

THE BOARD OF EDUCATION OF SCHOOL DISTRICT NO. 83 (NORTH OKANAGAN- SHUSWAP)

COVID -19 SAFETY PLAN



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1. INTRODUCTION:

The Purpose of this document is to outline control measures to minimize or eliminate the potential for transmission of communicable disease. In order to coordinate the district's response and safety measures, a combination of measures will be used to minimize the potential of exposure at school and building sites to the pathogen known as COVID -19.

The Board of Education of School District No 83 (SD83), is committed to ensuring that our K-12 schools are safe.

2. BC Ministry of Education Priorities

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

| STAGE 1 SCHOOL DENSITY TARGETS 100% | STAGE 2 SCHOOL DENSITY TARGETS K-7: 100% Grade 8-12: 40% | STAGE 3 SCHOOL DENSITY TARGETS K-5: 50% Gr. 6-12: 20% | STAGE 4 SCHOOL DENSITY TARGETS K-12: 20% | STAGE 5 SCHOOL DENSITY TARGETS K-12: 0% |
|---|--|--|---|---|
| In-class instruction: K-12: 5 day per week | In-class instruction: K-7: 5 days per week Grade 8-12: 2 days per week 5 days per week available for: Children of essential service workers Students with disabilities/diverse abilities Students who require additional supports Remote/online instruction: Balance of learning | In-class instruction: K-5: 2 to 3 days per week Gr. 6-7: 1 day per week Gr 8-12: 1 day per week 5 days per week available for: Children of essential service workers Students with disabilities/diverse abilities Students who require additional supports Remote/online instruction: Parent/Guardian choice to return to in-dass instruction optional Balance of learning | In-class instruction: K-12: Limited 5 days per week available for: Children of essential service workers Students with disabilities/diverse abilities Students who require additional supports Remote/online instruction: K-12: Majority of all students | In-class instruction: K-12: None |

3. GUIDANCE:

This Safety Plan is informed by the following:

Next Steps to Move BC through the Pandemic

K-12 Education Restart Plan

BC COVID-19 Go-Forward Management Strategy,

BC's COVID-19 Go-Forward Management Checklist

WorkSafeBC's COVID-19 Information and Resources and COVID-19 Frequently Asked Questions.

WorkSafeBC Returning to Safe Operation

WorkSafeBC A Guide For Employers And Occupational First Aid Attendants

Order of the Provincial Health Officer

Key Steps To Safely Operating Your Business Or Organization And Reducing Covid-19 Transmission

<u>Guidelines for Re-Entry into the School Setting During the Pandemic: Managing the Social-Emotional and Traumatic Impact</u>

SD83's Safety Plan guidance for educators, administrators and support staff to prevent the transmission of COVID-19 and maintain a safe and healthy environment for students, families and staff. This document identifies key infection prevention and control practices to implement, as well as actions to take if a student or staff member develops symptoms of COVID-19.

4. DEFINITIONS

Health Hazard means

- 1. A condition, a thing or an activity that:
 - a. endangers, or is likely to endanger, public health, or
 - b. interferes, or is likely to interfere, with the suppression of infectious agents or hazardous agents, or
- 2. A prescribed condition, thing or activity, including a prescribed condition, thing or activity that:
 - a. is associated with injury or illness, or
 - b. fails to meet a prescribed standard in relation to health, injury or illness.

Undue Hazard is an "unwarranted, inappropriate, excessive, or disproportionate" hazard. For COVID-19, an "undue hazard" would be one where a worker's job role places them at increased risk of exposure and adequate controls are not in place to protect them from that exposure.



5. RESPONSIBILITIES:

Employers are responsible for the health and safety of their workers, and all other workers at their workplace. They are responsible for completing and posting the COVID-19 Safety Plan and to train and educate everyone at the workplace of the contents of that plan. Employers are also responsible for having a system in place to identify the hazards of COVID-19, control the risk, and monitor the effectiveness of the controls.

Workers are responsible for taking reasonable care to protect their own health and safety and the health and safety of other people at workplace. In the context of COVID-19, this means workers are responsible for their own personal self-care, which includes frequent hand washing and staying home when sick. Workers are also responsible for reporting unsafe conditions to their employer, and following the procedures put in place by the employer to control the risks associated with COVID-19.

The **owner** or the **prime contractor** (in this case School District No. 83) is responsible for coordinating health and safety at a workplace where workers of two or more employers are working at the same time. This includes doing everything that can reasonably be done to establish and maintain a system or process to ensure compliance with WorkSafeBC laws and regulations generally, including ensuring an effective system to control the risks associated with COVID-19.

Occupational First Aid Attendants (OFAAs)

During the COVID-19 pandemic, occupational first aid attendants (OFAAs) continue to provide treatment to workers as necessary. Because of the possibility of community infection, you may need to modify your standard protocols for first aid treatment to reduce the potential for transmission. Please see the attached <u>safe work practice</u> for precautions.

6. RESOLVING CONCERNS ABOUT UNSAFE WORK

Workers have the right to refuse work if they believe it presents an undue hazard. If the matter is not resolved, the worker and the supervisor or employer must <u>contact WorkSafeBC</u>. Once that occurs, a prevention officer will consult with workplace parties to determine whether there is an undue hazard and issue orders if necessary

For more information, see Occupational Health and Safety <u>Guideline G3.12</u>.

