

NNDSB Reopening Guidance for Schools 2021/2022

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Covid 19 Reopening Guidelines for NNDSB Schools**Table of Contents**

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Contacts and Cohorts

Elementary

1. Cohorted classes will stay together and with as few teachers as possible.
2. Students may be placed into small groups (for example special education support, English-language learning) with students from other cohorts.
3. Students may use common spaces (for example, cafeterias, changerooms, libraries observing social distance and masking)
4. Members of different cohorts can interact outside with distancing encouraged or inside with distancing and masking
5. Specialized education staff and teachers, such as French teachers, education support staff (for example, education assistants) are permitted to go into classrooms, and multiple schools to provide the full breadth of programming for student
6. Lists of students and staff must be maintained each time cohorts are interacting with one another including curricular, extra-curricular, and breaks.

Secondary

1. NNDSB will continue with an Octomester course delivery model: MOE states that no more than two courses at a time in order to preserve the option of reverting to more restrictive measures
2. Students may be placed into small groups (for example special education support, English-language learning) with students from other cohorts.
3. Students may use common spaces (for example, cafeterias, changerooms, libraries observing social distance and masking)
4. Members of different cohorts can interact outside with distancing encouraged or inside with distancing and masking
5. Specialized education staff and teachers, such as French teachers, education support staff (for example, education assistants) are permitted to go into classrooms, and multiple schools to provide the full breadth of programming for student
6. Lists of students and staff must be maintained each time cohorts are interacting with one another including curricular, extra-curricular, and breaks.

Remote Learning

1. PPM 164 still applies.
2. Boards will continue to provide devices to support remote learning.
3. Boards should have a Remote Learning Plan in preparation for shutdown

Protective Strategies

Screening

All staff and students must self-screen every day before attending school. Schools should provide parents with reminders instructions to use the School Screening tool daily. <https://covid-19.ontario.ca/school-screening/>.

For the first two weeks of school, schools are required to confirm with students on-site that they have completed their screening each day.

A hardcopy of this tool (https://covid-19.ontario.ca/covid19-cms-assets/2021-06/COVID-19_printable%20school%20and%20child%20care%20screening_ENG.pdf) must be provided to families enabling them to perform daily screening of their children before arriving at school in absence of internet connectivity.

Self-assessment tools should be made available to staff to ensure awareness of possible symptoms of COVID-19.

The province will continue to provide a screening tool for use by all school boards and may update this throughout the school year. Local public health units may designate a commensurate or more restrictive screening tool for local use. All staff and students who are experiencing symptoms consistent with COVID-19 as identified in the screening tool, must not attend school and should follow the guidance provided in the screening tool, which may include seeking appropriate medical attention as required, and/or getting tested for COVID-19

1. The ministry may direct schools to perform daily on-site confirmation of self-screening, such as during a period of potential higher transmission (for example, after a holiday period). Schools are expected to continue to use the process implemented in the 2020-2021 school year to implement on-site confirmation of self-screening of individuals prior to or upon their arrival at school, if directed to do so.
2. If the ministry directs schools to perform daily on-site confirmation of self-screening students, staff, and visitors will need to provide **daily confirmation** that they have self-screened. All teachers will confirm that students have self-screened during daily attendance. Staff will continue to attest to self-screening daily using the eBase form on the Health and Safety portal. The principal and those designated within the school will be responsible for ensuring all students, staff and visitors have completed and passed their daily COVID-19 self-screen.

Any staff, student, or visitor that does not pass the screening procedures should not attend school.

Student Masks

Students in Grades 1 to 12 are required to wear properly fitted, non-medical or cloth masks indoors in school, including in hallways and during classes, as well as on school vehicles. Masks may be temporarily removed indoors for the consumption of food and drink (see Cafeteria Use and Lunch protocols for more detail). When masks are removed, students should maintain a minimum distance of two metres between cohorts and as much distancing as

possible within a cohort. Students are not required to wear masks outdoors, but distancing should be encouraged between cohorts as much as possible.

Students may be able to remove their masks for physical activity indoors (read health and physical education), but only when it is safe to do so.

Students are not required to wear masks outdoors, but distancing should be encouraged between cohorts as much as possible.

Masks/face coverings should be changed when they are damp, dirty or damaged. Medical masks are not recommended to be reused and they are to be disposed of when crumpled, moist or visually contaminated. More information about masks/face coverings is available on the [NBPSDHU's Face Coverings website](#).

Masking Exemptions

Some students, staff and visitors will be exempt from wearing masks in NNDSB schools, buildings and while riding on school buses. We expect all staff and students to be respectful of those who wear masks and those who cannot wear a mask for medical and other reasons for which an exemption applies.

Students, parents and staff must expect that there will be individuals in the school, building, or bus who will not be wearing masks because they qualify for an exemption. In such cases, appropriate measures such as face shields, greater physical distancing, clear barriers and/or study carrels, enhanced cleaning, and other infection prevention and control measures will need to be considered. If increased distancing is employed, caution must be exercised so as not to stigmatize the student. The importance of increased distancing may depend upon current epidemiology and vulnerability (e.g., immune issues, etc.) of the staff/student or proximate staff/students.

Accommodations require consideration of the human rights needs of the person requesting an exemption, as well as medical and health and safety needs of others. Protecting students/families and staff who are at high risk for COVID-19 should be considered in relation to assessing the appropriateness and nature of a mask exemption. It is expected that all reasonable steps and considerations will be taken before a student is not permitted to attend school in person, or an employee is not permitted to attend work in person.

The following individuals **may** be exempt from wearing masks:

- Individuals with a medical condition/disability that make it difficult to wear a mask. This can include:
 - Medical condition, mental health condition, cognitive condition or disability that prevents wearing a mask OR
 - Medical condition that makes it difficult to breathe.
- People who require accommodation in accordance with the Ontario Human Rights Code.

If students, staff and visitors are able to wear masks but choose not to, they do not qualify for a mask exemption and in-person attendance at school or the workplace without a mask will not be allowed.

Exemption Request Process:

Staff, visitors, parents and students who seek an exemption based on one of the above noted categories must inform the school Principal/Manager as soon as possible of the request and exemption category, so that the request and possible alternative arrangements may be considered. When dealing with a mask exemption request, Principals should use the NNDSB “Student Exemption of Face Coverings Form” to acknowledge the request and document approval or denial of the request.

The parent/guardian may be required to provide appropriate documentation authorizing the exemption of wearing a face mask where the documentation does not already exist at the school (including related Special Education identification information).

For requests for exemption due to inability to breathe: Principals/managers should make reasonable inquiries regarding this request. Are there asthma-related issues? Could a different type of mask be suitable (disposable vs. non disposable, cloth masks or homemade masks)? Although not a substitute for a mask, a face shield may be an option. Face shields provide limited protection but may be better than no mask at all.

Staff PPE

The NNDSB will continue to provide school staff and school bus drivers, school bus monitors and student aides with required PPE, including medical masks (surgical/procedural), eye protection and other PPE based on their specific role/job functions (for example, gloves, gowns).

Medical masks are required to be worn by school staff and visitors indoors in school, including in hallways and during classes. Staff must wear masks outdoors if two metres of distance from others cannot be maintained. Staff must maintain at least two metres distance when consuming food/drinks. Reasonable exceptions to the requirement for staff to wear masks will apply.

Eye protection (face shields or goggles) must be worn by staff who work with students not wearing masks, such as Kindergarten teachers and Early Childhood Educators. Other staff may be directed to wear eye protection as per occupational health and safety requirements.

Eye protection is also required if a staff member comes within two metres of an unmasked individual both indoors and outdoors, as per occupational health and safety requirements.

Eye protection for school bus 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.

Special Education Considerations

Where necessary for faces to be seen for lip reading to support students who are deaf or hard of hearing, masks with clear sections may be appropriate. Where staff are required to perform an Aerosol Generating Medical Procedure (AGMP) or required to be in the same room when an AGMP is being performed, N95 respirators (fit tested) will be provided.

Hand Hygiene and Respiratory Etiquette

On the first day of classes, schools should train students on appropriate hand hygiene and respiratory etiquette, including the use of alcohol-based hand rub (ABHR), and reinforce its use. Appropriate hand hygiene and respiratory etiquette are among the most important protective strategies. Schools should train students on appropriate hand hygiene and respiratory etiquette, including the use of alcohol-based hand rub (ABHR), and reinforce its use. Resources, teaching tools and videos to support this can be found at <https://www.myhealthunit.ca/en/health-topics/schools-and-covid-19.asp> or [Coronavirus Disease 2019 \(COVID-19\) - How to Wash Your Hands \(publichealthontario.ca\)](#)

Distancing and Congregating

As much distance as possible between students, between students and staff, and between staff members should always be promoted. Physical distancing measures are to be layered with other public health measures such as screening, hand hygiene, cohorting, enhanced cleaning, and masking. Schools are encouraged to remove unnecessary furniture and place desks with as much distance as possible and to allow teachers as much teaching space as possible. Desks should face forward rather than in circles or groupings. Periods of student movement should be staggered, if possible, to limit student congregation in the hallways. Congregation of teachers/staff should be limited to minimize potential for adult-to-adult transmission.

