



# SAFE RETURN TO SCHOOL

A Public Health Toolkit for  
Windsor and Essex County



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### PREAMBLE

In response to the emergence of the novel COVID-19 virus, all school boards across Ontario closed their schools to staff and students as a measure to prevent the spread of the virus. Following the school closures, which took place in March of 2020, the Ministry of Education has been working on developing plans to reopen schools for the 2020-2021 school year. On June 19, 2020, the Ministry of Education highlighted three approaches to reopening schools. These approaches included:

1. Normal in-person school routines with enhanced public health protocols
2. Modified school routines with a combination of at-home learning and in-person lessons with enhanced public health protocols
3. At-home learning

Following that announcement, on July 30, 2020, the Ministry of Education released an updated approach for the reopening of schools across Ontario. This approach was based off additional public health knowledge gained around COVID-19, and sees the return of more students to in-person school routines, especially in elementary schools. This approach considers the importance of school reopening to children's learning and development - educationally, emotionally, and socially. When schools reopen, it will be imperative to keep the health and well-being of school staff and students at the forefront, through preventative measures and education around infection control.

The Windsor-Essex County Health Unit (WECHU) has prepared this document to support the safe reopening of schools across Windsor and Essex County, incorporating infection control and prevention along with pandemic preparedness. The eight steps listed in this document were developed using recommendations from reliable and credible resources including SickKids Hospital, the World Health Organization, Ontario's Ministry of Health, and contains information developed by the WECHU. The goal of enabling staff and students to return to a school environment where the risk of illness is minimized, and the spread of viruses (including COVID-19) is prevented, is best accomplished through a cohesive partnership between school boards and local public health.

*Disclaimer: This guidance document does not aim to replace recommendations from the Ministry of Education, Ministry of Health, or other stakeholders, but instead offers key support material based on evidence-based practices. It is important to note that as knowledge around COVID-19 evolves, directions and recommendations are subject to change. Should this occur, the Windsor-Essex County Health Unit will communicate relevant updates with the local school board authorities.*



## EIGHT STEPS FOR ENSURING SAFE SCHOOL OPERATIONS

### 1. Assess the risk for students and staff

This includes all areas of the school day, from the layout of the building, to staff and student interactions, and determine how these need to be adjusted to align with current public health recommendations. This process should also involve feedback from staff, students, and families who may have questions or concerns. Even after opening, it is important that schools continue to explore ways to make sure any potential risks are mitigated or minimized on a day-to-day basis. To understand the risk at your school, consider the following items.

#### Planning

- Does your school have a preparedness plan for reopening?
- Is there a communication plan to share information and changes quickly with your staff, students, and families during and after school hours?

#### Policies and Practices

- How will you communicate new policies and procedures for students and staff to ensure guidance related to safe physical distancing, cleanliness, and respiratory etiquette are followed?
- How will you link students, staff, and families with the right resources to keep everyone informed with credible information?
- How will you protect students and address issues of stigma or discrimination related to self-monitoring and self-isolation that may cause them to be absent from school?
- How will you protect students' education and learning if they are required to stay home?
- How will teachers be provided with approval of absences when required to isolate at home, and in what capacity?

#### Demographics of Staff and Students

- Are there any factors amongst staff or students that can put them at a higher risk of contracting the virus, such as age or underlying medical conditions?

#### Environment/Setting

- Can classes be taught outdoors if the weather permits?
- How can physical distancing be maximized in the classroom setting, cafeteria, hallways, and other shared spaces?
- Can the building be modified to accommodate for extra infection prevention and control measures (e.g. extra hand washing stations, wall-mounted hand sanitizers, and extra waste bins)?
- Can the building be modified to accommodate additional spaces that allow for improved physical distancing measures between students and staff (e.g. converting unused spaces to classrooms, removing chairs in the staff room)

- What activities need to be modified or cancelled to maintain physical distancing and infection prevention and control measures (e.g. music classes with shared instruments, sports with high contact, assemblies, library activities, shared theatre rooms, multipurpose rooms, and field trips)?
- How many students use the bus system to get to and from school, and how will changes to school transportation systems modify the school day?
- What do the points of entry and exit of the building look like? Is there enough room to ensure even flow of people in and out of the building? Does there need to be multiple start and end times of the school day so that there is less traffic?
- Is there a need to adjust meal times to ensure there are less people in the cafeteria at one time? Are there other spaces in the building that can be used for meal times to ensure adequate spacing of students during lunch hour?
- Is it possible to reduce class sizes, or use other rooms in the building (i.e. gyms, libraries) to accommodate class size and separate students?

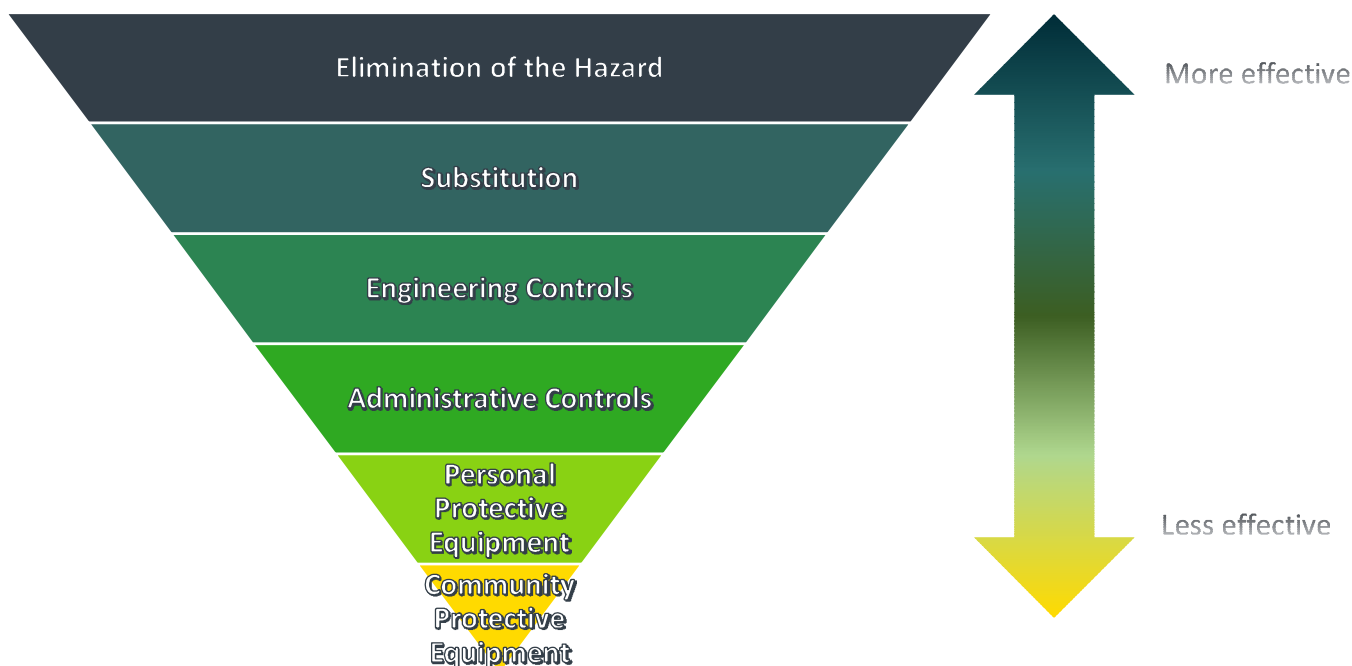
### Environmental Cleaning and Disinfecting

- What existing environmental cleaning procedures and protocols does your school have, and how should they be enhanced to align with public health advice?
- What surfaces are touched often (e.g., doorknobs, elevator buttons, light switches, lockers, shared desks and computers)?
- What is the plan to clean and disinfect high-touch surfaces frequently?
- How will you promote hygiene practices for all staff, students, and visitors, with an emphasis on handwashing and respiratory etiquette?
- How will you ensure that education and promotion of hand hygiene and respiratory etiquette is accessible, easy to read, and understandable for all grades levels?

### Behavioural Aspects

- How will you adjust outdoor activities and playtime?
- Are students, teachers, and parents well-resourced to accommodate for new safety measures, and be prepared to engage and support distance learning?
- Are some groups better suited for distance learning versus in-class learning? Are there protection measures in place to protect online spaces and learning?

