications. Provincial health communications strategies will be aligned with the federal plan. Local communications will follow provincial direction.

Training to principals, superintendents and managers will be provided. The train the trainer model will be used to ensure that all staff are aware of the plan.

### 1. **Contact List:**



### 2. **Education/training**

- Create generic memos, presentations and announcements for management, employees and parents (Appendix A Package).
- The Communications Officer will communicate with the Health Unit to determine best infection control and environmental cleaning practices supported by educational materials. The Manager of Plant and the Local CUPE President will ensure that the custodial staff is trained accordingly.
- All Rainbow District School Board Managers must ensure that their team is aware of all procedures and information in case of an emergency and high absenteeism (back up plan).
- Integrate a link to the Health Unit on the Rainbow District School Board website.
- Continue to provide space for flu shot clinics.

### 3. **Information**

Ensure that all students, parents, staff and volunteers receive relevant documentation concerning hand washing, flu shot clinics and other relevant information.

## **C. Emergency measures**

### **1. Custodial practices**

Depending on the microbe, studies have shown that pathogens can survive on environmental surfaces and can infect a person for over a day after being deposited on the surface.

Thorough regular cleaning and disinfecting of high-touch surfaces ( ie. door knobs, telephone handles, educational manipulatives) is important.

- Cleaning is also necessary on high contact surfaces (ie. door knobs, telephone handles, educational manipulatives).
- Several chemical disinfectants, including chlorine, hydrogen peroxide, iodophors (iodine-based antiseptics), quaternary ammonium and alcohols, are effective against some bacteria and some viruses if they are used in proper concentration for a sufficient length of time. Several types of wipes are available for disinfecting nonporous surfaces. All disinfectants, with the exception of bleach and 70% isopropyl alcohol, must have a Health Canada D.I.N. (Drug Identification Number).
- Cleaning and disinfecting procedures will be implemented in accordance with Ministry guidelines/recommendations and in consultation with the local public health unit.
- Cleaning staff should use appropriate personal protective equipment, including gloves, when using chemical cleaners or disinfectants.

### **2. High risk population group**

- Identify geographical population, age and medical problems

### **3. Transportation**

- The Superintendent of Business will ensure that the Transportation Consortium has a copy of our plan and is kept current of our procedures.

### **4. Vaccine management**

- The province will identify priority groups who will be eligible to receive vaccines and antivirals.
- The vaccine will be administered and/or managed by the Public Health Unit. Staff, students and parents are encouraged to check with the Health Unit regarding priority groups and availability of vaccine.
- On request, the Board will disseminate information regarding vaccine availability and sites.
- We will respond to directives from the Health Unit. Priority populations to receive the vaccine will be identified by the province.

**5. External demands of our resources**

- Identify Trauma Team Chair (Appendix B)
- Advise Health Unit
  - School floor plans (The Manager of Plant will coordinate this activity)
  - Contact lists of principals and other key personnel at the Board Office.
- Maintenance and other services
  - Inform key players of possible demands on resources during a pandemic.



**PRE-PANDEMIC**



6. **PRE-PANDEMIC** (Pandemic Alert Stage/Human Infection Confirmed Elsewhere)

The response to a possible pandemic steps up when a novel influenza virus begins to cause widespread illness somewhere in the world resulting in an influenza pandemic. The World Health Organization has identified various phases that lead up to a pandemic. The phases are based on the development of a new influenza strain, its ability to spread from person to person, and the number of people affected across multiple populations. The response may be prolonged depending on the number of waves and the interval between the waves.