7. LEGISLATIVE QUESTION OR CONCERNS

Workers and employers with questions or concerns about workplace exposure to the COVID-19 virus can call WorkSafeBC's Prevention Information Line at 604.276.3100 in the Lower Mainland (toll-free within B.C. at 1.888.621.SAFE). You'll be able to speak to a prevention officer to get answers to your questions, and if required, a prevention officer will be assigned to assess the health and safety risk at your workplace.

8. PROTECTING MENTAL HEALTH

Workers in the workplace may also be affected by the anxiety and uncertainty created by the COVID-19 outbreak. It's important to remember that mental health is just as important as physical health, and to take measures to support mental well-being. Here are some resources that can assist with maintaining mental health in the workplace during this time.

- <u>COVID-19 Psychological First Aid Service: Information and Signup</u> (British Columbia Psychological Association) – Free virtual counselling provided by registered psychologists.
- <u>COVID-19</u>: Staying Well In <u>Uncertain Times</u> (Canadian Mental Health Association B.C.) Tips and information on how to reduce and manage anxiety in the workplace due to the COVID-19 outbreak.



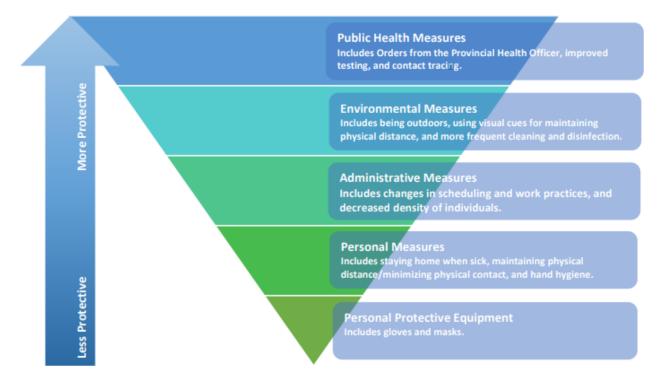
- Managing COVID-19 Stress, Anxiety and Depression (Ministry of Mental Health and Addictions) -Tips and resources on things we can do as individuals and collectively to deal with stress and support one another during these challenging times.
- Mental Health and Psychosocial Considerations During COVID-19 Outbreak (World Health Organization) – These mental health considerations were developed by the WHO's Department of Mental Health and Substance Use as messages targeting different groups to support for mental and psychosocial well-being during COVID-19 outbreak.
- Mental Health and COVID-10 (Conference Board of Canada) Videos on different aspects of mental health, including coping with anxiety, job loss, and dealing with isolation.
- <u>Taking Care of Your Mental Health</u> (COVID-19) (Public Health Agency of Canada) Tips and resources for taking care of your mental health during the COVID-19 outbreak.
- <u>Life Works</u> SD83 EAP. Username: shuswapsd83 Password: healthy
- Talk to your Supervisor, Union Representative or HR Coordinator Health Safety and Wellness for assistance and navigation through these unprecedented times.

9. INFECTION PREVENTION AND EXPOSURE CONTROL MEASURES:

Infection prevention and exposure control measures help create a safe environment for students and staff. Infection Prevention and Exposure Control Measures for Communicable Disease describes measures that can be taken to reduce the transmission of COVID-19. Control measures at the top are more effective and protective than those at the bottom. By implementing a combination of measures at each level, the risk of COVID-19 is substantially reduced.



The Hierarchy for Infection Prevention and Exposure Control Measures for Communicable Disease



- 9.1. Public Health Measures are actions taken across society at the population level to limit the spread of the SARS-CoV-2 virus and reduce the impact of COVID-19. The Provincial Health Officer has implemented public health measures, including: prohibiting mass gatherings, requiring travelers to self-isolate or quarantine upon arrival in B.C., effective case finding and contact tracing, and emphasizing the need for people to stay home when they are sick.
- 9.2. Environmental Measures are changes to your physical environment that reduce the risk of exposure. Examples include being in outdoor spaces, ensuring good ventilation and air exchange, using visual cues for maintaining physical distance, erecting physical barriers where appropriate and frequent cleaning and disinfection.
- 9.3. Administrative Measures are measures enabled through the implementation of policies, procedures, training and education. Examples of these include health and wellness policies, decreased density in classrooms, staggered schedules and using virtual learning opportunities.
- 9.4. Personal Measures are actions individuals can take to protect themselves and others. Examples include maintaining physical distance/minimizing physical contact, washing your hands frequently, coughing into your elbow and staying home from work if you are sick.
- 9.5. Personal Protective Equipment is the last and least effective of the infection prevention and exposure control measure and should only be considered after exploring all other measures. PPE is not effective as a stand-alone preventive measure, should be suited to the task, and must be



worn and disposed of properly. Outside of the health care settings, the effectiveness of PPE is generally limited to protecting others should you be infected.

SD83 has implemented a combination of measures at different levels, as described in this document. This document includes Environmental, Administrative, Personal Measures and the use of PPE.

