



Committee of the Whole Meeting

Date: Monday, August 30, 2021

Time: 6:00 p.m.
** Committee of the Whole In Camera, if necessary, will precede or follow the Board Meeting, as appropriate.*

Location: Catholic Education Centre, 35 Weber St. W., Unit A, Kitchener, ON – Boardroom (1st Floor)

Attendees:

Board of Trustees:
Bill Conway, Manuel da Silva, Jeanne Gravelle, Wendy Price, Brian Schmalz, Melanie Van Alphen (Chair), Tracey Weiler

Student Representatives:
Sarah Simoes, Sarah Wilson

Senior Administration:
Loretta Notten, Jason Connolly, Gerald Foran, John Klein, Shesh Maharaj, Judy Merkel, Jennifer Ritsma, Annalisa Varano

Special Resource:

Recording Secretary:
Alice Figueiredo, Executive Administrative Assistant

ITEM	Who	Agenda Section	Method & Outcome
1. Call to Order	Chair		
1.1 Opening Prayer & Memorials	Trustee	--	--
1.2 Territorial Acknowledgement I (we) would like to begin by acknowledging that the land on which we gather today is the land traditionally used by the Haudenosaunee, Anishinaabe and Neutral People. I (we) also acknowledge the enduring presence and deep traditional knowledge, laws and philosophies of the Indigenous People with whom we share this land today.	Chair	--	--
1.3 Approval of Agenda	Board of Trustees		Approval
1.4 Declaration of Pecuniary Interest 1.4.1 From the current meeting 1.4.2 From a previous public or in-camera meeting	Individual Trustees		
1.5 Items for Action			

ITEM	Who	Agenda Section	Method & Outcome
2. Consent Agenda: Director of Education (e.g.: operational matters from the Ministry of Education that the Board is required to do; update on the system)			
3. Consent Agenda: Board (Minutes of meetings)			
3.1 Approval of Minutes of Regular and Special Meetings 3.1.1 Committee of the Whole Minutes of Monday, May 10, 2021	Board of Trustees	pp.4-6	Approval
4. Delegations			
4.1 Article 8 Trustee Vacancy	Chair	--	--
4.2 Random Selection of Candidates	L. Notten	--	--
4.3 Outline of Election Process	Chair	--	Information
4.4 Candidate Presentations	Candidates		Presentations
5. Advice from the CEO			
6. Ownership Linkage (Communication with the External Environment related to Board's Annual Agenda; ownership communication)			
7. Reports from Board Committees/Task Forces			
8. Board Education (at the request of the Board)			
8.1 OCSTA Communications	Chair	pp.7-163	Information
9. Policy Discussion (Based on Annual Plan of Board Work)			
10. Assurance of Successful Board Performance (monitoring)			
11. Assurance of Successful Director of Education Performance (monitoring)			
11.1 Monitoring Reports & Vote on Compliance			
12. Potential Agenda Items/Shared Concerns/Report on Trustee Inquiries			

ITEM	Who	Agenda Section	Method & Outcome
13. Announcements			
13.1 Upcoming Meetings/Events (all scheduled for the Catholic Education Centre unless otherwise indicated): •Sept 13 – COW •Sept 25 – Board •Sept 29 – OCSTA 2021 Fall Regional Meeting	Chair	--	Information
14. Items for the Next Meeting Agenda	Trustees		
	Chair	--	Information
15. Adjournment/ Confirm decisions made tonight	Director of Education		
15.1 Confirm Decisions	Recording Secretary	--	Information
16. Closing Prayer			
17. Motion to Adjourn	Board of Trustees	Motion	Approval

CLOSING PRAYER

O Risen Lord, you have entrusted us with the responsibility to help form a new generation of disciples and apostles through the gift of our Catholic schools.

As disciples of Christ, may we educate and nurture hope in all learners to realize their full potential to transform God's world.

May our Catholic schools truly be at the heart of the community, fostering success for each by providing a place for all.

May we and all whom we lead be discerning believers formed in the Catholic faith community; effective communicators; reflective and creative thinkers; self-directed, responsible, life-long learners; collaborative contributors; caring family members; and responsible citizens.

Grant us the wisdom of your Spirit so that we might always be faithful to our responsibilities. We make this prayer through Christ our Lord.

Amen

Rev. Charlie Fedy, CR and the Board of Trustees, 2010



Committee of the Whole Meeting

A public meeting of the Committee of the Whole was held Monday, May 10, 2021 Virtually.

Trustees Present:

Bill Conway, Manuel da Silva, Kevin Dupuis, Jeanne Gravelle, Wendy Price, Greg Reitzel, Brian Schmalz, Melanie Van Alphen (Chair), Tracey Weiler

Student Trustees Present:

Abby Barbosa & Kate Morrison

Administrative Officials Present:

Loretta Notten, Jason Connolly, Gerald Foran, Maria Ivankovic, John Klein, Shesh Maharaj, Judy Merkel, Richard Olson

Special Resources For The Meeting:

Regrets:

Absent:

Recorder:

Alice Figueiredo, Executive Administrative Assistant

NOTE ON VOTING: Under Board by-law 5.7 all Board decisions made by consensus are deemed the equivalent of a unanimous vote. A consensus decision is therefore deemed to be a vote of 9-0. Under Board by-law 5.11 every Trustee "shall vote on all questions on which the Trustee is entitled to vote" and abstentions are not permitted.

1. Call to Order:

The Chair called the meeting to order at 5:30 p.m.

1.1 Opening Prayer & Memorials

The opening prayer was led by Student Trustee Abby Barbosa.

1.2 Territorial Acknowledgement

The Territorial Acknowledgement was led by Chair Van Alphen.

1.3 Approval of Agenda

Amendments to the agenda:

Add "Dedication of Monsignor Doyle Cafeteria" for approval at 5.4 of the agenda (report attached to minutes) and bring forward 7.1 and 7.2 before section 5 to allow guests to present first.

2021-17 -- It was moved by Trustee Reitzel and seconded by Trustee Conway:

THAT the agenda for Monday, May 10th, 2021, as amended, be now approved. --- Carried by consensus.

1.4 Declaration of Pecuniary Interest

1.3.1 From the current meeting – NIL

1.3.2 From a previous public or in-camera meeting – NIL

2. Consent Agenda: Director of Education (e.g. day-to-day operational matters from the Ministry of Education that the board is required to do)

3. Consent Agenda: Board of Trustees (Minutes of meetings)

3.1 Approval of Minutes of Regular and Special Meetings

3.1 Approval of Minutes of Regular and Special Meetings

3.1.1 Committee of the Whole Minutes of Monday, April 19, 2021

2021-18 -- It was moved by Trustee da Silva and seconded by Trustee Weiler:

THAT the Consent Agenda of Board of Trustees and the recommendations contained therein be now approved. --- Carried by consensus

At this time section 7 of the agenda was brought forth to allow the guests to present (see section 7).

4. Delegations

5. Advice From the CEO

5.1 Math Strategy Update

Superintendent Klein introduced the Math Strategy Update and introduced presenters Petra Le Duc and Nancy Snyder, Student Achievement consultants in Mathematics. The presentation included updated on math coaching, professional development, de-streaming culture in secondary, resource update along with look agenda.

Trustees asked clarifying questions and provided feedback. Nancy Snyder was congratulated on her upcoming retirement and thanked for her many years of service.

5.2 Huron Brigadoon Boundary Review

Superintendent Maharaj introduced the Huron Brigadoon Boundary Review presentation and introduced Virina Elgawly, Property/Planning Officer. Ms. Elgawly provided an overview of the process, options provided and the recommendations.

Trustees asked clarifying questions and provided feedback.

5.3 7-12 Program Review

Superintendent Maharaj introduced the 7-12 Program Review Final Key Considerations Report along with presenter Jennifer Passy, Manager of Planning. Ms. Passy discussed background, survey results of key considerations, public meeting outcome and final key considerations.

Trustees asked clarifying questions and provided feedback.

5.4 Dedication of Monsignor Doyle Cafeteria

Director Notten brought forth a report for approval that the Board approve the renaming of the Monsignor Doyle cafeteria to "Lowry Hall". Director Notten discussed the committee findings and request.

2021-19 -- It was moved by Trustee Reitzel and seconded by Trustee Schmalz:

That the Board approve the renaming of the Monsignor Doyle cafeteria to "Lowry Hall".

--- Carried by consensus

6. Ownership Linkage (Communication with the External Environment)

7. Reports From Board Committees/Task Forces

7.1 SEAC Update

Irene Holdbrook, Chair of SEAC provided an in-depth update on the SEAC committee.

7.2 CPIC Update

Kimberley Snage, Chair of CPIC provided an in-depth update on the CPIC committee.

8. Board Education (at the request of the Board)

8.1 OCSTA Communications

Chair Van Alphen briefly discussed OCSTA communications.

9. Policy Discussion

10. Assurance of Successful Board Performance

11. Assurance of Successful Director of Education Performance

12. Potential Agenda Items

13. Announcements (all scheduled for the Catholic Education Centre unless otherwise indicated)

13.1 Upcoming Meetings/Events

Trustees discussed upcoming events.

14. Items for the Next Meeting Agenda/Pending Items

Chair discussed upcoming agenda items.

15. Adjournment – Confirm decisions made tonight. Closing Prayer

15.1 Confirm Decisions

The Recording Secretary confirmed the meeting decisions.

16. Closing Prayer

Prayer was deferred to the EDC meeting.

17. Motion to Adjourn

2021-19-- It was moved by Trustee Dupuis and seconded by Trustee da Silva:

THAT the meeting be now adjourned. The meeting was adjourned by consensus at 7:16 p.m.

Chair of the Board

Secretary

From: OCSTA - Marie Palombi <MPalombi@ocsta.on.ca>

Sent: Tuesday, June 15, 2021 11:55 AM

To: OCSTA - Marie Palombi <MPalombi@ocsta.on.ca>

Subject: OCSTA: ON News Release - Ontario Supporting the Identification and Commemoration of Indian Residential School Burial Sites

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Ontario Catholic School
Trustees' Association

June 15, 2021

MEMORANDUM

TO: Chairpersons and Directors of Education
- All Catholic District School Boards

CC: OCSTA Directors and Staff
Board Secretaries and Administrative Assistants

FROM: Patrick J. Daly, President

SUBJECT: ON News Release – Ontario Supporting the Identification and Commemoration of Indian Residential School Burial Sites

Please see attached Ontario news release, sent to you for your information.



Ontario



NEWS RELEASE

Ontario Supporting the Identification and Commemoration of Indian Residential School Burial Sites

Province partnering with Indian Residential School survivors, families and Indigenous leaders on a community-led approach

June 15, 2021

[Ministry of Indigenous Affairs](#)

KENORA —The Ontario government is providing \$10 million to help support the identification, investigation, protection and commemoration of Indian Residential School burial sites across the province. The funding will also ensure that culturally appropriate, trauma-informed mental health supports are available for Indian Residential School survivors, their families and Indigenous communities.

“Like all Ontarians, I was heartbroken by the news of a burial site containing the remains of 215 Indigenous children at the former Indian Residential School in Kamloops, British Columbia,” said Premier Doug Ford. “That is why our government is partnering with Indigenous communities to address the loss of generations who are no longer with us, and the continued loss experienced by residential school survivors and their families. As we advance meaningful reconciliation, it is important that all of us continue to deepen our collective understanding of the legacy of the Indian Residential School system.”

Ontario



Across Canada, over 150,000 Indigenous children were forcibly removed from their families and communities and sent to Indian Residential Schools between 1870 and 1996. According to the Truth and Reconciliation Commission of Canada, there were 18 Indian Residential Schools in Ontario; the last of these closed in 1991, with some sites since repurposed, abandoned or destroyed.

“We know that the tragic findings at a former Indian Residential School site in British Columbia are sadly not an anomaly,” said Greg Rickford, Minister of Indigenous Affairs. “Indigenous leaders and Ontarians are looking to governments to commit to the work of investigating Indigenous Residential School burial sites on a priority basis and our government is taking action to support this process through to completion.”

Ontario is working in collaboration with Indigenous leaders to establish processes that will guide the work related to Indian Residential School site identification, investigation, protection and commemoration. Initial site identification will be the first step in a much more extensive process, pending the wishes of the affected families and communities.

The province will identify technical experts, including archaeologists, forensic specialists and historians, available to lead the related research, analysis and technical field work required and ensure it is conducted to the highest standard. Indigenous communities will have the option to work in conjunction with Ontario specialists, such as those provided by the province’s Centre of Forensic Sciences and the Office of the Chief Coroner/Ontario Forensic Pathology Service.

As Ontario continues to advance meaningful reconciliation, the province will also work with Indigenous partners to explore opportunities to deepen Ontarians’ collective awareness and understanding of the legacy of the Indian Residential School system.

Quick Facts

- Roughly 8,000 of Canada’s estimated 80,000 Indian Residential School Survivors lived in Ontario at the time of the Indian Residential School Settlement Agreement.
- The Truth and Reconciliation Commission (TRC) estimated that at least 426 children who attended Indian Residential Schools in Ontario are known to have died, while an unknown number are still missing.
- The TRC research identified 12 locations of unmarked burial sites in Ontario; there are likely more.
- The Seven Generations Education Institute is an Indigenous-led educational organization providing high school and post-secondary education, training for

Ontario



employment opportunities and cultural programming to all Indigenous and non-Indigenous people in the Treaty Three area and beyond.

Quotes

"I'm grateful that the Ontario government is answering my call and the call of all Chiefs in Ontario to provide funding and work in a respectful manner with local leadership and Knowledge Keepers to search the grounds of all former Residential School sites in Ontario. Our little ones need to be found, named, and where possible, returned to their families and communities. Memorial sites must go up across Ontario to remind us that we can never let this happen to our children again, ever. Thank you, Premier Ford and Minister Rickford, for joining us and supporting us in this healing journey."

- Ontario Regional Chief Roseanne Archibald

"Our Nations are in mourning. Survivors have long shared the truths about the missing children. The province is now listening. Our Nations must lead this important and sacred work with the support from the province. We require access to funding, technical expertise, mental health supports and justice. We want to find our children and bring them home. If a family or community suspects where their lost loved ones are, they should have access to whatever is required to find them – with the appropriate Indigenous health supports in place and meaningful justice sector responses. Ontario is taking important steps to make this happen."

- Alvin Fiddler

Former Grand Chief, Nishnawbe Aski Nation/candidate for National Chief of the Assembly of First Nations

"The news of the 215 children found in Kamloops has affected our people in deeply emotional, spiritual, and physical ways. Our survivors and their families in Treaty #3 have long known that not everyone came home from residential school. The reminder that many have yet to be found has impacted our Nation in ways I cannot express. Over the past several weeks, many people have told me of their experiences of seeing children disappear and have asked that we begin searching for them. Today's announcement is a step towards bringing our children home."

- Ogichidaa Francis Kavanaugh

Grand Council Treaty #3

"Our children were taken from us by government diktat in an effort to eliminate our language, culture, values, and identity, and some of them were never seen again. No parent or child should ever have to experience that, and we must ensure it never happens again."

Ontario



With the Government of Ontario committing to a full investigation of burial sites, Six Nations is encouraged in the hope that we will find all of our missing children and bring to light what happened to them. This is a step towards justice."

- Chief Mark B. Hill
Six Nations of the Grand River

"I want to thank Minister Rickford and the Ontario government for bringing this commitment of funding so swiftly. We cannot have true reconciliation in this province without closure for the victims of these institutions, their families and their communities. Many in the Métis community attended residential and day school institutions, creating pain that rests with us to this day. This funding will help our communities address the intentional harms of those institutions and their legacy, and more importantly, help our communities move towards true closure."

- Margaret Froh
President, Métis Nation of Ontario

"On behalf of the Métis people and communities of the Lake of the Woods, Lac Seul and Rainy Lake/Rainy River, I want to thank Minister Rickford and his government for this announcement. With this funding, Ontario is taking another step along the path to reconciliation. This announcement acknowledges the negative impacts these schools had, and continue to have, within our communities. Most importantly, it charts a course of action to begin to address them. We appreciate this tangible action and will continue to work with Ontario and Canada to bring the closure that our communities deserve."

- Theresa Stenlund
Regional Councillor, Métis Nation of Ontario

Additional Resources

- [The Truth and Reconciliation Commission of Canada's Calls to Action](#)
- [Pathways to Safety: Ontario's Strategy in Response to the Final Report of the National Inquiry into Missing and Murdered Indigenous Women and Girls](#)
- [Indigenous Youth Leading Youth Anti-Racism Program](#)
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- [Hope for Wellness Help Line for Indigenous Peoples](#)
- [Talk4Healing - a culturally grounded helpline for Indigenous women](#)

Media Contacts

Ontario



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Flavia Mussio

Communications Branch

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[416-314-9455](tel:416-314-9455)

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Ontario



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From: OCSTA - Marie Palombi <MPalombi@ocsta.on.ca>

Sent: Tuesday, June 15, 2021 12:09 PM

To: OCSTA - Marie Palombi <MPalombi@ocsta.on.ca>

Subject: OCSTA: Memo-ON News Release - Ontario Supporting 2SLGBTQI+ Students

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Ontario Catholic School
Trustees' Association

June 15, 2021

MEMORANDUM

TO: Chairpersons and Directors of Education
- All Catholic District School Boards

CC: OCSTA Directors and Staff
Board Secretaries and Administrative Assistants

FROM: Patrick J. Daly, President

SUBJECT: ON News Release – Ontario Supporting 2SLGBTQI+ Students

Please see attached Ontario news release, sent to you for your information.

Ontario



NEWS RELEASE

Ontario Supporting 2SLGBTQI+ Students

Province Taking Action to Combat Homophobia and Promote Inclusion

June 15, 2021

[Ministry of Education](#)

TORONTO — The Ontario government is partnering with community organizations to better support Two-Spirit, Lesbian, Gay, Bisexual, Trans, Queer or Questioning, and Intersex (2SLGBTQI+) students and their families. Stephen Lecce, Minister of Education, made the announcement as part of the province's ongoing efforts to promote an education system that upholds and champions human rights and equity for all students. In addition, the government is working to strengthen school board accountability given trustees' important role in the public education system.

"Our government believes that every student – regardless of their sexual orientation, race, or faith – should feel empowered to achieve their full potential in Ontario's schools," said Minister Lecce. "That is why we are working with partners to combat homophobia and advance inclusivity in our schools for Ontario's 2SLGBTQI+ students. Let us all rally behind the universal message of Pride: love is love."

"Discrimination, bullying and other forms of hate will not be tolerated in our province," said Jill Dunlop, Associate Minister of Children and Women's Issues. "I'm proud our government is collaborating with various sectors, including schools, to ensure children and youth in Ontario feel included and supported. It is vital that at such a vulnerable age, students know help is there for them."

The Ontario government recognizes that homophobia represents a serious threat to the mental well-being and safety of 2SLGBTQI+ students. It was recently announced by the government that for the 2021-2022 school year, mental health funding for students will rise to \$80 million, representing a four time increase from 2017-2018. Ontario's funding of mental health programs as part of the [Safe Return to Class Fund](#) will bolster support for 2SLGBTQI+ students and help foster safe and inclusive classrooms. The overall funding will provide community groups with funding to deliver collaborative, community-based student and parent resources, including targeted mental health counselling for 2SLGBTQI+ youth.

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Partnerships include:

- \$50,000 for [White Ribbon](#) to create a highly engaging, interactive social media campaign that speaks directly to Indigenous youth, Black youth, racialized youth, children and youth in care and 2SLGBTQI youth.
- \$50,000 for [Egale](#) to foster affirming, equitable and mental health supportive environments for 2SLGBTQI youth by providing collaborative, community-based resources such as webinars and discussions for parents, caregivers and adults in the whole school community.
- \$20,000 for [The Canadian Centre for Gender and Sexual Diversity](#) to create resources for students who identify as 2SLGBTQI and may be facing increased mental health issues due to the COVID-19 pandemic. The resources will support youth in affirming their identities, building resiliency skills and providing coping strategies to maintain their mental health and well-being.

In addition, Egale is receiving \$100,000 from the Federal Safe Restart Framework: Cross-sectoral COVID-19 Mental Health and Addictions Supports to provide targeted mental health supports to 2SLGBTQI youth identified as marginalized and/or in risk situations.

The government will be working with provincial trustee associations and other stakeholders to explore ways to strengthen the school board accountability given the role of trustees as elected leaders of school boards. The province will be seeking input from stakeholders and the public on provincial standards for trustee codes of conduct and more effective measures for preventing and addressing breaches of the code to ensure the dignity and wellbeing of all students and families, and to uphold public confidence.

In 2019, Premier Ford, Ministers Elliott, Mulroney, and Lecce proudly marched in the York Pride Parade, celebrating the unifying message of Pride.

Quick Facts

- Pride Month is every June, in which 2SLGBTQI+ communities are celebrated throughout the world.
- As part of the Safe Return to Class Fund, the Ontario government is directing \$6.4 million to support equity-related projects. This includes funding to community organizations [to address anti-Asian hate](#), antisemitism, and Islamophobia, support for [Black](#), Indigenous and 2SLGBTQI+ students as well as support for newcomer youth, parents and families to enhance access

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to school and community resources, and culturally appropriate mental health and well-being supports for youth, families and teachers.

- For the upcoming school year, Ontario's Priorities and Partnership Fund (PPF) will include more than \$288 million in funding for approximately 150 initiatives that include a focus on strengthening math skills, access to mental health and well-being supports, combatting racism and other forms of discrimination and support for children with disabilities.
- On June 4, 2020, the government launched the Premier's Council on Equality of Opportunity, a new advisory group which provides advice on how young people can overcome social and economic barriers and achieve success.
- In 2019, Ontario's government released a revised elementary Health and Physical Education (HPE) curriculum including new and enhanced learning related to sexual orientation in Grades 5 and 7, in addition to the existing learning in Grades 6 and 8.
 - Complementary learning related to respectful behaviours and the effects of hurtful comments, including homophobic comments, was also enhanced. Learning related to gender expression and gender identity is mandatory learning in Grade 8. Optional teacher prompts and examples are included in Grades 7 and 8.
 - The secondary Health and Physical Education curriculum includes learning that focuses on understanding of factors that can influence a person's understanding of their gender identity and sexual orientation and identifies sources of support for all students.

Quotes

"CCGSD is really grateful for the Ministry of Education's support and active partnership with experts to support 2SLGBTQ+ students and their families. We look forward to ongoing initiatives from the Ontario government to combat transphobia and homophobia in schools that also includes reflecting 2SLGBTQ+ identities and issues in the curriculum."

- Debbie Owusu-Akyeeah

Executive Director of the Canadian Centre for Gender and Sexual Diversity

"Now more than ever, 2SLGBTQI youth are facing disproportionate impacts on their mental health and wellbeing. This funding has allowed us to provide accessible tools and resources for adults across the whole school community to support 2SLGBTQI students as they head back to class this September."

Ontario



- Helen Kennedy
Executive Director at Egale Canada

"2SLGBTQI youth need to know they are not alone, that they have a community of allies that support them, that celebrate who they are, and who will help create safe and inclusive schools. White Ribbon, along with diverse partners, youth, educators, parents, and community leaders will continue to work together to help 2SLGBTQI youth feel loved, cared for, and accepted."

- Humberto Carolo
Executive Director at White Ribbon

Additional Resources

- [Historic Level of Public Education Funding With Additional Supports to Keep Students and Staff Safe](#)
- [Ontario Taking Bold Action to Address Racism and Inequity in Schools](#)
- [Education Funding, 2021-22](#)
- [Developing and Implementing Equity and Inclusive Education Policies in Ontario Schools](#)

Media Contacts

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[437-225-0321](tel:437-225-0321)

From: OCSTA - Connie DeMelo <CDeMelo@ocsta.on.ca>
Sent: Tuesday, June 15, 2021 3:52 PM
To: OCSTA - Connie DeMelo <CDeMelo@ocsta.on.ca>
Subject: OCSTA Memo: Trustee Code of Conduct Government Consultation

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Ontario Catholic School Trustees' Association

June 15, 2021

MEMORANDUM

TO: Chairpersons and Directors of Education
- All Catholic District School Boards

CC: OCSTA Directors and Staff
Board Secretaries and Administrative Assistants

FROM: Patrick J. Daly, President

SUBJECT: Trustee Code of Conduct Government Consultation

You may have noted that contained in today's provincial news release regarding supports for 2SLGBTQI+ students in Ontario schools is an announcement that the government will be working with "provincial trustee associations and other stakeholders to explore ways to strengthen school board accountability given the role of trustees as elected leaders of school boards." See full news release attached to this email.

As stated in the release, the government will be seeking input from stakeholders and the public on provincial standards for trustee codes of conduct and more effective measures for preventing and addressing breaches of the code to ensure the well-being of all students and families, and to uphold public confidence.

On perhaps a related matter last March, the Ministry of Municipal Affairs and Housing launched a public consultation regarding codes of conduct for municipal councilors. At the core of this consultation was a set of recommendations that were developed based on feedback from members of the Association of Municipalities of Ontario.

OCSTA will be discussing the matter of the proposed consultation regarding trustee codes of conduct with Ministry of Education officials and will provide additional information to you as it becomes available.



CONNIE ARAUJO-DE MELO | Ontario Catholic School Trustees' Association | 1804-20 Eglinton Avenue West, Box 2064, Toronto, ON M4R 1K8 | t 416-932-9460 ext. 226



NEWS RELEASE

Ontario Supporting 2SLGBTQI+ Students

Province Taking Action to Combat Homophobia and Promote Inclusion

June 15, 2021

[Education](#)

TORONTO — The Ontario government is partnering with community organizations to better support Two-Spirit, Lesbian, Gay, Bisexual, Trans, Queer or Questioning, and Intersex (2SLGBTQI+) students and their families. Stephen Lecce, Minister of Education, made the announcement as part of the province's ongoing efforts to promote an education system that upholds and champions human rights and equity for all students. In addition, the government is working to strengthen school board accountability given trustees' important role in the public education system.

"Our government believes that every student – regardless of their sexual orientation, race, or faith – should feel empowered to achieve their full potential in Ontario's schools," said Minister Lecce. "That is why we are working with partners to combat homophobia and advance inclusivity in our schools for Ontario's 2SLGBTQI+ students. Let us all rally behind the universal message of Pride: love is love."

"Discrimination, bullying and other forms of hate will not be tolerated in our province," said Jill Dunlop, Associate Minister of Children and Women's Issues. "I'm proud our government is collaborating with various sectors, including schools, to ensure children and youth in Ontario feel included and supported. It is vital that at such a vulnerable age, students know help is there for them."

The Ontario government recognizes that homophobia represents a serious threat to the mental well-being and safety of 2SLGBTQI+ students. It was recently announced by the government that for the 2021-2022 school year, mental health funding for students will rise to \$80 million, representing a four time increase from 2017-2018. Ontario's funding of mental health programs as part of the [Safe Return to Class Fund](#) will bolster support for 2SLGBTQI+ students and help foster safe and inclusive classrooms. The overall funding will provide community groups with funding to deliver collaborative, community-based student and parent resources, including targeted mental health counselling for 2SLGBTQI+ youth.

Partnerships include:

- \$50,000 for [White Ribbon](#) to create a highly engaging, interactive social media campaign that speaks directly to Indigenous youth, Black youth, racialized youth, children and youth in care and 2SLGBTQI youth.
- \$50,000 for [Egale](#) to foster affirming, equitable and mental health supportive environments for 2SLGBTQI youth by providing collaborative, community-based resources such as webinars and discussions for parents, caregivers and adults in the whole school community.
- \$20,000 for [The Canadian Centre for Gender and Sexual Diversity](#) to create resources for students who identify as 2SLGBTQI and may be facing increased mental health issues due to the COVID-19 pandemic. The resources will support youth in affirming their identities, building resiliency skills and providing coping strategies to maintain their mental health and well-being.

In addition, Egale is receiving \$100,000 from the Federal Safe Restart Framework: Cross-sectoral COVID-19 Mental Health and Addictions Supports to provide targeted mental health supports to 2SLGBTQI youth identified as marginalized and/or in risk situations.

The government will be working with provincial trustee associations and other stakeholders to explore ways to strengthen the school board accountability given the role of trustees as elected leaders of school boards. The province will be seeking input from stakeholders and the public on provincial standards for trustee codes of conduct and more effective measures for preventing and addressing breaches of the code to ensure the dignity and wellbeing of all students and families, and to uphold public confidence.

In 2019, Premier Ford, Ministers Elliott, Mulroney, and Lecce proudly marched in the York Pride Parade, celebrating the unifying message of Pride.

Quick Facts

- Pride Month is every June, in which 2SLGBTQI+ communities are celebrated throughout the world.
- As part of the Safe Return to Class Fund, the Ontario government is directing \$6.4 million to support equity-related projects. This includes funding to community organizations [to address anti-Asian hate](#), antisemitism, and Islamophobia, support for [Black](#), Indigenous and 2SLGBTQI+ students as well as support for newcomer youth, parents and families to enhance access to school and community resources, and culturally appropriate mental health and well-being supports for youth, families and teachers.
- For the upcoming school year, Ontario's Priorities and Partnership Fund (PPF) will include more than \$288 million in funding for approximately 150 initiatives that include a focus on strengthening math skills, access to mental health and well-being supports, combatting racism and other forms of discrimination and support for children with disabilities.
- On June 4, 2020, the government launched the Premier's Council on Equality of Opportunity, a new advisory group which provides advice on how young people can overcome social and economic barriers and achieve success.
- In 2019, Ontario's government released a revised elementary Health and Physical Education (HPE) curriculum including new and enhanced learning related to sexual orientation in Grades 5 and 7, in addition to the existing learning in Grades 6 and 8.
 - Complementary learning related to respectful behaviours and the effects of hurtful comments, including homophobic comments, was also enhanced. Learning related to gender expression and gender identity is mandatory learning in Grade 8. Optional teacher prompts and examples are included in Grades 7 and 8.
 - The secondary Health and Physical Education curriculum includes learning that focuses on understanding of factors that can influence a person's understanding of their gender identity and sexual orientation and identifies sources of support for all students.

Quotes

"CCGSD is really grateful for the Ministry of Education's support and active partnership with experts to support 2SLGBTQ+ students and their families. We look forward to ongoing initiatives from the Ontario government to combat transphobia and homophobia in schools that also includes reflecting 2SLGBTQ+ identities and issues in the curriculum."

- Debbie Owusu-Akyeeah
Executive Director of the Canadian Centre for Gender and Sexual Diversity

"Now more than ever, 2SLGBTQI youth are facing disproportionate impacts on their mental health and wellbeing. This funding has allowed us to provide accessible tools and resources for adults across the whole school community to support 2SLGBTQI students as they head back to class this September."

- Helen Kennedy
Executive Director at Egale Canada

"2SLGBTQI youth need to know they are not alone, that they have a community of allies that support them, that celebrate who they are, and who will help create safe and inclusive schools. White Ribbon, along with diverse partners, youth, educators, parents, and community leaders will continue to work together to help 2SLGBTQI youth feel loved, cared for, and accepted."

