

**COVID-19 PROTOCOLS FOR FIRST NATIONS
SCHOOL ADMINISTRATORS**

**Management of Illness and
Exposures at School**



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IMPORTANT: The information within this resource is not legal advice and should not be interpreted as such. First Nations are encouraged to seek independent legal advice, as required, to address their particular circumstances and concerns.

INTRODUCTION

This resource is intended to provide First Nations school administrators with information and considerations on the processes, roles and responsibilities involved in managing symptoms of illness, COVID-19 exposures, and confirmed cases of COVID-19 within the school community. The protocol was adapted from a BC Ministry of Education resource by the First Nations Education Steering Committee (FNESC) and First Nations Schools Association (FNSA) and developed in consultation with the First Nations Health Authority (FNHA) and BC Centre for Disease Control (BCCDC). This resource may be updated as guidance from the FNHA or BCCDC evolves. First Nations are also advised to monitor the latest directives from the [Office of the Provincial Health Officer, BC Centre for Disease Control](#), and the [BC Ministry of Health](#).

IMPORTANT: This document reflects the FNSA and FNESC's current understanding of the appropriate processes for managing COVID-19 within a school community. For additional guidance and detail, FNESC and FNSA recommend that First Nations and First Nations schools contact their respective **Regional Health Authority (RHA)**. A list of [key contacts is provided at the end of this document](#).

FNESC and FNSA fully respect the authority of individual First Nations to make decisions about school operations in the best interests of their students, schools, and communities. We recognize that First Nations may have additional requirements and processes beyond what are described in this document and may adapt this resource consistent with local needs and priorities.

FNESC and FNSA also recognize the authority of First Nations to establish their own school- or community-based protocols related to suspected or confirmed COVID-19 exposures, partial or complete community lockdowns, or a local state of emergency. FNESC and FNSA understand that these First Nations-specific protocols may supersede the guidance included in this document.

First Nations and First Nations schools may wish to incorporate the guidance included in this document within their school plan. A reopening considerations and template resource is available on the [FNESC website](#).

Sources of information for this document include the [BC Centre for Disease Control website](#), [COVID-19 Public Health Communicable Disease Guidance for K-12 Schools](#), and the [Provincial COVID-19 Communicable Disease Guidelines for K-12 Settings](#).

Definitions

Close Contact = Someone who has been near a person with COVID-19 for at least 15 minutes when health and safety measures were not in place or were insufficient, and as such is at increased risk of developing COVID-19.

- The Regional Health Authority determines close contacts as part of the contact tracing process.
- Close contacts are determined by considering how long people were together, physical proximity, the type of interactions they had, and if health and safety measures were in place.
- More information on close contacts is available on the [BCCDC website](#).

Cluster = two or more confirmed cases of COVID-19 that occur among students and/or staff within a 14-day period, and transmission is suspected or confirmed to have occurred within the school/worksite. The determination of *clusters* can only be made by medical health officers.

Confirmed Case = a person with laboratory confirmation of infection with the virus that causes COVID-19 performed at a community, hospital or reference laboratory.¹

Contact Tracing = a process led by the Regional Health Authority to identify people that are close contacts of a confirmed case. Contact tracing helps reduce the chance of spreading COVID-19.

- More information on contact tracing is available on the [BCCDC website](#).

Exposure = A person was at school when they were able to spread COVID-19.

Outbreak = When there is sustained, uncontrolled, widespread transmission of COVID-19 within a school/worksite, and extraordinary public health measures are necessary to stop further transmission in the school/worksite or school community.

¹ [http://www.bccdc.ca/health-professionals/clinical-resources/case-definitions/covid-19-\(novel-coronavirus\)](http://www.bccdc.ca/health-professionals/clinical-resources/case-definitions/covid-19-(novel-coronavirus))

Self-Isolation = staying home and avoiding situations where one could come in contact with others. Self-isolation is required for those confirmed as a case of COVID-19, as well as for some close contacts.

