

# Protecting Manitobans

## GUIDANCE ON SUPPORTING STUDENTS WHO REQUIRE INTERVENTIONS OR SUPPORTS THAT MUST BE DELIVERED IN CLOSE PHYSICAL PROXIMITY



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### Acknowledgement

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### Purpose

This document was prepared to assist school divisions and funded independent schools in keeping students and staff safe in situations where students require interventions or supports that cannot be provided from a distance of two metres.

### Assumptions

All facilities providing schooling or school-related activities must continue to follow applicable health and safety legislation to ensure the safety, health, and well-being of students and staff.

Although public health measures can significantly reduce the risk of COVID-19 entering and being transmitted in child care and school settings, the risk is never zero. While it is expected that COVID-19 infections will continue to occur in the community as well as in schools, COVID-19 cases and severe illness have declined significantly due to most people 12 years and older being vaccinated for COVID-19. When most people 12 years and older are immunized, particularly parents and caregivers of school-aged children, exposures in schools are less likely to lead to further transmission. As a result, schools will be able to return to close to normal activities in September, with some health and safety measures still in place.

Schools and school divisions are following the most recent public health guidelines, which can be found at [www.edu.gov.mb.ca/k12/covid/index.html](http://www.edu.gov.mb.ca/k12/covid/index.html).

Before implementation, it is recommended that this content be reviewed by the Workplace Safety and Health Committee of the school division or school.

## Special Considerations

When working with students who need extra supports, additional considerations are beneficial to both students and staff members.

- In order to avoid stigma or unintended consequences, it is important that routine practices are followed universally.
- Consider how the environment can be engineered to support students who have difficulty following recommended protocols (e.g., students who are impulsive, students who are working to improve self-management, students for whom self-management is not yet possible).
  - Suggestions: Use tape on the floor, hoops, mats, or other items that can mark off personal space; organize activities with a visual cue about how many students should be in that area (e.g., two chairs next to an activity).
- Review student-specific plans to determine whether interventions that require close physical proximity for longer periods of time are necessary (e.g., physically directing a student or providing direct medical care).
- Student-specific plans may be required to address particular situations (e.g., students with 'tics' such as touching their face; students with mental health needs and who are upset or do not understand the need to physically distance; students who communicate in ASL and who may need to touch their face to express themselves).
- School clinicians will review additional protocols identified by their regulatory body.
- Consider changes in the school environment or remote learning needs when reviewing and updating student-specific plans (SSPs).
- Consider congregated classrooms as a temporary COVID-19 response measure for students with special learning needs in order to offer regular, everyday timetabling.
- Consider additional planning for students with special learning needs, including those living with complex medical needs, to support a smoother transition to school.
- Remote learning will be in place for students who are medically advised not to return to in-class learning due to COVID-related risk factors. These situations should be rare and limited to children with compromised immune systems or other medical conditions that increase their risk.
- Consider alternate attendance options for students, depending on their needs.

## Following Routine Practices

A layered approach including multiple routine practices will reduce the spread of COVID-19. Routine practices consist of many public health measures, such as the following:

- Get vaccinated against COVID-19.
- Stay home when sick.
- Screen for symptoms.
- Encourage physical distancing to the greatest extent possible.
- Limit exposure to others by using cohorts in Kindergarten to Grade 6.
- Increase ventilation when possible.
- Follow public health guidance on mask use.
- Focus on high-touch surfaces and common areas when cleaning and disinfecting but frequency can return to normal. Washrooms require more intensive cleaning.
- Avoid touching your eyes, nose, and mouth with unclean hands.
- Ensure students and staff obey the following hand hygiene guidelines. At the following times, engage in frequent hand hygiene with soap and water for at least 15 to 20 seconds, or use alcohol-based sanitizer:
  - at the start of the day and before going home
  - before and after completing any support/procedure that does not allow physical distancing (both students and staff)
  - before and after putting on and removing personal protective equipment (PPE) such as gloves, masks, and eye shields, as outlined later in this document
  - after going to the washroom, wiping nose or handling dirty tissues, coughing, sneezing, or blowing nose
  - after getting hands dirty or if they have become contaminated
  - after completing cleaning tasks (staff)
  - before and after food preparation or contact with food
  - before and after snacks or meals

**Note:** The hand hygiene procedure takes longer than 15 to 20 seconds, as you need to turn the water on, get your hands wet, perform the lathering and mechanical actions, and then rinse them off and dry. The time spent just lathering and performing the mechanical actions is what requires 15 to 20 seconds.

