

Additional School and Childcare Safety Protocols for Working with Children with Complex Needs (COVID-19)



Acknowledgement: This document was originally developed by the *Langley School District* in cooperation with the others including the *Fraser Health Authority*. It has been adapted and *Vancouver Coastal Health* was consulted and reviewed this version for use in its health authority.

As COVID-19 information evolves, updates to this document may be needed.

This document is for use by the District during the current period of COVID-19, it is not a replacement for commercial childcare licensing requirements/guidelines, or the BC Provincial Health Officer's guidance to K-12 schools and childcare.

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Essential Services Workers Childcare

It is anticipated that most children requiring in-person care in K-12 school settings will be the children of essential services workers requiring school care, those in remote locations, vulnerable students requiring in person support, **and learners with diverse needs**. It is up to individual school districts and independent school authorities through their local planning processes to determine the optimal balance between virtual and face-to-face opportunities for students.

BC Ministry of Education Priorities

1. Maintain a healthy and safe environment for all students, families and employees.
2. Provide the services needed to support children of our essential workers.
3. Support vulnerable students who may need special assistance.
4. Provide continuity of educational opportunities for all students.

What we know about COVID-19 in children

- COVID-19 virus has a very low infection rate in children estimated at 1-5% worldwide.
- The majority of cases in children are the result of a household transmission by droplet spread from another family member with symptoms of COVID-19.
- Children who are infected with the virus and develop COVID-19 have milder symptoms if any, and very few become critically ill.
- Children with COVID-19 illness typically have a fever, dry cough and fatigue. Some may also experience nausea, vomiting, abdominal pain and diarrhea.
- Unlike adults the rates of transmission are unknown.
- There is no conclusive evidence that children who are asymptomatic pose a risk to other children or to adults.
- There is no evidence indicating children of health care workers or other essential services workers are at increased risk of COVID-19 infection compared to other children
- Like adults, children with any common cold, influenza or COVID-19 like symptoms should stay home and isolate for 10 days following onset of symptoms and until symptoms resolve.
- More research is needed to fully characterize infection, transmission, and COVID-19 disease in children.

Dr. Bonnie Henry, Provincial Health Officer, has advised all parents who can, should care for their children at home. She also recognized that while some centres may close, childcare services can and must be provided in a safe manner for those families whose parents work in critical roles or are essential services workers. [See Provincial Health Guide for K-12 Setting \(Appendix G\).](https://news.gov.bc.ca/releases/2020CFD0041-000530)
[https://news.gov.bc.ca/releases/2020CFD0041-000530.](https://news.gov.bc.ca/releases/2020CFD0041-000530)

The Ministry has suspended in-person instruction and directed school districts and independent school authorities to develop plans to ensure on-going instruction, as well as services and supports for the children of essential services workers. **The intent is that a limited number of students will be present in-person in schools at any given time in order to allow for sufficient physical distancing.**

Physical distancing is not an expectation in a childcare or K-12 educational setting, at the same time, it is important that we do what we can to try to **assist children and staff to understand the importance of minimizing the frequency of physical contact with one another**. This is as per Vancouver Coastal Health (VCH) guidance. From a public health perspective, **there are no set ratios that prescribe the number of adults and children that can be present in the same space at any given time.**

The following ideas should be taken into consideration during planning and implementation:

If a Child or Staff Member is Ill

Within normal educational settings, children and staff will often have influenza or other respiratory viruses with symptoms similar to COVID-19. For this reason, all children and staff who are ill with fever or infectious respiratory symptoms of any kind need to stay home. This includes children of essential services workers who are ill. If you are at all unsure of your status, the [COVID-19 Symptom Self-Assessment Tool](#) is a valuable resource to help assess whether you should be staying home or not. The daily health screen at the school is another helpful resource.

Hand Washing

Thoroughly washing your hands with soap and water is the best protection against illness. Follow this instruction for handwashing:

- Wet hands with warm running water.
- Apply a small amount of liquid soap. Antibacterial soap is not required.
- Rub hands together for at least 20 seconds (sing the ABC's). Rub palms, backs of hands, between fingers and under nails/creating a lather.
- Rinse off all soap with running water.
- Dry hands with a clean, disposable towel.
- Turn off taps, using the paper towel – if required.
- Discard the used towel in the waste container.

