



THE BOARD OF EDUCATION  
OF SCHOOL DISTRICT NO. 83  
(NORTH OKANAGAN- SHUSWAP)

Inclusive Education  
COVID-19 Re-start Guidelines

September 2<sup>nd</sup>, 2020  
Updated: September 11<sup>th</sup>, 2020

**The Board of Education of  
School District 83 (North Okanagan-Shuswap)  
Inclusive Education**

**Stage Two: B.C.'s Back to School Plan**

**Students in B.C. will return to in-class learning September 2020. B.C.'s plan includes new health and safety measures, increased funding for protective equipment like masks and new learning groups to help keep everyone safe.**

<https://www2.gov.bc.ca/gov/content/education-training/k-12/covid-19-return-to-school#our-plan>

**Introduction**

This document serves as an update to the May 27, 2020 Inclusive Education Re-entry Guidelines. Many parts of the original document have been edited to reflect the most current content, and excerpts from the Ministry of Education have been included. Other parts are static. Please note, this document is fluid as changes to the planning process are omnipresent as our government and our school district adapt to expressed needs and changing protocols. Ultimately, in the words of Rob Fleming, B.C. Minister of Education, *“we need to be flexible.”*

**We have been here before...** to a degree. With the tremendous amount of planning, learning, implementation and teamwork that has occurred since March 2020, SD83 staff will again endeavor to provide the best possible education program to its students with safety, patience and kindness as a priority during the COVID-19 pandemic.

An updated version of the SD83 Stage 2 Safety Plan is posted on the school district web site. All staff are encouraged to read the updated version with fresh eyes. Many of the protocols will be familiar. One will notice an emphasis on physical distancing, an increase in personal protective equipment (e.g. masks) as well as learning cohorts and cleaning protocols.

**SD83 Return to School Safety Plan- Phase 2**

[SD83 Stage-2 Safety Plan](#)

There is fear, but there is also excitement. It's best if we travel this journey together.

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## Learning Groups and Physical Distancing

Reducing the number of close, in-person interactions an individual has in a day continues to be a key component of B.C.'s strategy to prevent the spread of COVID-19. This can be accomplished in K-12 school settings through two different but complementary approaches:

learning groups (cohorts) and physical distancing.

(August 28, 2020; p. 7: <https://www2.gov.bc.ca/assets/gov/education/administration/kindergarten-to-grade-12/safe-caring-orderly/k-12-covid-19-health-safety-guidelines.pdf>)

For an overview of the Learning Cohorts established by the Ministry of Education, please see the SD83 Safety Plan. [SD83 Stage-2 Safety Plan](#)

### Inclusive Education and Learning Groups

To the best of our ability, SD83 will ensure that learning groups are established in a manner that “reflects the principles of equity and inclusion and does not result in segregated learning environments for students with disabilities/diverse abilities”.

While schools will do all that they can to minimize the number of adults crossing cohorts, those outside of a learning group must practice physical distancing when interacting with the learning group. This will likely include non-enrolling staff including learning resource teachers (LRTs), teachers teaching on call (TTOCs), district specialists, and support staff.

Several ideas to create and maintain physical distancing are within the SD83 Safety Plan.

[SD83 Stage-2 Safety Plan](#)

### Guidelines for Staff Working with Students with Disabilities/Diverse Abilities Where Physical Contact May be Required

For some students with diverse learning needs, staff providing support services need to be in close physical proximity or in physical contact with a student. Students and staff within the same learning cohort do not necessarily need to don personal protective equipment (PPE). However, comfort levels need to be considered. PPE choices for working with students with diverse needs include: gloves, masks, protective eyes glasses, goggles, face shields, and portable plexi-glass screens. Support staff can access PPE options via their LRTs.

When a person is outside their learning group or crossing cohorts, non-medical masks are required in situations where a person cannot maintain physical distance and is in close proximity to a person. As such, staff are required to wear a non-medical mask, a face covering or a face shield (in which case a non-medical mask should be worn in addition to the face shield as it provides better protection). Exceptions will be made for staff who cannot wear masks for medical and/or disability-related reasons.

## Supports for Students with Disabilities/Diverse Abilities and Students Requiring Additional Support

The Ministry of Education denotes school districts “are expected to make full-time, in-class instruction available for students with disabilities or diverse abilities and students who require additional supports.”

