

CONSIDERATIONS TO IMPROVE SAFETY IN BC SCHOOLS

PHAC regarding improving indoor air in particular, see Schools

<https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/prevention-risks/covid-19-improving-indoor-ventilation.html#a2c>

Recent article regarding BC approach to using strategies to combat aerosol transmission

<https://bc.ctvnews.ca/call-for-b-c-inquiry-after-officials-ignore-the-science-of-airborne-covid-19-spread-1.5620964>

Ontario: Planning process for ventilation, filtration in schools

This 13 page document includes funding, expectations and checklists with respect to the above.

efis.fma.csc.gov.on.ca/faab/Memos/B20

BC: Planning process for ventilation, filtration in schools

As of Aug. 24/21, there is one page in the Communicable Disease Guidelines for K-12 settings.

www2.gov.bc.ca/assets/gov/edu

Ontario: Funding for clean air in schools

Just over 2 million Jr. K-Gr. 12 students (2,056,058 students 2019/20

B.C. 563514 K-Gr.12 students for 21/22

Ontario therefore has ~3.65 times the number of students as B.C.

Ontario spent just over 600m on ventilation in the last 2 years.

B.C.: Funding for clean air in schools

87.5m has been spent in the same amount of time.

For BC to be spending the same as Ontario, given student population, another 77.5M would need to be spent.

Ontario:

Has purchased over 70,000 HEPA air purifiers for schools, one in every classroom.

letter from the DM of Ontario's Ministry of Education.

efis.fma.csc.gov.on.ca.

Toronto District School Board alone has installed more than 14, 000 HEPA units in schools to "enhance air cleaning and meet the TDSB's commitment of placing an institutional grade HEPA filter in every occupied classroom".

<https://www.tdsb.on.ca/School-Year-2021-22/Health-and-Safety/Ventilation>

B.C.:

Permission for parents to donate HEPA filters, since none have been forthcoming from government, has not been granted despite the requests by numbers of parents. Refusal by school principals has been based on 2 things: Issues of equity and/or that the ventilation is sufficient. Also in some cases, air flow issues have been cited, although with proper placement, this has been debunked by aerosol engineers. The MoE has asked schools to ensure that ventilation systems use filters that are at least MERV 13, the minimum level for viruses, but parents are finding that principals have no idea what is in place when being asked by parents.

The Communicable Disease Plan makes no mention of measurable objectives, not even ASHRAE COVID-19 directive, just general language about opening windows...”

Numerous examples of inequity presently exist in school districts that parents pay for: multiple day field trips, specialized academies are two. Some districts have Merv 13 ventilation in every school. Some don't. To refuse HEPA filters on the grounds being provided is confounding.

While the MoE conducts its review of ventilation in schools to ensure standards are followed, HEPA filters would enhance safety. To not allow HEPA filters, when a district process for donations could equalize provision, creates inequity for students whose medical conditions make it impossible to attend school without cleaner air. (See next item) In fact, the volume pricing of the units purchased for classrooms in Ontario, a portable medical grade air cleaner that is perfect classroom size, is less than 850.00. Those in Ontario were purchased from austinair.ca.

If B.C. Government spent the additional 77.5 million to become equal in funding for clean air for BC schoolchildren, 125,000 portable HEPA purifiers could be purchased. That would allow every classroom in BC to have one, with extras for gyms, libraries, music rooms, learning support rooms and more.

There are students throughout the province effectively being denied an education if they or someone in their family home have medical conditions. This year, funding that supported online options that were used extensively in families for medically vulnerable students, was removed by MoE . This has resulted in more students in classrooms, lunchrooms and hallways and despite “encouragement” to consider space and crowding through “suggested” strategies in the <https://www2.gov.bc.ca/assets/gov/education/administration/kindergarten-to-grade-12/safe-caring-orderly/k-12-covid-19-health-safety-guidelines.pdf> Crowding, full assemblies, full staff meetings are occurring in schools across the province.

Face to Face education was the option provided along with previously established district online education. In some districts those online programs are full. In others they don't exist.

1. High quality online education as an option for students in families where medical conditions cause increased vulnerability to Covid infection does not exist in BC in 2021. Online education, of questionable quality where it is available, requires deregistering from the neighbourhood school and a possibility and even a probability of the child losing their place in school, if in fact it exists in that school district.
2. The lack of transparency, granularity and timeliness regarding notification of exposures makes it impossible for any parent, but most particularly those from vulnerable families, to discern whether it is safe enough for their child to attend school and feel that the risk is worth taking.
School personnel have indicated that they are subject to discipline for disclosing any such information.
3. Children with differing abilities in a medically vulnerable family are losing the special education supports to which they are entitled through designation and funding support because they are unable to attend school.

	Oct. 2/2021	Oct. 14/2021	Increase
Children under 10	13,019 infected	13, 728	709
	130 hospitalized	N/A	N/A
	13 ICU	N/A	N/A
	2 have died	N/A	N/A
Age 10-19	21,360 infected	21,927	567
	100 hospitalized	N/A	N/A
	19 ICU	N/A	N/A

To take a small snapshot in time, regarding comparison of rates in ON and BC, for the week of Sept. 19-25 (the last situation report) with respect to children and youth ages 0-19, BC had 156 cases for that week compared to ON at 43 cases for that week.

Ontario reports numbers in children for 0-4, 5-11, and 12-19, clearly much more meaningful breakdowns than 0-10 and 10- 19, especially so as we move to vaccination for children 5-11. Here is the way that schools data is reported in Ontario. None of that is available here.

<https://data.ontario.ca/dataset/summary-of-cases-in-schools>

In BC, parents depend on the work of two volunteer moms who are this year again, reporting what they are sent by parents whose children have tested positive, those who know that this service is available that is. And even with that, 1621 school exposure events have been reported to them affecting 593 schools, as of Oct. 14, 2021. a much higher proportion than last year. (Actual numbers available upon request.)

This lack of transparency, granularity and timeliness has resulted in 60 separate Freedom of Information requests to the Freedom of Information office of the Ministry of Health, under Section 25 of FOIPPA, Duty to Inform.

Differences between Ontario and BC in terms of protective practices.

1. A K-12 masking order that has persisted throughout since last year. Not so in BC.
2. More access to higher quality online learning. Not so in BC.
3. Significantly higher access to timely and granular data. See document above
4. A recognition of the airborne transmission of the virus and HEPA filters in every classroom. Not allowed in BC.
5. And has just begun a program using rapid antigen tests in schools.

For this 2021/22 school year, a number of measures that were in place last year even without the delta variant have been removed. The information below comes from parents and school staff.

Last Year	This Year
Exposure notices sent to all families by school	A website listing exposures well after the fact and incomplete. One HA listing none.
Distancing required	Hallways and classrooms are crowded at lunch time (photos available) no masking
Limits on extracurricular sports	No limits
Cohorts	None
Limits on visitors	None
Limits on gatherings such as staff meetings and assemblies	Full assemblies, Multiple day field trips, full face to face staff meetings with no online option.
Online programs available	Funding removed, options limited
Daily health checks	Yes
Masking for part of the year	Yes after a delay, with exemptions
Handwashing encouraged	Handwashing encouraged
Staggered entry and recess	Encouraged but not practised widely

The removal of measures has been justified repeatedly by indications that transmissibility of the virus is “low” in children, despite extensive evidence to the contrary as that cited in this very recent article from the Harvard Gazette, Oct. 14, 2021.

<https://news.harvard.edu/gazette/story/2021/10/study-confirms-kids-as-spreaders-of-covid-19-and-emerging-variants/>