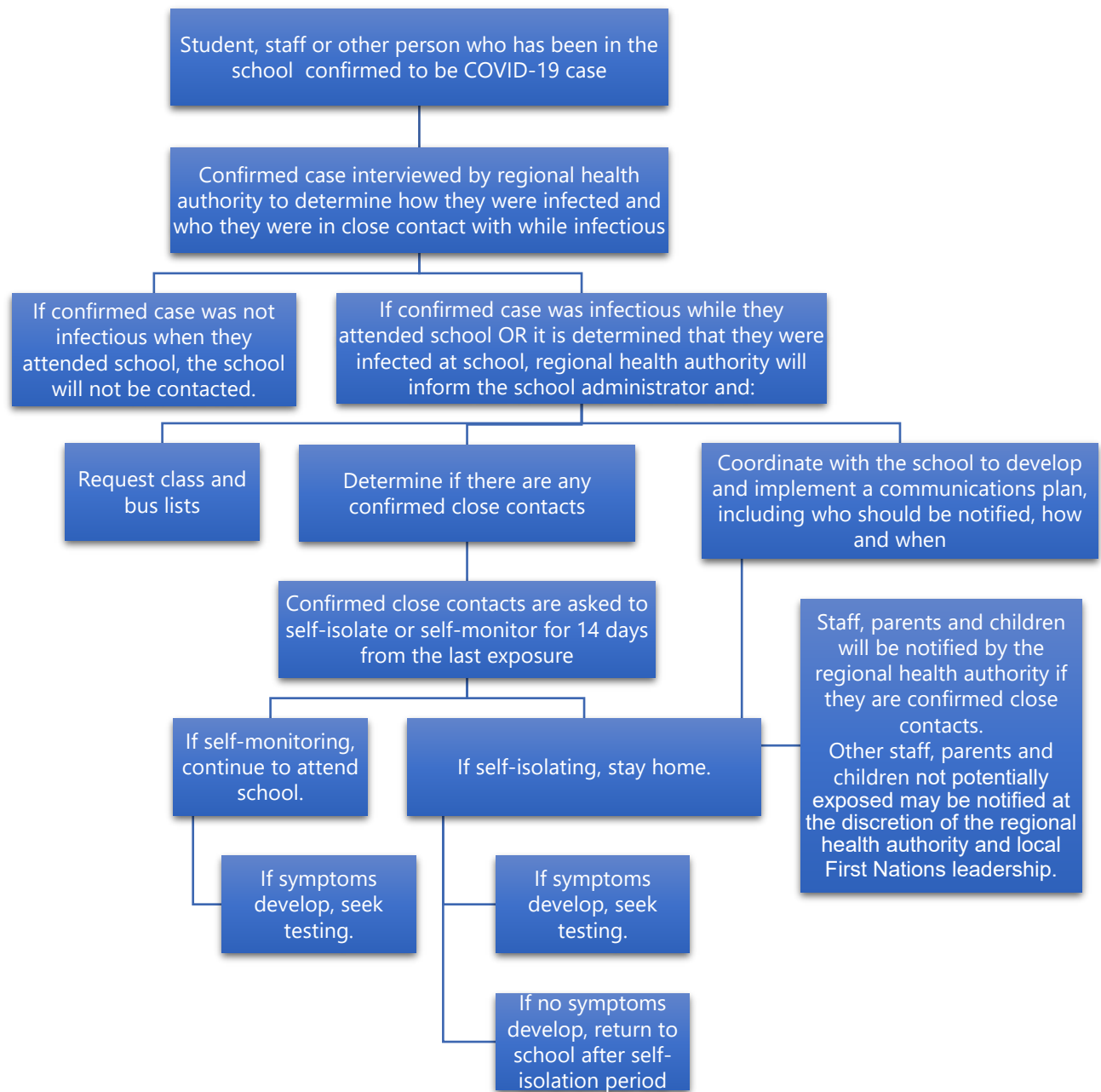
- Close contacts who are not fully vaccinated are more likely to be required to self-isolate than those who are fully immunized (i.e., 14 days have passed since their second dose of COVID-19 vaccine).
- The Regional Health Authority will let close contacts know if they should self-monitor or self-isolate.

