

RETURN TO SCHOOL: Covid-19 Response

Evergreen School Division

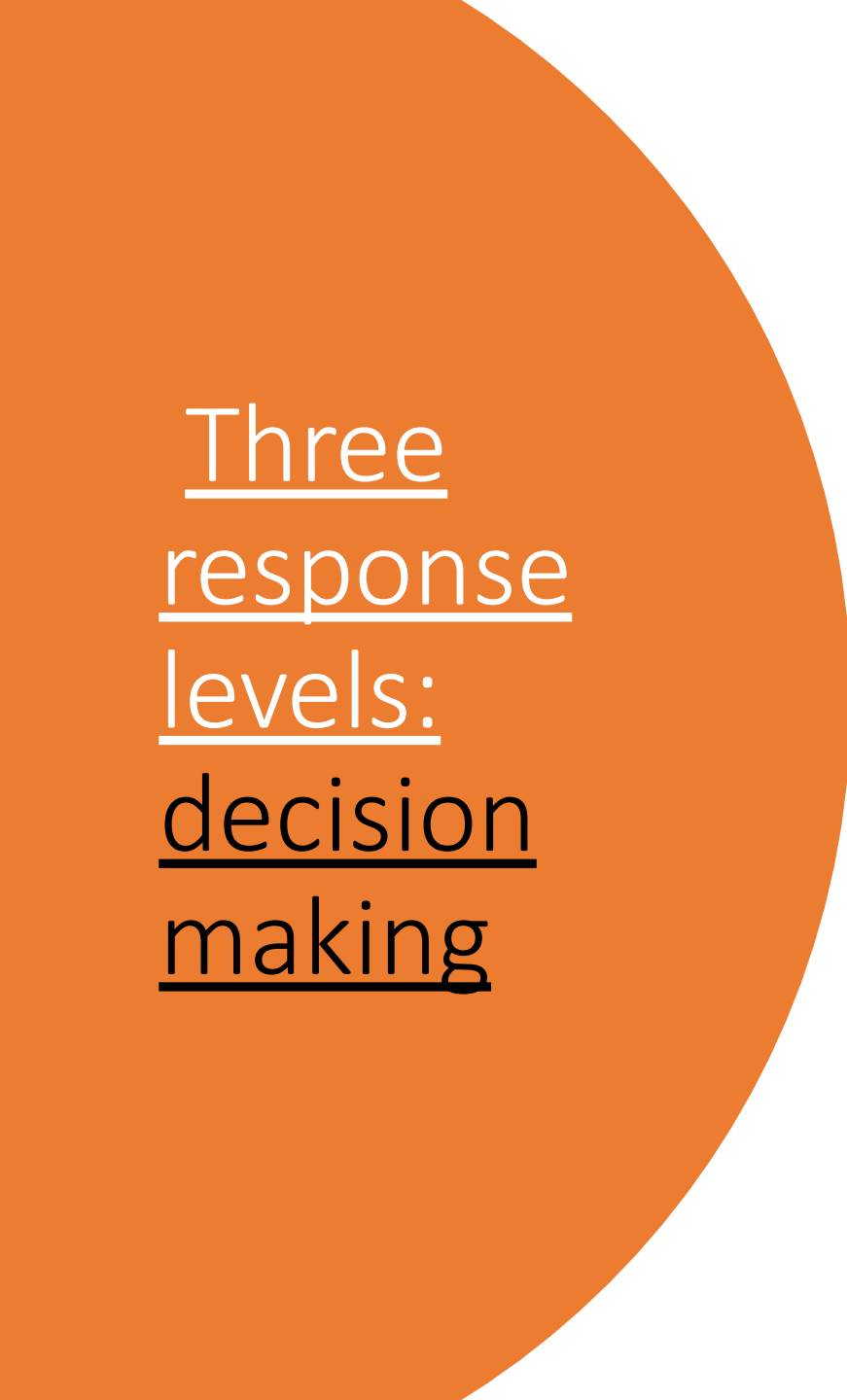


Three response levels: learning/space expectations


- Manitoba Education has determined three response levels for schools
 - Level 1 (September 2020)
 - Students return to in class learning: 5 days/week k-8; minimum 2 days/week grades 9-12
 - Two metres of physical distancing to the greatest extent possible; when this is not possible, students will be arranged in cohorts, with separation not less than 1 metre
 - Level 2
 - Blend of in class and remote learning: K-8 students and students with special needs prioritized for in class learning; grades 9-12 remote learning with limited use of school facilities
 - Two metres required, to the greatest extent possible. This may require small class groupings.
 - Level 3
 - Remote learning; Schools closed to the public with the exception of K to Grade 6 students of critical care workers

