

# Healthy Schools Program Annual Report 2020-2021



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Since 2018, Hastings Prince Edward Public Health (HPEPH) has partnered with Hastings Prince Edward District School Board (HPEDSB) and Algonquin Lakeshore Catholic District School Board (ALCDSB) to operationalise the [School Health Guideline, 2018 \(or as current\)](#). Through this collaboration we have jointly established the Healthy Schools Program. This document highlights all the great work we have done together over the past year and will help guide planning for the following school year.

## COVID-19 Pandemic Response

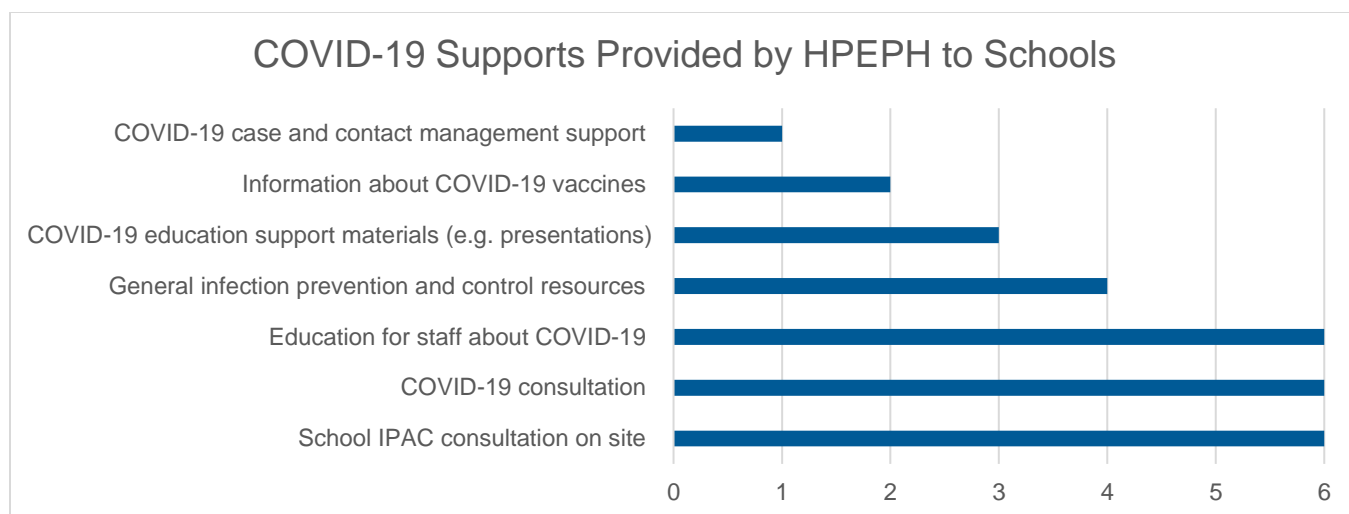
In response to the COVID-19 pandemic, the Ministry of Health provided funding for 8 public health nurses to work directly with schools. 6 of these nurses were each assigned to a family of schools to provide support with IPAC assessments, consultations, education, and case, contact and outbreak management. Two of these nurses supported daycares within HPEPH.

Between September 8, 2020 and June 24, 2021, a total of 21 school related cases of COVID-19 (identified in students and staff) were linked to exposures at school or on a school bus. From those cases, an estimated 570 high risk contacts were identified and required to isolate for 14 days from their last exposure. In addition, there were a total of 62 cases (students and staff) who either attended local virtual schools or did not attend school during their period of communicability, therefore these cases did not result in any school exposure. A school outbreak is defined as two or more cases with an epidemiological link where one of the cases could plausibly have been acquired within the school environment. There were no school outbreaks identified in the 2020-2021 school year, however, one school bus outbreak was identified.

