MINISTRY
OF
EDUCATION, YOUTH & INFORMATION

Every Child Can Learn, Every Child Must Learn

Education in Emergencies

A Manual for the Reopening of Educational Institutions

May 26, 2020 **Version 1**

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PREFACE

The World Health Organization (WHO) designated the COVID-19 disease (COVID-19) a pandemic on March 10, 2020, one day after Jamaica recorded its first COVID-19 case. Most education systems across the world have been affected by the COVID-19. In a few instances, countries continued to keep schools open while enforcing preventative measures. This includes the establishment of protocols to handle possible COVID 19 cases and limiting social and extracurricular activities. Other countries (for example Canada, Australia, Brazil and India) utilised selective school closures while most countries including Jamaica, have opted for the closure of all schools as one of the main strategies to combat the spread of the virus. Schools in Jamaica were closed initially from March 13, 2020, with the latest order requiring every educational institution to remain closed until the end of September 6, 2020

According to the United Nations Educational, Scientific and Cultural Organization (UNESCO), 89.5% of the world's students have been impacted by school closures resulting from the spread of COVID -19. In Jamaica, approximately 600,000 students in approximately 3,639 public and private educational institutions, from the early childhood to the tertiary level of the education system, have been impacted.

The Ministry of Education, Youth and Information (MoEYI) in Jamaica has developed and implemented several strategies to minimize the disruption to teaching and learning during the period of school closure. Students have been engaged through a wide range of distance learning strategies including accessing teaching and learning activities online, via television and radio. Despite the significant effort, at least 30,000 students remain unreached and this poses 'an unprecedented risk to children's education, protection and wellbeing' (UNICEF).

UNICEF (2020) posited that disruptions to instructional time in the classroom can have a severe impact on a child's ability to learn. In addition, the longer marginalized children are out of school, the less likely they are to return. Children from the poorest households are already almost five times more likely to be out of primary school than those from more affluent households. Being out of school also increases the risk of teenage pregnancy, sexual exploitation, violence and other threats. Further, prolonged closures disrupt essential school-based services such as school feeding, mental health and psychosocial support,

and can cause stress and anxiety due to the loss of peer interaction and disrupted routines, particularly for vulnerable children.

In an effort to mitigate these risks, the MoEYI is taking the necessary steps to prepare the education system for the full reopening of schools on September 7, 2020. Prior to the start of the new school year, it is important to take account the needs of those students who are at the points of transition in the education system Upper secondary students (Grades 11 and 13) normally sit exit examinations in May/June, including the Caribbean Secondary Education Certificate (CSEC) and Caribbean Advanced Proficiency Examination (CAPE), to transition to the next level of the education system or entrance to the labour market. These examinations are administered by the Caribbean Examination Council, which following a Meeting of the Council for Human and Social Development (COHSOD) on May 8, 2020, decided that students will sit examinations in July of this year.

Approximately 76,000 students are currently registered to sit exit examinations in the 2020 cycle - 59,662 for CSEC and 16,243 for CAPE. Although most students would have completed portions of the syllabi up to March 2020 when schools were ordered closed, several students would have had challenges accessing online learning platforms and other learning opportunities. According to the Statistical Institute of Jamaica (STATIN), approximately 45% of families do not have access to devices or to reliable internet services. As a result, these students would need additional support to complete their preparation for the examinations which have now been rescheduled for July - August 2020. As a result, the MoEYI has taken the decision to reopen schools between June 8, 2020 and July 3, 2020 for all students registered to sit exit examinations. Administrators also have the option, after the 3rd of July when schools would have officially closed, to facilitate additional preparatory interventions for the students in an effort to ensure that no student is placed at a disadvantage.

In considering the need to control the possible spread of the virus amongst the student population, the MoEYI has examined best practices while considering the guidelines of the Ministry of Health and Wellness. Accordingly, the MoEYI has developed a series of standards and guidelines for administrators which are designed to help them facilitate teaching and learning while safeguarding the health and wellbeing of students and staff. This manual has therefore been developed to guide administrators in implementing measures which will support the safe reopening of schools.

STATEMENT OF PURPOSE

This Manual has been developed to establish standards and provide guidelines which will guide the actions of the MoEYI and Administrators of all education institutions as they prepare for and manage the operations of their institutions for the partial reopening of schools scheduled for June 2020 or full reopening as scheduled for September 2020.

The document will be reviewed and updated as needed prior to the September reopening. Revisions will be done to reflect any further developments of changes as directed by the Ministry of Health and Wellness.

In addition to referencing this document, Administrators are encouraged to review the Safe Return to Work Guide for Employers on COVID 19 Prevention issued by the International Labour Organisation (ILO) (2020). This has been shared along with this manual and will help ensure that systems are developed and implemented to ensure the safety of all members of staff.

PREPARATION FOR REOPENING

The MoEYI has adapted the Framework for the Reopening of Schools developed by UNESCO, UNICEF, the World Bank and the World Food Programme (April 2020). The framework provides for three phases.

Phase 1- the phase prior to school re-opening
Phase 2 - partial or phased reopening
Phase 3 – all institutions reopened.

The period prior to the physical reopening of education institutions is to be used to prepare all key stakeholders and the school plant. In the preparatory phase, the MoEYI will communicate and consult with all key stakeholders in order to assess the readiness of the system for reopening while coordinating all critical preparatory activities. Consideration will therefore be given to: -

- **Policy** e.g. readmission policies, requirements and procedures
- **Communication** – implementation of a public education campaign designed to prepare key stakeholders for the reopening of educational institutions
- **Finance** - the provision of resources in public schools and provide oversight of in independent schools to facilitate the deep cleaning of plants and the provision of wash stations, cleaning agents and other resources needed to ensure that the school environment is kept sanitized
- **Infrastructure** – ensuring that all the necessary measures needed to maintain safe school operations within established physical distancing guidelines are implemented
- **Human Resources** - carefully examining staffing needs to ensure an adequate supply of
    - teachers to facilitate both online and face-to-face teaching; and
    - ancillary and other support staff needed to ensure that the various sanitation exercises before, during and after school are carried out
- **Teaching and Learning** – examination of the curriculum to determine what adaptations or adjustments to subject offerings will be required, determining the modalities which will be used to facilitate teaching and learning including assessment

- **Staff Health and wellness** – strategies needed to protect teachers with underlying health conditions, providing support for the mental health and socio-emotional support of all members of staff.
- **Students' Health and Wellness** – strategies needed to ensure the health and wellness of all students, safe transportation of students to and from school, providing a safety net for children who may be in violent or abusive situations and home and providing mental and other psycho social support to ensure students are able to function effectively in the school environment.
- **Managing School Operations -** strategies to be employed by Administrators in alignment with standards and guidelines developed by the MoEYI and approved by the Ministry of Health and Wellness to effectively manage the day to day operations of the school.
- **Inclusivity** – ensuring that special care is taken to address groups with special needs including equity in access to ICT-based learning, the provision of assistance as needed to all students can be seamlessly integrated into their learning environment and facilitating greater parental involvement in activities of the school since they may have much more information to impart regarding the educational needs of their children.

Critical to the safe reopening of education institutions will be the ability of the MoEYI and Administrators of educational institutions to ensure that behavioural changes required to reduce the spread of COVID-19 can be effectively implemented in the daily practices of staff and students. According to CARPHA (2020), and the Ministry of Health and Wellness, the following practices will need to be strictly adhered to:

- physical/social distancing (specifically, staying 6 feet away from others when you must go into a shared space)
- frequent washing hands or use of alcohol-based (at least 62 - 70% alcohol) hand sanitizers when hands are not visibly soiled and soap and water are not available
- respiratory hygiene
- wearing clean cloth face masks. MOHW mask etiquette must be observed
- avoiding the touching of eyes, nose, and mouth
- staying home when sick
- robust sanitization practices including the cleaning and disinfecting of frequently touched objects and surfaces.

In the phase prior to school re-opening, it is recommended that a "Rapid Response Survey" for each school (including community leaders, teachers, students and parents) is conducted, to obtain contextual data that can guide re-opening (UNICEF, 2020). Decision makers must then assess how learning and wellbeing can best be supported in each context.

Survey to include:

- Unique Epidemiological profile of COVID-19 in that locality, including community related risk factors (e.g. presence of community COVID-19 clusters, low water settings, likelihood of community violence etc.)
- Profile of vulnerabilities in each school (comorbidities, disabilities, social support recipients) including for teachers, administrators and support staff
- Dimensions of each class for social distancing considerations
- Staff capacity for teaching, supervision during non-academic activities
- Water, Sanitation and Hygiene.

Analyzing the context-specific benefits and risks enables prioritization of schools (or components of schools) for reopening; prioritization of risk mitigation measures within schools and communities; and areas of focus for remote learning. Based on this assessment,

(a) Not all schools need open at the same time, whether partially or fully.
(b) Not all students or staff need report to school on the re-opening day(s).

The reopening of all education institutions should be preceded by a period of activities focused on deep cleaning and disinfection all schools. This will be led by the central Ministry supported by the respective Regions. These activities will occur prior to the partial reopening of schools scheduled for June 2020 and again prior to the full reopening scheduled for September 2020.

Each deep cleaning exercise should be followed by a thorough inspection of each plant by officers assigned to each Regional Office to ensure that conditions are favourable for reopening. Principals should then work with their staff to develop their own hygiene/ sanitation plan which should be submitted to the MoEYI for approval.

In preparing for partial resumption or full reopening of a school, it is recommended that students return on a phased basis. Steps must be taken to review arrangements for teaching and learning and provide the requisite psychosocial support for staff and students.

To mitigate against the risk of spread of any communicable disease including COVID-19 Administrators (principals) will be responsible for reviewing all Ministry of Health and Wellness standards and guidelines and developing and implementing strategies to ensure that the school environment is safe for all stakeholders. The areas of focus are outlined below.

Sanitization and Hygiene Practices

- Ensure liquid soap and safe water along with other sanitization devices (garbage bags, disposable (paper) towels and hands-free bins) are available at all times at age-appropriate hand washing stations, with age appropriate and optimally sited signage on the recommended hand washing technique. Also place hand sanitizers in toilets, classrooms, halls, and near exits where possible. At the early childhood level ensure that there is a hand washing station next to the diaper change area (Standard 5.1.18).
- Establish running water stations.

- Wherever possible, establish or expand sex segregated toilets or latrines including provisions for menstrual hygiene management.
- Every effort must be made to avoid the sharing of resources which cannot be easily sanitized. Assign resource materials to individual students- e.g. textbooks, pens, rulers. Resources that can be shared must be fully sanitized before use.
- Encourage students to utilize personal items as much as possible such pens, headphones, pins, cell phones and hand sanitizers where possible headphones, pins, cell phones and hand sanitizers where possible.
- Procure and maintain a supply of products with sodium hypochlorite at **0.1%** (1-part commercial/households bleach to 49 parts of water) for disinfecting surfaces such as floors and non-porous surfaces and 62% or higher alcohol for disinfection of small items that cannot tolerate bleach.
- Bleach solutions should be mixed fresh every day for use around the school compound.
- Staff assigned to cleaning must wear industrial gloves, water boots and industrial coverall when handling chemicals.
- Staff are to be trained in the mixing of chemicals for cleaning and disinfection of small items.
- Clean and disinfect school buildings, classrooms and especially water and sanitation facilities at least twice daily (at the end of the day and after the lunch breaks as well). Particular attention must be paid to cleaning high touch surfaces (railings, lunch tables, sports equipment, door and window handles, toys, teaching and learning aids etc.) These should be cleaned and disinfected/sanitized during periods of limited use, such as after breaks and when classes start and after school ends. Where possible doors should be left open to reduce the need to touch handles. Ensure cleaning and disinfection processes are documented and adhere to MOHW guidelines.
- At the early childhood level, sanitize toys, tables, countertops, cabinets, doors, toilet seats, toilet bowls, floors, potty, diaper areas before and after use (Standards 6.3.1, 6.3.2, 6.3.7 and 6.3.11). Toys that are mouthed should be provide parents and taken home daily for cleaning.
- Schedule regular cleaning of the school environment, including toilets, with water and soap/detergent and disinfectant1. Clean and disinfect frequently touched surfaces such as door handles, desks, toys, supplies, light switches, doorframes, play equipment, teaching aids used by

children, and covers of books. *MOHW recommends 70% ethyl alcohol to disinfect small surface areas and equipment, or sodium hypochlorite 0.1% for disinfecting larger surfaces.*

- Assistive devices and other learning support aids used by students with special needs should be sanitized regularly, using appropriate sanitizer/disinfectant.
- Where possible doors should be left open to reduce the need to touch handles
- Ensure that all areas are adequately ventilated. Increase the circulation of outdoor air as much as possible by opening windows and doors, using fans, or other methods. However, take precaution in opening windows and doors if they pose a safety risk to students or other vulnerable individuals. At the early childhood level, the temperature in the classroom must not exceed 30ºC / 86ºF.

Management of Waste

- Ensure garbage is stored properly, removed daily and disposed of safely.
- Provide covered bins for the collection of waste including used tissues and disposable face masks.
- Label all containers to adequate identify areas for discarding these items.

Management of the Ill

- Develop and implement mechanisms to monitor staff and students who may become ill.
- Create a checklist for parents/students/staff to decide whether students/staff can go to school, with due consideration for local epidemiology of COVID-19. The checklist could include:
    - Underlying medical conditions and vulnerabilities, to protect the student/staff;
    - Recent illness or symptoms suggestive of COVID-19, to prevent spread to others
    - Special circumstances in the home environment, to tailor support as needed;
    - Special considerations regarding school transport as needed.
- Ensure that an area is clearly identified (that adheres to the MOHW guidelines), to allow the school to temporarily separate sick students and staff without creating stigma. These procedures should be approved by the MOHW and shared widely with staff, students and parents.
- Encourage staff, students and parents that once sick they should remain at home.

- Enforce the policy of "staying at home if unwell" for students, teachers or school staff with symptoms. Establish protocols for liaison with the Public Health Department to report suspected cases and ensure communication between home and school.
- Students and staff who record temperatures above 37.5 degrees Celsius or 99.5 degrees Fahrenheit should be temporarily isolated and recommended to visit their health providers.
- Establish procedures for students or staff who have symptoms of COVID-19 or are feeling unwell in any way, to be sent home or isolated from others. Staff will be required to advise the HR and visit the nearest health centre for review of abnormal temperature readings and symptoms.
- Waive the requirement for a doctor's note to excuse absences when there is community transmission of COVID-19.

Wearing of Masks/Face Coverings

- All workers on the compound should wear a mask as per the established protocol by the Government of Jamaica. Provide sufficient medical masks for those who need it, such as school nurses and children with symptoms.

- Ensure face masks cover the nose and mouth at all gatherings except for teachers and students who may have difficulty breathing. No recommendation for children two years and younger.
- Masks should be worn in the classrooms and areas where there are small gatherings; Encourage students and teachers to refrain from removing masks while gathered in classrooms or other teaching and learning spaces.
- An area should be identified to allow students the opportunity to remove their masks for established periods while adhering to social/physical distancing guidelines. Time in this space (particularly for younger students) should be scheduled during the school day and their use of the space carefully monitored.
- Students may only be allowed to remove the face coverings in a controlled classroom setting where physical distance is 6 feet and where general social interaction and movement is restricted.
- Staff will be required to maintain face covering during active teaching if the physical distancing of 6ft is maintained.

Operationalising Wellness Management and Social/Physical Distancing Guidelines

Wellness Management

- Organize entry points to facilitate temperature checks and hand sanitization of staff, students and all other persons who enter the school compound.
- Develop and maintain daily screening for body temperature (temperature logs) including history of fever or feeling feverish in the previous 24 hours, for each student and staff.
- Develop and implement mechanisms to monitor staff and students who may become ill
- Ensure that an area is clearly identified to allow the school to temporarily separate sick students and staff without creating stigma. These procedures should be shared widely with staff, students and parents. At the early childhood level, ensure that a clean bed linen is available and changed after every use (Standard 6.3.4 of the Standards for the Operation, Management and Administration of Early Childhood Institutions).
- Identify safe spaces, outside of the teaching learning environment where students can get a break from masks for specific periods, while observing social distancing e.g. on the playing field.
- Relevant MOHW COVID-19 posters to be erected strategically throughout the facility to enhance the health education activities. MOHW staff will be asked to visit the facility to assist with the Health Education process. Emphasis should also be placed on the physical and psychological wellbeing of students and members of staff.

General Guidelines to Maintain Social/Physical Distancing

- Social/physical distancing and all other health guidelines should be adhered to during therapy sessions for students with special needs. Alternatively, therapy should be conducted remotely.
- Enforce established social distancing guidelines - maintaining a one metre (or 3-ft) radius around each student, resulting in a 1.8m (or 6-ft) total distance between any two or more students. Utilize special markers to encourage social/physical distancing (example marks on the floor, seating arrangements in classrooms and transport).
- Create awareness to ensure that students or staff do not congregate /socialize when **entering or** leaving the school and in their free time.
- Advise against crowding during school pick-up and pick up by family or community members if possible**. (Elderly family members with comorbidities should be excluded from this task)**

- Consider increasing the number of teachers, if possible, to allow for fewer students per classroom (if space is available) **A shift system may have to be reinstituted in the schools as already proposed in the document.**
- Post health and hygiene signs visibly on school compound.
- Ensure face (masks) covering the nose and mouth at all small gatherings except for teachers and students who may have difficulty breathing or need assistance to remove the mask.
- Large social gatherings of children or staff greater than 12 is generally discouraged. All persons should practice physical distancing where possible.
- Seating in the classroom should be spaced to cater to 10-12 persons not including the teacher. Rearrange seating to allow students and teachers to face the same direction. No group work settings must be facilitated unless students can observe the social/physical distancing rules. If possible, group work can be moved to an online platform.
- Assign children places and encourage them to use assigned places daily.
- Ensure that at the primary level only one student is seated at a desk.

Administrators of institutions which provide boarding for students should follow the general guidelines for residential facilities. Parents of students who reside in boarding institutions or who access housing in tertiary institutions should be carefully sensitized and required to sign an agreement. In the case of a student who is a legal adult, the student should be required to sign the agreement. Consideration must also be given to: -

- Reviewing rooming arrangements for students to reflect a maximum of two students per room (Providing the social distancing requirements are met)
- Generating daily cleaning and sanitization schedules for dormitories
- Ensuring that guidelines for the daily operational activities are aligned with the Disaster Risk Management Act for example, temperature checks in the mornings; dining arrangements, movement on dorms, gatherings, visiting rules (out weekends, accommodating visitors) etc.
- Updating school's health response mechanism for sick students and managing students with pre-existing medical conditions
- Temporary Isolation room /holding area shall be in place for students and staff with COVID-19 symptoms and should satisfy the MOHW requirements for such facility.

Social Distancing Measures - Classroom Arrangements

- Consider strategies which supplement face to face engagement with distance modalities for students at the secondary and tertiary levels. Principals should explore the use of rotation/extended school day/ modified versions of the shift system to allow for teaching and learning while adhering to social distancing guidelines
- Explore the development of partnerships with critical stakeholders to identify and access additional infrastructure/ classroom space as required such as church halls, libraries, tents etc.
- Consider organising teaching and learning so that core subjects are done at school and non-core subjects at home with teacher guided support at the primary level. Limit activities requiring multiple student groups to interact with each other
- Limit gatherings where social distancing is not likely to be observed
    - ceremonies, sports event, PTA gatherings etc.
    - extra-curricular activities
- Reduce the sizes of Physical Education classes by 50 – 60% in order to allow the teacher to effectively ensure the use of physical distancing practices
- Incorporate more digital and online learning to reduce class size for core subjects such as English Language, Literature, Mathematics and Science and for Physical Education
- In September 2020, orientation for Early Childhood, Grade one and Grade seven students should be done during the first week of school depending on the size to maintain social distancing.
- For the second week in September the remaining students should be scheduled to come into school on a shift system in order to ensure that the school is able to maintain social distancing standards in classrooms; particularly in large early childhood, primary and high schools.
- In the case of the small schools they can continue on a whole day system as the classes are usually small, thereby minimizing the probability of overcrowding. There should be no more than 10 or 15 students in any given classroom based on its size. At the early childhood level the teacher child ratio – children 0 – 12 months 1 adults to 5 children; children 13 – 35 months 1 adult to 8 children; children 3 – 6 1 adult to 10 children (Standard 1.4.2). This number can be used to guide the shift arrangements at the school level, guided by the enrolment. The shift system is a short-term solution until normality is achieved or new provisions made under the Disaster Risk Management Act.

Scheduling

- Decide which lessons or activities should be delivered face to face or using a distance modality
- Consider staggering school days to 2 to 3 days per week with 3 to 4 lessons per day as applicable for the specific grade levels and consider allowing students to work from home for the remaining days of the school week.
- Where lessons or classroom activities can take place outdoors, this should be accommodated and scheduled
- Timetable subjects so that students have as many classes as possible in their home-rooms in order to limit frequent movement. In cases where this is not possible ensure that students leave and enter classrooms or labs in single file maintaining the 3 to 6 feet distance. This should be carefully monitored by the assigned subject teacher
- Allow for a five-minute break between each lab and workshop to allow for sanitisation before the new group enters the room
- Stagger assembly groups, time on the playground, lunch time and drop-off/collection times while developing protocols designed to minimise adult to adult contact
- At the secondary level ensure that: -
    - timetables are rearranged to reduce movement of students from classroom to classroom
    - specialist teachers move to homerooms
    - social distancing guidelines are adapted for labs and workshops
    - no more than two (2) groups should use labs and workshops in a given day
    - time is allowed for the cleaning of the space and equipment in labs and workshops between classes

Lunch

- Encourage students to bring their own lunches. With babies unused breast milk and formulae that is unrefrigerated should be discarded after one hour (Standards 7.1.11, and 7.1.25).
- In this instance, consider making arrangements for meals to be warmed as needed. This should be carefully monitored to ensure that this is safely used and that any necessary sanitization procedures are established and adhered to

- Ensure that social/physical distancing guidelines are adhered to in the use of the canteen. Use markers on the ground to assist students in maintaining the required distance. An alternative is to have lunch at desk.
- If the services of concessionaires have been discontinued, make arrangements for the provision of meals for staff and students
- Encourage class groups to eat together in class as far as possible.

Transportation

The Ministry will continue to implement transportation programmes in areas where they already exist. In addition to the use of public or private transportation, administrations can support the safe transportation of students to and from school, by considering the following options where they exist: -

- private operators currently contracted under the Ministry's Rural School Bus Programme; and
- the use of school buses to provide shuttle services for needy students. Parents and administrators should collaborate to support the safe movements of students to and from school.

Principals should use the requisite documentation to establish contractual arrangements engaging private operators or school buses to provide shuttle service for needy students (additional guidance can be sought from the Regional Office if needed).

Where transportation is being organized by the school, it is critical that

1. a contract is developed and signed by parents,
2. drivers should be at least 21 years old (Standard 8.4.1),
3. drivers should have a valid private or general licence depending the vehicle to be use (Standard 8.4.2).
4. a timetable for the available shuttle service be developed and circulated to parents and students
5. a student travel log be developed and maintained to account for students' utilization of the service
6. centralized pick up points be established and communicated to parents and students
7. a text messaging system be developed and used to support communication between the school and parents.

The following guidelines should be implemented to ensure the health and wellbeing of students as they are transported to and from school

- Private operators contracted by the school are required to sanitize their vehicles after each trip. Private operators contracted under the Rural School Bus Programme is required to conduct temperature checks and sanitize buses between trips
- Where school buses or contractual arrangements are being used, determine the number of students who can be accommodated on each trip in order to ensure that social/physical distancing guidelines are respected. This should be clearly communicated to all stakeholders. To support adherence, mark seats which cannot/can be used to guide students
- Sensitize students to safety precautions to be observed while using public passenger vehicles such as the wearing of face masks, social distancing and compliance with temperature checks and hand sanitizing activities. This should be reinforced at regular intervals
- Students who walk to school are to be encouraged to avoid crowded areas, and loitering on the streets.

Catering to Students with Special Needs

As the Ministry and administrators prepare for the reopening of education institutions, careful consideration must be given to safeguarding the needs of students with special needs. As a result, principals are asked to note the following: -

- Students with pre-existing medical conditions should be encouraged to continue to access their education remotely
- Medical clearance from a doctor must be provided for students with known pre-existing medical conditions who opt to return to school
- Students who are unable to tolerate a mask due to hypersensitivity or other medical conditions should continue to be served remotely. A medical certificate should be provided for their records
- Students who require the support of a Shadow which involves close or regular physical contact should be encouraged to continue to be served remotely. Where Shadows are engaged, principals will receive a handbook to guide this engagement. In addition, parents of students who utilize the services of a shadow should be required to sign a release, absolving the Ministry of liability in case the student contracts COVID from the Shadow.
- Students who have no medical challenges that would put them at greater risk, but whose parents opt for them to continue their education remotely, should provide the school with a letter from the parent outlining the concerns in order to maintain their enrolment in the particular school.

- Where appropriate, flexible scheduling (e.g. shortened school days) should be utilised for students with special needs
- Additional precautions should be taken in treating students who are blind or visually impaired, both in mainstream and at the School for the Blind, due to the dependence on the sense of touch.
- Schools should evaluate students' Individual Intervention Plans (IIPs) to determine gaps. IIPs should then be revised based on identified gaps to reflect teaching goals.

Consideration for Staff with Special Needs

It is critical that time be taken to determine which members of staff may need to continue to work from home due to the risks associated with pre-existing medical conditions. Where this arrangement may present particular challenges, Administrators may seek the guidance and support of their Regional Offices to address the situation.

Considerations for Capacity Building

Critical to ensuring the effective transitioning of teachers to using methodologies which will support teaching and learning arrangements developed and implemented in response to COVID 19. Principals must therefore develop a Capacity Building plan designed to equip teachers to deal with both learning recovery and meeting students' basic literacy/numeracy and social-emotional needs. This is particularly important in schools with a high proportion of at-risk students.

Teachers should be exposed to capacity building opportunities designed to help them identify age-related behavioural and cognitive changes and provide age-appropriate learning support.

Capacity building opportunities should also be provided for in-service and pre-service teachers focused on helping them develop the competencies to utilise multiple distance learning strategies.

Communication/Behaviour Management

Once a school has reopened, opportunities should be created daily during the first two to three weeks of school to: -

- allow students to share how COVID 19 has affected or impacted them and
- teach students and staff about COVID 19 and the relevant safety procedures to mitigate against its spread

This should be infused into orientation activities organised for all grade levels.

Administrators should also

- Encourage staff, students and parents to remain at home once sick
- Promote hygienic practices at all levels amongst all stakeholders with particular emphasis on handwashing and respiratory hygiene practices. Signs with the appropriate messages should be mounted across the school compound at strategic points
- Increase and sustain communication with students, and other critical stakeholders which is focused on promoting awareness about COVID 19, and the necessary safety measures which will limit spread
- Encourage the use of hand sanitizers, and where recommended by national authorities, emphasize the importance of proper use of cloth masks.
- Information on hygiene should be made widely available and accessible to all stakeholders including those with special needs (e.g. the visually impaired). The language used should be child friendly
- Promote and demonstrate regular and thorough (at least 20 seconds) hand washing and positive hygiene behaviours and monitor their uptake. Monitors can be identified and assigned as needed to provide support
- Create a schedule for frequent hand hygiene, especially for young children, and provide sufficient alcohol-based rub or soap and clean water at school entrances **(near the entrances would be more appropriate and with multiple stations to avoid overcrowding)** and throughout the school.
- Encourage staff and students to take their own drinking water, eating utensils (as needed) and hand sanitizers where possible.