10. UNDERSTANDING AND ASSESSING THE RISK OF COVID-19 TRANSMISSION

SD83 will continue to assess the risk in our schools and buildings in order to identify places where the risk of transmission is introduced. This can be achieved by a collaborated approach with Management and through the Joint Health and Safety Committee. SD 83 encourages all workers who have safety concerns to raise those concerns to your joint health and safety committee member or for immediate assistance talk to your supervisor, union rep or HR Coordinator Health Safety and Wellness.

The virus that causes COVID-19 spreads in several ways, including through droplets when a person coughs or sneezes, and from touching a contaminated surface before touching the face. Higher risk situations require adequate protocols to address the risk.

- The risk of person-to-person transmission is increased the closer you come to other people, the amount of time you spend near them, and the number of people you come near. Physical distancing measures help mitigate this risk.
- The risk of surface transmission is increased when many people contact same surface, and when those contacts happen in short intervals of time. Effective cleaning and hygiene practices help mitigate this risk.

See SD83 Risk Assessment

11. BACKGROUND:

11.1 What We Know About Covid-19 in Children

 COVID-19 virus has a very low infection rate in children and youth. In BC, less than 1% of children and youth tested have been COVID-19 positive. Most children and youth are not at high risk for COVID-19 infection.



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- Children under 1 year of age and those who are immunocompromised or have pre-existing pulmonary conditions are at a higher risk of severe disease (visit the <u>BCCDC Priority</u> Populations page for further details
 - Children who are considered more vulnerable can receive in-person instruction. Parents and caregivers are encouraged to consult with their health care provider to determine if their child should attend in person instruction if they are uncertain.
- Children and youth typically have much milder symptoms of COVID-19 most often presenting
 with low-grade fever and a dry cough. GI symptoms are more common over the course of
 disease, while skin changes and lesions, are less common.
- Many children have asymptomatic disease. However, there is no conclusive evidence that children who are asymptomatic pose a risk to other children or to adults.
- Evidence indicates transmission involving children is primarily limited to household settings, and from COVID-19 positive adults to children. Most cases in children have been linked to a symptomatic household member.
- Clusters and outbreaks involving children and youth are unusual and tend only to occur in areas where there are high levels of community spread.
- Children are not the primary drivers of COVID-19 spread in schools or in community settings.
- Schools and childcare facility closures have significant negative mental health and socioeconomic impacts on vulnerable children and youth.
- Prevention measures and mitigation strategies involving children and youth must be commensurate with risk.
- Adolescent children should physically distance themselves where possible when outside the family unit or household.
- For younger children maintaining physical distance is less practical and the focus should be on minimizing physical contact instead.

See Provincial Health Guide for K-12 Setting.

11.2 COVID-19 and Adults

While COVID-19 impacts adults more than children, some adults with specific health circumstances are at an increased risk for more severe outcomes, including individuals:

- Aged 65 and over,
- With compromised immune systems, or
- With underlying medical conditions.

Most adults infected with COVID-19 will have mild symptoms that do not require care outside of the home.

12. PUBLIC HEALTH MEASURES

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, the 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. Large assemblies of staff and students should not be held.

In the classroom physical distancing is not an expectation for students of SD83 as per Ministry Direction, at the same time, it is important that we do what we can to try to assist children to understand the importance of minimizing the frequency of physical contact with one another. From a public health perspective, there are ratios are set that prescribe the number of adults and children that can be present in the same space at any given time. Please see Return to Class Document for further information.

12.1. If a Child or Staff Member is III

Within normal educational settings, children and staff will often have influenza or other respiratory viruses with symptoms similar to COVID-19. For this reason, all children and staff who are ill with fever or infectious respiratory symptoms of any kind need to stay home and be assessed by their health care provider and tested for COVID-19.

If you are at all unsure of your status, the <u>COVID-19 Symptom Self-Assessment Tool</u> is a valuable resource to help assess whether you should be staying home or not.

When someone is symptomatic, they should <u>self-isolate</u> 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 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.

12.2 Case Finding, Contact Tracing and Outbreak Management

Active testing of people with mild COVID-19 like symptoms (case finding) helps 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. 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.

13. ENVIRONMENTAL MEASURES

Cleaning and Disinfection Regular cleaning and disinfection are essential to preventing the transmission of COVID-19 from contaminated objects and surfaces. SD 83 and staff all have a joint shared responsibility to ensure our work areas are clean.

Schools should be cleaned and disinfected in accordance with the <u>BCCDC's Cleaning and</u> 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. doorknobs, light switches, toilet handles, tables, desks, chairs, electronic devices, keyboards and toys)
- Bathrooms will be cleaned and sanitized by custodian's twice a day.
- Clean and disinfect any surface that is visibly dirty.
- SD 83 will be utilizing <u>Vital Oxide</u> as the sanitizing agent in classrooms. See below for application process.
- Remove items that are not easily cleaned if possible (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.
- Washrooms should be cleaned at least twice a day keeping in line with the high touch surface area protocols.

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

Plan to reduce the risk of transmission:

- Providing paper hand towels for hand drying only.
- Disabling water fountains. Students shall bring water bottles.
- Provision of cleaning products for common devices and materials used for the delivery of education (e.g. photocopiers, supply rooms, etc.).
- Post signage outside bathrooms to ensure timelines.

