

St. Christopher's Montessori School (STCMS) Communicable Disease Prevention Plan

Parents are not required to sign off on this communicable Disease Plan but should familiarize themselves with it thoroughly.

Updated September 2023

This document was created/updated based on:

NOTE: Much of the following document includes direct quotes from one or more of the above links.

Employees, parents, and school visitors are to review this document and follow these operational guidelines when in St. Christopher's Montessori School in order to ensure the health & safety of self and others; everyone must do their part to help reduce the spread of communicable diseases.

INTRODUCTION

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| <ul style="list-style-type: none">• Provincial COVID-19 Communicable Disease Guidelines for K-12 School Settings (August 25, 2022)• BC Centre for Disease Control Ministry of Health Public Health Communicable Disease Guidance for K-12 Schools (August 25, 2022) |
| <ul style="list-style-type: none">• Supporting Child Wellness: Public Health Guidance for Communicable Disease (including COVID-19) Management in Child Care Settings (August 25, 2022)• The Daily Health Check (January 2022) |

St. Christopher Montessori school has continued to build on the experiences and the advice of public health experts to determine our communicable disease prevention plan. The STCMS Communicable Disease Prevention Plan focuses on reducing the risk of transmission of communicable diseases.

The following is divided according to the following:

1. Recovery
2. Communicable Disease Prevention Guidance
3. Communicable Disease Prevention Plans
4. Environmental Practices
5. Administrative Practices
6. Personal Practices
7. Administrator Protocols for Managing Communicable Disease Activity at School

1. RECOVERY

Trauma-Informed Practice

Schools should continue to create supportive school environments, including utilizing a trauma-informed practice. As part of *trauma-informed practices* in our schools, staff are to:

- provide inclusive and compassionate learning environments
- understand coping strategies
- support independence
- help to minimize additional stress or trauma by addressing individual needs of students and staff.

2. COMMUNICABLE DISEASE PREVENTION GUIDANCE

Supportive School Environments

Schools should be supportive environments for communicable disease prevention by:

- Having **staff** model personal practices (e.g., hand hygiene, respiratory etiquette), and assist younger students as needed.
- Sharing reliable information, including from the BC Centre for Disease Control, Office of the Provincial Health Officer, and local health authorities with parents, families and caregivers.
- Promoting personal practices in the school (e.g., posters).
- Ensuring individual choices for personal practices (e.g., choosing to wear a mask or face covering) are supported and treated with respect, recognizing varying personal comfort levels.

Vaccines

Vaccines are important tools to protect against many serious communicable diseases, such as COVID-19 and influenza. Although proof of vaccination is NOT required for schools or staff, students, or visitors, **students and staff** are encouraged to ensure they are up to date on [all recommended vaccines for other communicable diseases](#), including COVID-19 vaccine.

- Schools/**administrators** are encouraged to share evidence-based information and promote opportunities to be vaccinated in partnership with public health and local Medical Health Officers. Evidence-based immunization information and tools for B.C. residents are available from [BCCDC](#) and [ImmunizeBC](#) websites.
- Each **school** is required to provide a designated space for public health nurses or other qualified health personnel to carry out their duties (including immunizations).

WorkSafeBC- Communicable Disease Prevention

School boards and independent school authorities must follow WorkSafeBC guidance and must provide communication, training and orientation to ensure the health and safety of their workers. WorkSafeBC communicable disease prevention guidance is aligned with the guidance provided by the BCCDC. Please see their website for the specific requirements and additional information.

3. ENVIRONMENTAL PRACTICES

Cleaning and Disinfecting

Regular cleaning and disinfection can help prevent the spread of communicable diseases. Cleaning of frequently touched surfaces should occur in line with regular practices and when visibly dirty.

- Always wash hands before and after handling shared objects.
- Items and surfaces that a person has placed in their mouths or that have been in contact with bodily fluids should be cleaned as soon as possible and between uses by different people.
- A dishwasher can be used to clean and sanitize dishwasher-safe items if the sanitize setting is used with adequately hot water.

General Cleaning and Frequently Touched Surfaces

- General cleaning should include cleaning of the premises.
- Cleaning and disinfection of **frequently touched surfaces** should occur at least **once in a 24-hour period and when visibly dirty**.
- Frequently touched surfaces are items touched by larger numbers of students and staff. They can include doorknobs, light switches, hand railings, water fountains and toilet handles, as well as shared equipment (e.g., computer keyboards, PE/sports and music equipment), appliances (e.g., microwaves) and service counters (e.g., library circulation desk), and may change from day to day based on utilization.
- Carpets/rugs/and frequently touched items such as toys, can be used.
- Frequently touched items like toys or manipulatives that may not be able to be cleaned often (e.g., fabrics) or at all (e.g., sand, foam, playdough, etc.) can be used.
- Garbage containers should be emptied daily.
- Cleaning and disinfection activities should focus on spaces that have been utilized by staff or students.