Resource: W.H.O. [Hand Washing Video](#); or [Appendix C: Hand Washing](#)

Staff and children should wash their hands:

- When they arrive at school and before they go home
- Before and after any transitions within the school setting (e.g. to another classroom, indoor-outdoor transitions, moving to on-site childcare, etc.)
- Before eating and drinking
- After using the toilet
- After playing outside or handling pets
- After sneezing or coughing into hands
- Whenever hands are visibly dirty or greasy

Coughing and Sneezing Etiquette

- Cough and sneeze into the crease of the elbow or tissue and dispose of tissue into waste bin
- **NOTE: FEVER or COUGHING: call the child's caregiver right away, separate child from other children, and have child picked up promptly (refer to Appendix D). Request thorough cleaning of space.**

Access Control

Parent/caregivers and visitors must not enter the childcare or schools at this time. Only school and childcare workers and authorized District Maintenance or Operations staff may enter as needed. In all cases authorized Maintenance and /or Operations staff must thoroughly sanitize hands prior to entering the childcare area.

Arrival procedures

Physical distancing of 2 meters must be maintained at arrival and check-in regardless of the number of parents/caregivers arriving with children.

Parents must remain outside of the Childcare space and/or school to drop off their children. They must not enter the Childcare space.

Child Health Screening

Parents/caregivers are required to keep symptomatic children home.

Children showing symptoms of COVID-19 or with a temperature greater than 38°C must not be allowed in the Childcare area.

Parents/caregivers must communicate with school or childcare staff upon arrival and assist in completing the site's daily health care screening for their child. Health care screening must be completed each day prior to the child being granted access.

Physical Distancing

Reminder: Physical distancing is not an expectation in a childcare or K-12 educational setting, at the same time, it is important that we do what we can to try to **assist children and staff to understand the importance of minimizing the frequency of physical contact with one another (as per VCH).**

Recommendations

- Provide additional student support staff 1-1 or 2-1 for students with special needs.
- Avoiding close greetings like hugs or handshakes; remind children to keep hands to themselves
- Help younger children learn about physical distancing by creating games. Older children can be provided age appropriate reading material and encouraged to self-regulate.
- Take children outside more often, perhaps breaking children into smaller groups
- Organize learning activities outside including snack time, play based learning, and play time.
- Regularly clean and sanitize items that are designed to be shared such as manipulatives or electronics
- Set up mini environments within the school to reduce number of children in a group
- Consider different classroom configurations to maintain distance between children (e.g. separating desks) or different locations in the school (e.g. gym or library, outside).
- Increase the space between children and staff during activities such as snack/lunch, i.e., move or separate tables, move chairs farther apart.
- Set up distinct areas for children who may have symptoms of illness until they can be picked up and ensure these areas are sanitized regularly.
- Consider staggering snack/lunch time to accommodate smaller groups/more space.
- Discourage any food or drink sharing.
- Use educational videos/online programs /social stories as a part of learning
- Encourage independent learning and distancing from each other.

Food

No food sharing.

No food preparation in the Childcare area. Other than fresh fruits and vegetables or food provided by the parent/caregiver for the child or pre-packaged commercial food items, no other food items are permitted. Wash all fruits and vegetables with soap and cold water then rinse before consuming. Place all childcare and parent provided food items in a designated, delineated and freshly sanitized tabletop/countertop area labelled "Incoming Food" upon arrival.

The Use of Personal Protective Equipment

- Personal protective equipment such as **masks, gloves, and gowns are not recommended for staff who work in the education sector.** It is only recommended for healthcare workers, and those with other non-infectious occupational health exposures.
- **Masks are not recommended for use by children unless advised to do so by a health care provider.** In young children in particular, masks can be irritating and may lead to increased touching of the face and eyes.

Behaviour Support Plans and Employee Safety Plans

Children are screened case by case to determine levels of support required to safely bring students into the school environment and any support plans will be provided to the Administrator. Staff working with children that have Behaviour Support Plans and/or Employee Safety Plans in place should review these plans prior to working with the child.

