COVID-19 Fall Pandemic Response and Preparedness Plan 2020

Under revision (August 17, 2020)
# Table of contents

Fall Pandemic Response and Preparedness Plan 2020 ........................................ 1  
Situation and Context ...................................................................................... 1  
Our Mission ..................................................................................................... 1  
Chapter One Public Health ........................................................................... 3  
 Introduction ................................................................................................. 5  
 Epidemiological Curve .................................................................................. 5  
 Triggers to Reactivate Population Health Measures ...................................... 7  
 New Brunswick’s COVID-19 Alert Levels Summary .................................... 7  
 New Brunswick’s COVID-19 Detailed Alert Levels ...................................... 9  
 New Brunswick’s Wave Two Testing Strategy .............................................. 16  
 Provincial Approach to Contact Tracing in New Brunswick ......................... 17  
Chapter Two Return to School ...................................................................... 19  
 Introduction ................................................................................................. 21  
 Guiding Principles ....................................................................................... 21  
 Outbreak Management .................................................................................. 21  
 We are all in this together ........................................................................... 23  
 Schools ......................................................................................................... 23  
 Classrooms .................................................................................................... 25  
 Learning ........................................................................................................ 26  
Chapter Three Post-Secondary Institutions .................................................. 29  
 Introduction ................................................................................................. 31  
 Planning Efforts for Post-Secondary Institutions ........................................ 31  
 Requirements for Managing International Students .................................... 31  
 Summary of Requirements to be met by Post-Secondary Institutions ........... 31  
 Requirements Prior to Arrival ...................................................................... 32  
 Requirements Upon Arrival ......................................................................... 34  
 Requirements for Self-Isolation .................................................................... 35  
 Requirements for Monitoring ...................................................................... 37
Chapter Four Vulnerable Populations

Introduction

Part One

Social Development – COVID-19 Wave Preparation

Human Resources

Working with Partners in Long-Term Care

Temporary Shelters

Child Welfare

Prevention Measures in Vulnerable Populations

Part Two

Overview of the COVID-19 Impact on Vulnerable Groups in New Brunswick

Chapter Five Community Capacity and Resiliency

Introduction

Regional Resiliency

Justice System Resiliency and Modernization

Border Control

Conclusion
Situation and Context

From February to July 2020, New Brunswick experienced the first wave of the COVID-19 pandemic. An aggressive early strategy of physical distancing and school and business closures helped NB cope with the first wave.

NB is in the fortunate position to proactively plan and strategize a whole-of-society approach before a second wave of COVID-19. Planning and preparedness work across key private and public sectors continues, and the lessons learned from the first wave have been applied to an updated approach.

This document is a living document, also known as an evergreen document, that may be continually edited and updated during the pandemic.

The severity of the potential second wave of the pandemic is unknown. Models and forecasts can inform planning, but the true impacts will not be known until they are experienced. Without a vaccine or treatment, New Brunswickers will have the same tools that brought New Brunswick success as we did during wave one: physical distancing at work and in public places, handwashing, sanitization and wearing masks.

The success of this pandemic response and preparedness strategy is based on two foundations:

1. Balance across health, economic and societal impacts; and
2. the public’s actions to do what is needed to limit the disease.

Our Mission

To enable a functioning New Brunswick economy that will recover strongly, manage illness from all sources within the capacity of our health system, and ensure all New Brunswickers understand that their well-being, families and interests were valued throughout the response to, and recovery from, COVID-19.

Three priorities have been identified:

- **Health & Wellness** – managing health impacts from COVID-19, mental illness and non-COVID-19 illness
- **Jobs & Business** – maintain the economy at the highest level possible based on the health phase of the pandemic
- **Society** – limiting everyday impacts on New Brunswickers’ well being

Agility, coordination and a focus on a common mission are needed to be successful. This balance requires a whole-of-society approach across governments, the private sector, communities and citizens. Our success is dependent on widespread support from each group.

To have success these key factors must be effective throughout wave two:

- Public support for public health measures;
- Effective public health services (awareness, models, testing, tracing and communications);
- Effective mental, primary and acute care services;
- Border controls;
- Effective disease control in workplaces and public places; and
- Provision of key public and private sector services.

---

1 Chapter 1: COVID-19 Pandemic Plan - NB Health System- NB Epidemiological Curve
Introduction

From a Public Health perspective, New Brunswick is in a much different position to respond to COVID-19 than it was when the pandemic began.

Scientists now know more about the disease and how it is transmitted. New Brunswickers understand the basic measures they need to take to prevent catching the virus and transmitting it to others. Businesses, municipalities and non-governmental organizations have operational plans in place to protect customers, employees, citizens and clients from COVID-19.

We are better prepared to live with COVID-19 in our midst, even if the dangers the virus presents remain the same until a vaccine is developed. As a result, the Public Health response in the second wave focuses upon keeping society and the economy moving, while keeping people as safe as possible from the disease. Doing so requires continued testing for COVID-19 in our midst and aggressively tracking down potential contacts of positive cases to suppress outbreaks as quickly as possible.

In Chapter One, the Department of Health and the Office of the Chief Medical Officer of Health (OCMOH) outlined GNB’s strategy as it relates to:

- Potential epidemiological curve patterns for fall 2020;
- The specific triggers that will initiate risk-based assessments to determine which population health measures will be implemented; and
- Testing and contract tracing strategy to identify and limit potential outbreaks.

Epidemiological Curve

The severity of the potential second wave of the pandemic is unknown. Models and forecasts can inform planning, but the true impacts will not be known until they are experienced.

Drivers

The drivers that can affect the type of wave we encounter are:

- Canada-endemic transmission;
- Outbreaks caused by incoming travellers;
- Public health measures of case detection and isolation, contact tracing and quarantine, and adherence to personal distancing; and
- Restrictive measures, when they are implemented and compliance.

Scenario One - Peaks and Valleys

The first peak of COVID-19 in spring 2020 is followed by a series of repetitive peaks of similar size that occur consistently over a one- to two-year period.

Implications:

- Restrictive measures must be re-implemented to control emerging epidemic;
- Peaks and valleys pattern will continue as the result of cycles of lifting and re-implementing restrictive public health and outbreak control measures (most likely on a regional basis where hot spots are emerging) or increases and decreases in public compliance with public health measures; and
- Feasible if i) the interval between peaks is manageable; ii) the public is largely compliant and there is political support; and iii) the size of the peaks does not exceed our health-care capacity.
**Scenario Two - Fall Peak**

The first peak of COVID-19 in spring 2020 is followed by a larger peak in fall 2020 and then smaller subsequent peaks in 2021.

Implications:
- Restrictive measures must be re-implemented to control the emerging epidemic;
- Possibility the draw on the health-care system and public health services will exceed capacity; and
- High morbidity, mortality and societal disruption.

Beyond this peak - the magnitude of subsequent peaks will depend on whether:

- they are the result of cycles of lifting and re-implementing restrictive measures, or
- if they result from small outbreaks that are readily controlled by other public health measures without recourse to re-implementing restrictive measures.

**Scenario Three - Slow Burn**

The first peak of COVID-19 in spring 2020 is followed by a “slow burn” (slow, steady, relatively low-level activity) of ongoing transmission and case occurrence, but without a clear peaks and valleys pattern.

Driver:

Public health measures of case detection and isolation, contact tracing and quarantine, and adherence to personal distancing ARE high enough to control outbreaks at an early stage without having to re-implement restrictive measures.

Implications:
- Not necessary to re-implement restrictive measures; and
- Lower societal disruption.
Triggers to Reactivate Population Health Measures

The following conditions will serve to trigger a comprehensive risk assessment by Public Health and, if the situation warrants, a recommendation to GNB to reintroduce population health measures in a region or across the province.

These guidelines describe the conditions that trigger a risk assessment:

- Reversion by one phase would be considered when: one of the criterion in two of the three columns are met.
- Reversion to red phase would be considered when: One or more criterion in each of the three columns are met; OR by the presence of more than one criterion in any given column, plus the addition of one more criterion from any other column.

<table>
<thead>
<tr>
<th>Epidemiology</th>
<th>Public Health</th>
<th>Health Care</th>
</tr>
</thead>
<tbody>
<tr>
<td>– Doubling time of cases in less than six days (not applicable if we still have low number of cases).</td>
<td>– 10 per cent or more of all contacts cannot be reached by Public Health within 24 hours.</td>
<td>– Inability to scale up to two times the number of intensive care unit patients from current census (including staffing).</td>
</tr>
<tr>
<td>– More than three unlinked chains of community transmission in less than a six-day period.</td>
<td>– Public Health is not able to reach or actively monitor all identified close contacts within 48 hours.</td>
<td>– Health system can no longer screen and test the required number of symptomatic patients in a timely manner.</td>
</tr>
<tr>
<td>– Outbreaks in high vulnerability settings where there is risk of transmission to the community.</td>
<td>– Insufficient facilities for non-hospitalized COVID-19 infected people who cannot be safely cared for at home (i.e. vulnerable populations, group settings which do not allow for self-isolation).</td>
<td>– Less than a four week supply of personal protective equipment for double the current case load.</td>
</tr>
<tr>
<td></td>
<td>– Compliance with public health directives and recommendations are no longer being followed by the public (i.e. physical distancing, masking).</td>
<td>– Insufficient face masks to provide to all patients seeking care even if cases double.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>– More admissions than discharges for COVID-19 over three consecutive days.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>– Do not have baseline capacity in general health services, including through expansion of telemedicine for COVID-19 and usual care.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>– Health-care facilities can no longer be structured to reduce possibility of exposure at triage and all other locations.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>– Increasing number of new health-care worker infections for six consecutive days (affect workforce, and indicates poor infection prevention and control practices).</td>
</tr>
</tbody>
</table>

New Brunswick’s COVID-19 Alert Levels Summary

Alert levels and associated measures are determined by the Government of New Brunswick under the advice and guidance of the Chief Medical Officer of Health.

These measures may be updated on a regular basis based on new scientific knowledge or the effectiveness of previous control measures in Canada or in other countries.

Different regions of the province may be at different alert levels at a given time.

All businesses are allowed to operate under red, orange and yellow phases but are required to have a COVID-19 operational plan which aligns to Public Health and WorkSafeNB guidance to ensure they protect citizens, patrons and employees at all times.
## Strategy: Working together to control COVID-19 while ensuring the continued economic and social wellbeing of our province.

