Autism Support & Family Advocacy Network

Working to-gather for a better future

Special Committee on Covid-19 Response,
Leinster House,
Dublin 2

24th June 2020

Submission on the Plan for Resumption of Special Education Provision

For the Attention of the Clerk to the Committee Ted McEnery

Dear Sir,

Please find attached Autism Support & Family Advocacy Network submission on the plans for the resumption of special education provision and the need to minimise the risk for children and staff of contracting covid-19 infection

We appreciate this opportunity to make this submission to the Committee. This submission is made on behalf of children and young adults on the autism spectrum who have been impacted greatly by this pandemic. Because they either do not or cannot advocate for themselves it is our organisations remit to be their voice.

The real extent of the impact of pandemic on children and adults with disabilities is really unknown. Its highly likely to be even more significant for the autistic population and their families. This is mainly due to their unique difficulties in managing unexpected change, uncertainty, their high risk of vulnerability, their need for autism informed education, health and employment provision. As we emerge from this Pandemic the challenge is a unique one, we now have an unique opportunity to transform the system into a system that works in a more egalitarian way for everyone..

We have outlined in our submission a detailed approach on what needs to be done.

Yours Truly

Geraldine Graydon

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Autism Support & Family Advocacy Network

Working to-gather for a better future

ASFAN was founded in 2017 and became a Company Limited by Guarantee on the 30th of April 2019.   ASFAN's aim is to create a society where everyone with lived experience of Autism are accepted and valued for their contribution in advocating and support individuals on the autism spectrum.   We do this by enabling autistic people and their families to actively participate, contribute and engage with policymakers, educators, healthcare professional's other disability groups.

ASFAN's work is underpinned by the social model of disability, community development methodologies and a commitment to social inclusion, equality and participation.

Building a competent community & voluntary sector that is autism literate is key to the successful inclusion of autistic people and their families. ASFAN provides a wide range of supports, information, advocacy, advice and guidance to individuals, their families, community & voluntary sector. ASFAN also engages in front line service delivery to people on the Autism Spectrum and families through a number of information, educational, mentoring and training social programs. Advocacy and Education is the core business of ASFAN.

We aim to do this as follows:

♦ Assist the individual and their families to explore their options, so they can make informed decisions through providing advice, information, advocacy and support.

♦ Support the person and their family during important school/transition meetings by acting as advocates or facilitators to help them express their views and make informed decisions

♦ Provide Autism Awareness training through workshops and information sessions for parents, schools, colleges, employers and policymakers

♦ Design and deliver tailored autism informed and autism friendly courses, training and workshops for individuals, families, educators, healthcare professionals and frontline staff.

♦ Liaise with statutory authorities on behalf of the individual and their family through service resolution facilitation

♦ Assist the individual and/or their families when applying for benefits, grants etc.,

♦ Liaise and network with local support groups.

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Working to-gather for a better future

Asfan aims to develop a brokerage service the will provide ongoing advice and information on all aspects of applying and managing direct funding/Individual Budgets – this includes assisting with the recruitment of mentor/personal assistance or support worker, managing the paperwork, assisting the development and management all aspects of an individual budget. Carrying out Garda Clearance and any other compliance in relation to employment and advocacy.

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Overview

According to Autism Spectrum Research News (June 2020), no matter who you are or where you live, routines are an important part of life.   The pain of change is real, and in many ways autistic adults have felt this pain more intensely than their neurotypical peers.   But change can also bring growth.   One autistic child is learning to cook; an autistic teenager is penning poetry again; and another boy is just starting to express his emotions on a digital platform his teachers created in early March.   Many autistic people, who typically cling to routine, are – like everyone else – learning to live with uncertainly and to let the future flap in the wind.

However, for other autistics under lockdown has meant that they cannot go for a walk in their favourite place, their sleeping patterns are have become erratic and they are experiencing more meltdowns.   When schools closed parents worried that the loss of contact with their child's peers would mean a huge step back for them.   Yet instead, many became involved with their friends through a digital platform created by their teachers, and other autistic children began expressing their emotions.   While other autistic children were hoping things would return to normal and they could be let out of their house again to go to their favourite pizza or burger place.   The major concern for parents was if their autistic child or adult got the virus as there was no special hospital admission protocol for autistic children or adults.