A. **Surveillance**

1. ***Supervision of students, staff, contract workers (bus drivers)***

When an influenza pandemic is declared by the Public Health Unit, local school boards will implement enhanced surveillance activities including:

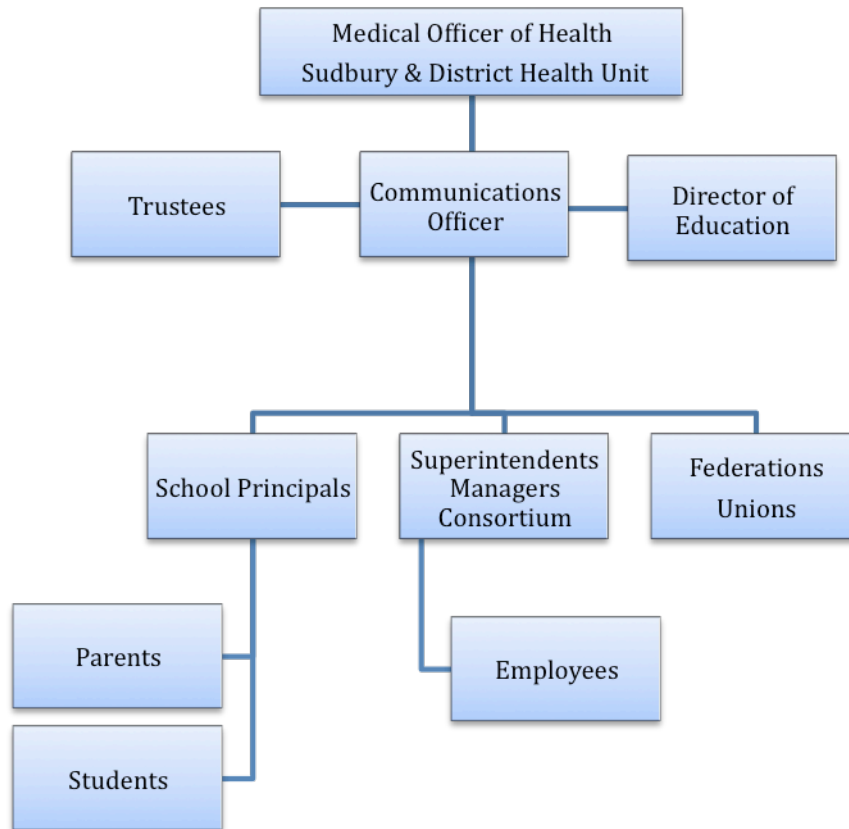
**Absenteeism/Reporting Requirements:** (Appendix C)

- The Human Resources Department with the Rainbow District School Board has the responsibility for collecting/managing information about staff absenteeism.
- All employees will call-in absences in the usual manner. (Staff will be encouraged to voluntarily report flu-like symptoms.)
- The schools will submit student absenteeism information as requested by the Health Unit to Information Services.
- Information Services will submit to the Health Unit on a daily basis the staff and student attendance, which will include geographical data and any other required information.
- Bus companies shall report absences to the Consortium who, in turn, will communicate this information to the Public Health Unit, as requested.

## B. Communication

The Public Health Agency of Canada and the federal government will co-ordinate inter-provincial communications. Provincial health communications strategies will be aligned with the federal plan. Local communications will follow provincial direction.

### 1. Contact list



*\*All external communications will be issued by the Medical Officer of Health.  
All internal communications and directives will be through the Director's office.  
(Internal communications includes letters home to parents.)*

The communications plan will be implemented in conjunction with the Public Health Unit. Key components of the plan are as follows:

### *Educate*

Upon the declaration of an influenza pandemic, accurate, relevant and timely information shared with and released to staff, students and parents will be the central focus for education. Messaging will address topics such as:

- Infection control practices to prevent influenza
- Disease information
- Pandemic updates
- Available services and how to access them
- Vaccine availability
- Personal preparedness

Updated information from the Public Health Unit will be made available to the schools, school boards and the general public. Protective measures and personal preparedness will be highlighted.

**For up-to-date information, visit the Sudbury & District Health Unit website at [www.sdhu.com](http://www.sdhu.com)**

### *Reassure*

Messages will focus on the collaboration between all levels of government and the partnership of key community agencies and businesses. The messaging will also advise of local actions taken to address the pandemic influenza.

### *Report*

Be as consistent as possible in preparing/reporting information regarding absenteeism and be aware of web-based updates and public information lines of the emergency response and local impact.

The Communications Officer or designate will communicate the following:

- Information related to the pandemic and public services to our staff, students and parents.
- Pertinent information from the Board to all media.
- Briefings and pertinent information to the Director of Education.
- Regular updates on the Board website with information on the pandemic.
- Communications with the Federations/Unions.

