

Schools & COVID-19 FAQ

2021-2022

The intent of this FAQ is to supplement Ontario’s [COVID-19: Health, safety and operational guidance for schools \(2021-2022\)](#), as needed. It contains recommendations that school boards can apply as they see fit.

Guidance given by Public Health reflects a general scenario and is based on current data and local numbers. This information is subject to change as new information or evidence about COVID-19 emerges locally and provincially. This document will be updated if any of the contained information needs to be revised.

If you have any further questions related to COVID-19 and school reopening, please contact **1-844-478-1400** or healthy.schools@healthunit.ca.

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Preparedness Planning & Remote Learning

1. Are there resources to help schools plan for and prevent the spread of COVID-19?

Public Health Ontario’s [COVID-19 Preparedness and Prevention in Elementary and Secondary \(K-12\) Schools checklist](#) is a user-friendly resource to help school administrators, designated school staff and/or public health staff apply relevant provincial guidance to plan for, prevent, and detect COVID-19 in schools.

Public Health Ontario also has series of [refresher presentations](#) for school and childcare settings on preventing COVID-19. They address the topics of COVID-19 transmission, personal protective equipment, mask use for children and youth, hand hygiene, physical distancing, and environmental cleaning.

If a situation arises for all in-person learning to transition to remote learning:

2. How can schools safely use their buses and transportation system to deliver school-based materials (e.g., technology, at home learning items) to families?

Electronics can be cleaned, disinfected and ideally placed into a bag to protect them from contamination. On the bus, the bagged items can be stored in a tote or other container. The person delivering should pass screening, wear appropriate PPE and sanitize hands often using an alcohol-based hand sanitizer. Appropriate PPE for school staff would be medical grade masks. If the person they were dropping off to did not have a mask and physical distancing is not possible, school staff should also don eye protection. Disinfect the area of the bus used after use.

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3. What measures should be put in place for educators to remain on site to use internet, technology and materials to teach?

Screening should be completed before work each day. Keep a log of who was in the school for potential contact tracing.

Educators ideally should be using individually assigned electronic equipment. If sharing equipment (for example, a photocopier), staff should wash their hands before use. Frequently touched surfaces should be disinfected twice daily. If educators are sharing a space, they must be spaced at least 6ft/2m from each other. No masks need to be worn when sitting. A face covering or non-medical mask should be worn when a staff member moves from their workstation. Limit the number of people in the staff room at one time. Ensure that physical distancing is respected if meetings are held.

4. What measures should be put in place to allow a minimal number of students access to the building for internet?

If a school board decides to allow a minimal number of students to access a school for internet, the protocols should be the same as what is in place for schools currently. Electronic equipment should be individually assigned or cleaned and disinfected between students. Electronic equipment is to be disinfected using approved disinfectants for this purpose. Students should be physically distant from each other if not in the same cohort, or if creating a new cohort, this should be documented. Hand hygiene before and after use of the computer is also advised.

5. What protocols need to be in place for the pick-up/drop-off of learning materials (e.g., electronics) at the school by students, parents or guardians, to support at home learning during school closures?

It is recommended to have those picking up or dropping off the learning materials do so by appointment in a block of time, if feasible, to avoid long lines and encourage physical distancing. Those in self-isolation should not attend the school to pick-up/drop-off of learning materials. Consider an alternative method of delivery in these circumstances.

Masks need to be worn by staff, students, caregivers, or whomever is present while picking up and dropping off learning materials. Consideration is to be given to those with mask wearing exemptions.

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Electronic equipment is to be disinfected using approved disinfectants for this purpose before pick-up. Ideally after disinfection, the equipment is placed in a clean bag to protect from contamination pending pick-up.

Staff who are handling electronic equipment should be performing hand hygiene when needed.

When electronic equipment is returned to the school, it needs to be disinfected using approved disinfectants for this purpose before use by another staff/student.

Protective Strategies (Updated August 26, 2021)

IN THIS SECTION:

Screening

Masks

Personal protective equipment (Updated August 26, 2021)

Hand hygiene and respiratory etiquette

Distancing, cohorts & congregating

Recess and outdoor breaks

Inclement weather days

Cleaning and disinfection standards and protocols

Shared materials

Shared spaces

Food programs

Screening

6. Are students required to self-screen over school breaks?

Everyone should self-monitor for symptoms of COVID-19 at all times and book a test and isolate if they experience symptoms.