13.1. Application Process for Vital Oxide

The Custodial Department shall supply each classroom, photocopy room, lunchroom with a premixed bottle of <u>Vital Oxide</u> and a green microfiber cloth. SD83 asks that all staff take a personal responsibility to keep and maintain your personal work area clean and sanitized. Please take that extra minute to wipe down the photocopier after you have used it; wipe down your lunch room table after you have finished lunch and after a meeting please wipe down table, keyboard and mouse. We must work together and keep each other safe.

If you have any questions about product or process please see your custodian for assistance.

Prior to utilizing Vital Oxide use regular cleaning process of soap and water for visibly soiled areas. Vital Oxide is only to be used for sanitization purposes. (i.e. glue, food, dirt etc.)

Option 1:

Spray onto surface (hard or fabric) and let dry, no requirement to wipe off. (i.e. sanitize desk/chair), Dry time is 10 min.

Option 2:

Spray product onto microfiber cloth to dampness and wipe the surface of smaller objects, no requirement to dry with towel let air dry. (i.e. toys, hula hoops, bins)

Note: Microfiber cloths shall only be used with Vital Oxide, do not use paper towel. At end of week Custodians will collect cloths from all areas and ensure laundering. If you should run out of Vital Oxide please see your custodian for more product.

14. CLEANING PROCEDURES FOR NOTEBOOKS, ALL-IN-ONE DESKTOPS, AND MONITORS:

| Do not use wipes containing sodium hypochlorite (bleach) or chlorine-based solutions |
|--|
| Do not use Ketone type materials (ex. Acetone), Ethyl alcohol, Toluene, Ethyl acid, or |
| Methyl chloride. |
| Do use Vital Oxide |

14.1Caring for Technology

Occasionally clean the exterior of your computer as follows:

- 1. Use only mild cleaning solutions (non-ammonia based and non-abrasive) and a damp lint-free, soft cloth to clean the painted surfaces of the computer.
- 2. Apply Vital Oxide onto the cloth.
- 3. Absorb the sanitizer into soft cloth.
- 4. Squeeze out any excess liquid from the sponge or cloth.
- 5. Wipe the cover using a circular motion taking care not to let any excess liquid drip.
- 6. Wipe the surface to remove any left-over sanitizer.
- 7. Rinse the sponge or cloth with clean running water and squeeze out any excess liquid.
- 8. Wipe the cover with soft cloth.
- 9. Wipe the surface again with a dry, lint-free, soft cloth.
- 10. Wait for the surface to dry completely and then remove any fibers left from the sponge or cloth.

A. Cleaning your computer keyboard

- 1. Absorb some Vital Oxide on a lint-free, soft cloth.
- 2. Squeeze out excess liquid from the lint-free, soft cloth.
- 3. Wipe the keytop surface with the lint-free, soft cloth, ensuring no liquid drips on or between the keys.
- 4. Allow to dry.

Notes:

- Never spray or pour any liquid cleaner directly on the LCD display or the keyboard.
- You can use compressed air from a compressed air can to remove any crumbs and dust from beneath the keys. Do NOT use an air compressor.

B. Cleaning your computer LCD display

- 1. Gently wipe the display with a dry, lint-free, soft cloth.
- 2. Wipe or dust the stain gently with a dry, soft cloth.



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- 3. If a stain, smudge, or other blemish remains, moisten a lint-free, soft cloth with Vital Oxide.
- 4. Wring out as much of the liquid as you can from the lint-free, soft cloth.
- 5. Wipe the display again; do not let any liquid drip into the computer.
- 6. Allow the display to dry, then close the lid if the computer has one.

Notes:

• Anti-static LCD cleaning cloths, Kim Wipes, and some types of lens cleaning wipes are also acceptable alternatives for a lint-free, soft cloth.

C. Disinfecting your computer, keyboard and LCD display

- 1. Apply Vital Oxide onto the cloth, squeeze out excess liquid from wipe or disinfecting cloth before using
- 2. It is safe to use a disinfecting wipe designed for office/home use. Some disinfecting wipes designed for medical use may cause discoloration, harm surfaces, or even affect functionality of your device. To minimize symptoms, we recommend the following:
 - a. Gently wipe the system thoroughly, being careful to ensure no liquid drips into the computer. Do not wipe on connector pins.
 - b. After disinfecting, follow the cleaning procedure from the wipe supplier to minimize chemical buildup of disinfectant residue (i.e. wiping away any residual disinfectant after the prescribed contact time). Always allow the computer to completely dry prior to any use.
- 3. Medical wipes and their chemical composition vary greatly. Depending on the chemicals, frequency, and duration of use, medical wipes may impact cosmetic appearance¹ and system functionality². To minimize this risk, we recommend:
 - a. Hydrogen peroxide wipes (such as Virox Accel wipes w/ a maximum of 0.5% hydrogen peroxide)
 - b. Alcohol based wipes (such as PDI Germicidal or B.Braun Meliseptol Wipes sensitive)
 - c. Do not use wipes containing sodium hypochlorite (bleach)
 - d. Wiping away residual solvent as soon as possible after the prescribed contact time and wiping the surface again with a dry, lint-free, soft cloth

Note:

¹Cosmetic appearance could include (but is not limited to) discoloration, residual material build-up, and paint bubbling.

²System functionality could include (but is not limited to) corrosion and function failure of electrical parts.



