



Provincial COVID-19 Health & Safety Guidelines for K-12 Setting

Ministry of Education



1. Principles

In complement to the Ministry of Education's overarching principles for the COVID-19 response, the Ministry along with education partners articulated the following principles with respect to health and safety:

- All schools will adhere to the standards, guidelines and direction from the Provincial Health Officer (PHO) and WorkSafeBC.
- In collaboration with education partners, the Ministry may develop additional health and safety requirements for all schools to ensure consistency across the K-12 system. These additions will enhance, not duplicate, PHO and WorkSafeBC requirements.
- Psychological safety measures and trauma-informed practice will be valued and implemented alongside physical health and safety measures.
- Effective communication with all community partners, parents, caregivers, students, unions and employees is an essential aspect of successfully implementing these guidelines.

2. Objectives

As a part of ensuring continuity of learning and educational outcomes during the COVID-19 pandemic, these guidelines are intended to support K-12 employees, students, parents, caregivers, administrators and school community members to:

- Be informed about public health measures and feel safe in schools.
- Understand their roles and responsibilities in maintaining and promoting public health and school safety.

3. Requirements for Health & Safety in BC Schools

Requirements for school health and safety are organized into two main sections:

1. Foundational health and safety requirements.
2. Additional COVID-19 related requirements from authorities.

3.1 Foundational Health & Safety Requirements

There are several existing requirements for school health and safety, which are specified in the following.

LEGISLATION

The *School Act* sets the legal framework for public schools, sections 88 to 92 describe how health and other support services interact with schools. http://www.bclaws.ca/civix/document/id/complete/statreg/96412_06. The *School Act* requires the Minister of Health to designate a School Medical Officer for each school district. School Community Health Nurses are often delegated by the School Medical Officer to work with individual schools.

There are no parallel provisions relating to school medical officers in independent schools, however, the MHO under the Public Health Act may issue orders or recommendations relating to independent schools.

A School Medical Officer can require a board or independent school authority to close a school if the School Medical Officer considers the health or safety of students is at risk. If a School Medical Officer believes that the health condition of a student or an employee of the board would endanger the health of other students or employees at a school, the School Medical Officer must report that to the board, who must then remove that person from the school.

A Board of Education or independent school authority has the authority to close a school on a required day of instruction if it believes the health or safety of students is endangered.

If a teacher or principal suspect a student is suffering from a communicable disease that endangers others at the school, they must report this to the School Medical Officer; and may exclude the student from school until a certificate is received from their doctor permitting them to attend. Boards and independent school authorities can also require staff who are suffering from a communicable disease to be suspended from work until they can provide a certificate from their doctor permitting them to return to work.

If a student is excluded from attending school due to health reasons, the board or independent school authority needs to continue to provide an educational program to the student.

A Board of Education or independent school authority has a general authority to close a school if it believes the health or safety of students is endangered. Public schools do not have to make up instructional time if they close a school because of health reasons (*s.73 and 90 of the Act and the School Regulation*).

Section 79 of the *School Act* requires boards of education to ensure confidentiality of student information and ensure privacy for students and their families. It also requires that persons providing health or social services to students have access to student information.

Section 81 of the *School Act* requires that boards must prepare and submit to the Minister, reports and statements in the form, with the information and at the time required by the Minister.

The [*Support Service for Schools Order*](#) requires public schools to have a medical room in each school for community health nurses to use to provide health services to students and specifies that superintendents provide a list of schools and enrolment levels to the school medical officer for the district.

PROFESSIONAL STANDARDS

The Professional Standards for Educators sets out the principles that guide educators' professional practice. Standard 1 states that "*educators value and care for all students and act in their best interest*".

OTHER LEGAL GUIDANCE

Schools and teachers are expected to take responsibility for their student's physical and mental safety and well-being. This general duty of "in loco parentis" or acting in the place of a careful and judicious parent, is found in the common law of court decisions and precedents.

TRAUMA-INFORMED PRACTICE AND SOCIAL EMOTIONAL LENS

Trauma-informed practice is a compassionate lens of understanding that is helpful to all children, youth and adults, especially those who have experienced traumatic events.