## 2. Reduce the Risk of Spread



The [\*Hierarchy of Hazard Controls\*](#) is a recognized approach to reducing the risk of health hazards. An understanding of the strengths and limitations of each of these types of controls enables those tasked with planning to focus on the most effective methods first and then move to the next level of control. Below is a breakdown of the *Hierarchy of Hazard Controls* as it relates to reducing the spread of COVID-19 in a school setting as well as examples which are further described in the sections of this document.

1. Elimination of the hazard: Not permitting individuals into the school who have symptoms or who have come into contact with COVID-19 and implementing increased cleaning and disinfection protocols.
2. Substitution: Replace the high-risk activities (i.e. choir, contact sports, rotating classes) with low-risk activities (i.e. music theory, individual sports or drills, rotating instructors rather than classes).
3. Engineering Controls: Making changes to areas within the school to restrict access and contact (e.g. barriers), promoting physical distancing (e.g. altering the layouts of rooms, controlling flow of people into, around, and out of the school), and ensuring access to clean water, soap, hand sanitizers.
4. Administrative Controls: Creating policies and procedures, providing education, altering schedules of work as needed, class cohorting to reduce group sizes, and posting signage around the school that communicate expectations of those on the premises.



5. **Personal Protective Equipment:** Wearing of masks, goggles, gloves, and gowns is the final step in the hierarchy of controls that should be used after the other controls have been implemented.
6. **Community Protective Equipment:** Wearing of equipment by a person to prevent spread from an asymptomatic carrier to others; this last line of defense and its effectiveness is dependent on wide-spread use by an entire group and the ability of the group to adopt a series of measures like distancing and hygiene practices in addition to protective equipment.

### COVID-19 Self-Screening for Staff and Students

**Please see *Appendix C* for Screening Questionnaire for Parents/Caregivers and Staff Members.**

On-site screening of students and staff at school entry points can lead to significant delays and long lines of students and staff entering the building.

The following self-screening practices are required for each person entering the school environment before they leave their home:

- Parents/guardians should be instructed to complete the **Daily Screening Questionnaire for Parents/Guardians/Students Before Attending School** (*Appendix C*) for their children daily, before the child boards a school bus or before arriving at school by other methods.
- Staff should be instructed to complete the **Daily Screening Questionnaire for Staff Before Reporting to Work** (*Appendix C*) daily before reporting to work.
- If staff or students fail any part of the initial screening questionnaires, they should be directed to complete the [Ontario COVID-19 Self-Assessment Tool](#) to determine if further care is required. Parents are to complete this assessment tool with their children, or, seek advice from their health-care provider for further guidance.
- COVID-19 screening signage that clearly explains the screening process and the rules and conditions for entry should be posted at all entry points and in high visibility areas (see *Appendix B* of this Toolkit for examples).
- Children/youth are made aware, in non-stigmatizing age and appropriate language how to identify symptoms of COVID-19 and instruct them to speak to a staff member immediately if they are experiencing symptoms

All staff/parents/caregivers and students should be aware of signs and symptoms of COVID-19.

#### **Common Symptoms:**

- Fever (temperature of 37.8°C or greater)
- New or worsening cough

- Shortness of breath (dyspnea)
- Sore throat
- Difficulty swallowing
- New olfactory or taste disorder(s)
- Nausea/vomiting, diarrhea, abdominal pain
- Runny nose, or nasal congestion – in absence of underlying reason for these symptoms such as seasonal allergies, post nasal drip, pneumonia (confirmed or clinical evidence)

### **Less common symptoms:**

- Unexplained fatigue/malaise
- Delirium (acutely altered mental status and inattention)
- Unexplained or increased number of falls
- Chills
- Headaches
- Croup
- Conjunctivitis (pink eye)
- Multisystem inflammatory vasculitis in children
  - Presentation may include persistent fever, abdominal pain, conjunctivitis, gastrointestinal symptoms (nausea, vomiting and diarrhea) and rash

### **Other less common signs:**

- Unexplained tachycardia (increased heart rate), including age specific tachycardia for children
- Decrease in blood pressure
- Unexplained hypoxia (oxygen deprivation)

### **Maintain Physical Distancing**

Physical distancing is an effective measure to minimize the risk of person-to-person transmission of COVID-19. The typical classroom setting and other shared spaces need to be adapted to ensure there is as much space as possible between students and staff. At minimum students should be spaced 2 metres (6 feet) apart. Physical distancing is important in all circumstances regardless of mask use.

Remember that socializing during school time is crucial to child development and should not be discouraged or include extreme measures. Schools should consider these physical distancing measures:

- Providing as much space as possible between student's desks or personal spaces, in seating areas such as cafeterias and staff rooms, and for bus waiting lines to ensure physical distancing in shared spaces and lines.

- Limit the number of people entering and exiting the building at once.
- Avoiding activities that require large gatherings, such as assemblies or sport games.
- Staggering the school day schedule to minimize traffic in hallways.
- Consider keeping lunchtime in the classroom only or outdoors if possible to minimize chances of transmission. Ensure appropriate lunch monitoring to limit sharing of food and ensuring that handwashing procedures and proper removal of face coverings occurs.
- Educate and model to students the importance of maintaining space around others.
- Close or limit access to small communal spaces like lockers rooms.
- Daily physical activity at school should continue to be encouraged using alternate strategies, ideally without the use of shared sports equipment including balls, racquets, and other hands on materials. Additional guidance for cleaning requirements of all shared spaces (i.e. gymnasiums) in which sports or other activities are played must be followed. Activities that require frequent close or physical contact, such as football and wrestling are not recommended.
- Normal classroom activities including *Teaching Games for Understanding* (TGfU) must be altered to ensure appropriate physical distancing is in place.
- Encourage one-way travel in narrow hallways or aisles in the school by placing directional arrows on the ground.
- For younger students, take measures to maintain physical distancing between students during large group activities such as reading/circle time
- If possible, move group activities outside when space and weather permits
- For older children, assess whether existing infrastructure can be enhanced, even temporarily, to provide more space, for example, portables, repurposing existing space, or outdoor classrooms.

## Cohorting

Cohorting decreases the number of people each child is exposed to by limiting the number of students and staff they are exposed to each day. This is especially critical for the younger age groups as cohorting limits the mixing of students and allows for social interaction to occur more safely. For cohorting to be effective:

- Cohorts should remain together throughout the day. Do not mix cohorts.
- Whenever possible, the same teacher remains with the same student cohort and are not teaching students in other cohorts.
  - Students that require additional educational supports throughout the day (i.e. *Reaching Individual Success and Excellence* (RISE) programming) that involve them leaving their cohort should be planned in a manner that reduces as much variable interaction with other teachers and students as possible.

- Plans should be made to ensure physical distancing measures are in place during recess between cohorts, and to prevent mixing cohorts during washroom use.
- All staff and volunteers must work, or attend at, one school location only. Special consideration must be given to how occasional teachers will be assigned and utilized. A separate plan for this workforce should be developed and should include considerations on the variability of schools an individual works in and the appropriate use of PPE.
- Class aides and other support staff should limit movement between classrooms and remain with one cohort.

### Limit the Movement of Supply/Occasional Teachers Between Schools

It is recommended that supply/occasional teacher assignment plans are created with the acknowledgement of a potential increase in time off requests from teaching staff.

Supply/occasional teachers are considered essential visitors to the school, and should follow the same public health guidance as permanent staff.

The movement of staff from school to school can pose a risk of spread of the virus. For this reason it is recommended that supply and occasional teachers are restricted to only one school. Schools must consider measures that meet their teaching needs while minimizing the risk to staff and students.

- In those situations where limiting to one school is not possible, supply teachers should be restricted to working in a reasonable number of dedicated schools, or to a set geographic area in order to limit attendance at a high number of schools in different communities.
- Masks are required to be worn, without exemptions, by supply or occasional teachers who work in more than one school for a period of 14 days between schools. Following this period, exemptions can be applied as appropriate.
- Schools should maintain detailed daily records of supply/occasional teachers visiting the school. These records must be made available to public health for contact tracing purposes.
- Supply/occasional teachers must be trained on health and safety protocols.

### Promote Hand Hygiene and Respiratory Etiquette

Staff and students should be provided with targeted, age-appropriate education in proper hand hygiene and respiratory etiquette. Age-appropriate posters or signage should be placed around the school to promote proper technique. Respiratory etiquette aims to reduce the risk of transmitting droplets that may contain the virus directly onto other surfaces where they may be picked up by others. Recommendations for respiratory etiquette include sneezing or coughing into a sleeve or the elbow (not into the hands), or into a tissue that is immediately disposed of, followed by proper hand hygiene techniques.