Where possible, special consideration for physical distancing should be taken for classrooms with fixed equipment (for example, science labs or technological education classrooms). School arrival and departure and signage will remain in use. Schools should develop school arrival and departure procedures that support physical distancing where possible.

Approaches may include:

- Determine entry procedures to avoid crowding by students.
- Maximizing the use of all possible entrances and exits to support the beginning and end of the school days
- Providing visual cues or physical guides, such as tape on floors or sidewalks and signs/posters on walls, to guide appropriate distances in lines/queues and at other times (for example, guides for creating “one-way routes” in hallways)
- Place tape, signs or other visual markers on floors, tables, seats and in play areas.
- Consider installing cues such as stickers or signs at frequently touched surfaces (e.g., water fountains, doors) to encourage students to avoid directly touching with their hands (e.g., use your elbow or the back of your hand).
- Where appropriate, design and implement a walking flow for the school, such as one-way routes with prominent signs and/or floor markings to prevent crowding (e.g., entrances, hallways, classrooms).
- Designate a room(s) in the school as an isolation room/wellness room for sick individuals. Schools with large populations can consider more than one room for this purpose. This room should only be used as an isolation/wellness room and not for other purposes. It should contain only minimal items and equipment so that cleaning and disinfecting is easy to perform after an ill individual leaves the room.
- Hand sanitizer should be available in school entrances and exits and in classrooms.

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

Cleaning and Disinfection Standards and Protocols

Enhanced cleaning routines and protocols previously developed will remain in place for the 2021/2022 school year. Refer to Public Health Ontario's [environmental cleaning fact sheet \(PDF\)](#). Refer to Health Canada's [hard-surface disinfectants and hand sanitizers \(COVID-19\)](#) for approved products

Shared Materials

Shared materials are important for learning (for example, toys for imaginative play in kindergarten, manipulatives for math, computers and other tech materials, books, art supplies, indoor physical education equipment and shared outdoor equipment). **The use of shared materials is permitted.** The risk associated with transmission with shared objects is low. The focus should be on regular hand hygiene and respiratory etiquette to reduce the risk of infection related to shared equipment, particularly when regular cleaning of shared objects is not feasible.

Shared materials outdoors, including playground equipment, during recess are permitted, with appropriate hand hygiene and respiratory etiquette used by staff and students before and after recess.

Shared spaces, Lockers and Cubbies

Shared homerooms, libraries (for group and individual use, for example, drop-in study time, etc.) and computer/technology labs, are permitted. Use of lockers/cubbies is permitted. When different cohorts interact in shared indoor spaces, masking and as much distancing as possible should be maintained between cohorts.

Food Practices for Snacks and Meals/Lunch Time

- Since eating requires the removal of masks, additional measures should be considered to reduce the spread of COVID-19.
- Students may eat together:
 - Outdoors in their cohort, with distancing, if possible, with distancing as much as possible within a cohort, and distancing between cohorts.
 - Indoors with a minimum distance of two metres/six feet between cohorts and distancing as much as possible within a cohort.
 - It is recommended that within a cohort, efforts should be made to keep students two metres/six feet apart while eating, since masks are removed.
 - Consider using the classroom for lunch periods instead of a cafeteria or lunchrooms to allow for distancing within and between cohorts.
 - To optimize physical distancing, students can also sit in chairs around the classroom, or every other student can take their mask off to eat their lunch, and once they are done put their masks on and allow the rest of the students to do so, if this allows for better physical distancing.
- Open windows and doors, if possible, to allow for circulation. When possible, have lunch outdoors.

- Larger schools should look for ways to limit the number of students and cohorts eating lunch in proximity to each other (i.e., staggered lunch periods, eating outdoors or in alternative spaces).
- Encourage quiet lunches to reduce the potential for spreading respiratory droplets.
- If staff are having lunch in the staff room, they have to remain two metres/six feet away from all other staff. It is recommended that they do not congregate with anyone else. Extra chairs can be removed from the staff room and only keep what is possible to allow for a two metre/six-foot distance. Staff are to unmask only while eating lunch and then should immediately put their mask back on. Lunches should be brief and quiet as much as possible while eating. When possible, staff can eat lunch in a room alone, outdoors, or in an area where there are no students or other staff present.
- Use of the cafeteria is permitted:
 - Capacity limits for cafeterias should be established to allow two meter/six feet distancing between cohorts and as much as possible within cohorts.
 - Where this is not possible, consideration should be given to using the classroom for lunches, staggered lunches, and other space within the school to allow for physical distancing.
- Ensure students and staff perform proper hand hygiene before and after eating.
- Ensure students have their own drink bottle that is labeled, kept with them during the day and not shared.
- Ensure students have their own individual meal or snack.
- Reinforce no food sharing policies.
- Nutrition/third party food programs and non-instructional food events such as pizza day are permitted to operate, provided that food handlers use adequate [food handling and safety practices](#).
- Offer a variety of nutritious foods that are minimally processed, pre-wrapped or ready-to-eat, including fresh fruit and vegetables, dairy products and whole grain products. Portion foods in the food preparation area. If not feasible, food can be portioned with minimal food handling in the area where it will be served.
- Grab-and go-formats are preferred.
 - For example, food items can be put together in one container (e.g., paper or plastic bag) for each student, or each item can be available for students to take from their own bin/tray.
 - Students should either wash their hands with soap and water, or use hand sanitizer, if their hands are not visibly dirty, prior to selecting and eating food.
 - Students should select and touch only the food they are taking.
 - Common utensils should not be used.

Food programs

Nutrition/third party food programs and non-instructional food events (such as a pizza day) are permitted to operate, provided that food handlers use adequate food handling and safety practices and follow all COVID-19 follow staff health and safety guidelines.

Water fountains and bottle filling stations

Water fountains and bottle filling stations can be used and are recommended to be cleaned and disinfected daily, or more often if needed. Fill water bottles rather than drinking directly from the mouthpiece of water fountains. Post [signs](#) near water fountains emphasizing public health measures.

Assemblies

School assemblies or other student/school gatherings are permitted and should follow the relevant provincial requirements under the Reopening Ontario Act. This can include multiple cohorts in alignment with provincial capacity limits.

(<https://news.ontario.ca/en/backgrounder/1000159/roadmap-to-reopen>)

Visitors

Any visitor to a school is required to self-screen and to wear a medical mask (for example, surgical/procedural) while on school premises. A medical mask will be provided by the school if needed. In addition to the requirement for visitors to perform daily self-screening, schools are expected to confirm that visitors have completed their daily self-screening prior to or upon their arrival at school

- a. All school visits are by appointment for essential reasons
- b. Community professional partners and related student services are considered essential
- c. Additional essential reason are to be deemed by the principal
- d. Confirmation self-assessment required at sign-in
- e. Regular visitors require proof of vaccine

At this time, only essential visitors will be permitted in schools. This may include CAS workers, police, or parents assisting a student in need. This policy will be updated pending our proof of vaccine procedures for school visitors.

School pictures

Student pictures indoors are permitted with the current regulations though outdoors is preferred. The requirements under the regulations must be followed. If taking pictures indoors, choose a large room with good ventilation, and follow these measures:

- There should be two metres/six feet or more between the client and photographer at all times.
- Clean and disinfect surfaces that are touched between cohorts.
- To reduce movement in the room, the photographer should organize their equipment/lighting, etc. before calling in the student.
- The photographer and any assistants should wear a medical mask (and consider a face shield).
- Students should keep their mask on until the actual photo shoot.
- The photo shoot with each student should be kept as short as possible (less than 15 minutes).

- If a cap and gown are used, they must either be purchased for personal use or they must be laundered between uses. If they cannot be laundered, they can be disinfected and/or quarantined for 72 hours between uses. Students can make their own scroll with a sheet of paper and ribbon. Consider other ways for students to make their own cap.