ASSESSMENT

Administrators will need to consider matters relating to assessment. This includes: -

- Internal assessment and promotion practices
- The Administration of Secondary External Examinations
- Diagnostic Assessment on re-opening

Internal Assessment and Promotion

Administrators will need to consider matters relating to assessment and the promotion of students. Several strategies can be employed. This includes waiving less important examinations, such as those used for promotion decisions to allow focus on more critical examinations (such as those used for transitioning to secondary, secondary school graduation or university entrance). This should be done while ensuring that assessment strategies employed are valid, reliable, and equitable ways and are administered with adherence to all physical distancing guidelines and other health requirements.

The universal promotion of students should be utilized where possible. In this instance however, steps must be taken to assess students' levels of learning following school closures to inform remedial efforts. This will be led by the Ministry for students in Grades 1 – 9 as outlined later in this document. Once the data generated from the administration of the diagnostic tools is available, steps must be taken to develop and implement interventions designed to mitigate learning loss and prevent exacerbation of learning inequality after school closures. Particular focus must be placed on literacy and numeracy for primary-age children and accessibility accommodations for children with disabilities. Accelerated education models can be implemented in parallel to integrate previously out-of-school or over-age children.

Administration of Secondary External Examinations

Caribbean Examinations Council (CXC), NCTVET and City and Guilds examinations will be administered between July 27 and mid – August of 2020.

CXC and NCTVET will administer multiple choice papers using both online and off-line modalities. City and Guilds will have the sittings of the Customer Service and the Skill Proficiency Awards assessment. These courses do not have enough historical data to allow for the use of calculated scores.

To provide students registered to sit exit examinations with an opportunity to finalize their preparation, they will be allowed to return to classes between June 8 and July 3, 2020. This period will also allow

- students registered to sit City and Guilds Mathematics and English Skills examinations an opportunity to submit additional work to support the preparation of the calculated scores; and
- the completion of the Continuous Assessment Record for NCTVET

Principals are being encouraged to ensure that candidates satisfy the requirements to sit the 2020 CSEC/CAPE/CCSLC exit examinations. This includes

- Completing and submitting their SBAs and IAs (systems must be developed and implemented to manage this process where SBAs/IAs are still outstanding) by an established deadline to ensure that all necessary internal processes can be completed to meet the CXC deadline
- Facilitating oral examinations in a timely manner where applicable
- Procuring adequate materials/resources to facilitate all practical examinations
- Making revision materials and sessions accessible to all students
- Updating the academic records for all students to ensure that final transcripts/reports can be finalised
- Identifying students who need additional support and developing and implementing appropriate plans to provide the support required

If there are any communities under quarantine during the revision or examination periods, Administrators must ascertain the number of students who are affected and communicate with their respective Regional Office so that a strategy to provide support and minimize disruption can be developed and implemented.

Due to the expected late release of CXC examination results, students who are to transition to Grades 12-13 will commence classes Oct 1, 2020. Other examination results are expected to be released on schedule to allow for the smooth transitioning of students to the next level of the education system.

Centre Management

In preparing for the administration of examinations, Administrators must develop protocols for the management of examination centres considering standards and guidelines previously communicated for sanitization and social distancing. In developing the protocols, consideration must be given to

- the total number of candidates sitting, including independent candidates
- the number of centres needed per school to maintain social distancing of at least 6ft
- the number of invigilators required to manage each centre (the school administer must assess the number of invigilators required to support the administration of all examinations and activate the necessary protocols to fill identified gaps). This activity must be pursued while being in dialogue with the examination body
- the number of candidates needing special accommodations. Take note of
- the type of accommodations needed
    - how the special accommodations should be facilitated
    - what assistance will be needed to provide special accommodation

If alternative centres are required, they must be identified. It is best that these be in close proximity to the school or to the home of the student and they must also be easily accessible to students. Administrators can consider some of the following strategies in developing their protocols: -

- reconfiguring the institution in order to attain the capacity to accommodate the additional electrical energy load in the case of e-testing
- identifying additional facilities with established Information Technology Laboratories to host students (church halls, libraries, Universities Computer Laboratories, Teachers' Colleges (Across the island) as needed, where possible. It is critical that in such instances trained laboratory technicians be engaged)

All laboratories should be assessed and equipped with security features as stipulated by the Caribbean Examination Body and systems to support the electronic verification of students should be employed where possible.

Diagnostic Assessment on Reopening

In an effort to minimize learning loss and the development of significant gaps in learning it is critical that diagnostic assessments be developed and administered shortly after students return to school. While the Ministry will coordinate the development, administration of a suite of standardized diagnostic assessment tools in the initial weeks after for the reopening of schools in September 2020 schools will have to take full responsibility for these processes after the June reopening for examination students. Administration of diagnostic tools should be followed by the thorough analysis of the data generated to identify learning gaps, assess learning loss and guide the development of individual, school, regional and national intervention plans designed to support students getting back on their respective learning paths. The proposed suite of diagnostic instruments which will be developed by the Student Assessment Unit are outlined in Table 1 below.

Table 1: The Proposed Suite of Diagnostic Instruments for Administration September 2020

Grade Level	Subject
Grades 1 – 3	Mathematics
	Language Arts
	Integrated Studies
Grades 4 – 6	Mathematics
	Language Arts
	Social Studies
	Science
Grades 7 – 9	Mathematics
	Language Arts

Table 2 Key Activities Associated with Administration of Diagnostic Assessments

Key Activity	Timeline	Process Owner(s)
Development of Diagnostic Tools	June 1 – 30, 2020	MoEYI
Development of intervention plans	July 1 – August 31, 2020	MoEYI
Administration of Diagnostic Tools (September reopening)	September 7 – 18, 2020	Schools
Scoring & Analysis of Diagnostic Tools	September 21 – October 2, 2020	Schools & MoEYI
Implementation of intervention plans	October 5, 2020 - ongoing	Schools & MoEYI

Table 2 outlines the key activities required in developing the suite of diagnostic tests and the timelines associated with the activities along with the process owners.

Diagnostic Assessment and Curriculum Management

- In all other grades where standardized examinations are not used for the placement of students at higher educational levels, then the continuous assessment records of students can be used for transitioning purposes. Students would therefore transition to a higher grade/educational level in September 2020.
- A curriculum bridge should be created to address the gaps in achievement identified.
- Be prepared to adjust school schedule to accommodate new mitigating measures
- Explore online teaching and exam options

OTHER KEY AREAS FOR CONSIDERATION

Graduation/Valedictory Service/School Leaving Exercises

Several students would have been scheduled to complete learning programmes at the various levels of the education system. Traditionally schools have facilitated a variety of graduation or school leaving exercises. These exercises have been regarded as a rite of passage in the Jamaican context and in the life of the learner. Given the disruption caused by the COVID-19 pandemic, schools have been challenged to engage students and their families in the traditional school leaving exercises, in the usual format given the safety precautions that must be observed to contain the spread of the COVID-19.

In determining the approach to be utilised, it is critical that administrators engage key stakeholders and explore options that are safe and aligned with the Disaster Risk Management Act Orders and Instructions. Consideration can be given to

- Postponement or cancellation
- Modifying implementation to include consideration for virtual events by going live on social media platforms, using videoconferencing applications such as Zoom or holding mobile/drive-through presentations/parades etc.

Whatever the approach utilised, Administrators are cautioned to be reasonable given the economic strain on many families which has resulted from the pandemic.

Infrastructure and Maintenance Works

School administrators are being asked to use the period of physical school closure to commence planned infrastructure and maintenance works.

- All projects and procurement committees should be activated and works advanced as guided by the procurement guidelines
- Engage the Regional Director and/or Regional Building Officer where guidance is required
- Schools will receive direct support from their regions to procure and complete infrastructure repairs.

The Ministry's team will be taking the necessary steps to advance all infrastructure repairs already scheduled to be completed before the start of the 2020/2021 academic year.

Primary Exit Profile (PEP)/Grade 7 Students

Following extensive consultations, the MoEYI took the decision to cancel the 2020 sittings of the Grade 6 Primary Exit Profile (PEP) Performance Tasks and the Curriculum Based Tests. The Ministry will instead, use a modified psychometrically approved assessment profile to place the Grade 6 students in high schools using results of their

- Grade 4 Literacy and Numeracy in 2018;
- their Grade 5 Performance Tasks in 2019; and
- Ability Test (Administered in February 2020)

These assessments have been found by psychometricians to be reliable and valid for placement of the Grade 6 students. Placement data will be available to the primary level institutions on June 26, 2020 and by July 10, 2020 at the secondary level.

Secondary school administrators are being asked to begin the preparations for registration and orientation of these students in small groups or virtually.

- Ensure that the cost of registration on packages does not exceed an additional 10% of the fee charged for the last school year
- Make printed materials available online where possible
- Facilitate support school interventions using mixed-modalities (face to face and online engagements) where possible
- Summer school activities should be the start of remedial efforts designed to ensure students can adapt and transition to high school with minimal challenges

ECIs and Grade One Registration

The usual ECIs and Grade One Registration process has also been disrupted due to the COVID-19 pandemic, Principals of ECIs and primary schools are therefore expected to develop a modified registration schedule in collaboration with the principals of the neighbouring Infant/Basic/Early Childhood Institutions.

- Registration should be facilitated up to the end of August 2020
- Schools with online student registration system may commence their registration process as scheduled, however make allowances for parents/students who do not have access to this facility

- Develop a flexible schedule to ensure registration is conducted in accordance with social/physical distancing guidelines consistent with the management of the COVID-19 pandemic.

The MoEYI is in discussion with its educational partners to assist all schools to digitally transform their administrative processes such as the annual registration process.

Tablets and Books Distribution

The Ministry in collaboration with eLearning Jamaica, is in the process of procuring 40,000 tablets to be distributed to PATH beneficiaries and other needy students on loan (to be returned by July 3, 2020)

- Tablets are to be made available to students who do not have access to online teaching and learning resources due to the lack of a device
- The list of beneficiaries is to be communicated to the Regional Director

Schools will be provided with the protocols to guide this process.

School Administrators are asked to note

- The procurement of textbook list has commenced
- There will be further communication on plans for distribution

The Ministry is also exploring the use of e-books at the secondary level. This will be implemented on a phased basis. Schools to participate in the pilot phase will be notified as soon as arrangements are finalized.

RESPONSIBILITIES OF SCHOOL ADMINISTRATIVE STAFF

Administrative Staff Protocol

To mitigate the risk of the spread of any communicable diseases including COVID-19, administrative staff should keep abreast of Ministry of Health and Wellness guidelines and updates to ensure that the administrative office is safe for all stakeholders.

Protocols

- Establish controlled entry to office spaces – no more than five persons in the office at any one time depending on the size of the office and the social/physical distancing guidelines.
- Ensure that a sanitization station is in place, visible, and supervised as best as possible.
- All persons entering the administrative office and school grounds must wear a mask!!
- Develop a routine schedule to clean and disinfect regularly touched surfaces within staffroom, offices, staff restrooms, cafeteria, and workstations.
- Discourage sharing of items that are difficult to disinfect eg. Office telephone, keyboards/computers.
- Ensure that offices are properly ventilated and there is increased circulation of natural/atmospheric air.
- Modify office space eg. Seating, desks, filing cabinets to 6 feet apart.
- Install physical barriers such as sneeze guards and partitions particularly in areas where it is difficult for individuals to remain at least 6 feet apart eg. Reception desk.
- Provide proper signage with extra directions to prevent the spread of the virus.
- Wash hands with soap after handling documents, money and other office implements.
- Clean and disinfect frequently touched objects and surfaces after each client
- Staff members once sick should remain at home
- Under the guidance of the Principal, review services being offered from the administrative offices to minimize the requirement of having face to face interaction. Incorporate online services where possible.

RESPONSIBILITIES OF THE MOEY&I

The MoEYI will be responsible for providing overall support for the reopening of education institutions. This will include: -

- establishing standards and guidelines for the safe reopening and operation of all education institutions including sanitization practices and social distancing requirements
- making standards and guidelines available to the system
- organizing for the deep cleaning of public school plants and providing oversight as necessary in independent schools
- reviewing all school hygiene/sanitization plans
- assessing the adequacy of support staff in education institutions in an effort to ensure that they are adequately staffed to maintain sanitization routines
- providing additional staff where deemed necessary in order to ensure full implementation of sanitization plans
- providing the necessary resources needed to support remote learning in public schools. This will include providing capacity building support for principals and teachers to support remote learning in any possible future rounds of school closures and providing as necessary, basic supplies including no-touch digital thermometers and support for additional cleaning supplies for schools
- ensuring that the needs of all learners, including those with special needs are catered to
- increasing stakeholder awareness of COVID - 19 and the practices which are designed to reduce spread through a robust public education campaign
- Special engagements of parents and Parent Teacher's Association done to ensure agreement and support of measures instituted.
- increasing mental health and psychosocial support services that address stigmatization/discrimination of staff, students and their families in coping with the continued uncertainties of the pandemic.

RESPONSIBILITIES OF PARENTS

The safe reopening of education institutions will require the commitment and support of all stakeholders. Parents will therefore have a critical part to play in the process. Parents should therefore be encouraged to:

- Monitor the health of their child(ren) and keep them home from school if they are ill
- Teach and model good hygiene practices for their children including:
    - Washing hands with soap and safe water frequently.
    - Using a sanitizer (at least 60% alcohol) if soap and water are not readily available
    - Wash hands with soap and water, if visibly dirty
    - providing children with drinking water and hand sanitizers to take to school (hand sanitizers should not be given to infants; parents/guardians may give same to teachers for safe keeping and supervised use)
    - Ensure that safe drinking water is available, and toilets or latrines are clean at home
    - Ensure waste is safely collected, stored and disposed of
    - Cough and sneeze into a tissue or your elbow and avoid touching your face, eyes, mouth, nose
- Encourage children to ask questions and express their feelings. Parents are to be reminded that their children may have different reactions to stress. They must therefore be encouraged to be patient and understanding.
- Remind students to be considerate of others
- Communicate accurate information in order to prevent discriminatory behaviours and stigmas
- Support parent - teacher communities so there can be coordinated communication of information designed to enhance safety efforts
- Maintain contact with teachers so they are aware of classroom assignments and activities which can be undertaken at home
- Have alternate childcare arrangements in place in the event a temporary closure of school is required

- Negotiate with employers on the matter of Sick Leave and telework options in case they will need to remain at home with their children
- Parents should ensure that arrangements are made with authorized transportation service providers who are expected to follow the guidelines laid down by the Ministry of Health and Wellness as well as the Ministry of Transport and Mining.

PART II – RELATED DOCUMENTS

COVID-19 Preparedness and Response Infection Prevention and Control (IPC) Guidance for Schools

COVID-19 Preparedness and Response
Infection Prevention and Control (IPC) Guidance for Schools

INTRODUCTION

Recent review of COVID-19 in children suggest that children are less often reported as cases than adults, and that the infection generally causes mild disease.

Serious illness due to COVID-19 is seen infrequently in children, although there have been rare cases of critical illness.

To date, there have been few educational institutions involved in COVID-19 outbreaks, but from these studies, it appears that disease transmission was primarily related to social events linked to school or university life rather than transmission within classrooms.

The main mode of transmission for SAR-COV2 virus from human to human is via Droplets and Contact. Droplets can land in the mouths, noses, or eyes of people who are nearby or possibly be inhaled into the lungs of those within close proximity.

Based on this data **Physical distancing, Hand Hygiene and proper cough/sneeze etiquette** are critical components in breaking the chain of transmission especially in closed settings like schools.

The decision to close, partially close or reopen schools should be guided by a **risk-based approach** to maximize the educational and health benefit for students, teachers, staff, and the wider community, and help prevent a new outbreak of COVID-19 in the community.

The Ministry of Education, Youth and Information must ready sufficient human and economic resources available to ensure that the operators, staff and students can easily comply with infection prevention and control practises for COVID-19.

GENERAL REQUIREMENTS

The following general requirements are applicable to all Schools. All staff and students must adhere to the following:

- Adopt a responsible attitude to address the health threat of COVID-19.
- Devise a mechanism of communication between management and staff in order to facilitate procedure change.

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- Ensure proper ventilation of spaces, cleaning and disinfection of contaminated items/surfaces
- Ensure safe water and waste management

Key Actions

ADVICE TO MANAGEMENT
• Check frequently for updates from Ministry of Health & Wellness (moh.gov.jm) and Ministry of Education, Youth and Information. • Offer weekly updates on these as the pandemic evolves. • Train staff through internal briefings on the MOHW guidelines to control the spread of COVID-19 e.g. hand and respiratory hygiene, cleaning and sanitization. • Provide your staff and students with brochures and other educational material with information on COVID-19 • Encourage staff to do self-assessment for signs and symptoms of COVID-19, report and stay home when these are present. Advise all staff and students who have respiratory symptoms to stay home. • Install posters/ signage at strategic points in the establishment on the signs and symptoms of COVID-19. • Provide all facilities with alcohol-based hand sanitizer that contains 62% and above alcohol, specially located at the entries to the facility. • Ensure sufficient provision of safe water for drinking, personal hygiene, cleaning and sanitation. • Ensure the safe collection and disposal of waste. • Implement regular cleaning of all surfaces and areas that are commonly touched by client and staff. • Identify a safety officer to offer guidance, monitoring and support for infection prevention and control practices. • Consider daily screening for body temperature, and history of fever or feeling feverish in the previous 24 hours, **on entry into the building** for all staff, students and visitors to identify persons who are sick. • Ensure that school entry immunization checks are in place. Check vaccination status for outbreak-prone vaccine-preventable diseases (e.g. measles) and remind parents of the importance of ensuring their children are up to date with all eligible vaccinations.
MANAGEMENT OF PERSONS WHO ARE ILL
• Persons should stay home if they are ill • Practise good respiratory etiquette by covering mouth and nose with bent elbow or tissue when coughing or sneezing. Avoid touching eyes, nose, and mouth. • Thoroughly sanitize hand with an alcohol-based hand rub or washing them with soap and water.

- Students who record temperatures above 37.5 degrees Celsius or 99.5 degrees Fahrenheit should be sent to the school nurse for review of temperature and symptoms. If coughing, the student should be offered a surgical/medical mask on entrance to sick bay.
- Staff who record temperatures above 37.5 degrees Celsius or 99.5 degrees Fahrenheit will required to advise the HR department and visit the nearest health centre for review of abnormal temperature readings and symptoms.
- School nurse should utilize a surgical mask, gloves when preforming assessment of all ill persons. Hand sanitization should be performed prior to and after handling each person.
- Report all suspected cases of COVID-19 via telephone to the Parish Health Department. Maintain student/ staff confidentiality and treat all with respect.
- Ensure students who have been in contact with a COVID-19 case stay home for 14 days. The school officials should notify public health authorities in case of a positive COVID-19 case.

RESPIRATORY HYGEINE

- **Practise social distancing which includes refraining from hugging, kissing, or shaking hands with guests as well as among staff. It involves maintaining a distance of at least 2 m (6 ft).**
- Encourage staff and students to wear a suitable face covering **when social spacing is less than 3 feet apart.**
- Students may **only** be allowed to remove face coverings in a controlled classroom setting where physical distancing is 6 feet and general social interaction and movement is restricted.
- Staff can remove their face covering during active teaching if the physical distancing of 6ft is maintained.
- Display posters promoting proper cough and sneeze etiquette.

CLEANING, DISINFECTION AND SANITIZING

- Increase the frequency of scheduled cleaning for the establishment.
- Develop a schedule that allows for cleaning throughout the day with a thorough deep clean at the end of the school day when the facility is empty. Utilize a checklist to identify critical and frequently touched surfaces (railings, lunch tables, sports equipment, door and window handles, toys, teaching and learning aids, etc.) to guide cleaning. Where possible doors should be left open to reduce the need to touch handles.
- Clean with water and soap or detergent and use bleach 0.1% for disinfection or general areas.
- High touch surfaces can be disinfected using a liquid alcohol preparation of 62% and above.
- Wash, rinse, and sanitize food contact surfaces, food preparation surfaces, and beverage equipment after use.
- Use disposable, single serving condiments, and no-touch doors and covered foot operated trash cans.
- Reusable utensils, linen or clothing should be washed after each use.

- To disinfect surfaces several products can be used, however, these products **should not be mixed.**
- All chemicals require adequate handling and should be manipulated according to the label indications.
- Cleaning staff should be trained on the use of and provided with personal protection equipment as listed below: Gloves, Disposable gowns, Closed shoes. If doing procedures that generate splashes (e.g. while washing surfaces), add facial protection with a face shield and impermeable aprons.

PHYSICAL DISTANCING

- Non-contact greetings should also be advised.
- **Organize multiple entry points to the school compound.**
- Increase desk spacing (2 metre between desks), stagger recesses/breaks and lunch breaks (if difficult, one alternative is to have lunch at desk)
- Provide outdoor seating for lunch rooms where possible
- Limit the number of staff in shared spaces such as offices and teachers' lounges to maintain at least six feet separation**.**
- Install physical barriers, and partitions at cash registers and other areas where maintaining physical distance of six feet is difficult.

HAND HYGIENE

- Display posters promoting proper hand hygiene.
- Facilitate hand washing by increasing the free availability of hand washing stations with soap and water.
- Hands should be washed or sanitized before eating, before and after preparing food and after touching or handling contaminated items or surfaces. Hand washing is **mandatory** at these critical points.
- Hand sanitize after touching common items such as such pens, headphones, pins, cell phones and door handles.
- Regular checks should be carried out to ensure the proper functioning of soap and disinfectant solution dispensers, disposable tissue dispensers, and other similar devices. Defective units should be rapidly repaired or replaced.
- Installing units to dispense disinfectant gel in the different areas of the school compound especially areas accessed by members of the school population (e.g. entrance to the classrooms, lunch rooms, staff rooms, etc.).
- Persons serving food/lunch should perform personal hygiene (frequent regular hand washing, cough etiquette, etc.) as strictly as possible.

SAFE WATER AND WASTE MANAGEMENT

- Maintain the concentration of chlorine in water for consumption within the limits recommended by routine checks. Keep a log of all results.
- Waste is to secured in covered receptacles until removed from the establishment.

VENTILATION SYSTEMS

- Ensure that ventilation systems operate properly and increase circulation of outdoor air as much as possible by opening windows and doors.
- Facility must pursue the management and cleaning of A/C systems in relation to manufacturer guidelines.
- All rooms and common areas should be ventilated daily.

If you have further questions, please contact the
Ministry of Health and Wellness at (876) 542-5998 or (876) 542-6006-7
or the Parish Health Department

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Annex: Considerations for School-Related Public Health Measures in the context of COVID-19

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Preparedness and Response to COVID-19 Case Management in Schools

PREPAREDNESS AND RESPONSE TO COVID-19 CASE MANAGEMENT IN SCHOOLS

INTRODUCTION

On January 30, 2020 an outbreak of Novel Coronavirus 2019 was declared a Public Health Emergency of International Concern (PHEIC). Jamaica identified its first case on March 10, 2020 and on March 11 the outbreak was designated a pandemic. The disease has been named COVID-19 (**CO**rona**VI**rus **D**isease of 20**19),** and the causative agent **SARS CoV-2.** Jamaica has confirmed more than 550 persons with COVIV-19 and of that 106 children between 0-19 years accounting for approximately 19% of cases.

Epidemiologic evidence proves that transmission mainly occurs from symptomatic people to others by close contact through respiratory droplets (mainly through sneeze or cough), by direct contact with infected persons, or by contact with contaminated objects and surfaces. The virus is inhaled directly or the person's hands come in contact with the face, the virus enters the respiratory tract Most persons will have a mild illness manifesting symptoms such as fever, muscle aches, headaches, mild cough, fatigue. As the disease progresses, shortness of breath, dizziness or fainting may occur. The virus may also affect the gastrointestinal tract resulting in vomiting, abdominal pain and diarrhoea.

Some persons such as the elderly, children and immunocompromised may not present with typical symptoms. They may display other symptoms such as loss of appetite, loss of smell, loss of taste and loss of energy to engage in usual activities. Some persons may even present with confusion.

The clinical course varies significantly among persons but generally, children, while able to transmit the virus quite effectively tend to have mild illness. Generally, 40% of the population will have mild illness, 40% moderate illness, 15% severe illness and 5% critical illness.

Persons more at risk of progression to severe illness include: those with chronic diseases especially hypertension, diabetes mellitus, stroke, asthma, chronic

obstructive airway disease (COPD), chronic kidney disease; the elderly, immunosuppressed through disease or drug therapy.

The virus is easily transmitted and the measures taken to minimise the potential impact of the spread of the disease through the population, include Infection Prevention and Control (IPC) measures against contact and droplet transmission; as well as the early identification and isolation of potential cases; in addition to identifying those who are more vulnerable to more severe disease and protecting them while providing for them a closer degree of monitoring to facilitate timely intervention where needed.

It is necessary to state that considerations are being given to both the student and staff population within the school environment as measures being taken must address both populations.

Case Management will pivot around the following tenets:

1. IDENTIFY (Potential cases and those at greater risk of severe disease)
2. ISOLATE (Provide source control through mask and place suspected case away from others)
3. INTERVENE (Provide symptomatic support, stabilise and send off as appropriate)
4. INFORM (There must be internal dialogue as well communication with the health department, family members (as allowed) , and the Ministry of Health and Wellness through notifications provided by the Parish Health Departments.

