

COVID-19 PROTOCOLS FOR SCHOOL AND DISTRICT ADMINISTRATORS

Management of Illness and Confirmed Cases

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INTRODUCTION

This resource is intended to provide K-12 school and school district administrators with key information on the processes, roles and responsibilities involved in managing symptoms of illness, exposure to COVID-19, and confirmed positive cases of COVID-19 within the school community.

Sources of information for this document include the [BC Centre for Disease Control website, COVID-19 Public Health Guidance for K-12 School Settings](#), the [Provincial COVID-19 Health & Safety Guidelines for K-12 Settings](#), and the [COVID-19 Operational Guidelines for School Districts and Independent School Authorities](#).

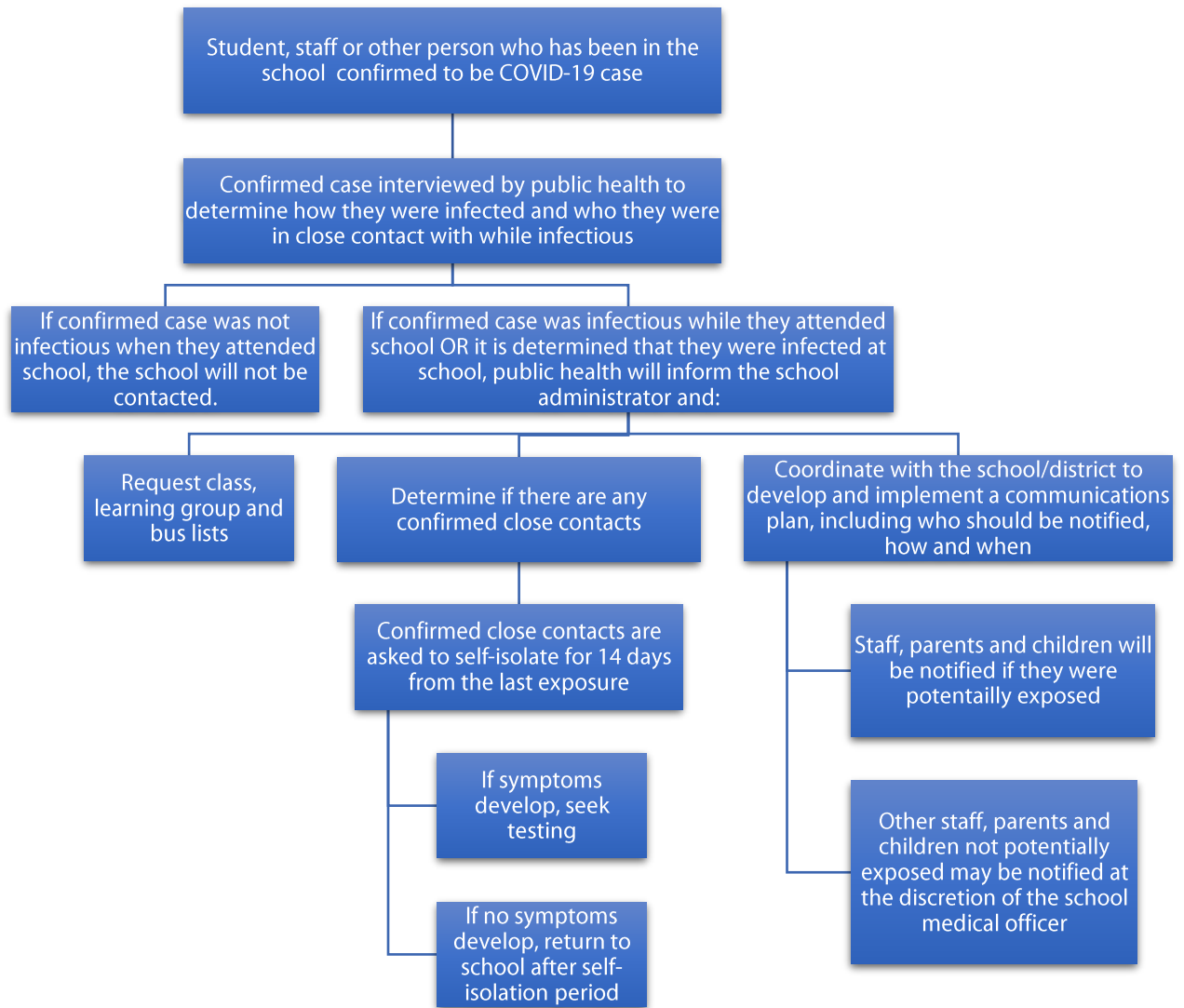
MANAGEMENT OF COVID-19 IN K-12 SCHOOLS

Definitions

- **Confirmed Case** = a person with laboratory confirmation of infection with the virus that causes COVID-19 performed at a community, hospital or reference laboratory.¹
- **Contact Tracing** = a process led by local health authorities to identify people that have been in close contact with a confirmed case. Contact tracing helps people get diagnosed earlier and reduces the chance of spreading COVID-19.
