

COVID-19 PROTOCOLS FOR SCHOOL & DISTRICT ADMINISTRATORS AND STAFF

Management of Illness and Exposures at School

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INTRODUCTION

This resource is intended to provide K-12 school and district administrators with information on the processes, roles and responsibilities involved in managing symptoms of illness, exposure to COVID-19, and confirmed 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 Communicable Disease Guidance for K-12 School Settings](#), and the [Provincial COVID-19 Health & Safety Guidelines for K-12 Settings](#).

Definitions

Close Contact = Someone who has been near a person with COVID-19 for at least 15 minutes when health and safety measures were not in place or were insufficient, and as such is at increased risk of developing COVID-19.

- Public health determines close contacts as part of the contact tracing process.
- Close contacts are determined by considering how long people were together, physical proximity, the type of interactions they had, and if health and safety measures were in place.
- More information on close contacts is available on the [BCCDC website](#).

Cluster = two or more confirmed cases of COVID-19 that occur among students and/or staff within a 14-day period, and transmission is suspected or confirmed to have occurred within the school/worksites. The determination of *clusters* can only be made by medical health officers.

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 public health to identify people that are close contacts of a confirmed case. Contact tracing helps reduce the chance of spreading COVID-19.

- More information on contact tracing is available on the [BCCDC website](#).

Exposure = A person was at school when they were able to spread COVID-19.

Outbreak = When there is sustained, uncontrolled, widespread transmission of COVID-19 within a school/worksites, and extraordinary public health measures are necessary to stop further transmission in the school/worksites or school community.

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))

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, as well as for some close contacts.

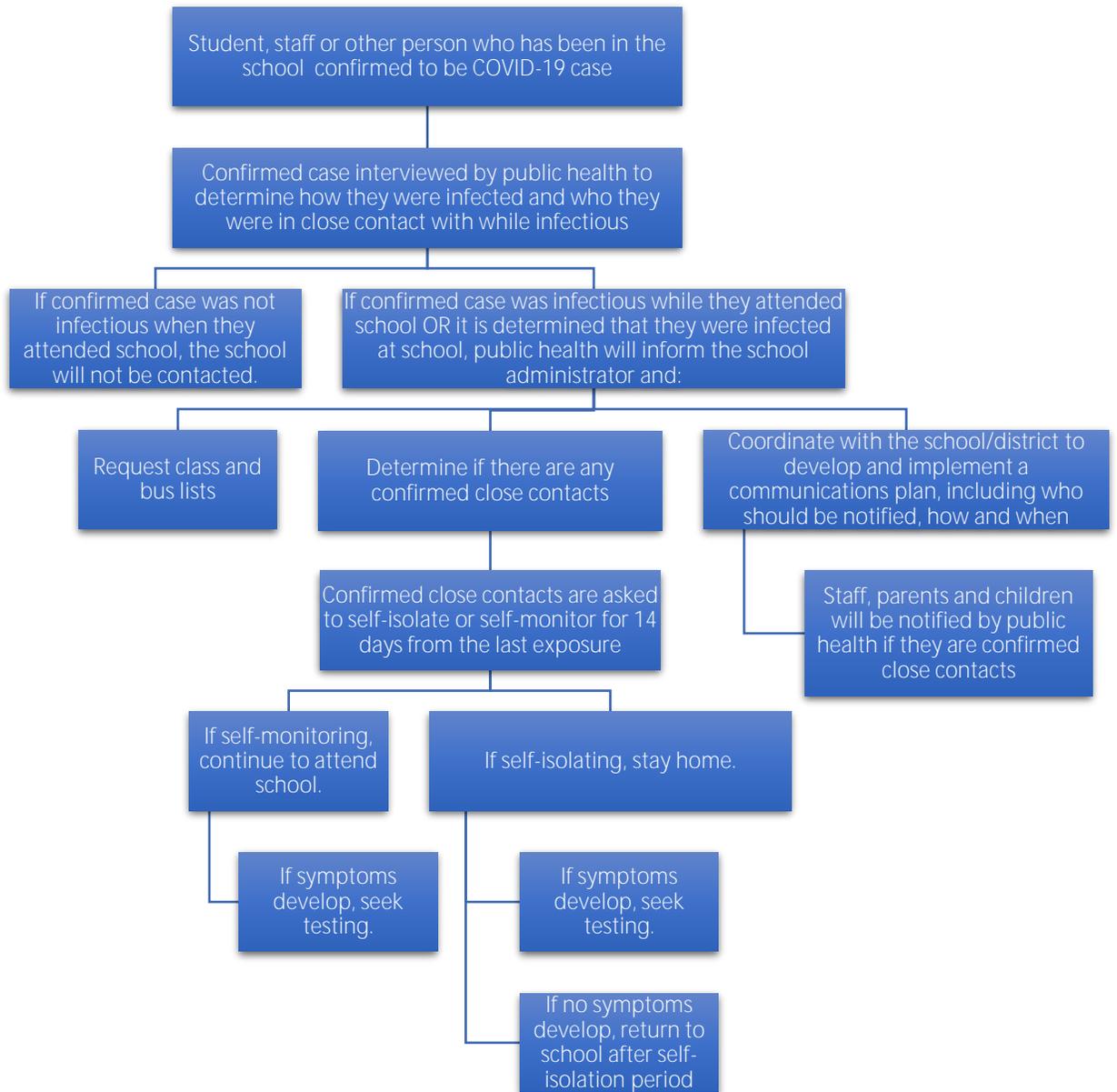
- Close contacts who are not fully vaccinated are more likely to be required to self-isolate than those who are fully vaccinated (i.e., 14 days have passed since their second dose of COVID-19 vaccine).
- Public health will let close contacts know if they should self-monitor or self-isolate.