One autistic father with a daughter on the spectrum found it fascinating in how all the social rules were rewritten suddenly.   He witnessed neurotypical people struggling to adapt, yet he found it quite easy, he had long been adapting to rules that did not make much sense to him, but the new ones had a reason behind them, so it was easier for him to understand why they existed.   A lot of his co-workers were missing the chitchat and the small social interactions at the office while he did miss it as well, he did get use to the new normal quite easily, mainly because he did not need the interaction as much as neurotypical people do.

Autistic people have a strong sense of right and wrong, and this has caused some conflict with friends, relatives and strangers who have not taken social distancing seriously.   Many autistic people have been unable to function and are endlessly tired as many of their routines have been destroyed or disrupted.   For example, an autistic's student who had a great teacher, good friends in his class says Coronavirus has ruined a great year for him, for others their nights are tough, as their brains are not challenged during the day anymore.   One parent reported that her son was clanging around his room keeping everyone awake and is going into her room.   It has been incredibly challenging trying to teach nonverbal autistic students over Zoom, it also has been quite eye-opening for parents, seeing how much work still needs to be done toward their children's everyday functioning.

According to Vanessa Branchi, (June 2020) For some people on the spectrum, life in lockdown aggravated anxiety and other autism traits. Women and children on the spectrum and those living in group homes were particularly hard hit by the pandemic, although the experiences of autistic people have been almost as varied as the condition itself.   For the first time ever, neurotypicals are experiencing the overwhelming fear of uncertainty that autistic people experience every day.   For example, the unanswered questions, not knowing who to believe, going outside now requires a checklist, a plan of action, a script and a ritual, something autistics have done since they were old enough to walk.

A lot of coronavirus support, information and advice are online, however, for many autistic people who where cocooning, self-isolating or restricted by lockdown measurers digital sources were often not available or not autism informed or friendly.   Some weeks into the pandemic a leaflet was delivered to every household but it was in all Irish, many autistic do not have Irish as their first

language, visuals and social stories that were produced about Covid 19 were not suitable for adults and not autism proofed.

The crisis has exposed and amplified the structural inequalities that for years have excluded, discriminated against, and marginalised autistic individuals and their families.   Despite the government's statements to protect and support disabled people the reality is that before and during the pandemic they have been treated less fairly and discriminated against across all areas of their lives. The crisis has increased the pre-existing inequalities, over the last decade, autistic people and their families have experienced high levels of structural and historical exclusion and discrimination coupled with rising poverty and inequality as a result of austerity, welfare reforms and cuts to public services. This has reinforced the view that people with disabilities are viewed by society as second-class citizens, a burden on the state and expendable. Lessons must be learned from this pandemic as we emerge from Lockdown, we must uphold and protect the rights of all people with disabilities and ensure that the discrimination and marginalisation they experience in their daily lives is ended.

It is vital now that the whole Autistic Community is involved in developing and planning policies that affect their lives at local and national level. The time has come for some fresh thinking, why should autistic people and their families transition back to what they had, that which made them vulnerable - vulnerable to being poor, to being insecure that which provided inappropriate education, health, housing and employment provision.

Introduction to one approach to reopening schools for year 2020/21

In planning for the reopening of schools in September, it will be critical to balance the risk of direct infection with the transmission of COVID-19 in children with the impact of school closures on their physical and mental health.

The Government should provide guidance which has been obtained from the National Covid Pandemic Committee by late July to confirm the type of delivery appropriate for the beginning of the school year.   School Boards of Managements should be asked to prepare a plan for their school for the upcoming school year by August 10th.

Relationships between the schools the HSE and the Dept of Education will be crucial to navigate the complex and evolving COVID19 environment, planning and reopening schools, and addressing other child health issues that emerge.

School Attendance

The return to school in September of 2020-21 should be voluntary and based on parent choice.   For parents who choose not to send their child back to school, school boards should be prepared to offer remote education.   This requirement should be in place for as long as public health circumstances require delivery of this type of education provision.

In the light of continuing uncertainty about health risks, school boards should be asked to prepare for:

- Normal school day routine with enhanced health protocols
- Modified school day routine based on smaller class sizes, cohorting and alternative day or week attendance.
- At-home learning with ongoing enhanced remote delivery.