 - Only contacts who may have been exposed to respiratory droplets from the confirmed case (through coughing, sneezing or speaking) need to be identified.
 - More information on contact tracing is available on the [BCCDC website](#).
- **School Cluster** = multiple confirmed and linked cases of COVID-19 among students and/or staff within a 14-day period. The determination of *clusters* can only be made by medical health officers.
- **Self-Isolation** = staying home and avoiding situations where one could come in contact with others. Self-isolation is required for those confirmed as a case of COVID-19, those who are identified as a close contact of a confirmed case of COVID-19, and those who have travelled outside Canada in the last 14 days.

¹ [http://www.bccdc.ca/health-professionals/clinical-resources/case-definitions/covid-19-\(novel-coronavirus\)](http://www.bccdc.ca/health-professionals/clinical-resources/case-definitions/covid-19-(novel-coronavirus))

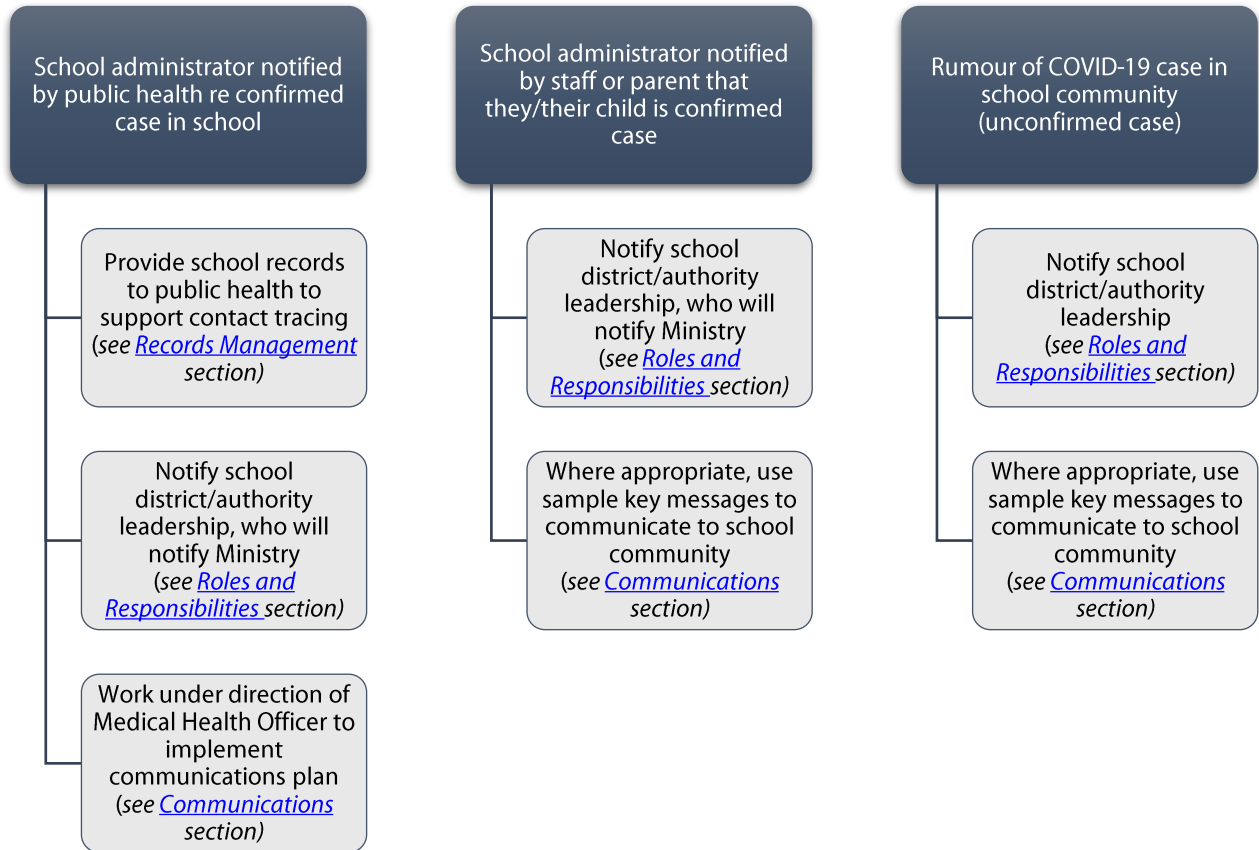
Figure A: Public Health Actions in Response to Confirmed Case of COVID-19 in a School



