

## Saskatchewan's school re-opening plan in comparison to other provincial plans and federal recommendations

<b>COVID Evidence Support Team: Summary Report</b>	<b>Date: August 14, 2020</b>
Summaries from: EOC081301 RR -- Pooled Testing EOC072102-01 RR -- Disease Course EOC071001-01 RR – Clusters vs. Outbreaks EOC070901 RR – Evidence & Rationale EOC070201-02 RR – Pediatric Transmissibility	<b>Full Author Statement – page 34</b>  <b>Review Code: EOC081401 SR</b>
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### Key Findings

Excerpts from Saskatchewan's school re-opening plan (Saskatchewan Government, 2020a, Saskatchewan Government, 2020b) are in red ink below; excerpts from other provincial plans and federal recommendations are in black ink. The search for school reopening plans was conducted on Aug. 6, 2020. All documents were reviewed between Aug. 7 and 10, 2020, with the exception of the Saskatchewan plan which was reviewed up until Aug. 13, 2020.

### General Mitigation Strategies

#### *Attendance*

- Students and staff who are sick should be advised to stay home. Not all symptoms of illness need to be subject to this requirement (i.e. headaches, cramps, etc.). Staff would not be required to enter the school when sick to create plans for substitute teachers.
- All parents, guardians, students and staff who are confirmed to be COVID-19 positive and/or under mandatory self-isolation must not enter the school. Instead, they must stay home and self-isolate. Students and staff can return to school once they are cleared by public health.
- Signage may be used to remind parents and guardians not to enter the facility if they are sick. Signs should be posted at school entrances.

(SK Attendance directives supported by (Public Health Agency of Canada, 2020a, BC Centres for Disease Control, 2020, Ministry of Education, 2020))

**Additional directives or recommendations from other jurisdictions:**

- Prohibit individuals who have symptoms of/or have had exposure (in last 14 days) to COVID-19 (Public Health Agency of Canada, 2020a) or OR travelled outside Canada in the last 14 days, from entering the school. (BC Centres for Disease Control, 2020)
- Students and staff who experience seasonal allergies or other COVID-19-like symptoms, which are related to an existing condition can continue to attend school when they are experiencing these symptoms as normal. If they experience any change in symptoms they should seek assessment by a health-care provider. (BC Centres for Disease Control, 2020)
- Limit or restrict non-essential visitors/guests. (Public Health Agency of Canada, 2020a, BC Centres for Disease Control, 2020, Manitoba Education, 2020, Dept. of Education and Early Childhood Development. Province of Nova Scotia, 2020) Any visitors to a school should be required to self-screen and to wear a medical mask while on school premises. (Manitoba Education, 2020) Schools should keep a list of the date, names and contact information for all visitors who enter the school. (BC Centres for Disease Control, 2020, Government of Yukon, 2020, Dept. of Education and Early Childhood Development. Province of Nova Scotia, 2020)
- Community use of schools will be suspended, with the exception of child care centres operating in schools (Manitoba Education, 2020)
- Any person who travelled outside Atlantic Canada in the previous 14 days should not enter the school setting. (Dept. of Education and Early Childhood Development. Province of Nova Scotia, 2020)
- Schools should work with relevant partners (for example, Human Resources) to develop policies that ensure:
  - student school attendance is flexible;
  - teachers are able to take COVID-19 related leave as required;
  - the use of medical notes, perfect attendance awards, and incentives are discouraged;
  - that requirements for mandatory volunteer work be examined for practicality and safety;
  - interactions with families focus on dignity and privacy protection;
  - steps are taken to reduce the potential for stigma and discrimination (for example, through outreach, information sharing and school/board level education;
  - measures are in place to provide meaningful school work and support to children/youth participating virtually, particularly for those with learning disabilities, mental health concerns, or where they do not have access to online learning tools, so they do not fall behind in their studies.
  - measures are in place for children/youth to maintain a sense of meaning/belonging with their teacher(s) and classmates when they cannot attend in person. (Public Health Agency of Canada, 2020a)

*Physical Distancing*

- Wherever possible, physical distancing should be maintained, even within the same group. For younger children, maintaining physical distance is less practical and the focus should be on minimizing physical contact instead.
- Staff, parents and students must encourage and practise preventative measures, such as limiting physical contact, throughout the school day (i.e. during instruction, recess, nutrition programs, extra-curricular) and avoiding close greetings (i.e. hugs, handshakes).
- Modify procedures for entering the building to support physical distancing. Possible strategies include staggered entry into classes and schools, separate group entrances, limiting pickups and drop-offs to one parent/guardian, etc.
- Thought can be given to establishing visual cues and direction flow plans; signs and markings in hallways should be considered to limit cross-exposure.
- Stagger recess/snack, lunch and class transition times to provide a greater amount of space for everyone.
- Consider modifying room configurations to promote physical distancing. Where practical, the use of physical barriers (i.e. engineered controls) may be established where distancing cannot be achieved; modifications may be needed for all shared spaces, including boot rooms, hallways, waiting areas, etc.
- Establish a plan to prevent mingling of groups in washrooms, and to minimize the number of shared surfaces.
- Plans for extra-curricular activities and other gatherings will be developed in consultation with the Chief Medical Health Officer once the group/gathering capacity limits for fall 2020 are known.
- Where possible, school division administrators and staff should use telephone or video conferencing to meet with staff and parents.
- Front-facing instruction for students, any exceptions will be identified for approval by public health.
- Staggered start times, breaks and end times, where possible.
- School divisions may consider additional options, including alternating days for high school students.

(SK *Physical Distancing* directives supported by (Public Health Agency of Canada, 2020a, BC Centres for Disease Control, 2020, Science et al., 2020, Government of Yukon, 2020, Alberta Government, 2020, Manitoba Education, 2020, Ministry of Education, 2020, Dept. of Education and Early Childhood Development. Province of Nova Scotia, 2020))

**Additional directives or recommendations from other jurisdictions:**

- Smaller class sizes should be a priority strategy as it will aid in physical distancing and reduce potential spread from any index case. Several jurisdictions have reopened schools with maximum class sizes ranging from 10-15. (Science et al., 2020)(SickKids)
- Consider using auxiliary space such as gyms and libraries to deliver education program to aid in physical distancing. (Alberta Government, 2020, Ministry of Education, 2020)(Ontario) Where needed, the use of non-traditional spaces should be explored to accommodate smaller classes in

order to allow daily school attendance. This may necessitate additional teacher/educational resources. (Science et al., 2020)(SickKids)

- Due to physical space limitations it may be necessary to reduce the number of individuals within secondary schools at any given time to ensure that physical distance can be maintained when required. Secondary schools should continue to prioritize the attendance of students who most benefit from in-person support and learners with diverse needs, as well as consider alternative learning modalities and off-campus learning. (BC Centres for Disease Control, 2020)
- Postpone assemblies, team sports, field trips, or extracurricular activities where physical distancing cannot be maintained. (Public Health Agency of Canada, 2020a, Science et al., 2020, Alberta Government, 2020, Ministry of Education, 2020)(Ontario) Large gatherings/assemblies should be cancelled for the immediate future. (Science et al., 2020, Alberta Government, 2020, Dept. of Education and Early Childhood Development. Province of Nova Scotia, 2020)
- The risk of COVID-19 transmission is lower in outdoor settings than it is indoors; as a result, outdoor education and on the land programming is encouraged. (Government of Yukon, 2020)
- Inter-school events including competitions, tournaments and festivals, should not occur at this time. This will be reevaluated in mid-fall 2020. (BC Centres for Disease Control, 2020)
- Playgrounds are a safe environment. Ensure appropriate hand hygiene practices before and after outdoor play. (BC Centres for Disease Control, 2020, Manitoba Education, 2020)
- Modify practices to reduce how long people are in contact with each other and how many people come into contact with each other. (Public Health Agency of Canada, 2020a)
- Consider modifying delivery of programs (for example, reducing the number of children/youth using the same space at the same time) divide classes/groups into smaller numbers of children/youth. (Public Health Agency of Canada, 2020a)
- Limit or cancel activities that bring children together from multiple groups or classrooms. (Public Health Agency of Canada, 2020a)
- Postpone or cancel non-essential activities, such as field trips. (Public Health Agency of Canada, 2020a)
- Postpone in person "school-wide" events for example, assemblies. (Public Health Agency of Canada, 2020a)
- Limit number of concurrent users of gyms, libraries, and other common areas. (Public Health Agency of Canada, 2020a)
- For older children:
  - consider staggering the school day or week to reduce the number of children/youth in the setting at same time; (Alberta Government, 2020)
  - stagger class rotation times; (Public Health Agency of Canada, 2020a)
  - consider having staff travel to classes, rather than children/youth travelling to classrooms; (Dept. of Education and Early Childhood Development. Province of Nova Scotia, 2020, Alberta Government, 2020)
  - close or limit number of concurrent users in computer laboratories. (Public Health Agency of Canada, 2020a)

### *Cohorting*

Saskatchewan's Chief Medical Health Officer has directed the following additional measures to be included in all division plans:

- Teacher and class cohorting, with a focus on cohorting teachers to a limited number of students and keeping students in one cohort as much as possible;
- In elementary school settings, students' cohorts will be the classroom; and
- In high school settings where cohorting is more complex, school divisions will be encouraged to find creative solutions to move students in cohorts where possible.

