

GUIDANCE FOR SCHOOLS (K-12) AND SCHOOL BUSES

Overview

Routine public health practices can minimize transmission of respiratory infections, including COVID-19, influenza and common colds. These practices include: getting vaccinated, staying home when sick, proper hand hygiene and respiratory etiquette, enhanced cleaning and disinfecting, and maintaining ventilation systems.

The guidance provided in this document is intended to support school and school authority leaders in reducing opportunities for transmission of COVID-19, including the more transmissible Omicron variant, in schools under the 2021-22 School Year Plan. This includes:

- a) practices to minimize the risk of transmission of infection among attendees;
- b) procedures for rapid response if an attendee develops symptoms of illness, and
- c) maintenance of high levels of sanitation and personal hygiene.

All schools are required to follow this guidance to the extent possible. Schools/school authorities should establish their own COVID-19 plans based on this guidance. Where any part of this guidance is inconsistent or in conflict with enhanced or stronger public health restrictions set out in a CMOH Order, the enhanced or stronger public health measures would prevail.

Schools refers to public, separate, francophone, charter schools, independent (private) school authorities, independent (private) Early Childhood Services (ECS), online/distance education programs, home education programs and First Nations education authorities, from kindergarten through grade twelve. School-based and curriculum-based activities that may be impacted by this guidance include sports, music and field trips into the community or to other schools, and professional development/activity days.

This information is relevant to all schools in Alberta including those on reserve, recognizing that First Nation schools on reserve are a federal responsibility. For public health information, COVID-19 questions or for reporting purposes, First Nation schools should contact their local Health Centre or Indigenous Services Canada-First Nations and Inuit Health Branch Environmental Public Health Services (ISC-FNIHB) office (see Appendix A), in accordance with normal practice.

It is important that measures be implemented in all settings to reduce the risk of transmission of COVID-19. This includes, but is not limited to ensuring: physical distancing, barrier use (where appropriate), proper hand hygiene and respiratory etiquette, enhanced cleaning and disinfecting, records management and building maintenance. Schools and school authorities must also follow the requirements set out in the [General Operational Guidance](#) and [CMOH orders in effect](#).

Zone Medical Officers of Health (MOHs) and their designates are available to provide guidance on communicable disease risk and risk management. If you have concerns, need specific guidance, or have questions about how to apply the measures in this document, please contact Environmental Public Health in your Zone for assistance (see Appendix A).

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COVID-19 Risk Mitigation

Vaccination	<ul style="list-style-type: none"> • All Albertans aged 5 and older are eligible for a COVID-19 vaccine. • Vaccines provide a significant level of protection against severe outcomes from COVID-19. Two doses of the COVID-19 vaccine plus a booster, when appropriate, have been shown to be highly protective against infection, and most importantly against severe disease. • While vaccine uptake in children aged 5 to 11 years old continues to grow, the subsequent protective effects of the vaccine may take time for this age group. It is important that those around them, including parents/guardians, older students and school staff, receive the vaccine in order to reduce community transmission and protect this age group. • For more information, please visit alberta.ca/covid19-vaccine.
General Building Safety	<ul style="list-style-type: none"> • HVAC systems should be maintained in accordance with manufacturer operational guidelines. For more information on building ventilation, please refer to the General Operational Guidance and School Indoor Air Quality (IAQ) - Mechanical Ventilation in Schools (albertahealthservices.ca). <ul style="list-style-type: none"> ○ If the use of portable air purifiers with HEPA filters is being considered, they should be used in combination with established public health measures, considering the impact they may have on overall indoor air quality and ventilation, and only in situations where enhancing natural or mechanical ventilation is not possible. If used, air purifiers should be large enough for the size of the room or area where they are being used. • Schools should have procedures that outline hand hygiene requirements: <ul style="list-style-type: none"> ○ Hand hygiene frequency should be based on activity (e.g., entering/leaving school or classroom, boarding/exiting the bus, changing activities, before and after using shared equipment, before and after eating, putting on/removing a mask, after using washrooms, etc.) ○ Handwashing with soap and water where possible is very effective. ○ Hand sanitizer containing at least 60% alcohol should be placed in convenient locations throughout the school where soap and water may not be available, such as in entrances, exits and near high touch surfaces. If parents have questions about their child using alcohol-based hand sanitizer they should contact their school administration to discuss potential alternatives.