(August 28, 2020: <https://www.openschool.bc.ca/covidguidelines/#additional>)

Students with disabilities, diverse abilities or those who require additional supports will have access to and receive the same supports and services they had prior to the pandemic. However, supports and service delivery might look different.

### Re-start Choices

At present, within SD83 parents and caregivers of children with diverse learning needs can choose:

#### 1. Regular in-school attendance

**2. Gradual Entry or a *Soft Start*:** allows for the gradual entry and adaptation to the safety procedures. Student placement remains within their school of current enrolment.

**3. SD 83 Educational Outreach Program:** When a return to in-school instruction is planned before June 30<sup>th</sup>, the student’s placement within the school they are registered in will be maintained.

Parents and caregivers can consult with the school administration regarding school-based safety protocols and selection of re-start choices.

\* **Note:** When students transfer to a new school district or withdraw from SD83, if a return to SD83 is desired, placement within their catchment school is possible only if there is space.

### Students with Complex Medical Conditions

Parents of students who are immune-compromised or have underlying medical conditions are encouraged to consult with their health care provider to determine their level of risk regarding a return to school. If a medical professional determines that a student cannot attend school due to their health risks, the school district will work with the family to review alternative learning options for the student.

Parents and caregivers must contact their school to facilitate alternative education options. The School-based Team is encouraged to work with parents and caregivers to create a plan that will support the student.

### Resources for staff and parents/caregivers

BCCDC Guidelines for Children with Immune Suppression

[COVID-BCCDC Guidelines for Children with Immune Suppression](#)

BCCDC Guidance for Families of Immunocompromised Children in School and Group Gatherings:

[COVID19-Immunocompromised Children in School and Groups](#)

## Care/Medical Plans

Students with complex health needs may have Personal Care/Medical Plans developed or adapted in conjunction with the health authority.

- For those students involved with Nursing Support Services (NSS), please contact the NSS service provider involved with each student.
- LRTs can also contact Brenda MacKay (SD83 HR Health and Safety Coordinator) for planning related to health and safety with regards to highly individualized Care Plans.
- Existing Care/Medical Plans can continue with the staff (e.g. CEAs) already trained to implement plans.
- Parents and caregivers of students need to be aware of adapted plans, be offered input and approve any amended plans. Provide a copy to parents and caregivers.

**Care/Medical Plan Resource:** In most cases, amendments to Care or Medical Plans will be made in collaboration with Nursing Support Services (NSS) as needed. NOTE: NSS does not have a role in determining the use of PPE. In order to plan for the use of PPE and other medical related issues, the following template can be utilized. It has been left in Word for ease of use by the School-based Team.

[COVID-19 Medical Safety Plan and PPE](#)

## Continuity of Educational Plans

Competency-based Individual Education Plans (CB-IEP), Annual Instruction Plans (AIP) and other plans (Speech & Language, Physiotherapy, etc.) are to be based on needs, goals, and strategies articulated in existing plans or the previous school year. This includes other data, referrals and information from inter-agency service providers.

The goals of the students' plans remain. Yet, the strategies to achieve the goals might be altered to reflect the safety guidelines, rules and routines.

As per usual, student plans will be developed or reviewed in consultation with parents/caregivers and the specialists who typically support the student (e.g. October/November 2020).

## Mental Health and Well-being

“Supporting the health and safety of students, families and staff is a top priority during a pandemic event. In addition to taking measures to protect physical health, we also need to attend to social and emotional well-being.”

<https://www.openschool.bc.ca/covidguidelines/#learningsupports>

Students' experiences of the pandemic will vary widely. Some students may have experienced elements of trauma during their time away from school. In a time when anxiety and stress are increased,

educators at all grade levels are encouraged to embed social and emotional learning (SEL) throughout various learning opportunities, to build resilience and to enhance healthy, supportive communication.

Educators and support staff can also look for changes in student behaviour such as fear, aggression, hyperactivity, body aches and pain, withdrawal or excessive shyness to self-harming behaviours and substance use, etc. These behaviours can be indicators of trauma.

The quality of relationships between adults and students is often one of the most influential factors impacting student safety and well-being. School teams could strategically identify staff members as key points of contact to support healthy and caring connections with identified students.

When educators or support staff becomes concerned about student safety in the home (e.g. abuse or witnessing abuse), they should be reminded of their [“Duty to Report”](#).