(SK Cohorting directives supported by (BC Centres for Disease Control, 2020, Science et al., 2020, Alberta Government, 2020, Dept. of Education and Early Childhood Development. Province of Nova Scotia, 2020))

**Additional directives or recommendations from other jurisdictions:**

- A cohort is a group of students and staff who remain together throughout a school term. In elementary and middle schools, a cohort can be composed of up to 60 people. In secondary schools, a cohort can be composed of up to 120 people. Cohorts can be composed of students and staff. (BC Centres for Disease Control, 2020) The composition of the cohort should remain consistent for all activities that occur in schools, including but not limited to learning and breaks (lunch, recess, classroom changes, etc). Within the cohort minimized physical contact should be encouraged, but a two-metre physical distance does not need to be maintained. (BC Centres for Disease Control, 2020) School gatherings should occur within the cohort. These gatherings should happen minimally; schools should seek virtual alternatives for larger gatherings and assemblies. (BC Centres for Disease Control, 2020)
- School boards will be expected to implement adapted timetables at both the elementary and secondary levels that support cohorting of students to the greatest extent possible. (Ministry of Education, 2020) (Ontario) An elementary student should be cohorted with their classmates and their homeroom teacher, with limited contact with other subject teachers for classes such as French as a second language/Anglais, the arts and physical education. (Ministry of Education, 2020) (Ontario)
- A secondary student should be limited to approximately 100 student contacts. Boards are also encouraged to keep in-person cohorts to two classes, or with their grade, depending on the size of their high school. This may require adapted timetables and a study hall or remote delivery of some classes in Grades 11 and 12 to limit the size of the cohort a secondary student is exposed to. (Ministry of Education, 2020) (Ontario)
- It is still recommended to maintain physical distancing within a cohort whenever possible to minimize the risk for disease transmission (i.e., spacing between desks). (Alberta Government, 2020)
- Maximum cohort size is to be no more than 75 students. There is no limit on the number of cohorts, as long as distinct cohorts of 75 can be separated to prevent contact with other groups. (Manitoba Education, 2020)
- In elementary schools, students can socialize with peers in different cohorts if they are outdoors and can minimize physical contact or if they are indoors and can maintain physical distance. In

middle and secondary schools, students can socialize with peers in different cohorts if they can maintain physical distance. Students must maintain physical distance when socializing with peers in different cohorts. Unless they are part of the same cohort, staff and other adults should maintain physical distance from each other at all times. (BC Centres for Disease Control, 2020)

- Elementary and middle schools are likely able to implement cohorts without reducing the number of individuals typically within the school. (BC Centres for Disease Control, 2020)
- School administrators should keep up-to-date lists of all members of a cohort to share with public health should contact tracing need to occur. (BC Centres for Disease Control, 2020, Dept. of Education and Early Childhood Development. Province of Nova Scotia, 2020)
- Cohort composition can be changed at the start of a new quarter, semester or term in the school year. (BC Centres for Disease Control, 2020)
- If possible, cohort the same children/youth in classes/groups with the same staff or volunteers each day. (Public Health Agency of Canada, 2020a, Alberta Government, 2020)
- Students in grades 9–12 will have primarily remote learning, with partial in-school programming for some students. (Dept. of Education and Early Childhood Development. Province of Nova Scotia, 2020) Reduced class sizes, two-metre social distancing, and “cohorting” or “grouping” will be used for those attending in person. Within cohorts, students can interact but should be supported to minimize direct physical contact. Expectations for physical distancing can increase gradually by grade level. Physical distancing should be maintained between cohorts. (Dept. of Education and Early Childhood Development. Province of Nova Scotia, 2020)
- Additional school space previously used for grades 9–12 will be repurposed to support distancing and to accommodate the need to space the students in Pre-primary to grade 8. (Dept. of Education and Early Childhood Development. Province of Nova Scotia, 2020)
- To the extent possible, cohorting classes could be considered for the younger age groups and for children and youth with medical and/or behaviour complexities, so that students stay mostly with the same class group and there is less mixing between classes and years. (Science et al., 2020)(SickKids)
- Students in Grades 9 to 12 will return for up to five days per week of in-class instruction if high schools can effectively implement physical distancing and the use of cohorts to reduce the risk of transmission and to ensure documentation for contact tracing. (Manitoba Education, 2020)

### *Hand Hygiene*

- Promote proper hand hygiene practices for staff and children. Practices must include using soap and water when hands are soiled and alcohol-based hand sanitizer approved by Health Canada (DIN or NPN number) when visibly clean. Ensure adequate soap and alcohol-based hand sanitizer approved by Health Canada (DIN or NPN number) in each building, especially near entrances. Make disinfectant wipes available for wiping down frequently used surfaces.
- Although general use containers need to be available, where possible, students and staff should have their own hand sanitizer. Supervise the use of hand sanitizer with young children.

(SK *Hand Hygiene* directives supported by (Public Health Agency of Canada, 2020a, BC Centres for Disease Control, 2020, Science et al., 2020, Government of Yukon, 2020, Ministry of Education, 2020, Dept. of Education and Early Childhood Development. Province of Nova Scotia, 2020))

**Additional directives or recommendations from other jurisdictions:**

- Provide increased access to hand hygiene facilities (e.g. by placing hand sanitizer dispensers in easy to see locations) and ensure accessibility for those with disabilities or other accommodation needs. (Public Health Agency of Canada, 2020a, BC Centres for Disease Control, 2020)
- Ensure adequate supplies to reinforce hand hygiene and respiratory etiquette such as soap, an alcohol-based hand sanitizer (at least 60% alcohol), paper towels, tissues, and no-touch waste receptacles. (Public Health Agency of Canada, 2020a, Science et al., 2020) (SickKids)
- Regularly-scheduled hand hygiene breaks based on a pre-specified schedule. (Science et al., 2020, Ministry of Education, 2020) (Ontario)

*Cleaning and Sanitation*

- All disinfectants used must be approved by Health Canada (DIN). All label instructions for disinfectants, including contact time, should be followed.
- A school-wide plan for enhanced cleaning and disinfection should be established using the current provincial guidance. Roles and responsibilities, staff training where needed, and a maintenance schedule are recommended. Items/objects that cannot be effectively cleaned/disinfected daily or between classes should be removed for the time being.
- Increase cleaning and disinfection of commonly contacted areas.
- Any food contact surfaces, including water fountains/dispensing equipment, must be disinfected with a product safe for food surfaces or immediately rinsed following disinfection.
- Garbage bins should be emptied frequently.
- Sanitation/cleaning procedures will need to be implemented to support multiple users accessing technology.
- Indoor shared spaces and structures that cannot be cleaned and disinfected between groups should not be used.
- Wear disposable gloves when cleaning blood or body fluids. Wash hands before wearing and after removing gloves. They must be changed after every interaction and when changing tasks. Beyond this situation, glove use is not required nor recommended.
- Ensure the school is well stocked with handwashing supplies at all times, including soap, paper towels, waste bins and, where appropriate, alcohol-based hand sanitizer approved by Health Canada (DIN or NPN number).
- Store hand sanitizer out of the reach of young children and supervise its use.

(SK *Cleaning and Sanitation* directives supported by (Public Health Agency of Canada, 2020a, BC Centres for Disease Control, 2020, Science et al., 2020, Alberta Government, 2020, Manitoba

Education, 2020, Dept. of Education and Early Childhood Development. Province of Nova Scotia, 2020))

**Additional directives or recommendations from other jurisdictions:**

- General cleaning and disinfecting of the premises at least once every 24 hours. This includes items that only a single student uses, like an individual desk or locker. (BC Centres for Disease Control, 2020)
- Cleaning and disinfecting of frequently-touched surfaces at least twice every 24 hours. (BC Centres for Disease Control, 2020)
- 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 or sharing of books or paper based educational resources to students. (BC Centres for Disease Control, 2020, Government of Yukon, 2020)
- Laminated paper-based products should be cleaned and disinfected daily if they are touched by multiple people. (BC Centres for Disease Control, 2020)
- Area rugs and soft furnishings that cannot be easily cleaned and disinfected should be removed (Alberta Government, 2020)
- Water fountains that are not touchless or cannot be cleaned between users must be turned off. (Manitoba Education, 2020)
- To facilitate cleaning, consider using covers that protect keyboards and other high touch areas on electronic devices. (Government of Yukon, 2020)
- Schools are required to follow all Ministry of Environment, Conservation and Parks requirements and procedures regarding water flushing in advance of schools reopening. (Ministry of Education, 2020) (Ontario)

*Student and staff health screening*

- All staff must self-monitor for symptoms and use the online Saskatchewan COVID-19 Self-Assessment Tool.
- Checking temperatures, detailed screening or requiring COVID-19 testing of students and staff are not required or recommended at this time, based on current evidence