Staff and students should have the supplies they need to conduct appropriate hand hygiene and respiratory etiquette and these supplies should be easily accessible. To assist with purchasing hand hygiene products, please refer to [Health Canada's list of skin cleaners and hand sanitizers](#) that meet Health Canada's requirements and are authorized for sale in Canada. Posters for staff and students promoting Hand Hygiene and Respiratory Etiquette are available in *Appendix B* of this Toolkit.

- **Liquid Soap and Warm Water** – Washing hands with liquid soap and warm water is the preferred method of cleaning hands and least likely to cause harm if accidentally ingested
  - For any dirt, blood, body fluids (urine/feces), it is preferred that hands be washed with soap and water to remove this “organic material”
  - If hand washing sinks are limited, consider providing portable hand washing stations outside of classrooms, or around the school to increase hand washing capacity.
- **Alcohol Based Hand Rub (ABHR)** with a minimum 60% alcohol concentration (60-90% recommended in community settings) throughout the school (external entry points, internal entries to frequently used rooms, rooms without sinks for handwashing) and/or **plain liquid soap** in dispensers, sinks and paper towels in dispensers.
  - ABHR can be used by children. It is most effective when hands are not visibly soiled
  - Safe placement and supervised use of ABHR to ensure proper use and to avoid consumption is important, especially for young children
- **Tissues and lined, no-touch waste baskets** (i.e., foot pedal-operated, hand sensor, open basket) are preferred to minimize contact surfaces. Ensure they are easily accessible throughout all areas of the school.
- **Provide support or modifications** to allow students with special needs to regularly perform hand hygiene as independently as possible.
- Proper hand hygiene should be practiced by anyone entering the school and should be incorporated into the daily schedule at regular intervals during the day, above and beyond what is usually recommended (e.g., before eating food, after using the washroom).

### Environmental Cleaning and Disinfecting Procedures

Commonly used cleaners and disinfectants are part of a broad approach to prevent the spread of infectious diseases. The use of disinfectants with a Drug Identification Number (DIN) is recommended to limit the spread of COVID-19. A DIN is an 8-digit number located on the package or bottle of disinfectant and this indicates that it has been approved for use by Health Canada. Health Canada has created a [list of approved hand sanitizers and disinfectants](#) that prevent the spread of COVID-19.

- Wherever possible, use a pre-mixed solution of cleaner and disinfectant.

- Ensure that you check the expiry date when using any cleaning or disinfectant products or mixtures.
- Wear gloves and any other personal protective equipment (PPE) as recommended by the manufacturer.
- Follow the manufacturer's instructions for preparing the solution and allow adequate contact time for disinfectant to kill germs.

According to Public Health Ontario's [Cleaning and Disinfection for Public Settings](#), frequently touched surfaces are more likely to be contaminated and it's important to **ensure thorough cleaning of these surfaces at least twice a day, or when visibly dirty.**

Schools should create a checklist identifying their frequently touched surfaces and develop a plan to clean and disinfect these surfaces more frequently.

Here are some common high-touch surfaces to consider as a starting point:

- Handles/door knobs
- Light switches
- Hand railings/grab bars
- Classroom desks and chairs
- Shared toys, books, or equipment
- Cafeteria tables and chairs
- Telephones/Intercom panels
- Computes, keyboards, mice
- Lockers
- Handheld digital devices
- Pencil sharpeners
- Faucets
- Toilet doors and handles
- Kitchen appliances and surfaces in staff room
- Water fountains knobs and push buttons
- Hand sanitizer dispensers

It is also recommended that students only have access to toys and shared teaching materials which are easy to clean and disinfect (e.g., avoid plush toys, sticks, pine cones). Ensure that cleaning and disinfecting products, such as sanitizing wipes, gloves, and paper towels are easily accessible for use.

Shared equipment, such as those used during play as well as arts and craft items should be cleaned at the end of each activity before being used by the next group.

### **Personal Protective Equipment (PPE)**

Common types of PPE include:

- Masks/Face Covering
- Eye Protection
- Gloves
- Gowns



It should be noted that even though the use of PPE is the most recognizable control depicted above in the *Hierarchy of Hazard Controls* for COVID-19 prevention, it is considered a final step and should not be relied upon as a primary method of protecting students and staff from the spread of diseases and viruses, such as COVID-19.

School boards should secure an adequate amount of PPE and cleaning supplies that will support their current and ongoing operations. **All staff must be trained on the care, use and limitations of any PPE that they use.**

Is it expected that PPE is provided to those who work in close contact with special needs students to perform their regular job duties. PPE includes a procedural/surgical grade mask and eye protection in the form of goggles or a face shield. If necessary, for example, in situations where physical distancing cannot be maintained or direct contact is required with a student for positioning and assistance with eating or toileting, gloves should also be provided.

A series of training videos from [Public Health Ontario](#) can be used to instruct staff on the proper use of PPE. Staff can also refer to Public Health Ontario's [Recommended Steps for Putting On and Taking Off Personal Protective Equipment](#).

### PPE Kits

In addition to a regular supply of PPE, "PPE kits" should be available in each school in the event that a student, staff, or essential visitor becomes ill while at the school. This PPE kit is intended for use by the ill individual AND the staff member(s) attending to them. It should contain:

- Instructions on its proper use on the outside or inside of the kit,
- Alcohol-based hand rub,
- Disposable gloves,
- Disposable surgical/procedural masks,
- Eye protection,
- Disposable gown

### Non-medical or Cloth Masks and Face Coverings

Refer to Public Health Ontario resource for [how to properly wear and take off masks](#).

As per the Ministry of Education Reopening Schools Guidelines (July 30, 2020), Students in Grades 4-12 are required to wear a non-medical or cloth mask indoors in school, including in hallways and during classes. All school-based staff will be required to wear masks, with reasonable exceptions for medical conditions.

- Masks may not be tolerated by everyone based on underlying health behaviour issues or beliefs. Consideration should be given to reducing any possible physical or psychological injuries that may be caused by wearing a face covering (e.g., interfering with the ability to see or speak clearly).
- For split grade classes, specifically for grades three/four, masks should be mandatory for the entire class (not just the grade four portion of the classroom).
- Please see information about the [use of face coverings on the provincial COVID-19 website](#).
- Masks should be changed if visibly soiled, damp, or damaged.
- It is recognized that parents may choose to send a cloth mask to school for their children to wear. In such cases, the parents and students themselves would be responsible for the safe use during the school day and ensuring cleanliness of the mask.
- Students should be advised to bring a spare mask in case there is a need to change their mask throughout the day.
- Staff and essential visitors must wear a mask and would be responsible for safe use and cleanliness of the mask and proper disposal.
- Workers who wear PPE for protection against workplace hazards other than COVID-19 must continue to use that PPE as required. This includes gloves for using approved cleaning and disinfecting products, as well as hard hats, and hard-toed shoes as appropriate.

### Reusable Homemade Cloth Masks

If an employee has purchased or created their own reusable cloth mask for use in the workplace, this should be permitted provided that the employee uses it properly and is responsible for laundering and replacement. The use of such masks by students is appropriate provided the parents and students themselves are responsible for safe use during the school day and ensuring cleanliness of the mask. When worn properly, a person wearing a non-medical mask or face covering can reduce the spread of their own infectious respiratory droplets.

#### Non-medical face masks or face coverings **should**:

- allow for easy breathing
- fit securely to the head with ties or ear loops
- maintain their shape after washing and drying
- be changed as soon as possible if damp or dirty
- be comfortable and not require frequent adjustment
- be made of at least 2 layers of tightly woven material fabric (such as cotton or linen)
- be large enough to completely and comfortably cover the nose and mouth without gaping

#### Non-medical masks or face coverings **should not**:

- be shared with others
- impair vision or interfere with tasks

- be made of plastic or other non-breathable materials
- be secured with tape or other inappropriate materials
- be made exclusively of materials that easily fall apart, such as tissues
- be placed on anyone unable to remove them without assistance or anyone who has trouble breathing

### Mask Storage

#### Proper Storage of Masks while Indoors

Masks can be removed during assigned snack, recess or lunch breaks. Masks should be stored in a designated spot, separate from other masks, when not being worn.

The following are recommended steps for mask use and storage while indoors:

- Prior to removing the mask hands should be cleaned with soap and water or alcohol-based hand sanitizer. Mask should be removed with clean hands and folded in half so that the outer part of the mask faces inwards. This ensures that the contaminated surface does not come into contact with anything during storage.
- Masks can be stored in individually labelled sealed containers or washable/disposable sealable bags kept in student desks or in personal lockers/cubbies.
- Students may label their mask to indicate top/bottom and front/back to remind them of the proper way to wear the masks when putting it back on.