Spitting Recommendations

Although this behaviour is challenging, if the student is asymptomatic and healthy, the risk of transmission is low, especially if the behaviour is paired with handwashing and cleaning.

- Wipe down any area with saliva with approved sanitizer or disinfectant wipes
- If in contact with saliva, wash hands and/or affected areas

Biting Recommendations

- If in contact with saliva, wash hands and/or affected areas
- Request Kevlar sleeves and/or other Kevlar products

Toileting Recommendations

- Wear gloves
- Wash hands before and after toileting
- Safe Diapering (see Appendix A)

Personal Care Plans

Students with complex health needs may have Personal Care Plans developed in conjunction with the health authority. The same personal protective equipment needed prior to COVID-19, such as masks, gloves, and gowns, as identified and required by the health authority for implementing a student's Personal Care Plan, continues to be required during this time of concern due to COVID-19. No additional personal protective equipment is required unless identified on a case by case basis by the health authority. For particularly complex cases, example feeding tubes, direct any inquiries to the District's Learning Services team lead.

Toys and Other Items

Keep enough toys out to **encourage individual play**. Items that may encourage group play in proximity or increase the risk of hand-to-hand contact such as playdough should be avoided. **Try to limit toys and other items to those that can be easily cleaned**. Like other respiratory viruses, there is no evidence that the COVID-19 virus is transmitted via textbooks, paper, or other paper products. As such, there is no need to limit the distribution of books or paper based educational resources to students due to concerns about virus transmission.

Keeping Parents/Caregivers Informed

Keep parents and caregivers informed about what you are doing at your school to take extra precautions, be responsive to children. **Be clear about your policy that children need to stay home if they are sick.**

Cleaning and Sanitizing Recommendations

Toys and Equipment

Toys, surface, and all areas of the childcare facility or other areas of the school which are used must be cleaned and sanitized. High touch surfaces should be cleaned and disinfected at least twice a day. This includes:

- Toys in use
- Doorknobs and light switches
- Cupboard handles and handrails
- Phones and keyboards
- Tables
- Bathrooms
- Pet Cages (if high touch)
- Diaper stations should be cleaned and disinfected after every use.

Cots and Related Equipment

- Clean and disinfect cots and mattresses prior to use and after they are used or soiled.
- Pillow cases and blankets are single use only and disposable (by design), therefore dispose immediately after single use.
- Use single use tissues and paper towel or towelettes and dispose accordingly
- Store linens in clean dry areas to prevent mould and mildew growth and keep them out of the way of everyday activities.

Refer to Appendix B for more information on cleaning and disinfecting in Childcare and district-specific custodial procedures.

Need Assistance?

Enlist in the help of District Principals Student Support to assist with Behaviour Support Plans, Employee Safety Plans, Personal Care Plans, visual supports, or other child or student centric needs.

If you are having difficulty implementing any of the recommended strategies, please contact the District Principal of Student Support or school administrator.

Other Resources

- [Frequently Asked Questions \(FAQs\) on Continuity of Learning](#)
- [COVID 19: Public Health Guidance for Childcare Settings](#)
- [COVID 19: Public Health Guidance for K-12 School Settings](#)

Safe and Healthy Diapering to reduce the spread of germs

Keep a hand on the child for safety at all times!



1. PREPARE

- Cover the diaper changing surface with disposable liner.
- If you will use diaper cream, dispense it onto a tissue now.
- Bring your supplies (e.g., clean diaper, wipes, diaper cream, gloves, plastic or waterproof bag for soiled clothing, extra clothes) to the diapering area.



2. CLEAN CHILD

- Place the child on diapering surface and unfasten diaper.
- Clean the child's diaper area with disposable wipes. Always wipe front to back!
- Keep soiled diaper/clothing away from any surfaces that cannot be easily cleaned. Securely bag soiled clothing.



3. REMOVE TRASH

- Place used wipes in the soiled diaper.
- Discard the soiled diaper and wipes in the trash can.
- Remove and discard gloves, if used.



4. REPLACE DIAPER

- Slide a fresh diaper under the child.
- Apply diaper cream, if needed, with a tissue or a freshly gloved finger.
- Fasten the diaper and dress the child.