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	<ul style="list-style-type: none"> ○ Hand sanitizer can cause serious harm if ingested. Keep out of reach of younger children/students, supervise them during use and place hand sanitizer in monitored areas. • Schools should have procedures that outline cleaning requirements: <ul style="list-style-type: none"> ○ Increase frequency of cleaning (removing visible dirt) and disinfection (killing germs) of high-touch areas and equipment (e.g., desks, doorknobs, handrails, microwave ovens, vending machines, etc.) inside and outside classrooms. ○ Common area surfaces should be cleaned and disinfected frequently throughout the day. ○ Student contact surfaces (e.g., desks and equipment) should be cleaned and disinfected between each student/user. Restrict sharing of supplies as much as possible. ○ Students should be provided with separated areas to store personal items. Individual assigned lockers may be used. Scheduling or planning times for locker use to minimize congregating at lockers may also be considered. Follow general guidance for cleaning and minimize crowding around lockers. ○ Disinfectants used must have a Drug Information Number (DIN) and a broad-spectrum virucidal claim OR a virucidal claim against non-enveloped viruses or coronaviruses. Alternatively, 1000 ppm bleach solution can be used. ○ Follow the instructions on the product label to disinfect effectively. ○ More information on cleaning and disinfection can be accessed in the General Operational Guidance. Further recommendations are available in the AHS COVID-19 public health recommendations for environmental cleaning of public facilities. • Water fountains can remain open. Mouthpieces of drinking fountains are not a major source of virus transmission and require regular cleaning according to manufacturer recommendations. • Use hand hygiene before and after handling items, including paper tests and assignments. • Items that cannot be cleaned or disinfected between routine use (e.g., paper books, shared electronics, blocks, crayons, etc.) should be stored for 24 hours between uses. • Additional Alberta Health Services resources: <ul style="list-style-type: none"> ○ AHS Infection Prevention & Control posters ○ Hand Washing Posters (AHS) <ul style="list-style-type: none"> ▪ Poster 1 ▪ Poster 2
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	<ul style="list-style-type: none"> ○ How to Hand Wash (AHS) poster ○ How to use alcohol-based hand rub/sanitizer (AHS) poster
Screening	<ul style="list-style-type: none"> • Before leaving home, staff (including substitute teachers), children/students, visitors, and volunteers who will access the school for work or education, are expected to self-screen for symptoms each day that they enter the school using the applicable checklist for their age group (Child Alberta Health Daily Checklist or Adult Alberta Health Daily Checklist). • Parents and children/students should be provided a copy of the screening checklist. This can be a hard copy or a link to the digital copy of the screening checklist. • Schools should have copies of the daily checklists available for visitors to the school. • Although health screening of staff, students and visitors is required, there is no requirement for verification or the collection and retention of formal records. • Schools should keep records of children's known pre-existing medical conditions. If a child develops symptoms that could be caused by either COVID-19 or by a known pre-existing condition (e.g., allergies), the child should be tested at least once for COVID-19 to confirm that it is not the source of their symptoms before entering or returning to school. • Written confirmation by a physician that a student or staff member's symptoms are due to a chronic illness is not necessary. • Anyone who reports symptoms should be directed to stay home and use an at-home rapid antigen test if available. For more information refer to the rapid testing at home website. • If anyone requires urgent medical attention, they should call 911 for emergency response. • Signs must be posted reminding persons not to enter if they have COVID-19 symptoms, even if symptoms resemble a mild cold.
Cohorting in Kindergarten Through Grade 6	<ul style="list-style-type: none"> • A cohort is defined as a group of students and/or staff who remain together. • Students in kindergarten through grade 6 are to remain in cohorts wherever possible. Typically a cohort in a school will be a class. • Limit the number of cohorts that students in kindergarten through grade 6 are involved in.

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	<ul style="list-style-type: none"> • The size of the cohort will depend on the physical space of the classroom or learning setting. In very small schools (e.g., equivalent to a single class size), the school may be considered one cohort. • For the purposes of minimizing exposure, consider limiting the number of individuals in a room that allows for physical distancing (i.e., fewer students in a smaller room and more students in a larger room). • Cohorting should be maintained during activities outside the classroom, such as recess and lunch breaks. If students from two different cohorts wish to socialize, they should remain 2 metres apart. • If two or more people from different cohorts are required to come within 2 metres of one another for the purposes of instruction, practice or undertaking examinations, additional protections should be instituted. Consider using engineering controls such as plexiglass barriers or partitions that extend across breathing zones and are made of materials that can be cleaned and disinfected between users, or administrative controls such as adapting the activity to minimize or eliminate close contacts. • Teachers who regularly interact within 2 metres of students in their class are considered part of the cohort. If teachers interact with more than one group of students without distancing, they are part of multiple cohorts. • As much as operationally possible, limit the number of classroom cohorts that teachers belong to. • If a teacher or staff member does not interact within 2 metres of students in their classes, they would not be considered part of the cohort. • Teachers/staff should not be in a cohort with each other, unless it is required for operational purposes. (i.e., a teacher and a teacher's assistant who work with the same classroom cohort).
Physical Distancing	<ul style="list-style-type: none"> • Schools should institute controls to promote physical distancing as much as possible between all students/staff in areas inside and outside of the classroom, including hallways, washrooms and common areas. This may include: <ul style="list-style-type: none"> ○ Staggering start and end times for classes to avoid crowded entrances or exits and hallways. ○ Posting signs and marking floors with arrows to control the flow of traffic. ○ Removing and restaging seating in public areas to prevent gathering.