15. ARRIVAL PROCEDURES

Physical distancing of 2 meters must be maintained at arrival and check-in regardless of the number of parents/caregivers arriving with children. Parents must remain outside of the Childcare space and/or school to drop off their children. They must not enter the Childcare space. Child Health Screening Parents/caregivers are required to keep symptomatic children home. Children showing symptoms of COVID-19 or with a temperature greater than 38°C must not be allowed in the Childcare area. Parents/caregivers must communicate with school or childcare staff upon arrival and assist in completing the site's daily health care screening for their child. Health care screening must be completed each day prior to the child being granted access.

See Health Check below.

INSTRUCTIONS

Complete this Health Check Daily,

Contact Principal facility if student or staff answers yes to any of the Health Check Questions:

Please remember we are looking for symptoms that are not normal.

| Name: | Date: |
|--|-------------|
| Time: | AM □ □PM |
| Location: | AMI LI LIFM |
| Do you have a fever? (<37°) | Yes □ □No |
| Do you have Chills? | |
| 2 | Yes 🗆 🗆 No |
| Are you experiencing any of the following | |
| Shortness of Breath | Yes □ □No |
| Difficulty in breathing | |
| Chest Pains. | Yes □ □No |
| | Yes No |
| Feelings of confusion, Loss of consciousness | Yes □ □No |
| Loss of consciousness | Yes 🗆 🗆 No |
| Do you have a sore throat and | Yes 🗆 🗆 No |
| painful swallowing? | |
| Do you have an unusual stuffy or | Yes □ □No |
| runny nose? | |
| Have you experienced a loss of sense of smell? | Yes 🗆 🗆 No |
| Are you experiencing an unusual headache? | Yes 🗆 🗆 No |
| Are you experiencing muscle | Yes □ □No |
| aches? | 1 6 6 |
| Are you more fatigued than normal? | Yes 🗆 🗆 No |
| Are you experiencing a loss of appetite? | Yes 🗆 🗆 No |
| Have you travelled to any countries outside Canada (including the USA within the last 14 days? | Yes □ □No |
| Have you been in close contact with a person confirmed COVID-19? | Yes 🗆 🗆 No |

15.1 Access Control

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

16. ADMINISTRATIVE MEASURES

16.1 Physical Distancing and Minimizing Physical Contact

Physical distancing (e.g. maintaining a dist10ance of 2 metres between two or more people will be challenging within SD83, 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 within SD83: (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".
- The number of students in a space should not exceed the ability to maintain health and safety measures.
- 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).
- Stagger pick-up and drop-off times (including bussing) if possible.
- 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.
 - 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.



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- Utilize <u>barriers</u> for reception areas if possible.
- 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 the 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.
- Help younger children learn about physical distancing by creating games. Help younger children learn about physical distancing by creating games. Older children can be provided age appropriate reading material and encouraged to self-regulate.
- Regularly clean and sanitize items that are designed to be shared such as manipulatives or electronics. Remove all non-essential toys by covering or storing.
- Set up mini environments within the school to reduce number of children in a group.
- Consider different classroom configurations to maintain distance between children (e.g. separating desks) or different locations in the school (e.g. gym or library, outside).
- Increase the space between children (i.e. use a holla hoop) and staff during activities such as snack/lunch, i.e., move or separate tables, move chairs farther apart.
- Empty Sensor Bins and cover.
- For K-3 create personal bins or zip lock bags that contain personal use aid and items.
- Roll up and remove portable carpets.
- Remove cushion and plush animals, puppets, dolls etc.
- Consider staggering snack/lunch time to accommodate smaller groups/more space.
- Discourage any food or drink sharing.
- Use educational videos/online programs /social stories as a part of learning
- Encourage independent learning and distancing from each other.
- Set up distinct areas for children who may have symptoms of illness until they can be picked up and ensure these areas are sanitized regularly.

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16.2 Where physical distance cannot be maintained.

- Consider separating people with partitions or plexiglass barriers.
- Where other measures are not sufficient, consider the use of non-medical masks, understanding that these have limitations. Contact HR Coordinator Health Safety and Wellness to access masks.
- Selecting and using masks
- How to use a mask

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16.3 Communication Plans and Training

- Ensure this Safety Plan is posted on safety board and keep only current copy, as things change there will be updates;
- · Discuss this Plan at Staff Meetings;
- Ensure staff and students are aware they are to stay home if they are sick.
- Post signage, <u>including occupancy limits</u> and effective <u>handwashing practices</u>. Signage should also be posted at the main entrance indicating who is restricted from entering the premises (including <u>visitors</u> and workers with symptoms.)

17. SAMPLE PROTOCOLS TO MAINTAIN ADMINISTRATIVE MEASURES:

Please note the following Administrative Measures are only suggestions and a sample that you may want to include in your plan. The measures created should be dependent upon the school or building.

17.1. Photocopy Room

- Depending on the size of the room a max occupancy number may be beneficial to ensure adequate spacing (Sign identifying number should be posted)
- Hand sanitizer should be used before and after using the photocopier or other equipment in the room.

17.2. Office

- Depending on the size of the office a max occupancy number may be beneficial to ensure adequate spacing and limit the flow of traffic through the office.
- If you choose to keep the exterior doors locked, post contact numbers on front of door so the visitors may access reception.