## 2. Education/Training

### *Custodians*

- Provide training to custodial staff on new chemicals that may be used in schools.
- Revisit cleaning and disinfecting procedures.
- Ensure inventory of cleaning supplies and materials are well stocked.

### *Staff*

- Staff shall be made aware of basic infection control guidelines to prevent the transmission of influenza (i.e. hand washing procedures, etc).
- Staff shall be educated to raise awareness about the pandemic flu emergency.
- High-risk staff (i.e. with respiratory ailments, compromised health) are encouraged to consult their health care provider.

### *Students*

- Send letter and notices to parents with key messages.
- Students shall be made aware of basic infection control guidelines to prevent the transmission of influenza (i.e. hand washing procedures, etc).

### *Parents/Guardians*

- Parents are encouraged to have a plan in place to take care of sick children at home and provide alternative day care and transportation.
- Parents/guardians of high-risk students (i.e. respiratory ailments, compromised health) are encouraged to consult their health care provider.
- Parents are encouraged to report influenza-like illness to their child's school and keep children home if they are not well.

## **C. Emergency measures**

Upon the declaration of an influenza pandemic, it is imperative that essential services, public safety, and security be maintained.

### **1. Custodial practices**

- Consider increasing custodial hours for preventative cleaning to ensure cleaning of surfaces such as keyboards, photocopiers, phones, educational manipulatives, desks, etc.
- Additional cleaning and other supplies will be purchased as required.
- A system shall be in place to replenish depleted supplies through the Maintenance Department.

### **2. High Risk Population Group**

- Ensure that all emergency contact numbers are updated and easily accessible.
- Develop internal contingency plans within the school.

### **3. Transportation**

- Ensure increased cleaning of buses which is the responsibility of the bus companies.

#### *School bus operators*

- Provide training on new chemicals that may be used on buses.
- Revisit cleaning and disinfecting procedures.

### **4. Vaccine Management**

- The province will identify priority groups who will be eligible to receive vaccines and antivirals.
- The vaccine will be administered and/or managed by the Public Health Unit. Staff, students and parents are encouraged to check with the Health Unit for availability of vaccine.
- Board will be responsive to disseminate information regarding vaccine availability and sites.

### **5. External Demands/Enhanced Services Demands**

- Advise Trauma Team in preparation of upcoming pandemic influenza and its impact on students and staff.
- There will be an attempt to maintain all essential services.
- Monitor extra curricular activities and after hours use of schools.
- Develop internal contingency plans for all board services including transportation services.

Note: Schools may be used as clinics and school buses may be required for purposes other than transporting students to and from school.

**PANDEMIC**



7. **PANDEMIC** (Pandemic Period – human infection spread to local level)

A. **Surveillance**

1. ***Supervision of students, board employees, contract workers (bus drivers)***

The Medical Officer of Health has the authority to issue an order if she or he is of the opinion upon reasonable and probable grounds that a communicable disease exists or may exist or that there is an immediate risk of an outbreak, when the order is necessary to decrease the hazard.

A pandemic alert or the start of pandemic activity anywhere in Canada will become a national issue. Ontario's response will be based on local "triggers" which may or may not correspond to the rest of the world. Enhanced surveillance activities will be implemented and modified as needed. The local public health unit will monitor influenza activity on a daily or weekly basis and report to the provincial Public Health Division.

*Note: Schools and day cares will be asked to report overall absenteeism rates to the public health unit on a daily basis. Reporting of staff and students/children reporting influenza like illness will also be encouraged. The school board will work closely with the public health unit to ensure surveillance requirements are understood and followed up on at the school level. In Rainbow Schools, the information will be reported centrally to Information Services who will provide data to the Health Unit on a daily basis.*

Health and emergency services planners at the local level will have to determine which "phase" their jurisdiction is in, in order to respond appropriately. The MOH may receive direction from the province to close school facilities. This closure would be deemed the same as a quarantine for collective agreement purposes.

Teaching staff is required to report all absences to their immediate supervisor. Staff is encouraged to report flu like symptoms during the pandemic stage.