#### Mask Use and Storage to and from Recess

It is recommended that masks be worn at all times indoors for those Grade 4 and up, including while in hallways. The following are recommended steps for mask use and storage to and from outdoors for recess:

- Students are to keep their masks on until they exit the building for outdoor recess.
- Upon exiting, a staff member should be present at the doorway with a container of labelled bags. One by one, students are to remove their mask with clean hands and fold it in half so that the outer part of the mask faces inwards. Students are to place their mask in the labelled sealed bag and place the bag back in the container.
- Prior to entering the building, a staff member should be present at the doorway entrance with the same container of labelled and sealed masks. One by one, students are to retrieve their bags with hands cleaned with soap and water or alcohol-based hand sanitizer, and don their mask prior to entering the building.
- With hands cleaned by soap and water or alcohol-based hand sanitizer, the staff member may help to retrieve the labeled bag from the container for students.

#### Mask Use and Storage to and from School

It is recommended that all riders (students, monitors) and drivers wear a face mask or covering at all times while on board the bus, except where exemptions apply. Masks are also to be worn indoors at all times, including in classrooms and in hallways.

The following are recommended steps for mask use and storage to and from school:

- For students who are riding the bus to school: Students can don their mask prior to leaving their home for the bus stop or prior to arriving at their bus stop. Older students should continue to keep the mask on upon exiting the bus to enter school since masks are to be worn for the duration of the day while indoors for those Grade 4 and up. Younger students can remove their masks and store in a clean, sealed labeled bag or container.
- For students who are riding the bus from school to home: Older students should keep the mask on from the point of exiting the school building and through the duration of the bus ride until they reach their destination and exit the bus. Younger students can don their mask with clean hands prior to boarding the school bus. Students can choose to keep their mask on until they are home to remove it, or remove it with clean hands upon exiting the bus. In either instance, the mask should be stored in a clean, sealed labeled bag or container once removed.

### **Eye Protection (Goggles/Face Shields)**

Eye Protection should only be used by staff when they are interacting with a person who is producing respiratory droplets or other body fluids to a degree that is likely to get on the clothes, skin, or face of the staff member/caregiver. Goggles and face shields provide a barrier to protect your eyes and face from expelled splashes, sprays, and bodily fluids by a contaminated person. A face shield is a device that has a transparent window or supported visor in front of the face to shield the eyes and face. If goggles are used, they must fit securely against the face with no openings. Goggles should be reusable and disinfected between uses.

Face shields should cover the front and sides of the face and can be reusable or disposable. When removing the face shield, it should be cleaned and disinfected between uses if it's reusable, or discarded into an appropriate waste receptacle if not reusable. Face shields should be used by school nurses and delegated staff when they are monitoring or assisting a symptomatic person who is producing heavy respiratory secretions through coughing or lack of control.

To protect against COVID-19, wearing a face shield alone will not be effective - it is recommended that a face covering be worn as well. A face shield should not be worn in place of

a face covering at any point in the school day. A face shield should be used as additional PPE in situations which require added protection from respiratory droplets.

### **Gloves**

Hand hygiene is essential to ensure gloves are utilized properly. It is recommended to wear gloves only when there is potential contact with bodily fluids such as blood, urine, stool, vomit, or phlegm. Gloves must be discarded after each use. Otherwise, many activities can be done hygienically with proper handwashing and do not require gloves.

If recommended by the manufacturer for health and safety reasons, rubber gloves should be worn when using cleaners and disinfectants.

### **Gowns**

Gowns protect the clothing of the individual wearing them. A disposable gown should have long sleeves, cover the body front and back from the neck to the thighs, overlap in the back, fasten at the neck and back and be easy to put on and take off.

Gowns should be used by staff as part of a PPE kit if they must come into close contact with a student or staff member who is producing respiratory or other body fluids to a degree that is likely to get on the clothing of the caregiver.

Refer to Public Health Ontario's [Recommended Steps for Putting On and Taking Off Personal Protective Equipment](#) for information on putting on and taking off a gown.

### **Hand Dryers and Portable Fans**

The use of hand dryers in school washrooms continues to be permitted provided that appropriate physical distancing measures are in place during use of the facilities. There is no evidence to suggest that hand dryers are effective at killing the COVID-19 virus.

The use of portable fans (both table top and pedestal) may play a role in transmitting COVID-19 by propelling infectious droplets beyond 2 metres. Their use in classrooms is currently not recommended. If it is deemed necessary to use a portable fan, it is recommended that the fan setting is set to "low" in order to minimize turbulence and reduce particle spread.

## **3. Have Policies in Place**

Schools must develop the necessary policies to manage visitors, staff, and students in order to prevent the spread of COVID-19 in the school environment, and appropriately contain the virus in the event that a student or staff person becomes sick. This includes policies around daily self-screening prior to entering the building, recommendations for staying home if sick, and a plan to address illness that arises amongst students or staff.

*The Ministry of Health and Ministry of Education will be providing outbreak guidance for schools. This will include the requirements for notification to public health.*

### Attendance Policies

If students or staff are advised to self-isolate at home, policies should be in place to support staff and families by:

- Consider making school attendance and sick leave policies more flexible to accommodate for varying needs.
- Remove any rewards associated with perfect attendance for staff or students.
- Policies should protect staff and students at higher risk due to medical conditions or age who would benefit to stay home without fear of reprisal, and by offering virtual learning or telework options.
- Reducing stigma and discrimination by educating students, families, and staff about the importance of staying home when someone is sick.
- Creating policies that help direct the assignment of homework that ensures students do not fall behind if they must self-isolate at home. The homework should be both meaningful and maintain a sense of belonging. Consider the flexibility of missed work due to illness and isolation.
- Creating policies to help staff recognize and monitor symptoms for students. Symptoms to look out for include fever, cough, shortness of breath, sore throat, runny nose, nasal congestion, headache, and a general feeling of being unwell.
- Creating policies to separate students and staff who become ill at school. As per the Ministry of Education's Guide to Reopening Ontario's Schools, July 30, 2020, any student or staff that develops symptoms of COVID-19 while in school should be immediately separated from others, in a separate room where possible. The protocol should include guidance on monitoring student and staff health, maintaining contact with the local health units, and updating emergency plans and contact lists. All students, staff, and families should be made aware of this policy.
- Consider waiving doctor's notes due to absences for staff.

### Protecting High Risk Students and Staff

Everyone is at risk of getting COVID-19 if they are exposed to the COVID-19 virus, including children. However, some individuals are more likely than others to become severely ill and develop complications due to age or underlying health conditions. Higher-risk populations include those who:

- Are 70 years old or older
- Are getting treatment that weakens your immune system (e.g., chemotherapy, receiving medication related to transplants, corticosteroids, TNF inhibitors).



- Have a condition that weakens the immune system (e.g., lupus, rheumatoid arthritis, cardiac and lung disorders, other autoimmune disorder).
- Have a chronic (long-lasting) health condition (e.g., diabetes, emphysema, asthma, heart condition).
- Regularly go to a hospital or health care setting for treatment (e.g., dialysis, surgery, cancer treatments).

For more detailed information about high risk groups, please visit the [Government of Canada webpage](#) . (Information available in multiple languages).

If any staff (including members of their household) or students self-identify as being at a high risk of severe complications related to COVID-19, it is recommended to:

- Create a plan to address requests for alternative learning arrangements (e.g., remote learning) for students.
- Create a plan to address requests for work reassignments or accommodations for staff including defining criteria for accommodation.
- Review and update internal policies and procedures related to sick leaves to reflect changes related to COVID-19.

### Procedure for Symptomatic Staff and Students

If a student or staff member becomes ill while at school, they must be isolated immediately. If the individual is in need of urgent care, contact emergency services (911). Allocate a room in your school to be used should a student or staff member become ill. Make appropriate PPE available in this room.

Keep daily records to support contact tracing efforts by Public Health. Include records of classes and seating charts, bus cohorts, approved visitors to the schools (e.g., supply/occasional teachers or custodians).

Staff/children who are being managed by the WECHU (e.g., confirmed cases of COVID-19, household/close contacts of cases) should follow instructions provided by the Health Unit to determine when to return to the school.