Confirmed close contacts are determined based on the length of time of exposure and nature of the interaction. **Only public health can determine who is a close contact.**

See the [Protocol in the Event of a Confirmed COVID-19 Case in a School](#) section for more information.

Figure B: COVID-19 in Schools – School Administrator Actions



Roles and Responsibilities

Public Health

Medical health officers are physicians who work within health authorities and have authority and responsibilities outlined in the [Public Health Act](#). These include directing the public health response to local public health threats, like COVID-19. School medical officers are medical health officers who have additional authority and responsibilities outlined in the [School Act](#). They are responsible for directing the local public health response to any public health threat that affects schools, like COVID-19 and other communicable diseases. Every school has a school medical officer assigned to it (see the *Key Contacts* section for contact information by health authority).

Under the direction of medical health officers, regional health authorities have effective case finding and contact tracing systems in place and are prepared to manage any cases and confirmed contacts in the community.

If there is a confirmed case, cluster or outbreak of COVID-19 in a school, the school medical officer will lead the response. This includes working with the school to determine if any additional measures or changes to the school's health and safety plan are required.

Schools and School Districts/Independent School Authorities

School and school district/authority administrators are responsible for:

- Continuing to implement COVID-19 health and safety policies and procedures, including managing symptoms of illness among students and staff.
 - School-level policies and procedures should align with school district/authority policies, [BCCDC guidance](#) and [provincial K-12 health and safety guidelines](#).
- Working with school medical officers to support contact tracing and additional measures required in the event of a confirmed case(s) of COVID-19 in the school community.
 - Any additional measures will be determined by the school medical officer and will take into consideration the unique circumstances of the school and the confirmed case(s).
- Informing school district/authority leadership and the Ministry of Education in the event of a confirmed case(s) of COVID-19 in the school in a timely manner.
 - See the *Communications* section for more information.

Protocol if a Student/Staff Develops Symptoms of Illness at School

If a student or staff member develops symptoms at school, schools should:

- Provide the student/staff with a non-medical mask if they don't have one (exceptions should be made for students and staff who cannot wear masks for medical and/or disability-related reasons).
- Provide the student/staff with a space where they can wait comfortably that is separated from others.
 - Younger children should be supervised when separated.
- Make arrangements for the student/staff to go home as soon as possible.
 - Contact the student's parent/caregiver with a request to have their child picked up as soon as possible.
- Clean and disinfect the areas the student/staff used.
- Request that the student/staff stay home until COVID-19 has been excluded and symptoms have improved (see *Return to School* section for more information).

Protocol in the Event of a Confirmed COVID-19 Case in a School

If a student, staff or other individual who has been in a school is a confirmed case of COVID-19 through testing or investigation (i.e. case finding), the local health authority will initiate contact tracing to determine how they were infected and who else may have been at risk of infection.

If there was a potential exposure at a school (i.e. the confirmed case attended school when they may have been potentially infectious), the health authority will work with the school administrator to understand who may have been exposed, and to determine what actions should be taken, including identifying if other students or staff are sick (case finding) or have been exposed and should monitor for symptoms or self-isolate.

If there was no potential exposure at the school (i.e. the confirmed case did not attend school when they may have been potentially infectious), the health authority will not notify the school administrator.