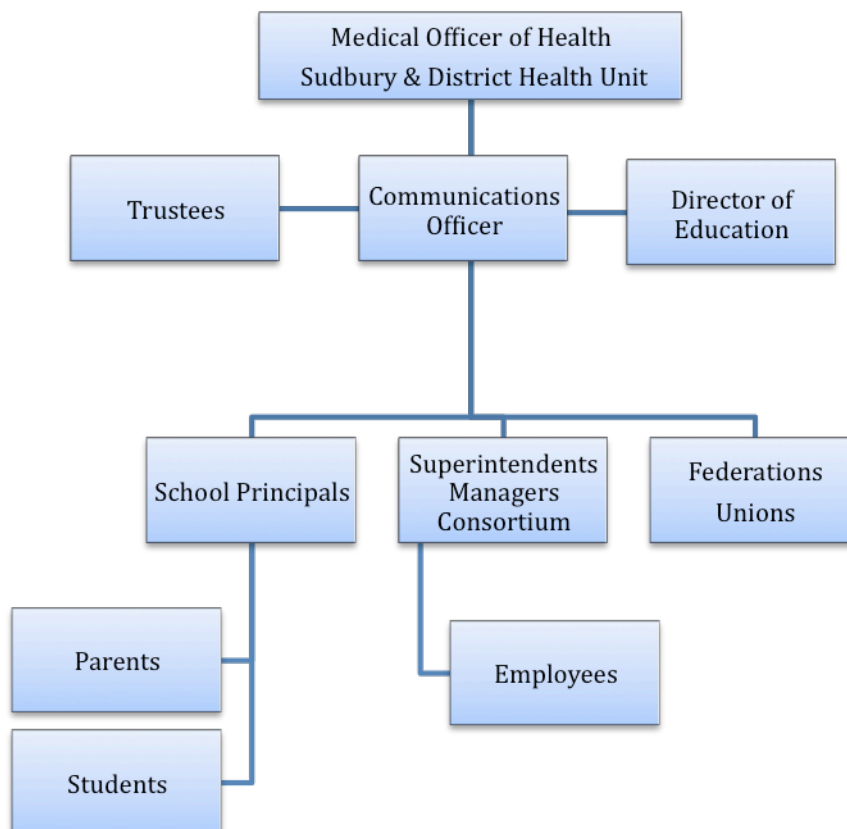
All other staff absences will be called in as usual and each department will report all absences to the Human Resources Department on a daily basis. Staff is encouraged to report flu like symptoms during the pandemic stage.



## B. Communication

The Public Health Agency of Canada and the federal government will co-ordinate inter-provincial communications. Provincial health communications strategies will be aligned with the federal plan. Local communications will follow provincial directions.

### 1. Contact lists: (keep list updated)



*\*All external communications will be issued by the Medical Officer of Health.  
All internal communications and directives will be through the Director's office.  
(Internal communications includes letters home to parents.)*

### 2. Education/training

A pandemic will create intense public and media interest. The focus of public communications is on raising awareness of the risks of influenza and the steps to prevent spreading it. Internet-based applications, around-the-clock phone lines and resources designed to provide a secure way for public health authorities to share information and manage the outbreak will be set in motion. Information bulletins through the schools will be issued in conjunction with the Health Unit to ensure a consistent message, outlining the local action that is being taken to address the pandemic.

Community containment strategies may be invoked, such as measures to increase social distance (close schools, discourage public gatherings) and general messages about how to avoid getting or spreading influenza including:

- if sick, stay home from day-care, school, work and public events
- avoid crowds
- wash hands frequently and meticulously
- practice respiratory hygiene, including coughing or sneezing in your sleeve and proper tissue disposal
- increase fresh air in buildings (open windows)

**3. Target groups: students, staff and parents**

- The messengers need to model a calm approach designed to reduce fear, avoid panic and encourage vigilance.
- Boards need to release information regarding changes to transportation, inter-school activities, field trips and community use of schools.

**C. Emergency Measures**

**1. Custodial practices**

- Increase hours and change routines to address sanitization needs.

**2. High-risk population groups**

- Reduce services that can be curtailed during a pandemic

**3. Transportation:**

- Reduce non-essential travel.