## Provide Accessible Information and Direct Instruction

- Encourage hand hygiene and make alcohol-based hand sanitizer available at all building access points.
- Post signs in common areas, such as entrances, classrooms, restrooms, life skills area, physiotherapy area, and vocational area.
- Provide clear, direct instructions about how to perform hand hygiene and cough etiquette.
  - Use plain language, as spoken in the community.
  - Keep messages short, explaining simple steps they can take.
  - Use large fonts and graphics.
  - Make sure instructions are accessible (e.g., Braille, pictorial).
  - Use social stories.

Review the posters and videos that have been created by the Manitoba government to define/explain hand hygiene, and mask use, which can be found at [www.edu.gov.mb.ca/k12/covid/index.html](http://www.edu.gov.mb.ca/k12/covid/index.html).

## Non-medical Masks

Masks are required for all students, staff, and visitors.

Manitoba Education will continue to work with public health officials to monitor the situation and adjust direction accordingly.

## Considerations Regarding Staff Assignments

It is important to identify which staff members can safely work with students who are considered low, medium, or high risk, based on the staff members' individual circumstances. Staff would then be assigned accordingly and/or necessary accommodations would need to be put into place.

Vulnerable populations (both students and staff) are those who are at increased risk for severe outcomes due to COVID-19 or are at increased risk of exposure to COVID-19.

- This may include anyone who has
  - difficulty reading, speaking, understanding, or communicating
  - difficulty doing preventive activities like frequent hand washing and covering coughs and sneezes
  - ongoing specialized medical care or who requires specific medical supplies
  - ongoing supervision needs or support for maintaining independence

- difficulty accessing medical care or health advice
- difficulty accessing transportation
- economic barriers
- unstable employment or inflexible working conditions
- social or geographic isolation, like in remote and isolated communities
- insecure, inadequate, or non-existent housing conditions

## Students Who Require Supports that Must Be Delivered in Close Physical Proximity

Students may require specific interventions or supports that must be delivered in close physical proximity. Examples of these interventions or supports include

- catheterization
- gastrostomy and ostomy feeding/care
- blood-glucose monitoring
- pre-set oxygen
- suctioning
- diapering
- assistance in using the washroom
- assistance with feeding
- assistance with mobility
- assistance with communication device or other teaching tools
- administration of emergency medication by school staff (e.g., epinephrine auto-injector or “epi-pen”, asthma medication, rescue medication for seizures)

## Level of Risk

Precautions related to these types of supports will vary, depending on the level of risk. Ongoing reassessment of a student’s level of risk must occur by the school team.

### Low Risk

- A student is considered **low risk** if they
  - have screened negative for symptoms
  - can communicate sufficiently to follow basic directions

- are able to perform preventative activities like frequent hand hygiene and cough etiquette and, when required, wear a non-medical mask
- are generally cooperative during all types of procedures

When the risk is low, following **routine practices** and **providing accessible information and direct instruction** are considered sufficient. See the information outlined previously in this document.

- Non-medical mask is required unless a medical mask is indicated as per routine practices.
- Disposable gloves need only be worn to perform close personal care that results in potential for contact with bodily fluids. Perform hand hygiene before AND after removing gloves.
- If there is concern that there is increased risk of transmission of COVID-19 among low-risk students (e.g., a cohort identified with two or more cases), use personal protective equipment (PPE) required for a medium level of risk (even if public health officials have not determined any transmission within the cohort).