17.3. Daily Announcements

Principal should continue to complete daily announcements instead of students.

17.4. Crossing Guard Duty

• Staff Supervisors will do crossing guard duty without student helpers.

17.5. Supervision

- Supervision schedules will be organized by school.
- School staff will be responsible for supervising the students in their Pod at recess and lunch times according to a staggered schedule.

17.6. Arrival/Drop-Off

Staff:

Staff enter through main entrance as per normal;

- Hand sanitizer will be available to sanitize hands upon entry
- Proceed to washing hands with soap and water for min 20 seconds.

Students:

- Identify the need for staggered drop- off times, and multiple drop off locations.
- Parents will be instructed to drop their child/children off between 7:50 and 8:08. Parents should not be arriving earlier or later than this drop off window.
- When students arrive at school, they should go directly to a health check station.
- Parents/caregivers should not leave until the health check is complete. If parents do leave and the student does not pass the Health Check, the student would remain in an isolation station until the parent is able to return to pick them up.
- Teachers on supervision and CEA's will staff the Health Check stations according to a predetermined schedule.
- The Principal will also be on supervision and will have the duty to re-evaluate students as necessary and make the final call as to whether or not the student would be able to attend school if the student does not pass the Health Check.
- Once students complete their Health-Check they would go directly to their classroom door to line up.
- Lines shall be drawn on sidewalk outside doors to encourage adequate spacing.

Note: Students who are late shall report to the main entrance for their health check. Parents will be required to contact the school ahead of time to ensure staff member is there to meet them and that a health check is completed.

17.7. Dismissal/Pick-up

To avoid the congregation of families around the school at the end of the day each school shall arrange staggered pick-up times. There will be two dismissal times. Please note these are suggested times, each school may provide different times and adjusted schedules to accommodate their school site specific plan.

1:50pm-2:05pm - Parent Pick-up

 Parents would pick-up from classroom door or arrange with teacher to dismiss early for pick-up in parking lot or across the field. Parents would leave for home immediately after pick-up. Non-enrolling staff would be on supervision outside during this pick-up time.

2:07pm dismissal - Walkers/Busses/Daycare

- Extra supervision will be provided in Bus/Daycare pick-up area. Lines on sidewalk will be used to encourage social distancing as student wait for pick-up.
- Students walking would be directed to leave for home immediately.

Lunch & Recess

In preparation for Lunch and recess a schedule should be introduced below is a sample of a lunch and Recess schedule:

Eating Time

- Classes shall eat first so that the teacher can ensure proper hand washing and food preparation.
- All students will wash hands before eating.
- o There will be no sharing of food.
- Eating time will occur 15min before the beginning of the scheduled lunch recess time for each class.

Lunch Recess

There will be multiple shifts of lunch recess time, plus a 5- minute buffer between shifts. School staff, under the direction of the Principal will arrange supervision of students in smaller groups than normal. Each Pod will be assigned a specific space to play according to the schedule.

11:15 – Divisions 1 & 7 (up to 60 students)

11:50 – Divisions 2 & 6 (up to 60 students)

12:25 – Divisions 3, 4 & 5 (up to 70 students)

At the end of lunch/recess student will return to their classroom door. Teacher greets students at door and follows classroom entry/handwashing procedure.

A similar schedule will be determined for short recess.

9:35 – Divisions 1 & 7 (up to 60 students)

9:55 – Divisions 2 & 6 (up to 60 students)

10:15 – Divisions 3, 4 & 5 (up to 70 students)

Note: Exterior classroom doors should be locked during recess times. Students should only be accessing the school, with permission from their CEA supervisor and a previously identified entrance.

17.8. Staff Room

- Limit the amount of staff in staff room. (Post signage)
- Staff can still access the staff room outside their scheduled times, as long as the maximum number of people is not exceeded.
- Remove excess chairs to ensure adequate space.

17.10. Gym

- If possible, Students will participate in PE activities outside.
- If Gym is to be used, ensure class size is small (50%).
- Ensure activities are non-contact.
- Gym equipment can be used as long as it is cleaned prior to next use.
- No equipment can be used if it encourages contact sports. I.e., football, basketball.

17.11 Hallways

- There should be minimal student travel in the hallways except for students going to the washroom.
- Lines could be placed down the center of the hallway for separate traffic flow. Keeping with the "Keep right" rule when walking down the hallway.

17.12 Music

- Participate in Musical activities can occur outside, in regular classroom or in Music Room.
- If Class is conducted in Music Room ensure all students have access to chairs that can be easily cleaned if seating will be shared.
- If there is a need for carpet use ensure that sanitizing product is utilized and drying time has occurred prior to next class.
- For shared instruments (non-oral) cleaning after each use is mandatory.
- Please refrain from utilizing oral musical instruments unless each student has their own that they bring to class.

17.13 Student Washrooms

• 2-students max (occupancy signs should be posted)

17.14 Drama/MPR

• Closed for now. Students can participate in Drama activities outside.

17.15 Library

- Closed for now. Students can be taken outside for lessons or remain in classroom.
- Extra classroom furniture can be labelled and stored in library.
- Students should not share library books from teacher's library. If a book is to be issued wait 24 before re-issuing it again.
- If a book is accidentally shared clean your hands after touching a shared book and don't touch your face, let them sit for 24 hours and they should be good to be redistributed.