### **Mental Well-being Resources**

- [Mental Well-Being Information and Resources for Students, Families and Caring Adults](#) contains a variety of mental health resources and supports to share with educators, students, and families.
- [erase](#) (Expect Respect and a Safe Education) hosts a range of mental health and well-being resources for students and families.
- To support educators and staff in identifying and responding to the needs of students who have experienced trauma, the Ministry has created [trauma-informed practice resources](#) that are available on the [erase website](#).
- *Keeping Healthy* on the [Keep Learning](#) website contains regularly updated free mental health and wellness resources for families and students, including specific resources for immediate help supports, LGBTQ2S+ supports, Indigenous supports, and resources available in various languages.
- Information on [Stigma, Prejudice and COVID-19](#) from the Centre for Addiction and Mental Health.

### **General Planning for Vulnerable Students: Roles and Responsibilities**

#### **Principals and Vice-Principals**

From an Inclusive Education perspective, the main role for the Principal and Vice-Principal centralizes around leadership and advocacy with regards to the safety of students with diverse needs and their educational programs.

Principals and other School-Based Team (SBT) members have been working collaboratively to gain an understanding of staffing (e.g. support staff) and students with diverse needs (designated students) and the re-start of school.

Parents and caregivers will contact principals/vice-principals when complex medical needs exist for a student. Discussions and planning with the School-based Team, including parents/caregivers, will occur on a case-by-case basis.



On September 8<sup>th</sup> and 9<sup>th</sup>, principals/vice-principals will be sharing and discussing SD83 and site specific safety procedures and protocol documents with all staff in their schools.

### **Classroom Teachers**

Classroom teachers often have vulnerable students and student with special needs designations within their classroom's composition. With learning cohorts developed, CEAs may be assigned to a specific learning cohort which include students with special education designations. Typically, teachers supervise CEAs within the classroom setting and provide direction to the CEAs related to supporting the designated students and all students within the inclusive classroom environment. This practice will continue.

Teachers should communicate with parents and caregivers of students with diverse learning needs. They should also maintain ongoing communication with colleagues who also serve their students including paraprofessionals, non-enrolling teachers, related service providers, counsellors, and school-based team. When resources for environmental and essential supports and differentiated learning for students with diverse learning needs, teachers can consult with a LRT and/or specialists. Teachers can contact the SD83 Health & Safety Coordinator to help mitigate any safety concerns.

### **Learning Resource Teachers**

While the primary role of the Learning Resource Teacher (LRT) is the case management and coordination of support services for students with diverse learning needs, LRTs should have ongoing communication with the administration in their school.

Learning Resource Teachers have been or will be:

- Scheduling Certified Education Assistants (CEAs) and attempting to minimize the crossing of learning cohorts. When able, it is suggested to assign CEAs to classroom teachers who can then determine how support will be offered based on student need, cleaning protocols and cohort management (e.g. staggered breaks).
- Consulting with classroom teachers regarding educational programming for students with diverse needs related to environmental and essential supports, differentiated learning, CB-IEP development, and other student supports;
- Collaborating with School-based Team regarding vulnerable students;
- Establishing or adapting Safety Plans and/or Behaviour Support Plans for students who tend to require more intensive supports with the School-based Team;
- Adapting Care Plans/Medical Plans in collaboration with parents/guardians and previously; trained CEAs and accessing NSS or other medical personnel as needed;
- Reviewing safety protocols with CEAs related to specific students and are offering personal protection equipment (e.g. masks, gloves, glasses, face shields) as needed. A starter kit of PPE has been sent to schools. Future needs of additional PPE for staff that work with students with diverse needs can be obtained from Reta Moerike via email request;

- Discussing and creating activities with CEAs and for CEAs to implement with students with diverse learning needs that might require supports beyond the classroom sometimes, and
- Communicating with parents and caregivers, and outside service providers (as per usual).

Typical professional practice for LRTs usually includes small group work, and sometimes classroom presentations. In light of COVID-19 and the re-start of school, it is important for LRTs to rethink and shift their professional practice for now; reducing the crossing of cohorts as able. LRTs can contact the SD83 HR Health & Safety Coordinator to help mitigate any safety concerns.

### **Counsellors (Itinerant and school-based)**

Counsellors are encouraged to maintain more-than-usual communication with the principals and other members of the school-based team, and to touch base with teachers within each school - as a means to monitor general wellness. It is anticipated that the wellness in schools will fluctuate and counsellors are encouraged to be available to support as able.