(SK Student and staff health screening directives supported by (Public Health Agency of Canada, 2020a, BC Centres for Disease Control, 2020, Alberta Government, 2020, Manitoba Education, 2020, Dept. of Education and Early Childhood Development. Province of Nova Scotia, 2020))

**Additional directives or recommendations from other jurisdictions:**

- As employers, school boards are encouraged to work with their teacher federations and education worker unions as they develop their reopening plans. (Ministry of Education, 2020) (Ontario) A key aspect of these plans will be defining criteria for accommodation for staff

who have health conditions, or whose family members have health conditions, that would make it preferable for them to work in accommodated roles. (Ministry of Education, 2020)(Ontario)

- Boards are encouraged to develop supply lists to support continuity of learning and operations when teachers or staff complete their daily self-screening and choose to stay home. (Ministry of Education, 2020)(Ontario)
- Training Staff should be provided with a full day of training on the health and safety protocols and required adaptations before the school year begins. This training will be provided to all staff including supply/occasional teachers and casual workers, which the government has invested \$10 million to provide. (Ministry of Education, 2020)(Ontario)
- Parents and caregivers must assess their child daily for symptoms of common cold, influenza, COVID-19, or other infectious respiratory disease before sending them to school. (BC Centres for Disease Control, 2020) Consider having parents and caregivers provide a copy of a completed daily health check form that confirms they understand how to complete the daily health check and that it must be completed daily. Alternatively, conduct daily health checks for respiratory illness at drop-off by asking parents and caregivers to confirm the child does not have symptoms of common cold, influenza, COVID19, or other respiratory disease. (BC Centres for Disease Control, 2020, Science et al., 2020, Alberta Government, 2020, Dept. of Education and Early Childhood Development. Province of Nova Scotia, 2020)
- Passive screening measures should be put into place at all settings. This usually consists of signage at points of entry to remind people not to enter if they are ill. Similar messaging can be communicated on voicemails and websites. (Public Health Agency of Canada, 2020a)
- Active screening (i.e., asking questions about symptoms) should be considered in some circumstances, for example:
  - where there have been cases of COVID-19 reported in the workplace or other setting;
  - before or on arrival at school or child care; (Public Health Agency of Canada, 2020a)

### *Mask Use*

For those divisions exploring measures in Levels 2, the following guidance has been provided by Saskatchewan's Chief Medical Health Officer:

- Students in Grades 4 through 12 wear a mask in high traffic areas, such as in hallways and on buses.
- For those students in Grades 9 through 12, masks may be required in classrooms where it is not possible to maintain physical distancing or where students are outside of the cohort within their classroom, as well as all teachers and staff.
- Students are encouraged to bring their own non-medical cloth masks.
- The Government of Saskatchewan has procured six million disposable masks for schools in Saskatchewan with an investment of \$2.3 million. These masks will be made available to students, teachers and staff at the beginning of the school year and on a daily basis.
- In addition to face masks, the province has supported school divisions in obtaining access to red face shields . . . The full-face shields will be another option available to staff.

(SK *Mask* directives supported by (Dept. of Education and Early Childhood Development. Province of Nova Scotia, 2020, Public Health Agency of Canada, 2020a)

**Additional directives or recommendations from other jurisdictions:**

- Based on the current evidence of COVID-19 transmission, NMMs are recommended in children/youth over 10 years. When possible, schools should consider a policy that recommends NMM use according to grade level or class grouping. This measure should be based on a setting-specific risk assessment that includes the following factors: local epidemiology of COVID-19 including evidence of community transmission, the characteristics of the individual (for example, age, maturity, physical ability, comprehension), the characteristics of the setting, the nature of the activities, risk tolerance, and the potential of the setting to implement risk mitigation measures. (Public Health Agency of Canada, 2020a)
- Masks may be considered in circumstances where there is prolonged close contact (greater than 15 minutes) and distance of two metres cannot be maintained. (Alberta Government, 2020)
- Given the current epidemiology, the use of NMMs is not recommended for elementary school students (agree 61%). A significant minority supported the use of NMMs when physical distancing was not possible (agree 33%). (Science et al., 2020)(SickKids)
  - The use of NMMs is recommended for middle school students whenever physical distancing cannot be maintained, provided there is no contra-indication for developmental, medical or mental health reasons (agree 64%). A minority supported the mandatory use of NMMs at all times (agree 8%). (Science et al., 2020)(SickKids)
  - The use of NMMs is recommended for high school students whenever physical distancing cannot be maintained, provided there is no contra-indication for developmental, medical or mental health reasons (agree 61%). A minority supported the mandatory use of NMMs at all times (agree 22%). (Science et al., 2020)(SickKids)
- Students in Grades 4 to 12 will be required to wear non-medical or cloth masks indoors in school, including in hallways and during classes. Outdoor times like recess can be used as opportunities to provide students with breaks from wearing masks within their cohorts. Students in Kindergarten to Grade 3 will be encouraged but not required to wear masks in indoor spaces. (Ministry of Education, 2020)(Ontario) Students are encouraged to practice wearing masks and learn what type of mask is most comfortable for them. Students may wear their own non-medical masks, and non-medical masks will also be made available for students. Reasonable exceptions on the requirement to wear masks will apply. (Ministry of Education, 2020)(Ontario)
- Medical masks and eye protection (i.e. face shield) will be provided for all teachers and other staff of school boards. All school-based staff will be required to wear masks, with reasonable exceptions for medical conditions. School-based staff who are regularly in close contact with students will be provided with all appropriate personal protective equipment (PPE). The Ontario government will provide PPE and cleaning products to school boards and will work closely to ensure appropriate supply and delivery. Where necessary, such as in leading classes with students who are deaf or hard of hearing, masks with clear sections may be appropriate. (Ministry of Education, 2020)(Ontario) Reasonable exceptions to the requirement to wear masks are expected to be put in place by schools and school boards. Staff or students with

sensory or breathing difficulties may be exempted by the school principal, guided by school board policies. (Ministry of Education, 2020)(Ontario)

- Masks and other PPE have been sourced by the Ontario government. The ministry will work closely with school boards to confirm demand and facilitate timely delivery and supply. (Ministry of Education, 2020)(Ontario)
- Non-medical masks are now required on public transportation including school buses and strongly recommended for all Nova Scotians who cannot maintain physical distancing in crowded public spaces. Parents should be encouraged to help their children become comfortable with wearing a mask. A very small number of individuals will not be able to wear masks due to sensory or health issues (i.e., severe anxiety). Medical exemptions should not be required. (Dept. of Education and Early Childhood Development. Province of Nova Scotia, 2020)
- Staff and students should wear a non-medical mask when they are in areas where they are not within their cohort and where physical distancing cannot be maintained (i.e. hallways during class changes for older students). Non-medical masks can also be considered in circumstances where close prolonged contact is required. It is recommended that staff wear a non-medical mask when they are unable to maintain physical distancing from other adults (i.e. staff meetings). (Dept. of Education and Early Childhood Development. Province of Nova Scotia, 2020)
- It will be important to establish policies regarding the use of NMMs or other personal protective equipment that align with advice from provincial/territorial/local public health authorities, as it will vary throughout Canada. Policies should reflect their PHA's advice for NMM use in particular settings or circumstances such as during all indoor activities versus only while in common areas. NMMs should not be worn by anyone who is unable to remove the mask without assistance (for example, due to age, ability or developmental status). (Public Health Agency of Canada, 2020a)
- NMMs may be considered based on a risk assessment and the following considerations:
  - NMMs should be sized and worn correctly, failing to do so may present a risk rather than a benefit. Younger children or those with disabilities may not be able to use or consistently use NMMs correctly and safely during the day, including during meals and snacks (for instance comply with procedures to put on, change and remove) without assistance.
  - Masks with exhalation valves are not recommended, as they do not protect others from COVID-19 and do not limit the spread of the virus.
  - Children/youth in the same class/program will have recurrent interactions with one another the advice of the PHA should be sought for the use of NMM use for repeated interactions.
  - NMMs should be changed after they become wet or soiled. This could present operational challenges with respect to supply of NMMs and safe handling of soiled or damp NMMs.
  - Parents/guardians should be reminded of appropriate use and cleaning and provide a backup clean/dry mask to store in their backpack for the child to replace the soiled or damp NMM. A NMM could become an unintended hazard (for example, physical injury if caught on playground equipment).
  - It is important that NMM or cloth face coverings be worn safely.

