



**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 Screening tool for employees and essential visitors in schools and child care settings

Version 3: October 5, 2020

Date (mm-dd-yyyy) _____

Screening Questions (place an "X" in the appropriate column)

1. **Are you currently experiencing any of these symptoms?** Choose any/all that are new, worsening, and not related to other known causes or medical conditions.

Fever and/or chills Temperature of 37.8 degrees Celsius/100 degrees Fahrenheit or higher	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Cough or barking cough (croup) Continuous, more than usual, making a whistling noise when breathing, not related to other known causes or conditions (for example, asthma, post-infectious reactive airways)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Shortness of breath Out of breath, unable to breathe deeply, not related to other known causes or conditions (for example, asthma)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Sore throat Not related to other known causes or conditions (for example, seasonal allergies, acid reflux)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Difficulty swallowing Painful swallowing, not related to other known causes or conditions	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Runny or stuffy/congested nose Not related to other known causes or conditions (for example, seasonal allergies, being outside in cold weather)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Pink eye Conjunctivitis, not related to other known causes or conditions (for example, reoccurring styes)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Headache that's unusual or long lasting Not related to other known causes or conditions (for example, tension-type headaches, chronic migraines)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Digestive issues like nausea/vomiting, diarrhea, stomach pain Not related to other known causes or conditions (for example, irritable bowel syndrome, menstrual cramps)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Muscle aches that are unusual or long lasting Not related to other known causes or conditions (for example, a sudden injury, fibromyalgia)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Extreme tiredness that is unusual Fatigue, lack of energy, not related to other known causes or conditions (for example, depression, insomnia, thyroid dysfunction)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Falling down often For older people	<input type="checkbox"/> Yes	<input type="checkbox"/> No

2. Have you travelled outside of Canada in the last 14 days?

Yes No

3. In the last 14 days, has a public health unit identified you as a close contact of someone who currently has COVID-19?

Yes No

4. Has a doctor, health care provider, or public health unit told you that you should currently be isolating (staying at home)?

Yes No

5. In the last 14 days, have you received a COVID Alert exposure notification on your cell phone?


Yes No

If you already went for a test and got a negative result, select "No."

Results of Screening Questions

 If you answered "YES" to any of the symptoms included under question 1:

- Contact the school/child care to let them know about this result.
- You should isolate (stay home) and not leave except to get tested or for a medical emergency.
- Talk with a doctor/health care provider to get advice or an assessment, including if you need a COVID-19 test.
- Household members without symptoms may go to school/child care/work. Check your local public health unit's website or call to see if they have different rules based on local risk.

 If you answered "YES" to question 2 or 4:

- Contact the school/child care to let them know about this result.
- You should isolate (stay home) for 14 days and not leave except to get tested or for a medical emergency.
- Follow the advice of public health. You can return to school/child care only after you are cleared by your local public health unit.
- Household members without symptoms may go to school/child care/work. Check your local public health unit's website or call to see if they have different rules based on local risk.

 If you answered "YES" to question 3:

- Contact the school/child care to let them know about this result.
- You should isolate (stay home) for 14 days and not leave except to get tested or for a medical emergency.
- Talk with a doctor/health care provider to get advice or an assessment, including if you need a COVID-19 test. You can return to school/child care only when you are cleared by your local public health unit, regardless of test result.

 If you answered "YES" to question 5:

- Contact the school/child care to let them know about this result.
- You should isolate (stay home) for 14 days and not leave except to get tested or for a medical emergency.
- Visit an assessment centre to get a COVID-19 test. Talk with a doctor/health care provider for more advice.

 If you answered "NO" to all questions, you may go to school/child care.

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: _____

COVID-19 Screening tool for students and children in school and child care

Version 3: October 5, 2020

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 (place an "X" in the appropriate column)

1. Are they currently experiencing any of these symptoms?

Choose any/all that are new, worsening, and not related to other known causes or medical conditions.

Fever and/or chills Temperature of 37.8 degrees Celsius/100 degrees Fahrenheit or higher	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Cough or barking cough (croup) Continuous, more than usual, making a whistling noise when breathing, not related to other known causes or conditions (for example, asthma, post-infectious reactive airways)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Shortness of breath Out of breath, unable to breathe deeply, not related to other known causes or conditions (for example, asthma)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Decrease or loss of smell or taste Not related to other known causes or conditions (for example, allergies, neurological disorders)	<input type="checkbox"/> Yes	<input type="checkbox"/> No

2. Are they currently experiencing any of these symptoms?

Choose any/all that are new, worsening, and not related to other known causes or medical conditions.

