

# **Toronto Public Health Pandemic Plan A Planning Guide for Colleges and Universities**

March 23, 2020

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*Disclaimer: This Planning Guide is a tool to support planning for pandemic in the colleges and universities sector. Toronto Public Health is not responsible for any misinterpretation or misuse of this guide.*

## 1.0 Introduction

Toronto Public Health has prepared a number of planning guides to assist community partners in developing their own pandemic plans.

The guides are intended to be used as planning tools. All agencies, organizations and other partners in the community should use these tools alongside the specific advice provided by federal, provincial and local authorities during an actual pandemic situation.

### 1.1 Purpose of this guide

This general planning guide identifies issues and critical elements of emergency preparedness that colleges and universities should consider in planning for a pandemic. Although Toronto Public Health will identify broad public health issues, every organization must plan for the specific disruptions it will face during a pandemic.

The overall goal of pandemic planning is to reduce illness (morbidity), death (mortality), and social disruption resulting from a pandemic. Although this guide identifies specific issues associated with a pandemic, much of the information applies to other emergencies as well.

The colleges and universities planning guide is an evolving document and as planning continues at the federal, provincial and local levels, updated information will be added.

## 2.0 Colleges and Universities – Specific Issues

This section provides sector-specific information which complements the general information outlined in previous sections.

The Ontario Ministry of Colleges and Universities is responsible for universities and colleges of applied arts and technology. Plans and policies are under the authority of this ministry and the Government of Ontario.

### 2.1 Communications plan

Each facility should prepare a communications plan that specifies how the facility will communicate with staff, students, parents, volunteers, public health authorities, and the Ministry of Colleges and Universities during a pandemic. Important topics that may need to be communicated include information on infection control, possible facility closures, and alternate methods for continuing education.

Toronto Public Health may use facilities to distribute fact sheets or brochures on the pandemic virus to students, parents and staff. During a pandemic, Toronto Public Health's two primary communication vehicles will be:

- The Toronto Public Health website (<https://www.toronto.ca/community-people/health-wellness-care/diseases-medications-vaccines/coronavirus/>), where information will be posted as soon as it becomes available, and
- Toronto Public Health Hotline: 416-338-7600

### 2.2 Emergency contact lists

Each facility should prepare and keep up-to-date a hard copy list of contact information for staff, parents, students, volunteers, Toronto Public Health, and ministry officials.

## 2.3 Coordination and sharing of resources

Pandemic planning requires the coordination of many health-related and non-health-related agencies. When developing pandemic plans, colleges and universities should:

- Connect with other health organizations (e.g., college/university health services, hospitals, local physicians, public health services, and laboratories)
- Review existing federal, provincial and local pandemic plans
- Identify opportunities to share resources with other organizations during a pandemic

## 2.4 Continuing education

Facilities and the Ontario Ministry of Colleges and Universities should plan for alternate education strategies for the ill or recovering students and for all students in the case of facility closures. Some strategies may include home teaching tools or moving courses on-line.

## 2.5 Assessing ill students

The Ministry of Health promotes the use of Telehealth (1-866-797-0000) as a way of seeking consultation without having to visit a health care facility or hospital emergency department. Colleges and universities can obtain remote assessment advice from health care providers operating Telehealth call centres on whether an ill student may need face-to-face assessment and/or treatment.

Some universities and colleges have on-site nursing or medical care or close ties with organizations or health care workers who can provide advice on the clinical management of ill students. To increase a university or college's capacity to assess ill students the following is recommended:

- Prepare contact lists of health providers and organizations able to provide consultation if needed, for example, staff at nearby health clinics
- Develop partnerships with health care providers, walk-in clinics, family physicians or emergency rooms

## 2.6 Isolation of ill students in residence

During a pandemic, student residences may need to provide basic care for ill students as hospitals may be overwhelmed. When feasible, ill students should go home. If this is not achievable, an ill student should be isolated as soon as possible to reduce the chance of spreading the virus. Depending on the size of the residence, the facility may need to isolate several students with the virus in specified rooms (e.g. rooms at one end of the hall, designated wing or floor).