Self-Monitoring = assessing oneself for symptoms consistent with COVID-19 for 14 days after being exposed, if public health has determined the person does not need to self-isolate.

- Close contacts who have already had COVID-19 or have been partially or fully vaccinated are more likely to be asked to self-monitor than those who are not fully vaccinated (i.e., 14 days have not passed since their second dose of COVID-19 vaccine).
- Individuals who have been exposed but are not determined to be close contacts may also be asked to self-monitor.
- Individuals who have been asked to self-monitor can continue to attend school/work as long as they are asymptomatic. If COVID-19 symptoms develop, they should stay home and get tested.

Figure A: Public Health Actions in Response to COVID-19 Exposure at School

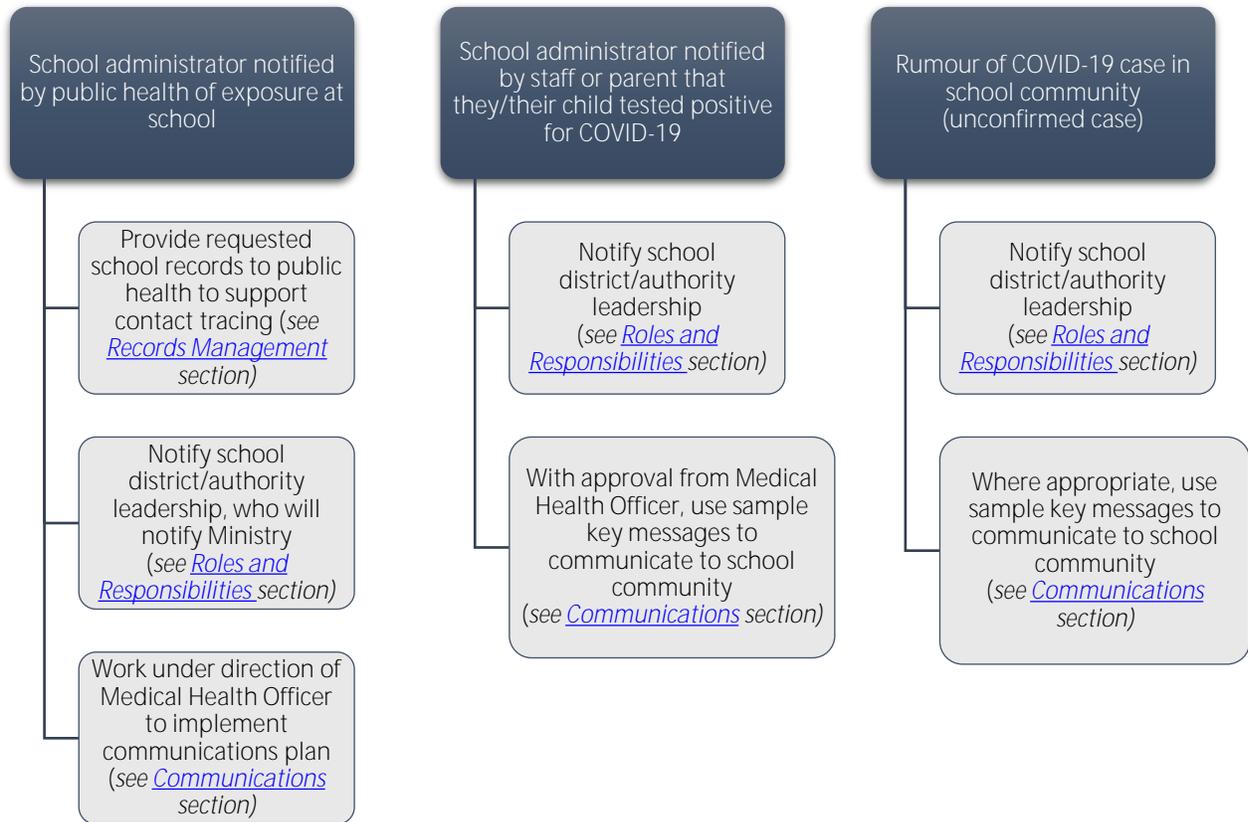
The following outlines the approach public health generally takes when there has been a COVID-19 exposure at a school. The specific actions taken may differ from those outlined here, based on the discretion of the responsible Medical Health officer.