Cleaning & Disinfecting Bodily Fluids

Staff are to follow these procedures, in conjunction with STCMS policies, when cleaning and disinfecting bodily fluids (e.g., runny nose, vomit, stool, urine):

- Wear disposable gloves when cleaning blood or body fluids.
- Wash hands before wearing and after removing gloves.
- Follow regular health and safety procedures and regularly used PPE (e.g., gloves, protective or woven sleeves) for blood and bodily fluids (e.g., toileting, spitting, biting).

General Ventilation and Air Circulation Administrator

Natural ventilation (operable windows, etc.) and portable HEPA filter units are acceptable in regularly occupied classrooms that do not have mechanical ventilation systems.

STCMS has standalone medical grade air purifiers installed in each classroom for enhanced ventilation and air circulation. These are maintained on a regular basis as per manufacturer recommendations. Good air ventilation by itself cannot provide protection from illness; however, in addition to other preventative measures in place it can reduce the risk. Open windows when the weather permits if it

doesn't impact the functioning of ventilation systems.

NOTE: Taking students outside more often is no longer necessary for communicable disease prevention.

- When using air conditioners and fans in ventilated spaces, air should be moved from high places to lower places instead of blowing air directly from one person's breathing zone to another's. Avoid horizontal cross breezes.

Hand Hygiene

Washing hands with soap and water is still the single most effective way to reduce the spread of illness. Children will be supported by the teachers in washing their hands for at least 20 seconds in the following circumstances: when they arrive at school, before. And after eating and drinking, after using the bathroom, after being outside, after sneezing and coughing, whenever the hands look visible dirty.

Rigorous hand washing with plain soap and water or using an [effective hand sanitizer](#) reduces the spread of illness.

- Everyone should practice diligent hand hygiene.
- **Staff** are to facilitate regular opportunities for students to wash their hands. (This can include using portable hand-washing sites and/or alcohol-based hand sanitizer dispensers containing at least 60% alcohol.)
- If hands are visibly soiled, alcohol-based hand sanitizer may not be effective at eliminating microbes.
- Soap and water are preferred when hands are visibly dirty.
- Staff and students can refer to the BCCDC's [hand hygiene poster](#) to learn about how to perform hand hygiene.

Respiratory Etiquette

Parents and **staff** should teach and reinforce good respiratory etiquette practices among students, including:

Cough or sneeze into their elbow or a tissue. Throw away used tissues and immediately perform hand hygiene.

Refrain from touching their eyes, nose, or mouth with unwashed hands.

Refrain from sharing any food, drinks, unwashed utensils, cigarettes, or vaping devices.

5. ADMINISTRATIVE PRACTICES

Health Awareness

Staff, parents, caregivers, students and visitors should not come to school if they are sick and unable to participate fully in routine activities. The importance of everyone doing a health check remains in place.

A health check means a person regularly checking before coming to school to ensure they (or their child) are not experiencing symptoms of illness that would limit their ability to participate fully in regular activities. A daily check helps prevent the spread of communicable diseases, such as COVID-19, within the school setting.

School administrators should ensure that everyone entering a school is aware and routinely reminded of their responsibility to practice health awareness, including that they should not come to school if they are sick.

What To Do When Sick

Staff, students, or other persons in the school setting who are exhibiting symptoms of illness should stay home until they are well enough to participate in regular activities. Staff, children, or other persons can attend school if their symptoms are consistent with a previously diagnosed health condition (e.g., seasonal allergies) or symptoms have improved enough to where one feels well enough to return to regular activities and any fever has resolved without the use of fever-reducing medication (e.g., acetaminophen, ibuprofen). If you are unsure or concerned about your symptoms, connect with your health care provider or call 811. **Please Note: We ask that parents keep their child home until they have been symptom-free for 24 hours.**

School administrators should ensure that everyone entering is aware and routinely reminded of their responsibility to practice health awareness, including that they should not come to school if they are sick. This can be supported through communications (eg. Emails/letters to parents and staff) orientation activities (eg. Meetings, videos) and other reminders (eg. Signage on door)

Schools should not require a health care provider note (i.e. a doctor's note) to conform the health status of any individual, beyond those required to support medical accommodation as per usual practice.

If a **staff member, student, or other person** develops symptoms of illness at school and is unable to participate in regular activities, they will be supported to go home until their symptoms have improved. Appropriate infection control precautions are to be taken while the person is preparing to leave the school premises, including use of appropriate hand hygiene and cleaning/disinfection of surfaces soiled with bodily fluids. The ill person may use a mask if they are experiencing respiratory symptoms.