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Masks

Refresher presentations from Public Health Ontario on Mask-Use for Children and Youth:

- [Recorded presentation](#)
- [Downloadable presentation slides](#)

7. When should masks/face coverings be changed?

Masks/face coverings should be changed when they are damp, dirty or damaged. Medical masks are not recommended to be reused and they are to be disposed of when crumpled, moist or visually contaminated.

More information about masks/face coverings is available on the [NBPSDHU's Face Coverings](#) website.

8. Can a staff member remove their mask if the student must see the educators face?

If a child needs to see an educator's face and cannot see it from at least 2 meters away, consider the use of a barrier (e.g., Plexiglass) and wear eye protection.

9. Can a child wear "winter gear" in place of a face covering during cold weather?

Face coverings should allow for easy breathing, fit securely to the head with ties or ear loops, be comfortable, not require frequent adjustment, fit securely to cover the nose, mouth, and chin without gaping, and have two plus layers of tightly woven fabric. Bandanas, scarfs, and gaiter masks that meet all of these requirements are acceptable face coverings.

That being said, most of these outerwear accessories are made up of single-layer, loose, coarsely woven, or knitted materials, and are less effective at filtering respiratory droplets compared to cloth face coverings with two or more layers. These clothing items also do not cover the nose and mouth areas well enough to be effective.

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Personal Protective Equipment (Updated August 26, 2021)

Refresher presentations from Public Health Ontario on Personal Protective Equipment:

Part 1: What is PPE?

- o [Recorded presentation](#)
- o [Downloadable presentation slides](#)

Part 2: How to use and wear PPE

- o [Recorded presentation](#)
- o [Downloadable presentation slides](#)

10. When are gloves recommended in the school setting?

Gloves should be worn by staff involved with personal care of a student or cleaning up spills of blood or body fluid. Wearing gloves is not a substitute to hand hygiene. Hand hygiene should be performed before putting on and after taking off gloves.

11. When are gowns recommended in the school setting?

Gowns need to be available to be worn by a staff member when supervising a student that is symptomatic and is waiting to be picked up. Level 1 gowns are acceptable. If a staff member feels like they are in a situation where their clothing is at risk of being contaminated by blood or body fluid, a gown is to be available for them to wear (e.g., toileting accidents, educating students with certain special needs).

12. What eye protection is recommended in the school setting, and when is it recommended?

Eye protection should be worn when a staff member is within 6ft of unmasked students or staff, if they feel like they are in a situation where splashes to the face could occur (toileting accidents, educating students with certain special needs), and while supervising a child that is symptomatic and waiting to be picked up. Eyeglasses are not a suitable form of eye protection.

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13. Are shoe covers recommended in a school setting?

Shoe covers would only be needed by staff who are cleaning up a large spill of blood or body fluid, where their footwear is likely to become contaminated by the spill.

14. What PPE is recommended for staff outdoors? **(Updated August 26, 2021)**

The Health Unit recommends that staff continue to wear medical masks outdoors when within 6 feet of any other student/child/staff/visitor, and to wear eye protection if within 6 feet of another student/child/staff/visitor if that individual is not wearing a mask. This will limit the chances that a staff member would have a high-risk exposure to COVID-19.

Hand Hygiene and Respiratory Etiquette

Refresher presentations from Public Health Ontario on Hand Hygiene:

- [Recorded presentation](#)
- [Downloadable presentation slides](#)

Hand Washing and Hand Sanitizing Posters:

- [Hand Washing](#)
- [Hand sanitizer](#)

15. What temperature should the water be?

Warm or cold water is fine, the water just needs to be comfortable for handwashing. The use of soap and the friction of rubbing hands together are important steps, as well as proper drying with a paper towel or hand dryer.

16. Is non-alcohol-based hand sanitizer acceptable to use in schools?

According to the CDC, non-alcohol-based hand sanitizers are not recommended as they do not work equally well on all types of germs and they do not kill germs, but rather reduce their levels on the skin. Consult the [Health Canada](#) website for an up-to-date list of approved hand sanitizers.