<table>
<thead>
<tr>
<th>Alert Level</th>
<th>Risk Assessment</th>
<th>Range of measures (applied in a region or across the province)</th>
</tr>
</thead>
</table>
| RED         | COVID-19 is no longer controlled. | – There are three unlinked chains of community transmission within six days.  
– Health-care system is overwhelmed.  
– Public health measures are no longer effective.  
– Outbreaks and new clusters can no longer be controlled through testing, tracing and self-isolation measures.  
– Single household bubble plus formal or informal caregivers and members of immediate family (parents, children, siblings and grand-parents).  
– Frequent hand washing, surface cleaning and physical distancing (2m).  
– Outdoor gatherings with physical distancing of five people or less. Physical distancing required in all other settings.  
– Outdoor (drive-in) religious services only.  
– Community face masks are mandatory in public spaces when physical distancing is not possible unless unable due to age or health reasons.  
– Non-urgent medical procedures and elective surgeries are postponed.  
– Strict visitor restrictions in health and long-term care facilities and similar vulnerable settings.  
– Primary care providers and regulated health professionals may operate utilizing virtual whenever possible.  
– Unregulated professionals and personal services are closed.  
– Daycares remain open with appropriate guidance.  
– K-12 school is limited to virtual only. Teachers and employees in schools to teach virtually from their classrooms.  
– Post-secondary education can continue to operate in-person for all practical programs but only virtually in areas where it is possible.  
– All food and beverage businesses will be reduced to drive-thru, take-out and delivery.  
– Gym and fitness facilities are closed, including other similar close contact sport or recreational businesses or facilities.  
– Public spaces such as casinos, amusement centres, bingo halls, arcades, cinemas and large live performance venues are closed.  
– All other businesses and public services, including retail, can operate under a COVID-19 operational plan.  
– Strict self-isolation requirement for asymptomatic out-of-province visitors if COVID-19 is not under control in neighbouring jurisdiction. |
| ORANGE      | Significant risk that COVID-19 is no longer controlled. | – Travel-related cases and new chains of community transmission are accelerating.  
– Health-care system still able to manage but under pressure.  
– Compliance with public health measures decreasing.  
– Outbreaks can still be controlled through public health measures.  
– Two household bubble plus formal or informal caregivers and members of immediate family (parents, children, siblings and grand-parents).  
– Outdoor gatherings with physical distancing of 10 people or fewer. Physical distancing required in all other settings.  
– Indoor religious services, weddings and funerals of 10 people or fewer.  
– Community face masks remain mandatory in public spaces when physical distancing is not possible.  
– Non-urgent medical procedures and elective surgeries allowed.  
– Strict visitor restrictions maintained in vulnerable settings.  
– Primary care providers and regulated health professionals may operate utilizing virtual whenever possible.  
– Unregulated professionals and personal services are closed.  
– Daycares and K-12 schools are open under strict guidance, virtual to be used for at-risk populations. Day camps are allowed.  
– Post-secondary education can operate.  
– Outdoor recreational activities are allowed, including campgrounds, ATV or snowmobile trails. No organized sports.  
– Gym and fitness facilities remain closed, including other similar close contact sport or recreational businesses or facilities.  
– Casinos, amusement centres, bingo halls, arcades, cinemas and large live performance venues are closed.  
– All other businesses, including food, beverage and retail, can operate under a COVID-19 operational plan. Record keeping for seated venues is a requirement.  
– Strict self-isolation requirement for asymptomatic out-of-province visitors if COVID-19 is not under control in neighbouring jurisdiction. |
**Strategy: Working together to control COVID-19 while ensuring the continued economic and social wellbeing of our province.**

<table>
<thead>
<tr>
<th>YELLOW</th>
<th>COVID-19 is controlled, still a risk of community transmission.</th>
</tr>
</thead>
<tbody>
<tr>
<td>– Sporadic travel-related cases and isolated outbreaks are occurring.</td>
<td></td>
</tr>
<tr>
<td>– Individual cases and outbreaks can be controlled through testing, tracing and self-isolation.</td>
<td></td>
</tr>
<tr>
<td>– People can reconnect in-person with close friends and extended family. Should limit groups and follow public health guidance.</td>
<td></td>
</tr>
<tr>
<td>– Keep uncontrolled indoor or outdoor gatherings with physical distancing at 50 people or fewer.</td>
<td></td>
</tr>
<tr>
<td>– Occupancy limits in controlled indoor and outdoor settings should remain at a level which allow for physical distancing. Record keeping for participants is required to facilitate contact tracing.</td>
<td></td>
</tr>
<tr>
<td>– Community face masks remain mandatory in public spaces when physical distancing is not possible.</td>
<td></td>
</tr>
<tr>
<td>– Visitor restrictions are loosened in vulnerable settings with the use of personal protective equipment.</td>
<td></td>
</tr>
<tr>
<td>– All types of businesses and activities are allowed to operate under a COVID-19 operational plan. Record keeping for seated venues is a requirement.</td>
<td></td>
</tr>
<tr>
<td>– All educational and camp facilities are open under appropriate public health guidance, virtual to be used for at-risk groups.</td>
<td></td>
</tr>
<tr>
<td>– Eliminate self-isolation requirement for asymptomatic visitors if COVID-19 is under control in neighbouring jurisdictions.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>GREEN</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>– Vaccination and herd immunity or effective clinical treatment.</td>
<td></td>
</tr>
<tr>
<td>– The transition to a new normal includes the reopening of all businesses and activities, with increased health and safety practices remaining part of daily life.</td>
<td></td>
</tr>
<tr>
<td>– All conditions are lifted with the exception of community face masks (facial coverings), which remain required to wear in public when ill.</td>
<td></td>
</tr>
</tbody>
</table>

**New Brunswick’s COVID-19 Detailed Alert Levels**

Alert levels and associated measures are determined by the Government of New Brunswick under the advice and guidance of the Chief Medical Officer of Health.

These measures may be updated on a regular basis based on new scientific knowledge or the effectiveness of previous control measures in Canada or in other countries.

Different regions of the province may be at different alert levels at a given time.

All businesses allowed to operate under red, orange and yellow phases but are required to have a COVID-19 operational plan which aligns to Public Health and WorkSafeNB guidance to ensure they protect citizens, patrons and employees at all times.

<table>
<thead>
<tr>
<th>Alert Level</th>
<th>RED</th>
<th>ORANGE</th>
<th>YELLOW</th>
<th>GREEN</th>
</tr>
</thead>
<tbody>
<tr>
<td>COVID-19 is no longer controlled.</td>
<td>Significant risk that COVID-19 is no longer controlled.</td>
<td>Controlled, still a risk of community transmission.</td>
<td>Vaccine, herd immunity or effective treatment.</td>
<td></td>
</tr>
</tbody>
</table>

| OUTCOME | Strong restrictions to limit unnecessary movement of people and contacts to contain community transmission and outbreaks. | Restrictions on non-essential close contact activities, both socially and in some workplaces, to address a high risk of community transmission. | Physical distancing and standard public health measures to mitigate risk associated with sporadic cases or clusters. | Population prepared for future communicable disease outbreaks. |
### Strategy: Working together to control COVID-19 while ensuring the continued economic and social wellbeing of our province.

<table>
<thead>
<tr>
<th>Alert Level</th>
<th>RED</th>
<th>ORANGE</th>
<th>YELLOW</th>
<th>GREEN</th>
</tr>
</thead>
<tbody>
<tr>
<td>COVID-19 is no longer controlled.</td>
<td>Significant risk that COVID-19 is no longer controlled.</td>
<td>COVID-19 is controlled, still a risk of community transmission.</td>
<td>Vaccine, herd immunity or effective treatment.</td>
<td></td>
</tr>
</tbody>
</table>

### SUMMARY

<table>
<thead>
<tr>
<th>RED</th>
<th>ORANGE</th>
<th>YELLOW</th>
<th>GREEN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stay at home, other than for work, attending post-secondary or essential personal movement to businesses or activities that remain open. Stay within your household bubble which includes caregivers and immediate family.</td>
<td>Stay at home, other than for work or school or for personal movement to businesses that remain open. Small outside gatherings and activities are encouraged with distancing of 2m. Community masks must be worn when distancing is 1m or more but less than 2m. Grow your bubble to two households, in addition to caregivers and immediate family.</td>
<td>All businesses can open but continue to respect physical distancing of 2m. If unable to distance 2m, wear a community mask. Gatherings are limited both inside and outside according to level of risk. Grow your bubble to close friends and extended family.</td>
<td>Follow good public health measures to protect against seasonal communicable diseases and potential future pandemics.</td>
</tr>
</tbody>
</table>

### PUBLIC HEALTH MEASURES

<table>
<thead>
<tr>
<th>RED</th>
<th>ORANGE</th>
<th>YELLOW</th>
<th>GREEN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Keep 2m apart at all times outside home including in workplaces. If unable to distance 2m, wear a community mask. Does not apply to daycare and emergency front line services (i.e. health care, policing) when close contact is necessary as they have additional public health precautions in place.</td>
<td>Keep 2m apart in public with people who are not in your bubble. Utilize 1m rule in schools and school buses which have additional public health precautions in place. In public settings with seated venues physical distancing can be reduced to 1m with the continuous use of a community mask. This measure already exists in public transit and would now apply in settings such as post-secondary institutions, with the condition that food and drink not be consumed when people are seated at this distance. Distancing of 2m would be required in order for food or drinks to be consumed. Avoid indoor gatherings outside of bubble.</td>
<td>Keep 2m apart in public with people you don’t know or don’t see often. If unable to distance 2m wear a community mask. Utilize 1m rule in schools and school buses which have additional public health precautions in place. In public settings physical distancing can be reduced to 1m with the continuous use of a community mask. This measure already exists in public transit and would now apply in settings such as theatres or recreational facilities such as arenas with the condition that food or drink not be consumed when people are seated at this distance. Distancing of 2m would be required in order for food or drinks to be consumed.</td>
<td>No physical distancing required. Community masks are recommended in public when symptomatic.</td>
</tr>
</tbody>
</table>

---

**COVID-19 Fall Pandemic Response and Preparedness Plan 2020**
### Strategy: Working together to control COVID-19 while ensuring the continued economic and social wellbeing of our province.

<table>
<thead>
<tr>
<th>Alert Level</th>
<th>RED</th>
<th>ORANGE</th>
<th>YELLOW</th>
<th>GREEN</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>COVID-19 is no longer controlled.</td>
<td>Significant risk that COVID-19 is no longer controlled.</td>
<td>COVID-19 is controlled, still a risk of community transmission.</td>
<td>Vaccine, herd immunity or effective treatment.</td>
</tr>
</tbody>
</table>

#### General public health advice:
- Regularly disinfect surfaces; wash and dry hands, cough and sneeze into elbow, don’t touch your face, wear a community mask when not able to physically distance 2m; if you have COVID-19 symptoms stay at home and call Telecare 811 or your primary care provider.
- The use of face masks must be done in an appropriate fashion as per public health advice.

#### Testing:
- Testing of all potential cases of COVID-19 for people who meet the case definition (i.e. are displaying relevant symptoms). Keep testing at a level where the positivity rate remains at or below five per cent if possible.
- Tests will take place at dedicated Community-Based Assessment Centres or designated primary care practices.
- Random testing within communities (including for people who are asymptomatic) may be carried out locally or in groups more at-risk to inform understanding on the spread of the virus in certain settings or areas.

#### Contact tracing:
- Ongoing contact tracing for all confirmed and probable new cases of COVID-19, with appropriate self-isolation measures put in place.

#### Self-Isolation:
- Stringent self-isolation of those who display relevant symptoms of COVID-19, test positive for COVID-19, have been in close contact with someone who tests positive for COVID-19, including managed isolation for those who come from outside the country or from a province or territory which is experiencing a high prevalence of the virus.
- Provide facilities for those who do not have sufficient capacity to self-isolate effectively in their own homes (i.e. vulnerable populations).
Strategy: Working together to control COVID-19 while ensuring the continued economic and social wellbeing of our province.