- Humberto Carolo
Executive Director at White Ribbon

Additional Resources

- [Historic Level of Public Education Funding With Additional Supports to Keep Students and Staff Safe](#)
- [Ontario Taking Bold Action to Address Racism and Inequity in Schools](#)
- [Education Funding, 2021-22](#)
- [Developing and Implementing Equity and Inclusive Education Policies in Ontario Schools](#)

Related Topics

Education and Training

Learn about Ontario’s early years, education and training systems. Includes information on child care, elementary schools, secondary schools, colleges, universities, skills training and financial aid. [Learn more](#)

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From: OCSTA - Marie Palombi <MPalombi@ocsta.on.ca>

Sent: Thursday, June 17, 2021 4:20 PM

To: OCSTA - Marie Palombi <MPalombi@ocsta.on.ca>

Subject: OCSTA: Memo-ON News Release - Ontario Takes Action to Support Access to French-Language Education

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Ontario Catholic School Trustees' Association

June 17, 2021

MEMORANDUM

TO: Chairpersons and Directors of Education
- All Catholic District School Boards

CC: OCSTA Directors and Staff
Board Secretaries and Administrative Assistants

FROM: Patrick Daly, President

SUBJECT: ON News Release – Ontario Takes Action to Support Access to French-Language Education

Today the provincial government issued a news release announcing a new strategy to support access to French language education at Ontario's school boards. The release also stated that the Ministry of Education and the Ministry of Colleges and Universities will be consulting with English-language faculties of education and **school board associations** on ways to modernize the Initial Teacher Education FSL program by reducing barriers to increase enrolment of prospective FSL teachers for elementary schools.

OCSTA will provide additional information on this proposed consultation, as we become aware of it.

The full news release is enclosed for your reference.

A handwritten signature in black ink, appearing to be 'R. H.' followed by a stylized flourish.

Ontario Takes Action to Support Access to French-Language Education

Strategy will bolster access to French teachers and sustain high-quality education

June 17, 2021

[Education](#)



COME BACK TO MASS!

by [Bishop Robert Barron](#) · June 9, 2021

[Share](#)[Tweet](#)[Email](#)

The past fifteen months have been a time of crisis and deep challenge for our country, and they have been a particular trial for the Catholics. During this terrible COVID period, many of us have been compelled to fast from attendance at Mass and the reception of the Eucharist. To be sure, numerous Masses and Eucharistic para-liturgies have been made available online, and thank God for these. But Catholics know in their bones that such virtual presentations are absolutely no substitute for the real thing. Now that the doors of our churches are commencing to open wide, I would like to urge every Catholic reading these words: Come back to Mass!

Why is the Mass of such central importance? The Second Vatican Council eloquently teaches that the Eucharist is the “source and summit of the Christian life”—which is to say, that from which authentic Christianity comes and toward which it tends. It is the alpha and the omega of the spiritual life, both the path and the goal of Christian discipleship. The Church Fathers consistently taught that the Eucharist is sustenance for eternal life. They meant that in the measure that we internalize the Body and Blood of Jesus, we are readied for life with him in the next world. Thomas Aquinas said that all of the other sacraments contain the *virtus Christi* (the power of Christ) but that the Eucharist contains *ipse Christus* (Christ himself)—and this would help to explain why St. Thomas could never make it through the Mass without shedding copious tears. It is precisely at the Mass that we are privileged to receive this incomparable gift. It is precisely at the Mass that we take in this indispensable sustenance. Without it, we starve to death spiritually.

If I might broaden the scope a bit, I would like to suggest that the Mass is, in its totality, *the* privileged point of encounter with Jesus Christ. During the Liturgy of the Word, we hear not simply human words crafted by poetic geniuses, but rather the words of the Word. In the readings, and especially in the Gospel, it is Christ who speaks to us. In our responses, we speak back to him, entering into conversation with the second person of the Trinity. Then, in the Liturgy of the Eucharist, the same Jesus who has spoken his heart to us offers his Body and Blood for us to consume. There is simply, this side of heaven, no more intimate communion possible with the risen Lord.

I realize that many Catholics during this COVID period have become accustomed to the ease of attending Mass virtually from the comfort of their own homes and without the inconvenience of busy parking lots, crying children, and crowded pews. But a key feature of the Mass is precisely our *coming together as a community*. As we speak, pray, sing, and respond together, we realize our identity as the Mystical Body of Jesus. During the liturgy, the priest functions *in persona Christi* (in the very person of Christ), and the baptized in attendance join themselves symbolically to Christ the head and together offer worship to the Father. There is an exchange between priest and people at Mass that is crucially important though often overlooked. Just before the prayer over the gifts, the priest says, “Pray, brothers and sisters, that my sacrifice and yours may be acceptable to God, the almighty Father,” and the people respond, “May the Lord accept the sacrifice at your hands for the praise and glory of his name, for our good and the good of all his holy Church.” At that moment, head and members consciously join together to make the perfect sacrifice to the Father. The point is that this cannot happen when we are scattered in our homes and sitting in front of computer screens.

If I might signal the importance of the Mass in a more negative manner, the Church has consistently taught that baptized Catholics are morally obligated to attend Mass on Sunday and that the conscious missing of Mass, in the absence of a valid excuse, is mortally sinful. I understand that this language makes many people today uncomfortable, but it shouldn't, for it is perfectly congruent with everything we have said about the Mass to this point. If the Eucharistic liturgy is, in fact, the source and summit of the Christian life, the privileged encounter with Jesus Christ, the moment when the Mystical Body most fully expresses itself, the setting for the reception of the bread of heaven—then we are indeed putting ourselves, spiritually speaking, in mortal danger when we actively stay away from it. Just as a physician might observe that you are endangering your life by eating fatty foods, smoking, and refraining from exercise, so a doctor of the soul will tell you that abstaining from the Mass is compromising your spiritual health. Of course, as I suggested above, it has always been the law of the Church that an individual may decide to miss Mass for legitimate prudential reasons—and this certainly obtains during these waning days of the pandemic.

But come back to Mass! And might I suggest that you bring someone with you, someone who has been away too long or has perhaps been lulled into complacency during COVID? Let your own Eucharistic hunger awaken an evangelical impulse in you. Bring in people from the highways and byways; invite your co-workers and family members; wake up the kids on Sunday morning; turn off your computers. Come back to Mass!

COMMENTS

Comments are turned off.



Ontario Catholic School Trustees' Association

June 21, 2021

MEMORANDUM

TO: Chairpersons and Directors of Education
Adult Faith Animators and Religious Education Consultants
- All Catholic District School Boards

FROM: Anne O'Brien, Director of Catholic Education

SUBJECT: **Catholic Education: *Rebuild, Restore, Renew Together***
L'éducation catholique: *Rebâtir, Rétablir, Renouveler Ensemble*
Prayer for Catholic Education Week 2022 and Scripture Quotes

“Behold, I make all things new.” (Revelation 21:5)
«Voici que je fais toutes choses nouvelles.» (Apocalypse 21,5)

As a follow-up to our recent theme announcement for Catholic Education Week 2022, we would like to provide all Ontario Catholic school boards and schools with the prayer for Catholic Education Week 2022 and scripture quotes for each day of Catholic Education Week.

Prayer for Catholic Education Week 2022

God of grace,
help us to rediscover how to be side by side
in rebuilding our communities of faith and learning.
Help us restore harmony and balance in our relationships,
and renew our desire to approach challenges confidently and with peaceful hearts.
May we always rejoice in recognizing the blessings our lives hold. Amen +.

Prière pour la SEC 2022

Dieu de grâce,



aide-nous à redécouvrir comment vivre les uns avec les autres,
afin de rebâtir nos communautés de foi et d'apprentissage.
Aide-nous à rétablir l'équilibre et l'harmonie dans nos relations
et viens renouveler notre volonté d'aborder les défis avec confiance et un cœur paisible.
Pussions-nous toujours nous réjouir en reconnaissant ta bonté dans notre vie. Amen +.

Scripture Quotes for the Five Sub-Themes of CEW

Monday: Rediscover / Redécouvrir

"I have found the coin that I lost." Lk. 15:9b

"Réjouissez-vous avec moi, car j'ai retrouvé la pièce d'argent que j'avais perdue!" Lc 15:9b

Tuesday: Rebuild / Rebâtir

"Rebuild the house of the Lord." Ez. 1:3

"Qu'il bâtisse la maison du Seigneur." Esd 1, 3

Wednesday: Restore / Rétablir

"The God of all grace will restore, support, strengthen, and establish you." 1 Pt. 5:10

"Le Dieu de toute grâce (...) vous rétablira lui-même, vous affermira, vous fortifiera, vous rendra inébranlables." 1P5, 10

Thursday: Renew / Renouveler

"The Lord your God ... Will rejoice over you with gladness, he will renew you in his love."
Zeph. 3:17

"Le Seigneur ton Dieu (...) aura en toi sa joie et son allégresse, il te renouvellera par son amour."
So 3, 17

Friday: Rejoice / Se réjouir

"Be glad and rejoice, for the Lord has done great things!" Joel 2:21

"Exulte et réjouis-toi! Car le Seigneur a fait de grandes choses." Jl 2, 21

Please stay tuned for the Catholic Education Week First Week of School Kit which will be made available to all Catholic District School Boards in early August!

From: OCSTA - Marie Palombi <MPalombi@ocsta.on.ca>

Sent: Tuesday, June 29, 2021 10:41 AM

To: OCSTA - Marie Palombi <MPalombi@ocsta.on.ca>

Subject: OCSTA: Memo - ON News Release: Ontario Combatting Islamophobia in Schools

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Ontario Catholic School
Trustees' Association

June 29, 2021

MEMORANDUM

TO: Chairpersons and Directors of Education
- All Catholic District School Boards

CC: OCSTA Directors and Staff
Board Secretaries and Administrative Assistants

FROM: Patrick J. Daly, President

SUBJECT: ON News Release – Ontario Combatting Islamophobia in Schools

Please see Ontario news release below, sent to you for your information.

NEWS RELEASE

Ontario Combatting Islamophobia in Schools

Province Partnering with Community Organizations to Support Muslim Students and Families

June 29, 2021

[Ministry of Education](#)

TORONTO — The Ontario government is investing in a plan to counter Islamophobia and ensure classrooms are free from discrimination. Stephen Lecce, Minister of Education, and Kaleed Rasheed, MPP for Mississauga East-Cooksville and Associate Minister of Digital Government, announced that in collaboration with community partners, funding will be provided for initiatives to support Muslim students and families with an emphasis on enhancing resources and training for educators, targeted supports for students, and digital resources for parents.

According to the most up to date data from Statistics Canada, hate crimes have been on the rise in Canada, with a nine per cent increase in anti-Muslim attacks in 2019, when compared to the previous year. Tragic and disturbing reports and incidents across Canada and the world over the past years underscore the need for action.

“It is unacceptable that many Muslim students continue to face discrimination in our schools, on our playgrounds and in communities across this country,” said Minister Lecce. “That is why we are investing and partnering with community leaders — who are leading this effort— to counter racism and better support Ontario’s Muslim students and their families. For Premier Ford, Minister Rasheed and myself, we believe in our core that every student deserves to feel safe, respected, and engaged in learning in inclusive classrooms.”

As part of the Safe Return to Class fund, Ontario’s government is providing \$225,000 to the Muslim Association of Canada to create digital resources for educators, students and parents to raise awareness about Islamophobia. These resources will provide information about Islamic practices, values and misconceptions, root causes of Islamophobia and ways to help end Islamophobia, racism and discrimination.

Ontario is also providing \$75,000 to the National Council of Canadian Muslims to facilitate outreach and engagement with Muslim parents and families, with a focus on newcomer communities. These engagements will provide information on school supports and will provide culturally relevant resources to enhance well-being for families and help Muslim students prepare for the return to school in September.

Quick Facts

- In 2019, Ontario's government released a revised elementary Health and Physical Education (HPE) curriculum including new and enhanced learning related to healthy relationships, and how to be inclusive, respectful and accepting.
- As part of the Safe Return to Class Fund, the Ontario government is directing \$6.4 million to support equity-related projects. This includes funding to community organizations [to address anti-Asian hate](#), antisemitism, and Islamophobia, support for [Black](#), Indigenous and [2SLGBTQI+ students](#) as well as support for newcomer youth, parents and families to enhance access to school and community resources, and culturally appropriate mental health and well-being supports for youth, families and teachers.
- For the upcoming school year, Ontario's Priorities and Partnership Funding will include a fund of more than \$288 million for approximately 150 initiatives that include a focus on strengthening math skills, access to mental health supports, anti-racism and support for children with disabilities.
- It was recently announced by the government that for the 2021-2022 school year, mental health funding for students will rise to \$80 million, representing a four time increase from 2017-2018.
- In March 2021, the Ontario Government announced a two-year investment of \$1.6 million on a new Anti-Racism and Anti-Hate Grant Program that will focus on increasing awareness on the impact of racism and hate.
- On June 4, 2020, the government launched the Premier's Council on Equality of Opportunity, a new advisory group which provides advice on how young people can overcome social and economic barriers and achieve success.
- To support teacher hiring practices that are fair, consistent, and transparent, and to ensure a strong and equitable workforce for Ontario's publicly funded education system, Ontario replaced previous Hiring Practices regulation with [Policy and Program Memorandum No. 165: Teacher Hiring Practices](#). School boards are now able to hire based on merit, diversity and the unique needs of the school, while providing protocols to avoid concerns of nepotism.

Quotes

"Every student deserves the opportunity to learn and succeed in our schools, free from Islamophobia and any kind of hate or discrimination. Our government is committed to investing in initiatives that support our young people and work to ensure they feel safe and are successful, no matter their background. "

- Parm Gill
Minister of Multiculturalism and Citizenship

"No parent wants their child to experience the pain and humiliation of discrimination at any time, and especially not in the classroom. These initiatives in our schools and communities will help ensure that our students can thrive in an environment free of discrimination, so they can focus on learning and growing. We are sending a strong message that hate speech, bigotry, racism or discrimination of any kind will not be tolerated in Ontario's public schools and I thank the Minister for taking decisive action in this regard. "

- Kaleed Rasheed
MPP for Mississauga East-Cooksville and Associate Minister of Digital Government

"The National Council of Canadian Muslims welcomes further provincial funding to challenge Islamophobia across the education sector. This is an important first step as we recognize that systemic action and commitment is necessary to support the safety and wellbeing of staff, students and families. "

- Mustafa Farooq
Chief Executive Officer, National Council of Canadian Muslims

"MAC welcomes its partnership with the Ministry of Education to develop and deliver resources to counter Islamophobia through education and awareness for students, parents and educators. The horrific terror attack in London Ontario, that has left Muslim students across the province feeling vulnerable, has made this important initiative even more urgent. The Government of Ontario's approach to working with community organizations, like MAC, in addressing the challenges of Islamophobia is a step in the right direction. "

- Sharaf Sharafeldin
Executive Director of the Muslim Association of Canada

Additional Resources

[Historic Level of Public Education Funding With Additional Supports to Keep Students and Staff Safe](#)

[Education Funding, 2021-22](#)

[Developing and Implementing Equity and Inclusive Education Policies in Ontario Schools](#)



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We have recently updated Ontario Newsroom Subscription. You may receive additional emails. If you would like to update your subscription preferences or unsubscribe, click the 'manage your subscriptions' or 'unsubscribe' links down below.

MARIE PALOMBI

Ontario Catholic School Trustees' Association

1804 – 20 Eglinton Avenue West

Toronto, ON M4R 1K8

416-932-9460 Ext. 234 | Website: www.ocsta.on.ca

From: OCSTA - Marie Palombi <MPalombi@ocsta.on.ca>
Sent: Wednesday, June 30, 2021 12:26 PM
To: OCSTA - Marie Palombi <MPalombi@ocsta.on.ca>
Subject: OCSTA: Memo - Ontario Ombudsman's 2020-2021 Annual Report

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Ontario Catholic School
Trustees' Association

June 30, 2021

MEMORANDUM

TO: Chairpersons and Directors of Education
- All Catholic District School Boards

CC: OCSTA Directors and Staff
Board Secretaries and Administrative Assistants

FROM: Patrick J. Daly, President

SUBJECT: **Ontario Ombudsman's 2020-21 Annual Report**

On June 29, 2021 the Ontario Ombudsman released his Annual Report for the years 2020-2021. This memorandum provides a brief summary of the Report as it relates to issues affecting school boards.

Key Findings:

- 569 complaints were filed with the Ombudsman's office regarding school boards. 107 related to Ministry of Education's programs.
- The majority of complaints related to affects the pandemic had on students, such as the consequences of closing and/or reopening schools, the adequacy of masking, physical distancing and virtual schooling.

- Many complaints also related to assessments for students with special needs such as IPRC's and how to accommodate students with special needs in virtual classrooms.
- Complaints received about the conduct of Trustee's were generally referred to the board's internal processes. The Ombudsman recommends boards retain Integrity Commissioners to conduct reviews related to the conduct of Trustees.
- In response to a complaint from the French Catholic School Trustees' Association regarding MPAC's process to review school support designation, the Ombudsman urged MPAC to improve the accuracy of its school support designation process. With regard to this matter, OCSTA met with the Ombudsman last year and although not through a formal complaint, raised similar concerns.

For further details please see the following link to the full Annual Report:

<https://www.ombudsman.on.ca/resources/news/press-releases/2021/ombudsman%E2%80%99s-annual-report-stresses-essential%E2%80%9Doversight-of-public-sector-in-pandemic,-highlights-im>

If you have any questions or concerns, please contact me at pdaly@ocsta.on.ca or Steve Andrews at sandrews@ocsta.on.ca

MARIE PALOMBI
Ontario Catholic School Trustees' Association
1804 – 20 Eglinton Avenue West
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416-932-9460 Ext. 234 | Website: www.ocsta.on.ca



From: OCSTA - Marie Palombi <MPalombi@ocsta.on.ca>

Sent: Monday, July 5, 2021 9:54 AM

To: OCSTA - Marie Palombi <MPalombi@ocsta.on.ca>

Subject: OCSTA: Memo re: Reciprocal Education Approach - Regulation Update

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Ontario Catholic School
Trustees' Association

July 5, 2021

MEMORANDUM

TO: Chairpersons and Directors of Education
- All Catholic District School Boards

CC: OCSTA Directors and Staff
Board Secretaries and Administrative Assistants

FROM: Patrick J. Daly, President

SUBJECT: Reciprocal Education Approach—Regulation Update

In early June 2021, the Ministry of Education released amendments to Ontario Regulation 261/19 (Reciprocal Education Approach). The amendments waive the requirement for First Nation operated schools listed in the regulation to submit documentation to the Ministry demonstrating school eligibility. These First Nation schools are no longer required to submit this documentation in order to be eligible for funding under the Reciprocal Education Approach (REA) in the 2020-21 school year and future years.

Please find attached Ontario Regulation 261/19, for your reference.

If you have any questions or concerns, please contact me at pdaly@ocsta.on.ca or Steve Andrews at sandrews@ocsta.on.ca.

A handwritten signature in black ink, appearing to read 'Marie Palombi', with a stylized, cursive script.

MARIE PALOMBI
Ontario Catholic School Trustees' Association
1804 – 20 Eglinton Avenue West
Toronto, ON M4R 1K8
416-932-9460 Ext. 234 | Website: www.ocsta.on.ca

Education Act

ONTARIO REGULATION 261/19 RECIPROCAL EDUCATION APPROACH

Consolidation Period: From June 10, 2021 to the [e-Laws currency date](#).

Last amendment: 456/21.

Legislative History: 235/20, 439/20, 456/21.

This is the English version of a bilingual regulation.

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PART I INTERPRETATION

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2. Prescribed persons
2.1 Prescribed persons re written notice
2.2 Indirect collection of personal information
3. Prescribed schools
4. Prescribed fees
5. Agreements
6. Set off
7. Transition

PART III SECTION 188 OF THE ACT

7.1 Prescribed persons re written notice
7.2 Indirect collection of personal information
8. Prescribed services and supports
9. Agreements
10. Transition

PART I INTERPRETATION

Definitions

1. In this Regulation,

“fees regulation” means a regulation made under subsection 11 (3) of the Act for a given school board fiscal year; (“règlement sur les droits”)

“full-time coefficient” means the number calculated in accordance with subsection 4 (2); (“coefficient temps plein”)

“guardian” has the same additional meaning as set out in section 18 of the Act; (“tuteur”)

“isolate board” means a school authority that is not a school board established under section 68 of the Act; (“conseil isolé”)

“legislative grant regulation” means a regulation made under subsection 234 (1) of the Act for the given school board fiscal year; (“règlement sur les subventions générales”)

“prescribed person” means a person prescribed under section 2. (“personne prescrite”)

PART II SECTION 185 OF THE ACT

Prescribed persons

2. (1) Subject to subsection (2), a person is prescribed for the purposes of section 185 of the Act if the following conditions are met:

1. The person is under 21 years of age.

2. The person is a resident of Ontario.

(2) Subsection (1) does not apply to a person if,

- (a) the person is a registered Indian residing on a reserve within the meaning of the *Indian Act* (Canada), other than a person who is, or whose parent or guardian is, an owner or tenant of property within the area of jurisdiction of the board that is assessed for an amount not less than the assessment limit for the school board fiscal year set out in section 1 of Ontario Regulation 471/98 (School Attendance Rights — Non-Resident Property Owners) made under the Act;
- (b) the person is liable to pay fees as specified under subsection 49 (6) of the Act; or
- (c) the person does not have any parents or guardians who reside in Ontario and was not counted as a pupil of a board for the purposes of the previous fiscal year.

(3) For the purposes of paragraph 1 of subsection (1), a person who turns 21 years old on or after January 1 of a given school year is deemed to be under 21 years of age.

Prescribed persons re written notice

2.1 The following persons are prescribed for the purposes of subparagraph 3 iv of subsection 185 (1) of the Act as persons who may provide written notice in respect of a pupil or person described in section 2, provided that the person providing notice is at least 18 years of age:

- 1. A person who is authorized by a person referred to in subparagraph 3 i, ii or iii of subsection 185 (1) of the Act to provide such notice.
- 2. A person who facilitates the pupil or person's access to education.
- 3. A person from the pupil or person's extended family, as defined in the *Child, Youth and Family Services Act, 2017*. O. Reg. 439/20, s. 1.

Indirect collection of personal information

2.2 When written notice is provided by a person described in section 2.1 in respect of a pupil or person, a board may indirectly collect the personal information about the pupil or person that is contained in the written notice. O. Reg. 439/20, s. 1.

Prescribed schools

3. (1) Each school listed in Table 1 of this section is prescribed for the purposes of section 185 of the Act in respect of the 2019-2020 school year and each subsequent school year. O. Reg. 261/19, s. 3 (1).

(2) REVOKED: O. Reg. 456/21, s. 1 (1).

(3) A school is prescribed for the purposes of section 185 of the Act in respect of a given school year and each subsequent school year if the school satisfies the following conditions after October 30 of the previous school year and before October 31 of the given school year:

- 1. The school does not charge tuition fees to its pupils or to the parents or guardians of its pupils.
- 2. If the school is operated by an entity referred to in paragraph 1 of subsection 185 (1) of the Act, other than an entity that participates in the Anishinabek Education System,
 - i. the school is located in Ontario, and
 - ii. the entity provides documentation to the Minister demonstrating that the school is operated by the entity and is compliant with paragraph 1 of this subsection.
- 3. If the school is operated by an entity referred to in paragraph 1 of subsection 185 (1) of the Act that participates in the Anishinabek Education System, the entity provides documentation to the Minister demonstrating that the school is compliant with paragraph 1 of this subsection. O. Reg. 235/20, s. 1 (2).

(4) For greater certainty, a tuition fee referred to in paragraph 1 of subsection (3) does not include a fee charged in respect of boarding, lodging or transportation. O. Reg. 261/19, s. 3 (4).

TABLE 1

Item	Column 1 Name of school	Column 2 First Nation community, town or city
1.	Aamjiwnaang Binoojiinyag Kino Maagewgamgoons Day Care and JK/SK Preschool	Sarnia
2.	Adult Learning Centre	Beausoleil First Nation
3.	Adults in Motion Private School	Garden River First Nation
4.	Aglace Chapman Education Centre	Big Trout Lake First Nation (Kitchenuhmaykoosib Inninuwug)
5.	Antler River Elementary School	Chippewas of the Thames First Nation
6.	Baibombeh Anishinabe School	Naotkamegwaning First Nation

		(Pawitik)
7.	Batchewana Learning Centre	Sault Ste Marie
8.	Biinjitiwaabik Zaaging Anishinaabek School	Biinjitiwabik Zaaging Anishinaabek First Nation (Rocky Bay Reserve)
9.	Bimose Community High School	Kenora
10.	Bkejwanong Kinomaagewgamig	Walpole Island First Nation
11.	Chief Simeon McKay Education Centre	Kasabonika First Nation
12.	Christian Island Elementary School	Beausoleil First Nation
13.	Deer Lake First Nations (David Meekis)	Deer Lake First Nation
14.	Delores D. Echum Composite	Moose Factory
15.	Dennis Franklin Cromarty High School	Thunder Bay
16.	Dokis Indian Day School Kikendawt Kinoomaadii Gaming	Dokis First Nation
17.	Eenchokay Birchstick	Pikangikum First Nation
18.	Emily C. General Elementary School	Ohsweken
19.	Endzhi-gkinoohmaading (Elementary School)	Biigtigong Nishnaabeg
20.	Francine J. Wesley Secondary School	Kashechewan First Nation
21.	Gaageekiizhik School	Kenora
22.	I.L. Thomas Odadrihonyanita Elementary School	Ohsweken
23.	I.R. Churchill Elementary School	Lac des Mille Lacs First Nation - Thunder Bay
24.	J.C. Hill Elementary School Six Nations	Ohsweken
25.	Jamieson Elementary School	Ohsweken
26.	John C Yesno Education Centre	Eabamet Lake (Eabametoong First Nation)
27.	Kawenni:io/Gaweni:yo High School	Ohsweken
28.	Keewaytinook Internet High School	Bearskin Lake First Nation
29.	Keewaytinook Internet High School	Deer Lake First Nation
30.	Keewaytinook Internet High School	Fort Severn First Nation
31.	Keewaytinook Internet High School	Fort William First Nation
32.	Keewaytinook Internet High School	Keewaywin First Nation
33.	Keewaytinook Internet High School	Mattagami First Nation
34.	Keewaytinook Internet High School	McDowell Lake First Nation (Thunder Bay and Red Lake sites)
35.	Keewaytinook Internet High School	Mishkeegogamang First Nation
36.	Keewaytinook Internet High School	Nibinamik First Nation
37.	Keewaytinook Internet High School	North Spirit Lake First Nation
38.	Keewaytinook Internet High School	Poplar Hill First Nation
39.	Keewaytinook Internet High School	Sachigo Lake First Nation
40.	Keewaytinook Internet High School	Weagamow Lake First Nation
41.	Keewaytinook Internet High School	Webequie First Nation
42.	Kenjgewin Teg Educational Institute	M'Chigeeng First Nation
43.	Kinomaugewgamik School	Wasauksing First Nation
44.	Lydia Lois Beardy Memorial	Wunnumin Lake First Nation
45.	Mamawmatawa Holistic Education Centre	Constance Lake First Nation
46.	Matawa Education & Care Centre	Thunder Bay
47.	Migizi Miigwanan Secondary School	Long Lake #58 First Nation
48.	Migizi Wazisin Elementary School	Long Lake #58 First Nation
49.	Mikinaak Onigaming School	Nestor Falls
50.	Mississauga First Nation Adult Education	Blind River
51.	Mizhakiwetung Memorial	Whitedog
52.	Mnjikaning Kendaaswin Elementary School	Chippewas of Rama First Nation
53.	Morris Thomas Memorial School	Lac Seul First Nation
54.	Mundo Peetabeck Academy	Fort Albany First Nation
55.	Nbisiing Secondary School	Nipissing First Nation
56.	Netamisakomik Education Centre	Pic Mobert First Nation
57.	Obishikokaang Elementary School	Lac Seul First Nation
58.	Ohahase Education Centre	Tyendinaga Mohawk Territory (Mohawks of the Bay of Quinte)
59.	Oliver M. Smith Kawenni:io Elementary School	Ohsweken
60.	Pelican Falls First Nations High School	Sioux Lookout
61.	Pic River High School	Biigtigong Nishnaabeg
62.	Quinte Mohawk School	Tyendinaga Mohawk Territory (Mohawks of the Bay of Quinte)

63.	Sakatchewan Anishinabe	Grassy Narrows First Nation (Asubpeeschoseewagong Netum Anishinabek)
64.	Seven Generations Secondary School	Fort Frances
65.	Seventh Fire Secondary School	Lac des Mille Lacs First Nation - Thunder Bay
66.	Shawanosowe School	Whitefish River First Nation
67.	Simon Jacob Memorial Education Centre	Webequie First Nation
68.	Six Nations Polytechnic STEAM Academy	Brantford
69.	St. Joseph's Anishinabek School	Sheshegwaning First Nation
70.	Thomas Fiddler Memorial Private High School	Sandy Lake First Nation
71.	Vezina Secondary School	Attawapiskat First Nation
72.	Waabgon Gamig First Nation School	Chippewas of Georgina Island
73.	Wahsa Distance Education Centre	Sioux Lookout
74.	Waninitawingaang Memorial School	Lac Seul First Nation
75.	Wikwemikong High School	Wiikwemkoong Unceded Territory
76.	Zhingwaako Za'iganing School	Lac La Croix First Nation

O. Reg. 456/21, s. 1 (2).

TABLE 2 REVOKED: O. Reg. 456/21, s. 1 (2).

Prescribed fees

4. (1) For the purposes of subsection 185 (5) of the Act, the prescribed fee for a given school board fiscal year is the product of the following:

1. In respect of an elementary school pupil or prescribed person who is attending or is eligible to attend a school of a district school board,
 - i. the full-time coefficient of the pupil or prescribed person, and
 - ii. the base fee for an elementary school pupil, determined in accordance with the fees regulation.
2. In respect of a secondary school pupil or prescribed person who is attending or is eligible to attend a school of a district school board,
 - i. the full-time coefficient of the pupil or prescribed person, and
 - ii. the base fee for a secondary school pupil, determined in accordance with the fees regulation.
3. In respect of a pupil or prescribed person who is attending or is eligible to attend a school of an isolate board,
 - i. the full-time coefficient of the pupil or prescribed person, and
 - ii. the base fee for a pupil who is enrolled in a school operated by an isolate board, determined in accordance with the fees regulation.

(2) For the purposes of this section, the full-time coefficient of a pupil or a prescribed person is determined as follows:

1. On October 31 of a given school year, determine a number as follows:
 - i. Subject to subsection (3), determine the number of minutes in which the pupil or prescribed person is enrolled in a day school program on that day, or on the next school day that immediately follows October 31 if October 31 is a school holiday.
 - ii. If the number determined under subparagraph i is less than 210, divide the number by 300.
 - iii. If the number determined under subparagraph i is equal to or greater than 210, the number is deemed to be one.
2. Multiply the number determined under paragraph 1 by 0.5.
3. On March 31 of a given school year, determine a number as follows:
 - i. Subject to subsection (3), determine the number of minutes in which the pupil or prescribed person is enrolled in a day school program on that day, or on the next school day that immediately follows March 31 if March 31 is a school holiday.
 - ii. If the number determined under subparagraph i is less than 210, divide the number by 300.
 - iii. If the number determined under subparagraph i is equal to or greater than 210, the number is deemed to be one.
4. Multiply the number determined under paragraph 3 by 0.5.

5. Take the total of the numbers determined under paragraphs 2 and 4.
- (3) The minutes referred to in subparagraphs 1 i and 3 i of subsection (2) exclude,
 - (a) recesses;
 - (b) lunch breaks; and
 - (c) scheduled intervals between classes or programs offered by the school.

Agreements

5. An agreement referred to in subsection 185 (6) of the Act shall contain the following terms:

1. The amount payable each school year for each pupil or prescribed person in respect of additional special education staffing required to support the health and safety of the pupil or prescribed person shall be the amount agreed upon under this agreement, which shall not exceed the maximum amount the board is entitled to receive under the special incidence claim (part of the special education allocation) provision of the legislative grant regulation.
2. The deductible that an entity referred to in paragraph 1 of subsection 185 (1) of the Act shall pay each school year for each pupil or prescribed person in respect of special education equipment required to support a pupil or prescribed person shall be the amount agreed upon under this agreement, which shall not exceed \$800.