The approach to managing cases in school will occur in phases:

1. Preparation to Care
2. Prevention of Disease Spread in School
3. Provision of Care
4. Post Care

I. HOW DO WE PREPARE?

1. Create clear policies
    a. STAY AT HOME if ILL POLICY: Persons should stay home if ill. They should inform the school by contacting the named administrator.
    b. SCREENING POLICY. Persons will be screened with a no touch thermometer in an effort to identify persons who may be ill.
    c. NEEDS TO BE SENT HOME POLICY. Persons deemed having a fever or possible suspect of COVID-19 may be sent home at the discretion of the principal.
    d. RETURN TO SCHOOL POLICY: Person will be allowed to return to school when deemed appropriate by the health team or health care provider.
    e. WEARING OF MASK POLICY should be instituted.
2. Get information on the local epidemiology: know which communities are affected. This allows the administration at schools to have a higher index of suspicion, and earlier identification of cases. This information can be had from the local health department or MOHW.
3. Ensure the students, parents and staff are aware of any plans the school has made. Circulate before school starts
4. Understand the persons at risk for more severe disease. Get a line list of those persons:
    a. Elderly >65 years
    b. Chronic Illness Adults: Hypertension, Diabetes Mellitus, Obesity, Chronic Obstructive Airway Disease
    c. Chronic Illness children and adolescents: Asthma, Sickle Cell Diseases, Cancers
    d. Immunosuppressed by Disease or medications
5. Get the sick bays ready: Identify a well ventilated sick bay or school nurse station with preferably 2 isolation or holding beds which are suitably spaced according to IPC protocol
6. Procure sick bay needs - adequate supplies of IPC material and hand washing stations.
7. Procure dedicated equipment for taking vital signs: Blood pressure instrument (Digital with 2 cuff sizes is appropriate), pulse oximeter, thermometer

8. Procure PPE (Personal protective equipment) such as gloves, surgical/medical masks, impervious gowns, face shields
9. Procure Sundries: Cleaning material, sanitising material to be used after cases enter the sick bay and for regular cleaning
10. Recruit or redeploy staff: Adequately trained nursing staff with additional support staff
11. Determine, Design and Document: Clear pathways of care
12. Communication links clearly drawn up, i.e., telephone numbers for health departments, nearby hospital, nearby private doctors

II. HOW DO WE PREVENT ENTRY AND SPREAD OF DISEASE IN SCHOOL?

1. SCREENING

This involves the use of thermometers at entry points within the school, the following are a few best practices (A more expanded list is attached as an appendix).

a. The gate should not be blocked by persons waiting to be screened
b. Thermometers should be acquired which have instructions for use and maintenance and will be no touch thermometers
c. Recommendation is that multiple thermometers be acquired to allow for replacement in the event of failure or surges of persons.
d. Temperature check is performed with relative privacy with confidentiality of the results
e. Students who record temperatures above 37.5 degrees Celsius or 99.5 degrees Fahrenheit should be sent to the school nurse for review of temperature and symptoms. If coughing, the student should be offered a surgical mask on entrance to sick bay.
f. Staff who record temperatures above 37.5 degrees Celsius or 99.5 degrees Fahrenheit should be sent home, will required to advise the HR and visit the nearest health centre for review of abnormal temperature readings and symptoms.

2. WEARING OF MASK

a. There has been a national recommendation supporting the wearing of mask in public spaces. The recommendation is that the same recommendation be applied to persons in school.

b. Masks should be cloth masks, could be provided by schools if possible for uniformity
c. Students and staff should be educated on the wearing of masks
d. Students and staff should be educated on the washing of masks
e. Masks should be kept in a clean pouch when not in use.
f. Students should be able to be without mask during the exam or when seated in an appropriately spaced classroom.
g. Teachers and staff members should also wear masks

3. FACILITATE DISCONTUATION OF TRANSMISSION

a. Place hand washing and hand sanitization stations appropriately for easy access
b. Adhere to IPC measures
c. Minimise congregation

III. HOW DO WE PROVIDE CARE?

1. Student/ Staff may self present.
2. Student /staff may be identified by thermometer
3. The affected person attends the sick bay.
4. They receive a medical mask and remove the cloth mask
5. The person is isolated
6. A history is taken to determine likelihood of having COVID-19
7. A history, exam and vital signs are taken to determine the likely severity of the clinical presentation
8. The instruments used are kept sanitised before and after use.
9. Linen is exchanged; disposables are suitably separated for disposal
10. Treatment is symptomatic i.e.
    a. A minimum stock of OTC drugs should be kept at the school
    b. Fluids in sips are given according to symptoms
    c. Medicine for pain and fever (paracetamol recommended) are administered
    d. Antihistamine/cold syrup given as per allowed by school nurse policy
    e. Patient is allowed to rest a bit if fatigued
    f. Hand hygiene is observed
    g. Cough etiquette is adhered to

11. Disposition is individualised:
    a. Staff/Student is sent home if stable, not dehydrated, vital signs within normal limits, is tolerating fluids
    b. Staff/Student is treated emergently with referral to hospital and transfer to hospital via ambulance or other vehicle
    c. Staff/Student is referred to the health centre / GP on the advice of the health department
    d. Staff/Student is advised on how to remain isolated
12. The sick bay is sanitised after the affected person is seen
13. The nurse must thoroughly wash hands within the IPC protocol
14. The ill person is advised to contact the school by phone to update on status and await clearance by the health personnel before return

IV. POST CARE

During and after the period of illness, there are many points at which the need for psychosocial support is strong.

1. Persons who have been affected by COVID-19 should be identified and the necessary psychosocial support provided. Various points of vulnerability will include:
    a. Fear of death from illness
    b. Fear of hospitalisation /isolation
    c. Fear of stigmatisation and assault by community
    d. Fear of abandonment
    e. Fear of financial fallout from social disruption
    f. Fear of dislocation from the social disruption

Footnote:

- *There are many brochures and resources available through the MOHW which speak to the very many areas.*
- *These should be made available to both staff and students.*
- *There is also the 24 Hour Mental Health Helpline which is very accessible and useful in this time -* ***1-888-NEW LIFE.***

Public Health Inspection Checklist for Workplaces, Public Facilities/Spaces – COVID-19

Public Health Inspection Checklist for Workplaces, Public Facilities /Spaces – COVID-19

Name of Facility: _____

Address of Facility: _____

Contact Information: _____

Assessment Date: _____

Name of Person conducting the Assessment: _____

Status of Facility: Satisfactory ☐ Unsatisfactory ☐

Action Taken: Verbal Order ☐ Work Plan ☐ No Action ☐

No.	Compliance Items	Observed		Remarks
		Yes	No	
Hand Hygiene				
1.	Hand Hygiene policy in place (documented or otherwise)			
2.	Hand washing or hand sanitization station at the entrance to the building • System in place to ensure same is utilized			
3.	Posters or signs promoting hand hygiene posted at prominent areas in the facility			Non critical
4.	Handwashing station (s) equipped with running water, liquid soap and disposable (paper) towels and hands - free garbage bin (bathrooms, food preparation areas and other areas where same is required)			
5.	Hand sanitizer dispenser(s) labelled and contain at 62 - 70% alcohol			
6.	Additional supplies available for hand hygiene stations			
Respiratory Hygiene				
7.	Posters or signs promoting respiratory hygiene posted at prominent areas in the facility			Non critical
8.	Employees and customers/clients required to wear appropriate face masks.			
9.	Additional face masks and paper tissues are available at the workplace (for those who develop a runny nose or cough at work, along with hands-free covered bins for hygienic disposal)			
Social/Physical Distancing				
10.	Measures in place for the maintenance of the two (2) meters (6 feet) distancing between staff as well as customers.			
11.	Queue management at external access points (signs, tape marks, or other visual cues such as decals or coloured tape on the floor, placed 6 feet apart, to indicate where to stand when physical barriers are not possible)			
12.	Reduced density of people in the building (no more than 1 person every 40 square feet)			

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No.	Compliance Items	Observed		Remarks
		Yes	No	
13.	Limit access to or close common areas where employees/customers/clients are likely to congregate and interact (limited or no seating)			
Cleaning and Disinfection				
14.	Documented cleaning schedule and guidelines in place (whether done in house or contracted) (for very small facilities, schedule may not be in place but knowledge of the cleaning process should be evident)			
15.	Facility cleaned and disinfected at least twice daily			
16.	High touch areas cleaned and disinfected at least every 2 hours (including door knobs, door handles, light switches, kitchen and food preparation areas, bathroom surfaces, toilets and taps)			
17.	Cleaning and disinfection done according to MOHW guidelines or as outlined in the Material Safety Data Sheet (MSDS).			
18.	Adequate quantities of cleaning and disinfection materials in stock			
General Considerations for Employees				
19.	Mask etiquette measures in place for employees as per MOHW guidelines			
20.	Written 'stay at home policy' for sick workers as well as a reporting system when workers are experiencing signs and symptoms of COVID-19 (where applicable).			
21.	Stay at home policy extended to employees with sick family members with COVID-19 (where applicable).			Non critical
22.	Policy in place to treat with employees who present with COVID-19 symptoms and same is in line with the MOHW guidelines (where applicable).			
General Sanitation and Hygiene				
23.	Compound maintained in a clean and sanitary manner			
24.	Safe water supply available for use			
25.	Adequate quantity of water based on your water requirements			
Risk communication, training, and education				
26.	Posters, videos, or electronic message boards in place to increase awareness of COVID-19			Non critical
27.	Regular information sharing about the risk of COVID-19 with employees using official sources, such as MOHW and PAHO/WHO			Non critical
Ventilation				
28.	Natural ventilation utilized where feasible			
29.	Maintenance programme in place for the ventilation system Maintenance schedule seen			
30.	Ventilation system conform to the MOHW guidelines			Non critical
General				
31.	All other COVID-19 prevention measures in place as is required for this type of business/facility (including those outlined in the MOHW guidelines and the specific requirements under the Disaster Risk Management Act of May 11, 2020)			

Self-assessment Checklist for Schools – COVID-19

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Self-assessment Checklist for Schools – COVID-19

Name of School: _____

Address of School and Contact Information: _____

Name of Principal: _____

Assessment Date: _____

Name and Position of Person conducting the Assessment: _____

No.	Compliance Question	Response		Remarks
		Yes	No	
Hand Hygiene				
1.	Do you have systems in place to ensure hand washing or hand sanitization is done by all persons entering the facility?			
	a. Is your handwashing station always equipped with running water, liquid soap, disposable (paper) towels and hands-free bin?			
	b. Are your hand sanitizer dispenser labelled and contain at least 62 - 70% alcohol?			
	c. Do you have adequate quantities hand hygiene materials in stock? (liquid soap, hand sanitizer, paper towel)			
	d. Are posters promoting hand hygiene posted at prominent areas in the facility?			
2.	Do you have equipped hand washing facilities in bathrooms, food handling areas, sick bay and other areas where same is required?			
Respiratory Hygiene				
3.	Do you promote respiratory etiquette by all students and staff at the school?			
4.	Are staff members, students and visitors required to wear appropriate face masks? (as is feasible)			
5.	Do you ensure that face masks and paper tissues are available at the for those who develop a runny nose or cough at school, Do you have hands-free covered bins for hygienic disposal?			
Social/Physical Distancing				
6.	Are there measures in place for the maintenance of the two (2) meters (6 feet) distancing between students as well as teachers and other staff members?			
	a. Is there strict control over external access and queue management (signs, tape marks, or other visual cues such as decals or coloured tape on the			

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No.	Compliance Question	Response		Remarks
		Yes	No	
	floor, placed 6 feet apart, to indicate where to stand when physical barriers are not possible)?			
	b. Is there reduced density of people in common areas to include cafeteria, dining areas, assembly halls (no more than 1 person every 40 square feet)?			
	c. Have you allowed controlled limited access to, or closed common areas where students and staff are likely to congregate and interact?			
Cleaning and Disinfection				
7.	Do you have a documented cleaning and disinfection protocol and cleaning schedule?			
8.	How often do you clean and disinfect your facility?			
9.	How often do you clean and disinfect high touch areas? (to include door knobs, learning aides, food serving and preparation areas, rails, bathroom surfaces, toilets and taps,)			
10.	Are multi-use devices assigned; properly cleaned and disinfected after use by students/staff? *(example keyboards, desks, laboratory equipment)*			
11.	Is cleaning and disinfection done according to MOHW guidelines?			
12.	Do you have adequate quantities of cleaning and disinfection materials in stock?			
13.	If cleaning and disinfection services are contracted, do you have the cleaning and disinfection protocols utilized? • Is this activity conducted as outlined in the protocol?			
General Considerations for Staff and Students				
14.	Are MOHW mask etiquette measures in place for students and staff?			
15.	Are temperatures checks done and deviations recorded for all persons who enter the school compound?			
16.	Are there procedures in place for individuals with elevated temperature?			
17.	Do you have a documented stay- at- home policy for students and staff?			
18.	Do students and staff report any signs and symptoms to school administration, while proceeding to stay at home?			
19.	Are students and staff with sick family members with COVID-19 required to report the situation and stay at home?			
20.	Do you have a policy to treat with that is in line with the MOHW guidelines?			
21.	Do you have up-to-date records of students and staff who present with COVID-19 symptoms?			
22.	Do you have a suitable room identified and equipped for the temporary isolation of students and staff who present with COVID-19 symptoms? (in line with the MOHW guidelines)			

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No.	Compliance Question	Response		Remarks
		Yes	No	
General Sanitation and Hygiene				
23.	Is your compound maintained in a clean and sanitary manner?			
24.	Do you have a safe water supply?			
25.	Do you have adequate quantity of water?			
26.	If water is trucked, do you have related documentation?			
	a. Do you conduct daily Chlorine residual checks and record same?			
	b. Do you have instructions and materials in place for water treatment if the Chlorine residual readings are unacceptable?			
Risk communication, training, and education				
27.	Are there posters, and other means in place to increase awareness of COVID-19?			
28.	Do you provide regular information about the risk of COVID-19 to the staff and students using official sources, such as MOHW and PAHO/WHO?			
Ventilation				
29.	Do you utilize natural ventilation where feasible?			
30.	Do you have a maintenance system in place for the ventilation system?			
31.	Does the ventilation system conform to the MOHW guidelines?			
Transportation				
32.	Is there a log of all staff members and students transported on school bus for each trip?			
33.	Is there a log of all students or staff transported to a healthcare facility?			
34.	Are the MOHW procedures and guidelines for cleaning and disinfection of vehicles observed?			
General				
35.	Are all other COVID-19 prevention measures in place as is required for your facility? (including those outlined in the MOHW guidelines and the specific requirements under the Disaster Risk Management Act of May 11, 2020)			

Environmental Health Interim Guidelines and Procedures for the Reopening of Public Facilities/Spaces for COVID-19

Environmental Health Interim Guidelines and Procedures for the Reopening of Public Facilities /Spaces for COVID-19

Introduction

A Public Health Emergency of International Concern (PHEIC) was declared for the outbreak of novel coronavirus (2019-nCoV) / COVID-19 on 30 January 2020 by World Health Organization (WHO) Director General (DG) based on the number of persons affected. On the 11th March, 2020 – WHO declared COVID-19 a pandemic.

Jamaica confirmed its first case of COVID-19 on March 10, 2020. The Government of Jamaica has mounted an intense prevention and control programme for the outbreak. Prevention and containment is a key strategy to minimize the impact on Jamaica's labour force. The Ministry of Health & Wellness (MOHW) is providing the following information to guide employers in support of this strategy.

When someone who has COVID-19 coughs or sneezes, they release droplets of infected fluid, which in most cases fall on nearby surfaces and objects - such as desks, tables, telephones etc. Persons can become infected with COVID-19 by coming into contact with these contaminated surfaces or objects – and then touching their eyes, nose or mouth.

Where persons are standing within two meters (6 feet) of an infected person, the infected individual can transmit the disease by droplets expelled through coughing, sneezing or exhalation.

The risk of spread and exposure to COVID-19 can be reduced through:

- regular cleaning and disinfection,
- hand and respiratory hygiene,
- physical distancing,

- effective risk communication,
- training and education,
- management of people with COVID-19 or their contacts

Background

In response to COVID-19, countries across the globe (including Jamaica) have implemented a range of public health and social measures, including movement restrictions, partial closure or closure of schools and businesses, quarantine in specific geographic areas and international travel restrictions. As the local epidemiology of the disease changes, the measures identified may be loosened or reinstated as deemed necessary. As transmission intensity declines, some countries will begin to gradually re-open workplaces to maintain economic activity. This requires establishing protective measures, including directives and capacity to promote and enable standard COVID-19 prevention in terms of physical distancing, hand washing, respiratory etiquette as well as monitoring compliance with these measures.

Careful planning is therefore required to reopen businesses and relevant public facilities. This includes the identification of risks, and the introduction of all measures necessary to mitigate the ill-effects of poorly phased or complete opening.

Every Jamaican (including citizen, employees, and employers) will therefore be called upon to do their part to slow the spread of the virus through social distancing and infection prevention and control practices, as well as the proper wearing of face masks or face coverings. Strict adherence to these measures will contribute to the safety of communities, allowing for the reopening.

Scope of the document

This guideline document is to be used as a basis for decision-making by owners and/or operators of public establishments / facilities, namely:

i educational institutions,
ii recreational facilities,
iii bars,
iv places of amusement,
v Ministries, Departments and Agencies (MDAs),
vi Faith-based Organizations (churches, synagogues, mosques, temples, etc.),
vii food establishments,
viii manufacturing and processing plants (e.g., chemical manufacturing, concrete and concrete products, food processing, printing industry, wood product industry),
ix Points of Entry – Authorized Air and Seaports
x Health clinics (Food Handlers' Training)
xi Beauty salons, barbers and cosmetology groups

In addition, this MOHW guideline document will provide the general requirements for each type of establishment / facility/ entity/ business, to ensure the health and safety of all workers / patrons / visitors / users. An outline of the environmental / public health requirements to reduce the risk of transmission or exposure to SARS-CoV-2 virus (COVID-19) is also contained in this document.

1. General Considerations for all categories of Establishments / Facilities

A. Conduct Workplace Risk Assessment

COVID-19 is transmitted primarily through respiratory droplets or contact with contaminated surfaces. Work-related exposure can occur anytime at the workplace, during work-related travel to an area with local community transmission, as well as on the way to and from the workplace. The risk of work-related exposure to COVID-

19 depends on the probability of coming into close (less than 1 metre) or frequent contact with people who may be infected with COVID-19 and through contact with contaminated surfaces and objects. The following risk ranking may be useful in carrying out a workplace risk assessment for exposure to COVID-19 and planning for preventive measures in non-healthcare workplaces.

a) *Low exposure risk* – jobs or work tasks without frequent, close contact with the general public and other co-workers, visitors, clients or customers, or contractors, and that do not require contact with people known to be or suspected of being infected with COVID-19. Workers in this category have minimal occupational contact with the public and other co-workers.
b) *Medium exposure risk* – jobs or work tasks with close, frequent contact with the general public, or other co-workers, visitors, clients or customers, or contractors, but that do not require contact with people known to be or suspected of being infected with COVID-19 **OR** work tasks that require close and frequent contact between co-workers.
c) *High exposure risk* – jobs or work tasks with high potential for close contact with people who are known or suspected of having COVID-19, as well as contact with objects and surfaces possibly contaminated with the virus. Examples of such classification would be in instances where the transportation of persons known or suspected to have COVID-19 in enclosed vehicles without separation between the driver and the passenger, providing domestic services or home care for people with COVID-19.

B. Establish policies and practices for social distancing.

- Alter workspaces to allow workers and customers to maintain social distancing and physically separate employees from each other and from customers, when possible.

Strategies that can be employed at businesses:

- Implement flexible worksites (e.g., telework).
- Implement flexible work hours (e.g., rotate or stagger shifts to limit the number of employees in the workplace at the same time).

C. Create and Maintain Healthy Work Spaces / Environment

In creating and maintaining a healthy work space, the following considerations are to be implemented with the aim of improving the building ventilation system. This may include some or all of the following activities:

- Ensure ventilation systems operate properly and provide acceptable indoor air quality for the current occupancy level for each space.
- Increase outdoor air ventilation, using caution in highly polluted areas. With a lower occupancy level in the building, this increases the effective dilution ventilation per person.
- Improve central air filtration to the MERV-13 or the highest compatible with the filter rack, and seal edges of the filter to limit bypass.
- Check filters to ensure they are within service life and appropriately installed.
- Ensure the safety of your building's water system and devices after a prolonged shutdown.
- Give employees, customers, and visitors what they need to clean their hands and cover their coughs and sneezes.

- Perform routine cleaning as per the MOHW guidelines.
- Perform enhanced cleaning and disinfection after persons suspected / confirmed to have COVID-19 have been in the facility.
- Minimize risk to employees when planning meetings and gatherings.

2. General Considerations for Employees

Whilst the major responsibility of ensuring safe environments in which to reopen and operate business, is on the owners / operators, employees also impact the effectiveness of maintaining their safety and health and that of other patrons, users or visitors of the place of business. The following considerations are to be noted by employees:

- Report any signs and symptoms to supervisor, while proceeding to stay at home.
- Employees who are well, but have sick family members with COVID-19 are to also report the situation and stay at home.
- Keep informed or updated on developments of COVID-19, especially being aware that SARS-CoV-2 can be transmitted within work environments.
- Be compliant with the measures instituted by workplace policies:
    - Wearing appropriate face coverings (cloth masks) or face masks as per the risk and duties to be performed;
    - Maintaining social distancing (physical distancing);
    - Adhering to proper personal hygiene practices; sneeze or cough etiquette.
    - Adhering to the routine cleaning and disinfection measures as per MOHW guidelines (to include hand washing hygiene practices);
    - Avoid touching eyes and nose;

- Routine cleaning and disinfection of frequently touched surfaces based on MOHW guidelines;
- Avoid using co-workers' personal devices, office spaces, work tools and equipment
- Following the MOHW Occupational Safety and Health as well as Infection Prevention and Control procedures,
- Avoid exposing others to health and safety risks,
- Participate in related training provided by the employer,
- Report to supervisors any situation which is reasonable justification to prevent an imminent and serious danger to other workers' health or life.

3. General Preventive Measures / Requirements

The following preventive measures / requirements are universal for preventing transmission of COVID-19 and applies to all workplaces and all people at the workplace, such as employers, managers, workers, contractors, customers and visitors. They should be implemented and maintained:

A. Hand hygiene

i Regular and thorough hand hygiene by handwashing with soap and water, or with alcohol-based hand-rub (containing at least 62% alcohol) before entering the building or office, before starting to work, before eating, frequently during the work shift, especially after contact with co-workers or customers, after going to the bathroom, after contact with secretions, excretions and body fluids, after contact with potentially contaminated objects (gloves, clothing, masks, used tissues, waste), and immediately after removing gloves and other protective equipment but before touching eyes, nose, or mouth. •

ii Hand hygiene stations, such as hand washing and hand rub dispensers, should be placed in strategic locations throughout the workplace and accessible to all staff, contractors, clients or customers, and visitors

iii Appropriate communication materials to promote hand hygiene should be posted in prominent places.

B. Respiratory hygiene

i Promote respiratory etiquette by all people at the workplace. Ensure that face masks and paper tissues are available at the workplace, for those who develop a runny nose or cough at work, along with no-touch covered or foot operated bins for hygienic disposal.

ii Develop a policy on wearing a mask or a face covering in line with *The Disaster and Preparedness and Emergency Management Act, 2015*.

C. Physical/Social distancing

i Introduce measures to keep a distance of at least 2 metres between people and avoid direct physical contact with other persons (i.e. hugging, touching, shaking hands). This should include strict control over external access and queue management. Use signs, tape marks, or other visual cues such as decals or coloured tape on the floor, placed 6 feet apart, to indicate where to stand when physical barriers are not possible.

ii Reduce density of people in the building (no more than 1 person every 20 square meters), physical spacing at least 2 meters apart for work stations and common spaces, such as entrances/exits, lifts, pantries/canteens, stairs, where congregation or queuing of employees or visitors/clients might occur.

iii Close or limit access to common areas where employees are likely to congregate and interact.

iv Minimize the need for physical meetings, e.g. by using teleconferencing facilities.

v Implement flexible meeting and travel options (e.g., postpone non-essential meetings or conduct them virtually).

vi Avoid crowding by staggering working hours to reduce congregation of employees at common spaces such as entrances or exits.

vii Implement or enhance shift or split-team arrangements, or teleworking.

viii Defer or suspend workplace events that involve close and prolonged contact among participants, including social gatherings.

ix Increase physical space between employees and customers (e.g., drive-through service, physical barriers such as partitions).

x Prohibit handshaking.

xi Deliver services remotely (e.g., phone, video, or web).

xii Adjust your business practices to reduce close contact with customers — for example, by providing drive-through service, click-and-collect online shopping, shop-by-phone, curb side pickup, and delivery options, where feasible.

xiii Move the electronic payment terminal / credit card reader farther away from the cashier, if possible, to increase the distance between the customer and the cashier.

xiv Shift primary stocking activities to off-peak or after hours, when possible, to reduce contact with customers.

D. Regular environmental cleaning and disinfection

Cleaning, using soap or a neutral detergent, water, and mechanical action (brushing, scrubbing) removes dirt, debris, and other materials from surfaces. After the cleaning process is completed, disinfection is used to inactivate (i.e. kill) pathogens and other microorganisms on surfaces.

i Selection of disinfectants should align to the MOHW Guideline on Cleaning and Disinfection (Appendix III);

ii High-touch surfaces should be identified for priority and periodic disinfection (commonly used areas, door and window handles, light switches, kitchen and food preparation areas, bathroom surfaces, toilets and taps, touchscreen

personal devices, personal computer keyboards, and work surfaces) as per MOHW Guidelines.

iii Disinfectant solutions must always be prepared and used according to the manufacturer's instructions, including instructions to protect the safety and health of support staff, use of personal protective equipment, and avoiding mixing different chemical disinfectants.

iv In indoor workplaces, routine application of disinfectants to environmental surfaces via spraying or fogging is generally not recommended because it is ineffective at removing contaminants outside of direct spray zones and can cause eye, respiratory, and skin irritation and other toxic effects.

E. Risk communication, training, and education

i Erect posters, videos, and electronic message boards to increase awareness of COVID-19 among workers and promote safe individual practices at the workplace.

ii Provide regular information about the risk of COVID-19 using official sources, such as MOHW and PAHO/WHO, and emphasize the effectiveness of adopting protective measures and counteracting rumours and misinformation.

NB. All facilities will be subjected to periodic audits and inspections to ensure compliance with the requisite requirements from the Local Health Department.

4. **Measures to be taken in Separating Sick Employees**

   Employees who appear to have symptoms (cough, shortness of breath, fever, chills, muscle pain, sore throat, new loss of taste and smell) upon arrival at work or who become sick during the day should be immediately separated from other employees, customers, visitors and be sent home.

   - ***Separation from other employees***
     - Identify a room that will be used as a sick bay / holding area. The sick bay should have at minimum an equipped hand-washing station or where not practicable, the provision of a hand-sanitizer station (equipped with the requisite alcohol content - 62% alcohol).
   - ***Sent home arrangement***
     - Since employees are presenting with COVID-19 symptoms, safe transportation measures are to form part of the contingency plans for handling sick employees whilst at work.

5. **Measures to be taken where an employee has tested positive for COVID-19 -** (see *Interim Guide for COVID-19, Recommendations for Infection Prevention and Control for Employers*)
   - Where an employee is confirmed to have COVID-19 infection, employers are to inform fellow employees of their possible exposure to COVID-19 in the workplace while maintaining confidentiality as required by the MOHW.
   - Deep cleaning and sanitization must be conducted within the facility and special attention made for those areas where the infected person(s) was stationed. This must be done in accordance with MOHW guidelines.
   - In the event that a large number of persons become infected, this may result in a site lock down.
   - Allow the MOHW to make formal announcements in the event a team member has tested positive of COVID-19.

6. Communication

a. Contact the Local Public Health Department to support in conduct health education sessions on proper respiratory etiquette, proper handwashing and personal hygiene practices (such as proper hand sanitization, social distancing and its importance).
b. Training must be confined to each group of employees.
c. Relevant health education pamphlets / posters are to be strategically placed throughout the center, providing tips and guidance to workers.
d. In an attempt to promote frequent and proper handwashing, display proper handwashing signs / posters throughout work space.
e. Encourage all staff members to practice the recommendations or guidelines of the MOHW to avoid contracting and spreading the disease.

7. Mask Etiquette

The MOHW advises the wearing of masks in public settings where other social distancing measures are difficult to maintain (e.g., grocery stores and pharmacies).

Medical masks (surgical masks or N-95 respirators) are critical supplies that must continue to be reserved for healthcare workers and other medical first responders. If masks are to be used within the facility, then cloth masks are recommended (see CDC recommendations for cloth masks).