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: School Administrator Actions in Response to Confirmed or Alleged COVID-19 Exposure at a School



MANAGEMENT OF COVID-19 IN K-12 SCHOOLS

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 management and contact tracing systems in place and will continue to monitor cases of COVID-19 in schools and local communities to determine if and when actions should be taken to prevent or control spread.

When a potential exposure at a school is identified, public health will work with the school to understand who may have been exposed and determine what actions should be taken, including identifying if other students or staff are close contacts and need to self-monitor or self-isolate. This may also include working with the school to determine if any additional **measures or changes to the school's** communicable disease plan are required.

Additional measures or changes to a school's communicable disease plan may also be recommended or required in the event of a cluster or outbreak, to prevent further transmission.

Schools and School Districts/Independent School Authorities

School and school district/authority administrators are responsible for:

- Working with school medical officers and other representatives of public health to support contact tracing, and to implement additional recommended measures in the event of an exposure at a school or worksite.
 - Administrators should ensure that TTOCs, itinerant teachers and staff, visitors (e.g. parents/caregivers), volunteers, practicum students and any other district/authority personnel who attended the school on the dates of an exposure are included in attendance records provided to public health to support contact tracing and subsequent communications activities.

- Any additional measures will be determined by the school medical officer and will take into consideration the unique circumstances of the school and the details of the exposure.
- Informing school district/authority leadership and the Ministry of Education in the event of a COVID-19 exposure at the school in a timely manner.
 - See the [Communications](#) section for more information.
- Continuing to implement COVID-19 health and safety policies and procedures, including communicating the importance of a daily health check, and what to do when sick to students and staff.
 - School-level policies and procedures should align with school district/authority policies, [BCCDC guidance](#) and [provincial K-12 communicable disease guidelines](#).

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 health or behavioural reasons, or if the person is experiencing gastrointestinal symptoms and are at risk of vomiting).
- Provide the student/staff with a space where they can wait comfortably and that is separated from others.
 - Younger children must be supervised when separated. Supervising staff should wear a non-medical mask and face shield if they are unable to maintain physical distance, avoid touching bodily fluids as much as possible, and practice diligent hand hygiene.
- Make arrangements for the student/staff to go home as soon as possible (e.g. contact **student's parent/caregiver for pick-up**).
- Clean and disinfect the areas the student/staff used.
 - Staff responsible for facility cleaning should clean and disinfect the **surfaces/equipment which the person's bodily fluids may have been in contact with** while they were ill (e.g., their desk in a classroom, the bathroom stall they used, etc.) prior to the surfaces/equipment being used by others.

- Cleaning/disinfecting the entire room the person was in (a “terminal” clean) is not required in these circumstances.
- Request that the student/staff seek [guidance regarding testing for COVID-19](#), and stay home until symptoms have improved and they feel well enough to participate in all school-related activities (see [Return to School](#) section for more information).

Protocol for a Confirmed Exposure at a School

When a person tests positive for COVID-19, public health initiates 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 person who tested positive attended school when they may have been infectious), public health will work with the school administrator to understand who may have been exposed, and then determine what actions should be taken, including identifying if other students or staff should self-monitor or self-isolate.

If there was no potential exposure at the school (i.e. the person who tested positive did not attend school when they may have been potentially infectious), public health will not notify the school administrator.

Self-Monitoring, Self-Isolation and Additional Measures

Public health will continue to identify and notify close contacts who are required to self-monitor or self-isolate. Due to the effectiveness of COVID-19 vaccines, fully vaccinated close contacts (i.e., 14 days have passed since their second dose of COVID-19 vaccine) are more likely to be asked to self-monitor, not self-isolate. If a person is required to self-isolate, public health ensures they have access to health-care providers and that other appropriate supports are in place.

Students and staff are only required to self-monitor or self-isolate if directed to do so by public health.