Self-Monitoring = assessing oneself for symptoms consistent with COVID-19 for 14 days after being confirmed as a close contact, if the Regional Health Authority has determined the person does not need to self-isolate.

- Close contacts who have already had COVID-19 or have been partially or fully vaccinated are more likely to be asked to self-monitor than those who are not vaccinated.
- Individuals who have been exposed but are not determined to be close contacts may also be asked to self-monitor.
- Individuals who have been asked to self-monitor can continue to attend school/work as long as they are asymptomatic. If COVID-19 symptoms develop, they should stay home and get tested.

Figure A: Regional Health Authority Actions in Response to COVID-19 Exposure at a First Nations School

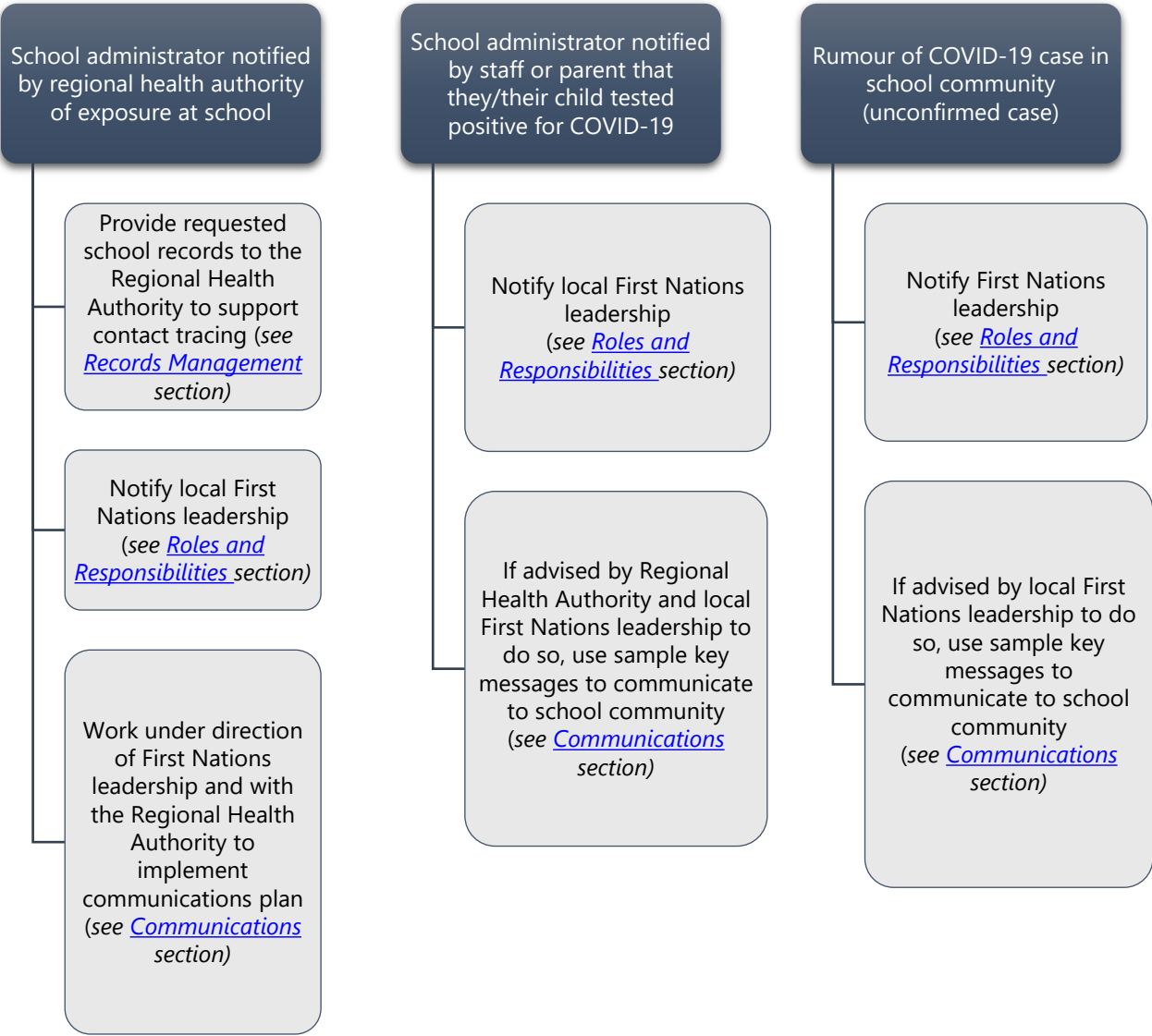
The following outlines the approach a Regional Health Authority generally takes when there has been a COVID-19 exposure at a First Nations school. The specific actions taken may differ from those outlined here, based on the discretion of the responsible Medical Health Officer.