Trauma-informed practice includes:

- Providing inclusive and compassionate learning environments.
- Understanding coping strategies.
- Supporting independence.
- Helping to minimize additional stress or trauma by addressing individual student need.

An impact assessment of the students and teacher/educators is crucial as part of a trauma-informed transition back into classrooms. Use of surveys and 'check-ins' can assist in gathering important data to inform what level of trauma response and recovery will be necessary to support the school community.

The North American Centre for Threat Assessment and Trauma Response has released a resource to assist the education sector in supporting the transitioning back to school called [Guidelines for Re-Entry into the School Setting During the Pandemic: Managing the Social-Emotional and Traumatic Impact](#). To support educators in responding to situations of trauma, the Ministry has created [trauma-informed practice resources](#) that are available on the [erase website](#).

3.2 Additional COVID related requirements

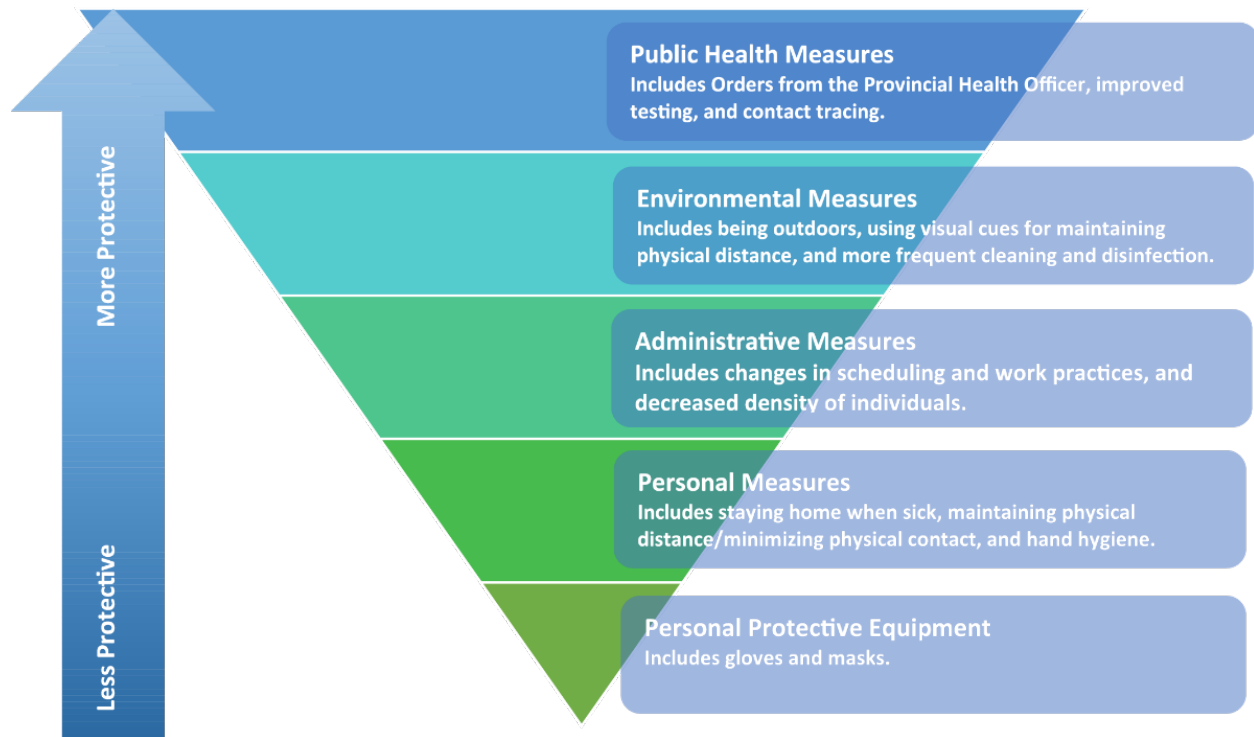
In response to the COVID-19 global pandemic, several statutory authorities in B.C. have issued health and safety requirements from schools that must be followed. **All Boards of Education must have a health and safety plan that addresses ALL the requirements in these guidelines.**

3.2-1 GUIDELINES FROM THE PROVINCIAL HEALTH OFFICER

The following requirements reflect first and foremost all guidelines from the PHO. The Ministry, in consultation with education partners, has added additional detail or context to some of the parameters below to provide clarity. PHO guidelines for the K-12 sector can be found here:

<https://www2.gov.bc.ca/gov/content/health/about-bc-s-health-care-system/office-of-the-provincial-health-officer/current-health-topics/covid-19-novel-coronavirus>

Infection Prevention and Exposure Measures for Communicable Disease



PUBLIC HEALTH MEASURES

1. Mass Gatherings

The Provincial Health Officer's Order for Mass Gatherings continues to prohibit gatherings and events of people in excess of 50 people, however, this Order does not apply to regular school activities. As such, there can be more than 50 students and staff in a school at any given time if they are not all in one area and if they are actively engaged in physical distancing to the greatest extent possible. However, large assemblies of staff and students should not be held.

2. Case Finding, Contact Tracing and Outbreak Management

Active testing of people with mild COVID-19 like symptoms (*case finding*) helps us identify cases early in the course of their disease, determine whether others in close contact with them are at risk for infection (*contact tracing*), and ensure they get appropriate care and follow-up. Enhancing policies regarding reporting employee and student absenteeism to public health can be helpful in early identification of clusters and outbreaks (*Note: this does not necessarily mean that Boards must update their policies but rather the practice of timely reporting suspected cases and/or elevated absenteeism*).

Should a COVID-19 positive person be identified by public health staff, significant efforts are undertaken to determine if they are part of a cluster of cases or part of a local outbreak. Specific public health measures are implemented in facilities where an outbreak occurs to prevent further transmission of COVID-19 and keep others safe in a school or workplace.

3. Self-isolation and Quarantine

Should children, youth and staff have common-cold, influenza, or COVID-19 like symptoms they must stay home, be assessed by their health care provider and tested for COVID-19. When someone is symptomatic, they should self-isolate and follow directions provided by their health care provider. Self-isolation is also advised for those who are considered a close contact of a confirmed case and are waiting to see if they develop COVID-19 illness.

'Quarantine' is a term typically reserved for persons who return from travel outside the country and are at risk of developing COVID-19.

If a person is found to be a confirmed case of COVID-19, public health staff will ensure there is robust contact tracing and management of any clusters or outbreaks. They will also ensure that children, staff, parents and caregivers have access to health care providers and that appropriate supports are in place.

ADDITIONAL REQUIREMENTS

For schools with enrolled international students, the Board or independent school authority must develop a protocol for boarding facilities that addresses all guidelines in this document.

ENVIRONMENTAL MEASURES

1. Cleaning and Disinfection

Regular cleaning and disinfection are essential to preventing the transmission of COVID-19 from contaminated objects and surfaces. Schools should be cleaned and disinfected in accordance with the [BCCDC's Cleaning and Disinfectants for Public Settings](#) document.

This includes:

- General cleaning and disinfecting of the premises should occur at least once a day.
- Frequently-touched shared surfaces should be cleaned and disinfected at least twice a day.
(*e.g. door knobs, light switches, toilet handles, tables, desks, chairs, electronic devices, keyboards and toys*)
- Clean and disinfect any surface that is visibly dirty.
- Use common, commercially-available detergents and disinfectant products and closely follow the instructions on the label.
- Limit items that are not easily cleaned (*e.g. fabric or soft items*).
- Empty garbage containers daily.
- Wear disposable gloves when cleaning blood or body fluids (*e.g. runny nose, vomit, stool, urine*).
- Wash hands before wearing and after removing gloves.

There is no evidence that the COVID-19 virus is transmitted via textbooks, paper or other paper-based products. As such, there is no need to limit the distribution of books or paper based educational resources to students because of COVID-19.

ADDITIONAL REQUIREMENTS

Recognizing facilities across the education system vary, Boards of Education should also include the following in their health and safety plan to reduce the risk of transmission:

- Providing paper hand towels.
- Disabling water fountains.
- Provision of cleaning products for common devices and materials used for the delivery of education (e.g. photocopiers, supply rooms, etc.).
- Washrooms should be cleaned at least twice a day keeping in line with the high touch surface area protocols.