Counsellors can also:

- Determine how best to reach high-risk and vulnerable learners and watching for signs of other students whose baseline behaviours might have changed.
- Establish touchpoints to check in with students and monitor behaviour, mood and activities, focusing on student well-being and sense of connection.
- Coordinate with external service providers (e.g. child and youth mental health, MCFD) to provide wrap-around supports to students in need.

**Learning cohorts and Counselors:** All counsellors are requested to honour physical distancing when considering how and where to work directly with students, and when crossing cohorts. Coordination and scheduling with school teams to secure a confidential setting that allows for physical distancing is ideal. Scheduling of space will likely need to occur in advance and be prioritized based on the needs of the student. Cleaning protocols, safe entry/exit procedures (e.g. appointment times, texting for students to attend a meeting) and the protection of confidentiality should be a part of the planning process.

When office space is not available or able to be made safe for the staff member and/or student, flexibility in meeting places can occur (e.g. outside, go for walks, online from a school office, etc.).

Typical professional practice for counsellors often includes small group work, and sometimes classroom presentations. In light of COVID-19 and the re-start of school, is important for counsellors to rethink and shift practice for now; reducing crossing of cohorts as able. PPE is available for counsellors and portable plexi-glass screens will be available at schools as needed. Counsellors can contact the SD83 HR Health & Safety Coordinator to help mitigate any safety concerns.

## **Itinerant Staff**

Itinerants, including specialists and contracted personnel, are requested to go to schools as per their regular schedules and, if unable, (e.g. lack of space) communicate with the principal and/or LRT. Changes to regular schedules may need to occur to meet student needs and/or secure office space. Ongoing communication with school principals and other staff remains important.

All itinerant staff are requested to honour physical distancing when considering how and where to work directly with students, and when crossing cohorts. Coordination and scheduling with school teams to secure a separate work space setting that allows for physical distancing is ideal. Scheduling of space will likely need to occur in advance and be prioritized based on the needs of the student. Cleaning protocols, and safe entry/exit procedures (e.g. appointment times, texting to access students) could be considered.

In situations where itinerants cannot practice physical distancing, other measures will be explored, such as reconfiguring rooms, securing an alternate space to allow for physical distancing, using a physical barrier made of transparent materials, or providing virtual services where possible. Portable plexi-glass screens will be available to use at schools.

When itinerant staff are interacting with people outside of their learning group; physical distance cannot be consistently maintained; and none of the strategies outlined above are viable options, staff are required to wear a nonmedical mask, a face covering or a face shield (in which case a non-medical mask should be worn in addition to a face shield to provide better protection). Exceptions will be made for staff who cannot wear masks for medical and/or disability-related reasons. Inclusive education will provide all itinerant staff with PPE as needed via Reta Moerike.

Typical professional practice for itinerants usually includes small group work, and sometimes classroom presentations. In light of COVID-19 and the re-start of school, is important for itinerants to rethink and shift practice for now; reducing crossing of cohorts as able. Itinerants can contact the SD83 HR Health & Safety Coordinator to help mitigate any safety concerns.

### **School Psychologists:**

In relation to COVID-19 and procedures for assessment, school psychologists are guided by the BC Association of School Psychologists. Assessment space within a school will be available as well as space at the District Education Support Centre (DESC) with scheduling to occur in advance via the DESC Receptionist. On-site regular cleaning will be maintained and parents/caregivers will be provided guidelines for safe access (e.g. prescreening). As per other itinerant staff, school psychologists can contact the SD83 HR Health & Safety Coordinator to help mitigate any safety concerns.

## **Support Staff**

Most of the Certified Educations Assistants (CEAs), Educational Support Workers (ESWs) and Youth & Family Support Workers (YFSWs) will be working with many of our most vulnerable students. It is important for CUPE support staff to have a clear understanding of safety protocols and to have access to

these documents. CUPE support staff will be involved in site-based safety procedures and protocols on September 8<sup>th</sup> or September 9<sup>th</sup>.

Under the direction of the principal, the LRT and/or teachers, CUPE support staff will be supporting students in a variety of ways ranging from assisting during classroom instruction to monitoring washing stations to implementing individual student programs. It is important for clear communication to occur between CUPE support staff, the LRT and other SBT members.

Within specific learning cohorts, CUPE support staff are under the supervision of the classroom teacher. When one is uncertain of how to best support, staff are encouraged to ask.