<table>
<thead>
<tr>
<th>Alert Level</th>
<th>RED</th>
<th>ORANGE</th>
<th>YELLOW</th>
<th>GREEN</th>
</tr>
</thead>
<tbody>
<tr>
<td>COVID-19 is no longer controlled.</td>
<td>Significant risk that COVID-19 is no longer controlled.</td>
<td>COVID-19 is controlled, still a risk of community transmission.</td>
<td>Vaccine, herd immunity or effective treatment.</td>
<td></td>
</tr>
</tbody>
</table>

**PERSONAL MEASURES**

<table>
<thead>
<tr>
<th>Level</th>
<th>RED</th>
<th>ORANGE</th>
<th>YELLOW</th>
<th>GREEN</th>
</tr>
</thead>
<tbody>
<tr>
<td>People instructed to stay at home, other than for essential personal movement (i.e. work, post-secondary education, necessities of life). People must stay within their household bubble. Bubble can be extended to caregivers or immediate family. Anyone who feels unwell should immediately self-isolate from others in their bubble. Sports and recreational activities allowed if individual or with members of household bubble. People at higher-risk of severe illness from COVID-19 (e.g. those with underlying medical conditions, especially if not well-controlled, and the elderly) are encouraged to take additional precautions when leaving home.</td>
<td>People instructed to stay at home, other than for allowed activities: - Accessing services, businesses or activities which are allowed. - Going to work or school. - Low risk recreational activities with groups of less than 10 with physical distancing. - Travelling to permitted gatherings. - Relocating a home or business. - Medical or health services appointments. People must stay within their two-household bubble. This extended bubble should remain exclusive except for caregivers or immediate family. Anyone who experiences two COVID-19 symptoms must immediately self-isolate from others in their extended bubble. People at higher-risk of severe illness from COVID-19 are encouraged to take additional precautions when leaving home, i.e. wearing a community mask.</td>
<td>Leave home, but in a safe way. Participating in sports and recreational activities is allowed, subject to conditions on gatherings, keeping records of visitors or participants for contact tracing purposes, hygiene requirements and physical distancing. People at higher-risk of severe illness from COVID-19 are encouraged to take additional precautions when leaving home, i.e. wearing a community mask.</td>
<td>No restrictions on personal movement.</td>
<td></td>
</tr>
</tbody>
</table>

**TRAVEL AND TRANSPORT**

<table>
<thead>
<tr>
<th>Level</th>
<th>RED</th>
<th>ORANGE</th>
<th>YELLOW</th>
<th>GREEN</th>
</tr>
</thead>
<tbody>
<tr>
<td>No restrictions on deliveries and/or transport or goods both within the province, and outside of the province.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**BORDERS**

<table>
<thead>
<tr>
<th>Level</th>
<th>RED</th>
<th>ORANGE</th>
<th>YELLOW</th>
<th>GREEN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Most citizens must self-isolate upon return from travel outside the province. Exempted individuals subject to WorkSafe NB work isolation protocols. Public transit physical distancing (2m) and masking. If unable to distance 2m, wear a community mask.</td>
<td>Self-isolation measures for travel outside the province maintained as per risk assessment. Loosen distancing to 1m with masking for public transportation.</td>
<td>Self-isolation measures may be lifted for priority groups and/or in jurisdictions that present a low risk. Maintain physical distancing of 1m and masking on public transport.</td>
<td>No restrictions on travel inside or outside the province.</td>
<td></td>
</tr>
</tbody>
</table>
Strategy: Working together to control COVID-19 while ensuring the continued economic and social wellbeing of our province.

<table>
<thead>
<tr>
<th>Alert Level</th>
<th>RED</th>
<th>ORANGE</th>
<th>YELLOW</th>
<th>GREEN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alert Level</td>
<td>COVID-19 is no longer controlled.</td>
<td>Significant risk that COVID-19 is no longer controlled.</td>
<td>COVID-19 is controlled, still a risk of community transmission.</td>
<td>Vaccine, herd immunity or effective treatment.</td>
</tr>
</tbody>
</table>

| GATHERINGS | No indoor gatherings outside household bubble. Outside gatherings with physical distancing of up to five people outside household bubble. | Indoor gatherings of up to 10 people for weddings, funerals and religious services. Outdoor gatherings of up to 10 people with physical distancing outside household bubble. Workplaces, education facilities, public transport and supermarkets are not considered gatherings. Additional conditions on gatherings: – Physical distancing and infection prevention and control requirements must be met. – All gatherings shall record attendees to ensure contact tracing can be conducted if necessary. – No participants allowed who have COVID-19 symptoms or who need to be in isolation for any reason. | Recommended to keep uncontrolled outdoor gatherings with physical distancing at 50 people or less. Additional conditions on gatherings: – Physical distancing and infection prevention and control requirements must be met. – All gatherings should record attendees to ensure contact tracing can be conducted if necessary. – No participants allowed who have COVID-19 symptoms or who need to be in isolation for any reason. | No restrictions on gatherings. |
**Strategy:** Working together to control COVID-19 while ensuring the continued economic and social wellbeing of our province.

<table>
<thead>
<tr>
<th>Alert Level</th>
<th>RED</th>
<th>ORANGE</th>
<th>YELLOW</th>
<th>GREEN</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>COVID-19 is no longer controlled.</td>
<td>Significant risk that COVID-19 is no longer controlled.</td>
<td>COVID-19 is controlled, still a risk of community transmission.</td>
<td>Vaccine, herd immunity or effective treatment.</td>
</tr>
</tbody>
</table>

### PUBLIC VENUES

<table>
<thead>
<tr>
<th>Alert Level</th>
<th>RED</th>
<th>ORANGE</th>
<th>YELLOW</th>
<th>GREEN</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>All public venues closed (e.g. libraries, museums, cinemas, food courts, dining rooms, gyms, pools, amusement parks, playgrounds, farmers’ markets).</td>
<td>All close contact public venues remain closed (e.g. cinemas, theatres, food courts, gyms, pools, arenas, amusement parks). Libraries, museums and similar cultural venues may open with 2m physical distancing. Restaurant dining rooms may open with 2m physical distancing or physical barriers between tables and community masks must be worn while moving between tables. Public open spaces (e.g. parks) may be used, but people need to maintain physical distancing (2m) outside their bubbles. Community masks must be worn when distancing is 1m or more but less than 2m.</td>
<td>All public venues open if they comply with public health measures and ensure 2m physical distancing and record keeping. In settings such as post-secondary institutions, arenas and theatres, physical distancing can be reduced to 1m with the continuous use of a community mask. This effectively means no food or drinks can be consumed when seated at this distance. Food and/or drinks can be consumed at a distance of 2m. Restaurant dining rooms continue to require 2m physical distancing or physical barriers between tables and community masks must be worn while moving between tables. Event facilities, including cinemas, stadiums, concert venues and casinos have an occupancy limit set as per the size of their venue and the ability to ensure physical distancing and record keeping.</td>
<td>No restrictions on public venues.</td>
</tr>
</tbody>
</table>

### HEALTH SERVICES

<table>
<thead>
<tr>
<th>Alert Level</th>
<th>RED</th>
<th>ORANGE</th>
<th>YELLOW</th>
<th>GREEN</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Non-urgent medical procedures and elective surgeries are postponed. Primary care providers and regulated health professionals may operate, using virtual whenever possible. Unregulated health professionals and personal services are closed. Visitation restricted outside end of life, obstetrics and pediatrics.</td>
<td>Non-urgent medical procedures and elective surgeries allowed. Primary care providers and regulated health professionals may operate using virtual whenever possible. Unregulated health professionals are allowed, close contact personal services (i.e. barbers, hair stylists, spas) remain closed. Strict visitor restrictions maintained in vulnerable settings.</td>
<td>Health services progressively ramp up to full capacity while maintaining appropriate infection, prevention and control measures and physical distancing. Close contact personal services are now allowed. Visitor restrictions are loosened in vulnerable settings with the use of personal protective equipment.</td>
<td>No restrictions on health services.</td>
</tr>
<tr>
<td>Alert Level</td>
<td>RED</td>
<td>ORANGE</td>
<td>YELLOW</td>
<td>GREEN</td>
</tr>
<tr>
<td>-------------</td>
<td>-----</td>
<td>--------</td>
<td>--------</td>
<td>--------</td>
</tr>
<tr>
<td>COVID-19 is no longer controlled.</td>
<td>Significant risk that COVID-19 is no longer controlled.</td>
<td>COVID-19 is controlled, still a risk of community transmission.</td>
<td>Vaccine, herd immunity or effective treatment.</td>
<td></td>
</tr>
</tbody>
</table>

### WORKPLACES

**Workplaces remain open if they are operating safely as per their COVID-19 operational plan.**

“Operating safely” means:
- complying with Red COVID-19 Alert settings in this table, and
- meeting appropriate Public Health and WorkSafe NB requirements for their workplace (e.g. physical distancing, physical barriers, masking), and
- fulfilling all other health and safety obligations.

This does not include public facing or close contact businesses expressly forbidden to operate within alert level.

<table>
<thead>
<tr>
<th>WORKPLACES</th>
<th>RED</th>
<th>ORANGE</th>
<th>YELLOW</th>
<th>GREEN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Workplaces remain open if they are operating safely as per their COVID-19 operational plan.</td>
<td>Workplaces remain open if workers are operating safely as per their COVID-19 operational plan.</td>
<td>Workplaces remain open if workers are operating safely as per their COVID-19 operational plan.</td>
<td>Businesses operate under regular health and safety guidelines.</td>
<td></td>
</tr>
<tr>
<td>“Operating safely” means:</td>
<td>“Operating safely” means:</td>
<td>“Operating safely” means:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>– complying with Red COVID-19 Alert settings in this table, and</td>
<td>– complying with Orange COVID-19 Alert settings in this table, and</td>
<td>– complying with Yellow COVID-19 Alert settings in this table, and</td>
<td></td>
<td></td>
</tr>
<tr>
<td>– meeting appropriate Public Health and WorkSafe NB requirements for their workplace, and</td>
<td>– meeting appropriate Public Health and WorkSafe NB requirements for their workplace, and</td>
<td>– meeting appropriate Public Health and WorkSafe NB requirements for their workplace, and</td>
<td></td>
<td></td>
</tr>
<tr>
<td>– fulfilling all other health and safety obligations.</td>
<td></td>
<td>– fulfilling all other health and safety obligations.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### EDUCATION

**Daycares remain open with appropriate guidance.**

K-12 school is limited to virtual only.

Teachers and employees in schools to teach virtually from their classrooms.

Post-secondary education can continue to operate in-person for practical programs but only virtually in areas where it is possible.

<table>
<thead>
<tr>
<th>EDUCATION</th>
<th>RED</th>
<th>ORANGE</th>
<th>YELLOW</th>
<th>GREEN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Daycares remain open with appropriate guidance.</td>
<td>Daycares and K-12 schools are open under appropriate guidance, virtual to be used for at-risk populations.</td>
<td>All educational and camp facilities are open under appropriate public health guidance, virtual to be used for at-risk groups.</td>
<td>No restrictions on educational venues.</td>
<td></td>
</tr>
<tr>
<td>K-12 school is limited to virtual only.</td>
<td>Day camps are allowed. Overnight camps remain closed. Post-secondary education can operate, virtual to be used for at-risk populations.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Alert Level</td>
<td>RED COVID-19 is no longer controlled.</td>
<td>ORANGE Significant risk that COVID-19 is no longer controlled.</td>
<td>YELLOW COVID-19 is controlled, still a risk of community transmission.</td>
<td>GREEN Vaccine, herd immunity or effective treatment.</td>
</tr>
<tr>
<td>-------------</td>
<td>-------------------------------------</td>
<td>---------------------------------------------------------------</td>
<td>---------------------------------------------------------------</td>
<td>--------------------------------------------------</td>
</tr>
</tbody>
</table>

All K-12 school facilities are subject to the Department of Education and Early Childhood Development guidance during the duration of the pandemic. All schools will have a COVID-19 operational plan in place. Modification to group and class sizes will be made across grade levels.

