

COVID-19 Guidance

# Students with Specialized Healthcare Needs

August 20, 2020





The details in this document are subject to change based on direction from the Office of the Chief Medical Officer of Health with input from other health partners such as the IWK Health Centre and the Provincial Pediatric Advisory Group. The measures in this document are based on the best available information, practices, and advice provided at this time.

EECD, RCEs, and the CSAP will continue to follow the advice of the Chief Medical Officer and adjust any plans to re-open schools and deliver education services. All operational plans will be in keeping with these guidelines and any future direction or changes provided by Public Health.

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# 1. INTRODUCTION

When it comes to keeping students safe from COVID-19, the most important thing we can do is limit community spread by following the public health measures in place. Staff also follow direction from occupational health and safety in Regional Centres of Education and CSAP.

Low levels of disease in the community will mean low levels at school. For students with specialized and complex healthcare needs, additional measures may need to be put in place to ensure their safety and the safety of staff who work with them, based on the province's back to school plan's guiding principles of safety, equity, and flexibility. These additional measures will align with public health guidelines for reducing the risk of COVID-19 spread in Nova Scotia communities.

Guidance on these additional measures have been developed in consultation with the IWK Health Centre, Nova Scotia Health Authority, Provincial Pediatric Advisory Group, School Health Partnership Oversight Committee, and the Office of the Chief Medical Officer of Health. They have been further informed by the Nova Scotia Back to School Plan (Appendix A) which provides guidance for the 2020-2021 school year and was directly informed by the COVID-19 Public Health Guidance for Schools (Appendix B).

The steps outlined in this guidance document are intended to support RCEs/CSAP with planning for those with specialized and/or complex healthcare needs that require additional consideration in relation to COVID-19 so that all students have

consistent, reliable, and appropriate connections at school to support their well-being and academic learning. The guidance in this document is based on the current, best available evidence for children and youth, and COVID-19.

Families of students with any pre-existing medical need or condition will have concerns around a safe return to school. Communication around the public health directives so that these students can safely return to school will be very important. RCEs/CSAP will take a relational approach when communicating with families with a goal of having students return to school safely.

Student planning teams are teams that are made up of staff, families, and other professionals as appropriate, that collaborate on decisions regarding instruction, interventions, and evaluation needed to best support individual students, including the developing of health plans of care for students with specialized healthcare needs.

School health partnership nurses identify, co-ordinate and mobilize health, school, and community resources required to assist students who have specific healthcare need(s) and/or medical diagnosis(s) function as independently as possible in the school setting. The school health partnership nurses will play an important role in this process in providing advice and guidance to students, families, and schools and are available by referral through TieNet, the province's confidential student information system.

## 2. SPECIALIZED HEALTHCARE NEEDS

For the purposes of this document, only students with specialized healthcare needs that have identified COVID-19 related implications are being considered for planning purposes. These healthcare needs have been grouped into the three categories below.

These are not the only specialized healthcare needs in Nova Scotia schools, however they are the ones that have been determined to require specific considerations related to transmission of the SARS-CoV-2 virus\* and therefore require more planning as part of the student's specialized health care or individual program plans.

All students who have specialized health care and other individual needs will continue to receive appropriate support when schools re-open. Most of these students will have a written health plan of care located in TieNet, the school-based student education system. The school-based Plans of Care will integrate planned measures to cohort students, appropriate use of PPE and enhanced cleaning to provide additional protections. Some students in the specialized group will require additional monitoring and guidance specific to their unique healthcare needs.

The guidance provided in this document is pursuant to that outlined in the COVID-19 Public Health Guidance for Schools (Pre-Primary -12), July 20, 2020 (Appendix B).



Within the context of low levels of COVID-19 in the community, students with specialized healthcare needs should be at no greater risk of transmitting or acquiring COVID-19 than the general school population.

\*SARS-CoV-2 is the name of the virus while COVID-19 is the name of the disease.

## DAILY SCREENING:

Schools will clearly communicate to all families the need to monitor their children daily for symptoms before sending them to school, as per the Covid-19 Public Health Guidance for Schools (Appendix B).

Schools will give families a copy of Nova Scotia's COVID-19 daily checklist at the beginning of the school year. School staff will keep a copy in the office and at designated drop-off areas.