## Medium Risk

A student is considered **medium risk** if they

- screened negative for symptoms
- have difficulty communicating sufficiently to follow basic directions
- have difficulty performing preventative activities like frequent hand hygiene and cough etiquette or, when required, are unable to wear a non-medical mask
- are generally cooperative during all types of procedures
- demonstrate symptoms such as runny nose, coughing, sneezing, gagging, and drooling, but do so normally

Medium-risk situations call for **routine practices** (as outlined previously in this document) **to be followed at all times. Providing accessible information and direct instruction** is also useful. In addition, the following precautions are recommended:

- Disposable gloves need only be worn to perform close personal care that results in potential for contact with bodily fluids. Perform hand hygiene before AND after removing gloves.
  - For disposal protocols, please see *Manitoba School Boards Association School Re-Entry Protocols: A Reference Guide for Schools* at [www.mbschoolboards.ca/documents/services/School%20Re-entry%20Protocols.pdf](http://www.mbschoolboards.ca/documents/services/School%20Re-entry%20Protocols.pdf).
- Procedural/surgical masks must be worn by staff members if they assess they are likely to have splash or splatter exposure to saliva or other bodily fluids.
  - Medical masks are worn to protect the individual who is wearing the mask from others who may be infected; therefore, they must meet specific standards.

- Find product specifications for disposable surgical masks at <https://buyandsell.gc.ca/specifications-for-COVID-19-products#200>.
- See *Guidance on the Removal, Storage and Extended Wear of Medical Face Masks* at <https://sharedhealthmb.ca/files/extended-use-of-face-masks.pdf>.
- For disposal protocols, please see *Manitoba School Boards Association School Re-Entry Protocols: A Reference Guide for Schools* at [www.mbschoolboards.ca/documents/services/School%20Re-entry%20Protocols.pdf](http://www.mbschoolboards.ca/documents/services/School%20Re-entry%20Protocols.pdf).
- All efforts should be made to preserve the supply of medical masks for those who most need them.
- Eye protection (e.g. face shields) are worn by staff members if they assess they are likely to have splash or splatter exposure to saliva or other bodily fluids.
  - Find product specifications for face shields and goggles at [https://buyandsell.gc.ca/sites/buyandsell.gc.ca/files/specifications\\_for\\_eye\\_protection\\_2020\\_04\\_10\\_0.pdf](https://buyandsell.gc.ca/sites/buyandsell.gc.ca/files/specifications_for_eye_protection_2020_04_10_0.pdf).
  - Retain eye protection for full shift.
  - When eye shields are removed, clean, disinfect, and store them as per protocol.
  - See *Guidance on Disinfecting Re-usable Eye Protection* at <https://sharedhealthmb.ca/files/standard-operating-procedure-disinfecting-eye.pdf>.
  - For disposal protocols, please see *Manitoba School Boards Association School Re-Entry Protocols: A Reference Guide for Schools* at [www.mbschoolboards.ca/documents/services/School%20Re-entry%20Protocols.pdf](http://www.mbschoolboards.ca/documents/services/School%20Re-entry%20Protocols.pdf).
- Utilize the following teaching experiences that help students learn about hand hygiene and not touching their eyes, nose, and mouth with unclean hands.
  - Break down into smaller steps to increase understanding.
  - Use timers to help ensure adequate time. See how many 15 to 20 second songs students can identify. Be creative. Engage the students in coming up with games and other ways to encourage everyone to wash their hands for 15 to 20 seconds. Older students may watch videos of procedures or science experiments to learn techniques.
  - Note: The hand hygiene procedure takes longer than 15 to 20 seconds, as you need to turn the water on, get your hands wet, perform the lathering and mechanical actions, and then rinse them off and dry. The time spent just lathering and performing the mechanical actions is what requires 15 to 20 seconds.