- The ability of a child/youth to complete tasks and follow direction will be dependent on a variety of factors (for example, age, maturity, physical ability, comprehension).
- It will be important for staff, volunteers and/or parents/guardians to assess the ability of each child/youth to properly use and care for NMMs. (Public Health Agency of Canada, 2020a)
- It should be expected that some children/youth will wear NMMs in schools that have not adopted NMMs policies. Staff and volunteers should monitor for, and address, any discrimination or bullying associated with this practice (whether stigmatization is experienced by those who wear masks, and/or those who do not) and how this can amplify discrimination or bullying due to other factors such as differences in gender, ethnicity, or ability. (Public Health Agency of Canada, 2020a)
- Wearing a non-medical mask or face covering within schools is a personal choice for students and adults. Schools should consider requesting students and staff have a non-medical mask or face covering available at school so it is accessible should they become ill while at school. (BC Centres for Disease Control, 2020)
- At this time, public health guidance does not require students and staff to wear masks or other PPE in school settings or on school buses. (Manitoba Education, 2020) Some staff and children may choose to bring and wear a non-medical mask while in the facility. If a non-medical mask is used, hands are to be cleaned before and after putting it on and taking it off. Removed masks are considered contaminated and will be placed in a container or bag for appropriate cleaning/disinfection later. Non-medical masks are to be laundered daily. (Manitoba Education, 2020)
  - There is no role for the use of N95 respirators in schools. N95 respirators are for use by healthcare workers performing specific medical procedures. (Manitoba Education, 2020)

### *Transportation*

- Students should be assigned seats and a record of this seating plan should be kept in order to assist with contact tracing in the case of a student being confirmed with a case of COVID-19. Students who live in the same household should be seated together.
- Partitions around drivers can be considered.
- Cleaning and sanitation of buses or other vehicles used to transport students is required between each run. Recreational travel requiring vehicles, such as field trips, is not permitted at this time.
- Parents will be asked to transport their own children where possible.
- Encourage pickup and drop-off of students outside of the building, unless there is a need for the parent or guardian to enter the school.
- If parents or guardians must enter the school, they should maintain physical distancing from staff and other children, and be reminded to practise diligent hand hygiene.

(SK *Transportation* directives supported by (Public Health Agency of Canada, 2020a, BC Centres for Disease Control, 2020, Alberta Government, 2020, Dept. of Education and Early Childhood Development. Province of Nova Scotia, 2020))

**Additional directives or recommendations from other jurisdictions:**

- Consider the order students typically onload and offload to support buses being loaded from back to front and offloaded from front to back. (BC Centres for Disease Control, 2020, Alberta Government, 2020)
- Minimize the number of people on the bus at one time. (Public Health Agency of Canada, 2020a)
- Maintain 2 metres between children/youth (unless of the same household), when possible. (Public Health Agency of Canada, 2020a)
- If space is available, students should each have their own seat. They should be seated beside the window. (BC Centres for Disease Control, 2020) Open windows, if feasible. (Public Health Agency of Canada, 2020a)
- Middle and secondary students should wear non-medical masks or face coverings. These should be put on before loading and taken off after offloading. (BC Centres for Disease Control, 2020) Non-medical masks are not recommended for elementary students on buses due to the increased likelihood they will touch their face and eyes, as well as required assistance to properly put on and take off their mask (requiring increased close personal contact from school staff). (BC Centres for Disease Control, 2020)
- Consider the use of NMM for all passengers on the bus. (Public Health Agency of Canada, 2020a)
- If a child becomes symptomatic during the bus trip, a mask may be made available. (Alberta Government, 2020)
- Maintain 2 metres between the driver and the children/youth, where possible. (Public Health Agency of Canada, 2020a)
- Consider the use of NMMs for the driver. (Public Health Agency of Canada, 2020a)
- Consider adding buddies or bus monitors to assist younger children with adhering to risk mitigation measures. (Public Health Agency of Canada, 2020a)
- It is important to consider how these mitigation measures may affect children/youth with disabilities who use alternate modes of transport; including the accommodations or assistance that may be required in applying the measures. (Public Health Agency of Canada, 2020a)
- It is recommended that vehicle cleaning logs be kept. (Alberta Government, 2020)
- To the extent that physical distancing may not be possible, the use of non-medical masks for students in Grades 4 to 12 will be required on school vehicles. Students in Kindergarten to Grade 3 will be encouraged but not required to wear masks on student transportation. Exceptions should be made for students with medical conditions or special needs that prevent masking. (Ministry of Education, 2020)(Ontario)
- Medical masks and eye protection (i.e. face shields) will be provided for school bus drivers, school bus monitors and student aides. Eye protection for drivers should not interfere with the safe operation of vehicles and is intended to protect drivers during close contact with students, such as during boarding and exiting. (Ministry of Education, 2020)(Ontario)
- Where possible, the seat directly behind the school bus driver should remain empty to maintain physical distancing. (Ministry of Education, 2020)(Ontario)

- School boards should support accommodations for immunocompromised and otherwise medically vulnerable students, and students with special transportation needs (e.g., arrange separate vehicle, assign seating at front of school bus). (Ministry of Education, 2020)(Ontario)
- Training, where appropriate, to support school bus drivers, school bus monitors, and student aides should be provided to ensure that health and safety measures are understood, followed and enforced. (Ministry of Education, 2020)(Ontario)
- Students whose parents want them to ride the school bus will be required to wear non-medical masks, as will drivers. (Dept. of Education and Early Childhood Development. Province of Nova Scotia, 2020)

#### *Limiting shared materials and equipment*

- Establish clear protocols for bringing materials (i.e. bags, school supplies) into and out of schools.
- Where possible, remove or reduce play with toys that encourage group play in close proximity or increase the likelihood of physical contact. Keep toys that encourage individual play.
- Students and staff should not share food and drinks and other personal items. Label personal items with the student's name to discourage accidental sharing.
- Strategically limit the number of touch points per day on electronic devices.
- Classroom activities and recess times should not include equipment that might be touched by multiple students. Due to the increased cleaning required, it is best to decrease the number of toys/equipment available to children. Remove toys and other items that cannot be easily cleaned and disinfected.

(SK *Shared Equipment and Materials* directives supported by (Public Health Agency of Canada, 2020a, Government of Yukon, 2020, Alberta Government, 2020))

#### **Additional directives or recommendations from other jurisdictions:**

- Objects and materials brought from home by students should be cleaned with soap and water or disinfectant before use in the classroom. (Government of Yukon, 2020)

#### *Food Services/Nutritional Programs*

- Proper hand hygiene must be practised before and after eating.
- School-supplied food should be delivered directly to the classroom. Students should eat lunches in their classrooms.
- No self-serve or family-style meal service. There should be no common food items. Food should be served in individual portions to each child by a designated staff member.
- Utensils should be used to serve food items. Reusable utensils must be cleaned and sanitized after each use.

- Food from home must not be shared with other students and should be stored with the student's belongings.
- Students are not allowed to participate in food preparation.

(SK Food Services/Nutritional Programs directives supported by (Public Health Agency of Canada, 2020a, Dept. of Education and Early Childhood Development. Province of Nova Scotia, 2020))

**Additional directives or recommendations from other jurisdictions:**

- Limiting the number of individuals permitted in cafeterias at any given time, Ensuring at least 2-metres distance between seats in cafeterias. (Public Health Agency of Canada, 2020a)
- Increasing accessible signage and floor markings in cafeterias to remind students/staff to practice physical distancing and have unidirectional flow of foot traffic in narrow aisles/stairways. (Public Health Agency of Canada, 2020a)
- Increase the number of accessible hand sanitizer stations within cafeteria. (Public Health Agency of Canada, 2020a)
- Consider having students eat meals in classrooms or outdoors as opposed to congregating in a cafeteria. (Public Health Agency of Canada, 2020a)
- Limiting seating areas in cafeterias (for example, cordoning off spaces, removing seating). (Public Health Agency of Canada, 2020a)
- Considering the use of cohorts for cafeterias during designated times. (Public Health Agency of Canada, 2020a)
- Reducing touching of food by individually wrapping or packing food when on display. (Public Health Agency of Canada, 2020a)
- Adopting touchless payment options when possible (with exceptions for those who can only pay by cash). (Public Health Agency of Canada, 2020a)
- If food is prepared as part of learning and is consumed by the student(s) who prepared it, no additional measures beyond those articulated in this document and normal food safety measures and requirements need to be implemented (e.g. FOODSAFE trained staff, a food safety plan, etc.). (BC Centres for Disease Control, 2020, Alberta Government, 2020)
- If food is prepared within or outside a school for consumption by people other than those that prepared it (including for sale), it is expected that the WorkSafe BC Restaurants, cafes, pubs, and nightclubs: Protocols for returning to operation are implemented as appropriate and as relevant to the school setting, in addition to normally implemented food safety measures and requirements (e.g. FOODSAFE trained staff, a food safety plan, etc.). (BC Centres for Disease Control, 2020)

*Communication*

- Communication strategies (including accessible signage) are strengthened to include messaging about staying at home when exhibiting symptoms of/or after exposure to COVID-19 to children/youth, families, staff, volunteers in languages/formats appropriate for age. (Public Health Agency of Canada, 2020a, Dept. of Education and Early Childhood Development.