Set off

6. (1) If an entity referred to in paragraph 1 of subsection 185 (1) of the Act owes fees in respect of the base fee under section 188 of the Act for a period that starts on or after September 1, 2019, a school board may reduce the amount it pays to that entity under this Part by the amount that is owed.

(2) A board shall not charge interest in respect of any amounts owed by an entity referred to in subsection (1).

Transition

7. (1) An agreement entered into under section 185 of the Act on or before August 31, 2019 shall be deemed to include a condition that the fee in a given school board fiscal year that is to be paid by the board in respect of a pupil or prescribed person who attends a school on or after September 1, 2019 shall be at least the applicable fee set out in subsection 4 (1) of this Regulation.

(2) For the purposes of clause 185 (9) (a) of the Act, the prescribed day is the day a party to an agreement terminates the agreement by exercising their termination rights under the agreement.

PART III SECTION 188 OF THE ACT

Prescribed persons re written notice

7.1 The following persons are prescribed for the purposes of subparagraph 2 iv of subsection 188 (1) of the Act as persons who may provide written notice in respect of a pupil, provided that the person is at least 18 years of age:

1. A person who is authorized by a person referred to in subparagraph 2 i, ii or iii of subsection 188 (1) of the Act to provide such notice.
2. A person who facilitates the pupil's access to education.
3. A person from the pupil's extended family, as defined in the *Child, Youth and Family Services Act, 2017*. O. Reg. 439/20, s. 2.

Indirect collection of personal information

7.2 When written notice is provided by a person described in section 7.1 in respect of a pupil, a board may indirectly collect the personal information about the pupil that is contained in the written notice. O. Reg. 439/20, s. 2.

Prescribed services and supports

8. (1) For the purposes of subsection 188 (1.6) of the Act, if an agreement is entered into under subsection 188 (1.7) of the Act, the following prescribed services and supports may be provided to a pupil admitted under subsection 188 (1) of the Act:

1. Additional special education staffing required to support the health and safety of the pupil.
2. Special education equipment required to support the pupil.
3. Transportation services provided to the pupil.
4. Indigenous languages course or Indigenous studies course, if the course is not offered at the school to which the pupil would be admitted.

(2) The additional staffing referred to in paragraph 1 of subsection (1) must be a type of expense that a board would be eligible to claim under the special incidence claim (part of the special education allocation) provision of the legislative grant regulation.

(3) The equipment referred to in paragraph 2 of subsection (1) must be an expense that a board would be eligible to claim under the special equipment claim (part of the special equipment amount of the special education allocation) provision of the legislative grant regulation.

Agreements

9. An agreement entered into under subsection 188 (1.7) of the Act shall contain the following terms:

1. The amount payable each school year for each pupil in respect of additional special education staffing required to support the health and safety of the pupil shall be the amount agreed upon under this agreement, which shall not exceed the maximum amount the board is entitled to receive under the special incidence claim (part of the special education allocation) provision of the legislative grant regulation.
2. The deductible that a board shall pay each school year for each pupil in respect of special education equipment required to support a pupil shall be the amount agreed upon under this agreement, which shall not exceed \$800.

Transition

10. (1) An agreement entered into under section 188 of the Act on or before August 31, 2019 shall be deemed to include a condition that the base fee in a given school board fiscal year that is to be paid by the First Nation in respect of a pupil who attends a school of a school board on or after September 1, 2019 shall be the applicable fee set out in the fees regulation.

(2) For the purposes of clause 188 (1.10) (a) of the Act, the prescribed day is the day a party to an agreement terminates the agreement by exercising their termination rights under the agreement.

PART IV (OMITTED)

11. OMITTED (PROVIDES FOR COMING INTO FORCE OF PROVISIONS OF THIS REGULATION).

Français

[Back to top](#)

From: OCSTA - Marie Palombi <MPalombi@ocsta.on.ca>

Sent: Tuesday, July 6, 2021 9:56 AM

To: OCSTA - Marie Palombi <MPalombi@ocsta.on.ca>

Subject: OCSTA: ON News Release - Ontario Acting to Combat Antisemitism in Schools

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Ontario Catholic School Trustees' Association

July 6, 2021

MEMORANDUM

TO: Chairpersons and Directors of Education
- All Catholic District School Boards

CC: OCSTA Directors and Staff
Board Secretaries and Administrative Assistants

FROM: Patrick J. Daly, President

SUBJECT: ON News Release – Ontario Acting to Combat Antisemitism in Schools

Please see attached Ontario News Release, sent to you for your information.

Ontario



NEWS RELEASE

[Ontario Acting to Combat Antisemitism in Schools](#)

Province's Partnership with Friends of Simon Wiesenthal Center for Holocaust Studies will Fight Hate and Discrimination

July 05, 2021

[Ministry of Education](#)

TORONTO — The Ontario government is investing in a plan to counter rising antisemitism in Canadian schools and communities. As part of this plan, the government announced new training initiatives and resources for educators and supports for students to combat antisemitism with an investment of \$327,000.

According to Statistics Canada, the number of police-reported incidents in Canada targeting the Jewish population in 2019 was 296, the largest number of any religious group.

Stephen Lecce, Minister of Education, joined by Robin Martin, MPP for Eglinton-Lawrence, and Gila Martow, MPP for Thornhill, made the announcement with the Friends of Simon Wiesenthal Center for Holocaust Studies.

“Antisemitism is a scourge and historic evil that must be eradicated from our schools, from our communities, and from the hearts of all Canadians,” said Minister Lecce.

As part of the Safe Return to Class fund, the Ontario government is providing the Friends of Simon Wiesenthal Center for Holocaust Studies with \$327,000 to support two summer learning programs:

- The ‘Unpacking Intolerance: Equity and Diversity Training for Educators’ program, which will provide professional development sessions to help educators learn about dismantling systems of oppression and antisemitism in homes, schools and communities.

Ontario



- The 'Tour for Humanity Virtual Summer Camp,' which will help students learn about human rights, dealing with injustice, and encourage ideas for creating positive change.

"We will fight antisemitism with every tool available to us to ensure Jewish students feel safe and supported in Ontario schools," added Minister Lecce. "That is why we are partnering with the Friends of Simon Wiesenthal Center for Holocaust Studies to strengthen training for educators and supports for students, with the aim of promoting respect for all students, irrespective of their faith or heritage."

In all, as part of the [Safe Return to Class Fund](#), the Ontario government is directing \$6.4 million toward equity-related projects, including funding to community organizations to address [anti-Asian racism](#), antisemitism, and [Islamophobia](#); support for [Black](#), Indigenous and [2SLGBTQI+](#) students; supports for newcomer parents and families to enhance access to school and community resources; and culturally appropriate mental health supports for youth, families and teachers.

Quick Facts

- For the upcoming school year, Ontario's Priorities and Partnership Funding (PPF) will include more than \$288 million of funding for approximately 150 initiatives that include a focus on strengthening math skills, access to mental health supports, anti-racism and support for children with disabilities.
- In March 2021, the Ontario Government announced a two-year investment of \$1.6 million on a new Anti-Racism and Anti-Hate Grant Program that will focus on increasing awareness on the impact of racism and hate.
- To hold educators accountable for racist remarks and behaviour, Ontario amended regulations to explicitly set out remarks and behaviours that expose persons to hatred based on a prohibited ground of discrimination under the *Human Rights Code* as acts of professional misconduct, effective November 5, 2020.
- To support teacher hiring practices that are fair, consistent, and transparent, and to ensure a strong and equitable workforce for Ontario's publicly funded education system, Ontario replaced previous regulation with [Policy and Program Memorandum No. 165: Teacher Hiring Practices](#). School boards are now able to hire based on merit, diversity and the unique needs of the school, while providing protocols to avoid concerns of nepotism.

Ontario



Quotes

"We are thankful to the Ontario government for the funding provided to our organization, which will help advance our work in delivering education programs that teach about the Holocaust, human rights and the importance of standing up against antisemitism and all forms of hate. Combatting hate starts with education. Amid rising antisemitism, it is so important for young people to learn about the consequences of hate and be both inspired and empowered to stand against it. "

- Michael Levitt

President and CEO, Friends of Simon Wiesenthal Center for Holocaust Studies

"No country is perfect, but what's unique about Canada is our ability to learn from previous mistakes. I'm proud our government is partnering with the Friends of Simon Wiesenthal Center for Holocaust Studies to help students and educators alike learn to identify the root causes of hate from a Canadian historical perspective, and equip them with the skills & knowledge necessary to prevent it from taking hold. "

- Gila Martow

MPP for Thornhill

"Last year, the Ontario Government formally adopted the International Holocaust Remembrance Alliance working definition of antisemitism. Now, we are taking concrete action to ensure our classrooms are safe learning environments for all students. Together, we will continue to stand against the scourge of antisemitism, hate and intolerance in all of its forms. "

- Robin Martin

MPP for Eglinton-Lawrence

Additional Resources

- [Historic Level of Public Education Funding With Additional Supports to Keep Students and Staff Safe](#)
- [Education Funding, 2021-22](#)
- [Developing and Implementing Equity and Inclusive Education Policies in Ontario Schools](#)



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From: OCSTA - Marie Palombi <MPalombi@ocsta.on.ca>

Sent: Tuesday, July 6, 2021 11:42 AM

To: OCSTA - Marie Palombi <MPalombi@ocsta.on.ca>

Subject: OCSTA: ON News Release - Ontario Acts to Protect Students from Sex Trafficking

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Ontario Catholic School
Trustees' Association

July 6, 2021

MEMORANDUM

TO: Chairpersons and Directors of Education
- All Catholic District School Boards

CC: OCSTA Directors and Staff
Board Secretaries and Administrative Assistants

FROM: Patrick J. Daly, President

SUBJECT: ON News Release – Ontario Acts to Protect Students from Sex Trafficking

Please see attached Ontario news release, sent to you for your information.



NEWS RELEASE

Ontario Acts to Protect Students from Sex Trafficking

\$2.4 million investment mandates all boards to implement anti-trafficking plan - the first-of-its-kind in Canada

July 06, 2021

[Ministry of Education](#)

TORONTO — The Ontario government is releasing a new policy framework, the first of its kind in Canada, as part of its strategy for school boards to protect students from the heinous crime of sex-trafficking. With the goal of keeping children and youth safe from sexual exploitation, this new strategy and framework recognizes the critical role schools can play in combatting sex-trafficking. Sadly, the majority of police reported trafficking in Canada takes place in Ontario.

The announcement was made by Stephen Lecce, Minister of Education, Sylvia Jones, Solicitor General, Jane McKenna, Associate Minister of Children and Women's Issues, Sam Oosterhoff, Parliamentary Assistant to the Minister of Education, Daisy Wai, MPP for Richmond Hill, and Laurie Scott, MPP for Haliburton—Kawartha Lakes—Brock, who were joined by Casandra Diamond, Founder and Director of BridgeNorth Women's Mentorship & Advocacy Service.

The Ontario government's strategy to support school boards in combatting sex-trafficking builds on the updated [Health and Physical Education curriculum](#) for Grades 1-8, announced by Minister Lecce in 2019. That updated curriculum positioned Ontario as a leader by including mandatory learning to protect students against sex trafficking. As part of its strategy to combat human trafficking, the new policy framework requires all school boards to have a plan and anti-human trafficking protocols in place to protect students.

To support implementation of this new initiative, the Ontario government is investing \$2.4 million in necessary training and resources. This will ensure school boards and school staff have the tools to recognize, identify, respond and prevent the sex trafficking of children and youth.

The [Keeping Students Safe – Policy Framework for School Board Anti-Sex Trafficking Protocols](#) sets a strong foundation for Ontario school boards to establish key



partnerships and regionally tailored anti-sex trafficking protocols. School boards will collaborate with community and police organizations with the goal of having protocols in place for all provincially-funded schools in January 2022.

The new effort outlines actions school boards must take to help protect students, including:

- Raising awareness and understanding of sex trafficking, including the urgency and complexity of combating sex trafficking.
- Supporting procedures for students who are at risk or being sex trafficked, or who may be grooming and recruiting other students.
- Training school board employees, educators and administrators and other school staff.
- Establishing approaches to support accountability and evaluation.

The announcement builds on the leading efforts the Ontario government is making to protect students from human trafficking and sexual exploitation through raising awareness, including:

- Learning related to sex trafficking in the elementary Health and Physical Education curriculum. With this mandatory learning, students develop the skills to help protect themselves against human trafficking and sexual exploitation.
- Funding the development of online educator resources and classroom resources focused on the prevention of sexual exploitation of children and youth.
- Developing Ontario's Human Trafficking Digital Education Tool: The Trap, and Speak Out: Stop Sex Trafficking, an Indigenous-focused awareness campaign.

Ontario's strategy to combat trafficking is informed by the Ministry of Education's Anti-Human Trafficking Working Group, which includes persons with lived experience of being trafficked, frontline community-based organizations that support survivors, Indigenous communities and organizations, representatives from Black and racialized communities, newcomers and students.

This school-based initiative is aligned with the Government of Ontario's robust [Anti-Human Trafficking Strategy](#), a comprehensive action plan to combat human trafficking and child sexual exploitation, which is co-led by the Solicitor General and the Associate Minister of Children and Women's Issues.

Ontario



Quick Facts

- Sex trafficking is a form of sexual exploitation and is a crime under the Criminal Code of Canada.
- The average age of recruitment into sex trafficking is 13 years old.
- Human trafficking is one of the fastest-growing crimes worldwide. Ontario is a hub for human trafficking, with the most police-reported incidents of human trafficking in the country occurring within the province in 2019, accounting for approximately 55 per cent of all police-reported incidents of human trafficking nationally.
- In 2019, over 70 per cent of human trafficking victims identified by police were under the age of 25 and 21 per cent were under the age of 18.
- In December 2020, the legislature passed a motion urging the government to mandate that school boards, community police services and others work together to develop and adopt an Anti-Human Trafficking Protocol in each jurisdiction.
- While some boards are providing training and supporting anti-sex trafficking work, the York Region District School Board is the only board in Ontario identified to have an anti-sex trafficking protocol currently in place.
- White Ribbon developed a Ministry of Education-funded digital resource connected to the Ontario curriculum on the prevention of sexual exploitation for delivery in Ontario secondary schools. The resource aims to raise awareness among educators and students, so they are equipped with the skills and knowledge to recognize and prevent sexual exploitation.

Quotes

"This announcement fully demonstrates that the Ministry of Education - a key partner in the fight against human trafficking - takes student safety and well-being seriously. Having long believed that education is the only way to prevent this awful crime from victimizing children and youth, today's announcement gives me hope for the future. "

- Casandra Diamond

Founder & Director, BridgeNorth Women's Mentorship & Advocacy Services

"Sex trafficking is an evil crime that preys on children and our most vulnerable. While we continue to crack down on violent offenders, we are focused on the prevention of this crime – and that starts in Ontario schools. Ontario is now the first province in Canada to require an anti-sex trafficking strategy in all school boards – for every provincially funded school, in all regions of our province. Ontario schools will



increasingly play a critical role in preventing, identifying and recognizing the signs of sex trafficking with a singular focus on protecting your child's safety. "

- Stephen Lecce
Minister of Education

"Today's announcement further underlines our government's commitment to end human trafficking and reinforces our pledge to build awareness, protect victims, provide support for survivors and hold offenders accountable. This new framework, coupled with Ontario's Anti-Human Trafficking strategy and newly passed Combating Human Trafficking Act will help prevent and respond to the threat of sex trafficking of school-aged children and youth and support our efforts to fight this heinous crime. "

- Sylvia Jones
Solicitor General

"Sadly, children and youth are targeted by traffickers seeking to sexually exploit vulnerable people. Our schools are uniquely positioned to help spot the warning signs early, so we can prevent this crime and keep our students safe. This anti-sex trafficking framework is another important step in our work to combat sex trafficking and protect children and youth across the province. "

- Jane McKenna
Associate Minister of Children and Women's Issues

"Addressing this tragic crime with compassion and conviction means all government ministries have to work together to better support survivors, and help those trafficked. This protocol and funding will encourage and support more active work on this important file, assisting our partners in community and school boards to end the scourge of sex-trafficking, while supporting survivors. "

- Sam Oosterhoff
Parliamentary Assistant to the Minister of Education

Additional Resources

- [Ontario's Anti-Sex Trafficking Plan for School Boards](#)
- [Ontario Passes Bill to Strengthen the Fight Against Human Trafficking](#)
- [Keeping Students Safe – Policy Framework for School Board Anti-Sex Trafficking Protocols](#)
- [White Ribbon's digital resource](#) (funded by the Ministry of Education)
- [Ontario's Human Trafficking Digital Education Tool: The Trap](#)
- [Speak Out: Stop Sex Trafficking](#) (Indigenous-focused awareness campaign)



- [Ontario's Anti-Human Trafficking Strategy](#)
- [Ontario's Health and Physical Education Curriculum](#)

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SCIENCE BRIEFS

School Operation for the 2021-2022 Academic Year in the Context of the COVID-19 Pandemic

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Key Message

In-person learning is essential for the learning and overall well-being of children and youth. Therefore, barring catastrophic circumstances, schools should remain open for in-person learning.

The level of community COVID-19 burden should inform the degree of school-based measures: the provided framework should be implemented at the regional level by public health units, considering local vaccination coverage rate and metrics of COVID-19 disease severity and to a lesser extent, SARS-CoV-2 transmission rate.

Permanent measures that support the ongoing operation of schools, irrespective of the COVID-19 pandemic, include vaccination of all eligible individuals, exclusion of sick students and staff, hand hygiene, adequate ventilation, and environmental cleaning.

Temporary measures (e.g., masking, physical distancing, cohorting) implemented in response to changes in COVID-19 disease burden should take into consideration student age, grade, and vaccination status.

Re-initiation and maintenance of extracurricular activities (e.g., music, sports, clubs) is an important component of return-to-school plans.

Summary

The physical, emotional, and developmental health of children and youth has been deeply impacted by the COVID-19 pandemic and restrictions placed on schools. School disruptions, including school closures and implementation of education models that have reduced direct interaction between children, their peers, and their teachers (e.g., online learning), have led to significant learning disruption, exacerbated educational inequities and deprived children of other supports and activities available through schools including food programs, physical activity and sports and clubs and teams.

It is therefore essential that moving forward the needs of students be prioritized to ensure sustained in-person school attendance and in-person learning. School

Version: 1.0

Published: July 19, 2021

Citation: Science M, Thampi N, Bitnun A, et al. School Operation for the 2021-2022 Academic Year in the Context of the COVID-19 Pandemic. *Science Briefs of the Ontario COVID-19 Science Advisory Table*. 2(38). <https://doi.org/10.47326/ocsat.2021.02.38.1.0>

Author Affiliations: The affiliations of the members of the Ontario COVID-19 Science Advisory Table can be found at <https://covid19-sciencetable.ca/>.

Declarations of Interest: The declarations of interest of the members of the Ontario COVID-19 Science Advisory Table, its Working Groups, or its partners can be found at <https://covid19-sciencetable.ca/>. The declarations of interest of external authors can be found under additional resources at <https://doi.org/10.47326/ocsat.2021.02.38.1.0>

About Us: The Ontario COVID-19 Science Advisory Table is a group of scientific experts and health system leaders who evaluate and report on emerging evidence relevant to the COVID-19 pandemic, to inform Ontario's response. Our mandate is to provide weekly summaries of relevant scientific evidence for the COVID-19 Health Coordination Table of the Province of Ontario, integrating information from existing scientific tables, Ontario's universities and agencies, and the best global evidence. The Science Table summarizes its findings for the Health Coordination Table and the public in [Science Briefs](#).

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closures, and the various distance learning strategies deployed to ensure educational continuity, should be part of a pandemic control strategy in only the most catastrophic of circumstances.

Given the high uptake of COVID-19 [vaccines](#) in Ontario, it is anticipated that SARS-CoV-2 transmission and severe disease requiring hospitalization will be substantially curtailed by September 2021; thus, the approach to school-based mitigation can be adjusted to reflect community risk. Emphasis should be placed on permanent measures that can aid in reducing infection transmission in general, including staying home when sick, achieving and maintaining adequate indoor air quality, environmental cleaning, and hand hygiene. Temporary mitigation measures, including active symptom-based screening, testing and [contact tracing](#), use of non-medical or medical masks, physical distancing, and cohorting should be adjusted in accordance with COVID-19 disease burden.

With this in mind, we have defined three broad scenarios of COVID-19 disease burden: (1) low-risk, where severe disease requiring hospitalization is limited and sporadic; (2) moderate-risk, where there is early evidence of an upward trajectory in severe disease requiring hospitalization; and (3) high-risk, where there are high rates and continued upward trajectory of severe disease requiring hospitalization. SARS-CoV-2 transmission is an important secondary factor that can be considered in defining community risk, particularly early in the school year.

In the low-risk scenario, recommendations on temporary measures in the school environment include a strategy for contact tracing and low-barrier testing as an early warning system for emerging SARS-CoV-2 variants and increased transmission, a permissive approach to masking, and no requirement for physical distancing or cohorting.

In the moderate and high-risk scenarios, an increase in temporary measures would be warranted in schools, with emphasis on cohorting and age-dependent masking in kindergarten and elementary school students (without the need for physical distancing) and on masking with or without physical distancing (without the need for cohorting) in middle and high school students. It is recognized that individual jurisdictions in a low-risk scenario in September 2021 may choose more relaxed or more strict temporary measures depending on their local circumstances.

- Value of In-Person Learning
- Understanding of SARS-CoV-2
- Permanent and Temporary Infection Prevention and Control Measures in Schools
- Special Considerations for Schools in Rural, Remote, and Indigenous Communities
- Special Considerations for Children and Youth With Medical, Physical, and Developmental Complexities
- Vaccination
- Symptom and Exposure Screening
- SARS-CoV-2 Testing for Schools
- Hand Hygiene
- Achieving Adequate Indoor Air Quality through Ventilation and/or Filtration
- Environmental Cleaning
- Masking
- Physical Distancing
- Cohorting
- In-Person School Gatherings, Activities, and Lunch Hour
- Transportation to School

Box 1. Topics Covered in this Science Brief

Background

The goal of this document is to provide guidance to policymakers on COVID-19 mitigation measures for kindergarten-to-grade 12 schools for September 2021. The document is anchored in the core principle that in-person learning is essential for children and youth and provides guidance on health and safety measures to support in-person education delivery and recovery strategies for September 2021 and beyond. It acknowledges that there is a range of risk tolerance both at the individual and community levels and provides a framework to adapt measures taking into consideration the community epidemiology, community readiness and information gained as the province and other jurisdictions re-open. While several jurisdictions are moving to focus on disease severity and health care system capacity as the predominant metrics for adjusting measures, we recognize that SARS-CoV-2 transmission is still of concern to many Ontarians. With this in mind, the framework considers moderate to severe disease resulting in hospital or ICU admissions as the primary metric used to determine the need to adjust mitigation measures but also considers transmission ([effective reproduction number](#), R_t) an important secondary metric. It is anticipated that the importance of transmission as a metric will be reduced when re-opening of society is not associated with a substantial increase in SARS-CoV-2 related hospitalizations despite increasing case numbers, due to a high proportion of the population being fully vaccinated.

Several important domains related to education and children are not covered in detail in this document. A separate comprehensive guidance document covering the need for mental health awareness and support for all children is in development. Similarly, the importance of a strategy to manage the educational losses experienced thus far by some children is covered in a separate Science Brief.¹ We do not address curricular reforms in this document. It must be recognized, however, that a period of (re-)adjustment for students and staff will be necessary at the beginning of the school year to: 1) address children's mental health concerns and anxieties; 2) allow time for children to readjust to behavioural norms associated with in-class learning; and 3) support students who require school-based rehabilitation supports (e.g. physiotherapy, occupational therapy, speech and language therapy) and who may have fallen behind or regressed in their goals/abilities/health status. Children who may have fallen behind in their learning will need additional time and attention throughout the year.

This document was created by an interdisciplinary group of experts in pediatrics, infectious diseases, infection prevention and control, education, epidemiology, environmental and occupational health, indoor air quality, public health, school health, psychiatry and mental health, rural health, and Indigenous health. There was broad stakeholder engagement that included children's hospitals in Ontario (The Hospital for Sick Children (SickKids), Children's Hospital of Eastern Ontario (CHEO), McMaster Children's Hospital, Kingston Health Sciences Centre, Holland Bloorview Kids Rehabilitation Hospital, London Health Sciences Centre, and Unity Health Toronto), education administration (school boards, principals), the school community (educators, parents, and students), and members of the Ontario COVID-19 Science Advisory Table.

Given that educators of elementary and secondary school students are best positioned to appreciate the operational and logistical considerations in adapting school and class routines to incorporate health and safety protocols, the following is not intended as an exhaustive school guidance document or implementation strategy. The ongoing safe operation of schools is the primary responsibility of the Ministry of Education and should include input from several key stakeholders, including the Chief Medical Officer of Health, Ministry of Health, Ministry of Labour, public health authorities,

teachers and other educators, principals, other school-related authorities, parents, and children.

The recommendations in this document were drafted, reviewed, and approved by the authors. Evidence from the literature was routinely reviewed and used to form the basis of recommendations. However, several statements are made based on expert opinion with the rationale provided and evidence gaps highlighted. Recommendations may need to be adjusted as new evidence emerges.

Findings

Value of In-Person Learning

There is broad recognition that education is children's 'essential work' and that schools are of critical importance to students' learning and overall well-being. The Secretary-General of the United Nations described the impact of COVID-19-related school closures as a 'generational catastrophe'.² Ontario has had the longest interruption of face-to-face learning in Canada.¹ In-person schooling is optimal for the vast majority of students because it enables access to a wide range of academic and social-emotional learning opportunities, promotes play, positive peer relationships, physical activity, and positive mental health. In-person schooling may contribute to other essentials, including nutrition, security, and health. Schools are also key sites to connect children and families with community, mental health, and developmental services. In addition, schools play a key role in enabling parents to work, particularly promoting labour participation of women and front-line service workers.³

Globally, school closures and transitions of entire classes or cohorts to remote learning led to the deployment of various distance learning strategies to enable educational continuity.⁴ Strategies in Ontario included synchronous or asynchronous classes taught online through a Learning Management System (LMS) or by using videoconferencing tools. In some cases, they were delivered through emails and print materials. Evidence from studies on school closures within Ontario, and in similar systems with shorter disruptions and with similar emergency virtual learning strategies indicate discernable learning losses.^{5,6} However, negative effects have been more pronounced in communities and individuals most affected by COVID-19, and for those in pre-existing vulnerable circumstances.⁷ Comprehensive systems-level provincial data for Ontario are lacking. However, a simulation study with 157 countries predicted that, in high-income countries, generally assumed to be the best served, education continuity measures such as emergency remote digital learning would only mitigate between 15% to 60% of learning losses incurred.⁸ Furthermore, evidence from seven European countries with relatively well-resourced and broadly covered education systems found parental and child experiences of emergency home-schooling measures with distance virtual learning to be negative.⁹

There is increasing evidence that school closures and elimination of extracurricular activities for children have had substantial deleterious impact on their physical and mental health.^{10,11} Parents report worsening mental health and ability to cope on the part of their children.¹²⁻¹⁴ High rates of anxiety and depression have been observed across children of all ages, with adverse psychological impacts, particularly among older children and adolescents compared to pre-pandemic periods.^{10,15,16} There has been a substantial increase in emergency department visits and hospitalizations for eating disorders.¹⁷ The loss of access to school-based healthcare services, special services for children with disabilities, and nutritional programs has profoundly affected the most vulnerable of children.¹⁸ Substantial disruptions to critical developmental milestones, including increase in speech delay, have been seen, and children have missed out on opportunities for skill development.¹⁹ Adverse general health effects,

including increased sedentary behaviour and screen time, decreased physical activity, increased rates of child maltreatment, and delayed presentation with serious medical conditions, such as diabetic ketoacidosis, have also been noted.^{11,20}

It is therefore essential, that moving forward, the educational, physical, and mental needs of students be highly prioritized and protected to ensure sustained in-person school attendance and in-person learning. School closures, or transition to an online learning model, should not be used as a public health measure for pandemic control. Community-based public health measures (such as closure of non-essential workplaces, indoor capacity restrictions, use of non-medical or medical masks, testing, contact tracing, stay at home orders, travel restrictions) should be the preferred mechanisms for pandemic control. These restrictions should be employed for pandemic control in communities while schools continue to operate for in-person learning with appropriate mitigation measures in place, as outlined in this document.

School closures and transitions to remote learning should only be considered under a catastrophic scenario,^{21,22} based on the recommendation of the Chief Medical Officer of Health, when there is a clear signal of harm (morbidity and/or mortality) to children or the community at large that is directly attributable to children attending school for in-person learning despite the use of all available mitigation strategies, or when the harms associated with remote learning for students and their families are outweighed by identified health risks of in-person learning.

Current Understanding of SARS-CoV-2 as it Relates to Children and Education

SARS-CoV-2 is now widespread in almost all parts of the world, and its complete eradication is unlikely. Nevertheless, it is anticipated that the establishment of high levels of immunity in the general population through widespread immunization, and to a lesser extent, natural infection, will curtail infection rates and the adverse health impacts of SARS-CoV-2 on individuals and society to such an extent that full societal reopening is eventually feasible.²³ Multiple factors will need to be taken into account on recommending the lifting of all pandemic-related restrictions in schools, including SARS-CoV-2 **prevalence** in the community, characteristics of the prevalent variants of concern (VOC; in particular immune/vaccine escape, but also transmissibility and disease severity), COVID-19 vaccine eligibility and uptake rates, and the degree to which vaccines protect against infection and severe disease.

It is expected that SARS-CoV-2 infections will continue to occur in the community as well as in schools. However, provided that the majority of infections continue to be associated with **asymptomatic** or mild disease in children and youth, and assuming that the broader community impact is manageable (i.e., no variant with vaccine escape leading to a substantial increase in hospitalizations/severe disease), the health and safety measures in schools can be adjusted to optimize the overall health, well-being, and learning for children and youth, while maintaining an in-person school model. It is essential in this context that there are mechanisms in place at local, regional and provincial levels to (1) promptly identify circulation of new VOCs associated with increasing transmission and/or disease severity; (2) monitor for any changes in the acute and chronic impacts of SARS-CoV-2 infection in children and youth; and (3) monitor the impacts of loosening restrictions in school and non-school settings on the risk of SARS-CoV-2 spread in the community, in households, and on the introduction and spread of SARS-CoV-2 in schools.

COVID-19 Disease in Children and Youth

The majority of children and youth who become infected with SARS-CoV-2 are either asymptomatic or have mild, self-limited symptoms such as cough, nasal congestion, runny nose, sore throat, fever, or gastrointestinal symptoms such as abdominal pain or diarrhea.²⁴⁻²⁸ Severe acute disease requiring intensive care has been described in a

small minority of pediatric cases (0.06% of confirmed COVID-19 cases in children under 19 years of age in Canada),²⁹ particularly among those with certain underlying medical conditions,³⁰ but even in these patients the clinical course is usually much less severe than in adults, and deaths are extremely rare.³¹⁻³⁵ In Canada, as of July 2, 2021, there have been 14 reported pediatric deaths out of 272,257 reported pediatric COVID-19 cases.²⁹ The multisystem inflammatory syndrome in children (MIS-C) is an uncommon but serious post-infectious condition attributable to SARS-CoV-2 infection with an overall mortality of up to 2%, and responsive to immune modulating treatments.³⁶⁻⁴¹ A recent population-based study in the US estimated the rate of MIS-C at 1 in 3,100 SARS-CoV-2 infections in persons younger than 21 years.⁴² At the present time there is no evidence in children to suggest that acute COVID-19 or MIS-C due to SARS-CoV-2 VOCs is more severe or frequent than that caused by non-VOC SARS-CoV-2.