Three response levels: classification

- Which response level (1, 2 or 3) applies to schools is decided by Public Health based on evidence
- Divisions and schools cannot decide to change levels or close schools to promote / increase safety
- By health region, pandemic response levels are classified as yellow, orange and red. These correspond roughly to school levels 1, 2 and 3. However, Public Health may set one level for the community and another for schools.

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Three response levels: decision making

- Public health officials will make the decision about whether a school, or area of a school needs to close for a period of time and will determine who is required to undertake self-isolation (quarantine).
 - Public health officials will contact schools if there is a confirmed case of COVID-19 linked to the school if the person in question was present in the school during their infectious period.
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SAFETY PROTOCOLS



The practices we will be emphasizing are:

- stay home if you are sick
- frequent hand – hygiene (sanitizing and handwashing)
- cough and sneeze etiquette
- physical distancing
- maintaining “cohorts” through the school day
- increased cleaning and disinfecting
- non - medical mask use by all staff and all students in Grades 4 to 8 and voluntary mask use by students in Grades K to 3

Students will need to be oriented to these practices, regardless of grade/age. They need to be taught, revisited and reinforced regularly.

These practices are described in more detail on the slides that follow.

STAY HOME IF YOU ARE SICK:

Daily screening is essential

- all parents/guardians are expected to **screen their children at home**, at the start of **each** day;
- staff also need to self – screen daily

Those with signs of illness need to stay home and seek medical advice and get tested for COVID-19 (if advised to do so).

STAY HOME IF YOU ARE SICK: positive case(s) / managing an outbreak

- If there is an outbreak, Public Health will lead the response and ensure appropriate supports are in place to coordinate the response
- contact tracing involves identifying the contacts of a positive case and contacting those individuals who may have been exposed
- Public Health may:
 - request records that identify cohorts/groups of staff, students, volunteers and visitors in the school for a specified time frame
 - contact students, staff and families if they have been in close contact with a confirmed or probable case, and confirm whether they need to self-isolate or self-monitor, and when they can return to school
 - recommend testing following established guidelines to staff, students, volunteers and visitors who may have been exposed to a positive case
 - assess the need for the school to be closed for a period of time



STAY HOME IF YOU ARE SICK: positive case(s) / managing an outbreak

- schools will clean and disinfect areas where exposures took place
- these areas will not be used until they are determined to be safe
- according to Public Health, School closure will be a last resort and only upon evidence of transmission among multiple cohorts
- if there is an outbreak at a school, this will be announced through Manitoba media bulletins and Public Health will provide instructions to those who have been in close contact
- schools are to work closely with their local public health team, and they will reach out if a situation arises where they require clarification or information.



COUGH AND SNEEZE ETIQUETTE

- respiratory etiquette should be modelled, taught and reinforced regularly
- this includes
 - coughing and sneezing into a tissue or sleeve
 - properly and promptly disposing of any used tissues
 - exercising proper hand hygiene
- personal items (e.g., hats, hair accessories, lip balm, combs, brushes, etc.) should not be shared
- avoid touching one's mouth, nose or eyes, and encourage children to do the same



FREQUENT HAND – HYGIENE (SANITIZING AND HANDWASHING)

- additional sinks have been added where possible to limit congestion during hand washing
- handwashing with soap and water for at least 20 seconds is best practice
- hand hygiene should occur at:
 - the start of the day and before going home
 - before and after recess
 - after going to the washroom and helping children with washroom routines
 - after a diaper change (both children and staff)
 - before and after preparing food
 - before eating or drinking
 - after getting hands dirty
 - after wiping nose or handling dirty tissues
 - after coughing, sneezing or blowing nose
 - after soothing a crying child
 - before and after putting on and taking off a mask
 - before and after being on a bus
 - after cleaning tasks (staff)