Sore throat or difficulty swallowing Painful swallowing, not related to other known causes or conditions (for example, seasonal allergies, acid reflux)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Runny or stuffy/congested nose Not related to other known causes or conditions (for example, seasonal allergies, being outside in cold weather)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Headache that's unusual or long lasting Not related to other known causes or conditions (for example, tension-type headaches, chronic migraines)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Nausea, vomiting and/or diarrhea Not related to other known causes or conditions (for example, irritable bowel syndrome, anxiety in children, menstrual cramps)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Extreme tiredness that is unusual or muscle aches Fatigue, lack of energy, poor feeding in infants, not related to other known causes or conditions (for example, depression, insomnia, thyroid dysfunction, sudden injury)	<input type="checkbox"/> Yes	<input type="checkbox"/> No

3. Have they travelled outside of Canada in the last 14 days?

Yes No

4. In the last 14 days, has a public health unit identified them as a close contact of someone who currently has COVID-19?

Yes No

5. Has a doctor, health care provider, or public health unit told them/you that they should currently be isolating (staying at home)?

Yes No


6. In the last 14 days, have they received a COVID Alert exposure notification on their cell phone?

Yes No

Results of Screening Questions

 If you answered "YES" to any of the symptoms included under question 1:

- Contact the school/child care to let them know about this result.
- They should isolate (stay home) and not leave except to get tested or for a medical emergency.
- Talk with a doctor/health care provider to get advice or an assessment, including if they need a COVID-19 test.
- Household members without symptoms may go to school/child care/work. Check your local public health unit's website or call to see if they have different rules based on local risk.

 If you answered "YES" to only one of the symptoms included under question 2:

- Contact the school/child care to let them know about this result.
- They should isolate (stay home) for 24 hours and not leave except for a medical emergency.
- After 24 hours if their symptom is improving, they can return to school/child care when they feel well enough to go. They do not need to get tested.
- Household members without symptoms may go to school/child care/work. Check your local public health unit's website or call to see if they have different rules based on local risk.

 If you answered "YES" to two or more of the symptoms included under question 2:

- Contact the school/child care to let them know about this result.
- They should isolate (stay home) and not leave except to get tested or for a medical emergency.
- Talk with a doctor/health care provider to get advice or an assessment, including if they need a COVID-19 test.
- Household members without symptoms may go to school/child care/work. Check your local public health unit's website or call to see if they have different rules based on local risk.

 If you answered "YES" to question 3, 4 or 5:

- Contact the school/child care to let them know about this result.
- They should isolate (stay home) for 14 days and not leave except to get tested or for a medical emergency.
- Talk with a doctor/health care provider to get advice or an assessment, including if they need a COVID-19 test.

 If you answered "NO" to all questions, your child may go to school/child care.

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: _____



APPENDIX F: School Cleaning & Disinfecting Checklist

3945 Matchette Rd.
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JMSA Enhanced Protocol for School Cleaning and Disinfecting Checklist

*This enhanced cleaning and disinfecting protocol will be implemented between **1 pm – 4 pm** daily by a contracted facility staff member. It is in addition to regular facility staff cleaning and disinfecting duties (twice daily high touch surface cleaning; regular nightly cleaning and disinfecting)*

1. SCHOOL OFFICE

- Wipe down light switches and door handles in main school office
- Check Kleenex box supply
- Electronic devices (e.g. computer keyboard, phone)

2. SCHOOL CLASSROOMS AND BATHROOMS

Start in School Classroom and Bathroom Closest to the School Office. Work through all School Classrooms and all Student Bathrooms.

CLASSROOMS

Clean all classroom high touch surfaces/areas including:

- door handles
- light switches
- classroom tables/desks
- keyboards
- phone handles
- Clean classroom countertop, backsplash, and sink
- Wipe inside of microwave
- Wipe garbage lid
- Sweep classroom floor
- Mop classroom floors, disinfectant, and rinse at end of school day

SCHOOL BATHROOMS

Clean all bathroom high touch surfaces/areas including:

- door handles
- light switches
- toilet rails
- change tables
- taps
- sink and counter
- Sweep bathroom floor

- Toilet handles
- Mop bathroom floor at end of school day

3. MULTI PURPOSE KITCHEN

- Wipe all counter surfaces and sink
- Sweep floor

4. SCHOOL HALLS AND LOBBY

- Disinfect student rails (**school area only**)

5. SCHOOL GARBAGES: Empty garbage in all student bathrooms and multipurpose kitchen at 1 pm.

6. SCHOOL ENTRANCE DOORS

- At **3:30 pm**, check proper locking of School Entrance doors.

Signed: _____

Dated: _____



APPENDIX G: Guideline: Infection Prevention and Control - Learning Tools/Toy Cleaning

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JOHN MCGIVNEY SCHOOL AUTHORITY (JMSA)

SECTION: Health and Safety

GUIDELINE: COVID 19 Infection Prevention and Control – Learning Tools/Toy Cleaning

DATE: July 10, 2020

INTRODUCTION

Learning tools/toys can be a reservoir for potentially pathogenic microorganisms that can be present in saliva, respiratory secretions, feces or other body substances. Outbreaks associated with toys have been described in the literature.

Learning tools/toys are considered non-critical/semi-critical devices (touch intact skin and mucous membranes) and therefore require low/intermediate level of disinfection.