For some CUPE support staff (and other staff), physical distancing and cleanliness will be of concern; especially with the younger students. The provincial direction in this regard is to minimize physical contact. Physical distancing may not be possible or realistic. PPE will be available for CUPE members supporting students at their schools. CUPE support staff can also contact the SD83 HR Health & Safety Coordinator to help mitigate any safety concerns.

Aside from the aforementioned, CUPE support staff should continue to collaborate with teachers and specialists in the delivery of instruction and supports for students with disabilities and diverse abilities, which may include:

- Assisting with the preparing of assignments, content and activities;
- Assisting with the collection of materials that might be used to support homebound education services or gradual re-start programs under the direction of teachers;
- Maintaining regular communication and check-in with students as determined by the classroom teacher, and under the direction of the principal or vice-principal;
- Supporting students in accessing and participating in virtual learning and therapy experiences as needed and under the direction of classroom teachers and/or LRTs.

Due to pre-existing relationships, many CUPE members supporting students are in a position to creatively implement teaching protocols around cleanliness and minimizing physical contact.

### **For Students with Diverse Needs: Challenging Behaviours and Other Needs**

Students are screened case by case to determine levels of support required to safely bring students into the school environment and specialized plans might need to be developed for some of our students who might become aggressive or highly dysregulated (e.g. hands-on, *can't vs won't* physical distancing, might bite, etc.). Staff working with children that have Behaviour Support Plans and/or employee Safety Plans in place should review these plans prior to working with the student. Copies of support plans to be provided to the Administrator.

#### **General guidelines include:**

- Strive to be proactive about the child's general health: For physical contact by children (punch, kick, spit, etc.), if the student is asymptomatic and healthy, the risk of transmission is very low.

- Strive to be proactive with 'take a break' and self-regulation in general. Attend to triggers. Notice body language. It is fully recognized that staff do this anyway. Sometimes, when we are in hyper-alert mode ("the yellow zone"), we can miss cues. Just a gentle reminder.
- It is recommended to do a **Safety Snapshot** so all staff are aware of ways to support and manage specific students who might intensely struggle with behavioural and emotional regulation.
- School-Based Teams can seek support and consultation from the SD83 HR Health and Safety Coordinator (Brenda MacKay) and/or the Vice-Principal of Inclusive Education (Reta Moerike) on plans as needed.
- Safety Snapshot choices:

Choice 1: [Safety Snapshot.pdf](#)

Choice 2:  [Behaviour Safety Plan.docx](#)

### **Restrictive procedures: physical holding**

While restraint should be avoided, on occasion, restraint needs to be used to stop imminent danger to self or others. The following guidelines are to be used in conjunction with SD83 policy:

#### [Physical Restraint Seclusion Policy 1040 2016.pdf](#)

Limiting risk of infection prior to a physical hold:

- Ensure staff are wearing disposable gloves, a mask, face shields, and long sleeves to the maximum extent possible.
- Ensure that only staff required for safely restraining a student are involved;
- One additional staff member should monitor and address protective equipment needs for those staff who are involved in the physical holding in the event that protective equipment needs to be altered or adjusted.

Limiting risk of infection during a physical hold:

- Keep hands clear of eyes, mouth, and nose of self and others.
- Relieve first responders as soon as possible if they are not wearing appropriate protective equipment.
- Avoid long and extended physical holds.

Limiting risk of infection after a physical hold:

- Remove and dispose of and/or clean protective equipment immediately after a physical hold.
- Avoid touching your face and limit contact with hard surfaces before washing your hands.

When restraint occurs, parent/caregiver notification is paramount.

#### Hand over Hand Support

- Staff to provide verbal cues for hand washing. Pair with visual cues when able.
- If student requires hand over hand support, staff should remain at the student's side using diagonal supportive stance, ask student not to speak and to turn head away from worker, if able. Staff should wash both students and their own hands with soap and water, and dry with paper towels every time they have hand over hand contact.

### Spitting Recommendations

Although this behaviour is challenging, if the student is asymptomatic and healthy, the risk of transmission is very low, especially if the behaviour is paired with handwashing and cleaning.

- Wipe down any area with saliva with approved sanitizer.
- If in contact with saliva, wash hands and/or affected areas.

### Biting Recommendations

- If in contact with saliva, wash hands and/or affected areas.
- Request Kevlar sleeves from Brenda Mackay, SD83 HR Health and Safety Coordinator.