5. WASH CHILD'S HANDS

- Use soap and water to wash the child's hands thoroughly.
- Return the child to a supervised area.



6. CLEAN UP

- Remove liner from the changing surface and discard in the trash can.
- Wipe up any visible soil with damp paper towels or a baby wipe.
- Wet the **entire surface** with disinfectant; make sure you read and follow the directions on the disinfecting spray, fluid or wipe. Choose disinfectant appropriate for the surface material.



7. WASH YOUR HANDS

- Wash your hands thoroughly with soap and water.



Centers for Disease
Control and Prevention
National Center for Emerging and
Zoonotic Infectious Diseases

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Appendix B: Cleaning and Disinfecting in Childcare

CLEANING AND DISINFECTING IN CHILDCARE

Cleaning and disinfecting prevents the spread of germs and is essential to ensuring the health and safety of children and staff. Some germs can live for hours, days, or even weeks on surfaces.

Cleaning with soap and water removes dirt and grease that can hide germs from disinfectants, substantially reducing the number of germs that may be left on surfaces. Disinfecting after cleaning will kill most of the germs that were left behind.

Set up a schedule to ensure all cleaning and disinfecting duties are consistently completed, and document this schedule on a chart in your facility.

You need to increase the frequency of cleaning and disinfecting during the COVID-19 pandemic to reduce the chance of spreading infections.

FIVE STEPS FOR CLEANING AND DISINFECTING

1. Clean with soap and water.
2. Rinse with clean water.
3. Apply the disinfectant and follow the manufacturer's instructions on the label.
4. Rinse with clean water if required, according to the manufacturer's instructions on the label. Rinsing is not required when using household bleach and water.
5. Let air dry.

Refer to the BCCDC Coronavirus (COVID-19) Cleaning and Disinfecting for Public Settings Bulletin http://www.bccdc.ca/Health-Info-Site/Documents/CleaningDisinfecting_PublicSettings.pdf for more information.


List of disinfecting agents and their working concentrations known to be effective against coronaviruses^{1,2}:

Agent and concentration	Uses
1. 1:100 dilution Chlorine: household bleach – sodium hypochlorite (5.25%)* 10 ml bleach to 990 ml water	Used for disinfecting surfaces (e.g., hand railings, grab handles, door knobs, cupboard handles). Make fresh daily and allow surface to air dry naturally.
2. 1:50 dilution Chlorine: household bleach - sodium hypochlorite (5.25%)* 20 ml bleach to 980 ml water	Used for disinfecting surfaces contaminated with bodily fluids and waste like vomit, diarrhea, mucus, or feces (after cleaning with soap and water first). Make fresh daily and allow surface to air dry naturally.
3. Hydrogen Peroxide 0.5%	Used for cleaning and disinfecting surfaces (e.g., counters, hand rails, door knobs).
4. Quaternary Ammonium Compounds (QUATs): noted as 'alkyl dimethyl ammonium chlorides' on the product label	Used for disinfecting surfaces (e.g., floors, walls, furnishings).

¹ Dellanno, Christine, Quinn Vega, and Diane Boesenberg. "The antiviral action of common household disinfectants and antiseptics against murine hepatitis virus, a potential surrogate for SARS coronavirus." *American journal of infection control* 37.8 (2009): 649-652.


² Provincial Infection Prevention Control Network of British Columbia. "Infection Prevention and Control Guidelines for Providing Healthcare to Clients Living in the Community." (2014). https://www.picnet.ca/wp-content/uploads/PICNet_Home_and_Community_Care_Guidelines_2014_.pdf

The BC Ministry of Health does not endorse or promote any specific brands of disinfectant products. IPC v2.0



Coronavirus COVID-19


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Hand Hygiene


SOAP OR ALCOHOL-BASED HAND RUB: Which is best?


Either will clean your hands: use soap and water if hands are visibly soiled.