Staff will review this screening tool requirement with families before the beginning of the school year and regularly throughout the year.

<https://novascotia.ca/coronavirus/docs/Daily-COVID-checklist-en.pdf>

Students with complex health conditions may not present an illness in a typical way. The school health partnership nurse will work with the family and the school planning team to include details on how COVID-19 might look specific to the student and how this will be included as part of their daily screening. This information will be included in the plan of care.

## CATEGORIES:

The following headings group students with specialized healthcare needs into three categories:

1. **Students who require an aerosol generating medical procedure (AGMP)**, (i.e., medication given with a nebulizer or suctioning through a tracheostomy (trach)).
2. **Students who require close contact from school staff for personal care or procedures**, such as students who require assistance and support with toileting, ostomy care, oral and tube feedings, lifts and transfers, mobility. This may also include students who developmentally are not able to follow public health directives and receive individual programming and services in settings other than the common learning environment.
3. **Students who are immunocompromised**, due to medical concerns such as cancer and other diseases/conditions, transplant recipients, or those who require the use of immunosuppressant drugs. There is on-going consultation occurring around how to appropriately plan for students who fall into this category and additional guidance is being developed to help families and student planning teams.

### 3. BACK TO SCHOOL PLAN: FULL OPENING AND PARTIAL OR BLENDED

Nova Scotia's Back to School Plan, July 22, 2020 outlines three COVID – 19 responses:

- **FULL OPENING**
- **PARTIAL OR BLENDED**
- AT HOME LEARNING



The level of response will be based on community epidemiology and level of community spread of the disease, at the direction of public health at the level of a school or schools.

#### **FULL OPENING**

With non-existent or limited community transmission, in-school classes will resume for all students. Additional measures will be put in place to ensure the health and safety of students and staff, including cohorting or grouping, **increased handwashing**, mandatory mask use for students in Grades 4 to 12 when physical distancing of two metres isn't possible and other procedures the Back to School Plan.

#### **PARTIAL OR BLENDED RESPONSE**

This response will be implemented at the direction of Public Health for the school or schools requiring this level of response due to community transmission. Students in P-8 will continue in school learning. Students in Grades 9-12 will move to remote learning, with partial in-school programming. Some students with IPPs or those who require additional support will be able to attend school on a full-time basis, as determined by the student planning team and the school principal. This will focus on students who have IPPs with a life skills focus across multiple subject areas. If there is increased community transmission of COVID-19, consideration should be given on an individual basis about whether the school setting remains the best place to be for students who require AGMPs and those who are immunocompromised.

Specialized Healthcare Need	Considerations
<p>Students who require AGMP</p> <p><b>Please note:</b> nebulizer of any liquid (including saline and medication) is an AGMP.</p> <p>Percussion alone is not an AGMP.</p>	<p>The school health partnership nurse will review plans of care involving AGMPs in consultation with the school planning team, the family, and the primary care provider.</p> <p>Plans of care should be established to minimize performing AGMPs at school.</p> <p>If possible, plans of care that require students to have a nebulizer should be shifted to an MDI (with aero chamber as required) to manage their condition. Whether or not this is appropriate is a discussion for families to have with their primary care providers prior to the start of the year. School health partnership nurses can help facilitate this discussion.</p> <p>If an AGMP is required during the school day, it should be done in a separate room. When local epidemiology is low, if a separate room is not available, the procedure may be performed in a designated area that will maximize the distance from other students and enable appropriate cleaning post procedure.</p> <p>Teacher assistants and teachers will wear non-medical masks. Gowns are not required. Gloves may be used for suctioning, however, they are not needed for administering nebulized medication.</p> <p><b>Additional Active Screening:</b></p> <p>For students who require AGMPs at school it is recommended that a daily symptom screening communication protocol be established between home and school.</p> <p>The communication protocol, determined by the student planning team, should be individualized to reflect what is practical, logical, and effective for both home and school.</p> <p>Examples could include:</p> <ul style="list-style-type: none"> <li>• Daily phone call from school staff to parent/guardian</li> <li>• Parent/guardian signs off on a checklist and send to school daily</li> <li>• Logbook/agenda used to communicate daily that the screening has been completed</li> </ul> <p>As some students with complex health conditions do not present with illness in a typical way, the school health partnership nurse will work with the family and the primary care physician to include details on what the symptoms of COVID-19 would be for that student. This will be included in the plan of care and in the daily screening.</p>