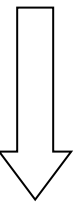
Staff may encounter a range of challenges in isolating ill students, including the physical lay-out of the facility.

Consideration should be given to the following recommendations when caring for ill students in residence:

- Place ill students in a single room, if possible.
- Separate ill students in the same room by more than two metres.
- Staff members should wear appropriate personal protective equipment (e.g. a mask) when they are within two metre of an ill student.
- In shared rooms, arrange beds so that students lie head to toe relative to students in neighbouring beds.
- In larger rooms, create temporary physical barriers between beds using sheets or curtains.

- Provide easy access to washrooms if possible, particularly when accommodating a group of ill students. If communal washrooms are used, clean them frequently.
- Increase the schedule for cleaning common areas, if possible.
- Ensure ill students have access to food, water, and medications.
- Send ill students to hospitals, if necessary.

### Isolation in Residence

	1 Person Ill	2 – 10 People Ill	More than 10 People Ill	Majority of People Ill
<p style="text-align: center;">IDEAL</p>  <p style="text-align: center;">LEAST IDEAL</p>	Isolate in separate room	Accommodate together in separate room	Accommodate together on one floor or in a separate section of the building	Accommodate together throughout the entire site
	Isolate in shared room	Accommodate together in common area	Accommodate together throughout the entire site	
	Isolate in large shared space	Accommodate together in one end of floor		

## 2.7 Use of personal protective equipment

Colleges and universities will need to support students who are ill while in residence. It is important to base planning on the assumption that not all students who are ill with the virus can or need to be hospitalized.

The following recommendations for the use of personal protective equipment refer specifically to situations in which staff provide “care in place” (ill students in residence).

- Sit next to rather than in front of a coughing student when providing care.
- Wear appropriate, recommended personal protective equipment (e.g. a surgical mask, eye protection) when providing direct care to an ill student.
- Gloves are recommended when there is a risk of hand contact with a student’s body fluids. Gloves should be used as an additional measure and not as a substitute for hand hygiene.
- Wear gowns during student care where clothing might be contaminated.

## 2.8 Cleaning and Disinfecting

Regular cleaning and disinfecting of objects and high-touch surfaces will help to prevent the transmission of viruses from contaminated objects and surfaces. It may be prudent to increase the frequency of the cleaning schedule, especially when illness is circulating in the setting or the local community. Increased monitoring of hand cleaning supplies is also recommended to ensure all sinks in washrooms, kitchens and classrooms are well stocked with hand washing supplies at all times (i.e., soap and paper towels).

School administrators are encouraged to review existing activities and practices within their settings to help determine where enhancements or increased cleaning frequencies may be recommended.

### **High-Touch Surfaces**

It is recommended that high-touch objects and surfaces (e.g. pencil sharpeners, water fountain knobs and push buttons, doorknobs, faucet handles, electronic devices, handrails) in colleges and universities are cleaned and disinfected regularly according to standard procedures for routine cleaning, disinfecting, and waste handling.

There is no evidence to suggest that the mouthpieces of water fountains are a major source of virus transmission however they should be cleaned regularly according to manufacture recommendations. Water fountain knobs and push buttons are considered to be a significant source of virus transmission and should be cleaned and disinfected in line with school high-touch surfaces cleaning protocols. Consideration can be given to having students fill water bottles rather than having them drink directly from the mouthpiece of the fountain.

### **Cleaning Products**

Cleaning with water and household detergents and use of common disinfectant products should be sufficient for cleaning and disinfection in schools. If household or commercial disinfectant cleaning products are not readily available, hard surfaces can be disinfected using a mixture of 1-part bleach (5% sodium hypochlorite) and 9 parts water, ensuring the dilute solution makes contact with the surface for one minute for disinfection.

## **2.9 Deaths on campus**

The coroner must be notified of all deaths that occur on campus.

During pandemic planning, agencies should consider the following points:

- Consult with local public health authorities to determine if the bodies of people who died from the virus are considered contagious and if there are any additional precautions to protect others;
- Particular cultural responses to death should be considered when handling human remains;
- Faculty, staff and students may experience heightened anxiety if a death occurs on site;
- Colleges and universities may need to identify areas where bodies can be stored temporarily until transportation to a morgue can be arranged, as well as appropriate storage for the deceased's personal effects.