FREQUENT HAND – HYGIENE (SANITIZING AND HANDWASHING) continued

- school staff will help young children to ensure handwashing is done correctly
- where possible, encourage and supervise hand hygiene
- alcohol-based hand sanitizer is available at all building access points
- young children require supervision when using alcohol-based hand sanitizer



HYGIENE: food and drink

- the best practice is for students to bring their own food and water bottles from home
- there is to be no food sharing or water bottle sharing among students
- hygiene practices (sanitizing and/or hand washing) are to happen prior to food handling
- water fountains will all be closed
- water refill station(s) will be open
- students should not be involved in food preparation; any food preparation must be done by staff
- any food served must be done so in individual wrapped portions
- home ec classes are cancelled till further notice
- students may be asked to help wipe down their own desks or tables used for eating
- use of student shared microwaves is not permitted



HYGIENE: personal belongings / classroom supplies



- the best practice is for students to not bring any personal belongings (beyond clothing needs) to school
- if anything is brought to school, it needs to stay with the student and not be shared with others (a favorite toy, a baseball glove, cell phone, etc.)
- students need to be assigned spaces for coats, etc. and may be asked to bring a bag to store such in
- locker use may be limited, and access times staggered to avoid congestion and close contact
- supplies in the classroom will also be assigned and there will be very limited sharing
- only items that can be cleaned and disinfected regularly are to be shared
- this includes technology devices; schools are encouraged to divide devices into cohorts and / or grade levels to limit the number of people that contact the device in a day
- devices are to be cleaned after each individual's use following the device cleaning protocol.

PHYSICAL DISTANCING: school entry



DO NOT
ENTER

- as part of our plan to maximize physical distancing, we will have all our school doors unlocked from 8:30am till 9:15am; after 9:15 am only the front door will remain open
- students will be assigned an entry door (preferably by cohort) and are to use that door for morning entry and for exit and entry around scheduled breaks
- at designated entry times, staff will monitor doors for single file entry / physical distancing
- once inside, students are to place their belongings in spots designated by their teachers
- all students must use hand sanitizer upon entry into the school / entry into their classroom

PHYSICAL DISTANCING: bus safety



- we are asking parents to transport their own children if at all possible
- Parents need to screen children for symptoms and not permit children with symptoms to board the bus
- all students riding the bus (and the driver) must always wear a non – medical mask
- these should be put on before getting on the bus and taken off after exiting the bus, if removal is appropriate for the setting
- drivers will have disposable masks available should a child forget or misplace their mask
- children will not be allowed to enter the bus if they refuse to wear a mask, unless they have a medical exemption on file with the school

PHYSICAL DISTANCING: bus safety continued



- all drivers will perform hand hygiene before and after being on the bus
- parents have been asked to assist their children in performing hand hygiene before and after being on the bus
- where capacity allows, we have left the seat immediately behind the driver unoccupied
- when possible and as weather permits, we will open windows and/or roof vents to allow for increased ventilation
- students must remain in their assigned seats
- Evergreen Transportation Department will be contacting / have contacted families re: pick up / drop off times, seating plans, etc.
- once in the school's bus loop, a staff member must monitor loading and unloading of buses including single file entry / physical distancing
- once unloaded, students need to proceed to their assigned entry door
- school bus drivers will be following enhanced bus cleaning protocols
- field trips and other non – essential bus trips are all cancelled until further notice

PHYSICAL DISTANCING: movement in the building

- once inside the school, movement of students in the building and their interactions with other large groups will be limited
- directional signage, tape and other visual clues will be used where appropriate to support physical distancing
- when a class needs to move to a new location (gym, music, recess, etc.), their movement will be monitored and staggered from other classes' movement
- whenever possible, the students will remain in one space and teachers will move
- students will have access to bathrooms but will need to follow directions from staff re: bathroom already in use, where to wait, etc.
- washroom capacity will be posted, and students will be expected to wait, while practicing physical distancing from each other, if the washroom capacity is exceeded
- washrooms will be cleaned regularly; signage will be placed about washing hands and physical distancing
- signage will also be posted throughout the school to remind students of physical distancing and hygiene practices