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Distancing, Cohorts and Congregating

Refresher presentations from Public Health Ontario on Physical Distancing:

- [Recorded presentation](#)
- [Downloadable presentation slides](#)

17. Can a staff member work at another workplace?

It is recommended that staff work at one location, except when this would be unavoidable due to staff absences or create problems with staffing levels that would be detrimental to program delivery.

If staff are working at more than one workplace, the following controls must be in place: the staff member's other position is not a health care worker (including student health care placements), screening and contact tracing logs are kept, and staff wear medical masks (Level 1) at all times and eye protection, if necessary, at both workplaces.

Recess, outdoor breaks and learning

18. What are the recommendations for safe recess practices?

Recess is a necessary break in the day for optimizing a child's social, emotional, physical, and cognitive development. It is important to keep recess as normal as possible to balance infection prevention with overall mental and physical health of students.

Students do not need to stay within their cohort during recess and breaks outdoors, but distancing should be encouraged between cohorts as much as possible.

Shared materials outdoors are permitted, with appropriate hand hygiene and respiratory etiquette.

For information/resources on promoting a healthy and active recess, visit our Physical Activity at [School](#) web page.

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19. What recommendations are there around outdoor play and learning off school premises?

Learning outdoors is still a recommendation. Ensure your students maintain physical distancing between cohorts and the public as much as possible.

Inclément weather days

20. What precautions can be taken to safely run classrooms during snow days?

During a snow day when staff resources may be limited and classrooms are partially empty, schools should continue to attempt to limit the mixing or combining of cohorts as much as possible.

If the school must combine cohorts, consider the use of larger rooms/spaces that will ensure physical distancing. Consideration to have cohorts separated by a physical barrier while in a larger space can be made. Encourage all students to continue to physically distance, wear their face coverings consistently with reasonable exceptions for medical exemptions, complete hand hygiene well and often, and cover coughs and sneezes. If spaces are being shared between multiple cohorts, an increase in cleaning and disinfection of high-touch surfaces is recommended.

21. What are the recommendations for heat alert days? Are there opportunities for safe ‘mask breaks’?

Make plans for days when the school may be hot and without air conditioning.

Consider holding classes outdoors in shaded tents or in areas where ventilation is improved, and where physical distancing can be maintained, so that masks can be removed.

If using an outdoor tent, the tent should have at least two full sides open to the outdoors and must not be blocked by any walls or other impermeable physical barriers, in order to ensure adequate ventilation.

Using face masks during periods of extreme heat may be difficult.

From: [COVID-19 Guidance for Re-Opening Schools JK to Grade 12](#)

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Cleaning and disinfection standards and protocols

Refresher presentations from Public Health Ontario on Environmental Cleaning:

- [Recorded presentation](#)
- [Downloadable presentation slides](#)

22. Are there any protocols to clean up blood and body fluids (blood, vomit, saliva)?

The staff should be wearing appropriate PPE when cleaning up body fluid spills. If it is a small spill, gloves would be recommended. If it was a spill where the staff could get sprayed/splashed, then a gown, gloves, medical mask (Level 1), eye protection (face shield, goggles or safety glasses) and possibly shoe covers would be recommended.

Immediately cover spillage with dry disposable paper towels.

Ensure surfaces contaminated by feces, vomit, blood or saliva are immediately cleaned with soap and water to remove organic material and then disinfected with a suitable disinfectant (e.g. Accelerated hydrogen peroxide; ensure to follow manufacturer's guidelines for contact times).

23. Are fogging or misting machines acceptable for disinfecting classrooms?

The safety and effectiveness of fogging for disinfection for COVID-19 have not been demonstrated based on previous assessments made in health care facilities. For fogging applications in these settings, potential worker exposure to disinfectants and subsequent adverse health effects, and lack of research supporting this practice in these settings, are concerns that may limit this method of disinfection. The World Health Organization (WHO) does not recommend fogging machines because it was found that spraying environmental surfaces in settings such as patient households and other health care and non-health care settings with disinfectants may not be effective in removing surface contamination and may miss surfaces shielded by objects, for example, folded fabrics, surfaces with intricate designs or surfaces with visible debris.

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24. Is it ok for students to handle strong disinfectants if they need to disinfect?

The manufacturer's instructions for use for disinfectants need to be followed and understood. A student may handle household strength disinfectants if they can understand and follow the directions properly. If the student cannot understand and follow the directions, they should not be given access to disinfectants. Also, if the manufacturer's instructions include wearing PPE while using the disinfectant, that PPE needs to be provided to the student.