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	<ul style="list-style-type: none"> ○ Considering limiting bathroom occupancy to support physical distancing. • It is still recommended to maintain physical distancing within a cohort whenever possible to minimize the risk for disease transmission (i.e., spacing between desks). Students are not expected to sit at their desks for the duration of the day. <ul style="list-style-type: none"> ○ If 2 metres spacing cannot be arranged between desks/tables, the greatest possible spacing is recommended. Students should be arranged so they are not facing each other (e.g., arranged in rows rather than in small groups of 4 or a semi-circle). This way, if a student coughs or sneezes, they are not likely to cough or sneeze directly on the face of another student. ○ Consider removing additional items or pieces of equipment that are not in use from classrooms to allow more space to spread out. • In situations where physical distancing is not possible (e.g., on the bus, in classrooms and while participating in some sporting activities), or for younger grades with play-based curricula, there should be extra emphasis on hand hygiene, respiratory etiquette, not attending school when ill and cleaning and disinfecting on a regular basis before and after activities. • Schools should develop procedures for drop-off that support physical distancing where possible between all persons (except household members). Consider strategies to support physical distancing or utilize other protocols to limit contact between staff/parents/guardians/children/students as much as possible: <ul style="list-style-type: none"> ○ Designate entrances for classes/groups of students. ○ Physical distancing markers in crowded areas. ○ Stagger drop off/bus arrival times, coordinated with entry/exit. ○ Encourage parents/guardians to remain outside during drop-off and pick-up. • Where possible, avoid large gatherings of students and staff (e.g., assemblies, in-person group professional development day activities). <ul style="list-style-type: none"> ○ Virtual options are recommended instead of in person gatherings whenever possible. ○ If virtual assemblies are not possible, minimize the number of people in attendance as much as possible and keep cohorts (K-6) 2 metres apart.
Masks	<ul style="list-style-type: none"> • Masking is no longer required for students in K-12 during curriculum-related activities or when participating in extracurricular school activities. Masking during the school day remains a personal health choice for students and their parents/guardians.