ADMINISTRATIVE MEASURES

1. Physical Distancing and Minimizing Physical Contact

Physical distancing (e.g. maintaining a distance of 2 metres between two or more people) is challenging in a K-12 school setting, particularly with younger students. As such, it is reasonable to establish different expectations for varying age levels and activities. For example, younger students should be supported to have minimized physical contact with one another, while older students and adults should seek to maintain a safe physical distance whenever possible.

The following physical distancing strategies should be implemented where possible in the K-12 school setting: (Note: This includes all related school activities including field trips, fundraising, etc.)

- Avoid close greetings (e.g. hugs, handshakes). Regularly remind students about keeping their “hands to yourself”.
- Spread people out into different areas.
 - Consider different classroom and learning environment configurations to allow distance between students and adults (e.g. different desk and table formations).
- Organize students into smaller groups that stay together throughout the day.
- Strive to minimize the number of different teacher(s) and educational assistant(s) that interact with groups of students throughout the day (e.g. minimize the amount of mixing between student and different staff in the setting).
- Stagger pick-up and drop-off times.
- Stagger recess/snack, lunch and class transition times to provide a greater amount of space for everyone.
- Take students outside more often.
 - Organize learning activities outside including snack time, place-based learning and unstructured time.
 - Take activities that involve movement, including those for physical health and education, outside.
 - Group sport activities should be organized in a thoughtful way, taking into consideration personal measures.
 - Reassure students, parents and caregivers that playgrounds are a safe environment, and encourage appropriate personal hygiene practices before, during, and after outdoor play.
- Incorporate more individual activities or activities that encourage more space between students and staff.
 - For younger students, adapt group activities to minimize physical contact and reduce shared items.
 - For adolescent students, minimize group activities and avoid activities that require physical contact.

- Manage flow of people in common areas, including hallways and bathrooms.
- Parents and caregivers and other non-staff adults entering school should be minimized. They should also be reminded to practice diligent hand hygiene and maintain physical distance when they are in the school.
- Assemblies and other school-wide events should be held virtually to avoid large gatherings of people in one space.

2. Student Transportation on Buses

Buses used for transporting students should be cleaned and disinfected according to the guidance provided in the [BCCDC's Cleaning and Disinfectants for Public Settings document](#). Additional measures should be taken, including:

- Encouraging private (*e.g. parents or caregivers*) vehicle use where possible to decrease transportation density.
- Consider installing a physical barrier between the driver and passengers.
- Have students sit in their own seat.
 - *Students should be separated side-to-side and front to back.*
 - *Students from the same household can share seats if space is limited.*

ADDITIONAL REQUIREMENTS

Schools must create a local procedure for how they will fulfill all the identified PHO guidelines in this section.

Procedures should include:

- Additional measures and direction on implementing physical distancing (*e.g. define the ages/grades of younger students vs. older students; clarify different approaches for minimizing physical contact vs. physical distancing*).
- Clear protocols for employees, students, and others entering and exiting schools as well as school outdoor activities and student pick-up and drop-off.
- The number of students in a space should not exceed the ability to maintain health and safety measures.
- Clear protocols for bringing materials (*e.g. bags, school supplies*) into and out of schools.
- Clear protocols for safe and healthy handling of all food items, such as labeling of beverage and food containers, clear communication to students not to contact or share items, and other parameters deemed appropriate.
- Schools should not be used for community related events unless determined essential by the Board or independent school authority.
- The Board or independent school authority should work with local municipalities to develop a common approach to re-opening any playgrounds that have closed following PHO advice that playgrounds are a safe environment.
- Employees and students should not be sharing personal items (*e.g. electronic devices, writing instruments, etc.*).