The Department of Education should be in close communication with school boards through out the July and August to provide further guidance based on the latest National Covid 19 Pandemic in late July/early August to prepare for the school reopening.

School Boards of Managements need to be flexible in their thinking and adapt one or more of these forms of delivery depending on the public health circumstances. Boards should be encouraged to assign students, teachers and special needs assistance to class groupings as they would in a conventional school year, so that class groupings can be maintained despite the form of delivery that is in place at any one time.

For Example:

"Distancing" refers to the advice that individuals should avoid close person contact and maintain 2 meters of separation for any prolonged encounters.

"Cohorting" refers to minimizing the number of students and teachers any individual comes in contact with and to maintaining consistency those contacts as much as possible.

Together, these approaches could assist school boards of management to adapted delivery of a model that

- Maintain a limit of 15 students in a typical classroom at one time

Adapt timetabling that would allow, to the greatest extent practical, for students to remain in contact with only their classmates and a single teacher for as much of the school day as possible.

This approach has several implications:

- Maintaining a limit of 15 or fewer students in a classroom will require alternative day or week delivery to a segment of the class at one time.
- Students not in class for a day or days would need to be assigned curriculum linked work; where possible, students not in class could participate in synchronous learning with their classmates for a period of the school day.
- Teacher would need to prepare lesson plans that could be delivered through alternate day or week timetables, where part of a student's timetable would be in school learning and part would be remote learning
- Boards would need to consider providing students with a high level of special educational needs, for whom remote learning may be challenging, the option of attending school every day.
- Boards of Management would need to consider providing students with a high level of special educational need, for whom remote learning may be challenging, the option of attending school every day.
- A range of timetabling models could be developed to support local circumstances.
- Students and teachers would remain in their classroom and move as cohort to entrances, exits, or other spaces within the school.
- Teachers should be encouraged to establish virtual staff rooms and congregate before arriving in or returning to their classrooms.
- Where a large class size would not permit alternate day delivery even with cohorts of 15 boards could form additional classes led by specialist or untimetabled teachers

At the secondary school level addition adaptations may be required to minimise the circulation of students and mixing of students outside of a class cohort.

It could be anticipated that schools and boards will identify a range of timetabling and delivery approaches that reflect the goals of distancing and cohering and will be willing to review and discuss all.

Special Education Classes

Where schools have smaller classes, such as classrooms for special education needs, boards could offer regular, everyday timetabling. Where these classes involve close physical contact between teacher, special needs assistance and student – Health and Safety protocol for appropriate use of PPE should be adhered to.

Adaptations for the school Environment

Other preparations that boards and schools would be asked to undertake include:

- Develop procedures that support general physical distancing, such as spreading students into different areas; using visual cues such as tapes on the floor, corridors, bathrooms, and other areas: scheduling recess in small groups and holding physical education or other classes outdoors.
- Limit parents and visitors inside the school.
- Consider using signage/marking to direct students through the steps for entry and exit of the school building
- Minimise the number of personal belongings (e.g. backpack, clothing, sunscreen, etc.,) and, if brought, asking that belongings be labelled and kept in the child's designated area.
- Develop guidance for lunches and lunchroom or cafeteria area, as well as other shared areas of schools, such as libraries and gyms.

Home Learning with remote delivery

Should the school closure be extended, or should some parents choose not to send their child back to Dept of Education and the School Board of Management should be prepared to offer remote education.   Remote education should be delivered online to the greatest extent possible, including the establishment of minimum expectations for students to have direct online with their teacher on a regular basis.   Online or video conferencing can be used as part of whole class instruction, in smaller groups of students and/or in a one-on-one context.

The Dept of Education should continue to extend arrangements that provide devices and internet connectivity to students who would otherwise not be able to access remote learning and ensure platforms are accessible for persons with special educational needs.

The primary focus of instruction through remote learning should be on the achievement of overall expectations across all subjects and grades. Students participating in remote learning could be timetabled and provided with a schedule classes that are teacher-facilitated and supported all areas of curriculum, as they normally would in school instruction.