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	<ul style="list-style-type: none"> ○ Masking is required for anyone 13 years and older while attending spectator events. • Students at higher risk of severe outcomes from COVID-19 are recommended to continue wearing a well-fitting three layer cloth mask or medical mask to reduce their risk of infection. • Students who become ill while at school should be provided with a medical mask that can be worn while waiting to go home (See Section on Responding to Illness). • Fully vaccinated students or staff recovering from COVID-19 who are completing their day 6-10 mandatory masking period at school must wear a mask at all times and must not share breaks where masks must be removed to consume food or beverages with non-COVID-19 infected individuals. If more than one individual is isolating, it is possible to cohort people with COVID-19 for breaks and lunch. • Teachers, staff and adult visitors must follow provincial requirements for masks. <ul style="list-style-type: none"> ○ Masks should be well-constructed, well-fitted and properly worn. ○ If non-medical masks are worn, they should be constructed of at least three layers: two of breathable tightly woven fabric, such as cotton, and an additional effective middle filter layer, such as non-woven polypropylene. ○ Medical masks can also be worn to provide additional protection. • All staff members, volunteers, and adult visitors are required to wear a mask while in indoor shared areas of school, outside the classroom, and on a school bus. Please see current CMOH orders for additional information. <ul style="list-style-type: none"> ○ A teacher/staff may remove a mask when alone at a workstation and separated by at least two metres from all other persons. • Face shields are not equivalent to non-medical face masks and offer insufficient protection on their own. Other alternatives (e.g., neck gaiters, buffs or bandanas) offer less protection than masks and are therefore not recommended. • Face shields may be worn in addition to a mask, at the discretion of the individual. Staff may elect to wear a face shield or eye protection in addition to a mask when completing personal care of students or when staff are in close contact with students (i.e., symptomatic students awaiting pick up by parents/guardians).
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	<ul style="list-style-type: none">• Schools should consult their designated Occupational Health and Safety department for mask-wearing policies and other personal protective equipment policies for their staff.• Very few individuals may not be able to wear masks due to sensory or health issues. It is important to comply with other personal preventative practices such as frequent hand hygiene, physical distancing and strict cohorting as much as possible.• Persons seeking a mask exception at a school should discuss their request with the school administration.• Exceptions to the mask requirement for staff, volunteers and all adult visitors include:<ul style="list-style-type: none">○ Persons who are unable to place, use or remove a non-medical face mask without assistance;○ Persons unable to wear a non-medical face mask due to a mental or physical concern or limitation;○ Persons consuming food or drink in designated areas;○ Persons engaged in physical exercise;○ Persons seated at a desk or table within a classroom or place where instruction is taking place and where the desks, tables and chairs are arranged in a manner to prevent persons who are seated from facing each other, and to allow the greatest possible distance between seated persons;○ Persons providing or receiving care or assistance where a non-medical face mask would hinder that caregiving or assistance, and○ Persons separated from every other person by a physical barrier.• School administrators/authorities should develop a plan to ensure that students who are hearing impaired or who rely on facial cues are able to communicate with others in areas where masks are being worn, or have their educational needs met when teachers are wearing masks in the classroom. This may include the use of transparent masks. As with other masks, it is important that transparent masks cover the nose and mouth, as well as fit securely against the face.• School staff should monitor for and address any discrimination or bullying associated with a student either wearing or not wearing a mask.• Students who prefer to wear a mask while attending school should be supported to do so.
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	<ul style="list-style-type: none"> Masks should not be worn by anyone who is unable to remove the mask without assistance (e.g., due to age, ability or developmental status).
Field Trips	<ul style="list-style-type: none"> If schools wish to continue with off-site activities including field trips, they should follow the school guidance, as well as any sector-specific restrictions or recommendations relevant to the location of the field trip. This includes physical distancing, cohorting for students in kindergarten through grade 6, hand hygiene, respiratory etiquette and enhanced cleaning and disinfection. Considerations would include: <ul style="list-style-type: none"> Avoiding off-site activities or locations with higher risks including those that might involve crowded public venues, hands-on activities with shared items, shared transport or situations where vulnerable populations are involved (e.g. congregate care, hospital). Individual classroom cohorts for students in kindergarten through grade 6 should be maintained during transportation to and from any external field trip site, as well as at the location of the field trip site. If two cohorts share a bus, separate the cohorts by 2 metres. Organizations providing off-site activities should comply with sector-specific restrictions and recommendations. An organization or facility should only host one classroom cohort at a time, or should take clear steps to separate multiple groups to ensure they do not use shared areas (e.g., lunch rooms). Organization or facility staff at the off-site activity should maintain physical distancing of at least 2 metres from the visiting students and staff. Hold activities outdoors as much as possible. Schools should develop procedures to address students or staff developing symptoms during the field trip; plans should include a designated area to isolate the ill individual, what extra supplies may be needed (e.g., mask for the child, mask/face shield for the individual attending to the child, etc.), how to notify a parent/guardian and how the ill child will be transported home from the off-site activity. Schools must follow the CMOH orders as they relate to curriculum-based educational activities and extra-curricular activities. For more information about current restrictions, see the webpage for public health actions.

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	<ul style="list-style-type: none"> In-school field trips may also occur. All visitors to the school are expected to follow the public health measures that are in place for the school.
Performance Activity	<ul style="list-style-type: none"> Students are able to participate in a group performance activity (i.e., singing, dancing, playing instruments, theatre) as part of their education program curriculum. <ul style="list-style-type: none"> Maintain 2 metres physical distancing between participating students, where possible. Singers and wind instrument musicians should keep 2 metres away from other performers and individuals at all times. Wind instruments should be equipped with a cover intended to prevent droplet transmission. In indoor settings, groups should not sing or play wind instruments for more than 30 minutes at a time, with a 10-minute break afterwards to allow for air exchange in the room. Students are able to participate in an extracurricular performance activity following the CMOH orders for general youth performance activities. For more information about current restrictions, see the webpage for public health actions. All spectators and attendees 13 years or older must be masked. It is recommended that at this time, school authorities limit opportunities for spectating at school performance and sporting events to reduce potential exposures to COVID-19. If spectating opportunities are offered, spectators at school-related indoor performance activities held at the school (e.g., Christmas/Holiday concerts, recitals, etc.) are subject to the following restrictions: Spectator attendance limits at indoor performance activities are removed except for: <ul style="list-style-type: none"> Facilities with capacity of 500 to 999, which will be limited to 500. Facilities with capacity of 1,000-plus, which will be limited to 50 per cent. It is recommended that spectators maintain 2 metres physical distance between households. Individuals who live alone may sit with their two designated close contacts.
Physical Activity	<ul style="list-style-type: none"> Students are permitted to participate in group physical activity as part of an education program curriculum (i.e., physical education class and