Remove hand and wrist jewellery


HOW TO HAND WASH


- 

1 Wet hands with warm (not hot or cold) running water
- 

2 Apply liquid or foam soap
- 


3 Lather soap covering all surfaces of hands for 20-30 seconds
- 


4 Rinse thoroughly under running water
- 


5 Pat hands dry thoroughly with paper towel
- 

6 Use paper towel to turn off the tap

HOW TO USE HAND RUB


- 




1 Ensure hands are visibly clean (if soiled, follow hand washing steps)
- 

2 Apply about a loonie-sized amount to your hands
- 

3 Rub all surfaces of your hand and wrist until completely dry (15-20 seconds)

COVID19_HH_001



   **BC Centre for Disease Control**

If you have fever, a new cough, or are having difficulty breathing, call 8-1-1.

Appendix D: Staff or Children who Become Symptomatic at Childcare/School

Staff who become symptomatic while at work in a childcare centre.

Any staff member who develops the symptoms of influenza or COVID-19 during the workday while at school or in a childcare centre will immediately distance themselves from others, report the concern to their supervisor, and remove themselves from the facility without delay. They will call a physician and stay home as advised.

Children who become symptomatic while at childcare

If a child starts to show signs and symptoms of what could be influenza or COVID-19, isolation and pick-up by the child's parent or guardian without delay will occur.

Isolation or Private Waiting Room Set-Up

- Designate a sufficiently large room, preferably close to the childcare pick-up doorway entrance. Put signage up on doorway. E.g. Isolation or Treatment room
- Select a room with a sink in it.
- Designate a washroom nearby for use by symptomatic students only. Put signage up on the washroom door.
- Ensure several tables and chairs are set up for use by symptomatic students so that social/physical distances (2m or 6ft) are maintained.
- If possible, have available a box of tissue and dedicated waste basket nearby for students to access if the student requires one. Parent Contact

Parent Contact

- Report to the childcare supervisor immediately when a child has become symptomatic.
- The supervisor or office staff will contact the student's parents/guardian to come and pick them up immediately at the designated childcare door/entrance.

Other Protective Actions

- Separate and accompany the student to the isolation/treatment room, while maintaining social/physical distances (2m or 6ft) as best as possible.
- Staff will direct students to wash hands immediately upon arrival at the isolation/treatment room at the internal sink or at the designated washroom.
- Staff should direct a student to a chair and table/desk and direct them to sit and remain seated and wait.
- Staff will supervise the student from the doorway as much as possible and maintain social/physical distances (2m or 6ft) when this is not possible when they must enter the room. However, if the child requires care, support or first aid, then this should be provided and may require closer proximity.
- Remind the student to try not to touch their face and other surfaces nearby as they are waiting.
- Continue to remind student to practice good respiratory hygiene such as coughing into elbows, instead of hands and if tissues are used, that they immediately be thrown out into the waste basket.
- Once the student has been picked up, inform the childcare supervisor that the isolation/treatment room requires cleaning/disinfecting of surfaces such as the chair/tables, removal of waste and advise the Custodian.

- Remind parent/guardian the need for their symptomatic child to stay home and follow Public Health's advisory.
- Staff will wash their own hands as often as possible during this period and avoid touching their face.

Appendix E: Administering First Aid Safe Work Procedure - COVID-19

The following is for certified First Aid Attendants only.

Procedure - Flu like Symptoms

Should a student begin to show flu like symptoms:

- Take steps to keep a safe distance of 6 feet / 2 meters if you can and reassure the unwell individual
- Move the individual discreetly to the private isolation room.
- Alert the principal or supervisor
- Direct staff to not allow anyone besides the patient's family or First Responders in the room.
- Once clear, advise custodial staff of areas that a person with flu-like symptoms was present to ensure high touch surfaces and enhanced cleaning occurs.
- Call 911 if breathing is impaired or any other medical emergency arises.


Procedure - Non-Flu like Symptoms - Standard First Aid

- First Aid rooms/dressing rooms are to be kept as a clean staging area, **those with flu-like symptoms are NOT to enter.**
- Perform hand washing as per Hand Washing procedure.
- Put on/don gloves prior to rendering first aid. See Appendix F
 - Face masks are not required for rendering first aid.
- Gather appropriate first aid supplies and leave first aid kit in the First aid room.
- Perform injury assessment verbally and visually prior to administering first aid.
- Advise the person not to speak or ask them to look to the side while first aid is administered.
- Do not apply masks to those receiving first aid.
- Render appropriate first aid.
- Wipe down all surfaced that were used/touched with disinfectant provided.
- Remove personal protective equipment:
 - Remember the outside of the gloves are contaminated. Follow proper procedures for removing gloves. See Appendix F
 - Wash hands as per Hand Washing section and guidance.
- Complete Staff or student First Aid Record and log as per WorkSafeBC