Lessons and assigned work, should cover overall curriculum expectations across subjects and grades. Where possible assessment, evaluation and reporting activities would procced as usual, with a focus on the achievement of overall expectations and the primary purpose of assessment and evaluation being to improve student learning. Where assessment approaches have relied on exams, culminating activities, such as performance tasks, demonstrations, projects, and essays can be used instead to determine students' grades or marks.

Academics

The 2020/21 school year will look and feel different in many ways therefore, the Dept of Education needs to commit to doing every possible thing it can to support student' learning growth and development.   For example, the areas that will need special attention are as follows, Curriculum and Assessment Adaptations, Support for students with Special Educational Needs, Celebrations, Sports, Extracurricular activities and what students have learned from their experience during the school closure period and to ensure students are well supported for their ongoing learning by:

- Providing resources for educators on how to support student well-being
- Providing content review for students integrated throughout the school year at key instructional times to ensure students have fundamental building blocks before each new unit.

Some students such at those with special learning needs, may require additional time and supports to close the gaps in their learning.   The Dept of Education and School Boards of Management could consider planning for early transition visits for students with special education needs and mental health needs to help re-familiarise them with the school environment and establish routines.

The primary purpose of instruction should be on achievement of overall expectations across all subjects and grades.   Curriculum delivery may depend on the adapted school environment model that is implemented in each school.   Aligned with adaptations made to the school environment, proposed approaches to adapting curriculum deliver could include for example:

In Primary

- One teacher staying with a group of children all day, teaching all areas of the curriculum
- Remote curriculum delivery while students are at home
- Scheduling one period per day where a teacher links a class in school to classmates at home via video conferencing
- Rotary and specialist teachers joining classrooms via remote or smartboard devices.

In Secondary

- Shortened periods of in-person instruction in the morning with blended online and independent learning in the afternoons
- A block schedule, with one course taught in a 6-7-week block in-person and one full-term online course
- Cohorted 2nd year and 5th year compulsory subjects in person with elective subjects and 3rd year and 6th year subjects taught online.

To the greatest extent possible, assessment, evaluation and reporting activities proceed as usual, with a focus on the achievement of overall expectations and the primary purpose of assessment and evaluation being to improve student learning.

Student Reports, including progress reports should be provided for all students, including those who may plan to only participate in remote learning.

While assessment approaches have relied on exams, culminating activities, such as performance tasks, demonstrations, projects, and essays can be used instead to determine students' grades or marks.

Supporting Students with Special Needs

Recognition is required of the unique challenges experienced by students with special educational needs during this time, and that additional supports will be required to help these students learn and thrive as schools reopen.   Guidance to support students with special education needs should include:

- Considering changes in the school environment and/or remote learning needs when needs when developing or renewing and updating Individual Education Plans (IEPs)
- Considering additional planning and transition time for students with special educational needs to support a smoother transition to school
- Safely supporting the return of medically fragile students by consulting with their medical team and the health authorities on options for personal protective equipment (PPE), staff training and potential continued remote learning where return is not possible
- Accommodating the needs of students who require significant personal support, including considering options for personal protective equipment for both staff and student.
- Providing guidance relating to assistive technology
- Considering alternative attendance options for students depending on their needs
- Working with partners to develop protocols for access of non-school based healthcare professionals and supporting remote delivery of these services where in school delivery is not possible.

Online capacity and technology readiness

To meet the needs of students during this time the Irish Education System needs to be prepared to fluidly transition between online and in-person modes of learning.   The Dept of Education and School Boards of Management will need to give careful consideration to students who are not able to attend school in person based on a variety of reasons such as parent choice or health considerations.

To increase the Dept of Education preparedness for remote learning the Dept should consider:

- Extending arrangements that provide devices and internet connectivity to students who would otherwise not be able to access remote learning
- Ensuring platforms are accessible for person with disabilities
- Provide training for all educators to ensure their familiarity and fluency with the technology and Dept policies on appropriate use, including issues related to cyber security and privacy
- Ensuring teachers in primary and secondary schools are prepared with subject/course specific content, lessons, activities, and assignments should there be a need to transition at any time from in-person instruction to remote learning.
- Ensuring that teachers and other educators are prepared to offer online learning opportunities to students as a consistent and regular part of their remote learning plan.