PERSONAL MEASURES

1. Stay Home When Sick

- All students and staff who have symptoms of COVID-19, **OR** travelled outside Canada in the last 14 days, **OR** were identified as a close contact of a confirmed case or outbreak must stay home and self-isolate, including children of essential service workers who are ill.
- Parents and caregivers must assess their child daily for symptoms of common cold, influenza, COVID-19, or other infectious respiratory disease before sending them to school.
- Staff must assess themselves daily for symptoms of common cold, influenza, or COVID-19 prior to entering the school.
- School Administrators must ensure school staff are aware of their responsibility to assess themselves daily for symptoms of common cold, influenza, COVID-19 or other infectious respiratory disease prior to entering the school.
- School Administrators must develop a local protocol that:
 - *Clearly communicates with parents and caregivers their responsibility to assess their children daily before sending them to school, or alternatively conduct daily checks for respiratory illness at drop-off by asking parents and caregivers to confirm the child does not have symptoms of a common cold, influenza, COVID-19 or other respiratory disease/illness.*
 - *Establish procedures for students and staff who become sick while at school to be sent home as soon as possible.*
- Staff and students who are ill, including children of essential service workers, should not be permitted to attend school (*Note: Students and employees should stay home until they have been assessed by a health care provider to exclude COVID-19 or other infectious diseases AND their symptoms have resolved*).
- Those unsure of if they, or a student, should self-isolate should be directed to use the [BC COVID-19 Self-Assessment Tool](#).
 - *If concerned, they can be advised to contact 8-1-1, or the local public health unit to seek further input.*
 - *They can also be advised to contact a family physician or nurse practitioner to be assessed for COVID-19 and other infectious respiratory diseases.*
 - *There is no role for screening students or staff for symptoms, checking temperatures, or COVID-10 testing. Such activities are reserved for health care professionals.*

* [AN INFO SHEET ON 'WHAT TO DO IF A STUDENT OR STAFF MEMBER BECOMES ILL AT WORK' IS INCLUDED AS APPENDIX B IN THE PHO GUIDELINES.]

2. Hand Hygiene

Rigorous hand washing with plain soap and water is the most effective way to reduce the spread of illness. Both students and staff can pick up and spread germs easily, from objects, surfaces, food and people. Everyone should practice diligent hand hygiene. Parents, caregivers and staff can teach and reinforce these practices amongst students.

How to practice diligent hand hygiene:

- Wash hands with plain soap and water for at least 20 seconds. Antibacterial soap is not needed for COVID-19.
- If sinks are not available (e.g., *students and staff are outdoors*), use alcohol-based hand rub containing at least 60% alcohol.
- If hands are visibly soiled, alcohol-based hand rub may not be effective at eliminating respiratory viruses. Soap and water are preferred when hands are visibly dirty.
- To learn about how to perform hand hygiene, please refer to the [BCCDC's hand washing poster](#).

Strategies to ensure diligent hand hygiene:

- Encourage hand washing with water and soap upon arrival at school. Place hand washing stations in various locations, including school entrances, hallways and classrooms to encourage appropriate hand hygiene throughout the day.
- Consider alcohol-based hand rub dispensers where sinks are not available and posters to promote the importance of regular handwashing.
- Regularly remind staff and students about the importance of diligent hand hygiene.
- Incorporate additional hand hygiene opportunities into the daily schedule.
- Ensure hand washing supplies are well stocked at all times including soap, paper towels and where appropriate, alcohol-based hand rub with a minimum of 60% alcohol.
- Staff should assist younger students with hand hygiene as needed.

* [AN INFO SHEET ON 'WHEN STUDENTS AND STAFF SHOULD PRACTICE HAND HYGIENE' IS INCLUDED AS APPENDIX C IN THE PHO GUIDELINES.]

3. Respiratory Etiquette

Students and staff should:

- Cough and sneeze into their elbow, sleeve, or a tissue. Throw away used tissues and immediately perform hand hygiene.
- Refrain from touching their eyes, nose or mouth with unwashed hands.
- Refrain from sharing any food, drinks, unwashed utensils, cigarettes, or vaping devices.

Wearing cloth or homemade masks, particularly for children, are not recommended. There is limited evidence outside of health care settings and only in uncontrolled situations where physical distancing between adults cannot be maintained for extended periods of time (*greater than 15 minutes with a person who has probable or lab confirmed COVID-19*). Wearing one is a personal choice. It is important to treat people wearing masks with respect. **Parents, caregivers and staff can teach and reinforce these practices amongst students.**

4. Personal Protective Equipment

Personal protective equipment (PPE), such as masks and gloves are not needed, beyond those used by staff as part of regular precautions for the hazards normally encountered in their regular course of work. They should only be used when all other controls fail (*e.g. only used when other control methods cannot reduce the risk to a low enough level*).