25. What is Ultraviolet (UV) disinfection and is it effective against COVID-19?

UV disinfection refers to using ultraviolet radiation energy to inactivate bacteria, viruses, fungi, and spores so they are unable to replicate and cause disease. UV light exists within the spectrum of light between 10nm and 400nm, however, it is important to note that the disinfection range of UV is within the 100-280nm wavelengths, known as UV-C, with the peak UV absorption for disinfection activity being around 265nm. These UV-C wavelengths can be produced by special lamps known as germicidal lamps.

UV-C radiation is a known disinfectant used for air, water, and nonporous surfaces. Although it is known that UV-C can inactivate viruses, the efficacy of this inactivation depends not only on wavelength, but also on factors such as the UV light intensity, duration of exposure, virus structure, virus concentration, irradiation doses, and environmental conditions. While UV-C radiation has been shown to inactivate the genetic material in other coronaviruses, there is currently limited published data about the specific wavelength and dose of UV-C radiation required to inactivate the SARS-CoV-2 virus. A recommended UV-C disinfectant wavelength and dose for inactivation of the SARS-CoV-2 virus has yet to be established.

[From: Ultraviolet \(UC\) light disinfection for SARS-CoV-2](#)

Shared Materials

26. Can treats or cards be brought in from home and shared with students? What protective measures can be put in place should treats be distributed?

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Materials such as treats and cards can be brought in and shared with students, children, staff, community members, etc., with proper infection prevention and control measures in place which can include:

- Individuals with symptoms of illness should not bring any treats to be distributed
- All staff and students should continue to follow proper physical distancing and face covering protocols in place
- Alcohol-based hand sanitizer should be available and its use encouraged
- All items being distributed should be prepackaged and individually wrapped
 - If treats are not individually wrapped or prepackaged, a single designated person should distribute the treats using utensils (i.e., tongs), to eliminate touching with hands
- There should only be one individual handling and distributing treats
 - The individual distributing treats should practice proper hand hygiene before AND after distribution
- All staff and students should practice proper hand hygiene before AND after eating
- Distribution should be limited to one's own cohort
- No treats should be shared between individuals

For special occasions that may increase the influx and exchange of items, consult public health to discuss local trends.

27. Can teachers and staff accept gifts?

Yes, teachers and staff can accept gifts. Staff should complete hand hygiene after touching items.

Shared Spaces

28. Can different cohorts use the same washroom?

Mixing of cohorts needs to be limited as much as possible. Educate students on the need to physically distance from different cohorts. Limit washroom capacity with a sign indicating the number of people permitted in the washroom at one time, based on the size of washroom and number of stalls. There is no need to wash hands before, but hands must be washed afterwards. It is suggested that washrooms are cleaned and disinfected at least twice a day, or more, as required.

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29. What are the Health Unit’s recommendations regarding the use of cubbies, lockers and change rooms in elementary and secondary schools?

The use of lockers/cubbies is permitted with distancing. Cubbies should be grouped together for children in the same class/cohort and so that the children’s personal items do not touch (as much as possible). When different cohorts interact at lockers/cubbies masking and as much distancing as possible should be maintained between cohorts.

30. What are the recommendations for reopening public libraries housed within schools?

Consider measures such as regular cleaning, occupancy limits, hand washing protocols, physical distancing, plexiglass where distancing cannot be maintained, and the use of face coverings with reasonable exceptions for medical exemptions. You could allow individuals to browse books and materials.

Food programs

31. What are the Health Unit’s recommendations for offering grab and go style school nutrition programs?

Food would be prepared in an inspected kitchen in the school, with staff/volunteers wearing face coverings.

Physical distancing of students needs to occur when accessing food. All food should be pre-packaged or served using serving utensils to students by a staff member/volunteer wearing a face covering and physically distancing from students. It would be ideal to have the Student Nutrition Program (SNP) delivered within classrooms if the food was able to be served safely to allow for easier physical distancing between students and less potential mixing of cohorts.

Alternately, it may be possible to offer some pre-packaged/portioned self-serve options safely if hand sanitizer is available and used immediately before. This should be monitored by a staff or volunteer for hand hygiene and physical distancing.