Specialized Healthcare Need	Considerations
	<p><b>Personal Protective Equipment (PPE):</b></p> <p>PPE should be used based on a point-of-care risk assessment driven by the clinical status of the student.</p> <p>For a well student, routine practices are appropriate, although gloves may be worn in the event the care providers hands are likely to come in contact with secretions.</p> <p>Masks will be worn during AGMPs.</p> <p>If a student becomes acutely unwell at school and has clinical criteria compatible with COVID-19 at school, the parents/guardians should be called to pick the student up and will be asked to call 811 or their healthcare provider to determine if COVID-19 testing is required. AGMPs should not be performed unless absolutely necessary.</p> <p>In the event an AGMP needs to be performed, it should be done in a separate room, with the door closed while arrangements are being made for the student to be picked up from school. The number of people present in the room at the time the AGMP is performed should be minimized.</p> <p>Airborne/contact isolation is required for all those in the room. Each person in the room would need to wear an N95 respirator mask, eye protection, gown, and gloves. As each person in the room would need to wear this PPE, minimizing the number of people in the room is important.</p> <p>After the AGMP is complete and the student has left, the room should be left vacant with the door closed for two hours. After two hours cleaning can be performed with appropriate cleaners (see PHAC website).</p>

<b>Specialized Healthcare Need</b>	<b>Considerations</b>
<p>Students who require close contact for personal care or a procedure.</p>	<p>When physical distancing is not possible, staff and students will wear a non-medical mask</p> <p>Gloves, non-medical masks, and face shields should be worn when staff are working directly with students who:</p> <ul style="list-style-type: none"> <li>• have continuous secretions</li> <li>• are unable to control their cough</li> <li>• spit and/or bite</li> <li>• require hand feeding</li> <li>• require NVCI protocols</li> </ul> <p>The requirements should be detailed in the student's plan of care or individual program plan.</p>
<p>Students who are immunocompromised</p> <p>See Appendix D: <b>Immunocompromised: Common Examples</b></p>	<p>School health partnership nurses and student services coordinators, or designate(s), as determined by the RCE/CSAP, should review specialized healthcare plans for students with specialized and complex healthcare needs that may be associated with a higher risk of severe COVID-19 (or severe respiratory infection).</p> <p>Families may also consult with their student's primary care physician for guidance and direction regarding the student's healthy and safe return to school.</p> <p>School planning team meetings will be held as required to review specialized healthcare plans for the safe return to school</p> <p>Every student will have access to quality instruction and supports. This includes students with exceptional circumstances such as pre-existing or new specialized and/or complex medical needs.</p>

## 4. BACK TO SCHOOL PLAN: AT HOME LEARNING

Nova Scotia's Back to School Plan, July 22, 2020 outlines three COVID – 19 responses:

- FULL OPENING
- PARTIAL OR BLENDED
- **AT HOME LEARNING**



The level of response will be based on community epidemiology and level of community spread of the disease, at the direction of public health at the level of a school or schools.

The province will move to at home learning only at the direction from the Chief Medical Officer of Health under the Health Protection order. There is provision for a fluid response in that the Department of Education and Early Childhood Development, as directed by Public Health, can move to at home learning in response to an outbreak of COVID-19, for an individual school, a family of schools, or a region, while keeping the rest of the schools operating under full or partial/ blended responses.

The at home learning plan delivers remote teaching and learning for all students affected. It also includes additional supports for students and families such as SchoolsPlus facilitators, mental health clinicians, speech language pathologists, school counsellors, school psychologists, and others through a secure and confidential tele-education platform.

A plan will be operationalized that establishes parameters for this option including guidance on the use of accessible and assistive technology (learning devices) and other related programming and services supports.

As with the other two responses, every effort will be made to ensure that students are not disadvantaged by COVID-19, that trauma-informed practices are utilized and that close communication with families are integral components of planning. Schools will listen to and affirm students and family's experiences and identities in order to be flexible and responsive to individual needs.