When to use a mask

Masks should be worn in all public spaces at this time. In addition, the following should be noted:

- If you are healthy, you only need to wear a mask if you are taking care of a person with suspected COVID-19 infection.
- Wear a mask if you are ill, i.e., coughing or sneezing.

- Persons who are quarantined or isolated at home with or without respiratory symptoms
- Caregivers of persons who are quarantined or isolated and other members of the household;
- Persons who have had COVID-19 and have been discharged from hospital should wear a mask for two weeks; and
- Elderly and persons with chronic illnesses, who are at high risk, if infected, of developing severe illness and complications of illness. These persons must also avoid ill persons and minimize contact with the public.

Appropriate use of masks / facial coverings is essential to ensure their effective use and to reduce the risk of transmission associated with the incorrect use and cleaning of masks. Cloth masks should:

- fit snugly but comfortably against the side of the face
- be secured with ties or ear loops
- include multiple layers of fabric
- allow for breathing without restriction
- be able to be washed and dried without damage or change to shape

If you wear a mask, then you must know how to use it and dispose of it properly. The following information on the correct use of masks are derived from the practice in health-care settings. It is therefore expected that all staff employ the measures or steps listed below:

- Before putting on a mask, clean hands with alcohol-based hand rub or soap and water.
- Place mask carefully to cover mouth and nose and tie securely to minimize any gaps between the face and the mask;
- While in use, avoid touching the mask;

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- Remove the mask by using appropriate technique (i.e. do not touch the front but remove the lace from behind or using the ear loops);
- After removal or whenever you inadvertently touch a used mask, clean hands by using an alcohol-based hand rub or soap and water if visibly soiled
- Replace masks with a new clean, dry mask as soon as they become damp/humid;
- Do not re-use single-use masks;
- Discard single-use masks after each use and dispose of them immediately upon removal in a closed bin.

NB. *Masks are effective only when used in combination with frequent hand-cleaning with alcohol-based hand rub or soap and water.*

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APPENDIX I

- **Self- Assessment Decision- Tree Process to be used for Businesses/ Establishments/ Institutions/ Facilities in light of COVID-19: Reopening of Public Facilities**

The decision tree outlined below is a schematic flow of all the parameters that has to be place or be met before the operations can be approved or considered for reopening. The purpose of this tool is to assist businesses in making (re)opening decisions during the COVID-19 pandemic. Where any operator or owner answers ***NO*** to any of the item areas within the decision tree, reopening will need to be reconsidered or re-evaluated based on the ease of spread of the SARS-CoV-2 virus, and to protect the safety and health of all employees and customers.

Diagram 1: Decision-Tree for **Restaurants, Bars, Supermarkets and the like**

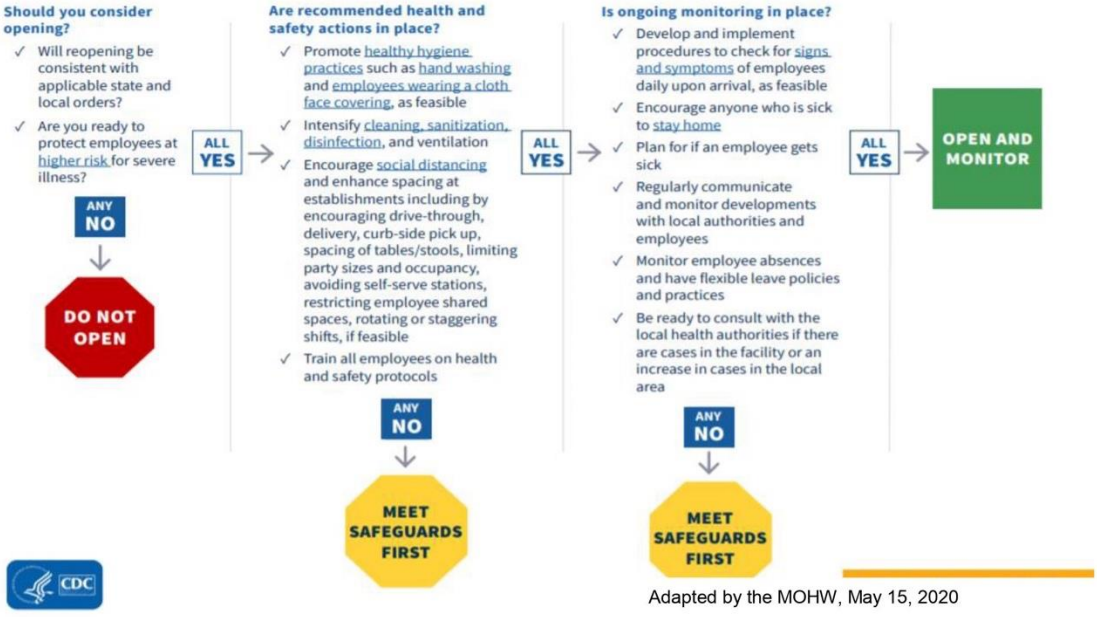

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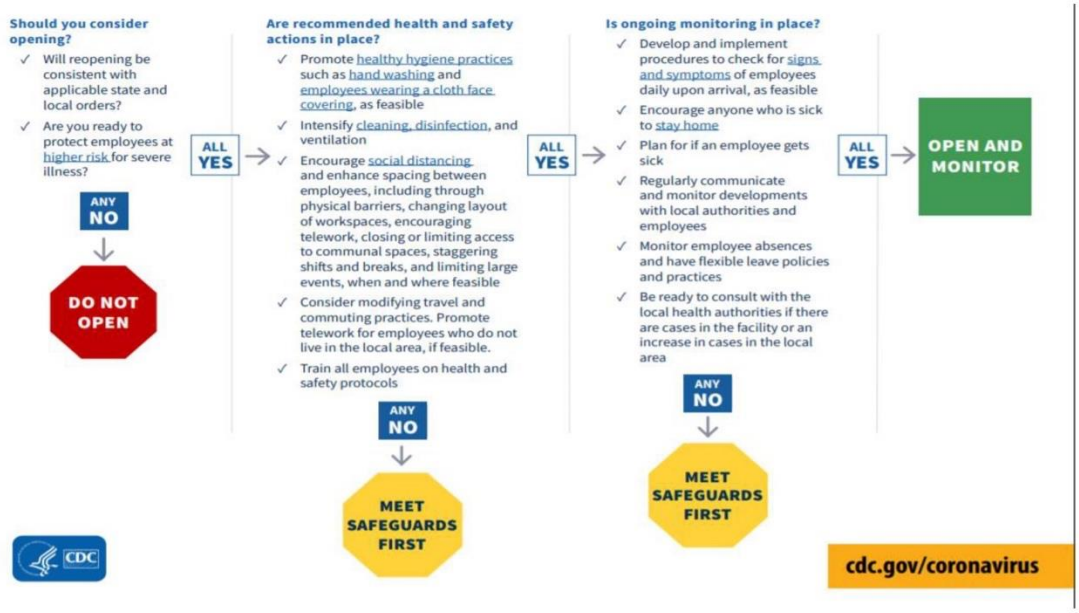
***Diagram 2: Decision-Tree for* Workplaces**



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Appendix II

Abbreviated Guideline Conditions for different Category of Establishment/ Facilities

Table 1 highlights below the general as well as special considerations (as deemed necessary) for the varying public facilities.

Establishment / Facility	Special Provision (in Addition to general requirements)	Remarks
Educational Institutions	▪ Staggered lunch hour and breaks ▪ Staggering opening and closing hours ▪ Limited sporting activity in keeping with the general COVID -19 principles ▪ Parent teacher's engagement conducted by class ▪ Crowd control barriers instituted	
Recreational facilities	• Maintain restrooms that remain open. Ensuring they have functional toilets, clean and disinfected surfaces and handwashing facilities and supplies; • Swimming pools to be properly cleaned and disinfected; • Limit the number of patrons to large events/ gatherings • Erect signs advising or recommending social distancing in popular sections of the parks • Erect signs promoting everyday preventive actions • Ensure that all park staff/ support staff are informed about COVID-19 and preventive actions.	
Bars (Taverns, clubs)	See the Decision-Tree in ***Diagram 1*** for considerations on deciding to reopen	

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Establishment / Facility	Special Provision (in Addition to general requirements)	Remarks
Places of Amusement	Conform to the general requirements, placing special emphasis on maximum number of persons allowed in any space and social/ physical distancing requirements	
Ministries, Department & Agencies (MDA's)	• All MDA's that interface with the public on a large-scale should provide walk-in service to both internal and external clients. • The use of tents should be considered • Where possible provide physical barriers, special floor/ground markings between clients and staff • Ensure the general requirements for COVID-19 prevention are in place.	
Faith-based Organizations (Churches, synagogues, mosques, temples)	✓ Worshippers sixty-five and over with underlying conditions should not attend church. ✓ Families should be encouraged to sit together whilst observing physical distancing and other personal protective measures ✓ No handshaking, group prayers or hugging should be allowed. ✓ No congregating should take place on the premises after services ✓ A team should be assigned to ensure all measures are adhered to. ✓ If microphones are used by multiple individuals, same should be sanitized between each use, using 70% alcohol.	Special provisions or considerations are to be made for cases when a congregant becomes or shows signs/ symptoms of COVID-19. Considerations could include but are not limited to: having ample supply of disposable face masks; arrange for transportation for persons (done in accordance to the MOHW guidelines); Church members with comorbidities that require them to stay home or are

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Establishment / Facility	Special Provision (in Addition to general requirements)	Remarks
		"shut-ins", care visits are to be contacted by telephone or other virtual means. Also, church-based institutions could make visits by assigning special members of the church board who have experience in IPC measures (that could be a practising nurse or doctor or other health care provider). Limit the number of persons that will make up that delegation for home visits whilst ensuring the general COVID-19 prevention measures are observed.
Food Establishment	✓ Dining taking into consideration the six feet physical distance ✓ Encourage pick-up services ✓ Discourage dining services unless the density of persons to building can be controlled and physical distancing achieved and maintained ✓ Encourage the use of out of door dining for patrons	

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Establishment / Facility	Special Provision (in Addition to general requirements)	Remarks
	✓ Avoid the use of self-serve stations ✓ Restrict employee shared spaces ✓ Limit or control the waiting period for diners at reservation booths ✓ Implement the use of scheduled dining for groups of persons within eatery ✓ Where large families are desirous of using the dining facilities, limit the number of members seated at a one table. Suggest the use of outside dining.	
Manufacturing and Processing Plants	✓ Occupational Health and Safety (OHS) requirements in place to facilitate proper ventilation ✓ Ensure that the hierarchy of controls (Administrative, Engineering & Personal Protective Equipment (PPE): ✓ Configure communal work environments so that workers are spaced at least 6 ft apart. ✓ Use physical barriers such as strip curtains, plexiglass or other impermeable dividers/ partitions to separate manufacturing workers from each other if possible ✓ Consult with HVAC engineer to ensure adequate ventilation is in work areas to help minimize worker's potential to exposures ✓ Discourage the use of pedestal fan or hard mounted fans which oscillate from one worker directly to another. Personal cooling fans should be removed from the workplace to reduce potential spread.	

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Establishment / Facility	Special Provision (in Addition to general requirements)	Remarks
	✓ For hand-washing requirements please see MOHW guideline documents ✓ Reduce crowding at clock in/out stations ✓ Rearrange chairs in breakrooms and other areas where workers may frequent ✓ Include adequate number of sanitizing stations ✓ Limit facility access only to essential workers. ✓ If meetings must be held, such as at shift changes, break them into smaller groups instead of holding a larger meeting. Eliminate non-essential meetings. ✓ Encourage single-file movement with a 6-foot distance between each worker through the facility, where possible. ✓ Designate workers to monitor and facilitate distancing on production or assembly line floors. ✓ Ensure that Good Manufacturing Practices (GMP's) are adhered to	
Points of entry	✓ Conform to the general requirements ✓ Conform to specific guidelines for points of entry	
Health Clinics (Food Handlers Training and for other suspended activities)	✓ Apply the similar measures as for Ministries, Department and Agencies requirements.	

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APPENDIX III

Guideline on Cleaning and Disinfection

General Cleaning

Cleaning refers to the removal of visible dirt, grime and impurities. Cleaning does not kill germs but helps remove them from the surface. Increasing daily cleaning and disinfection of common areas utilized by the public is one of the primary strategies to prevent COVID-19 transmission.

Cleaning of public spaces includes, but is not limited to, the following procedures:

- Gather and remove (sweeping) all trash, debris and accumulated material from surfaces (roadways, walkways, drains).
- Garbage receptacles (bins and skips) should be enclosed, emptied and cleaned as per pick-up schedule.
- Regular refuse collection (twice weekly) is recommended. Followed by pressure washing of the area.
- During general cleaning a simple soap solution can be used to remove organic matter that may be present on surfaces and special attention should be payed to door knobs, light switches, bus/taxi sheds, rails, staff rooms, desktops, washrooms and other high touch surfaces.

Disinfection

Disinfection refers to the use of chemicals to kill germs on surfaces. This is most effective after surfaces are cleaned. Both steps are important to reduce the spread of infection.

- When using commercially prepared disinfectants be sure to follow the instructions on the label to disinfect effectively. Alternatively, bleach can be used to prepare a solution that is as effective as commercially prepared disinfectants.

Steps for Disinfecting Surfaces

- Clean and flush surfaces with soap and water before disinfecting, and for pavements and walkways flush with ample supply of water

- Prepare disinfection solution as per disinfection guide provided in Table 1 below
- Apply chlorine bleach and water solution to the entire area to be disinfected
- For frequently touched surfaces wipe extensively and allow to air dry

Preparing a bleach solution by mixing

Table 1: Disinfection Solution Guide

Water	Bleach Strength 5.25% (Household Bleach)	Bleach Strength 8.25% (Industrial Bleach)
1 Gallon	3 Tablespoons	2 Tablespoons
55 Gallon	165 Tablespoons or 2.4 litres (0.64 gallons)	110 Tablespoons or 1.63 litres (0.43 gallons)
500 gallon	1,500 Tablespoons or 22 litres (5.87 gallons)	1,000 Tablespoon or 14.79 litres (3.91 gallons)

Preparation Tips

- Prepare a fresh bleach solution each day in a well ventilated area that is separate from children
- Label bottles of bleach solution with contents, ratio and date mixed.
- Use cool water. Always add bleach to cool water, NOT water to bleach.
- Wear gloves and eye protection.
- Prepare solution in an area with an eye-wash.

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Best Practice Tips for Conducting Temperature Checks

MINISTRY OF HEALTH & WELLNESS

BEST PRACTICE TIPS FOR CONDUCTING TEMPERATURE CHECKS

1. Do temperature check as it is permissible in the COVID-19 pandemic.
2. Advise as best as possible all involved of the new policy. Post written notices of the policy at the entrances of buildings, on websites and social media.
3. Use only a non-touch temperature device.
4. Follow the manufacturers instruction for use and maintenance of the thermometers.
5. Prior to the start of each session, check the thermometer to ensure it is working properly and the manufacturers guidelines are being adhered to.
6. All persons entering the space (office, church, bar, club, school, etc.,) should be screened.
7. Conduct screening prior to entry and ensure that those being screened practice physical distancing while waiting.
8. Create covered corridors where persons can enter the facility through a temperature-checking line. Have multiple such lines and entrances to reduce crowding.
9. Use painter's tape or parking cones, to set up "lanes" on the floor or other methods to ensure individuals remain at least six feet apart during the process.
10. Stagger "start" and "end" times of operating hours when possible (while still ensuring safe operations), to reduce congregating and overcrowding at entrances and exits.
11. Ensure that exits are not blocked during the screening process.
12. Provide appropriate personal protective equipment (gloves, mask and face shield) for the persons taking the temperature.
13. A trained nurse or medical professional on-site, should be responsible for taking temperatures. If not available, a designated person should be trained to carry out this function.
14. Ensure that the process of taking the temperature is well documented, seamless, non-discriminatory, confidential and aligned to the Ministry of Health and Wellness's (MOHW's) guidelines.
15. Record the temperature over dry body surfaces; preferably the forehead.
16. Hold thermometer between 1.2 and 6 inches (3-15 cm) from the body in a draft-free room/area, at a temperature between 60.8°F (16°C) and 104°F (40°C) and at humidity below 85%.

17. Record "no" (meaning the person's temperature is under the appropriate threshold) or "yes" (meaning the person has a fever), instead of recording each individual's specific temperature.
18. If the person has a fever the temperature should be repeated x 3 and the exact temperature documented and shared discretely with the person.
19. Persons with an elevated temperature should not be allowed to enter or socialize with others. They should be advised to go home (preferably not using the public transport system), contact their doctor or the nearest health centre for advise and further management.
20. Thoroughly clean all areas the person may have touched or was present in before being screened and found to have a fever.

NB: A fever for COVID-19 purposes is any temperature at 100.4°F/38°C or higher. However, kindly refer to the MOHW's guidelines regarding temperature levels being mindful of the evolving nature of COVID-19. Screening persons for a fever is not a "silver bullet" against the spread of COVID-19, as persons infected with the coronavirus can transmit the disease to others although they are asymptomatic (showing no signs or symptoms of the illness). Taking temperatures does not eliminate the need to practice other steps to avoid the spread of the virus such as:

a. maintaining social distancing (keeping 6ft from each other) at all times
b. promoting stay at home as much as possible
c. encouraging frequent hand washing and disinfecting
d. cleaning and disinfecting common areas and high touch-points such as door knobs and chairs frequently

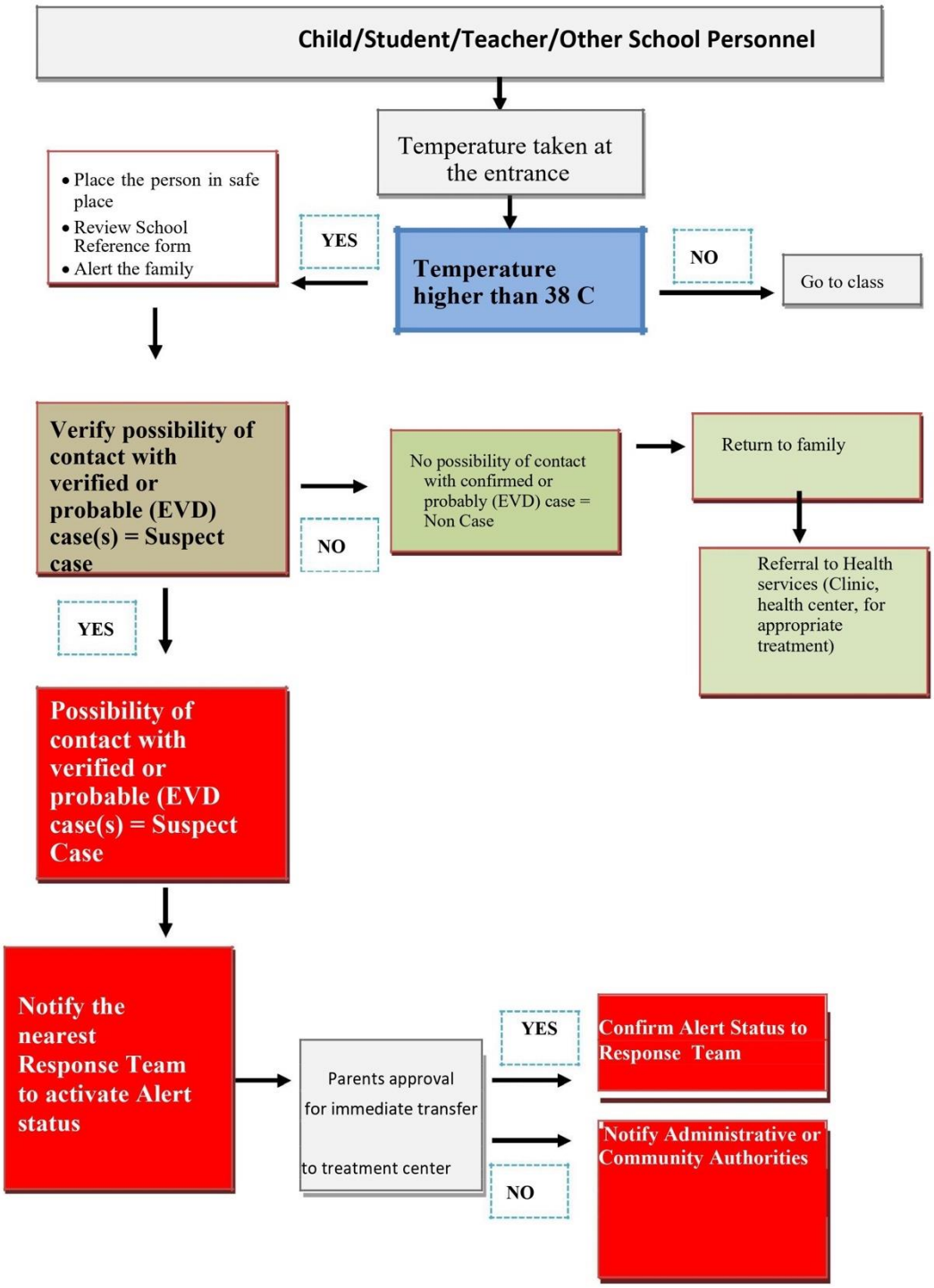
UNICEF

Three Scenarios for the Safe Reopening of Schools

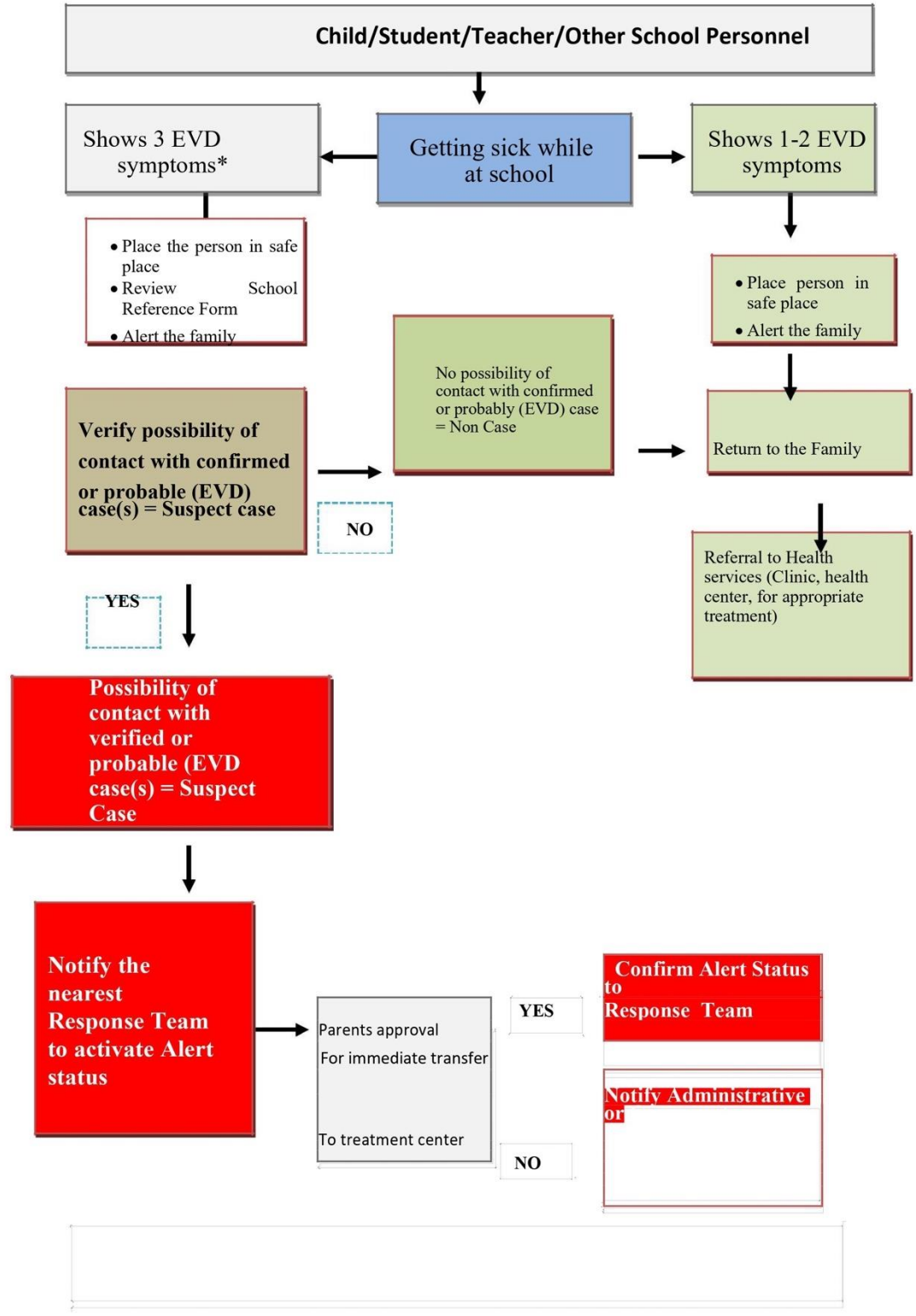
Three Scenarios for the Safe Reopening of Schools

Developed by UNICEF Guinea in consultation with WHO and CDC

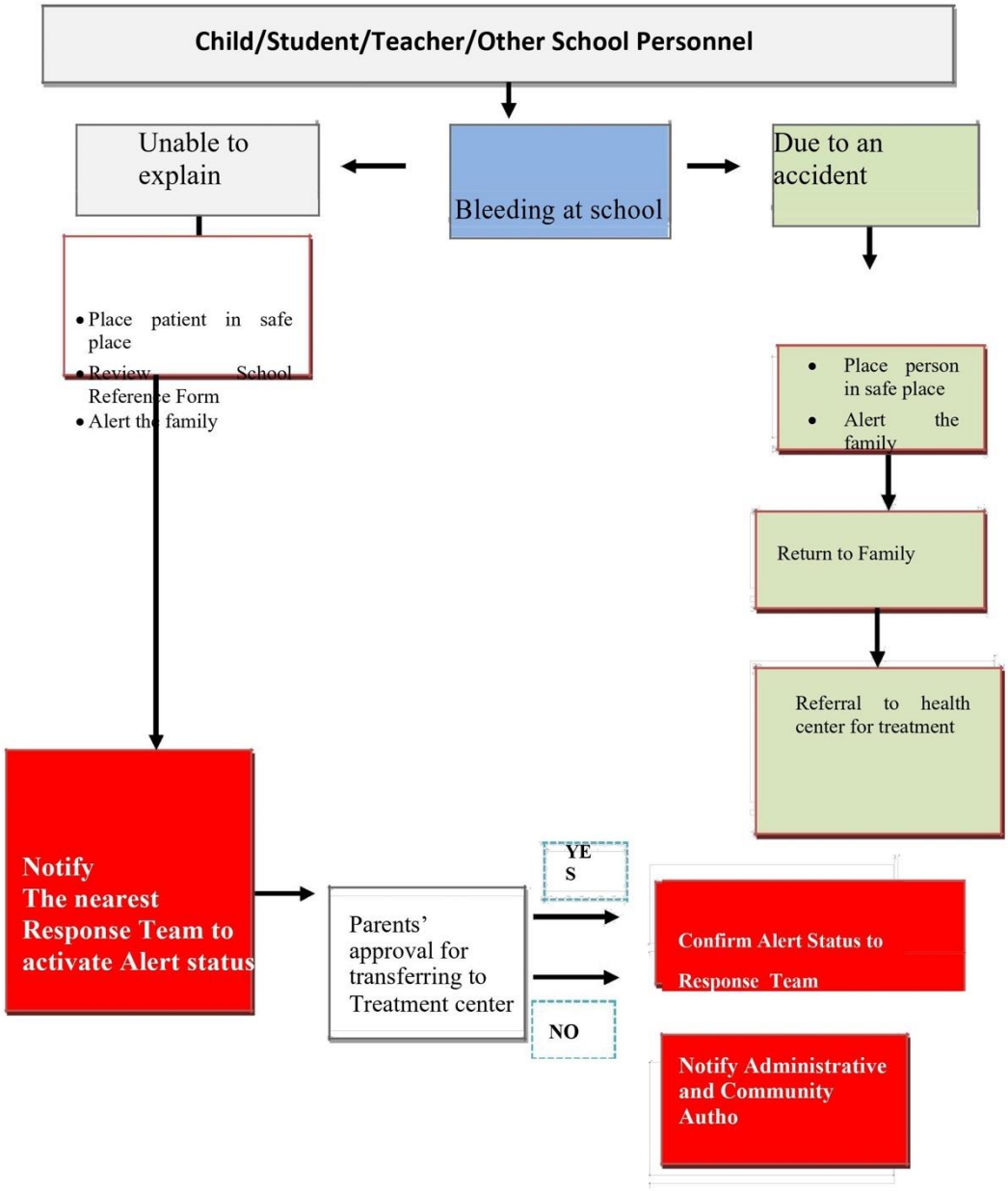
SCENARIO 1


Child/Student/Teacher/Other School Personnel
Temperature taken at the entrance
Temperature higher than 38 C
YES
• Place the person in safe place
• Review School Reference form
• Alert the family
NO
Go to class
Verify possibility of contact with verified or probable (EVD) case(s) = Suspect case
NO
No possibility of contact with confirmed or probably (EVD) case = Non Case
Return to family
Referral to Health services (Clinic, health center, for appropriate treatment)
YES
Possibility of contact with verified or probable (EVD case(s) = Suspect Case
Notify the nearest Response Team to activate Alert status
Parents approval for immediate transfer to treatment center
YES
NO
Confirm Alert Status to Response Team
Notify Administrative or Community Authorities

SCENARIO 2


Child/Student/Teacher/Other School Personnel
Getting sick while at school
Shows 3 EVD symptoms*
Shows 1-2 EVD symptoms
• Place the person in safe place
• Review School Reference Form
• Alert the family
• Place person in safe place
• Alert the family
No possibility of contact with confirmed or probably (EVD) case = Non Case
Verify possibility of contact with confirmed or probable (EVD) case(s) = Suspect case
Return to the Family
NO
Referral to Health services (Clinic, health center, for appropriate treatment)
YES
Possibility of contact with verified or probable (EVD case(s) = Suspect Case
Notify the nearest Response Team to activate Alert status
Parents approval
For immediate transfer
To treatment center
YES
NO
Confirm Alert Status to Response Team
Notify Administrative or

SCENARIO 3


Child/Student/Teacher/Other School Personnel
Unable to explain
Bleeding at school
Due to an accident
• Place patient in safe place
• Review School Reference Form
• Alert the family
• Place person in safe place
• Alert the family
Return to Family
Referral to health center for treatment
Notify The nearest Response Team to activate Alert status
Parents' approval for transferring to Treatment center
YES
NO
Confirm Alert Status to Response Team
Notify Administrative and Community Autho

EVD Symptoms : Fever, diahrrea, vomitting, bleeding , extreme fatigue, muscle aches or sore throat.