Self-isolation and Additional Measures

Health authority staff will identify and directly notify close contacts of a confirmed case who are required to self-isolate. Health authorities ensure those required to self-isolate have access to health-care providers and that other appropriate supports are in place.

Students and staff are only required to self-isolate if directed to do so by health authority staff – this includes members of the learning group of the confirmed case.

School administrators should ensure the necessary plans are in place to support continuity of learning for students who are required to self-isolate. School districts/authorities should also have contingency plans in place to arrange coverage for staff who are required to self-isolate.

Other people who are not identified as close contacts of a confirmed case, but who may have interacted with the confirmed case while they were infectious, may be advised by health authority staff to self-monitor for symptoms but can still attend school.

School medical officers may require additional measures to be taken which may include:

- Requesting students and staff to stay home until contact tracing has been completed
- Self-isolation of a learning group
- Additional cleaning/disinfecting requirements
- Temporary restrictions or modifications of certain school activities

School medical officers will consider similar measures, as outlined above, in the event of a school cluster. Only in exceptional circumstances would a school medical officer consider a school closure.

Communications and Protecting Personal Privacy

School medical officers will play the lead role in determining if, when and how to communicate out information regarding a confirmed case to the school community. To protect personal privacy rights, health authorities will not disclose that a student or staff member is a confirmed case of COVID-19 unless there is reason to believe they may have been infectious when they attended school. In this case, the health authority will provide only the information required to support effective contact tracing and only to the school administrator or delegate.

Health authority staff will notify everyone who they determine may have been exposed, including if any follow-up actions are recommended (e.g. self-isolate, monitor for symptoms, etc.). School medical officers will also work with the school administrator to determine if additional notifications are warranted (e.g. notification to the broader school community).

To ensure personal privacy rights are maintained and that information provided is complete and correct, schools and school districts/authorities should not provide any public statements or communications to staff or students' families about potential or confirmed COVID-19 cases unless they are directed to do so by the school medical officer or delegate. In these circumstances, communications must be reviewed by the school medical officer or delegate prior to release.

School and district administrators should be aware that individuals who test positive for COVID-19, or who are required to self-isolate if they are determined to be a close contact of a confirmed case, may experience stigma and discrimination. School/district administrators should seek out opportunities to foster compassion and empathy in the school community, and offer support to affected individuals and their families while respecting their privacy, to help reduce the impact of COVID-19 on people's social and emotional well-being.

Media requests regarding confirmed or suspected COVID-19 cases, potential exposure at a school or potential risk of transmission within a school setting should be directed to the regional health authority for response.

School districts and independent school authorities must promptly inform the Ministry of Education of significant events (e.g. confirmed case or outbreak) and associated communications to school communities related to COVID-19. Communications can be directed to the Ministry by email at educ.covid@gov.bc.ca, and should not include personal information associated with the confirmed case(s).

Additional Scenarios and Communications Protocols

School Administrator Informed of Confirmed Case of COVID-19 by Staff or Parent

There may be circumstances where a staff member or parent contacts a school administrator to inform them that they/their child is a confirmed case, but the school administrator has not been contacted by the school medical officer.

School administrators do not need to contact their school medical officer to inform them of the confirmed case - the local health authority will already be aware of the confirmed case and will initiate contact tracing. School administrators should notify their school district/authority leadership of the situation.

School medical officers will only contact the school administrator if it is determined that the confirmed case was infectious while they were at school or if the confirmed case was infected while at school. There may be a delay in the school medical officer notifying the school administrator until the contact tracing required to make that determination has been completed (this process may take one day or more from when the confirmed case was notified).

In the interim, schools and school districts may use the sample key messages below when communicating with members of their school community. Consideration should be given to limiting the scope of communications as much as possible, ensuring that communications do not contain any personally identifiable information, and seeking guidance from the school medical officer when needed.

- We have been made aware from a member of our school community that they have tested positive for COVID-19.
- We are working with the local health authority to determine if there is any risk to other members of our school community or if any additional steps are required. We will follow the health authority's guidance.
- The local health authority will connect directly with any individuals who may have been exposed with further instructions.
- If you are contacted by the health authority, please follow their advice carefully.
- If you have symptoms, please stay home and follow the guidance from the BC Centre for Disease Control regarding [if you are sick](#).
- We ask for your patience, and we will communicate out additional information as it becomes available.

