



APPENDIX A: Documentation of Medical Consultation

3945 Matchette Rd.
Windsor, Ontario N9C 4C2
T: 519.977.2200
F: 519.977.2201
<http://school.jmccentre.ca>

Parent/Guardian Parent Verification of Medical Consultation - John McGivney School Authority (JMSA)

This form is to be completed for all JMSA students prior to school entry in September, 2020.

I am the parent/guardian of _____ (child's name). I hereby verify that I have consulted with my child's medical practitioner during the summer of 2020, regarding the safety of a return to school for my child, given my child's unique health circumstances and risks associated with COVID-19.

Based on consultation with my child's medical practitioner:

___ It has been determined that my child will be attending school in September and will be participating in classroom learning activities at JMSA School.

___ It has been determined that my child will not be attending school in September and will not be participating in classroom learning activities at JMSA School.

Parent/Guardian signature: _____

Date: _____

Comments



APPENDIX B: Parent COVID Attestation

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Parent/Guardian Covid Attestation

Dear Parent/Guardian;

We are requesting your review and signature acknowledging the factors involved in the spread of COVID-19, and that JMSA School will implement strategies and practices **to reduce but not eliminate the risk of COVID-19.**

COVID-19 spreads from person to person most commonly through respiratory droplets (e.g) generated by coughing, sneezing, laughing singing or talking, during close (i.e. within 2m) or prolonged (i.e. lasting more than 15 minutes and may be cumulative) interactions. COVID-19 can be spread by infected individuals who have mild symptoms or who have not yet or who may never develop symptoms. COVID-19 can also be spread by touching something with the virus on it, then touching your mouth, nose or eyes before washing your hands. **COVID-19 can cause more severe illness among people who have compromised immune systems or other underlying medical conditions.**

The risk of COVID-19 can be reduced but not eliminated by implementing and practicing preventive strategies. These include:

- Social distancing where physically possible;
- Use of physical barriers;
- Screening of students' temperature upon school entry and as needed;
- Daily self screening of staff for symptoms;
- Practicing frequent hand hygiene (student and staff);
- Use of classroom cleaning and disinfecting protocols, including the cleaning/disinfecting of high touch surfaces a minimum of 2x daily;
- Staff use of Personal Protective Equipment (PPE) including masks;
- Strategies to minimize sharing of school materials/resources;
- Decreasing the number of student social interactions (cohorting each class).

We will be practicing preventive practices at JMSA School to the best of our ability. It is important that parents/guardians understand:

- **The physical space limitations in the school environment will not permit social distancing between students at all times.**
- **Due to the young age and developmental level of many students, children may have difficulty understanding and practicing social distancing and refraining from sharing toys/resources.**

We are requesting that you acknowledge that you are aware of the preventive strategies practices being implemented by JMSA School, as well of the remaining risks associated with COVID-19.

Sincerely,

B. Roberts-Santarossa

Brenda Roberts-Santarossa
Principal

I _____, parent/guardian of _____
(student name) have read and understood this letter.

Parent Signature

Date

COVID-19 school and child care screening

Version 4: February 24, 2021

Students and children must screen for COVID-19 every day before going to school or child care. Parents/guardians can fill this out on behalf of a child.

Date (mm-dd-yyyy) _____

Screening Questions

1. **In the last 14 days, has the student/child travelled outside of Canada?** Yes No
If exempt from quarantine requirements (for example, an essential worker who crosses the Canada-US border regularly for work), select "No."
2. **Has a doctor, health care provider, or public health unit told you that the student/child should currently be isolating (staying at home)?** Yes No
This can be because of an outbreak or contact tracing.
3. **In the last 14 days, has the student/child been identified as a "close contact" of someone who currently has COVID-19?** Yes No
4. **In the last 14 days, has the student/child received a COVID Alert exposure notification on their cell phone?** Yes No
If they already went for a test and got a negative result, select "No."
5. **Is the student/child currently experiencing any of these symptoms?**
Choose any/all that are new, worsening, and not related to other known causes or conditions they already have.