Ministry of Education Youth and Information

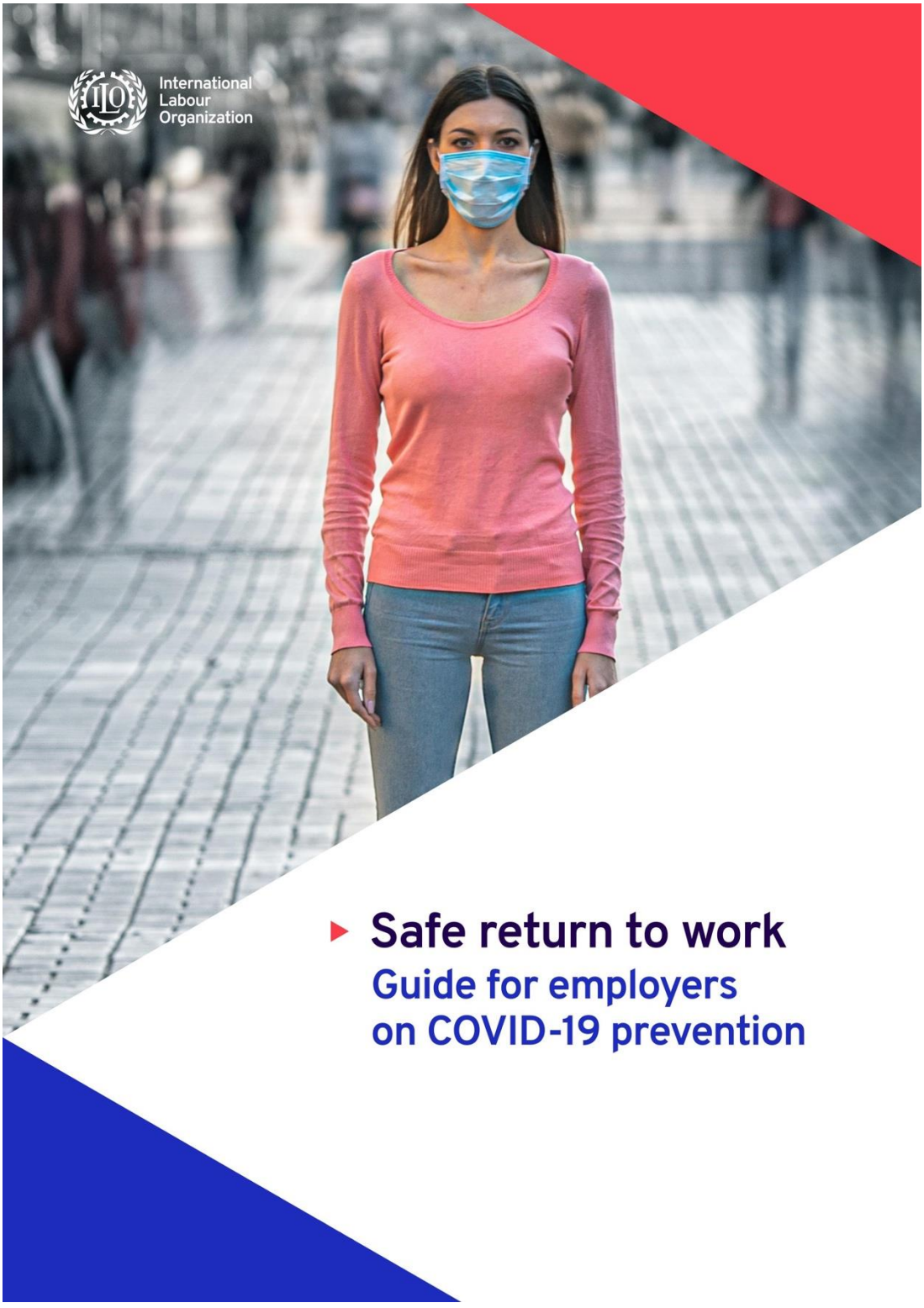
School-Wide Positive Behaviour Interventions and Supports Framework (SWPBIS) Tips for Teaching Skills Needed for Infection/Disease Control in Schools

MINISTRY OF EDUCATION
YOUTH & INFORMATION

School-Wide Positive Behaviour Interventions and Supports Framework (SWPBIS) Tips for Teaching Skills Needed for Infection/Disease Control in Schools	
Overview	One of the key principles of the School-Wide Positive Behavioral Interventions and Supports (SWPBIS) is to focus on building pro-social skills *(Center on Positive Behavioral Interventions and Supports, March, 2020)*. The COVID-19 pandemic has called for an adjustment in behaviours relating to personal sanitation and social interactions. As new habits and skills must be formed, teaching and reinforcing new behaviors must form a part of a schools' effort in infection/disease control as a part of its own health and safety response and to support national efforts. The following are a few simple recommendations educators may use to strengthen plans for operating during COVID-19;
Prompt, teach, and reinforce sanitation protocols and maintain distance behaviours.	**Sanitation Protocols** ✓ *Explicitly teach prevention measures such as "hand washing". Conduct brief 5-10 minute lessons once a week and issue reminders every two days. Use posters/ reminders at handwashing areas for reinforcement. Lessons eliminated and reminders reduced if observations prove high compliance to taught protocols. (Keeping hands away from face, mask etiquette, how to greet each other, etc.) Any new behaviour needing reinforcement should be taught and demonstrated.* ✓ *Create jingles, catch phrases, etc., which can remind everyone of protocols. Avoid too many instructions in one jingle; focus on critical skills to be reinforced. EG. A handwashing jingle.* ✓ *After teaching sanitation protocols, use posters and signs to remind everyone of standards to be maintained. Place visuals where behaviors are needed most, EG. Mask etiquette in public spaces, sanitizing school equipment visuals in labs, libraries, etc.)* **Routines** ✓ *Create simulations for new routines needed. Walk all stakeholders through expectations, EG. School arrival procedures. If possible, create a simple video which can be shared via mobile messaging before school reopens. Otherwise, reopening orientations must include simulations of the new routines.* ✓ *Use active supervision to praise/acknowledge compliance to routines. EG: Thumbs up gestures to students maintaining social/physical distancing. Provide high rate of positive feedback. All good practices must be highlighted, promoted and used for reinforcement.*
Link Behaviour Expectation to School Core Values	**Acknowledge Behaviour and Link to School Core Values** ✓ *School mottos, school songs, behavior matrices and handbooks promote core values of institutions. Lessons on new behaviours should link the expected behaviour to a relevant value/standard.* ✓ *Use active supervision to remind students of expectations for positive behaviour.* ✓ *Encourage discussions, debates, etc., on how being a student of X School can contribute to positive personal and national COVID-19 responses.* ✓ *Emphasize respect and sense of community – address stigma and discrimination issues and set positive expectations for collective/national responsibility.*

International Labour Organization

Safe Return to Work – Guide for Employers on COVID-19 Prevention



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First published 2020

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Safe return to work: Guide for employers on COVID-19 prevention

Geneva: International Labour Office, 2020

ISBN 978-92-2-032220-8 (web PDF)

Also available in French: 978-92-2-032222-2 (web PDF) and Spanish: ISBN 978-92-2-032224-6 (web PDF)

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Printed by the International Labour Organization, Geneva, Switzerland REP

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1. Objective of the guide

This guide contains recommendations for health and safety practices and approaches to COVID-19 prevention, based on materials developed by many organisations globally, including: "General guide for preventing the spread of COVID-19 at the workplace" prepared by Belgian social partners and government experts, as well as guides developed by Manufacturing NZ, IBEC, Union Industrial Argentina, Chilean Chamber of Construction, Guayaquil Chamber of Commerce, Chamber of Agriculture in Guatemala together with various materials and guidance from the WHO.

The publication aims to provide general guidance and information to employers on how to prevent the spread of COVID-19 in the workplace, to enable workers to return to work safely while keeping the risk of contamination as low as possible. It also provides ideas on how to protect workers' mental well-being during the pandemic.

Until the development of a vaccine or medicine, COVID-19 virus is likely to continue circulating in our communities. Physical distancing measures, increased hygiene and other precautions will therefore, have to be maintained to contain infections, including those in the workplace. Preventive actions are necessary in order to prepare companies and workers for a safe return to work and a gradual restart of business activities. The guide can also be useful for those companies who continued operations throughout the crisis, but who may now need to consider additional protective and preventive OSH measures.

All enterprises, regardless of their size or sector, are encouraged to adopt these recommendations to take care of people's health and, as far as possible, not affect business activities negatively.

As the epidemiological situation, health and safety regulations and public health guidance differ considerably from country to country, this generic tool should be further adapted to national situations. It should also be further customized by the different sectors to their specific sectoral context.

2. General considerations, information and awareness raising

Implementing protective and preventive measures may require significant changes to workplace processes and practices. To help with the transition, consider **gradual resumption of activities** (e.g. reduced number of product groups or activities) to simplify logistics and process flow at least at the start of the return to work period.

Determine **which workers should return to work first**. It is unlikely for most companies that all workers will be able to return to the workplace at once. Consideration should be given to which workers, departments, groups, or units should return first based on business needs. Consideration should also be given to compliance with ongoing restrictions regarding business operations and compliance with health precautions such as physical distancing. **Workers who can continue to telework should do so**. Flexible working time such as staggered hours or shift work can be considered to limit congestion in the workplace. Companies should document the legitimate business reasons for this process, to provide evidence of non-discriminatory selection criteria.

Update existing health and safety **risk assessments** (in light of the need to prevent COVID-19), to systematically assess any risk of infection in workplace settings and to determine any appropriate control measures that should be implemented. The hierarchy of control measures should be kept in mind.

Prepare the workplace for the return of workers. In particular, look into the workplace layout and implement changes to allow for physical distancing; put in place a plan for systematic cleaning and disinfection of workspaces and tools as well as stocking up on cleaning supplies and any protective equipment that may be needed (such as masks and gloves).

Maintain an open dialogue with workers (and/or with trade unions when applicable). In particular, involve workplace health and safety representatives or committees in the planning, introduction and monitoring of preventive and protective measures. Workers can make important contributions when assessing risks and identifying solutions. Also, some changes, e.g. with regard to shifts or telework, may need to be negotiated with the unions or individually.

Involve experts. When elaborating control and prevention measures and the "return to work" plan, consider calling on the expertise that may be available internally and externally, such as a prevention advisor or external occupational health services.

Monitor frequently the requirements and recommendations issued by relevant health and labour authorities. As the epidemiological situation is changing and knowledge about the virus is increasing, recommendations and requirements may change rapidly and will need to be incorporated into workplace policies and practices. **Adhere to any local laws and regulations** (e.g. concerning maximum number of staff or clients allowed on the premises, restrictions on meetings, types of business activities that can resume operations)

Inform and train workers about COVID-19. Include topics such as what the symptoms are, how each individual can protect themselves; current restrictions (e.g. travel bans), and the rationale behind physical distancing. Also, provide information about company policies, processes and practices related to the management of COVID-19. Keep track (register) of workers that have participated in information sessions and/or training, to make sure that all workers have been trained.

Make sure **workers are well aware of company "return to work" plans and procedures**.

Make sure that workers, as well as customers and visitors **know whom in a company they may contact** in case they have questions related to COVID-19.

Take steps to **support the mental well-being of workers**, taking into account the diversity of circumstances.

There may be a tendency to 'de-risk' the situation as people become used to the return to work. Managers will need to **repeatedly emphasise the ongoing requirements for preventive and protective measures**, and ensure that they are being consistently applied.

3. Hygiene measures

Personal hygiene

Hand washing

Hand hygiene is extremely important in the prevention of the spread of the COVID-19 virus. Ensure that workers have facilities to wash their hands properly and regularly with soap and water.

Provide paper wipes to dry hands (rather than towels or electric hand dryers).

Remind workers that hands need to be washed frequently, with soap and water, for **at least 20 seconds**, especially upon arrival at work, after using the bathroom, after blowing their nose/coughing/sneezing, and before eating.

Place posters and signs promoting correct hand washing. Bright clear infographics without too much accompanying text seem to be the most effective.

Provide alcohol-based hand gels (containing 60-80% alcohol [1]) in places where it is not possible to wash hands with soap and water.

Instruct workers to avoid contact with objects or surfaces used or touched by other people (e.g. door handles) and to wash hands after contact with such surfaces or objects.

Respiratory hygiene

Remind workers about the need to cover coughs or sneezes with a tissue or elbow and to immediately discard the used tissues.

Provide paper tissues and specific bins for tissues to be discarded. Covered, no-touch bins are best.

Set up a system for disposing bin contents and disinfecting bins.

Place posters and signs reminding workers that they should avoid touching their nose, eyes or mouth.

Cleaning of workplaces, work equipment and facilities

Establish daily cleaning protocols to ensure workplace, workstations, equipment and facilities are clean and tidy.

Establish specific crew(s) to keep things clean and to sanitize. The crew should have the supplies, training and personal protection equipment necessary to carry out these tasks.

Consider keeping and displaying a record of cleaning activities (as per the practice in airport toilets, for example).

When cleaning, pay particular attention to high touch / high traffic areas. These can include: canteen facilities, lockers / changing rooms, corridors, smoking areas, shared desks and keyboards, vending machines, door and window handles, handrails, light switches, buttons of elevator doors, toilet doors, washbasin taps, soap dispensers, control panels/buttons of appliances and machines such as printers, frequently used tools etc.

1 According to **WHO guidance**, an effective alcohol-based hand rub product should contain between 60% and 80% of alcohol and its efficacy should be proven according to the European Norm 1500 or the standards of the ASTM International (formerly, the American Society for Testing and Materials)

Limit the number of high touch/high traffic areas, for example:

- Consider reducing some high contact areas by leaving some internal doorways open (bearing in mind that some may be fire doors).
- Examine the possibilities of opening doors and cupboards without contact (e.g. leaving toilet doors permanently partially open).
- Discourage staff from sharing common office supplies (e.g. pens, staplers) and items such as cups, plates and cutlery.
- Remove magazines and newspapers from reception areas and lunchrooms.

Provide additional cleaning stations across the workplace where workers can source materials (e.g. alcohol-based cleaning wipes) to clean their own areas, workstations, etc.

Ensure a good supply of cleaning agents is available.

Box 1.
Cleaning and Disinfecting Your Facility – Center for Disease Control and Prevention advice

- Disposable gloves should be worn to clean and disinfect.
- Clean surfaces using soap and water, then use disinfectant.
- It is recommended to use disinfectant approved to work against SARS-CoV-2. Follow the instructions on the label to ensure safe and effective use of the product. Diluted bleach solutions may also be used if appropriate for the surface. Alcohol solutions containing at least 70% alcohol may also be used.
- Alcohol-based wipes or sprays (containing at least 70% alcohol) can be particularly useful to disinfect electronics and other high touch surfaces.

Source: Centers for Disease Control and Prevention, **Cleaning and Disinfecting Your Facility**

Ventilation

Thoroughly ventilate the workplace using mechanical or natural ventilation (between shifts, regularly during the day). For example, in buildings with mechanical ventilation consider switching ventilation to nominal speed at least 2 hours before the start of the building usage time and switching to lower speed 2 hours after the end of the building usage time.

Keep toilet ventilation 24/7 in operation. Instruct building occupants to flush toilets with closed lids.

Secure ventilation with outdoor air. Switch air-handling units with recirculation to 100% outdoor air.

Ensure regular airing by opening the windows even in mechanically ventilated buildings.

Inspect heat recovery equipment to be sure that leakages are under control.

Do not use individual fans that can spread the virus.

Personal protective equipment

Personal protective equipment can include surgical facemasks and respirators, disposable gloves, eye splash protection or disposable overalls. Non-medical masks are not considered personal protective equipment, but can help prevent persons with COVID-19 from spreading the infection while talking or coughing.

Follow official guidance from national and local health authorities on whether provision of personal protective equipment (or non-medical masks) is advised or required, and in what situations. For example, there are different types of facemasks, which may be recommended for different purposes. This will depend on specific occupations or job tasks, location, updated risk assessments for workers, and information on the effectiveness of masks in preventing the spread of COVID-19.

In general, in line with the hierarchy of hazard control, collective protection measures (e.g. installation of plastic panels to separate workers, or separation of areas by tape/ribbons to ensure physical distancing) have priority over individual protective measures. Facemasks are often recommended as a complementary preventive measure in situations where physical distancing rules cannot be fully respected.

Facemasks are also often recommended for any person who starts to develop COVID-19 symptoms, and for workers who need to be in contact with such persons.

For any type of mask, appropriate use and disposal are essential to ensure that they are effective and to avoid any increase in transmission. If an employer requires workers to use facemasks, or any other protective equipment, information and training should be provided on their proper use.

Even if masks are used, remind workers it is crucial to continue to strictly follow all other preventive measures (e.g. hand hygiene, physical distancing).

BOX 2. Types of masks: Non-medical masks, surgical masks, and respirators

There are different types of face-masks available. Consult the official advice of your health authorities on the use of masks.

Non-medical face-masks
(also called **"community"** masks or **"barrier"** masks) include various forms of self-made or commercial masks and face covers made of cloth, other textiles, or other materials (e.g. paper). They are not standardised and not intended for use in protecting from the virus. However, wearing such masks can slow the spread of the virus and help people who may have the virus and do not know it from transmitting it to others.

Surgical masks
(also called **"medical"** or **"procedure"** mask). A surgical mask is a loose-fitting, disposable device that creates a physical barrier between the mouth and nose of the wearer and potential contaminants in the immediate environment. Surgical masks are regulated. Surgical masks are made in different thicknesses and with a different ability to protect the wearer from contact with liquids. If worn properly, a surgical mask is intended to help block large-particle droplets, splashes, sprays, or splatter that may contain germs (viruses and bacteria), keeping them from reaching the mouth and nose. Surgical masks may also help reduce the spread of large respiratory droplets from the person wearing it. While a surgical mask may be effective in blocking splashes and large-particle droplets, a face-mask, by design, does not filter or block very small particles in the air that may be transmitted by coughs, sneezes, or certain medical procedures. It should also be noted that surgical masks do not provide complete protection from germs and other contaminants because of the loose fit between the surface of the face-mask and the wearer's face.

Respirators
(FFP2, N95, KN95, etc.). A respirator is a respiratory protective device designed to achieve a very close facial fit and highly efficient filtration of airborne particles. It is subject to regulation and classified as personal protective equipment. If properly fitted, the filtration capabilities of respirators exceed those of surgical face-masks. However, even a properly fitted respirator does not completely eliminate the risk of illness.

Source: US food and drug administriation, N95 Respirators and Surgical Masks (Face-masks)

BOX 3. WHO guidance on the use of masks in the community setting

Potential advantages of the use of masks by healthy people in the community setting include reducing potential exposure risk from an infected person during the "pre-symptomatic" period and de-stigmatization of individuals wearing a mask for source control.

However, the following risks should be taken into account in any decision-making process:

- Self-contamination that may occur by touching and reusing a contaminated mask.
- Depending on the type of mask used, potential breathing difficulties.
- False sense of security, leading to potentially lower adherence to other preventive measures such as physical distancing and hand hygiene.
- Diversion of mask supplies and consequent shortage of masks for health care workers.
- Diversion of resources from effective public health measures, such as hand hygiene.

WHO stresses that medical masks and respirators should be prioritized for health care workers especially given the current shortages of respiratory personal protective equipment reported in many countries.

Source: WHO, 2020, Advice on the use of masks in the context of COVID-19: interim guidance, 6 April 2020

EBMOs may want to add national guidance on face-masks

4. Actions to consider: from home to the workplace

Before leaving home

Instruct workers with any symptoms of COVID-19 (fever, dry cough, sore throat, shortness of breath, head cold e.g. runny nose or sneezing, loss of sense of smell) to stay at home, contact a medical centre or call the health services designated by the country's authorities and follow their guidance. The workers should also inform her/his supervisor about this situation.

Check guidance from your health authorities on what to do when someone at a workers's household is self-isolating. In many cases, in such situations a worker should also be requested to stay at home and quarantine.

EBMOs may want to add national guidance on self-isolation and quarantine

Transport to and from work

For short distances, encourage workers to come to work on foot or by bicycle.

Encourage workers to avoid public transport, especially at peak times. Advise workers who need to travel by public transport to follow the instructions given by transport companies.

Consider providing additional parking spaces as increased number of workers may want to come to work by private cars.

Remind workers about the importance of maintaining good hand and respiratory hygiene before, during and after travel.

If an employer provides transport (e.g. a van or a bus):

- Maintain **a minimum recommended distance of 1 meter**[2] between each person (e.g. block certain seats). The number of persons that can be transported will therefore vary according to the type of vehicle.
- If the recommended distance cannot be assured, consider providing additional protection such as face-masks, in line with the recommendations of national health authorities.
- Consider increasing the frequency of transport provision to reduce congestion.
- Pay attention to proper ventilation (e.g. open windows while driving).
- Clean the vehicle regularly, paying attention to frequent cleaning of high touch areas (e.g. door handles, handrails) in particular.
- Separate the driver front seat area from the remainder of the vehicle (e.g. using tape or floor signs).
- Ask passengers to enter and exit the vehicle through rear entry doors.
- Avoid crowding at transport access points.

2 Throughout this guide ensuring 1 meter of distance between people is recommended, in accordance with the **World Health Organization's recommendations**. However, each country's authorities may make its own recommendations and these usually vary from 1 to 2 meters. Employers' organizations and companies should comply with the regulations and recommendations established in their own countries.

5. Actions to consider: before entering the workplace

Symptom-screening (e.g. temperature checking)

Check laws, regulations and guidance from relevant health authorities concerning symptom-screening policies.

In some countries, workers may be subjected to body temperature control before access to the workplace. In case of fever (temperature higher than 37.5°) access is refused.

If the temperature check is to be performed, it should be carried out for all workers in a uniform manner (irrespective of function, type of contract etc.) and with reliable equipment (e.g. infrared thermometer) by persons who have received appropriate instructions. This person could be medical personnel, human resources personnel, or designated trained personnel. However, it should be made clear that this screening is not intended to be, nor is it a substitute for, a clinical diagnosis.

Some countries do not recommend temperature screening as COVID-19 does not always involve the presence of fever. Additionally, screening may lead to unintended consequences - people with fever may be more likely to conceal their condition by taking anti-pyretic medication (e.g. paracetamol) to suppress the high temperature and this can give a false sense of security.

In some countries, employers ask each worker upon arrival for a signed declaration that they are free of the symptoms (cough, sore throat, shortness of breath, head cold e.g. runny nose or sneezing, loss of sense of smell, with or without fever) before they are allowed on site.

If any screening is performed, communicate clearly to workers that the sole rationale for this screening is to protect them from potential contagion. Also, inform workers how the data will be managed. Data protection and privacy rules should be respected.

EBMOs may want to add national laws and guidance on symptoms screening/temperature checking

Registering entries and exits

Minimise the number of entries to company premises – in general, people who are not directly involved with the company's activities should not enter. Inform any visitors (for example customers and suppliers) about the company's hygiene and safety policies before they enter company premises. Consider requesting visitors to sign their agreement with such policies.

In some countries, employers record all entries and exits and contact details (address, phone number, etc.) of workers, contractors, and visitors on site. Documenting entries and exits can facilitate contact tracing in case of the detection of a COVID-19 infection or a suspected infection. Existing HR and visitor registration systems can often be used for this purpose. Electronic systems should be preferred. If a fingerprint-controlled access system is usually in place, consider temporarily switching to a system using individual access cards. A paper-based system also creates a potential hazard – multiple people touching the same surfaces when clocking in and registering. If it is not possible to switch to an electronic system, make sure that workers and visitors have washed their hands or applied alcohol gel before signing the company entry book or using the control clock.