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	<p>sports academy classes may occur). Participants must continue to follow the school guidance regarding cohorting (kindergarten through grade 6), physical distancing, hand hygiene and respiratory etiquette.</p> <ul style="list-style-type: none"> ○ When possible, physical education should be done outside instead of inside as the risk of transmission is higher in indoor settings. ○ For physical education classes, administrators and teachers should, where possible, choose activities or sports that support physical distancing and limit face-to-face activities (e.g., badminton over wrestling). <ul style="list-style-type: none"> • Students are able to participate in an extracurricular physical activity following the current CMOH orders for youth physical activity. For more information about current restrictions, see the webpage for public health actions. • It is recommended that school authorities limit extracurricular sport tournaments and inter-school games at this time, to reduce potential exposures to COVID-19. • Spectators and attendees 13 years or older must be masked (unless participating in the physical activity). • It is recommended that at this time, school authorities limit opportunities for spectating at school performance and sporting events to reduce potential exposures to COVID-19. • If spectating opportunities are offered, spectators at school-related group physical activities held at the school (e.g., sports games, tournaments) are subject to the following restrictions. • Spectator attendance limits at indoor performance activities are removed except for: <ul style="list-style-type: none"> ○ Facilities with capacity of 500 to 999, which will be limited to 500. ○ Facilities with capacity of 1,000-plus, which will be limited to 50 per cent • It is recommended that spectators maintain 2 metres physical distance between households. Individuals who live alone may sit with their two designated close contacts.
Expectations for Visitors and Other Service Providers Entering the School	<ul style="list-style-type: none"> • Adult visitors and volunteers are required to follow the school policies such as physical distancing, hand hygiene, staying home when ill and wearing a mask. • Parents/guardians can attend the school if they are required (e.g., parents/guardians may drop off student lunches or other necessary items as required).

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	<ul style="list-style-type: none"> When a visitor, volunteer or service provider (including delivery drivers and independent contractors) enters the school they should be asked to use the applicable checklist for their age group (Child Alberta Health Daily Checklist or Adult Alberta Health Daily Checklist) before they enter the school. <ul style="list-style-type: none"> If a visitor, volunteer or service provider answers YES to any of the questions, the individual must not be admitted into the school. In the case of a delivery driver answering YES, the driver/school will make alternate delivery arrangements.
Food Services	<ul style="list-style-type: none"> Classes that teach food preparation may occur as long as students follow general precautions, such as ensuring hand hygiene, respiratory etiquette, maintaining 2 metres physical distancing (where possible) and avoiding handling common or shared serving utensils or cookware. <ul style="list-style-type: none"> Any food prepared during a class that teaches food preparation should be served by a designated person. Students should follow physical distancing measures while eating and during food preparation where possible. Activities that involve the sharing of food items between students or staff should not occur (e.g., pot luck, buffet-style service). Parents/teachers can provide food/treats for a classroom if there is a designated person serving the food and appropriate hand hygiene is followed before and after eating. Please follow the school's policy for parent-provided food. For classroom meals and snacks: <ul style="list-style-type: none"> Pre-packaged meals or meals served by designated staff should be the norm. No self-serve or family-style meal service should occur. There should be no common food items (e.g., salt and pepper shakers, ketchup bottle). Designated staff should serve food items using utensils (not fingers). For food service program (e.g., cafeteria) establishments: <ul style="list-style-type: none"> Group students in kindergarten through grade 6 in their cohorts for meal breaks. Use alternate processes to reduce the numbers of people dining together at one time. If a school is using a common lunchroom and staggering lunch times, ensure that all surfaces of the tables and chairs (including the underneath edge of the chair seat) are cleaned and disinfected after each use.

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	<ul style="list-style-type: none"> ○ Adapt other areas to serve as additional dining space to increase spacing among persons in the same room. ○ Do not use buffet-style self-serve. Instead, switch to pre-packaged meals or meals served by staff. ○ Dispense cutlery, napkins and other items to students/children, rather than allowing them to pick up their own items.
Responding to Illness	<ul style="list-style-type: none"> • Schools should have detailed plans for a rapid response if a student, teacher, staff member or visitor becomes symptomatic while at school. This includes: <ul style="list-style-type: none"> ○ Sending home students or staff who are sick, where possible. ○ Having a separate area for students and staff who are sick and waiting to go home. ○ Ensuring that students and staff with respiratory illness symptoms wear a medical mask continuously while in school setting. ○ Disinfecting areas and items touched by the sick student or staff member. ○ Staff members caring for an ill student should wear a medical mask and may use a face shield or other eye protections, if available. • Anyone with symptoms should isolate immediately, following AH isolation guidance and orders, use an at-home rapid antigen test if available. Refer to rapid testing at home for more information. • Fully vaccinated students experiencing fever, cough, shortness of breath or loss of sense of taste/smell must continue to isolate for 5 days from when their symptoms started or until they resolve, whichever is longer. For more information on isolation please visit alberta.ca/isolation. • For up to five days following their isolation, all fully vaccinated individuals must wear masks at all times when around others outside of home for up to 5 more days (10 days total). This means they must eat or drink alone, away from others. <ul style="list-style-type: none"> ○ If it's not possible to give each student in their day 6-10 mandatory masking period a private space to eat in, they can cohort together for meals in the same well-ventilated room. Distancing is recommended and individuals should remain masked at all times when not actively consuming food and drink. • If schools find this operationally challenging to accommodate, the consistent use of a 10 day absence prior to return, for both immunized and non-immunized cases, is an acceptable approach. • Students who are not fully vaccinated who are a case of COVID 19 or who have a fever, cough, shortness of breath or loss of sense of