For K-8, no physical distancing requirements in the classroom will be in place, but class groupings will remain the same throughout the day and semester as much as possible. For grades 9-12, class groupings can change but physical distancing requirements of 1m will be required.

For post-secondary education, physical distancing requirements of 2m will apply during the Red alert phase and through other phases. However, it can be reduced to 1m with continuous mask wearing in the classroom.

Any educational facility connected to a cluster of confirmed or probable cases of COVID-19 may be required to close temporarily, if advised by Public Health, to support contact tracing and case and contact management.

### New Brunswick’s Wave Two Testing Strategy

The best way to monitor for COVID-19 in the population is to actively test New Brunswickers for the illness. In a second wave of COVID-19 cases, the following groups of individuals will be targeted for testing:

**Symptomatic people:** Testing symptomatic people is still the backbone of the testing strategy and the best way to identify cases and implement public health control measures. New Brunswick will test for a wide range of symptoms to ensure a symptomatic individual can access testing regardless of how the virus is presenting.

**Targeted high-risk groups:** Some groups of people are defined as high-risk because they could introduce COVID-19 in the community through travel or contact outside the province. Individuals working or accessing high-risk areas (areas with a greater potential for outbreaks or at a greater risk for complications) are also considered a high-risk group.

**Sentinel testing:** Continuous testing of asymptomatic, random community members is a way to identify possible community transmission before cluster events and to evaluate the burden of disease in the population in general.

New Brunswick’s testing strategy has been divided into two phases:

**Phase One: COVID-19 only (July - September/October)**

In Phase One, New Brunswick has set a goal of conducting over 3,000 tests per week for COVID-19.

**Symptomatic people**

- All symptomatic people can be tested (only one symptom required)

**Targeted high-risk groups: when asymptomatic**

- All close contacts of a confirmed COVID-19 case
- COVID-19 care unit staff: can be tested two times per week during care of a COVID-19 patient
- Long-haul truckers (being assessed)
- Locums/medical students from outside the Atlantic bubble
- Temporary foreign workers
• New admissions to provincial correction facilities
• Compassionate traveler from outside the Atlantic bubble
• Nursing home/adult residential facilities staff: can be tested twice per month
• First Nations community health centre staff
• Provincial correctional facilities staff
• Homeless shelters staff and volunteers
• International high school and university students
• Federal inmates - 72 hours prior to release

**Sentinel testing: when asymptomatic**

- Random sampling in emergency rooms
- Maximum five people per day per emergency room

**Phase Two: Co-circulation of seasonal influenza and COVID-19 (September/October – spring 2021)**

In Phase Two, New Brunswick will need to manage an increase in COVID-19 testing and adapt the testing strategy to cover the co-circulation of COVID-19 and seasonal influenza.

To cover both the regular influenza season and a second wave of COVID-19, the Office of the Chief Medical Officer of Health estimated the need for COVID-19 testing to be around 120,000 tests.

The laboratory will have to test for COVID-19 and influenza at the same time. As the number of symptomatic patients increases, the need for asymptomatic testing is likely to decline or be given lower priority so that there are no delays in testing high-priority groups. No additional groups will be added for testing.

**Provincial Approach to Contact Tracing in New Brunswick**

To manage a second wave of COVID-19, mass contact tracing and containment activities must continue. This includes safely isolating people who have COVID-19, as well as quarantining and monitoring those at risk of contracting and developing the illness.

To be ready for an unprecedented event, an accelerated upscaling of resources to assist local Public Health offices with these critical functions is required. This upscaling will include added human resources and other mechanisms to quickly secure surge capacity within the province to mitigate transmission risk.

This surge capacity may also allow Public Health to simultaneously manage COVID-19 along with other important Public Health activities (e.g. immunization). This aligns to the overall government priority of dealing with the impact of COVID-19 while facilitating the recovery of other important government services (Provincial Recovery Plan, 2020).

In the event of a surge of COVID-19 cases, a designate from the Office of the Chief Medical Officer of Health under the direction of the Chief Medical Officer of Health or designate, will lead the overall coordination of the activities within this plan. The Office of the Chief Medical Officer of Health will use the “Provincial Contact Tracing Taskforce” to assist with deployment and communication. The operational components of the plan will be conducted by Public Health teams in the regional health authority (RHA) to ensure integration with existing local actions on the ground.

Health Canada has proactively put together a capacity comprised of federal public servants from Health Canada and Public Health Agency of Canada (PHAC), National Defence and Statistics Canada who have been re-tooled to support the provinces and territories with contact tracing (Health Canada, 2020). During the period of surge capacity, these public servants will report to the regional Public Health teams and serve as regional Public Health staff.
A designate from the Office of the Chief Medical Officer of Health will liaise directly with these federal agencies when required to coordinate the effort overall.

To maximize effective tracing and containment efforts, clinical testing processes may also need to be enhanced or reviewed during an outbreak. If additional clinical testing is required because of contact tracing, it is important that access be enhanced and that processes to refer for testing are streamlined.
Chapter Two
Return to School
**Introduction**

As scientists around the world make new discoveries regarding the transmission, controls and treatment of COVID-19, the directives of government will be adapted and may differ from what they are today. The health directives may be different between November than those in September. The Return to School plan and other various related documents will be modified to reflect these changes in directives.

Chapter Two is intended to inform the public on the return to school in September 2020. This chapter provides details of what parents and students need to know before returning to school in September 2020. This plan will continue to grow and evolve as new information becomes available from public health experts.

**Guiding Principles**

The Department of Education and Early Childhood Development remains committed to the following guiding principles as students and educators prepare to return to school in the fall:

**Quality Education**

- Our mandate: to provide quality education for all public school students.
- Students will receive quality, curriculum-based distance education if they are not permitted in the school building because of COVID-19.

**Safe and Healthy Learning Environment**

- Each school will have an operational plan laying out the health and safety guidelines.
- Individual school operational plans will be shared with parents before school resumes.
- Kindergarten to Grade 8 class grouping (bubble\(^2\)) will minimize the risk of transmission in the school setting and promote safe social interactions. Class groupings will facilitate contact tracing.
- High schools will use blended learning, create more personalized learning opportunities and use physical distancing to minimize the risk of transmission.

**Full-Time Learning**

- Education is crucial for the development of children and for the future of the province.
- No matter what Public Health phase the province finds itself in, learning will continue full-time.
- The principle of inclusion is a cornerstone of our education system.

**Collaboration with Public Health**

- This plan was developed with Public Health and the Office of the Chief Medical Officer.
- Public Health plays a critical role in ensuring a healthy and safe school environment. We will continue to collaborate with Public Health throughout the school year to ensure information is up-to-date and best practices are followed.
- If a positive case of COVID-19 is confirmed in a school, the school will work with Public Health to support contact tracing.
- Public Health will make informed decisions and communicate directly with the school and parents on next steps.

**Outbreak Management**

The Department of Education and Early Childhood Development and Public Health have developed an outbreak management process to ensure that roles and responsibilities are understood when there is a positive COVID-19 case identified in the school system.

---

\(^2\) The term “bubble” refers to groups of students that are assigned to stay together in this grouping while at school.
Parents, students and school personnel may become anxious if there is a positive case confirmed in a school. It is natural to want to know if a positive case is in your child’s class. Public Health will inform those who are at risk of the next steps but will not release the names of those people who have tested positive. The protection of privacy remains a priority.

**Communication of a Confirmed COVID-19 Case**

- The school will be informed by Public Health when there is a positive case in a school.
- The school administration will communicate with parents and the school community.
- Public Health may provide additional information.

**Contact Tracing**

- Public Health is responsible for the contact tracing, with support from the school system.
- Through their operational plan, schools will be able to provide Public Health with a list of individuals who may have come into contact with a positive COVID-19 case.
- Relevant students or school personnel will also be interviewed by Public Health for contact tracing.

**Decisions**

- Public Health is responsible for responding to communicable diseases, including COVID-19.
- Public Health will, through contact tracing and risk management, make decisions on who self-isolates. This may require an individual or several individuals, a classroom or multiple classrooms or even a school population to self-isolate.
- Public Health will inform these individuals of when they can return to school.

**Roles and Responsibilities During Outbreak**

<table>
<thead>
<tr>
<th>Student and parent</th>
<th>School and district</th>
<th>Public Health</th>
</tr>
</thead>
<tbody>
<tr>
<td>– If a student is ill, it is critical that they stay home. Call 811 or a medical professional if your child has COVID-19 symptoms. Follow medical professional’s advice.</td>
<td>Provide a safe learning environment.</td>
<td>– Identify and communicate a potential/positive case. – Inform a school of a positive COVID-19 case. – Manage outbreaks.</td>
</tr>
<tr>
<td>Daily screening before leaving for school.</td>
<td>Coordinate with Public Health by providing contact tracing information.</td>
<td>Provide support to schools and work collaboratively on health and safety.</td>
</tr>
<tr>
<td>Cooperation and communication are key to manage an outbreak.</td>
<td>Provide communication to parents and students in the event of a positive COVID-19 case in a school.</td>
<td>Inform students and parents and school personnel if they need to self-isolate, in collaboration with the school.</td>
</tr>
<tr>
<td>If you get an urgent call regarding the health of your child during the school day, you will be required to pick up your child as soon as possible, consistent with school practice. Parents should have a back-up plan for pick up.</td>
<td>Provide students with distance learning if a student is not able to attend school.</td>
<td>Inform relevant students and parents and school personnel when a child is safe to go back to school.</td>
</tr>
</tbody>
</table>
We are all in this together

Every New Brunswicker has a role to play

• Be kind. Do not judge others. Focus on playing your part.
• Care for yourself and your family by staying active and fostering wellness.
• Screening is critical. Prior to leaving for school, make sure your child is well. Review the screening questions each morning.
• If you or your child has COVID-19 symptoms or if you are not feeling well, stay home.
• Parents of students with specific health concerns should discuss return to school with their medical practitioner. Relevant information should then be shared with school for appropriate planning.

Protect yourself, protect others

• Every student and school personnel must ensure they bring a mask to school. The mask must be cleaned daily.
• Being tested when symptoms are present is being responsible.
• School personnel will follow protocols for students who are ill.

Call 811 when you have symptoms

• Check the Public Health website for the latest list of symptoms.
• Follow Public Health’s advice, they are the experts.

Personal safety etiquette

• Regular handwashing is one of the best ways to protect yourself and your family from getting sick. Wash when leaving home, getting to school and throughout the day.
• Wash your hands with soap and water or use hand sanitizer. Hum the “Happy Birthday” song twice.
• Cover your mouth and nose with your elbow or tissue when you cough or sneeze. Dispose of the used tissue immediately.
• Avoid touching your eyes, nose and mouth.

Wellbeing and security

• Breakfast and snack programs will continue uninterrupted to ensure food security.
• Parents, students and school will help foster a culture of respect and mindfulness.
• Safe and healthy behaviours will be promoted and modelled.
• Mental health and wellness support will be provided.