While severe outcomes from acute COVID-19 in children are rare, it is important to monitor the frequency and severity of post-acute long-term sequelae of COVID-19 ([long COVID](#)) in children, and to follow its trends relative to other post-infectious syndromes (e.g., following gastroenteritis, infectious mononucleosis, and Lyme disease). In the UK, self-reported persistence of symptoms at 12 weeks after experiencing acute COVID-19 was 10% (95% [Confidence Interval](#) (CI): 5, 14) for children 2-11 years of age and 16% (95% CI: 12, 20) for children 12-16 years of age.⁴³ In contrast, in a U.S. study involving 2,368 match-pairs of children, those with COVID-19 were no more likely to experience new diagnoses during the four-month follow-up period than children without COVID-19.⁴⁴ Furthermore, a large cohort study of children in the United Kingdom found that only 1.8% of children had one or more residual symptoms (compared to 0.9% of SARS-CoV-2 negative controls) two months after their acute illness.⁴⁵ Ongoing research into longer-term morbidities in children after SARS-CoV-2 infection is warranted, though findings so far are reassuring.^{46,47}

SARS-CoV-2 Epidemiologic Projections

Based on emerging data from other jurisdictions, the most reasonable assumption is that the Delta variant or other more transmissible variants will continue to be the dominant circulating strains of SARS-CoV-2 in Ontario over the coming months.⁴⁸ Given the overdispersion of [R0](#) originally described for SARS-CoV-2, most children with SARS-CoV-2 infection may transmit to relatively few people, while a minority of children with SARS-CoV-2 infection will transmit to larger numbers of people (super-spreader events). This means that mitigation measures in schools should aim to prevent super-spreader events.

SARS-CoV-2 Transmission

SARS-CoV-2 can be transmitted via aerosols (particles that remain suspended in the air for variable lengths of time) that are present at short ranges but may also contribute to long-range transmission;⁴⁹ larger droplets that spread at short range; and direct contact with infected individuals or contaminated surfaces. This is similar to other respiratory viruses, where there is a spectrum of transmission, but certain modes predominate.^{50,51} In the case of SARS-CoV-2, current evidence suggests that it is transmitted most frequently and easily at short range through exposure to respiratory particles that range in size from smaller aerosols to larger droplets.⁵² Spread by suspended aerosols or droplets over longer ranges or time can occur particularly in crowded, enclosed spaces with poor ventilation. Spread by direct contact does not appear to be the predominant mode of transmission, although it remains plausible.⁵³

Respiratory particles are produced from an infected person when they breathe, talk, cough, or sneeze. When a person has infection, whether or not transmission from that person occurs depends on multiple factors. Examples include how forcefully aerosols and droplets are expelled (e.g., singing or coughing are associated with

higher risk), amount of virus present (e.g., more virus is present early in the infection), the duration of the exposure (i.e., longer contact with an infectious person is higher risk), environmental conditions (e.g., good ventilation and outdoors are associated with lower risk), and personal protective measures (e.g., physical distancing, wearing a well-fitted mask, and being fully vaccinated reduces the risk).⁵⁴

Prevention of Transmission

While our understanding of how transmission occurs has evolved and the relative contribution of droplets and aerosols continues to be studied, several control measures are likely effective at reducing the risk of transmission irrespective of the relative contribution of larger droplets or aerosols to transmission. These include staying home when sick, wearing a well-fitted, non-medical or medical mask for source control and protection, practicing respiratory etiquette (coughing and sneezing into your arm), physical distancing, utilizing outdoor settings, and achieving and maintaining adequate indoor air quality through ventilation and/or filtration. Other important strategies that will reduce contact transmission include hand washing, cleaning frequently touched surfaces and avoiding touching the eyes, nose, and mouth.

Each of the control measures listed above likely provides some benefit in reducing SARS-CoV-2 spread. However, it is the combination and consistent application of these layered controls as a bundle that is most effective for reducing disease spread in schools. Immunization is the single most effective preventive intervention, and its widespread uptake will dramatically reduce infection rates even among unvaccinated children.²³

COVID-19 Vaccine Uptake and Coverage Rates in Ontario

Early indications are that COVID-19 vaccine uptake among those eligible for a vaccine in Ontario is high. We can therefore expect that a substantial majority of persons 12 years of age and older will have received at least 1 dose, and likely 2 doses, prior to schools reopening in September 2021.⁵⁵ With respect to children younger than 12 years of age, it is anticipated that a vaccine will not be approved and widely available prior to September 2021 and the timeline for eventual approval and roll-out remains uncertain. However, immunization of persons 12 years of age and older is anticipated to lead to lower SARS-CoV-2 community rates overall, leading to lower risk in schools.⁵⁶ Outbreaks in schools remain a possibility among unvaccinated children, or if VOCs with vaccine escape become predominant.⁵⁷

Transmission and Disease Rates as Measures of Pandemic Activity

There is considerable debate regarding the outcome measures that should be prioritized in determining the need for and extent of mitigation intervention for schools and the community at large. In the context of high vaccine uptake in individuals 12 years of age and older, metrics of severe disease (e.g., absolute COVID-19 hospital occupancy rates, rates per 100,000 population), or signals of vaccine escape are of primary importance. Measures of SARS-CoV-2 transmission (e.g., effective reproductive number, test positivity numbers, or test positivity rates) are expected to be less important when vaccine coverage is high but, in the near term, may be valuable for early detection of emerging variants less well covered by vaccines before a substantial increase in severe disease can be detected. In addition, robust measurement of transmission will allow for the detection of more infections, which would allow for better evaluation of adverse outcomes not reflected by hospitalization rates, such as long COVID.

Community Risk Framework

In each of the sections, we provide guidance based on level of community risk, categorized as low, moderate, and high (Table 1 and Figure 1). COVID-19-related metrics of disease severity (e.g., hospitalizations), and to a lesser extent SARS-

CoV-2 transmissibility are key factors to consider in defining risk level, as they are anticipated to be influenced by vaccination rates and by the emergence of vaccine escape variants that cause disease in both unvaccinated and vaccinated individuals. Specific thresholds for vaccination rates, infection rates and disease rates have not been defined as these are somewhat arbitrary and because there may be differences in the weighting of individual criteria by jurisdiction, depending on their unique circumstances. However, in general terms, low-risk is applicable when there are limited and sporadic cases with severe disease requiring hospitalization, moderate-risk when there is early evidence of an upward trajectory in the number of cases with severe disease requiring hospitalization, and high-risk when there are high rates and continued upward trajectory of cases with severe disease requiring hospitalization. Measures of SARS-CoV-2 transmission is an important secondary factor that can be considered in defining community risk, particularly early in the school year.

Figure 1 illustrates the relationship of community transmission, as measured by the effective reproduction number (R_t), with disease severity, as measured by COVID-19-related hospital occupancy in absolute numbers and hospitalization rate per 100,000 population. A SARS-CoV-2 **variant of concern** that is more transmissible (e.g., Delta) would move the scenario up the y-axis (higher R_t) and the introduction of community mitigation measures to control community transmission would move the scenario back down the y-axis (by reducing R_t). Higher rates of severe disease would most often occur in the context of high community transmission (higher on the y axis and shifted to the right on the x-axis) but could potentially occur, even with lower community transmission rates in the case of an emerging variant with vaccine escape.

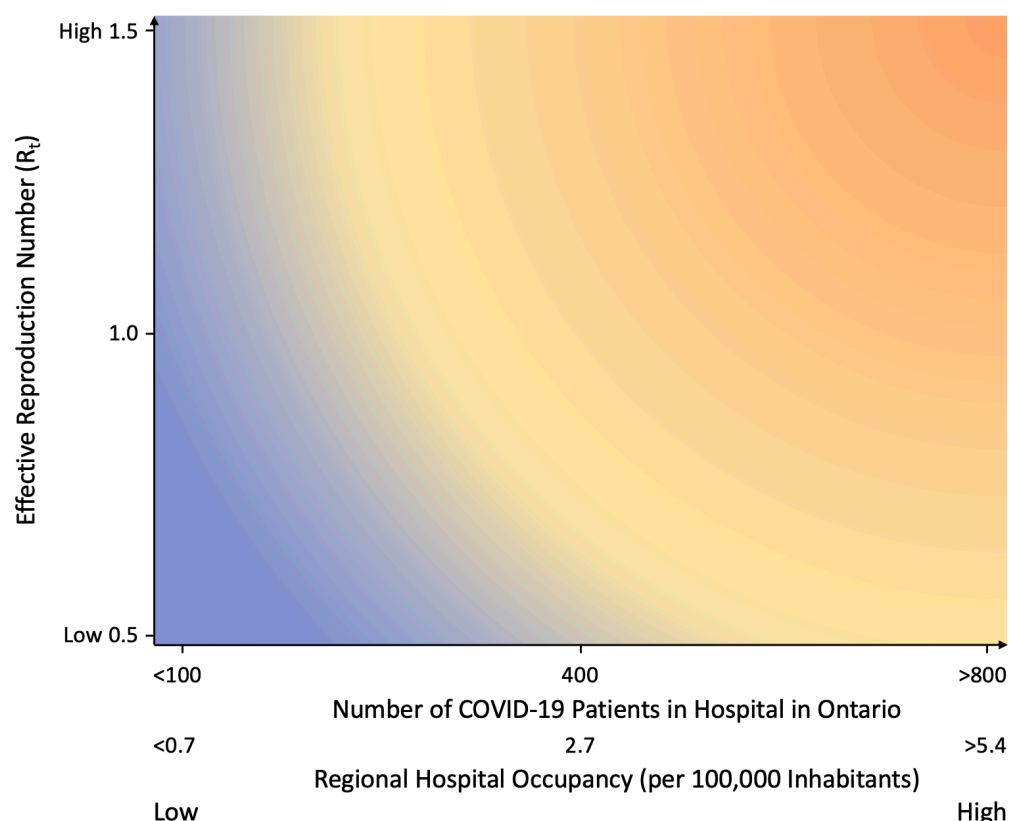


Figure 1. Community Risk Scenarios in the Context of Virus Transmissibility and Clinical Severity
R_t: reproduction number 100K: 100,000

Permanent and Temporary Infection Prevention and Control (IPAC) Measures in Schools

As discussed, there is not one specific measure that will prevent transmissions from occurring in schools, but rather, there are several structural and individual elements

that contribute to making schools healthier workplaces and reducing the risk of infection to in-person attendees. These are summarized within the Hierarchy of Hazard Controls (Figure 2).

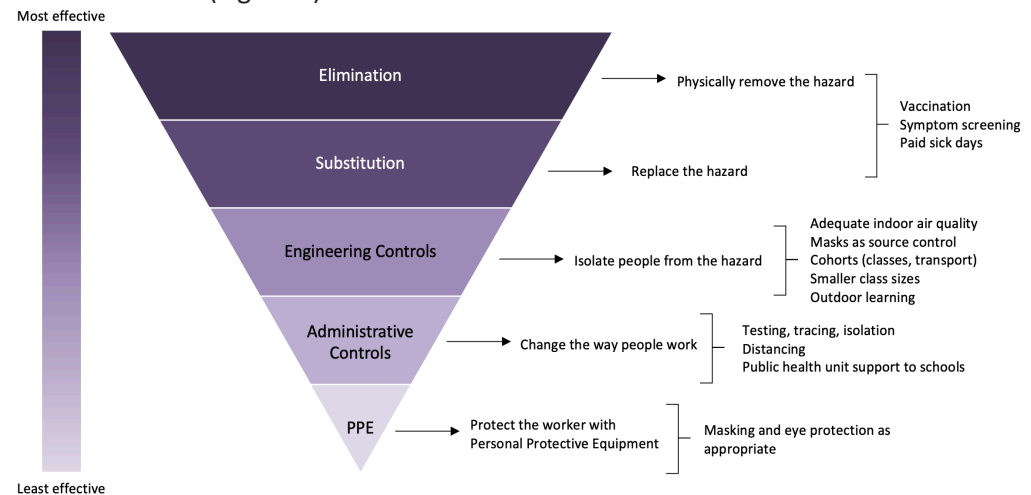


Figure 2. Hierarchy of Controls

Figure adapted from CDC.⁵⁸

Elimination measures are at the top of the hierarchy and are considered the most effective measures as they prevent infection from entering the school environment. With respect to SARS-CoV-2 and many other infectious diseases, these are primarily community-based and include measures such as vaccination, public health case and contact tracing, and symptom-based screening with exclusion from school if [symptomatic](#) or exposed and susceptible to SARS-CoV-2.

Within the school, permanent measures that help to reduce transmission of infectious diseases include:

- Vaccination of eligible students and those who interact with students (i.e., school staff, parents, caregivers)
- Exclusion of students and staff when they are symptomatic
- Hand hygiene
- Achieving and maintaining adequate indoor air quality via upgrade to school heating, ventilation, and air conditioning (HVAC) systems
- Appropriate environmental cleaning

Temporary measures that should be used during pandemic scenarios to reduce the risk of transmission of infectious disease in schools include:

- Symptom and exposure screening
- Diagnostic testing
- Use of non-medical or medical masks
- Physical distancing*
- Cohorting*
- Optimizing ventilation/filtration in classrooms, and increased use of outdoor space (when possible)

*Both physical distancing and small cohort sizes are facilitated by reduced class sizes.

With this in mind, the following sections of the document summarize the considerations for the safe, continued operation of schools based on the available evidence, as well as expert opinion. Where appropriate, recommendations have been

provided for kindergarten, elementary school (Grades K-5), middle school (Grades 6-8), and high school (Grades 9-12) classes/students. For operational purposes, it is acknowledged that the approach in middle school may depend on whether the grades are associated with a kindergarten/elementary school (i.e., Grades K-8) or high school (i.e., Grades 7-12).

Implementation of the Framework

We recommend that this framework be interpreted at a regional level by public health units considering local vaccination coverage rate, metrics of disease severity, and, to a lesser extent, SARS-CoV-2 transmission rate. It is difficult to predict case numbers and health system occupancy related to COVID-19 as the province reopens and following the return to school in September 2021. Recent case trends in jurisdictions such as the UK, Israel, and the Netherlands demonstrate that outbreaks and increased numbers of hospitalizations have occurred among unvaccinated populations as the delta variant became predominant and restrictions were lifted.⁵⁹ This experience highlights that a successful return to sustained in person learning and gradual relaxation of mitigation interventions in schools will require maintaining situational awareness with community responsiveness, and ultimately achieving high vaccine coverage among eligible persons throughout the province.

This framework is further predicated on the fact that children infected with SARS-CoV-2 generally have mild disease and that effective vaccines are available for those 12 years of age and older, meaning that even if there are occasional outbreaks in schools, they are not expected to be associated with severe disease among children, and that older children and adults should have excellent protection against severe disease as a result of vaccination. If a new VOC with vaccine escape emerges, and it is associated with increased transmission and significantly higher rates of severe illness among vaccinated populations, additional temporary mitigation measures as outlined in the moderate or high-risk scenarios of this framework should be adopted. Relaxation of temporary mitigation measures, such as masking, distancing, and cohorting should be considered when high vaccination rates are achieved and severe disease requiring hospitalization rates are low and stable. In these scenarios, permanent school-based health, and safety measures (symptom-based screening, hand hygiene, environmental cleaning, adequate ventilation) may be sufficient to limit spread from sporadic SARS-CoV-2 introductions into schools.

Table 1 provides a general approach to school-based health and safety measures in relation to low-, moderate-, and high-risk scenarios based on epidemiologic situations. In the context of high vaccine uptake, measures of disease severity are considered the most important metric for defining risk scenario, as they are expected to be strongly attenuated with high vaccine coverage. Measures of SARS-CoV-2 transmission may be of value for early detection of changes in patterns of disease transmission before a significant increase in severe disease can be detected.

Assumptions / Criteria	Community Context ^a		
	Low SARS-CoV-2 Risk	Moderate SARS-CoV-2 Risk	High SARS-CoV-2 Risk
Severe Disease ^b	Limited and sporadic cases of severe disease requiring hospitalization	Early evidence of an upward trajectory in number of cases with severe disease requiring hospitalization	High rates and continued upward trajectory in number of cases with severe disease requiring hospitalization
Community Transmission ^c	$R_t < 1$	$R_t 1.0 - 1.2$ (sustained) ^d	$R_t \geq 1.3$ (sustained) ^d
Implications for School Setting	Low SARS-CoV-2 Risk	Moderate SARS-CoV-2 Risk	High SARS-CoV-2 Risk
Introduction of Cases into School Environment (Anticipated Based on R_t)	Occasional introduction of cases	Increasing introductions; geographic heterogeneity reflecting community prevalence and immunization levels	Frequent introductions with high case rates increase in community
Recommended Permanent Measures	Vaccination (encourage and ensure ease of access), screen and exclude from school if symptoms/exposure, improve indoor air quality, hand hygiene, environmental cleaning, low barrier testing ^e		
Recommended Temporary Measures	Permissive masking and distancing	Masking, distancing and cohorting indoors as appropriate based on age	Masking, distancing and cohorting as appropriate based on age
Suggested Community-Based Measures	Low-barrier testing Backwards + forwards tracing Targeted vaccination in under-immunized communities	Restrictions in the community as recommended by CMOH Testing + tracing + targeted vaccination in under-immunized communities	Further restrictions in the community as recommended by CMOH Schools stay open with prioritized testing + tracing + vaccination

Table 1. Community Epidemiologic Situations and Implications for School-Based Health and Safety Measures

^aIf in the low SARS-CoV-2 risk scenario based on metrics, some jurisdictions/schools may choose to maintain measures that can still afford layers of prevention that are less disruptive to the education and well-being (e.g., masking indoors) at the start of the September 2021 school year and reassess the ongoing need once in-person education has been resumed. ^bSevere disease can be assessed using the following metrics: COVID-19 hospitalizations, ICU admissions, and deaths. ^cPublic health tracing capacity is also an important consideration that may be impacted as case counts increase. ^dSustained SARS-CoV-2 transmission: 14 days or more. ^eRobust case and contact management with low-barrier testing (see Testing section) is important in all risk scenarios to identify and promptly isolate individuals with SARS-CoV-2 infection.

Special Considerations for Schools in Rural, Remote, and Indigenous Communities

For rural, remote, and Indigenous communities, the COVID-19 pandemic has presented additional distinctive and substantial challenges for education delivery which has expanded inequities. It is essential that there be special attention paid to how to appropriately support these communities such that health and education needs can be met moving forward. It must be acknowledged that each rural, remote and/or Indigenous community has unique strengths which contribute to their resiliency, and unique challenges; engagement with local community leadership is the critical first step in understanding the community needs, building relationships and tailoring public health strategies.⁶⁰ Indigenous leaders and trusted professionals within the communities are well in tune with the strengths and challenges for families in the education system and can recommend the most appropriate strategies. It is important to take the lead from the Indigenous communities to determine strategies to support. The success of public health programs in preventing transmission of SARS-CoV-2 in such communities relies on close collaboration between public health units, local leadership and local health and social programs.

Important considerations for rural, remote, and Indigenous communities that need to be taken into account for all sections of this document:

- Ensure clear accountability for education support whether through federal or provincial resources.
- Transportation considerations will be different for children in rural, remote and First Nations communities because they may be in transit for prolonged time periods to and from school and school-based rehabilitation services.

- Limited access to clinical and support services have exacerbated the sense of isolation among children and youth, with educators concerned about students disconnecting from the virtual classroom.
- Remote learning is less accessible, due to technological challenges, in these communities.
- Social supports for the urban Indigenous population, which include off-reserve First Nations, Métis, and Inuit communities, have historically been connected with local Indigenous Friendship Centres and Aboriginal Health Access Centres, yet access to these types of services has been restricted during the pandemic.
- Restoring access to local friendship and health centres should be a priority to re-establish social connectivity among youth, families and elders, childcare and nutrition programs, and delivery of culturally sensitive health care and public health education from trusted leaders and healers.
- In communities with operational challenges around public health [surveillance](#), it may be more prudent to consider additional, temporary measures up-front in the school year (please see sections titled Masking, Physical Distancing, Cohorting, Extra-Curricular Activities, and Transportation).
- Given the close-knit, multi-generational communities, it will be important that public health resources are available to strengthen testing and contact tracing, leveraging Indigenous contact tracers where applicable to ensure culturally safe care.
- Higher testing uptake will be seen with programs that are acceptable to children (e.g., oral-nasal or saliva sampling), accessible (e.g., pop-ups, flexible hours of operation, self-collection) and adoptable by the community (e.g., take-home testing kits with discreet drop-off locations and hours).
- Rapid molecular testing may be an additional consideration for communities with infection-related clusters if there are transportation-related challenges to accessing regional laboratories for molecular-based testing and results.
- Some rural and remote communities with smaller populations may more easily manage lower class sizes and physical distancing practices than those in densely populated urban areas.
- Ensure culturally appropriate messaging for Indigenous populations that takes into consideration historical factors contributing to vaccine hesitancy and medical mistrust. Include Elders and Knowledge Keepers in vaccine distribution and promotion plans.
- Aging infrastructure, including older HVAC and supplemental ventilation/filtration systems in many remote First Nations, Métis, and Inuit communities may impact the ability to properly ventilate schools and ensure adequate air quality, particularly during local outbreaks and in the colder months when opening windows is not an option.
- Schools in remote, rural, and First Nations, Métis, and Inuit communities that do not meet the appropriate minimum ventilation guidelines from ASHRAE Standard 62.1-2019 (see page 22), should be prioritized for upgrades.
- Overcrowded education infrastructure in some remote First Nations, Métis, and Inuit communities could make preventative measures such as cohorting and physical distancing difficult and could result in the need to shift to remote learning in some instances, further contributing to high rates of disengagement. Appropriate resources should be provided to ensure adequate space is available to support consistent in-person learning in these communities, and to ensure

equitable access to digital learning resources.

- Where First Nations, Métis, and Inuit students must relocate to larger urban areas to attend a provincially operated secondary school, students should have access to adequate housing options which include sufficient space to allow for distancing and cohorting, if necessary, to ensure safe access to in-person learning.

Special Considerations for Children and Youth with Medical, Physical, and/or Developmental Complexities

Return to school must be inclusive of all children, including those with disabilities, developmental and behavioural challenges, and medical complexities. This includes children requiring intensive supports for activities of daily living and/or medical conditions, such as feeding, positioning, toileting or breathing supports, as well as those who depend on schools for therapies and other critical supports for their learning, development, and well-being. Many of the families of these children have had a prolonged period of time in home isolation compounded by a lack of respite and/or homecare supports. In particular, challenges for families and children/youth with neurodevelopmental disorders caused by cessation of school during the pandemic have been identified.⁶¹ Consultation with their parents and families to better understand their individual circumstances and needs is recommended. Virtual learning can be extremely challenging for many children and youth with complexities. Moreover, they rely on caregivers for optimizing their own health; high vaccine uptake among this vulnerable group, and those who are in contact with them, is important.^{35,62}

The additional resource requirements to facilitate safe return to school should not be a barrier to meaningful access to in-person education for any child. Detailed guidelines for specific groups of children and youth with complex needs have been developed by teams at SickKids,⁶³ Holland Bloorview Kids Rehabilitation Hospital,⁶⁴ and CHEO.⁶⁵

Vaccination

Immunization is the single most effective preventive intervention and its widespread uptake will dramatically reduce infection rates even among unvaccinated people, including children.²³ As such, it is essential that vaccines are easily accessible and encouraged for all approved age groups, and offered as a permanent community-based measure across all risk groups to improve regional vaccination coverage when local school or community outbreaks are occurring.

Under the Ontario Immunization of School Pupils Act (ISPA), all students attending primary or secondary school are required to provide proof of immunization against nine vaccine-preventable infectious diseases including diphtheria, tetanus, pertussis (whooping cough), poliomyelitis, measles, mumps, rubella, meningococcal disease, and varicella (chickenpox, for those born on/after 2010), or provide the required documentation for a medical or non-medical exemption to immunization.⁶⁶

Recommendations for vaccination:

- Strongly encourage COVID-19 vaccination for all eligible individuals, including youth and those who interact regularly with children and youth, including (but not limited to) parents / caregivers, school staff, education workers, coaches, and tutors.
- Initiate robust vaccine campaigns to reduce barriers to access and improve vaccine confidence. Specific efforts should include support for families and communities in more severely impacted COVID-19 hotspot neighbourhoods.
- Ensure culturally appropriate messaging for Indigenous and other racialized populations, taking into consideration historical factors contributing to vaccine hesitancy and medical mistrust.

- Promote vaccine distribution plans that are focused on ease of access (i.e., on-site school-based vaccine clinics for students and their families), education and youth ambassador engagement to optimize vaccine coverage rates. These strategies should be promoted prior to the beginning of the school year and offered throughout the year to reach schools with low student vaccine coverage.

Vaccination status reporting considerations:

- We recommend that COVID-19 vaccination status for staff and students be reported to school authorities and public health at the start of the school year and updated regularly (e.g., mandated through the Reopening of Ontario Act or added to the ISPA), to help inform public health efforts.
- Schools and school boards should only have access to anonymized and aggregated information (i.e., proportion of eligible students with 1 or 2 doses of vaccine) to support targeted education / campaigns to improve accessibility and uptake in schools and regions with low vaccine rates.
- Access to individual level vaccination status should be available to public health officials, as it is essential to support timely contact management. This will help to reduce loss of in-person learning as appropriate (i.e., vaccination status can be considered during outbreak management and case and contact tracing).
- Careful attention to confidentiality and anonymity of this data is essential. Schools and school boards should only have access to aggregated data, and individual level data should only be available to public health officials for the purposes of outbreak management, and case and contact tracing.
- The Ministry of Education and the Office of the Chief Medical Officer of Health should explore options, including vaccination policies, to optimize vaccine coverage and reporting of vaccination status for staff and students.

Symptom and Exposure Screening, School Exclusions

In order to prevent the spread of SARS-CoV-2 infection within schools during the 2020/21 school year it was recommended that students, teachers, and other school employees who had signs or symptoms of COVID-19 (according to Ministry of Health and local public health guidance) stay home. Decisions about testing and return to school were to be guided by provincial and local public health authorities. These recommendations remain valid for the upcoming school year, since daily symptom screening has been associated with significant risk reduction of SARS-CoV-2 infection (assuming school exclusion)⁶⁷ and is an important strategy for the prevention of other infectious disease transmission within schools (i.e., influenza, respiratory syncytial virus, norovirus). A system whereby there is easy access to less invasive testing for school attendees (students and staff) and their household members will facilitate early detection of SARS-CoV-2 cases and monitor for the emergence of variants in schools (see Testing Section).

Recommendations for symptom and exposure screening:

- Screening and exclusion policies should be in place for students and employees who are symptomatic or have had an exposure to SARS-CoV-2 and directed to self-isolate by public health (policies may vary by vaccination status).
- If community transmission remains low after school returns and public health measures are lifted, the use of daily screening tools can eventually be eliminated, and a return to the practice of exclusion based on presence of infectious symptoms in general can be considered. Keeping staff and students at home when sick is an important health and safety measure that should be continued beyond the pandemic.

- The need for confirmation of screening, the location of screening (home vs. school) and the screening / exclusion criteria (i.e., number of symptoms, duration of symptoms, presence of symptomatic household members, recent exposure), should be adjusted based on the local SARS-CoV-2 risk scenario (Table 2).
 - Confirmation of screening: This refers to a process whereby schools confirm that the screening has occurred at home. This attestation could be verbal, virtual, such as a smartphone app, web-based, QR-based or on paper for those unable to do so virtually, but the process should not be so onerous that it disadvantages groups with limited technological access or supports.
 - Number of symptoms: Using any one symptom will be a more sensitive screening approach. However, this is less specific and will lead to more children being excluded from school (with associated learning impact). Availability of paid sick days is an important initiative to ensure that families can follow public health guidance on school exclusion and testing.⁶⁸
 - Selection of symptoms: The specific symptoms to screen for should take into consideration their positive predictive value as well as community rates of SARS-CoV-2 and other respiratory viruses. If COVID-19 risk scenario increases (i.e., high-risk scenario, suggesting a variant with vaccine escape), the threshold for school exclusion and testing should be lower (i.e., screen for any single symptom, even non-specific).⁶⁹
 - Duration of symptoms: Non-specific symptoms that are short-lived (< 24 hours) can be monitored in low- and moderate-risk scenarios and may not require immediate testing or prolonged isolation.
 - SARS-CoV-2 exposure: The risk of infection following exposure is lower in fully vaccinated individuals. Vaccine status should be taken into consideration in post-exposure management. School screening tools should align with current public health case and contact management guidance (e.g., regarding fully vaccinated high-risk contacts of a case).

	Low SARS-CoV-2 Risk	Moderate SARS-CoV-2 Risk	High SARS-CoV-2 Risk
Type and Location of Screening	Active screening at home ^a	Active screening at home	Active screening at home (can consider on site) ^b
Confirmation of Screening by School	Not required	Required	Required
Screening – Symptoms ^c	Single symptom (using more specific symptoms for infection) ^d	Single symptom (using more specific symptoms for infection) ^d	Single symptom (any symptom)
School Exclusion if Screen Positive as Above	Yes	Yes	Yes
Testing Required Prior to Return to School	Yes, if any key symptom (for example fever, cough, shortness of breath, anosmia/ageusia) or other mild symptoms for > 24 hours ^e	Yes, if any key symptom (for example fever, cough, shortness of breath, anosmia/ageusia) or other mild symptoms for > 24 hours ^e	Yes, for any symptom
School Exclusion With SARS-CoV-2 Exposure ^f	Exclude if not fully vaccinated	Exclude if not fully vaccinated	Exclude if not fully vaccinated or circulating vaccine-escape variant
School Exclusion Because a Household Member Has Had a High-Risk Exposure ^g	No	No	Yes, unless the household contact or staff/student being screened is fully vaccinated
School Exclusion With Symptomatic Household Contact (Test Pending)	No	No	Yes, if household contact not fully vaccinated or circulating vaccine-escape variant

Table 2. Screening for Symptoms and Exclusion Criteria Based on Local Epidemiology

^aThis should be reconsidered as restrictions are relaxed in the context of high vaccine coverage, low transmission rates and low hospitalizations rates. ^bOn site screening is associated with significant operational challenges and should only be introduced in discussion with schools and school boards taking into consideration feasibility. ^cThere is large variation in signs and symptoms of SARS-CoV-2 in children. Predominant symptoms have included fever and cough in more than half the cases, followed by rhinorrhea/nasal congestion, myalgia/fatigue and sore throat in 10%–20% of cases and gastrointestinal symptoms and headache in fewer than 10% of cases.⁷⁰ ^dExamples of more specific symptoms

for SARS-CoV-2 infection and other infectious diseases include fever, cough, shortness of breath, anosmia/ageusia, vomiting and diarrhea. ^eGuidance around key symptoms for testing are likely to evolve as information is gathered with new variants and in the context of other respiratory viruses. Refer to provincial guidance for final list of symptoms that require testing and recommendations for return to school if testing is not completed (i.e., by provincial case and contact management guidance). ^fRefer to provincial case and contact management for definitions of exposure and management.

SARS-CoV-2 Testing for Schools

The focus of testing should continue to be diagnostic testing for those with symptoms compatible with COVID-19 and those with a high-risk exposure to a case of COVID-19. It is essential that barriers to testing continue to be reduced for these groups to improve testing uptake, including easily accessible and acceptable testing options. This, along with testing in the community at-large, will facilitate early detection of SARS-CoV-2 cases and allow for close monitoring for the emergence of VOCs.