Staff:

- A staff member who becomes ill must be sent home immediately and should be directed to use the [online self-assessment tool](#).
- The staff member should don a mask (if not already wearing one) until they have left the premises, and remain isolated from others.
- The staff members work area(s) should be cleaned and disinfected immediately after the staff member has left the premises. Any items used by the staff member throughout the day should be cleaned and disinfected. Items that cannot be properly cleaned, such as

books, should be sealed and stored away for at least 7 days to ensure the virus is no longer able to survive on these surfaces.

### Students:

- If a student becomes ill, approved individuals to pick up the student must be contacted immediately.
- If a separate room is not available, student must be isolated in a supervised area away from other students and minimum of 2 meters (6 feet) from all others. Schools should have a plan for student isolation that includes the possibility of needing to isolate more than one student at a time.
- Students should wear a mask (unless 5 years and under) if they are able to use the mask properly (e.g. donning and doffing carefully, avoiding touching while on).
- Staff caring for the ill child should wear a surgical mask and eye protection regardless of physical distancing.
- Hand hygiene and respiratory etiquette should be emphasised while the student is waiting to be discharged from school. Ensure there are enough supplies such as tissues, waste receptacles, and hand sanitizer.
- Clean and disinfect the area immediately after the child with symptoms has been sent home. Any items used by the student throughout the day should also be cleaned and disinfected. Items that cannot be properly cleaned, such as books, should be sealed and stored away for at least 7 days.
- Parents of ill children with symptoms of COVID-19 should be instructed to talk to their primary care provider.

### Modification of School Activities

#### Gatherings/Field Trips

In-person group events, such as assemblies or field trips off school property requiring group transportation should be postponed until public health data suggests otherwise. It is recommended that schools:

- Arrange for virtual group events, gatherings, or meetings. Avoid in-person large gatherings
- Pursue virtual activities and events in lieu of field trips, student assemblies, special performances, school-wide parent meetings, etc.

#### Health and Physical Education

For its physical and mental health benefits, efforts should be made to meet the expectations of the Active Living and Movement Competence strands.

- Physical education classes should take place outdoors. Participation in activities outdoors does not require masks or face coverings, but should support physical distancing and also limit the use of shared equipment unless, absolutely necessary. Proper hand hygiene should be enforced before and after participating in physical activity as well as equipment use. The use of masks or face coverings in indoor spaces during physical education classes is not recommended. Traditional spaces like gymnasiums may be utilized for alternate purposes during this time. When the outdoors is not a feasible option, other alternatives to learning about or participating independently in active living and movement competence lessons should be utilized.
- If the outdoor space needs to be accessed by multiple classes at the same time, it is advised to assign a class their own “quadrant” of space to stay within. This will help reduce contact between cohorts. These spaces can be marked by equipment, paint lines, or landmarks on the school property.
- It is advised that a hand washing or sanitation station be accessible and utilized by all students upon entry to and from the outdoor activity space.

### Change Rooms

Change rooms should not be utilized. Encourage students to wear clothing and shoes that allow them to be active. Showers and lockers should be closed off for student use until further notice. Toilets and sinks should remain open with proper physical distancing in place.

### Masks or Face Coverings

The use of masks or face coverings is required at all times indoors during the school day but is not required outdoors, where droplet transmission is less likely. Physical distance should still be maintained between students and staff.

If low-exertion activities are being conducted indoors, a mask or face covering can be used. This could include situations of Daily Physical Activity taking place in a classroom. In DPA, the rate of physical exertion is relatively low (e.g., stretching at their desk, marching on the spot or around the classroom), making the use of a mask or face covering safe for the user. It is not advised to wear a mask or face covering when doing high exertion activities (i.e. physical education class) which require the user to breathe heavier or more rapidly.

If masks or face coverings are being donned and doffed during physical education classes (e.g., outdoors, worn when not participating and removed when participating), hand hygiene should be practiced before touching the mask or face covering.

### Equipment Use

Using no equipment provides the lowest risk of virus transmission, therefore the use of shared equipment should be minimized as much as possible. Hand hygiene with soap and water or sanitizer before handling equipment should be enforced. Equipment that is difficult to disinfect

between use should not be used under any circumstance (e.g., gloves, plush items, jerseys or other clothing).

If equipment is deemed to be essential for use, each student should have their own piece(s) for the duration of the activity or the class. Following the class, all used equipment should be disinfected prior to storage, or the use of the following class. Equipment that doesn't need to be handled by students (e.g., floor markers, agility ladders, hurdles, pylons) can be used to support physical activity. Staff handling this should practice hand hygiene before and after handling, and disinfect the items before storage.

Disinfect teaching supplies, as used. These items may include clipboards and writing utensils for attendance, white boards and markers, and storage bins for equipment.

Students should be encouraged to bring their own water bottle, labelled with their name on it, to use during activity. Reminders around not sharing personal items like water bottles may need to be issued, especially in younger grades.

### Contact Between Students

Sports and activities that involve high levels of interpersonal contact are not permitted at this time. High risk sports may include, but aren't limited to, wrestling, rugby, football, and basketball. Lower risk sports may include, but aren't limited to, individual running events, soccer, volleyball, bowling, golf.

Low contact and no contact activities should be prioritized for physical activity, as wellness breaks during class or in physical education classes outdoors. Individual skill-building drills and movement concepts, yoga / stretching, track and field, as well as play-based games or teaching games for understanding are some examples of low contact activities.

Interpersonal greetings or celebrations should not be permitted (e.g., high fives, hugging, shaking hands).

### Sports and Clubs

To reduce contact between students of different cohorts, intramural and competitive sports and clubs are not permitted at this time.

When planning activities, consider the following points:

- Can the activity be modified to eliminate the use of equipment, or reduce sharing of any required equipment?
- Can the activity be modified to increase physical distancing?
- Can the activity be modified to decrease the number of students participating at one time?

- Can students who are not participating be spread out for better physical distancing (e.g., not sitting on one bench or one side of the field)?
- Include students in decisions around physical activity choices for autonomy, communication, and cooperation

### Outdoor Playgrounds

As part of your efforts to adapt the school environment to prevent the spread of COVID-19, consider adjusting the use of playgrounds and school grounds. Emphasis should be placed on cohorting students and limiting the size of groups using the playground, and regular cleaning and disinfecting of equipment after each use.

Staffing considerations for outdoor time should be considered to ensure ongoing and regular supervision and education of students outdoors.

### Music Instruction

Schools should consider beginning the school year by teaching music using non-performance methods. A progression to performance methods may occur when appropriate with consideration given to specific mitigation measures to minimize the possibility of COVID-19 transmission such as:

- Outdoor music and band practices (weather and space permitting)
- Increased distances between those who are singing or are playing a brass or wind instrument due to the potential for the increased distance that droplets may be projected.
- Not sharing instruments or accessories
  - If shared, clean as per standard protocol for the instrument after each use and between users. Use a disinfectant or alcohol wipe when possible
- Do not share mouthpieces, reeds or harmonicas

## 4. Create Communication Plans and Staff Training

It is the responsibility of administration to communicate with staff, students, and families so that they are aware of the procedures in place to keep everyone safe. The following communication protocols should be implemented, where applicable, to minimize the risk of COVID-19 transmission in schools:

- Include relevant signage at the entrance and throughout the building (e.g., self-assessment, physical distancing, flow of students and staff, hand washing, wearing of masks if necessary for visitors). Signage can be found in *Appendix B* of this Toolkit.
- Provide visual cues to direct traffic in hallways and stairwells.

- Provide staff with information and training for all new procedures, including the interaction between staff and students in the classroom and throughout the school day (i.e., cohorting).
- Provide support to teachers on developing material to communicate all new procedures to students, specifically the younger age groups, as it relates to respiratory etiquette, hand-hygiene, physical distancing, and other protective measures. Please see *Appendix B* of this Toolkit for school-friendly signage in English as well as French and Arabic.
- Provide families with information about how these new policies and protocols will effect their day-to-day activities at the schools. This can also be discussed during parent council meetings to provide a space for parents to voice their views or concerns.
- Create and share new policies and procedures for all relevant issues related to COVID-19, as indicated in the section above (*Have Policies in Place*), such as monitoring for absenteeism, cleaning protocols, and how to properly handle a student showing symptoms at school.
- Consult with Joint Health and Safety Committees (JHSC) regarding back to school plans to ensure risk assessments and building inspections are completed.
- Ensure adequate mental health and wellness promotion and support for staff and students.

### 5. Student Transportation

Please note that the Windsor-Essex County Health Unit has provided consultation and specific guidance to the [Windsor-Essex Student Transportation Services \(WESTS\)](#), (also known as Buskids) to address student transportation requirements related to COVID-19.