Schools

Schools will look different in September. To accommodate smaller groupings, some schools have had to create new classroom spaces. They might use cafeterias or libraries. Each school will have an operational plan detailing how students and school personnel will move within the building.

Operational Plan

• Schools will have an operational plan outlining their health and safety protocols. This plan will be shared with parents and the school community.
• Schools will review how students and school personnel will move inside the building to ensure physical distancing and class groupings are kept intact.
• Class groupings or physical distancing will be respected during recess, breaks and lunch time.
**Buses**
- All students in K-5 will maintain a distance of one (1) metre (one student per seat) and are not required to wear a mask.
- Two members of the same household may sit together without wearing a mask.
- Students in grades 6-12 will wear a community face mask when entering and exiting the bus. A student can remove their face mask if they are sitting alone or with a member of the same household during the duration of the bus ride.
- The school districts may reorganize the bus routes.
- Schools may adjust their schedules to accommodate route changes.

**Controlled and Limited Access**
- To help with contact tracing, access to schools will be limited to control the flow of people.
- The flow of school personnel and other individuals between schools will be limited when possible.
- Additional health and safety protocols will be in place for anyone who is not a student or school personnel entering the school building.
- Parents will only be able to enter the school if they have an appointment or are picking up a sick child.
- Parents will need to wear a mask, maintain physical distancing and follow any other health and safety protocols.

**Enhanced Cleaning and Disinfecting**
- Enhanced cleaning protocols have been established and will be outlined in each school’s operational plan.
- Cleaning supplies are being purchased by school districts and secured to ensure availability.

**Hand Sanitation Stations**
- Hand sanitation stations will be in each class and at each entrance of the school.
- Students and school personnel are required to wash or sanitize their hands regularly.

**Drinking Fountains**
- Bottle filling stations will be available, and signs will be posted to outline safe use.
- Water fountains will not be in use.

**Washrooms / Changerooms**
- Handwashing signs will be posted in every washroom.
- Washrooms and changerooms will be cleaned a minimum of three times a day.
- School operational plans may limit the number of people who can be inside a washroom at any given time.

**Cafeterias**
- Cafeterias will follow Public Health and WorkSafeNB requirements for food service providers.
- Where a common dining area is used, physical distancing requirements will be in place.
- Mealtimes may be staggered to alternate between groups of students.
- Student groupings will physical distance by two metres from other groups.
- Non-grouped students will physical distance by two metres.

**Community Use of School**
- Community use of schools is on hold until further notice.
Ventilation

- Ensuring good air quality has consistently been a priority to ensure school environments are healthy and safe.
- School ventilation systems and requirements have been reviewed with Public Health and the Department of Transportation and Infrastructure.
- Existing standards and systems for ventilation in schools were determined to meet health and safety requirements at this time.

Classrooms

Classrooms will be different this year. However, efforts have been made to minimize the impact on the classroom as much as possible. While school will be different, the goal is to provide quality education while in a safe learning and working environment. Students and school personnel have an important role to play.

Groupings for Grades K - 8

- Physical distancing is difficult with younger students. Kindergarten to Grade 8 will be divided in class groupings (bubbles).
- No physical distancing is required within a grouping.
- Students in groupings will be taught age-appropriate ways to reducing physical contact and promote hygiene.
- Classroom groupings will not interact with students from other groupings. Groupings will be separated by two metres.
- Online learning between groupings may be an option.
- Enhanced safety protocols will be in place for school personnel who visit multiple groupings.

<table>
<thead>
<tr>
<th>Group size</th>
<th>Schools</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grades</td>
<td></td>
</tr>
<tr>
<td>K – 2</td>
<td>Reduced group size, as close to 15 students as possible.</td>
</tr>
<tr>
<td>3-5</td>
<td>Reduced group sizes, as close to 22 students as possible.</td>
</tr>
<tr>
<td>6-8</td>
<td>Regular class sizes.</td>
</tr>
</tbody>
</table>

Physical Distancing for High School (Grades 9-12)

- To allow high schools students personalized learning options, class groupings are not possible.
- To facilitate physical distancing and ensure a quality education, high school students may be learning in a blended environment, attending school every other day at a minimum.
- Schools that can provide appropriate physical distancing may operate without rotational attendance while respecting health and safety protocols.
- High school students will need to physical distance by one metre within a classroom and two metres outside the classroom.
- Attendance will still be taken for students who are engaged in distance education or blended learning.

Protect Yourself, Protect Others in Your Classroom

- Stay home if you are ill or have COVID-19 symptoms.
- Wash or sanitize your hands when you arrive in your class and frequently throughout the day, as required.
- Respect and maintain physical distancing.
- Practice personal hygiene etiquette.

Community Mask

- Community masks are an effective tool to control transmission of COVID-19.
- All students and school personnel must have a clean mask for use during the school day.
• Masks are recommended for all emergency drills but not to the detriment of the response to the drill.
• Students will not have to wear a mask inside their grouping.
• Students in K-5 should be encouraged to wear a mask in common areas outside class groupings inside the school building. For example, going to the washroom, visiting a resource teacher, etc.
• Students in 6-12 must use masks in common areas outside their class.

Sharing Materials
• All shared materials such as computers, physical education equipment, musical instruments, microwaves, etc. will be disinfected between uses.
• Material that cannot be disinfected must only be used by one student. For instance, playdough.
• High school students will be required to disinfect their desk and their chairs after each class.

Learning
Learning will be full-time for all students. The regular curriculum will be taught and there will be regular evaluation and report cards. Additional resources that support wellness and mental health will be put in place.

Kindergarten to Grade 8 Learning
• Students from Kindergarten to Grade 8 will be in school full-time.
• Activities that promote good health and safety awareness will be incorporated in the curriculum.
• The number of school personnel interacting with a class grouping will be minimized.
• Learning activities outside, including snack time, place-based learning and unstructured time are encouraged.

High School Learning
• High school students will participate in a blended learning environment, at school and online.
• Students will be in the school at a minimum of every other day.
• Attendance will be taken when students are learning online.
• In order to achieve the learning outcomes in their personalized learning plan, some students may be recommended by the strategic team to be in school daily.
• Students enrolled in disciplines, like the trades, may be permitted to attend daily.
• Learning will be done using educational strategies such as online, project based, and experiential learning.
• Students will learn individually and in groups. Students will have access to virtual spaces that allow for collaboration, networking, and teamwork.
• Students will bring their own electronic devices to school for learning.
• IT infrastructure will be enhanced to support the Bring Your Own Device Initiative.
• Secondary learning places may be established within local communities to support students who may not have dedicated internet or technology access.

Physical Education, Music and Art
• Physical education, music and art are essential components of the curriculum. They are encouraged and should be taught when possible.
• Materials and equipment will not be shared unless it is disinfected.
• Singing and the playing of wind instruments are not allowed.
Co-Curricular, Field Trips and Other Activities

- For K-8, these activities will be permitted as long as they meet the grouping requirements.
- For grades 9-12, these activities will be permitted as long as students can physically distance.
- These activities will follow any additional health protocols required by Public Health.
- The class groupings will be protected when students are participating in an activity off the school grounds.
- Outdoor activities are recommended and should be prioritized.

Assemblies

- Large in-person school activities or assemblies will not be permitted. These may take place virtually.

Distance Education During an Outbreak

- Education will continue to be mandatory during an outbreak. The table below identifies the types of learning to be expected.
- Learning objectives may be prioritized during an outbreak.
- Electronic devices will be distributed to students in grades 6-8 who do not have access to technology if the students cannot be in the school.
- Principals must ensure an up-to-date and accurate list of students who require technology to support mandatory learning.

<table>
<thead>
<tr>
<th>Grades</th>
<th>Type of learning</th>
<th>Contact with teacher</th>
</tr>
</thead>
<tbody>
<tr>
<td>K-2</td>
<td>Paper-based</td>
<td>Daily check-in</td>
</tr>
<tr>
<td>3-5</td>
<td>Paper-based with some technology</td>
<td>Routine teaching engagement</td>
</tr>
<tr>
<td>6-8</td>
<td>Technology based when possible</td>
<td>Regular teaching</td>
</tr>
<tr>
<td>9-12</td>
<td>Technology based</td>
<td>Regular teaching</td>
</tr>
</tbody>
</table>
Chapter Three
Post-Secondary Institutions
Introduction
The Government of New Brunswick has been working closely with the province’s post-secondary institutions to prepare for the resumption of classes this fall. Chapter Three outlines GNB’s guidance for post-secondary institutions and requirements for managing student arrivals during the COVID-19 pandemic.

Planning Efforts for Post-Secondary Institutions
The Department of Post-Secondary Education, Training and Labour in conjunction with Public Health have been meeting with all New Brunswick public universities and colleges weekly since the start of the COVID-19 pandemic. All post-secondary institutions are in various stages of developing operational plans, in accordance with Public Health and WorkSafeNB guidelines. They have all been advised to prepare “outbreak plans” to confirm their readiness for potential COVID-19 scenarios. Institutions are unique and plans are customized based on their infrastructure and programming; and updated on a regular basis based on availability of new information.

All institutions are following the 14-day self-isolation guidelines, with the exception of students from the Atlantic Bubble. All other Canadians as well as international students will have to undertake 14-day isolation.

Requirements for Managing International Students
The document provides critical advice to post-secondary institutions and sets out mandatory requirements that must be met under the provincial state of emergency. The guidance includes international students living on-campus or off-campus.

Mandatory requirements apply to all post-secondary institutions with international students coming into New Brunswick and help complement other federal and provincial directives relating to preventing the spread of COVID-19, travel directives and self-isolation requirements.

The Guidance for Post-Secondary Institutions: Requirements for Managing International Student Arrivals During the COVID-19 Pandemic may not apply to:
- International students who have remained in Atlantic Canada, or another area exempt from self-isolation as per the current mandatory order, for a 14-day period prior to the start of their studies.
- Intra-provincial students (i.e. students who are from New Brunswick and traveling within the province to study).

The guidance document is subject to change and will be changed as experience is gained in effectively and appropriately addressing issues. It will remain in effect until further notice.

The guidance document and its requirements are administered by Post-Secondary Education, Training and Labour (PETL) in collaboration with the Department of Health (DH) and the Department of Public Safety (DPS).

Summary of Requirements to be met by Post-Secondary Institutions
All post-secondary institutions must submit the following information to Post-Secondary Education Training and Labour:

1. Detailed Plan

A detailed plan as to how they will safely welcome international students into New Brunswick which includes all of the requirements as described within this guide.

2. Letter Of Acknowledgement
A template of their “Letter of Acknowledgement” that the institution will issue to each student indicating they have approved the student’s individualized self-isolation plan and have obtained all pertinent information of the student prior to arriving in New Brunswick.

Note: ALL students must provide a copy of their institution’s “Letter of Acknowledgement” to Canadian border security and/or Public Safety to be granted permission to enter into Canada and New Brunswick.

3. On-Going Monitoring

Provide on-going, up-to-date lists including the following information:

a. Number of international students who will be arriving to New Brunswick
b. Dates of arrivals
c. Number of students requiring self-isolation:
   i. Number of students on-campus
   ii. Number of students off-campus
   1. The student’s complete address as to where they will be self-isolating.

Note: All international students must have a valid passport and study permit in their possession upon arrival.

Requirements Prior to Arrival

1. Registration

As part of New Brunswick’s COVID-19 recovery effort, everyone entering New Brunswick by land, air or sea must register (www.gnb.ca/travelregistration) so information can be collected to support Public Health.