Asymptomatic screen testing (i.e., asymptomatic testing in the absence of documented exposure), is not routinely recommended, especially in the low to moderate COVID-19 risk scenarios.^{71,72} The use of asymptomatic screen testing as a temporary measure in the high COVID-19 risk scenario is an area that requires further study and should not be broadly implemented without further pilot data. There are substantial logistical and equity concerns that need to be taken into consideration (Table 3). If studied, consideration should be given to using the strategy to promote equity of access to participate in close contact clubs and sports (Test-to-Play strategy)⁷³ and in situations where screening and/or adherence to public health measures may be more challenging (e.g., students with special needs), without exacerbating inequities based on race, ethnicity or wealth. A COVID-19 Science Advisory Table Science Brief on asymptomatic screen testing for schools is forthcoming.

Recommendations for SARS-CoV-2 testing for schools in symptomatic children and youth:

- Children with symptoms compatible with COVID-19 should undergo testing for SARS-CoV-2 (See Screening).
 - Laboratory-based molecular tests are preferred as they are more sensitive than current point-of-care rapid molecular or antigen tests.
 - Testing with a rapid molecular test may be considered if accessibility to laboratory testing is a barrier, for example in rural areas. In these situations, a lower [sensitivity](#) test with rapid turnaround is preferred over limited or significantly delayed test results.
 - Testing with a [rapid antigen test](#) is not recommended.
- Laboratories should prioritize tests for rapid turnaround to minimize the time out of school for students should they test negative.
- The use of non-invasive specimen types (e.g., saliva, buccal-nares swab or throat-nares swab) should be strongly considered as this will likely increase co-operation among children and promote willingness for future testing among households.
- Testing should be made easily accessible to school students and staff to facilitate early case identification (e.g., take home testing kits, self-test with collection and drop off at school).

Recommendations for SARS-CoV-2 testing for schools in asymptomatic children and youth with a known exposure:

- Asymptomatic children who have had a high-risk exposure to an individual with SARS-CoV-2 infection should be tested for SARS-CoV-2.
- Consideration should be given to revising the definition of high-risk exposure in schools such that it minimizes education disruption without increasing in-school

transmission.⁷⁴

- Laboratory-based molecular testing is recommended for this population. The use of alternative specimens, particularly saliva or oral-nares swab, is acceptable and may increase compliance with testing recommendations and willingness for future testing.
 - At this time, rapid antigen testing is not recommended based on the lower sensitivity of the test and inferior performance in asymptomatic individuals, particularly in communities in low- and moderate-risk. Rapid molecular testing may be useful in communities where there is limited access to laboratory-based testing (i.e., rural, remote, and Indigenous communities).
 - The optimal timing of testing after an exposure is unclear. Testing immediately after case identification would determine if transmission has already occurred and identify infected secondary cases sooner, which may improve adherence with public health guidance and be more effective at interrupting chains of transmission.⁷⁵ Testing later ($\geq 5-7$ days after the last close contact) is more likely to identify a student who has become infected after exposure to the known case. While testing at multiple time points post-exposure would identify both scenarios, this is likely not practical in schools and could have implications on regional testing capacity. Testing asymptomatic high-risk contacts at 5-7 days after exposure, would balance the need to catch secondary cases early with the optimal timing to detect cases post exposure.

	Low SARS-CoV-2 Risk ^a	Moderate SARS-CoV-2 Risk ^a	High SARS-CoV-2 Risk ^{a,b}
Kindergarten and Elementary School	Symptomatic and asymptomatic exposed contacts	Symptomatic and asymptomatic exposed contacts	Symptomatic and asymptomatic exposed contacts
Middle School and High School	Symptomatic and asymptomatic exposed contacts	Symptomatic and asymptomatic exposed contacts	Symptomatic and asymptomatic exposed contacts

Table 3. Testing Recommendations for School Students

^aTesting recommendations and requirements are likely to change over time in response to high levels of immunity in communities. ^bThe use of asymptomatic screening in the high-risk scenario is an area of further study and should not be broadly implemented without further pilot data. Logistical and equity considerations are essential prior to the implementation of asymptomatic screen testing.

Hand Hygiene

SARS-CoV-2 and other respiratory viruses can be spread by respiratory droplet and contact transmission. As a result, and because virus shedding may occur prior to symptom onset or in the absence of symptoms, routine, frequent and proper hand hygiene (soap and water or hand sanitizer) is important in limiting transmission and should continue to be encouraged in schools.⁷⁶ Routine hand hygiene is also beneficial for the prevention of many other childhood infections that have the potential to disrupt school attendance (e.g., gastrointestinal viral illnesses).

Recommendations for hand hygiene:

- Children and youth should be taught how to clean their hands properly (with developmentally and age-appropriate material)⁷⁷ and taught to avoid touching their face, eyes, nose and mouth as much as possible. This should be done in a non-judgmental and positive manner and should be reinforced regularly.
- Respiratory etiquette: children and youth who have symptoms of a respiratory tract infection (not otherwise explained by underlying conditions, allergies) should stay home and should be reminded to sneeze or cough into a tissue followed by hand hygiene, or their elbow/sleeve if no tissue is available. In the event a mask is worn and becomes soiled, it should be changed.
- Students and staff should perform routine hand hygiene upon entering and before exiting the building, after using the washroom, before and after eating, and

before and after playtime with shared equipment/toys.

- Access to hand hygiene facilities (hand sanitizer dispensers and sinks/soap) is recommended. Hand sanitizer (60-90% USP grade alcohol, not technical grade alcohol) should be available and easily accessible in all classrooms. Safety precautions to avoid toxic exposure (e.g., ingestion) from hand sanitizers should be in place.
- In settings of high community transmission, a regular schedule for hand hygiene, above and beyond what is usually recommended, is advised. Possible options include regularly-scheduled hand hygiene breaks based on a pre-specified schedule. For practical reasons and to avoid excess traffic in the hallways, the preferred strategy for these extra hand hygiene breaks would be alcohol-based hand rub unless sinks are readily available in the classroom.

	Low SARS-CoV-2 Risk	Moderate SARS-CoV-2 Risk	High SARS-CoV-2 Risk
Hand Hygiene	Routine	Routine	Routine with regular schedule and reinforcement

Table 4. Recommendations for Hand Hygiene in Schools

Achieving and Maintaining Adequate Air Quality through Ventilation and Filtration

SARS-CoV-2 is primarily transmitted by aerosols and respiratory droplets during close unprotected contact, and it is recognized that aerosols play a role in longer range transmission of SARS-CoV-2, especially in poorly ventilated indoor areas.⁷⁸⁻⁸⁰ As such, it is expected that environmental conditions, exposure time and the air exchange rate in a space influence the transmissibility of SARS-CoV-2 and likely other respiratory viruses.^{81,82} Therefore, adequately ventilated classroom environments are important measures to reduce the likelihood of transmission.^{80,83,84}

Similar to all other interventions within the hierarchy of control (Figure 1, 2), it is important to note that adequate ventilation alone will not eliminate the potential for SARS-CoV-2 transmission, especially related to close, unprotected contact. However, given the importance of indoor air quality for overall health and learning,⁸⁵ achieving adequate ventilation in schools is an important investment to support improved health, academic performance and to assist in preventing the spread of several infectious diseases.

Recommendations for achieving and maintaining adequate air quality through ventilation and filtration:

- A systematic approach to identifying and prioritizing schools for ventilation upgrades should be undertaken. As a starting point, schools that do not meet the appropriate minimum ventilation guidelines from The American Society of Heating, Refrigerating and Air-Conditioning Engineers (ASHRAE) Standard 62.1-2019, should be prioritized for upgrades.⁸⁶
- Invest in school heating, ventilation, and air conditioning (HVAC) system infrastructure and regular maintenance. This is of particular importance in schools where the system does not support good indoor air quality. HVAC systems can be optimized for a variety of objectives which may change in priority depending on the context, e.g., COVID-19 pandemic, extreme cold/heat events.
- During the pandemic, HVAC system function has been recommended to be optimized for respiratory particle removal (e.g., use of the highest rated Minimum Efficiency Reporting Value (MERV) filter that can be accommodated by the system, regular inspection of filters assembly, routine replacement of filters).^{84,87} In consultation with experts in physical plant design, air exchange rate and outdoor air intake can be increased. The limits of what is possible may be dictated by thermal comfort, humidity, and outdoor air quality.

- Consideration can be given to increasing ventilation/filtration above the minimum ASHRAE guidelines, where possible, where more respiratory aerosols are likely to be generated (e.g., music room, auditorium, cafeteria, gymnasium).

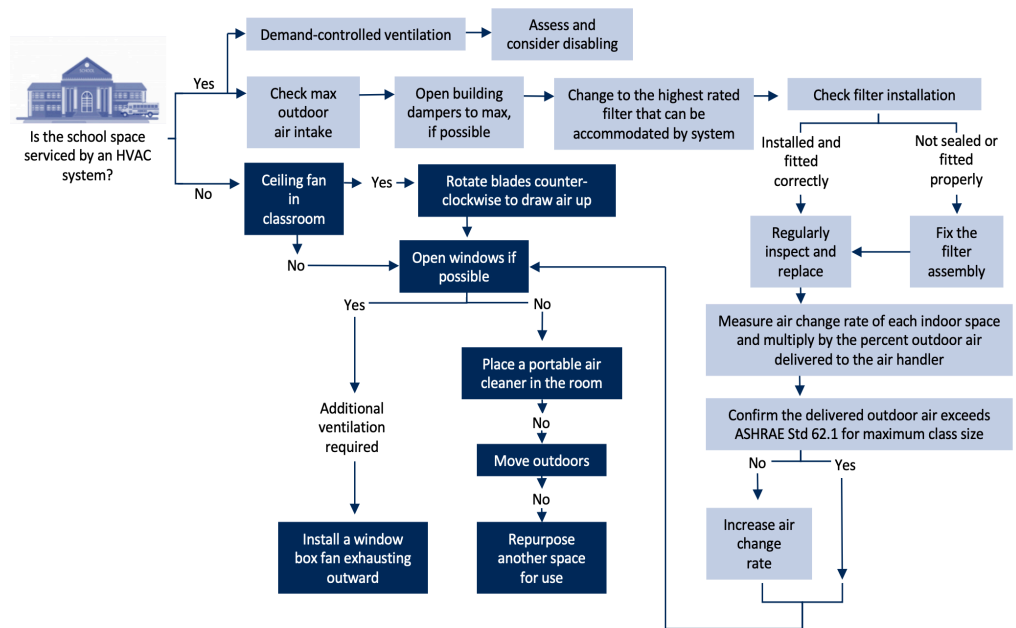


Figure 3. Engineering Control Flow Diagram for Enhancing Ventilation in Schools With Mechanical Ventilation (Yellow) and Natural Ventilation (Blue).

Adapted from Li et al. 2021.⁸⁸

Additional strategies can be used to improve air quality while awaiting HVAC system upgrades (see engineering control flow diagram) including:

- The use of available outdoor learning environments when weather permits. It is acknowledged that some schools have limited usable space or limitations related to available spaces off property.⁶⁷
- In naturally ventilated schools (i.e., no HVAC system), windows can be kept open, if safe, and according to weather conditions. Opening windows for short times at intermittent intervals can be of benefit.⁸⁹ Box fans can be placed into windows to achieve supplemental ventilation; the fan should be oriented to exhaust outdoors.
- The use of portable air cleaners with high efficiency particulate air (HEPA) filter units in classrooms may be considered in spaces/classrooms with limited ability to achieve adequate ventilation (i.e., unable to open windows, no/insufficient HVAC ventilation), taking into consideration the transmission risk (e.g., age, classroom activities, community epidemiology).⁹⁰⁻⁹²
 - Commercially available air cleaners with HEPA filter units can provide supplemental filtration in an indoor space.^{89,93} Portable air cleaners can also be constructed by attaching a MERV13 (or other high efficiency) filter to a box fan. These devices can achieve similar ventilation/filtration efficiency as commercial units.
 - The position of portable air cleaners in a classroom or other indoor school space should take into consideration the likelihood that aerosols/droplets are being captured by the intake and that the exhaust is not directed to occupants. Placement near the center of the room or near potential sources of SARS-CoV-2 droplets/aerosols (i.e., choir, playing of wind and brass instruments, lunch tables) is helpful.^{94,95}
 - For commercially available units, manufacturer's instructions on maintenance should be followed.⁸⁷

- Portable air cleaners should be sized for the space; larger spaces with higher occupancy may require multiple units.
- Operation of a fan in the air cleaner unit will generate noise (~40-70 decibels). The noise rating of a device should be considered prior to use.
- Commercially available ionizing air cleaners and other unproven technologies should be avoided. Despite marketing claims, the efficacy of many of these devices is low and many can generate chemical byproducts.⁹⁶
- Any supplemental ventilation/filtration strategy should be purchased and used in consultation with individuals with expertise.

Monitoring ventilation:

- It is important that HVAC and supplemental ventilation/filtration systems are regularly maintained and that measures are checked with the goal of optimization (e.g., air exchange rates, outdoor air intake, temperature, humidity).
- Carbon dioxide (CO₂) levels can serve as a proxy measure for overall ventilation, but the CO₂ level does not necessarily correlate with SARS-CoV-2 transmission risk. While CO₂ monitoring has been suggested to be helpful when done properly, it requires expertise and communication and should not detract from ventilation upgrades.

Environmental Cleaning

SARS-CoV-2 has been detected on a variety of surfaces and survival depends on the surface material.⁹⁷ It is possible that infection can be transmitted via fomites by touching contaminated surfaces and then touching mucous membranes (i.e. mouth, nose, eyes).⁵² The understanding of the role of fomites in SARS-CoV-2 transmission has evolved since the first wave, and they are no longer thought to be a primary mode of transmission.^{52,98} However, they may contribute highly to transmission of other respiratory and gastrointestinal pathogens.⁹⁹ Therefore, environmental cleaning is an important permanent measure.

Recommendations for environmental cleaning:

- There should be a regular cleaning schedule (at least once a day), using Health Canada- approved disinfectants ensuring directions are followed (e.g., contact time is observed) with an emphasis on high-touch surfaces. Washrooms should be cleaned at least twice daily. There are many Health Canada approved non-quaternary ammonium-based disinfectants approved for use against COVID-19.¹⁰⁰
- Efforts should be made to reduce the need to touch objects/doors (no-touch waste containers, prop doors open).
- Recommendations and any policies to ensure there is “no sharing” of food, water bottles or cutlery should continue.
- Regular cleaning of shared equipment (e.g., toys for imaginative play, manipulatives for math, lab materials, equipment for physical education) between students is operationally challenging and the risk associated with transmission is low. Instead, the focus should be on regular hand hygiene to reduce the risk of infection related to shared equipment.
- Similarly, there is no need to quarantine paper products (e.g., books, schoolwork, tests) as they are unlikely to be a significant source of transmission and these practices may contribute to reduced access to learning resources. Hand hygiene should be prioritized over quarantining.

Masking

The use of non-medical masks (NMMs) and medical masks for source control is one of several public health measures that has been effective at reducing SARS-CoV-2 transmission in the community.^{101,102} When worn correctly, NMMs and medical masks reduce respiratory droplets and aerosols generated by the wearer from entering the environment.¹⁰³ Medical masks and well-fitting NMMs also provide protection for the wearer by preventing virus from coming into contact with the nose and mouth.¹⁰⁴ While there are limited studies directly evaluating the [effectiveness](#) of NMM use in children, there are several ecological studies evaluating SARS-CoV-2 [incidence](#) in schools that have found that mask mandates have been associated with lower incidence of SARS-CoV-2 infections.^{83,105-107} However, in the setting of low community transmission, the absence of masks in elementary school was associated with minimal transmission, despite regular class sizes.¹⁰⁸

Potential negative consequences related to masking include impact on communication, impaired facial recognition, or identification, altered interactions (i.e., decreased emotional signaling / visual connection) and physical side effects (e.g., discomfort, irritation).¹⁰⁹⁻¹¹¹

Decisions around NMM use in schools should take into consideration the benefit from source control (which may vary by age) balanced with the negative consequences of NMM use. Other factors to consider include availability of other risk mitigation strategies (e.g., adequate ventilation, physical distancing), local epidemiology and community public health directives around masking in indoor spaces. As public health guidance changes with increasing vaccination and sustained decrease in infection rates, so should the masking guidance in schools.

Recommendations for masking:

- Masking is one of the temporary measures that can be more easily adjusted throughout the school year.
- The use of NMMs in the school setting should be driven by local epidemiology with age-specific considerations.
- When adequate vaccination rates are obtained such that infection rates and severe disease remain low and stable, masking guidance in schools should follow community guidance for indoor settings.
- Even when no longer mandated, mask use should remain permissive as some persons may choose to do so for a variety of reasons (e.g., underlying health concerns).

	Low SARS-CoV-2 Risk ^a	Moderate SARS-CoV-2 Risk ^a	High SARS-CoV-2 Risk ^{a,b}
Kindergarten	Permissive	Consider	Recommended
Elementary School	Permissive	Recommended ^c	Recommended
Middle School	Permissive	Consider masking consistent with recommendations for indoor spaces in the community	Recommended
High School	Permissive	Consider masking consistent with recommendations for indoor spaces in the community	Recommended

Table 5. Recommendations for Masking Indoors in Schools

^aOutdoor masking is permissive and not specifically recommended except when community transmission is high and physical distancing is not feasible (align with community guidance). ^bGiven our current and anticipated COVID-19 vaccine coverage, high-risk scenarios imply the presence of a circulating variant of concern with vaccine escape causing significant severe disease. ^cSome jurisdictions may elect to be more permissive given previous experience in the lower elementary age group.

Physical Distancing

Physical distancing can be a useful temporary measure because SARS-CoV-2 transmission occurs most commonly with close, unprotected contact. However, social

interaction is central to child development and should be encouraged, especially in younger children. In low-risk scenarios, distancing should not be recommended or required. In moderate or high-risk scenarios, re-initiation of physical distancing recommendations should be considered, while taking into account the downsides of distancing according to age. Thus, for younger children in particular, cohorting (discussed in the Cohorting Section) and masking are strategies that should be prioritized over physical distancing to allow for close interactions.¹¹² For older students, masking and distancing are preferred strategies to cohorting because of the latter's adverse impact on schooling, social interactions, sports and extra-curricular activities (see sections on Cohorting and Activities). Modifications to physical distancing recommendations can be accomplished practically during the school year by the type of interactive work. However, significant limitations to group/interactive work should be reserved for the high-risk scenario as groups are an integral component of teaching and learning, and other effective temporary measures can be layered in to reduce the risk of spread in the classroom.

The current physical distancing recommendation in Canada is 2 metres. The WHO and CDC have recommended a distance of at least 1 metre.^{22,113} A 1-metre separation does provide a degree of protection,¹⁰² particularly in the school setting when children are wearing masks during periods of high community prevalence.¹¹⁴ We emphasize that distancing is not an all-or-nothing proposition and increasing distancing will likely diminish SARS-CoV-2 transmission.

Recommendations for physical distancing:

- Physical distancing is not required for any age group in low-risk scenarios.
- In moderate- and high-risk scenarios, distancing should be considered depending on age as follows:
 - In kindergarten and elementary years, cohorting and masking should be emphasized over distancing, as outlined in the Cohorting and Masking sections, respectively.
 - In middle school and high school, masking should be prioritized over cohorting (see section titled Masking) to optimize the learning model (e.g., allow students to participate in the regular class schedule, avoid condensed learning) and support independent development. Distancing can also be encouraged, while allowing for small group work with a consistent group of students within classes (with mask use as outlined in the section titled Achieving Adequate Indoor Air Quality Through Ventilation and/or Filtration).
- A 1-metre distance between students should be aimed for when distancing is required, provided students are masked.^{22,113,115} If space in the classroom does not allow for adequate distancing, attention should be paid to other mitigation measures such as ventilation and filtration rather than a return to adaptive models.
- Changes in physical distancing can be accomplished practically during the school year by the type of interactive work. However, it will be important to plan for in-person spacing requirements should individual desk work be required.

	Low SARS-CoV-2 Risk	Moderate SARS-CoV-2 Risk	High SARS-CoV-2 Risk ^a
Kindergarten	Not required	Not required ^b	Not required ^b
Elementary School	Not required	Not required ^b	Not required ^b
Middle School ^c	Not required	Consider distancing consistent with recommendations for indoor spaces in the community ^d	Consider distancing consistent with recommendations for indoor spaces in the community ^d
High School	Not required	Consider distancing consistent with recommendations for indoor spaces in the community ^d	Consider distancing consistent with recommendations for indoor spaces in the community ^d

Table 6. Recommendations for Physical Distancing

^aGiven our current and anticipated vaccine coverage, high-risk scenarios imply the presence of a circulating variant of concern with vaccine escape. ^bWhile physically distancing within cohorts is not recommended, distancing between cohorts may be recommended when community transmission increases. ^cThe strategy used in middle school students should take into consideration the strategy used in the rest of the school to optimize processes. ^d1-metre distances between students are acceptable for classrooms provided students are masked.

Cohorting

School-based cohorting seeks to limit the number of student and staff who come into close contact with each other and reduce the number of exposures to SARS-CoV-2 infection. It also allows for more timely case and contact follow-up. For kindergarten and elementary school, cohorting reflects the natural state of in-school instruction, and it is an important mitigation strategy in the moderate to high-risk scenarios in this age group.

Cohorting in high schools through the use of adaptive learning models (e.g., quadmaster or octomester schedules, blended learning with reduced in-person instruction, hybrid learning, reduced specialized academic instruction/single teacher instruction), during the 2020-2021 school year aimed to reduce contact rates among students. It also enabled public health units to identify specific cohorts with high-risk exposures needing to isolate at home. However, for many students, the adaptive learning models used to deliver education in cohorts were not optimal for learning, development, or social interactions.^{116,117,117} Given the lead time required for scheduling /timetabling, it is unlikely that changes will be immediately possible. However, in the context of broad vaccine availability, efforts should be made to return to normal scheduling at the earliest opportunity.

Recommendations for cohorting:

- In the low-risk scenario, cohorting is not recommended for any age group.
- In kindergarten and elementary school (+/- middle school) and for children and youth with medical complexities:
 - The classroom is a natural cohort. In all scenarios, classroom cohorts should be reinforced at the start of the school year so that students stay mostly with the same class group indoors and there is less mixing between classes and years (with allowances for cohort mixing to support specialized education programs, rehabilitation and therapeutic services, transportation).
 - These cohorts should be as small as possible; therefore, the smallest class sizes possible should be implemented at the start of the school year to optimize learning and facilitate smaller cohorts should community transmission increase.
 - Classroom cohort mixing should be permitted outdoors (e.g., recess).
- In high school (+/- middle school):
 - Masking and physical distancing are preferred strategies over cohorting in moderate to high-risk scenarios, alongside vaccine campaigns in under-immunized communities.

- A certain degree of cohorting may be required at the start of the school year to minimize the number of contacts associated with a case and to allow for timely case and contact management. However, efforts should be made to return to normal scheduling at the earliest opportunity.

	Low SARS-CoV-2 Risk	Moderate SARS-CoV-2 Risk	High SARS-CoV-2 Risk ^a
Kindergarten	Reinforce classroom cohorts indoors ^b Minimize cross-collaboration between learning cohorts indoors	Reinforce classroom cohorts indoors ^b Minimize cross-collaboration between learning cohorts indoors	Reinforce classroom cohorts indoors ^b Restrict cross-collaboration between classroom cohorts indoors
Elementary School	Reinforce classroom cohort indoors ^b Minimize cross-collaboration between classroom cohorts indoors	Reinforce classroom cohort indoors ^b Minimize cross-collaboration between classroom cohorts indoors	Reinforce classroom cohort indoors ^b Restrict cross-collaboration between classroom cohorts indoors
Middle School^c	None	No cohorting; masking if vaccine escape variant or low vaccine uptake in school or community	Consider time-limited education in in-person time with increased online learning Distancing as described in Distancing section.
High School	None	No cohorting; masking if vaccine escape variant or low vaccine uptake in school or community	Consider time-limited reduction in in-person time with increased online learning Distancing as described in Distancing section

Table 7. Recommendations for Cohorting of School Students

^aGiven our current and anticipated vaccine coverage, high-risk scenarios imply the presence of a circulating variant of concern with vaccine escape. ^bMixing of cohorts should be permitted to allow for access of specialized education programs, rehabilitation and therapeutic services, transportation. ^cThe strategy used in Middle school students should take into consideration the strategy used in the rest of the school to optimize processes.

In-Person School Gatherings, Activities, and Lunch Hour

Schools provide an environment in which children and youth can participate in physical activities and enriching extra-curricular activities.¹ Restrictions were put into place during the 2020-2021 academic year on in-person gatherings, with limited school assemblies, music/theatre instruction, physical education, and extra-curricular clubs and sports, as a health and safety measure.¹¹⁸ These losses have had a substantial impact on children and youth's physical and mental health and overall wellbeing.¹¹⁹

Other jurisdictions were able to conduct in-person gatherings, music education, clubs and sports during the 2020-2021 academic year, with school-based measures responsive to community burden.^{120,121} With high vaccine uptake in the community and reduced community transmission, there should be a return to offering these enriching activities to Ontario students during the 2021-2022 academic year, with appropriate mitigation measures as required, and cancellation considered only in high-risk scenarios. The health and safety measures implemented for school-based programs should be consistent with those for similar community-based programs. A mechanism should also be in place to link between the activity and classroom cohorts for prompt identification of SARS-CoV-2 cases and contact tracing.

Music Education (Singing and Instruments)

Recommendations on the delivery of music programs within schools has been developed for Ontario schools that precede a gradual return to regular operations.¹²² As noted, qualified music teachers are uniquely situated to offer creative solutions, and rely on close administrative collaboration to deliver quality music education to all students. For choir and orchestra in the moderate-risk scenario, instruction can be taken outdoors in smaller, well-spaced groups (weather permitting) or remain indoors with distancing, masking, low-volume singing, and materials for safe wind instrument playing; this could be complemented by music theory, theatre history, or vocal anatomy lessons.¹²³ Students should be offered personal wind instruments, or instructed on proper sanitization of mouthpiece and instrument between uses. Where there are

smaller practice rooms that may be difficult to properly ventilate, masks should be worn if possible or the room restricted to individual use. Temporary measures in arts and theatre classes include rehearsing monologues, remote performances, and performances with small casts that do not require close interaction or outdoor rehearsals and performances.

Sports and Physical Education

Recommendations on physical education planning in Ontario schools include raising awareness among students of infection-related risks associated with the activity, administrative support to develop policies and procedures, and communication with the school community as temporary public health measures are introduced or lifted.¹²⁴

Lunchtime

In high-risk scenarios with standard class sizes, additional measures may reduce transmission risks during lunch hours, when students are in close proximity for prolonged periods of time without masks. For example, lunch and snack times can occur outdoors, when weather permits, with hand hygiene amenities readily accessible at designated locations. When indoors, measures to enable distancing of students during lunch hour include: use of additional indoor spaces such as gyms or other school spaces, shorter lunch times, or staggered lunch breaks. Closing cafeterias has not been shown to significantly reduce SARS-CoV-2 transmission, possibly due to the presence of other mitigation measures.⁶⁷

General Considerations

Large, well-ventilated spaces should be prioritized for activities where aerosols are likely to be generated outside of the school cohort (e.g., music room for choir and band practice, auditorium for woodwind and brass orchestra and dramatic arts, gymnasium for periods of strenuous physical activity). Plexiglass barriers are generally not recommended, as they have not been shown to reduce SARS-CoV-2 transmission and may in fact alter the airflow, leading to turbulence and recirculation in the room.^{61,117} Similarly, closing cafeterias, playgrounds and libraries, and wiping down and quarantining books, have not been shown to reduce SARS-CoV-2 transmission, possibly because of the presence of other mitigation measures and the limited role of fomite transmission.⁶⁷

In high community risk scenarios, the use of rapid antigen screen testing may be considered in order to maintain function of extra-curricular clubs and athletics, particularly those associated with significant aerosol dispersion indoors, such as choir, wind instruments, football and wrestling (“Test-To-Play” strategy, see Testing section).⁷³ Of note, rapid antigen screen testing is most effective alongside other mitigation measures, including distancing, masking, efforts to improve air quality, and outdoor activities and play.¹²⁵

The following table summarizes recommendations for in-person curricular and extra-curricular programs offered through school settings. Local SARS-CoV-2 patterns and public health decisions during school-related outbreak investigations may influence the risk determination and implementation of temporary measures and/or restrictions.

	Low SARS-CoV-2 Risk	Moderate SARS-CoV-2 Risk ^a	High SARS-CoV-2 Risk
Assemblies			
Elementary School	Permitted Size to be consistent with public health guidance to community	Restricted to cohort; masks required	Online
High School (+/- Middle School)	Permitted Size to be consistent with public health guidance for community	Restriction in number of individuals Masking consistent with public health guidance for community	Online
Choir / Singing			
Elementary School	Preferably outside ^b Inside with distancing; follow public health recommendations for singing indoors in the community	Outside, with distancing ^b Inside within cohort with masking and distancing	Outside, with distancing ^b
High School (+/- Middle School)	Choir practice preferably outside ^b Inside with distancing; follow public health recommendations for singing indoors in the community	Preferably outside, with distancing ^b Inside with masking and distancing	Outside, with distancing ^b
Music Education^c			
Elementary School	Permitted within cohort Permitted indoor group practice of wind instruments consistent with recommendations in the community One to one wind instrument use; sharing of wind instruments permitted with proper sanitization between use	Permitted within cohort One to one wind instrument use; sharing of wind instruments permitted with proper sanitization between use Indoor group practice of wind instruments consistent with recommendations in the community	Permitted within cohort One to one wind instrument use; sharing of wind instruments permitted with proper sanitization between use Indoor group practice of wind instruments not recommended
High School (+/- Middle School)	Permitted outdoors Permitted indoor group practice of wind instruments consistent with recommendations in the community One to one wind instrument use; sharing of wind instruments permitted with proper sanitization between use	Permitted outdoors Permitted indoor group practice of wind instruments consistent with recommendations in the community One to one wind instrument use; sharing of wind instruments permitted with proper sanitization between use	Permitted outdoors Indoor group practice of wind instruments not recommended One to one wind instrument use; sharing of wind instruments permitted with proper sanitization between use
Intramural Sports – Within Schools			
Elementary School	Permitted outdoors and indoors	Permitted outdoors and indoors Masking as per masking section (not required during physical activity)	Permitted outdoors For indoor sports consider Test-to-play strategy ^d
High School (+/- Middle School)	Permitted outdoors and indoors	Permitted outdoors and indoors Masking as per masking section (not required during physical activity)	Permitted outdoors For indoor sports consider Test-to-play strategy ^d
Extramural Sports – Between Schools			
Elementary School	Permitted	Permitted outdoors and indoors Masking as per masking section (not required during physical activity)	Permitted outdoors For indoor sports consider Test-to-play strategy ^d
High School (+/- Middle School)	Permitted	Permitted outdoors and indoors Masking as per masking section (not required during physical activity)	Permitted outdoors For indoor sports consider Test-to-play strategy ^d
Activities and Clubs			
Elementary School	Permitted	Permitted with masking ^a	Permitted outdoors
High School (+/- Middle School)	Permitted	Permitted ^a Masking indoors consistent with public health guidance for community	Permitted outdoors
Lunch Hour			
Elementary School	In classroom or outdoors	In classroom or outdoors within cohorts Distancing between and within cohorts in cafeteria	In classroom or outdoors within cohorts Distancing in cafeteria between students if in classroom or outdoors not possible
High School (+/- Middle School)	No restrictions	In classrooms and cafeteria Capacity limitations and distancing in cafeteria consistent with local public health guidance	In classroom or outdoors Capacity limitations and distancing in cafeteria between students if in classroom or outdoors not possible

Table 8. Recommendations for In-Person School Gatherings, Lunch hour and Activities

^aMeasures reflect in-class instruction with natural cohorts unless otherwise specified; extra-curricular activities should

align with specific regional public health guidance. ^bPublic health units may consider limiting these activities for the outdoors and/or with distancing in the context of local SARS-CoV-2 activity and vaccine coverage rates in schools. ^cFurther guidance, including the use of materials for safe wind instrument playing, can be found at <https://www.omea.on.ca/2021/06/safe-singing-and-playing-in-ontario-schools-document-available-now/> ^dTest-to-play was a strategy implemented in Utah that required testing every 14 days for participants in high school extracurricular activities.⁷³ It is described in the Utah COVID-19 School Manual¹²⁶ ^eDistancing may not be required in middle and high school if the vaccination rate is high.