## High Risk

- A student is considered **high risk** if they
  - screened negative for symptoms
  - have difficulty communicating sufficiently to follow basic directions

- have difficulty performing preventative activities like frequent hand hygiene and cough etiquette or, when required, or are unable to wear a non-medical mask
- are uncooperative during most/all types of procedures
- have vulnerabilities that include **expected** behaviours that increase the chance of spreading infection (e.g., spitting, biting)

High-risk situations call for **routine practices**, as outlined previously in this document, **to be followed at all times. Providing accessible information and direct instruction** is also useful. In addition, the following precautions are recommended:

- Disposable gloves need only be worn to perform close personal care that results in potential for contact with bodily fluids. Perform hand hygiene before AND after removing gloves.
  - For disposal protocols, please see *Manitoba School Boards Association School Re-Entry Protocols: A Reference Guide for Schools* at [www.mbschoolboards.ca/documents/services/School%20Re-entry%20Protocols.pdf](http://www.mbschoolboards.ca/documents/services/School%20Re-entry%20Protocols.pdf).
- Procedural/surgical masks are worn by staff members if they assess they are likely to have splash or splatter exposure to saliva or other bodily fluids.
  - Procedural/surgical masks are worn to protect the individual who is wearing the mask from others who may be infected; therefore, they must meet specific standards.
  - Find product specifications for disposable surgical masks at <https://buyandsell.gc.ca/specifications-for-COVID-19-products#200>.
  - See *Guidance on the Removal, Storage and Extended Wear of Medical Face Masks* at <https://sharedhealthmb.ca/files/extended-use-of-face-masks.pdf>.
  - For disposal protocols, please see *Manitoba School Boards Association School Re-Entry Protocols: A Reference Guide for Schools* at [www.mbschoolboards.ca/documents/services/School%20Re-entry%20Protocols.pdf](http://www.mbschoolboards.ca/documents/services/School%20Re-entry%20Protocols.pdf).
  - All efforts should be made to preserve the supply of medical masks for those who most need them.
- Eye protection (e.g. face shields) are worn by staff members if they assess they are likely to have splash or splatter exposure to saliva or other bodily fluids.
  - Find product specifications for face shields and goggles at [https://buyandsell.gc.ca/sites/buyandsell.gc.ca/files/specifications\\_for\\_eye\\_protection\\_2020\\_04\\_10\\_0.pdf](https://buyandsell.gc.ca/sites/buyandsell.gc.ca/files/specifications_for_eye_protection_2020_04_10_0.pdf).
  - Retain eye protection for full shift.
  - When eye shields are removed, clean, disinfect, and store them as per protocol.
  - See *Guidance on Disinfecting Re-usable Eye Protection* at <https://sharedhealthmb.ca/files/standard-operating-procedure-disinfecting-eye.pdf>.

- For disposal protocols, please see *Manitoba School Boards Association School Re-Entry Protocols: A Reference Guide for Schools* at [www.mbschoolboards.ca/documents/services/School%20Re-entry%20Protocols.pdf](http://www.mbschoolboards.ca/documents/services/School%20Re-entry%20Protocols.pdf).

## Additional Notes

- See the following Shared Health Manitoba guidelines for putting on and removing PPE:  
<https://sharedhealthmb.ca/files/covid-19-donning-ppe-poster.pdf> (English)  
<https://sharedhealthmb.ca/files/covid-19-donning-ppe-poster-fr.pdf> (French)  
<https://sharedhealthmb.ca/files/covid-19-doffing-ppe-poster.pdf> (English)  
<https://sharedhealthmb.ca/files/covid-19-doffing-ppe-poster-fr.pdf> (French)
- Please see the *Manitoba School Boards Association School Re-Entry Protocols: A Reference Guide for Schools* for information about cleaning, sanitizing, laundry, and safe disposal protocols.  
[www.mbschoolboards.ca/documents/services/School%20Re-entry%20Protocols.pdf](http://www.mbschoolboards.ca/documents/services/School%20Re-entry%20Protocols.pdf)
- Information will be updated as Manitoba Health and Seniors Care's guidance to Manitobans evolves.