Students can pre-register online or by phone before they travel. This helps speed up screening at the border. It also helps ensure students are aware of what documents are needed upon entry so that they can avoid being turned away.

Each adult entering the province needs to complete their own registration. Minor children may be listed on one registration along with the primary applicant who is their parent or guardian. Unaccompanied minors need their own registration.

2. Approved Housing and Accommodations

Students’ and institutions’ plans for housing and accommodating students during the 14-day self-isolation period must be arranged in advance of the students’ departure from their country of residence. Evidence of the plan will need to be shown upon entry into Canada and may be asked for at the provincial border. Institutions must monitor international students throughout the isolation period.

The housing and accommodations during the self-isolation period may include:

- On Campus: associated costs are the responsibility of the student.
- Off Campus at a site arranged by the institution (e.g. hotel): associated costs are the responsibility of the institution.
- Off Campus at a site arranged by the student but approved by the institution: associated costs are the responsibility of the student. Institutions may elect to require students to self-isolate either on campus or at a site, off campus which they have arranged.
3. Pre-screening Checklist

Institutions must submit a pre-screening checklist at least one week in advance of the scheduled arrival of the students.

4. Health Monitoring Plan

Institutions must have a health monitoring plan in place prior to the arrival of all international students. The plan is to clearly indicate how students will be monitored daily for symptoms during the 14-day self-isolation period. The plan would include instructions to staff and students on how to self-monitor. For information on self-monitoring, refer to the “Awareness Resources” section on the Government of New Brunswick Coronavirus website.

5. Illness Response Plan

The institution must have an illness response plan in place prior to the arrival of all students. The plan is to outline the procedures to follow should a student become ill while waiting for pick-up upon arrival in NB, during travel to their accommodation, and during the 14-day self-isolation period.

Information on what to do if someone has symptoms can be found on the Government of New Brunswick Coronavirus website. The site also includes a self-assessment tool to determine if someone should be tested for COVID-19.

6. Health Insurance

The Government of New Brunswick requires proof that the international student has health insurance. Institutions are responsible to verify proof of insurance for all international students.

7. Personal Protective Equipment

Upon arrival in the province, the institution must be aware of and ensure implementation of appropriate personal protective equipment to protect the international students, staff and the broader New Brunswick public. This includes wearing a mask during travel, while waiting to be picked up (i.e. if at an airport waiting for a taxi) and during travel to the point of self-isolation. Details on when and how to use personal protective equipment is outlined in the WorkSafeNB document, Embracing the New Normal.

8. COVID-19 Awareness

The institution is to provide information to international students on COVID-19, including current physical and social constraints (such as distancing, etc.) related to COVID-19 in New Brunswick, on or before their first day of arrival. The Department of Health has created a resource page where institutions can access material on COVID-19. Information can be found on the Government of New Brunswick Coronavirus website (Click “Awareness Resources” and then “More Resources”). Information must be provided in a language the international student understands.

Similar information and graphics need to be posted within on-campus facilities and any off-campus facilities arranged by the institution, before students arrive at their accommodation. These posts should include local contact numbers and resources including 811 and 911.

9. Supplies

Institutions are required to ensure international students have all the necessary supplies required during the 14-day self-isolation period, including appropriate accommodations, food, cleaning and personal supplies.
Requirements Upon Arrival

The following table illustrates the pathway upon entry into Canada. For students coming from outside of Canada or from another part of Canada who are entering New Brunswick by private ground transport, border patrol would screen the vehicle.

<table>
<thead>
<tr>
<th>Stage of Process</th>
<th>Components</th>
</tr>
</thead>
<tbody>
<tr>
<td>Arrival in Canada</td>
<td>Canada Border Services health screening upon entry</td>
</tr>
<tr>
<td></td>
<td>![No Symptoms to Symptomatic to Quarantined]</td>
</tr>
<tr>
<td>Transfer to New Brunswick</td>
<td>– Air transfers to a New Brunswick airport</td>
</tr>
<tr>
<td></td>
<td>– Private ground transport</td>
</tr>
<tr>
<td>14-Day Self-Isolation</td>
<td>Institutions must:</td>
</tr>
<tr>
<td></td>
<td>– Inform students that on day 10 of the 14-day quarantine, the student will be tested for COVID-19. Testing is mandatory. Refer to the Testing for COVID-19 section of this document for more information.</td>
</tr>
<tr>
<td></td>
<td>– Report symptoms to Public Health</td>
</tr>
<tr>
<td>Place of Active Studies</td>
<td>Institution follows Public Health protocols</td>
</tr>
<tr>
<td></td>
<td>Signage</td>
</tr>
<tr>
<td></td>
<td>Log/Checklist</td>
</tr>
</tbody>
</table>

1. Arrival Point

Students must proceed directly to where they will self-isolate upon entering the province, by land or by air. They may not stop at any businesses or residential locations. Institutions must ensure that students are clearly aware of this requirement. Students should not share taxis with others and should not use public transportation buses.

Institutions are highly encouraged to have a representative on site for the arrival of international students arriving by air, to facilitate their transition from the airport to the place they will self-isolate.

As part of the institution’s Illness Response Plan, there must be a process established to manage international students who become ill while at the pick-up location. Part of the plan should include screening for symptoms at the pick-up location, e.g.: “Are you feeling sick with fever, new cough or worsening chronic cough, runny nose, headache, sore throat, new onset of fatigue, new onset of muscle pain, diarrhea or loss of taste or smell?”

If washrooms are available, international students should be advised to use the washroom and wash their hands before proceeding to the vehicle transporting them to their housing accommodation. Students should load their own luggage into the vehicle.

Throughout this process it is important that the driver and international student remain at least two metres away from each other and continue to follow good personal hygiene practices.

2. Transportation to Quarantine Accommodation

As part of the institution’s Illness Response Plan, there must be a process established to manage international students who become ill during transportation to the self-isolation accommodation.
Requirements for Self-Isolation

Upon arriving at the accommodations being used during the 14-day self-isolation period, students are expected to remain there for the duration. They are not allowed to leave during this period. For information on self-isolating refer to the “Stay safe and stay informed” section on the Government of New Brunswick Coronavirus website. Public Safety will be conducting periodic checks to ensure compliance with the housing and accommodation plan submitted by the institution.

As well, please note that Service Canada reserves the right to inspect at any time; international student entering the province will have received a communication from the federal government in this regard.

1. Housing and Accommodations
   • Institutions should ensure the students who are self-isolating in accommodations are separate from those not subject to a 14-day quarantine.
   • If new international students are housed for self-isolation in the same accommodations as other students who are self-isolating, and cannot be separately isolated from the other students, then the clock resets to the day of the most recent arrival. This is to account for the potential exposure from the new student from outside of the province to those already here.
   • Owners of facilities such as hotels and motels that house international students are to be notified that students are under a 14-day self-isolation. The owner is responsible to have security do regular walk throughs to ensure that guests are maintaining social distancing and not gathering in any common areas or rooms.
   • Institutions are responsible to have security do regular walk throughs of on-campus facilities to ensure students are maintaining social distancing and not gathering in any common areas or rooms.
   • Shared sleeping facilities are permitted assuming that social distancing requirements are followed. Beds must be a minimum two metres apart.
   • Shared facilities (e.g. bathroom, kitchen, living space) are allowed, provided there is sufficient space for students to respect the self-isolation requirements.

2. Food and Supplies
   • Institutions are to ensure there are groceries in the accommodations upon students arriving.
   • Institutions and business owners (e.g. motels/hotels) must put into place or have systems to ensure students are able to access food and personal supplies without leaving the accommodations (e.g. access to wifi, telephones, etc.).
   • Institutions are responsible to assist with, but not cover the costs of, any required shopping for students.
   • Students may prepare their own meals if infrastructure is in place and social distancing requirements can be maintained. If this is the case, mealtimes may need to be staggered.
   • Students have the option to order food online and have it delivered for their own individual use. The food should be paid for in advance. Each student is responsible for arranging receipt of their own individual order. Students are to advise the company delivering the food of the drop-off location (the delivery person is not to have contact). They are to retrieve their food once the delivery person has left the drop-off location.
   • Do not allow shared food containers, such as shared pitchers of water, salt and pepper shakers, etc. in dining areas.
   • For accommodations with kitchens, unless the institution has a staff member managing the kitchen, students will be responsible for washing their dishes. It is recommended that each student have their own designated dishes and utensils.
   • For accommodations without kitchens, students will leave their dirty dishes outside their room for pick up by the designated worker.
   • Ensure that staff handling food practice good hand hygiene and do not work in food handling areas if they are ill.

Note: It is recommended that designated or disposable dishes and utensils be used by ill students. If designated, dirty dishes and utensils are to be left outside the room for pick-up. Disposable gloves can be used by the staff who are picking up and handling these items.
3. Cleaning and Disinfection

- Institutions are responsible to ensure the self-isolation accommodations have cleaning materials (e.g. paper towels, household cleaning and disinfection products, dish soap, laundry soap, etc.).
- Regular household cleaners, disinfectant wipes or diluted bleach solution can be used according to the label directions. Information on cleaning and disinfection can be found on the Government of New Brunswick website.
- The institution is to ensure that all of its common areas are cleaned and disinfected twice daily, or more often if required. Items such as countertops, kitchen tables and chairs, furniture, light switches and doorknobs, may need to be disinfected more frequently.
- A log should be maintained. Workers can do this. The institution can also use the services of a professional cleaner, if desired.
- Unless the services of a professional cleaner are used, students will be responsible for garbage collection and removal. For students staying in hotel/motel like settings garbage will be picked up outside the room.
- Use disposable gloves and protective clothing when cleaning surfaces or items that have been soiled with bodily fluids.

4. Shared Laundry Facilities

If laundry facilities are not provided, linen changes will be arranged through a drop off at the door with towels and sheets once per week or more often if requested.

If laundry facilities are provided, the following is required:

- Keep a two-metre distance from others. Consider scheduling laundry time.
- Wash hands before and after doing the laundry.
- Wipe down controls and handles before and after use.
- Do not leave soiled clothing or baskets on top of machines or tables.
- Do not shake dirty laundry before putting it in the machine.
- Wash with soap and the warmest water possible. Do not overload the machine.
- Do not leave dryer door open when not in use.
- Dry items at highest temperature possible and dry them completely.
- Disinfect your hamper before filling with clothes.

5. Personal Hygiene

- Avoid touching the face, eyes, nose or mouth with unwashed hands.
- Cover the mouth and nose with a disposable tissue or the crease of the elbow when coughing or sneezing. Dispose of used tissues immediately.
- Hand washing must be encouraged:
  - before and after eating food;
  - before and after preparing food;
  - after sneezing, coughing or blowing your nose;
  - after touching dirty surfaces such as taps, doorknobs, phones, remotes, and
  - after using the bathroom.
- Signage on personal hygiene etiquette is to be posted throughout the institution’s facilities. This would include common areas, kitchen preparation areas, washrooms and laundry rooms. Information can be found on the Government of New Brunswick Coronavirus website (Click “Awareness Resources” and then “More Resources”).
Requirements for Monitoring

Institutions must perform daily check-ins to monitor the health of international students, and to ensure that the student does not leave the self-isolation site at any time. If monitoring in person, social distancing of two metres must be maintained, and the use of a community mask and safety glasses is recommended.