Appendix F: Donning and Doffing Gloves Procedure




Appendix G: Public Health Guidance for K-12 School Settings



Coronavirus COVID-19

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HOW YOU CAN SLOW THE SPREAD OF COVID-19

Take care of others by taking care of yourself. Wash your hands, don't touch your face, and stay home if you are sick.	Stay at Home and Physically Distance Stay at home whenever you can. Maintain 2 meters distance from those outside of your household.
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COVID 19: Public Health Guidance for K-12 School Settings

Updated April 3, 2020

Educators, administrators and support staff play a key role in protecting students and their families from, and minimizing the impact of, infection and illness. This is especially important at this time as we work to prevent and minimize the spread of the novel COVID-19 virus.

On advice from the Provincial Health Officer, in-person instruction in K-12 schools was suspended effective March 17, 2020. Beginning March 30, 2020, school districts and independent school authorities were asked to ensure on-going school care and learning opportunities for children of essential service workers.

School districts and independent school authorities should explore remote and online learning options, and in-person instruction within the guidelines established by the BC Centre for Disease Control and the Ministry of Health.



It is anticipated that most children requiring in-person instruction in K-12 school settings will be the children of essential service workers requiring school care, those in remote locations, vulnerable students requiring in person support, and learners with diverse needs.

It is up to individual school districts and independent school authorities through their local planning processes to determine the optimal balance between virtual and face-to-face opportunities for students.

These guidelines are intended to assist school districts and independent school authorities maintain safe and healthy work environments for children and adults in K-12 school settings during the COVID-19 pandemic.


What we know about COVID-19 in children.

- COVID-19 virus has a very low infection rate in children estimated at 1-5% worldwide.
- The majority of cases in children are the result of a household transmission by droplet spread from another family member with symptoms of COVID-19.
- Children who are infected with the virus and develop COVID-19 have milder symptoms if any, and very few become critically ill.



If you have fever, a new cough, or are having difficulty breathing, call 8-1-1.

Non-medical inquiries (ex. travel, physical distancing): 1-888-COVID19 (1888-268-4319) or text 604-630-0300



- Children with COVID-19 illness typically have a fever, dry cough and fatigue. Some may also experience nausea, vomiting, abdominal pain and diarrhea.
- Unlike adults the rates of transmission are unknown. There is currently no documented evidence of child-to-adult transmission. There are no documented cases of children bringing an infection into the home, from school or otherwise. This is likely the result of the limited number of cases and the mild symptoms in those children who do have COVID illness.
- There is no conclusive evidence that children who are asymptomatic pose a risk to other children or to adults.
- There is no evidence indicating children of health care workers (HCW) are at increased risk of COVID-19 infection than children of non-HCW. This is likely due to the careful monitoring of HCW for symptoms and follow-up of their household contacts.
- Like adults, children with any common cold, influenza or COVID-19 like symptoms should stay home and isolate for 10 days following onset of symptoms and until symptoms resolve.
- More research is needed to fully characterize infection, transmission, and COVID-19 disease in children.

If you're ill – stay at home.

Within normal educational settings, children and staff will often have influenza or other respiratory viruses with symptoms similar to COVID-19. For this reason, all children and staff who are ill with fever or infectious respiratory symptoms of any kind need to stay home. This includes children of essential service workers who are ill. If you are at all unsure of your status, the [COVID-19 Symptom Self-Assessment Tool](#) is a valuable resource to help assess whether you should be staying home or not.

Encouraging hand hygiene

Both students and staff can pick up germs easily, from anything they touch, and can spread those germs to objects, surfaces, food and people. Thorough hand washing with plain soap and water is still the single most effective way to reduce the spread of illness.

Children forget about proper hand washing so staff and students should practice often and staff should model washing hands properly in a fun and relaxed way. Everyone should wash their hands more often!