The Dept of Education should also recognise that students living in areas with low internet connectivity may continue to experience challenges in accessing online learning and extend the availability of devices and connectivity throughout the country.

 Identify options for students and staff where internet availability is limited and develop guidance on remote learning for students with special educational needs.

Heath and Safety

Physical health – To support the reopening of schools in September, schools will need to implement protocols to provide for the health and safety of students, staff, and families. Guidance will need to be provided based on the advice of the National Covid 19 Pandemic Committee and the Dept of Education

To maximise safety, schools should use a "layered" approach with multiple measures to reduce the risk of Covid 19 spread, including decreasing the number of interactions with others and increasing the safety of interactions. Layering of multiple mitigation measures strengthens the risk mitigation potential overall.

Protocols should consider measures related to:

- Modifying behaviours that reduce the spread, including hand hygiene and respiratory etiquette, as well as use of personal protective equipment (PPE) were recommended
- Maintaining healthy environments, including environmental cleaning, cohorting and physical distancing.
- Maintaining healthy operations, including mitigating risks for students at higher risk of infection, protecting staff and at-risk persons or families, screening, and management of individuals with suspected Covid 19 cases and outbreaks.
- Collaboration with child and adolescence mental health services (CAMHS) and the National Educational Psychological Services (NEPS) to support stronger connections and make the best use of mental health and educational psychological resources and supports across an integrated system of care.

Prior to schools opening CAMHS and NEPS will need to provide school boards with a professional learning framework and toolkit to support the mental and psychological well-being of all students that can be tailored at school level for different audiences. The Professional learning should have a strong focus on building students' social-emotional learning skills so that they can build resilience, manage their stress, and build positive relationships

The Cleaning of Schools

Addition cleaning protocols will need to be implemented. These could include:

- Cleaning and disinfecting frequently touched surfaces and shared resources such as doorknobs, water fountain knobs, light switches, toile and tap handles, electronic devices, students' chairs, and desks/tabletops at least twice a day, as they are most likely to become contaminated.
- Following public health advice regarding the type of cleaning and disinfectant products to use.
- Following the manufacturer's instructions including with respect to use of PPE

Staff Screening and self-

Self-assessment tools should be made available to staff to ensure awareness of possible symptoms of COVID-19. Staff who suspect they may have symptoms should stay home and seek testing.

Some staff may need to self-identify a health concern or a health concern of a family member who may prefer an assignment that does not regularly bring them into contact with students. The School

boards should follow their normal human resource practices in these circumstances, with a heightened awareness of the context of COVID-19.

Testing and contact tracing

School boards should be prepared for the event of a student or staff member having a positive test for COVID-19. Schools should have a protocol based on local public health advice that includes:

- A clear notification protocol to public health in the event of a suspected case and positive test result
- The readiness to provide contact information for other students or staff who would be considered close contacts - schools should be able to quickly provide contact information to public health for class cohorts and school bus cohorts of a student or staff member who receives a positive test result and pay enhanced attention to collecting contact information for students and adaptation to student and staff information systems, so that contact information is readily available
- A close relationship with their local public health units so that the testing centre that contacts would be directed to is easily identifiable
- Public health Advisor should provide guidance on the range of contacts who should be advised to seek testing.

Communications to parents

The success of the school reopening plan will depend in part on parents being informed about new protocols and confident that the approach will keep their children safe. To that end, the Dept of Education and school boards should clearly communicate expectations and provide guidelines to parents and students well before in-class instruction resumes, and ongoing throughout the year. Communication strategies could include:

- Prioritizing digital communications, such as fact sheets explaining new protocols and links to helpful information, as well as detailed instructions regarding screening and pick-up/drop-off procedures and protocols if a child or staff person becomes ill.
- Considering alternative delivery models for activities such as parent-teacher conferences and school assemblies.
- Providing clear guidelines and procedures for drop-off and pick-up to support physical distancing.
- Providing information for students related to school hours, physical distancing, hand hygiene, remote learning, and resources to support learning and well-being at home.

Student transportation

As a result of physical distancing expectations, transportation planning will be challenging due to the reduction in vehicle capacity to accommodate students, which may result in transporting fewer students.