A daily check-in MUST be done with each student, either in person or verbally, AND MUST include the completion of a daily log. The log is to include the date and time, the name of the student, responses to answers, measured temperature and any actions that resulted. There needs to be clear accountability for who is responsible for that task.

International students who develop symptoms must stay in their housing unit, isolate from others as quickly as possible, contact their institution, and call TELECARE-811.

For information on self-monitoring and self-isolation, refer to the “Awareness Resources” section on the Government of New Brunswick Coronavirus website.

Once the institution becomes aware that a student has become ill, the institution must isolate the student, as indicated on the webpage above. The student must contact TELECARE-811 and, if a test is required, the institution and student must coordinate next steps such as arranging transportation for testing, calling ahead before seeking in person medical assistance, and wearing appropriate personal protective equipment.

The student must remain in isolation until the student is informed that the test results are negative. If the Regional Medical Officer of Health contacts the student to inform of a positive test result, the student must remain in isolation and immediately inform the institution and follow the local public health authority advice. The institution must contact the local public health authority for advice and recommendations, including their Illness Response Plan to determine where the student is to be housed if quarantined. Quarantine means avoiding contact with others, which could result in removing the student from the current accommodation to another location as outlined in the institutions Illness Response Plan.

Local public health authorities may be reached at the following telephone numbers:

- Normal business hours, Monday to Friday, 08:30 to 16:30
- Health regions 1 and 7, (506) 869-6287
- Health region 2, (506) 658-3025
- Health region 3, (506) 444-3201
- Health regions 4, 5 and 6, (506) 547-2137
- All health regions, Monday to Friday after hours, Saturday and Sunday 24 hours: (506) 658-3103

Testing for COVID-19

- The institution must inform students that, on day 10 of the 14-day quarantine, (day 11 or 12 if day 10 falls on a weekend) the student will be tested for COVID-19. Testing is mandatory.
- Institutions can contact PETL for questions on the testing process. PETL can then, if needed, refer the institution to the appropriate Department of Health representative.
- Public Safety – Inspection and Enforcement will notify the Department of Health (NB Health Emergency Operations Centre) of students entering NB.
- Department of Health will notify Extra Mural/Ambulance NB.
- Extra Mural/Ambulance New Brunswick will advise the institution of the swabbing location/date/start time.
- Extra Mural/Ambulance New Brunswick will go to the self-isolation site to swab the student.
- If the Extra Mural/Ambulance New Brunswick staff notice that a student is symptomatic, the Extra Mural/Ambulance New Brunswick staff will proceed with swabbing and then immediately call the Regional Medical Officer of Health regional office. Extra Mural/Ambulance New Brunswick will provide the regional office with the following information: name of student, name of institution, and the location of the student, including the room number if applicable.
Negative Result for a Student

- If the result of the test is negative, a confidential note to that effect will be delivered to the student in a sealed envelope. The student must still complete the 14-day quarantine.
- Department of Health will make all efforts to expedite getting the written results to the student as soon as possible. In some circumstances, (e.g. swabbing on day 12), written negative test results may be delivered to the student after day 14 has expired.
- The student must remain at the quarantine site until they have received the written copy of the negative test result, unless otherwise directed by the Regional Medical Officer of Health (RMOH).

Positive Result for a Student

- If the result of the test is positive, Public Health staff will communicate the result to the student, by phone (with translation if required). In that case, both the student and the institution are to follow the procedures outlined under “Requirements for monitoring” as described above.
- In such a scenario, the Regional Medical Officer of Health will determine who will be retested on Day-14 of the isolation and who may be released from isolation three days later, providing all the test results are negative.
  - Regional Medical Officer of Health will contact Extra Mural/Ambulance New Brunswick and make arrangements for testing. Extra Mural/Ambulance New Brunswick can be reached through the Medical Communications Management Centre (MCMC) Operations Manager at (506) 862-7800.

At all times, measures to protect the international students’ privacy rights must be implemented and respected.
Chapter Four
Vulnerable Populations
Introduction

The Government of New Brunswick, through the Department of Social Development and its service providers, offers a wide variety of services to some of New Brunswick’s most vulnerable population including children, adults, individuals with disabilities and seniors. Social Development’s clientele face greater challenges to recovery should they contract the virus. During wave one of the pandemic, the department was required to balance continued service delivery to ensure the safety and security of clients while promoting client, community and staff safety.

At the same time, a number of issues have come to light with the onset of the COVID-19 pandemic as it relates to women’s participation in the labour force, the fact that the caregiving role was dominated by women, and that COVID-19 has the potential to amplify gender inequalities in New Brunswick if not addressed in a timely manner.

The first part of Chapter Four is intended to outline Social Development’s plan for the next wave of COVID-19 and describes its approach in dealing with vulnerable populations. The second part is intended to provide an overview of the impact on women in the labour force during the first wave of the COVID-19 pandemic.

Part One

Social Development – COVID-19 Wave Preparation

Collaboration with other government departments is critical to safely provide services to clients. While partnerships with several departments is important, a critical success factor is effectively working with our partners in the Department of Health, the Regional Health Authorities and Medavie for community and Extra Mural services for in-home.

Social Development Zones:

- Northern Zone (pink)
- Central Zone (yellow)
- South East Zone (blue)
- South West Zone (green)

Corresponding Health Zones:

- Northern Zone = 4, 5, 6
- Central Zone = 3, 7
- Southwest Zone = 2
- Southeast Zone = 1

*4 Extra Mural Zones are the same as SD zones, except Miramichi is with the Southeast Zone

The department established a recovery and second wave planning team in early April. The mandate of the team was to ensure all lessons learned from the first wave were captured and the department was continuously learning and adapting as we moved through the first wave of COVID-19. The work of the department is heavily dependent on a multitude of partner agencies of various sizes and capacity. The continued successful delivery of social services in New Brunswick is reliant on the department’s ability to support and collaborate with partner agencies and other departments. The plan developed for future waves places heavy priority on the supports and collaboration needed to successfully meet the safety, security and wellbeing needs of the target population served by Social Development.
In subsequent waves of COVID-19, all departmental programs and services are to continue delivery with the directives, advice, and supporting guidelines outlined and referenced in the department’s pandemic plan.

The purpose of the planning is to ensure that during COVID-19, through all phases, the social services system continues to provide essential services. Tools and guidelines have been developed to ensure system response and continuous communication across the system occurs. With these key actions, the department will ensure:

1. Coordination of communications when trigger activated (change in phase) including drafting of memos for:
   - Staff
   - Public
   - Clients
   - Suppliers
   - Community partners/service providers/agencies
   - Central office and other departments
   - Reactivation of Social Development Emergency Operations Centre with links to the four zones around the province.

2. Continuous General Communication through:
   - Daily information sharing and check-in with departmental leadership team;
   - Daily check-in with minister and staff;
   - Social Development Recovery Team fielding concerns and questions of departmental operations;
   - Regular messages to all departmental staff;
   - Preparation and distribution of Quick Reference Guide to staff and partner agencies;
   - Daily communication with agency partners providing essential services, issues tracked through weekly communication update;
   - Launch of SocialServicesNB.ca website that provides information on available services to seniors in easy-to-understand language; and
   - Development of a social media plan that will better communicate information to the public to ensure more timely information for clients, their family members and partner agencies (Facebook, Twitter, Instagram, etc.).

3. Interdepartmental Collaboration and Communication by having:
   - Social Development assistant deputy minister on Health Leadership Committee
   - Social Development assistant deputy minister on Emergency Measures Office Executive Committee
   - Social Development manager at Emergency Measures Office’s Emergency Operations Centre
   - Three Social Development staff at Health Emergency Operations Centre
   - Assistant deputy minister participating in twice daily briefing of Health Emergency Operations Centre
   - Active participation in Emergency Measures Office assistant deputy minister call
   - Active participation at Emergency Measures Office’s Emergency Operations Centre
   - Deputy minister participation in Pandemic Taskforce
   - Minister part of Cabinet COVID-19 Committee (deputy minister official at committee)
   - Social Development recovery lead working with the Executive Council Office Recovery Team (Recovery Pillars)

**Human Resources**

The department has taken steps to ensure appropriate staffing levels for all essential services as future waves impact attendance at work. Plans are in place for staff reassignments based on priority essential services.

In addition to departmental services, the department is currently working with partners to implement a personal support worker recruitment and training program to help support partner agencies with staff absenteeism. These agencies include: nursing homes, adult residential facilities, home support agencies, group homes, transition houses, homeless shelters and daycares.
The Personal Support Worker Plan includes an approach for recruitment of volunteer civil servants that are in non-essential positions to receive condensed two-week training focused on infection control and be available to provide support across the province. The approach is being implemented through collaboration among Social Development, Post-Secondary Education Training and Labour, the New Brunswick Community College, the Collège Communautaire du Nouveau-Brunswick and the Department of Health.

Working with Partners in Long-Term Care

Nursing Homes

Nursing home readiness for a pandemic was assessed in April at 90 per cent. Pandemic plans for each of the 68 nursing homes in the province have been submitted to the department and assessed. Plans that required additional work have been focused to ensure 100 per cent readiness by September. They are intended to provide clear direction for dealing with outbreaks and staffing pressures during the pandemic.

The pandemic plans also provide isolation guidelines and procedures with several homes completing minor renovation work to enhance the ability to isolate COVID-19 affected residents in isolation rooms and units. Homes adhere to infection control protocols as outlined by the Pandemic Taskforce. Current supply and supply chain have been established through the department for personal protective equipment.

The department is also currently working with the Department of Health and the New Brunswick Nursing Home Association to provide training to volunteers on infection control procedures and precautions. This training is expected to be made available in the community during an evening session and would provide both background information on the importance of proper use of personal protective equipment as well as processes for using them safely. The safe re-introduction of volunteers in facilities will benefit staff, residents, families and communities.

Finally, the successful conclusion of negotiations with CUPE have allowed for security in staffing levels. The department is working closely with the New Brunswick Nursing Home Association and the individual home administrators to implement the wage increases and retroactive pay by the end of August to recognize the efforts of staff during the first wave of COVID-19. A dashboard will be updated daily to monitor progress.

Adult Residential Facilities

Adult residential facilities readiness for a pandemic was assessed in June at 81.9 per cent. Work is currently focused on ensuring 100 per cent readiness by September for all adult residential facilities. The department has received and assessed emergency response plans, audits are being conducted in partnership with the Extra-Mural Program and Regional Health Authorities to assess the readiness and work on weaknesses in both staff preparation, completeness of plans and infectious control measures. Current supply and supply chain have been established through the department for personal protective equipment.

It is critical that employees in this sector providing essential services be available during future waves of COVID-19. Government recognized the essential nature of this work by approving an essential worker wage top-up in spring 2020. The department is currently working with partner agencies to distribute the wage top-up for direct care essential workers paid under $18 per hour. A daily dashboard is in place to monitor funding applied for and distributed. Phase II of the top-up funding for private home care support is being launched in early August.

Home Support

The Department of Social Development follows directives from the Office of the Chief Medical Officer of Health (Public Health) and WorkSafe NB to inform how services can be provided during the COVID-19 pandemic. A guidance for family support workers provides an overview of the minimum required Public Health measures that must be implemented by family support agencies to operate. It includes links to the most current information resources and highlights areas for consideration relevant to the services provided by family support agencies. These guidelines have been developed based on information provided by New Brunswick’s Chief Medical Officer of Health.
Current supply and supply chain have been established through the department for personal protective equipment. A dashboard and weekly monitoring are in place to ensure distribution needs are being met.