## **2.10 Student gatherings**

Colleges and universities may decide to limit large student gatherings (e.g., sporting events). Whenever possible, student activities should be limited to classrooms and student mobility kept to a minimum.

## **2.11 Hand hygiene**

Hand hygiene is an important element of infection control in all settings. During a pandemic, hand hygiene should be reinforced and practised by staff, students and visitors.

Hands should be cleaned frequently. Promote hand hygiene by:

- Posting hand hygiene signs reminding staff and students to wash and/or sanitize their hands
- Making hand washing supplies easily accessible, such as alcohol-based hand sanitizer, soap, water, towels and garbage cans
- Making hand sanitizer available at convenient locations throughout the college or university such as at the entrances, in hallways and at the entrance of classrooms.

## 2.12 Food services

During a pandemic, colleges and universities should reinforce routine food safety and sanitation practices. Colleges and universities should also consider the following:

- Reinforce regular hand washing by staff members who prepare food
- Use disposable cutlery and pre-packaged food, if staffing levels are low
- Consider stockpiling a six to eight week supply of non-perishable food, in case deliveries of food are disrupted
- Plan for alternative food supplies in the event that regular catering services are interrupted.

## 2.13 Travel restrictions

During a pandemic, the federal government or international governments may impose travel restrictions to delay the spread of the virus to other areas. This may prevent out-of-province and international students from returning home. Colleges and Universities should encourage students to check the Public Health Agency of Canada's travel advisories for the latest guidance and recommendations for each country to which you plan to travel <https://travel.gc.ca/>. Colleges and universities may decide to keep campus residences open or to help students find alternative accommodations until the travel restrictions are lifted.

## 2.14 Curriculum interruptions

With increased staff and student absenteeism, colleges and universities may have to close temporarily and as a result students may have difficulty completing their academic programs. Interruptions may include the following:

- Cancelled classes
- Missed deadlines
- Missed or cancelled exams
- Late assignments
- Delays in or deferral of new enrolments
- Delayed graduation or commencement

## 2.15 Financial issues for students

Students attending college or university may be on fixed budgets. Any disruption to the regular school year may cause serious financial hardships for some students. The financial concerns of students may be similar to those during a labour disruption.

## 2.16 Student placements

Some postsecondary schools allow students to receive hands-on training through professional placements. These placements may be required for some students to graduate and receive their diploma or degree. A pandemic may affect the students currently enrolled in a professional placement and the ability of students to secure these placements during a pandemic.

### Health-related placements

Many issues need to be discussed about the roles of educational facilities, clinical placement agencies, and health science students during a pandemic. This discussion may include educational institutions that train health sciences students, academic clinical agencies, the Council of Ontario Universities (COU), the Association of Colleges of Applied Arts and Technology of Ontario (ACAATO), the Ontario Council of

Teaching Hospitals (OCOTH), the Ontario Hospital Association, the Ministry of Health, and the Ministry of Colleges and Universities.

These discussions should focus on the following questions:

- How will schools handle the redeployment of students to support a pandemic response if that occurs?
- Will students working in a health care setting continue to provide services?
- If a student refuses to work, will this affect his or her eligibility to graduate?
- What is the liability of the school or program if students are required to continue providing services during an emergency?

**Non-health-related placements**

- Placements may be temporarily cancelled due to public health measures, staffing shortages, or other disruptions that affect the placement.
- Colleges and universities should consider providing alternative educational opportunities to those who have had their placements cancelled.

## **2.16 Security**

Security policies and plans may need to change during a pandemic. Colleges and universities may need to develop additional security procedures, such as the ability to ensure secure storage of medications, food supplies and medical equipment.