- Encouraging active forms of travel or private transportation by parents and caregivers, where possible, to ease pressure on transportation demand.
- Reviewing transportation eligibility policies to focus available transportation capacity on students who would be unable to reach school without it.
- Surveying parent intentions to assess transportation service needs

- Supporting physical distancing between students on school vehicles by considering planning parameters of one student per seat (unless the students are in the same household) and having students from the same classroom cohort sit in the same area, where possible.
- Where physical distancing is not possible, consider the use of non-medical face coverings or masks for students.
- Enhancing cleaning protocols for frequently touched surfaces (e.g., handrails, seatbacks) to at least twice daily.
- Making alcohol-based hand sanitizer available on vehicles.
- Assessing whether the use of personal protective equipment (e.g., surgical/procedure mask and eye protection (face shield or goggles)) for school bus drivers, and student escorts is necessary if they are unable to maintain physical distancing when transporting students.
- Supporting accommodations for immunocompromised students, medically vulnerable students, and students with special transportation needs.

Collaboration with employee representatives

School re-opening will require continued flexibility on the part of the Dept of Education, school boards and education staff as they adjust to adapted delivery models.

The health and safety of school staff must be a priority for school boards as employers. A health and safety protocol document should offer significant guidance to ensure that schools as workplaces remain safe.

- The significant adaptations that may be necessary in the next school year will require careful communication and collaboration with teacher and special needs assistance unions.
- The Department Education and School boards will have to work closely with these partners as they undertake planning for the next school year.

Conclusion

The real extent of the impact of pandemic on autistic children and adults is really unknown. It should now be the priority of the government to identify and discuss the impact that the pandemic has had on people with disabilities. Its highly likely to be even more significant for the autistic population and their families. This is mainly due to their unique difficulties in managing unexpected change, uncertainty, their high risk of vulnerability, their need for autism informed education, health and employment provision. As we emerge from this Pandemic the challenge is a unique one, we now have the opportunity to transform the system and move forward.

For years autism advocates and their allies have campaigned for reasonable adjustments that would enhance and enable autistic people to better access autism informed social spaces, health care, appropriate autism informed education and employment supports Together we need to identify and prioritise the adjustments which will meet the needs of the autistic population, such as accessing assessments and evaluation, interventions, autism informed education, training and employment, independent living supports and family support.

This current crisis provides each one of us the opportunity to work together that will lead to new learning, research and changes to policies and practices that will better support the autistic community. The pandemic experience provides us with the potential to enable the long-awaited vital adjustments that every autistic individual and their family has been advocating for to enhance and enable autistic individual to have equality of access, equality of opportunity, equality of participation and equality of outcome.

Reference	

Government   *"Approach to reopening schools for 2010-2021 school year"* June 2020
Of Ontario   Pub Canada

Branchi Vanessa   *Special Report "Autism and the Coronavirus"* June 2020
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                    Spectrum Newsletter - June 2020 US Spectrum Autism
                    Research News   www.spectrumnews.org

Inclusion   *"Abandoned, forgotten and ignored"* Interim Report June 2020 London
London   www.inclusionlondon.org.uk

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APENDIX 1

Cohorting

- The purpose of cohorting is to limit the mixing of students, so that if a child or employee develops infection, the number of exposures would be reduced.
- Classes must be Cohorted, particularly for the younger age groups, so that students stay with the same class group and there is limited to no mixing between classes and years. This model recognizes that for younger children, close interaction, such as playing and socializing, is central to child development.
- While close contact may be unavoidable between members of a cohort, general infection prevention and control practices, and, for older students, physical distancing, should still be maintained where possible.
- Where possible, the same teacher should remain with the class, or if different teachers are required, having staff come to the classroom so students do not have to change rooms
- The use of supplies and equipment should be limited to one cohort at a time, and the supplies and equipment should be cleaned and disinfected between use.
- Cohorts that utilize a room/space that is shared by cohorts or has other user groups must ensure the room/space is cleaned and disinfected before and after using the space. Consider posting a cleaning log to track cleaning.
- In shared outdoor spaces, 2 metres should be maintained between cohorts and any other individuals outside of the cohort.
- Play structures can only be used by one cohort at a time and must be cleaned and disinfected before and after used by each cohort.
- Plans should be made to prevent mixing of cohorts in washrooms/changerooms and to frequently clean and disinfect shared surfaces in washrooms/ changerooms.