School administrators are expected to establish procedures for students and staff who become sick while at school/work, including.

- Continue to have non-medical masks on hand for those who have forgotten theirs but would like to wear one (for both the person who is sick and for those who may be assisting them).
- Make arrangements for the student/staff member to go home as soon as possible (e.g., contact student's parent/caregiver for pick-up).
- For students or staff members that are unable to be picked up immediately, have a space available where the student or staff can wait comfortably and are separated from others. NOTE: Younger children must be supervised when separated. Supervising staff can wear a non-medical mask and should avoid touching bodily fluids as much as possible and practice diligent hand hygiene.
- **Staff responsible for facility cleaning** should clean and disinfect the surfaces/equipment which the person's bodily fluids may have been in contact with while they were ill (e.g., their desk in a classroom, the bathroom stall they used, etc.) prior to the surfaces/equipment being used by others.
- Cleaning/disinfecting the entire room the person was in (a "terminal" clean) is not required in these circumstances.
- Request that the individual stay home until symptoms have improved and they feel well enough to participate in all school-related activities.

- **Parents and caregivers** of children who are considered at higher risk of severe illness due to communicable disease (including COVID-19) are encouraged to consult with their health care provider to determine their child's level of risk. Students are not required to wear a mask or face covering when receiving services, though may continue to base on their or their parent/caregiver's personal choice.
- Schools are to have non-medical masks on hand for those who have forgotten theirs but would like to wear one.

Visitor Access/Community Use

Schools can follow normal practices for welcoming visitors and the community use of schools. All visitors, including community groups using the school, should follow the STCMS Communicable Disease Prevention Measures outlined in this document.

6. PERSONAL PRACTICES

Health Awareness

Everyone at school should practice health awareness, including staying home when sick. See "Administrative Practices" (Section 5 in this document).

Non-Medical Masks and Face Coverings

The decision to wear a mask beyond when it is required by public health is a personal one, based on individual preference. Some students and staff may choose to continue to wear a non-medical mask or face covering throughout the day or for certain activities. The choice of staff and students to choose whether they practice additional personal prevention measures is to be respected. Information on non-medical masks is available from [BCCDC](#).

- Masks are most effective when fitted, worn and handled correctly.
- **Administrators** should set, communicate and consistently reinforce clear expectations that any bullying or other disrespectful behaviour or conduct related to personal mask use choice is unacceptable. Administrators should address inappropriate behaviour in line with student codes of conduct.

Hand Hygiene & Respiratory Etiquette: See page 3 & 4 in the "Environmental Practices" (Section 4 in this document).

Staff, students, and visitors should be encouraged to practice frequent hand hygiene. To learn about how to perform hand hygiene, please refer to the BCCDC's hand hygiene poster.

Personal Space

Staff and students should be encouraged to respect others personal space (the distance from which a person feels comfortable being next to another person).

Sharing Food, Beverages & Other Items That Touch the Mouth

Staff and students should be encouraged to not share items that come in contact with the mouth (e.g., food, drinks, unwashed utensils, etc.). Shared-use items that touch the mouth

should be cleaned and disinfected between use by different individuals (e.g., water bottles, instrument mouth pieces).

7. ADMINISTRATOR PROTOCOLS FOR MANAGING COMMUNICABLE DISEASE ACTIVITY AT SCHOOL

Most communicable diseases experienced by students and staff within school settings may be managed by the individual/family and through routine preventative measures, such as staying home from school until well enough to participate in regular activities.

Public health may become directly involved if certain reportable diseases, such as measles, are identified where there are effective interventions available to prevent further spread and protect against severe disease. Additional time-limited public health measures may also be implemented at the discretion of the local Medical Health Officer or the Provincial Health Officer in response to broader risk of communicable disease transmission in the community.

NOTE: School administrators can contact public health if they have concerns about communicable disease transmission within the school setting and require additional support.

Communications and Protecting Personal Privacy

Medical Health Officers play the lead role in determining if, when and how to communicate information regarding increased communicable disease activity within a school. To protect personal privacy and to support accuracy, schools are to exercise caution in providing communicable disease notifications beyond when and what is recommended by public health.

Functional Closures

A functional closure of a school is the temporary closure of a school determined by the principal due to a lack of staff to provide the required level of teaching, supervision, support, and/or custodial to ensure the health and safety of students. This would likely be due to a high number of staff or certain employees away who are required for a school to function, and the inability to temporarily replace them. The Principal should notify their Medical Health Officer and the Ministry of Education and Child Care (educ.covid@gov.bc.ca) when they are considering or implementing a functional closure.

Public Health Closure A public health closure is the temporary closing of a school ordered by a Medical Health Officer when they determine it is necessary to prevent the excessive transmission of a communicable disease.