### Self-Injurious Behaviours

- Wash hands with soap and water for 20 seconds, if able.
- Staff should use a verbal prompt with student.
- Staff should request assistance.
- Follow plan for student safety and maintain physical distance.
- Staff to assist if safe for head banging – place soft object between head and hard surface.

### Toileting Recommendations

- Wear gloves.
- Wash hands before and after toileting.
- Safe Diapering (See Inclusive Education Microsoft Team >> files >> COVID Resources).

### Specialized Equipment (helmet, stander, bicycle, stroller/wheelchair or lift)

If staff need to support students with specialized equipment:

- Wash hands with soap and water for 20 seconds.
- Remain at student's side using diagonal supportive stance, ask student not to speak and turn head away from worker if able.
- Support student as needed.
- Wash hands with soap and water for 20 seconds.

### Food Guidelines for Supporting Learners with Diverse Needs

- Use good hygiene practices when handling food.
- Avoid bare hand contact to student's mouth.
- Use utensils, paper towels, or dispensing equipment to handle food.
- Frequently wash hands with soap and water to reduce risk of transmission if you must handle food.
- Do not share food.

### Considerations related to PPE and students

Direct service providers should be mindful that seeing staff putting on PPE or being approached by staff wearing a face mask or PPE could cause unexpected reactions or anxious behaviours in students. Use a student centered approach and offer reassurance throughout interactions. Examples of helpful practices and ideas include:

- Put a face covering or PPE on a favorite stuffed animal.
- Consider face coverings that have a child-friendly theme material.
- Show a student who you are without the face covering or PPE, then put on the face covering or PPE in front of them (make sure you are socially distant). Be animated.
- Show pictures of others wearing face coverings or PPE.
- Use books and videos to tell a story of wearing face coverings or PPE.

### **GENERAL IDEAS to support vulnerable students:**

Structures and routines will be dependent on the individual student. The following is simply a list of ideas. Resources have been added to the COVID Resource file within Outlook (District LRT Group email) and the Inclusive Education Microsoft Team.

- When possible, make learning multi-modal (e.g. pair visual with verbal).
- Much of communication is non-verbal. Masks and face shields reduce non-verbal facial communication. One can be more expressive with other body actions and intonation of voice.
- Use personal baskets for supplies and self-regulation items.
- Create visuals to support non-contact love & belongingness (language/words and hand signals)
- Visuals (e.g. signs; poster with step, videos) and songs/chants to teach the new routines so it is not a big deal for students.
- Continue with the use of technology to provide learning as well as physical distancing and breaks or rest.
- Outside learning activities can support physical distancing/minimizing physical contact (e.g. walks, playground, sand, etc.).
- Consider stations and varied schedules to limit congestion.
- Consider teaching about *transition* and adaptation.
- Use social scripts as deemed appropriate; many young children have little understanding of the COVID-19 Pandemic. Focusing on cleanliness and physical distancing (e.g. “most germs are good for us”) might be priority. Older students will benefit from discussions and explanations.

## **Need Assistance?**

### **At the school level:**

Connect with the school administration.

Connect with the School-based Joint Health & Safety Committee.

### **Beyond the school level, you can seek support from the following:**

Enlist the support of the Director of Instruction for Inclusive Education, Carol-Ann Leidloff, for questions around ensuring adequate student support and resolving familial queries.

Enlist the support of District Vice-Principal of Inclusive Education, Reta Moerike, to assist with Behaviour Support Plans, Student Safety Plans, Care Plans, resources, or other student centric needs.

Enlist the support of the HR Health and Safety Coordinator, Brenda Mackay, for specific safety-related COVID-19 issues as they relate to staff and student Safety Plans and Care Plans.

**Health and Safety web site:** <https://healthandsafety.sd83.bc.ca/>



**References:**

[B.C.'s Back to School Plan](#)

[B.C. Centre for Disease Control](#)

[COVID-19 Operational Guidelines for School Districts and Independent School Authorities](#)  
<https://www.openschool.bc.ca/covidguidelines/#additional>

[Provincial COVID-19 Health & Safety Guidelines for K-12 Setting \(August 28th, 2020\)](#)

[SD 22 COVID-19 Pandemic Response Plan and Exposure Control Plan \(August 25th, 2020\)](#)

[SD 42 COVID-19 Safety Plan and Handbook for Students and Staff](#)

[SD 83 COVID-19 Return to School September 2020 Stage 2 Safety Plan](#)