Physical distancing

- Encourage physical distancing of at least 2 metres between students, cohorts, staff, and essential visitors. Re-orienting the school physical environment to support physical distancing may reduce the reliance on individual-level behavioural measures that may be impractical, particularly for younger students.
- Outside of cohort arrangements, younger children and children with special needs will have a harder time following advice for physical distancing and may require other strategies (e.g. smaller class sizes for younger children). Information should be presented to students in an age- and developmentally appropriate way.

    Classrooms

    o   When children are in the classroom, to the greatest extent possible, efforts should be made to arrange the classroom furniture to leave as much space as possible between students.
    o   Smaller class sizes, if feasible, will aid in physical distancing.
    o   If weather permits, consideration could be given to having classes outside.

Adjustments to movement throughout the school

- o Create designated routes for students to get to and from classrooms, including different and separate entrance points for students in different grades.
- o Provide visual cues/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 (e.g., guides for creating "one-way routes" in hallways).
- o Stagger periods of student movement around the school and discourage students congregating in the hallways.

Drop-off/pick-up
- o Develop procedures that support physical distancing and separate cohorts as best as possible, e.g., staggering times, using signage/marking on the ground to direct students through the entry/exit steps.
- o Pick-up and drop-off of students should happen outside the school unless it is determined that there is a need for the parent/guardian to enter the setting.
- o Parents should be educated on the role they play in mitigating the spread of COVID-19 through physical distancing at school - they should be provided with guidance on drop-off and pick-up procedures to discourage congregating at school entrances.
- o Personal belongings brought to school should be minimized. If brought to school, personal items, e.g. backpack, clothing, sun protection, water bottles, food, etc., should be labelled and stored separately, in cubbies/designated areas or lockers.

Shared spaces
- o Close communal use spaces such as cafeterias, if possible or stagger their use, ensuring physical distancing, and clean and disinfect between use.

Staff to staff contact
- o Assign staff to dedicated work areas as much as possible, discourage staff from sharing phones, desks, offices and other tools and equipment.
- o Consider alternative approaches, such as a virtual staff room.

Large gatherings/assemblies
- o Large gatherings/assemblies should be cancelled for the immediate future.
- o Choir practices and band practices pose a higher level of risk and special consideration should be given to how they are held, the room ventilation and the distance between performers. Instruments should not be shared between students.

Outdoor activities
- o During outdoor activities such as recess, physical distancing should not be required.
- o Children should perform hand hygiene prior to outdoor play / playground use. There should be a low threshold to close the play structures if there are cases in the school.
- o Sports and physical education classes should be encouraged and continue, according to available protocols. There should be special consideration as to whether restarting sports with a high degree of physical contact (i.e. rugby,

football, and wrestling) should be postponed or modified for the present
time.

Lunch breaks
- To the greatest extent possible, students are encouraged to eat lunch in their classroom with their cohort to ensure chances of contact and transmission are minimized.
- Stagger break and lunch times to allow students to wash hands before eating, without creating congestion in washrooms or handwashing stations.
- If weather permits, consideration could be given to having lunch breaks outside.

With respect to eating and drinking at school:
- Ensure students and staff perform proper hand hygiene before and after eating.
- Ensure each student has their own drink bottle that is labelled, kept with them during the day and not shared.
- Fill water bottles rather than drinking directly from the mouthpiece of water fountains.
- Ensure each student has their own individual meal or snack with no common food items.
- Remove self-serving food items.
- Clean multi-use utensils after each use.
- Reinforce 'no food sharing' policies.
- Do not plan activities that involve students in preparing or serving of food.
- Ensure physical distancing is maintained while students are eating.

Third party food services, including nutrition programs, must be delivered in a way that any student who wishes to participate can do so. "Grab and Go format" is preferred. All surfaces, bins and containers for food must be disinfected prior to and after each use.

Prohibiting non-essential visitors
- Limit parents, volunteers for classrooms, guests, and others inside the school.
- Use of video and telephone should be used to interact with families, where possible, rather than in person.