**4. Vaccine management ([link to health unit](#))**

- The province will identify priority groups who will be eligible to receive vaccines and antivirals.

**5. External demands of our resources (community, schools and staff)**

- Deploy the Trauma Team as needed.
- Assist with preparation and operation of alternative care sites and other “overflow” facilities.
- Provide facilities to implement a mass immunization campaign.
- Relocate or suspend “before and after” programs.

**POST-PANDEMIC**



## 8. **POST-PANDEMIC** (after the infection)

### A. **Assessment**

#### 1. Supervision of students, staff, contract workers (bus drivers)

Was our emergency plan adequate?

Did we minimize the risk of infection by using proper control measures?

- Hand washing
- Daily disinfecting (schools, buses, day cares/community centre)
- Monitoring attendance (sick children/staff to stay home)
- Isolating sick children/staff when symptoms show up at school

Did we train/educate staff, children, parents to identify and recognize the symptoms and how to react to the virus and protect themselves as well as others with whom they come in contact?

Did we have enough supplies at every location (ex: latex gloves and non-latex for those with latex allergies)?

Was there adequate supervision in each location and for each target group (students, staff, contract workers, visitors)?

Did we monitor **all** absences on a daily basis during the pandemic? *This is a crucial piece if we want to stay on top of things and address issues as they arise.*

### B. **Communication**

#### *Back to business*

After a pandemic wave is over, it can be expected that many people will be affected in one way or another. Many people may have lost co-workers, friends or relatives, will suffer from fatigue, or may have financial losses due to interruption of business.

- What is the recovery plan?
- Define services for social, psychological and practical support for affected employees. If needed, organize training and education for personnel involved.
- Identify contacts for existing community groups such as religious, church, sports groups etc...

## 1. **Contact Lists**

The Health Unit has issued word that the pandemic/outbreak is over. Through the Communications Officer, the Rainbow District School Board puts out a public service announcement and contacts the Federations/Unions. A message is posted on the website in coordination with the other school boards. Supervisory Officers of the Rainbow District School Board contact their respective school Principals. School Principals contact all of their teachers.

\*\*\*All schools must be sanitized and disinfected prior to re-opening of a school.

The Consortium is contacted by the Superintendent of Business. The Consortium contacts the bus companies. All buses must be cleaned and disinfected prior to providing transportation.

The Principal contacts all community centres in their respective schools. All spaces and equipment must be cleaned and sanitized prior to re-opening.

All stakeholders are to verify that their contact lists were updated and available during the pandemic influenza.

*Additional Support: In the event of fatalities, what support measures are in place to provide counseling if needed to personnel and/or students? Was it provided?*

## 2. **Education/Training**

Was enough training and education provided to target groups?

## 3. **Target Groups**

- Were sufficient control measures put in place?
- Did we properly estimate the impact of the pandemic virus?
- Were we able to identify the proper target groups/schools by having adequate, factual and timely information (absences and info on pandemic virus)?
- Did we respond quickly enough and adequately enough considering all aspects of the situation? If not, what were the inhibitors?

## **C. Emergency Measures**

### **1. Custodial practices**

- Was the frequency of cleaning and disinfecting appropriate for the Health Unit?
- Were custodians and bus drivers well trained and using the proper techniques?
- Were they using the proper products with the proper concentration of dilution?

### **2. High Risk Population Groups**

Were the students in a high risk population identified and did they receive adequate protection against the spread of the pandemic virus?

Did the key personnel in these groups know who to contact in the event that symptoms were displayed?

### **3. Transportation**

- Was transportation adequate for evacuations?
- Did bus drivers respond appropriately and in a timely fashion in the case of an evacuation?
- Did the Consortium have a sufficient number of drivers and buses?
- Did the bus drivers know how to protect themselves against the spread of the pandemic virus?

### **4. School-based vaccine program**

- What were some of the successes and challenges identified? (ie. provide feedback to the Health Unit)
- How accessible were our facilities in assisting the Health Unit with the vaccination program?
- Did our cleaning processes meet the needs of the Health Unit?