- The safety and well-being of our students, families and staff remains our highest priority.
- Please be reassured that our school will continue to implement the strict protocols and procedures we have in place so that children can continue to attend school as safely as possible.

Rumour of COVID-19 Case Circulating in School Community

Schools and school districts may use the following sample key messages to issue a communication to their school community in response to unconfirmed rumours regarding a case of COVID-19 in the school community:

- We have recently been made aware of concerns in our school community regarding the presence of COVID-19.
- At this time, we have not been notified by the local health authority regarding any student or staff being confirmed to have COVID-19.
- If a member of the school community were to test positive for COVID-19, the local health authority would follow up directly with any individuals who may have been exposed.

School administrators do not need to contact their school medical officer to inform them of a potential or unconfirmed case, but should keep their school district/authority leadership informed of the situation.

Close Contacts of a Confirmed Case of COVID-19

If a health authority determines that a student or staff is a close contact of a confirmed case of COVID-19 (e.g. family member, social contact outside of the school, etc.), they will be required to self-isolate. Only health authorities can determine who is a close contact.

School administrators will not be notified by the school medical officer if a student or staff is identified as a close contact of a confirmed case.

School administrators should ensure the necessary plans are in place to support continuity of learning for students who are required to self-isolate.

Depending on the circumstances (e.g. type of interactions, when and how long they were exposed, ability of a confirmed case to fully self-isolate from others in their household, etc.), public health may determine that someone who was in contact with a confirmed case while they were infectious is at low risk of developing COVID-19. In this situation, the person may be asked to self-monitor for symptoms but will not be required to self-isolate. Individuals asked to self-monitor for symptoms may continue to attend school.

Return to School

Anyone experiencing symptoms of illness should not return to school until they have been assessed by a health-care provider to exclude COVID-19 or other infectious diseases AND their symptoms have improved (i.e. only mild symptoms remain like a sustained cough or an occasionally runny nose). **A doctor's note is not required for students or staff to return to school.**

If a health assessment recommends testing to exclude COVID-19, students and staff who have been tested must stay home while awaiting their test results.

Students and staff with symptoms who have had COVID-19 excluded should not return to school until their symptoms have improved and they feel well enough.

If a student or staff member tests positive for COVID-19, the health authority will provide further instructions to the student or staff member on when they can return to school.

Individuals who have traveled out of the country must self-isolate for 14 days.

Some students and staff who were required to self-isolate, after testing positive for COVID-19 or being identified as a close contact of a confirmed case, may have experienced elements of trauma during their time away from school. A number of trauma-informed resources are available to assist schools in supporting students and staff in their return to school:

- [Compassionate Learning Communities - Supporting Trauma-Informed Practice](#)
- [Linda O'Neill – Trauma Informed in the Classroom](#)
- [Ministry of Children and Family Development: Healing Families, Helping Systems: A Trauma-Informed Practice Guide for Working with Children, Youth and Families](#)

Records Management and Contact Tracing

In the event of a confirmed case of COVID-19 in the school, the health authority may request contact information for students, staff, volunteers and visitors to the school in order to support contact tracing activities. This information should be easily accessible by school administrators and able to be quickly provided to the health authority upon request.

The following records should be maintained for a period of at least 30 consecutive days:

- Student and staff attendance
- Class, learning group and school bus lists and seating assignments (where applicable)
- Current contact information for students, parents/caregivers and staff (names, emails, phone numbers)
- Attendance lists for onsite programs (e.g. before and after school children care) including participants, staff and volunteers (names, emails, phone numbers)
- Visitor logs (names, emails, phone numbers)

KEY CONTACTS

- COVID-19 related inquiries can be directed to the Ministry by email at educ.covid@gov.bc.ca or by phone at 236-478-2712.
- Medical Health Officer Contact Information by Health Authority:
 - Fraser Health, email FHAMedicalHealthOfficers@fraserhealth.ca
 - [Interior Health](#)
 - [Island Health](#)
 - [Northern Health](#)
 - [Vancouver Coastal Health](#)