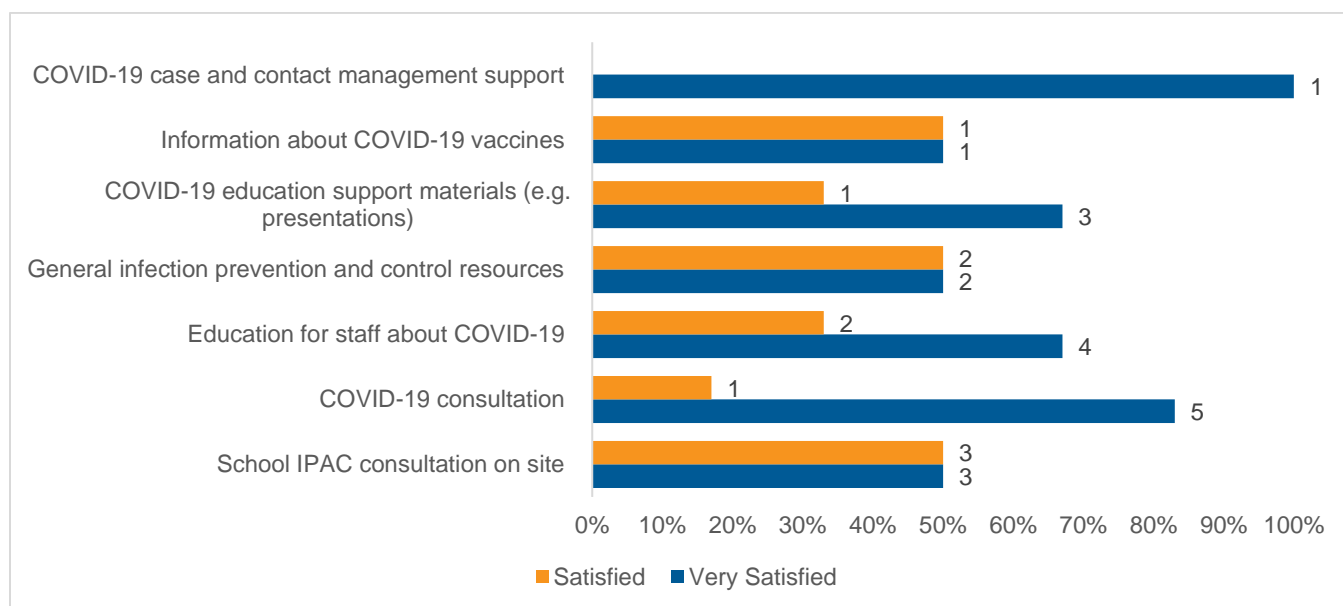
In June of 2021, HPEPH administered the Healthy Schools Program Satisfaction Survey to get feedback on the COVID-19 response from school administrators. Table 1 outlines all the unique COVID-19 supports provided by HPEPH staff to schools. According to the survey, the most frequently provided supports included school infection prevention and control (IPAC) consultation on site (75%), COVID-19 consultation by phone or email (75%) and education for staff about COVID-19 (75%). Table 2 outlines the identified level of satisfaction with the unique COVID-19 supports provided by HPEPH staff to schools. Participants were either satisfied or very satisfied with all the supports provided.

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**Table 1. COVID-19 Supports Provided by HPEPH Staff to Schools (n=8)**



**Table 2. Level of Satisfaction with the COVID-19 Supports Provided by HPEPH Staff to Schools**



Anecdotal feedback regarding HPEPH's COVID-19 response was provided by school administrators, school support staff, and PHNs. A PHN reported that school administrators were "grateful to be able to have a public health nurse to call to help answer questions and clarify messaging with regard to COVID-19". A school administrator stated that the "proactive school visit [from public health] prior to school starting [in order] to assist myself and school staff in understanding all of the new safety protocols related to mask usage, equipment usage, student seating and working arrangements, physical distancing protocols, [and] screening protocols" helped prepare them for the school year. A PHN stated that a school administrator "felt anxious and was losing sleep at night because [they were] worried about the safety of the staff and students". "[A]fter

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the visit from Public Health [they] felt confident the school was doing things right and was a safe place for the kids and staff to be”.

School Administrators “felt having direct support and access to a PHN for the administrators, staff and families to interpret the guidance from Public Health was invaluable during this very challenging school year”. “Due to the COVID-19 pandemic, [I] have needed to rely heavily on the Public Health Nurse assigned to my school this year”. School Administrators “could not have managed the COVID-19 pandemic without the support of our highly knowledgeable, caring and supportive Public Health Nurse”. As a result of the COVID-19 Pandemic the “partnership between Public Health and [schools] has never been stronger”.