If coolers are to be used for keeping food cold in the classroom, ice packs are to be used to keep the food cold, if required. Potentially hazardous foods should not be kept on ice packs in a cooler for the whole school day. Having the cooler would allow for the food to be in the class for an extended time, until the staff member was able to return the bin to the congregate fridge.

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The insides of bins/coolers need to be cleaned and sanitized as normal, after use. The outside of the bin should be sanitized twice daily or after each use.

Students should have access to handwashing or hand sanitizer before eating.

Whatever scenario is used for delivery of the SNP, keep in mind the main controls that are in place for COVID-19 (physical distancing, hand hygiene, cleaning and disinfecting) and the need to keep food safe.

32. What are the recommendations for pizza or hot lunch days?

This process for pizza days is acceptable:

1. Pizza is delivered. The driver is met at the door by a staff member and does not enter the school.
2. Staff/volunteer wears a mask and washes their hands before separating pizza into classes (as needed) on a cleaned and sanitized work surface.
3. Class rep (student/educator) picks up pizza box and delivers it to the class.
4. Educator/lunch monitor wears a mask and washes their hands before handing out pizza to students using tongs. Pizza can be placed on a dish (reusable or disposable) or paper towel/napkin.
5. Students wash or sanitize their hands before eating

The same applies for prepared lunches that are delivered to the school (e.g., subs).

Student Transportation (Updated August 26, 2021)

33. What should bus drivers do if a child becomes ill during the bus ride?

Consider having a supply of masks available if a child becomes ill during the bus ride. Provide the child with a mask and ensure they are physically distanced from other riders. Call the school so they can contact the parents to pick them up if the child becomes ill on the ride to school.

34. Where can I find more information on student transportation? (Updated August 26, 2021)

Visit the [Nipissing-Parry Sound Student Transportation Services \(NPSSTS\)](#) website for more information. The NPSSTS Transportation Plan can be found [here](#).

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Ventilation

35. What is the importance of proper ventilation in stopping the spread of COVID-19?

Data suggests that, while not the most common method of transmission, it is possible for COVID-19 to spread through the air among people who are in enclosed, crowded spaces with poor ventilation for a prolonged period. Factors contributing to transmission may include activities that cause heavy breathing, such as singing, dancing or exercising, especially without precautions such as wearing a mask or maintaining physical distancing. However, close, person-to-person contact with an infected person before they show symptoms remains the most common method of transmission.

Heating, ventilation and air conditioning (HVAC) systems, and their filters, are designed to reduce airborne pollutants, including virus particles, when they circulate through the system. In larger spaces, such as classrooms or businesses, good ventilation or airflow can help reduce the spread of COVID-19. HVAC filtration can protect people indoors when used **with** other public health measures.

From: [COVID-19: Transmission, Aerosols and Ventilation](#)

36. What are the recommendations for the use and maintenance of heating, ventilation, and air conditioning (HVAC) systems to effectively slow the spread of COVID-19?

For detailed guidance on school ventilation, including the use and maintenance of HVAC systems, refer to the Ministry of Education's [memorandum on school ventilation](#).

37. What are the recommendations for schools without air conditioning (i.e., fan use)?

- Schools without HVAC systems should increase ventilation by opening windows (when possible) and classroom doors.
- If portable fans are used, limit the blowing of air across people and surfaces by positioning them to provide an upward movement of air.
- Rooms where ceiling fans are used should have an upward airflow rotation.
- Portable fans should also be regularly cleaned and maintained according to the manufacturer's directions.

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- During the winter months when the temperatures are cold, consider opening windows or doors when students are not in the classroom, or for very brief periods every hour.

From: [COVID-19 Guidance for Re-Opening Schools JK to Grade 12](#)

Vaccination

38. Where can I find local information about the COVID-19 vaccine?

Visit the [Health Unit website](#) to find information about the COVID-19 vaccine and when/where you can get vaccinated.

39. Are there any COVID-19 vaccines for children?

Currently, the Pfizer-BioNTech COVID-19 vaccine is the only COVID-19 vaccine approved for use in children born in or before 2009 in Canada. Canada's National Advisory Committee on Immunization (NACI), at this time, strongly advises against the administration of the presently approved COVID-19 vaccines to individuals who are not in the authorized age groups (e.g., 18 years and older for Moderna, born in or before 2009 for Pfizer-BioNTech).