Transportation to School

School transportation-related guidance from Canada and the US recognizes that communal transportation, such as busing, can increase the risk of SARS-CoV-2 transmission among susceptible children, youth, and adults due to many factors that include variable age ranges and compliance with masking and distancing, prolonged close contact while waiting in line and on the bus, and lack of supervision in some cases.^{127,128} During periods of low community transmission risk, bus transport should follow local public health guidance as for public transportation. Notably, when students were masked on school buses in North Carolina, the number of children per bus seat (1, 2, or 3) did not affect secondary transmission rates.¹⁰⁷

Recommendations for transportation to school:

- In moderate- and high-risk scenarios, temporary health and safety measures should be considered on public transportation, regardless of mask policies at school.
- Measures include active symptom screening by parents or caregivers prior to entering the bus, reducing the number of children on the bus at one time, and masking, particularly when the first two measures are not feasible.
- Windows should be open, weather permitting, to improve air circulation.

Interpretation

We have defined three broad scenarios of COVID-19 disease burden: (1) low-risk, where severe disease requiring hospitalization is limited and sporadic; (2) moderate-risk, where there is early evidence of an upward trajectory in severe disease requiring hospitalization and (3) high-risk, where there are high rates and continued upward trajectory of severe disease requiring hospitalization. SARS-CoV-2 transmission is an important secondary factor that can be considered in defining community risk, particularly early in the school year.

In the low-risk scenarios, recommendations on temporary measures in the school environment include a strategy for contact tracing and low-barrier testing as an early warning system for emerging variants and increased transmission, a permissive approach to masking, and no requirement for distancing or cohorting.

In the moderate-to-high community risk scenarios, an increase in temporary measures would be warranted in schools with emphasis on cohorting and age-dependent masking in kindergarten and elementary school students (without the need for physical distancing) and on masking with or without physical distancing (without the need for cohorting) in middle and high school students. It is recognized that individual jurisdictions in a low-risk scenario in September 2021 may choose more relaxed or more strict temporary measures depending on their local circumstances.

Author Contributions

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The authors would like to thank Nigel Bariffe, Stacie Carroll, Ruth Dawson, Michelle Foote, Michele Giroux, Monica Hau, Ryan Imgrund, Norah Marsh, Laura Mckoy, Giovanna Panzera, Tony Pontes, Abdu Sharkawy, the Ontario Principals' Council (OPC), the Catholic Principals' Council of Ontario (CPCO), and the Association Des Directions et Directions Adjointes des Ecoles Franco-Ontariennes (ADFO) for their contribution to this Science Brief.

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The Senate
Monday, July 26, 2021

Her Excellency the Right Honourable Mary Simon, 30th Governor General of Canada

Check against delivery

With great respect, I would like to acknowledge that today we are standing on the unceded territory of the Algonquin Anishinabe people, who have lived and cared for this part of the world for thousands of years.

To Prime Minister Trudeau, thank you for your faith in me and for your commitment to reconciliation. I am honoured, humbled and ready to be Canada's first Indigenous governor general.

Where we gather today is of enormous significance to me. 39 years ago, when this was the Government Conference Centre, I worked with other Indigenous leaders and First Ministers to have our rights affirmed in the Constitution of Canada. That moment made this one possible.

I also want to offer my heartfelt gratitude to Her Majesty The Queen for placing her trust and confidence in me. I know she has an abiding love for this magnificent country.

And to my family: thank you to my husband, Whit, to my children, Richard, Louis, and Carole, to my step-children, Rhonda, Dianne and Whitney, to my siblings, and, of course, to my grandchildren and great-grandchildren. All of you have given me strength, purpose, love and inspiration over the course of my life.

To the Canadian Armed Forces, I am honoured to be taking on the role as commander-in-chief of Canada. Thank you for embodying the meaning of sacrifice, valour and service on behalf of all Canadians. Your conviction and courage is of the highest order and represents the very best of all of us. I'm looking forward to meeting those serving in the Army, Navy, Air Force and the Canadian Rangers and other Reserve units in the days ahead.

Since the announcement of my appointment, I have been deeply touched by the responses from Canadians who have reached out to me.

- I have heard from Canadians who describe a renewed sense of possibility for our country and hope that I can bring people together.
- I have heard from Canadians who have challenged me to bring a new and renewed purpose to the office of the governor general to help Canadians deal with the issues they are facing.
- I have heard from Canadians who have expressed their support in my commitment to learn French, and have even offered to assist me in my training!
- And I have heard from Canadians who see Rideau Hall as the people's hall—reflecting the values, aspirations and diversity of our great Canadian family.

I am truly grateful for these words of support and guidance.

As governor general, I am fully committed to setting and maintaining the highest possible standard of work and ethics in all aspects of my duties.

Today is an important and historic day for Canada. But my story, to these chambers, began very far from here.

I was born Mary Jeannie May in Arctic Quebec, now known as Nunavik. My Inuk name is Ningiukudluk.

I spent my adolescence in Nunavik, living a traditional lifestyle with my parents. My mom, Nancy, was Inuk. My father, Bob, who was from the south, managed our local Hudson's Bay company post.

Many months out of the year we lived on the land—travelling by dog team or boat ... hunting, fishing and gathering food.

Over the years I have exchanged stories with Canadians about favourite childhood memories. This is mine: lying in our family's tent along the George River, on a bed of spruce boughs and caribou skins, listening to the early morning sound of birds, and the crunch of snow under the feet of our dog team.

What I valued most about my upbringing was my parents teaching my siblings and I how to live in two worlds—the Inuit world and the non-Inuit southern world.

This foundation of core values has both served and shaped me throughout my life, and I believe helped me get to an important turning point as a young girl, when I stopped being afraid.

It took time before I gained the self-confidence to assert myself and my beliefs in the non-Indigenous world. But when I came to understand that my voice had power and that others were looking to me to be their voice, I was able to let go of my fear.

My first language—Inuktitut—is the language that defines Inuit as a people, and is the foundation of our very survival.

My second language—English—became a gateway to the world beyond.

And now, I am committed to adding Canada's other official language, French.

At this point in our shared history it is clear that many languages are part of the fabric of our nation, as are the stories of those who have come to Canada in search of a new life.

Later, in my early 20s living in Montréal, I worked for the CBC, and found myself sight translating the news and explaining to Inuit listeners across the Arctic the news stories from around the world.

But there has always been another guiding force in my life—the importance of promoting healing and wellness through all forms of education, from creating public policy, to legislative reform, to improving school curricula, to advocating for human rights.

I have had the privilege in my career of travelling extensively to all provinces and territories. What I remember most is not the meetings or conferences, but the mix of cultures and heritage that make Canada a beacon to the world.

I will never forget the selfless work of Canadians in every corner of this country. Every day, inside small community halls, school gyms, Royal Canadian Legions, places of worship, and in thousands of community service organizations, there are ordinary Canadians doing extraordinary things.

As governor general I will never lose sight of this—that our selflessness is one of our great strengths as a nation.

I pledge to be there for all Canadians.

Canada is an Arctic nation. Our Arctic is one of the most unique places on the planet—from spring geese to winter darkness, to some of the largest wildlife migrations anywhere on earth. Our North is also a well-lived and lived-in homeland for Inuit, First Nations and Métis people.

The Arctic matters a lot to Canada and to the world. Canada has championed the creation of the Arctic Council and the Central Arctic Ocean Fishing Agreement. We have settled modern treaties with Inuit. We have passed the *Arctic Waters Pollution Prevention Act* to assure sovereignty over the Northwest Passage, and developed a circumpolar dimension to its foreign policy, which recognized that human security must include environmental security.

For many years, Canada has experienced a disproportionate level of impact from climate change because the Arctic is warming faster than almost anywhere else on the planet. The Arctic represents nearly 40 per cent of our landmass, and may be free of summer sea ice in the coming decades.

The twin global crises of nature destruction and climate change are undoubtedly the challenge of our time. For evidence, we need only look at the Arctic, and what has happened this past month across the country: the devastating impacts of forest fires, prolonged droughts, record heat waves.

I believe that in order to have a healthy future, we must reset our thinking to understand that nature contains and creates our climate. Our climate allows society to be possible, and within our society is our economy.

As governor general, I will promote and recognize leading examples of community and Indigenous-driven conservation and of climate action that are making a real difference and can inspire other Canadians to do the same. I hope to promote these examples of Canadian leadership nationally and around the world.

I have always viewed Canada as a metaphor for family.

As members of our large and diverse Canadian family, we have to replace the hurt with hope and find the grace and humility to stand together and move towards a more just and equitable future.

Addressing mental health and wellness within our families, our schools, our work places and our front-line services is hard and necessary work, but think of the possibilities for stronger, healthier and more prosperous communities.

I would like to acknowledge all Canadians who have sacrificed their own safety by providing essential services during the pandemic so that the rest of us could stay safe. You stepped up when the rest of us were told to stay home. Thank you.

As governor general I am committed to using this moment in our country's history to build on the work of de-stigmatizing mental health so it is viewed through the same lens as physical ailments, and receives the same attention, compassion and understanding.

Since the publication of the Truth and Reconciliation report 6 years ago, we have learned as a country that we need to learn the real history of Canada. Embracing this truth makes us stronger as a nation, unites Canadian society and teaches our kids that we must always do our best, especially when it's hard.

The discoveries of unmarked graves on the grounds of residential schools in recent weeks has horrified me, along with all Canadians.

A lot of people think that reconciliation will be completed through projects and services. All Canadians deserve access to services.

My view is that reconciliation is a way of life and requires work every day.

Reconciliation is getting to know one another.

As stated in the Truth and Reconciliation Commission report:

Reconciliation must support Aboriginal peoples as they heal from the destructive legacies of colonization that have wreaked such havoc in their lives.

We are reminded daily that even though diversity is a core Canadian value, our country must do more to respect all languages, cultures, ethnicities, religions and ways of living.

As governor general, I will embody our nation's commitment to diversity and acceptance. I've always believed the Right Honourable Kim Campbell held the country up to the correct standard when she said, "Canada is the homeland of equality, justice and tolerance." Recognizing that one fifth of all Canadians were born somewhere else, it is more important than ever to make sure we live up to this commitment.

To meet this moment as governor general, I will strive to hold together the tension of the past with the promise of the future, in a wise and thoughtful way.

Our society must recognize together our moments of regret, alongside those that give us pride, because it creates space for healing, acceptance and the rebuilding of trust. I will strive to build bridges across the diverse backgrounds and cultures that reflect our great country's uniqueness and promise.

I pledge to meet Canadians in all provinces and territories to learn first-hand what people are facing, and what could be done to make their lives better.

On the strength of those governors general who served before me, I commit to Canadians that I will move forward with humility and purpose to meet this moment in our shared history.

Whit and I, and our dog, Neva, are excited and honoured that Rideau Hall will be our family home. We also plan to spend time living and working at the Citadelle in the City of Québec.

I am truly honoured by this call to service and I will do my best each and every day to be worthy of it.

Thank you. Merci. Miigwetch. Nakurmiik

From: OCSTA - Sharon McMillan <SMcMillan@ocsta.on.ca>
Sent: Tuesday, July 27, 2021 11:03 AM
To: OCSTA - Sharon McMillan <SMcMillan@ocsta.on.ca>
Subject: Catholic Education Week Logo for 2021-22 School Year
Importance: High

Caution - External Email - This Message comes from an external organization. Do NOT click on unrecognized links or provide your username and/or password.

To: Ontario's CDSB Chairs, Directors of Education and Communications Staff

As is our practice, OCSTA is pleased to share with you the attached logo and design files to support the branding and promotion of Catholic Education Week resources for the 2021-22 school year.

OCSTA's Director of Catholic Education, Anne O'Brien has previously communicated in a spring memo the Catholic Education Week Theme for the 2021-22 year which is *Rebuild, Restore, Renew Together* (see logo below). If you have any questions regarding these files and branding please do not hesitate to contact me at smcmillan@ocsta.on.ca.



Sharon McMillan
DIRECTOR OF COMMUNICATIONS

Ontario Catholic School Trustees' Association www.ocsta.on.ca
Cell: 416.460.7937 T: 416.932.9460 ext. 232

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From: OCSTA - Sharon McMillan <SMcMillan@ocsta.on.ca>

Sent: Tuesday, August 3, 2021 2:54 PM

To: OCSTA - Sharon McMillan <SMcMillan@ocsta.on.ca>

Subject: OCSTA President Comments on Release of Provincial Guidelines for the Opening of the 2021-22 School Year

Importance: High

Caution - External Email - This Message comes from an external organization. Do NOT click on unrecognized links or provide your username and/or password.

To: All Trustees and Directors of Education – Ontario Catholic District School Boards



Ontario Catholic School Trustees' Association

Statement from OCSTA President, Patrick Daly

August, 3, 2021

"The Ontario Catholic School Trustees' Association is very pleased to be in receipt of Ministry of Education guidance for the opening of the 2021/22 School Year. We know the information will be of tremendous assistance to Catholic School Boards as they continue to do all they can to plan and prepare for a safe, successful and faith-filled school year.

We recognize and appreciate the prudent approach throughout the guidance material. We say that knowing that in-school learning is

necessary and most beneficial to students, and out of our shared commitment to not only re-open schools but to keep them open.”

Patrick Daly
President
Ontario Catholic School Trustees' Association

Sharon McMillan
DIRECTOR OF COMMUNICATIONS

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Patrick J. Daly, *President*
Michael Bellmore, *Vice President*
Nick Milanetti, *Executive Director*

August 5, 2021

MEMORANDUM

TO: Chairpersons and Directors of Education
- All Catholic District School Boards

FROM: Anne O'Brien, Director of Catholic Education

SUBJECT: Catholic Education Week Kit for the First Week of School

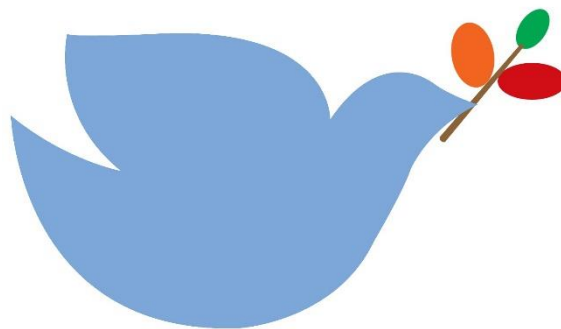
The 2022 Catholic Education Week Committee is pleased to make available to our Catholic schools, a **First Week of School Kit** which contains prayers for each day of the opening week of school and possible readings and songs for the celebration of the Eucharist.

Our theme for Catholic Education Week 2022 is:

Catholic Education: *Rebuild, Restore, Renew Together*
L'éducation catholique: *Rebâtir, Rétablir, Renouveler Ensemble*

May I request your assistance in making a copy of the **First Week of School Kit** available to all schools in your board.

Thank you for your ongoing, generous cooperation and support for publicly-funded Catholic education.



PROMOTING AND PROTECTING CATHOLIC EDUCATION

FIRST WEEK OF SCHOOL RESOURCE PACKAGE



SEPTEMBER 2021

INTRODUCTION

SEPTEMBER 2021

The new school year offers us an opportunity to reflect upon our personal, professional and spiritual growth and to set some new goals.

The theme chosen for the upcoming 2022 Catholic Education Week is:

Catholic Education: *Rebuild, Restore, Renew Together*
L'éducation catholique: *Rebâtir, Rétablir, Renouveler Ensemble*

Catholic Education Week is held each year in May in our 29 Ontario Catholic school boards. It will run from May 1 – May 6, 2022.

The theme for Catholic Education Week 2022, *Rebuild, Restore, Renew Together*, was inspired by the following considerations:

- In the face of the continuing reality of the COVID-19 pandemic, a strong desire by the planning committee, and supported by feedback from the survey, the themes for Catholic Education Weeks 2020 and 2021, were *Igniting Hope* and *Nurturing Hope*, and all we know for certain is that there will be much to *Rebuild, Restore and Renew* together in 2022.
- The challenges to personal and spiritual well-being posed by the uncertainty and physical isolation of the current global crisis makes the timing and the concerns of Mental Health Week, which takes place during the same week as Catholic Education Week, all the more relevant.
- Ongoing recognition of the Truth & Reconciliation Commission and the relevance of Indigenous culture and spirituality will continue to move us forward.
- The Ministry of Education's focus on Inclusion and Equity resonates with all educators and administrators as we desire to serve all of God's children and Pope Francis' encyclical entitled, *Fratelli Tutti*, will guide us in this good work.

At this time, we felt it was important to celebrate the good work and hope of Catholic education now and in the future.

A big thank you to the consultants from eight of our English and French Catholic boards who worked together to craft the 2022 Catholic Education Week theme and sub-themes. These writers will also be producing resources for our Catholic school boards for Advent and for Catholic Education Week in May 2022.

The sub-themes for Catholic Education Week 2022 are as follows:

Monday: **Rediscover / Redécouvrir**

Tuesday: **Rebuild / Rebâtir**

Wednesday: **Restore / Rétablir**

Thursday: **Renew / Renouveler**

Friday: **Rejoice / Se réjouir**

Overall Theme Prayer for Catholic Education Week 2022

Catholic Education Week Prayer

God of grace,
help us to rediscover how to be side by side
in rebuilding our communities of faith and learning.
Help us restore harmony and balance in our relationships,
and renew our desire to approach challenges confidently and with peaceful hearts.
May we always rejoice in recognizing the blessings our lives hold.
Amen. +

Prière pour la semaine de l'éducation catholique

Dieu de grâce,
aide-nous à redécouvrir comment vivre les uns avec les autres,
afin de rebâtir nos communautés de foi et d'apprentissage.
Aide-nous à rétablir l'équilibre et l'harmonie dans nos relations
et viens renouveler notre volonté d'aborder les défis avec confiance et un cœur paisible.
Pussions-nous toujours nous réjouir en reconnaissant ta bonté dans notre vie.
Amen. +

PRAYERS FOR THE FIRST WEEK OF SCHOOL, ELEMENTARY – SEPTEMBER 2021

Rediscover – Redécouvrir

Loving God,
We come back to school with much excitement and confidence.
It has been a long time since we have sat in our classrooms with our classmates and teachers.
May this year have fewer disruptions so we can rediscover how to learn together, face to face and side by side.
Remind us to be patient and kind to one another in our classes, in the hallways, and on the playgrounds.
Amen.

Rebuild – Rebâtir

Jesus, brother and friend,
Be with us as we rebuild our Catholic learning community together.
In the last couple of years, we have been connected and disconnected and reconnected.
May we have time in these next few weeks to rebuild our friendships, and begin new ones.
May we form a close bond with our teachers and our classmates.
May we learn, grow, and have fun together.
Amen.

Restore – Rétablir

God of grace and love,
We thank you for the opportunities awaiting us this year, the fresh starts, the new beginnings, the chances to reconnect.
Help us to make good choices this year as we learn to be together again.
Restore balance and peace in our school community.
Guide us in word and action to welcome, value, and celebrate all members of this community as your beloved children.
Remind us to always walk in your light, with hope in the goodness of our community.
We ask this through Christ our Lord.
Amen.

Renew – Renouveler

Loving God,
With every rising of the sun, you invite us to newness and healing.
Thank you for the gift of a new day and a new chance to renew our hearts in hope for a bright future and a strong community.
We ask that you also renew our spirits, so that we may work to bring kindness to our friends, families, and school community.
We make this prayer in Jesus' name.
Amen.

Rejoice – Se réjouir

God of all goodness,
We rejoice in these first days of school because we know that we belong to you.
Open our eyes to see the beauty of your world around us, in each other, and in all of creation.
Help us to rejoice and celebrate what makes each of us so special to you.
Glory to you, Lord our Creator, source of wonder and joy!
Amen.

PRAYERS FOR THE FIRST WEEK OF SCHOOL, SECONDARY – SEPTEMBER 2021

Rediscover – Redécouvrir

God of grace and goodness,
This return to school is welcomed and we hope that our days will be free from disruptions.
Guide us as we rediscover how to negotiate classes, homework, activities and relationships.
For our new students and staff, nudge us to be welcoming.
May the year ahead be calm and peaceful.
Amen.

Rebuild – Rebâtir

Jesus, brother and friend,
It is good for us to remember that you walk alongside us this year.
As we rebuild our school lives, remind us that four years can fly by, and being involved gives these years purpose and joy.
We will all benefit if we participate in rebuilding the new “normal” of post-COVID school life.
We all have our part to play.
Amen.

Restore – Rétablir

Lord Jesus, master teacher and saviour,
Guide us to lead and serve the poor, vulnerable, and one another, in your image and likeness.
Give us the courage and strength to restore and reconcile relationships that need care and healing, and nurture us to *Rebuild, Restore and Renew Together*, now and always.
For this, we ask your blessings.
Amen.

Renew – Renouveler

God of all people,
Despite the challenges that we have faced in the past two years, we come together in hope and joy to learn and grow in community.
Renew our spirits with courage and perseverance, that we may see this time of awakening as a chance to stand for justice and love.
We thank you for the gift of each new day and the chance to renew our sense of community.
We make this prayer in the name of Jesus, who walks with all people.
Amen.

Rejoice – Se réjouir

God of every day and hour, of every week and month,
We rejoice in these first days of this school year, because we know we are YOURS...
Your beloved and gifted children, whom you cherish and bless.
Open our eyes to rejoice at the beauty of your world all around us, in the wonderful diversity of our human family, and in all the amazing ways you speak to us in Creation.
Help us to rejoice in those who journey with us, and may we rejoice in the uniqueness that makes each of us so special in your eyes.
Glory to you, Lord our Creator, source of wonder and joy!
Amen.

**LITURGY PLANNING GUIDE FOR *REBUILD, RESTORE, RENEW TOGETHER*
FOR THE FIRST WEEK OF SCHOOL**

	Monday August 30	Tuesday August 31	Wednesday September 1	Thursday September 2	Friday September 3	Thematic Setting for Mass
Feast Day			World Day of Prayer for the Care of Creation		St. Gregory the Great	
Reading	1 Thes. 4:13-18	1 Thes. 5:1-6, 9-11	Col. 1:1-8	Col. 1:9-14	Col. 1:15- 20	1 Pt 5:6-7, 10-11
Psalm	Ps. 96:1, 3, 4-5, 11-12, 13 (R. 13b)	Ps. 27:1, 4, 13-14 (R. 13)	Ps. 52:8, 9 (R. 8b)	Ps. 98: 2- 3ab, 3cd-4, 5-6 (R. 2a)	Ps. 100:1- 2, 3, 4, 5 (R. 2c)	Ps. 51:6-7, 10-11, 12, 15 (R. 12a)
Gospel	Luke 4:16- 30	Luke 4:31- 37	Luke 4:38- 44	Luke 5:1- 11	Luke 5:33- 39	Luke 6:39- 42

	Tuesday September 7	Wednesday September 8	Thursday September 9	Friday September 10
Feast Day		Birthday of Mary		
Reading	Col. 2:6-15	Rms 8:28-30 OR Micah 5:2-5a	Col. 3:12-17	1 Tim 1:1-2, 12- 14
Psalm	Ps. 145:1-2, 8-9, 10-11 (R. 9)	Ps. 13:5, 6 (R. 61.10)	Ps. 150:1-2, 3-4, 5-6 (R. 6)	Ps. 16: 1-2a, 5, 7-8, 11 (R. 5a)
Gospel	Luke 6:12-19	Matthew 1:18- 23	Luke 6:27-38	Luke 6:39-42

PLANNING SHEET FOR EUCHARISTIC CELEBRATIONS

Date: _____ Occasion/Feast: _____ Time: _____

Location: _____ Presider: _____

Altar Server(s): _____, _____, _____

Minister(s) of Hospitality: _____, _____, _____

Greeting by: _____

INTRODUCTORY RITES

- a) Gathering Song _____ Sung ____
- b) Greeting and Opening Prayer (Celebrant)
- c) Penitential Rite (Celebrant)
- d) Gloria _____ Omitted ____ Spoken ____ Sung ____

LITURGY OF THE WORD

- a) First Reading _____ by: _____
- b) Responsorial Psalm _____ Sung ____
- c) Second Reading (*Optional*) _____ by: _____
- d) Gospel Acclamation _____ Sung ____
- e) Gospel _____
- f) Homily _____
- g) Creed (*may be omitted*) _____
- h) Prayer of the Faithful by: _____
 Response: _____

LITURGY OF THE EUCHARIST

- a) Presentation of the Gifts
 Song _____ Sung ____
 Gifts Presented by: _____
- b) Preface (Celebrant)
- c) Holy Holy _____ Sung ____
- d) Memorial Acclamation _____ Sung ____
- e) Doxology _____ Sung ____
- f) Great Amen _____ Sung ____
- g) Lord's Prayer _____ Sung ____
- h) Sign of Peace/Lamb of God _____ Sung ____
- i) Communion (Eucharistic Minister) _____
 Extraordinary Minister(s) of the Eucharist _____

CONCLUSION

- a) Blessing and Dismissal _____
- b) Concluding Song _____ Sung ____

From: OCSTA - Sharon McMillan <SMcMillan@ocsta.on.ca>

Sent: Sunday, August 8, 2021 3:22 PM

To: OCSTA - Sharon McMillan <SMcMillan@ocsta.on.ca>

Subject: Former Minister of Education and Premier William G. Davis - 1929-2021

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Ontario Catholic School
Trustees' Association

August 8, 2021

MEMORANDUM

TO: All Trustees and Directors of Education
- All Catholic District School Boards

CC: OCSTA Staff
Board Secretaries and Administrative Assistants

FROM: Patrick J. Daly, President

SUBJECT: Former Minister of Education and Premier William G. Davis – 1929 - 2021

We are saddened by the passing of former Minister of Education and Premier of Ontario, the Honourable William G. Davis. As we know, former Premier Davis made a significant and lasting contribution to publicly funded Catholic education in Ontario. His pivotal decision in 1984 to extend funding for Ontario's Catholic schools allowed students in our system to complete their secondary education, without having to pay tuition fees for grades 10 and beyond.

The Association was pleased to have welcomed Premier Davis to a number of OCSTA conferences throughout the years. At these events our membership had an opportunity to acknowledge and express deep appreciation for his role in strengthening publicly funded Catholic education in Ontario.

We pray for the repose of his soul and extend our deepest condolences to his family.


Sharon McMillan
DIRECTOR OF COMMUNICATIONS

Ontario Catholic School Trustees' Association www.ocsta.on.ca
Cell: 416.460.7937 T: 416.932.9460 ext. 232

COVID-19 Guidance: School Case, Contact, and Outbreak Management

Updated August 11, 2021

Summary of key updates

- Asymptomatic contacts of confirmed or probable cases are not required to isolate if they are fully immunized, or if they were previously positive within the past 90 days and have since been cleared, unless otherwise specified by the health unit.
- Asymptomatic household members of symptomatic individuals are not required to isolate if they are fully immunized, or if they were previously positive within the past 90 days and have since been cleared.
- High-risk contacts of a case are to isolate for 10 days, unless they are fully immunized or if they were previously positive within the past 90 days and have since been cleared, unless otherwise specified by the health unit.
- If there is a known source of exposure, isolation period and testing dates should generally be counted from the day of last known exposure to the confirmed case. If the source of exposure is unknown, the isolation period should begin from the last exposure to the cohort.
- For asymptomatic high-risk contacts who are not fully immunized or previously positive within the past 90 days and have since been cleared, testing is to be recommended on or after day 7 of their isolation period. If a test is collected before day 7, a repeat test on or after day 7 is recommended.
- For high-risk contacts who are fully immunized or were previously positive within the past 90 days, testing is to be recommended as soon as possible upon notification of exposure.
- A range of options are outlined for more stringent approaches to case/contact and outbreak management depending on outbreak situations (e.g., if symptomatic cases are identified among fully immunized individuals).

Introduction

This guidance document provides information for local public health units (PHUs) investigating cases, outbreaks, and suspected outbreaks associated with elementary or secondary (K-12) school settings. It is intended to supplement existing public health guidance on the [Management of Cases and Contacts of COVID-19 in Ontario](#) and [COVID-19 Fully Immunized and Previously Positive Individuals: Case, Contact and Outbreak Management Interim Guidance](#). In the event of a discrepancy between this Guidance and a Directive of the Chief Medical Officer of Health, the Directive prevails. **PHUs may also implement additional measures that are not outlined in this guidance, based on local circumstances and/or PHU investigation and risk assessment.**

Please check the Ministry of Health (MOH)'s [COVID-19 Guidance for the Health Sector website](#) regularly for updates to this document, the case definition, reference document for symptoms, testing guidance, and other guidance documents and information. In addition, the [COVID-19 Screening tool](#) outlines screening questions and provides recommendations to support decision making by students/children, parents (on behalf of students/children), employees, and visitors about whether they or the student/child can attend school/child care.

This guidance applies to PHU investigations associated with all schools as that term is defined in the [Health Protection and Promotion Act](#) (HPPA), which includes private schools, and schools as defined in the [Education Act](#). This guidance also supports PHU investigations associated with child care and before/after school programs.

Sector-specific guidance documents provide additional information and guidance for the operation of schools, child care, and before/after school programs, including:

- [COVID-19: Health, safety and operational guidance for schools \(2021-2022\)](#)
- [Operational Guidance for Child Care During COVID-19 Outbreak](#)
- [Before and After School Programs Kindergarten – Grade 6: Policies and Guidelines for School Boards](#)

Roles & Responsibilities

Role of Public Health Units (PHUs)

PREVENTION AND PREPAREDNESS

- Advise school administrators and school boards on COVID-19 prevention (including hierarchy of controls) and preparedness for managing COVID-19 cases, contacts, and outbreaks, in conjunction with any advice provided through the Ministry of Education (EDU) and Ministry of Health (MOH).
- Provide local school administrators and staff with public health resources.
 - Examples of resources include:
 - [How to wash your hands \(fact sheet\)](#)
 - [How to Self-Isolate \(fact sheet\)](#)
 - [Self-isolation: Guide for caregivers, household members and close contacts \(fact sheet\)](#)
 - How to [put on](#) and [take off](#) PPE (videos)
 - [Putting on and taking off PPE](#) (poster)
 - [Non-medical Masks and Face Coverings](#) (fact sheet)
 - [Cleaning and Disinfection for Public Settings](#) (fact sheet)
 - [When and where](#) to get tested for Covid-19
 - [You were tested for COVID-19: What you should know](#)
 - [How to Protect Yourself from COVID-19](#) (fact sheet)
 - [When to Self-isolate for Household Members](#) (fact sheet)
 - Additional [School and COVID-19 resources](#)

CASE AND CONTACT MANAGEMENT

- Receive, investigate, and manage reports of cases and contacts of COVID-19, including decisions on case and contact management, in accordance with public health guidance on the [Management of Cases and Contacts of COVID-19 in Ontario](#) and [COVID-19 Fully Immunized and Previously Positive Individuals: Case, Contact and Outbreak Management Interim Guidance](#), the HPPA, and any other relevant [MOH guidance](#).
- Consider notifying the school's principal or designate and the Director of Education or designate if a case of COVID-19 is identified in a staff, student, or

visitor associated with an elementary or secondary school setting.