Avoiding congestion at the entrance / exit

Promote physical distancing and use dispersion measures at entrances and exits. Use aids such as floor markings, ribbons or physical barriers.

If possible, consider staggered shifts or staggered entry and exit times (with some workers starting earlier and some later in the day) to reduce congestion.

If possible, plan separate access and exit routes for various teams, where appropriate.

Pay attention to the layout of the car parks (number, distribution of vehicles and bikes) to facilitate distancing.

Promoting good hygiene habits

Place posters reminding workers to wash hands upon arrival at the workplace.

Place posters reminding workers to avoid handshakes and other greetings that involve contact.

6. Actions to consider: inside the workplace

Changing rooms

Limit the number of people present at the same time in the changing rooms, to ensure sufficient distance between workers.

If necessary, provide additional temporary changing rooms.

Ensure regular cleaning of the changing rooms, and in any case between shifts and at the end or at the beginning of each work-day.

Bathroom facilities

Remind workers to wash hands before and after using the toilet.

Respect physical distancing as much as possible, for example by installing temporary additional toilets, limiting the number of people present in the toilet area at the same time, and leaving sufficient space between urinals and sinks that can be used.

If possible, provide liquid soap to wash hands (rather than a bar soap), and paper towels to dry hands (rather than towels or electric driers).

Ensure regular cleaning of bathroom facilities and areas, and in any case between shifts and at the end of each work-day.

Canteen and rest areas

Unless on-site canteens / catering facilities cannot be managed in accordance with the measures below, keep them open to avoid workers leaving the site during meal breaks.

Remind workers to wash their hands prior to entering the canteen, and consider providing hand-gel stations in the canteen area.

Determine the maximum number of people that can safely stay at the canteen at the same time, while respecting physical distancing measures.

Implement staggered lunch and rest breaks to avoid congestion. If you split workers into teams/shifts, avoid mixing different teams of workers in the same space at the same time.

Set up the canteen area to maintain physical distance (i.e. space tables and chairs further apart, reduce the number of available chairs).

Reduce/eliminate the availability of serving from common food sources (e.g. soup, porridge) as well as reduce the use of common equipment (e.g. microwaves).

Consider changing food service to a pre-packed "grab and go" option.

Introduce/encourage cashless payments to avoid cash handling.

Keep dining areas clean and hygienic, especially when it comes to the utensils provided by the company, such as cutlery, tableware, and glasses.

Remind workers not to share utensils (cups, plates, cutlery) or food.

Keep particular attention to regular cleaning of keyboards of any beverage or snack dispensers. Consider placing hand gel or cleaning wipes in the relevant areas.

Organisation of work, work stations and / or production lines

Promote telework so that its use is maximised for those functions that allow it.

Organise work so that physical distancing rules are respected by those present at the workplace.

In the office context, this may involve creating sufficient distance between workstations by spacing them further apart. If this is not possible, rearrange workstations in a way to maintain a sufficient distance e.g. do not use certain desks in open spaces, place some workstations in separate spare rooms, place workstations in a way that people work back to back or side by side rather than face to face.

If it is not possible to assure sufficient distance between workers, first of all, use collective protective equipment such as plastic screens and walls to compartmentalize workspaces and/or organizational measures such as staggered working hours and breaks and/or adapting a sequence of tasks to maximise distancing. For example, in assembly operations, it may be possible to get a single worker to complete more (than one) assembly task that would normally be performed by two people if a physical separation of assembly stations would otherwise be hard to implement.

In case of teamwork, consider limiting the size of the teams, keep the membership of the teams fixed and minimize contact between workers from different teams (e.g. by staggered working time or dividing workspace into zones and instructing specific teams to keep to certain zones only).

If one of the team members gets sick, consider quarantining the whole team (if they are considered close contacts) and use a replacement team. Team composition could be functional, so that all critical functions in a particular process are covered, or by location, so that all team members work in the same area of the office/factory.

Apply floor markings showing safe distance between workstations.

If collective and organizational measures are not sufficient to ensure adequate physical distancing while tasks leading to such situations have to be performed, provide additional protection (face-masks and/or other personal protective equipment) in line with national requirements and recommendations.

Work equipment

Instruct workers to use their own work tools only or those provided by the company. Sharing work tools between co-workers should be discouraged or prohibited.

Ensure work tools are cleaned regularly (especially at the end of the shift, and before a tool will be used by another workers).

Contacts log

Consider establishing a contacts log. In its simplest form it is a list (Date/ Name of colleague/ Department) of all colleagues that a worker comes into contact with over the course of a shift or a working day without being able to observe the minimum distance rules for longer than 15 minutes.

Each worker should be responsible for maintaining a contact log and returning it to the team leader at the end of the shift / working day. The log can then be used to establish a list of tasks that cannot be achieved using physical distancing – these tasks can be reviewed, and alternative control measures can be put in place for these tasks.

Internal circulation

Limit internal circulation as much as possible – instruct workers not to go to rooms or places where they do not have to be present or if they do not have a particular task to do.

Remind workers to respect physical distancing rules when moving across the workspace to the full extent possible.

Remind workers to avoid using elevators. If this is not possible, limit the number of people using the elevator at the same time (e.g. only allow one person in a small lift). Instruct workers to keep distance and stand back to back.

Enable, as far as possible, separate circulation circuits at the workspaces. Use tools such as floor markings or tapes to indicate safe walkways as clearly as possible.

Consider introducing one-way traffic or priority rules on narrow stairs where people cannot keep a sufficient distance when passing each other (for example, priority for those coming down).

Consider introducing one-way traffic in corridors where people meet often or without sufficient distance.

Use these rules both inside and outside the building, for example in car parks, to get to the production lines and workstations, to get to the social facilities, coffee corners or smoking rooms.

When it is not possible to arrange circuits in a way to ensure physical distancing, consider additional protection (face-masks), in line with requirements and recommendations of national authorities.

Meetings and travels

Cancel non-essential meetings, trainings and travels.

Suspend any meeting that requires the presence of a greater number of people than the maximum determined by national requirements or recommendations.

Use alternatives to face-to-face meetings, such as digital tools and digital means of communication.

Daily kick-off meetings or toolbox meetings can be held through a speaker system where everyone stays at their workstations and keeps their distance.

If a face-to-face meeting is necessary, keep it as short as possible, reduce the number of attendees to the minimum possible, provide a room of an adequate size to ensure physical distancing (or hold the meeting outside), and keep the room clean and well ventilated. Consider keeping the list and contact details of the meeting participants for at least 14 days to facilitate contact tracking if need be.

For each meeting room, consider indicating the maximum number of people that can safely stay in a meeting room at the same time.

EBMOs may want to add national guidance on meetings and travel

7. Actions to consider: leaving the workplace

Instruct the workers to wash their hands before exiting the workplace.

As much as possible, spread out the exit times, to avoid congestion.

In case of transport organised by a company, make sure that the vehicle is properly cleaned before the transfer (see also recommendations in point 4).

Remind workers to wash hands upon arrival at home.

8. Dealing with suppliers and clients

Suppliers and deliveries

A specific procedure should be established for the reception of goods, reviewing the safety protocols (loading, unloading) to take into account the possible risks associated with COVID-19 and to reduce the opportunities for contact between suppliers and workers.

Limit the number of workers designated to handle deliveries. These workers should be trained on the relevant procedures.

Consider if loading and unloading can be done entirely by the supplier, or entirely by the recipient. In any case, safe distances should be maintained and hand washing may be requested.

If possible, plan deliveries in a staggered manner to avoid having too many external persons present at the same time.

COVID-19 virus can survive for up to 72 hours on plastic and stainless steel, less than 4 hours on copper and less than 24 hours on cardboard[3]. If possible, consider disinfecting deliveries at delivery bays before entry into warehouses or production processes. (However, keep in mind that COVID-19 spreads primarily from person to person).

If possible, consider setting up dedicated mobile toilets for use by suppliers to limit entries of suppliers into company premises.

Provide a place where mail or parcels can be deposited without contact.

If possible, make payments electronically and avoid the use of cash. Also, ensure that the payment terminal is cleaned regularly.

3 https://www.who.int/news-room/q-a-detail/q-a-coronaviruses

Clients

Restarting operations may be particularly complex for companies that provide face-to-face services to the public (for example, companies within the commerce and service sectors), as in addition to measures protecting workers, they also need to keep in mind the safety of their clients. Additional measures to consider in such situations include the following:

- Frequently check and apply any official requirements, recommendations and limitations concerning the operation of your activity.
- Put up signs asking customers with any symptoms not to enter the premises.
- Put up signs to remind both staff and customers of safety precautions, in particular to keep within a safe distance from other people wherever possible, and to follow good hygiene habits.
- To protect staff and customers and limit congestion, determine the maximum number of people that can simultaneously stay inside your premises at any given time. Follow the official guidelines and consult with your local health authorities on how to do this.
- Manage entries into your premises, only allowing a limited number of people at any given time. Designate a staff member to carry out this control. Once the maximum capacity has been reached, new customers should only be allowed to enter gradually as those inside the premises withdraw.
- When customers are waiting outside the company's premises for their turn to enter, make sure that physical distancing rules are respected. Consider using floor marks or other aids to indicate appropriate distances.
- Manage circulation inside your premises. Every effort should be made to avoid cross flows, facilitating the circulation of people in one direction only. Floor marks can be used to indicate walkways.
- At the entrance/exit, provide for alcohol-based gel in sufficient quantity, advising customers to use it when entering and exiting the premises.
- Ask customers to only touch objects that they intend to buy.
- If feasible, put up plexiglass barriers at all points of regular interaction (e.g. reception areas, checkout areas) to further reduce the risk of infection for all parties involved. Clean the barriers regularly.
- Consider requesting customers and workers to wear face-masks, taking into account the recommendations of national authorities.
- Consider taking orders online or by telephone in advance and pre-packing orders to limit face-to-face time.
- Consider delivery services, if possible.
- If feasible, consider allowing customers to enter premises by appointment only.

9. Vulnerable workers

COVID-19 is a new disease and there is limited information regarding risk factors for severe illness. Based on information currently available, older adults and people of any age who have serious underlying medical conditions might be at higher risk for severe illness from COVID-19.[4]

Advise workers that if they belong to a group that can be more vulnerable to COVID-19 they should consult with their doctors. The doctor can assess the case and make recommendations for particular preventive activities, including preventive "work incapacity".

Preventive measures can also include e.g. telework or reassigning workers to tasks entailing lower risk of contracting COVID-19.

The doctor can also advise on increased preventive measures at home.

Any details about the workers medical condition must be kept confidential.

10. Protecting the mental well-being of workers in times of COVID-19 pandemic

The impact of the pandemic on workers' well-being

The coronavirus pandemic can induce a considerable degree of fear, worry and concern. There are several factors that can contribute to increased stress and anxiety, including:

- Anxiety caused by the health risks of coronavirus, especially for those who have been identified as being in a "vunerable group" or who live with someone identified as being in a 'vulnerable group'.
- Isolation, especially in the case of people working from home.
- Being overwhelmed with constant information.
- Uncertainty: not knowing how long the crisis will last, fear of losing a job or income, etc.
- Losing one's job, even if only temporarily.
- Increased pressure placed on working parents and carers by school closures.
- Increased workload demands placed on workers due to high number of absences and/or – especially in critical sectors – increased demand; and
- Dealing with grief and bereavement.

To help workers reduce stress and anxiety associated with pandemic consider:

- Engaging in clear, regular and accurate communication with workers, providing as much information as is needed to answer main questions but without fuelling speculation.
- Reassuring workers of what the company is doing so as to be as prepared as possible in responding to the pandemic.
- Making sure workers know whom to contact in case they need support or are feeling overwhelmed.

4 Including people over 65 years of age, people with chronic respiratory diseases, cardiovascular diseases, diabetics, undergoing cancer treatments, immunosuppressed people (e.g. with HIV).

- Encouraging workers to limit media consumption as continuous exposure to news, media, and social media may trigger or elevate anxiety, stress, or panic. It is better to stay informed by following just a few, authoritative resources such as a national health agency or the WHO.
- Setting a culture of compassionate leadership: equip line managers with the skills and tools necessary to have conversations with their teams to check in on how they are doing and recognise signs of distress.
- Reminding workers of the details of the Employee Assistance Programme if the organisation has one in place. They can be a key resource on issues such as mental health or finance.
- Even when there is no Employee Assistance Programme in place, pointing workers to the sources of information and advice regarding mental health and well-being e.g: from **WHO**, mental health organisations or national health bodies.

Adapting the support to the needs of workers

Everyone reacts differently to stressful situations. The concerns that workers have during the pandemic are likely to vary from person to person. Thus, the first step in supporting workers' mental health is to understand how they are feeling and what the factors influencing their well-being really are. Consider carrying out an employee survey or discuss these well-being issues with various employee groups. Having such information will help develop a more targeted support.

When preparing mental well-being support consider, as appropriate, three broad groups of workers: workers who telework, workers who are temporarily laid-off, and workers who continue or return to work on-site.

Supporting teleworkers

Many workers are teleworking full-time for the first time, isolated from co-workers and friends. Daily living routines can be disrupted causing added anxiety and stress. It is thus important to support workers in adapting to this situation.

Point workers to advice on how they can support their own mental health during telework period. For example, advise workers to: keep a regular work schedule, set up a designated space to work and take periodic breaks, set boundaries on work to avoid working unreasonable hours, engage in activities that bring joy and distract from existing challenges, stay connected with friends and family through online communication tools to prevent feelings of isolation and loneliness.

Also, consider supporting teleworkers by:

- Showing empathy and availability: Managers should understand that workers are likely feeling overwhelmed and anxious. They should be ready to listen to the workers, to answer questions and to reassure them about work and other issues that might come up.
- Encouraging connection, using digital communication tools: virtual meetings can be used for regular check-ins and to allow teams to connect with one another.
- Encouraging workers to "switch off": home working can contribute to an 'always on' culture, so managers should try to lead by example e.g. refrain from sending messages in people's downtime, and encourage workers to switch off too.

Pay particular attention to the needs of teleworkers with care responsibilities as during periods of schools and day care closures it can be challenging to combine care responsibilities with work. Discuss and consider with workers various options such as adjustment of performance targets, more flexible working time arrangements, reduction of working time, or leave.

Supporting workers who are temporarily laid off

People impacted by such arrangements may respond in different ways. Some may welcome a break from work, however, for many it will be a difficult time with emotions running high such as uncertainty over the future, losing a sense of purpose or feeling undervalued.

Consider asking workers placed on temporary lay-off schemes what they want and need. Different workers may have different preferences on how they wish to be kept updated, how often, and by whom.

For many people, their job forms a significant portion of their identity. Holding online sessions to bring workers together can help those on temporary-lay off to remain connected to the organisation and keep in touch with colleagues.

Consider suggesting alternative activities such as volunteering or online trainings to workers, so they can continue to develop during this period.

Workers who continue to work at company premises or return on-site

It is especially important to ensure that workers who continue to work on-site or return to company premises feel safe and supported. Communication about safety and hygiene measures is thus crucial.

Also, be aware of any special circumstances that workers may be in (such as being a carer), and discuss any possible adaptations that may be helpful to them such as flexible schedules, reductions in working time.

11. What to do if a worker develops COVID-19 symptoms at the workplace?

Check and follow guidance or procedures established by national and local health authorities.

Establish a plan on what should be done if a worker develops symptoms (fever, cough, shortness of breath) at the workplace. Inform workers about relevant steps and procedures. Consider the following:

- Isolate the affected worker, preferably in a separate room behind a closed door. If possible, open a window for ventilation. Provide a surgical mask for the affected worker.
- If it is an emergency (a worker has severe symptoms such as shortness of breath), call the emergency health services immediately. In other cases, call the designated public health helpline. Implement the instructions given.
- Restrict contact with the infected worker to what is absolutely necessary. Any person providing assistance to the affected worker should wear a mask, glasses and gloves.
- Clean the areas used by the affected worker in line with the guidance from public health authorities.
- Identify the affected worker's close contacts among co-workers (up to 2 days prior to the symptom onset) to identify other workers who could be considered as being exposed. Follow further instructions of the health authorities. Collaborate with them in any epidemiological investigation.

EBMOs may want to add national guidance and procedures

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ISBN 978-92-2-032220-8

Manpower & Maintenance Services Ltd.

Standard Operating Procedures for COVID-19 Cleaning

Manpower & Maintenance Services Ltd

Standard Operating Procedures for COVID-19 Cleaning.

A five-step approach is used:

1. Site Assessment – Quality Control
2. Pre-cleaning
3. Comprehensive Cleaning using our PowerClean Procedures
4. Sanitization/Disinfection
5. Post Site Assessment – Quality Control

Step One – Site Assessment

Information is gathered about what is to be done and to determine the chemicals, equipment and PPEs needed.

Step Two – Pre-Cleaning:

This includes general sweeping, dusting, cob webbing, removal of gums and debris from all surfaces. Surfaces include, but are not limited to, walls, floors, ceilings, doors, furniture, fittings and gadgets.

Step Three – Comprehensive Cleaning

All non-porous surfaces will be sprayed with 6% bleach mixed to a 1 in 5 solution allowing the solution to set for 15 minutes. After the allotted time a detailed cleaning of all surfaces both vertical and horizontal with a detergent cleaning solution is done. This is guided by our Power Clean Procedures. Manual attached.

Step Four – Sanitization/Disinfection

A hospital grade disinfectant appropriate for the infectious agent is used to sanitize/disinfect the agreed upon areas and surfaces.

This is applied by use of any one of the following equipment:

- Fogger
- Mister
- Backpack Sprayer

All predetermined surfaces will be thoroughly sprayed ensuring that the dwell (contact) time is met according to the disinfectant label.

Chemical To Be Used:

1. Cleaning Agents

All Purpose Cleaner	Purple Power
6% Bleach	Floor Maintainer
Scouring Cleanser	

Please note that other specialized cleaning agents may be used dependent on the type and use of the facility being cleaned.

2. Sanitizing/Disinfecting Agent

One of the following sanitizing/disinfecting agents will be used.

Virex II 256 Disinfectant

Vital Oxide

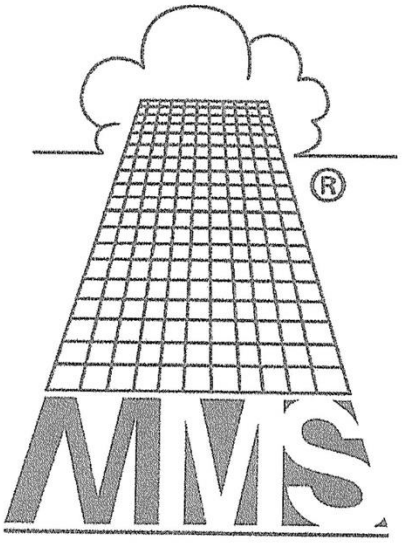
Step Five – Post Assessment

A walk through is done by representatives from the client and MMS Limited to ensure that the agreed upon scope of work was met.

-End-

Powerclean Procedures Manual

MAMPOWER & MAINTENANCE SERVICES LIMITED



Manpower & Maintenance Services Limited

POWERCLEAN PROCEDURES MANUAL

Prepared by: Manpower & Maintenance Services Limited

MANPOWER AND MAINTENANCE SERVICES LIMITED
POWERCLEAN PROCEDURES MANUAL

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  Furniture & Equipment: Desk, Shelves, Cupboard, Fans
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  Lightings, Light Switches, Bulbs
- Sweeping - See Floor Care
- Mopping - See Floor Care
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- Stove
- Gadgets: Coffee Pot, Blender, Microwave Oven, Toaster, etc.
- Furniture: Tables, Chairs, Food Trollies
- Windows, Doors, Walls
- Floor
- Skirting/Corners

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1.0 INTRODUCTION

The Directors and Managers of Manpower and Maintenance Services Limited (Manpower) welcome you as a member of its dynamic team which provides superior janitorial and portering services. It is important for you to know that you have joined a team which is known for its excellence in providing services to a variety of clients in health care, industries, commercial business and in office complexes.

Manpower provides a dynamic and highly supportive setting for all who work on staff or on contracts at all levels of service and in all categories of professional, technical and ancillary personnel. It is up to you to perform and to identify opportunities which will advance your career and enhance the operation of the Company.

This Handbook is designed to guide your work as you strive to deliver the high quality service that our clients deserve.

Manpower appreciates your contribution and looks forward to an amicable working relationship with you.

Managing Director

2.0. GATHERING EQUIPMENT AND SUPPLIES/CHECKING EQUIPMENT

A. Supplies

Assemble cleaning supplies on caddy or cart. This includes dusters, scouring pads, dustpan, counter brush, garbage bags, etc. Gather small cleaning equipment/tools such as brooms, clean dry and wet mops, mop bucket with wringer.

B. Equipment

For larger equipment such as floor machines and vacuum cleaners, make sure they are in working condition and are safe to use.

An extension cord may be necessary for distance from wall outlets.

Sign out supplies and equipment and report to location.

3.0. GENERAL CLEANING

Ash Trays

Empty ash-trays into waste bins. Damp wipe or wash ash trays. Dry with clean cloth and replace where found.

Picking Up Litter

Pick up by hand any large piece of litter, paper clips, staples or metal from floor surface. Check under furniture for same. Place in waste bin.

Waste Bins

Empty waste bins into garbage bag/rubbish sack. If waste bin has a liner, clean the bin then replace liner. If not, damp wipe or wash and dry waste bin as required. Replace bin where it belongs in an identified spot.

Dusting: Furniture & Equipment

Credenza/Desk/Table
- Dust or damp wipe items on credenza/desk/table. Replace items where found.
- Dust or Damp wipe credenza/desk/table top, sides and under sections.

Chairs/Benches
- Dust or damp wipe, dry seat and back of chairs/benches.
- Dust/Damp wipe dry arms of chairs/benches.
- Damp wipe legs/lower level of chairs/benches.
- Dry all items with clean cloth and replace where found, if removed.

NOTE: Chairs with fabric coverings will require vacuuming.

Shelves/Cupboard
- Dust or damp wipe surfaces of shelves/cupboards. If the height is above the reach of your hands, request ladder or extention for handle of mop, brush or squeegee.
- Dust/damp wipe, dry items on shelves, if items are removed for dusting, replace where found.

Fans	- Plug out fan from socket before cleaning, plug back in after cleaning. - Dust/Damp wipe upper, middle and lower section of fan. - Fan to be taken apart monthly, clean and re-assemble.
Telephone/Fax	- A separate piece of clean cloth is to be used on Phones/Fax - Damp wipe telephone receiver with clean duster using an approved sanitizer. - Damp wipe rest of Phone and Cord - Dry with clean cloth.
Other Equipment And Gadgets	- Dust, Damp wipe and dry surfaces of other equipment and gadgets as instructed.

CAUTION: Do not solicit nor remove any items from desks, shelves etc. for personal use.

Dusting Surfaces

Partitions	- Dust/Damp wipe and dry partitions with clean cloth. If the height is above the reach of your hands, request ladder or extension for handles of mop, brush or squeegee.
Counters	- Damp wipe tops and side of counters with all purpose cleaner. - Dry with clean cloth. - Cobweb/Dust under section of counters.
Doors	- Damp wipe door knob - Dust/Damp wipe outside and inside of door
Walls	- Spot clean/wipe wall. If the height is above the reach of your hands, request ladder or extension for handles of mop, brush or squeegee.

Windows & Covering-Drapes/ Blinds	- Dust/Damp wipe window, window frame and sill to remove dirt. - Wipe windows with glass cleaner and clean cloth to acquire sheen and finish without streaks. - Damp wipe if wooden/metal - Dust or vacuum Blinds. Some types will require damp wipe, and dry with clean cloth. - Vacuum drapes as required.
Light Bulb and Switches	- First turn off lights before dusting bulbs and cleaning plate around lights switches and sockets. Dry with clean cloth.
Sweeping	- See Floor Care page 9
Mopping	- See Floor Care " "
Stripping/ Polishing/Buffing	- See Floor Care " "
Vacuuming Carpet	- See Floor Care " "
Skirting/Corners	- Damp-wipe skirting after mopping floor. Dry with clean cloth. If natural wood - apply a little Furniture Cream at lest monthly. - Pay attention to corners. Remove built up dust or dirt with hand brush or broom, sweep into dust pan.
Cobwebbing	- With a cobweb broom or clean mop with extention handle where indicated sweep top and corners of ceiling to remove cobwebs. With a hand broom sweep corners of walls.

4.0 BATHROOMS/WASH ROOMS

- Spray air Freshner or open a window.
- Pick up any litter from floor and put into waste bin.
- Empty waste bin into Rubbish sack/Garbage bags. If bin has a liner clean the bin before replacing the liner. If not damp wipe or wash bin and dry as required.
- Replace bin where it belongs in an identified spot.

Toilet-Step I

- Flush toilet to reduce water level in bowl.
- Apply cleanser over entire inner bowl surface and under rim. Leave on for 5-10 minutes while you clean the rest of the wash-room.
- Using toilet brush or swab, clean the inner surface of the bowl, flush again and leave it clean and fresh. Damp wipe the outer surface of the bowl, paying special attention to behind the base of the bowl.

Toilet Step 2

- Scrub bowl and under rim with toilet brush.
- Flush Toilet
- Spray all purpose cleaner disinfectant on rim of bowl, underside and top of seat.
- Wipe clean with clean cloth.
- Clean seat cover, hinges, outside of bowl and tank.

Urinal-Step I

- Remove any debris/litter from urinals. Apply cleanser in lines across urinal.
- Leave on for 5-10 mins while you clean the rest of the washroom.
- Finish same as toilet bowl.

Urinals Step 2

- Scrub with toilet brush.
- Rinse well.

Wash Basin

- Wet hand basin. Using all purpose cleaner, sanitizer.
- Where there is scum use light abrasive material to scrub inside, outside, taps and pedestal of basin. Rinse clean, dry with clean cloth.

Mirrors	- Using lint free duster and glass cleaner polish mirror until streak or mark free.
Counters/ Cupboard	- Damp wipe top and sides of counter and cupboards with all purpose cleaner. - Dry with clean cloth. - Cobweb/dust under section of counters.
Walls/Window/ Doors	- Spot clean/damp wipe all wall surface as required. - Dust, then damp wipe inner and outer surface of door. - Dry with clean cloth. If natural wood, apply furniture cream at least once monthly. - If glass clean with a lint free duster, using glass cleaner, polish glass to acquire the required sheen, leave no marks, streaks, nor foggy appearance. - Damp wipe door knob/handles - Dry with clean cloth - Dust/damp wipe window, window frame and sill. - Dry with clean cloth. - If glass clean with a lint free duster, using the required glass cleaner, polish glass to acquire the required sheen, leave marks, streaks nor foggy appearance.
Wall Decorations/ Paintings	- Dust frames with clean, dry lint free cloth. If displaced, straighten them.
Showers/Bath Tubs/Mats	- Scrub inside/outside wall surface and floor of showers/Bath Tub with a mild abrasive all purpose cleaner and/or with mild abrasive cleaner. - Wash shower curtains as required, leave dry. - Clean shower door inside and outside, leave dry. Where there are mats, wash and dry them. - Scrub taps and other gadgets eg. soap holders etc. Dry with clean cloth.
Supplies	- Replenish Supplies soap, toilet paper, towels etc. (if a required part of your duties).