Evidence to date suggests that, generally speaking, children who contract COVID-19 are not at increased risk of severe illness. There is no evidence to date on the effects of COVID-19 vaccines for individuals born in or before 2009. Clinical trials to test COVID-19 vaccine use in children under 12 will have to go through similar phases as completed with the already authorized age groups, before any decisions are made about its approval and use.

For the most up to date information on approved COVID-19 vaccines and their respective authorized uses, please visit the Government of Canada's website that outlines the NACI's [recommendations on the use of COVID-19 vaccines](#).

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40. When will the COVID-19 vaccine be available for children?

Children born in or before 2009 are currently eligible to receive the Pfizer-BioNTech COVID-19 vaccine. They are eligible to receive their second dose 21 days after their first. Please note that this dose interval is dependent on the specific vaccine and may change with evolving guidance, best practices, and approval of other vaccines for this age group. There is, however, no indication yet as to when children under the age of 12 will be offered a COVID-19 vaccine in Canada. It is recommended that individuals visit the [Health Unit](#) and [Ontario's COVID-19](#) websites for the most up to date information on COVID-19 vaccine rollout plans/status.

Mental health and student supports

41. Where can I find resources to support student mental health and well-being?

The Health Unit's [Schools/Child Care and COVID-19](#) web page has information for parents/guardians on mental health and well-being related to COVID-19, as well as mental health resources for school administration and staff.

You can also visit our Mental Health [at School](#) web page for more school and classroom supports.

42. What is the Health Unit's advice for supporting staff/students who are medically fragile (with certain medical conditions)?

Some staff and students may be at a higher risk of adverse outcomes from COVID-19 (e.g., those with underlying medical conditions). These individuals may attend school as per usual, however they should work with their healthcare provider to make an informed decision.

Parents of children who have medical and/or behaviour complexities can choose not to send their children to school based on the risk to the child's health. In this case, they would learn remotely with virtual learning opportunities. Alternately, if the parents choose to send their child, they may also choose to have their child wear a face covering or mask with reasonable exceptions for medical exemptions. This choice needs to be supported. Provide smaller class sizes, other environmental supports and classroom supports (e.g., teacher aides) for students who may need assistance with toileting, hand hygiene and respiratory etiquette.

The school would also be supporting the medically fragile students by being diligent about communicating to the school community about screening students daily and staying home when they exhibit any symptoms that

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are related to COVID-19. Also, immediately isolating symptomatic children when they become sick at school further protects the students with underlying health conditions that may choose to attend school in person. All the other control measures in place also help to protect the students.

Extra-curricular activities and community use of schools

43. Can students participate in activities like garbage pick-ups?

Students can safely participate in a garbage clean up. Physical distancing should be encouraged outdoors between cohorts and any other relevant health and safety measures should be followed.

Activities should be chosen based on the current guidelines from the Health Unit and Ministry.

For information/resources on what to do if you find a sharp, visit the Safer Sharps Pick-Up and Disposal section of our [Injury Prevention in Schools](#) web page.

44. What are the recommendations for schools for fundraising?

Door to door fundraising should be discouraged. Virtual fundraising options through friends and family may be considered.

If items are required to be picked up by students/guardians for selling, consider having pre-booked times that individuals can pick up items and setting a predetermined pick-up location. Have parents/guardians call when they arrive to the school to pick up items. Instead of directly handing items to parents/guardians, items can be placed outside in a location where an individual can pick up their items. If items later need to be dropped off at an individual's home, schedule a drop-off time with the person who has bought the item. Students/guardians should place items on a porch or outside the door instead of directly passing items to the individual. It is important that physical distancing is maintained, hand hygiene is completed, and face coverings are worn with reasonable exceptions for medical exemptions.

45. What are the recommendations for food drives and other donations?

The school should consider setting up a single donation point where individuals can drop off their items for donation (preferably a location where individuals would not need to enter the school). Consider having set

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hours when items can be dropped off. Each classroom could have a donation box where individuals from that classroom can place their donated items in. Individuals should be discouraged from touching any items that they did not donate, and from donating items when they are experiencing symptoms of illness.

Clothing should be washed and dried on high heat settings prior to donating. When individuals are loading vehicles in preparation for delivering donated items to the final donation location, they should complete hand hygiene prior to and after this activity, wear a face covering with reasonable exceptions for medical exemptions and try to physically distance as much as possible.