It is important that strict exclusion policies be in place for symptomatic students, drivers, monitors, or aides.

- School bus drivers, monitors, and aides must not report to work if they have symptoms associated with COVID-19 or they think they have been exposed to COVID-19. A screening tool for staff is provided in *Appendix C* of this Toolkit. Staff should report immediately to their employer, complete the online [self-assessment tool](#) and follow the instructions provided.
- Students who have symptoms associated with COVID-19 or think they have been exposed to COVID-19 must not take student transportation and should stay home. A screening tool for parents/guardians is provided in *Appendix C*. Online [self-assessment tools](#) are available and are recommended.
- If a student becomes ill while at school, they must be picked up by a parent/guardian or caregiver and not be permitted to board the bus to return home.
- Health and Safety measures should be clearly communicated to parents and guardians of students to ensure their comfort with the adapted transportation system and receive their support in having students understand and follow guidelines.



### Environmental Cleaning of the School Bus

The Health Unit recommends that a COVID-19 cleaning protocol be developed that details the cleaning and disinfection process. The protocol should identify:

- Approved cleaning and disinfection products (for a list of hard surface disinfectants authorized by Health Canada, please visit their [website](#)), required PPE (e.g., gloves, masks), and other supplies (e.g., paper towels, waste disposal bags) to be used and instructions on their proper and safe use including safe disposal of used cleaning items.
- Hand hygiene requirements for drivers (e.g., before shift, after assisting a student or touching any of their belongings, after shift, or as otherwise needed).
- List of all surfaces to be cleaned, and frequency of cleaning. School boards should reference guidelines from Health Canada and [Public Health Ontario](#) when developing these protocols. Special attention should be given to high touch surfaces such as:
  - Seats
  - Inside hand railing
  - Interior windows and wall section below passenger windows
  - Driver cockpit (keys, steering wheel, shift lever and controls, dashboard, turn signals and wiper stalks, seat and seat adjuster, seat belt).
- In addition to regular cleaning of school bus interiors, to the extent possible, it is recommended that operators reduce the number of drivers per vehicle and ensure that the same drivers use the same vehicle and keep the same work schedules in order to limit contacts as much as possible.
- Consider opening windows on the bus to allow for good ventilation, weather permitting.

### Physical Distancing

- The Health Unit is recommending that parents and students are advised to wear a non-medical face mask at bus stops if appropriate physical distancing cannot be maintained. It is understood that certain bus stops have a higher number of parents and students than others, particularly young students, and that maintaining appropriate physical distancing while waiting for the bus may be a challenge.
- It is recommended that the seat directly behind the bus driver remains empty to maintain physical distancing.
- To the greatest extent possible, physical distancing measures of 2 metres between riders should be implemented in school buses. This includes 2 metres of distance between riders from front to back, as well as side to side across the aisles.
- Children from the same household are permitted to share a bus seat.
- Where feasible windows should be opened to allow for increased ventilation.

### Personal Protective Equipment

- The use of personal protective equipment (PPE) should be considered in relation to other measures implemented to prevent transmission of COVID-19.
- Even with appropriate physical distancing measures in place, drivers and riders are sharing an enclosed space with limited opportunities for adequate ventilation. For this reason the WECHU is recommending that all riders on the bus wear a mask or appropriate face covering while riding on the bus with appropriate exceptions for those two and under and/or for medical reasons.
- Exemptions should be permitted for those whose vision will be impaired or if the wearing of a face mask/covering creates a health and safety hazard. To the extent that a face shield does not compromise visibility or create a health and safety issue, it can be considered as an option. Review Transport Canada's guidance [Personal Protective Equipment and their uses by Commercial Vehicle Drivers](#).
- The driver's choice of PPE should not interfere with their ability to access vehicle controls, or hinder or distort the driver's view – directly or through mirrors - of the road, students around the bus, or of passengers

### Rider Capacity and Alternative Transportation

- Students are encouraged to use active and safe routes to school (e.g. walking, cycling) where possible, or private transportation if available, to ease pressure on transportation demand.
- It is recommended that school boards and consortia survey parent intentions to use student transportation to assess service needs (e.g., a transportation opt-in process) before the start of the school year.
- School boards and consortia should review transportation eligibility policies (e.g., walk distances) and prioritize transportation capacity for students who would be unable to reach school without it.
- School boards should provide parents and students with guidelines for safe use of bus transportation.
- Accommodations for immunocompromised and otherwise medically vulnerable students, and students with special transportation needs should be addressed (e.g., arrange separate vehicle, assign seating at front of school bus).
- School bus drivers, monitors, and student aides should be informed about these new health and safety measures.
- School boards and consortia should develop communication protocols to report suspected or confirmed cases of COVID-19 of school bus drivers, monitors, aides, and transported students to the Windsor-Essex County Health Unit.

### Pick up and drop off at school:

- Strict pick up and drop off protocols should be put in place to limit interaction and crowding at drop off or pick up times and to ensure safety of students and families.
- Parents should be discouraged from exiting their vehicle to drop kids off. Drop offs should be one car at a time moving the line quickly under supervision.
- For parents escorting children to school on bike or walking, limit the number of people accompanying each student to one person. Educate parents to leave immediately and do not allow for any social interaction during pick up and drop off between parents or between parents and teachers.

### During a Trip

- It is recommended that signs are posted at the school bus loading door and within the school bus reminding parents and students about the rules for boarding, riding in, and unloading from the bus. Recommended rules of ridership include:
  - Do not board the bus if feeling unwell
  - Always follow instructions given by the driver.
  - Load the bus from back to front
  - Unload the bus from front to back
  - Sit only in the seat assigned to you. Do not move to a different seat during the bus ride.
  - Do not share a seat with someone who does not live in your household
  - Avoid touching the seats and windows as much as possible
  - Do not open or close the bus windows unless instructed to by the driver
  - Do not throw objects while in the bus
  - Do not eat while in the bus
  - If you feel unwell during the trip, tell the driver right away.
- Bus drivers must clean their hands using an alcohol-based hand rub (ABHR) with at least 60% alcohol after assisting a child to their seat, touching wheelchairs or other assistive devices, or having other direct contact with children, as needed throughout a trip. ABHR should be stored outside the reach of children.

### At the End of Each Trip

- Repeat a thorough cleaning of high-touch surfaces with appropriate disinfectants after all students are unloaded off the bus.
- Bus drivers who start to experience symptoms after completing a trip should stay home, self-isolate, and advise their employer so that additional steps can be taken to protect other drivers using the school bus.

## 6. Third Party Food Vendors

### Third Party Food Services

Third party food services refers to both food vendors that cater school programs, such as hot lunches, and school nutrition programs, such as the Student Nutrition Program (SNP).

School nutrition programming remains a crucial support to students and families. It is important that both catered school nutrition programs continue to offer healthy food choices, as outlined in the *School Food and Beverage Policy* and *Student Nutrition Program Nutrition Guidelines* as appropriate, and made available with additional health and safety, physical distancing, and hygiene measures in place. For additional suggestions on menu planning, please contact [nutrition@wechu.org](mailto:nutrition@wechu.org) to speak to a Registered Dietitian.

The following recommendations provide guidance on how to safely operate both the SNP and catered lunch programs. Please note that the ministry's recommendation for third party food service delivery refers to the "grab and go" format as the preferred model.

### ***Student Nutrition Program (SNP)***

#### Type of Food Served

- All food items must be pre-packaged. Refrain from serving loose food items, such as pre-cut vegetables that are not wrapped or in packaging.

#### Delivery Model

- Preferred "Grab and Go" format to follow a bin-type program for ease of delivery and access.
- Provide meals or snacks as individual, pre-packaged items delivered in a bag held in bins, or, serve the pre-packaged items loose in bins to provide students with choice.
- One individual (such as a teacher or volunteer) can hand out the bags or individually wrapped food items to each student to minimize the number of hands reaching into the bins if self-service is prohibited.

#### Infection Prevention and Control Considerations

- The individual handing out the prepackaged bags or individual food items must wash their hands or use an alcohol-based hand sanitizer before doing so.
- Students are to wash their hands with soap and water, or use hand sanitizer prior to self-service and eating.
- Do not provide unpackaged loose food with tongs on a napkin.

- If allowing for self-service, educate students to grab one pre-packaged item or prepared bag from each bin only, and refrain from touching other items in the bin that they are not grabbing for themselves.
- For self-service, consider having students line up 2 metres apart in a line, or, have one student at a time come up to the bins.
- Students and staff should wash their hands with soap and water or use hand sanitizer after discarding leftovers and packaging before returning to their desks.
- All surfaces, bins, and containers for food must be cleaned and sanitized prior to and after each use.