### **5. External Demands of our Resources**

- Evaluate the mishaps that the Trauma Team encountered.
- When outside groups used our facilities, were the entrance, door handles and areas cleaned and disinfected after each use?
- How prepared and accessible were our facilities in assisting the Health Unit?

### **6. Other considerations**

- Was all sensory equipment removed or its use reduced during the outbreak? Re-introduction of sensory equipment/materials, field trips, etc.
- Did everyone wear personal protective equipment when they had to?
- Have we thought about a sanitizing station for hand washing in every entrance of schools to prevent the spread of germs?

# EVALUATION AND REFLECTION



## 9. EVALUATION AND REFLECTION

Was the emergency plan carried out as stated and was it effective?

### *Evaluation*

	Preventative	Pre-Pandemic	Pandemic
Weaknesses			
Action required			
Strengths			

### *Summary*

### *Reflection*



**TESTING**



## 10. TESTING (dry run/mock disaster)

The City of Greater Sudbury and the Health Care Sector are planning an exercise to test pandemic plans. Perhaps the schools could join in/make use of the scenarios for their own table-top exercises.

- What did we miss?
- Do we want to add a safety measure?
- How fast was our response time?
- Could we have been faster?
- Could we have done more to contain the spread of the pandemic virus?  
If so, what are those preventative measures?
- Did we have all the information prior to delivering our plan?
- Did we receive all pertinent information from the Health Unit as far as the outbreak time, the symptoms, who were the most vulnerable people and why?
- What could we have improved to manage the crisis?

**APPENDIX A (1) - SAMPLE**

**MEMORANDUM**

---

**To:** Principals

**From:** Director of Education

**Date:**

Today, the Medical Officer of Health issued a pandemic influenza alert.

Our Pandemic Influenza Emergency Plan will be invoked immediately.

You are required to distribute the attached memorandum to all students, parents and Board employees at your site(s).

Using the attached form, you are required to report Pandemic Influenza Data to the Human Resources department via fax ---- on a daily basis until further notice.

In light of this situation, I am requesting that you check your e-mail regularly for any updates or further direction.

**APPENDIX A (2) - SAMPLE**

**MEMORANDUM**

---

**To:** All students, parents/guardians and Board employees

**From:** Director of Education

**Date:**

Today, the Medical Officer of Health issued a Pandemic Influenza alert. Our Pandemic Influenza Emergency Plan will be invoked immediately. All schools will remain open and transportation will continue as usual.

While safety is always first and foremost, the Board and its schools will take every reasonable step to ensure the safety of its students. However, we cannot guarantee that the usual cleaning standards will be maintained. The Board will monitor schools on a daily basis and update the plan as required.

In order to assist the Public Health Unit monitor the influenza activity on a daily basis, I am asking for your co-operation in reporting suspected cases in your household.

When informing the school or your supervisor of an absence, you are strongly encouraged to indicate if this absence is due to flu like symptoms.

Please be advised that only members of suspected cases will be reported to the Public Health Unit.

We would ask parents/guardians and the public at large to please listen to their local radio and television stations for the updates. We will also post information on our website [www.rainbowschools.ca](http://www.rainbowschools.ca)

Thank you for your co-operation and understanding.

**APPENDIX A (2) - SAMPLE**

**MEMORANDUM**

---

**To:** Principals

**From:** Director of Education

**Date:**

Until further notice:

- All Board sponsored activities will cease.
- All use of Board facilities by outside groups will be suspended.

Principals are required to inform these groups of action.

## **APPENDIX B**

Rainbow District School Board Trauma Team Contact:

Linda Mende, Principal  
Cecil Facer Secondary School  
Phone: 705-522-0196  
Cell: 705-690-9534

**APPENDIX C – SAMPLE**

**Pandemic Influenza Data**

Board: \_\_\_\_\_

School/Site: \_\_\_\_\_

Supervisor: \_\_\_\_\_

Date: \_\_\_\_\_

**STUDENTS**

Number enrolled at school: \_\_\_\_\_

Number absent today: \_\_\_\_\_

Number absent with flu-like symptoms: \_\_\_\_\_

**BOARD EMPLOYEES**

Number assigned to site: \_\_\_\_\_

Number absent today: \_\_\_\_\_

Number absent with flu-like symptoms: \_\_\_\_\_

**APPENDIX D - SAMPLE**

**MEMORANDUM**

---

**To:** All students, parents/guardians

**From:** Director of Education

**Date:**

Please refer to the attached information pertaining to proper hand washing.