Confirmed close contacts are determined based on the length of time of exposure and nature of the interaction. **Only health authority staff can determine who is a close contact.**

See the [Protocol in the Event of a Confirmed COVID-19 Case in a School](#) section for more information.

Figure B: First Nations School Administrator Actions in Response to Confirmed or Alleged COVID-19 Exposure at a School



MANAGEMENT OF COVID-19 IN K-12 SCHOOLS

Roles and Responsibilities

Regional Health Authorities

Medical health officers are physicians who work within health authorities and have authority and responsibilities outlined in the [Public Health Act](#). These include directing the public health response to local public health threats, like COVID-19. (see the [Key Contacts](#) section for contact information by health authority).

Regional Health Authorities have effective case management and contact tracing systems in place and will continue to monitor cases of COVID-19 in schools and local communities to determine if and when actions should be taken to prevent or control spread. First Nations communities may have a Community Health Nurse who may support Communicable Disease follow-up for Community members in collaboration with the Regional Health Authority.

When a potential exposure at a school is identified, the Regional Health Authority will work with school administration and local First Nations leadership to understand who may have been exposed and determine what actions should be taken, including identifying if other students or staff are close contacts and need to self-monitor or self-isolate. This may also include working with the school to determine if any additional measures or changes to the school's communicable disease plan are required.

Additional measures or changes to a school's communicable disease plan may also be recommended or required in the event of a cluster or outbreak, to prevent further transmission.

Local First Nations Leadership

Local First Nations leadership may include Chief & Council and senior administration of relevant departments (e.g. Health, Education).

In accordance with local processes, local First Nations leadership may be involved in working with the Regional Health Authority and the First Nations Health Authority in determining the appropriate response to a confirmed or rumoured COVID-19 exposure within the community, including the application of locally developed COVID-19 health and safety protocols, adjusting school operations, and developing a communications strategy.

School/Education Authorities

Senior school administration and/or Education Authorities are responsible for:

- Working with the Regional Health Authority and other representatives of public health to support contact tracing, and to implement additional recommended measures in the event of an exposure in the school community.
 - Administrators should ensure that TTOCs, itinerant teachers and staff, visitors (e.g. parents/caregivers), volunteers, practicum students and any other personnel who attended the school on the dates of an exposure are included in attendance records provided to public health to support contact tracing and subsequent communications activities.
 - Any additional measures will be recommended by the Regional Health Authority and will take into consideration the unique circumstances of the school and the details of the exposure.
- Informing local First Nations leadership in the event of a COVID-19 exposure at the school in a timely manner.
 - See the [Communications](#) section for more information.
- Continuing to implement COVID-19 health and safety policies and procedures, including communicating the importance of a daily health check, and what to do when sick to students and staff.
 - School-level policies and procedures should align with [BCCDC guidance](#) and be informed by [provincial K-12 communicable disease guidelines](#).

Note that individual First Nations will determine the assignment of specific roles and responsibilities within the community.

Protocol if a Student/Staff Develops Symptoms of Illness at School

The Ministry of Education's resource sets out the following protocol for public schools and non-First Nations independent schools in the event that a student or staff member develops symptoms at school:

- Provide the student/staff with a non-medical mask if they don't have one (exceptions should be made for students and staff who cannot wear masks for health or behavioural reasons, or if the person is experiencing gastrointestinal symptoms and are at risk of vomiting).