PHYSICAL DISTANCING: during breaks / recess



- each cohort must be able to arrive, depart, and participate in school activities without comingling with members from other cohorts as much as possible
- whenever possible, children and staff will be kept together with the same cohort throughout the day, including lunch breaks and recesses
- recess times at EY/MY will be staggered, and equipment will be assigned to a specific class
- equipment needs to be cleaned after each break
- at EYMY schools, specific playground areas may be assigned to specific groups on a rotating basis
- MASK USE at recess: as physical distancing is more possible when outdoors, students may remove their masks for recess play
- Public Health advises that playgrounds and play structures are low risk for transmission; there are no specific requirements for cleaning play structures

PHYSICAL DISTANCING: parent and visitor access



- parents/caregivers and other non – staff adults are asked to not enter the school; communication by phone or email is preferred
- all parents/caregivers and other non – staff adults that enter the school must adhere to self – screening, physical distancing and hygiene practices that are in place, and report directly to the school office
- parents / guardians must remain off school grounds or within their vehicle when dropping off/ picking up their children
- parents/caregivers of young children may wait for their child outside of their child's designated school entry door, maintaining physical distance from other parents
- parents / guardians must not enter the school unless pre-arranged and approved by the principal
- students physically distance while waiting for parents in a supervised, established area; this area may need to be adjusted based on weather

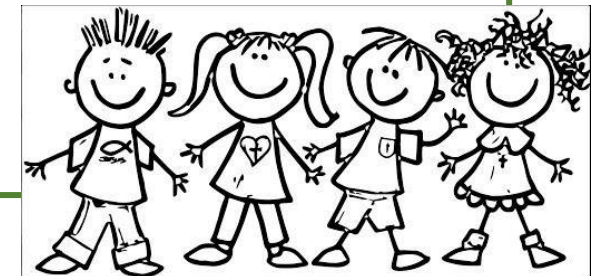
PHYSICAL DISTANCING: classroom set up



- physical distancing of two metres or six feet should occur whenever reasonably possible in a school setting
- when seated at desks or tables, there should be a minimum of one-metre separation between students in that cohort
- students should be arranged so they are not facing each other
- where possible, spaces will be arranged to encourage the recommended separation; this means assigned seating
- young children will need easy-to understand visual prompts; (ex.) tape on the floor, hoops, mats, or other items that can mark off personal space
- play activities for EY students may be organized with a visual cue about how many children should be in that area (e.g., two chairs next to an activity with markers or numbers taped to the floor)
- alternate spaces such as unused classrooms, libraries and multipurpose rooms may be assigned to small groups / cohorts

MAINTAINING “COHORTS” THROUGH THE SCHOOL DAY

- when physical distancing is not possible, cohorts will be used to limit exposure and facilitate contact tracing if a case is identified
- students will likely be part of multiple cohorts from within and outside of the school setting
- physical distancing within the cohort is required to the greatest extent possible, including a minimum of one-metre separation between students in the cohort when seated at desks or tables
- the recommended maximum cohort size is no more than 75 students
- each cohort must be able to arrive, depart, and participate in school activities without co-mingling with members from other cohorts as much as possible
- whenever possible, children and staff will be kept together with the same cohort throughout the day, including lunch breaks and recesses
- locations of classrooms, use of additional space, and timetabling by cohorts have all been considered to reduce mixing



INCREASED CLEANING AND DISINFECTING

- Additional custodial time is provided for enhanced cleaning
- a three times per day sanitation schedule has been implemented for all high touch surfaces (e.g. doorknobs, light switches, electronic devices, chairs, desks, art supplies, toys, games, gym equipment, tools and equipment)
- this will occur after the students have entered, once in the middle of the day, and at the end of the day after students have exited the building
- washroom cleaning protocols are in place in all schools
- classrooms, desktops, and countertops need to remain uncluttered of all nonessential items to allow for custodial cleaning
- soft furnishings that cannot be easily cleaned have been removed
- each classroom has cleaning supplies provided and accessible to all staff members so that they may perform additional cleaning in their spaces as desired
- each teacher has been issued hand sanitizer for their classroom so that student hands can be sanitized upon entry to class