This document is provided to you as a preventative measure to reduce the risks of communicable diseases.

Please ensure that you follow this procedure frequently throughout the day.

Thank you for your assistance in reducing the spread of a possible pandemic influenza.



Please contact the Sudbury and District Health Unit  
for the most current information and resources.

**Sudbury and District Health Unit**

**705-522-9200 ext. 358**

**[www.sdhu.com](http://www.sdhu.com)**

# Hand Hygiene

**The most important thing you can do to keep from getting sick is to wash your hands.**

Hand washing and drying is the single most important measure to reduce the risks of transmitting infection from one person to another.

Hand washing with soap and water, alcohol-based rub, or antiseptic hand wash must be performed regularly.

Hands must be thoroughly dried, preferably using disposable tissues or towels. Use the disposable towel to open the door.

Hand washing and drying should always be done after coughing, sneezing or handling used tissues or after touching objects, materials or hard surfaces that may have been contaminated by someone else with infectious illnesses.

Hand-to-face contact that can occur during eating, normal grooming, or smoking presents significant risks because of the potential for transmission of influenza from surfaces contaminated with wet respiratory droplets.

Hand washing and drying should always be carried out before and after eating, grooming, or any other activity that involves hand-to-face contact.

## **Recommended technique for good hand hygiene practice:**

- Wet hands, preferably with warm water and apply liquid soap
- Rub hands vigorously together and rub all areas
- Wash for 20 seconds (about the same time as it takes to sing Happy Birthday)
- Rinse well and dry hands thoroughly.

The following examples are considered thorough:

- ✓ 20 seconds by paper towel (2 towels 10 seconds on each towel)
- ✓ 20 seconds by clean roller towel
- ✓ 45 seconds by air dryer
- ✓ 10 seconds by towel followed by 20 seconds by air dryer

## **Times when hands should be washed:**

- After coughing or sneezing (when the hands have been used to cover the mouth or nose)
- After using the toilet or after handling animals
- Before, during and after the preparation of food
- More often if someone is sick
- After the removal of latex gloves

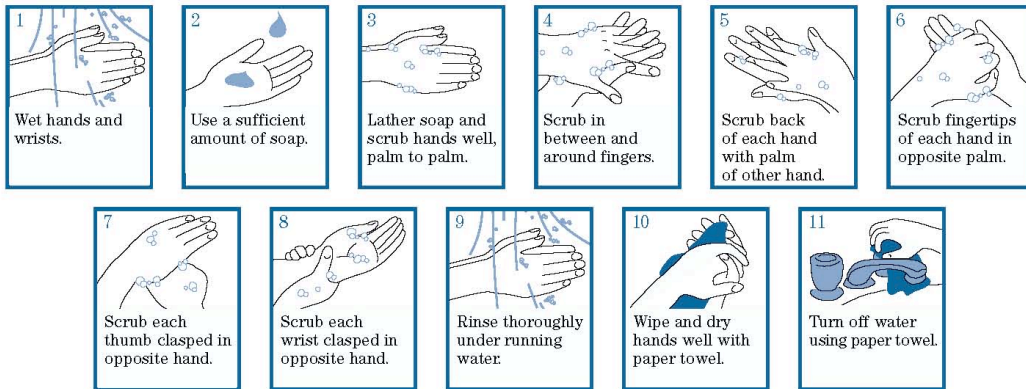
# Handwashing

To wash hands properly, rub all parts of the hands and wrists with soap and water or an alcohol-based hand sanitizer. Wash hands for at least 15 seconds or more. Pay special attention to the areas of the hand most frequently missed.