- Provide the student/staff with a space where they can wait comfortably and that is separated from others.
 - Younger children must be supervised when separated. Supervising staff should wear a non-medical mask and face shield if they are unable to maintain physical distance, avoid touching bodily fluids as much as possible, and practice diligent hand hygiene.
- Make arrangements for the student/staff to go home as soon as possible (e.g. contact student's parent/caregiver for pick-up).
- Clean and disinfect the areas the student/staff used.
 - Staff responsible for facility cleaning should clean and disinfect the surfaces/equipment which the person's bodily fluids may have been in contact with while they were ill (e.g., their desk in a classroom, the bathroom stall they used, etc.) prior to the surfaces/equipment being used by others.
 - Cleaning/disinfecting the entire room the person was in (a "terminal" clean) is not required in these circumstances.
- Request that the student/staff seek [guidance regarding testing for COVID-19](#), and stay home until symptoms have improved and they feel well enough to participate in all school-related activities (see [Return to School](#) section for more information).

First Nations may choose to take additional precautions in the event of a suspected case of COVID-19 within the school community. See the Self-Monitoring, Self-Isolation and Additional Measures section below for possible steps First Nations may take while awaiting confirmation of a suspected case.

Protocol for a Confirmed Exposure at a School

The Ministry of Education's resource provides the following guidance for public and non-First Nations independent schools in the event of a confirmed exposure at a school.

When a person tests positive for COVID-19, the Regional Health Authority initiates contact tracing to determine how they were infected and who else may have been at risk of infection.

If there was a potential exposure at a school (i.e. the person who tested positive attended school when they may have been infectious), the Regional Health Authority will work with the school administrator and local First Nations leadership to understand who may have been exposed, and then determine what actions should be taken, including identifying if other students or staff should self-monitor or self-isolate.

If there was no potential exposure at the school (i.e. the person who tested positive did not attend school when they may have been potentially infectious), the Regional Health Authority will not notify the school administrator.

Self-Monitoring, Self-Isolation and Additional Measures

The Regional Health Authority will continue to identify and notify close contacts who are required to self-monitor or self-isolate. Due to the effectiveness of COVID-19 vaccines, fully immunized close contacts (i.e., 14 days have passed since their second dose of COVID-19 vaccine) are more likely to be asked to self-monitor, not self-isolate. If a person is required to self-isolate, the Regional Health Authority ensures they have access to health-care providers and that other appropriate supports are in place.

In the case of public schools and non-First Nations independent schools, students and staff are only required to self-monitor or self-isolate if directed to do so by health authority staff. If your community plans to take a different approach, this should be discussed with First Nations leadership and health authority staff.

School administrators should ensure the necessary plans are in place for students to be able to continue their educational program if they are required to self-isolate. Schools should also have contingency plans in place to arrange coverage for staff who are required to self-isolate.

Other people who are not identified as close contacts of a confirmed case, but who may have interacted with the person who tested positive while they were infectious, may also be advised by health authority staff to self-monitor for symptoms.

Those required to self-monitor can still attend school. If they develop symptoms of COVID-19, they should stay home and seek testing.

Regional Health Authorities may recommend additional measures to be taken which may include:

- Requesting students and staff to stay home until contact tracing has been completed
- Self-isolation of a full class(es)

- Temporary restrictions or modifications of certain school activities

Regional Health Authorities will consider similar measures, as outlined above, in the event of a school cluster. Only in exceptional circumstances would a health authority consider recommending a school closure.

Local First Nations leadership may have additional requirements or implement more stringent measures, given their authority to make decisions about school operations in the best interests of their students, schools, and communities. Regular communication and cooperation of all parties is recommended.

Communications and Protecting Personal Privacy

Regional Health Authorities and local First Nations leadership, will play the lead role in determining if, when and how to communicate out information regarding an exposure to the school community. To protect personal privacy rights, health authorities will not disclose that a student or staff member tested positive for COVID-19 unless there is reason to believe they may have been infectious when they attended school. In this case, the health authority will provide only the information required to support effective contact tracing and only to the school administrator or delegate.