NON - MEDICAL MASK USE



- Non-medical masks can play a role in reducing the transmission of COVID
- Mask are mandated for school staff, visitors and students in grades 4-12
- Masks can help prevent the infectious respiratory droplets of an unknowingly infected person (the wearer) from coming into contact with other people
- Although required for school staff, visitors and students in grades 4-12 when two metres of physical distancing cannot be maintained (including hallways, buses, and in many classroom settings), wearing a mask is not a substitution for physical distancing and handwashing
- Families are encouraged to provide their own masks, but masks will also be available at the school
- Masks should not be worn by anyone unable to remove the mask without assistance or has breathing difficulties.
- If a child cannot wear a mask for a medical reason, parents are asked to discuss this with the school prior to school start –up
- Staff members who cannot wear a mask for medical reason are asked to discuss this with the Principal.
- **Mask use ‘breaks’** will be teacher directed (not applied to classrooms)

NON - MEDICAL MASK USE



HOW TO's about mask use

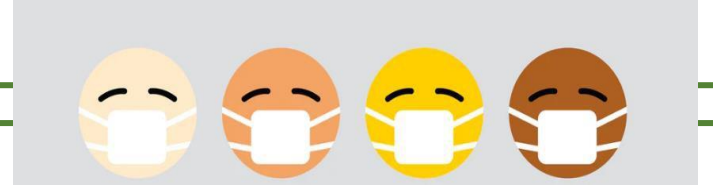
- before and after putting on a mask, perform hand hygiene by handwashing with soap and water, or use an alcohol-based hand sanitizer
- place the mask on your face carefully so it covers your mouth and nose, handling it with the strings or elastic ear loops as much as possible, and mould the nose bridge to ensure it does not move while it is on
- avoid touching the mask once you have put it on
- if the mask needs to be adjusted, hands should be cleaned before and after adjusting the mask
- never pull the mask down below the nose, mouth, or chin
- never dangle the mask from one ear or both ears
- to remove the mask safely, remove it from behind using the strings or elastic ear loops
- do not touch the front of the mask
- removed masks should be placed in a container or bag for appropriate cleaning and disinfection at a later time
- schools will need to work with families re: number of masks needed per day and need for Ziploc bags for storage
- non-medical masks should be laundered daily
- consult gov.mb covid 19 and shared health websites for more info



OTHER: mental health / well - being

- students and staff will all have different responses to this pandemic and will need varying levels of support
- there are school counsellors in each building that teachers can refer students to, or that students may self – refer to
- resources will be made available to classroom teachers that focus on increasing resilience and managing stress
- parent resources will be listed on our school website/ the Division's website

OTHER:



- Use of outdoor spaces is strongly encouraged as weather permits; keep classroom doors open for air circulation; open windows as much as possible
- Field trips and travel for sports / games is not permitted.
- Student sharing of items is to be avoided
- Instrument playing in schools is still being reviewed; more to follow within a few weeks
- avoid all close greetings (e.g., hugs and handshakes); teach alternate greetings
- staff break times will be staggered
- large whole school staff meetings are to be avoided unless physical distancing is possible
- assemblies and gatherings are discouraged and will not take place in our schools at this time
- practices such as reading buddies, house teams, student lounges etc. need to be discontinued
- physical barriers may be used, where appropriate, when physical distancing cannot be maintained (ex. plexiglass barriers for reception desks)
- further info will follow re: fire drills and lock-downs: “The need for emergency procedures to be expedient, effective, and consistent outweighs the risk that COVID-19 would pose during these situations. Students should be encouraged to respect physical distancing once they have arrived at the designated gathering spot(s).”