Field Trips

- **In the near future the NNDSB will authorize field trips. In the meantime, consider delaying field trips and outdoor stays at the start of the school year until school procedures are well established. Virtual field trips can also be considered. Outdoor field trips are preferred over indoor field trips at this time.**

When permitted:

- Day trips and overnight stays are permitted and should follow the relevant provincial requirements under the Reopening Ontario Act. For day and overnight trips, anyone entering the area must be screened upon arrival and the pick-up/drop-off of students should happen outside of the area or within a designated and isolated area. For the duration of the trip, students should remain in their class cohorts or smaller groupings of their class cohort. It is preferable that students remain with students within their class cohort during transportation and for the duration of the visit.
- To facilitate contact tracing, keep accurate records of all individuals entering the program setting which include name, contact information, time of arrival/departure and screening completion.
- Staggering arrival and departure times is recommended to support cohorting and physical distancing measures.
- Operating programs in consistent cohorts (with assigned staff members) who stay together is recommended throughout the duration of the program.

Vaccination

Vaccination is an important tool to help stop the spread of COVID-19 and allow students, families, and staff to safely resume normal activities. Vaccination rates may provide opportunities to reduce measures over time.

Pending ministry policy updates- School Board Employees:

The Ministry of Education requires school board employees, bus drivers and essential school visitors must:

- Provide proof of full vaccination against COVID-19; or
- Provide a formal/official documented medical reason for not being vaccinated against COVID-19; or
- Participate in an educational program approved by the Ministry of Education and.
- Anyone who is not immunized, including anyone with medical reasons, will be required to complete regular COVID-19 testing as directed in provincial guidance.

School principals will be required to collect Proof of Vaccination for school visitors (pending).

The means of obtaining, administering and reporting the test will be communicated in the near future.

School-Focused Vaccination Clinics

NBPSHU will work with schools to host school-focused clinics into the fall, aimed at youth, their families, school board employees and students of local private schools who have not yet received a first or second dose. Principals are asked to prioritize the use of school space to support clinics. School-focused clinics can operate before, during, or after school hours. Clinics can either be on school property or be off-site in partnership with school boards and operate like any other vaccine clinic.

Like all other medical procedures, COVID-19 vaccines are only provided with informed consent. In Ontario, there is no age limit that sets out when people can provide informed consent and make medical decisions on their own. Consent can be provided by anyone who is capable of doing so, including those aged 12 to 17. This means they understand the treatment, why it is being recommended, and the risks and benefits if they accept or refuse to be vaccinated. It is the role of the health provider to determine if their patient can consent to treatment and it is a regular and routine process that health providers undertake before performing any medical procedure. If a child or youth is incapable of consenting to receiving the vaccine, they would need consent from their substitute decision-maker, such as their parent or legal guardian. The health care provider, school, and family must respect a young person's decision regarding vaccination.

Schools are asked to disseminate information from local public health units on the informed consent process to all students, parents, and guardians prior to hosting/participating in a school-based clinic. Schools are also asked to provide notification to students, parents, and guardians on when a school-focused vaccination clinic will be hosted at a school

Daily Attendance Reporting to MOE

Reporting using the ART tool at school level

Using the Attendance reporting tool through an MOE “GO-Secure” account, principals are responsible to ensure the following:

- Schools must report to the Ministry of Education on a daily basis any [confirmed cases of COVID-19](#) for students and staff within the school.
- The expectation is that the reporting will be completed by the school Principal or their designate (i.e., Vice-Principal, Administrative Assistant, etc.) by **11 a.m.** every day once the school year begins. The reporting has to be completed daily, even if there are no confirmed cases of COVID-19.
- Those schools that are going to offer in-person summer school beginning in August 2021 are required to use the ART as soon as in-person instruction begins.

COVID-19 Protocols for Emergency Management and Fire Safety

School principals are responsible for Maintaining Emergency Procedures for their schools, while respecting public health guidance outlined in this document.

Conducting Emergency and Crisis Response Drills:

- A minimum of two lockdown drills must still occur each school year, however, the way they are conducted may be modified for the 2021-22 school year.
- A discussion, visual demonstration or combination of both could be used to provide an overview of the Emergency and Crisis Response Plans, including
 - Identifying an emergency.
 - Procedures; and
 - Roles and responsibilities
- Drills are conducted while maintaining physical distancing and wearing a face mask (as required)
- While a response to bomb threats may have historically been practiced through evacuation of the school, the requirement to ensure that boards’ staff, students, and other stakeholders are aware of their obligations/responsibilities within individual school plans, can be accomplished through discussion and/or visual demonstration.
- Teachers must do drills within classroom cohorts
- Schools should notify local emergency services in advance of scheduled drills and of changes to any floor plans.
- Other programs operating within the school (e.g., childcare and early years programs) should be notified of changes to the Emergency and Crisis Response Plans.

Conducting Fire Drills

On August 3, 2021, the Office of the Fire Marshal issued Fire Marshal revised its 2020/2021 fire drill directive. "[Total evacuation fire drills in schools during COVID-19 pandemic](#)". Schools must plan for procedures to conduct fire drills aligned with public health advice. We emphasize a continued flexible and balanced approach when conducting fire drills in schools in accordance with the document linked above.

During the 2021-2022 school year, the term "total evacuation fire drill" must allow for procedures that will ensure fire drill evacuations can be conducted safely, in accordance with public health guidance, to minimize the risk of COVID-19 transmission. For the 2021-2022 school year, assistants to the Fire Marshal are directed to deem the following procedures to be compliant with the requirements of total evacuation fire drills as set out in Article 2.8.3.2. of Division B of the Fire Code for schools, private schools, extended day programs or third-party programs, and to day nurseries (i.e., childcare centers) that are operated in schools and provide services to children that are pupils of a board:

1. On the scheduled Fire Drill day, a one-time sounding of the fire alarm during an all-school announcement in order to familiarize all students and staff with the sound of the fire alarm.
2. On the same day, following Item 1, evacuation of individual classrooms in a manner that ensures physical distancing is maintained in accordance with public health guidance. As only a few classrooms may be able to evacuate simultaneously, the total evacuation of the school may extend over the course of the school day. The teacher/supervisory person may use a cell phone ringer, a bell or a similar type of device to commence the individual classroom evacuation, at the scheduled time.

For clarity, these allowances are only for purposes of undertaking a total evacuation fire drill and only where needed to ensure compliance with public health guidance. **Where a fire alarm sounds outside the scope of a planned fire drill, the total evacuation of the school shall proceed as per procedures outlined in the approved school Fire Safety Plan.**

Sample Modifications for a Total Evacuation Fire Drill On designated "fire drill days" (minimum 3 times for each fall and spring term):

Sounding the Alarm

- A "one-time" sounding of the fire alarm is conducted in the morning, so that students become familiar with the sound of the alarm. Principals may choose to notify staff and local fire services of this procedure the day before the fire alarm will be sounded.
- On the fire drill day, a school announcement can be made on the PA system that outlines how the total evacuation fire drill will be occurring. This may include instructions related to:
 - Staff and student roles
 - Physical distancing
 - Masking
 - Staggered or scheduled evacuation process

Evacuation Procedure:

- The total evacuation of the school will take place per procedures outlined in the approved school Fire Safety Plan. As only a few classrooms may be able to evacuate simultaneously, the scheduling of individual classroom evacuations may be required.
- Individual classrooms will evacuate in a manner that ensures physical distancing and the wearing of masks (as required) is maintained in accordance with public health guidance.
- Teacher plays recording on cell phone or other device to simulate the sound of the fire alarm to commence the individual classroom evacuation, at the scheduled time.
- Teacher practices duties assigned under the Fire Safety Plan (e.g., closing windows and doors).
- Individual classes or cohorts practice evacuation procedures by walking the primary and secondary exit routes, while maintaining physical distancing.
- If the building has more than one exit (e.g., east and west wing), multiple classes may be able to participate simultaneously while adhering to public health advice in common areas, such as hallways.
- Exit paths can be identified using colour coding that can serve as a reminder for primary students, where they need to go.
- Once the class has safely evacuated from the building, students walk to assigned meeting areas before returning to the classroom, all while physically distancing and wearing masks (as required).
- Once the students and teachers have returned to the classroom, they will sanitize/wash their hands.
- Teacher/school administration documents the fire drill participation.

Note:

- Schools should notify local fire services in advance of the scheduled fire drill to ensure fire trucks are not dispatched.
- Other programs operating within the school (e.g., childcare and early years programs) must also be notified to ensure children and staff understand that the sounding of the alarm relates to a fire drill.

Student Transportation

Capacity

School vehicles can operate at full capacity. Vehicles for elementary students should reduce capacity where possible. The seat directly behind the driver in school buses should remain empty to maintain physical distance between the driver and students. This distancing measure may not be applicable to other vehicle types such as vans or cars. Where school vehicles are able to operate at less than full capacity, students should be seated in a manner that maximizes physical distancing. Active forms of travel (for example, walking and cycling) are encouraged to ease pressure on transportation demand. Windows should be opened when feasible to increase ventilation.