There will be a focus on equitable support for groups who have been historically marginalized and racialized (African Nova Scotian and Mi'kmaq students) and for other groups who have been traditionally under-represented and underserved. This includes, but is not limited to those struggling with poverty, students with disabilities, newcomers and immigrants to our province, and members of the LGBTQ2S+ community.

For students who require AGMP or are immunocompromised, their specialized healthcare needs will be coordinated through their primary care physician and healthcare team.

There is not a 'one size fits all' in terms of at home learning and it will look different from region to region, school to school and student to student, in relation to the unique needs of each student. We recognize that needs will change over time and all options will be evaluated and adjusted on a regular basis.

For students who receive the support of teacher assistants and/CYCPs when attending school, EECD, RCEs, and CSAP will work with TA/EA and CYCP unions to put a plan in place to support those who require highly specialized, individualized programming and services in their homes and/or school settings.

## 5. EXCEPTIONAL CIRCUMSTANCES

If a student has a specialized healthcare need which impacts their ability to attend school in-person due to potential COVID-19 complications, their parent/guardian should contact the school principal. This can include other chronic conditions such as certain respiratory and cardiac conditions that may be considered higher risk.

The school planning team will meet with the family to discuss school level supplemental supports, in addition to the standard public health directives, that may be used to allow the student to safely attend in person.

If after reviewing information from medical specialist(s) and in consultation with the family and the school health partnership nurse, the student planning team determines that the student cannot safely return to school, the principal and RCEs/CSAP will ensure that an individual plan is developed to support the student through a remote learning plan.

Remote learning plans may contain a combination of options such as at-home tutoring, Nova Scotia Virtual School, access to Google Classrooms, etc. and will be determined by the school team, in consultation with the student and family.

There will be regional variation in terms of what at home learning will look like, and it should be noted that remote learning plans are not the same as home schooling. More details on this process will be given to families as schools re-open for the 2020-2021 school year.

## 6. APPENDICES

- A. <https://novascotia.ca/coronavirus/docs/back-to-school-plan.pdf>
- B. <https://www.ednet.ns.ca/backtoschool>
- C. <https://novascotia.ca/coronavirus/docs/Daily-COVID-checklist-en.pdf>
- D. **Immunocompromised – Common Examples**

### APPENDIX D: IMMUNOCOMPROMISED – COMMON EXAMPLES

A person is considered immunocompromised if they have a specific health condition and/or are on a medication that impacts the functioning of their immune system, which puts the person at an increased risk for getting an infection. Immunocompromised status is a spectrum, where some people, compared to healthy children and youth, may only have a small increased risk of infection and others may have a large increased risk of infection.

While there is evidence suggesting that generally people who are immunocompromised and infected with SARS-CoV-2 have higher rates of hospitalization and/or severe disease, to date there isn't strong evidence to suggest that children and youth are at higher risk from SARS-CoV-2 as compared to other respiratory

viruses like influenza. This includes children and youth who are immunocompromised. We recognize that data relating to this group of children and youth is potentially limited, as they have been more likely to follow public health measures such as physical distancing, hand hygiene and mask wearing.

Given the importance of school attendance on children's physical, social, and emotional well-being and while the number of cases of COVID-19 in the Maritimes remains low, attendance is encouraged for all children. As the pandemic continues to evolve or if the level of virus in communities changes, guidance may change. Additional information related to children who are immunocompromised will be available from health specialists at the IWK.

It is acknowledged that there are some children with medical complexities who cannot be in school at this time, just as they would not be in attendance pre-COVID.

Conditions that make a person immunocompromised include:

- cancer
- chemotherapy
- radiation therapy
- transplant (organ or hematologic)
- HIV/AIDS
- immunosuppressive medication including
  - chronic oral or IV steroid use:  
    >20mg/d for > 2 weeks for adults or  
    >2 mg/kg/day for child
  - cytotoxic drugs
  - calcineurin inhibitors
  - biological response modifiers
  - antibodies that target lymphocytes
- primary (i.e. congenital) immune deficiency

**ADDITIONAL CONSIDERATIONS:**

- A student who has asthma and takes a daily inhaled corticosteroid is not considered immunocompromised.
- A student with diabetes that is well managed is not considered immunocompromised