## Healthy Schools Program

To evaluate the work done in schools over the 2020-2021 school year, HPEPH invited school administrators to participate in the Healthy Schools Program Satisfaction Survey. The majority of the participants (88%) were either very satisfied or satisfied with the support provided by HPEPH staff. Participants were either satisfied or very satisfied with the information about mental health resources for staff (n=2) and the newsletter and social media resources for families (n=4).

Overall, all participants were either very satisfied or satisfied with the connection and partnership between their school and HPEPH. However, a participant indicated experiencing a challenge while working with HPEPH. They indicated having challenges with “reassignment of health nurse from school support role” when the PHNs switched roles to support the vaccination clinics. In addition, to improve resources and supports available for schools, participants indicated they would like more lending kits (n=1) and resources provided in French (n=1). To improve access/awareness of resources on the website, participants suggested including new and updated resources in the educator’s newsletter (n=6). To improve the Healthy Schools program for the upcoming 2021-2022 school year, participants suggested implementing family engagement activities such as “community hub type sessions at schools for families to access resources and make connections to support their children” (n=1).

To evaluate the HPEPH Healthy Schools Team’s experience working with schools, the team was invited to participate in the Healthy Schools Program Internal Survey. The survey was completed by public health nurses (n=4) and health promoters (n=5) who worked with schools. All participants indicated they were either satisfied (50%) or very satisfied (50%) with the connection and partnership between schools and HPEPH.

## Healthy Schools Resources

This year, HPEPH was able to offer education and curriculum support resources through the HPEPH website. These resources included lending kits, monthly newsletters, newsletter inserts, social media resources, and action guides. All these resources are evidence-based and aimed at supporting educators with teaching health-related curriculum.

From August 1, 2020 to June 30, 2021, the HPEPH Healthy Schools webpage had been viewed 260 times and the links on this page had been clicked 75 times. The most viewed pages included Back to School Planning for

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Parents (n=13,335), Covid-19 Resources for School Administrators (n=10,466), Substance Use, Addiction and Related Behaviors (n=1,063) and Newsletters and Social Media (n=1,018). Lesser viewed pages included Physical Activity in Schools (n=31), Road Safety in Schools (n=35), Sun Safety and UV in Schools (n=28), Violence and Bullying in Schools (n=25) and Vision Screening in Schools (n=25). Please note that the Physical Activity in Schools page and the Violence and Bullying in Schools page did not have any content during the 2020-2021 school year as the content was still in development. The pages that had the greatest percentage of clicks per view were COVID-19 Resource for School Administrators (58%), Human Development and Sexual Health (59%), Infection Control in Schools (85%), Mental Health Literacy (41%), Substance Use, Addiction and Related Behaviors (40%) and Sun Safety and UV in Schools (125%).

In addition to the HPEPH website, the Healthy Schools Team sent out 3 electronic monthly Healthy Schools newsletters to promote resources on the website between April and June of 2021. The newsletter had a total of 46 subscribers. A total of 132 electronic newsletters were sent out and these were viewed 77 times (58%) and clicked on 26 times (20%).

To support school staff, HPEPH provided resources such as lending kits, print resources, and posters. During this school year, HPEPH purchased 24 Glow Germ Kits. These kits were lent out to schools 36 times over the school year. The Glow Germ Kits are designed to teach hand hygiene in a fun and interactive way. HPEPH plans to create more kits to support curriculum and lesson plans over the coming year.

HPEPH also provided 735 copies of print resources and posters. Print resources included Let's Go to Kindergarten resource (n=197), No Probable Too Big or Too Small (Mental Health Literacy) (n=105), Low-Risk Alcohol Drinking Guidelines (Substance Use Addiction and Related Behaviours) (n=105), and P.A.L.S Large and Small Space Cards (Physical Activity in Schools) (n=68). Posters were also provided to schools including physical distancing posters (n=92), school clinic promotional posters (n=136), and human trafficking posters (n=32).