Province of Nova Scotia, 2020) Clearly communicate with parents and caregivers about their responsibility to assess their children daily

before sending them to school. (BC Centres for Disease Control, 2020)

- Post signage that is appropriate for age, ability, reading level and language preferences to remind individuals to practice good hygiene. (Public Health Agency of Canada, 2020a)
- Children/youth are made aware, in non-stigmatizing age and disability-appropriate language how to identify symptoms of COVID-19 and instruct them to speak to a staff member immediately if they are experiencing symptoms. (Public Health Agency of Canada, 2020a)
- Strengthen communication strategies (including accessible signage) about staying at home when exhibiting symptoms of/or after exposure to COVID-19 to children/youth, families, staff, volunteers in languages/formats appropriate for age. (Public Health Agency of Canada, 2020a)
- Teach children/youth in age-appropriate and non-stigmatizing language how to identify symptoms of COVID-19 and instruct them to speak to a staff member immediately if they are experiencing symptoms. (Public Health Agency of Canada, 2020a)
- Keep children/youth, staff, volunteers and families informed about current public health advice. (Public Health Agency of Canada, 2020a)
- Reassure children/youth, staff, volunteers and families that there are many things they can do to stay healthy (e.g. personal practices). (Public Health Agency of Canada, 2020a)

## Mental Health

- School divisions and school leaders are encouraged to implement trauma-informed practice to support students, staff and families. Trauma-informed practice includes: providing inclusive and compassionate learning environments; understanding coping strategies; supporting independence; and helping to minimize additional stress or trauma by addressing individual student needs.
- The Ministry of Education will continue to offer supports for mental wellness, including but not limited to:
  - a resource posted on saskatchewan.ca to assist parents and caregivers;
  - working with Kids Help Phone to promote their professional counselling services, which are available 24 hours a day via phone, online chat or text, as well as their database of local community resources;
  - working with SaskTel to prevent and respond to bullying, cyberbullying and promote healthy relationships through the Be Kind Online website, which includes a number of resources and tools;
  - providing a provincial licence for Respect in Schools training for all staff; and
  - offering grants to school divisions to support mental health and student safety training initiatives.
- Saskatchewan's provincial curricula provide opportunities for students to learn about health, well-being and student safety.

(SK *Mental Health* directives supported by (Public Health Agency of Canada, 2020a, Alberta Government, 2020, Dept. of Education and Early Childhood Development. Province of Nova Scotia, 2020))

**Additional directives or recommendations from other jurisdictions:**

- Parents/guardians will be a major source of comfort and reassurance to their children. It will be important for the schools to keep parents/caregivers informed of what the school is doing to protect their children and what parents can do at home to prevent the spread of respiratory infections (for example, reinforce hand hygiene and respiratory etiquette, increase environmental cleaning).(Public Health Agency of Canada, 2020a)
- Remind children/youth of the actions they can take, including personal preventive practices, to stay safe and healthy.(Public Health Agency of Canada, 2020a)
- The school environment should ensure that children/youth can ask questions. Staff should answer questions honestly while ensuring that the information is suitable for the age level and diverse personal experience. When staff are unsure of an answer, they should be encouraged to look for resources with the child/youth that can answer their questions.(Public Health Agency of Canada, 2020a)
- Administrators and staff should be mindful of how children/youth share information in less supervised settings (for example, before and after school, lunch and snack times, recess, through social media, and on the bus). It may be in these settings where children/youth can become misinformed. It will be important for administrators and staff to correct this misinformation when they are aware of it.(Public Health Agency of Canada, 2020a)
- Where possible, maintain familiar activities and routines at schools as it can reinforce a sense of security for children/youth. This includes instructional time, meal times, extra-curricular activities, and unstructured time such as recess.(Public Health Agency of Canada, 2020a)
- Supporting children/youth and families as routines transition will be important through a variety of communication strategies including written communication, the school website, social media pages, announcements and on-site reminders and updates.(Public Health Agency of Canada, 2020a)
- Limit media exposure or ensure information being accessed on-line is reputable. Exposure to too much or misinformed resources/media coverage can give children/youth an exaggerated view of the risks associated with COVID-19. Keep children/youth informed about what is happening and what may happen at a level that is suitable for their age.(Public Health Agency of Canada, 2020a)
- Flexibility in program and/or school enrolment should be provided for children and youth who have transitioned to a new program or school for the 2020-2021 school year. Students who are particularly anxious about attending a new school should be offered the opportunity to visit the school in the week prior to the first day of school.(Science et al., 2020)(SickKids)
- Teachers should be vigilant to potential child maltreatment situations given current concerns regarding possible elevated risk of child maltreatment that may have been undetected during the period of school closures.(Science et al., 2020)(SickKids)

- Children and youth with mental health concerns may or may not require graduated transition back to school; where required, active communication between the school, parent, youth and therapist should be undertaken on a regular basis to ensure continued progress toward full-time return to school. (Science et al., 2020) (SickKids)
- Mental health and wellness support needs to be accessible for diverse groups (for example, considerations based on factors such as age, gender, ethnicity/culture, and other socio-economic and demographic factors). (Science et al., 2020, Public Health Agency of Canada, 2020a)
- It will also be important for schools to recognize practices that may be contributing to social and mental distress (for example, challenges in connecting with peers and teachers, cancellation of activities) and address these factors in order to support student mental health and wellbeing. (Public Health Agency of Canada, 2020a)
- The impact of the pandemic on staff and volunteers and potential stress related to a return to work should be recognized. In the same way that children/youth may need support to return to school effectively, staff and volunteers may require mental health support to successfully provide programs to children/youth. (Public Health Agency of Canada, 2020a)
- If students are learning from home with direct and ongoing virtual instruction by teachers, supports for student well-being and learning would continue under this plan. This would include specifically designed ways to access student service supports, such as school psychologists, counsellors, mental health clinicians, and speech language pathologists. (Dept. of Education and Early Childhood Development. Province of Nova Scotia, 2020)

### Staff health

- In some cases, staff or teachers (such as occasional / supply teachers) work in multiple settings. It will be important for school administrators to consult with their PHAs in advance to conduct a risk assessment and to identify potential mitigation measures/ policies based on their community needs, relevant P/T guidance, and local epidemiology. Consideration should be given to encourage teachers and staff to wear face masks and eye protection (such as face shields). (Public Health Agency of Canada, 2020a)
- To the extent possible, consideration should be given to assigning supply teachers to one school for as long a period of time as possible in order to minimize exposures both for their own safety and for the safety of other teachers and students. A minimum two-week interval between assignments would help reduce the risk of infection transmission from one school to another if there is a need for supply teachers to change schools. (Science et al., 2020) (SickKids)
- Staff lounges and common areas should be restructured (as needed) to ensure physical distancing, and staff should be reminded of the importance of distancing from other staff. Whenever physical distancing cannot be maintained, whether in the classroom or other parts of the school building, we recommend the wearing a face mask/covering. (Science et al., 2020) (SickKids)
- Staff may need to use enhanced PPE, including medical masks, face shields, gowns and gloves, in specific situations (e.g. the child who becomes ill at school and needs close physical attention). Such PPE should be readily available together with the training and policies/

procedures to deal with this situation. Having designated staff trained in PPE use may facilitate preparedness and comfort among staff. (Science et al., 2020)(SickKids)

- Policies and procedures need to be developed in consultation with individuals with occupational health and safety expertise for all staff, in particular staff workers that have increased risk of severe outcomes/complications from COVID-19 (e.g. high-risk immunocompromised persons, such as those post-organ transplant, advanced age). (Science et al., 2020)(SickKids)

### Family and household health

- Encourage those who are at high risk for severe illness to avoid contact with the school (for example, parents / guardians, grandparents, or volunteers who are older adults, or those with underlying medical conditions). (Public Health Agency of Canada, 2020a)
- Those who are at high risk of severe illness residing with a child / youth attending school should discuss their risk with their health care professional. (Public Health Agency of Canada, 2020a)

### Students with Intensive needs

- Students with additional needs may require updated assessments and revised individual goals.
- For personal interactions, conditions must be created to allow for the provision of supports within a safe and secure environment, which may include the school setting or other appropriate spaces.
- All health and safety measures must be in place and communicated with the relevant staff and family prior to the provision of the service.
- All engagements will occur in a supervised setting, which may include the school or other appropriate spaces, and staff will not enter into private residences or provide personal transportation.
- Other methods of providing service or additional precautions may be suggested for those with compromised immune systems, in consultation with a medical professional.
- Consideration will be given to the directions given by the professional governing body of the staff providing the supports.
- It may not be possible to support all students with intensive needs in-person due to health and safety guidelines.