Scenario 1: showing signs of illness at school

- if a student or staff member begins to show signs of flu/COVID-19 when at a school or centre, isolate them away from others (preferably in a different room, but if not possible, they should be at least two meters/ six feet from others) until they can be safely taken home and they should seek medical advice through Health Links – Info Santé.
 - parent / caregivers will be asked to come immediately; request emergency contact who can arrive within an hour
 - staff monitoring the child and the child will both wear masks and take precautions as needed
 - extra cleaning measures will be taken in areas where child was prior to going home

Scenario 1: showing signs of illness at school

- If one has had COVID-19 symptoms and tested negative for COVID-19, they can return to school 24 hours after symptoms resolve. If they do not get tested, they should isolate for 10 days from symptom onset, and may return if symptoms have resolved at that time.
- A chronic and stable cough, sneeze, runny nose, or nasal congestion that is unchanged and clearly linked to a known medical condition such as asthma or allergies is not an absolute requirement for exclusion. As well, children who are crying can exhibit a runny nose. Changing or worsening of chronic symptoms requires isolation and contacting Health Links – Info Santé. Staff should exercise judgment related to symptoms but, when in doubt, err on the side of caution, exclude the child and advise the parent/ caregiver to contact Health Links – Info Santé or their health care provider.

Scenario 2: contact with a contact of a presumed/positive case

- No action is required unless close contact(s) test(s) positive for COVID-19 (see scenario 3).
- Only the close contact(s) will need to self-isolate (quarantine). They will be instructed to do so by public health officials.
- The child, young person, or staff member does not need to self-isolate (quarantine), unless the person they are in close contact with subsequently tests positive for COVID-19.

Scenario 3: has no symptoms but has close contact with confirmed positive case (i.e. within household)

- The parent/caregiver will be responsible for contacting the school/centre to advise of their child's absence (as per routine protocol) and minimum length of time of their absence. The child/young person/staff member and likely the family, if exposed, will self-isolate (quarantine).
- Testing of the child/young person/staff member will occur if recommended by public health officials.
- Notification of the school/childcare community will not occur, unless the contact becomes a case and was at school during their infectious period.

Scenario 4: has symptoms and has close contact with confirmed positive case (i.e. within household)

- Public health officials will notify the school principal only if the individual tests positive for COVID-19 and they were at the school or centre during their infectious period.
- The child/young person or staff member will isolate and remain at home because they have symptoms and likely the family, if exposed, will self-isolate.
- The child/young person or staff member will be tested if recommended by public health officials, a medical practitioner, or Health Links – Info Santé

Scenario 4: has symptoms and has close contact with confirmed positive case (i.e. within household)

- The contact (i.e. the child/young person or staff member with symptoms who has had close contact with a confirmed case) will be assessed to determine if they meet the criteria for a probable case. If considered a probable case, the below scenario 5 will be followed. Otherwise, public health officials may wait for the test results for the contact before taking further action. If the person has **not** been in a school/childcare centre while they are considered to be infectious, there is very low risk and the school/ centre will remain open (health authorities will make the decision about closure).
- If the test is positive, undertake cleaning in the classroom/school/centre in line with guidance from health authorities.
- Provide information and resources to the parent community and enable opportunities to ask questions.

Scenario 5: someone tests positive, and has been at a school when considered infectious

- Close the classroom/school if required to enable contact tracing, and cleaning and disinfection.
- Public health officials will advise if the classroom may be required to self-isolate (quarantine) for a period of up to 14 days from the last contact.
- The school may be required to close for a period if there are large numbers of confirmed cases linked to the school or very large numbers of close contacts in the school/centre.
- Public health officials will notify the principal.
- The child, young person, or staff member isolates for their period of infectivity as instructed by local public health.
- Contact tracing will be completed by local public health and they will advise close contacts to go into self-isolation (quarantine).
- Cleaning and disinfecting according to health specifications will be undertaken.
- Assess whether other programs can continue to operate (e.g., before and after school care).
- Provide information and resources to the parent community and enable opportunities to ask questions

WHEN SUPPORTS CANNOT BE DELIVERED FROM A DISTANCE:

- Review SSP (Student-Specific Plan) to determine whether interventions that require close physical proximity for longer periods of time are necessary (e.g. physically directing a student)
- Ensure students with special needs have access to information (e.g. social stories, plain language, short and simple explanations)
- Determining “Level of Risk”:
 - **LOW RISK** – Student (1) has screened negative; (2) can communicate sufficiently to follow basic directions; (3) is able to perform preventative activities like frequent hand hygiene and cough etiquette; (4) is generally cooperative during all types of procedures
 - **MEDIUM RISK** – Student (1) has screened negative; (2) has difficulty communicating sufficiently to follow basic directions; (3) has difficulty performing preventive activities like frequent hand hygiene and cough etiquette; (4) is generally cooperative during all types of procedures; (5) demonstrates symptoms such as runny nose, coughing, sneezing, gagging, drooling, but does so normally
 - **HIGH RISK** – Student (1) has screened negative; (2) has difficulty communicating sufficient to follow basic directions; (3) has difficulty performing preventive activities like frequent hand hygiene and cough etiquette; (4) is uncooperative during most/all types of procedures; (5) has vulnerabilities that include expected behaviours that increase the chance of spreading infection (e.g. spitting, biting)

PPE REQUIRED FOR EACH LEVEL OF RISK:

- **Low Risk:**

- Disposable gloves need only be worn to perform close personal care that results in potential for contact with bodily fluids. Perform hand hygiene before AND after removing gloves.

- **Medium Risk:**

- Disposable gloves need only be worn to perform close personal care that results in potential for contact with bodily fluids. Perform hand hygiene before AND after removing gloves.
- Procedural/surgical masks must be worn by staff members when they are unable to practice physical distancing of two metres.
- Utilize the following teaching experiences that help students learn about hand hygiene and not touching their eyes, nose, and mouth with unclean hands.
 - Break down into smaller steps to increase understanding
 - Use timers to help ensure adequate time. Be creative (e.g. see how many 15-20 second songs students can identify)

- **High Risk:**

- Disposable gloves need only be worn to perform close personal care that results in potential for contact with bodily fluids. Perform hand hygiene before AND after removing gloves.
- Procedural/surgical masks must be worn by staff members when they are unable to practice physical distancing of two metres.
- Eye shields are worn by staff members
 - Link will show to don and doff masks and eyewear: <https://sharedhealthmb.ca/files/extended-use-of-face-masks.pdf>
 - Disinfecting eye shields -See procedure on Slide 4
- Gowns are worn ONLY IF as student develops cold/flu symptoms or becomes COVID-19 suspect during the school day and requires support that cannot be delivered from a distance.
 - Link will show how to put PPE on properly: <https://sharedhealthmb.ca/files/PPE-on.pdf>
 - Link will show how to take PPE off properly: <https://sharedhealthmb.ca/files/PPE-off.pdf>

DISPOSAL OF PPE AND LAUNDRY

Handle waste properly

- Follow your school's standard procedures for handling waste, which may include wearing gloves.
- Place no-touch waste baskets (with or without lids) where they are easy to use.
- Throw disposable items used to clean surfaces and items in the trash immediately after use.
- Avoid touching used tissues and other waste when emptying waste baskets.
- Wash your hands with soap and water after emptying waste baskets and touching used tissues and similar waste.

Laundry - Clothing, Towels, Linens and other items:

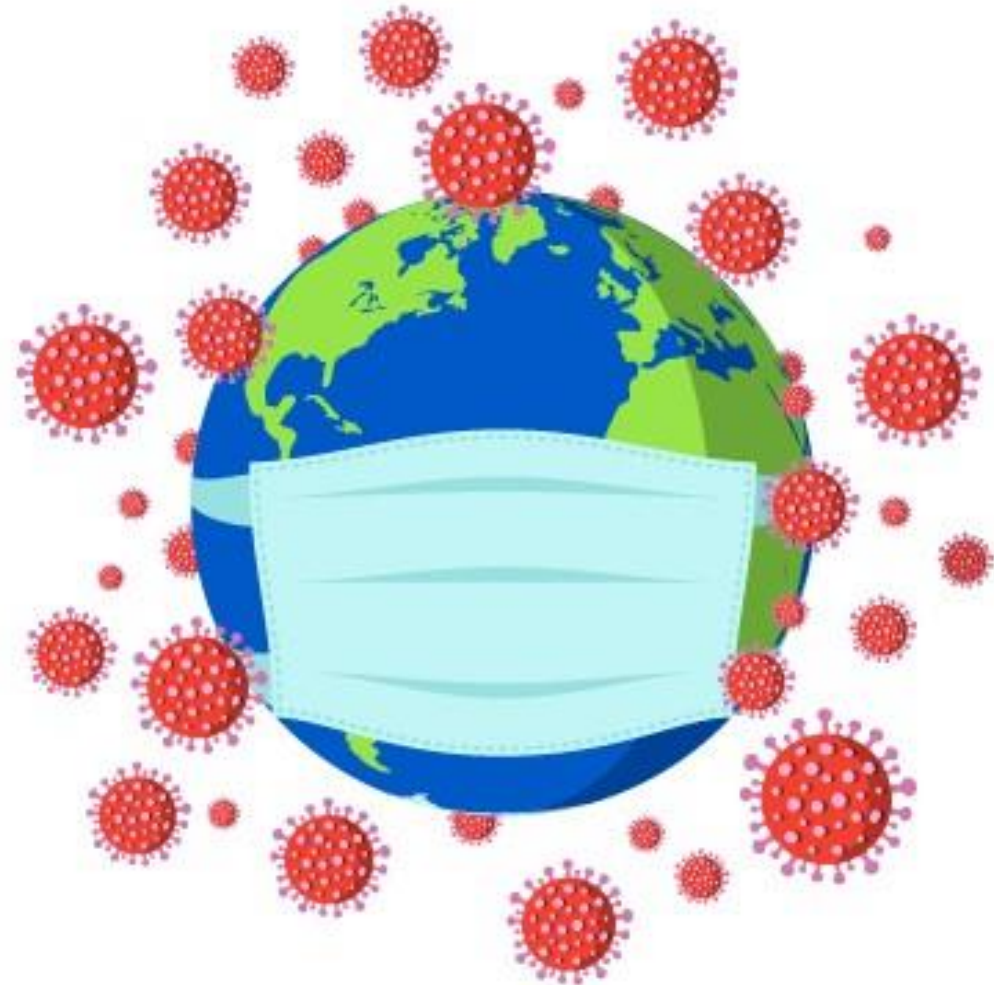
- Wear disposable gloves, and wash hands with soap and water as soon as you remove the gloves.
- Do not shake dirty laundry.
- Launder items according to the manufacturer's instructions.
- Use the warmest appropriate water setting and dry items completely.
- Dirty laundry from a sick person can be washed with other people's items.
- Clean and disinfect clothes hampers according to guidance above for surfaces.

Disinfecting Eye Shields

PURPOSE	PERSONAL PROTECTIVE EQUIPMENT	NOTES/OTHER
Enhanced cleaning protocols to ensure application of Provincial Health guidelines for health and safety of employees during the COVID-19 pandemic.	<ul style="list-style-type: none">gloves	“Many common disinfectants are known to damage acrylic or polycarbonate surfaces, causing them to crack or become cloudy. Proprietary cleaning solutions may not contain detergents or other ingredients sufficient to destroy SARS-CoV-2, the virus that causes COVID-19. Stick with micro-fiber type of cloth. Avoid ammonia-based products, like Windex or other home glass cleaners, because they contain harmful chemicals that will damage the surface leaving it cloudy looking. Soapy water is the safest and most effective cleaning solution for acrylic.”
PROCEDURE		
<ol style="list-style-type: none">Put on gloves.In a spray bottle, prepare a solution of 1 oz. Lemongrass dish soap to 750 ml of water.Spray the acrylic surface with the soap solution and wipe, using a microfiber or other non-abrasive cloth.Because partitions/shields are intercepting respiratory droplets, they must be treated as contaminated surfaces and should be cleaned regularly according to a set protocol.		
PROTOCOL:		
Partitions/shields that are not touched should be cleaned daily		
Portions of the partition/shield that are touched (e.g., hands passing through and contacting a soft plastic flap) should be cleaned twice daily, or more frequently if visibly soiled, as with other high-touch surfaces.		
<ol style="list-style-type: none">Cloths that are used to wash or dry the partition/shield, should be considered contaminated and should be laundered before re-use.		

OTHER: LINKS

- Shared Health Manitoba-
<https://sharedhealthmb.ca/>
- World Health Organization-
<https://www.who.int/>



[Click here to complete the presentation.](#)