## Resources for Parents and Families

To support parents and families during this school year, HPEPH created a web-based resource page called School Age Children and Youth Resources for Parents. This page was viewed 166 times this past year. Based on the number of clicks on this page, parents and families were most interested in the "Let's go to Kindergarten!" Resource (n=6).

We also created the "Back to School Planning for Parents" page with COVID-19 related information. This page was viewed 13,335 times and clicked 4,342 times. HPEPH will continue to provide resources to parents and families through the HPEPH website.

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## School Staff Training

### IPAC Training

During the beginning of the school year, HPEPH provided in-person COVID-19 IPAC training for staff at 28 schools. The training provided staff with information on how COVID-19 spreads, what symptoms to look out for, how to prevent the spread, and other COVID-19 resources.

### P.A.L.S. Training

After working with school board partners, it was identified that the Physical Activity Leaders in Schools (P.A.L.S.) program would be the best program to promote physical activity, especially during COVID-19. To support schools in the delivery of the P.A.L.S. program, HPEPH offered two virtual trainings to both ALCDSB and HPEDSB. A total of 20 Child and Youth Workers participated in the training, as did one school board administrator. To evaluate the effectiveness of the training in increasing knowledge and skill, and overall satisfaction, pre (n=14) and post (n=6) surveys were conducted.

After participating in the training, participants either agreed (83%) or strongly agreed (17%) that they were able to describe the goals and rationale of the P.A.L.S. program and define the 24-hour movement guidelines. 67% agreed that they were able to describe different levels of youth participation. The majority agreed (50%) or strongly agreed (33%) that they were able to select safe activities to provide physical activity opportunities that follow COVID-19 best practices and facilitate the P.A.L.S. program in their school. 83% said they learned something new about promoting physical activity in schools. 67% said they learned something new about peer leadership development and youth engagement in schools. Participants felt somewhat, fairly or very confident in their ability to implement the P.A.L.S. program in schools.

All participants (100%) were either satisfied or very satisfied with the virtual training for the P.A.L.S. program, even though one participant experienced a barrier to accessing the workshop. Areas identified for potential improvement included more opportunities for discussion throughout the training, as well as the ability to visually interact with the presenter and others. All participants would recommend this workshop to a colleague. HPEPH hopes to provide more training opportunities in the following school year to support schools and their staff.

## School Public Health Clinics – HPEDSB

Clinics were provided by public health nurses at seven HPEDSB secondary schools. The following services were provided to support student health and well-being:

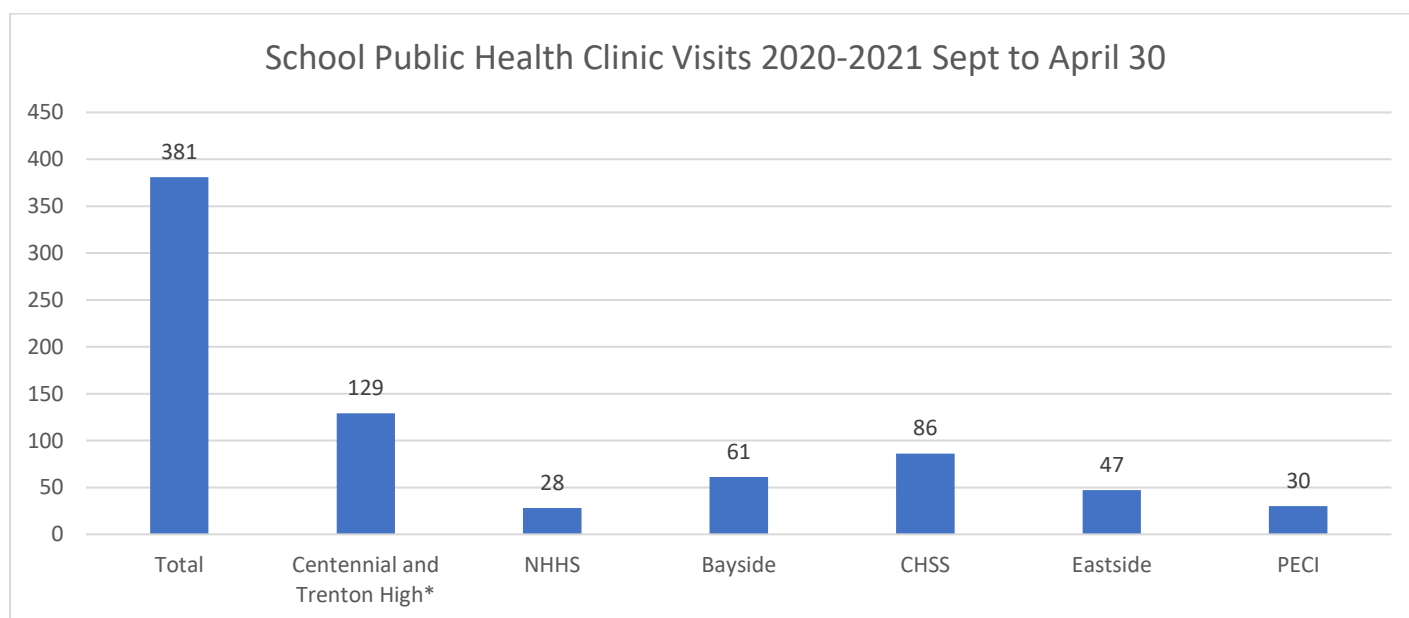
- Contraception
- Emergency Contraception
- Pregnancy Tests
- STI Testing and Treatment
- Tobacco and Vaping Cessation
- Mental Health Tier 1 Support and Referrals