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	<p>taste/smell must continue to isolate for 10 days from when their symptoms started or until they are fever free for 24 hours without the use of fever reducing medication and other symptoms are improving, whichever is longer. If they receive a negative test result, they must continue to isolate until their symptoms resolve. For more information on isolation please visit alberta.ca/isolation.</p> <ul style="list-style-type: none"> • Please see Appendix B for management of adults and children who are symptomatic and/or tested for COVID-19. • Proof of a negative COVID-19 test result is not necessary for a student, teacher or staff member to return to school. • It is strongly recommended that household contacts who are NOT fully vaccinated, stay home for 10 days from the date of last household exposure to the COVID-19 case <ul style="list-style-type: none"> ○ In addition, they should monitor for symptoms for 10 days from the last day of household exposure, and if they develop any symptoms, they should isolate and complete the AHS Self-Assessment tool. ○ If rapid antigen testing kits are available, they can be used on individuals to test for COVID-19. Refer to rapid testing at home for more information. ○ For more information on isolation requirements for people with symptoms, please visit alberta.ca/isolation.
Student Transportation (Including School Buses)	<ul style="list-style-type: none"> • Parents and children/students should not be in the pick-up area or enter the bus if they have symptoms of COVID-19. • Bus drivers should be provided with a protective zone, which may include: <ul style="list-style-type: none"> ○ 2 metre physical distance; ○ Physical barrier; or ○ Mask. • Students should be assigned seats. Students who live in the same household should be seated together. • Masks remain mandatory for all teachers, staff members and adult visitors on school buses and publicly accessible transit, such as municipal buses, taxis and ride-shares. School administrators/authorities must comply with current CMOH orders regarding masking requirements on school buses. • Schools/bus companies should develop procedures for student loading, unloading and transfers that support physical distancing of 2 metres between all persons (except household members), when possible and may include:

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	<ul style="list-style-type: none"> ○ Children/students start loading from the back seats to the front of bus. ○ Where feasible, limit the number of students per bench unless from the same household. ○ Students from the same household may share seats. ○ Students start unloading from the front seats to the back of bus. ○ If there are students from two schools on the same bus, it is recommended to keep students from each school separated by 2 metres (3 rows) if possible. • A child who becomes symptomatic during the bus trip should be provided a mask if they are not already wearing one. The driver should contact the school to make the appropriate arrangements to pick up the child/student (see Responding to Illness above). • School bus cleaning and records: <ul style="list-style-type: none"> ○ Choose a disinfectant that has a Drug Identification Number (DIN) and a broad-spectrum virucidal claim OR a virucidal claim against non-enveloped viruses or coronaviruses and use it according to the manufacturer's instructions. More information is available in the AHS COVID-19 public health recommendations for environmental cleaning of public facilities. ○ Increase frequency of cleaning and disinfection of high-touch surfaces, such as door handles, window areas, rails, steering wheel, mobile devices and GPS prior to each run. ○ It is recommended that vehicle cleaning logs be kept. • Students and staff should be discouraged from carpooling unless they are from the same household. If carpooling is necessary, limit the number of people in the vehicle to maintain as much physical distance as possible and ensure all adult occupants wear masks and practice hand hygiene.
Work Experience	<ul style="list-style-type: none"> • Work experience is permitted as long as the risk of infection is mitigated for all participants. • If the work experience placement is in a workplace, the child/student is expected to follow health rules set out by the workplace which should comply with the General Operational Guidance and any applicable sector-specific guidance.
International Students/Programs	<ul style="list-style-type: none"> • International travel programs and international education programs in Alberta must follow current public health orders and local restrictions. • Individuals who have traveled from outside of Canada are provided with specific instructions and requirements at the border. They are to follow the Government of Canada Travel, Testing, Quarantine and