Managing students with complex behaviours, on a delegated care plan or experiencing a health emergency may require staff to be in close physical proximity with the student. **No additional personal protective equipment beyond normal universal precautions are required (*for reducing COVID-19 transmission*).**

There is no evidence to support the use of medical grade, cloth or homemade masks in school settings at this time. Wearing one is a personal choice. It is important to treat people wearing masks with respect.

More information about COVID-related mask use is available on the [BC Centre for Disease Control website](#).

5. Supporting School Communities

The BC Centre for Disease Control is the source of information about COVID-10. Resources available there can be used to support learning and to respond to questions you may receive from members of your school community. More information is available on the [BC Centre for Disease Control website](#).

ADDITIONAL REQUIREMENTS

These guidelines may be amended to respond to an increased risk of transmission. If required, personal protective equipment (PPE) will be provided to teachers through existing WorkSafe processes and in consultation with the union. As the law currently provides, staff who are immune-compromised, have underlying conditions that put them at greater risk, recovering from or receiving cancer treatment, age 65 or older, will be accommodated.

3.2–II WorkSafeBC Resources

WorkSafeBC has issued resources for [COVID-19 and returning to safe operation](#), all of which must be considered by Boards of Education.

There are number of resources available for schools, including:

- <https://www.worksafebc.com/en/health-safety/create-manage/joint-health-safety-committees>
- <https://www.worksafebc.com/en/resources/health-safety/posters/help-prevent-spread-covid-19-handwashing?lang=en>
- <https://www.worksafebc.com/en/health-safety/create-manage/managing-risk/controlling-risks>
- <https://www.worksafebc.com/en/health-safety/create-manage/rights-responsibilities>

Boards of Education and independent school authorities should provide and communicate a plan that addresses WorkSafeBC's 6-step "Guide to Reducing the Risk of COVID-19" which for ease of reference is provided below.

Step 1: Assess the risk at your workplace

Step 2: Implement measures to reduce the risk

Step 3: Develop policies

Step 4: Develop communication plans and training

Step 5: Monitor your workplace and update your plans as needed

Step 6: Assess and address risks from resuming operations

Boards of education must continue to utilize their local health and safety committees for the implementation of these guidelines as well as ongoing development of requirements (*e.g. how to update fire alarm drills for employees and students*).

4. Communication Materials

Boards of Education and independent school authorities must clearly communicate guidelines from the PHO and resources available for information as needed; this includes an obligation to stay up-to-date on materials that will be changing over the coming months. All guidelines and materials from the PHO can be found here: <https://www2.gov.bc.ca/gov/content/health/about-bc-s-health-care-system/office-of-the-provincial-health-officer/current-health-topics/covid-19-novel-coronavirus>.

Clear communication includes both the use of digital communication and prominent placement of visual hard-copy communication materials in Board facilities.

Boards and independent school authorities must also provide early and ongoing orientation and training. This includes providing orientation and training prior to students returning to school (*as needed*), to ensure employees and the school community are well informed of their responsibilities and resources available. (*e.g. distribution of orientation and training materials that are clear, concise and easily understood, interactive sessions with Q&A's, etc.*)

Key examples of what should be communicated include:

1. The Province's new non-medical information line for British Columbians who have questions about COVID-19: 1-888-COVID19. Phone lines are open 7 days a week from 7:30 AM to 8 PM. Information is available in more than 110 languages [B.C.'s COVID-19 website has many resources](#).
2. The Ministry of Health's online self-assessment tool at covid19.thrive.health. Download the COVID-19 app for [Apple](#) or [Android](#). If you have symptoms you can call 8-1-1 to pre-arrange health testing. If you have symptoms associated with COVID-19, self-isolate.

3. BC Centre for Disease Control (BCCDC) Resources:

- [COVID-19 prevention poster](#)
- [Physical distancing poster \(English\)](#)
 - [Simplified Chinese](#)
 - [Punjabi](#)
 - [Farsi](#)
 - [French](#)
- [Hand washing poster](#)
- [Be prepared infographic](#)
- [Do not enter if you are sick or required to self-isolate poster](#)



Factsheet and Tips



[Be prepared factsheet](#)



[Care for yourself and others](#)



[Tips for residents of apartments and other multi-unit buildings](#)



[Cleaning and disinfecting public settings](#)



[Physical distancing](#)