- Have a dedicated communication process to allow for timely notification, such as a dedicated email address for school reporting.
- Provide recommendations on cohort dismissal and isolation¹ in response to a case.
 - The PHU may ask that school principals, or their designates, dismiss individuals or cohorts while awaiting the results of a public health investigation.
- Provide appropriate resources and supports to principals (e.g., decision guides, instructions for reporting potential or suspected onsite exposure to the PHU and/or when to seek urgent PHU direction).

OUTBREAK ASSESSMENT AND MANAGEMENT

- Investigate cases and clusters of cases associated with school locations (e.g., school transportation, in-person attendance or work at a physical school location, other facilities shared with schools), child care settings, and before/after school programs.
- Determine if an outbreak exists and declare an outbreak.
- Provide guidance and recommendations to the school on outbreak control measures, in conjunction with any advice provided by EDU, MOH, and PHO.
- Provide recommendations on isolation of cohorts and the potential need for full or partial school dismissal based on the scope of the outbreak.
- Make recommendations on who to test and frequency of testing as part of a case or outbreak investigation, in alignment with the province's broader testing strategy; facilitate a coordinated, equitable, and accessible approach to testing (e.g., on site, walkable, drop-in, approved take-home kits), with consideration for acceptability of specimen type for optimizing uptake, in collaboration with Ontario Health/local testing partners, including provision of an investigation or outbreak number.

¹ While the isolation of asymptomatic contacts is technically termed "quarantine," the common use of "isolation" or "self-isolation" is used to refer to both symptomatic/infected and exposed individuals. Therefore we have adopted the language of "isolation" for asymptomatic close contacts who are COVID-19 negative or not tested for ease of understanding, in addition to those who are symptomatic and/or infected.

- Conduct an on-site investigation as part of the outbreak investigation, where necessary, in accordance with the HPPA and in coordination with school administrators and school boards, and other relevant stakeholders (e.g., Ministry of Labour, Training and Skills Development - MLTSD).
- Issue orders by the medical officer of health in accordance with the HPPA, if necessary.
- Declare the outbreak over.

SURVEILLANCE

- Monitor and assess local epidemiology related to the burden of COVID-19 cases, transmission risks in the local community, and absenteeism in schools.
- Enter cases, outbreaks, and school exposures in the provincial surveillance system, in accordance with data entry guidance provided by Public Health Ontario (PHO). Confirmed cases associated with before/after care should be reported as a child care setting, not as a school setting.

COORDINATION AND COMMUNICATION

- In the event that a case or contact resides in a PHU that is different than that of the school, discussions between the impacted PHUs should take place to coordinate contact follow-up.
 - The PHU of the school is typically the lead PHU for school follow-up.
 - Request support from the Ministry of Health's Emergency Operations Centre (MEOC) if coordination between multiple PHUs is required for outbreak management.
- Notify the MEOC of:
 - Potential for significant media coverage or if media releases are planned by the PHU and/or school.
 - Any orders issued by the PHU's medical officer of health to the school, and share a copy.
- Engage and/or communicate with relevant partners, stakeholders, and ministries, as necessary.
- Assist school administrators and school boards with development of key messages and communication tools that can be provided to members of the school community in the event of a COVID-19 case, COVID-19 outbreak, or suspected COVID-19 outbreak. Coordinate public communications, including media, regarding school outbreaks with school administrators and school board

partners, and the MOH, as needed. Identifying a spokesperson in each organization should occur prior to an outbreak being publicly declared.

Role of Ministry of Health (MOH)

- Provide legislative and policy oversight to Boards of Health.
- Issue provincial guidance to PHUs on the management of COVID-19 cases, contacts, and outbreaks.
- Advise on regional and provincial school interventions.
- Provide ongoing support to PHUs with partner agencies, ministries, health care professionals, and the public, as necessary.
- Support PHUs during investigations, through the MEOC and/or Office of the Chief Medical Officer of Health (OCMOH), with respect to coordination, communications, etc., if requested and as appropriate.
- Support and coordinate teleconferences, as needed (e.g., if multiple PHUs are involved) via the MEOC.
- Receive notification through the MEOC:
 - If the PHU believes there is potential for significant media coverage or if media releases are planned by the PHU and/or school.
 - If orders are issued by the PHU's medical officer of health to the school.

Role of Ontario Health (OH)

- Coordinate local planning among health system partners for testing to ensure the availability of testing resources.
- Work with PHUs, schools/school boards and local testing partners (e.g., designated assessment centres / hospitals) to develop plans for timely, accessible, local testing options (e.g., on site, walkable, drop in, take home kit) for students, with consideration to the acceptability of specimen type, their families (as appropriate) and staff, to support uptake of testing when testing is recommended by the local PHU (e.g., as part of testing in response to a case or outbreak investigation).
- Identify and support addressing equity considerations related to testing, e.g., minimize barriers to accessing timely testing and results, and coordinate with testing initiatives for High Priority Communities.
- Coordinate the deployment of testing resources and modalities to meet the priority testing needs identified by the PHU.

- Collaborate with PHU, school boards, and schools to monitor testing demands and access.
- Work with [testing centres and partners](#) to optimize sample collection and distribution to reduce turnaround times.

Role of Public Health Ontario (PHO)

- Provide scientific and technical advice and support to PHUs for case and contact management, outbreak investigations (including IPAC measures), and data entry.
- Advise on and support laboratory testing, as needed.
- Provide scientific and technical support to MOH and PHUs, including during multi-jurisdictional teleconferences.
- Produce provincial epidemiological and surveillance reports related to COVID-19 in schools to support PHUs and provincial ministries, and evidence-informed resources and learning opportunities relevant to schools and school boards.

Role of Ministry of Education (EDU)

- Provide legislative and policy oversight to school boards.
- Communicate expectations and provincial guidance on COVID-19-related policies, measures, and practices for schools and school boards.
- Ensure that school boards are aware of their duties as employers under the [Occupational Health and Safety Act](#) (OHSA) and its regulations, including to report occupational illness to the MLTSD.
- Provide ongoing support and communication to school boards with partner agencies, ministries, and the public, as necessary.
- Support the procurement of supplies of personal protective equipment (PPE).

Role of school administrators and school boards

- Report a communicable disease to their local PHU, as per [s.28 of the HPPA](#).
- Follow duties and processes under OHSA and its regulations.
- Implement prevention (e.g., infection prevention and control) measures found in guidance or as directed by the EDU, MOH, MLTSD, and the local PHU.
- Coordinate with the local PHU and other stakeholders as appropriate, as part of the investigation of cases, contacts, and outbreaks.
- Maintain accurate records of staff and student attendance, for all common school locations attended by staff and students (e.g., school transportation, in-

person attendance or work at a physical school location, before/after school programs located at a school, or other facilities shared with the school) for the last 30 days, as well as up to date contact information for staff and students. This information should be available to be accessed and shared with the local PHU in a timely manner (within 24 hours) for investigations and communications.

- Facilitate access for PHUs to staff lists for staff not directly employed by the school board (e.g., transportation staff, before/after school program staff). Keep a log of all visitors (e.g., essential volunteers, contractors, parents/guardians, etc.) who enter the school, location(s) visited and dates/times of visit to facilitate contact follow-up if needed.
- Provide PHU with the name(s) and contact information of a designated point of contact for use during and after business hours, to ensure timely investigation and follow up cases, contacts, and outbreaks.
- In collaboration with the PHU, communicate proactively with the school community about COVID-19 prevention measures and about how symptomatic/asymptomatic individuals, cases, and outbreaks will be handled.
 - Develop a communication plan, in collaboration with the local PHU, for managing concerns in the school setting, and use this proactively and responsively as needed in schools.
- Provide training to school staff with respect to outbreak prevention and control measures, including IPAC measures and the use of PPE.
- Make masks available to students, as needed.
- If requested by the PHU, school principals may dismiss individuals and/or cohorts while awaiting the results of the public health investigation.
- In general, schools should not report all instances of ill or symptomatic individuals in the school setting to the PHU, as these are frequent occurrences and typically students have non-specific symptoms.
 - In accordance with the reporting obligations under [s.28 of the HPPA](#), school principals are required to report to the medical officer of health of the health unit in which the school is located if they are of the opinion that a pupil has or may have a communicable disease, which includes but is not limited to COVID-19 (e.g., mumps, chicken pox).
- Where there is sufficient concern that an individual may have COVID-19 (e.g., school is informed by a parent/guardian that a student has been diagnosed with

COVID-19, or informed by a staff member that they have been diagnosed with COVID-19), or there are concerns about multiple symptomatic/asymptomatic individuals in a cohort, the school should report this to the PHU, or follow pre-established protocols from the local PHU. Cases that occur in itinerant workers and occasional staff should be flagged to the PHU.

Role of Ministry of Labour, Training and Skills Development (MLTSD)

- Proactively inspects workplaces to monitor compliance with OHSA and its regulations.
- Investigates occupational illness notifications under s. 52(2) of the OHSA to determine if the employer is in compliance with the Act and that appropriate measures have been taken to prevent further illnesses.
- Investigates unsafe work practices, critical injuries, fatalities, work refusals, and occupational illness as related to worker health and safety. This may include investigation of reports of COVID-19 by employers to MLTSD.
- Issues orders under the OHSA.
- Operates the MLTSD Health and Safety Contact Centre (1-877-202-0008), available for anyone to report health and safety concerns, complaints or to provide notices of occupational illnesses.

While this document focuses in part on the role of the MLTSD's health and safety program, the ministry also administers the [Employment Standards Act](#). If workplace parties request information regarding employment standards, they can be referred to the [Employment Standards Information Centre](#): 1-800-531- 5551.

Management of symptomatic individuals in the school setting and their household contacts

- The information below is intended to complement the following guidance:
 - [Management of Cases and Contacts of COVID-19 in Ontario](#)
 - [COVID-19 Fully Immunized and Previously Positive Individuals: Case, Contact and Outbreak Management Interim Guidance](#)
 - [Quick Reference Guidance on Testing and Clearance](#)

Management of a symptomatic individual who has NOT had a high-risk exposure and/or been identified as a high-risk contact

NOTE: PHUs do not need to be notified of every symptomatic student/staff; there are some instances where they may become aware of symptomatic individuals with pending results, such as through investigations of cases and clusters of illness.

- Staff and students with symptoms compatible with COVID-19 (as listed in the screening tool) should get tested and isolate while test results are pending or not available, unless there is a known alternative diagnosis provided by a health care provider.
 - Household contacts of the symptomatic individual (e.g., siblings, parents, roommates and other individuals who live with the symptomatic individual) who are not fully immunized² or previously positive³ are to isolate, in accordance with [Management of Cases and Contacts of COVID-19 in Ontario](#).
- Unless the symptomatic individual is being managed as a [probable case](#) or tests positive, dismissal and isolation of asymptomatic contacts in the school is not generally recommended.

² For the purposes of case/contact/outbreak management, an individual is defined as fully immunized ≥ 14 days after receiving their second dose of a two-dose COVID-19 vaccine series or their first dose of a one-dose COVID-19 vaccine series that is [listed for emergency use](#) by the World Health Organization or approved by Health Canada. Individuals who are immunocompromised are excluded from this definition, in accordance with [COVID-19 Fully Immunized and Previously Positive Individuals: Case, Contact and Outbreak Management Interim Guidance](#).

³ For the purposes of case/contact/outbreak management, an individual is defined as previously positive if they were a confirmed case of COVID-19 where their initial positive result was ≤ 90 days ago AND they have been [cleared from their initial infection](#). Individuals who are immunocompromised are excluded from this definition, in accordance with [COVID-19 Fully Immunized and Previously Positive Individuals: Case, Contact and Outbreak Management Interim Guidance](#).

- If the individual tests negative or has a known alternative diagnosis provided by a health care provider, and there is no known high-risk exposure and they were not advised by the PHU or health care provider to quarantine or isolate, the individual can return to school if afebrile and symptoms have improved for at least 24 hours.
 - If the individual is experiencing gastrointestinal (GI) (nausea/vomiting, diarrhea) symptoms, these symptoms should be resolved for at least 48 hours before the individual can return to school.
 - If symptoms compatible with COVID-19 are persisting/worsening, the symptomatic individual is to continue to stay home from school/work and seek medical attention. A repeat COVID-19 testing should be considered.
 - Medical notes or proof of negative tests should not be required for staff or students to return to school.
- If the symptomatic individual is not tested/does not seek testing and there is no known alternative diagnosis, the individual must isolate for 10 days from symptom onset, in accordance with [Quick Reference Guidance on Testing and Clearance](#).
 - Household contacts of the symptomatic individual must isolate for 10 days from break in contact (i.e., last contact) from the symptomatic individual, unless fully immunized or previously positive. If there is no break in contact, this would start at the end of the symptomatic individual's isolation period.
- In general, all sick individuals with any symptoms of illness – including those with symptoms not included on the screening tool – should stay home from school and child care, as per usual school/child care policy, and seek assessment from their regular healthcare provider if required.

Management of a symptomatic individual who HAS had a high risk exposure and/or been identified as a high risk contact

- If isolating after a high-risk exposure (e.g., close contact of a known COVID-19 case or travel out of country) and does not have a known alternative diagnosis, the individual meets case definition for a [probable case](#), until they test negative. Manage as per [Management of Cases and Contacts of COVID-19 in Ontario](#) and

the [COVID-19 Fully Immunized and Previously Positive Individuals: Case, Contact and Outbreak Management Interim Guidance](#).

- Household contacts of the symptomatic individual must isolate for 10 days from break in contact (i.e., last contact) from the symptomatic individual, unless fully immunized or previously positive. If there is no break in contact, this would start at the end of the symptomatic individual's isolation period.
- If the individual tests negative, they must complete their isolation period as a high risk contact of a known case, unless they are fully immunized or previously positive .
 - If fully immunized or previously positive, the individual can return to school if afebrile and symptoms have improved for at least 24 hours, and gastrointestinal (GI) (nausea/vomiting, diarrhea) symptoms resolved for at least 48 hours. If symptoms compatible with COVID-19 are persisting/worsening, the symptomatic individual is to continue to stay home from school/work and seek medical attention; consider repeat testing.

Management of Cases and Contacts of Cases

- The information below is intended to complement the following guidance:
 - [Management of Cases and Contacts of COVID-19 in Ontario](#)
 - [COVID-19 Fully Immunized and Previously Positive Individuals: Case, Contact and Outbreak Management Interim Guidance](#)
 - [Quick Reference Guidance on Testing and Clearance](#)
- Please see [Appendix A](#) for a flow chart on the isolation and testing of high-risk contacts, adapted from Appendix 11 of [Management of Cases and Contacts of COVID-19 in Ontario](#)
- Please see [Appendix B](#) for a flow chart on the isolation and testing of household members of high-risk contacts, adapted from Appendix 11 of [Management of Cases and Contacts of COVID-19 in Ontario](#)

Case management

- Cases should be tested and isolated as per [Management of Cases and Contacts of COVID-19 in Ontario](#).

Case acquisition assessment

- Ensure relevant acquisition exposures in the 14 days prior to symptom onset (or 14 days prior to positive specimen collection date if never symptomatic) are captured for cases, in accordance with the COVID-19 CCM Case Investigation Data Entry Guide, including:
 - Household
 - Family
 - School (classroom cohort, recess cohort, etc.)
 - School transportation
 - Before/after school programs
 - School extra-curricular activities
 - Staff break rooms/staff meetings
 - Staff/student social interactions during breaks/carpooling
 - Child care settings
 - Other potential acquisition exposures outside of school (in the community), including non-school extracurricular activities, work, and recreational activities
- It is important to determine if the student or staff member likely acquired their infection outside of the school. For example, if a student or staff has known exposure to a case in the household or in their community.
- If acquisition for a case was known to have occurred outside the school and the student or staff did not attend while communicable, no isolation or testing should be required for the cohort. Any additional high-risk contacts of the case (outside of school) should be identified and advised to isolate according to provincial guidance. For additional considerations, see [Risk Assessment Approach for COVID-19 Contact Tracing](#). There may also be situations when the PHU recommends more expansive testing.

Assessment of high-risk contacts in schools

- Work closely with the school to determine with whom a case was in contact in the school environment during their period of communicability. Consider [Management of Cases and Contacts of COVID-19 in Ontario](#) in determining the case's period of communicability for contact follow up, including direction on the

start and end of the contact tracing period when a case is asymptomatic at/around the time of testing.

- Students in the case's classroom cohort(s) and before/after school cohort(s) are to be considered high-risk contacts of the case, regardless of where they were seated/positioned in relation to the case, to facilitate timely contact management. PHUs may ask principals to initiate timely dismissals of these cohorts.
- Consider whether other cohorts (or partial cohorts, or specific individuals in other cohorts) are to be deemed high-risk contacts, including those that only mix outdoors or indoors with distancing and/or masking. For student cohorts that only interact outdoors (e.g., recess cohorts sharing outdoor space and times), exposure risk would generally be considered lower than for indoor interactions. However, PHUs may assess some outdoor-only exposures as high risk.
 - Bus cohorts: Given indoor, enclosed bus environment, and potential for students from multiple cohorts to share a bus, PHUs should have a low threshold for identifying high risk exposures in bus cohorts based on their risk assessment. Generally, this may be limited to those seated within two metres of the case (provided consistent non-medical mask wearing on the bus), and any other close contacts associated with the bus.
- For staff and essential visitors, follow [Management of Cases and Contacts of COVID-19 in Ontario](#) for exposure risk assessment.
- PHUs should request that schools provide information regarding the students and staff members in the case's cohort(s), as well as information on any other known potential contacts that a case may have been in contact with in the school setting or school transportation environment, including itinerant workers and occasional staff (e.g., teachers/staff who regularly interact with multiple cohorts).

Dismissal of asymptomatic high-risk contacts of a case

- In accordance with [COVID-19 Fully Immunized and Previously Positive Individuals: Case, Contact and Outbreak Management Interim Guidance](#), asymptomatic fully immunized individuals and previously positive individuals are generally not required to isolate following a high-risk exposure to a case, and therefore do not need to be dismissed.
 - If immunization coverage is unknown, or in a cohort with unimmunized students, PHUs may consider dismissal of the entire cohort, regardless of

- immunization status, to facilitate timely exclusion of potentially exposed individuals from the setting. Return of partial cohorts may be permitted as per the Interim Guidance on Fully Immunized and Previously Positive individuals.
- In cohorts with a known high proportion of immunized individuals (i.e., immunization information is available), immediate dismissal of the entire cohort may not be necessary. Dismissal of a smaller number of specific contacts who are not fully immunized or previously positive may be sufficient.
 - Fully immunized and previously positive individuals permitted to return must continue to maintain all infection prevention and control measures in the school setting.
- Isolation period for high-risk contacts who are not fully immunized or previously positive is 10 days, in accordance with [Management of Cases and Contacts of COVID-19 in Ontario](#).
 - For school exposures, if there is a known source of exposure, isolation period should generally be counted from the day of last known exposure to the confirmed case. If the source of exposure is unknown, the isolation period should begin from the last exposure to the cohort.
 - Dismiss any individuals who have been identified as having high-risk exposure to the case when the case was infectious, including cohort(s), siblings, and individuals who had close contact with the case in the community (e.g., at social gatherings, extracurricular activities), unless the contacts are fully immunized or previously positive.
 - If the household contacts (e.g., those who live in the same house or unit) of asymptomatic individuals identified as high-risk contacts are not fully immunized or previously positive, they should be advised to stay at home except for essential reasons, which may include attending work, school, or child care settings.
 - If an individual dismissed as a high-risk contact develops symptoms, they are considered a [probable case](#).
 - Their household members and other high-risk contacts, including any cohorts or contacts at school who have not yet been dismissed, should be managed as high-risk contacts of a case, dismissed, tested and directed to isolate in accordance with [Management of Cases and Contacts of COVID-19 in Ontario](#).

Management of asymptomatic household contacts of a case and their cohorts

- Where a case has siblings/other household members who also attend school or child care, the cohort(s) of asymptomatic household members of a case (e.g., sibling of a case) do not need to be dismissed.
- If the sibling/household member of a case becomes symptomatic, they should be managed as a [probable case](#), with immediate dismissal of their high-risk contacts who are not fully immunized or previously positive, including their cohort(s).

Testing of high-risk contacts of a case

- Recommend and coordinate/facilitate testing (in collaboration with testing partners) for all individuals who have been identified as having had a high-risk exposure in the school setting regardless of immunization status as below.
 - PHUs should work with local testing partners to optimize uptake by offering accessible, timely testing and results.
 - The PHU may, in collaboration with Ontario Health, help facilitate a coordinated approach to testing, including provision of an investigation or outbreak number, requisitions, and potentially on-site testing at the school.
 - Advise anyone associated with the school who requires testing to provide the investigation or outbreak number, or use the provided requisition, so that they are captured as part of the investigation.
 - Mechanisms should be established to ensure that the PHU is aware of all probable cases and positive laboratory results (e.g., investigation number).
 - PHUs are not responsible for tracking negative results.
 - PHUs should follow [PHO Laboratory Test Information Sheet information](#) on inclusion of non-covid respiratory virus testing, if applicable to the situation of a potential respiratory outbreak.
- All asymptomatic high-risk contacts who are NOT fully immunized or previously positive should be recommended for testing on or after day 7 of their isolation period.
 - If an initial test was collected prior to day 7 of their isolation period, repeat testing on or after day 7 is recommended.
 - A negative test does not change the requirement to complete 10 days of isolation.

- Negative test results are not required to end isolation. PHUs to follow-up with contacts to verify testing results as capacity allows.
 - Repeat testing is also recommended if the contact becomes symptomatic.
- Asymptomatic high-risk contacts who ARE fully immunized or previously positive individuals should be recommended for testing as soon as possible upon notification of the exposure. These individuals are not required to isolate while awaiting test results, unless otherwise instructed by the PHU.
 - Repeat testing is recommended if the contact becomes symptomatic.
- Symptomatic high-risk contacts should be strongly encouraged to get tested, and managed as probable cases if testing does not occur.

Outbreaks

- An outbreak in a school, child care setting, or before/after school program is defined as **two or more lab-confirmed COVID-19 cases in children/students and/or staff or other visitors, with an epidemiological link, within a 14-day period, where at least one case could have reasonably acquired their infection in the school, child care setting, or before/after school program (including transportation).**
- Examples of reasonably having acquired infection in school include:
 - No known source of infection outside of the school setting (i.e., no known contact with a probable or confirmed case/outbreak outside school).
 - Known exposure in the school setting.
- Please see the CCM Data Entry Scenarios resource from PHO for detailed instructions about linking cases to school outbreaks for surveillance purposes.
 - Household and other high-risk contacts of cases linked to outbreaks in schools should not be linked to these outbreaks unless they themselves are directly part of the outbreak (e.g., transmitted to others in the school or acquired in the school). However, they may be linked to an outbreak-related case via an exposure Location in CCM to indicate the total exposures in a school.

Outbreak Measures

- Outbreak measures may be scaled up/down based on the transmission risk and outbreak epidemiology in the school and the assessment of outbreak control

measures, from dismissal of a single cohort through to consideration of whole school dismissal.

- PHUs may wish to consult PHO to consider the potential role of genomic sequencing to help interpret school transmission patterns where epidemiological links are not clear.
- Review [COVID-19 Fully Immunized and Previously Positive Individuals: Case, Contact and Outbreak Management Interim Guidance](#) for additional guidance on Fully Immunized and Previously Positive Individuals who are Part of an Outbreak of SARS-CoV-2, including when to consider more stringent approaches to outbreak management when there is evidence of an ongoing or uncontrolled outbreak or symptomatic/severe illness among fully immunized individuals.
- Review the [COVID-19 Preparedness and Prevention in Elementary and Secondary \(K-12\) Schools checklist](#) (or PHU equivalent) to identify IPAC practices/prevention measures requiring immediate improvement, such as reviewing practices related to staff interactions (e.g., avoid in-person staff meetings, review IPAC practices for minimizing risk associated with staff break areas).
- Outbreak measures that could be recommended to the school, particularly if the school remains open, may include:
 - Outbreak signage at entrances and affected area(s).
 - Informing outside agencies that use the school/child care centre of the outbreak.
 - Further restricting visitors to the school.
 - Further minimizing the movement of staff between cohorts.
 - Limiting student activities to their required cohorts and discontinuing extra-curricular activities, as much as possible.
 - Considering additional measures for immunized and previously positive high-risk contacts who are not dismissed, such as restricting mixing between cohorts.
 - Considering inclusion of fully immunized and previously positive high-risk contacts in dismissals to facilitate timely exclusion of potentially exposed individuals from the setting.

- Restricting all staff (including school, transportation, and staff from home care agencies or others that provide medical services to those in school) from working in other school or child care locations.
- Recommending to staff, students, and their families/household contacts to strictly avoid close contact/interactions with other households for non-essential reasons (e.g., no visiting, no playdates, no carpooling).
- Reinforcing masking of students for source control based on requirements for their age, use of masks and eye protection for staff members, hand hygiene for all, and maintaining physical distancing. Ensure availability of masks for students who may require them (i.e., do not have sufficient supply of their own masks) and encourage those who can supply their own to bring multiple masks per day.
- Reinforcing the daily symptom screening process for all staff/essential visitors and students, and enhance screening procedures if needed (e.g., on site confirmation).
- Reviewing environmental cleaning and disinfection protocols, enhancing cleaning and disinfection for the outbreak area(s), and ensuring that products are being used as per manufacturers' instructions.
- Ensuring families are aware of the outbreak.
- Increasing availability and accessibility of testing for the broader school community impacted by outbreak for additional case finding.
- Increasing availability and accessibility of COVID-19 vaccination for the broader school community impacted by the outbreak.

When to declare the outbreak over

- At least 14 days have passed with no evidence of ongoing transmission that could reasonably be related to exposures in the school.

AND

- No further symptomatic individuals have been reported by the school who are associated with the initial exposed cohorts.

Whole school testing

Note: The considerations outlined in this section do not apply to indications for whole school testing unrelated to case/outbreak investigation (e.g., surveillance testing).

- The aim of offering timely, accessible whole school testing is to assess the extent of transmission in a school (i.e., case finding), and to inform whether additional cohort dismissals or whole school dismissal are needed to interrupt transmission at school.
- Some scenarios where this may be considered as part of a PHU investigation, based on an assessment of risk, may include the following.
 - Multiple cohorts (e.g., 2 or more and/or 10-25%) have been dismissed within a 14-day period due to high-risk exposures to case(s).
 - A high percentage (e.g., 5-10%) of staff and students detected as probable or confirmed COVID-19 cases within a 14-day period.
 - A high attack rate in a single cohort.
 - Multiple cases with unknown acquisition.
 - Concern about potential vaccine escape.
- Individuals dismissed due to high-risk exposures must complete their 10 day isolation period, regardless of their testing result, unless otherwise specified by the PHU (e.g., based on their COVID-19 immunization status).
- Asymptomatic individuals without a known high-risk exposure (e.g., not from a dismissed cohort exposed to a case), and who have not otherwise been advised to quarantine or isolate, can continue attending school while awaiting test results.
- PHUs should advise the school administration and community of the potential for the results of whole school testing to lead to additional cohort dismissals, up to and including whole school dismissal, to enable school administrators, staff and parents/guardians and students to prepare (e.g., to transition to virtual learning, to arrange child care). PHUs should communicate in a timely manner with the school community regarding public health actions following whole school testing (e.g., additional cohort dismissals, decision regarding whole school dismissal).
- Testing offered to individual students/staff/others (e.g., household members) should be guided by current MOH [Testing Guidance](#).
- Coordinate with Ontario Health to plan broader testing and ensure timely access and accessibility of testing options (e.g., testing at school site, take home kits,

access to drop in hours at an assessment centre within walking distance, outreach supports with partners such as paramedics).

Whole school dismissal

Note: The considerations outlined in this section do not apply to situations in which a whole school may be closed for in-person instruction due to operational reasons alone (e.g., related to staffing).

- It is anticipated that the likelihood of whole school dismissal will be exceptionally low in schools with high immunization coverage among students.
 - For example, whole school dismissal should be considered in the event a vaccine escape variant is identified among the cases.
- Based on the results of the PHU investigation, including results of any whole school testing, PHUs may consider whole school dismissal if there is evidence suggestive of widespread or very rapid transmission at school outside of previously identified cohorts, which may include:
 - At least one of the considerations for whole school testing (see above), or other similar consideration, is observed
AND
 - >1 cohort in the school is affected
AND
 - There are cases reasonably likely to have been acquired at school (e.g., no known exposure to a probable/confirmed case outside school) for whom NO epidemiological link (acquisition source) at school has been identified.
- Examples that would typically not be considered evidence of widespread transmission within a school may include:
 - Cases in multiple cohorts, each with likely acquisition via known exposures to cases outside school;
 - Multiple cases in students in one cohort only;
 - Single introduction of epidemiologically linked cases in multiple cohorts (e.g., siblings in different classes) and effective implementation of outbreak/IPAC measures;
 - The PHU determines that the identified cases in multiple cohorts without epidemiological links at school reflects independent introductions into the school compatible with widespread community transmission and does not indicate transmission occurring within the school.

- The decision to recommend a whole school dismissal for public health purposes is at the discretion of the PHU. In addition to the considerations above, there may be additional, context-specific considerations related to specific PHU investigations of school cases/outbreaks and particular school settings/populations that inform PHU decisions to recommend whole school dismissal.
- If whole school testing has not already been offered prior to initiating a whole school dismissal, PHUs should work with relevant partners to offer testing to all school attendees.
- During a whole school dismissal, staff and students who are not fully immunized or previously positive and who are not identified as high-risk close contacts of a known case should be advised to stay home except for essential reasons, which may include attending other work, school, or child care settings.
- The outbreak does not necessarily need to be declared over to recommend that the school reopen to some/all cohorts. Based on advice from the PHU, cohorts without evidence of transmission can be gradually brought back to school as additional information and test results become available. Consideration should be given to implementing additional preventive measures and active surveillance as part of reopening.

Occupational Health & Safety

- Employers have obligations under the [Occupational Health and Safety Act](#) (OHSA) to protect the health and safety of their workers, including from the transmission of infectious disease in the workplace.
- If COVID-19 is suspected or diagnosed in staff, return to work should be determined by the individual in consultation with their health care provider and the local PHU, whose advice should be based on provincial guidance.
- Occupational health and safety guidance for COVID-19 is available on the [MOH COVID-19 website](#) and the Ministry of Labour, Training and Skills Development's website on [resources to prevent COVID-19 in the workplace](#).