(SK *Students with Intensive needs* directives supported by (Public Health Agency of Canada, 2020a, Science et al., 2020, Alberta Government, 2020, Ministry of Education, 2020))

#### **Additional directives or recommendations from other jurisdictions:**

- Administrators should take steps to ensure that accommodations are made so that children with disabilities have access to the same public health information and mitigation measures (for example, accessible hand washing stations, accessible signage, age and disability appropriate language, assistance with personal preventive measures). (Public Health Agency of Canada, 2020a)

- School administrators should also develop a plan to ensure that children/youth who are hearing impaired (and others who may rely on facial cues) have their educational needs met if NMMs are worn in their classrooms; this may include the use of transparent masks. (Public Health Agency of Canada, 2020a)
- In addition, schools can expect a backlog in new child / youth evaluations; therefore, plans to prioritize those for new referrals will be important. (Public Health Agency of Canada, 2020a)
- School boards should support attendance options including offering daily attendance to students with special education needs for whom adapted timetables or remote learning may be challenging based on student needs.
- School boards should make changes in the school environment and/or remote learning needs when reviewing and updating Individual Education Plans (IEPs) and to ensure continued access to assistive technology. (Ministry of Education, 2020)(Ontario)
- The safe return of medically fragile students will be supported by boards consulting with local public health authorities on options for personal protective equipment, staff training, and potential continued remote learning where return is not possible. (Ministry of Education, 2020)(Ontario)
- School boards should work with partners to develop local protocols for school access by regulated health professionals, regulated social service professionals and paraprofessionals for the purpose of delivering school-based supports and services. Protocols should include support for remote delivery where in-school delivery is not possible. Children and youth with neurodevelopmental disorders/behavioural challenges should be allowed modified transition back to school. Behaviour/ASD school board teams need to be involved in transition planning prior to school re-entry for children and youth who are likely to have significant challenges. More resources may need to be devoted to these teams due to increased demand. In cases where therapists (both internal and external to the school board) are supporting a child/family, active communication between the school, parents and therapist are encouraged to develop transition plans. (Science et al., 2020)(SickKids)
- Reduce risk for people at higher risk of severe illness:
  - encourage children/youth who are at high risk for disease to consult their health care professional about staying at home or receiving in-person instruction; (BC Centres for Disease Control, 2020, Public Health Agency of Canada, 2020a, Science et al., 2020, Dept. of Education and Early Childhood Development. Province of Nova Scotia, 2020)
  - provide alternative ways to provide programming (if possible) that is meaningful so children/youth do not fall behind in their studies and maintain a sense of meaning/belonging; (Public Health Agency of Canada, 2020a)
  - accommodations for children/youth with limited access to electronic devices and the internet should be considered; (Public Health Agency of Canada, 2020a)
- Ensure that students continue to receive access to therapy and nursing services while in the school. Maximize continuity among those providing services and/or use virtual care for service provision, to decrease exposures. (Science et al., 2020)(SickKids)
- Policies and procedures should be in place for the cleaning of specialized equipment.

- EAs and nursing staff who support activities of daily living and cannot physically distance require appropriate PPE. (Science et al., 2020)(SickKids)
- Ideally, EAs should be assigned to a single classroom (if appropriate) and every effort should be made to minimize sharing of EAs between classrooms. (Science et al., 2020)(SickKids)
- With regard to remote learning for American Sign Language (ASL) learners and students who are hard of hearing, Manitoba Education Deaf/hard of hearing consultants will first connect with the case manager to determine the best way to communicate with the family and discuss learning packages required for ASL learners. Consultants will share the Guide for Teachers Working with Students Who Are Hard of Hearing and identify key considerations for each student who is hard of hearing. (Manitoba Education, 2020)
- With regard to remote learning for students who are Blind/Visually Impaired (BVI) and using Braille and assistive technology, BVI consultants will contact case managers to determine the best way to communicate with the family and discuss required alternate format materials and equipment. BVI consultants will share the Guide for Teachers Working with Students with Low Vision and identify key considerations for each student who has low vision. (Manitoba Education, 2020)
- Alternate Formats Collection: Production of alternate format materials will continue as usual and will be delivered to the student's home. Public Health has stated that this is acceptable with proper handwashing, as advised for those handling paper products. The Assistive Technology Lending Library can be a consideration for supports for communication and other learning devices on a case-by-case basis, and it can assist with developing low-tech supports. (Manitoba Education, 2020)

### Guidelines for illness at school

- All schools must identify a designated isolation area for any student or staff presenting COVID-19 symptoms who are not able to immediately leave their school facility. If a student is exhibiting symptoms consistent with COVID-19 at school, the students' teacher must notify the designated school official to accompany the student from the classroom to the school's pre-identified isolation space.
- Physical distancing between the student who is exhibiting symptoms of COVID-19 and the staff member should be maintained as much as feasible at all times. Staff must wear a medical mask and face shield during all interactions with the student to avoid contact. The student will also be provided with a medical mask, and requested to wear it if safe to do so. The student will be supervised at all times.
- The designated school official will call parents or caregivers immediately to pick up and remove their child from the school. They will then call their local Public Health contact to provide notification of the student being removed from the school.
- Public Health will then conduct an initial assessment and provide direction to the school. Arrangements will be made for the student to be transported appropriately from school by the student's parent(s) or emergency contact. School staff will not transport the student home. Once the student has exited the school facility, staff must wash their hands adequately with soap and water and ensure high touch areas are cleaned and disinfected.

- The school's isolation area must be cleaned and disinfected by non-teaching staff. The designated school official will arrange for the timely cleaning and disinfection of the student's classroom and, in particular, the student's desk and surroundings desks as well as any other common touch items in the classroom and/or other school facilities to which the student would have had access that school day, such as washrooms.
- If a teacher develops symptoms consistent with COVID-19, they must inform their designated school official to provide alternative arrangements for in-class instruction, as well as to notify their local Public Health contact to conduct an initial assessment and provide direction to the school. Once the teacher has notified their designated school official, they should immediately leave the school facility, and the school cleaning and disinfection procedures will take place.

(SK *Guidelines for illness at school* directives supported by (Public Health Agency of Canada, 2020a, Alberta Government, 2020, Dept. of Education and Early Childhood Development. Province of Nova Scotia, 2020, Science et al., 2020, BC Centres for Disease Control, 2020))

#### **Additional directives or recommendations from other jurisdictions:**

- Schools should ensure measures are in place to recognize symptoms consistent with COVID-19 and separate sick children/youth, staff and volunteers from others if symptoms develop while avoiding stigmatization and discrimination. (Public Health Agency of Canada, 2020a, Ministry of Education, 2020)(Ontario) For those who have symptoms consistent with COVID-19, it will be important to ensure:
  - the individual is quickly given a mask to wear, if not already wearing one, with a medical mask preferred over a NMM;(Science et al., 2020, Public Health Agency of Canada, 2020a, Alberta Government, 2020, Manitoba Education, 2020, Dept. of Education and Early Childhood Development. Province of Nova Scotia, 2020)
  - masks should not be placed on anyone who is unconscious, incapacitated or otherwise unable to remove the mask without assistance;(Public Health Agency of Canada, 2020a)
  - the individual is isolated and remains in a designated space (for example, sick room), while avoiding stigmatization and discrimination, until they can go home safely;(Public Health Agency of Canada, 2020a)
  - additional consideration is given to individuals with disabilities, such as having someone wait with them to assist with specific needs;(Public Health Agency of Canada, 2020a)
  - plans address the potential if a private vehicle or walking is not an option. Plans must not include using public transit.(Public Health Agency of Canada, 2020a)
- If very close contact is required and the child is young the staff member should also use a face shield or eye protection. (Alberta Government, 2020)
- PPE should be available in case a student or staff becomes ill while at school. The kit should contain alcohol-based hand rub, disposable gloves and masks, for use by the ill and staff members attending to them. (Government of Yukon, 2020, Ministry of Education, 2020)(Ontario)
- Sick students or staff should be encouraged to access COVID-19 testing by accessing the AHS Online Testing. (Alberta Government, 2020)

- Schools must keep records of a student's known pre-existing conditions. If a student develops symptoms in or outside of the program that could be caused by COVID-19 or by a known preexisting condition (e.g. allergies), the student should be tested for COVID-19 at least once to confirm that it is not the source of their illness. (Alberta Government, 2020)
- All items the student touched/used while isolated must be cleaned and disinfected as soon as the child/student has been picked up. Items that cannot be cleaned and disinfected (e.g. paper, books, cardboard puzzles) should be removed from the classroom and stored in a sealed container for a minimum of 10 days. (Alberta Government, 2020)
- Remove all items that cannot be cleaned (paper, books, etc.) and store them in a sealed container for a minimum of 7 days. (Ministry of Education, 2020)(Ontario)
- If a staff or student in a school is confirmed by public health as positive for COVID-19, public health will work with school administration to determine what actions should be taken, including if any staff or students who have been in contact with that person need to self-isolate, and if other staff and students' families should be notified. Schools should not provide notification to staff or students' families if a staff member or student becomes ill at home or at school, including if they display symptoms of COVID-19, unless directed to by public health. (BC Centres for Disease Control, 2020)
- Staff with symptoms and parents/guardians of children with symptoms should be directed to use the online self-assessment tool and follow instructions. Persons who test positive may not return to school until they are cleared according to public health guidance. Persons who retest negative (after an initial positive test) can return to school once they are symptom-free for 24 hours. (Ministry of Education, 2020)(Ontario)
- Testing: All individuals with symptoms should be assessed through 811 to determine whether COVID-19 testing is required. If COVID-19 testing is required, individuals must follow public health advice for returning to school. If testing for COVID-19 is not required, they can return once fever (with no medications) and other symptoms have resolved for 24 hours. (Dept. of Education and Early Childhood Development. Province of Nova Scotia, 2020)

### Outbreak management

- If a case of COVID-19 is confirmed by the Saskatchewan Health Authority (SHA), the school will be notified by SHA Public Health on the next steps that would be required. These may include self-isolation or self-monitoring, contact tracing, testing and appropriate communication.
- The school shall have record keeping of attendance and seating arrangements to support public health investigation and contact tracing.
- Contingency plans will ensure the continuation of education in a safe learning environment. There are four levels of education delivery:
  - Level 1: Primary and Secondary Educational Guidelines – As close to 'normal' as possible, with some additional measures
  - Level 2: will involve mask usage as determined by the Chief Medical Health Officer.
  - Level 3: will involve reducing classroom capacity. This may include establishing cohorts and hybrid learning models as considerations.