Floor	- If tiled surface, first sweep and damp mop using all purpose cleaner then mop with disinfectant and let dry. Depending on the type of floor apply floor maintainer or polish and buff as indicated. Where there is carpet, vacuum the area. **NOTE: Always use separate cleaning cloth for toilet and make sure it is washed clean after use.**

5.0 KITCHEN/PANTRY/DINING ROOM

Waste Bin	- Put wet rubbish, eg. tea bag or coffee filters into bin liner, then put this with other general waste into rubbish sack/bin.
Garbage Disposal	- Empty bin at designated dump, clean and replace liner, wash and dry bin as required.
Crockery and Cutlery	- Wash up all crockery and cutlery (where applicable). Dry the items and stack neatly on work surface or replace correctly in respective drawers or cupboards.
Surfaces	- Damp wipe all surfaces with all purpose cleaner, including cupboards, refrigerators freezers, counters, pipe works;
Sink/Drain Board and	- Thoroughly clean sink, draining board tap using all purpose cleaner or mild abrasive cleaner where there is scum.
Stove	- Clean inside and outside of stove. Depending on the type of surface eg, enamel, stainless steel or coloured metal. **NOTE: seek advice from your Supervisor which cleaning agent is to be used.** - Damp-wipe clean all chemical use. - Dry with clean cloth.

Floor	- Sweep floor, use dust pan and hand brush or broom in corners and other awkward areas. - Damp mop floor, using all purpose cleaner on unpolished floor and floor maintainer on a polished floor. Buff where indicated.
Gadgets (Coffee Pot, Blender, Toaster Microwave etc)	- Damp wipe outer surface where applicable and inside as indicated. - Dry with clean cloth - If removed, replace where found.
Food Trollies	- Thoroughly clean trollies, with appropriate cleaner depending on the type of surface and including upper and lower counters and legs. - Rinse trolley clean with clear water to remove all purpose cleaner/abrasive clean. - Dry with clean cloth.
Windows, wall, doors	- (see procedure on page 7)
Skirting/Corners	- (see procedure on page 5)

6.0 FLOOR CARE - CLEANING MAINTENANCE SYSTEM

The four (4) steps to Cleaning Maintenance System

1. **Preventative Cleaning**

   The proper procedures to maintain floor surfaces and avoid excessive built-up of dirt, that will require heavy stripping. Floor will have a consistent sheen with a minimum amount of marks or scratches.

   a. Dry Mop
   b. Damp Mop
   c. Spray Burnish
   d. Restore

2. **Interim Cleaning**

   Slight repair to floor surface to remove film and scuff marks where there is heavy traffic.

   a. Wet Scrubbing
   b. Scrub/Re-coat
   c. Light Stripping

3. **Restorative Cleaning**

   Restorative cleaning is designed to restore heavily damaged floors that have little or no sheen. It removes built-up, wax/polish and dirt.

   a. Wet Stripping
   b. Re-Coat

4. **Salvage Cleaning**

   This is designed for floors that have been badly damaged by improper cleaning procedures. Floors will have consistent discolouration and heavy dirt built-up.

   a. Heavy Stripping
   b. Re-Coat

CAUTION:	**Before you begin, place WET FLOOR SIGNS in position where they can be seen easily.**
Sweeping/Dry Mopping	- Make sure mop or broom is clean. - Use a soft broom or mop, sweep or dry mop off in one direction only, picking up rubbish every few feet. Do not sweep rubbish the entire length of a room. - Start from the rear. - Move towards the entrance - Keep mop or broom on the floor. If mop or broom is lifted from the floor, this will spread the dust. **NOTE: For Hospital/Health Facility - use only damp mop for sweeping.** - Sweep accumulated dirt towards front. Take up with a dust pan. - Use dust pan and brush in corners and awkward areas.
Spot Mopping	- Spot mop any spillage or mark from floor. - Work from outside of mark to middle. Remove stubborn mark with abrasive cleaner, if the floor surface has been identified for its use.
Stripping	- Dilute stripper in bucket according to the proportion suggested by the Supplier. - Apply freely all over or section by section for large floor areas. - Allow to soak for 5-10 minutes depending on the build up of polish. - Scrub with floor machine and stripping pad. - Mop thoroughly first with clean water changing the water as it turns light grey. Use several changes of water until all trace of the stripper is removed. - Mop with a floor maintenance to stabilize stripper. - Mop again with clean water (several changes of water) until water is left clear. - Allow to dry. **NOTE: If there are white patches on the floor, stripper has not been completely removed. Mop again!**

Polishing

- Make sure you use a clean mop designated for polish only.
- If mop is dry, wet mop with clean water. Squeeze dry with wringer.
- If a large area is for polishing, pour polish in clean mop bucket.

  Immerse mop in polish, squeeze out excess polish with wringer.
- Apply polish with thin even coat.
- Wait for 25-30 minutes or until completely dry.
  Depending on the condition of the surface after the first application, apply second, third, or fourth coats as required. Allow to dry for 25-30 minutes between coats.
- If small area, pour polish unto mop.
- Follow procedures for large area.

NOTE: Do not splash polish on walls, furniture nor equipment, if this should occur, wipe off immediately.

Daily Maintenance

Floor should be maintained daily with a neutral type maintainer which does not remove the polish but removes light squffing and surface dirt.

- Sweep entire area clean with soft broom/dust mop.
- Dilute in mop bucket floor maintenance to the required dilution ratio suggested by the Supplier.
- Dip mop in solution squeeze or wring out excess solution with mop wringer and apply to floor.
- The mop should be applied as in the figure eight (8) and turned frequently to reduce the wear and tear.
- Throw away dirty solution use clean water, and clean mop, mop floor until water stay clean (several changes of water).
- Mop up all water by squeezing mop often. Allow to dry completely.

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Buffing	- With a floor machine and buffing pad (attached), buff surface to a high gloss finish. **Note: For the Charger 1500-High Speed Machine, use only grey burnishing pad.** - Use a lobby sweeper or dry mop to mop off dust after buffing.
Spray Buffing	- Pick up litter, sweep/dry mop floor. - With diluted floor maintainer, pour solution into trigger spray bottle. - Apply a fine mist of solution to the floor and buff with the floor machine with a pink pad.

7.0 CARPET CARE

Spot Cleaning

1. Vacuum area thoroughly
2. Apply pre-treatment to soil area, leave for 5-10 minutes
3. Apply carpet shampoo (via machine) and clean
4. Rinse and remove excess water with wet/dry vacuum
5. Allow to dry thoroughly

Shampooing

1. Vacuum entire area to be shampooed thoroughly
2. Apply pre-treatment to stains and soils. Leave for 5-10 minutes
3. Apply carpet shampoo thoroughly and leave for 10-15 minutes
4. Work machine forward and backward in overlapping lanes
5. Rinse carpet while pulling machine backward
6. Remove excess water from carpet with wet/dry vacuum
7. Allow carpet to dry thoroughly

Vacuuming

1. Pick up staples, paper clips and other litter from floor before you start to vacuum.
2. Start from the furthest point from door and work towards door.
3. Use an upright vacuum cleaner for large areas.
4. Use attachments, e.g., crevice tool to do corners, beneath desks and other awkward areas.

Note:

1. **Vacuum cleaner should be signed out in the presence of the Supervisor on duty and checked to make sure it is in good working order.**
2. **Janitor: When you have finished vacuuming, clean off vacuum cleaner; empty bag and replace. Sign back in vacuum cleaner with Supervisor after inspection.**
3. **Supervisor: Every week, check brushes and belts. Notify the Operations Assistant of the need for servicing.**
4. **For the removal of gum, use an appropriate gum remover to freeze gum. The gum will crumble for easy removal.**
5. **To remove paint spots, use #1 reducer thinner which will melt paint for easy removal with machine.**

8.0 FLOOR TYPES

There are numerous different types of floor available, but in general these can be divided into three specific groups: (i) resilient flooring, (ii) stone flooring and (iii) wooden flooring. Each type of floor exhibits specific features and requires specific methods of maintenance. A basic understanding of these features and maintenance requirements will simplify the choice of maintenance system for your floors.

(i) Resilient Flooring

(a) Porous:
Asphalt Tile

A mixture of asbestos fibres, pigments and inert fillers bound together with an asphalt or resin binder. It is a brittle, hard floor which is normally brown or black in colour.

Solvents will soften the surface and it is therefore recommended that the floor either be spray cleaned or be treated with a water based emulsion polish/seal.

Linoleum

Consists of linseed oil, finely ground cork or wood flour, some mineral fillers, pigments and a resin binder. These are mixed together, heated under pressure and then bound onto a hessian or cardboard backing.

It is a unique surface in that it can be maintained with either a solvent wax polish or a water based emulsion polish. Once you have embarked on a maintenance programme of solvent wax polishes you cannot successfully change to a water based emulsion polish, whereas it is possible to change from a water based system to a solvent wax system.

(b) Non-Porous:
No-polish Flooring

A broad class of flooring usually having a clear wear layer over a vinyl backing. It may be textured and is designed for minimum maintenance.

Rubber

Consists of natural rubber which is mixed with pigments and a filling compound. Typical locations for rubber floors are areas where quietness is important.

They can be maintained using a water based emulsion polish or alternatively with no polish at all. Neutral detergents should be used for mopping because rubber does not respond well to strong alkaline solutions.

(ii) Stone Flooring

Ceramic

Vitrified tiles normally found in kitchens, bathrooms and restaurants.

They only require damp mopping for maintenance. They may be scrubbed with strong alkaline cleaners, but the application of any polish is not normally recommended as the chance of success is slim, due to their smooth surface.

Concrete

Usually found in factories, entrances and on stairs.

It is prone to dusting and therefore must be sealed. Sealing can be of the oleo-resinous or acid hardening type. The acid hardening process is commonly carried out by builders before they leave, marking the floor relatively dust free without enhancing gloss. An oleo-resinous seal (e.g. Traffic Cote Plus) leaves the floor shiny allowing the easy removal of soil. Some seals may be pigmented to give a degree of colour.

Marble

A natural stone quarried from the ground requiring the minimum of maintenance and is normally laid in slabs rather than tiles.

Maintaining a marble floor is fairly simple using a water based seal and emulsion polish. Strong alkaline strippers should not be used frequently and acids should be avoided as they will dissolve the marble. (Also see Crystallisation under maintenance methods).

Quarry Tiles

Quarry tiles are manufactured by burning untreated clay in moulds and are laid on a cement bed. They are commonly found in toilets, kitchens and changing rooms as they are resistant to most spillages.

Maintenance consists simply of damp mopping, leaving the floor looking dull but clean. The aesthetic appearance of the tiles can be improved by applying a water based emulsion polish, although adherance problems can sometimes be encountered.

Terrazzo

Often found in halls, lobbies, entrances and washrooms it consists of a mixture of marble chips set in a bed of portland cement. The mixture is then polished to a smooth finish.

As with marble the use of harsh alkaline cleaners or acids should be avoided. Terrazzo responds well to mopping and buffing with a neutral cleaner. It may also be protected with a water based seal and emulsion polish, but again like marble it should not be treated with a solvent wax polish.
(Also see Crystallisation under maintenance methods)

(iii) Wood

wood floors are normally manufactured from either hard or soft wood and are laid in strip, herring-bone, or block parquet flooring. Soft wood such as spruce is generally very porous and is consequently rarely used in an industrial environment. Conversely, hard wood floors, such as maple, teak or oak are typically used in an industrial environment.

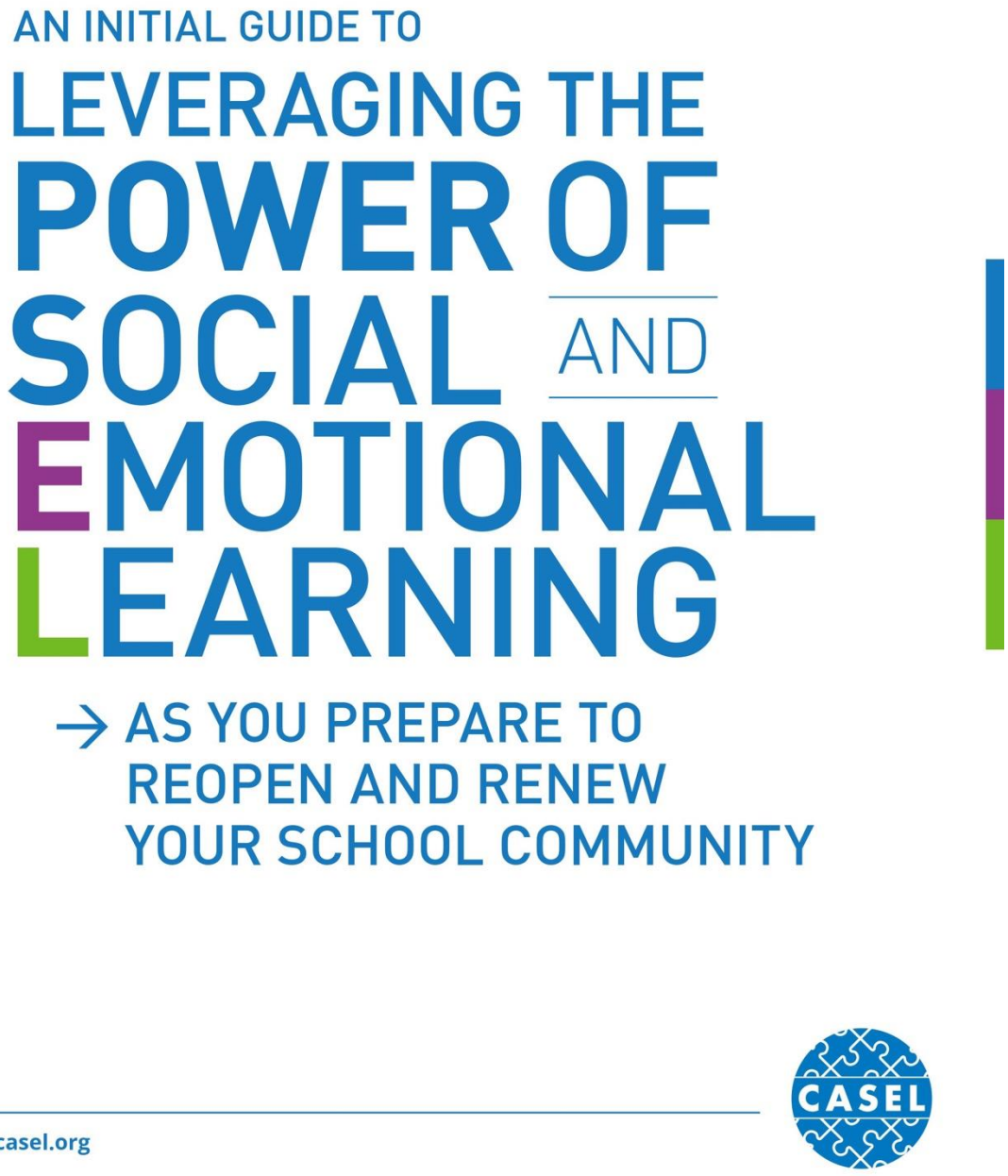
There are various maintenance options for wooden floors with the main criteria being whether or not the floor is sealed.

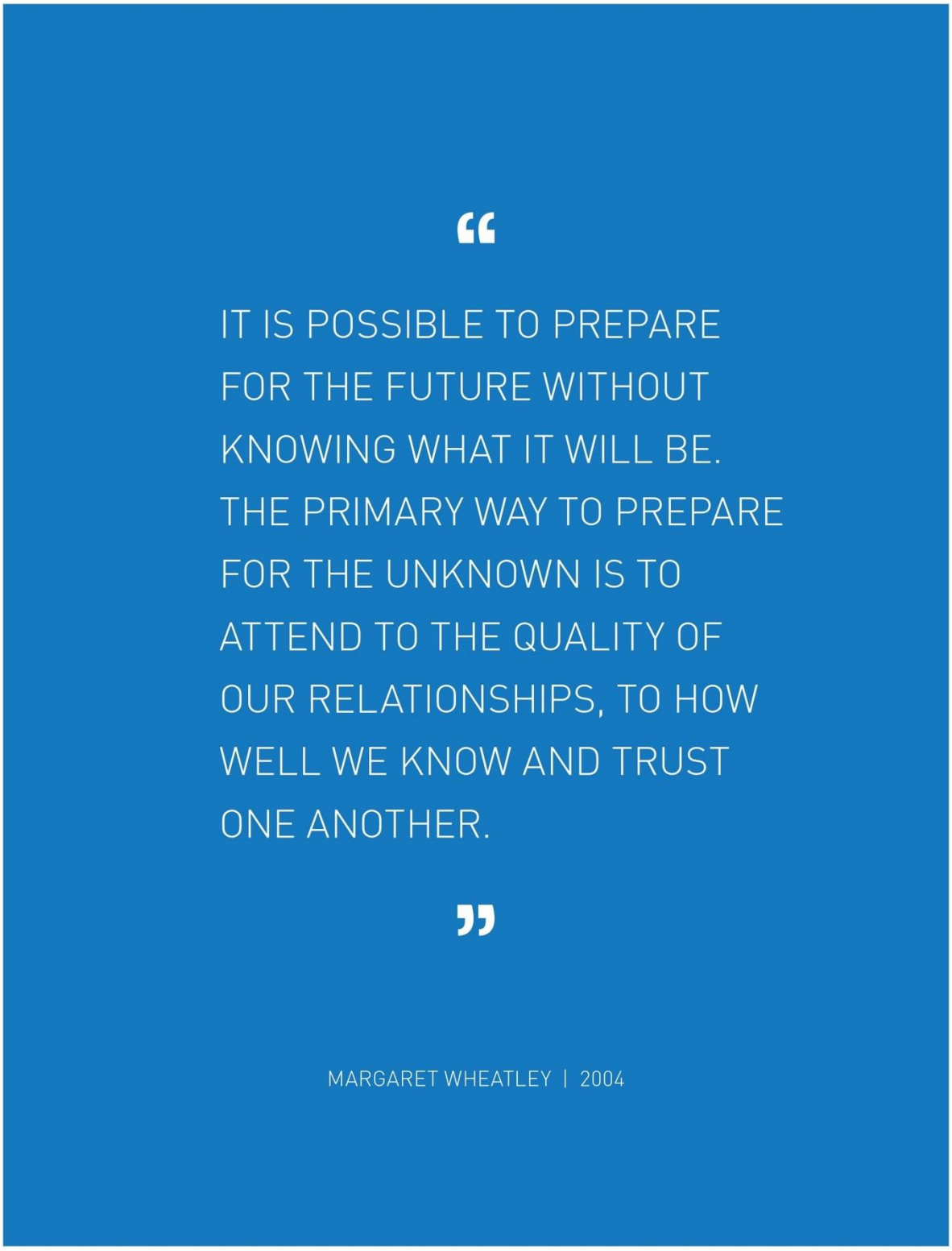
(i) For an old floor which has never been sealed and has been treated with a solvent wax polish the recommended maintenance is to continue with the same method.

(ii) The second option is to seal the floor. Unless the floor is new it would have to be sanded and then sealed with either a polyurethane or oleo-resinous seal. This seal then needs to be protected with a polish, either solvent wax based or water based emulsion.

The Collaborative for Academic, Social, and Emotional Learning (CASEL)

An Initial Guide to Leveraging the Power of Social and Emotional Learning As You Prepare to Reopen and Renew Your School Community




“
IT IS POSSIBLE TO PREPARE FOR THE FUTURE WITHOUT KNOWING WHAT IT WILL BE. THE PRIMARY WAY TO PREPARE FOR THE UNKNOWN IS TO ATTEND TO THE QUALITY OF OUR RELATIONSHIPS, TO HOW WELL WE KNOW AND TRUST ONE ANOTHER.
”
MARGARET WHEATLEY | 2004

INTRODUCTION

While much uncertainty surrounds how and when school will reopen, we know that social and emotional learning (SEL) will be critical to re-engaging students, supporting adults, rebuilding relationships, and creating a foundation for academic learning. This unprecedented shift to a new type of learning experience may have a lasting and profound impact on young people's academic, social, emotional, and life outcomes. School leaders will need to bring together administrators, teachers, school staff, families, youth, and community partners to co-create supportive learning environments where all students and adults can enhance their social and emotional competencies, feel a sense of belonging, heal, and thrive.

About This Initial Guide

In this guide, CASEL shares a framework with actionable recommendations to help school leadership teams plan for the SEL needs of all students and adults during the upcoming transition into summer and the beginning of the new school year. While this guidance is written for school leadership teams, states and districts will play critical roles in ensuring schools have the resources, support, and guidance needed to carry out these actions.

This guide positions SEL as a critical underpinning to the success of overall transition planning, recognizing school leaders have multiple other considerations for reopening schools, including academics, operations, access to technology, and physical health.

CASEL is also working with many collaborators to produce comprehensive guidance, scheduled for release in late June, with additional recommendations, resources, and tools to help school leaders support and sustain SEL throughout and beyond the pandemic.

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Educators in this moment of transition have an opportunity to reflect, innovate, and build on evidence-based practices in schools across the country. The COVID-19 pandemic has underscored SEL as an essential part of high-quality education—highlighting our relationships, resiliency, and collective problem-solving as fundamental to teaching and learning. While nearly everyone has faced disruption, we must acknowledge the complex, varying ways individuals have experienced these months. The pandemic has exposed and exacerbated existing inequities in education and emphasized the need for learning environments that welcome and support all students, including those who were not equitably served before COVID-19. In the process of reopening schools, SEL provides an opportunity to elevate student voice and agency, support educator SEL and well-being, deepen partnerships with families, broaden our definition of what learning is and where it takes place, and contribute to more inclusive and equitable learning environments.

CASEL defines SEL as the process through which children and adults understand and manage emotions, set and achieve positive goals, feel and show empathy for others, establish and maintain positive relationships, and make responsible decisions. Decades of research, practice, and policy have demonstrated the effectiveness of SEL in supporting students' academic and long-term success. By systemically integrating SEL across classrooms, schools, homes, and communities, adults and students work together to develop and apply five core competencies of self-awareness, self-management, social awareness, and responsible decision-making. These competencies are needed generally throughout our lives and particularly in this moment to manage our own stressors, anxieties, and joy; understand how the pandemic is influencing others (often in inequitable ways); and build relationships and make decisions that best support our communities.

We recognize that schools are at different stages within their SEL journey. Whether just beginning or deepening systemic SEL implementation, schools can build on their existing strengths to develop a transition plan that supports SEL for students and adults. The guidance below is organized around four critical actions, which are adapted from what we have learned about systemic SEL in collaboration with researchers and practitioners:

1. **Take time to build partnerships, deepen your understanding, and plan for SEL.**
2. **Design opportunities for adults to connect, heal, and cultivate their own SEL competencies and capacities.**
3. **Create emotionally and physically safe, supportive, and engaging learning environments that promote all students' social and emotional development.**
4. **Use data as an opportunity to deepen relationships and continuously improve support for students, families, and staff.**

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1 Take time to build partnerships, deepen your understanding, and plan for SEL.

Schools will face many challenges—from how to manage logistical and technological obstacles to how to accelerate academic learning. To tackle these important issues, schools will need to simultaneously tend to the social and emotional needs of both children and adults. By prioritizing SEL and the needs and concerns of all students and families, leaders can begin to cultivate the healing, empathy, resiliency, and collective resolve needed to navigate the transition ahead and more effectively continue the work of teaching and learning.

- **Communicate widely and consistently that SEL is foundational to the holistic success of your school community.** If needed, build your own foundational understanding of SEL research and practices. Use newsletters, social media, and meetings with staff, families, students, and community partners to share how social and emotional competencies and supportive environments can support children and adults through this transition and the new ways of learning that may occur in schools.
- **Elevate the voices and perspectives of students, families, educators, and other adults to develop responsive transition plans**. Use formal and informal ways to identify their hopes and concerns about transition while communicating the school's desire to incorporate their perspectives into decision-making. For example, provide individual outreach when possible, call or survey students and families, or hold focus groups with staff and key community partners. When reaching out to families and students, use home languages and inclusive strategies for those who have limited access to technology. Also consider alternative ways to reach all families, such as through churches, social service agencies, neighborhood groups, social media, and other community connections.

Put it Into Practice

Learn From Families, Students, and Community Partners

The sample questions below can be used as a starting point for phone/video conferences or written surveys that engage stakeholders in sharing their perspectives.

- What has your experience been like since school has been closed?
- What is on your mind as you think about next school year? What are your biggest hopes or worries?
- What has our school done well during the past months, and what could we have done better?
- How might you like to contribute as we prepare to transition to a new school year?
- What will help you learn this upcoming year?
- What can we do to make school feel even more like a community that cares for you?

- **Examine where SEL efforts have been impactful and where more support is needed.** Review whether the strategies taken during school closures to promote SEL have been effective in supporting and engaging students. Find out which students and families have received individual outreach from staff, who has engaged in distance learning, and what barriers have prevented others from engaging. Identify which staff have felt comfortable with SEL distance learning strategies and those who may require additional support. Also pay attention to individual needs that will impact the ability to return to school. Have staff, students, or their families experienced a loss of a loved one, housing or employment instability, or other circumstances that may require support? It may be helpful to connect with local service agencies and community partners to help identify these needs and provide additional support.

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- **Build a broad coalition to integrate SEL and academic supports into transition plans, and create and maintain a caring, safe, and supportive environment for all students and adults.** You may want to form a transition team with representation from administration, teachers and support staff, families, students, and community partners. This plan should be based on needs identified by members of the school community and build on the school's current strengths, such as existing SEL programs and positive relationships between staff and students. Also include strategies for continually partnering with families and re-engaging the most vulnerable students.

Put it Into Practice

Embedding SEL Throughout Your Transition Plan

Use this quick checklist to think through practical ways your school can integrate SEL into transition plans. The rest of this brief provides additional guidance for the strategies listed below.

- ☐ **Two-Way Communication:** Are we staying in close contact with school staff, students, families, and community partners—both to share new information and address concerns, and to receive ongoing input and feedback into transition plans?
- ☐ **Staff Community-Building:** Have we set aside time for staff to reconnect, process their emotions and experiences, reflect on what they have learned and how they are applying social and emotional competencies, and collaborate on ways to support students' SEL throughout in-person or distance learning?
- ☐ **Staff Professional Learning:** Have we prepared professional learning that staff will need to promote students' SEL, build strong relationships and create supportive learning environments in person and during distance learning, and support students who may be grieving or have experienced trauma?
- ☐ **Supportive Learning Environment:** Have we planned that all classes (whether in-person or distance learning) will devote time to building community, reflecting on experiences, and listening to students' ideas and concerns?
- ☐ **Promoting Student Social and Emotional Competencies:** Have we identified ways that all teachers help students enhance and practice competencies through distance learning and in-person settings, either through existing programs, regular class meetings, group and individual check-ins, or instructional practices that allow for reflection, discussion, and collaboration?
- ☐ **Student Support:** Do we have plans in place and have we partnered with families and community agencies to proactively identify, provide, and monitor additional supports to students who are struggling socially, emotionally, behaviorally, or academically?

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2 Design opportunities for adults to connect, heal, and cultivate their own SEL competencies and capacities.

