



August 31, 2020

COVID-19 Response in K–12 Schools and Early Learning and Child Care Centres

Overriding Principles

- People who are sick must stay home from their early learning and child care centre¹ or school, even if mildly ill or if they think their sickness is unrelated to COVID-19.
- People who have any symptoms of COVID-19 must stay home, isolate, be excluded from work/school/child care, and call Health Links – Info Santé to seek medical advice and information about COVID-19 testing.
- Physical distancing, hand hygiene, respiratory etiquette, and regular cleaning—particularly of high-touch surfaces—continue to help prevent the spread of respiratory illnesses, including COVID-19.
- Isolating and getting tested as soon as symptoms appear, as well as tracing and isolating contacts in a timely manner, is important for limiting the spread of COVID-19 in the class/cohort, centre, school, and community.
- Public health officials will contact you if there is a confirmed case of COVID-19 linked to the school/child care centre if the person in question was present in the school/child care centre during their infectious period.
- Public health officials will make the decision about whether a child care centre, school, or area of a school needs to close for a period of time and will determine who is required to undertake self-isolation (quarantine).

Confirmed Case of COVID-19 in a School or Early Learning and Child Care (ELCC) Centre in a School

If there is a confirmed case of COVID-19 linked to a child care centre or school, the centre director and/or school administrator will be advised by the local public health authority if the case was present in the child care centre or school during the person in question's

¹ This fact sheet also applies to nursery schools and before and after school programs that are located within K–12 schools.

infectious period. Public health investigations of confirmed cases are initiated within 24 hours of notification of confirmatory laboratory results, seven days a week. If a case was present in a school setting during the period of infectivity, public health officials will inform the school. If there was no significant exposure in the school/centre, the school/centre will not be notified.

Child care centres and schools must coordinate with local public health officials to determine how to inform families and staff as appropriate. **Support will be provided to assist with communication to staff and the broader school/child care community. This includes key messages to share as well as a plan for how to determine impact on operations.**

Notification Process

When a case of COVID-19 is confirmed, public health officials will lead the response. Local public health authorities will identify the close contacts of a positive case and contact those individuals who may have been exposed. Public health officials may

- request records that identify cohorts/groups of staff, children/students, volunteers, and visitors in the school for a specified timeframe
- contact children, staff and families if they have been in close contact with a confirmed case, and confirm whether they need to self-isolate (quarantine) and self-monitor for symptoms, and when they can return to the centre or school
- recommend testing, following established guidelines, to staff, children, students, volunteers and visitors that may have been exposed to a positive case
- assess the need for the centre/school or part of the centre/school to be closed for a period of time

Local public health officials will interview the person who tested positive for COVID-19 and/or their family members to identify individuals who are close contacts of the case.

Public health officials will contact staff and families if they are identified as close contacts to the individual who tested positive.

Close contacts² will be notified that they need to self-isolate (quarantine) at home for 14 days after their last contact with the person who tested positive. Public health officials may recommend that close contacts be tested to identify additional positive cases. Close contacts who test negative will still need to complete the full original 14-day self-isolation (quarantine) period. The notice to staff and families must maintain confidentiality.

Letters/scripts (standard message) for centre directors/school administrators will be available to share with parents, staff, children and students when a case is suspected or confirmed in a school or child care centre. Provincial media bulletins will announce if there is an outbreak at a school/centre and will confirm that public health officials will provide instructions to those who have been in close contact with a confirmed case.

² A close contact is someone who has been within two metres of an infected person for a period greater than 15 minutes.

Public Health Response

The type of response in the school/child care centre will depend on a variety of factors:

- the extent of exposure and whether there is risk/evidence of centre or school transmission
- whether the individual had been at the centre or school during the infectious period (which includes two days before the onset of symptoms and, in most cases, until ten days after symptom onset)
- whether the individual was symptomatic

In general, progressive recommendations will be made based on the number of cases in the centre or school.

If one case is identified, or multiple cases within the same class/group or cohort:

- The classroom and/or cohort may be considered close contacts, and all individuals in the class/cohort are advised to self-isolate (quarantine) for 14 days from the last known contact with the case. For school-age students, the class or cohort would move to remote learning during this timeframe.
- Children attending infant/preschool programming at a child care centre would remain home for the duration of the self-isolation (quarantine).
- An exception would be with confirmation of physical distancing and ability to identify specific close contacts of the case. This may be possible for older students in school environments where a full two metres physical distancing is occurring. In this situation, only the close contacts would be advised to self-isolate (quarantine) for 14 days, and the rest of the class/cohort could continue to attend school.