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	<p>Borders instructions, including any requirements for exempt travelers related to attending high-risk environments.</p> <ul style="list-style-type: none">• School administrators/authorities are not expected to be assessing students for following requirements set out by the Federal <i>Quarantine Act</i>.• Students/families are not required to provide proof of vaccination status for school administrators/authorities.• Providing school administrators with proof of a negative test result after arrival in Canada is not required to attend school.
Compliance	<ul style="list-style-type: none">• Concerns with individuals not complying with school protocols should be directed to the school principal, the school authority central office or Alberta Education.• School administrators and school authorities who have concerns, need specific guidance or have questions about how to apply the measures outlined in the guidance document may contact AHS Environmental Public Health in their zone for assistance.• Concerns identified by AHS should be discussed with the school administration. Concerns that cannot be resolved through this process should be directed to Alberta Health, who may bring forward to Alberta Education as appropriate.

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Appendix A: Environmental Public Health Contacts

Alberta Health Services

Portal link: <https://ephisahs.albertahealthservices.ca/create-case/>

ZONE	CONTACT EMAIL ADDRESS	PHONE NUMBERS FOR MAIN OFFICE
Calgary Zone	calgaryzone.environmentalhealth@ahs.ca	Calgary 403-943-2288
Central Zone	centralzone.environmentalhealth@ahs.ca	Red Deer 403-356-6366
Edmonton Zone	edmontonzone.environmentalhealth@ahs.ca	Edmonton 780-735-1800
North Zone	northzone.environmentalhealth@ahs.ca	Grande Prairie 780-513-7517
South Zone	she.southzoneeph@ahs.ca	Lethbridge 403-388-6689

Indigenous Services Canada – First Nations and Inuit Health Branch

OFFICE	REGULAR BUSINESS HOURS 8:00 AM – 4:00 PM	
Edmonton	Environmental Public Health	780-495-4409
Tsuut'ina	Environmental Public Health	403-299-3939

GUIDANCE FOR SCHOOLS (K-12) AND SCHOOL BUSES

Appendix B: Management of Individuals who are Symptomatic and/or Tested for COVID-19

Symptoms	COVID-19 Test Result:	Management of Individual:
Symptomatic	Positive molecular (e.g. PCR) test or rapid antigen take-home test	<ul style="list-style-type: none"> Fully vaccinated staff (i.e. staff who have received the complete vaccine series for COVID-19 and it has been 14 days after the second dose in a two dose series or one dose in a one dose series [i.e. Janssen vaccine]) or student (2 doses of mRNA vaccine): Isolate for 5 days from the start of symptoms or until they are fever free for 24 hours without the use of fever reducing medication and other symptoms are improving, whichever is longer, if symptoms are not related to a pre-existing condition Following their home isolation period, all fully vaccinated individuals must wear masks at all times when in a public place or otherwise in the company of other persons for up to 5 more days (10 days total). This means they must eat or drink alone, away from others. If it's not possible to give each student on day 6-10 isolation a private space to eat in, they can cohort together with other COVID-19-infected individuals for meals in the same well-ventilated room. Distancing is recommended and individuals should remain masked at all times when not actively consuming food and drink. <ul style="list-style-type: none"> If schools find this operationally challenging to accommodate, the consistent use of a 10 day absence prior to return, for both immunized and non-immunized cases, is an acceptable approach. <p>Not fully vaccinated: Isolate at home for 10 days from the start of symptoms or until they are fever free for 24 hours without the use of fever reducing medication and other symptoms are improving, whichever is longer, if symptoms are not related to a pre-existing condition.</p>
	Negative molecular (e.g. PCR) test	Fully vaccinated staff (i.e. staff who have received the complete vaccine series for COVID-19 and it has been 14 days after the second dose in a two dose series or one dose in a one dose series [i.e. Janssen vaccine]) or student (2 doses mRNA

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Symptoms	COVID-19 Test Result:	Management of Individual:
		<p>vaccine): Stay home until they are fever free for 24 hours without the use of fever reducing medication and other symptoms are improving, before cautiously resuming normal activities.</p> <p>Not fully vaccinated: Stay home until they are fever free for 24 hours without the use of fever reducing medication and other symptoms are improving if symptoms are not related to a pre-existing condition, before cautiously resuming normal activities.</p>
	Negative rapid antigen take-home test	<p>NOTE: A negative test result does not rule out infection. Rapid tests can be falsely negative, early in COVID infections. Continue monitoring your symptoms and following public health guidelines.</p> <p>Isolate immediately for 24 hours.</p> <p>Take second rapid antigen test not less than 24 hours from initial test:</p> <ul style="list-style-type: none"> • If negative, continue isolating until they are fever free for 24 hours without the use of fever reducing medication and other symptoms are improving before cautiously resuming normal activities. • If positive, continue isolation: <p>Fully vaccinated: Isolate at home for 5 days or until they are fever free for 24 hours without the use of fever reducing medication and other symptoms are improving, whichever is longer. For up to five days following their home-isolation period, they must wear masks at all times when in a public place or otherwise in the company of other persons for up to 5 more days (10 days total). This means they must eat or drink alone, away from others.</p> <ul style="list-style-type: none"> • If it's not possible to give each student on day 6-10 isolation a private space to eat in, they can cohort together with other COVID-19-infected individuals for meals in the same well-ventilated room. Distancing is recommended and individuals should remain masked at all times when not actively consuming food and drink. • If schools find this operationally challenging to accommodate, the consistent use of a 10 day absence prior to return, for both immunized and non-immunized cases, is an acceptable approach.