- Level 4: would take us back to suspending in-class learning, and moving back to a similar model we saw this past spring, with divisions working at the local level to ensure learning continues. In this model school would continue to be mandatory, albeit remotely. These levels would be put in place by Saskatchewan's Chief Medical Officer and we will continue to work closely with him, and his team, on all Safe Saskatchewan planning.

(SK *Outbreak management-contingency planning*, generally supported by (Public Health Agency of Canada, 2020a, Science et al., 2020, Alberta Government, 2020, Manitoba Education, 2020))

**Additional directives or recommendations from other jurisdictions:**

- In the event of suspected or confirmed cases of COVID-19, public health officials will determine any additional steps required, including but not limited to the declaration of an outbreak and closure of classes and/or schools. (Ministry of Education, 2020)(Ontario)
- All school staff must receive training on outbreak management procedures. (Ministry of Education, 2020)(Ontario)
- School administrators should develop plans, in consultation with their PHA, to help guide their actions in the event of an outbreak of COVID-19 in their schools. (Public Health Agency of Canada, 2020a)
- Plans should consider specific policies regarding:
  - case and contact management;
  - environmental cleaning.
  - Temporary alternative education-delivery models (Public Health Agency of Canada, 2020a)
- Communications plans should maintain privacy while including important audiences such as students, parents / families / guardians, the school staff / volunteers, and surrounding communities. (Public Health Agency of Canada, 2020a, Science et al., 2020)(SickKids)
- Roles and responsibilities of the school, PHA, and other stakeholders in the event of an outbreak should be identified in advance of a return to school. (Public Health Agency of Canada, 2020a)
- Zone Medical Officers of Health (MOH)/designate will collaborate with school authority/school administration to identify risks and mitigation strategies which may include temporarily suspending in-person class for a group of children/students. (Alberta Government, 2020, Manitoba Education, 2020)
- Public Health is responsible for case management and contact follow-up of all COVID-19 cases, and for determining the need for individual or public notifications. One (1) confirmed case of COVID-19 in a school would be considered an outbreak. (Dept. of Education and Early Childhood Development. Province of Nova Scotia, 2020) Public Health will assess the need for school closure (full or partial). (Dept. of Education and Early Childhood Development. Province of Nova Scotia, 2020)
- Public health will advise staff and students if they have been in close contact, if they need to self-isolate or self monitor and when they can return to school. (Manitoba Education, 2020)

- If two or more staff/students within a cohort are identified as having symptoms consistent with COVID-19, the school should follow outbreak notification procedures as per routine zone protocols (under review for September 2020). (Alberta Government, 2020)
- Schools must ensure records of classes, including seating charts, bus cohorts, and daily records of any approved visitors to the school, including supply/occasional teachers or custodians are maintained and readily available to be provided to public health for contact tracing purposes. (Ministry of Education, 2020) (Ontario)
- Principals must maintain a dedicated contact in the local public health unit and a list of the locations of the closest COVID-19 assessment sites. (Ministry of Education, 2020) (Ontario)
- Stage 4: Initial outbreak: All non-critical services are closed, including schools, for a minimum of 14 days. Reopening dependent on CPHO instruction. (Government of Nunvut, 2020)

## Reporting

- The designated school official will call parents or caregivers immediately to pick up and remove their child from the school. They will then call their local Public Health contact to provide notification of the student being removed from the school.
- If a teacher develops symptoms consistent with COVID-19, they must inform their designated school official to provide alternative arrangements for in-class instruction, as well as to notify their local Public Health contact to conduct an initial assessment and provide direction to the school.
- Schools must immediately report any suspected or confirmed cases of COVID-19 within the school to the local public health unit and provide any materials (e.g., daily attendance and transportation records) to public health officials to support case management and contact tracing and other activities in accordance with all applicable legislation, including the Municipal Freedom of Information and Protection of Privacy Act. (Ministry of Education, 2020) (Ontario)
- School boards must report on a daily basis any suspected or confirmed cases within the school community to the ministry. An online tool will be available for this purpose and no personal information will be collected by the ministry. Principals are responsible for communicating with the school community consistent with ministry guidance and relevant privacy legislation. (Ministry of Education, 2020) (Ontario)
- Administrators must understand the usual absenteeism patterns of their school as well as the symptoms associated with COVID-19. (Public Health Agency of Canada, 2020a)
- Schools and local PHAs should have established processes in place for symptom/case reporting, case management, contact tracing (for example, attendance records), and information sharing. (Public Health Agency of Canada, 2020a)
- Recommended that notification to the PHA occur in outbreaks or unusual situations, such as when absenteeism of children/youth, staff or volunteers is greater than would be expected (recognizing that flexible attendance may create a new baseline), or severe illness is observed. (Public Health Agency of Canada, 2020a, BC Centres for Disease Control, 2020)
- Schools should keep records of staff and student absenteeism and report unusual symptoms or absenteeism of >10% to the local Public Health office. (Dept. of Education and Early Childhood Development. Province of Nova Scotia, 2020)

- Schools should follow their jurisdiction's reporting requirement specific to COVID-19. (Public Health Agency of Canada, 2020a)
- Rapid involvement of public health for any confirmed SARS-CoV-2/COVID-19 cases in the school setting is essential in order to perform timely contact tracing and follow-up. There should be clear testing recommendations for contacts with information about where testing can be completed. (Science et al., 2020) (SickKids)
- There needs to be clear guidance from public health for return to school for those who test negative, test positive, and for those who do not get tested. (Science et al., 2020) (SickKids)

## Other topics

### *Ventilation*

- Ensure that the ventilation system operates properly; increase air exchanges by adjusting the HVAC system; open windows when possible and if weather permits. (Public Health Agency of Canada, 2020a, Science et al., 2020, Alberta Government, 2020)

### *Music and band*

- Wind or brass instruments have a theoretical possibility of increasing the transmission of COVID-19 and the risk is not fully understood at this time. Although initial reviews to date have not found evidence that the use of wind or brass instruments increase COVID-19 transmission, additional precautions should be taken, given the possibility of transmission due to production of infectious droplets while playing a wind or brass instrument or touching / blowing into an instrument recently used by an infected person. (Public Health Agency of Canada, 2020a)
- If resumed, schools should consider specific mitigation measures such as:
  - consider outdoor music and band practices and adapt stage or orchestral pit space to maintain physical distancing
  - for those who play a brass or wind instrument, the length of the instrument should be considered as an extension of the individual and included when determining the spacing between musicians as well as the potential for increased distance that droplets may be projected out of a wind instrument
  - do not share instruments or accessories
  - if shared, clean as per standard protocol for the instrument after each use and between users. Use a disinfectant or alcohol wipe when possible
  - do not share cleaning cloths or instrument brushes
  - do not share mouthpieces, reeds or harmonicas
  - when cleaning of individual instruments with saliva build-up (for example, spit valves), do so physically (> 2 metres) away from others and by blowing into a disposable cloth or container that will collect the saliva, to reduce the risk of exposure of others
  - do not blow the spit on to the floor

- the cloth or container should be placed in a waste receptacle or cleaned immediately. Wash hands immediately afterwards. (Public Health Agency of Canada, 2020a)

#### *Singing and choir*

- Overall, the available evidence suggests that the act of singing in indoor settings may contribute to the transmission of COVID-19 when one of the participants is infected. If choosing to resume choir and singing activities, schools should incorporate additional risk mitigation measures such as:
  - consider outdoor singing activities, weather permitting;
  - keep physical distance between each singer to at least 2 metres, and add more distance if possible;
  - organize the choir formation so singers are not facing each other directly or standing less than 2 meters behind each other;
  - consider opting for performances with fewer performers if distancing cannot be maintained;
  - singers that are members of the same household would be at less risk and could sing together while being distanced from others. (Public Health Agency of Canada, 2020a)
- Choir practices/performances and band practices/performances involving wind instruments may pose a higher risk of transmission. As such, it is recommended that these be cancelled for the immediate future. (Science et al., 2020, Government of Yukon, 2020, Alberta Government, 2020)

#### *Physical education and recreational activities*

- Additional consideration should be given to ensuring children/youth do not share items such as water bottles and to limiting the use of shared equipment. (Public Health Agency of Canada, 2020a, Alberta Government, 2020)

#### *Libraries*

- Schools should limit the number of children/youth in a library at one time to help maintain physical distancing. (Public Health Agency of Canada, 2020a)
- There should be appropriate environmental cleaning of high touch surfaces between groups.
- The use of computers and other shared items should be minimized, excluded when possible, and be cleaned between uses. (Public Health Agency of Canada, 2020a)
- Schools can also consider a protocol that provides a window of time between uses of a book (for example, at least 24 hours to ensure potential SARS-CoV-2 contamination is reduced. (Public Health Agency of Canada, 2020a)