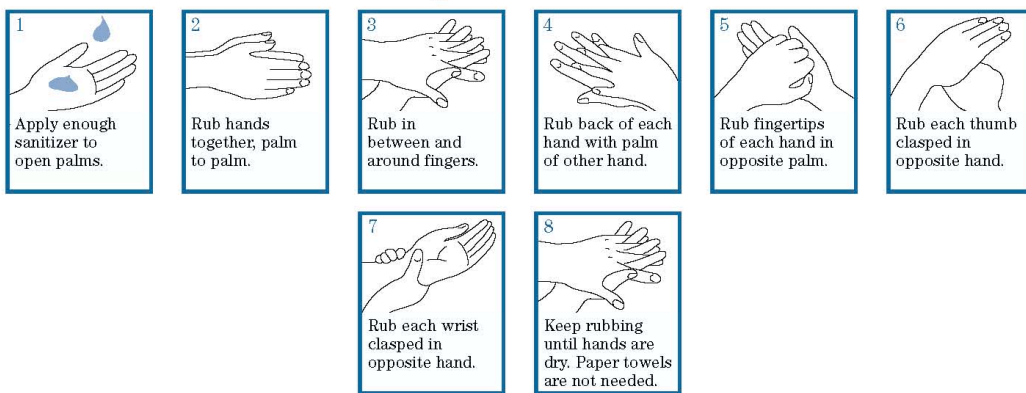
- Keep nails short.
- Avoid wearing rings.
- Avoid artificial nails or nail varnish.
- Remove watches and bracelets.
- Wash wrists and forearms if they are likely to have been contaminated.
- Make sure that sleeves are rolled up and do not get wet during washing.

If you have any questions regarding cuts, sores, allergies or pre-existing skin conditions, call Telehealth Ontario at 1-866-797-0000, TTY: 1-866-797-0007.

## Handwashing with soap and water



## Disinfecting with alcohol sanitizers



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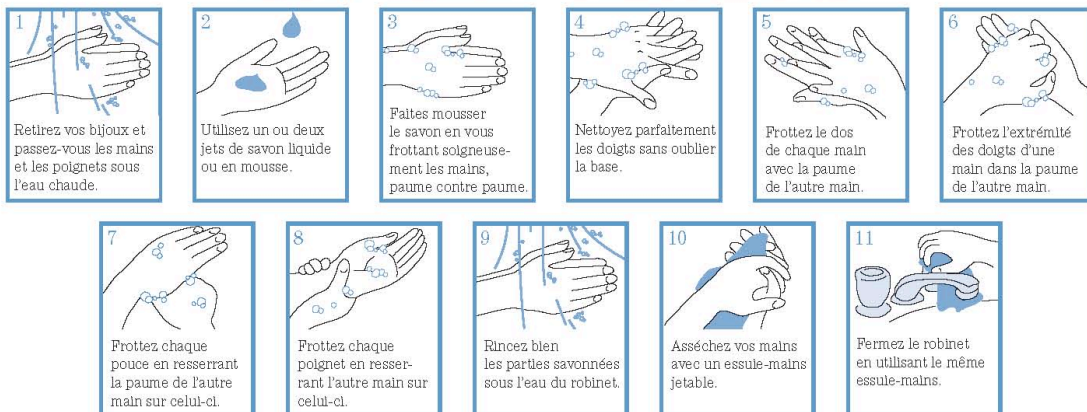
# Le lavage des mains

Pour vous laver les mains correctement, frottez-les entièrement, ainsi que les poignets, avec du savon et de l'eau ou un désinfectant pour les mains à base d'alcool. Lavez les mains pendant au moins 15 secondes. Portez une attention particulière au bout et à la base des doigts, au revers des mains et à la base des pouces.

- Veillez à ce que vos ongles soient courts.
- Enlevez montre, bagues et bracelets.
- Ne portez pas d'ongles artificiels.
- Évitez le vernis à ongles écaillé.
- Lavez-vous les poignets et les avant-bras s'ils sont susceptibles d'être contaminés.
- Roulez vos manches pendant le lavage pour éviter de les mouiller.

Pour toute question au sujet des coupures, des plaies, des allergies ou des affections cutanées, communiquez avec TéléSanté Ontario au 1 866 797-0000, ATS 1 866 797-0007.

## Le lavage des mains avec du savon et de l'eau



## Le lavage à l'aide d'un désinfectant à mains à base d'alcool