School administrators must ensure the necessary plans are in place for students to be able to continue their educational program if they 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 person who tested positive while they were infectious, may also be advised by public health to self-monitor for symptoms.

Those required to self-monitor can still attend school. If they develop symptoms of COVID-19, they should stay home and seek testing.

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 full class(es)
- 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.

Voluntary Closures:

School district/authority administrators should always consult with their school medical officer and K-12 Rapid Response Team prior to making the decision to voluntarily close the school in response to a COVID-19 school exposure (e.g. due to operational challenges caused by multiple staff being directed to self-isolate). School districts and independent school authorities must also immediately report any school closures to the Ministry of Education.

Communications and Protecting Personal Privacy

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

Public health will notify close contacts, 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).

In some regions, public health will request support from schools in distributing notification letters/e-mails. In others, public health will issue the notifications directly via a letter/e-mail or phone call.

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 school exposures unless communications have been reviewed and approved by the school

medical officer or delegate prior to release (see the [Key Contacts](#) section for contact information by health authority).

School and district administrators should be aware that individuals who test positive for COVID-19, or close contacts who are required to self-monitor or self-isolate, 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 exposure 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 exposure.

Additional Scenarios and Communications Protocols

School Administrator or Staff Informed of a Staff or Student Testing Positive for COVID-19

There may be circumstances where a staff member, student or parent/caregiver contacts a school administrator, teacher or support staff to inform them that they/their child tested positive for COVID-19, but the school administrator has not yet been contacted by the school medical officer. Teachers or support staff who receive this type of disclosure should inform their school administrator but should not share the information with other staff or students, recognizing the importance of respecting personal privacy.

School administrators do not need to contact their school medical officer to inform them of the confirmed case – public health 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 person who tested positive was infectious while they were at school (an exposure) or if they were potentially infected 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 a few days from when the confirmed case was notified).

In the interim, school districts/authorities are encouraged to contact their K-12 Rapid Response Team for support. Schools and districts may also 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 or K-12 Rapid Response Team when needed.

- While we have been informed by a member of our school community that there may have been a COVID-19 exposure at our school, this has not been confirmed by public health.
- Please continue to attend school unless notified by public health.
- We are working with public health to determine if there was an exposure. If confirmed, we will follow public health guidance on actions we should take.
- If there was an exposure at school, public health will directly notify confirmed close contacts with further instructions, including if they should self-monitor for symptoms of illness or self-isolation. If you are contacted by public health, please follow their advice carefully.
- The safety and wellbeing of our students, families and staff remains our highest priority. We will continue to implement effective health and safety measures so that children and staff can continue to attend school as safely as possible.
- If you have any COVID-19 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.

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:

- At this time, we have not been notified by public health regarding any COVID-19 exposures at our school.
- If a member of the school community tests positive for COVID-19, public health will contact any individuals who may have been close contacts, including those who may have been exposed at school.
- Please continue to attend school unless notified by public health.

- The safety and well-being of our students, families and staff remains our highest priority. We will continue to implement effective health and safety measures so that children and staff can continue to attend school as safely as possible.

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 and contact their K-12 Rapid Response Team for support if required.

Close Contacts of a Confirmed Case of COVID-19

If public health determines that a student or staff is a close contact of a person who tested positive for COVID-19, the close contact will be asked to self-monitor for symptoms, and may 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.

Close contacts asked to self-monitor may continue to attend school. If COVID-19 symptoms develop, they should stay home and get tested.

Close contacts required to self-isolate must not attend school. School administrators must ensure the necessary plans are in place for students to be able to continue their educational program while absent from school if they are required to self-isolate.

Return to School

When a student, staff or other adult can return to school depends on the type of symptoms they experienced, if a COVID-19 test is recommended and the result of their test. See Appendix A: COVID-19 Symptoms, Testing & Return to School in the [Provincial COVID-19 Communicable Disease Guidelines for K-12](#) for specific guidance.

Some students and staff who were required to self-isolate 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](#)
- [Building Compassionate Communities in a New Normal](#) – recorded webinar for educators
- [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 COVID-19 exposure at school, public health 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 public health upon request.

The following records should be maintained for a period of at least 45 consecutive days:

- Student, staff and visitor attendance (including TTOCs, itinerant staff, volunteers and practicum students)
- Class, activity (e.g. field trip, extracurricular) and school bus lists,
- 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.
- Medical Health Officer Contact Information by Health Authority:
 - Fraser Health, email COVIDSchoolHub@fraserhealth.ca
 - [Interior Health](#)
 - [Island Health](#)
 - [Northern Health](#), email healthyschools@northernhealth.ca
 - [Vancouver Coastal Health](#)