#### *Work Experience*

- Work experience may resume as long as the risk of infection is mitigated for all participants. If the work experience placement is in a workplace, the child/student is expected to follow health

rules set out by the workplace which should comply with the Workplace Guidance for Business Owners. (Alberta Government, 2020)

#### *Travel and international students*

- As of March 25, 2020, all travellers incoming to Canada are subject to mandatory 14-day quarantine (self-isolation) enforceable through an emergency order under the Quarantine Act.
  - Schools must also implement policies and procedures to ensure children/youth, staff or volunteers who have travelled (internationally and/or within Canada) follow the federal/provincial/territorial/local government guidelines for quarantining.
  - It is important to consider that some children/youth will reside on school grounds, such as in a dormitory, while attending school ("boarding schools"). (Public Health Agency of Canada, 2020a)
- Administrators and students should be aware of the travel restrictions, exemptions, and advice before entering Canada. (Public Health Agency of Canada, 2020a)

#### *Immunizations*

- Existing school immunization requirements should be maintained and not deferred because of the current pandemic. (Public Health Agency of Canada, 2020a, Science et al., 2020) (SickKids)
- In addition, the influenza vaccination should be highly encouraged for all children/youth, staff and volunteers. (Public Health Agency of Canada, 2020a, Science et al., 2020) (SickKids)
- When school-based immunization programs are re-started, eligibility criteria should ensure that students who missed immunizations due to COVID-19 school closures should remain eligible. (Public Health Agency of Canada, 2020a)

#### *Food insecurity*

- Plans should be made prior to the start of the school year for how children/youth participating in meal programs will receive food in the event of a school closures/reduced programming, or if they are excluded from school because of illness, contact exposures or vulnerabilities. (Public Health Agency of Canada, 2020a)

#### *Considerations for remote, isolated, and Indigenous communities*

- Where schools rely on staff travelling from outside communities, they should consult with their PHAs for support in conducting a risk assessment and identifying potential mitigation measures specific to their situation (for example, mandatory quarantine, self-monitoring for symptoms). (Public Health Agency of Canada, 2020a)
- Considerations for resuming in-school classes may include the availability of staff and contingency plans for staff shortages (for example, due to illness or post travel self-isolation). (Public Health Agency of Canada, 2020a)

- Schools that are outside of, but in close proximity to Indigenous communities and have a high number of students from nearby Indigenous communities should engage Indigenous leadership in the development of their re-opening plans. (Public Health Agency of Canada, 2020a)

### Epidemiology of COVID 19 in children

- Multiple reports from around the world indicate that children and youth account for less than 5-10% of SARS-CoV-2 symptomatic infections. ((CDC COVID-19 Response Team, 2020, Stokes et al., 2020) cited in Science et al. 2020) In Canada, of 114,597 COVID-19 cases reported as of July 27, 2020, 8,747 (7.5%) were in individuals aged 0-19 years. ((Public Health Agency of Canada, 2020b) cited in Science et al. 2020) In most household cluster investigations, children were not the index case; however, emerging evidence suggests that the virus can spread efficiently in all age groups. ((Szablewski et al., 2020, National Centre for Immunisation Research and Surveillance (NCIRS), 2020) cited in Public Health Agency of Canada, 2020b).
- Modeling studies suggest that outcomes of a staggered relaxation of public health measures, starting with younger individuals first, would support Canada's objectives for the lifting of restrictive public health measures. (Zhao et al., 2020, Castilho et al., 2020) cited in Public Health Agency of Canada 2020a).
- COVID-19 virus has a very low infection rate in children (ages 0 to19). (BC Centres for Disease Control, 2020) In B.C., less than 1% of children tested have been COVID-19 positive, and even fewer are suspected to have been infected based on serological testing. Children, especially those below 10 years of age, appear to experience less severe symptoms due to COVID-19. ((Dong et al., 2020, Ludvigsson, 2020) cited in Public Health Agency of Canada, 2020a) Gastrointestinal symptoms are more common than in adults over the course of disease, while skin changes and lesions are less common. (BC Centres for Disease Control, 2020)
- While children over 10 years may be as likely as adults to transmit the virus to others, those under 10 years may also transmit the virus, but are less likely to do so than adults. (National Collaborating Centre for Methods and Tools, 2020, Park et al., 2020) cited in Public Health Agency of Canada, 2020a)
- Based on published literature to date, the majority of cases in children are the result of household transmission by droplet spread from a symptomatic adult family member with COVID-19. Even in family clusters, adults appear to be the primary drivers of transmission. (BC Centres for Disease Control, 2020)
- Children under one year of age, and those who are immunocompromised or have pre-existing pulmonary conditions are at a higher risk of more severe illness from COVID-19. (BC Centres for Disease Control, 2020)
- However, it is important to emphasize that children (especially children with complex medical conditions) have largely been isolated, so it is possible that these data may change over time as

children attend school and are interacting more with peers and adults. (Science et al., 2020)(SickKids)

- The recently described multisystem inflammatory syndrome in children (MIS-C) is a serious condition, potentially attributable to SARS-CoV-2 infection, for which ongoing surveillance is required; current data suggests MIS-C is rare, potentially treatable with immune modulatory therapies and associated with a low mortality rate of 0-2%. ((Whittaker et al., 2020, Toubiana et al., 2020) cited in Science et al., 2020)
- There is limited evidence of confirmed transmission within school settings. This is partially due to wide-spread school closures worldwide at the onset of the pandemic to help prevent the spread of COVID-19. In documented cases, there was typically minimal spread beyond the index case though isolated outbreaks have been reported. (BC Centres for Disease Control, 2020)
- Vigilance is nevertheless warranted given the emerging data on transmission from teenagers, reports of school-based outbreaks (e.g. Israel and Chile) and the high seroprevalence rate observed in a high school in a heavily impacted area in France. ((Fontanet et al., 2020) cited in Science et al., 2020)

### Conditions for school reopening

- The decision of which education delivery model to choose should take a risk-based approach and be made in consultation with PHAs in order to balance the benefits of in-person school attendance with the risk of COVID-19 transmission in the school and community at large. (BC Centres for Disease Control, 2020)
- It is essential to note that keeping schools open safely will be facilitated by low case burden and community transmission of SARSCoV-2 and, therefore, it is imperative that interventions to reduce disease prevalence and community transmission be maintained. (Science et al., 2020) (SickKids)
- Return to in-class learning in school may vary across the province, dependent on the number of COVID-19 cases and the rate of transmission in the local area. If there are areas with high circulation of COVID-19, those areas with minimal cases and lower risk may return sooner than children and students in areas with more COVID-19. (Alberta Government, 2020)
- The Alberta government has developed a COVID-19 status map that shows the level of risk in regions and information about local health measures at COVID-19\_Status\_Map. It also shows the rate of COVID-19 cases and the number of active cases. Confirmed cases will be monitored in real time to inform proactive responses in localized areas of the province. Municipalities, counties and municipal districts with active cases over 50 per 100,000 population may have additional measures to reduce the spread of COVID-19. This resource will help inform school re-entry and subsequent school operations. (Alberta Government, 2020)
- In addition, all institutions must adopt an emergency protocol that will enable them to transition quickly to distance education in the event of a second wave of the virus, which could again result in the total or partial restriction of access to campuses. This plan must allow staff members to be able to continue their work and provide support to students to ensure that

educational activities continue. (Dept. of Education and Early Childhood Development. Province of Nova Scotia, 2020)

- All schools will open as scheduled, under Stage 1, for the 2020-21 school year, unless otherwise directed by the CPHO. Stage 1: No COVID-19 in the Community or other Communities in the Region: If there is no one in the community or region who may have been exposed to someone with COVID-19 in another community, then the community will remain at Stage 1.-- Stage 2: Escalated Risk of COVID-19 Transmission in the Region: The community is at an escalated risk of COVID-19 transmission because one or more individuals have been identified through contact tracing as having potential exposure to COVID-19. If there is contact tracing in the region, but not in the community, the CPHO will use geographic factors and common community travel routes to determine if the community should move to Stage 2. Once the CPHO has confirmed there are no COVID-19 cases in a community, it will return to Stage 1. The timing of this transition is at the discretion of the CPHO. Stage 3: Isolated/Recovery from COVID-19 in the Community: A community is in recovery from one or more cases of COVID-19 and there is no evidence of further community transmission of the virus. This stage will occur approximately 10-28 days after the last identified case of COVID-19 moves into recovery. A community will move from Stage 4 to Stage 3 only when the CPHO deems it appropriate. Enhanced health and safety precautions in place, but they are not as strict as in Stage 4, when COVID-19 is present and active in a community. Stage 4: Community Transmission of COVID-19: There are active cases of COVID-19 in the community. There are very strict health and safety measures in place, and schools will be closed to students and staff. The time period for Stage 4 will be dependent on a number of variables, including contact tracing and related data collection. A community will move from Stage 4 to Stage 3 (Isolated/Recovery from COVID-19 in the Community) at the discretion of the CPHO. (Government of Nunavut, 2020)

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