Physical infrastructure
- It is expected that environmental conditions and airflow influence the transmissibility of COVID-19.
- Adequately ventilated classroom environments are expected to be associated with less likelihood of transmission compared with poorly ventilated settings
- Avoid recirculation of air, as far as practically possible and ensure clean filters.
- In general, ventilating indoor environments with fresh air, whether by increasing the outdoor air ratio of the HVAC system settings as much as possible or by opening windows, and avoiding or reducing recirculation, will dilute the air exhaled by the occupants including any infectious particles.

Even if this is not feasible for the whole facility, consider for higher risk areas, e.g., where crowding may be an issue.

- o Recommended maintenance measures for air handling systems (including inspection and replacement of filters, if applicable) are essential to follow.

There may be instances of bladed and bladeless fan and portable air conditioner use in schools which also generate air currents that could affect respiratory droplets

- o Minimizing their use as much as possible (e.g., lowest setting), and making adjustments to direct the airflow upwards, away from surfaces and occupants may help gradually mix exhaled respiratory droplets while minimizing turbulence.
- o These devices also require regular maintenance, e.g., surface cleaning including the blades; following manufacturer's directions for maintenance and removing any moisture or water collected from the portable air conditioners.

Do not open windows and doors if doing so poses a safety or health risk, e.g., risk of falling, triggering asthma symptoms, risk of bees/wasps, to students and staff and ensure that COVID-19 measures do not introduce new occupational hazards to the setting, e.g., do not prop open fire doors to increase ventilation/reduce exposure to frequently touched door handles.

Maintaining healthy operations

Risk mitigation for students at higher risk of infection

- Some children may be at higher risk of adverse outcome from COVID-19 infections due to underlying medical conditions such as immunocompromised states or chronic medical conditions such as cardiac and lung disorders.
- Children with underlying conditions may attend school as they would per usual. However, it is important for parents to work with their child's healthcare providers so that an informed decision can be made in this regard. This is particularly relevant for children with newly diagnosed illnesses requiring the first-time use of new or augmented immunosuppression.
- In the event that such children have a documented exposure to the virus, it is recommended that their care providers be contacted for further management.

Protection of staff and at-risk persons or families

- Risk mitigation for teachers and other staff should be similar to those recommended for other public settings, as restrictions are eased and taken into account the appropriate institutional guidance relating to at-risk staff.
- Physical distancing of school staff from children and other staff should be emphasized.
- In general, masks should not be required for school staff if physical distancing is practiced appropriately. If close contact with others cannot be avoided the option of

using a mask may be reasonable. However, if used in the classroom, the teacher should explain the rationale to the children.

- Public health guidance should be followed to mitigate risks in situations where children and at-risk siblings or older adults reside within the same home.

Screening/self-assessment

- It is essential that strict exclusion policies are in place for symptomatic students and staff
    - Staff and students should be educated not to come to school if they are symptomatic or ill or if someone they have come in close contact with, including within their household, is ill with suspected or positive COVID-19 in the past 14 days.
    - School boards should consider developing protocols for supporting ongoing learning for students who may be required to remain home for a period, through online or other means.
- Student screening: Parents/caregivers should be provided a checklist to perform daily screening of their children before arriving at school.
- Staff screening: Self-assessment tools should be made available to staff to ensure awareness of possible symptoms of COVID-19. Staff who suspect they may have symptoms should stay home and seek testing.
- Signs should be posted at entrances to the school to remind students, staff, parents/caregivers, and essential visitors with information on protocols.
- Teachers and other staff members should be provided with information on signs and symptoms of COVID-19 in children so that appropriate action can be taken if children develop symptoms during the day. Students, in particular, should be monitored for atypical symptoms and signs of COVID-19. Due to the wide range of symptoms for COVID-19 and evolving understanding of the disease, a low threshold for symptoms is advised.
- Teach children/youth in age-appropriate and non-stigmatizing language how to identify symptoms of COVID-19 and instruct them to speak to a staff member immediately if they are experiencing symptoms.
- Schools must keep daily records of anyone (e.g. students, parents/caregivers, staff, and essential visitors) entering the school setting.
    - Records (e.g., name, contact information, time of arrival/departure, screening completion, etc.) must be kept up to date and available to facilitate contact tracing in the event of a confirmed COVID-19 case or outbreak.