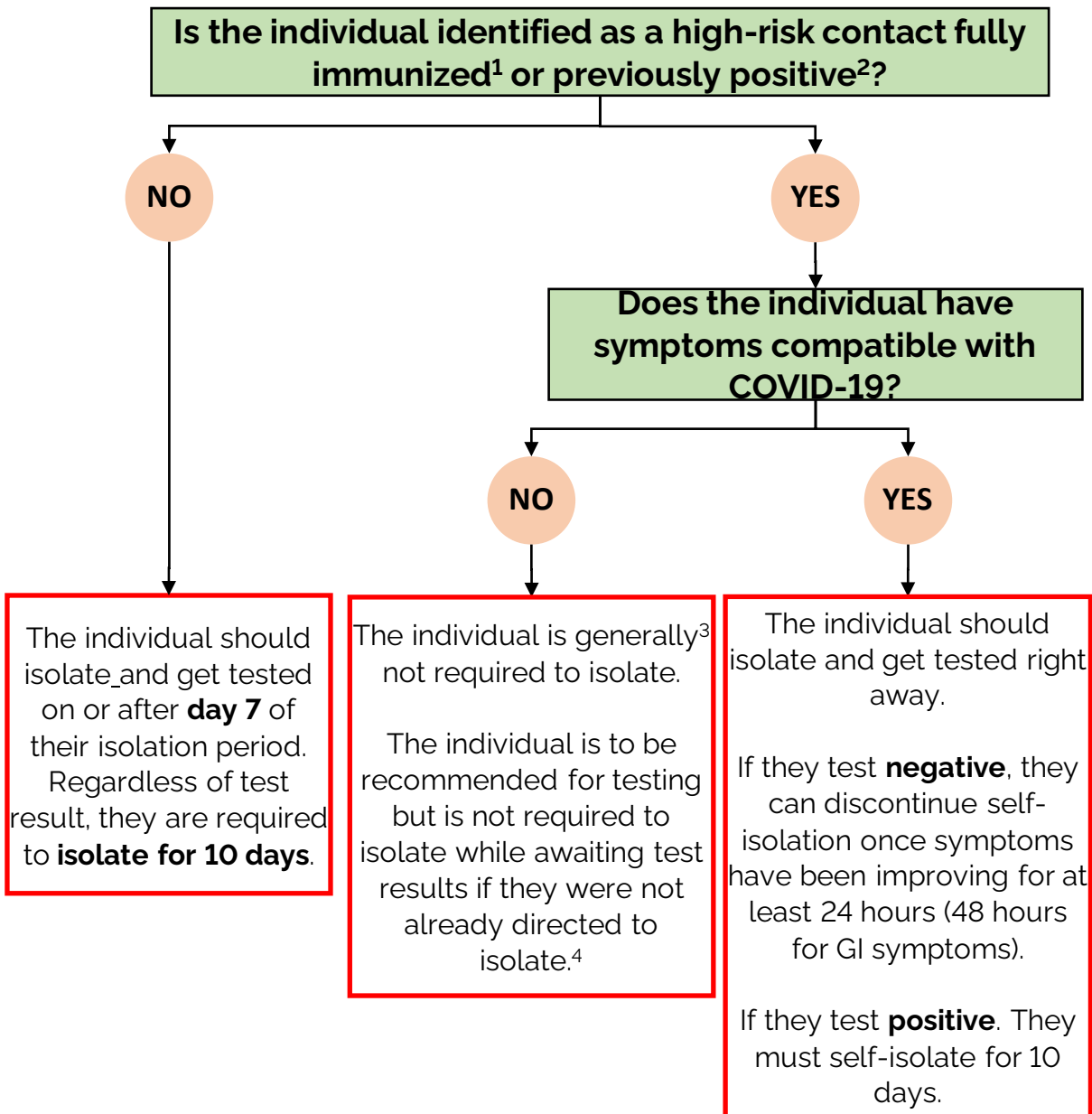
Reporting staff illness

- Workers who are unwell should not attend at a workplace. They should report their illness-related absence to their supervisor or employer.

- In accordance with the *Occupational Health and Safety Act* and its regulations, if an employer is advised that a worker has an occupational illness or that a claim with respect to an occupational illness has been filed with the Workplace Safety and Insurance Board (WSIB) by or on behalf of the worker, the employer must provide written notice within four days to:
 - [A Director appointed under the OHSA of the Ministry of Labour, Training and Skills Development;](#)
 - The workplace's joint health and safety committee (or health and safety representative); and
 - The worker's trade union, if any.
- This includes providing notice of an infection that is acquired in the workplace. The employer does not need to determine where the infection was acquired, if it is reported as an occupational illness, it must be reported to the MLTSD.
- The employer must also report any instance of an occupationally acquired disease to the WSIB within 72 hours of receiving notification of said illness.
- For more information, please contact the Ministry of Labour, Training and Skills Development:
 - Employment Standards Information Centre: Toll-free: 1-800-531-5551
 - Health and Safety Contact Centre: Toll-free: 1-877-202-0008
- For more information from the Workplace Safety and Insurance Board, please refer to the following:
 - Telephone: 416-344-1000 or Toll-free: 1-800-387-0750

Appendix A: Case and Contact Management in Schools for High-Risk Contact

Adapted from Appendix 11 of [Management of Cases and Contacts of COVID-19 in Ontario](#)



¹ For the purposes of case/contact/outbreak management, an individual is defined as fully immunized ≥ 14 days after receiving their second dose of a two-dose COVID-19 vaccine series or their first dose of a one-dose COVID-19 vaccine series that is [listed for emergency use](#) by the World Health Organization or approved by Health Canada.

Individuals who are immunocompromised are excluded from this definition, in accordance with [COVID-19 Fully Immunized and Previously Positive Individuals: Case, Contact and Outbreak Management Interim Guidance](#).

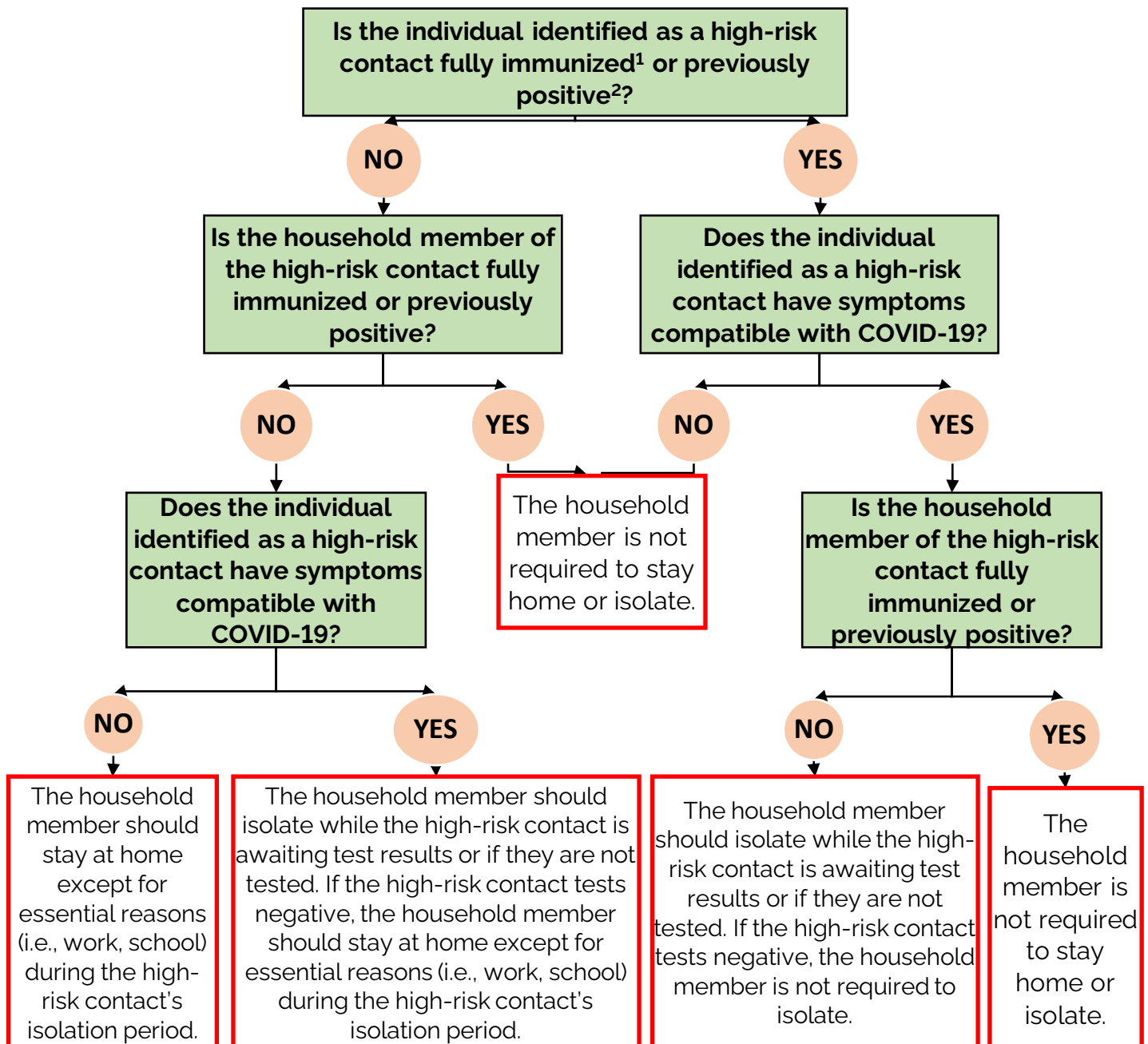
² For the purposes of case/contact/outbreak management, an individual is defined as previously positive if they were a confirmed case of COVID-19 where their initial positive result was ≤ 90 days ago AND they have been [cleared from their initial infection](#). Individuals who are immunocompromised are excluded from this definition, in accordance with [COVID-19 Fully Immunized and Previously Positive Individuals: Case, Contact and Outbreak Management Interim Guidance](#).

³ Self-isolation still may be required at the discretion of the local public health unit. Refer to the [COVID-19 Fully Immunized Individuals: Case, Contact and Outbreak Management Interim Guidance](#) for individuals with immunocompromise, and residents of high risk congregate living settings / inpatients.

⁴ Refer to [Provincial Testing Guidance](#).

Appendix B: Case and Contact Management in Schools for Household Members of High-Risk Contacts

Adapted from Appendix 11 of [Management of Cases and Contacts of COVID-19 in Ontario](#)



¹ For the purposes of case/contact/outbreak management, an individual is defined as fully immunized ≥ 14 days after receiving their second dose of a two-dose COVID-19 vaccine series or their first dose of a one-dose COVID-19 vaccine series that is [listed for emergency use](#) by the World Health Organization or approved by Health Canada. Individuals who are immunocompromised are excluded from this definition, in accordance with [COVID-19 Fully Immunized and Previously Positive Individuals: Case, Contact and Outbreak Management Interim Guidance](#).

² For the purposes of case/contact/outbreak management, an individual is defined as previously positive if they were a confirmed case of COVID-19 where their initial positive result was ≤ 90 days ago AND they have been [cleared from their initial infection](#). Individuals who are immunocompromised are excluded from this definition, in accordance with [COVID-19 Fully Immunized and Previously Positive Individuals: Case, Contact and Outbreak Management Interim Guidance](#).



Ontario Catholic School
Trustees' Association

August 13, 2021

MEMORANDUM

TO: All Catholic School Trustees, Student Trustees
Directors of Education – WEST Region

CC: OCSTA Staff
Board Secretaries and Administrative Assistants

FROM: Nick Milanetti, Executive Director

SUBJECT: 2021 Fall Regional Meetings

The Ontario Catholic School Trustees' Association Fall Regional Meetings are scheduled as follows:

Central: Tuesday, September 21 – 9:00am – 12:30pm (EDT)
Northeast: Saturday, September 25 – 9:00am – 12:30pm (EDT)
East: Monday, September 27 – 9:00am – 12:30pm (EDT)
West: Wednesday, September 29 – 9:00am – 12:30pm (EDT)
Northwest: Friday, October 1 – 9:00am – 12:30pm (EDT)

Following conversation, and in an abundance of caution, we have resolved to hold the fall regional meetings virtually.

In order to participate in the meeting, you will require the Zoom application. Following is a link to register for the Regional Zoom Meeting. Once you have registered, you will receive a confirmation email containing information about joining the meeting. Please copy the information into your calendar for easy access on the day of the meeting.

<https://us02web.zoom.us/meeting/register/tZAoc-moqz8uHNEYZLloB0QVNrbh22ZCmDRH>

After registering, you will receive a confirmation email containing information about joining the meeting.

Please join the meeting early to ensure that you are able to access the meeting and resolve any IT issues. Attached please find a copy of the preliminary program and Regions Chart for your reference.

Boards are asked to identify and prepare an overview of 3 or 4 issues of priority/challenge, and one point of celebration to be delivered at the meeting by the Chair or designate.

Thank you for your continued service and commitment to Catholic education.



CONNIE ARAUJO-DE MELO | Ontario Catholic School Trustees' Association | 1804-20 Eglinton Avenue West, Box 2064, Toronto, ON M4R 1K8 | t 416-932-9460 ext. 226





AGENDA

9:00am – 9:10am	WELCOME & GATHERING PRAYER <i>Patrick J. Daly, President, OCSTA</i> <i>Mary Helen Van Loon, Chair, Huron-Perth CDSB</i>
	LAND ACKNOWLEDGEMENT
9:10am – 9:45am	PRESIDENT'S REPORT <i>Patrick J. Daly, President, OCSTA</i>
9:45am – 10:30am	CATHOLIC IDENTITY <i>Anne O'Brien, Director of Catholic Education, OCSTA</i>
10:30am – 10:45am	BREAK
10:45am – 11:45am	DISCUSSION RE: BOARD OF DIRECTORS RECOMMENDATIONS FROM THE PORTAGE REPORT <i>Nick Milanetti, Executive Director</i>
11:45 - 12:30pm	LOCAL BOARD PRIORITIES / CHALLENGES Please identify 3 or 4 issues of priority/challenge for your board, and one point of celebration to be delivered at the meeting by the Chair or designate.
12:30pm	ADJOURNMENT



Ontario Catholic School
Trustees' Association

OCSTA REGIONS

AREA	BOARDS/OCSTA REGION #
West	Bruce-Grey (4) Huron-Perth (4) London (5) Waterloo (4) Wellington (4) St. Clair (5) Windsor/Essex (5)
East	Algonquin & Lakeshore (10) Eastern Ontario (10) Peterborough-Victoria-Northumberland & Clarington (9) Ottawa (12) Renfrew (10) Simcoe-Muskoka (9)
North East	Huron-Superior (1) Nipissing-Parry Sound (1) Northeastern (1) Sudbury (1)
Central	Brant-Haldimand Norfolk (11) Dufferin-Peel (7) Durham (9) Halton (13) Hamilton-Wentworth (11) Niagara (11) Toronto (6) York (8)
North West	Kenora (2) Northwest (2) Superior North (2) Thunder Bay (2)

From: OCSTA - Connie DeMelo <CDeMelo@ocsta.on.ca>
Date: August 14, 2021 at 12:39:43 PM EDT
To: OCSTA - Connie DeMelo <CDeMelo@ocsta.on.ca>
Subject: OCSTA Memo: 2021-22 School Opening - Ongoing Discussions

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Ontario Catholic School
Trustees' Association

August 14, 2021

MEMORANDUM

TO: All Chairs and Directors of Education
- All Catholic District School Boards

CC: OCSTA Staff
Board Secretaries and Administrative Assistants

FROM: Patrick J. Daly, President

SUBJECT: 2021-22 School Opening – Ongoing Discussions

I hope you are all doing well. Similar to the conversations you would be having at the local level, OCSTA throughout the summer has had a number of meetings/conversations with Ministry of

Education officials and other provincial partners with regard to our shared priority of safely opening and keeping schools open throughout the 2021-22 School Year.

In meetings and in public statements, we have repeatedly indicated that public health and medical decisions with regard to school opening guidance should be made by those with the expertise and legal authority to do so. Specifically, with regard to the mandating of vaccination of students (over 12), staff and volunteers in schools, we have been engaged in discussions this past week and are continuing conversations over the weekend with the Ministry of Education and other partners. As in the past, we will continue to support any and all decisions made by the Chief Medical Officer of Health and the provincial government which serve to promote the health, safety and well-being of students and staff. We as well continue to advocate that School Boards and Public Health Units be entrusted to make those decisions best made at the local level.

If you have any questions or would like to discuss this matter, I invite you to contact Nick Milanetti or me.

Please be assured of our prayers as we continue to navigate these complex and challenging times.



CONNIE ARAUJO-DE MELO | Ontario Catholic School Trustees' Association | 1804-20 Eglinton Avenue West, Box 2064, Toronto, ON M4R 1K8 | t 416-932-9460 ext. 226



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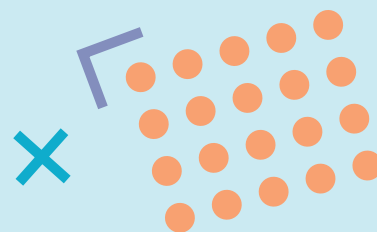


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To learn more, watch this short video at oct-oeeo.ca/JoinUs and visit oct.ca.

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From: OCSTA - Marie Palombi <MPalombi@ocsta.on.ca>
Sent: Monday, August 16, 2021 12:14 PM
To: OCSTA - Marie Palombi <MPalombi@ocsta.on.ca>
Subject: OCSTA: Memo - Copyright Awareness Materials for Teachers

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Ontario Catholic School
Trustees' Association

August 16, 2021

MEMORANDUM

TO: Chairpersons and Directors of Education
- All Catholic District School Boards

CC: OCSTA Directors and Staff
Board Secretaries and Administrative Assistants

FROM: Patrick J. Daly, President

SUBJECT: Fair Dealing Guidelines – Social Media Material

As you are aware, each year Copyright Consortium of the Council of Ministers of Education, Canada (CMEC) launches an awareness campaign on the Fair Dealing Guidelines by providing copyright awareness material to all educators. The CMEC's objective this year is to have this material (see attached) circulated for the beginning of the school year, in an effort to encourage principals and teachers to discuss copyright in their staff meetings.

This year's campaign will emphasize the importance of copyright compliance and the fact that *Fair Dealing Guidelines* extend to online learning. The Consortium will also be promoting the fairdealingdecisiontool.ca website as a teachers' reference for their fair dealing questions. We will be featuring the hashtag #fairdealingworks to complement the greater awareness efforts of educators around the world during Fair Use/Fair Dealing Week.

Any assistance in building greater awareness for the subject of copyright and use of fair dealing is appreciated. Please email me (pdaly@ocsta.on.ca) or Steve Andrews (sandrews@ocsta.on.ca) directly if you have any questions or wish to share some insights on what your board is doing for Fair Dealing Week.

A handwritten signature in black ink, appearing to read 'PDaly', with a long, sweeping horizontal stroke extending to the right.

Fair Dealing



The fair dealing provision in the *Copyright Act* permits use of a copyright-protected work without permission from the copyright owner or the payment of copyright royalties. To qualify for fair dealing, two tests must be passed.

First, the “dealing” must be for a purpose stated in the *Copyright Act*: research, private study, criticism, review, news reporting, education, satire, and parody. Educational use of a copyright-protected work passes the first test.

The second test is that the dealing must be “fair.” In landmark decisions in 2004 and 2012, the Supreme Court of Canada provided guidance as to what this test means in schools and postsecondary educational institutions.

These guidelines apply to fair dealing in non-profit K–12 schools and postsecondary educational institutions and provide reasonable safeguards for the owners of copyright-protected works in accordance with the *Copyright Act* and the Supreme Court decisions.

Guidelines

1. Teachers, instructors, professors, and staff members in non-profit educational institutions may communicate and reproduce, in paper or electronic form, short excerpts from a copyright-protected work for the purposes of research, private study, criticism, review, news reporting, education, satire, and parody.
2. Copying or communicating short excerpts from a copyright-protected work under these *Fair Dealing Guidelines* for the purpose of news reporting, criticism, or review should mention the source and, if given in the source, the name of the author or creator of the work.
3. A single copy of a short excerpt from a copyright-protected work may be provided or communicated to each student enrolled in a class or course
 - a) as a class handout;
 - b) as a posting to a learning or course-management system that is password protected or otherwise restricted to students of a school or postsecondary educational institution;
 - c) as part of a course pack.
4. A short excerpt means:
 - a) up to 10 per cent of a copyright-protected work (including a literary work, musical score, sound recording, and an audiovisual work);
 - b) one chapter from a book;
 - c) a single article from a periodical;
 - d) an entire artistic work (including a painting, print, photograph, diagram, drawing, map, chart, and plan) from a copyright-protected work containing other artistic works;
 - e) an entire newspaper article or page;
 - f) an entire single poem or musical score from a copyright-protected work containing other poems or musical scores;
 - g) an entire entry from an encyclopedia, annotated bibliography, dictionary, or similar reference work.
5. Copying or communicating multiple short excerpts from the same copyright-protected work with the intention of copying or communicating substantially the entire work is prohibited.
6. Copying or communicating that exceeds the limits in these *Fair Dealing Guidelines* may be referred to a supervisor or other person designated by the educational institution for evaluation. An evaluation of whether the proposed copying or communication is permitted under fair dealing will be made based on all relevant circumstances.
7. Any fee charged by the educational institution for communicating or copying a short excerpt from a copyright-protected work must be intended to cover only the costs of the institution, including overhead costs.



From: OCSTA - Ashlee Cabral <ACabral@ocsta.on.ca>

Sent: Tuesday, August 17, 2021 2:39 PM

To: OCSTA - Ashlee Cabral <ACabral@ocsta.on.ca>

Subject: OCSTA News Release - Vaccine and Testing Measures Enhance Commitment of Catholic School Boards to Health, Safety and Well-Being of Students

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Ontario Catholic School
Trustees' Association

NEWS RELEASE

Vaccine and Testing Measures Enhance Commitment of Catholic School Boards to Health, Safety and Well-Being of Students

FOR IMMEDIATE RELEASE

TORONTO-August 17, 2021—"We appreciate today's announcement with regard to the introduction of a vaccination disclosure policy for School Board staff, and other measures that support the collective commitment of Catholic School Boards to place priority on the health and safety, and well-being of students and staff," said Patrick Daly, President of the Ontario Catholic School Trustees' Association (OCSTA).

"In recognition of the additional administrative requirements flowing from the measures announced today, we will advocate to the Ministry of Education for resources to support Catholic School Boards in implementing these measures," added Mr. Daly.

"We will as well work with our provincial partners to ensure an efficient and effective implementation of the disclosure policy as possible."

The Ontario Catholic School Trustees' Association is the provincial voice for publicly funded Catholic education. Founded in 1930, OCSTA represents the interests of Catholic school boards that collectively educate approximately 600,000 students in Ontario, from Junior Kindergarten to Grade 12.

*For more information or to arrange an interview, please contact:
Sharon McMillan, Director of Communications, smcmillan@ocsta.on.ca / 416-460-7937*

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From: OCSTA - Marie Palombi <MPalombi@ocsta.on.ca>

Sent: Tuesday, August 17, 2021 1:56 PM

To: OCSTA - Marie Palombi <MPalombi@ocsta.on.ca>

Subject: OCSTA: ON News Release - Ontario Makes COVID-19 Vaccination Policy Mandatory for High-Risk Settings

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August 17, 2021

MEMORANDUM

TO: Chairpersons and Directors of Education
- All Catholic District School Boards

CC: OCSTA Directors and Staff
Board Secretaries and Administrative Assistants

FROM: Patrick J. Daly, President

SUBJECT: COVID-19 Vaccine Disclosure Policy Announcement

Today the Chief Medical Officer of Health announced the government's COVID-19 vaccination disclosure policy framework that will apply to all education workers in school boards across Ontario. The news release states, "To support the return to school plan, the Ministry of Education intends to introduce a vaccination disclosure policy for all publicly-funded school board employees, and staff in private schools as well as for all staff in licensed child care settings for the 2021-22 school year, with rapid antigen testing requirements for staff who are not immunized against COVID-19".

In addition, to further support a safer return to school by ensuring more children and youth can benefit from the protection offered by the vaccine, the province will extend eligibility to the Pfizer vaccine to children born in 2009.

We appreciate today's announcement concerning the vaccination disclosure policy and see it as an additional layer of support of our collective commitment to place priority on the health and safety and well-being of students and staff.

We will continue to discuss the details of the disclosure policy with the Ministry of Education and advocate for those additional resources required to support Catholic School Boards with regard to the additional administrative requirements which will flow from today's announcement.

We will as well work with our Provincial labour and other partners to ensure an effective and efficient implementation of the disclosure policy.

We will continue to provide additional information regarding the Ministry of Education's disclosure policy as it becomes available.

If you have any questions, please contact me directly at pdaly@ocsta.on.ca. The government news release is attached for your convenience.



MARIE PALOMBI
Ontario Catholic School Trustees' Association
1804 – 20 Eglinton Avenue West
Toronto, ON M4R 1K8
416-932-9460 Ext. 234 | Website: www.ocsta.on.ca



NEWS RELEASE

Ontario Makes COVID-19 Vaccination Policies Mandatory for High-Risk Settings

Province to Begin Offering Third Doses of COVID-19 Vaccines to Most Vulnerable Ontarians

August 17, 2021

[Ministry of Health](#)

TORONTO — In response to evolving data around the transmissibility of the Delta variant and based on the recent experiences of other jurisdictions, the government, in consultation with the Chief Medical Officer of Health, is taking action to increase protection for our most vulnerable, including frail seniors, immunocompromised individuals and young children who are not yet eligible for vaccination. This includes making COVID-19 vaccination policies mandatory in high-risk settings, pausing the province's exit from the Roadmap to Reopen and providing third doses of the COVID-19 vaccine to vulnerable populations. The government is also expanding eligibility for the Pfizer vaccine to children born in 2009 or earlier.

To protect vulnerable patients and staff in settings where the risk of contracting and transmitting COVID-19 and the Delta variant is higher, the Chief Medical Officer of Health has issued a directive mandating hospitals and home and community care service providers to have a COVID-19 vaccination policy for employees, staff, contractors, students and volunteers, and for ambulance services to have a COVID-19 vaccination policy for paramedics. The vaccination policy must be effective no later than September 7, 2021, and at a minimum will require these individuals to provide proof of one of three things:

- Full vaccination against COVID-19;
- A medical reason for not being vaccinated against COVID-19; or
- Completion of a COVID-19 vaccination educational session.

Individuals who do not provide proof of full vaccination against COVID-19 will be required to undertake regular antigen testing. These settings will be required to track and report on the implementation of their policies to the provincial government. This

is similar to the vaccination policy requirements currently in place for long-term care homes.

“While Ontario remains a leading jurisdiction for first and second doses administered and we have the infrastructure in place to manage outbreaks, the Delta variant is highly transmissible and the experience of other jurisdictions shows we must remain vigilant as we head into the fall,” said Christine Elliott, Deputy Premier and Minister of Health. “By taking additional measures in high-risk settings we will further protect our most vulnerable, safeguard hospital capacity, ensure a safe return to school and keep Ontario running.”

To support the return to school plan, the Ministry of Education intends to introduce a vaccination disclosure policy for all publicly-funded school board employees, and staff in private schools as well as for all staff in licensed child care settings for the 2021-22 school year, with rapid antigen testing requirements for staff who are not immunized against COVID-19. The Ontario government is also working with public health units and publicly funded school boards to run voluntary vaccination clinics in or nearby schools to make vaccines even more convenient and accessible for eligible students, their families, educators and school staff returning to school this fall.

Vaccination policies will also be implemented in other higher-risk settings such as:

- Post-secondary institutions;
- Licensed retirement homes;
- Women’s shelters; and
- Congregate group homes and day programs for adults with developmental disabilities, children’s treatment centres and other services for children with special needs, and licensed children’s residential settings.

“With the support of Ontario’s Chief Medical Officer of Health, our government is taking action to make schools as safe as possible,” said Stephen Lecce, Minister of Education. “Our plan will protect our schools, ensure rapid speed with contact tracing, all with the intention of keeping them open for the benefit of Ontario students.”

As an additional measure to continue protecting Ontario’s most vulnerable, based on the recommendation of the Chief Medical Officer of Health and other health experts, the province will begin offering third doses of the COVID-19 vaccine to those at highest-risk, providing them with an extra layer of protection against the Delta variant. This includes:

- Transplant recipients (including solid organ transplant and hematopoietic stem cell transplants);
- Patients with hematological cancers (examples include lymphoma, myeloma, leukemia) on active treatment (chemotherapy, targeted therapies, immunotherapy);
- Recipients of an anti-CD20 agent (e.g. rituximab, ocrelizumab, ofatumumab); and
- Residents of high-risk congregate settings including long-term care homes, higher-risk licensed retirement homes and First Nations elder care lodges.

Locations and timing for third doses will vary by public health unit and high-risk population based on local planning and considerations, with some beginning as early as this week where opportunities exist.

In addition, to further support a safer return to school by ensuring more children and youth can benefit from the protection offered by the vaccine, the province will extend eligibility to the Pfizer vaccine to children born in 2009. Ontario has closely monitored data from Alberta and British Columbia in making this decision, and these provinces have offered the Pfizer vaccine to youth born in 2009 for several months with no risks identified. Starting on Wednesday, August 18, 2021, all children turning 12 years old before the end of 2021 will be eligible to receive their first dose of COVID-19 vaccine and can book their appointment through the [provincial booking system](#), through their public health unit, or pharmacies, or can walk-in to vaccination clinics across the province.

“Keeping a low rate of infection in our communities and protecting our most vulnerable is how we can keep our schools, our businesses and our social settings as safe as possible while minimizing disruption,” said Dr. Kieran Moore, Chief Medical Officer of Health. “To provide the best protection to each individual while learning to live with the virus, we are taking action by requiring individuals who work in higher-risk settings to be fully vaccinated, by providing a third dose of a COVID-19 vaccine to certain groups who have a decreased immune response and by expanding the eligibility to the children born in 2009 or earlier.”

While the province has reached the exciting milestone of more than 81 per cent of Ontarians aged 12 and over having received a first dose, and is expected to reach its target of 75 per cent vaccinated with a second dose later this month, out of an abundance of caution the government, in consultation with the Chief Medical Officer of Health, is pausing the exit from the [Roadmap to Reopen](#). The Chief Medical Officer of Health and other health experts will continue to monitor the data to determine when it is safe to exit the Roadmap and lift the majority of public health and workplace safety measures currently in place.

Quick Facts

- All vaccines delivered as part of Ontario's vaccine rollout provide high levels of effectiveness against hospitalization and death from COVID-19 and its variants, including the Delta variant. During July 2021, unvaccinated individuals were approximately eight times more likely to get infected with COVID-19 compared to those who were fully vaccinated.
- Evolving evidence around the Delta variant shows that it is more transmissible and has a higher likelihood of causing severe illness and outcomes in those infected.
- To date, more than 20 million of doses have been administered in Ontario. More than 81 per cent of Ontarians aged 12 and over have received at least a first dose of a COVID-19 vaccine and more than 73 per cent have received both doses.
- Individuals can prove they are fully vaccinated by showing the physical or emailed receipt that was provided to them at the time of vaccination. [Vaccination receipts can also be downloaded or printed through the provincial portal](#) or by calling the Provincial Vaccine Booking Line at 1-833-943-3900. This version of the vaccine receipt contains a watermark and a digital signature to deter forgery.
- The federal government has announced its plan to implement a national vaccine passport for international travel. In addition to the official proof of vaccination provided by the Ministry of Health, a vaccine passport provided by the federal government can be used domestically as proof of immunization should it be required by a business or organization.
- Organizations implicated by the directive will follow existing Provincial Antigen Screening Program (PASP) processes to access government-provided rapid antigen screening kits, to be provided by the organization for individuals who are required to undertake regular antigen screening. To date, over 16.9 million government-provided antigen tests have been deployed to for us in approximately 12,400 workplaces.
- On [July 16, 2021](#), the province [moved into Step Three](#) of the [Roadmap to Reopen](#), based on the provincewide vaccination rate and continued improvements in key public health and health system indicators.
- Local medical officers of health have the ability to issue Section 22 orders under the Health Protection and Promotion Act, and municipalities may enact by-laws, to target specific transmission risks in the community and help protect Ontarians from COVID-19.

Additional Resources

- [Ontario's Updated COVID-19 Vaccination Eligibility](#)
- [Ontario mandates Immunization Policies for Long-Term Care Homes](#)
- For resources in multiple languages to help local communication efforts in responding to COVID-19, visit Ontario's [COVID-19 communication resources webpage](#).
- [COVID-19: Health, safety and operational guidance \(2021-22\)](#)
- Visit Ontario's [website](#) to learn more about how the province continues to protect the people of Ontario from COVID-19.

Media Contacts

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