****Masks are required**

The use of non-medical masks for students in grades JK to 12 is required on school vehicles. Students in kindergarten should be directed to wear a mask on school transportation in accordance with directions received from the North Bay-Parry Sound District Health. However, *“Children under the age of five years either by birth age or mental development who refuse to wear a face covering and cannot be persuaded to do so should be exempt from wearing masks”*.

Exceptions may be made for students with medical conditions or special needs that prevent masking using the NNDSB Face Covering Exemption process.

Students should be assigned seats and a record of the seating plan should be kept assisting with contact tracing in the case of a student or driver contracting COVID-19. Students who live in the same household or are in the same classroom cohort should be seated together where possible.

Cleaning

School vehicles should follow an enhanced cleaning protocol of disinfecting high-touch surfaces (for example, handrails, seatbacks) at least twice daily.

Academic Programs and Requirements

Cooperative Education

For students enrolled in cooperative education courses, in-person community placements can be arranged in alignment with the relevant provincial requirements under the Reopening Ontario Act, the direction and recommendations of the local health unit, and with the safety and curriculum requirements of the Cooperative Education curriculum. If in-person placements are not possible, students should be offered virtual placements. In the event that public health guidance or direction changes during a placement and the student cannot complete their co-op placement in-person or virtually, educators should work with the student to modify their co-op learning plans that allow the student to achieve the curriculum expectations and earn the credit(s).

Music

Music programs are only permitted in areas with adequate ventilation requirements have been met. **(Read ventilation section for requirements).**

- Singing and the use of wind instruments will be permitted. Use of wind instruments is permitted indoors **within a cohort** if a minimum distance of two metres or more can be maintained. As much distance as possible should be encouraged and use of large, well-ventilated spaces should be prioritized.
- Use of wind instruments is permitted **outdoors** in mixed cohorts with distancing encouraged.
- Singing is permitted indoors. Masking is encouraged but not required for singing indoors if a minimum distance of two metres can be maintained between cohorts and as much distancing as possible maintained within a cohort.
- If shared, proper sanitization of wind instruments should occur between use.

Health and Physical Education

In elementary and secondary health and physical education courses, the use of gymnasiums, swimming pools, change rooms, weight rooms, indoor physical education equipment and shared outdoor equipment are permitted with distancing.

High and low-contact activities are permitted indoors and outdoors as follows:

- Masking is not required when playing high or low contact activities outdoors.
- Masking is encouraged for indoor sports and activities where they can be worn safely.
- Windows should be opened, when possible, to increase air flow.
- It is not advisable to wear a mask during intense cardiovascular activities. At this time, it is recommended that high intensity activities are held outdoors where physical distancing is possible. Alternatively in well ventilated areas indoors, cardiovascular activity can be considered if there is adequate physical distancing of 2 metres/6 feet or more.

- Students should practice hand hygiene before and after participating in physical activity and equipment uses. The risk associated with transmission with shared objects is low therefore the focus should be on regular hand hygiene and respiratory etiquette to reduce the risk of infection related to shared equipment especially when the cleaning of shared objects is not feasible.
- The whole gym itself does not need to be cleaned after each cohort, unless visibly dirty, but high-touch surfaces should be cleaned twice daily or more often as required.
- Playground structures do not need to be cleaned or disinfected between uses. Hand hygiene should be practiced before and after using playground equipment.

Examples of High Contact sports include Basketball, Football, Hockey, Lacrosse, Rugby, Soccer and Wrestling

Examples of Low Contact sports include Badminton, Curling, Gymnastics, Swimming, Track and Field, Running and Volleyball.

EQAO

For the 2021-22 school year, regular EQAO assessments for grades 3 and 6 will resume in the new digital format for Math, Reading and Writing. Students in Grade 9 Math will write the Grade 9 Math digital adaptive assessment and the results of the assessment may count towards up to 10% of the student's final mark. EQAO assessments are required to be done in-person at the school. Students learning remotely can choose to participate in the EQAO COVID-19. Assessments can be completed in-person at the discretion of the school board, as long as all applicable health and safety measures can be met.

Literacy and Community Involvement Graduation Requirements

The Literacy graduation requirement is waived for students graduating in the 2021 - 22 school year. The Literacy graduation requirement will be restored for students graduating in the 2022-23 school year. Students in Grades 10 and 11 and non- graduating students, including those who are learning remotely, are required to work towards the literacy graduation requirement, through participation in the Ontario Secondary School Literacy Test (OSSLT), adjudication or the Ontario Secondary School Literacy Course (OSSLC).

The community involvement graduation requirement has been reduced from 40 hours to a minimum of 20 hours of community involvement activities for students graduating in the 2021-22 school year. Temporary changes to reduce barriers students may face to earn their community involvement hours and provide greater flexibility in how they earn their hours will continue for the 2021-22 school year. The community involvement graduation requirement of 40 hours will be restored in 2022-23 and students working towards their OSSD should be supported to meet these requirements in time for their graduating year.

Adult and Continuing Education

Delivery options for programs offered by through Adult and Continuing Education such as International and Indigenous Languages, Adult Credit as well as Literacy and Numeracy, may vary in approach, in alignment with this return to school direction, to include remote and in-person models while taking into account the health and safety of students

Mental Health

Student Mental Health and Well-Being should be considered a top priority, as good Mental Health is fundamental to a student's ability to learn and to succeed at school and in life. Schools are expected to adopt the NNDSB Mental Health initiatives. In addition, [School Mental Health Ontario](#), is providing schools with comprehensive back to school resources.

Records Management

Schools are required to maintain and have available the following documentation in case it is needed for case and contact tracing in accordance with all applicable legislation, including the [Municipal Freedom of Information and Protection of Privacy Act](#). In the event that schools are made aware of a positive diagnosis of COVID-19 for staff or students, it is essential that key information pertaining to staff and students be available upon request by the local PHU for the purposes of contact tracing. This information needs to be accessible by school administrators on short notice, both during and outside of school hours, when requested by the PHU. COVID-19 board leads are expected to establish a system with their local PHUs to ensure that these records can be accessed at all times.

The following information should be available:

- Attendance records
- Class lists and seating charts
- Before-and-after childcare lists
- Transportation lists and seating charts
- Up to date contact information for parents, staff and students
- Special assignments and programs for example: Education Community Partnership program (formerly Care Treatment Custody Corrections), Special Education
- Records of essential visitors
- List of students in each cohort for any extracurricular activity, and indicating the type of activity (e.g., sport, art club) Include vaccination information if available
- Staggered lunch/recess schedule for each class cohort.

Ventilation

School boards are expected to continue optimizing air quality in classrooms and learning environments through improving ventilation and/or filtration. This is a key element in the multiple protective strategies to support healthy and safe learning environments for students and staff.

For schools with full mechanical ventilation, school boards are expected to:

- use the highest-grade filters possible, preferably MERV 13 filters
- undertake frequent filter changes through the school year
- operate ventilation systems 2 hours or more before and after school occupancy
- calibrate HVAC systems for maximum air flow and increased fresh air intake

This guidance also applies to schools with mechanical ventilation for parts of schools, such as additions.

For schools or parts of schools without mechanical ventilation, school boards are expected to place standalone high efficiency particulate air (HEPA) filter units in all classrooms, learning environments and shared spaces including gyms, libraries, lunchrooms, childcare spaces, administrative spaces and portables. All Kindergarten classrooms, even those in schools operating mechanical ventilation systems, will have a HEPA filter unit placed in their classroom as an extra preventative measure to account for kindergarten students not wearing masks. HEPA filter units ensure particle filtration of air and improve air exchange. These units must be sized for the classroom or learning environment that is being used. In larger classrooms and learning environments, more than one HEPA unit may be required. In addition, school boards are encouraged to support outdoor education where possible and open windows where this augments ventilation for classrooms and learning environments.

Detailed school guidance and checklists regarding ventilation can be found here:

https://efis.fma.csc.gov.on.ca/faab/Memos/B2021/B14_EN.pdf

Extra-Curricular Activities and Community Use of Schools

Intramural Clubs and Sports

Clubs, activities, sports teams, bands (without wind instruments), and extracurricular activities are permitted. Cohorts may interact outdoors with physical distancing encouraged, and indoors with masking and appropriate physical distancing. Direction in sections on protective strategies and specific academic programs and requirements apply to all extra-curricular activities.

Inter-school sports and activities

Inter-school sports and activities will only be permitted after the NNDSB, in consultation with the NBPSDHU, creates a protocol including the forthcoming guidance from OPHEA. It is our intention to take part in OFSSA programming.

Before and After School Programs

Schools, childcare operators and authorized recreation providers in schools should follow the guidance for before and after school programs and collaborate to ensure that student lists and information are maintained and readily available to be provided to public health for contact tracing purposes in accordance with all applicable legislation, including the [Municipal Freedom of Information and Protection of Privacy Act](#).