Health authority staff will notify close contacts, including if any follow-up actions are recommended (e.g. self-isolate, monitor for symptoms, etc.). Regional Health Authorities will also work with the school administrator and local First Nations leadership to determine if additional notifications are warranted (e.g. notification to the broader school community).

In some regions, health authority staff will request support from schools in distributing notification letters/e-mails. In others, health authority staff will issue the notifications directly via a letter/e-mail or phone call.

To ensure personal privacy rights are maintained and that information provided is complete and correct, the Ministry of Education's resource states that public and non-First Nations independent schools should not provide any public statements or communications to staff or students' families about potential or confirmed COVID-19 school exposures unless they are directed to do so by the Regional Health Authority (see the [Key Contacts](#) section for contact information by health authority).

We recognize that individual First Nations may have different expectations and processes regarding notifications and communications than those set out by the

Ministry of Education. We again recommend discussion of all parties involved to determine plans for specific communities and cases.

School administrators should be aware that individuals who test positive for COVID-19, or close contacts who are required to self-monitor or self-isolate, may experience stigma and discrimination. School administrators should seek out opportunities to foster compassion and empathy in the school community, and offer support to affected individuals and their families while respecting their privacy, to help reduce the impact of COVID-19 on people's social and emotional well-being.

Media requests regarding confirmed or suspected COVID-19 cases, potential exposure at a school or potential risk of transmission within a school setting should be directed to the First Nation and/or Regional Health Authority for response.

Schools should promptly inform local First Nations leadership of significant events (e.g. confirmed exposure or outbreak) and associated communications to school communities related to COVID-19. Communications should not include personal information associated with the exposure.

Additional Scenarios and Communications Protocols

School Administrator or Staff Informed of a Staff or Student Testing Positive for COVID-19

There may be circumstances where a staff member, student or parent/caregiver contacts a school administrator, teacher or support staff to inform them that they/their child tested positive for COVID-19, but the school administrator has not yet been contacted by the Regional Health Authority. Teachers or support staff who receive this type of disclosure should inform their school administrator but should not share the information with other staff or students, recognizing the importance of respecting personal privacy.

School administrators do not need to contact their Regional Health Authority to inform them of the confirmed case – the Regional Health Authority will already be aware of the confirmed case and will initiate contact tracing. School administrators should notify their First Nations leadership of the situation.

The Regional Health Authority will only contact the school administrator if it is determined that the person who tested positive was infectious while they were at school (an exposure) or if they were potentially infected at school. There may be a delay in the Regional Health Authority notifying the school administrator and First Nations

leadership until the contact tracing required to make that determination has been completed (this process may take a few days from when the confirmed case was notified).

In the interim, First Nations have the option of contacting their relevant K-12 Pandemic Recovery Team (formerly Rapid Response Team) for support. This decision should be made by First Nations Leadership. Schools may also use the sample key messages below when communicating with members of their school community. Consideration should be given to limiting the scope of communications as much as possible, ensuring that communications do not contain any personally identifiable information, and seeking guidance from the Regional Health Authority or K-12 Pandemic Recovery Team at the discretion of local First Nations leadership.

- We have been informed by a member of our school community that there may have been a COVID-19 exposure at our school. This has not been confirmed by the Regional Health Authority.
- If the Regional Health Authority confirms there was an exposure, we will work with health authority staff and our local First Nations leadership in determining the appropriate response.
- Please continue to attend school.
- If there was an exposure at school, the Regional Health Authority will directly notify confirmed close contacts with further instructions, including if they should self-monitor for symptoms of illness or self-isolate. If you are contacted by health authority staff, please follow their advice carefully.
- The safety and wellbeing of our students, families and staff remains our highest priority. We will continue to implement effective health and safety measures so that children and staff can continue to attend school as safely as possible.
- If you have any COVID-19 symptoms, please stay home and follow the guidance from the BC Centre for Disease Control regarding [if you are sick](#).
- We ask for your patience, and we will communicate out additional information as it becomes available.