**Temporary Shelters**

**Homeless Shelters**

Homeless shelters’ readiness for a pandemic was assessed at 85 per cent. Work is ongoing in ensuring that full pandemic plans are complete and in place for all shelters in the province including isolation plans for symptomatic clients or confirmed cases of COVID-19. Plans also include operational guidelines based on reduced staffing levels.

Provincial standardized operating plan incorporating regionally developed plans for outbreak management within emergency shelters is currently under development (involves Social Development, Health and Public Safety (Emergency Measures Office)).

Current supply and supply chain have been established through the department for personal protective equipment.

**Transition Houses**

Transition Houses readiness for a pandemic was assessed at 90 per cent. Work is ongoing in ensuring that full pandemic plans are complete and in place, including isolation plans for symptomatic clients or confirmed cases of COVID-19. Plans also include operational guidelines based on reduced staffing levels.

Floor plans have been redesigned and implemented in accordance with Public Health guidelines (i.e. social distancing) and housing capacity determined to match distancing / isolation guidelines. Where required renovations to houses have been completed to better accommodate residents in the event of future waves.

Current supply and supply chain have been established through the department for personal protective equipment.

**Child Welfare**

**Child Protection Services**

During the COVID-19 pandemic recovery, child welfare programs deemed essential are consistently provided across the province while other service delivery may be dependent on the phase of recovery.

This is an increasingly stressful time for vulnerable children and families as they deal with issues that brought them to the attention of the child welfare system. Those issues may be impacted by social isolation, financial stresses, and reduced community/school involvement. When direct, face-to-face contact with Social Development staff is required, families will need reassurance that social workers responding are in good health and don’t pose a health risk to them.

A complete Child Welfare and Youth Services Practice Guidance document has been prepared and disseminated to staff to be used during the pandemic. When applying these practice directives, the child’s best interest and clinical judgement must be paramount.

Directives based on Public Health guidelines have been provided to staff on appropriate use of personal protective equipment when interacting with clients and families.

**Group Homes**

COVID-19 operational plans have been developed and assessed for all homes, plans include directives on admissions, alternate placements isolation requirements and staffing capacity and directives.
Current supply and supply chain have been established through the department for personal protective equipment.

**Prevention Measures in Vulnerable Populations**

Ensuring prevention elements are widely known and applied in settings with vulnerable sectors is a critical step. Ongoing reminders, monitoring and support is essential in maintaining a level of vigilance and preparedness. When there are cases, ensuring quick isolation and containment steps are followed will help prevent spread. Vulnerable sectors also include our First Nation Communities, individuals with disabilities, correctional facilities and key areas for preparedness are outlined below:

- Appropriate access and use of personal protective equipment (PPE) as per Infection Prevention and Control guidelines
- Access to COVID testing and facilitation of on-site testing as required.
- Ability to self-isolate given the vulnerability factors of overcrowding and chronic health conditions of certain populations.
- Continued access to essential services to ensure care continuum within provincial system. with focus on primary health care, mental health and addictions services, housing and social services.
- Effectively communicate key messaging to vulnerable populations and the people and agencies who service them.

**Part Two**

**Overview of the COVID-19 Impact on Vulnerable Groups in New Brunswick**

With the onset of wave one of the COVID-19 pandemic, a number of issues came to light with respect to gender inequalities in the labour force in New Brunswick. More specifically, there were three issues that warranted further research to gain a better understanding of how response and recovery efforts could be adjusted. The goal is to help mitigate the potential impacts on the vulnerable groups as we prepare for the second wave of the COVID-19 pandemic. The three issues were as follows:

**Women’s economic participation has been disproportionately affected**

Female participation rates lag behind their male counterparts in New Brunswick, representing a significant loss to GDP. A significant number of women are exiting the labour force. Of those who remain, many work fewer hours than they were before the pandemic. Women are overrepresented in lower paid occupations – many of which have seen slower recovery rates. Women age 55+ are returning to work far less often than their male counterparts. Youth, aged 15 to 24, experience job losses at twice the rate of those aged 25+. Female post-secondary graduates are less likely to return to work than their male counterparts. Over half of the job losses through April in New Brunswick were in industries with below-average wages. Lone-parent families (predominantly led by women) and seniors are likely to be in vulnerable positions.

**Caregiving roles dominated by women**

Women are overrepresented in the health and social sectors and are on the frontlines in the fight against COVID-19. Some of these positions offer relatively low wages, which adds recruitment and retention challenges in these sectors. End of wage top-up programs could be an issue. Women are more likely to be taking on caregiver roles during COVID-19. More women perform unpaid caregiving duties (childcare, household responsibilities,
home schooling, care for vulnerable family members outside the home). Subsequently, women as both formal and informal caregivers are more likely to be exposed to COVID-19.

**COVID-19 amplifying gender inequalities in New Brunswick**

Gender inequalities and other intersecting factors (disability, income, Indigeneity, immigrant status, family type, sexual orientation, and age), if unaddressed in recovery efforts, can lead to furthering inequalities and losses in economic potential for the province. Qualitative and available quantitative data has been reviewed, some data are not available disaggregated by sex and gender. The New Brunswick-Institute for Research, Data and Training at the University of New Brunswick is launching a project aimed at identifying groups who are likely at risk from COVID-19, either directly (infection) or indirectly because of disruptions to income, school, employment, health service access, family composition, etc. The results will be available in late October. The Women’s Equality Branch will launch a gender equality data portal on GNB’s Open Data platform in September.

**Next steps**

The COVID-19 pandemic has highlighted and exacerbated the situation for vulnerable groups across New Brunswick. Response and recovery efforts that take into account the vulnerable groups will help prevent further economic and social inequalities and create more responsive, vibrant and sustainable communities. The Government of New Brunswick has recognized this, is currently exploring options and is committed to ensuring accessible leave policies, promotion of flexible work policies, accessible childcare options, as well as mental health supports. New Brunswick will continue to ensure there are no job losses for COVID-19-related caregiving and continuation of the essential workers childcare program. In addition, the Province is committed to ensure gender-based analysis is applied in all COVID-19 response and recovery efforts.
Chapter Five
Community Capacity and Resiliency
Introduction
Success of the GNB overall response and preparedness plan for the second wave hinges on a whole-of-government and whole-of-society approach to ensuring economic, social, governmental and human capacity and resiliency are protected, maintained and enhanced. Where opportunities present, it is important also to work with local governments and communities to leverage provincial and local capacity so that the recovery is faster, more effective, more thorough and more enduring.

Regional Resiliency
To that end, 12 regional resiliency plans are being built, one for each region of New Brunswick (mapped to regional service commission boundaries). In each region, a coordinator is building and orienting multi-sector teams that will collaborate on a regional plan designed to ensure “new normals” do not simply emerge in communities but are instead constructed consciously. The teams aspire to engage local governments, Indigenous community leadership, business and non-government actors in an analysis of the strengths, weaknesses, opportunities and threats that should factor into a resiliency plan for their respective regions, to ensure those plans are realistic, actionable and achievable.

The plans are intended to align with this provincial plan and position each region to maximize the speed and depth of its recovery from the effects of the COVID-19 pandemic and to maximize its region's preparedness for second and subsequent waves of COVID-19 infection.

The core COVID-19 team attached to the Executive Council Office is tasked with ensuring adequate support to the regional teams and with tracking and supporting plan development and execution.

Justice System Resiliency and Modernization
The Government of New Brunswick is taking a strategic approach to supporting New Brunswick's justice system, not only in ensuring critical functions of the system are resilient during the pandemic (with modifications as necessary to reduce risk of COVID-19 infection among the judiciary, court personnel, lawyers, persons in custody, and other justice system participants), but also in identifying and executing on opportunities to modernize the system to make it more resilient while maximizing efficiency and effectiveness.

Specific projects are targeting:
• Enduring expanded use of technology to reduce the number of in-person appearances at court by lawyers, accused persons and other participants;
• Adapting court facilities and processes as needed to ensure COVID-19-risk-managed jury selections and trials;
• Recognizing that institutional populations are especially vulnerable during a pandemic, identifying and pursuing all available means of minimizing the risk of COVID-19 transmission in provincial correctional institutions; and
• Recognizing that law enforcement officers are finite resources, optimizing law enforcement organization and coordination to maximize the continuity and resiliency of law enforcement organizations during the pandemic.

Border Control
In normal circumstances, New Brunswick has physical boundaries but no borders and no controls on entry into the province. However, given the clear evidence in March of the COVID-19 transmission risks to the New Brunswick population of travel, since March 25, 2020, each renewal of the emergency orders made by the Minister of Public Safety under the state of emergency declared under the Emergency Measures Act has included border controls and restrictions.

As of this writing, border control officers are staffing on a 24-hour-basis / seven days per week four land points of entry from Québec, two from Nova Scotia and one from Prince Edward Island, plus the Nova Scotia-New Brunswick ferry at Saint John and the airports at Saint John, Moncton and Fredericton. These officers have been
reassigned since March from GNB’s correctional services, sheriff services and provincial enforcement programs (especially conservation, highway safety, and off-road safety enforcement programs).

This plan assumes that some form of border controls will be required until New Brunswick is “back to green,” its population and health-care system no longer under significant threat from COVID-19.

With stressors becoming evident in the “feeder programs” to border control, and with the need to continue border control activities, GNB is actively recruiting officers. The objective is to enable resilient border controls well into 2021 while returning the Department of Public Safety (DPS) to 50 per cent of its traditional capacity for enforcement of provincial legislation. Hiring and training will be complete by September.

The plan assumes border controls of similar magnitude to what is being experienced in summer 2020. If interprovincial highway traffic increases dramatically in fall 2020, and/or daily air arrivals into New Brunswick do so, this will trigger a need for additional personnel. If the Government of Canada decides to relax restrictions on travel into Canada from the United States, and New Brunswick Public Health advises GNB that public health requires some provincial screening of entrants from the United States of America (U.S.), that will be a massive undertaking. (While provincial officers have literally turned away unauthorized travelers into New Brunswick from within Canada, any effort to defend New Brunswick public health against persons arriving from the U.S. would have to focus instead on self-isolation orders and monitoring). Conversely, when Public Health advises there is no longer a need to staff interprovincial borders, and GNB follows that advice, that will free up resources for new burdens and/or to return to original DPS enforcement mandates.
Conclusion

The Government of New Brunswick has recognized the impacts on all New Brunswickers in its management of the COVID-19 pandemic during the first wave. New Brunswickers have put their best foot forward and, to this point, their collective efforts, dedication and resiliency have played an important role in minimizing this impact we have experienced. As we navigate our “new” normal, other factors have been taken into consideration, such as the current state of COVID-19 in Canada and in New Brunswick, and the ability of the private sector to manage the risks associated with COVID-19.

While public concern remains high, relative risk levels for the disease are low at present. New Brunswick’s success at avoiding a significant outbreak during the first wave now also represents its most significant vulnerability. However, New Brunswick is uniquely positioned to proactively plan for the second wave of COVID-19 and this plan balances health risks and impacts, the economy, and societal well-being.

While we may not know what the second wave will bring until we experience it, we are confident that we now have the tools, lessons learned from the first wave, as well as evidence-based research to help make informed decisions in the interest of protecting the health and safety of all New Brunswickers.