### Healthy Suggestions for Pre-Packaged Food Choices

The emphasis on pre-packaged or individually wrapped foods may result in increased consumption of processed foods high in sugar, salt, and/or saturated fats. The list below are suggestions for healthy prepackaged food items.

#### *1. Whole Grains*

- a. Pre-wrapped whole grain crackers
- b. Pre-packaged whole grain pita chips
- c. Individual containers of cereal
- d. Individually wrapped small whole-grain muffins
- e. Low-sugar granola bars
- f. Rice crackers
- g. Individual bags of unflavoured, unsalted popcorn

#### *2. Protein*

- a. Individual cheese servings (cheese strings)
- b. Low sugar yogurt cups or tubes
- c. Individual containers of fortified soy milk and cow's milk
- d. Packaged pre-boiled eggs
- e. Low sodium canned fish
- f. Individual containers of hummus
- g. Individual bags of roasted unsalted soy nuts or other legumes

#### *3. Vegetables and fruit*

- a. Pre-cut and wrapped fruits and vegetables
- b. Fruit with a "natural" packaging (i.e banana)
- c. Canned fruit packed in water
- d. No sugar-added applesauce
- e. Individual packages of roasted vegetables or fruit (snap peas, carrots, beets)

- f. Individual small containers of guacamole

### ***Food Caterers***

#### Type of Food Served

- Continue with current vendors as appropriate but ensure there is no “family-style’ or buffet service. For example, food should arrive in individual takeout containers for each student.

#### Delivery Model

- One person (such as a teacher, volunteer) should hand out the takeout containers to each student, or, each student is to “self-serve” by grabbing one container of food for themselves and returning to their seat.

#### Infection Prevention and Control Considerations

- The individual handing out the containers of food to each student must wash their hands or use an alcohol-based hand sanitizer before doing so.
- Students are to wash their hands with soap and water, or use hand sanitizer prior to self-service and eating.
- Do not provide unpackaged loose food with tongs on a napkin.
- For self-service, consider having students line up 2 metres apart in a line, or, have one student at a time come up to grab their lunch.
- Students and staff should wash their hands with soap and water or use hand sanitizer after discarding leftovers and packaging before returning to their desks.
- All surfaces, bins and containers for food must be cleaned and sanitized prior to and after each use.

#### Cafeterias

- Increase accessible signage and floor markings in cafeterias to remind students/staff to practice physical distancing and have unidirectional flow of foot traffic in narrow aisles/stairways
- Limit seating areas in cafeterias (for example, cordoning off spaces, removing seating). Ensure at least 2 metres distance between seats in the cafeteria.
- Consider the use of cohorts for cafeterias during designated times
- Remove shared condiments and utensil stations



For further guidance on food safety and infection prevention and control practices for delivery and service of food from third party food vendors, contact the Windsor-Essex County Health Unit Environmental Health Department at 519-258-2146 ext. 4475 to speak to a Public Health Inspector.

*Please, refer to the Ministry of Education's Guide to Reopening Ontario's Schools, July 30<sup>th</sup>, 2020 for more information on Lunch/Food Service recommendations.*

### 7. Monitor the Risk

As recommendations continue to change, be prepared to monitor how the school day operates. If you identify an area of concern that needs to be addressed, work to update your policies and procedures as soon as possible to ensure safety of all within the school building. Consultation with the Windsor-Essex County Health Unit is encouraged in developing new policies and procedures which respond to emerging needs in the school setting.

Ensure that staff, students, and parents/caregivers feel supported and welcome to raise any concerns they have. Families provide comfort for students, especially as they return back to school. It is important that parents/caregivers are informed of all changes and the necessary precautions taken to ensure the safety of their child(ren) and to reduce the spread of the virus. Since parents/caregivers will decide about keeping their child(ren) home if they are sick, it is important to maintain welcoming and frequent communication to families to ensure they do not send a sick child to school.

### 8. Additional Considerations

#### General Safety

There are additional considerations that can be put into place to make the school environment a safer place. These can include considering:

- Enforcing a 'no food sharing' policy to not only prevent allergy spread, but also to minimize risk of contact between students. Remove self-service food items that are not prepackaged or that require tongs to be used by students.
- If food preparation classes continue, prepared food must not be shared between staff and students.
- Water fountains should only be used to refill a water bottle. Restrict the use of drinking directly from the fountain.
- Limiting non-essential visitors. Use phone or video conferencing as much as possible to interact with parents and caregivers. Visitors, such as service providers (delivery drivers, independent contractors) should be screened prior to entering the building. Visitors should be logged with contact information, should they need to be contacted at a later date.

- When possible, leaving windows and doors open to minimize the touching of door handles and increase ventilation in classrooms. Only do so if there are no health risks (e.g., triggering asthma in students or staff, risk of falling, or risk of insects entering the building) and ensure that all fire code regulations are adhered to.
- Provide additional monitoring and limit the number of cohorts attending outdoor recess to help to ensure physical distancing is maintained.

### Students with Special Needs or Modified Education Plans

Special consideration should be implemented for children with behavioural and/or medical complexities. These children and families may have experienced hardship related to home care supports along with prolonged isolation. Special focus on transitioning these students and families back to school should be of importance by considering:

- Remote learning opportunities for families who do not want to send their children back to school.
- Communication with parents and caregivers to determine an individualized back to school plan.
- Provision of extra supports (teacher aides) for those who require assistance with hygiene measures.
- The assurance of access to services such as nursing and therapy is available for students while in school.

### Student Mental Health

It is also important to consider the psychosocial aspect that COVID-19 may have on students. This can cause a sense of anxiety for some who are trying to understand why the school setting has changed so drastically. Mental health conditions, such as substance use, anxiety, and depression could have also been exacerbated due to social distancing and school closures.

Staff should also be trained to not only monitor for students' symptoms, but to also monitor their thoughts, feeling, and reactions, by incorporating the following actions:

- Providing reassurance on the health and safety procedures, such as proper hand hygiene and respiratory etiquette to keep themselves and others safe from the virus.
- Maintaining routines and activities that make students feel comfortable.
- Listening to students who may have questions or concerns and require further clarification. Let them know that it is okay to ask questions.

- Providing support to teachers and students to identify and remediate any gaps in learning that occurred due to school closures.
- Ensuring mental health supports continue to be provided and adapted for those who need to remain at home for remote learning.
- Allocating time during the work day to provide mental health training for staff.

### Before and After School Programs

Guidance on the operation of before and after school programs for the 2020-2021 school year is provided by the Ministry of Education (<http://www.edu.gov.on.ca/childcare/before-and-after-school-programs-guide.pdf>).

Some key elements for safe delivery of such programs includes:

- Making best efforts to group the before and after school program class with the same core day class (e.g. determining core day classes based on whether the child is enrolled in the before and after school program).
- Making use of large, well-ventilated spaces (e.g. gymnasium) or outdoor spaces as much as possible for the before and after school programs.
- Advice of the local public health unit must be followed, even in the event that it conflicts with, or is inconsistent with, this guidance document.
- School boards are required to ensure that the classroom is cleaned and disinfected after the core day program ends and the before and after school program begins.
- Use of masks policies and physical distancing measures must be applied during all operational times.

### Summary

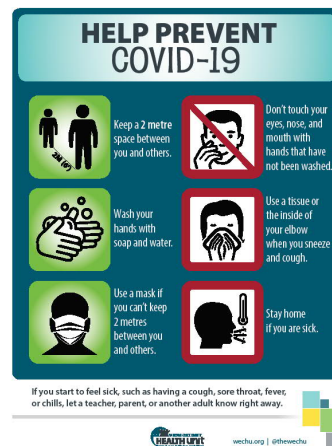
This document is meant to provide Windsor and Essex County school boards with support to reopen their doors to staff and students in the safest way possible. In order to follow the direction of both the Ministry and Health and the Ministry of Education, enhanced public health protocols must be put in place to ensure this occurs. Through the education and application of infection control and prevention measures, our goal is to keep our entire community safe and healthy.

Acknowledging the fact that COVID-19 is a new virus, as the 2020-2021 school year evolves and schools continue to prioritize the health and safety of their staff and students, the directions and recommendations contained within this document may require alterations. As a source for evidence-informed public health best practices, the WECHU will continue to work alongside our local school boards to ensure the highest level of safety for our community. As such, the WECHU will update resources on its website (WECHU.org), and will communicate such updates with the local school board representatives. Additionally, the WECHU is available for consultation and support as new situations emerge, and clarification or additional information is needed in order to support the safest possible learning environment in Windsor and Essex County.