Rumour of COVID-19 Case Circulating in School Community

Schools may use the following sample key messages to issue a communication to their school community in response to unconfirmed rumours regarding a case of COVID-19 in the school community:

- At this time, we have not been notified by the Regional Health Authority regarding any COVID-19 exposures at our school.
- Please continue to attend school.
- If a member of the school community tests positive for COVID-19, health authority staff will directly contact and provide further instructions to close contacts, including if they should self-monitor or self-isolate. This includes those who may have been exposed at school.
- If you are contacted by health authority staff, please follow their advice carefully.
- The safety and well-being of our students, families and staff remains our highest priority. We will continue to implement effective health and safety measures so that children and staff can continue to attend school as safely as possible.

School administrators do not need to contact the Regional Health Authority to inform them of a potential or unconfirmed case, but should keep their local First Nations leadership informed of the situation. First Nations may contact their K-12 Pandemic Recovery Team for support at the discretion of local First Nations leadership.

Close Contacts of a Confirmed Case of COVID-19

If a health authority determines that a student or staff is a close contact of a person who tested positive for COVID-19, the close contact will be asked to self-monitor for symptoms, and may be required to self-isolate. Only health authority staff can determine who is a close contact.

School administrators will not be notified by the Regional Health Authority if a student or staff is identified as a close contact of a confirmed case.

Close contacts asked to self-monitor may continue to attend school. If COVID-19 symptoms develop, they should stay home and get tested.

Close contacts required to self-isolate must not attend school. School administrators should ensure the necessary plans are in place for students to be able to continue their educational program while absent from school if they are required to self-isolate.

Return to School

When a student, staff or other adult can return to school depends on the type of symptoms they experienced, if a COVID-19 test is recommended and the result of their

test. See Appendix A: COVID-19 Symptoms, Testing & Return to School in the [Provincial COVID-19 Communicable Disease Guidelines for K-12](#) (p.32) for specific guidance.

Some students and staff who were required to self-isolate may have experienced elements of trauma during their time away from school. A number of trauma-informed resources are available to assist schools in supporting students and staff in their return to school:

- [Compassionate Learning Communities - Supporting Trauma-Informed Practice](#)
- [Building Compassionate Communities in a New Normal](#) – recorded webinar for educators
- [Linda O’Neill – Trauma Informed in the Classroom](#)
- [Ministry of Children and Family Development: Healing Families, Helping Systems: A Trauma-Informed Practice Guide for Working with Children, Youth and Families](#)

Records Management and Contact Tracing

In the event of a COVID-19 exposure at school, the Regional Health Authority may request contact information for students, staff, volunteers and visitors to the school in order to support contact tracing activities. This information should be easily accessible by school administrators and able to be quickly provided to health authority staff upon request.

The following records should be maintained for a period of at least 45 consecutive days:

- Student, staff and visitor attendance (including TTOCs, itinerant staff, volunteers and practicum students)
- Class, activity (e.g. field trip, extracurricular) and school bus lists,
- Current contact information for students, parents/caregivers and staff (names, emails, phone numbers)
- Attendance lists for onsite programs (e.g. before and after school children care) including participants, staff and volunteers (names, emails, phone numbers)
- Visitor logs (names, emails, phone numbers)

KEY CONTACTS

- **Medical Health Officer Contact Information by Regional Health Authority:**
 - Fraser Health, email COVIDSchoolHub@fraserhealth.ca
 - [Interior Health](#)
 - [Island Health](#)
 - [Northern Health](#), email healthyschools@northernhealth.ca
 - [Vancouver Coastal Health](#)

For additional inquiries or additional supports, including First Nations-specific guidance, please contact the First Nations Health Authority (FNHA):

- FNHA Communicable Disease Public Health Team, cdmgmt@fnha.ca or 1-844-364-2232
 - Services are available Monday-Friday, 8:30 AM-4:30 PM
- FNHA Office of the Chief Medical Officer: 1-877-376-0691 or 604-357-4554