Fever and/or chills Yes No
Temperature of 37.8 degrees Celsius/100 degrees Fahrenheit or higher

Cough or barking cough (croup) Yes No
Continuous, more than usual, making a whistling noise when breathing (not related to asthma, post-infectious reactive airways, or other known causes or conditions they already have)

Shortness of breath Yes No
Out of breath, unable to breathe deeply (not related to asthma or other known causes or conditions they already have)

Decrease or loss of taste or smell Yes No
Not related to seasonal allergies, neurological disorders, or other known causes or conditions they already have

Sore throat or difficulty swallowing Yes No
Painful swallowing (not related to seasonal allergies, acid reflux, or other known causes or conditions they already have)

Runny or stuffy/congested nose Yes No
Not related to seasonal allergies, being outside in cold weather, or other known causes or conditions they already have

Headache Unusual, long-lasting (not related to tension-type headaches, chronic migraines, or other known causes or conditions they already have)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Nausea, vomiting and/or diarrhea Not related to irritable bowel syndrome, anxiety, menstrual cramps, or other known causes or conditions they already have	<input type="checkbox"/> Yes <input type="checkbox"/> No
Extreme tiredness or muscle aches Unusual, fatigue, lack of energy, poor feeding in infants (not related to depression, insomnia, thyroid dysfunction, sudden injury, or other known causes or conditions they already have)	<input type="checkbox"/> Yes <input type="checkbox"/> No
6. Is someone that the student/child lives with currently experiencing any new COVID-19 symptoms and/or waiting for test results after experiencing symptoms?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Results of Screening Questions



If you answered "YES" to question 1 or 3 do not go to school or child care.

- The student/child must self-isolate (stay home) for 14 days and not leave except to get tested or for a medical emergency.
- If you answered "**YES**" to **question 1**, follow the advice of public health. The student/child can return to school/child care after they are cleared by your local public health unit.
 - Siblings or other people in your household must self-isolate (stay home) for 14 days.
- If you answered "**YES**" to **question 3**, talk with a doctor/health care provider to get advice or an assessment, including if they need a COVID-19 test. The student/child can return to school/child care after 14 days, even if they get a negative test result.
 - If you live in certain areas of the province, like Toronto, siblings and other people in your household must stay at home. This is because of local risk factors.
 - If you live in other areas of Ontario, siblings and other people in your household can go to school, child care or work, but must not leave the home for other non-essential reasons. Ask your school/child care for more information.
- If they develop symptoms or test positive, contact your local public health unit or doctor/health care provider for more advice.
- Contact your school/child care provider to let them know about this result.



If you answered "YES" to question 2 do not go to school or child care.

- The student/child must self-isolate (stay home) and not leave except for a medical emergency.
- Follow the advice of public health. The student/child can return to school/child care after they are cleared by your local public health unit.
- If they develop symptoms, contact your local public health unit or doctor/health care provider for more advice.
- If you live in certain areas of the province, like Toronto, siblings and other people in your household must stay at home. This is because of local risk factors.
- If you live in other areas of Ontario, siblings and other people in your household can go to school, child care or work, but must not leave the home for other non-essential reasons. Ask your school/child care for more information.
- Contact your school/child care provider to let them know about this result.



If you answered “YES” to question 4 do not go to school or child care.

- The student/child must self-isolate (stay home) and not leave except for a medical emergency.
- Visit an assessment centre to get them a COVID-19 test.
 - If they test negative (they do not have the virus), they can return to school/child care.
 - If they test positive (they have the virus), they can return only after they are cleared by your local public health unit.
- If they develop symptoms, contact your local public health unit or doctor/health care provider for more advice.
- Siblings or other people in your household can go to school, child care or work, but must not leave the home for other, non-essential reasons until the individual who got the COVID alert tests negative, or is cleared by your local public health unit.
- Contact your school/child care provider to let them know about this result



If you answered “YES” to any of the symptoms included under question 5 or question 6 do not go to school or child care.

- The student/child must isolate (stay home) and not leave except to get tested or for a medical emergency.
- If you answered “YES” to question 5, talk with a doctor/health care provider to get advice or an assessment, including if the student/child need a COVID-19 test.
- If you answered “YES” to question 6, the student/child can return to school or child care after the individual gets a negative COVID-19 test result, or is cleared by your local public health unit, or is diagnosed with another illness.
- Siblings or other people in your household must stay at home until the student/child showing symptoms or individual tests negative, or is cleared by your public health unit, or is diagnosed with another illness.
- Contact your school/child care provider to let them know about this result.



If you answered “NO” to all questions, your child may go to school/child care because they seem to be healthy and have not been exposed to COVID-19. Follow your school/child care provider’s established process for letting staff know about this result (if applicable).

Public Health Ontario – Contact Tracing

Answering these questions is optional. This information will only be used by Public Health officials for contact tracing. All information will be deleted in 28 days.

Date: _____

Name: _____

Phone or Email: _____