17.16 Student Behavior

- In addition to the expectations we already have at school, students will also be expected
 to adhere to the new safety guidelines in place. Students that cannot follow the rules we
 have put in place to ensure everyone's safety will not be allowed to participate in in-class
 instruction.
- Teachers should contact PVP on Teams when there is unacceptable student behavior.

17.17 Drinking Water

- Water fountains will be block off, students to bring water from home.
- In many classrooms, students can fill their water bottle at their sink after the water is run for 60 seconds.

17.18 Student Transportation on Buses

Buses used for transporting students should be cleaned and disinfected according the guidance provided in the <u>BCCDC's Cleaning and Disinfectants for Public Settings document</u>. Additional measures should be taken, including:

- Encouraging private (e.g. parents or caregivers) vehicle use where possible to decrease transportation density.
- Have students sit in their own window seat.
- Students from the same household can share seats if space is limited.
- Please see Transportation Safety Plan for further information.

18 PERSONAL MEASURES

18.1 Hand Washing

Thoroughly washing your hands with soap and water is the best protection again illness.

Follow this instruction for handwashing:

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

Resource: BC Centre for Disease Control | BC Ministry of Health Hand Hygiene;

18.2 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. This measure is unachievable currently; however, we will be exploring availability in Fall.
- Consider alcohol-based hand rub dispensers where sinks are not available, and posters to promote the importance of regular hand washing.
- 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.

18.3 Hand Washing Staff and children should wash their hands:

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

18.4 Hand Sanitizer:

The custodial department will supply each classroom with a bottle of hand sanitizer. Please see custodial if you require a refill. Other bottles of hand sanitizer will be located around facility at the discretion of the principal. Sani Soft SDS

(Custodial Department has ordered portable stations however still under backorder)

How to User Hand Rub:

- 1. Ensure hands are visibly clean (if soiled, follow hand washing steps)
- 2. Apply about a loonie-sized amount to your hands.
- 3. Rub all surfaces of your hand and wrist until completely dry (15-20 seconds)

18.5 Coughing and Sneezing Etiquette

- Cough and sneeze into the crease of the elbow or tissue and dispose of tissue into waste bin.
- If there is not tissue cough or sneeze into the bend of your elbow, not your hand, wash hands immediately.





19 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.

Managing students with complex behaviors, on a delegated care plan or experiencing a
health emergency may require staff to be in close physical proximity with the student. An
addition to the student's safety plan may require consultation with HR Coordination Health
Safety and Wellness.

No additional personal protective equipment beyond normal universal precautions are required. 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 here.

APPENDIX:

1. POSTER LINKS:

Authorized Personnel
COVID-19 Health Check Station
Hand Sanitizing Station
Hand Washing- Students
Hand Washing- Staff
Medical Isolation Room
Visitor Check List
Washroom Cleaning Log

2. AUTHORIZED PERSONNEL



To Contact School Office Please call:

3. COVID-19 HEALTH CHECK STATION







MANDATORY TEMPERATURE SCREENING STATION

4. HAND SANITIZING STATION



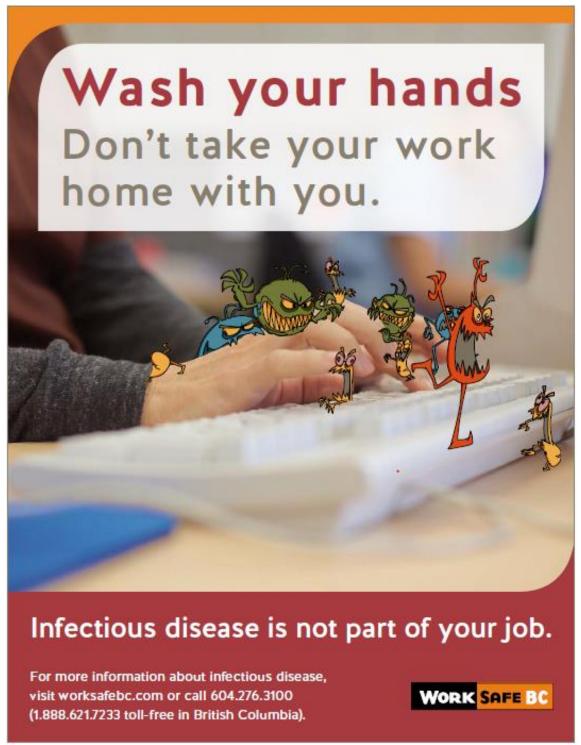
HAND SANITIZING STATION



5. HAND WASHING - STUDENTS



6. HAND WASHING - STAFF



7. MEDICAL ISOLATION ROOM



8. VISITOR CHECK LIST

Help prevent the spread of COVID-19

Please do not enter this workplace if you:

- · Have any of the following symptoms:
 - Fever
 - Chills
 - New or worsening cough
 - Shortness of breath
 - New muscle aches or headache
 - Sore throat
- Have travelled outside of Canada within the last 14 days
- Are a close contact of a person who tested positive for COVID-19

All other visitors, please wash your hands or clean them with hand sanitizer before and after your visit. Please maintain physical distancing of 2 metres.