Transition plans need to attune to the social and emotional needs of all the adults responsible for supporting students' learning and development. The stress and well-being of teachers, principals, and staff are not new concerns, but the disruptions caused by COVID-19 have added to educators' anxiety, worry, and stress. In a survey by CASEL and the Yale Center for Emotional Intelligence in late March, thousands of teachers described their most frequent emotions during COVID-19 as anxious, fearful, worried, overwhelmed, and sad. They cited the stress of adapting to virtual classrooms and working from home while caring for their loved ones. By creating time, space, and working conditions that help adults feel connected, empowered, supported, and valued, school leaders can help cultivate adults' SEL and overall well-being.

- **Allow space for connection, listening, and healing among all leaders and staff in the school building.** This may include carving out time during existing virtual or in-person meetings for staff to process and share their feelings, engage in community-building activities, reflect on how they can use their own social and emotional competencies to support one another and their students, and create individual plans for ongoing self-care.
- **Capture this moment to identify new opportunities.** Engage staff in reflecting on what they've learned from the past few months and how this experience will shape the coming years. Provide time for staff to discuss with one another: How have disruptions to class and school revealed strengths in ourselves and students? What are some new ways to facilitate learning? Where may there be disengagement and inequity? How can we better partner with families? Offer ongoing opportunities for staff to collaborate on ideas for how to use this learning to inform a collective path forward.
- **Provide professional learning to build educators' capacity to support students' SEL.** This includes professional learning that helps staff build relationships and integrate SEL into in-person and distance learning, create equitable learning environments, identify signs of trauma and mental health concerns, and support grieving students. Free online offerings may provide a starting point over the summer that connects to a longer-term professional learning plan during the school year.
- **Maximize staff members' abilities to connect with students, families, and community partners.** For example, consider how staff or community partners can coordinate to check in regularly with a small groups of students and families; how counselors, social workers, school psychologists, and nurses can connect with students and families before schools reopen and during blended or distance learning; and how school staff can better align with community partners in supporting adults and students.
- **Ensure access to mental health and trauma supports for adults.** Some adults in the building may be struggling with mental health issues, trauma, secondary traumatic stress, or "compassion fatigue." Look for signs that adults might need more support and identify available resources. You can use the SAMHSA mental health services locator to search for resources in your community.

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Related Resources

Free Online Professional Learning for Educators

Self-care and resiliency

- CASEL Cares Webinar: Strategies for Being Your Best 'SEL'f
- CASEL Cares Webinar: How Mindfulness Can Help

Educator strategies that promote students' SEL and supportive learning environments

- Creating Opportunities Through Relationships
- Sanford Inspire Online Learning Portal on SEL and Engaging Instruction
- Friday Institute's Social and Emotional Learning for Educators
- Teaching Complex Current Events and Supporting Student Well-being (Facing History and Ourselves)
- National Equity Project's Recorded Webinars on Equity in the Classroom, Implicit Bias, and Structuralized Racism
- Incorporating SEL into Classroom Instruction (Tennessee Department of Education)
- Social and Emotional Learning in Washington State Schools: Building Foundations and Strategies Module

Supporting students with grief and trauma

- Supporting Grieving Students (National Center for School Crisis and Bereavement)
- Building Trauma-Sensitive Schools (National Center for Safe and Supportive Learning Environments)

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3 Create emotionally and physically safe, supportive, and engaging learning environments that promote all students' social and emotional development.

A large body of research demonstrates the effectiveness of evidence-based SEL programs and practices to support students' academic and long-term success. The disruption during the pandemic has further highlighted the importance of social and emotional competencies to help students cope with challenges, manage stress, practice empathy, create social bonds across distance, make healthy decisions, take collective action, and manage loss and grief. These situations elevate the role of supportive adults and family-school partnerships in creating conditions that help students develop their academic, social, and emotional competencies to navigate daily interactions and challenges, including modified schedules and new learning experiences.

Put it Into Practice

Addressing Students' Developmental Needs During Transition

Students go through many transitions from early childhood to young adulthood, such as the annual return from summer break or the transition from middle to high school. What happens during these transitions, and the degree to which students' developmental needs are met, influence their social and emotional competencies and long-term success. To help students with the important transition into this coming school year, identify ways to meet their developmental needs. For example:

- **In early childhood programs:** Provide young children with simple strategies for exploring, discussing, and regulating their emotions. Read alouds offer an easy way to prompt conversations about how big changes make them feel.
- **In elementary school:** Support students in developing relationship-building and conflict-resolution skills by helping them co-create shared agreements for their new class or distance learning environment.
- **In middle school:** Offer adolescents an opportunity to reconnect and create a sense of closure from the previous school year, such as by writing letters to their former classmates or teachers, or discussing with peers how the last few months will impact their perspectives as they enter a new grade.
- **In high school:** Provide older students with a way to reflect on and document their experience and what they've learned about themselves during the pandemic, either through journal writing, artwork, music, or other creative outlets.

For more practices, review the SEL Providers Council website.

- **Intentionally build structures that promote supportive adult-student relationships and a sense of belonging.** Ensure every student has at least one caring adult at the school who checks in regularly with them and whom they can reach out to. Also examine daily schedules or class assignments to create greater opportunities for meaningful teacher-student relationships. Examples include minimizing the number of transitions between teachers and classrooms (e.g., through team teaching in elementary/middle schools or block scheduling high schools), creating or extending time in homeroom or advisory classes, and "looping" students with the same teachers and peers from the previous year. If distance learning continues, identify routines to maintain or deepen connections virtually or over the phone, such as through smaller group meetings or individual check-ins. Recognizing that new structures will most likely be in place, create consistent routines and procedures that allow for flexibility as much as possible. Predictable structures promote a sense of safety that helps students, especially those who have experienced trauma or struggle behaviorally, regulate emotions and take on new challenges and developmental tasks.

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- **Weave in opportunities for students to practice and reflect upon social and emotional competencies throughout the day.** Identify developmentally appropriate SEL competencies and standards, which may be available through your state or district, that students and adults can work on together to support the transition, such as stress-management, communication and listening skills, collaboration, and help-providing and help-seeking behaviors. Continue any existing evidence-based SEL programs or identify simple strategies that educators can use right away, such as "SEL Kernels," classroom community meetings, or small mentoring groups that can be used in person, during blended and distance learning, and at home to help develop those competencies. Academic instruction can provide additional opportunities to practice SEL through reflection, interaction, cross-age peer tutoring, leading discussions, brain breaks, and other intentional practices. Also consider creative ways to promote the SEL benefits of less-structured social times, such as recess and lunch, even when some levels of physical distancing may be necessary.

- **Engage students in developmentally appropriate conversations and lessons to discuss past, current, and future impacts of the pandemic on themselves, their families, their communities, and the broader world.** This can include distinguishing facts from misinformation, as well as opportunities for students to suggest strategies for their school or community to prevent the future spread of disease and address other needs in their community. Support teachers in facilitating conversations and lessons to discuss the impact, history, and ways to respond to biased or stigmatizing comments and behaviors related to the disease.

- **Collaborate with families and community partners to align on strategies for supporting students' SEL at home and during extended learning.** Invite family members to join the school SEL team, help identify SEL programs and practices that can be used in classrooms or at home, participate in school or classroom SEL activities, and share information about what kinds of supports their students need. Also work to align SEL efforts with key community partners that provide opportunities for students to build caring adult relationships and engage in activities that motivate them, such as out-of school time programs, sports, and other extracurricular activities.

- **Identify support for students who are struggling.** While not all students have the same experiences, some students may have experienced grief, anxiety, or trauma that may shape how they engage academically, socially, emotionally, or behaviorally. Support your staff in proactively identifying and meeting the needs of students who may be struggling. Work with family and community partners to create a comprehensive plan, which may include providing additional mental health and trauma supports, or connections to food, shelter, technology, transportation, or other resources. Monitor the response to ensure needs are met.

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4 Use data as an opportunity to deepen relationships and continuously improve support for students, families, and staff.

During this time of rapid innovation and quick action, an ongoing continuous improvement process will help ensure that efforts meet the needs of all students, including those from historically marginalized groups. This includes collecting and reflecting on data that elevates the perspectives of students and families, identifying and addressing inequities and challenges, and building upon successes to continuously improve the support to students, families, and staff.

- **Engage staff, students, and families in sharing ongoing feedback and partnering on continuous improvement.** This may take the form of existing or new school climate surveys, focus groups, phone calls, or other creative strategies. Consider what form of collecting feedback will be most inclusive of all families and students, and whether families and students can help design survey questions or lead focus groups. Feedback questions may include asking about the level of social and emotional support students receive from teachers, staff, or peers; support that staff receive from leadership; student, staff and family needs during distance or blended learning; student and staff emotions throughout the school/work day; and how well staff are communicating with families. After gathering feedback data, continue the conversation through individual or small-group interviews to help contextualize responses and better interpret results. Consider sharing this data with staff, students, and families and involving them in data reflection and problem-solving.
- **Support educators in reflecting on data around their own instructional practices and classroom climate, especially when trying out new strategies or modes of teaching.** This summer and fall, teachers will continue to take on new technologies, adjust to shifting work environments, address student concerns, and much more. They will need supportive leaders who create a culture of continuous improvement. Help teachers collect feedback from students and reflect on their own practices by providing non-evaluative coaching and concrete strategies for improvement.

Put it Into Practice

Teacher Self-Assessment: SEL Through Distance Learning

Use the checklist below to help teachers self-assess strengths and areas to develop as they promote SEL through distance learning and at-home assignments.

For All Ages

- ☐ I am reaching out to students individually and communicating that I value their contributions.
- ☐ I follow up with students on topics that are important to them to show them they are known and cared for.
- ☐ I facilitate virtual class meetings, collaborative classroom websites or forums, or other community-building activities to cultivate a culture of personal connection and belonging.
- ☐ Learning activities and projects link to students' lived experiences, frames of reference, and issues that are important to them.
- ☐ Learning activities activate students' self- and social awareness by asking them to identify feelings, reflect on their experiences, and talk through topics with family members or peers.
- ☐ Learning activities affirm students' diverse identities and cultures, and students have opportunities to share and learn about each other's lives.

>> continued to the next page

Especially for Upper Elementary and Secondary Students

- ☐ I coordinate learning activities in which students are able to engage in small-group discussions, cooperate, and problem-solve with peers.
- ☐ Assignments include open-ended questions to surface student thinking and probe students to elaborate on their responses.
- ☐ After completing a project, students reflect on what made their work successful or challenging and make a plan for improvement.
- ☐ I regularly request and receive feedback from students about how distance learning is going and how it could be improved.

- **Collect and act on data around students who are disengaged or chronically absent.** One of the most critical tasks during the transition to the new school year will be supporting every student, particularly those whose needs were not fully met before COVID-19. For students who have not regularly attended classes, develop a plan that addresses the root causes of their absences and leverages family and community partners to double-down on individual outreach and relationship-building. This may include revising existing policies and practices that may have inequitable or detrimental impact on students, such as punitive or exclusionary discipline practices that can contribute to student disengagement or retraumatize students.

Put it Into Practice

Examining Transition Data With an Equity Lens

Regularly review data on progress with an eye toward how decisions during the transition impact equity and outcomes. You may want to review data such as:

- Student, family, and staff interviews or surveys (their responses as well as data on who hasn't responded)
- Outreach to families—who has and hasn't been successfully contacted by school staff, who has and hasn't accessed available supports such as meal assistance, technology distribution, etc.
- Student attendance, participation, and completion with at-home learning

Also disaggregate these data by subgroups, such as by race, socioeconomic status, language learner, immigration status, LGBTQ identity, or any other subgroups.

Use a data reflection protocol or consider the following questions as your team learns from this data:

- What do you see in the data, including any differences/disparities between groups, that may indicate inequities in school transition processes and supports?
- What additional information could help you interpret this data? Consider whose voices and experiences are not represented and any biases or blind spots that might exist as you interpret the data. Often, gaining additional student perspectives can help make sense of the data.
- What does the data suggest about how well social and emotional supports are meeting the needs of all students, families, and staff during this transition?
- How can we make changes or innovate to better meet needs, ensure equitable resources and support, and monitor the impact of the transition on student outcomes?

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CONCLUSION

The coming months will mark continued transitions for everyone in school communities as they prepare for an academic year that offers new types of relationships, learning, and operations. The transition may bring excitement, anxiety, concern, and other complex emotions as students wonder what the return to classrooms will look like, anticipate reconnecting with peers and teachers, and look forward to engaging in person in supportive learning environments. This moment will also call upon educators to intentionally and relentlessly foster emotional and physical safety and a sense of belonging throughout their school community.

High-quality SEL implementation provides students and adults an opportunity to continue cultivating critical skills—such as empathy and compassion, self-regulation, stress management, communication, collaboration—that they will need not only to manage their experiences during the pandemic, but also to be caring, contributing members of their communities. SEL can also help educators reflect on how this experience has shaped our understanding of what and how we teach in schools, as well as the conditions that fully and equitably support student learning.

With the possibility of intermittent closures or other changes in the coming years, the adjustment back to school is most likely a long-term process that will require a sustained approach for ensuring that all students, families, and staff have the relationships, resources, and support they need to thrive. We encourage school leaders, with the support of states and districts, to plan for immediate needs while also beginning to consider how to sustain the focus on SEL over the long-term.

ACKNOWLEDGMENTS

CASEL is grateful for the insights and thought partnership from the following organizations, which are also collaborating on an accompanying resource with additional recommendations, resources, and tools to help school leaders support and sustain SEL throughout and beyond the pandemic:

AASA - the School Superintendents Association, American Institutes of Research, American School Counselors Association, Arlington Public Schools, Building Equitable Learning Environments Network, Carnegie Corporation of New York, CASEL Board Program Committee, CASEL Collaborating Districts Initiative, CASEL Collaborating States Initiative, Chiefs for Change, Council of Chief State School Officers, Forum For Youth Investment, Bill & Melinda Gates Foundation, Learning Policy Institute, National Association of Elementary School Principals, National Association of School Psychologists, National Association of Secondary School Principals, National Equity Project, National School Boards Association, Northwest Evaluation Association, PERTS, Raikes Foundation, Transforming Education, Trauma Learning Policy Institute, Turnaround for Children, University of California - Los Angeles, University of Chicago Consortium on School Research, The Wallace Foundation, and X-SEL Labs

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CONCLUSION

The COVID-19 pandemic has resulted in a major disruption in the education system. It has literally forced the system to operate in an unfamiliar manner which required rapid creative and innovative responses to ensure the continued education of all students. It also underscored the need for a digital transformation of administration as well as the teaching and learning processes at the school level. Notwithstanding the gaps, the education system remains resilient, owing to the agency of its stakeholders and partners.

As the system shifts into the recovery, reintegration and reform stage of the Education in Emergencies Response Plan, this manual represents **version 1** of the school reopening guidelines, developed as a guide to assist school boards and school administrators to prepare their schools for reopening. The MoEYI, adapted the Framework for the Reopening of Schools developed by UNESCO, UNICEF, the World Bank and the World Food Programme (April 2020), and provided guidelines categorized into three phases: Phase 1- the phase prior to school re-opening, Phase 2 - partial or phased reopening and Phase 3 – all schools reopened. The guidelines are in no way exhaustive nor prescriptive but have been reviewed by the Ministry of Health and Wellness and other stakeholders to ensure they are in keeping with the requisite Government of Jamaica Requirements. School boards and school administrators, may make the necessary adjustments as their contexts dictate and in consultation with the Ministry of Education, Youth and Information. It must also be noted that the implementation of these guidelines is subject to change depending on directives given by the Ministry of Health and Wellness and the Government of Jamaica.

MINISTRY
OF
EDUCATION, YOUTH & INFORMATION
Every Child Can Learn, Every Child Must Learn

IMPLEMENTATION PLAN FOR THE REOPENING OF EDUCATIONAL INSTITUTIONS, JUNE 2020

FOCUS AREAS	MAJOR ACTIVITIES	RESPONSIBLE AGENCY/TEAM	RESPONSIBLE INDIVIDUAL	TIMELINE	REMARKS
Pre Implementation	Conduct and support stakeholder consultations with staff, board of governors, parents, students, Ministry of Health and Wellness, transportation operators, the Jamaica Constabulary Force and all relevant stakeholders to discuss resumption activities	Ministry of Education Youth and Information	Minister of Education, Permanent Secretary, CEO, DCEO and other ministry personnel	May -June 2020	
	Utilise local communication channels to include local radio stations; newspapers, church audiences; taxi associations; parent groups to assist in	Ministry of Education, Principals, Parents, Board members	Communication Team, Marlon Williams, Board Chairmen	June 2020	

FOCUS AREAS	MAJOR ACTIVITIES	RESPONSIBLE AGENCY/TEAM	RESPONSIBLE INDIVIDUAL	TIMELINE	REMARKS
	disseminating information regarding operation protocols				
	Town Criers and Radio - Radio Jamaica etc. to ensure information reaches households without online and television access	Resumption Campaign team	Resumption Campaign chairman	June 2020	
	Sharing Operational Protocols for students, teachers, parents while at school using online messaging platforms - WhatsApp, Facebook etc.; Schools SMS, My School Jamaica Provide weekly updates to relevant stakeholders concerning operational protocols	Resumption Campaign Chair- MOEYI Schools assigned teams Ministry of Education Youth Information Principal, VP	Communication campaign team Teachers parents Principals, PTA chairs, VP	May 2020 onward Commencing June 2020	
Psychosocial Support	Disseminate MoEYI COVID Etiquette Tool Kit (infographics/pamphlets/brochures) Facilitate psychosocial support sessions for stakeholder groups-	Guidance ACEO and SEO and team, Social Worker, Nurse MOEYI	Parents, Teachers, Guidance Counsellor	June 2020 ongoing	

FOCUS AREAS	MAJOR ACTIVITIES	RESPONSIBLE AGENCY/TEAM	RESPONSIBLE INDIVIDUAL	TIMELINE	REMARKS
	students, parents , teachers, principals, board chairmen Coordinate Individual & Group Counselling Sessions Webinars/Virtual or online sensitization sessions	Guidance Counsellors, Principal, Guidance Officers, Vice Principals Principals, Vice Principals, Guidance Officers	Guidance Team Guidance Counsellors, Vice Principals Teacher, assigned	ongoing	
Grant Support	Compile internal budget to manage expenditure of grant/funds in ● Providing sanitization and cleaning resources ● Providing Personal Protective Equipment for respective staff	Principal, Board	Bursar, Assistant Bursar, Teacher	May 2020 July 2020	
Structure of School Days	Prepare and submit operational management plan to reflect: ● modified operational hours (arrival/dismissal)	Administrators, Board Principal, VP	Principals, Vice Principal, Senior Teacher,	May 2020 & July 2020	Refer to Core Curriculum recommended Timetable Physical activity breaks should include light

FOCUS AREAS	MAJOR ACTIVITIES	RESPONSIBLE AGENCY/TEAM	RESPONSIBLE INDIVIDUAL	TIMELINE	REMARKS
	● modified timetable (blended modality for instruction) ● modified scheduling of group activities (devotion, break, lunch) ● student rotation plan (where applicable) ● relax school rules to accommodate parents requests to comply with self-management protocols for example, cutting of hair for male students may compromise health; reviewing "no cell phone policy" to facilitate parents monitoring of students	Dean Of Discipline , Teacher Board , Principal, VP	Dean of Discipline , Teacher		stretching, outdoor breathing (Jamaica Move in schools kits)
· **Pupil Teacher Ratio**	· Manage student assignment to facilitate maximum 15 students for all activities (labs, all teaching and learning activities)	Principal, VP board	DOD, VP, assigned task		

FOCUS AREAS	MAJOR ACTIVITIES	RESPONSIBLE AGENCY/TEAM	RESPONSIBLE INDIVIDUAL	TIMELINE	REMARKS
· **Staffing**	· Conduct staff audit to ● ascertain resumption status of staff (health status) ● identify staffing gaps ● determine action for engaging/redeployment	Principal, VP School Boards	VP, senior acher	ay 2020	
Safety and Security – protocols for managing students movement	**Update safety and security plan to reflect** ● a hygienic/sanitation component for approval by the MoEYI and Ministry of Health and Wellness ● protocols to enforce compliance ● monitoring to prevent compromising safety measures ● social distancing guidelines/marshalling movement of staff and students ● practising personal hygiene and self-management	● Principals, Vice Principals ● DODs Education Officer DOD, Teachers	Dean of Discipline, EO principal Teachers, DOD	May 2020 July 2020	Teachers, administrative and ancillary staff can be scheduled to assist with marshalling – subject to availability. Printable signs are available on the MOH websites and MoEYI bulletins Where school nurses are 65 years and over (retired) collaborate with

FOCUS AREAS	MAJOR ACTIVITIES	RESPONSIBLE AGENCY/TEAM	RESPONSIBLE INDIVIDUAL	TIMELINE	REMARKS
	• identify students from quarantine communities to facilitate sitting of examination based on CXC protocol • liaise with MOH and security forces regarding travelling approval for students in quarantine communities and provide support for monitoring student movement • **operational guidelines for vendors**	Principal MoEYI Safety and Security Director Principal,	Teacher DOD, teacher MOH rep, Nurse, teacher VP		MOH for support as needed. O support
Plant Management – canteens, bathrooms, sanitization stations,	• Audit plant to assess infrastructure readiness for re-opening • Review Facility Management Plan to reflect new sanitization and cleaning protocols for the school • Reassign janitorial staff	• Administrators, Bursars • Plant Manger	Plant Manager, Maintenance personnel June 2020	ay 2020 and ngoing	All shared resources (hand tools, computers, tablets, machines, etc.) must be cleaned in between use. Avoid the use of air conditioners where possible.

FOCUS AREAS	MAJOR ACTIVITIES	RESPONSIBLE AGENCY/TEAM	RESPONSIBLE INDIVIDUAL	TIMELINE	REMARKS
	for effectiveness				
Nutrition support	Work out lunch details/logistics to ● **provide for lunches at the class level** ● cater to **PATH beneficiaries and vulnerable students**	Principals, Bursars, Guidance Counsellors	Ongoing	ngoing	
ICT Support **Provision of ICT devices if possible** **Upgrading of ICT framework within schools**	● Audit ICT framework to assess needs and capacity ● Facilitate Bring Your Own Device policy ● Conduct electricity audit to ensure reliable source of energy ● outline strategies for managing deficiencies	Principal, VP	Teacher	May 2020	Tablet in school initiative

FOCUS AREAS	MAJOR ACTIVITIES	RESPONSIBLE AGENCY/TEAM	RESPONSIBLE INDIVIDUAL	TIMELINE	REMARKS
Infrastructural Support · Use of space · Rationalization of space if necessary	● Prepare plant map to manage classroom spaces ● Establish outdoor classroom spaces where appropriate and in accordance with established protocol	Principal, VP, Bursar	Assigned staff	May 2020	
Boarding schools	F**or institutions with residential facilities/health stations** update guidelines for ● managing illness, quarantine and reporting illness to MOH for staff and students ● student self - management protocols ● sanitization and cleaning ● updating students' contact listing	S School Board, Principal, Bursar, Maintenance supervisors	Nurse, Maintenance supervisors teacher	May 2020 and ongoing	

FOCUS AREAS	MAJOR ACTIVITIES	RESPONSIBLE AGENCY/TEAM	RESPONSIBLE INDIVIDUAL	TIMELINE	REMARKS
Examination Administration	Manage the processes related to examination centre coordination	Administrators /Exam coordinator			
	Develop centre management protocols ○ Total number of candidates sitting, including independent candidates. ○ Number of centres needed per school to maintain social distancing of at least 6ft ○ Possible alternative centres	School / Institution Administrators Principal	Examination teachers Presiding examiner	June 10, 2020	
Assessment for Teaching and Learning	Administration of MoEYI agnostic Tools	Principal	VP, Senior Teacher	August 24, 2020 - September 11, 2020	

FOCUS AREAS	MAJOR ACTIVITIES	RESPONSIBLE AGENCY/TEAM	RESPONSIBLE INDIVIDUAL	TIMELINE	REMARKS
	Marking and collating of grades ɔm Diagnostic examinations	rincipal	VP Teacher assigned	ugust 24, 2020 - ptember 11, 2020	
Special Needs Coordination	Sensitization for Supervisors of Shadows/Shadows (virtual)	Regional Special Needs Coordinators	Teachers coordinators	June 2020	
	Coordinate sensitization of Shadow/Caregivers and Teachers Aides	Principals Special Needs Coordinator	VP or teacher	June 2020	
	Shadows to be provided with PPE	School Administration/Regional Special Needs Coordinators	June 2020	June 2020	
	Diagnostic Assessment IIP Reviews	School Administration IIP Team	IIP reviews	June 2020	
	Teaching and reviewing of COVID 19 Protocols for students with special needs	Principal. Special Needs Coordinator		June 2020	

FOCUS AREAS	MAJOR ACTIVITIES	RESPONSIBLE AGENCY/TEAM	RESPONSIBLE INDIVIDUAL	TIMELINE	REMARKS
Training and Development	Facilitate training/capacity building plan for staff: - Teachers and Guidance Counsellors - Deans of Discipline - Board Chairmen - Ancillary - Administrative Staff Arrange sensitisation sessions for students and parents re COVID19 Protocols and Adjusted School Operations	Principal, Board Building Officer QEC Convenor CREO, HFLE Principals	BO, Teacher	Commencing in May, ongoing through to September June 2020	

FOCUS AREAS	MAJOR ACTIVITIES	RESPONSIBLE AGENCY/TEAM	RESPONSIBLE INDIVIDUAL	TIMELINE	REMARKS
Procurement	Conduct Needs Assessment for Sanitization Resources Prepared and submitted requisition to the Regional Office Monitoring of Inventory to ensure sufficient supply of sanitization resources	Board, Principal Principals	Bursar, Teacher Principal	May 29,2020	
Transportation for Students	Ascertain the transportation arrangement for every child via survey instrument Create a mechanism for parents on PATH and those experiencing severe financial challenges to seek transportation assistance from the school for their child. Prepare and submit income and expenditure statement to determine available funds under the rural school bus programme	Dean of Discipline Teacher Guidance Counsellors Bursars/Principals	Teacher GC, Teacher Bursar Teacher, June 2020	May 2020 May 2020 June 2020	

FOCUS AREAS	MAJOR ACTIVITIES	RESPONSIBLE AGENCY/TEAM	RESPONSIBLE INDIVIDUAL	TIMELINE	REMARKS
	to support transportation service to needy students Generate a list of students who will require transportation assistance to attend classes and external exams. Collate requests for financial support for transportation services for needy students and advance to the Ministry for approval. Establish a monitoring committee to account for students who are absent due to transportation challenges. Establish and operationalize logistics arrangement for shuttle service for needy students	Guidance Counsellors/Administrators School Bursars/Principals Principals Dean of Discipline Principal Dean of Discipline	DoD Teacher Bursar, teacher, principals DOD, principals,	June 2020 June 2020 June 2020 May 2020	
Graduation Ceremonies	Establish protocols for Graduation/Valedictory Ceremony	Principal, Graduation Committee	Graduation committee	September –October 2020	Plans for Graduation ceremonies should be in accordance with the established guidelines

FOCUS AREAS	MAJOR ACTIVITIES	RESPONSIBLE AGENCY/TEAM	RESPONSIBLE INDIVIDUAL	TIMELINE	REMARKS
					issued by the Ministry of Health and Wellness.

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