Community Use of Schools

The NNDSB has not yet authorized the resumption of Community use permits.

Once authorized by the NNDSB, Community use of schools is permitted provided activities are aligned with public health guidance and direction. The NNDSB will work with the NPSDHU to develop a plan. Once the NNDSB has authorized the resumption of community use of schools all programs should ensure that they are complying with the applicable provincial requirements under the [Reopening Act](#).

Community organizations wishing to use school facilities must work with their local PHUs to develop a plan for community access to school property and facilities. Any visitors to a school are required to self-screen and to wear a mask while on school premises. At the advice of the local public health unit, the NNDSB may be asked to restrict community access.

Community groups must maintain daily student/visitor lists and contact information. This should be readily available to be provided to public health for contact tracing purposes in accordance with all applicable legislation, including the Municipal Freedom of Information and Protection of Privacy Act.

International students

The NNDSB is continuing to update our international students plan that will include:

- a plan respecting COVID-19 that has been approved by the Minister of Education
- operates in accordance with the approved plan

Further direction may be shared throughout the year should there be federal or provincial changes regarding international students.

Management of COVID-19 in Schools

While the focus of this guidance is on the updated health, safety and operational measures that are required in order to safely reopen and operate schools, please note that every effort should continue to be made to uphold the welcoming and caring environment that schools provide for children and families.

Please note that the Ministry of Health's School Screening tool, ([Click here](#)) will always be the most current guidance and take precedence over any other guidance regarding the attendance of any person in a school building.

1.0 DEFINITIONS

For reporting to the Local Health Unit:

- **Confirmed case** is a person with laboratory confirmation of a SARS-CoV-2 infection.
- **Probable case** is a person (who has not had a laboratory test) with symptoms compatible with COVID-19 **AND**:
 - a. Traveled to an affected area outside Canada in the 14 days prior to onset of symptoms; or
 - b. Has had close contact with a confirmed case of COVID-19; or
 - c. Lived in or worked in a facility known to be experiencing an outbreak of COVID-19 (e.g., long-term care home, prison, etc.)
 - d. A person with symptoms compatible with COVID-19 AND in whom laboratory diagnosis of COVID-19 is inconclusive.
- **Suspected case** is a person with COVID-19 symptoms (that are not due to a pre-existing medical condition or seasonal allergies).
- **Fully immunized:** an individual is defined as fully immunized ≥ 14 days after receiving their second dose of a two-dose COVID-19 vaccine series
- **High risk contacts of a case-** School staff and students exposed to a confirmed case of COVID-19 will be advised by public health. Public health will complete a risk assessment and determine who had close contact/high risk exposure.

MANAGING SUSPECTED CASES OF COVID-19

Appendices A & B are key references in all cases and must be adhered to.

COVID-19 Decision Tool for Self-Isolation from School

COVID-19 screening for symptoms: All Individuals must complete a self-screening questionnaire before going to school. Students with a chronic health issue that is medically diagnosed and unrelated to COVID-19, should look for new, different or worsening symptoms. *If the student aged 12 years and older has symptoms of a mild headache, tiredness, sore muscles or joints that occur within 48 hours after getting a COVID-19 vaccine, they should indicate "NO" to the symptoms, and the student is to wear a fitted mask when at school. If their symptoms last longer than 48 hours or worsen, they are to stay home, self-isolate and get tested.

Positive COVID-19 case identified at a school

In the event that schools are made aware of a positive diagnosis of COVID-19 for staff or students, key information pertaining to staff and students will be made available to North Bay Parry Sound District Health Unit, upon request, contact tracing purposes. This information needs to be accessible by school administrators on short notice, both during and outside school hours, when requested by NBPSDHU. COVID-19 school board leads have established a system with NBPSDHU to ensure that these records can be accessed at all times.

Fully immunized individuals who have COVID-19 symptoms

If the individual identified as a high-risk contact is fully immunized (meaning more than 14 days have passed after receiving the second of COVID-19 vaccinations) or has previously tested positive (meaning individual has been a confirmed case of COVID-19 where their initial positive result was less than or equal to 90 days ago and they have been cleared from their initial infection), and have symptoms compatible with COVID-19, they should:

- isolate and get tested right away.

- discontinue self-isolation once symptoms have been improving for at least 24 hours (48 hours for gastrointestinal symptoms), if they test negative; or
- self-isolate for 10 days if they test positive.

Fully immunized individuals without COVID-19 symptoms

If the individual identified as a high-risk contact is fully immunized or previously positive and does not have symptoms compatible with COVID-19, they are generally not required to self-isolate; however, self-isolation may be required at the discretion of public health.

The individual should be recommended for testing but is not required to isolate while awaiting test results if they were not already directed to isolate.

Individuals who are not fully immunized

Individuals who display symptoms at school are subject to the [COVID-19 school and child care screening](#) and should get tested and self-isolate while test results are pending or not available unless there is a known alternative diagnosis provided by a health care provider.

If the individual identified as a high-risk contact is not fully immunized or previously positive, the individuals should self-isolate and get tested on or after **day 7** of their isolation period. Regardless of the test result, they are required to self-isolate for **10 days**.

Household members of a high-risk contact with COVID-19 symptoms

If the individual identified as a high-risk contact is fully immunized, or was previously positive and has symptoms compatible with COVID-19:

- a household member who is fully immunized, or previously positive is not required to stay home or isolate.
- a household member who is not fully immunized or previously positive should isolate while the high-risk contact is awaiting test results or if they are not tested; and
- If the risk-contact tests negative, a household member is not required to isolate, but should stay at home except for essential reasons (i.e., work, school) during the contact's isolation period.

If the individual identified as a high-risk contact and the household member of the high-risk contact is not fully immunized or previously positive and:

- has no symptoms compatible with COVID-19: the household member should stay at home except for essential reasons (for example, work, school) during the high-risk contact's isolated period
- has symptoms compatible with COVID-19: the household member should isolate while the high-risk contact is awaiting test results or if they are not tested

If the high-risk contact tests negative, the household member should stay at home except for essential reasons (for example, work or school) during the high-risk contact's isolation period.

Case Scenarios

Individual does not have symptoms of COVID-19

If the individual does not have symptoms of COVID-19 they can attend school if they do not have a household member with symptoms

Individual has symptoms but is not a close contact of someone with COVID-19

- If the individual has any new or worsening symptoms, they must stay home, self-isolate, and get tested or contact their health care provider, even if the symptom has resolved.
- Anyone in the household who attends a school setting must also stay home and self-isolate until the child's test is negative.
- Anyone in the household who is not fully immunized who attends a school setting must also stay home and self-isolate until the child's test is negative.

Individual has symptoms and tests positive for COVID-19

The individual must stay home and self-isolate for 10 days, starting from the day the symptoms started.

- The individual may return to school after 10 days if they do not have a fever (without use of medication), and their symptoms have been improving for at least 24 hours or 48 hours for gastroenteritis symptoms.
- Even if the individual does not have symptoms they must stay home and self-isolate for 10 days from the day of the test.
- All other adults and children in the household members must stay home, self-isolate for at least 14 days from their last contact with the person who was contagious and follow public health advice.
- All household members who are not fully immunized must stay at home and self-isolate for at least 10 days from their last contact with the person who tested positive for COVID-19 and follow public health advice. Household members who are fully immunized are generally not required to self-isolate unless they have symptoms or are otherwise directed to self-isolate by the public health unit.

Individual has symptoms and tests negative for COVID-19

The individual may return to school if their symptoms have been improving for 24 hours (48 hours for gastroenteritis symptoms) and if they are not a close contact of someone with COVID-19 or have travelled outside of Canada.

- Household members can return to school right away as long as they do not have symptoms.

Individual has symptoms, is not a close contact of a positive case, and is not tested for COVID-19

If the individual has symptoms of COVID-19 that are not related to an existing medical condition or recent COVID-19 vaccination* and they are not tested, they must stay home and self-isolate for 10 days from the date their symptom(s) started. The individual can return to school after 10 days if they do not have a fever (without taking medication), and their symptoms have been improving for 24 hours.

The children and adults in the household that attend a school must self-isolate and can return to school after 10 days (since their last contact with the infectious individual), if they do not have symptoms.

The children and adults in the household that attend a school who are not fully immunized must stay at home and self-isolate for at least 10 days from their last contact with the symptomatic

person. Household members who are fully immunized are generally not required to self-isolate unless they have symptoms or are otherwise directed to self-isolate by the public health unit.

Individual has symptoms but has an alternative medical diagnosis but is not tested for COVID-19

Individuals who have symptoms but have been given an alternative diagnosis by a health care provider (not related to COVID-19), may return to school if their symptoms have been improving for 24 hours (48 hours for gastroenteritis symptoms).