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Symptoms	COVID-19 Test Result:	Management of Individual:
		Not fully vaccinated: 10 days or until symptoms resolve, whichever is longer
	Not tested	<p>Student: If symptoms include fever, cough, shortness of breath or loss of sense of taste/smell, follow instructions for symptomatic positive above.</p> <p>Adult: If symptoms include fever, cough, shortness of breath, sore throat, loss of taste/smell or runny nose, follow instructions for symptomatic positive above.</p>
		<p>Student: If other symptoms (chills, sore throat/painful swallowing, runny nose/congestion, feeling unwell/fatigued, nausea/vomiting/diarrhea, unexplained loss of appetite, muscle/joint aches, headache or conjunctivitis):</p> <ul style="list-style-type: none"> • ONE symptom: stay home, monitor for 24 hours. If improves, return when well enough to go (testing not necessary). • TWO symptoms OR ONE symptom that persists or worsens: Stay home until they are fever free for 24 hours without the use of fever reducing medication, and other symptoms are improving. <p>Adult: If other symptoms, stay home until they are fever free for 24 hours without the use of fever reducing medication, and other symptoms are improving.</p>
Asymptomatic	Positive molecular (e.g. PCR) test	<p>Fully vaccinated staff (i.e. staff who have received the complete vaccine series for COVID-19 and it has been 14 days after the second dose in a two dose series or one dose in a one dose series [i.e. Janssen vaccine]) or student (2 doses of mRNA vaccine): Isolate for 5 days from the collection date of the swab or from the date when the molecular test was completed.</p> <ul style="list-style-type: none"> • Following their home isolation period, all fully vaccinated individuals must wear masks at all times when in a public place or otherwise in the company of other persons for up to 5 more days (10 days total). This means they must eat or drink alone, away from others. • If it's not possible to give each staff on day 6-10 isolation a private space to eat in, they can cohort together with other COVID-19-infected individuals for meals in the same well-ventilated room. Distancing is recommended and individuals

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Symptoms	COVID-19 Test Result:	Management of Individual:
		<p>should remain masked at all times when not actively consuming food and drink.</p> <ul style="list-style-type: none"> If schools find this operationally challenging to accommodate, the consistent use of a 10 day absence prior to return, for both immunized and non-immunized cases, is an acceptable approach. <p>Not fully vaccinated: Isolate at home for 10 days from the collection date of the swab or from the date when the molecular test was completed.</p>
	Positive Rapid antigen take-home test	<p>Fully vaccinated staff (i.e. staff who have received the complete vaccine series for COVID-19 and it has been 14 days after the second dose in a two dose series or one dose in a one dose series [i.e. Janssen vaccine]) or student (2 doses of mRNA vaccine): Isolate at home for 5 days from the collection date of the swab or from the date when the rapid take-home test was completed.</p> <ul style="list-style-type: none"> Following their home isolation period, all fully vaccinated individuals must wear masks at all times when in a public place or otherwise in the company of other persons for up to 5 more days (10 days total). This means they must eat or drink alone, away from others. If it's not possible to give each staff on day 6-10 isolation a private space to eat in, they can cohort together with other COVID-infected individuals for meals in the same well-ventilated room. Distancing is recommended and individuals should remain masked at all times when not actively consuming food and drink. If schools find this operationally challenging to accommodate, the consistent use of a 10 day absence prior to return, for both immunized and non-immunized cases, is an acceptable approach. <p>Not fully vaccinated: Isolate at home for 10 days from the collection date of the swab or from the date when the rapid take-home test was completed.</p> <p>Individuals can conduct a second test not less than 24 hours after the initial test, and if negative, and still no symptoms, they do not</p>

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Symptoms	COVID-19 Test Result:	Management of Individual:
		need to continue to isolate. If the result is positive on the repeat test, they should continue to isolate. If at any time, symptoms develop, they must follow isolation instructions for symptomatic individuals.
	Negative	No isolation required.