If you are displaying symptoms of COVID-19, refer to HealthLink BC at 811.

worksafebc.com





9. WASHROOM CLEANING LOG

Washroom Cleaning Log

| | Room Location: | |
|-------|----------------|--|
| Site: | | |

| | | | 8:00 | 9:00 | | 11:00 | 12:00 | 1:00 | 2:00 | 3:00 | 4:00 | 5:00 |
|---------|---------|---------|------|------|----------|-------|-------|------|------|------|------|------|
| Date | Initial | 7:00 AM | AM | AM | 10:00 AM | AM | PM | PM | PM | PM | PM | PM |
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10. SAFE WORK PROCEDURE: FIRST AID PROTOCOLS – COVID-19

| Schoo | pard of Education of I District No. 83 (North Igan-Shuswap) | First Aid Protoc | First Aid Protocols – COVID-19 Pandemic | | | |
|--|---|---|--|--|--|--|
| Department / Area: | Approved By: | Date Created: | Review / Revised date: | | | |
| All Schools | Brenda Mackay | 5/26/2020 | 5/26/20 – uncontrolled copy | | | |
| | Potential Hazards: | | Personal protective equipment / devices | | | |
| | Fill in those that apply | / | required / other safety considerations | | | |
| H M L RISK FOR INJU | ned postures ns ons on dges H M L F | roken Glass adiation Burns nclement Weather pronavirus raffic | PPE: 1. Gloves 2. Face Shield or Surgical Mask 3. Glasses or Goggles 4. Apron or Lab Coat 5. Pocket Mask Supplies: 1. Soap or Hand Sanitizer 2. Disinfectant 3. Disposable sheets/pillowcases 4. Blankets | | | |
| Chemicals Chemicals Chemicals Chemical patho Chemicals | cold | | Training / Reference information 1. WorkSafeBC OFAA Protocols 2. HealthLinkBC 3. BC Centre for Disease Control 4. Public Health Agency of Canada 5. BC COVID-19 Symptom Self-Assessment Tool 6. Hand Hygiene 7. How to Wear A Surgical Mask | | | |

HAZARD ALERT:

Before performing First Aid on a worker be sure to follow all safety protocols outlined below. Failure to do so could result in yourself or your patient becoming ill.

Note: Signs and symptoms of a musculoskeletal injury (MSI) can include pain, burning, swelling, stiffness, numbness/tingling, and/or loss of movement or strength in a body part. Report these to your supervisor

SD83 will ensure that workers are trained and follow this safe work procedure

Steps to perform this task safely.

- 1. Steps to Follow When a Worker Requires First Aid Treatment:
 - 1. When First Aid is requested, you need to know:
 - a. What are the circumstances;
 - b. Are critical interventions likely required? If so, call 911 or have an emergency transport vehicle prepared:
 - c. Are there any obvious signs of COVID-19? If so, send the Student or Staff home or to a hospital.
 - 2. If no critical interventions are required, if possible and appropriate, interview the patient from a distance. Ask the following questions:
 - a) Is anyone sick or in self-isolation in your household?
 - b) Have you been in contact with anyone who has been sick?
 - 3. When you arrive at the patient's location, assess the situation:
 - a. Does the patient have a minor injury that the patient can self-treat while you provide direction and supplies?
 - b. If yes, direct the patient to self-treat per your OFA protocols (see the self-treatment scenario below).



- 4. If the patient can't self-treat, don the appropriate level of PPE for the situation. Because the global supply of PPE is scarce, you may need to consider other options.
- 5. After treatment, sanitize all equipment with either soap and water or 70% isopropyl alcohol. Remove and wash any PPE that is not disposable, as well as any exposed clothing. Wash your hands thoroughly.

If critical interventions are required and there is no way of determining background information, don appropriate PPE and limit access to the patient to the number of people required to deal with the critical intervention. It important to limit the exposure of others.

2. Scenario: Self-treatment with direction:

A First Aid Attendant receives a call stating a worker has injured her hand. The attendant collects as much information about the severity of the injury as possible. The injury is deemed to be minor with no other concerns, so the attendant goes to the worker, but stays 2 metres away. On arrival, the attendant asks:

- a) Is anyone sick or in self-isolation in your household?
- b) Are you able to administer First Aid to yourself if I tell you what to do and how to do it?

After the First Aid Attendant has conducted the interview, the attendant visually assesses the patient about underlying conditions relating to the injury.

The attendant then places the required First Aid supplies on a surface 2 metres from the patient. The attendant steps back and directs the patient to pick up and apply the supplies. The First Aid attendant then verbally conducts a modified secondary survey and documents the findings.

3. Scenario: OFA Level 1 and Level 2 with intervention:

A First Aid Attendant receives call about a worker who has been struck in the head and is unresponsive. The attendant immediately ensures that 911 is called. On approaching the scene, the First Aid Attendant conducts a scene assessment and dons the appropriate PPE. Once PPE is on, the attendant approaches the patient and conducts a primary survey to determine what, if any, critical interventions are required. The attendant positions the patient in the three-quarter-prone position to ensure that the airway is open and clear and no further interventions are needed. Only one person (the attendant) needs to be in contact with the patient; all others can stay 2 metres away. The attendant monitors the patient until the ambulance arrives.