- A cold or respiratory infection is not considered an alternative diagnosis, and the individual should be tested for COVID-19.
- Household members can return to school right away as long as they do not have symptoms.

Individual has symptoms but is 12 years of age and older and has had a recent COVID-19 vaccination but is not tested for COVID-19

- If the individual is 12 years of age or older and has recently received their COVID-19 vaccination and has symptoms of a mild headache, tiredness, sore muscles or joints occur within 48 hours after getting a COVID-19 vaccine, they can attend school and wear a properly fitted mask.
- If their symptoms last longer than 48 hours or worsen, they are to stay home, self-isolate and get tested.

Individual has been in close contact with someone with COVID-19

- An individual who has been in close contact with someone with COVID-19 must stay home and self-isolate for 10 days.
- The individual should go for testing. Even if the test is negative, they will have to self-isolate for the full 10 days.
- Household members can attend school/childcare/work, as long as they don't have symptoms of COVID-19 but will need to stay home for other non-essential reasons until the individual who is a close contact completes their period of self-isolation.
- If the individual develops symptoms, all children and adults in the household that are not fully vaccinated must stay home and self-isolate until COVID-19 is ruled out.

Household member has been in close contact with someone with COVID-19

- Any household member who has been in close contact with someone with COVID-19 must stay home and self-isolate for 10 days and arrange to get tested. Even if the test is negative, they must self-isolate for the full 10 days.
- An individual who is not fully vaccinated who has been in close contact with someone with COVID-19 must stay home and self-isolate for 10 days. Individuals who are fully vaccinated who have been in close contact with someone with COVID-19 are generally not required to self-isolate unless they have symptoms or are otherwise directed by the public health unit.
- The individual and the other individuals in the household who are not close contacts can attend school/childcare/day camp/work, if they don't have symptoms of COVID-19 but will

need to stay home for other non-essential reasons until the individual who is a close contact completes their period of self-isolation.

- If the household member who has been in close contact develops symptoms, all children and adults in the household that are not fully vaccinated must stay home and self-isolate until COVID-19 is ruled out

Individual who is fully vaccinated has been in close contact with someone with COVID-19

- If an individual is fully vaccinated with 2 doses of a COVID-19 vaccine, and it has been more than 2 weeks since the last dose, and the individual does not have symptoms, they do not need to self-isolate.
- The individual should still go for testing if recommended.
- If the fully vaccinated individual develops symptoms, they must self-isolate immediately and get tested.

Household member who is fully vaccinated has been in close contact with someone with COVID-19. If a household member is fully vaccinated with 2 doses of a COVID-19 vaccine, and it has been more than 2 weeks since the last dose, and they do not have symptoms, they do not need to self-isolate. The household member should still go for testing if recommended.

- If the fully vaccinated household member develops symptoms, they must self-isolate immediately and get tested.

Individual has been in close contact with someone with COVID-19 and develops symptoms but is not tested.

- The individual must self-isolate for 10 days from when their symptoms started. All household contacts who are not vaccinated should self-isolate for 10 days from their last contact with the symptomatic person, as this is how long it can take for their symptoms to appear.

Household member has symptoms of COVID-19 and is not a close contact of a positive case

- If a household member has symptoms of COVID-19, any children and adults who are not fully vaccinated and attend a school setting must stay home until COVID-19 is ruled out for the household member with symptoms. If the household member with symptoms does not go for testing the children and adults in the home who are not fully vaccinated must self-isolate for 10 days.
- If the household member has symptoms of a mild headache, tiredness, sore muscles or joints that occur within 48 hours after getting a COVID-19 vaccine, children and adults in the home can attend a school/childcare/work setting. If symptoms last longer than 48 hours or worsen, the household member is to stay home, self-isolate and get tested. Children and adults in the home will have to stay home until the person with the symptoms tests negative.

Household member has symptoms and is a close contact of someone who had COVID-19

- If a household member has symptoms of COVID-19 and is a close contact of someone who has COVID-19, all other children and adults in the household who are not fully vaccinated must stay home and self-isolate until COVID-19 is ruled out.

- If the household member with symptoms is not tested the rest of the household who are not fully vaccinated must self-isolate for 10 days from their last contact with the infectious household member.
- If the household member tests negative, children/adults in the home can return to school/childcare/work but will need to stay home for other non-essential reasons until the household member completes their self-isolation.

Individual has travelled outside of Canada

- If the individual has travelled outside of Canada in the last 14 days, they must self-isolate for 14 days. The other individuals in the household who have not travelled can attend school/child care/work, as long as they don't have symptoms of COVID-19, but they will need to stay home for other non-essential reasons until the person who has travelled completes their period of self-isolation
- If the individual who travelled does not have symptoms and they are fully vaccinated (have received both doses of a two-dose series and it has been more than two weeks since their last dose) prior to their entry into Canada, they may not need to self-isolate. There are some exemptions for people eligible to enter Canada who also meet specific [federal conditions for fully vaccinated travellers](#).

Household member has travelled outside of Canada

- If anyone in the household has travelled outside of Canada in the last 14 days, the person who travelled must self-isolate for 14 days. The other individuals in the household who have not travelled can attend school/child care/work, as long as they don't have symptoms of COVID-19, but they will need to stay home for other non-essential reasons until the household member who has travelled completes their period of self-isolation
- If the individual is exempt from travel self-isolation period (federal quarantine requirements) because they perform an essential job (e.g. truck driver, pilot) the rest of the household can still attend school. If the individual who travelled does not have symptoms and they are fully vaccinated (have received both doses of a two-dose series and it has been more than two weeks since their last dose) prior to their entry into Canada, they may not need to self-isolate. There are some exemptions for people eligible to enter Canada who also meet specific federal conditions for fully vaccinated travelers.

Steps to take should an individual not pass the School and Childcare Screening while at school:

If it is a STAFF MEMBER who is ill:

1. Put on a level 1 surgical/procedure mask.
2. Leave the school/worksite immediately; if departure cannot be immediate, isolate, remaining 2 meters from others always until they are able to leave or be picked up.
3. Encourage the staff member to call their health care provider or local assessment center (see list below), to book an appointment to be tested for COVID-19. Staff must continue to isolate themselves and may not return to school while waiting for test results.
4. Schools will need to have plans in place for staff coverage.
5. Once the symptomatic staff member has left the worksite, all items used by them must be cleaned and disinfected by the cleaning staff. Any items that cannot be cleaned must be removed and stored in a sealed bag or container for a period of at least 72 hours.

If it is a STUDENT who is ill:

Students who become ill with symptoms while in school should be separated immediately from the rest of their cohort in a designated room and supervised until they are picked-up. Notify parents/guardians or emergency contacts to pick up the ill student as soon as possible. They should not use public transportation, including the school bus. If it is an emergency, call 911. Siblings who live in the same household should be sent home as well if they are not fully vaccinated with a COVID-19 vaccine.

1. Put on a level 1 surgical/procedure mask, if possible.
2. Students will be separated from other students and supervised by a staff member in the designated isolation room(s).
3. Contact family members for immediate pick-up, as per the Ministry of Health COVID-19 Guidance: School Outbreak Management.
4. The supervising staff member must perform hand hygiene, and wear a level 1 surgical/procedure mask, a face shield, gown, and gloves. The staff member must remain 2 meters away, if possible.
5. Schools will advise parents/guardians of specific actions to take at this stage as per the updated Ministry of Health symptoms list and school screening. Provide parents with appendix D: *Handout for Parents/Guardians Picking Up a Symptomatic Child*
6. Siblings and/or household members attending the same school should be assessed and sent home if symptomatic. (They need not be excluded if they are asymptomatic but should self-monitor for symptoms.)
7. Once a student has departed, the staff member who was with the student must dispose of the PPE and perform hand hygiene. All items used by the students must be cleaned and disinfected by the cleaning staff. Any items that cannot be cleaned must be removed and stored in a sealed bag or container for a period of at least 72 hours

Step 3 Duty to Report.

- Principals/Supervisors have a duty to report all suspected, probable or confirmed cases of COVID-19 under the Health Protection Act. Principals must monitor new and additional illnesses in the school and classrooms. They should seek the advice of their Public Health Contact, if there is a significant increase in illnesses, or clusters of illnesses.
- Principals should report in the Ministry of Education daily attendance tracking tool as necessary from the MOE.
- Principals must contact the designated school public health nurse at their local public health unit to report any probable or confirmed case in staff or students.
- Principals must also contact public health for further guidance if they have staff or students away due to being in close contact with a positive case or probable case. The local public health unit will provide specific advice on what control measures need to be implemented to prevent potential spread and how to monitor other possible infected staff or students.