When sinks for hand washing are simply not available in close proximity (i.e. if students and staff are participating in activities outside), you may use alcohol-based hand sanitizers (ABHS) containing at least 60% alcohol. Know that this method is not very effective when a child's hands are quite soiled, when coming in from outside, for example, so be sure to wash hands with soap and water as soon as practically possible. Read labels and wash hands with sanitizer the same way you would wash with soap and water.

Six steps to proper handwashing

1. Wet hands with warm running water.
2. Apply a small amount of liquid soap. Antibacterial soap is not required.
3. Rub hands together **for at least 20 seconds** (sing the ABC's). Rub palms, backs of hands, between fingers and under nails/creating a lather.

	Ministry of Health	 BC Centre for Disease Control	If you have fever, a new cough, or are having difficulty breathing, call 8-1-1.	Non-medical inquiries (ex. travel, physical distancing): 1-888-COVID19 (1888-268-4319) or text 604-630-0300	
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4. Rinse off all soap with running water.
5. Dry hands with a clean, disposable towel.
6. Discard the used towel in the waste container.

Children should wash their hands...

- When they arrive at school and before they go home
- Before and after any transitions within the school setting (e.g. to another classroom, indoor-outdoor transitions, moving to on-site childcare, etc.)
- Before eating and drinking
- After using the toilet
- After playing outside or handling pets
- After sneezing or coughing into hands
- Whenever hands are visibly dirty

Teachers, administrators and support staff should wash hands...

- When they arrive at school and before they go home
- Before handling food or assisting children with eating
- Before and after giving or applying medication or ointment to a child or self
- After using the toilet
- After contact with body fluids (i.e., runny noses, spit, vomit, blood)
- After cleaning tasks (staff)
- After removing gloves
- After handling garbage
- Whenever hands are visibly dirty

Cough/sneeze etiquette:

- Cough and sneeze into the crease of the elbow or tissue

Fever or coughing

If a child or staff member starts showing symptoms of what could be influenza or COVID-19, it is important to:

- Contact the child's parent or caregiver to come and pick them up right away.
- Have a separate and supervised area where you can promptly separate a child from others until their parent or caregiver can come and pick them up. Staff who display symptoms should go home right away.
- Continue to practice good hand hygiene and respiratory hygiene such as coughing or sneezing into the creases of elbows and throwing tissues out immediately after use.
- Do a thorough cleaning of the space once the child has been picked up and ensure that everyone who may have had contact with the child washes their hands thoroughly.



Ministry of Health



BC Centre for Disease Control

If you have fever, a new cough, or are having difficulty breathing, call 8-1-1.

Non-medical inquiries 1-888-COVID19 (1888-268-4319)
(ex. travel, physical distancing): or text 604-630-0300



The use of personal protective equipment

- Personal protective equipment such as masks, gloves, and gowns are not recommended for staff who work in the education sector. It is only recommended for healthcare workers, and those with other non-infectious occupational health exposures.
- There is no benefit from wearing masks in public settings or in schools, however a mask may be given to a person who is experiencing respiratory symptoms such as a sneeze or cough on the advice of a health care provider.
- Masks are not recommended for use by children unless advised to do so by a health care provider. In young children in particular, masks can be irritating and may lead to increased touching of the face and eyes.

Maintain cleaning and disinfecting policies

We don't yet know how long the virus causing COVID-19 lives on surfaces, but early evidence suggests it can live on objects and surfaces from a few hours to days. Regular cleaning and disinfecting of objects and high-touch surfaces is very important to help to prevent the transmission of viruses from contaminated objects and surfaces.

- Make sure you are well-stocked with hand washing supplies at all times including soap, clean towels, paper towels and where appropriate, hand sanitizer with a minimum of 60% alcohol.
- Use space strategically and consolidate cleaning efforts accordingly. This means considering where students and staff will be present and focusing cleaning efforts on those locations (as opposed to the entire school). This will help maximize cleaning supplies and focus cleaning efforts.
- Increase how often you clean the premises and any toys or items used, and clean and disinfect high-touch surfaces regularly. Stay on top of waste management. Empty garbage containers often.
- Clean high-touch electronic devices such as keyboards, tablets, and smartboards with minimum 60% alcohol (i.e., alcohol prep wipes) making sure your wipe makes contact with the surface for 1 minute for disinfection.
- Use water, household detergents and common disinfectant products as this should be sufficient for cleaning and disinfection in an educational setting.
- The Public Health Agency of Canada has also posted [guidance](#) on cleaning and disinfecting public spaces, including recommendations regarding cleaning procedures and protocols.