If more than one class has cases, but there is no evidence of wider transmission:

- If the cases in more than one group, cohort of children, or classroom can be linked to each other (e.g., siblings, community contact), and there is no evidence of transmission within the school or child care centre, more than one class/cohort may be advised to self-isolate (quarantine) following the above guidance. Similarly, if other cases in the school or child care centre are linked to known cases outside the school and there is no evidence of transmission within the school building, more than one class/group or cohort may be advised to self-isolate (quarantine).
- If the cases cannot be linked to other exposures, and transmission within the school building is suspected, the school may be advised to switch to remote learning.
 - Students and staff in the affected centre or classrooms will be advised to self-isolate (quarantine). The remaining staff, students, and children will either be advised to self-isolate (quarantine) or self-monitor for symptoms, based on the assessment of risk of transmission.
 - If a child care centre shares common space with the school, public health officials may advise families with children attending infant/preschool programming to have the children remain home for the duration of the school building closure.

If more than two classes are identified within the school building and there is evidence of wider transmission:

- If the cases cannot be linked to other exposures, and centre or school transmission is suspected, the school may be advised to switch to remote learning.
- Students, children, and staff in the affected classrooms may be advised to self-isolate (quarantine). The remaining staff, children, and students will either be advised to self-isolate (quarantine) or self-monitor for symptoms, based on the assessment of risk of transmission.
- Children attending infant/preschool programming at a child care centre may be advised by public health officials to remain home for the duration of the quarantine.

If the person who is a confirmed case has worked in or attended the centre or school when they could have been infectious, the class/group or cohort, school, or designated area (if access was restricted) may be closed to allow time for contact tracing and to clean the school/centre following public health guidelines. This will be advised by public health officials.

Further Closure

Health authorities may require closure for longer periods of time. This may occur when there is identified high risk of community transmission or if there are a large number of cases within a school, resulting in a high proportion of children, students, and staff who could be considered close contacts and therefore need to self-isolate (quarantine). If no further cases occur after the case is detected in the 14-day period in students, children, and staff who remain attending school, all classes and child care programming might be able to resume. Public health officials will advise when it is safe to do so. If cases continue to occur, closures may be prolonged.

Schools and child care centres will need to work together to have plans in place for such eventualities and how intermittent remote learning will be conducted for school-age children.

Cleaning and Disinfecting

Schools and centres will close off areas used by the infected person, including school transportation vehicles, and not use these areas until after cleaning and disinfecting. Students, children and others who are not designated to conduct cleaning and disinfecting should not be in the classroom, room, school transportation vehicle, or other area while it is being cleaned/disinfected.

Response Scenarios for COVID-19

The below scenarios are examples of the response to illness or confirmed/probable cases of COVID-19 linked to a school.

Scenarios	Description	Response
<p>Scenario 1</p>	<p>A child, young person, or staff member is showing signs of illness (but is not known to have had contact with a confirmed/probable case)</p>	<ul style="list-style-type: none"> ■ They should remain at home and seek medical advice if they are showing flu-like/COVID-19-like symptoms and get tested for COVID-19 (if advised to do so). ■ The school/child care centre will be advised by health authorities if the person tests positive for COVID-19 and if they were in the school or child care centre during their infectious period. ■ If they begin to show signs of flu/COVID-19 when at a school or centre, isolate them away from others (preferably in a different room, but if not possible, they should be at least two meters/ six feet from others) until they can be safely taken home and they should seek medical advice through Health Links – Info Santé. ■ If they have had COVID-19 symptoms and tested negative for COVID-19, they can return to school/ child care 24 hours after symptoms resolve. If they do not get tested, they should isolate for 10 days from symptom onset, and may return if symptoms have resolved at that time. ■ A chronic and stable cough, sneeze, runny nose, or nasal congestion that is unchanged and clearly linked to a known medical condition such as asthma or allergies is not an absolute requirement for exclusion. As well, children who are crying can exhibit a runny nose. Changing or worsening of chronic symptoms requires isolation and contacting Health Links – Info Santé. Staff should exercise judgment related to symptoms but, when in doubt, err on the side of caution, exclude the child and advise the parent/ caregiver to contact Health Links – Info Santé or their health care provider. ■ If the person is seriously unwell follow your usual procedure and call 911 for an ambulance if needed.
<p>Scenario 2</p>	<p>When a child, young person, or staff member has had contact with someone who is a close contact of a confirmed/probable case</p>	<ul style="list-style-type: none"> ■ No action is required unless close contact(s) test(s) positive for COVID-19 (see scenario 3). ■ Only the close contact(s) will need to self-isolate (quarantine). They will be instructed to do so by public health officials. ■ The child, young person, or staff member does not need to self-isolate (quarantine), unless the person they are in close contact with subsequently tests positive for COVID-19.