Contact information for the two health units with whom NNDSB works is provided below:

Public Health Unit	Community	COVID-19 Assessment Center
North Bay and Parry Sound Contact: COVID-19 call Centre is open Monday to Friday 8:30 a.m. to 4:30 p.m. at 1-800-563-2808 option 5.	Mattawa	Location: Hôpital de Mattawa Hospital, 217 Turcotte Pk Rd Hours: Monday, Wednesday and Friday 8 a.m. to 12 p.m., To book an appointment, call: 705-744-5511 ext. 0
	North Bay	Location: West end of the North Bay Regional Health Centre (NBRHC), 50 College Dr., North Bay, On. Parking in Public Lot 9 Hours: Open seven days a week 9 am to 5 pm. To book an appointment, call: 705-474-8600 ext. 4110.
	West Nipissing	Location: 219 O'Hara St. Sturgeon Falls, On. Hours: Monday – Friday (closed Wednesdays) 12 p.m. to 4 p.m. To book an appointment, call: 705-580-2186.
	West Parry Sound	Location: 70 Joseph St., Parry Sound Unit 105-106, entrance at the back door, please ring doorbell at the time of your appointment and stand back past the sign as directed. Hours: Open seven days a week 8 a.m. to 4 p.m. To book an appointment, call: 705-746-4540 ext. 5030.
	East Parry Sound	EMS Mobile East Parry Sound COVID-19 Assessment Centre. To book a SYMPTOMATIC TEST call: 705-774-8378 • Calls answered Monday- Friday • Tests Booked Tuesdays and Thursdays only • Positive symptoms

		<ul style="list-style-type: none"> · Close personal contact (not a contact of a contact) with a KNOWN Positive Case of COVID-19 OR as suggested by Public Health through contact tracing · COVID 19 APP positive contact detected (greater than 15 minutes within 6 feet, no PPE) <p>LOCATION: Drive Through Testing Completed BY APPOINTMENT in Carport of Almaguin Highlands Health Centre 150 Huston Street. Information provided at the time of the booking.</p>
<p>Simcoe Muskoka</p> <p>Contact: 1-877-721-7520 (toll free)</p>	Bracebridge	<p>Location: Located in a portable at 75 Ann Street in Bracebridge; adjacent to the helipad at the back of the South Muskoka Memorial Hospital (SMMH) property. <i>Please note it is NOT located inside the hospital.</i></p> <p>Hours: Monday – Friday 9 a.m. to 5 p.m.</p> <p>To book an appointment, call: 1-888-383-7009</p>
	Huntsville	<p>Location: Active Living Centre, 20 Park Drive, Huntsville, ON</p> <p>Hours: Open Mondays, Wednesdays, Fridays 10 a.m. to 4 p.m.</p> <p>Appointments are made in-person</p>

Step 4: Principals/Supervisors shall communicate to staff, in a professional and confidential way, that there was a probable or confirmed case in the worksite, so that staff can engage in enhanced monitoring of students and/or other staff. They must also communicate with early years partners about COVID-19 in schools and boards.

Principals shall communicate to parents, in a professional and confidential way, that there was a confirmed case in the school. If schools have websites, principals are asked to create a COVID-19 advisory section. School boards and schools will be asked to post information if there is a confirmed case of COVID-19 that involves a student or a staff member in a school setting.

Step 5: Prepare accurate records of staff, students and visitors. Schools should be able to produce information regarding the students and staff members in all class cohort(s) (for example, classroom, bus, before and after school programs, extracurricular activities).

MANAGEMENT OF A SINGLE CASE

The local public health unit will provide guidance on steps to take when individual tests positive for COVID-19. The local public health unit will conduct contact tracing and identify and follow up with all contacts. In consultation with the local public health unit, close contacts may be referred to for testing.

MANAGEMENT OF CASES IN MULTIPLE COHORTS

In consultation with local public health units, if there are additional positive cases in other cohorts, the school may be required to close. Close contacts may be referred to for testing by the Health Unit. Other Outbreaks at other NNDSB worksites will be managed on a case-by-case scenario, in consultation with local public health authorities.

REQUIRED STEPS IN AN OUTBREAK

If an outbreak is declared at a school, the following measures must be taken:

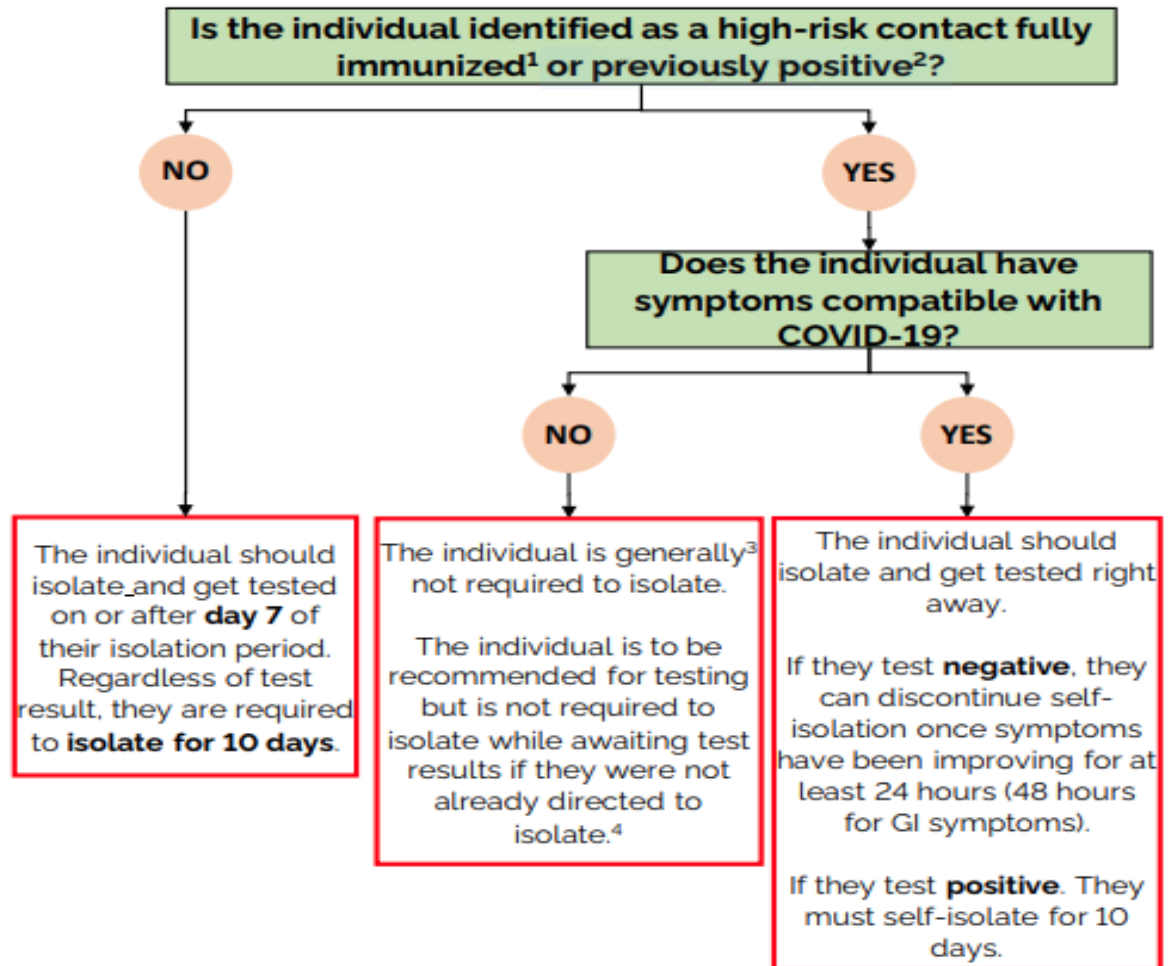
1. Consult with and follow directions from the local public health unit.
2. Notify all family, staff, and essential visitors of the facility's outbreak status (i.e., letters and signage, internet).
3. Enhanced cleaning and disinfecting procedures.
4. Enhanced screening procedures (i.e., more frequent monitoring of staff/children throughout the day).
5. Students and staff must continue frequent hand hygiene.
6. Review staff training on proper PPE use.

Declaring an Outbreak Over

In consultation with local health unit, the outbreak can be declared over if no new cases have occurred in 14 days from the last day of attendance of the most recent COVID-19 positive student or staff member.