46. What safety measures can be taken if the school decides to have a bake sale?

Measures that can be taken to make this activity safer if the school wishes to host a bake sale, include:

- Individuals with symptoms of illness should not participate in any bake sale activities (including baking and selling items)
- The room where baked goods will be sold should be set up away from congregate areas
- Limit the number of people/tables in the room. Tables and individuals participating should be physically distanced
- Control traffic throughout sale area (i.e., directional markers on the floor to further encourage physical distancing)
- Limit the number of individuals permitted in the sale area
- All participants should wear a face covering/mask
- Hand sanitizer should be available and its use encouraged
- All items sold should be prepackaged and ready to sell (i.e., baking put in individual bags prior to them leaving the baker's home)
- There should only be one individual handling money. This person should not also handle food items

Management of COVID-19 in schools

47. What is the recommendation for isolation rooms/areas for students waiting to be picked up?

A medical mask (Level 1), eye protection (face shield, goggles or safety glasses), gowns and gloves need to be worn by staff that are supervising students who are symptomatic pending pick up. Staff or students who are
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symptomatic also need to be wearing a medical mask with reasonable exceptions for medical exemptions. If there are students from different cohorts, all can be in the same area provided they are wearing face coverings and physically distancing, pending pickup. It is preferred if this area was a separate room, but understanding that in some schools this is difficult. Choose a space near the entrance or exit, away from heavier traffic, that can easily be disinfected. The isolation room should contain PPE kits for staff that may require them. The kits should include: a gown, gloves, eye protection and a mask. Physical distancing must be encouraged in all isolation rooms/wellness spaces.

48. When should a student or staff be isolated and sent home? What about those with seasonal allergies or chronic conditions with symptoms that are on the self-assessment?

Children often exhibit mild or atypical symptoms of COVID-19 or they may be asymptomatic. Staff and students should [screen for COVID-19](#) every day before going to school. If a staff or student has one or more [symptoms](#) (that are new or worsening and that are not due to a pre-existing medical condition or seasonal allergies) they should immediately put on a medical grade mask, isolate and go home. The school should contact a parent/guardian for immediate pick-up. Older students may walk/drive themselves home. Students should not take school or public transportation.

Children and staff do not need to stay home from school and self-isolate if symptoms are due to a pre-existing medical condition or seasonal allergies and are not new or worsening. Staff are encouraged to use [this COVID-19 Screening Support Tool](#) to help determine whether a child's symptoms are related to COVID-19.

Staff, students, or parents and guardians should be encouraged to complete the [COVID-19 School and Child Care Screening Tool](#) for information about when they can return to school.

If you have any questions, call the Health Unit's COVID-19 Call Centre at 1-844-478-1400.

49. What process should schools follow to assist in contact tracing?

Records of students, educators, and visitors that are in each cohort should be kept for contact tracing purposes. Ask staff to keep logs and any additional interactions that may be considered as close contacts. A tracking sheet needs to be kept for students sent home for COVID-19 related symptoms and sent to the Health Unit. There is a possibility of declaring an outbreak or an increased school absenteeism as a precursor to having a positive COVID-19 case, if there is an increase in students being sent home due to illness. If there is a confirmed case, the Health Unit would contact the school for contact tracing purposes. The data that would be

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required would include the names, contact information for the close contacts (students in the cohort, siblings of the positive case, staff, and any visitors that are considered close contacts of that student/cohort).

50. What happens if a student or staff member tests positive for COVID-19?

In the event of a confirmed positive case of COVID-19, the Health Unit will notify the relevant school board that a member of a specific school community has tested positive for COVID-19.

The Health Unit will conduct contact tracing and reach out to individuals who have been identified as close contacts to the individual who tested positive. This includes contact tracing for points of contact in the classroom, school, bus, before and after school programs, etc. The Health Unit will work closely with the school board to obtain key information about staff and students that is needed for contact tracing (e.g., attendance records, class lists, up to date contact information for parents/guardians, staff and students, etc.)

If a person in the school community (staff or student) tests positive for COVID-19, they will be required to self-isolate, meaning they are unable to attend in-person learning for a minimum of 10 days beginning from their symptom start date or test date, depending if they are symptomatic or asymptomatic. The Health Unit will follow protocols in the Ministry outbreak guidance documents.

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