Scenarios	Description	Response
Scenario 3	When a child, young person, or staff member has no symptoms , but has had close contact with a confirmed case (e.g., someone within their household)	<ul style="list-style-type: none"> ■ The parent/caregiver will be responsible for contacting the school/centre to advise of their child's absence (as per routine protocol) and minimum length of time of their absence. The child/young person/staff member and likely the family, if exposed, will self-isolate (quarantine). ■ Testing of the child/young person/staff member will occur if recommended by public health officials. ■ Notification of the school/child care community will not occur, unless the contact becomes a case and was at school during their infectious period.
Scenario 4	When a child, young person, or staff member has symptoms , and has had close contact with a confirmed case (e.g., within their household)	<ul style="list-style-type: none"> ■ Public health officials will notify the school principal only if the individual tests positive for COVID-19 and they were at the school or centre during their infectious period. ■ The child/young person or staff member will isolate and remain at home because they have symptoms and likely the family, if exposed, will self-isolate. ■ The child/young person or staff member will be tested if recommended by public health officials, a medical practitioner, or Health Links – Info Santé. ■ The contact (i.e. the child/young person or staff member with symptoms who has had close contact with a confirmed case) will be assessed to determine if they meet the criteria for a probable case. If considered a probable case, the below scenario 5 will be followed. Otherwise, public health officials may wait for the test results for the contact before taking further action. If the person has not been in a school/child care centre while they are considered to be infectious, there is very low risk and the school/centre will remain open (health authorities will make the decision about closure). ■ If the test is positive, undertake cleaning in the classroom/school/centre in line with guidance from health authorities. ■ Provide information and resources to the parent community and enable opportunities to ask questions.

Scenarios	Description	Response
Scenario 5	When a child, young person, or staff member tests positive and has been at a school or Early Learning and Child Care Centre within a school when considered to be infectious	<ul style="list-style-type: none"> ■ Close the classroom/school/centre if required to enable contact tracing, and cleaning and disinfection. ■ Public health officials will advise if the classroom may be required to self-isolate (quarantine) for a period of up to 14 days from the last contact. ■ The school/centre may be required to close for a period if there are large numbers of confirmed cases linked to the school/centre or very large numbers of close contacts in the school/centre. ■ Public health officials will notify the principal. ■ The child, young person, or staff member isolates for their period of infectivity as instructed by local public health. ■ Contact tracing will be completed by local public health and they will advise close contacts to go into self-isolation (quarantine). ■ Cleaning and disinfecting according to health specifications will be undertaken. ■ Assess whether other programs can continue to operate (e.g., before and after school care). ■ Provide information and resources to the parent community and enable opportunities to ask questions.
Scenario 6	When a case is suspected or confirmed in a boarding school	<ul style="list-style-type: none"> ■ Guidelines have been developed with public health officials: Guidelines for Boarding Schools (K-12) and University/College Residences in Manitoba. ■ Public health officials will provide further guidance.

Communication

Public health officials will notify schools and child care centres of cases if they were in the schools/centres during their infectious period and will provide guidance on recommendations to exclude and advise self-isolation (quarantine) for contacts, classrooms, cohorts, or potentially the entire school. Communications to the school and child care community should be done in coordination with public health officials.

A sample letter has been drafted by public health officials to facilitate communication.

Public notification will occur to advise of any cases who have been infectious in a school/centre, and will include measures advised by public health officials.

Contact Information

If the school administrator becomes aware of a confirmed case associated with the school or a child care centre within a school, they should contact their local public health unit for information and support.

- Public Health Contact information (www.gov.mb.ca/covid19/contact.html)

There is information about self-screening (<https://sharedhealthmb.ca/covid19/screening-tool/>) and other public health resources (<https://manitoba.ca/covid19/updates/resources.html>) on the Shared Health Manitoba website and the Province of Manitoba's website.

A reminder that Health Links – Info Santé continues to be available to support anyone who might be experiencing symptoms or who has been asked to self-isolate (quarantine). Call toll-free at 1-888-315-9257.