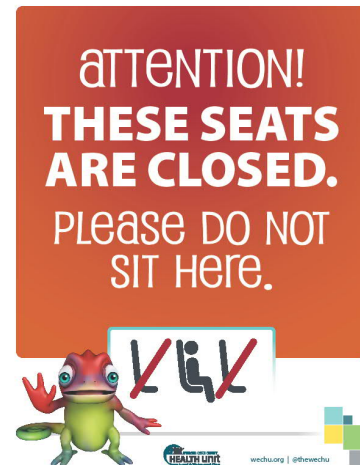
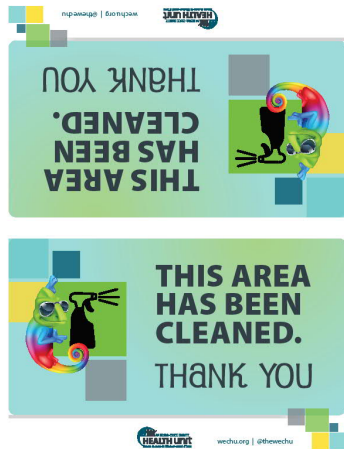
## Appendix A - Resources

- Health Canada: [Hard-surface disinfectants and hand sanitizers \(COVID-19\)](#)
- Health Canada: [Public health guidance for schools \(K-12\) and childcare programs \(COVID-19\)](#) [under review 04- 03-2020]
- Public Health Ontario: [Cleaning and Disinfection for Public Settings](#)[Federal Guidance for School Bus Operations during the COVID-19 Pandemic.](#)  
<https://www2.tc.gc.ca/en/services/road/federal-guidance-school-bus-operations-during-covid-19-pandemic.html>
- Approach to reopening schools for the 2020-2021 school year.  
<https://www.ontario.ca/page/approach-reopening-schools-2020-2021-school-year#section-12>

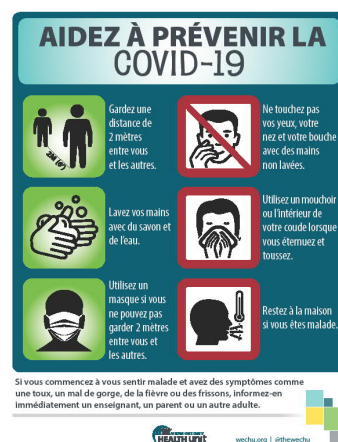
## Appendix B - Covid-19 Signs



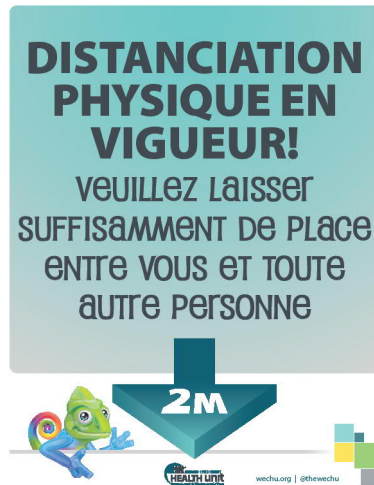
## WINDSOR-ESSEX COUNTY HEALTH UNIT



## French Translation







Arabic Translation



**كيفية السعال والعطاس بشكل سليم**



إذا لم يكن لديك منديل ،  
فم بالسعال أو العطاس في  
مرفقك، وليس في يديك.



أرم المنديل في القمامة.



حظ أظفك، وهناك منديل  
بعد السعال أو العطاس.



استمر  
اليد بعد السعال أو العطاس.



استمر  
اليد بعد السعال أو العطاس.

ساعد في منع انتشار الجراثيم

519-258-2146 ext. 1820  
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HEALTH UNIT  
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**لا تركب الحافلة إذا  
كنت تشعر بالمرض**

**أخبر سائق الحافلة  
على الفور وسوف  
يساعدك.**




HEALTH UNIT  
WINDSOR-ESSEX COUNTY HEALTH UNIT

wechu.org | @thevechu

**انتباه!**

**هذه المقاعد  
مغلقة.**

**الرجاء عدم  
الجلوس هنا.**



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## Appendix C – Screening Questionnaires

## Daily Screening Questionnaire for Parents/Guardians/Students Before Attending School

1.	<b>Do you, or your child attending the program, have any of the following new or worsening symptoms?</b>	Circle One	
	• Fever (37.8 C or greater)	YES	NO
	• New or worsening cough	YES	NO
	• Shortness of Breath / Difficulty Breathing	YES	NO
	• Sore throat	YES	NO
	• Chills	YES	NO
	• Difficulty swallowing	YES	NO
	• Runny Nose / Nasal Congestion (in absence of underlying reason for this such as seasonal allergies, post nasal drip, etc.)	YES	NO
	• Feeling unwell / Fatigued/malaise	YES	NO
	• Nausea / vomiting, diarrhea , abdominal pain	YES	NO
	• Unexplained loss of appetite	YES	NO
	• Loss of sense of taste or smell	YES	NO
	• Muscle/ Joint aches	YES	NO
	• Headache	YES	NO
	• Conjunctivitis (Pink Eye)	YES	NO
2.	<b>Has the child, or anyone in the child's household had close contact (face-to-face contact within 2 metres) with anyone with a respiratory illness or confirmed or probable case of COVID-19?</b>	YES	NO
3.	<b>Has the child, or anyone in the child's household, returned from travel outside of Canada in the last 14 days? (This does not include cross-border commuters travelling daily (not including overnight stays) who live in the child's household).</b>	YES	NO

- If you have answered "NO" to all questions, the child may attend school.
- If you have answered "YES" to any of part of Question 1, DO NOT send your child to school at this time. Your child should stay home. Complete the [COVID-19 Self-Assessment Tool](#) to determine if medical care is required and if a COVID-19 test is needed. The child may return to school as directed by a primary care provider.
- If you have answered "NO" to Question 1, but "YES" to question 2, please DO NOT send your child to school at this time. The child should stay home. Complete the [COVID-19 Self-Assessment Tool](#) to determine whether a COVID-19 test is needed or medical care is required. Based on the child's exposure, they will be permitted to attend school only as directed by a primary care provider.
- If you have answered "NO" to Question 1 and Question 2, but "YES" to Question 3, the child may attend school on the advice of a primary care provider provided they are continually monitored for symptoms related to COVID-19.

## Daily Screening Questionnaire for Staff Before Reporting to Work

1.	Do you have any of the following new or worsening symptoms?	Circle One	
	• Fever (37.8 C or greater)	YES	NO
	• New or worsening cough	YES	NO
	• Shortness of Breath / Difficulty Breathing	YES	NO
	• Sore throat	YES	NO
	• Chills	YES	NO
	• Difficulty swallowing	YES	NO
	• Runny Nose / Nasal Congestion (in absence of underlying reason for this such as seasonal allergies, post nasal drip, etc.)	YES	NO
	• Feeling unwell / Fatigued/malaise	YES	NO
	• Nausea / vomiting, diarrhea , abdominal pain	YES	NO
	• Unexplained loss of appetite	YES	NO
	• Loss of sense of taste or smell	YES	NO
	• Muscle/ Joint aches	YES	NO
	• Headache	YES	NO
	• Conjunctivitis (Pink Eye)	YES	NO
2.	Have you or anyone in your household had close contact (face-to-face contact within 2 metres) with anyone with a respiratory illness or confirmed or probable case of COVID-19?	YES	NO
3.	Have you or anyone in your household, returned from travel outside of Canada in the last 14 days? (This does not include cross-border commuters travelling daily (not including overnight stays) who live in your household).	YES	NO

- If you have answered “NO” to all questions, you may report to work.
- If you have answered “YES” to any of part of Question 1, please DO NOT report to work at this time. Please remain home and use the [COVID-19 Self-Assessment Tool](#) to determine whether a COVID-19 test or medical attention is required.
- If you have answered “NO” to Question 1, but “YES” to question 2, please DO NOT report to work at this time. Complete the [COVID-19 Self-Assessment Tool](#) to determine whether a COVID-19 test is needed or medical care is required. Based on the exposure, the staff member may be permitted to report to work only as directed by a primary care provider.
- If you have answered “NO” to Question 1 and Question 2, but “YES” to Question 3, the staff member may report to work on the advice of a primary care provider provided they are continually monitored for symptoms related to COVID-19.