What about toys and other items?

- Keep enough toys out to encourage individual play. Items that may encourage group play in close proximity or increase the risk of hand-to-hand contact such as playdough should be avoided. Try to limit toys and other items to those that can be easily cleaned.
- Like other respiratory viruses, there is no evidence that the COVID-19 virus is transmitted via textbooks, paper, or other paper products. As such, there is no need to limit the distribution of books or paper based educational resources to students due to concerns about virus transmission.



Ministry of Health



BC Centre for Disease Control

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Non-medical inquiries (ex. travel, physical distancing): 1-888-COVID19 (1888-268-4319) or text 604-630-0300



Physical Distancing Ideas

Many school districts and independent school authorities have asked how the Provincial Health Officer's order prohibiting mass gatherings of more than 50 people applies in a K-12 school setting. The PHO order is primarily intended to prevent large groups of people from gathering in close quarters with one another at organized events. The order is not intended for schools, businesses, or living spaces.

The PHO recognizes that schools will require flexibility when it comes to providing school care and learning opportunities. This means that there can be more than 50 students and staff in a school at any given time if they are not all in one area at the same time and are actively engaged in physical distancing to the extent possible.

Understandably, physical distancing is challenging in a K-12 educational setting, particularly with younger children. At the same time, it is important that we do what we can to try to assist children and staff understand the importance of minimizing the frequency of physical contact with one another. From a public health perspective, there are no set ratios that prescribe the number of adults and children that can be present in the same space at any given time following ideas should be taken into consideration during planning:

- Avoiding close greetings like hugs or handshakes and remind children to keep their hands to themselves when possible.
- Help younger children learn about physical distancing by creating games. For example, put on some music and have children spread their arms side to side and spin around slowly trying not to touch their friends. Older children can be provided age appropriate reading material and encouraged to self-regulate.
- Take children outside more often, perhaps breaking children into smaller groups to maintain a degree of distance.
- Organize learning activities outside including snack time, play based learning, and play time.
- Integrate cross-curricular learning activities in outdoor settings into your lesson plans, and encourage younger children in play outside.
- Regularly clean and sanitize items that are designed to be shared such as manipulatives and digital devices
- Set up mini environments within the school to reduce number of children in a group, i.e., set up 2 or 3 learning areas for numeracy and literacy activities.
- Consider different classroom configurations to maintain distance between children (e.g. separating desks) or different locations in the school (e.g. different classrooms, gym or library, outside).
- Increase the space between children and staff during activities such as snack/lunch, i.e., move or separate tables, move chairs farther apart.
- When children want to use the same activity or redirect some children to another area.
- Set up distinct areas for children who may have symptoms of illness until they can be picked up and ensure these areas are sanitized regularly.
- Consider staggering snack and lunch time so you can accommodate smaller groups with more space. Discourage any food or drink sharing.
- Consider using educational videos and online programs as a part of learning so children can sit independently and distanced from each other.



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Provide reassurance, good listening and maintain routines

Children hear and take in a lot of the talk that is going on around them, especially as they get older.

- Reassure children about their personal safety and health. Tell children that it is okay to be concerned and there is a lot we can do to stay safe and healthy. Make sure the information is suitable for their age level.
- Let them know they can ask questions. Answer questions honestly but make sure that the information is suitable for their age level.
- Maintain familiar activities and routines, as possible, as it can reinforce the sense of security of children. At the same time, build physical distancing strategies into your learning activities.

Keeping parents/caregivers informed

- Keep parents and caregivers informed about what you are doing in your educational setting to take extra precautions, be responsive to children.
- Be clear about your policy that children need to stay home if they are sick.

UPDATED April 3, 2020

Parts of this document have been developed based on the Preventing and Managing Illnesses in Child Care Centres Peel Region <https://www.peelregion.ca/health/infectioncontrol/pdf/ENV-0227.pdf>



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