COVID-19

This policy and procedure has been developed to reflect recommended practices and requirements arising in response to the COVID-19 pandemic.

POLICY

All learning tools/toys must be thoroughly cleaned and disinfected prior to being used. JMSA will use recommended best practices for toy cleaning as outlined in the Public Health Ontario PIDAC: Best Practices for Environmental Cleaning for Prevention and Control of Infections in Health Care Facilities April 2018. <https://www.publichealthontario.ca/-/media/documents/b/2018/bp-environmental-cleaning.pdf?la=en> and COVID19 Guidelines for Child Care in Windsor and Essex County.

JMSA will also take infection prevention and control practices into consideration in the purchase of learning tools/toys and materials to be used.

- Learning tools/toys to be purchased should:
 - be smooth, nonporous and able to withstand rigorous mechanical cleaning;
 - not retain water;
 - have parts that can be cleaned.
- **Only learning tools/toys that are washable and made of hard, non porous materials may be used. Books shall be bagged and removed from circulation for 7 days following use by one child.**
- Learning tools/toys that cannot be washed/ cleaned (i.e. Plush toys) will not be utilized in the School.
- Donated learning tools/toys must meet the same standards as purchased.
- Learning tools/toys with damaged, cracked or broken parts must be discarded.

PROCEDURE FOR CLEANING LEARNING TOOLS/TOYS

General Instructions

1. All learning tools/toys used in classrooms are to be cleaned daily and before being stored.
2. The School will use approved non-toxic disinfectants. Disinfectants will be available in all classrooms and rooms used by staff and/or students.
3. Learning tools/toys to be cleaned by school staff are to be placed in a dirty toy bin. The dirty toy bin will be kept separate from the clean toy area.
4. Staff must follow the designated cleaning procedures.
5. Note: Learning tools/toys may be washed in the dishwasher as it is commercial grade.

Cleaning Instructions - Learning tools/toys and Play Surfaces

1. All learning tools/toys should be inspected for damage, cracked or broken parts prior to cleaning.
2. Damaged, cracked or learning tools/toys with broken parts or that are soiled and are unable to be cleaned should be discarded.

Cleaning After Each Use:

1. The following require cleaning and disinfecting after each use:
 - **Learning tools/toys, play surfaces and high touch areas** (tables, other surfaces) must be cleaned, disinfected and rinsed thoroughly after each use.
 - **Learning tools/toys that have been mouthed or come into contact with a child's saliva or other secretions**; oral motor toys must be cleaned, disinfected and rinsed thoroughly after each use.
 - High-touch surfaces of **shared electronics** (e.g., keyboards, touchscreens) to be cleaned and disinfected after each use.
 - High-touch surfaces of **playhouses/ climbers**.
2. Cleaning and Disinfecting Procedures:
 - Clean visibly soiled learning tools/toys first with dish detergent prior to disinfection.
 - Disinfect using Virox spray or Virox wipe: allow to remain wet for 5 minutes.
 - Rinse with clean water.
 - Allow to air dry or dry with a clean towel prior to reuse or storage.

Cleaning on a scheduled basis:

- toy storage bins/ boxes
- cupboards/ shelves

Responsibilities

Cleaning and disinfecting of learning tools/toys and electronics is the responsibility of school staff. Cleaning and disinfecting of play surfaces and high touch surfaces is the shared responsibility of school staff and day and night cleaning staff.



**APPENDIX H:
School Staff COVID
Cleaning and Disinfecting
Chart**

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JMSA School Staff COVID-19 Cleaning and Disinfection Chart

Student Bathroom	What To Do	After Each Use	2-3 times per day	Weekly
Change Table Mat	Clean & Disinfect	X		
Toilet Hand Rails	Clean & Disinfect	X		
Hand sink	Clean & Disinfect		X	
Child Toys/Resources	What To Do	After Each Use	2-3 times per day	Weekly
Mouthed toys/items	Clean & Disinfect	X		
Electronics (SBS, Computer keyboard, iPad GoTalk)	Clean & Disinfect after use by one child	X		
Toys	Clean & Disinfect after use by one child	X		
OT, Math, or Technology Kit Resources	Clean & Disinfect after use by one child	X		
Books	Bag and store. Do not return to circulation for 7 days.	Single child use only		
Individual Sensory Bins	Bag and label for use by same child	Single child use only		
Outdoor Play Equipment and Toys	Clean & Disinfect	Must be cleaned between groups		
Plush toys and dress up clothes	Not to be used at this time			
Natural items (stones, sticks, beads, pinecones)	Not to be used at this time			
Sleeping Items	What To Do	After Each Use	2-3 times per day	Weekly
Vinyl bean bag chairs/mats	Clean & Disinfect	X		

Hospital bed	Clean and Disinfect mat surface. No shared pillows or sheets	X		
Personal Items & Hygiene	What To Do	After Each Use	2-3 times per day	Weekly
Bibs and cloth facecloths and towels	Launder	X		
Washable hospital gowns	Launder	X		