Appendix A: Case and Contact Management in Schools for High-Risk Contact

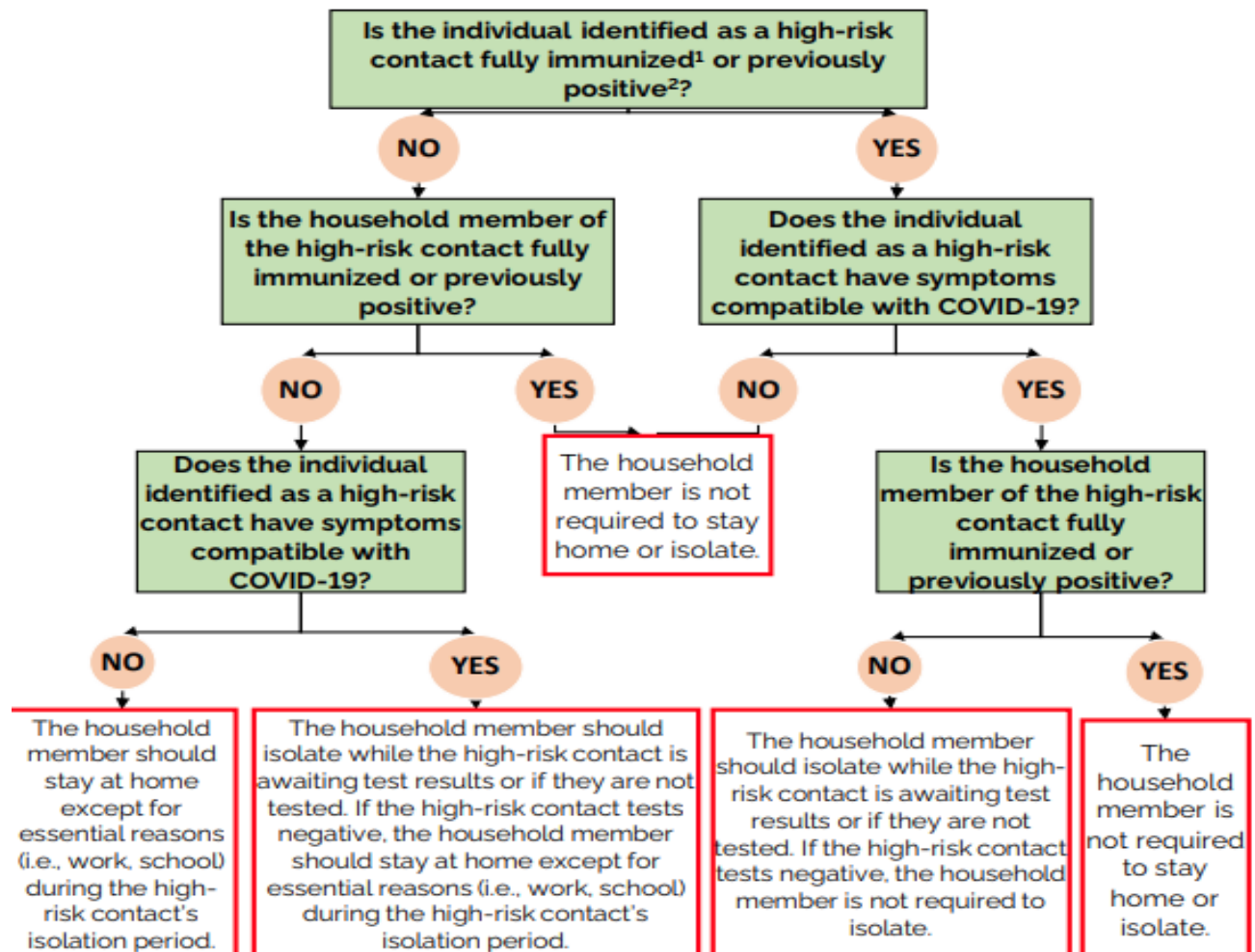
Adapted from Appendix 11 of [Management of Cases and Contacts of COVID-19 in Ontario](#)



¹ For the purposes of case/contact/outbreak management, an individual is defined as fully immunized ≥ 14 days after receiving their second dose of a two-dose COVID-19 vaccine series or their first dose of a one-dose COVID-19 vaccine series that is [listed for emergency use](#) by the World Health Organization or approved by Health Canada.

Appendix B: Case and Contact Management in Schools for Household Members of High-Risk Contacts

Adapted from Appendix 11 of [Management of Cases and Contacts of COVID-19 in Ontario](#)



Top 6 Tools for a COVID-Safe Return to School

From the North Bay Parry Sound District Health Unit

Here are the top resources we recommend for schools to support a safe and healthy 2021/2022 school year! Share these resources with staff, or include them in newsletters for parents/guardians as you see fit.



1. COVID-19 School & Child Care Screening

Bookmark this page for easy access to screen every morning:
<https://covid-19.ontario.ca/school-screening>



2. Health Unit Website

The Health Unit has a Schools webpage, which you can find at: www.myhealthunit.ca/schools. At the top of this page you can find links to our COVID-19 and Schools/Child Care and COVID-19 pages with information to support school staff and administration as well as parents/guardians. Bookmark these pages too!



3. School & Child Care Information Line

Our call centre has a dedicated School & Child Care Information line with Public Health Nurses available to answer questions from schools, families and students. You can reach them at **1.844.478.1400**.



4. Health Unit Healthy Schools Staff

Connect with your school's designated Community Health Promoter and Public Health Nurse. They are available to support your school with questions related to COVID-19, as well as programs and activities related to comprehensive school health!



5. COVID-19 Frequently Asked Questions (FAQ) for School Boards

Our school board FAQ is intended to supplement Ontario's COVID-19: Health, safety and operational guidance for schools (2021–2022). Here you can find common questions and answers to support a safe and healthy return to school.




6. Health Unit Social Media

Follow us on Facebook and Twitter (or Instagram and TikTok for youth) to get the latest updates about COVID-19 and other health topics.

 **Facebook** @NorthBayParrySoundDistrictHealthUnit

 **Twitter** @NBPSDHealthUnit

 **Instagram** @impact_hu (youth-focused account)

 **TikTok** @impact_hu (youth-focused account)



Resources

Management of Cases and Contacts of COVID-19 in Ontario August 11, 2021 (version 13.0)

https://www.health.gov.on.ca/en/pro/programs/publichealth/coronavirus/docs/contact_mngmt/management_cases_contacts.pdf

COVID-19 Guidance: School Case, Contact, and Outbreak Management

https://www.health.gov.on.ca/en/pro/programs/publichealth/coronavirus/docs/COVID-19_school_outbreak_guidance.pdf

Source COVID-19: Health, Safety and Operational Guidance for Schools (Aug 13, 2021)

<https://www.ontario.ca/document/covid-19-health-safety-and-operational-guidance-schools-2021-2022>

NBPS District Health Unit Guidance May 2021

[https://nearnorthschools.sharepoint.com/:b:/r/sites/COVID/Shared%20Documents/Reopening%20Plans%20and%20Docs/Reopening%20Plans%20and%20Docs%202021-2022/Health%20Unit/COVID-19%20School%20Board%20FAQ%20-%202021-05-18%20\(3\).pdf?csf=1&web=1&e=R84dGr](https://nearnorthschools.sharepoint.com/:b:/r/sites/COVID/Shared%20Documents/Reopening%20Plans%20and%20Docs/Reopening%20Plans%20and%20Docs%202021-2022/Health%20Unit/COVID-19%20School%20Board%20FAQ%20-%202021-05-18%20(3).pdf?csf=1&web=1&e=R84dGr)

COVID-19 Guidance: Elementary & Secondary Schools-Toronto Health unit Aug. 17, 2021

<https://www.toronto.ca/home/covid-19/covid-19-reopening-recovery-rebuild/covid-19-reopening-guidelines-for-businesses-organizations/covid-19-guidance-elementary-secondary-schools/>

How to use and wear PPE & Masks

STAFF-Refresher presentations from Public Health Ontario on Personal Protective Equipment:

Part 1: What is PPE?

[Recorded presentation](#)

[Downloadable presentation slides](#)

Part 2: How to use and wear PPE

[Recorded presentation](#)

[Downloadable presentation slides](#)

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

[Recorded presentation](#)

[Downloadable presentation slides](#)

Appropriate Use of N95 Mask (in Special Education Settings)

Putting on a N95 mask (1 min)

<https://youtu.be/9Wki4GGU62U>

Taking off a N95 mask (1 min)

<https://youtu.be/lqKCeyjig9o>

<https://www.publichealthontario.ca/en/diseases-and-conditions/infectious-diseases/respiratory-diseases/novel-coronavirus/ppe#>

Hand Hygiene and Respiratory Etiquette

Refresher presentations from Public Health Ontario on Hand Hygiene:

[Recorded presentation](#)

[Downloadable presentation slides](#)

Hand Washing and Hand Sanitizing Posters:

[Hand Washing](#)

[Hand sanitizer](#)

Refresher presentations from Public Health Ontario on Physical Distancing:

[Recorded presentation](#)

[Downloadable presentation slides](#)