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- Substance Use Referrals
- Immunization

During the 2020-2021 school year, the public health clinics had a total of 381 visits from September 8, 2021 to April 30, 2021 (Table 3).

**Table 3. School Public Health Clinic Visits from September 8, 2021 to April 30, 2021**



\*Due to a system error data Centennial Secondary School and Trenton High School were combined.

School administrators and school support staff expressed that the support provided from the PHNs was “invaluable”, has “filled a huge need”, and has become an “integral part of our school” community. A school administrator stated that school based public health clinics provided “another caring adult for students to connect with”.

The clinics also provided accessible sexual health services to students “who would never have gotten tested or treated without the clinic because they don't have access to transportation” (PHN). PHNs worked with social workers, guidance counselors, and other support staff to refer to necessary support services students using a patient-centred care approach. A PHN stated that “the social worker and head of guidance at [the schools] have reached out to” PHNs multiple times to get support for students. They “truly valued [the] partnership” with the PHNs.

During the school closure in April 2021, PHNs pivoted to provide virtual sexual health support via text, phone, or email, while concurrently providing support for community COVID-19 vaccination clinics. PHNs reported that it was very challenging to reach students outside of school to provide this very necessary service. For example, when attempting to contact 7 girls for birth control Rx renewal, only 3 out of 7 were reached. Not

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having access to care in the physical school facility creates a barrier for students to access public health services. During virtual learning, students did not access the PHN as often as compared to in-person learning. Only two students continued to receive services from PHNs during the summer months.

## School Public Health (Wellness) Clinics – ALCDSB

During the 2021-2022 school year, HPEPH plans to work in partnership with ALCDSB to establish school-based clinics in secondary schools to support student health and well-being.

## Oral Health

A team of Oral Health Professionals from HPEPH normally conducts dental screening for junior kindergarten, senior kindergarten, Grade 2, 4, or 7 students each year, however, due to the COVID-19 pandemic response, this program was paused for the 2020-2021 school year.

## Immunization

The Grade 7 School Immunization Program aims to provide an opportunity for grade 7 students to receive vaccinations for hepatitis B, human papillomavirus (HPV), and meningococcal disease.

Due to the COVID-19 pandemic response, this program was paused for the 2020-2021 school year.

## 2021-2022 School Year

The Healthy Schools Program and COVID-19 Response demonstrated the strong existing partnership between public health, school boards, and schools. HPEPH is invested in strengthening this partnership in order to achieve the shared goals to improve the health and well-being of children and youth in Hastings and Prince Edward Counties and support academic achievement. HPEPH plans to build on existing partnerships over the coming year and will continue to support schools as we transition back to in-person learning. We will continue to seek feedback regarding opportunities to improve the Healthy Schools Program, so we can better serve staff, students, families, and the whole school community.

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