### 3.0 Planning Checklist

#### 3.1 Planning checklist - short version

Planning Issues	Completed Yes/no	Comments
Does your facility have an emergency plan?		
Have you made your employees aware of emergency response plans?		
Have you identified which tasks and positions would be essential during an emergency?		
Have you considered alternative strategies on how to continue service delivery when normal methods are disrupted?		
Have you developed a service continuity plan for your facility for decreasing or altering the services that you offer?		
Have you considered how to keep your facility operational with a large number of staff ill and unable to work?		
Do you have a mechanism to monitor increases in staff absenteeism?		
Have you considered how to deal with employees who report to work ill?		
Do you know where to get up-to-date and accurate information about the virus and the pandemic?		
Have you trained your employees on proper hand hygiene and respiratory etiquette?		
Is your cleaning staff aware of proper disinfecting techniques during a pandemic?		
Have you considered stockpiling necessary supplies?		
In case of a death on-site, do you know who to contact (ambulance, coroner, funeral home)?		
Have you considered how you would communicate information to your staff and students in an efficient manner?		
Have you considered how you would provide your staff with support and counseling?		

### 3.2 Planning checklist - long version

Planning Issues	Completed Yes/No/Not Applicable	COMMENTS Document who is responsible for each action and the decision-making process
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#### **Activation/Termination of Pandemic Flu Response Plan**

Who has responsibility for activating the service continuity plan for your facility and who is that person's back-up?		
Has your facility identified a process through which the decision will be made to activate and terminate the plan?		
Do you have a communication strategy for reaching employees and service partners as a result of having to implement any section of the service continuity plan?		

#### **Decision-making and Reporting**

Who needs to approve the Pandemic Response Plan?		
Who is identified as being in charge in the event of pandemic and are the roles of the various stakeholders clearly defined?		
Who makes what decisions?		

#### **Agencies and Stakeholder Communications**

Do you have a list of all relevant agencies and stakeholders and their contact information?		
Who notifies the various stakeholders?		

#### **Communications with Staff and the General Public**

Who will be responsible for communicating to the employees in your facility and who is the back up person(s) to assume this responsibility?		
Have you prepared site-specific notification for closures and contacts for the public?		
Who will be responsible for communicating with the general public?		
How will reduction/temporary termination of regular services be communicated to local stakeholders and the public?		

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<b>Planning Issues</b>	<b>Completed Yes/No/Not Applicable</b>	<b>COMMENTS Document who is responsible for each action and the decision-making process</b>
Who has authority to issue public service announcements/news releases and who is their alternate?		
How fast can these announcements be produced and approved?		
If mail service is interrupted, is there critical mail delivery which you need to make alternative arrangements for?		
Do you know where to get up-to-date and accurate information about the virus and the pandemic? <ul style="list-style-type: none"> <li>▪ Vaccine and antiviral medications information</li> <li>▪ Infection control</li> <li>▪ Personal care</li> <li>▪ Public health measures</li> </ul>		

**Planning**

Who is in charge in the event of a pandemic episode and are the roles of the various stakeholders clearly defined? Who makes what decisions? Who notifies the various stakeholders?		
Who do you need input from both internally and externally to prepare and review a service continuity plan for your facility? Elected officials <ul style="list-style-type: none"> <li>▪ Legal counsel</li> <li>▪ Community partners</li> <li>▪ Labour unions and bargaining agents</li> </ul>		
Who needs to approve the service continuity plan?		
Is the pandemic service continuity plan integrated with your emergency preparedness plan(s)?		
What is the staff capacity and are there provisions to bring in additional staff or volunteers?		
Have you identified the key services that must be provided? (Note: Consider minor to major lack of availability of staff due to illness)		
Has your facility identified possible key functions, staff positions, and supplies for each key service?		

**Testing of the Plan**

How will you test and/or evaluate your service continuity plan?		
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<b>Planning Issues</b>	<b>Completed Yes/No/Not Applicable</b>	<b>COMMENTS Document who is responsible for each action and the decision-making process</b>
How will you test your communication systems, e.g., fan-out?		
<b>Training and Orientation</b>		
What are your training needs for staff and external stakeholders regarding <ul style="list-style-type: none"> <li>▪ infection control measures?</li> <li>▪ environmental cleaning?</li> <li>▪ equipment use?</li> <li>▪ review of your facility's service continuity plan, including explanation of roles and responsibilities?</li> </ul>		
What additional training will volunteers and reassigned staff require?		
<b>Educational Materials</b>		
Have educational materials been prepared?		
Have public education efforts been planned?		
<b>Human Resources</b>		
Is there a list of all employees, complete with telephone numbers (home and business) and job titles (including those recently retired)?		
Does your facility maintain a fan-out list to contact employees?		
Is there a contact list of all senior staff within your facility?		
If public transit becomes a problem, can employees arrange alternate forms of transportation to work, e.g., carpooling?		
Has your facility addressed the issue of staff being unable to report to work due to possible school and daycare closures?		
Do you currently have adequate staffing for regular day-to-day function?		
Do you have a mechanism to monitor increases in staff absenteeism?		
Has your facility prepared an inventory of skills and professional competencies in the event that people from your facility are required to perform duties/functions in other areas to maintain essential services?		
How has your facility planned to maintain the employee payroll?		

**Toronto Public Health Pandemic Plan – March 2020  
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Planning Issues	Completed Yes/No/Not Applicable	COMMENTS Document who is responsible for each action and the decision-making process
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**Health and Safety**

Is there a copy of the Health and Safety manual on site in your facility?		
Have insurance and union issues been addressed?		
Has an inventory been prepared for specialized equipment/facilities that may be needed during a pandemic?		
Have liability issues been addressed for volunteers and re-assigned staff?		
Have support care services been planned for employees? <ul style="list-style-type: none"> <li>▪ Psychosocial support</li> <li>▪ Grief counselling</li> </ul>		

**Materials and Supplies**

Are there clearly stated policies and procedures that cover signing authority and acquisitions?		
Is there a mechanism that will ensure that additional equipment (e.g., cell phones, refrigerators, etc.) can be obtained with minimum delay?		
Who has authority for ordering repair/replacement for equipment and who is their alternate?		
Have you considered developing a 6-8-week stockpile of critical supplies required to maintain your “must do” services, and a stockpile of infection control supplies (e.g., alcohol-based hand sanitizers, tissues)?		
Does your facility have contact lists for all your suppliers and alternate suppliers?		
Has a recovery phase been planned for (e.g., depleted supplies or backlogs)?		

**Documentation and Record Keeping**

Has your facility developed appropriate record keeping procedures for such items as: <ul style="list-style-type: none"> <li>▪ complaints and issues raised</li> <li>▪ significant decisions that were made</li> <li>▪ regular reporting to provincial/federal governments as required</li> </ul>		
Are there people in your facility who have sole access to incoming information (e.g., reports, complaints, etc.) and who are their alternates?		

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Planning Issues	Completed Yes/No/Not Applicable	COMMENTS Document who is responsible for each action and the decision-making process
<b>Information and Technology</b>		
Does your facility maintain a central inventory of passwords to office equipment and electronic files?		
If your information and technology person is ill, who is their alternate?		
Does your facility have access to inventory (including serial numbers) of all computer equipment, printers, fax machines, photocopiers in case repairs are needed?		
Does your facility have contact lists for all equipment repair persons?		
Does your facility have the staff and equipment for a website/telephone call-in line to update staff and parents?		
<b>Facilities</b>		
Could any of the facility's services be provided from another work location or from home?		
If necessary, could staff live at the work location or alternative work location for some period of time?		
Who is your security contact should there be a problem with physical access to your work location and who is their alternate?		
How are courier packages generally sent out and received?		
<b>Procurement of Additional Resources</b>		
Who has the responsibility for procurement matters (e.g., ordering resources and/or equipment) during a pandemic?		
Who will be responsible for payment issues related to overtime and/or additional salary issues and who is their alternate?		
Who has the authority to hire contract/temporary workers and to take on volunteers and who is their alternate?		
Is there a pre-approval process in place for purchasing additional supplies? If not, how long does it take for the approval process?		

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<b>Planning Issues</b>	<b>Completed Yes/No/Not Applicable</b>	<b>COMMENTS Document who is responsible for each action and the decision-making process</b>
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**Post Pandemic**

What are the immediate lessons learned from the previous wave when planning for multiple pandemic waves?		
Who will be responsible for evaluating your response to the pandemic?		
What factors should be included in the evaluation?		
Who will have the authority to notify the various employees, parents and stakeholders regarding the facility's return to full service?		
Who will decide to reinstate full service?		